SUBURBAN DIAGNOSTICS - MALAD WEST

Patient Name: SONAL ROHAN CHALKE
Patient ID: 2426523247
Date and Time: 21st Sep 24 10:06 AM

I aVR V1 V4
II aVL V2 V5
III aVF V3 V6
II

25.0 mm/s 10.0 mm/mV

Copyright 2014-2024 Tricog Health, All Rights Reserved.
tricog

Age **33** years **NA** months **NA** days

Gender **Female**

Heart Rate **76bpm**

Patient Vitals

BP: 110/70 mmHg
Weight: 101 kg
Height: 172 cm
Pulse: NA
Spo2: NA
Resp: NA
Others:

Measurements

QRSD: 76ms
QT: 390ms
QTcB: 438ms
PR: 176ms
P-R-T: 69° 75° 20°

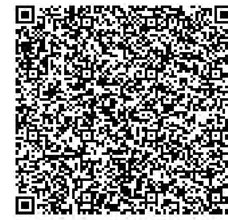
Sinus Rhythm , T wave inversions noted in inferior lateral leads Adv Clinical Correlation. Please correlate clinically.

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.

SUBURBAN DIAGNOSTICS
PRECISE TESTING • HEALTHIER LIVING


Authenticity Check
Use a QR Code Scanner Application To Scan the Code

R E P O R T

CID	: 2426523247		
Name	: MRS.SONAL ROHAN CHALKE		
Age / Gender	: 33 Years / Female		
Consulting Dr.	: -	**Collected**	: 21-Sep-2024 / 09:08
Reg. Location	: Malad West (Main Centre)	**Reported**	: 21-Sep-2024 / 13:41

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

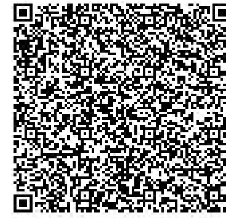
CBC (Complete Blood Count), Blood

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
RBC PARAMETERS			
Haemoglobin	**11.4**	12.0-15.0 g/dL	Spectrophotometric
RBC	4.21	3.8-4.8 mil/cmm	Elect. Impedance
PCV	**35.0**	36-46 %	Calculated
MCV	83.0	80-100 fl	Measured
MCH	27.0	27-32 pg	Calculated
MCHC	32.5	31.5-34.5 g/dL	Calculated
RDW	13.7	11.6-14.0 %	Calculated
WBC PARAMETERS			
WBC Total Count	6110	4000-10000 /cmm	Elect. Impedance
WBC DIFFERENTIAL AND ABSOLUTE COUNTS			
Lymphocytes	33.7	20-40 %	
Absolute Lymphocytes	2060.0	1000-3000 /cmm	Calculated
Monocytes	6.0	2-10 %	
Absolute Monocytes	360.0	200-1000 /cmm	Calculated
Neutrophils	56.7	40-80 %	
Absolute Neutrophils	3470.0	2000-7000 /cmm	Calculated
Eosinophils	3.4	1-6 %	
Absolute Eosinophils	210.0	20-500 /cmm	Calculated
Basophils	0.2	0.1-2 %	
Absolute Basophils	**10.0**	20-100 /cmm	Calculated
Immature Leukocytes	-		

WBC Differential Count by Absorbance & Impedance method/Microscopy.

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PLATELET PARAMETERS			
Platelet Count	255000	150000-400000 /cmm	Elect. Impedance
MPV	9.1	6-11 fl	Measured
PDW	14.7	11-18 %	Calculated
RBC MORPHOLOGY			
Hypochromia	-		
Microcytosis	-		

REGD. OFFICE: Suburban Diagnostics (India) Pvt. Ltd., Aston, 2nd Floor, Sundervan Complex, Above Mercedes Showroom, Andheri West, Mumbai - 400053.
CENTRAL REFERENCE LABORATORY: Shop No. 9, 101 to 105, Skyline Wealth Space Building, Near Dmart, Premier Road, Vidyavihar (W), Mumbai - 400086.
HEALTHLINE: 022-6170-0000 | E-MAIL: customerservice@suburbandiagnostics.com | WEBSITE: www.suburbandiagnostics.com
Corporate Identity Number (CIN): U85110MH2002PTC136144



CID	: 2426523247
Name	: MRS.SONAL ROHAN CHALKE
Age / Gender	: 33 Years / Female
Consulting Dr.	: -
Reg. Location	: Malad West (Main Centre)
Collected	: 21-Sep-2024 / 09:08
Reported	: 21-Sep-2024 / 12:20

