

CID# : 2304117996
Name : MR.ASHISH DUDHARAJ CHAUDHARI
Age / Gender : 33 Years/Male
Consulting Dr. : Collected : 10-Feb-2023 / 09:15
Reg.Location : Andheri West (Main Centre) Reported : 13-Feb-2023 / 13:03

PHYSICAL EXAMINATION REPORT

History and Complaints:

Asymptomatic

EXAMINATION FINDINGS:

Height (cms):	172 cms	Weight (kg):	64 kgs
Temp (0c):	Afebrile	Skin:	Normal
Blood Pressure (mm/hg):	120 / 80	Nails:	Normal
Pulse:	82 / min	Lymph Node:	Not palpable

Systems

Cardiovascular: S1S2 audible
Respiratory: AEBE
Genitourinary: NAD
GI System: Liver spleen not palpable
CNS: NAD

IMPRESSION:

FBS-262mg %, PLBS-266mg%, HBA1C-11, Urine-glucose 2+, Ketones 2+
Rest of the Reports - Normal

ADVICE:

Diabetic Diet, Lifestyle modification, Physical activity of 45 minutes.
Kindly Consult your Family Physician with all reports

CHIEF COMPLAINTS:

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

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- | | |
|--|----|
| 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 ***

Dr.Sharmila Kothari



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CID : 2304117996
Name : MR. ASHISH DUDHARAJ CHAUDHARI
Age / Gender : 33 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 10-Feb-2023 / 09:19
Reported : 10-Feb-2023 / 12:00

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	16.8	13.0-17.0 g/dL	Spectrophotometric
RBC	6.33	4.5-5.5 mil/cmm	Elect. Impedance
PCV	50.2	40-50 %	Calculated
MCV	79.3	80-100 fl	Measured
MCH	26.5	27-32 pg	Calculated
MCHC	33.5	31.5-34.5 g/dL	Calculated
RDW	15.1	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	5190	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	24.0	20-40 %	
Absolute Lymphocytes	1245.6	1000-3000 /cmm	Calculated
Monocytes	7.0	2-10 %	
Absolute Monocytes	363.3	200-1000 /cmm	Calculated
Neutrophils	67.1	40-80 %	
Absolute Neutrophils	3482.5	2000-7000 /cmm	Calculated
Eosinophils	1.8	1-6 %	
Absolute Eosinophils	93.4	20-500 /cmm	Calculated
Basophils	0.1	0.1-2 %	
Absolute Basophils	5.2	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	196000	150000-400000 /cmm	Elect. Impedance
MPV	10.1	6-11 fl	Measured
PDW	19.9	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			
Hypochromia	-		
Microcytosis	-		



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Collected : 10-Feb-2023 / 09:19
Reported : 10-Feb-2023 / 12:06

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 2-15 mm at 1 hr. Sedimentation

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



MC-2111



Dr. ANUPA DIXIT
M.D.(PATH)
Pathologist



CID : 2304117996
Name : MR.ASHISH DUDHARAJ CHAUDHARI
Age / Gender : 33 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 10-Feb-2023 / 09:19
Reported : 10-Feb-2023 / 12:36

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	262.4	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	266.7	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.70	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.27	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.43	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.3	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.7	3.5-5.2 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	18.0	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	20.3	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	18.9	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	117.5	40-130 U/L	Colorimetric
BLOOD UREA, Serum	21.7	12.8-42.8 mg/dl	Kinetic
BUN, Serum	10.1	6-20 mg/dl	Calculated
CREATININE, Serum	0.76	0.67-1.17 mg/dl	Enzymatic
eGFR, Serum	126	>60 ml/min/1.73sqm	Calculated
URIC ACID, Serum	3.7	3.5-7.2 mg/dl	Enzymatic

Authenticity Check



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Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 10-Feb-2023 / 13:45
Reported : 10-Feb-2023 / 17:11

Urine Sugar (Fasting)	++	Absent
Urine Ketones (Fasting)	++	Absent
Urine Sugar (PP)	+++	Absent
Urine Ketones (PP)	Absent	Absent

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



Anupa
Dr. ANUPA DIXIT
M.D.(PATH)
Pathologist



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Name : MR.ASHISH DUDHARAJ CHAUDHARI
Age / Gender : 33 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 10-Feb-2023 / 09:19
Reported : 10-Feb-2023 / 13:59

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	11.3	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	277.6	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 CPL, Andheri West

*** End Of Report ***



Anupa

Dr. ANUPA DIXIT
M.D.(PATH)
Pathologist



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Reg. Location : Andheri West (Main Centre)

Collected : 10-Feb-2023 / 09:19
Reported : 10-Feb-2023 / 12:26

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 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 ***



Anupa

Dr. ANUPA DIXIT
M.D.(PATH)
Pathologist



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Collected : 10-Feb-2023 / 09:19
Reported : 10-Feb-2023 / 12:52

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	166.2	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	68.9	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	41.4	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	124.8	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	111.0	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	13.8	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.0	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.7	0-3.5 Ratio	Calculated

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



Anupa

Dr. ANUPA DIXIT
M.D.(PATH)
Pathologist



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Age / Gender : 33 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 10-Feb-2023 / 09:19
Reported : 10-Feb-2023 / 12:36

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
THYROID FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Free T3, Serum	3.6	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	17.5	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	0.479	0.35-5.5 microIU/ml	ECLIA

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)



Anupa

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



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Age / Gender : 33 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 10-Feb-2023 / 09:19
Reported : 10-Feb-2023 / 17:50

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
EXAMINATION OF FAECES

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>
<u>PHYSICAL EXAMINATION</u>		
Colour	Brown	Brown
Form and Consistency	Semi Solid	Semi Solid
Mucus	Present	Absent
Blood	Absent	Absent
<u>CHEMICAL EXAMINATION</u>		
Reaction (pH)	Acidic (6.5)	-
Occult Blood	Absent	Absent
<u>MICROSCOPIC EXAMINATION</u>		
Protozoa	Absent	Absent
Flagellates	Absent	Absent
Ciliates	Absent	Absent
Parasites	Absent	Absent
Macrophages	Absent	Absent
Mucus Strands	Flakes +++	Absent
Fat Globules	Absent	Absent
RBC/hpf	Absent	Absent
WBC/hpf	150-160*	Absent

* Large clumps restricted to mucus flakes.

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



MC-2111

J. Thakker

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



CID : 2304117996
Name : MR.ASHISH DUDHARAJ CHAUDHARI
Age / Gender : 33 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 10-Feb-2023 / 09:19
Reported : 10-Feb-2023 / 16:25

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
URINE EXAMINATION REPORT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Yellow	Pale Yellow	-
Reaction (pH)	6.5	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.010	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	40	-	-
CHEMICAL EXAMINATION			
Proteins	Trace	Absent	pH Indicator
Glucose	2+	Absent	GOD-POD
Ketones	2+	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
MICROSCOPIC EXAMINATION			
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 CPL, Andheri West
*** End Of Report ***



Anupa

Dr. ANUPA DIXIT
M.D.(PATH)
Pathologist

Authenticity Check



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CID : 2304117996
 Name : Mr ASHISH DUDHARAJ
 CHAUDHARI
 Age / Sex : 33 Years/Male
 Ref. Dr :
 Reg. Location : Andheri West (Main Center)

Reg. Date : 10-Feb-2023
 Reported : 10-Feb-2023 / 11:25

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 R K Bhandari before dispatch.

Dr R K Bhandari
 M D , DMRE
 MMC REG NO. 34078

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023021009160590>

Date:- 10-2-23

CID: 2304117996

Name:- ASHISH CHAUDHARI

Sex / Age: M / 33

EYE CHECK UP

Chief complaints: Nil

Systemic Diseases: Nil

Past history: Nil.

Unaided Vision: ✓

Aided Vision: ✓

Refraction: ✓

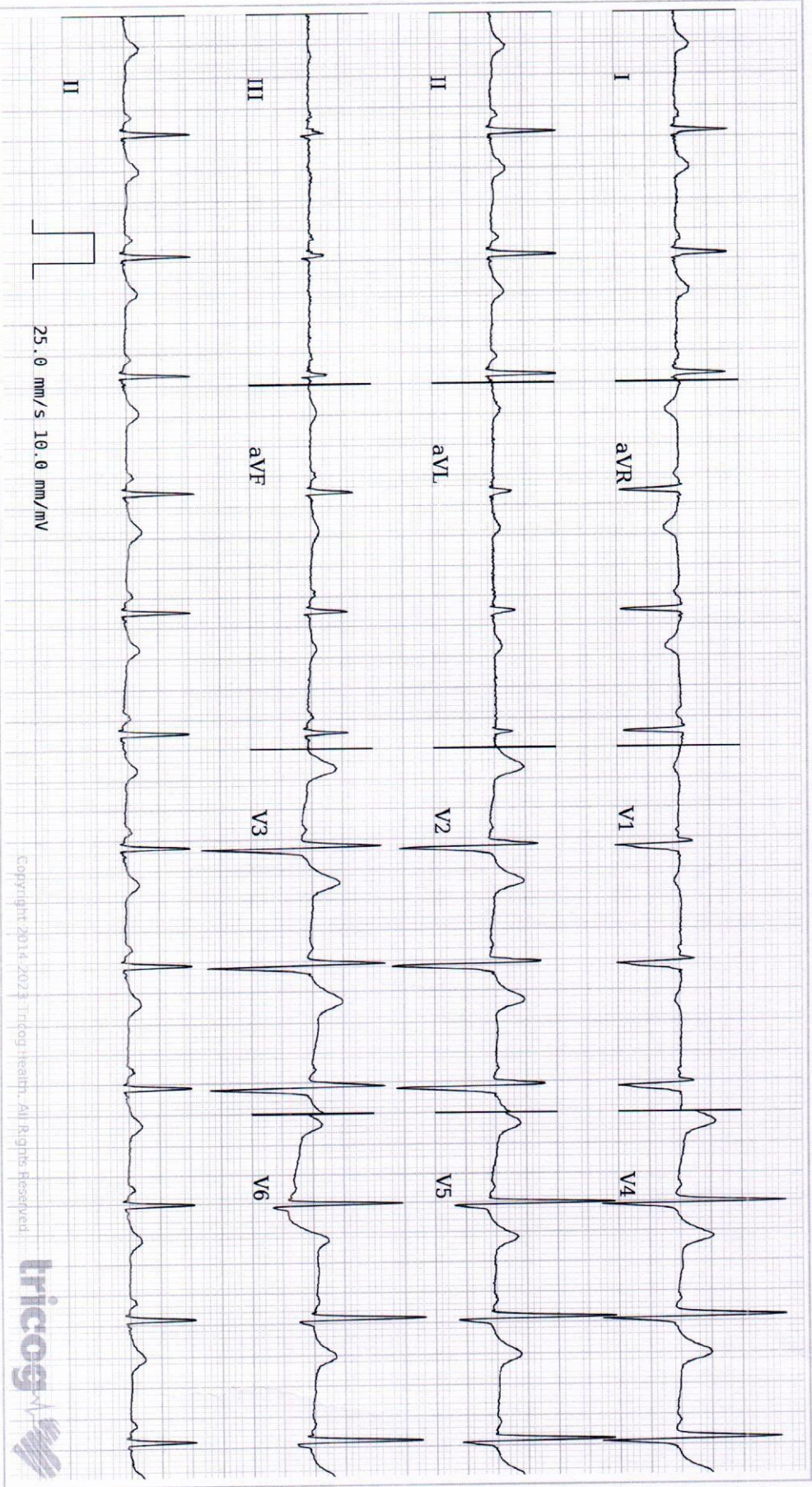
(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance				6/6				6/6
Near				M-5				M-5

Colour Vision: Normal / Abnormal

Remark:



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Age **33** **1** **28**
years months days

Gender **Male**

Heart Rate **77bpm**

Patient Vitals

BP: NA
Weight: NA
Height: NA
Pulse: NA
Spo2: NA
Resp: NA
Others:

Measurements

QRSD: 104ms
QT: 382ms
QTc: 432ms
PR: 110ms
P-R-T: 47° 38° 35°

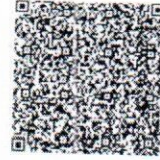
REPORTED BY

[Signature]

DR RAVI CHAVAN
MD D CARD, D DIABETES
Cardiologist & Diabetologist
2004/06/2468

Sinus Rhythm, PR Interval 110 ms. Please correlate clinically.

Disclaimer: 1) Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, 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.



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Ref. Dr :
Reg. Location : Andheri West (Main Center)

Reg. Date : 10-Feb-2023
Reported : 10-Feb-2023 / 11:51

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (12.8cm), 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 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 10.4 x 4.5cm. Left kidney measures 10.1 x 5.3cm.

SPLEEN:

The spleen is normal in size (10.7cm) 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 measuring 3.8 x 3.1 x 2.9cm and volume is 18.9cc.

IMPRESSION:

No significant abnormality is seen.

