

CID# : 2305621478  
Name : MR.KOUSHIK MAJUMDAR  
Age / Gender : 46 Years/Male  
Consulting Dr. :  
Reg.Location : Kandivali East (Main Centre)  
Collected : 25-Feb-2023 / 08:35  
Reported : 26-Feb-2023 / 10:37

## PHYSICAL EXAMINATION REPORT

### History and Complaints:

Pain over right sholder off & on.

### EXAMINATION FINDINGS:

Height (cms):	161 cms	Weight (kg):	53 cms
Temp (0c):	Afebrile	Skin:	Normal
Blood Pressure (mm/hg):	140/80	Nails:	Normal
Pulse:	72/min	Lymph Node:	Not palpable

### Systems

Cardiovascular: Normal  
Respiratory: Normal  
Genitourinary: Normal  
GI System: Normal  
CNS: Normal

### IMPRESSION:

↑↑ Triglycerides  
ECG - LVH  
- USG - fatty liver

### ADVICE:

- fatty liver  
- Cardiologist opines  
- T. Atorva (40mg)

CID# : 2305621478  
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**CHIEF COMPLAINTS:**


- |  |    |
|--|----|
| 1) Hypertension:                         | No |
| 2) IHD                                   | No |
| 3) Arrhythmia                            | No |
| 4) Diabetes Mellitus                     | No |
| 5) Tuberculosis                          | No |
| 6) Asthama                               | No |
| 7) Pulmonary Disease                     | No |
| 8) Thyroid/ Endocrine disorders          | No |
| 9) Nervous disorders                     | No |
| 10) GI system                            | No |
| 11) Genital urinary disorder             | No |
| 12) Rheumatic joint diseases or symptoms | No |
| 13) Blood disease or disorder            | No |
| 14) Cancer/lump growth/cyst              | No |
| 15) Congenital disease                   | No |
| 16) Surgeries                            | No |
| 17) Musculoskeletal System               | No |

**PERSONAL HISTORY:**

- |               |       |
|---------------|-------|
| 1) Alcohol    | No    |
| 2) Smoking    | No    |
| 3) Diet       | Mixed |
| 4) Medication | No    |

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

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.  
Floor: 2nd  
Thane West, Maharashtra  
Mumbai - 400001  
Tel: 022-61700000

  
Dr. Jagruti Dhale  
MBBS  
Consultant Physician  
Reg. No. 69548

Date:- 25/2/23

CID: 2305621478

Name:- MR. Koushik M.

Sex/Age: M/46

**EYE CHECK UP**

Chief complaints: Routine ch-up

Systemic Diseases: NO H/O S/G

Past history: NO H/O Ocular surgery

hlogt and  
 -2.75 -2.25 x 80  
 -3.0 -0.75 x 90

Unaided Vision: < 6/60 < 6/60

Aided Vision: 6/9, 6/6 6/6, 6/6

Refraction:

eyes! normal

	(Right Eye)				(Left Eye)			
	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	3.0	-2.50	75	6/6	3.0	-2.75	75	6/6
Near	-1.75	-2.50	75	6/6	-1.75	-2.75	95	6/6

