MEDICOVER HOSPITALS | KLE Belagavi

Place Label Here
Pt. Name :
UMR :
Age : Sex :
IP :
If lable not available, write Pt. Name, IP No., Sex, Date, Name of Treating Physician

OPD Nursing Assessment - Adult

Name: Anagha 7 yes Date of Birth : _____ Age/Sex: 36/F UMR No.: 22176

Assessment :

Height: 168 cms Weight: 62.6 kg. BMI: — Respiration: ____ /min Pulse H/R : 80 /min

105/53 BP: 102/51 mmHG Temperature : — °F/°C SpO2 96 % BSL —

Chief Complaints: Health check up

Tick Appropriate :

Interpreter Needed	☐ Yes	☑ No	
Nutritional Status: Weight Loss/Gain in Last 3 Months	☐ Yes	☑ No	
If Weight Loss / ain-Dietary Referral	☐ Yes	☑ No	
Psychological Assessment Agitated Anxious	☐ Yes	☑ No	☐ Normal
(If Agitated, Inform Physician)	☐ Irritable		

Any Allergies Known Including Drugs : Nil

Past History: Any Surgeris Explain : Nil

Any Other illness: Explain : Nil

Pain Score: Numerical Scales (1-10) — Location — Characteristics —

Need to be seen immediately by the Doctor — ☐ Yes ☑ No

Fall risk: Age 65Yrs. — Tremors — High Grade Fever — H/O Fall in last 3 months —

Cardiac Medicines — Seizure Medications — Fall Prevention Education Done —

Name of Nurse	ID No. of Nurse	Signature of Nurse	Date & Time
Shweta	024523	SK	27/9/24

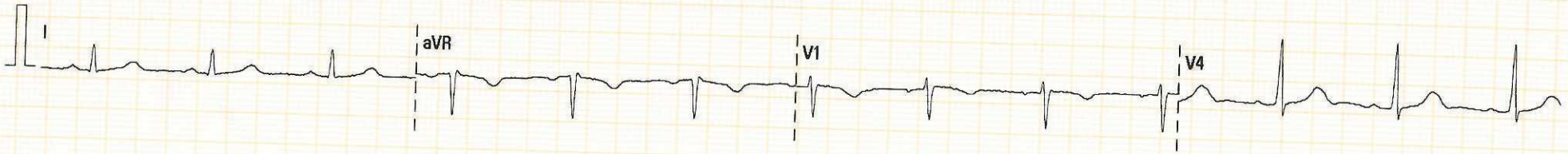
ID: 2024042711542016
Name: anagha iyer
Age: 36 Years
Gender: Female

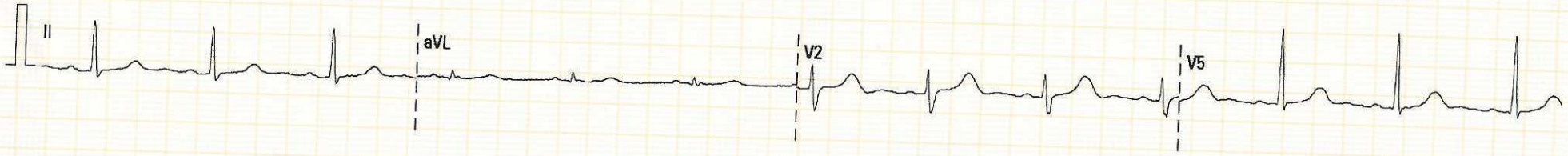
27-04-2024 11:54:10 AM

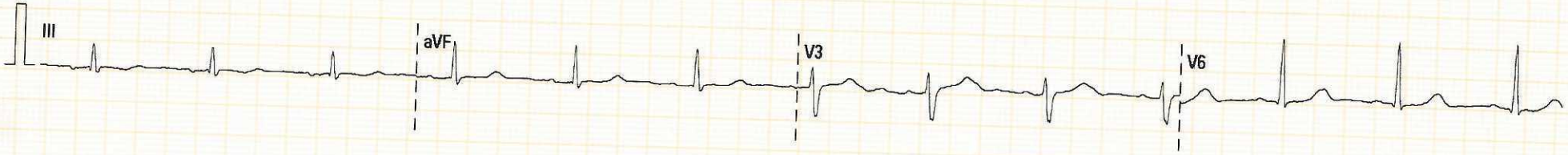
Vent. Rate	77 bpm	Sinus rhythm
PR Interval	142 ms	
QRS Duration	82 ms	Normal ECG
QT/QTc Interval	392/422 ms	
P/QRS/T Axes	18/54/45 deg	

