

Name: ~~Shr~~ Sushil Dhumal
CID: 2309016517

Sex / Age: 34Y / male
Date: 31/3/2023

EYE EXAMINATION

VISION

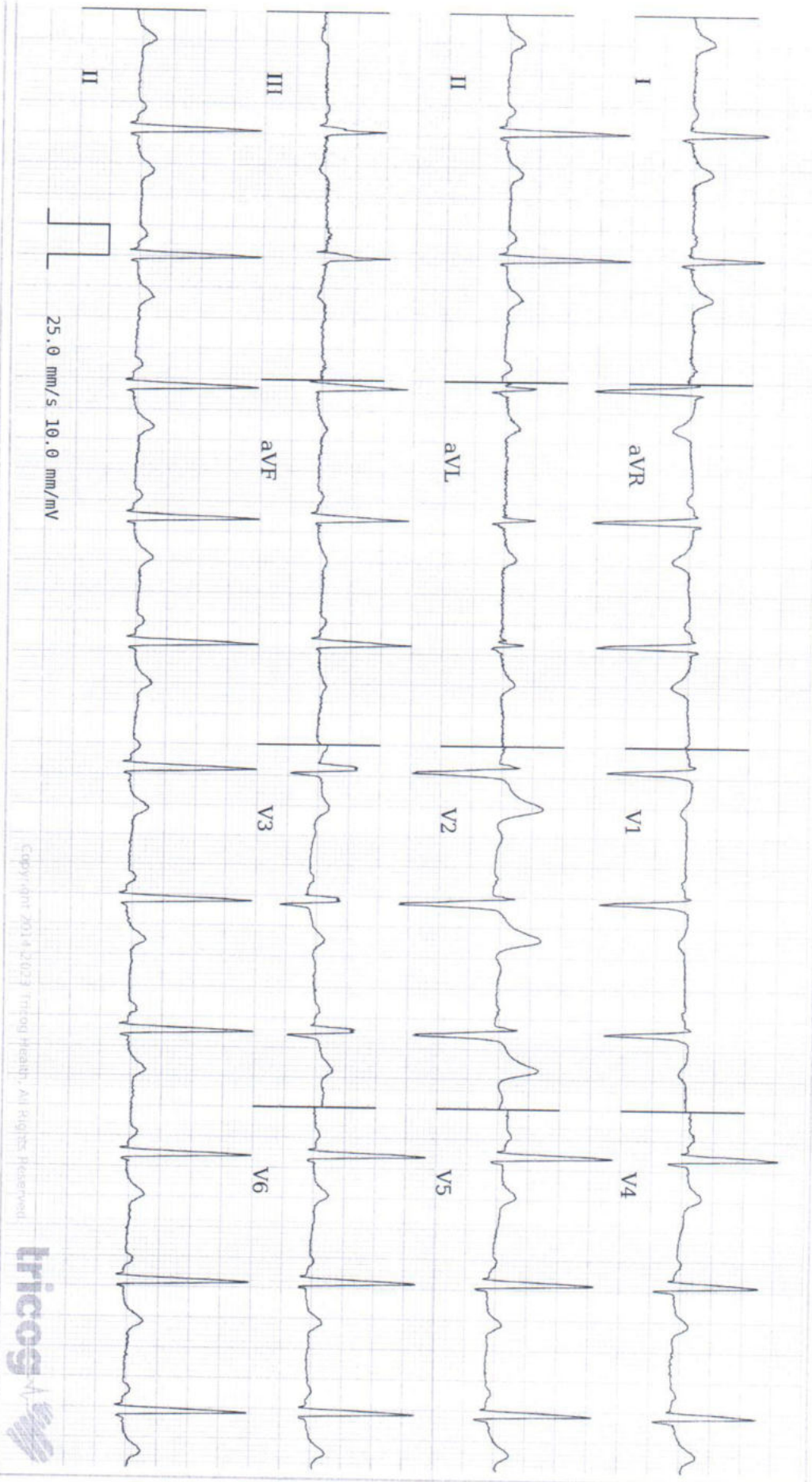
Distance Vision Without Glasses	Right Eye 6/6	Left Eye 6/6
Distance Vision With Glasses	Right Eye	Left Eye
Near Vision Without Glasses	Right Eye 2/6	Left Eye 2/6
Near Vision With Glasses	Right Eye	Left Eye

GENERAL EXAMINATION:

LIDS
CORNEA
CONJUNCTIVAE
EYE MOVEMENTS
COLOUR VISION



DR I.U.BAMB
M.B.B.S MD (Medicine)
Reg No 39452



Age **34** 5 29
years months days

Gender **Male**

Heart Rate **71bpm**

Patient Vitals

BP: NA

Weight: 78 kg

Height: 160 cm

Pulse: NA

Spo2: NA

Resp: NA

Others:

Measurements

QRSD: 98ms

QT: 398ms

QTcB: 432ms

PR: 144ms

P-R-T: 46° 55° 26°

REPORTED BY

DR ISHWARLAL BAMB
M.B.B.S MD (MEDICINE)
cardiologist
39452

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

Disclaimer: This report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, and results of physical examination. Patient's vital signs are as entered by the clinician and not derived from the ECG.

SUBURBAN DIAGNOSTICS PVT. LTD.
Scrapp Centre, Opp. Pentagon Mall,
Near Panchami Hotel,
Shahu College Road, Pune-411 009.
Tel: 020-41094509

Dr. I. U. BAMB
M.B.B.S., M.D. (Medicine)
Reg. No. 39452



Copyright 2014 Tricos Health. All Rights Reserved

Suburban Diagnostics Center ,Pune

Patient Details Date: 31-Mar-23 Time: 11:18:49 AM
Name: SUSHIL DHUMAL ID: 2309016517
Age: 33 y **Sex:** M **Height:** 160 cms. **Weight:** 78 Kg.

Clinical History: NO

Medications: NO

Test Details

Protocol: Bruce **Pr.MHR:** 186 bpm **THR:** 167 (90 % of Pr.MHR) bpm
Total Exec. Time: 6 m 40 s **Max. HR:** 167 (90% of Pr.MHR)bpm **Max. Mets:** 10.20
Max. BP: 164 / 88 mmHg **Max. BP x HR:** 27388 mmHg/min **Min. BP x HR:** 5504 mmHg/min
Test Termination Criteria: 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	66	138 / 86	-1.70 III	-1.06 aVR
Standing	0 : 7	1.0	0	0	64	138 / 86	-1.91 III	1.42 aVL
Hyperventilation	0 : 5	1.0	0	0	64	138 / 86	-1.49 III	1.42 aVL
1	3 : 0	4.6	1.7	10	117	150 / 86	-2.97 III	5.66 V2
2	3 : 0	7.0	2.5	12	143	160 / 88	-4.67 III	5.66 V2
Peak Ex	0 : 40	10.2	3.4	14	167	164 / 88	-5.31 III	5.66 V2
Recovery(1)	1 : 0	1.8	1	0	123	164 / 88	-5.52 III	5.66 I
Recovery(2)	1 : 0	1.0	0	0	103	164 / 88	-3.18 III	5.31 I
Recovery(3)	1 : 0	1.0	0	0	92	164 / 88	-2.34 III	-3.54 aVR
Recovery(4)	1 : 0	1.0	0	0	85	164 / 88	-1.70 III	2.12 I
Recovery(5)	0 : 26	1.0	0	0	87	164 / 88	-1.70 III	1.77 I

Interpretation

Good Effort Tolerance.
 Significant ST T Changes as compared to Baseline.
 No Chest Pain / Arrhythmias noted during the test.
 Stress Test is Mild Positive For Stress Induced Ischemia

Disclaimer : Negative Stress test dose not rule out coronary artery Diseases
 Positive Stress Test is Suggestive but not confirmatory of Coronary Artery Disease.

Hence Clinical Correlation is mandatory.

