

**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Mr Kannaiah Naidu K MRN : 20010000090680 Gender/Age : MALE , 49y (26/03/1973)

Collected On : 26/08/2022 09:44 AM Received On : 26/08/2022 10:31 AM Reported On : 26/08/2022 11:53 AM

Barcode : 202208260010 Specimen : Serum Consultant : Dr. Prabhakar Hegde(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8197239616

**BIOCHEMISTRY**

| Test   | Result          | Unit          | Biological Reference Interval  |
|--|-----------------|---------------|--|
| <b>Fasting Blood Sugar (FBS)</b> (Hexokinase)                                    | <b>106 H</b>    | mg/dL         | ADA standards 2020<br>=>126 : Diabetes<br>70 to 99 : Normal<br>100 to 125 : Pre-diabetes   |
| <b>SERUM CREATININE</b>  |                 |               |  |
| Serum Creatinine (Enzymatic Method (hydrolase, Oxidase, Peroxidase))             | 1.06            | mg/dL         | 0.66-1.25  |
| eGFR (Calculated)  | 74.3            | mL/min/1.73m2 | Indicative of renal impairment : < 60<br>Note:eGFR is inaccurate for Hemodynamically unstable patients eGFR is not applicable for less than 18 years of age. |
| <b>Blood Urea Nitrogen (BUN)</b> (Enzymatic Method (uricase))                    | 10.12           | mg/dL         | 9.0-20.0   |
| <b>Serum Uric Acid</b> (Uricase, UV)   | 6.1             | mg/dL         | 3.5-8.5  |
| <b>LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)</b>                                    |                 |               |  |
| Cholesterol Total (Enzymatic Method (cholesterol Oxidase, Esterase, Peroxidase)) | 219             | mg/dL         | Both: Desirable: < 200<br>Both: Borderline High: 200-239<br>Both: High: > 240  |
| Triglycerides (Enzymatic Method)   | 101             | mg/dL         | Both: Normal: < 150<br>Both: Borderline: 150-199<br>Both: High: 200-499<br>Both: Very High: > 500  |
| HDL Cholestrol (HDLC) (Direct Method)  | 46              | mg/dL         | 40.0-60.0  |
| Non-HDL Cholestrol   | 173.0           | -             | -  |
| LDL Cholesterol (Calculated)   | <b>153.40 H</b> | mg/dL         | Both: Optimal: < 100<br>Both: Near to above optimal: 100-129<br>Both: Borderline High: 130-159<br>Both: High: 160-189<br>Both: Very High: > 190              |
| VLDL Cholesterol (Calculated)  | 20              | mg/dL         | 0.0-40.0   |
| Cholesterol /HDL Ratio (Calculated)  |                 | -             | 0.0-5.0  |

4.8

|   |       |       |  |
|---|-------|-------|--|
| <b>Prostate Specific Antigen (PSA)</b><br>(Chemiluminescence Immuno Assay (CLIA)) | 0.983 | ng/mL | Male: Normal: 0-4.0<br>Male: Hypertrophy and benign genito urinary conditions: 4-10<br>Male: Suspicious of malignancy: > 10.0<br>**PSA alone should not be used as an absolute indicator of malignancy |
|---|-------|-------|--|

**THYROID PROFILE (T3, T4, TSH)**

|   |               |        |           |
|---|---------------|--------|-----------|
| Tri Iodo Thyronine (T3) (Chemiluminescence Immuno Assay (CLIA))           | 1.37          | ng/mL  | 0.6-1.8   |
| Thyroxine (T4) (Chemiluminescence Immuno Assay (CLIA))                    | 8.30          | µg/dl  | 3.2-12.6  |
| TSH (Thyroid Stimulating Hormone) (Chemiluminescence Immuno Assay (CLIA)) | <b>6.07 H</b> | µIU/mL | 0.4-4.049 |

