

CONCLUSION OF HEALTH CHECKUP

ECU Number : 2242	MR Number : 23201938	Patient Name: SRAVANAKUMARU
Age : 36	Sex : Male	Height : 171
Weight : 85	Ideal Weight : 70	BMI : 29.07
Date : 11/03/2023		

Dr. Manish Mittal

Internal Medicine

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.

ECU Number : 2242 MR Number : 23201938 Patient Name : SRAVANAKUMARU
Age : 36 Sex : Male Height : 171
Weight : 85 Ideal Weight : 70 BMI : 29.07
Date : 11/03/2023

Past H/O : NO P/H/O ANY MAJOR ILLNESS

Present H/O : COMPLAIN NO MEDICAL AT PRESEN

Family H/O : TNO F/H/O ANY MAJOR ILLNESS

Habits : NO HABITS
Gen.Exam. : G.C.GOOD
B.P : 110/72 mm Hg
Pulse : 68/MIN REG
Others : SPO2-98%
C.V.S : NAD
R.S. : NAD
Abdomen : NP
Spleen : NP
Skin : NAD
C.N.S : NAD
Advice :



ECU Number : 2242 MR Number : 23201938 Patient Name: SRAVANAKUMARU
Age : 36 Sex : Male Height : 171
Weight : 85 Ideal Weight : 70 BMI : 29.07
Date : 11/03/2023

Ophthalmic Check Up :	Right	Left
Ext Exam		NIL
Vision Without Glasses	6/6 N.5	6/6 N.5
Vision With Glasses	NA	NA
Final Correction	NA	NA
Fundus	NORMAL	
Colour Vision	NORMAL	
Advice	NIL	

Orthopaedic Check Up :

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice



Patient Name : Mr. SRAVANAKUMARU UDAYAGIRI
 Gender / Age : Male / 36 Years 9 Months 11 Days
 MR No / Bill No. : 23201938 / 231071430
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 112242
 Request Date : 11/03/2023 08:05 AM
 Collection Date : 11/03/2023 08:21 AM
 Approval Date : 11/03/2023 12:34 PM

CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	15.7	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	5.26	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	44.8	%	40 - 50
Mean Corpuscular Volume (MCV)	85.2	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	29.8	pg	27 - 32
MCH Concentration (MCHC)	35.0	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	13.0	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	41.0	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	6.12	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	60	%	40 - 80
Lymphocytes	33	%	20 - 40
Eosinophils	2	%	1 - 6
Monocytes	5	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	3.64	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.02	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.09	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.31	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.06	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.3	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	246	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	2	mm/1 hr	0 - 10

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / repeat may be requested.

365 Days / 24 Hours Laboratory Services

Home Collection Facility Available
(Mon To Sat 8:00 am to 5:00 pm)



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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mr. SRAVANAKUMARU UDAYAGIRI	Type	: OPD
Gender / Age	: Male / 36 Years 9 Months 11 Days	Request No.	: 112242
MR No / Bill No.	: 23201938 / 231071430	Request Date	: 11/03/2023 08:05 AM
Consultant	: Dr. Manish Mittal	Collection Date	: 11/03/2023 08:21 AM
Location	: OPD	Approval Date	: 11/03/2023 12:34 PM

CBC + ESR

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification. ESR on Vesmetic 20, comparable to Westergrens method and in accordance to ICSH reference method.

---- End of Report ----

Dr. Rakesh Vaidya
MD (Path). DCP.

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.



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Haematology

Test	Result	Units	Biological Ref. Range
Blood Group			
ABO system	B		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method

Note :

- This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontro
- This method check's group both on Red blood cells and in Serum for "ABO" group.

---- End of Report ----

Dr. Rakesh Vaidya
MD (Path), DCP.

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. SRAVANAKUMARU UDAYAGIRI
Gender / Age : Male / 36 Years 9 Months 11 Days
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Approval Date : 11/03/2023 11:26 AM

Fasting Plasma Glucose

Test	Result	Units	Biological Ref. Range
<i>Fasting Plasma Glucose</i>			
Fasting Plasma Glucose	95	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	98	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimesion

---- End of Report ----

Dr. Sejal Odedra
M.D.Pathology

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.



