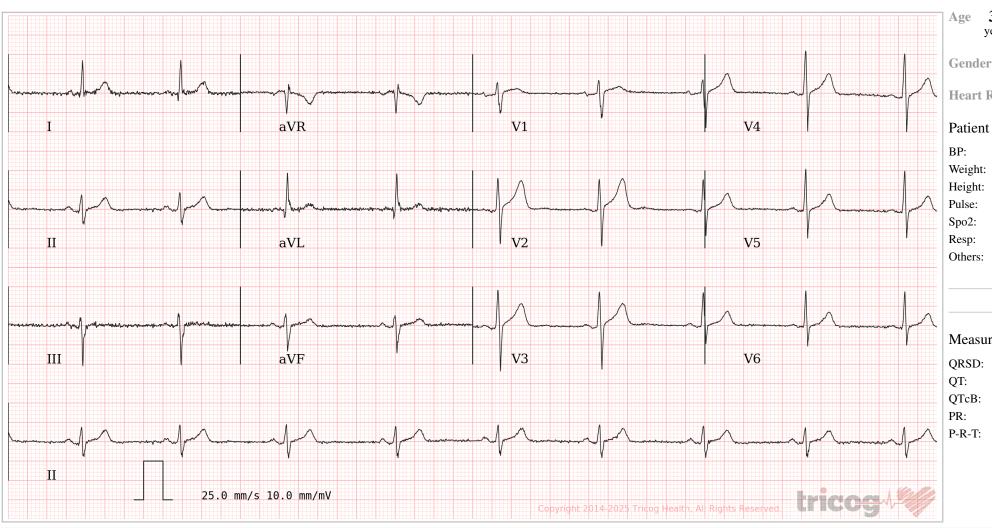
SUBURBAN DIAGNOSTICS - KALINA, SANTACRUZ EAST



Patient Name: PREDEEP KUMAR VERMA

Date and Time: 8th Mar 25 1:37 PM

Patient ID: 393866606



37 years months days

Gender Male

Heart Rate 56bpm

Patient Vitals

120/80 mmHg

64 kg Height: 170 cm

NA NA NA

Others:

Measurements

QRSD: 82ms 370ms QTcB: 357ms 142ms

48° -27° 36°

Sinus Bradycardia. Please correlate clinically.

REPORTED BY



Dr Naveed Sheikh PGDCC 2016/11/4694

Disclaimer: 1) Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. 2) Patient vitals are as entered by the clinician and not derived from the ECG.

T

भारत सरकार Government of India



प्रदीप कुमार वर्मा Predeep Kumar Verma जन्म तिथि/DOB: 10/10/1987 पुरुष/ MALE

6403 0697 3000

मेरा आधार, मेरी पहचान

9413435672

,beoR Tab , Sales Suburban Dingnostics (!) Pvf. Lfd.

PHYSICAL EXAMINATION FORM

| Patient Name: | MI | Predep | KUNTOVCID: | 393 | 8 666 06 | Sex/Age: | 271 | M |
|---------------|----|--------|------------|-----|----------|----------|-----|---|
|---------------|----|--------|------------|-----|----------|----------|-----|---|

Verma Date: 8 3 2015

History and Complaints:

Hypothy widson 2018

Temp:

Skin:

Nails:

Lymph Node:

EXAMINATION FINDINGS:

Height: 170

Weight: 64-8

Blood Pressure: 120/80

Pulse: 56

Systems

Cardiovascular:

Respiratory:

Genitourinary:

GI System:

CNS:

IMPRESSION: Platelet 119000

Chal 203 HPZ 36. NHD2 167 Ltor 149.

Refer to Physician.

CHIEF COMPLAINTS:

- 1) Hypertension:
- 2) IHD
- 3) Arrhythmia
- 4) Diabetes Mellitus
- 5) Tuberculosis
- 6) Asthama
- 7) Pulmonary Disease
- 8) Thyroid/ Endocrine disorders
- 9) Nervous disorders
- 10) GI system
- 11) Genital urinary disorder
- 12) Rheumatic joint diseases or symptoms
- 13) Blood disease or disorder
- 14) Cancer/lump growth/cyst
- 15) Congenital disease
- 16) Surgeries

PERSONAL HISTORY:

1) Alcohol

occanional.

NIL

Mixed.

2) Smoking

3) Diet
4) Medication Thyponosm 75 mcg

pic

Dr. D.G. HATALKAR M.D. (Ob.Gy) 2.No. 61067



E

R

Name

CID

: MR PRADEEP KUMAR VERMA

Age / Sex

:37 Years/Male

: 393866606

Ref. Dr

Reg. Date

: 08-Mar-2025

Reg. Location

: Kalina, Santacruz East Main Centre

Reported

: 08-Mar-2025 / 12:25

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

-----End of Report-----

Dr R K Bhandari

RIS De ans

M D, DMRE

MMC REG NO. 34078



R

Е

P

CID

: 393866606

R

Name

: MR PRADEEP KUMAR VERMA

Т

Age / Sex

: 37 Years/Male

Ref. Dr

: self

Reg. Date

: 08-Mar-2025

Reg. Location

: Kalina, Santacruz East Main Centre

Reported

: 08-Mar-2025 / 15:27

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (14.5 cm), shape and smooth margins. It shows normal parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein and CBD appears normal.

GALL BLADDER:

The gall bladder is physiologically distended and appears normal. No evidence of gall stones or mass lesions seen

PANCREAS:

The pancreas is well visualised and appears normal. No evidence of solid or cystic mass lesion.

KIDNEYS:

Both the kidneys are normal in size shape and echotexture.

No evidence of any calculus, hydronephrosis or mass lesion seen.

Right kidney measures 10.1 x 4.4 cm. Left kidney measures 11.2 x 5.1 cm.

SPLEEN:

The spleen is normal in size and echotexture. No evidence of focal lesion is noted.

There is no evidence of any lymphadenopathy or ascites.

URINARY BLADDER:

The urinary bladder is well distended and reveal no intraluminal abnormality..

PROSTATE:

The prostate is normal in size 4.5 x 2.9 x 3.2 cm and volume is 22 cc.

IMPRESSION:

No significant abnormality is seen.

-----End of Report-----

DR MAHIMA SETHI (MBBS, MD RADIOLOGY) REG NO . 2018/12/6157

Time: 1:47:35 PM

Height: 170 cms.

Weight: 64 Kg.

