



भारत सरकार
Government of India



शिप्रा द्विवेदी
Kshipra Dwivedi
जन्म तिथि/DOB: 16/10/1990
लिंग/ GENDER: FEMALE

6416 6198 0154

VID: 9100 2351 6778 6339

भारत सरकार, नई दिल्ली



PHYSICAL EXAMINATION REPORT

Patient Name	<i>Keheya Sh</i>	Sex/Age	<i>F/31</i>
Date	<i>18/12/22</i>	Location	<i>There</i>

DW med

History and Complaints

N/C

EXAMINATION FINDINGS:

Height (cms):	<i>160</i>	Temp (0c):	<i>N</i>
Weight (kg):	<i>59.2</i>	Skin:	<i>N</i>
Blood Pressure	<i>110/80</i>	Nails:	<i>N</i>
Pulse	<i>90</i>	Lymph Node:	<i>N</i>

Systems :

Cardiovascular:	<i>Afibril no mur</i>
Respiratory:	<i>Clear</i>
Genitourinary:	<i>Normal</i>
GI System:	<i>Normal</i>
CNS:	<i>Normal</i>

Impression:

Raised non HDL & LDL cholesterol

ADDRESS: 2nd Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343

For Feedback - customerservice@suburbandiagnosics.com | www.suburbandiagnosics.com

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Advice: Regular exercise
Avoid, salt fatty food & sweets

1)	Hypertension:	
2)	IHD	
3)	Arrhythmia	
4)	Diabetes Mellitus	
5)	Tuberculosis	
6)	Asthama	
7)	Pulmonary Disease	
8)	Thyroid/ Endocrine disorders	
9)	Nervous disorders	
10)	GI system	
11)	Genital urinary disorder	
12)	Rheumatic joint diseases or symptoms	
13)	Blood disease or disorder	
14)	Cancer/lump growth/cyst	
15)	Congenital disease	
16)	Surgeries	
17)	Musculoskeletal System	

PERSONAL HISTORY:

1)	Alcohol	no
2)	Smoking	no
3)	Diet	veg
4)	Medication	no

DR KAVIN SHAH
MBBS D CARD
CARDIOLOGIST

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NAME: - *K. Shyama*

AGE / SEX :- *F / 31*

REGN NO :-

REF DR :-

GYNECOLOGICAL EXAMINATION REPORT

OBSERVED VALUE

TEST DONE

CHIEF COMPLAINTS :- *NIL*

MARITAL STATUS :- *married*

MENSTRUAL HISTORY :-

- MENARCHE :- *15yr*
- PRESENT MENSTRUAL HISTORY :- *2/28/regular*
- PAST MENSTRUAL HISTORY :- *2/28/regular*
- OBSTERIC HISTORY: - *NIL*
- PAST HISTORY :- *NIL*
- PREVIOUS SURGERIES :- *NIL*
- ALLERGIES :- *NIL*
- FAMILY HOSTORY :- *Good*

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• DRUG HISTORY :-

NIL

• BOWEL HABITS :-

N

• BLADDER HABITS :-

N

PERSONAL HISTORY :-

TEMPERATURE :-

N

RS :-

Imp clear

CVS :-

S7B7A normal

PULSE / MIN :-

60

BP (mm of hg):-

110/70

BREAST EXAMINATION:-

N

PER ABDOMEN :-

Lump

PRE VAGINAL:-

N

RECOMMENDATION :-

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Date: 18/1/22

CID:

Name: - Kshitija Divedi

Sex / Age: F. 31

EYE CHECK UP

Chief complaints: RCU

Systemic Diseases: Nil

Past history: Nil

Unaided Vision: R 12/90 L 12/6/8 NV 132 N/6

Aided Vision:

Refraction:

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / Abnormal

Remark:

Needs Spectacles for D.V

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CID : 2201811676
Name : MS.KSHIPRA DWIVEDI
Age / Gender : 31 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Use a QR Code Scanner Application To Scan the Code
Collected : 18-Jan-2022 / 15:59
Reported : 18-Jan-2022 / 16:45

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
BLOOD SUGAR REPORT**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	105.6	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***



Amit Taori
Dr.AMIT TAORI
M.D (Path)
Pathologist



CID : 2201811676
Name : MS.KSHIPRA DWIVEDI
Age / Gender : 31 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 18-Jan-2022 / 09:31
Reported : 18-Jan-2022 / 13:53

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Application To Scan the Code

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
URINE EXAMINATION REPORT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	Acidic (6.0)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.015	1.010-1.030	Chemical Indicator
Transparency	Slight hazy	Clear	-
Volume (ml)	30	-	-
CHEMICAL EXAMINATION			
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
MICROSCOPIC EXAMINATION			
Leukocytes(Pus cells)/hpf	5-6	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	4-5		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	6-8	Less than 20/hpf	

Kindly correlate clinically

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***



Amit Taori
Dr.AMIT TAORI
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Pathologist



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Age / Gender : 31 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 18-Jan-2022 / 09:31
Reported : 18-Jan-2022 / 11:25

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	14.0	12.0-15.0 g/dL	Spectrophotometric
RBC	4.75	3.8-4.8 mil/cmm	Elect. Impedance
PCV	42.7	36-46 %	Measured
MCV	90	80-100 fl	Calculated
MCH	29.5	27-32 pg	Calculated
MCHC	32.9	31.5-34.5 g/dL	Calculated
RDW	13.2	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	8000	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	31.7	20-40 %	
Absolute Lymphocytes	2536.0	1000-3000 /cmm	Calculated
Monocytes	5.4	2-10 %	
Absolute Monocytes	432.0	200-1000 /cmm	Calculated
Neutrophils	54.3	40-80 %	
Absolute Neutrophils	4344.0	2000-7000 /cmm	Calculated
Eosinophils	8.6	1-6 %	
Absolute Eosinophils	688.0	20-500 /cmm	Calculated
Basophils	0.0	0.1-2 %	
Absolute Basophils	0.0	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	250000	150000-400000 /cmm	Elect. Impedance
MPV	10.1	6-11 fl	Calculated
PDW	20.0	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			
Hypochromia	-		
Microcytosis	-		

Authenticity Check



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Collected : 18-Jan-2022 / 09:31
Reported : 18-Jan-2022 / 11:00

Macrocytosis	-
Anisocytosis	-
Poikilocytosis	-
Polychromasia	-
Target Cells	-
Basophilic Stippling	-
Normoblasts	-
Others	Normocytic, Normochromic
WBC MORPHOLOGY	-
PLATELET MORPHOLOGY	-
COMMENT	Eosinophilia

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR 16 2-20 mm at 1 hr. Westergren

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***



Amit Taori

Dr. AMIT TAORI
M.D (Path)
Pathologist



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Name : MS.KSHIPRA DWIVEDI
Age / Gender : 31 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 18-Jan-2022 / 09:31
Reported : 18-Jan-2022 / 11:57

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	92.1	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	105.6	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.43	0.1-1.2 mg/dl	Diazo
BILIRUBIN (DIRECT), Serum	0.2	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.23	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.4	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.6	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.8	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.6	1 - 2	Calculated
SGOT (AST), Serum	17.2	5-32 U/L	IFCC without pyridoxal phosphate activation
SGPT (ALT), Serum	13.0	5-33 U/L	IFCC without pyridoxal phosphate activation
GAMMA GT, Serum	21.6	3-40 U/L	IFCC
ALKALINE PHOSPHATASE, Serum	64.4	35-105 U/L	PNPP
BLOOD UREA, Serum	25.3	12.8-42.8 mg/dl	Urease & GLDH
BUN, Serum	11.8	6-20 mg/dl	Calculated
CREATININE, Serum	0.63	0.51-0.95 mg/dl	Enzymatic
eGFR, Serum	117	>60 ml/min/1.73sqm	Calculated

Authenticity Check



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Age / Gender : 31 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 18-Jan-2022 / 09:31
Reported : 18-Jan-2022 / 14:42

URIC ACID, Serum	4.6	2.4-5.7 mg/dl	Uricase
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***



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Pathologist

Authenticity Check



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CID : 2201811676
Name : MS.KSHIPRA DWIVEDI
Age / Gender : 31 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 18-Jan-2022 / 09:31
Reported : 18-Jan-2022 / 15:07

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.3	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	105.4	mg/dl	Calculated

Intended use:

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1c goal for non pregnant adults in general is Less than 7%.