Adv: - (1) Cardiologist opinion
 (2) 2-D Echo

Ref. Doctor: BOB

(Summary Report edited by user)

Dr. I. U. BAMB
 M.B.B.S., M.D. (Medicine) Doctor: I U BAMB
 Reg. No. 39452

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

Protocol: Bruce

ID: 2309016517

Date: 31-Mar-23

Exec Time : 0 m 0 s

Stage Time : 0 m 13 s

HR: 65 bpm

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 167 bpm)

B.P: 138 / 86

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

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

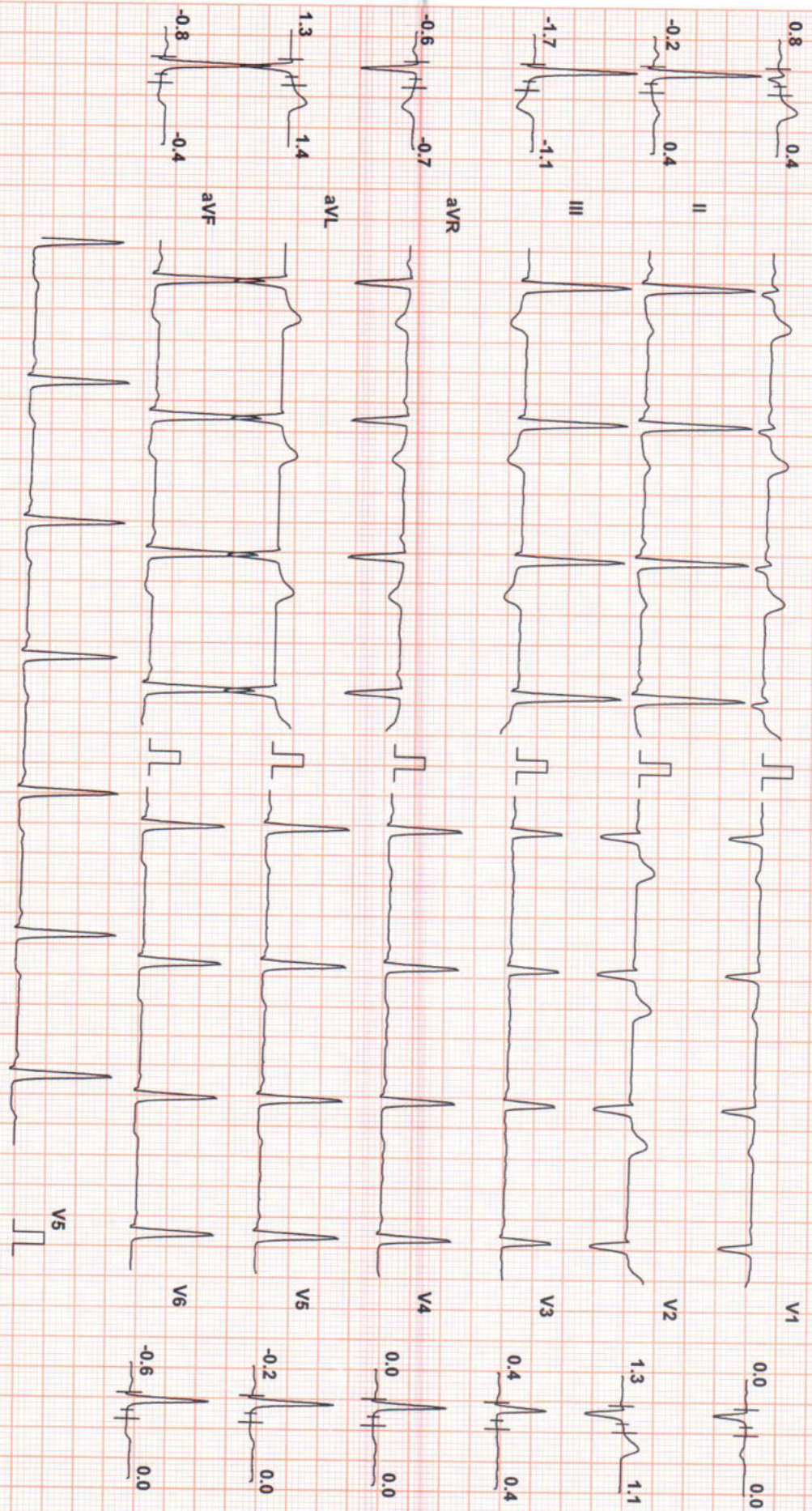


Chart Speed: 25 mm/sec
Schiller SpandA V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 5 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

Protocol: Bruce

ID: 2309016517

Date: 31-Mar-23

Exec Time : 0 m 0 s

Stage Time : 0 m 1 s

HR: 63 bpm

ST Level (mm)

ST Slope (mV/s)

Stage: Standing

Speed: 0 mph

Grade: 0%

(THR: 167 bpm)

B.P: 138 / 86

ST Level (mm)

ST Slope (mV/s)

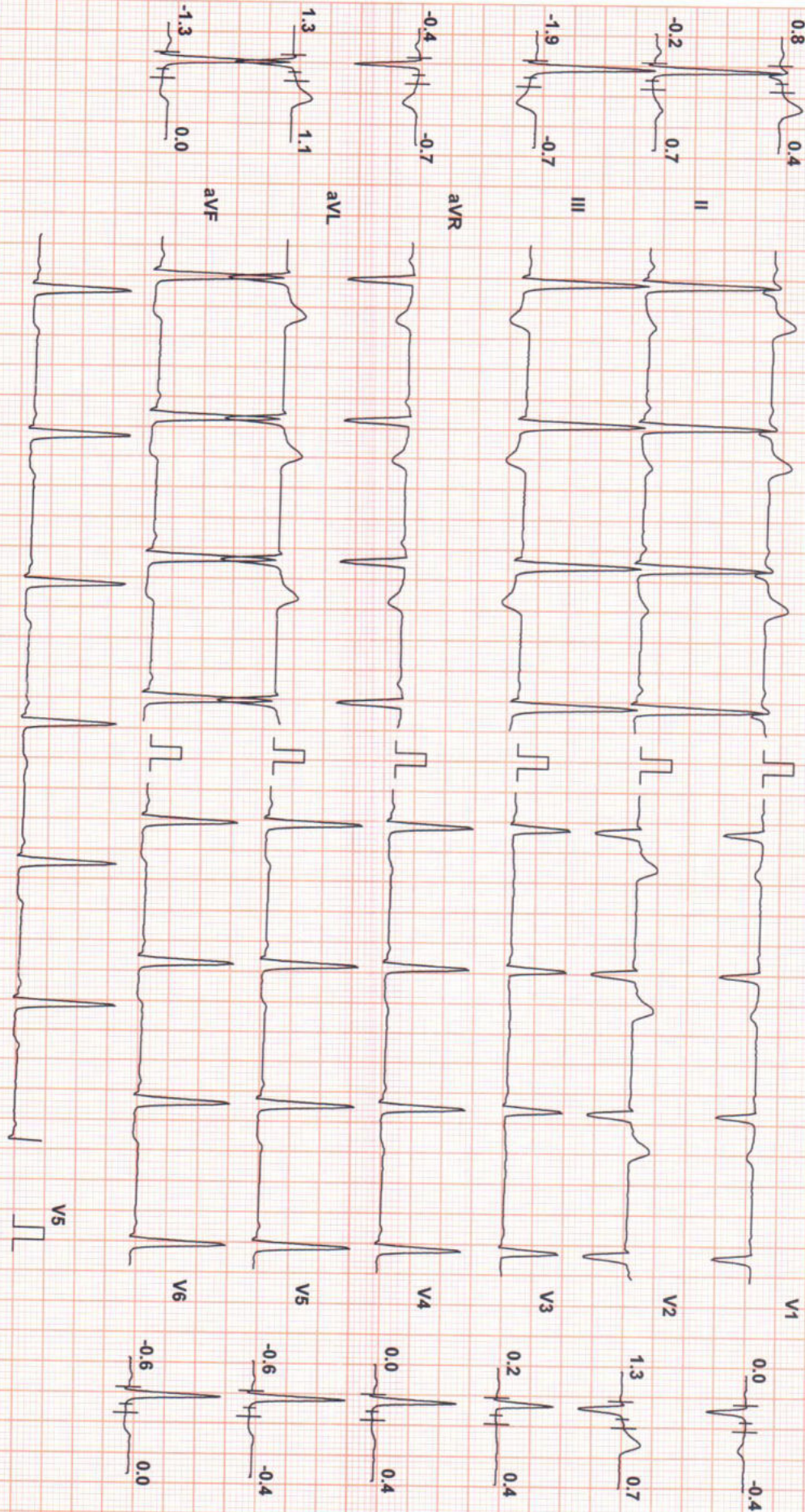


Chart Speed: 25 mm/sec
Schiller Spandau V4.7

Filter: 35 Hz

Main Filter: ON

Amp: 5 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

Protocol: Bruce

ID: 2309016517

Date: 31-Mar-23

Exec Time : 0 m 0 s

Stage Time : 0 m 6 s

HR: 63 bpm

Stage: Hyperventilation

Speed: 0 mph

Grade: 0 %

(THR: 167 bpm)