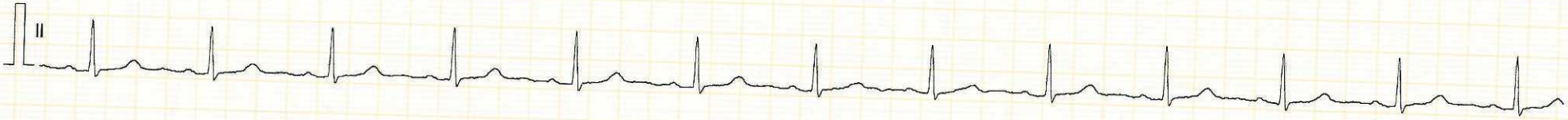
QTc:Hodges

Unconfirmed Diagnosis









25 mm/s 10 mm/mV 50 Hz~ BDR 35 Hz

MEDICOVER KLE PUNE

02.10.00/V28.4.1 SN:FN-26035806

Mrs. Anagha S. Exec.
36/F.

MEDICOVER HOSPITALS | KLE Pune

27/4/24.

No H/o DM/HTN/BA/DA
No DOE/chest pain.

Rf. BS. Vesi.
Cm - SICA (N)
Cm - NAD

DR. ADITYA VINOD SONDANKAR
MBBS DNB MEDICINE
MASTERCLASS IN DIABETES
PGDCED
REG MMC 2009033017

DEPARTMENT OF LABORATORY

Patient Name	: Mrs. ANAGHA SREEKANT IYER	**Age /Gender**	: 36 Y(s)/Female
Bill No/ UMR No	: PUBC22186/PUU22176	**Referred By**	: Dr. GENERAL MEDICINE CONSUL
Received Dt	: 27-Apr-24 12:09 pm	**Report Date**	: 27-Apr-24 02:50 pm

FINAL REPORT

Parameters	Specimen	Result	Biological Reference Intervals
CUE(COMPLETE URINE EXAMINATION)			
GENERAL EXAMINATION			
VOLUME	Urine	20	10 ml to 25 ml
COLOUR		PALE YELLOW	PALE YELLOW
APPEARANCE		CLEAR	CLEAR
SPECIFIC GRAVITY		1.005	1.010 - 1.030
PH		6.5	4.5 - 8.0
CHEMICAL EXAMINATION			
PROTEIN	Urine	ABSENT	ABSENT
GLUCOSE		ABSENT	ABSENT
BLOOD		ABSENT	ABSENT
LEUCOCYTES		NEGATIVE	NEGATIVE
UROBILINOGEN		Normal	NORMAL
KETONE		ABSENT	ABSENT
BILIRUBIN		NEGATIVE	NEGATIVE
NITRITE		NEGATIVE	NEGATIVE
MICROSCOPIC EXAMINATION			
PUS CELLS	Urine	0-1	0 - 5 /hpf
RBC		NIL	0 - 2 /hpf
EPITHELIAL CELLS		0-1	0 - 5 /hpf
CRYSTALS		NIL	ABSENT
CASTS		ABSENT	ABSENT
OTHERS		ABSENT	ABSENT

*** End Of Report ***

System Name : M

Sector - 1, Indrayani Nagar, Bhosari, Pune - 411026
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www.medicoverhospitals.in

DEPARTMENT OF LABORATORY

Patient Name	: Mrs. ANAGHA SREEKANT IYER	**Age /Gender**	:36 Y(s)/Female
Bill No/ UMR No	: PUBC22186/PUU22176	**Referred By**	:Dr. GENERAL MEDICINE CONSUL
Received Dt	: 27-Apr-24 12:09 pm	**Report Date**	:27-Apr-24 02:50 pm

