



ADAMBAKKAM

# SUDAR HOSPITALS

(A Unit of SSB Health Care)

No. 3, Medavakkam Main Road, Adambakkam, Chennai - 600 088

Ph: 044 - 2260 1858 / 2260 2088 / 91500 75206; E-mail: adambakkamsudarhospitals@gmail.com

*Master health check up.*

## ADVANCED DENTAL & MAXILLOFACIAL COSMETIC CENTRE

**DR. SREEJEE. G, M.D.S., FAM(GERMANY)**

CONSULTANT MAXILLOFACIAL SURGEON & FACIAL COSMETOLOGIST

REG. NO. - 26864

### Consulting Hours

Mon-Sat: 9 AM to 2 PM

5 PM to 9 PM

Sundays: By Prior Appointment

Mr. Janaki Raman <sup>57/M</sup>  
pt. came for general dental checkup <sup>13/1/24</sup>  
P/AMH: R/c/o Diabetes and Hypertension & under medication x 5 years  
ECG - changes seen - Inferior Infarct.

o/e: DC - 26, 27, 28

RS - 25, 36, 37, ? 22 (clinically missing)

Missing - 46, 47.

Adv. OPG.

**Dr. SREEJEE G. M.D.S., F.A.M.,**  
Consultant  
Maxillofacial Surgeon & Facial Cosmetologist  
Reg. No: 26864

*G. Sreejee*

SSB PHARMACY 24/7 Home delivery of drugs - Call: 044 2260 4969

Dental Care at Home for Elderly Available - 91500 75206 / 7845978954

PATIENT NAME Mr. Jeyakiraman AGE 56 SEX: (M) F MR. No \_\_\_\_\_ DATE 13<sup>th</sup> Jan 2024

**Rx**

DM | HTN | 3 IBS

R:

→ T. cilacar 107 ~~100~~

→ T. Felma 407 ~~0-7~~

→ T. ciliazide + MF 40/500 ~~100~~ (b/f)

x 2 months.

→ T. canator total ~~100~~ (10) days.

→ T. Albedarde 4007 (1) HS stat

- Rpt BP

- FBS, PPBS after 2 months.

Dr. ANIRUDHA SRINIVASAN.T  
MBBS., MD. (Gen. Med)  
Reg. No. 22277

ID No : **ASH-16608**      Bill No : **OP2324-14380**  
 Name : **Mr. JANAKIRAMAN K**      Visit Type : **OP**  
 Age / Sex : **57 Y / Male**      Collected On : **13-01-2024 04:17 PM**  
 Ref. By : **Dr Anirudha Srinivasan (General Medicine)**      Report Date : **13-01-2024 05:56 PM**

Specimen	Test Name	Result	Unit	Biological Reference Interval
<b>HAEMATOLOGY</b>				
EDTA Plasma	<b>COMPLETE BLOOD COUNT</b>			
	Hb (Hemoglobin)	12.7	Grams/dl	Male: 13-17 gms% female: 12-15 gms%
	TC	6,960	Cells/cumm	4000-11000
	<b>Differential Count</b>			
	Polymorphs	56	%	40-70
	Lymphocytes	36	%	35 to 55
	Eosinophils	02	%	0 to 6
	Monocytes	06	%	2 to 8
	Basophils	00	%	0 - 1
	RBC	4.55	millions/cumm	3.5-5.5
	PCV	37.4	%	39-52
	MCV	82.3		75-90
	MCH	27.9	pg	27-32
	MCHC	33.9	%	31-36
	Platelets	3.03	lakhs/cumm	1.5-4.5
	MPV (Mean Platelet Volume)	9.4	fL	6.5 - 10.0
	PCT (Platelet Haematocrit)	0.284	%	0.2 - 0.6
	PDW (Platelet Distribution Width)	12.9	%	8.5 - 17.5
	P-LCC (Platelet Larger Cell Count)	90	10 <sup>3</sup> /mm <sup>3</sup>	
	P-LCR (Platelet Larger Cell Ratio)	29.6	%	15 - 35

