



# SUNSHINE

## HOSPITALS

## DISCHARGE SUMMARY



UHID:	UMR0731354	Patient No:	SS21007765
Patient Name:	Mr.NARESH KUMAR BEJJANKY	Age ( Gender ):	44Y ( Male )
Admission Date:	17/04/2021 16:50	Discharge On	28/04/2021 11:07
Bed No:	2306(DR SHAILENDER WING SINGLE ROOMS)	Discharge Type:	NORMAL
Sponsor:	COVID CASH	Pri.,Cons Dr:	K. PRASHANT KUMAR
Clinical Dept:	GENERAL MEDICINE	Phone:	9010080800
Address:	H-NO:5-11/114/252,, PRANEETH PRANAV PANORAMA,, SANGAREDDY. TELANGANA. INDIA.		

**CONSULTANT \*** DR.K.PRASHANT KUMAR  
MBBS, MD  
Consultant Internal Medicine

**DIAGNOSIS** ICD CODE - R05  
Atypical pneumonia(SARS-COV 2), SEVERE DISEASE ( HFNC - NIV )  
STEROID DYSGLYCEMIA.

**CHIEF COMPLAINT** Patient presented with fever ,cough and body pains since 5 days

**CONDITION AT ADMISSION** Patient conscious,oriented  
BP: 120/70mmHg  
HR: 110  
Spo2: 80% RA  
RR : 26/min

### INVESTIGATIONS

Test Name	Observed Values	Units	Biological Reference Intervals
CRP (C-REACTIVE PROTEINS) ( 17-04-2021 17:11 )			
CRP	98.8	mg/L	< 5 mg/L : NEGATIVE > 5 mg/L : POSITIVE

### IMPRESSION

- 1) It is serum protein which is synthesized in liver.
- 2) CRP production is a non-specific response to tissue injury; it is recommended that results of the test should be correlated with clinical findings to arrive at the final diagnosis.

### HIV I AND II ( 17-04-2021 17:09 )

ANTI HIV I & II ANTIBODY

Non-Reactive (0.12)

Reactive : > 1.0

Non-reactive : < 1.0

METHOD

CMIA

Note :- 1

Above test is a screening test only

2

A non-reactive result does not exclude the possibility of exposure to infection with HIV1/2

3

All reactive specimens should be further confirmed by HIV Western Blot or HIV PCR

### HBS AG ( 17-04-2021 17:09 )

HBSAG

Negative (0.19)

NEGATIVE

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POSITIVE : >1.0

#### METHOD

CMIA

Note :- 1

Above assay is a screening test only

2

Interference due to heterophile antibodies, Rheumatoid factors and other non-analyte substances in patients serum, capable of binding antibodies multivalently and proving erroneous analyte detection in immunoassays has been detected

3

All positive samples should be further confirmed by HBV DNA PCR

#### ANTI HCV (HEPATITIS C) ANTIBODY ( 17-04-2021 17:09 )

ANTI HCV ANTIBODY

Non-Reactive (0.08)

<1.0: Non reactive

>1.0: Reactive

#### METHOD

CMIA

Note :- 1

Above test is a screening test only

2

A non-reactive result does not exclude the possibility of exposure to or infection with HCV

3

Patients with auto-immune liver diseases may show falsely reactive results

4

All reactive specimens should be further confirmed by RIBA OR HCV RNA PCR

#### CRP (C-REACTIVE PROTEINS) ( 18-04-2021 06:16 )

CRP

91.3

mg/L

< 5 mg/L : NEGATIVE

> 5 mg/L : POSITIVE

#### IMPRESSION

1) It is serum protein which is synthesized in liver.

2) CRP production is a non-specific response to tissue injury; it is recommended that results of the test should be correlated with clinical findings to arrive at the final diagnosis.

#### CRP (C-REACTIVE PROTEINS) ( 19-04-2021 00:48 )

CRP

54.1

mg/L

< 5 mg/L : NEGATIVE

> 5 mg/L : POSITIVE

#### IMPRESSION

1) It is serum protein which is synthesized in liver.

2) CRP production is a non-specific response to tissue injury; it is recommended that results of the test should be correlated with clinical findings to arrive at the final diagnosis.

