

CID# : 2305622074  
 Name : MR.BHANDARI SUPRIYA RAVIKUMAR  
 Age / Gender : 31 Years/Male  
 Consulting Dr. : Collected : 25-Feb-2023 / 09:27  
 Reg.Location : Swargate, Pune (Main Centre) Reported : 25-Feb-2023 / 12:57

**PHYSICAL EXAMINATION REPORT**

**History and Complaints:**

H/O Hypothyroidism 5 yrs

**EXAMINATION FINDINGS:**

Height (cms):	160cm	Weight (kg):	78kg
Temp (0c):	Afebrile	Skin:	Normal
Blood Pressure (mm/hg):	120/80mmHg	Nails:	Haalthy
Pulse:	75/min	Lymph Node:	Not Palpable

**Systems**

**Cardiovascular:** S1 S2 Normal No Murmurs  
**Respiratory:** Normal  
**Genitourinary:** Normal  
**GI System:** Soft non tender no Organomegaly  
**CNS:** Normal

**IMPRESSION:** Anaemia - ECG changes

**ADVICE:**

— consult family physician  
 — Sr Iron  
 — Sr Ferritin  
 — correct Anaemia

**CHIEF COMPLAINTS:**

- |                      |    |             |
|----------------------|----|-------------|
| 1) Hypertension:     | NO | — 2D - Echo |
| 2) IHD               | NO |             |
| 3) Arrhythmia        | NO |             |
| 4) Diabetes Mellitus | NO |             |
| 5) Tuberculosis      | NO |             |

**Dr. I. U. BAMB**  
 M.B.B.S., M.D. (Medicine)  
 Reg. No. 39452

CID# : 2305622074  
Name : MR.BHANDARI SUPRIYA RAVIKUMAR  
Age / Gender : 31 Years/Male  
Consulting Dr. : Collected : 25-Feb-2023 / 09:27  
Reg.Location : Swargate, Pune (Main Centre) Reported : 25-Feb-2023 / 12:57

---

- |  |                    |
|--|--------------------|
| 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                            | Yes C section 2018 |
| 17) Musculoskeletal System               | NO                 |

**PERSONAL HISTORY:**

- |               |                    |
|---------------|--------------------|
| 1) Alcohol    | NO                 |
| 2) Smoking    | NO                 |
| 3) Diet       | Mixed              |
| 4) Medication | for Hypothyroidism |

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

**Dr.I U BAMB**



CID : 2305622074  
Name : MR.BHANDARI SUPRIYA RAVIKUMAR  
Age / Gender : 31 Years / Male  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code

Collected : 25-Feb-2023 / 09:32  
Reported : 25-Feb-2023 / 12:19

**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	10.2	13.0-17.0 g/dL	Spectrophotometric
RBC	4.60	4.5-5.5 mil/cmm	Elect. Impedance
PCV	33.0	40-50 %	Calculated
MCV	71.9	80-100 fl	Calculated
MCH	22.3	27-32 pg	Calculated
MCHC	31.0	31.5-34.5 g/dL	Calculated
RDW	24.7	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	7260	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	22.5	20-40 %	
Absolute Lymphocytes	1633.5	1000-3000 /cmm	Calculated
Monocytes	3.9	2-10 %	
Absolute Monocytes	283.1	200-1000 /cmm	Calculated
Neutrophils	67.0	40-80 %	
Absolute Neutrophils	4864.2	2000-7000 /cmm	Calculated
Eosinophils	5.7	1-6 %	
Absolute Eosinophils	413.8	20-500 /cmm	Calculated
Basophils	0.9	0.1-2 %	
Absolute Basophils	65.3	20-100 /cmm	Calculated
Immature Leukocytes	-		

WBC Differential Count by Absorbance & Impedance method/Microscopy.

**PLATELET PARAMETERS**

Platelet Count	227000	150000-400000 /cmm	Elect. Impedance
MPV	10.1	6-11 fl	Calculated
PDW	19.2	11-18 %	Calculated

**RBC MORPHOLOGY**



CID : 2305622074  
Name : MR.BHANDARI SUPRIYA RAVIKUMAR  
Age / Gender : 31 Years / Male  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code

Collected : 25-Feb-2023 / 09:32  
Reported : 25-Feb-2023 / 11:08

Hypochromia	+
Microcytosis	+
Macrocytosis	-
Anisocytosis	++
Poikilocytosis	Mild
Polychromasia	Mild
Target Cells	-
Basophilic Stippling	-
Normoblasts	-
Others	Elliptocytes-occasional
WBC MORPHOLOGY	-
PLATELET MORPHOLOGY	-
COMMENT	ADV : Iron studies & Sr. Ferritin level

