### **DEPARTMENT OF LABORATORY MEDICINE**

Patient Name : Mr Thallapaka Pavan KumarMRN : 10020001114136Gender/Age : MALE , 39y (06/07/1984)Collected On : 29/07/2023 08:28 AMReceived On : 29/07/2023 12:12 PMReported On : 29/07/2023 02:37 PMBarcode : 1B2307290011Specimen : Whole BloodConsultant : Dr. Priya S(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8792353917

### NARAYANA HRUDAYALAYA BLOOD CENTRE

Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group (Column Agglutination Technology)	0	-
RH Typing (Column Agglutination Technology)	Positive	-

R.L.

Dr. Prathip Kumar B R MBBS,MD, Immunohaematology & Blood Transfusion Consultant

### **CLINICAL PATHOLOGY**

Unit

\_

Result

Not Present

### Test

# Urine For Sugar (Post Prandial) (Enzyme

Method (GOD POD))

Dupunn

Dr. Deepak M B MD, PDF, Hematopathology Consultant

### **CLINICAL PATHOLOGY**

Result Unit

Page 1 of 7

### **Final Report**

Test

 Patient Name : Mr Thallapaka Pavan Kumar
 MRN : 10020001114136
 Gender/Age : MALE , 39y (06/07/1984)

 Urine For Sugar (Fasting) (Enzyme Method (GOD
 Not Present

 POD))

Henra S

Dr. Hema S MD, DNB, Pathology Associate Consultant

BIOCHEMISTRY			
Test	Result	Unit	Biological Reference Interval
<b>Fasting Blood Sugar (FBS)</b> (Colorimetric - Glucose Oxidase Peroxidase)	97	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020
Post Prandial Blood Sugar (PPBS) (Colorimetric - Glucose Oxidase Peroxidase)	99	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020
HBA1C			
HbA1c (HPLC NGSP Certified)	5.9 H	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020
Estimated Average Glucose (Calculated)	122.64	-	-

Interpretation:

1. 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.

2. 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.

3. Any sample with >15% should be suspected of having a haemoglobin variant.

### **SERUM CREATININE**

Serum Creatinine (Two Point Rate - Creatinine	0.64 L	mg/dL	0.66-1.25
Aminohydrolase)			

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Patient Name: Mr Thallapaka Pavan Kumar MRN : 2	10020001114136	Gender/Age : MALE, 39	θγ (06/07/1984)
eGFR (Calculated)	139.3	mL/min/1.73m <sup>2</sup>	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodyamically unstable patients eGFR is not applicable for less than 18 years of age.
<b>Blood Urea Nitrogen (BUN)</b> (Endpoint /Colorimetric – Urease)	9	mg/dL	9.0-20.0
Serum Uric Acid (Colorimetric - Uricase, Peroxidase)	5.37	mg/dL	3.5-8.5
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	176	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
<b>Triglycerides</b> (Colorimetric - Lip/Glycerol Kinase)	114	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	34 L	mg/dL	40.0-60.0
Non-HDL Cholesterol (Calculated)	142.0 H	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
LDL Cholesterol (Colorimetric)	124 L	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	22.8	mg/dL	0.0-40.0
Cholesterol /HDL Ratio (Calculated)	5.2 H	-	0.0-5.0
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric -Diazo Method)	0.40	mg/dL	0.2-1.3
<b>Conjugated Bilirubin (Direct)</b> (Dual Wavelength - Reflectance Spectrophotometry)	0.00	mg/dL	0.0-0.3
Unconjugated Bilirubin (Indirect) (Calculated)	0.4	mg/dL	0.0-1.1
Total Protein (Colorimetric - Biuret Method)	7.20	gm/dL	6.3-8.2

Patient Name: Mr Thallapaka Pavan Kumar MRN : 2	10020001114136	Gender/Age : MALE , 39	9y (06/07/1984)
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.40	gm/dL	3.5-5.0
Serum Globulin (Calculated)	2.8	gm/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.58	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal- 5-phosphate))	64 H	U/L	17.0-59.0
<b>SGPT (ALT)</b> (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	45	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P- nitro Phenyl Phosphate, AMP Buffer)	119	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide ( Szasz Method))	14 L	U/L	15.0-73.0

### **Interpretation Notes**

Indirect Bilirubin result is a calculated parameter (Indirect Bilirubin = Total Bilirubin - Direct Bilirubin).
 Indirect bilirubin result includes the delta bilirubin fraction also. Delta Bilirubin is the bilirubin which is covalently bound to albumin.
 Delta Bilirubin is not expected to be present in healthy adults or neonates.

THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminesence)	1.33	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminesence)	8.30	μg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminesence)	3.199	μIU/mL	0.4-4.049

#### **Interpretation Notes**

• TSH levels are subjected to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy. Unbound fraction (Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration.

Patient Name : Mr Thallapaka Pavan Kumar MRN : 10020001114136 Gender/Age : MALE , 39y (06/07/1984)

Anushre

Dr. Anushre Prasad MBBS,MD, Biochemistry Consultant Biochemistry

Mrs. Latha B S MSc, Mphil, Biochemistry Incharge, Consultant Biochemistry

	HEMATOLOGY		
Test	Result	Unit	<b>Biological Reference Interval</b>
Erythrocyte Sedimentation Rate (ESR)	35 H	mm/1hr	0.0-10.0

(Westergren Method)

### **Interpretation Notes**

• ESR high - Infections, chronic disorders,, plasma cell dyscrasias. DISCLAIMER:All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert

Deepeun

Dr. Deepak M B MD, PDF, Hematopathology Consultant

### **HEMATOLOGY**

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	13.1	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	4.75	million/µl	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	39.5 L	%	40.0-50.0
MCV (Mean Corpuscular Volume) (Derived)	83.1	fL	83.0-101.0

Patient Name : Mr Thallapaka Pavan Kumar MRN :	10020001114136	Gender/Age : MALE , 3	9y (06/07/1984)
MCH (Mean Corpuscular Haemoglobin) (Calculated)	27.5	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.1	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	15.4 H	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	312	$10^3/\mu L$	150.0-450.0
Mean Platelet Volume (MPV)	7.4	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	5.9	$10^3/\mu L$	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCS Technology Plus Microscopy)	63.1	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	28.0	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	5.6	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	2.6	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.7	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	3.73	x10 <sup>3</sup> cells/µl	2.0-7.0
Absolute Lymphocyte Count (Calculated)	1.66	x10 <sup>3</sup> cells/µl	1.0-3.0
Absolute Monocyte Count (Calculated)	0.34	x10 <sup>3</sup> cells/µl	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.16	x10 <sup>3</sup> cells/µl	0.02-0.5
Absolute Basophil Count (Calculated)	0.05	-	-

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

### Interpretation Notes

 Haemoglobin, RBC Count and PCV: If below reference range, indicates Anemia. Further evaluation is suggested. RBC Indices aid in typing of anemia.
 WBC Count: If below reference range, susceptibility to infection.

### Patient Name : Mr Thallapaka Pavan Kumar MRN : 10020001114136 Gender/Age : MALE , 39y (06/07/1984)

If above reference range- Infection\*

If very high in lakhs-Leukemia

Neutrophils -If above reference range-acute infection, mostly bacterial

Lymphocytes -If above reference range-chronic infection/ viral infection

Monocytes -If above reference range- TB,Typhoid,UTI

Eosinophils -If above reference range -Allergy,cough,Common cold,Asthma & worms

Basophils - If above reference range, Leukemia, allergy

Platelets: If below reference range- bleeding disorder, Dengue, drug- induced, malignancies

\* In bacterial infection with fever total WBC count increases.

Eg Tonsillitis, Sinusitis, Bronchitis, Pneumonia, Appendicitis, UTI -12000-25000 cells/cumm.

In typhoid and viral fever WBC may be normal.

DISCLAIMER: All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert.

### --End of Report-

Shahli

Dr. Shalini K S DCP, DNB, Pathology Consultant

### Note

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

Kindly correlate clinically.
 (Post Prandial Blood Sugar (PPBS), -> Auto Authorized)
 (Fasting Blood Sugar (FBS), -> Auto Authorized)
 (LFT, -> Auto Authorized)
 (, -> Auto Authorized)
 (Lipid Profile, -> Auto Authorized)
 (Uric Acid, -> Auto Authorized)
 (Blood Urea Nitrogen (Bun) -> Auto Authorized)





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### **DEPARTMENT OF LABORATORY MEDICINE**

Patient Name : Mr Thallapaka Pavan KumarMRN : 10020001114136Gender/Age : MALE , 39y (06/07/1984)Collected On : 29/07/2023 08:28 AMReceived On : 29/07/2023 12:12 PMReported On : 29/07/2023 01:21 PMBarcode : 032307290109Specimen : UrineConsultant : Dr. Priya S(FAMILY MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8792353917

