



CID : 2301420990
Name : MR.ANAND KUMAR
Age / Gender : 34 Years / Male
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 14-Jan-2023 / 08:51
Reported : 14-Jan-2023 / 13:34

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

CBC (Complete Blood Count), Blood

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
<u>RBC PARAMETERS</u>			
Haemoglobin	13.4	13.0-17.0 g/dL	Spectrophotometric
RBC	4.46	4.5-5.5 mil/cmm	Elect. Impedance
PCV	40.8	40-50 %	Measured
MCV	92	80-100 fl	Calculated
MCH	30.0	27-32 pg	Calculated
MCHC	32.8	31.5-34.5 g/dL	Calculated
RDW	14.5	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	6130	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	29.5	20-40 %	
Absolute Lymphocytes	1808.4	1000-3000 /cmm	Calculated
Monocytes	7.6	2-10 %	
Absolute Monocytes	465.9	200-1000 /cmm	Calculated
Neutrophils	59.3	40-80 %	
Absolute Neutrophils	3635.1	2000-7000 /cmm	Calculated
Eosinophils	3.1	1-6 %	
Absolute Eosinophils	190.0	20-500 /cmm	Calculated
Basophils	0.5	0.1-2 %	
Absolute Basophils	30.7	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	209000	150000-400000 /cmm	Elect. Impedance
MPV	11.4	6-11 fl	Calculated
PDW	25.2	11-18 %	Calculated



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RBC MORPHOLOGY

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, EDTA WB-ESR 15 2-15 mm at 1 hr. Sedimentation

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



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



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Collected : 14-Jan-2023 / 08:51
Reported : 14-Jan-2023 / 12:39

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	101.1	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	94.1	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.54	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.21	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.33	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.5	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.6	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.9	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.6	1 - 2	Calculated
SGOT (AST), Serum	23.2	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	29.2	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	16.0	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	92.6	40-130 U/L	Colorimetric
BLOOD UREA, Serum	17.9	12.8-42.8 mg/dl	Kinetic
BUN, Serum	8.4	6-20 mg/dl	Calculated
CREATININE, Serum	0.78	0.67-1.17 mg/dl	Enzymatic



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Collected : 14-Jan-2023 / 14:06
Reported : 14-Jan-2023 / 21:14

eGFR, Serum	121	>60 ml/min/1.73sqm	Calculated
URIC ACID, Serum	7.0	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 Borivali Lab, Borivali West
*** End Of Report ***



Bmhaskar

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



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Collected : 14-Jan-2023 / 08:51
Reported : 14-Jan-2023 / 16:14

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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	5.9	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 Borivali Lab, Borivali West

*** End Of Report ***



Bmhaskar

Dr.KETAKI MHASKAR
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Pathologist



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Collected : 14-Jan-2023 / 12:52
Reported : 14-Jan-2023 / 21:06

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**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	Absent	Absent
Blood	Absent	Absent
<u>CHEMICAL EXAMINATION</u>		
Reaction (pH)	Acidic (6.0)	-
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	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 ***



MC-2111

Bmhaskar

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



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Consulting Dr. : -
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Collected : 14-Jan-2023 / 08:51
Reported : 14-Jan-2023 / 19:54

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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>
<u>PHYSICAL EXAMINATION</u>			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	6.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.010	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	40	-	-
<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	0-1		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	+(>20/hpf)	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



MC-2111

NR Jain

Dr.VIPUL JAIN
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	B
Rh TYPING	Positive

NOTE: Test performed by automated Erythrocytes magnetized technology (EMT) which is more sensitive than conventional methods.

Specimen: EDTA Whole Blood and/or serum

Clinical significance:

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

Limitations:

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

References:

1. Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia
2. AABB technical manual

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

*** End Of Report ***



Dr. Leena Salunkhe
Dr.LEENA SALUNKHE
M.B.B.S, DPB (PATH)
Pathologist



CID : 2301420990
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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	159.5	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	95.5	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	37.1	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	122.4	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	103.0	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	19.4	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.3	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.8	0-3.5 Ratio	Calculated

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



Bmhaskar

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



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Collected : 14-Jan-2023 / 08:51
Reported : 14-Jan-2023 / 13:36

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	4.7	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	13.3	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	3.91	0.35-5.5 microIU/ml	ECLIA



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Reg. Location : Bhayander East (Main Centre)

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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 trasiently altered becuase 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)

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*** End Of Report ***



Bmhaskar

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

SUBURBAN DIAGNOSTICS - BHAYANDER EAST

Patient Name: ANAND KUMAR

Date and Time: 14th Jan 23 9:11 AM

Patient ID: 2301420990

Age **34** **3** **3**
years months days

Gender **Male**

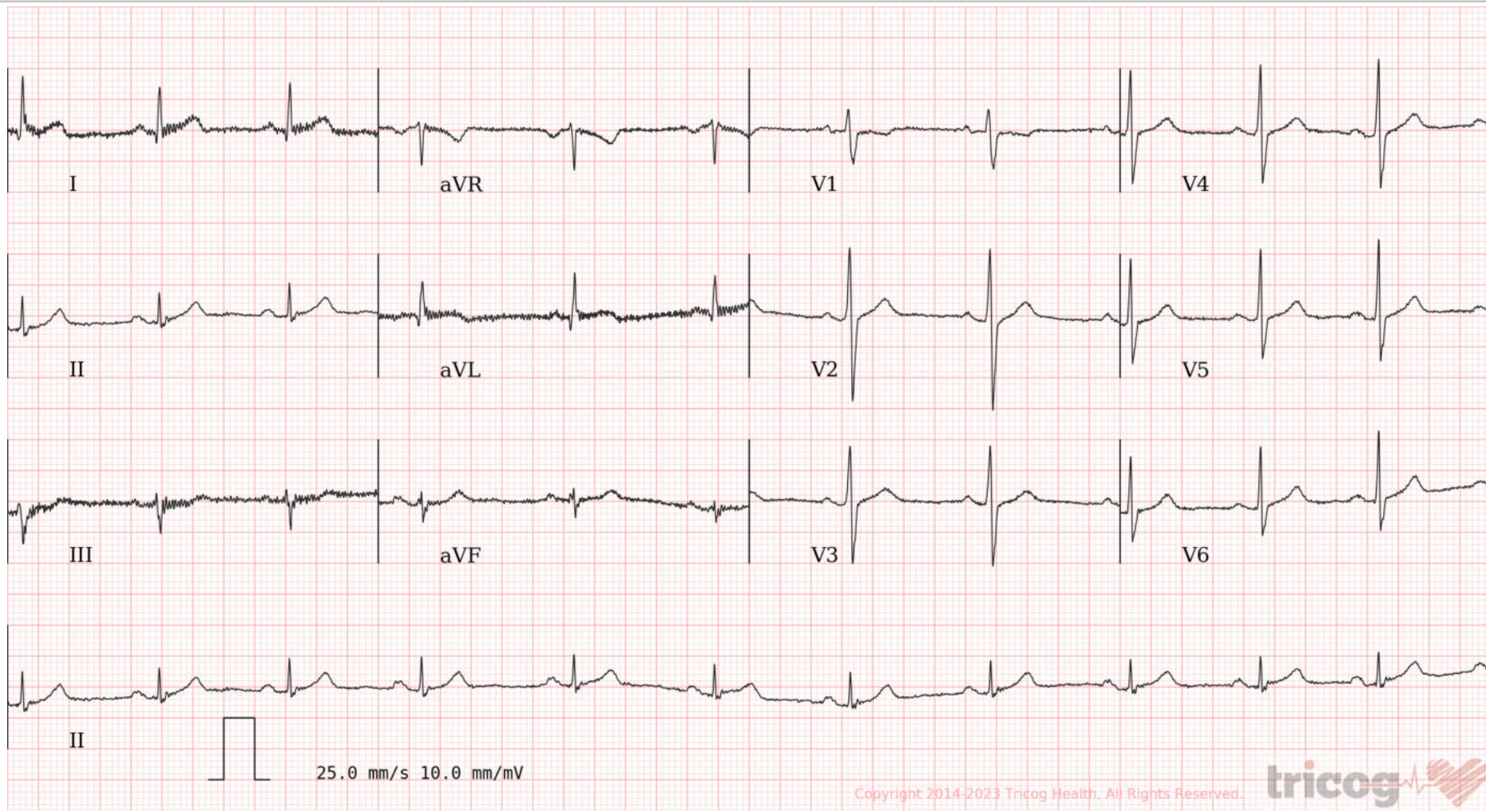
Heart Rate **69bpm**

Patient Vitals

BP: 120/80 mmHg
Weight: 99 kg
Height: 176 cm
Pulse: NA
Spo2: NA
Resp: NA
Others: _____

Measurements

QRSD: 84ms
QT: 372ms
QTc: 398ms
PR: 148ms
P-R-T: 58° 7° 49°



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tricog

ECG Within Normal Limits: Sinus Rhythm, Normal axis No significant ST-T changes. Please correlate clinically.