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

DR. NIKHIL DEV
M.B.B.S, MD (Radiology)
Reg No - 2014/11/4764
Consultant Radiologist

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023021009160577>

SUBURBAN DIAGNOSTICS

Patient Details **Date:** 10-Feb-23 **Time:** 09:58:09
Name: ASHISH DUDHARAJ CHAUDHARI **ID:** 2304117996
Age: 33 y **Sex:** M **Height:** 172 cms **Weight:** 64 Kgs
Clinical History: NONE

Medications: NONE

Test Details

Protocol: Bruce **Pr.MHR:** 187 bpm **THR:** 158 (85 % of Pr.MHR) bpm
Total Exec. Time: 7 m 46 s **Max. HR:** 162 (87% of Pr.MHR)bpm **Max. Mets:** 10.20
Max. BP: 150 / 80 mmHg **Max. BP x HR:** 24300 mmHg/min **Min. BP x HR:** 7680 mmHg/min
Test Termination Criteria: Target HR attained

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 : 1	1.0	0	0	96	120 / 80	-2.76 V1	4.95 II
Standing	0 : 6	1.0	0	0	106	120 / 80	-0.85 aVR	2.83 II
Hyperventilation	0 : 12	1.0	0	0	111	120 / 80	-1.06 aVR	2.83 II
1	3 : 0	4.6	1.7	10	146	130 / 80	-3.18 aVR	5.66 II
2	3 : 0	7.0	2.5	12	160	140 / 80	-2.34 aVR	5.66 II
Peak Ex	1 : 46	10.2	3.4	14	162	150 / 80	-1.06 aVR	4.95 V4
Recovery(1)	1 : 0	1.8	1	0	137	130 / 80	-1.27 aVR	5.66 V3
Recovery(2)	1 : 0	1.0	0	0	117	120 / 80	-1.06 aVR	5.31 V3
Recovery(3)	0 : 33	1.0	0	0	116	120 / 80	-0.42 III	3.54 V4

Interpretation

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

Dr. Ravi Chavan
 MD; D Card
 Consultant Cardiologist
 Reg. No.: 2004/06/2468

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

Doctor: DR. RAVI CHAVAN
 (c) Schiller Healthcare India Pvt. Ltd. V 4.7

ASHISH DUDHARAJ CHAUDHARI (33 M/D: 2304117996

Date: 10-Feb-23 Exec Time : 0 m 0 s Stage Time : 0 m 55 s HR: 97 bpm

Protocol: Bruce

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 158 bpm)

B.P: 120 / 80

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

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

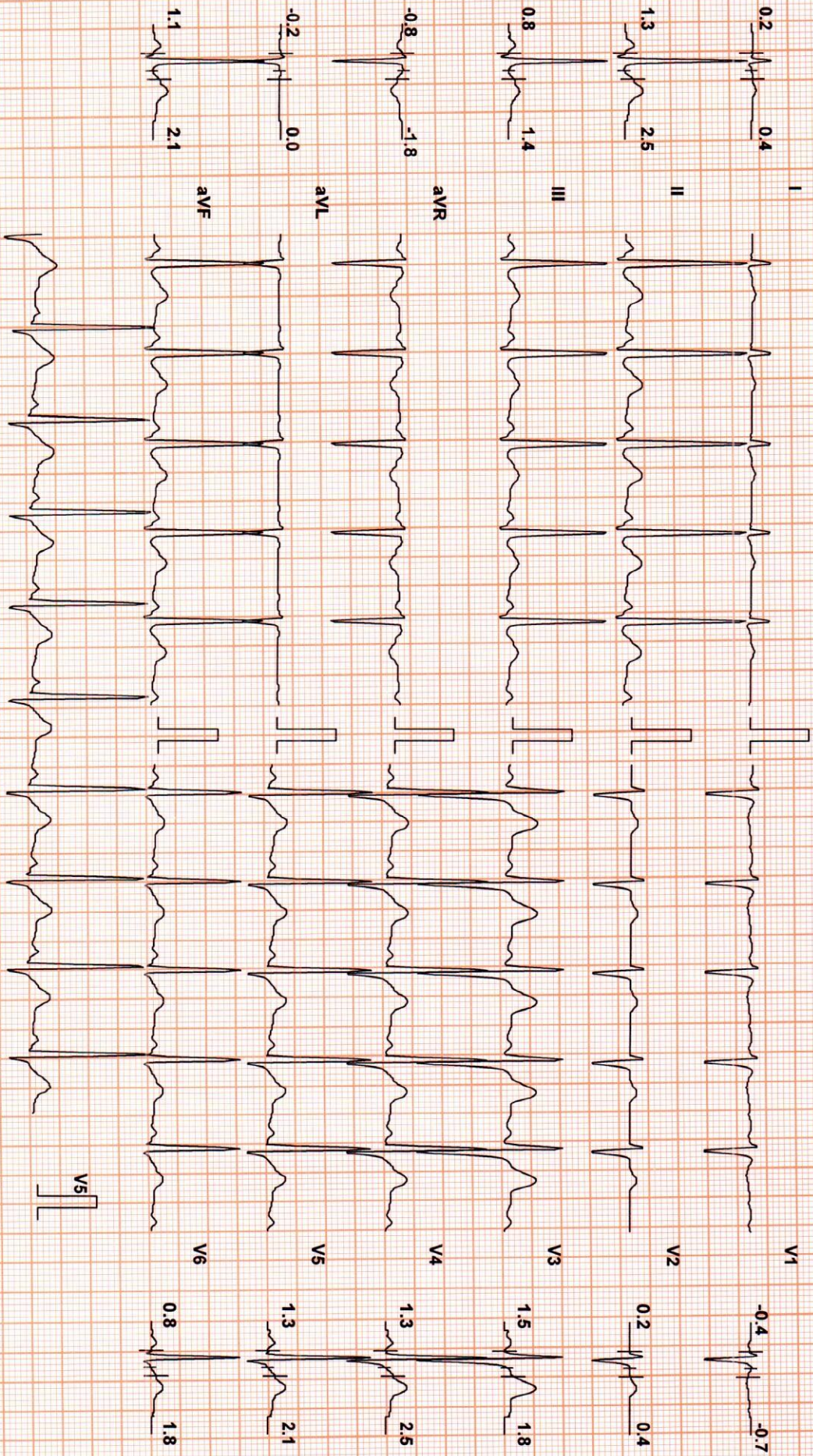


Chart Speed: 25 mm/sec Filter: 35 Hz Mains Fil: ON Amp: 10 mm Iso = R - 60 ms J = R + 60 ms Post J = J + 60 ms
Schiller Spandan V 4.7 Linked Median

ASHISH DUDHARAJ CHAUDHARI (33 M/D: 2304117996) Date: 10-Feb-23 Exec Time : 0 m 0 s Stage Time : 0 m 0 s **HR: 107 bpm**

Protocol: Bruce Stage: Standing Speed: 0 mph Grade: 0 % (THR: 158 bpm) B.P: 120 / 80

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

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

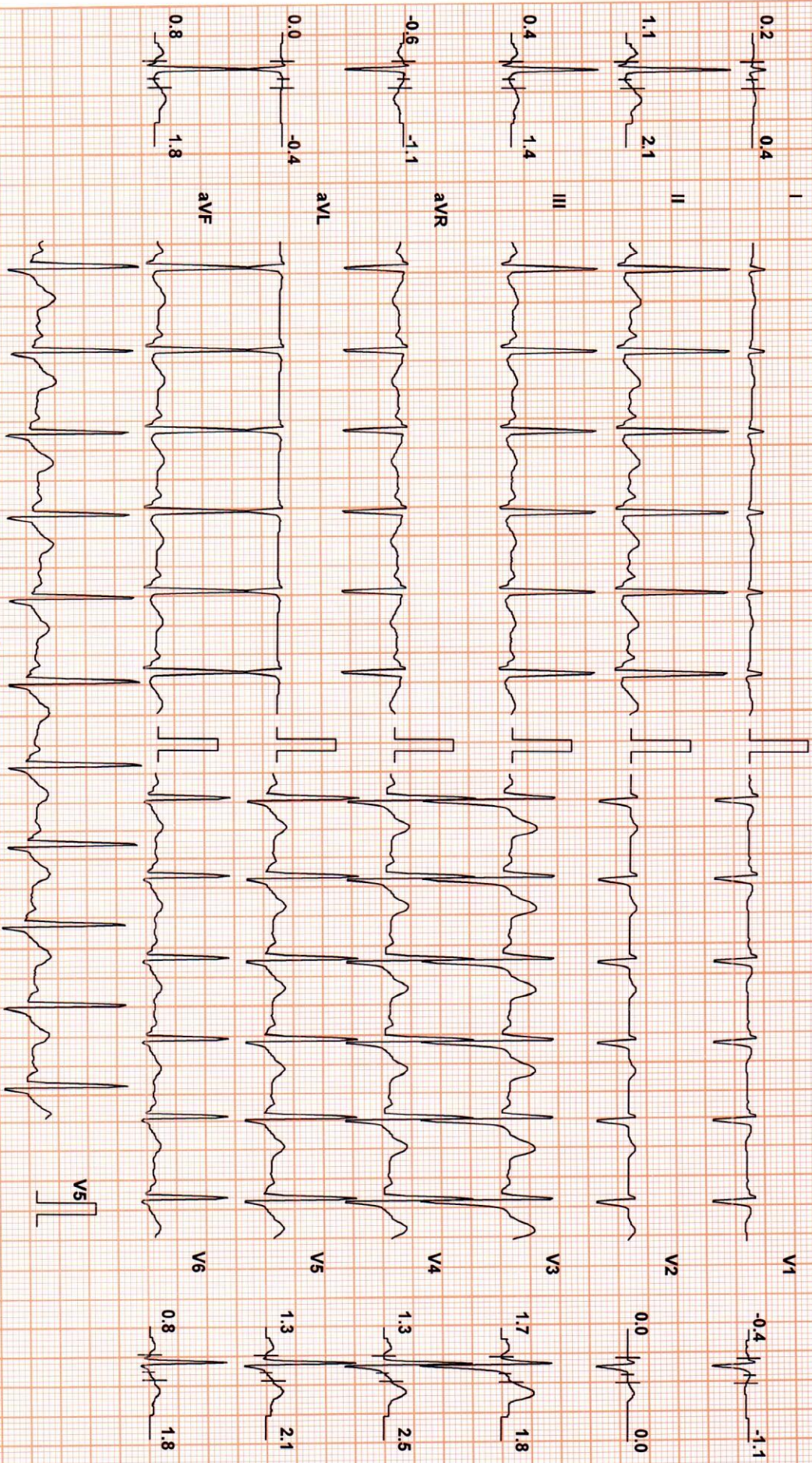


Chart Speed: 25 mm/sec Filter: 35 Hz Mains Fil: ON Amp: 10 mm Iso = R - 60 ms J = R + 60 ms Post J = J + 60 ms
Schiller Spanden V 4.7 Linked Median

ASHISH DUDHARAJ CHAUDHARI (33 M/D: 2304117996 Date: 10-Feb-23 Exec Time : 0 m 0 s Stage Time : 0 m 6 s HR: 110 bpm

Protocol: Bruce Stage: Hyperventilation Speed: 0 mph Grade: 0 % (THR: 158 bpm) B.P: 120 / 80

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

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

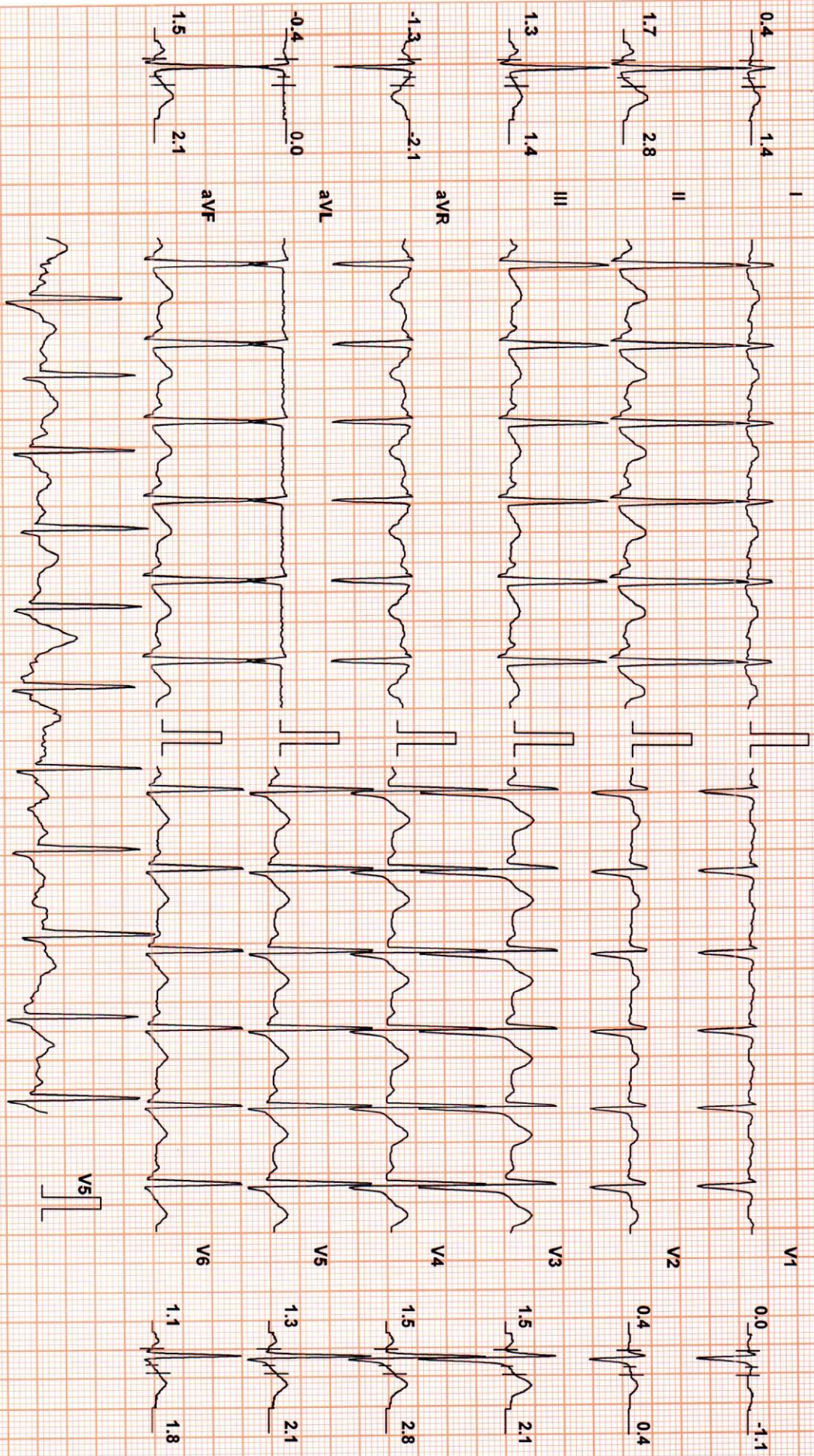


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

ASHISH DUDHARAJ CHAUDHARI (33 M) ID: 2304117996

Date: 10-Feb-23 Exec Time : 2 m 54 s Stage Time : 2 m 54 s HR: 146 bpm

Protocol: Bruce

Stage: 1

Speed: 1.7 mph

Grade: 10 %

(THR: 158 bpm)

B.P: 130 / 80

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

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

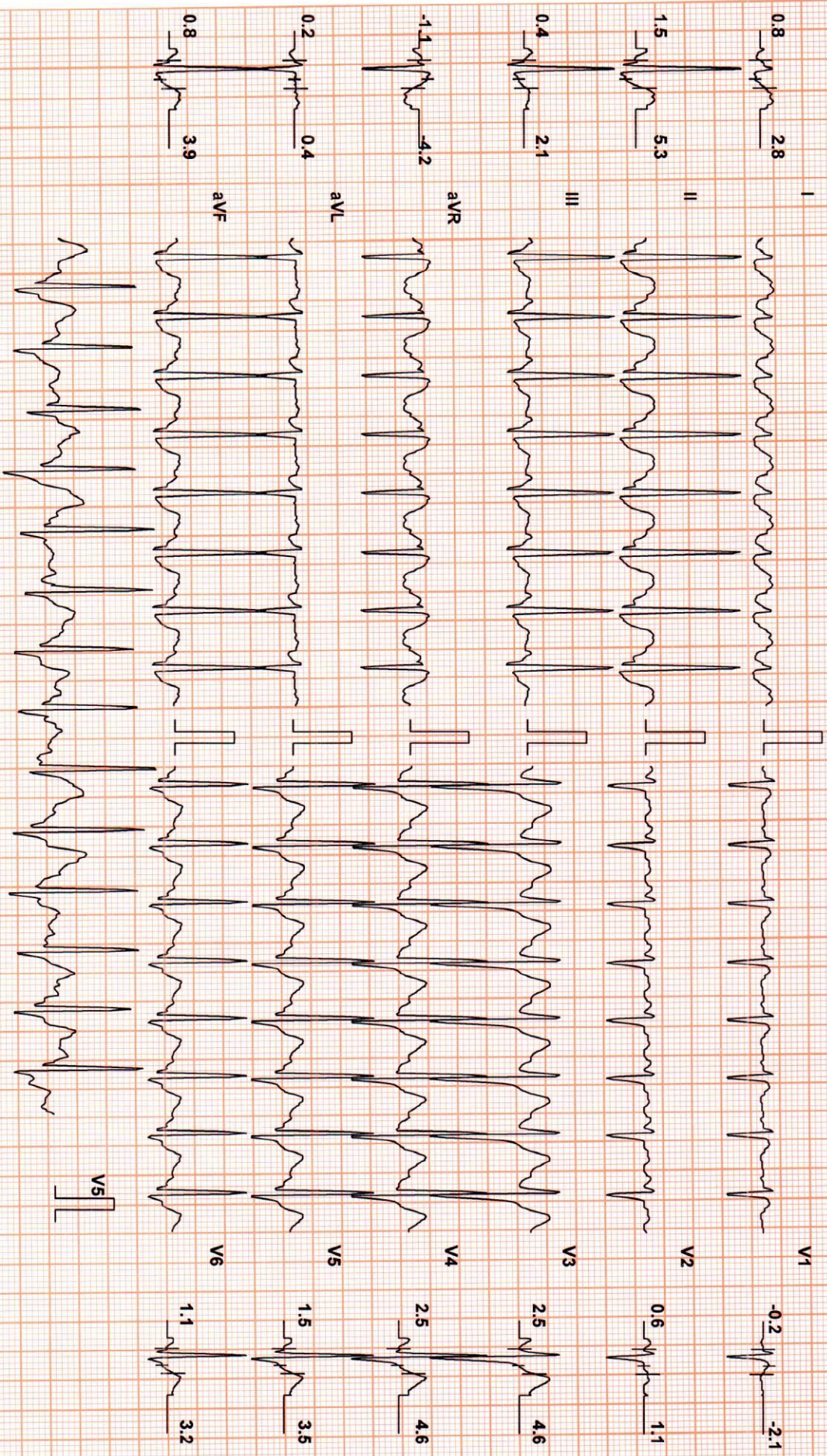


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

ASHISH DUDHARAJ CHAUDHARI (33 M) ID: 2304117996

Date: 10-Feb-23 Exec Time : 5 m 54 s Stage Time : 2 m 54 s HR: 158 bpm

Protocol: Bruce

Stage: 2

Speed: 2.5 mph Grade: 12 %

(THR: 158 bpm)

