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SRI PARVATHI OPTICS

Multi Branded Opticals Store

Computerized Eye Testing & Spectacles Clinic

333.8th Main 5th Cross Near Cambridge & Miranda School HAL 3rd Stage
Behind Vishveshvariah Park New Thippasandra, Bangalore - 560075,
Email: parvathiopticals@gmail.com

SPECTACLE PRESCRIPTION

Name: Subbaraju M

No. 1610

Mobil No: 9945338238

Date: 14/11/22

Age / Gender 58y / M

Ref. No.

		RIGHT EYE				LEFT EYE		
	SPH	CYL	AXIS	VISION	SPH	CYL	AXIS	VISION
DISTANCE	+6.50	2.75	95	6/6	+1.50	2.25	94	6/6
NEAR	Add	+2.50	BE					

PD 63 mm

Advice to use glasses for:

☐ DISTANCE ☑ FAR & NEAR ☐ READING ☐ COMPUTER PURFOSE

We Care Your Eyes

SRI PARVATHI OPTICS

NEW THIPPASANDRA

CLUMAX DIAGNOSTICS

MEDALL

--- A MEDALL COMPANY ---

Date 14-Nov-2022 9:12 AM

Customer Name : **MR.V SUBBARAJU M**
Ref Dr Name   : **MediWheel**
Customer Id   : **MED111370744**
Email Id   :
Corp Name   : :MediWheel
Address   :

DOB   : **28 Apr 1964**
Age   : **58Y/MALE**
Visit ID :422077337
Phone No : **9945338238**

Package Name : **Mediwheel Full Body Health Checkup Male Above 40**

S.No	Modality	Study	Accession No	Time	Seq	Signature
1	LAB	BLOOD UREA NITROGEN (BUN)				
2	LAB	CREATININE				
3	LAB	GLUCOSE - FASTING				
4	LAB	GLUCOSE - POSTPRANDIAL (2 HRS)				
5	LAB	GLYCOSYLATED HAEMOGLOBIN (HbA1c)				
6	LAB	URIC ACID				
7	LAB	LIPID PROFILE				
8	LAB	LIVER FUNCTION TEST (LFT)				
9	LAB	TOTAL PROSTATE SPECIFIC ANTIGEN - PSA				
10	LAB	THYROID PROFILE/ TFT(T3, T4, TSH)				
11	LAB	URINE GLUCOSE - FASTING				
12	LAB	URINE GLUCOSE - POSTPRANDIAL (2 Hrs)				
13	LAB	COMPLETE BLOOD COUNT WITH ESR				
14	LAB	STOOL ANALYSIS - ROUTINE				
15	LAB	URINE ROUTINE				
16	LAB	BUN/CREATININE RATIO				
17	LAB	BLOOD GROUP & RH TYPE (Forward Reverse)				
18	ECG	ECG	IND13511891138		done	7pm
19	OTHERS	Treadmill / 2D Echo	IND135118914690			
20	OTHERS	physical examination	IND135118915279			
21	US	ULTRASOUND ABDOMEN	IND135118915292			
22	OTHERS	Dental Consultation	IND135118916289			
23	OTHERS	EYE CHECKUP	IND135118917756			
24	X-RAY	X RAY CHEST	IND135118918659			
25	OTHERS	Consultation Physician	IND135118918736			

MEDALL CLUMAX
01234567890

Name	: **V SUBBARAJU M**	Tested on	: **14/11/2022,08:05 PM**
ID	: **MED111370744**	Doctor	: **C/O MEDIWHEEL**
Age,Wt,Ht	: **58years(Male), Kg,cm**		

BPL DYNATRAC NEO

Test Summary Report

Target HR = 162

HR achieved = 129 (79%)

Peak Ex = Exercise 3

Total time = 12:06

Excercise time = 08:01

Recovery time = 03:02

Protocol = BRUCE

Max ST(mm)=2.20(Lead V4)

Min ST(mm)=---(Lead ---)

Stagewise Summary

Stage Name	Duration (mm:ss)	Max HR (bpm)	Max ST (mm)	Min ST (mm)	Speed km/hr	Slope (%)	METS	sys/dia (map)
Supine	00:38	74	2.20(V4)	---	0.0	0.0	0.00	---/---(---)
Waiting for Exercise	00:25	75	1.23(V3)	-0.29(AVR)	0.0	0.0	0.00	---/---(---)
Exercise 1	03:00	101	2.20(V4)	-1.48(AVR)	2.7	10.0	5.10	130/90(103)
Exercise 2	03:00	116	1.74(AVR)	-1.79(V6)	4.0	12.0	7.10	136/90(105)
Peak Exercise 3	02:01	129	1.28(AVR)	-2.34(V6)	5.5	14.0	10.00	140/90(106)
Recovery 1	01:00	129	1.04(V3)	-1.75(V5)	5.5	14.0	0.00	140/90(106)
Recovery 2	01:00	102	0.68(AVR)	-1.29(V5)	5.5	14.0	0.00	140/90(106)
Recovery 3	01:00	92	0.72(AVR)	-1.14(V5)	5.5	14.0	0.00	130/90(103)
Recovery 4	00:02	91	---	---	5.5	14.0	0.00	---/---(---)

Rpp: 13130(Exercise 1) ,15776(Exercise 2) ,18060(Peak Exercise 3) ,18060(Recovery 1) ,14280(Recovery 2) ,11960(Recovery 3)

Stage comments: none

Object of test	:
Risk factor	:
Activity	:
Other Investigation	:
Ex tolerance	:
Ex Arrhythmia	:
Hemo Response	:
Chrono response	:
Reason for Termination	:

HR Trend Graph
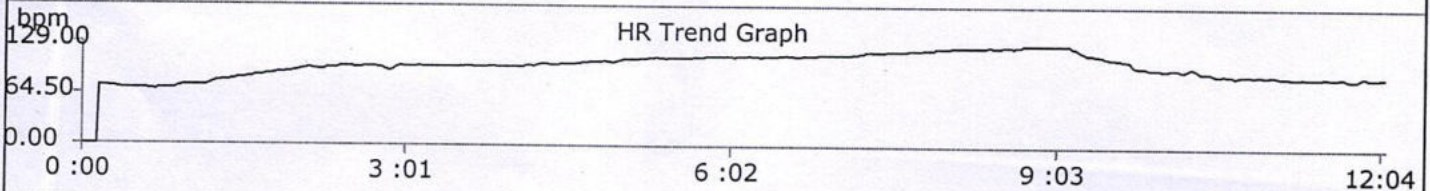
Medication:

History:

Observations:

Final Impression:

Stress Test Negative for Inducible Ischemia

SUBRAMANI.K.S.
MD. DM (CARDIOLOGY)
Consultant Cardiologist
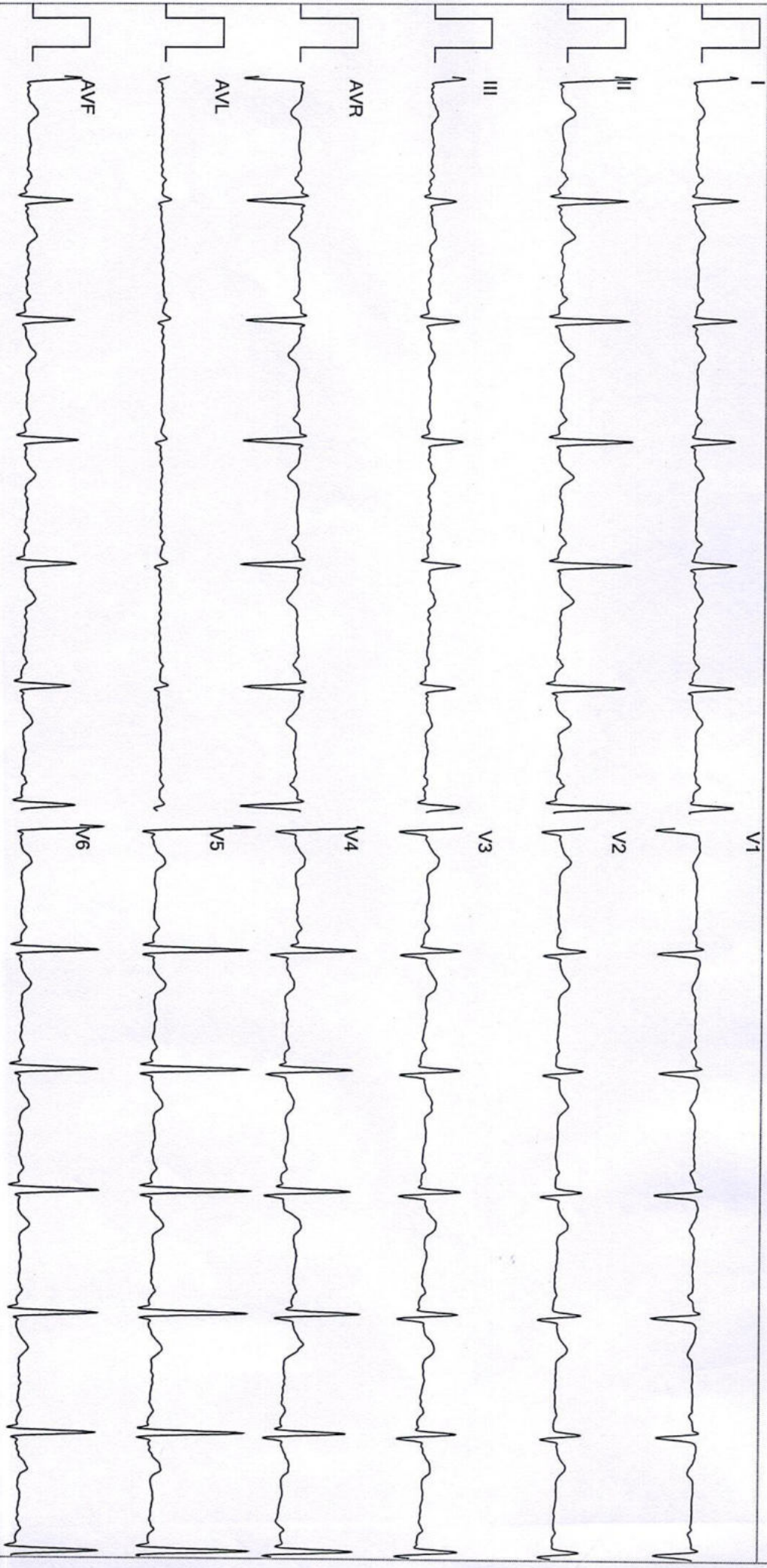KMC REG No : 46604
Clumax Diagnostics

Technician: Done By:Dr. SUBRAMANI K S   Confirmed by -

Rhythm Report

MEDALL CLUMAX
0123456789

ID	: **MED11137O744**	
NAME	: **V SUBBARAJU M**	
AGE	: **58**	
NIBP	: **--/--(--)**	
ST Level(mm), ST Slope (mV/sec) at 80ms PJ		

Stage	: Supine	Protocol	: **BRUCE**	
Pre Test Time	: **00:34**	Speed(Km/h)	: **0.0**	Test on : **14/11/2022,08:05 PM**
Stage Time	: **00:34**	Grade(%)	: **0.00**	Doctor : **C/O MEDIWHEEL**
HR	: **71 (43%)**	METS	: **0.00**	**BPL DYNATRAC NEO**

I

II

III

AVR

AVL

AVF

V1

V2

V3

V4

V5

V6

*   Waveforms are computer synthesized.   Technician: 20Hz filter   Gain: 10mm/mV   Speed: 25mm/sec

Page 1 of 1

Linked Median Report

MEDALL CLUMAX
0123456789

ID	: MED11370744	Stage	: Supine	Protocol	: BRUCE
NAME	: V SUBBARAJU M	Pre Test Time	: 00:38	Speed(Km/h)	: 0.0	Test on : 14/11/2022,08:05 PM
AGE	: 58	Stage Time	: 00:38	Grade(%)	: 0.00	Doctor : C/O MEDIWHEEL
NIBP	: ---/---(---)	HR	: 70 (43%)	METS	: 0.00	

ST Level(mm), ST Slope (mV/sec) at 80ms PJ

*I
(0.19)/ (0.18)

*II
(0.22)/ (-0.04)

*III
(0.26)/ (-0.25)

=

*AVR
(-0.24)/ (-0.13)

*AVL
(0.03)/ (0.11)

*AVF
(0.22)/ (-0.14)

*V1
(0.39)/ (0.04)

*V2
(0.83)/ (0.21)

*V3
(1.30)/ (0.80)

