

CID# : 2308421494
Name : MR.SOUMYADEEP MALLIK
Age / Gender : 35 Years/Male
Consulting Dr. : Collected : 25-Mar-2023 / 09:12
Reg.Location : Kandivali East (Main Centre) Reported : 26-Mar-2023 / 10:25

PHYSICAL EXAMINATION REPORT

History and Complaints:

No

EXAMINATION FINDINGS:

Height (cms):	168 cms	Weight (kg):	71 kgs
Temp (0c):	Afebrile	Skin:	Normal
Blood Pressure (mm/hg):	130/80	Nails:	Normal
Pulse:	72/min	Lymph Node:	Not palpable

Systems

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

IMPRESSION:

Ech - voltage criteria for LHB

ADVICE:

2D ECHO

CID# : 2308421494

Name : MR.SOUMYADEEP MALLIK

Age / Gender : 35 Years/Male

Consulting Dr. :

Collected : 25-Mar-2023 / 09:12

Reg.Location : Kandivali East (Main Centre)

Reported : 26-Mar-2023 / 10:25

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 | Lap Right inguinal hernia May 2022 |
| 17) Musculoskeletal System | No |

PERSONAL HISTORY:

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

*** End Of Report ***

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Thakur Village, Kandivali (east),
Mumbai - 400101.
Tel : 61700000

Dr. Jagruti Dhale
MBBS
Consultant Physician
Reg. No. 69548
J Dhale
Dr.JAGRUTI DHALE

DENTAL CHECK - UP

Name:- Soumyadeep Mallik

CID : 2308421494 Sex / Age : M / 35

Occupation:-

Date: 25/03/2023

Chief complaints:- No complaints

Medical / dental history:- no relevant history

GENERAL EXAMINATION:

1) Extra Oral Examination:

- a) TMJ: normal movements
- b) Facial Symmetry: Bilateral symmetrical.

2) Intra Oral Examination:

- a) Soft Tissue Examination: Generalised soft & hard tissue loss
- b) Hard Tissue Examination:
- c) Calculus: ++

Stains: +

18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28
48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38

	Missing	#	Fractured
○	Filled/Restored	RCT	Root Canal Treatment
○	Cavity/Caries	RP	Root Piece

Advised: a) scaling & polishing [cleaning]

Provisional Diagnosis:-

Gingivitis-

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Mumbai - 400101.
Tel : 61700800

DR. BHUMIK PATEL
(B.D.S) A - 23378

Dr. Bhumik Patel
[Signature]

Date: - 25/3/23

CID: 2308421494

Name: - Mr. Soumyadeep Malik

Sex/Age: m/35

EYE CHECK UP

Chief complaints: Routine check

Systemic Diseases: no h/o stz

Past history: no h/o trauma & injury
h/o glaucoma

cataract eye
↑

Unaided Vision: 6/6 blr 6/6 blr

hlogl
← 0.50 x 180

Aided Vision: 6/6, nlg 6/6, nlg

Refraction:

combs. normal

	(Right Eye)				(Left Eye)			
	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	±	0.50	180	6/6	±	0.50	180	6/6
Near				nlg				nlg

Colour Vision: Normal / Abnormal

Remark: vn within normal limit

Kajal H.
KAJAL NAGRECHA
OPTOMETRIST

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Tel : 61700000

CID : 2308421494
Name : Mr SOUMYADEEP MALLIK
Age / Sex : 35 Years/Male
Ref. Dr :
Reg. Location : Kandivali East Main Centre
Reg. Date : 25-Mar-2023
Reported : 25-Mar-2023 / 14:41

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.

Note: Investigations have their limitations. solitary radiological investigations never confirm the final diagnosis.They only help in diagnosing the disease in correlation to clinical symptoms and other related tests.X ray is known to have inter observer variations.Further / follow up imaging may be needed in some cases for confirmation / exclusion of diagnosis.Please interpret accordingly.In case of any typographical error / spelling error in the report, patient is requested to immediately contact the centre within 7 days, post which the center will not be responsible for any rectification.

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



DR. SHRIKANT M. BODKE
D.M.R.E., M.B.B.S.
Reg. No. 2006/04/2376

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Page no 1 of 1



CID : 2308421494
Name : Mr SOUMYADEEP MALLIK
Age / Sex : 35 Years/Male
Ref. Dr :
Reg. Location : Kandivali East Main Centre

Reg. Date : 25-Mar-2023
Reported : 25-Mar-2023 / 10:37

Use a QR Code Scanner
Application To Scan the Code

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (13.8 cm) shape and smooth margins. It shows normal parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein measures 12 mm and CBD appears measures 3.2 mm . 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:

Right kidney measures 11.1 x 5.4 cm. Left kidney measures 9.8 x 5.7 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 (9.6 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 3.8 x 3.0 x 2.9 cm and volume is 17.9 cc.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS SEEN.

