

## DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mrs. RESHMA HEGDE	Order No	: 1000097480
UHID	: UHJ A24006014	Registered On	: 28/09/2024 08:13:11 AM
Age/Sex	: 40/Years Female	Collected On	: 28/09/2024 08:28:09 AM
Ward / Bed No	:	Reported On	: 28/09/2024 12:32:45 PM
Reference	: Dr. Ashmitha Padma	Bill No	: OPBJ A240008289
Station	: At Hospital	Mobile No	: 9740131310
Payer Name	: Mediwheel	Report Status	: Final Report

Test Name	Result	Unit	Bio. Ref. Interval
<b><u>BIOCHEMISTRY</u></b>			
<b>FASTING GLUCOSE</b> (Method: Hexokinase)	93	mg/dL	ADA Guidelines < 100 mg/dl - Normal 100 to 125 mg/dl - Prediabetes ≥ 126 mg/dl - Diabetes
<b>POST PRANDIAL GLUCOSE</b> (Method: Hexokinase) Remarks: Correlate with meal status. Kindly correlate clinically.	68	mg/dL	70-140
<b>GLYCOSYLATED HAEMOGLOBIN (HBA1C)</b>			Sample: Whole blood (EDTA)
<b>HBA1C</b> (Method: HPLC)	5.1	%	ADA Guidelines < 5.7% - Normal 5.7 to 6.4% - Prediabetes ≥ 6.5% - Diabetes
Estimated Average Glucose (eAG) (Method: Calculated)	100	mg/dL	
<b>THYROID PROFILE (TOTAL T3, TOTAL T4 &amp; TSH)</b>			Sample: Serum
<b>TOTAL T3</b> (Method: CLIA)	1.01	ng/mL	0.87-1.78
<b>TOTAL T4</b> (Method: CLIA)	10.52	ng/dL	5.1-14.1
<b>THYROID STIMULATING HORMONE (TSH)</b> (Method: CLIA: Ultra-sensitive)	1.88	μIU/mL	0.34 - 5.60 μIU/mL (Non Pregnant) 0.3 - 4.5 μIU/mL (I trimester) 0.5 - 5.2 μIU/mL (II & III trimester)
<b>LIPID PROFILE</b>			Sample: Serum
<b>TOTAL CHOLESTEROL</b> (Method: CHOD-POD)	155	mg/dL	ATP III Guidelines < 200 - Desirable 200-239 - Borderline high ≥ 240 - High
<b>TRIGLYCERIDES</b> (Method: Enzymatic GPO-POD)	143	mg/dL	< 150 - Normal 150-199 - Borderline High 200-499 - High ≥ 500 - Very High
<b>HDL CHOLESTEROL</b> (Method: ENZYMATIC METHOD)	44.1	mg/dL	< 40 - Low ≥ 60 - High

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LDL CHOLESTEROL (Method: Calculated)	82.30	mg/dL	<100 - Optimal 100-129 - Near or above optimal 130-159 - Borderline high 160-189 - High ≥190 - Very high
VLDL CHOLESTEROL (Method: Calculated)	28.60	mg/dL	< 30
TOTAL CHOLESTEROL : HDL RATIO (Method: Calculated)	3.51		Low Risk: 3.3 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0
LDL/HDL CHOLESTEROL RATIO (Method: Calculated)	1.87		< 2.5 Optimal
NON HDL CHOLESTEROL (Method: Calculated)	110.90	mg/dL	< 130
<b>URIC ACID</b> (Method:Uricase - POD(Enzymatic))	6.6	mg/dL	2.6-6.0
<b>LIVER FUNCTION TEST</b>			Sample: Serum
TOTAL BILIRUBIN (Method:Dichlorophenyl Diazotization)	1.36	mg/dL	0.3-1.2
DIRECT BILIRUBIN (Method:Dichlorophenyl Diazotization)	0.28	mg/dL	0.0-0.2
INDIRECT BILIRUBIN (Method: Calculated)	1.08	mg/dL	0.2-1.0
TOTAL PROTEIN (Method:BIURET)	6.8	g/dL	6.6-8.3
ALBUMIN (Method:BCG)	3.59	g/dL	3.5-5.2
GLOBULIN (Method: Calculated)	3.21	g/dL	2.3-3.5
AG RATIO (Method: Calculated)	1.12		2:1
SERUM SGOT (Method:IFCC without P5P)	28	U/L	< 35

