



**LABORATORY REPORT : HAEMATOLOGY**

<b>Name</b>	: Mrs. JULUGANTI MUNI VENKATA LAVANYA RAMADEVI	<b>Age /Sex</b>	: 39Y Y(s)/FEMALE
<b>Bill Date</b>	: 27-Jul-2024 09:56 AM	<b>UMR No.</b>	: 372407001612
<b>Rec. Dt</b>	: 27-Jul-2024 11:40 AM	<b>Bill No.</b>	: MCB37240704306
<b>Rept. Dt</b>	: 27-Jul-2024 03:11 PM	<b>Result No</b>	: RLR240709698
<b>Ref By</b>	: Dr. PENCHILA PRASAD KANDIKATTU	<b>Sample ID</b>	: MCNNL7007269
<b>Sample Type</b>	:		

**CBP(COMPLETE BLOOD PICTURE)**

<u>Parameters</u>	<u>Result</u>	<u>Referral Ranges</u>	<u>Units</u>
<b>HEMOGLOBIN</b> <i>Photometric</i>	8.7 *	12.0 - 15.0	gms/dL
<b>R B C COUNT</b> <i>Electrical Impedance</i>	3.9	3.8 - 4.8 10 <sup>12</sup> /L	10 <sup>12</sup> /L
<b>PCV/HCT</b> <i>Calculated</i>	28 *	36 - 46	%
<b>MCV</b> <i>Calculated</i>	72 *	83 - 101	fl
<b>MCH</b> <i>Calculated</i>	22 *	27 - 32	pg
<b>MCHC</b> <i>Calculated</i>	30 *	31 - 37	g/dL
<b>TLC (TOTAL LEUCOCYTE COUNT)</b> <i>Impedance</i>	6.2	4.0 - 10.0	10 <sup>3</sup> /μl
<b>DIFFERENTIAL COUNT</b>			
<b>NEUTROPHILS</b> <i>DHSS/Microscopy</i>	60	40 - 80 %	
<b>LYMPHOCYTES</b> <i>DHSS/Microscopy</i>	30	20 - 40 %	
<b>MONOCYTES</b> <i>DHSS/Microscopy</i>	05	02 - 10 %	
<b>EOSINOPHILS</b> <i>DHSS/Microscopy</i>	05	00 - 06 %	
<b>BASOPHILS</b> <i>DHSS/Microscopy</i>	00	00 - 01 %	

Dr. CHALLAGUNDLA NEELIMA  
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<b>Sample Type</b>	:		

**PLATELET COUNT**  
*Electrical Impedance*

309

150 - 400  $10^3/\mu\text{L}$

$10^3/\mu\text{L}$

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

*Dr. Challengundla Neelima*  
Dr. CHALLAGUNDLA NEELIMA  
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**LABORATORY REPORT : CLINICAL PATHOLOGY**

<b>Name</b>	: Mrs. JULUGANTI MUNI VENKATA LAVANYA RAMADEVI	<b>Age /Sex</b>	: 39Y Y(s)/FEMALE
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<b>Rept. Dt</b>	: 27-Jul-2024 03:11 PM	<b>Result No</b>	: RLR240709695
<b>Ref By</b>	: Dr. Penchila Prasad Kandikattu	<b>Sample ID</b>	: MCNNL7007267
<b>Sample Type</b>	:		

<b>CRYSTALS</b>	Nil	NIL
<b>CASTS</b>	Nil	NIL
<b>OTHERS</b>	Nil	NIL

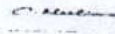
**INTERPRETATION**

The colour fields of chemicals correspond to the following values:

1. Proteins: neg (negative), 30-99 (+), 100-499 (++) , >500 (+++) mg/dl
2. Ketones: neg. (negative), 5 (Trace), 15-49 (+), 50-149 (++) , >150 (+++) mg/dl
3. Glucose: norm. (normal), 50-149 (+), 150-499 (++) , 500-999 (+++) , >1000 (++++) mg/dl
4. Bilirubin: neg (negative), 1 (+), 3 (++) , 6 (+++) mg/ dl
5. Urobilinogen: norm. (normal), 2 (+), 4 (++) , 8 (+++) , 12 (++++) mg/dl.

