Name : **Ms. PADMAJA R**	**Register On** : 26/03/2022 7:40 AM	
PID No. : MED111034258	**Collection On** : 26/03/2022 8:43 AM	
SID No. : 922018262	**Report On** : 27/03/2022 5:37 PM	**MEDALL**
Age / Sex : 23 Year(s) / Female	**Report On** :	
Type : OP	**Printed On** : 29/03/2022 6:08 PM	
Ref. Dr : MediWheel		

Investigation	Observed Value	Unit	Biological Reference Interval
HAEMATOLOGY			
Complete Blood Count With - ESR			
Haemoglobin (EDTA Blood/*Spectrophotometry*)	**12.0**	g/dL	12.5 - 16.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood/*Derived from Impedance*)	37.0	%	37 - 47
RBC Count (EDTA Blood/*Impedance Variation*)	4.41	mill/cu.mm	4.2 - 5.4
Mean Corpuscular Volume(MCV) (EDTA Blood/*Derived from Impedance*)	84.0	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood/*Derived from Impedance*)	27.2	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood/*Derived from Impedance*)	32.4	g/dL	32 - 36
RDW-CV (EDTA Blood/*Derived from Impedance*)	14.0	%	11.5 - 16.0
RDW-SD (EDTA Blood/*Derived from Impedance*)	41.16	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood/*Impedance Variation*)	7500	cells/cu.mm	4000 - 11000
Neutrophils (EDTA Blood/*Impedance Variation & Flow Cytometry*)	51.0	%	40 - 75
Lymphocytes (EDTA Blood/*Impedance Variation & Flow Cytometry*)	38.6	%	20 - 45
Eosinophils (EDTA Blood/*Impedance Variation & Flow Cytometry*)	2.2	%	01 - 06

Dr.Arjun C.P
MBBS,MD Pathology
Reg No:KMC 89655

VERIFIED BY

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	:	**Ms. PADMAJA R**
PID No.	:	MED111034258
SID No.	:	922018262
Age / Sex	:	23 Year(s) / Female
Type	:	OP
Ref. Dr	:	**MediWheel**

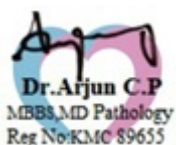| Register On | : | 26/03/2022 7:40 AM |
Collection On	:	26/03/2022 8:43 AM
Report On	:	27/03/2022 5:37 PM
Printed On	:	29/03/2022 6:08 PM

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval
Monocytes (EDTA Blood/*Impedance Variation & Flow Cytometry*)	7.8	%	01 - 10
Basophils (EDTA Blood/*Impedance Variation & Flow Cytometry*)	0.4	%	00 - 02
Absolute Neutrophil count (EDTA Blood/*Impedance Variation & Flow Cytometry*)	3.83	$10^3 / \mu l$	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/*Impedance Variation & Flow Cytometry*)	2.90	$10^3 / \mu l$	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/*Impedance Variation & Flow Cytometry*)	0.17	$10^3 / \mu l$	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/*Impedance Variation & Flow Cytometry*)	0.58	$10^3 / \mu l$	< 1.0
Absolute Basophil count (EDTA Blood/*Impedance Variation & Flow Cytometry*)	0.03	$10^3 / \mu l$	< 0.2
Platelet Count (EDTA Blood/*Impedance Variation*)	328	$10^3 / \mu l$	150 - 450
MPV (EDTA Blood/*Derived from Impedance*)	**7.7**	fL	8.0 - 13.3
PCT (EDTA Blood/*Automated Blood cell Counter*)	0.25	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (EDTA Blood/*Modified Westergren*)	**22**	mm/hr	< 20
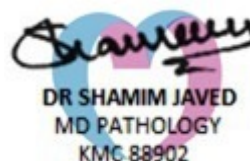
Dr.Arjun C.P
MBBS,MD Pathology
Reg No:KMC 89655

VERIFIED BY

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	:	**Ms. PADMAJA R**		
PID No.	:	MED111034258	**Register On** :	26/03/2022 7:40 AM
SID No.	:	922018262	**Collection On** :	26/03/2022 8:43 AM
Age / Sex	:	23 Year(s) / Female	**Report On** :	27/03/2022 5:37 PM
Type	:	OP	**Printed On** :	29/03/2022 6:08 PM
Ref. Dr	:	**MediWheel**		

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval
BIOCHEMISTRY			
Liver Function Test			
Bilirubin(Total) (Serum/*Diazotized Sulfanilic Acid)*	0.3	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/*Diazotized Sulfanilic Acid)*	0.2	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/*Derived)*	0.1	mg/dL	0.1 - 1.0
Total Protein (Serum/*Biuret)*	6.9	gm/dL	6.0 - 8.0
Albumin (Serum/*Bromocresol green)*	4.1	gm/dL	3.5 - 5.2
Globulin (Serum/*Derived)*	2.8	gm/dL	2.3 - 3.6
A : G Ratio (Serum/*Derived)*	1.5		1.1 - 2.2
SGOT/AST (Aspartate Aminotransferase) (Serum/*IFCC Kinetic)*	11	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/*IFCC / Kinetic)*	7	U/L	5 - 41
Alkaline Phosphatase (SAP) (Serum/*IFCC Kinetic)*	89	U/L	42 - 98
GGT(Gamma Glutamyl Transpeptidase) (Serum/*SZASZ standarised IFCC)*	12	U/L	< 38

Dr.Arjun C.P
MBBS,MD Pathology
Reg No:KMC 89655

VERIFIED BY

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	:	**Ms. PADMAJA R**
PID No.	:	MED111034258
SID No.	:	922018262
Age / Sex	:	23 Year(s) / Female
Type	:	OP
Ref. Dr	:	**MediWheel**

Register On	:	26/03/2022 7:40 AM
Collection On	:	26/03/2022 8:43 AM
Report On	:	27/03/2022 5:37 PM
Printed On	:	29/03/2022 6:08 PM

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval
Lipid Profile			
Cholesterol Total (Serum/*Cholesterol oxidase/Peroxidase*)	173	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/*Glycerol phosphate oxidase / peroxidase*)	65	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >=500

INTERPRETATION: The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the "usual" circulating level of triglycerides during most part of the day.

Investigation	Observed Value	Unit	Biological Reference Interval
HDL Cholesterol (Serum/*Immunoinhibition*)	**53**	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 50 - 59 High Risk: < 50
LDL Cholesterol (Serum/*Calculated*)	107	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >=190
VLDL Cholesterol (Serum/*Calculated*)	13	mg/dL	< 30
Non HDL Cholesterol (Serum/*Calculated*)	120.0	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.

Dr.Arjun C.P
MBBS,MD Pathology
Reg No:KMC 89655

VERIFIED BY
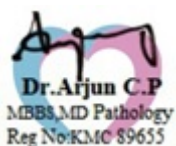
DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

The results pertain to sample tested.

Name	: **Ms. PADMAJA R**		
PID No.	: MED111034258	**Register On** : 26/03/2022 7:40 AM	
SID No.	: 922018262	**Collection On** : 26/03/2022 8:43 AM	
Age / Sex	: 23 Year(s) / Female	**Report On** : 27/03/2022 5:37 PM	
Type	: OP	**Printed On** : 29/03/2022 6:08 PM	
Ref. Dr	: **MediWheel**		

Investigation	Observed Value	Unit	Biological Reference Interval
Total Cholesterol/HDL Cholesterol Ratio (Serum/*Calculated*)	3.3		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*)	1.2		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/*Calculated*)	2		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
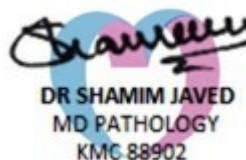
Dr.Arjun C.P
MBBS,MD Pathology
Reg No:KMC 89655

VERIFIED BY

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	: **Ms. PADMAJA R**		
PID No.	: MED111034258	**Register On**	: 26/03/2022 7:40 AM
SID No.	: 922018262	**Collection On** :	26/03/2022 8:43 AM
Age / Sex	: 23 Year(s) / Female	**Report On** :	27/03/2022 5:37 PM
Type	: OP	**Printed On** :	29/03/2022 6:08 PM
Ref. Dr	: **MediWheel**		

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval
Glycosylated Haemoglobin (HbA1c)			
HbA1C (Whole Blood/*HPLC)*	**6.0**	*%*	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %
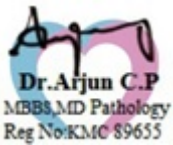
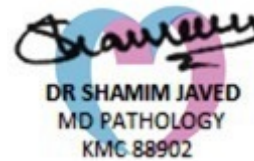|			
Estimated Average Glucose (Whole Blood*)*	125.5	mg/dL	

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 glycemic 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.

Dr.Arjun C.P
 MBBS,MD Pathology
 Reg No:KMC 89655

VERIFIED BY

DR SHAMIM JAVED
 MD PATHOLOGY
 KMC 88902

APPROVED BY

Name	:	**Ms. PADMAJA R**
PID No.	:	MED111034258
SID No.	:	922018262
Age / Sex	:	23 Year(s) / Female
Type	:	OP
Ref. Dr	:	**MediWheel**

Register On	:	26/03/2022 7:40 AM
Collection On	:	26/03/2022 8:43 AM
Report On	:	27/03/2022 5:37 PM
Printed On	:	29/03/2022 6:08 PM

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval

IMMUNOASSAY

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/*CMIA)*	1.41	ng/mL	0.7 - 2.04

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/*CMIA)*	9.70	µg/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 Microparticle Immunoassay(CMIA))*	2.42	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&amplt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902
APPROVED BY

Name	:	**Ms. PADMAJA R**			
PID No.	:	MED111034258	**Register On**	:	26/03/2022 7:40 AM
SID No.	:	922018262	**Collection On**	:	26/03/2022 8:43 AM
Age / Sex	:	23 Year(s) / Female	**Report On**	:	27/03/2022 5:37 PM
Type	:	OP	**Printed On**	:	29/03/2022 6:08 PM
Ref. Dr	:	**MediWheel**			

Investigation	Observed Value	Unit	Biological Reference Interval

CLINICAL PATHOLOGY

PHYSICAL EXAMINATION

Colour (Urine)	Pale Yellow		
Appearance (Urine)	Clear		Clear
Volume (Urine)	20	mL	

CHEMICAL EXAMINATION(Automated-Urineanalyser)

pH (Urine/*AUTOMATED URINANALYSER*)	6.0		4.5 - 8.0
Specific Gravity (Urine)	1.025		1.002 - 1.035
Ketones (Urine)	Negative		Negative
Urobilinogen (Urine/*AUTOMATED URINANALYSER*)	0.2		0.2 - 1.0
Blood (Urine/*AUTOMATED URINANALYSER*)	Negative		Negative
Nitrite (Urine/*AUTOMATED URINANALYSER*)	Negative		Negative
Bilirubin (Urine/*AUTOMATED URINANALYSER*)	Negative		Negative
Protein (Urine)	Negative		Negative
Glucose (Urine)	Negative		Negative

Dr.Arjun C.P
MBBS,MD Pathology
Reg No:KMC 89655
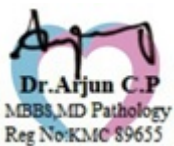
VERIFIED BY

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	: **Ms. PADMAJA R**			
PID No.	: MED111034258	**Register On**	:	26/03/2022 7:40 AM
SID No.	: 922018262	**Collection On**	:	26/03/2022 8:43 AM
Age / **Sex**	: 23 Year(s) / Female	**Report On**	:	27/03/2022 5:37 PM
Type	: OP	**Printed On**	:	29/03/2022 6:08 PM
Ref. Dr	: **MediWheel**			

Investigation	Observed Value	Unit	Biological Reference Interval
Leukocytes (Urine)	Negative	leuco/uL	Negative

MICROSCOPY(URINE DEPOSITS)

Investigation	Observed Value	Unit	Biological Reference Interval
Pus Cells (Urine/*Flow cytometry*)	0-2	/hpf	3-5
Epithelial Cells (Urine)	0-2	/hpf	1-2
RBCs (Urine/*Flow cytometry*)	Nil	/hpf	NIL
Others (Urine)	Nil		Nil
Casts (Urine/*Flow cytometry*)	Nil	/hpf	0 - 1
Crystals (Urine)	Nil		NIL

Dr.Arjun C.P
MBBS,MD Pathology
Reg No:KMC 89655

VERIFIED BY

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	:	Ms. PADMAJA R
PID No.	:	MED111034258
SID No.	:	922018262
Age / Sex	:	23 Year(s) / Female
Type	:	OP
Ref. Dr	:	MediWheel

Register On	:	26/03/2022 7:40 AM
Collection On	:	26/03/2022 8:43 AM
Report On	:	27/03/2022 5:37 PM
Printed On	:	29/03/2022 6:08 PM

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval

BIOCHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
BUN / Creatinine Ratio	13		6 - 22
Glucose Fasting (FBS) (Plasma - F/*GOD - POD)*	92	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.

Glucose Fasting - Urine (Urine - F)	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/*GOD - POD)*	102 (Rechecked)	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.

Glucose Postprandial - Urine (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/*Urease-GLDH)*	8	mg/dL	7.0 - 21
Creatinine (Serum/*Jaffe Kinetic)*	0.6	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)*	4.3	mg/dL	2.6 - 6.0

Dr.Arjun C.P
MBBS,MD Pathology
Reg No:KMC 89655

VERIFIED BY

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	:	**Ms. PADMAJA R**
PID No.	:	MED111034258
SID No.	:	922018262
Age / Sex	:	23 Year(s) / Female
Type	:	OP
Ref. Dr	:	**MediWheel**

Register On	:	26/03/2022 7:40 AM
Collection On	:	26/03/2022 8:43 AM
Report On	:	27/03/2022 5:37 PM
Printed On	:	29/03/2022 6:08 PM

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval

IMMUNOHAEMATOLOGY

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

DR .VANITHA.R.SWAMY MD
Consultant Pathologist
Reg No : 99049
VERIFIED BY

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902
APPROVED BY

-- End of Report --

आधार

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ

భారత ప్రభుత్వం
Unique Identification Authority of India
Government of India

రిజిస్ట్రేషన్/ Enrolment No.: 2052/30733/38707

To
ఆర్ పద్మజ
R Padmaja
W/O R Nagarjuna
5-525
geetha nagar
somandepalli
Somandepalle
Somandepalli
Ananthapuramu Andhra Pradesh - 515122
9441667535

Download Date: 03/01/2018

Generation Date: 18/10/2017

Signature valid
Digitally signed by
UNIQUE IDENTIFICATION
AUTHORITY OF INDIA 03
Date: 2018.01.03 18:56:31
IST

మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

5224 7201 1044

నా ఆధార్, నా గుర్తింపు

భారత ప్రభుత్వం
Government of India

ఆర్ పద్మజ
R Padmaja
పుట్టిన తేదీ/DOB: 16/04/1998
స్త్రీ/ FEMALE

5224 7201 1044

నా ఆధార్, నా గుర్తింపు

Sign-up & Health Assessment Form

To be filled by Customer

ame: Mr/Ms/Mrs **P A P M A j A**

ender: O Male O Female   Age: **2 3** years   DOB: [ ] / [ ] / [ ]

lobile: [ ]   Pincode: [ ]

mail: [ ]

Bar code

Vitals

To be filled by Technician

Height:	**1 5 5** .	cms
Waist:	**2 8** .	in.
Hip:	**3 7** .	in.
Weight:	**5 2 . 4**	kg
Fat:	**3 2 . 3**	%
Visc. Fat:	**3 . 5**	%
RM:	**1 1 4 6**	cal
BMI:	**2 1 . 8**	kg/m^2
Body Age:	**3 0**	years
Sys. BP:	**1 0 3**	mmHg
Dia. BP:	**7 4**	mmHg

63 plure.

To be filled by Customer

Medical History

Have you been previously diagnosed with?

Diabetes (Sugar)	O Yes	O No
Hypertension (BP)	O Yes	O No
Cardiovascular Disease (Heart)	O Yes	O No
Asthma/Allergies (Dust, Pollen, Food, Animals, etc.)	O Yes	O No
Neurological Problems (Nerve)	O Yes	O No

Are you currently taking medications for?

Diabetes (Sugar)	O Yes	O No
Hypertension (BP)	O Yes	O No
Cardiovascular Disease (Heart)	O Yes	O No
Liver Disease	O Yes	O No
Cancer	O Yes	O No
Tuberculosis (TB)	O Yes	O No

Family History

Is there a history of below diseases in your family?

Diabetes (Sugar)	O Yes	O No
Hypertension (BP)	O Yes	O No
Cardiovascular Disease (Heart)	O Yes	O No
Cancer	O Yes	O No

Lifestyle

Do you exercise regularly?	O Yes	O No
Do you consume alcohol more than 2 times a week?	O Yes	O No
Do you smoke/chew tobacco?	O Yes	O No
Are you vegetarian?	O Yes	O No

General

Do you see a doctor at least once in 6 months?	O Yes	O No
Do you undergo a health checkup every year?	O Yes	O No

How would you rate your overall Health?

Excellent	Good	Normal	Poor	Very Poor
O	O	O	O	O

Women's Health

Is there a family history of Breast Cancer?	O Yes	O No
Is there a family history of Endometrial (Uterus) Cancer?	O Yes	O No
Is there a family history of Ovarian Cancer?	O Yes	O No
Do you have irregular periods?	O Yes	O No
Do you have heavy bleeding during periods?	O Yes	O No
Do you have scanty periods?	O Yes	O No
Have you attained Menopause?	O Yes	O No
Do you have children?	O Yes	O No
Was it a normal delivery?	O Yes	O No
Did you have diabetes/hypertension during delivery?	O Yes	O No

Signature:

Customer Name	R. Padmaja.	Customer ID	111034258
Age & Gender	24 , Female	Visit Date	26/03/92

Eye Screening

With spectacles / without spectacles (strike out whichever is not applicable)

	Right Eye	Left Eye
Near Vision	N6	N6
Distance Vision	6/6	6/6
Colour Vision	Normal	Normal

Observation / Comments: — Normal.

Dr. RAVI V. HALAKATTI
M.S. (OPHTH)
EYE SURGEON
Regd. No. 11801

Ms.PADMAJA
ID : 111034258

23 Years   Female

Vital Signs™   226 166 05

26.03.2022   8:53:17
CLUMAX DIAGNOSTICS
JAYANAGAR
BANGALORE

QRS :   66 ms
QT / QTcBaz :   394 / 418 ms
PR :   110 ms
P :   72 ms
RR / PP :   886 / 882 ms
P / QRS / T :   52 / 63 / 48 degrees

(Needs Clinical Correlation
for further Management)

Dr. SRIDHAR. L.
MD(Med), DM(Cardio), FICC
Interventional Cardiologist
K.M.C. No. 32248

Technician : koms
Ordering Ph :
Referring Ph : MEDIWHEEL
Attending Ph :

CE 0537   LOT D 661

68 bpm
-- / -- mmHg
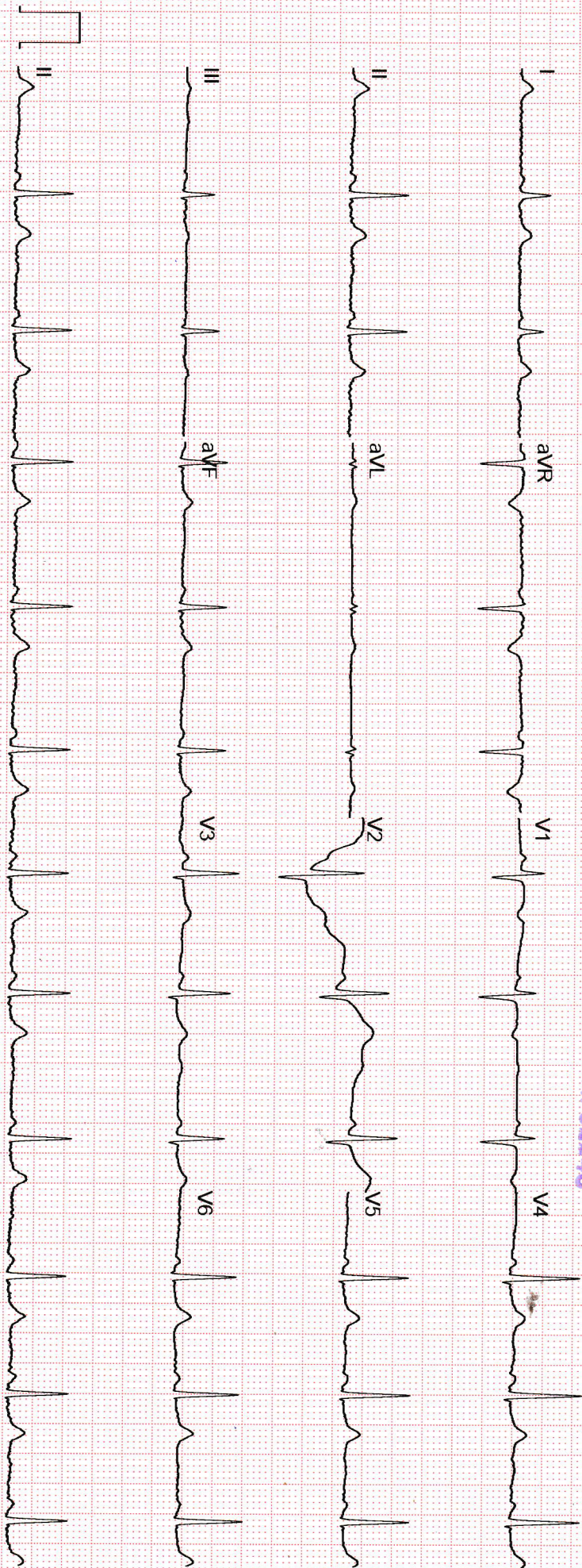
GE   MAC2000   1.1   12SL™ v241   25 mm/s   10 mm/mV   ADS   0.56-20 Hz   50 Hz   4x2.5x3_25_R1   Unconfirmed   1/1

I   aVR   V1   V4

II   aVL   V2   V5

III   aVF   V3   V6

II

Name	PADMAJA R	Customer ID	MED111034258
Age & Gender	23Y/F	Visit Date	Mar 26 2022 8:42AM
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: ***Essentially normal study.***

DR. H.K. ANAND   DR. SHWETHA S   DR. PRAJNA SHENOY   DR. MAHESH M S

CONSULTANT RADIOLOGISTS

Name	MS.PADMAJA R	ID	MED111034258
Age & Gender	23Y/FEMALE	Visit Date	26/03/2022
Ref Doctor	MediWheel		

ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in shape, size and has uniform echopattern.
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.

The kidney measures as follows

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	9.4	1.3
Left Kidney	8.7	1.6

URINARY BLADDER show normal shape and wall thickness.
It has clear contents.   No evidence of diverticula.

