

DEPARTMENT OF BIOCHEMISTRY

| | | | |
|--------------|----------------------------|-----------|-----------------------|
| Patient Name | : Mr. GAJJI VIJAYA BHASKER | Age / Sex | : 42 Y(s)/Male |
| Ref By | : Dr. GENERAL PHYSICIAN | UMR No | : UMR100213 |
| Bill Date | : 29-Mar-24 11:19 am | Bill No | : BIL175738 |
| Lab No | : 175738 | Result No | : RES500467 |
| Sam p.Coll | : 29-Mar-24 11:37 am | Auth. Tim | : 29-Mar-2024 2:01 pm |
| Reported On | : 29-Mar-24 02:01 pm | | |

| <u>Parameter</u> | <u>Result</u> | <u>Biological Reference Interval</u> | <u>Method</u> |
|----------------------------------|---------------|--|-----------------------|
| Glycated Haemoglobin - HbA1c | : 5.8 | Non Diabetic : < 5.7 Pre Diabetic : 5.7 - 6.4 Diabetic : >= 6.5 | Immunoturbidimetry |
| LIPID PROFILE: SERUM | | | |
| Triglycerides | : 59 | BorderLine : 150 - 199 mg/dl High : 200 - 500 mg/dl Normal : < 150 mg/dl | GPO-Trinder End Point |
| Total Cholesterol | : 178 | < 200 mg/dl | CHOD-PAP End Point |
| HDL Cholesterol | : 48 | Undesirable : < 40 Optimal : 40 - 59 Desirable : > 60 | Enzymatic |
| VLDL Cholesterol | : 12 | 2 - 30 mg/dl | |
| LDL Cholesterol | : 118 | 0 - 100 mg/dl | |
| Cholestrol / HDL Ratio | : 3.71 | 1.0 - 3.5 | Calculated |
| Blood Urea Nitrogen(BUN) | : 16 | 6 - 21 mg/dl | GLDH - Urease |
| LFT- LIVER FUNCTION TESTS | | | |
| Total Bilirubin | : 0.4 | 0.2 - 1.2 mg/dl | Diazo |
| Direct Bilirubin | : 0.2 | 0.0 - 0.3 mg/dl | Diazo |
| Indirect Bilirubin | : 0.2 | 0.2 - 0.7 mg/dL | Calculated |
| SGPT | : 28 | 05 - 40 IU/L | IFCC - Kinetic |
| SGOT | : 20 | 05 - 40 IU/L | IFCC - Kinetic |
| AST / ALT -Ratio | : 0.71 | | Calculated |
| Alkaline Phosphatase | : 90 | 70 - 110 U/L | AMP Kinetic |
| Total Protein | : 7.1 | 6.4 - 8.3 gm/dl | Biuret Method |
| Serum Albumin | : 4.5 | 3.5 - 5.2 gm/dl | BCG Dye |
| Serum Globulin | : 2.6 | 2.0 - 3.5 g/dL | Calculated |

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| Bill Date | : 29-Mar-24 11:19 am | Bill No | : BIL175738 |
| Lab No | : 175738 | Result No | : RES500480 |
| Samp.Coll | : 29-Mar-24 11:37 am | Auth. Tim | : 29-Mar-2024 2:01 pm |
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| | | | |
|--------------------------|--------|-----------|--|
| Albumin / Globulin Ratio | : 1.73 | 1.2 - 2.2 | |
|--------------------------|--------|-----------|--|

THYROID PROFILE

| | | | |
|---------------------------------|-------|-----------------|------|
| T3-Free (Triiodothyronine-Free) | : 3.4 | 2.0 - 4.2 pg/mL | CLIA |
|---------------------------------|-------|-----------------|------|

| | | | |
|--------------------------|--------|------------------|------|
| T4-Free (Thyroxine-Free) | : 13.3 | 8.9 - 17.2 pg/ml | CLIA |
|--------------------------|--------|------------------|------|

| | | | |
|-----------------------------------|-------|------------------|------|
| TSH(Thyroid Stimulating Hormone). | : 4.8 | 0.3 - 4.5 µIU/ml | CLIA |
|-----------------------------------|-------|------------------|------|