#### CRP (C-REACTIVE PROTEINS) ( 20-04-2021 01:08 )

CRP

24.4

mg/L

< 5 mg/L : NEGATIVE

> 5 mg/L : POSITIVE

#### IMPRESSION

1) It is serum protein which is synthesized in liver.

2) CRP production is a non-specific response to tissue injury; it is recommended that results of the test should be correlated with clinical findings to arrive at the final diagnosis.

#### CRP (C-REACTIVE PROTEINS) ( 21-04-2021 01:22 )

CRP

13.0

mg/L

< 5 mg/L : NEGATIVE

> 5 mg/L : POSITIVE

#### IMPRESSION

1) It is serum protein which is synthesized in liver.

2) CRP production is a non-specific response to tissue injury; it is recommended that results of the test should be correlated with clinical findings to arrive at the final diagnosis.

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correlated with clinical findings to arrive at the final diagnosis.

## CRP (C-REACTIVE PROTEINS) ( 22-04-2021 01:26 )

CRP	8.2	mg/L	< 5 mg/L : NEGATIVE > 5 mg/L : POSITIVE
-----	-----	------	--------------------------------------------

### IMPRESSION

- 1) It is serum protein which is synthesized in liver.
- 2) CRP production is a non-specific response to tissue injury; it is recommended that results of the test should be correlated with clinical findings to arrive at the final diagnosis.

## CRP (C-REACTIVE PROTEINS) ( 23-04-2021 01:47 )

CRP	4.8	mg/L	< 5 mg/L : NEGATIVE > 5 mg/L : POSITIVE
-----	-----	------	--------------------------------------------

### IMPRESSION

- 1) It is serum protein which is synthesized in liver.
- 2) CRP production is a non-specific response to tissue injury; it is recommended that results of the test should be correlated with clinical findings to arrive at the final diagnosis.

## CRP (C-REACTIVE PROTEINS) ( 24-04-2021 02:00 )

CRP	3.8	mg/L	< 5 mg/L : NEGATIVE > 5 mg/L : POSITIVE
-----	-----	------	--------------------------------------------

### IMPRESSION

- 1) It is serum protein which is synthesized in liver.
- 2) CRP production is a non-specific response to tissue injury; it is recommended that results of the test should be correlated with clinical findings to arrive at the final diagnosis.

## CT SCAN CHEST (PLAIN) HRCT CHEST ( 17-04-2021 17:18 )

### FINDINGS

Trachea and major bronchi are normal in course and calibre. No evidence of any luminal filling defects.

Mediastinal vascular structures are normal.

No evidence of any obvious mediastinal adenopathy.

Multi-focal ground glass opacities with septal thickening noted in both lungs.

Rest of the lung parenchyma is showing normal attenuation.

No evidence of pleural effusion / thickening.

Visualised sections of Liver and Spleen are normal in attenuation. No evidence of any focal lesions.

### IMPRESSION

- CT findings are consistent with Covid-19.
- CT severity score: 12/25

## BED SIDE 2D ECHO ( 18-04-2021 12:09 )

MITRAL VALVE	NORMAL
AORTIC VALVE	NORMAL
TRICUSPID VALVE	NORMAL
PULMONARY VALVE	NORMAL
RIGHT ATRIUM	NORMAL
RIGHT VENTRICLE	NORMAL
LEFT ATRIUM	3.3 cm
LEFT VENTRICLE	NO RWMA

EDD:4.6 cm IVSD:1.0 cm EF: 62%  
ESD: 2.7cm PWD:0.9 cm FS:31 %



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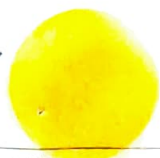
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 Patient Name: **Mr.NARESH KUMAR BEJJANKY** Age ( Gender ): **44Y ( Male )**