Suggested Clinical Correlation \* If neccessary, Please discuss

\*\*\* End Of Report \*\*\*

  
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<b>Rept. Dt</b>	: 27-Jul-2024 03:11 PM	<b>Result No</b>	: RLR240709697
<b>Ref By</b>	: Dr. Panchila Prasad Kandikattu	<b>Sample ID</b>	: MCNNL7007269
<b>Sample Type</b>	:		

**ESR**

**Parameters**

**ESR**  
MODIFIED WESTERGREN'S  
METHOD

**Result**

85 \*

**Referral Ranges**

0 - 20

**Units**

mm/1st hour

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

*Signature*  
Dr. CHALLAGUNDLA NEELIMA  
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**LABORATORY REPORT : BLOOD BANK**

<b>Name</b>	: Mrs. JULUGANTI MUNI VENKATA LAVANYA RAMADEVI	<b>Age /Sex</b>	: 39Y Y(s)/FEMALE
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<b>Rept. Dt</b>	: 27-Jul-2024 03:11 PM	<b>Result No</b>	: RLR240709694
<b>Ref By</b>	: Dr. Penchila Prasad Kandikattu	<b>Sample ID</b>	: MCNNL7007266
<b>Sample Type</b>	: WHOLE BLOOD		

**BLOOD GROUPING AND RH**

<u>Parameters</u>	<u>Result</u>	<u>Referral Ranges</u>	<u>Units</u>
<b>BLOOD GROUP</b> <i>Automated microcolumn gel method</i>	" O "		
<b>RH TYPE</b>	POSITIVE		

**INTERPRETATION**

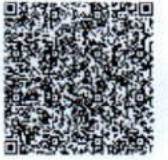
1. If Rh is Du positive it is best considered as Rh negative as recipient and Rh positive as donor. Proper Cross matching is recommended before transfusion.
2. In case of forward and reverse grouping discrepancy, clinical correlation and repeat sample analysis is recommended.
3. For Infants below 6 months only forward grouping is performed.
4. A sub-grouping is recommended after the age of 6 months.

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

*Challagundla Neelima*

**Dr. CHALLAGUNDLA NEELIMA**  
MBBS., DNB PATHOLOGIST



**LABORATORY REPORT : CLINICAL PATHOLOGY**

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<b>Ref By</b>	: Dr. PENCHILA PRASAD KANDIKATTU	<b>Sample ID</b>	: MCNNL7007267
<b>Sample Type</b>	:		

**CUE(COMPLETE URINE EXAMINATION)**

<u>Parameters</u>	<u>Result</u>	<u>Referral Ranges</u>	<u>Units</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
<b>COLOUR</b>	Pale yellow	PALE YELLOW	
<b>APPEARANCE</b>	Clear	CLEAR	
<b><u>CHEMICAL EXAMINATION</u></b>			
<b>SPECIFIC GRAVITY</b> <i>Bromthymol blue</i>	1.020	1.000 - 1.030	
<b>PH</b> <i>Bromthymol blue</i>	Acidic(6.0)	5.0 - 8.0	
<b>PROTEIN</b> <i>Tetra-bromophenol blue/Heat coagulation test</i>	Nil	NIL (<15 mg/dL)	
<b>GLUCOSE</b> <i>Glucose oxidase Peroxidase/Benedict's test</i>	Nil	NIL (<25 mg/dL)	
<b>KETONE</b> <i>Sodium nitroprusside/Rothera's test.</i>	Negative	NIL (<5 mg/dL)	
<b><u>MICROSCOPIC EXAMINATION</u></b>			
<b>PUS CELLS</b>	2-4/hpf	0 - 5 /hpf	
<b>RBC</b>	Nil	0 - 5 /hpf	
<b>EPITHELIAL CELLS</b>	2-4/hpf	0 - 5	hpf

