

**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Mr Berlia Vikash Kumar MRN : 2015000000945 Gender/Age : MALE , 36y (15/11/1986)

Collected On : 29/07/2023 09:03 AM Received On : 29/07/2023 11:58 AM Reported On : 29/07/2023 04:33 PM

Barcode : 022307290480 Specimen : Whole Blood - ESR Consultant : Dr. Priya S(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903914388

**HEMATOLOGY**

Test	Result	Unit	Biological Reference Interval
<b>Erythrocyte Sedimentation Rate (ESR)</b> (Westergren Method)	<b>35 H</b>	mm/1hr	0.0-10.0

**Interpretation Notes**

- ESR high - Infections, chronic disorders,, plasma cell dyscrasias.

**DISCLAIMER:All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert****COMPLETE BLOOD COUNT (CBC)**

Haemoglobin (Hb%) (Photometric Measurement)	14.5	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	4.84	million/ $\mu$ l	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	41.6	%	40.0-50.0
MCV (Mean Corpuscular Volume) (Derived)	85.8	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	29.9	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	<b>34.9 H</b>	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	13.4	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	260	$10^3$ / $\mu$ L	150.0-450.0
Mean Platelet Volume (MPV)	8.3	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	5.0	$10^3$ / $\mu$ L	4.0-10.0

**DIFFERENTIAL COUNT (DC)**

Neutrophils (VCS Technology Plus Microscopy)	50.0	%	40.0-75.0
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Patient Name : Mr Berlia Vikash Kumar MRN : 2015000000945 Gender/Age : MALE , 36y (15/11/1986)			
Lymphocytes (VCS Technology Plus Microscopy)	35.2	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	9.6	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	4.5	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.7	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	2.5	$\times 10^3$ cells/ $\mu$ l	2.0-7.0
Absolute Lymphocyte Count (Calculated)	1.76	$\times 10^3$ cells/ $\mu$ l	1.0-3.0
Absolute Monocyte Count (Calculated)	0.48	$\times 10^3$ cells/ $\mu$ l	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.23	$\times 10^3$ cells/ $\mu$ l	0.02-0.5
Absolute Basophil Count (Calculated)	0.04	-	-

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

#### Interpretation Notes

- Haemoglobin , RBC Count and PCV: If below reference range, indicates Anemia. Further evaluation is suggested .  
RBC Indices aid in typing of anemia.
- WBC Count: If below reference range, susceptibility to infection.  
If above reference range- Infection\*  
If very high in lakhs-Leukemia
- Neutrophils -If above reference range-acute infection, mostly bacterial
- Lymphocytes -If above reference range-chronic infection/ viral infection
- Monocytes -If above reference range- TB,Typhoid,UTI
- Eosinophils -If above reference range -Allergy,cough,Common cold,Asthma & worms
- Basophils - If above reference range, Leukemia, allergy
- Platelets: If below reference range- bleeding disorder, Dengue, drug- induced, malignancies
- \* In bacterial infection with fever total WBC count increases.  
Eg Tonsillitis,Sinusitis,Bronchitis,Pneumonia,Appendicitis,UTI -12000-25000 cells/cumm.
- In typhoid and viral fever WBC may be normal.

**DISCLAIMER:All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert.**



Dr. Shalini K S  
DCP, DNB, Pathology  
Consultant

### BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>Fasting Blood Sugar (FBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	89	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020
<b>Post Prandial Blood Sugar (PPBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	104	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020
<b>HBA1C</b>			
HbA1c (HPLC NGSP Certified)	5.3	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020
Estimated Average Glucose (Calculated)	105.41	-	-

#### Interpretation:

- HbA1C above 6.5% can be used to diagnose diabetes provided the patient has symptoms. If the patient does not have symptoms with HbA1C>6.5%, repeat measurement on further sample. If the repeat test result is <6.5%, consider as diabetes high risk and repeat measurement after 6 months.
- HbA1C measurement is not appropriate in diagnosing diabetes in children, suspicion of type 1 diabetes, symptoms of diabetes for less than 2 months, pregnancy, hemoglobinopathies, medications that may result sudden increase in glucose, anemia, renal failure, HIV infection, malignancies, severe chronic hepatic, and renal disease.
- Any sample with >15% should be suspected of having a haemoglobin variant.