| | | | |
|----------------------------------|--------|-------------|------|
| PROSTATE SPECIFIC ANTI GEN(PSA) | : 0.25 | < 4.0 ng/ml | CLIA |
|----------------------------------|--------|-------------|------|

| | |
|----------------|---|
| Interpretation | : Measurement of serum PSA levels is not recommended as a screening procedure for the diagnosis of cancer because elevated PSA levels also are observed in patients with benign prostatic hypertrophy. However, studies suggest that the measurement of PSA in conjunction with digital rectal examination (DRE) and ultrasound provide a better method of detecting prostate cancer than DRE alone. |
| | : PSA levels increase in men with cancer of the prostate, and after radical prostatectomy PSA levels routinely fall to the undetectable range. If prostatic tissue remains after surgery or metastasis has occurred, PSA appears to be useful in detecting residual and early recurrence of tumor. Therefore, serial PSA levels can help determine the success of prostatectomy, and the need for further treatment, such as radiation, endocrine or chemotherapy, and in the monitoring of the effectiveness of therapy. |

--- End Of Report ---

PHH8349





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| Bill Date | : 29-Mar-24 11:19 am | Bill No | : BIL175738 |
| Lab No | : 175738 | Result No | : RES500510 |
| Samp.Coll | : 29-Mar-24 11:37 am | Auth. Tim | : 29-Mar-2024 2:28 pm |
| Reported On | : 29-Mar-24 02:28 pm | | |

| <u>Parameter</u> | <u>Result</u> | <u>Biological Reference Interval</u> | <u>Method</u> |
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Dr.B PRATHYUSHA
MD BIOCHEMIST
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Dr.Y NIHARIKA REDDY
M.D PATHOLOGY
CONSULTANT PATHOLOGIST

Dr.SAMATHA
MD Microbiology
CONSULTANT MICROBIOLOGIST

DEPARTMENT OF HAEMATOLOGY

| | | | |
|--------------|----------------------------|-----------|-----------------------|
| Patient Name | : Mr. GAJJI VIJAYA BHASKER | Age / Sex | : 42 Y(s)/Male |
| Ref By | : Dr. GENERAL PHYSICIAN | UMR No | : UMR100213 |
| Bill Date | : 29-Mar-24 11:19 am | Bill No | : BIL175738 |
| Lab No | : HEM/24/3/1273 | Result No | : RES500417 |
| Samp.Coll | : 29-Mar-24 11:37 am | Auth. Tim | : 29-Mar-2024 1:50 pm |
| Reported On | : 29-Mar-24 01:50 pm | | |

| <u>Parameter</u> | <u>Result</u> | <u>Biological Reference Interval</u> |
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|------------------|---------------|--------------------------------------|

COMPLETE BLOOD PICTURE

| | | | |
|----------------|---|-------------------|-------------------------|
| Haemoglobin | : | 13.0 gm% | 13.0 - 17.0 gm% |
| RBC Count | : | 4.5 Millions/cumm | 4.5-6.5 Millions/cumm |
| PCV | : | 37 Vol% | 40 - 50 Vol% |
| Platelet count | : | 2.9 Lakhs/Cumm | 1.5 - 4.5 Lakhs/Cumm |
| WBC Count | : | 7,800 cells/cumm | 4000 - 11000 cells/cumm |

DIFFERENTIAL COUNT

| | | | |
|-------------|---|------|-----------|
| NEUTROPHILS | : | 63 % | 40-75 % |
| LYMPHOCYTES | : | 30 % | 20 - 45 % |
| EOSINOPHILS | : | 02 % | 2-6 % |
| MONOCYTES | : | 05 % | 2-8 % |
| BASOPHILS | : | 00 % | 0 - 2 % |
| Others | : | | |

SMEAR EXAMINATION

| | | |
|-----------|---|---------------------------|
| RBC | : | Normocytic / Normochromic |
| WBC | : | With In Normal Limits |
| Platelets | : | Adequate |

BLOOD GROUPING & RH TYPING

| | | | |
|-------------|---|----------|---------------|
| BLOOD GROUP | : | " O " | Agglutination |
| RH TYPING | : | POSITIVE | |

