



बैंक ऑफ़ बड़ौदा
Bank of Baroda



नाम

Name **Mr. SIDDHARTHA SHARMA**

कार्यकारी फुट नं.

E. C. No **117489**

अधिकृत प्राधिकारी
Issuing Authority

धारक के हस्ताक्षर
Signature of Holder

Dr. Manasee Kulkarni

M.B.B.S

2005/09/3439

- Low Fat, low sugar Diet.

Advice:

- Eye check-up

- Repeat Sugar Profile, Lipid Profile after 6 Months.

1)	Hypertension:	
2)	IHD	
3)	Arrhythmia	
4)	Diabetes Mellitus	Nil
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	Nil
14)	Cancer/lump growth/cyst	
15)	Congenital disease	
16)	Surgeries	
17)	Musculoskeletal System	

PERSONAL HISTORY:

1)	Alcohol	OCC.
2)	Smoking	OCC.
3)	Diet	veg + Egg.
4)	Medication	No



Dr. Manasee Kulkarni
M.B.B.S

2005/09/3439

PHYSICAL EXAMINATION REPORT

Patient Name	Sridharsh Sharma	Sex/Age	M/37
Date	19/01/2023	Location	Thane

History and Complaints

C/O - Eczema.

EXAMINATION FINDINGS:

Height (cms):	173	Temp (0c):	37.5
Weight (kg):	92.5	Skin:	Eczematous patches on forearms & legs.
Blood Pressure	120/80	Nails:	NAD
Pulse	72/min	Lymph Node:	NAD

Systems :

Cardiovascular:	NAD.
Respiratory:	
Genitourinary:	
GI System:	
CNS:	

Impression:

- BSL / F (Fupacred), HbA1c - ↑
 - ↑ Alkal Phosphatase. | Fatty Liver
 - Dyslipidemia. | chest Xray
 - need glass for L/E | ↑ BVPs



CID : 2301912285
Name : MR.SIDDHARTHA SHARMA
Age / Gender : 37 Years / Male
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 19-Jan-2023 / 08:28
Reported : 19-Jan-2023 / 11:19

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	15.8	13.0-17.0 g/dL	Spectrophotometric
RBC	5.23	4.5-5.5 mil/cmm	Elect. Impedance
PCV	46.4	40-50 %	Measured
MCV	89	80-100 fl	Calculated
MCH	30.3	27-32 pg	Calculated
MCHC	34.1	31.5-34.5 g/dL	Calculated
RDW	14.1	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	8700	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	39.9	20-40 %	
Absolute Lymphocytes	3471.3	1000-3000 /cmm	Calculated
Monocytes	5.0	2-10 %	
Absolute Monocytes	435.0	200-1000 /cmm	Calculated
Neutrophils	50.8	40-80 %	
Absolute Neutrophils	4419.6	2000-7000 /cmm	Calculated
Eosinophils	4.3	1-6 %	
Absolute Eosinophils	374.1	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	228000	150000-400000 /cmm	Elect. Impedance
MPV	10.6	6-11 fl	Calculated
PDW	18.3	11-18 %	Calculated

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2301912285
Name : MR.SIDDHARTHA SHARMA
Age / Gender : 37 Years / Male
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 19-Jan-2023 / 08:28
Reported : 19-Jan-2023 / 10:09

RBC MORPHOLOGY

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

Specimen: EDTA Whole Blood

ESR, EDTA WB, EDTA WB-ESR 6 2-15 mm at 1 hr. Sedimentation

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

AREAS OF SPECIAL EXPERTISE

OUR PRESENCE



Amit Taori

Dr.AMIT TAORI
M.D (Path)
Pathologist

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2301912285
Name : MR.SIDDHARTHA SHARMA
Age / Gender : 37 Years / Male
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 19-Jan-2023 / 08:28
Reported : 19-Jan-2023 / 12:18

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	105.3	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	155.9	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	1.05	0.1-1.2 mg/dl	Diazo
BILIRUBIN (DIRECT), Serum	0.38	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.67	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.8	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.5	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	21.0	5-40 U/L	IFCC without pyridoxal phosphate activation
SGPT (ALT), Serum	35.3	5-45 U/L	IFCC without pyridoxal phosphate activation
GAMMA GT, Serum	36.1	3-60 U/L	IFCC
ALKALINE PHOSPHATASE, Serum	142.8	40-130 U/L	PNPP
BLOOD UREA, Serum	17.5	12.8-42.8 mg/dl	Urease & GLDH
BUN, Serum	8.2	6-20 mg/dl	Calculated

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2301912285
Name : MR. SIDDHARTHA SHARMA
Age / Gender : 37 Years / Male
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 19-Jan-2023 / 11:08
Reported : 19-Jan-2023 / 12:30

CREATININE, Serum	0.88	0.67-1.17 mg/dl	Enzymatic
eGFR, Serum	104	>60 ml/min/1.73sqm	Calculated
URIC ACID, Serum	6.1	3.5-7.2 mg/dl	Uricase
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 G B Road Lab, Thane West
*** End Of Report ***

AREAS OF SPECIAL EXPERTISE

OUR PRESENCE



Amrit Taori

Dr. AMIT TAORI
M.D (Path)
Pathologist

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2301912285
Name : MR. SIDDHARTHA SHARMA
Age / Gender : 37 Years / Male
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 19-Jan-2023 / 08:28
Reported : 19-Jan-2023 / 11:19

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	6.0	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	125.5	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 G B Road Lab, Thane West.

*** End Of Report ***



Amit Taori

Dr. AMIT TAORI
M.D (Path)
Pathologist

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2301912285
Name : MR.SIDDHARTHA SHARMA
Age / Gender : 37 Years / Male
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 19-Jan-2023 / 08:28
Reported : 19-Jan-2023 / 12:15

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 (5.0)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.015	1.010-1.030	Chemical Indicator
Transparency	Slight hazy	Clear	-
Volume (ml)	50	-	-
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	2-3	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	3-5		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	3-5	Less than 20/hpf	

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 G B Road Lab, Thane West



Amir Taori

Dr.AMIT TAORI
M.D (Path)
Pathologist

Authenticity Check



Use a QR Code Scanner Application To Scan the Code

CID : 2301912285
 Name : MR.SIDDHARTHA SHARMA
 Age / Gender : 37 Years / Male
 Consulting Dr. : -
 Reg. Location : G B Road, Thane West (Main Centre)

Collected :
 Reported :

*** End Of Report ***



Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2301912285
Name : MR. SIDDHARTHA SHARMA
Age / Gender : 37 Years / Male
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 19-Jan-2023 / 08:28
Reported : 19-Jan-2023 / 12:57

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

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	O
Rh TYPING	Positive

NOTE: Test performed by 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 ***



Amir Taori

Dr. AMIT TAORI
M.D (Path)
Pathologist

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2301912285
Name : MR.SIDDHARTHA SHARMA
Age / Gender : 37 Years / Male
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 19-Jan-2023 / 08:28
Reported : 19-Jan-2023 / 12:25

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	189.7	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	190.1	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	39.1	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	150.6	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	113.0	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	37.6	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.9	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.9	0-3.5 Ratio	Calculated

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



Amid Taori

Dr.AMIT TAORI
M.D (Path)
Pathologist

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2301912285
Name : MR. SIDDHARTHA SHARMA
Age / Gender : 37 Years / Male
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 19-Jan-2023 / 08:28
Reported : 19-Jan-2023 / 11:42

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
THYROID FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Free T3, Serum	4.9	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	16.8	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	1.48	0.35-5.5 microIU/ml	ECLIA



Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2301912285
Name : MR.SIDDHARTHA SHARMA
Age / Gender : 37 Years / Male
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 19-Jan-2023 / 08:28
Reported : 19-Jan-2023 / 11:42

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 upto 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:

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

Reference:

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

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



Amid Taori

Dr. AMIT TAORI
M.D (Path)
Pathologist

Date:- 19/1/23
Name:- Sidhartha Sheshaiah
Sex / Age: M - 37
CID:

EYE CHECK UP

Chief complaints: *NU*

Systemic Diseases: *NU*

Past history: *NU*

Unaided Vision: *RR 6/6 2009 LR 6/24 NV R - NO LENS*

Aided Vision:

Refraction:

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / ~~Abnormal~~

Remark:

Needs glasses for R/E

MR. PRAKASH KUDVA
Prakash
SR. OPTOMETRIST

Reg. No. : 2301912285	Sex : MALE
Name : MR. SIDDHARTHA SHARMA	Age : 37 YRS
Ref. By : -----	Date : 19.01.2023

USG ABDOMEN AND PELVIS

LIVER: Liver appears mildly enlarged in size (15.4 cm) and shows increased echoreflexivity. 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: Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification. Pancreatic duct is not dilated.

