



CID : 2307018684
Name : MR.DEEPAK JAMBHAVADEKAR
Age / Gender : 37 Years / Male
Consulting Dr. : -
Reg. Location : Vashi (Main Centre)

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Reported : 11-Mar-2023 / 16:46

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>
<u>RBC PARAMETERS</u>			
Haemoglobin	13.5	13.0-17.0 g/dL	Spectrophotometric
RBC	4.91	4.5-5.5 mil/cmm	Elect. Impedance
PCV	41.8	40-50 %	Measured
MCV	85	80-100 fl	Calculated
MCH	27.4	27-32 pg	Calculated
MCHC	32.2	31.5-34.5 g/dL	Calculated
RDW	13.5	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	5270	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	36.3	20-40 %	
Absolute Lymphocytes	1913.0	1000-3000 /cmm	Calculated
Monocytes	8.0	2-10 %	
Absolute Monocytes	421.6	200-1000 /cmm	Calculated
Neutrophils	48.7	40-80 %	
Absolute Neutrophils	2566.5	2000-7000 /cmm	Calculated
Eosinophils	5.5	1-6 %	
Absolute Eosinophils	289.9	20-500 /cmm	Calculated
Basophils	1.5	0.1-2 %	
Absolute Basophils	79.0	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	216000	150000-400000 /cmm	Elect. Impedance
MPV	8.3	6-11 fl	Calculated
PDW	12.6	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			



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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 6 2-15 mm at 1 hr. Sedimentation

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



J. Mujawar

Dr. IMRAN MUJAWAR
M.D (Path)
Pathologist



CID : 2307018684
Name : MR.DEEPAK JAMBHAVADEKAR
Age / Gender : 37 Years / Male
Consulting Dr. : -
Reg. Location : Vashi (Main Centre)

Collected : 11-Mar-2023 / 09:12
Reported : 11-Mar-2023 / 15:48

Use a QR Code Scanner
Application To Scan the Code

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	97.2	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	125.4	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.47	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.20	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.27	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.3	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.4	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	1.9	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	2.3	1 - 2	Calculated
SGOT (AST), Serum	31.8	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	55.8	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	17.3	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	61.5	40-130 U/L	Colorimetric
BLOOD UREA, Serum	13.4	12.8-42.8 mg/dl	Kinetic
BUN, Serum	6.3	6-20 mg/dl	Calculated
CREATININE, Serum	0.95	0.67-1.17 mg/dl	Enzymatic



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Reported : 11-Mar-2023 / 19:27

eGFR, Serum	95	>60 ml/min/1.73sqm	Calculated
Note: eGFR estimation is calculated using MDRD (Modification of diet in renal disease study group) equation			
URIC ACID, Serum	5.3	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 Panvel Lab, Panvel East
*** End Of Report ***



J. Mujawar

Dr.IMRAN MUJAWAR
M.D (Path)
Pathologist



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Reported : 11-Mar-2023 / 15:48

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	5.9	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	122.6	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 Panvel Lab, Panvel East

*** End Of Report ***



J. Mujawar

Dr. IMRAN MUJAWAR
M.D (Path)
Pathologist



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Consulting Dr. : -
Reg. Location : Vashi (Main Centre)

Use a QR Code Scanner
Application To Scan the Code
Collected : 11-Mar-2023 / 09:12
Reported : 11-Mar-2023 / 18:53

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
URINE EXAMINATION REPORT

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>PHYSICAL EXAMINATION</u>			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	Acidic (6.5)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.010	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	50	-	-
<u>CHEMICAL EXAMINATION</u>			
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
<u>MICROSCOPIC EXAMINATION</u>			
Leukocytes(Pus cells)/hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	2-3		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	4-5	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 Panvel Lab, Panvel East

*** End Of Report ***



J. Mujawar

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Pathologist



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Collected : 11-Mar-2023 / 09:12
Reported : 11-Mar-2023 / 15:29

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 automated Erythrocytes magnetized technology (EMT) which is more sensitive than conventional methods.

Specimen: EDTA Whole Blood and/or serum

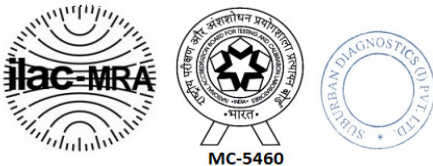
Clinical significance:
ABO system is most important of all blood group in transfusion medicine

- 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.VRUSHALI SHROFF
M.D.(PATH)
Pathologist





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Consulting Dr. : -
Reg. Location : Vashi (Main Centre)

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Reported : 11-Mar-2023 / 15:48

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Application To Scan the Code

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
CHOLESTEROL, Serum	130.8	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	106.4	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	38.2	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	92.6	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	72.0	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	20.6	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.4	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	1.9	0-3.5 Ratio	Calculated

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



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Dr.IMRAN MUJAWAR
M.D (Path)
Pathologist



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Name : MR.DEEPAK JAMBHAVADEKAR
Age / Gender : 37 Years / Male
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Reg. Location : Vashi (Main Centre)

Use a QR Code Scanner
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Collected : 11-Mar-2023 / 09:12
Reported : 11-Mar-2023 / 14:58

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
THYROID FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	5.1	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	13.5	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	2.43	0.35-5.5 microIU/ml	ECLIA



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Age / Gender : 37 Years / Male
Consulting Dr. : -
Reg. Location : Vashi (Main Centre)

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Collected : 11-Mar-2023 / 09:12
Reported : 11-Mar-2023 / 14:58

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 Panvel Lab, Panvel East

*** End Of Report ***



J. Mujawar

Dr.IMRAN MUJAWAR
M.D (Path)
Pathologist

SUBURBAN DIAGNOSTICS

Patient Details

Date: 11-Mar-23
 Name: MR DEEPAK JAMBHAVADEKAR ID: 2307018684
 Age: 37 y Sex: M
 Clinical History: H/O HT

Time: 11:31:18 AM

Height: 157 cms

Weight: 53 Kgs

Medications: FOR HT

Test Details

Protocol: Bruce
 Total Exec. Time: 7 m 43 s
 Max. BP: 170 / 86 mmHg
 Test Termination Criteria: FATIGUE

Pr.MHR: 183 bpm
 Max. HR: 142 (78% of Pr.MHR) bpm
 Max. BP x HR: 24140 mmHg/min

THR: 155 (85 % of Pr.MHR) bpm
 Max. Mets: 10.20
 Min. BP x HR: 5760 mmHg/min

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 : 15	1.0	0	0	75	120 / 80	-0.85 aVR	1.06 I
Standing	0 : 12	1.0	0	0	72	120 / 80	-1.06 aVR	1.06 II
Hyperventilation	0 : 13	1.0	0	0	73	120 / 80	-1.06 aVR	1.06 II
1	3 : 0	4.6	1.7	10	112	140 / 84	-1.06 aVR	1.42 II
2	3 : 0	7.0	2.5	12	128	160 / 86	-1.70 V4	1.42 II
Peak Ex	1 : 43	10.2	3.4	14	142	170 / 86	-1.91 II	1.77 II
Recovery(1)	1 : 0	1.8	1	0	125	170 / 86	-1.06 III	1.77 II
Recovery(2)	1 : 0	1.0	0	0	103	170 / 86	-0.64 aVR	1.42 II
Recovery(3)	1 : 0	1.0	0	0	95	160 / 86	-0.85 II	-0.71 I
Recovery(4)	1 : 0	1.0	0	0	89	140 / 86	-2.12 III	1.06 I
Recovery(5)	0 : 9	1.0	0	0	90	140 / 86	-0.42 III	0.35 I