	CLINICAL PAT	HOLOGY	
Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Colour	STRAW	-	-
Appearance	Clear	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (pH Indicator Method)	7.0	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.009	-	1.002 - 1.030
Protein (Automated Protein Error Or Ph Indicator)	Not Present	-	Not Present
Urine Glucose (Enzyme Method (GOD POD))	Not Present	-	Not Present
Ketone Bodies (Nitroprusside Method)	Not Present	-	Not Present
Bile Salts (Azo Coupling Method)	Not Present	-	Not Present
Bile Pigment (Bilirubin) (Azo Coupling Method)	Not Present	-	Not Present
Urobilinogen (Azo Coupling Method)	Normal	-	Normal
Urine Leucocyte Esterase (Measurement Of Leukocyte Esterase Activity)	Not Present	-	Not Present
Blood Urine (Peroxidase Reaction)	Not Present	-	Not Present
Nitrite (Gries Method)	Not Present	-	Not Present
MICROSCOPIC EXAMINATION			
Pus Cells	0.1	/hpf	0-5

Final Report

Patient Name : Mr Thallapaka Pavan Kumar	MRN : 10020001114136	Gender/Age : MALE ,	39y (06/07/1984)
RBC	0.0	/hpf	0-4
Epithelial Cells	0.2	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.00	/hpf	0-1
Bacteria	8.9	/hpf	0-200
Yeast Cells	0.0	/hpf	0-1
Mucus	Not Present	-	Not Present

### Interpretation Notes

• Since the analytical methodology of Urine Microscopy is Flow cytometry based and FDA approved the results of automated urine microscopy which includes RBCs, WBCs Epithelial cells etc are being reported in decimal fraction. Rounding off the value to nearest whole number is suggested.

--End of Report-

Dupen W.C.

Dr. Deepak M B MD, PDF, Hematopathology Consultant

### Note

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





Patient Name	MR.THALLAPAKA PAVAN KUMAR	Requested By	EHP
MRN	10020001114136	Procedure DateTime	29-07-2023 10:31
Age/Sex	39Y/Male	Hospital	NH-JAYANAGAR

### CHEST RADIOGRAPH (PA VIEW)

### **CLINICAL DETAILS:** For health checkup.

### FINDINGS:

- The lung fields and bronchovascular markings appear normal.
- 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:**

No significant abnormality detected.

Dr. Rahul G Ambi Senior Registrar

\* This is a digitally signed valid document. Reported Date/Time: 29-07-2023 12:42

This report has been generated from **NH Teleradiology 24/7**, a service of Narayana Health -- End of Report --Page 1 of 1

Appointments 1800-309-0309 (Toll Free)



AGE/SEX : 39YRS/MALE

DATE : 29.07.2023

Unit of Narayana Health

Jayanagar

# ADULT TRANS-THORACIC ECHO REPORT

NAME : MR.THALLAPAKA PAVAN KUMAR

# MRN NO : 10020001114136

### **FINAL DIAGNOSIS:**

- NORMAL CHAMBER DIMENSION
- NO RWMA
- NORMAL VALVES
- MILD-MR
- MILD-TR
- NORMAL PA PRESSURE
- NORMAL RV /LV FUNCTION
- LVEF-60 %

## MEASUREMENTS

AO: 29 MM	LVID (d) : 44 MM	IVS (d) : 10 MM	RA : 32 MM
LA: 36 MM	LVID(s) : 29 MM	PW (d) : 10 MM	RV : 28 MM
		AMANNA AMANNA	

EF: 60 %

### VALVES

MITRAL VALVE	: NORMAL
--------------	----------

AORTIC	VALVE	: NORMAL
		. NONWAL

TRICUSPID VALVE : NORMAL

PULMONARY VALVE : NORMAL

### **CHAMBERS**

- LEFT ATRIUM : NORMAL
- RIGHT ATRIUM : NORMAL

LEFT VENTRICLE : NORMAL, NORMAL LV FUNCTION

RIGHT VENTRICLE : NORMAL, TAPSE-19 MM, NORMAL RV FUNCTION

RVOT/LVOT : NORMAL

## Narayana Multispeciality Clinic

17/1, 30th Cross, 8th 'B' Main Road, 4th Block, Jayanagar, Bangalore - 560 011 Clinic No. : 8884000991, 9513919615, Pharmacy No. : 9513919615

