



CID : 2330119013  
Name : MR.TADAVI VASIM ISMAIL  
Age / Gender : 30 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Collected : 28-Oct-2023 / 08:16  
Reported : 28-Oct-2023 / 11:31

Use a QR Code Scanner  
Application To Scan the Code

**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	5.51	4.5-5.5 mil/cmm	Elect. Impedance
PCV	43.2	40-50 %	Measured
MCV	78	80-100 fl	Calculated
MCH	26.5	27-32 pg	Calculated
MCHC	33.8	31.5-34.5 g/dL	Calculated
RDW	15.4	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	7320	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	27.9	20-40 %	
Absolute Lymphocytes	2042.3	1000-3000 /cmm	Calculated
Monocytes	7.1	2-10 %	
Absolute Monocytes	519.7	200-1000 /cmm	Calculated
Neutrophils	63.0	40-80 %	
Absolute Neutrophils	4611.6	2000-7000 /cmm	Calculated
Eosinophils	1.4	1-6 %	
Absolute Eosinophils	102.5	20-500 /cmm	Calculated
Basophils	0.6	0.1-2 %	
Absolute Basophils	43.9	20-100 /cmm	Calculated
Immature Leukocytes	-		

WBC Differential Count by Absorbance & Impedance method/Microscopy.

**PLATELET PARAMETERS**

Platelet Count	233000	150000-400000 /cmm	Elect. Impedance
MPV	8.1	6-11 fl	Calculated
PDW	13.6	11-18 %	Calculated

**RBC MORPHOLOGY**

Hypochromia	Mild
Microcytosis	Occasional



CID : 2330119013  
Name : MR.TADAVI VASIM ISMAIL  
Age / Gender : 30 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Collected : 28-Oct-2023 / 08:16  
Reported : 28-Oct-2023 / 11:36

Use a QR Code Scanner  
Application To Scan the Code

Macrocytosis -  
Anisocytosis -  
Poikilocytosis -  
Polychromasia -  
Target Cells -  
Basophilic Stippling -  
Normoblasts -  
Others -  
WBC MORPHOLOGY -  
PLATELET MORPHOLOGY -  
COMMENT -

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR 3 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** : 2330119013  
**Name** : MR.TADAVI VASIM ISMAIL  
**Age / Gender** : 30 Years / Male  
**Consulting Dr.** : -  
**Reg. Location** : Borivali West (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code  
**Collected** : 28-Oct-2023 / 08:16  
**Reported** : 28-Oct-2023 / 11:14

**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	103.3	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	120.9	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.64	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.24	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.40	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.9	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.6	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.3	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	2	1 - 2	Calculated
SGOT (AST), Serum	18.6	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	23.7	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	29.7	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	75.0	40-130 U/L	Colorimetric
BLOOD UREA, Serum	19.1	12.8-42.8 mg/dl	Kinetic
BUN, Serum	8.9	6-20 mg/dl	Calculated
CREATININE, Serum	1.14	0.67-1.17 mg/dl	Enzymatic



Use a QR Code Scanner  
Application To Scan the Code

CID : 2330119013  
Name : MR.TADAVI VASIM ISMAIL  
Age / Gender : 30 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Collected : 28-Oct-2023 / 13:08  
Reported : 28-Oct-2023 / 20:40

eGFR, Serum	<b>89</b>	(ml/min/1.73sqm)	Calculated
		Normal or High: Above 90	
		Mild decrease: 60-89	
		Mild to moderate decrease: 45-59	
		Moderate to severe decrease: 30-44	
		Severe decrease: 15-29	
		Kidney failure: <15	

Note: eGFR estimation is calculated using 2021 CKD-EPI GFR equation w.e.f 16-08-2023

URIC ACID, Serum	<b>8.7</b>	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 \*\*\*



MC-2111



*Bmhasakar*

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



CID : 2330119013  
Name : MR.TADAVI VASIM ISMAIL  
Age / Gender : 30 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code  
Collected : 28-Oct-2023 / 08:16  
Reported : 28-Oct-2023 / 12:30

**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	6.3	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	134.1	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 \*\*\*



*Bmhasakar*

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



CID : 2330119013  
Name : MR.TADAVI VASIM ISMAIL  
Age / Gender : 30 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code  
Collected : 28-Oct-2023 / 08:16  
Reported : 28-Oct-2023 / 13:43

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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.005	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	30	-	-
<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	3-4	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 inert

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



MC-2111

*Bmhasakar*

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



CID : 2330119013  
Name : MR.TADAVI VASIM ISMAIL  
Age / Gender : 30 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner Application To Scan the Code  
Collected : 28-Oct-2023 / 08:16  
Reported : 28-Oct-2023 / 15:08

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

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	B
Rh TYPING	Negative

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. Vrushi Shroff*

**Dr.VRUSHALI SHROFF**  
**M.D.(PATH)**  
**Pathologist**



CID : 2330119013  
Name : MR.TADAVI VASIM ISMAIL  
Age / Gender : 30 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner Application To Scan the Code  
Collected : 28-Oct-2023 / 08:16  
Reported : 28-Oct-2023 / 11:14

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	186.1	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	121.3	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	40.1	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	146.0	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	122.0	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	24.0	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.6	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	3.0	0-3.5 Ratio	Calculated

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



MC-2111

*Bmhasakar*

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





CID : 2330119013  
Name : MR.TADAVI VASIM ISMAIL  
Age / Gender : 30 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner Application To Scan the Code  
Collected : 28-Oct-2023 / 08:16  
Reported : 28-Oct-2023 / 12:22

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**THYROID FUNCTION TESTS**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Free T3, Serum	6.1	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	20.6	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	3.71	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)



MC-2111

*Bmhasakar*

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



Use a QR Code Scanner  
Application To Scan the Code

**CID** : 2330119013  
**Name** : MR.TADAVI VASIM ISMAIL  
**Age / Gender** : 30 Years / Male  
**Consulting Dr.** : -  
**Reg. Location** : Borivali West (Main Centre)

**Collected** : 28-Oct-2023 / 08:16  
**Reported** : 28-Oct-2023 / 12:22

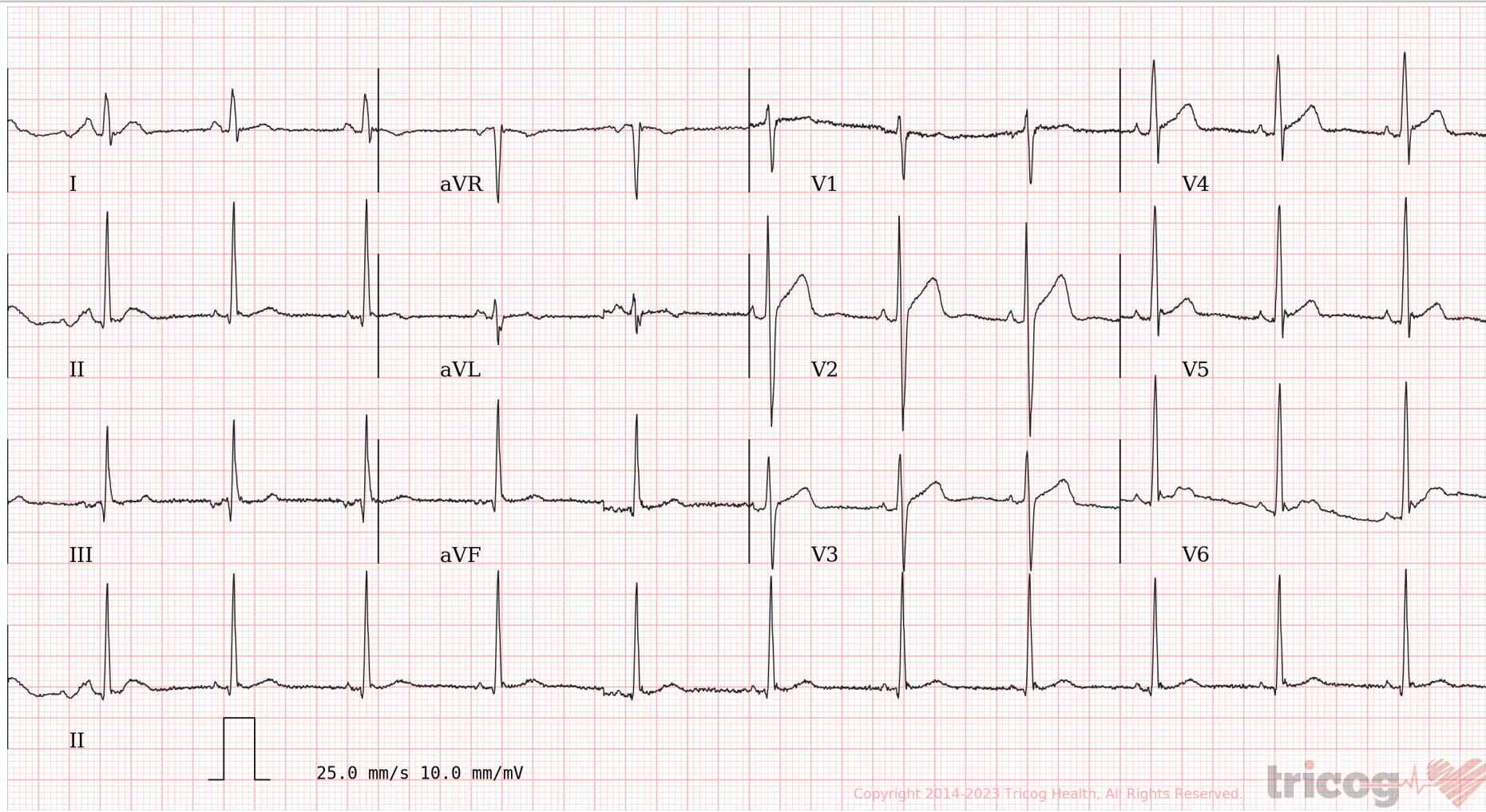
\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West  
\*\*\* End Of Report \*\*\*

