

Name : Mrs . ASHWINI CHAVAN  
VID : 2310416851  
Ref By : Arcofemi Healthcare Limited

Reg Date : 14-Apr-2023 08:39  
Age/Gender : 39 Years  
Regn Centre : Borivali West (Main Centre)

**History and Complaints:**

**EXAMINATION FINDINGS:**

Height (cms):	161	Weight (kg):	68
Temp (0c):	Afebrile	Skin:	NAD
Blood Pressure (mm/hg):	120/80	Nails:	NAD
Pulse:	72/Per min	Lymph Node:	Not palpable

**Systems**

Cardiovascular: S1S2 -NORMAL  
Respiratory: CHEST CLEAR  
Genitourinary: NAD  
GI System: NAD  
CNS: NAD

**IMPRESSION:**

S TG ↑  
HDL ↓

physician ref<sup>n</sup>.

**ADVICE:**

**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 |

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**PERSONAL HISTORY:**

- |               |     |
|---------------|-----|
| 1) Alcohol    | NO  |
| 2) Smoking    | NO  |
| 3) Diet       | MIX |
| 4) Medication | NO  |

  
Dr.Nitin Sonavane  
PHYSICIAN

**DR. NITIN SONAVANE**  
M.B.B.S. (M.D.) IN GENERAL MEDICINE  
CONSULTANT PHYSICIAN  
REGD. NO. 67714

**Suburban Diagnostics (I) Pvt. Ltd.**  
301 & 302, 3rd Floor, Vini Elegance,  
Above Tanisq Jeweller, L. T. Road,  
Borivali (West), Mumbai - 400 092.



CID : 2310416851  
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Age / Gender : 39 Years / Female  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Collected : 14-Apr-2023 / 08:43  
Reported : 14-Apr-2023 / 13:18

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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

**CBC (Complete Blood Count), Blood**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>RBC PARAMETERS</u></b>			
Haemoglobin	12.7	12.0-15.0 g/dL	Spectrophotometric
RBC	5.19	3.8-4.8 mil/cmm	Elect. Impedance
PCV	39.4	36-46 %	Measured
MCV	76	80-100 fl	Calculated
MCH	24.4	27-32 pg	Calculated
MCHC	32.1	31.5-34.5 g/dL	Calculated
RDW	14.8	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	5900	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	36.8	20-40 %	
Absolute Lymphocytes	2171.2	1000-3000 /cmm	Calculated
Monocytes	4.6	2-10 %	
Absolute Monocytes	271.4	200-1000 /cmm	Calculated
Neutrophils	57.1	40-80 %	
Absolute Neutrophils	3368.9	2000-7000 /cmm	Calculated
Eosinophils	1.4	1-6 %	
Absolute Eosinophils	82.6	20-500 /cmm	Calculated
Basophils	0.1	0.1-2 %	
Absolute Basophils	5.9	20-100 /cmm	Calculated
Immature Leukocytes	-		

WBC Differential Count by Absorbance & Impedance method/Microscopy.

**PLATELET PARAMETERS**

Platelet Count	231000	150000-400000 /cmm	Elect. Impedance
MPV	8.8	6-11 fl	Calculated
PDW	16.5	11-18 %	Calculated

**RBC MORPHOLOGY**

Hypochromia	Mild
Microcytosis	Occasional



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

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR 14 2-20 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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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	93.7	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	84.4	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.5	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.18	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.32	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.6	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.7	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	10.8	5-32 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	7.2	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	12.1	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	78.0	35-105 U/L	Colorimetric
BLOOD UREA, Serum	21.6	12.8-42.8 mg/dl	Kinetic
BUN, Serum	10.1	6-20 mg/dl	Calculated
CREATININE, Serum	0.77	0.51-0.95 mg/dl	Enzymatic
eGFR, Serum	89	>60 ml/min/1.73sqm	Calculated



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URIC ACID, Serum                      2.8                      2.4-5.7 mg/dl                      Enzymatic

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**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 Borivali Lab, Borivali West

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



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

<u>PARAMETER</u>	<u>RESULTS</u>
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:**

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. Vrushi Shroff*

**Dr.VRUSHALI SHROFF**  
**M.D.(PATH)**  
**Pathologist**





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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**LIPID PROFILE**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	157.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	<b>320.9</b>	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	<b>28.3</b>	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	128.7	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	92.2	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	<b>36.5</b>	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	<b>5.5</b>	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	3.3	0-3.5 Ratio	Calculated

Note : LDL test is performed by direct measurement.

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**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	4.5	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	13.6	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	4.34	0.35-5.5 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0	ECLIA



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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 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 becuae 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 Borivali Lab, Borivali West

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



*Bmhasakar*

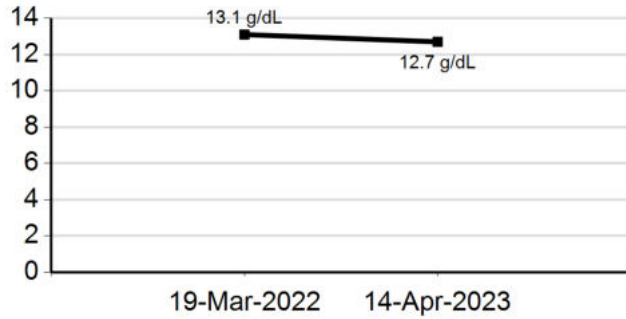
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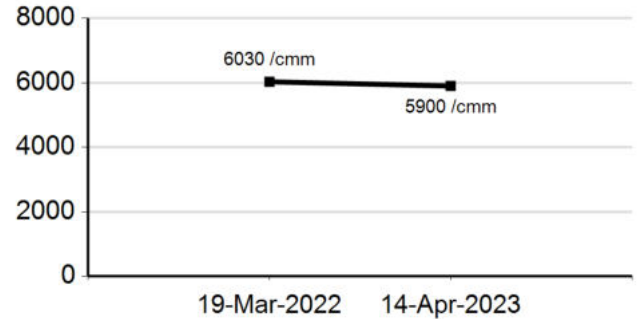
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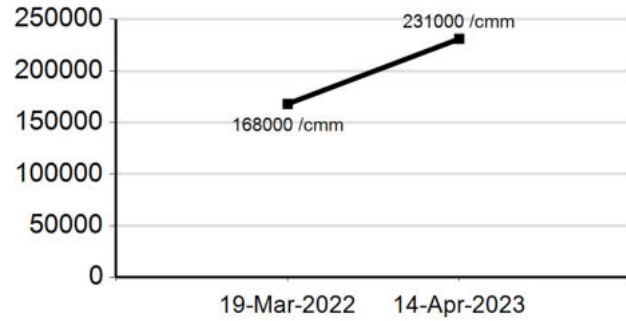
**Haemoglobin**



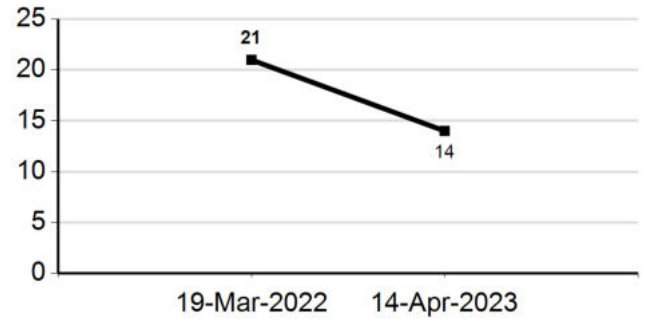
**WBC Total Count**



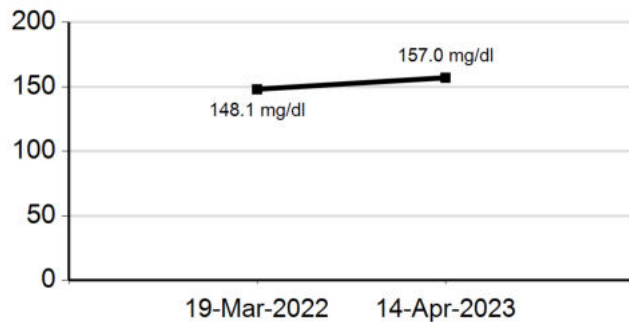
**Platelet Count**



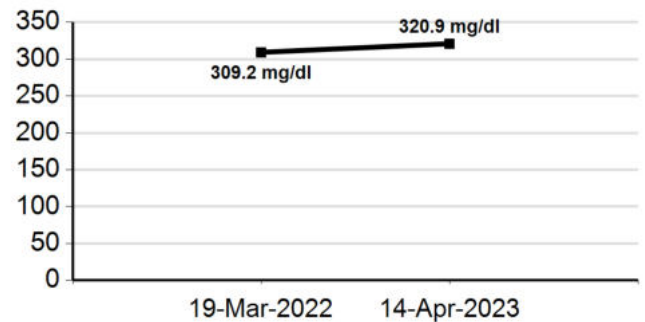
**ESR**



**CHOLESTEROL**



**TRIGLYCERIDES**

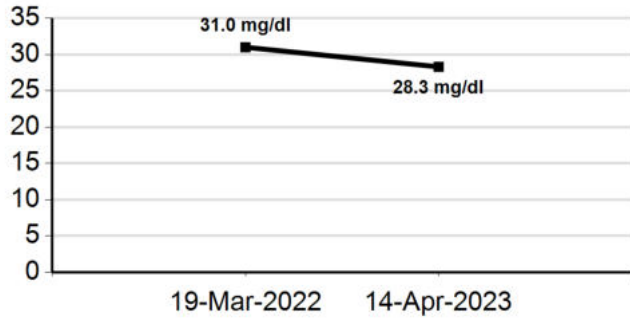




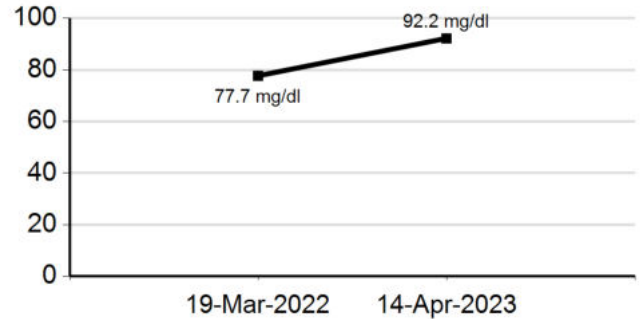
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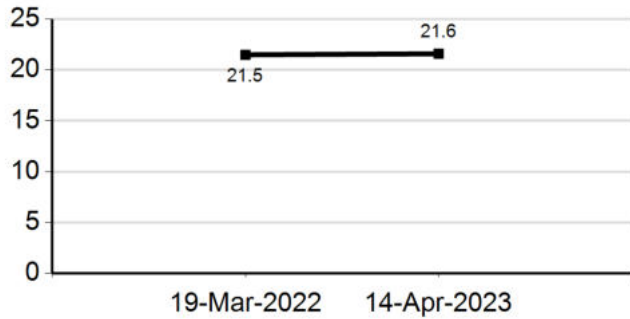
**HDL CHOLESTEROL**