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**LABORATORY REPORT : BIOCHEMISTRY**


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<b>Rept. Dt</b>	: 27-Jul-2024 12:40 PM	<b>Result No</b>	: RLR240709688
<b>Ref By</b>	: Dr. Penchila Prasad Kandikattu	<b>Sample ID</b>	: MCNNL7007265
<b>Sample Type</b>	: SERUM		

**LFT(LIVER FUNCTION TEST)**

<b>Parameters</b>	<b>Result</b>	<b>Referral Ranges</b>	<b>Units</b>
<b>TOTAL BILIRUBIN</b> <i>DIAZO</i>	0.3	0.1-1.2	mg/dL
<b>DIRECT BILIRUBIN</b> <i>DIAZO*</i>	0.1	<=0.20	mg/dL
<b>SGPT (ALT)</b> <i>IFCC</i>	12 *	<35	U/L
<b>SGOT (AST)</b> <i>IFCC</i>	15 *	<31	U/L
<b>ALKALINE PHOSPHATASE (ALP)</b> <i>PNPP, AMP Buffer - IFCC Ref.</i>	71	42 - 141	U/L
<b>TOTAL PROTEINS</b> <i>Biuret method</i>	7.8	6.0 - 8.0 g/dL	g/dL
<b>SERUM ALBUMIN</b> <i>Bromcresol Green (BCG)</i>	4.1	3.5 - 5.3	g/dL
<b>GLOBULINS</b> <i>Calculated</i>	3.7 *	1.80 - 3.60	g/dL
<b>A/G RATIO</b> <i>Calculation</i>	1.1 *	1.2 - 1.5	

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

  
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<b>Rept. Dt</b>	: 27-Jul-2024 12:40 PM	<b>Result No</b>	: RLR240709687
<b>Ref By</b>	: Dr. Penchila Prasad Kandikattu	<b>Sample ID</b>	: MCNNL7007265
<b>Sample Type</b>	:		

**SERUM URIC ACID**

<u>Parameters</u>	<u>Result</u>	<u>Referral Ranges</u>	<u>Units</u>
<b>SERUM URIC ACID</b> <i>uricase</i>	5.5	2.4-5.7	mg/dL

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<b>Rept. Dt</b>	: 27-Jul-2024 12:40 PM	<b>Result No</b>	: RLR240709686
<b>Ref By</b>	: Dr. PENCHILA PRASAD KANDIKATTU	<b>Sample ID</b>	: MCNNL7007265
<b>Sample Type</b>	: SERUM		

**TSH (THYROID STIMULATING HORMONE)**

<b><u>Parameters</u></b>	<b><u>Result</u></b>	<b><u>Referral Ranges</u></b>	<b><u>Units</u></b>
<b>TSH</b> ECLIA	3.34	0.270 - 4.20 uIU/mL	uIU/ml

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*



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# MEDICOVER HOSPITALS

NH-5, Chinthareddypalem Cross road,  
Alahari Nagar, Chintareddy Palem,  
Nellore, Andhra Pradesh 524002  
Email: info@medicoverhospitals.in, NELLORE



## LABORATORY REPORT : BIOCHEMISTRY


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<b>Rept. Dt</b>	: 27-Jul-2024 12:40 PM	<b>Result No</b>	: RLR240709685
<b>Ref By</b>	: Dr. Penchila Prasad Kandikattu	<b>Sample ID</b>	: MCNNL7007265
<b>Sample Type</b>	: SERUM		

### HBA1C (GLYCOSYLATED HAEMOGLOBIN)

<u>Parameters</u>	<u>Result</u>	<u>Referral Ranges</u>	<u>Units</u>
HBA1C IMMUNOTURBIDMETRIC	6.0 *	4.8-5.9%	