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

Verified By

  
 Lab Technician

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Specimen	Test Name	Result	Unit	Biological Reference Interval
<b>BIOCHEMISTRY</b>				
SERUM	LFT			
	Bilirubin (T)	0.7	mgs/dl	0.0 - 1.1
	Bilirubin (D)	0.2	mgs/dl	< 0.3
	Bilirubin (ID)	0.5	mgs/dl	0.2 - 0.8
	Sr.Total Protein	6.3	gms/dl	6.0 - 8.0
	Sr.Albumin	3.3	gms/dl	3.5 - 5.4
	Globulin	3.3	gms/dl	2.3 - 3.5
	SGOT	32	U/L	5 - 37
	SGPT	22	U/L	5 - 40
	Sr.Alkaline Phosphatase	130		CHILDREN(1-15 YEARS): 50 - 390 (16-19 YEARS): 47 - 171 ADULT(MALE) : 53 - 128 (FEMALE) : 42 - 141
SERUM	Sr.Gamma GT	46	U/L	Male : Less than 55 Female : Less than 38
	RFT			
	Urea	26	mg/dl	15- 40 mg/dl
	Creatinine	1.1	mg/dl	Male : 0.7 - 1.3 Female : 0.6 - 1.2
	Uric Acid	4.2	mg/dl	Male : 3.4 - 7.0 Female : 2.4 - 5.7
	Electrolytes			
	Sodium (Na+)	139	mmol/L	136 - 146
	Potassium (K+)	4.3	mmol/L	3.5 - 5.0
Chloride (Cl-)	105	mmol/L	96 - 106	

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

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<b>HÆMATOLOGY</b>				
WHOLE BLOOD	<b>HBA1C</b>			Non Diabetics: less than 6 % Good Control : 6.1 - 7% Fair Control 7.1 - 8% Unsatisfactory Control : 8.1 - 10% Poor Control : Above 10%
	HbA1c	6.5	%	
URIC ACID	<b>eAG</b>	140	mg / dl	70 - 125
WHOLE BLOOD	<b>ESR</b>			
	30 Minutes	29	mm	5
	60 Minutes	41	mm	12
<b>BIOCHEMISTRY</b>				
PLASMA	<b>Blood Glucose (Fasting)</b>	123	mg/dl	70 - 110
PLASMA	<b>Glucose Post Prandial</b>	167	mg/dl	80 - 140

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

*[Signature]*  
 Lab Technician

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Specimen	Test Name	Result	Unit	Biological Reference Interval
<b>BIOCHEMISTRY</b>				
SEUM	<b>LIPID PROFILE</b>			
	Total Cholesterol	102	mg/dl	Desirable: < 200 Borderline: 200 - 239 High: > = 240
	Triglycerides	98	mg/dl	Desirable: < 150 Normal Risk: 150 - 199 High Risk: >200
	HDL Cholesterol	24	mg/dl	30 - 70 Male 30 - 85 Female
	VLDL Cholesterol	20	mg/dl	Upto 30
	LDL Cholesterol	58	mg/dl	Optimal: 100 Above Optimal: 100 - 129 Border line: 130 - 159 High: 160 - 189 Very High: >190
	T.CHO/HDL Ratio	4.2		<3.3
	LDL/HDL Ratio	2.4		<2.0

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

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Specimen	Test Name	Result	Unit	Biological Reference Interval
<b>HAEMATOLOGY</b>				
WHOLE BLOOD	Blood Grouping & Rh Typing	"O" Positive		

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

  
Lab Technician

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Specimen	Test Name	Result	Unit	Biological Reference Interval
<b>BIOCHEMISTRY</b>				
URINE	URINE GLUCOSE PP			
	URINE SUGAR FASTING	Nil		
	URINE SUGAR PP	Nil		
URINE	URINE ROUTINE			
	Colour	Yellow		
	Appearance	Clear		
	Reaction	Acidic		
	pH	6.0		
	Specific Gravity	1.010		
	Albumin	Nil		
	Sugar	Nil		
	Bile Salts	Negative		
	Bile Pigments	Negative		
	Ketone	Negative		
	Deposists (HPF)			
	Pus Cells	2 - 4		/ hpf
	RBCs	Nil		/ hpf
	Epithelial Cells	2 - 4		/ hpf
	Bacteria	Absent		