Patient Details Date: 08-Mar-25

Name: PREDEEP KUMAR VERMA ID: 393866606

Age: 37 y Sex: M

Clinical History: Routine Test

Medications: NONE

Test Details

Protocol: Bruce Pr.MHR: 183 bpm THR: 155 (85 % of Pr.MHR) bpm

Total Exec. Time: 9 m 35 s Max. HR; 163 (89% of Pr.MHR)bpm Max. Mets: 13.50

Max. BP: 160 / 80 mmHg Max. BP x HR: 26080 mmHg/min Min. BP x HR: 4320 mmHg/min

Test Termination Criteria: Target HR attained

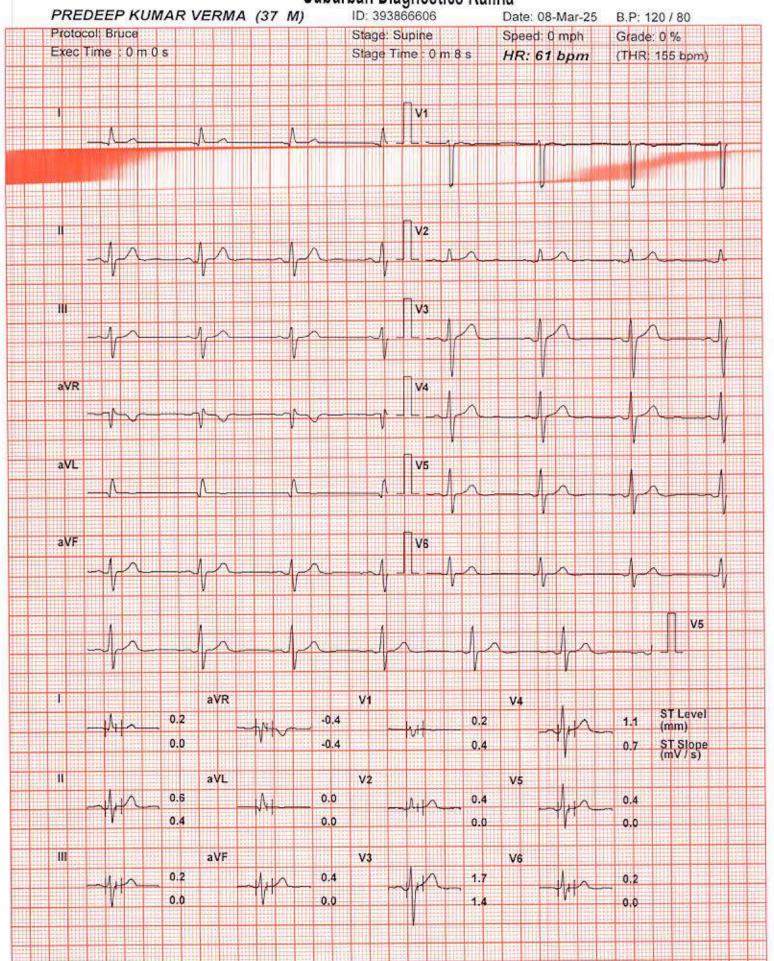
Protocol Details

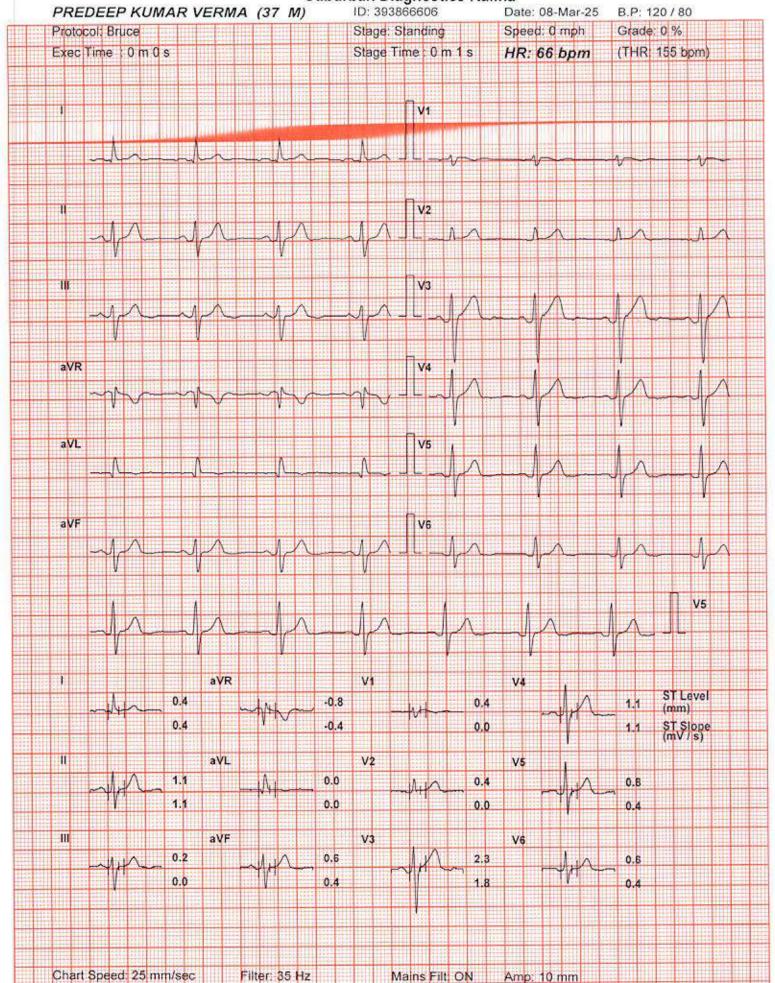
| | Stage Name | Stage Time | Mets | Speed | Grade | Heart | Max. BP | Max. ST | Max. ST | |
|---|------------------|-------------|------|-------|-------|---------------|----------|---------------|-----------------|---|
| | | (min : sec) | | (mph) | (%) | Rate (bpm) | (mm/Hg) | Level (mm) | Slope (mV/s) | |
| | Supine | 0:14 | 1.0 | 0 | 0 | 54 | 120 / 80 | -0.42 aVR | 1.77 V3 | ı |
| | Standing | 0:7 | 1.0 | 0 | 0 | 59 | 120 / 80 | -0.42 aVR | 2.12 V3 | |
| | Hyperventilation | 0:6 | 1.0 | 0 | 0 | 60 | 120 / 80 | -0.42 aVR | 2.12 V3 | |
| | 1 | 3:0 | 4.6 | 1.7 | 10 | 102 | 130 / 80 | -2.76 aVR | 4.95 V3 | |
| Ш | 2 | 3:0 | 7.0 | 2.5 | 12 | 118 | 130 / 80 | -1,49 aVR | 3,89 V3 | |
| | 3 | 3:0 | 10.2 | 3.4 | 14 | 153 | 150 / 80 | -1.06 aVR | 5.31 V3 | |
| | Peak Ex | 0:35 | 13.5 | 4.2 | 16 | 163 | 160 / 80 | -0.64 aVR | 5,66 V3 | |
| | Recovery(1) | 2:0 | 1.8 | 1 | 0 | 115 | 150 / 80 | -2.12 aVR | 5,66 V3 | |
| | Recovery(2) | 2:0 | 1.0 | 0 | 0 | 107 | 140 / 80 | -1.27 aVR | 5,31 V3 | |
| | Recovery(3) | 0:41 | 1.0 | 0 | 0 | 97 | 120 / 80 | -0.85 aVR | 1.77 V3 | |

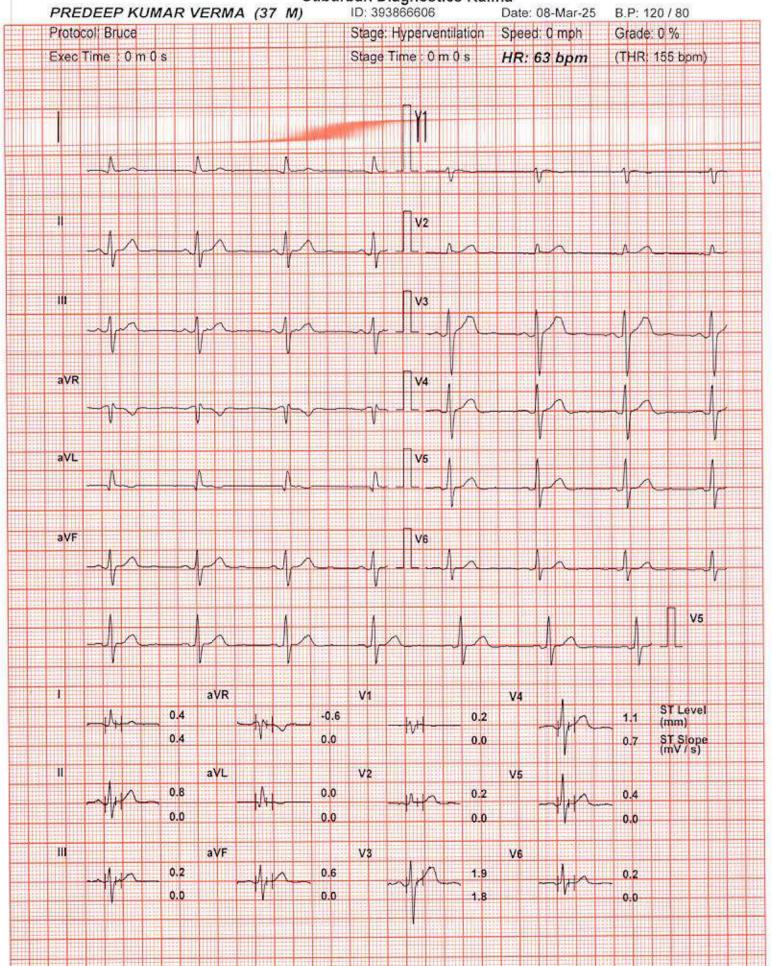
| | HR x Stage | BP x Stage | Mets x Stage |
|------|------------|------------|--------------|
| 200⊤ | | 300 ⊤ | 30 T |
| 180 | | 270 | 27 |
| 160 | | 240 | 24 |
| 140 | | 210 | 21 |
| 120 | | 180 | 18 |
| 100 | | 150 | 15 |

