

Student study project

ON

“Health profile of Principal, Teaching and Non Teaching staff members of Dr.Burgula Ramakrishna Rao Govt. Degree College, Jadcherla Town of Mahabubnagar district, Telangana State, India”

Department of Zoology

Dr.BRR Government Degree College Jadcherla
Mahabubnagar -509001



(Accredited by NAAC with “A” Grade, An ISO 9001-201 Institution
Mahabubnagar (DIST) Telangana State, India-509301
Affiliated to Palamuru University)

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Academic Year 2022-2023


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CERTIFICATE


This is to certify that the project work entitled “Health profile of Principal, Teaching and Non Teaching staff members of Dr.Burgula Ramakrishna Rao Govt. Degree College, Jadcherla Town of Mahabubnagar district, Telangana State, India” is a bonafide work done by T. Lavanya, L.Aruna sri, P.Kalyani, M.Ashwini, M.Naveena, the students of VI semester B.SC.(B.Z.C) T/M, under my supervision in Zoology at the Department of Zoology Dr.BRR Government College Jadcherla during 2022-23 and the work has not been submitted in any other college or University either part or full for the award of any degree.

Place:

Date:


B.Ravinder Rao
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DR. B. R. GOVT. COLLEGE
JADCHERLA


Signature of External examiner


Signature of Internal examiner

DECLARATION

We hereby declare that the project work entitled with "Health profile of Principal, Teaching and Non Teaching staff members of Dr. Burgula Ramakrishna Rao Govt. Degree College, Jadcherla Town of Mahabubnagar district, Telangana State, India" is a genuine work done by us under the supervision of Sri B. Ravinder Rao, Assistant Professor, Department of Zoology, Dr. BRR Govt. Degree College, and it has not been under the submission to any other Institute / University either in part or in full, for the award of any degree.

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We express deep sense of gratitude to Dr Appiya Chinnamma, Principal of Dr BRR Government degree college Jadcherla for permitting us to do this work and also for moral and technical support during the period of our project work.

We offer our sincere thanks to Ms K.Neeraja, Asst.Professor of Zoology and Smt.K.Subhashini, Asst.Professor of Zoology for their valuable suggestions.

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ABSTRACT

A survey of Health profile of the Principal and staff members working in Dr.BRR Government Degree college in Jadcherla, of Mahabubnagar District in Telangana State was done from September 2022 to May 2023. This survey collected the inputs given by the staff members and periodical health check up conducted during the study period in the college by local medical officers and Clinical labs. Results indicated that in a total of 59 individuals, 11.8% suffering from Hypertension, 15.2 % , suffering from Pre diabetes mellitus condition, 0.16% suffering from Diabetes mellitus, 084% are recorded below normal Hb levels. Among the blood types of the staff members, the Blood Type B^{Rh+ve} and O^{Rh+ve} are dominant with 33.8%. and 32.2% respectively. 2 persons (Both are male staff members) are having Rh^{-ve} Type.

Key words: Health Profile, Dr.BRR Government College-Jadcherla, Hypertension, Diabetes mellitus, Blood Types,

INTRODUCTION

Due to rapid industrialization, all employees are exposed to several types of hazards and accidents. Every year many workers are injured due to mechanical, chemical, electrical and radiation hazards and it leads to partial or total disablement. So in recent years, greater attention is given to health and safety due to pressure from government, trade unions, labour laws and awareness of employers. The efficiency of workers depends to a great extent on the environment in which the work. Work environment consists of all the factors, which act and react on the body and mind of an employee. The primary aim is to create an environment, which ensures the greatest ease of work and removes all causes of worries.

Occupational health and safety is a discipline with a broad scope involving many specialized fields. In its broadest sense, it should aim at:

- a) The promotion and maintenance of the highest degree of physical, mental and social well-being of workers in all occupations.
- b) The prevention among workers of adverse effects on health caused by their working conditions.
- c) The protection of workers in their employment from risks resulting from factors adverse to health.
- d) The placing and maintenance of workers in an occupational environment adapted to physical and mental needs.
- e) The adaptation of work to humans.

Successful occupational health and safety practice requires the collaboration and participation of both employers and workers in health and safety programmes, and involves the consideration of issues relating to occupational medicine, industrial hygiene, toxicology, education, engineering safety, ergonomics, psychology, etc. Health care quality is the degree to which health care services for individuals and populations increase the likelihood of desired health outcomes. Quality of care plays an important role in describing the iron triangle of health care, which defines the intricate relationships between quality, cost, and accessibility of health care within a community. Researchers measure healthcare quality to identify problems caused by overuse, underuse, or misuse of health resources. In the present study, the details related to the health profile such as Blood Typing, Diabetes mellitus, hypertension Haemoglobin and complete blood picture etc., of the staff members working in Dr.BRR Government Degree College are collected to draw conclusions on the health profile of the staff of the college.

BLOOD GROUP : There are 4 main blood groups (types of blood) – A, B, AB and O. Your blood group is determined by the genes you inherit from your parents.

Each group can be either RhD positive or RhD negative, which means in total there are 8 blood groups. antibodies and antigens

Blood is made up of red blood cells, white blood cells and platelets in a liquid called plasma. Your blood group is identified by antibodies and antigens in the blood. Antibodies are proteins found in plasma. They're part of your body's natural defences. They recognise foreign substances, such as germs, and alert your immune system, which destroys them. Antigens are protein molecules found on the surface of red blood cells.

The ABO system

There are 4 main blood groups defined by the ABO system:

- **blood group A** – has A antigens on the red blood cells with anti-B antibodies in the plasma
- **blood group B** – has B antigens with anti-A antibodies in the plasma
- **blood group O** – has no antigens, but both anti-A and anti-B antibodies in the plasma
- **blood group AB** – has both A and B antigens, but no antibodies

Blood group O is the most common blood group. Almost half of the UK population (48%) has blood group O. Receiving blood from the wrong ABO group can be life-threatening. For example, if someone with group B blood is given group A blood, their anti-A antibodies will attack the group A cells. This is why group A blood must never be given to someone who has group B blood and vice versa. As group O red blood cells do not have any A or B antigens, it can safely be given to any other group. The NHS Blood and Transplant (NHSBT) website has more information about the [different blood groups](#)

The Rh system

Red blood cells sometimes have another antigen, a protein known as the RhD antigen. If this is present, your blood group is RhD positive. If it's absent, your blood group is RhD negative.

This means you can be 1 of 8 blood groups:

- A RhD positive (A+)
- A RhD negative (A-)
- B RhD positive (B+)
- B RhD negative (B-)
- O RhD positive (O+)
- O RhD negative (O-)
- AB RhD positive (AB+)
- AB RhD negative (AB-)

About 85% of the UK population is RhD positive (36% of the population has O+, the most common type). In most cases, O RhD negative blood (O-) can safely be given to anyone. It's often used in medical emergencies when the blood type is not immediately known. It's safe for most recipients because it does not have any A, B or RhD antigens on the surface of the cells, and is compatible with every other ABO and RhD blood group. The NHS Blood and Transplant (NHSBT) website has more information about the [Rh system](#).

• HYPERTENSION:

Hypertension (HTN or HT), also known as **high blood pressure (HBP)**, is a long-term medical condition in which the blood pressure in the arteries is persistently elevated. High blood pressure usually does not cause symptoms.^[1] High blood pressure, however, is a major risk factor for stroke, coronary artery disease, heart failure, atrial fibrillation, peripheral arterial disease, vision loss, chronic kidney disease, and dementia.^[12] Hypertension is a major cause of premature death worldwide.

High blood pressure is classified as primary (essential) hypertension or secondary hypertension. About 90–95% of cases are primary, defined as high blood pressure due to nonspecific lifestyle and genetic factors. Lifestyle factors that increase the risk include excess salt in the diet, excess body weight, smoking, physical inactivity and alcohol use. The remaining 5–10% of cases are categorized as secondary high blood pressure, defined as high blood pressure due to an identifiable cause, such as

chronic kidney disease, narrowing of the kidney arteries, an endocrine disorder, or the use of birth control pills.

Blood pressure is classified by two measurements, the systolic and diastolic pressures, which are the maximum and minimum pressures, respectively. For most adults, normal blood pressure at rest is within the range of 100–130 millimeters mercury (mmHg) systolic and 60–80 mmHg diastolic. For most adults, high blood pressure is present if the resting blood pressure is persistently at or above 130/80 or 140/90 mmHg. Different numbers apply to children.^{11,12} Ambulatory blood pressure monitoring over a 24-hour period appears more accurate than office-based blood pressure measurement.

Lifestyle changes and medications can lower blood pressure and decrease the risk of health complications.¹ Lifestyle changes include weight loss, physical exercise, decreased salt intake, reducing alcohol intake, and a healthy diet.¹ If lifestyle changes are not sufficient, then blood pressure medications are used.¹ Up to three medications taken concurrently can control blood pressure in 90% of people.¹ The treatment of moderately high arterial blood pressure (defined as >160/100 mmHg) with medications is associated with an improved life expectancy.¹ The effect of treatment of blood pressure between 130/80 mmHg and 160/100 mmHg is less clear, with some reviews finding benefit and others finding unclear benefit.¹ High blood pressure affects between 16 and 37% of the population globally.¹⁵ In 2010 hypertension was believed to have been a factor in 18% of all deaths (9.4 million globally).

