







Name : Mr. B Sri Indusanan	UHID : 910019196 
Age/Gender : 27 Y 7 M 12 D / Male	Encounter No : OP912109284051 
Consultant : DR. Gopalaswamy G	
Lab No : 200013019	
Sample Requested At : 28/09/2021 09:26:27	
Sample Collected At : 28/09/2021 09:32:15	
Reported At : 28/09/2021 12:13:29	
Authorized At : 28/09/2021 12:25:27	

HEMATOLOGY

Parameter	Result	Units	Biological Reference Range	Methodology
Blood Group & Rh	O Positive			
Complete Blood Count (CBC)				
Haemoglobin	13.5	g%	13 - 17	COLORIMETRY
Haematocrit (PCV)	41.1	%	40 - 50	COLORIMETRY
Total WBC Count	5000	cells/cum m	4000 - 10000	FLOWCYTOMETRY
Platelet Count	281	thous/cum m	150 - 410	IMPEDANCE METHOD
ESR	05	mm/hr	0 -15	Photometrical capillary
Total RBC Count	4.73	mill/cumm	4.5 - 5.5	IMPEDANCE METHOD
MCV	86.9	fl	83 -101	Calculated Parameter
MCH	28.5	pg	27 - 32	Calculated Parameter
MCHC	32.8	%	31.5 -34.5	Calculated Parameter
Differential Count				
Polymorphs	59	%	40 - 80	FLOWCYTOMETRY
Lymphocytes	30	%	20 - 40	FLOWCYTOMETRY
Eosinophils	04	%	1-6	FLOWCYTOMETRY
Monocytes	07	%	2 -10	FLOWCYTOMETRY
Basophilis	00	%	0 - 2	FLOWCYTOMETRY



PRASHANTH HOSPITALS

Name : Mr. B Sri Indusanan	UHID : 910019196 
Age/Gender : 27 Y 7 M 12 D / Male	Encounter No : OP912109284051 
Consultant : DR. Gopaldaswamy G	
Lab No : 200013019	
Sample Requested At : 28/09/2021 09:26:27	
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HEMATOLOGY

Parameter	Result	Units	Biological Reference Range	Methodology
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*** End Of Report ***



C. Chidambharam

Seen By Doctor

Verified By
BANU PRIYA.S

Authorized By
DR.C.Chidambharam
M.D. DNB (Pathology) ,
Consultant Pathologist.



Name : Mr. B Sri Indusanan	UHID : 910019196 
Age/Gender : 27 Y 7 M 12 D / Male	Encounter No : OP912109284051 
Consultant : DR. Gopaldaswamy G	
Lab No : 100019457	
Sample Requested At : 28/09/2021 09:26:27	
Sample Collected At : 28/09/2021 09:32:15	
Reported At : 28/09/2021 13:06:10	
Authorized At : 28/09/2021 13:14:32	

BIOCHEMISTRY

Parameter	Result	Units	Biological Reference Range	Methodology
Plasma Glucose (F)	83	mg/dl	74 - 109	
Creatinine(serum)	0.8	mg/dl	0.7 - 1.2	
Uric Acid(serum)	4.6	mg/dl	3.4 - 7.0	
Lipid Profile				
Total Cholestrol	231	mg/dl	Desirable level : < 200 Borderline high : 200 - 239 High :> 240	
Triglycerides	75	mgs/dl	< 150	
HDL Cholesterol (Direct)	57	mg/dl	35 - 55	
LDL (Direct)	159	mg/dl	Adult levels Optimal: < 100 Above optimal :100 - 129 Borderline high : 130 - 159 High:160 - 189 Very high :>=190	
VLDL	15	mgs/dl	< 35	
Total HDL Ratio	4.1	mg/dl	3.5 - 5.5	
Liver Function Tests (LFT)				
Bilirubin Total	1.5	mg/dl	Newborns : 24hours : >= 8.0 48 hours : < 13.0 84 hours : < 17.0	
Bilirubin Direct	0.4	mg/dl	0.0 - 0.3	
Bilirubin Indirect	1.1	mg/dl	0.0 - 0.7	
SGOT (AST)	28	IU/L	upto 40	
SGPT (ALT)	31	IU/L	upto 40	
GGTP	18	U/L	upto 40	
Alkaline Phosphatase(serum)	83	U/L	40 - 129	
Total Proteins(serum)	7.5	g/dl	6.6 - 8.7	