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

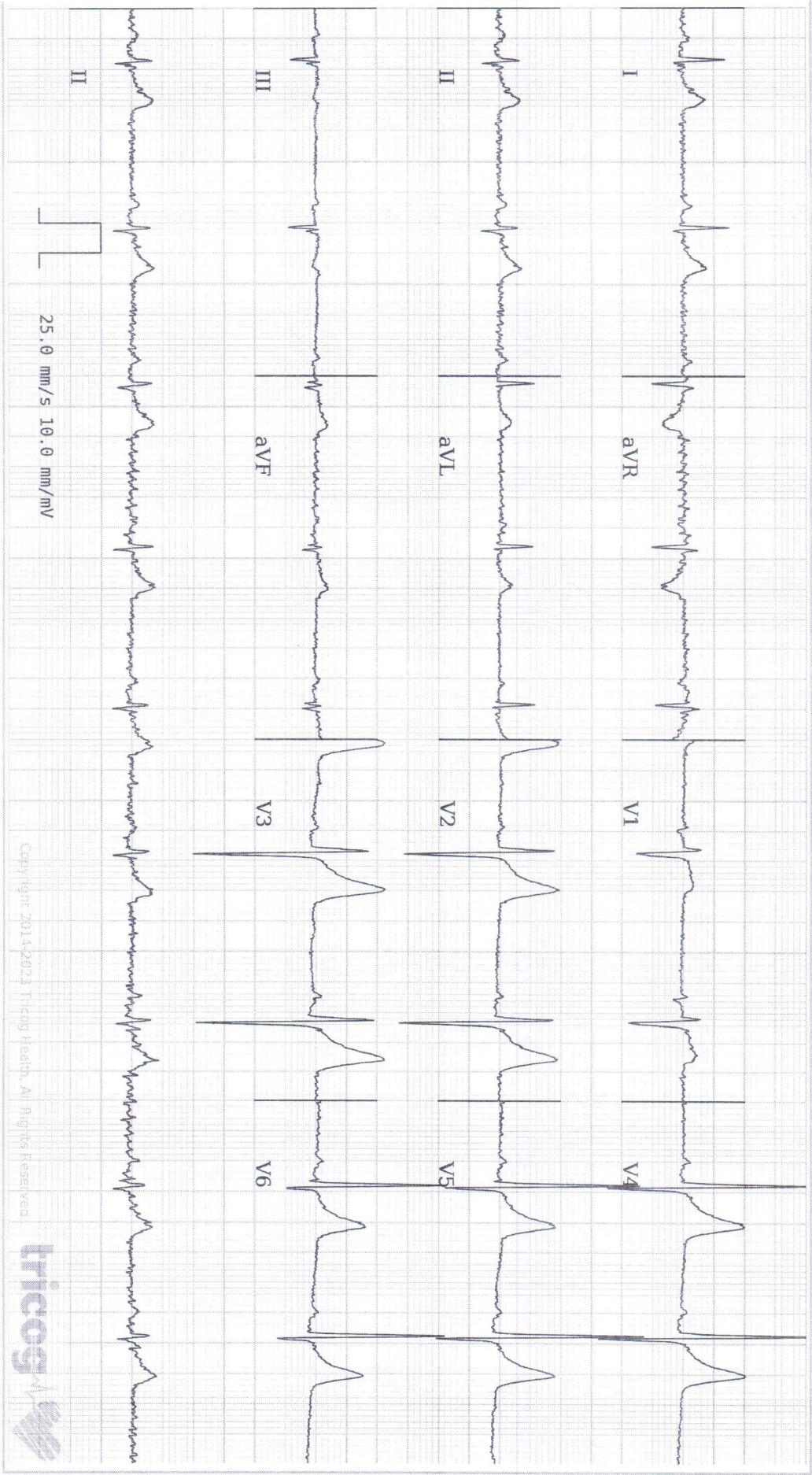
DR. Akash Chhari
MBBS. MD. Radio-Diagnosis Mumbai
MMC REG NO - 2011/08/2862

Click here to view images [http://3.111.232.119/iRISViewer/NeoradViewer?
Access](http://3.111.232.119/iRISViewer/NeoradViewer?Access)

sionNo=2023032509131251

Patient Name: SAUMYADEEP MALLIK
Patient ID: 2308421494

Date and Time: 25th Mar 23 11:21 AM



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Age **35** NA NA
years months days

Gender **Male**

Heart Rate **57bpm**

Patient Vitals

BP: 130/80 mmHg

Weight: 71 kg

Height: 168 cm

Pulse: NA

SpO2: NA

Resp: NA

Others:

Measurements

QRSD: 88ms

QT: 388ms

QTc: 377ms

PR: 168ms

P-R-T: 40° -15° 31°

REPORTED BY

DR. AKHIL PARULEKAR
MBBS, MD, MEDICINE, DNB Cardiology
Cardiologist
2012082483

Sinus Bradycardia. Voltage Criteria for LVH noted. 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.

SUBURBAN DIAGNOSTICS KANDIVALI EAST

Report



Email:

1336 (2308421494) / SOUMYADEEP MALIK / 35 Yrs / M / 168 Cms / 71 Kg
 Date: 25 / 03 / 2023 11:30:48 AM Refd By : AERCOFEMI Examined By: DR.AKHIL PARULEKAR

Stage	Time	Duration	Speed(Kmph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	01:20	1:20	00.0	00.0	01.0	060	32 %	130/80	078	00	
Standing	01:33	0:13	00.0	00.0	01.0	066	36 %	130/80	085	00	
HV	01:37	0:04	00.0	00.0	01.0	066	36 %	130/80	085	00	
ExStart	01:51	0:14	00.0	00.0	01.0	083	45 %	130/80	107	00	
BRUCE Stage 1	04:51	3:00	02.7	10.0	04.7	122	66 %	130/80	158	00	
BRUCE Stage 2	07:51	3:00	04.0	12.0	07.1	143	77 %	130/80	185	00	
PeakEx	09:14	1:23	05.5	14.0	08.5	163	88 %	150/80	244	00	
Recovery	10:14	1:00	00.2	00.0	01.2	123	66 %	150/80	184	00	
Recovery	10:23	1:09	00.0	00.0	01.0	123	66 %	150/80	184	00	

FINDINGS :

Exercise Time : 07:23
 Initial HR (ExStrt) : 83 bpm 45% of Target 185
 Initial BP (ExStrt) : 130/80 (mm/Hg)
 Max Workload Attained : 8.5 Fair response to induced stress
 Duke Treadmill Score : 07.4
 Test End Reasons : Heart Rate Achieved

Max HR Attained 163 bpm 88% of Target 185
 Max BP Attained 150/80 (mm/Hg)

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 Td : 61700900

Dr. Akhil Parulekar
 MBBS, MD, MChD
 DNB Cardiology
 Reg. No. 2012082-33

Doctor : DR.AKHIL PARULEKAR



SUBURBAN DIAGNOSTICS KANDIVALI EAST

REPORT



Email:

1336 / SOUMYADEEP MALIK / 35 Yrs / M / 168 Cms / 71 Kg Date: 25 / 03 / 2023 11:30:48 AM Refd By : AERCOFEMI

REPORT :

Heart Rate 163.0 bpm

Systolic BP 150.0 mmHg Diastolic BP 80.0 mmHg

Exercise Time 07.23 Mins. Ectopic Beats 0.0

NETS 8.5 Test End Reason Heart Rate Achieved Target Heart Rate 88% of 185

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 diseases. Positive stress test is suggestive but not confirmatory of coronary artery disease. Hence clinical correlation is mandatory.

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Thakur Village, Kandivari (East),

Mumbai - 400 091.