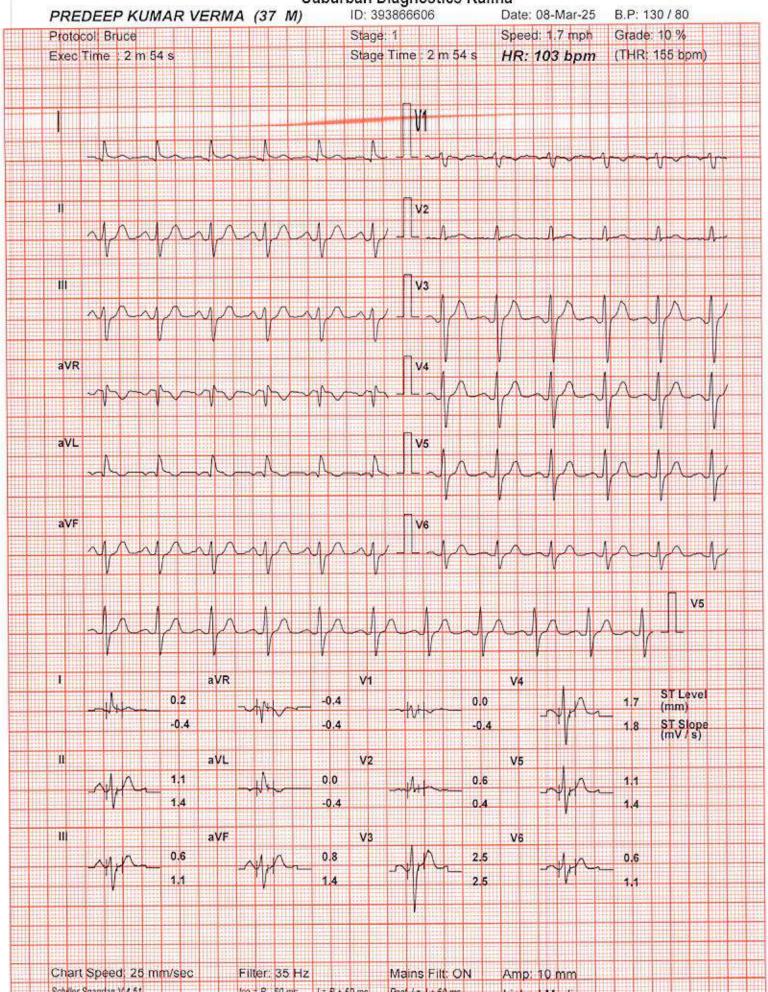
Suburban Diagnostics Kalina 08-Mar-25 1:47:35 PM **Patient Details** Date: Time: Name: PREDEEP KUMAR VERMA ID: 393866606 Weight: 64 Kg. Height: 170 cms Age: 37 y Sex: Interpretation GOOD EFFORT TOLEREANCE NORMAL HEART RATE RESPONSE NORMAL BLOOD PRESSURE RESPONSE NO ANGINA/ANGINA EQUIVALENTS NO ARRTHYMIAS NO SIGNIFICANT ST-T CHANGES NOTED AS COMPARED TO BASELINE ECG IMPRESSION I STRESS TEST IS NEGATIVE FOR INDUCIBLE ISCHAEMIA Disclaimer: Negative stress test does not rule out Coronary Artery Disease Positive stress test is suggestive but not confirmatory of coronary artery disease Hence clinical correlation is mandatory Suburban Diagnostics (I) hvt. Ltd Oper me Tel. No. 022-6170000 Reg. No. 2010



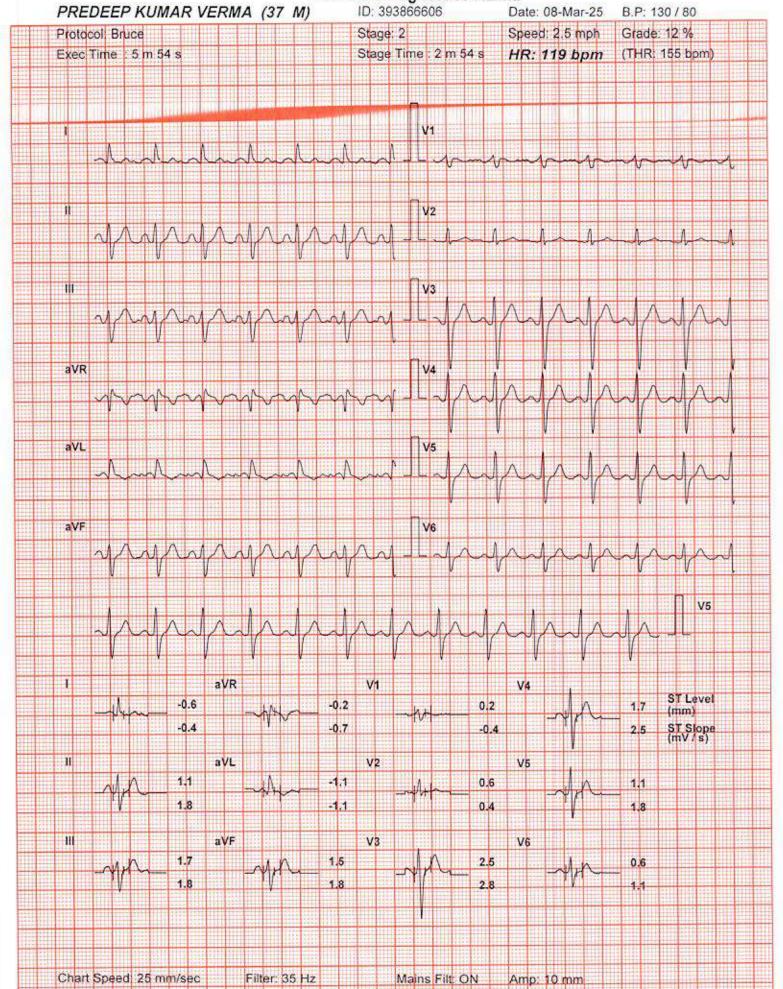








Suburban Diagnostics Kalina DE 393866606 Da



Suburban Diagnostics Kalina PREDEEP KUMAR VERMA (37 M) ID: 393866606 Date: 08-Mar-25 B.P: 150 / 80 Protocoli Bruce Stage: 3 Speed: 3.4 mph Grade: 14 % Exec Time : 8 m 54 s Stage Time: 2 m 54 s HR: 152 bpm (THR: 155 bpm) V2 Ш V3 aVR V4 aVL V5 aVF V6 V5 aVR VI V4 ST Level 0.2 -0.4 0.0 (mm) 0.7 -1.8 ST Slope (mV/s) -0.7 11 aVL V2 V5 8.0 -0.2 0.6 0.8 3.2 -0.4 0.7 2.8 Ш aVF V3 V6 0.6 0.8 2.8 0.6 2.5 3.2 2.1