Date : 28-09-2021 13:14

Page 1 of 2



Name : Mr. B Sri Indusanan
Age/Gender : 27 Y 7 M 12 D / Male
Consultant : DR. Gopaldaswamy G
Lab No : 100019457
Sample Requested At : 28/09/2021 09:26:27
Sample Collected At : 28/09/2021 09:32:15
Reported At : 28/09/2021 13:06:10
Authorized At : 28/09/2021 13:14:32

UHID : 910019196



Encounter No : OP912109284051



BIOCHEMISTRY

Parameter	Result	Units	Biological Reference Range	Methodology
Albumin(serum)	4.9	g/dl	3.5 - 5.2	
Globulin(serum)	2.6	gms/dl	2.8 - 5.3	
A/G Ratio	1.9		1 - 2	
BUN(Blood Urea Nitrogen)				
Blood Urea	23	mg/dl	17 - 49	
BUN(Blood Urea Nitrogen)	11	mgs/dl	Aug-23	
HbA1c	5.1	%	Non Diabetic : <6.0 Good Control : 6.0 - 7.0 Fair Control : 7.0 - 8.0 Poor Control : >8.0	
GTT Plasma 2 Hrs	81	mgs/dl	< 140	

*** End Of Report ***

Verified By
SONIYA.K

Seen By Doctor

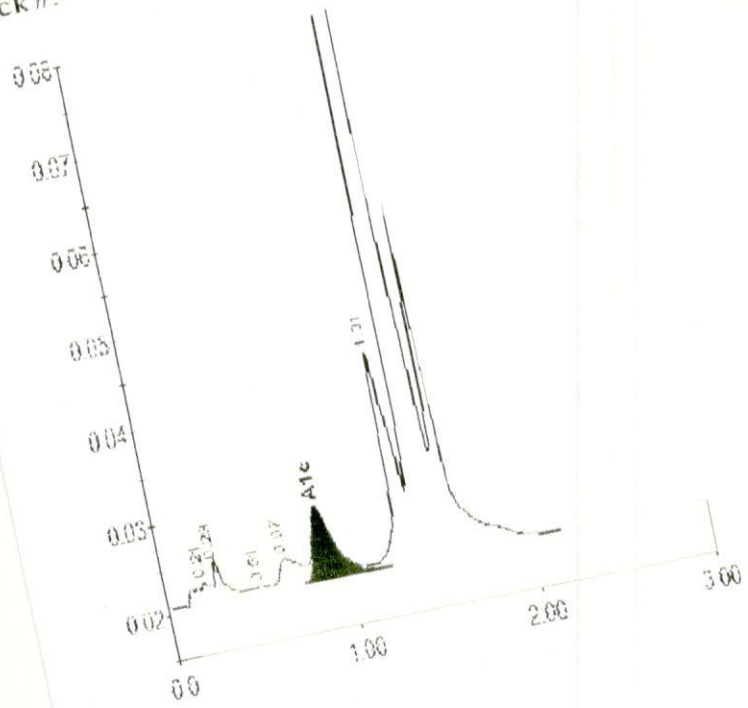
Authorized By
DR BALAKRISHNAN R MD
Consultant biochemistry

Patient report

BIO-RAD

Bio-Rad
D-10
S/N: #DJ911420430
Sample ID:
Injection date
Injection #: 11
Rack #: ---

DATE: 09/28/2021
TIME: 11:57 AM
Software version: 4.30-2
1000194579
09/28/2021 11:57 AM
Method: HbA1c
Rack position: 5



PRINTED IN U.S.A.



Peak table - ID: 1000194579

Peak	R.time	Height	Area	Area%
A1a	0.21	2450	16990	0.9
A1b	0.29	4787	18152	1.0
F	0.51	825	4078	0.2
LA1c/CHb-1	0.67	3253	26286	1.4
A1c	0.88	7751	63383	5.1
P3	1.31	22929	98494	5.4
A0	1.42	623305	1604909	87.6
Total Area:			1832292	

Concentration:	%
A1c	5.1

BIO-RAD



Name : Mr. B Sri Indusanan	UHID : 910019196 
Age/Gender : 27 Y 7 M 12 D / Male	Encounter No : OP912109284051 
Consultant : DR. Gopaldaswamy G	
Lab No : 7000009665	
Sample Requested At : 28/09/2021 09:26:27	
Sample Collected At : 28/09/2021 09:32:15	
Reported At : 28/09/2021 12:17:19	
Authorized At : 28/09/2021 12:18:26	

