

Regd. Office:-
SUBURBAN DIAGNOSTICS INDIA PVT. LTD.
2nd Floor, Aston, Sundervan Complex,
Lokhandwala Road, Andheri (West),
Mumbai-400053.

DR. **MAVANE**
M.B.B.S. (GEN. MED.)
CONSIL
REGD. NO. 157714
MB D.CARD.
PHYSICIAN
PHYSIOLOGIST

भारत सरकार
Government of India



शरत सिंह
Arjun Singh
शरत तिथि / DOB: 15/09/1990
गण / Male

3536 8362 7485

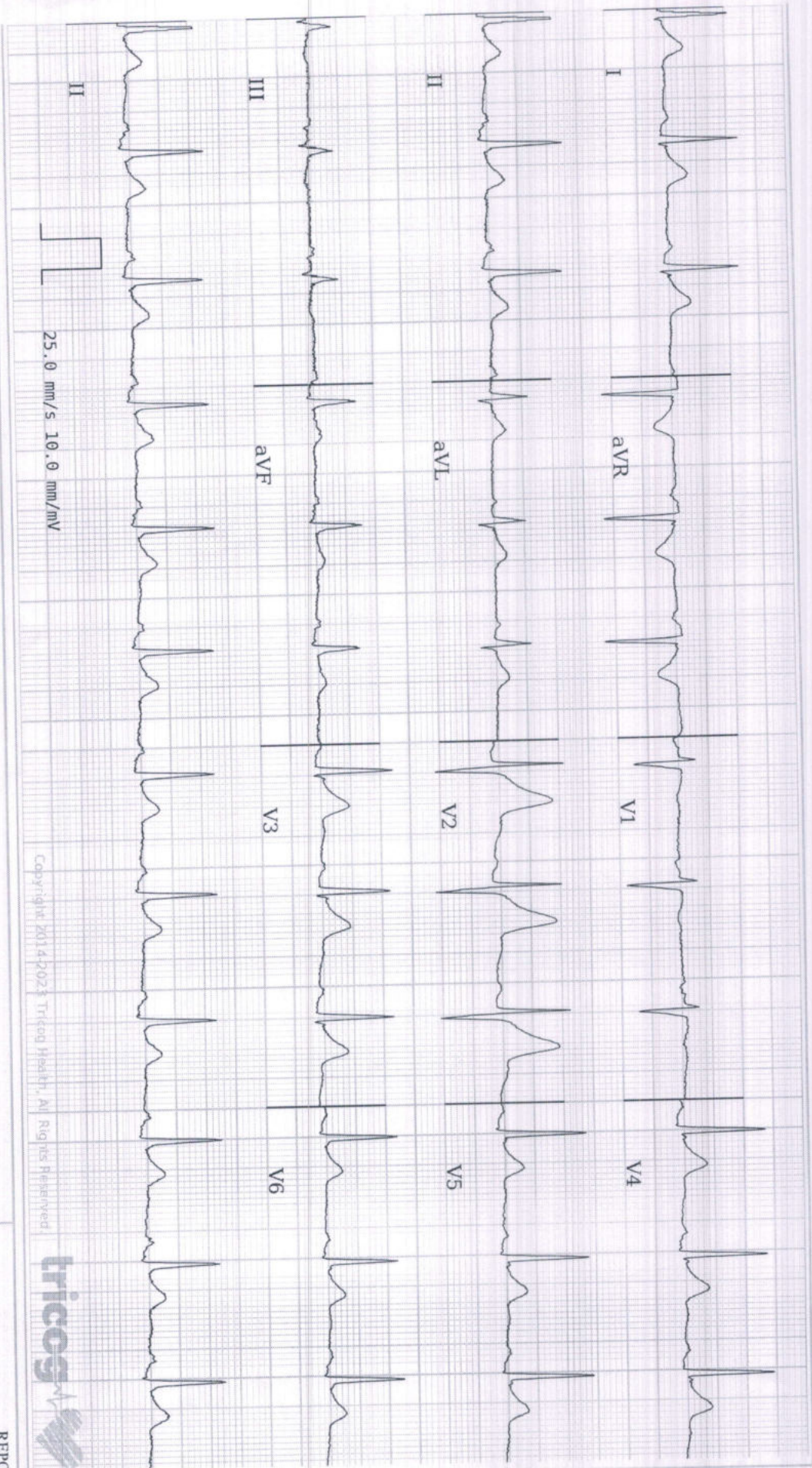


माझे आधार, माझी ओळख

Valid only for Suburban Health Checkup

Patient Name: ARJUN SINGH
Patient ID: 2301421217

SUBURBAN DIAGNOSTICS - BUKHVALI WEST I
Date and Time: 14th Jan 23 11:59 AM



Age 32 3 30
years months days

Gender **Male**

Heart Rate **73bpm**

Patient Vitals

BP: 130/90 mmHg
Weight: 84 kg
Height: 168 cm
Pulse: NA
SpO2: NA
Resp: NA
Others:

Measurements

QRSD: 98ms
QT: 366ms
QTc: 403ms
PR: 164ms
P-R-T: 37° 40° 28°

REPORTED BY

[Signature]

Dr Nitin Sonawane
M.B.B.S.AFLH, D.DIAB.D.CARD
Consultant Cardiologist
87714

ECG Within Normal Limits: Sinus Rhythm, Early repolarization. Please correlate clinically.

Suburban Diagnostics India Pvt. Ltd.
2nd Floor, Aston, Sundervan Complex,
Lokhandwala Road, Andheri (West),
Mumbai-400053.

DR. NITIN SONAWANE
M.B.B.S.AFLH, D.DIAB.D.CARD
CONSULTANT CARDIOLOGIST
REGD. NO. 37714

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 details are as entered by the clinician and not derived from the ECG.

CID# : 2301421217
Name : MR.ARJUN SINGH
Age / Gender : 32 Years/Male
Consulting Dr. :-
Reg.Location : Borivali West (Main Centre)

Collected : 14-Jan-2023 / 09:08
Reported : 14-Jan-2023 / 15:56

PHYSICAL EXAMINATION REPORT

History and Complaints:

Asymptomatic

EXAMINATION FINDINGS:

Height (cms): 168cm
Temp (0c): Afebrile
Blood Pressure (mm/hg): 74/min
Pulse: 130/90mmhg

Weight (kg): 84kg
Skin: Normal
Nails: Normal
Lymph Node: Not Palpable

Systems

Cardiovascular: S1S2 audible
Respiratory: AEBE
Genitourinary: NAD
GI System: Liver & Spleen Not palpable
CNS: NAD

IMPRESSION:

Sr TG T^r

ADVICE:

Physician Ref^y

CHIEF COMPLAINTS:

1)	Hypertension:	No
2)	IHD	No
3)	Arrhythmia	No
4)	Diabetes Mellitus	No
5)	Tuberculosis	No

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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
617)	Musculoskeletal System	No

PERSONAL HISTORY:

- | | |
|---------------|-------------------------------------|
| 1) Alcohol | No |
| 2) Smoking | No |
| 3) Diet | Mix |
| 4) Medication | Ayurvedic Rx For Gall Bladder Stone |