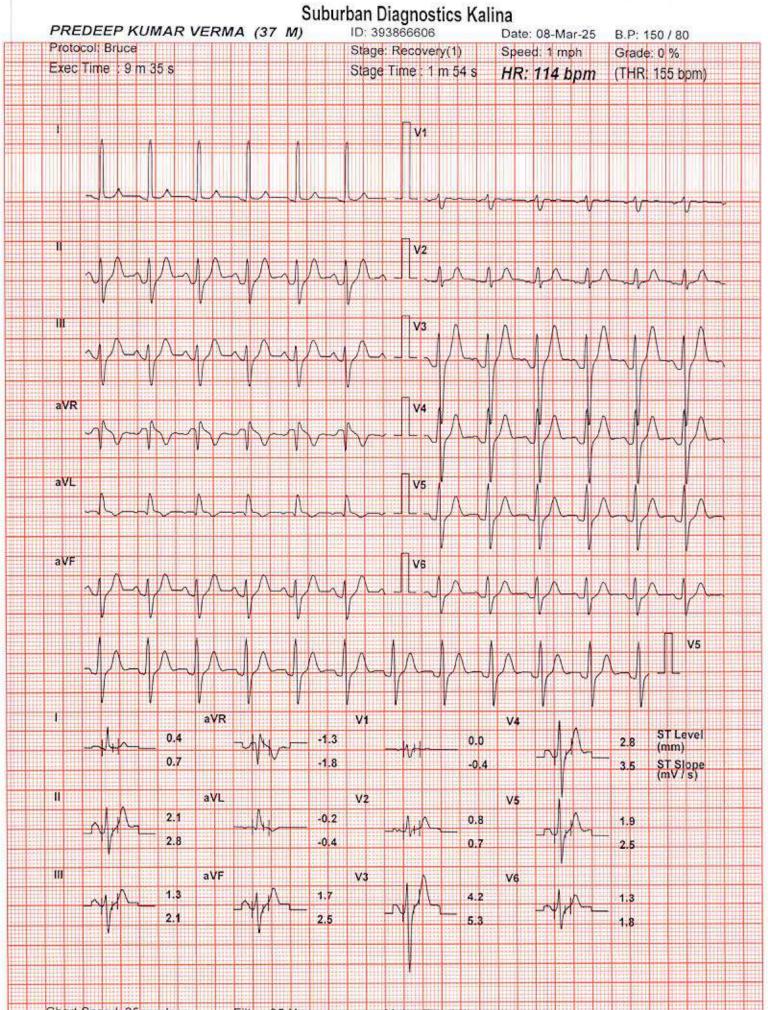
Mains Filt: ON

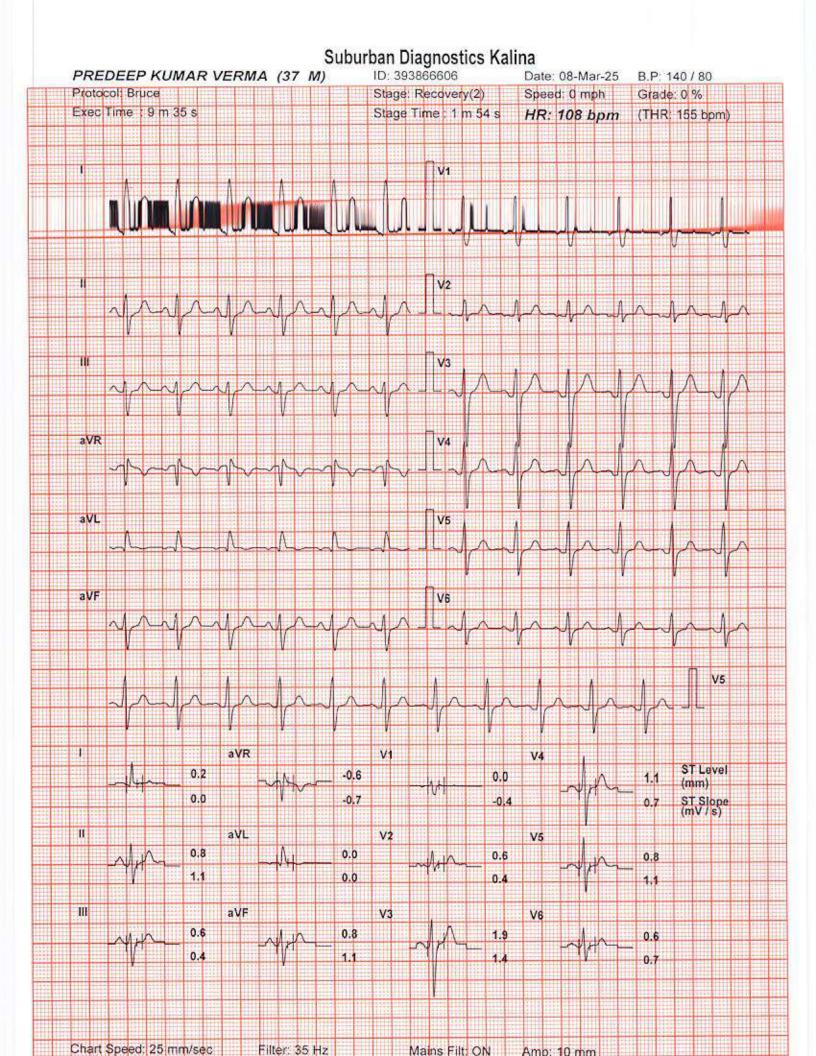
Amp: 10 mm

Chart Speed: 25 mm/sec

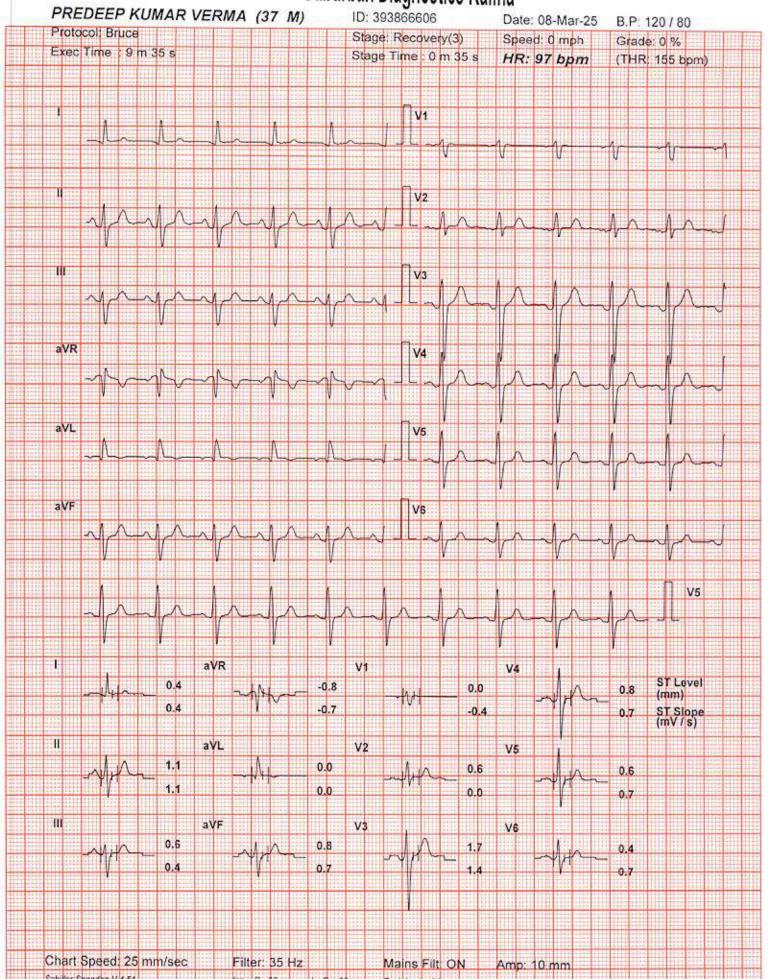
Filter: 35 Hz

Suburban Diagnostics Kalina Diagnostics Kalina PREDEEP KUMAR VERMA (37 M) Date: 08-Mar-25 B.P: 160 / 80 Protocol Bruce Stage: Peak Ex Speed: 4.2 mph Grade: 16 % Exec Time : 9 m 29 s Stage Time: 0 m 29 s HR: 163 bpm (THR: 155 bpm) V2 11 V3 aVR V4 aVL V5 aVF V6 V5 aVR V1 V4 ST Level 0.0 -0.2 0.0 1.3 (mm) ST Slope (mV / s) 1.1 -1.8 -0.4 П aVL V2 V5 0.4 -0.2 0.2 0.2 2.8 -0.4 3.2 111 aVF V6 V3 0.4 0.2 2.3 0.0 1.4 1.8 1.8









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भारत सरकार Government of India



प्रदीप कुमार वर्मा Predeep Kumar Verma जन्म तिथि/DOB: 10/10/1987 पुरुष/ MALE

6403 0697 3000

मेरा आधार, मेरी पहचान

9413435672

,beoR Tab , Sales Suburban Dingnostics (!) Pvf. Lfd.