Colour Vision: Normal / Abnormal

Remark: Vn within normal limit

*Kajal K.*  
**KAJAL NAGRECHA**  
 OPTOMETRIST

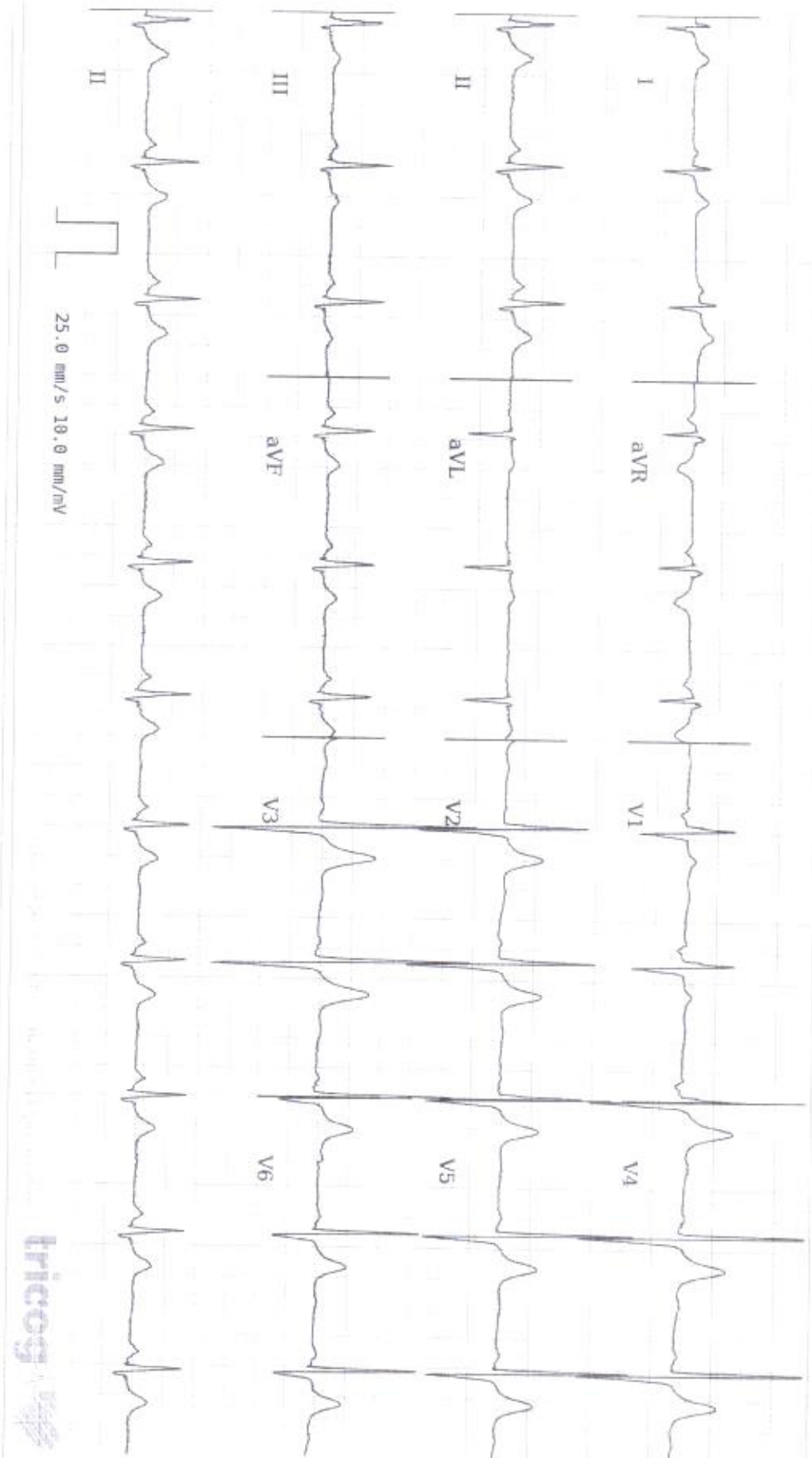
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 Row House No. 3, Aangan,  
 Thakur Village, Kandivali (east),  
 Mumbai - 408101.  
 Tel: 61700800



**SUBURBAN DIAGNOSTICS - KANDIVALI EAST**

Patient Name: **KOUSHIK MAJUMDAR**  
Patient ID: **2305621478**

Date and Time: **25th Feb 23 9:06 AM**



25.0 mm/s 10.0 mm/mV



Age **46** **0** **18**  
years months days

Gender **Male**

Heart Rate **67bpm**

Patient Vitals

BP: **140/80 mmHg**

Weight: **53 kg**

Height: **161 cm**

Pulse: **NA**

Spo2: **NA**

Resp: **NA**

Others:

**Measurements**

QRSD: **108ms**

QT: **356ms**

QTc: **376ms**

PR: **132ms**

P-R-T: **67° 103° 50°**

Sinus Rhythm, Right Axis Deviation, Left Ventricular Hypertrophy. Please correlate clinically.

REPORTED BY

**SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.**

Plot No. 3, Sector 10, Gurgaon,  
Haryana - 122002

Phone: +91 122 415 1111

Disclaimer: This report is based on ECG done and should be used in conjunction with clinical history, symptoms, and results of other investigations. The doctor and not the device is responsible for the diagnosis.