IMMUNOLOGY

Parameter	Results	Units	Biological Reference Range	Methodology
FreeT3	2.81	pg/ml	1.8 - 4.2	ECLIA Method
FreeT4	1.28	ng/dl	0.8 - 2.2	ECLIA Method
TSH	0.972	uIU/ml	0.4 - 7.0	ECLIA Method

*** End Of Report ***

Verified By
NAZEEMA.S

Seen By Doctor

DR BALAKRISHNAN R MD
Consultant biochemistry



Name : Mr. B Sri Indusanan
Age/Gender : 27 Y 7 M 12 D / Male
Consultant : DR. Gopalaswamy G
Lab No : 300004404
Sample Requested At : 28/09/2021 09:26:27
Sample Collected At : 28/09/2021 09:32:15
Reported At : 28/09/2021 11:02:38
Authorized At : 28/09/2021 11:20:55

UHID : 910019196



Encounter No : OP912109284051



CLINICAL PATHOLOGY

Parameter	Result	Units	Biological Reference Range	Methodology
Urine Routine				
colour	Pale Yellow			
pH	5.5			
Sp.Gravity	1.010			
Protein	Nil			
Glucose	Nil			
Leucocytes	Nil			
Nitrite	Nil			
Blood	Nil			
Ketone	Absent			
Bilirubin	Nil			
Urobilinogen	Normal			
Pus Cells	1 - 2 / hpf			
Epithelial cells	0 - 2 / hpf			
RBCs	Nil			
Casts	Nil			
Crystals	Nil			

*** End Of Report ***

C. Chidambharam

Seen By Doctor

Verified By
NAZEEMA.S

Authorized By
DR.C.Chidambharam
M.D. DNB (Pathology) ,
Consultant Pathologist.



EYE CHECK-UP REPORT

NAME : Mr. Sri Indusaran B

DATE : 28/09/2021

AGE / SEX : 27 / M

UHD NUM : 910019196

Chief complaints : Regular eye check up

Past history : —

Systemic Diseases : —

DISTANCE VISION :

WITH OUT GLASS : 6/60, N6 6/36, N6
WITH GLASS : 6/6, N6 6/6, N6
COLOR VISION : NORMAL / ABNORMAL

GLASS PRESCRIPTION :

EYE	SPH	CYL	AXIS	V/A	SPH	CYL	AXIS	V/A
DISTANCE	—	—	—	6/6	—	—	—	6/6
	3.00	—	—		2.50	—	—	
ADD	—	—	—	N6	—	—	—	N6

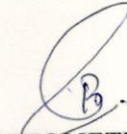
ANTERIOR SEGMENT : BE WNL

CORNEA & LENS :

REMARK : CONTINUE WITH SAME GLASSE ✓

ROUTINE CHECK UP AFTER 6/12 MONTH ✓

FUNDUSCOPY ONCE A YEAR


OPTOMETRIST



NAME : MR.B SRI INDUSANAN UHID : 910019196
OP NO : 912109284051 LAB ID : 180007963
AGE/SEX : 27 Y/Male Request Date : 28/09/2021 09:24:31
CONSULTANT : DR. GOPALASWAMY MS.,FRCS Report Date : 28/09/2021 13:44:10
Investigation Prescribed By : DR.GOPALASWAMY G MS.,FRCS

DEPARTMENT OF RADIOLOGY (X-RAY)

INVESTIGATION : XR - CHEST PA

Tracheal air column normal

Mediastinal position is within normal limits

Cardiac contour and cardiothoracic ratio are normal

Lung fields appear clear bilaterally

The cardiophrenic and costophrenic angles are free

Domes of the diaphragm are normal in position

Bony cage and chest wall show no significant abnormality

Impression:

No significant abnormality detected

DR RANJITHA S
CONSULTANT RADIOLOGIST

Mr. Sri Indusanan
ID: 910019196

27 Years
Male

28.09.2021 9:50:25
PRASANTH SUPERSPECIALITY
VELACHERY
CHENNAI

Location:
Order Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:

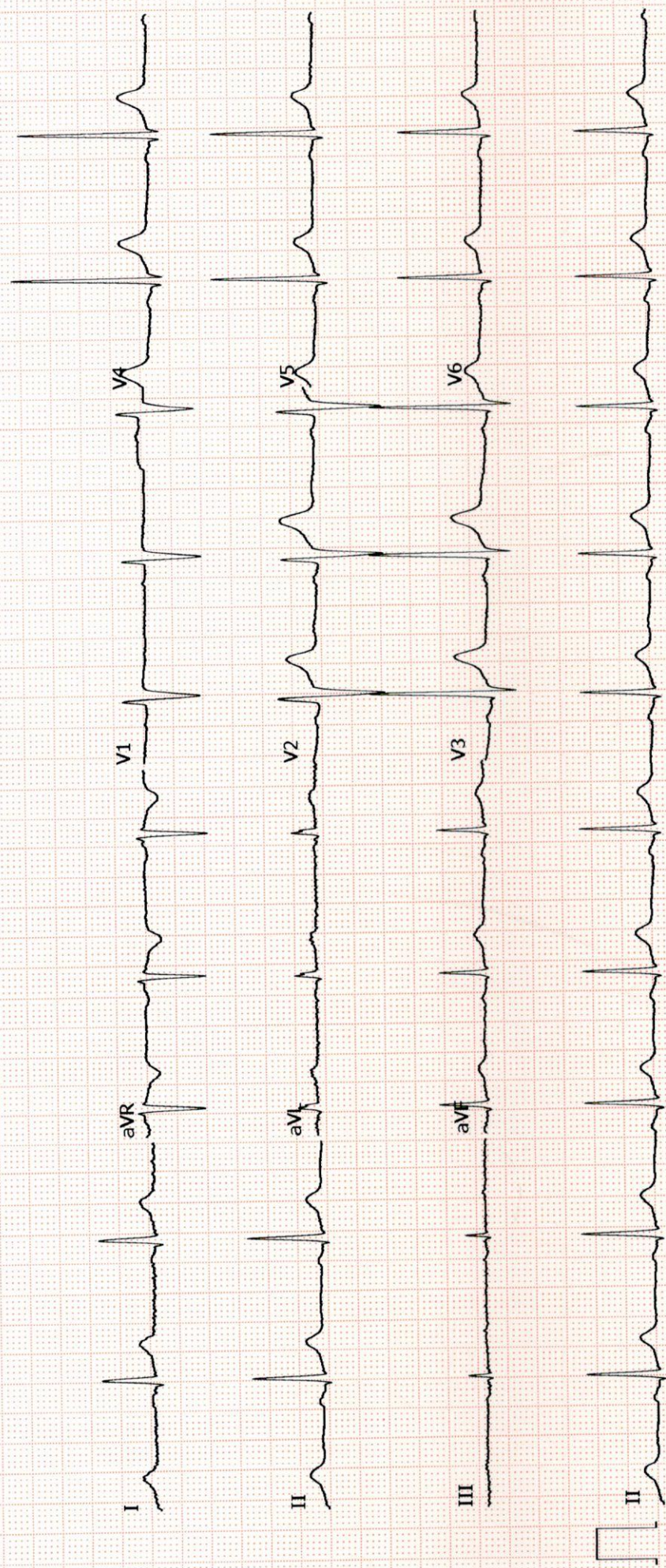
Room:

65 bpm
-- / -- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 98 ms
QT / QTcBaz : 396 / 411 ms
PR : 144 ms
P : 106 ms
RR / PP : 924 / 923 ms
P / QRS / T : 39 / 49 / 41 degrees

Normal sinus rhythm
Normal ECG





Patient Name	Mr. Sri Indusanan.B	Age / Sex	27 Y/ M
Patient ID	910019196	Visit No.	1
Ref. By	Dr. G.Gopaldaswamy	Visit Date	28.09.2021

USG Complete Abdomen

Upper Abdomen:

Liver normal in size measures 12.9 cm and filled with homogeneous parenchymal echoes. No abscess or mass lesion in the liver. No dilatation of intrahepatic biliary radicals seen. Gall bladder walls and lumen appeared normal. No calculi seen. Common duct appeared normal. No calculi seen. Portal vein and Pancreas appeared normal. Spleen measured 8.2 cm and appeared normal.

KUB

RT. Kidney measures 10.0 x 4.3 cm. Cortex appears normal. Cortico medullary differentiation is maintained. Pelvicalyceal system is not dilated. No calculus is seen. Right ureter is not dilated.

LT. Kidney measures 9.8 x 5.2 cm. Cortex appears normal. Cortico medullary differentiation is maintained. Pelvicalyceal system is not dilated. No calculus is seen. Left ureter is not dilated.

