



MEDICOVER
HOSPITALS

A unit of Sahrudaya Health Care Srikakulam Pvt. Ltd.

NAME : S NARAYANA RAO

AGE / SEX : 43 Y/ MALE

Dr K MURALI KRISHNA

SKU1477

DATE : 27/07/2024

X-RAY CHEST PA

Trachea normal in position.


Cardiac size normal.

Both lung fields clear.

Bony rib cage normal.

Impression :

*** No significant abnormality seen.**


Dr. B. VENKATESH , MBBS MD DMRD
CONSULTANT RADIOLOGIST

01477

S.NARAYANA RAO 43
Male

27-Jul-24 10:52:03 AM

Rate 86 . Age not entered, assumed to be 50 years old for purpose of ECG interpretation
 . Sinus rhythm.....normal P axis, V-rate 50- 99
 PR 153 . Ventricular premature complex.....V complex w/ short R-R interval
 QRSD 97 . Baseline wander in lead(s) V1,V2,V3
 QT 348
 QTc 417

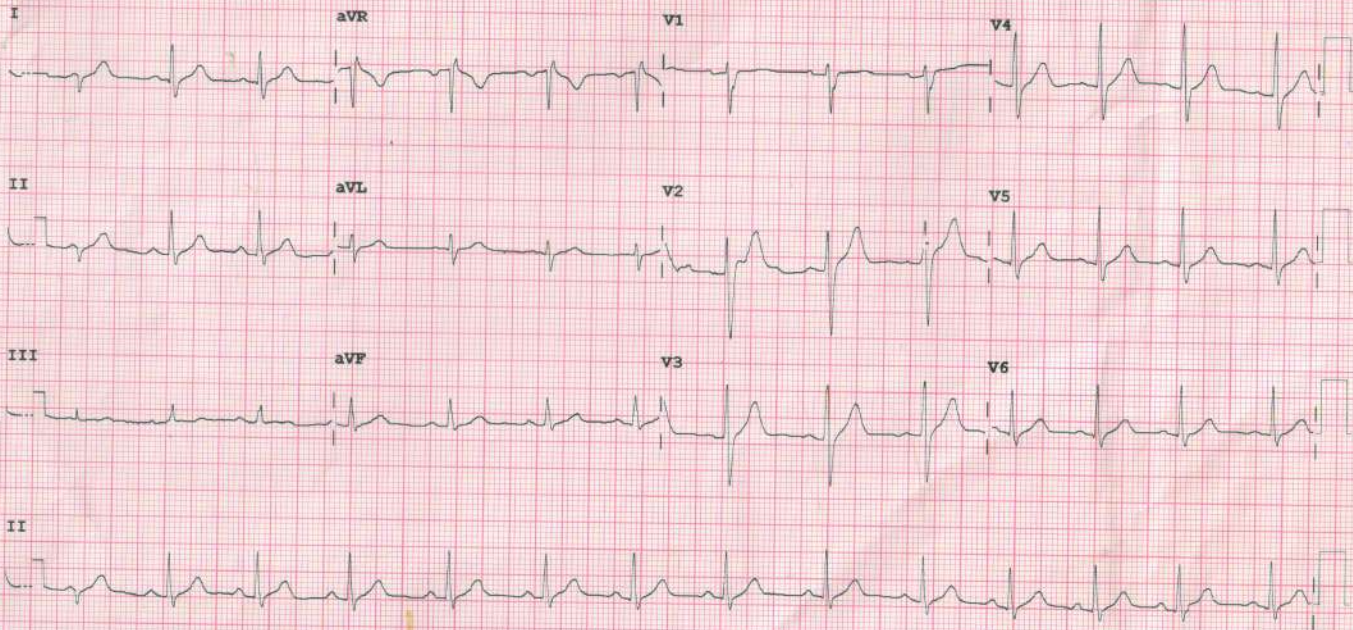
--AXIS--

P 53
QRS 68
T 33

- OTHERWISE NORMAL ECG -

12 Lead; Standard Placement

Unconfirmed Diagnosis



Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz

100B CL

P?

M 3708 A

162130



OUT PATIENT DEPARTMENT



A unit of Sahrudaya Health Care Srikakulam Pvt. Ltd.

Patient Name : Mr. SUBUDHI NARAYAN RAO	UMR No : 422407001477
Age/Gender : 43Years, 0Months / MALE	Bill No : HC422407001365
Mobile : 9090974749	Bill Dt. : 27-Jul-2024 Visit Type :
	Valid Upto:

Height	:	cms
Weight	:	kgs
BMI	:	kg/m2
TEMP	:	F
Pulse Rate	:	86 bmp
Resp.Rate	:	bmp
BP	:	110/80 mm / Hg
Pain Score	:	
Nutritional Status:		
SPO2	:	99 %
GRBS	:	mg/dl

*Came for General
check up.
Not a known Diabetic.*

Rx :

Inv
HbA1c - 8.6 %
FBS - 123 } mg/dl
PPBS - 99

? Denovo T2DM

At
- Repeat FBS } Review & Reports.
PPBS }
- Avoid Excessive Carb diet & Fat.