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

Verified By

*[Signature]*  
 Lab Technician



Mr JANAKI RAMAN  
Age : 57 Year(s) Male

APL Code : APL-TN-092  
Ref Doctor:  
Customer :

Sample Type : SERUM  
SID : 5913081  
Collected on : 2024-01-13 00:00  
Regd on : 2024-01-13 15:48  
Reported On : 2024-01-13 16:07

### CLINICAL BIOCHEMISTRY

Test Description	Result	Units	Biological Reference Ranges
Prostate Specific Antigen -Total <small>(Prostate - Chem/minimetric)</small>	0.16	ng/mL	< 4.0

PSA-raising factors: Besides cancer, other conditions that can raise PSA levels include an enlarged prostate (benign prostatic hyperplasia, or BPH) and an inflamed or infected prostate (prostatitis). Also, PSA levels normally increase with age.

PSA-lowering factors. Certain drugs used to treat BPH or urinary conditions, and large doses of certain chemotherapy medications, may lower PSA levels. Obesity can also lower PSA levels.

Test Done at : Acclin Pathlabs India Pvt Ltd

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

*[Signature]*  
Lab Technologist

Mr JANAKI RAMAN  
 Age : 57 Year(s) Male

APL Code : APL-TN-092  
 Ref Doctor:  
 Customer :

Sample Type : SERUM  
 SID : 5913081  
 Collected on : 2024-01-13 00:00  
 Regd on : 2024-01-13 15:48  
 Reported On : 2024-01-13 16:07

### CLINICAL BIOCHEMISTRY

Test Description	Result	Units	Biological Reference Ranges
<b>THYROID PANEL I</b>			
Triiodothyronine Total (TT3) <small>(Method: Chemiluminescence)</small>	149.57	ng/dL	80 - 253 : 1 Yr-10 Yr, 76 - 199 : 11 Yr-15 Yr, 69 - 201 : 16 Yr-18 Yr, 87 - 178 : > 18 years.
Thyroxine - Total (TT4) <small>(Method: Chemiluminescence)</small>	9.70	µg/dL	5.9 - 21.5 : 0 -31 Days, 5.9 - 21.5 : 0- 1 Month 6.4 - 13.9 : 2-12 Months 6.09- 12.23 : >1 Yr
Thyroid Stimulating Hormone (TSH) <small>(Method: Ultra sensitive Chemiluminescence)</small>	4.35	µIU/mL	0.52-16.0 : 1 Day - 30 Days 0.55-7.10 : 1 Mon-5 Years 0.37-6.00 : 6 Yrs-18 Years 0.38-5.33 : 18 Yrs-88 Years 0.50-8.90 : > 88 Years

Hypothyroidism	Hyperthyroidism	Grave's disease
<ul style="list-style-type: none"> <li>Lethargy</li> <li>Weight gain</li> <li>Cold intolerance</li> <li>Constipation</li> <li>Hair loss</li> <li>Dry skin</li> <li>Depression</li> <li>Bradycardia</li> <li>Memory impairment</li> <li>Menorrhagia</li> </ul>	<ul style="list-style-type: none"> <li>Tachycardia</li> <li>Palpitations</li> <li>Hyperactivity</li> <li>Weight loss with increased appetite</li> <li>Heat intolerance</li> <li>Sweating   Diarrhea   Fine tremor   Hyper reflexia   Goitre</li> <li>Palmar erythema</li> <li>Onycholysis</li> <li>Muscle weakness and wasting</li> <li>Oligomenorrhoea / amenorrhoea</li> </ul>	<ul style="list-style-type: none"> <li>Exophthalmos/proptosis</li> <li>Chemosis</li> <li>Diffuse symmetrical goiter</li> <li>Pretibial myxoedema</li> <li>Other autoimmune conditions</li> <li>Thyroid bruit</li> </ul>

