



33898 090325

Registration ID : 33898

Sample Collection : 09/03/2025 08:32:20

Name : MR. MAHESHWAR BONDARE

Sample Received : 09/03/2025 08:32:20

Age/Sex : 31 Yrs. / M

Printed : 12/03/2025 16:35:06

Report Released : 10/03/2025 14:38:52

Ref. By : BANK OF BARODA

Sent By : Arcofemi Healthcare Pvt Ltd

**COMPLETE BLOOD COUNT \***

Test	Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	: 15.2	g/dL	13-18 g/dL
Total RBC (Electrical Impedence)	: 4.94	10 <sup>6</sup> /μL	3.0-6.0 10 <sup>6</sup> /μL
Hematocrit (PCV) (Calculated)	: 46.5	%	36-54 %
Mean Corpuscular Volume (MCV) (calculated)	: 94.1	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	: 30.8	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated)	: 32.7	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	: 13.90	%	12-15 %
Total Leucocytes Count (Light Scattering)	: 7820	/cumm	4000-11000 /cumm
<b>Neutrophils</b> (Calculated)	: 54	%	40-75 %
<b>Eosinophils Percentage</b> (Calculated)	: 04	%	1-6 %
Lymphocyte Percentage (Calculated)	: 37	%	20-45 %
Basophils Percentage (Calculated)	: 0	%	0-1 %
Monocytes Percentage (Calculated)	: 05	%	1-10 %
RBC Morphology	: Normocytic, Normochromic		
WBC Morphology	: Normal Morphology		
Platelet Count (Electrical Impedence)	: 340000	/ul	150000-450000 /ul
Platelets on Smear	: Adequate		Adequate
E.S.R	: 02	mm at 1hr	0-20 mm at 1hr

Sample Type: EDTA whole blood (Westergren)

Sample Type : EDTA Whole Blood

Test done with THREE PART CELL COUNTER (Sysmex KX-21)

Note: Tests marked with \* are included in NABL scope.

\*All Samples Processed At Excellas Clinics Mulund Centre .

\*ESR NOT IN NABL scope.

(Collected At: 09/03/2025 08:32:20, Received At: 09/03/2025 08:32:20, Reported At: 10/03/2025 14:38:52)



*Dr. Santosh Khairnar*  
**Dr. Santosh Khairnar**  
 M.D. (Pathologist)  
 Reg. No.-  
 2000/08/2926





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----- End Of Report -----



NABL M(ELT)-00683

*Dr. Santosh Khairnar*  
**Dr. Santosh Khairnar**  
M.D. (Pathologist)  
Reg. No.-  
2000/08/2926





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Age/Sex : 31 Yrs. / M	Printed : 12/03/2025 16:35:06
Ref. By : BANK OF BARODA	Report Released : 10/03/2025 14:38:56
Sent By : Arcofemi Healthcare Pvt Ltd	

### HbA1c (Whole Blood)

Test	Result	Unit	Reference Range
HbA1c-Glycosylated Haemoglobin	: 6.50	%	Non-diabetic: 4-6 Excellent Control: 6-7 Fair to good control: 7-8 Unsatisfactory control: 8-10 Poor Control: >10

EDTA Whole Blood, Method: HPLC

Estimated Average Glucose (eAG)	: 139.85	mg/dl	65.1-136.3 mg/dL mg/dl
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EDTA Whole Blood, Method: Calculated

**Interpretation:**

- 1.The term HbA1c refers to Glycated Haemoglobin. Measuring HbA1c gives an overall picture of what the average blood sugar levels have been over a period of weeks/month. Higher the HbA1c, the greater the risk of developing diabetes-related complications.
- 2.HbA1c has been endorsed by clinical groups and ADA (American Diabetes Association) guidelines 2012, for the diagnosis of diabetes using a cut-off point of 6.5%. ADA defined biological reference range for HbA1c is between 4-6%. Patients with HbA1c value between 6.0-6.5% are considered at risk for developing diabetes in the future. Trends in HbA1c area a better indicator of glucose control than standalone test.
- 3.To estimate the eAG from the HbA1c value, the following equation is used:  $eAG(mg/dl) = 28.7 * A1c - 46.7$ .
- 4.Diabetic must aspire to keep values under 7% to avoid the various complications resulting from diabetes.

\*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

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### Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

Test	Result	Unit	Biological Ref. Range
GLUCOSE (SUGAR) FASTING, (Fluoride Plasma Used)	: 133	mg/dL	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: $\geq$ 126 mg/dl
GLUCOSE (SUGAR) PP, ( Fluoride Plasma Used )	: 175	mg/dl	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: $\geq$ 200 mg/dl

Method: GOD-POD

Test Done on - Automated Biochemistry Analyzer (EM 200)

\*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 09/03/2025 08:32:20, Received At: 09/03/2025 08:32:20, Reported At: 10/03/2025 14:37:54)



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**BLOOD GROUP**


Test	Result	Unit	Biological Ref. Range
Blood Group	: 'B' Rh POSITIVE		

Slide and Tube Agglutination Test

(Collected At: 09/03/2025 08:32:20, Received At: 09/03/2025 08:32:20, Reported At: 10/03/2025 14:37:42)

----- End Of Report -----



  
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Ref. By : BANK OF BARODA

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**LIPID PROFILE**

Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: 179	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
<i>Serum, Method: CHOD-PAP</i>			
S. Triglyceride	: 144	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
<i>Serum, Method: GPO-Trinder</i>			
HDL Cholesterol	: 37	mg/dl	35.3-79.5 mg/dl
<i>serum,Direct method</i>			
LDL Cholesterol	: 113.20	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
<i>Serum, (Calculated)</i>			
VLDL Cholesterol	: 28.8	mg/dl	5-30 mg/dl
<i>Serum, Method: Calculated</i>			
LDL/HDL Ratio	: 3.1		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
<i>Serum, Method: Calculated</i>			
TC/HDL Ratio	: 4.8		Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0
<i>Serum, Method: Calculated</i>			

*Test Done on - Automated Biochemistry Analyzer (EM 200).*
**Interpretation**

1. Triglycerides: When triglycerides are very high greater than 1000 mg/dL, there is a risk of developing pancreatitis in children and adults. Triglycerides change dramatically in response to meals, increasing as much as 5 to 10 times higher than fasting levels just a few hours after eating. Even fasting levels vary considerably day to day. Therefore, modest changes in fasting triglycerides measured on different days are not considered to be abnormal.