B.P: 138 / 86

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

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

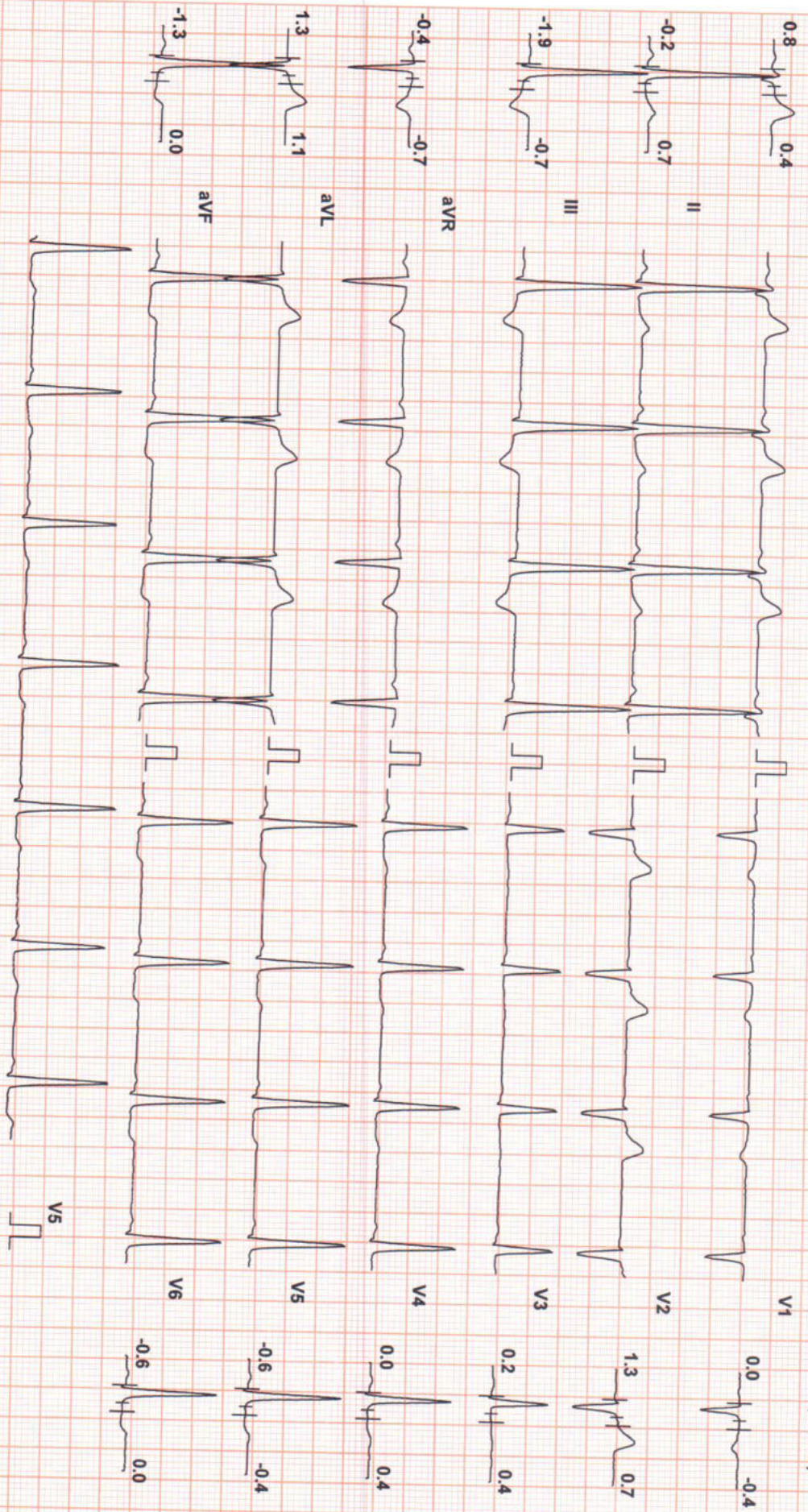


Chart Speed: 25 mm/sec
Schiller Spandax V 4.7

Filter: 35 Hz

Mains Filtr: ON

Amp: 5 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

Protocol: Bruce

ID: 2309016517

Date: 31-Mar-23

Exec Time : 2 m 54 s Stage Time : 2 m 54 s HR: 117 bpm

Stage: 1

Speed: 1.7 mph

Grade: 10 %

(THR: 167 bpm)

B.P: 150 / 86

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

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

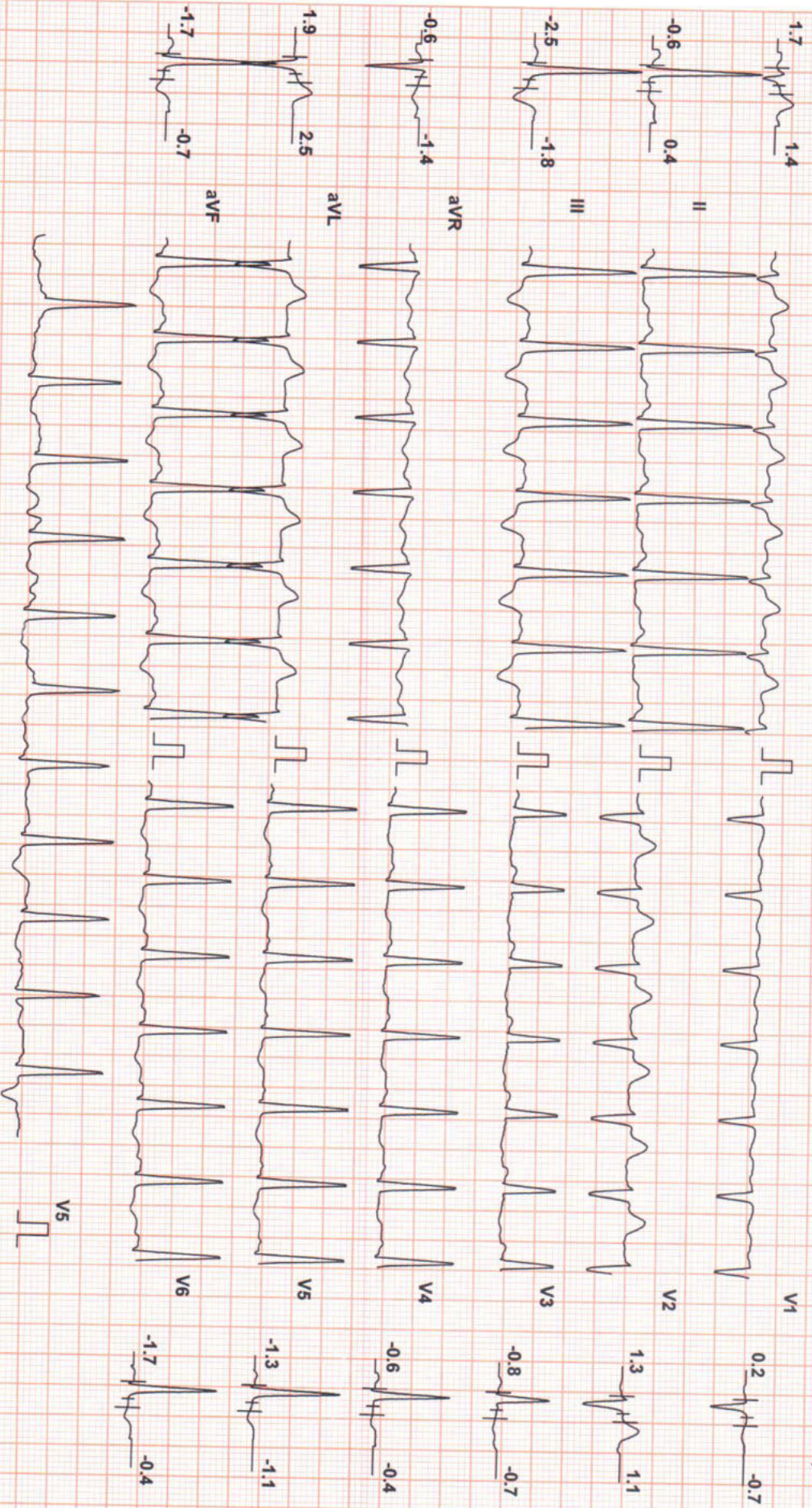


Chart Speed: 25 mm/sec
Schiller Spandart V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 5 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

Protocol: Bruce

ID: 2309016517

Date: 31-Mar-23

Exec Time : 5 m 54 s Stage Time : 2 m 54 s HR: 144 bpm

Stage: 2

Speed: 2.5 mph

Grade: 12%

(THR: 167 bpm)