*** End Of Report ***

DR. NITIN SONAVANE
M.B.B.S.AFLH, D.DIAB, D.CARD.
CONSULTANT CARDIOLOGIST
REGD. NO. : 87714
Dr.NITIN SONAVANE
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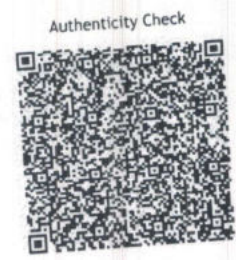
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Age / Gender : 32 Years / Male
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Reg. Location : Borivali West (Main Centre)

Collected : 14-Jan-2023 / 09:18
Reported : 14-Jan-2023 / 13:11

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
<u>RBC PARAMETERS</u>			
Haemoglobin	14.4	13.0-17.0 g/dL	Spectrophotometric
RBC	5.06	4.5-5.5 mil/cmm	Elect. Impedance
PCV	44.3	40-50 %	Measured
MCV	88	80-100 fl	Calculated
MCH	28.4	27-32 pg	Calculated
MCHC	32.4	31.5-34.5 g/dL	Calculated
RDW	14.7	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	6980	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	34.7	20-40 %	Calculated
Absolute Lymphocytes	2422.1	1000-3000 /cmm	Calculated
Monocytes	8.2	2-10 %	Calculated
Absolute Monocytes	572.4	200-1000 /cmm	Calculated
Neutrophils	55.0	40-80 %	Calculated
Absolute Neutrophils	3839.0	2000-7000 /cmm	Calculated
Eosinophils	1.9	1-6 %	Calculated
Absolute Eosinophils	132.6	20-500 /cmm	Calculated
Basophils	0.2	0.1-2 %	Calculated
Absolute Basophils	14.0	20-100 /cmm	Calculated
Immature Leukocytes	-	-	-
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	151000	150000-400000 /cmm	Elect. Impedance
MPV	14.4	6-11 fl	Calculated
PDW	38.2	11-18 %	Calculated



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: 14-Jan-2023 / 11:21

RBC MORPHOLOGY

Hypochromia -
Microcytosis -
Macrocytosis -
Anisocytosis -
Poikilocytosis -
Polychromasia -
Target Cells -
Basophilic Stippling -
Normoblasts -
Others - Normocytic, Normochromic

WBC MORPHOLOGY

PLATELET MORPHOLOGY Megaplatelets seen on smear

COMMENT

Specimen: EDTA Whole Blood

ESR, EDTA WB, EDTA WB-ESR 6 2-15 mm at 1 hr. Sedimentation

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***



Bmhasakar
Dr. KETAKI MHASKAR
M.D. (PATH)
Pathologist



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Reg. Location : Borivali West (Main Centre)

Collected
Reported

: 14-Jan-2023 / 09:18
: 14-Jan-2023 / 14:03

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	100.3	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	143.0	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.52	0.3-1.2 mg/dl	Vanadate oxidation
Kindly note change in Ref range and method w.e.f.11-07-2022			
BILIRUBIN (DIRECT), Serum	0.20	0-0.3 mg/dl	Vanadate oxidation
Kindly note change in Ref range and method w.e.f.11-07-2022			
BILIRUBIN (INDIRECT), Serum	0.32	<1.2 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.7	5.7-8.2 g/dL	Biuret
Kindly note change in Ref range and method w.e.f.11-07-2022			
ALBUMIN, Serum	4.5	3.2-4.8 g/dL	BCG
GLOBULIN, Serum	3.2	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.4	1 - 2	Calculated
SGOT (AST), Serum	22.9	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	43.6	10-49 U/L	Modified IFCC
Kindly note change in Ref range and method w.e.f.11-07-2022			
GAMMA GT, Serum	49.1	<73 U/L	Modified IFCC



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Reported : 14-Jan-2023 / 19:05

ALKALINE PHOSPHATASE, Serum	58.3	46-116 U/L	Modified IFCC
Kindly note change in Ref range and method w.e.f.11-07-2022			
BLOOD UREA, Serum	17.0	19.29-49.28 mg/dl	Calculated
Kindly note change in Ref range and method w.e.f.11-07-2022			
BUN, Serum	7.9	9.0-23.0 mg/dl	Urease with GLDH
Kindly note change in Ref range and method w.e.f.11-07-2022			
CREATININE, Serum	0.79	0.67-1.17 mg/dl	Enzymatic
eGFR, Serum	121	>60 ml/min/1.73sqm	Calculated
URIC ACID, Serum	5.9	3.7-9.2 mg/dl	Uricase/ Peroxidase
Kindly note change in Ref range and method w.e.f.11-07-2022			
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	
Urine Sugar (PP)	Absent	Absent	
Urine Ketones (PP)	Absent	Absent	

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Collected : 14-Jan-2023 / 09:18
Reported : 14-Jan-2023 / 12:01

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	6.0	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	125.5	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 Borivali Lab, Borivali West
*** End Of Report ***



Mhaskar
Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



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Name : MR. ARJUN SINGH
Age / Gender : 32 Years / Male
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Reg. Location : Borivali West (Main Centre)

Collected : 14-Jan-2023 / 09:19
Reported : 14-Jan-2023 / 15:24

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
EXAMINATION OF FAECES

PARAMETER

RESULTS

BIOLOGICAL REF RANGE

PHYSICAL EXAMINATION

Colour : Brown
Form and Consistency : Semi Solid
Mucus : Absent
Blood : Absent

Brown
Semi Solid
Absent
Absent

CHEMICAL EXAMINATION

Reaction (pH) : Acidic (5.0)
Occult Blood : Absent

-
Absent

MICROSCOPIC EXAMINATION

Protozoa : Absent
Flagellates : Absent
Ciliates : Absent
Parasites : Absent
Macrophages : Absent
Mucus Strands : Absent
Fat Globules : Absent
RBC/hpf : Absent
WBC/hpf : Absent
Yeast Cells : Absent
Undigested Particles : Present +
Concentration Method (for ova) : No ova detected
Reducing Substances : -

Absent
Absent
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Absent
Absent

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*** End Of Report ***



Bmhasakar
Dr. KETAKI MHASKAR
M.D. (PATH)
Pathologist



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Collected : 14-Jan-2023 / 09:18
Reported : 14-Jan-2023 / 14:16

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
URINE EXAMINATION REPORT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.015	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	30	-	-
CHEMICAL EXAMINATION			
Proteins	Absent	Absent	pH Indicator
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	Absent	Absent	Griess Test
MICROSCOPIC EXAMINATION			
Leukocytes(Pus cells)/hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	0-1		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	3-4	Less than 20/hpf	
Others	-		

Interpretation: The concentration values of Chemical analytes corresponding to the grading given in the report are as follows:

- Protein:(1+ -25 mg/dl, 2+ -75 mg/dl, 3+ - 150 mg/dl, 4+ - 500 mg/dl)
- Glucose:(1+ - 50 mg/dl, 2+ -100 mg/dl, 3+ -300 mg/dl,4+ -1000 mg/dl)
- Ketone:(1+ -5 mg/dl, 2+ -15 mg/dl, 3+ - 50 mg/dl, 4+ - 150 mg/dl)

Reference: Pack insert



B. Khaskar
Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



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*** End Of Report ***



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Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 14-Jan-2023 / 09:18
Reported : 14-Jan-2023 / 15:38

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

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.