SANKAR FOUNDATION EYE HOSPITAL AND INSTITUTE

Païdi Srinivasa Complex
Kushalapuram, Venkatapuram Village
Near Simhadwaram
Srikakulam-532410

Prescription

Patient ID	528119	Visit Date	27/Jul/2024
Patient Name	MR. S. NARAYANARAO	Age/Sex	41 yrs / M
Payor Name	WALK IN	Contact No.	9090974749
Patient Address	GUNUPUR, TR SAHI, RAYAGADA, ODISHA.		

Present Complaints

GENERAL CHECK UP.

Systemic Disease History

H/o NO

Vision	Distance Vision		Near Vision	
	Right Eye	Left Eye	Right Eye	Left Eye
Unaided	6/9P	6/9P		
With Pinhole	6/9	6/9		

Method (IOP)	IOP Time	IOP (RE)	IOP (LE)	Corrected IOP(RE)	Corrected IOP(LE)	CCT (RE)	CCT (LE)
NCT	02:29	12	13				

Examination Details

Adnexa :- normal in both eyes

Conjunctiva :- normal in both eyes

Cornea :- clear in right eye, CLEAR in left eye

Anterior Chamber :- ND in both eyes

Iris :- NCP in both eyes

Pupil :- NSRL in both eyes

Lens :- clear in both eyes

Fundus :- CDR:0.7, INFERIOR THINNING+, FR+, VESSELS NORMAL in both eyes

IOP (GAT) :- 18 mmHg in both eyes

Diagnosis

Presbyopia [H524] in Both Eyes

Disc Suspect (Glaucoma) in Both Eyes

Rx

1. LUBISTAR 0.5% EYE DROPS 10ML [CARBOXYMETHYL CELLULOSE EYE DROPS 0.5% 10ML]

one drop Instill One drop for 3 Times a Day (9 AM , 2PM, 8PM) in both eyes (*OLD DATA*)

Plan of Care :

CSG

Next Review SOS.

Doctor's Signature

Dr M Rajashekar Reddy
MBBS, MS(OPHTHAL)
APMC/FMR/129150



ECHO CARDIOGRAPHIC REPORT



Name : S. Nanayana rao

Age : 43

Sex : M

UMR No.: 01477

IP No. :

DATE : 27/7/2024

DIAGNOSIS

ECHO NO.:

REF BY :

DONE BY :

MITRAL VALVE : |

AORTIC VALVE : |

PULMONARY VALVE : | (N)

TRICUSPID VALVE : |

LEFT ATRIUM : 3.4cm

LEFT VENTRICLE : EDD: 4.4 EDV EF 64% MS (D) 1.2cm

ESD: 2.9 ESV %FS PW (D) 1.2cm

RIGHT ATRIUM : |

RIGHT VENTRICLE : | (P)

AORTA : 2.8cm

PULMONARY ARTERY : | (P)

AJV: 1.20m/sec

I.A.S 1.5us

: Intact

PJV: 0.80m/sec

SVC / IVC / CS : | (P)

RVSP: 20mmHg

PERICARDIUM : | (P)

MUF: E7A

DOPPLER STUDY : Mild concentric LVH

No RWMA

Normal LV systolic function

Mild AR

Reduced LV compliance

No PE Novalv Novegetation

CONCLUSIONS

SIGNATURE

LABORATORY REPORT : BIOCHEMISTRY

Name	: Mr. SUBUDHI NARAYAN RAO	Age /Sex	: 43Y Y(s)/MALE
Bill Date	: 27-Jul-2024 09:10 AM	UMR No.	: 422407001477
Rec. Dt	: 27-Jul-2024 09:56 AM	Bill No.	: MCB42240702333
Rept. Dt	: 27-Jul-2024 11:37 AM	Result No	: RKM240705995
Ref By	: Dr. Kadali Murali Krishna	Sample ID	: MCSKM3005351
Sample Type	: SERUM		

T3,T4 AND TSH

<u>Parameters</u>	<u>Result</u>	<u>Biological Reference Interval</u>	<u>Units</u>
T3 ECLIA	1.21	0.8 - 2.0	ng/mL
T4 ECLIA	6.48	5.1 - 14.1	ug/dL
TSH(THYROID STIMULATING HORMONE) ECLIA	1.72	0.270 - 4.20	uIU/mL

*** End Of Report ***

Suggested Clinical Correlation * If necessary, Please discuss



Dr. KONAPALA SUDHEER
MBBS, DCP, DNB (PATHOLOGY)
CONSULTANT PATHOLOGIST

LABORATORY REPORT : BLOOD BANK

Name	: Mr. SUBUDHI NARAYAN RAO	Age /Sex	: 43Y Y(s)/MALE
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Rec. Dt	: 27-Jul-2024 09:56 AM	Bill No.	: MCB42240702333
Rept. Dt	: 27-Jul-2024 10:37 AM	Result No	: RKM240706002
Ref By	: Dr. Kadali Murali Krishna	Sample ID	: MCSKM3005352
Sample Type	: WHOLE BLOOD		

BLOOD GROUPING AND RH


<u>Parameters</u>	<u>Result</u>	<u>Biological Reference Interval</u>	<u>Units</u>
BLOOD GROUP <i>Automated microcolumn gel method</i>	O		
RH TYPE	POSITIVE		

INTERPRETATION

1. If Rh is Du positive it is best considered as Rh negative as recipient and Rh positive as donor. Proper Cross matching is recommended before transfusion.
2. In case of forward and reverse grouping discrepancy, clinical correlation and repeat sample analysis is recommended.
3. For Infants below 6 months only forward grouping is performed.
4. A sub-grouping is recommended after the age of 6 months.