*V4
(-0.85)/ (0.29)

*V5
(0.23)/ (0.13)

*V6
(0.03)/ (-0.11)

BPL DYNATRAC NEO

* Waveforms are computer synthesized.   Technician: 20Hz filter   Gain: 10mm/mV   Speed: 25mm/sec   Page 1 of 1

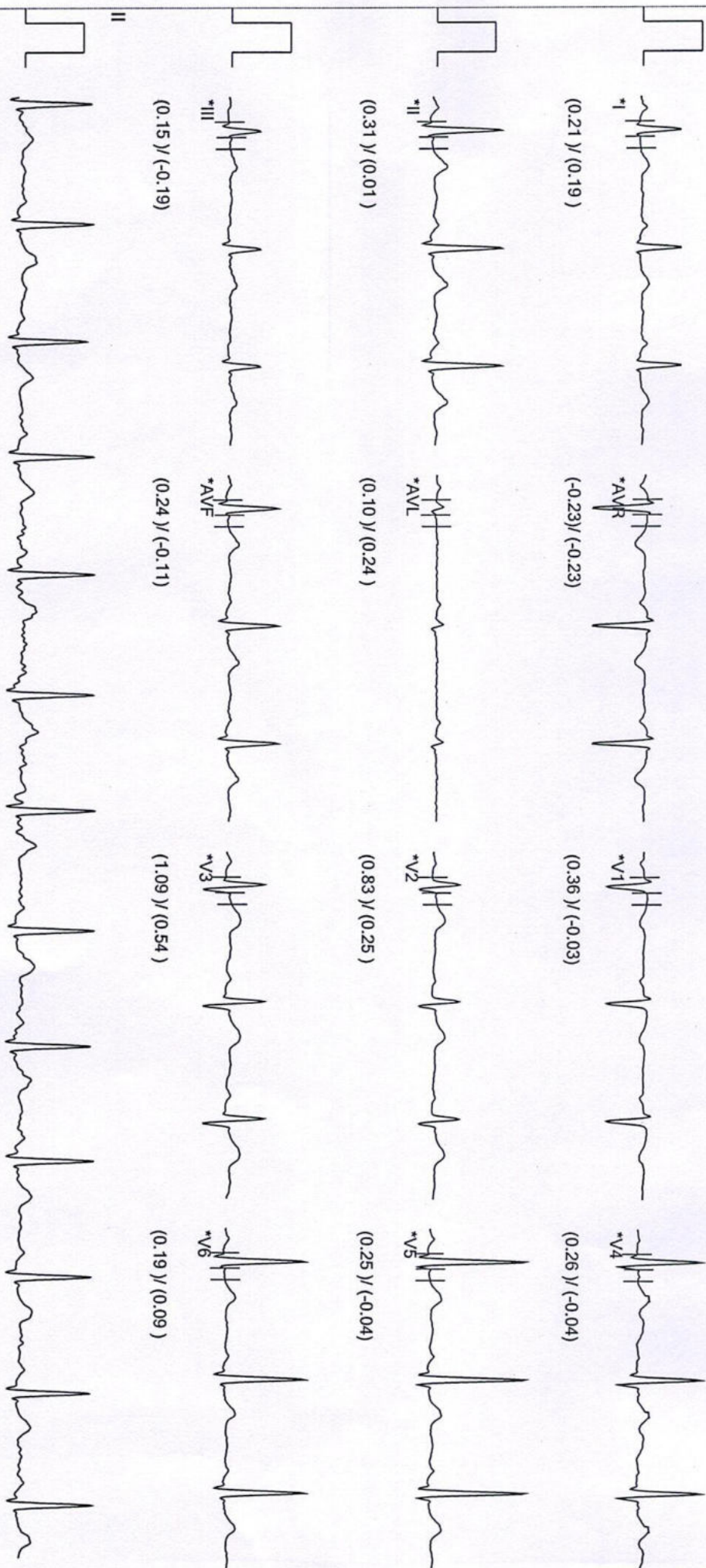# Linked Median Report
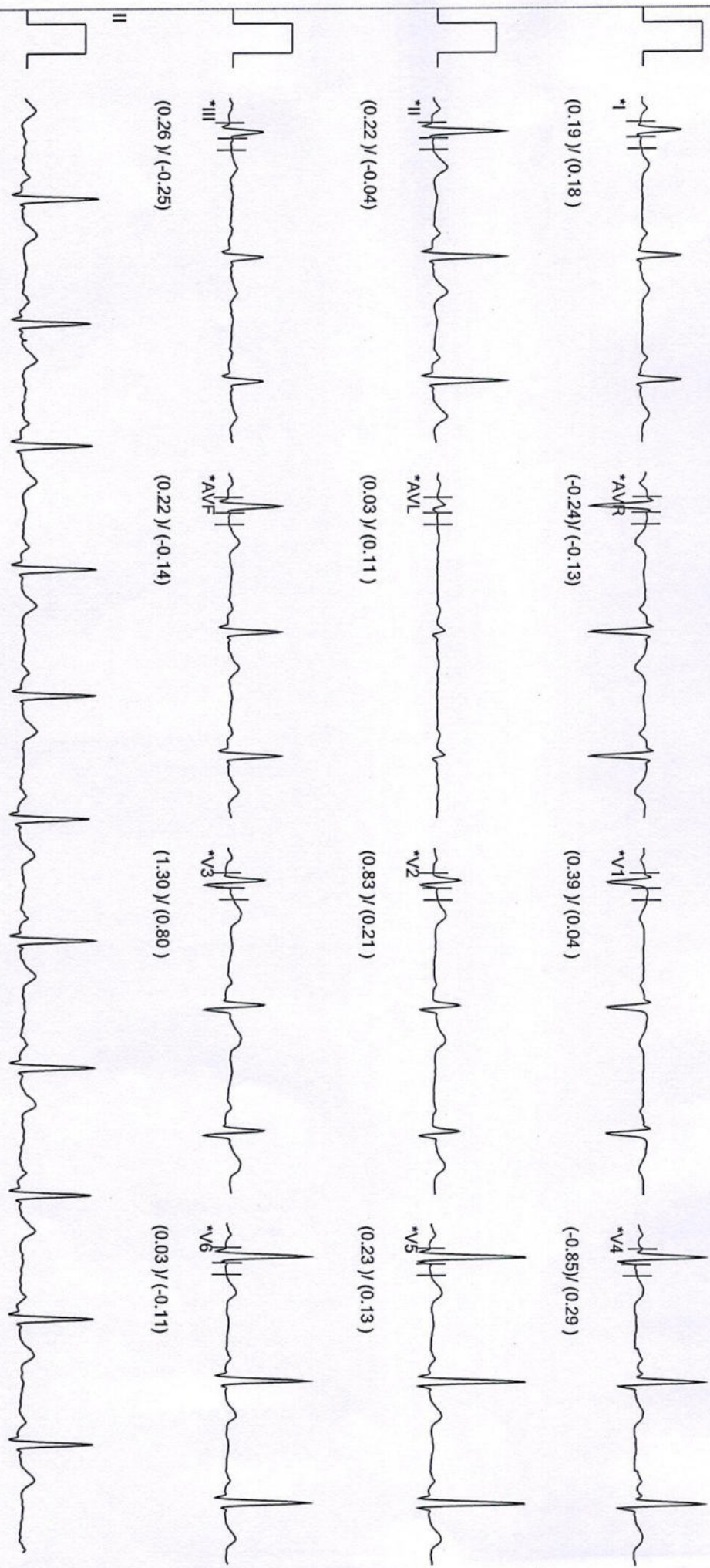
MEDALL CLUMAX
012345678910

