PID No.
 : MED122512531
 Register On
 : 16/03/2024 8:43 AM

 SID No.
 : 522404436
 Collection On
 : 16/03/2024 10:09 AM

 Age / Sex
 : 58 Year(s) / Male
 Report On
 : 16/03/2024 3:27 PM

 Type
 : OP
 Printed On
 : 19/03/2024 7:04 AM

Ref. Dr : MediWheel

<u>Investigation</u>	Observed Value	<u>Unit</u>	<u>Biological</u> <u>Reference Interval</u>
BLOOD GROUPING AND Rh TYPING	'B' 'Positive'		
(EDTA Blood/Agglutination)			
INTERPRETATION: Note: Slide method is scree	ening method. Kind	ly confirm with Tube method for	transfusion.
Complete Blood Count With - ESR			
Haemoglobin (EDTA Blood'Spectrophotometry)	13.8	g/dL	13.5 - 18.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood)	42.4	%	42 - 52
RBC Count (EDTA Blood)	4.68	mill/cu.mm	4.7 - 6.0
Mean Corpuscular Volume(MCV) (EDTA Blood)	90.5	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood)	29.5	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood)	32.6	g/dL	32 - 36
RDW-CV	13.9	%	11.5 - 16.0
RDW-SD	44.2	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood)	6100	cells/cu.mm	4000 - 11000
Neutrophils (Blood)	55.4	%	40 - 75
Lymphocytes (Blood)	34.6	%	20 - 45
Eosinophils (Blood)	0.8	%	01 - 06
Monocytes	8.6	%	01 - 10





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(Blood)

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Investigation	Observed <u>Value</u>	<u>Unit</u>	<u>Biological</u> <u>Reference Interval</u>
Basophils (Blood)	0.6	%	00 - 02
INTERPRETATION: Tests done on Automated I	Five Part cell count	er. All abnormal results	are reviewed and confirmed microscopically.
Absolute Neutrophil count (EDTA Blood)	3.4	10^3 / μ1	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood)	2.1	10^3 / μl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood)	0.0	10^3 / μl	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood)	0.5	10^3 / μl	< 1.0
Absolute Basophil count (EDTA Blood)	0.0	10^3 / μ1	< 0.2
Platelet Count (EDTA Blood)	276	10^3 / μ1	150 - 450
MPV (Blood)	8.9	fL	7.9 - 13.7
PCT (Automated Blood cell Counter)	0.246	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citrated Blood)	21	mm/hr	< 20
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	91.14	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)	75.25	mg/dL	70 - 140





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Ref. Dr : MediWheel

Investigation	<u>Observed</u>	<u>Unit</u>	<u>Biological</u>
	<u>Value</u>		Reference Interval
INTERPRETATION:			
Factors such as type, quantity and time of food	ntake, Physical activity	y, Psychologic	al stress, and drugs can influence blood glucose level.
Fasting blood glucose level may be higher than	Postprandial glucose, l	because of phy	siological surge in Postprandial Insulin secretion, Insulin
resistance, Exercise or Stress, Dawn Phenomen	on, Somogyi Phenomer	non, Anti- dial	petic medication during treatment for Diabetes.

Blood Urea Nitrogen (BUN) 7.7 mg/dL (Serum/*Urease UV* / *derived*)

Creatinine 0.81 mg/dL 0.9 - 1.3

(Serum/Modified Jaffe)

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-acetylcyteine , chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Enzymatic)	5.09	mg/dL	3.5 - 7.2
Liver Function Test			
Bilirubin(Total) (Serum/DCA with ATCS)	0.89	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.45	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.44	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	29.57	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	62.87	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	47.69	U/L	< 55
Alkaline Phosphatase (SAP) (Serum/Modified IFCC)	93.0	U/L	56 - 119
Total Protein (Serum/Biuret)	7.01	gm/dl	6.0 - 8.0





7.0 - 21

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Investigation	<u>Observed</u> <u>Value</u>	<u>Unit</u>	<u>Biological</u> <u>Reference Interval</u>
Albumin (Serum/Bromocresol green)	4.17	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.84	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.47		1.1 - 2.2
<u>Lipid Profile</u>			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	195.30	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	114.45	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 õusualö circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immunoinhibition)	36.99	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	135.4	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	22.9	mg/dL	< 30





