

Visit ID	: YGT43456	UHID/MR No	: YGT.0000043303
Patient Name	: Mr. BALABATTINI KIRAN KUMAR	Client Code	: 1409
Age/Gender	: 39 Y 0 M 0 D /M	Barcode No	: 10833915
DOB	:	Registration	: 09/Dec/2023 08:05AM
Ref Doctor	: SELF	Collected	: 09/Dec/2023 08:05AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 09/Dec/2023 11:16AM
Hospital Name	:		

DEPARTMENT OF RADIOLOGY**ULTRASOUND WHOLE ABDOMEN**

Clinical Details : General check-up.

LIVER : *Enlarged in size (16.6 cm) and shows increased echo-texture.* Intra hepatic biliary channels are not dilated. Visualised common bile duct & portal vein appears normal.

GALL BLADDER : Minimally distended. No evidence of wall thickening / calculi.

PANCREAS : Normal in size and outlines. Parenchymal texture normal. No ductal dilatation. No calcifications / calculi.

SPLEEN : Normal in size (10.0 cm) and echotexture. No focal lesion is seen.

RIGHT KIDNEY : measures 11.2 x 3.9 cm. Normal in size with smooth contours. Parenchymal texture normal. No focal lesion is seen. Cortico-medullary differentiation well maintained. Collecting system does not show any dilatation or calculus.

LEFT KIDNEY : measures 12.2 x 3.9 cm. Normal in size with smooth contours. Parenchymal texture normal. No focal lesion is seen. Cortico-medullary differentiation well maintained. Collecting system does not show any dilatation or calculus.

URINARY BLADDER : Well distended. No evidence of wall thickening / calculi.

PROSTATE : Normal in size and echo-texture.

No enlarged nodes are visualised. No retro-peritoneal lesion is identified. Great vessels appear normal.

No free fluid is seen in peritoneal cavity.

IMPRESSION:

- Hepatomegaly with Grade I fatty changes.

Verified By :

GOPI



Approved By :

Sushma
Dr.SUSHMA VUYYURU
MBBS;MD(Radio-Diagnosis)
CONSULTANT RADIOLOGIST

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DEPARTMENT OF RADIOLOGYX-RAY CHEST PA VIEWFindings:

Soft tissues/ bony cage normal.
Trachea and Mediastinal structures are normal.
Heart size and configuration are normal.
Aorta and pulmonary vascularity are normal.
Lung parenchyma and CP angles are clear.
Bilateral hilae and diaphragmatic contours are normal.

IMPRESSION :

- No Significant Abnormality Detected.

Suggested Clinical Correlation & Follow up.

Verified By :

GOPI



Approved By :


Dr. SUSHMA VUYYURU
MBBS; MD(Radio-Diagnosis)
CONSULTANT RADIOLOGIST

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DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
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ESR (ERYTHROCYTE SEDIMENTATION RATE)

Sample Type : WHOLE BLOOD EDTA

ERYTHROCYTE SEDIMENTATION RATE	60	mm/1st hr	0 - 15	Capillary Photometry
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COMMENTS:

ESR is an acute phase reactant which indicates presence and intensity of an inflammatory process. It is never diagnostic of a specific disease. It is used to monitor the course or response to treatment of certain diseases. Extremely high levels are found in cases of malignancy, hematologic diseases, collagen disorders and renal diseases.

Increased levels may indicate: Chronic renal failure (e.g., nephritis, nephrosis), malignant diseases (e.g., multiple myeloma, Hodgkin disease, advanced Carcinomas), bacterial infections (e.g., abdominal infections, acute pelvic inflammatory disease, syphilis, pneumonia), inflammatory diseases (e.g. temporal arteritis, polymyalgia rheumatic, rheumatoid arthritis, rheumatic fever, systemic lupus erythematosus [SLE]), necrotic diseases (e.g., acute myocardial infarction, necrotic tumor, gangrene of an extremity), diseases associated with increased proteins (e.g., hyperfibrinogenemia, macroglobulinemia), and severe anemias (e.g., iron deficiency or B12 deficiency).

Falsely decreased levels may indicate: Sickle cell anemia, spherocytosis, hypofibrinogenemia, or polycythemia vera.