# SUBURBAN DIAGNOSTICS - BORIVALI WEST

Patient Name: TADAVI VASIM ISMAIL

Date and Time: 28th Oct 23 8:50 AM

Patient ID: 2330119013



Age **30** NA NA  
years months days

Gender **Male**

Heart Rate **71bpm**

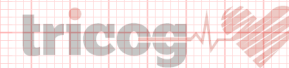
### Patient Vitals

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

### Measurements

QRSD: 90ms  
QT: 342ms  
QTcB: 372ms  
PR: 122ms  
P-R-T: -4° 67° 45°

Copyright 2014-2023 Tricog Health, All Rights Reserved.



Sinus Rhythm.LVH by voltage noted. Adv.2d Echo. Please correlate clinically.

REPORTED BY

Dr Nitin Sonavane  
M.B.B.S.AFLH, D.DIAB,D.CARD  
Consultant Cardiologist  
87714

Issue Date: 15/10/2011



भारत सरकार  
Government of India

वसिम इस्माईल तदवी  
Vasim Ismail Tadavi  
जन्म तारीख/DOB: 06/04/1993  
लिंग/ MALE  
Mobile No: 9028291847

9730 5758 1823  
VID : 9148 7712 2887 7076

मेरा आधार, मेरी पहचान

AB

Suburban Diagnostics (I) Pvt. Ltd.  
301& 302, 3rd Floor, Vni Elegance,  
Above Tanisq Jeweller, L. T. Road,  
Borivalli (West), Mumbai - 400 092.

9/8/10/2011

Name : Mr. TADAVI VASIM ISMAIL  
VID : 2330119013  
Ref By : Arcofemi Healthcare Limited

Reg Date : 28-Oct-2023 08:12  
Age/Gender : 30 Years  
Regn Centre : Borivali West (Main Centre)

**History and Complaints:**

Nil

**EXAMINATION FINDINGS:**

Height (cms):	172	Weight (kg):	71
Temp (0c):	Afebrile	Skin:	NAD
Blood Pressure (mm/hg):	120/80	Nails:	NAD
Pulse:	76/min	Lymph Node:	Not Palpable

**Systems**

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

**IMPRESSION:**

*Wii acid +  
VIB | physician refn.*

**ADVICE:**

*TMT  
ECG advi. 2nd Ectro } Cardiologist refn.*

**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 |

Name : Mr. TADAVI VASIM ISMAIL  
VID : 2330119013  
Ref By : Arcofemi Healthcare Limited

Reg Date : 28-Oct-2023 08:12  
Age/Gender : 30 Years  
Regn Centre : Borivali West (Main Centre)

**PERSONAL HISTORY:**

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

**DR. NITIN SONAVANE**  
M.B.S.AFLH. BOARD.  
CONSULTANT-CARDIOLOGIST  
REGD. NO. : 87714

  
Dr. Nitin Sonavane  
PHYSICIAN

**Suburban Diagnostics (I) Pvt. Ltd.**  
301 & 302, 3rd Floor, Vini Elegance  
Above Tanishq Jeweller, L. T. Road  
Borivali (West), Mumbai - 400 092.

Date:-

CID: 2330119013

Name:- *Tadavi. vasim*

Sex / Age: *M / 30*

**EYE CHECK UP**

Chief complaints:

Systemic Diseases:

Past history:

Unaided Vision:

Aided Vision:

Refraction:

*NO*

*RE LE*  
*G/G G/G*  
*M/G H/G*

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / Abnormal

Remark: *Normal*

*J*

**DR. NITIN SONAVANE**  
M.B.B.S.AFLH, D.DJAB, D.C.A.  
CONSULTANT-CARDIOLOGIST  
REGD. NO. : 87714

Suburban Diagnostics (I) Pvt. Ltd.  
301& 302, 3rd Floor, *Manance*  
Above Tanisq, *Manance* Road,  
Borivali (West), Mumbai - 400 092.

**SUBURBAN DIANOSTICS PVT. LTD. BORIVALI**

Date: 28-10-2023 Time: 09:25

Name: VASIM TADVI

Age: 30 Gender: M Height: 172 cms Weight: 71 Kg ID: 2330119013

Clinical History: NIL

Medications: NIL

**Test Details:**

Protocol: Bruce

Predicted Max HR: 190

Target HR: 161 (85% of Pr. MHR)

Exercise Time: 0:07:37

Achieved Max HR: 163 (86% of Pr. MHR)

Max BP: 170/80

Max BP x HR: 27710

Max Mets: 8.5

Test Termination Criteria: TEST COMPLET

**Protocol Details:**

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	Max ST Level mm	Max ST Slope mV/s
Supine	00:43	1	0	0	74	120/80	8880	2 V2	-4.1 III
Standing	00:13	1	0	0	73	120/80	8760	1.7 V2	-4.2 III
HyperVentilation	00:12	1	0	0	67	120/80	8040	1.5 V2	-3.7 III
PreTest	00:10	1	1.6	0	81	120/80	9720	1.2 V2	-3.3 III
Stage: 1	03:00	4.7	2.7	10	124	120/80	14880	1.5 V2	-4.6 III
Stage: 2	03:00	7	4	12	145	140/80	20300	-2 V5	-4.5 III
Peak Exercise	01:37	8.5	5.5	14	163	150/80	24450	-2.3 V4	-4.5 III
Recovery1	01:00	1	0	0	122	170/80	20740	-1.4 III	-5.3 III
Recovery2	01:00	1	0	0	105	150/80	15750	-1 III	-5.2 III
Recovery3	01:00	1	0	0	97	130/80	12610	-0.9 III	-5.2 III
Recovery4	01:00	1	0	0	98	130/80	12740	-0.9 III	-5.7 III
Recovery5	00:20	1	0	0	100	120/80	12000	1 V2	-4.8 III

**Interpretation**

The Patient Exercised according to Bruce Protocol for 0:07:37 achieving a work level of 8.5 METS.  
Resting Heart Rate, initially 74 bpm rose to a max. heart rate of 163bpm (86% of Predicted Maximum Heart Rate).  
Resting Blood Pressure of 120/80 mmHg, rose to a maximum Blood Pressure of 170/80 mmHg  
Good Effort tolerance Normal HR & BP Response No Angina or Arrhymias  
ST-T Depression in inferior lateral lead Noted During Exercise  
Stress test positive for Stress inducible ischaemia.  
adv. cardiologist ref.

**Suburban Diagnostics (I) Pvt. Ltd.**  
301& 302, 3rd Floor, Vini Elegance  
Above Yashraj Junction, L. T. Road,  
Borivali (West), Mumbai - 400 092.

