



# Balaji Medical Centre

An ISO 9001:2015 Accredited Organization  
info@balajimedicalcentre.com, dr@balajimedicalcentre.com



- CHENNAI** : No.5 (3/2), Jagadeeswaran Street, T.Nagar, Chennai-600 017. INDIA ☎ : 044-24364651 / 52 / 53  
No.38, Manikodi Srinivasan Nagar Main Road, Rajiv Gandhi Salai, Perungudi, Chennai-600 096. INDIA ☎ : 044-29865513 / 14
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- CUDDALORE** : No.26, Dowlath Nagar, Semmandaiam, Cuddalore - 607001.INDIA ☎ : 04142-202150,203150
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- KAKINADA** : 70-17-15/1, RR Nagar, Road No.2, Kakinada, Andhra Pradesh -533003.INDIA ☎ : 0884-2345555, 0884-3500132.

**REG. NO: MA23080000312**

**DATE:26/08/2023**

## **MEDICAL FITNESS CERTIFICATE**

This is to certify that I have examined **MR. DARLA VENKATESWARA RAO (48/M)**

Who is found to be Medically **FIT**.

He is not found to be suffering from any contagious Disease or Ailment.

He is FIT to perform his duty.

Dietary Counseling was provided from our end.

**Dr. VIDYA KUMARI**

Reg.No. 10306

DOB Approval No. KAMG/06/2022

**“HEALTHIER MARINERS TOWARDS A WEALTHIER NATION”**



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## PHYSICAL EXAMINATION

Date Of Exam : 26/08/2023 Reg. No:MA23080000312

Name : MR. DARLA VENKATESWARA RAO (48/Male)

Type Of Exam : Physical

Reference : Apollo Health and Lifestyle Limited

The doctor has examined this client at Balaji Medical Centre Mangalore for updated Physical examination and found the following.

Temperature : 36.0C  
Blood Pressure : 120/90mmHg  
Pulse : 60/min  
Respiration Rate : 18/min  
Waist (cm) : 90Cms  
Height : 170Cms  
Weight : 76.0Kgs  
BMI : 26.3kg/m<sup>2</sup>

  
Dr. VIDYA KUMARI  
Reg No. 10308  
DCC Approval No. KAMG/08/2022

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**Name: Mr. DARLA VENKATESWARA RAO**

**Date: 26/08/2023**

**Reg. No : MA23080000312**

**Ref : Dr. A.H.Balaji**

## OPHTHALMIC REPORT

|                        | RIGHT  | LEFT   |
|------------------------|--------|--------|
| Distant: (Unaided)     | 6/6    | 6/9    |
| Distant: (Aided)       | 6/6    | 6/6    |
| Near: (Unaided)        | N/18   | N/18   |
| Near: (Aided)          | N/5    | N/5    |
| Colour:                | Normal | Normal |
| Anterior Segment:      | Normal | Normal |
| Intra Ocular Pressure: | Normal | Normal |
| Fundus:                | Normal | Normal |

  
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## LABORATORY REPORT

DATE : 26/08/2023 REG. NO : MA23080000312  
 NAME : MR. DARLA VENKATESWARA RAO  
 AGE : 48YRS SEX : MALE  
 REF BY : DR.A.H.BALAJI