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 Consultant Pathologist

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DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
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CBC (COMPLETE BLOOD COUNT)
Sample Type : WHOLE BLOOD EDTA


HAEMOGLOBIN (HB)	15.7	g/dl	13.0 - 17.0	Cyanide-free SLS method
RBC COUNT (RED BLOOD CELL COUNT)	5.32	million/cmm	4.50 - 5.50	Impedance
PCV/HAEMATOCRIT	44.6	%	40.0 - 50.0	RBC pulse height detection
MCV	83.9	fL	83 - 101	Automated/Calculated
MCH	29.5	pg	27 - 32	Automated/Calculated
MCHC	35.2	g/dl	31.5 - 34.5	Automated/Calculated
RDW - CV	12.5	%	11.0-16.0	Automated Calculated
RDW - SD	40.5	fl	35.0-56.0	Calculated
MPV	8.6	fL	6.5 - 10.0	Calculated
PDW	16	fL	8.30-25.00	Calculated
PCT	0.16	%	0.15-0.62	Calculated
TOTAL LEUCOCYTE COUNT	8,900	cells/ml	4000 - 11000	Flow Cytometry
DLC (by Flow cytometry/Microscopy)				
NEUTROPHIL	51	%	40 - 80	Impedance
LYMPHOCYTE	41	%	20 - 40	Impedance
EOSINOPHIL	03	%	01 - 06	Impedance
MONOCYTE	05	%	02 - 10	Impedance
BASOPHIL	00	%	0 - 1	Impedance
PLATELET COUNT	1.88	Lakhs/cumm	1.50 - 4.10	Impedance

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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THYROID PROFILE (T3,T4,TSH)
Sample Type : SERUM

T3	0.78	ng/ml	0.60 - 1.78	CLIA
T4	10.82	ug/dl	4.82-15.65	CLIA
TSH	1.50	uIU/mL	0.30 - 5.60	CLIA

INTERPRETATION:

1. Serum T3, T4 and TSH are the measurements form three components of thyroid screening panel and are useful in diagnosing various disorders of thyroid gland function.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 values along with depressed TSH levels.
3. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH levels.
4. Normal T4 levels accompanied by high T3 levels are seen in patients with T3 thyrotoxicosis. Slightly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol and propylthiouracil.
5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, rarely they can result from TSH secreting pituitary tumors (secondary hyperthyroidism).
6. Low levels of Thyroid hormones (T3, T4 & FT3, FT4) are seen in cases of primary, secondary and tertiary hypothyroidism and sometimes in non-thyroidal illness also.
7. Increased levels are found in Grave's disease, hyperthyroidism and thyroid hormone resistance.
8. TSH levels are raised in primary hypothyroidism and are low in hyperthyroidism and secondary hypothyroidism.
9. REFERENCE RANGE :

PREGNANCY	TSH in uIU/ mL
1st Trimester	0.60 - 3.40
2nd Trimester	0.37 - 3.60
3rd Trimester	0.38 - 4.04

(References range recommended by the American Thyroid Association)

Comments:

1. During pregnancy, Free thyroid profile (FT3, FT4 & TSH) is recommended.
2. TSH levels are subject to circadian variation, reaches peak levels between 2-4 AM and at a minimum between 6-10 PM. The variation of the day has influence on the measured serum TSH concentrations.

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DEPARTMENT OF BIOCHEMISTRY

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LIVER FUNCTION TEST(LFT)

LIVER FUNCTION TEST(LFT)				
Sample Type : SERUM				
TOTAL BILIRUBIN	0.98	mg/dl	0.3 - 1.2	JENDRASSIK & GROFF
CONJUGATED BILIRUBIN	0.22	mg/dl	0 - 0.2	DPD
UNCONJUGATED BILIRUBIN	0.76	mg/dl		Calculated
S.G.O.T	31	U/L	< 50	KINETIC WITHOUT P5P-IFCC
S.G.P.T	35	U/L	< 50	KINETIC WITHOUT P5P-IFCC
ALKALINE PHOSPHATASE	94	U/L	30 - 120	IFCC-AMP BUFFER
TOTAL PROTEINS	8.0	gm/dl	6.6 - 8.3	Biuret
ALBUMIN	4.5	gm/dl	3.5 - 5.2	BCG
GLOBULIN	3.5	gm/dl	2.0 - 3.5	Calculated
A/G RATIO	1.29			Calculated

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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LIPID PROFILE