Macrocytosis	-
Anisocytosis	-
Poikilocytosis	-
Polychromasia	-
Target Cells	-
Basophilic Stippling	-
Normoblasts	-
Others	Normocytic,Normochromic
WBC MORPHOLOGY	-
PLATELET MORPHOLOGY	-
COMMENT	-

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR	18	2-20 mm at 1 hr.	Sedimentation

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:

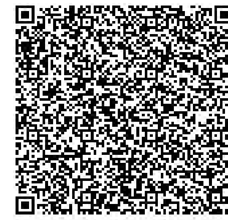
- Pack Insert
- Brigden ML. Clinical utility of the erythrocyte sedimentation rate. American family physician. 1999 Oct 1;60(5):1443-50.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West

*** End Of Report ***

Dr.JYOT THAKKER
M.D. (PATH), DPB
Pathologist & AVP(Medical Services)

REGD. OFFICE: Suburban Diagnostics (India) Pvt. Ltd., Aston, 2nd Floor, Sundervan Complex, Above Mercedes Showroom, Andheri West, Mumbai - 400053.
CENTRAL REFERENCE LABORATORY: Shop No. 9, 101 to 105, Skyline Wealth Space Building, Near Dmart, Premier Road, Vidyavihar (W), Mumbai - 400086.
HEALTHLINE: 022-6170-0000 | E-MAIL: customerservice@suburbandiagnostics.com | WEBSITE: www.suburbandiagnostics.com
Corporate Identity Number (CIN): U85110MH2002PTC136144

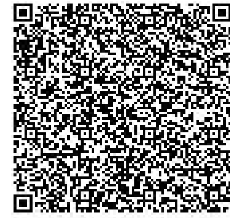

Authenticity Check
Use a QR Code Scanner Application To Scan the Code

REPORT

CID	: 2426523247
Name	: MRS.SONAL ROHAN CHALKE
Age / Gender	: 33 Years / Female
Consulting Dr.	: -
Reg. Location	: Malad West (Main Centre)
Collected	: 21-Sep-2024 / 09:08
Reported	: 21-Sep-2024 / 13:54

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma Fasting	89.4	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP	115.1	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.94	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.15	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.79	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.4	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.5	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.9	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.6	1 - 2	Calculated
SGOT (AST), Serum	15.2	5-32 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	14.0	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	11.8	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	69.0	35-105 U/L	Colorimetric
BLOOD UREA, Serum	18.4	12.8-42.8 mg/dl	Kinetic
BUN, Serum	8.6	6-20 mg/dl	Calculated
CREATININE, Serum	0.63	0.51-0.95 mg/dl	Enzymatic



CID	: 2426523247		
Name	: MRS.SONAL ROHAN CHALKE		
Age / Gender	: 33 Years / Female		
Consulting Dr.	: -	**Collected**	: 21-Sep-2024 / 09:08
Reg. Location	: Malad West (Main Centre)	**Reported**	: 21-Sep-2024 / 12:38

eGFR, Serum	120	(ml/min/1.73sqm) 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	Calculated

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

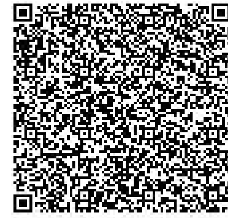
URIC ACID, Serum	4.0	2.4-5.7 mg/dl	Enzymatic

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West

*** End Of Report ***

Dr.JYOT THAKKER
M.D. (PATH), DPB
Pathologist and AVP(Medical Services)

REGD. OFFICE: Suburban Diagnostics (India) Pvt. Ltd., Aston, 2nd Floor, Sundervan Complex, Above Mercedes Showroom, Andheri West, Mumbai - 400053.
CENTRAL REFERENCE LABORATORY: Shop No. 9, 101 to 105, Skyline Wealth Space Building, Near Dmart, Premier Road, Vidyavihar (W), Mumbai - 400086.
HEALTHLINE: 022-6170-0000 | E-MAIL: customerservice@suburbandiagnostics.com | WEBSITE: www.suburbandiagnostics.com
Corporate Identity Number (CIN): U85110MH2002PTC136144



