26-Oct-2024 AM9:11:34

ID: 24007148
Name: MR CHIRANJEEVI

ex: M Birth date: 34 years

cm kg / mmHg

1100 Sinus rhythm
9110 ** normal ECG **

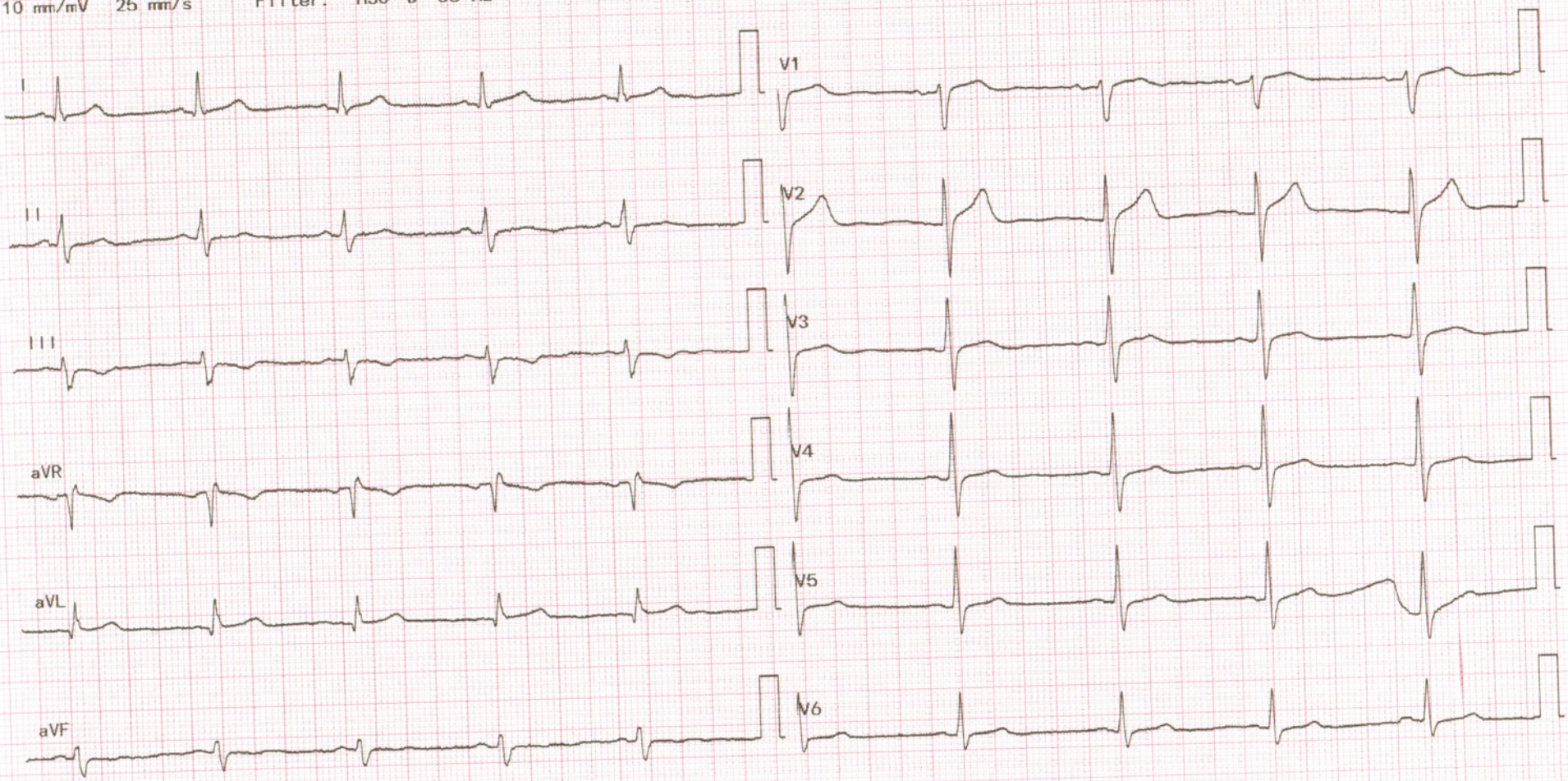
edication:
ymptoms:
istory:

ent. rate	61	bpm
R int	136	ms
RS dur	98	ms
T/QTc(E) int	388/ 391	ms
/QRS/T axis	42/ -6/ -4	°
V5/SV1 amp	1.06/ 0.49	mV
V5+SV1 amp	1.56	mV