• DIABETES :

Diabetes is a disease that occurs when your blood glucose, also called blood sugar, is too high. Blood glucose is your main source of energy and comes from the food you eat. Insulin, a hormone made by the pancreas, helps glucose from food get into your cells to be used for energy. Sometimes your body doesn't make enough—or any—insulin or doesn't use insulin well. Glucose then stays in your blood and doesn't reach your cells. Over time, having too much glucose in your blood can cause health problems. Although diabetes has no cure, you can take steps to manage your diabetes and stay healthy. Sometimes people call diabetes “a touch of sugar” or “borderline diabetes.” These terms suggest that someone doesn't really have diabetes or has a less serious case, but every case of diabetes is serious.

Diabetes affects just about everyone, from the over 110 million Americans with or at risk for the disease to the many more people who care for them.

What are the different types of diabetes?

The most common types of diabetes are type 1, type 2, and gestational diabetes.

Type 1 diabetes

If you have type 1 diabetes, your body does not make insulin. Your immune system attacks and destroys the cells in your pancreas that make insulin. Type 1 diabetes is usually diagnosed in children and young adults, although it can appear at any age. People with type 1 diabetes need to take insulin every day to stay alive.

Type 2 diabetes

If you have type 2 diabetes, your body does not make or use insulin well. You can develop type 2 diabetes at any age, even during childhood. However, this type of diabetes occurs most often in middle-aged and older people. Type 2 is the most common type of diabetes.

Gestational diabetes

Gestational diabetes develops in some women when they are pregnant. Most of the time, this type of diabetes goes away after the baby is born. However, if you've had gestational diabetes, you have a greater chance of developing type 2 diabetes later in life. Sometimes diabetes diagnosed during pregnancy is actually type 2 diabetes.

Other types of diabetes

Less common types include monogenic diabetes, which is an inherited form of diabetes, and cystic fibrosis-related diabetes [External link](#).

How common is diabetes?

in the United States, or 9.4 percent of the population, had diabetes. More than 1 in 4 of them didn't know they As of 2015, 30.3 million people had the disease. Diabetes affects 1 in 4 people over the age of 65. About 90-95 percent of cases in adults are type 2 diabetes.¹

Who is more likely to develop type 2 diabetes?

You are more likely to develop type 2 diabetes if you are age 45 or older, have a family history of diabetes, or are overweight. Physical inactivity, race, and certain health problems such as high blood pressure also affect your chance of developing type 2 diabetes. You are also more likely to develop type 2 diabetes if you have prediabetes or had gestational diabetes when you were pregnant. Learn more about risk factors for type 2 diabetes.

What health problems can people with diabetes develop?

Over time, high blood glucose leads to problems such as

- heart disease
- stroke
- kidney disease
- eye problems
- dental disease
- nerve damage
- foot problems

• HEMOGLOBIN :

Hemoglobin (**haemoglobin** in [British English](#))^[a], abbreviated **Hb** or **Hgb**, is the iron-containing oxygen-transport protein present in red blood cells (erythrocytes) of almost all vertebrates^[3] (the exception being the fish family Channichthyidae)^[4] as well as the tissues of some invertebrate animals. Hemoglobin in blood carries oxygen from the respiratory organs (lungs or gills) to the other tissues of the body, where it releases the oxygen to enable aerobic respiration which powers the animal's metabolism. A healthy human has 12 to 20 grams of hemoglobin in every 100 mL of blood. Hemoglobin is a metalloprotein and chromoprotein.

In mammals, hemoglobin makes up about 96% of a red blood cell's weight excluding water, and around 35% of the total weight including water.^[1] Hemoglobin has an oxygen-binding capacity of 1.34 mL O₂ per gram,^[6] which increases the total blood oxygen capacity seventy-fold compared to dissolved oxygen in blood plasma alone.^[2] The mammalian hemoglobin molecule can bind and transport up to four oxygen molecules.^[8]

Hemoglobin also transports other gases. It carries off some of the body's respiratory carbon dioxide (about 20–25% of the total)^[2] as carbaminohemoglobin, in which CO₂ binds to the heme protein. The molecule also carries the important regulatory molecule nitric oxide bound to a thiol group in the globin protein, releasing it at the same time as oxygen.^[10]

Hemoglobin is also found in other cells, including in the A9 dopaminergic neurons of the substantia nigra, macrophages, alveolar cells, lungs, retinal pigment epithelium, hepatocytes, mesangial cells of the kidney, endometrial cells, cervical cells, and vaginal epithelial cells.^[11] In these tissues, hemoglobin absorbs unneeded oxygen as an antioxidant, and regulates iron metabolism.^[12] Excessive glucose in the blood can attach to hemoglobin and raise the level of hemoglobin A1c.^[13]

Hemoglobin and hemoglobin-like molecules are also found in many invertebrates, fungi, and plants.^[11] In these organisms, hemoglobins may carry oxygen, or they may transport and regulate other small molecules and ions such as carbon dioxide, nitric oxide, hydrogen sulfide and sulfide. A variant called leghemoglobin serves to scavenge oxygen away from anaerobic systems such as the nitrogen-fixing nodules of leguminous plants, preventing oxygen poisoning.

The medical condition hemoglobinemia, a form of anemia, is caused by intravascular hemolysis, in which hemoglobin leaks from red blood cells into the blood plasma.

• C. B. P (COMPLETE BLOOD PICTURE) :

A Complete Blood Picture (CBP) test is a collection of tests that give information about red blood cells (RBC), white blood cells (WBC), and platelets in the blood. It is done regularly to get a sense of a patient's overall health.

Nowadays, CBP tests can be accessed without hassle, and excellent CBP blood test prices make it more convenient for regular health tests and checkups.

What is CBP in Blood Tests?

Complete Blood Picture (CBP) is a regular screening test used for early detection or diagnosis when indications and symptoms are connected to various disorders and diseases affecting the blood cells. This is especially important when infection, inflammation, bleeding disorder, leukemia, or anemia are suspected due to lifestyle or genetic factors.

A Complete Blood Count (CBC) determines how many different cells are present in the blood. It also includes some useful data on other parameters related to the type of blood cell.

CBP and CBC are like the above definitions, but the only difference is that a CBP or hemogram gives you the total WBC and RBC, and Platelets. If you are bleeding or anemic, that is all you need.

A Complete Blood Picture (CBP) detects a variety of components in a person's blood, including:

Red Blood Cells (RBC)

Our cardiovascular system comprises red blood cells, which distribute nutrients and oxygen throughout the body. Hemoglobin transports oxygen molecules. CBP test can assess RBC count, Hemoglobin, ESR (Erythrocyte Sedimentation Rate), PCV, MCV, MCH, and MCHC.

White Blood Cells (WBC)

WBCs help in fighting against infections. Different types of white blood cells aid in diagnosing and treating many illnesses and diseases. For example, neutrophils aid in detecting bacterial infections, eosinophils aid in seeing allergic reactions, and lymphocytes aid in evaluating viral infections. CBP test detects the total WBC count, DC, which carries oxygen

Platelets

In short, platelets assist in blood clotting. Platelets are portions of giant cells called megakaryocytes that produce bleeding in the event of an injury or infection. Platelet aggregation is the clump of blood cells forming at the bleeding site. Platelets are responsible for stopping blood flow in an accident or illness. CBP test measures Platelet count, MPV, BT, and CT (Computer Tomography).

A Complete Blood Picture (CBP) showing abnormal increases or declines in cell counts may indicate an underlying medical problem that needs further review.

Why is CBP Blood Test done?

A CBP is a standard blood test, and it can be advised for several reasons. Here are a few reasons for the CBP test.

Review Overall Health

The doctor may order this test for a variety of reasons. It could be used as part of a routine checkup or screening or as a follow-up test to track the effectiveness of treatments.

To Diagnose a Medical Condition

A Complete Blood Picture (CBP) may be used to determine the cause of specific symptoms. If you are suffering from weakness, exhaustion, fever, inflammation, bruising, or bleeding, your doctor may recommend a complete blood count. If your doctor suspects an infection, the test can confirm the diagnosis.

To Monitor a Medical Condition

The doctor may recommend a Complete Blood Picture (CBP) to check the medical state if the patient has been diagnosed with a blood problem that affects their blood cell count. A low red blood cell count or hemoglobin level may indicate anemia, which various factors cause. Bone marrow infection or low blood oxygen levels are two reasons for a high red blood cell count or hemoglobin.

• L.F.T (LIVER FUNCTION TEST):

Liver function tests (also known as a liver panel) are blood tests that measure different enzymes, proteins, and other substances made by the liver. These tests check the overall health of your liver. The different substances are often tested at the same time on a single blood sample, and may include the following:

- Albumin, a protein made in the liver
- Total protein. This test measures the total amount of protein in the blood.
- ALP (alkaline phosphatase), ALT (alanine transaminase), AST (aspartate aminotransferase), and gamma-glutamyl transferase (GGT). These are different enzymes made by the liver.
- Bilirubin, a waste product made by the liver.
- Lactate dehydrogenase (LD), an enzyme found in most of the body's cells. LD is released into the blood when cells have been damaged by disease or injury.
- Prothrombin time (PT), a protein involved in blood clotting.
- If levels of one or more of these substances are outside of the normal range, it may be a sign of liver disease.
- Other names: liver panel, liver function panel, liver profile hepatic function panel, LFT

What are they used for?