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR                      25                      2-15 mm at 1 hr.                      Sedimentation

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate  
\*\*\* End Of Report \*\*\*



*Shamla Kulkarni*  
**Dr.SHAMLA KULKARNI**  
MD (PATH)  
Consultant Pathologist



CID : 2305622074  
Name : MR.BHANDARI SUPRIYA RAVIKUMAR  
Age / Gender : 31 Years / Male  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code

Collected : 25-Feb-2023 / 09:32  
Reported : 25-Feb-2023 / 11:14

**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	80.5	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	86.4	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.31	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.16	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.15	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.9	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.3	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.6	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.7	1 - 2	Calculated
SGOT (AST), Serum	15.4	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	12.7	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	10.5	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	68.3	40-130 U/L	Colorimetric
BLOOD UREA, Serum	17.3	12.8-42.8 mg/dl	Kinetic
BUN, Serum	8.1	6-20 mg/dl	Calculated
CREATININE, Serum	0.67	0.67-1.17 mg/dl	Enzymatic



CID : 2305622074  
Name : MR.BHANDARI SUPRIYA RAVIKUMAR  
Age / Gender : 31 Years / Male  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code

Collected : 25-Feb-2023 / 12:06  
Reported : 25-Feb-2023 / 15:15

eGFR, Serum	147	>60 ml/min/1.73sqm	Calculated by MDRC equation (Modification of Diet in Renal Disease)
URIC ACID, Serum	2.9	3.5-7.2 mg/dl	Enzymatic
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	
Urine Sugar (PP)	Absent	Absent	
Urine Ketones (PP)	Absent	Absent	

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate  
\*\*\* End Of Report \*\*\*



MC-2463

**Dr.SHAMLA KULKARNI**  
M.D.(PATH)  
Pathologist



CID : 2305622074  
Name : MR.BHANDARI SUPRIYA RAVIKUMAR  
Age / Gender : 31 Years / Male  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code

Collected : 25-Feb-2023 / 09:32  
Reported : 25-Feb-2023 / 11:37

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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	4.8	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	91.1	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 Pune Lab, Pune Swargate

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



MC-2463

*Dr. Shamla Kulkarni*

**Dr. SHAMLA KULKARNI**  
**MD (PATH)**  
**Consultant Pathologist**



CID : 2305622074  
Name : MR.BHANDARI SUPRIYA RAVIKUMAR  
Age / Gender : 31 Years / Male  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code

Collected : 25-Feb-2023 / 09:32  
Reported : 25-Feb-2023 / 14:02

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**URINE EXAMINATION REPORT**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
Color	Yellow	Pale Yellow	-
Reaction (pH)	Acidic (5.0)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.010	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	30	-	-
<b><u>CHEMICAL EXAMINATION</u></b>			
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
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Leukocytes(Pus cells)/hpf	0-1	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	1-2	Less than 20/hpf	

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

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate

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



MC-2463

**Dr.SHAMLA KULKARNI**  
**M.D.(PATH)**  
**Pathologist**





CID : 2305622074  
Name : MR. BHANDARI SUPRIYA RAVIKUMAR  
Age / Gender : 31 Years / Male  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code

Collected : 25-Feb-2023 / 09:32  
Reported : 25-Feb-2023 / 13:01

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

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	A
Rh TYPING	Positive

NOTE: Test performed by Semi- automated column agglutination technology (CAT)

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 3 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 Pune Lab, Pune Swargate  
\*\*\* End Of Report \*\*\*



MC-2463

*Dr. Shamla Kulkarni*

**Dr. SHAMLA KULKARNI**  
**MD (PATH)**  
**Consultant Pathologist**



CID : 2305622074  
Name : MR.BHANDARI SUPRIYA RAVIKUMAR  
Age / Gender : 31 Years / Male  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code

Collected : 25-Feb-2023 / 09:32  
Reported : 25-Feb-2023 / 11:37

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

**LIPID PROFILE**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
CHOLESTEROL, Serum	129.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	62.2	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	45.0	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	84.0	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	72	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	12	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	2.9	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	1.6	0-3.5 Ratio	Calculated

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate

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



MC-2463

*Shamla Kulkarni*

**Dr.SHAMLA KULKARNI**  
**MD (PATH)**  
**Consultant Pathologist**



CID : 2305622074  
Name : MR.BHANDARI SUPRIYA RAVIKUMAR  
Age / Gender : 31 Years / Male  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner Application To Scan the Code  
Collected : 25-Feb-2023 / 09:32  
Reported : 25-Feb-2023 / 11:08

**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	4.0	2.6-5.7 pmol/L	CMIA
Kindly note change in reference range and method w.e.f. 16/08/2019			
Free T4, Serum	13.1	9-19 pmol/L	CMIA
Kindly note change in reference range and method w.e.f. 16/08/2019			
sensitiveTSH, Serum	2.13	0.35-4.94 microIU/ml	CMIA

Kindly note change in reference range and method w.e.f. 16/08/2019. NOTE: 1) TSH values between 5.5 to 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 & heart failure, severe burns, trauma & surgery etc.



CID : 2305622074  
Name : MR.BHANDARI SUPRIYA RAVIKUMAR  
Age / Gender : 31 Years / Male  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code

Collected : 25-Feb-2023 / 09:32  
Reported : 25-Feb-2023 / 11:08

**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 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, tyrosi 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 Pune Lab, Pune Swargate

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



MC-2463

**Dr.SHAMLA KULKARNI**  
M.D.(PATH)  
Pathologist

Name: Mrs. Supriya Bhandari

Date: 25/2/23

Age/sex: 31yr 1F

EYE EXAMINATION

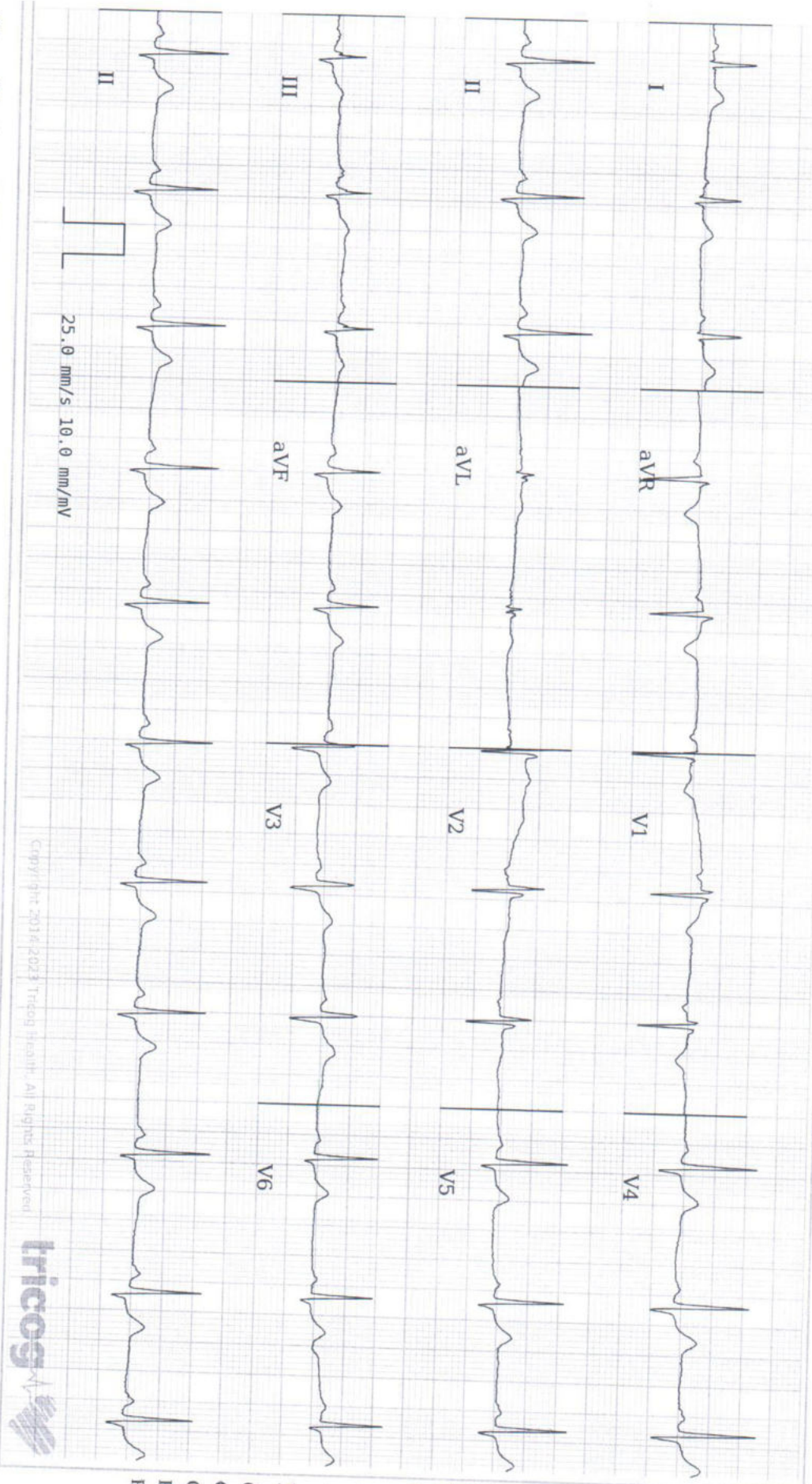
VISION

Distance Vision Without Glasses	Right Eye 6/6	Left Eye 6/6
Distance Vision With Glasses	Right Eye	Left Eye
Near Vision Without Glasses	Right Eye 2/6	Left Eye 2/6
Near Vision With Glasses	Right Eye	Left Eye

GENERAL EXAMINATION:

LIDS  
CORNEA  
CONJUNCTIVAE  
EYE MOVEMENTS  
COLOUR VISION

/o



**Sinus Rhythm. RSR in V1 V2. Please correlate clinically.**

Disclaimer: 1) Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, physical examination and not derived from the ECG.

**SUBURBAN DIAGNOSTICS PVT. LTD.**  
Seraph Centre, Opp. Pentagon Mall,  
Near Panchami Hotel,  
Shahu College Road, Pune-411 009.

**Dr. I. U. BAMB**  
**M.B.S., M.D. (Medicine)**  
Reg. No. 39452

**DR ISHWARLAL BAMB**  
**M.B.S. MD (MEDICINE)**  
cardiologist  