**LIVER FUNCTION TEST(LFT)**

|   |      |       |            |
|---|------|-------|------------|
| Bilirubin Total (Diazo Method)  | 1.24 | mg/dL | 0.2-1.3    |
| Conjugated Bilirubin (Direct) (Modified Diazo Method)                               | 0.3  | mg/dL | 0.0-0.3    |
| Unconjugated Bilirubin (Indirect) (Dual Wavelength - Reflectance Spectrophotometry) | 0.94 | mg/dL | 0.0-1.1    |
| Total Protein (Biuret Method )  | 7.3  | g/dL  | 6.3-8.2    |
| Serum Albumin (PCP Dye Binding Method)  | 4.3  | gm/dL | 3.5-5.0    |
| Serum Globulin (Calculated)   | 3    | gm/dL | 2.0-3.5    |
| Albumin To Globulin (A/G)Ratio (Calculated)   | 1.43 | -     | 1.0-2.1    |
| SGOT (AST) (UV With P5P)  | 26   | U/L   | 17.0-59.0  |
| SGPT (ALT) (UV With P5P)  | 20   | U/L   | <50.0      |
| Alkaline Phosphatase (ALP) (PNPP With AMP Buffer)                                   | 78   | U/L   | 38.0-126.0 |
| Gamma Glutamyl Transferase (GGT) (Enzymatic (Gamma Glutamyl Carboxynitrilide))      | 26   | U/L   | 15.0-73.0  |

--End of Report--

Patient Name : Mr Kannaiah Naidu K MRN : 20010000090680 Gender/Age : MALE , 49y (1973-03-26)

*Seema S*

Dr. Seema Sivasankaran  
MD, DNB  
CONSULTANT PATHOLOGIST

**Note**

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



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Kannaiah Naidu K MRN : 20010000090680 Gender/Age : MALE , 49y (26/03/1973)

Collected On : 26/08/2022 12:12 PM Received On : 26/08/2022 01:08 PM Reported On : 26/08/2022 01:38 PM

Barcode : 202208260023 Specimen : Plasma Consultant : Dr. Prabhakar Hegde(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8197239616

BIOCHEMISTRY

| Test   | Result | Unit  | Biological Reference Interval   |
|--|--------|-------|---|
| Post Prandial Blood Sugar (PPBS) (Glucose Oxidase, Peroxidase) | 128    | mg/dL | ADA standards 2020<br>=>200 : Diabetes<br>70 to 139 : Normal<br>140 to 199 : Pre-diabetes |

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Collected On : 26/08/2022 09:44 AM Received On : 26/08/2022 10:31 AM Reported On : 26/08/2022 11:33 AM

Barcode : 202208260011 Specimen : Whole Blood Consultant : Dr. Prabhakar Hegde(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8197239616

BIOCHEMISTRY

| Test                      | Result | Unit | Biological Reference Interval   |
|---------------------------|--------|------|---|
| <b>HBA1C</b><br>HbA1c     | 5.3    | %    | Normal: 4.0-5.6<br>Prediabetes: 5.7-6.40<br>Diabetes: => 6.5<br>ADA standards: = 2020 |
| Estimated Average Glucose | 105.41 | %    | -   |

**Interpretation:**

- 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 measurement after 6 months.
- 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.
- Any sample with >15% should be suspected of having a haemoglobin variant.

--End of Report--

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Collected On : 26/08/2022 09:44 AM Received On : 26/08/2022 10:31 AM Reported On : 26/08/2022 12:41 PM

Barcode : 212208260014 Specimen : Whole Blood Consultant : Dr. Prabhakar Hegde(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8197239616

### HAEMATOLOGY LAB

| Test   | Result   | Unit |
|--|----------|------|
| <b>BLOOD GROUP &amp; RH TYPING</b>               |          |      |
| Blood Group (Slide Technique And Tube Technique) | O        | -    |
| RH Typing (Slide Technique And Tube Technique)   | Positive | -    |

--End of Report--

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Collected On : 26/08/2022 09:44 AM Received On : 26/08/2022 10:31 AM Reported On : 26/08/2022 12:05 PM

Barcode : 212208260012 Specimen : Whole Blood - ESR Consultant : Dr. Prabhakar Hegde(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8197239616

### HAEMATOLOGY LAB

| Test   | Result      | Unit   | Biological Reference Interval |
|--|-------------|--------|-------------------------------|
| <b>Erythrocyte Sedimentation Rate (ESR)</b><br>(Westergren Method) | <b>34 H</b> | mm/1hr | 0.0-10.0                      |