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SERUM SGPT (Method:IFCC without P5P)	28	U/L	< 35	
ALKALINE PHOSPHATASE, SERUM (Method:PNPP AMP Buffer)	56	U/L	46-122	
GGT (Method:IFCC)	16	U/L	< 38	
<b>UREA</b> (Method:Urease GLDH - Kinetic)	12.8	mg/dL	17-43	
<b>BUN/CREATININE RATIO</b>				Sample: Serum
BLOOD UREA NITROGEN(BUN) (Method:Urease GLDH - Kinetic)	6	mg/dL	7.93-20.07	
CREATININE (Method:Modified Jaffe, Kinetic)	0.64	mg/dL	0.6-1.1	
BUN/CRE-RATIO (Method: Calculated)	9.37		12~20 : 1	



**Dr. Varsha Shree R**  
M.D(Pathology)  
CONSULTANT PATHOLOGIST  
KMC No : 103567

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**HAEMATOLOGY**
**COMPLETE BLOOD COUNT(CBC)**

Sample: Whole blood (EDTA)

<b>HAEMOGLOBIN</b> (Method:Photometric Measurement: Oxyhemoglobin method)	13.31	g/dL	12-16
<b>PACKED CELL VOLUME/HEMATOCRIT (PCV/HCT)</b> (Method: Calculated)	40.4	%	37-47
<b>TOTAL WBC COUNT (TLC)</b> (Method:Coulter Principle)	7710	Cells/Cum	4000-11000
<b>DIFFERENTIAL COUNT</b>			
<b>NEUTROPHILS</b> (Method:Optical/Impedance)	64.26	%	40-75
<b>LYMPHOCYTES</b> (Method:Optical/Impedance)	27.20	%	20-45
<b>EOSINOPHILS</b> (Method:Optical/Impedance)	1.81	%	0-6
<b>MONOCYTES</b> (Method:Optical/Impedance)	6.38	%	2-10
<b>BASOPHILS</b> (Method:Optical/Impedance)	0.35	%	0-2
<b>RED BLOOD CORPUSCLES(RBC)</b> (Method:Coulter Principle)	4.63	million/cum	4.0-5.2
<b>MCV</b> (Method:Derived from RBC Histogram)	87.2	fL	78-100
<b>MCH</b> (Method: Calculated)	28.7	pg	27-31
<b>MCHC</b> (Method: Calculated)	32.9	g/dL	31-37
<b>RDW - CV</b> (Method: Calculated)	13.5	%	11.5-14.5
<b>PLATELET COUNT</b> (Method:Electrical Impedance)	2.39	Lakhs/Cum	1.5-4.5

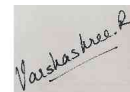
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MEAN PLATELET VOLUME(MPV) (Method:Derived from PLT Histogram)	6.78	fl	9-13
PLATELET DISTRIBUTION WIDTH (PDW) (Method: Calculated)	17.4	fl	9-19
<b>ERYTHROCYTE SEDIMENTATION RATE(ESR)</b> (Method:Modified Westergren Method)	25	mm/hour	1-20
<b>BLOOD GROUPING &amp; RH TYPING</b>			Sample: Whole blood (EDTA)
ABO Group (Method:Agglutination Method)	O		
Rh Factor (Method:Agglutination Method)	Positive		