PHYSICAL EXAMINATION FORM

| Patient Name: | MI | Predep | KUNTOVCID: | 393 | 8 666 06 | Sex/Age: | 271 | M |
|---------------|----|--------|------------|-----|----------|----------|-----|---|
|---------------|----|--------|------------|-----|----------|----------|-----|---|

Verma Date: 8 3 2015

History and Complaints:

Hypothy widson 2018

Temp:

Skin:

Nails:

Lymph Node:

EXAMINATION FINDINGS:

Height: 170

Weight: 64-8

Blood Pressure: 120/80

Pulse: 56

Systems

Cardiovascular:

Respiratory:

Genitourinary:

GI System:

CNS:

IMPRESSION: Platelet 119000

Chal 203 HPZ 36. NHD2 167 Ltor 149.

Refer to Physician.

CHIEF COMPLAINTS:

- 1) Hypertension:
- 2) IHD
- 3) Arrhythmia
- 4) Diabetes Mellitus
- 5) Tuberculosis
- 6) Asthama
- 7) Pulmonary Disease
- 8) Thyroid/ Endocrine disorders
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- 10) GI system
- 11) Genital urinary disorder
- 12) Rheumatic joint diseases or symptoms
- 13) Blood disease or disorder
- 14) Cancer/lump growth/cyst
- 15) Congenital disease
- 16) Surgeries

PERSONAL HISTORY:

1) Alcohol

occanional.

NIL

Mixed.

2) Smoking

3) Diet
4) Medication Thyponosm 75 mcg

pic

Dr. D.G. HATALKAR M.D. (Ob.Gy) 2.No. 61067



E

R

Name

CID

: MR PRADEEP KUMAR VERMA

Age / Sex

:37 Years/Male

: 393866606

Ref. Dr

Reg. Date

: 08-Mar-2025

Reg. Location

: Kalina, Santacruz East Main Centre

Reported

: 08-Mar-2025 / 12:25

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

-----End of Report-----

Dr R K Bhandari

RIS De ans

M D, DMRE

MMC REG NO. 34078



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: 393866606

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Name

: MR PRADEEP KUMAR VERMA

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Age / Sex

: 37 Years/Male

Ref. Dr

: self

Reg. Date

: 08-Mar-2025

Reg. Location

: Kalina, Santacruz East Main Centre

Reported

: 08-Mar-2025 / 15:27

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (14.5 cm), shape and smooth margins. It shows normal parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein and CBD appears normal.

GALL BLADDER:

The gall bladder is physiologically distended and appears normal. No evidence of gall stones or mass lesions seen

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The pancreas is well visualised and appears normal. No evidence of solid or cystic mass lesion.

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Right kidney measures 10.1 x 4.4 cm. Left kidney measures 11.2 x 5.1 cm.

SPLEEN:

The spleen is normal in size and echotexture. No evidence of focal lesion is noted.

There is no evidence of any lymphadenopathy or ascites.

URINARY BLADDER:

The urinary bladder is well distended and reveal no intraluminal abnormality..

PROSTATE:

The prostate is normal in size 4.5 x 2.9 x 3.2 cm and volume is 22 cc.

IMPRESSION:

No significant abnormality is seen.

-----End of Report-----

DR MAHIMA SETHI (MBBS, MD RADIOLOGY) REG NO . 2018/12/6157



Lab No. : 393866606 Ref By : SELF

Collected: 8/3/2025 1:46:00PM

A/c Status : P

PARAMETER

Collected at : WALKIN - KALINA, SANTACRUZ EAST (MAIN

CENTRE)

101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East,

Mumbai, Maharashtra - 400009

ip : proposal no-22E56039

Age : 37 Years Gender : Male

Reported : 8/3/2025 11:39:41PM

Report Status : Interim

BIOLOGICAL REF RANGE

Processed at : SDRL, VIDYAVIHAR



METHOD

Aerfocami Healthcare Below 40 Male/Female CBC (Complete Blood Count), Blood

RESULTS

| RBC PARAMETERS | REGGETO | BIOLOGICAL KLI KANGL | <u></u> |
|----------------------------------|-------------|----------------------|--------------------|
| Haemoglobin | 14.0 | 13.0 - 17.0 g/dL | Spectrophotometric |
| RBC | 4.3 | 4.5 - 5.5 mil/cmm | Elect. Impedance |
| PCV | 41.1 | 40.0 - 50.0 % | Calculated |
| MCV | 95.9 | 81.0 - 101.0 fL | Measured |
| MCH | 32.7 | 27.0 - 32.0 pg | Calculated |
| MCHC | 34.1 | 31.5 - 34.5 g/dL | Calculated |
| RDW | 14.2 | 11.6 - 14.0 % | Calculated |
| WBC PARAMETERS | | | |
| WBC Total Count | 4510 | 4000 - 10000 /cmm | Elect. Impedance |
| WBC DIFFERENTIAL AND ABSOLUTE CO | <u>UNTS</u> | | |
| Lymphocytes | 43.6 | 20.0 - 40.0 % | |
| Absolute Lymphocytes | 1966.4 | 1000.0 - 3000.0 /cmm | Calculated |
| Monocytes | 7.3 | 2.0 - 10.0 % | |
| Absolute Monocytes | 329.2 | 200.0 - 1000.0 /cmm | Calculated |
| Neutrophils | 44.3 | 40.0 - 80.0 % | |
| Absolute Neutrophils | 1997.9 | 2000.0 - 7000.0 /cmm | Calculated |
| Eosinophils | 4.5 | 1.0 - 6.0 % | |
| Absolute Eosinophils | 203.0 | 20.0 - 500.0 /cmm | Calculated |
| Basophils | 0.3 | 0.1 - 2.0 % | |
| Absolute Basophils | 13.5 | 20.0 - 100.0 /cmm | Calculated |



Page 1 of 13



Lab No. : 393866606 Ref By : SELF

Collected: 8/3/2025 1:46:00PM

A/c Status : P

ID

Collected at : WALKIN - KALINA, SANTACRUZ EAST (MAIN

CENTRE)

101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank,

Kalina, Opp. Petrol Pump, Santacruz East, Mumbai, Maharashtra - 400009

: proposal no-22E56039

Age : 37 Years Gender : Male

Reported : 8/3/2025 11:39:41PM

Report Status : Interim

Processed at : SDRL, VIDYAVIHAR



Aerfocami Healthcare Below 40 Male/Female CBC (Complete Blood Count), Blood

| PARAMETER PLATELET PARAMETERS | RESULTS | BIOLOGICAL REF RANGE | METHOD |
|-------------------------------|-----------------------------|----------------------|------------------|
| Platelet Count | 119000 | 150000 - 410000 /cmm | Elect. Impedance |
| MPV | 13.3 | 6.0 - 11.0 fL | Measured |
| PDW | 33.7 | 11.0 - 18.0 % | Calculated |
| RBC MORPHOLOGY | | | |
| Hypochromia | | | |
| Microcytosis | | | |
| Macrocytosis | | | |
| Anisocytosis | | | |
| Poikilocytosis | | | |
| Polychromasia | | | |
| Target Cells | | | |
| Basophilic Stippling | | | |
| Normoblasts | | | |
| Others | Normocytic Normochromic | | |
| WBC MORPHOLOGY | | | |
| PLATELET MORPHOLOGY | Megaplatelet seen on smear. | | |
| COMMENT | on sinear. | | |
| | | | |