References:

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 SDRL, Vidyavihar Lab
*** End Of Report ***



Dr. Leena Salunkhe
Dr. LEENA SALUNKHE
M.B.B.S, DPB (PATH)
Pathologist



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Reported : 14-Jan-2023 / 15:31

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	186.4	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	288.6	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	41.3	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Elimination/ Catalase
NON HDL CHOLESTEROL, Serum	145.1	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	134.5	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	Colorimetric
VLDL CHOLESTEROL, Serum	10.6	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.5	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 SDRL, Vidyavihar Lab
*** End Of Report ***



Dr.NAMRATA RAUL
M.D (Biochem)
Biochemist



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Collected : 14-Jan-2023 / 09:18
 Reported : 14-Jan-2023 / 14:03

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
THYROID FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	5.6	3.5-6.5 pmol/L	CLIA
Kindly note change in Ref range and method w.e.f.11-07-2022			
Free T4, Serum	13.6	11.5-22.7 pmol/L	CLIA
Kindly note change in Ref range and method w.e.f.11-07-2022			
sensitiveTSH, Serum	3.072	0.55-4.78 microIU/ml	CLIA
Kindly note change in Ref range and method w.e.f.11-07-2022			



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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 upto 15 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 transiently altered because 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)

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*** End Of Report ***



Anupa

Dr. ANUPA DIXIT
M.D.(PATH)
Consultant Pathologist & Lab Director

Date:- 14/1/2023

CID: 2301421217

Name:- Mr. Arjun Singh

Sex / Age: M / 32

EYE CHECK UP

Chief complaints:

/ Nil

Systemic Diseases:

Past history:

/ Nil

Unaided Vision:

Aided Vision:

Ru Lt

Refraction:

6/9. 6/9
N16 N16

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

Colour Vision: Normal / Abnormal

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Mumbai-400053.

Remark:

Normal

y



CID : 2301421217
Name : Mr ARJUN SINGH
Age / Sex : 32 Years/Male
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 14-Jan-2023
Reported : 14-Jan-2023 / 12:58

USG WHOLE ABDOMEN

Suboptimal evaluation due to excessive bowel gases.

LIVER: Liver is normal in size with mild generalized increase in parenchymal echotexture. There is no intra-hepatic biliary radical dilatation. No evidence of any focal lesion.

GALL BLADDER: Gall bladder is minimally distended with small soft calculi measuring 2.4 mm. No obvious wall thickening is noted.

PORTAL VEIN: Portal vein is normal (9.9 mm). **CBD:** CBD is normal (3.5 mm).

PANCREAS: Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification.

KIDNEYS: Right kidney measures 11.1 x 4.8 cm. Left kidney measures 11.1 x 5.6 cm. Both kidneys are normal in shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

SPLEEN: Spleen is normal in size, shape and echotexture. No focal lesion is seen.

URINARY BLADDER: Urinary bladder is distended and normal. Wall thickness is within normal limits.

PROSTATE: Prostate is normal in size and echotexture. Prostate measures 2.9 x 2.1 x 2.8 cm and prostatic weight is 10 gm. No evidence of any obvious focal lesion.

No free fluid or size significant lymphadenopathy is seen.

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023011409091330>



Use a QR Code Scanner
Application To Scan the Code

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Opinion:

- Grade I fatty infiltration of liver .
- Cholelithiasis without cholecystitis.

For clinical correlation and follow up.

Investigations have their limitations. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly.

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

This report is prepared and physically checked by DR SUDHANSHU SAXENA before dispatch.

DR.SUDHANSHU SAXENA
Consultant Radiologist
M.B.B.S DMRE (RadioDiagnosis)
RegNo .MMC 2016061376.

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023011409091330>



CID : 2301421217
Name : Mr ARJUN SINGH
Age / Sex : 32 Years/Male
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 14-Jan-2023
Reported : 14-Jan-2023 / 15:02

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-----

This report is prepared and physically checked by DR SUDHANSHU SAXENA before dispatch.

DR.SUDHANSHU SAXENA
Consultant Radiologist
M.B.B.S DMRE (RadioDiagnosis)
RegNo .MMC 2016061376.

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SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

Date: 14-01-2023 Time: 11:04

Name: ARJUN SINGH

Age: 32

Gender: M

Height: 168 cms

Weight: 84 Kg

ID: 2301421217

Clinical History: NIL

Medications: NIL

Test Details:

Protocol: Bruce

Predicted Max HR: 188

Target HR: 159

Exercise Time: 0:06:58

Achieved Max HR: 161 (86% of Predicted MHR)

Max BP: 160/90

Max BP x HR: 25760

Max Mets: 7.8

Test Termination Criteria: TEST COMPLETE

Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	Max ST Level mm	Max ST Slope mV/s
Supine	00:17	1	0	0	77	130/90	10010	-1.4 aVR	-1.8 II
Standing	00:29	1	0	0	88	130/90	11440	-1.6 aVR	-1.6 II
HyperVentilation	00:15	1	0	0	78	130/90	10140	1.3 V5	-1.6 II
PreTest	00:13	1	1.6	0	89	130/90	11570	-1.1 aVR	1.7 V2
Stage: 1	03:00	4.7	2.7	10	125	140/90	17500	-0.9 aVR	1.9 V2
Stage: 2	03:00	7	4	12	145	160/90	23200	-1.2 aVR	1.6 V2
Peak Exercise	00:58	7.8	5.5	14	161	160/90	25760	1.2 II	1.6 V2
Recovery1	01:00	1	0	0	112	160/90	17920	-0.6 aVR	1.8 V2
Recovery2	01:00	1	0	0	101	140/90	14140	0.9 II	1.9 V2

Interpretation

The Patient Exercised according to Bruce Protocol for 0:06:58 achieving a work level of 7.8 METS.
Resting Heart Rate, initially 77 bpm rose to a max. heart rate of 161bpm (86% of Predicted Maximum Heart Rate).
Resting Blood Pressure of 130/90 mmHg, rose to a maximum Blood Pressure of 160/90 mmHg
Good Effort tolerance Normal HR & BP Response
No Angina or Arrhythmias No Significant ST-T Change Noted During Exercise
Stress test Negative for Stress inducible ischaemia.

Regd. Office:-

SUBURBAN DIAGNOSTICS INDIA PVT. LTD.
2nd Floor, Aston, Sundervan Complex,
Lokhandwala Road, Andheri (West),
Mumbai-400053.