Liver function tests are most often used to:

- Help diagnose liver diseases, such as hepatitis
- Monitor treatment of liver disease. These tests can show how well the treatment is working.

- Check how badly a liver has been damaged or scarred by disease, such as cirrhosis
- Monitor side effects of certain medicines

Why do I need liver function testing?

You may need liver function testing if you have symptoms of liver disease. These include:

- Jaundice, a condition that causes your skin and eyes to turn yellow
- Nausea and vomiting
- Diarrhea
- Abdominal pain
- Dark-colored urine
- Light-colored stool
- Fatigue
- You may also need these tests if you have certain risk factors. You may be at higher risk for liver disease if you:

Have a family history of liver disease

Have alcohol use disorder, a condition in which you have difficulty controlling how much you drink

Think you have been exposed to a hepatitis virus

Take medicines that may cause liver damage

What happens during a liver function test?

A health care professional will take a blood sample from a vein in your arm, using a small needle. After the needle is inserted, a small amount of blood will be collected into a test tube or vial. You may feel a little stinging when the needle goes in or out. This usually takes less than five minutes.

Review of literature 1) Johansson B; Rask K; Stenberg M (2010), this study was to carry out a broad survey and analysis of relevant research articles about piece rate wages and their effects on health and safety. A total of 75 research articles were examined extensively and 31 of these were found relevant and had sufficient quality to serve the purpose of this study. The findings of these relevant articles are summarized and analyzed in the survey. More recent research shows a clear interest for health, musculoskeletal injuries, physical workload, pains and occupational injuries. The fact that 27 of the 31 studied articles found negative effects of piece rates on different aspects of health and safety does not prove causality, but together they give very strong support that in most situations piece rates have negative effects on health and safety.

2) Tompa, Emile PhD; Dolinschi, Roman MA; de Oliveira (2009), we reviewed the occupational health and safety intervention literature to synthesize evidence on financial merits of such interventions. A literature search included journal databases, existing systematic reviews, and studies identified by content experts. We found strong evidence that ergonomic and other musculoskeletal injury prevention intervention in manufacturing and warehousing are worth undertaking in terms of their financial merits. The economic evaluation of interventions in this literature warrants further expansion. The review also provided insights into how the methodological quality of economic evaluations in this literature could be improved.

3) Conor CO Reynolds; M Anne Harris; Peter A Cripton; Meghan Winters (2009), Bicycling has the potential to improve fitness. Understanding ways of making bicycling safer is important to improving population health. We reviewed studies of the impact of transportation infrastructure on bicyclist safety.

Objectives:

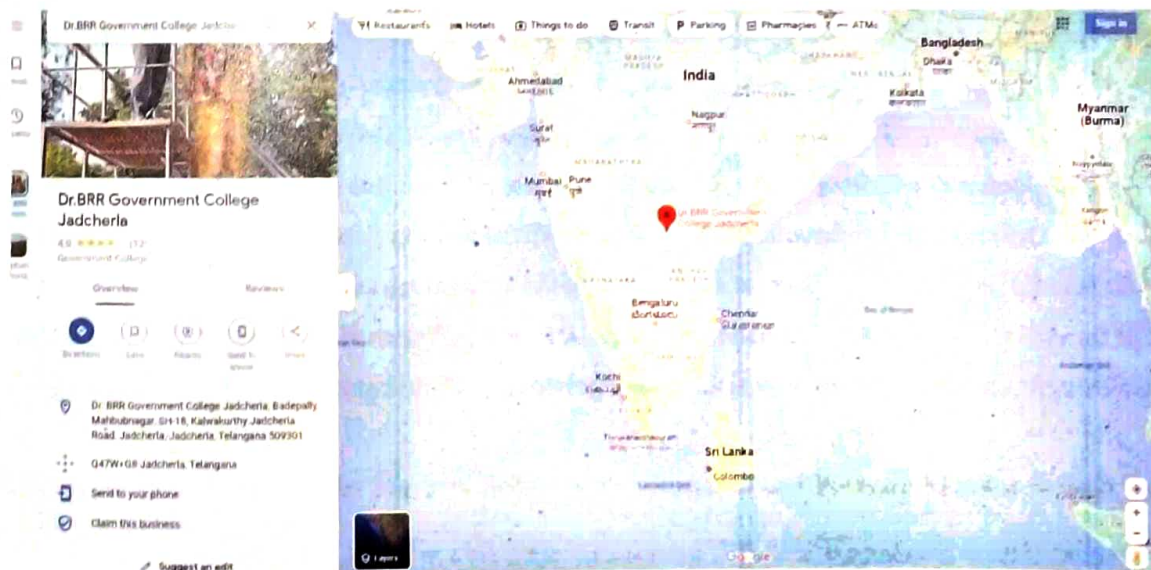
1. To find out the status of Health of the staff members of Dr.BRR Government Degree College Jadcherla.
2. To trace out the serious health issues among the staff members of Dr.BRR Government Degree College Jadcherla.
3. To suggest medical assistance if needed to any of the member in study group.
- 4.

MATERIAL AND METHODS

As a part of the curriculum of B.Sc. Program, the affiliated University of Dr.BRR Government College has introduced a student study project in VI semester from the Academic year 2019-20 onwards.

Study Area:

Dr.BRR Government Degree College Jadcherla, an educational institution, offering undergraduate programs to the students. Established in the year 1963. Located at Signal gadda in the town with 15 acres of land.



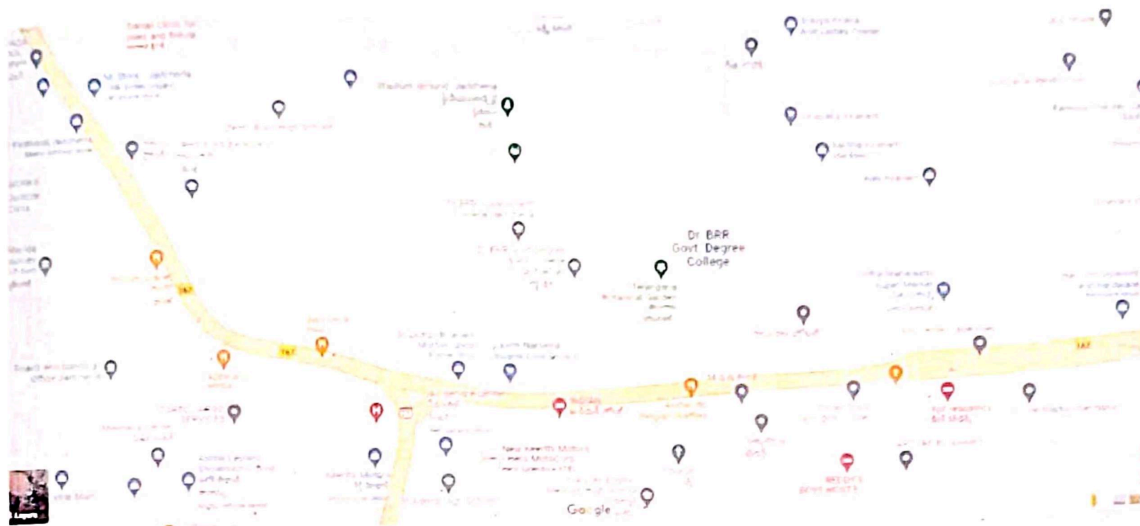


Fig.1: Google map showing the location of the study area(courtesy:
<https://www.google.com/maps/@16.7637025,78.1460863,18z>)

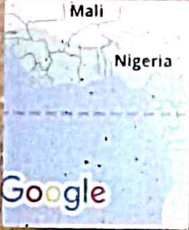
B.Methodology:

The team of five members selected the project work of preparing a report on the Health Profile of the staff members working in Dr.BRR Government Degree College Jadcherla, the team members regularly contact the staff members and collect the details of their health status. Copies of past Health records of the members are collected for analysis. Special Health camps are organised for diagnosing the health issues. Recording of Blood Pressure and Blood sugar levels were done on daily/weekly/Monthly basis, Systolic pressure 130 mmHg and diastolic pressure 90 mm Hg is considered as threshold value for Hypertension. Random blood glucose levels up to 160 mg/dL is considered as normal. Any deviation of above values is considered as occurrence of the disease. Local medical officers and clinical lab technicians help is taken while recording the data. Data this collected is tabulated and analysed to draw the graphs for an easy interpretation. The following apparatus is used to collect the health profile data.