SUBURBAN DIAGNOSTICS

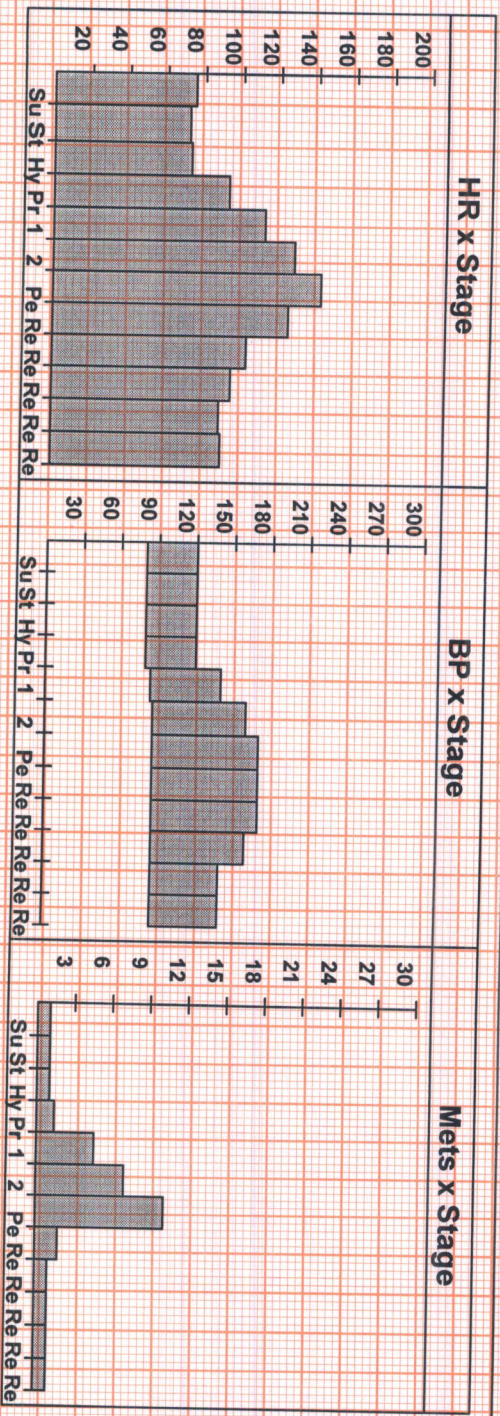
Patient Details

Name: MR DEEPAK JAMBHAVADEKAR ID: 2307018684
 Age: 37 y Sex: M

Date: 11-Mar-23 Time: 11:31:18 AM

Height: 157 cms

Weight: 53 Kgs



Interpretation

FAIR EFFORT TOLERANCE
 NORMAL CHRONOTROPIC RESPONSE
 NORMAL INOTROPIC RESPONSE
 NO ANGINA / ANGINA EQUIVALENTS
 NO ARRHYTHMIAS
 NO SIGNIFICANT ST-T CHANGES FROM BASELINE SEEN DURING THE TEST

IMPRESSION:
 STRESS TEST IS NEGATIVE FOR STRESS INDUCIBLE ISCHAEMIA.

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.

Ref. Doctor:

DR. ANAND N. MOTWANI
 M.D. (GENERAL MEDICINE)
 Reg. No. 39329 (M.M.C)

(Summary Report edited by user)



MR DEEPAK JAMBHAVADEKAR (37 M) ID: 2307018684

SUBURBAN DIAGNOSTICS

Test Report

Protocol: Bruce

Date: 11-Mar-23

Exec Time : 0 m 0 s

Stage Time : 1 m 9 s

HR: 75 bpm

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 155 bpm)

B.P.: 120 / 80

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

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

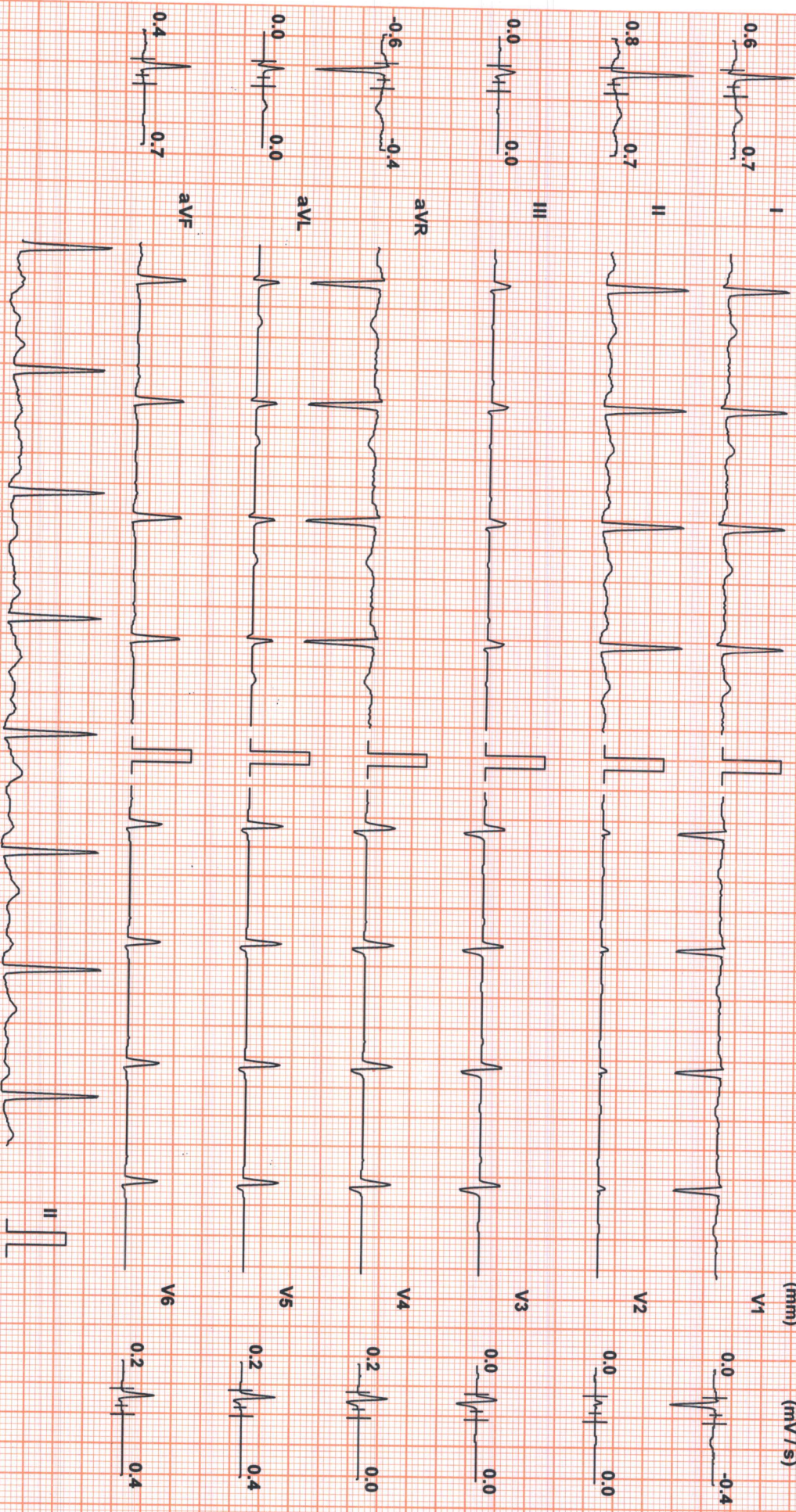


Chart Speed: 25 mm/sec
Schlifer Standard V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = V + 60 ms

Linked Median



SUBURBAN DIAGNOSTICS

Test Report

MR DEEPAK JAMBHAVADEKAR (37 M) ID: 2307018684

Date: 11-Mar-23 Exec Time : 0 m 0 s Stage Time : 0 m 6 s **HR: 71 bpm**

Protocol: Bruce

Stage: Standing

Speed: 0 mph Grade: 0 %

(THR: 155 bpm)

