

CID#	: 2205901296	SID#	: 177804939429
Name	: MRS.MADHURI .	Registered	: 28-Feb-2022 / 09:57
Age / Gender	: 26 Years/Female	Collected	: 28-Feb-2022 / 09:57
Consulting Dr.	: -	Reported	: 01-Mar-2022 / 10:24
Reg.Location	: J B Nagar, Andheri East (Main Centre)	Printed	: 01-Mar-2022 / 10:33

## PHYSICAL EXAMINATION REPORT

### History and Complaints:

NO PRESENT MEDICAL COMPLAINTS.

### EXAMINATION FINDINGS:

<b>Height (cms):</b>	162 CMS	<b>Weight (kg):</b>	70 KGS
<b>Temp (0c):</b>	AFBERILE	<b>Skin:</b>	NAD
<b>Blood Pressure (mm/hg):</b>	110/80 MMHG	<b>Nails:</b>	NAD
<b>Pulse:</b>	91/MIN	<b>Lymph Node:</b>	NOT PALPABLE

### Systems

**Cardiovascular:** S1 S2 HEARD

**Respiratory:** AEBE

**Genitourinary:** NAD

**GI System:** NAD

**CNS:** NAD

### IMPRESSION:

**CLIENT IS IN GOOD GENERAL HEALTH EXCEPT FOR USG SHOWS BOTH OVARIES APPEAR BULKY WITH MULTIPLE TINY PERIPHERAL FOLLICLES.**

### ADVICE:

---

### CHIEF COMPLAINTS:

- |                             |    |
|-----------------------------|----|
| 1) <b>Hypertension:</b>     | NO |
| 2) <b>IHD</b>               | NO |
| 3) <b>Arrhythmia</b>        | NO |
| 4) <b>Diabetes Mellitus</b> | NO |

**CENTRAL PROCESSING LAB:** 2<sup>nd</sup> Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

**HEALTHLINE - MUMBAI:** 022-6170-0000 | **OTHER CITIES:** 1800-266-4343

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- |  |                           |
|--|---------------------------|
| 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             | PCOD                      |
| 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                            | CSECTION 1 & HALF YRS AGO |
| 17) Musculoskeletal System               | NO                        |

**PERSONAL HISTORY:**

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

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



**Dr.Ashish Deshmukh**  
**M.D. (Medicine)**



Suburban Diagnostics India Pvt. Ltd.

Sahar Plaza JB Nagar Andheri(E) Mumbai-400059

2205901296 (422) / MADHURI / 26 Yrs / F / 162 Cms / 70 Kg Date: 28-Feb-2022 Refd By : . Examined By: Dr. Ashish V Deshmukh MD

Report



*Deshmukh*

**DR. ASHISH V. DESHMUKH**  
MD. (MEDICINE)  
CONSULTING PHYSICIAN  
REG. NO. 59907

**Suburban Diagnostics India Pvt Ltd**  
Shop No.9/10/19/20, Wing-A, Bonanza Building,  
Sahar Plaza, Near Kofinoor Hotel,  
Below J.B Nagar Metro Station,  
Andheri -Kurla Road, Andheri East, Mumbai -400059



Stage	Time	Duration	Speed(mph)	Elevation	METs	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:04	0:04	00.0	00.0	01.0	105	54 %	110/80	115	00	
Standing	00:26	0:22	00.0	00.0	01.0	100	52 %	110/80	110	00	
HV	00:48	0:22	00.0	00.0	01.0	111	57 %	110/80	122	00	
Warm Up	01:08	0:20	00.0	00.0	01.0	106	55 %	110/80	116	00	
ExStart	01:28	0:20	01.0	00.0	01.0	120	62 %	110/80	132	00	
BRUCE Stage 1	04:28	3:00	01.7	10.0	04.7	146	75 %	130/80	189	00	
BRUCE Stage 2	07:28	3:00	02.5	12.0	07.1	172	89 %	150/80	258	00	
PeakEx	07:47	0:19	03.4	14.0	07.4	172	89 %	170/80	292	00	
Recovery	08:47	1:00	01.1	00.0	01.1	163	84 %	150/80	244	00	
Recovery	09:47	2:00	00.0	00.0	01.0	130	67 %	150/80	195	00	
Recovery	11:47	4:00	00.0	00.0	01.0	114	59 %	130/80	148	00	
Recovery	13:47	6:00	00.0	00.0	01.0	110	57 %	110/80	121	00	
Recovery	14:06	6:18	00.0	00.0	01.0	117	60 %	110/80	128	00	

**FINDINGS :**

**Exercise Time** : 06:19  
**Max HR Attained** : 172 bpm 89% of Target 194  
**Max BP Attained** : 170/80  
**Max WorkLoad Attained** : 7.4 Fair response to induced stress  
**History** : Nil  
**Test End Reasons** : Test Complete, Heart Rate Acheived

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 MD. (MEDICINE)  
 CONSULTING PHYSICIAN  
 REG. NO. 59907

*Deshmukh*

Doctor : Dr Ashish V Deshmukh





2205901296 / MADHURI / 26 Yrs / F / 162 Cms / 70 Kg Date: 28-Feb-2022 Refd By : .

(ADX\_GEM216201125)(R)Allengers

REPORT :

Interpretation :

GOOD EFFORT TOLERANCE  
NORMAL CHRONOTROPIC RESPONSE  
NORMAL INOTROPIC RESPONSE  
NO ANGINA / ANGINAL EQUIVALENTS  
NO ARRHYTHMIAS  
NO SIGNIFICANT ST-T CHANGES FROM BASELINE

**IMPRESSION** : STRESS TEST IS NEGATIVE FOR STRESS INDUCIBLE ISCHEMIA

*Disclaimer* : Negative Stress test does not rule out Coronary Artery Disease  
Positive Stress Test is suggestive but not confirmatory of Coronary Artery Disease  
Hence Clinical Correlation is mandatory.

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MD. (MEDICINE)  
CONSULTING PHYSICIAN  
REG. NO. 59907