Urinary Bladder is normal in contour. No intra luminal echoes are seen. No calculus or diverticulum is seen.

Prostate: Appears normal in size and measures 2.2 x 4.2 x 2.4 cm (Vol = 11.9 cc). It shows homogenous echogenicity. No intravesical extension.

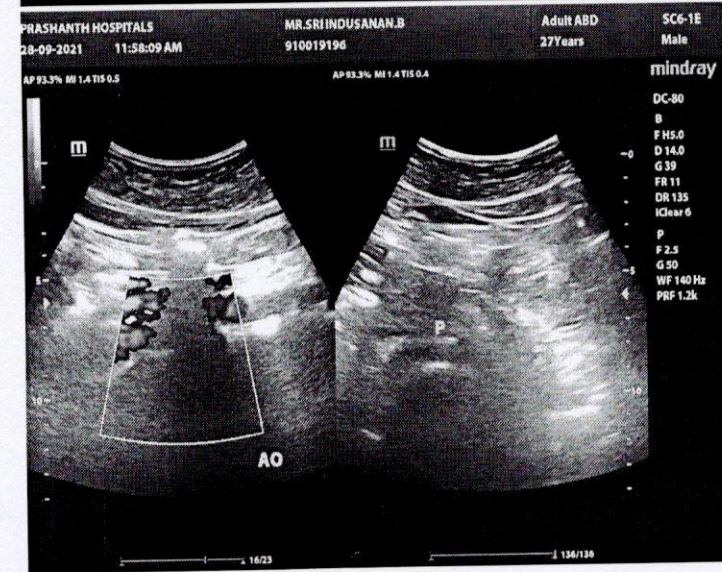
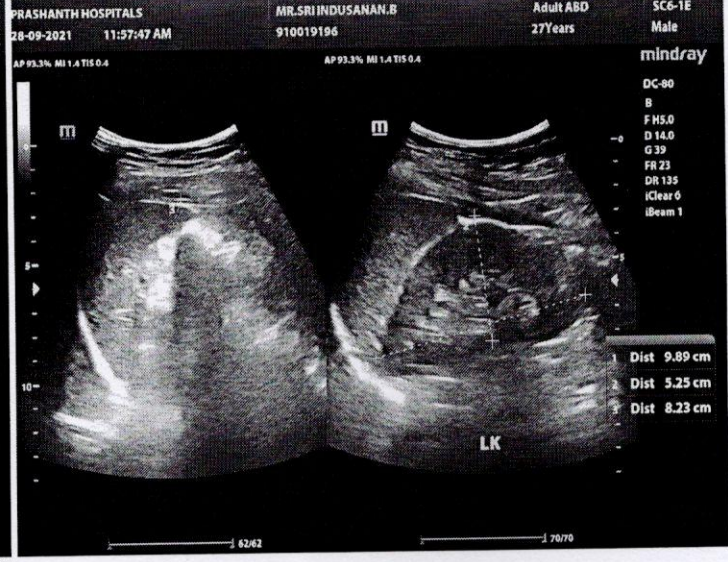
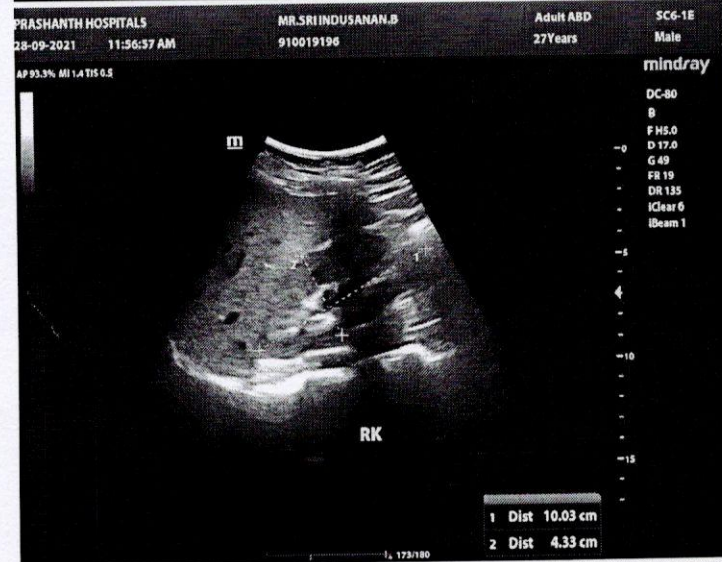
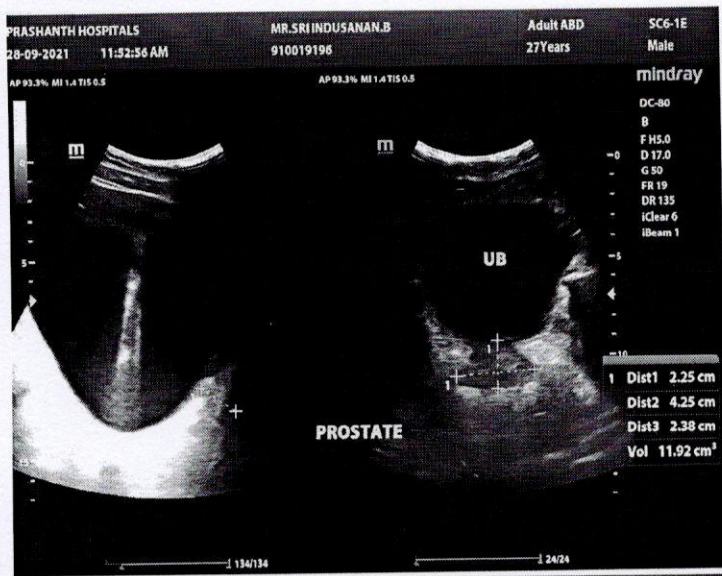
Retroperitoneum: Aorta and IVC appears normal. No obvious para aortic lymphadenopathy. No free fluid in peritoneal cavity. Pleural spaces appeared normal.

