

Mahesh

Mob:8618385220

9901569756



## SRI PARVATHI OPTICS

Multi Branded Optical Store

### Computerized Eye Testing & Spectacles Clinic

# 333.Bth Main 5th Cross Near Cambridge & Miranda School HAL 3rd Stage

Behind Vishveshvariah Park New Thippasandra, Bangalore - 560075,

Email: parvathiopticals@gmail.com

### SPECTACLE PRESCRIPTION

Name: *Rashmi. C.*

No. *4172*

Mobil No:

Date: *9/12/2023*

Age / Gender *54y / f.*

Ref. No. *111990338*

	RIGHT EYE				LEFT EYE			
	SPH	CYL	AXIS	VISION	SPH	CYL	AXIS	VISION
DISTANCE	<i>-2.75</i>	<i>-0.50</i>	<i>174</i>	<i>6/6</i>	<i>-1.25</i>	<i>-0.25</i>	<i>172</i>	<i>6/6</i>
NEAR	<i>+0.6</i>	<i>+1.75</i>	<i>176</i>					

PD *65MM*

Advice to use glasses for:

DISTANCE  FAR & NEAR  READING  COMPUTER PURPOSE

We Care Your Eyes

**SRI PARVATHI OPTICS**

NEW THIPPASANDRA

## CLUMAX DIAGNOSTICS

MEDALL HEALTHCARE PVT LTD

CUSTOMER CHECKLIST

Print Date : 09/12/2023 10:01 AM



MED111990338



Customer Name : MS. R ROSHNI C

Ref Dr Name : MediWheel

Customer Id : MED111990338 Visit ID : 423074527

Age : 54Y/FEMALE Phone No : 9844476144

DOB : 26 Nov 1969 Visit Date : 09/12/2023

Company Name : MediWheel

Package Name : Mediwheel Full Body Health Checkup Female Above 40

S.No	Modality	Study	AccessionNo	Time	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	THYROID PROFILE/ TFT( T3, T4, TSH)			
10	LAB	URINE GLUCOSE - FASTING			
11	LAB	URINE GLUCOSE - POSTPRANDIAL (2 Hrs)			
12	LAB	COMPLETE BLOOD COUNT WITH ESR			
13	LAB	STOOL ANALYSIS - ROUTINE			
14	LAB	URINE ROUTINE			
15	LAB	PAP SMEAR BY LBC (LIQUID BASED CYTOLOGY)			<i>not figured</i>
16	LAB	BUN/CREATININE RATIO			
17	LAB	BLOOD GROUP & RH TYPE (Forward Reverse)			
18	ECG	ECG ✓	IND14369031138		<i>dr</i>
19	OTHERS	<del>Transthoracic / 2D Echo</del>	IND143690314690		<i>dr</i>
20	OTHERS	physical examination	IND143690315279		<i>dr</i>
21	US	ULTRASOUND ABDOMEN	IND143690315292		<i>dr</i>
22	OTHERS	Gynaecologist consultation	IND143690315704		<i>dr</i>
23	MAMMOGRAPHY	MAMMOGRAPHY-BOTH BREASTS	IND143690316054		<i>dr</i>
24	OTHERS	Dental Consultation	IND143690316289		<i>dr</i>
25	OTHERS	EYE CHECKUP	IND143690317756		<i>dr</i>
26	X-RAY	X RAY CHEST	IND143690318659		
27	OTHERS	Consultation Physician	IND143690318736		

Registered By

(HARJ.O)

H<sub>r</sub> - 155  
 W<sub>t</sub> - 66.6  
 Bp - 129/84  
 pul<sub>s</sub> - 75

Pat-Name: **Roshni C-Dr Subramanya**Pat-No: **MED990338**

Case No.:


**medall**  
 experts who care

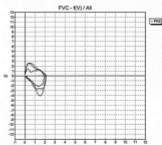
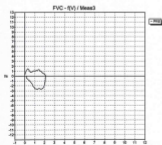
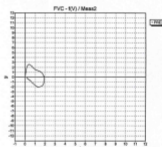
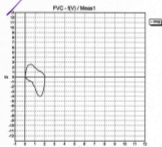
			Indian		PRE			Meas1	Meas2	Meas3
			Pred	Best	%Pred	Meas1	Meas2			
Born:	26.11.1969									
Age:	54 Y									
Sex:	Female									
Height:	155.0 cm	FVC	[ ]	2.57	2.03	79	2.03	1.93	2.13	
Weight:	66.0 kg	FEV 0.5	[ ]	0.00	1.17	-	1.17	1.07	0.62	
Ethnic:	-	FEV 1.0	[ ]	1.90	1.76	93	1.76	1.66	1.11	
		FEV 3.0	[ ]	2.03	0.00	-	0.00	0.00	0.00	
Indic:		FEV 0.5/FVC	[ % ]	0	57	-	57	55	29	
Med:		FEV 1.0/FVC	[ % ]	78	85	111	86	86	52	
Rem:		FEV 3.0/FVC	[ % ]	0	0	-	0	0	0	

## Interpretation

Restrictive

**Dr. SUBRAMANI. K.S**  
 MD, DM (Cardiology)  
 Consultant Cardiologist  
 KMC Reg. No. : 46604  
 MEDALL DIAGNOSTICS

Validated by





Pat-Name: **Roshni C-Dr Subramanya**Pat-No: **MED990338**

Case No.:

**Born:** 26.11.1969  
**Age:** 54 Y  
**Sex:** Female  
**Height:** 155.0 cm  
**Weight:** 66.0 kg  
**Ethnic:** -

**Indic:****Med:****Rem:**

		Indian Pred	PRE Best	Meas1	Meas2	Meas3	%Pred
FVC	[l]	2.57	2.03	2.03	1.93	2.13	79
FEV 0.5	[l]	0.00	1.17	1.17	1.07	0.62	-
FEV 1.0	[l]	1.90	1.76	1.76	1.66	1.11	93
FEV 3.0	[l]	2.03	0.00	0.00	0.00	0.00	-
FEV 0.5/FVC	[%]	0	57	57	55	29	-
FEV 1.0/FVC	[%]	78	86	86	86	52	111
FEV 3.0/FVC	[%]	0	0	0	0	0	-
FEF 0.2-1.2	[l/s]	0.00	2.21	2.21	1.94	1.05	-
FEF 25-75%	[l/s]	1.84	1.76	1.76	1.61	1.04	96
FEF 75-85%	[l/s]	0.00	1.04	1.04	1.03	0.83	-
PEF	[l/s]	4.89	2.63	2.63	2.61	1.51	54
MEF 75%	[l/s]	0.00	2.58	2.58	2.49	0.91	-
MEF 50%	[l/s]	2.44	1.86	1.85	1.57	1.09	76
MEF 25%	[l/s]	0.70	1.15	1.15	1.17	1.05	165
FIVC	[l]	0.00	1.85	1.85	1.74	1.96	-
FIV 1	[l]	0.00	1.89	1.89	1.42	1.75	-
FIV 1/FIVC	[%]	0	88	86	82	89	-
FIV 1/FVC	[%]	0	83	83	73	82	-
PIF	[l/s]	0.00	3.85	3.85	2.11	2.61	-
PIF 50 %	[l/s]	0.00	2.13	2.13	1.61	2.41	-

		Indian Pred	PRE Best	Meas1	Meas2	Meas3	%Pred
SVC	[l]	2.62	2.06	2.06	1.88	1.70	79
ERV	[l]	0.00	1.05	1.05	0.35	0.10	-
IRV	[l]	0.00	0.00	0.00	0.47	0.19	-
TV	[l]	0.00	0.00	0.00	1.06	1.41	-

		Indian Pred	PRE Best	Meas1	Meas2	Meas3	%Pred
MVV	[l]	66.22	0.00	0.00	0.00	0.00	-
RR	[1/min]	0.00	0.00	0.00	0.00	0.00	-
TV	[l]	0.00	0.00	0.00	0.00	0.00	-

		Indian Pred	PRE Best	Meas1	Meas2	Meas3	%Pred
MV	[l]	0.00	0.00	0.00	0.00	0.00	-
RR	[1/min]	0.00	0.00	0.00	0.00	0.00	-
TV	[l]	0.00	0.00	0.00	0.00	0.00	-

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Please produce a copy at the time of collecting the reports. Request you to provide your mobile number or customer ID for subsequent visits. Page 1/1