Sample Type : SERUM

TOTAL CHOLESTEROL	189	mg/dl	Refere Table Below	Cholesterol oxidase/peroxidase
H D L CHOLESTEROL	45	mg/dl	> 40	Enzymatic/ Immunoinhibiton
L D L CHOLESTEROL	102	mg/dl	Refere Table Below	Enzymatic Selective Protein
TRIGLYCERIDES	402	mg/dl	See Table	GPO
VLDL	NA	mg/dl	15 - 30	Calculated
T. CHOLESTEROL/ HDL RATIO	4.20		Refere Table Below	Calculated
TRIGLYCEIDES/ HDL RATIO	8.93	Ratio	< 2.0	Calculated
NON HDL CHOLESTEROL	144	mg/dl	< 130	Calculated

As triglycerides level are >400 mg/dl, Friedwald'S equation is not suitable for the calculation of VLDL.

The LDL estimation is assayed directly.

Kindly correlate clinically

Interpretation

NATIONAL LIPI D ASSOCIATION RECOMMENDATIONS (NLA-2014)	TOTAL CHOLESTEROL	TRI GLYCER I DE	LDL CHOLESTEROL	NON HDL CHOLESTEROL
Optimal	<200	<150	<100	<130
Above Optimal	-	-	100-129	130 - 159
Borderline High	200-239	150-199	130-159	160 - 189
High	>=240	200-499	160-189	190 - 219
Very High	-	>=500	>=190	>=220

REMARKS	Cholesterol : HDL Ratio
Low risk	3.3-4.4
Average risk	4.5-7.1
Moderate risk	7.2-11.0
High risk	>11.0

Note:

- Measurements in the same patient can show physiological& analytical variations. Three serial samples 1 week apart are recommended for Total Cholesterol, Triglycerides, HDL& LDL Cholesterol
- NLA-2014 identifies Non HDL Cholesterol(an indicator of all atherogenic lipoproteins such as LDL , VLDL, IDL, Lpa, Chylomicron

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remnants)along with LDL-cholesterol as co- primary target for cholesterol lowering therapy. Note that major risk factors can modify treatment goals for LDL &Non HDL.
 3.Apolipoprotein B is an optional, secondary lipid target for treatment once LDL & Non HDL goals have been achieved
 4. Additional testing for Apolipoprotein B, hsCRP, Lp(a) & LP-PLA2 should be considered among patients with moderate risk for ASCVD for risk refinement

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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PSA (PROSTATE SPECIFIC ANTIGEN) - TOTAL

Sample Type : SERUM

PROSTATE SPECIFIC ANTIGEN	8.92	ng/mL	< 4.0	CLIA
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INTERPRETATION:

Raised Total PSA levels may indicate prostate cancer, benign prostate hypertation (BPH), or inflammation of the prostate. Prostate manipulation by biopsy or rigorous physical activity may temporarily elevate PSA levels. The blood test should be done before surgery or six weeks after manipulation. The total PSA may be ordered at regular intervals during treatment of men who have been diagnosed with Prostate cancer and in prostatic cancer cases under observation.

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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BLOOD UREA NITROGEN (BUN)

Sample Type : Serum

SERUM UREA	15	mg/dL	13 - 43	Urease GLDH
Blood Urea Nitrogen (BUN)	7.0	mg/dl	5 - 25	GLDH-UV

Increased In:

Impaired kidney function, Reduced renal blood flow {CHF, Salt and water depletion, (vomiting, diarrhea, diuresis, sweating), Shock}, Any obstruction of urinary tract, Increased protein catabolism, AMI, Stress

Decreased In:

Diuresis (e.g. with over hydration), Severe liver damage, Late pregnancy, Infancy, Malnutrition, Diet (e.g., low-protein and high-carbohydrate, IV feedings only), Inherited hyperammonemias (urea is virtually absent in blood)

Limitations:

Urea levels increase with age and protein content of the diet.

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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FBS (GLUCOSE FASTING)

Sample Type : FLOURIDE PLASMA

FASTING PLASMA GLUCOSE	275	mg/dl	70 - 100	HEXOKINASE
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INTERPRETATION:

Increased In

- Diabetes Mellitus
- Stress (e.g., emotion, burns, shock, anesthesia)
- Acute pancreatitis
- Chronic pancreatitis
- Wernicke encephalopathy (vitamin B1 deficiency)
- Effect of drugs (e.g. corticosteroids, estrogens, alcohol, phenytoin, thiazides)

Decreased In

- Pancreatic disorders
- Extrapancreatic tumors
- Endocrine disorders
- Malnutrition
- Hypothalamic lesions
- Alcoholism
- Endocrine disorders

