

SATHYA NARAYAN KUMAR 39 MED111193476 M CHEST PA 7/9/2022 12:50 PM  
MEDALL CLUMAX DIAGNOSTIC

## MYSORE-BALLAL CIRCLE



--- A MEDALL COMPANY ---

Date 09-Jul-2022 11:11 AM

Customer Name : **MR.SATHYA NARAYAN KUMAR**DOB : **15 Dec 1982**Ref Dr Name : **MediWheel**Age : **39Y/MALE**Customer Id : **MED111193476**Visit ID : **712220912**

Email Id :

Phone No : **9164699595**Corp Name : **MediWheel**

Address :

Package Name : **Mediwheel Full Body Health Checkup Male Above 40***6:30 pm*

S.No	Modality	Study	Accession No	Time	Seq	Signature
1	LAB	BLOOD UREA NITROGEN (BUN)				
2	LAB	GLUCOSE - FASTING				
3	LAB	GLUCOSE - POSTPRANDIAL (2 HRS)				
4	LAB	GLYCOSYLATED HAEMOGLOBIN (HbA1c)				
5	LAB	LIPID PROFILE				
6	LAB	LIVER FUNCTION TEST (LFT)				
7	LAB	URIC ACID				
8	LAB	URINE GLUCOSE - FASTING				
9	LAB	URINE GLUCOSE - POSTPRANDIAL (2 Hrs)				
10	LAB	COMPLETE BLOOD COUNT WITH ESR				
11	LAB	THYROID PROFILE/ TFT( T3, T4, TSH)				
12	LAB	TOTAL PROSTATE SPECIFIC ANTIGEN - PSA				
13	LAB	STOOL ANALYSIS - ROUTINE				
14	LAB	URINE ROUTINE				
15	LAB	CREATININE				

Patient Details Print Page

		BLOOD GROUP & RH TYPE (Forward Reverse)			
	LAB	BUN/CREATININE RATIO			
18	OTHERS	physical examination	MYS2699028102651		
19	US	ULTRASOUND ABDOMEN	MYS2699028103462	6 <sup>th</sup> Floor	
20	OTHERS	Treadmill / 2D Echo ✓	MYS2699028127528	1 <sup>st</sup> Floor	
21	OTHERS	Dental Consultation	MYS2699028134969		
22	OTHERS	EYE CHECKUP	MYS2699028135592		
23	X-RAY	X RAY CHEST ✓	MYS2699028145199	1 <sup>st</sup> Floor	
24	OTHERS	Consultation Physician	MYS2699028148004		
25	ECHO	ELECTROCARDIOGRAM ECG ✓	MYS2699028149333	1 <sup>st</sup> Floor	

H - 170 cm

w - 72 kg

Bp - 120/80 mmHg

pulse - 79 bpm

Hip -  
weight

Registered By

(A.JAYASHREE)

2:35pm

MEDICAL



# NETHRADHAMA SUPER SPECIALITY EYE HOSPITAL

(A Unit of Nethradhama Hospitals Pvt. Ltd.)

## OPD SHEET

Date: 9/7/22

Patient's Name: Mr. Sathya Narayan Kumar OP No. 1202070  
39/M 2:35pm

**Dr. Monica Anand**  
MBBS, MS, FG  
Consultant-Glaucoma & Cataract  
FMC No. 102734

BCVA 16/6, N6.

↓ V<sub>n</sub> BE

NCT 14/15

OD

OS

Cornea clear (OU)

VH 4 (OU)

Lens clear (OU)

CDR 0.2

Macula WNL

No detectable lesion in periphery

Adv: - Spectacle  
R/A 7yr/501

4:40pm

Jayanagar Branch : 080-26088000 / 2663 3533 / 2663 3609 / 2245 Mobile : 94480 71816  
Rajajinagar Branch : 080-4333 4111 / 2313 2777 / Mobile : 99728 53918  
Indiranagar Branch : 080-4333 2555 Mobile : 81973 51609  
Mysore Branch : 0821-4293000 Mobile : 94490 03771  
Mangalore Lasik Centre : 0824-2213801 Mobile : 97410 26389  
Davangere Lasik Centre : 08192-226607/08 Mobile : 94820 01795

R / FD / 07 / 13

Customer Name	MR.SATHYA NARAYAN KUMAR	Customer ID	MED111193476
Age & Gender	39Y/MALE	Visit Date	09/07/2022
Ref Doctor	MediWheel		

**ABDOMINO-PELVIC ULTRASONOGRAPHY**

**LIVER is normal in size and shows slightly increased echotexture.**

No evidence of focal lesion or intrahepatic biliary ductal dilatation.

Hepatic and portal vein radicals are normal.