Suggested Clinical Correlation \* If necessary, Please discuss

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<b>Rept. Dt</b>	: 27-Jul-2024 12:40 PM	<b>Result No</b>	: RLR240709691
<b>Ref By</b>	: Dr. Penchila Prasad Kandikattu	<b>Sample ID</b>	: MCNNL7007265
<b>Sample Type</b>	: PLASMA		

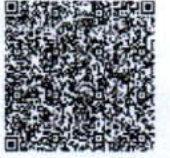
**FBS (FASTING BLOOD GLUCOSE)**

<b>Parameters</b>	<b>Result</b>	<b>Referral Ranges</b>	<b>Units</b>
<b>FASTING BLOOD GLUCOSE</b>	<b>102 *</b>	Normal Range : 70 - 99	mg/dL
<i>Hexokinase</i>		Impaired Glucose tolerance : 100 -125	
		Diabetes Mellitus : >=126	

Suggested Clinical Correlation \* If necessary, Please discuss

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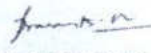
<b>Name</b>	: Mrs. JULUGANTI MUNI VENKATA LAVANYA RAMADEVI	<b>Age /Sex</b>	: 39Y Y(s)/FEMALE
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<b>Rept. Dt</b>	: 27-Jul-2024 12:40 PM	<b>Result No</b>	: RLR240709692
<b>Ref By</b>	: Dr. Penchila Prasad Kandikattu	<b>Sample ID</b>	: MCNNL7007265
<b>Sample Type</b>	: SERUM		

**LIPID PROFILE**

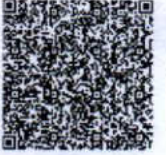
<b>Parameters</b>	<b>Result</b>	<b>Referral Ranges</b>	<b>Units</b>
<b>TOTAL CHOLESTEROL</b> <i>Enzymatic colorimetric</i>	151	Desirable : : < 200 mg/dL Borderline High : : 200 - 239 mg/dL High risk : > 240 mg/dL	mg/dL
<b>HDL CHOLESTEROL</b> <i>Homogeneous enzymatic colorimetric</i>	57	MALES : 30-70 mg/dL FEMALS : 30-85 mg/dL	mg/dL
<b>LDL CHOLESTEROL</b> <i>calculation</i>	93	Optimal : - < 100 mg/dL High : 160 - 189 mg/dL Borderline High:130-159 mg/dl Above optimal:100-129 mg/dl	mg/dL
<b>VLDL</b> <i>Calculation</i>	15	2 - 30 mg/dL	mg/dL
<b>SERUM TRYGLYCERIDES</b> <i>Enzymatic colorimetric</i>	77	< 150 mg/dL Borderline High : 150 - 199 mg/dL High : 200 - 499 mg/dL	mg/dL

Suggested Clinical Correlation \* If necessary, Please discuss

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<b>Sample Type</b>	: SERUM		

**BUN(BLOOD UREA NITROGEN)**

<u>Parameters</u>	<u>Result</u>	<u>Referral Ranges</u>	<u>Units</u>
BUN (Blood Urea Nitrogen.)	6.0		

Suggested Clinical Correlation \* If necessary, Please discuss

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<b>Rept. Dt</b>	: 27-Jul-2024 12:40 PM	<b>Result No</b>	: RLR240709682
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<b>Sample Type</b>	: SERUM		

**VITAMIN D3 (1,25 DIHYDROXY)**


<b><u>Parameters</u></b>	<b><u>Result</u></b>	<b><u>Referral Ranges</u></b>	<b><u>Units</u></b>
<b>VITAMIN D3 (1,25 DIHYDROXY)</b> <i>ELISA</i>	<b>7.88 *</b>	19.3 - 53.8 pg/ml	pg/ml

**INTERPRETATION**

- 1,25-dihydroxycholecalciferol or Calcitriol is the active form of vitamin D formed in Kidney.
- It is a hormone which binds to and activates the vitamin D receptor
- Calcitriol increases blood calcium (Ca<sup>2+</sup>) mainly by increasing the uptake of calcium from the intestines
- 1,25-Dihydroxyvitamin D concentrations are low in chronic renal failure and hypoparathyroidism.
- 1,25-Dihydroxyvitamin D concentrations are high in sarcoidosis and other granulomatous diseases, some malignancies, primary hyperparathyroidism, and physiologic hyperparathyroidism.
- 1,25-Dihydroxyvitamin D concentrations are not a reliable indicator of vitamin D toxicity; normal (or even low) results may be seen in such cases.