FINAL REPORT

Parameter	Specimen	Result Values	Biological Reference	Method
COMPLETE BLOOD COUNT				
COMPLETE BLOOD COUNT				
HAEMOGLOBIN	EDTA Blood	11.2	11.7 - 15.5 g/dL	Spectrophotometry
WHITE BLOOD CELLS (WBC)		3,660	4000 - 11000 Cells/cumm	Impedance, optical Absorbance, DHSS
PLATELET COUNT		198000	150000 - 450000 /cumm	Impedance
RED BLOOD CELLS		4.34	3.9 - 5.0 milli/cumm	Impedance
HEMATOCRIT/HCT (PCV)		32.5	36 - 46 %	Analogical integration
MCV		74.8	82 - 95 fl	Calculated
MCH		25.8	27 - 32 pg	Calculated
MCHC		34.5	32 - 36 g/dL	Calculated
RDW(cv)		14.6	11.5 - 14.0 %	Calculated
MPV		8.5	6 - 9.5 fl	
DIFFERENTIAL COUNT				
NEUTROPHILS	EDTA Blood	47.3	50 - 75 %	DHSS/Microscopy
LYMPHOCYTES		35.1	20 - 40 %	DHSS/Microscopy
EOSINOPHILS		3.7	00 - 06 %	DHSS/Microscopy
MONOCYTES		12.8	00 - 10 %	DHSS/Microscopy
BASOPHILS		1.1	00 - 01 %	DHSS/Microscopy
PERIPHERAL SMEAR EXAMINATION				
RBC morphology	EDTA Blood	Microcytic+ , hypochromic+ ,Anisopoikilocytosis+, Pencil cells+		
WBC morphology		Mild leucopenia		
PLATELETS		Adequate On Smear		
BLOOD GROUPING AND RH				
BLOOD GROUP	Blood	" AB "		SLIDE AGGLUTINATION
RH TYPE		POSITIVE		
ESR		12	0 - 20 mm/1st hour	WESTERGREN`S METHOD

*** End Of Report ***

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DEPARTMENT OF LABORATORY

Patient Name	: Mrs. ANAGHA SREEKANT IYER	**Age /Gender**	: 36 Y(s)/Female
Bill No/ UMR No	: PUBC22186/PUU22176	**Referred By**	: Dr. GENERAL MEDICINE CONSUL
Received Dt	: 27-Apr-24 12:09 pm	**Report Date**	: 27-Apr-24 02:50 pm

Parameters	Specimen	Result	Biological Reference In	Method

System Name : M

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DEPARTMENT OF LABORATORY

Patient Name	: Mrs. ANAGHA SREEKANT IYER	**Age /Gender**	: 36 Y(s)/Female
Bill No/ UMR No	: PUBC22186/PUU22176	**Referred By**	: Dr. GENERAL MEDICINE CONSUL
Received Dt	: 27-Apr-24 12:09 pm	**Report Date**	: 27-Apr-24 04:16 pm

FINAL REPORT

Parameters	Specimen	Result	Biological Reference Intervals	Method
HBA1C (GLYCOSYLATED HAEMOGLOBIN)				
HBA1C		5.2	Normal < 5.7 Pre diabetic 5.7 - 6.5 Diabetic > 6.5 : 5.7 - 6.5	TINIA
FBS (FASTING BLOOD SUGAR)				
FASTING BLOOD GLUCOSE		85.4	Normal Range : 70 - 99 mg/dL Impaired Glucose tolerance : 100 - 125 mg/dL Diabetes Mellitus : - > 126 mg/dL	Hexokinase
SERUM CREATININE		0.62	0.6 - 1.2 mg/dL	Jaffe
LFT(LIVER FUNCTION TEST)				
TOTAL BILIRUBIN		0.59	0.1 - 1.2 mg/dL	Colorimetric diazo method
DIRECT BILIRUBIN		0.28	<= 0.20 mg/dL	Method: Diazo Method
INDIRECT BILIRUBIN		0.31	<= 1.0 mg/dL	
SGPT (ALT)		11.4	<= 33 U/L	Enzymatic
SGOT (AST)		17.7	<= 32 U/L	Enzymatic
ALKALINE PHOSPHATASE (ALP)		55	35 - 104 U/L	PNPP
TOTAL PROTEINS		7.44	6.4 - 8.3 g/dL	Method : Biuret method
SERUM ALBUMIN		4.59	3.5 - 5.2 g/dL	Method : Bromcresol Green (BCG)
GLOBULINS		2.85	1.8 - 3.6 g/dL	
A/G RATIO		1.61	1.1 - 2.2	
GAMMA GLUTAMYL TRANSFERASE(GGT)		8	6 - 42 U/L	Enzymatic colorimetric assay (IFCC)
LIPID PROFILE				
TOTAL CHOLESTEROL		131.3	Borderline High : 200 - 240 mg/dL High risk : > 240 mg/dL Desirable: : < 200 mg/dL	Enzymatic, Colorimetric Method
HDL CHOLESTEROL		54.5	Major risk factor for heart disease : : < 40 mg/dL Negative risk factor for heart disease : : > 60 mg/dL	Homogeneous enzymatic colorimetric assay