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Collected On : 26/08/2022 09:44 AM Received On : 26/08/2022 10:31 AM Reported On : 26/08/2022 12:59 PM

Barcode : 222208260005 Specimen : Urine Consultant : Dr. Prabhakar Hegde(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8197239616

**CLINICAL PATHOLOGY**

| Test   | Result      | Unit | Biological Reference Interval |
|--|-------------|------|-------------------------------|
| <b>URINE ROUTINE &amp; MICROSCOPY</b>  |             |      |                               |
| <b>PHYSICAL EXAMINATION (AUTOMATED)</b>  |             |      |                               |
| Volume   | 40          | -    | -                             |
| Colour   | Pale Yellow | -    | -                             |
| Appearance   | Clear       | -    | -                             |
| Sp. Gravity (Semi-quantitative Strip Method-chromatographic Reaction)              | 1.005       | -    | -                             |
| <b>CHEMICAL EXAMINATION (AUTOMATED)</b>  |             |      |                               |
| pH(Reaction)   | 5.0         | -    | 4.8-7.5                       |
| Protein (Semi-quantitative Strip Method- Protein Error Of Indicator)               | Negative    | -    | Negative                      |
| Urine Glucose (Semi-quantitative Strip Method-Glucose Oxidase Technique)           | Negative    | -    | Negative                      |
| Ketone Bodies (Semi-quantitative Strip Method-Sodium Nitroprusside Chromatography) | Negative    | -    | Negative                      |
| Bile Salts (Semi-quantitative Strip Method)  | Negative    | -    | Negative                      |
| Bile Pigment (Bilirubin) (Semi-quantitative Strip Method- Azodyes)                 | Negative    | -    | Negative                      |
| Urobilinogen (Semi-quantitative Strip Method-Fast B Blue)                          | Normal      | -    | Normal                        |
| Blood Urine (Semi-quantitative Strip Method-Peroxidase)                            | Negative    | -    | Negative                      |
| <b>MICROSCOPIC EXAMINATION (FLOW CYTOMETRY)</b>                                    |             |      |                               |
| Pus Cells  | 2-3/hpf     | -    | 0-2 / hpf                     |
|  |             | -    | Nil                           |



Patient Name : Mr Kannaiah Naidu K MRN : 20010000090680 Gender/Age : MALE , 49y (1973-03-26)

|  |          |   |   |
|--|----------|---|---|
| RBC  | Not Seen | - | - |
| Epithelial Cells   | 1-2/hpf  | - | - |
| Crystals   | Not Seen | - | - |
| Casts  | Not Seen | - | - |
| <b>Urine For Sugar (Fasting)</b> (Semiquantitative Strip Method) | Negative | - | - |

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Collected On : 26/08/2022 09:44 AM Received On : 26/08/2022 10:31 AM Reported On : 26/08/2022 11:13 AM

Barcode : 212208260013 Specimen : Whole Blood Consultant : Dr. Prabhakar Hegde(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8197239616

**HAEMATOLOGY LAB**

| Test   | Result        | Unit           | Biological Reference Interval |
|--|---------------|----------------|-------------------------------|
| <b>COMPLETE BLOOD COUNT (CBC)</b>                                    |               |                |                               |
| Haemoglobin (Hb%) (Oxymethemoglobin Method)                          | 16.3          | g/dL           | 13.0-17.0                     |
| Red Blood Cell Count (Coulter Principle/Electrical Impedence)        | 4.94          | Million/ul     | 4.5-5.5                       |
| PCV (Packed Cell Volume) / Hematocrit (Calculated)                   | 47.3          | %              | 40.0-50.0                     |
| MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)           | 96            | fL             | 83.0-101.0                    |
| MCH (Mean Corpuscular Haemoglobin) (Calculated)                      | <b>33.0 H</b> | pg             | 27.0-32.0                     |
| MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)       | 34.5          | g/L            | 31.5-34.5                     |
| Red Cell Distribution Width (RDW) (Derived)                          | 13.4          | %              | 11.6-14.0                     |
| Platelet Count (Coulter Principle/Electrical Impedence)              | 254           | Thous/ $\mu$ L | 150.0-450.0                   |
| Total Leucocyte Count(WBC) (Coulter Principle /Electrical Impedence) | 5.9           | Thous/cumm     | 4.0-10.0                      |
| <b>DIFFERENTIAL COUNT (DC)</b>                                       |               |                |                               |
| Neutrophils (VCSn Technology)  | 55.8          | %              | 35.0-66.0                     |
| Lymphocytes (VCSn Technology)  | 35.7          | %              | 20.0-40.0                     |
| Monocytes (VCSn Technology)  | 5.0           | %              | 2.0-10.0                      |
| Eosinophils (VCSn Technology)  | 3.5           | %              | 1.0-6.0                       |
| Basophils (Calculated)   | 0.0           | %              | 0.0-1.0                       |

