Health Check up Booking Request(bobE46382), Beneficiary Code-51662

Mediwheel <wellness@mediwheelin>

Thu 9/14/2023 8:33 AM

To:Info Sarjapur <info.sarjapur@narayanahealth.org> Cc:customercare@mediwheel.in <customercare@mediwheel.in>

Attention: This email originated outside of Narayana Health domain. Links and attachments cannot be verified as authentic. Do not share personal/organisational data including passwords or act based on the content of the email,

011-41195959 Email:wollness@mediwheel.in

Dear Narayana Multispeciality Clinic .

City : Bangalore . Address : 83/3 Doddakanneli, Sarjapur, Main Road , Near Wipro Gate-560035,

We have received the confirmation for the following booking .

Date		
Appointment _. Date	: 23-09-2023	
Booking Date	: 14-09-2023	
Contact Details	: 9909054781	
User Location	: GS ROAD, GUWAHATI, Assam, 0	
Package Name	: Mediwheel Metro Full Body Health Checkup Fem	ale Above 40
Gender	: Female	
Age	: 50	
Name	: MRS. CHERUKUPALLI RAMA LAKSHMI	

	mation		
Booked Member Name	Age	Gender	Cost(In INR)
MRS. CHERUKUPALLI RAMA LAKSHMI	50	Female	Cashless
Total amo	ount to be paid	Cashless	

We will get back to you with confirmation update shortly. Please find the package details as attached for your reference.

Package Name

this Package

Mediwheel Metro Full Body Health Checkup Female Above 40 -Includes (42)Tests

Ecg, Blood Group & Rh Factor, TSH, X-ray Chest, Stress Test (tmt)/ 2d Echo, Gynec Consultation, Blood Sugar Postprandial, Dental Consultation, Blood Urea Nitrogen (bun), Serum, Total Cholesterol, Triglycerides, Pap Smear, Fasting Blood Sugar, Ultrasound Whole Abdomen, Glycosylated Haemoglobin (hba1c), Mammography, Hdl, Tests included in Vldl, Urine Analysis, LDL, Total Protine, General Consultation, Stool Routine, Skin/ENT consultation, HDL/ LDL ratio, GGT(Gamma-glutamyl Transferase), Eye Check-up consultation, ALP (ALKALINE PHOSPHATASE), Uric Acid, AST/ALT Ratio, Serum Protein, CBC with ESR, Urine Sugar Fasting, Urine Sugar PP, T3, T4, Cholesterol Total / HDL Ratio, BUN, BUN/Creatinine Ratio, Bilirubin Total & Direct and Indirect, Albumin, Globulin

11 PM

Employee Name	Rama lalcelier;	8
Employee ID	52624	the first team of the second second second
Age	CL.	
Gender	fehrale	
19. apr. 19	,	
Date	27-9-47	
Name of center	NIL Sangapur	
	1	
City	Bengalon	
	0	
BASIC PARAMTERS:		
BASIC PARAMTERS: Height (in mts)	160 an	
	160 an 7 311 Kg	

20/am cds folome ut Systolic BP Diastolic BP

Waist-to-hip ratio

Narayana Heatth Integrated Care Private Ltd Narayana Heatth Integrated Care Nain Poad Narayana Heatth Integrated Sariapura 560035. Narayana Heatth Integrated Sariapura 560035.