Tel : 017009000

Dr. Akhil P. Parulekar

M.D. (CC) - Parulekar

MBBS (Kandivari)

Reg. No. 20120824003

Doctor : DR. AKHIL PARULEKAR



SUBURBAN DIAGNOSTICS KANDIVALI EAST

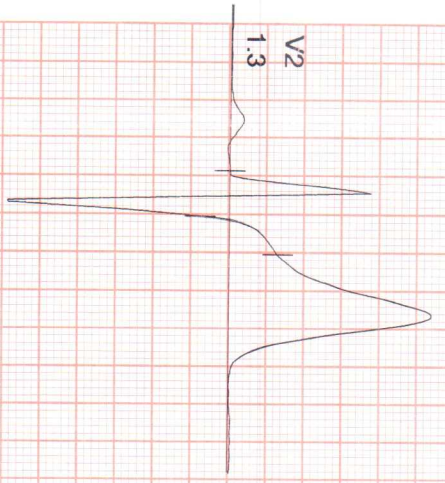
1336 (2308421494) / SOUNYADEEP MALIK / 35 Yrs / M / 168 Cms / 71 Kg / HR : 60

Date: 25 / 03 / 2023 11 : 30 : 48 AM METS: 1 0/ 60 bpm 32% of THR BP: 130/80 mmHg Raw ECG/ BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz
 4X 80 ms Post J

SUPINE (01:20)



ExTime: 00:00 0.0 Km/h, 0.0%
 25 mm/Sec. 1.0 Cm/mV



I
 STL 0.4
 STS 0.5

II
 1.5
 0.9

III
 1.0
 0.4

aVR
 1.0
 1.0
 0.7

aVL
 -0.3
 0.0

aVF
 1.3
 0.7

V1
 -0.1
 0.1

V2
 1.3
 1.7

V3
 1.9
 2.1

V4
 1.9
 0.8

V5
 1.7
 1.6

V6
 1.2
 0.8



REMARKS



SUBURBAN DIAGNOSTICS KANDIVALI EAST

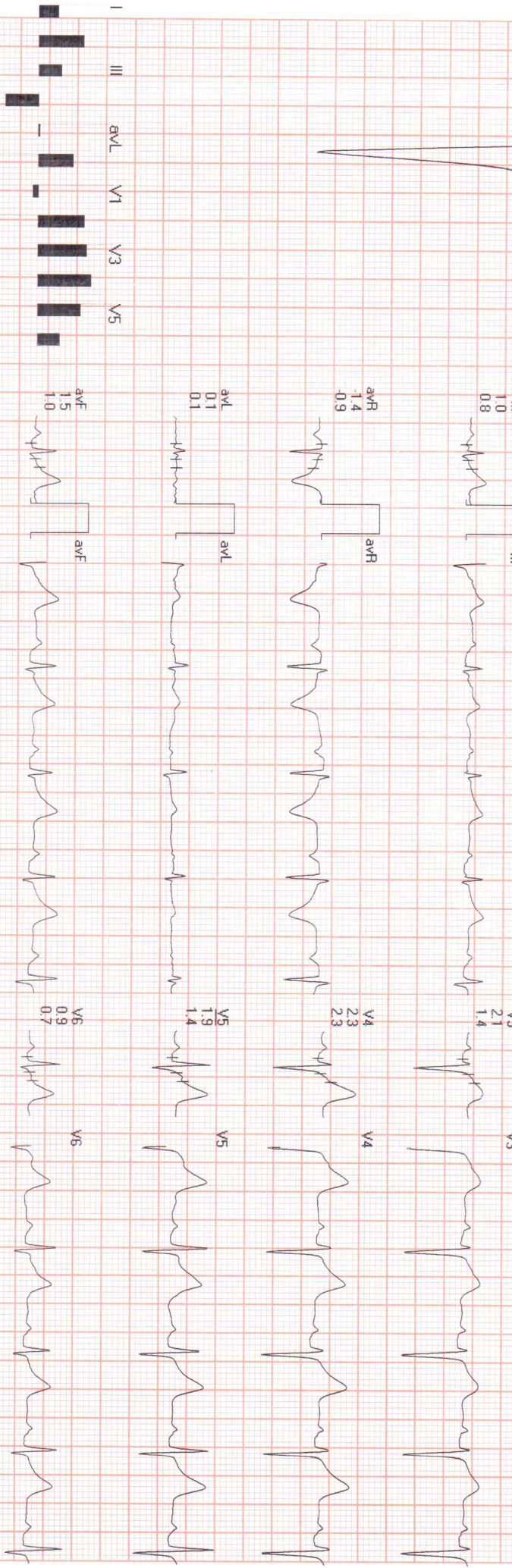
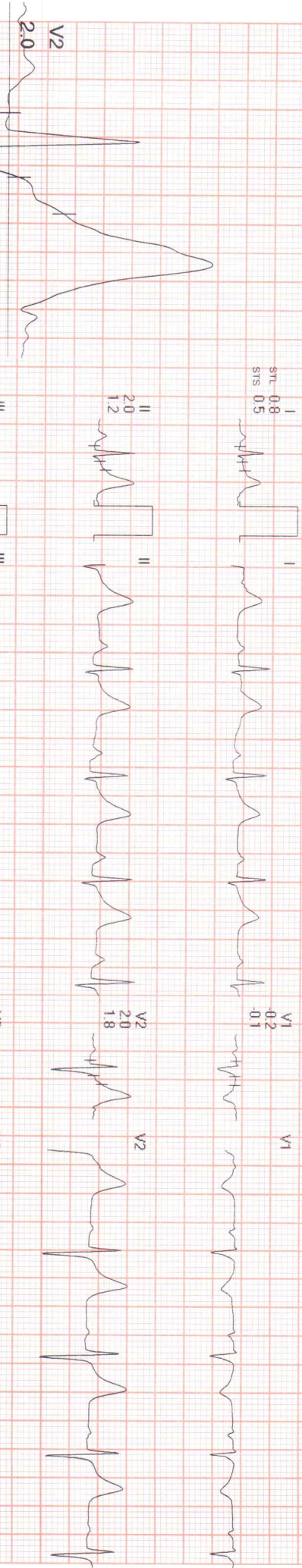
1336 (2308421494) / SOUMYADEEP MALIK / 35 Yrs / M / 168 Cms / 71 Kg / HR : 66

STANDING (00:13)



Date: 25 / 03 / 2023 11:30:48 AM METS: 1.0/66 bpm 36% of THR BP: 130/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/ F 35 Hz
 4X 80 ms Post J