### COMPLETE BLOOD COUNT (CBC)

| INVESTIGATION                       | OBSERVED VALUE | UNIT                | BIOLOGICAL REFERENCE INTERVAL |
|-------------------------------------|----------------|---------------------|-------------------------------|
| ERYTHROCYTE (RBC) COUNT             | 5.8            | mill/cu.mm          | 4.7-6.0                       |
| HAEMOGLOBIN (Hb)                    | 16.6           | gm/dl               | 13.5-18                       |
| PCV (PACKED CELL VOLUME)            | 49.8           | %                   | 42-52                         |
| MCV (MEAN CORPUSCULAR VOLUME)       | 90.7           | fl                  | 78-100                        |
| MCH (MEAN CORPUSCULAR HAEMOGLOBIN ) | 28.2           | pg                  | 27-31                         |
| MCHC (MEAN CORPUSCULAR Hb CONC.N.)  | 32.1           | g/dl                | 32-36                         |
| RDW (RED CELL DISTRIBUTION WIDTH)   | 13.8           | %                   | 11.5-14.0                     |
| TOTAL LEUCOCYTES (WBC) COUNT        | 7200           | Cells /cu.mm        | 4000-10500                    |
| ABSOLUTE NEUTROPHILS COUNT          | 3600           | /c.mm               | 2000-7000                     |
| ABSOLUTE LYMPHOCYTE COUNT           | 2900           | /c.mm               | 1000-3000                     |
| ABSOLUTE MONOCYTE COUNT             | 500            | /c.mm               | 200-1000                      |
| ABSOLUTE EOSINOPHIL COUNT           | 140            | /c.mm               | 20-500                        |
| ABSOLUTE BASOPHIL COUNT             | 90             | /c.mm               | 20-100                        |
| NEUTROPHILS                         | 50.0           | %                   | 40-80                         |
| LYMPHOCYTES                         | 40.0           | %                   | 20-40                         |
| MONOCYTES                           | 7.0            | %                   | 2-10                          |
| EOSINOPHILS                         | 2.0            | %                   | 1-6                           |
| BASOPHILS                           | 1.0            | %                   | 0-2                           |
| PLATELET COUNT                      | 1.7            | 10 <sup>3</sup> /μl | 1.50-4.50                     |
| MPV (MEAN PLATELET VOLUME)          | 7.6            | fl                  | 6-9.5                         |
| PCT (PLATELET HAEMATOCRIT)          | 0.2            | %                   | 0.2-0.5                       |
| PDW (PLATELET DISTRIBUTION WIDTH)   | 16.9           | %                   | 9-17                          |

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## LABORATORY REPORT

DATE : 26/08/2023 REG. NO : MA23080000312

NAME : MR. Mr. DARLA VENKATESWARA RAOCHANDRAHASA

AGE : 48YRS SEX : MALE

REF BY : DR.A.H.BALAJI

### ROUTINE EXAMINATION URINE

| INVESTIGATION  | OBSERVED VALUE | UNIT | BIOLOGICAL REFERENCE INTERVAL |
|--|----------------|------|-------------------------------|
| <b>GENERAL EXAMINATION:</b>                              |                |      |                               |
| COLOUR   | PALE YELLOW    |      | PALE YELLOW                   |
| APPEARANCE   | CLEAR          |      | CLEAR                         |
| REACTION (pH)  | 6.0            |      | 4.5 - 8                       |
| SPECIFIC GRAVITY   | 1.020          |      | 1.010 - 1.030                 |
| <b>CHEMICAL EXAMINATION (AUTOMATED DIPSTICK METHOD):</b> |                |      |                               |
| URINE PROTEIN(ALBUMIN)                                   | ABSENT         |      | ABSENT                        |
| URINE GLUCOSE(SUGAR)                                     | ABSENT         |      | ABSENT                        |
| URINE KETONES(ACETONE)                                   | ABSENT         |      | ABSENT                        |
| BILE SALTS   | ABSENT         |      | ABSENT                        |
| BILE PIGMENTS  | ABSENT         |      | ABSENT                        |
| UROBILINOGEN   | NORMAL         |      | NORMAL                        |
| NITRITE  | NEGATIVE       |      | NEGATIVE                      |
| <b>MICROSCOPIC EXAMINATION</b>                           |                |      |                               |
| RED BLOOD CELLS  | NIL            | /hpf | 0 - 2                         |
| PUS CELLS (WBCs)   | 2-3            | /hpf | 0 - 5                         |
| EPITHELIAL CELLS   | 0-1            | /hpf | 0 - 5                         |
| CRYSTALS   | ABSENT         | /hpf | ABSENT                        |
| CAST   | ABSENT         | /hpf | ABSENT                        |
| AMORPHOUS DEPOSITS                                       | ABSENT         | /hpf | ABSENT                        |
| BACTERIA   | ABSENT         | /hpf | ABSENT                        |

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## LABORATORY REPORT

Date : 26/08/2023 Reg. No : MA23080000312  
Name : MR. DARLA VENKATESWARA RAO  
Age : 48Yrs Sex : Male  
Ref By : DR.A.H.BALAJI

| INVESTIGATION  | OBSERVED VALUE | UNIT  | BIOLOGICAL REFERENCE INTERVAL |
|--|----------------|-------|-------------------------------|
| ESR - Erythrocyte Sedimentation Rate<br>(EDTA Whole Blood, Automated-Capillary photometry aggregation/<br>Manual - Westergrens method) | 03             | mm/hr | 0-15                          |

**Method:** Automated Westergren

**Interpretation;**

1. It indicates presence and intensity of an inflammatory process, never diagnosis of a specific disease, Chance are more significant than a single abnormal test.
2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
3. It is also increased in pregnancy, multiple myeloma, menstruation and hypothyroidism.