DR. ANIL PARULEKAR  
MBBS, MD, MEDICINE, DM Cardiology  
Cardiologist  
3972082483



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CID : 2305621478  
Name : Mr Koushik majumdar  
Age / Sex : 46 Years/Male  
Ref. Dr :  
Reg. Location : Kandivali East Main Centre  
Reg. Date : 25-Feb-2023  
Reported : 25-Feb-2023 / 13:45

**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. FAIZUR KHILJI before dispatch.**

*Khilji Faizur*

**Dr.FAIZUR KHILJI  
MBBS,RADIO DIAGNOSIS  
Reg No-74850  
Consultant Radiologist**

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?Access> sionNo=2023022508362965

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**CID** : 2305621478  
**Name** : Mr Koushik majumdar  
**Age / Sex** : 46 Years/Male  
**Ref. Dr** :  
**Reg. Location** : Kandivali East Main Centre

**Reg. Date** : 25-Feb-2023  
**Reported** : 25-Feb-2023 / 9:09

## USG WHOLE ABDOMEN

### LIVER:

The liver is normal in size (12.7cm), shape and smooth margins. **It shows bright 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 (12mm) and CBD (2.6mm) 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 visualized and appears normal.No evidence of solid or cystic mass lesion.

### KIDNEYS:

Right kidney measures 9.6 x 4.2 cm. Left kidney measures 10.3 x 5.1 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 (7.6 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.

### PROSTATE:

The prostate is normal in size and measures 3.5 x 2.7 x 2.6 cm and volume is 13.8 cc.

**Click here to view images** <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023022508362954>

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**CENTRAL REFERENCE LABORATORY:** Shop No. 9, 101 to 105, Skyline Wealth Space Building, Near Dmart, Premier Road, Vile Parle (E), Mumbai - 400086.

**HEALTHLINE:** 022-6170-0000 | **E-MAIL:** customerservice@suburbandiagnostics.com | **WEBSITE:** www.suburbandiagnostics.com

**Corporate Identity Number (CIN):** U85110MH2002PTC136144

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**IMPRESSION:**

**GRADE I FATTY LIVER.**

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

**This report is prepared and physically checked by Dr Akash Chhari before dispatch.**

DR. Akash Chhari  
MBBS. MD. Radio-Diagnosis Mumbai  
MMC REG NO - 2011/08/2862

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Corporate Identity Number (CIN): U85110MH2002PTC136144

# SUBURBAN DIAGNOSTICS KANDIVALI EAST

Report

Email:



1088 (2305621478) / Koushik M / 46 Yrs / M / 161 Cms / 53 Kg  
 Date: 25 / 02 / 2023 09:39:59 AM Refd By : AERCOFEMI Examined By: DR.AKHIL PARULEKAR

Stage	Time	Duration	Speed(Kmph)	Elevation	MEIS	Rate	%THR	BP	RRP	PVC	Comments
Supine	00:12	0:12	00.0	00.0	01.0	086	49%	140/80	120	00	
Standing	01:11	0:59	00.0	00.0	01.0	069	40%	140/80	096	00	
HV	01:20	0:09	00.0	00.0	01.0	067	39%	140/80	093	00	
ExStart	01:37	0:17	00.0	00.0	01.0	080	46%	140/80	112	00	
BRUCE Stage 1	03:37	2:00	02.7	10.0	03.5	124	71%	140/80	173	00	
BRUCE Stage 2	06:37	3:00	04.0	12.0	07.1	146	84%	150/80	219	00	
PeakEx	07:38	1:01	05.5	14.0	08.2	160	92%	170/90	272	00	
Recovery	08:38	1:00	00.2	00.0	01.1	137	79%	170/90	232	00	
Recovery	08:57	1:20	00.0	00.0	01.0	122	70%	150/90	183	00	

## FINDINGS :

Exercise Time : 06:01  
 Initial HR (ExStrt) : 80 bpm 46% of Target 174  
 Initial BP (ExStrt) : 140/80 (mm/Hg)  
 Max Workload Attained : 8.2 Fair response to induced stress  
 Duke Treadmill Score : 07.7  
 Test End Reasons : Heart Rate Achieved