EXTime: 00:00 0.0 Kmph, 0.0%
 25 mm/Sec. 1.0 Cm/mV



REMARKS



SUBURBAN DIAGNOSTICS KANDIVALI EAST

1336 (2308421494) / SOUNIYADEEP MALIK / 35 Yrs / M / 168 Cms / 71 Kg / HR : 66

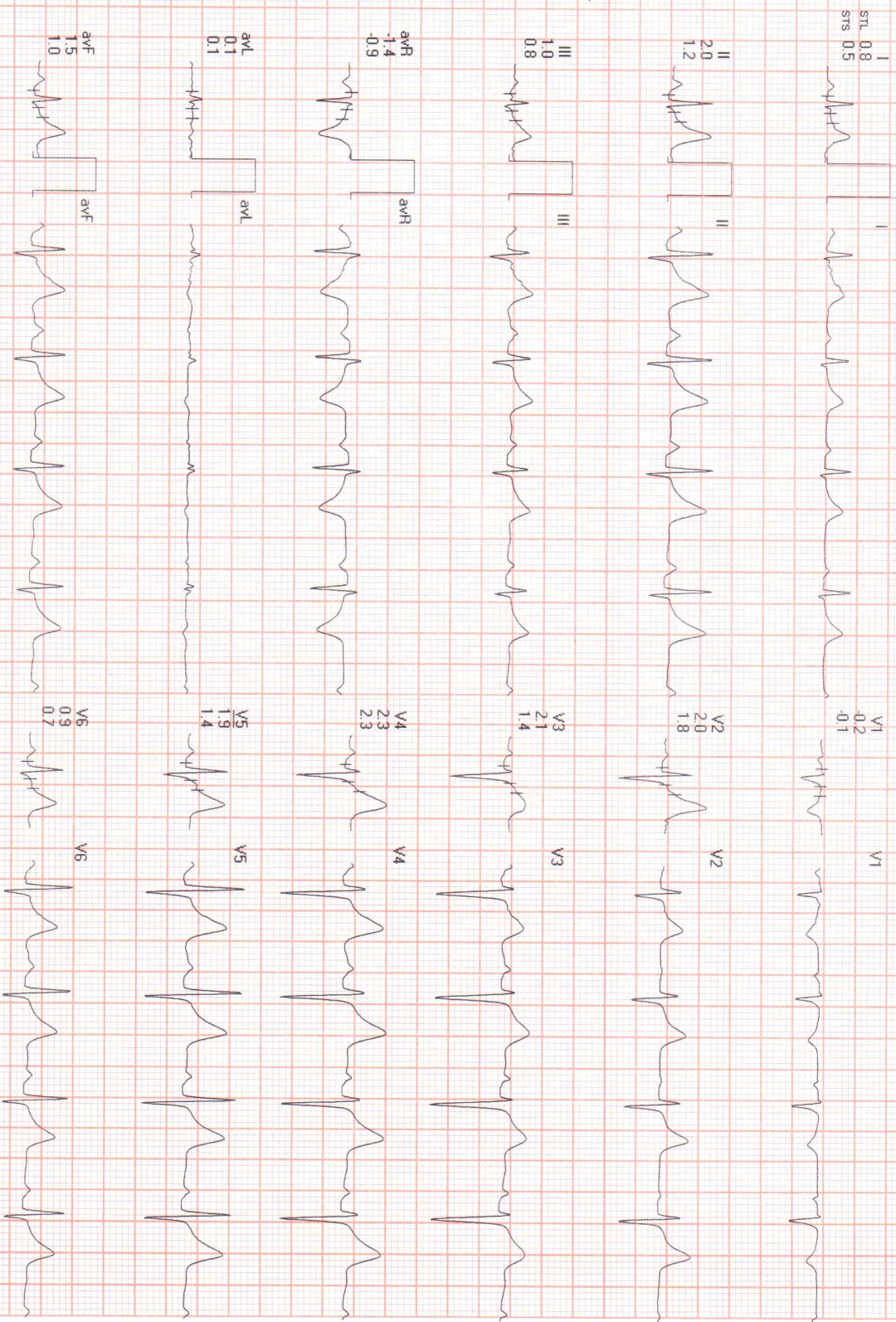
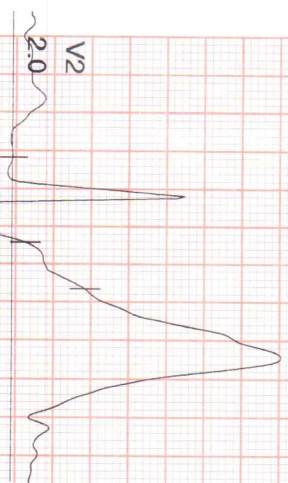
Date: 25 / 03 / 2023 11:30:48 AM
 4X 80 ms Post J

METS: 1.0/ 66 bpm 36% of THR BP: 130/80 mmHg P_{aw} ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

HV (00:04)



EXTime: 00:00 0.0 Km/h, 0.0%
 25 mm/Sec 1.0 Cm/mV



REMARKS



SUBURBAN DIAGNOSTICS KANDIVALI EAST

1336 (2308421494) / SOUNMYADEEP MALIK / 35 Yrs / M / 168 Cms / 71 Kg / HR : 83

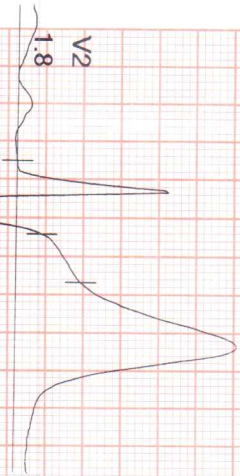
Date: 25 / 03 / 2023 11:30:48 AM METS: 1.0 / 83 bpm 45% of THR BP: 130/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/ LF 35 Hz

4X 80 ms Post J

EXStit



EXTime: 00:00 0.0 Kmph, 0.0%
25 mm/Sec. 1.0 Cm/mV



STL 0.5
STS 0.6

II 1.9
1.2

III 1.4
0.6

avR -1.2
-0.9

avL -0.5
0.0

avF 1.7
0.9

V1 -0.1
-0.3

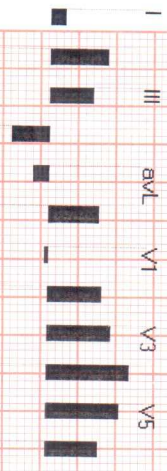
V2 1.8
1.2

V3 2.1
1.2

V4 2.7
1.7

V5 2.4
1.6

V6 1.7
1.1



II avR avF V2 V4 V6
III avL aVL V1 V3 V5

REMARKS:



SUBURBAN DIAGNOSTICS KANDIVALI EAST

BRUCE : Stage 1 (03:00)



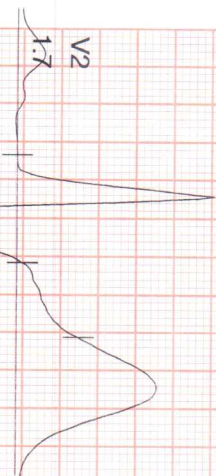
1336 (2308421494) / SOLIMYADEEP MALIK / 35 Yrs / M / 168 Cms / 71 Kg / HR : 122