Female

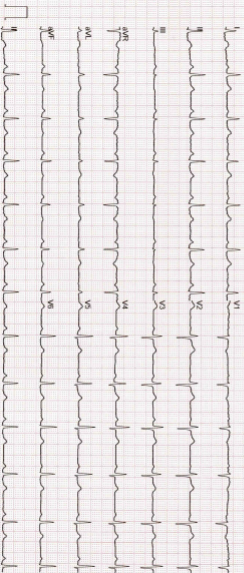
08/12/2023 13:54:49  
CLINICAL DIAGNOSTICS  
THERAPY/ANALYSIS  
MEDICAL/CRP

73 bpm  
111 mmHg

*Nural Ky*

QRS : 76 ms  
QT / QTcbaz : 380 / 418 ms  
PR : 160 ms  
P : 100 ms  
RR / PP : 816 / 821 ms  
P / QRS / T : 64 / 40 / 31 degrees

**D. SUBRAMANI, K.S**  
MD, DM (Cardiology)  
Consultant Cardiologist  
KMC Reg. No. : 46504  
MEDICAL DIAGNOSTICS



Name : Ms. R ROSHNI C

PID No. : MED111990338

SID No. : 423074527

Age / Sex : 54 Year(s) / Female

Type : OP

Ref. Dr : MediWheel

Register On : 09/12/2023 10:01 AM

Collection On : 09/12/2023 12:03 PM

Report On : 09/12/2023 7:46 PM

Printed On : 11/12/2023 10:33 AM

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b><u>Complete Blood Count With - ESR</u></b>			
Haemoglobin (EDTA Blood/Spectrophotometry)	12.4	g/dL	12.5 - 16.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood)	36.3	%	37 - 47
RBC Count (EDTA Blood)	4.01	mill/cu.mm	4.2 - 5.4
Mean Corpuscular Volume(MCV) (EDTA Blood)	90.5	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood)	30.8	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood)	34.0	g/dL	32 - 36
RDW-CV (EDTA Blood)	13.1	%	11.5 - 16.0
RDW-SD (EDTA Blood)	41.49	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood)	6300	cells/cu.mm	4000 - 11000
Neutrophils (EDTA Blood)	45.6	%	40 - 75
Lymphocytes (EDTA Blood)	42.1	%	20 - 45
Eosinophils (EDTA Blood)	2.6	%	01 - 06
Monocytes (EDTA Blood)	8.5	%	01 - 10
Basophils (Blood)	1.2	%	00 - 02

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



APPROVED BY

**Name** : Ms. R ROSHNI C  
**PID No.** : MED111990338 **Register On** : 09/12/2023 10:01 AM  
**SID No.** : 423074527 **Collection On** : 09/12/2023 12:03 PM  
**Age / Sex** : 54 Year(s)/ Female **Report On** : 09/12/2023 7:46 PM  
**Type** : OP **Printed On** : 11/12/2023 10:33 AM  
**Ref. Dr** : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Absolute Neutrophil count (EDTA Blood)	2.87	10 <sup>3</sup> / $\mu$ l	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood)	2.65	10 <sup>3</sup> / $\mu$ l	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood)	0.16	10 <sup>3</sup> / $\mu$ l	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood)	0.54	10 <sup>3</sup> / $\mu$ l	< 1.0
Absolute Basophil count (EDTA Blood)	0.08	10 <sup>3</sup> / $\mu$ l	< 0.2
Platelet Count (EDTA Blood)	361	10 <sup>3</sup> / $\mu$ l	150 - 450
MPV (EDTA Blood)	<b>7.7</b>	fL	8.0 - 13.3
PCT (EDTA Blood/Automated Blood cell Counter)	0.28	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citrated Blood)	9	mm/hr	< 30
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	77.73	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	Negative
Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP)	118.64	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.

Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	9.2	mg/dL	7.0 - 21
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APPROVED BY



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**Ref. Dr** : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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Creatinine (Serum/Modified Jaffe)	0.65	mg/dL	0.6 - 1.1
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**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-acetylcysteine , chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Enzymatic)	4.69	mg/dL	2.6 - 6.0
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**Liver Function Test**

Bilirubin(Total) (Serum/DCA with ATCS)	0.48	mg/dL	0.1 - 1.2
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Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.18	mg/dL	0.0 - 0.3
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Bilirubin(Indirect) (Serum/Derived)	0.30	mg/dL	0.1 - 1.0
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SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	22.33	U/L	5 - 40
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SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	22.37	U/L	5 - 41
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GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	<b>59.41</b>	U/L	< 38
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Alkaline Phosphatase (SAP) (Serum/Modified IFCC)	76.4	U/L	53 - 141
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Total Protein (Serum/Biuret)	6.63	gm/dl	6.0 - 8.0
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Albumin (Serum/Bromocresol green)	4.32	gm/dl	3.5 - 5.2
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Globulin (Serum/Derived)	2.31	gm/dL	2.3 - 3.6
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A : G RATIO (Serum/Derived)	1.87		1.1 - 2.2
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**Ref. Dr** : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b><u>Lipid Profile</u></b>			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	204.57	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	84.19	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.

HDL Cholesterol (Serum/Immunoinhibition)	57.80	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 50 - 59 High Risk: < 50
LDL Cholesterol (Serum/Calculated)	130	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	16.8	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	146.8	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

**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.



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**Age / Sex** : 54 Year(s) / Female **Report On** : 09/12/2023 7:46 PM  
**Type** : OP **Printed On** : 11/12/2023 10:33 AM  
**Ref. Dr** : MediWHEEL

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	3.5		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)	1.5		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	2.2		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0

**Glycosylated Haemoglobin (HbA1c)**

HbA1C (Whole Blood/HPLC)	5.6	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5
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**INTERPRETATION:** If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

Estimated Average Glucose (Whole Blood)	114.02	mg/dL
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**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 glyceimic 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.

**THYROID PROFILE / TFT**

T3 (Triiodothyronine) - Total (Serum/ECLIA)	1.02	ng/ml	0.4 - 1.81
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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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**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)	5.74	µg/dl	4.2 - 12.0
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**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)	4.45	µIU/mL	0.35 - 5.50
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**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.

**URINE ROUTINE**

**PHYSICAL EXAMINATION (URINE COMPLETE)**

Colour (Urine)	Yellow	Yellow to Amber
Appearance (Urine)	Clear	Clear
Volume(CLU) (Urine)	20	

**CHEMICAL EXAMINATION (URINE COMPLETE)**



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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
pH (Urine)	6		4.5 - 8.0
Specific Gravity (Urine)	1.006		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
Glucose (Urine/GOD - POD)	Negative		Negative
Leukocytes(CP) (Urine)	Negative		

**MICROSCOPIC EXAMINATION**  
**(URINE COMPLETE)**

Pus Cells (Urine)	<b>0-1</b>	/hpf	NIL
Epithelial Cells (Urine)	<b>0-1</b>	/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.



MC-5606



APPROVED BY

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SID No. : 423074527 Collection On : 09/12/2023 12:03 PM  
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Ref. Dr : MediWheel

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



Name : Ms. R ROSHNI C  
PID No. : MED111990338  
SID No. : 423074527  
Age / Sex : 54 Year(s) / Female  
Type : OP  
Ref. Dr : MediWheel

Register On : 09/12/2023 10:01 AM  
Collection On : 09/12/2023 12:03 PM  
Report On : 09/12/2023 7:46 PM  
Printed On : 11/12/2023 10:33 AM

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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
BUN / Creatinine Ratio	14.15		6.0 - 22.0



APPROVED BY

-- End of Report --

Name	MS. R ROSHNI C	ID	MED111990338
Age & Gender	54Y/FEMALE	Visit Date	09 Dec 2023
Ref Doctor Name	MediWheel		

## 2 D ECHOCARDIOGRAPHIC STUDY

### M mode measurement:

AORTA	:	3.2cms
LEFT ATRIUM	:	3.3cms
AVS	:	----
LEFT VENTRICLE (DIASTOLE)	:	3.7cms
(SYSTOLE)	:	2.5cms
VENTRICULAR SEPTUM (DIASTOLE)	:	0.9cms
(SYSTOLE)	:	1.1cms
POSTERIOR WALL (DIASTOLE)	:	0.9cms
(SYSTOLE)	:	1.3cms
EDV	:	57ml
ESV	:	23ml
FRACTIONAL SHORTENING	:	32%
EJECTION FRACTION	:	61%
EPSS	:	---
RVID	:	1.8cms

### DOPPLER MEASUREMENTS:

MITRAL VALVE	:	E' 0.74 m/s	A' 0.65 m/s	NO MR
AORTIC VALVE	:	1.10 m/s		NO AR
TRICUSPID VALVE	:	E' - m/s	A' - m/s	NO TR
PULMONARY VALVE	:	0.96 m/s		NO PR



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## **2D ECHOCARDIOGRAPHY FINDINGS**

Left ventricle : Normal size, Normal systolic function.  
No regional wall motion abnormalities.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Mitral valve : Normal, No mitral valve prolapsed.