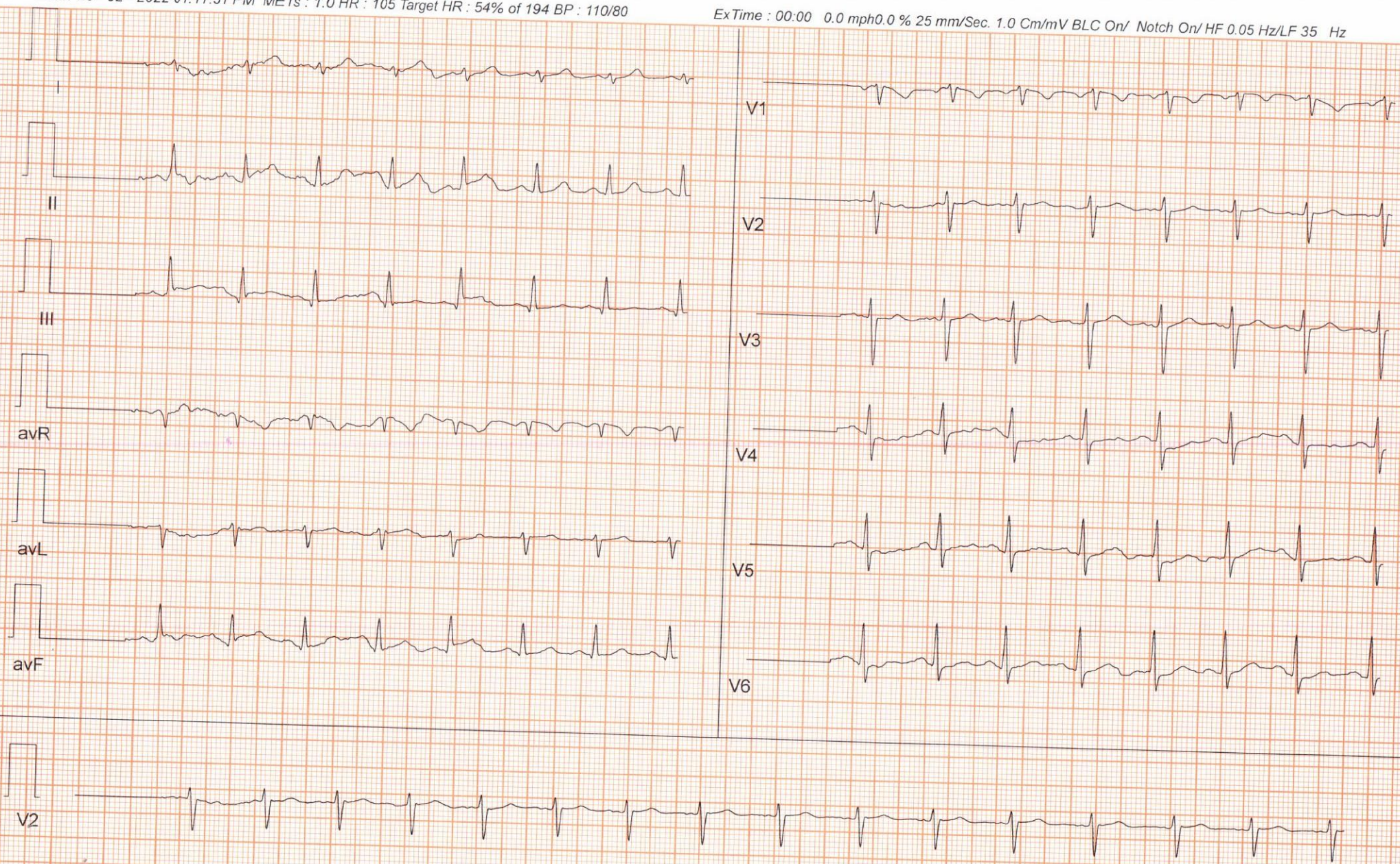
Doctor : Dr Ashish V Deshmukh





Date: 28 - 02 - 2022 01:17:51 PM METs : 1.0 HR : 105 Target HR : 54% of 194 BP : 110/80

ExTime : 00:00 0.0 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

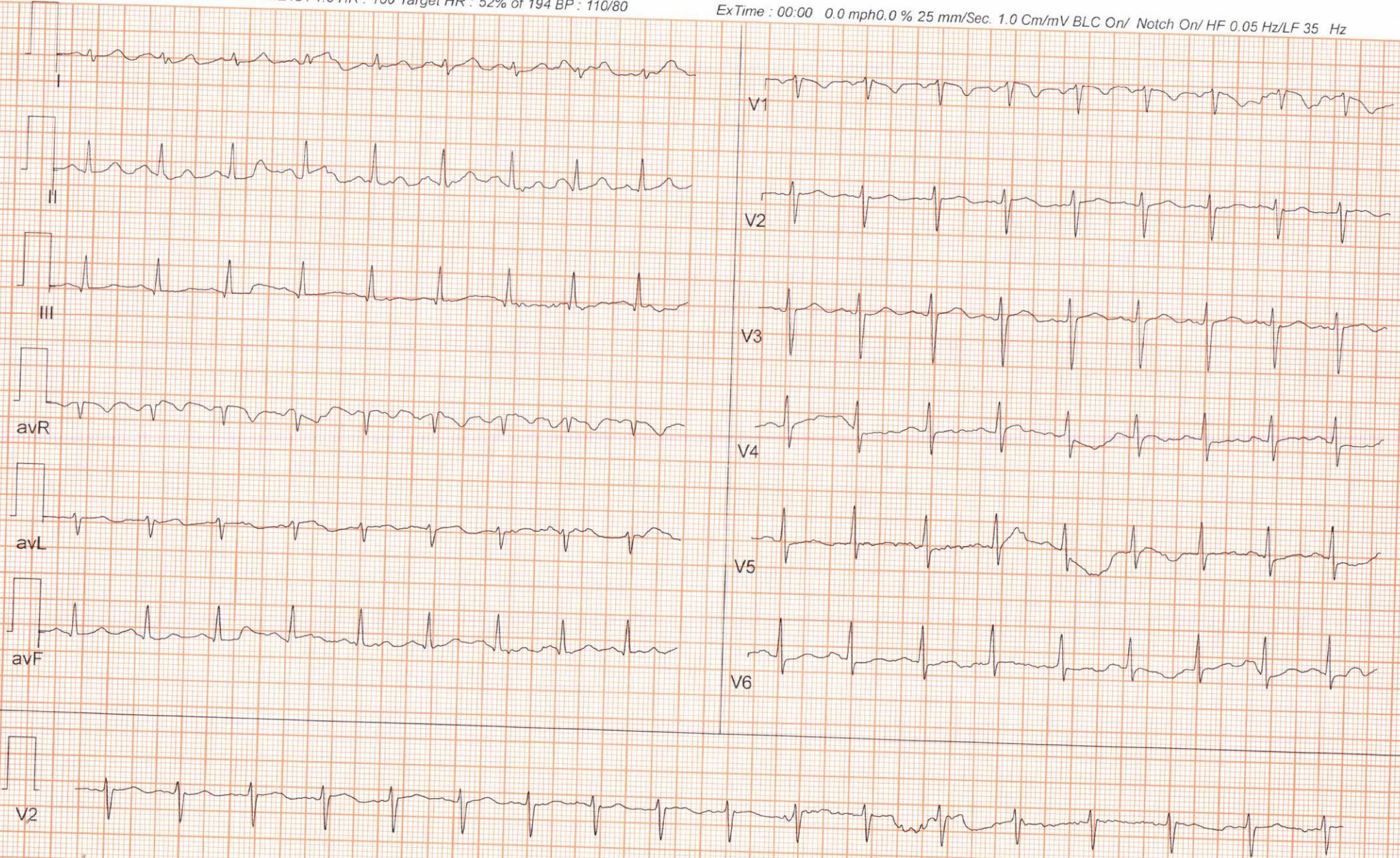






Date: 28 - 02 - 2022 01:17:51 PM METs : 1.0 HR : 100 Target HR : 52% of 194 BP : 110/80

ExTime : 00:00 0.0 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz







Date: 28 - 02 - 2022 01:17:51 PM METs : 1.0 HR : 111 Target HR : 57% of 194 BP : 110/80