Date: 25 / 03 / 2023 11:30:48 AM

METS: 4.7 / 122 bpm 66% of THR BP- 130/80 mmHg Raw ECG/ BLC On/ North On/ HF 0.05 Hz/LF 35 Hz

4X 80 ms Post J

EXTime: 03:00 2.7 Kmph, 10.0%
25 mm/Sec. 1.0 Cm/mV



I
STL 1.1
STR 1.3

II
2.5
2.5

III
1.5
1.3

aVR
-1.8
-1.9

aVL
-0.2
-0.1

aVF
2.0
1.9

V1
0.8
-1.0

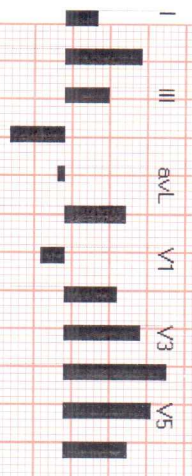
V2
1.7
1.8

V3
2.5
2.1

V4
3.4
3.1

V5
2.9
2.7

V6
2.1
2.0



REMARKS:



SUBURBAN DIAGNOSTICS KANDIVALI EAST

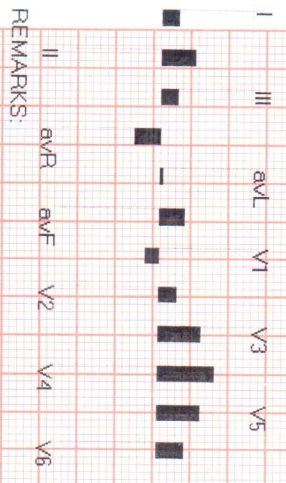
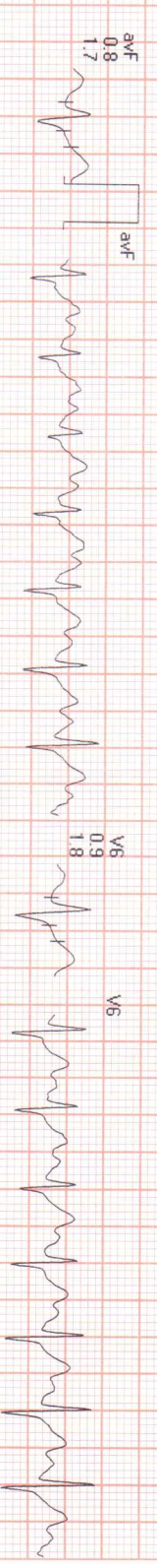
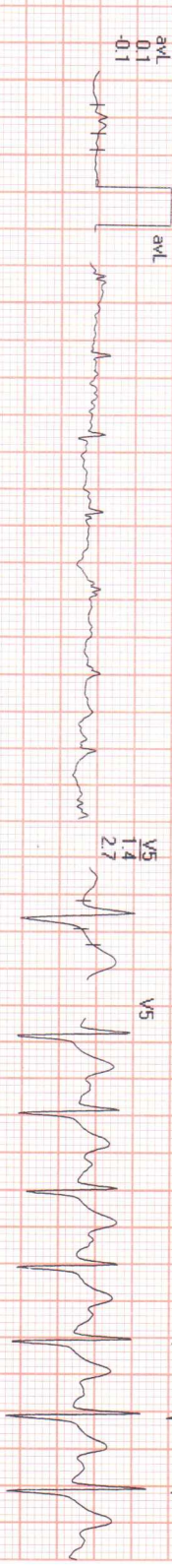
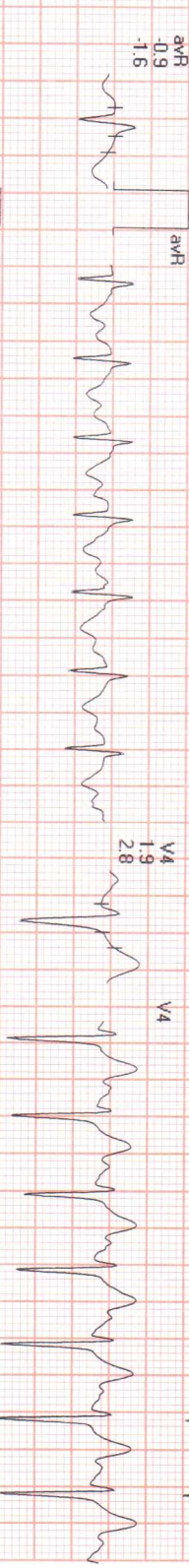
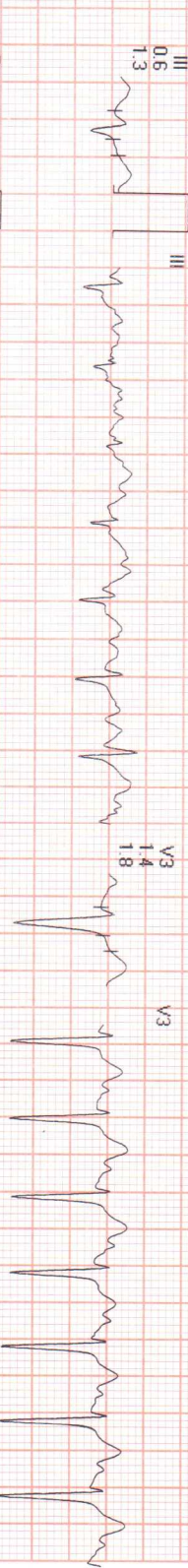
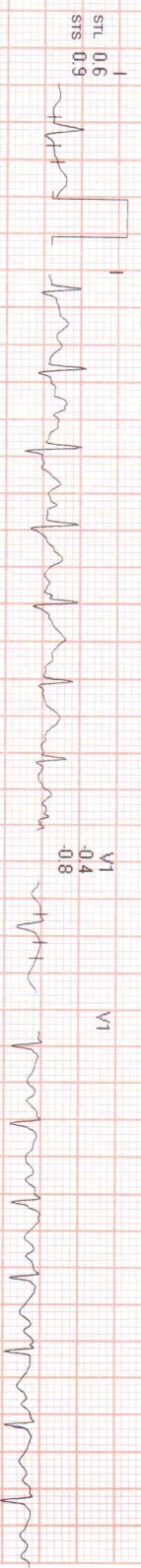
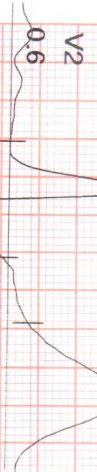
BRUCE : Stage 2 (03:00)