Test Done at : Acclin Pathlabs India Pvt Ltd

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

*P. S.*  
 Lab Technologist



Mr DANAKIRAMAN  
 Age : 57 Year(s) Male

APL Code : APL-TN-092  
 Ref Doctor:  
 Customer :

Sample Type : Urine  
 SID : 5913076  
 Collected on : 2024-01-13 00:00  
 Regd on : 2024-01-13 15:48  
 Reported On : 2024-01-13 16:51

### CLINICAL BIOCHEMISTRY

Test Description	Result	Units	Biological Reference Ranges
Microalbumin <small>(Chemical - Immunoturbidimetry)</small>	8.16	mg/dL	Up to 30

**Comments:**

This test is useful in the management of patients with early Diabetes mellitus to assist in avoiding or delaying the onset of renal disease. Due to inherent day to day variability in albumin excretion, this ratio is a better indicator than isolated micro albumin levels in urine.

**Clinical Use**

- Early detection of Diabetic nephropathy
- Therapeutic monitoring of patients with Nephropathy
- Routine management of patients with Diabetes

Test Done at : Acclin Pathlabs India Pvt Ltd

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

  
 Lab Technologist



# Adambakkam SUDAR HOSPITALS

( A Unit of SSB Health Care )  
No.3, Medavakkam Main Road, Adambakkam, Chennai - 88.  
Ph: 2260 1858, 2260 2088

## Cardiology ECHOCARDIOGRAM REPORT

Name: <u>Mr. Janaki Raman</u>	Date: <u>13/01/24</u>
Age: <u>57 yrs.</u>	UHID No:
<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Ward / Bed:
Ref. Physician:	Ref. Diagnosis:

DIMENSIONS	NORMAL	DIMENSIONS	NORMAL
Ao (ed) <u>3.31</u> cm	(1.5cm/m <sup>2</sup> )	IVS (Ed) <u>1.1</u> cm	(0.6 - 1.2 cm)
LA (es) <u>3.95</u> cm	(1.5cm/m <sup>2</sup> )	LVPW (Ed) <u>0.9</u> cm	(0.6 - 1.1 cm)
RVID (ed) <u>3.03</u> cm	(1.5cm/m <sup>2</sup> )	EF <u>70 %</u>	(0.62 - 0.85)
LVID (ed) <u>4.96</u> cm	(1.5cm/m <sup>2</sup> )	% FD <u>39 %</u>	(2.8% - 42%)
LVID (es) <u>2.98</u> cm	(1.5cm/m <sup>2</sup> )		

### MORPHOLOGICAL DATE

Mitral Valve AML <u>normal</u>	Interatrial Septum <u>normal</u>
PML <u>normal</u>	Interventricular Septum <u>normal</u>
Aortic Valve <u>normal</u>	Pulmonary Artery <u>normal</u>
Tricuspid Valve <u>normal</u>	Aorta <u>not dilated</u>
Pulmonary Valve <u>normal</u>	Right Atrium <u>normal</u>
Right Ventricle <u>normal</u>	Left Atrium <u>mildly dilated</u>

Pericardium

no pericardial effusion

Doppler Studies

VELOCITIES:

pulmonary outflow	PV - 1.03 m/s
Aortic outflow	AV - 1.34 m/s
Mitral inflow	E - 0.54 m/s
	A - 0.89 m/s

Impression

NO obvious RWMA  
 normal AV systolic fraction  
 Grade I LV diastolic dysfunction  
 mild MR  
 mild TR  
 normal RV function  
 no pulmonary hypertension

Done By

Checked by

Signature  
Consultant - Cardiology

(Signature)



# Adambakkam SUDAR HOSPITALS

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01130124

Ph: 044 - 2260 1858 / 2260 2088 / 9150075206 E.mail : adambakkamsudarhospitals@gmail.com

## DEPARTMENT OF OPHTHALMOLOGY

Consulting Hours :

Dr. K.KAVITHA LAKSHMI, MS., (Ophthal)  
Dr. M.PRASHANTHI, M.B.B.S., D.N.B., (Ophthal)  
Dr. S.INDUMATHI, M.B.B.S., D.O. (Ophthal)

Tuesday & Friday 4.00 pm to 5.00 pm.  
All Days By Appointment  
All Days 10.00 am to 1.00 pm

PATIENT NAME Mr. Janaki Raman AGE 51 SEX (M/F) REG. No. \_\_\_\_\_ DATE 13/1/24

Rx

81 B Dr Indumathi (ophthalmologist)

Master Health check up.