--- End Of Report ---



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| Bill Date | : 29-Mar-24 11:19 am | Bill No | : BIL175738 |
| Lab No | : 175738 | Result No | : RES500423 |
| Samp.Coll | : 29-Mar-24 11:37 am | Auth. Tim | : 29-Mar-2024 12:52 pm |
| Reported On | : 29-Mar-24 12:52 pm | | |

Parameter

Result

Method

PHH8624



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MD Microbiology
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DEPARTMENT OF CLINICAL PATHOLOGY

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| Bill Date | : 29-Mar-24 11:19 am | Bill No | : BIL175738 |
| Lab No | : 175738 | Result No | : RES500450 |
| Samp.Coll | : 29-Mar-24 11:37 am | Auth. Tim | : 29-Mar-2024 1:50 pm |
| Reported On | : 29-Mar-24 01:50 pm | | |

| <u>Parameter</u> | <u>Result</u> | <u>Biological Reference Interval</u> | <u>Method</u> |
|--|---------------|--------------------------------------|----------------------------|
| COMPLETE URINE EXAMINATION | | | |
| <u>PHYSICAL EXAMINATION:</u> | | | |
| Colour | : Pale Yellow | | |
| Appearance | : Clear | | |
| pH | : 5.5 | 5.5 - 7.0 | pH indicator |
| Specific gravity | : 1.030 | 1.010 - 1.025 | Bromthymol blue indicator |
| <u>CHEMICAL EXAMINATION:</u> | | | |
| Urine for Sugar | : Nil | 0 - 2.8 mmol/L | GOD-POD |
| Protein | : Nil | 0 - 0.15 g/L | protein error of indicator |
| Blood | : Nil | 0 - 10 Cells/ μ L | |
| Bilirubin | : Nil | 0 - 0 μ mol/L | Diazonium method |
| NITRITE | : Absent | 13 - 22 μ mol/L | |
| Leukocytes | : Nil | 05 - 15 leuko/ μ L | |
| Ketone bodies | : Negative | 0 - 0 mmol/L | Nitroprusside reaction |
| <u>MICROSCOPIC EXAMINATION:</u> | | | |
| Pus Cells | : 1-2 | 0 - 5 /HPF | |
| Epithelial Cells | : 1-2 | 0 - 8 /HPF | |
| RBC COUNT | : Nil | 0 - 2 /HPF | |
| Casts | : Nil | | |
| Crystals | : Nil | | |
| Others | : Nil | | |
| ESR - ERYTHROCYTE SEDIMENT RATE | | | |
| ESR - ERYTHROCYTE SEDIMENTATION RATE | : 12 | < 15 mm | |

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| Bill Date | : 29-Mar-24 11:19 am | Bill No | : BIL175738 |
| Lab No | : 175738 | Result No | : RES500475 |
| Samp.Coll | : 29-Mar-24 11:37 am | Auth. Tim | : 29-Mar-2024 1:50 pm |
| Reported On | : 29-Mar-24 01:50 pm | | |

STOOL EXAMINATION

PHYSICAL EXAMINATION

Colour : Brownish Yellow

CONSISTENCY : Solid

Mucus : Absent

Blood. : Absent

MICROSCOPE EXAMINATION

Pus Cells : 1-2 0 - 5 /HPF

RBC COUNT : Nil 0 - 2 /HPF

Ova : Absent

Cysts : Absent

Vegetable Cell : Present

Others : Nil

PHH8349
Verified by



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DEPARTMENT OF CARDIOLOGY

| | | | |
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| Ref By | : Dr. GENERAL PHYSICIAN | UMR No | : UMR100213 |
| Bill Date | : 29-Mar-24 11:19 am | Bill No | : BIL175738 |
| Lab No | : 0 | Result No | : RES500448 |
| Samp.Coll | : 29-Mar-24 11:19 am | Auth. Tim | : |
| Reported On | : 29-Mar-24 01:11 pm | | |