Suggested Clinical Correlation \* If necessary, Please discuss

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<b>Rept. Dt</b>	: 27-Jul-2024 12:40 PM	<b>Result No</b>	: RLR240709690
<b>Ref By</b>	: Dr. Penchila Prasad Kandikattu	<b>Sample ID</b>	: MCNNL7007265
<b>Sample Type</b>	:		

**SERUM CREATININE**

<b><u>Parameters</u></b>	<b><u>Result</u></b>	<b><u>Referral Ranges</u></b>	<b><u>Units</u></b>
<b>CREATININE</b> <i>Jaffe</i>	0.57	0.5 - 1.5	mg/dL

Suggested Clinical Correlation \* If necessary, Please discuss

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<b>Rec. Dt</b>	: 27-Jul-2024 10:19 AM	<b>Bill No.</b>	: MCB37240704306
<b>Rept. Dt</b>	: 27-Jul-2024 12:40 PM	<b>Result No</b>	: RLR240709689
<b>Ref By</b>	: Dr. Penchila Prasad Kandikattu	<b>Sample ID</b>	: MCNNL7007265
<b>Sample Type</b>	: SERUM		

**BUN / CREATININE RATIO**

<u>Parameters</u>	<u>Result</u>	<u>Referral Ranges</u>	<u>Units</u>
<b>BUN / CREATININE RATIO</b> CALCULATED	10.5	10-20 mg/dL	mg/dL

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

  
**Dr. M.PRASANTH**  
MD, CLINICAL BIOCHEMIST





**LABORATORY REPORT : BIOCHEMISTRY**


<b>Name</b>	: Mrs. JULUGANTI MUNI VENKATA LAVANYA RAMADEVI	<b>Age /Sex</b>	: 39Y Y(s)/FEMALE
<b>Bill Date</b>	: 27-Jul-2024 09:56 AM	<b>UMR No.</b>	: 372407001612
<b>Rec. Dt</b>	: 27-Jul-2024 11:40 AM	<b>Bill No.</b>	: MCB37240704306
<b>Rept. Dt</b>	: 27-Jul-2024 12:40 PM	<b>Result No</b>	: RLR240709684
<b>Ref By</b>	: Dr. Penchila Prasad Kandikattu	<b>Sample ID</b>	: MCNNL7007265
<b>Sample Type</b>	: SERUM		

**VITAMIN B12**

<b><u>Parameters</u></b>	<b><u>Result</u></b>	<b><u>Referral Ranges</u></b>	<b><u>Units</u></b>
<b>VITAMIN B12</b> ECLIA	<b>50.00 *</b>	197-771	pg/mL

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

  
**Dr. M.PRASANTH**  
MD, CLINICAL BIOCHEMIST



**LABORATORY REPORT : BIOCHEMISTRY**


<b>Name</b>	: Mrs. JULUGANTI MUNI VENKATA LAVANYA RAMADEVI	<b>Age /Sex</b>	: 39Y Y(s)/FEMALE
<b>Bill Date</b>	: 27-Jul-2024 09:56 AM	<b>UMR No.</b>	: 372407001612
<b>Rec. Dt</b>	: 27-Jul-2024 11:40 AM	<b>Bill No.</b>	: MCB37240704306
<b>Rept. Dt</b>	: 27-Jul-2024 12:40 PM	<b>Result No</b>	: RLR240709683
<b>Ref By</b>	: Dr. Penchila Prasad Kandikattu	<b>Sample ID</b>	: MCNNL7007265
<b>Sample Type</b>	: SERUM		