2. HDL-Cholesterol: HDL- C is considered to be beneficial, the so-called "good" cholesterol, because it removes excess cholesterol from tissues and carries it to the liver for disposal.

3. LDL-Cholesterol: Desired goals for LDL-C levels change based on individual risk factors.

*\*All Samples Processed At Excellas Clinics Mulund Centre*

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Ref. By : BANK OF BARODA

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**LIVER FUNCTION TEST**

Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total) <i>Serum, Method: Diazo (walter &amp; Gerarde)</i>	: 0.65	mg/dl	0-2.0 mg/dl
S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter &amp; Gerarde)</i>	: 0.27	mg/dl	0-0.4 mg/dl
S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i>	: 0.38	mg/dl	0.10-1.0 mg/dl
Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i>	: <b>37</b>	IU/L	0-35 IU/L
Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i>	: <b>70</b>	IU/L	0-45 IU/L
S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i>	: 79	IU/L	53-128 IU/L
Total Proteins <i>Serum, Method: Biuret</i>	: 8.0	gm/dl	6.4-8.3 gm/dl
S. Albumin <i>Serum, Method: BCG</i>	: 4.6	gm/dl	3.5-5.2 gm/dl
S. Globulin <i>Serum, Method: Calculated</i>	: 3.4	gm/dl	2.3-3.5 gm/dl
A/G Ratio <i>Serum, Method: Calculated</i>	: 1.35		0.90-2.00
Gamma GT <i>Serum, Method: G glutamyl carboxy nitroanilide</i> <i>Test Done on - Automated Biochemistry Analyzer (EM 200).</i>	: <b>117</b>	U/L	0-55 U/L

\*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 09/03/2025 08:32:20, Received At: 09/03/2025 08:32:20, Reported At: 10/03/2025 14:39:21)

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*Dr. Santosh Khairnar*  
**Dr. Santosh Khairnar**  
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Ref. By : BANK OF BARODA

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**BLOOD UREA NITROGEN (BUN)**

Test	Result	Unit	Biological Ref. Range
Urea	: 26.53	mg/dl	19-45 mg/dl

*Serum, Method: Urease - GLDH*

Blood Urea Nitrogen : 12.40 mg/dl 5-18 mg/dl

*Test Done on - Automated Biochemistry Analyzer (EM 200)**\*All Samples Processed At Excellas Clinics Mulund Centre**(Collected At: 09/03/2025 08:32:20, Received At: 09/03/2025 08:32:20, Reported At: 10/03/2025 14:38:35)***SERUM CREATININE**

Test	Result	Unit	Biological Ref. Range
S. Creatinine	: 0.68	mg/dl	0.7-1.3 mg/dl

*Serum, Method: Enzymatic**Test Done on - Automated Biochemistry Analyzer (EM 200).**\*All Samples Processed At Excellas Clinics Mulund Centre**(Collected At: 09/03/2025 08:32:20, Received At: 09/03/2025 08:32:20, Reported At: 10/03/2025 14:38:39)***SERUM URIC ACID**

Test	Result	Unit	Biological Ref. Range
S. Uric Acid	: 5.10	mg/dl	3.5-7.2 mg/dl

*Serum, Method: Uricase - POD**Test Done on - Automated Biochemistry Analyzer (EM 200).**(Collected At: 09/03/2025 08:32:20, Received At: 09/03/2025 08:32:20, Reported At: 10/03/2025 14:38:21)*

*Dr. Santosh Khairnar*  
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Ref. By : BANK OF BARODA

Sent By : Arcofemi Healthcare Pvt Ltd

**BUN CREAT RATIO (BCR)**

Test	Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	: 18.24		5-20

Serum, Method: Calculated


**NOTE:**

A blood urea nitrogen (BUN)/creatinine ratio (BCR) >20 is used to distinguish pre-renal azotemia (PRA) and acute tubular necrosis (ATN)

(Collected At: 09/03/2025 08:32:20, Received At: 09/03/2025 08:32:20, Reported At: 10/03/2025 14:38:44)

----- End Of Report -----



  
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2000/08/2926





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Ref. By : BANK OF BARODA

Sent By : Arcofemi Healthcare Pvt Ltd

**THYROID FUNCTION TEST**

Test	Result	Unit	Biological Ref. Range
Total T3	: 1.4	ng/dl	0.70-2.04 ng/dl
<i>Serum, Method: CLIA</i>			
Total T4	: 8.80	µg/dl	5.1-14.1 µg/dl
<i>Serum, Method: CLIA</i>			
TSH (Thyroid Stimulating Hormone)	: 2.54	µIU/ml	0.27-5.3 µIU/ml
<i>Serum, Method: CLIA</i>			


Interpretation Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, sub-clinical hyperthyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis ,estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age ,marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism.

\*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 09/03/2025 08:32:20, Received At: 09/03/2025 08:32:20, Reported At: 10/03/2025 14:38:06)

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**Dr. Santosh Khairnar**  
M.D. (Pathologist)  
Reg. No.-  
2000/08/2926





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Report Released : 10/03/2025 15:25:04

Ref. By : BANK OF BARODA

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**EXAMINATION OF URINE**

Test	Result	Unit	Biological Ref. Range
<b><u>PHYSICAL EXAMINATION</u></b>			
Quantity :	25	ml	
Colour :	Pale yellow		
Appearance :	Clear		
Reaction (pH) :	6.0		4.5 - 8.0
Specific Gravity :	1.020		1.010 - 1.030
<b><u>CHEMICAL EXAMINATION</u></b>			
Protein :	Absent		Absent
Glucose :	Absent		Absent
Ketones Bodies :	Absent		Absent
Occult Blood :	Absent		Absent
Bilirubin :	Absent		Absent
Urobilinogen :	Absent		Normal
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Epithelial Cells :	0 - 1	/ hpf	
Pus cells :	0 - 1	/ hpf	
Red Blood Cells :	Absent	/ hpf	
Casts :	Absent	/ lpf	Absent / lpf
Crystals :	Absent		Absent
<b><u>OTHER FINDINGS</u></b>			
Yeast Cells :	Absent		Absent
Bacteria :	Absent		Absent
Mucus Threads :	Absent		
Spermatozoa :	Absent		
Deposit :	Absent		Absent
Amorphous Deposits :	Absent		Absent

sample type:Urine

Method:Visual and Microscopic

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NABL MELT-00683





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### X RAY CHEST PA VIEW

Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

Bony thorax appears normal.