DR. NITIN SONAVANE
M.B.B.S.AFLH, D.DIAB, D.CARD
CONSULTANT-CARDIOLOGIST
REGD. NO. 1587714
Doctor: DR. NITIN SONAVANE

Ref. Doctor: ----

SCHILLER

The Art of Diagnostics

(Summary Report edited by User)
Spandan CS-20 Version:2.14.0





SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ARJUN SINGH

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 2301421217

Stage: Supine

Date: 14-01-2023

Speed: 0 km/h

Exec Time : 0:00:00

Slope: 0%

Stage Time: 00:17

THR: 159 bpm

HR: 77 bpm

BP: 130/90 mmHg

STLevel(mm) STSlope(mV/s)

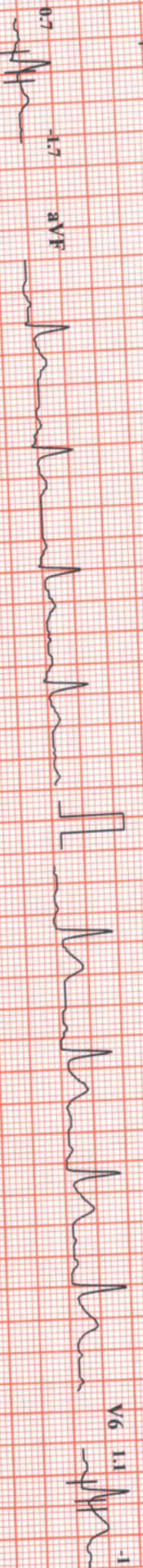
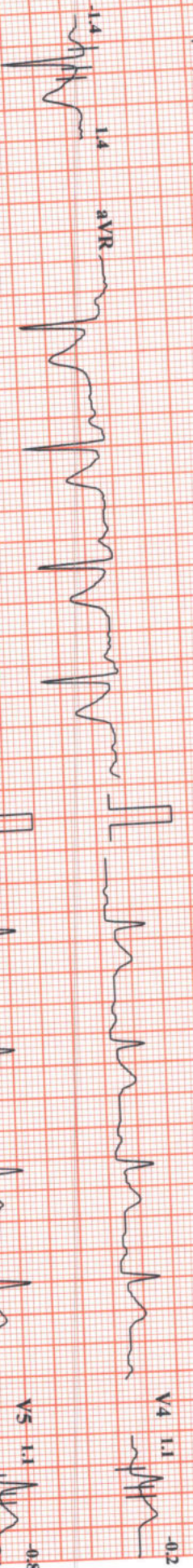
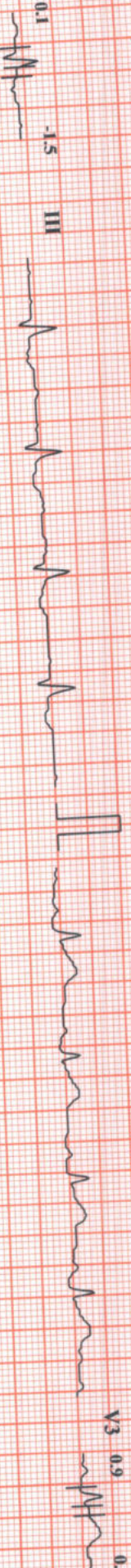
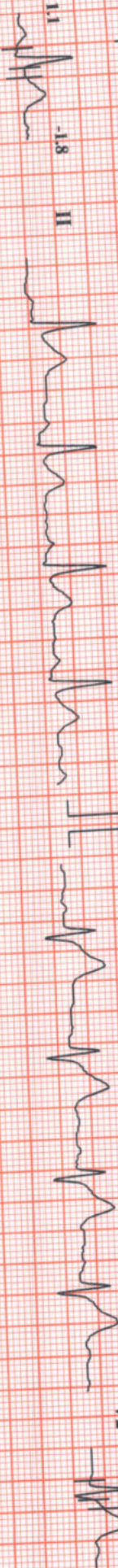


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Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO - R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

HR: 88 bpm

BP: 130/90 mmHg

STLevel(mm) STSlope(mV/s)

ARRUN SINGH

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 2301421217

Stage: Standing

Date: 14-01-2023

Speed: 0

Exec Time: 0:00:00

Slope: 0%

Stage Time: 00:29

THR: 159 bpm

V1 -0.2 0.7

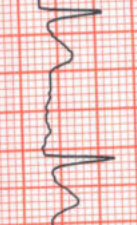
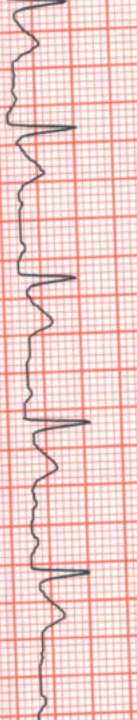
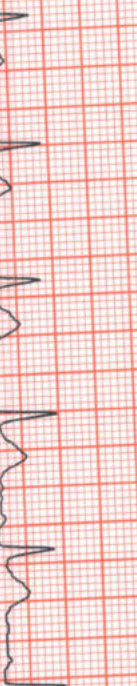
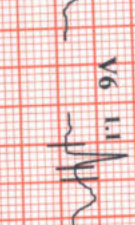
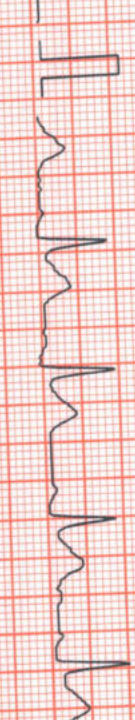
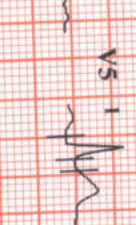
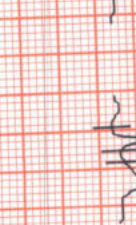
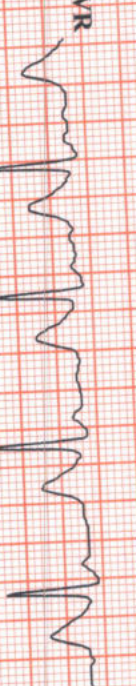
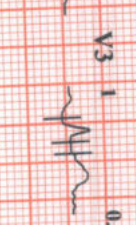
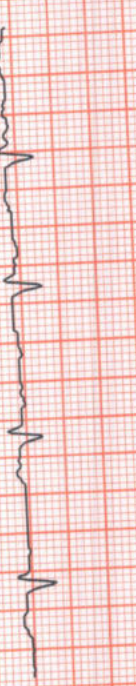
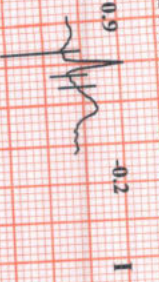


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Main Filter: ON

ISO-R -60 ms, J = R + 60 ms, Post J = J + 60 ms



SUBURBAN DIAGNOSTICS PVT. LTD. BORIVALI

ARRJUN SINGH

Bruce Protocol
STLevel(mm) STSlope(mV/s)

ID: 2301421217
Date: 14-01-2023
Stage: Hyper Ventilation
Speed: 0

Exec Time: 0:00:00
Slope: 0%
Stage Time: 00:15
TfR: 159 bpm

HR: 78 bpm

BP: 130/90 mmHg
STLevel(mm) STSlope(mV/s)