- 1.Diamond BPMR111 Regular Mercury Sphygmomanometer Blood Pressure Monitor is used for blood pressure recordings



GPS Map Camera



Badepalle, Telangana, India

16° 05' 16.575° N, 78° 14' 6.198° E

16° 05' 16.575°

78° 14' 6.198°

16/05/23 03:20 PM GMT +05:30

Google

... Blood glucose Monitoring system was used to record the blood glucose levels

Ozochek EasyTouch[®] Simple

Blood Glucose Monitoring System

- Non-coded system
- Hassle-free testing
- Less blood sample



emed 

3. Spanclone Anti – A+B+D (Rh₀) monoclonal 11AS133-10 Diagnostic reagents are used to determine blood types of staff members

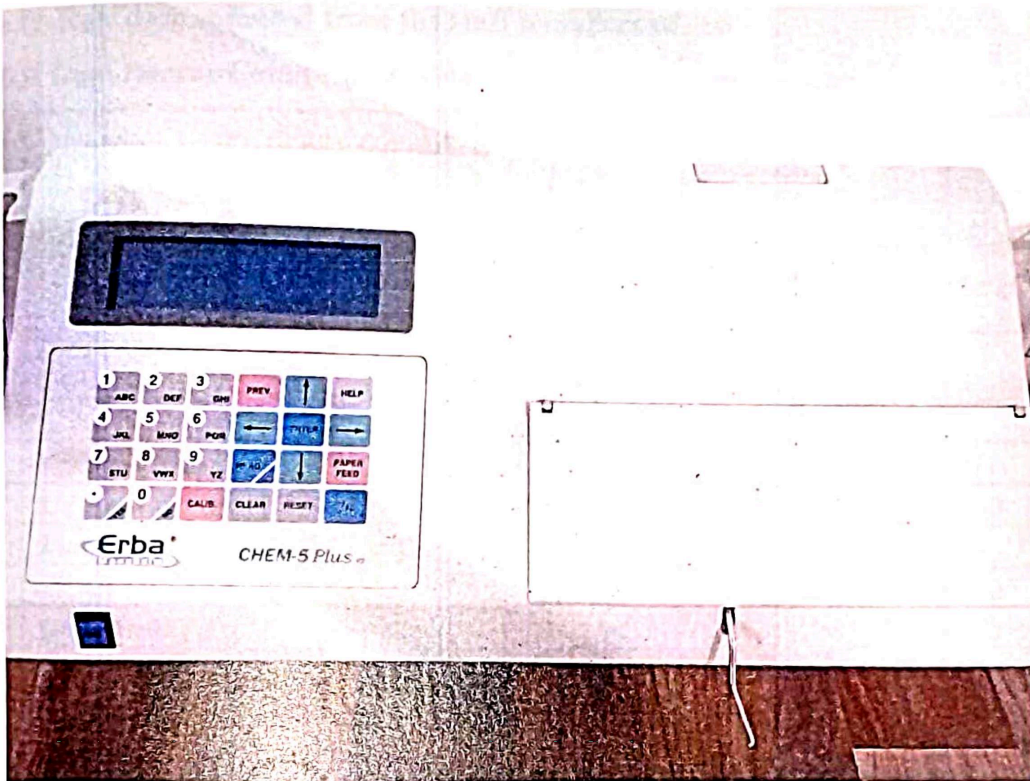


GPS Map Camera

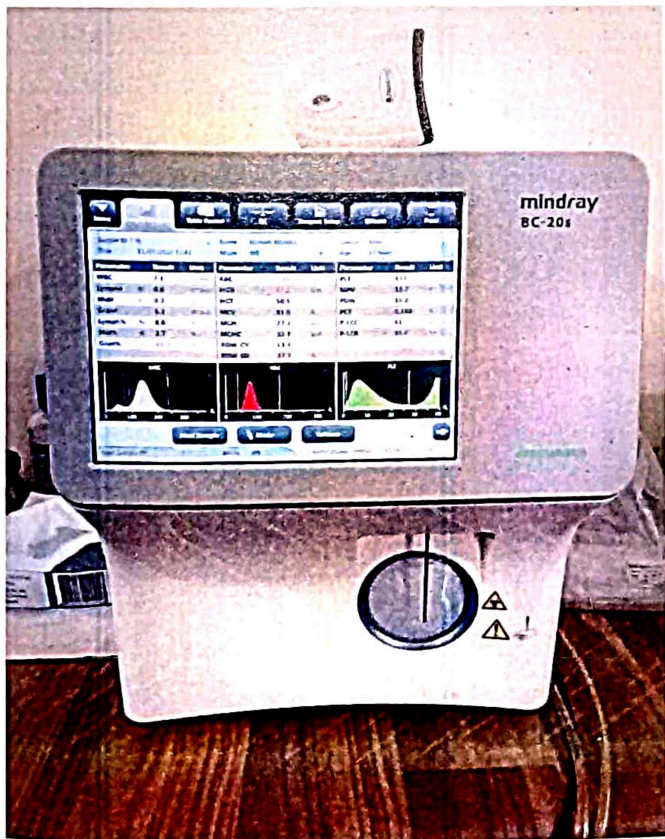


Badepalle, Telangana, India
Q47W+FH5, Badepalle, Telangana 509301, India
Lat 16.763575°
Long 78.146198°
15/05/23 03:17 PM GMT +05:30

4. Erba Mannheim , CHEM – 5 Plus is used for Biochemistry analysis.



5. Mindray haematology analyser is used for blood tests.



Results and Discussion:

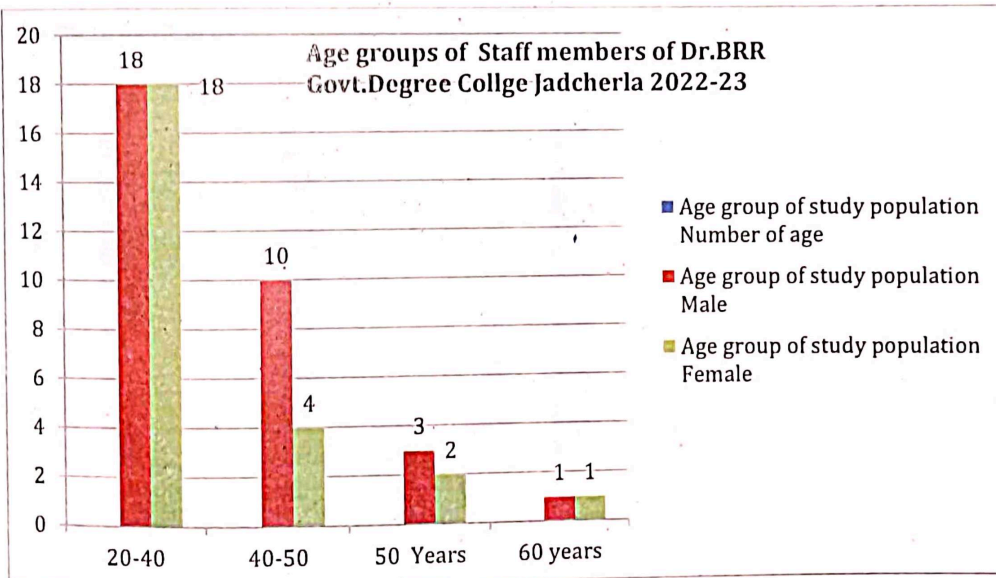
Table.1: Raw data collected from the staff members of the Dr.BRR Govt.Degree College Jadcherla.

S.NO	Name of the Member	Mobile Number	Age Yrs	Male/Female	Blood group	Hypertension Yes/No	Diabetes (mg/dl)	Hemoglobin (g)	R.B.C Count
1	Dr.Ch Appiya Chinnama	9676897079		F			15mg/dl	12.5	5.5
2	B. Ravinder Rao	9885184432	56	M	O+	No			
3	N.Saikondalu	9179561193	36	M	B+	No	106	15	4.5
4	J.Vikram kumar	7396999024	36	M	B+	No	130	14	5.0
5	Sumera tabassum	9398272516	27	F	O+	No	99	12.5	6.0
6	Ch.Kavitha	9182932429	40	F	B+	No	110	13.0	5.0
7	Dr.P.Nandakishore	9490600902	34	M	B-	No	163	15	4.5
8	P.V.S Vijay kumar	8688761199	40	M	B-	No	148	17	5.3
9	N.Subhashini	9293150303	51	F	O+	No	140	13.5	4.5
10	K.Balaraju	9703281648	33	M	B+	No	98	14	5.2
11	k.Mallikarjun	9705419492	35	M	A+	No	101	15	4.9
12	R.Ramadevi	9963112483	46	F	O+	No	136	12.9	5.0
13	A.Yadaiah	9441438210	40	M	B+	Yes	93	14	5.9
14	G.Vanitha	9505750811	36	F	B+	No	110	13.0	6.0
15	B.Madhavi	9966340566	38	F	B+	No	120	12.5	4.9
16	N.Verapraphap	9912795088	35	M	B+	No	151	17	4.5
17	M.Jagan	9666150969	36	M	O+	No	191	15	4.5
18	R.Anitha	9000131199	36	F	A-	No	115	13.0	4.9
19	E.Venkat Reddy	9390090093	52	M	A+	No	198	16	5.0
20	R.Vijayalaxmi devi	9989066551	30	F	AB+	No	110	14.0	4.5
21	G. Susmitha	8501863571	29	F	O+	No	100	12.5	6.0
22	B.Uday kumar	9989943665	38	M	A+	No	120	16	5.1
23	K.Latha	9700566175	34	F	AB+	No	153	13.0	5.5
24	C.Beeraiyah	9441301479	47	M	O+	No	150	15	4.6
25	R.Nagaraju	9848493116	46	M	O+	Yes	89	15	4.7
26	Dr.K Narasimha Rao	9492501588	54	M	AB+	No	95	14	5.1
27	M.Chendra Shekar	9866521303	49	M	B+	Yes	120	16	5.1
28	B.Ravi	9581838566	49	M	B+	No	150	14	5.9
29	S.Sudeer Reddy	9573399227	40	M	B+	No	130	16	6.1
30	Dr.K.manjula	9885070162	44	F	B+	No	110	13.0	5.7
31	S. Shanker	8309772744	28	M	A+	No	110	14	4.9
32	CH.Venkateshwarlu	9502645460		M		No	203	14	4.5
33	B.Srinivasulu	9948188372	42	M	A+	Yes	107	15	4.5
34	K.Narsimulu	9848473762	45	M		No	130	14	4.7
35	S.Madavi latha	9573847947	39	F		No	101	12.5	5.0