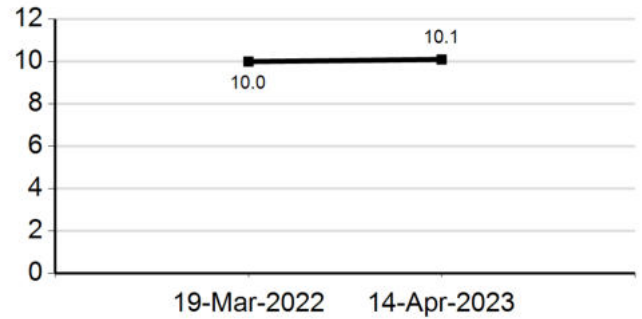
**LDL CHOLESTEROL**



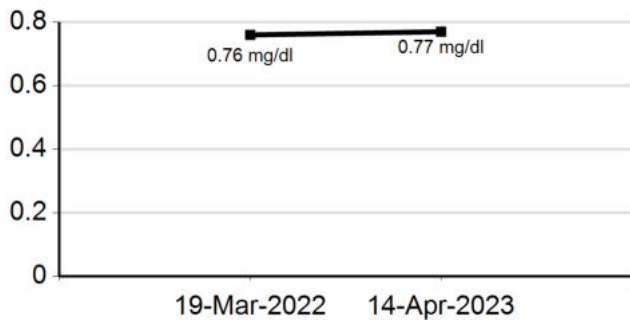
**BLOOD UREA**



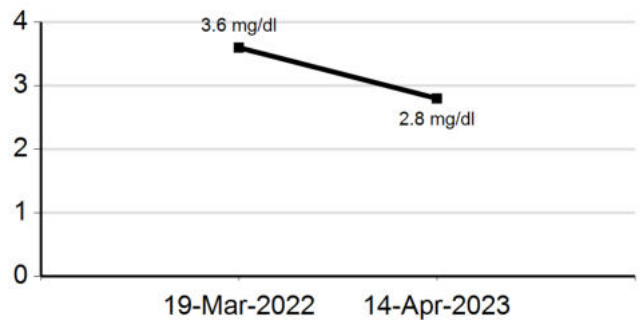
**BUN**



**CREATININE**



**URIC ACID**

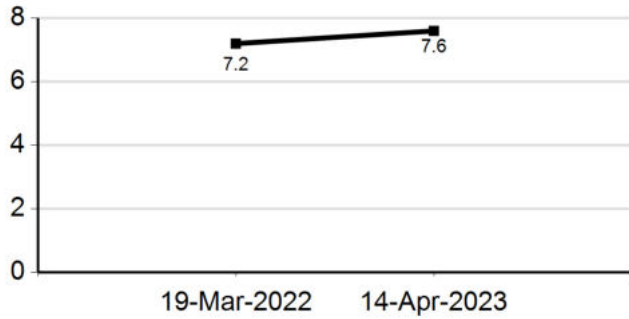




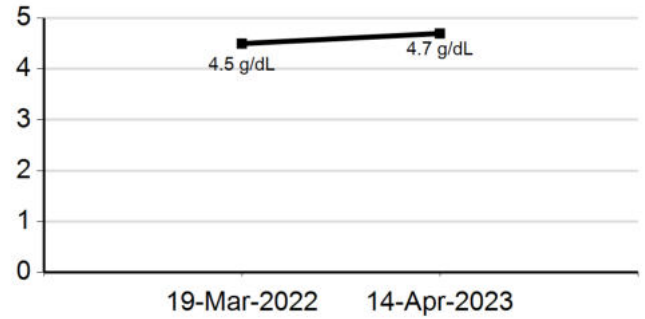
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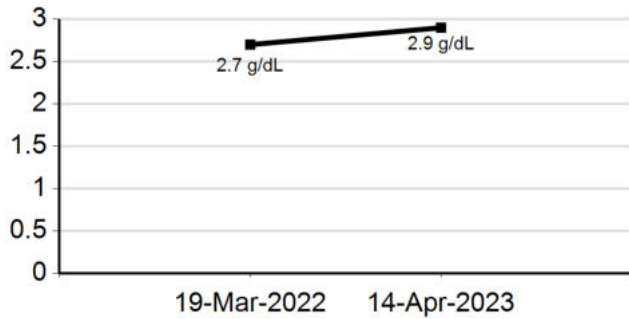
**TOTAL PROTEINS**



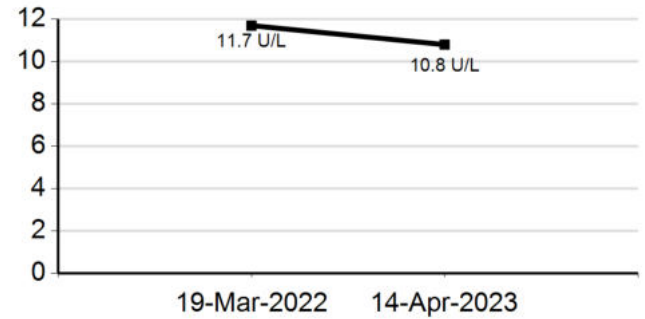
**ALBUMIN**



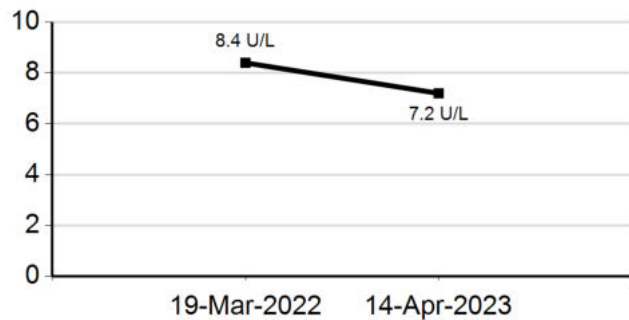
**GLOBULIN**



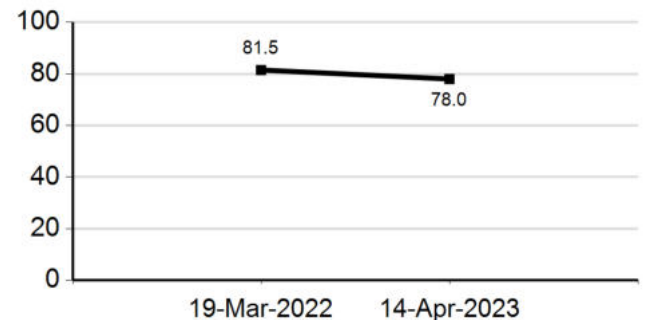
**SGOT (AST)**



**SGPT (ALT)**



**ALKALINE PHOSPHATASE**

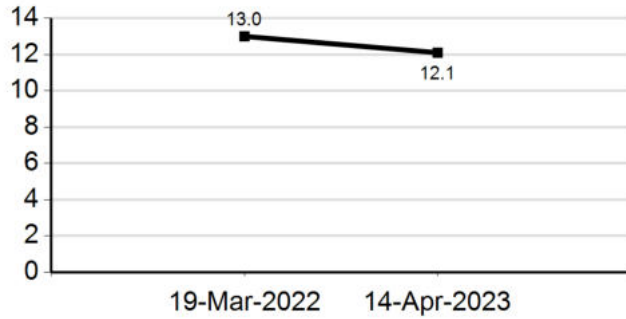




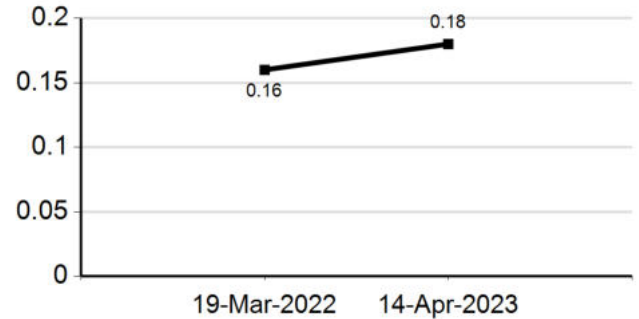
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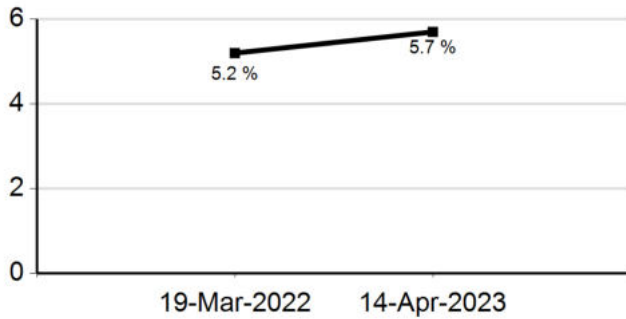
**GAMMA GT**