Max HR Attained 160 bpm 92% of Target 174  
 Max BP Attained 170/90 (mm/Hg)

**Dr. Akhil P. Parulekar**  
 MBBS, MD, Medicine  
 DNB Clinical Pathology  
 Reg. No. 201708228

**SUBURBAN DIAGNOSTICS (PVT.) PVT. LTD.**  
 Plot No. 5, Aaregam,  
 Thakur Village, Kandivali (East),  
 Mumbai - 402101.  
 Tel : 61700800

Doctor : DR.AKHIL PARULEKAR





Email:

1088 / KOUSHIK M / 46 Yrs / M / 161 Cms / 53 Kg Date: 25 / 02 / 2023 09:39:59 AM Refd By : AERCOFEMI

REPORT :

Heart Rate 160.0 bpm  
Systolic BP 170.0 mmHg Diastolic BP 90.0 mmHg  
Exercise Time 06:01 Mins. Ectopic Beats 0.0  
METS 8.2 Test End Reason . Heart Rate Achieved Target Heart Rate 92% of 174

TEST OBJECTIVE	ROUTINE CHECK UP
RISK FACTOR	NONE
ACTIVITY	MODERATE ACTIVE
MEDICATION	NONE
REASON FOR TERMINATION	HEART RATE ACHIEVED
EXERCISE TOLERANCE	GOOD
EXERCISE INDUCED ARRHYTHMIAS	NO
HAEMODYNAMIC RESPONSE	NORMAL
CHRONOTROPIC RESPONSE	NORMAL
FINAL IMPRESSION	NO SIGNIFICANT ST T CHANGES NOTED STRESS TEST IS NEGATIVE FOR EXERCISE INDUCED ISCHAEMIC HEART DISEASE FOR GIVEN DURATION OF EXERCISE
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.

Dr. Akhil P. Parulekar

MBBS, MD, Medicine

DNB-Cardiology

Reg. No. 2012082463

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.  
Plot No. 2, Asegaon,  
Kandivali East, Mumbai - 400101.  
Tel : 61700800

Doctor : DR. AKHIL PARULEKAR

1088 (2305621478) / KOUSHIK M / 46 Yrs / M / 161 Cms / 53 Kg / HR : 86



Date: 25 / 02 / 2023 09:39:59 AM

METS: 1.0 / 86 bpm 49% of THR

BP: 140/80 mmHg

Raw ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

4X

80 mS Ppd J

25 mm/Sec 1.0 Cm/dV

SR 1.2  
SPS 1.4

V1 0.6  
V6 1.0

II 1.8  
III 2.9

V2 2.2  
V7 2.1

III 0.6  
aVL 1.6

V3 2.7  
V8 3.2

aVR 1.5  
aVL 2.1

V4 2.2  
V9 2.9

aVL 0.3  
aVF 0.1

V5 1.8  
V10 2.4

aVF 1.2  
V6 2.2

V6 1.7  
V11 2.1

V2  
2.2



REMARKS:



**SUBURBAN DIAGNOSTICS KANDIVALI EAST**

**STANDING ( 00:59 )**

1088 (2305621478) / KOUSHIK M / 46 Yrs / M / 161 Cms / 53 Kg / HR - 69



Date: 25/02/2023 09:39:59 AM

METS: 1.0/69 bpm 40% of THR BP: 140/80 mmHg Row ECG/BLC On/Noch On/HF 0.05 Hz/LE 35 Hz

EXTime: 00:00:00 Kmph: 0.0%

4X 70 ms Post J

25 mm/Sec 1.0 Cm/mV

STV 1.0  
STV 1.0  
STV 1.2

V1 0.6  
V1 0.8

V1

II 2.0  
II 3.0

V2 1.7  
V2 1.9

V2

III 1.0  
III 1.8

V3 2.5  
V3 3.5

V3

avR -1.5  
avR -2.1

V4 2.0  
V4 3.1

V4

avL 0.1  
avL -0.3

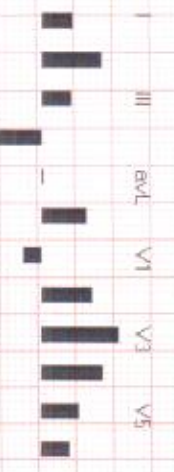
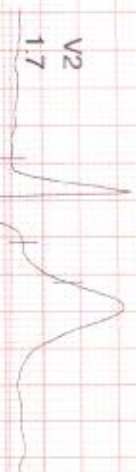
V5 1.3  
V5 2.3

V5

avF 1.5  
avF 2.4

V6 0.9  
V6 1.7

V6



REMARKS

SUBURBAN DIAGNOSTICS KANDIVALI EAST

HV ( 00:09 )



1088 (2305621478) / Koushik M / 46 Yrs / M / 161 Cms / 53 Kg / HR 67

Date: 25 / 02 / 2023 09:39:59 AM

METS: 1.0 / 67 bpm 39% of THR BP: 140/80 mmHg Raw ECG/BLC On/Notch On/HE 0.05 Hz/LE 35 Hz

EXTime: 00:00:0.0 kmph: 0.0%

4X

40 mS Post J

25 mm/Sec 1.0 Cm/mV

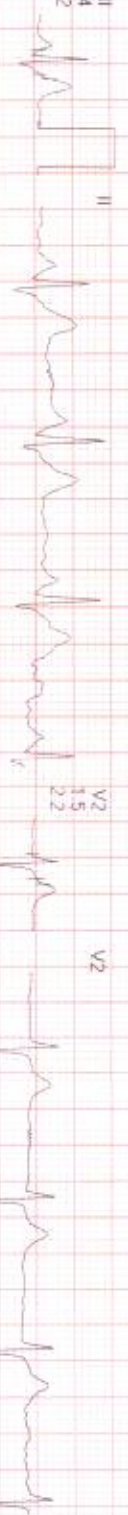
SI 0.9  
SPS 1.8

V1 0.4  
V2 1.0



II 1.4  
III 1.4  
aVF 3.2

V2 1.5  
V3 2.2



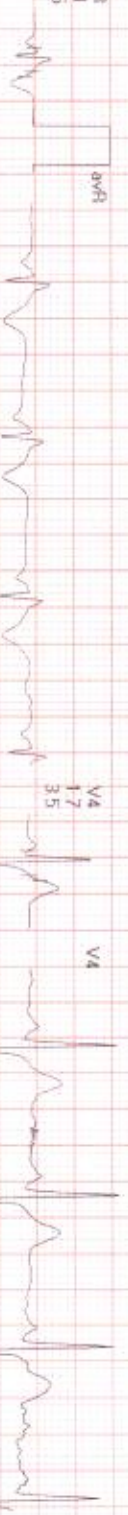
III 0.5  
aVF 1.4

V3 2.2  
V4 4.2



aVR 1.1  
aVL 2.5

V4 1.7  
V5 3.5



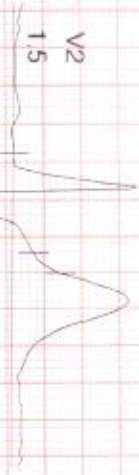
aVL 0.2  
aVF 0.2

V5 1.1  
V6 3.0



aVF 0.9  
aVR 2.8

V6 0.8  
V7 2.6



REMARKS



SUBURBAN DIAGNOSTICS KANDIVALI EAST

EXStt

ECG/PL

1088 (2305621478) / Koushik M / 46 Yrs / M / 161 Cms / 53 Kg / HR : 80

Date: 25 / 02 / 2023 09:39:53 AM

METS: 1.0 / 80 bpm 46% of THR EF: 140/80 mmHg

Raw ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

E-Time 00:00 0.01 mph 0.0%

4X

30 ms Paper J

25mm/Sec 1.0 Cm/mV

PR: 0.13  
QT: 0.38  
QTc: 0.25

V1: 0.2  
V2: 0.2  
V3: 0.9

II: 0.8  
III: 1.7

V4: 4.2  
V5: 4.2  
V6: 3.3

V2: 4.2

III: 9.1  
aVL: 0.3  
aVR: -0.9  
aVF: 5.0

V3: 3.5  
V4: 4.2  
V5: 4.2

aVR: -0.9  
aVL: 0.3  
aVF: 5.0

V4: 4.2  
V5: 4.2  
V6: 5.7

aVL: 0.3  
aVR: -0.9  
aVF: 5.0

V5: 3.2  
V6: 3.7  
V7: 3.2

aVF: 5.0  
aVR: -0.9  
aVL: 0.3

V6: 3.1  
V7: 2.5  
V8: 2.5



REMARKS



SUBURBAN DIAGNOSTICS KANDIVALI EAST

BRUCE : Stage 1 ( 02:00 )

