

NAYANALAYA

SUPER SPECIALITY EYE CARE CENTRE

Rf. 186a Nagavalli



Dr. K. SHRIDHAR
 Medical Director
 Consultant Eye Surgeon
 (Melb. Sydney, Australia)

TEL APPOINTMENT 080 23340414 / 9164191671
 10-00a.m. to 12-30p.m. & 5 p.m. to 8 p.m.
 SATURDAY EVENING & SUNDAY HOLIDAY
 Instagram : nayanalaya

260/1, ABHIRAM, NEAR 17TH Cross,
 SAMPIGE ROAD, MALLESWARAM
 BENGALURU - 560 003.
 E-mail : nayanalaya@gmail.com
 www.nayanalaya.com

EYE CLINIC, DIABETIC EYE CARE AND LASER CENTRE

Name Sajitha Age 48 Date 01/05/24
 for Routine eye checkup No RTU Dist. / H?N

$\left. \begin{array}{l} 99 \\ 99 \end{array} \right\} \begin{array}{l} \text{I/C} \\ \text{II/C} \end{array}$
 No. on
 pupils bds
 lens clear
 P-ns
 $T_1 L_1 17$
 16 mmHg

Low Ref

$\left. \begin{array}{l} 9/6 \\ 9/6 \end{array} \right\} \begin{array}{l} R) \\ L) \end{array} \begin{array}{l} +0.50 +0.25 \times 150 \\ +0.50 DS \\ +1.25 \end{array}$

	RE / VD 6/6	LE / VD 6/6
Sph	+0.50	+1.00
Cyl	+0.50	/
AXIS	25	/
	+1.50	

T. / Near / Dist.
 of Lens not caps Deynes

[Signature]

Facilities : Laser Surgery, Cornea Grafting, Contact Lenses, Micro Surgery Etc.,
 Lasik Laser by World's Best Allegretto Wavefront Lasik Laser System From Germany

PLEASE PRESERVE THIS DOCUMENT & BRING IT DURING EVERY VISIT

SMALL - INCISION - NO STITCH - DROP SURGERY
PHACOEMULCIFICATION CATARACT SURGERY

DIRECTOR & LASIK LASER SPECIALIST
 (Trained in Germany)
JYOTHI - THE LASIK VISION CENTRE

Sajitha / 48 yrs / Female . 1/5/24.
Sp. Dr. Anthoni P

case details noted

issues: GDA - iron deficiency anemia.

- no h/o menorrhagia
- no h/o blood loss.

Adv

- Tab: Qsofer XT 001 - (60).
(ATF)

- cap. uprise by 60k once a month



Rpt (Hb/mcv) - after 2 months

(Iron profile
serum ferritin)



NAME : Mrs. SAJITHA CHANDRAN
 AGE/SEX : 48 Yrs / Female
 REFERRED BY : Dr. UNION BANK
 SOURCE : ISHA MALLESHWARAM.

REG/LAB NO. : 24050013 / 272978
 DATE OF COLLECTION : 01-05-2024 at 09:48 AM
 DATE OF REPORT : 01-05-2024 at 03:26 PM



TEST PARAMETER	RESULT	REFERENCE RANGE
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BIOCHEMISTRY

Fasting blood sugar
(FBS)

93.94 mg/dl

70 - 100 mg/dl
 Prediabetes : 100- 125
 Diabetes : 126 and more

>126	Diabetic	It's a group of metabolic disorders characterized by a high blood sugar level over a prolonged period of time.
100-125	Pre Diabetic levels	That blood glucose is raised beyond normal, but not high enough to warrant a diabetes diagnosis.
70-100	Normal	The American Diabetes Association recommends a routine screening for type 2 diabetes. If the results are normal, the screening should be repeated every 3 years.

Dr. Nataraj B

MBBS MD

Consultant Biochemist KMC 63303

Results relate to the sample tested, kindly correlate clinically.