KIDNEYS: Right kidney measures 10.5 x 4.5 cm. Left kidney measures 10.4 x 4.7 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, 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. No evidence of any focal lesion. Median lobe does not show significant hypertrophy.

No free fluid or significant lymphadenopathy is seen.

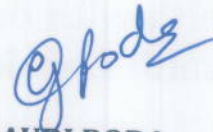
Reg. No. : 2301912285	Sex : MALE
Name : MR. SIDDHARTHA SHARMA	Age : 37 YRS
Ref. By : -----	Date : 19.01.2023

IMPRESSION:

MILD HEPATOMEGALY WITH GRADE I FATTY INFILTRATION OF LIVER.

Advice: Clinical co-relation and further evaluation.

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.



DR. GAURI RODA
MBBS, DMRE
(CONSULTANT RADIOLOGIST)

AREA OF SPECIAL EXPERTISE

OUR PRESENCE

022-6170-0000

Reg. No. :2301912285	Sex : MALE
Name : MR.SIDDHARTHA SHARMA	Age : 37 YRS
Ref. By : -----	Date : 19.01.2023

X-RAY CHEST PA VIEW

There is evidence of mildly increased bilateral bronchovascular prominence.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The aorta shows normal radiological features.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

Clinico pathological co-relation.



DR.GAURI RODA
MBBS,DMRE
(CONSULTANT RADIOLOGIST)

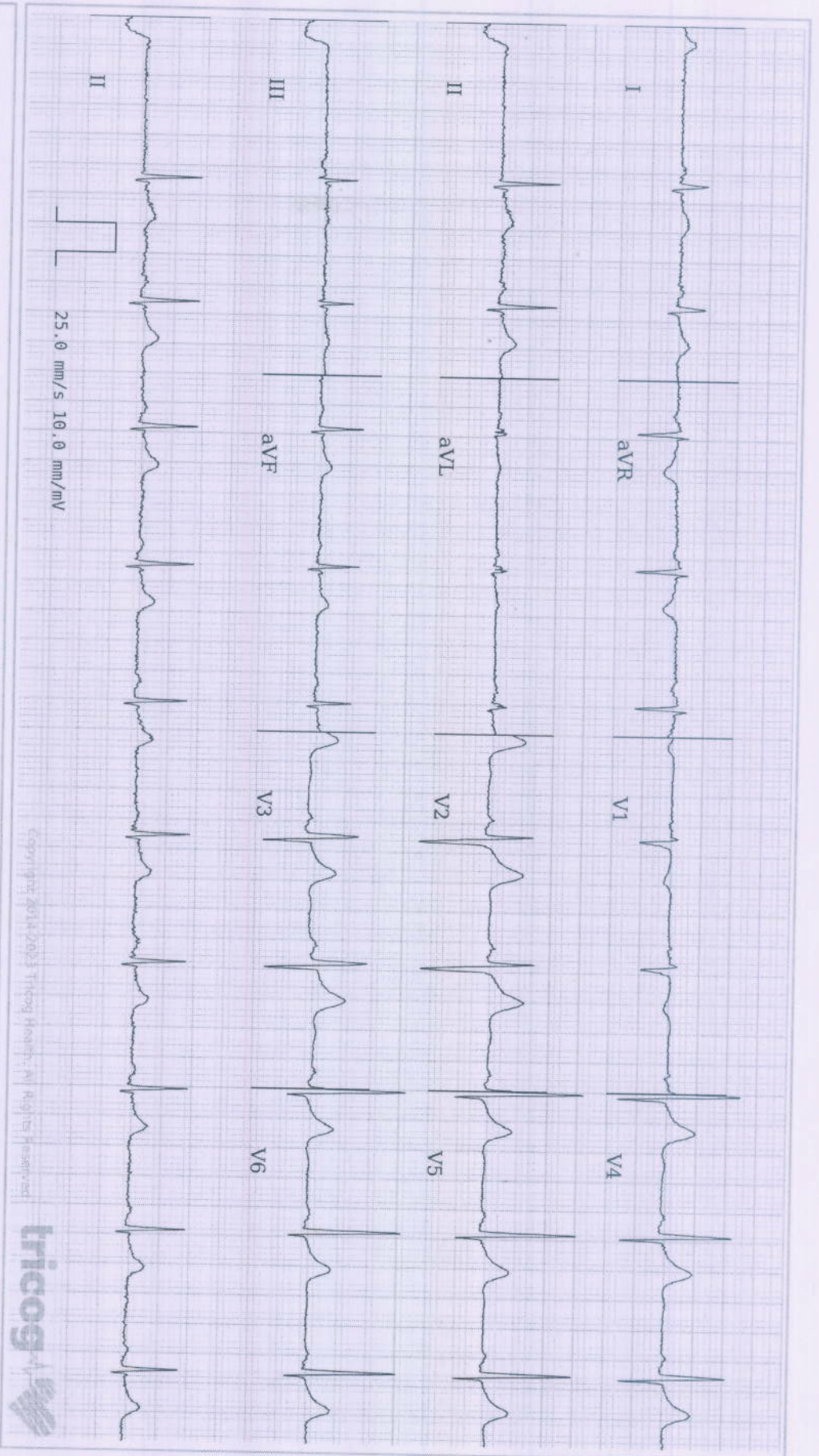
AREAS OF SPECIAL EXPERTISE

COURTESY

022-6170-0000

Patient Name: **SIDDHARTHA SHARMA**
Patient ID: **2301912285**

SUBURBAN DIAGNOSTICS - G B ROAD, THANE WEST
Date and Time: **19th Jan 23 9:35 AM**



Age **37** **1** **16**
years months days

Gender **Male**

Heart Rate **67bpm**

Patient Vitals

BP: **NA**
Weight: **92 kg**
Height: **173 cm**
Pulse: **NA**
SpO2: **NA**
Resp: **NA**
Others:

Measurements

QRSD: **80ms**
QT: **394ms**
QTc: **416ms**
PR: **136ms**
P-R-T: **29° 64° 49°**

ECG Within Normal Limits: Sinus Rhythm. Please correlate clinically.

REPORTED BY

DR. SHALIKA PILLAI
MBBS, MD Physician
MD Physician
49972

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 vital are as entered by the clinician and not derived from the ECG.

SUBURBAN DIAGNOSTICS (THANE GB ROAD)

Report



232 (2201912285) / SIDDHARTHA SHARMA / 37 Yrs / M / 173 Cms / 92 Kg
 Date: 19 / 01 / 2023 10:12:52 AM

Email:

Stage	Time	Duration	Speed(mph)	Elevation	METS	Rate	%THR	BP	RPP	PVC	Comments
Supine	00:06	0:06	00.0	00.0	01.0	084	46%	120/80	100	00	
Standing	00:15	0:09	00.0	00.0	01.0	084	46%	120/80	100	00	
HV	00:25	0:10	00.0	00.0	01.0	078	43%	120/80	093	00	
ExStart	00:34	0:09	00.0	00.0	01.0	085	46%	120/80	102	00	
BRUCE Stage 1	03:34	3:00	01.7	10.0	04.7	109	60%	130/80	141	00	
BRUCE Stage 2	06:34	3:00	02.5	12.0	07.1	133	73%	140/80	186	00	
PeakEx	08:17	1:43	03.4	14.0	08.9	153	84%	150/80	229	00	
Recovery	09:17	1:00	00.0	00.0	01.2	129	70%	150/80	193	00	
Recovery	10:17	2:00	00.0	00.0	01.0	103	56%	150/80	154	00	
Recovery	12:17	4:00	00.0	00.0	01.0	097	53%	150/80	145	00	
Recovery	13:46	5:30	00.0	00.0	01.0	108	59%	130/80	140	00	

FINDINGS :

Exercise Time : 07:43
 Initial HR (ExStrt) : 85 bpm 46% of Target 183
 Initial BP (ExStrt) : 120/80 (mm/Hg)
 Max Workload Attained : 8.9 Fair response to induced stress
 Max ST Dep Lead & Avg ST Value : II & -5.9 mm in Recovery
 Test End Reasons : Fatigue, Heart Rate Achieved

Max HR Attained 153 bpm 84% of Target 183
 Max BP Attained 150/80 (mm/Hg)


Dr. SHAILAJA PILLAI
 M.D. (GEN.MED)
 Doctor : DR SHAILAJA PILLAI, R.NO. 49972



EMail: 232/sibDHARTHA SHARMA / 37 Yrs / M / 173 Cms / 92 Kg Date: 19 / 01 / 2023 10:12:52 AM

REPORT :

PROCEDURE DONE: Graded exercise treadmill stress test.