UTERUS is anteverted and has normal shape and size.
It has uniform myometrial echopattern.
Endometrial echo is of normal thickness – 7.0mms.
Uterus measures as follows:
LS: 8.3cms   AP: 3.1cms   TS: 4.7cms.

..2

You can also conveniently view the reports and trends

Please produce bill copy at the time of collecting the
reports. Request you to provide your mobile number or

:2:

OVARIES are normal size, shape and echotexture
Ovaries measures as follows:
Right ovary: 2.7 x 1.4cms.
Left ovary: 2.5 x 1.5cms.

Minimal fluid is seen in POD

Adnexa are free.

Impression: **_No sonological abnormality detected._**

CONSULTANT RADIOLOGISTS:

DR. H. K. ANAND   **DR. PRAJNA SHENOY**   **DR. MAHESH. M. S**   **DR. RADHA KRISHNA. A.**

DR. HIMA BINDU.P
Ms/pu

Name	MS.PADMAJA R	ID	MED111034258
Age & Gender	23Y/FEMALE	Visit Date	26/03/2022
Ref Doctor	MediWheel		

2D ECHOCARDIOGRAPHIC STUDY

M mode measurement:

AORTA		:	2.94	cms
LEFT ATRIUM		:	2.53	cms
AVS		:	1.22	cms
LEFT VENTRICLE	(DIASTOLE)	:	4.29	cms
	(SYSTOLE)	:	2.82	cms
VENTRICULAR SEPTUM	(DIASTOLE)	:	0.61	cms
	(SYSTOLE)	:	1.59	cms
POSTERIOR WALL	(DIASTOLE)	:	0.82	cms
	(SYSTOLE)	:	1.96	cms
EDV		:	82	ml
ESV		:	30	ml
FRACTIONAL SHORTENING		:	34	%
EJECTION FRACTION		:	63	%
EPSS		:		cms
RVID		:	1.67	cms

DOPPLER MEASUREMENTS

MITRAL VALVE	: 'E' -1.21m/s 'A' -0.47m/s		**TRIVIAL MR**
AORTIC VALVE	:1.24 m/s		NO AR
TRICUSPID VALVE	: 'E' -0.68m/s 'A' - m/s		NO TR
PULMONARY VALVE	:0.84 m/s		NO PR

You can also conveniently view the reports and trends

Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or

Name	MS.PADMARAJA R	ID	MED111034258
Age & Gender	23Y/FEMALE	Visit Date	26/03/2022
Ref Doctor	MediWheel		

medall
DIAGNOSTICS
experts who care

:2:

2D ECHOCARDIOGRAPHY FINDINGS:

Left Ventricle	:	Normal size, Normal systolic function. No regional wall motion abnormalities
Left Atrium	:	Normal
Right Ventricle	:	Normal
Right Atrium	:	Normal.
Mitral valve	:	Normal, No mitral valve prolapse.
Aortic valve	:	Normal,Trileaflet
Tricuspid valve	:	Normal.
Pulmonary valve	:	Normal.
IAS	:	Intact.
IVS	:	Intact.
Pericardium	:	No Pericardial effusion.

IMPRESSION :

- ➤ **TRIVIAL MITRAL REGURGITATION**
- ➤ **NORMAL SIZED CARDIAC CHAMBERS.**
- ➤ **NORMAL LV SYSTOLIC FUNCTION. EF : 63 %**
- ➤ **NO REGIONAL WALL MOTION ABNORMALITIES.**
- ➤ **NO CLOTS / PERICARDIAL EFFUSION / VEGETATION.**

(KINDLY CORRELATE CLINICALLY AND WITH ECG)

DR.SRIDHAR.L   MD,DM,FICC.
CONSULTANT CARDIOLOGIST
Ls/ml

Dr. SRIDHAR .L
MD,(Med), DM(Cardio), FICC
Interventional Cardiologist
KMC No. 32340