311, Sampige Road, Between 15th & 16th Cross, Malleshwaram, Bengaluru - 560 003.
 Ph : 080 32520000, 23565005 / 6, 23565000 Telefax : 080-23562059

Email : ishadiagnostics@gmail.com Website : www.ishadiagnostics.com



NAME : Mrs. SAJITHA CHANDRAN
 AGE SEX : 48 Yrs / Female
 REFERRED BY : Dr. UNION BANK
 SOURCE : ISHA MALLESHWARAM

REG/LAB NO : 24050013 / 272978
 DATE OF COLLECTION : 01-05-2024 at 09:48 AM
 DATE OF REPORT : 01-05-2024 at 03:26 PM



TEST PARAMETER	RESULT	REFERENCE RANGE
Post prandial blood sugar <i>(120 min)</i>	107.23 mg/dl	70 - 140 mg/dl Prediabetes : 140 -200 Diabetes : 200 and more

>= 200	Diabetic	It's a group of metabolic disorders characterized by a high blood sugar level over a prolonged period of time
140 - 200	Pre Diabetic levels	This blood glucose is raised beyond normal, but not high enough to warrant a diabetes diagnosis.
70 - 140	Normal	The American Diabetes Association recommends a routine screening for type 2 diabetes. If the results are normal, the screening should be repeated every 3 years.

Dr. Nataraj B

MBBS MD

Consultant Physician KMC B3383

Dispatched by: Shreehalal

**** End of Report ****

Printed by: Shreehalal on 01-05-2024 at 03:27 PM



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AGE/SEX : 48 Yrs / Female
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SOURCE : ISHA MALLESHWARAM.

REG LAB NO : 24050013 / 272978
DATE OF COLLECTION : 01-05-2024 at 09:48 AM
DATE OF REPORT : 01-05-2024 at 05:15 PM



TEST PARAMETER	RESULT	REFERENCE RANGE
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CLINICAL PATHOLOGY

POST PRANDIAL URINE SUGAR (PPUS)	NIL	
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Dr. JAYAPRAKASH I.T
MD (Path)

Reviewed by: VISHU DEBNATH

**** End of Report ****

Printed by: Pooja K on 01-05-2024 at 05:22 PM



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 AGE/SEX : 48 Yrs - Female
 REFERRED BY : Dr. UNION BANK
 SOURCE : ISHA MALLESHWARAM.

REG/LAB NO : 24050013 / 272978
 DATE OF COLLECTION : 01-05-2024 at 09:48 AM
 DATE OF REPORT : 01-05-2024 at 12:18 PM



TEST PARAMETER	RESULT	REFERENCE RANGE
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HAEMATOTOLOGY

COMPLETE BLOOD COUNT (CBC) WITH ESR *

Haemoglobin (Hb) <small>(Automated)</small>	9.0 gm/dl ↓	11.5 - 16.5 gm/dl
Red Blood Cell Count (RBC) <small>(Automated)</small>	4.4 million/cumm	3.8 - 6 million/cumm
Packed Cell Volume (PCV) <small>(Automated)</small>	27.4 %	36 - 47 %
MCV <small>(Automated)</small>	62.6 fl ↓	80 - 95 fl
MCH <small>(Automated)</small>	20.6 pg	26 - 34 pg
MCHC <small>(Automated)</small>	33.0 %	31 - 38 %
Platelet Count <small>(Automated - Microscope)</small>	5.01 Lakhs/cumm	1.5 - 4.5 Lakhs/cumm
Total Count (TC) <small>(Automated)</small>	5940 cells/cumm	4000 - 11500 cells/cumm 1 day - 2 days : 10000-26000 3 days - 1 year : 6000 - 18000 1 year - 6 years : 5000 -15000 6years -12 years :4500 -13500

DIFFERENTIAL COUNT

Neutrophil	69.9 %	40 - 75 % 1day - 7days: 50 - 75 8days- 8 years:30 - 40
Lymphocytes	26.1 %	20 - 40 % 1day - 7 days: 20 - 30 8days- 8years:50-75
Monocytes	1.8 %	2 - 12 %
Eosinophils	2.1 %	0 - 6 %
Basophils	0.1 %	0 - 2 %
ESR <small>(Westergren Modified Westergren)</small>	32 mm/hr	0 - 20 mm/hr