Impression:

- No significant abnormality detected in the visualized organs.


Dr. Kathiresan
Consultant Sonologist

Patient name	Mr. SRI INDUSANAN.B	Age/Sex	27 Years / Male
Patient ID	910019196	Visit No	1
Referred by	Dr. Gopalaswamy. G	Visit Date	28/09/2021





PRASHANTH HOSPITALS

NAME : MR.B SRI INDUSANAN
OP NO : 912109284051
AGE/SEX : 27 Y/Male
CONSULTANT : .

UHID : 910019196
LAB ID : 9121163680
Request Date : 28/09/2021 09:24:31
Report Date : 28/09/2021

DEPARTMENT OF CARDIOLOGY

INVESTIGATION : 2D ECHO/TMT

LV MEASUREMENTS

AO	27 mm	IVS	07 mm
LA	30 mm	LVPW	07 mm
LVID (ED)	45 mm	EF	65 %
LVID (ES)	29 mm	FS	35 %

MORPHOLOGICAL DATA

MITRAL VALVE :
AML : NORMAL
PML : NORMAL
CHORDAE : NORMAL
AORTIC VALVE : NORMAL
TRICUSPID VALVE : NORMAL
PULMONARY VALVE : NORMAL
ATRIA : NORMAL
RIGHT VENTRICLE : NORMAL
THROMBOSIS : NIL
INTER ATRIAL SEPTUM : INTACT
INTER VENTRICULAR SEPTUM : INTACT
AORTA : NORMAL
PULMONARY ARTERY : NORMAL
PERICARDIUM:- : NORMAL

A Unit of PRASHANTH FERTILITY RESEARCH CENTRE PVT. LTD.

No.36 & 36 A, Velachery Main Road, Velachery, Chennai - 600 042. ☎ +91 93 8099 8099
☎ +91 44 4680 5544 / 2243 9494 ✉ info@prashanthhospitals.org 🌐 www.prashanthhospitals.org



DOPPLER DATA :

MITRAL VALVE : â TRIVIAL - MR E : 93 cm/s, A : 60 cm/s
AORTIC VALVE : NO AR, NO AS, VEL :137 cm/s
PULMONARY VALVE : NO PR, NO PS, VEL : 130 cm/s
TRICUSPID VALVE : TRIVIAL TR / NO PAH / TRPG : 18 mmHg

IMPRESSION:

- * NO REGIONAL WALL MOTION ABNORMALITY
- * NORMAL LV DIMENSIONS WITH NORMAL LV SYSTOLIC AND DIASTOLIC FUNCTION (LVEF: 65 %)
- * NO PERICARDIAL EFFUSION
- * NO EVIDENCE OF CLOT OR VEGETATION

DONE BY :RAGHAVI.S
ECHO TECHNOLOGIST


DR.M. DINAKARAN.,MD.,DM.,FNB
SENIOR INTERVENTIONAL CARDIOLOGIST
DK HEART CARE TEAM