1088 (2305621478) / KOUSHIK M / 46 Yrs / M / 161 Cms / 53 Kg / HR : 124

ECG PL

Date 25/02/2023 09:39:59 AM

METS: 3.5/124 bpm 71% of THR EP: 140/80 mmHg Raw ECG/BLC On/Notch On/HE 0.05 Hz/AF 35. Hz

EXTime 02:00 2.7 Kmph 10.0%

4X 80 MS Post A

25 mm/Sec 1.0 Cm/box

SI 2.3  
RI 2.3  
RS 2.7

VI 1.8  
V1 1.8  
V2 2.2

II 3.8  
III 5.4

V2 2.4  
V3 2.7

V2 2.4

III 1.4  
aVR 2.7

V3 4.2  
V4 5.3

aVR 3.1  
aVL 4.0

V4 3.7  
V5 5.4

aVL 0.5  
aVF 0.0

V5 2.9  
V6 4.3

aVF 2.6  
V6 4.0

V6 2.2  
V6 3.3



SUBURBAN DIAGNOSTICS KANDIVALI EAST

BRUCE : Stage 2 ( 03:00 )



1088 (2305621478) / KOUSHIK M / 46 Yrs / M / 161 Cms / 53 Kg / HR : 146

Date: 25 / 02 / 2023 09:39:59 AM

METS: 7.1 / 146 bpm 84% of THR BP: 150/80 mmHg

Raw ECG/BLC On/Noise On/ HF 0.05 Hz/LF 35 Hz

ExTime: 05:00 4.0 kmph 12.0%

4X 60 ms Paper J

25 mm/Sec 1.0 Cm/mV

STU 1.6  
STV 1.5  
STZ 2.5

V1 1.7  
V2 1.9

II 2.6  
III 4.9

V2 0.9  
V3 2.3

V2 0.9

III 1.0  
IV 2.5

V3 2.1  
V4 5.8

avR 2.1  
avL 3.7

V4 2.1  
V5 5.0

avL 0.3  
avF 0.0

V5 1.5  
V6 3.9

avF 1.8  
avR 3.7

V5 1.4  
V6 3.0



REMARKS



SUBURBAN DIAGNOSTICS KANDIVALI EAST

PeakEx



1088 (2305621478) / KOUSHIK M / 46 Yrs / M / 161 Cms / 53 Kg / HR : 160

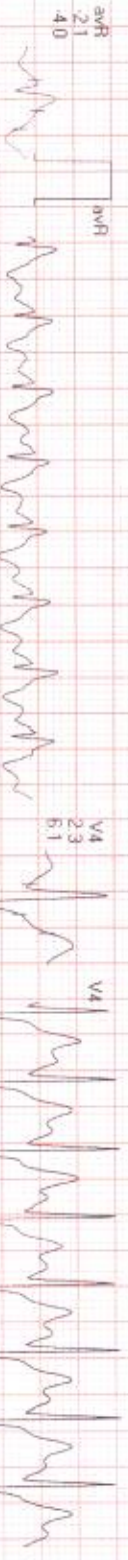
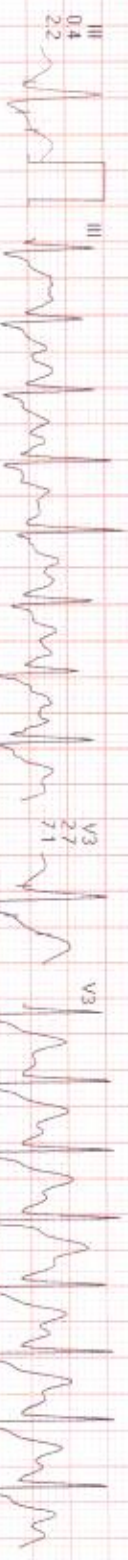
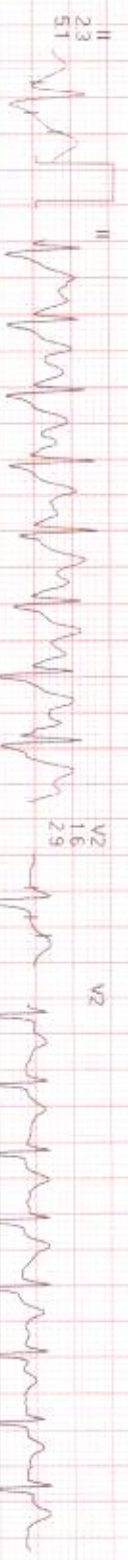
Date: 25 / 02 / 2023 09:39:59 AM