Ref. Doctor: ----

Doctor: DR. NITIN SONAVANE

( Summary Report edited by User )  
Cardiovit CS-20 Version:3.4

**SCHILLER**  
The Art of Diagnostics

**DR. NITIN SONAVANE**  
M.B.B.S. (GEN. MED.)  
CONSULTANT  
REGD. NO. 67714



# SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

**VASIM TADVI (30 M)**

Bruce Protocol  
STLevel(mm) STSlope(mV/s)

ID: 2330119013  
Stage: Supine

Date: 28-10-2023  
Speed: 0 km/h

Exec Time : 0:00:00  
Slope: 0%

Stage Time: 00:43  
THR: 161 bpm

**HR: 74 bpm**

Bp: 120/80 mmHg  
STLevel(mm) STSlope(mV/s)

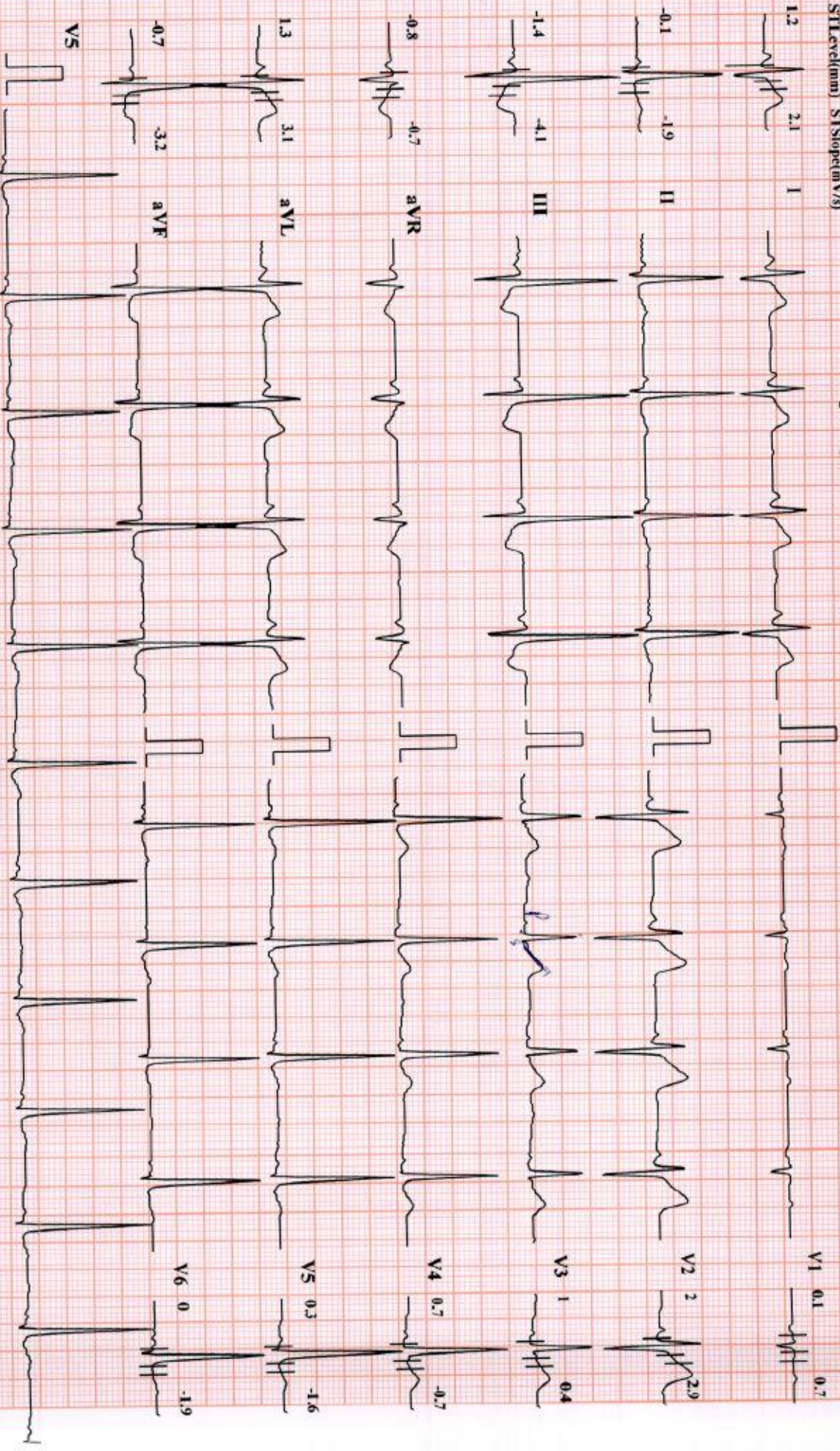


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



# SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

**VASIM TADVI (30 M)**

Bruce Protocol  
STLevel(mm) STSlope(mV/s)

ID: 2330119013  
Stage: Standing

Date: 28-10-2023  
Speed: 0

Exec Time: 0:00:00  
Slope: 0 %

Stage Time: 00:13  
THR: 161 bpm

**HR: 73 bpm**

BP: 120/80 mmHg  
STLevel(mm) STSlope(mV/s)

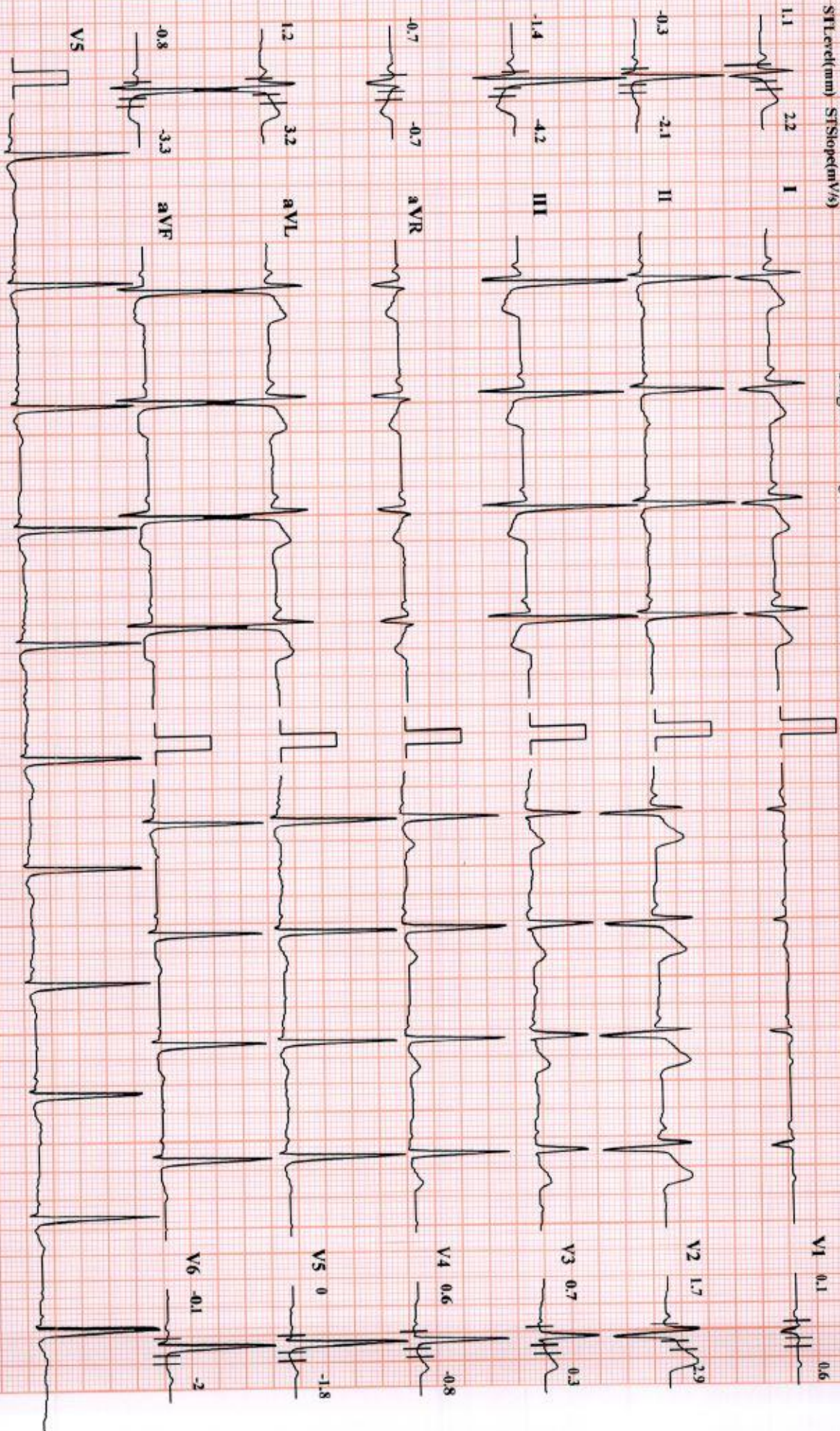


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



# SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

**VASIM TADVI (30 M)**

**HR: 67 bpm**

Brace Protocol  
STLevel(mV) STSlope(mV/s)

ID: 2330119013  
Date: 28-10-2023  
Stage: HyperVentilation  
Speed: 0

Exec Time : 0:00:00  
Slope: 0 %  
Stage Time: 00:12  
THR: 161 bpm

BP: 120/80 mmHg  
STLevel(mV) STSlope(mV/s)

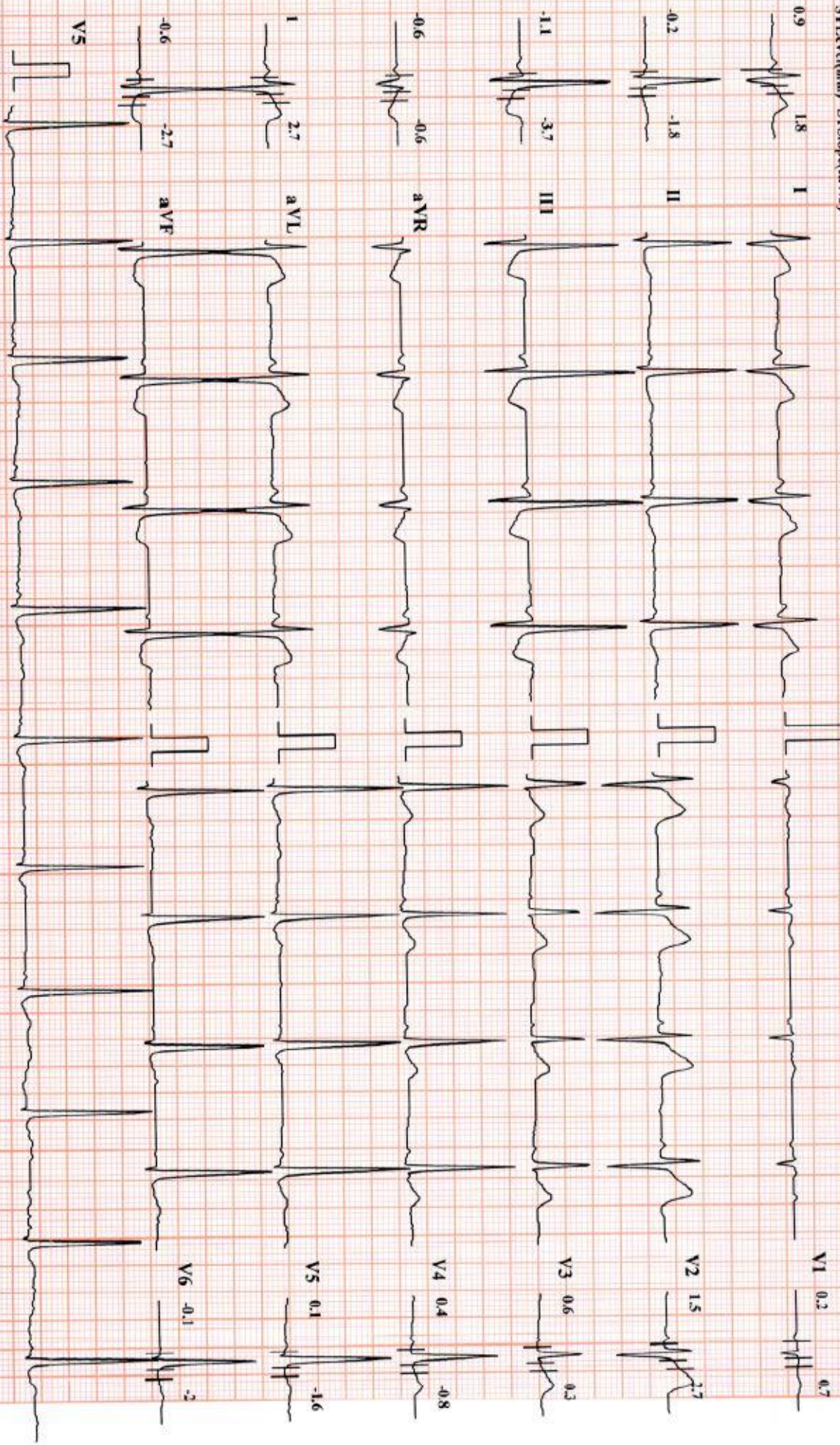


Chart Speed: 25 mm/Sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms

# SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

**VASIM TADVI (30 M)**

**HR: 124 bpm**

Bruce Protocol  
STLevel(mm) STSlope(mV/s)

ID: 2330119013  
Stage: 1

Date: 28-10-2023  
Speed: 2.7 kmph

Exec Time : 0:03:00  
Slope: 10 %

Stage Time: 03:00  
THR: 161 bpm

BP: 120/80 mmHg  
STLevel(mm) STSlope(mV/s)

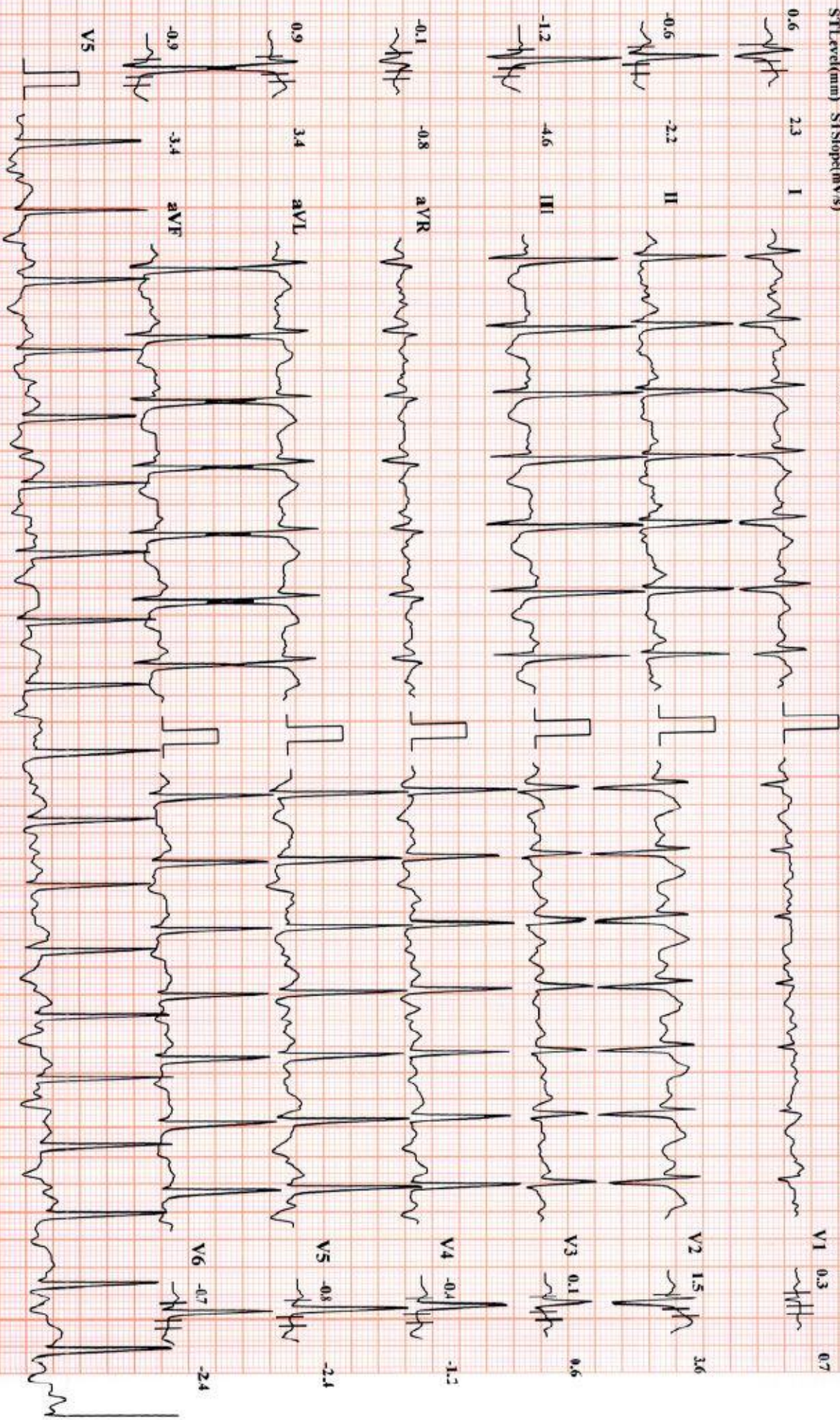


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO + R - 60 ms, J - R + 60 ms, Post J = J + 60 ms



# SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

**VASIM TADVI (30 M)**

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 2330119013

Date: 28-10-2023

Exec Time : 0:06:00

Stage Time: 03:00

**HR: 145 bpm**

BP: 140/80 mmHg

STLevel(mm) STSlope(mV/s)

Stage: 2

Speed: 4 kmph

Slope: 12 %

THR: 161 bpm

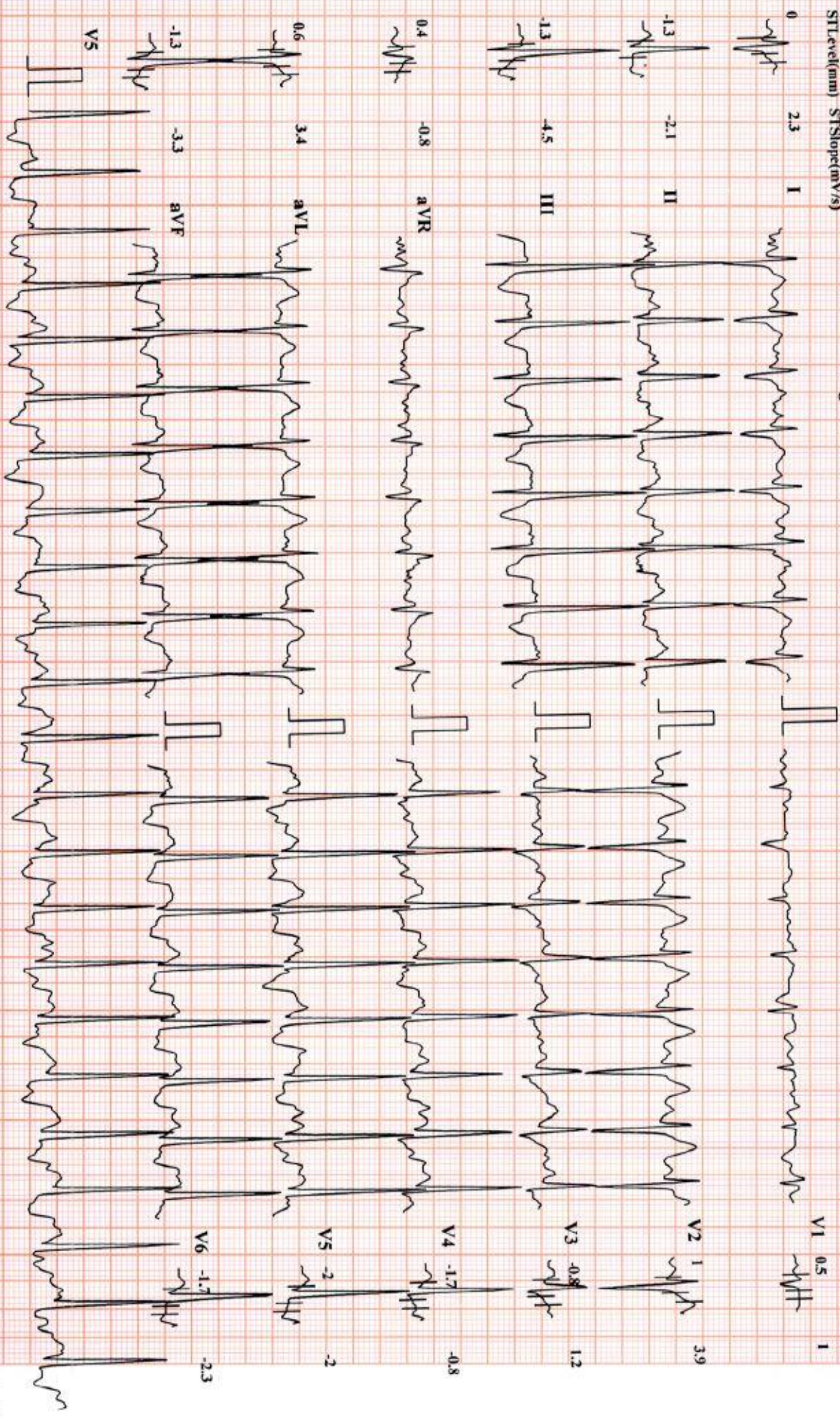


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R · 60 ms, J = R + 60 ms, Post J = J + 50 ms

Schiller Cardioit CS-20 Version:3.4



**VASIM TADVI (30 M)**

Bruce Protocol

STLevel(mm) STSlope(mV/s)

**SUBURBAN DIANOSTICS PVT. LTD. BORIVALI**

ID: 2330119013

Stage: 3 Peak Exercise

Date: 28-10-2023

Speed: 5.5 kmph

Exec Time : 0:07:37

Slope: 14 %

Stage Time: 01:37

THR: 161 bpm

**HR: 163 bpm**

BP: 150/80 mmHg

STLevel(mm) STSlope(mV/s)

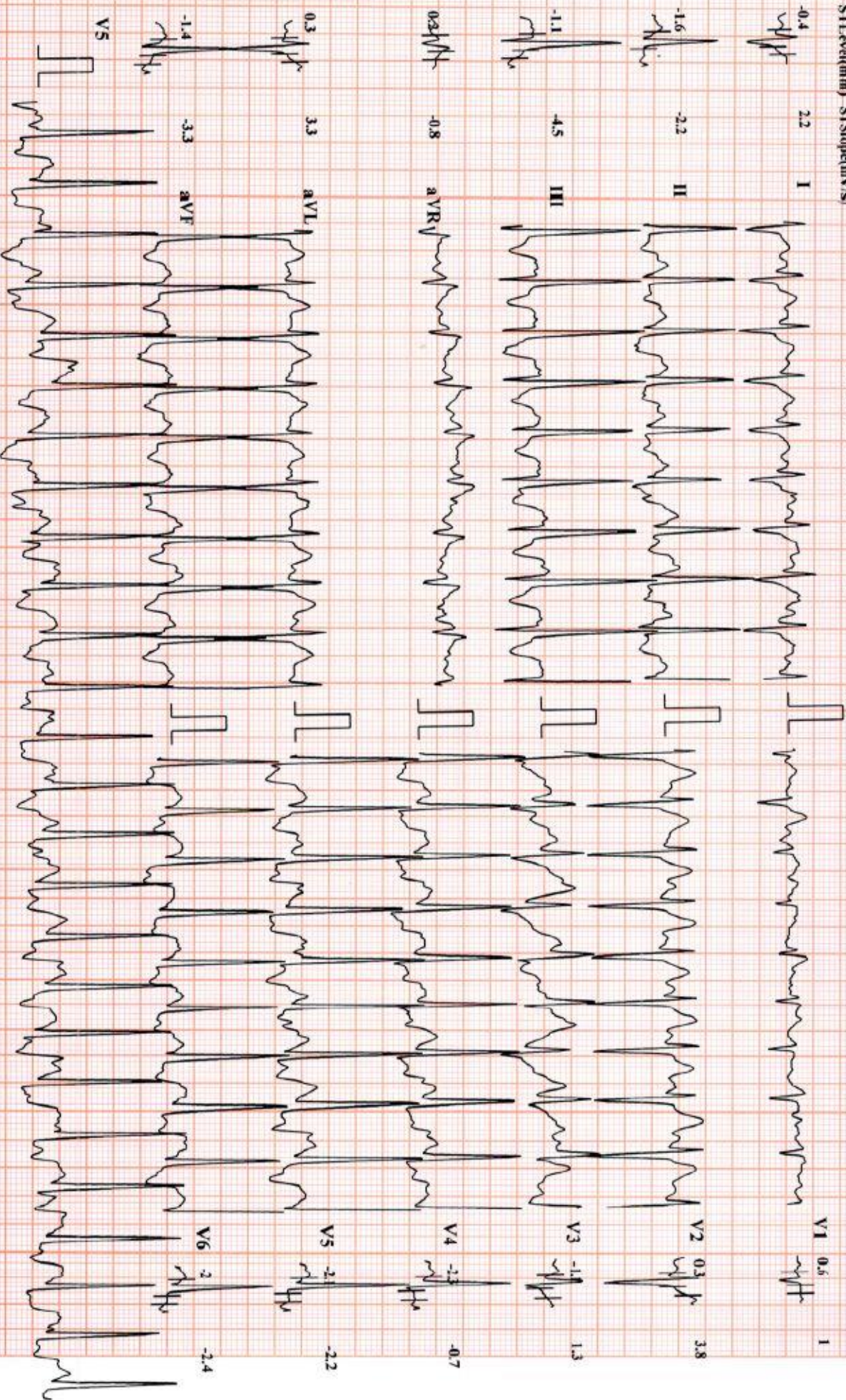


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



**VASIM TADVI (30 M)**

Bruce Protocol

STLevel(mm) STSlope(mV/s)

**SUBURBAN DIANOSTICS PVT. LTD. BORIVALI**

**HR: 122 bpm**

ID: 2330119013  
Stage: Recovery1

Date: 28-10-2023  
Speed: 0 kmph

Exec Time : 00:00  
Slope: 0 %

Stage Time: 01:30  
THR: 161 bpm

BP: 170/80 mmHg  
STLevel(mm) STSlope(mV/s)

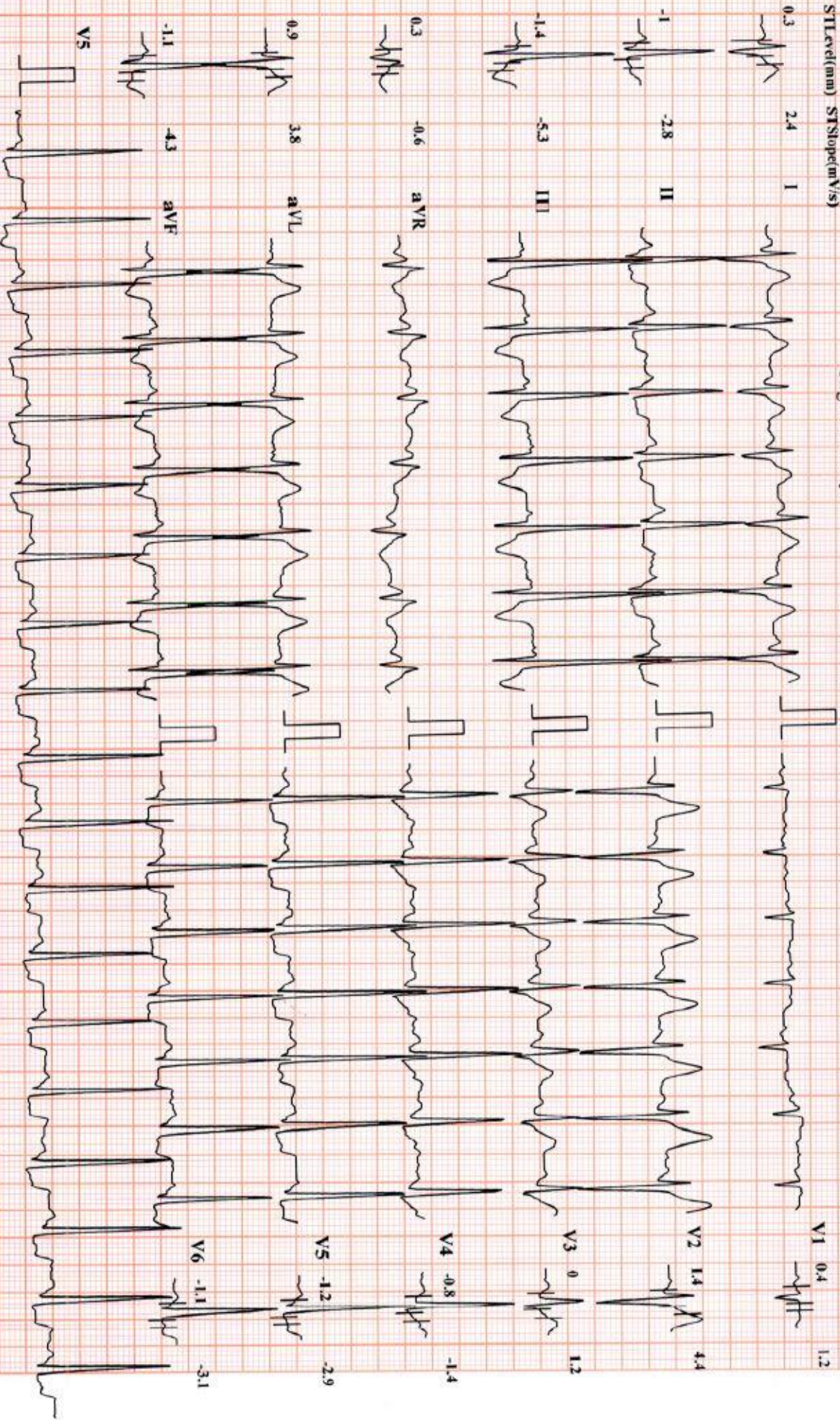


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



**VASIM TADVI (30 M)**

Bruce Protocol

STLevel(mm) STSlope(mV/s)

**SUBURBAN DIANOSTICS PVT. LTD. BORIVALI**

ID: 2330119013

Stage: Recovery2

Date: 28-10-2023

Speed: 0 kmph

Exec Time : 00:00

Slope: 0 %

Stage Time: 01:00

THR: 161 bpm

**HR: 105 bpm**

BP: 150/80 mmHg

STLevel(mm) STSlope(mV/s)

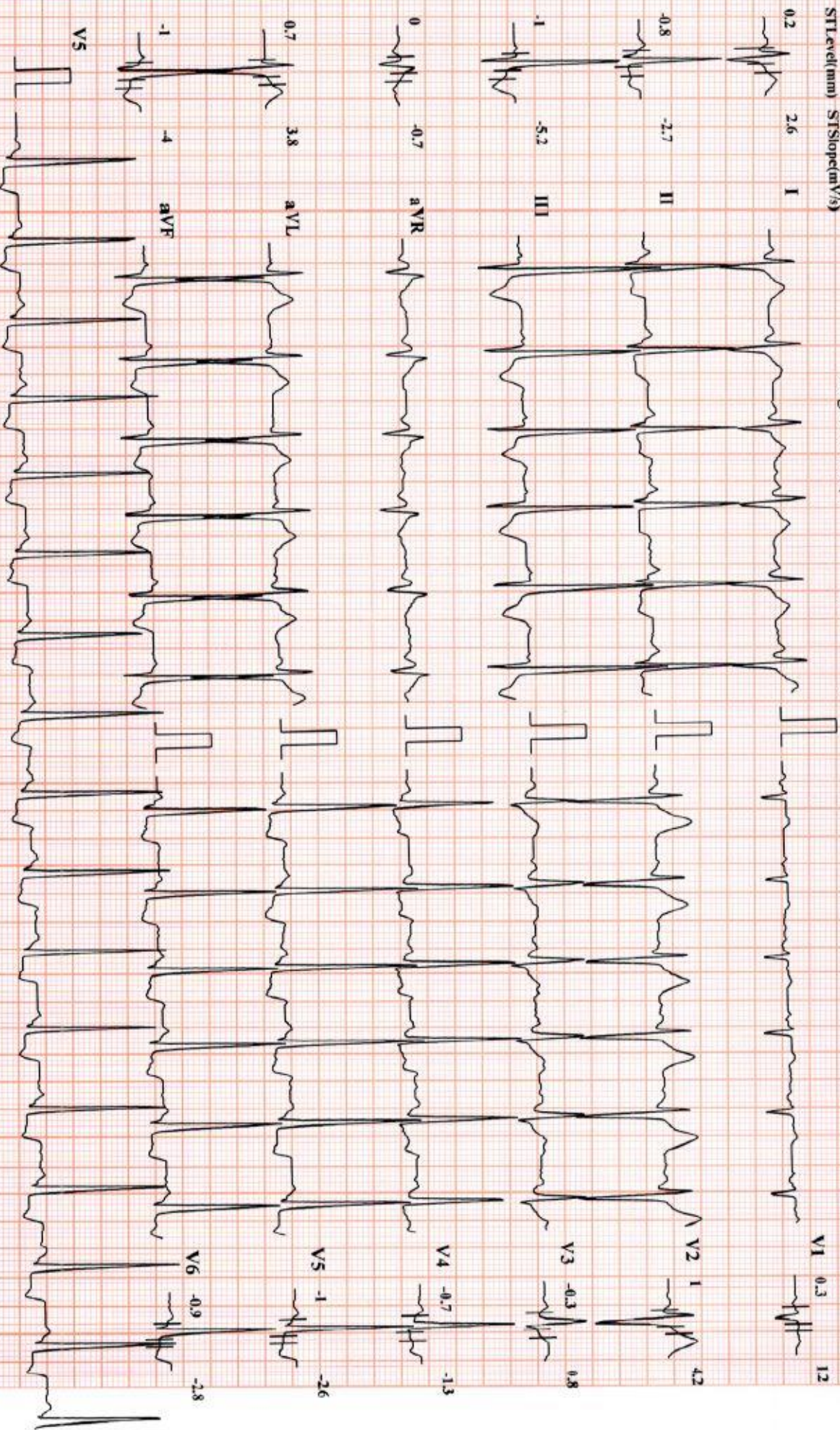


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J - R + 60 ms, Post J = J + 60 ms



# SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

**VASIM TADVI (30 M)**

**HR: 97 bpm**

Bruce Protocol  
STLevel(mm) STSlope(mV/s)

ID: 2330119013  
Stage: Recovery<sup>3</sup>

Date: 28-10-2023  
Speed: 0 kmph

Exec Time : 00:00  
Slope: 0%

Stage Time: 01:00  
THR: 161 bpm

BP: 130/80 mmHg  
STLevel(mm) STSlope(mV/s)

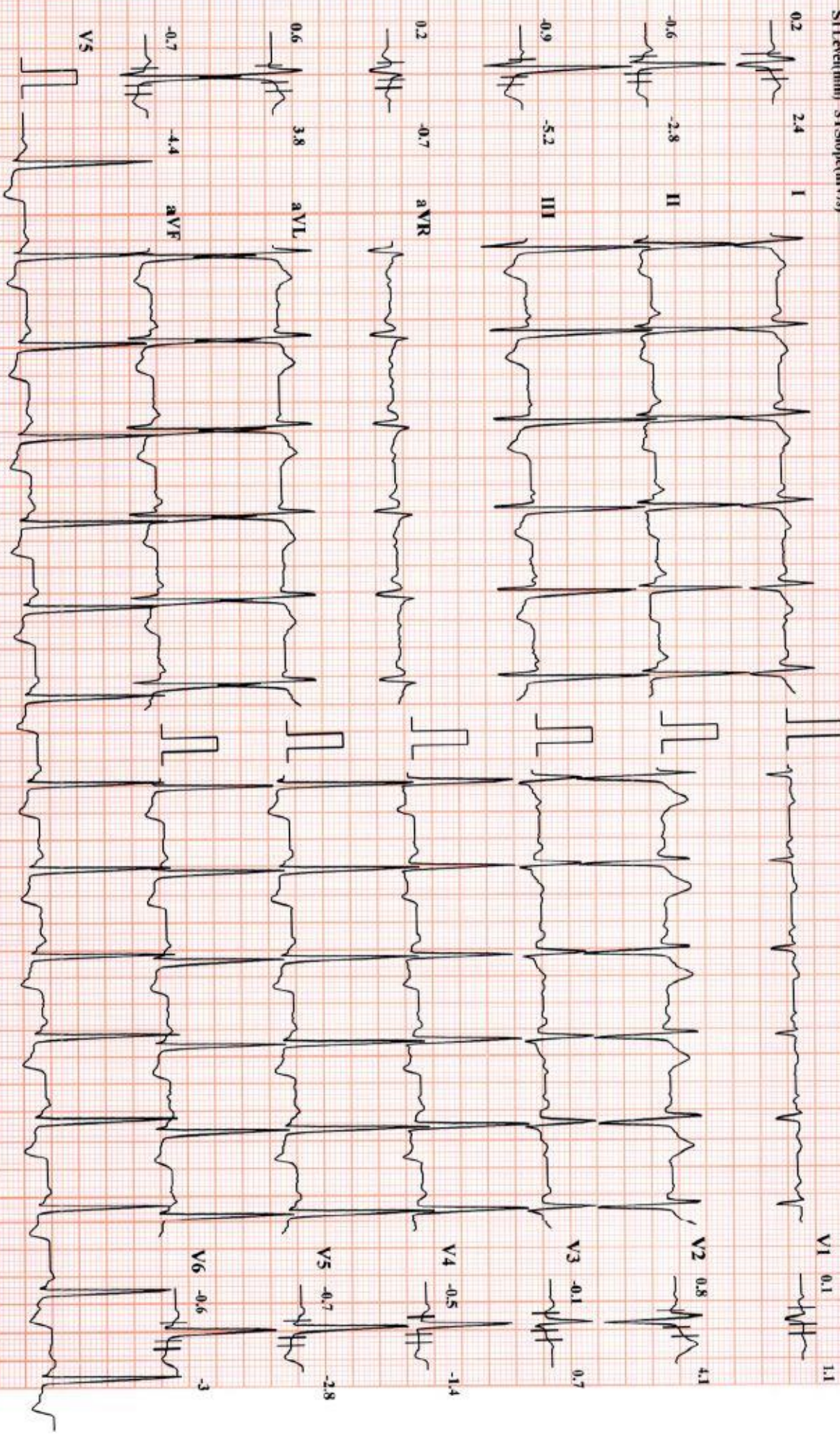


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



# SUBURBAN DIAGNOSTICS PVT. LTD. BORIVALI

**VASIM TADVI (30 M)**

Bruce Protocol

STLevel(mm) STSlope(mV/s)

**HR: 98 bpm**

BP: 130/80 mmHg

STLevel(mm) STSlope(mV/s)

ID: 2330119013

Stage: Recovery<sup>4</sup>

Date: 28-10-2023

Speed: 0 kmph

Exec Time : 00:00

Slope: 0%

Stage Time: 01:00

THR: 161 bpm

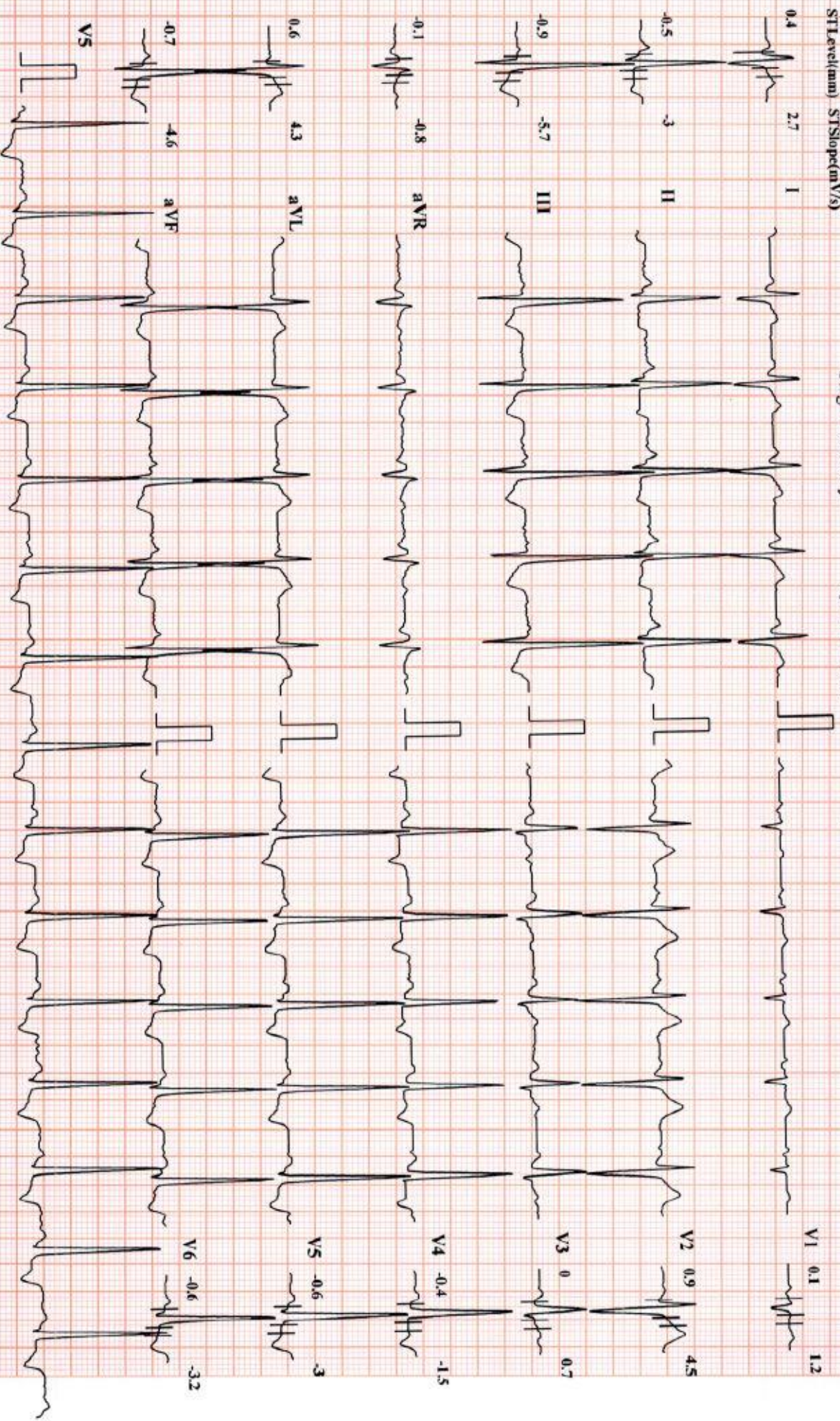


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



# SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

**VASIM TADVI (30 M)**

Bruce Protocol  
STLevel(mm) STSlope(mV/s)

ID: 2330119013  
Stage: Recovery5

Date: 28-10-2023  
Speed: 0 kmph

Exec Time: 00:00  
Slope: 0%

Stage Time: 00:15  
THR: 161 bpm

**HR: 98 bpm**

BP: 120/80 mmHg  
STLevel(mm) STSlope(mV/s)

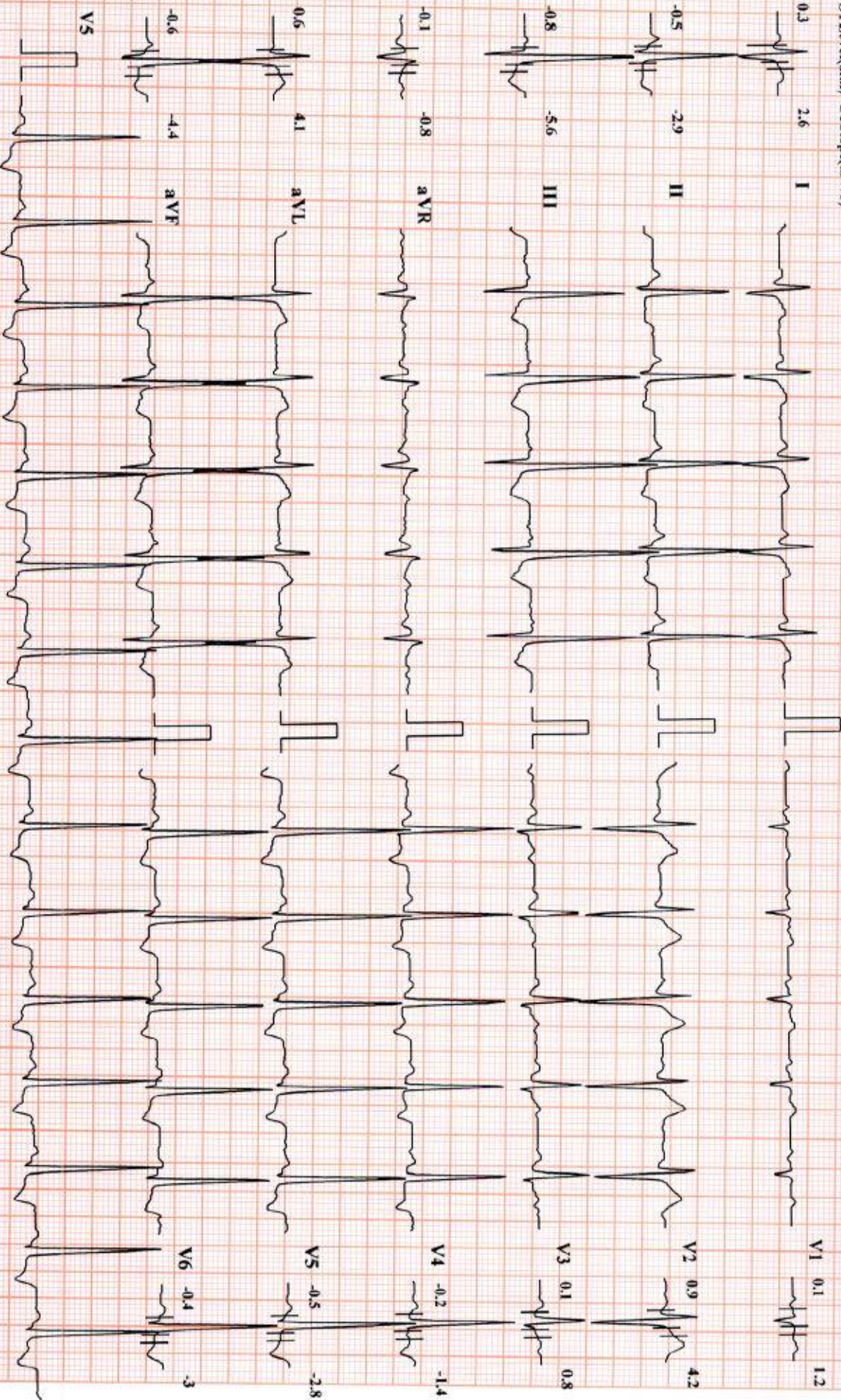


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



Use a QR Code Scanner  
Application To Scan the Code

**CID** : 2330119013  
**Name** : Mr TADAVI VASIM ISMAIL  
**Age / Sex** : 30 Years/Male  
**Ref. Dr** :  
**Reg. Location** : Borivali West  
**Reg. Date** : 28-Oct-2023  
**Reported** : 28-Oct-2023 / 10:45

---

## USG WHOLE ABDOMEN

**LIVER:** Liver is normal in size 13.7 cm with mild generalized increase in parenchymal echotexture. There is no intra-hepatic biliary radical dilatation.No evidence of any focal lesion.

**GALL BLADDER:** Gall bladder is distended and appears normal. No obvious wall thickening is noted. There is no evidence of any calculus.

**PORTAL VEIN:** Portal vein is 9.4 mm normal. **CBD:** CBD is 3.3 mm normal.

**PANCREAS:** Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification.

**KIDNEYS:** Right kidney measures 9.7 x 4.0 cm. Left kidney measures 9.9 x 4.3 cm. Both kidneys are normal in shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

**SPLEEN:** Spleen is normal in size 9.5 cm , shape and echotexture. No focal lesion is seen.

**URINARY BLADDER:** Urinary bladder is distended and normal. Wall thickness is within normal limits.

**PROSTATE:** Prostate is normal in size and echotexture. Prostate measures 3.7 x 3.2 x 4.0 cm and prostatic weight is 26.2 gm. No evidence of any obvious focal lesion.

No free fluid or size significant lymphadenopathy is seen.



Use a QR Code Scanner  
Application To Scan the Code

CID : 2330119013  
Name : Mr TADAVI VASIM ISMAIL  
Age / Sex : 30 Years/Male  
Ref. Dr :  
Reg. Location : Borivali West  
Reg. Date : 28-Oct-2023  
Reported : 28-Oct-2023 / 10:45

---

**Opinion:**

**Grade I fatty infiltration of liver.**

*For clinical correlation and follow up.*

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. USG is known to have inter-observer variations. Further / Follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis. Patient was explained in detail verbally about the USG findings, USG measurements and its limitations. In case of any typographical error in the report, patient is requested to immediately contact the center for rectification within 7 days post which the center will not be responsible for any rectification. Please interpret accordingly.

DR.SUDHANSHU SAXENA  
Consultant Radiologist  
M.B.B.S DMRE (RadioDiagnosis)  
RegNo .MMC 2016061376.

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

DR.SUDHANSHU SAXENA  
Consultant Radiologist  
M.B.B.S DMRE (RadioDiagnosis)  
RegNo .MMC 2016061376.



Use a QR Code Scanner  
Application To Scan the Code

**CID** : 2330119013  
**Name** : Mr TADAVI VASIM ISMAIL  
**Age / Sex** : 30 Years/Male  
**Ref. Dr** :  
**Reg. Location** : Borivali West

**Reg. Date** : 28-Oct-2023  
**Reported** : 28-Oct-2023/11:53

**X-RAY CHEST PA VIEW**

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

**IMPRESSION:**

**NO SIGNIFICANT ABNORMALITY IS DETECTED.**

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

**DR.SUDHANSHU SAXENA**  
**Consultant Radiologist**  
**M.B.B.S DMRE (RadioDiagnosis)**  
**RegNo .MMC 2016061376.**



Use a QR Code Scanner  
Application To Scan the Code

**CID** : 2330119013  
**Name** : Mr TADAVI VASIM ISMAIL  
**Age / Sex** : 30 Years/Male  
**Ref. Dr** :  
**Reg. Location** : Borivali West

**Reg. Date** : 28-Oct-2023  
**Reported** : 28-Oct-2023/11:53