Soft tissues appear normal.

### IMPRESSION:

**No significant abnormality detected.**

(Collected At: 09/03/2025 08:32:20, Received At: 09/03/2025 08:32:20, Reported At: 12/03/2025 15:48:07)

----- End Of Report -----



**Dr. Reshma Gokran** **Dr. Santosh Khairnar**  
MD (Radiologist) M.D. (Pathologist)  
Reg. No- Reg. No.-  
2009/09/3296 2000/08/2926





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**USG ABDOMEN & PELVIS - MALE**

**Liver:-** is normal in size and shows normal parenchymal echogenicity. No focal or diffuse lesion is seen. The portal and hepatic veins are normal. No IHBR dilatation seen.

**Gall Bladder:-** is well distended. No calculus or mass lesion is seen.  
No GB wall thickening or pericholecystic fluid is seen.

**CBD :-** is normal.

**Pancreas:-** is normal in size and reflectivity. No focal lesion seen.

**Spleen:-** is normal in size (10.1 cms) and reflectivity. No focal lesion is seen.

**Kidneys:-** Both Kidneys are normal in size, shape, position. They show normal reflectivity. CMD is maintained. No hydronephrosis seen on either side.

Right kidney – 9.9 x 4.6 cms **and shows a calculus measuring 2.7 mm in middle calyx.**

Left kidney – 9.6 x 4.4 cms

**Urinary Bladder:-** is well distended and shows normal wall thickness.  
No intraluminal lesion seen.

**Prostate:-** is normal in size, reflectivity and measures 2.3 x 2.4 x 2.4 cms  
(Volume – 7.3 cc). No focal lesions.

No ascites is seen. No significant lymphadenopathy is seen.

**IMPRESSION:**

- **Right renal calculus.**

*Thanks for the Referral*

(Collected At: 09/03/2025 08:32:20, Received At: 09/03/2025 08:32:20, Reported At: 12/03/2025 15:54:53)

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**Dr. Reshma Gokran**  
MD (Radiologist)  
Reg. No-  
2009/09/3296







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**OPHTHALMIC EVALUATION**

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<b>Examination</b>	<b>Right Eye</b>	<b>Left Eye</b>
Distance Vision	6/6	6/6
Near Vision	N/6	N/6
Color Vision	Normal	
Remarks	Normal	

(Collected At: 09/03/2025 08:32:20, Received At: 09/03/2025 08:32:20, Reported At: 12/03/2025 15:13:20)

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## MEDICAL EXAMINATION REPORT

Name <input checked="" type="checkbox"/> Mr./ Mrs./ Miss	maheshwar	
Sex	<input checked="" type="checkbox"/> Male / Female	
Age (yrs.)	31	UHID :
Date	09 / 03 / 20 25	Bill No :
Marital Status	<input checked="" type="checkbox"/> Single / Married / Widow / Widower : No. of Children :	
Present Complaints	No H/O tonsillitis last week No fresh complaint	
Past Medical History :	- No	
Surgical History :	- No	
Personal History	Diet : Veg <input checked="" type="checkbox"/> / Mixed <input type="checkbox"/> : Addiction : Smoking <input type="checkbox"/> / Tobacco Chewing <input type="checkbox"/> / Alcohol <input type="checkbox"/> : Any Other : <span style="margin-left: 150px;">↓</span> <span style="margin-left: 150px;">No</span>	
Family History	Father = HT / DM / IHD / Stroke / Any Other } No Mother = HT / DM / IHD / Stroke / Any Other } Siblings = HT / DM / IHD / Stroke / Any Other → No	
History of Allergies	Drug Allergy } No Any Other }	
History of Medication	For HT / DM / HD / Hypothyroidism } No Any Other }	
On Examination (O/E)	G. E. : NAD R. S. : clear C. V. S. : S1S2 ⊕. No murmur C. N. S. : conscious, Alert P/A : soft LNT Any Other Positive Findings : NAD	

Height	175 / cms	Weight	75.9	Kgs	BMI	26
Pulse (per min.)	72 (min)	Blood Pressure (mm of Hg)	130/80			
<b>Gynaecology</b>						
Examined by	Dr.					
Complaint & Duration						
Other Symptoms (Mict, bowels etc)						
Menstrual History	Menarche _____ Cycle _____ Loss _____ Pain _____ I.M.B. _____ P.C.B. _____ L.M.P. _____ Vaginal Discharge _____ Cx. Smear _____ Contraception _____					
Obstetric History						
Examination :						
Breast						
Abdomen						
P.S.						
P.V.						
Gynaecology Impression & Recommendation						
Recommendation						
Physician Impression	<b>EXCELLAS CLINICS PVT. LTD</b> B-1, Vikas Paradise Commercial, Below Axis Bank, LBS Marg, Near Santoshi Mata Mandir, Mulund (West), Mumbai - 400080.					
Examined By :	- Overweight = To Reduce Weight - Underweight = To Increase Weight					

Ref.By : BOJ

Medication : NIL

Objective :

Protocol : BRUCE

History : NIL

Stage	Time	Phase	Speed	Grade	ME.Ts	H.R.	E.P.	R.P.P.	PVC	Comments
	(Min:Sec)	(Min:Sec)	(mph)	(%)		(bpm)	(mmHg)	x100		
Supine					1.0	73	100/60	73	-	
Standing					1.0	74	100/60	74	-	
HV					1.0	79	100/60	79	-	
ExStart					1.0	78	100/60	78	-	
Stage 1	3:00	3:01	1.7	10.0	4.7	101	110/70	111	-	
Stage 2	3:00	6:01	2.5	12.0	7.1	114	120/80	136	-	
Stage 3	3:00	9:01	3.4	14.0	10.2	147	130/80	191	-	
PeakEx	0:21	9:22	4.2	16.0	10.6	162	140/90	226	-	
Recovery	1:00		0.0	0.0	4.3	130	140/90	182	-	
Recovery	2:00		0.0	0.0	1.0	100	130/90	130	-	
Recovery	3:00		0.0	0.0	1.0	96	130/90	124	-	
Recovery	3:04		0.0	0.0	1.0	94	130/90	122	-	