1336 (2308421494) / SOUNYADEEP MALIK / 35 Yrs / M / 168 Cms / 71 Kg / HR : 143

Date: 25 / 03 / 2023 11:30:48 AM METS: 7.1 / 143 bpm 77% of THR BP: 130/80 mmHg Raw ECG: BLC On/ Notch On/ HF: 0.05 Hz/LF: 35 Hz
4X 60 ms Pos J

ExTime: 06:00 4.0 Km/h, 12.0%
25 mm/Sec. 1.0 Cm/mV



REMARKS:
II aVR aVF V2 V4 V6



SUBURBAN DIAGNOSTICS KANDIVALI EAST

PeakEX



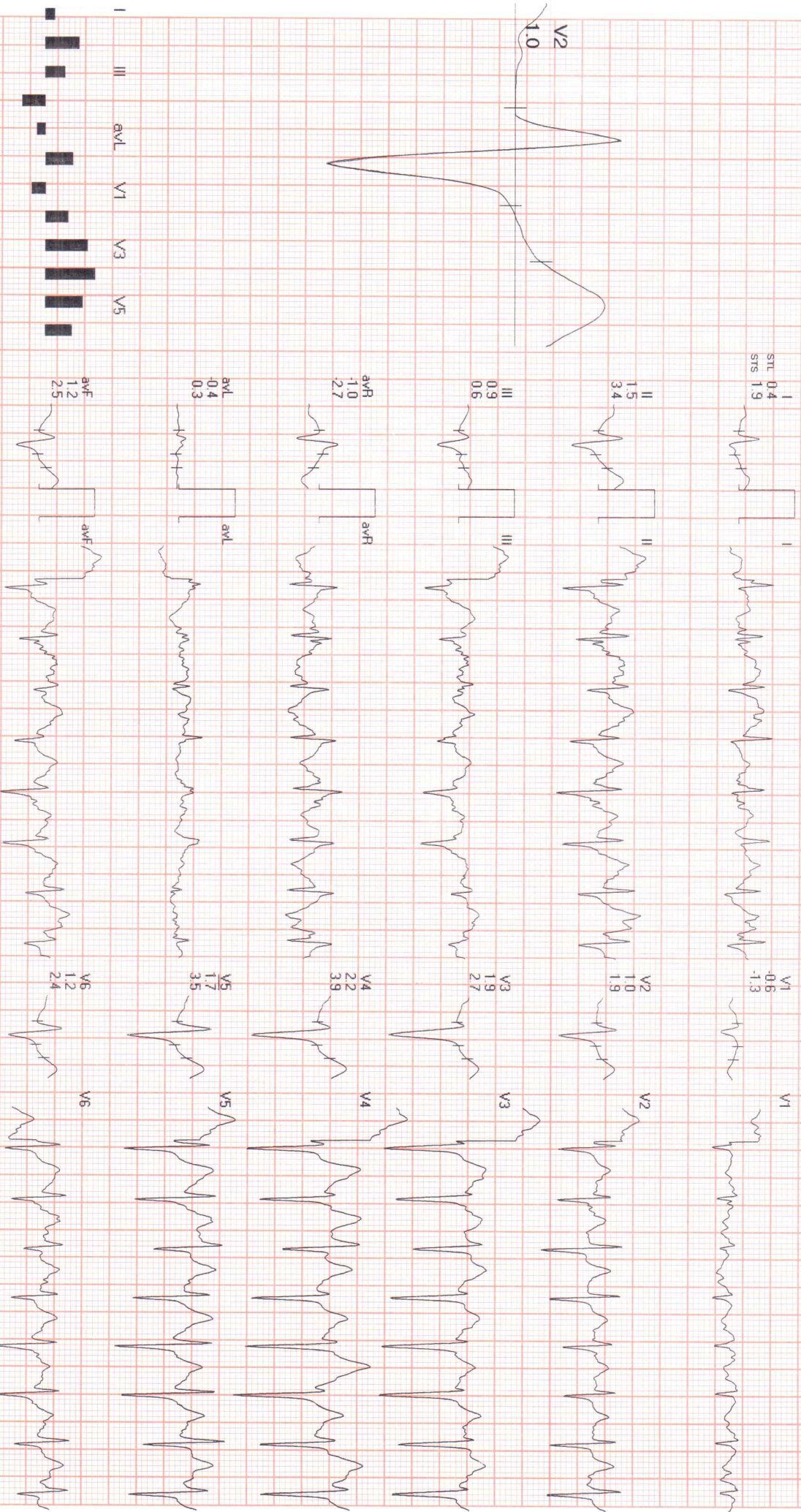
1336 (2308421494) / SOUTHWADEEP MALIK / 35 Yrs / M / 168 Cms / 71 Kg / HR : 163

Date: 25 / 03 / 2023 11:30:48 AM

METS: 8.5 / 163 bpm 88% of THR BP: 150/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

4X 60 ms Post J

EXTime: 07:23 5.5 Kmph, 14.0%
25 mm/Sec 1.0 Cm/mV



REMARKS:



SUBURBAN DIAGNOSTICS KANDIVALI EAST

Recovery : (01:00)