--End of Report--

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*Seema S*

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CONSULTANT PATHOLOGIST

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Dr. shreyas  
pt - Mr. Kanniah  
Y. 90680

Came for general health  
check up.

wt - 70 kg  
P - 80 bpm  
S - 98%  
BP - 130/80 mmHg

OK with sth

very low  
M

Call

① Nil intervention



Patient Name : Mr. Kannalah Naidu K  
Age : 49 Years  
Referred by : EHP

MRN : 90680  
Sex : Male  
Date : 26-08-2022

### ULTRASOUND ABDOMEN AND PELVIS

#### FINDINGS:

Liver is normal in size and echopattern. No intra or extra hepatic biliary duct dilatation. No focal lesions.

Portal vein is normal in course, caliber and shows hepatopetal flow. CBD is not dilated.

Gallbladder is well distended. There is no evidence of calculus/wall thickening/pericholecystic fluid.

Pancreas to the extent visualized, appears normal in size, contour echogenicity.

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

Right Kidney is normal in size (measures 9.0 cm in length & 1.1 cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Left Kidney is normal in size (measures 8.9 cm in length & 1.5 cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

Urinary Bladder is well distended. Wall thickness is normal. No evidence of calculi, mass or mural lesion.

Prostate is normal in size.

Fluid - There is no ascites or pleural effusion.

#### IMPRESSION:

- No significant abnormality detected.



Dr. Tanuj Gupta  
Senior Consultant Radiologist

*Disclaimer*  
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.

**Narayana Multispeciality Clinic**

(A unit of Narayana Health Services Limited) CIN: L65110KA2000PLC027497

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Tel: +91-080 2572 7334, [www.narayanahealth.org](http://www.narayanahealth.org)

Appointments  
**1800-309-0309 (Toll Free)**  
Emergencies  
**97384-97384**

**COLOUR DOPPLER ECHOCARDIOGRAPHY REPORT**

NAME : Mr Kannaiah Naidu K

AGE/SEX:49Y/Male

ID NO :90680

DATE :26 /08 /2022

REF BY :EHP

**MEASUREMENTS**

AO : 29mm

LVID(d) : 40mm

IVS :10mm

LA : 31mm

LVID (s) : 20mm

PW:09mm

LVEF :60%

**VALVES**

MITRAL VALVE : Normal

AORTIC VALVE : Normal

TRICUSPID VALVE : Normal

PULMONARY VALVE : Normal

**CHAMBERS**

LEFT ATRIUM : Normal sized

RIGHT ATRIUM : Normal sized

LEFT VENTRICLE : Normal sized, Normal LV function.

RIGHT VENTRICLE : Normal Sized, TAPSE – 21 mm, Normal RV Function.