B.P: 160 / 88

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

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

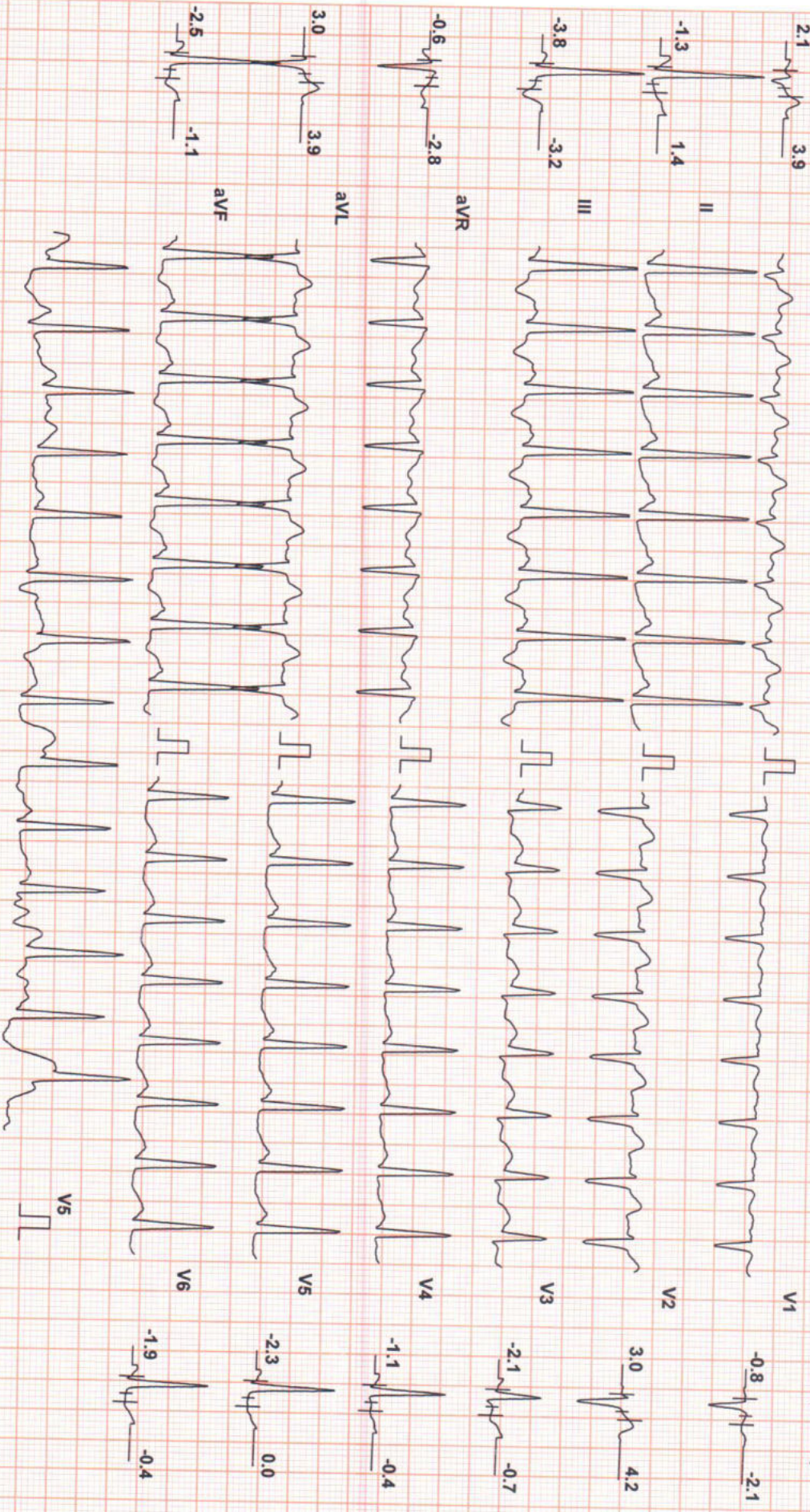


Chart Speed: 25 mm/sec
Schiller Spandani V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 5 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

ID: 2309016517

Date: 31-Mar-23

Exec Time : 6 m 34 s

Stage Time : 0 m 34 s

Test Report

Protocol: Bruce

Stage: Peak Ex

Speed: 3.4 mph

Grade: 14 %

(THR: 167 bpm)

B.P: 164 / 88

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

I 1.3 2.8

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

V1 0.6 -1.4

II -2.8 0.0

V2 3.4 5.7

III -4.5 -3.9

V3 -1.9 -0.4

avR 0.6 -1.4

V4 -2.1 -0.4

avL 3.0 3.5

V5 -4.0 -0.7

avF -3.6 -2.1

V6 -3.2 -1.4

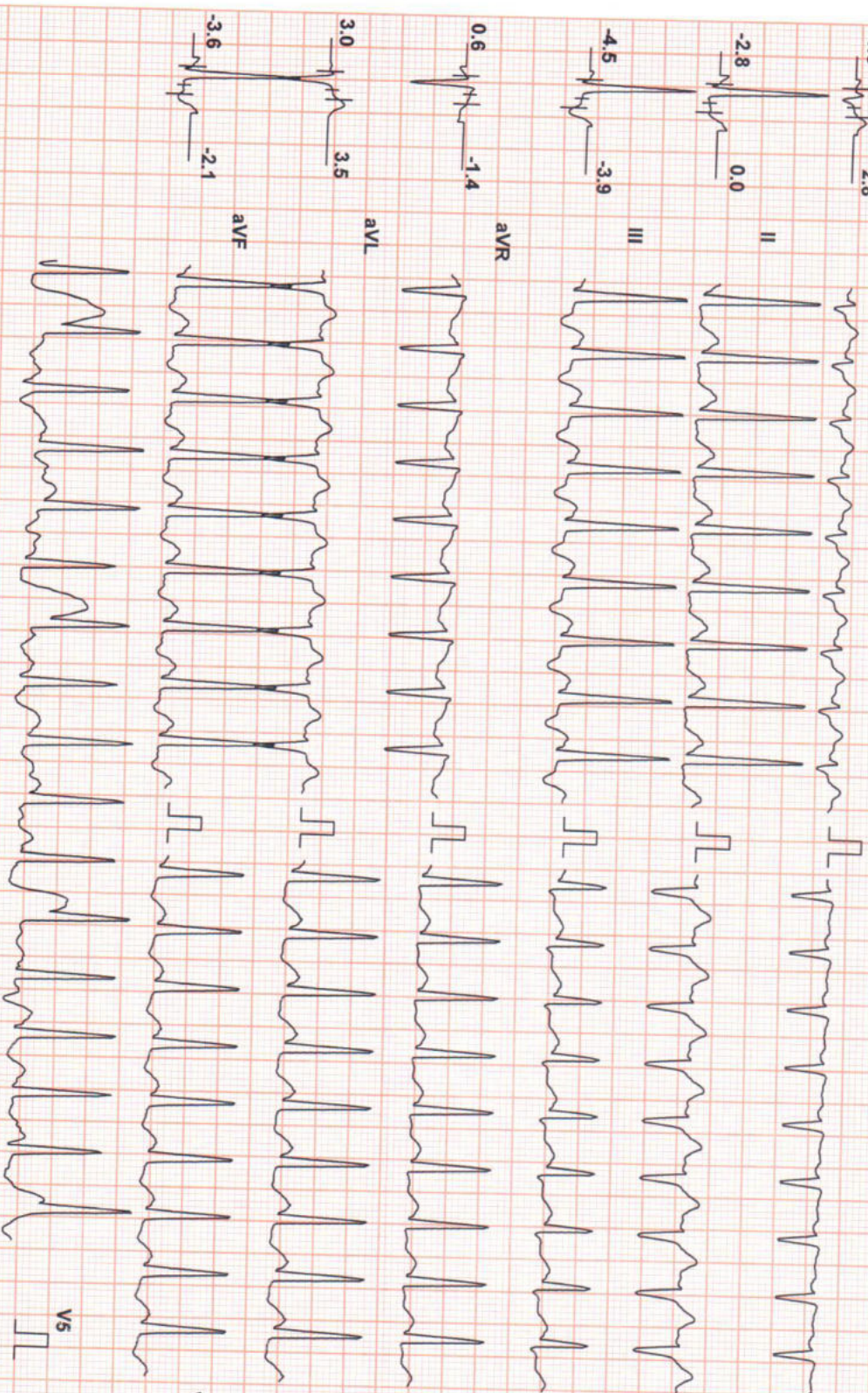


Chart Speed: 25 mm/sec
Schlier Spanden V 4.7

Filter: 35 Hz

Mains Filtr: ON

Amp: 5 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

Protocol: Bruce

ID: 2309016517

Date: 31-Mar-23

Exec Time : 6 m 40 s Stage Time : 0 m 54 s HR: 124 bpm

Stage: Recovery(1)

Speed: 1 mph

Grade: 0 %

(THR: 167 bpm)