Unconfirmed Report
Reviewed by:

10 mm/mV 25 mm/s Filter: H50 D 35 Hz

10 mm/mV



2350K 03-08 07-01 Dept.:

Exam: UNITED HOSPITAL

DEPARTMENT OF RADIODIAGNOSIS

Name	Chiranjeevi C A	**Date**	26/10/24
Age	41 years	**Hospital ID**	UHJA24007148
Sex	Male	**Ref.**	Health check

ULTRASOUND ABDOMEN AND PELVIS

FINDINGS:

Liver is normal in size and ***shows mildly increased echopattern.*** No intra or extra hepatic biliary duct dilatation. No focal lesions. **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 - Visualized part of the pancreatic head and body appears normal in size, contour and echogenicity. Rest of the pancreas is obscured by bowel gas.

Spleen is normal in size, shape, contour and echopattern. No focal lesion.

Right Kidney is normal in size (8.8 x 3.6 cms), position, shape and echopattern. Corticomedullary differentiation is maintained. No calculus or hydronephrosis.
Left Kidney is normal in size (10.1 x 4.4 cms), position, shape and echopattern. Corticomedullary differentiation is maintained. No calculus or hydronephrosis.

Retroperitoneum - Visualized aorta appeared normal. No obvious enlarged para-aortic nodes.

Urinary Bladder is distended, normal in contour and wall thickness. No evidence of calculi.

Prostate is normal in echopattern and size, measures ~ 9.3 cc.

No ascites or pleural effusion. Appendix could not be localized. No RIF probe tenderness.

IMPRESSION:

- **Mild fatty infiltration of liver (Grade I).**
- **No other definite sonological abnormality detected.**

Dr. Elluru Santosh Kumar
Consultant Radiologist

PATIENT NAME :	Mr. CHIRANJEEVI C A	DATE :	26/10/24
AGE :	34 YEARS GENDER : MALE	PATIENT ID :	24007148
REF BY :	CMO	OP/ IP :	HEALTH CHECK

2D- ECHOCARDIOGRAPHY

M - MODE AND DOPPLER MEASUREMENTS

(cm)	(cm)	(cm/sec)		
AO : 2.8 (2.5-3.7)	LVIDD : 4.1 (3.5-5.5)	MV EV: 1.0	AV: 0.6	MR : NORMAL
LA : 3.5 (1.9-4.0)	LVIDS : 2.7 (2.4-4.2)	AV : 1.1		AR : NORMAL
RA : 2.1 (<4.4)	IVSD : 1.1 (0.6-1.1)	PV : 0.6		PR : NORMAL
RV : 2.0 (<3.5)	IVSS : 1.0 (0.9-1.2)	TV EV : ----	AV : ----	TR : TRIVIAL TR, PASP-28mmHg
TAPSE : 1.9 (>1.6)	LVPWD : 1.1 (0.6-1.1)	Diastolic Function : NO LVDD		
	LVPWS : 1.2 (0.9-1.2)			
	EF : 60%			

DESCRIPTIVE FINDINGS

Left Ventricle	: NORMAL
Right Ventricle	: NORMAL
Left Atrium	: NORMAL
Right Atrium	: NORMAL
Wall motion analysis	: NO RWMA
Mitral Valve	: NORMAL
Aortic Valve	: NORMAL
Tricuspid Valve	: NORMAL
Pulmonary Valve	: NORMAL
IAS	: INTACT
IVS	: INTACT
Pericardium	: NORMAL
Other Findings	: IVC NORMAL AND COLLAPSING

IMPRESSION:

BRADYCARDIA OBSERVED DURING THE STUDY (HR – 53 bpm)
NORMAL CHAMBER DIMENSIONS
NORMAL LV SYSTOLIC FUNCTION EF : 60%
NORMAL LV DIASTOLIC FUNCTION
NO PULMONARY ARTERY HYPERTENSION
NO REGIONAL WALL MOTION ABNORMALITIES
NO CLOTS/ PERICARDIAL EFFUSION /VEGETATION

DR. RAHUL S PATIL
CONSULTANT CARDIOLOGIST

NABH No.1

UNITED HOSPITAL
Care Par Excellence
Jayanagar, Bangalore

DEPARTMENT OF RADIODIAGNOSIS

Name	Chiranjeevi C A	**Date**	26/10/24
Age	41 years	**Hospital ID**	UHJA24007148
Sex	Male	**Ref.**	Health check

RADIOGRAPH OF THE CHEST (PA – VIEW)

FINDINGS:

Bilateral lung fields are normal.

