

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Ramireddy Sarala MRN : 2015000000950 Gender/Age : FEMALE , 36y (11/10/1986)

Collected On : 29/07/2023 09:29 AM Received On : 29/07/2023 12:12 PM Reported On : 29/07/2023 03:36 PM

Barcode : 032307290169 Specimen : Urine Consultant : Dr. Priya S(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7411521511

CLINICAL PATHOLOGY

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

Dr. Deepak M B
MD, PDF, Hematopathology
Consultant

HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	7.0 L	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	3.82	million/ μ l	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	23.0 L	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived)	60.3 L	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	18.2 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	30.2 L	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	20.0 H	%	11.6-14.0

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Platelet Count (Electrical Impedance Plus Microscopy)	329	10 ³ /μL	150.0-450.0
Mean Platelet Volume (MPV)	8.8	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	4.2	10 ³ /μL	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCS Technology Plus Microscopy)	58.0	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	31.0	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	5.2	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	4.9	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.9	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	2.44	x10 ³ cells/μl	2.0-7.0
Absolute Lymphocyte Count (Calculated)	1.31	x10 ³ cells/μl	1.0-3.0
Absolute Monocyte Count (Calculated)	0.22	x10 ³ cells/μl	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.21	x10 ³ cells/μl	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.

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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. Sudarshan Chougule
MBBS, MD, Pathology
Consultant & Head - Hematology & Flow Cytometry

HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Westergren Method)	15 H	mm/1hr	0.0-12.0

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



Dr. Deepak M B
MD, PDF, Hematopathology
Consultant

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Colorimetric - Glucose Oxidase Peroxidase)	92	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020
Post Prandial Blood Sugar (PPBS) (Colorimetric - Glucose Oxidase Peroxidase)	98	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020

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SERUM CREATININE

Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.70	mg/dL	0.52-1.04
eGFR (Calculated)	94.7	mL/min/1.73m ²	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodynamically unstable patients eGFR is not applicable for less than 18 years of age.
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric – Urease)	7	mg/dL	7.0-17.0

Serum Uric Acid (Colorimetric - Uricase,Peroxidase) 5.0 mg/dL 2.5-6.2

LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)

Cholesterol Total (Colorimetric - Cholesterol Oxidase)	106	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Colorimetric - Lip/Glycerol Kinase)	100	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	34 L	mg/dL	40.0-60.0
Non-HDL Cholesterol (Calculated)	72.0	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
LDL Cholesterol (Colorimetric)	61 L	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	20.0	mg/dL	0.0-40.0
Cholesterol /HDL Ratio (Calculated)	3.2	-	0.0-5.0

LIVER FUNCTION TEST(LFT)

Bilirubin Total (Colorimetric -Diazo Method)	0.20	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Dual Wavelength - Reflectance Spectrophotometry)	0.00	mg/dL	0.0-0.3

Patient Name : Ms Ramireddy Sarala MRN : 2015000000950 Gender/Age : FEMALE , 36y (11/10/1986)			
Unconjugated Bilirubin (Indirect) (Calculated)	0.2	mg/dL	0.0-1.1
Total Protein (Colorimetric - Biuret Method)	6.80	gm/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.20	gm/dL	3.5-5.0
Serum Globulin (Calculated)	2.6	gm/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.62	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	23	U/L	14.0-36.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	23	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	55	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	18	U/L	12.0-43.0

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.



Dr. Anushre Prasad
 MBBS,MD, Biochemistry
 Consultant Biochemistry



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

CLINICAL PATHOLOGY

Test
Urine For Sugar (Post Prandial) (Enzyme Method (GOD POD))

Result **Unit**
 Not Present -

Patient Name : Ms Ramireddy Sarala MRN : 2015000000950 Gender/Age : FEMALE , 36y (11/10/1986)

--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.
(Fasting Blood Sugar (FBS), -> Auto Authorized)
(Lipid Profile, -> Auto Authorized)
(LFT, -> Auto Authorized)
(Uric Acid, -> Auto Authorized)
(CR, -> Auto Authorized)
(Blood Urea Nitrogen (Bun), -> Auto Authorized)
(Post Prandial Blood Sugar (PPBS) -> Auto Authorized)