Dr. JAYAPRAKASH H.T
 MD (Path)

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TEST PARAMETER	RESULT	REFERENCE RANGE
BLOOD GROUP	"B"	
RH TYPE	POSITIVE	

BIOCHEMISTRY

LIVER FUNCTION TEST(LFT) *

Total Bilirubin <i>Asahitai Jindharuak</i>	0.77 mg/dl	0 - 1 mg/dl Newborn, premature : 0 - 1 days 1.0 - 8.0 mg/dl 1-2 days 6.0 - 12.0 mg/dl 3-5 days 10.0 - 14.0 mg/dl
Direct Bilirubin <i>Asahitai Jindharuak</i>	0.14 mg/dl	0 - 0.3 mg/dl
Indirect Bilirubin <i>Asahitai Jindharuak</i>	0.63 mg/dl	
Aspartate Amino Transferase (SGOT) <i>Asahitai Jindharuak</i>	13.08 U/L	0 - 31 U/L
Alanine Amino Transferase (SGPT) <i>Asahitai Jindharuak</i>	13.60 U/L	0 - 31 U/L
Alkaline Phosphatase [ALP] <i>Asahitai Jindharuak</i>	70.71 IU/L	20 - 116 IU/L
Total Protein <i>Asahitai Jindharuak</i>	7.16 g/dl	6.4 - 8.3 g/dl
Albumin <i>Asahitai Jindharuak</i>	4.20 g/dl	3.5 - 5 g/dl
Globulin <i>Asahitai Jindharuak</i>	3 g/dl	2.3 - 3.5 g/dl
A/G Ratio	1.4	1.5 - 2.5
Gamma Glutamyl Transferase (GGT) <i>Asahitai Jindharuak</i>	13.63 U/L	0 - 38 U/L

Dr. Nataraj B

MBBS, MD

Consultant Biochemist KMC (B3D)

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REG/LAB NO : 24050013 / 272978
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TEST PARAMETER	RESULT	REFERENCE RANGE
LIPID PROFILE (LP) *		
Cholesterol Total <small>(Total Cholesterol)</small>	175.98 mg/dl	0 - 200 mg/dl Borderline: 200 - 239 mg/dl High: more than 240
Triglycerides TGL <small>(TG)</small>	95.11 mg/dl	0 - 150 mg/dl Borderline-high: 150 - 199 High: 200 - 499 Very High: \geq 500
HDL Cholesterol <small>(HDL)</small>	33.19 mg/dl	42 - 88 mg/dl
LDL Cholesterol <small>(LDL)</small>	140.01 mg/dl	0 - 130 mg/dl Borderline High: 130-159 High: 160-189 Very High > 190
HDL Cholesterol <small>(HDL)</small>	19.0 mg/dl	25 - 40 mg/dl
HDL / HDL Ratio	4.2	< 5 : 1

Measurements in the same patient can show physiological and analytical variations. Three serial samples 1 week apart are recommended for Total Cholesterol, Triglycerides, HDL & LDL Cholesterol.

As per NLA-2014 guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.

Low HDL levels are associated with increased risk for Atherosclerotic Cardiovascular disease (ASCVD) due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.

Dr. Nataraj B
 MBBS, MD
 Consultant Biochemist KMC, B303

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REG LAB NO : 24050013 / 272978
 DATE OF COLLECTION : 01-05-2024 at 09:48 AM
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TEST PARAMETER	RESULT	REFERENCE RANGE
Uric Acid (UA) <i>Uricase Colorimetric Method</i>	4.25 mg/dL	2.6 - 6 mg/dL
<p>Interpretation: Uric acid measurements are used in the diagnosis and treatment of renal and metabolic disorders, including renal failure, gout, leukemia, psoriasis, starvation or other wasting conditions; and of patients receiving cytotoxic drugs.</p>		
Blood Urea Nitrogen (BUN) <i>Urea</i>	9.8 mg/dl	0-1 week 3-25 mg/dl 1 week to 1 year 4-19 mg/dl 1 -12 years 5-18 mg/dl 12-60 years 6-20 mg/dl 60-90 years 8-23 mg/dl

