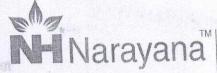
OP CASESHEET



Langford Road

Medical Centre

Unit of Narayana Health

: 40020000000273 Patient MRN

: Mr Rakesh Kumar Jain Patient Name

: Male , 44y 6m Sex/Age

Bengaluru, Bangalore Urban, Address

Karnataka, India, 560025

: OP-001 Visit Number

: OP, New Visit Consultation Type

: 8725800379 Mobile Number

Date

: 27/04/2023 12:45 PM

: GENERAL MEDICINE Department : Dr. Swetha Rajkumar Consultant

Ref. Hospital Ref. Doctor

: ARCOFEMI HEALTHCARE LIMITED Sponsor Name

VITALS

BP (mmHg)

Height (cm)

piratory Rate(brpm) :

Heart Rate(bpm) Weight (kg)

Fall Score

Pain Score

CHIEF COMPLAINTS AND HPI

Spor 93% 95

GENERAL EXAMINATION

Allergies

: Known/Unknown

Body Habitus:

: Cachectic/ Thin Built/ Average Built/ Obese/ Normal

Pertinent Family History

Psychological Assessment:

: Negative/ Unknown

: Normal/Any Psychological Problem

SYSTEMIC EXAMINATION

for MHC

NUTRITIONAL ASSESSMENT

Adr

INVESTIGATIONS

Cardiology Consultation

TREATMENT SUGGESTED

REVIEW ON

NARAYANA CLINIC

(A Unit Of NH Integrated Care Private Limited) Civil Station, 9, Hosur Road BANGALORE - 560 025

Generated By

: Gundiga Kiran(353556)

Generated On

: 27/04/2023 08:40 AM

One free consultation with the same doctor within next 6 days



Narayana Medical Center (A Unit of Narayana Hrudayalaya Limited

(Previously Narayana Hrudayala Pvt, Ltd.,) CIN: L85110KA2000PLCO27497

Patient Name	Mr. RAKESH KUMAR JAIN	Reg No	40020000000273
Age	44 YRS	Sex	Male
Ref by	ef by PKG	JOX	iviale
itter by	PNG	Date	27/04/23

ULTRASOUND ABDOMEN AND PELVIS

FINDINGS:

Liver is normal in size and normal 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 Shows a calculus measuring 0.5 cm, no wall thickening seen at the time of scan.

Pancreas Persistently obscured by gaseous bowel.

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

Kidneys Both Kidneys are normal in size , shape , and position. RK- $10.6\,\times\,1.4\,$ cm ,LK - $10.8\,\times\,1.5\,$ cm . Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis at the time of scan.

Urinary Bladder is distended. Wall thickness is normal. No evidence of calculi.

Prostate is normal in size, (Volume = 14 cc).

NOTE: There is a defect in the umbilical region measuring 1.5 cm with heriniation of omental fat and is reducible on cough impulse.

BOWEL GASSES SEEN.

IMPRESSION:

- · Cholelithiasis.
- · Umbilical hernia.

NARAYANA CLINIC

(A Unit Of NH Integrated Care Private Limited)
Civil Station, 9, Hosur Road
BANGALORE - 560 025

Dr. Naveed Ansar Consultant Radiologist

Note: Investigations have their limitations. Solitary pathological/Radiological and other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly. This Report is not for Medico - Legal Purposes.

COLOUR DOPPLER ECHOCARDIOGRAPHY

Patient Name	Mr RAKESH KUMAR JAIN	Reg No	40020000000273
Age	44 YRS	Sex	MALE
Ref by	PKG	Date	27/04/23