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Investigation	<u>Observed</u> <u>Value</u>	<u>Unit</u>	<u>Biological</u> <u>Reference Interval</u>
Non HDL Cholesterol (Serum/Calculated)	158.3	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)	5.3	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)	3.1	Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	3.7	Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0

Glycosylated Haemoglobin (HbA1c)

HbA1C (Whole Blood/HPLC) 6.0 % Normal: 4.5 - 5.6 (Whole Blood/HPLC) 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 125.5 mg/dL

(Whole Blood)





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Investigation Observed Unit Biological Value Reference Interval

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 glycemic 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 HbAlC 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.

Prostate specific antigen - Total(PSA)

0.655

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

THYROID PROFILE / TFT

(Serum/Manometric method)

T3 (Triiodothyronine) - Total 1.23 ng/ml 0.4 - 1.81

(Serum/ECLIA)

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 7.04 $\mu g/dl$ 4.2 - 12.0

(Serum/ECLIA)

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) 10.34 μIU/mL 0.35 - 5.50

(Serum/ECLIA)





The results pertain to sample tested.

Page 6 of 10

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

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&lt 0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

PHYSICAL EXAMINATION (URINE COMPLETE)

Colour (Urine)	Yellow	Yellow to Amber
Appearance (Urine)	Clear	Clear
Volume(CLU) (Urine)	20	
<u>CHEMICAL EXAMINATION (UR COMPLETE)</u>	<u>PINE</u>	
pH (Urine)	5	4.5 - 8.0
Specific Gravity (Urine)	1.025	1.002 - 1.035
Ketone (Urine)	Negative	Negative
Urobilinogen (Urine)	Normal	Normal
Blood (Urine)	Negative	Negative
Nitrite (Urine)	Negative	Negative





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Crystals

(Urine)

Investigation	<u>Observed</u> <u>Value</u>	<u>Unit</u>	<u>Biological</u> <u>Reference Interval</u>
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)	0-1	/hpf	NIL
Epithelial Cells (Urine)	0-1	/hpf	NIL
RBCs (Urine)	NIL	/hpf	NIL
Others (Urine)	NIL		
INTERPRETATION: Note: Done with Autoreviewed and confirmed microscopically.	omated Urine Analyser &	& Automated urine sed	limentation analyser. All abnormal reports are
Casts (Urine)	NIL	/hpf	NIL

NIL



/hpf



NIL

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InvestigationObserved ValueUnit ValueBiological Reference IntervalBUN / Creatinine Ratio9.56.0 - 22.0





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InvestigationObservedUnitBiologicalValueReference Interval

URINE ROUTINE





-- End of Report --

Name	MR.SATHEESHA T M	ID	MED122512531
Age & Gender	58Y/MALE	Visit Date	16 Mar 2024
Ref Doctor Name	MediWheel	-	

ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in shape, size and has uniform echopattern. 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. 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.

KIDNEYS

Right kidney: Normal in shape, size and echopattern. Cortico-medullary differentiation is well madeout. No evidence of calculus or hydronephrosis.

Left kidney: Normal in shape, size and echopattern. Cortico-medullary differentiation is well madeout. No evidence of calculus or hydronephrosis.

The kidney measures as follows:

1110 1110110 11100000100 000 10110 1151			
	Bipolar length (cms)	Parenchymal thickness (cms)	
Right Kidney	11.0	1.5	
Left Kidney	10.7	2.2	

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

PROSTATE shows normal shape, size and echopattern.

No evidence of ascites.

IMPRESSION:

• No significant abnormality detected.