**GALL BLADDER** show 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** show normal shape, size and echopattern.

**KIDNEYS** move well with respiration and have normal shape, size and echopattern.

Cortico- medullary differentiations are well madeout.

No evidence of calculus or hydronephrosis.

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	9.7	1.8
Left Kidney	9.3	1.7

**URINARY BLADDER** show normal shape and wall thickness.

It has clear contents.

**PROSTATE** shows normal shape, size and echopattern.

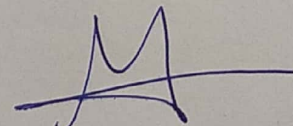
No evidence of ascites.

**IMPRESSION:**

- **GRADE I FATTY CHANGES IN LIVER.**

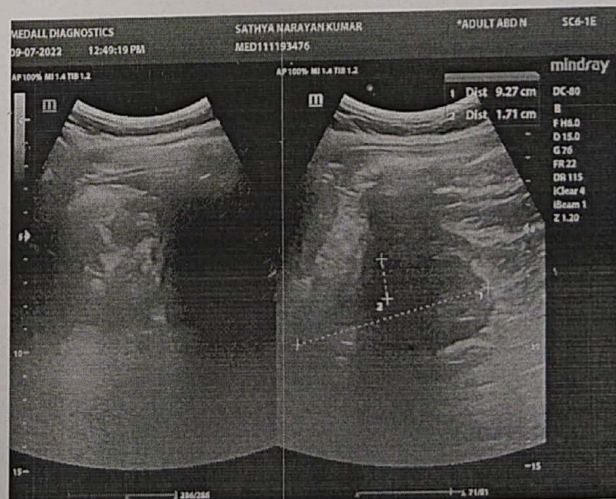
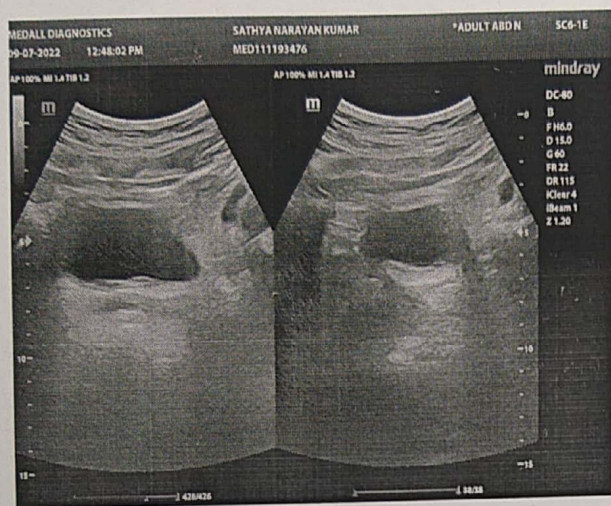
**CONSULTANT RADIOLOGISTS**

**DR. ANITHA ADARSH**  
MB/MS



**DR. MOHAN B**

Customer Name	MR.SATHYA NARAYAN KUMAR	Customer ID	MED111193476
Age & Gender	39Y/MALE	Visit Date	09/07/2022
Ref Doctor	MediWheel		