B.P: 120 / 80

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

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

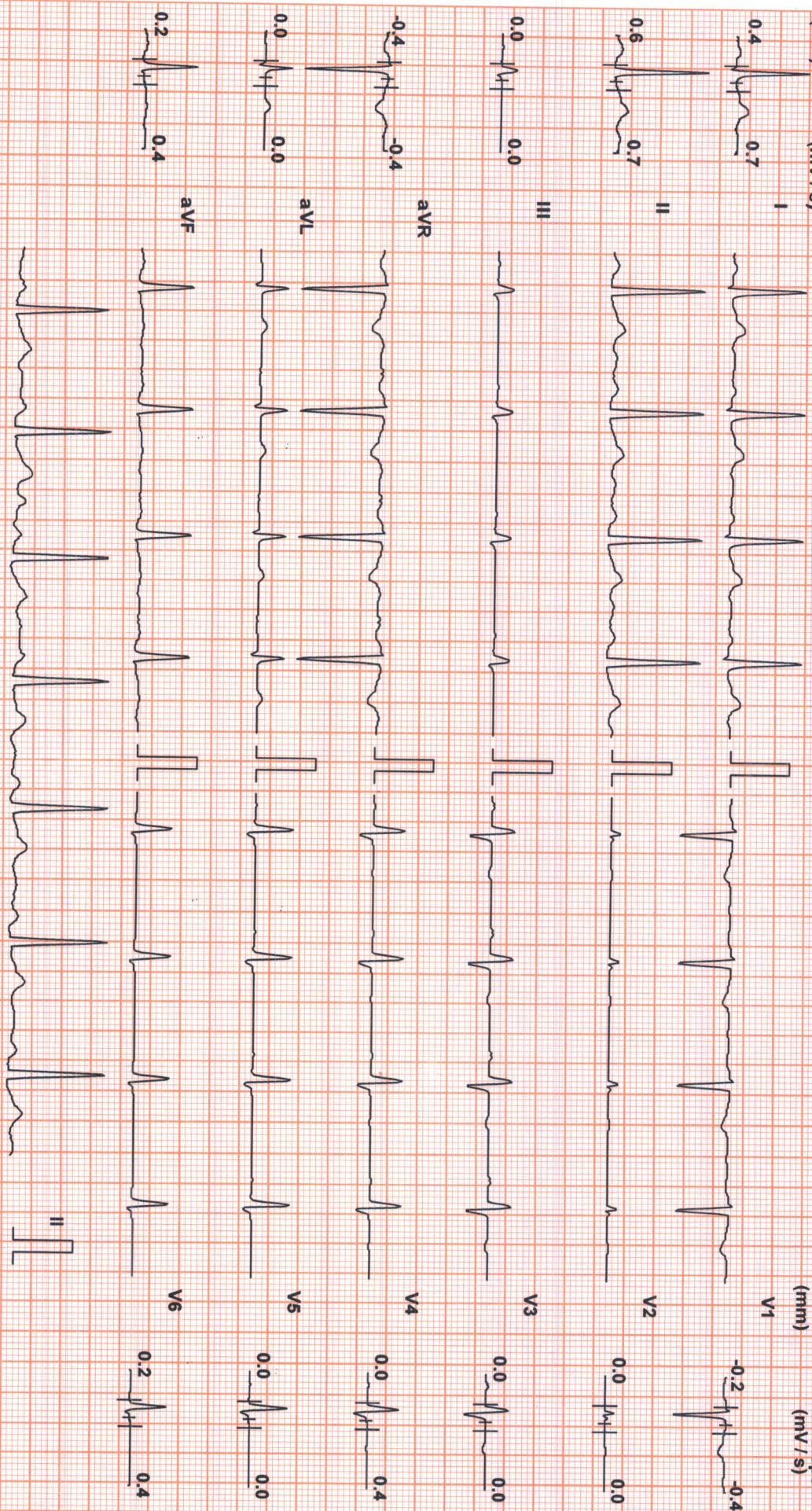


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spandan V 4.7

Linked Median



SUBURBAN DIAGNOSTICS

Test Report

MR DEEPAK JAMBHAVADEKAR (37 M) ID: 2307018684

Date: 11-Mar-23

Exec Time : 0 m 0 s

Stage Time : 0 m 7 s

HR: 74 bpm

Protocol: Bruce

Stage: Hyperventilation

Speed: 0 mph

Grade: 0 %

(THR: 155 bpm)

B.P.: 120 / 80

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

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

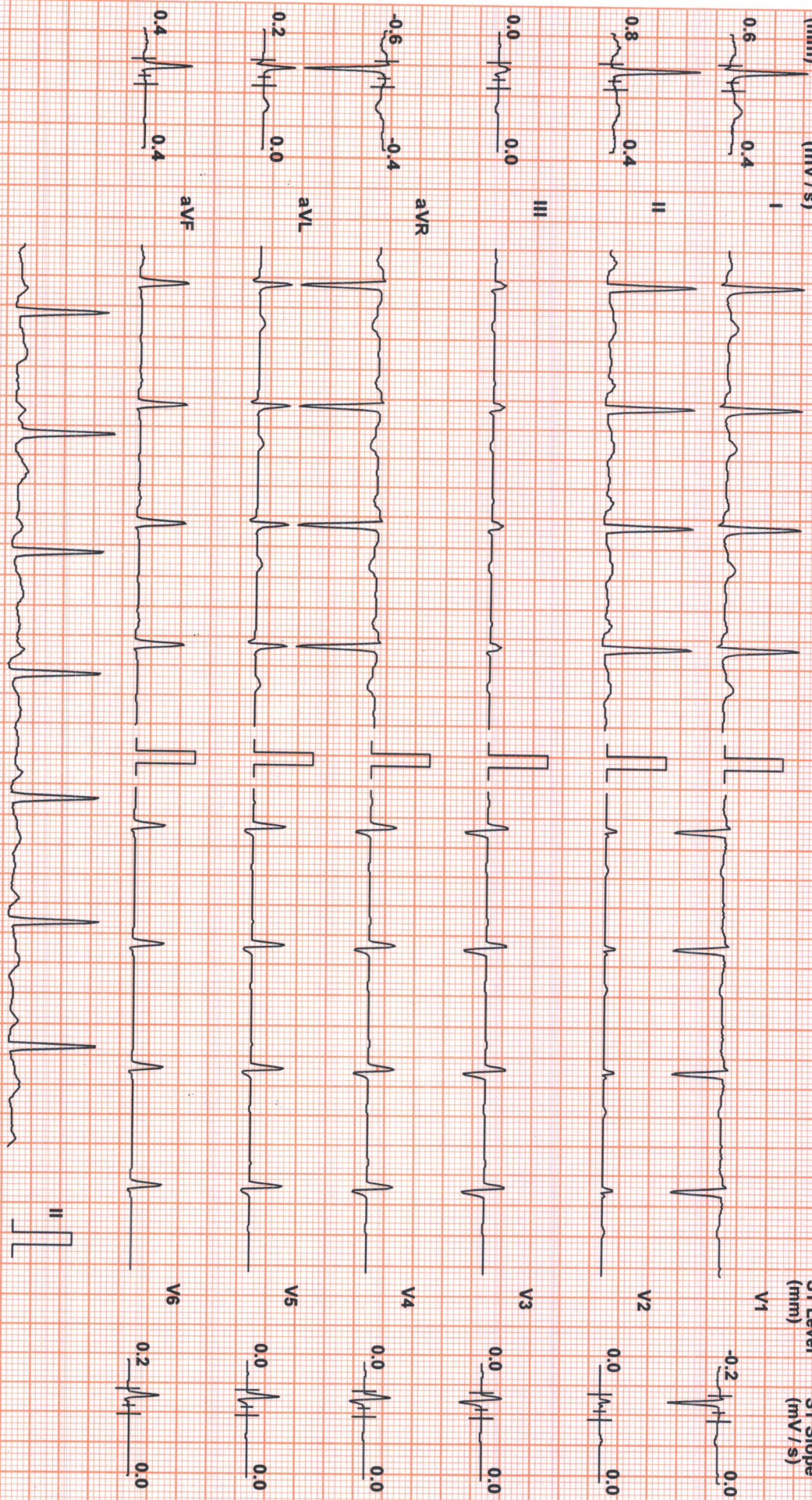


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



MR DEEPAK JAMBHAVADEKAR (37 M) ID: 2307018684

SUBURBAN DIAGNOSTICS

Test Report

Protocol: Bruce

Date: 11-Mar-23 Exec Time : 2 m 54 s Stage Time : 2 m 54 s HR: 114 bpm

Stage: 1

Speed: 1.7 mph Grade: 10 %

(THR: 155 bpm)