STRESS ECG RESULTS: The initial HR was recorded as 84.0 bpm, and the maximum predicted Target Heart Rate 183.0. The BP increased at the time of generating report as 150.0/80.0 mmHg The Max Dep went upto 0.1. 0.0 Ectopic Beats were observed during the Test. The Test was completed because of Fatigue, Heart Rate Achieved.

CONCLUSIONS:

1. TMT is negative for exercise induced ischemia.
2. Normal chronotropic and Normal Inotropic response.
3. No significant ST T changes seen.
4. Vibrations seen interpretation difficult.

DR. SHAILAJA PILLAI

M.D. (GEN.MED)

R.NO. 49972

Doctor : DR SHAILAJA PILLAI





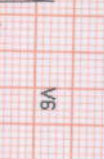
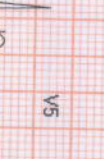
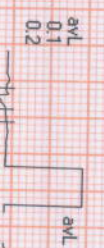
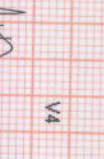
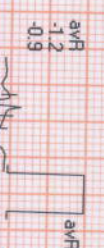
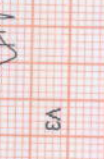
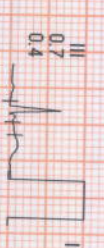
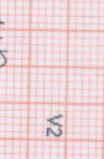
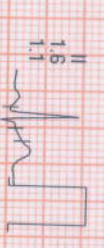
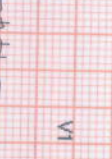
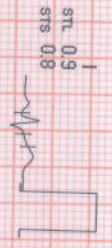
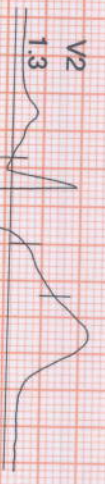
Date: 19/01/2023 10:12:52 AM

METS: 1.0/87 bpm 48% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

4X 80 ms Post J

EXTime: 00:00 0.0 mph, 0.0%

25 mm/Sec. 1.0 Cm/mV



REMARKS:

Date: 19 / 01 / 2023 10:12:52 AM

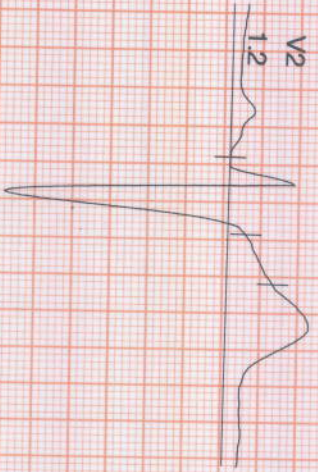
METS: 1.0 / 84 bpm 46% of THR BP: 120/80 mmHg Raw ECG/ BLCOn/ Notch On/ HF 0.05 Hz/LF 100 Hz