CID	: 2426523247
Name	: MRS.SONAL ROHAN CHALKE
Age / Gender	: 33 Years / Female
Consulting Dr.	: -
Reg. Location	: Malad West (Main Centre)
Collected	: 21-Sep-2024 / 09:08
Reported	: 21-Sep-2024 / 12:56

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.7	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	116.9	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, Splenectomy, 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.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West

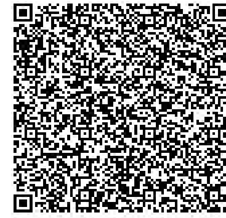
*** End Of Report ***

MC-2111

Dr.MILLU JAIN
M.D.(PATH)
Pathologist

REGD. OFFICE: Suburban Diagnostics (India) Pvt. Ltd., Aston, 2nd Floor, Sundervan Complex, Above Mercedes Showroom, Andheri West, Mumbai - 400053.
CENTRAL REFERENCE LABORATORY: Shop No. 9, 101 to 105, Skyline Wealth Space Building, Near Dmart, Premier Road, Vidyavihar (W), Mumbai - 400086.
HEALTHLINE: 022-6170-0000 | E-MAIL: customerservice@suburbandiagnostics.com | WEBSITE: www.suburbandiagnostics.com
Corporate Identity Number (CIN): U85110MH2002PTC136144

SUBURBAN DIAGNOSTICS
PRECISE TESTING • HEALTHIER LIVING



R E P O R T

CID	: 2426523247		
Name	: MRS.SONAL ROHAN CHALKE		
Age / Gender	: 33 Years / Female		
Consulting Dr.	: -	**Collected**	: 21-Sep-2024 / 09:08
Reg. Location	: Malad West (Main Centre)	**Reported**	: 21-Sep-2024 / 15:37

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
BLOOD GROUPING & Rh TYPING

PARAMETER	RESULTS
ABO GROUP	O
Rh TYPING	POSITIVE

NOTE: Test performed by automated column agglutination technology (CAT) which is more sensitive than conventional methods.

Note: This sample has been tested for Bombay group/Bombay phenotype/ OH using anti-H lectin.

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:

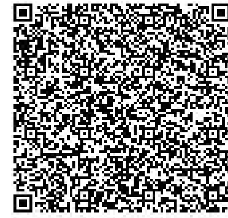
1. Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia
2. AABB technical manual

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West

*** End Of Report ***

Dr.JYOT THAKKER
M.D. (PATH), DPB
Pathologist and AVP(Medical Services)

REGD. OFFICE: Suburban Diagnostics (India) Pvt. Ltd., Aston, 2nd Floor, Sundervan Complex, Above Mercedes Showroom, Andheri West, Mumbai - 400053.
CENTRAL REFERENCE LABORATORY: Shop No. 9, 101 to 105, Skyline Wealth Space Building, Near Dmart, Premier Road, Vidyavihar (W), Mumbai - 400086.
HEALTHLINE: 022-6170-0000 | E-MAIL: customerservice@suburbandiagnostics.com | WEBSITE: www.suburbandiagnostics.com
Corporate Identity Number (CIN): U85110MH2002PTC136144



R E P O R T

CID	: 2426523247			
Name	: MRS.SONAL ROHAN CHALKE			
Age / Gender	: 33 Years / Female			
Consulting Dr.	: -		Collected	: 21-Sep-2024 / 09:08
Reg. Location	: Malad West (Main Centre)		Reported	: 21-Sep-2024 / 13:00

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

LIPID PROFILE

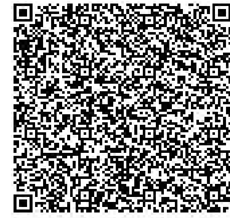
PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	**201.3**	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	122.0	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	GPO-POD
HDL CHOLESTEROL, Serum	41.2	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	**160.1**	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	**136.0**	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	24.1	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	**4.9**	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	3.3	0-3.5 Ratio	Calculated

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West

*** End Of Report ***

Dr.MILLU JAIN
M.D.(PATH)
Pathologist

REGD. OFFICE: Suburban Diagnostics (India) Pvt. Ltd., Aston, 2nd Floor, Sundervan Complex, Above Mercedes Showroom, Andheri West, Mumbai - 400053.
CENTRAL REFERENCE LABORATORY: Shop No. 9, 101 to 105, Skyline Wealth Space Building, Near Dmart, Premier Road, Vidyavihar (W), Mumbai - 400086.
HEALTHLINE: 022-6170-0000 | E-MAIL: customerservice@suburbandiagnostics.com | WEBSITE: www.suburbandiagnostics.com
Corporate Identity Number (CIN): U85110MH2002PTC136144



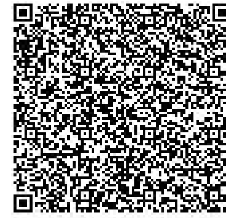
R E P O R T

CID	: 2426523247			
Name	: MRS.SONAL ROHAN CHALKE			
Age / Gender	: 33 Years / Female			
Consulting Dr.	: -		**Collected**	: 21-Sep-2024 / 09:08
Reg. Location	: Malad West (Main Centre)		**Reported**	: 21-Sep-2024 / 12:38

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
THYROID FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Free T3, Serum	4.5	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	15.0	11.5-22.7 pmol/L First Trimester:9.0-24.7 Second Trimester:6.4-20.59 Third Trimester:6.4-20.59	ECLIA
sensitiveTSH, Serum	3.59	0.35-5.5 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0 microU/ml	ECLIA

REGD. OFFICE: Suburban Diagnostics (India) Pvt. Ltd., Aston, 2nd Floor, Sundervan Complex, Above Mercedes Showroom, Andheri West, Mumbai - 400053.
CENTRAL REFERENCE LABORATORY: Shop No. 9, 101 to 105, Skyline Wealth Space Building, Near Dmart, Premier Road, Vidyavihar (W), Mumbai - 400086.
HEALTHLINE: 022-6170-0000 | E-MAIL: customerservice@suburbandiagnostics.com | WEBSITE: www.suburbandiagnostics.com
Corporate Identity Number (CIN): U85110MH2002PTC136144



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 microIU/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 non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine 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 Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

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)

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West

*** End Of Report ***

Dr.JYOT THAKKER
M.D. (PATH), DPB
Pathologist and AVP(Medical Services)

REGD. OFFICE: Suburban Diagnostics (India) Pvt. Ltd., Aston, 2nd Floor, Sundervan Complex, Above Mercedes Showroom, Andheri West, Mumbai - 400053.
CENTRAL REFERENCE LABORATORY: Shop No. 9, 101 to 105, Skyline Wealth Space Building, Near Dmart, Premier Road, Vidyavihar (W), Mumbai - 400086.
HEALTHLINE: 022-6170-0000 | E-MAIL: customerservice@suburbandiagnostics.com | WEBSITE: www.suburbandiagnostics.com
Corporate Identity Number (CIN): U85110MH2002PTC136144

SUBURBAN DIAGNOSTICS
PRECISE TESTING · HEALTHIER LIVING

CID# : 2426523247
Name : MRS.SONAL ROHAN CHALKE
Age / Gender : 33 Years/Female
Consulting Dr. :
Reg.Location : Malad West (Main Centre)
Collected : 21-Sep-2024 / 08:56
Reported : 21-Sep-2024 / 15:53

REPORT

PHYSICAL EXAMINATION REPORT

History and Complaints:
Nil

EXAMINATION FINDINGS:

Height (cms):	172	**Weight (kg):**	101
Temp (0c):	Afebrile	**Skin:**	Normal
Blood Pressure (mm/hg):	110/70	**Nails:**	Normal
Pulse:	64/min	**Lymph Node:**	Not Palpable

Systems

Cardiovascular: Normal
Respiratory: Normal
Genitourinary: Normal
GI System: Normal
CNS: Normal

IMPRESSION: Mild dyslipidemia.

ADVICE: Lifestyle modification.
Gynaec opinion c̄ USG report.

CID# : 2426523247
Name : MRS.SONAL ROHAN CHALKE
Age / Gender : 33 Years/Female
Consulting Dr. :
Reg.Location : Malad West (Main Centre)

Collected : 21-Sep-2024 / 08:56
Reported : 21-Sep-2024 / 15:53

CHIEF COMPLAINTS:

1)	**Hypertension:**	No
2)	**IHD**	No
3)	**Arrhythmia**	No
4)	**Diabetes Mellitus**	No
5)	**Tuberculosis**	No
6)	**Asthama**	No
7)	**Pulmonary Disease**	No
8)	**Thyroid/ Endocrine disorders**	No
9)	**Nervous disorders**	No
10)	**GI system**	No
11)	**Genital urinary disorder**	No
12)	**Rheumatic joint diseases or symptoms**	No
13)	**Blood disease or disorder**	No
14)	**Cancer/lump growth/cyst**	No
15)	**Congenital disease**	No
16)	**Surgeries**	No
17)	**Musculoskeletal System**	No

PERSONAL HISTORY:

1)	**Alcohol**	No
2)	**Smoking**	No
3)	**Diet**	Non-Veg
4)	**Medication**	No

***** End Of Report *****

Sonal P.

SUBURBAN DIAGNOSTICS
PRECISE TESTING · HEALTHIER LIVING

REPORT

Date:- 21/09/24
Name:- Sonal. Chalke

CID: 242652324
Sex / Age: /

EYE CHECK UP

Chief complaints:

Systemic Diseases:

Past history:

Unaided Vision:

Aided Vision: DV-RE- 6/6 LE- 6/6 NV- RE N/6 LE- N/6

Refraction:

	(Right Eye)				(Left Eye)			
	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	—	—	—		—	—	—	—
Near		—	—	—		—	—	—

Colour Vision: Normal / Abnormal (Normal circled)

Remark:

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD. 104, Bhoomi Castle, ... Sports Club, Link Road, Malad (W), Mumbai - 400 064.

SUBURBAN DIAGNOSTICS
PRECISE TESTING · HEALTHIER LIVING

R E P O R T

PATIENT NAME	: MRS.SONAL CHALKE	AGE : 33YRS
CID NO	: 2426523247	SEX : FEMALE
REF DR NAME	: ----------	DATE : 21/09/2024

2D-ECHOCARDIOGRAPHY REPORT

INDICATION: Cardiac Evaluation

SUMMARY: Normal LV and RV systolic function. EF= 60 %
No gross regional wall motion abnormality seen.
E/A 1.25, Intact septae.
No obvious pulmonary hypertension.
No pericardial effusion.
No LA/LV/LAA clot seen.

CHAMBERS:

LV: Normal size and thickness
Normal LV systolic function, EF =60 %
No regional wall motion abnormality seen.
No clot/ thrombus

RV: Normal size and thickness
Normal RV systolic function
No clot/thrombus

REGD. OFFICE: Dr. Lal PathLabs Ltd., Block E, Sector-18, Rohini, New Delhi - 110085 | CIN No.: L74899DL1995PLC065388

LA: Normal size
No clot / thrombus

RA: Normal size
No clot / thrombus

VALVES:

MITRAL : Thin and mobile
No stenosis / regurgitation seen.

AORTIC:
No stenosis / regurgitation seen.
Normal aortic root size

TRICUSPID: Thin and mobile
No stenosis.
No regurgitation.
No pulmonary hypertension seen.

PULMONARY: Thin and mobile.
No stenosis / regurgitation.
Normal sized pulmonary artery and branches.

SEPTAE: IAS / IVS are Intact.

No e/o coarctation of aorta.
No e/o LA/LV/LAA clot / thrombus.
No pericardial effusion seen.

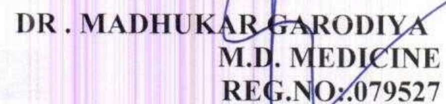
REGD. OFFICE: Dr. Lal PathLabs Ltd., Block E, Sector-18, Rohini, New Delhi - 110085 | CIN No.: L74899DL1995PLC065388

SUBURBAN DIAGNOSTICS
PRECISE TESTING · HEALTHIER LIVING

REPORT

M-MODE STUDY	Value	Unit	DOPPLER STUDY	Value	Unit
LVIDd	4.06	cm	**Mitral Valve**		
LVIDs	2.91	cm	Mitral Valve E velocity	0.99	m/s
IVSd	0.82	cm	Mitral Valve A velocity	0.79	m/s
LVPWd	0.93	cm	E/A	1.25	
			Mitral Valve DT	-	ms
MV M Mode	N		E/e'	-	
DE amplitude	-				
EF SLOPE	-		**Aortic Valve**		
EPSS	-		V max	1.36	m/s
AV M Mode	N		Mean gradient	3.45	mmHg
AV opening	-	cm	Peak gradient	7.37	mmHg
			VTI	28.92	
2D study			**Tricuspid valve**		
RVOT	2.54	cm	Tr jet velocity	-	m/s
AO	1.99	cm	PASP	-	mmHg
LA	2.33	cm			
IVC	-	cm	TAPSE	-	
			LVEF	60	%