ExTime : 00:00 0.0 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

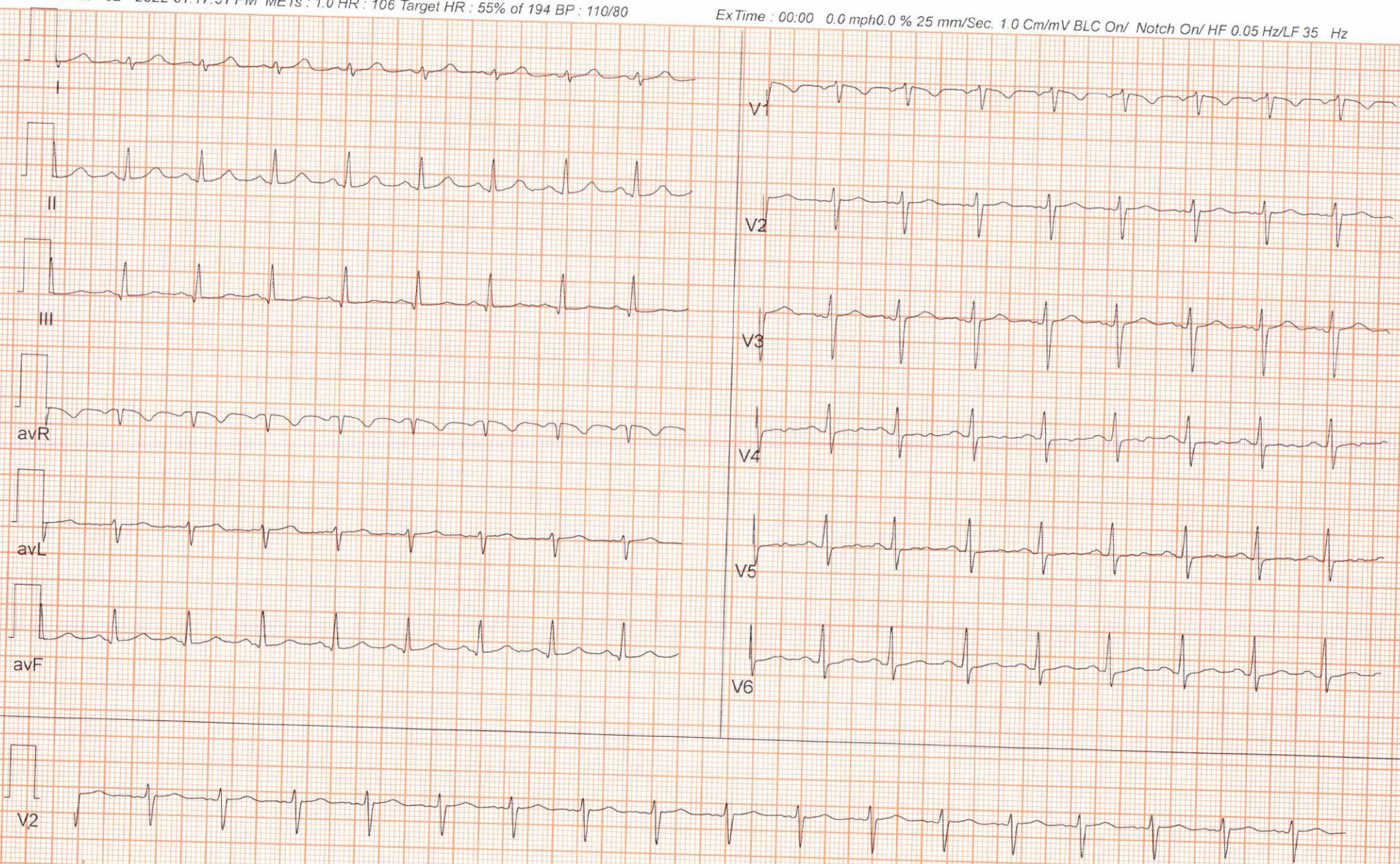






Date: 28-02-2022 01:17:51 PM METs : 1.0 HR : 106 Target HR : 55% of 194 BP : 110/80

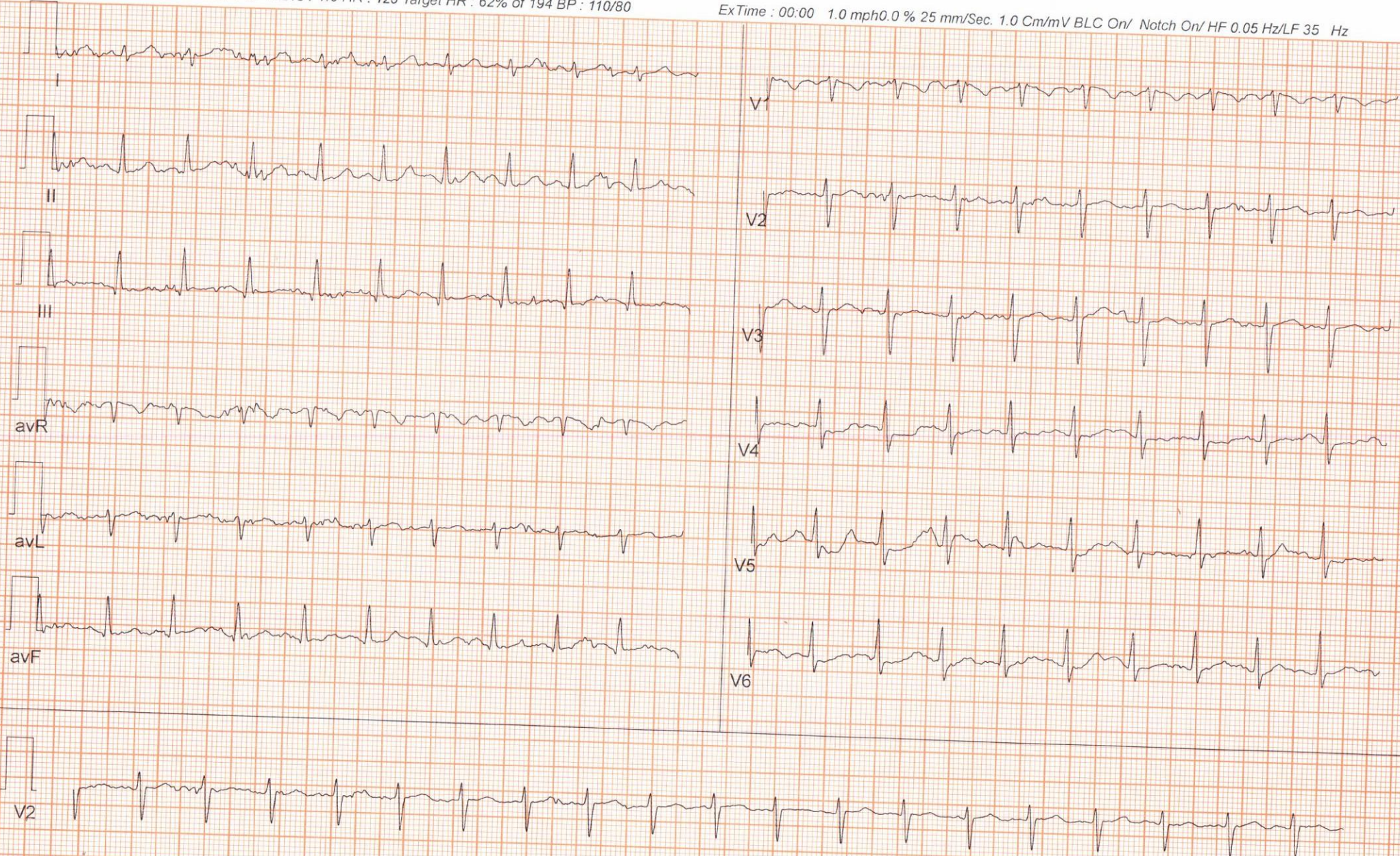
ExTime : 00:00 0.0 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz





Date: 28 - 02 - 2022 01:17:51 PM METs : 1.0 HR : 120 Target HR : 62% of 194 BP : 110/80