ID	: MED11370744	Stage	: Waiting for Exe ..	Protocol	: BRUCE
NAME	: V SUBBARAJU M	Pre Test Time	: 01:03	Speed(Km/h)	: 0.0	Test on : **14/11/2022,08:05 PM**
AGE	: 58	Stage Time	: 00:25	Grade(%)	: 0.00	Doctor : **C/O MEDIWHEEL**
NIBP	: ---/---(---)	HR	: 75 (46%)	METS	: 0.00
ST Level(mm), ST Slope (mV/sec) at 80ms PJ				

BPL DYNATRAC NEO

*I
(0.21)/ (0.19)

*AVR
(-0.23)/ (-0.23)

*V1
(0.36)/ (-0.03)

*V4
(0.26)/ (-0.04)

*II
(0.31)/ (0.01)

*AVL
(0.10)/ (0.24)

*V2
(0.83)/ (0.25)

*V5
(0.25)/ (-0.04)

*III
(0.15)/ (-0.19)

*AVF
(0.24)/ (-0.11)

*V3
(1.09)/ (0.54)

*V6
(0.19)/ (0.09)

=

* Waveforms are computer synthesized.   Technician: 20Hz filter   Gain: 10mm/mV   Speed: 25mm/sec

Page 1 of 1

Linked Median Report

MEDALL CLUMAX
012345567890

ID	: MED11137O744		Stage	: Exercise 1	Protocol	: BRUCE
NAME	: V SUBBARAJU M		Exercise Time	: 03:00	Speed(Km/h)	: 2.7 Test on : 14/11/2022,08:05 PM
AGE	: 58		Stage Time	: 03:00	Grade(%)	: 10.00 Doctor : C/O MEDIWHEEL
NIBP	: 130/90(103)		HR	: 100 (61%)	METS	: 5.10

BPL DYNATRAC NEO

ST Level(mm), ST Slope (mV/sec) at 80ms PJ

*I
(-0.05)/ (0.25)

*AVR
(-0.07)/ (-0.59)

*V1
(0.38)/ (-0.15)

*V4
(0.09)/ (0.71)

*II
(-0.01)/ (0.86)

*AVL
(0.05)/ (0.28)

*V2
(0.44)/ (0.10)

*V5
(-0.22)/ (0.34)

*III
(-0.34)/ (-0.20)

*AVF
(-0.26)/ (0.36)

*V3
(0.73)/ (0.59)

*V6
(-0.66)/ (-0.13)

=

Linked Median Report

MEDALL CLUMAX
0123456789

ID	: MED11370744		
NAME	: V SUBBARAJU M	Stage	: Exercise 2
AGE	: 58	Exercise Time	: 06:00
		Stage Time	: 03:00
NIBP	: 136/90(105)	HR	: 116 (71%)

Protocol : BRUCE
Speed(Km/h) : 4.0   Test on : 14/11/2022,08:05 PM
Grade(%) : 12.00Doctor : C/O MEDIWHEEL
METS : 7.10

BPL DYNATRAC NEO

ST Level(mm), ST Slope (mV/sec) at 80ms PJ

*I (-0.13)/ (0.83)

*aVR (0.33)/ (-0.54)

*V1 (0.44)/ (-0.29)

*V4 (-0.07)/ (1.15)

*II (-0.47)/ (0.58)

*aVL (0.06)/ (0.23)

*V2 (0.27)/ (0.14)

*V5 (-1.09)/ (0.74)

*III (-0.31)/ (0.06)

*aVF (-0.39)/ (0.24)

*V3 (0.27)/ (0.98)

*V6 (-1.15)/ (0.38)

=

* Waveforms are computer synthesized.   Technician: 20Hz filter   Gain: 10mm/mV   Speed: 25mm/sec   Page 1 of 1

Linked Median Report

MEDALL CLUMAX
0123456789

ID	: MED11370744			
NAME	: V SUBBARAJU M	Stage	: Peak Exercise 3	Protocol	: BRUCE
AGE	: 58	Exercise Time	: 08:01	Speed(Km/h)	: 5.5	Test on : 14/11/2022,08:05 PM
		Stage Time	: 02:01	Grade(%)	: 14.00	Doctor : C/O MEDIWHEEL
NIBP	: 140/90(106)	HR	: 129 (79%)	METS	: 10.00
ST Level(mm), ST Slope (mV/sec) at 60ms PJ						BPL DYNATRAC NEO

*I (-0.28)/ (0.28)

*AVR (0.91)/ (-0.33)

*V1 (0.89)/ (0.55)

*V4 (-1.25)/ (0.42)

*II (-1.80)/ (-0.47)

*AVL (0.59)/ (0.35)

*V2 (0.33)/ (0.33)

*V5 (-2.22)/ (-0.03)

*III (-1.77)/ (-0.92)

*AVF (-1.87)/ (-0.65)

*V3 (-0.12)/ (1.38)

*V6 (-1.70)/ (0.22)