**T3 - Total (Tri Iodothyronine)**

<b><u>Parameters</u></b>	<b><u>Result</u></b>	<b><u>Referral Ranges</u></b>	<b><u>Units</u></b>
T3 ECIA	1.25	0.8 - 2.0	ng/mL

Suggested Clinical Correlation \* If necessary, Please discuss

\*\*\* End Of Report \*\*\*

  
**Dr. M.PRASANTH**  
MD, CLINICAL BIOCHEMIST





2D ECHO



**MEDICOVER**  
HOSPITALS

A UNIT OF ABHAYANJANEYA HEALTH CARE PVT LTD.

**Name: J.MUNI VENKATA LAVANYA RAMADEVI Age:39y/F**

**Date: 27/07/2024**

**Aorta** : 30mm  
**Left Atrium** : 32mm  
**Left Ventricle** : **LVID(D) : 48mm LVID (S):30mm EF:60%**  
**PWD (D): 11mm IVS (D): 11mm**  
No LV RWMA.

**Mitral Valve** : No MR.  
**Aortic Valve** : Normal.  
**Pulmonary Valve** : Normal.  
**Tricuspid Valve** : Trivial TR.  
**Right Atrium** : Normal  
**Right Ventricle** : Normal.  
**Pulmonary Veins** : Normal  
**IAS** : Intact.  
**IVS** : Intact.  
**Pericardium** : No Effusion.

**Doppler Study**

Aortic jet velocity -125cm/sc.  
Pulmonary jet velocity -96cm/sc.  
Mitral E-45cm/s. Mitral A-65cm/s. DT-190ms.  
TRPG-10mmHg. RVSP-15mmHg.No PAH.

**Conclusion**

**Tachycardia+**  
**No LV RWMA.**  
**Good LV Function.**  
**Trivial TR.**  
No LA&Lv Thrombus.No pericardial Effusion

**DRC VIJAYA AMARNATH REDDY**  
**(MD,DM CARDIOLOGY)**



Rate 105 . Age not entered, assumed to be 50 years old for purpose of ECG interpretation  
 . Sinus tachycardia.....rate> 99  
 PR 148 . Ventricular premature complex.....V complex w/ short R-R interval  
 QRSD 88 . Inferior infarct, old.....Q >35mS, II III aVF  
 QT 352 . Probable anterior infarct, age indeterminate.....Q >35mS, T neg, V2-V5  
 QTc 466 . Baseline wander in lead(s) III, aVL, V3, V5