Interpretation Notes

Note: Both forward and reverse grouping performed



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Test Name	Result	Unit	Bio. Ref. Interval
<b><u>CLINICAL PATHOLOGY</u></b>			
URINE EXAMINATION, ROUTINE			Sample: Urine
PHYSICAL EXAMINATION			
VOLUME	20	mL	
COLOUR	Pale Yellow		
APPEARANCE	Clear		
PH	6.0		5.0-8.0
SPECIFIC GRAVITY	1.005		1.005-1.030
CHEMICAL EXAMINATION			
PROTEIN (Method:Protein Error of pH Indicator)	Absent		Absent
GLUCOSE (Method:GOD-POD)	Absent		Absent
KETONE BODIES (Method:Nitroprusside method/ Rothera's test)	Absent		Absent
BILIRUBIN (Method:DIAZO/FOUCHET'S TEST)	Negative		Negative
BILE SALT (Method:Hay's sulfur test)	Absent		Absent
NITRITE (Method:Griess method)	Negative		Negative
UROBILINOGEN (Method:Azo coupling method)	Normal		
LEUKOCYTE ESTERASE (Method:Leukocyte Esterase activity)	Negative		Negative
BLOOD (Method:Peroxidase Reaction)	Negative		Negative
MICROSCOPIC EXAMINATION			

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EPITHELIAL CELLS	2-4	/HPF	0-5
PUS CELLS	0-2	/HPF	0-5
RBCs	Nil	/HPF	0-2
CASTS	Nil	/LPF	
CRYSTALS	Nil		
OTHERS	Nil		
<b>URINE SUGAR, FASTING</b> (Method:GOD-POD)	Absent		
<b>URINE SUGAR (POST PRANDIAL)</b>	Absent		

Verified By  
Arpitha S R

---End of Report---



**Dr. Varsha Shree R**  
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CONSULTANT PATHOLOGIST  
KMC No : 103567



### Out Patient Record

NABH No.1  
Patient Name : Mrs.RESHMA HEGDE

UHID : UHJA24006014

Age / Sex : 40 Years / Female

OP NO/Reg Dt : 28-09-2024 08:13 AM

Spouse / Father Name : RAVI KEGDE

Department :

Address : FLAT NO 227, CB/K DS MAX SARERA  
UTTARAHALLI, , Bengaluru Urban,

Referred By :

Consultant : Dr.Ashmitha Padma MBBS, MD  
(GENERAL MEDICINE), PGDCC,FEM  
KMC No. : 02M1087

#### Complaints / Findings / Observations :

Ht: 167cm  
Wt: 74kg  
BP: 120/80 mmHg  
S/G: 96+  
PP: 80bpm

#### Investigations:

#### Treatment / Care of Plan / Provisional Diagnosis :

MT

#### Follow Up Advice :

(4) BF  
Tab. Somp 340mg  
1 0 1  
↓

Signature of the Doctor





NABH



No.1



Care Par Excellence  
Jayanagar, Bangalore

DEPARTMENT OF RADIODIAGNOSIS

Name	Reshma Hegde	Date	28/09/24
Age	40 years	Hospital ID	UHJA24006014
Sex	Female	Ref.	Health check

ULTRASOUND ABDOMEN AND PELVIS

FINDINGS:

**Liver is enlarged in size ( --- cms) and shows mild increased echopattern.** 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** - Visualized part of the pancreatic head and body appears normal in size, contour and echogenicity. Rest of the pancreas is obscured by bowel gas.

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

**Right Kidney** is normal in size (10.2 x 3.6 cms), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

**Left Kidney** is normal in size (9.9 x 3.9 cms), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

**Retroperitoneum-** Visualized aorta appeared normal. No obvious enlarged para-aortic nodes.

**Urinary Bladder** is distended, normal in contour and wall thickness. No evidence of calculi.

**Uterus** is anteverted and normal in size, measures 9.7 x 3.3 x 5.3 cms. Myometrial and endometrial echoes are normal. Endometrium measures 8.9 mm.

**Right ovary** is normal in size and echopattern, measures 5.5 cc.

**Left ovary** is normal in size and echopattern, measures 8.4 cc.

**Both adnexa:** Normal. No mass is seen.

There is no ascites or pleural effusion. Appendix could not be localized. No RIF probe tenderness.