### SERUM CREATININE

Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.80	mg/dL	0.66-1.25
eGFR (Calculated)	109.4	mL/min/1.73m <sup>2</sup>	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodynamically unstable patients eGFR is not applicable for less than 18 years of age.

Patient Name : Mr Berlia Vikash Kumar MRN : 2015000000945 Gender/Age : MALE , 36y (15/11/1986)			
<b>Blood Urea Nitrogen (BUN)</b> (Endpoint /Colorimetric – Urease)	<b>8 L</b>	mg/dL	9.0-20.0
<b>Serum Uric Acid</b> (Colorimetric - Uricase,Peroxidase)	6.2	mg/dL	3.5-8.5
<b>LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)</b>			
<b>Cholesterol Total</b> (Colorimetric - Cholesterol Oxidase)	166	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
<b>Triglycerides</b> (Colorimetric - Lip/Glycerol Kinase)	106	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
<b>HDL Cholesterol (HDLC)</b> (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	40	mg/dL	40.0-60.0
<b>Non-HDL Cholesterol</b> (Calculated)	126.0	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
<b>LDL Cholesterol</b> (Colorimetric)	<b>101 L</b>	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
<b>VLDL Cholesterol</b> (Calculated)	21.2	mg/dL	0.0-40.0
<b>Cholesterol /HDL Ratio</b> (Calculated)	4.2	-	0.0-5.0
<b>LIVER FUNCTION TEST(LFT)</b>			
<b>Bilirubin Total</b> (Colorimetric -Diazo Method)	<b>1.70 H</b>	mg/dL	0.2-1.3
<b>Conjugated Bilirubin (Direct)</b> (Dual Wavelength - Reflectance Spectrophotometry)	0.00	mg/dL	0.0-0.3
<b>Unconjugated Bilirubin (Indirect)</b> (Calculated)	<b>1.7 H</b>	mg/dL	0.0-1.1
<b>Total Protein</b> (Colorimetric - Biuret Method)	8.00	gm/dL	6.3-8.2
<b>Serum Albumin</b> (Colorimetric - Bromo-Cresol Green)	4.90	gm/dL	3.5-5.0
<b>Serum Globulin</b> (Calculated)	3.1	gm/dL	2.0-3.5
<b>Albumin To Globulin (A/G)Ratio</b> (Calculated)	1.59	-	1.0-2.1

Patient Name : Mr Berlia Vikash Kumar MRN : 2015000000945 Gender/Age : MALE , 36y (15/11/1986)

SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	31	U/L	17.0-59.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	40	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	85	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide ( Szasz Method))	32	U/L	15.0-73.0

#### Interpretation Notes

- Indirect Bilirubin result is a calculated parameter (Indirect Bilirubin = Total Bilirubin - Direct Bilirubin). Indirect bilirubin result includes the delta bilirubin fraction also. Delta Bilirubin is the bilirubin which is covalently bound to albumin. Delta Bilirubin is not expected to be present in healthy adults or neonates.

#### THYROID PROFILE (T3, T4, TSH)

Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence)	1.44	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence)	10.2	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence)	2.578	µIU/mL	0.4-4.049

#### Interpretation Notes

- TSH levels are subjected to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% , hence time of the day has influence on the measured serum TSH concentrations. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy. Unbound fraction ( Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration.



