

Name : Mrs. ROOPA RAGHUPATHY BHAT
 PID No. : MED111818777 Register On : 02/09/2023 7:46 AM
 SID No. : 712330297 Collection On : 02/09/2023 8:30 AM
 Age / Sex : 53 Year(s) / Female Report On : 09/09/2023 7:45 PM
 Type : OP Printed On : 02/11/2023 5:41 PM
 Ref. Dr : MediWheel



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

BLOOD GROUPING AND Rh TYPING (EDTA Blood/Agglutination)	'O' Positive'		
--	---------------	--	--

Remark: Test to be confirmed by gel method

Complete Blood Count With - ESR

Haemoglobin (EDTA Blood/Spectrophotometry)	13.5	g/dL	12.5 - 16.0
---	------	------	-------------

INTERPRETATION: Haemoglobin values vary in Men, Women & Children. Low haemoglobin values may be due to nutritional deficiency, blood loss, renal failure etc. Higher values are often due to dehydration, smoking, high altitudes, hypoxia etc.

PCV (Packed Cell Volume) / Haematocrit (EDTA Blood/Derived)	39.5	%	37 - 47
---	------	---	---------

RBC Count (EDTA Blood/Automated Blood cell Counter)	4.68	mill/cu.mm	4.2 - 5.4
--	------	------------	-----------

MCV (Mean Corpuscular Volume) (EDTA Blood/Derived from Impedance)	84.4	fL	78 - 100
--	------	----	----------

MCH (Mean Corpuscular Haemoglobin) (EDTA Blood/Derived)	28.8	pg	27 - 32
--	------	----	---------

MCHC (Mean Corpuscular Haemoglobin concentration) (EDTA Blood/Derived)	34.2	g/dL	32 - 36
---	------	------	---------

RDW-CV (Derived)	13.2	%	11.5 - 16.0
---------------------	------	---	-------------

RDW-SD (Derived)	38.99	fL	39 - 46
---------------------	--------------	----	---------

Total WBC Count (TC) (EDTA Blood/Derived from Impedance)	7320	cells/cu.m m	4000 - 11000
---	------	-----------------	--------------

Neutrophils (Blood/Impedance Variation & Flow Cytometry)	56	%	40 - 75
---	----	---	---------


 Mr. S. Mohan Kumar
 Sr. Lab Technician

VERIFIED BY




 DR KIRAN H S MD
 Consultant Pathologist
 KMC No: 86542

APPROVED BY

The results pertain to sample tested.

Page 1 of 9

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #NEW KANTHA RAJ URS ROAD, KRISHNAMURTHY PURAM, MYSORE, KARNATAKA, INDIA,.

Name : Mrs. ROOPA RAGHUPATHY BHAT
PID No. : MED111818777 **Register On** : 02/09/2023 7:46 AM
SID No. : 712330297 **Collection On** : 02/09/2023 8:30 AM
Age / Sex : 53 Year(s) / Female **Report On** : 09/09/2023 7:45 PM
Type : OP **Printed On** : 02/11/2023 5:41 PM
Ref. Dr : MediWheel



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Lymphocytes (Blood/Impedance Variation & Flow Cytometry)	36	%	20 - 45
Eosinophils (Blood/Impedance Variation & Flow Cytometry)	02	%	01 - 06
Monocytes (Blood/Impedance Variation & Flow Cytometry)	06	%	01 - 10
Basophils (Blood/Impedance Variation & Flow Cytometry)	00	%	00 - 02
Absolute Neutrophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	4.10	10 ³ / µl	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	2.64	10 ³ / µl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	0.15	10 ³ / µl	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.44	10 ³ / µl	< 1.0
Absolute Basophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.00	10 ³ / µl	< 0.2
Platelet Count (EDTA Blood/Derived from Impedance)	241	10 ³ / µl	150 - 450
MPV (Blood/Derived)	11.0	fL	8.0 - 13.3
PCT	0.27	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citratd Blood/Automated ESR analyser)	08	mm/hr	< 30


Mr. S. Mohan Kumar
 Sr. Lab Technician

VERIFIED BY




DR KIRAN H S MD
 Consultant Pathologist
 KMC No: 86542

APPROVED BY

The results pertain to sample tested.

Page 2 of 9

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #NEW KANTHA RAJ URS ROAD, KRISHNAMURTHY PURAM, MYSORE, KARNATAKA, INDIA,.