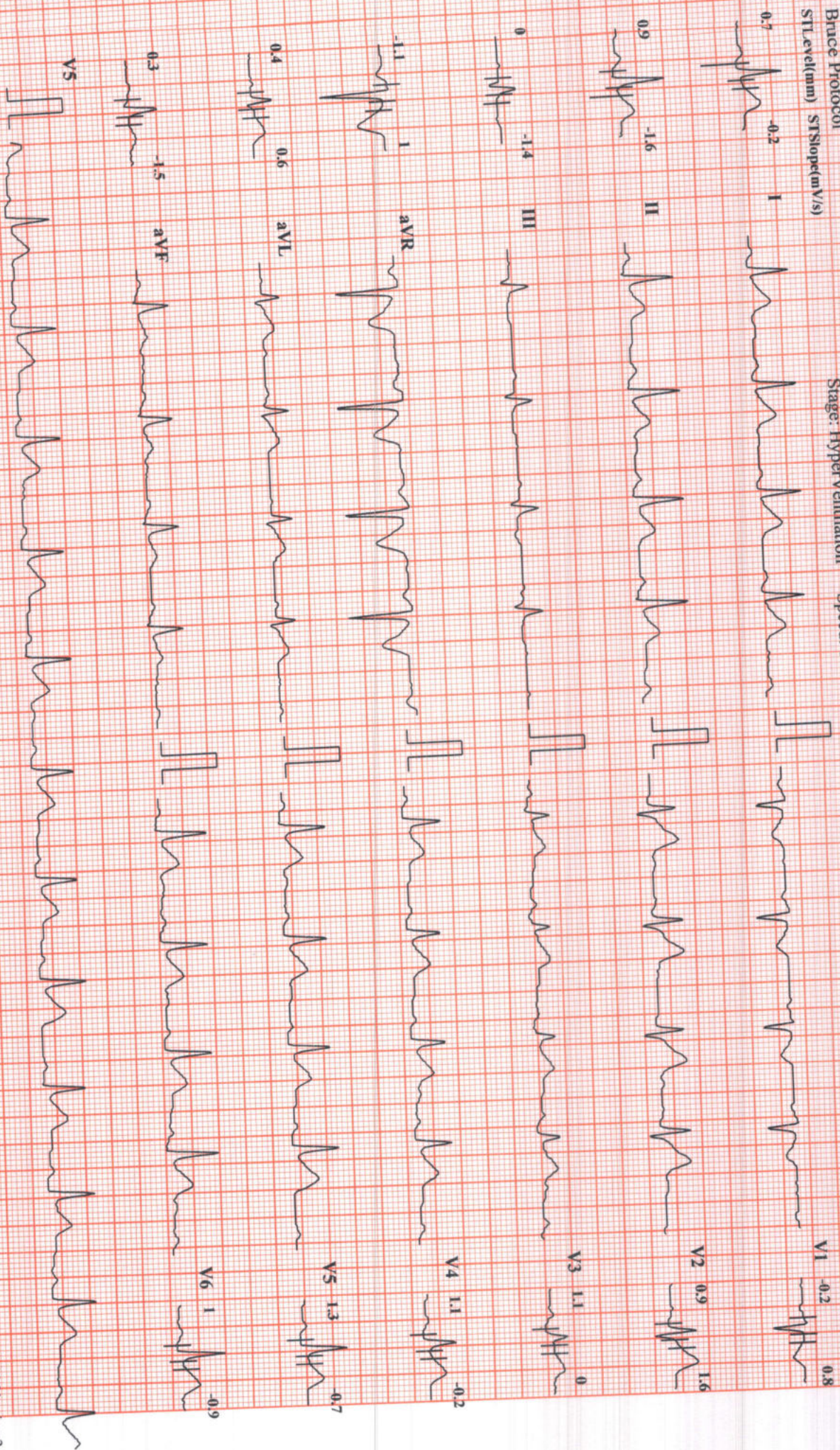


Chart Speed: 25 mm/sec
Amplitude: 10mm/mV
Filter: 35 Hz
Mains Filter: ON
ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

HR: 125 bpm

ARJUN SINGH

ID: 2301421217

Date: 14-01-2023

Exec Time: 0:03:00

Stage Time: 03:00

BP: 140/90 mmHg

Bruce Protocol

Stage: 1

Speed: 2.7 kmph

Slope: 10%

STLevel(mm) STSlope(mV/s)

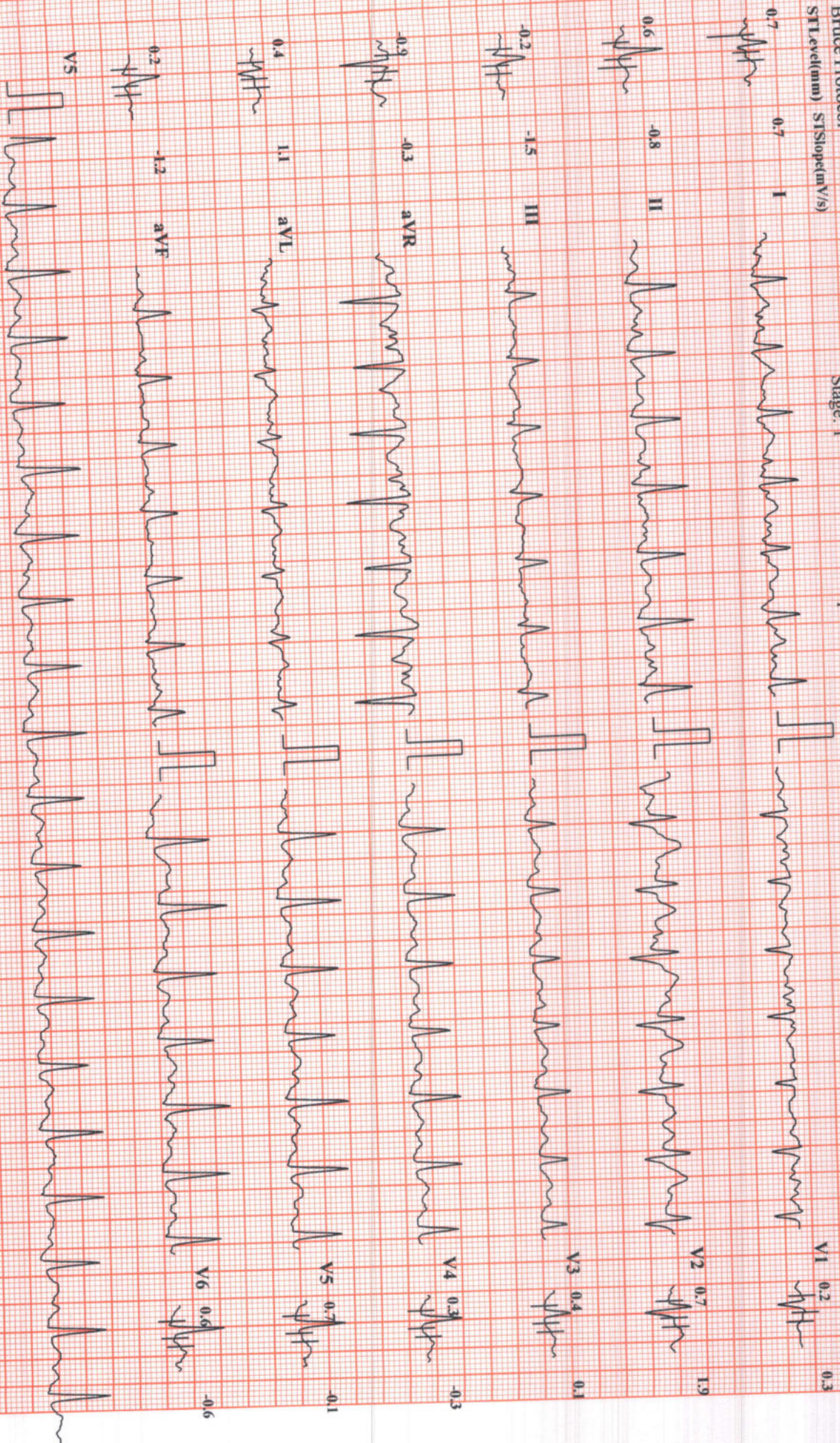


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Main Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ARJUN SINGH