B.P: 140 / 80

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

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

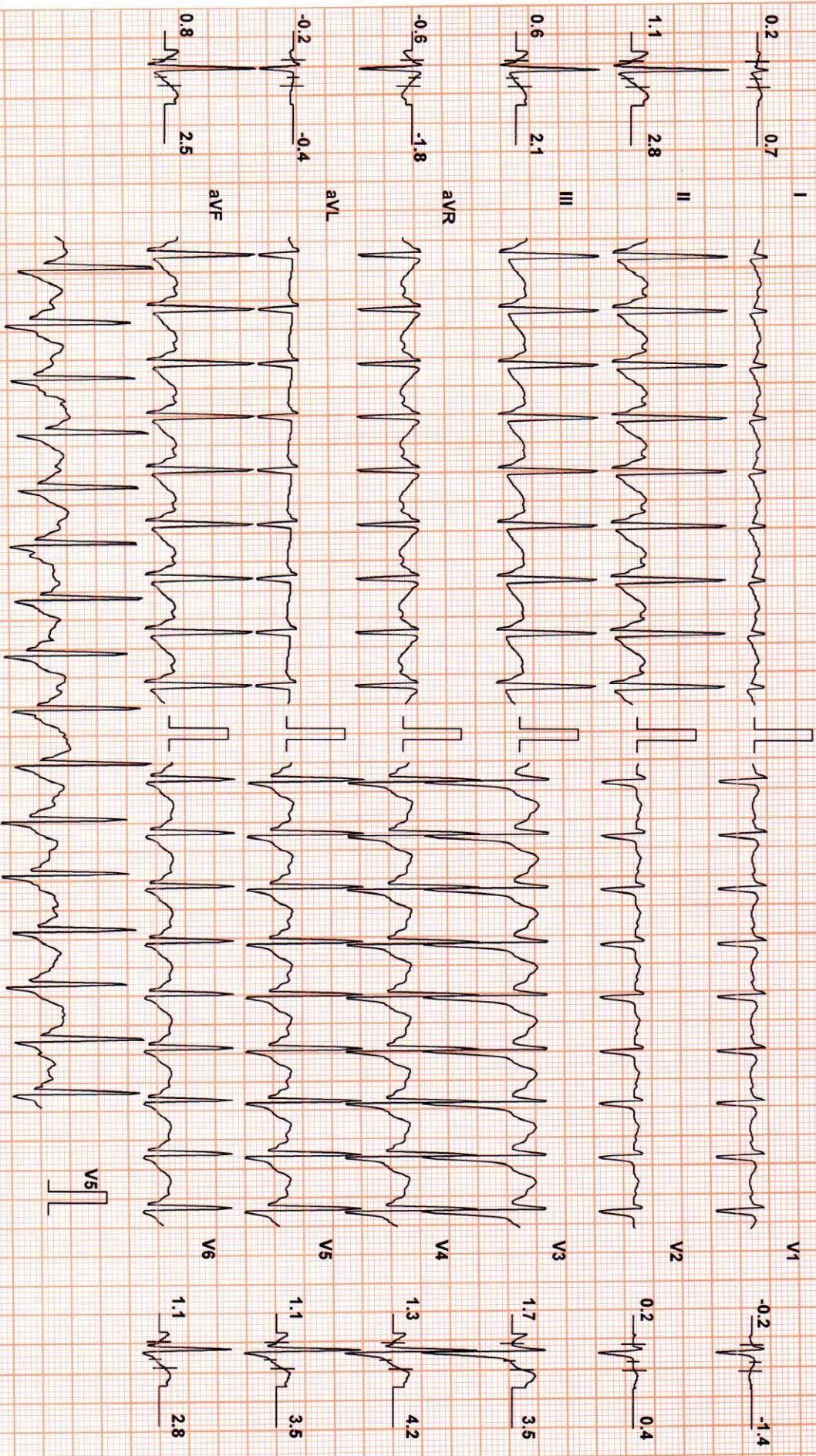


Chart Speed: 25 mm/sec
Schiller Spanden V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

ASHISH DUDHARAJ CHAUDHARI (33 M/D: 2304117996 Date: 10-Feb-23 Exec Time : 7 m 40 s Stage Time : 1 m 40 s HR: 161 bpm

Protocol: Bruce Stage: Peak Ex Speed: 3.4 mph Grade: 14 % (THR: 158 bpm) B.P: 150 / 80

ST Level (mm)	ST Slope (mV/s)	ST Level (mm)	ST Slope (mV/s)
0.2	0.4	V1	-1.4
1.7	4.2	V2	0.4
1.1	3.2	V3	3.9
-1.1	-2.5	V4	4.2
-0.2	-1.1	V5	3.5
1.5	3.9	V6	2.8

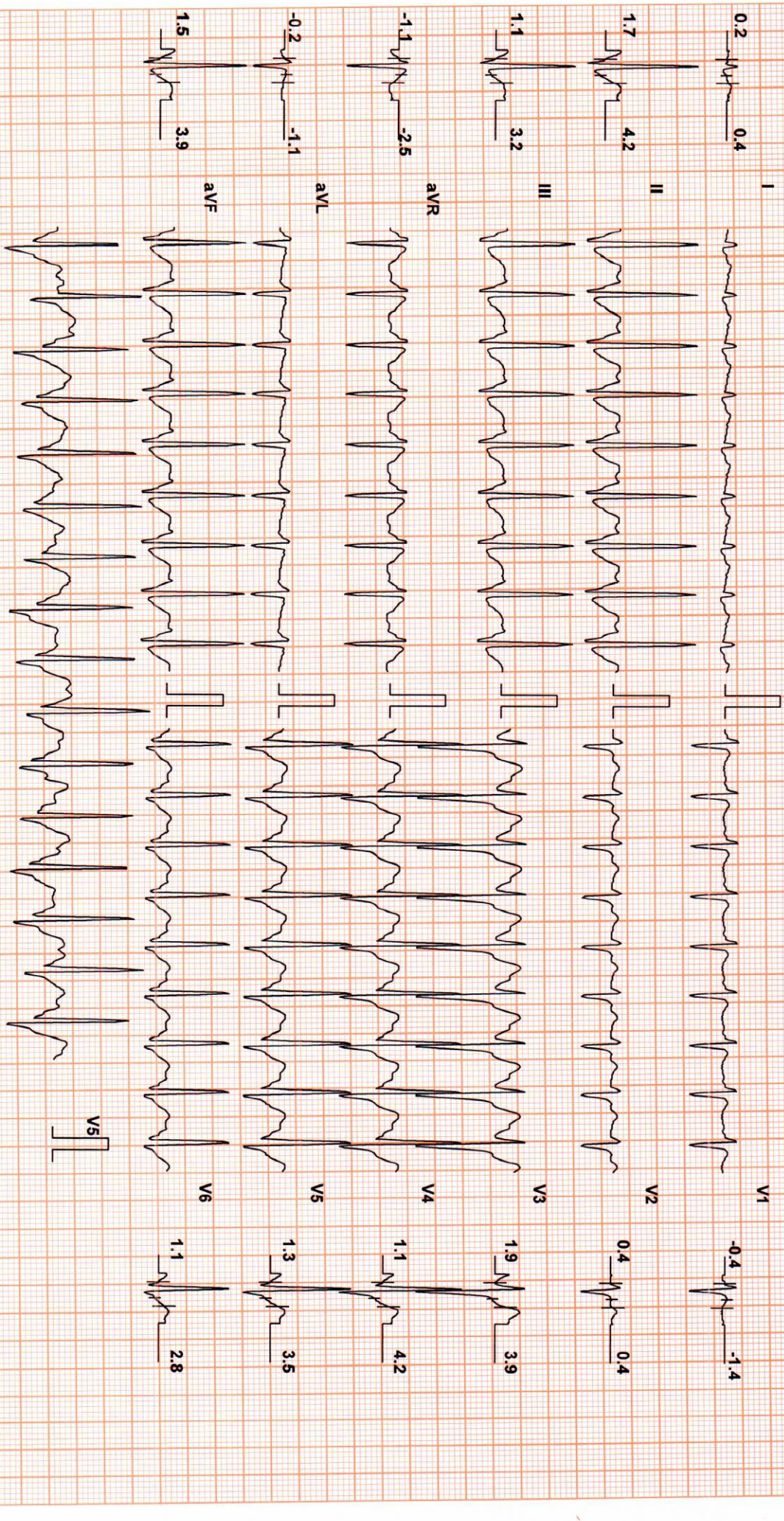


Chart Speed: 25 mm/sec Filter: 35 Hz Mains Fil: ON Amp: 10 mm Iso = R - 60 ms J = R + 60 ms Post J = J + 60 ms
Schlier Spanden V 4.7 Linked Median

ASHISH DUDHARAJ CHAUDHARI (33 MJD-2304117996) Date: 10-Feb-23 Exec Time : 7 m 46 s Stage Time : 0 m 54 s **HR: 142 bpm**

Protocol: Bruce Stage: Recovery(1) Speed: 1 mph Grade: 0 % (THR: 158 bpm) B.P.: 130 / 80

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

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

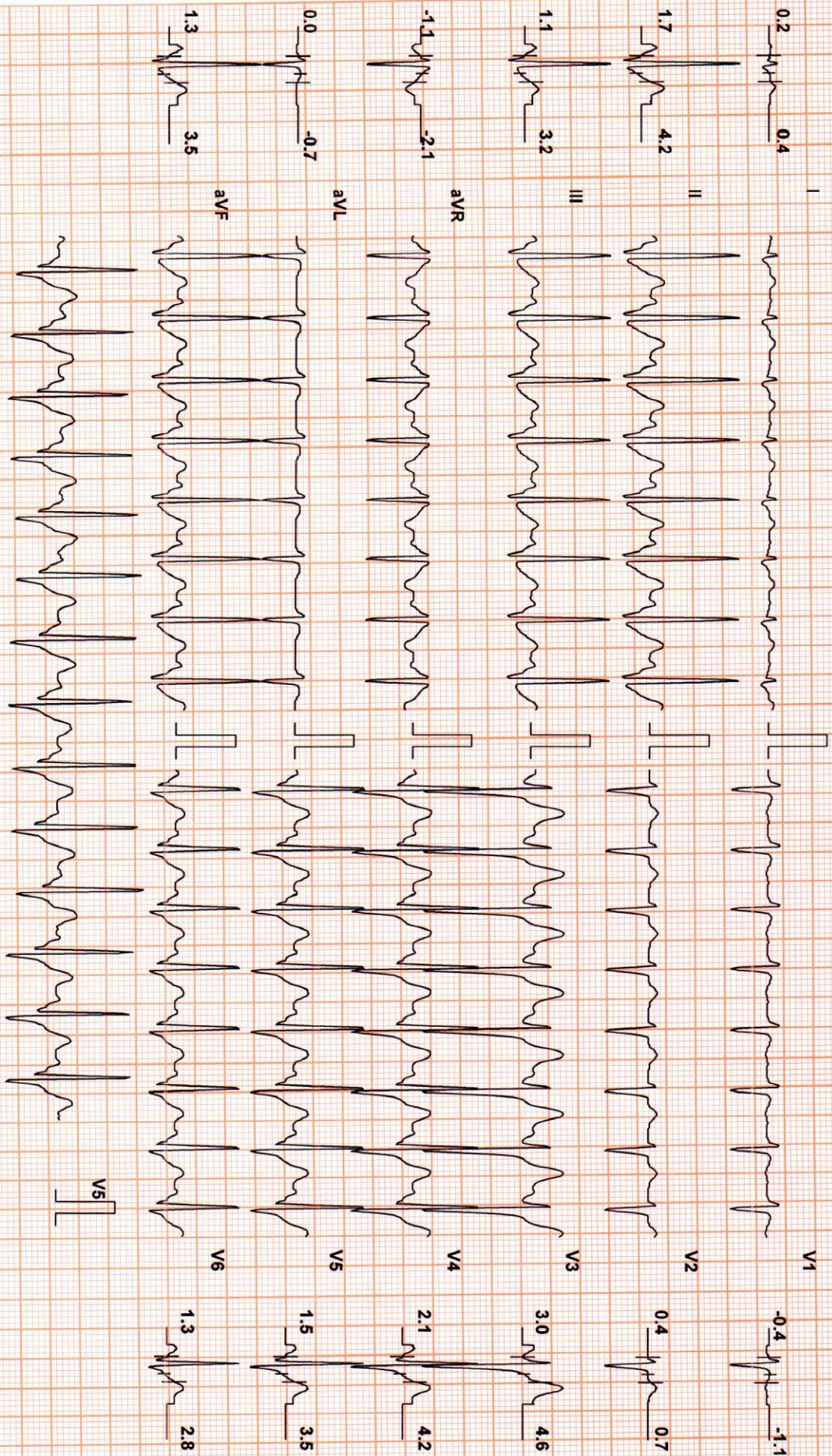


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms
Linked Median

ASHISH DUDHARAJ CHAUDHARI (33 M/D) : 2304117996 Date: 10-Feb-23 Exec Time : 7 m 46 s Stage Time : 0 m 54 s HR: 121 bpm

Protocol: Bruce Stage: Recovery(2) Speed: 0 mph Grade: 0 % (THR: 158 bpm) B.P: 120 / 80