Package Details

Channe - Mrs CHERUKUPALLI RAMA LAKSHMI, 10080000133741, female, 52y 11m

Charge Marme : EHP Mediwheel Full Body Health checkup Above 40 Female

Start Cate: 23/09/2023 09:06 End Date: 24/09/2023 09:06

Generated By: Hemanth Kumar

Generated On : 23-09-2023 09:07

in lan	Ordered Date	Service Center	Consultant	Qty	Explicit
ervice ivanic	23/09/2023 09:06 AM	ULTRA SOUND-2F	Dr. Sharma Vasant Kumar	1	No
AP SMEAR	23/09/2023 09:06 AM	CYTOLOGY	Dr. Sharma Vasant Kumar	1	No
CONSULTATION - FIRST	23/09/2023 09:06 AM	OPD-2F	Dr. Sharma Vasant Kumar	1	No
VISIT	23/09/2023 09:06 AM	OPD-2F	Dr. Jyoti Rajesh	1	No
VISIT	23/09/2023 09:06 AM	X-RAY	Dr. Sharma Vasant Kumar	1	. No
	23/09/2023 09:06 AM	ECHO-2F	Dr. Sharma Vasant Kumar	1	No
USG ABDOMEN	23/09/2023 09:06 AM	ULTRA SOUND-2F	Dr. Sharma Vasant Kumar	1	No
	23/09/2023 09:06 AM	OPD-2F	Dr. Sharma Vasant Kumar	1	No
	23/09/2023 09:05 AM	BIOCHEMISTRY	Dr. Sharma Vasant Kumar	1	No
URIC ACID BLOOD UREA	23/09/2023 09:06 AM	BIOCHEMISTRY	Dr. Sharma Vasant Kumar	1	No
NITROGEN (BUN)	23/09/2023 09:06 AM	BIOCHEMISTRY	Dr. Sharma Vasant Kumar	1	No
(TFT)	23/09/2023 09:06 AM	OPD-2F	Dr. Sharma Vasant Kumar	1	No
EEG	23/09/2023 09:06 AM	BIOCHEMISTRY	Dr. Sharma Vasant Kumar	1	No
SERUM CREATININE		BIOCHEMISTRY	Dr. Sharma Vasant Kumar	1	No
T4, TSH)	23/09/2023 09:06 AM	CLINICAL PATHOLO	Dr. Sharma Vasant	1	· No
(FASTING)	23/09/2023 09:06 AM	BIOCHEMISTRY	Dr. Sharma Vasant Kumar	1	No
HBA1C		BIOCHEMISTRY	Dr. Sharma Vasant Kumar	1	No
TRIG,HDL,LDL,VLDL)	23/09/2023 09:06 AM	CLINICAL PATHOLO	Dr. Sharma Vasant	1	No
(POST PRANDIAL)	23/09/2023 09:06 AM	BIOCHEMISTRY	Dr. Sharma Vasant Kumar	1	No
SUGAR (FBS) POST PRANDIAL	23/09/2023 09:06 AM	BIOCHEMISTRY	Dr. Sharma Vasant Kumar	1	No
BLOOD SUGAR (PPBS		NARAYANA	Dr. Sharma Vasan	t 1	No
BLOOD GROUP & RH	23/09/2023 09:06 AM	HRUDAYALAYA BLOOD CENTRE	Kumar		
STOOL ROUTINE EXAMINATION	23/09/2023 09:06 AM	CLINICAL PATHOL	Kumai	ity Ctir	No

Hip-96 cm weist-85 cm wt-731 Kg

1 COCM

Narayana Multispeciality Clinic Narayana Health Integrated Care Private Ltd Narayana Base Private Ltd Nara

	Vent Rate 86 bpm PRI-Interval 256,022 deg PRV5/SV1 RV5/SV1 RV5/SV1 CI/QIC Interval 3398/444 ms P/ORS/17 Axes 555/26/22 deg RV5/SV1 RV5/SV1 CI/QIC Interval 3398/444 ms P/ORS/17 Axes 155/26/22 deg RV5/SV1 CI/QIC Interval 3398/444 ms P/ORS/17 Axes 126 ms	Mormal ECG
- And Connect		
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
<u>}</u>		
50 Hz	BDR 35 Hz	NAPAYANA MSC- SARUAPUR



# TRANS-THORACIC ECHO REPORT

Patient MRN :1008-133741

Patient Name : Mrs.CHERUKUPALLI RAMA LAKSHMI

Date: 23.09.2023

Age/Gender : 52 yrs/Female

M-MODE / 2D ME	ASUREMENTS			b-
LVEF (>55)%	:60%	LVID(d) (40-56)mm	:44mm	LVID (s) mm : 30mm
<b>TAPSE</b> (>16) mm	1:20mm	IVS (d) (6-10)mm	: 10mm	LV-EDV mI :
LA (<39) mm	:28mm	PWD (d) (6-10)mm	: 9mm	LV-ESV mI :
<b>RA</b> (<44) <b>mm</b>	: 31mm	<b>RV</b> (<35) mm	: 26mm	BSA m ² :-

DOPPLER MEASUREMENTS

MITRAL VALVE : E/A - 0.7/0.6 M/S, NORMAL LV DIASTOLIC FUNCTION, MR-TRIVIAL

AORTIC VALVE : PG -5 MMHG/AR-TRIVIAL

TRICUSPID VALVE : TR -TRIVIAL

PULMONARY VALVE : PG -2 MMHG

PA PRESSURE : PASP-18 MMHG/ NORMAL PA PRESSURE.