REPORTED BY

Smita Valani

Dr. Smita Valani
MBBS, D. Cardiology
2011/03/0587

Date:- 11/4/11/23

CID: 2301420990

Name:- Anand Kumar

Sex / Age: 34/M

EYE CHECK UP

Chief complaints: No Complaint

Systemic Diseases:

Past history: far vision glasses

RE LE
6/6 6/6
NI NI

Unaided Vision:

Aided Vision:

Refraction:

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / Abnormal

Remark:

SUBURBAN DIAGNOSTICS (I) PVT. LTD
Shop No. 101-A, 1st Floor, Mahilaj Building
Above 2nd Floor, Keshavnagar Hospital,
Mira - Bhamburda Road, Mira (E)
Dist. Thane-401103.
Phone No : 022 - 61700000

CID# : 2301420990
 Name : MR.ANAND KUMAR
 Age / Gender : 34 Years/Male
 Consulting Dr. :-
 Reg.Location : Bhayander East (Main Centre)

Collected : 14-Jan-2023 / 08:48
 Reported : 15-Jan-2023 / 09:05

PHYSICAL EXAMINATION REPORT

History and Complaints:

No Complaint

EXAMINATION FINDINGS:

Height (cms): 176
 Temp (0c): Afebrile
 Blood Pressure (mm/hg): 120/80 mmHg
 Pulse: 82/min

Weight (kg): 99
 Skin: NAD
 Nails: NAD
 Lymph Node: Not palpable

Systems

Cardiovascular: S1S2-Normal
 Respiratory: Chest-Clear
 Genitourinary: NAD
 GI System: NAD
 CNS: NAD

(B+ve)

IMPRESSION: ECG, CXR, CBC, Biochemistry ^{and WNL}
 R/E of Urine - Bacteriae + (>20 / hpt).

ADVICE:
 Weight Reduction.
 Expert Consultation.

CHIEF COMPLAINTS:

- 1) Hypertension: No
- 2) IHD: No
- 3) Arrhythmia: No
- 4) Diabetes Mellitus: No

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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 | 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 | Yes,Rarely |
| 2) Smoking | No |
| 3) Diet | Mixed |
| 4) Medication | No |

Anita

DR. ANITA CHAUDHARY

CONSULTING PHYSICIAN
Reg. No. 2017/12/5553

*** End Of Report ***

SUBURBAN DIAGNOSTICS (I) PVT. LTD

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Mira - Bhayander East, Mumbai (E)
Dist. Thane-401103.

Phone No: 022 - 61700000

REGD. OFFICE: Suburban Diagnostics (India) Pvt. Ltd., Aston, 2nd Floor, Sundervan Complex, Above Mercedes Showroom, Andheri West, Mumbai - 400053.

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

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

Corporate Identity Number (CIN): U85110MH2002PTC136144



Email:

12345719 (2301420990) / ANAND KUMAR / 34 Yrs / M / 176 Cms / 99 Kg
 Date: 14 / 01 / 2023 09:45:18 AM

Stage	Time	Duration	Speed(mph)	Elevation	METs	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:06	0:06	00.0	00.0	01.0	088	47 %	120/80	105	00	
Standing	00:12	0:06	00.0	00.0	01.0	088	47 %	120/80	105	00	
HV	00:17	0:05	00.0	00.0	01.0	088	47 %	120/80	105	00	
ExStart	00:19	0:02	01.7	10.0	01.1	089	48 %	120/80	106	00	
BRUCE Stage 1	03:19	3:00	01.7	10.0	04.7	149	80 %	140/80	208	00	
BRUCE Stage 2	06:19	3:00	02.5	12.0	07.1	169	91 %	140/80	236	00	
PeakEx	06:28	0:09	03.4	14.0	07.3	169	91 %	140/80	236	00	
Recovery	07:28	1:00	01.1	00.0	01.1	162	87 %	160/80	259	00	
Recovery	08:28	2:00	00.0	00.0	01.0	134	72 %	150/80	201	00	
Recovery	10:28	4:00	00.0	00.0	01.0	115	62 %	130/80	149	00	
Recovery	10:37	4:08	00.0	00.0	01.0	115	62 %	120/80	138	00	

FINDINGS :

Exercise Time : 06:09
 Initial HR (ExStrt) : 89 bpm 48% of Target 186
 Initial BP (ExStrt) : 120/80 (mm/Hg)
 Max WorkLoad Attained : 7.3 Fair response to induced stress
 Max ST Dep Lead & Avg ST Value : V1 & -1.1 mm in Recovery
 Duke Treadmill Score : -01.3

Max HR Attained 169 bpm 91% of Target 186
 Max BP Attained 160/80 (mm/Hg)

Test End Reasons : .. Test Complete

SUBURBAN DIAGNOSTICS (I) PVT. LTD
 Shop No. 101-A, 1st Floor, Kshiti Building
 Above Raymond, Near Thunga Hospital
 Mira - Bhayander Road, Bhayander (E)
 Dist. Thane-401105.
 Phone No : 022 - 61700000

DR. SMITA VALANI
MBBS, D. CARDIOLOGY
 20.11.2023

Smita Valani
 Doctor - DR SMITA VALANI



SUBURBAN DIGNOSTICS BHAYANDER

REPORT



EMaji: 12345719 / ANAND KUMAR / 34 Yrs / M / 176 Cms / 99 Kg Date: 14 / 01 / 2023 09:45:18 AM

REPORT :

REASON FOR TERMINATION : TARGET HR ACHIEVED
EXERCISE TOLERANCE : GOOD EFFORT TOLERANCE
EXERCISE INDUCED ARRHYTHMIAS : NO ANGINA AND ANGINA EQUIVALENT
HAEMODYNAMIC RESPONSE : NO SIGNIFICANT ST-T CHANGES DURING EXERCISE AND RECOVERY
CHRONOTROPIC RESPONSE : GOOD INOTROPIC RESPONSE
FINAL IMPRESION : GOOD CHRONOTROPIC RESPONSE
: NEGATIVE FOR STRESS INDUCIBLE ISCHEMIA

DR. SMITA VALANI
MBBS, D. CAE, D. JGY
2011/03/0047

SUBURBAN DIAGNOSTICS (I) PVT. LTD
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Phone No : 022 - 61700000

Doctor: DR-SMITA VALANI



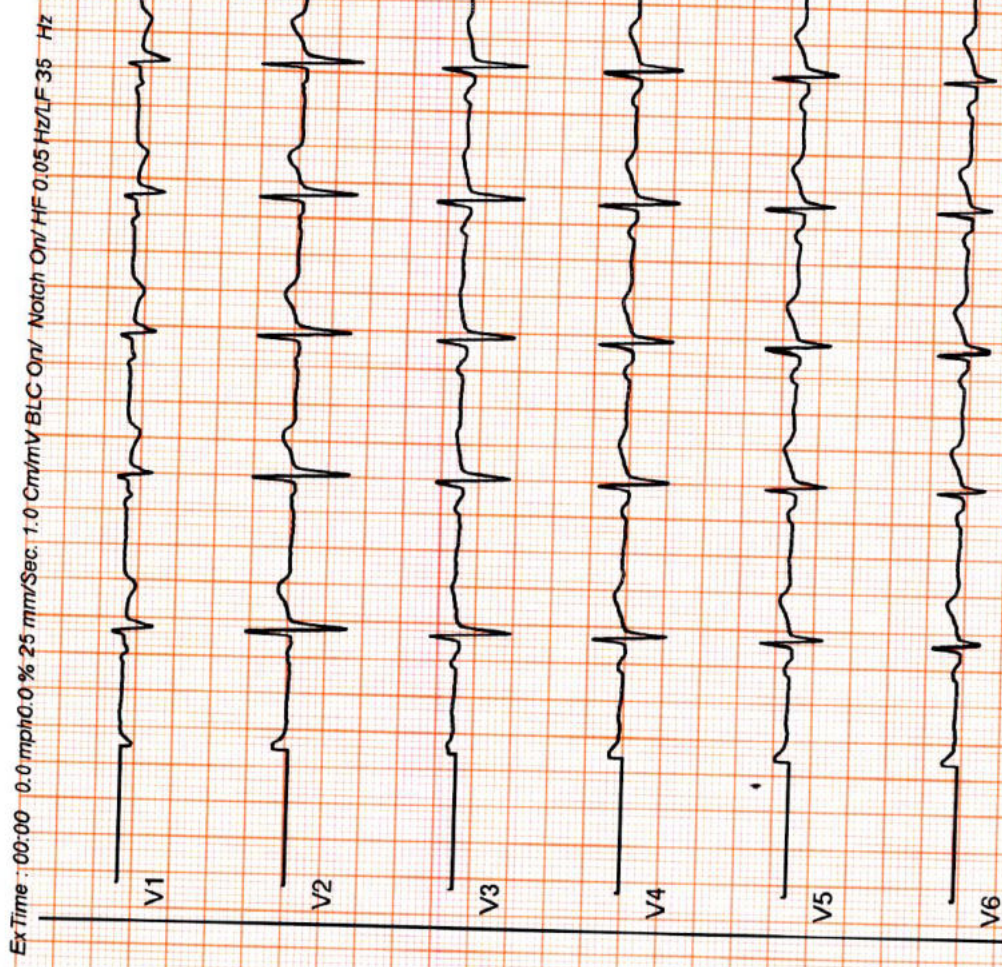
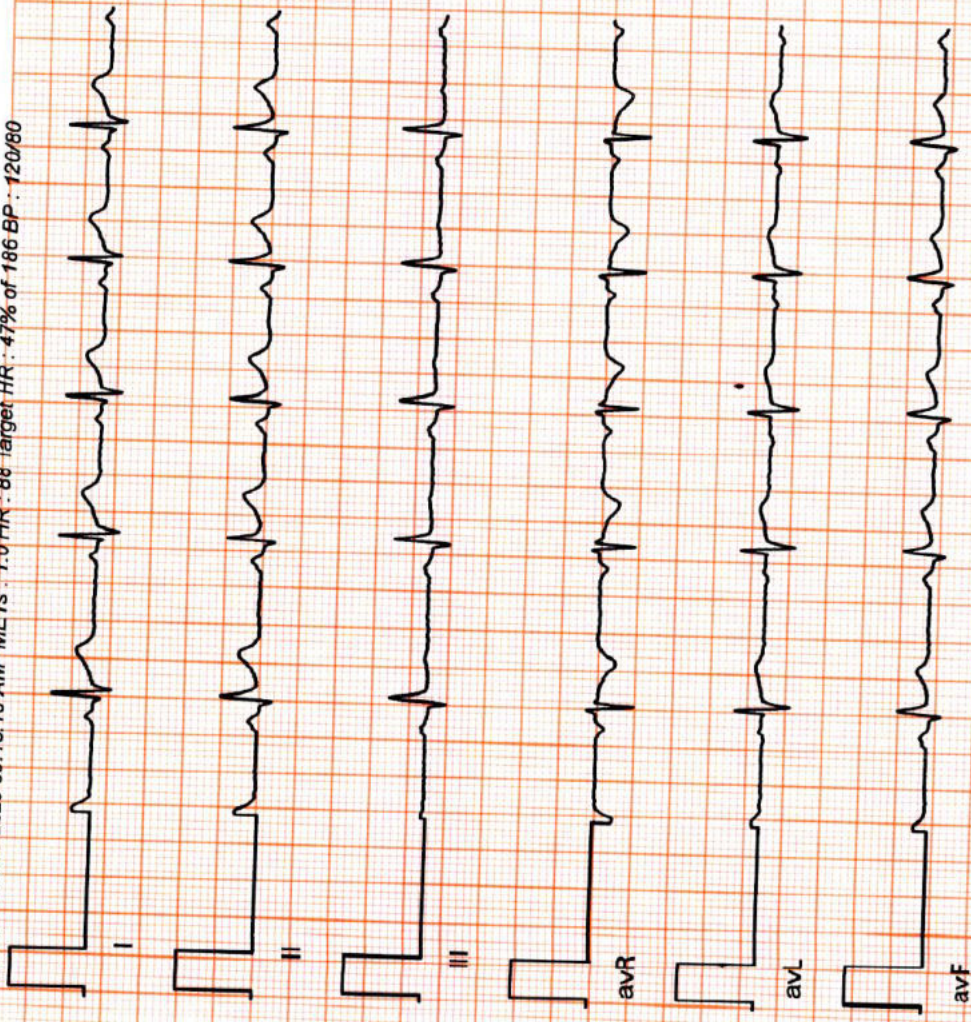
SUBURBAN DIGNOSTICS BHAYANDER