ExTime : 00:00 1.0 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

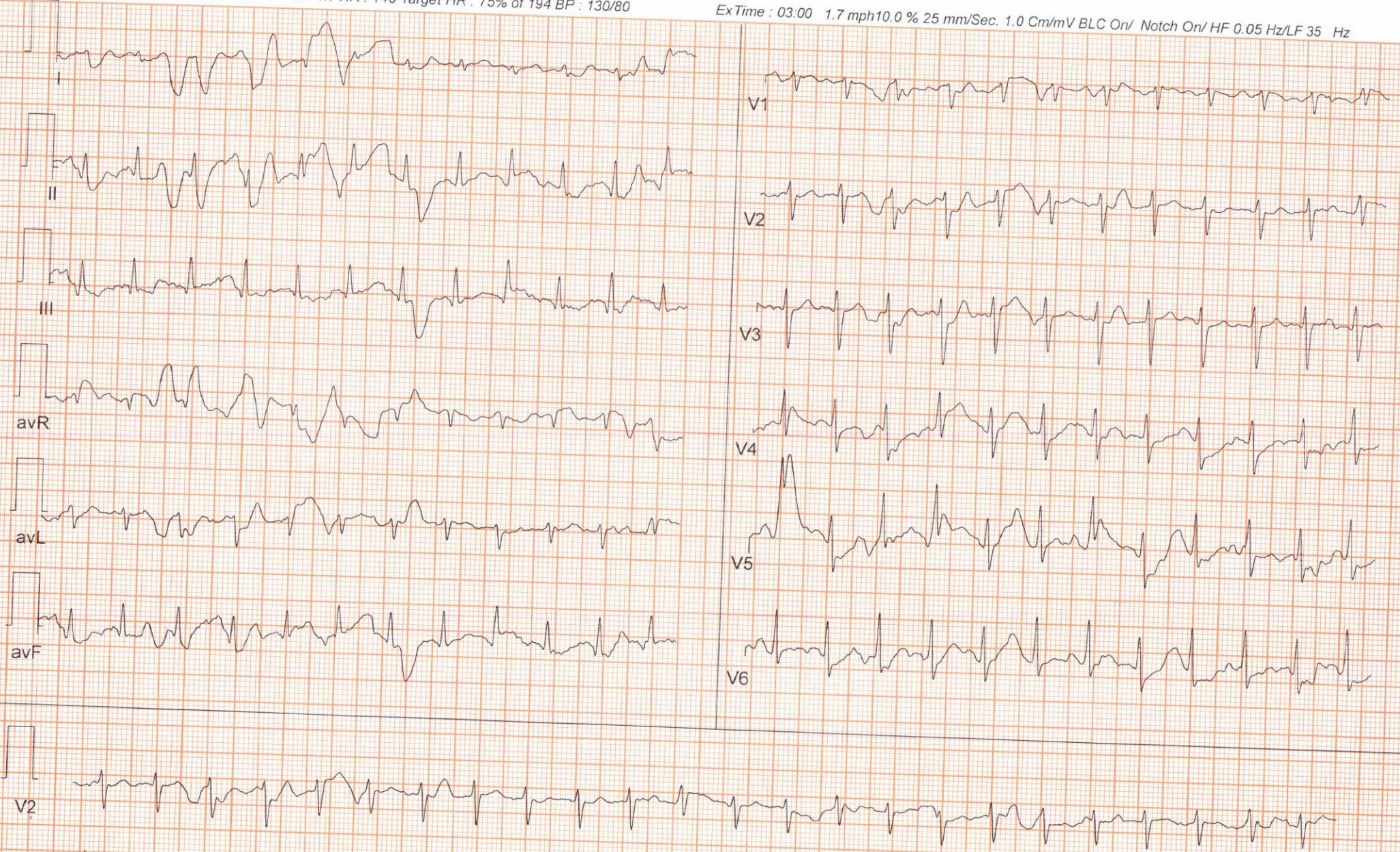






Date: 28 - 02 - 2022 01:17:51 PM METs : 4.7 HR : 146 Target HR : 75% of 194 BP : 130/80

ExTime : 03:00 1.7 mph 10.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz







Date: 28 - 02 - 2022 01:17:51 PM METs : 7.1 HR : 172 Target HR : 89% of 194 BP : 150/80

ExTime : 06:00 2.5 mph 12.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

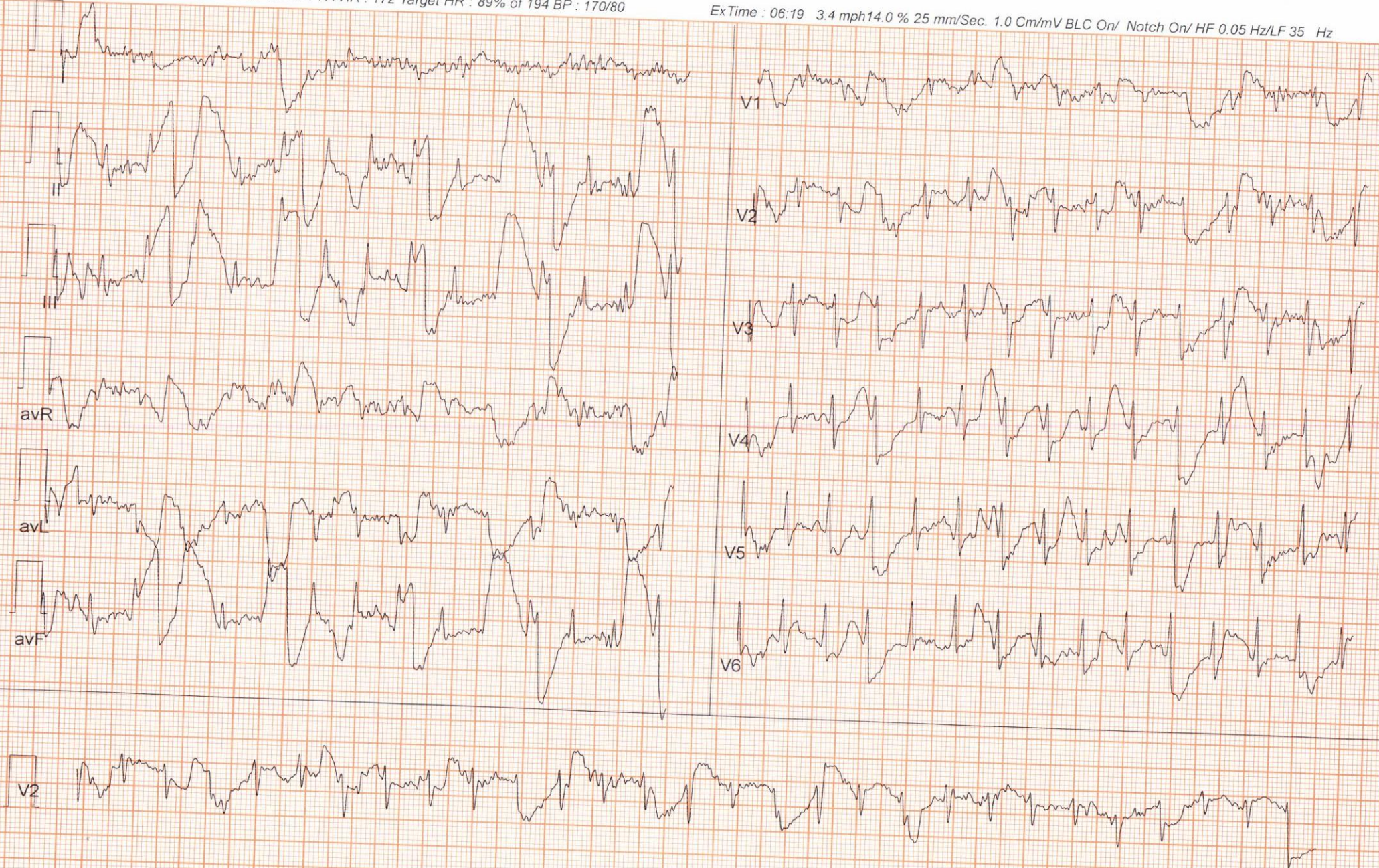






Date: 28 - 02 - 2022 01:17:51 PM METs : 7.4 HR : 172 Target HR : 89% of 194 BP : 170/80