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Ref Doctor	: SELF	Collected	: 09/Dec/2023 10:35AM
Client Name	: MEDI WHEELS	Received	: 09/Dec/2023 10:46AM
Client Add	: F-701, Lado Sarai, Mehrauli, N	Reported	: 09/Dec/2023 11:14AM
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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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PPBS (POST PRANDIAL GLUCOSE)

Sample Type : FLOURIDE PLASMA

POST PRANDIAL PLASMA GLUCOSE	399	mg/dl	<140	HEXOKINASE
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INTERPRETATION:

Increased In

- Diabetes Mellitus
- Stress (e.g., emotion, burns, shock, anesthesia)
- Acute pancreatitis
- Chronic pancreatitis
- Wernicke encephalopathy (vitamin B1 deficiency)
- Effect of drugs (e.g. corticosteroids, estrogens, alcohol, phenytoin, thiazides)

Decreased In

- Pancreatic disorders
- Extrapancreatic tumors
- Endocrine disorders
- Malnutrition
- Hypothalamic lesions
- Alcoholism
- Endocrine disorders

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DEPARTMENT OF BIOCHEMISTRY

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SERUM CREATININE

Sample Type : SERUM

SERUM CREATININE	0.77	mg/dl	0.67 - 1.17	KINETIC-JAFFE
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Increased In:

- Diet: ingestion of creatinine (roast meat), Muscle disease: gigantism, acromegaly,
- Impaired kidney function.

Decreased In:

- Pregnancy: Normal value is 0.4-0.6 mg/dL. A value >0.8 mg/dL is abnormal and should alert the clinician to further diagnostic evaluation.
- Creatinine secretion is inhibited by certain drugs (e.g., cimetidine, trimethoprim).

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GGT (GAMMA GLUTAMYL TRANSPEPTIDASE)

Sample Type : SERUM

GGT	30	U/L	0 - 55.0	KINETIC-IFCC
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INTERPRETATION:

GGT functions in the body as a transport molecule, helping to move other molecules around the body. It plays a significant role in helping the liver metabolize drugs and other toxins. Increased GGT include overuse of alcohol, chronic viral hepatitis, lack of blood flow to the liver, liver tumor, cirrhosis, or scarred liver, overuse of certain drugs or other toxins, heart failure, diabetes, pancreatitis, fatty liver disease.

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URIC ACID -SERUM

Sample Type : SERUM

SERUM URIC ACID	4.4	mg/dl	3.5 - 7.20	URICASE - PAP
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Interpretation

Uric acid is the final product of purine metabolism in the human organism. Uric acid measurements are used in the diagnosis and treatment of numerous renal and metabolic disorders, including renal failure, gout, leukemia, psoriasis, starvation or other wasting conditions, and of patients receiving cytotoxic drugs.

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BUN/CREATININE RATIO

Sample Type : SERUM				
Blood Urea Nitrogen (BUN)	7.0	mg/dl	5 - 25	GLDH-UV
SERUM CREATININE	0.77	mg/dl	0.67 - 1.17	KINETIC-JAFFE
BUN/CREATININE RATIO	9.10	Ratio	6 - 25	Calculated

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DOB	:	Registration	: 09/Dec/2023 08:05AM
Ref Doctor	: SELF	Collected	: 09/Dec/2023 08:05AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 09/Dec/2023 12:42PM
Hospital Name	:		

DEPARTMENT OF RADIOLOGY**2D ECHO DOPPLER STUDY**


MITRAL VALVE : Normal
AORTIC VALVE : Normal
TRICUSPID VALVE : Normal
PULMONARY VALVE : Normal
RIGHT ATRIUM : Normal
RIGHT VENTRICLE : Normal
LEFT ATRIUM : 3.1 cms
LEFT VENTRICLE : EDD : 4.1 cm IVS(d) : 1.0cm LVEF :71 %
ESD : 2.4 cm PW (d) : 1.0cm FS :40 %
No RWMA
IAS : Intact
IVS : Intact
AORTA : 3.0cms
PULMONARY ARTERY : Normal
PERICARDIUM : Normal
IVS/ SVC/ CS : Normal
PULMONARY VEINS : Normal
INTRA CARDIAC MASSES : No

Verified By :

GOPI



Approved By :