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HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
HbA1c (Glycosylated Hb)			
Glycosylated Hemoglobin (HbA1c)	5.1	%	
estimated Average Glucose (e AG) *	99.67	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

* Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

---- End of Report ----

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M.D.Pathology



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 Location : OPD Approval Date : 11/03/2023 11:26 AM

Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides	159	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension)</i>			
<i>< 150 Normal</i>			
<i>150-199 Borderline High</i>			
<i>200-499 High</i>			
<i>> 499 Very High</i>			
Total Cholesterol	166	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension)</i>			
<i><200 mg/dL - Desirable</i>			
<i>200-239 mg/dL - Borderline High</i>			
<i>> 239 mg/dL - High</i>			
HDL Cholesterol	37	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)</i>			
<i>< 40 Low</i>			
<i>> 60 High</i>			
Non HDL Cholesterol (calculated)	129	mg/dL	1 - 130
<i>(Non- HDL Cholesterol)</i>			
<i>< 130 Desirable</i>			
<i>139-159 Borderline High</i>			
<i>160-189 High</i>			
<i>> 191 Very High</i>			
LDL Cholesterol	104	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)</i>			
<i>< 100 Optimal</i>			
<i>100-129 Near / above optimal</i>			
<i>130-159 Borderline High</i>			
<i>160-189 High</i>			
<i>> 189 Very High</i>			
VLDL Cholesterol (calculated)	31.8	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	2.81		2.1 - 3.5
T. Ch./HDL Ch. Ratio	4.49		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

---- End of Report ----

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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.58	mg/dL	0 - 1
Bilirubin - Direct	0.11	mg/dL	0 - 0.3
Bilirubin - Indirect (By Diazotized sulfanilic acid on RXL Dade Dimension.)	0.47	mg/dL	0 - 0.7
Aspartate Aminotransferase (SGOT/AST) (By IFCC UV kinetic method on RXL Dade Dimension.)	29	U/L	15 - 40
Alanine Aminotransferase (SGPT/ALT) (By IFCC UV kinetic method on RXL Dade Dimension.)	57	U/L	16 - 63
Alkaline Phosphatase (BY PNPP AMP method on RXL Dade Dimension.)	113	U/L	53 - 128
Gamma Glutamyl Transferase (GGT) (By IFCC method on RXL Dade Dimension.)	31	U/L	15 - 85
Total Protein			
Total Proteins	6.92	gm/dL	6.4 - 8.2
Albumin	3.56	gm/dL	3.4 - 5
Globulin	3.36	gm/dL	3 - 3.2
A : G Ratio (By Biuret endpoint and Bromocresol purple method on RXL Dade Dimesion.)	1.06		1.1 - 1.6

--- End of Report ---

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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	21	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	0.87	mg/dL	0.9 - 1.3
Estimate Glomerular Filtration rate (Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)	More than 60		
Uric acid (By Uricase / Catalase method on RXL Siemens)	4.9	mg/dL	3.4 - 7.2

— End of Report —

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Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
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Triiodothyronine (T3)	1.22	ng/ml	
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(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.

Reference interval (ng/ml)

1 - 3 days : 0.1 - 7.4
 1-11 months : 0.1 - 2.45
 1-5 years : 0.1 - 2.7
 6-10 years : 0.9 - 2.4
 11-15 years : 0.8 - 2.1
 16-20 years : 0.8 - 2.1
 Adults (20 - 50 years) : 0.7 - 2.0
 Adults (> 50 years) : 0.4 - 1.8
 Pregnancy (in last 5 months) : 1.2 - 2.5

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

Thyroxine (T4)	5.98	mcg/dL	
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(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.

Reference interval (mcg/dL)

1 - 3 days : 11.8 - 22.6
 1- 2 weeks : 9.8 - 16.6
 1 - 4 months : 7.2 - 14.4
 4 - 12 months : 7.8 - 16.5
 1-5 years : 7.3 - 15.0
 5 - 10 years : 6.4 - 13.3
 10 - 20 years : 5.6 - 11.7
 Adults / male : 4.6 - 10.5
 Adults / female : 5.5 - 11.0
 Adults (> 60 years) : 5.0 - 10.7

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

Thyroid Stimulating Hormone (US-TSH)	2.78	microIU/ml	
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(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.