12345719 / ANAND KUMAR / 34 Yrs / Male / 176 Cm / 99 Kg

6 x 2 + Rhythm
BRUCE:Supine(0:07)



Date: 14/01/2023 09:45:18 AM METs: 1.0 HR: 88 Target HR: 47% of 186 BP: 120/80



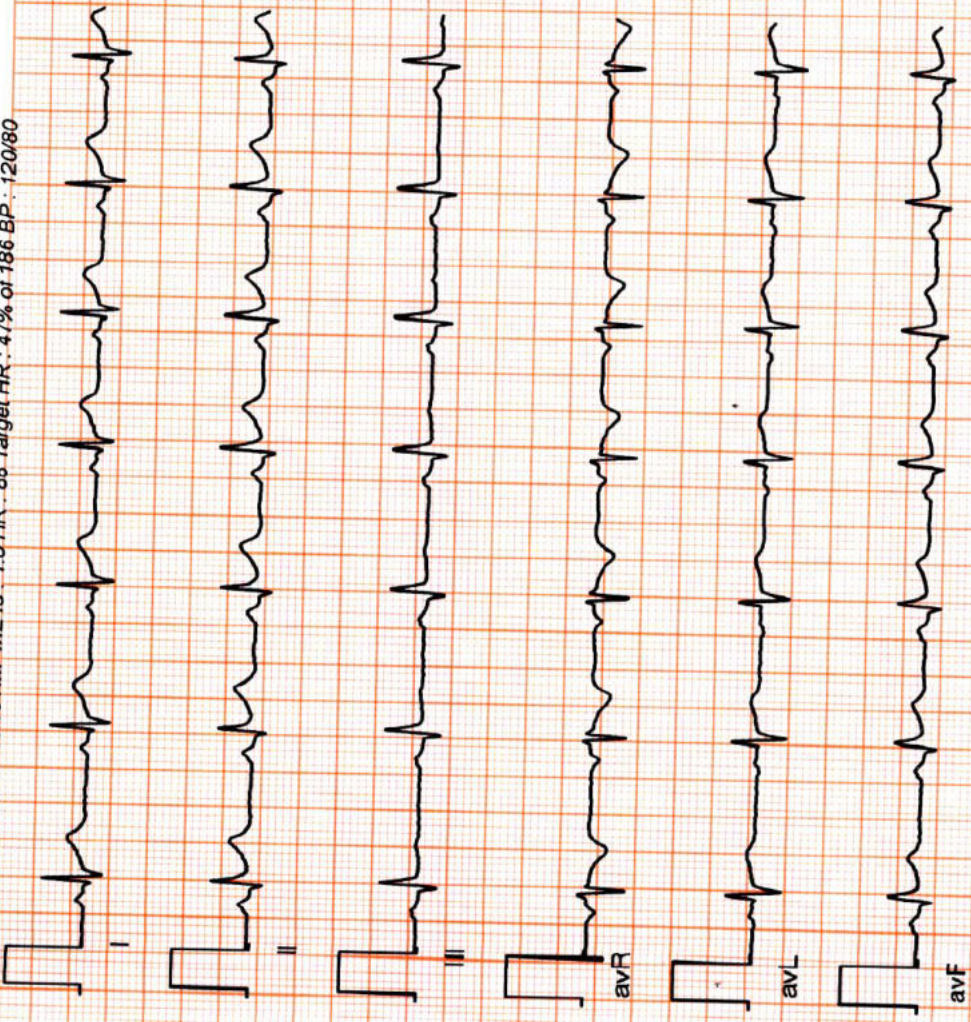
SUBURBAN DIGNOSTICS BHAYANDER

12345719 / ANAND KUMAR / 34 Yrs / Male / 176 Cm / 99 Kg

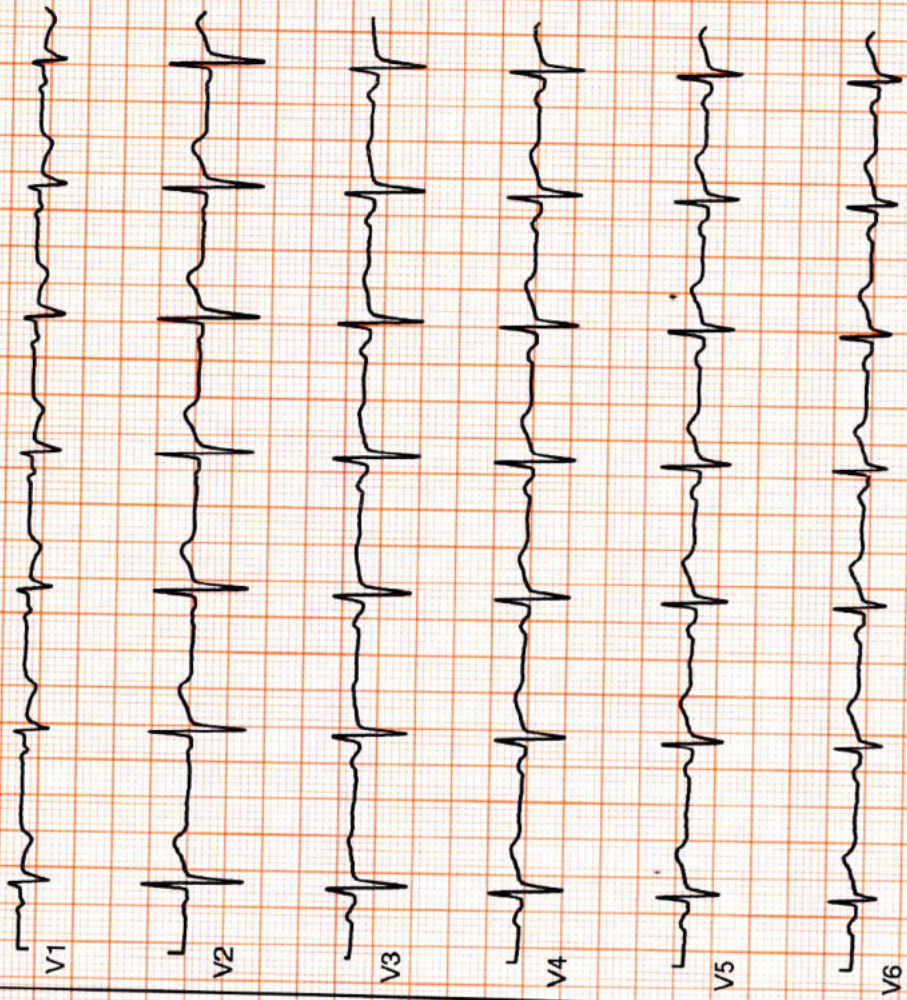
6 x 2 + Rhythm
BRUCE: Standing(0:06)



Date: 14 / 01 / 2023 09:45:18 AM METs: 1.0 HR: 88 Target HR: 47% of 186 BP: 120/80



Ex Time: 00:00 0.0 mph 0.0 % 25 mm/Sec: 1.0 Cm/mV BLC On/ Match On/ HF 0.05 Hz/LF 35 Hz



SUBRAN DIGNOSTICS BHAYANDER

12345719 / ANAND KUMAR / 34 Yrs / Male / 176 Cm / 99 Kg

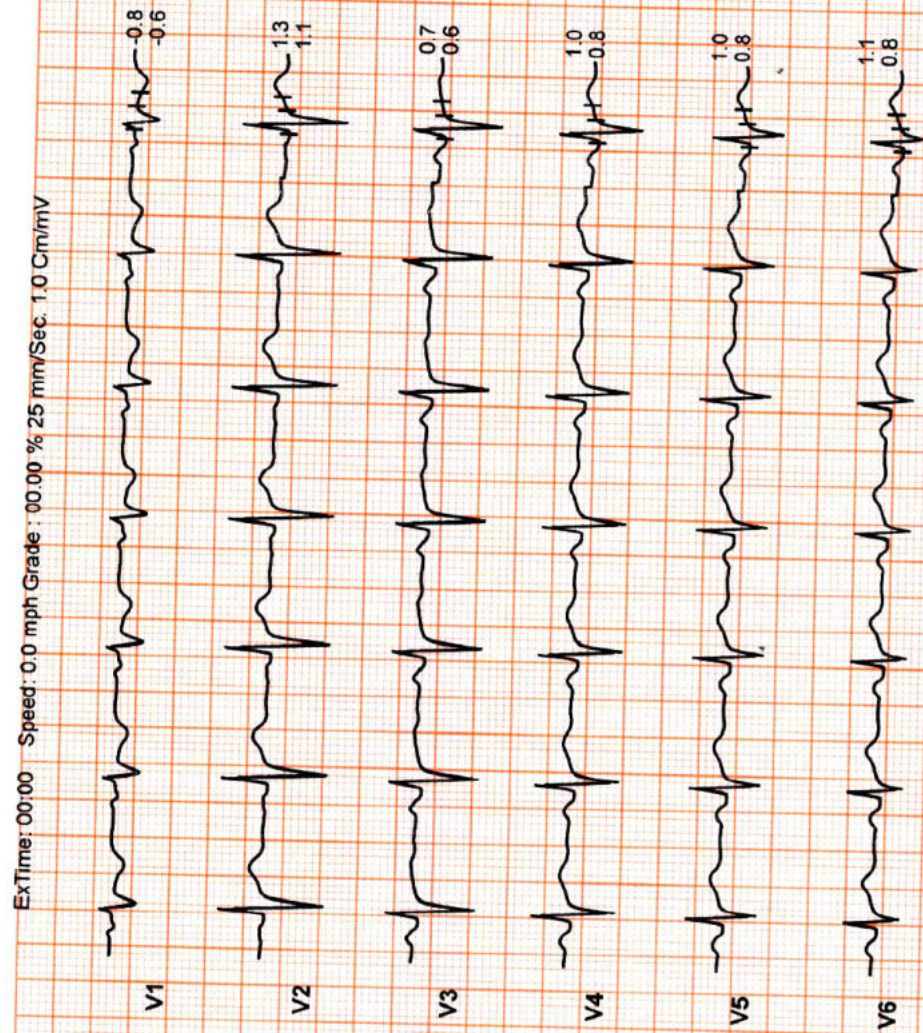
6X2 Combine Medians + 1 Rhythm

BRUCE:HV(0:05)



Date: 14/01/2023 09:45:18 AM METs: 1.0 HR: 88 Target HR: 47% of 186 BP: 120/80 Post J @80mSec

ExTime: 00:00 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBRAN DIGNOSTICS BHAYANDER

12345719 / ANAND KUMAR / 34 Yrs / Male / 176 Cm / 99 Kg

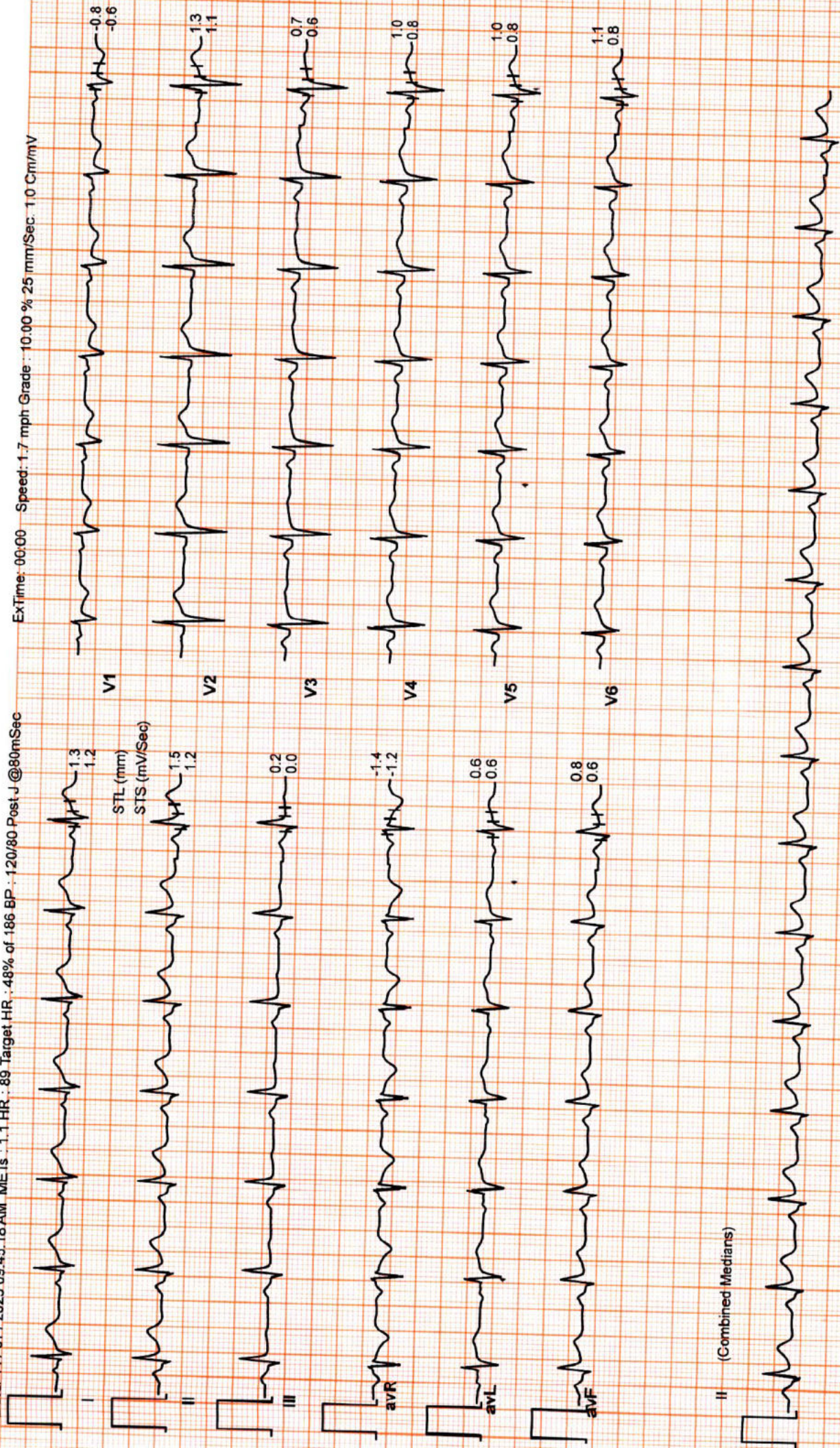
6X2 Combine Medians + 1 Rhythm

ExStart



Date: 14 / 01 / 2023 09:45:18 AM METs : 1.1 HR : 89 Target HR : 48% of 186 BP : 120/80 Post J @80mSec

ExTime: 00:00 Speed: 1.7 mph Grade: 10.00 % 25 mm/Sec. 1.0 Cm/mV

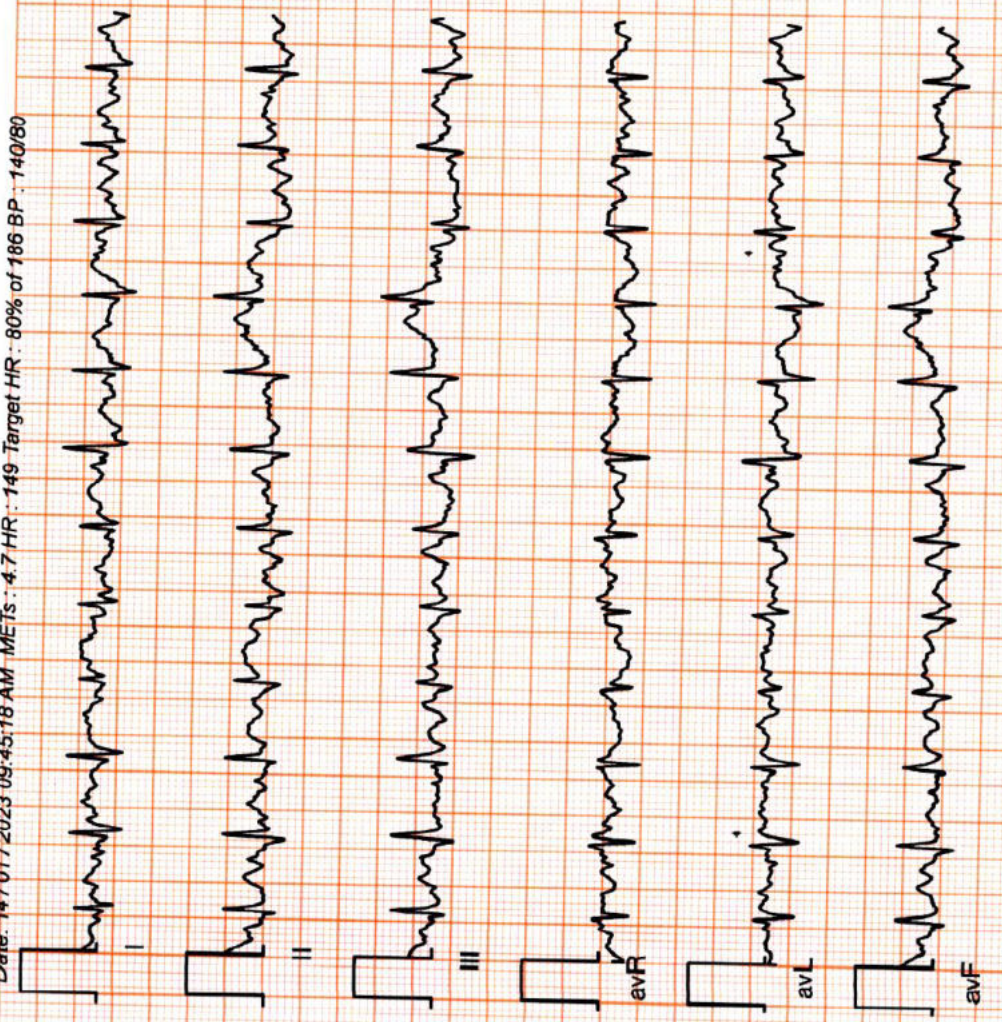


II (Combined Medians)