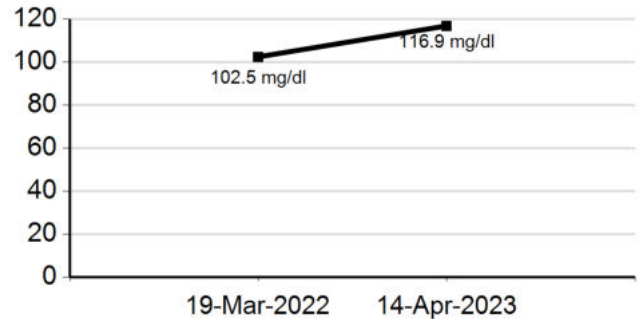
**BILIRUBIN (DIRECT)**



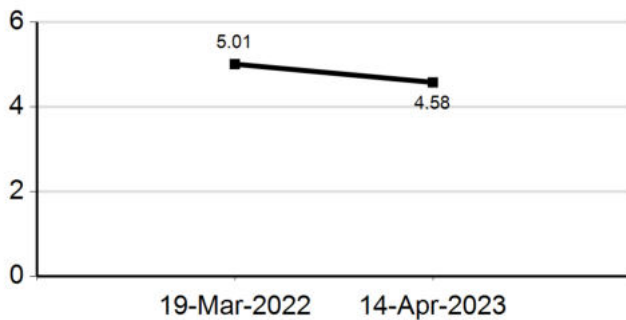
**Glycosylated Hemoglobin (HbA1c)**



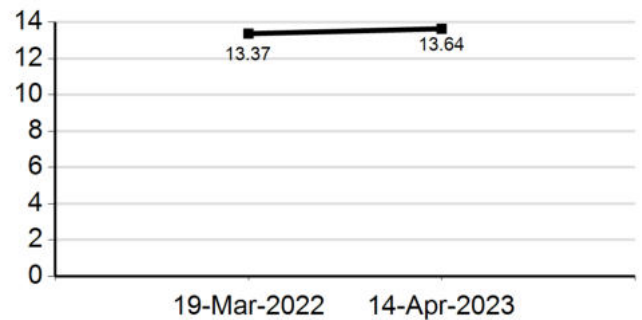
**Estimated Average Glucose (eAG)**



**Free T3**



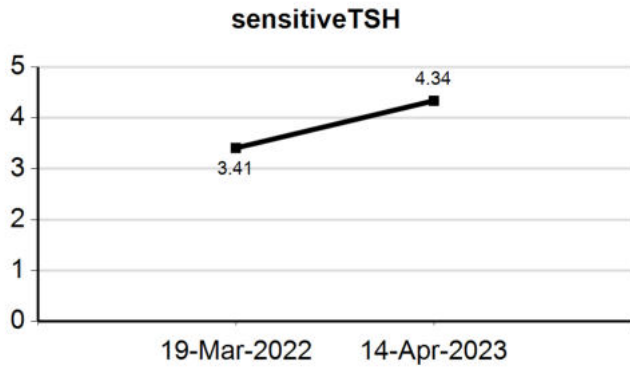
**Free T4**





Use a QR Code Scanner  
Application To Scan the Code

CID : 2310416851  
Name : MRS.ASHWINI CHAVAN  
Age / Gender : 39 Years / Female  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)





# SUBURBAN DIAGNOSTICS - BORIVALI WEST

Patient Name: ASHWINI CHAVAN

Date and Time: 14th Apr 23 9:05 AM

Patient ID: 2310416851

Age **39** **1** **25**  
years months days

Gender **Female**

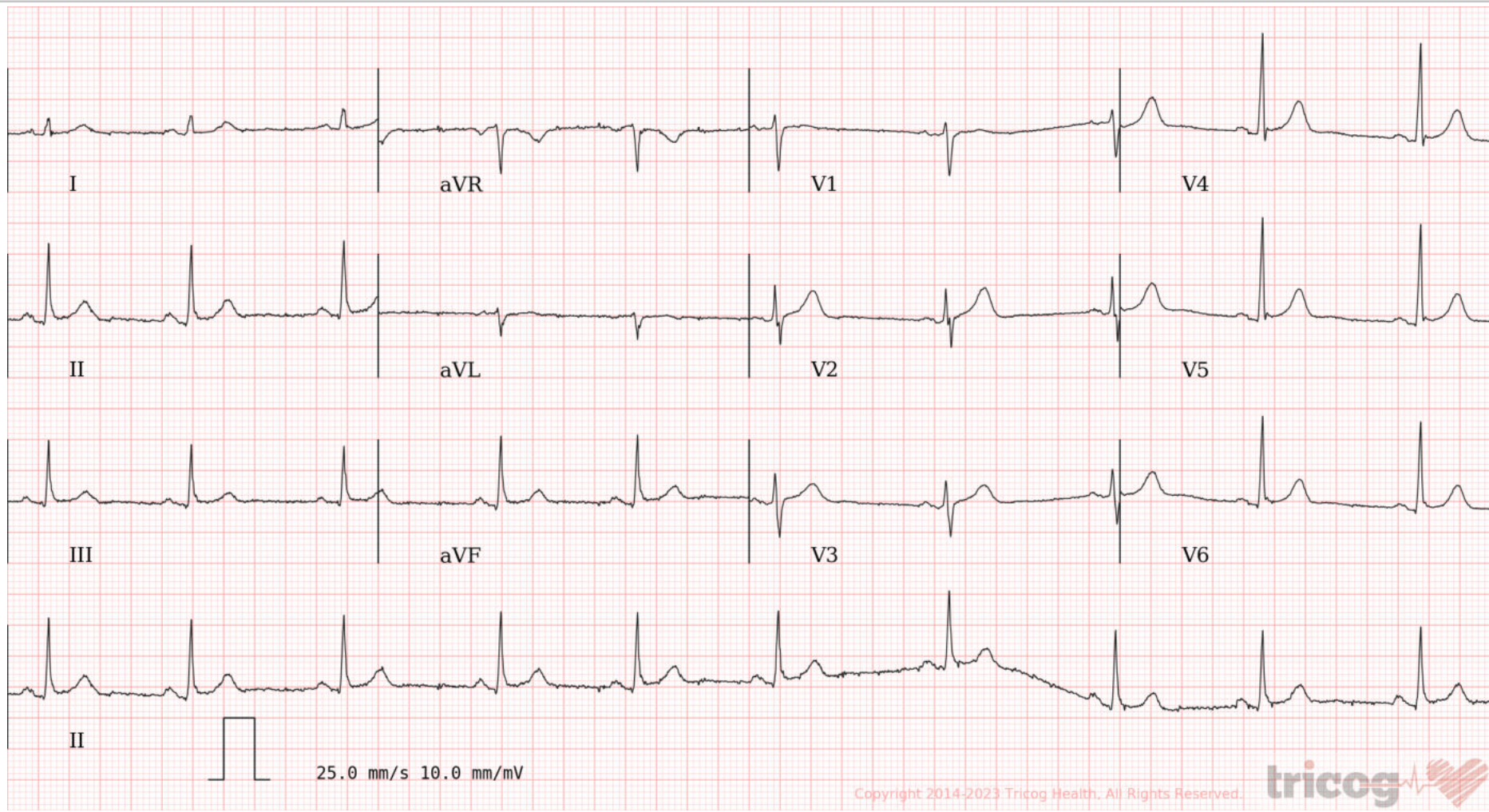
Heart Rate **61bpm**

### Patient Vitals

BP: 120/80 mmHg  
Weight: 68 kg  
Height: 161 cm  
Pulse: 85 bpm  
Spo2: NA  
Resp: NA  
Others: \_\_\_\_\_

### Measurements

QRSD: 78ms  
QT: 380ms  
QTcB: 382ms  
PR: 144ms  
P-R-T: 63° 78° 64°



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ECG Within Normal Limits: Sinus Rhythm, Sinus Arrhythmia Seen. Please correlate clinically.

REPORTED BY

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

**SUBURBAN DIANOSTICS PVT. LTD. BORIVALI**

**Name: ASHWINI CHAVAN** Date: 14-04-2023 Time: 09:19  
 Age: 39 Gender: F Height: 161 cms Weight: 68 Kg ID: 2310416851  
 Clinical History: NIL  
 Medications: NIL

**Test Details:**

Protocol: Bruce Predicted Max HR: 181 Target HR: 153  
 Exercise Time: 0:09:51 Achieved Max HR: 153 (85% of Predicted MHR)  
 Max BP: 160/80 Max BP x HR: 24480 Max Mets: 11.1  
 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	00:10	1	0	0	74	120/80	8880	-1 aVR	0.3 V2
Standing	00:14	1	0	0	74	120/80	8880	-0.7 aVR	-0.3 II
HyperVentilation	00:13	1	0	0	74	120/80	8880	-0.9 aVR	-0.3 III
PreTest	00:08	1	1.6	0	78	120/80	9360	1.2 III	-0.3 I
Stage: 1	03:00	4.7	2.7	10	105	130/80	13650	-1 aVR	-0.4 V6
Stage: 2	03:00	7	4	12	115	140/80	16100	-0.7 III	-0.6 III
Stage: 3	03:00	10.1	5.5	14	130	140/80	18200	0.7 III	-0.5 III
Peak Exercise	00:51	11.1	6.8	16	153	150/80	22950	-2.1 aVR	-2.4 III
Recovery1	01:00	1	0	0	117	160/80	18720	-1.8 V2	-0.4 II
Recovery2	01:00	1	0	0	94	140/80	13160	-0.6 V5	-0.4 aVF

**Interpretation**

The Patient Exercised according to Bruce Protocol for 0:09:51 achieving a work level of 11.1 METS.  
 Resting Heart Rate, initially 74 bpm rose to a max. heart rate of 153bpm (85% of Predicted Maximum Heart Rate).  
 Resting Blood Pressure of 120/80 mmHg, rose to a maximum Blood Pressure of 160/80 mmHg  
 Good Effort tolerance Normal HR & BP Response No Angina or Arrhymias  
 No Significant ST-T Change Noted During Exercise Stress test Negative for Stress inducible ischaemia.

**DR. NITIN SONAVANE**  
 M.B.B.S. MD. D.DIAB, D.CARD.  
 CONSULTANT CARDIOLOGIST  
 REGD. NO: 187714

*NS*

Doctor: DR. NITIN SONAVANE

Ref. Doctor: ----

**SCHILLER**  
The Art of Diagnostics

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

Suburban Diagnostics (P) Pvt. Ltd.  
 301 & 302, 3rd Floor, Vix Elegance,  
 2nd Cross, Tanishq Jeweller, L. T. Road,  
 Borivali (West), Mumbai - 400 092.