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Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7411521511

CLINICAL PATHOLOGY

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

Colour	STRAW	-	-
Appearance	Clear	-	-

CHEMICAL EXAMINATION

pH(Reaction) (pH Indicator Method)	5.5	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.016	-	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

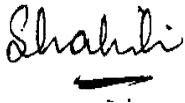
Pus Cells	4.0	/hpf	0-5
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RBC	1.1	/hpf	0-4
Epithelial Cells	11.3	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.04	/hpf	0-1
Bacteria	34.9	/hpf	0-200
Yeast Cells	0.4	/hpf	0-1
Mucus	Not Present	-	Not Present

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.



Dr. Shalini K S
DCP, DNB, Pathology
Consultant

SEROLOGY

Test	Result	Unit	Biological Reference Interval
SYPHILIS TREPONEMAL ANTIBODIES (IG M & IG G) (REVERSE ALGORITHM)			
Syphilis Treponemal Antibodies (Ig M & Ig G) (Reverse Algorithm) (Enhanced Chemiluminescence Immunoassay (CLIA))	0.59	-	<0.80 - Negative- Indicates no active or previous infection with Treponema pallidum 0.80-1.20 - Positive-Unable to determine if Treponema pallidum infection has occurred. The sample should retest > 1.20 - Reactive- Indicate active or previous infection with Treponema pallidum

Patient Name : Ms Ramireddy Sarala MRN : 2015000000950 Gender/Age : FEMALE , 36y (11/10/1986)

Interpretation Notes

- **SYPHILIS TREPONEMAL ANTIBODIES (IG M & IG G) (REVERSE ALGORITHM)**

<0.80 - Negative- Indicates no active or previous infection with Treponema pallidum
0.80-1.20 - Positive-Unable to determine if Treponema pallidum infection has occurred. The sample should retest
> 1.20 - Reactive-Indicate active or previous infection with Treponema pallidum

Serological tests for Treponema pallidum may aid in the early diagnosis of syphilis. Specific IgM is detectable towards the end of the second week of infection and IgG after about four weeks. By the time symptoms develop most patients have detectable anti-treponemal antibodies.

Reverse algorithm followed Syphilis treponemal antibodies (IG M & IG G) reactive RPR tested if reactive reported, if RPR not reactive TPHA tested if reactive reported a non reactive sample for TPHA is retested after 2 weeks.

--End of Report--



Dr. Prasadini Guru
MBBS, MD, Microbiology
Consultant

Note

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



Patient Name	MRS.RAMIREDDY SARALA	Requested By	EHP
MRN	20150000000950	Procedure Date Time	29-07-2023 11:22
Age/Sex	36Y 9M/Female	Hospital	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 12:42

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

-- End of Report --

Page 1 of 1

Patient Name : Mrs. Ramireddy Sarala

Patient ID : 2015000000950

Age : 36Years

Sex : Female

Referring Doctor : EHP

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. No focal lesions.

Portal vein is normal in course and **enlarged in size measures 12.8mm**. CBD is not dilated.

Gallbladder 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 mildly **enlarged in size measuring 12.7cm**, shape, contour and echopattern. No evidence of mass or focal lesions. **Enlarged splenic vein and measures 9mm**

Right Kidney is normal in size (measures 9.2 cm in length & 1.5 cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Left Kidney is normal in size (measures 9.0 cm in length & 1.5cm 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.

Uterus is anteverted and Bulky in size, measures 10.9x6.1x6.1cm. Rest of Myometrial and endometrial echoes are normal. **Endometrium** measures 8.3 mm. Endometrial cavity is empty. **Anterior wall intramural Fibroid measuring 3.4x2.2cm**

Both ovaries are normal in size and echopattern.

Right ovary: measures 3.5x2.6 cm. **Shows a simple Cyst measuring 1.8x1.8cm**

Left ovary: measures 3.4x1.7cm.

Both adnexa: No mass is seen.

There is no ascites or pleural effusion.

IMPRESSION:

- **Early Chronic Liver Disease with Enlarged Portal Vein.**
- **Mild Splenomegaly with enlarged Splenic vein**
- **Bulky Uterus with Uterine Fibroid**
- **Right Ovarian Simple Cyst**



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.