II

Linked Median Report

ID	: MED11137O744	
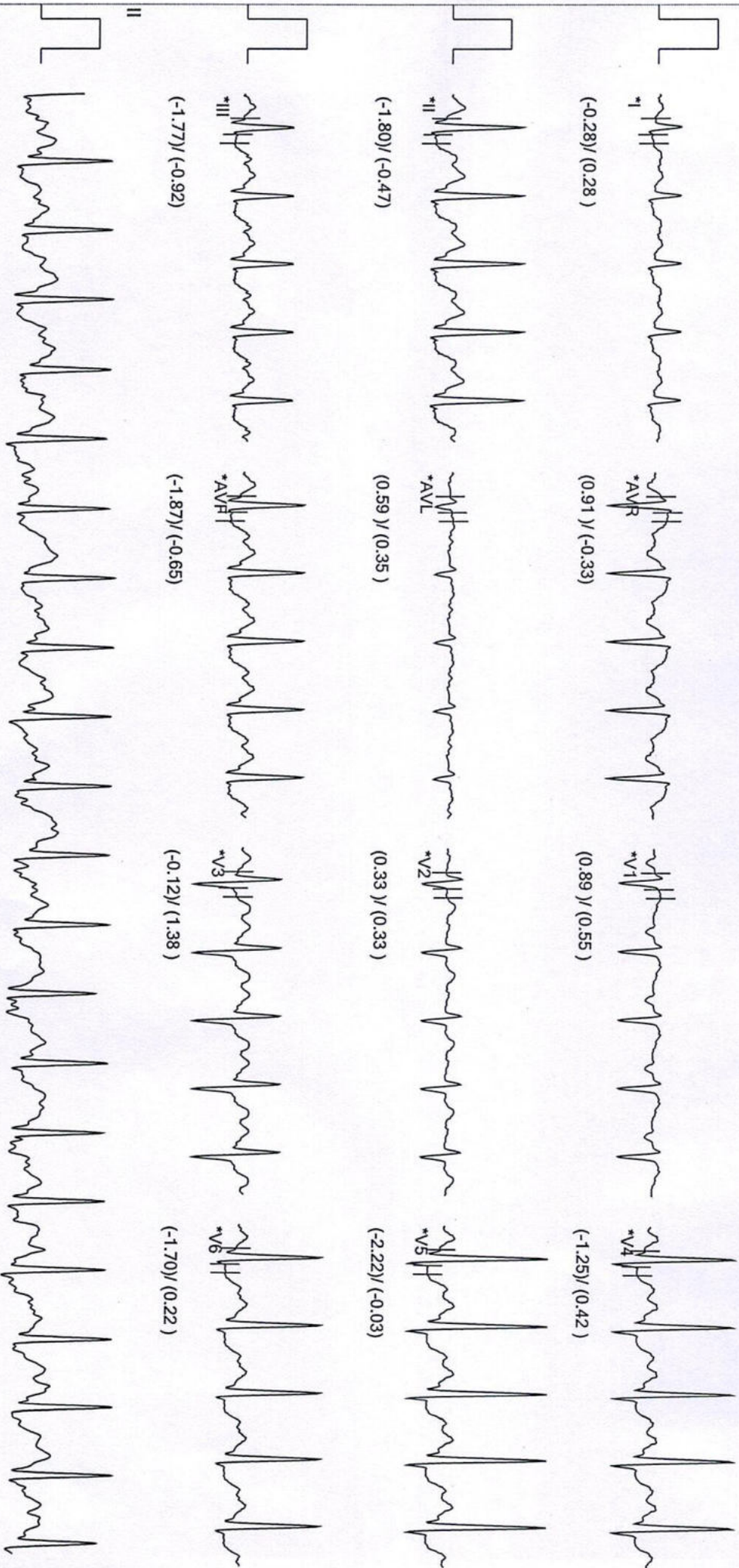
MEDALL CLUMAX
0123456789O

NAME	: V SUBBARAJU M	Stage	: Recovery 1	Protocol	: BRUCE
AGE	: 58	Recovery Time	: 01:00	Speed(Km/h)	: 5.5 Test on : 14/11/2022,08:05 PM
		Stage Time	: 01:00	Grade(%)	: 14.00 Doctor : C/O MEDIWHEEL
NIBP	: 140/90(106)	HR	: 99 (61%)	METS	: 0.00

ST Level(mm), ST Slope (mV/sec) at 80ms PJ

BPL DYNATRAC NEO

*I
(0.03)/ (0.51)

*AVR
(0.13)/ (-0.73)

*V1
(0.22)/ (-0.50)

*V4
(-0.15)/ (0.60)

*II
(-0.32)/ (0.91)

*AVL
(0.10)/ (0.08)

*V2
(0.46)/ (0.54)

*V5
(-0.59)/ (0.50)

*III
(-0.09)/ (0.49)

*AVF
(-0.23)/ (0.59)

*V3
(0.65)/ (1.18)

*V6
(-0.51)/ (0.39)