IMPRESSION:

- Mild hepatomegaly with mild fatty infiltration (Grade I).
- No other definite sonological abnormality detected.

Dr. Dhruv Kumar  
Consultant Radiologist



NABH



No.1

Care Par Excellence  
Jayanagar, Bangalore

PATIENT NAME :	Mrs. RESHMA HEGDE	DATE :	28/09/24
AGE :	40 YEARS GENDER : FEMALE	PATIENT ID :	24008289
REF BY :	CMO	OP/ IP :	HEALTH CHECK

**2D- ECHOCARDIOGRAPHY  
M - MODE AND DOPPLER MEASUREMENTS**

(cm)	(cm)	(cm/sec)		
AO : 2.6 (2.5-3.7)	LVIDD : 4.4 (3.5-5.5)	MV EV: 0.8	AV: 0.7	MR : NORMAL
LA : 3.2 (1.9-4.0)	LVIDS : 2.7 (2.4-4.2)	AV : 1.1		AR : NORMAL
RA : 2.1 (<4.4)	IVSD : 1.1 (0.6-1.1)	PV : 0.6		PR : NORMAL
RV : 1.9 (<3.5)	IVSS : 1.0 (0.9-1.2)	TV EV : ----	AV : ----	TR : TRIVIAL TR, PASP-28mmHg
TAPSE : 1.8 (>1.6)	LVPWD : 1.2 (0.6-1.1)	Diastolic Function : NO LVDD		
	LVPWS : 0.9 (0.9-1.2)			
	EF : 60%			

**DESCRIPTIVE FINDINGS**

Left Ventricle	: NORMAL
Right Ventricle	: NORMAL
Left Atrium	: NORMAL
Right Atrium	: NORMAL
Wall motion analysis	: NO RWMA
Mitral Valve	: NORMAL
Aortic Valve	: NORMAL
Tricuspid Valve	: NORMAL
Pulmonary Valve	: NORMAL
IAS	: INTACT
IVS	: INTACT
Pericardium	: NORMAL
Other Findings	: IVC NORMAL AND COLLAPSING

**IMPRESSION:**

NORMAL CHAMBER DIMENSIONS  
 NORMAL LV SYSTOLIC FUNCTION EF : 60%  
 NORMAL LV DIASTOLIC FUNCTION  
 NO PULMONARY ARTERY HYPERTENSION  
 NO REGIONAL WALL MOTION ABNORMALITIES  
 NO CLOTS/ PERICARDIAL EFFUSION /VEGETATION

**DR. RAHUL S PATIL**  
CONSULTANT CARDIOLOGIST



NABH



No.1



**DEPARTMENT OF RADIODIAGNOSIS**

<b>Name</b>	Reshma Hegde	<b>Date</b>	28/09/24
<b>Age</b>	40 years	<b>Hospital ID</b>	UHJA24006014
<b>Sex</b>	Female	<b>Ref.</b>	Health check

**RADIOGRAPH OF THE CHEST (PA – VIEW)**

**FINDINGS:**

Bilateral lung fields are normal.

Bilateral costo-phrenic angles are normal.

Cardia and mediastinal contours are normal.

The bony thorax is grossly normal.

**IMPRESSION:**

- No radiographic abnormality.