B.P: 140 / 84

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

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

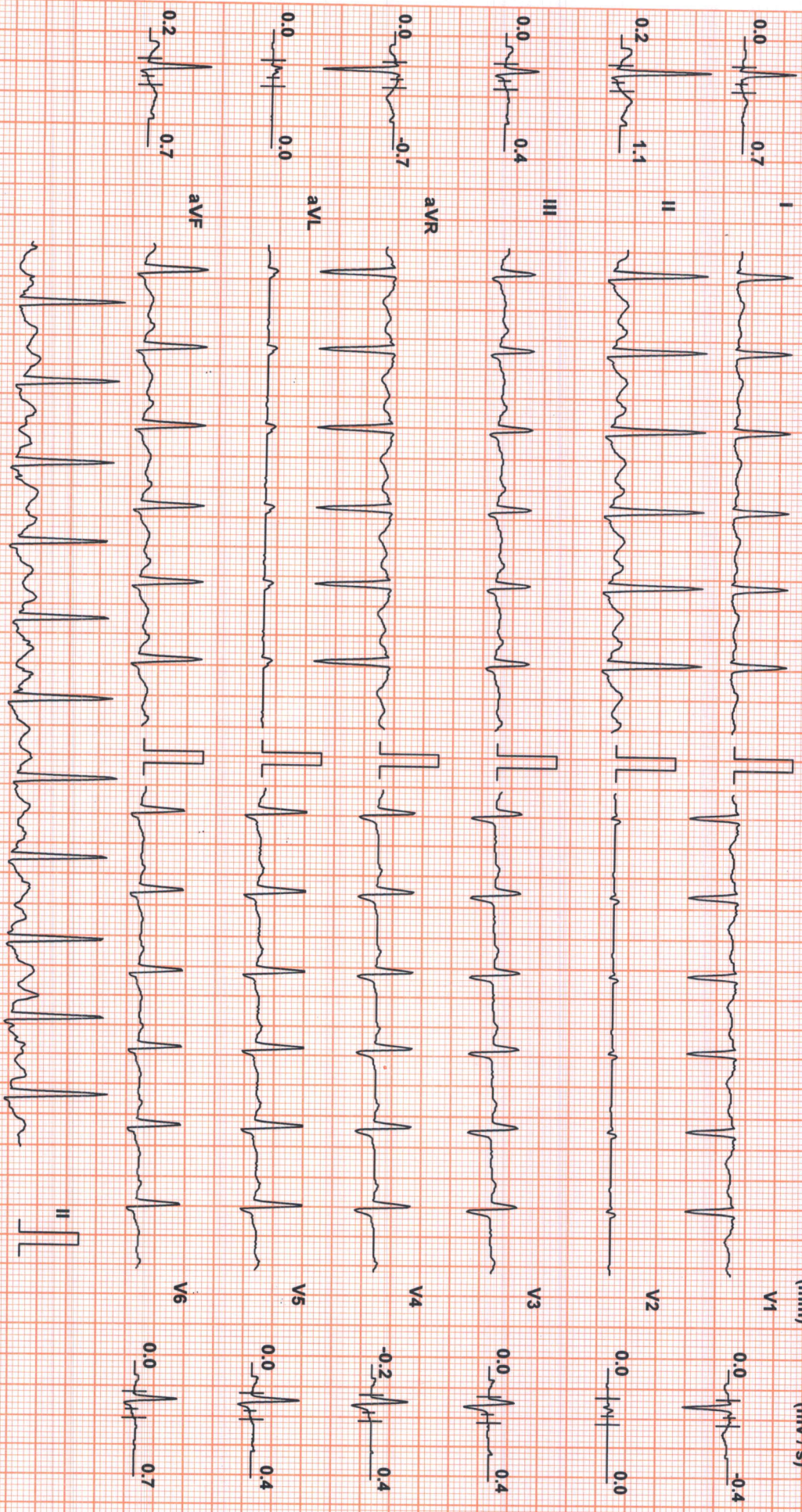


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = + 60 ms

Linked Median

SUBURBAN DIAGNOSTICS

MR DEEPAK JAMBHAVADEKAR (37 M) ID: 2307018684

Date: 11-Mar-23 Exec Time : 5 m 57 s Stage Time : 2 m 57 s HR: 130 bpm

Protocol: Bruce

Stage: 2

Speed: 2.5 mph Grade: 12% (THR: 155 bpm) B.P.: 160 / 86

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

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

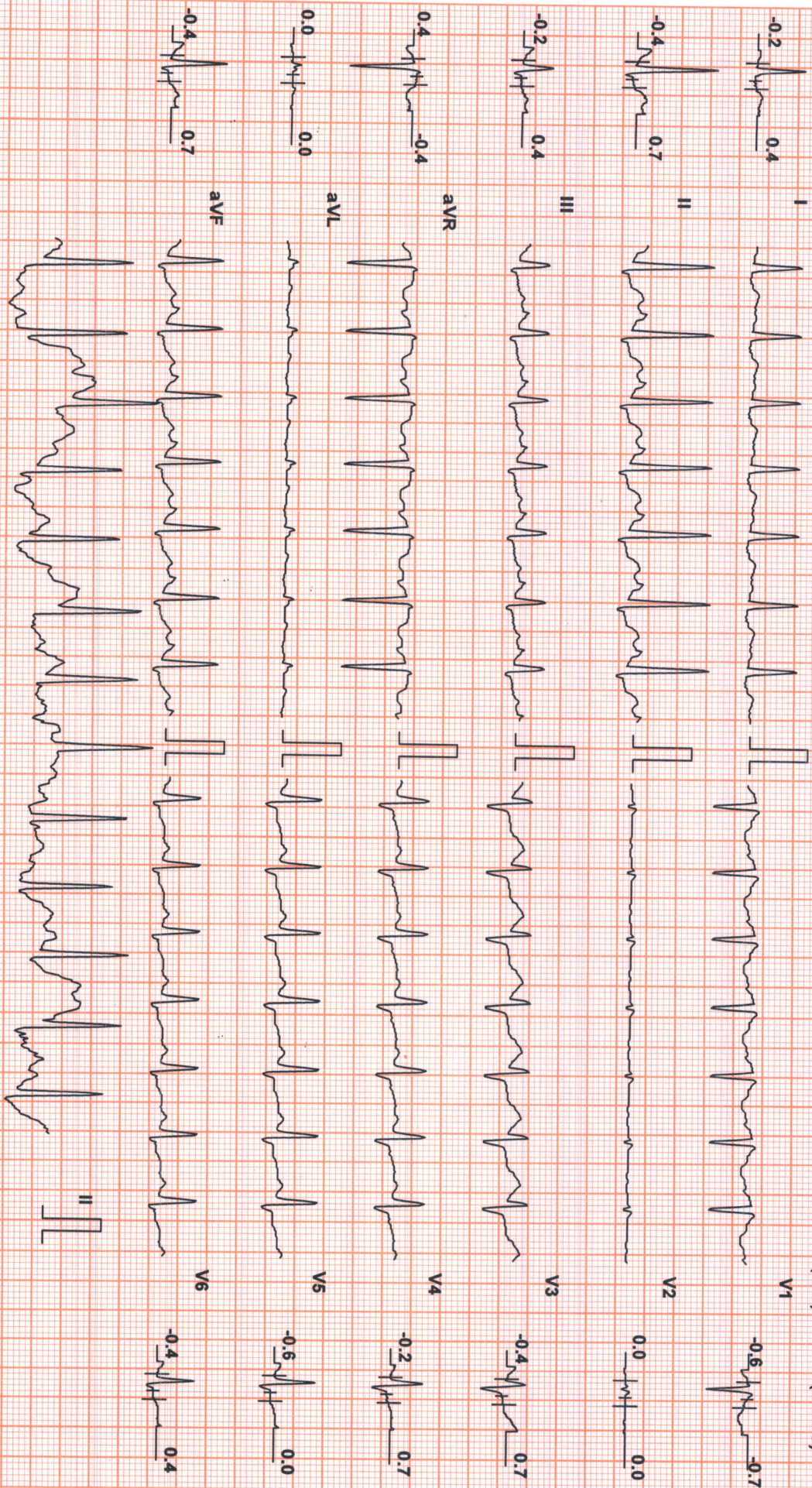


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



SUBURBAN DIAGNOSTICS

Test Report

MR DEEPAK JAMBHAVADEKAR (37 M/D) ID: 2307018684

Date: 11-Mar-23 Exec Time : 7 m 37 s Stage Time : 1 m 37 s **HR: 142 bpm**

Protocol: Bruce

Stage: Peak Ex

Speed: 3.4 mph Grade: 14 %

(THR: 155 bpm)