Clinical Significance:

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

Test Interpretation:

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

Factors affecting HbA1c results:

Increased in: High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

Reflex tests: Blood glucose levels, CGM (Continuous Glucose monitoring)

References: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

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



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Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 18-Jan-2022 / 09:31
Reported : 18-Jan-2022 / 13:53

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
URINE EXAMINATION REPORT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	Acidic (6.0)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.015	1.010-1.030	Chemical Indicator
Transparency	Slight hazy	Clear	-
Volume (ml)	30	-	-
CHEMICAL EXAMINATION			
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
MICROSCOPIC EXAMINATION			
Leukocytes(Pus cells)/hpf	5-6	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	4-5		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	6-8	Less than 20/hpf	

Kindly correlate clinically

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***



Amit Taori

Dr. AMIT TAORI
M.D (Path)
Pathologist



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Name : MS.KSHIPRA DWIVEDI
Age / Gender : 31 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 18-Jan-2022 / 09:31
Reported : 18-Jan-2022 / 11:53

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

PARAMETER	RESULTS
ABO GROUP	O
Rh TYPING	Positive

NOTE: Test performed by Semi- automated column agglutination technology (CAT)

Note : This Sample has also been tested for Bombay group/Bombay phenotype /Oh using anti-H lectin

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 G B Road Lab, Thane West

*** End Of Report ***



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Age / Gender : 31 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 18-Jan-2022 / 09:31
Reported : 18-Jan-2022 / 12:05

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	183.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	Enzymatic
TRIGLYCERIDES, Serum	106.2	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	46.4	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	136.6	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	116.0	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	Homogeneous enzymatic colorimetric assay
VLDL CHOLESTEROL, Serum	20.6	< / = 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.9	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.5	0-3.5 Ratio	Calculated

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***



Amit Taori

Dr.AMIT TAORI
M.D (Path)
Pathologist



CID : 2201811676
Name : Ms Kshipra Dwivedi
Age / Sex : 41 Years/Female
Ref. Dr :
Reg. Location : G B Road, Thane West Main Centre

Reg. Date : 18-Jan-2022 / 10:00
Reported : 18-Jan-2022 / 11:40

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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-----

D Patil

Dr. Devendra Patil
MBBS, MD (Radio-Diagnosis)
Consultant Radiologist
MMC - 2013/02/0165

Click here to view images <http://202.143.96.162/Suburban/Viewer?ViewerType=3&AccessionNo=2022011809262209>

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Collected : 18-Jan-2022 / 09:31
Reported : 18-Jan-2022 / 11:12

**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	5.2	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	19.0	11.5-22.7 pmol/L First Trimester:9.0-24.7 Second Trimester:6.4-20.59 Third Trimester:6.4-20.59	ECLIA
sensitiveTSH, Serum	3.1	0.35-5.5 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0	ECLIA

Authenticity Check



Use a QR Code Scanner Application To Scan the Code

CID : 2201811676
Name : MS. KSHIPRA DWIVEDI
Age / Gender : 31 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 18-Jan-2022 / 09:31
Reported : 18-Jan-2022 / 11:12

Interpretation:

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

Clinical Significance:

- 1) TSH Values between 5.5 to 15 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: 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.

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 G B Road Lab, Thane West
*** End Of Report ***



Amit Taori

Dr. AMIT TAORI
M.D (Path)
Pathologist

ADDRESS: 2nd Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053
HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343

For Feedback - customerservice@suburbandiagnosics.com | www.suburbandiagnosics.com

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CID : 2201811676
Name : Ms Kshipra Dwivedi
Age / Sex : 41 Years/Female
Ref. Dr :
Reg. Location : G B Road, Thane West Main Centre

Reg. Date : 18-Jan-2022 / 11:07
Reported : 18-Jan-2022 / 11:08

USG WHOLE ABDOMEN

LIVER: Liver appears normal in size and echotexture. There is no intra-hepatic biliary radical dilatation. No evidence of any focal lesion.

GALL BLADDER: Gall bladder is distended and appears normal. Wall thickness is within normal limits. There is no evidence of any calculus.

PORTAL VEIN: Portal vein is normal. **CBD:** CBD is normal.

PANCREAS: Visualised head of pancreas appears normal in size & echotexture. Rest is obscured by excessive bowel gas

KIDNEYS: Right kidney measures 9.3 x 3.5 cm. Left kidney measures 9.6 x 4.1 cm. Both kidneys are normal in size, shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

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

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

UTERUS: Uterus is anteverted and measures 8.0 x 3.5 x 3.1 cm. Uterine myometrium shows homogenous echotexture. Endometrial echo is in midline and measures 9.8 mm. Cervix appears normal.

OVARIES: Both ovaries are normal.
The right ovary measures 1.8 x 3.2 cm
The left ovary measures 3.2 x 2.6 cm

No free fluid or significant lymphadenopathy is seen.

Bowel gas++

Click here to view images <http://202.143.96.162/Suburban/Viewer?ViewerType=3&AccessionNo=2022011809262207>

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CID : 2201811676
Name : Ms Kshipra Dwivedi
Age / Sex : 41 Years/Female
Ref. Dr :
Reg. Location : G B Road, Thane West Main Centre

Reg. Date : 18-Jan-2022 / 11:07
Reported : 18-Jan-2022 / 11:08

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. USG is known to have inter-observer variations. Further/follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis.

Advice: Clinical co-relation and further evaluation.

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

D. Patil

Dr. Devendra Patil
MBBS, MD (Radio-Diagnosis)
Consultant Radiologist
MMC - 2013/02/0165

Click here to view images <http://202.143.96.162/Suburban/Viewer?ViewerType=3&AccessionNo=2022011809262207>

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For Feedback - customerservice@suburbandiagnosics.com | www.suburbandiagnosics.com

suburban diagnostic GB road

Patient Details **Date:** 18-Jan-22 **Time:** 11:48:37 AM
Name: KSHIPRA DWIVEDI ID: 7019256446
Age: 31 y **Sex:** F **Height:** 160 cms **Weight:** 54 Kgs
Clinical History: NIL

Medications: NIL

Test Details

Protocol: Bruce **Pr.MHR:** 189 bpm **THR:** 170 (90 % of Pr.MHR) bpm
Total Exec. Time: 9 m 28 s **Max. HR:** 160 (85% of Pr.MHR) bpm **Max. Mets:** 13.50
Max. BP: 150 / 80 mmHg **Max. BP x HR:** 24000 mmHg/min **Min. BP x HR:** 7440 mmHg/min
Test Termination Criteria: Fatigue,, Target HR attained

Protocol Details

Stage Name	Stage Time (min : sec)	Mets	Speed (mph)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
Supine	0 : 19	1.0	0	0	93	110 / 80	-0.85 aVR	1.42 V4
Standing	0 : 1	1.0	0	0	93	110 / 80	-0.85 aVR	1.42 V4
Hyperventilation	0 : 2	1.0	0	0	93	110 / 80	-0.85 aVR	1.42 V4
1	3 : 0	4.6	1.7	10	126	120 / 80	-0.85 aVR	2.83 V4
2	3 : 0	7.0	2.5	12	133	130 / 80	-0.85 aVR	3.54 V5
3	3 : 0	10.2	3.4	14	147	140 / 80	-1.70 III	3.89 V4
Peak Ex	0 : 28	13.5	4.2	16	160	150 / 80	-1.70 III	4.60 V2
Recovery(1)	1 : 0	1.8	1	0	126	150 / 80	-0.85 aVR	4.95 V2
Recovery(2)	1 : 0	1.0	0	0	123	150 / 80	-0.85 aVR	3.89 V2
Recovery(3)	1 : 0	1.0	0	0	106	150 / 80	-0.64 aVR	2.48 V3
Recovery(4)	1 : 0	1.0	0	0	111	120 / 80	-0.64 aVR	1.77 V3
Recovery(5)	0 : 4	1.0	0	0	114	120 / 80	-0.42 aVR	1.77 V3

Interpretation

The patient exercised according to the Bruce protocol for 9 m 28 s achieving a work level of Max. METS : 13.50. Resting heart rate initially 93 bpm, rose to a max. heart rate of 160 (85% of Pr.MHR) bpm. Resting blood Pressure 110 / 80 mmHg, rose to a maximum blood pressure of 150 / 80 mmHg.,

Negative Stress Test,

Good effort tolerance normal chronotropic and inotropic response no angina/arrhythmia.No significant STT changes from baseline.