B.P: 164 / 88

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

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

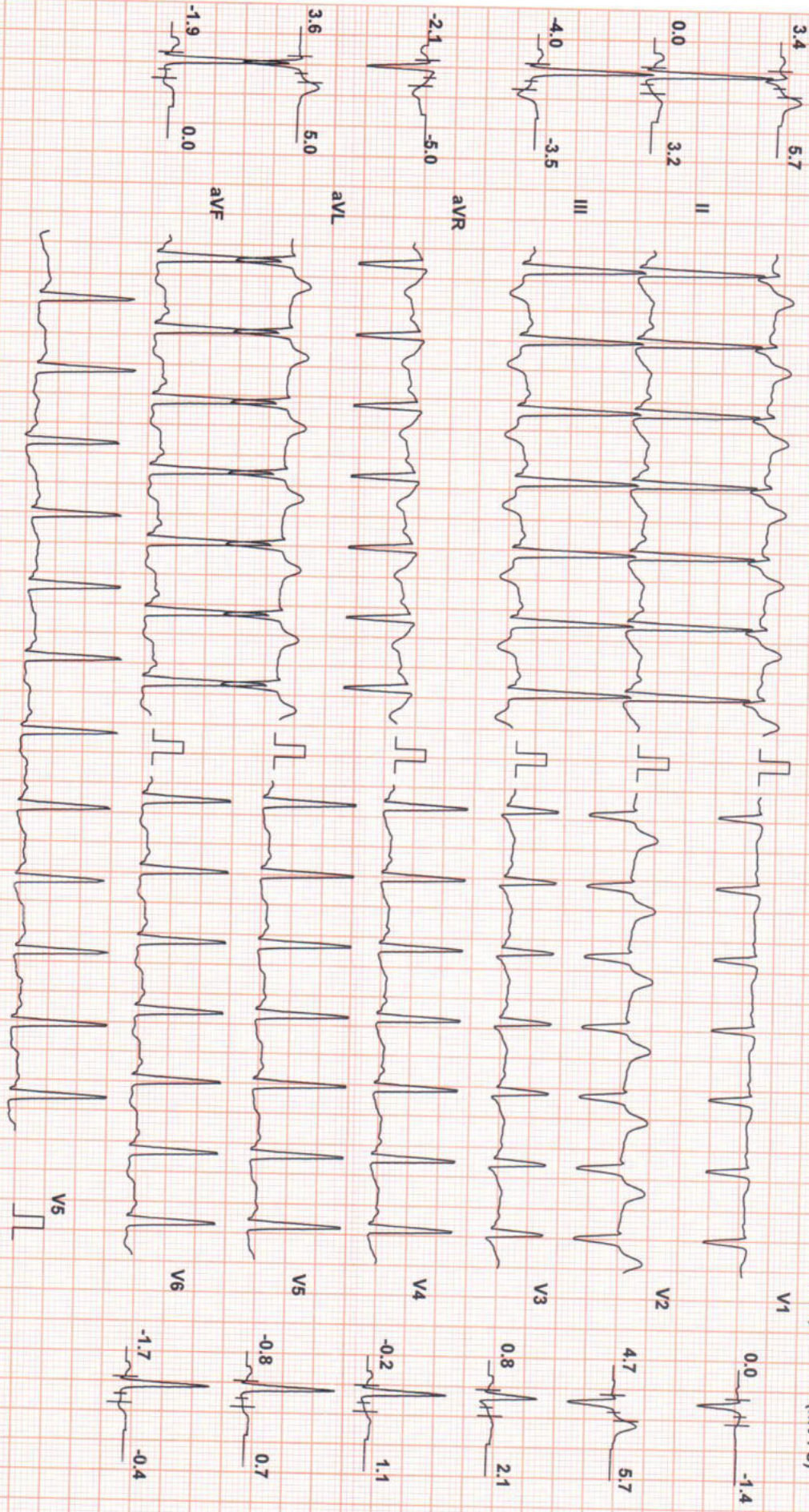


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 5 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

Protocol: Bruce

ID: 2309016517

Date: 31-Mar-23

Exec Time : 6 m 40 s Stage Time : 0 m 54 s HR: 97 bpm

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 167 bpm)

B.P: 164 / 88

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

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

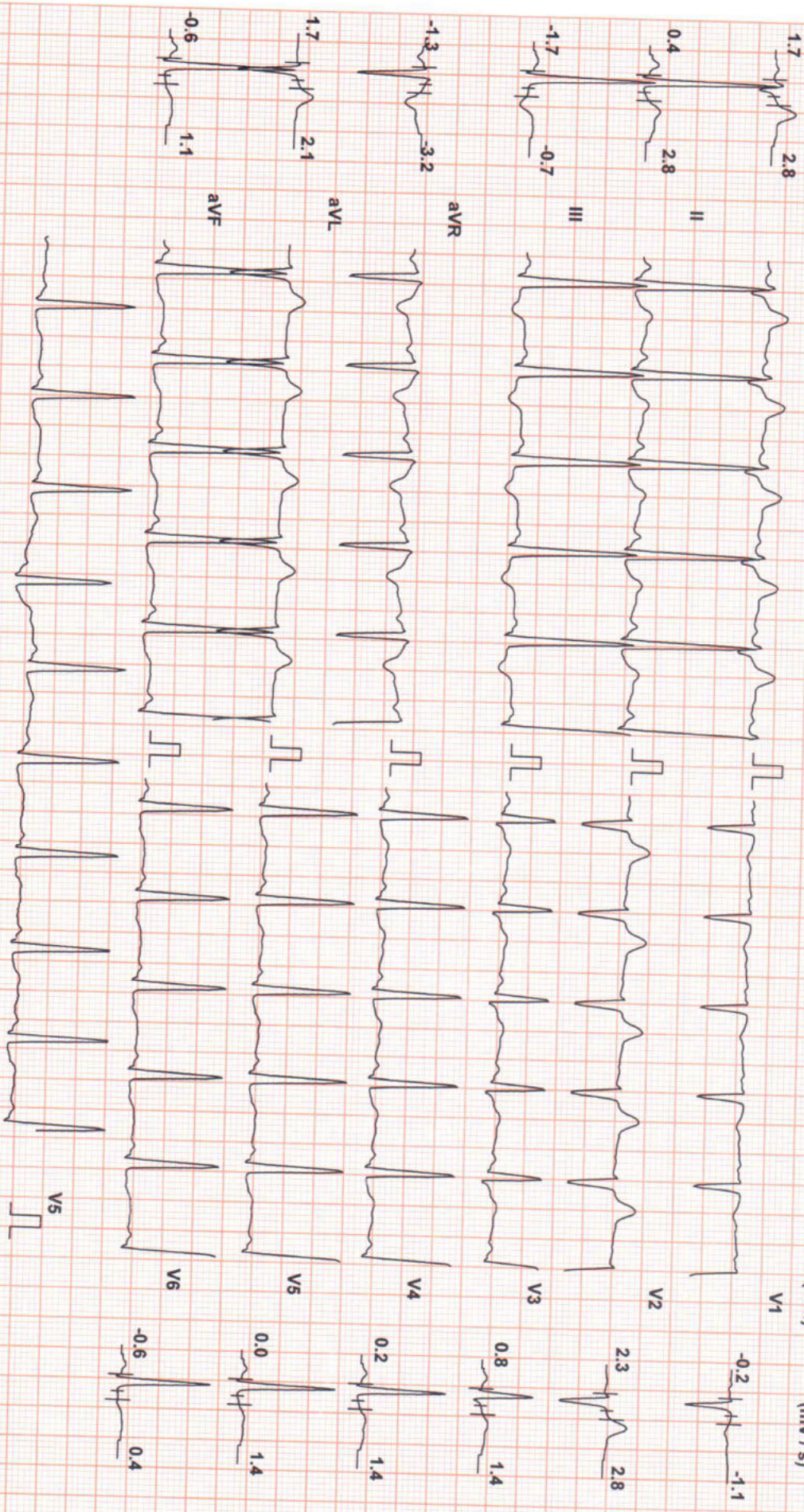


Chart Speed: 25 mm/sec
Schiller Spanden V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 5 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

Protocol: Bruce

Stage: Recovery(3)

Speed: 0 mph

Grade: 0%

(THR: 167 bpm)

B.P.: 164 / 88

ST Level (mm)

ST Slope (mV/s)

ST Level (mm)

ST Slope (mV/s)