Narayana Multispeciality Clinic

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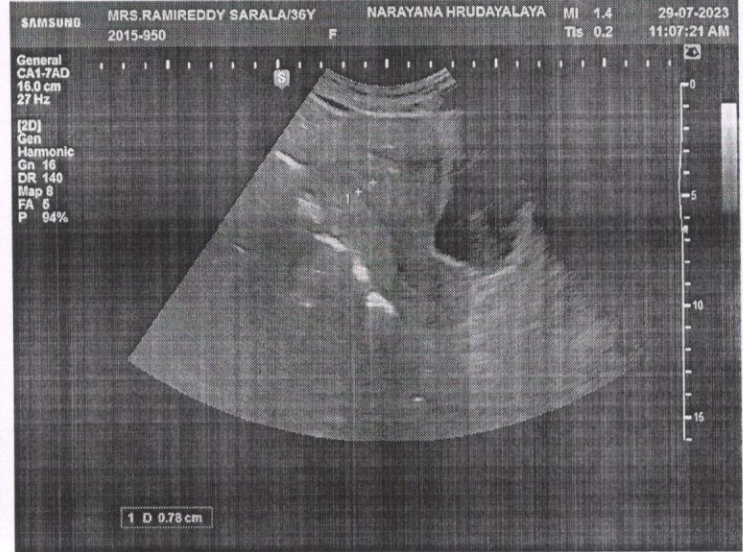
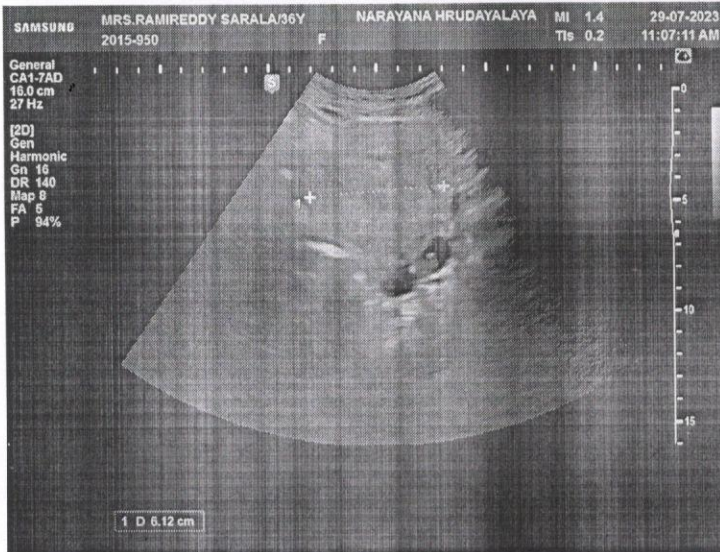