B.P: 170 / 86

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

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

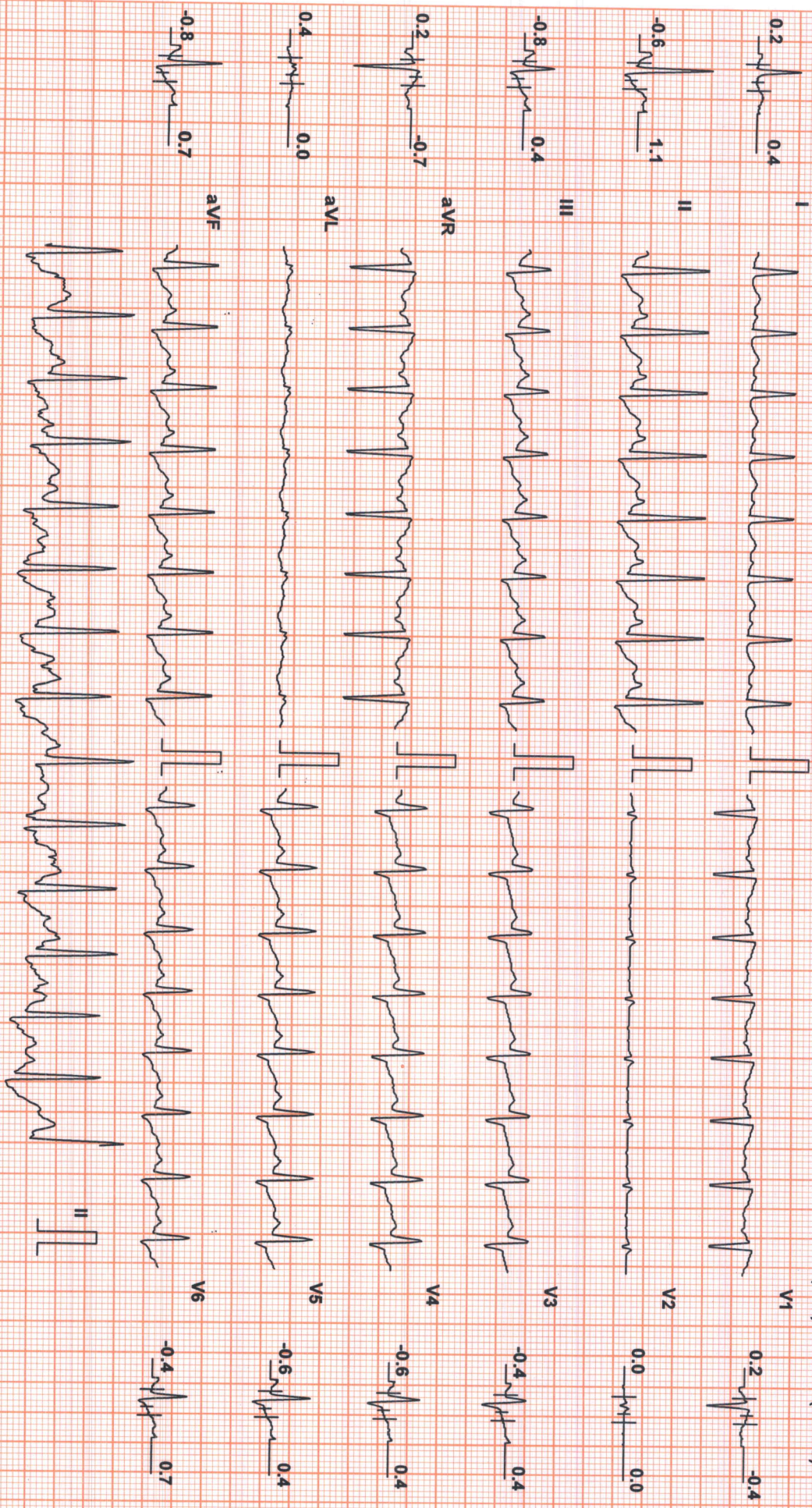


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

Schiller Spandan V4.7



MR DEEPAK JAMBHAVADEKAR (37 M) ID: 2307018684

SUBURBAN DIAGNOSTICS

Test Report

Protocol: Bruce

Date: 11-Mar-23

Exec Time : 7 m 43 s Stage Time : 0 m 54 s HR: 119 bpm

Stage: Recovery(1)

Speed: 1 mph

Grade: 0 %

(THR: 165 bpm)

B.P: 170 / 86

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

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

I

V1

0.4 1.1

-0.2 -0.7

II

0.6 1.4

V2

0.0 0.0

III

0.2 0.4

V3

0.2 0.0

aVR

-0.6 -1.1

V4

0.4 0.7

aVL

0.0 0.0

V5

0.2 0.4

aVF

0.2 0.7

V6

0.2 0.7

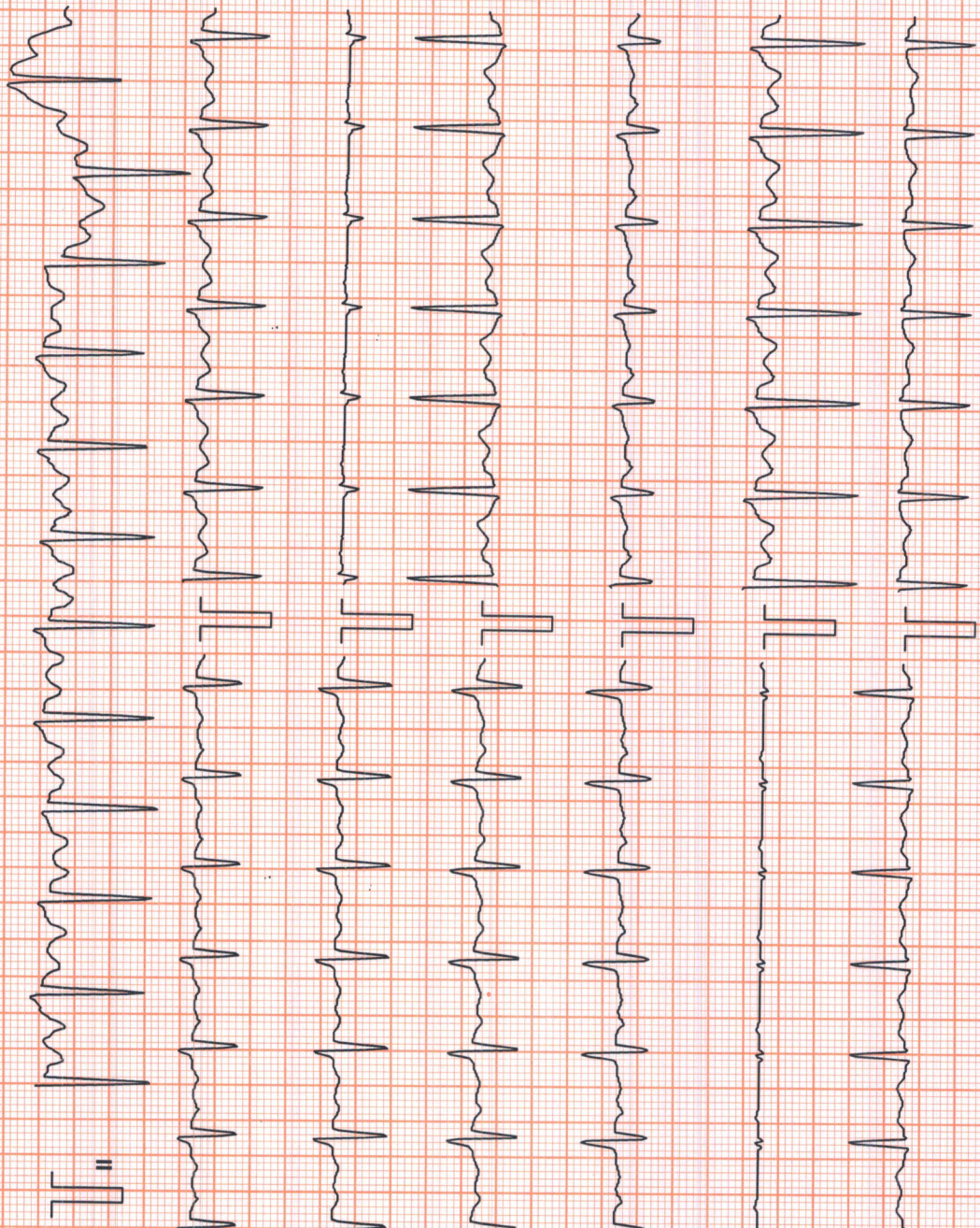


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = + 60 ms

Linked Median



SUBURBAN DIAGNOSTICS

Test Report

MR DEEPAK JAMBHAVADEKAR (37 M) ID: 2307018684

Date: 11-Mar-23 Exec Time : 7 m 43 s Stage Time : 0 m 54 s HR: 97 bpm

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph Grade: 0 %

(THR: 155 bpm)