4X

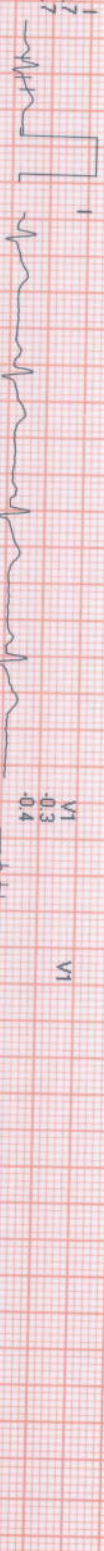
80 mS Post J

EXTime: 00:00 0.0 mph, 0.0%

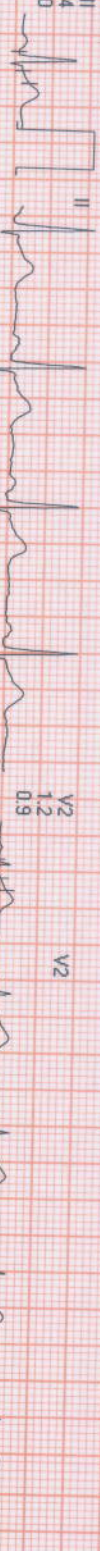
25 mm/Sec. 1.0 Cm/mV



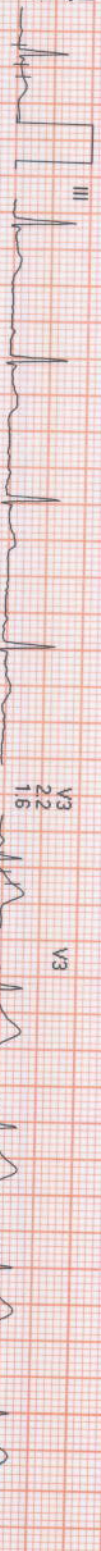
STL 0.7
STs 0.7



II 1.4
III 1.0



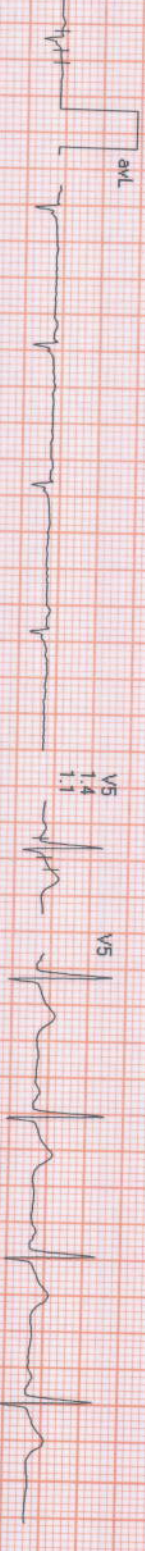
III 0.7
IV 0.4



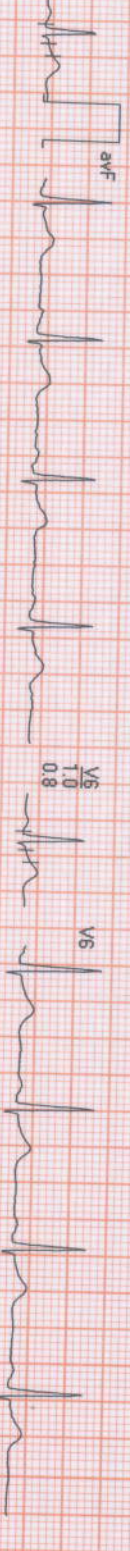
aVR -1.1
aVL -0.9



aVL 0.0
aVF 0.2

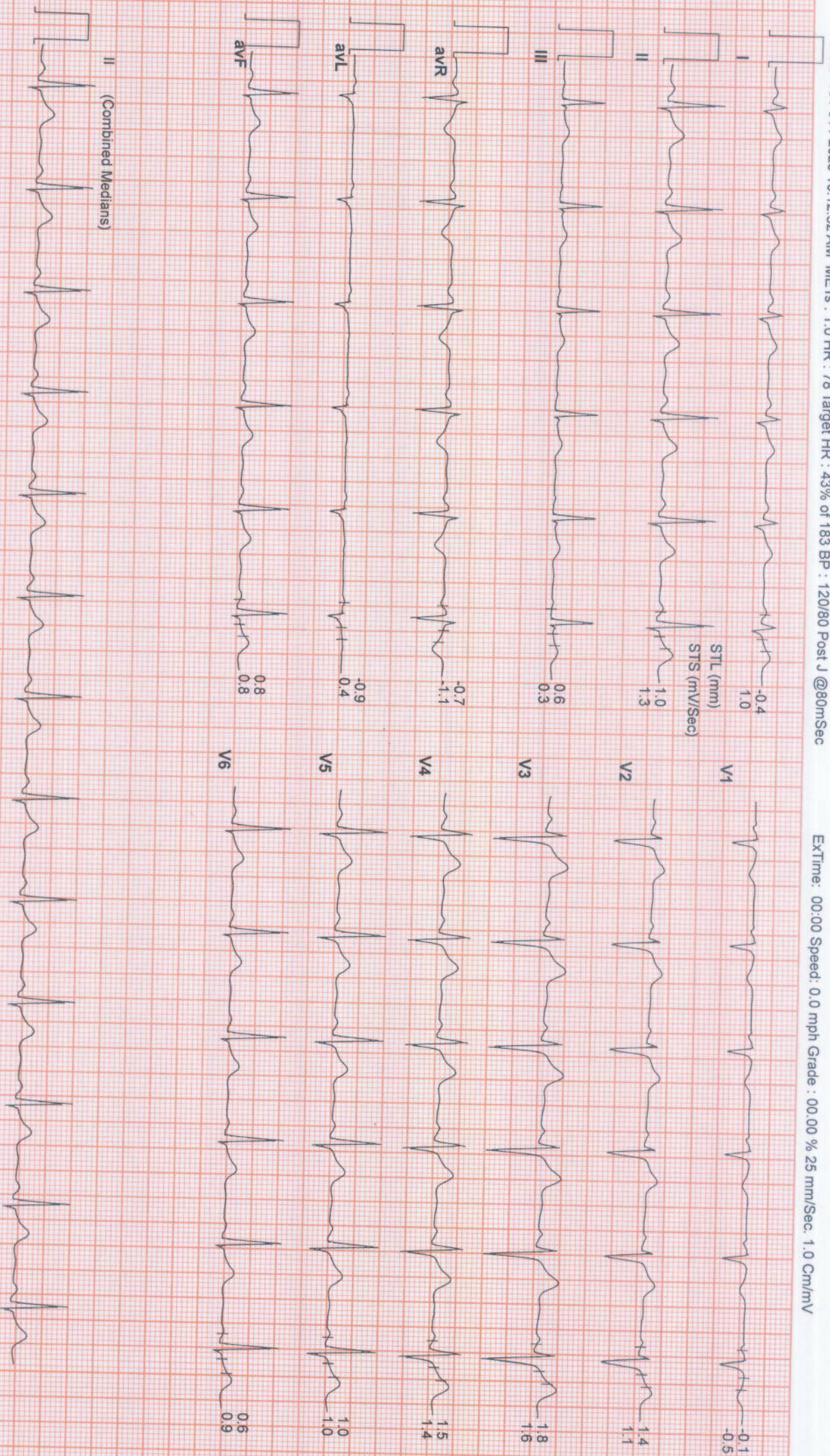