Specimen: EDTA whole blood



Page 2 of 13



 Lab No.
 : 393866606
 Age
 : 37 Years

 Ref By
 : SELF
 Gender
 : Male

Collected : 8/3/2025 1:46:00PM Reported : 8/3/2025 11:39:50PM

A/c Status ; P Report Status ; Interim

Collected at : WALKIN - KALINA, SANTACRUZ EAST (MAIN

CENTRE)

101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East,

Mumbai, Maharashtra - 400009

Corporate ID: proposal no-22E56039

MC-5460

<u>Aerfocami Healthcare Below 40 Male/Female</u> ERYTHROCYTE SEDIMENTATION RATE (ESR)

Processed at : SDRL, VIDYAVIHAR

PARAMETERRESULTSBIOLOGICAL REF RANGEMETHODESR, EDTA WB6.002.00 - 15.00 mm/hrSedimentation

Clinical Significance: The erythrocyte sedimentation rate (ESR), also called a sedimentation rate is the rate red blood cells sediment in a period of time.

Interpretation:

Factors that increase ESR: Old age, Pregnancy, Anemia

Factors that decrease ESR: Extreme leukocytosis, Polycythemia, Red cell abnormalities- Sickle cell disease

Limitations:

- It is a non-specific measure of inflammation.
- The use of the ESR as a screening test in asymptomatic persons is limited by its low sensitivity and specificity.

Reflex Test: C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.

Reference:

- Pack Insert
- Brigden ML. Clinical utility of the erythrocyte sedimentation rate. American family physician. 1999 Oct 1;60(5):1443-50.





Lab No. : 393866606 Age : 37 Years
Ref By : SELF Gender : Male

Collected : 08/03/2025 01:46:00PM Reported : 8/3/2025 11:39:56PM

A/c Status : P Report Status : Interim

Collected at : WALKIN - KALINA, SANTACRUZ EAST (MAIN Processed at : SDRL, VIDYAVIHAR

101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank,

Kalina, Opp. Petrol Pump, Santacruz East,

Mumbai, Maharashtra - 400009

iD : proposal_no-22E56039

CENTRE)

MC-5460

Hexokinase

Aerfocami Healthcare Below 40 Male/Female

PARAMETER RESULTS BIOLOGICAL REF RANGES METHOD

GLUCOSE (SUGAR) PP, Fluoride 99.50 Non-Diabetic: < 140 mg/dl

Plasma PP Impaired Glucose Tolerance:

140-199 mg/dl Diabetic: >/= 200 mg/dl

Note: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition

CREATININE, Serum 0.76 0.73 - 1.18 mg/dL Enzymatic

eGFR, Serum 118.42 (ml/min/1.73sqm) Calculated

Normal or High: Above 90 Mild decrease: 60-89

Mild to moderate decrease: 45-59

Moderate to severe decrease:30-44

Severe decrease: 15-29 Kidney failure:<15

Note: eGFR estimation is calculated using 2021 CKD-EPI GFR equation

GLUCOSE (SUGAR) FASTING, 91.10 Non-Diabetic: < 100 mg/dl Hexokinase

Fluoride Plasma Fasting Impaired Fasting Glucose:

100-125 mg/dl

Diabetic: >/= 126 mg/dl

Note: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition





Lab No. : 393866606 Ref By : SELF

Collected : 8/3/2025 1:46:00PM

A/c Status : P

Collected at : WALKIN - KALINA, SANTACRUZ EAST (MAIN

CENTRE)

101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East, Mumbai, Maharashtra - 400009

iD : proposal_no-22E56039

Age : 37 Years Gender : Male

Reported : 8/3/2025 11:40:01PM

Report Status : Interim

Processed at : SDRL, VIDYAVIHAR



Aerfocami Healthcare Below 40 Male/Female

| PARAMETER BILIRUBIN (TOTAL), Serum | RESULTS 0.62 | BIOLOGICAL REF RANGE 0.30 - 1.20 mg/dL | METHOD Vanadate oxidation |
|------------------------------------|-----------------|---|---------------------------|
| BILIRUBIN (DIRECT), Serum | 0.19 | 0.00 - 0.30 mg/dL | Vanadate oxidation |
| BILIRUBIN (INDIRECT), Serum | 0.43 | <1.20 mg/dL | Calculated |
| SGOT (AST), Serum | 25.70 | <34.00 U/L | Modified IFCC |
| SGPT (ALT), Serum | 42.50 | 10.00 - 49.00 U/L | Modified IFCC |
| GAMMA GT, Serum | 28.10 | <73.00 U/L | Modified IFCC |
| ALKALINE PHOSPHATASE, Serum | 94.60 | 46.00 - 116.00 U/L | Modified IFCC |
| BLOOD UREA,Serum | 23.60 | 19.29 - 49.28 mg/dL | Calculated |
| BUN, Serum | 11.02 | 9.00 - 23.00 mg/dL | Urease with GLDH |
| URIC ACID, Serum | 5.80 | 3.70 - 9.20 mg/dL | Uricase/Peroxidas e |
| TOTAL PROTEINS, Serum | 6.30 | 5.70 - 8.20 g/dL | Biuret |
| Albumin Serum | 4.40 | 3.20 - 4.80 g/dL | BCG |
| GLOBULIN Serum | 1.90 | 2.30 - 3.50 g/dL | Calculated |
| A/G RATIO Serum | 2.32 | 1.00 - 2.00 | Calculated |





Lab No. : 393866606 Age : 37 Years
Ref By : SELF Gender : Male

Collected : 08/03/2025 01:46:00PM Reported : 8/3/2025 11:40:06PM

A/c Status : P Report Status : Interim

Collected at : WALKIN - KALINA, SANTACRUZ EAST (MAIN

CENTRE)

101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East,

Mumbai, Maharashtra - 400009

iD : proposal_no-22E56039



<u>Aerfocami Healthcare Below 40 Male/Female</u> <u>GLYCOSYLATED HEMOGLOBIN (HbA1c)</u>

Processed at : SDRL, VIDYAVIHAR

| PARAMETER | <u>RESULTS</u> | BIOLOGICAL REF RANGES | <u>METHOD</u> |
|---|----------------|--|---------------|
| Glycosylated Hemoglobin (HbA1c) ,EDTA WB | 5.5 | Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 % | HPLC |
| Estimated Average Glucose (eAG),EDTA WB | 111.2 | mg/dL | Calculated |

Intended use:

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

Clinical Significance:

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

Test Interpretation:

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

Factors affecting HbA1c results:

Increased in: High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, plenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

Reflex tests: Blood glucose levels, CGM (Continuous Glucose monitoring)

References: ADA recommendations, AACC, Wallach s interpretation of diagnostic tests 10th edition.



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 Lab No.
 : 393866606
 Age
 : 37 Years

 Ref By
 : SELF
 Gender
 : Male

Collected : 08/03/2025 01:46:00PM Reported : 8/3/2025 11:40:11PM

A/c Status : P

Collected at : WALKIN - KALINA, SANTACRUZ EAST (MAIN

CENTRE)

101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East,

Mumbai, Maharashtra - 400009

iD : proposal_no-22E56039

<u>Aerfocami Healthcare Below 40 Male/Female</u> <u>LIPID PROFILE</u>

Report Status : Interim

: SDRL, VIDYAVIHAR

Processed at

| PARAMETER | <u>RESULTS</u> | BIOLOGICAL REF RANGES | <u>METHOD</u> |
|-------------------------------------|----------------|---|------------------------|
| CHOLESTEROL, Serum | 203 | Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl | CHOD-POD |
| TRIGLYCERIDES, Serum | 90 | Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl | Enzymatic colorimetric |
| HDL CHOLESTEROL Serum | 36 | Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl | Elimination/ Catalase |
| NON HDL CHOLESTEROL, Serum | 167 | Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl | Calculated |
| LDL CHOLESTEROL Serum | 149 | Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl | Calculated |
| VLDL CHOLESTEROL Serum | 18 | < /= 30 mg/dl | Calculated |
| CHOL / HDL CHOL RATIO, Serum | 6 | 0-4.5 Ratio | Calculated |
| LDL CHOL / HDL CHOL RATIO, Serum | 4 | 0-3.5 Ratio | Calculated |

Reference:

- 1) Executive Summary of the Third Report of the National Cholesterol Education Program (NCEP) Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults (Adult Treatment Panel III).
- 2) Pack Insert.