2D / M MODE MEASUREMENTS

AO : 26 mm

LVID(d): 47 mm

IVS(d): 10 mm

LA : 31 mm

LVID (s) : 30 mm

PW(d): 10 mm

EF : 60%

VALVES

MITRAL VALVE

: Normal

AORTIC VALVE

: Normal

TRICUSPID VALVE

: Normal

PULMONARY VALVE

: Normal

CHAMBERS

LEFT ATRIUM

: Normal

RIGHT ATRIUM

: Normal sized

LEFT VENTRICLE

: Normal , Normal LV systolic function

RIGHT VENTRICLE

: Normal sized , TAPSE - 21 mm , Normal RV Function

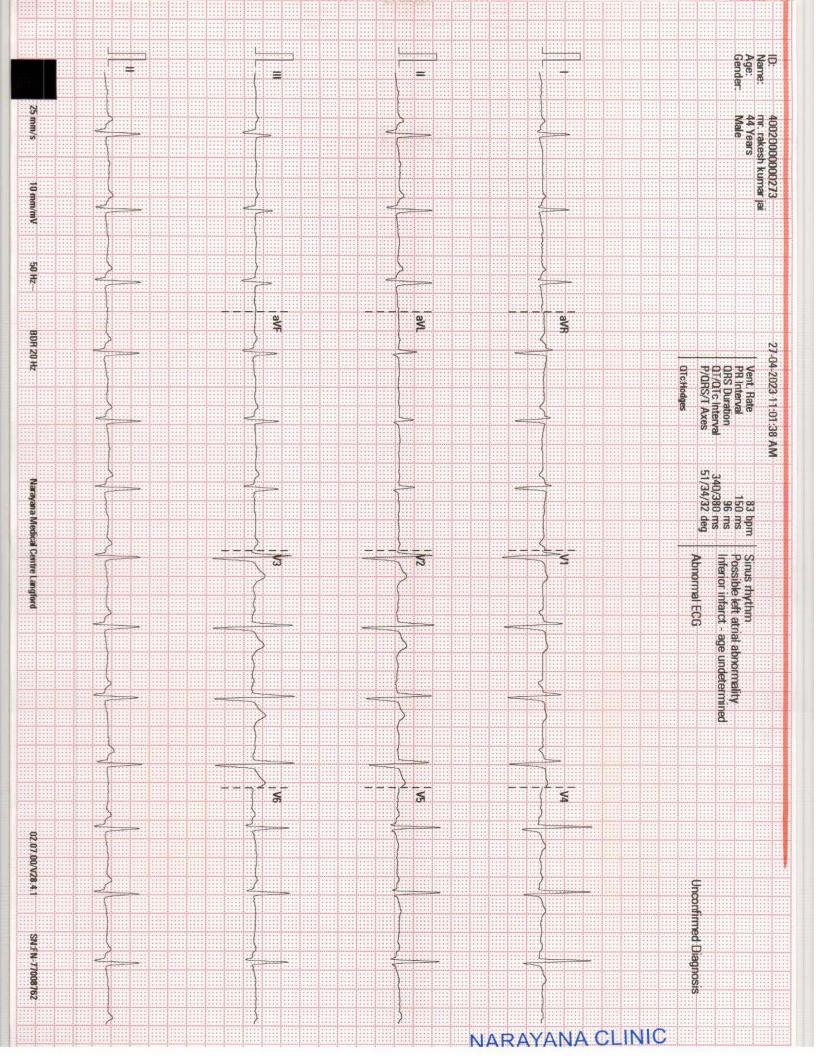
SEPTAE

IVS

: Intact

IAS

: Intact



DEPARTMENT OF LABORATORY MEDICINE

Patient Name: Mr Rakesh Kumar Jain MRN: 40020000000273 Gender/Age: MALE, 44y (04/10/1978)

Collected On: 27/04/2023 09:11 AM Received On: 27/04/2023 09:11 AM Reported On: 27/04/2023 12:43 PM

Barcode: N12304270001 Specimen: Plasma Consultant: Dr. Swetha Rajkumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8725800379

BIOCHEMISTRY

			In-ference Interval
	Result	Unit	Biological Reference Interval
Test Fasting Blood Sugar (FBS) (Colorimetric - Glucose		mg/dL	ADA standards 2020 >126 : Diabetes 70 to 99 : Normal 100 to 125 : Pre-diabetes
Oxidase Peroxidase) Post Prandial Blood Sugar (PPBS) (Colorimetric Glucose Oxidase Peroxidase)	137		ADA standards 2020 >200 : Diabetes 70 to 139 : Normal 140 to 199 : Pre-diabetes
		(Depart	

-- End of Report-

Dr. Vasumathi Kishore

MBBS, DCP CONSULTANT PATHOLOGIST

Note

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



NARAYANA CLINIC

THYROID PROFILE (T3, T4, TSH)

Patient Name: Mr Rakesh Kumar Jain MRN: 40020000000273 Gender/Age: MALE, 44y (04/10/1978)