METS: 8.2 / 160 bpm: 92% of THR BP: 170/90 mmHg Raw ECG/ BUC On/ Notch On/ HF: 0.05 Hz/LF: 35 Hz

EXTime: 06:01 5.5 Km/h 140%

4X 60 ms Post J

25 mm/Sec 1.0 Cm/mV



REMARKS



SUBURBAN DIAGNOSTICS KANDIVALI EAST

Recovery : ( 01:00 )



1088 (2305621478) / KOUSHIK M / 46 Yrs / M / 161 Cms / 53 Kg / HR . 137

Date: 25 / 02 / 2023 09:39:59 AM

METS: 1 / 1 / 137 bpm 79% of THR BP: 150/90 mmHg Raw ECG/BLG On/ North On/ HF 0.05 Hz/AF 35 Hz

ExTime: 06:01 0.2 Kmph 0.0%

4X 60 AS Post J

25 mm/Sec 1.0 Cm/mV

RI: 2.1  
SI: 2.9

VI: -1.7  
VII: -2.3

II: 5.3  
III: 7.8

V2: 1.7  
V3: 2.4

III: 3.2  
IV: 5.0

V3: 7.0  
V4: 10.2

avR: -3.7  
avL: 5.4

V4: 6.0  
V5: 8.9

avL: 0.5  
avF: 1.1

V5: 7.5  
V6: 6.9

avF: 4.2  
V6: 6.4

V6: 2.3  
V7: 5.1



REMARKS



**SUBURBAN DIAGNOSTICS KANDIVALI EAST**

**Recovery : ( 01:19 )**

AG-PL

1088 (2305621478) / Koushik M / 46 Yrs / M / 161 Cms / 53 Kg / HR 122

Date: 25 / 02 / 2023 09:39:59 AM METS: 1.17 / 122 bpm 70% of THR BP: 150/90 mmHg Row ECG/ BLC Ok/ Natch Ok/ HF 0.05 Hz/ LF 35 Hz

4X 50 mS Post J

25 mm/Sec 1.0 Cm/mV

STL 2.0  
STW 3.2

V1 1.4  
V2 2.2

II 3.9  
III 6.7

V2 2.4  
V3 3.6

III 1.9  
aVF 3.5

V3 5.3  
V4 9.1

aVR -3.0  
aVL 4.9

V4 4.3  
V5 7.6

aVL 0.1  
aVF -0.2

V5 2.9  
V6 5.7

aVF 2.9  
V5 5.1

V6 2.2  
V6 4.3

V2 2.4



REMARKS



CID : 2305621478  
Name : MR.KOUSHIK MAJUMDAR  
Age / Gender : 46 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 25-Feb-2023 / 08:38  
Reported : 25-Feb-2023 / 11:32