Reference interval (microIU/ml)

Infants (1-4 days) : 1.0 - 39
 2-20 weeks : 1.7 - 9.1
 5 months - 20 years : 0.7 - 6.4
 Adults (21 - 54 years) : 0.4 - 4.2
 Adults (> 55 years) : 0.5 - 8.9
 Pregnancy :
 1st trimester : 0.3 - 4.5
 2nd trimester : 0.5 - 4.6
 3rd trimester : 0.8 - 5.2

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

— End of Report —

Dr. Sejal Odedra
M.D.Pathology



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Urine routine analysis (Auto)

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	30	mL	
Colour	Yellow		
Appearance	Clear		
Chemical Examination (By Reagent strip method)			
pH	6.0		
Specific Gravity	>=1.030		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	2+		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)			
Red Blood Cells	5 - 10	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/hpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

--- End of Report ---

Dr. Rakesh Vaidya
MD (Path). DCP.



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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23201938 Report Date : 11/03/2023
Request No. : 190056357 11/03/2023 8.05 AM
Patient Name : Mr. SRAVANAKUMARU UDYAGIRI
Gender / Age : Male / 36 Years 9 Months 11 Days

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

X-Ray Chest AP

Both lung fields are clear.
Both costophrenic sinuses appear clear.
Heart size is normal.
Hilar shadows show no obvious abnormality.
Aorta is normal.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
• NOT VALID FOR MEDICO-LEGAL PURPOSES
• CLINICAL CORRELATION RECOMMENDED

Dr. Priyanka Patel, MD
Consultant Radiologist





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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23201938 Report Date : 11/03/2023
Request No. : 190056377 11/03/2023 8.05 AM
Patient Name : Mr. SRAVANAKUMARU UDAYAGIRI
Gender / Age : Male / 36 Years 9 Months 11 Days

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

USG : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen

Liver is normal in size and shows increased in echopattern. No mass lesion identified. The hepatic veins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows no obvious abnormality. Common bile duct measures 4 mm in diameter.

Pancreas shows no obvious abnormality. Tail obscured. Spleen is normal size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

Prostate appears normal in size and volume is ~ 11 cc. Prostate measures 30mm x 25mm x 27mm.

Urinary bladder is well distended and appears normal.

No ascites.

COMMENT:

Fatty liver.

Kindly correlate clinically

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
• NOT VALID FOR MEDICO-LEGAL PURPOSES
• CLINICAL CORRELATION RECOMMENDED

Hasani

Dr. Prerna C Hasani, MD
Consultant Radiologist




Patient No. : 23201938 Report Date : 11/03/2023
Request No. : 190056457 11/03/2023 8.05 AM
Patient Name : Mr. SRAVANAKUMARU UDAYAGIRI
Gender / Age : Male / 36 Years 9 Months 11 Days

Echo Color Doppler

MITRAL VALVE : NORMAL
AORTIC VALVE : TRILEAFLET, NORMAL
TRICUSPID VALVE : NORMAL, TRACE TR, PASP BY TR JET=14 MMHG
PULMONARY VALVE : NORMAL
LEFT ATRIUM : NORMAL
AORTA : NORMAL
LEFT VENTRICLE : NORMAL, NO REGIONAL WALL MOTION ABNORMALITY,
LVEF=60%
RIGHT ATRIUM : NORMAL
RIGHT VENTRICLE : NORMAL
I.V.S. : INTACT
I.A.S. : INTACT
PULMONARY ARTERY : NORMAL
PERICARDIUM : NORMAL
COLOUR/DOPPLER FLOW MAPPING : Grade I diastolic dysfunction, E/e'=10
Trace MR

FINAL CONCLUSION:

1. ALL CARDIAC CHAMBERS ARE NORMAL IN DIMENSIONS
2. NO REGIONAL WALL MOTION ABNORMALITY AT REST
3. NORMAL LV SYSTOLIC FUNCTION, LVEF=60%
4. NORMAL VALVES
5. GRADE I DIASTOLIC DYSFUNCTION
6. TRACE MR, TR, NO PULMONARY HYPERTENSION , (IVC COLLAPSING)
7. NO PERICARDIAL EFFUSION, CLOT VEGETATION.

 Dr.KILLOL KANERIA MD, DM
Consultant Cardiologist

11-03-2023 08:36:28 AM
ID: 23201938
SRAVANKUMAR UDYAGIRI
Male 36 Years

HR	56	bpm
P	120	ms
PR	162	ms
QRS	88	ms
QT/QTc	420/408	ms
PQRST	573/727	ms
RV5SV1	0.798/0.650	mV

Diagnosis Information
Sinus Bradycardia

Report Confirmed by:

Dr. SSV