Bilateral costo-phrenic angles are normal.

Cardia and mediastinal contours are normal.

The bony thorax is grossly normal.

IMPRESSION:

- **No radiographic abnormality.**

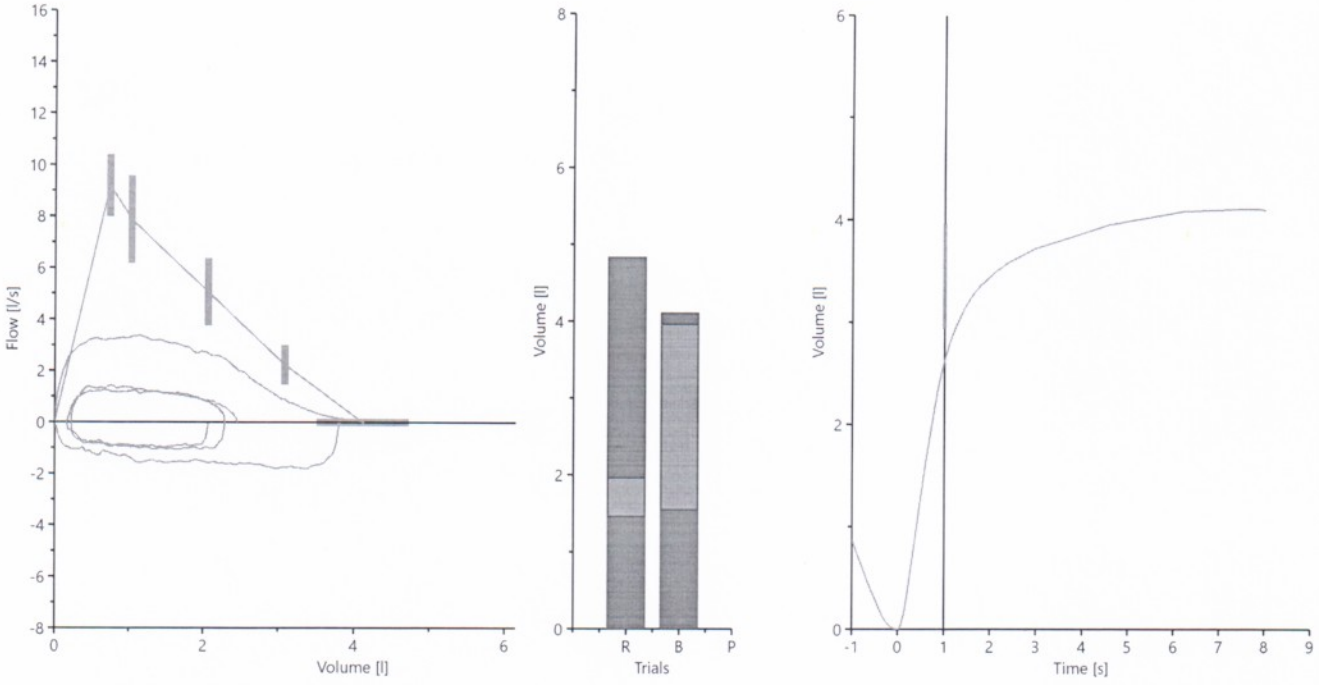
Dr. Elluru Santosh Kumar
Consultant Radiologist

UNITED HOSPITAL
Care Par Excellence
Jayanagar, Bangalore

Lung Function | Respiratory Diagnostics

Last name	C A	Age	34 years	BMI	24.1
First name	MR.CHIRANJEEVI	Height	171.0 cm	Visit ID	HEALTH CHECK
Date of birth	10/10/1990	Weight	70.5 kg	Smoker	
Patient Id	24007148	Gender	male	Diagnosis	