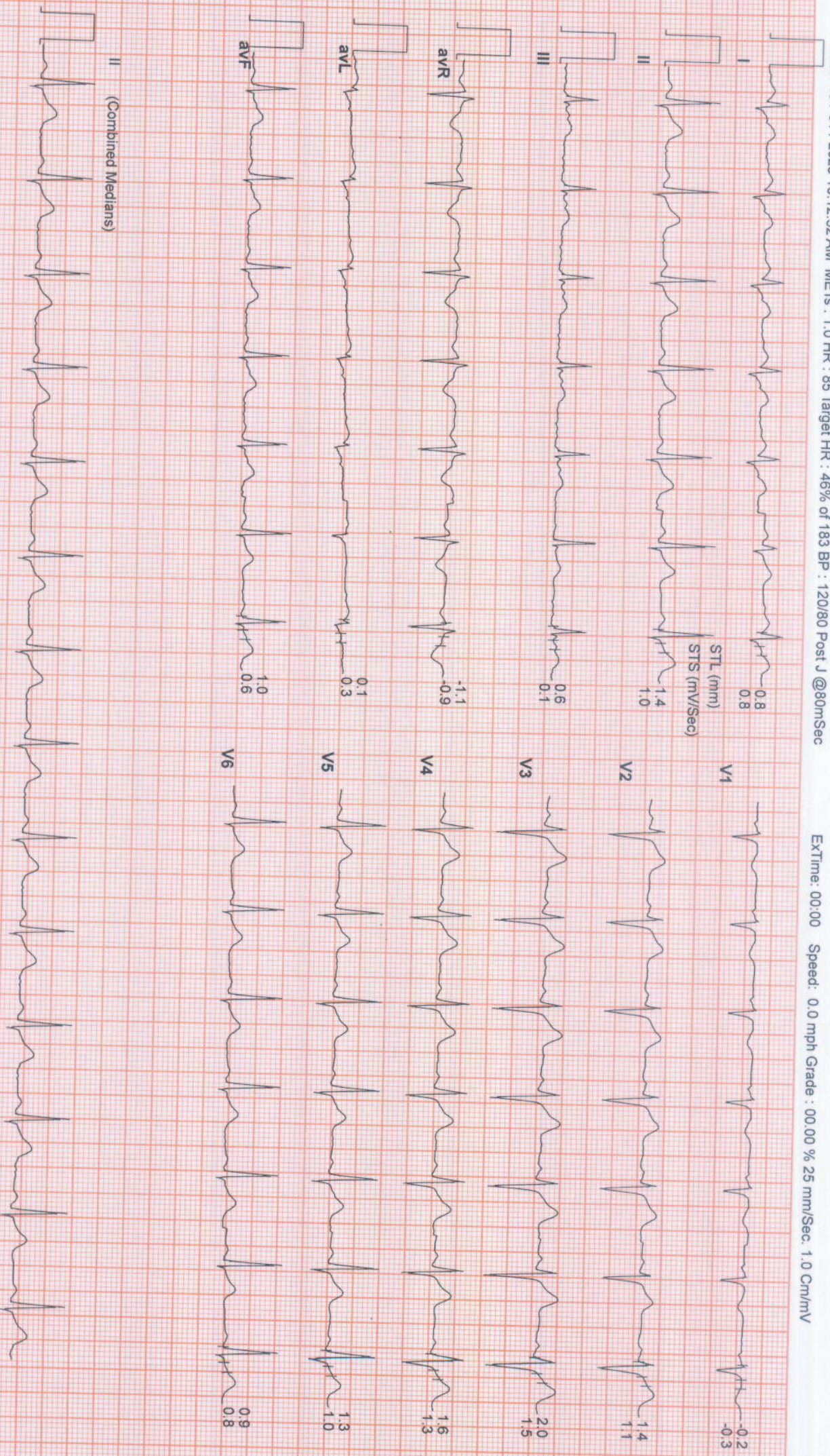
aVF 1.0
V6 0.8

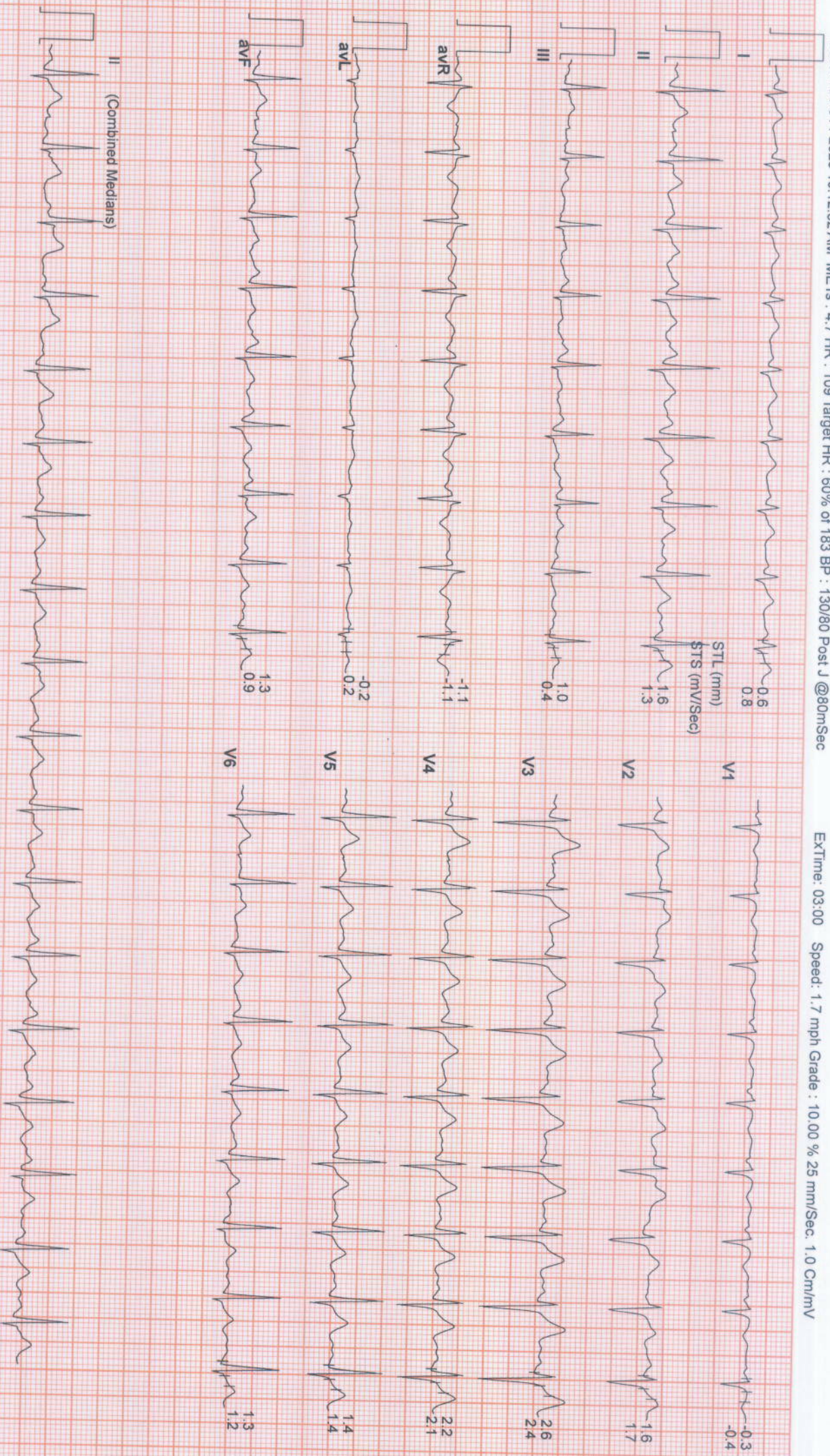


REMARKS:









SUBURBAN DIAGNOSTICS (THANE GB ROAD)

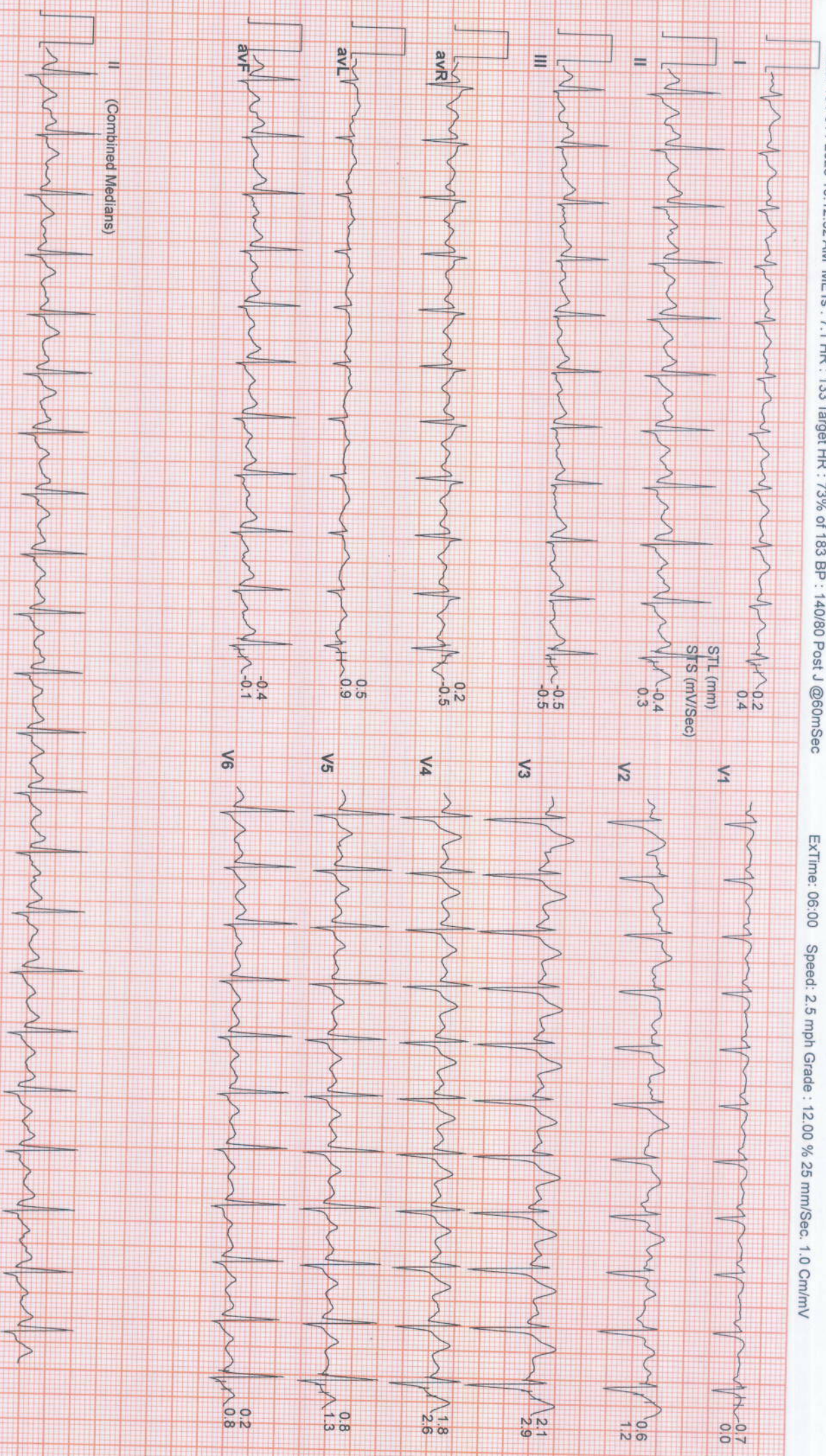
232 / SIDDHARTHA SHARMA / 37 Yrs / Male / 173 Cm / 92 Kg

Date: 19 / 01 / 2023 10:12:52 AM METS : 7.1 HR : 133 Target HR : 73% of 183 BP : 140/80 Post J @60mSec

6X2 Combine Medians + 1 Rhythm
BRUCE : Stage 2 (03:00)