IAS	INTACT
IVS	INTACT
AORTA	2.8 cm
PULMONARY ARTERY	NORMAL
PERICARDIUM	NORMAL
INTRACARDIAC MASSES	NIL
IVC/SV/CS	NORMAL
PULMONARY VEINS	NORMAL
<b>COLOUR FLOW MAPPING - DOPPLER</b>	<b>NO MR/ NO AR/ 1+TR/ NO PR</b>
MITRAL	<b>E &gt; A</b>
AORTIC	<b>V MAX = 1.4m/sec</b>
PULMONARY	<b>V MAX = 0.9 m/sec</b>
TRICUSPID	<b>TRIVIAL TR</b>
<b>ECHO DIAGNOSIS</b>	<b>NO RWMA</b>
	<b>NORMAL CHAMBERS</b>
	<b>NORMAL LV /RV FUNCTION</b>
	<b>TRIVIAL TR / NO PAH</b>
	<b>NO PERICARDIAL EFFUSION / NO CLOTS</b>
	<b>TECHNICIAN:E.KALYAN</b>
	<b>DR GURU CHAITANYA MD,DM</b>
	<b>CARDIOLOGIST</b>

## CUE(COMPLETE URINE EXAMINATION) ( 17-04-2021 17:09 )

QUANTITY	18	ml	
COLOUR	Light yellow		Pale Yellow
APPEARANCE	Slightly cloudy		Clear
REACTION	6.5		4.6 - 8.0
SPECIFIC GRAVITY	1.025		1.001 - 1.035
CHEMICAL EXAMINATION	-		
GLUCOSE	2+		Absent
PROTEIN	1+		Absent
KETONE BODIES	Negative		Negative
BILE SALTS	Negative		Absent
BILE PIGMENTS	Negative		Absent
BLOOD	Negative		Negative
UROBILINOGEN	Normal		Normal
NITRITE	Negative		Negative
MICROSCOPIC EXAMINATION	-		
PUS CELLS	2-3	/hpf	0 - 1
EPITHELIAL CELLS	0-1	/hpf	0 - 1
R.B.C.	Nil	/hpf	Nil
CASTS	Nil	/hpf	Absent
CRYSTALS	Nil	/hpf	Absent
OTHERS	Budding Yeast : 3+	/hpf	Absent

**BLOOD GROUPING AND RH ( 17-04-2021 17:09 )**  
 BLOOD GROUP **O**

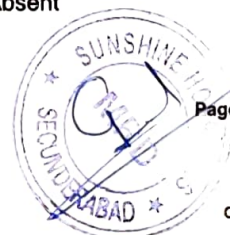
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RH (D) TYPING Negative

**Note :- Reconfirm the Blood Group and Rh Typing along with cross matching before blood transfusion**

**Recent blood transfusion, if any, interferes with interpretation of blood grouping**

#### CBP(COMPLETE BLOOD PICTURE) ( 17-04-2021 17:09 )

HAEMOGLOBIN	13.5	g/dL	13.0 - 17.0
RBC	4.76	mill / cumm	4.5-5.5
HAEMOTOCRIT(PCV)	41.3	vol%	40.0 - 50.0
MCV (MEAN CELL VOLUME)	86.7	fl	83 - 101
MCH (Mean Cell Haemoglobin)	28.4	pg	27 - 32
MCHC (MEAN CELL HAEMOGLOBIN CON- CENTRATION)	32.7	g/dL	31.5 - 34.5
PLATELET COUNT (PLT)	3.56	Lakhs/Cumm	1.5 - 4.0
RDW	13.5	%	11.6 - 14.0
MPV	8.0	fl	7.5 - 11.5
WBC COUNT	13500	Cells/cumm	4,000 - 11,000
POLYMORPHS	85	%	40 - 80
LYMPHOCYTES	13	%	20 - 40
EOSINOPHILS	01	%	1 - 6
MONOCYTES	01	%	2 - 10
BASOPHILS	00	%	0 - 1
RBC.	Normocytic normochromic.		
WBC.	Neutrophilic leukocytosis.		
PLATELETS	Adequate.		