Collected On: 27/04/2023 09:11 AM Received On: 27/04/2023 09:11 AM Reported On: 27/04/2023 12:44 PM

Barcode: N12304270002 Specimen: Serum Consultant: Dr. Swetha Rajkumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8725800379

	ВІОСН	EMISTRY	
Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			The state of the s
Serum Creatinine	1.51 H	mg/dL	0.7-1.3
eGFR (Calculated)	50.5	mL/min/1.73m ²	Inductive of Renal Impairment:<60 Note:eGFR is inaccurate for Hemodynamically unstable patients. eGFR is not applicable for less than 18 years of age.
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric – Urease)	7.2 L	mg/dL	9.0-20.0
Serum Uric Acid (Colorimetric - Uricase, Peroxidase)	6.2	mg/dL	3.5-8.5
LIPID PROFILE (CHOL, TRIG, HDL, LDL, VLDL)			
Cholesterol Total	187 L	mg/dL	Both: Desirable: < 200 Both: Borderline High: 200-239 Both: High: > 240
Triglycerides (LPL/GK)	179 H		0.0-150.0
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	45	mg/dL	40.0-60.0
Non-HDL Cholesterol	142		
LDL Cholesterol (Colorimetric)	106.2 L	mg/dL	Both: Optimal: < 100 Both: Near to above optimal: 100-129 Both: Borderline High: 130-159 Both: High: 160-189 Both: Very High: > 190
VLDL Cholesterol (Calculated)	35.8	mg/dL	<40.0
Cholesterol /HDL Ratio (Calculated)	4.2		0.0-5.0

Harmalli.

Dr. Vasumathi Kishore MBBS, DCP CONSULTANT PATHOLOGIST

Note

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



Collected On: 27/04/2023 09:11 AM Received On: 27/04/2023 09:11 AM Reported On: 27/04/2023 10:47 AM

Barcode: N22304270002 Specimen: Whole Blood Consultant: Dr. Swetha Rajkumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8725800379

HA	FAA	AT	m	0	CV
8 1273	FIAI	MI	UI.	N.	UN

	HALIVI	ATOLOGY	
Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			and the control of th
Haemoglobin (Hb%) (Photometric Measurement	15.15	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	4.78	Million/ul	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	42.2	%	40.0-50.0
MCV (Mean Corpuscular Volume) (Derived)	88.2	fL	80.0-100.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	31.7	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	35.9 H	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	14.8 H	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	283.9	Thous/μL	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	10.51 H	Thous/μL	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCS Technology Plus Microscopy)	45.67	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	41.63 H	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	8.11	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	4.29	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.31	%	0.0-2.0

Collected On: 27/04/2023 09:11 AM Received On: 27/04/2023 09:11 AM Reported On: 27/04/2023 10:48 AM

Barcode: N82304270001 Specimen: Urine Consultant: Dr. Swetha Rajkumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8725800379

	CLINICAL PA	THOLOGY	
Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Volume	40.00	ml	
Colour	Pale Yellow		
Appearance	Clear		
CHEMICAL EXAMINATION			
pH(Reaction)	6.5		4.8-7.5
Sp. Gravity	1.030		1.002 - 1.03
Protein	Nil		
Urine Glucose	Nil		
Ketone Bodies	Nil		
Bile Salts	Nil		
Bile Pigment (Bilirubin)	Nil	-	
Urobilinogen	Normal		
MICROSCOPIC EXAMINATION			
Pus Cells	4-5/hpf		
RBC	Nil		
Epithelial Cells	1-2/hpf		

DEPARTMENT OF LABORATORY MEDICINE

Patient Name: Mr Rakesh Kumar Jain MRN: 40020000000273 Gender/Age: MALE, 44y (04/10/1978)

Collected On: 27/04/2023 09:11 AM Received On: 27/04/2023 09:11 AM Reported On: 27/04/2023 10:30 AM

Barcode: N22304270001 Specimen: Whole Blood - ESR Consultant: Dr. Swetha Rajkumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8725800379

HAEMATOLOGY

Biological Reference Interval Unit Result Test 0.0-10.0 mm/1hr Erythrocyte Sedimentation Rate (ESR)

(Westergren Method)