39452

REPORTED BY

Age **31** 5 years mon  
Gender **Male**  
Heart Rate **66b**  
Patient Vitals  
BP: **NA**  
Weight: **78 kg**  
Height: **160 cm**  
Pulse: **NA**  
Spo2: **NA**  
Resp: **NA**  
Others:  
Measurements  
QRSD: **86ms**  
QT: **364ms**  
QTc: **381ms**  
PR: **144ms**  
P-R-T: **65° 51° 60**



**CID** : 2305622074  
**Name** : Mrs. BHANDARI SUPRIYA  
RAVIKUMAR  
**Age / Sex** : 31 Years/FEMALE  
**Ref. Dr** :  
**Reg. Location** : Swargate, Pune Main Centre

**Reg. Date** : 25-Feb-2023  
**Reported** : 25-Feb-2023 / 12:04

Use a QR Code Scanner  
Application To Scan the Code

**USG WHOLE ABDOMEN**

**LIVER:** Size, shape and echopattern are normal. No focal lesions noted. No IHBR dilatation. Hepatic veins appear normal. Portal vein and common bile duct show normal caliber.

**GALL BLADDER :** Well distended. No calculi. Wall thickness is normal. No evidence of any pericholecystic collection.

**PANCREAS :** Normal in size and echotexture. Pancreatic duct is normal.

**SPLEEN :** Normal in size and echopattern. No focal lesion. Splenic vein is normal.

**RIGHT KIDNEY :** Measures 9.7 x 4.0 cm. Normal in size and echogenicity. No calculus or hydronephrosis. Corticomedullary differentiation is maintained.

**LEFT KIDNEY :** Measures 9.5 x 4.6 cm. Normal in size and echogenicity. No calculus or hydronephrosis. Corticomedullary differentiation is maintained.

Paraaortic and paracaval region appears to be normal.  
No evidence of lymphnodes noted.  
No free fluid in abdomen.

**URINARY BLADDER :** Well distended. No calculi. Wall thickness is normal.

**UTERUS :** Anteverted normal in size, measures 7.8 x 4.0 x 4.1 cm. No area of increased or decreased echogenicity.  
Endometrial echoes are normal. Endometrial thickness is 8.1 mm.

Both the ovaries are normal in size shape and echotexture.  
No obvious abnormal ovarian or adnexal mass lesion.  
No free fluid noted in the POD.