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



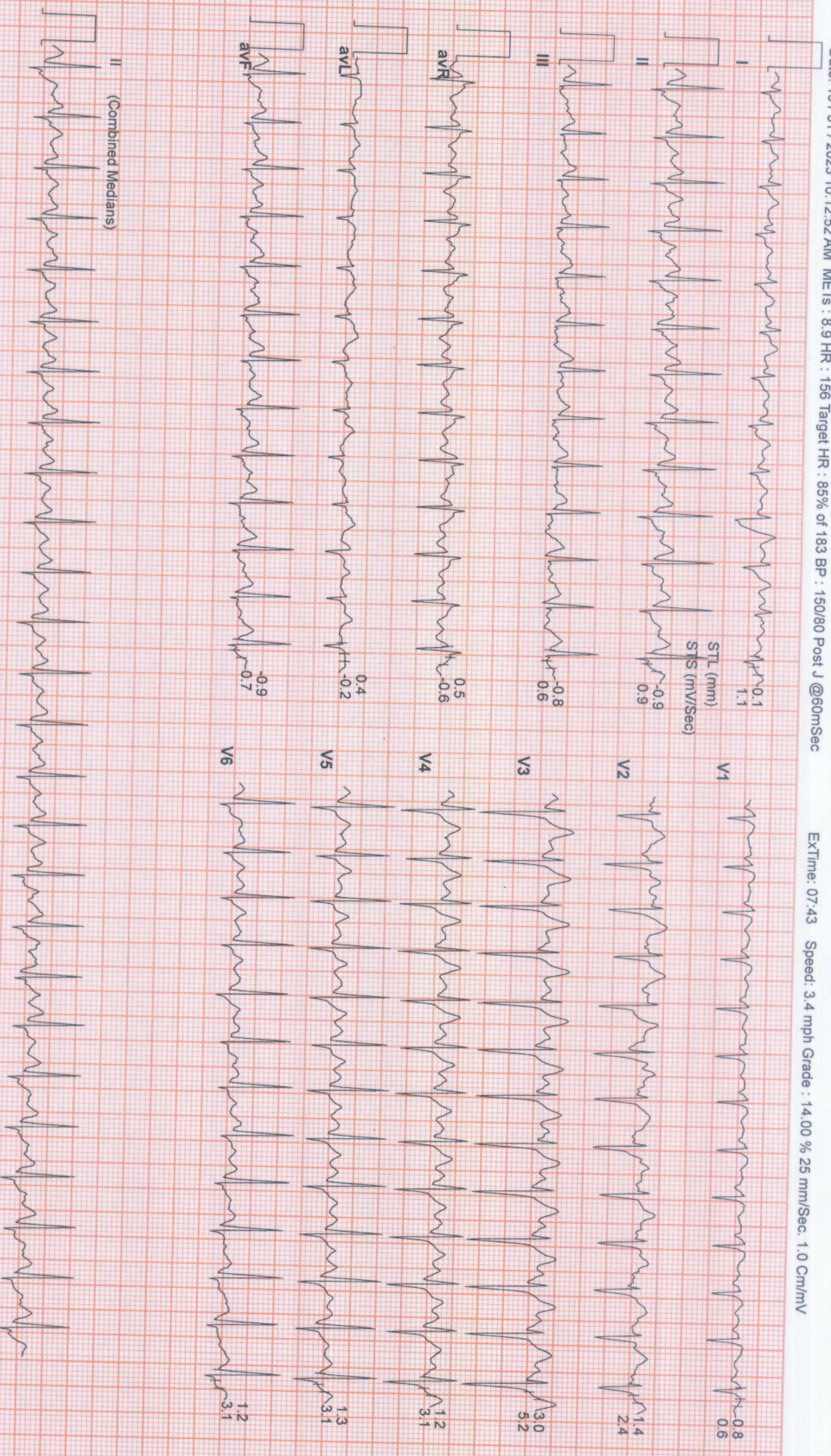
SUBURBAN DIAGNOSTICS (THANE GB ROAD)

232 / SIDDHARTHA SHARMA / 37 Yrs / Male / 173 Cm / 92 Kg

Date: 19 / 01 / 2023 10:12:52 AM METs : 8.9 HR : 156 Target HR : 85% of 183 BP : 150/80 Post J @60mSec

6X2 Combine Medians + 1 Rhythm PeakEx

ExTime: 07:43 Speed: 3.4 mph Grade : 14.00 % 25 mm/Sec. 1.0 Cm/mV



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

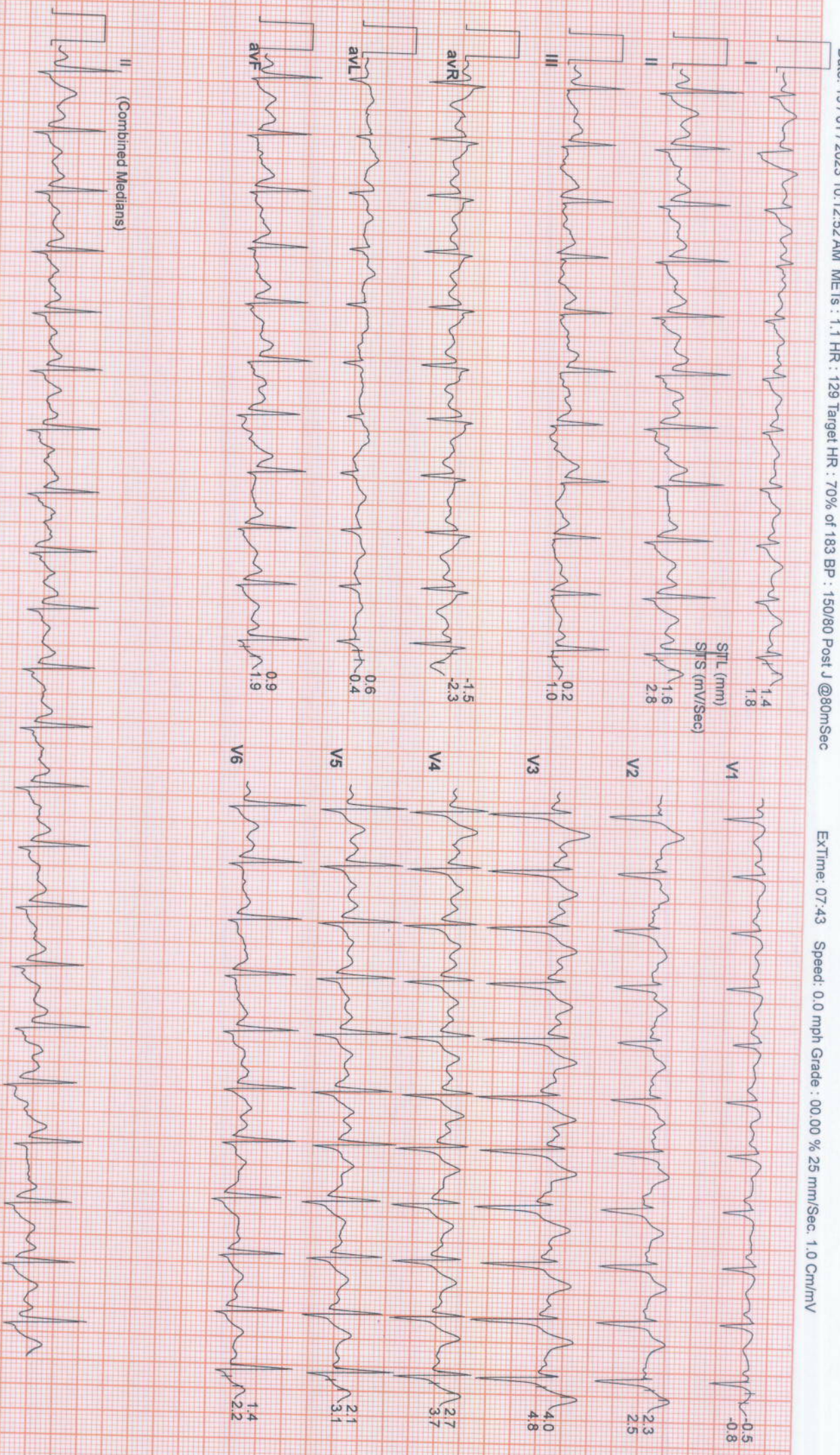
232 / SIDDHARTHA SHARMA / 37 Yrs / Male / 173 Cm / 92 Kg

Date: 19 / 01 / 2023 10:12:52 AM METs : 1.1 HR : 129 Target HR : 70% of 183 BP : 150/80 Post J @80mSec

ExTime: 07:43 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV

6X2 Combine Medians + 1 Rhythm

Recovery : (01:00)