Aortic valve : Normal, Trileaflet.

Tricuspid valve : Normal.

Pulmonary valve : Normal.

IAS : Intact.

IVS : Intact.

Pericardium : No pericardial effusion.

## **IMPRESSION:**

- **NORMAL SIZED CARDIAC CHAMBERS.**
- **NORMAL LV SYSTOLIC FUNCTION. EF: 61%.**
- **NO REGIONAL WALL MOTION ABNORMALITIES.**
- **NORMAL VALVES.**
- **NO CLOTS / PERICARDIAL EFFUSION / VEGETATION.**

**DR. K.S. SUBRAMANI. MBBS, MD, DM (CARDIOLOGY) FESC, FICC**  
**SENIOR CONSULTANT INTERVENTIONAL CARDIOLOGIST**  
**SRI JAYADEVA INSTITUTE OF CARDIOLOGY, BANGALORE**  
*Kss/vp*

## **Note:**

- \* **Report to be interpreted by qualified medical professional.**
- \* **To be correlated with other clinical findings.**
- \* **Parameters may be subjected to inter and intra observer variations.**
- \* **Any discrepancy in reports due to typing errors should be corrected as soon as possible.**

Name	MS. R ROSHNI C	ID	MED111990338
Age & Gender	54Y/FEMALE	Visit Date	09 Dec 2023
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**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. 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.

**The kidney measures as follows:**

	<b>Bipolar length (cms)</b>	<b>Parenchymal thickness (cms)</b>
<b>Right Kidney</b>	<b>10.5</b>	<b>1.3</b>
<b>Left Kidney</b>	<b>10.9</b>	<b>1.2</b>

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

**UTERUS** is not visualized, consistent with h/o hysterectomy.

**OVARIES** are not visualised. However no adnexal mass noted.

No evidence of ascites/pleural effusion.

**IMPRESSION:**

- **FATTY LIVER.**
- **NO OTHER SIGNIFICANT ABNORMALITY DETECTED.**

**DR. APARNA**  
**CONSULTANT RADIOLOGIST**  
*A/da*

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**X-ray mammogram (mediolateral oblique and craniocaudal views) followed by Sonomammography was performed.**

**MAMMOGRAPHY OF BOTH BREASTS**

Both breasts show symmetrical fibro fatty tissue.

No evidence of focal soft tissue lesion.

No evidence of cluster micro calcification.

Subcutaneous fat deposition is within normal limits.

**SONOMAMMOGRAPHY OF BOTH BREASTS**

Both breasts show normal echopattern.

No evidence of focal solid / cystic areas in either breast.

No evidence of ductal dilatation.

Few lymphnodes with maintained fatty hilum are noted in both axillae.

**IMPRESSION:**

➤ **NO SIGNIFICANT ABNORMALITY.**

**ASSESSMENT: BI-RADS CATEGORY -1**

**DR. APARNA**  
**CONSULTANT RADIOLOGIST**  
*A/da*

**BI-RADS CLASSIFICATION**

<b><u>CATEGORY</u></b>	<b><u>RESULT</u></b>
0	Assessment incomplete. Need additional imaging evaluation
1	<b>Negative. Routine mammogram in 1 year recommended.</b>
2	Benign finding. Routine mammogram in 1 year recommended.
3	Probably benign finding. Short interval follow-up suggested.
4	Suspicious. Biopsy should be considered.
5	Highly suggestive of malignancy. Appropriate action should be taken.

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Name	Ms. R ROSHNI C	Customer ID	MED111990338
Age & Gender	54Y/F	Visit Date	Dec 9 2023 10:01AM
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: Essentially normal study.***



**DR. APARNA**

**CONSULTANT RADIOLOGIST**