Page 7 of 13



 Lab No.
 : 393866606
 Age
 : 37 Years

 Ref By
 : SELF
 Gender
 : Male

Collected : 08/03/2025 01:46:00PM Reported : 8/3/2025 11:40:11PM

A/c Status : P

Collected at : WALKIN - KALINA, SANTACRUZ EAST (MAIN

CENTRE)

101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East,

Mumbai, Maharashtra - 400009

iD : proposal_no-22E56039

<u>Aerfocami Healthcare Below 40 Male/Female</u> <u>THYROID FUNCTION TESTS</u>

Report Status : Interim

: SDRL, VIDYAVIHAR

Processed at

| PARAMETER | <u>RESULTS</u> | BIOLOGICAL REF RANGES | METHOD |
|--------------------|----------------|------------------------|---------------|
| Free T3, Serum | 5.30 | 3.50 - 6.50 pmol/L | CLIA |
| Free T4 Serum | 15.20 | 11.50 - 22.70 pmol/L | CLIA |
| sensitiveTSH Serum | 3.14 | 0.55 - 4.78 microIU/ml | CLIA |

Interpretation:

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

Clinical Significance:

- 1. TSH Values between high abnormal upto15 microlU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2. TSH values may be trasiently altered becuase of non thyroidal illness like severe infections, liver disease, renal and heart severe burns, trauma and surgery etc.

| TSH | FT4 / T4 | FT3 / T3 | Interpretation |
|------|----------------|----------|---|
| High | Normal | Normal | Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone recovery phase of nonthyroidal illness, TSH Resistance |
| High | Low | Low | Hypothyroidism, Autoimmune thyroiditis,post radio liodine Rx, post thyroidectomy,anti thyroid drugs, tyrosine kinase inhibitors & amiodarone amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism. |
| Low | High | High | Hyperthyroidism, Graves disease,toxic multinodular goiter,toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum hydatiform mole) |
| Low | Normal | Normal | Subclinical Hyperthyroidism, recent Rx for hyperthy- roidism, drugs like steroids & dopamine, Non thyroidal illness. |
| Low | | Low | Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism. |
| High | High | нigh | Interfering anti TPO antibodies,Drug interference: Amiodarone,Heparin, Beta Blockers, steroids & anti epileptics. |



Page 8 of 13



 Lab No.
 : 393866606
 Age
 : 37 Years

 Ref By
 : SELF
 Gender
 : Male

Collected : 08/03/2025 01:46:00PM Reported : 8/3/2025 11:40:11PM

A/c Status : P

Collected at : WALKIN - KALINA, SANTACRUZ EAST (MAIN

CENTRE)

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Mumbai, Maharashtra - 400009

iD : proposal_no-22E56039

<u>Aerfocami Healthcare Below 40 Male/Female</u> <u>THYROID FUNCTION TESTS</u>

Report Status : Interim

: SDRL, VIDYAVIHAR

Processed at

PARAMETER RESULTS BIOLOGICAL REF RANGES METHOD

Diurnal Variation: TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am, and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7% (with in subject variation)

Reflex Tests: Anti thyroid Antibodies, USG Thyroid , TSH receptor Antibody. Thyroglobulin, Calcitonin

Limitations:

- 1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
- 2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results.this assay is designed to minimize interference from heterophilic antibodies.

Reference:

- 1. O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2. Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3. Tietz ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4. Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)





 Lab No.
 : 393866606
 Age
 : 37 Years

 Ref By
 : SELF
 Gender
 : Male

Collected : 8/3/2025 1:46:00PM Reported : 8/3/2025 11:40:15PM

A/c Status : P Report Status : Interim

Collected at : WALKIN - KALINA, SANTACRUZ EAST (MAIN Processed at

CENTRE)

101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East,

Mumbai, Maharashtra - 400009

iD : proposal no-22E56039



Aerfocami Healthcare Below 40 Male/Female EXAMINATION OF FAECES

: SDRL, VIDYAVIHAR

| PARAMETER | <u>RESULTS</u> | BIOLOGICAL REF RANGE | <u>METHOD</u> |
|---|---|---|------------------------|
| PHYSICAL EXAMINATION | | | |
| Colour Form and Consistency Mucus Blood | Brown Semi Solid Absent Absent | Brown Semi Solid Absent Absent | - - - |
| CHEMICAL EXAMINATION | | | |
| Reaction (pH) Occult Blood | 6.50 Absent | - Absent | pH Indicator Guaiac |
| MICROSCOPIC EXAMINATION | | | |
| Protozoa | Absent | Absent | - |
| Flagellates | Absent | Absent | - |
| Ciliates | Absent | Absent | - |
| Parasites | Absent | Absent | - |
| Macrophages | Absent | Absent | - |
| Mucus Strands | Absent | Absent | - |
| Fat Globules | Absent | Absent | - |
| RBC/hpf | Absent | Absent | - |
| WBC/hpf | Absent | Absent | - |
| Yeast Cells | Absent | Absent | - |
| Undigested Particles | Present++ | - | - |
| Concentration Method (for ova) | No ova detected | Absent | - |
| Reducing Substances | - | Absent | Benedicts |





Lab No. : 393866606 Age : 37 Years
Ref By : SELF Gender : Male

Collected : 8/3/2025 1:46:00PM Reported : 8/3/2025 11:40:19PM

A/c Status : P Report Status : Interim

Collected at : WALKIN - KALINA, SANTACRUZ EAST (MAIN

CENTRE)

101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East,

Mumbai, Maharashtra - 400009

Corporate ID: proposal no-22E56039

MC-5460

<u>Aerfocami Healthcare Below 40 Male/Female</u> BLOOD GROUPING & Rh TYPING

Processed at

: SDRL, VIDYAVIHAR

PARAMETER RESULTS

ABO GROUP B

Rh Typing Positive

NOTE: Test performed by automated Erythrocytes magnetized technology (EMT) which is more sensitive than conventional methods.

Specimen: EDTA Whole Blood and/or serum

Clinical significance:

ABO system is most important of all blood group in transfusion medicine

Limitations:

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the
 first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of
 adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

Refernces:

 Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia



Page 11 of 13



Lab No. : 393866606 Ref By : SELF

Collected : 8/3/2025 1:46:00PM

A/c Status : P

Collected at : WALKIN - KALINA, SANTACRUZ EAST (MAIN

CENTRE)