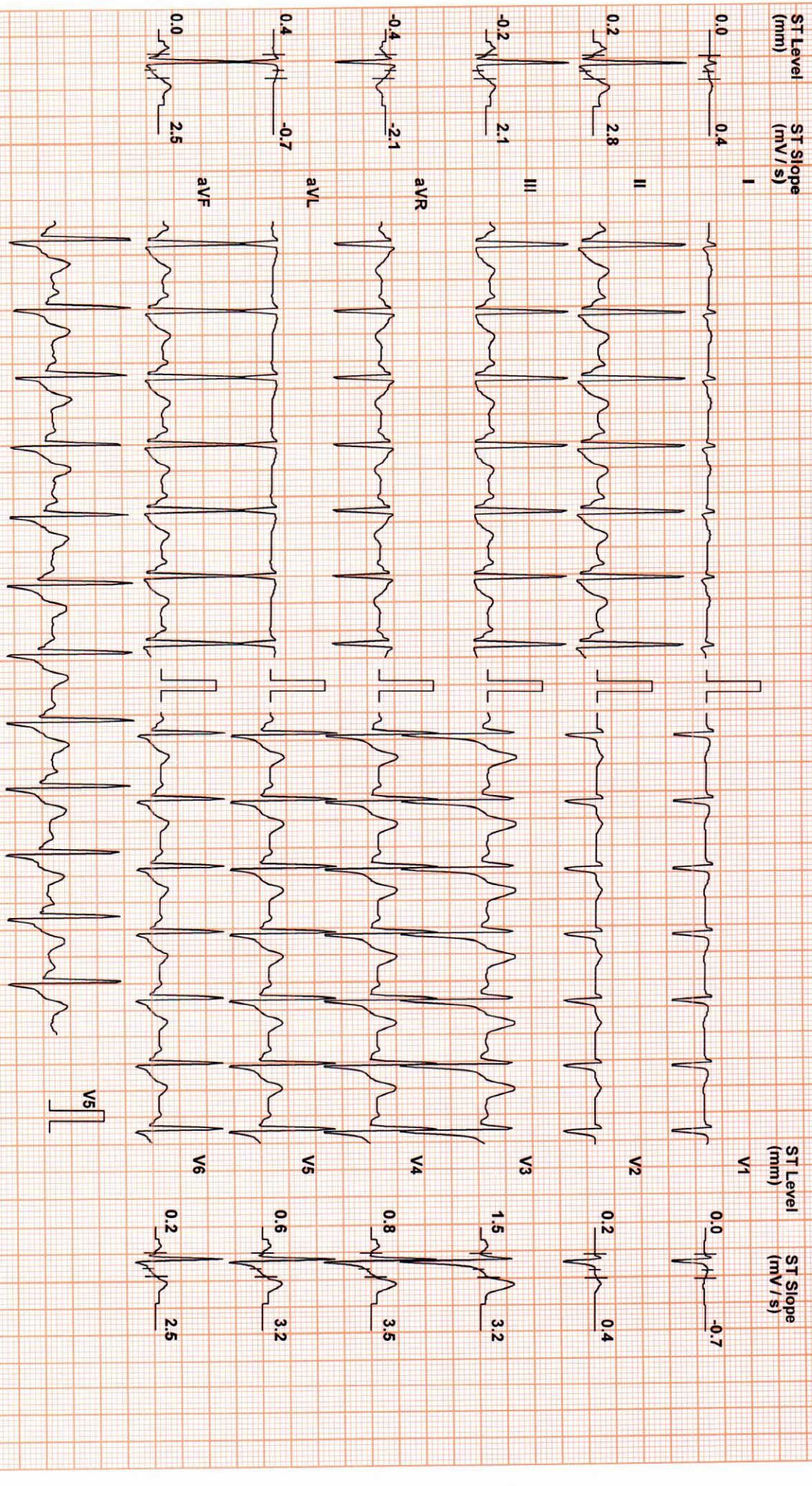


Chart Speed: 25 mm/sec Filter: 35 Hz Mains Fil: ON Amp: 10 mm Iso = R - 60 ms J = R + 60 ms Post J = J + 60 ms
Schlier Spandan V 4.7 Linked Median

ASHISH DUDHARAJ CHAUDHARI (33 M) ID: 2304117996

Date: 10-Feb-23 Exec Time : 7 m 46 s Stage Time : 0 m 27 s HR: 120 bpm

Protocol: Bruce

Stage: Recovery(3)

Speed: 0 mph

Grade: 0 %

(THR: 158 bpm)

B.P.: 120 / 80

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

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

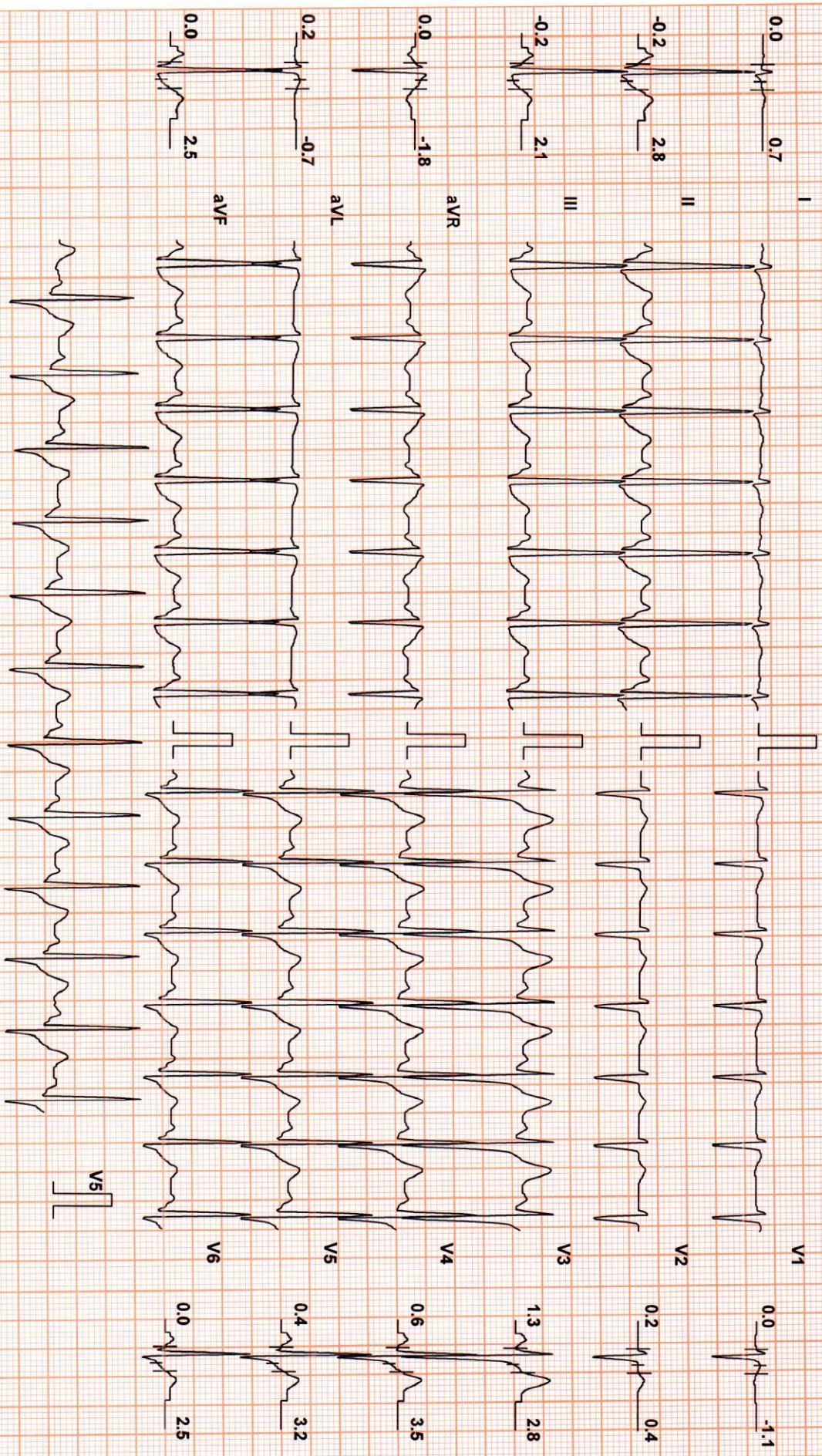


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median