=
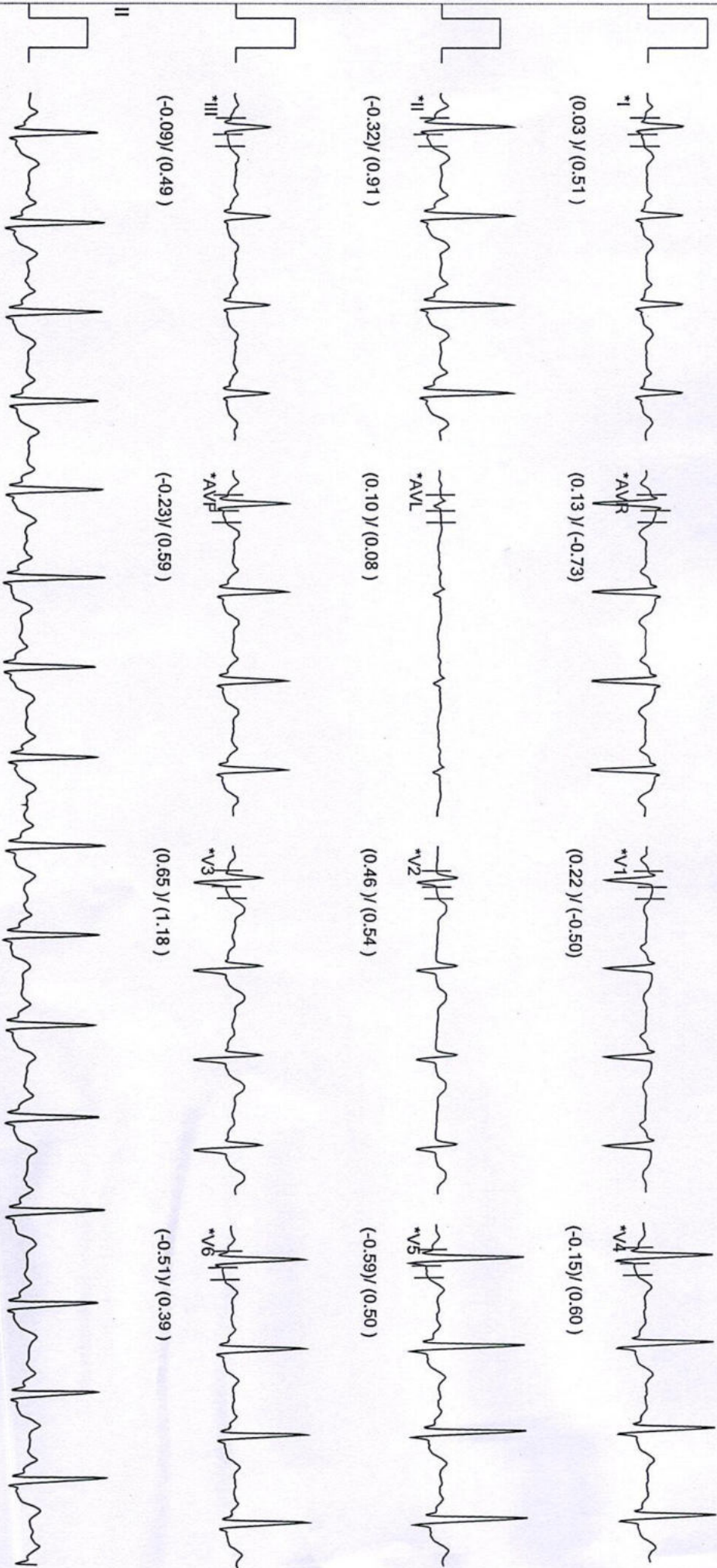
Linked Median Report

MEDALL CLUMAX
0123456789O

ID	: MED111370744	Stage	: Recovery 2	Protocol	: BRUCE
NAME	: V SUBBARAJU M	Recovery Time	: 02:00	Speed(Km/h)	: 5.5 Test on : 14/11/2022,08:05 PM
AGE	: 58	Stage Time	: 01:00	Grade(%)	: 14.00Doctor : C/O MEDIWHEEL
NIBP	: 140/90(106)	HR	: 93 (57%)	METS	: 0.00

BPL DYNATRAC NEO

ST Level(mm), ST Slope (mV/sec) at 80ms PJ

*I
(-0.48)/ (0.01)

*AVR
(0.68)/ (-0.10)

*V1
(0.42)/ (-0.20)

*V4
(-0.79)/ (0.01)

*II
(-0.78)/ (0.13)

*AVL
(-0.03)/ (-0.04)

*V2
(-0.18)/ (-0.13)

*V5
(-1.29)/ (-0.20)

*III
(-0.50)/ (0.11)

*AVF
(-0.59)/ (0.19)

*V3
(-0.46)/ (0.08)

*V6
(-1.09)/ (-0.23)

=

Linked Median Report

MEDALL CLUMAX
012345678890

ID	: MED11137O744	Stage	: Recovery 3	Protocol	: BRUCE
NAME	: V SUBBARAJU M	Recovery Time	: 03:00	Speed(Km/h)	: 5.5 Test on : 14/11/2022,08:05 PM
AGE	: 58	Stage Time	: 01:00	Grade(%)	: 14.00 Doctor : C/O MEDIWHEEL
NIBP	: 130/90(103)	HR	: 91 (56%)	METS	: 0.00

BPL DYNATRAC NEO

ST Level(mm), ST Slope (mV/sec) at 80ms PJ

*I
(-0.44)/ (0.10)

*AVR
(0.66)/ (-0.05)

*V1
(0.40)/ (-0.14)

*V4
(-0.80)/ (-0.20)

*II
(-0.84)/ (-0.01)

*AVL
(0.01)/ (0.03)

*V2
(-0.20)/ (-0.18)

*V5
(-1.11)/ (-0.10)

*III
(-0.40)/ (-0.09)

*AVF
(-0.69)/ (-0.13)

*V3
(-0.35)/ (0.00)

*V6
(-0.94)/ (-0.26)