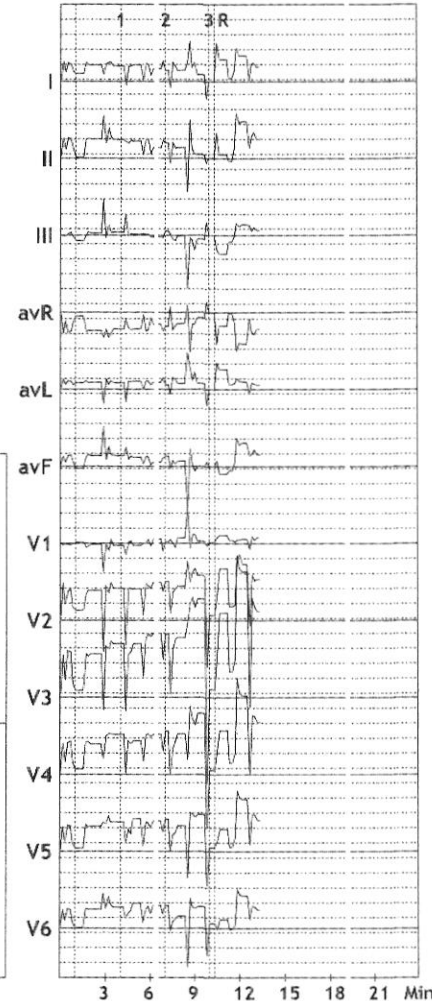
Findings :

Exercise Time : 9:22 minutes  
 Max HR attained : 162 bpm - 86% of Max Predictable HR 189  
 Max BP : 140/90(mmHg)  
 WorkLoad attained : 10.6 (Good Effort Tolerance )  
 No significant ST segment changes noted during exercise or recovery.  
 No Angina/Arrhythmia/S3/murmur  
 Final Impression : Test is negative for inducible ischaemia.  
 Maximum Depression: 8:53

*Maw*

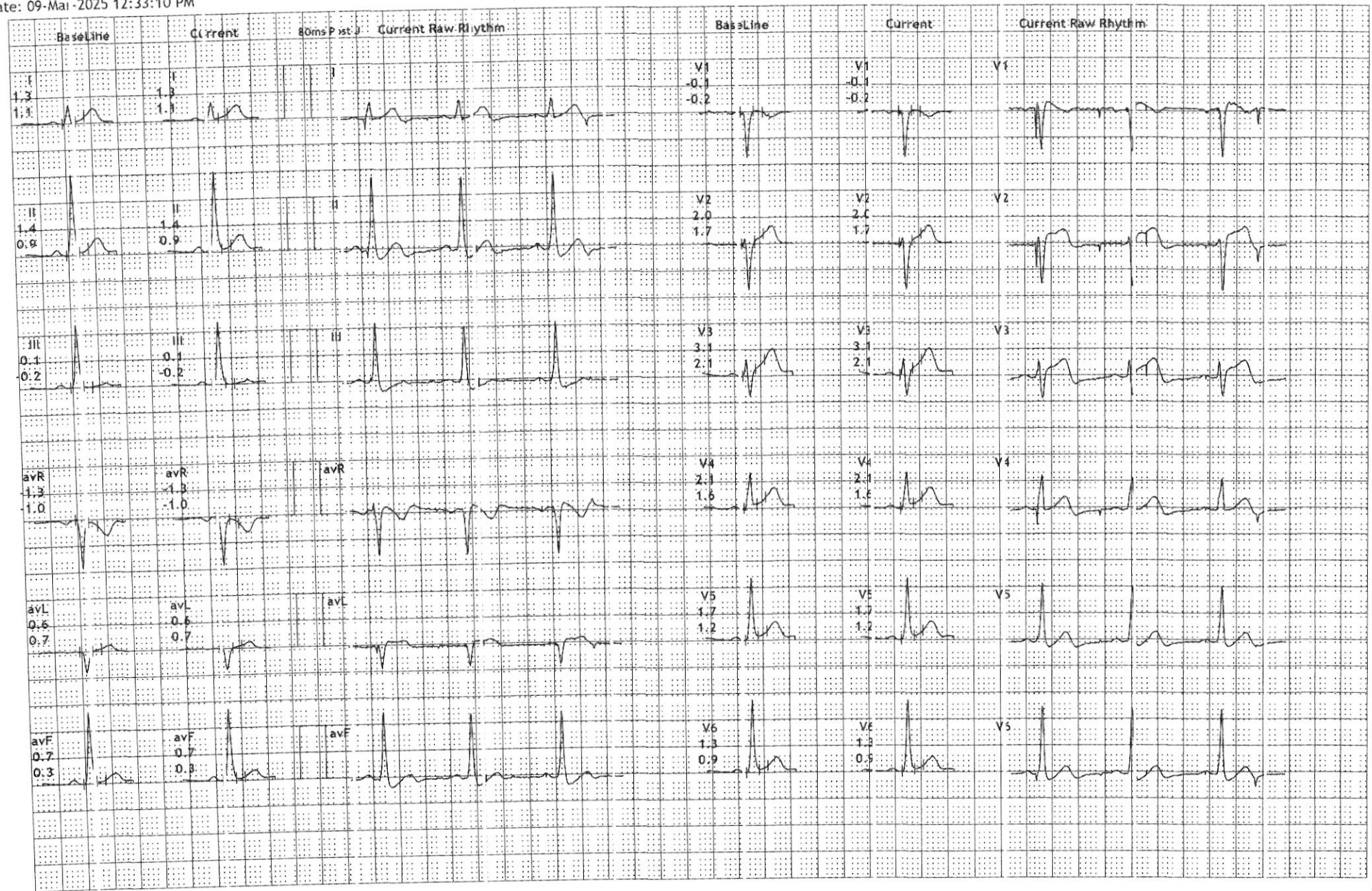
DR. MANSI SOLANKI  
 MBBS MD GENERAL MEDICINE  
 REG. NO. MMC 2024042065