Disclaimer:Negative stress test does not rule out coronary artery disease.Positive stress test is suggestive of but not confirmatory off coronary artery disease.Hence overall cardiological correlation is mandatory.

Dr. SHAILAJA PILLAI
M.D. (GEN.MED)
R.NO. 49972



Doctor: DR.SHAILAJA PILLAI

(c) Schiller Healthcare India Pvt. Ltd. V 4.7

Ref. Doctor: _____

(Summary Report edited by user)

KSHIPRA DWIVEDI (31 F)

ID: 7019256446

Date: 18-Jan-22

Exec Time : 0 m 0 s

Stage Time : 0 m 19 s HR: 93 bpm

Protocol: Bruce

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 170 bpm)

B.P: 110/80

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

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

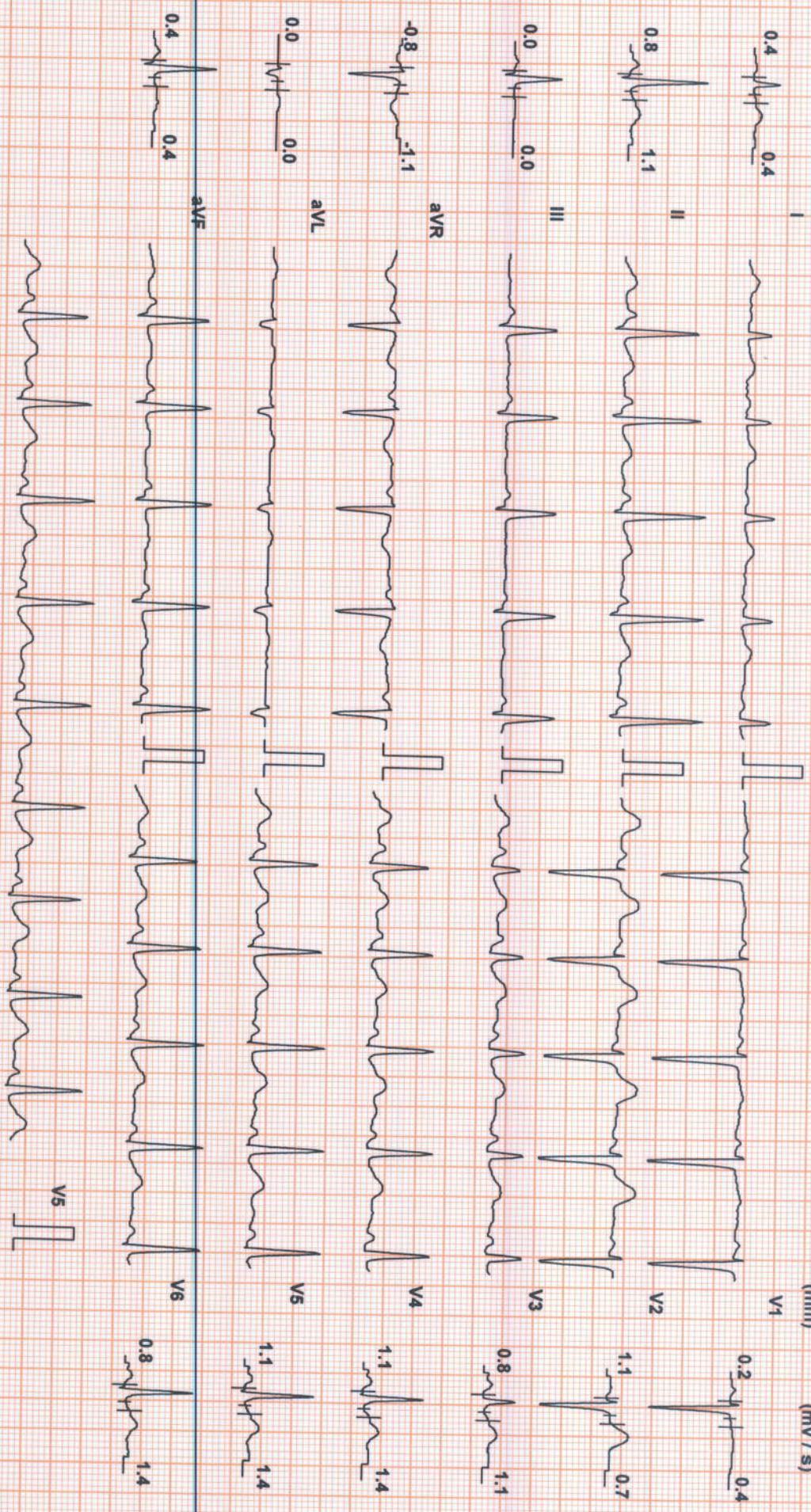


Chart Speed: 25 mm/sec
Schlier Spanden V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Isr = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

KSHIPRA DWIVEDI (31 F)

ID: 7019256446

Date: 18-Jan-22

Exec Time : 0 m 0 s

Stage Time : 0 m 1 s

HR: 93 bpm

Protocol: Bruce

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 170 bpm)

B.P: 110/80

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

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

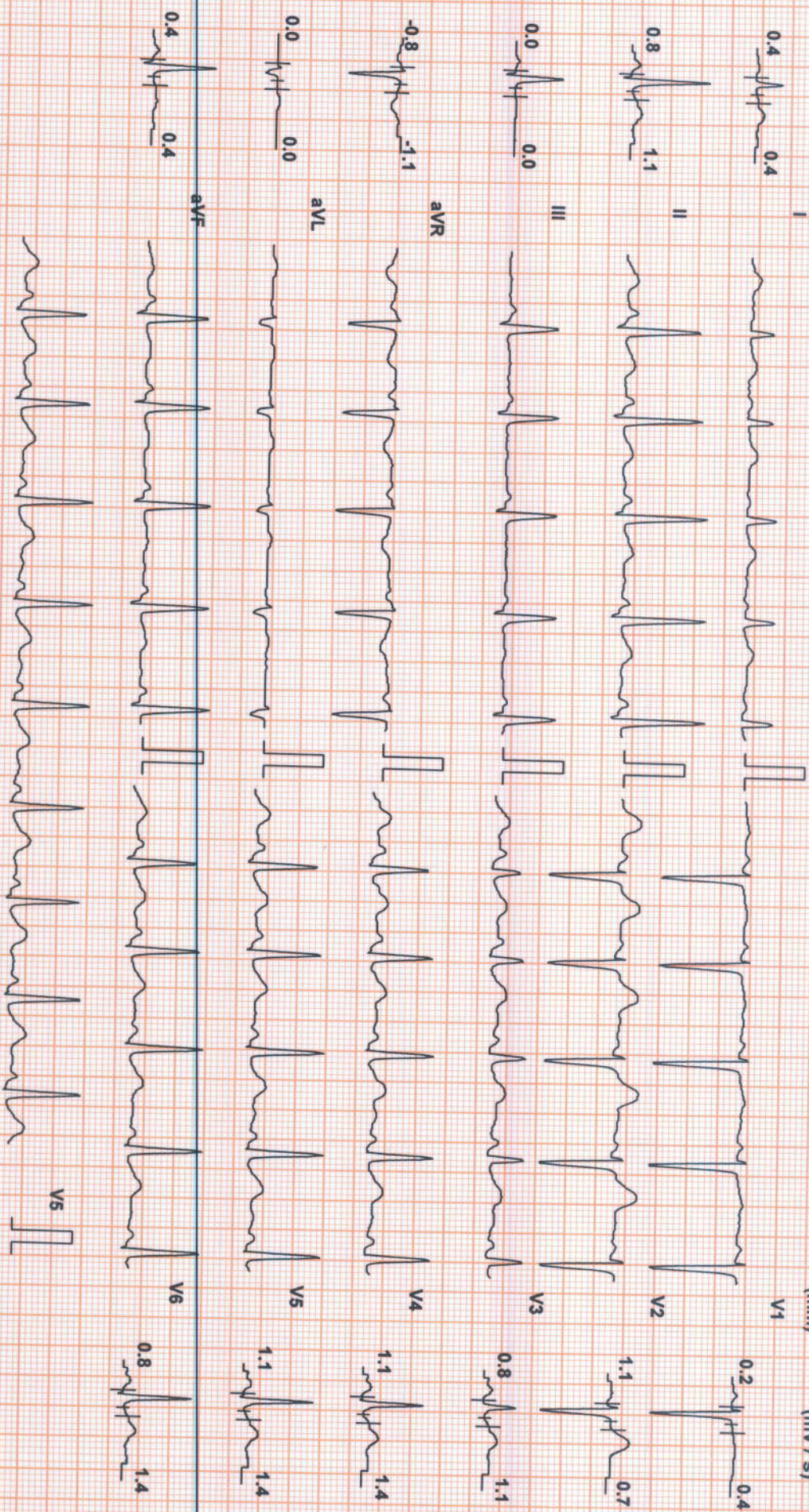


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Schlier Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