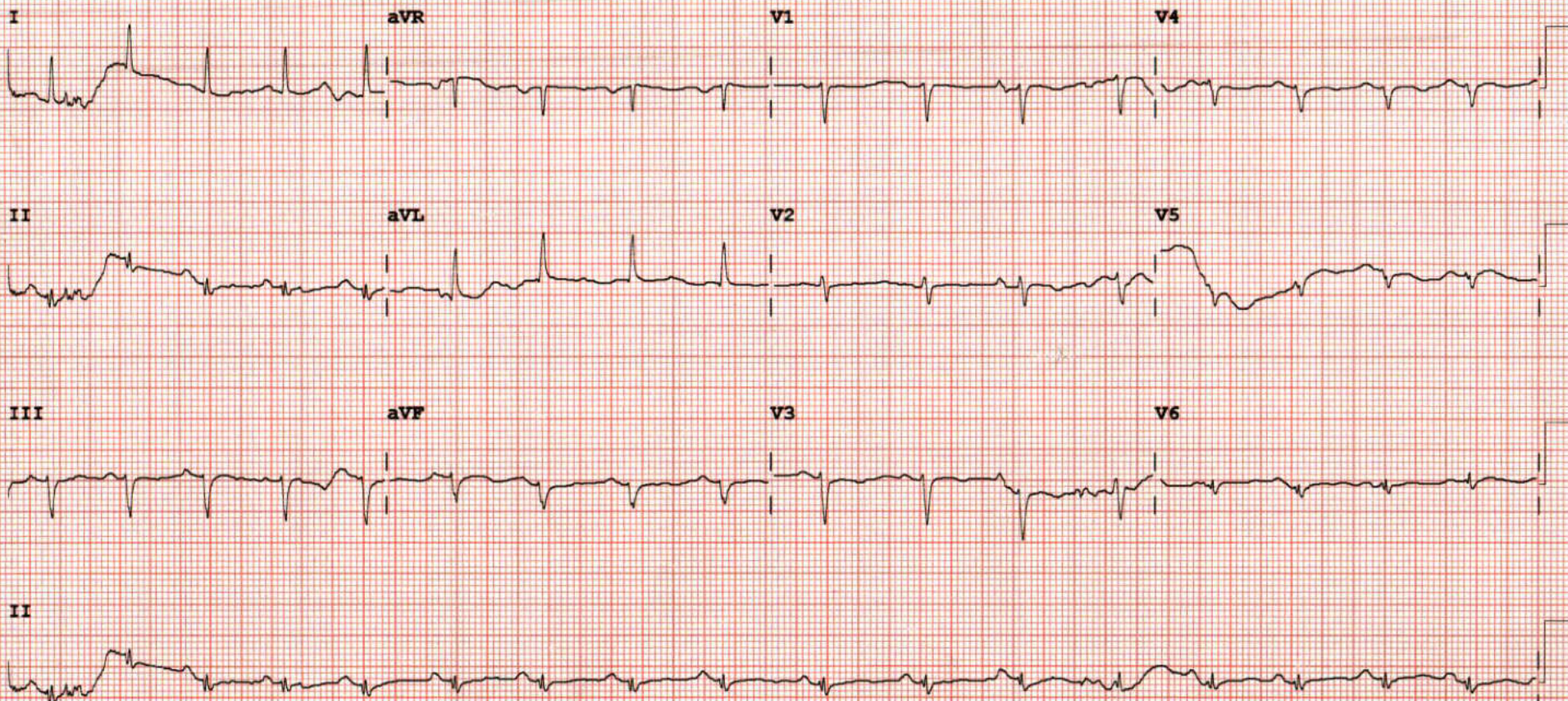
--AXIS--

P 64  
 QRS -45  
 T -12

- ABNORMAL ECG -

12 Lead; Standard Placement

Unconfirmed Diagnosis



Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 50~ 0.50- 40 Hz W PH100B CL P?





**MEDICOVER**  
HOSPITALS

A UNIT OF ABHAYANJANEYA HEALTH CARE PVT LTD.

**Patient Name : Juluganti Muni Venkata Lavanya Ramadevi Age: 39y/F**

**Ref. Dr. Panchila Prasad K**

**UMR 1612**

**Date:27-07-2024**

**ULTRASOUND ABDOMEN**

Liver is normal in size and echotexture. No evidence of any focal solid or cystic lesions. No evidence of any intrahepatic biliary dilatation.

Gall Bladder is contracted.

CBD and PV appear normal.

Pancreas is normal in size and echotexture.No evidence of focal lesion or calcification.

Spleen is normal in size and echotexture.No evidence of focal lesions or calcification.

Right kidney is normal in size and echotexture. CMD maintained.No evidence of any pelvicalyceal dilatation. No calculi seen.

Left kidney is normal in size and echotexture. CMD maintained. No evidence of any pelvicalyceal dilatation. No calculi seen.

Urinary bladder is minimally distended.


Uterus and ovaries grossly appears normal.

No evidence of any free fluid in peritoneal cavity and pelvis.

**IMPRESSION:**

**No significant abnormality detected in present study.**

**For clinical correlation.**

  
**Dr. K Nishitha MD RD.,**  
**Consultant Radiologist**