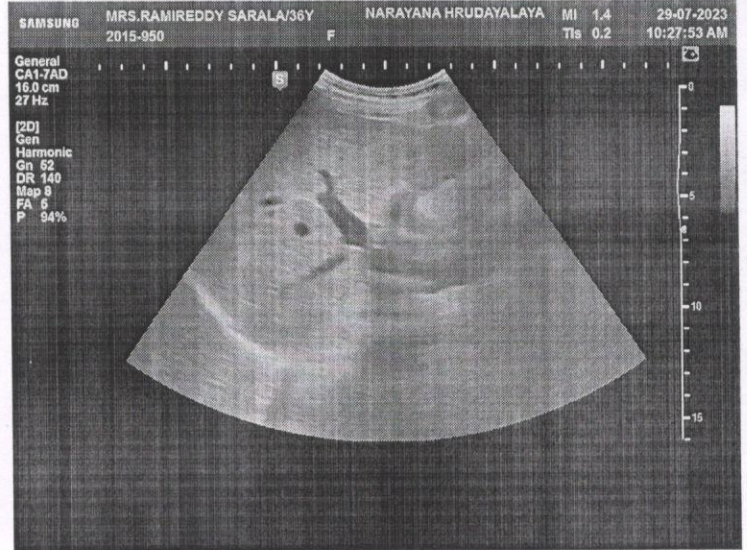
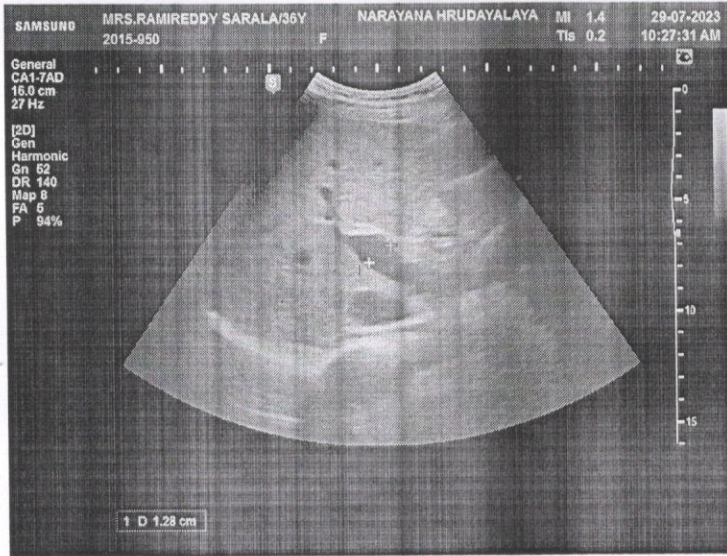
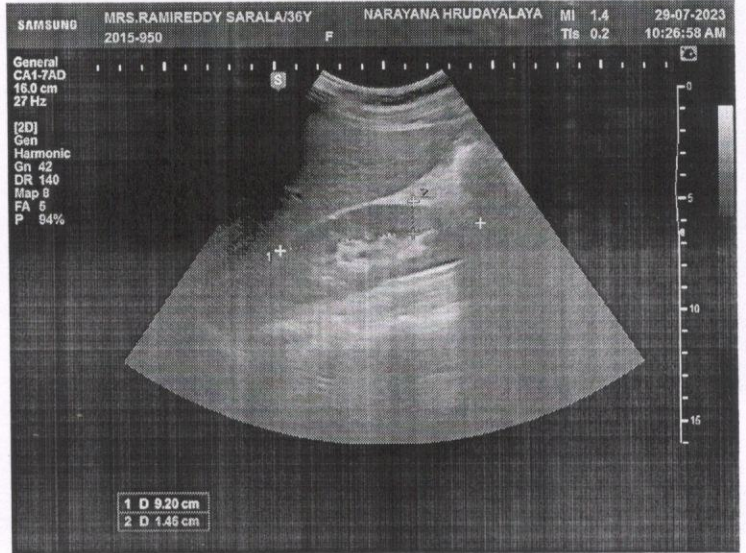
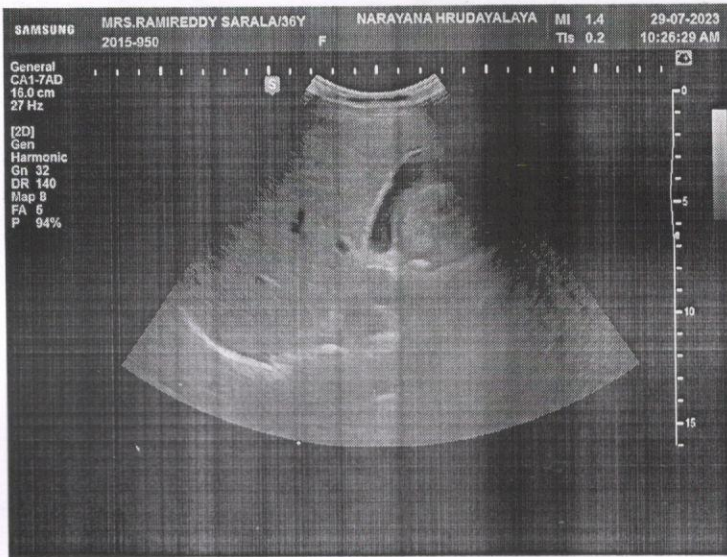
Birth Date
Gender