**SEPTAE**

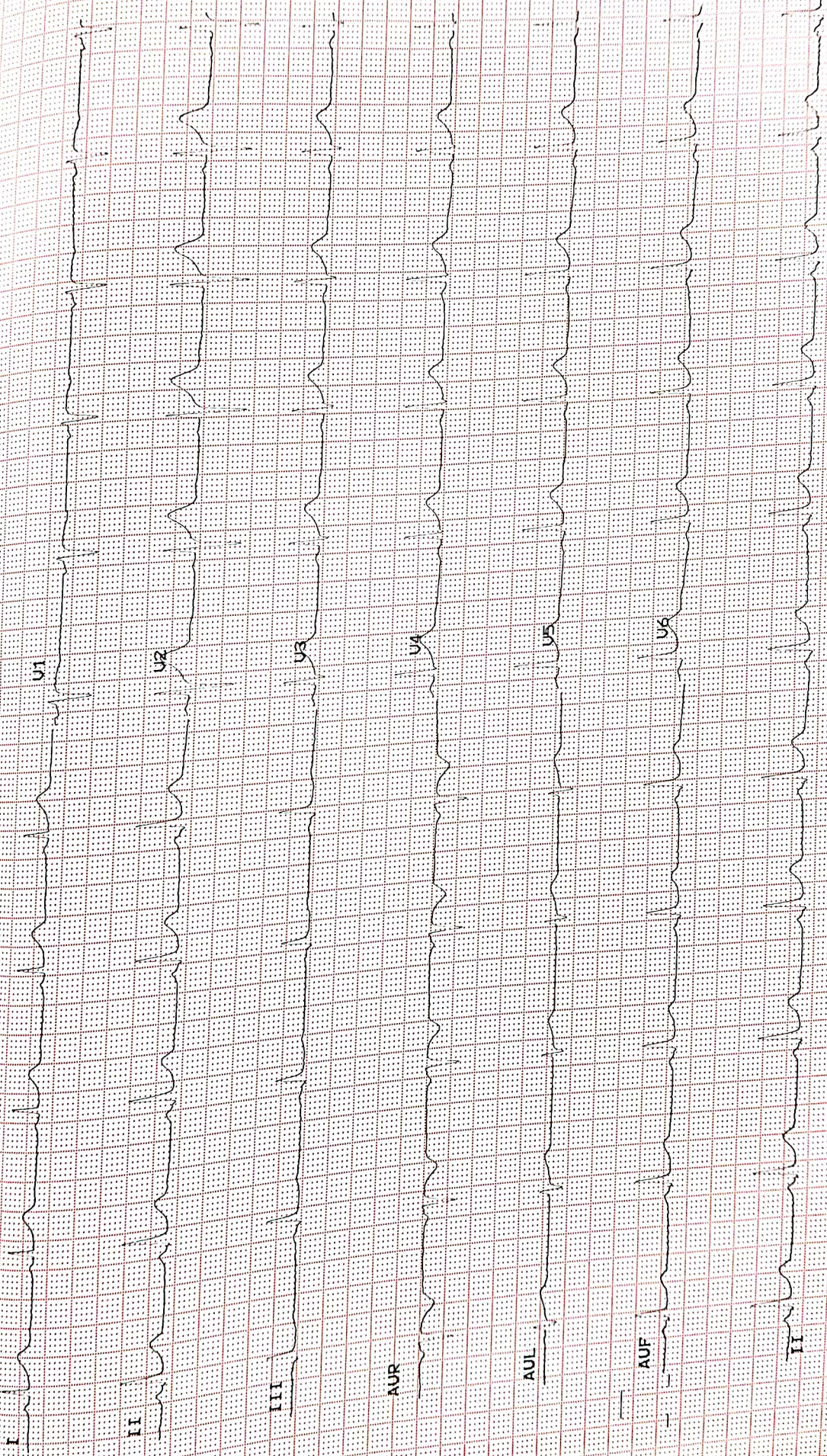
IVS : Intact

IAS : Intact

GE MAC1200 ST

MR KANNAIAH, 0000090680, NARA YANA HRUDAYALAYA DIAGNOSTIC CENTER

HR 63bpm



26-Aug-2022 12:49:57 PM 25mm/s 10mm/mV ADS 50Hz 0.04 - 20Hz 6\_FS\_R Automatic U6.2 (1)

shreyas  
Kannaiah

|              |                   |                    |                  |
|--------------|-------------------|--------------------|------------------|
| Patient Name | MR KANNAIAH NAIDU | Requested By       | EHC              |
| MRN          | 90680             | Procedure DateTime | 26-08-2022 11:51 |
| Age/Sex      | 49Y/Male          | Hospital           | NH-HSR CLINIC    |

**CHEST RADIOGRAPH (PA VIEW)**

**CLINICAL DETAILS:** For health checkup.

**FINDINGS:**

- Linear atelectasis is seen in bilateral lower zones.
- 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:**

- Linear atelectasis in bilateral lower zones.

HL

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

This report has been generated from NH Teleradiology 24/7, a service of Narayana Health

-- End of Report --

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