Mrs. Latha B S  
MSc, Mphil, Biochemistry  
Incharge, Consultant Biochemistry



Dr. Anushre Prasad  
MBBS,MD, Biochemistry  
Consultant Biochemistry

Patient Name : Mr Berlia Vikash Kumar MRN : 2015000000945 Gender/Age : MALE , 36y (15/11/1986)

#### CLINICAL PATHOLOGY

Test	Result	Unit
<b>Urine For Sugar (Fasting)</b> (Enzyme Method (GOD POD))	Not Present	-



Dr. Deepak M B  
MD, PDF, Hematopathology  
Consultant

#### NARAYANA HRUDAYALAYA BLOOD CENTRE

Test	Result	Unit
<b>BLOOD GROUP &amp; RH TYPING</b>		
Blood Group (Column Agglutination Technology)	O	-
RH Typing (Column Agglutination Technology)	Positive	-



Dr. Prathip Kumar B R  
MBBS,MD, Immunohaematology & Blood Transfusion  
Consultant

#### CLINICAL PATHOLOGY

Test	Result	Unit
<b>Urine For Sugar (Post Prandial)</b> (Enzyme Method (GOD POD))	Not Present	-

--End of Report--

Hema S

Dr. Hema S  
MD, DNB, Pathology  
Associate Consultant

**Note**

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.  
(Lipid Profile, -> Auto Authorized)  
(CR, -> Auto Authorized)  
(, -> Auto Authorized)  
(Uric Acid, -> Auto Authorized)  
(Blood Urea Nitrogen (Bun), -> Auto Authorized)  
(Fasting Blood Sugar (FBS), -> Auto Authorized)  
(Post Prandial Blood Sugar (PPBS) -> Auto Authorized)



**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Mr Berlia Vikash Kumar MRN : 2015000000945 Gender/Age : MALE , 36y (15/11/1986)

Collected On : 29/07/2023 09:03 AM Received On : 29/07/2023 12:11 PM Reported On : 29/07/2023 01:41 PM

Barcode : 032307290142 Specimen : Urine Consultant : Dr. Priya S(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903914388

**CLINICAL PATHOLOGY**

Test	Result	Unit	Biological Reference Interval
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**URINE ROUTINE & MICROSCOPY****PHYSICAL EXAMINATION**

Colour	Yellow	-	-
Appearance	Not Present	-	-

**CHEMICAL EXAMINATION**

pH(Reaction) (pH Indicator Method)	6.5	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.006	-	1.002 - 1.030
Protein (Automated Protein Error Or Ph Indicator)	Not Present	-	Not Present
Urine Glucose (Enzyme Method (GOD POD))	Not Present	-	Not Present
Ketone Bodies (Nitroprusside Method)	Not Present	-	Not Present
Bile Salts (Azo Coupling Method)	Not Present	-	Not Present
Bile Pigment (Bilirubin) (Azo Coupling Method)	Not Present	-	Not Present
Urobilinogen (Azo Coupling Method)	Normal	-	Normal
Urine Leucocyte Esterase (Measurement Of Leukocyte Esterase Activity)	Not Present	-	Not Present
Blood Urine (Peroxidase Reaction)	Not Present	-	Not Present
Nitrite (Gries Method)	Not Present	-	Not Present

**MICROSCOPIC EXAMINATION**

Pus Cells	0.3	/hpf	0-5
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Patient Name : Mr Berlia Vikash Kumar MRN : 2015000000945 Gender/Age : MALE , 36y (15/11/1986)

RBC	0.3	/hpf	0-4
Epithelial Cells	0.1	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.00	/hpf	0-1
Bacteria	1.0	/hpf	0-200
Yeast Cells	0.0	/hpf	0-1
Mucus	Not Present	-	Not Present

#### Interpretation Notes

- Since the analytical methodology of Urine Microscopy is Flow cytometry based and FDA approved the results of automated urine microscopy which includes RBCs, WBCs Epithelial cells etc are being reported in decimal fraction. Rounding off the value to nearest whole number is suggested.

--End of Report--



Dr. Deepak M B  
MD, PDF, Hematopathology  
Consultant

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



<b>Patient Name</b>	VIKASH MR.BERLIA	<b>Requested By</b>	EHP
<b>MRN</b>	20150000000945	<b>Procedure Date Time</b>	29-07-2023 10:25
<b>Age/Sex</b>	36Y 8M/Male	<b>Hospital</b>	NH-JAYANAGAR

**CHEST RADIOGRAPH (PA VIEW)**

**CLINICAL DETAILS:** For health checkup.

**FINDINGS:**

- The lung fields and bronchovascular markings appear normal.
- The cardiac size is within normal limits.
- Mediastinum and great vessels are within normal limits.
- Trachea is normal and is central. The hilar shadows are unremarkable.
- The costo-phrenic angles are clear. No evidence of pleural effusion or pneumothorax.
- The visualized bones and soft tissue structures appear normal.
- Both the diaphragmatic domes appear normal.