101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East,

Mumbai, Maharashtra - 400009

iD : proposal no-22E56039

Age : 37 Years Gender : Male

Reported : 8/3/2025 11:40:22PM

Report Status : Interim

Processed at : SDRL, VIDYAVIHAR



URINE EXAMINATION REPORT

| PARAMETER . | <u>URINE EXAMINATI</u> <u>RESULTS</u> | BIOLOGICAL REF RANGE | METHOD | | |
|--------------------------------------|--|-----------------------------|-------------------------|--|--|
| PHYSICAL EXAMINATION | | | | | |
| Color | Yellow | Pale Yellow | Light scattering | | |
| Transparency | CLEAR | Clear | Light scattering | | |
| CHEMICAL EXAMINATION | | | | | |
| Specific Gravity | 1.021 | 1.002-1.035 Refractive inde | | | |
| Reaction (pH) | 5.5 | 5-8 | pH Indicator | | |
| Proteins | Absent | Absent | Protein error principle | | |
| Glucose | Absent | Absent | GOD-POD | | |
| Ketones | Absent | Absent | Legals Test | | |
| Blood | Absent | Absent | Peroxidase | | |
| Bilirubin | Absent | Absent | Diazonium Salt | | |
| Urobilinogen | Normal | Normal | Diazonium Salt | | |
| Nitrite | Negative | Negative | Griess Test | | |
| MICROSCOPIC EXAMINATION | | | | | |
| (WBC)Pus cells / hpf | 0.00 | 0-5/hpf | | | |
| Red Blood Cells / hpf | 0.00 | 0-2/hpf | | | |
| Epithelial Cells / hpf | 0.1 | 0-5/hpf | | | |
| Hyaline Casts | 0.00 | 0-1/hpf | | | |
| Pathological cast | 0.00 | 0-0.3/hpf | | | |
| Calcium oxalate monohydrate crystals | 0.00 | 0-1.4/hpf | | | |
| Calcium oxalate dihydrate crystals | 0.00 | 0-1.4/hpf | | | |
| Triple Phosphate crystals | 0.00 | 0-1.4/hpf | | | |
| Uric acid crystals | 0.00 | 0-1.4/hpf | | | |
| Amorphous debris | Absent | Absent | | | |
| Bacteria / hpf | 9.20 | 0-29.5/hpf | | | |
| Yeast | Absent | Absent | | | |
| OTHERS | | | | | |

Note: Microscopic examination is performed by Automated Cuvette based technology. All the Abnormal results



Page 12 of 13



Lab No. : 393866606 Ref By : SELF

Collected : 8/3/2025 1:46:00PM

A/c Status : P

Collected at : WALKIN - KALINA, SANTACRUZ EAST (MAIN

CENTRE)

101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East,

Mumbai, Maharashtra - 400009

: proposal no-22E56039

Age : 37 Years Gender : Male

Reported : 8/3/2025 11:40:22PM

Report Status : Interim

Processed at : SDRL, VIDYAVIHAR



URINE EXAMINATION REPORT

PARAMETER RESULTS BIOLOGICAL REF RANGE METHOD

are confirmed by reagent strips and Manual method. The Microscopic examination findings are mentioned in decimal numbers as they are the arithmetic mean of the multiple fields scanned using microscopy.

Reference: Pack Insert.

Dr Trupti Shetty MD Pathology Deputy HOD Dr Leena Salunkhe

DPB HOD Dr Namrata Raul MD. Biochemistry

Consultant Biochemist

Dr Priyanka Sunil Pagare

MD Pathology

Dr Vrushali Shroff MD Pathology Sr. Pathologist



Result/s to follow:

FUS and KETONES, Glucose & Ketones, Urine

IMPORTANT INSTRUCTIONS

The published test results relate to the submitted specimen. All test results are dependent on the quality of the sample received by the laboratory. Laboratory tests should be clinically correlated by a physician and are merely a tool to help arrive at a diagnosis. Unforeseen circumstances may cause a delay in the delivery of the report. Inconvenience is regretted. Certain tests may require further testing at an additional cost for derivation of exact value. Kindly submit the request within 72 hours post-reporting. The Court/Forum at Mumbai shall have exclusive jurisdiction in all disputes/claims concerning the test(s) & or results of the test(s). Test results are not valid for medico-legal purposes. This computer-generated medical diagnostic report has been verified by a doctor or an authorized medical professional. A physical signature is not required for this report.

(#) sample drawn from an external source.

If test results are alarming or unexpected, the client is advised to contact customer care immediately for possible remedial action.

Tel: 022-61700000, Email: <a href="mailto:customerservice@suburbandiagnostics.com/mailto:customerservice.com/mailto:customerservice.com/mailto:customerservice.com/mailto:customerservice.com/mailto:customerservice.com/mailto:customerservice.com/mailto:customers

West Reference Lab, Mumbai, is a CAP (8036028) Accredited laboratory.



Page 13 of 13

T

भारत सरकार Government of India



प्रदीप कुमार वर्मा Predeep Kumar Verma जन्म तिथि/DOB: 10/10/1987 पुरुष/ MALE

6403 0697 3000

मेरा आधार, मेरी पहचान

9413435672

,beoR Tab , Sales Suburban Dingnostics (!) Pvf. Lfd.

PHYSICAL EXAMINATION FORM

| Patient Name: | MI | Predep | KUNTOVCID: | 393 | 8 666 06 | Sex/Age: | 271 | M |
|---------------|----|--------|------------|-----|----------|----------|-----|---|
|---------------|----|--------|------------|-----|----------|----------|-----|---|

Verma Date: 8 3 2015

History and Complaints:

Hypothy widson 2018

Temp:

Skin:

Nails:

Lymph Node:

EXAMINATION FINDINGS:

Height: 170

Weight: 64-8

Blood Pressure: 120/80

Pulse: 56

Systems

Cardiovascular:

Respiratory:

Genitourinary:

GI System:

CNS:

IMPRESSION: Platelet 119000

Chal 203 HPZ 36. NHD2 167 Ltor 149.

Refer to Physician.

CHIEF COMPLAINTS:

- 1) Hypertension:
- 2) IHD
- 3) Arrhythmia
- 4) Diabetes Mellitus
- 5) Tuberculosis
- 6) Asthama
- 7) Pulmonary Disease
- 8) Thyroid/ Endocrine disorders
- 9) Nervous disorders
- 10) GI system
- 11) Genital urinary disorder
- 12) Rheumatic joint diseases or symptoms
- 13) Blood disease or disorder
- 14) Cancer/lump growth/cyst
- 15) Congenital disease
- 16) Surgeries

PERSONAL HISTORY:

1) Alcohol

occanional.

NIL

Mixed.

2) Smoking

3) Diet
4) Medication Thyponosm 75 mcg

pic

Dr. D.G. HATALKAR M.D. (Ob.Gy) 2.No. 61067



E

R

Name

CID

: MR PRADEEP KUMAR VERMA

Age / Sex

:37 Years/Male

: 393866606

Ref. Dr

Reg. Date

: 08-Mar-2025

Reg. Location

: Kalina, Santacruz East Main Centre

Reported

: 08-Mar-2025 / 12:25

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

-----End of Report-----

Dr R K Bhandari

RIS De ans

M D, DMRE

MMC REG NO. 34078



R

Е

P

CID

: 393866606

R

Name

: MR PRADEEP KUMAR VERMA

Т

Age / Sex

: 37 Years/Male

Ref. Dr

: self

Reg. Date

: 08-Mar-2025

Reg. Location

: Kalina, Santacruz East Main Centre

Reported

: 08-Mar-2025 / 15:27

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (14.5 cm), shape and smooth margins. It shows normal parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein and CBD appears normal.

GALL BLADDER:

The gall bladder is physiologically distended and appears normal. No evidence of gall stones or mass lesions seen

PANCREAS:

The pancreas is well visualised and appears normal. No evidence of solid or cystic mass lesion.

KIDNEYS:

Both the kidneys are normal in size shape and echotexture.

No evidence of any calculus, hydronephrosis or mass lesion seen.

Right kidney measures 10.1 x 4.4 cm. Left kidney measures 11.2 x 5.1 cm.

SPLEEN:

The spleen is normal in size and echotexture. No evidence of focal lesion is noted.

There is no evidence of any lymphadenopathy or ascites.

URINARY BLADDER:

The urinary bladder is well distended and reveal no intraluminal abnormality..

PROSTATE:

The prostate is normal in size 4.5 x 2.9 x 3.2 cm and volume is 22 cc.

IMPRESSION:

No significant abnormality is seen.

-----End of Report-----

DR MAHIMA SETHI (MBBS, MD RADIOLOGY) REG NO . 2018/12/6157