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DEPARTMENT OF LABORATORY

Patient Name	: Mrs. ANAGHA SREEKANT IYER	**Age /Gender**	: 36 Y(s)/Female
Bill No/ UMR No	: PUBC22186/PUU22176	**Referred By**	: Dr. GENERAL MEDICINE CONSUL
Received Dt	: 27-Apr-24 12:10 pm	**Report Date**	: 27-Apr-24 04:16 pm

Parameters	Specimen	Result	Biological Reference In	Method
LDL CHOLESTEROL		68.56	Optimal : - < 100 mg/dL Near Optimal : 100 - 129 mg/dL Borderline High : 130 - 159 mg/dL High : 160 - 189 mg/dL Very High : - > 190 mg/dL	
VLDL		8.24	6 - 38 mg/dl	
SERUM TRYGLYCERIDES		41.2	Borderline High : 150 - 199 mg/dL High : 200 - 499 mg/dL Normal : < 150 mg/dL	Enzymatic colorimetric test
CHO/HDL RATIO		2.41	Normal : - < 3.5 High Risk : - > 5.0	
LDL/HDL RATIO		1.26	2.5 - 3.5	
COMMENT		10-12 hours fasting is mandatory for Lipid profile parameters. If not ,Values may not be accurate.		
SERUM URIC ACID		4.1	2.4 - 5.7 mg/dL	Enzymatic colorimetric test
PPBS (POST PRANDIAL BLOOD SUGAR)				
PPBS (POST PRANDIAL BLOOD SUGAR)		88.9	Normal range : < 140 mg/dL Impaired glucose tolerance : <= 199 mg/dL Diabetes Milletus : >= 200 mg/dL	Hexokinase
BUN(BLOOD UREA NITROGEN)				
BUN (Blood Urea Nitrogen.)		6.86	7.0 - 21.0 mg/dL	Calculatead

*** End Of Report ***

Lab Incharge

Dr. PAWAR PRIYA VASANTRAO, MBBS, DNB
CONSULTANT PATHOLOGIST
Pathology

Test results related only to the item tested.

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DEPARTMENT OF RADIOLOGY

Patient Name : Anagha Iyer	**Age : 36 yrs / F**
Ref. By : Health checkup	**OPD No: PUU: 22176**
Date of x-ray: 27/04/2024	**Date of Reporting: 27/04/2024**

X RAY CHEST PA VIEW

FINDINGS : Chest PA view with no comparison study shows.

Prominent bronchovascular markings noted in hyperinflated bilateral lung fields.
No obvious consolidation is seen.
There is no pleural effusion or pneumothorax seen.
No pneumoperitoneum is seen.
The cardiac silhouette appears within normal limits.
The diaphragmatic shadow and mediastinal structures are within normal limits.
Visualized osseous structures demonstrate no obvious abnormality.

IMPRESSION :

Prominent bronchovascular markings in hyperinflated bilateral lung fields.

Clinical/ lab parameter correlation & further evaluation recommended.

Dr. Sunita Shewale (MBBS, DMRE)
Consulting Radiologist
(typed & printed by sk)

NAME OF PATIENT: ANAGHA IYER	AGE/SEX: 36YRS/F
REF BY: DR SONAM SHINDE	DATE: 26/4/2024

2D ECHO AND COLOUR DOPPLER REPORT

2D FINDINGS-

- ALL 4 CARDIAC CHAMBERS ARE NORMAL IN DIMENSIONS.
- NO RWMA.
- NORMAL LEFT VENTRICULAR EJECTION FRACTION- LVEF – 60%
- MILD MITRAL VALVE PROLAPSE.
- MILD MR / MILD TR.
- NO PULMONARY ARTERY HYPERTENSION , RVSP – 25 mmHg.
- NO DIASTOLIC DYSFUNCTION.
- NO CLOT /VEGETATION /EFFUSION.
- LEFT SIDED AORTIC ARCH , NO COARCTATION OF AORTA.
- IVC- 1.5 CM , MORE THAN 50 % PULSATILE.

M MODE FINDINGS-

AO	LA	LVIDd/s	IVS/PW	RV	LVEF
24	32	44/24	11/11	28	60%

IMPRESSION-

- NORMAL LEFT VENTRICULAR EJECTION FRACTION- LVEF – 60%
- NO PULMONARY ARTERY HYPERTENSION , RVSP – 25 mmHg.
- MILD MITRAL VALVE PROLAPSE.

DR SONAM SHAH SHINDE

DM CARDIOLOGY

CONSULTANT INTERVENTIONAL CARDIOLOGIST (MMC 2010/06/2218)