**ASHWINI CHAVAN**

Bruce Protocol

STISlope(mm) STISlope(mV/s)

**SUBURBAN DIANOSTICS PVT. LTD. BORIVALI**

ID: 2310416851

Stage: Supine

Date: 14-04-2023

Speed: 0 km/h

Exec Time : 0:00:00

Slope: 0%

Stage Time: 00:10

THR: 153 bpm

**HR: 74 bpm**

BP: 120/80 mmHg

STISlope(mm) STISlope(mV/s)

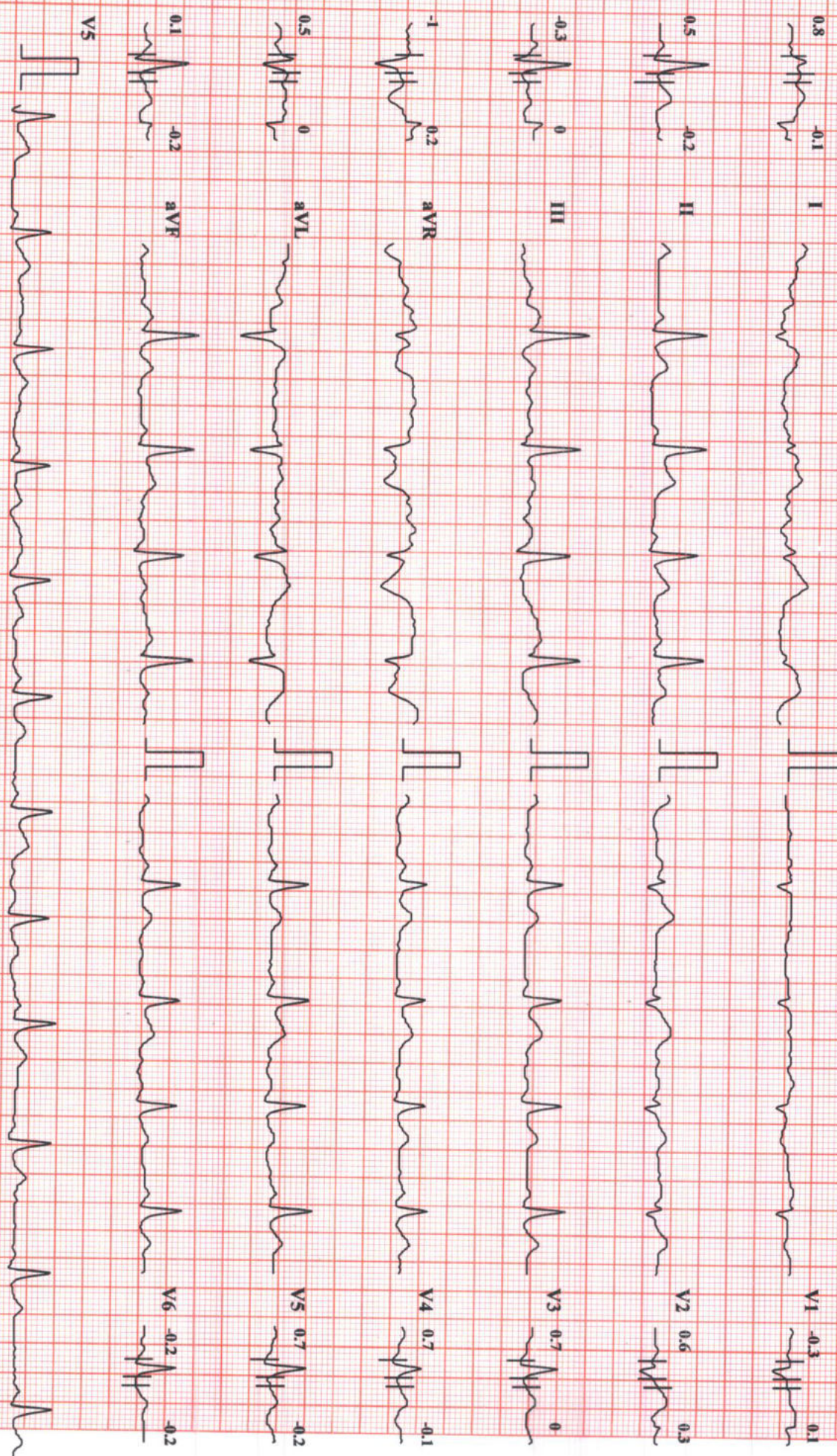


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

Schiller Spandana CS-20 Version: 2.14

**ASHWINI CHAVAN**

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

ID: 2310416851  
Stage: Standing

Date: 14-04-2023  
Speed: 0

Exec Time : 0:00:00  
Slope: 0%

Stage Time: 00:14  
THR: 153 bpm

**SUBRBAN DIANOSTICS PVT. LTD. BORIVALI**

**HR: 74 bpm**

Bp: 120/80 mmHg  
STLevel(mm) STISlope(mV/s)

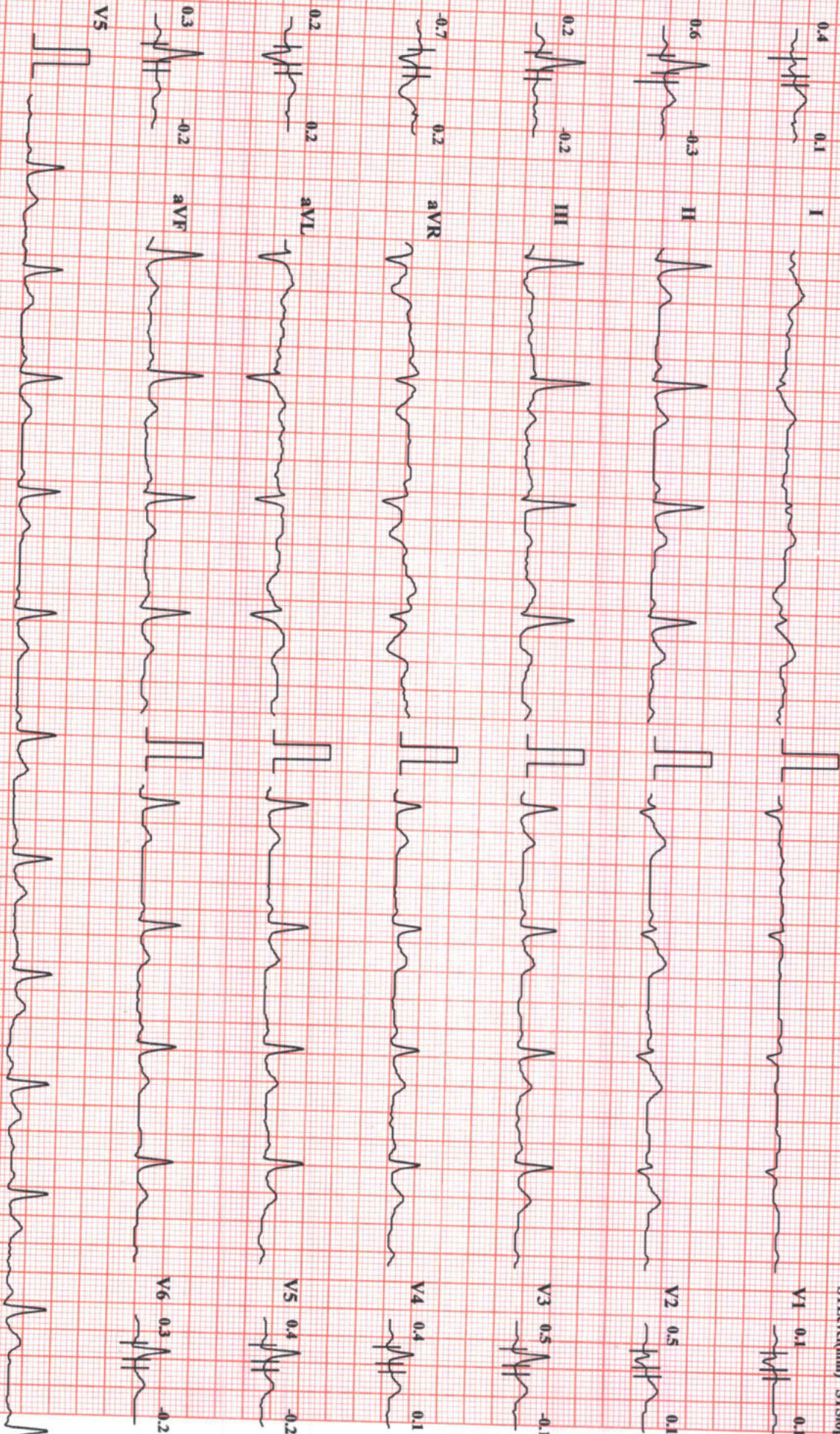


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

Schiller Spandan CS-20 Version:2.1

# SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

**ASHWINI CHAVAN**

Bruce Protocol

STLevel(mm) STISlope(mV/s)

ID: 2310416851

Stage: Hyper Ventilation

Date: 14-04-2023

Exec Time : 0:00:00

Stage Time: 00:13

**HR: 74 bpm**

BP: 120/80 mmHg

STLevel(mm) STISlope(mV/s)