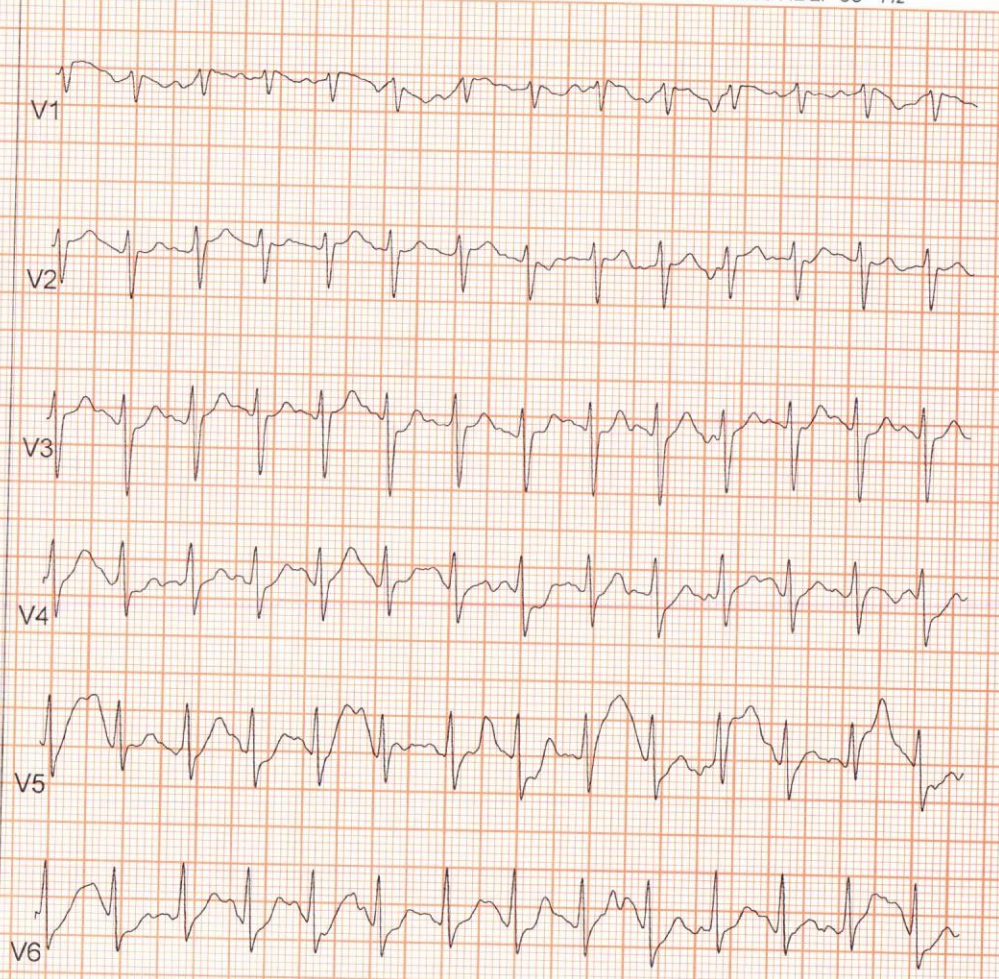
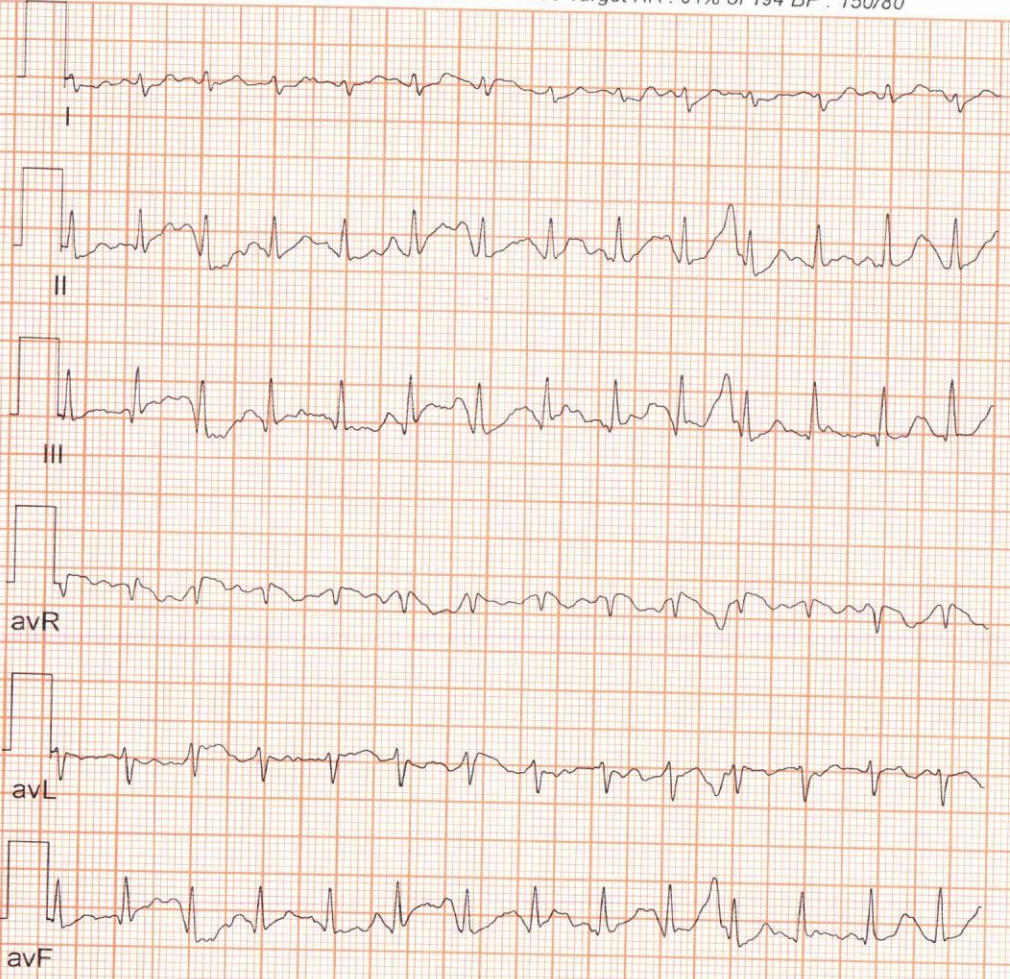
ExTime : 06:19 3.4 mph 14.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz





Date: 28 - 02 - 2022 01:17:51 PM METs : 1.1 HR : 163 Target HR : 84% of 194 BP : 150/80