KSHIPRA DWIVEDI (31 F)

ID: 7019256446

Date: 18-Jan-22

Exec Time : 0 m 0 s

Stage Time : 0 m 2 s

HR: 93 bpm

Suburban diagnostic GB road

Protocol: Bruce

Stage: Hyperventilation

Speed: 0 mph

Grade: 0 %

(THR: 170 bpm)

B.P.: 110 / 80

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

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

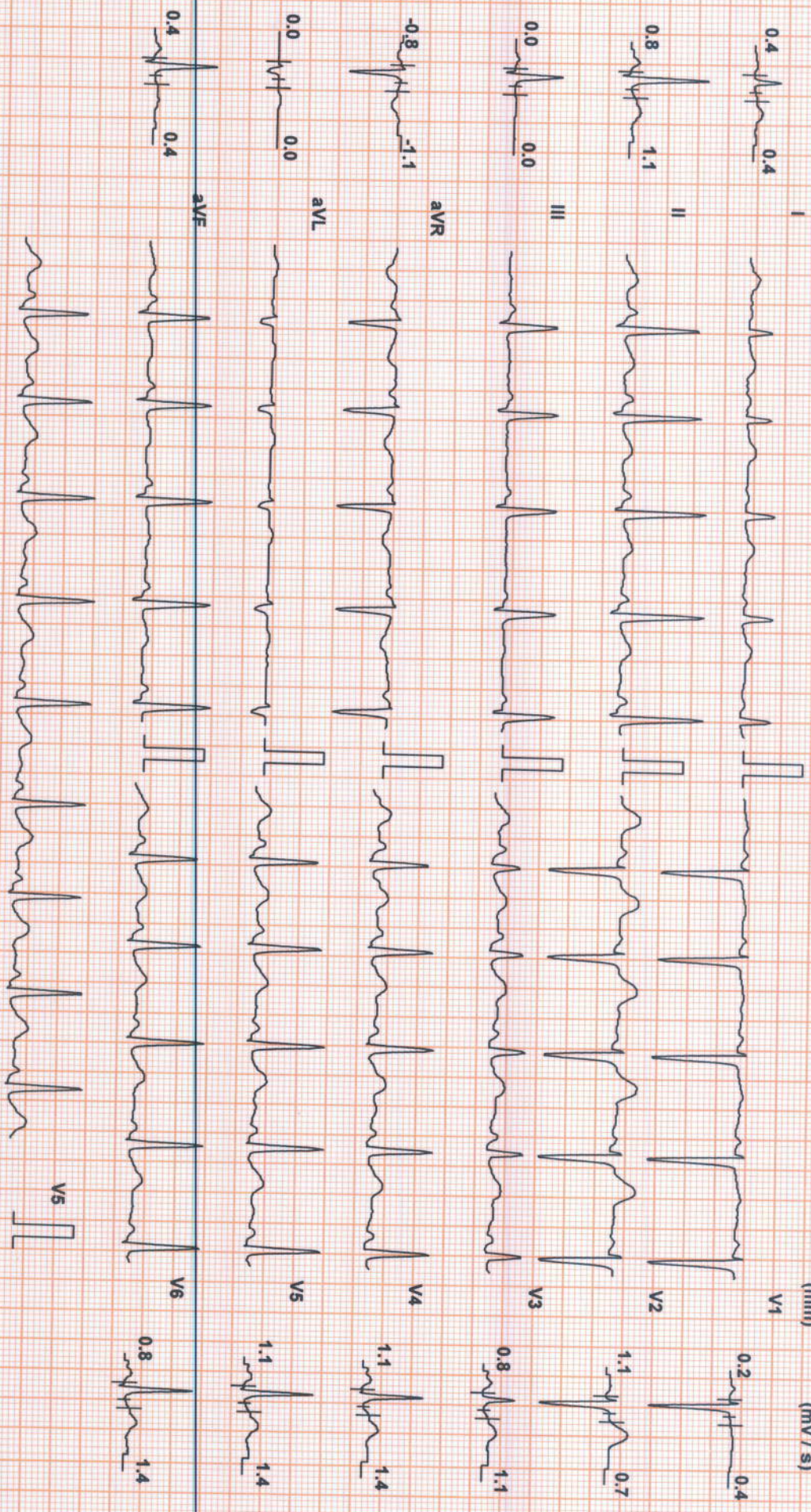


Chart Speed: 25 mm/sec
Schiller Spandan V.4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

KSHIPRA DWIVEDI (31 F)

ID: 7019256446

Date: 18-Jan-22

Exec Time : 3 m 0 s

Stage Time : 3 m 0 s

HR: 126 bpm

suburban diagnostic GB road

Protocol: Bruce

Stage: 1

Speed: 1.7 mph

Grade: 10 %

(THR: 170 bpm)

B.P.: 120 / 80

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

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

0.6 0.7

0.6 0.7

0.8 1.4

1.9 2.1

0.0 0.4

1.3 1.4

-0.8 -1.1

1.3 1.4

0.2 0.0

0.4 1.1

0.4 0.7

1.1 1.8

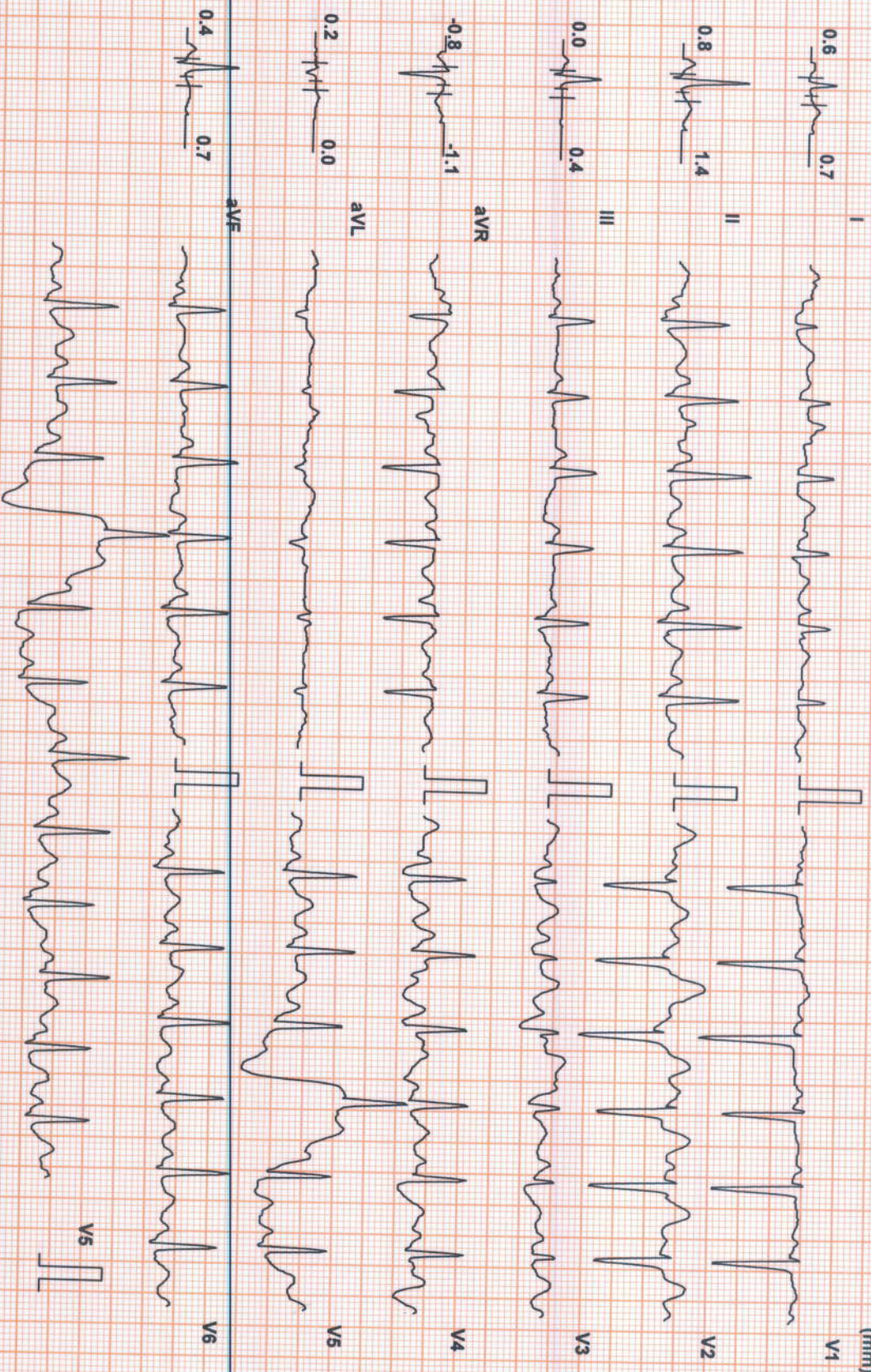


Chart Speed: 25 mm/sec
Schlier Spanden V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R + 60 ms

J = R + 60 ms

Post J = J + 60 ms

KSHIPRA DWIVEDI (31 F)

ID: 7019256446

Date: 18-Jan-22 Exec Time : 6 m 0 s Stage Time : 3 m 0 s HR: 133 bpm

Protocol: Bruce

Stage: 2

Speed: 2.5 mph Grade: 12 % (THR: 170 bpm) B.P.: 130/80

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

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

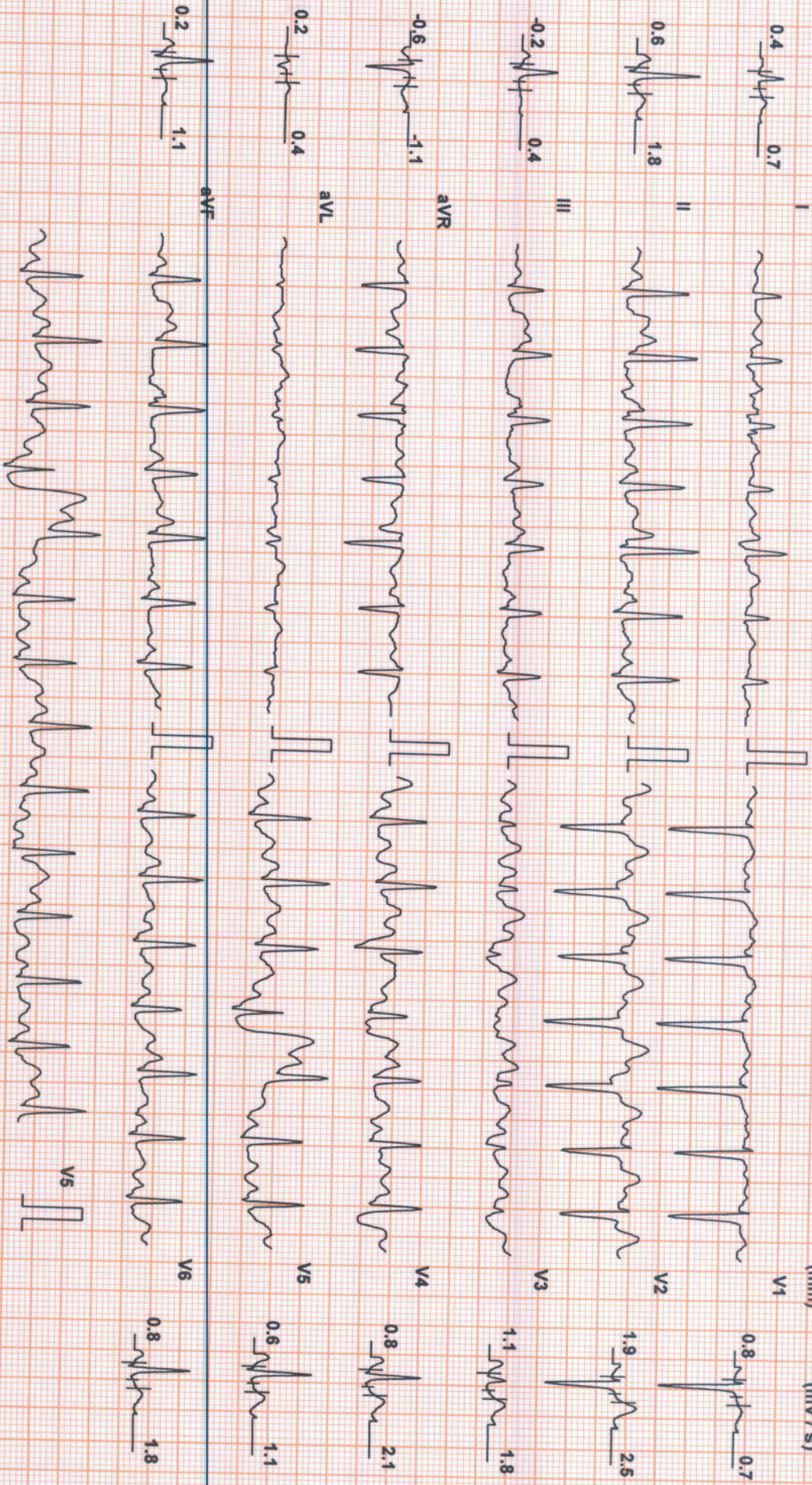


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

KSHIPRA DWIVEDI (31 F)

ID: 7019256446

Date: 18-Jan-22

Exec Time : 9 m 0 s

Stage Time : 3 m 0 s

HR: 147 bpm

Protocol: Bruce

Stage: 3

Speed: 3.4 mph

Grade: 14 %

(THR: 170 bpm)

B.P.: 140 / 80

ST Level (mm)

ST Slope (mV/s)

ST Level (mm)

ST Slope (mV/s)

0.8 0.7



0.8 0.4

1.1 2.1



1.9 2.8

-0.2 0.7



0.6 2.5

-0.8 -1.4



1.1 1.8

0.2 0.4



1.1 1.8

0.4 1.4



1.1 1.8

0.4 1.4



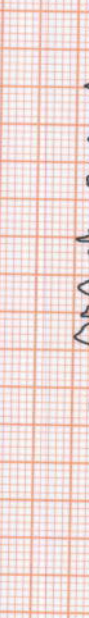
0.6 1.4

0.4 1.4



0.6 1.4

0.4 1.4



0.6 1.4

0.4 1.4



0.6 1.4

0.4 1.4



0.6 1.4

Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R + 60 ms

J = R + 60 ms

Post J = J + 60 ms

KSHIPRA DWIVEDI (31 F)

ID: 7019256446

Date: 18-Jan-22

Exec Time : 9 m 28 s Stage Time : 0 m 28 s HR: 160 bpm

Protocol: Bruce

Stage: Peak Ex

Speed: 4.2 mph

Grade: 16 %

(THR: 170 bpm)

B.P.: 150 / 80

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

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

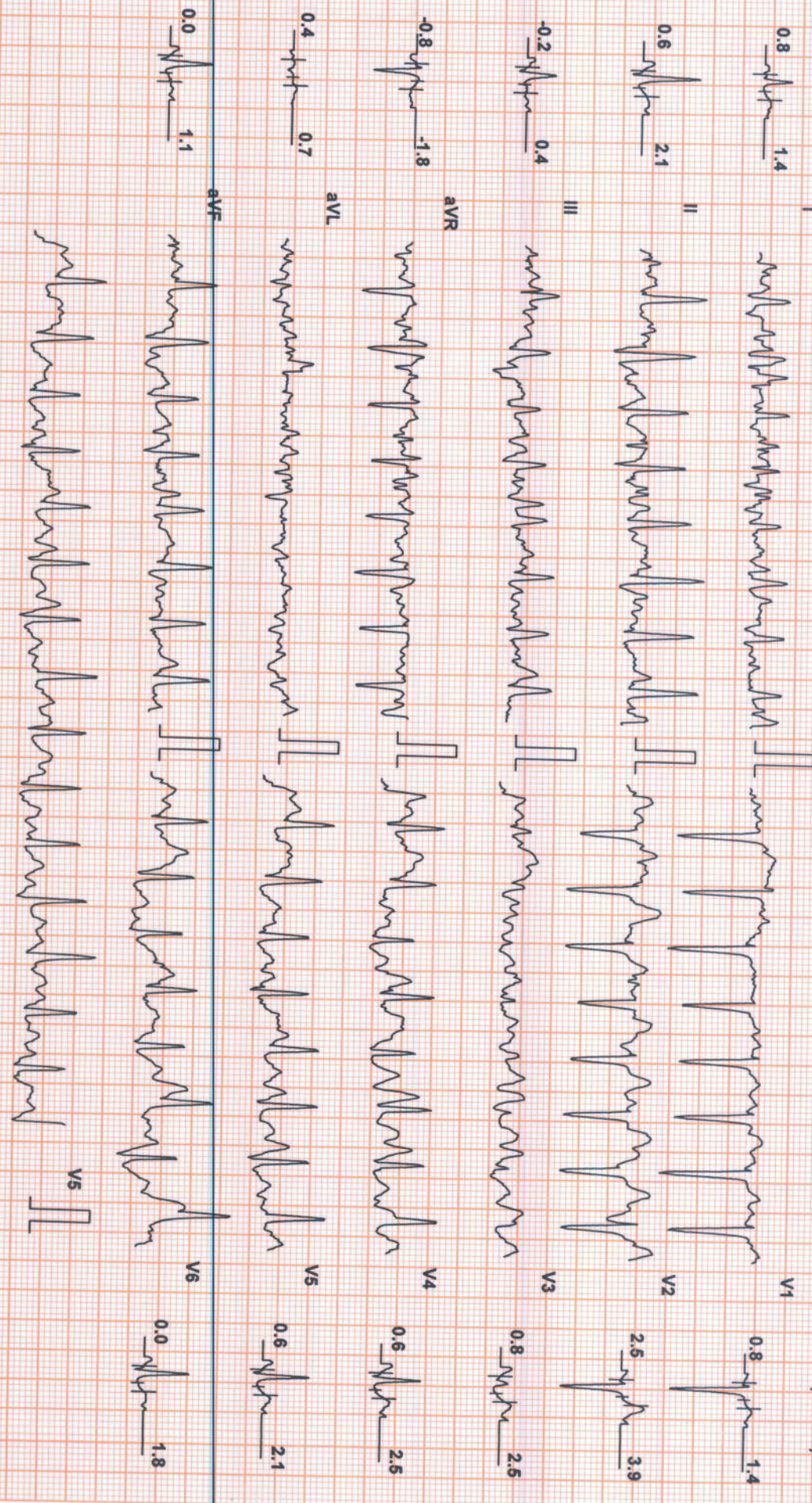


Chart Speed: 25 mm/sec
Schiller Spandem V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R + 60 ms

J = R + 60 ms

Post J = J + 60 ms

KSHIPRA DWIVEDI (31 F)

Suburban diagnostic GB road

ID: 7019256446

Date: 18-Jan-22

Exec Time : 9 m 28 s Stage Time : 1 m 0 s

HR: 126 bpm

Protocol: Bruce

Stage: Recovery(1)

Speed: 0 mph

Grade: 0 %

(THR: 170 bpm)

B.P.: 150 / 80

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

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

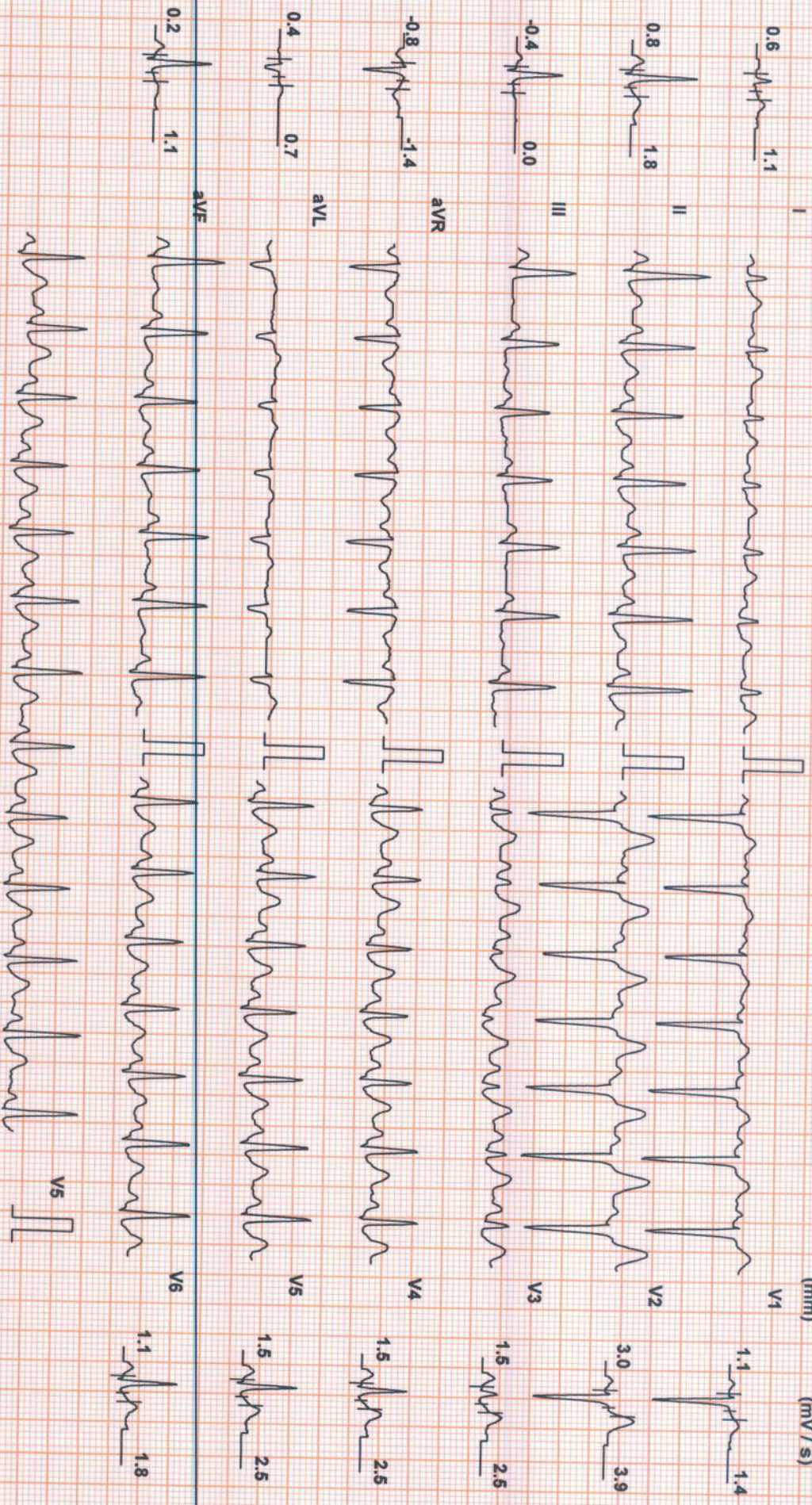


Chart Speed: 25 mm/sec
Schlier Spanden V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms J = R + 60 ms

Post J = J + 60 ms

KSHIPRA DWIVEDI (31 F)

Suburban diagnostic GB road

Protocol: Bruce

ID: 7019256446

Date: 18-Jan-22

Exec Time : 9 m 28 s Stage Time : 1 m 0 s

HR: 123 bpm

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

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 170 bpm)

B.P: 150 / 80

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

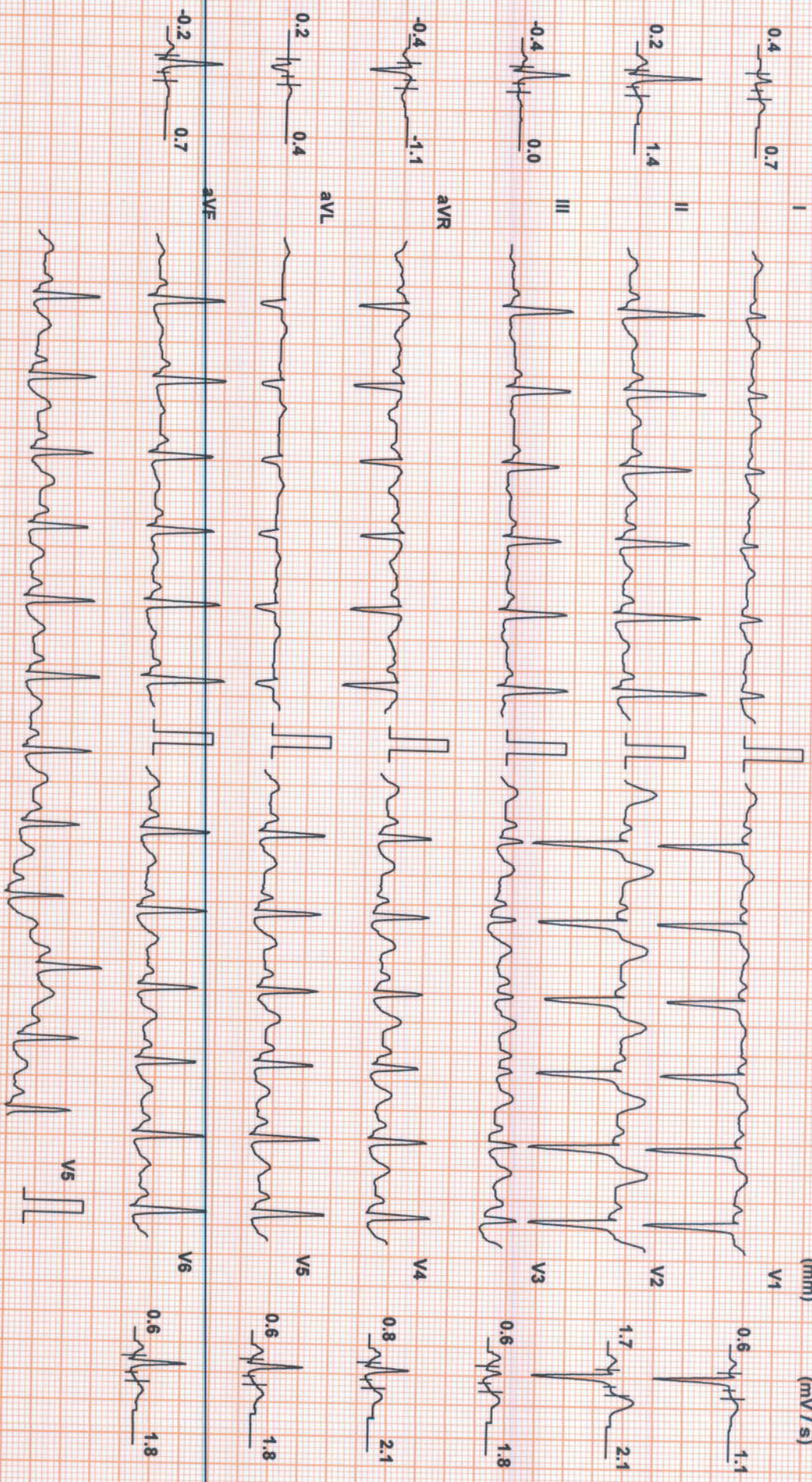


Chart Speed: 25 mm/sec
Schiller Spandax V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R + 60 ms

J = R + 60 ms

Post J = J + 60 ms

KSHIPRA DWIVEDI (31 F)

ID: 7019256446

Date: 18-Jan-22

Exec Time : 9 m 28 s Stage Time : 1 m 0 s

HR: 106 bpm

Protocol: Bruce

Stage: Recovery(3)

Speed: 0 mph

Grade: 0 %

(THR: 170 bpm)

B.P.: 150 / 80

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

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

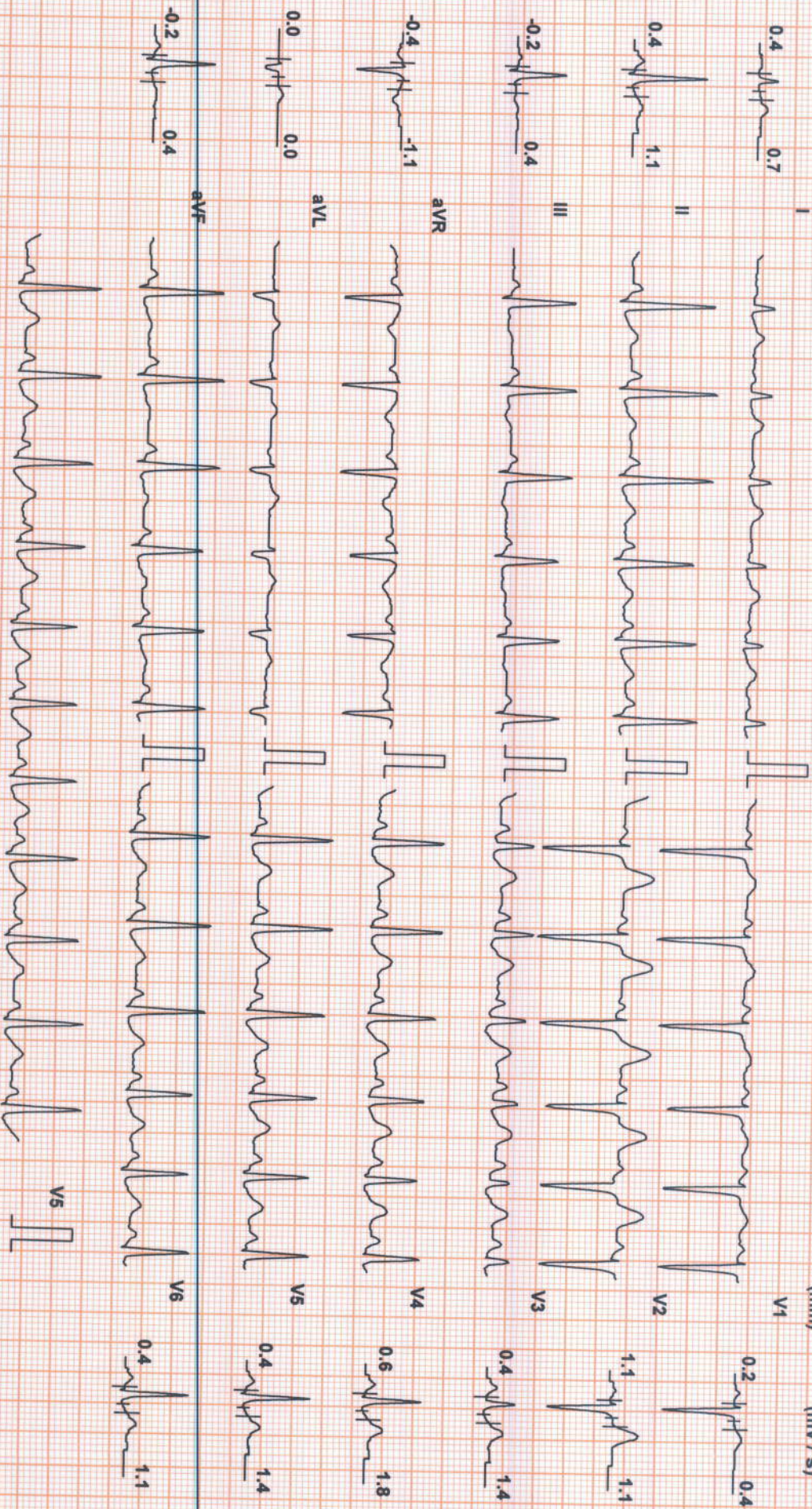


Chart Speed: 25 mm/sec
Schlier Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R + 60 ms

J = R + 60 ms

Post J = J + 60 ms

KSHIPRA DWIVEDI (31 F)

ID: 7019256446

Date: 18-Jan-22

Exec Time : 9 m 28 s Stage Time : 1 m 0 s

HR: 111 bpm

Protocol: Bruce

Stage: Recovery(4)

Speed: 0 mph

Grade: 0 %

(THR: 170 bpm)

B.P: 120 / 80

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

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

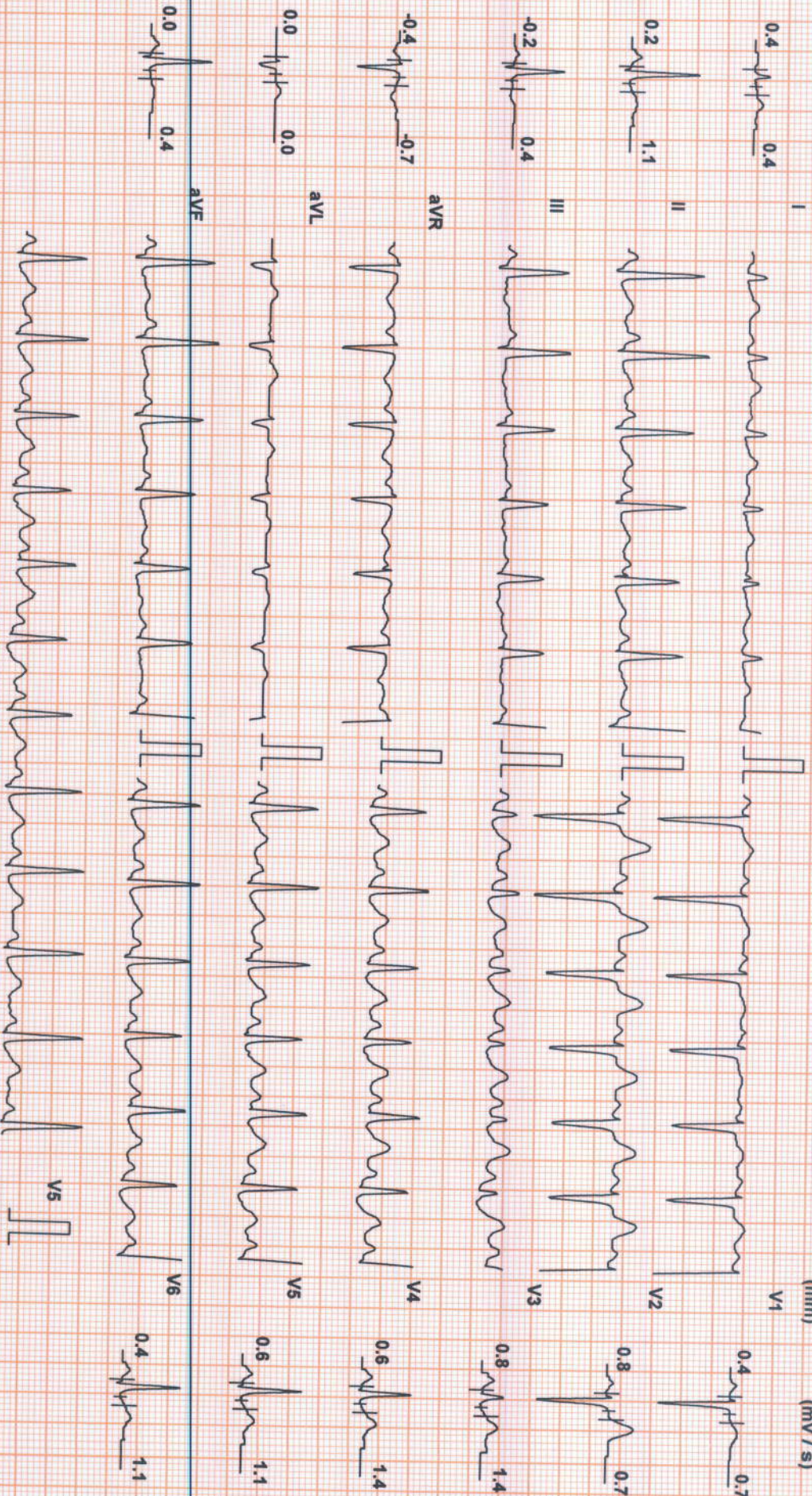


Chart Speed: 25 mm/sec
Schiller Spanden V 4.7

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

ISO = R - 60 ms

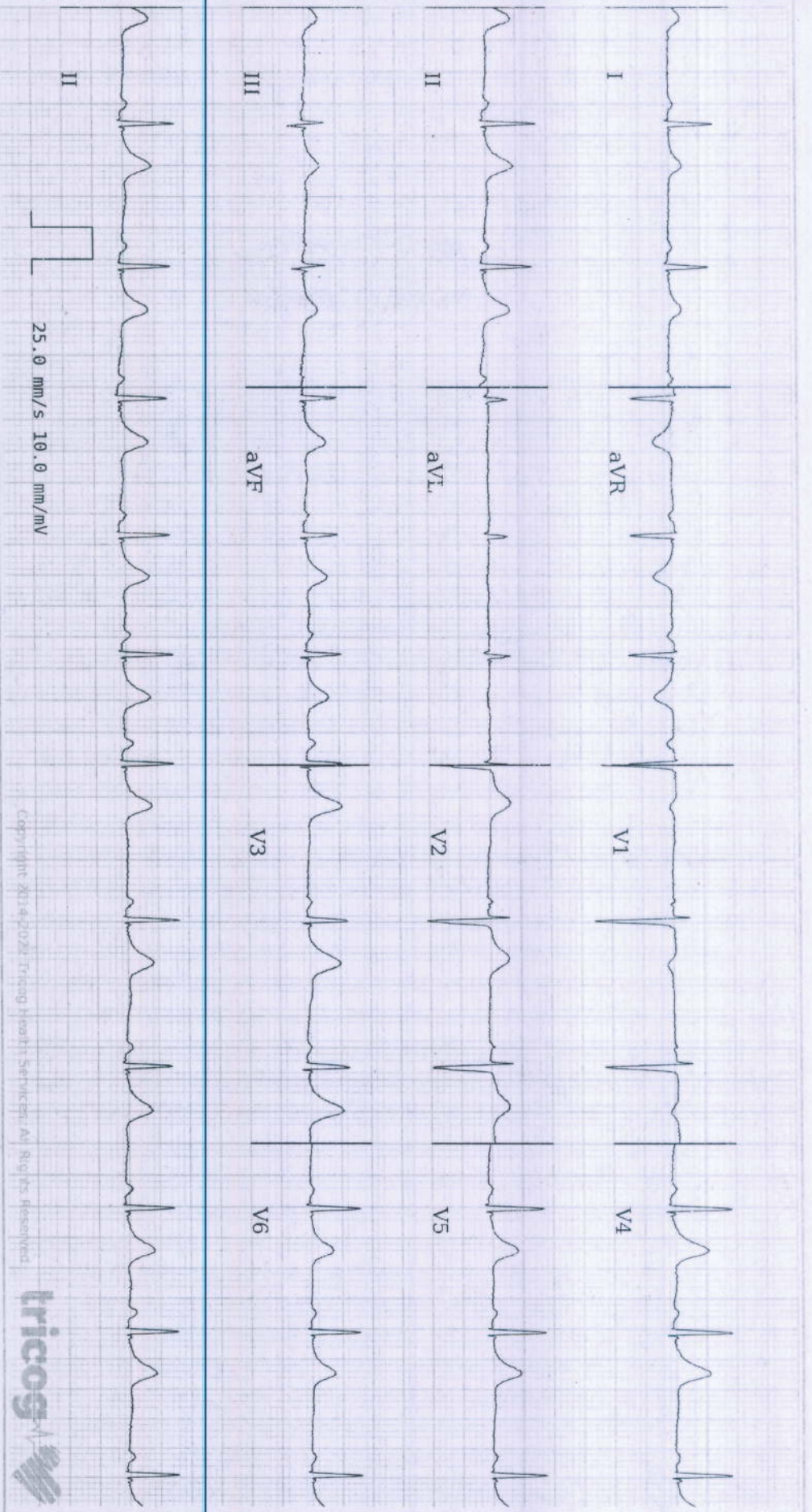
J = R + 60 ms

Post J = J + 60 ms

Patient Name: **KSHIPRA DWIEDI**

Date and Time: **18th Jan 22 9:59 AM**

Patient ID: **2201811676**



25.0 mm/s 10.0 mm/mV

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Age **41** 3 2
years months days

Gender **Female**

Heart Rate **69** bpm

Patient Vitals

BP: **110/80** mmHg

Weight: **110** kg

Height: **80** cm

Pulse: **NA**

SpO2: **NA**

Resp: **NA**

Others: **NA**

Measurements

QSRD: **80** ms

QT: **402** ms

QTc: **430** ms

PR: **134** ms

P-R-T: **60° 42° 63°**

REPORTED BY

DR SHAILAJA PILLAI
MBBS, MD Physician
MD Physician
49972

ECG Within Normal Limits: Sinus Rhythm, Normal Axis, with Sinus Arrhythmia. 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.