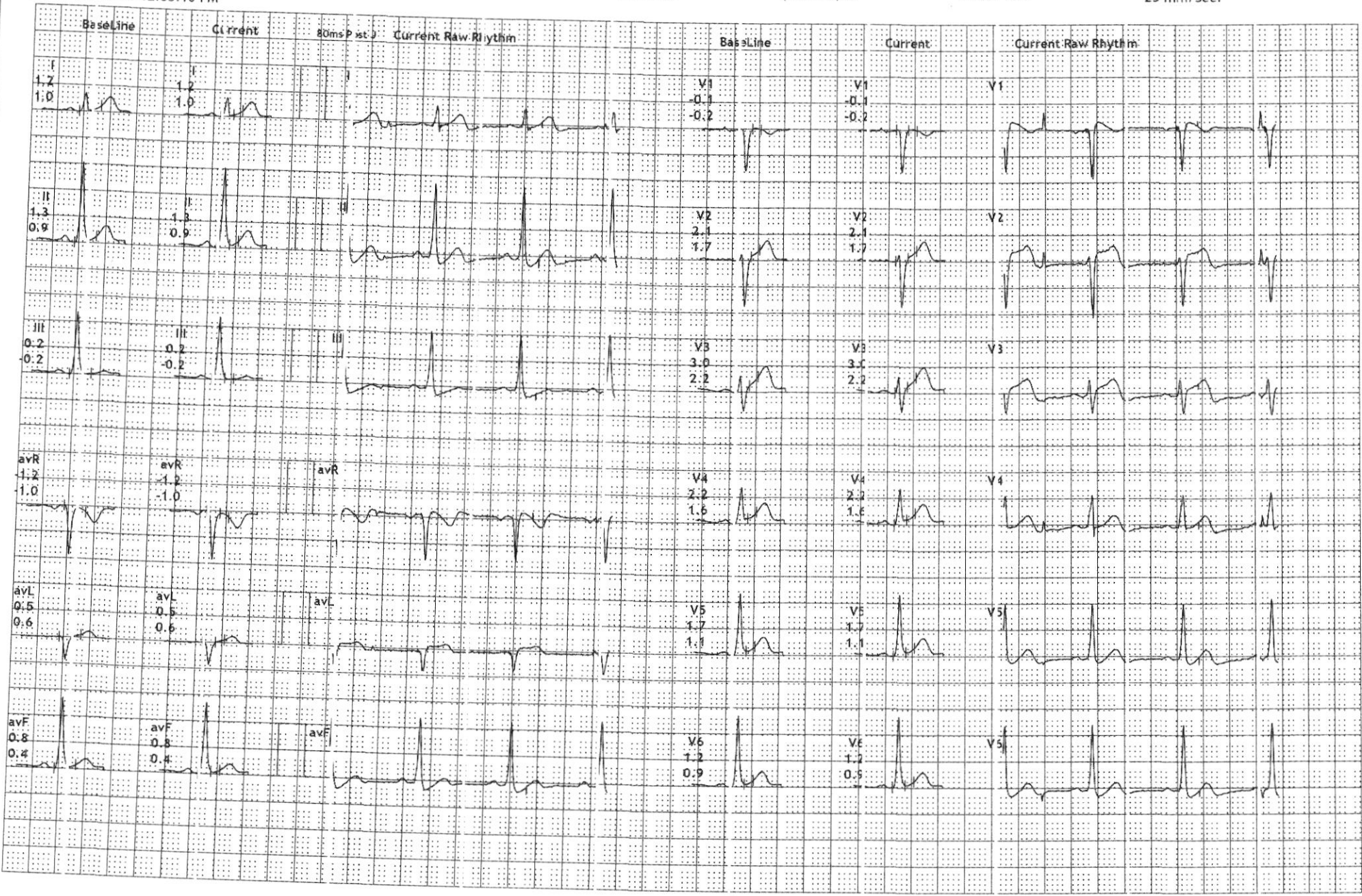
STL



Advice/Comments:

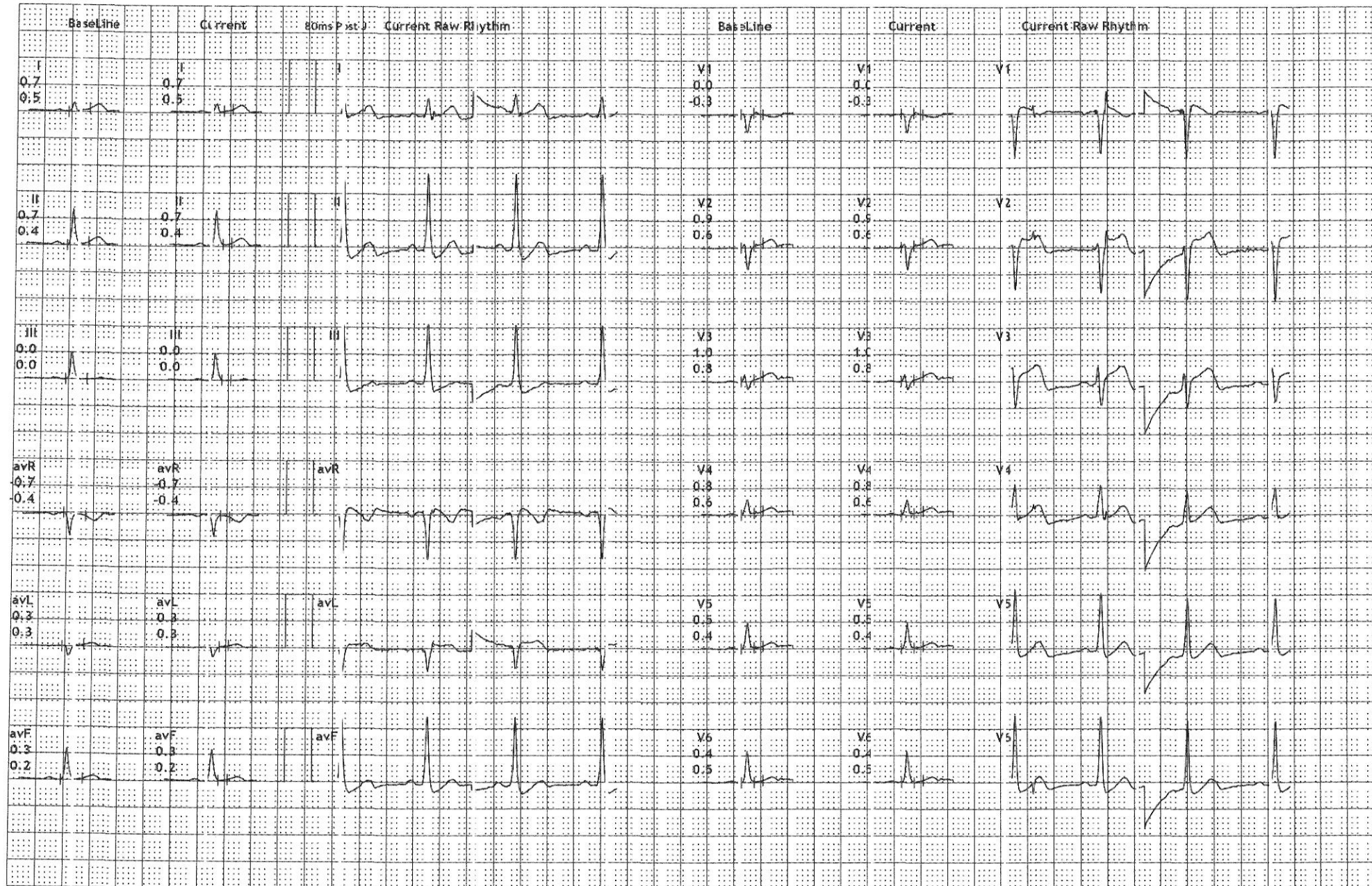




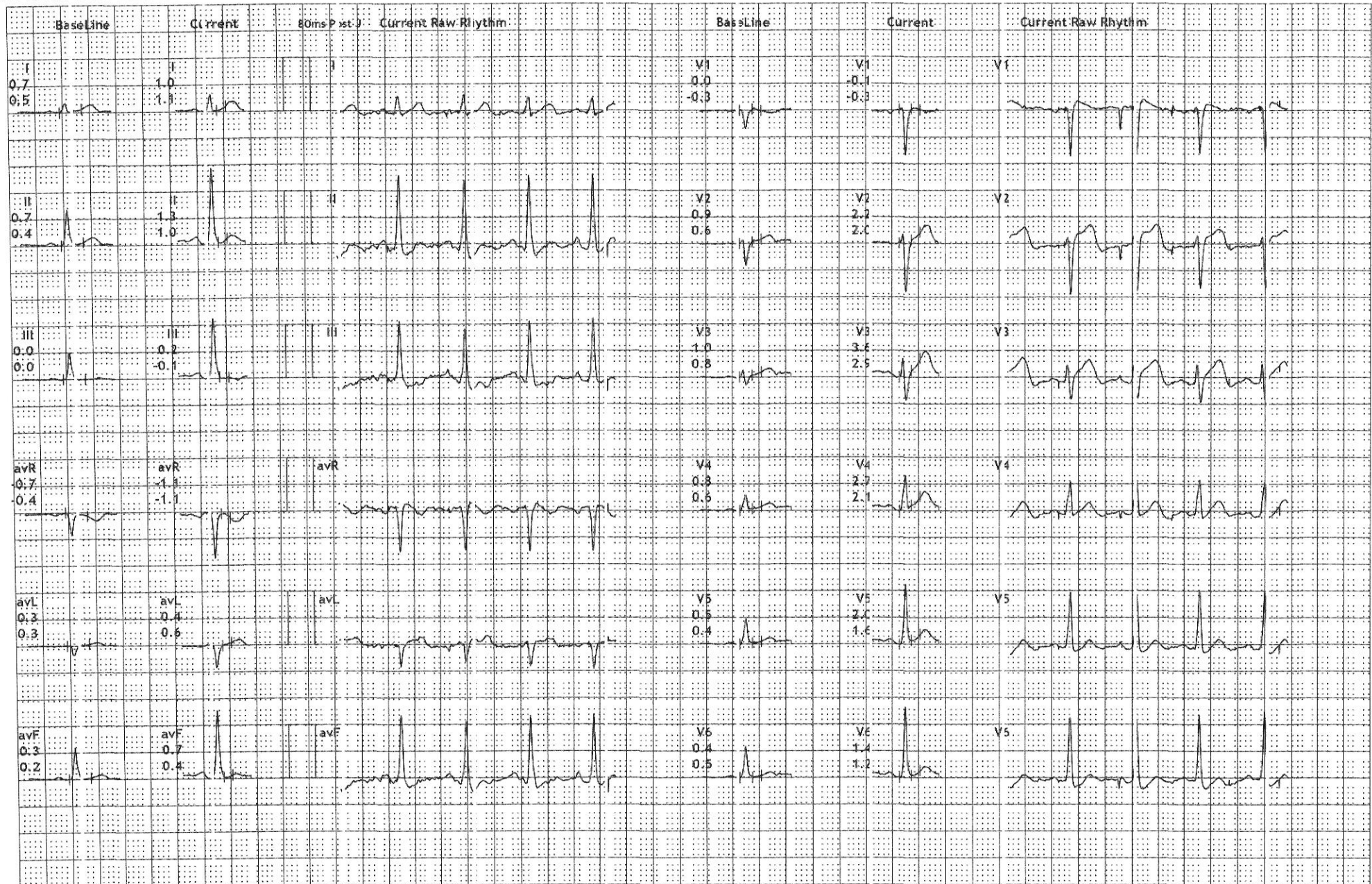


















Excellas Clinics Pvt Ltd

B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai  
760/MAHESHWAR BONDARE