*** End Of Report ***

Suggested Clinical Correlation * If necessary, Please discuss


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LABORATORY REPORT : BIOCHEMISTRY

Name	: Mr. SUBUDHI NARAYAN RAO	Age /Sex	: 43Y Y(s)/MALE
Bill Date	: 27-Jul-2024 12:10 PM	UMR No.	: 422407001477
Rec. Dt	: 27-Jul-2024 01:29 PM	Bill No.	: MCB42240702398
Rept. Dt	:	Result No	: RKM240706186
Ref By	: No Update	Sample ID	: MCSKM3005452
Sample Type	:		

POST PRANDIAL PLASMA / SERUM GLUCOSE (PPBS)

<u>Parameters</u>	<u>Result</u>	<u>Biological Reference Interval</u>	<u>Units</u>
POST LUNCH BLOOD GLUCOSE <i>Hexokinase</i>	<u>99</u>	Normal Range : <140 Impaired Glucose Tolerance : 140 -199 Diabetes Mellitus: >=200	mg/dL

INTERPRETATION

Discordant Values of Glucose : The discordant post prandial and post lunch blood glucose levels are observed in some of the conditions related to defective absorption, insufficient dietary intake, endocrine disorders, hypoglycemic drug overdose and reactive hypoglycemia etc

*** End Of Report ***

Suggested Clinical Correlation * If necessary, Please discuss

DRAFT

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Rept. Dt	: 27-Jul-2024 11:37 AM	Result No	: RKM240705992
Ref By	: Dr. Kadali Murali Krishna	Sample ID	: MCSKM3005351
Sample Type	: SERUM		

SERUM URIC ACID

<u>Parameters</u>	<u>Result</u>	<u>Biological Reference Interval</u>	<u>Units</u>
SERUM URIC ACID <i>uricase</i>	4.5	3.4-7.0	mg/dL

*** End Of Report ***

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Ref By	: Dr. Kadali Murali Krishna	Sample ID	: MCSKM3005351
Sample Type	: SERUM		

SERUM CREATININE

<u>Parameters</u>	<u>Result</u>	<u>Biological Reference Interval</u>	<u>Units</u>
CREATININE <i>Jaffe</i>	0.83	0.7 - 1.2	mg/dL

*** End Of Report ***

Suggested Clinical Correlation * If necessary, Please discuss

H. S. Chaudhary

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LABORATORY REPORT : BIOCHEMISTRY

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Sample Type	: SERUM		

PSA (PROSTATE SPECIFIC ANTIGEN).

<u>Parameters</u>	<u>Result</u>	<u>Biological Reference Interval</u>	<u>Units</u>
PROSTATE SPECIFIC ANTIGEN (PSA) ECLIA	0.356	0-4.0	ng/mL

*** End Of Report ***

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Ref By : Dr. Kadali Murali Krishna	Sample ID : MCSKM3005351
Sample Type : SERUM	

LIPID PROFILE

<u>Parameters</u>	<u>Result</u>	<u>Biological Reference Interval</u>	<u>Units</u>
TOTAL CHOLESTEROL <i>Enzymatic colorimetric</i>	210.9 *	Desirable :: < 200 mg/dL Borderline High :: 200 - 239 mg/dL High risk : > 240 mg/dL	mg/dL
HDL CHOLESTEROL <i>Homogeneous enzymatic colorimetric</i>	30.0	Low :: < 40 mg/dL High :: > 60 mg/dL	mg/dL
LDL CHOLESTEROL <i>Direct-Enzymatic colorimetric</i>	140 * ↑	Very High : - > 190 mg/dL Optimal : - < 100 mg/dL Near Optimal : 100 - 129 mg/dL High : 160 - 189 mg/dL	mg/dL
VLDL <i>Calculation</i>	40.04 * ↑	Borderline High: 130-159 mg/dl 2 - 30 mg/dL	mg/dL
SERUM TRYGLYCERIDES <i>Enzymatic colorimetric</i>	200.2 * ↑	< 150 mg/dL Borderline High : 150 - 199 mg/dL High : 200 - 499 mg/dL	mg/dL
CHO/HDL RATIO <i>Calculation</i>	7.03 *	Normal : - < 3.5 High Risk : - > 5.0	

*** End Of Report ***

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(Handwritten Signature)

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