36	G.Laxmi	7337413160	27	F	O+	No	106	13.0	4.8
37	T.Chinnama	9493691918	59	F	B+	No	100	12.5	5.9
38	A.Rajini	7386577397	37	F	O+	No	101	16	6.1
39	M.Ramakrishna	9885432181	37	M	O+	No	101	14	5.5
40	N.Paramataiah	9441871800	52	M	O+	No	101	15	5.0
41	Sadashiva	9963536233	42	M	B+	No	179	13.5	4.7
42	Bhargavi latha	9959515840	40	F	B+	No	119	14.1	5.9
43	K.Manjula	9885627542	48	F	O+	Yes	100	15	6.1
44	N.Narsimulu	8499056109	36	M	A+	No	120	15	5.9
45	M.Chandra shekar	9440606345	48	M	A+	No	108	14	6.3
46	K.Laxma Reddy	9959695987	40	M	A+	No	111	15	4.9
47	K.Vasanth		38	M	O+	No	114	13.0	4.9
48	B.Mannemma		60	F	B+	No	153	12.5	4.5
49	B.Thimmappa	9441185017	40	F	O+	No	130	14	4.5
50	Kaja pasha	9885507840	46	M	B+	No	120	14	5.1
51	V.Chiranjivi	9985116031	38	M	O+	No	140	15	5.5
52	CH.Laxmaiah	9440453772	47	M	A+	No	120	16	5.7
53	Geetha	9948758721	31	F	O+	No	116	12.5	6.1
54	C.Narasamma		48	F	B+	No	123	13.0	5.6
55	G.Shanthi	7386083736	31	F	O+	No	100	12.5	5.5
56	D.Narasimulu	9908046903	60	M	O+	Yes	101	14	4.5
57	K.Vamma	9666441962	39	F	A+	Yes	368	12.5	4.7
58	Lavanya	9951314117	26	F		No	101	13.0	5.0
59	K.Subhashini	8328031698	47	F	AB+	Yes	141	13.5	5.9

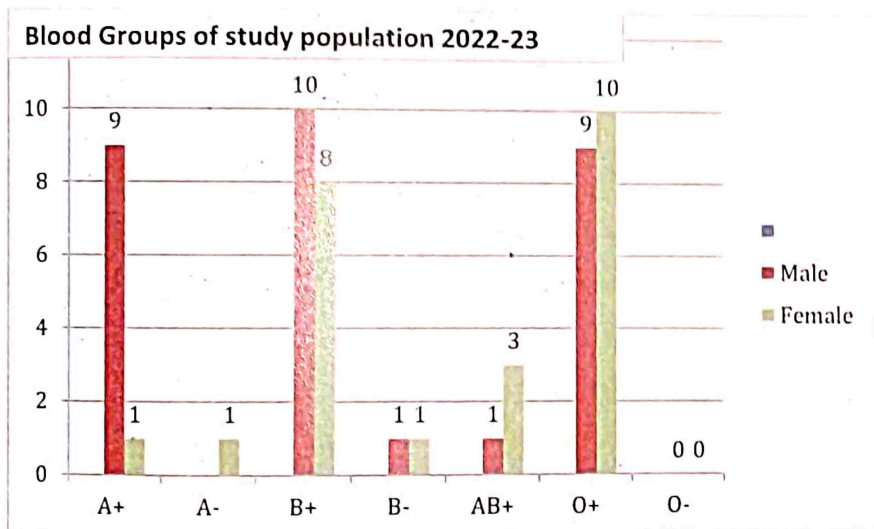
N	Name of the Member	W.B. C Count	P.C. V ml/d L	Platelet Count Lakhs/cum m	Neutrophils Lakhs/cum m	Lymphocytes Lakhs/cum m	Eosinophils Lakhs/cum m	Monocytes Lakhs/cum m
1	Dr.Ch Appiya Chinnama	6000	38.2	1.5	55	339	5	4
2	B. Ravinder Rao				55	40	5	2
3	N.Saikondalu	5000	39.1	2	55	29	4	2
4	J.Vikram kumar	7000	37	1.5	54	30	4	3
5	Sumera tabassum	9000	S.N O	2.5	50	35	5	2
6	Ch.Kavitha	8000	37.2	3	59	39	6	5
7	Dr.P.Nandakishore	8500	40.1	2.5	45	40	5	4
8	P.V.S Vijay kumar	9000	45.2	1.6	54	34	5	2
9	N.Subhashini	8500	38	1.8	50	39	4	5
10	K.Balaraju	7500	39	1.9	50	40	3	6
11	k.Mallikarjun	7000	40.1	2	47	35	3	2
12	R.Ramadevi	8000	45.5	2.5	51	29	5	4
13	A.Yadaiah	6500	50	1.6	62	30	5	3
14	G.Vanitha	7000	50	1.5	53	35	6	5
15	B.Madhavi	8000	40.5	1.9	43	39	6	6
16	N.Veraprathap	7500	40.7	2	45	40	5	2
17	M.Jagan	8000	37	2.1	55	25	4	2
18	R.Anitha	8500	37.9	2.9	58	32	5	4

Age group distribution of study population		
Age group (yrs)	Male	Female
20-40	18	18
40-50	10	4
50 Years	3	2
60 years	1	1



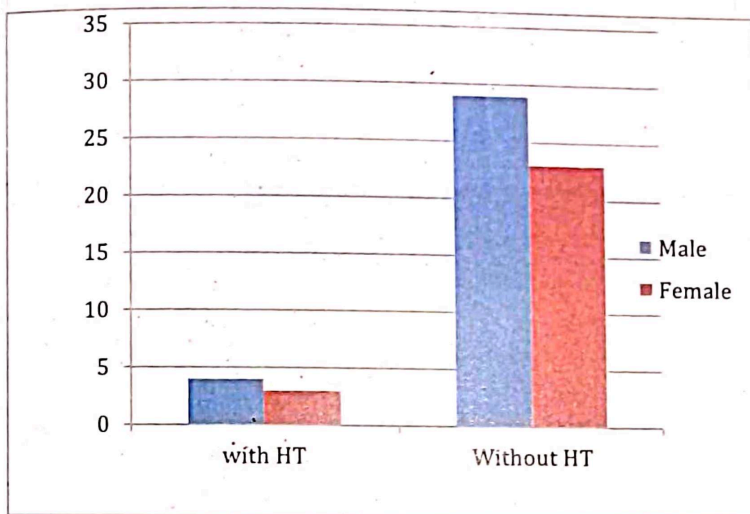
19	E.Venkat Reddy	6000	38.2	3.9	49	39	3	5
20	R.Vijayalaxmi devi	9000	39.5	3	60	40	5	6
21	G.Susmitha	8000	40	4	53	39	5	4
22	B.Uday kumar	9000	38	4.2	59	25	4	3
23	K.Latha	6000	39	4.1	61	29	4	3
24	C.Beeraiah	6500	40	1.5	54	30	3	5
25	R.Nagaraju	7000	46	3.9	50	35	5	6
26	Dr.K Narasimha Rao	7500	44	3.6	60	40	6	6
27	M.Chendra Shekar	7000	50	2.6	55	25	5	5
28	B.Ravi	8000	38	2.5	42	32	4	4
29	S.Sudeer Reddy	5000	39	4	45	30	5	4
30	Dr.K.manjula	6000	40	4.2	50	39	5	3
31	S. Shanker	7000	40.5	2	47	35	5	4
32	CH.Venkateshwarl u	8000	40.6	2.5	47	48	5	5
33	B.Srinivasulu	7000	37.1	1.5	50	34	4	5
35	S.Madavi latha	5000	40.3	1.9	50	32	5	4
36	G.Laxmi	8000	40.5	2.9	56	25	5	5
37	T.Chinnama	5500	50	1.6	51	29	6	6
38	A.Rajini	6000	50	1.5	52	30	5	2
39	M.Ramakrishna	7000	49	1.9	49	35	4	4
40	N.Paramataiah	7500	48	2	55	40	5	4
41	Sadashiva	9000	45	2.1	60	39	3	5
42	Bhargavi latha	8000	38	1.5	56	25	5	5
43	K.Manjula	8500	39	4.9	45	29	6	6
44	N.Narsimulu	9000	40	3.5	40	30	5	6
45	M.Chandra shekar	6000	40.5	4	50	31	4	5
46	K.Laxma Reddy	7000	50	4.3	55	35	5	5
47	K.Vasantha	8000	46	1.5	49	40	4	6
48	B.Mannemma	9000	40	1.9	50	25	6	6
49	B.Thimmappa	8500	47	1.8	40	29	4	4
50	Kaja pasha	7000	50	2	42	30	5	4
51	V.Chiranjivi	5000	38	2.6	49	31	6	3
52	CH.Laxmaiah	5500	37	2.7	50	35	4	3
53	Geetha	6000	48	3.9	51	40	4	5
54	C.Narasamma	6000	50	3.5	49	29	5	5
55	G.Shanthi	6500	37	1.6	50	30	6	6
56	D.Narasimmulu	7000	37.2	1.7	55	35	4	4
57	K.Vamma	7500	38.3	1.9	54	39	5	3
58	Lavanya	9000	40.5	1.5	49	30	5	3
59	K.Subhashini	8000	40.5	3	50	32	5	6