Dr. B. Nagaraju
MD (Internal Medicine)
DN (CARDIOLOGY)
APNC Reg. No 70760

Visit ID	: YGT43456	UHID/MR No	: YGT.0000043303
Patient Name	: Mr. BALABATTINI KIRAN KUMAR	Client Code	: 1409
Age/Gender	: 39 Y 0 M 0 D /M	Barcode No	: 10833915
DOB	:	Registration	: 09/Dec/2023 08:05AM
Ref Doctor	: SELF	Collected	: 09/Dec/2023 08:05AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 09/Dec/2023 12:42PM
Hospital Name	:		

DEPARTMENT OF RADIOLOGY**DOPPLER STUDY :**

MITRAL FLOW : E -0.8 m/sec, A -1.6 m/sec.
AORTIC FLOW : 0.9m/sec
PULMONARY FLOW : 0.9m/sec
TRICUSPID FLOW : TRJV :3.0m/sec, RVSP -40 mmHg

COLOUR FLOW MAPPING:**IMPRESSION :**


- * MILD CONCENTRIC LVH
- * NO RWMA OF LV
- * GOOD LV SYSTOLIC FUNCTION
- * GRADE I LV DIASTOLIC DYSFUNCTION
- * NO MR/ NO AR/ NO PR
- * MILD TR/ MILD PAH
- * NO PE / CLOT / VEGETATIONS.

Verified By :

GOPI



Approved By :


Dr.B.Nagaraju
MD(Internal Medicine)
DN(CARDIOLOGY)
APNC Reg.No 70760

Visit ID	: YGT43456	UHID/MR No	: YGT.0000043303
Patient Name	: Mr. BALABATTINI KIRAN KUMAR	Client Code	: 1409
Age/Gender	: 39 Y 0 M 0 D /M	Barcode No	: 10833915
DOB	:	Registration	: 09/Dec/2023 08:05AM
Ref Doctor	: SELF	Collected	: 09/Dec/2023 08:14AM
Client Name	: MEDI WHEELS	Received	: 09/Dec/2023 08:55AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 09/Dec/2023 10:10AM
Hospital Name	:		

DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
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CUE (COMPLETE URINE EXAMINATION)
Sample Type : SPOT URINE
PHYSICAL EXAMINATION

TOTAL VOLUME	20 ML	ml		
COLOUR	PALE YELLOW			
APPEARANCE	CLOUDY			
SPECIFIC GRAVITY	1.020		1.003 - 1.035	Bromothymol Blue

CHEMICAL EXAMINATION

pH	6.5		4.6 - 8.0	Double Indicator
PROTEIN	DETECTED (++)		NEGATIVE	Protein - error of Indicators
GLUCOSE(U)	++		NEGATIVE	Glucose Oxidase
UROBILINOGEN	NEGATIVE	mg/dl	< 1.0	Ehrlichs Reaction
KETONE BODIES	NEGATIVE		NEGATIVE	Nitroprasside
BILIRUBIN - TOTAL	NEGATIVE		Negative	Azocoupling Reaction
BLOOD	NEGATIVE		NEGATIVE	Tetramethylbenzidine
LEUCOCYTE	NEGATIVE		Negative	Azocoupling reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization Reaction

MICROSCOPIC EXAMINATION

PUS CELLS	PLENTY	cells/HPF	0-5	
EPITHELIAL CELLS	5-6	/hpf	0 - 15	
RBCs	NIL	Cells/HPF	Nil	
CRYSTALS	NIL	Nil	Nil	
CASTS	NIL	/HPF	Nil	
BUDDING YEAST	NIL		Nil	
BACTERIA	PRESENT		Nil	
OTHER	NIL			

Verified By :

GOPI



Approved By :

Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID	: YGT43456	UHID/MR No	: YGT.0000043303
Patient Name	: Mr. BALABATTINI KIRAN KUMAR	Client Code	: 1409
Age/Gender	: 39 Y 0 M 0 D /M	Barcode No	: 10833915
DOB	:	Registration	: 09/Dec/2023 08:05AM
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Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 09/Dec/2023 10:10AM
Hospital Name	:		

DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
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***** End Of Report *****