31 Yrs/Male  
76 Kg/175 Cms

Date: 09-Mar-2025 12:33:10 PM

HR: 162 bpm  
METS: 10.5  
BP: 140/90

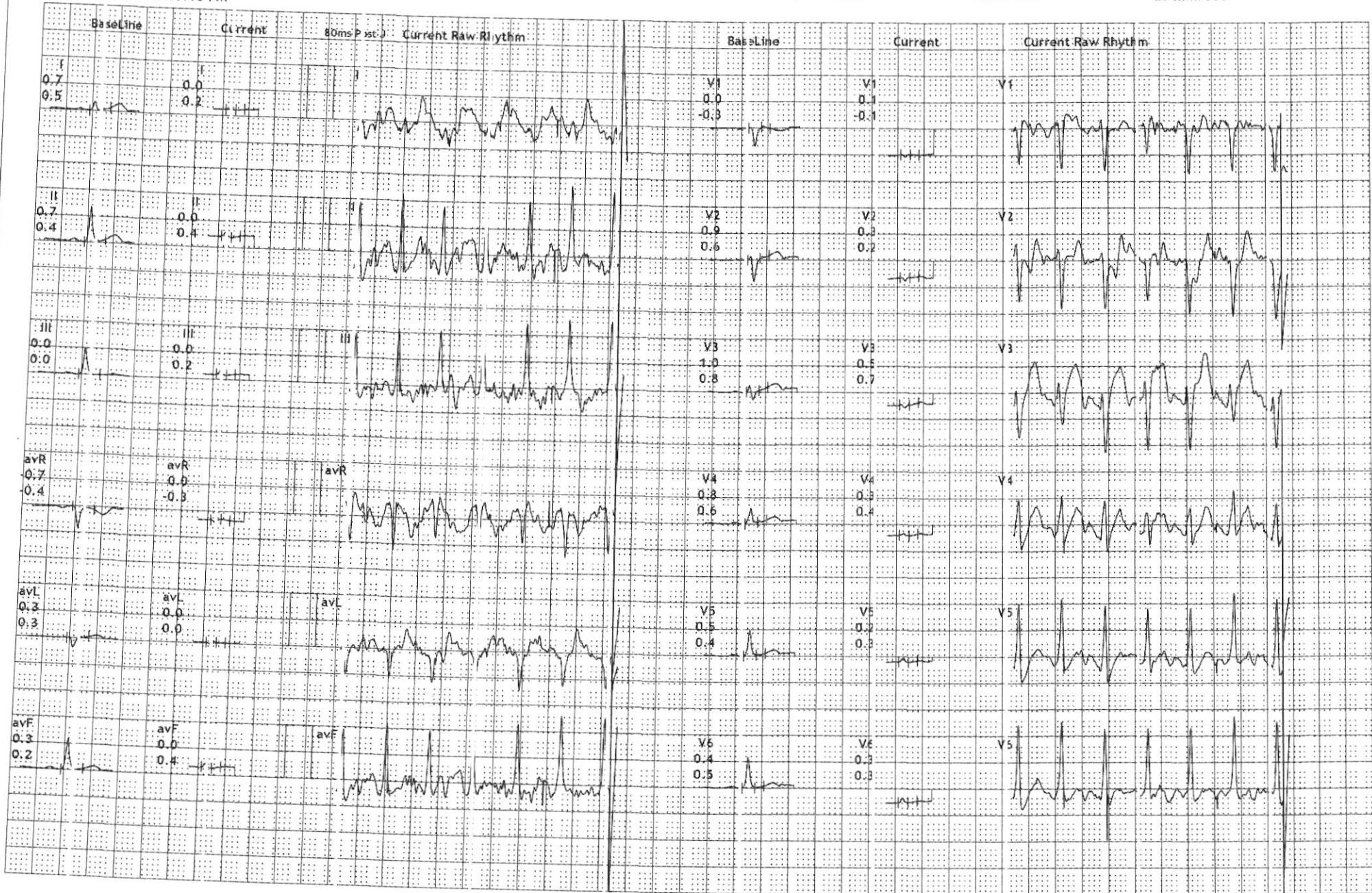
M%HR: 85% of 189  
Speed: 4.2 mph  
Grade: 16.0%

12 Lead + Comparison

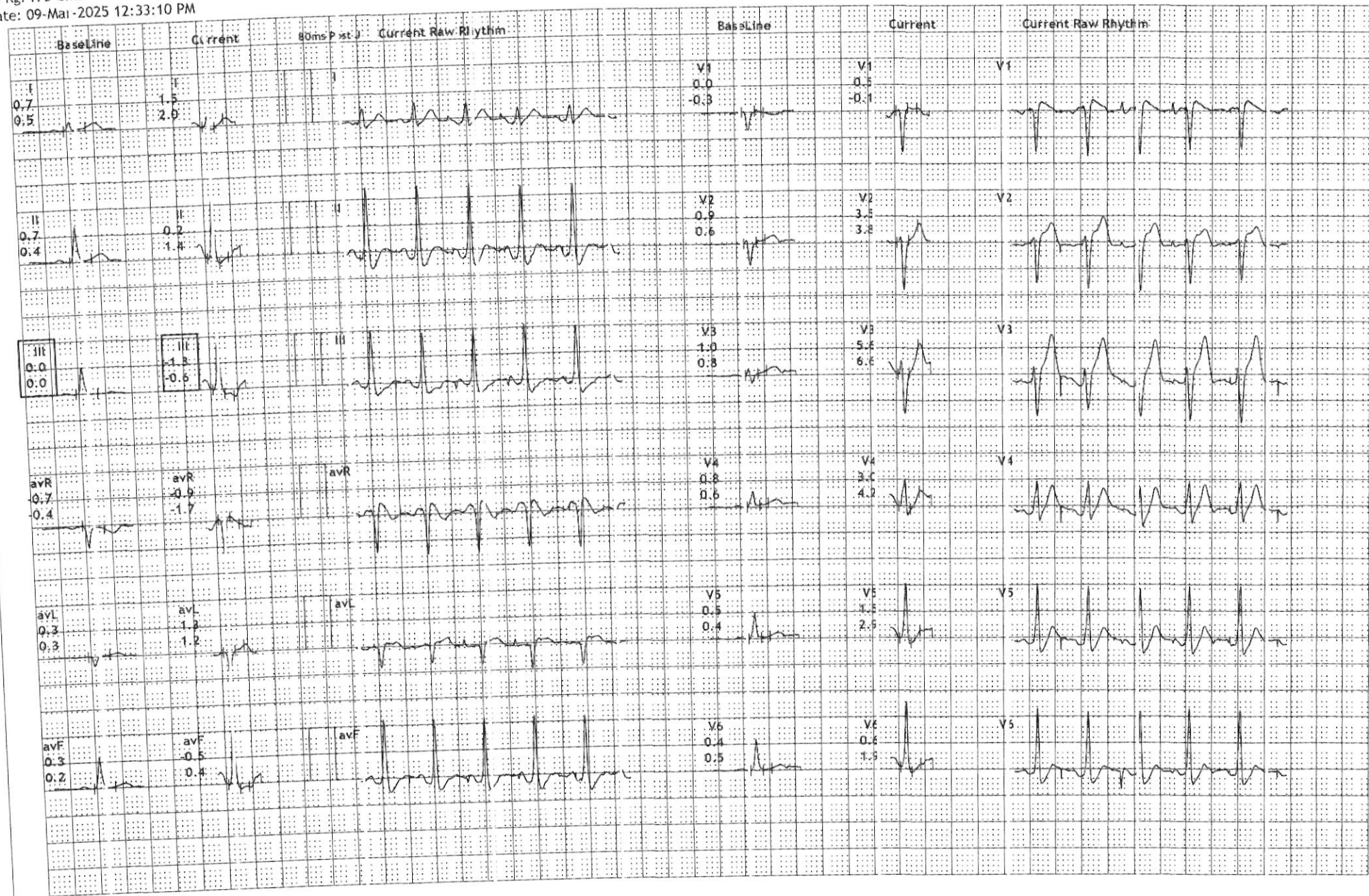
Raw ECG  
BRUCE  
(1.0-100)Hz

Ex Time 09:21  
BLC :On  
Notch :On

PeakEx  
10.0 mm/mV  
25 mm/Sec.







B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai

760/MAHESHWAR BONDARE

31 Yrs/Male

76 Kg/175 Cms

Date: 09-Mar-2025 12:33:10 PM

HR: 100 bpm

METS: 1.0

BP: 130/90

M:HR:52% of 189

Speed: 0.0 mph

G:grade: 0.0%

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 09:21

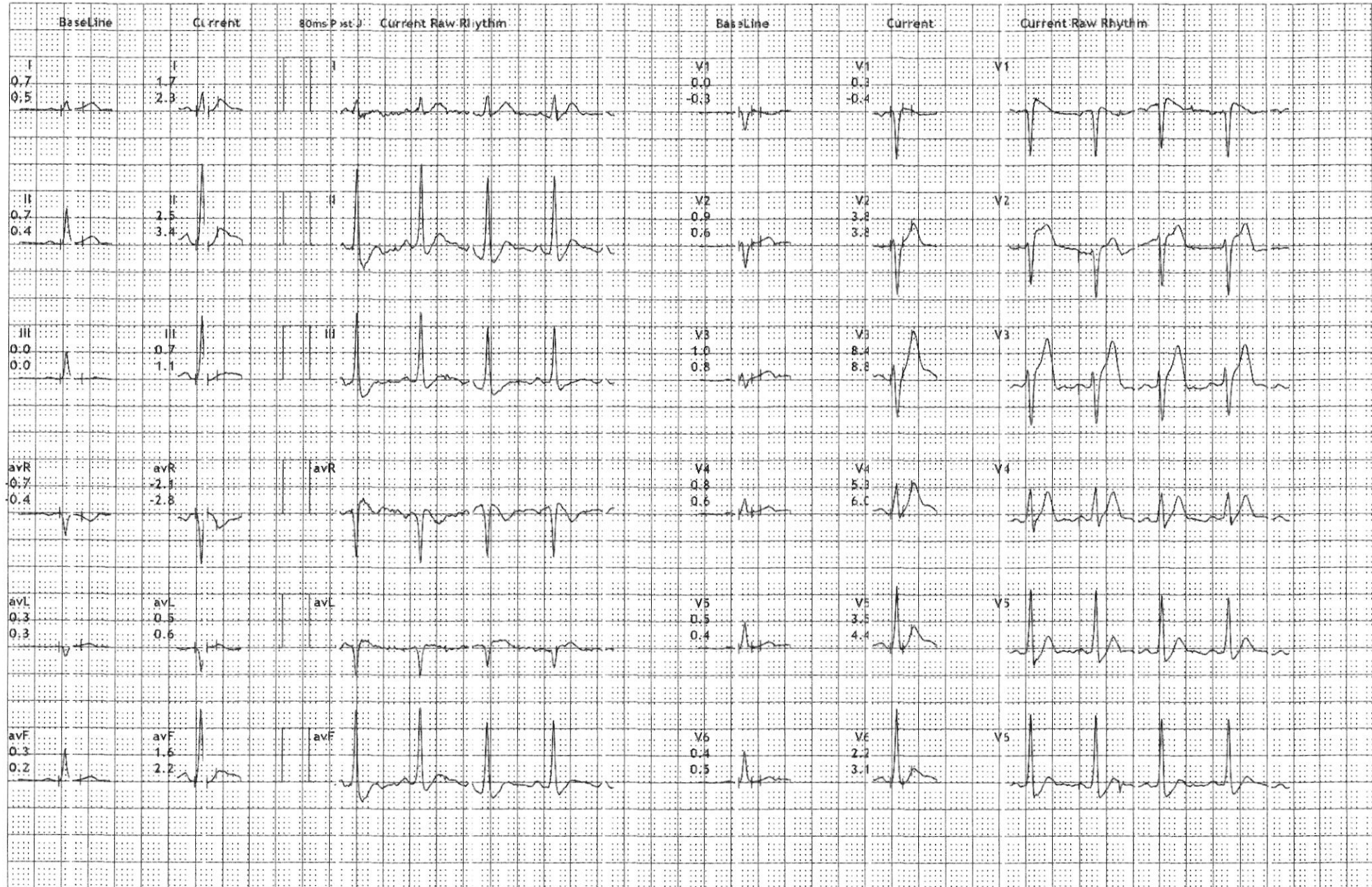
BLC : On

Notch : On

Recovery : ( 02:00 )

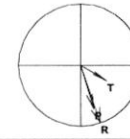
10.0 mm/mV

25 mm/Sec.









DR. MAHESHWAR BONDARE  
MBBS MD GENERAL MEDICINE  
REG. NO. MMC 2024042065

NSR w/m - Mean  
correlate clinically