II

* Waveforms are computer synthesized.   Technician: 20Hz filter   Gain: 10mm/mV   Speed: 25mm/sec
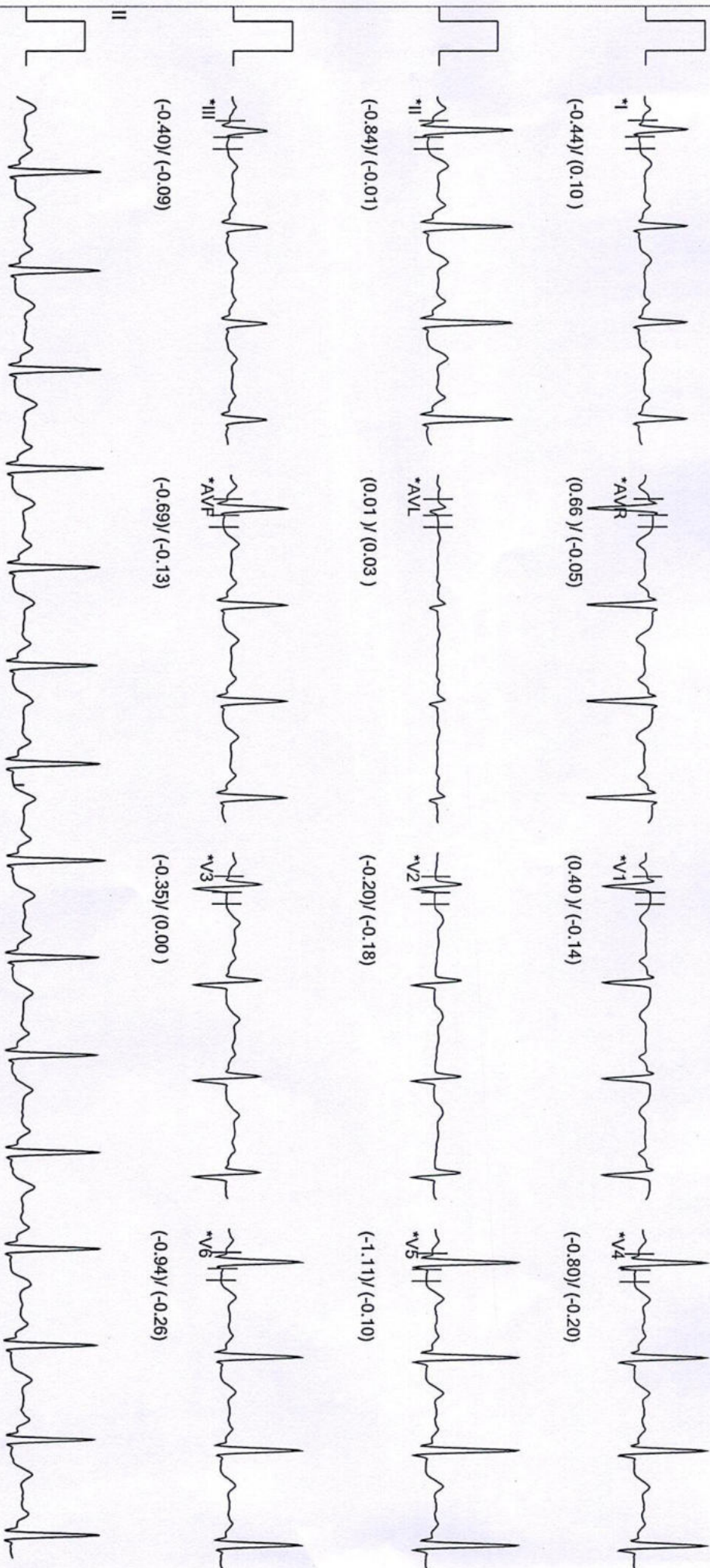
Name	V SUBBARAJU M		ID	MED111370744
Age & Gender	58Year(s)/MALE		Visit Date	11/14/2022 12:00:00 AM
Ref Doctor Name	MediWheel			

ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in size and shows diffuse fatty changes. . No evidence of focal lesion or intrahepatic biliary ductal dilatation. Hepatic and portal vein radicals are normal.

GALL BLADDER shows 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 shows normal shape, size and echopattern. Spleen measures 9.8cms in long axis.
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.
A simple cortical cyst measuring about 2.3 x 1.5cms is noted in the lower pole of the right kidney.
A small (8mm) simple cortical cyst is noted in the interpolar region of the left kidney.

The kidney measures as follows:

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	**12.5**	**1.9**
Left Kidney	**11.2**	**2.0**

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

PROSTATE shows normal shape, size and echopattern. It measures 4.1 x 2.8 x 2.5cms (Vol:15cc).

No evidence of ascites / pleural effusion.

IMPRESSION:

- ➢ **GRADE I FATTY LIVER.**
- ➢ **BILATERAL SIMPLE RENAL CORTICAL CYSTS.**

DR. MANIMALA RUPA
CONSULTANT RADIOLOGIST
MR/vp

Name	V SUBBARAJU M	Customer ID	MED111370744
Age & Gender	58Y/M	Visit Date	Nov 14 2022 9:12AM
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:

No significant abnormality detected.

DR. APARNA

CONSULTANT RADIOLOGIST

Name	:	**Mr. V SUBBARAJU M**			
PID No.	:	MED111370744	**Register On**	:	14/11/2022 9:14 AM
SID No.	:	422077337	**Collection On**	:	14/11/2022 10:53 AM
Age / Sex	:	58 Year(s) / Male	**Report On**	:	14/11/2022 4:19 PM
Type	:	OP	**Printed On**	:	16/11/2022 6:58 PM
Ref. Dr	:	**MediWheel**			

Investigation	Observed Value	Unit	Biological Reference Interval

HAEMATOLOGY

Complete Blood Count With - ESR

Haemoglobin (EDTA Blood/*Spectrophotometry)*	**12.4**	g/dL	13.5 - 18.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood*)*	**40.5**	%	42 - 52
RBC Count (EDTA Blood*)*	4.99	mill/cu.mm	4.7 - 6.0
Mean Corpuscular Volume(MCV) (EDTA Blood*)*	81.2	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood*)*	**24.8**	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood*)*	**30.5**	g/dL	32 - 36
RDW-CV (EDTA Blood*)*	**16.2**	%	11.5 - 16.0
RDW-SD (EDTA Blood*)*	**46.04**	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood*)*	5100	cells/cu.mm	4000 - 11000
Neutrophils (EDTA Blood*)*	42.0	%	40 - 75
Lymphocytes (EDTA Blood*)*	**46.5**	%	20 - 45
Eosinophils (EDTA Blood*)*	3.4	%	01 - 06
Monocytes (EDTA Blood*)*	6.7	%	01 - 10

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

Name	: **Mr. V SUBBARAJU M**			
PID No.	: MED111370744	**Register On**	:	14/11/2022 9:14 AM
SID No.	: 422077337	**Collection On**	:	14/11/2022 10:53 AM
Age / Sex	: 58 Year(s) / Male	**Report On**	:	14/11/2022 4:19 PM
Type	: OP	**Printed On**	:	16/11/2022 6:58 PM
Ref. Dr	: **MediWheel**			

Investigation	Observed Value	Unit	Biological Reference Interval
Basophils (Blood)	1.4	%	00 - 02

INTERPRETATION: Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.