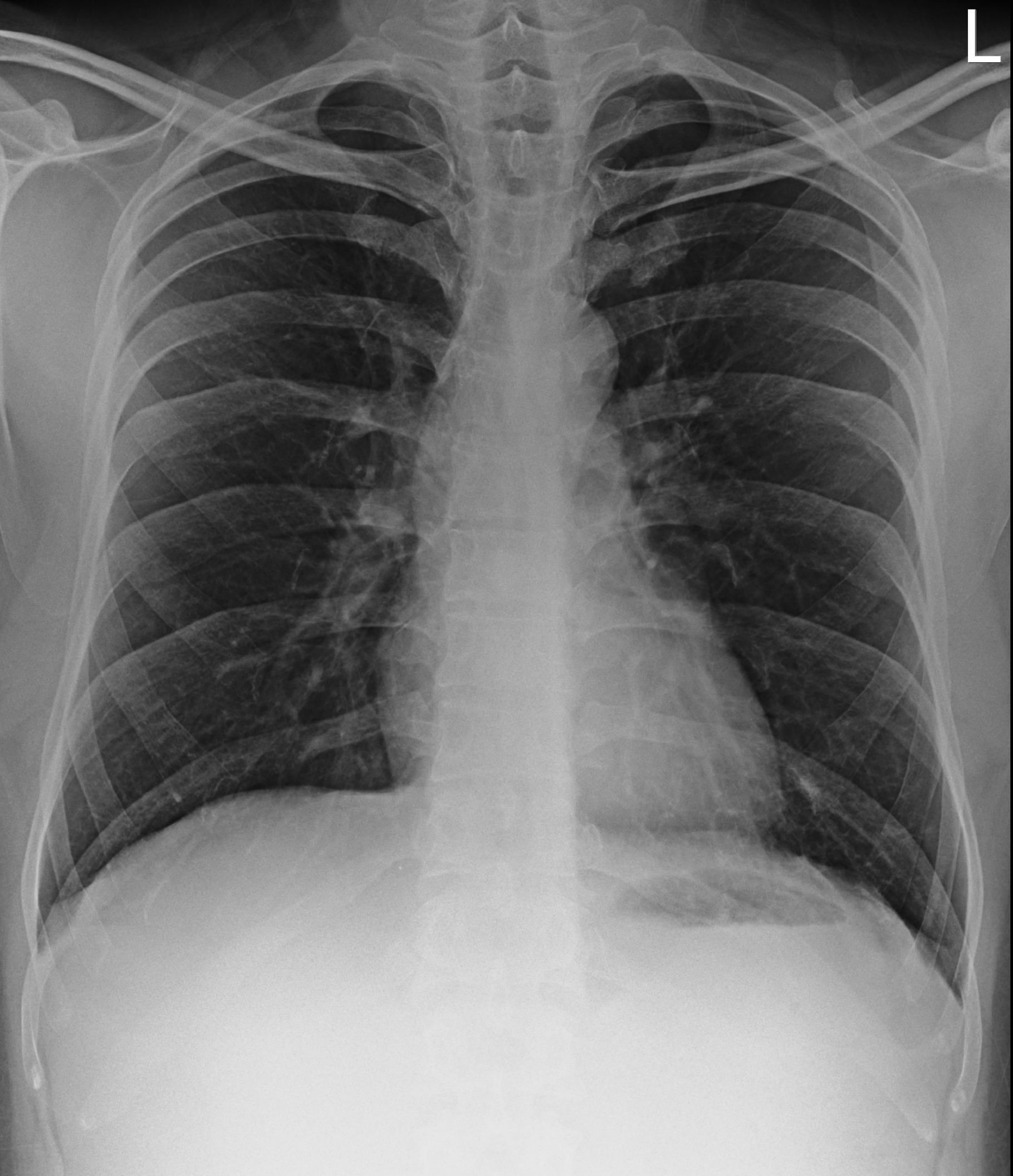
Verified By :

GOPI



Approved By :

Dr. Sumalatha
MBBS,DCP
Consultant Pathologist



BALABATTINI KIRAN KUMAR 39Y MALE YGT43456 CHEST PA 09-Dec-23

YODA DIAGNOSTICS



सत्यमेव जयते
भारत सरकार



आधार

భారత ప్రభుత్వము
Government of India

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

నమోదు సంఖ్య / Enrollment No. : 0639/50503/32933

To

Balabattini Kiran Kumar

బలాబత్తినీ కిరణ్ కుమార్

C/O: B Brahmanandam,

4-16-95 new 22-159,

1st floor barath peta 2nd line,

VTC: Guntur, PO: Guntur,

Sub District: Guntur, District: Guntur,

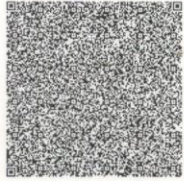
State: Andhra Pradesh, PIN Code: 522002,

