

NAME:	Mr. RAO TUMMALACHERVU MALLIKARJUNA	DATE:	11-02-2023
AGE:	29 YEARS	ID. NO:	201616
GENDER:	MALE	REFERRED BY:	OLYMPUS DIAGNOSTICS

# **USG REPORT - ABDOMEN AND PELVIS**

# **OBSERVATION:**

# LIVER:

Liver is normal in size (13.8 cm) and shows mild diffuse increase in echotexture. No obvious focal lesion is seen. Intrahepatic biliary radicles not dilated. Hepatic and portal veins are normal. CBD is normal.

# GALL BLADDER:

Normal in distension. Lumen echo free. Wall thickness is normal.

# **PANCREAS:**

Head and body visualized appears normal. No focal lesion is seen. Pancreatic duct not dilated. Tail not visualized.

# SPLEEN:

Mildly enlarged in size (12 x 5.0 cm) with homogenous echotexture. No focal lesion seen.

# RIGHT KIDNEY:

Right kidney measures  $9.7 \times 1.4 \text{ cm}$  (length x parenchymal thickness) with normal echo pattern and cortical thickness.

The shape, size and contour of the right kidney appear normal.

Cortico- medullary differentiation is maintained.

No evidence of pelvicalyceal dilatation. No sonologically detectable calculi seen.

# LEFT KIDNEY:

Left kidney measures  $10.4 \times 1.3 \text{ cm}$  (length x parenchymal thickness) with normal echo pattern and cortical thickness.

The shape, size and contour of the left kidney appear normal.

Cortico-medullary differentiation is maintained.

No evidence of pelvicalyceal dilatation. No sonologically detectable calculi seen.

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# X-RAY REPORT- CHEST (PA VIEW)

# **OBSERVATIONS:**

The lung fields are clear bilaterally.

CP angles are clear.

Both the hila appear normal.

Cardiac diameter is within normal limits.

Trachea is midline.

Visible bony thoracic cage is normal.

Adjacent soft tissues appear normal.

# **IMPRESSION:**

> No significant abnormality in the visualized lung fields.

Dr. SAHANA C MDRD, DNB Consultant Radiologist

Email: info@mediclu.com

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# **USG REPORT - ABDOMEN AND PELVIS**

# **URINARY BLADDER:**

Is normal in contour. No intraluminal echoes are seen. No calculus or diverticulum is seen. Wall thickness appears normal.

# **PROSTATE:**

Is normal in size (Volume-14.7 cc) with normal echo pattern. No focal lesion is seen.

No evidence of free fluid in the pelvic or abdominal cavity.

# **IMPRESSION:**

- > Mild splenomegaly.
- Grade I fatty infiltration of liver.

Dr. SAHANA C MDRD, DNB Consultant Radiologist



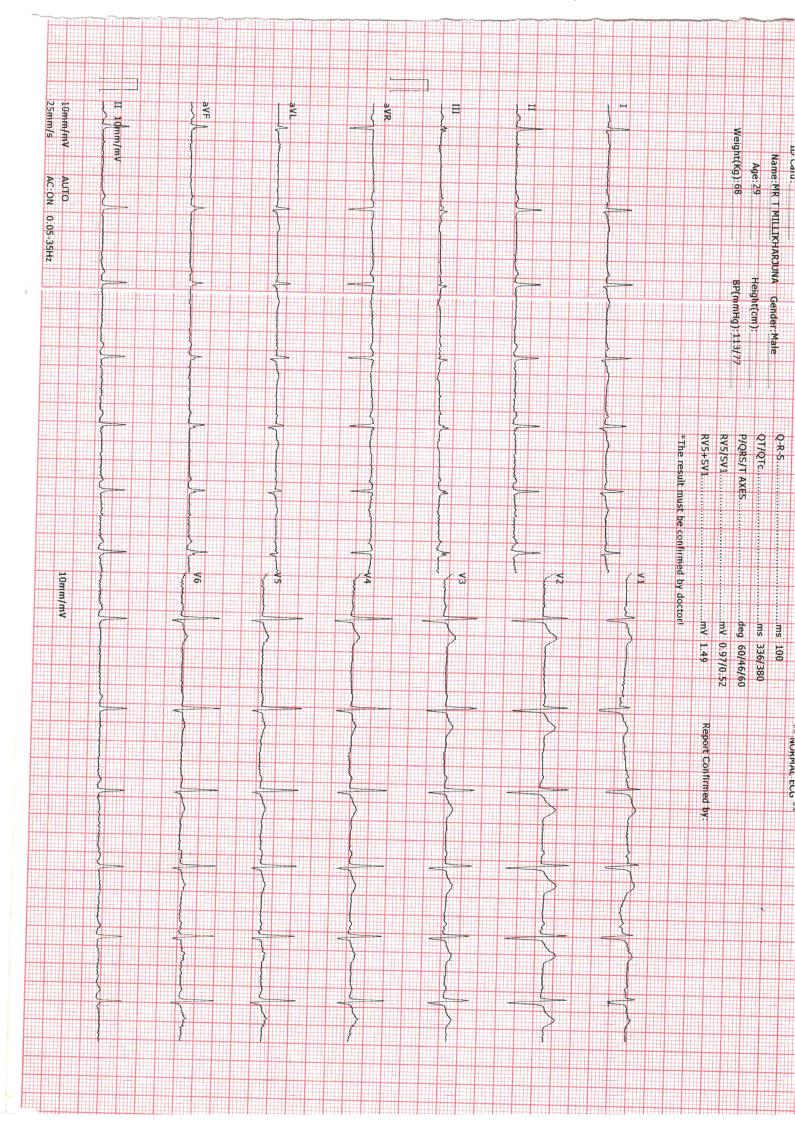
# TRANS THORACIC 2D ECHO - DOPPLER STUDY