Dr. Nataraj B

MHBS MD

Consultant Biochemist KMC, BIRL

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NAME : Mrs. SAJITHA CHANDRAN
 AGE/SEX : 48 Yrs Female
 REFERRED BY : Dr. UNION BANK
 SOURCE : ISHA MALLESHWARAM,

REG/LAB NO : 24050013 / 272978
 DATE OF COLLECTION : 01-05-2024 at 09:48 AM
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TEST PARAMETER	RESULT	REFERENCE RANGE
Hba1c (Glycosylated Hb) <small>(HbA1c)</small>	5.32 %	Normal : less than 5.7 Prediabetes : 5.7 – 6.4 Diabetes : 6.5 and more Diabetes Good Control : less than 7 Poor Control : more than 7 90 -120 mg/dl 121-150: Good Control 151-180: Average Control 181-210: Action Suggested >211: Panic Value
Mean Blood Glucose	105.6 mg/dl	

NOTE : Any condition altering red cell life will alter the GHB values. Low Hb% values may not correlate with GHB. GHB value should not be taken as a sole criteria for diagnosis. GHB gives average Blood Glucose level for the period of 10 - 12 wks & it need not correlate with blood glucose level.

Serum Creatinine <small>(Creatinine)</small>	0.76 mg/dl	0.7 - 1.1 mg/dl 1 - 4 days: 0.3 - 1.0 Infant: 0.2-0.4 Child: 0.3-0.7 Adolescent: 0.5-1.0
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Comment: Creatinine is the product of creatine metabolism. It is a measure of renal function and elevated levels are observed in patients typically with 50% or greater impairment of renal function.

Dr. Nataraj B

MBBS, MD

Consultant Biochemist KMC, 63383

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NAME : Mrs. SAJITHA CHANDRAN
 AGE/SEX : 48 Yrs / Female
 REFERRED BY : Dr. UNION BANK
 SUBJECT : ISHA MALLESHWARAM

REG LAB NO : 24050013 / 272978
 DATE OF COLLECTION : 01-05-2024 at 09:48 AM
 DATE OF REPORT : 01-05-2024 at 12:18 PM



TEST PARAMETER	RESULT	REFERENCE RANGE
HORMONE ASSAYS		
THYROID PROFILE (T3, T4, TSH) *		
Triiodothyronine(T3) <small>(In Serum/serum)</small>	0.97 ng/mL	Newborn:1.0 - 7.0 ng/ml. <1Year :1.0 - 2.4 ng/ml. <10 Years :0.9 - 2.4 ng/ml. Adults:0.58-1.59 ng/ml. >60 Years :0.4 - 1.8 ng/ml.
Thyroxine(T4) <small>(In Serum/serum)</small>	8.64 ug/dl.	Newborn:11.8 - 22.6 ug/dl. <1 Year :7.8 - 16.5 ug/dl. <10 Years:6.4 - 13.3ug/dl. Adult: 4.87-11.72ug/dl. >60 Years:5.0 - 10.7 ug/dl.
Thyroid stimulating hormone(TSH) <small>(In Serum/serum)</small>	1.42 µIU/ml	0-3 days: 1.0-39.0 µIU/ml. 3days -30days :1.0-6.5 µIU/ml. 1Month -6Months :0.5-6.0 µIU/ml. 6Month - 18 years :0.5-4.5 µIU/ml. Adults : 0.35-4.94 µIU/ml. >60 Years:0.5 - 8.9 Pregnancy: 1st Trimester:0.1 - 2.50 µIU/ml. 2nd Trimester:0.2 - 3.0 µIU/ml. 3rd Trimester:0.3 - 3.0 µIU/ml.