Mobile: 9160241606

36611009



KF366110092FI



మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

5230 6375 0661

నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం

Government of India



Issue Date: 16/04/2013



బలాబత్తినీ కిరణ్ కుమార్

Balabattini Kiran Kumar

పుట్టిన తేదీ / DOB: 14/06/1981

పురుషుడు / Male

5230 6375 0661

నా ఆధార్, నా గుర్తింపు



Government of India



సమాచారము

- ఆధార్ ఒక గుర్తింపు మాత్రమే పౌరసత్వం కాదు.
- సురక్షితమైన క్యూఆర్ కోడ్ / ఆఫ్‌లైన్ ఎక్స్ ఎం ఎల్ / ఆన్‌లైన్ ప్రామాణీకరణను ఉపయోగించి గుర్తింపును ధృవీకరించండి.

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code / Offline XML / Online Authentication.

- ఆధార్ దేశవ్యాప్తంగా చెల్లుబాటు అవుతుంది.
- వివిధ ప్రభుత్వ మరియు ప్రభుత్వేతర సేవలను సులువుగా పొందటానికి ఆధార్ మీకు సహాయపడుతుంది.
- ఎల్లప్పుడూ మీ మొబైల్ నెంబర్ మరియు ఇమెయిల్ బదిలీ ఆధార్ లో అప్ డేట్ చేసి ఉంచండి.
- ఎమ్-ఆధార్ ఆప్ ఉపయోగించండి - మీ ఆధార్ ను ఎల్లప్పుడూ మీ స్మార్ట్ ఫోన్ లో ఉంచండి.
- Aadhaar is valid throughout the country.
- Aadhaar helps you avail various Government and non-Government services easily.
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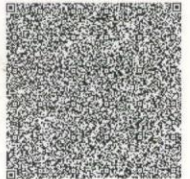
భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ

Unique Identification Authority of India



చిరునామా: సంబంధీకులు: బి బ్రహ్మానందం, 4-16-95 న్యూ 22-159, 1వ ఫ్లోర్ భరత పేట 2వ లైన్, గుంటూరు, ఆంధ్ర ప్రదేశ్, 522002

Address: C/O: B Brahmanandam, 4-16-95 new 22-159, 1st floor barath peta 2nd line, Guntur, Andhra Pradesh, 522002



Print Date: 23/01/2021

5230 6375 0661



1947



help@uidai.gov.in



www.uidai.gov.in

ID: 43456

09-12-2023 09:30:51

BALABATTINI KIRAN KUMAR

HR : 96 bpm

Diagnosis Information:

Male 39Years

P : 104 ms

Sinus Rhythm

Req. No. :