#### PT (PROTHROMBIN TEST) WITH INR ( 17-04-2021 17:09 )

PT TEST	13.4	secs	10.88 - 12.7 secs
PT CONTROL	11.5	secs	
INR	1.164		

#### APTT(ACTIVATED PARTIAL THROMBOPLASTIN TIME) ( 17-04-2021 17:09 )

APTT TEST	23.7	sec	25.5 - 29.5
APTT CONTROL	26.7	secs	

#### TC (TOTAL LEUCOCYTE COUNT) ( 18-04-2021 01:31 )

WBC COUNT	12400	Cells/cumm	4,000 - 11,000
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#### TC (TOTAL LEUCOCYTE COUNT) ( 19-04-2021 00:48 )

WBC COUNT	11200	Cells/cumm	4,000 - 11,000
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#### TC (TOTAL LEUCOCYTE COUNT) ( 20-04-2021 01:08 )

WBC COUNT	8800	Cells/cumm	4,000 - 11,000
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#### CBP(COMPLETE BLOOD PICTURE) ( 21-04-2021 01:22 )

HAEMOGLOBIN	13.6	g/dL	13.0 - 17.0
RBC	4.84	mill / cumm	4.5-5.5
HAEMOTOCRIT(PCV)	42.1	vol%	40.0 - 50.0
MCV (MEAN CELL VOLUME)	86.9	fl	83 - 101
MCH (Mean Cell Haemoglobin)	28.1	pg	27 - 32
MCHC (MEAN CELL HAEMOGLOBIN CON- CENTRATION)	32.3	g/dL	31.5 - 34.5
PLATELET COUNT (PLT)	4.37	Lakhs/Cumm	1.5 - 4.0



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RDW	13.1	%	11.6 - 14.0
MPV	8.6	fL	7.5 - 11.5
WBC COUNT	9600	Cells/cumm	4,000 - 11,000
POLYMORPHS	90	%	40 - 80
LYMPHOCYTES	07	%	20 - 40
EOSINOPHILS	01	%	1 - 6
MONOCYTES	02	%	2 - 10
BASOPHILS	00	%	0 - 1
RBC.	Normocytic normochromic.		
WBC.	Neutrophilic.		
PLATELETS	Mild thrombocytosis.		

#### CBP(COMPLETE BLOOD PICTURE) ( 22-04-2021 01:26 )

HAEMOGLOBIN	13.4	g/dL	13.0 - 17.0
RBC	4.76	mill / cumm	4.5-5.5
HAEMOTOCRIT(PCV)	41.6	vol%	40.0 - 50.0
MCV (MEAN CELL VOLUME)	87.3	fL	83 - 101
MCH (Mean Cell Haemoglobin)	28.2	pg	27 - 32
MCHC (MEAN CELL HAEMOGLOBIN CON- CENTRATION)	32.3	g/dL	31.5 - 34.5
PLATELET COUNT (PLT)	4.77	Lakhs/Cumm	1.5 - 4.0
RDW	13.4	%	11.6 - 14.0
MPV	8.3	fL	7.5 - 11.5
WBC COUNT	11700	Cells/cumm	4,000 - 11,000
POLYMORPHS	88	%	40 - 80
LYMPHOCYTES	09	%	20 - 40
EOSINOPHILS	01	%	1 - 6
MONOCYTES	02	%	2 - 10
BASOPHILS	00	%	0 - 1
RBC.	Normocytic normochromic.		
WBC.	Neutrophilic leukocytosis.		
PLATELETS	Mild thrombocytosis.		

#### CBP(COMPLETE BLOOD PICTURE) ( 24-04-2021 02:00 )

HAEMOGLOBIN	14.3	g/dL	13.0 - 17.0
RBC	5.03	mill / cumm	4.5-5.5
HAEMOTOCRIT(PCV)	44.0	vol%	40.0 - 50.0
MCV (MEAN CELL VOLUME)	87.5	fL	83 - 101
MCH (Mean Cell Haemoglobin)	28.4	pg	27 - 32
MCHC (MEAN CELL HAEMOGLOBIN CON- CENTRATION)	32.4	g/dL	31.5 - 34.5
PLATELET COUNT (PLT)	4.66	Lakhs/Cumm	1.5 - 4.0
RDW	13.4	%	11.6 - 14.0
MPV	8.0	fL	7.5 - 11.5
WBC COUNT	13600	Cells/cumm	4,000 - 11,000
POLYMORPHS	68	%	40 - 80
LYMPHOCYTES	28	%	20 - 40
EOSINOPHILS	01	%	1 - 6

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MONOCYTES	03	%	2 - 10
BASOPHILS	00	%	0 - 1
RBC.	Normocytic normochromic.		
WBC.	Leukocytosis.		
PLATELETS	Mild thrombocytosis.		

#### CBP(COMPLETE BLOOD PICTURE) ( 27-04-2021 03:04 )

HAEMOGLOBIN	14.1	g/dL	13.0 - 17.0
RBC	4.92	mill / cumm	4.5-5.5
HAEMOTOCRIT(PCV)	43.5	vol%	40.0 - 50.0
MCV (MEAN CELL VOLUME)	88.6	fl	83 - 101
MCH (Mean Cell Haemoglobin)	28.8	pg	27 - 32
MCHC (MEAN CELL HAEMOGLOBIN CON- CENTRATION)	32.5	g/dL	31.5 - 34.5
PLATELET COUNT (PLT)	4.58	Lakhs/Cumm	1.5 - 4.0
RDW	13.4	%	11.6 - 14.0
MPV	8.5	fl	7.5 - 11.5
WBC COUNT	19200	Cells/cumm	4,000 - 11,000
POLYMORPHS	84	%	40 - 80
LYMPHOCYTES	10	%	20 - 40
EOSINOPHILS	00	%	1 - 6
MONOCYTES	06	%	2 - 10
BASOPHILS	00	%	0 - 1
RBC.	Normocytic normochromic		
WBC.	Neutrophilic leukocytosis.		
PLATELETS	Thrombocytosis		

#### CBP(COMPLETE BLOOD PICTURE) ( 28-04-2021 04:07 )

HAEMOGLOBIN	13.5	g/dL	13.0 - 17.0
RBC	4.60	mill / cumm	4.5-5.5
HAEMOTOCRIT(PCV)	40.6	vol%	40.0 - 50.0
MCV (MEAN CELL VOLUME)	88.2	fl	83 - 101
MCH (Mean Cell Haemoglobin)	29.2	pg	27 - 32
MCHC (MEAN CELL HAEMOGLOBIN CON- CENTRATION)	33.2	g/dL	31.5 - 34.5
PLATELET COUNT (PLT)	3.94	Lakhs/Cumm	1.5 - 4.0
RDW	13.7	%	11.6 - 14.0
MPV	8.2	fl	7.5 - 11.5
WBC COUNT	15700	Cells/cumm	4,000 - 11,000
POLYMORPHS	70	%	40 - 80
LYMPHOCYTES	24	%	20 - 40
EOSINOPHILS	00	%	1 - 6
MONOCYTES	06	%	2 - 10
BASOPHILS	00	%	0 - 1
RBC.	Normocytic normochromic		
WBC.	Leukocytosis.		
PLATELETS	Adequate		

#### SERUM FERRITIN ( 17-04-2021 17:11 )



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RESULT 706.03

Adult Male : 20 - 250 ug/L  
Adult Female : 10 - 120 ug/L  
Children:  
Up to 1 month : 6 - 400 ug/L  
1 to 6 months : 6 - 410 ug/L  
6 to 12 months : 6 - 80 ug/L  
1 to 5 years : 6 - 60 ug/L  
6 to 19 years : 6 - 320 ug/L

LDH ( 17-04-2021 17:11 )

RESULT 297.0

U/L

< 248 U/L

PCTQ (PROCALCITONIN) ( 17-04-2021 17:11 )

RESULT 0.051

ng/ml

High risk of severe sepsis:> 2.0 ng/ml  
Low risk of severe sepsis or septic shock : < 0.5 ng/ml  
Moderate risk of progression to severe sepsis or septic shock: > 0.5 to < 2.0 ng/ml  
Normal range:0.025-0.065 ng/ml.

HBA1C (GLYCOSYLATED HAEMOGLOBIN) ( 17-04-2021 17:11 )

HBA1C 6.8

%

Non Diabetic : 5 - 6  
Good Control:6 - 7  
Fair Control:7 - 8 %  
Poor Control:8 - 10  
Very Poor Control:> 10

UREA ( 17-04-2021 17:09 )

RESULT 37

mg/dl

17.0 - 43.0 mg/dL

SERUM CREATININE ( 17-04-2021 17:09 )

CREATININE 0.82

mg/dL

0.84-1.25 mg/dL

eGFR 108

mL/min

90-120

eGFR Interpretation

Stages of Kidney Disease for Glomerular Filtration Rate

Stage 1 Kidney damage (e.g., protein in the urine) with normal GFR : 90 or above

Stage 2 Kidney damage with mild decrease in GFR : 60 to 89

Stage 3a Moderate decrease in GFR : 45 to 59

Stage 3b Moderate decrease in GFR : 30 to 44

Stage 4 Severe reduction in GFR : 15 to 29

Stage 5 Kidney failure: Less than 15

Note :- This eGFR calculation not valid in children, Pregnant women and patients with Acute kidney Injury (AKI)  
Assume GFR less than 10 ml/min in AKI

SERUM MAGNESIUM ( 17-04-2021 17:09 )

RESULT 2.4

mg/dl

1.8 - 2.6 mg/dL

SERUM ELECTROLYTES ( 17-04-2021 17:09 )

SODIUM 138.5

meq/L

135 - 150 mEq/L

POTASSIUM 3.93

meq/L

3.5 - 5.0 mEq/L

CHLORIDE 103.2

meq/L

94.0 - 110 mEq/L

LFT(LIVER FUNCTION TEST) ( 17-04-2021 17:09 )

TOTAL BILIRUBIN 0.7

mg/dL

0.3-1.2 mg/dL

DIRECT BILIRUBIN 0.2

mg/dL

0.0 - 0.2 mg/dL

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Patient Name:	Mr.NARESH KUMAR BEJJANKY	Age ( Gender ):	44Y ( Male )

INDIRECT BILIRUBIN	0.5	mg/dL	
SERUM ALKALINE PHOSPHATASE	48	U/L	30-120U/L
SGPT/ALT	44	U/L	< 50 U/L
SGOT/AST	22	U/L	< 50 U/L
TOTAL PROTEIN	6.4	g/dL	6.6 - 8.3 g/dL
SERUM ALBUMIN	3.5	g/dL	3.5 - 5.2 g/dL
SERUM GLOBULIN	2.9	g/dL	1.80 - 3.60
A/G RATIO	1.2		1.2 - 1.5

**SERUM PHOSPHOROUS ( 17-04-2021 17:09 )**

RESULT	1.5	mg/dl	2.5 - 4.5 mg/dL
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**SERUM CALCIUM ( 17-04-2021 17:09 )**

RESULT	8.7	mg/dl	8.8 - 10.6 mg/dL
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**TSH (THYROID STIMULATING HORMONE) ( 17-04-2021 17:09 )**

TSH	0.14	uIU/ml	0.34 - 5.60
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**D DIMER ( 17-04-2021 17:11 )**

RESULT	369.1		0 - 250 ng/ml
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**RPG ( RANDOM PLASMA GLUCOSE ) ( 17-04-2021 17:09 )**

RANDOM BLOOD GLUCOSE	284	mg/dl	80.0 - 140.0 mg/dL
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CLINICAL INTERPRETATION  
<140:Normal  
140-199:Prediabetes  
≥200:Diabetes Mellitus

**SERUM ELECTROLYTES ( 18-04-2021 01:31 )**

SODIUM	138.2	meq/L	135 - 150 mEq/L
POTASSIUM	4.20	meq/L	3.5 - 5.0 mEq/L
CHLORIDE	103.3	meq/L	94.0 - 110 mEq/L

**IL-6(INTERLEUKIN-6) ( 18-04-2021 01:31 )**

RESULT	23.78	pg/mL	5.3-7.5 pg/mL.
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**IL-6(INTERLEUKIN-6) ( 19-04-2021 00:48 )**

RESULT	15.14	pg/mL	5.3-7.5 pg/mL.
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**SERUM CREATININE ( 19-04-2021 00:48 )**

CREATININE	0.60	mg/dL	0.84-1.25 mg/dL
eGFR	122	mL/min	90-120

eGFR Interpretation  
Stages of Kidney Disease for Glomerular Filtration Rate  
Stage 1 Kidney damage (e.g., protein in the urine) with normal GFR : 90 or above  
Stage 2 Kidney damage with mild decrease in GFR : 60 to 89  
Stage 3a Moderate decrease in GFR : 45 to 59  
Stage 3b Moderate decrease in GFR : 30 to 44  
Stage 4 Severe reduction in GFR : 15 to 29  
Stage 5 Kidney failure: Less than 15

Note :- This eGFR calculation not valid in children, Pregnant women and patients with Acute kidney Injury (AKI)  
Assume GFR less than 10 ml/min in AKI

**SERUM ELECTROLYTES ( 19-04-2021 00:48 )**

SODIUM	138.7	meq/L	135 - 150 mEq/L
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Page 9 of 12

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UHID:	UMR0731354	Patient No:	SS21007765
Patient Name:	Mr.NARESH KUMAR BEJJANKY	Age ( Gender ):	44Y ( Male )

POTASSIUM	4.11	meq/L	3.5 - 5.0 mEq/L
CHLORIDE	101.7	meq/L	94.0 - 110 mEq/L
UREA ( 19-04-2021 00:48 ) RESULT	49	mg/dl	17.0 - 43.0 mg/dL
D DIMER ( 20-04-2021 01:08 ) RESULT	342.9		0 - 250 ng/ml
D DIMER ( 21-04-2021 01:22 ) RESULT	282.8		0 - 250 ng/ml
UREA ( 23-04-2021 01:47 ) RESULT	38	mg/dl	17.0 - 43.0 mg/dL
SERUM CREATININE ( 23-04-2021 01:47 ) CREATININE	0.81	mg/dL	0.84-1.25 mg/dL
eGFR	108	mL/min	90-120
eGFR Interpretation	Stages of Kidney Disease for Glomerular Filtration Rate		

Stages of Kidney Disease for Glomerular Filtration Rate

Stage 1 Kidney damage (e.g., protein in the urine) with normal GFR : 90 or above

Stage 2 Kidney damage with mild decrease in GFR : 60 to 89

Stage 3a Moderate decrease in GFR : 45 to 59

Stage 3b Moderate decrease in GFR : 30 to 44

Stage 4 Severe reduction in GFR : 15 to 29

Stage 5 Kidney failure: Less than 15

Note :- This eGFR calculation not valid in children, Pregnant women and patients with Acute kidney Injury (AKI)

Assume GFR less than 10 ml/min in AKI

SERUM POTASSIUM ( 23-04-2021 01:47 ) RESULT	3.85	meq/L	3.5 - 5.0 mEq/L
SERUM SODIUM ( 23-04-2021 01:47 ) RESULT	137.9	meq/L	135 - 150 mEq/L
CHLORIDES SERUM ( 23-04-2021 01:47 ) CHLORIDE	100.8	meq/L	94.0 - 110.0 meq/l
RPG ( RANDOM PLASMA GLUCOSE ) ( 23-04-2021 01:47 ) RANDOM BLOOD GLUCOSE	99	mg/dl	80.0 - 140.0 mg/dL
CLINICAL INTERPRETATION	<140:Normal 140-199:Prediabetes ≥200:Diabetes Mellitus		

D DIMER ( 23-04-2021 01:47 ) RESULT	193.4		0 - 250 ng/ml
D DIMER ( 24-04-2021 02:00 ) RESULT	0.30		< 0.50 ug FEU/ml
CHLORIDES SERUM ( 27-04-2021 03:04 ) CHLORIDE	104.5	meq/L	94.0 - 110.0 meq/l
UREA ( 27-04-2021 03:04 ) RESULT	27	mg/dl	17.0 - 43.0 mg/dL
SERUM CREATININE ( 27-04-2021 03:04 )			



# SUNSHINE

## HOSPITALS

## DISCHARGE SUMMARY



UHID:	UMR0731354	Patient No:	SS21007765
atient Name:	Mr.NARESH KUMAR BEJJANKY	Age ( Gender ):	44Y ( Male )

CREATININE	0.68	mg/dL	0.84-1.25 mg/dL
eGFR	116	mL/min	90-120
eGFR Interpretation	Stages of Kidney Disease for Glomerular Filtration Rate		

Stage 1 Kidney damage (e.g., protein in the urine) with normal GFR : 90 or above

Stage 2 Kidney damage with mild decrease in GFR : 60 to 89

Stage 3a Moderate decrease in GFR : 45 to 59

Stage 3b Moderate decrease in GFR : 30 to 44

Stage 4 Severe reduction in GFR : 15 to 29

Stage 5 Kidney failure: Less than 15

Note :- This eGFR calculation not valid in children, Pregnant women and patients with Acute kidney Injury (AKI)

Assume GFR less than 10 ml/min in AKI

SERUM POTASSIUM ( 27-04-2021 03:04 )			
RESULT	4.58	meq/L	3.5 - 5.0 mEq/L
SERUM SODIUM ( 27-04-2021 03:04 )			
RESULT	137.3	meq/L	135 - 150 mEq/L
RPG ( RANDOM PLASMA GLUCOSE ) ( 27-04-2021 03:04 )			
RANDOM BLOOD GLUCOSE	103	mg/dl	80.0 - 140.0 mg/dL
CLINICAL INTERPRETATION	<140:Normal		
	140-199:Prediabetes		
	>=200:Diabetes Mellitus		

### COURSE IN HOSPITAL \*

Patient with above mentioned complaints, in view of present epidemiological settings, CT chest was done showing peripheral ground glass opacities, patient was admitted to strictly isolated rooms, COVID-19 RT PCR was sent which came positive. Other labs reported elevated acute phase reactants in hospital patient was having hypoxia, treated with anti virals, azithromycin, steroids and LMWH, managed with supportive care.

In due course patient was improved symptomatically, oxygenation improved, afebrile for more than 72 hours and hemodynamically stable, patient has been discharged from hospital with following advice

### DISCHARGE MEDICATIONS (advice on medication till next review)

- 1.Tab. Limcee 500mg twice daily x 10 days *prabine*
- 2.Tab. ZIncovit once daily x 2 weeks *zinkfort*
- 3.Tab. Ecosprin AV 75/10mg once daily at bedtime x 4 weeks
- 4.Tab. Pantocid 40mg once daily x 2 weeks *Before Breakfast*
- 5.Tab. Predmet 16mg twice daily x 5 days  
Followed by 16mg once daily x 5 days  
Followed by 8mg once daily x 5 days and then stop
- 6.Tab. Mondeslor 10mg once daily at 10pm x 2 weeks
- 7.Tab. Amaryl M2 once daily before breakfast x 14 days



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## HOSPITALS

## DISCHARGE SUMMARY



UHID:	UMR0731354	Patient No:	SS21007765
Patient Name:	Mr.NARESH KUMAR BEJJANKY	Age ( Gender ):	44Y ( Male )

### ADVISE AT DISCHARGE

- 1.Home-quarentine for 2 weeks
- 2.Wear N95 mask
- 3.Follow hand sanitization measures strictly
- 4.Incentive spirometry

### EMERGENCY CONDITIONS

- In case of emergency contact this no 8008108108 , 040 44550000  
List of Emergencies would include the following, but not limited to
1. Recurrence of presenting complaints
  2. Fever, vomitings, loose motions.
  3. Severe pain abdomen, SOB, Chest pain
  4. Giddiness, Altered consciousness .

### REVIEW

Review after 14 days with FBS, PPBS to medical OPD.

### Discharge summary explained by

- 1.Nurse Shivani
- 2.Discharge summary explained to Mr. Nareesh Kumar
- 3.Date and time 28/4/21

Dr.K. PRASHANT KUMAR  
GENERAL MEDICINE  
Consultant Internal Medicine  
MBBS, MD

- 1.In case of Emergency contact : 8008108108 / 040-44550000 / 040-43444546
- 2.Ambulance :- 8008656565

\* Generated By S7451 on 28/04/2021 11:10 ()

\* Generated By S7451 on 28/04/2021 11:10 ()

Medical Superintendent  
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Beside Paradise Hotel,  
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Page 12 of 12

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