Results of TSH vary nearly 50%, due to circadian variation. Peak values are seen between 2 - 4am and minimum between 6 - 10pm. Assay methods also contribute to variation in results. Factors such as: Change of seasons, Hormonal fluctuations, Ca or Fe supplements, High Fibre diet, potency fluctuations, stress & illness, few of the prescription drugs etc. affect TSH results. Ref : Turk J Med Sci 2008 ;38(2) : 153-158. <http://www.thyroid-info.com/articles/tsh-fluctuating.htm>

Dr. Nataraj B

MBBS, MD
 Consultant Biochemist, KMC - 63301

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TEST PARAMETER	RESULT	REFERENCE RANGE
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CLINICAL PATHOLOGY

COMPLETE URINE ANALYSIS *

PHYSICAL EXAMINATION

Color	Pale Yellow	
Appearance	Clear	Clear/Transparent
Specific gravity <i>(Method: Refractometer / Basic Concentration)</i>	1.010	
Reaction (pH) <i>(Method: Phosphotungstic / Colour Indicator)</i>	6.0	4.6 - 8

CHEMICAL EXAMINATION

Glucose <i>(Method: Thiobarbituric / Enzymatic Glucose Oxidase)</i>	Nil	NIL
Proteins <i>(Method: Phosphotungstic / premeissner's indicator)</i>	Nil	
Bile Salts <i>(Method: Phosphotungstic / Hebe's Test)</i>	Absent	Absent
Bile pigments <i>(Method: Phosphotungstic / Fouchet's Test)</i>	Absent	Absent
Ketones <i>(Method: Phosphotungstic / Barfoed's Test)</i>	Absent	Absent

MICROSCOPY

WBC (WBC) Cells <i>(Method: Microscopy)</i>	3 - 4 /hpf	0 - 5 /hpf
RBC Cells <i>(Method: Microscopy)</i>	Nil	0 - 2 /hpf
epithelial Cells <i>(Method: Microscopy)</i>	4 - 5 /hpf	0 - 8 /hpf
casts <i>(Method: Microscopy)</i>	Nil	NIL
crystals <i>(Method: Microscopy)</i>	Nil	NIL
Others (Yeast & Bacteria) <i>(Method: Microscopy)</i>	Nil	NIL

FASTING URINE SUGAR

NIL

Dr. JAYAPRAKASH H.T.
 MD (Path)

**** End of Report ****

Printed By: Praveen on 01-05-2024 at 12:18 PM



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**2D - ECHO CARDIOGRAPHIC STUDY**

NAME:	MRS. SAJITHA CHANDRAN	DATE:	01.05.2024
AGE:	48 YRS	ID. NO:	--
SEX:	FEMALE	REFERRED DR:	UNION BANK

M-Mode				
LEFT ATRIUM		36		mm
AORTA		25		mm
RIGHT VENTRICLE		--		mm
LEFT VENTRICLE (Diastole)		45		mm
LEFT VENTRICLE (Systole)		30		mm
VENTRICULAR SEPTUM (Diastole)		10		mm
VENTRICULAR SEPTUM (Systole)		15		mm
POSTERIOR WALL (Diastole)		11		mm
POSTERIOR WALL (Systole)		15		mm
END DIASTOLIC VOLUME		92		ml
END SYSTOLIC VOLUME		34		ml
STROKE VOLUME		58		ml
FRACTIONAL SHORTENING		35		%
EJECTION FRACTION		65		%
DOPPLER / COLOR FLOW				
MITRAL VALVE	E- 1.0	A -0.8	m/sec	NO MR
AORTIC VALVE	1.5	-	m/sec	NO AR.
TRICUSPID VALVE	-	-	m/sec	NO TR
PULMONARY VALVE	1.0	-	m/sec	NO PR

2D - ECHO CARDIOGRAPHIC STUDY

- NORMAL CHAMBERS.
- NORMAL CARDIAC VALVES.
- NO REGIONAL WALL MOTION ABNORMALITY.
- IAS / IVS INTACT, AORTA & PULM. ARTERY NORMAL
- NO VEGETATIONS, PERICARDIUM NORMAL.
- NORMAL LV SYSTOLIC AND DIASTOLIC FUNCTION.
- LVEF - 65 %.

IMPRESSION:

- NORMAL STUDY.



DR .B. K. RAGHUNANDAN
CARDIOLOGIST



NAME : Mrs. SAJITHA CHANDRAN
AGE / SEX : 48 Yrs / Female
REFERRED BY : SELF

REG / LAB NO. : 24050009 / 27509
DATE OF REPORT : 01-05-2024 at 09:58 AM

CHEST X-RAY (PA VIEW)

Visualized lung fields are normal.

Bilateral CP angles and domes of diaphragm are normal.

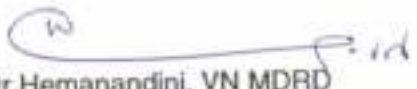
Bilateral hila are normal.

Cardiac configuration is normal.

Bony thoracic cage is normal.

IMPRESSION:

- No significant abnormality is detected.


Dr. Hemanandini, VN MDRD
MBBS, MD
Consultant Radiologist

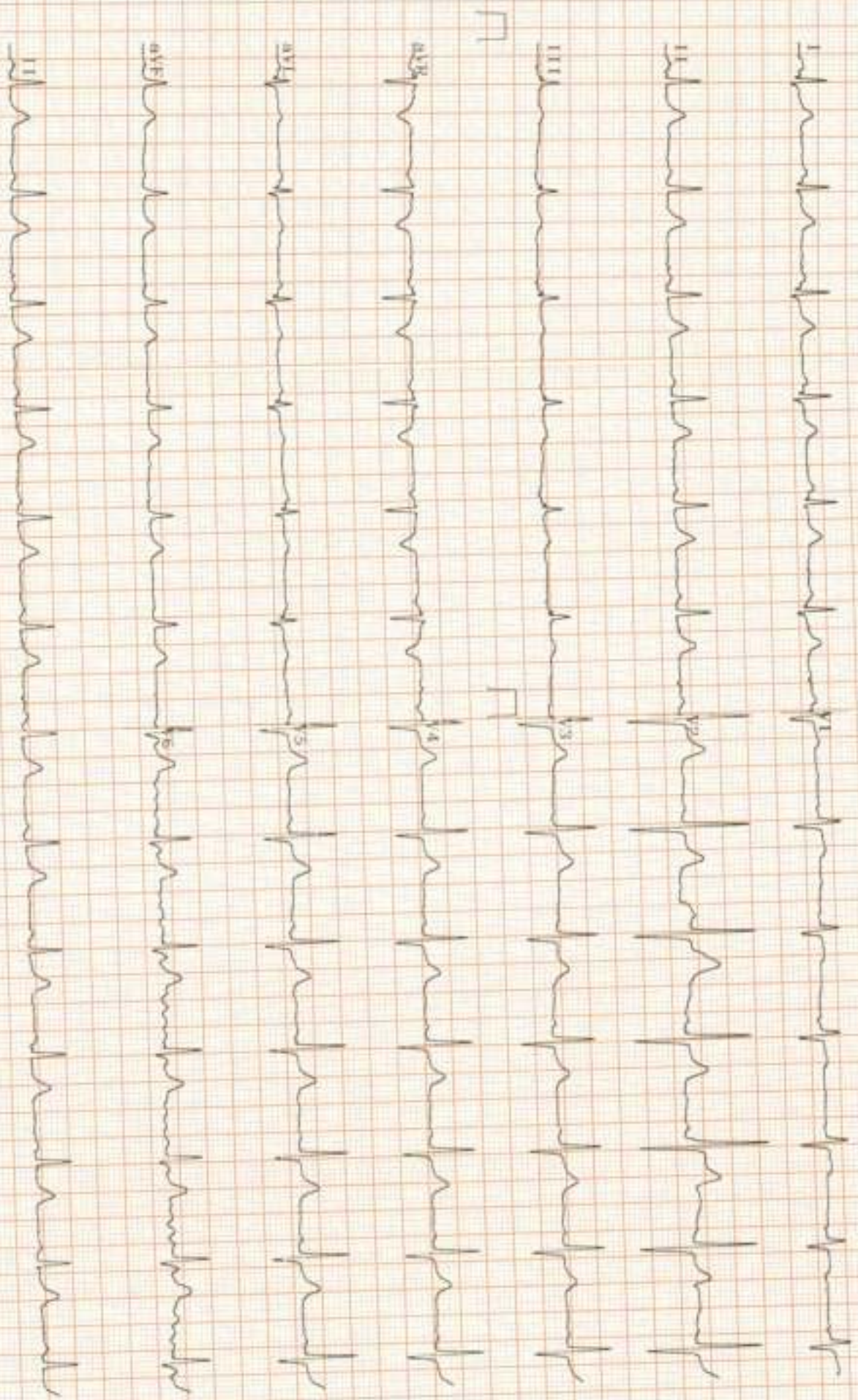
**** End of Report ****

ID: *Sejilite deendray*
Name: *Sejilite deendray*
Age: *48* years
Sex: *Male*

HR: *76* bpm
PR: *118* ms
QRS: *98* ms
QT/QTc: *378/422* ms
P-R-T axes: *11 65 44*

EC Analysis Result: *Normal Sinus Rhythm*
(To be finally confirmed by cardiologist)

Paalberg





CERTIFICATE OF MEDICAL FITNESS

NAME: Mrs - SAJITHA CHANDRAN

AGE / GENDER: 48 Yrs / female.

HEIGHT: 164 cm.

WEIGHT: 69 kg.

IDENTIFICATION MARK: A black mole on nose -

BLOOD PRESSURE: (20/80 mm/Hg).

PULSE: 84 / min

CVS: Normal.

RS: Normal.

ANY OTHER DISEASE DIAGNOSIS IN THE PAST: Not

ALLERGIES, IF ANY: Not

LIST OF PRESCRIBED MEDICINES: Not

ANY OTHER REMARKS: Not

I certify that I have carefully examined Mr. / Mrs. Sajitha Chandran Son / daughter of Mr. Rana Chandran Nair Who has signed in my presence, He / she has no physical disease and is fit for employment.

Signature of candidate

Signature of Medical Officer

Place: Isha diagnostics.

Date: 01/5/2024.

Disclaimer: The patient has not been checked for COVID. This certificate does not relate to the covid status of the patient examined.