PR : 148 ms

Normal ECG

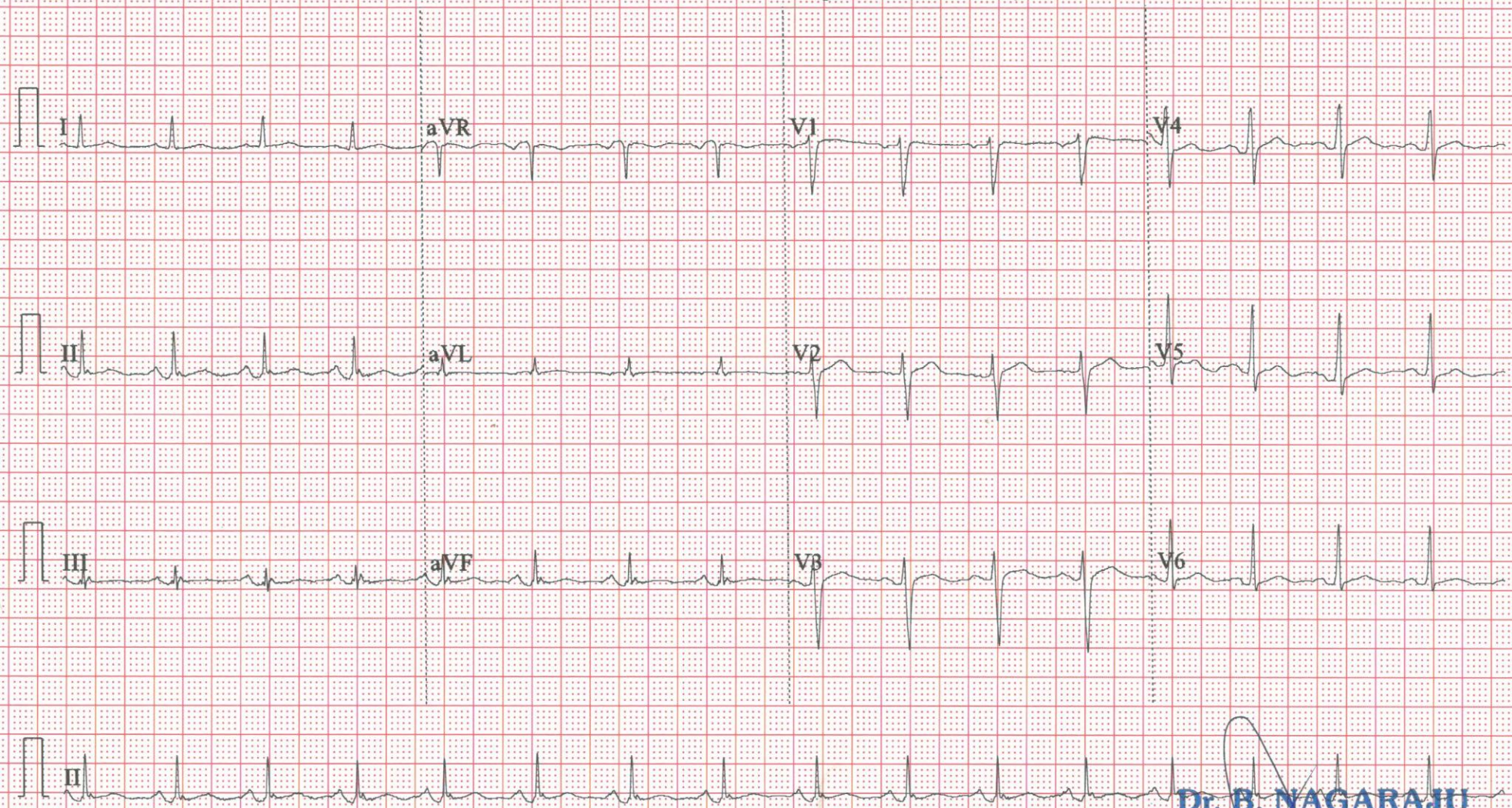
QRS : 90 ms

QT/QTcBz : 342/433 ms

P/QRST : 69/54/60

RV5/SV1 : 1.111/0.807 mV

Report Confirmed by:



Dr. B. NAGARAJU
Regd. No. 10760 MBBS, M.D. DM
CONSULTANT CARDIOLOGIST
YODA DIAGNOSTICS CLINICAL

Name: Mr. Bala Battini Kiran Kumar
Date: 09/12/2023 Age: 39 years Sex: Male
Address: Guntur



Routine checkup

NO COMPLAINTS

H/O Blindness (Retinitis pigmentosa)

TEMP: N
B.P: 130/80 mmHg
PULSE: 100/min
WEIGHT: 57 kgs
HEIGHT: 163 cm

TGL - 402 mg/dl

1) Diabetic Diet (Low Fat Diet)

PSA - 8.92 ng/ml

2) Tab. GLYCOMET - GP2

FBS - 275 mg/dl

PPBS - 399 mg/dl

Urine

Pro cells - Plenty

1 ——— | ——— (20)
(BBF) (BIF)

3) Tab. ADILIA 135 mg

007 ——— (30)

4) Tab. URIBID 1000

1 ——— | ——— (10)

DATE: 07-12-23NAME: B. KIRAN KUMARAGE: 39/M ADDRESS: _____TYPE OF LENS: GLASS CONTACTS CR POLYCARBONATE COATINGS : ARC HARD COAT TINT : White SP2 PHOTO GREY BIFOCALS : KRYPTOK EXECUTIVE "D" PROGRESSIVE

R				L		
	SPH	CYL	AXIS	SPH	CYL	AXIS
DV	-	-			-	
	075	075	90		200	90
ADD						

INSTRUCTIONS _____

I.P.D. _____ D.V. _____

N.V. _____ CONSTANT USE _____



 **GPS Map Camera**

Guntur, Andhra Pradesh, India

3-1-219/2, Old Club Rd, Gunturi Vari Thota, Kothapeta, Guntur,
Andhra Pradesh 522001, India

Lat 16.29914°

Long 80.451556°

09/12/23 09:06 AM GMT +05:30