H/o HT / DM on Rx

H/o -> Vision loss -> 40 yr before (2E) - H/o injury?

015 : Vn < 4/60 EPH 6/60  
6/40 E PH 6/6

AF < 12

81L < lens chaf ⊕  
less chaf ⊖

Dilated fundus < Tenlacid Myopetropides  
non

Adv

- GP smi-

- to re - 6 months.

Dr. INDUMATHI. S

M.B.B.S., D.O.

SSB Pharmacy 24/7 Home delivery of drugs - Call: 044-2260-4969

Homecare Services Available - Call: 91500 75206 Reg.No:72454



Dr. [Mrs] S. INDUMATHI., MBBS., D.O

01130124

CONSULTANT OPHTHALMOLOGIST  
 Reg. No. 72454

Patient Name: Mrs Janaki Ramon				Age / Sex: 52/m		Date: 13/1/24		
	Right Eye				Left Eye			
	SPH	CYL	AXIS	V/A	SPH	CYL	AXIS	V/A
DV	-7.00	-1.00	40	6/120 N15	-0.75	-	-	6/6
NV	+4.25	-1.00	40	N6	+2.00	-	-	N6

Remarks:

to n' - 6 months

Authorized Signature

Dr. INDUMATHI. S  
 M.B.B.S., D.O  
 Consultant Ophthalmologist  
 Reg. No: 72454

13 01 2024 05:46:33

MR. S. S. S. S. S.

