

Name	MRS.NAIR MINI SREENIVASAN	ID	MED111551533
Age & Gender	51Y/FEMALE	Visit Date	25/03/2023
Ref Doctor	MediWheel		

2D ECHOCARDIOGRAPHY

Chambers

- Left ventricle : normal in size, No RWMA at Rest.
- Left Atrium : Normal
- Right Ventricle : Normal
- Right Atrium : Normal

Septa

- IVS : Intact
- IAS : Intact

Valves

- Mitral Valve : Normal.
- Tricuspid Valve : Normal, trace TR, No PAH
- Aortic valve : Tricuspid, Normal Mobility
- Pulmonary Artery : Normal

Great Valves

- Aorta : Normal
- Pulmonary Artery : Normal

Pericardium : Normal

Doppler Echocardiography

Mitral valve	E	0.71	m/sec	A	0.83	m/sec	E/a: 0.86
Aortic Valve	V max	1.24	m/sec	PG	6.2	mm	
Diastolic Dysfunction				NONE			

:2:



Name	MRS.NAIR MINI SREENIVASAN	ID	MED111551533
Age & Gender	51Y/FEMALE	Visit Date	25/03/2023
Ref Doctor	MediWheel		

M – Mode Measurement

Parameter	Observed Valve	Normal Range	
Aorta	27	26-36	Mm
Left Atrium	28	27-38	Mm
IVS	10	09-11	Mm
Left Ventricle - Diastole	46	42-59	Mm
Posterior wall - Diastole	10	09-11	Mm
IVS - Systole	14	13 - 15	Mm
Left Ventricle - Systole	28	21-40	Mm
Posterior Wall - Systole	14	13-15	Mm
Ejection Fraction	60	- >50	%

IMPRESSION:

- **NORMAL SIZED CARDIAC VALVES AND CHAMBERS**
- **NO RWMA'S AT REST**
- **NORMAL LV & RV SYSTOLIC FUNCION LVEF – 60%**
- **NORMAL DIASTOLIC FUNCTION**
- **NO PERICARDIAL EFFUSION / VEGETATION / CLOT.**

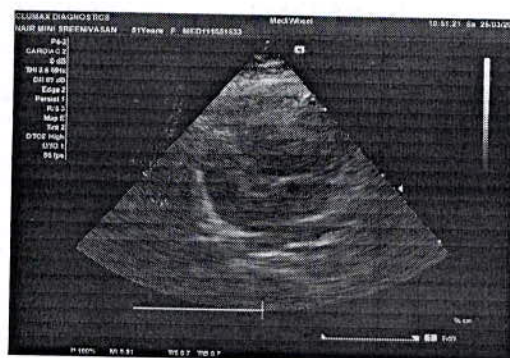
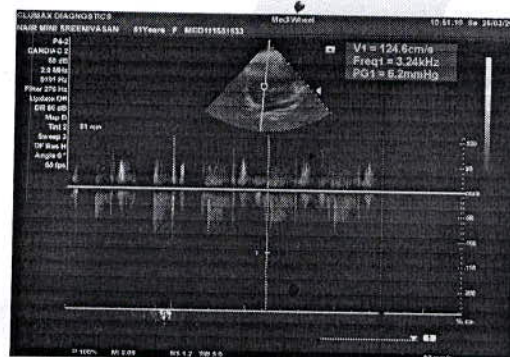
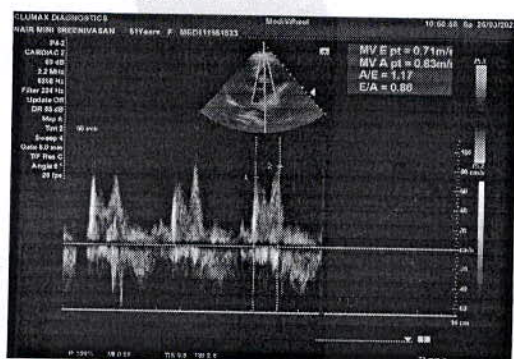
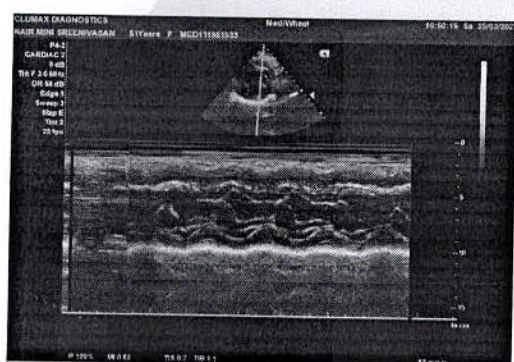
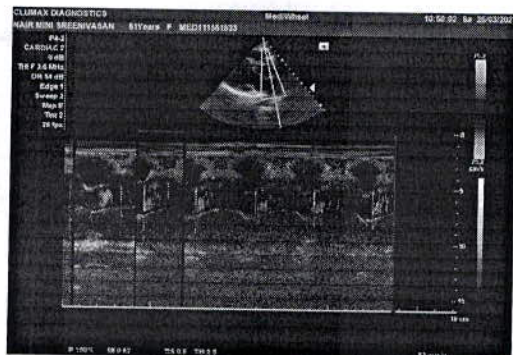