**IMPRESSION:**

- **No significant abnormality detected.**



Dr. Rahul G Ambi  
Senior Registrar

\* This is a digitally signed valid document. Reported Date/Time: 29-07-2023 12:45

*This report has been generated from **NH Teleradiology 24/7**, a service of Narayana Health*

*-- End of Report --*

Page 1 of 1

**Patient Name** : Mr. Berlia Vikash Kumar  
**Age** : 36 Years  
**Referring Doctor** : EHP

**Patient ID** : 2015000000945  
**Sex** : Male  
**Date** : 29.07.2023

**ULTRASOUND ABDOMEN AND PELVIS**

**FINDINGS:**

**Liver** is normal in size and shows **mild increased** echopattern. No intra or extra hepatic biliary duct dilatation.

**Portal vein** is normal in size, course and caliber. **CBD** is not dilated.

**Gall bladder** is normal without evidence of calculi, wall thickening or pericholecystic fluid.

**Pancreas** to the extent visualized, appears normal in size, contour and echogenicity.

**Spleen** is **normal** in size, shape, contour and echogenicity. No evidence of mass or focal lesions.

**Right Kidney** is normal in size (measures 10.0 cm in length & 1.6 cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of hydronephrosis. **Calculus measuring 3mm in the mid pole**

**Left Kidney** is normal in size (measures 10.7 cm in length & 1.6 cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

**Retroperitoneum** – Obscured by bowel gas.

**Urinary Bladder** is well distended. Wall thickness is normal. No evidence of calculi, mass or mural lesion.

**Prostate** is normal in echopattern and normal in size, measures 3.3x3.2x3.5 cm Volume -20 cc.

**Fluid** - There is no ascites or pleural effusion.

**IMPRESSION:**

- **Grade I Fatty Liver.**
- **Right Renal Calculus.**



**Dr B S Ramkumar 35772**  
**Consultant Radiologist**

**Disclaimer:**

Note: Investigations have their limitations. Solitary pathological/Radiological and other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly. This Report is not for Medico - Legal Purposes.