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

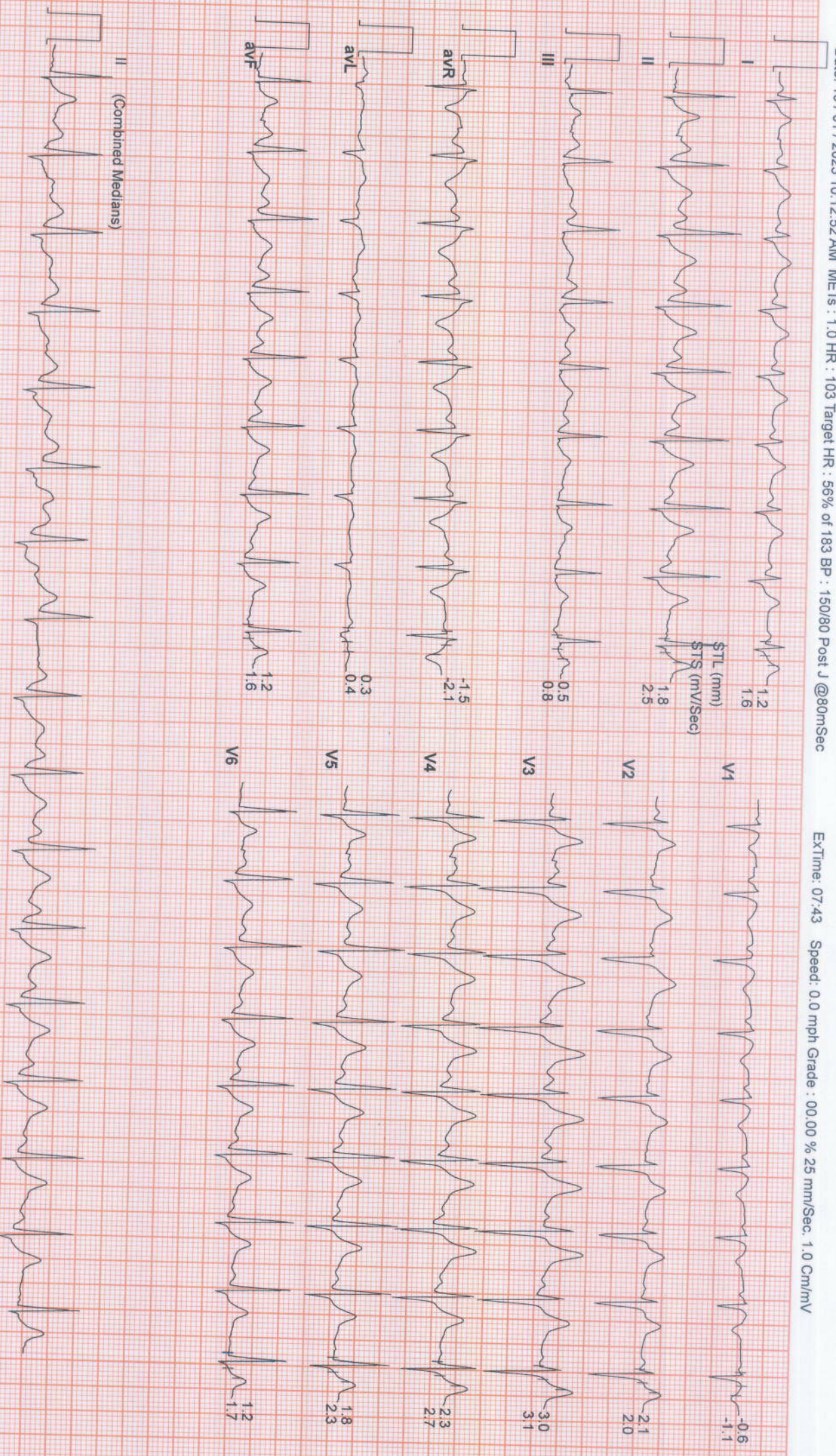
232 / SIDDHARTHA SHARMA / 37 Yrs / Male / 173 Cm / 92 Kg

Date: 19 / 01 / 2023 10:12:52 AM METs : 1.0 HR : 103 Target HR : 56% of 183 BP : 150/80 Post J @80mSec

6X2 Combine Medians + 1 Rhythm
Recovery : (02:00)



ExTime: 07:43 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



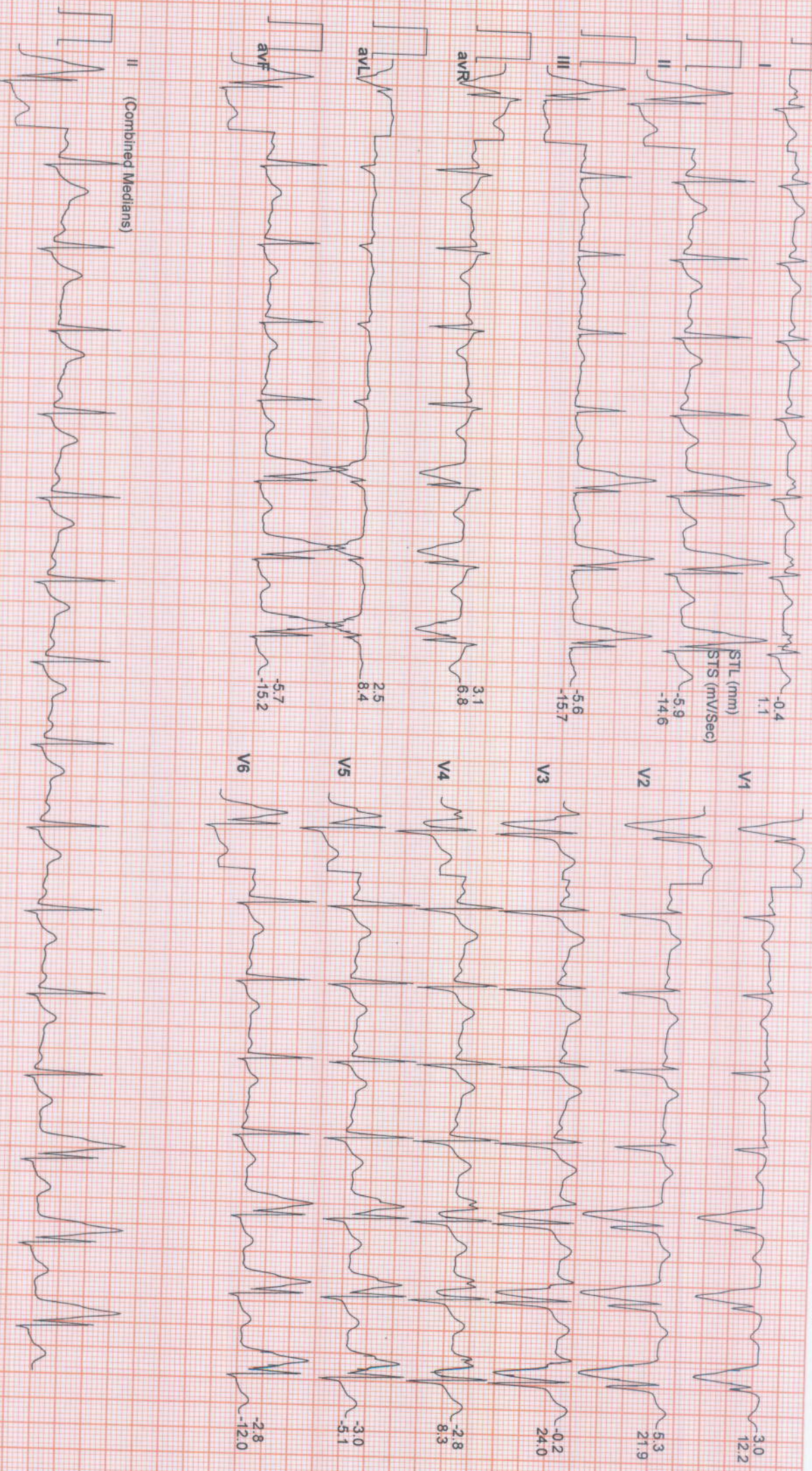
SUBURBAN DIAGNOSTICS (THANE GB ROAD)

232 / SIDDHARTHA SHARMA / 37 Yrs / Male / 173 Cm / 92 Kg

Date: 19/01/2023 10:12:52 AM METs : 1.0 HR : 97 Target HR : 53% of 183 BP : 150/80 Post J @50mSec

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

EXTime: 07:43 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

232 / SIDDHARTHA SHARMA / 37 Yrs / Male / 173 Cm / 92 Kg

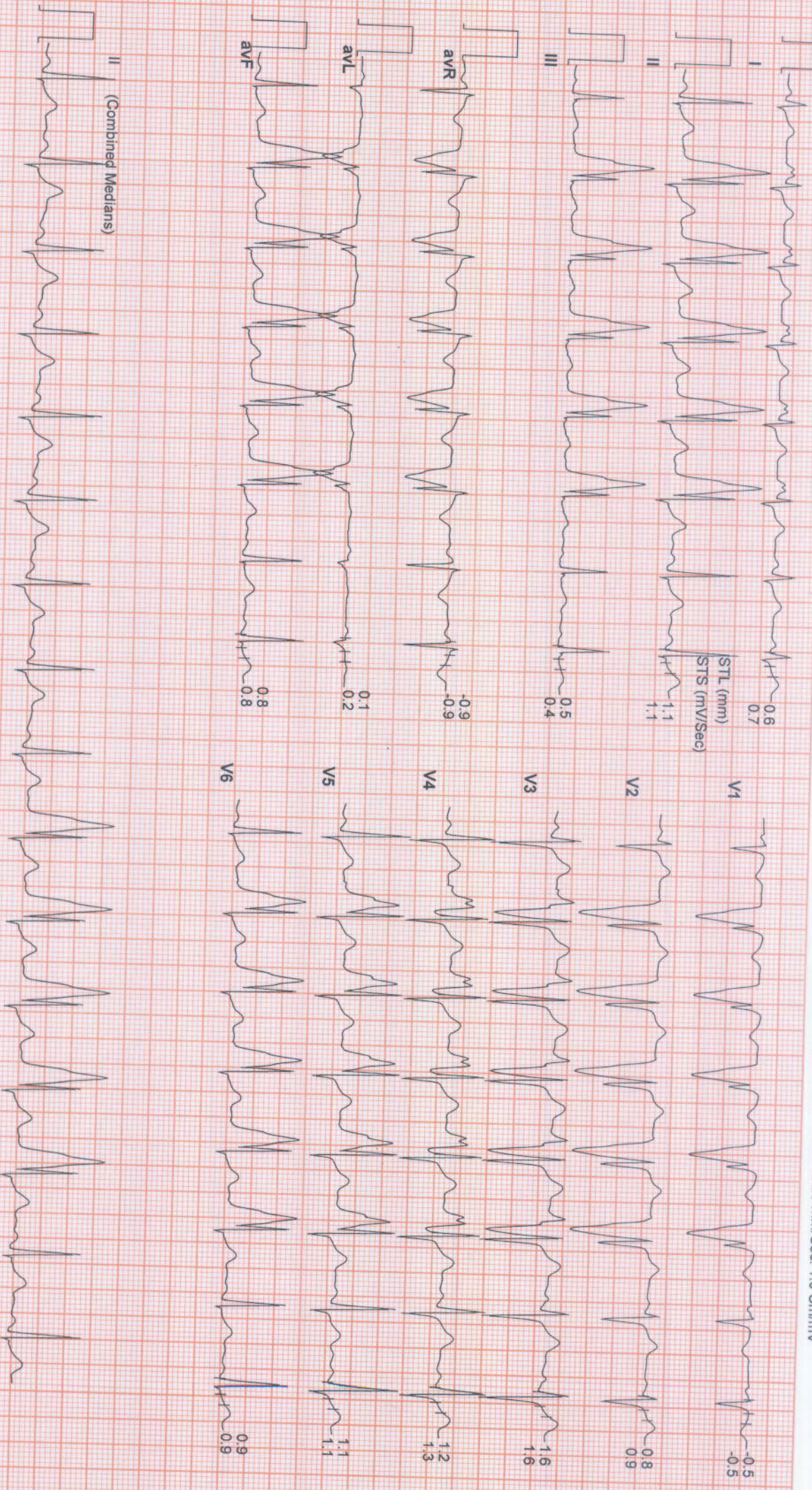
Date: 19 / 01 / 2023 10:12:52 AM METs : 1.0 HR : 93 Target HR : 51% of 183 BP : 130/80 Post J @80mSec

6X2 Combine Medians + 1 Rhythm

Recovery : (04:34)



ExTime: 07:43 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

232 / SIDDHARTHA SHARMA / 37 Yrs / Male / 173 Cm / 92 Kg

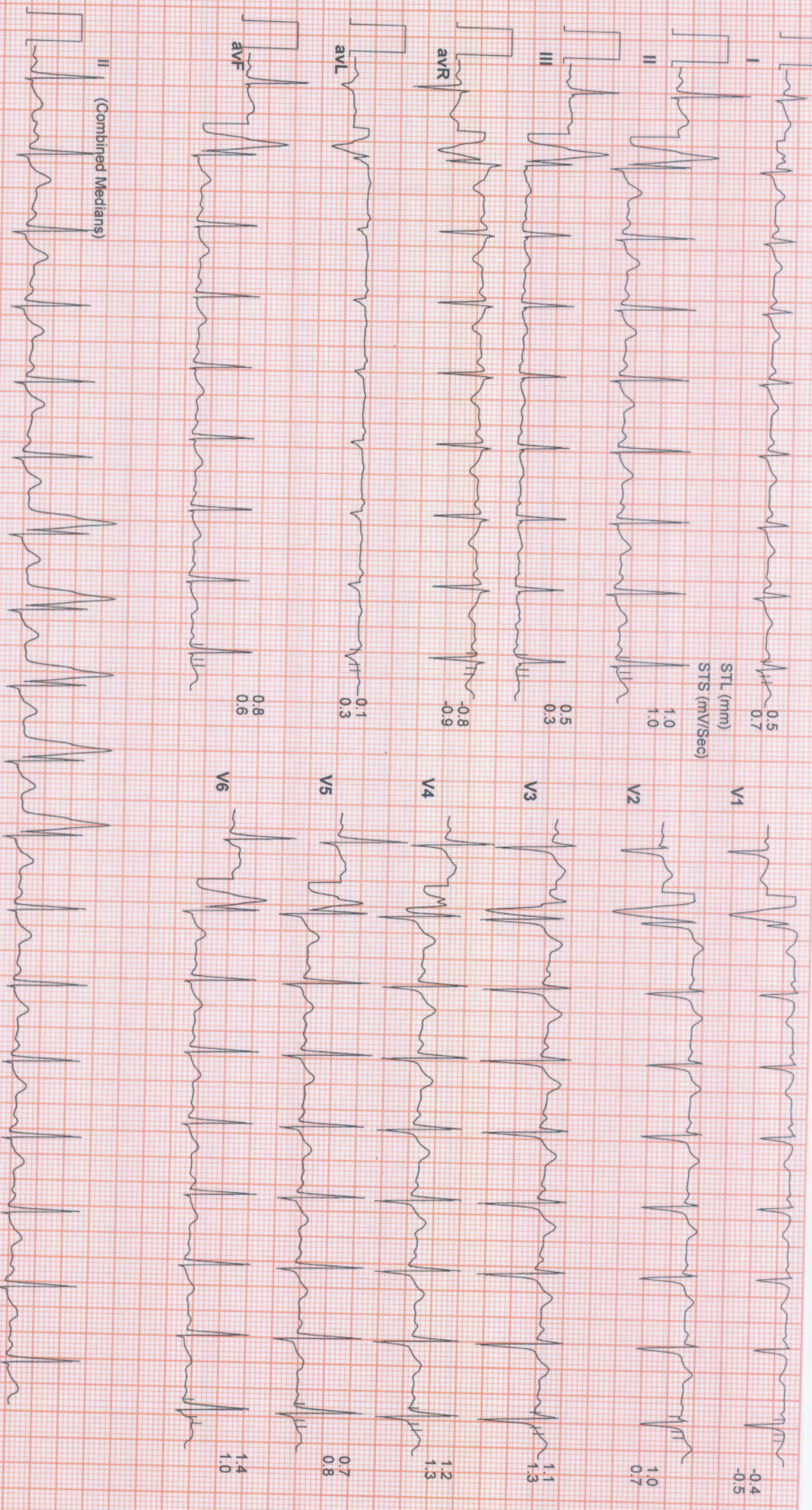
Date: 19 / 01 / 2023 10:12:52 AM METs : 1.0 HR : 108 Target HR : 59% of 183 BP : 130/80 Post J @50mSec

6X2 Combine Medians + 1 Rhythm

Recovery : (05:30)



ExTime: 07:43 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

232 / SIDDHARTHA SHARMA / 37 Yrs / Male / 173 Cm / 92 Kg

Date: 19 / 01 / 2023 10:12:52 AM METs : 1.0 HR : 102 Target HR : 56% of 183 BP : 130/80 Post J @80mSec

6X2 Combine Medians + 1 Rhythm
Recovery : (05:06)

EXTime: 07:43 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV