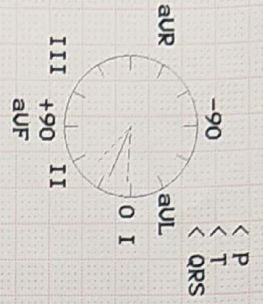


GE MAC1200 ST  
Male

GE Healthcare REF 1019728151  
SATHYANARAYANA, KUMAR 111193476, CLUMAX DIAGNOSTICS, MYSORE

CE LOT D718  
HR 79 bpm

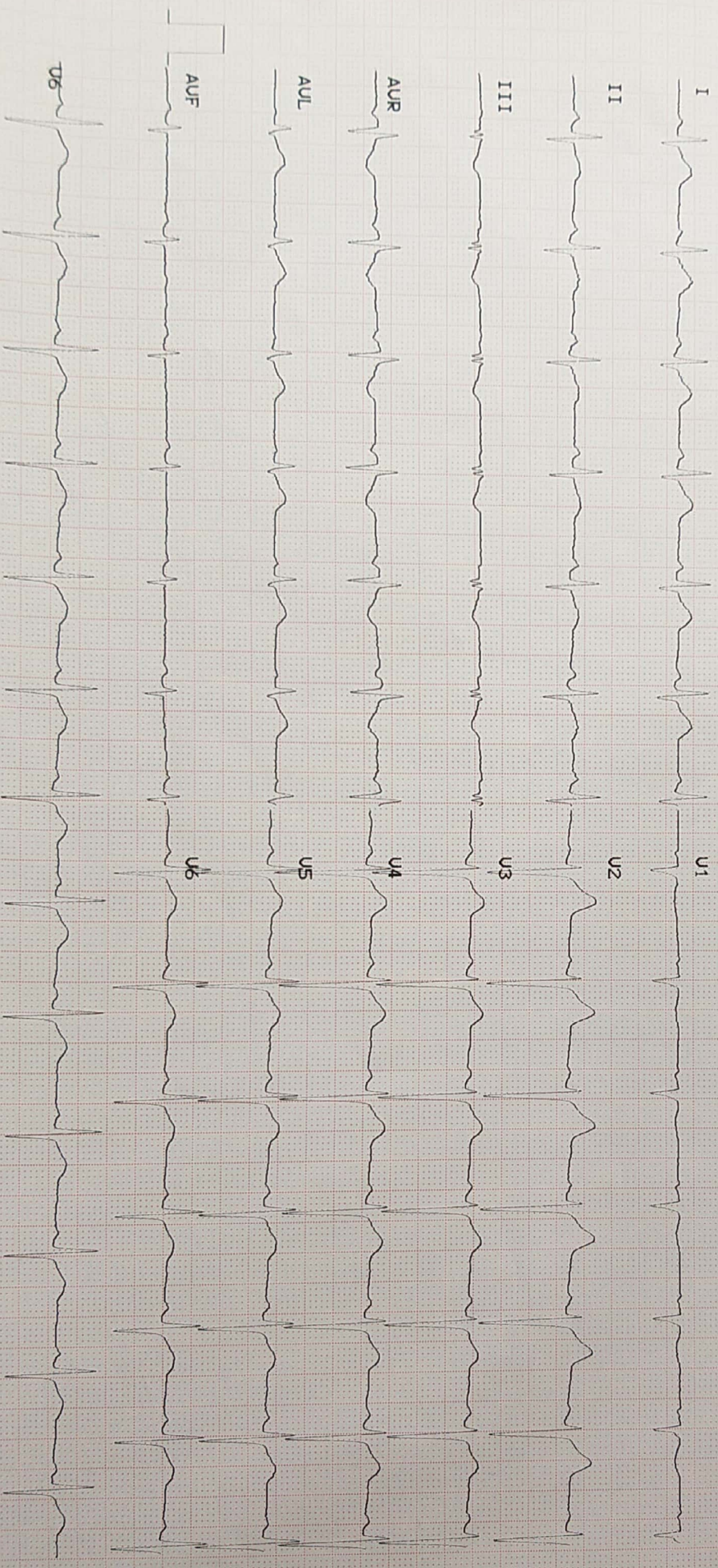
AGE: 39  
Measurement Results:  
QRS : 102 ms  
QT/QTcB : 374 / 430 ms  
PR : 138 ms  
P : 98 ms  
RR/PP : 756 / 740 ms  
P/QRS/T : 45 / 25 / 5 degrees  
QTd/QTcBD : 32 / 37 ms  
Sokolow : 1.2 mV  
NK : 11



Interpretation:  
no R/S inversion up to U6  
borderline ECG

*Armed sinus rhythm  
biventricular conduction delay*

Unconfirmed report.



09. JUL. 2022 12:53:22 25mm/s 10mm/mV ADS 50Hz 0.08 - 20Hz 6\_F1 Automatic U6.2 12i (1)



**medall**  
DIAGNOSTICS  
experts who care

Customer Name	MR.SATHYA NARAYAN KUMAR	Customer ID	MED111193476
Age & Gender	39Y/MALE	Visit Date	09/07/2022
Ref Doctor	MediWheel		

### 2 D ECHOCARDIOGRAPHIC STUDY

#### M mode measurement:

AORTA	:	3.0cms
LEFT ATRIUM	:	3.1cms
LEFT VENTRICLE (DIASTOLE)	:	4.6cms
(SYSTOLE)	:	2.9cms
VENTRICULAR SEPTUM (DIASTOLE)	:	0.9cms
(SYSTOLE)	:	1.1cms
POSTERIOR WALL (DIASTOLE)	:	0.9cms
(SYSTOLE)	:	1.2cms
EDV	:	75ml
ESV	:	29ml
FRACTIONAL SHORTENING	:	38%
EJECTION FRACTION	:	64%
RVID	:	1.5cms

#### DOPPLER MEASUREMENTS:

MITRAL VALVE	:	'E' - 0.81m/s	'A' - 0.30m/s	NO MR
AORTIC VALVE	:	1.03m/s		NO AR
TRICUSPID VALVE	:	'E' - 0.78m/s	'A' - 0.30m/s	NO TR
PULMONARY VALVE	:	0.77m/s		NO PR



Customer Name	MR.SATHYA NARAYAN KUMAR	Customer ID	MED111193476
Age & Gender	39Y/MALE	Visit Date	09/07/2022
Ref Doctor	MediWheel		

**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.

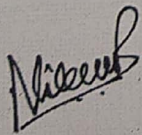
IAS : Intact.