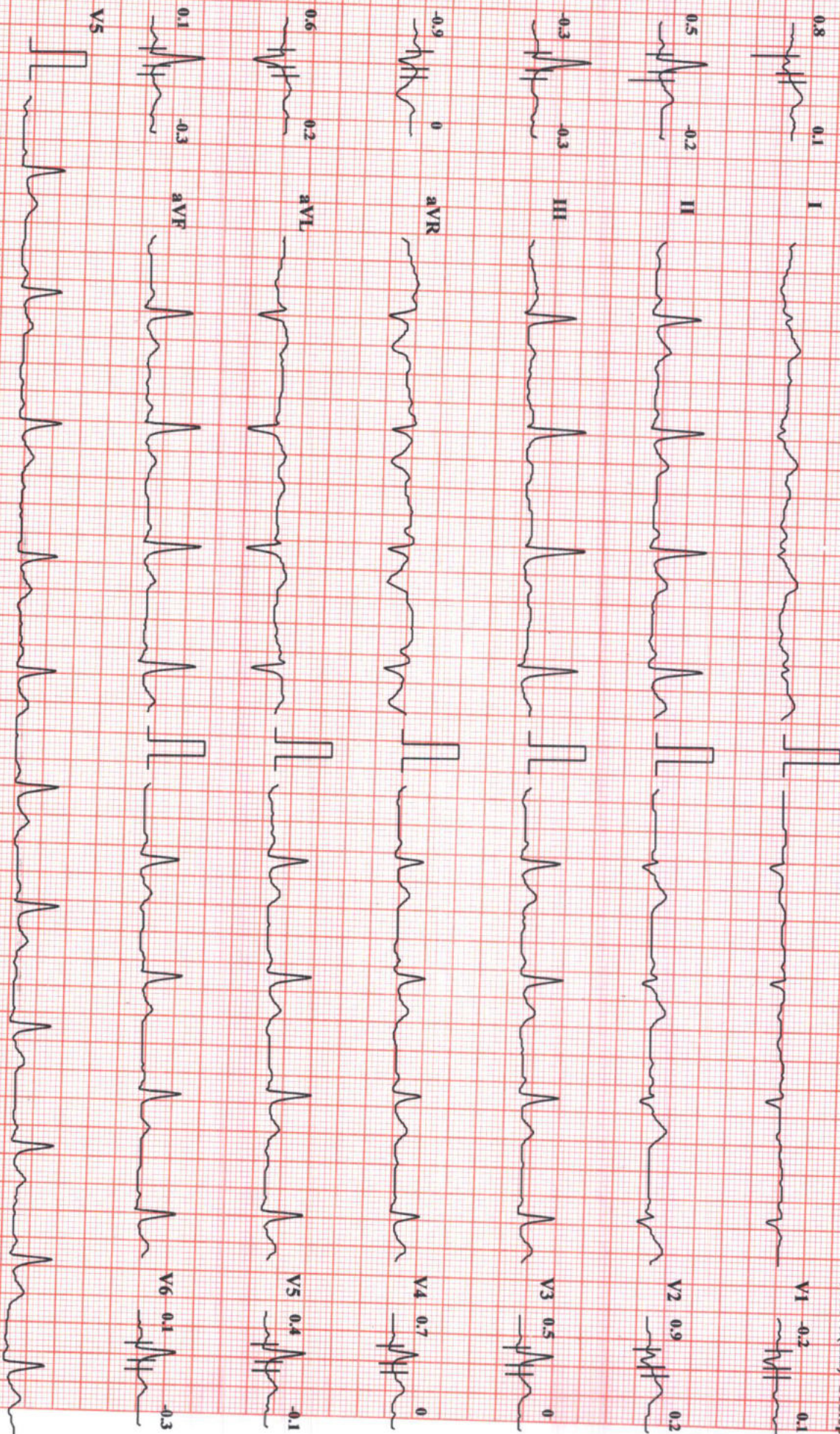


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

# SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

**ASHWINI CHAVAN**

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

ID: 2310416851  
Stage: 1

Date: 14-04-2023  
Speed: 2.7 kmph

Exec Time : 0:03:00  
Slope: 10 %

Stage Time: 03:00  
THR: 153 bpm

**HR: 105 bpm**

Bp: 130/80 mmHg  
STLevel(mm) STSlope(mV/s)

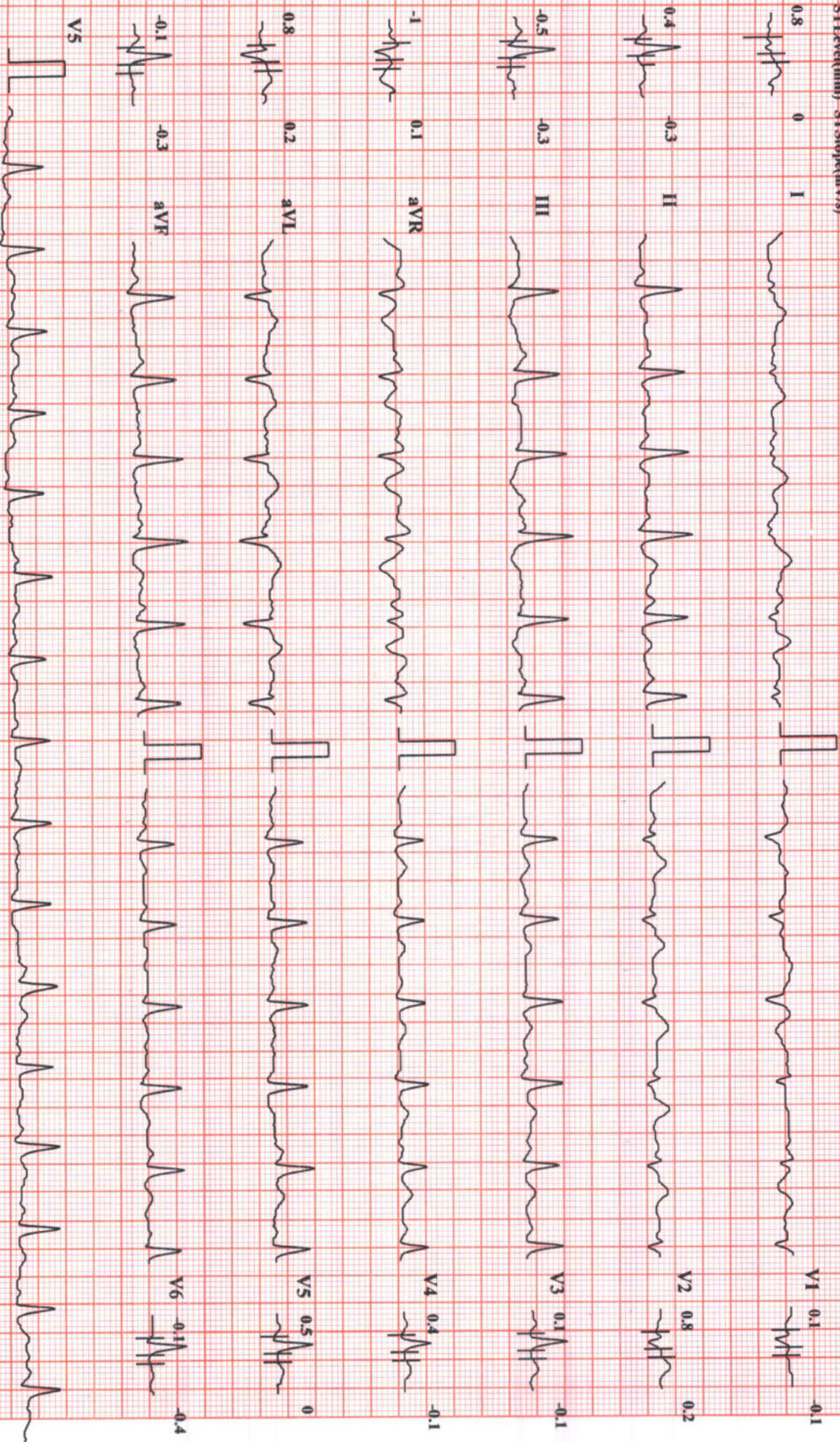


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

**ASHWINI CHAVAN**

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

**SUBURBAN DIANOSTICS PVT. LTD. BORIVALI**

ID: 2310416851  
Stage: 2

Date: 14-04-2023  
Speed: 4 kmph

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

Stage Time: 03:00  
THR: 153 bpm

**HR: 115 bpm**  
BP: 140/80 mmHg  
STLevel(mm) STSlope(mV)

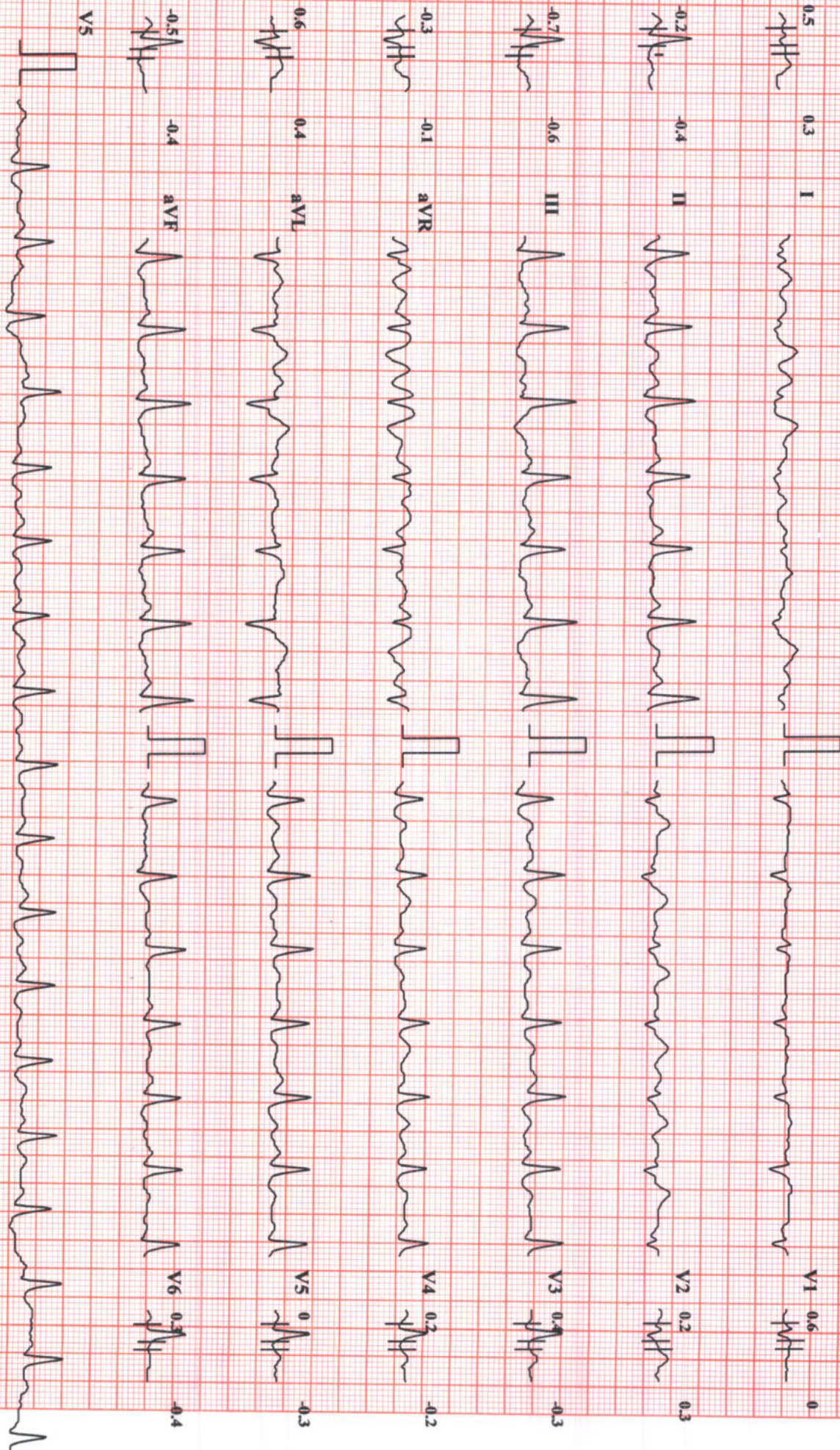


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

Schiller Spandam CS-20 Version:2.1

# SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

**ASHWINI CHAVAN**

Bruce Protocol

STLevel(mm) STISlope(mV/s)