DR RAMNARESH SOUDRI
MD DM (CARDIOLOGY)
INTERVENTIONAL CARDIOLOGIST
Rs/ s



Clumax Diagnostic and Research Centre Pvt. Ltd.
68/150/3, Sri Lakshmi Towers

Name	MRS.NAIR MINI SREENIVASAN	ID	MED111551533
Age & Gender	51Y/FEMALE	Visit Date	25/03/2023
Ref Doctor	MediWheel		



You can also conveniently view the reports and trends through our App. Scan QR code to download the App.



Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.

Name	NAIR MINI SREENIVASAN	Customer ID	MED111551533
Age & Gender	51Y/F	Visit Date	Mar 25 2023 8:15AM
Ref Doctor	MediWheel		

X - RAY CHEST PA VIEW

Bilateral lungs appear normal.

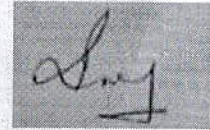
Cardiac silhouette is normal.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Bony thorax appears normal.

Impression: No significant abnormality detected



**Dr. Roopa Seshadri MD., DM
Radiologist Consultant**



Name	MRS.NAIR MINI SREENIVASAN	ID	MED111551533
Age & Gender	51Y/FEMALE	Visit Date	25/03/2023
Ref Doctor	MediWheel		

ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in shape, size and has increased echopattern.
No evidence of focal lesion or intrahepatic biliary ductal dilatation.
Hepatic and portal vein radicals are normal.

GALL BLADDER is partially distended.
Gall bladder wall is of normal thickness.
CBD is of normal calibre.

PANCREAS visualized portion of head and body appear normal.
Tail is obscured by bowel gas.

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	9.6	1.1
Left Kidney	10.0	1.2

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

UTERUS is anteverted and bulky in size.

Multiple intramural fibroids are seen measuring as follows:

- Largest measuring 3.5 x 3.1cms in the anterior myometrial wall.
- Largest measuring 5.2 x 2.9cms in the posterior myometrial wall.

Few subserosal fibroids are seen, largest measuring 3.3 x 2.6cms in the fundal region.
Endometrial echo is of normal thickness – 6.4mms.

Uterus measures as follows:

LS: 12.8cms AP: 8.1cms TS: 6.4cms.

..2



Name	MRS.NAIR MINI SREENIVASAN	ID	MED111551533
Age & Gender	51Y/FEMALE	Visit Date	25/03/2023
Ref Doctor	MediWheel		

:2:

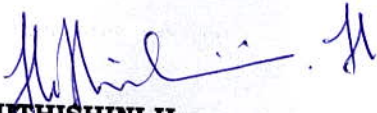
OVARIES are normal size, shape and echotexture
Ovaries measures as follows:
Right ovary: 3.6 x 1.5cms.
Left ovary: 3.1 x 1.4cms.

POD & adnexa are free.

No evidence of ascites.