Blood Groups of study population		
Blood Group	Male	Female
A+	9	1
A-		1
B+	10	8
B-	1	1
AB+	1	3
O+	9	10
O-	0	0

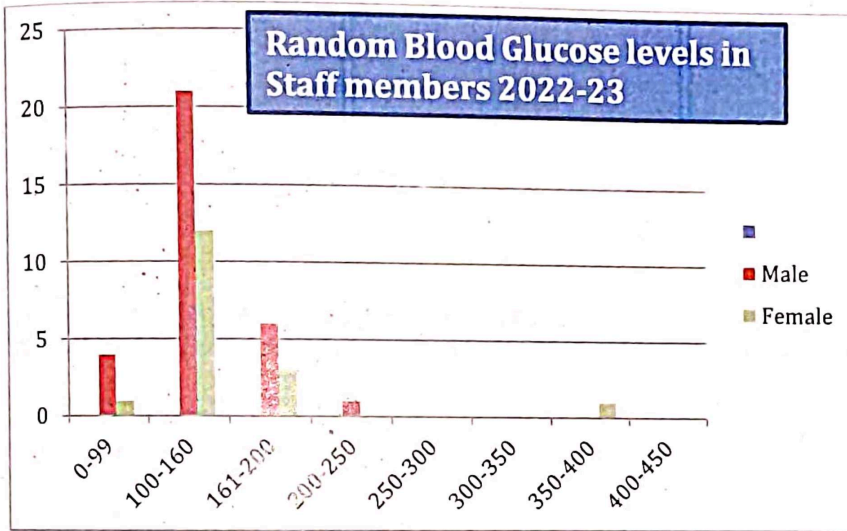


Hypertension among Staff Members		
	with HT	Without HT
Male	4	29
Female	3	23

Staff members _ Hypertension 2022-23

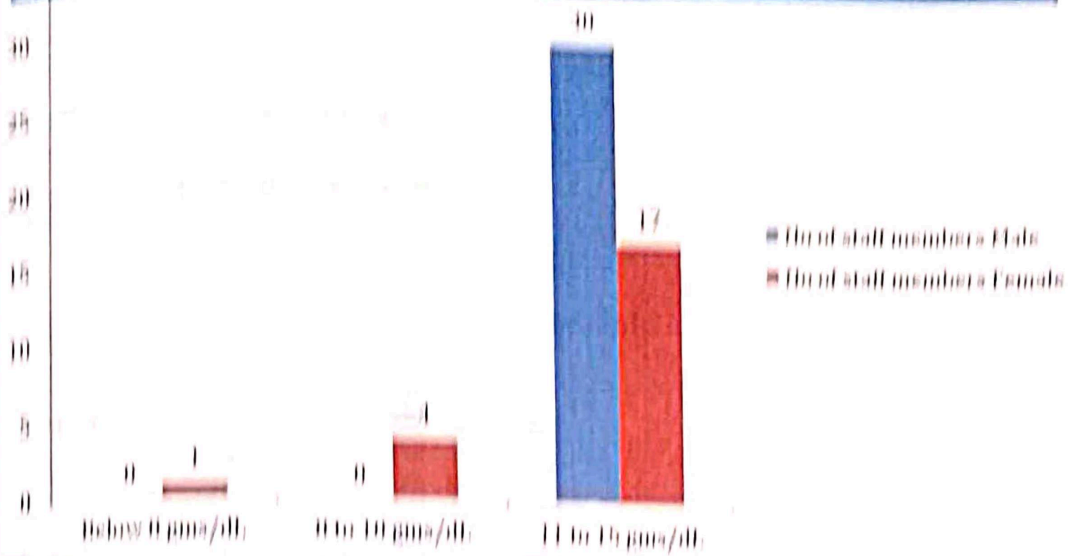


Staff members_ Diabetes mellitus		
Random Blood Glucose	Male	Female
0-99	4	1
100-160	21	12
161-200	6	3
200-250	1	0
250-300	0	0
300-350	0	0
350-400	0	1
400-450	0	0



Haemoglobin Test 2022-23		
HB Range gms/dL	No. of staff members	
	Male	Female
Below 8 gms/dL	0	1
8 to 10 gms/dL	0	4
11 to 15 gms/dL	30	17

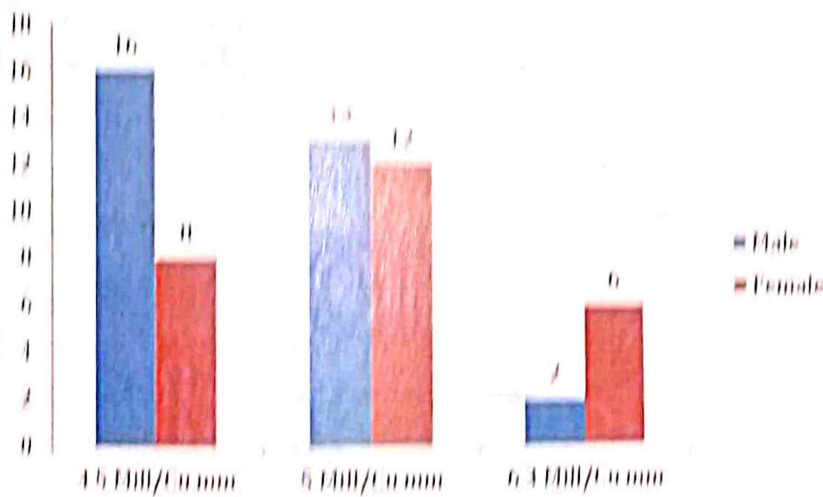
Haemoglobin levels in Staff members 2022-23