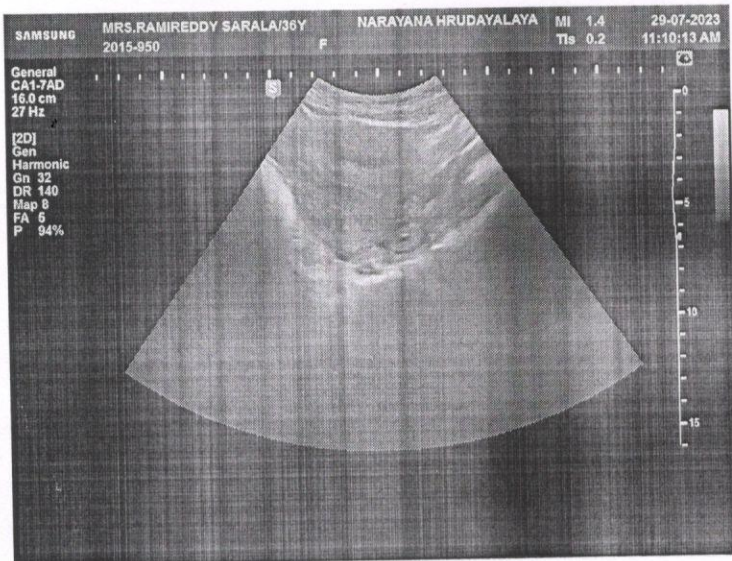
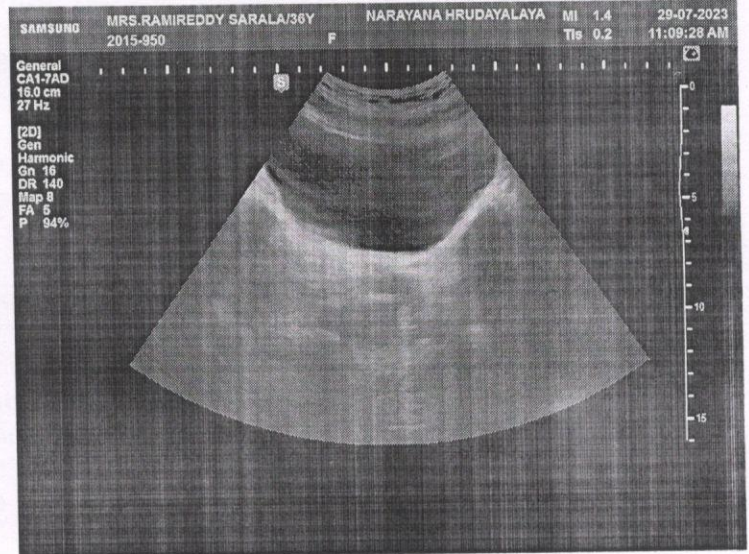
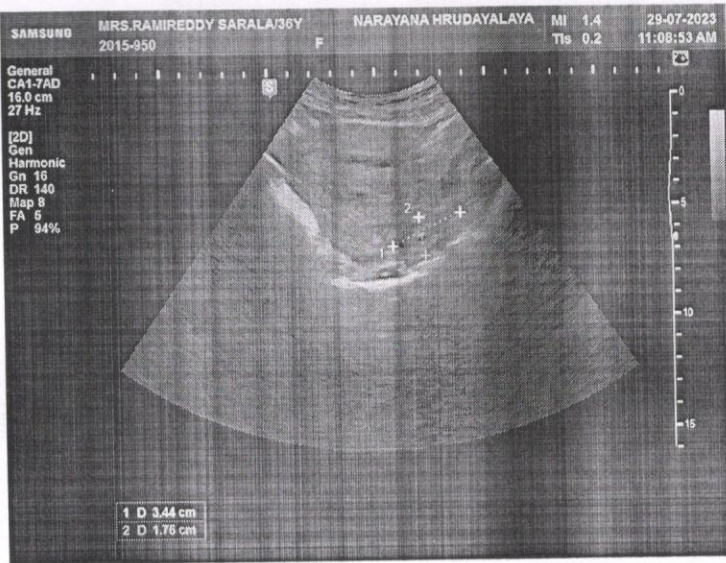