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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	14.6	13.0-17.0 g/dL	Spectrophotometric
RBC	4.97	4.5-5.5 mil/cmm	Elect. Impedance
PCV	45.2	40-50 %	Measured
MCV	91	80-100 fl	Calculated
MCH	29.3	27-32 pg	Calculated
MCHC	32.2	31.5-34.5 g/dL	Calculated
RDW	14.4	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	6600	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	29.7	20-40 %	
Absolute Lymphocytes	1960.2	1000-3000 /cmm	Calculated
Monocytes	8.6	2-10 %	
Absolute Monocytes	567.6	200-1000 /cmm	Calculated
Neutrophils	56.8	40-80 %	
Absolute Neutrophils	3748.8	2000-7000 /cmm	Calculated
Eosinophils	4.5	1-6 %	
Absolute Eosinophils	297.0	20-500 /cmm	Calculated
Basophils	0.4	0.1-2 %	
Absolute Basophils	26.4	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<b><u>PLATELET PARAMETERS</u></b>			
Platelet Count	273000	150000-400000 /cmm	Elect. Impedance
MPV	9.2	6-11 fl	Calculated
PDW	15.6	11-18 %	Calculated
<b><u>RBC MORPHOLOGY</u></b>			



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Age / Gender : 46 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

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Reported : 25-Feb-2023 / 10:34

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 7 2-15 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**



MC-2111



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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	94.9	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	98.2	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.91	0.3-1.2 mg/dl	Vanadate oxidation
BILIRUBIN (DIRECT), Serum	0.25	0-0.3 mg/dl	Vanadate oxidation
BILIRUBIN (INDIRECT), Serum	0.66	<1.2 mg/dl	Calculated
TOTAL PROTEINS, Serum	8.1	5.7-8.2 g/dL	Biuret
ALBUMIN, Serum	4.9	3.2-4.8 g/dL	BCG
GLOBULIN, Serum	3.2	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.5	1 - 2	Calculated
SGOT (AST), Serum	27.4	<34 U/L	Modified IFCC
SGPT (ALT), Serum	30.8	10-49 U/L	Modified IFCC
GAMMA GT, Serum	23.4	<73 U/L	Modified IFCC
ALKALINE PHOSPHATASE, Serum	86.3	46-116 U/L	Modified IFCC
BLOOD UREA, Serum	19.0	19.29-49.28 mg/dl	Calculated
BUN, Serum	8.9	9.0-23.0 mg/dl	Urease with GLDH
CREATININE, Serum	0.91	0.60-1.10 mg/dl	Enzymatic



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eGFR, Serum	95	>60 ml/min/1.73sqm	Calculated
URIC ACID, Serum	6.7	3.7-9.2 mg/dl	Uricase/ Peroxidase
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 Borivali Lab, Borivali West  
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*Bmhaskar*

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



MC-2111





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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	5.6	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	114.0	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 SDRL, Vidyavihar Lab

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

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





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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**EXAMINATION OF FAECES**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>
<b><u>PHYSICAL EXAMINATION</u></b>		
Colour	Brown	Brown
Form and Consistency	Semi Solid	Semi Solid
Mucus	Absent	Absent
Blood	Absent	Absent
<b><u>CHEMICAL EXAMINATION</u></b>		
Reaction (pH)	Acidic (5.0)	-
Occult Blood	Absent	Absent
<b><u>MICROSCOPIC EXAMINATION</u></b>		
Protozoa	Absent	Absent
Flagellates	Absent	Absent
Ciliates	Absent	Absent
Parasites	Absent	Absent
Macrophages	Absent	Absent
Mucus Strands	Absent	Absent
Fat Globules	Absent	Absent
RBC/hpf	Absent	Absent
WBC/hpf	Absent	Absent
Yeast Cells	Absent	Absent
Undigested Particles	Present +	-
Concentration Method (for ova)	No ova detected	Absent
Reducing Substances	-	Absent

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

*Bmhasakar*

**Dr.KETAKI MHASKAR**  
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**Pathologist**



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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
<b><u>PHYSICAL EXAMINATION</u></b>			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.015	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	0-1		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	2-3	Less than 20/hpf	
Others	-		

**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**



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

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	O
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**



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Reg. Location : Kandivali East (Main Centre)

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	212.5	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	303.1	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	33.3	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Elimination/ Catalase
NON HDL CHOLESTEROL, Serum	179.2	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	169.8	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	9.4	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	6.4	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	5.1	0-3.5 Ratio	Calculated

Note : LDL test is performed by direct measurement.

\*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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**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	14.5	11.5-22.7 pmol/L	CLIA
sensitiveTSH, Serum	1.582	0.55-4.78 microu/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 \*\*\*

  
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