Measured: 10/26/2024 9:08 AM LFX 1.9.0 Ambient: 27.6 °C 901 hPa 64.3 % 10/26/2024 9:10 AM LFX 1.9.0
Ref. module: ECCS93



		Pred	Pre	% Pred	Z-Score
VC IN	**[L]**	4.30	3.80	89 %	-0.9
FVC	**[L]**	4.12	4.13	100 %	0.0
FEV 1	**[L]**	3.45	2.78	81 %	-1.3
FEV1%VCin	**[%]**	81.09	73.17	90 %	-1.1
MEF 75	**[L/s]**	7.88	3.32	42 %	-2.7
MEF 50	**[L/s]**	5.08	2.72	54 %	-1.8
MEF 25	**[L/s]**	2.24	0.92	41 %	-1.7
MMEF	**[L/s]**	4.56	2.13	47 %	-2.3
PEF	**[L/s]**	9.19	3.37	37 %	-4.8

Interpretation

/* Automatic Interpretation - Forced Spirometry - 9:08 AM: Spirometry results are within normal limits. /*

NABH No.1

Out Patient Record

UNITED HOSPITAL
Care Par Excellence
Jayanagar, Bangalore

Patient Name	**: Mr.CHIRANJEEVI C A**	**UHID**	**: UHJA24007148**
Age / Sex	: 34 Years / Male	OP NO/Reg Dt	: 26-10-2024 08:43 AM
Spouse / Father Name	: .	Department	:
Address	: ., , Bengaluru Urban, Karnataka, INDIA,	Refered By	:
		Consultant	: Dr.Ashmitha Padma MBBS, MD (GENERAL MEDICINE), PGDCC,FEM
		KMC No.	: 02M1087

Complaints / Findings / Observations :

Ht- 171 cm
Wt- 70.5kg
BP- 116 / 64 mmHg
PR- 69bpm
SpO2 - 98%

Investigations:

Treatment / Care of Plan / Provisional Diagnosis :

Follow Up Advice :

Signature of the Doctor

UNITED HOSPITAL
Care Par Excellence

DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mr. CHIRANJEEVI C A	Order No	: 1000100830
UHID	: UHJA24007148	Registered On	: 26/10/2024 08:43:01 AM
Age/Sex	: 34/Years Male	Collected On	: 26/10/2024 08:55:03 AM
Ward / Bed No	:	Reported On	: 26/10/2024 12:40:04 PM
Reference	: Dr. Ashmitha Padma	Bill No	: OPBJA240009732
Station	: At Hospital	Mobile No	: 7760094717
Payer Name	: Mediwheel	Report Status	: Final Report

Test Name	Result	Unit	Bio. Ref. Interval
	BIOCHEMISTRY		
FASTING GLUCOSE (Method: Hexokinase)	88	mg/dL	ADA Guidelines < 100 mg/dl - Normal 100 to 125 mg/dl - Prediabetes ≥ 126 mg/dl - Diabetes
POST PRANDIAL GLUCOSE (Method: Hexokinase)	112	mg/dL	70-140
GLYCOSYLATED HAEMOGLOBIN (HBA1C)			Sample: Whole blood (EDTA)
HBAIC (Method: HPLC)	4.6	%	ADA Guidelines < 5.7% - Normal 5.7 to 6.4% - Prediabetes ≥ 6.5% - Diabetes
Estimated Average Glucose (eAG) (Method: Calculated)	85	mg/dL	
THYROID PROFILE (TOTAL T3, TOTAL T4 & TSH)			Sample: Serum
TOTAL T3 (Method:CLIA)	1.02	ng/mL	0.87-1.78
TOTAL T4 (Method:CLIA)	11.09	≈g/dL	5.1-14.1
THYROID STIMULATING HORMONE (TSH) (Method:CLIA: Ultra-sensitive)	2.67	ı IU/mL	0.34-5.60
LIPID PROFILE			Sample: Serum
TOTAL CHOLESTEROL (Method:CHOD-POD)	180	mg/dL	ATP III Guidelines < 200 - Desirable 200-239 - Borderline high ≥ 240 - High
TRIGLYCERIDES (Method:Enzymatic GPO-POD)	176	mg/dL	< 150 - Normal 150-199 - Borderline High 200-499 - High ≥ 500 - Very High
HDL CHOLESTEROL (Method:ENZYMATIC METHOD)	38.6	mg/dL	< 40 - Low ≥ 60 - High