1.3

I

0.2

V1

2.1

II

-0.7

V2

-0.2

III

1.5

V3

1.8

avR

0.4

V4

-1.7

avL

1.1

V5

-1.8

avF

0.7

V6

1.1

V5

1.4

V6

-0.8

0.7

-0.8

0.0

Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filtr: ON

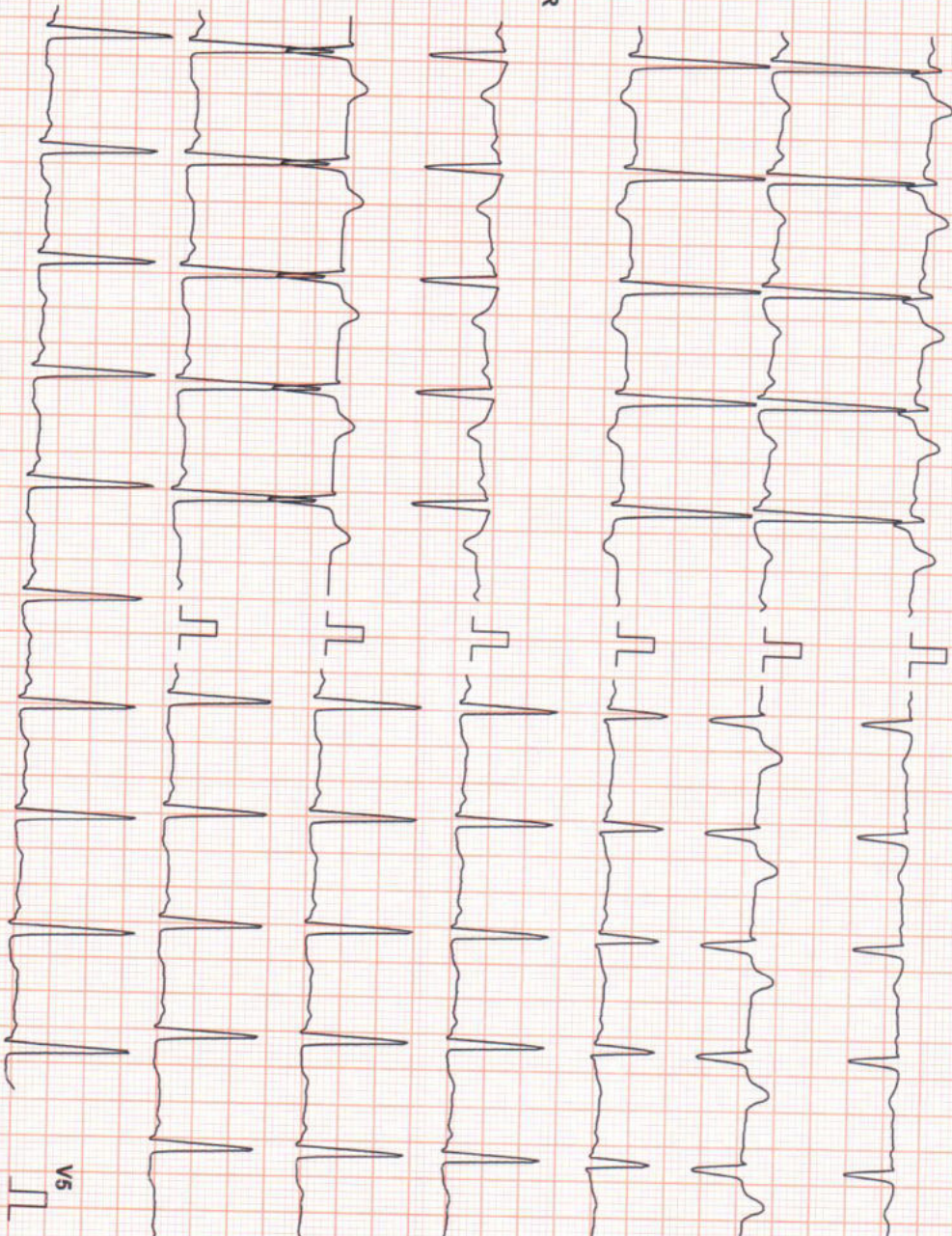
Amp: 5 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



Protocol: Bruce

Stage: Recovery(4)

Speed: 0 mph

Grade: 0%

(THR: 167 bpm)

B.P.: 164 / 88

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

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

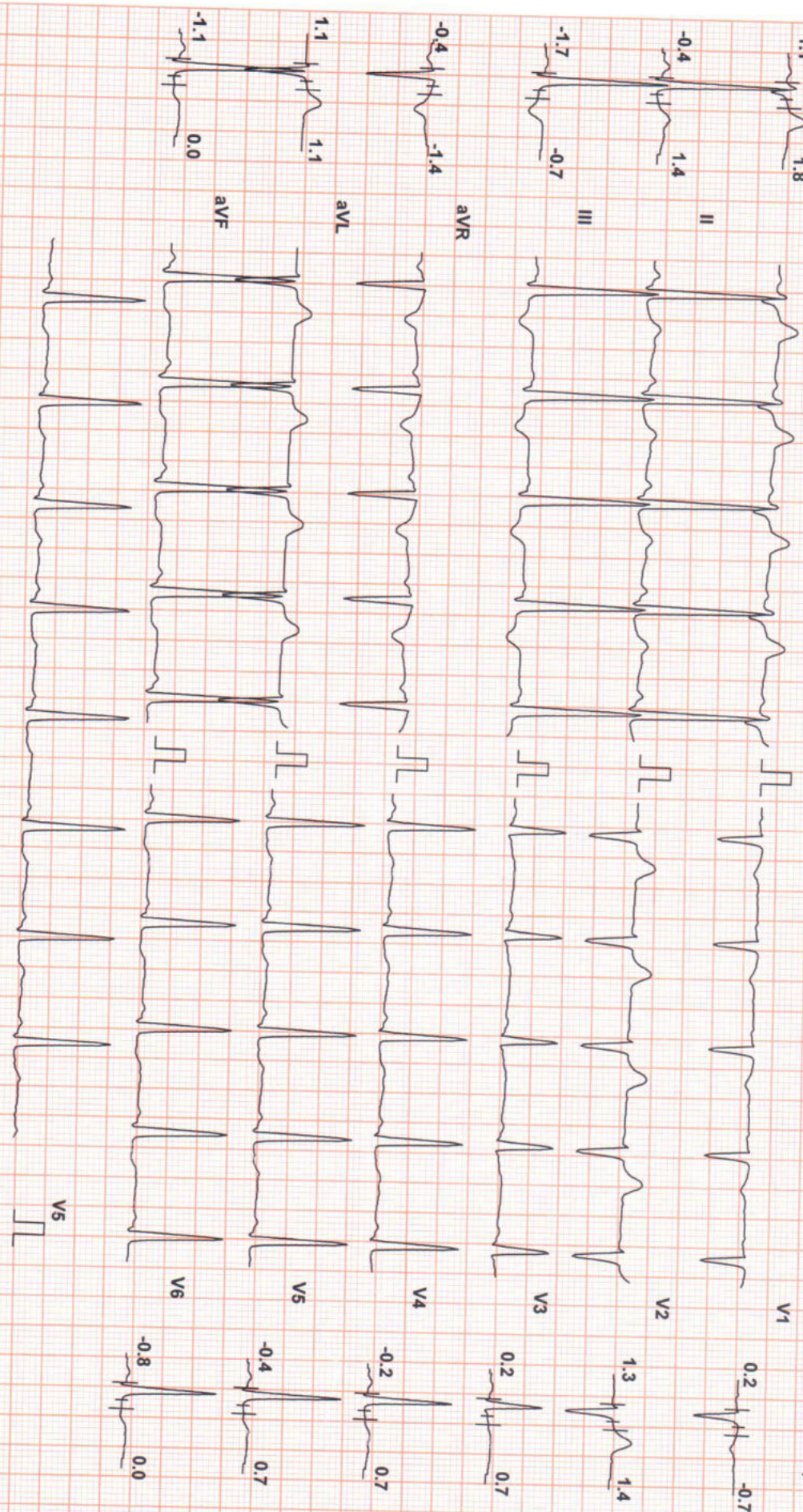


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Filtr: ON

Amp: 5 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

Protocol: Bruce

ID: 2309016517

Date: 31-Mar-23

Exec Time : 6 m 40 s Stage Time : 0 m 20 s HR: 85 bpm

Stage: Recovery(5)

Speed: 0 mph

Grade: 0 %

(THR: 167 bpm)

B.P: 164 / 88

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

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

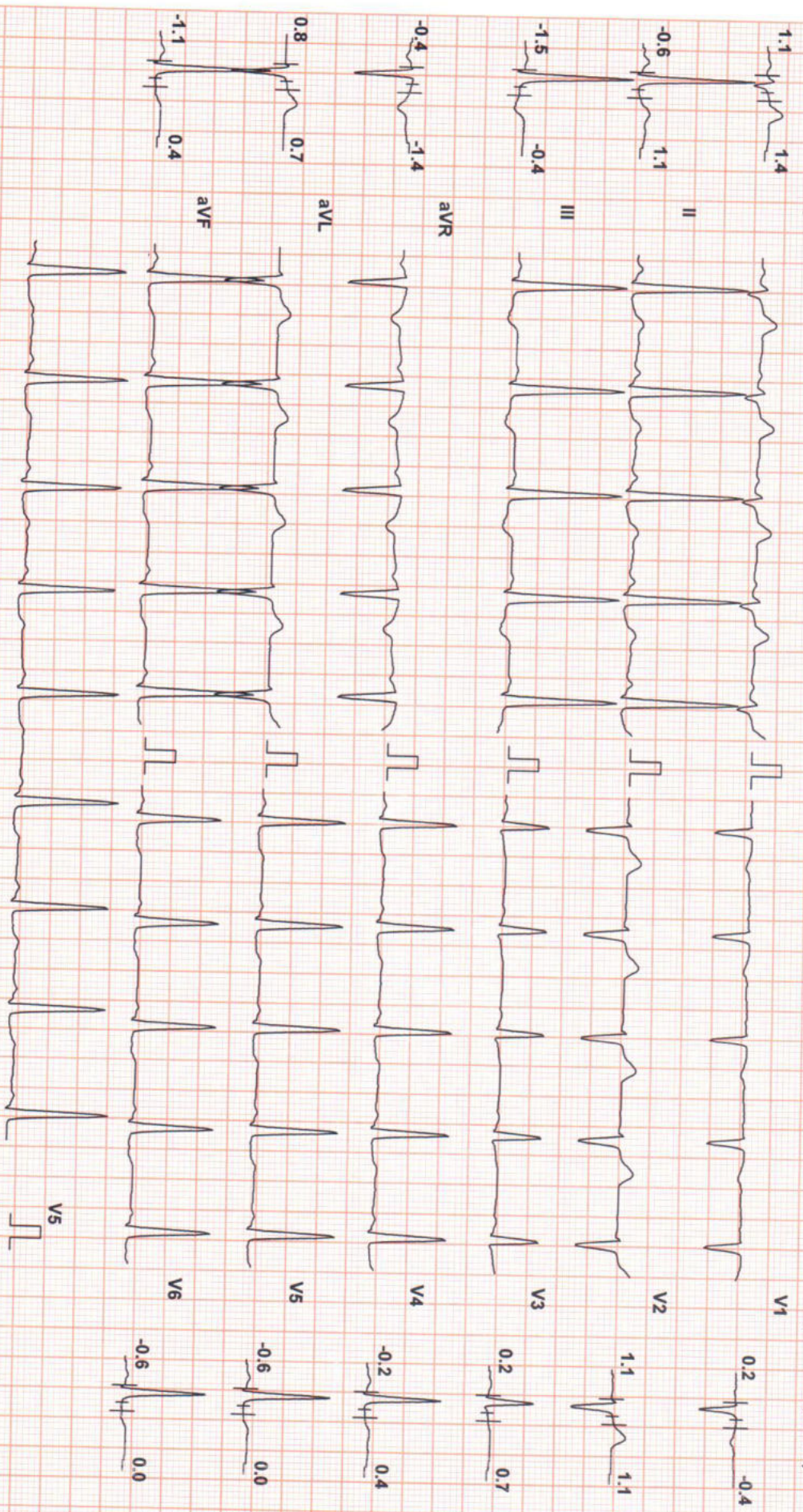


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 5 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

Schiller Standard V 4.7

CID# : 2309016517
Name : MR.SUSHIL DHUMAL
Age / Gender : 34 Years/Male
Consulting Dr. :
Reg.Location : Swargate, Pune (Main Centre)

Collected : 31-Mar-2023 / 08:19
Reported : 31-Mar-2023 / 13:11

A

PHYSICAL EXAMINATION REPORT

History and Complaints:
NO

EXAMINATION FINDINGS:

Height (cms):	160cm	Weight (kg):	78kg
Temp (0c):	Afebrile	Skin:	Normal
Blood Pressure (mm/hg):	138/86mmHg	Nails:	Healthy
Pulse:	75/min	Lymph Node:	Not Palpable

Systems

Cardiovascular: S1 S2 Normal No Murmurs
Respiratory: Normal
Genitourinary: Normal
GI System: Soft non tender no Organomegaly
CNS: Normal

IMPRESSION: *uric acid ↑, ↓ Dyslipidemia, ↓ TMT-changes, ↓ fatty liver*

ADVICE:

*consult family physician
low fat diet
2D - Echo
- Ref to Cardiologist*

CHIEF COMPLAINTS:

- 1) Hypertension: NO
- 2) IHD NO
- 3) Arrhythmia NO
- 4) Diabetes Mellitus NO
- 5) Tuberculosis NO

Dr. I. U. BAMB
M.B.B.S., M.D. (Medicine)
Reg. No. 39452

CID# : 2309016517
Name : MR.SUSHIL DHUMAL
Age / Gender : 34 Years/Male
Consulting Dr. :
Reg.Location : Swargate, Pune (Main Centre)

Collected : 31-Mar-2023 / 08:19
Reported : 31-Mar-2023 / 13:11

- | | |
|--|----|
| 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 | Yes |
| 2) Smoking | Occsaional |
| 3) Diet | Mixed |
| 4) Medication | NO |

*** End Of Report ***

Dr.I U BAMB



CID : 2309016517
Name : MR.SUSHIL DHUMAL
Age / Gender : 34 Years / Male
Consulting Dr. : -
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner
Application To Scan the Code

Collected : 31-Mar-2023 / 08:24
Reported : 31-Mar-2023 / 12:02

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>RBC PARAMETERS</u>			
Haemoglobin	16.6	13.0-17.0 g/dL	Spectrophotometric
RBC	5.08	4.5-5.5 mil/cmm	Elect. Impedance
PCV	47.6	40-50 %	Calculated
MCV	94	80-100 fl	Calculated
MCH	32.7	27-32 pg	Calculated
MCHC	34.9	31.5-34.5 g/dL	Calculated
RDW	12.7	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	7400	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	32.1	20-40 %	
Absolute Lymphocytes	2375.4	1000-3000 /cmm	Calculated
Monocytes	8.1	2-10 %	
Absolute Monocytes	599.4	200-1000 /cmm	Calculated
Neutrophils	55.9	40-80 %	
Absolute Neutrophils	4136.6	2000-7000 /cmm	Calculated
Eosinophils	3.9	1-6 %	
Absolute Eosinophils	288.6	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	313000	150000-400000 /cmm	Elect. Impedance
MPV	7.9	6-11 fl	Calculated
PDW	13.5	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			



CID : 2309016517
Name : MR.SUSHIL DHUMAL
Age / Gender : 34 Years / Male
Consulting Dr. : -
Reg. Location : Swargate, Pune (Main Centre)

Collected : 31-Mar-2023 / 08:24
Reported : 31-Mar-2023 / 12:25

Use a QR Code Scanner
Application To Scan the Code

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	95.3	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	123.2	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.59	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.24	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.35	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.7	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.8	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.9	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.7	1 - 2	Calculated
SGOT (AST), Serum	32.8	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	37.1	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	56.5	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	57.5	40-130 U/L	Colorimetric
BLOOD UREA, Serum	23.0	12.8-42.8 mg/dl	Kinetic
BUN, Serum	10.7	6-20 mg/dl	Calculated
CREATININE, Serum	0.84	0.67-1.17 mg/dl	Enzymatic



CID : 2309016517
Name : MR.SUSHIL DHUMAL
Age / Gender : 34 Years / Male
Consulting Dr. : -
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner
Application To Scan the Code

Collected : 31-Mar-2023 / 08:24
Reported : 31-Mar-2023 / 17:49

eGFR, Serum	111	>60 ml/min/1.73sqm	Calculated by MDRD equation (Modification of Diet in Renal Disease)
-------------	-----	--------------------	---

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

URIC ACID, Serum	9.7	3.5-7.2 mg/dl	Enzymatic
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	
Urine Sugar (PP)	Absent	Absent	
Urine Ketones (PP)	Absent	Absent	

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



Dr. Chandrakant Pawar
Dr.CHANDRAKANT PAWAR
M.D.(PATH)
Pathologist



CID : 2309016517
Name : MR.SUSHIL DHUMAL
Age / Gender : 34 Years / Male
Consulting Dr. : -
Reg. Location : Swargate, Pune (Main Centre)

Collected : 31-Mar-2023 / 08:24
Reported : 31-Mar-2023 / 12:10

Use a QR Code Scanner
Application To Scan the Code

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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.7	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	116.9	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 Vitami 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 Pune Lab, Pune Swargate
*** End Of Report ***



Dr. Chandrakant Pawar

Dr.CHANDRAKANT PAWAR
M.D.(PATH)
Pathologist



CID : 2309016517
Name : MR.SUSHIL DHUMAL
Age / Gender : 34 Years / Male
Consulting Dr. : -
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner
Application To Scan the Code

Collected : 31-Mar-2023 / 08:24
Reported : 31-Mar-2023 / 17:52

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
EXAMINATION OF FAECES

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>
<u>PHYSICAL EXAMINATION</u>		
Colour	Brown	Brown
Form and Consistency	Semi Solid	Semi Solid
Mucus	Trace	Absent
Blood	Absent	Absent
<u>CHEMICAL EXAMINATION</u>		
Reaction (pH)	Acidic (6.0)	-
Occult Blood	Absent	Absent
<u>MICROSCOPIC EXAMINATION</u>		
Protozoa	Absent	Absent
Flagellates	Absent	Absent
Ciliates	Absent	Absent
Parasites	Absent	Absent
Macrophages	Absent	Absent
Mucus Strands	Flakes +	Absent
Fat Globules	Absent	Absent
RBC/hpf	Absent	Absent
WBC/hpf	Occasional	Absent
Yeast Cells	Absent	Absent
Undigested Particles	Present ++	-
Concentration Method (for ova)	No ova detected	Absent

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



Handwritten signature

Dr.CHANDRAKANT PAWAR
M.D.(PATH)
Pathologist



CID : 2309016517
Name : MR.SUSHIL DHUMAL
Age / Gender : 34 Years / Male
Consulting Dr. : -
Reg. Location : Swargate, Pune (Main Centre)

Collected : 31-Mar-2023 / 08:24
Reported : 31-Mar-2023 / 13:16

Use a QR Code Scanner
Application To Scan the Code

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	Pale yellow	Pale Yellow	-
Reaction (pH)	Neutral (7.0)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.005	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	40	-	-
<u>CHEMICAL EXAMINATION</u>			
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
<u>MICROSCOPIC EXAMINATION</u>			
Leukocytes(Pus cells)/hpf	0-1	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	0-1		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	2-3	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 Pune Lab, Pune Swargate
*** End Of Report ***