# FINDINGS

SITUS SOLITUS, LEVOCARDIA, AV AND VA CONCORDANT, NORMAL GREAT ARTERY RELATIONSHIP

#### VALVES MITRAL

ITRAL : NORMAL

AORTIC : NORMAL

TRICUSPID : NORMAL

PULMONARY : NORMAL

CHAMBERS

.V : NORMAL SIZED, NORMAL LV SYSTOLIC FUNCTION.

RV : NORMAL SIZED, NORMAL RV FUNCTION.

RWMA : NO RWMA

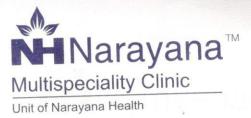
LVOT : NORMAL

LEFT ATRIUM : NORMAL SIZED

RIGHT ATRIUM : NORMAL SIZED



Narayana Hrudayalaya Limited Above HDFC Bank, 83/3, Doddakanneli, Sarjapura Main Road, Varthur Hobli, Bangalore - 560035



#### SEPTAE

IVS : INTACT

IAS : INTACT

# **ARTERIES & VEINS**

AORTA : AORTIC ANNULUS- 20 MM, ASCENDING AORTA- 27 MM, NORMAL ARCH NORMAL SIZED.

PULMONARY ARTERY : NORMAL

IVC, SVC &CS : IVC - 12 MM, NORMAL SIZED, COLLAPSING, NORMAL RA PRESSURE.

PULMONARY VEINS : NORMAL

PERICARDIUM : NORMAL

VEGETATION / THROMBUS / TUMOR: NIL

OTHER FINDINGS: SINUS RHYTHM-83 BPM NO PREVIOUS ECHO REPORT

CONCLUSION

NORMAL CHAMBER DIMENSIONS NORMAL PA PRESSURE NO RWMA NORMAL LV SYSTOLIC FUNCTION LVEF:- 60%

1 CHANDANA CARDIAC SONOGRAPHER



Narayana Hrudayalaya Limited Above HDFC Bank, 83/3, Doddakanneli, Sarjapura Main Road, Varthur Hobli, Bangalore - 560035 Tal: + 01 88844 31319 Email : info.sariapura@narayanahealth.org

		<b>NH</b> Na Multispecia	arayana Ility Clinic
Patient Name Age Referring Doctor	Mrs.CHERUKUPALLI RAMA LAKSMI	Unit of Narayana Patient ID Sex	Health :1008-133741 : Female
Telefing Doctor	: PKG	Date	:23.09.2023

# ULTRASOUND ABDOMEN AND PELVIS

# FINDINGS:

Liver is normal in size and shows mild diffuse increase in echogenicity. No intra or extra hepatic biliary duct dilatation. No focal lesions.

Portal vein is normal in size, course and caliber. CBD is not dilated.

Gall bladder is normal without evidence of calculi, wall thickening or pericholecystic fluid.

Pancreas to the extent visualized, appears normal in size, contour and echogenicity

Spleen is normal in size , shape, contour and echopattern. No evidence of mass or focal lesions.

**Right Kidney** is normal in size (measures 9.7 cm in length &1.3 cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Left Kidney is normal in size (measures 9.1cm in length & 1.3 cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Retroperitoneum - Obscured by bowel gas.

Urinary Bladder is well distended. Wall thickness is normal. No evidence of calculi, mass or mural lesion.

Uterus and ovaries post hysterectomy status.

There is no ascites or pleural effusion.

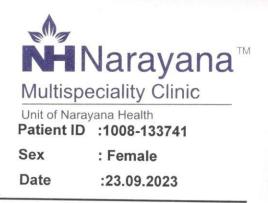
# **IMPRESSION:**

UNREMARKABLE STUDY OF ABDOMEN AND PELVIS

Narayana Multispeciality Clinic Narayana Health Integrated Care Private Ltd 83/3, Doddakannelli, Satjapula Main Abar Varthur (Hobl), **Dayyatant Radiologist** Phone : 88844 31319



Narayana Hrudayalaya Limited Above HDFC Bank, 83/3, Doddakanneli, Sarjapura Main Road,



Patient Name:Mrs.CHERUKUPALLI RAMA LAKSMIAge:52 YearsReferring Doctor: PKG

# BILATERAL SONOMAMMOGRAM

# FINDINGS:

#### **RIGHT BREAST**

Pre mammary, mammary and retromammary areas demonstrate normal echotexture.

The areolar region appears unremarkable.

Right axillary tails and axillae appear normal.

Right nipple appear unremarkable.

No evidence of lymphadenopathy.

No other focal lesions seen.

#### LEFT BREAST

Pre mammary, mammary and retromammary areas demonstrate normal echotexture.

The areolar region appears unremarkable.

Left nipple appear unremarkable.

Left axillary tails and axillae appear normal.

No evidence of lymphadenopathy.

No other focal lesions seen.

#### IMPRESSION

No significant abnormality in breast parenchyma. (BIRADS I)

Narayana Multispeciality Clinic Narayana Health Integrated Care Private Ltc 83/3, Doddakannelli, SDr Br M. Seshadri MDRD Varthur (Hobli), Bar Consultant Radio logispline 186 0208 0208

#### Narayana Hrudayalaya Limited

Above HDFC Bank, 83/3, Doddakanneli, Sarjapura Main Road, Varthur Hobli, Bangalore - 560035 Tel: + 91 88844 31319, Email : info.sarjapura@narayanahealth.org



Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMIMRN : 10080000133741Gender/Age : FEMALE , 52y (15/10/1970)Collected On : 23/09/2023 09:12 AMReceived On : 23/09/2023 10:57 AMReported On : 23/09/2023 12:06 PMBarcode : 022309230521Specimen : Whole Blood - ESRConsultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9067480638

	HEMAT	TOLOGY	
Test	Result	Unit	<b>Biological Reference Interval</b>
Erythrocyte Sedimentation Rate (ESR)	5	mm/1hr	0.0-19.0

(Westergren Method)

**Interpretation Notes** 

ESR high - Infections, chronic disorders,, plasma cell dyscrasias.
 DISCLAIMER:All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert

--End of Report-

Shahli

Dr. Shalini K S DCP, DNB, Pathology Consultant

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMIMRN : 10080000133741Gender/Age : FEMALE , 52y (15/10/1970)Collected On : 23/09/2023 09:12 AMReceived On : 23/09/2023 10:56 AMReported On : 23/09/2023 01:54 PMBarcode : 012309230919Specimen : SerumConsultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9067480638

	BIOCHEMI	STRY	
Test	Result	Unit	<b>Biological Reference Interval</b>
SERUM CREATININE			
<b>Serum Creatinine</b> (Two Point Rate - Creatinine Aminohydrolase)	0.58	mg/dL	0.52-1.04
eGFR (Calculated)	109.2	mL/min/1.73m ²	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodyamically unstable patients eGFR is not applicable for less than 18 years of age.
<b>Blood Urea Nitrogen (BUN)</b> (Endpoint /Colorimetric – Urease)	12	mg/dL	7.0-17.0
Serum Uric Acid (Colorimetric - Uricase, Peroxidase)	4.5	mg/dL	2.5-6.2
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	310 H	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Colorimetric - Lip/Glycerol Kinase)	192 H	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	61 H	mg/dL	40.0-60.0
Non-HDL Cholesterol (Calculated)	249.0 H	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
LDL Cholesterol (Colorimetric)	211 H	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	38.4	mg/dL	0.0-40.0

Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMI	MRN : 10080000	133741 Gender/Age : I	EMALE , 52y (15/10/1970)
Cholesterol /HDL Ratio (Calculated)	5.1 H	-	0.0-5.0
THYROID PROFILE (T3, T4, TSH)			
Tri lodo Thyronine (T3) (Enhanced Chemiluminesence)	1.34	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminesence)	9.18	μg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminesence)	2.867	μIU/mL	> 18 Year(s) : 0.4 -4.5 Pregnancy: 1st Trimester: 0.129-3.120 2nd Trimester: 0.274-2.652 3rd Trimester: 0.312-2.947

#### **Interpretation Notes**

• TSH levels are subjected to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy. Unbound fraction (Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration.



Mrs. Latha B S MSc, Mphil, Biochemistry Incharge, Consultant Biochemistry

Anushre

Dr. Anushre Prasad MBBS,MD, Biochemistry Consultant Biochemistry

	BIOCHEMI	STRY	
Test	Result	Unit	<b>Biological Reference Interval</b>
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric -Diazo Method)	0.70	mg/dL	0.2-1.3
<b>Conjugated Bilirubin (Direct)</b> (Dual Wavelength - Reflectance Spectrophotometry)	0.00	mg/dL	0.0-0.3
Unconjugated Bilirubin (Indirect) (Calculated)	0.7	mg/dL	0.0-1.1
Total Protein (Colorimetric - Biuret Method)	7.60	gm/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green	4.90	gm/dL	3.5-5.0

Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMI	MRN : 10080000	133741 Gender/Age : F	EMALE , 52y (15/10/1970)
Serum Globulin (Calculated)	2.7	gm/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.82	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal- 5-phosphate))	48 H	U/L	14.0-36.0
<b>SGPT (ALT)</b> (Multipoint-Rate With P-5-P (pyridoxal-5- phosphate))	60 H	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P- nitro Phenyl Phosphate, AMP Buffer)	79	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide ( Szasz Method))	40	U/L	12.0-43.0

# Interpretation Notes

Indirect Bilirubin result is a calculated parameter (Indirect Bilirubin = Total Bilirubin - Direct Bilirubin).
 Indirect bilirubin result includes the delta bilirubin fraction also. Delta Bilirubin is the bilirubin which is covalently bound to albumin.
 Delta Bilirubin is not expected to be present in healthy adults or neonates.

--End of Report-

Anushre

Dr. Anushre Prasad MBBS,MD, Biochemistry Consultant Biochemistry

# Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMI MRN : 10080000133741 Gender/Age : FEMALE , 52y (15/10/1970)

# Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.

(, -> Auto Authorized)

(CR, -> Auto Authorized)

(Blood Urea Nitrogen (Bun), -> Auto Authorized)

(Uric Acid -> Auto Authorized)





Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMIMRN : 10080000133741Gender/Age : FEMALE , 52y (15/10/1970)Collected On : 23/09/2023 09:12 AMReceived On : 23/09/2023 10:59 AMReported On : 23/09/2023 12:29 PMBarcode : 1B2309230024Specimen : Whole BloodConsultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9067480638

#### NARAYANA HRUDAYALAYA BLOOD CENTRE

Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group (Column Agglutination Technology)	AB	-
RH Typing (Column Agglutination Technology)	Positive	-

--End of Report-

Dr. Prathip Kumar B R MBBS,MD, Immunohaematology & Blood Transfusion Consultant

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





 Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMI
 MRN : 10080000133741
 Gender/Age : FEMALE , 52y (15/10/1970)

 Collected On : 23/09/2023 09:12 AM
 Received On : 23/09/2023 10:56 AM
 Reported On : 23/09/2023 11:14 AM

Barcode : 012309230918 Specimen : Plasma Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9067480638

BIOCHEMISTRY			
Test	Result	Unit	<b>Biological Reference Interval</b>
Fasting Blood Sugar (FBS) (Colorimetric - Glucose Oxidase Peroxidase)	164 H	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020

--End of Report-

Mrs. Latha B S MSc, Mphil, Biochemistry Incharge, Consultant Biochemistry

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.
   (Fasting Blood Sugar (FBS) -> Auto Authorized)

Dr. Anushre Prasad

MBBS,MD, Biochemistry Consultant Biochemistry





 Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMI
 MRN : 10080000133741
 Gender/Age : FEMALE , 52y (15/10/1970)

 Collected On : 23/09/2023 09:12 AM
 Received On : 23/09/2023 10:56 AM
 Reported On : 23/09/2023 11:08 AM

Barcode : 012309230920 Specimen : Whole Blood Consultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9067480638

BIOCHEMISTRY				
Test	Result	Unit	<b>Biological Reference Interval</b>	
HBA1C				
HbA1c (HPLC NGSP Certified)	7.5 H	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020	
Estimated Average Glucose (Calculated)	168.55	-	-	

#### Interpretation:

1. HbA1C above 6.5% can be used to diagnose diabetes provided the patient has symptoms. If the patient does not have symptoms with HbA1C>6.5%, repeat measurement on further sample. If the repeat test result is <6.5%, consider as diabetes high risk and repeat measurement after 6 months.

2. HbA1C measurement is not appropriate in diagnosing diabetes in children, suspicion of type 1 diabetes, symptoms of diabetes for less than 2 months, pregnancy, hemoglobinopathies, medications that may result sudden increase in glucose, anemia, renal failure, HIV infection, malignancies, severe chronic hepatic, and renal disease.

3. Any sample with >15% should be suspected of having a haemoglobin variant.

# --End of Report-

Mrs. Latha B S MSc, Mphil, Biochemistry Incharge, Consultant Biochemistry

## Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.

Junshal

Dr. Anushre Prasad MBBS,MD, Biochemistry Consultant Biochemistry





**Final Report** 

Page 1 of 1

Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMIMRN : 10080000133741Gender/Age : FEMALE , 52y (15/10/1970)Collected On : 23/09/2023 09:12 AMReceived On : 23/09/2023 10:52 AMReported On : 23/09/2023 11:47 AMBarcode : 032309230160Specimen : UrineConsultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9067480638

	CLINICAL PATHOLOGY			
Test	Result	Unit	Biological Reference Interval	
URINE ROUTINE & MICROSCOPY				
PHYSICAL EXAMINATION				
Colour	STRAW	-	-	
Appearance	Clear	-	-	
CHEMICAL EXAMINATION				
pH(Reaction) (pH Indicator Method)	5.0	-	4.5-7.5	
Sp. Gravity (Refractive Index)	1.013	-	1.002 - 1.030	
Protein (Automated Protein Error Or Ph Indicator)	Not Present	-	Not Present	
Urine Glucose (Enzyme Method (GOD POD))	Not Present	-	Not Present	
Ketone Bodies (Nitroprusside Method)	Not Present	-	Not Present	
Bile Salts (Azo Coupling Method)	Not Present	-	-	
Bile Pigment (Bilirubin) (Azo Coupling Method)	Not Present	-	Not Present	
Urobilinogen (Azo Coupling Method)	Normal	-	Normal	
Urine Leucocyte Esterase (Measurement Of Leukocyte Esterase Activity)	Not Present	-	Not Present	
Blood Urine (Peroxidase Reaction)	Not Present	-	Not Present	
Nitrite (Gries Method)	Not Present	-	Not Present	
MICROSCOPIC EXAMINATION				
Pus Cells	11.9	/hpf	0-5	

Final Report

Page 1 of 2

Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMI	MRN : 10080000	)133741	Gender/Age : FEMALE , 52y (15/10/1970)
RBC	0.7	/hpf	0-4
Epithelial Cells	24.9	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.00	/hpf	0-1
Bacteria	630.5	/hpf	0-200
Yeast Cells	0.2	/hpf	0-1
Mucus	Not Present	-	Not Present

#### **Interpretation Notes**

• Since the analytical methodology of Urine Microscopy is Flow cytometry based and FDA approved the results of automated urine microscopy which includes RBCs, WBCs Epithelial cells etc are being reported in decimal fraction. Rounding off the value to nearest whole number is suggested.

# Urine For Sugar (Fasting) (Enzyme Method (GOD Present +

POD))

--End of Report-

Dr. Sudarshan Chougule MBBS, MD, Pathology Consultant & Head - Hematology & Flow Cytometry

# Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Page 2 of 2

Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMIMRN : 10080000133741Gender/Age : FEMALE , 52y (15/10/1970)Collected On : 23/09/2023 12:00 PMReceived On : 23/09/2023 01:23 PMReported On : 23/09/2023 01:56 PMBarcode : 032309230288Specimen : UrineConsultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9067480638

<b>CLINICAL PATHOLOGY</b>				
Result	Unit			
Present +++	-			

Urine For Sugar (Post Prandial) (Enzyme Method (GOD POD))

--End of Report-

Dr. Sudarshan Chougule MBBS, MD, Pathology Consultant & Head - Hematology & Flow Cytometry

# Note

Test

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMIMRN : 10080000133741Gender/Age : FEMALE , 52y (15/10/1970)Collected On : 23/09/2023 09:12 AMReceived On : 23/09/2023 10:56 AMReported On : 23/09/2023 11:58 AMBarcode : 022309230522Specimen : Whole BloodConsultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9067480638

HEMATOLOGY				
Test	Result	Unit	Biological Reference Interval	
COMPLETE BLOOD COUNT (CBC)				
Haemoglobin (Hb%) (Photometric Measurement)	13.6	g/dL	12.0-15.0	
Red Blood Cell Count (Electrical Impedance)	4.85 H	million/µl	3.8-4.8	
PCV (Packed Cell Volume) / Hematocrit (Calculated)	41.8	%	36.0-46.0	
MCV (Mean Corpuscular Volume) (Derived)	86.3	fL	83.0-101.0	
MCH (Mean Corpuscular Haemoglobin) (Calculated)	28.1	pg	27.0-32.0	
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.5	%	31.5-34.5	
Red Cell Distribution Width (RDW) (Derived)	12.9	%	11.6-14.0	
Platelet Count (Electrical Impedance Plus Microscopy)	303	$10^3/\mu L$	150.0-450.0	
Mean Platelet Volume (MPV)	9.4	fL	7.0-11.7	
Total Leucocyte Count(WBC) (Electrical Impedance)	10.5 H	$10^3/\mu L$	4.0-10.0	
DIFFERENTIAL COUNT (DC)				
Neutrophils (VCS Technology Plus Microscopy)	64.6	%	40.0-75.0	
Lymphocytes (VCS Technology Plus Microscopy)	28.1	%	20.0-40.0	
Monocytes (VCS Technology Plus Microscopy)	5.3	%	2.0-10.0	
Eosinophils (VCS Technology Plus Microscopy)	1.8	%	1.0-6.0	

Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMI	MRN : 10080000	133741 Gender/Age : I	EMALE , 52y (15/10/1970)
Basophils (VCS Technology Plus Microscopy)	0.2	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	6.79	x10 ³ cells/µl	2.0-7.0
Absolute Lymphocyte Count (Calculated)	2.96	x10 ³ cells/µl	1.0-3.0
Absolute Monocyte Count (Calculated)	0.56	x10 ³ cells/µl	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.19	x10 ³ cells/µl	0.02-0.5
Absolute Basophil Count (Calculated)	0.03	-	-

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

#### **Interpretation Notes**

• Haemoglobin , RBC Count and PCV: If below reference range, indicates Anemia. Further evaluation is suggested .

RBC Indices aid in typing of anemia.

WBC Count: If below reference range, susceptibility to infection.

If above reference range- Infection*

If very high in lakhs-Leukemia

Neutrophils -If above reference range-acute infection, mostly bacterial

Lymphocytes -If above reference range-chronic infection/ viral infection

Monocytes -If above reference range- TB, Typhoid, UTI

Eosinophils -If above reference range -Allergy,cough,Common cold,Asthma & worms

Basophils - If above reference range, Leukemia, allergy

Platelets: If below reference range- bleeding disorder, Dengue, drug- induced, malignancies

* In bacterial infection with fever total WBC count increases.

Eg Tonsillitis, Sinusitis, Bronchitis, Pneumonia, Appendicitis, UTI -12000-25000 cells/cumm.

In typhoid and viral fever WBC may be normal.

DISCLAIMER: All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert.

--End of Report-

Derpann

Dr. Deepak M B MD, PDF, Hematopathology Consultant

# Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMI MRN : 10080000133741 Gender/Age : FEMALE , 52y (15/10/1970)

#### Note

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Patient Name : Mrs CHERUKUPALLI RAMA LAKSHMIMRN : 10080000133741Gender/Age : FEMALE , 52y (15/10/1970)Collected On : 23/09/2023 12:00 PMReceived On : 23/09/2023 01:26 PMReported On : 23/09/2023 02:07 PMBarcode : 012309231586Specimen : PlasmaConsultant : Dr. Sharma Vasant Kumar(GENERAL MEDICINE)

 $\label{eq:sample adequacy: Satisfactory $V$ is the No: OP-001 Patient Mobile No: 9067480638 \\$ 

BIOCHEMISTRY				
Test	Result	Unit	<b>Biological Reference Interval</b>	
Post Prandial Blood Sugar (PPBS) (Colorimetric -	257 H	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes	
Glucose Oxidase Peroxidase)			=>200 : Diabetes	

--End of Report-

Anushre

Dr. Anushre Prasad MBBS,MD, Biochemistry Consultant Biochemistry

#### Note

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- Results relate to the sample only.
- Kindly correlate clinically.

(Post Prandial Blood Sugar (PPBS) -> Auto Authorized)

h

Mrs. Latha B S MSc, Mphil, Biochemistry Incharge, Consultant Biochemistry





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