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Test Name	Result	Unit	Bio. Ref. Interval
LDL CHOLESTEROL (Method: Calculated)	106.20	mg/dL	<100 - Optimal 100-129 - Near or above optimal 130-159 - Borderline high 160-189 - High ≥190 - Very high
VLDL CHOLESTEROL (Method: Calculated)	35.20	mg/dL	< 30
TOTAL CHOLESTEROL : HDL RATIO (Method: Calculated)	4.66		Low Risk: 3.3 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0
LDL/HDL CHOLESTEROL RATIO (Method: Calculated)	2.75		< 2.5 Optimal
NON HDL CHOLESTEROL (Method: Calculated)	141.40	mg/dL	< 130
KIDNEY FUNCTION TEST			Sample: Serum
UREA (Method:Urease GLDH - Kinetic)	19.4	mg/dL	17-43
CREATININE (Method:Modified Jaffe, Kinetic)	0.85	mg/dL	0.9-1.3
URIC ACID (Method:Uricase - POD(Enzymatic))	6.0	mg/dL	3.5-7.2
ELECTROLYTES			
SODIUM (Method:ION SELECTIVE ELECTRODE)	138.5	mmol/L	136-145
POTASSIUM (Method:ION SELECTIVE ELECTRODE)	3.89	mmol/L	3.5-5.1
CHLORIDE (Method:ION SELECTIVE ELECTRODE)	103.5	mmol/L	98-107
BLOOD UREA NITROGEN(BUN) (Method:Urease GLDH - Kinetic)	9	mg/dL	7.93-20.07

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Reference	: Dr. Ashmitha Padma	Bill No	: OPBJA240009732
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Test Name	Result	Unit	Bio. Ref. Interval
LIVER FUNCTION TEST			Sample: Serum
TOTAL BILIRUBIN (Method:Dichlorophenyl Diazotization)	0.76	mg/dL	0.3-1.2
DIRECT BILIRUBIN (Method:Dichlorophenyl Diazotization)	0.17	mg/dL	0.0-0.2
INDIRECT BILIRUBIN (Method: Calculated)	0.59	mg/dL	0.2-1.0
TOTAL PROTEIN (Method:BIURET)	7.0	g/dL	6.6-8.3
ALBUMIN (Method:BCG)	4.83	g/dL	3.5-5.2
GLOBULIN (Method: Calculated)	2.17	g/dL	2.3-3.5
AG RATIO (Method: Calculated)	2.23		2:1
SERUM SGOT (Method:IFCC without P5P)	24	U/L	< 50
SERUM SGPT (Method:IFCC without P5P)	30	U/L	< 50
ALKALINE PHOSPHATASE, SERUM (Method:PNPP AMP Buffer)	76	U/L	50-116
GGT (Method:IFCC)	17	U/L	< 55
PROSTATE SPECIFIC ANTIGEN (PSA) (Method:CLIA)	0.36	ng/mL	< 4.0

Interpretation Notes

Serum PSA concentrations should not be interpreted as absolute evidence for the presence or absence of malignant disease nor should serum PSA be used alone as a screening test for malignant disease. For diagnostic purposes, the results obtained by immunometric assay should always be used in combination with the clinical examinations, patient medical history and other findings. The concentration of PSA in a given specimen, determined with assays from different manufacturers, may not be comparable due to differences in assay methods, calibration, and reagent specificity.

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Test Name	Result	Unit	Bio. Ref. Interval
PHOSPHOROUS (Method:Phospho Molybdate)	3.3	mg/dL	2.5-4.5
CALCIUM (Method:Arsenazo III)	9.8	mg/dL	8.8-10.6
VITAMIN D (25-OH) (Method:CLIA)	41.3	ng/mL	<20 ng/mL - Deficient 20-29 ng/mL - Insufficient 30-100 ng/mL - Sufficient >100 ng/mL - Toxic

Interpretation Notes

Vitamin D is a lipid-soluble steroid hormone that is produced in the skin through the action of sunlight or is obtained from dietary sources. Vitamin D promotes absorption of calcium and phosphorus and mineralization of bones and teeth. Deficiency in children causes Rickets and in adults leads to Osteomalacia. Less severe vitamin D inadequacy may lead to secondary hyperparathyroidism and subsequently increasing the risk of osteoporosis. Vitamin D status is best determined by measurement of 25 hydroxy vitamin D, as it is the major circulating form and has longer half life (2-3 weeks) than 1,25 Dihydroxy vitamin D (5-8 hrs).