NAME : Mrs. SAJITHA CHANDRAN
AGE / SEX : 48 Yrs / Female
REFERRED BY : SELF
REF CENTER : UNION BANK

REG / LAB NO. : 24050009 / 27509
DATE OF REPORT : 01-05-2024 at 12:51 PM

ABDOMEN AND PELVIS ULTRASOUND SCAN

Liver: Normal in size and echogenicity. No obvious focal lesions seen. No IHBR dilatation noted. CBD not dilated. Portal vein: Normal.

Gallbladder: Partially distended. No obvious calculus.

Pancreas: Normal in echotexture. No evidence of duct dilatation or calcification. No peripancreatic collection.

Spleen: Normal in size and echotexture. No focal lesions

Kidneys: Bilateral kidneys are normal in size, shape and texture. No calculi / pelvi calyceal dilatation.

Right kidney: Measures 114 x 13 mm. (Bipolar length x parenchymal thickness)

Left kidney: Measures 118 x 13 mm. (Bipolar length x parenchymal thickness)

Urinary Bladder: Distended. No UVJ calculus. Normal wall thickness.

Uterus: Mildly bulky, measures 71 x 79 x 56 mm.

Endometrium: Thickness is 14 mm.

Myometrium: Seedling fibroids noted,

Both ovaries are normal in size and echogenicity.

Right ovary: 47 x 22 mm.

Left ovary: 36 x 25 mm. Moderate hydrosalpinx measuring 16 mm in maximum diameter .

Mild fluid seen in pouch of Douglas containing internal echoes adjacent to left ovary

IMPRESSION:

- Mildly bulky uterus with seedling fibroids.
- Moderate hydrosalpinx in left .
- Mild fluid pouch of Douglas containing internal echoes

Suggested clinical correlation.

Suggested MRI pelvic for further evaluation if clinically indicated.

Dr. Hemanandini, VN MDRD

MBBS, MD
Consultant Radiologist