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		M-	Mode		
AORTA				22	mm
LEFT ARTIUM				30	mm
RIGHT VENTRICLE(Dia	astole)			18	mm
LVID (Diastole)				35	mm
LVID (Systole)				22	mm
INTERVENTRICULAR S	EPTUM (D	iastole)		10	mm
L V POSTERIOR WALL (Diastole)				9	mm
L V MASS				140	grms
FRACTIONAL SHORTENING				30	%
EJECTION FRACTION				60	%
	DOF	PLER /	COLOR	FLOW	
MITRAL VALVE	E- 0.6	A - 0.9	- 0.9 m/sec NO MR		
AORTIC VALVE	1.0	-	m/sec	NO AR	
TRICUSPID VALVE	E- 0.4	A - 0.2	m/sec	NO TR	
PULMONARY VALVE	0.8	-	m/sec	NO PR	

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Name : Mr. RAO TUMMALACHERVU REG/LAB NO. : 23020090 / 1251

**MALLIKHARJUNA** 

: 29 Yrs / Male DATE OF COLLECTION: 11-02-2023 at 09:00 AM AGE/SEX

DATE OF REPORT : 13-02-2023 at 06:07 PM REFERRED BY:

REF CENTER : MEDIWHEEL 

TEST PARAMETER	RESULT	REFERENCE RANGE		
COMPLETE BLOOD COUNT(CBC)				
HAEMOGLOBIN	14.6 gm/dl	14 - 18 gm/dl		
TOTAL COUNT	5400 cells/cumm	4000 - 11000 cells/cumm		
DIFFERENTIAL COUNT				
NEUTROPHILS	60 %	40 - 70 %		
LYMPHOCYTES	34 %	20 - 45 %		
EOSINOPHILS	02 %	2 - 8 %		
MONOCYTES	04 %	1 - 6 %		
BASOPHILS	00 %	0 - 1 %		
PLATELET COUNT	1.8 Lakhs/cumm	1.5 - 4.5 Lakhs/cumm		
R.B.C COUNT	4.7 mill/cumm	4.5 - 6.2 mill/cumm		

PACKED CELL VOLUME (PCV) 44 % 37 - 47 % M.C.V 80 - 98 fl 92 fl M.C.H 26 - 34 pg 30 pg M.C.H.C 33 % 31 - 38 %

**ESR** 15 mm/hr 0 - 20 mm/hr

ESR is non specific marker of inflammatory process. Its main clinical utility is in monitoring the course or response to traetment of various acute and chronic disorders like hematologic diseases, malignancy, collagen vascular disorders and renal diseases.





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**TEST PARAMETER RESULT REFERENCE RANGE** 

**COMPLETE URINE ANALYSIS** 

PHYSICAL CHARACTERS

**COLOUR** PALE YELLOW PALE YELLOW

**APPEARANCE CLEAR CLEAR** SPECIFIC GRAVITY 1.015 1.005-1.030 6.0 4.5-7.0

CHEMICAL CONSTITUENTS

**ALBUMIN** PRESENT (+) **ABSENT SUGAR** GREEN(+) **ABSENT BILE SALTS ABSENT ABSENT BILE PIGMENTS ABSENT ABSENT** KETONE BODIES **ABSENT ABSENT** 

**MICROSCOPY** 

**PUS CELLS** 4 - 5 /hpf 4-6 R.B.C 0-4 NIL **EPITHELIAL CELLS** 0 - 1 /hpf 0-2 **CASTS ABSENT ABSENT CRYSTALS ABSENT ABSENT** 

STOOL ANALYSIS

PHYSICAL EXAMINATION

CONSISTANCY SEMI SOLID **COLOUR BROWNISH MUCUS ABSENT** REDUCING SUGAR **ABSENT** 

MICROSCOPIC EXAMINATION

OVA NIL CYST NIL **PUS CELLS** 1-2 /hpf **RBC** NIL **MISCELLANEOUS ABSENT** 

"O" **BLOOD GROUP** 

**RH TYPE NEGATIVE** 

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TEST PARAMETER RESULT REFERENCE RANGE

FASTING BLOOD SUGAR 117 mg/dl 60 - 110 mg/dl 60 - 110 mg/dl

**COMMENTS:** 

80 - 99 mg/dL: Normal, 100 - 125 mg/dL: Impaired Fasting Glucose (Pre-Diabetes), >126 mg/dL: Diabetes. reference intervals for FBS from ADA RECOMMENDATION 2015.

A level of 126 mg/dL or above, confirmed by repeating the test on another day, means a person has diabetes. Impaired fasting glucose (IFG): Fasting glucose repeatedly is at upper limit, family history or abnormal lipid profile.

Advised: HbA1c and clinical correlation.

#### NOTE:

In absence of pregnancy, IGT and IFG are risk factors for future DM and cardiovascular disease; they are not clinical entities. A person's blood glucose levels normally move up and down depending on meals, Exercise, sickness, and stress.

POST PRANDIAL BLOOD SUGAR	<b>216</b> mg/dl	70 - 140 mg/dl

FASTING URINE SUGAR NIL NIL

POST PRANDIAL URINE SUGAR (PPUS) NIL NIL

HbA1c (GLYCOSYLATED Hb) 6.0 % Normal: <5.7

Pre-Diabetes: 5.7-6.4

Diabetes: 6.5

# MEAN BLOOD GLUCOSE 124.1

Degree of Control	HbA1c	MBG
Normal	< 6.0 %	61-124 mg/dl
Good Control	6.0-7.0 %	124-156 mg/dl
Fair Control	7.0-8.0 %	158-188 mg/dl
Poor Control	> 8.0 %	>188 mg/dl

#### Note:

- 1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c.
- 2. Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0 % may not be appropriate.

### **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. ADA criteria for correlation between HbA1c & Mean plasma glucose levels.





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TEST PARAMETER RESULT REFERENCE RANGE

THYROID PROFILE (T3, T4, TSH)

TOTAL TRIIODOTHYRONINE (T3) 0.83 ng/mL 0.60-1.81

1st Trimester :0.71 - 1.75 2nd Trimester :0.91 - 1.95 3rd Trimester :1.04 - 1.82

TOTAL THYROXINE (T4) 4.76 μg/dL 4.5-10.9

1st Trimester :6.5 - 10.1 2nd Trimester :7.5 - 10.03 3rd Trimester :6.3 - 9.7

THYROID STIMULATING HORMONE (TSH) 2.759 μIU/ml 0.35-5.5

1st Trimester :0.1 - 2.5 2nd Trimester :0.2 - 3.0 3rd Trimester :0.3 - 3.0

#### Note:

1.TSH levels are subject to circadian variation, reaching peak levels between 2-4 a.m. and at a 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 concentrations.

2. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

3. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

#### Clinical Use:

Primary Hypothyroidism, Hypothyroidism, Hypothalamic – Pituitary hypothyroidism, Inappropriate TSH secretion, Non thyroidal illness, Autoimmune thyroid disease, Pregnancy ,associated thyroid disorders, Thyroid dysfunction in infancy and early childhood

#### LIPID PROFILE TEST (LPT)

TOTAL CHOLESTEROL 108 mg/dl up to 200 mg/dl
TRIGLYCERIDES 157 mg/dl up to 200 mg/dl
Special condition:

Borderline high risk: 200 - 400 mg/dL

Elevated: > 400 mg/dL

HDL CHOLESTEROL - DIRECT

LDL CHOLESTEROL - DIRECT

VLDL CHOLESTEROL

30 mg/dl

46.6 mg/dl

46.6 mg/dl

Up to 150 mg/dl

0 - 60 mg/dl

TC/HDL 3.6 LDL/HDL 1.6





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RENAL FUNCTION TEST (RFT)					
BLOOD UREA	23 mg/dL	11 - 45 mg/dL			
SERUM URIC ACID	4.8 mg/dL	4.5 - 8.1 mg/dL			
SERUM CREATININE	0.6 mg/dL	0.6 - 1.4 mg/dL			
LIVER FUNCTION TEST (LFT)					
TOTAL BILIRUBIN	0.9 mg/dl	0 - 1 mg/dl			
DIRECT BILIRUBIN	<b>0.3</b> mg/dl	0 - 0.25 mg/dl			
INDIRECT BILIRUBIN	0.6 mg/dl	0 - 0.75 mg/dl			
TOTAL PROTEIN	7.8 g/dl	6 - 8.5 g/dl			
SERUM ALBUMIN	4.3 g/dl	3.5 - 5.2 g/dl			
SERUM GLOBULIN	3.5 g/dL	2.3 - 3.5 g/dL			
A/G RATIO	1.2	1 - 1.5			
ASPARATE AMINOTRANSFERASE (SGOT/AST	) 52 U/L	up to 40 U/L			

Dispatched by: Somashekhara h c

ALKALINE PHOSPHATASE

ALANINE AMINOTRANSFERASE (SGPT/ALT)

\*\*\*\* End of Report \*\*\*\*

71 U/L

92 IU/L

Printed by: Somashekhara h c on 13-02-2023 at 06:07 PM

up to 40 U/L

25 - 147 IU/L

Lab Technician

Dr. Sowmya T.M

DNB ,PDF

Consultant Pathologist