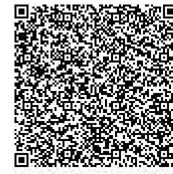
END OF REPORT



DR . MADHUKAR GARODIYA
M.D. MEDICINE
REG.NO:.079527

REGD. OFFICE: Dr. Lal PathLabs Ltd., Block E, Sector-18, Rohini, New Delhi - 110085 | CIN No.: L74899DL1995PLC065388

Authenticity Check



Use a QR Code Scanner Application To Scan the Code

REPORT

CID	: 2426523247		
Name	: Mrs Sonal Rohan Chalke		
Age / Sex	: 33 Years/Female		
Ref. Dr	:	**Reg. Date**	: 21-Sep-2024
Reg. Location	: Malad West Main Centre	**Reported**	: 21-Sep-2024/11:13

USG WHOLE ABDOMEN

LIVER:
The liver is normal in size, shape and smooth margins. **It shows diffuse bright parenchymal echo pattern suggest fatty liver.** 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. Multiple tiny mobile calculi (<3 mm in size) along with echogenic sludge are seen. Wall thickness appears normal.No evidence of 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 10.7 x 5.2 cm.
Left kidney measures 11.1 x 5.5 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.

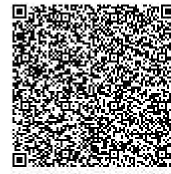
URINARY BLADDER:
The urinary bladder is well distended and reveal no intraluminal abnormality.

UTERUS:
The uterus is anteverted.It measures 7.3 x 5.2 x 3.9 cm in size.
There is 3.7 x 2.9 cm sized subserosal fibroid noted in posterior wall.
The endometrial thickness is 5.5 mm.

OVARIES:
Both the ovaries are well visualised and appears normal.
There is no evidence of any ovarian or adnexal mass seen.
Right ovary = 3.7 x 1.7 cm. Left ovary = 3.4 x 2.3 cm.

Click here to view images http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024092108572910

Authenticity Check



Use a QR Code Scanner Application To Scan the Code

R E P O R T

CID : 2426523247
Name : Mrs Sonal Rohan Chalke
Age / Sex : 33 Years/Female
Ref. Dr :
Reg. Location : Malad West Main Centre
Reg. Date : 21-Sep-2024
Reported : 21-Sep-2024/11:13

IMPRESSION:-

Fatty liver.
Cholelithiasis and
Uterine fibroid as described above.

Suggestion: Clinicopathological correlation.

Note : Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have inter-observer variations. Further / Follow-up imaging may be needed in some case for confirmation of findings. Patient has been explained in detail about the USG findings including its limitations and need for further imaging if clinically indicated. Please interpret accordingly. All the possible precaution have been taken under covid-19 pandemic.

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

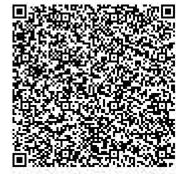
Dr. Sunil Bhutka
DMRD DNB
MMC REG NO:2011051101

Click here to view images http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024092108572910

SUBURBAN DIAGNOSTICS

PRECISE TESTING · HEALTHIER LIVING

Authenticity Check



Use a QR Code Scanner Application To Scan the Code

R E P O R T

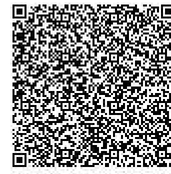
CID : 2426523247
Name : Mrs Sonal Rohan Chalke
Age / Sex : 33 Years/Female
Ref. Dr :
Reg. Location : Malad West Main Centre

Reg. Date : 21-Sep-2024
Reported : 21-Sep-2024/11:13

Click here to view images http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024092108572910

SUBURBAN DIAGNOSTICS
PRECISE TESTING · HEALTHIER LIVING

Authenticity Check



Use a QR Code Scanner Application To Scan the Code

R E P O R T

CID	: 2426523247		
Name	: Mrs Sonal Rohan Chalke		
Age / Sex	: 33 Years/Female		
Ref. Dr	:	**Reg. Date**	: 21-Sep-2024
Reg. Location	: Malad West Main Centre	**Reported**	: 21-Sep-2024/15:50

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.

Kindly correlate clinically.

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. X- ray is known to have inter-observer variations. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests further / follow-up imaging may be needed in some case for confirmation of findings. Please interpret accordingly.

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

Dr. Sunil Bhutka
DMRD DNB
MMC REG NO:2011051101

Click here to view images http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024092108572939

Click here to view images http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024092108572939