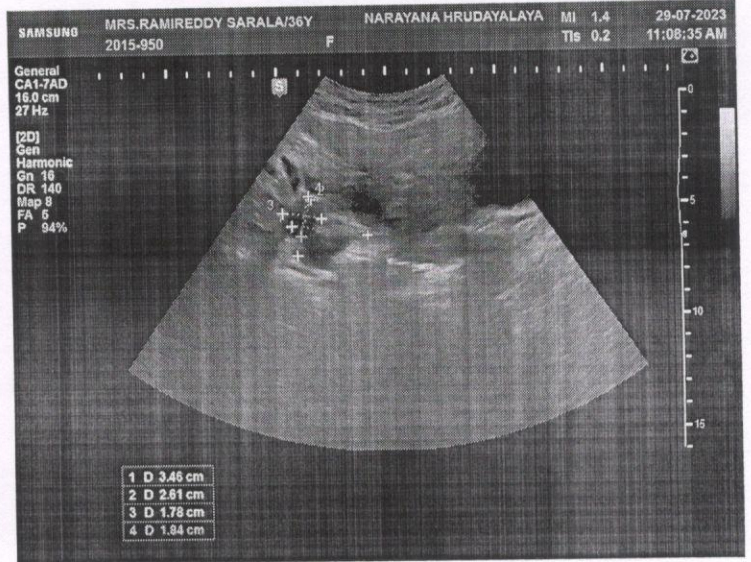
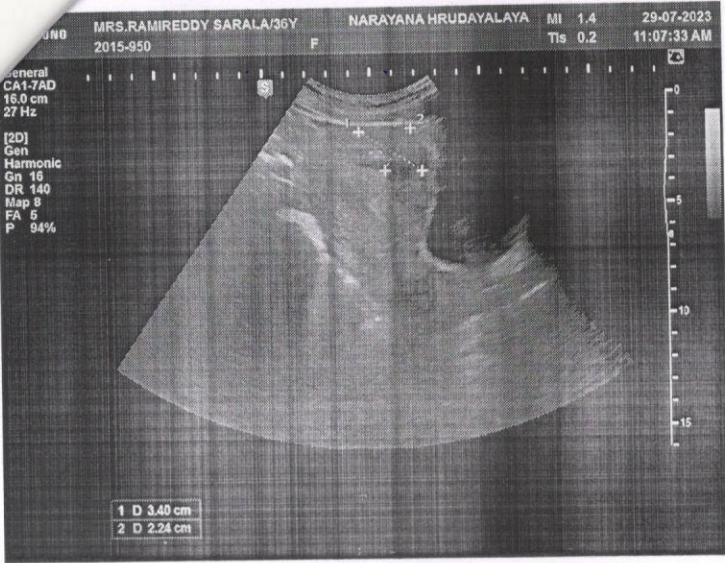
2015-950
MRS.RAMIREDDY SARALA/36Y
Female

