



CID : 2310700608
Name : MRS.SANGEETA JHA
Age / Gender : 35 Years / Female
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 17-Apr-2023 / 09:02
Reported : 17-Apr-2023 / 14:06

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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	12.5	12.0-15.0 g/dL	Spectrophotometric
RBC COUNT	4.62	3.8-4.8 mil/cmm	Elect. Impedance
PCV	39.5	36-46 %	Measured
MCV	86	80-100 fl	Calculated
MCH	27.1	27-32 pg	Calculated
MCHC	31.7	31.5-34.5 g/dL	Calculated
RDW	14.7	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC TOTAL COUNT	5600	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	19.2	20-40 %	
Absolute Lymphocytes	1075.2	1000-3000 /cmm	Calculated
Monocytes	9.2	2-10 %	
Absolute Monocytes	515.2	200-1000 /cmm	Calculated
Neutrophils	69.6	40-80 %	
Absolute Neutrophils	3897.6	2000-7000 /cmm	Calculated
Eosinophils	1.7	1-6 %	
Absolute Eosinophils	95.2	20-500 /cmm	Calculated
Basophils	0.3	0.1-2 %	
Absolute Basophils	16.8	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
PLATELET COUNT	142000	150000-400000 /cmm	Elect. Impedance
MPV	12.1	6-11 fl	Calculated
PDW	26.1	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			
Hypochromia	-		
Microcytosis	-		



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

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR 14 2-20 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



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Collected : 17-Apr-2023 / 09:02
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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
FBS (-F), Fluoride Plasma	93.4	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
PPBS (-P), Fluoride Plasma PP/R	89.3	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.38	0.3-1.2 mg/dl	Vanadate oxidation
BILIRUBIN (DIRECT), Serum	0.14	0-0.3 mg/dl	Vanadate oxidation
BILIRUBIN (INDIRECT), Serum	0.24	<1.2 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.2	5.7-8.2 g/dL	Biuret
ALBUMIN, Serum	4.3	3.2-4.8 g/dL	BCG
GLOBULIN, Serum	2.9	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.5	1 - 2	Calculated
SGOT, Serum	31.0	<34 U/L	Modified IFCC
SGPT, Serum	31.7	10-49 U/L	Modified IFCC
GGT, Serum	21.8	<38 U/L	Modified IFCC
ALK PHOS, Serum	114.8	46-116 U/L	Modified IFCC
BLOOD UREA, Serum	19.8	19.29-49.28 mg/dl	Calculated
BLOOD UREA NITROGEN, Serum	9.2	9.0-23.0 mg/dl	Urease with GLDH
CREATININE, Serum	0.50	0.50-0.80 mg/dl	Enzymatic
eGFR, Serum	149	>60 ml/min/1.73sqm	Calculated



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Note: eGFR estimation is calculated using MDRD (Modification of diet in renal disease study group) equation

URIC, Serum	4.6	3.1-7.8 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



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
GLYCOSYLATED HEMOGLOBIN (HbA1c)

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLYCO Hb, EDTA WB - CC	5.6	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	114.0	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



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Reported : 17-Apr-2023 / 16:36

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
URINE EXAMINATION REPORT

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>PHYSICAL EXAMINATION</u>			
Color-U	Pale yellow	Pale Yellow	-
pH-Urine	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.005	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	30	-	-
<u>CHEMICAL EXAMINATION</u>			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood (Urine)	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite (Urine)	Absent	Absent	Griess Test
<u>MICROSCOPIC EXAMINATION</u>			
Pus cells / hpf	0-1	0-5/hpf	
RBC / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	1-2		
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 insert

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

*** End Of Report ***



Signature

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



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

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GRP	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.

Refernces:

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

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



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



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
TOTAL CHOLESTEROL, Serum	186.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	72.3	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	63.4	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Elimination/ Catalase
Non HDL CHOLESTEROL, Serum	122.6	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	108.2	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, Serum	14.4	< /= 30 mg/dl	Calculated
TC/HDLC RATIO, Serum	2.9	0-4.5 Ratio	Calculated
LDLC/HDLC RATIO, Serum	1.7	0-3.5 Ratio	Calculated

*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



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
THYROID FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
FT3, Serum	5.0	3.5-6.5 pmol/L	CLIA
FT4, Serum	15.2	11.5-22.7 pmol/L	CLIA
TSH, Serum	0.927	0.55-4.78 microIU/ml	CLIA

Interpretation:

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

Clinical Significance:

- 1)TSH Values between high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2)TSH values may be transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

Diurnal Variation:TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am , and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7%(with in subject variation)

Reflex Tests:Anti thyroid Antibodies,USG Thyroid ,TSH receptor Antibody. Thyroglobulin, Calcitonin

Limitations:

1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

Reference:

- 1.O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2.Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3.Tietz ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4.Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)



Anupa

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



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*** End Of Report ***

SUBURBAN DIAGNOSTICS - BHAYANDER EAST

Patient Name: SANGEETA JHA

Date and Time: 17th Apr 23 9:06 AM

Patient ID: 2310700608

Age **35** **9** **22**
years months days

Gender **Female**

Heart Rate **77bpm**

Patient Vitals

BP: NA

Weight: NA

Height: NA

Pulse: NA

Spo2: NA

Resp: NA

Others: _____

Measurements

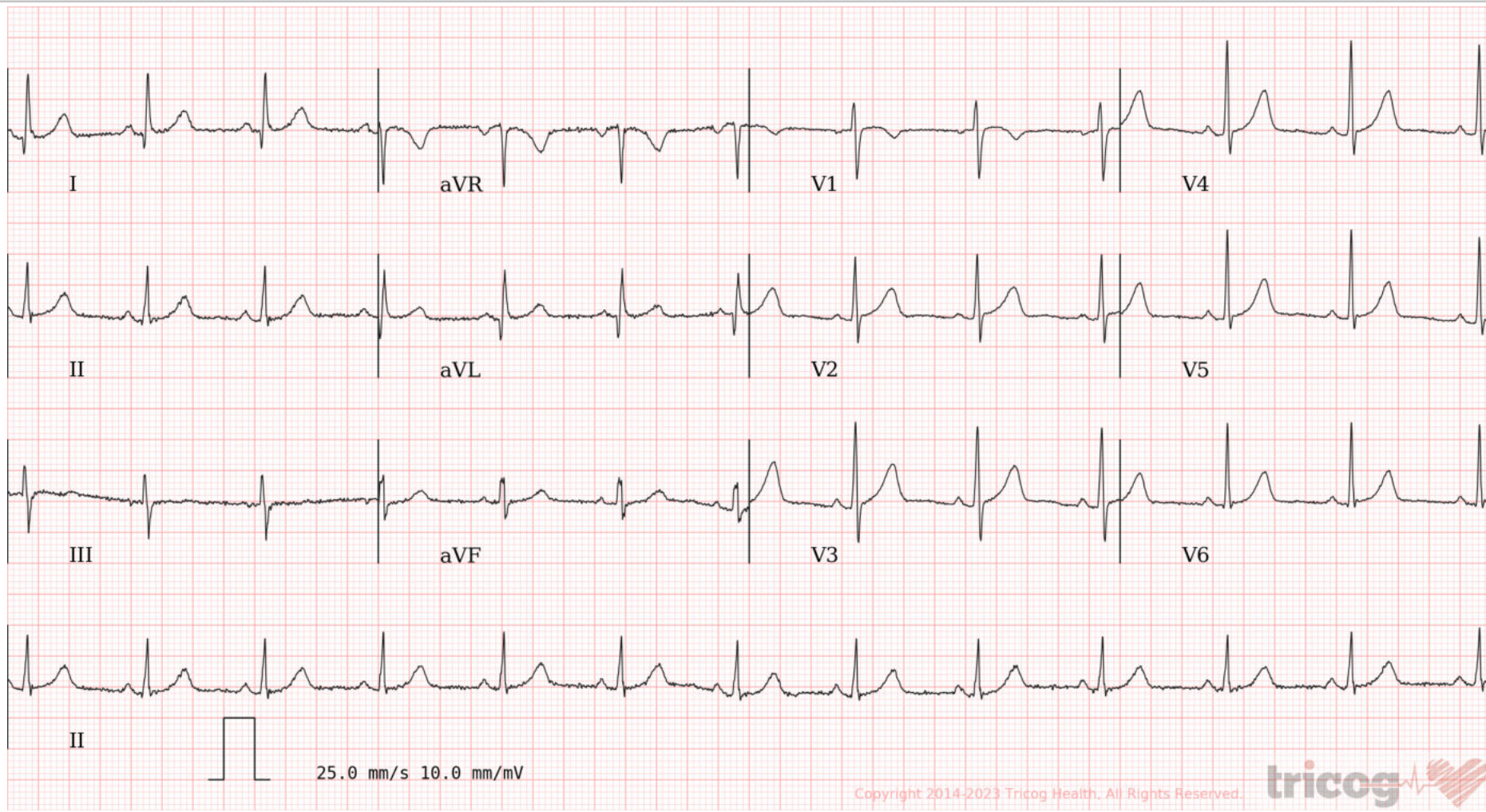
QRSD: 66ms

QT: 358ms

QTcB: 405ms

PR: 132ms

P-R-T: 26° 23° 32°



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ECG Within Normal Limits: Sinus Rhythm, Normal axis Small q wave in aVL, lead1. No significant ST-T changes. Please correlate clinically.

REPORTED BY

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



भारत सरकार
GOVERNMENT OF INDIA



संगीता अशोक झा
Sangeeta Ashok Jha
जन्म तारीख / DOB : 26/06/1987
महिला / FEMALE



3440 4794 0316

आधार : सामान्य माणसाचा अधिकार

Sangeeta

Anit

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Shop No. 301... Building
Above... Hospital
Mira - B... (E)
Phone No : 022 - 61700000

DR. ANITA SUDHARY

CONSULTANT PHYSICIAN
Reg. No. 2017/12/5553

CID:
Name : Mr.SANGEETA JHA

Age 35 / years / FEMALE

PHYSICAL EXAMINATION REPORTS

History and Complaints:

No Complaints.

EXAMINATION FINDINGS:

Height (cms):	153	Weight (kg):	63
Temp (0c):	Afebrile	Skin:	NAD
Blood Pressure (mm/hg):	120/80	Nails:	NAD
Pulse:	84/min	Lymph Node:	Not Palpable

Systems

Cardiovascular:	S1S2(N) No Murmurs
Respiratory:	AEBE Clear
Genitourinary:	Normal
GI System:	Normal
CNS:	Normal

IMPRESSION: CBC, Biochemistry, ECG, and
CXR all WNL

ADVICE:

CID:
Name : Mr.SANGEETA JHA

Age 35 / years / FEMALE

PHYSICAL EXAMINATION REPORTS

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

PERSONAL HISTORY:

1) Alcohol	No
2) Smoking	No
3) Diet	Mix
4) Medication	NO

DR. ANITA SHODHARY

CONSULTANT PHYSICIAN
Reg. No. 2017/12/5553

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

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

Corporate Identity Number (CIN): U85110MH2002PTC136144



12346063 (2310700608) / SANGEETA JHA / 35 Yrs / F / 153 Cms / 63 Kg
 Date: 17 / 04 / 2023 09:54:45 AM

Stage	Time	Duration	Speed(mph)	Elevation	MEts	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:03	0:03	00.0	00.0	01.0	079	43%	120/80	094	00	
Standing	00:08	0:05	00.0	00.0	01.0	079	43%	120/80	094	00	
HV	00:12	0:04	00.0	00.0	01.0	079	43%	120/80	094	00	
ExStart	00:15	0:03	01.7	10.0	01.1	082	44%	120/80	098	00	
BRUCE Stage 1	03:15	3:00	01.7	10.0	04.7	129	70%	130/80	167	00	
BRUCE Stage 2	06:15	3:00	02.5	12.0	07.1	160	86%	140/80	224	00	
PeakX	06:44	0:29	03.4	14.0	07.6	167	90%	140/80	233	00	
Recovery	07:44	1:00	01.1	00.0	01.1	137	74%	160/80	219	00	
Recovery	08:44	2:00	00.0	00.0	01.0	112	61%	150/80	168	00	
Recovery	10:44	4:00	00.0	00.0	01.0	104	56%	140/80	145	00	
Recovery	10:47				00.0	000	0%	120/80	000	00	

FINDINGS :

Exercise Time : 06:29
 Initial HR (ExStrt) : 82 bpm 44% of Target 185
 Initial BP (ExStrt) : 120/80 (mm/Hg)
 Max WorkLoad Attained : 7.6 Fair response to induced stress
 Max ST Dep Lead & Avg ST Value : V4 & -2.1 mm in PeakEX
 Duke Treadmill Score : 05.8
 Test End Reasons : Test Complete , Test Complete

Max HR Attained 167 bpm 90% of Target 185
 Max BP Attained 160/80 (mm/Hg)

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REPORT :

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

SUBURBAN DIAGNOSTICS (PVT.) LTD
 Shop No. 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000

DR. SMITA VALANI
 MBBS, D.P.M.
 2011/04/03/ JGY

Doctor : DR. SMITA VALANI

12346063 (2310700608) / SANGEETA JHA / 35 Yrs / F / 153 Cms / 63 Kg / HR : 81

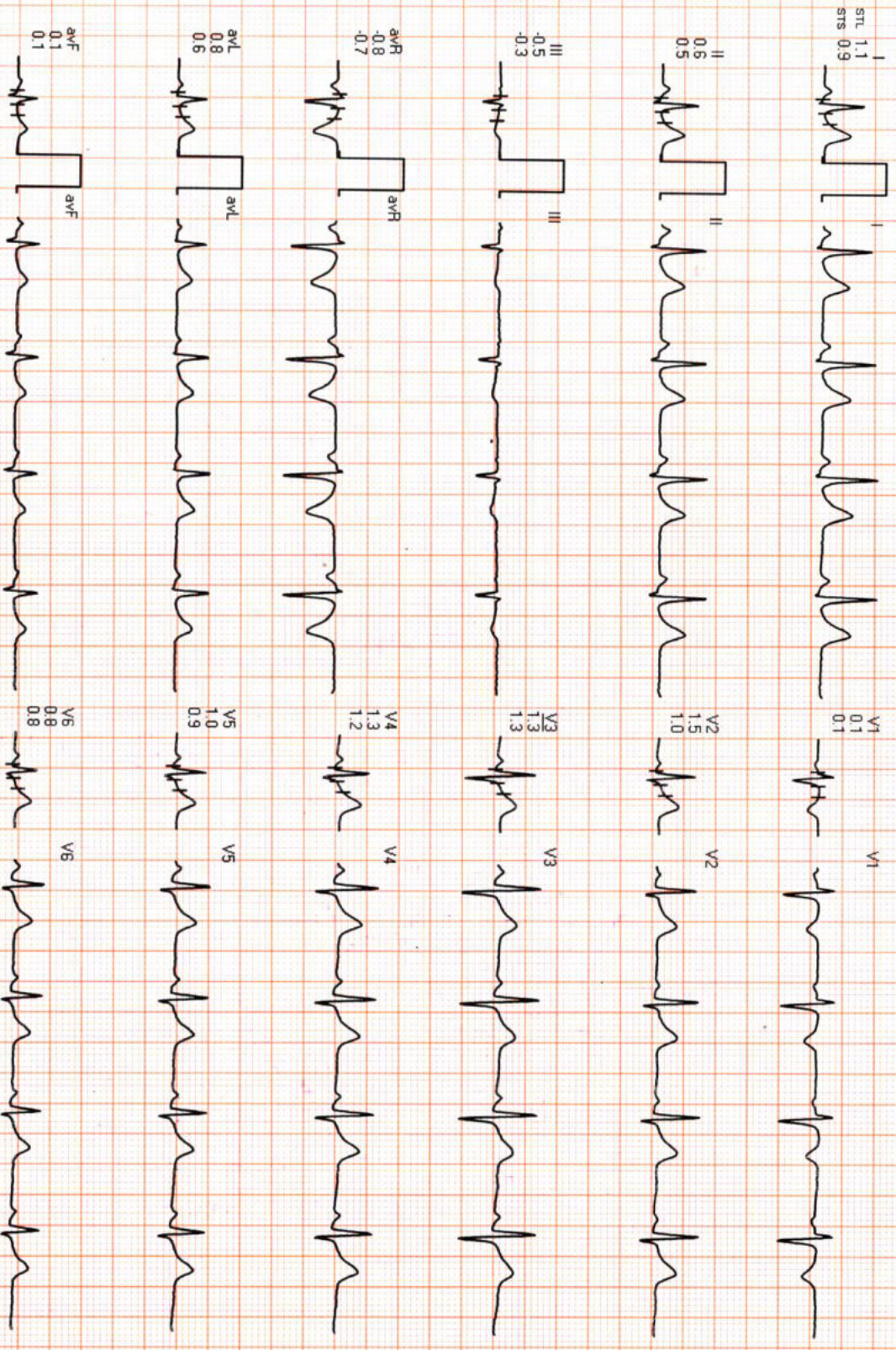
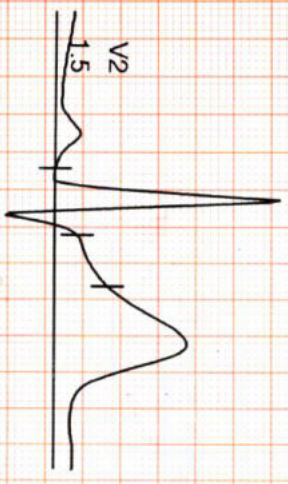


Date: 17 / 04 / 2023 09:54:45 AM METS: 1.0/ 81 bpm 44% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime 00:00 0.0 mph, 0.0%

4X 80 ms Post J

25 mm/Sec 1.0 Cm/mV



REMARKS:





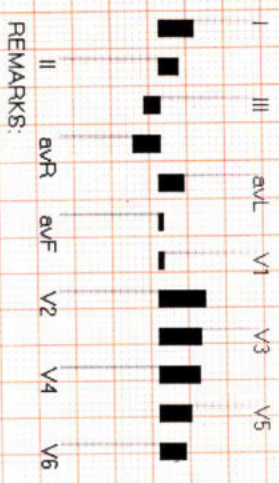
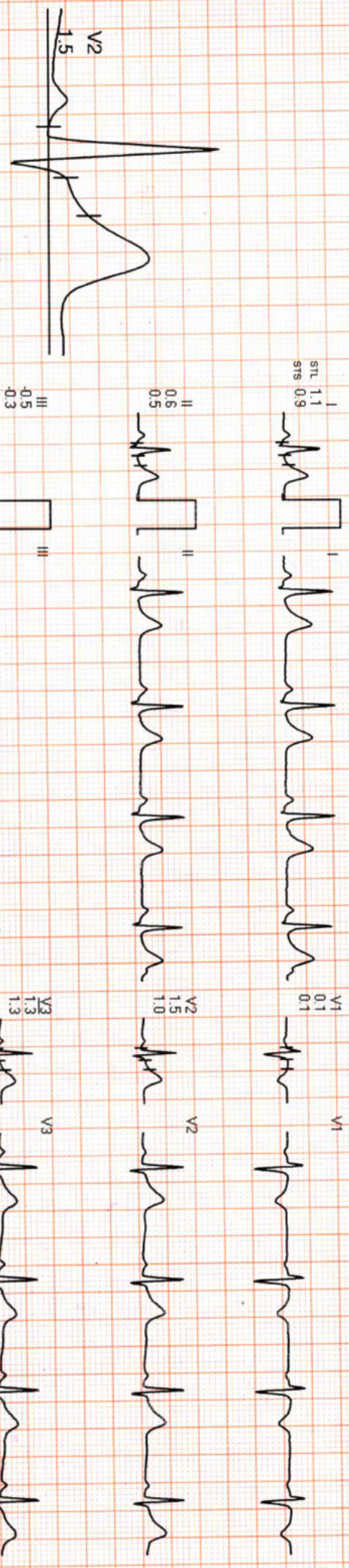
12346063 (2310700608) / SANGEETA JHA / 35 Yrs / F / 153 Cms / 63 Kg / HR : 79

Date: 17/04/2023 09:54:45 AM METS: 1.0/79 bpm 43% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

4X 80 mS Post J

ExtTime 00:00 0.0 mph, 0.0%

25 mm/Sec. 1.0 Cm/mV



REMARKS:



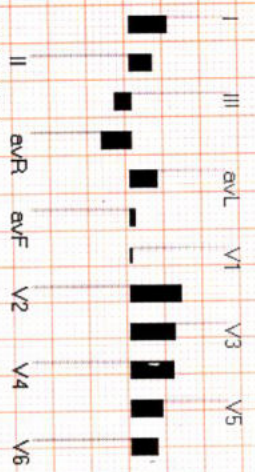
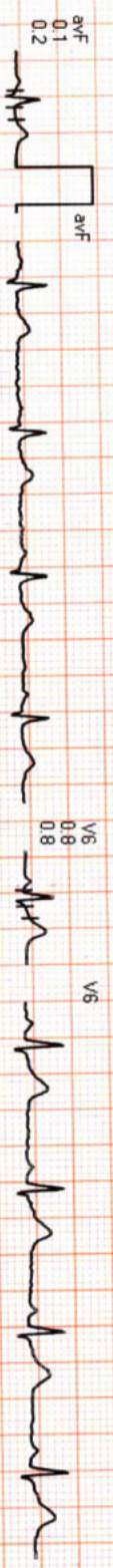
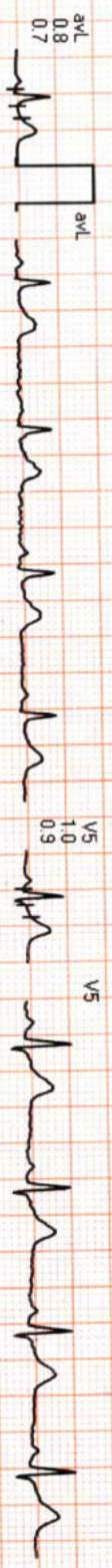
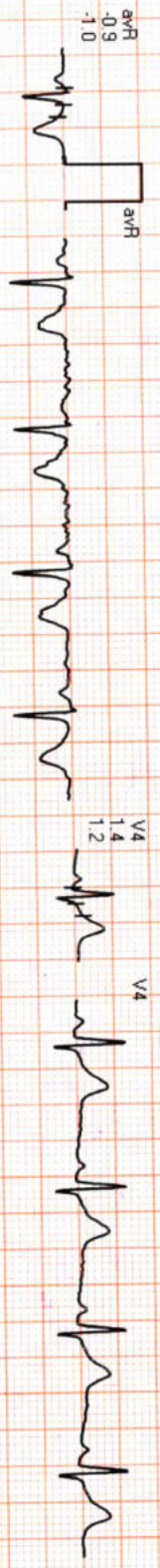
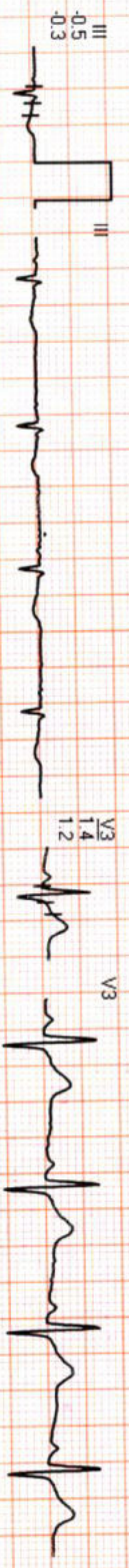
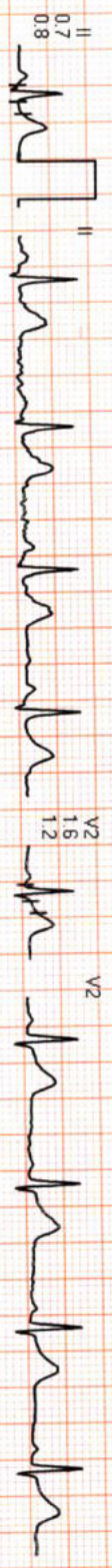
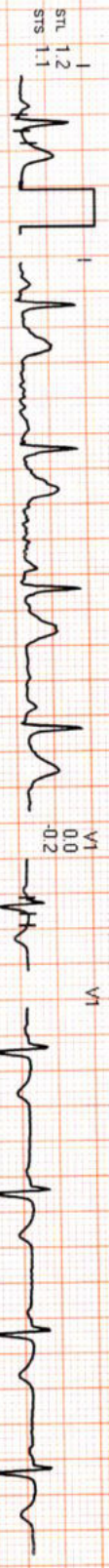
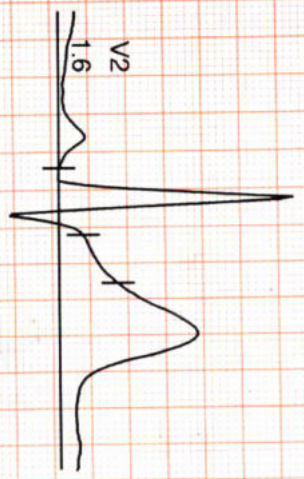


12346063 (2310700608) / SANGEETA JHA / 35 Yrs / F / 153 Cms / 63 Kg / HR : 79

Date: 17 / 04 / 2023 09:54:45 AM METS: 1.0/ 79 bpm 43% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

4X 80ms Post J

ExTime: 00:00 0.0 mph, 0.0%
25 mm/Sec 1.0 Cm/mV

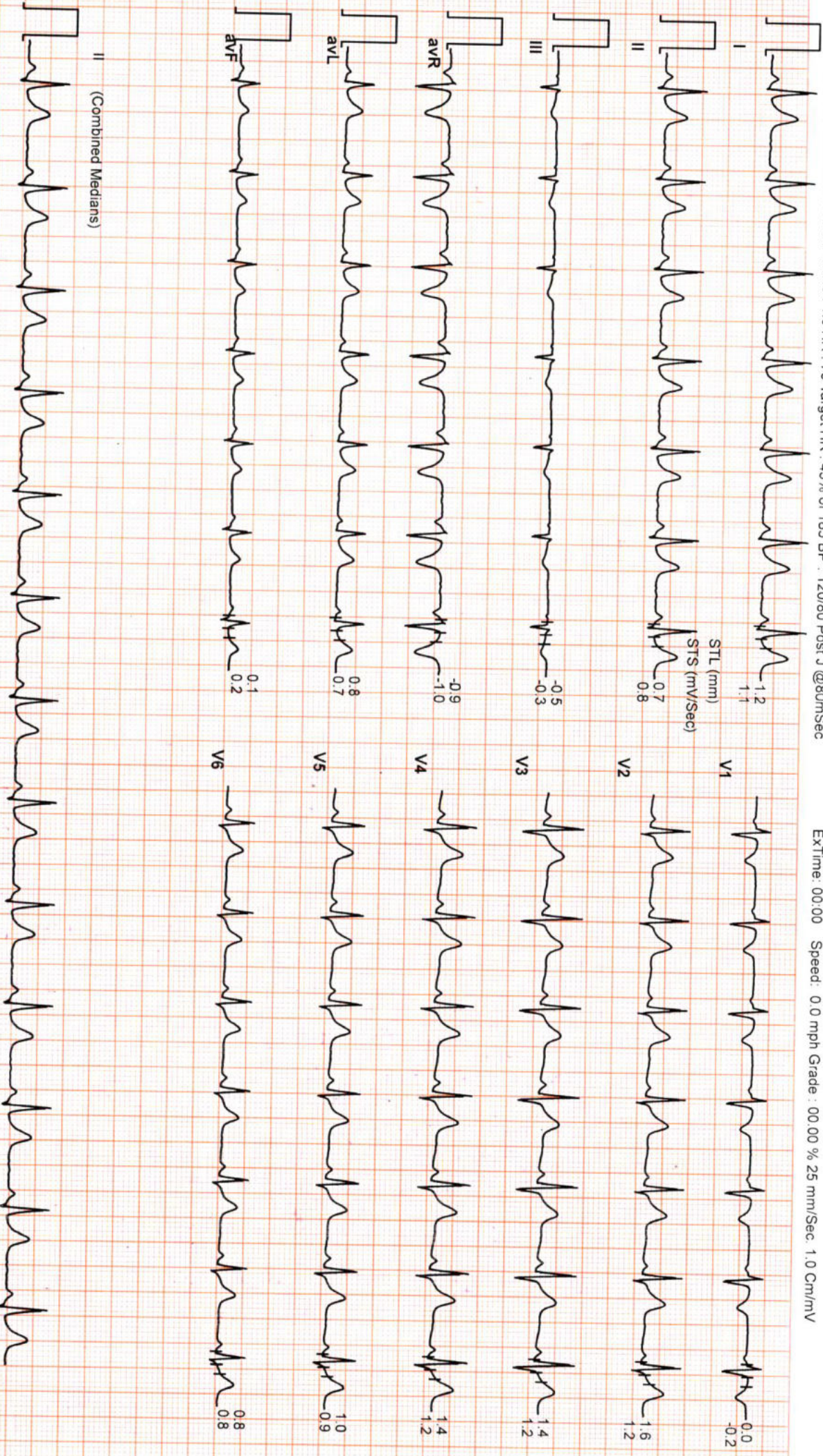


REMARKS:



Date: 17 / 04 / 2023 09:54:45 AM METS : 1.0 HR : 79 Target HR : 43% of 185 BP : 120/80 Post J @80mSec

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

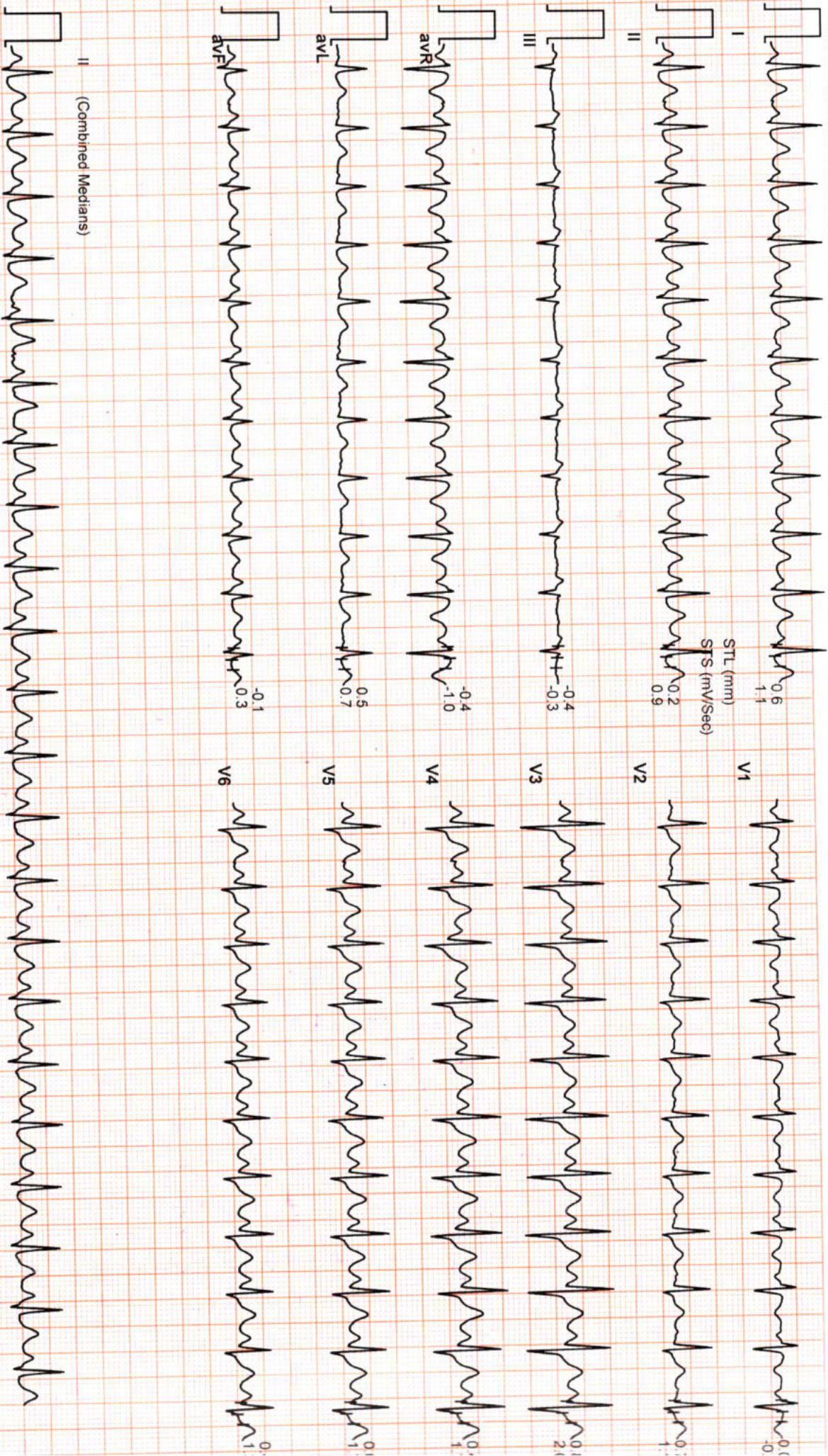


II (Combined Medians)



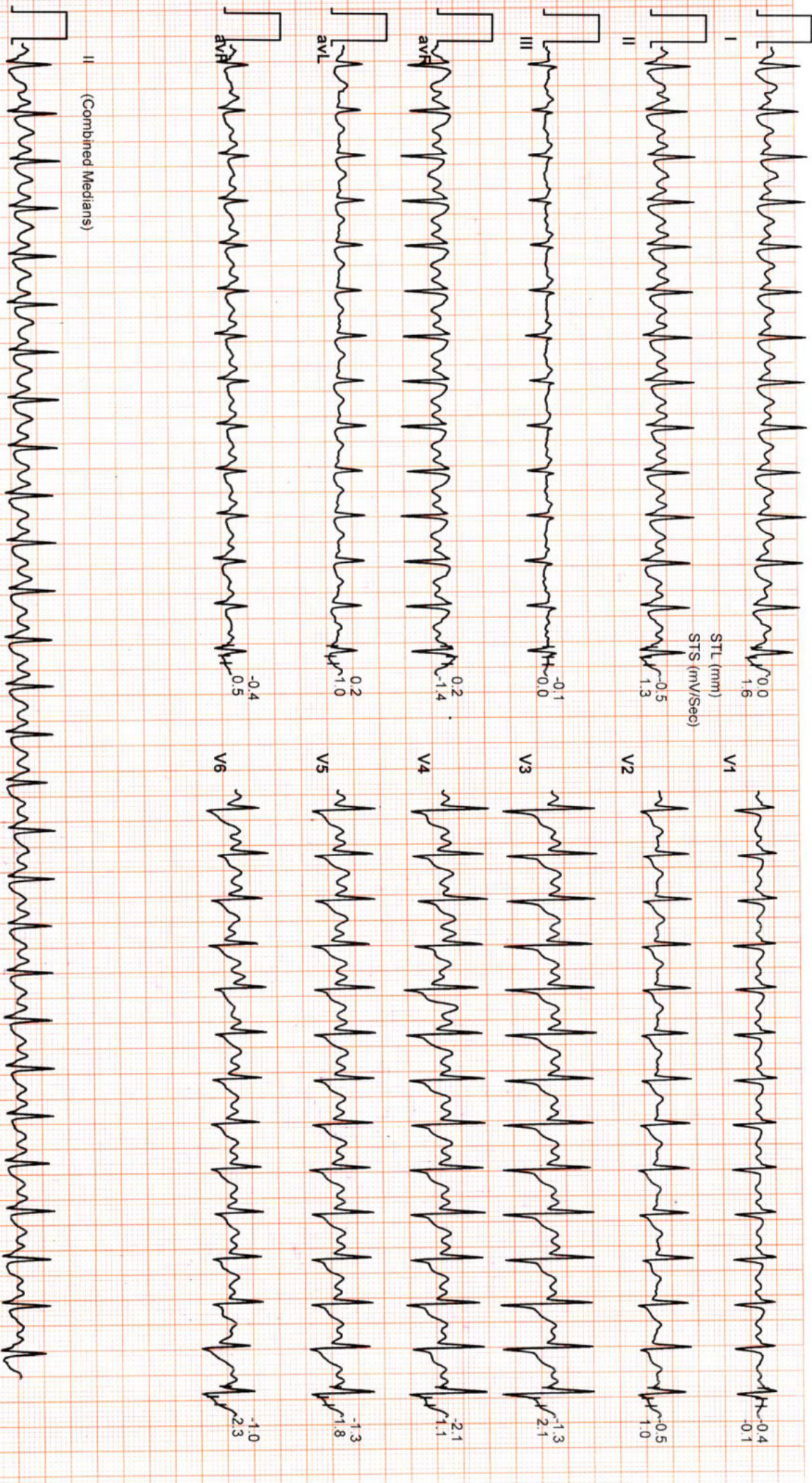
Date: 17 / 04 / 2023 09:54:45 AM METs : 4.7 HR : 129 Target HR : 70% of 185 BP : 130/80 Post J @80mSec

ExTime: 03:00 Speed: 1.7 mph Grade : 10.00 % 25 mm/Sec: 1.0 Cm/mV



Date: 17 / 04 / 2023 09:54:45 AM METs : 7.6 HR : 167 Target HR : 90% of 185 BP : 140/80 Post J @60mSec

EXTime: 06:29 Speed: 3.4 mph Grade : 14.00 % 25 mm/Sec. 1.0 Cm/mV

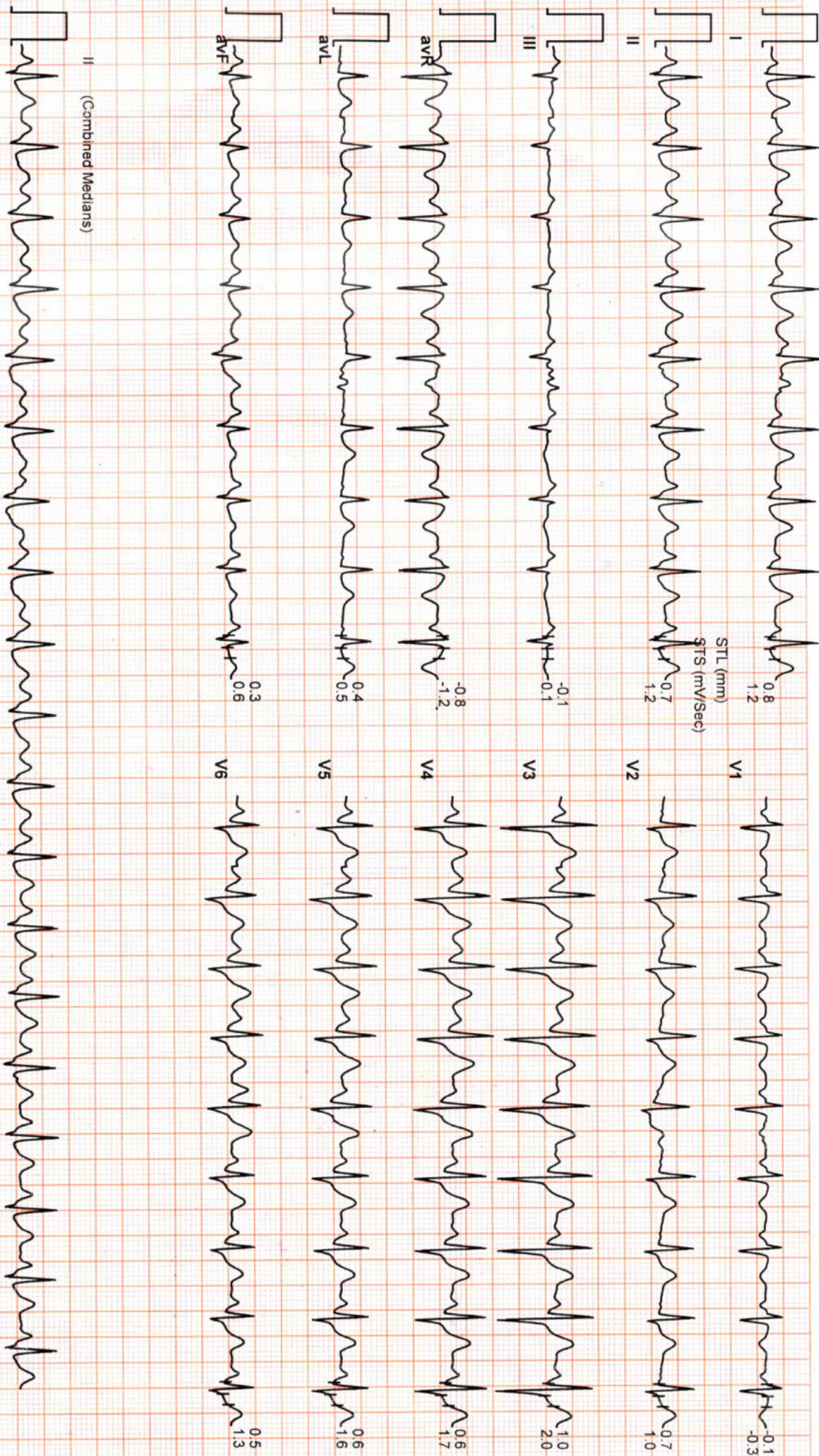


II (Combined Medians)



Date: 17 / 04 / 2023 09:54:45 AM METs : 1.0 HR : 112 Target HR : 61% of 185 BP : 150/80 Post J @80mSec

ExTime: 06:29 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec: 1.0 Cm/mv

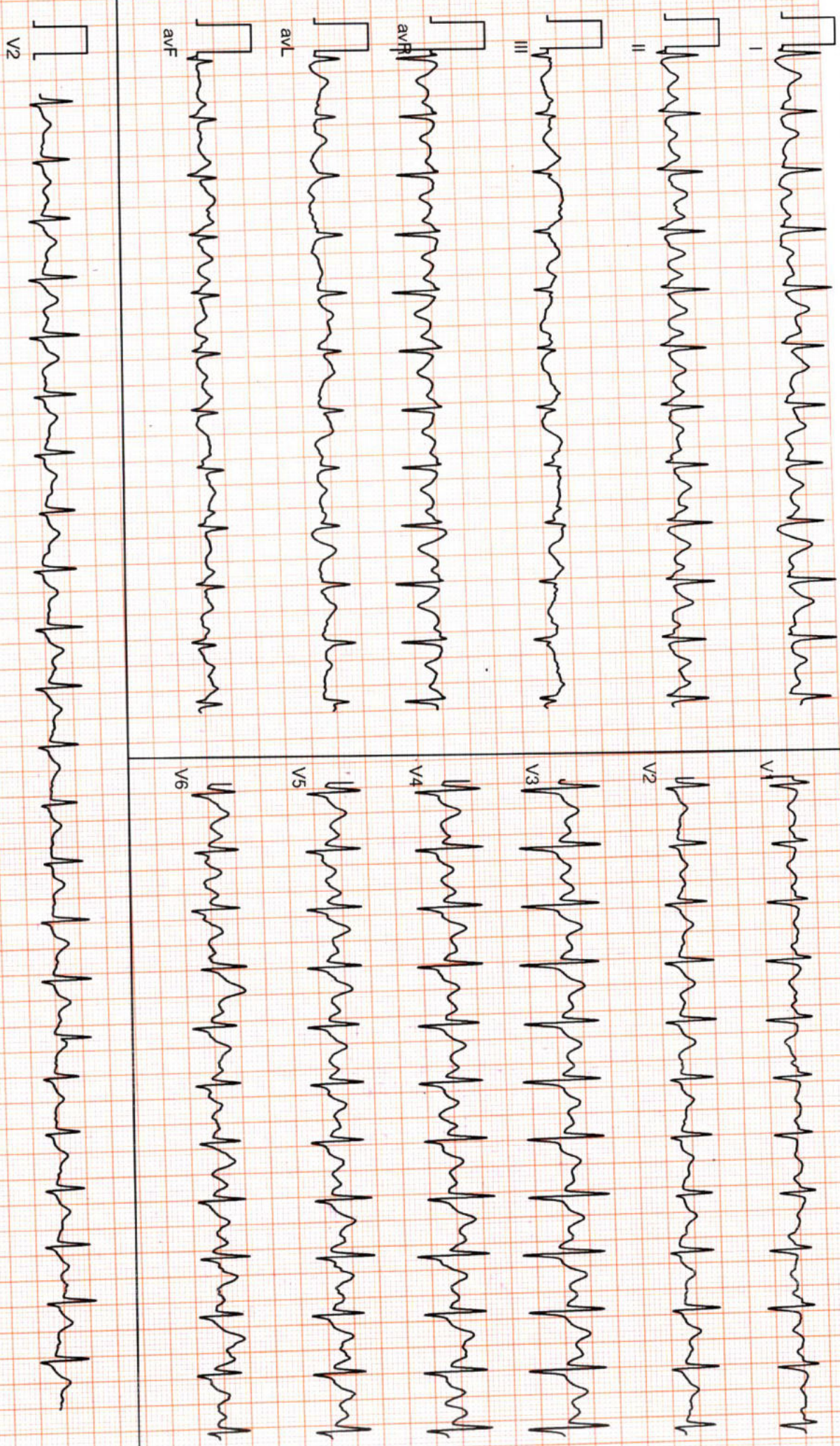


12346063 / SANGEETA JHA / 35 Yrs / Female / 153 Cm / 63 Kg

Date: 17 / 04 / 2023 09:54:45 AM METs : 1.1 HR : 136 Target HR : 74% of 185 BP : 160/80

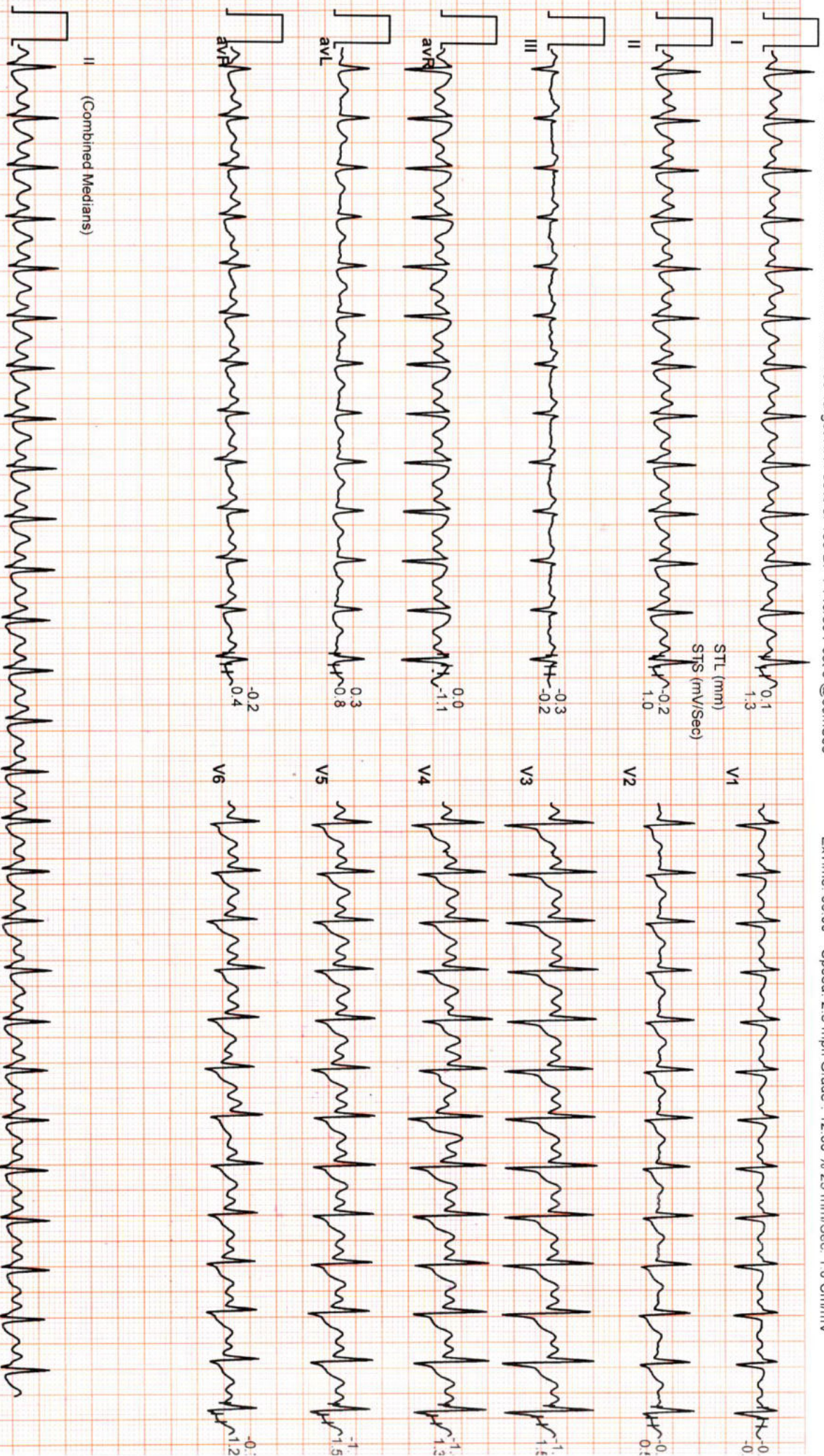
6 x 2 + Rhythm
Recovery : (00:59)

ExTime : 06:29 1.1 mph 0.0 % 25 mm/Sec. 1.0 Cm/mV BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz



Date: 17 / 04 / 2023 09:54:45 AM METs : 7.1 HR : 160 Target HR : 86% of 185 BP : 140/80 Post J @60mSec

ExTime: 06:00 Speed: 2.5 mph Grade : 12.00 % 25 mm/Sec: 1.0 Cm/mV



SUBURBAN DIGNOSTICS BHAYANDER

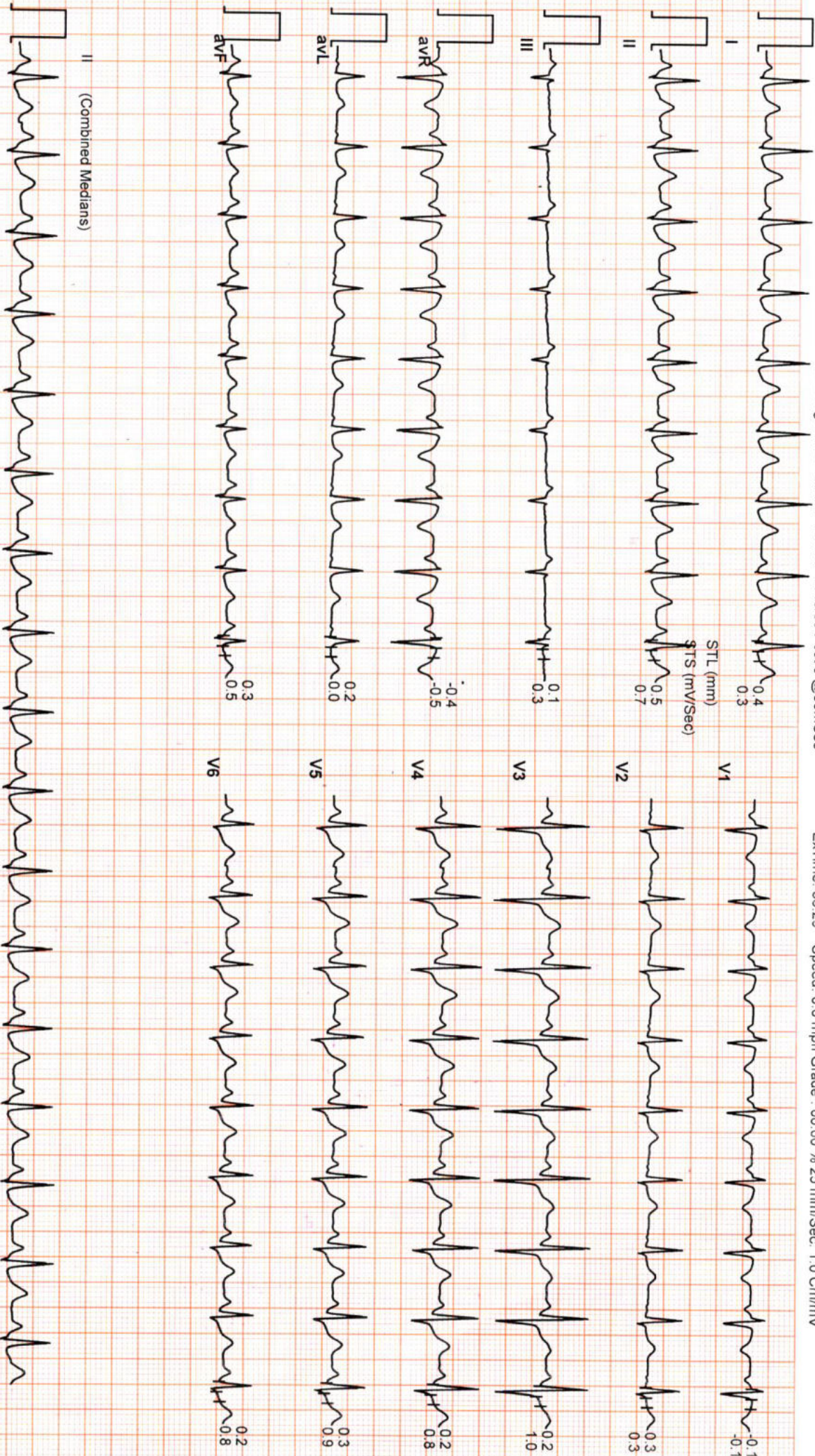
12346063 / SANGEETA JHA / 35 Yrs / Female / 153 Cm / 63 Kg

6X2 Combine Medians + 1 Rhythm
Recovery : (04:00)



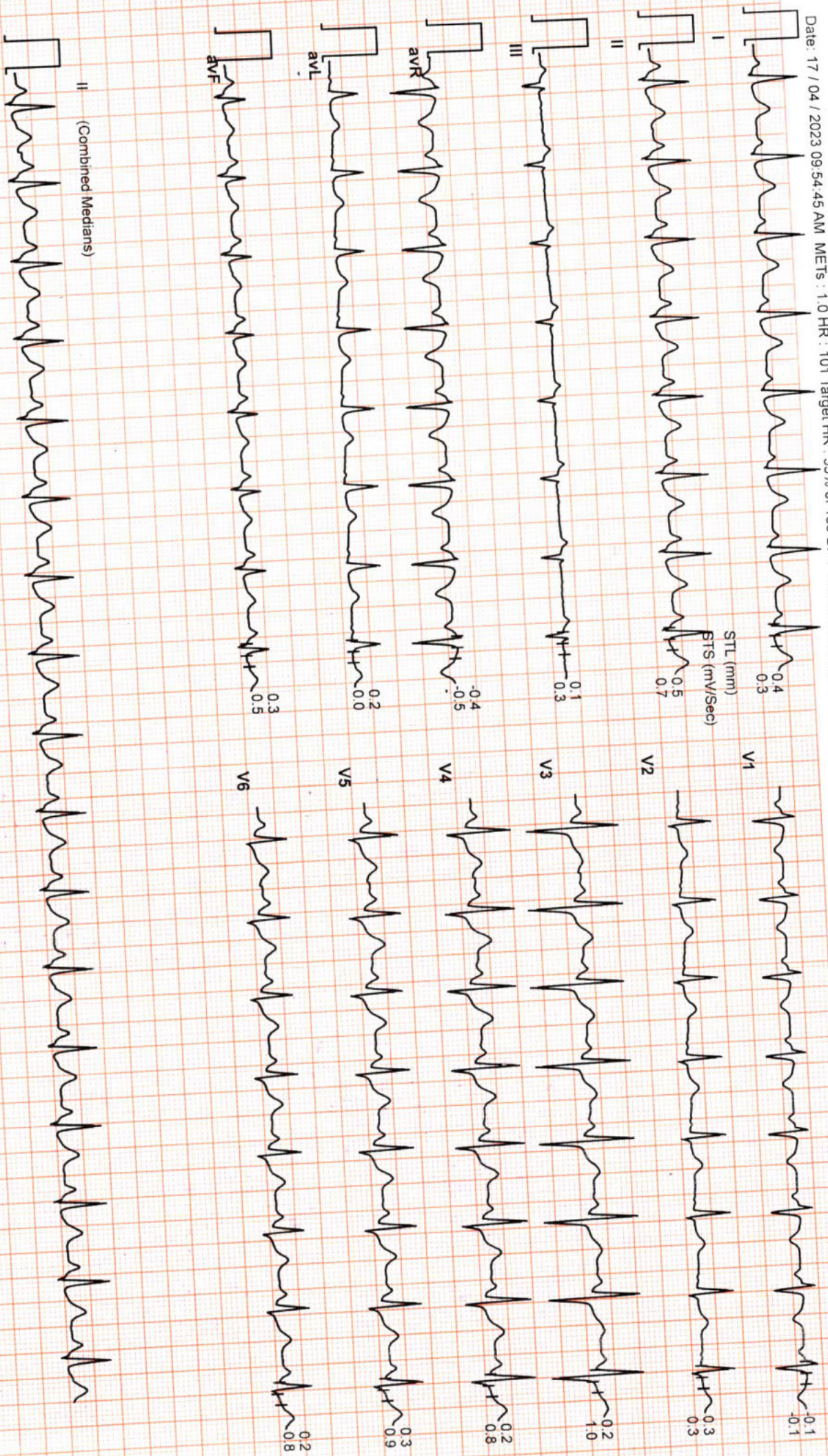
Date: 17 / 04 / 2023 09:54:45 AM METs : 1.0 HR : 104 Target HR : 56% of 185 BP : 140/80 Post J @60mSec

ExTime: 06:29 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec: 1.0 Cm/mV



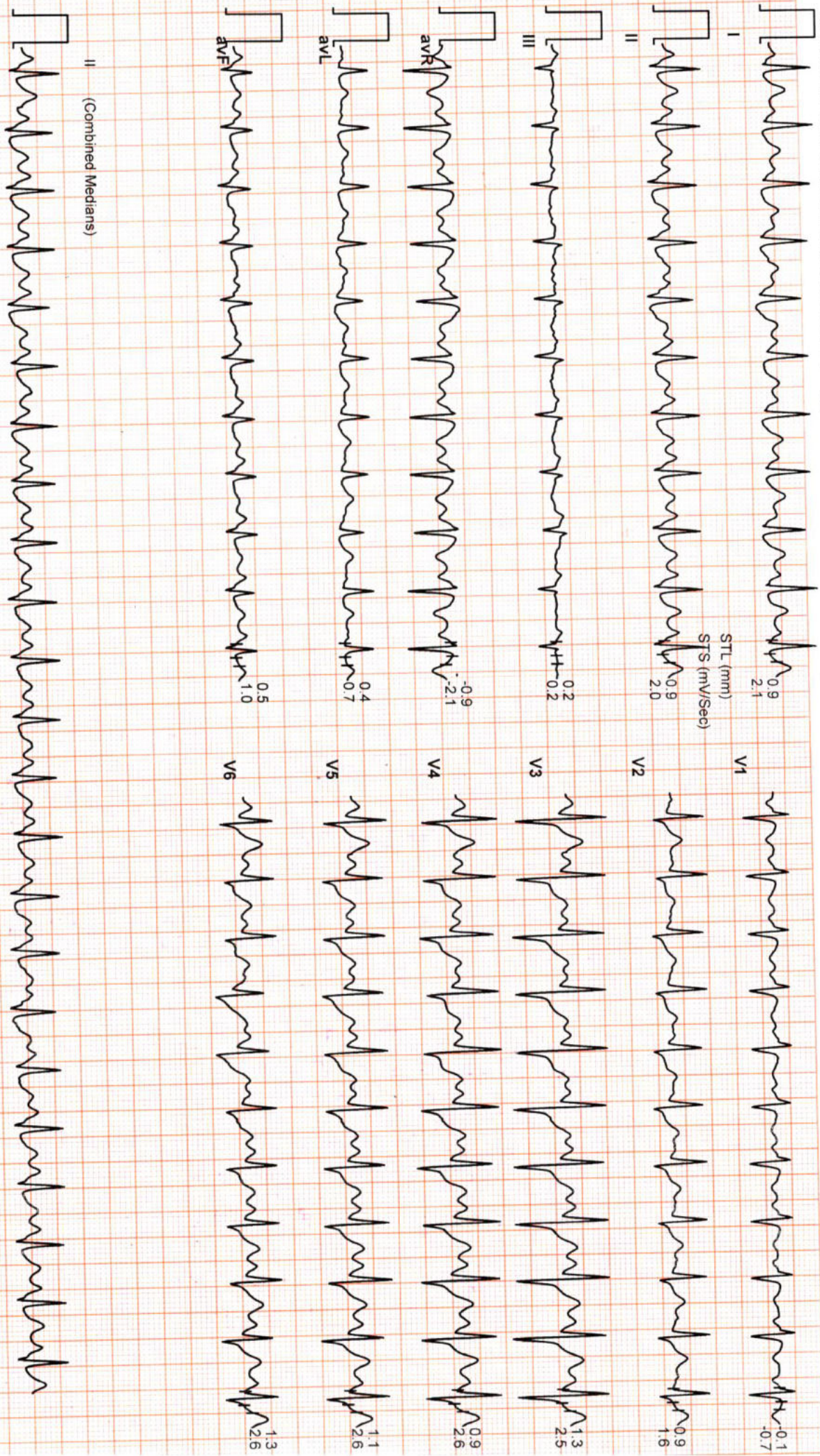
Date: 17 / 04 / 2023 09:54:45 AM METs : 1.0 HR : 101 Target HR : 55% of 185 BP : 140/80 Post J @80mSec

ExTime: 06:29 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec. 1.0 Cm/mV



Date: 17 / 04 / 2023 09:54:45 AM METs : 1.1 HR : 137 Target HR : 74% of 185 BP : 160/80 Post J @60mSec

ExTime: 06:29 Speed: 1.1 mph Grade : 00.00 % 25 mm/Sec: 1.0 Cm/mV





CID : 2310700608
Name : Mrs SANGEETA JHA
Age / Sex : 35 Years/Female
Ref. Dr :
Reg. Location : Bhayander East Main Centre

Reg. Date : 17-Apr-2023
Reported : 17-Apr-2023/13:34

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (13.5 cm), shape and shows smooth margins. It shows normal parenchymal echotexture. No obvious cystic or solid lesion made out in the parenchyma. The intra hepatic biliary and portal radicals appear normal. The main portal vein appears normal.

GALL BLADDER:

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

COMMON BILE DUCT:

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

PANCREAS:

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

KIDNEYS:

Right kidney measures 10.5 x 3.6 cm. Left kidney measures 10.4 x 4.4 cm. Both the kidneys are normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. Pelvicalyceal system is normal. No evidence of any calculus, hydronephrosis or mass lesion seen on both sides.

SPLEEN:

The spleen is normal in size (9.7 cm). Parenchyma appears normal. No evidence of focal lesion is noted.

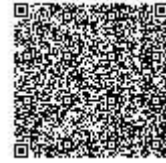
URINARY BLADDER:

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

There is no evidence of any lymphadenopathy or ascites.

UTERUS :

The uterus is anteverted and appears normal. It measures 8.5 x 4.6 x 2.3 cms in size. Myometrium appears homogenous. No obvious hypo or hyperechoic mass lesion made out in the myometrium. The endometrium measures 6.9 mm and appears normal.



Use a QR Code Scanner
Application To Scan the Code

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Name : Mrs SANGEETA JHA
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Ref. Dr :
Reg. Location : Bhayander East Main Centre

Reg. Date : 17-Apr-2023
Reported : 17-Apr-2023/13:34

OVARIES:

Right ovary : 3.1 x 1.6 x 1.7 cm, Vol : 4.9 cc.

Left ovary : 3.8 x 1.7 x 1.7 cm, Vol : 6.1 cc.

Both the ovaries are well visualised and appear normal in size, shape, position and echotexture.

There is no evidence of any ovarian or adnexal mass seen.

No free fluid is seen in the pouch of douglas.

IMPRESSION:

- **No significant abnormality made out.**

Kindly correlate clinically.

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

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

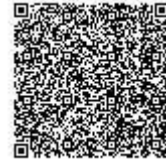
DR.VIBHA S KAMBLE
MBBS ,DMRD
Reg No -65470
Consultant Radiologist



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CID : 2310700608
Name : Mrs SANGEETA JHA
Age / Sex : 35 Years/Female
Ref. Dr :
Reg. Location : Bhayander East Main Centre

Reg. Date : 17-Apr-2023
Reported : 17-Apr-2023/13:34



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CID : 2310700608
Name : Mrs SANGEETA JHA
Age / Sex : 35 Years/Female
Ref. Dr :
Reg. Location : Bhayander East Main Centre

Reg. Date : 17-Apr-2023
Reported : 17-Apr-2023/10:25

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

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

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



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Application To Scan the Code

CID : 2310700608
Name : Mrs SANGEETA JHA
Age / Sex : 35 Years/Female
Ref. Dr :
Reg. Location : Bhayander East Main Centre

Reg. Date : 17-Apr-2023
Reported : 17-Apr-2023/10:25