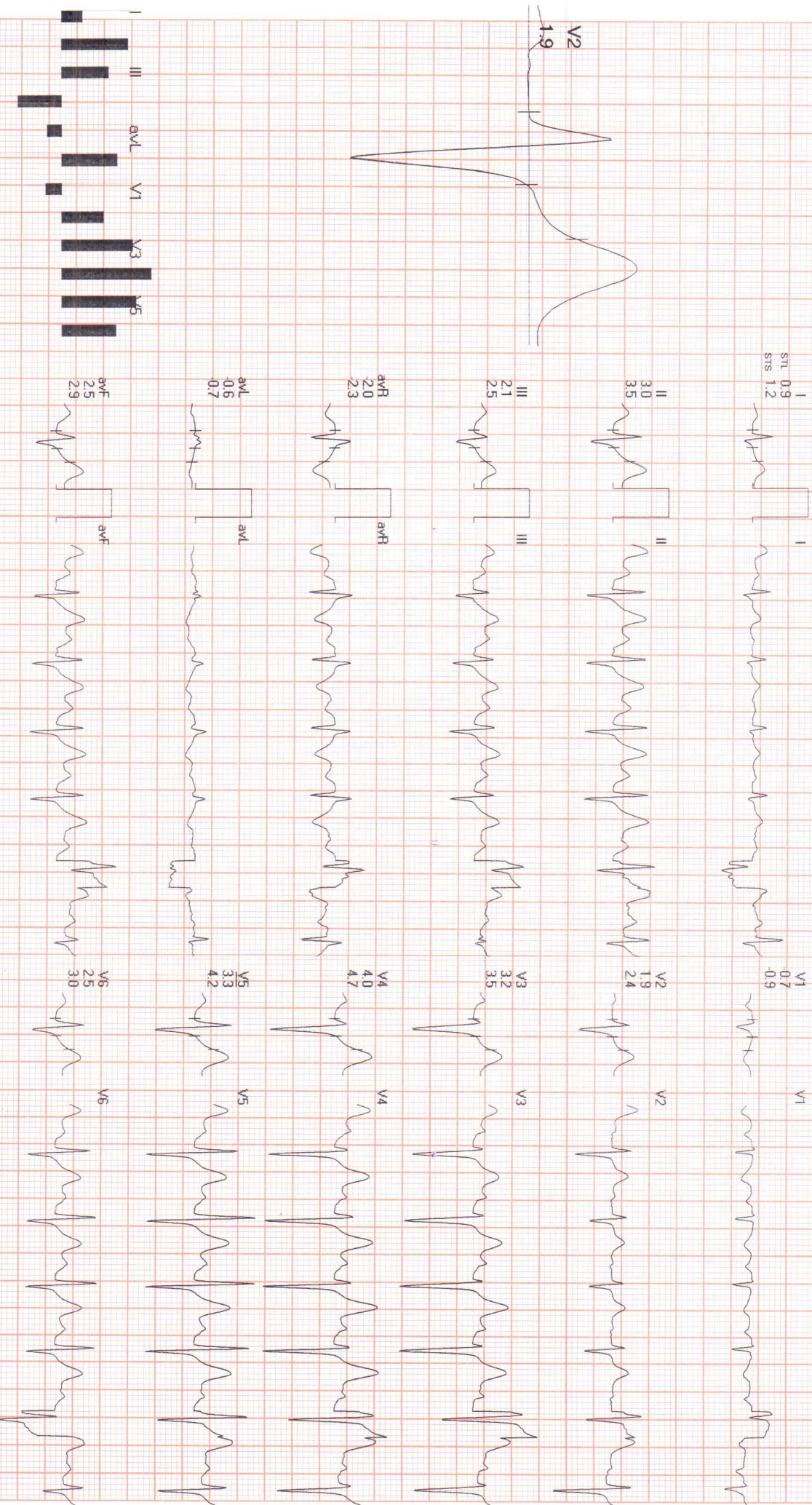


1336 (2308421494) / **SOMYADEEP MALIK / 35 Yrs / M / 168 Cms / 71 Kg / HR : 123**

Date: 25/03/2023 11:30:48 AM METS: 1.1/1.23 bpm 66% of THR BP: 150/80 mmHg Raw ECG/ BLC On/ Notch On/ HF: 0.05 Hz/LF: 35 Hz

4X 80ms Post J

EXTime: 07:23 0.2 Kmph, 0.0%
25 mm/Sec. 1.0 Cm/mV



REMARKS:



SUBURBAN DIAGNOSTICS KANDIVALI EAST

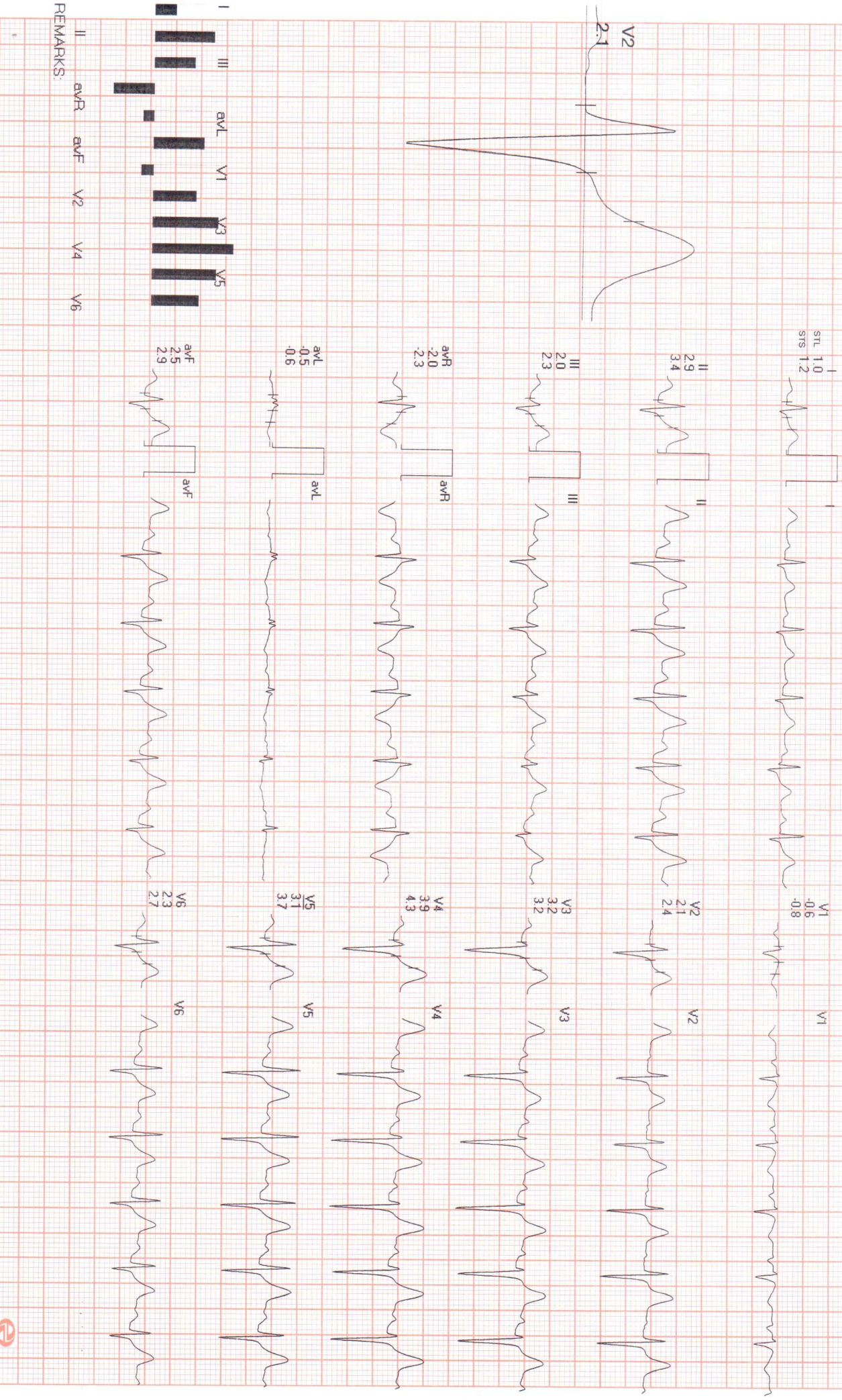
1336 (2308421494) / SOUNMYADEEP MALIK / 35 Yrs / M / 168 Cms / 71 Kg / HR 123