Exam

Accession #
Exam Date
Description
Operator

29-07-2023





ADULT TRANS-THORACIC ECHO REPORT

NAME : MRS.RAMI REDDY SARALA

AGE/SEX : 36YRS/FEMALE

MRN NO : 2015000000950

DATE : 29.07.2023

FINAL DIAGNOSIS:

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

MEASUREMENTS

AO: 29 MM

LVID (d) : 40 MM

IVS (d) : 10 MM

RA : 32 MM

LA: 33 MM

LVID(s) : 29 MM

PW (d) : 10 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 -0.8/0.7 M/S, MR-MILD

AORTIC VALVE : PG- 5 MMHG

TRICUSPID VALVE : TR-TRIVIAL, PASP- 23 MMHG

PULMONARY VALVE : PG- 3 MMHG

WALL MOTION ABNORMALITIES: NO RWMA

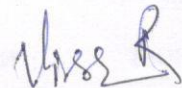
PERICARDIUM : NORMAL

VEGETATION/THROMBUS: ABSENT

OTHER FINDINGS

IVC- 14 MM NORMAL SIZED, COLLAPSIBILITY >50%, RAP -3 MM

SINUS RHYTHM/ HR- 85 BPM



**VISHALAKSHI H R
CARDIAC SONOGRAPHER**

ID: 2015-950

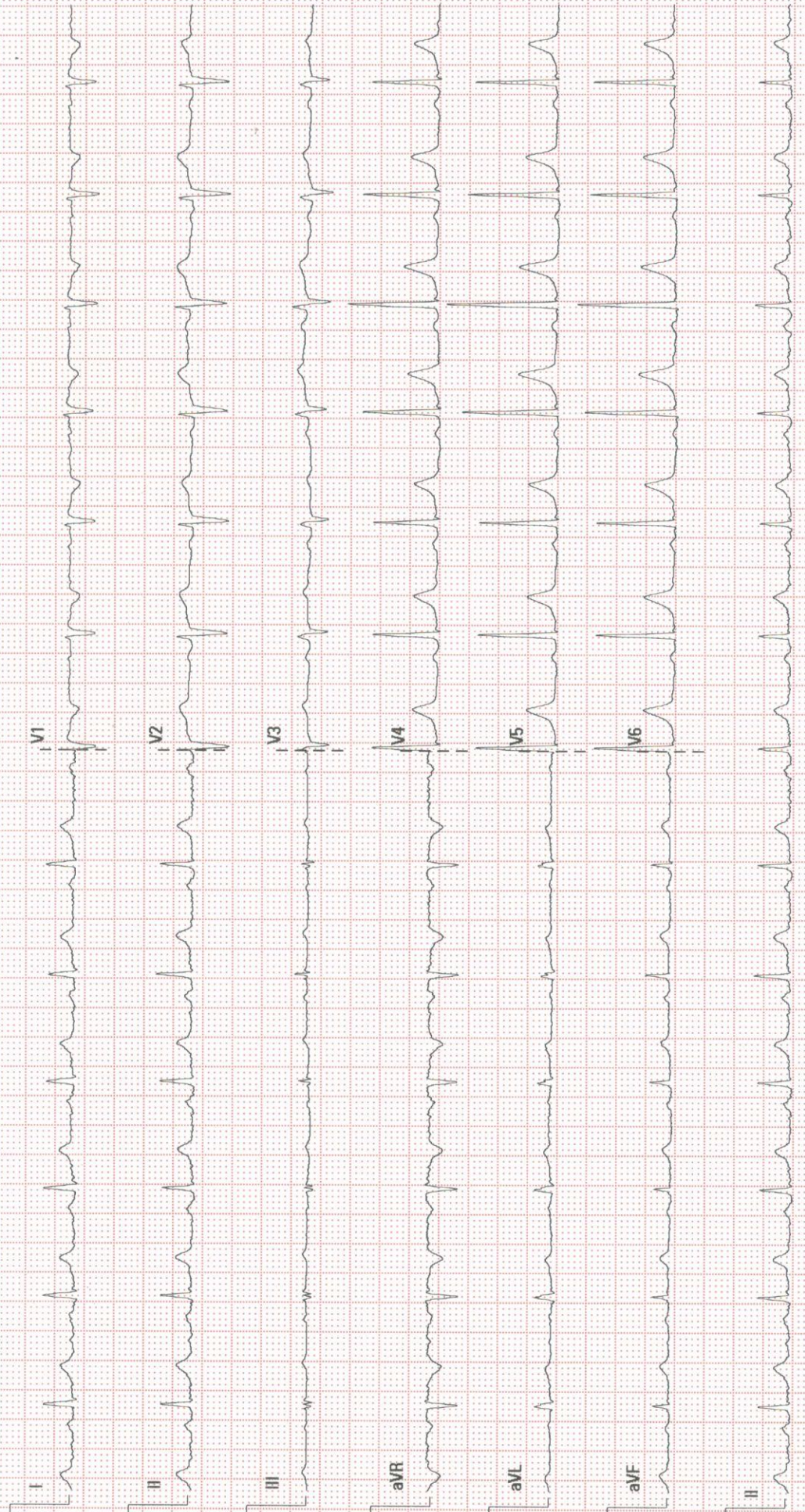
Name: RAMI REDDY SARALA

Age: 36 Years

Gender: Female

29-07-2023 12:11:10 PM

Vent. Rate	81 bpm
PR Interval	154 ms
QRS Duration	80 ms
QT/QTc Interval	376/413 ms
P/QRS/T Axes	38/38/37 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-79007176