Impression:

- **Bulky uterus with fibroids.**
- **Increased hepatic echopattern suggestive of fatty infiltration.**



DR. HITHISHINI H
CONSULTANT RADIOLOGIST
Transcribed By: Deepak



Clumax Diagnostic and Research Centre Pvt. Ltd.
68/150/3, Sri Lakshmi Towers

Name	MRS.NAIR MINI SREENIVASAN	ID	MED111551533
Age & Gender	51Y/FEMALE	Visit Date	25/03/2023
Ref Doctor	MediWheel		



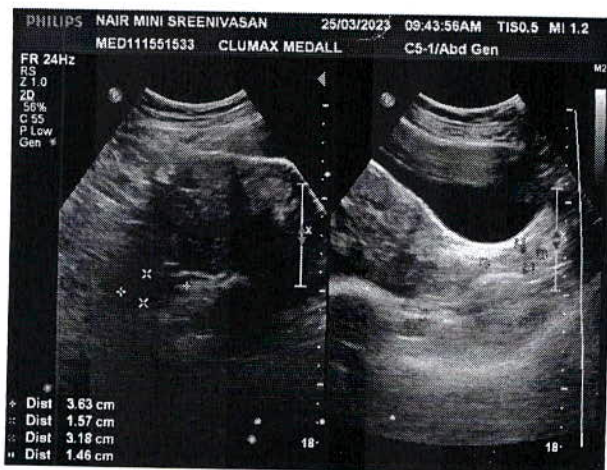
You can also conveniently view the reports and trends through our App. Scan QR code to download the App.



Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.

Clumax Diagnostic and Research Centre Pvt. Ltd.
68/150/3, Sri Lakshmi Towers

Name	MRS.NAIR MINI SREENIVASAN	ID	MED111551533
Age & Gender	51Y/FEMALE	Visit Date	25/03/2023
Ref Doctor	MediWheel		



You can also conveniently view the reports and trends through our App. Scan QR code to download the App.



Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.

Name	MRS.NAIR MINI SREENIVASAN	ID	MED111551533
Age & Gender	51Y/FEMALE	Visit Date	25/03/2023
Ref Doctor	MediWheel		

X-ray mammogram (mediolateral oblique and craniocaudal views) followed by Sonomammography was performed.

BILATERAL MAMMOGRAPHY

Breast composition category III -The breasts are heterogeneously dense fibroglandular tissue, which may obscure small masses

Macrocalcifications are seen scattered in central quadrant of left breast

No evidence of cluster microcalcification.

Subcutaneous fat deposition is within normal limits.

BILATERAL SONOMAMMOGRAPHY

Bilateral breasts show heterogeneously hyperechoic parenchymal echotexture.

No evidence of focal solid / cystic areas.

No evidence of ductal dilatation.

Benign appearing bilateral axillary lymphnodes are seen, largest measuring 6 x 4mm (right) and 7 x 5mm (left).