IVS : Intact.

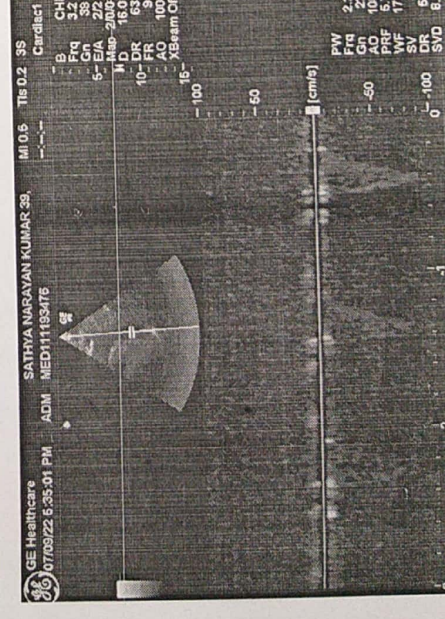
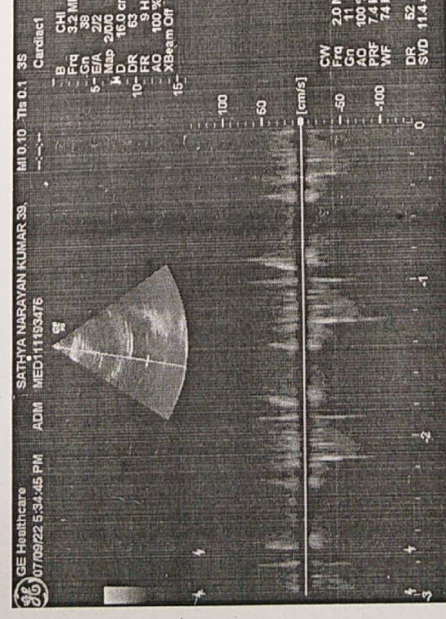
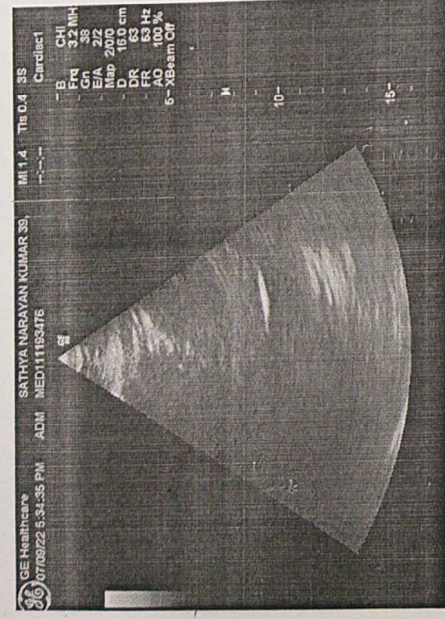
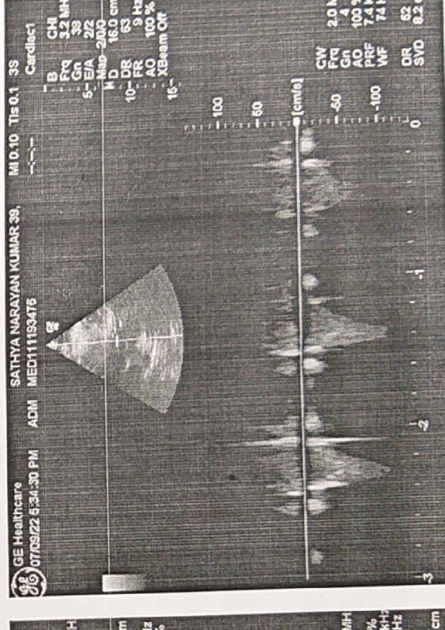
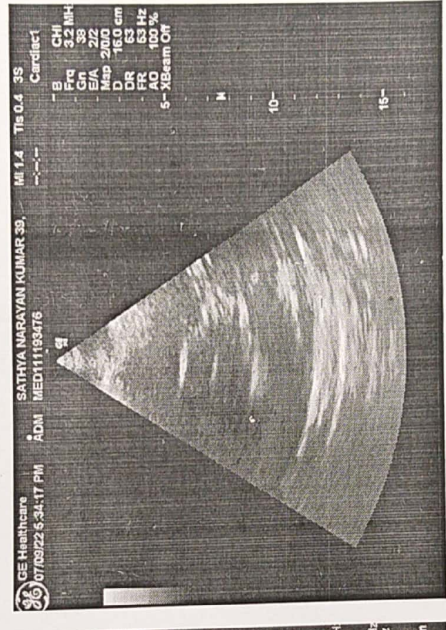