DR. SHWETHA S CONSULTANT RADIOLOGIST Sw/Mi

Name	MR.SATHEESHA T M	ID	MED122512531
Age & Gender	58Y/MALE	Visit Date	16 Mar 2024
Ref Doctor Name	MediWheel		

Name	MR.SATHEESHA T M	ID	MED122512531
Age & Gender	58Y/MALE	Visit Date	16 Mar 2024
Ref Doctor Name	MediWheel		

2D ECHOCARDIOGRAPHIC STUDY

M-mode measurement:

AORTA 3.02 cms. LEFT ATRIUM 2.78 cms. **AVS** 1.47 cms. LEFT VENTRICLE (DIASTOLE) 3.81 cms. (SYSTOLE) 2.57 cms. **VENTRICULAR SEPTUM** (DIASTOLE) 1.13 cms. (SYSTOLE) 1.34 cms. POSTERIOR WALL (DIASTOLE) 1.03 cms. (SYSTOLE) 1.34 cms. **EDV** 62 ml. **ESV** 23 ml. FRACTIONAL SHORTENING 32 % **EJECTION FRACTION** 60 % **** **EPSS** cms. **RVID** 1.80 cms.

DOPPLER MEASUREMENTS:

MITRAL VALVE: E - 1.0 m/s A - 0.8 m/s NO MR.

AORTIC VALVE: 1.1 m/s NO AR.

TRICUSPID VALVE: E - 0.5 m/s A - 0.4 m/s NO TR.

PULMONARY VALVE: 0.8 m/s NO PR.

Name	MR.SATHEESHA T M	ID	MED122512531
Age & Gender	58Y/MALE	Visit Date	16 Mar 2024
Ref Doctor Name	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.
- GRADE I DIASTOLIC DYSFUNCTION.
- NORMAL LV SYSTOLIC FUNCTION. EF: 60 %.
- NO REGIONAL WALL MOTION ABNORMALITIES.
- NORMAL VALVES.
- NO CLOTS / PERICARDIAL EFFUSION / VEGETATION.

DR. YASHODA RAVI CONSULTANT CARDIOLOGIST

Name	MR.SATHEESHA T M	ID	MED122512531
Age & Gender	58Y/MALE	Visit Date	16 Mar 2024
Ref Doctor Name	MediWheel		

Name	Mr. SATHEESHA T M	Customer ID	MED122512531
Age & Gender	58Y/M	Visit Date	Mar 16 2024 8:43AM
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. TRISHUL SHETTY
CONSULTANT RADIOLOGIST

Regn. No. 4364A

Mob: 98454 91190

98450 06782

MARUTHI DENTAL CARE

144, 11th Cross, Malleshwaram, Bengaluru - 560 003

Dr. B. INDUMATHI MARUTHI

Timings: 11 a.m. to 1.30 p.m.

Dental Surgeon

5 p.m. to 8.30 p.m.

Patient Name Age: Age:

 P_{X}

of Carical abrarion



Age 58 m

Name Satheesha. T.M

OPTICAL STORE

#12 LAKSHMI NILAYA, GROUND FLOOR, 2ND MAIN ROAD, VYALIKAVAL, BENGALURU-560003 PH. 9611444957

Ph 9 2 42916756

RE/L	omplain E / D O V / Heada	/ / Blurring /	/ Burning / Ito	thing / Prick	king		
Past His				Asthama	-ve -N:1-		
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Distance	Щ	H.00	20.6	6 _	40.50	186	6/6
Near			700	12.00			
Advise .					ADIKU	MARIH	. L



Patient Name	Satheesha.	Date	16/3/24
Age	58425	Visit Number	522404436
Sex	Male	Corporate	Medi Ducel

GENERAL PHYSICAL EXAMINATION

Id	entifica	tion	Mark	· :
14	Cittinea	CIOIL	FAIGH	٠.

Height: 166 cms

Weight: 12 , kgs

Pulse: /minute

Blood Pressure : 190 10 mm of Hg

ВМІ

BMI INTERPRETATION

Underweight = <18.5

Normal weight = 18.5-24.9

Overweight = 25-29.9

Chest :

Expiration: cms

Inspiration: cms

Abdomen Measurement : cms

Eyes: 2 clinally Ears:

hroat : Neck nodes : N

RS: RIL NVBS(P) CVS: SCS D

A: Soft, BS() CNS: Conquious falut

No abnormality is detected (His) Her general physical examination is within normal limits.

NOTE : MEDICAL FIT FOR EMPLOYMENT YES / NO

Signature