Date: 25 / 03 / 2023 11:30:48 AM METS: 1.0 / 123 bpm 66% of THR BP: 150/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz
 4X 80 ms Post J

Recovery : (01:09)



EXTime: 07:23 0.0 Kmph, 0.0%
 25 mm/Sec 1.0 Cm/mV



REMARKS:





CID : 2308421494
Name : MR.SOUMYADEEP MALLIK
Age / Gender : 35 Years / Male
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

Collected : 25-Mar-2023 / 09:16
Reported : 26-Mar-2023 / 18:11

Use a QR Code Scanner
Application To Scan the Code

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 ***

M Jain

Dr.MILLU JAIN
M.D.(PATH)
Pathologist





CID : 2308421494
Name : MR.SOUMYADEEP MALLIK
Age / Gender : 35 Years / Male
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

Collected : 25-Mar-2023 / 09:16
Reported : 25-Mar-2023 / 17:41

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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>
<u>RBC PARAMETERS</u>			
Haemoglobin	13.4	13.0-17.0 g/dL	Spectrophotometric
RBC	4.81	4.5-5.5 mil/cmm	Elect. Impedance
PCV	43.0	40-50 %	Measured
MCV	90	80-100 fl	Calculated
MCH	27.9	27-32 pg	Calculated
MCHC	31.1	31.5-34.5 g/dL	Calculated
RDW	14.2	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	5610	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	37.8	20-40 %	
Absolute Lymphocytes	2120.6	1000-3000 /cmm	Calculated
Monocytes	7.9	2-10 %	
Absolute Monocytes	443.2	200-1000 /cmm	Calculated
Neutrophils	48.6	40-80 %	
Absolute Neutrophils	2726.5	2000-7000 /cmm	Calculated
Eosinophils	5.0	1-6 %	
Absolute Eosinophils	280.5	20-500 /cmm	Calculated
Basophils	0.7	0.1-2 %	
Absolute Basophils	39.3	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	151000(Manual method)	150000-400000 /cmm	Elect. Impedance
MPV	14.9	6-11 fl	Calculated
PDW	36.0	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			



CID : 2308421494
Name : MR.SOUMYADEEP MALLIK
Age / Gender : 35 Years / Male
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Reg. Location : Kandivali East (Main Centre)

Collected : 25-Mar-2023 / 09:16
Reported : 25-Mar-2023 / 15:08

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Hypochromia	-
Microcytosis	-
Macrocytosis	-
Anisocytosis	-
Poikilocytosis	-
Polychromasia	-
Target Cells	-
Basophilic Stippling	-
Normoblasts	-
Others	Normocytic, Normochromic
WBC MORPHOLOGY	-
PLATELET MORPHOLOGY	Megaplatelets seen on smear
COMMENT	-

Result rechecked
Kindly correlate clinically.

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR 11 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



CID : 2308421494
Name : MR.SOUMYADEEP MALLIK
Age / Gender : 35 Years / Male
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

Use a QR Code Scanner
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Collected : 25-Mar-2023 / 09:16
Reported : 25-Mar-2023 / 14:05

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	85.8	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	80.0	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.85	0.3-1.2 mg/dl	Vanadate oxidation
BILIRUBIN (DIRECT), Serum	0.30	0-0.3 mg/dl	Vanadate oxidation
BILIRUBIN (INDIRECT), Serum	0.55	<1.2 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.3	5.7-8.2 g/dL	Biuret
ALBUMIN, Serum	4.6	3.2-4.8 g/dL	BCG
GLOBULIN, Serum	2.7	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.7	1 - 2	Calculated
SGOT (AST), Serum	17.7	<34 U/L	Modified IFCC
SGPT (ALT), Serum	25.6	10-49 U/L	Modified IFCC
GAMMA GT, Serum	7.0	<73 U/L	Modified IFCC
ALKALINE PHOSPHATASE, Serum	91.9	46-116 U/L	Modified IFCC
BLOOD UREA, Serum	24.2	19.29-49.28 mg/dl	Calculated
BUN, Serum	11.3	9.0-23.0 mg/dl	Urease with GLDH
CREATININE, Serum	0.93	0.60-1.10 mg/dl	Enzymatic



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Reg. Location : Kandivali East (Main Centre)

Collected : 25-Mar-2023 / 14:22
Reported : 25-Mar-2023 / 23:36

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eGFR, Serum	98	>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	6.1	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
*** End Of Report ***

Bmhasakar

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





CID : 2308421494
Name : MR.SOUMYADEEP MALLIK
Age / Gender : 35 Years / Male
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Reg. Location : Kandivali East (Main Centre)

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Collected : 25-Mar-2023 / 09:16
Reported : 25-Mar-2023 / 15:55

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	5.0	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	96.8	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 ***



Namrata

Dr.NAMRATA RAUL
M.D (Biochem)
Biochemist



CID : 2308421494
Name : MR.SOUMYADEEP MALLIK
Age / Gender : 35 Years / Male
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

Collected : 25-Mar-2023 / 09:16
Reported : 25-Mar-2023 / 19:19

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
URINE EXAMINATION REPORT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
<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)	30	-	-
<u>CHEMICAL EXAMINATION</u>			
Proteins	Trace	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	6-8	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

NR Jain

Dr.VIPUL JAIN
M.D. (PATH)
Pathologist



MC-2111



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CID : 2308421494
Name : MR.SOUMYADEEP MALLIK
Age / Gender : 35 Years / Male
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

Collected :
Reported :

*** End Of Report ***



CID : 2308421494
Name : MR.SOUMYADEEP MALLIK
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Consulting Dr. : -
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	161.8	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	79.0	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	31.9	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Elimination/ Catalase
NON HDL CHOLESTEROL, Serum	129.9	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	114.1	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	15.8	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	5.1	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	3.6	0-3.5 Ratio	Calculated

*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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Age / Gender : 35 Years / Male
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Collected : 25-Mar-2023 / 09:16
Reported : 25-Mar-2023 / 14:06

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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	5.3	3.5-6.5 pmol/L	CLIA
Free T4, Serum	14.3	11.5-22.7 pmol/L	CLIA
sensitiveTSH, Serum	3.924	0.55-4.78 microIU/ml	CLIA



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Collected : 25-Mar-2023 / 09:16
Reported : 25-Mar-2023 / 14:06

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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 ***

Anupa

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