B.P: 170 / 86

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

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

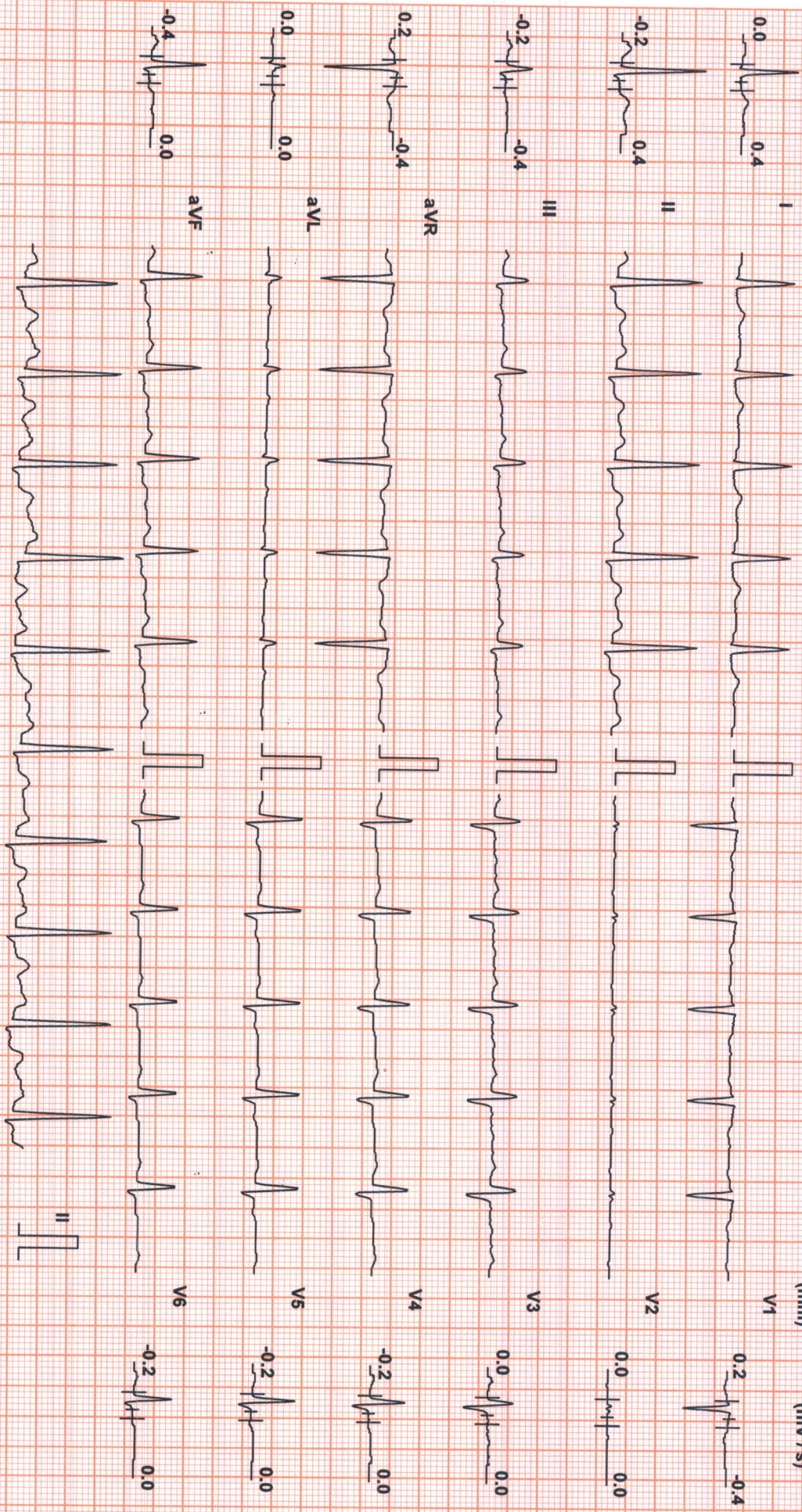


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



MR DEEPAK JAMBHAVADEKAR (37 M) ID: 2307018684

SUBURBAN DIAGNOSTICS

Test Report

Protocol: Bruce

Date: 11-Mar-23

Exec Time : 7 m 43 s Stage Time : 0 m 54 s HR: 91 bpm

Stage: Recovery(3)

Speed: 0 mph

Grade: 0 %

(THR: 155 bpm)

B.P: 160 / 86

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

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

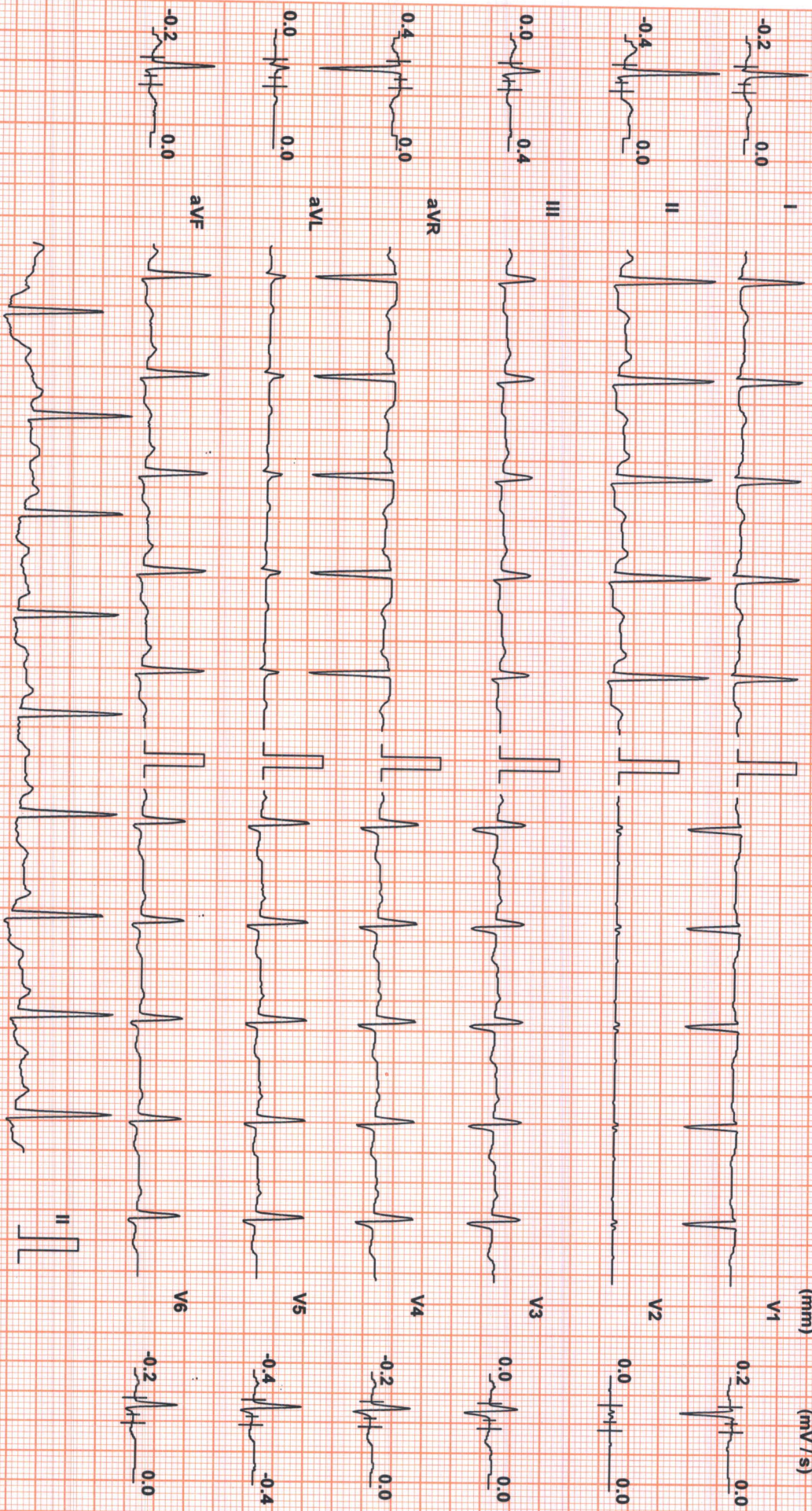


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = V + 60 ms

Linked Median

SUBURBAN DIAGNOSTICS

Test Report

MR DEEPAK JAMBHA VADEKAR (37 M) ID: 2307018684

Date: 11-Mar-23

Exec Time : 7 m 43 s Stage Time : 0 m 54 s HR: 90 bpm

Protocol: Bruce

Stage: Recovery(4)

Speed: 0 mph

Grade: 0 %

(THR: 155 bpm)