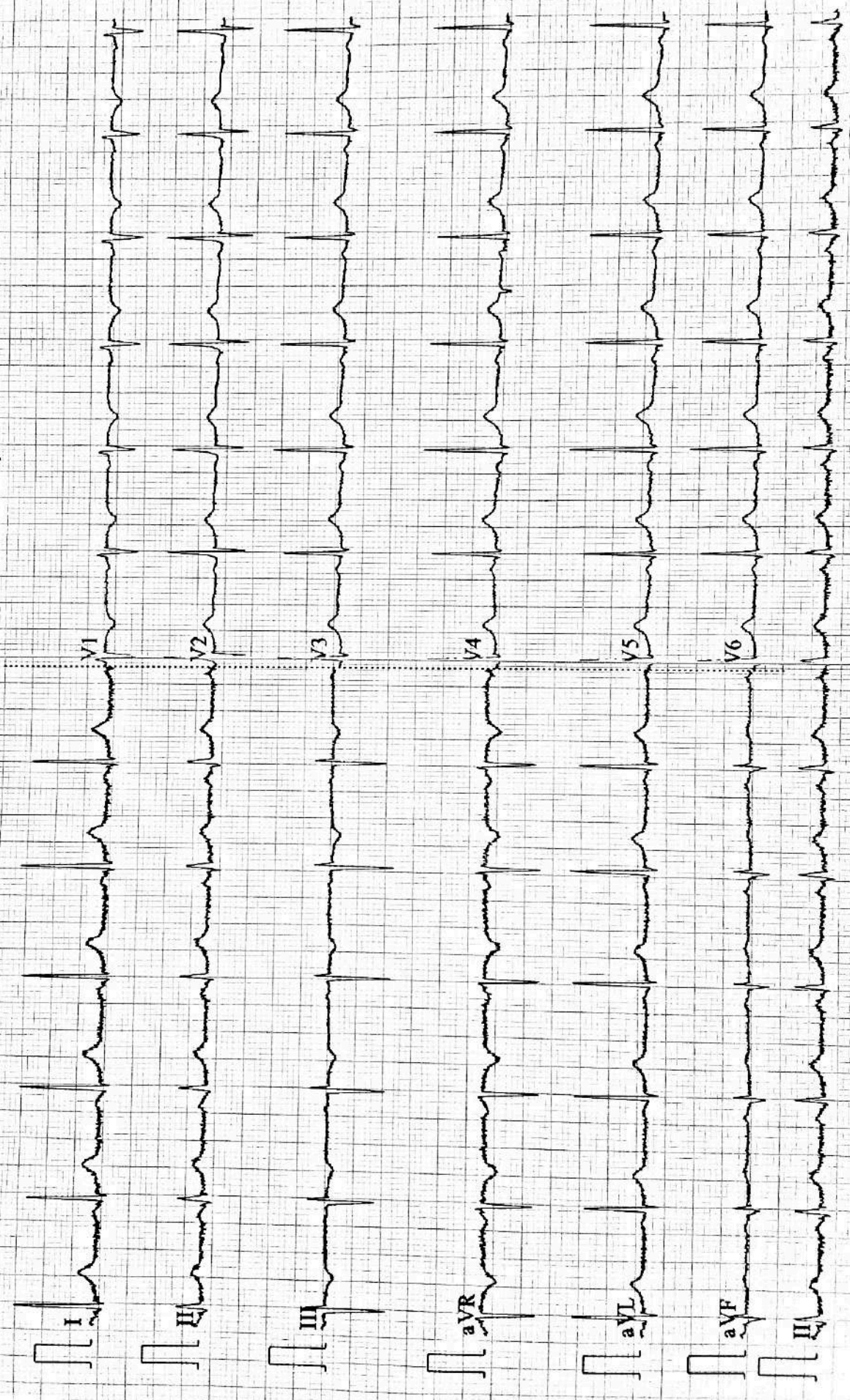
Male  
Years

HR : 73 bpm  
P : 110 ms  
PR : 134 ms  
QRS : 80 ms  
QT/QTcBz : 402/443 ms  
P/QRS/T : 39/-12/5 p  
RV5/SV1 : 1.285/0.518 mV

Diagnosis Information

Sinus rhythm  
Inferior infarct - age undetermined  
Abnormal ECG

Report Confirmed by:







Radiology

ULTRASOUND SCAN REPORT - MALE

Name :MR. Janaki Raman	Date :13/01/2024
Age :57/M	UHID No: ASH - 16608
Ref. by. Dr.T.N. Ravisankar	Ward / Bed : OP

REAL TIME B-Mode 2D ULTRASOUND SCAN

**LIVER** : Liver is Enlarged in size 16.3 cms.  
The parenchymal echotexture is Homogenous.  
No evidence of any focal lesion. No evidence of intra or extra Hepatic Biliary Ductal dilatation. Portal vein CBD were normal. The Gallbladder is normal in size and contour. No Calculi.

**SPLEEN** : The Spleen is Enlarged in size & echotexture.11.6 cms.

**PANCREAS** : The Pancreas is normal in size & echotexture.

**KIDNEYS** : The right kidney measured : 8.6 X 3.9 cms.  
The left kidney measured : 11.0 X 5.8 cms.  
Cortico medullary differentiation is normal.  
No evidence of pelvicaliectasis or calculus.

Right Kidney Relatively Small in Size.  
Simple cortical cyst. 1.6 X 1.3cms in Lower pole.  
Simple cortical cyst 1.5 X 1.0cms in Lower pole of Left Kidney.

**BLADDER** : The urinary bladder is normal. No mass lesion.

**PROSTATE** : The prostate is normal in size and echotexture.  
The prostate measured:2.7 X 2.8 X 3.2 cms. Vol:13.5 cc.  
No evidence of any focal lesion.

No evidence of free or loculated fluid in the abdomen.  
No evidence of para aortic adenopathy.  
The aorta and I.V.C. appeared normal.

**IMPRESSION** :  
1. SONOGRAPHICALLY NORMAL GALL BLADDER, PANCREAS, BLADDER, AND PROSTATE.  
2. ENLARGED GRADE I FATTY LIVER.  
3. RIGHT KIDNEY RELATIVELY SMALL IN SIZE.  
4. B/L SIMPLE RENAL CORTICAL CYST.  
5. SPLENOMEGALY.

for  
Name & Signature:

