



CID : 2305622235  
 Name : MRS.SHRUTIKA ADITYA PUJARI  
 Age / Gender : 30 Years / Female  
 Consulting Dr. : -  
 Reg. Location : Mahavir Nagar, Kandivali West (Main Centre)

Collected : 25-Feb-2023 / 15:56  
 Reported : 25-Feb-2023 / 17:55

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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	13.4	12.0-15.0 g/dL	Spectrophotometric
RBC	4.71	3.8-4.8 mil/cmm	Elect. Impedance
PCV	41.7	36-46 %	Measured
MCV	88.5	80-100 fl	Calculated
MCH	28.4	27-32 pg	Calculated
MCHC	32.1	31.5-34.5 g/dL	Calculated
RDW	13.0	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	7350	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	41.0	20-40 %	
Absolute Lymphocytes	3013.5	1000-3000 /cmm	Calculated
Monocytes	4.0	2-10 %	
Absolute Monocytes	294.0	200-1000 /cmm	Calculated
Neutrophils	49.0	40-80 %	
Absolute Neutrophils	3601.5	2000-7000 /cmm	Calculated
Eosinophils	6.0	1-6 %	
Absolute Eosinophils	441.0	20-500 /cmm	Calculated
Basophils	0.0	0.1-2 %	
Absolute Basophils	0.0	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<b><u>PLATELET PARAMETERS</u></b>			
Platelet Count	203000	150000-400000 /cmm	Elect. Impedance
MPV	11.8	6-11 fl	Calculated
PDW	27.7	11-18 %	Calculated
<b><u>RBC MORPHOLOGY</u></b>			



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Reported : 25-Feb-2023 / 13:14

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Hypochromia -  
Microcytosis -  
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 5 2-10 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 : Mahavir Nagar, Kandivali West (Main Centre)

Collected : 25-Feb-2023 / 09:56  
 Reported : 25-Feb-2023 / 15:26

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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	88.0	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	79.8	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.46	0.3-1.2 mg/dl	Vanadate oxidation
BILIRUBIN (DIRECT), Serum	0.17	0-0.3 mg/dl	Vanadate oxidation
BILIRUBIN (INDIRECT), Serum	0.29	<1.2 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.2	5.7-8.2 g/dL	Biuret
ALBUMIN, Serum	4.6	3.2-4.8 g/dL	BCG
GLOBULIN, Serum	2.6	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.8	1 - 2	Calculated
SGOT (AST), Serum	13.5	<34 U/L	Modified IFCC
SGPT (ALT), Serum	10.0	10-49 U/L	Modified IFCC
GAMMA GT, Serum	18.2	<38 U/L	Modified IFCC
ALKALINE PHOSPHATASE, Serum	44.2	46-116 U/L	Modified IFCC
BLOOD UREA, Serum	21.5	19.29-49.28 mg/dl	Calculated
BUN, Serum	10.0	9.0-23.0 mg/dl	Urease with GLDH
CREATININE, Serum	0.6	0.50-0.80 mg/dl	Enzymatic



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Reported : 25-Feb-2023 / 20:00

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eGFR, Serum	125	>60 ml/min/1.73sqm	Calculated
URIC ACID, Serum	4.1	3.1-7.8 mg/dl	Uricase/ Peroxidase
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

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

*Bmhasakar*

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



MC-2111



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 Reg. Location : Mahavir Nagar, Kandivali West (Main Centre)

Collected : 25-Feb-2023 / 09:56  
 Reported : 25-Feb-2023 / 14:58

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**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	5.5	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	111.1	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 Borivali Lab, Borivali West

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



*Bmhasakar*

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



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 Reg. Location : Mahavir Nagar, Kandivali West (Main Centre)

Collected : 25-Feb-2023 / 09:56  
 Reported : 25-Feb-2023 / 16:04

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**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	Pale yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.010	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	20	-	-
<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	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	10-12		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	++	Less than 20/hpf	
Others	Kindly rule out contamination		

**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 Borivali Lab, Borivali West

*Bmhasakar*

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



MC-2111



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Reg. Location : Mahavir Nagar, Kandivali West (Main Centre)

Collected :  
Reported :

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



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Age / Gender : 30 Years / Female  
Consulting Dr. : -  
Reg. Location : Mahavir Nagar, Kandivali West (Main Centre)

Collected : 25-Feb-2023 / 09:56  
Reported : 25-Feb-2023 / 18:35

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

<b><u>PARAMETER</u></b>	<b><u>RESULTS</u></b>
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**







CID : 2305622235  
Name : MRS.SHRUTIKA ADITYA PUJARI  
Age / Gender : 30 Years / Female  
Consulting Dr. : -  
Reg. Location : Mahavir Nagar, Kandivali West (Main Centre)

Collected : 25-Feb-2023 / 09:56  
Reported : 25-Feb-2023 / 16:12

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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
CHOLESTEROL, Serum	157.4	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	68.5	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	65.2	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Elimination/ Catalase
NON HDL CHOLESTEROL, Serum	92.2	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	78.5	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	Calculated
VLDL CHOLESTEROL, Serum	13.7	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	2.4	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	1.2	0-3.5 Ratio	Calculated

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



*Namrata*

**Dr.NAMRATA RAUL**  
**M.D (Biochem)**  
**Biochemist**



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 Name : MRS.SHRUTIKA ADITYA PUJARI  
 Age / Gender : 30 Years / Female  
 Consulting Dr. : -  
 Reg. Location : Mahavir Nagar, Kandivali West (Main Centre)

Collected : 25-Feb-2023 / 09:56  
 Reported : 25-Feb-2023 / 15:20

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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	4.8	3.5-6.5 pmol/L	CLIA
Free T4, Serum	15.9	11.5-22.7 pmol/L	CLIA
sensitiveTSH, Serum	2.795	0.55-4.78 microIU/ml	CLIA



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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 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)

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab

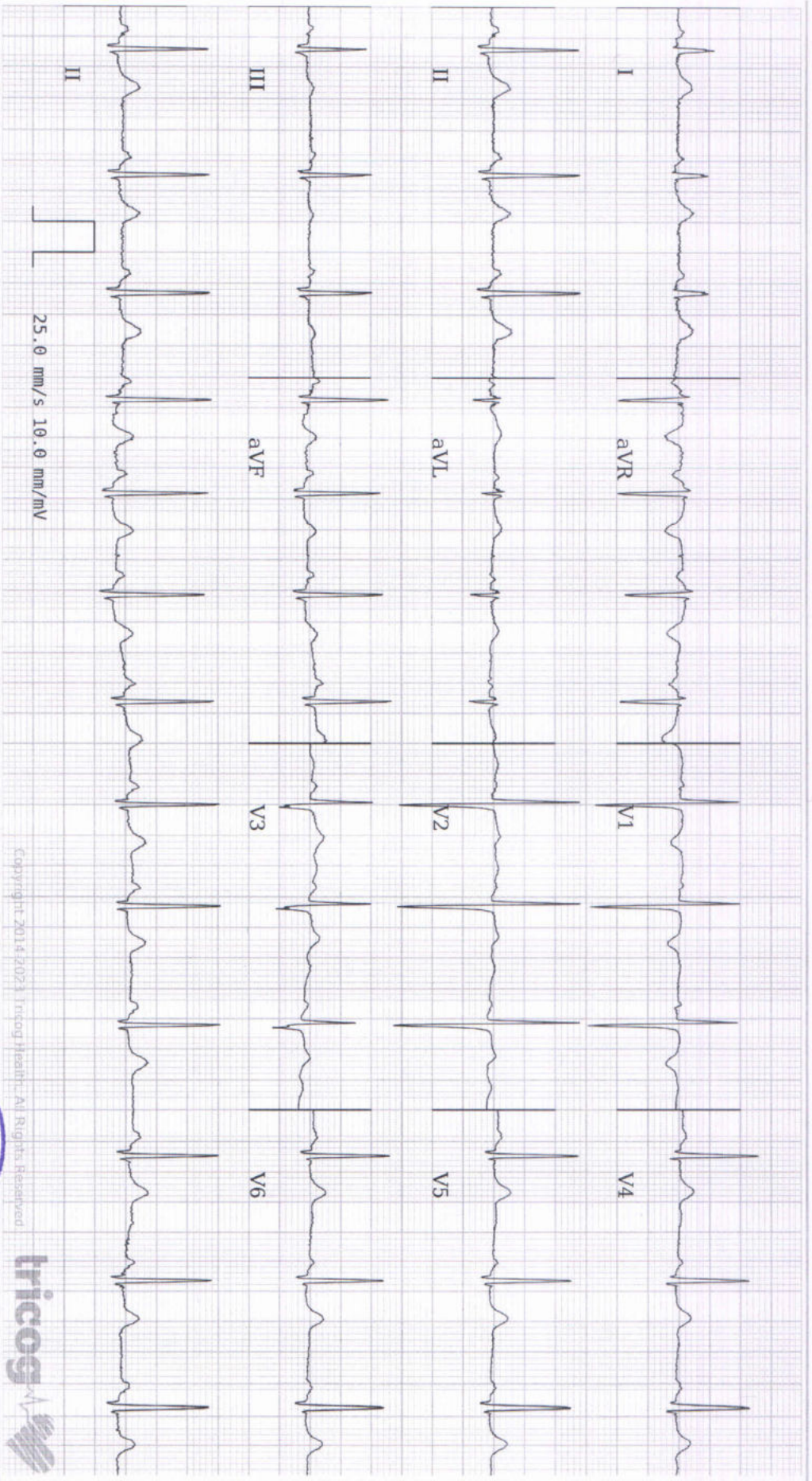
\*\*\* End Of Report \*\*\*

*Anupa*

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



**SUBURBAN DIAGNOSTICS - MAHAVIR NAGAR, KANDIVALI WEST**  
 Patient Name: SHRUTIKA ADITYA PUJARI Date and Time: 25th Feb 23 11:45 AM  
 Patient ID: 2305622235



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Age **30** NA NA  
 years months days

Gender **Female**

Heart Rate **81bpm**

Patient Vitals

BP: 110/70 mmHg

Weight: 60 kg

Height: 162 cm

Pulse: 82 bpm

Spo2: NA

Resp: NA

Others:

Measurements

QRSD: 80ms

QT: 360ms

QTc: 425ms

PR: 124ms

P-R-T: 52° 69° 33°

REPORTED BY

Dr. Aita Bhosale  
 M.B.B.S.F.C.D.C.C (DIP: Cardiology)  
 2013062200

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.



CID# : 2305622235  
Name : MRS.SHRUTIKA ADITYA PUJARI  
Age / Gender : 30 Years/Female  
Consulting Dr. : Collected : 25-Feb-2023 / 09:39  
Reg.Location : Mahavir Nagar, Kandivali West (Main Centre) Reported : 27-Feb-2023 / 11:15

## PHYSICAL EXAMINATION REPORT

History and Complaints: NIL, H/O BREAST LUMP(fibroadenoma).

### EXAMINATION FINDINGS:

Height (cms):	162	Weight (kg):	60.6
Temp : Afebrile	Afebrile	Skin:	Normal
Blood Pressure (mm/Hg):	110/70	Nails:	Healthy
Pulse:	82/MIN	Lymph Node:	Not Palpable

### Systems

Cardiovascular: S1,S2 Normal No Murmurs

Respiratory: Air Entry Bilaterally Equal

Genitourinary: NAD

GI System: Soft non tender No Organomegaly

CNS: NAD

IMPRESSION:HEALTHY.

ADVICE: REGULAR EXERCISE. HEALTHY DIET. FOLLW UP WITH PHYSICIAN I/V/O USG FINDINGS.

### CHIEF COMPLAINTS:

- |                        |    |
|------------------------|----|
| 1) Hypertension:       | NO |
| 2) IHD:                | NO |
| 3) Arrhythmia:         | NO |
| 4) Diabetes Mellitus : | NO |
| 5) Tuberculosis :      | NO |
| 6) Asthama:            | NO |

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- |  |                       |
|--|-----------------------|
| 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 : >6YRS AGO                  | (LT)BREAST LUMPECTOMY |

**PERSONAL HISTORY:**

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

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



  
Dr. Ajita Bhosale  
PHYSICIAN

**Dr. AJITA BHOSALE**  
Reg. No. 2013/062200  
MBBS/D. Cardiology



भारत सरकार  
Government of India



आधार

भारत सरकार  
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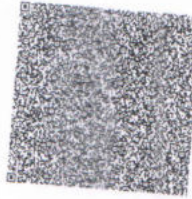
10/12/2011

03447907

To  
**Shrutika Aditya Pujari**  
श्रुतिका आदित्य पुजारी  
B-404, 4th Floor Lubna CHS LTD,  
Jankalyan Nagar,  
Radhakrishna Hotel,  
Malad West,  
VTC: Mumbai, PO: Kharodi,  
Sub District: Borivali, District: Mumbai Suburban,  
State: Maharashtra, PIN Code: 400095,  
Mobile: 7208313350



KF034479078FI



आपका आधार क्रमांक / Your Aadhaar No. :

**8762 7815 8772**

मेरा आधार, मेरी पहचान



भारत सरकार  
Government of India



आधार



श्रुतिका आदित्य पुजारी  
**Shrutika Aditya Pujari**  
जन्म तिथि / DOB: 07/03/1992  
महिला / Female

10/12/2011

**8762 7815 8772**

मेरा आधार, मेरी पहचान

Date:- 25/2/23.

CID: 2305622235

Name: Mrs Shrutika Pujari

Sex / Age: F / 30 yrs.

**EYE CHECK UP**

Chief complaints: — No

Systemic Diseases: — No

Past history: — No

Unaided Vision: — No

Aided Vision: — No

Refraction:  $\odot$  6/6       $\odot$  6/6  
(Right Eye)                      (Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn	
Distance		/			6/6		/		
Near	/				N/6	/			

Colour Vision: Normal / Abnormal

Remark: Normal vision.





# SUBURBAN DIAGNOSTICS PVT LTD.

**Patient Details**      Date: 25-Feb-23      Time: 11:57:12 AM  
**Name:** SHRUTIKA PUJARI ID: 2305622235  
**Age:** 30 y      **Sex:** F      **Height:** 162 cms      **Weight:** 60 Kgs  
**Clinical History:** ROUTINE CHECK UP

**Medications:** NIL

## Test Details

**Protocol:** Bruce      **Pr.MHR:** 190 bpm      **THR:** 161 (85 % of Pr.MHR) bpm  
**Total Exec. Time:** 5 m 21 s      **Max. HR:** 167 (88% of Pr.MHR) bpm      **Max. Mets:** 7.00  
**Max. BP:** 140 / 70 mmHg      **Max. BP x HR:** 23380 mmHg/min      **Min. BP x HR:** 6160 mmHg/min  
**Test Termination Criteria:** FATIGUE

## Protocol Details

Stage Name	Stage Time (min : sec)	Mets	Speed (mph)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
Supine	1 : 37	1.0	0	0	100	110 / 70	-4.46 aVR	-2.83 V6
Standing	1 : 8	1.0	0	0	88	110 / 70	-0.85 aVR	2.12 II
Hyperventilation	0 : 6	1.0	0	0	97	110 / 70	-0.42 aVR	0.71 I
1	3 : 0	4.6	1.7	10	156	120 / 70	-1.06 III	3.54 V4
Peak Ex	2 : 21	7.0	2.5	12	167	140 / 70	-1.91 III	5.31 V4
Recovery(1)	3 : 0	1.8	1	0	101	120 / 70	-1.70 aVR	5.66 V3
Recovery(2)	1 : 0	1.0	0	0	100	110 / 70	-0.85 III	1.06 I
Recovery(3)	0 : 1	1.0	0	0	100	110 / 70	-0.64 III	1.06 I

## Interpretation


FAIR EFFORT TOLERANCE.  
 LOW WORKLOAD ACHIEVED.  
 APPROPRIATE CHRONOTROPIC AND INOTROPIC RESPONSE.  
 NO SIGNIFICANT ST-T CHANGES AT PEAK EXERCISE.  
 NO SIGNIFICANT ST-T CHANGES AT RECOVERY.  
 NO ARRYTHMIAS NOTED.

**IMPRESSION:** THIS EXERCISE STRESS TEST IS NEGATIVE FOR REVERSIBLE INDUCIBLE ISCHEMIA.

Disclaimer: Negative stress test does not rule out Coronay Artery Disease.  
 Positive test is suggestive but not confirmatory of Coronary artery Disease.  
 Hence, clinical correlation is mandatory.

Ref. Doctor: ARCOFEMI  
 ( Summary Report edited by user )



  
**Doctor: DR AJITA BHOSALE**  
 (c) Schiller Healthcare India Pvt. Ltd. V 4.53  
**Dr. AJITA BHOSALE**  
**Reg. No. 2013/062200**  
**MBBS/D. Cardiology**



# SUBURBAN DIAGNOSTICS PVT LTD.

# Test Report

SHRUTIKA PUJARI (30 F)

ID: 2305622235

Date: 25-Feb-23

Exec Time : 0 m 0 s

Stage Time : 1 m 31 s

HR: 93 bpm

Protocol: Bruce

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 161 bpm)

B.P: 110 / 70

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

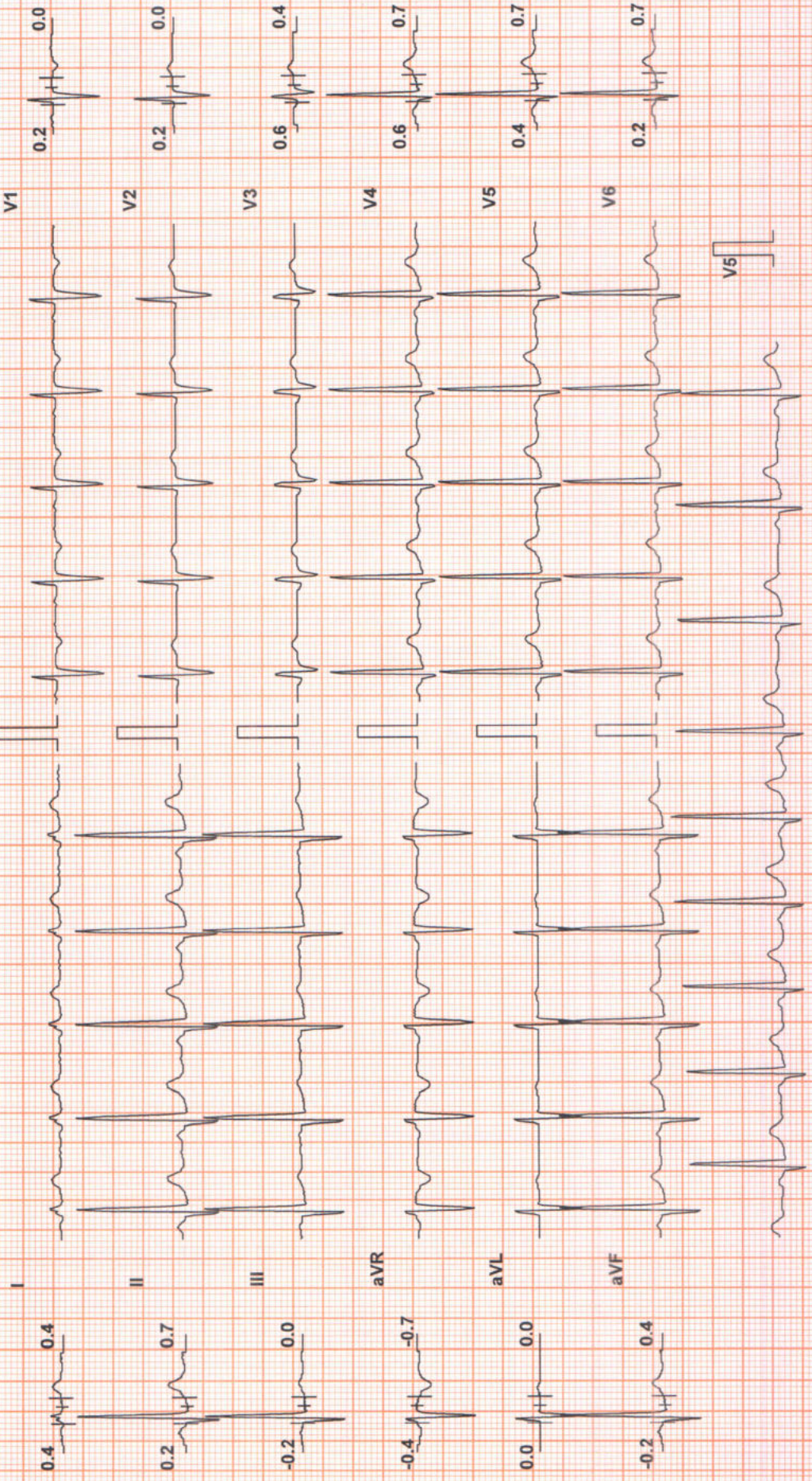


Chart Speed: 25 mm/sec  
Schiller Spandau V 4.52

Filter: 35 Hz

Mains Filt: ON Amp: 10 mm

50 = R - 60 ms J = R + 60 ms Post J = J + 60 ms  
Linked Median

SHRUTIKA PUJARI (30 F)

Protocol: Bruce

ID: 2305622235

Date: 25-Feb-23

Exec Time : 0 m 0 s

Stage Time : 1 m 2 s

HR: 94 bpm

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 161 bpm)

B.P: 110 / 70

ST Level (mm) ST Slope (mV/s)

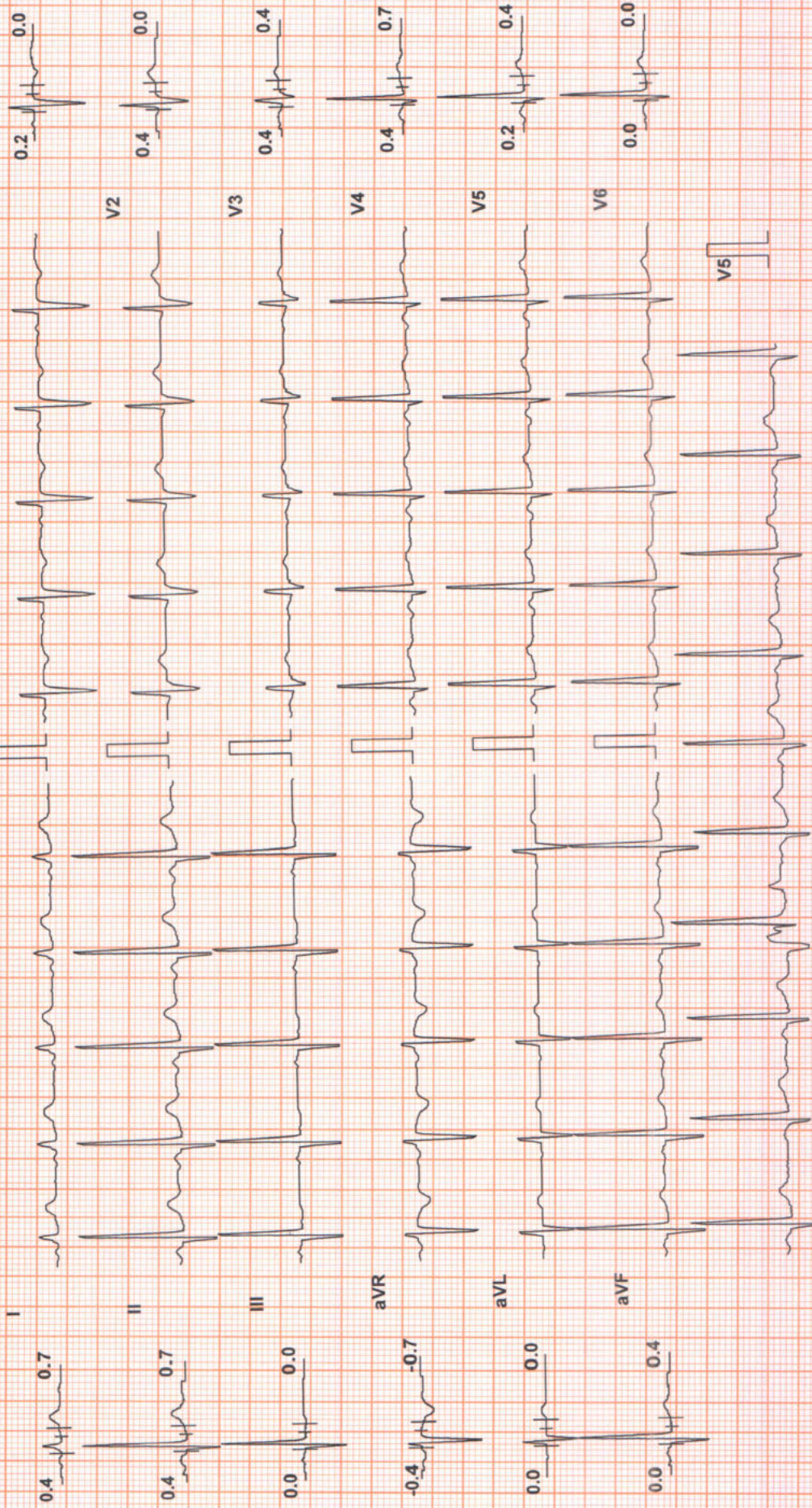


Chart Speed: 25 mm/sec

Schiller Spandian Y 4.52

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

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

Linked Median

SHRUTIKA PUJARI (30 F)

Protocol: Bruce

ID: 2305622235

Date: 25-Feb-23

Exec Time : 0 m 0 s

Stage Time : 0 m 0 s

HR: 101 bpm

Speed: 0 mph

(THR: 161 bpm)

B.P: 110/70

Grade: 0 %

ST Level (mm)

ST Slope (mV/s)

0.4

0.7

0.2

0.7

-0.2

-0.4

-0.4

-1.1

0.0

0.0

0.2

0.4

ST Level (mm)

ST Slope (mV/s)

V1

0.2

0.4

V2

0.4

0.0

V3

0.6

0.4

V4

0.6

0.7

V5

0.4

0.7

V6

0.4

0.7

V5

Chart Speed: 25 mm/sec

Schiller Spandian V 4.52

Filter: 35 Hz

Mains Filt: ON

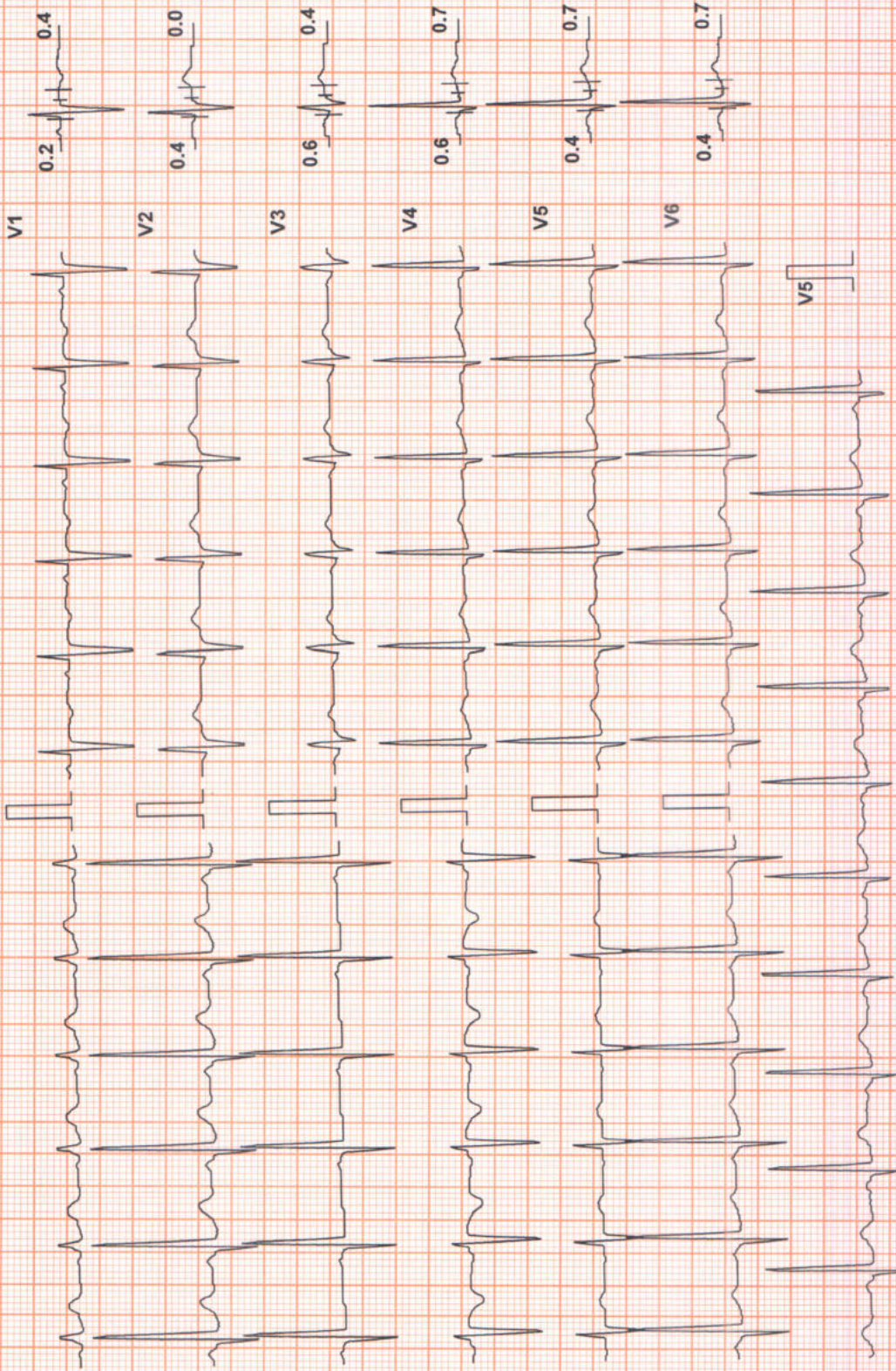
Amp: 10 mm

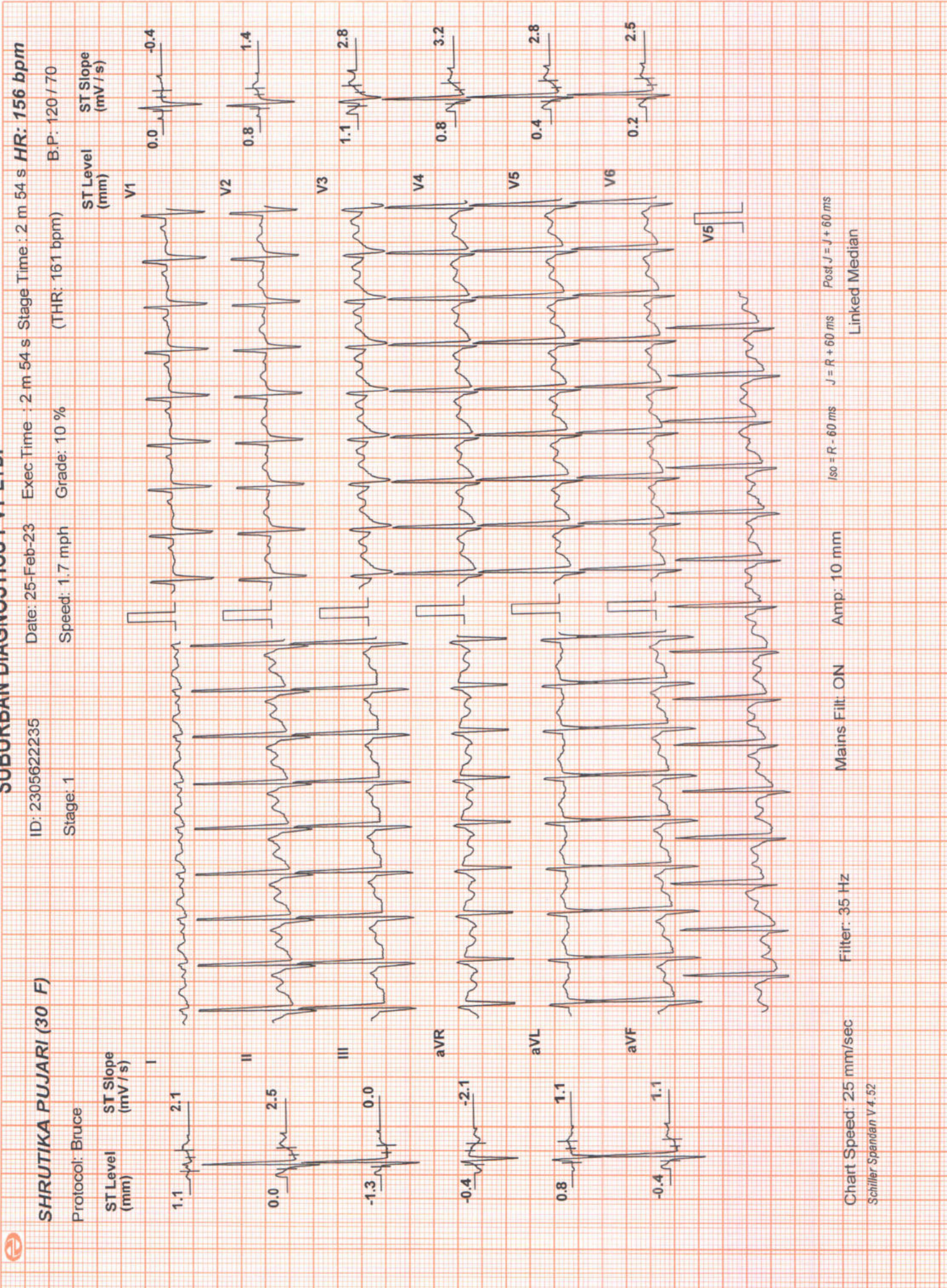
iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median





SHRUTIKA PUJARI (30 F) ID: 2305622235 Date: 25-Feb-23 Exec Time: 2 m 54 s Stage Time: 2 m 54 s HR: 156 bpm  
 Protocol: Bruce Speed: 1.7 mph Grade: 10% (THR: 161 bpm) B.P.: 120/70  
 Stage: 1

Chart Speed: 25 mm/sec Filter: 35 Hz Mains Filt: ON Amp: 10 mm Iso = R - 60 ms J = R + 60 ms Post J = J + 60 ms  
 Schiller Spanian V4.52 Linked Median

SHRUTIKA PUJARI (30 F)

ID: 2305622235

Date: 25-Feb-23

Exec Time : 5 m 15 s

Stage Time : 2 m 15 s

HR: 167 bpm

Protocol: Bruce

Stage: Peak Ex

Speed: 2.5 mph

Grade: 12 %

(THR: 161 bpm)

B.P: 140/70

ST Level (mm) ST Slope (mV/s)

1.3 2.8

1.1 2.8

-0.4 -0.4

-1.1 -2.8

0.8 1.8

0.6 1.8

ST Level (mm) ST Slope (mV/s)

-0.2 -0.4

1.1 2.1

1.9 4.6

1.1 3.9

1.1 3.5

0.6 2.5

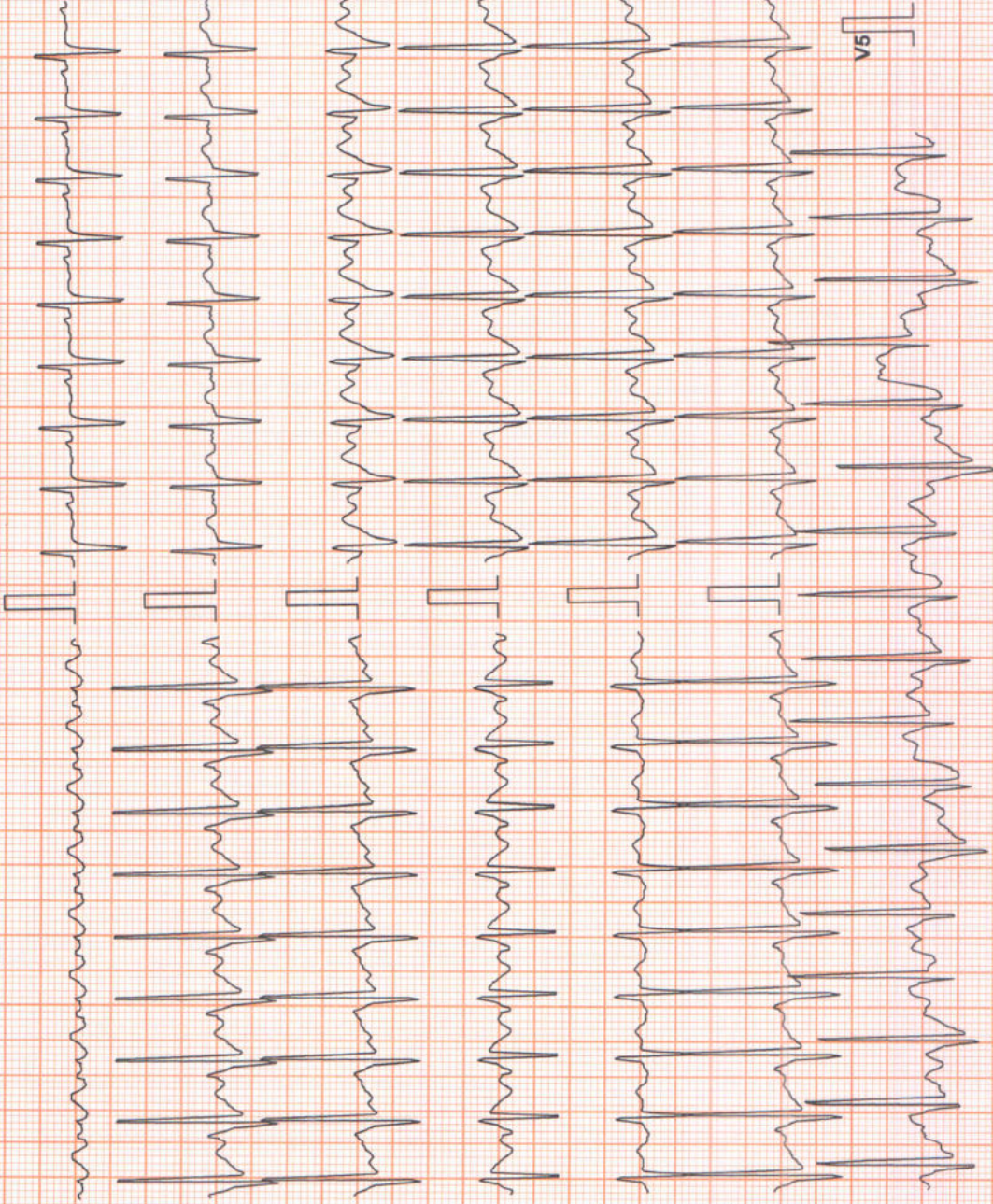


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spandan V 4.52

Linked Median

SHRUTIKA PUJARI (30 F)

ID: 2305622235

Date: 25-Feb-23

Exec Time : 5 m 21 s Stage Time : 2 m 54 s HR: 102 bpm

Stage: Recovery(1)

Speed: 1 mph

Grade: 0 %

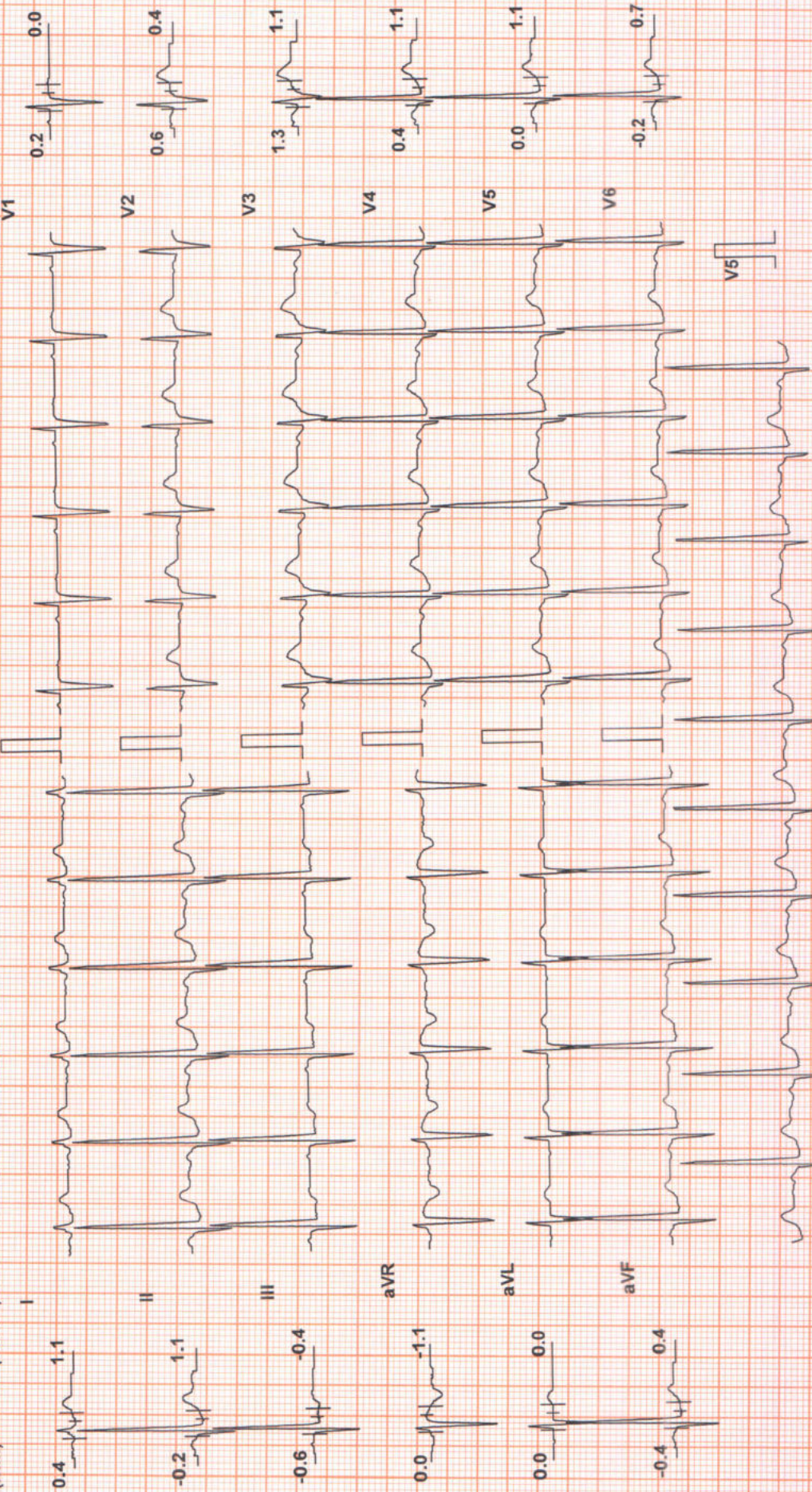
B.P: 120 / 70

(THR: 161 bpm)

Protocol: Bruce

ST Level (mm)

ST Slope (mV/s)



Post J = J + 60 ms

J = R + 60 ms

ISO = R - 60 ms

Mains Filt: ON

Filter: 35 Hz

Chart Speed: 25 mm/sec

Schiller Spandan V 4.52

Linked Median

Amp: 10 mm

SHRUTIKA PUJARI (30 F)

ID: 2305622235

Date: 25-Feb-23

Exec Time : 5 m 21 s Stage Time : 0 m 54 s HR: 100 bpm

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

B.P: 110/70

(THR: 161 bpm)

ST Level (mm)

0.4

-0.4

-0.6

0.0

0.0

-0.4

1.1

0.7

-0.4

-0.4

0.0

0.0

ST Slope (mV/s)

1.1

0.7

-0.4

-0.4

0.0

0.0

ST Level (mm)

V1

V2

V3

V4

V5

V6

0.2

0.4

0.6

0.4

-0.2

0.0

ST Slope (mV/s)

0.0

0.0

0.7

1.1

0.4

0.7

Chart Speed: 25 mm/sec

Schiller Spandan V-4.52

Filter: 35 Hz

Mains Filt: ON

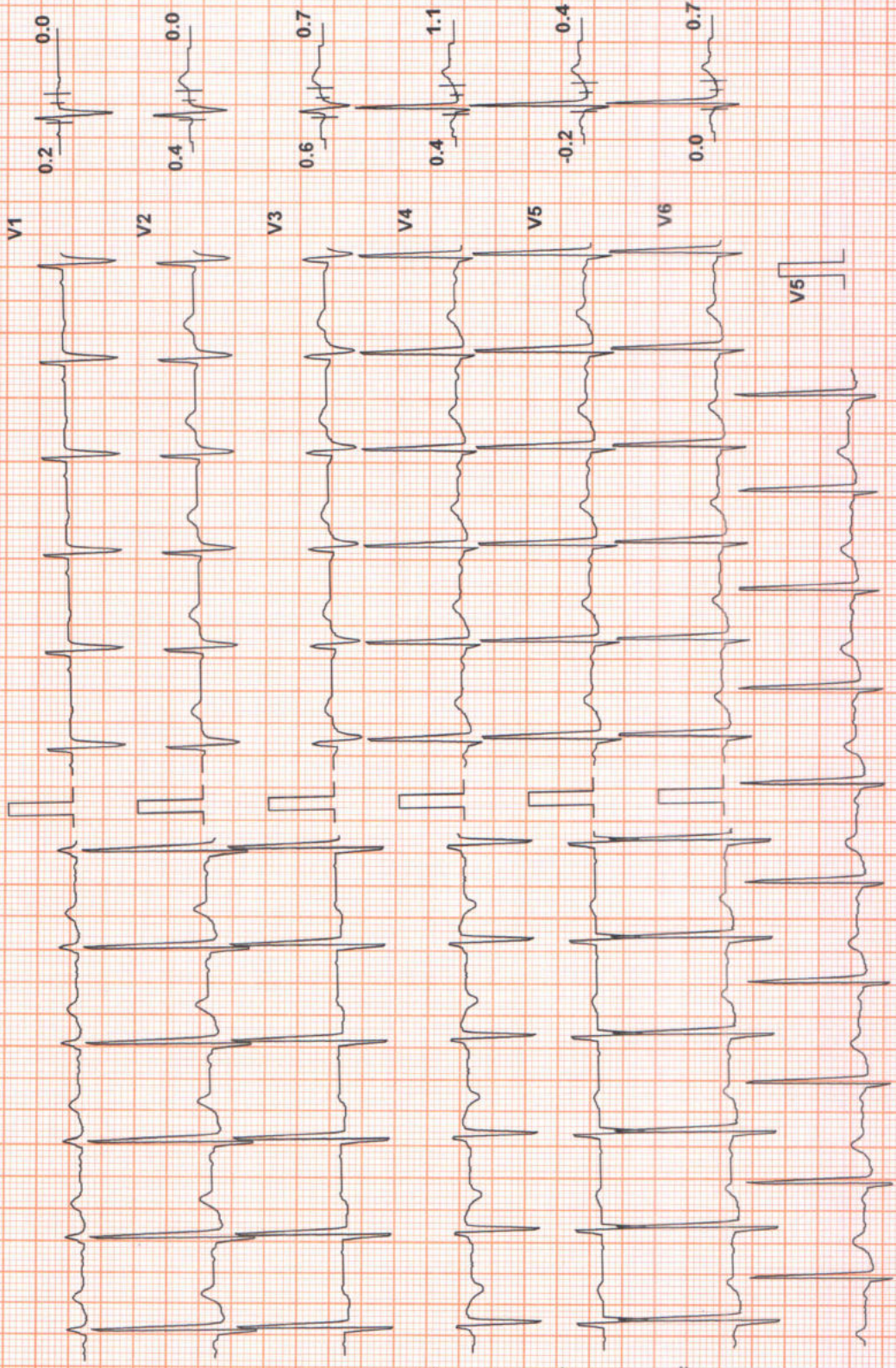
Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median





SHRUTIKA PUJARI (30 F)

ID: 2305622235

Date: 25-Feb-23

Exec Time : 5 m 21 s Stage Time : 0 m 55 s HR: 100 bpm

Protocol: Bruce

Stage: Recovery(3)

Speed: 0 mph

Grade: 0 %

(THR: 161 bpm)