ID: 2310416851

Date: 14-04-2023

Stage: 3

Speed: 5.5 kmph

Exec Time : 0:09:00

Stage Time: 03:00

Slope: 14 %

THR: 153 bpm

**HR: 130 bpm**

BP: 140/80 mmHg

STLevel(mm) STISlope(mV/s)

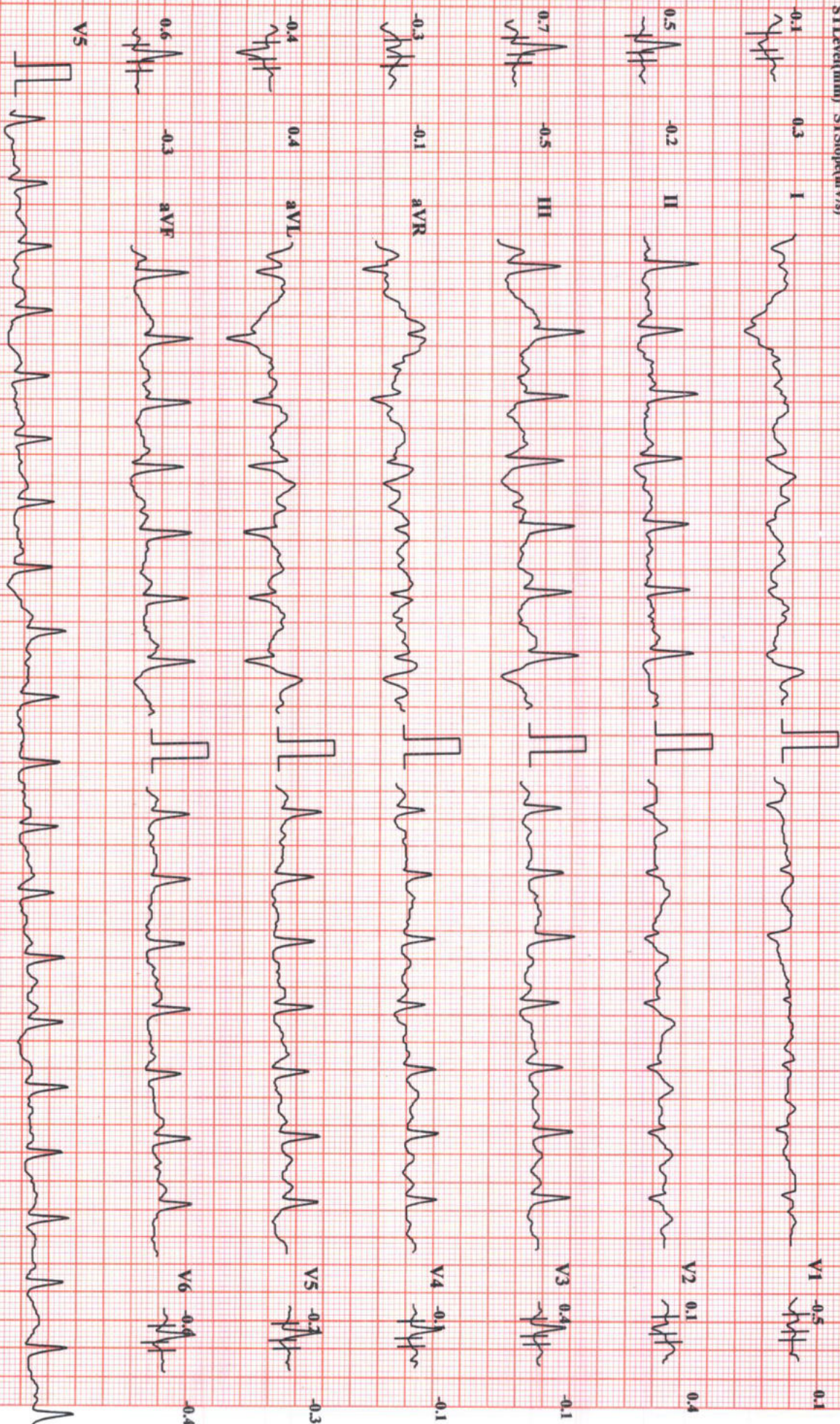


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

Schiller Spandam GS-20 Version:2.



# SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

**ASHWINI CHAVAN**

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 2310416851

Stage: 4 Peak Exercise

Date: 14-04-2023

Speed: 6.8 kmph

Exec Time : 0:09:51

Slope: 16 %

Stage Time: 00:51

THR: 153 bpm

**HR: 153 bpm**

BP: 150/80 mmHg

STLevel(mm) STSlope(mV/s)

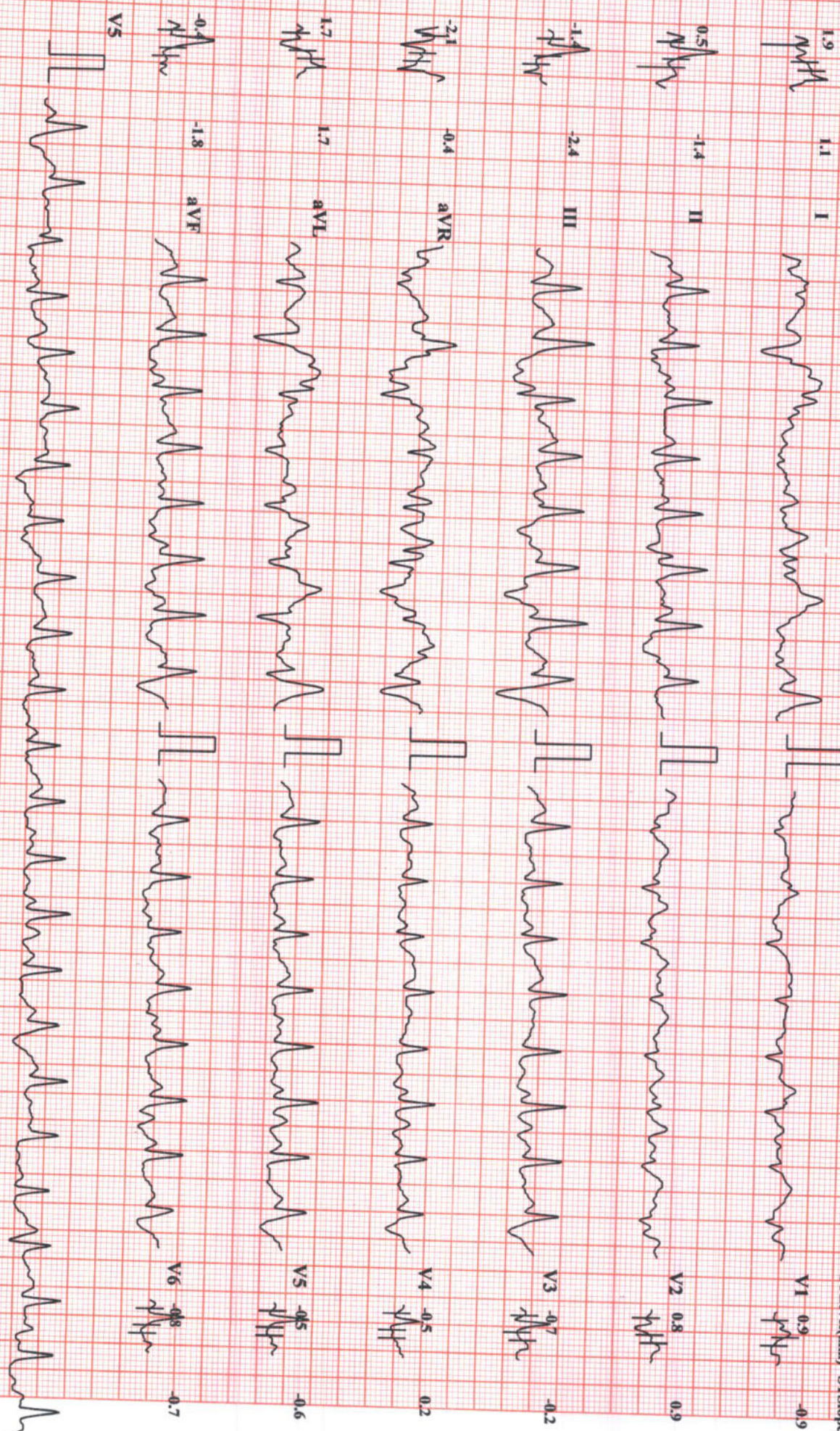


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

**ASHWINI CHAVAN**

**SUBRBAN DIANOSTICS PVT. LTD. BORIVALI**

**HR: 128 bpm**

Bruce Protocol

ID: 2310416851

Date: 14-04-2023

Exec Time : 00:00

Stage Time: 00:47

STLevel(mm) STSlope(mV/s)

Stage: Recovery I

Speed: 0 kmph

Slope: 0 %

THR: 153 bpm

BP: 160/80 mmHg

STLevel(mm) STSlope(mV/s)