Name : Mrs. ROOPA RAGHUPATHY BHAT
PID No. : MED111818777 **Register On** : 02/09/2023 7:46 AM
SID No. : 712330297 **Collection On** : 02/09/2023 8:30 AM
Age / Sex : 53 Year(s) / Female **Report On** : 09/09/2023 7:45 PM
Type : OP **Printed On** : 02/11/2023 5:41 PM
Ref. Dr : MediWheel



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
BUN / Creatinine Ratio	11.4		
Glucose Fasting (FBS) (Plasma - F/GOD- POD)	161	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Urine sugar, Fasting (Urine - F)	Nil		Nil
Glucose Postprandial (PPBS) (Plasma - PP/GOD - POD)	247	mg/dL	70 - 140

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti- diabetic medication during treatment for Diabetes.

Urine Sugar (PP-2 hours) (Urine - PP)	Nil		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	9.4	mg/dL	7.0 - 21
Creatinine (Serum/Jaffe Kinetic)	0.8	mg/dL	0.6 - 1.1

INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin ,cefazolin, ACE inhibitors ,angiotensin II receptor antagonists,N-acetylcyteine , chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Uricase/Peroxidase)	3.4	mg/dL	2.6 - 6.0
---	-----	-------	-----------

Liver Function Test

Bilirubin(Total) (Serum/Diazotized Sulfanilic Acid)	0.5	mg/dL	0.1 - 1.2
--	-----	-------	-----------


Mr. S. Mohan Kumar
 Sr. Lab Technician

VERIFIED BY




DR KIRAN H'S MD
 Consultant Pathologist
 KMC No: 86542

APPROVED BY

The results pertain to sample tested.

Page 3 of 9

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #NEW KANTHA RAJ URS ROAD, KRISHNAMURTHY PURAM, MYSORE, KARNATAKA, INDIA,.

Name : Mrs. ROOPA RAGHUPATHY BHAT
 PID No. : MED111818777 Register On : 02/09/2023 7:46 AM
 SID No. : 712330297 Collection On : 02/09/2023 8:30 AM
 Age / Sex : 53 Year(s) / Female Report On : 09/09/2023 7:45 PM
 Type : OP Printed On : 02/11/2023 5:41 PM
 Ref. Dr : MediWheel



Investigation	Observed Value	Unit	Biological Reference Interval
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.2	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.30	mg/dL	0.1 - 1.0
Total Protein (Serum/Biuret)	6.5	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.2	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.30	gm/dL	2.3 - 3.6
A : G Ratio (Serum/Derived)	1.83		1.1 - 2.2

INTERPRETATION: Remark : Electrophoresis is the preferred method

SGOT/AST (Aspartate Aminotransferase) (Serum/IFCC / Kinetic)	28	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/IFCC / Kinetic)	40	U/L	5 - 41
Alkaline Phosphatase (SAP) (Serum/PNPP / Kinetic)	82	U/L	53 - 141
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	32	U/L	< 38

Lipid Profile

Cholesterol Total (Serum/Oxidase / Peroxidase method)	146	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
--	-----	-------	--


 Mr. S. Mohan Kumar
 Sr. Lab Technician

VERIFIED BY




 DR KIRAN H S MD
 Consultant Pathologist
 KMC No: 86542

APPROVED BY

Name : Mrs. ROOPA RAGHUPATHY BHAT
 PID No. : MED111818777 Register On : 02/09/2023 7:46 AM
 SID No. : 712330297 Collection On : 02/09/2023 8:30 AM
 Age / Sex : 53 Year(s) / Female Report On : 09/09/2023 7:45 PM
 Type : OP Printed On : 02/11/2023 5:41 PM
 Ref. Dr : MediWheel



Investigation	Observed Value	Unit	Biological Reference Interval
Triglycerides (Serum/Glycerol phosphate oxidase / peroxidase)	99	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500
HDL Cholesterol (Serum/Immunoinhibition)	46	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 50 - 59 High Risk: < 50
LDL Cholesterol (Serum/Calculated)	80.2	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	19.8	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	100.0	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

INTERPRETATION: 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.
 2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.


 Mr. S. Mohan Kumar
 Sr. Lab Technician

VERIFIED BY




 DR KIRAN H S MD
 Consultant Pathologist
 KMC No: 86542

APPROVED BY

Name : Mrs. ROOPA RAGHUPATHY BHAT
 PID No. : MED111818777 Register On : 02/09/2023 7:46 AM
 SID No. : 712330297 Collection On : 02/09/2023 8:30 AM
 Age / Sex : 53 Year(s) / Female Report On : 09/09/2023 7:45 PM
 Type : OP Printed On : 02/11/2023 5:41 PM
 Ref. Dr : MediWheel



Investigation	Observed Value	Unit	Biological Reference Interval
Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	3.2		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	2.2		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	1.7		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0

Glycosylated Haemoglobin (HbA1c)

HbA1C (Whole Blood/HPLC)	8.0	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: \geq 6.5
-----------------------------	-----	---	---

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control \geq 8.1 %

Remark: Kindly correlate clinically.