Impression: Mild fibroadenosis in bilateral breasts

ASSESSMENT: BI-RADS CATEGORY -2

BI-RADS CLASSIFICATION

CATEGORY RESULT

2 Benign finding. Routine mammogram in 1 year recommended.



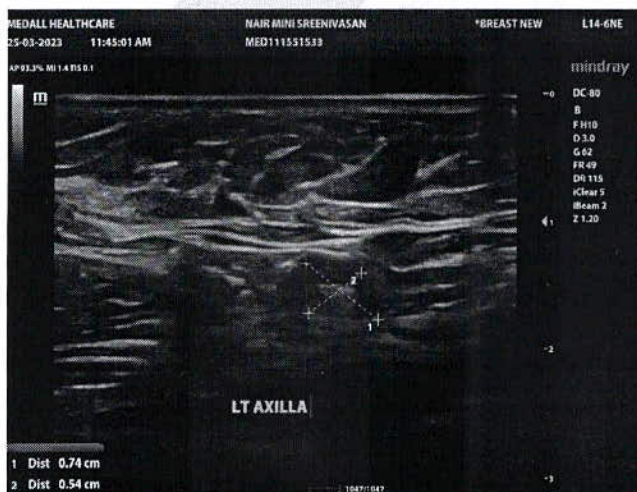
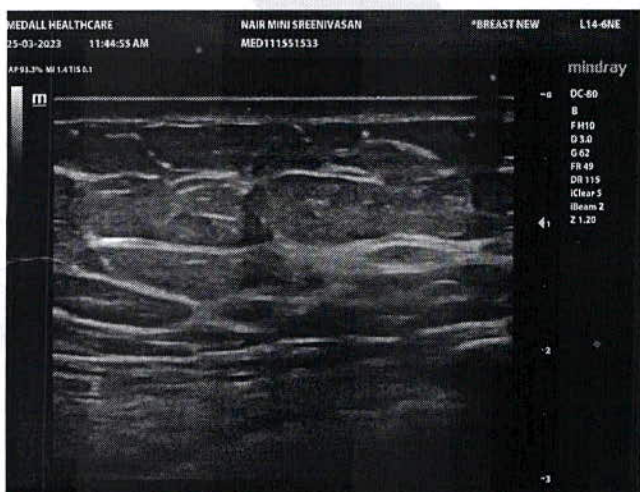
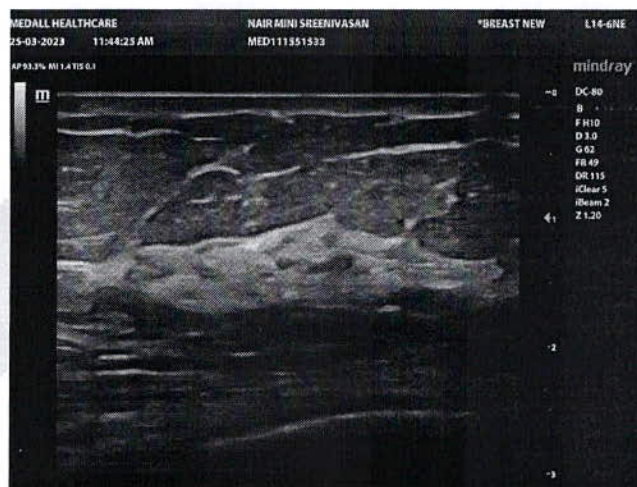
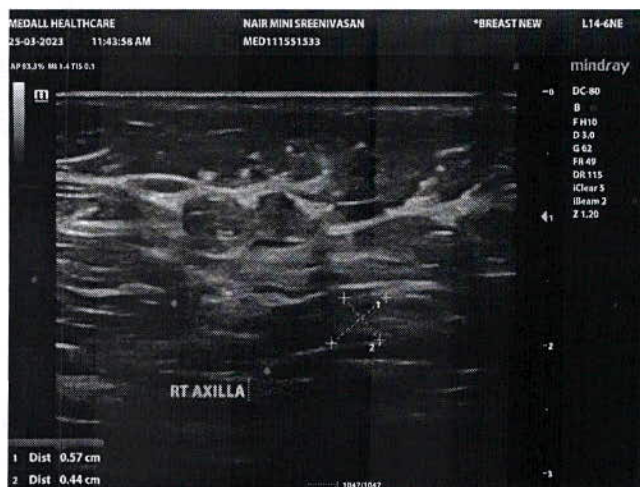
**DR. HIMA BINDU.P
CONSULTANT RADIOLOGIST**

Transcribed By: Pushpa



Clumax Diagnostic and Research Centre Pvt. Ltd.
68/150/3, Sri Lakshmi Towers

Name	MRS.NAIR MINI SREENIVASAN	ID	MED111551533
Age & Gender	51Y/FEMALE	Visit Date	25/03/2023
Ref Doctor	MediWheel		



You can also conveniently view the reports and trends through our App. Scan QR code to download the App.



Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.

51 Years
Female

QRS 82 ms
QT / QTcBaz 378 / 435 ms
PR 166 ms
P 110 ms
RR / PP 746 / 750 ms
P / QRS / T 53 / 35 / 33 degrees