**Dr. Elluru Santosh Kumar**  
Consultant Radiologist

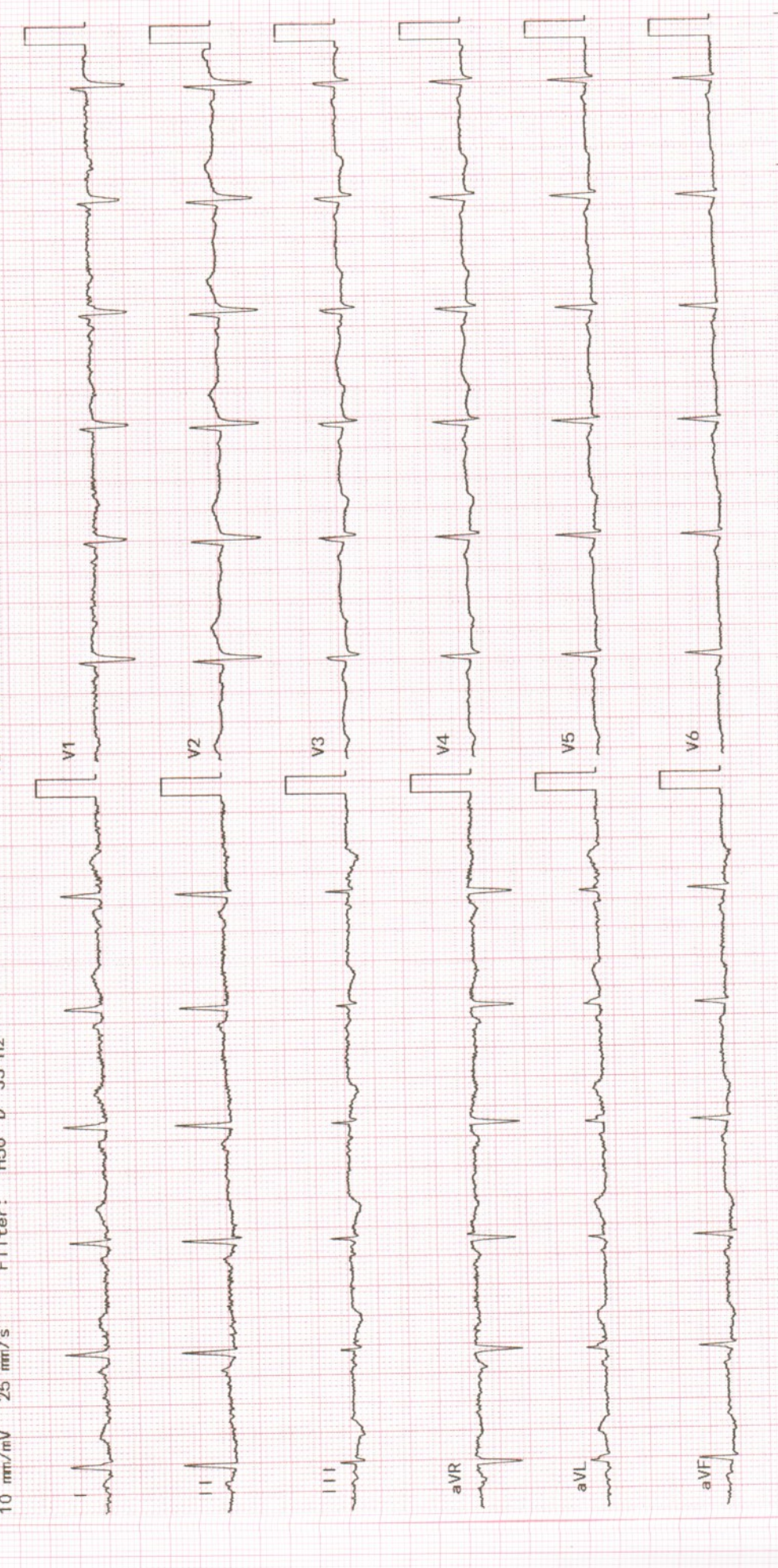
ID: 24006014  
 Name: MRS RESHMA  
 Birth date: /  
 ex: F cm kg mmHg  
 40 years

1100 Sinus rhythmic  
 4068 Nonspecific Twave abnormality [flat T or negative T (II, aVF, V4, V5, V6)]

0102 ARTIFACT PRESENT  
 9130 \*\* borderline ECG \*\*

Unconfirmed Report  
 Reviewed by:

10 mm/mV 25 mm/s Filter: H50 D 35 Hz 10 mm/mV  
 10 mm/mV 25 mm/s Filter: H50 D 35 Hz





NABH

No.1

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OTHERS	Nil		
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<b>URINE SUGAR (POST PRANDIAL)</b>	Absent		

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