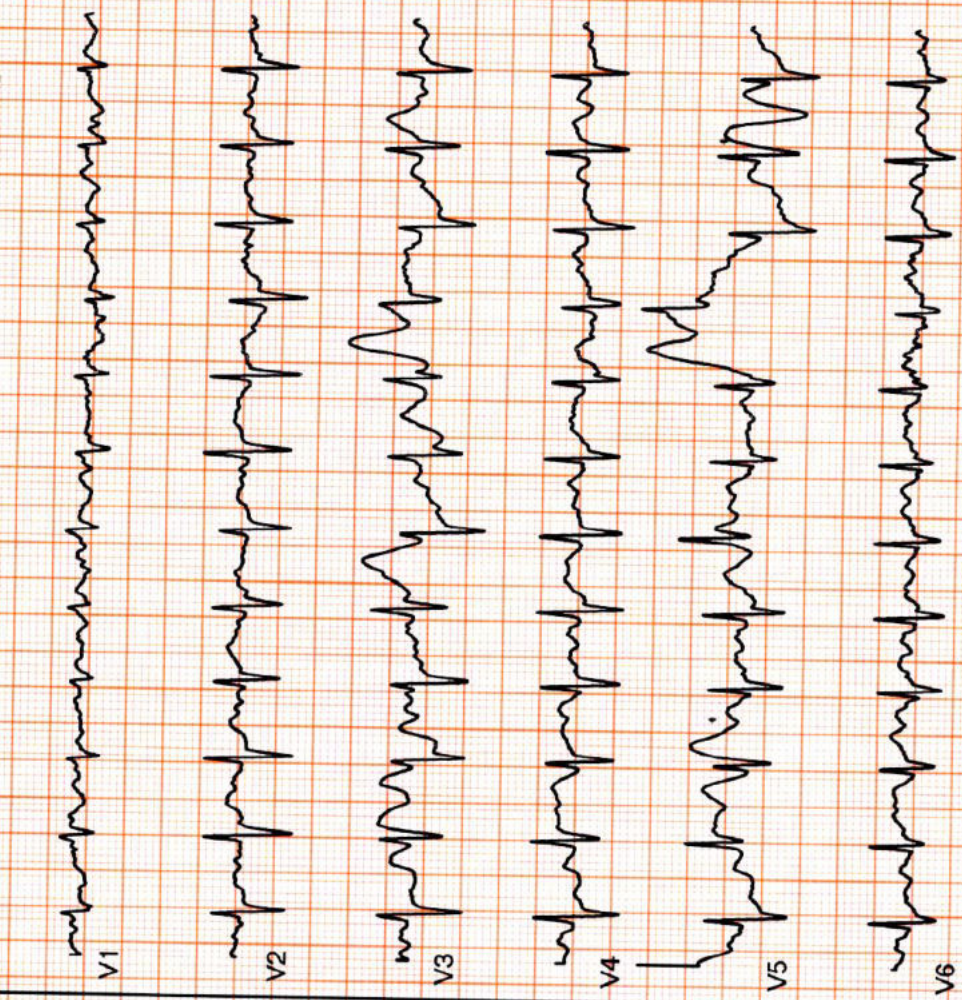




Date: 14/01/2023 09:45:18 AM METs: 4.7 HR: 149 Target HR: 80% of 166 BP: 140/80



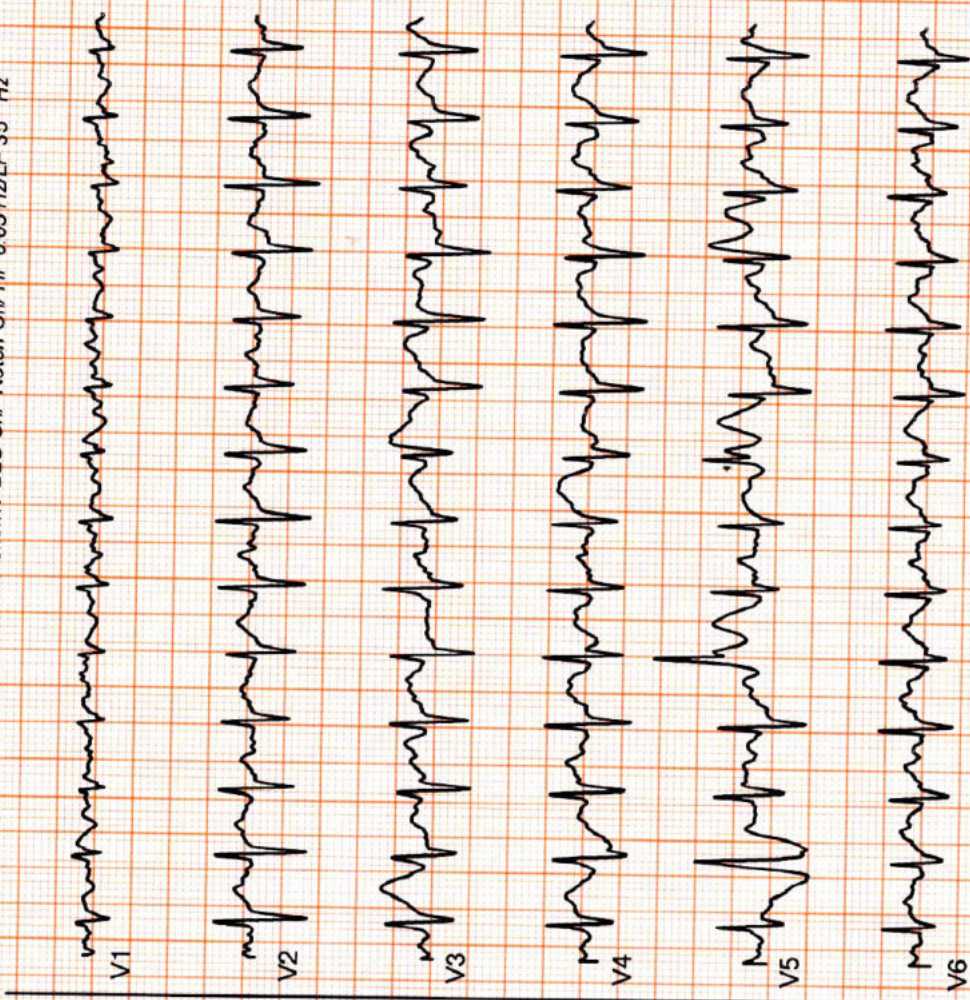
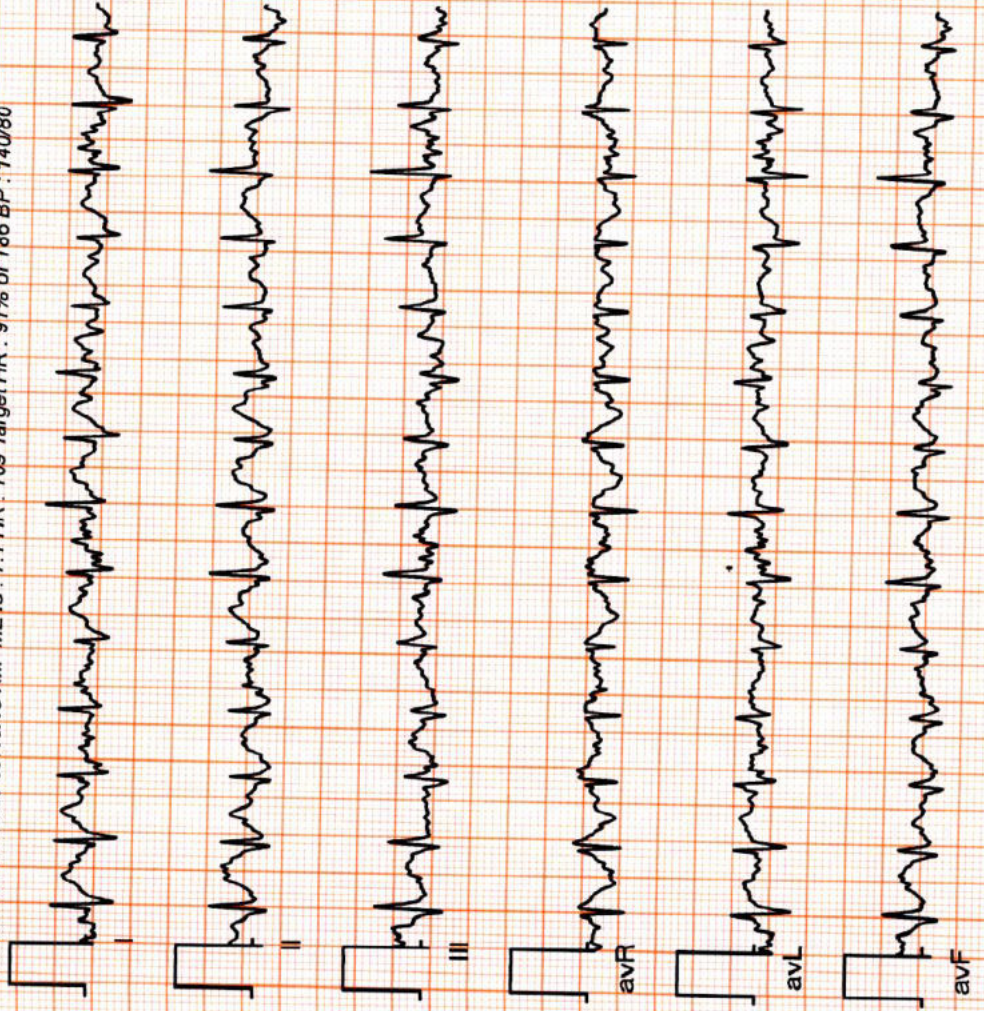
ExTime: 03:00 1.7 mph 10.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz





Date: 14/01/2023 09:45:18 AM METS: 7.1 HR: 169 Target HR: 91% of 186 BP: 140/80

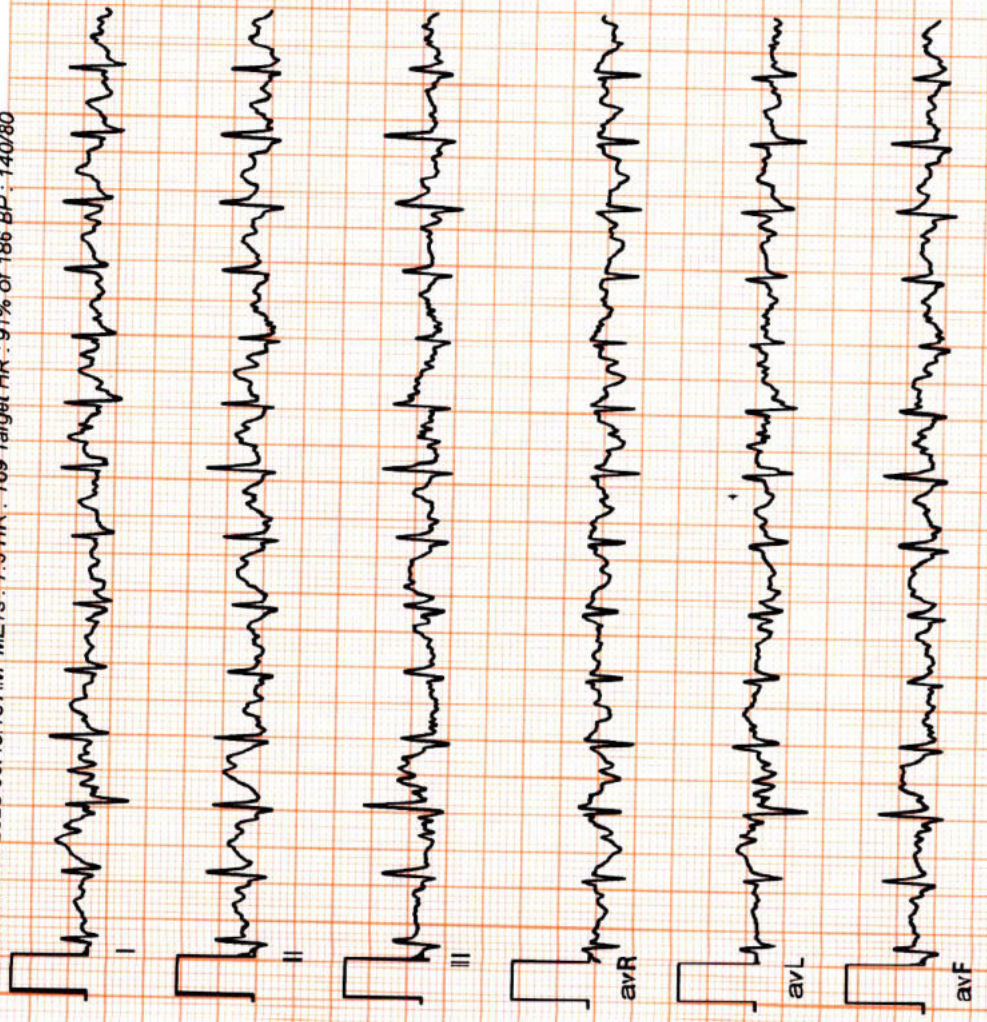
Ex Time: 06:00 2.5 mph 12.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz





Date: 14/01/2023 09:45:18 AM METs: 7.3 HR: 169 Target HR: 91% of 186 BP: 140/80

ExTime: 06:09 3.4 mph 14.0% 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz



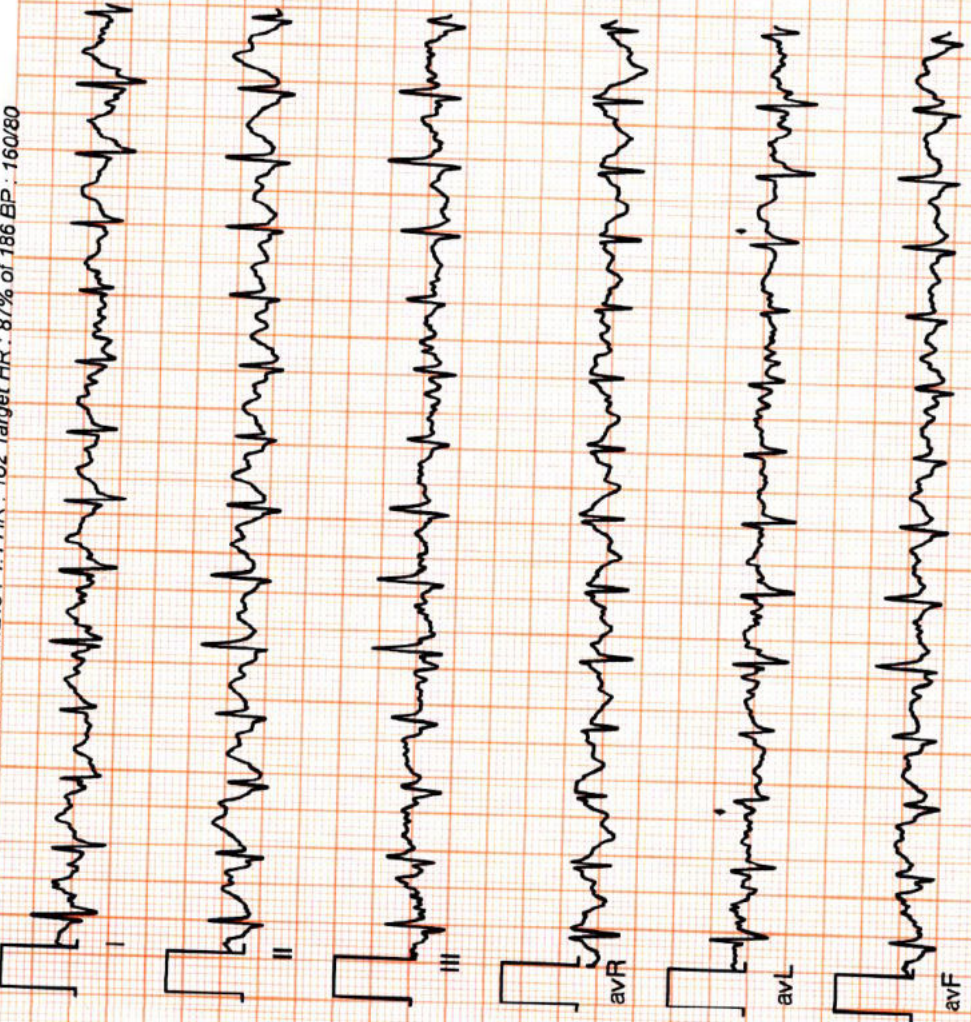
SUBURBAN DIGNOSTICS BHAYANDER

12345719 / ANAND KUMAR / 34 Yrs / Male / 176 Cm / 99 Kg

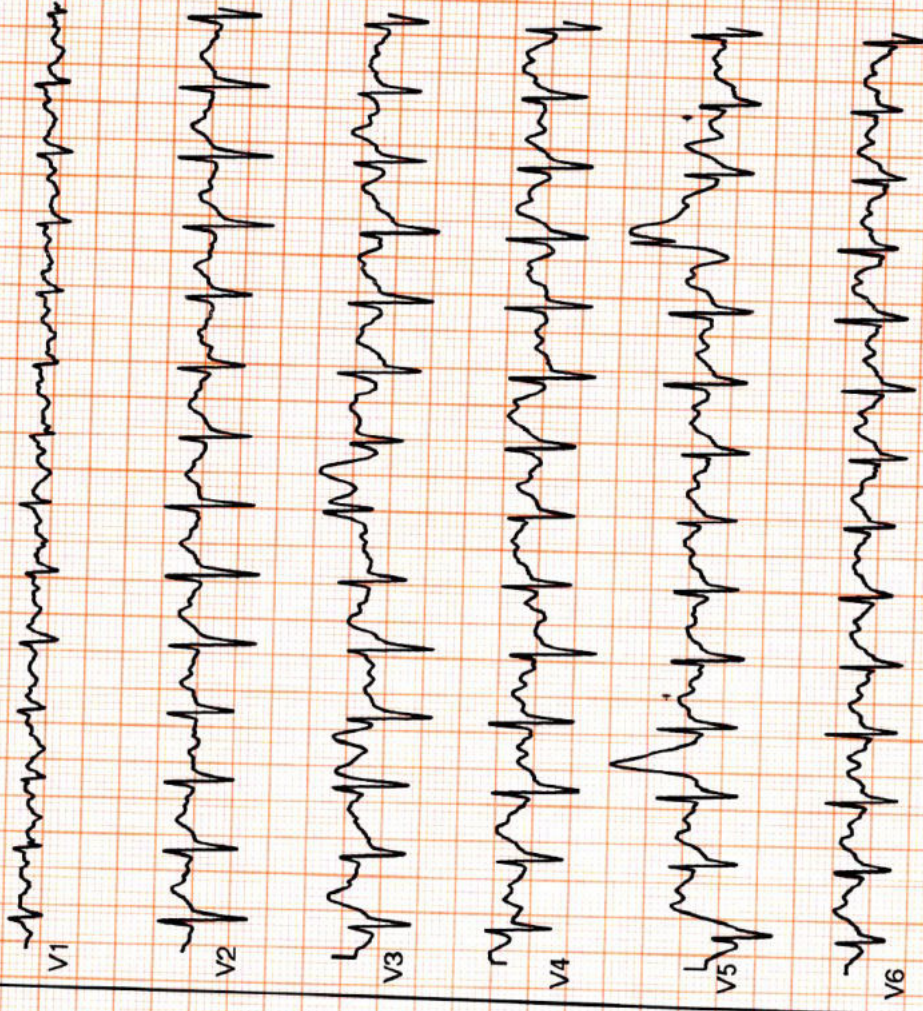
6 x 2 + Rhythm
Recovery(1:00)



Date: 14 / 01 / 2023 09:45:18 AM METs : 1.1 HR : 162 Target HR : 87% of 186 BP : 160/80



Ex Time : 06:09 1.1 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz



SUBURBAN DIGNOSTICS BHAYANDER

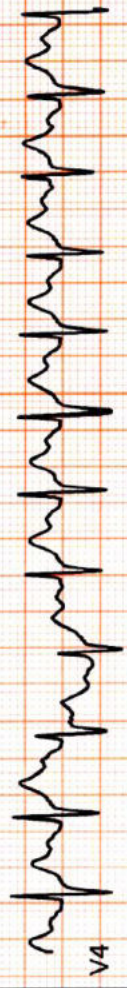
12345719 / ANAND KUMAR / 34 Yrs / Male / 176 Cm / 99 Kg

6 x 2 + Rhythm
Recovery(2:00)



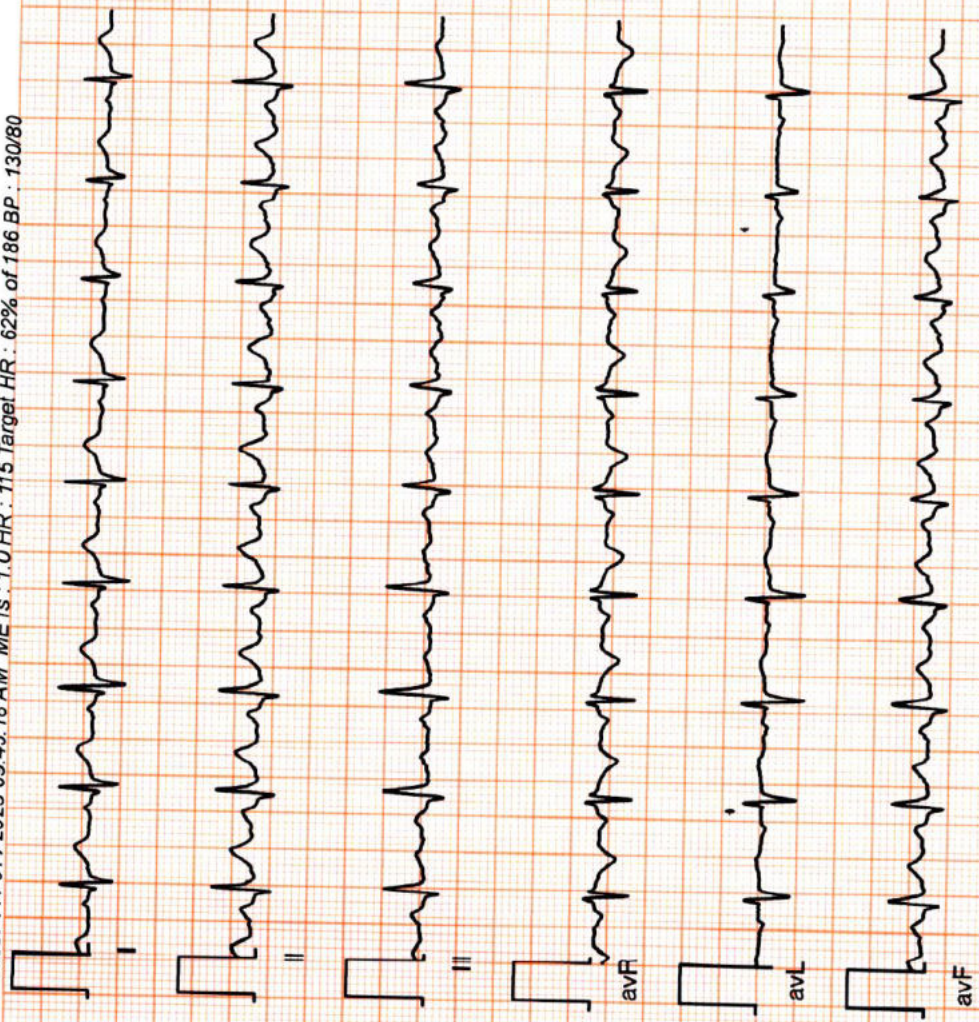
Date: 14 / 01 / 2023 09:45:18 AM METs: 1.0 HR: 134 Target HR: 72% of 186 BP: 150/80

ExTime: 06:09 0.0 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

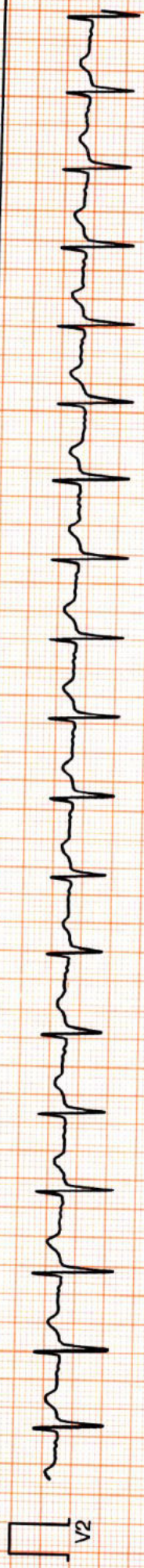
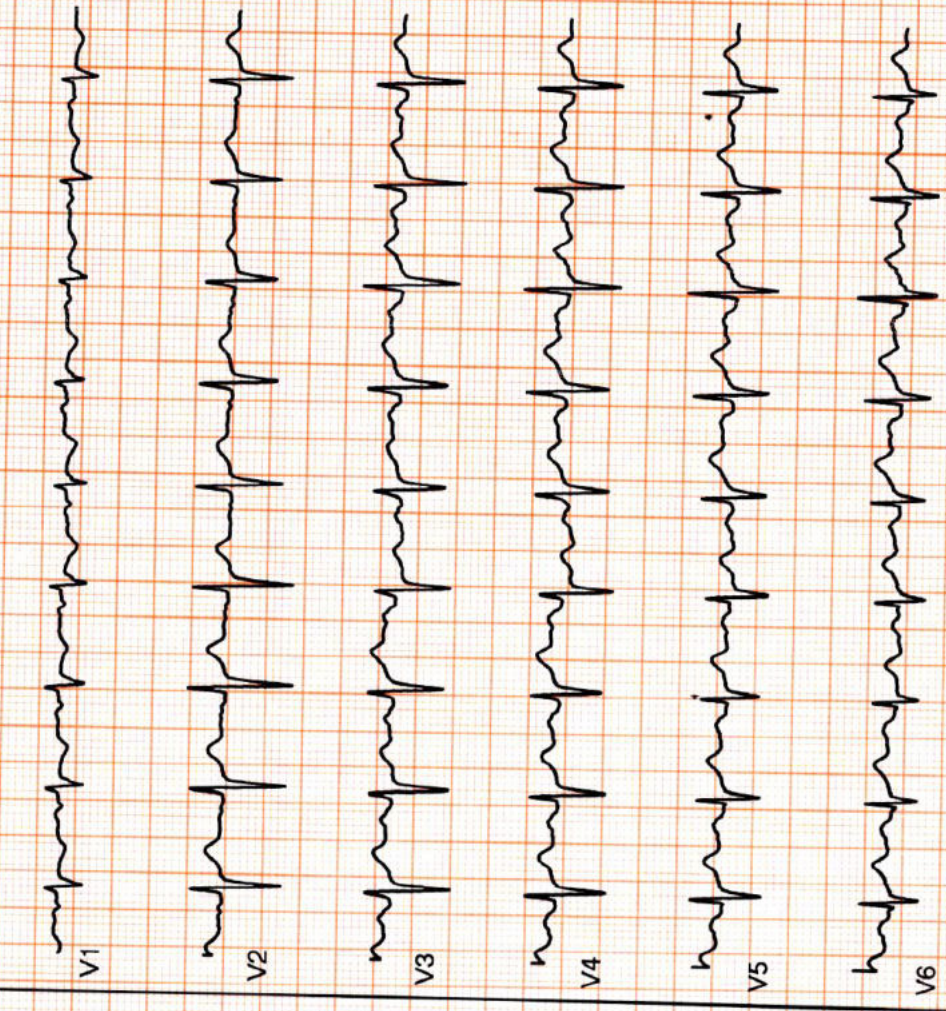




Date: 14 / 01 / 2023 09:45:18 AM METs: 1.0 HR: 115 Target HR: 62% of 186 BP: 130/80



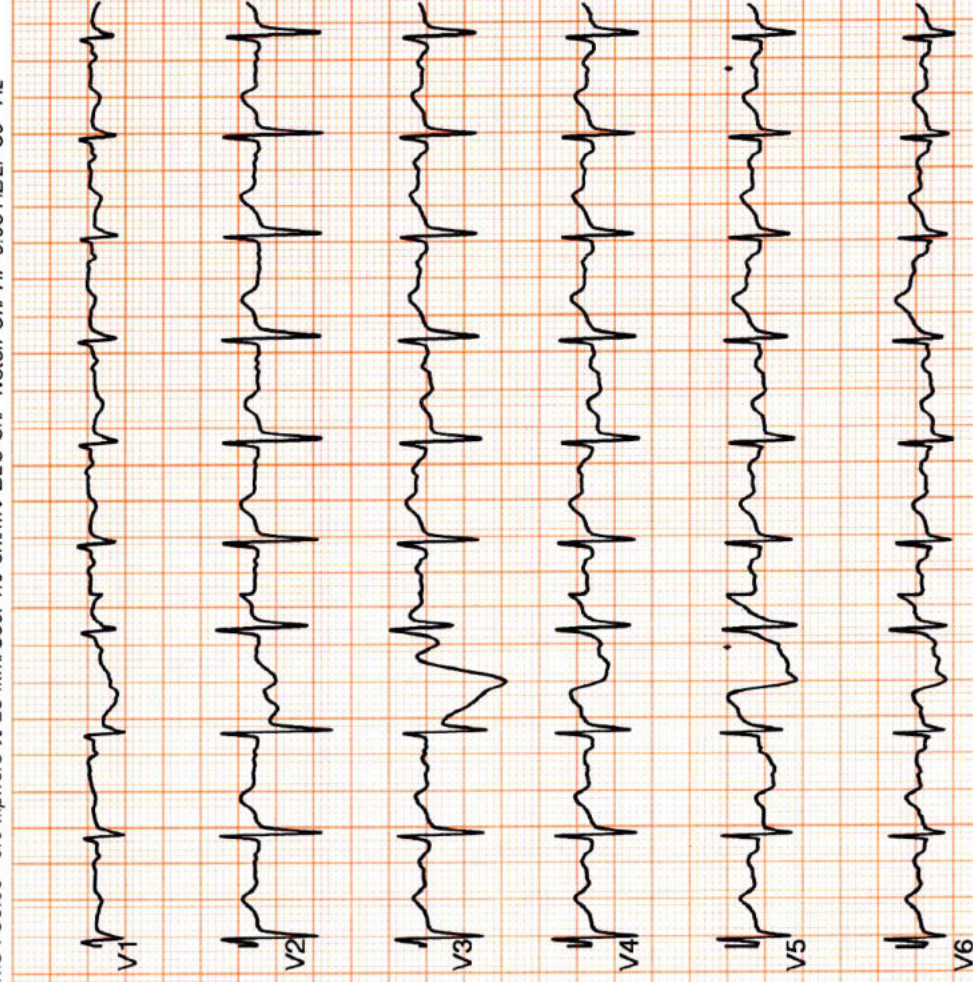
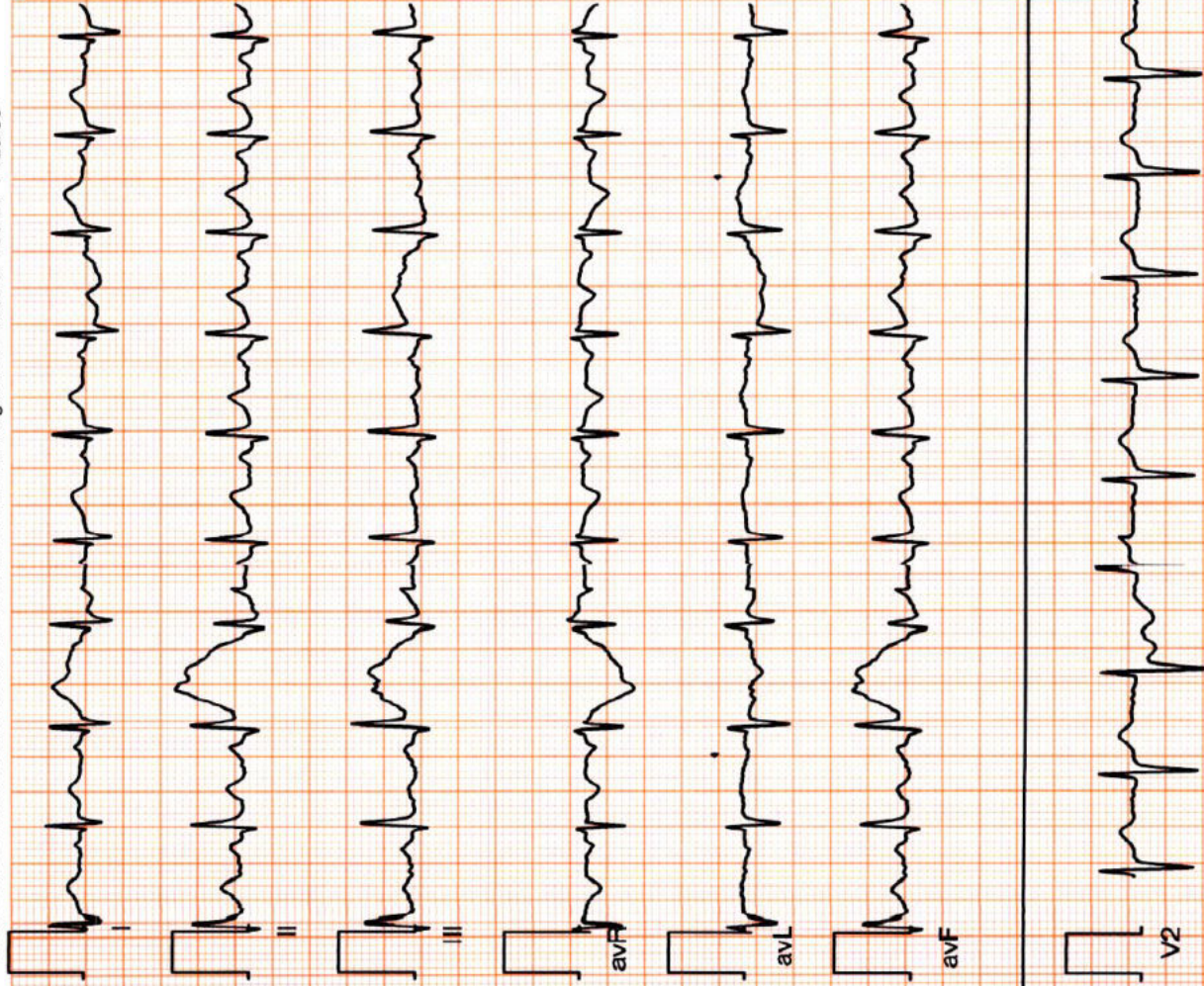
Ex Time: 06:09 0.0 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC OnV Notch OnV HF 0.05 Hz/LF 35 Hz





Date: 14 / 01 / 2023 09:45:18 AM METs : .0 HR : 112 Target HR : 60% of 186 BP : 120/80

Ex Time : 06:09 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
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CID : 2301420990
Name : Mr ANAND KUMAR
Age / Sex : 34 Years/Male
Ref. Dr :
Reg. Location : Bhayander East Main Centre

Reg. Date : 14-Jan-2023
Reported : 14-Jan-2023/14:44

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (13.6 cm), shape and shows smooth margins. It shows normal parenchymal echotexture. No obvious cystic or solid lesion made out in the parenchyma. The intra hepatic biliary and portal radicals appear normal. The main portal vein appears normal.

GALL BLADDER:

The gall bladder is folded and physiologically distended. Neck region is not well visualised. Gall bladder wall appears normal. No evidence of calculus or mass lesions seen in the visualised lumen.

COMMON BILE DUCT:

The visualized common bile duct is normal in calibre. Terminal common bile duct is obscured due to bowel gas artefacts.

PANCREAS:

The pancreas appears normal. No evidence of solid or cystic mass lesion seen.

KIDNEYS:

Right kidney measures 11.0 x 5.2 cm. Left kidney measures 9.9 x 5.4 cm. Both the kidneys are normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. Pelvicalyceal system is normal. No evidence of any calculus, hydronephrosis or mass lesion seen on both sides.

SPLEEN:

The spleen is normal in size (10.6 cm) and echotexture. No evidence of focal lesion is noted.

URINARY BLADDER:

The urinary bladder is well distended and reveals no intraluminal abnormality. Bladder wall appears normal. No obvious calculus or mass lesion made out in the lumen.

PROSTATE:

The prostate is normal in size, measures 3.4 x 3.1 x 3.3 cms and weighs 18.6 gms. Parenchymal echotexture is normal. No obvious mass or calcification made out.

There is no evidence of any lymphadenopathy or ascites.



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Reported : 14-Jan-2023/14:44

IMPRESSION:

➤ **No significant abnormality made out.**

Kindly correlate clinically.

Investigations have their limitation. Solitary pathological/Radiological & other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms & other related tests. Please interpret accordingly.

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

This report is prepared and physically checked by DR VIBHA S KAMBLE before dispatch.

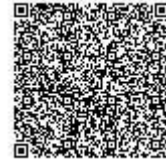
DR.VIBHA S KAMBLE
MBBS ,DMRD
Reg No -65470
Consultant Radiologist



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CID : 2301420990
Name : Mr ANAND KUMAR
Age / Sex : 34 Years/Male
Ref. Dr :
Reg. Location : Bhayander East Main Centre

Reg. Date : 14-Jan-2023
Reported : 14-Jan-2023/12:49

X-RAY CHEST PA VIEW

The lung fields are clear with no parenchymal lesion.

The cardiothoracic ratio is maintained and the cardiac outline is normal.

The domes of the diaphragm and hila are normal.

The cardio and costophrenic angles are clear.

Bony thorax is normal

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

kindly correlate clinically.

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

This report is prepared and physically checked by DR VIBHA S KAMBLE before dispatch.

DR. VIBHA S KAMBLE
MBBS ,DMRD
Reg No -65470
Consultant Radiologist



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Name : Mr ANAND KUMAR
Age / Sex : 34 Years/Male
Ref. Dr :
Reg. Location : Bhayander East Main Centre

Reg. Date : 14-Jan-2023
Reported : 14-Jan-2023/12:49