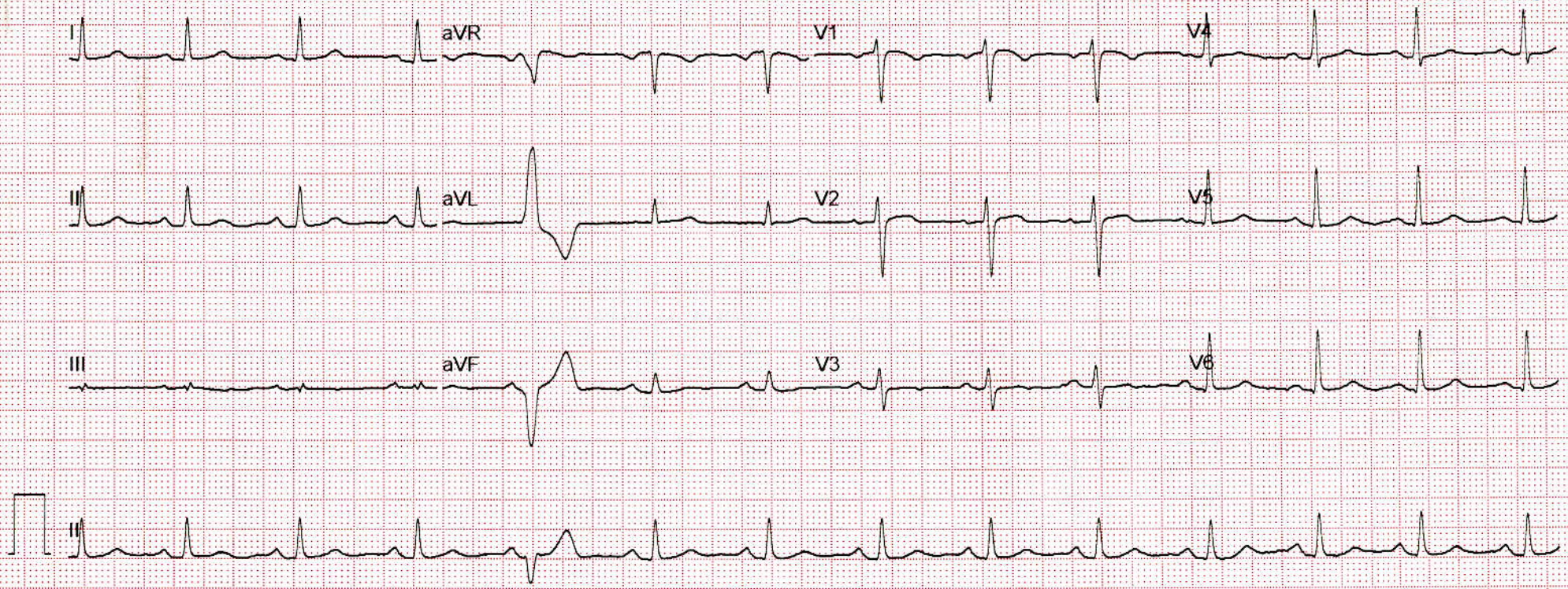
Technician: rs
Ordering Ph:
Referring Ph:
Attending Ph:



Ectopic VPC 1

(Needs Clinical Correlation for further Management)

Dr. Ramnaresh S, MD, DM
Asst. Prof. of Cardiology
K.M.C. Rean No. 81603



Name : Mrs. NAIR MINI SREENIVASAN
 PID No. : MED111551533 Register On : 25/03/2023 8:15 AM
 SID No. : 923010928 Collection On : 25/03/2023 8:32 AM
 Age / Sex : 51 Year(s)/ Female Report On : 27/03/2023 2:06 PM
 Type : OP Printed On : 27/03/2023 3:24 PM
 Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>HAEMATOLOGY</u>			
<u>Complete Blood Count With - ESR</u>			
Haemoglobin (EDTA Blood/Spectrophotometry)	12.1	g/dL	12.5 - 16.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood)	37.1	%	37 - 47
RBC Count (EDTA Blood)	4.34	mill/cu.mm	4.2 - 5.4
Mean Corpuscular Volume(MCV) (EDTA Blood)	85.3	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood)	27.9	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood)	32.7	g/dL	32 - 36
RDW-CV (EDTA Blood)	14.6	%	11.5 - 16.0
RDW-SD (EDTA Blood)	43.59	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood)	5000	cells/cu.mm	4000 - 11000
Neutrophils (EDTA Blood)	57.8	%	40 - 75
Lymphocytes (EDTA Blood)	30.5	%	20 - 45
Eosinophils (EDTA Blood)	3.5	%	01 - 06
Monocytes (EDTA Blood)	7.6	%	01 - 10



Anusha
 Dr Anusha.K.S
 Sr.Consultant Pathologist
 Reg No : 100674
 APPROVED BY

The results pertain to sample tested.

Page 1 of 11

You can also conveniently view the reports and trends through our App. Scan QR code to download the App.



Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.

Name : Mrs. NAIR MINI SREENIVASAN
 PID No. : MED111551533 Register On : 25/03/2023 8:15 AM
 SID No. : 923010928 Collection On : 25/03/2023 8:32 AM
 Age / Sex : 51 Year(s)/ Female Report On : 27/03/2023 2:06 PM
 Type : OP Printed On : 27/03/2023 3:24 PM
 Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Basophils (EDTA Blood)	0.6	%	00 - 02
INTERPRETATION: Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.			
Absolute Neutrophil count (EDTA Blood)	2.89	10 ³ / μ l	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood)	1.52	10 ³ / μ l	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood)	0.17	10 ³ / μ l	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood)	0.38	10 ³ / μ l	< 1.0
Absolute Basophil count (EDTA Blood)	0.03	10 ³ / μ l	< 0.2
Platelet Count (EDTA Blood)	229	10 ³ / μ l	150 - 450
MPV (EDTA Blood)	9.3	fL	8.0 - 13.3
PCT (EDTA Blood/Automated Blood cell Counter)	0.21	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (EDTA Blood)	12	mm/hr	< 30



Anusha
 Dr Anusha.K.S
 Sr. Consultant Pathologist
 Reg No : 100674
 APPROVED BY

The results pertain to sample tested.

Page 2 of 11

You can also conveniently view the reports and trends through our App. Scan QR code to download the App.



Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.

Name : Mrs. NAIR MINI SREENIVASAN
 PID No. : MED111551533 Register On : 25/03/2023 8:15 AM
 SID No. : 923010928 Collection On : 25/03/2023 8:32 AM
 Age / Sex : 51 Year(s)/ Female Report On : 27/03/2023 2:06 PM
 Type : OP Printed On : 27/03/2023 3:24 PM
 Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>BIOCHEMISTRY</u>			
<u>Liver Function Test</u>			
Bilirubin(Total) (Serum/DCA with ATCS)	0.28	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.15	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.13	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	15.26	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	12.56	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	7.96	U/L	< 38
Alkaline Phosphatase (SAP) (Serum/Modified IFCC)	63.0	U/L	53 - 141
Total Protein (Serum/Biuret)	6.67	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	3.99	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.68	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.49		1.1 - 2.2




 Dr. Arjun C.P
 MBBS, MD Pathology
 Reg No: KM40 S9633

APPROVED BY

The results pertain to sample tested.

Page 3 of 11

You can also conveniently view the reports and trends through our App. Scan QR code to download the App.



Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.

Name : Mrs. NAIR MINI SREENIVASAN
 PID No. : MED111551533 Register On : 25/03/2023 8:15 AM
 SID No. : 923010928 Collection On : 25/03/2023 8:32 AM
 Age / Sex : 51 Year(s) / Female Report On : 27/03/2023 2:06 PM
 Type : OP Printed On : 27/03/2023 3:24 PM
 Ref. Dr : MediWheel

Investigation	Observed Value	Unit	Biological Reference Interval
Lipid Profile			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	181.01	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	75.47	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.			
HDL Cholesterol (Serum/Immuno-inhibition)	53.29	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 50 - 59 High Risk: < 50
LDL Cholesterol (Serum/Calculated)	112.6	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	15.1	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	127.7	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

APPROVED BY

The results pertain to sample tested.

Page 4 of 11

You can also conveniently view the reports and trends through our App. Scan QR code to download the App.



Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.

Name : Mrs. NAIR MINI SREENIVASAN
 PID No. : MED111551533 Register On : 25/03/2023 8:15 AM
 SID No. : 923010928 Collection On : 25/03/2023 8:32 AM
 Age / Sex : 51 Year(s)/ Female Report On : 27/03/2023 2:06 PM
 Type : OP Printed On : 27/03/2023 3:24 PM
 Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	3.4		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)	1.4		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	2.1		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0




Dr. Arjun C.P
MBBS MD Pathology
Reg No: KMC 89633

APPROVED BY

The results pertain to sample tested.

Page 5 of 11

You can also conveniently view the reports and trends through our App. Scan QR code to download the App.



Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.

Name : Mrs. NAIR MINI SREENIVASAN
 PID No. : MED111551533 Register On : 25/03/2023 8:15 AM
 SID No. : 923010928 Collection On : 25/03/2023 8:32 AM
 Age / Sex : 51 Year(s) / Female Report On : 27/03/2023 2:06 PM
 Type : OP Printed On : 27/03/2023 3:24 PM
 Ref. Dr : MediWheel

Investigation	Observed Value	Unit	Biological Reference Interval
<u>Glycosylated Haemoglobin (HbA1c)</u>			
HbA1C (Whole Blood/HPLC)	5.5	%	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 %

Estimated Average Glucose
(Whole Blood) 111.15 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: K14089653

APPROVED BY

The results pertain to sample tested.

Page 6 of 11

You can also conveniently view the reports and trends through our App. Scan QR code to download the App.



Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.

Name : Mrs. NAIR MINI SREENIVASAN
 PID No. : MED111551533 Register On : 25/03/2023 8:15 AM
 SID No. : 923010928 Collection On : 25/03/2023 8:32 AM
 Age / Sex : 51 Year(s) / Female Report On : 27/03/2023 2:06 PM
 Type : OP Printed On : 27/03/2023 3:24 PM
 Ref. Dr : MediWheel

Investigation	Observed Value	Unit	Biological Reference Interval
---------------	----------------	------	-------------------------------

IMMUNOASSAY

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/ECLIA)	0.978	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 (Tyroxine) - Total (Serum/ECLIA)	6.39	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/ECLIA)	5.12	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 $\leq 0.03 \mu\text{IU/mL}$ need to be clinically correlated due to presence of rare TSH variant in some individuals.



Anusha
 Dr Anusha.K.S
 Sr. Consultant Pathologist
 Reg No : 100674
 APPROVED BY

The results pertain to sample tested.

Page 7 of 11

You can also conveniently view the reports and trends through our App. Scan QR code to download the App.



Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.

Name : Mrs. NAIR MINI SREENIVASAN
 PID No. : MED111551533 Register On : 25/03/2023 8:15 AM
 SID No. : 923010928 Collection On : 25/03/2023 8:32 AM
 Age / Sex : 51 Year(s) / Female Report On : 27/03/2023 2:06 PM
 Type : OP Printed On : 27/03/2023 3:24 PM
 Ref. Dr : MediWheel

Investigation	Observed Value	Unit	Biological Reference Interval
---------------	----------------	------	-------------------------------

CLINICAL PATHOLOGY

PHYSICAL EXAMINATION (URINE COMPLETE)

Colour (Urine)	Pale yellow		Yellow to Amber
Appearance (Urine)	Clear		Clear
Volume(CLU) (Urine)	30		

CHEMICAL EXAMINATION (URINE COMPLETE)

pH (Urine)	6.5		4.5 - 8.0
Specific Gravity (Urine)	1.003		1.002 - 1.035
Ketone (Urine)	Negative		Negative
Urobilinogen (Urine)	Normal		Normal
Blood (Urine)	Negative		Negative
Nitrite (Urine)	Negative		Negative
Bilirubin (Urine)	Negative		Negative
Protein (Urine)	Negative		Negative
Glucose (Urine/GOD - POD)	Negative		Negative



Anusha
 Dr Anusha.K.S
 Sr.Consultant Pathologist
 Reg No : 100674
 APPROVED BY

The results pertain to sample tested.

Page 8 of 11

You can also conveniently view the reports and trends through our App. Scan QR code to download the App.



Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.

Name : Mrs. NAIR MINI SREENIVASAN
 PID No. : MED111551533 Register On : 25/03/2023 8:15 AM
 SID No. : 923010928 Collection On : 25/03/2023 8:32 AM
 Age / Sex : 51 Year(s) / Female Report On : 27/03/2023 2:06 PM
 Type : OP Printed On : 27/03/2023 3:24 PM
 Ref. Dr : MediWheel

Investigation	Observed Value	Unit	Biological Reference Interval
Leukocytes(CP) (Urine)	Positive(+)		

MICROSCOPIC EXAMINATION
(URINE COMPLETE)

Pus Cells (Urine)	2-5	/hpf	NIL
Epithelial Cells (Urine)	2-5	/hpf	NIL
RBCs (Urine)	NIL	/HPF	NIL
Others (Urine)	Bacteria Present		

INTERPRETATION:Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.