Absolute Neutrophil count (EDTA Blood)	2.14	10^3 / µl	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood)	2.37	10^3 / µl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood)	0.17	10^3 / µl	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood)	0.34	10^3 / µl	< 1.0
Absolute Basophil count (EDTA Blood)	0.07	10^3 / µl	< 0.2
Platelet Count (EDTA Blood)	225	10^3 / µl	150 - 450
MPV (EDTA Blood)	8.6	fL	7.9 - 13.7
PCT (EDTA Blood/Automated Blood cell Counter)	0.19	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citrated Blood)	8	mm/hr	< 20

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

Name	: **Mr. V SUBBARAJU M**			
PID No.	: MED111370744	**Register On**	:	14/11/2022 9:14 AM
SID No.	: 422077337	**Collection On**	:	14/11/2022 10:53 AM
Age / Sex	: 58 Year(s) / Male	**Report On**	:	14/11/2022 4:19 PM
Type	: OP	**Printed On**	:	16/11/2022 6:58 PM
Ref. Dr	: **MediWheel**			

| Investigation	Observed Value	Unit	Biological Reference Interval
BIOCHEMISTRY			
Liver Function Test			
Bilirubin(Total) (Serum/_DCA with ATCS_)	0.46	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/_Diazotized Sulfanilic Acid_)	0.17	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/_Derived_)	0.29	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/_Modified IFCC_)	28.97	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/_Modified IFCC_)	40.18	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/_IFCC / Kinetic_)	39.55	U/L	< 55
Alkaline Phosphatase (SAP) (Serum/_Modified IFCC_)	92.1	U/L	56 - 119
Total Protein (Serum/_Biuret_)	7.21	gm/dl	6.0 - 8.0
Albumin (Serum/_Bromocresol green_)	4.45	gm/dl	3.5 - 5.2
Globulin (Serum/_Derived_)	2.76	gm/dL	2.3 - 3.6
A : G RATIO (Serum/_Derived_)	1.61		1.1 - 2.2

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SID No.	: 422077337	**Collection On** :	14/11/2022 10:53 AM
Age / Sex	: 58 Year(s) / Male	**Report On** :	14/11/2022 4:19 PM
Type	: OP	**Printed On** :	16/11/2022 6:58 PM
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Investigation	Observed Value	Unit	Biological Reference Interval
Lipid Profile			
Cholesterol Total (Serum/*CHOD-PAP with ATCS*)	188.11	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/*GPO-PAP with ATCS*)	85.51	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*)	**47.68**	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/*Calculated*)	123.3	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >=190
VLDL Cholesterol (Serum/*Calculated*)	17.1	mg/dL	< 30
Non HDL Cholesterol (Serum/*Calculated*)	140.4	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >=220
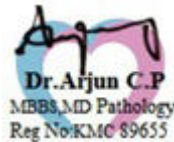
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Investigation	Observed Value	Unit	Biological Reference Interval

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.

Investigation	Observed Value	Unit	Biological Reference Interval
Total Cholesterol/HDL Cholesterol Ratio (Serum/*Calculated*)	3.9		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*)	1.8		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/*Calculated*)	2.6		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
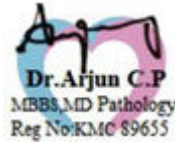
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Investigation	Observed Value	Unit	Biological Reference Interval
Glycosylated Haemoglobin (HbA1c)			
HbA1C (Whole Blood/*HPLC*)	**8.3**	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %
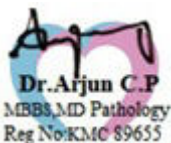
Estimated Average Glucose (Whole Blood*)*	191.51	mg/dL

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.

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Investigation	Observed Value	Unit	Biological Reference Interval

IMMUNOASSAY

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/*ECLIA)*	1.46	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)*	8.92	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)*	2.48	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.

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Investigation	Observed Value	Unit	Biological Reference Interval
CLINICAL PATHOLOGY			
PHYSICAL EXAMINATION (URINE COMPLETE)			
Colour (Urine)	Yellow		Yellow to Amber
Appearance (Urine)	Clear		Clear
Volume(CLU) (Urine)	25		
CHEMICAL EXAMINATION (URINE COMPLETE)			
pH (Urine)	5.0		4.5 - 8.0
Specific Gravity (Urine)	1.013		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
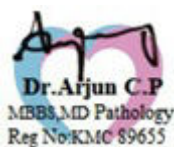
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Investigation	Observed Value	Unit	Biological Reference Interval
Glucose (Urine/*GOD - POD)*	**Positive(+)**		Negative
Leukocytes(CP) (Urine)	Negative		Negative

MICROSCOPIC EXAMINATION (URINE COMPLETE)

Investigation	Observed Value	Unit	Biological Reference Interval
Pus Cells (Urine)	**0-1**	/hpf	NIL
Epithelial Cells (Urine)	**0-1**	/hpf	NIL
RBCs (Urine)	NIL	/HPF	NIL
Others (Urine)	NIL		

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

Investigation	Observed Value	Unit	Biological Reference Interval
Casts (Urine)	NIL	/hpf	NIL
Crystals (Urine)	NIL	/hpf	NIL
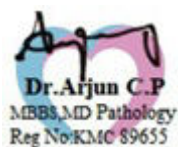
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Investigation	Observed Value	Unit	Biological Reference Interval

IMMUNOHAEMATOLOGY

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

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Investigation	Observed Value	Unit	Biological Reference Interval
BIOCHEMISTRY			
BUN / Creatinine Ratio	10.2		6.0 - 22.0
Glucose Fasting (FBS) (Plasma - F/*GOD-PAP)*	**114.04**	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
Glucose Postprandial (PPBS) (Plasma - PP/*GOD-PAP)*	**206.22**	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
Blood Urea Nitrogen (BUN) (Serum/*Urease UV / derived)*	7.5	mg/dL	7.0 - 21
Creatinine (Serum/*Modified Jaffe)*	**0.73**	mg/dL	0.9 - 1.3

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)*	4.11	mg/dL	3.5 - 7.2

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Investigation	Observed Value	Unit	Biological Reference Interval
IMMUNOASSAY			
Prostate specific antigen - Total(PSA) (Serum/*Manometric method*)	0.956	ng/ml	Normal: 0.0 - 4.0 Inflammatory & Non Malignant conditions of Prostate & genitourinary system: 4.01 - 10.0 Suspicious of Malignant disease of Prostate: > 10.0

INTERPRETATION: Analytical sensitivity: 0.008 - 100 ng/mL

PSA is a tumor marker for screening of prostate cancer. Increased levels of PSA are associated with prostate cancer and benign conditions like bacterial infection, inflammation of prostate gland and benign hypertrophy of prostate/ benign prostatic hyperplasia (BPH).

Transient elevation of PSA levels are seen following digital rectal examination, rigorous physical activity like bicycle riding, ejaculation within 24 hours.

PSA levels tend to increase in all men as they age.

Clinical Utility of PSA:

ðIn the early detection of Prostate cancer.

ðAs an aid in discriminating between Prostate cancer and Benign Prostatic disease.

ðTo detect cancer recurrence or disease progression.

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-- End of Report --