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 2301421217
Stage: 2

Date: 14-01-2023
Speed: 4 kmph

Exec Time: 0:06:00
Slope: 12%

Stage Time: 03:00
THR: 159 bpm

HR: 145 bpm

BP: 160/90 mmHg
STLevel(mm) STSlope(mV/s)

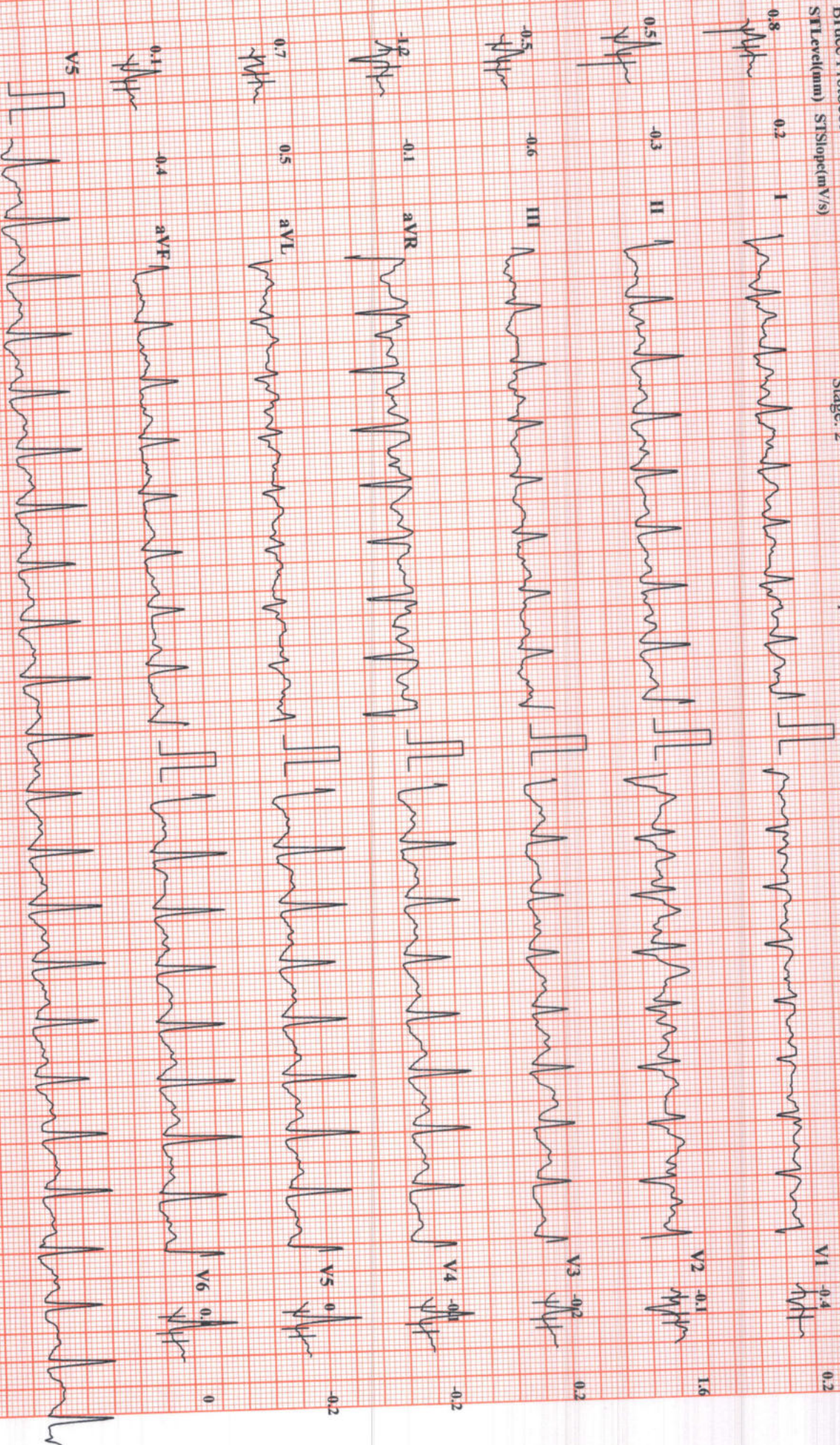


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ARJUN SINGH

Bruce Protocol
STLevel(mm) STSlope(mV/s)

ID: 2301421217
Date: 14-01-2023
Stage: 3 Peak Exercise
Speed: 5.5 kmph

Exec Time: 0:06:58
Slope: 14 %
Stage Time: 00:58
THR: 159 bpm

HR: 161 bpm
BP: 160/90 mmHg
STLevel(mm) STSlope(mV/s)