Casts (Urine)	NIL	/hpf	NIL
Crystals (Urine)	NIL	/hpf	NIL



Anusha
 Dr. Anusha.K.S
 Sr. Consultant Pathologist
 Reg No : 100674
 APPROVED BY



Name : Mrs. NAIR MINI SREENIVASAN
 PID No. : MED111551533 Register On : 25/03/2023 8:15 AM
 SID No. : 923010928 Collection On : 25/03/2023 8:32 AM
 Age / Sex : 51 Year(s) / Female Report On : 27/03/2023 2:06 PM
 Type : OP Printed On : 27/03/2023 3:24 PM
 Ref. Dr : MediWheel

Investigation	Observed Value	Unit	Biological Reference Interval
BIOCHEMISTRY			
BUN / Creatinine Ratio	11.29		6.0 - 22.0
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	94.21	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/GOD - POD)	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP)	75.84	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 Glucose(PP-2 hours) (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	9.6	mg/dL	7.0 - 21
Creatinine (Serum/Modified Jaffe)	0.85	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/Enzymatic)	4.73	mg/dL	2.6 - 6.0
--------------------------------	------	-------	-----------



Dr. Arjun C.P
 MBBS MD Pathology
 Reg No: KMC 89633

APPROVED BY

The results pertain to sample tested.

Page 10 of 11



Name : Mrs. NAIR MINI SREENIVASAN
 PID No. : MED111551533 Register On : 25/03/2023 8:15 AM
 SID No. : 923010928 Collection On : 25/03/2023 8:32 AM
 Age / Sex : 51 Year(s) / Female Report On : 27/03/2023 2:06 PM
 Type : OP Printed On : 27/03/2023 3:24 PM
 Ref. Dr : MediWheel

Investigation

Observed
Value

Unit

Biological
Reference Interval

IMMUNOHAEMATOLOGY

BLOOD GROUPING AND Rh TYPING
(EDTA Blood Agglutination)

'O' 'Positive'




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

APPROVED BY

-- End of Report --



Name : Mrs. NAIR MINI
SREENIVASAN Register On : 25/03/2023 8:15 AM
PID No. : MED111551533 Collection On : 25/03/2023 8:32 AM
SID No. : 923010928 Report On : 27/03/2023 2:06 PM
Age / Sex : 51 Year(s)/ Female Printed On : 27/03/2023 3:24 PM
Ref. Dr : MediWheel OP / IP : OP

***PAP Smear by LBC(Liquid based Cytology)**

Nature of Specimen: Cervical smear

Lab No: GC 684/23

Specimen type : Liquid based preparation

Specimen adequacy : Satisfactory for evaluation

Endocervical / Transformation zone cells : Present

General categorization : Within normal limits

DESCRIPTION : Smear show superficial squamous cells, intermediate cells & parabasal cells in a background of sheets of neutrophils and lymphocytes.

INTERPRETATION : Negative for intraepithelial lesion or malignancy.

Advised: Follow up smears.



Anusha
Dr Anusha.K.S
Sr.Consultant Pathologist
Reg No : 100674



Name : Mrs. NAIR MINI
SREENIVASAN Register On : 25/03/2023 8:15 AM
PID No. : MED111551533 Collection On : 25/03/2023 8:32 AM
SID No. : 923010928 Report On : 27/03/2023 2:06 PM
Age / Sex : 51 Year(s)/ Female Printed On : 27/03/2023 3:24 PM
Ref. Dr : MediWheel OP / IP : OP

PAP Smear by LBC(Liquid based Cytology)

Nature of Specimen: Cervical smear

Lab No: GC 684/23

Specimen type : Liquid based preparation

Specimen adequacy : Satisfactory for evaluation

Endocervical / Transformation zone cells : Present

General categorization : Within normal limits

DESCRIPTION : Smear show superficial squamous cells, intermediate cells & parabasal cells in a background of sheets of neutrophils and lymphocytes.

INTERPRETATION : Negative for intraepithelial lesion or malignancy.

Advised: Follow up smears.



Anusha
Dr Anusha.K.S
Sr.Consultant Pathologist
Reg No : 100674