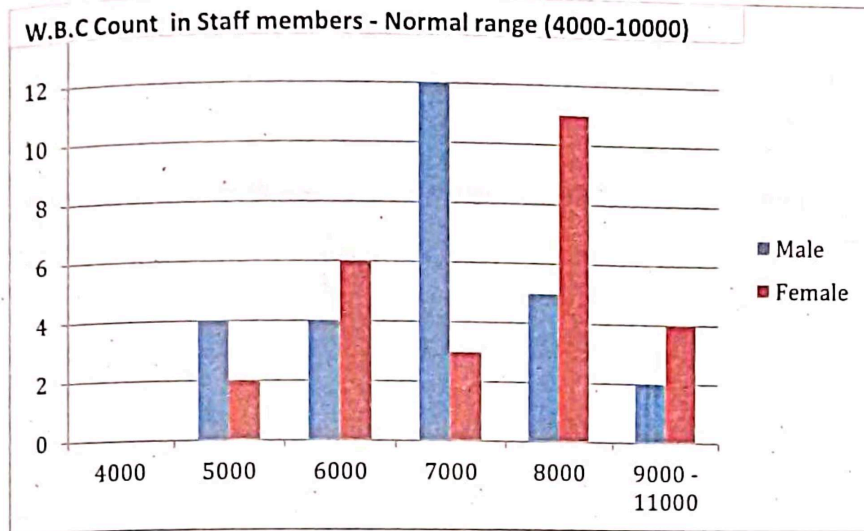
RBC Count Normal 4.5 to 5.3
Mill/Cu mm

RBC Count	Male	Female
4.5 Mill/Cu mm	16	8
5 Mill/Cu mm	13	12
5.3 Mill/Cu mm	2	6

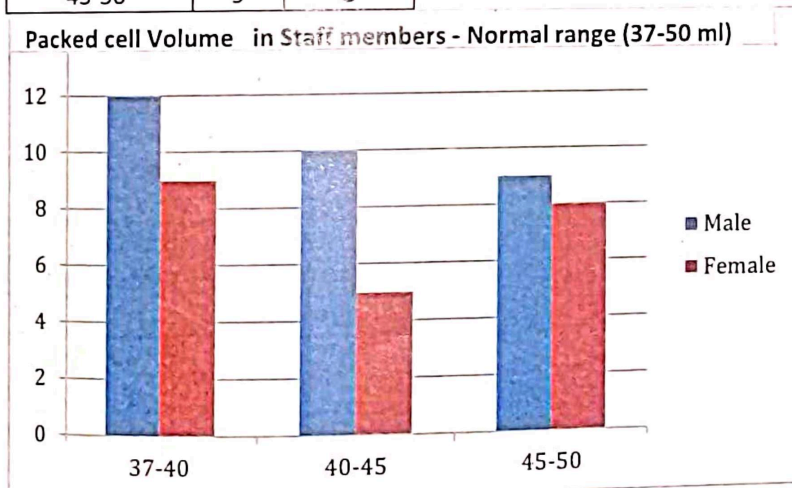
RBC Count in Staff members 2022-23



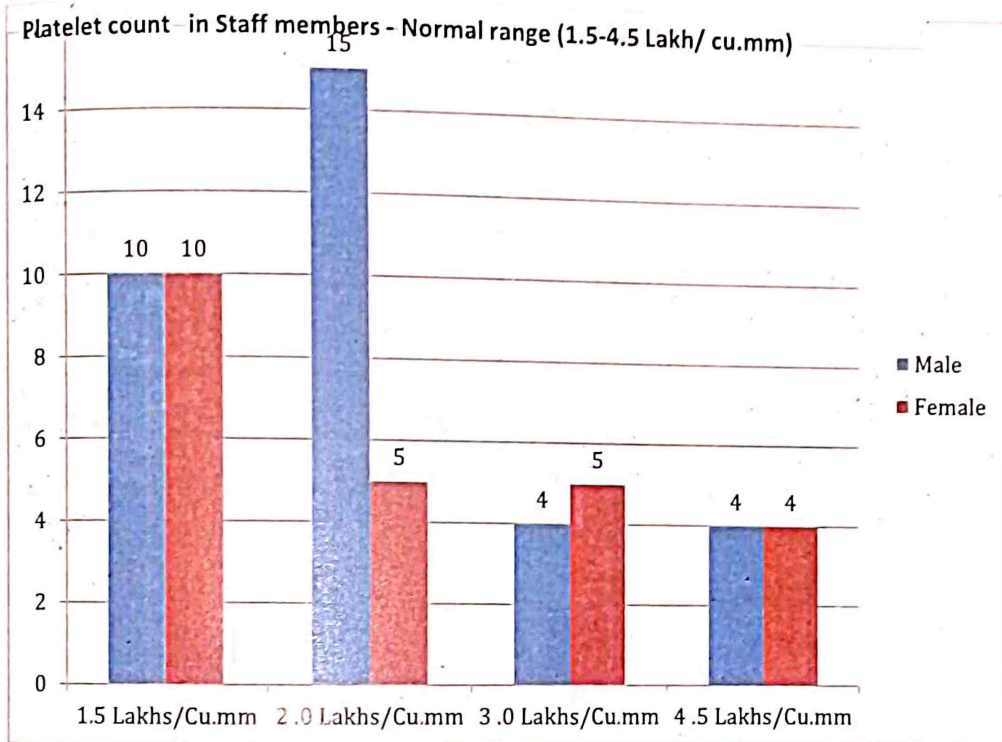
W.B.C Count (4000 10000)		
Th/Cu.mm	Male	Female
4000		
5000	4	2
6000	4	6
7000	12	3
8000	5	11
9000 -11000	2	4



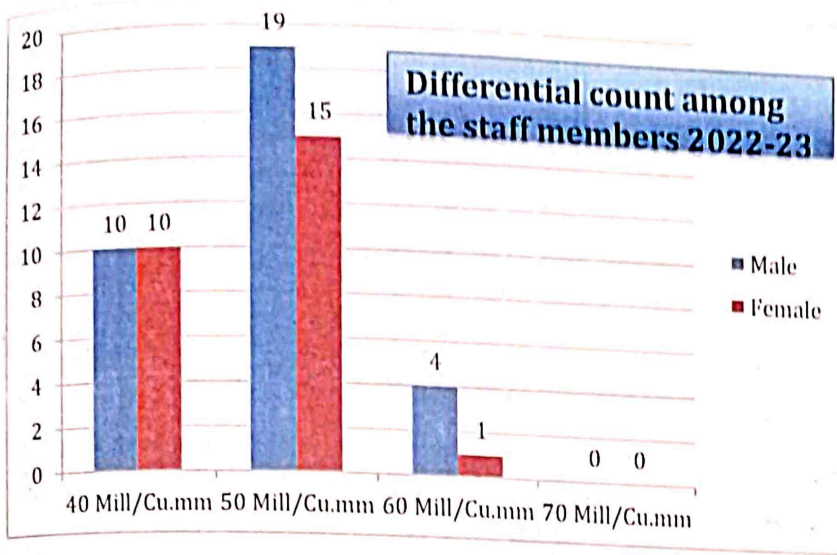
P.C.V		
P.V.C Normal (37-50)		
Percentage	Male	Female
37-40	12	9
40-45	10	5
45-50	9	8



Platelet count Normal (1.5- 4.5)		
Lakhs/Cu.mm	Male	Female
1.5 Lakhs/Cu.mm	10	10
2.0 Lakhs/Cu.mm	15	5
3.0 Lakhs/Cu.mm	4	5
4.5 Lakhs/Cu.mm	4	4

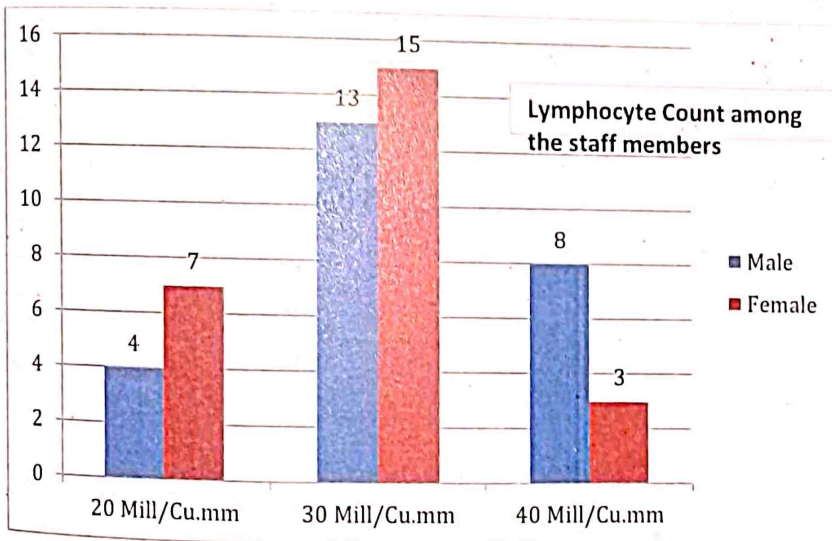


DIFFERENTIAL COUNT		
Neutrophils Normal (40-70)		
	Male	Female
40 Mill/Cu.mm	10	10
50 Mill/Cu.mm	19	15
60 Mill/Cu.mm	4	1
70 Mill/Cu.mm	0	0

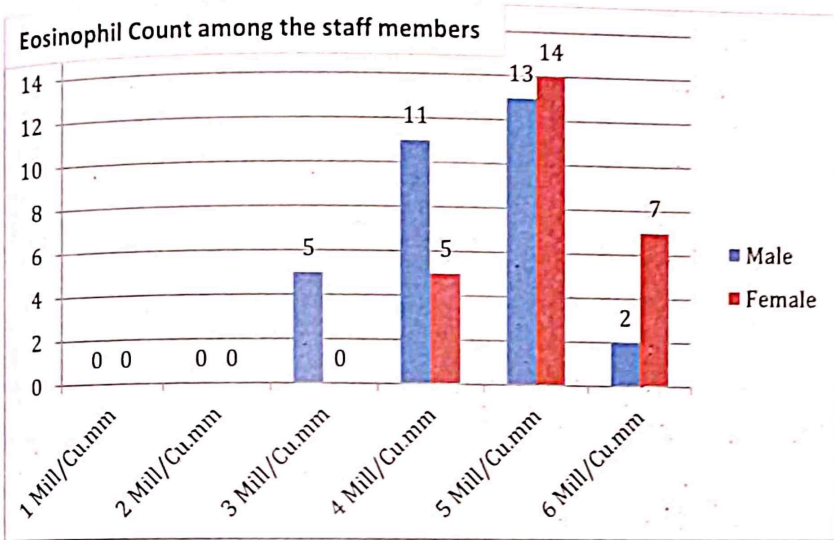


Lymphocytes Normal (20-40)

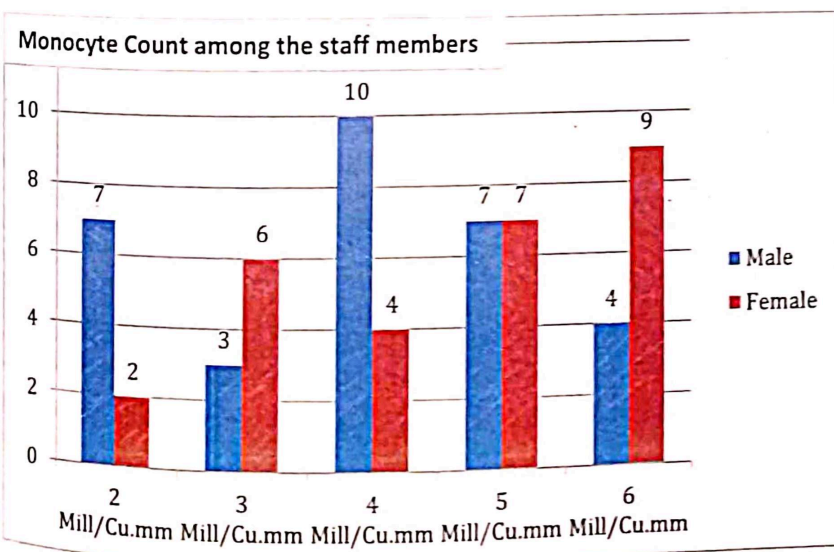
Mill/Cu.mm	Male	Female
20	4	7
30	13	15
40	8	3