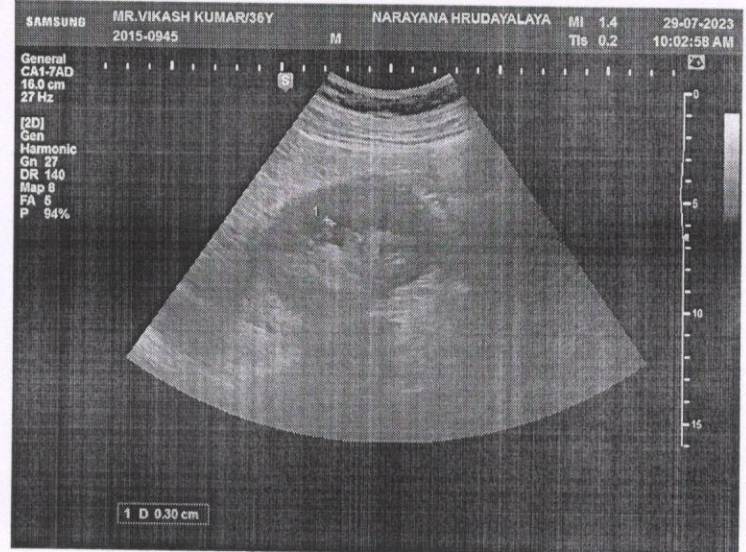
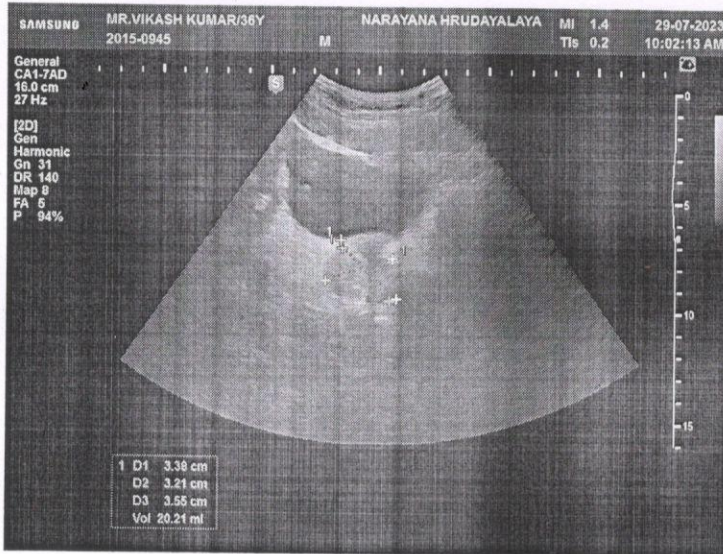
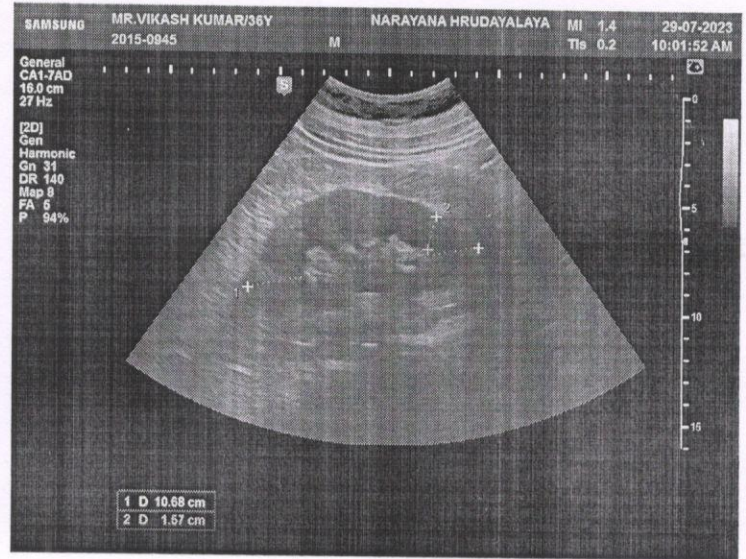
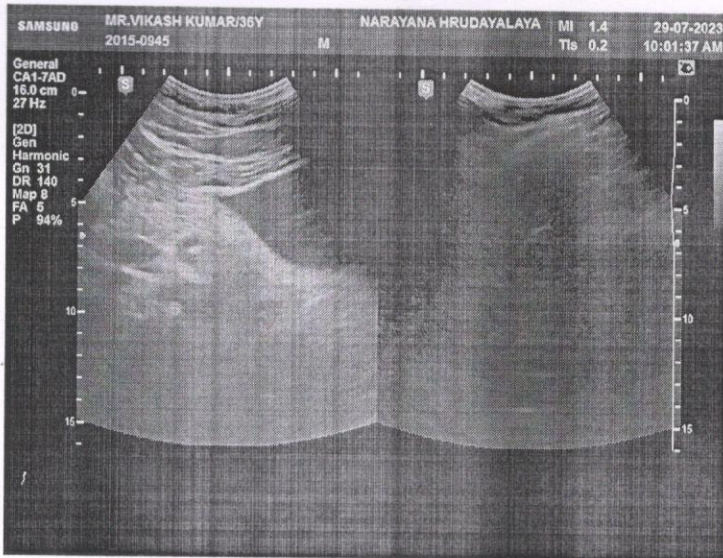
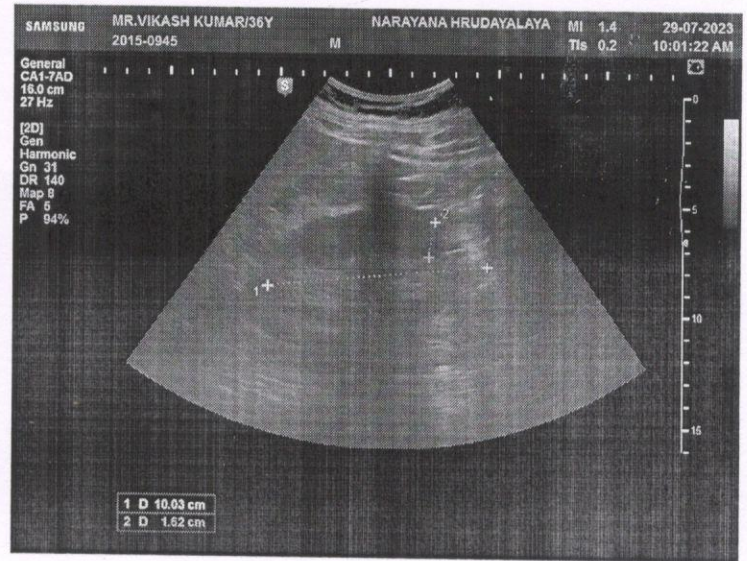
Examination Date  
Sender

2015-0945  
MR.VIKASH KUMAR/36Y  
Male

Exam

Accession #  
Exam Date  
Description  
Operator

29-07-2023



**ADULT TRANS-THORACIC ECHO REPORT**

**NAME : MR.BARLIA VIKAS KUMAR**

**AGE/SEX : 36YRS/MALE**

**MRN NO : 2015000000945**

**DATE : 29.07.2023**

**FINAL DIAGNOSIS:**

- NORMAL CHAMBER DIMENSION
- NO RWMA
- NORMAL VALVES
- MILD-MR
- MILD-TR
- NORMAL PA PRESSURE
- NORMAL RV/LV FUNCTION
- LVEF-60 %

**MEASUREMENTS**

AO: 29 MM

LVID (d) : 43 MM

IVS (d) : 12 MM

RA : 32 MM

LA: 36 MM

LVID(s) : 29 MM

PW (d) : 11 MM

RV : 28 MM

EF: 60 %

**VALVES**

MITRAL VALVE : NORMAL

AORTIC VALVE : NORMAL

TRICUSPID VALVE : NORMAL

PULMONARY VALVE : NORMAL

**CHAMBERS**

LEFT ATRIUM : NORMAL

RIGHT ATRIUM : NORMAL

LEFT VENTRICLE : NORMAL, NORMAL LV FUNCTION

RIGHT VENTRICLE : NORMAL, TAPSE-19 MM, NORMAL RV FUNCTION

RVOT/LVOT : NORMAL



**SEPTAE**

IVS : INTACT

IAS : INTACT