VITAMIN B12 (Method:CLIA)	998	pg/mL	180-914

Interpretation Notes

Vitamin B12 or Cobalamin assay helps to diagnose the cause of anemia or neuropathy; to evaluate nutritional status in some patients; to monitor effectiveness of treatment for B12 deficiency. Vitamin B12 is necessary for normal RBC formation, tissue and cellular repair, and DNA synthesis. Vitamin B12 is also important for nerve health; a deficiency in either B12 or Folate can lead to macrocytic anemia. Interpretation of the result should be considered in relation to clinical circumstances. The concentration of Vitamin B12 obtained with different assay methods cannot be used interchangeably due to differences in assay methods and reagent specificity.

Dr. Varsha Shree R
M.D(Pathology)
CONSULTANT PATHOLOGIST
KMC No : 103567

UNITED HOSPITAL
Care Par Excellence

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HAEMATOLOGY

COMPLETE BLOOD COUNT(CBC)

Sample: Whole blood (EDTA)

Test Name	Result	Unit	Bio. Ref. Interval
HAEMOGLOBIN (Method:Photometric Measurement: Oxyhemoglobin method)	15.48	g/dL	13.5-17.5
PACKED CELL VOLUME/HEMATOCRIT (PCV/HCT) (Method: Calculated)	44.4	%	42-52
TOTAL WBC COUNT (TLC) (Method:Coulter Principle)	4390	Cells/Cum	4000-11000
DIFFERENTIAL COUNT			
NEUTROPHILS (Method:Optical/Impedance)	52.91	%	40-75
LYMPHOCYTES (Method:Optical/Impedance)	39.55	%	20-45
EOSINOPHILS (Method:Optical/Impedance)	0.64	%	0-6
MONOCYTES (Method:Optical/Impedance)	6.50	%	2-10
BASOPHILS (Method:Optical/Impedance)	0.40	%	0-2
RED BLOOD CORPUSCLES(RBC) (Method:Coulter Principle)	5.23	million/cum	4.5-5.9
MCV (Method:Derived from RBC Histogram)	84.9	fL	78-100
MCH (Method: Calculated)	29.6	pg	27-31
MCHC (Method: Calculated)	34.9	g/dL	31-37
RDW - CV (Method: Calculated)	13.6	%	11.5-14.5
PLATELET COUNT (Method:Electrical Impedance)	1.90	Lakhs/Cum	1.5-4.5

UNITED HOSPITAL
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Test Name	Result	Unit	Bio. Ref. Interval
MEAN PLATELET VOLUME(MPV) (Method:Derived from PLT Histogram)	7.09	fl	9-13
PLATELET DISTRIBUTION WIDTH (PDW) (Method: Calculated)	16.4	fl	9-19
ABSOLUTE NEUTROPHIL COUNT (ANC) (Method: Calculated)	2320	Cells/Cum	1500-7500
ABSOLUTE EOSINOPHIL COUNT (AEC) (Method: Calculated)	30	Cells/Cum	40-440
ABSOLUTE LYMPHOCYTE COUNT (ALC) (Method: Calculated)	1740	Cells/Cum	1000-4000
ABSOLUTE MONOCYTE COUNT (AMC) (Method: Calculated)	290	Cells/Cum	200-1000
ABSOLUTE BASOPHIL COUNT (ABC) (Method: Calculated)	20	Cells/Cum	20-100
ERYTHROCYTE SEDIMENTATION RATE(ESR) (Method:Modified Westergren Method)	07	mm/hour	1-15

Dr. Varsha Shree R
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Test Name	Result	Unit	Bio. Ref. Interval
CLINICAL PATHOLOGY			
URINE SUGAR, FASTING (Method:GOD-POD)	Absent		
URINE SUGAR (POST PRANDIAL)	Absent		

Verified By
G Mahesh kumar

---End of Report---

Varshashree.R

Dr. Varsha Shree R
M.D(Pathology)
CONSULTANT PATHOLOGIST
KMC No : 103567