2D ECHO / TMT

| | | | | |
|-----------------|---|-------------|-----------|---------|
| MITRAL VALVE | : | Normal | | |
| TRICUSPID VALVE | : | Normal | | |
| AORTIC VALVE | : | Trileaflets | | |
| PULMONARY VALVE | : | Normal | | |
| RIGHT ATRIUM | : | Normal | | |
| RIGHT VENTRICLE | : | Normal | | |
| LEFT ATRIUM | : | 3.6cm | | |
| LEFT VENTRICLE | : | EDD: 5.2cm | IVS: 9mm | FS: 32% |
| | | ESD: 3.5cm | LVPW: 8mm | |
| LVEF | : | 60% | | |
| IAS | : | Intact | | |
| IVS | : | Intact | | |
| AORTA | : | 3.0cm | | |
| IVC | : | Collapse | | |

DEPARTMENT OF CARDIOLOGY

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| Bill Date : 29-Mar-24 11:19 am | Bill No : BIL175738 |
| Lab No : 0 | Result No : RES500448 |
| Samp.Coll : 29-Mar-24 11:19 am | Auth. Tim : |
| Reported On : 29-Mar-24 01:11 pm | |

| | | |
|---------------------|---|--|
| PULMOANRY VEINS | : | Normal |
| PERICARDIUM | : | No effusion |
| INTRACARDIAC MASSES | : | Nil |
| PJV | : | 0.7m/sec |
| AJV | : | 1.2m/sec |
| MVF-E | : | 1.0m/sec |
| MVF-A | : | 0.6m/sec |
| NO MR, NO AR, NO TR | : | GRADE I MR ; TRIVIAL TR / NO PH ; NO AS / AR |
| IMPRESSION | : | NO LV RWMA GOOD LV / RV FUNCTION GRADE I MR NO AS / AR TRIVIAL TR / NO PH NO CLOT / PE / VEGETATION |

Cardiologist

DEPARTMENT OF RADIOLOGY

| | |
|---|--|
| Patient Name :Mr. GAJJI VIJAYA BHASKER | Age / Gender : 42 Y(s) / Male |
| Requested Date :29-Mar-2024 11:19 AM | UMR No : UMR100213 |
| Reported Date :29-Mar-2024 12:51 PM | Result/ Bill No : RES500428 / BIL175738 |
| Referred By :Walk-In | Lab No : 0 |
| Advised By :Dr.GENERAL PHYSICIAN | |

US ABDOMEN AND PELVIS

FINDINGS

LIVER: 156mm, normal in size and echotexture. No focal lesions noted. No intra hepatic biliary dilatation. CBD (3mm)and Portal vein (9mm)appear normal in course and calibre.

GALL BLADDER: Well distended. No evidence of sludge / calculus. No evidence of wall thickening / pericholecystic collection.

PANCREAS: Normal in size and echotexture. Pancreatic duct appears normal. No peri pancreatic collection.

SPLEEN: 81mm, normal in size and echotexture.

BOTH KIDNEYS: Right: 88 x 42mm. Left : 93 x 46mm. Both kidneys are normal in size and echotexture. CMD is maintained. No evidence of calculi. Pelvicalyceal system appears normal on both sides.

Aorta and IVC: are normal.No evidence of para-aortic or paracaval lymphadenopathy.

URINARY BLADDER: Well distended. Wall thickness is normal.

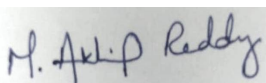
PROSTATE: Normal in size and echotexture. Volume=17cc.

No evidence of ascites.

IMPRESSION

NO OBVIOUS ABNORMALITY.




Dr. AKHIL REDDY, MBBS, MD
CONSULTANT RADIOLOGIST

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| Requested Date :29-Mar-2024 11:19 AM | UMR No : UMR100213 |
| Reported Date :29-Mar-2024 05:45 PM | Result/ Bill No : RES500606 / BIL175738 |
| Referred By :Walk-In | Lab No : 0 |
| Advised By :Dr.GENERAL PHYSICIAN | |

X-RAY CHEST PA VIEW

FINDINGS

Unfolding of aorta

Heart size is normal.

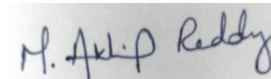
Both lung fields clear.

Both hila normal.

Both CP angles free.

Soft tissue chest wall and bony cage normal.




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