Estimated Average Glucose (Whole Blood)	182.9	mg/dL
--	-------	-------

INTERPRETATION: Comments

HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycaemic control as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.

Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

THYROID PROFILE / TFT


 Mr. S. Mohan Kumar
 Sr. Lab Technician

VERIFIED BY




 DR KIRAN H S MD
 Consultant Pathologist
 KMC No: 86542

APPROVED BY

Name : Mrs. ROOPA RAGHUPATHY BHAT
PID No. : MED111818777 **Register On** : 02/09/2023 7:46 AM
SID No. : 712330297 **Collection On** : 02/09/2023 8:30 AM
Age / Sex : 53 Year(s) / Female **Report On** : 09/09/2023 7:45 PM
Type : OP **Printed On** : 02/11/2023 5:41 PM
Ref. Dr : MediWheel



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
T3 (Triiodothyronine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	0.87	ng/ml	0.4 - 1.81

INTERPRETATION:

Comment :

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Thyroxine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	10.31	Microg/dl	4.2 - 12.0
--	-------	-----------	------------

INTERPRETATION:

Comment :

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

TSH (Thyroid Stimulating Hormone) (Serum/Chemiluminescent Immunometric Assay (CLIA))	2.623	μIU/mL	0.35 - 5.50
---	-------	--------	-------------

INTERPRETATION:

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5

2 nd trimester 0.2-3.0

3 rd trimester : 0.3-3.0

(Indian Thyroid Society Guidelines)

Comment :

1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.

2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.

3.Values&lt;0.03 μIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

URINE ROUTINE

PHYSICAL EXAMINATION

Colour (Urine/Physical examination)	Pale Yellow	Yellow to Amber
--	-------------	-----------------


Mr. S. Mohan Kumar
 Sr. Lab Technician

VERIFIED BY




DR KIRAN H'S MD
 Consultant Pathologist
 KMC No: 86542

APPROVED BY

Name : Mrs. ROOPA RAGHUPATHY BHAT
PID No. : MED111818777 **Register On** : 02/09/2023 7:46 AM
SID No. : 712330297 **Collection On** : 02/09/2023 8:30 AM
Age / Sex : 53 Year(s) / Female **Report On** : 09/09/2023 7:45 PM
Type : OP **Printed On** : 02/11/2023 5:41 PM
Ref. Dr : MediWheel



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Volume (Urine/Physical examination)	25		ml
Appearance (Urine)	Clear		
<u>CHEMICAL EXAMINATION</u>			
pH (Urine)	6.0		4.5 - 8.0
Specific Gravity (Urine/Dip Stick ó'Reagent strip method)	1.020		1.002 - 1.035
Protein (Urine/Dip Stick ó'Reagent strip method)	Negative		Negative
Glucose (Urine)	Nil		Nil
Ketone (Urine/Dip Stick ó'Reagent strip method)	Nil		Nil
Leukocytes (Urine)	Negative	leuco/uL	Negative
Nitrite (Urine/Dip Stick ó'Reagent strip method)	Nil		Nil
Bilirubin (Urine)	Negative	mg/dL	Negative
Blood (Urine)	Nil		Nil
Urobilinogen (Urine/Dip Stick ó'Reagent strip method)	Normal		Within normal limits
<u>Urine Microscopy Pictures</u>			
RBCs (Urine/Microscopy)	Nil	/hpf	NIL


Mr. S. Mohan Kumar
 Sr. Lab Technician

VERIFIED BY




DR KIRAN H S MD
 Consultant Pathologist
 KMC No: 86542

APPROVED BY

The results pertain to sample tested.

Page 8 of 9

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #NEW KANTHA RAJ URS ROAD, KRISHNAMURTHY PURAM, MYSORE, KARNATAKA, INDIA,.

Name : Mrs. ROOPA RAGHUPATHY BHAT
PID No. : MED111818777 Register On : 02/09/2023 7:46 AM
SID No. : 712330297 Collection On : 02/09/2023 8:30 AM
Age / Sex : 53 Year(s) / Female Report On : 09/09/2023 7:45 PM
Type : OP Printed On : 02/11/2023 5:41 PM
Ref. Dr : MediWheel



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Pus Cells (Urine/Microscopy)	2-4	/hpf	< 5
Epithelial Cells (Urine/Microscopy)	1-2	/hpf	No ranges
Others (Urine)	Nil		Nil


Mr. S. Mohan Kumar
Sr. Lab Technician

VERIFIED BY




DR KIRAN H S MD
Consultant Pathologist
KMC No: 86542

APPROVED BY

-- End of Report --

Name	ROOPA RAGHUPATHY BHAT	ID	MED111818777
Age & Gender	53-Female	Visit Date	9/9/2023 7:45:06 PM
Ref Doctor Name	MediWheel		



ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in size and shows slightly increased echotexture.