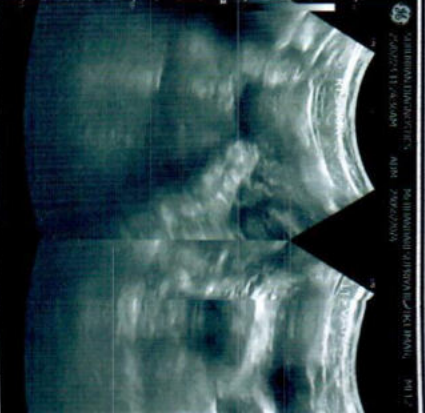
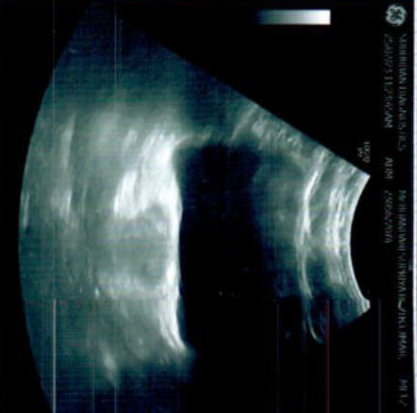
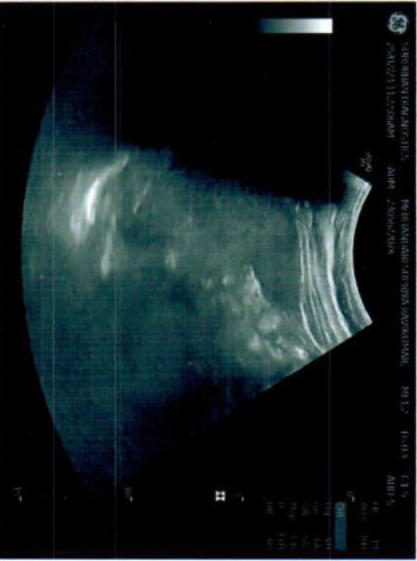
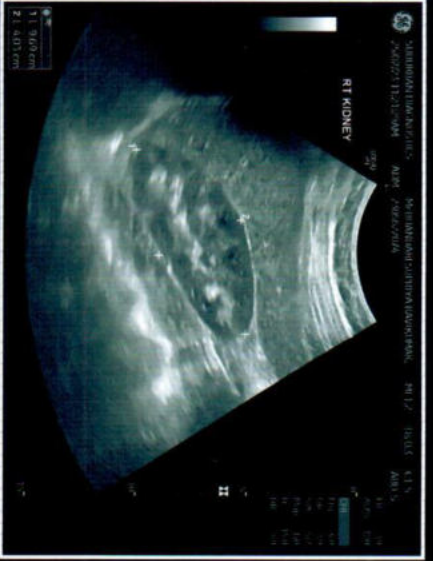
**IMPRESSION :** USG Abdomen and pelvis study is within normal limits.

Clinical correlation is indicated. -----End of Report-----

This report is prepared and physically checked by Dr Nikhil Joshi before dispatch.

Click here to view images <<ImageLink>>

  
**Dr. NIKHIL G. JOSHI**  
M.B.B.S., D.M.R.E.  
Reg. No. 2001/02/397





Authenticity Check  
<<QRCode>>

CID : 2305622074  
Name : Mrs BHANDARI SUPRIYA  
RAVIKUMAR  
Age / Sex : 31 Years/Female  
Ref. Dr :  
Reg. Location : Swargate, Pune Main Centre

Use a QR Code Scanner  
Application To Scan the Code  
Reg. Date : 25-Feb-2023  
Reported : 25-Feb-2023 / 10:15

### X-RAY CHEST PA VIEW

The lung fields are clear with no parenchymal lesion.

The cardiothoracic ratio is maintained and the cardiac outline is normal.

The domes of the diaphragm are normal.

The cardio and costophrenic angles are clear.

Bony thorax is normal.

**IMPRESSION** : Essentially normal X-ray of the chest.

Clinical corelation is indicated.

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

This report is prepared and physically checked by Dr Nikhil Joshi before dispatch.



**DR. NIKHIL G. JOSHI**  
**M.B.B.S., D.M.R.E.**  
**REG. NO. 2001/02/397**

आयकर विभाग  
INCOME TAX DEPARTMENT

भारत सरकार  
GOVT. OF INDIA

स्थायी लेखा संख्या कार्ड  
Permanent Account Number Card

DDLPS1706Q

नाम / Name  
BHANDARI SUPRIYA RAVIKUMAR

पिता का नाम / Father's Name  
SUNIL SITARAM SHIGAVAN

जन्म की तारीख / Date of Birth  
09/11/1991

हस्ताक्षर / Signature

22/05/2018

*Shigavan*

8425939977

supriyashigavan@gmail.com  
↑  
(nine)

SUBURBAN DIAGNOSTICS PVT. LTD.  
Seraph Centre, Opp. Pentagon Mall,  
Near Panchami Hotel,  
Shahu College Road, Pune-411 009.  
Tel: 020-41094509