**Remark:** ESR Performed using capillary photometric aggregation (for automated analysis) & westergrens (for manual testing).

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Name : MR. DARLA VENKATESWARA RAO

Age : 48Yrs Sex : Male

Ref By : DR.A.H.BALAJI

## BIOCHEMISTRY

| <u>Investigation</u>              | <u>Observed value</u> | <u>unit</u> | <u>biological reference interval</u>                               |
|-----------------------------------|-----------------------|-------------|--|
| HbA1c-Glycated Haemoglobin (HPLC) | 5.1                   | %           | non-diabetic: <= 5.6<br>pre-diabetic: 5.7-6.4<br>Diabetic : >= 6.5 |
| Estimated Average glucose (e AG)  | 99.67                 | mg/dl       |  |

### INTERPRETATION & REMARK:

- HbA1c is used for monitoring diabetic control. it reflects the estimated average glucose. (eAG)
- HbA1c has been endorsed by clinical group & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. clinical correlation suggested.
- To estimate the eAG from the HbA1c value, the following equation is used:  
 $eAG(mg/dl) = 28.7 * A1c - 46.7$
- Interference of haemoglobinopathies in HbA1c estimation.
  - for HbF >25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c
  - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring Diabetic status.
  - Heterozygous state detected (D10/turbo is corrected for HbS & HbC trait)
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent control-6 to 7%, fair to good control -7 to 8%, unsatisfactory control -8 to 10 % and poor control -More than 10%

NOTE: Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.

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## LABORATORY REPORT

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Name : MR. DARLA VENKATESWARA RAO

Age : 48yrs Sex : Male

Reference : APOLLO HEALTH AND LIFESTYLE LIMITED

Ref By : DR.A.H. BALAJI

| Test Name  | Result        | Units | Ref.Interval |
|--|---------------|-------|--------------|
| <b>LIPID SCREEN, SERUM<br/>(Spectrophotometry)</b> |               |       |              |
| Cholesterol  | 185.00        | mg/dL | (<200.00)    |
| Triglycerides                                      | <b>163.00</b> | mg/dL | (<150.00)    |
| HDL Cholesterol                                    | 31.8          | mg/dL | (<40.00)     |
| LDL Cholesterol, Calculated                        | 96.1          | mg/dL | (<100.00)    |
| VLDL Cholesterol, Calculated                       | <b>32.6</b>   | mg/dL | (<30.00)     |

### 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.
- ATP III recommends a complete lipoprotein profile as the initial test for evaluating cholesterol.
- Friedewald equation to calculate LDL cholesterol is most accurate when Triglyceride level is <400 mg/dL. Measurement of Direct LDL cholesterol is recommended when Triglyceride level is >400 mg/dL.

| INTERPRETATION | TOTAL CHOLESTEROL in mg/dL | Triglyceride in mg/dL | LDL CHOLESTEROL in mg/dL |
|----------------|----------------------------|-----------------------|--------------------------|
| Optimal        | < 200                      | <150                  | <100                     |
| Above Optimal  | -                          | -                     | 100-129                  |
| Boderline High | 200-239                    | 150-199               | 130-159                  |
| High           | >=240                      | 200-499               | 160-189                  |
| Very High      | -                          | >=500                 | >=190                    |

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Name : MR. DARLA VENKATESWARA RAO

Age : 48yrs Sex : Male

Reference : Apollo Health and Lifestyle Limited

Ref By : DR. A.H. BALAJI

### LIVER FUNCTION TEST

| TEST                       | PATIENT'S<br>VALUES | UNITS | NORMAL RANGE |      |
|----------------------------|---------------------|-------|--------------|------|
|                            |                     |       | FROM         | TO   |
| Serum Bilirubin (Total)    | 0.6                 | mg/dl | 0.1          | 1.2  |
| Serum Bilirubin (Direct)   | 0.1                 | mg/dl | -            | <0.3 |
| Serum Bilirubin (Indirect) | 0.5                 | mg/dl | 0.1          | 1    |
| S. Alkaline Phosphatase    | 65.0                | U/L   | -            | <150 |
| Serum Gamma G.T.           | 23.0                | U/L   | 4            | 40   |
| Serum G. P. T.             | 30.0                | U/L   | 10           | 40   |
| Serum G. O. T.             | 28.0                | U/L   | 10           | 42   |
| Serum Total Proteins       | 7.2                 | gm/dl | 6.0          | 7.8  |
| Albumin                    | 4.0                 | gm/dl | 3.5          | 5.0  |
| Globulin                   | 3.2                 | gm/dl | 2.6          | 3.5  |
| Albumin: Globulin Ratio    | 1.2                 | -     | -            | -    |

  
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Reg.No. 10308

DCB Approval No. KA/MG/08/2022

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- TUTICORIN** : Plot No.51, Door No.29/10, Roche Colony, South Beach Road, Tuticorin - 628 001,INDIA ☎ : 0461-2332719 / 20
- CUDDALORE** : No.26, Dowlath Nagar, Semmandalam, Cuddalore - 607001,INDIA ☎ : 04142-202150,203150
- KOCHI** : No.66/2345A, Veekshnam Road, Ernakulam,Kochi-682018 . INDIA ☎ : 0484-2395006 / 07 / 08
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- KAKINADA** : 70-17-15/1,RR Nagar,Road No.2, Kakinada, Andhra Pradesh -533003,INDIA ☎ : 0884-2345555, 0884-3500132.

## LABORATORY REPORT

Reg. No : MA23080000312

Name : Mr. DARLA VENKATESWARA RAO (48/Male)

Reference : Apollo Health and Lifestyle Limited

Ref. By : DR.A.H.BALAJI

Reported On : 26/08/2023

| <u>TEST</u> | <u>Value/Results</u> | <u>Units</u> | <u>REFERENCE INTERVAL</u> |
|-------------|----------------------|--------------|---------------------------|
|-------------|----------------------|--------------|---------------------------|

## RENAL FUNCTION TEST

|                 |   |     |       |         |
|-----------------|---|-----|-------|---------|
| Urea            | : | 22  | mg/dL | 15-40   |
| Creatinine      | : | 0.8 | mg/dL | 0.2-1.2 |
| BUN             | : | 10  | mg/dL | 6-21    |
| Blood Uric Acid | : | 5.6 | mg/dL | 4.7-6.1 |

  
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ICMR Approval No. KAMG/08/2022





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- KAKINADA** : 70-17-15/1, RR Nagar, Road No.2, Kakinada, Andhra Pradesh - 530 043, INDIA ☎ : 0884-242465, 0884-3500132.

## LABORATORY REPORT

Date : 26/08/2023 Reg. No: MA23080000312

Name : MR. DARLA VENKATESWARA RAO

Age : 48Yrs Sex : Male

Reference : Apollo Health and Lifestyle Limited

Ref By : DR. A.H. BALAJI

| <u>Tests</u>                | <u>Value/Results</u> | <u>Units</u> | <u>Reference Interval</u> |
|-----------------------------|----------------------|--------------|---------------------------|
| <b><u>BIO-CHEMISTRY</u></b> |                      |              |                           |
| Blood Sugar (F)             | : 93                 | mg/dl        | 70-110                    |
| Blood Sugar (PPBS)          | : 136                | mg/dl        | 120-140                   |

  
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TUV Approval No. KA/MG/08/2022



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**KAKINADA** : 70-17-15/1,RR Nagar,Road No.2, Kakinada, Andhra Pradesh -533003,INDIA ☎ : 0884-2345555, 0884-3500132.

## LABORATORY REPORT

Reg. No : MA23080000312 Date: 26/08/2023

Name : MR. DARLA VENKATESWARA RAO

Age : 48Yrs Sex: Male

Reference : Apollo Health and Lifestyle Limited

Ref By : DR. A.H. BALAJI

---

### HAEMATOLOGY

Blood Group & Rh Type : "B" POSITIVE

  
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Date: 26/08/2023

Reg. No : MA23080000312

## TO WHOMSOEVER IT MAY CONCERN

This is to certify that I have examined **MR. DARLA VENKATESWARA RAO (48/M)**  
**-CHIEF MANAGER** for his Dental condition.

No dental issues, His Dental condition and oral hygiene are good.

  
Dr. S. Naresht  
BDS  
Reg. No.: 11291

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## LABORATORY REPORT

Reg. No : MA23080000312

Name : Mr. DARLA VENKATESWARA RAO (48/Male)

Reference : Apollo Health and Lifestyle Limited

Ref. By : DRA.H.BALAJI

Reported On : 26/08/2023

### IMMUNOLOGY

PSA (Prostate Specific Antigen) : 2µg/l

  
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DGS Approval No. KAMD/687

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## LABORATORY REPORT

Reg No : MA23080000312

Name : Mr. DARLA VENKATESWARA RAO Date : 26/08/2023

Age : 48 yrs Sex : Male

Reference : Apollo Health and Lifestyle Limited.