ExTime : 06:19 1.1 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

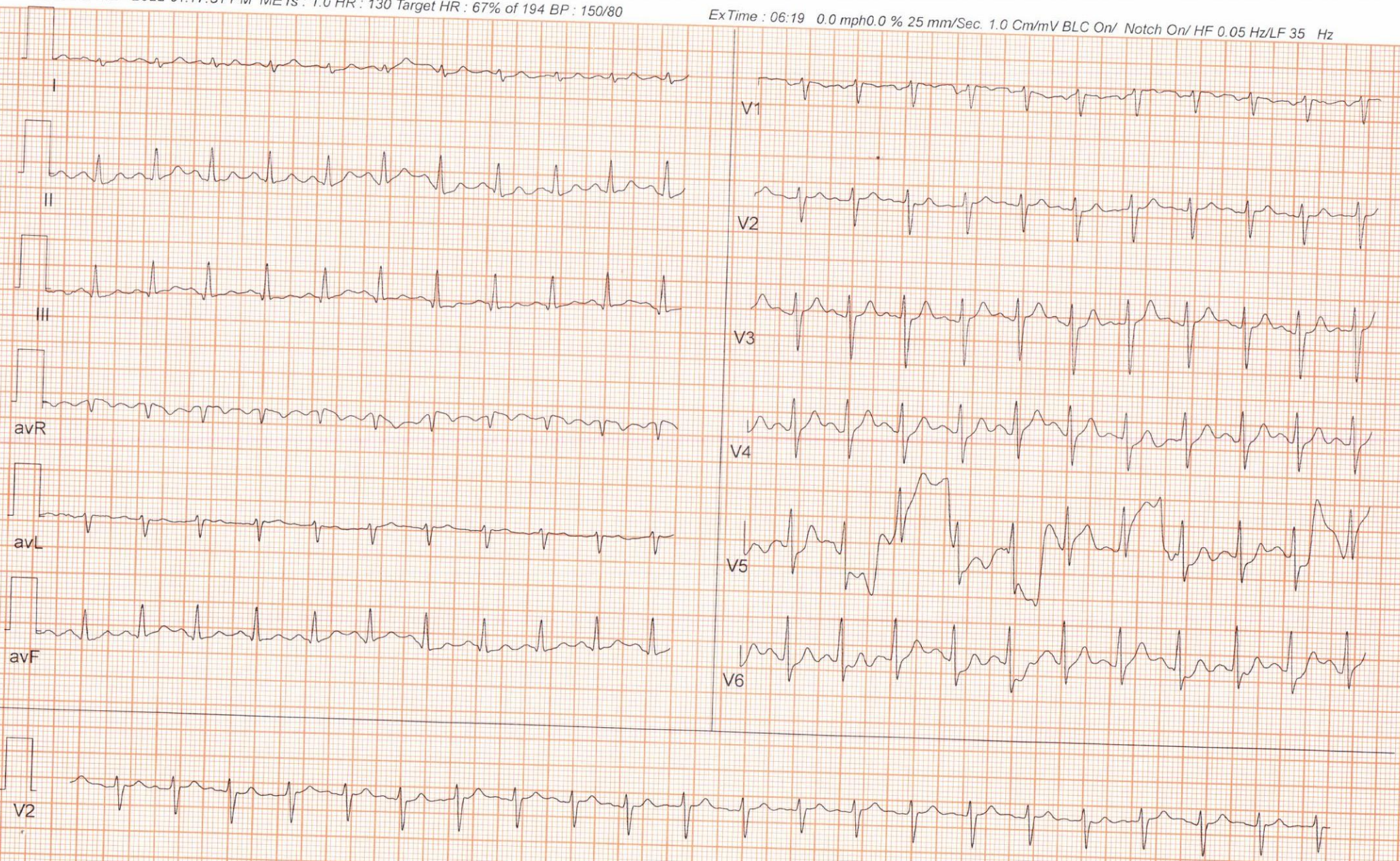






Date: 28 - 02 - 2022 01:17:51 PM METs : 1.0 HR : 130 Target HR : 67% of 194 BP : 150/80

ExTime : 06:19 0.0 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

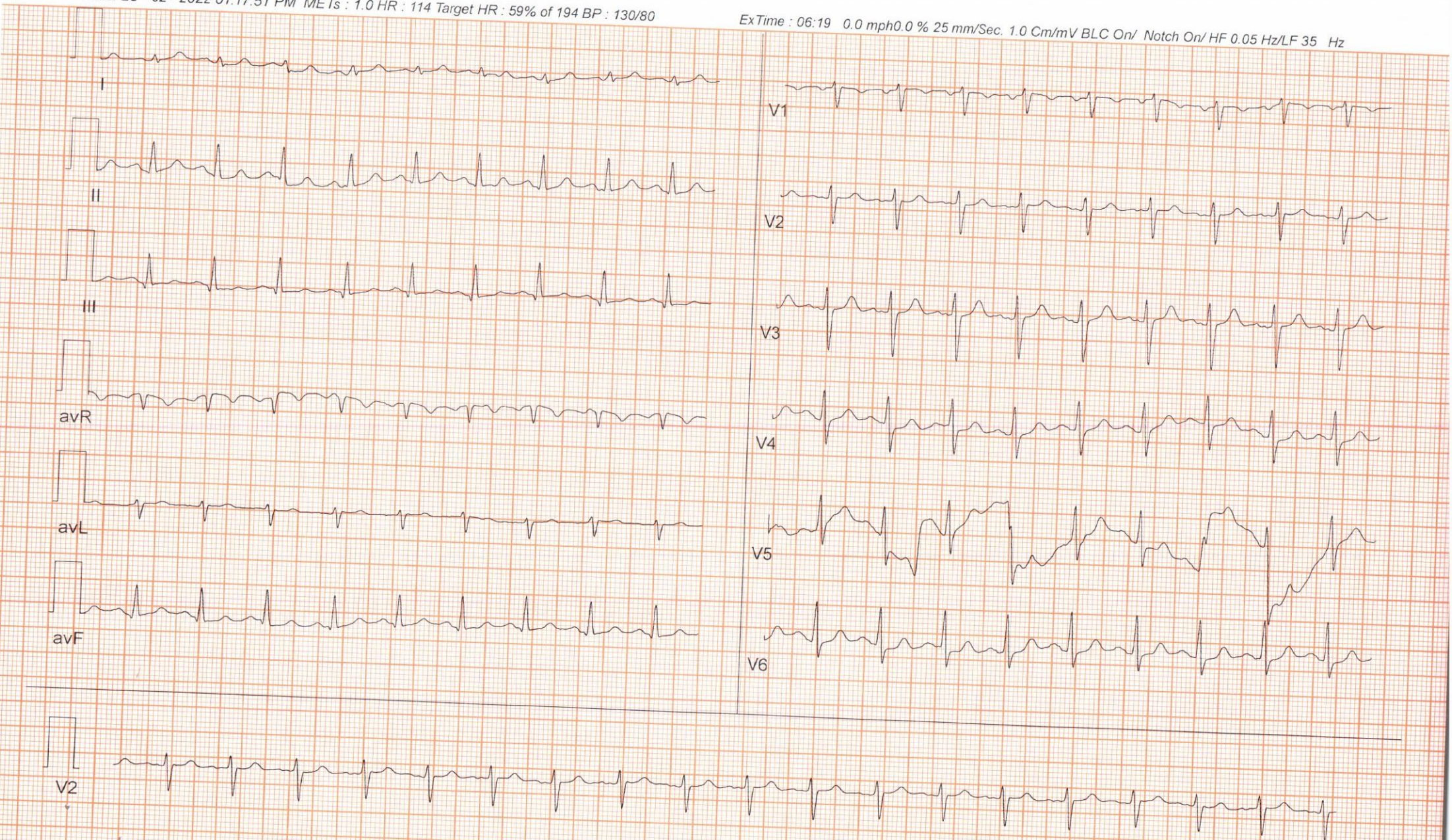






Date: 28 - 02 - 2022 01:17:51 PM METs : 1.0 HR : 114 Target HR : 59% of 194 BP : 130/80

ExTime : 06:19 0.0 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz







Date: 28 - 02 - 2022 01:17:51 PM METs : 1.0 HR : 110 Target HR : 57% of 194 BP : 110/80

ExTime : 06:19 0.0 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz







Use a QR Code Scanner  
Application To Scan the Code

**CID** : 2205901296  
**Name** : Mrs Madhuri .  
**Age / Sex** : 26 Years/Female  
**Ref. Dr** :  
**Reg. Location** : J B Nagar, Andheri East Main Centre

**Reg. Date** : 28-Feb-2022 / 11:00  
**Reported** : 28-Feb-2022 / 12:18

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## USG WHOLE ABDOMEN

### LIVER:

The liver is normal in size,( 12.8 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.