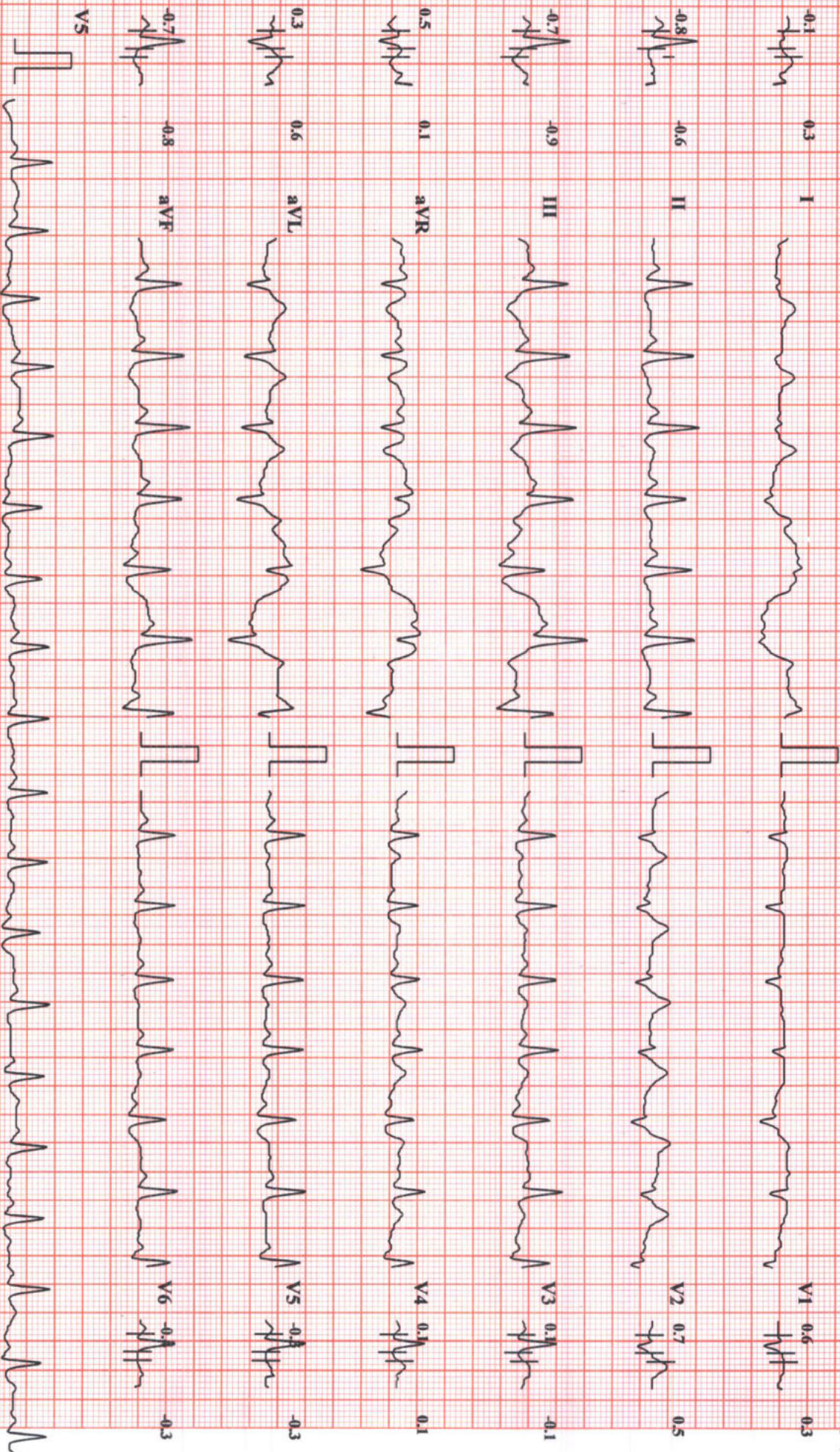


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

Schiller Spandax CS-20 Version: 2.14

**SUBURBAN DIANOSTICS PVT. LTD. BORIVALI**

**HR: 117 bpm**

**ASHWINI CHAVAN**

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

ID: 2310416851  
Stage: Recovery 1

Date: 14-04-2023  
Speed: 0 kmph

Exec Time : 00:00  
Slope: 0 %

Stage Time: 01:00  
THR: 153 bpm

BP: 160/80 mmHg  
STLevel(mm) STSlope(mV/s)

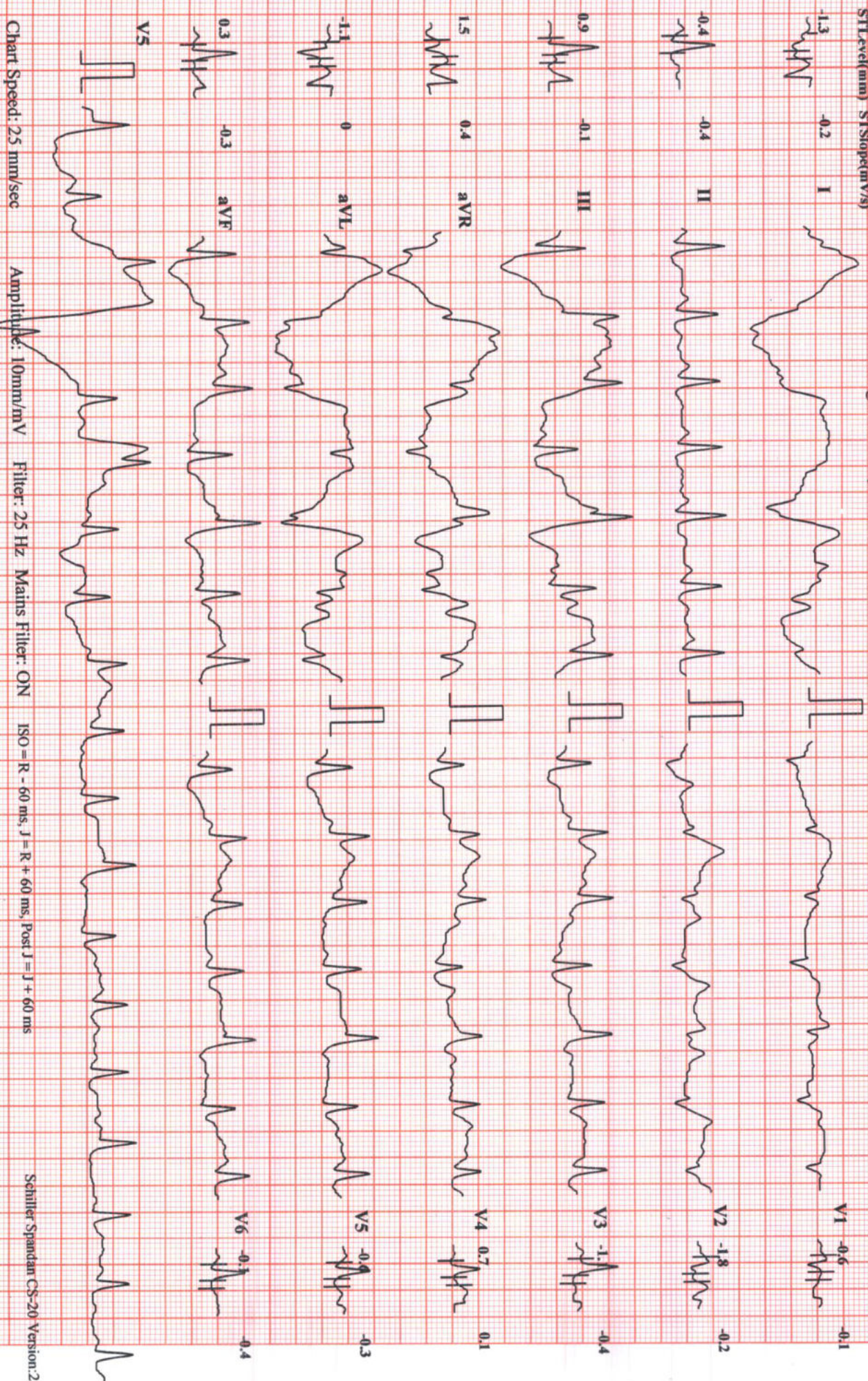


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

Schiller Spandan CS-20 Version: 2.1

**ASHWINI CHAVAN**

Bruce Protocol

ST1 Level(mm) ST2 Slope(mV/s)

**SUBURBAN DIANOSTICS PVT. LTD, BORIVALI**

ID: 2310416851

Date: 14-04-2023

Exec Time : 00:00

Stage Time: 01:00

Stage: Recovery2

Speed: 0 kmph

Slope: 0 %

THR: 153 bpm

**HR: 94 bpm**

BP: 140/80 mmHg

ST1 Level(mm) ST2 Slope(mV/s)