Ref By : DR. A.H. BALAJI

### PERIPHERAL SMEAR EXAMINATION

RED BLOOD CELL MORPHOLOGY : NORMAL

W B C MORPHOLOGY : NORMAL

PLATELET MORPHOLOGY : NORMAL

  
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## LABORATORY REPORT

Reg. No : MA23080000312 Date : 26/08/2023

Name : Mr. DARLA VENKATESWARA RAO

Age : 48yrs Sex : Male

Ref By : DR.A.H. BALAJI

| Test Name                                   | Result | Units  | Ref.Range  |
|---|--------|--------|------------|
| <b>THYROID PROFILE, TOTAL, SERUM (CLIA)</b> |        |        |            |
| T3, Total                                   | 165.0  | ng/dl  | (70-204)   |
| T4, Total                                   | 9.30   | ug/dL  | (5.0-12.5) |
| TSH   | 2.5    | uIU/ml | (0.45-4.5) |

### Reference Range for pregnancy:

| TSH                       | REFERENCE RANGE IN Uiu/mL |
|---------------------------|---------------------------|
| <b>Pregnancy</b>          |                           |
| 1 <sup>st</sup> Trimester | 0.30-4.50                 |
| 2 <sup>nd</sup> Trimester | 0.50-4.60                 |
| 3 <sup>rd</sup> Trimester | 0.80-5.20                 |

**Note:** 1 TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m. and at a Minimum between 6-10pm. The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations.

2 Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

3 Physiological rise in Total T3 /T4 levels is seen in pregnancy and in patients on steroid therapy.

### Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic-Pituitary hypothyroidism
- Inappropriate TSH secretion
- Non thyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood

  
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## LABORATORY REPORT

Reg. No : MA23080000312 Date : 26/08/2023

Name : Mr. DARLA VENKATESWARA RAO

Age : 48 Yrs Sex : Male

Reference : Apollo Health and Lifestyle Limited

Ref By : DR. A.H.BALAJI, MBBS.,FCIP.,PGDPC.,PGDHSC,PGCIH

| <u>Tests</u> | <u>Value/Results</u> | <u>Units</u> | <u>Reference Interval</u> |
|--------------|----------------------|--------------|---------------------------|
| Vitamin B12  | 870                  | pg/mL        | 200-1100                  |

  
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## LABORATORY REPORT

Reg. No : MA23080000312 Date : 26/08/2023  
Name : Mr. DARLA VENKATESWARA RAO  
Age : 48 Yrs Sex : Male  
Reference : Apollo Health and Lifestyle Limited  
Ref By : DR.A.H.BALAJI

---

| <u>Tests</u> | <u>Value/Results</u> | <u>Units</u> | <u>Reference Interval</u> |
|--------------|----------------------|--------------|---------------------------|
|--------------|----------------------|--------------|---------------------------|

|                                       |      |       |        |
|---------------------------------------|------|-------|--------|
| Vitamin D :<br>(25-hydroxy vitamin D) | 95.0 | ng/mL | 20-100 |
|---------------------------------------|------|-------|--------|

  
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## DIGITAL RADIOGRAPH – CHEST PA- VIEW

Date : 26/08/2023 Reg. No : MA23080000312  
Name : MR. DARLA VENKATESWARA RAO  
Age : 48 yrs  
Sex : Male  
Ref By : D.R.A.H.BALAJI

The cardio mediastinal silhouette is normal.

The lungs are well inflated. No focal mass lesion, lobar collapse or consolidation is seen.

No pleural effusion is detected.

The soft tissues and bones appear unremarkable.

### Conclusion:

- Normal chest radiograph.

Dr. VIDYA KUMARI  
Reg.No. 10308

DCG Approval No. KAMG/08/2022



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## ECG REPORT

Date : 26/08/2023 Reg. No:MA23080000312

Name : MR. DARLA VENKATESWARA RAO

Age : 48yrs

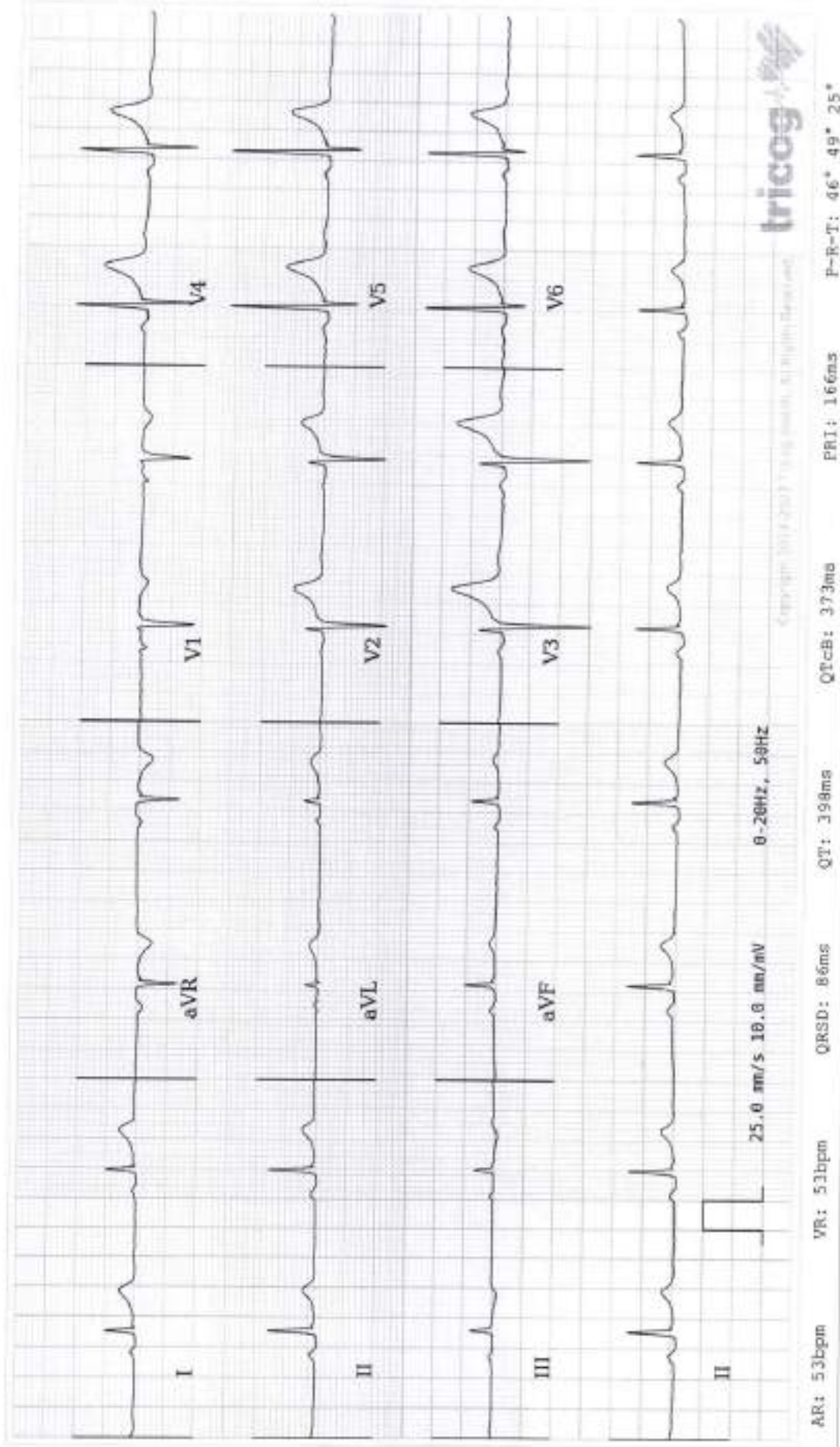
Sex : Male

Ref By : DR. A. H. BALAJI

Impression : Normal Sinus Bradycardia

  
Dr. VIDYA KUMARI  
Reg No. 10306  
ECG Approval No. KAMG/08/1022





Sinus Bradycardia. Please correlate clinically.

REPORTED BY

  
Dr. Abhishek Kumar  
2006082914



# Balaji Medical Centre

An ISO 9001:2015 Accredited Organization  
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**MANGALORE** : Shop No.5, Door No.1-65/31, Kulur-Kavoor Airport Road, Vivek Nagar, Panjimogaru, Mangalore-575 013, INDIA ☎ : 0824-2972719 / 20.  
**KAKINADA** : 70-17-15/1, RR Nagar, Road No.2, Kakinada, Andhra Pradesh -533003, INDIA ☎ : 0884-2345555, 0884-3500132.

**NAME** : Mr. DARLA VENKATESWARA RAO **AGE** : 48YRS /M

**STUDY DATE** : 26/08/2023 **REG.NO** : MA23080000312

**PNDT. REG. NO** : 06/2018-19 **REF. BY** : APOLLO

## USG COMPLETE ABDOMEN

### LIVER:

Is Normal in size. Hepatic Parenchyma is intrinsically normal.  
No focal lesion seen in liver.  
IHBR and CBD are normal in caliber. Portal vein is normal

### Gall Bladder:

Is well distended and is normal. No calculus seen. No abnormal wall thickening.

### Pancreas:

The head, tail and body of the pancreas are normal. No dilatation of pancreatic duct.

### Spleen:

Is normal in size. No focal parenchymal lesions.

**RT** Kidneys measures 9.3x4.1cms, normal in size.  
Cortico medullary differentiation is maintained.  
No calculus noted. Pelvicalyceal system is normal.

**LT** Kidneys measures 10.3x4.3cms, normal in size.  
Cortico medullary differentiation is maintained.  
No calculus noted. Pelvicalyceal system is normal.

### Urinary Bladder:

Is well distended and normal. No abnormal wall thickening.  
No intraluminal echoes/calculus.

### Prostate:

Normal in size and measures 3.4x3.0x3.3cms (Volume~17.6cc).  
Seminal vesicles are normal.  
No free fluid in abdomen.  
No evidence of any significant lymphadenopathy seen.

### Impression:

- Normal Study of Liver, Gall bladder, Spleen, Pancreas, Right kidney, Left kidney, Urinary bladder and Prostate.

Dr. VIDYA KUMARI  
Reg No. 10306

ISO Approval No. KAMG/08/2022

“HEALTHIER MARINERS TOWARDS A WEALTHIER NATION”



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ఆంధ్ర ప్రదేశ్ పబ్లిక్ సర్వీస్ కమిషన్

ఆంధ్ర ప్రదేశ్ పబ్లిక్ సర్వీస్ కమిషన్  
Darta Venkateswara Rao



పుట్టిన తేదీ: 08/08/1975  
పులియం / Male



7129 5480 6010



ఆధార్ - సామాన్యుని చాక్కు.

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Aduru, East Godavari,  
Andhra Pradesh, 533247

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*(Handwritten signature)*

# Balaji Medical Centre Mangalore

Address: shree Heights building ,Shop no 5, Door no 1-65/31,Kulur-Kavoor,Airport Road Vivek Nagar Panjimogaru, Mangaluru 575013 Karnataka India

## Echocardiography Report

|                         |               |                            |                      |                     |                    |
|-------------------------|---------------|----------------------------|----------------------|---------------------|--------------------|
| <b>PATIENT NAME</b>     | <b>AGE</b>    | <b>HEIGHT</b>              | <b>WEIGHT</b>        | <b>BSA</b>          | <b>DATE   TIME</b> |
| DARLA VENKATESHWARA RAO | 48 yrs        | 170 cm                     | 76 kg                | 1.87 m <sup>2</sup> | 2023/08/26   17:29 |
| <b>PATIENT ID</b>       | <b>GENDER</b> | <b>REFERRING PHYSICIAN</b> | <b>REPORTED BY</b>   |                     |                    |
| MA23080000312           | Male          | DR.VIDYA KUMARI            | DR. JEEVARATHINAM. N |                     |                    |

### PROCEDURE

An ECHO exam was performed including 2D, M-mode, Spectral, Color-flow.

### SUMMARY

Mild LV concentric hypertrophy  
Normal LV systolic function, EF-60%  
No regional wall motion abnormality  
Normal LV diastolic filling pattern  
Mild tricuspid regurgitation  
Bradycardia noted in this study

### LEFT VENTRICLE

| Measurement                    | Value | Reference    | Measurement                        | Value  | Reference     |
|--------------------------------|-------|--------------|------------------------------------|--------|---------------|
| <b>Systolic Function</b>       |       |              | <b>Dimensions</b>                  |        |               |
| EF(Teich) (%)                  | 76.30 | ( 72-52 )    | LVIDd (cm)                         | 3.96   | ( 4.2-5.8 )   |
| SV(Teich) (ml)                 | 52.15 | ( 72-144 )   | LVIDd Index (cm/m <sup>2</sup> )   | 2.12   | ( 2.2-3.0 )   |
| SI(Teich) (ml/m <sup>2</sup> ) | 27.89 | ( 42-66 )    | LVIDs (cm)                         | 2.20   | ( 2.5-4.0 )   |
| EDV(Teich) (ml)                | 68.35 | ( 62-150 )   | LVIDs Index (cm/m <sup>2</sup> )   | 1.18   | ( 1.3-2.1 )   |
| ESV(Teich) (ml)                | 16.20 | ( 21-51 )    | IVSd (cm)                          | 1.21   | ( 0.6-1.0 )   |
| <b>Diastolic Function</b>      |       |              | LVPWd (cm)                         | 0.98   | ( 0.6-1.0 )   |
| MV E Vel (m/s)                 | 0.45  | ( 0.6-0.8 )  | LVd Mass (g)                       | 142.46 | ( 88-224 )    |
| MV A Vel (m/s)                 | 0.31  | ( 0.2-0.35 ) | LVd Mass Index (g/m <sup>2</sup> ) | 76.18  | ( 49-115 )    |
| MV E/A Ratio                   | 1.45  | ( >=0.8 )    | RWT                                | 0.49   | ( 0.24-0.42 ) |
|                                |       |              | <b>LV Area</b>                     |        |               |
|                                |       |              | LV FAC A2C (%)                     | 47.40  | ( - )         |
|                                |       |              | LVAd A2C (cm <sup>2</sup> )        | 26.94  | ( - )         |
|                                |       |              | LVAs A2C (cm <sup>2</sup> )        | 14.17  | ( - )         |

### LEFT ATRIUM

| Measurement  | Value | Reference   | Measurement                          | Value | Reference |
|--------------|-------|-------------|--------------------------------------|-------|-----------|
| LA Diam (cm) | 3.20  | ( 2.0-4.0 ) | LAESV MOD BP (ml)                    | 26.50 | ( 38-46 ) |
| LA/Ao        | 1.08  | ( <1.3 )    | LAESVInd MOD BP (ml/m <sup>2</sup> ) | 14.17 | ( 16-34 ) |

### AORTIC VALVE & AORTA

| Measurement        | Value | Reference |
|--------------------|-------|-----------|
| <b>AV Outflow</b>  |       |           |
| AV Vmax (m/s)      | 0.64  | ( <2.6 )  |
| AV maxPG (mmHg)    | 1.64  | ( <30 )   |
| <b>LVOT/ Aorta</b> |       |           |
| Ao Diam (cm)       | 2.96  | ( <3.7 )  |
| Ao/LA              | 0.82  | ( - )     |



## PULMONARY VALVE AND PULMONARY ARTERY

| Measurement              | Value | Reference |
|--------------------------|-------|-----------|
| <b>Pulmonary Outflow</b> |       |           |
| PV Vmax (m/s)            | 0.65  | (<1.9)    |
| PV maxPG (mmHg)          | 1.69  | (<36)     |

## OBSERVATIONS :

|                               |  |
|-------------------------------|--|
| <b>ECG</b>                    | Rhythm - Bradycardia observed during study   |
| <b>Left Ventricle</b>         | Size - Left ventricle normal in size<br>LV geometry - Mild concentric LV hypertrophy<br>Systolic function - LV systolic function - hyperdynamic<br>Regional wall motion - No regional wall motion abnormality<br>Diastolic function - LV diastolic function - normal filling pattern |
| <b>Left Atrium</b>            | Size - Normal left atrium size   |
| <b>Right Atrium</b>           | Size - Normal right atrium size  |
| <b>Right Ventricle</b>        | Size - Normal right ventricular size<br>Systolic function - Right ventricular systolic function - normal   |
| <b>Aortic Valve</b>           | Structure and function - Normal trileaflet aortic valve<br>Regurgitation - No aortic regurgitation   |
| <b>Mitral Valve</b>           | Regurgitation - Trivial mitral regurgitation   |
| <b>Tricuspid Valve</b>        | Regurgitation - Trivial tricuspid regurgitation  |
| <b>Pulmonic Valve</b>         | Structure and function - Normal pulmonic valve<br>Regurgitation - No pulmonic regurgitation  |
| <b>Pericardium</b>            | Effusion - No pericardial effusion   |
| <b>Aorta</b>                  | Size - Normal aorta  |
| <b>Pulmonary Artery</b>       | Size - Normal pulmonary artery size  |
| <b>Pulmonary Hypertension</b> | Probability - Low probability of pulmonary hypertension  |
| <b>Heart Failure</b>          | HF Category - No evidence of heart failure with preserved ejection fraction  |

**Disclaimer:** This report is generated based on the review of Echocardiography images transmitted and does not consider the patient's current symptoms or medical history. The quality or accuracy of the report is dependent on the quality and accuracy of the Echo images transmitted. The report is not meant or valid for any medico legal purposes



**Reported By:**  
DR. JEEVARATHINAM. N  
Clinical Cardiologist

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