### GALL BLADDER:

The gall bladder is physiologically distended and appears normal.No evidence of gall stones or mass lesions seen

### PANCREAS:

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

### KIDNEYS:

Both the kidneys are normal in size shape and echotexture.  
No evidence of any calculus,hydronephrosis or mass lesion seen.  
Right kidney measures 10.5 x 4.2 cm.Left kidney measures 10.7 x 5.1 cm.

### SPLEEN:

The spleen is normal in size and echotexture.No evidence of focal lesion is noted.  
There is no evidence of any lymphadenopathy or ascites.

### URINARY BLADDER:

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

### UTERUS:

The uterus is anteverted and appears normal.It measures 9.6 x 6.6 x 4.0 cm in size.The endometrial thickness is 7 mm.

### OVARIES:

***Both ovaries appear bulky with multiple tiny peripheral follicles.***

There is no evidence of any ovarian or adnexal mass seen.  
Right ovary = 3.5 x 2.9 x 2.1 cm = 11.8 cc.Left ovary = 4.1 x 3.4 x 2.1 cm = 15.8 cc..

### IMPRESSION:-

***Both ovaries show polycystic morphology.ADV:Hormonal correlation.***

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<http://202.143.96.162/Suburban/Viewer?ViewerType=3&AccessionNo=2022022809581233>

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**Reg. Date** : 28-Feb-2022 / 11:00  
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-----End of Report-----

  
DR TEJAL R MISTRY  
M.B.B.S D.M.R.E.  
Reg No -2010/03/0652  
Consultant Radiologist

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**Reg. Date** : 28-Feb-2022 / 10:24  
**Reported** : 28-Feb-2022 / 11:59

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### 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 TEJAL R MISTRY  
M.B.B.S D.M.R.E.  
Reg No -2010/03/0652  
Consultant Radiologist

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Age / Gender : 26 Years / Female  
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Reg. Location : J B Nagar, Andheri East (Main Centre)

Collected : 28-Feb-2022 / 10:02  
Reported : 28-Feb-2022 / 13:08

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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	11.1	12.0-15.0 g/dL	Spectrophotometric
RBC	4.42	3.8-4.8 mil/cmm	Elect. Impedance
PCV	34.3	36-46 %	Measured
MCV	77.5	80-100 fl	Calculated
MCH	25.0	27-32 pg	Calculated
MCHC	32.3	31.5-34.5 g/dL	Calculated
RDW	13.4	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	7090	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	30.1	20-40 %	
Absolute Lymphocytes	2120	1000-3000 /cmm	Calculated
Monocytes	6.3	2-10 %	
Absolute Monocytes	440	200-1000 /cmm	Calculated
Neutrophils	62.6	40-80 %	
Absolute Neutrophils	4440	2000-7000 /cmm	Calculated
Eosinophils	0.9	1-6 %	
Absolute Eosinophils	60	20-500 /cmm	Calculated
Basophils	0.1	0.1-2 %	
Absolute Basophils	7.1	20-100 /cmm	Calculated
Immature Leukocytes	-		

WBC Differential Count by Absorbance & Impedance method/Microscopy.

### **PLATELET PARAMETERS**

Platelet Count	375000	150000-400000 /cmm	Elect. Impedance
MPV	8.2	6-11 fl	Calculated
PDW	12.2	11-18 %	Calculated

### **RBC MORPHOLOGY**

Hypochromia	Mild
Microcytosis	Mild





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Reported : 28-Feb-2022 / 12:18

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

Specimen: EDTA Whole Blood

ESR, EDTA WB 16 2-20 mm at 1 hr. Westergren

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



MC-2111



*Amar Das Gupta*  
**Dr. AMAR DASGUPTA, MD, PhD**  
Consultant Hematopathologist  
Director - Medical Services

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

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**Collected** : 28-Feb-2022 / 10:02  
**Reported** : 28-Feb-2022 / 12:21

**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	81.5	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	84.5	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.22	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.12	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.10	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.9	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.1	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.8	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.5	1 - 2	Calculated
SGOT (AST), Serum	14.2	5-32 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	10.4	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	11.9	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	96.8	35-105 U/L	Colorimetric
BLOOD UREA, Serum	11.8	12.8-42.8 mg/dl	Kinetic
BUN, Serum	5.5	6-20 mg/dl	Calculated
CREATININE, Serum	0.58	0.51-0.95 mg/dl	Enzymatic
eGFR, Serum	134	>60 ml/min/1.73sqm	Calculated
URIC ACID, Serum	3.9	2.4-5.7 mg/dl	Enzymatic





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Reported : 28-Feb-2022 / 18:17

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 CPL, Andheri West  
\*\*\* End Of Report \*\*\*



MC-2111

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

ADDRESS: 2<sup>nd</sup> Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

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Collected : 28-Feb-2022 / 10:02  
Reported : 28-Feb-2022 / 13:00

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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	5.5	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	111.2	mg/dl	Calculated

**Intended use:**

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

**Clinical Significance:**

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

**Test Interpretation:**

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

**Factors affecting HbA1c results:**

**Increased in:** High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

**Decreased in:** Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

**Reflex tests:** Blood glucose levels, CGM (Continuous Glucose monitoring)

**References:** ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

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

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



MC-2111



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CID : 2205901296  
Name : MRS.MADHURI .  
Age / Gender : 26 Years / Female  
Consulting Dr. : -  
Reg. Location : J B Nagar, Andheri East (Main Centre)

Collected : 28-Feb-2022 / 10:02  
Reported : 28-Feb-2022 / 16:58

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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)	6.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.015	1.001-1.030	Chemical Indicator
Transparency	Slight hazy	Clear	-
Volume (ml)	50	-	-
<b><u>CHEMICAL EXAMINATION</u></b>			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	<b>Trace</b>	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	<b>6-8</b>	0-5/hpf	
Red Blood Cells / hpf	Occasional	0-2/hpf	
Epithelial Cells / hpf	10-15		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	+(>20/hpf)	Less than 20/hpf	
Others	-		

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



MC-2111



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CID : 2205901296  
Name : MRS.MADHURI .  
Age / Gender : 26 Years / Female

Consulting Dr. : -  
Reg. Location : J B Nagar, Andheri East (Main Centre)

Collected : 28-Feb-2022 / 10:02  
Reported : 28-Feb-2022 / 13:01

**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 column agglutination technology (CAT) 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 CPL, Andheri West