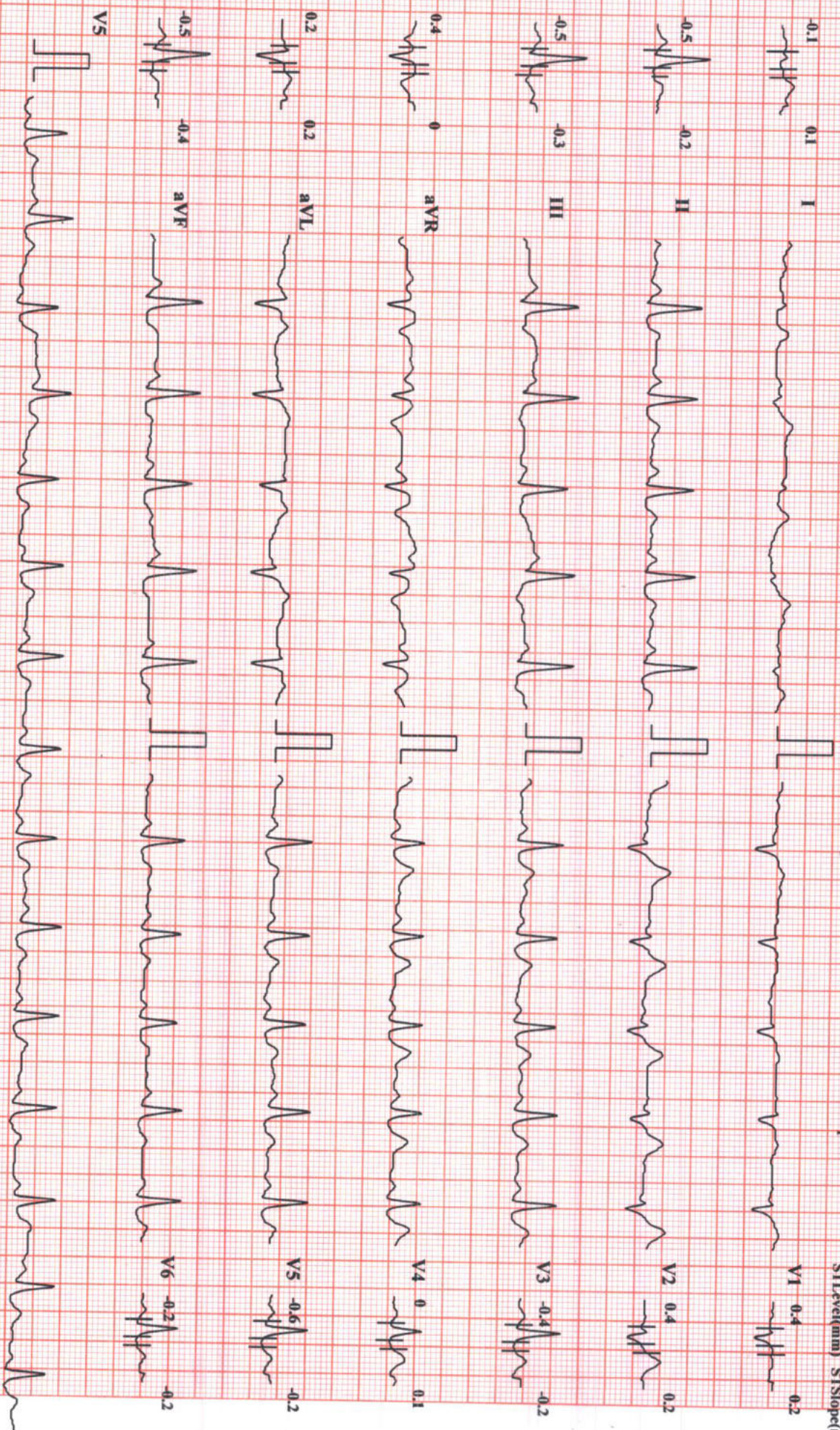


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

Schiller Spandan CS-20 Version: 2.14

**ASHWINI CHAVAN**

Bruce Protocol  
STL:vel(mm) STISlope(mV/s)

**SUBRBAN DIANOSTICS PVT. LTD. BORIVALI**

ID: 2310416851  
Stage: Recovery3

Date: 14-04-2023  
Speed: 0 kmph

Exec Time : 00:00  
Slope: 0 %

Stage Time: 00:18  
THR: 153 bpm

**HR: 93 bpm**

BP: 130/80 mmHg  
STL:vel(mm) STISlope(mV/s)

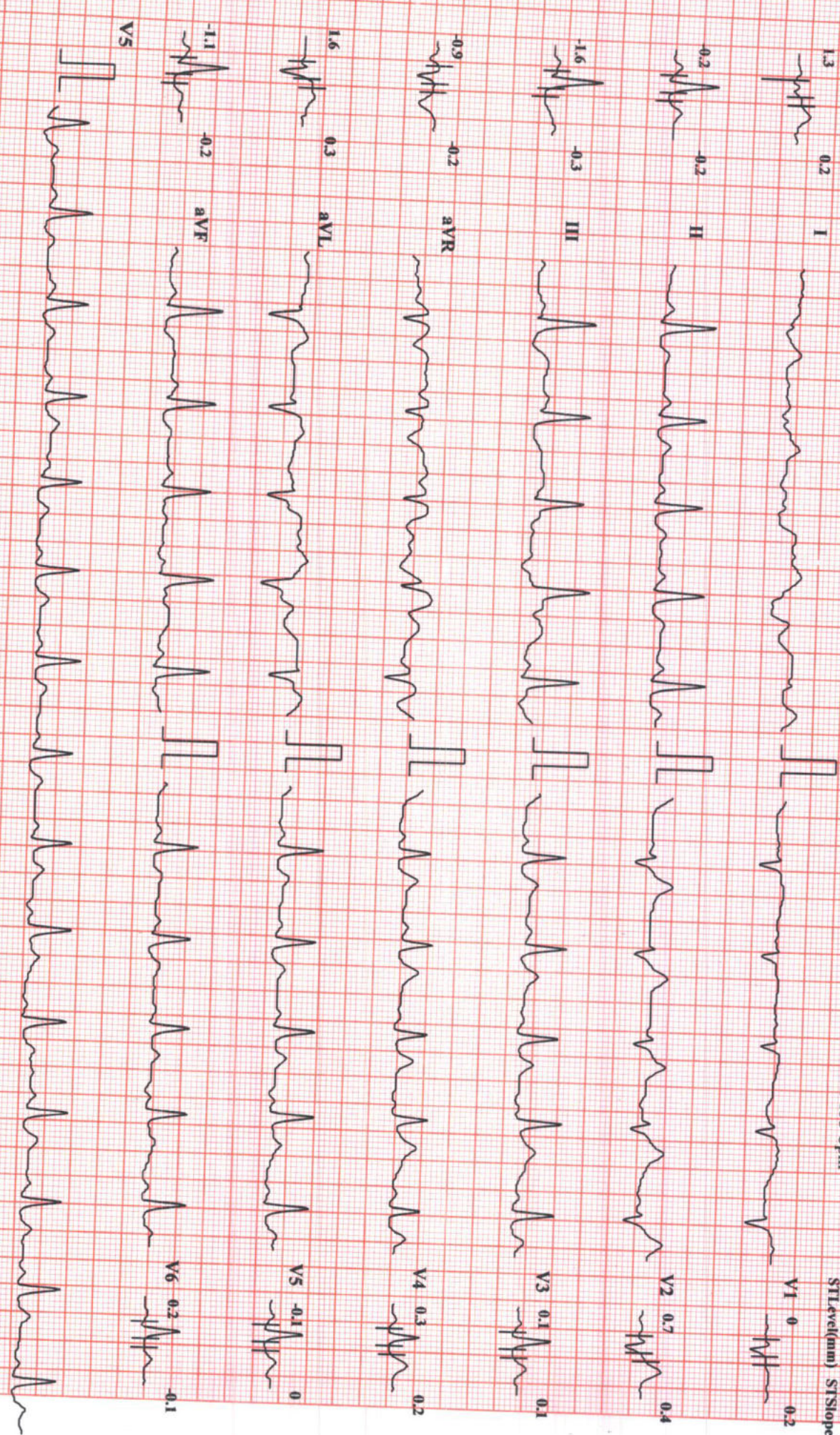


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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



भारतीय विशिष्ट पहचान प्राधिकरण

भारत सरकार

Unique Identification Authority of India  
Government of India

नामांकन क्रम / Enrollment No.: 2085/25107/54382

To,  
अश्विनी शहाजी चव्हाण  
Ashwini Shahaji Chavan  
W/O Shahaji Vilasrao Chavan  
B.401, Manali Village Bldg  
Near Saikrupa Complex  
Masachapada Road Kashigaon -Kashimira  
Mira-Bhayander  
Mira Road Thane Thane  
Maharashtra 401107  
9822769637

Ref: 139 / 27P / 35323 / 36507 / P



SB271871540FH



आपका आधार क्रमांक / Your Aadhaar No. :

5471 8523 1228

मेरा आधार, मेरी पहचान

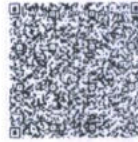


भारत सरकार

Government of India



अश्विनी शहाजी चव्हाण  
Ashwini Shahaji Chavan  
पति : शहाजी विलासराव चव्हाण  
Husband : Shahaji Vilasrao  
Chavan  
जन्म तिथि / DOB : 20/02/1984  
महिला / Female



5471 8523 1228

मेरा आधार, मेरी पहचान

Suburban Diagnostic (I) Pvt. Ltd.  
1 & 302, 3rd Floor, 2nd Cross, 2nd Stage,  
Above Tanishq Jewellers, L. T. Road,  
Borivali (West), Mumbai - 400 092.

*Ashwini*



CID : 2310416851  
Name : Mrs ASHWINI CHAVAN  
Age / Sex : 39 Years/Female  
Ref. Dr :  
Reg. Location : Borivali West

Reg. Date : 14-Apr-2023  
Reported : 14-Apr-2023 / 11:28

**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.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=2023041408401274>



CID : 2310416851  
Name : Mrs ASHWINI CHAVAN  
Age / Sex : 39 Years/Female  
Ref. Dr :  
Reg. Location : Borivali West

Reg. Date : 14-Apr-2023  
Reported : 14-Apr-2023 / 12:25

### USG WHOLE ABDOMEN

**LIVER:** Liver is enlarged in 15.1 cm 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 distended and appears normal. No obvious wall thickening is noted. There is no evidence of any calculus.

**PORTAL VEIN:** Portal vein is normal. **CBD:** CBD is normal.

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

**KIDNEYS:** Right kidney measures 10.8 x 4.2 cm. Left kidney measures 10.9 x 4.4 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.

**UTERUS:** Uterus is anteverted, normal and measures 5.8 x 3.6 x 5.0 cm. Uterine myometrium shows homogenous echotexture. Endometrium is normal in thickness and measures 5.9 mm. Cervix appears normal.

**OVARIES:** Both ovaries appear normal in size and echotexture.

The right ovary measures 1.2 x 1.3 cm.

The left ovary measures 2.0 x 1.3 cm.

Bilateral adnexa is clear.

No free fluid or obvious significant lymphadenopathy is seen.

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023041408401265>





Use a QR Code Scanner  
Application To Scan the Code

CID : 2310416851  
Name : Mrs ASHWINI CHAVAN  
Age / Sex : 39 Years/Female  
Ref. Dr :  
Reg. Location : Borivali West

Reg. Date : 14-Apr-2023  
Reported : 14-Apr-2023 / 12:25

Opinion:

- Grade I fatty infiltration of liver with mild hepatomegaly, Advice LFT & Lipid profile correlation.

**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-----

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

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