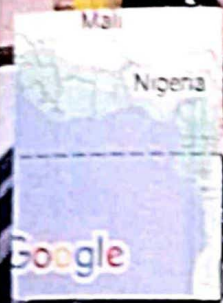
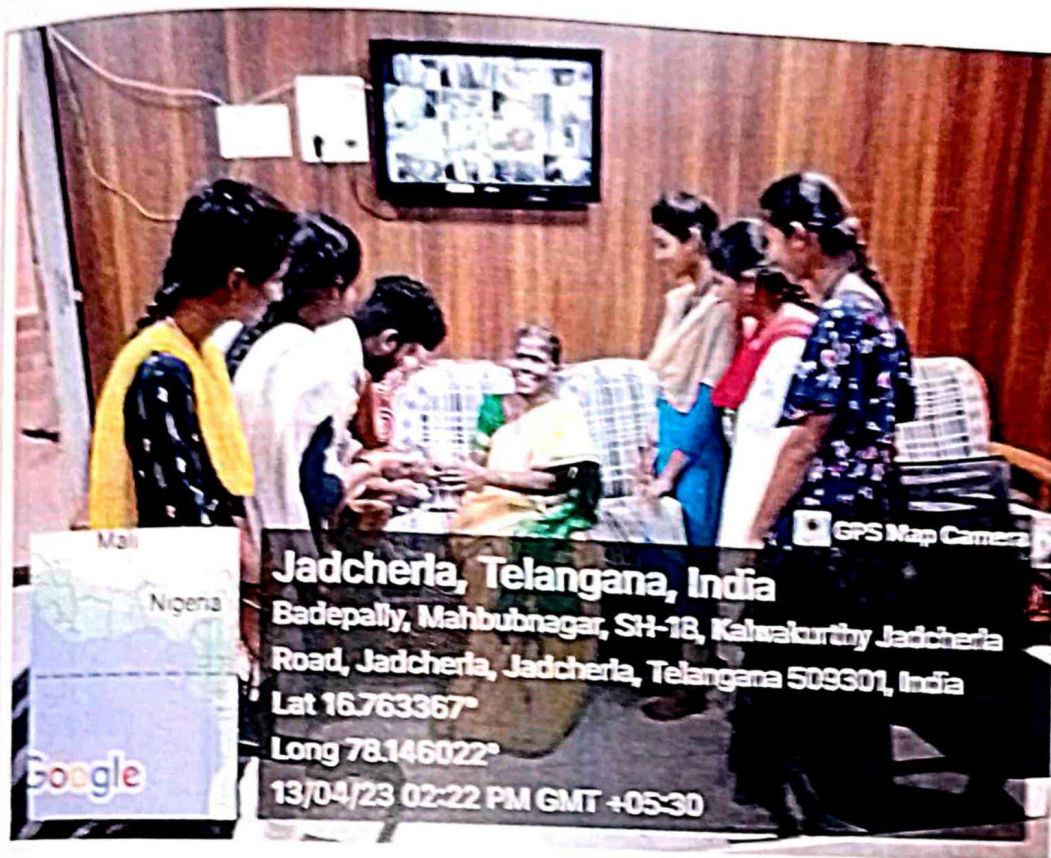


Eosinophils Normal (01-06)		
	Male	Female
1 Mill/Cu.mm	_0	0
2 Mill/Cu.mm	0	0
3 Mill/Cu.mm	5	0
4 Mill/Cu.mm	11	5
5 Mill/Cu.mm	13	14
6 Mill/Cu.mm	2	7



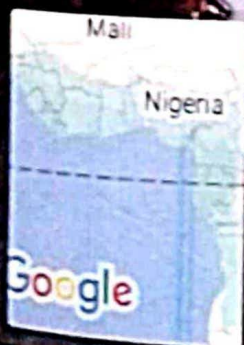
Monocytes Normal (02-06)		
	Male	Female
2 Mill/Cu.mm	7	2
3 Mill/Cu.mm	3	6
4 Mill/Cu.mm	10	4
5 Mill/Cu.mm	7	7
6 Mill/Cu.mm	4	9





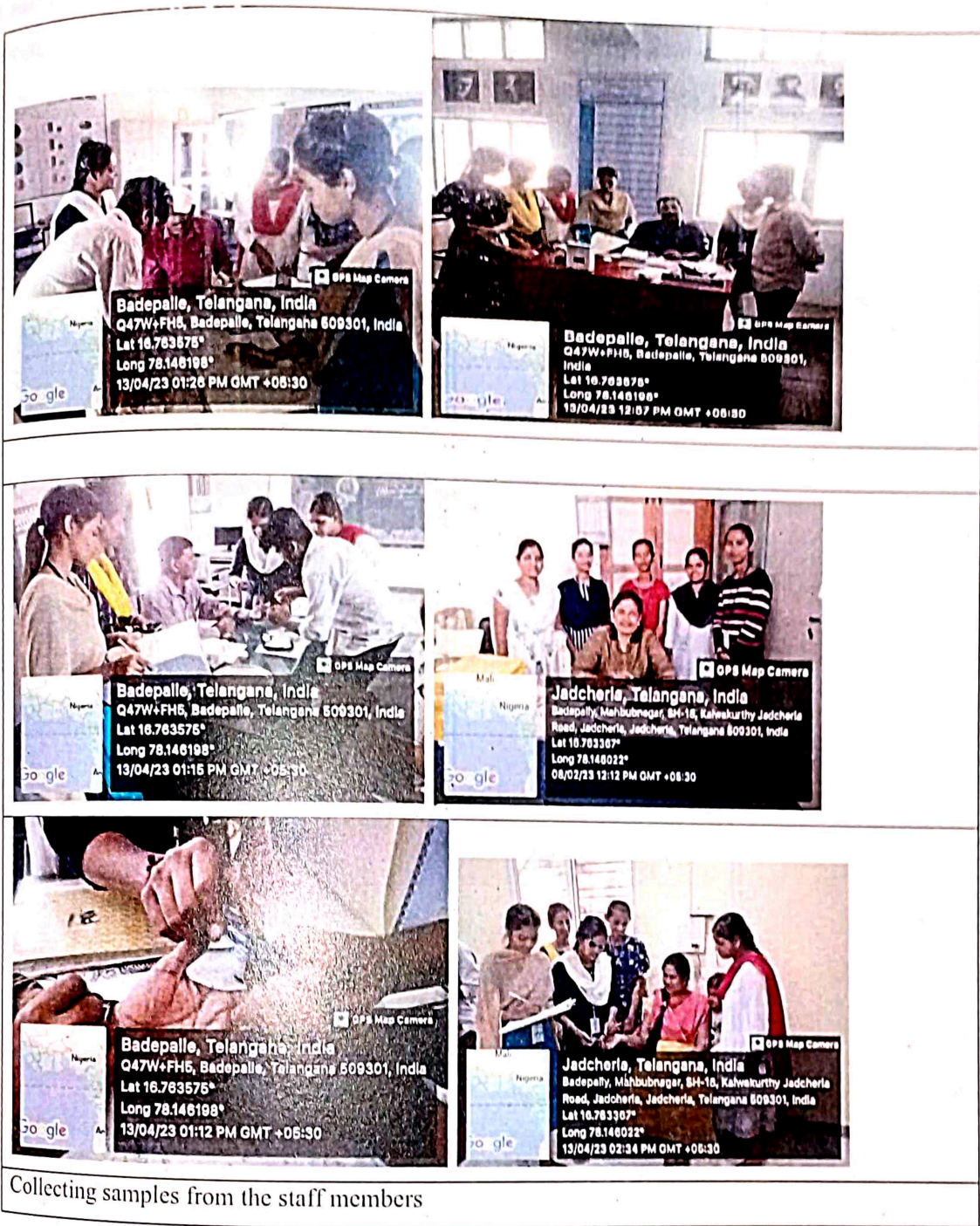
Jadcherla, Telangana, India
Badepally, Mahbubnagar, SH-18, Kalwakurthy Jadcherla
Road, Jadcherla, Jadcherla, Telangana 509301, India
Lat 16.763367°
Long 78.146022°
13/04/23 02:22 PM GMT +05:30

Collecting blood samples from Principal Madam



Jadcherla, Telangana, India
Badepally, Mahbubnagar, SH-18, Kalwakurthy Jadcherla
Road, Jadcherla, Jadcherla, Telangana 509301, India
Lat 16.763367°
Long 78.146022°
08/02/23 11:54 AM GMT +05:30

Collecting Health inputs from B.Ravinder Rao Asst.Prof.of Zoology



Collecting samples from the staff members

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Results and Discussion:

The survey reflected the opinion given by the staff members and professional health check
is conducted during the study period in the colleges by local medical officers and
clinical labs. Results indicated that in a total of 20 individuals, 11.5% suffering from
hypertension, 13.2% suffering from eye diseases, diabetes mellitus, 3.25% suffering
from diabetes mellitus, 18.5% are considered to have normal blood glucose. Among the blood
type of the staff members, the blood type B⁺ and O⁺ are dominant with
2.4% and 15.2% respectively. 2 persons (10% are male staff members) are having the
A⁺ type.

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