B.P.: 140 / 86

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

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

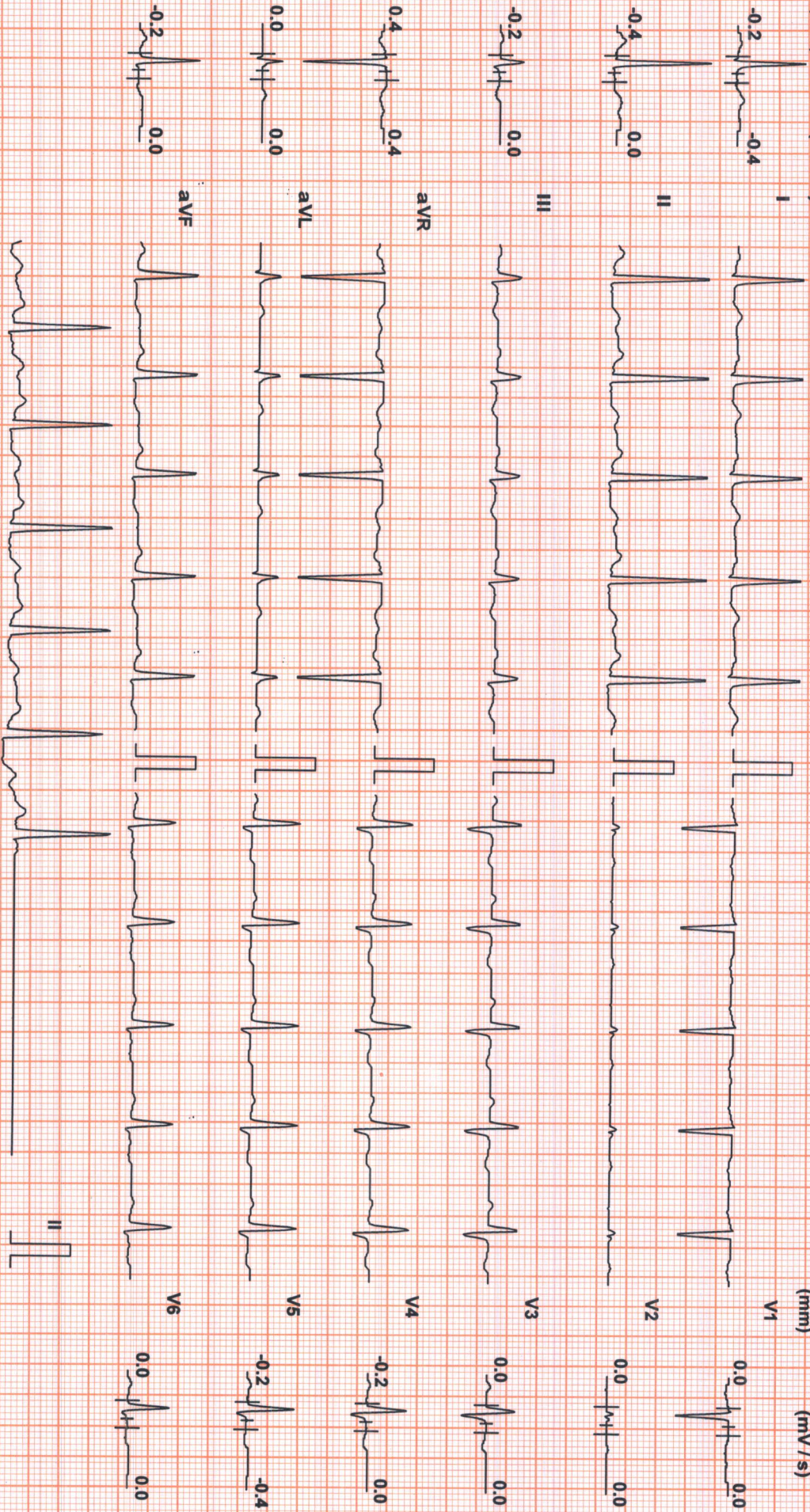


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spanden V 4.7

Linked Median



MR DEEPAK JAMBHAVADEKAR (37 M) ID: 2307018684

SUBURBAN DIAGNOSTICS

Test Report

Protocol: Bruce

Date: 11-Mar-23

Exec Time : 7 m 43 s

Stage Time : 0 m 54 s HR: 90 bpm

Stage: Recovery(5)

Speed: 0 mph

Grade: 0 %

(THR: 155 bpm)

B.P: 140 / 86

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

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

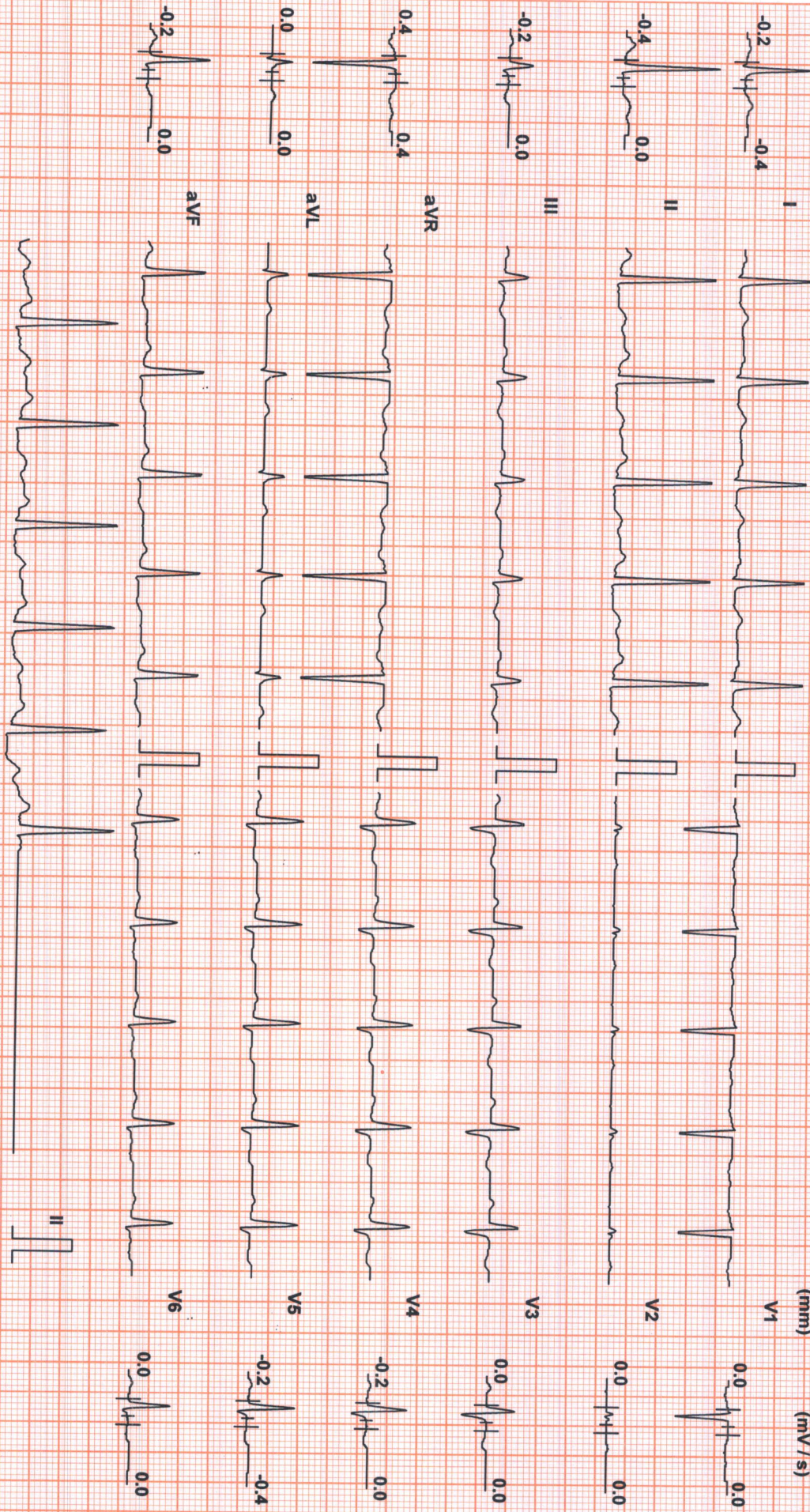


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

Schlier Standard V 4.7



सत्यमेव जयते
भारत सरकार



आधार

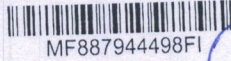
भारत सरकार
Government of India

भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India

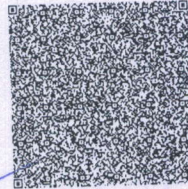
नोंदणी क्रमांक / Enrollment No.: 2722/41029/16774

To
दीपक पंढरीनाथ जांभवडेकर
Deepak Pandharinath Jambhavadekar
S/O: Pandharinath Jambhavadekar,
2/12, Devi Kutir Chawl, Jogeshwari Vikroli Link road,
Near Raj Tower, Jogeshwari East,
VTC: Mumbai,
PO: Jogeshwari East,
Sub District: Mumbai, District: Mumbai,
State: Maharashtra,
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Mobile: 9004198408

88794449



MF887944498FI



Dr. Alka Patnaik
M.B.B.S., C.G.O.-Nagpur Reg. No. 73367
Dip. Psysextherapy-U.K. Reg. No. 100335

आधार क्रमांक / Your Aadhaar No. : 4845 7313 4429

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माझे आधार, माझी ओळख



भारत सरकार
Government of India



आधार

Issue Date : 05/06/2013



दीपक पंढरीनाथ जांभवडेकर
Deepak Pandharinath Jambhavadekar
जन्म तारीख / DOB : 04/07/1980
पुरुष / Male