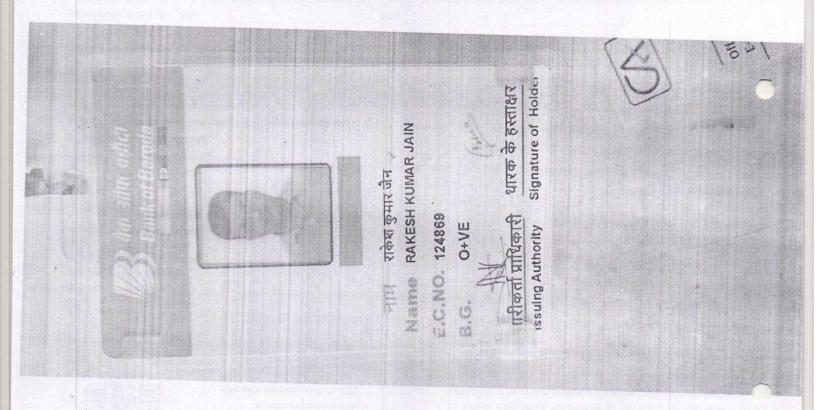
-- End of Report-

Dr. Vasumathi Kishore MBBS, DCP CONSULTANT PATHOLOGIST

Note

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





NARAYANA CLINIC

Crystals

Nil

Casts

Nil

Bacteria

Nil

--End of Report-

Danmalli

Dr. Vasumathi Kishore MBBS, DCP

CONSULTANT PATHOLOGIST

Note

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



NARRAYANA CLINIC

NARRAYANA Cere Private Limited)

(A unit Of NH Integrated Cere Private Limited)

(A unit Of NH Integrated Cere Private Limited)

(A unit Of NH Integrated Cere Private Limited)

Patient Name : Mr Rakesh Kumar Jain	MRN: 40020000000273	Gender/Age: MALE	, 44y (04/10/19/8)
Absolute Neutrophil Count	4.8 L		1800.0-8000.0
Absolute Lympocyte Count	4.38 L		990.0-3150.0
Absolute Monocyte Count	0.86		
Absolute Eosinophil Count	0.46		
Absolute Basophil Count	0.04		

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

BLOOD GROUP & RH TYPING

Blood Group "O"

RH Typing Positive -

-- End of Report-

Dr. Vasumathi Kishore MBBS, DCP

CONSULTANT PATHOLOGIST

Note

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



DEPARTMENT OF LABORATORY MEDICINE

Patient Name: Mr Rakesh Kumar Jain MRN: 40020000000273 Gender/Age: MALE, 44y (04/10/1978)

Collected On: 27/04/2023 09:11 AM Received On: 27/04/2023 09:11 AM Reported On: 27/04/2023 10:06 AM

Barcode: N12304270003 Specimen: Whole Blood Consultant: Dr. Swetha Rajkumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8725800379

	BIOCHEMISTRY		lutomial .
Test	Result	Unit	Biological Reference Interval
HBA1C HbA1c	6.3	%	Normal: 4.0-5.6 Prediabetes:5.7-6.4 Diabetes:>6.5 (ADA Recommendation 2017)
Estimated Average Glucose	134.11	%	

- 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
- 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-

Dr. Vasumathi Kishore MBBS, DCP CONSULTANT PATHOLOGIST

Note

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



Patient Name: Mr Rakesh Kumar Jain MRN: 40020000000273 Gender/Age: MALE, 44y (04/10/1978) 0.97-1.69 ng/mL 1.02 Tri Iodo Thyronine (T3)

Thyroid hormone binding protein can profoundly affect total T3 and total T4 levels especially in pregnancy and in patients on steroid

Unbound fractions of T3 and T4(FT3, FT4) of thyroid hormones are biologically active forms and correlate more closely with clinical status of the patient.

status of the patients	6.34	ug/dl	5.53-11.0
Thyroxine (T4)		μIU/mL	0.4-4.049
TSH (Thyroid Stimulating Hormone)	4.26 H	μιο/πιε	

TSH levels are subject to circadian variation, reaching peak levels between 2-4 a.m. and minimum between 6-10 p.m. The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentration.

0.9	mg/dL	0.2-1.3
	mg/dL	0.0-0.4
0.1		
0.8		
7.8	gm/dL	6.3-8.2
4.6	gm/dL	3.5-5.0
	gm/dL	2.0-3.5
1 44		1.0-2.1
	U/L	17.0-59.0
24		
- 31	U/L	<50.0
	U/L	38.0-126.0
74		
nt 29	U/L	15.0-73.0
		0.1 mg/dL 0.8 - 7.8 gm/dL 4.6 gm/dL 3.2 gm/dL 1.44 - 24 U/L 74 U/L

-- End of Report-

NARRAYA VA CLINIC
A UNI OI NA TRINGON OCINI STATION 9, Hosur Road
GIVII STATION 9, Hosur Road
BANGALORE - 560 025

DEPARTMENT OF LABORATORY MEDICINE

Patient Name: Mr Rakesh Kumar Jain MRN: 40020000000273 Gender/Age: MALE, 44y (04/10/1978)

Collected On: 27/04/2023 09:11 AM Received On: 27/04/2023 01:02 PM Reported On: 27/04/2023 02:03 PM

Barcode: N12304270004 Specimen: Serum Consultant: Dr. Swetha Rajkumar(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8725800379

BIOCHEMISTRY

Biological Reference Interval Unit Result Test 0.0-2.5 ng/mL 0.187 Prostate Specific Antigen (PSA) (Enhanced

Chemiluminesence)

PSA is a recommended test for detection of prostate cancer along with Digital Rectal Examination (DRE) in males above 50 years of

PSA levels are increased in Prostate cancer, Benign Prostatic Hyperplasia, Prostitits, Genitourinary infections. False negative/positive results are observed in patients receiving mouse monoclonal antibodies for diagnosis or therapy.

All values should be correlated with clinical findings and results of other investigations.

Note: Patient results determined by assay using different manufacturers or methods may not be comparable.

-- End of Report-

Mrs. Latha B S MSc, Mphil, Biochemistry Incharge, Consultant Biochemistry Dr. Anushre Prasad MBBS, MD, Biochemistry Consultant Biochemistry

Note

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

(Prostate Specific Antigen (Psa) -> Auto Authorized) Of NH Integrated Care Private Limited)





GREAT ARTERIES

AORTA

: Normal sized, Normal arch

PULMONARY ARTERY: Normal

DOPPLER DATA

MITRAL VALVE

: E: 0.6 m/s, A: 0.9 m/s, Mild LVDD, MR - Mild

AORTIC VALVE

: Pgr - 7 mmHg, AR - Trivial

TRICUSPID VALVE

: TR-Trivial, PASP-23 mmHg

PULMONARY VALVE : Pgr - 5 mmHg

WALL MOTION ABNORMALITIES : NO RWMA

PERICARDIUM

: Nil

VEGETATION/THROMBUS: Nil

OTHER FINDINGS:

HR: 93 bpm (Sinus Rhythm)

IVC: 14 mm, Normal Sized, Collapsing, Normal RA pressure

FINAL DIAGNOSIS

NORMAL CHAMBER DIMENSIONS NORMAL VALVES MR - MILD NORMAL PA PRESSURE NO RWMA NORMAL RV AND LV FUNCTION LVEF- 60%

Done by: SHABRIN TAJ
CARDIAC SONOGRAPHER

Signature

NAMANANNA CLINIC

LUME OF the Integrated Care Private Limited)

Civil Station, 9, Hosur Road

BANGALORE - 560 025

Patient Name	MR.RAKESH KUMAR JAIN	Requested By	PKG
MRN	40020000000273	Procedure DateTime	27-04-2023 11:17
Age/Sex	44Y/Male	Hospital	NH-LANGFORD

CHEST RADIOGRAPH (PA VIEW)

CLINICAL DETAILS: For executive health checkup.

FINDINGS:

- The lung fields and bronchovascular markings appear normal.
- The cardiac size is within normal limits.
- Mediastinum and great vessels are within normal limits.
- Trachea is normal and is central. The hilar shadows are unremarkable.
- The costo-phrenic angles are clear. No evidence of pleural effusion or pneumothorax.
- The visualized bones and soft tissue structures appear normal.
- Both the diaphragmatic domes appear normal.

IMPRESSION:

No significant abnormality detected.

Th

Dr. Tanuj Gupta MBBS, DMRD, DNB Lead and Senior Consultant Radiologist

* This is a digitally signed valid document. Reported Date/Time: 27-04-2023 11:47

NARAYANA CLINIC