No evidence of focal lesion or intrahepatic biliary ductal dilatation.

Hepatic and portal vein radicals are normal.

GALL BLADDER show normal shape and has clear contents.

Gall bladder wall is of normal thickness. CBD is of normal calibre.

PANCREAS has normal shape, size and uniform echopattern.

No evidence of ductal dilatation or calcification.

SPLEEN show normal shape, size and echopattern.

No demonstrable Para-aortic lymphadenopathy.

KIDNEYS move well with respiration and have normal shape, size and echopattern.

Cortico- medullary differentiations are well madeout.

No evidence of calculus or hydronephrosis.

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	11.5	1.4
Left Kidney	11.1	1.3

URINARY BLADDER show normal shape and wall thickness.

It has clear contents. No evidence of diverticula.

UTERUS AND OVARIES are atrophic.

POD & adnexa are free.

No evidence of ascites.

IMPRESSION:

➤ **GRADE I FATTY CHANGES IN LIVER.**

CONSULTANT RADIOLOGISTS

REPORT DISCLAIMER

1.This is only a radiological impression.Like other investigations, radiological investigation also have limitation. Therefore radiological reports should be interpreted in correlation with clinical and pathological findings.

2.The results reported here in are subject to interpretation by qualified medical professionals only.

3.Customer identities are accepted provided by the customer or their representative.

4.information about the customer's condition at the time of sample collection such as fasting, food consumption, medication, etc are accepted as provided by the customer or representative and shall not be investigated for its truthfulness.

5.If any specimen/sample is received from any others laboratory/hospital,its is presumed that the sample belongs to the patient identified or named.

6.Test results should be interpreted in context of clinical and other findings if any.In case of any clarification /doubt , the referring doctor/patient can contact the respective section head of the laboratory.

7.Results of the test are influenced by the various factors such as sensitivity, specificity of the procedures of the tests, quality of the samples and drug interactions etc.,

8.If the test results are found not to be correlating clinically can contact the lab in charge for clarification or retesting where practicable within 24 hours from the time of issue of results.

9.Liability is limited to the extend of amount billed.

10.Reports are subject to interpretation in their entirety.partial or selective interpretation may lead to false opinion.

11.Disputes,if any , with regard to the report findings are subject to the exclusive jurisdiction of the competent courts chennai only.

Name	ROOPA RAGHUPATHY BHAT	ID	MED111818777
Age & Gender	53-Female	Visit Date	9/9/2023 7:45:06 PM
Ref Doctor Name	MediWheel		



DR. ANITHA ADARSH

AA/SV

DR. MOHAN B

REPORT DISCLAIMER

- 1.This is only a radiological impression.Like other investigations, radiological investigation also have limitation. Therefore radiological reports should be interpreted in correlation with clinical and pathological findings.
- 2.The results reported here in are subject to interpretation by qualified medical professionals only.
- 3.Customer identities are accepted provided by the customer or their representative.
- 4.information about the customer's condition at the time of sample collection such as fasting, food consumption, medication, etc are accepted as provided by the customer or representative and shall not be investigated for its truthfulness.
- 5.If any specimen/sample is received from any others laboratory/hospital,its is presumed that the sample belongs to the patient identified or named.
- 6.Test results should be interpreted in context of clinical and other findings if any.In case of any clarification /doubt , the referring doctor/patient can contact the respective section head of the laboratory.
- 7.Results of the test are influenced by the various factors such as sensitivity, specificity of the procedures of the tests, quality of the samples and drug interactions etc.,
- 8.If the test results are found not to be correlating clinically can contact the lab in charge for clarification or retesting where practicable within 24 hours from the time of issue of results.
- 9.Liability is limited to the extend of amount billed.
- 10.Reports are subject to interpretation in their entirety.partial or selective interpretation may lead to false opinion.
- 11.Disputes,if any , with regard to the report findings are subject to the exclusive jurisdiction of the competent courts chennai only.

Name	Mrs. ROOPA RAGHUPATHY BHAT	ID	MED111818777
Age & Gender	53Y/F	Visit Date	Sep 2 2023 7:45AM
Ref Doctor	MediWheel		

X - RAY CHEST PA VIEW

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

Impression: No significant abnormality detected.



DR. MOHAN. B
(DMRD, DNB, EDIR, FELLOW IN CARDIAC
MRI)
CONSULTANT RADIOLOGIST