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



MC-2111



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**Pathologist**

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CID : 2205901296  
Name : MRS.MADHURI .  
Age / Gender : 26 Years / Female  
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Reg. Location : J B Nagar, Andheri East (Main Centre)

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	144.8	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	Enzymatic
TRIGLYCERIDES, Serum	84.6	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	Enzymatic
HDL CHOLESTEROL, Serum	43.1	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Enzymatic
NON HDL CHOLESTEROL, Serum	101.7	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	85.0	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl	Calculated
VLDL CHOLESTEROL, Serum	16.7	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.4	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.0	0-3.5 Ratio	Calculated

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West  
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MC-2111



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CID : 2205901296  
 Name : MRS.MADHURI .  
 Age / Gender : 26 Years / Female  
 Consulting Dr. : -  
 Reg. Location : J B Nagar, Andheri East (Main Centre)

Collected : 28-Feb-2022 / 10:02  
 Reported : 28-Feb-2022 / 12:21

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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	ECLIA
Free T4, Serum	14.3	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	1.35	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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CID : 2205901296  
Name : MRS.MADHURI .  
Age / Gender : 26 Years / Female  
Consulting Dr. : -  
Reg. Location : J B Nagar, Andheri East (Main Centre)

Collected : 28-Feb-2022 / 10:02  
Reported : 28-Feb-2022 / 12:21

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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 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 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:**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.

**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 \*\*\*



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Patient Name: MADHURI .  
 Patient ID: 2205901296

Date and Time: 28th Feb 22 10:44 AM

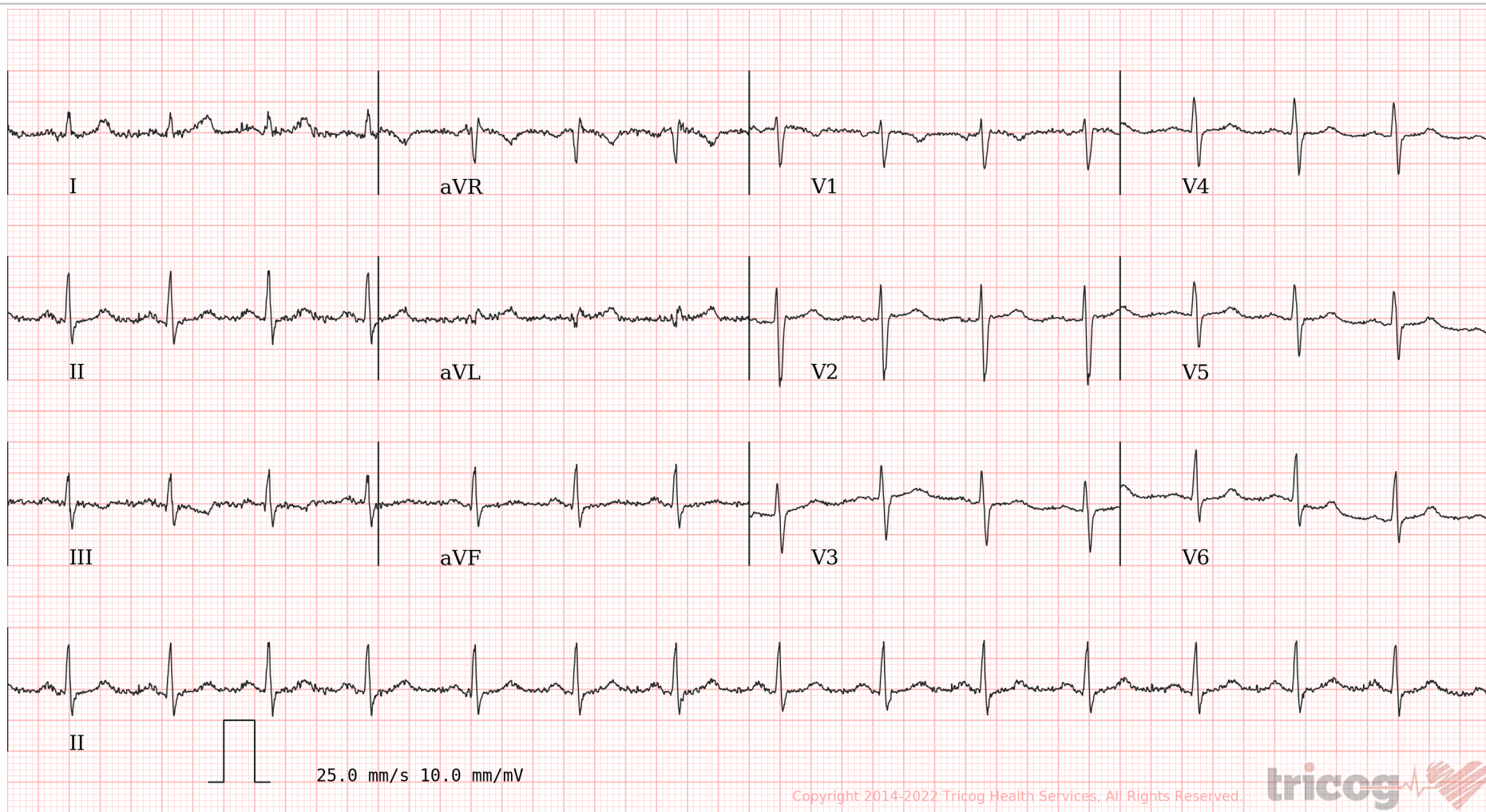
Age **26 10 16**  
 years months days

Gender **Female**

Heart Rate **91bpm**

**Patient Vitals**

BP: 110/80 mmHg  
 Weight: 70 kg  
 Height: 162 cm  
 Pulse: NA  
 Spo2: NA  
 Resp: NA  
 Others: \_\_\_\_\_



**Measurements**

QSRD: 80ms  
 QT: 348ms  
 QTc: 428ms  
 PR: 144ms  
 P-R-T: 69° 50° 19°

**ECG Within Normal Limits: Sinus Rhythm, Normal Axis. Please correlate clinically.**

REPORTED BY

*Deshmukh*

Dr Ashish Deshmukh  
 M.B.B.S. , MD (Medicine)  
 59997





भारत सरकार

Government of India

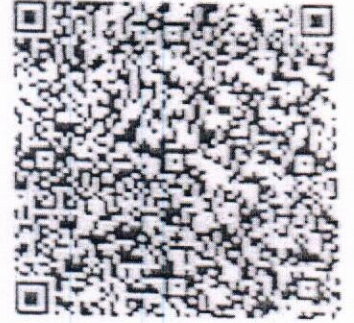


माधुरी लक्ष्मण कालापाड

Madhuri Laxman Kalapad

जन्म तारीख / DOB : 12/04/1995

स्त्री / Female



*Deshmukh*

4040 4552 8583

आधार - सामान्य माणसाचा अधिकार

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*madhuri*

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V.  
ED  
GF



Date:- 28 Feb 2022

CID: 2205901296

Name:- Mrs. Madhuri Dhangar.

Sex / Age: 26 / Female

EYE CHECK UP

Chief complaints: Nil

Systemic Diseases: Nil

Past history: Nil

Unaided Vision: Distance < R 6/6  
L 6/6

Aided Vision: Near < R NS  
L. NS.

Refraction:

	(Right Eye)				(Left Eye)			
	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	_____			6/6	_____			6/6
Near	_____			NS	_____			NS

Colour Vision: Normal / Abnormal

Remark: Both eyes normal vision.

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Shop No.9/10/19/20, Wing -A, Bonanza Building,  
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