B.P: 110 / 70

ST Level (mm)

ST Slope (mV / s)

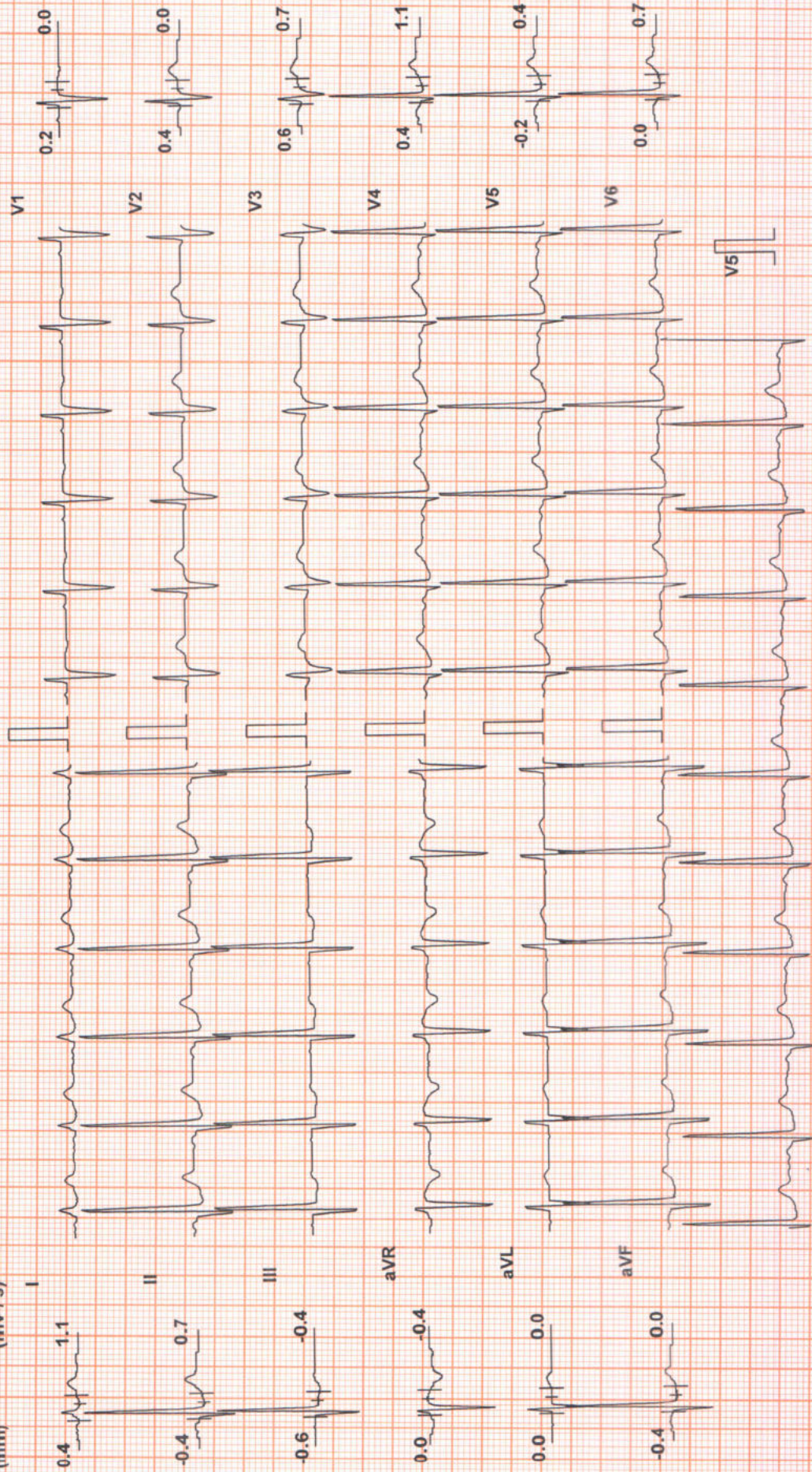


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

Schiller Spandan V 4.52



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CID : 2305622235  
Name : Mrs SHRUTIKA ADITYA PUJARI  
Age / Sex : 0 Years/Female  
Ref. Dr :  
Reg. Location : Mahavir Nagar, Kandivali West Main Centre  
Reg. Date : 25-Feb-2023  
Reported : 25-Feb-2023 / 14:12

## USG WHOLE ABDOMEN

### LIVER:

The liver is normal in size (14.3 cm), shape and smooth margins. It shows normal parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein and CBD appears normal. **Small chronic calcified granuloma is noted in the right lobe of liver, measuring 5.0 mm.**

### GALL BLADDER:

The gall bladder is physiologically distended and appears normal. No evidence of gall stones or mass lesions seen. **Few (2-3) small hyperechoic, non-echoreflexive lesions noted abutting the wall of gall bladder, largest measuring approx. 6.0 mm- likely s/o Gall Bladder polyps.**

### PANCREAS:

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

### KIDNEYS:

Right kidney measures 9.6 x 3.9 cm. Left kidney measures 9.1 x 4.4 cm.  
Both the kidneys are normal in size shape and echotexture.  
No evidence of any calculus, hydronephrosis or mass lesion seen.

### SPLEEN:

The spleen is normal in size (7.8 cm) 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 and appears normal. It measures 8.8 x 3.6 x 5.0 cm in size.  
The endometrial thickness is 13.0 mm.

### OVARIES:

Right ovary = 3.2 x 2.0 cm. Left ovary = 2.8 x 2.1 cm.  
Both the ovaries are well visualised and appears normal.  
There is no evidence of any ovarian or adnexal mass seen.

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023022509400794>

Page no 1 of 2



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CID : 2305622235  
Name : Mrs SHRUTIKA ADITYA PUJARI  
Age / Sex : 0 Years/Female  
Ref. Dr :  
Reg. Date : 25-Feb-2023  
Reg. Location : Mahavir Nagar, Kandivali West Main Centre  
Reported : 25-Feb-2023 / 14:12

**IMPRESSION:-**

1. Chronic calcified granuloma in right lobe of liver as described.
2. Few Gall Bladder polyps as described

**ADVICE:** Kindly correlate clinically and Suggested Follow up

(Above USG report is subject to findings evident at the time of scan & associated bowel gases. This modality has its own limitations & should be considered as a professional opinion. Clinical correlation is advised to arrive at a diagnosis. This report cannot be used for medico - legal purposes)

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

**Dr. Chirag Patel**  
Consultant Radiologist  
M.B.B.S, MD (Radiologist)  
Reg. No. MMC 20170773319

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Page no 2 of 2



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CID : 2305622235  
Name : Mrs SHRUTIKA ADITYA PUJARI  
Age / Sex : 30 Years/Female  
Ref. Dr :  
Reg. Date : 25-Feb-2023  
Reg. Location : Mahavir Nagar, Kandivali West Main Centre  
Reported : 25-Feb-2023 / 12:30

**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. Chirag Patel before dispatch.**

**Dr. Chirag Patel**  
Consultant Radiologist  
M.B.B.S, MD (Radiologist)  
Reg. No. MMC 20170773319

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