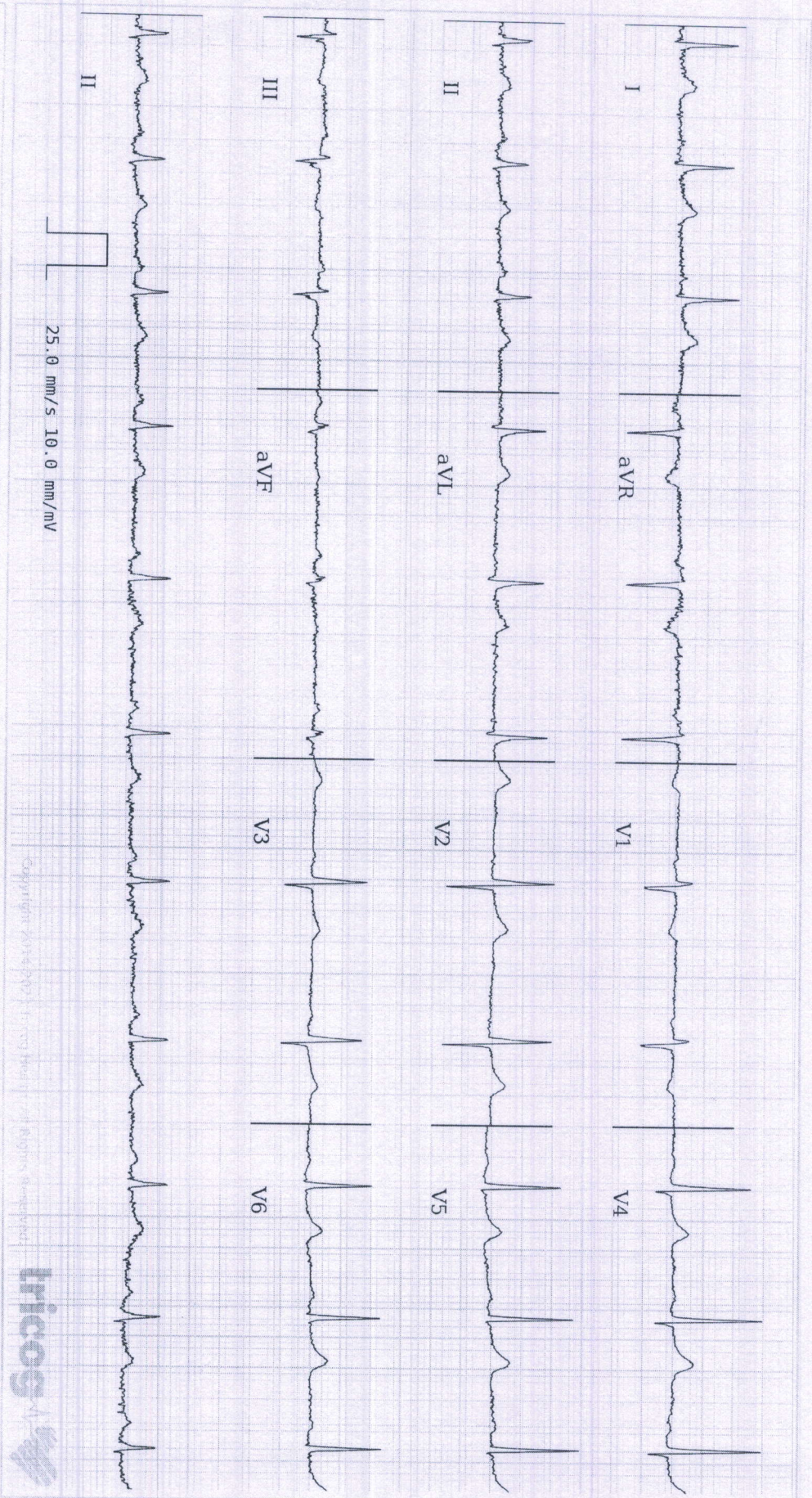
4845 7313 4429

माझे आधार, माझी ओळख

(Handwritten signature)

Patient Name: DEEPAK JAMBHAVDEKAR
Patient ID: 2307018684

Date and Time: 11th Mar 23 9:52 AM



Age **37** **10** **1**
years months days

Gender **Male**

Heart Rate **65bpm**

Patient Vitals

BP: 120/70 mmHg
Weight: 77 kg
Height: 178 cm
Pulse: NA
SpO2: NA
Resp: NA
Others:

Measurements
QRSD: 74ms
QT: 416ms
QTc: 432ms
PR: 140ms
P-R-T: 57° 6° 8°

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

REPORTED BY
A. Anand

Dr. Anand N. Korwani
M.D (General Medicine)
Reg No 39339 M.M.C.



Analysis in this report is based on ECG strips and should be read as an adjunct to clinical history. Any findings and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. All patient vitals are as entered by the clinician and not derived from the ECG.

PHYSICAL EXAMINATION REPORT

Patient Name	Mr Deepak Jambhavadkar	Sex/Age	M/42
Date	11/03/23	CID	2307018684

History and Complaints

H/o - Breathlessness, gmw → 2D Echo, ECG

EXAMINATION FINDINGS:

Height (cms):	178	Temp (0c):	Normal
Weight (kg):	77	Skin:	Atlesay, Acclery
Blood Pressure	120/70	Nails:	Cyanosis ⊕, clubbing ⊕
Pulse	60/mw	Lymph Node:	NP, tenderness over post-aortic (Stomach/abd.)
BMI	24.3		

Systems :

Cardiovascular:	S ₁ Loud, → S ₂ Normal
Respiratory:	Normal
Genitourinary:	Normal.
GI System:	Aeridity - Sos
CNS:	Normal

Impression:

Use Abd → Grade F fatty infiltration with simple hepatic cyst
mild prostaticomegaly with no post-void urine

Advice: Dietary Restriction
Refer to Urologist

--

CHIEF COMPLAINTS:

1)	Hypertension:	↑ 8 mm, ↑ cholesterol
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-HH
10)	GI system	Acidity
11)	Genital urinary disorder	NO
12)	Rheumatic joint diseases or symptoms	Low back pain, [Coccyx pain (injury)]
13)	Blood disease or disorder	NO
14)	Cancer/lump growth/cyst	NO
15)	Congenital disease	NO
16)	Surgeries	NO
17)	Musculoskeletal System	MAD

PERSONAL HISTORY:

1)	Alcohol	Occasional
2)	Smoking	NO
3)	Diet	Typ
4)	Medication	Bizheart - 5



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Dr. Alka Patnaik
M.B.B.S., C.G.O.-Nagpur Reg. No. 73367
Dip. Psysextherapy-U.K. Reg. No. OF395

Date:- 11-3-2023

CID: 2307018684

Name:- DEEPAK JAMBHANADEKAR

Sex / Age: M / 42

EYE CHECK UP

Chief complaints: — NO

Systemic Diseases: — NO

Past history: — NO

Unaided Vision: — NO

Aided Vision: — YES

Refraction: Normal with glass.

(Right Eye)

(Left Eye)

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

Colour Vision: Normal / Abnormal

Remark:



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NAME	MR. DEEPAK JAMBHAVADKAR	AGE/SEX : 37 YRS / MALE
CID	2307018684	DATE :- 11/03/2023

USG WHOLE ABDOMEN

LIVER : The liver is normal in size, shape and smooth margins. It shows bright parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. Left of the liver shows a simple cyst of size 11 mm . No evidence of any intra hepatic 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 9.9 x 4.3 cm. Left kidney measures 9.4 x 4.4 cm.

SPLEEN: The spleen is normal in size and echotexture. No evidence of focal lesion is noted.

Gaseous distention of bowel loops is noted.

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

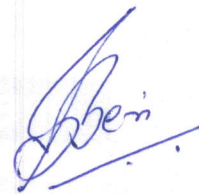
Prevoid - 464 cc postvoid - 37.8 cc (insignificant).

PROSTATE : The prostate is enlarged in size. It measures 4.4 x 3.2 x 3.3 cm and volume is 25.2 cc.

IMPRESSION:

Grade I fatty infiltration of the liver with simple hepatic cyst.

Mild prostatomegaly with no significant postvoid residual urine.



DR. SHILPA BERI

CONSULTANT RADIOLOGIST

Dr. Shilpa Beri

MBBS, DMRE

Reg. No. 2002/05/2302

Suburban Diagnostics (Vashi)

CID : 2307018684
Name : Mr Deepak Jambhavadekar
Age / Sex : 37 Years/Male
Ref. Dr :
Reg. Location : Vashi Main Centre

Reg. Date : 11-Mar-2023
Reported : 11-Mar-2023 / 17:19

Use a QR Code Scanner
Application To Scan the Code

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.

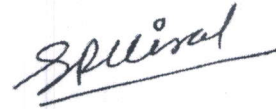
The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

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



Dr. Swapnil Nisal
MBBS, DMRE
MMC Reg. No.2015/06/3297

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