**GREAT ARTERIES**

AORTA : AORTIC ANNULUS-24 MM, LEFT ARCH

PULMONARY ARTERY : NORMAL

**DOPPLER DATA**

MITRAL VALVE : E/A -1.0/0.5 M/S, MR-MILD

AORTIC VALVE : PG- 5 MMHG

TRICUSPID VALVE : TR-MILD, PASP- 25 MMHG

PULMONARY VALVE : PG- 3 MMHG

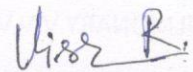
**WALL MOTION ABNORMALITIES: NO RWMA**

PERICARDIUM : NORMAL

VEGETATION/THROMBUS: ABSENT

**OTHER FINDINGS**

IVC- 14 MM NORMAL SIZED, COLLAPSIBILITY >50%, RAP -3 MM  
SINUS BRADYCARDIA/ HR- 54BPM

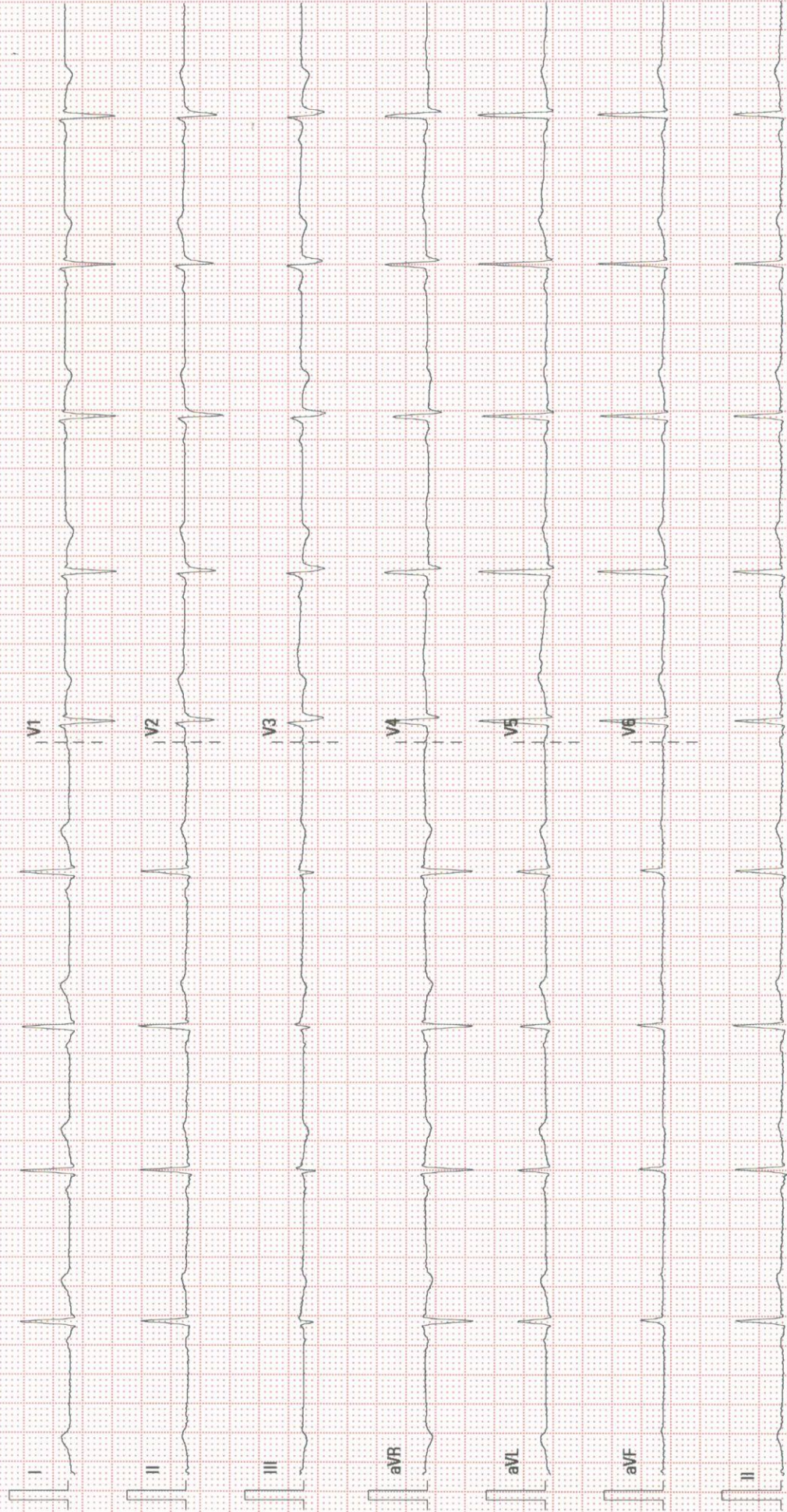


VISHALAKSHI H R  
CARDIAC SONOGRAPHER

ID: 2015-945  
Name: BERLIA VIKASH KUMAR  
Age: 36 Years  
Gender: Male

29-07-2023 11:06:58 AM

Vent. Rate	58 bpm
PR Interval	148 ms
QRS Duration	106 ms
QT/QTc Interval	422/419 ms
P/QRS/T Axes	10°/31°/14 deg
QTc:Hodges	



25 mm/s

10 mm/mV

50 Hz

BDR 35 Hz

NARAYANA HEALTH, JAYANAGAR

02.06.00.V28.4.1

SN:FN-73007176