Handwritten signature

Dr.CHANDRAKANT PAWAR
M.D.(PATH)
Pathologist



CID : 2309016517
Name : MR.SUSHIL DHUMAL
Age / Gender : 34 Years / Male
Consulting Dr. : -
Reg. Location : Swargate, Pune (Main Centre)

Collected : 31-Mar-2023 / 08:24
Reported : 31-Mar-2023 / 13:16

Use a QR Code Scanner
Application To Scan the Code

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)

This sample has 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 Pune Lab, Pune Swargate
*** End Of Report ***



Dr. Chandrakant Pawar

Dr.CHANDRAKANT PAWAR
M.D.(PATH)
Pathologist



Use a QR Code Scanner
Application To Scan the Code

CID : 2309016517
Name : MR.SUSHIL DHUMAL
Age / Gender : 34 Years / Male
Consulting Dr. : -
Reg. Location : Swargate, Pune (Main Centre)

Collected : 31-Mar-2023 / 08:24
Reported : 31-Mar-2023 / 12:25

R
E
P
O
R
T

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	216.9	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	152.0	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	37.3	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	179.6	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	150	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	30	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	5.8	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	4.0	0-3.5 Ratio	Calculated

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

Dr.CHANDRAKANT PAWAR
M.D.(PATH)
Pathologist





CID : 2309016517
Name : MR.SUSHIL DHUMAL
Age / Gender : 34 Years / Male
Consulting Dr. : -
Reg. Location : Swargate, Pune (Main Centre)

Collected : 31-Mar-2023 / 08:24
Reported : 31-Mar-2023 / 12:06

Use a QR Code Scanner
Application To Scan the Code

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	5.1	2.6-5.7 pmol/L	CMIA
Kindly note change in reference range and method w.e.f. 16/08/2019			
Free T4, Serum	13.5	9-19 pmol/L	CMIA
Kindly note change in reference range and method w.e.f. 16/08/2019			
sensitiveTSH, Serum	2.1	0.35-4.94 microIU/ml	CMIA

Kindly note change in reference range and method w.e.f. 16/08/2019. NOTE: 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 & heart failure, severe burns, trauma & surgery etc.



CID : 2309016517
Name : MR.SUSHIL DHUMAL
Age / Gender : 34 Years / Male
Consulting Dr. : -
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner
Application To Scan the Code

Collected : 31-Mar-2023 / 08:24
Reported : 31-Mar-2023 / 12:06

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 trasiently altered becuae 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, tyrosin 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 Pune Lab, Pune Swargate
*** End Of Report ***



Handwritten signature

Dr.CHANDRAKANT PAWAR
M.D.(PATH)
Pathologist

CID : 2309016517
Name : Mr SUSHIL DHUMAL
Age / Sex : 34 Years/Male
Ref. Dr :
Reg. Location : Swargate, Pune Main Centre
Reg. Date : 31-Mar-2023
Reported : 31-Mar-2023 / 10:23

Use a QR Code Scanner
Application To Scan the Code

USG WHOLE ABDOMEN

LIVER: Normal in size (measures 13.5 cms) and **shows generalised increased echogenicity.** No IHBR dilatation. Hepatic veins appear normal. Portal vein and common bile duct show normal caliber.

GALL BLADDER : Partially distended. No evidence of any pericholecystic collection.

PANCREAS : Normal in size and echotexture. Pancreatic duct is normal.

SPLEEN : Normal in size and echopattern. No focal lesion. Splenic vein is normal.

RIGHT KIDNEY : Measures 10.0 x 4.2 cm. Normal in size and echogenicity. No calculus or hydronephrosis. Corticomedullary differentiation is maintained.

LEFT KIDNEY : Measures 8.8 x 4.4 cm. Normal in size and echogenicity. **It shows mild altered axis.** No calculus or hydronephrosis. Corticomedullary differentiation is maintained.

Retroperitoneum, paraaortic and flanks obscured due to excessive bowel gas.
Paraaortic and paracaval region appears to be normal.
No evidence of lymphnodes noted.
No free fluid in abdomen.

URINARY BLADDER : Well distended. No calculi. Wall thickness is normal.
Both ureteric jets visualised appear normal.

PROSTATE : Normal in size and shows normal echotexture.

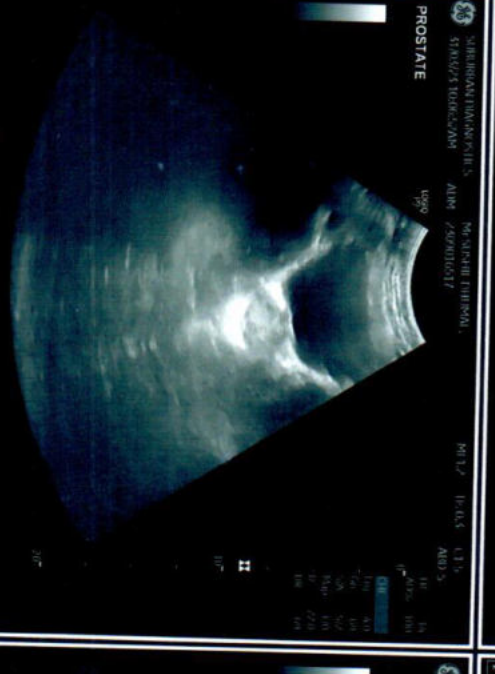
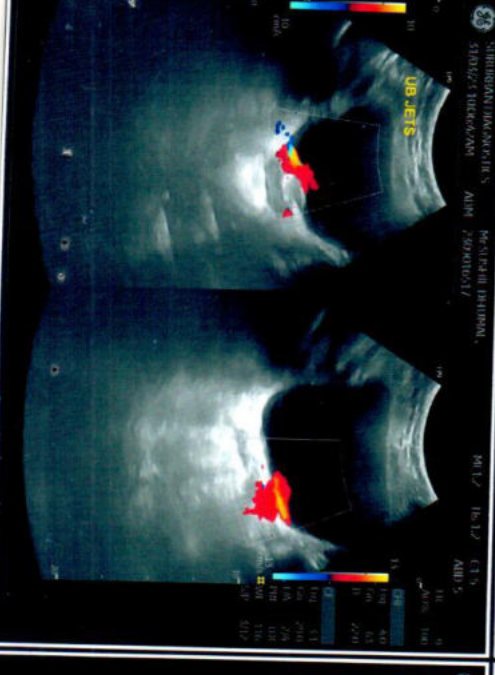
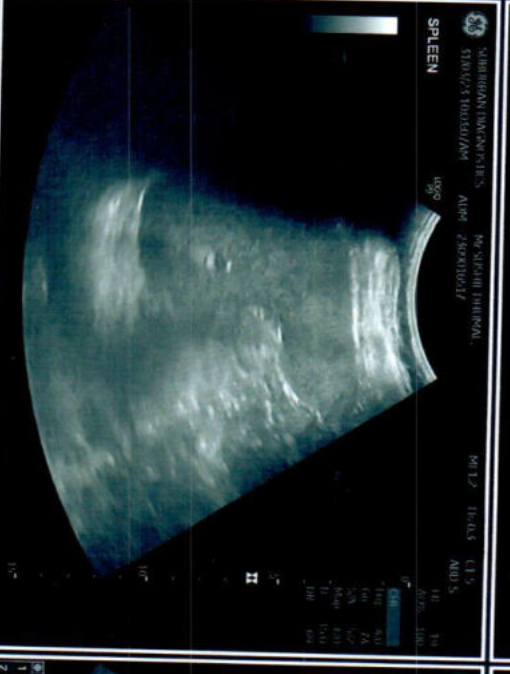
IMPRESSION : Normal size liver with grade I fatty changes.

Clinical correlation is indicated. -----End of Report-----



DR. NIKHIL G. JOSHI
M.B.B.S., D.M.R.E.
REG. NO. 2001/02/397

Click here to view images <<ImageLink>>



Authenticity Check
<<QRCode>>

CID : 2309016517
Name : Mr SUSHIL DHUMAL
Age / Sex : 34 Years/Male
Ref. Dr :
Reg. Location : Swargate, Pune Main Centre

Reg. Date : 31-Mar-2023
Reported : 31-Mar-2023 / 9:24

Use a QR Code Scanner
Application To Scan the Code

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

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



DR. NIKHIL G. JOSHI
M.B.B.S., D.M.R.E.
REG. NO. 2001/02/397

Click here to view images <<ImageLink>>

Page no 1 of 1

भारत सरकार
Government of India

सुशील रमेश धुमाल
Sushil Ramesh Dhumal
जन्म वर्ष / Year of Birth : 1988
पुरुष / Male

9162 3210 4820

आधार - सामान्य माणसाचा अधिकार



Sushil

Area

Head B

SUBURBAN DIAGNOSTICS PVT. LTD.
Seraph Centre, Opp. Pentagon Mall,
Near Panchami Hotel,
Shahu College Road, Pune-411 009.
Tel: 020-41094509