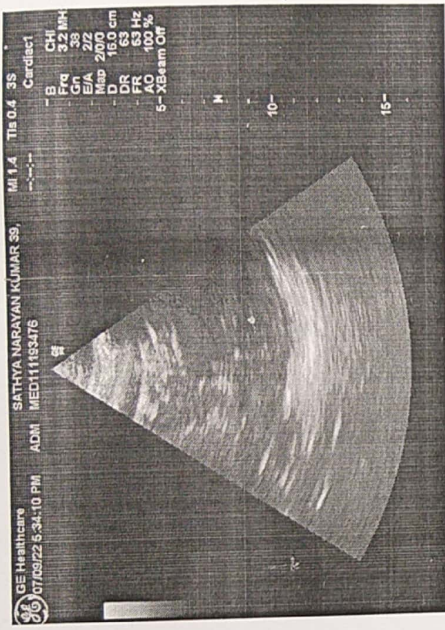
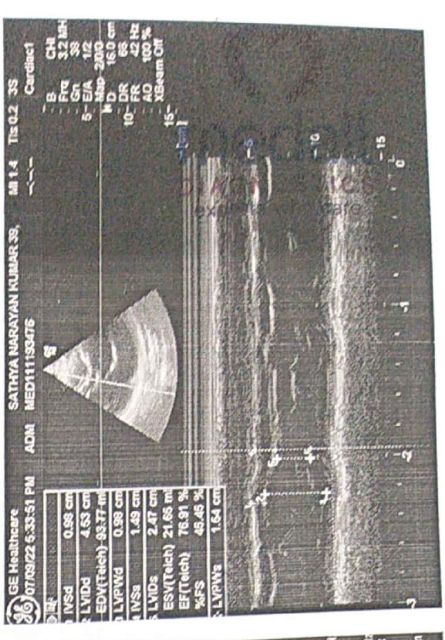
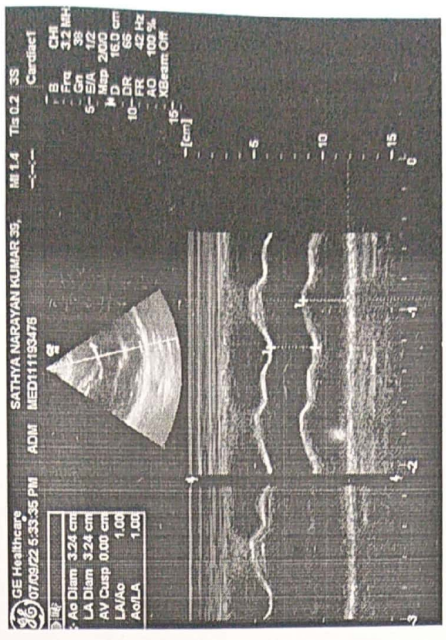
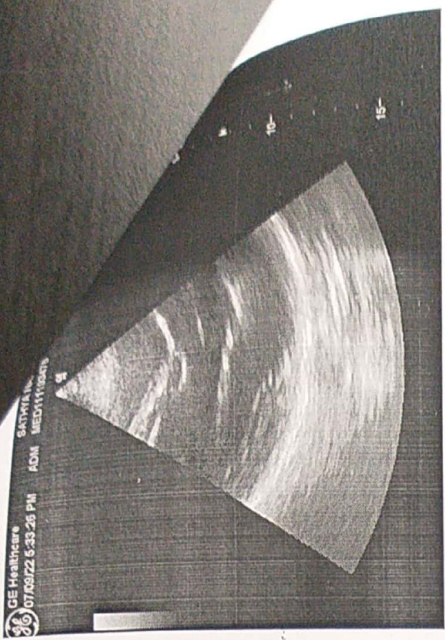
Pericardium : No pericardial effusion.

**IMPRESSION:**

- NORMAL SIZED CARDIAC CHAMBERS.
- NORMAL LV SYSTOLIC FUNCTION. EF: 64%.
- NO REGIONAL WALL MOTION ABNORMALITIES.
- NORMAL VALVES.
- NO CLOTS/ PERICARDIAL EFFUSION VEGETATION.



DR. NIKHIL B  
INTERVENTIONAL CARDIOLOGIST  
NB/MS



# 1215, CH12 & 1215/A CH12A, Krishnamurthy Puram, New Kantharaj Urs Road, Mysore - 4  
 Phone : 0821-2332000, 4232111 Email Id: clumax.mysore@medallcorp.in (W) www.medall.in

Name : Mr. SATHYA NARAYAN KUMAR  
PID No. : MED111193476  
SID No. : 712220912  
Age / Sex : 39 Year(s) / Male  
Type : OP  
Ref. Dr : MediWheel

Register On : 09/07/2022 11:11 AM  
Collection On : 09/07/2022 11:41 AM  
Report On : 10/07/2022 11:51 AM  
Printed On : 12/07/2022 5:56 PM




<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

## HAEMATOLOGY

### Complete Blood Count With - ESR

Haemoglobin (EDTA Blood/Spectrophotometry)	16.0	g/dL	13.5 - 18.0
<b>INTERPRETATION:</b> Haemoglobin values vary in Men, Women & Children. Low haemoglobin values may be due to nutritional deficiency, blood loss, renal failure etc. Higher values are often due to dehydration, smoking , high altitudes , hypoxia etc.			
PCV (Packed Cell Volume) / Haematocrit (EDTA Blood/Derived)	46.1	%	42 - 52
RBC Count (EDTA Blood/Automated Blood cell Counter)	5.11	mill/cu.mm	4.7 - 6.0
MCV (Mean Corpuscular Volume) (EDTA Blood/Derived from Impedance)	90.0	fL	78 - 100
MCH (Mean Corpuscular Haemoglobin) (EDTA Blood/Derived)	31.3	pg	27 - 32
MCHC (Mean Corpuscular Haemoglobin concentration) (EDTA Blood/Derived)	34.7	g/dL	32 - 36
RDW-CV (Derived)	13.6	%	11.5 - 16.0
RDW-SD (Derived)	42.84	fL	39 - 46
Total WBC Count (TC) (EDTA Blood/Derived from Impedance)	7130	cells/cu.mm	4000 - 11000
Neutrophils (Blood/Impedance Variation & Flow Cytometry)	56	%	40 - 75
Lymphocytes (Blood/Impedance Variation & Flow Cytometry)	34	%	20 - 45

  
Dr Shouree K.R  
MBBS MD DNB  
Consultant Pathologist  
Reg No : KMC 103138


APPROVED BY

Name : Mr. SATHYA NARAYAN KUMAR  
PID No. : MED111193476  
SID No. : 712220912  
Age / Sex : 39 Year(s) / Male  
Type : OP  
Ref. Dr : MediWheel

Register On : 09/07/2022 11:11 AM  
Collection On : 09/07/2022 11:41 AM  
Report On : 10/07/2022 11:51 AM  
Printed On : 12/07/2022 5:56 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Eosinophils (Blood/Impedance Variation & Flow Cytometry)	03	%	01 - 06
Monocytes (Blood/Impedance Variation & Flow Cytometry)	07	%	01 - 10
Basophils (Blood/Impedance Variation & Flow Cytometry)	00	%	00 - 02
Absolute Neutrophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	3.99	10 <sup>3</sup> / µl	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	2.42	10 <sup>3</sup> / µl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	0.21	10 <sup>3</sup> / µl	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.50	10 <sup>3</sup> / µl	< 1.0
Absolute Basophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.00	10 <sup>3</sup> / µl	< 0.2
Platelet Count (EDTA Blood/Derived from Impedance)	<b>132</b>	10 <sup>3</sup> / µl	150 - 450
<b>Remark:</b> Kindly correlate clinically.			
MPV (Blood/Derived)	<b>15.0</b>	fL	7.9 - 13.7
PCT	<b>0.20</b>	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citratd Blood/Automated ESR analyser)	06	mm/hr	< 15

  
Dr Shouree K.R  
MBBS MD DNB  
Consultant Pathologist  
Reg No : KMC 103138

APPROVED BY

**Name** : Mr. SATHYA NARAYAN  
KUMAR  
**PID No.** : MED111193476  
**SID No.** : 712220912  
**Age / Sex** : 39 Year(s) / Male  
**Type** : OP  
**Ref. Dr** : MediWheel

**Register On** : 09/07/2022 11:11 AM  
**Collection On** : 09/07/2022 11:41 AM  
**Report On** : 10/07/2022 11:51 AM  
**Printed On** : 12/07/2022 5:56 PM





Name : Mr. SATHYA NARAYAN KUMAR  
PID No. : MED111193476  
SID No. : 712220912  
Age / Sex : 39 Year(s) / Male  
Type : OP  
Ref. Dr : MediWheel

Register On : 09/07/2022 11:11 AM  
Collection On : 09/07/2022 11:41 AM  
Report On : 10/07/2022 11:51 AM  
Printed On : 12/07/2022 5:56 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b><u>Lipid Profile</u></b>			
Cholesterol Total (Serum/Oxidase / Peroxidase method)	165	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/Glycerol phosphate oxidase / peroxidase)	49	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)	70	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	85.2	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	9.8	mg/dL	< 30

A. RAJESH  
BIOCHEMIST

VERIFIED BY

Dr Shouree K.R  
MBBS MD DNB  
Consultant Pathologist  
Reg No : KMC 103138

APPROVED BY

Name : Mr. SATHYA NARAYAN KUMAR  
PID No. : MED111193476  
SID No. : 712220912  
Age / Sex : 39 Year(s) / Male  
Type : OP  
Ref. Dr : MediWheel

Register On : 09/07/2022 11:11 AM  
Collection On : 09/07/2022 11:41 AM  
Report On : 10/07/2022 11:51 AM  
Printed On : 12/07/2022 5:56 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Non HDL Cholesterol (Serum/Calculated)	95.0	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.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	2.4		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)	0.7		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	1.2		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0



A. RAJESH  
BIOCHEMIST

VERIFIED BY



Dr Shouree K.R  
MBBS MD DNB  
Consultant Pathologist  
Reg No : KMC 103138

APPROVED BY



Name : Mr. SATHYA NARAYAN KUMAR  
PID No. : MED111193476  
SID No. : 712220912  
Age / Sex : 39 Year(s) / Male  
Type : OP  
Ref. Dr : MediWheel

Register On : 09/07/2022 11:11 AM  
Collection On : 09/07/2022 11:41 AM  
Report On : 10/07/2022 11:51 AM  
Printed On : 12/07/2022 5:56 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b><u>Glycosylated Haemoglobin (HbA1c)</u></b>			
HbA1C (Whole Blood/HPLC)	5.3	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

**INTERPRETATION:** If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

Estimated Average Glucose 105.41 mg/dL  
(Whole Blood)

**INTERPRETATION: Comments**

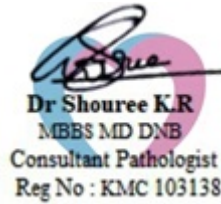
HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycaemic control as compared to blood and urinary glucose determinations.

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.



VERIFIED BY



APPROVED BY



Name : Mr. SATHYA NARAYAN KUMAR  
PID No. : MED111193476  
SID No. : 712220912  
Age / Sex : 39 Year(s) / Male  
Type : OP  
Ref. Dr : MediWheel

Register On : 09/07/2022 11:11 AM  
Collection On : 09/07/2022 11:41 AM  
Report On : 10/07/2022 11:51 AM  
Printed On : 12/07/2022 5:56 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

## CLINICAL PATHOLOGY

### PHYSICAL EXAMINATION

Colour (Urine/Physical examination)	Pale yellow		Yellow to Amber
Volume (Urine/Physical examination)	30		ml
Appearance (Urine)	Clear		

### CHEMICAL EXAMINATION

pH (Urine)	6.0		4.5 - 8.0
Specific Gravity (Urine/Dip Stick ~ Reagent strip method)	1.020		1.002 - 1.035
Protein (Urine/Dip Stick ~ Reagent strip method)	Negative		Negative
Glucose (Urine)	Nil		Nil
Ketone (Urine/Dip Stick ~ Reagent strip method)	Nil		Nil
Leukocytes (Urine)	Negative	leuco/uL	Negative
Nitrite (Urine/Dip Stick ~ Reagent strip method)	Nil		Nil
Bilirubin (Urine)	Negative	mg/dL	Negative

Mr. S. Mohan Kumar  
Sr. Lab Technician

VERIFIED BY

Dr. Shouree K.R.  
MBBS MD DNB  
Consultant Pathologist  
Reg No : KMC 103138

APPROVED BY

Name : Mr. SATHYA NARAYAN KUMAR  
PID No. : MED111193476  
SID No. : 712220912  
Age / Sex : 39 Year(s) / Male  
Type : OP  
Ref. Dr : MediWheel

Register On : 09/07/2022 11:11 AM  
Collection On : 09/07/2022 11:41 AM  
Report On : 10/07/2022 11:51 AM  
Printed On : 12/07/2022 5:56 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Blood (Urine)	Nil		Nil
Urobilinogen (Urine/Dip Stick - Reagent strip method)	Normal		Within normal limits
<b><u>Urine Microscopy Pictures</u></b>			
RBCs (Urine/Microscopy)	Nil	/hpf	NIL
Pus Cells (Urine/Microscopy)	3-4	/hpf	< 5
Epithelial Cells (Urine/Microscopy)	2-3	/hpf	No ranges
Others (Urine)	Nil		Nil

Mr. S. Mohan Kumar  
Sr. Lab Technician

VERIFIED BY

Dr. Shouree K.R.  
MBBS MD DNB  
Consultant Pathologist  
Reg No : KMC 103138

APPROVED BY

Name : Mr. SATHYA NARAYAN KUMAR  
PID No. : MED111193476  
SID No. : 712220912  
Age / Sex : 39 Year(s) / Male  
Type : OP  
Ref. Dr : MediWheel

Register On : 09/07/2022 11:11 AM  
Collection On : 09/07/2022 11:41 AM  
Report On : 10/07/2022 11:51 AM  
Printed On : 12/07/2022 5:56 PM



---

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

**IMMUNOHAEMATOLOGY**

BLOOD GROUPING AND Rh TYPING  
(EDTA Blood/Agglutination)

'A' 'Positive'

**Remark:** Test to be confirmed by Gel Method

Dr Shouree K.R  
MBBS MD DNB  
Consultant Pathologist  
Reg No : KMC 103138

APPROVED BY

Name : Mr. SATHYA NARAYAN KUMAR  
PID No. : MED111193476  
SID No. : 712220912  
Age / Sex : 39 Year(s) / Male  
Type : OP  
Ref. Dr : MediWheel

Register On : 09/07/2022 11:11 AM  
Collection On : 09/07/2022 11:41 AM  
Report On : 10/07/2022 11:51 AM  
Printed On : 12/07/2022 5:56 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

## BIOCHEMISTRY

BUN / Creatinine Ratio	10.3		6.0 - 22
Glucose Fasting (FBS) (Plasma - F/GOD- POD)	<b>100</b>	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.

**Remark:** Kindly correlate clinically.

Urine sugar, Fasting (Urine - F)	Nil		Nil
Glucose Postprandial (PPBS) (Plasma - PP/GOD - POD)	<b>164</b>	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.

**Remark:** Kindly correlate clinically.

Urine Sugar (PP-2 hours) (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	12.4	mg/dL	7.0 - 21
Creatinine (Serum/Jaffe Kinetic)	1.2	mg/dL	0.9 - 1.3

**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.

A. RAJESH  
BIOCHEMIST

VERIFIED BY

Dr Shouree K.R  
MBBS MD DNB  
Consultant Pathologist  
Reg No : KMC 103138

APPROVED BY

Name : Mr. SATHYA NARAYAN KUMAR  
PID No. : MED111193476  
SID No. : 712220912  
Age / Sex : 39 Year(s) / Male  
Type : OP  
Ref. Dr : MediWheel

Register On : 09/07/2022 11:11 AM  
Collection On : 09/07/2022 11:41 AM  
Report On : 10/07/2022 11:51 AM  
Printed On : 12/07/2022 5:56 PM



---

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Uric Acid (Serum/Uricase/Peroxidase)	8.4	mg/dL	3.5 - 7.2

Remark: Kindly correlate clinically.

A. RAJESH  
BIOCHEMIST

VERIFIED BY

Dr Shouree K.R  
MBBS MD DNB  
Consultant Pathologist  
Reg No : KMC 103138

APPROVED BY

Name : Mr. SATHYA NARAYAN KUMAR  
PID No. : MED111193476  
SID No. : 712220912  
Age / Sex : 39 Year(s) / Male  
Type : OP  
Ref. Dr : MediWheel

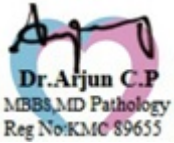
Register On : 09/07/2022 11:11 AM  
Collection On : 09/07/2022 11:41 AM  
Report On : 10/07/2022 11:51 AM  
Printed On : 12/07/2022 5:56 PM



---

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b><u>IMMUNOASSAY</u></b>			
Prostate specific antigen - Total(PSA) (Serum/ <i>Manometric method</i> )	0.148	ng/ml	Normal: 0.0 - 4.0 Inflammatory & Non Malignant conditions of Prostate & genitourinary system: 4.01 - 10.0 Suspicious of Malignant disease of Prostate: > 10.0

**INTERPRETATION:REMARK** : PSA alone should not be used as an absolute indicator of malignancy.



VERIFIED BY



APPROVED BY

-- End of Report --



Name	SATHYA NARAYAN KUMAR	ID	MED111193476
Age & Gender	39Y/M	Visit Date	Jul 9 2022 11:11AM
Ref Doctor	MediWheel		

**X – RAY CHEST PA VIEW**

**LUNGS:**

Both lung fields are clear.

Vascular markings are normal.

Tracheal air lucency is normal.

No evidence of abnormal hilar opacities.

Costophrenic angle recesses are normal.

**CARDIA:**

Cardia is normal shape and configuration.

Diaphragm, Thoracic cage, soft tissues are normal.

**IMPRESSION:**

- **NO SIGNIFICANT DIAGNOSTIC ABNORMALITY.**



**DR. MOHAN. B**  
(DMRD, DNB, EDIR, FELLOW IN CARDIAC  
MRI)  
CONSULTANT RADIOLOGIST