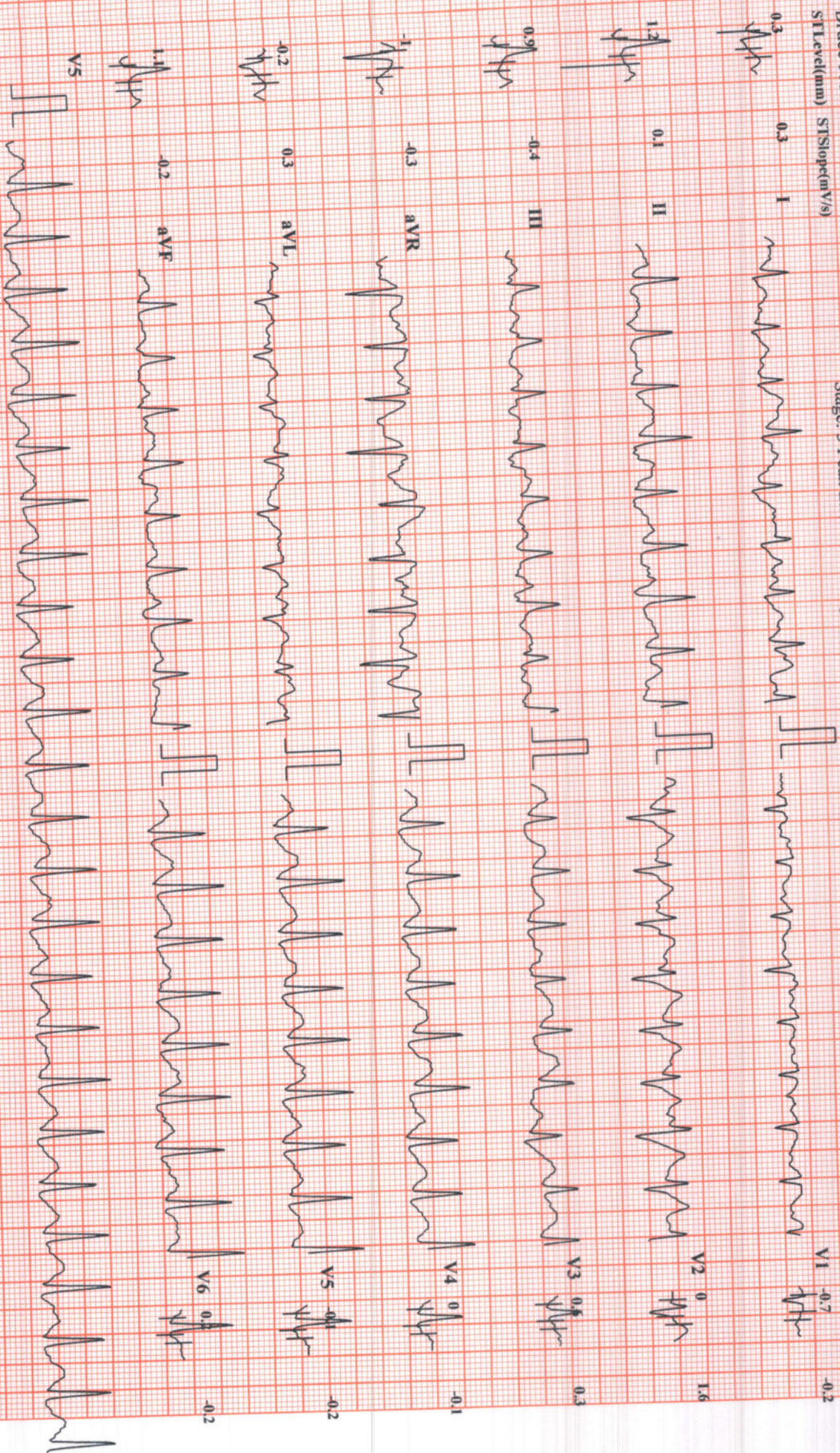


Chart Speed: 25 mm/sec
Amplitude: 10mm/mV
Filter: 35 Hz Mains Filter: ON
ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



SUBURBAN DIAGNOSTICS PVT. LTD. BORIVALI

ARJUN SINGH

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 2301421217
Stage: Recovery1

Date: 14-01-2023
Speed: 0 kmph

Exec Time: 00:00
Slope: 0%

Stage Time: 01:00
T.H.R: 159 bpm

HR: 112 bpm

BP: 160/90 mmHg
STLevel(mm) STSlope(mV/s)

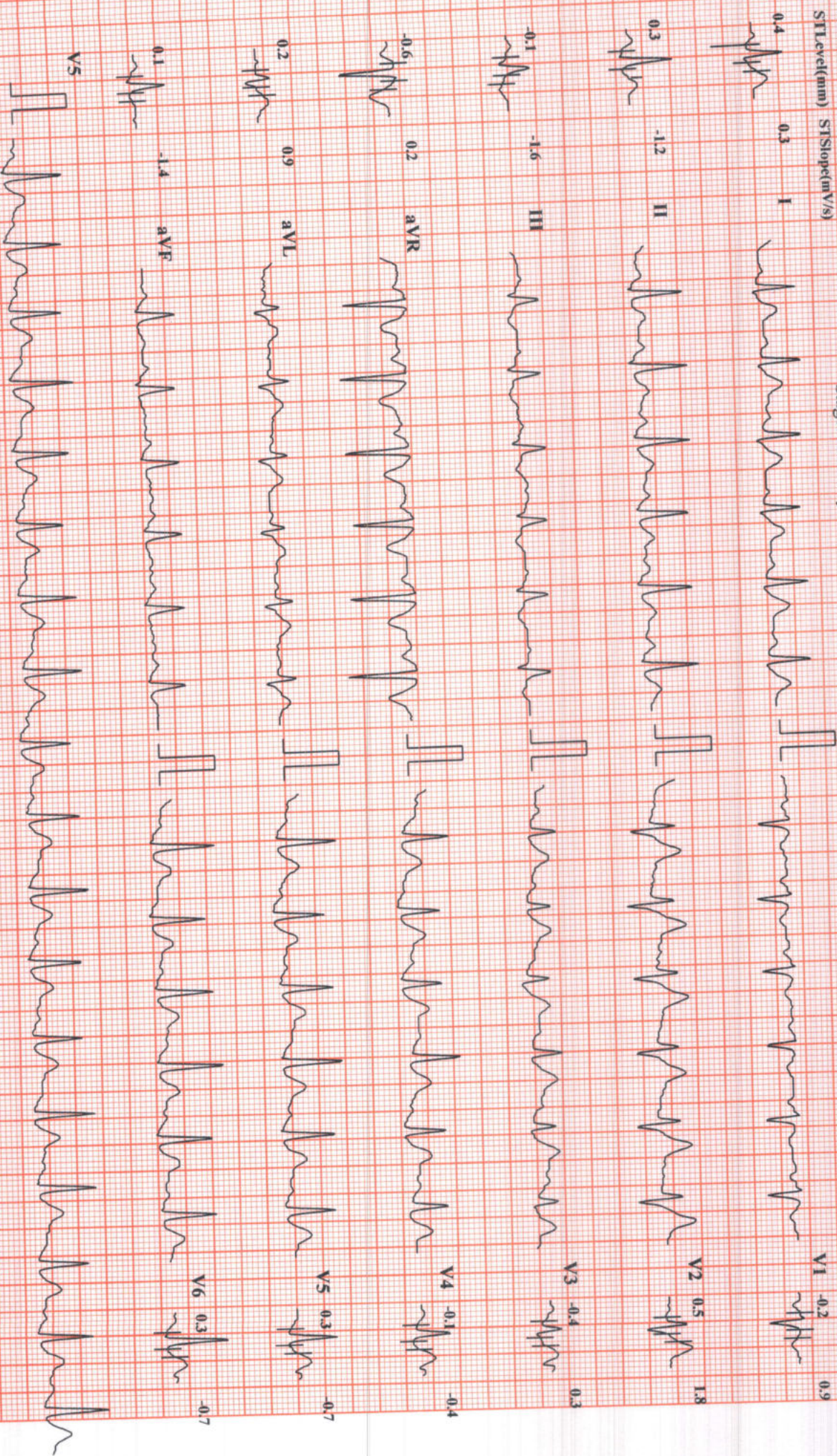


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



SUBURBAN DIAGNOSTICS PVT. LTD. BORIVALI

HR: 101 bpm

BP: 140/90 mmHg
STLevel(mm) STSlope(mV/s)

ARJUN SINGH

Bruce Protocol
STLevel(mm) STSlope(mV/s)