# **SEPTAE**

IVS

IAS : INTACT

# **GREAT ARTERIES**

AORTA

: AORTIC ANNULUS-24 MM, LEFT ARCH

PULMONARY ARTERY : NORMAL

# DOPPLER DATA

MITRAL VALVE : E/A –0.8/0.5 M/S, MR-MILD

AORTIC VALVE : PG- 5 MMHG

TRICUSPID VALVE : TR-TRIVIAL, PASP- 27 MMHG

: INTACT

PULMONARY VALVE : PG- 3 MMHG

# WALL MOTION ABNORMALITIES: NO RWMA

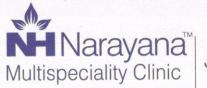
PERICARDIUM : NORMAL

VEGETATION/THROMBUS: ABSENT

# **OTHER FINDINGS**

IVC- 14 MM NORMAL SIZED, COLLAPSIBILITY >50%, RAP -3 MM SINUS RHYTHM/ HR- 94 BPM

**VISHALAKSHI H R** CARDIAC SONOGRAPHER



Age : 39Years Sex : Male	Referring Doctor		Date	: 29.07.2023
	Age	: 39Years	Sex	: Male

### ULTRASOUND ABDOMEN AND PELVIS

### FINDINGS:

Liver is normal in size and shows **Mild increased** echopattern. No intra or extra hepatic biliary duct dilatation.

Portal vein is normal in size, course and caliber. CBD is not dilated.

Gall bladder is normal without evidence of calculi, wall thickening or pericholecystic fluid.

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

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

**Right Kidney** is normal in size (measures 11.9 cm in length & 1.5 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 10.3 cm in length & 1.6 cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi . **Shows Mild Hydroureteronephrosis** 

Retroperitoneum - Obscured by bowel gas.

Urinary Bladder is well distended. Increased Wall thickness and measures 8mm. No evidence of calculi, mass or mural lesion.

Pre Void -278cc

Prostate is normal in echopattern and normal in size, measures 2.9x2.7x2.9cm Volume - 12cc.

Post Void-67cc

Fluid - There is no ascites or pleural effusion.

### **IMPRESSION:**

- Grade I Fatty Liver
- Left Kidney shows mild Hydroureteronephrosis
- Cystitis

Dr B S Ramkumar 35772 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.



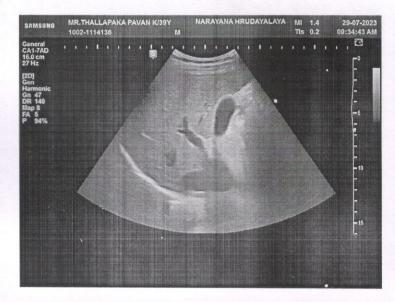
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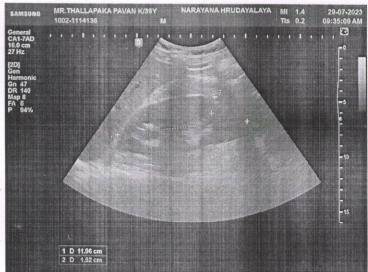
17/1, 30th Cross, 8th 'B' Main Road, 4th Block, Jayanagar, Bangalore - 560 011 Clinic No. : 8884000991, 9513919615, Pharmacy No. : 9513919615 **Image Report** 

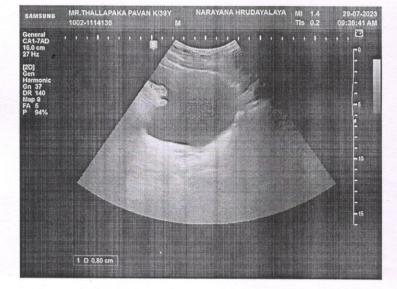


### 1002-1114136 MR.THALLAPAKA PAVAN K/39Y

Male



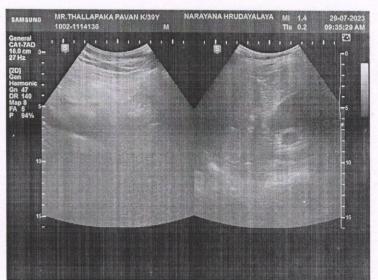


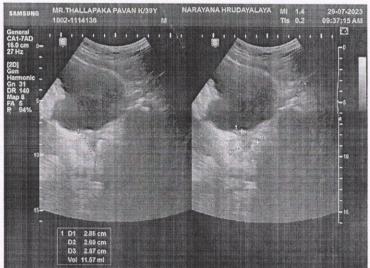


### Exam

Accession # Exam Date Description Operator







29-07-2023