ID: 2301421217

Stage: Recovery2

Date: 14-01-2023

Speed: 0 kmph

Exec Time: 00:00

Slope: 0%

Stage Time: 01:00

THR: 159 bpm

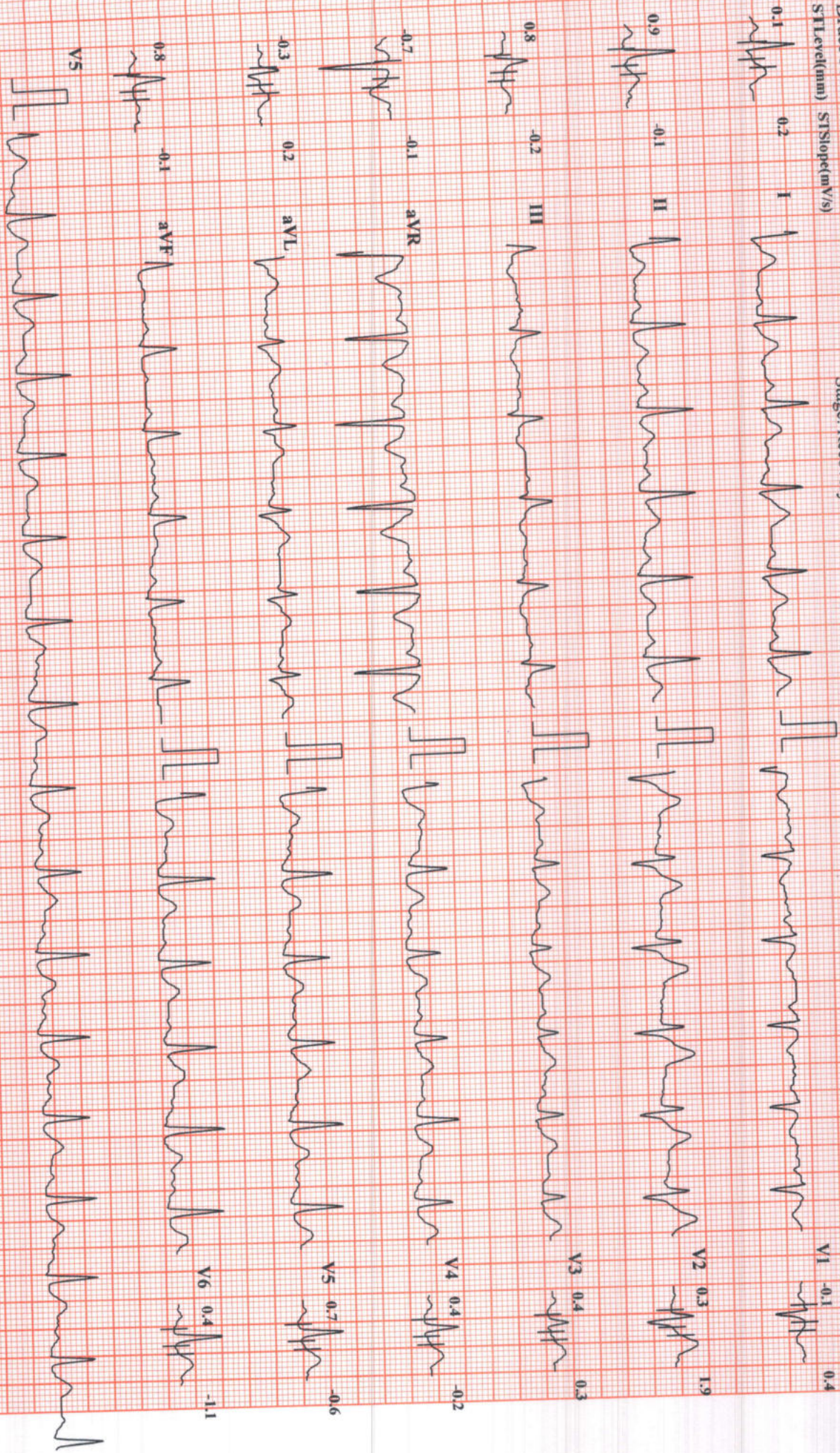


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ARJUN SINGH

Brace Protocol

STLevel(mm) STSlope(mV/s)

ID: 2301421217

Stage: Recovery3

Date: 14-01-2023

Speed: 0 kmph

Exec Time : 00:00

Slope: 0%

Stage Time: 00:25

THR: 159 bpm

HR: 93 bpm

BP: 130/90 mmHg

STLevel(mm) STSlope(mV/s)

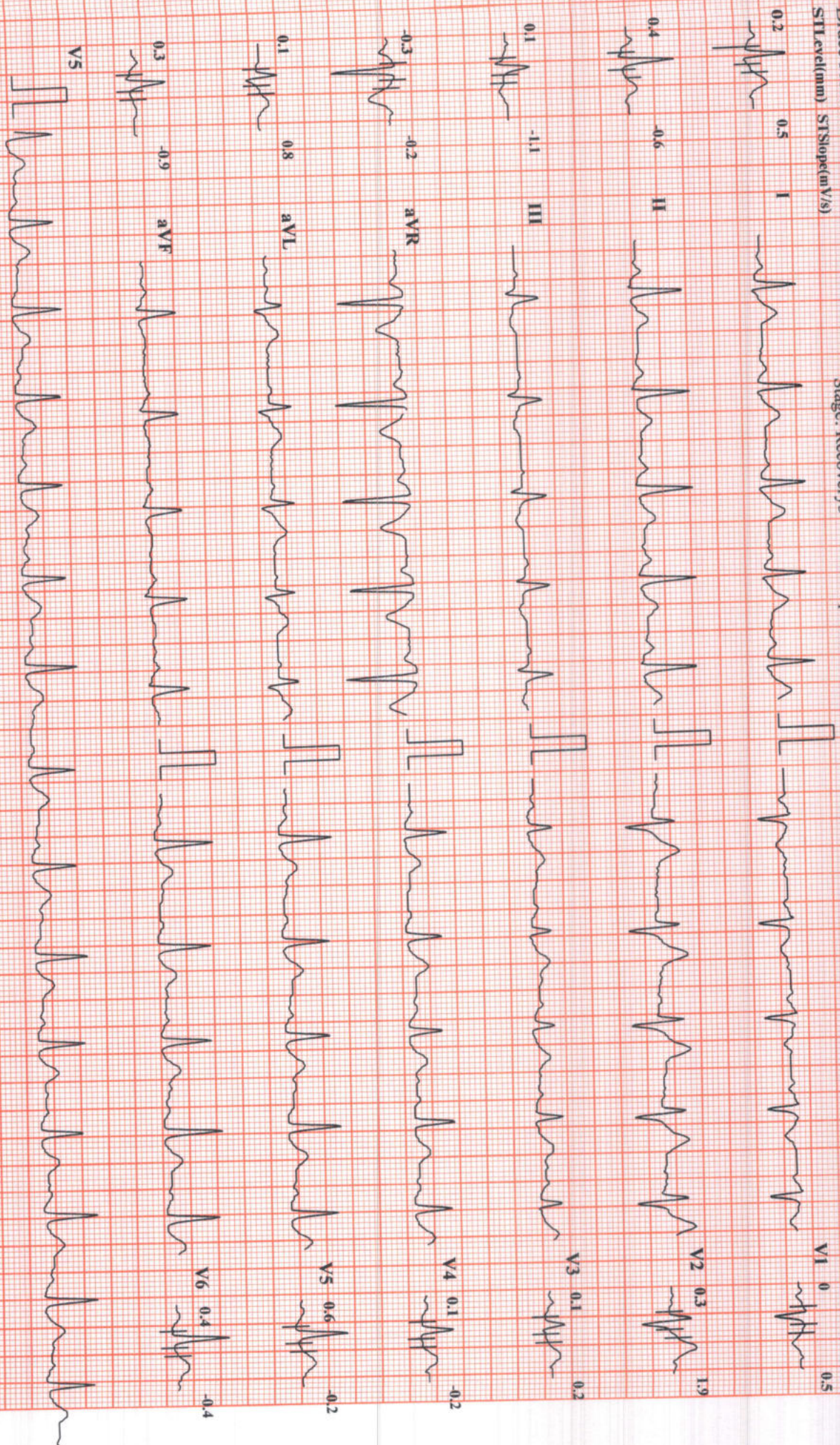


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms