

Name : MR.PRAMOD MALHARI RAUT

Age / Gender : 31 Years / Male

Consulting Dr. :

Reg. Location

: Vashi (Main Centre)

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

Collected : 28-Aug-2021 / 08:47

**Reported** :28-Aug-2021 / 13:17

#### **AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

	CBC (Complete Bloo	d Count), Blood	
<u>PARAMETER</u>	<u>RESULTS</u>	<b>BIOLOGICAL REF RANGE</b>	<u>METHOD</u>
RBC PARAMETERS			
Haemoglobin	14.1	13.0-17.0 g/dL	Spectrophotometric
RBC	4.61	4.5-5.5 mil/cmm	Elect. Impedance
PCV	42.9	40-50 %	Measured
MCV	93	80-100 fl	Calculated
MCH	30.6	27-32 pg	Calculated
MCHC	32.9	31.5-34.5 g/dL	Calculated
RDW	14.8	11.6-14.0 %	Calculated
WBC PARAMETERS			
WBC Total Count	5110	4000-10000 /cmm	Elect. Impedance
WBC DIFFERENTIAL AND ABS	OLUTE COUNTS		
Lymphocytes	40.5	20-40 %	
Absolute Lymphocytes	2069.6	1000-3000 /cmm	Calculated
Monocytes	7.1	2-10 %	
Absolute Monocytes	362.8	200-1000 /cmm	Calculated
Neutrophils	46.6	40-80 %	
Absolute Neutrophils	2381.3	2000-7000 /cmm	Calculated
Eosinophils	5.3	1-6 %	
Absolute Eosinophils	270.8	20-500 /cmm	Calculated
Basophils	0.5	0.1-2 %	
Absolute Basophils	25.6	20-100 /cmm	Calculated
Immature Leukocytes	-		

WBC Differential Count by Absorbance & Impedance method/Microscopy.

#### **PLATELET PARAMETERS**

Platelet Count	152000	150000-400000 /cmm	Elect. Impedance
MPV	12.4	6-11 fl	Calculated
PDW	20.6	11-18 %	Calculated

#### **RBC MORPHOLOGY**

Hypochromia	-
Microcytosis	-
Macrocytosis	-

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CID : 2124036965

Name : MR. PRAMOD MALHARI RAUT

:31 Years / Male Age / Gender

Consulting Dr. Collected Reported

: Vashi (Main Centre) Reg. Location



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:28-Aug-2021 / 12:39

Anisocytosis

Poikilocytosis

Polychromasia

**Target Cells** 

**Basophilic Stippling** 

Normoblasts

Others Normocytic, Normochromic

**WBC MORPHOLOGY** 

PLATELET MORPHOLOGY Megaplatelets seen on smear

COMMENT

Kindly correlate clinically.

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR 7 2-15 mm at 1 hr. Westergren

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



**Dr.AMIT TAORI** M.D (Path) **PATHOLOGIST** 

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

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

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Name : MR.PRAMOD MALHARI RAUT

Age / Gender : 31 Years / Male

Consulting Dr. :

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Collected : 28-Aug-2021 / 08:47

**Reported** :28-Aug-2021 / 12:54

#### AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	82.8	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma - PP/R	91.3	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
CHOLESTEROL, Serum	122.5	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	Enzymatic
HDL CHOLESTEROL, Serum	29.4	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Enzymatic
LDL CHOLESTEROL, Serum	82.0	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	Colorimetric
TRIGLYCERIDES, Serum	56.3	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	Enzymatic
BILIRUBIN (TOTAL), Serum	0.91	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.31	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.60	0.1-1.0 mg/dl	Calculated
SGOT (AST), Serum	20.9	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	29.3	5-45 U/L	NADH (w/o P-5-P)

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Brief Disclaimer: (1) Suburban Diagnostics ensures that the tests are conducted with utmost care and safety and are performed on samples received as per the sample collection guide of Suburban Diagnostics. (2) Sample may be rejected



CID : 2124036965

Name : MR.PRAMOD MALHARI RAUT

:31 Years / Male Age / Gender

Consulting Dr.

Reg. Location : Vashi (Main Centre)



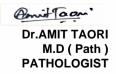
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Collected :28-Aug-2021 / 08:47 Reported :28-Aug-2021 / 12:54

ALKALINE PHOSPHATASE, Serum	46.5	40-130 U/L	Colorimetric
BLOOD UREA, Serum	17.5	12.8-42.8 mg/dl	Kinetic
BUN, Serum	8.2	6-20 mg/dl	Calculated
CREATININE, Serum eGFR, Serum	1.01	0.67-1.17 mg/dl	Enzymatic
	91	>60 ml/min/1.73sqm	Calculated
URIC ACID, Serum	5.7	3.5-7.2 mg/dl	Enzymatic

<sup>\*</sup>Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Panvel Lab, Panvel East \*\*\* End Of Report \*\*





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Name : MR.PRAMOD MALHARI RAUT

Age / Gender : 31 Years / Male

Consulting Dr. :

sensitiveTSH, Serum

r**. :** -

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**METHOD** 

**Reported** :28-Aug-2021 / 12:24

## AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE THYROID FUNCTION TEST

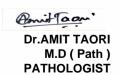
PARAMETER RESULTS BIOLOGICAL REF RANGE

0.35-5.5 microIU/ml ECLIA

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1.97





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Age / Gender : 31 Years / Male

Consulting Dr. : - Collected : 28-Aug-2021 / 08:47

Reg. Location: Vashi (Main Centre)

Reported: 28-Aug-2021 / 14:25

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

PARAMETER RESULTS BIOLOGICAL REF RANGE METHOD

Glycosylated Hemoglobin 5.5 Non-Diabetic Level: < 5.7 % HPLC (HbA1c), EDTA WB - CC Prediabetic Level: 5.7-6.4 %

Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %

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Estimated Average Glucose 111.2 mg/dl Calculated

(eAG), EDTA WB - CC

#### Intended use:

• In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year

• In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly

• For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

#### Clinical Significance:

• HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.

• The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

#### Test Interpretation:

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

#### Factors affecting HbA1c results:

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

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

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

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

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







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

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Epithelial Cells / hpf

Amorphous debris

Bacteria / hpf

Casts

Crystals

CID : 2124036965

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Consulting Dr. : - Collected : 28-Aug-2021 / 08:47

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Aug-2021 / 12:58

## <u>AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE</u> <u>URINE EXAMINATION REPORT</u>

<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	Acidic (6.0)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.020	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	40	-	-
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	

Absent

**Absent** 

Absent

Less than 20/hpf

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

1-2

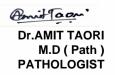
Absent

**Absent** 

Absent

6-8





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Name : MR.PRAMOD MALHARI RAUT

Age / Gender : 31 Years / Male

Consulting Dr. : -

ENT BASIC CHECK UP

Reg. Location

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: 28-Aug-2021 / 08:41

**Reported** :30-Aug-2021 / 13:25

## AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE ENT BASIC CHECK UP

<u>PARAMETER</u> <u>RESULTS</u> <u>BIOLOGICAL REF RANGE</u> <u>MET</u>

NAD on basic inspection.





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Age / Gender : 31 Years / Male

Consulting Dr. : - Collected : 28-Aug-2021 / 08:47

Reg. Location : Vashi (Main Centre) Reported :28-Aug-2021 / 14:45

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

PARAMETER RESULTS

ABO GROUP AB

Rh TYPING POSITIVE

NOTE: Test performed by automated column agglutination technology (CAT) 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 CPL, Andheri West
\*\*\* End Of Report \*\*\*







Dr.SHASHIKANT DIGHADE M.D. (PATH) PATHOLOGIST

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Name : MR. PRAMOD MALHARI RAUT

:31 Years / Male Age / Gender

Consulting Dr.

Reg. Location : Vashi (Main Centre)



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Collected

Reported

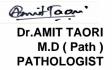
:28-Aug-2021 / 08:47 :28-Aug-2021 / 12:58

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

<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
CHOLESTEROL, Serum	122.5	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	Enzymatic
TRIGLYCERIDES, Serum	56.3	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	Enzymatic
HDL CHOLESTEROL, Serum	29.4	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Enzymatic
NON HDL CHOLESTEROL, Serum	93.1	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	82.0	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	Colorimetric
VLDL CHOLESTEROL, Serum	11.1	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.2	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.8	0-3.5 Ratio	Calculated

<sup>\*</sup>Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Panvel Lab, Panvel East
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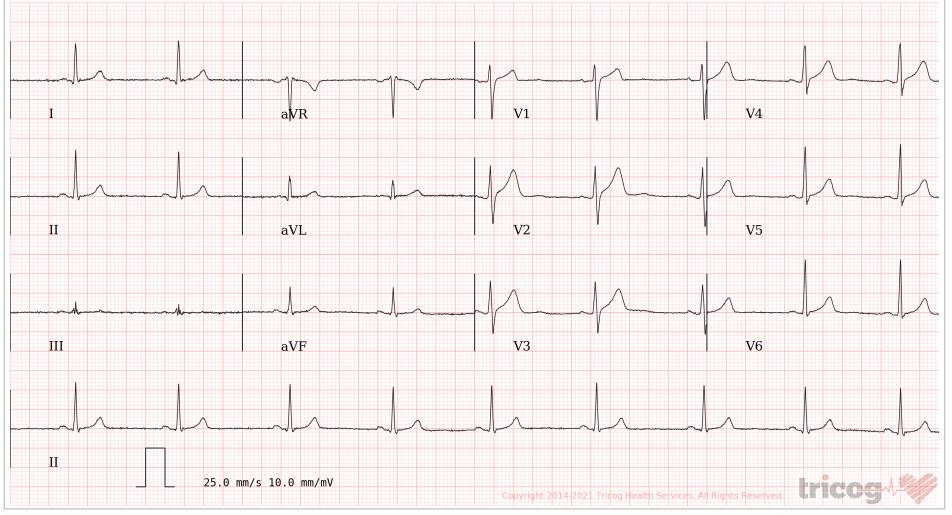
# SUBURBAN DIAGNOSTICS

#### **SUBURBAN DIAGNOSTICS - VASHI**

Patient Name: RAUT PRAMOD MALHARI

Patient ID: 2124036965

Date and Time: 28th Aug 21 9:10 AM



Age 31 11 30 years months days

Gender Male

Heart Rate 56 bpm

#### **Patient Vitals**

BP: NA
Weight: 85 kg
Height: 175 cm
Pulse: NA
Spo2: NA
Resp: NA
Others:

#### Measurements

QSRD: 90 ms
QT: 376 ms
QTc: 362 ms
PR: 132 ms
P-R-T: 50° 39° 31°

ECG Within Normal Limits: Sinus Bradycardia. Otherwise.Please correlate clinically.

REPORTED BY

Aumsman

Dr.Anand N Motwani M.D (General Medicine) Reg No 39329 M.M.C

Disclaimer: 1) Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. 2) Patient vitals are as entered by the clinician and not derived from the ECG.



CID : **2124036965** SID : 177804061696

 Name
 : MR.PRAMOD MALHARI RAUT
 Registered
 : 28-Aug-2021 / 08:40

 Age / Gender
 : 31 Years/Male
 Collected
 : 28-Aug-2021 / 08:40

 Ref. Dr
 : Reported
 : 30-Aug-2021 / 13:25

 Reg.Location
 : Vashi (Main Centre)
 Printed
 : 01-Sep-2021 / 14:00

#### PHYSICAL EXAMINATION REPORT

#### **History and Complaints:**

Asymptomatic for routine check up.

#### **EXAMINATION FINDINGS:**

Height (cms):175Weight (kg):85Temp (0c):NormalSkin:NormalBlood Pressure (mm/hg):140/90Nails:Normal

**Pulse:** 60/min **Lymph Node:** Not Palpable / Not Tender

#### **Systems**

Cardiovascular: Normal
Respiratory: Normal
Genitourinary: Normal
GI System: Normal
CNS: Normal

IMPRESSION: CXR, USG ABDOMEN, CBC, ESR, FBS, PPBS, SGOT, SGPT, ALK, BUN, CREAT, UA, TSH, HbA1C, URINE TEST - ALL NORMAL.

LOW HDL. BORDERLINE HIGH D BIL

TMT NEGATIVE, ECG NOTED

**BLOOD GROUP - AB POSITIVE.** 

ADVICE: CONSULT FAMILY PHYSICIAN WITH ALL THE REPORTS.
BP MONITORING AND CONSULT FAMILY PHYSICIAN, REGULAR FOLLOW UP.

CONSULT OPHTHALMOLOGIST.

DIET AND LIFESTYLE MANAGEMENT, FAT FREE FOODS, ABSTAIN FROM ALCOHOL IF ANY, 8-9 kg weight loss

ADVISED, MONITOR BILIRUBIN AND FASTING LIPID PROFILE AND CONSULT FAMILY PHYSICIAN. FOLLOW COVID VACCINATION SCHEDULE AS PER GOVERNEMENT NORMS AND FITNESS.

#### CHIEF COMPLAINTS: 1st dose of covid vaccine taken

1)	Hypertension:	No
2)	IHD	No
3)	Arrhythmia	No
4)	Diabetes Mellitus	No
5)	Tuberculosis	No
6)	Asthama	No



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7) Pulmonary Disease No
8) Thyroid/ Endocrine disorders No
9) Nervous disorders No

10) **GI system** H/O PILES

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

#### **PERSONAL HISTORY:**

Alcohol
 Smoking
 Diet
 Medication
 No
 Mixed
 None

\*\*\* End Of Report \*\*\*

Dr.SHEPHALI BODKHE MBBS



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 Registered
 : 28-Aug-2021 / 08:40

 Age / Gender
 : 31 Years/Male
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 : 28-Aug-2021 / 08:40

 Ref. Dr
 : Reported
 : 28-Aug-2021 / 09:33

 Reg.Location
 : Vashi (Main Centre)
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 : 01-Sep-2021 / 14:00

#### X-RAY CHEST PA VIEW

The lung fields are clear with no parenchymal lesion.

The cardiothoracic ratio is maintained and the cardiac outline is normal

The domes of the diaphragm are normal.

The cardio and costophrenic angles are clear.

Bony thorax is normal.

#### **IMPRESSION:**

No significant abnormality detected.

\*\*\* End Of Report \*\*\*

Dr.SHILPA BERI MBBS, DMRE, FMF ID 153235 RADIOLOGIST



Dr. Shephali Bodkhe MBBS

2006/03/1809

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R

P

O

T

Date:- 28 |8 |2 |

CID: 21240 36965

7 Please refer "physical Essavination for" attached

Name: - Pramod Mathani Rant

Sex/Age: 314/male

EYE CHECK UP

**Chief complaints:** 

**Systemic Diseases:** 

Past history:

Unaided Vision: -

Aided Vision:

Refraction:

(Right Eye)

(Left Eye)

1			T					
	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	-	+		6/9				Cla
Near	-	-		N6		_		011.
				106				N

Colour Vision Normal Abnormal

Remark:

Consult goththalmology, 2

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# SUBURBAN DIAGNOSTICS

Name: MR PRAMOD MALHARI RAUT ID: 2124036965 **Patient Details** Date: 28-Aug-21

Clinical History: NIL Age: 31 y Sex: M

Medications: NIL

# Test Details

Protocol: Bruce

Total Exec. Time: 10 m 11 s

Max. BP: 200 / 96 mmHg

Test Termination Criteria: THR ACHIEVED

> Pr.MHR: 189 bpm

Max. BP x HR: 33400 mmHg/min Max. HR: 167 (88% of Pr. MHR ) bpm

Min. BP x HR: 6300 mmHg/min

Max. Mets: 13.50

THR: 160 (85 % of Pr.MHR) bpm

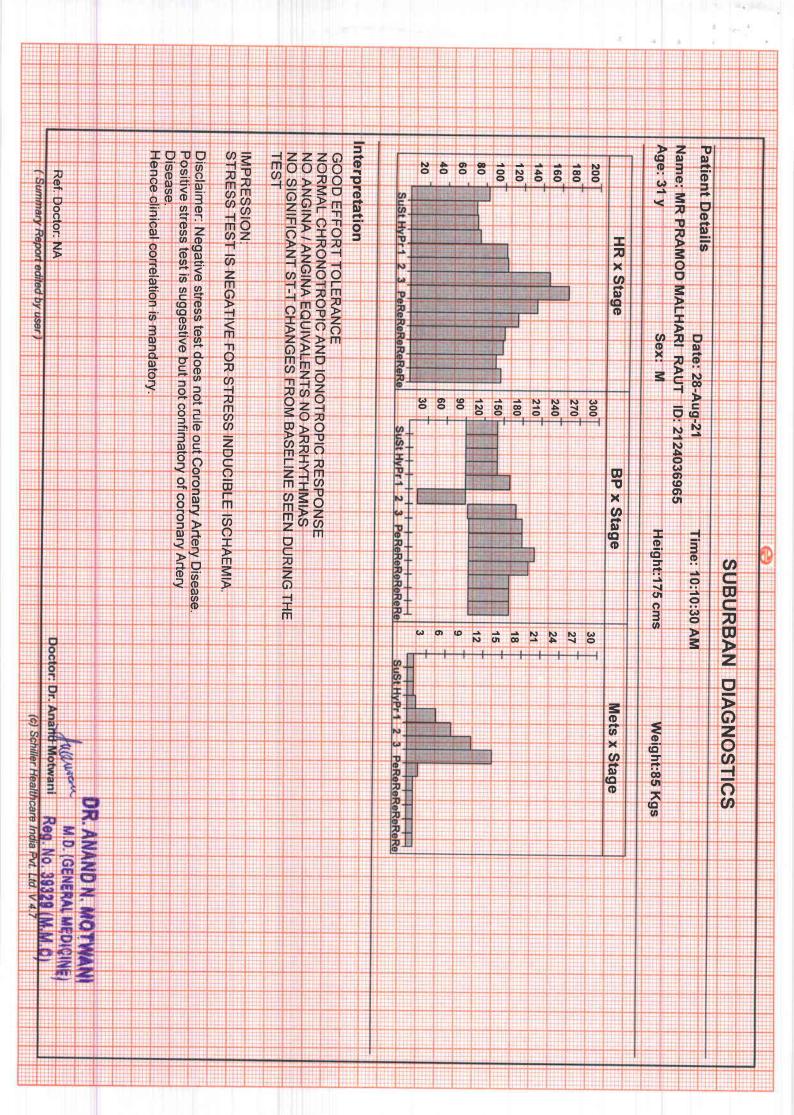
Time: 10:10:30 AM

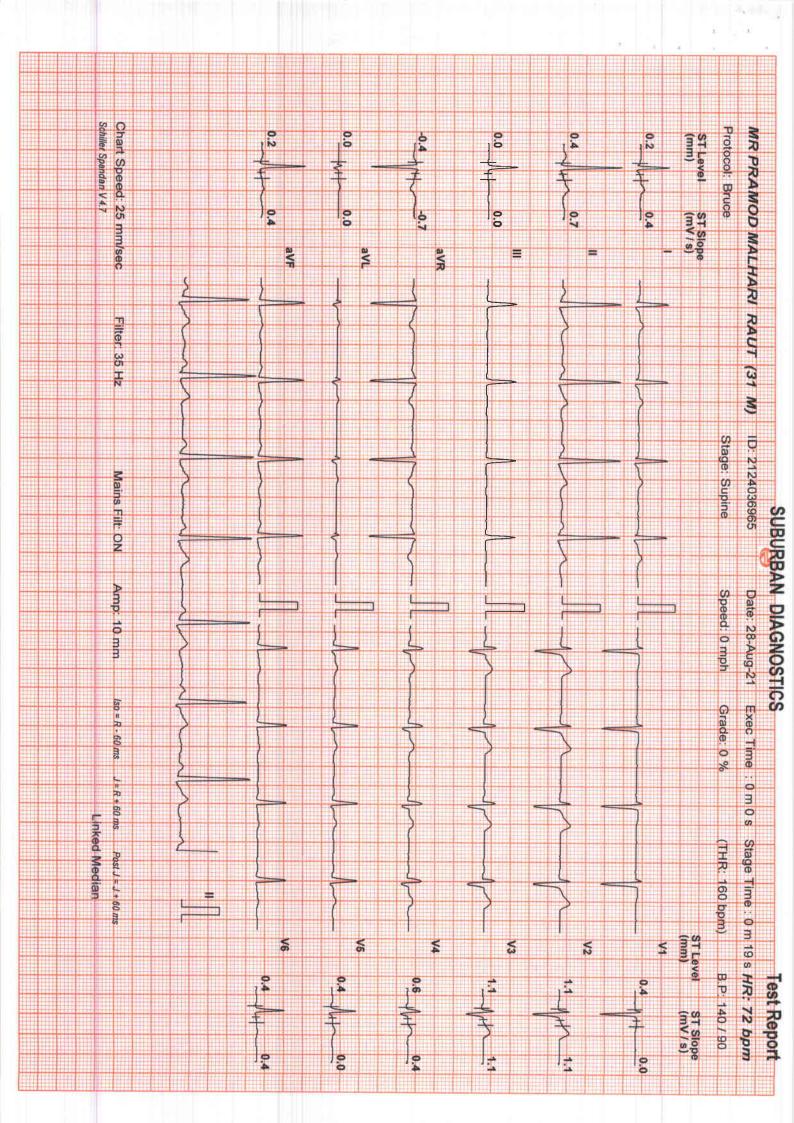
Weight:85 Kg.

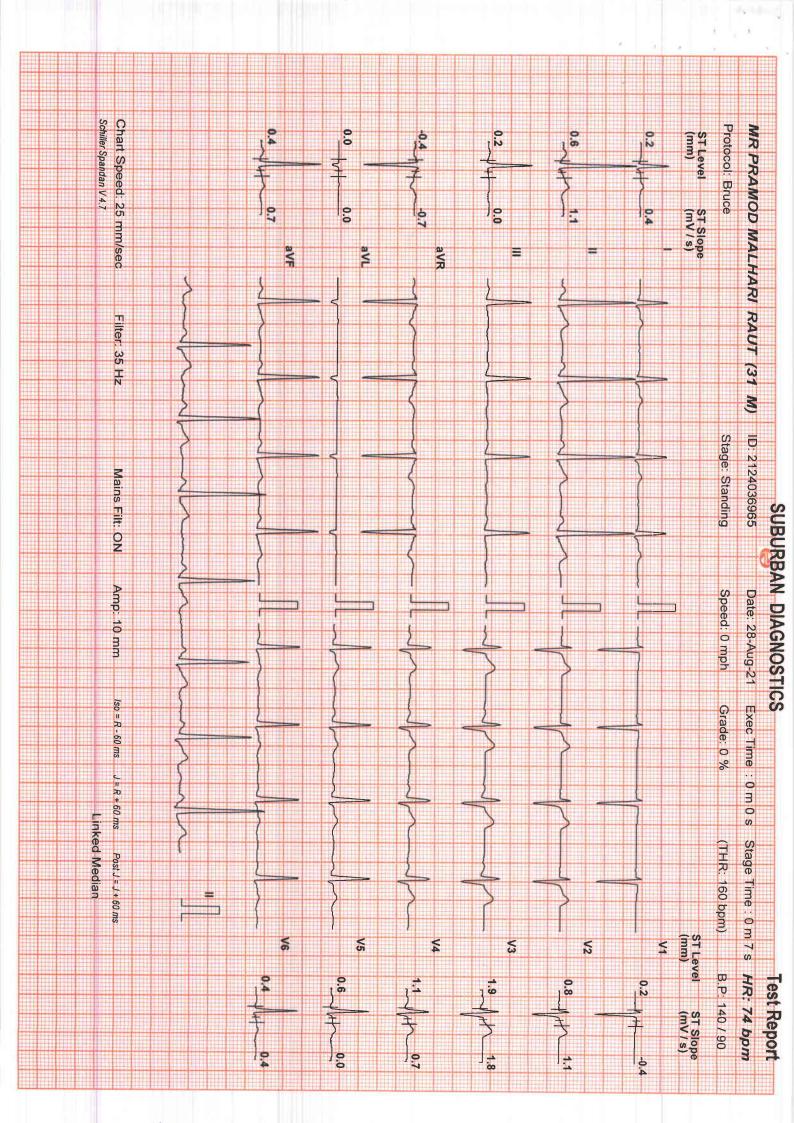
Height:175 cms.

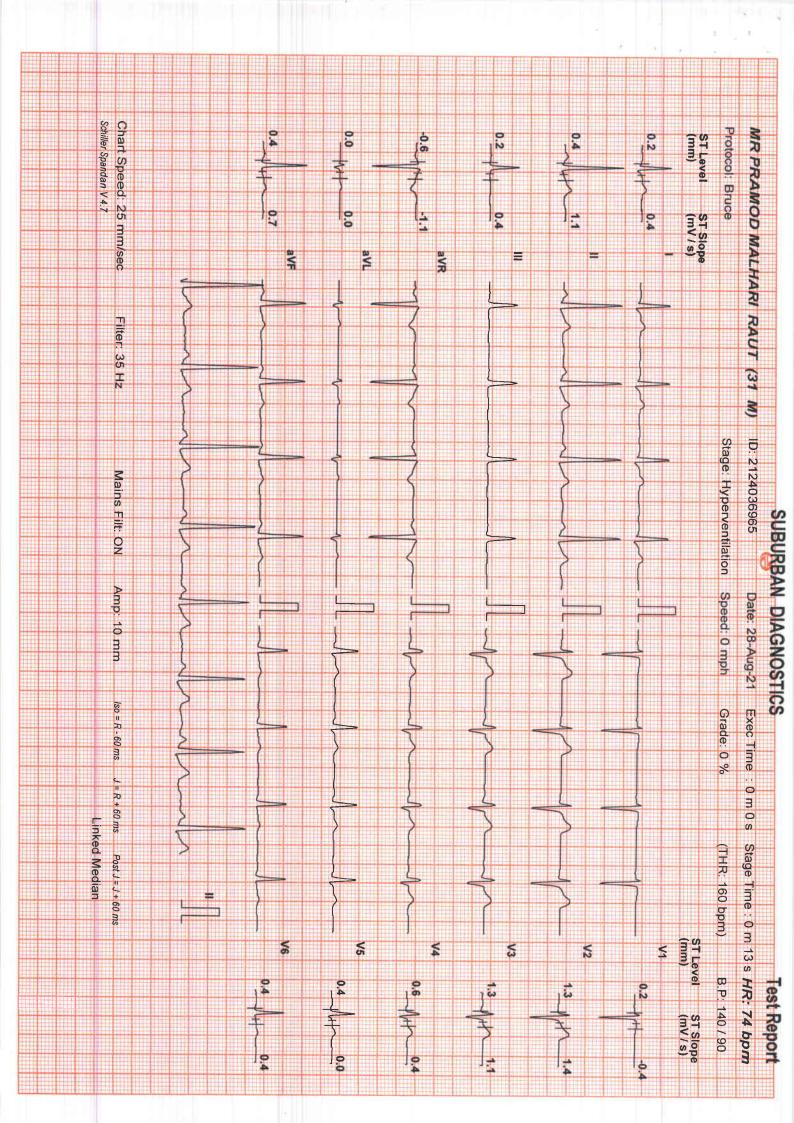
# **Protocol Details**

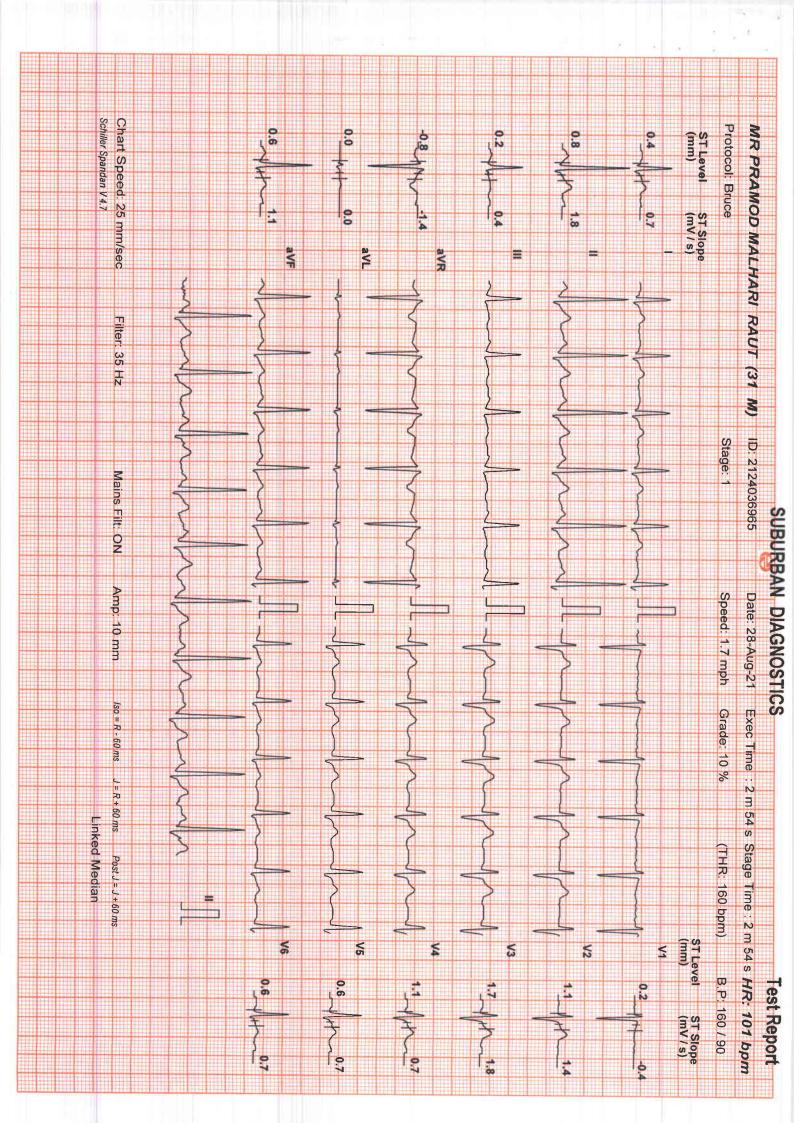
Recovery(5)	Recovery(4)	Recovery(3)	Recovery(2)	Recovery(1)	Peak Ex	3	2		Hyperventilation	Standing	Supine			Stage Name
1:0	1:0	1:0	1:0	1:0	1::1	3:0	3:0	3:0	0:19	0:13	0:25		(min : sec)	Stage Time
1.0	1.0	1.0	1.0	1.8	13.5	10.2	7.0	4.6	1.0	1.0	1.0			Mets
0	0	0	0	-	4.2	3.4	2.5	1.7	0	0	0		(mph)	Speed
0	0	0	0	0	16	14	12	6	0	0	0		(%)	Grade
91	98	100	114	134	167	147	103	102	71	70	83	(bpm)	Rate	Heart
160/96	160/96	190/96	200/96	180/96	180/96	170/94	164/90	160/90	140/90	140/90	140/90		(mm/Hg)	Max. BP
-0.64 aVR	-0.85 aVR	-1.06 aVR	-1.70 aVR	-1.70 aVR	-1.06 III	-0.85 aVR	-0.85 aVR	-0.85 aVR	-0.64 aVR	-0.64 aVR	-0.64 aVR	(mm)	Level	Max. ST
1.77 V2	2.12	3.89 V3	5.66 V3	5.66 V3	3.18	3.54	2.12	2.12 V2	1.42 V3	1.77 V2	1.77 V2	(mV/s)	Slope	Max. ST
	1:0 1.0 0 0 91 160/96 -0.64 aVR	1:0 1.0 0 98 160/96 -0.85 aVR 1:0 1.0 0 91 160/96 -0.64 aVR	1:0 1.0 0 100 190/96 -1.06 aVR 1:0 1.0 0 98 160/96 -0.85 aVR	1:0 1.0 0 0 114 200/96 -1.70 aVR 1:0 1.0 0 0 100 190/96 -1.06 aVR 1:0 1.0 0 0 98 160/96 -0.85 aVR 1:0 1.0 0 0 91 160/96 -0.64 aVR	1:0 1.8 1 0 134 180/96 -1.70 aVR 1:0 1.0 0 0 114 200/96 -1.70 aVR 1:0 1.0 0 0 100 190/96 -1.06 aVR 1:0 1.0 0 0 98 160/96 -0.85 aVR	1:11   13.5   4.2   16   167   180/96   -1.06	3:0   10.2   3.4   14   147   170/94   -0.85 aVR   1:11   13.5   4.2   16   167   180/96   -1.06 III   1:0   1.8   1   0   13.4   180/96   -1.70 aVR   1:0   1.0   0   0   11.4   200/96   -1.70 aVR   1:0   1.0   0   0   190/96   -1.06 aVR   1:0   1:0   0   0   98   160/96   -0.85 aVR   1:0   1:0   0   0   91   160/96   -0.64 aVR   1:0   1:0   1.0   0   0   0   0   0   0   0   0   0	3:0 7.0 2.5 12 103 164/90 -0.85 aVR 3:0 10.2 3.4 14 147 170/94 -0.85 aVR 1:11 13.5 4.2 16 167 180/96 -1.06 III (1) 1:0 1.8 1 0 134 180/96 -1.70 aVR (2) 1:0 1.0 0 0 114 200/96 -1.70 aVR (3) 1:0 1.0 0 0 100 190/96 -1.06 aVR (4) 1:0 1.0 0 0 98 160/96 -0.85 aVR (5) 1:0 1.0 0 0 91 160/96 -0.64 aVR	3:0 4.6 1.7 10 102 160/90 -0.85 aVR 3:0 7.0 2.5 12 103 164/90 -0.85 aVR 3:0 10.2 3.4 14 147 170/94 -0.85 aVR 1:11 13.5 4.2 16 167 180/96 -1.06 III y(1) 1:0 1.8 1 0 134 180/96 -1.70 aVR y(2) 1:0 1.0 0 0 114 200/96 -1.70 aVR y(3) 1:0 1.0 0 0 100 190/96 -1.06 aVR y(4) 1:0 1.0 0 0 98 160/96 -0.85 aVR	Intilation         0:19         1.0         0         71         140/90         -0.64 aVR           3:0         4.6         1.7         10         102         160/90         -0.85 aVR           3:0         7.0         2.5         12         103         164/90         -0.85 aVR           1:11         13.5         4.2         16         167         180/96         -1.06 III           (1)         1:0         1.8         1         0         134         180/96         -1.70 aVR           (2)         1:0         1.0         0         114         200/96         -1.70 aVR           (3)         1:0         1.0         0         100         190/96         -1.06 aVR           (4)         1:0         0         0         100         190/96         -0.85 aVR           (5)         1:0         0         0         91         160/96         -0.64 aVR	Intiliation         0:13         1.0         0         0         70         140/90         -0.64 aVR           Intiliation         0:19         1.0         0         71         140/90         -0.64 aVR           3:0         4.6         1.7         10         102         160/90         -0.85 aVR           3:0         7.0         2.5         12         103         164/90         -0.85 aVR           3:0         10.2         3.4         14         147         170/94         -0.85 aVR           1:11         13.5         4.2         16         167         180/96         -1.70 aVR           (1)         1:0         1.8         1         0         134         180/96         -1.70 aVR           (2)         1:0         1.0         0         114         200/96         -1.70 aVR           (3)         1:0         1.0         0         98         160/96         -0.85 aVR           (4)         1:0         0         0         99         160/96         -0.84 aVR	0:25 1.0 0 0 83 140/90 -0.64 aVR 0:13 1.0 0 0 70 140/90 -0.64 aVR 1.0 0 0 70 140/90 -0.64 aVR 1.0 0 0 71 140/90 -0.64 aVR 1.0 1.0 0 0 71 140/90 -0.65 aVR 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0		(min:sec)         (mph)         (%)         Rate (mm/Hg)         Level (mm)           0:25         1.0         0         83         140/90         -0.64 aVR           0:13         1.0         0         0         70         140/90         -0.64 aVR           ntilation         0:19         1.0         0         0         71         140/90         -0.64 aVR           3:0         4.6         1.7         10         102         160/90         -0.85 aVR           3:0         7.0         2.5         12         103         164/90         -0.85 aVR           3:0         10.2         3.4         14         147         170/94         -0.85 aVR           1:11         13.5         4.2         16         167         180/96         -1.06 III           (1)         1:0         0         0         114         200/96         -1.70 aVR           (2)         1:0         0         0         100/96         -1.06 aVR           (3)         1:0         0         0         100/96         -0.85 aVR           (4)         1:0         0         0         100/96         -0.85 aVR           (5)         1:0

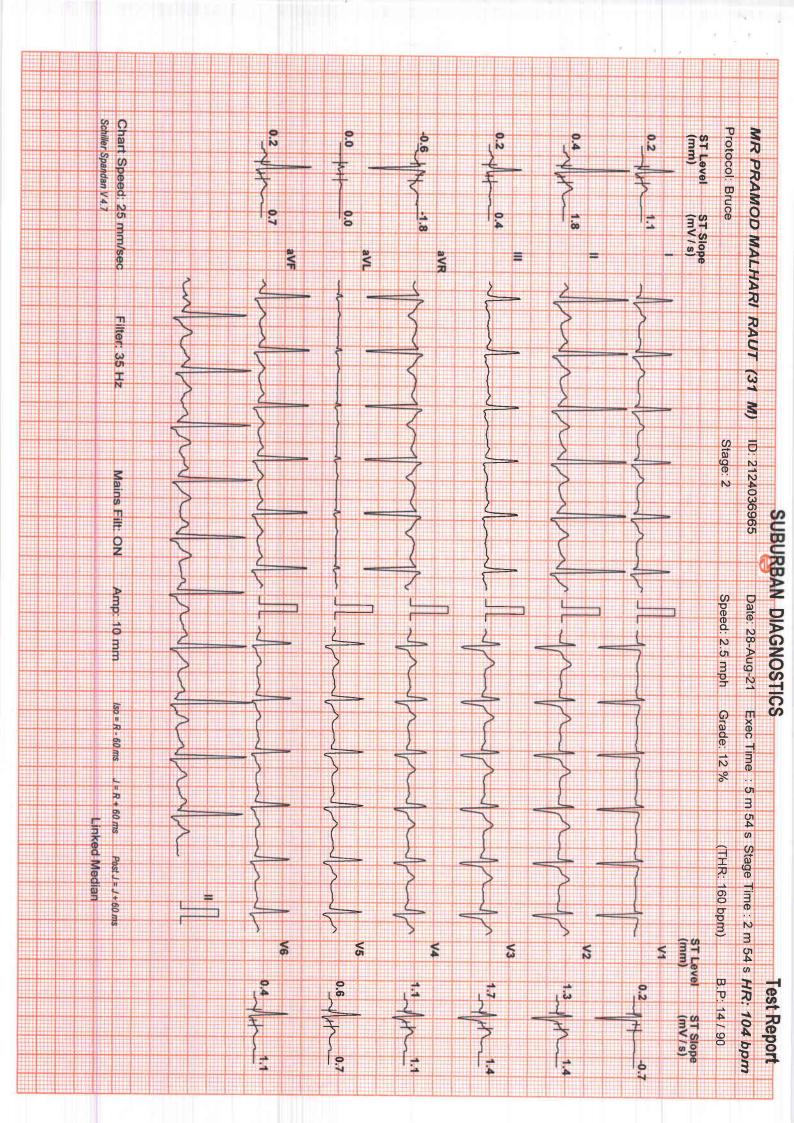


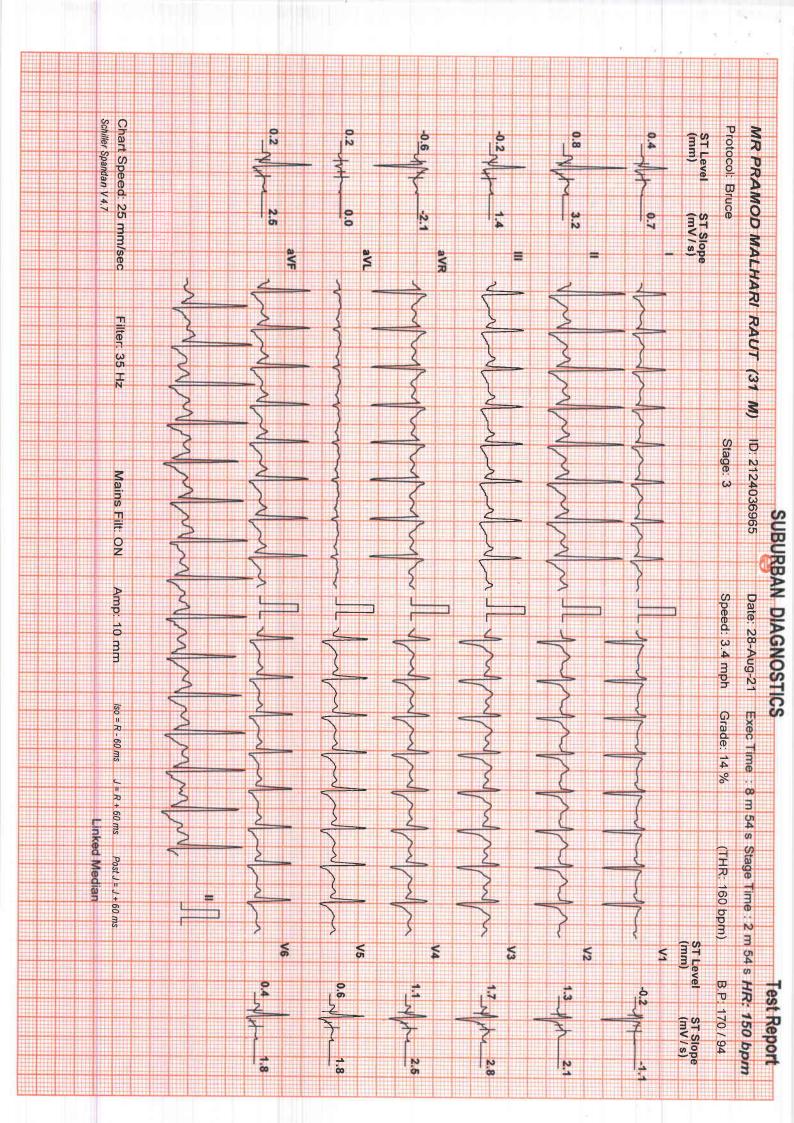


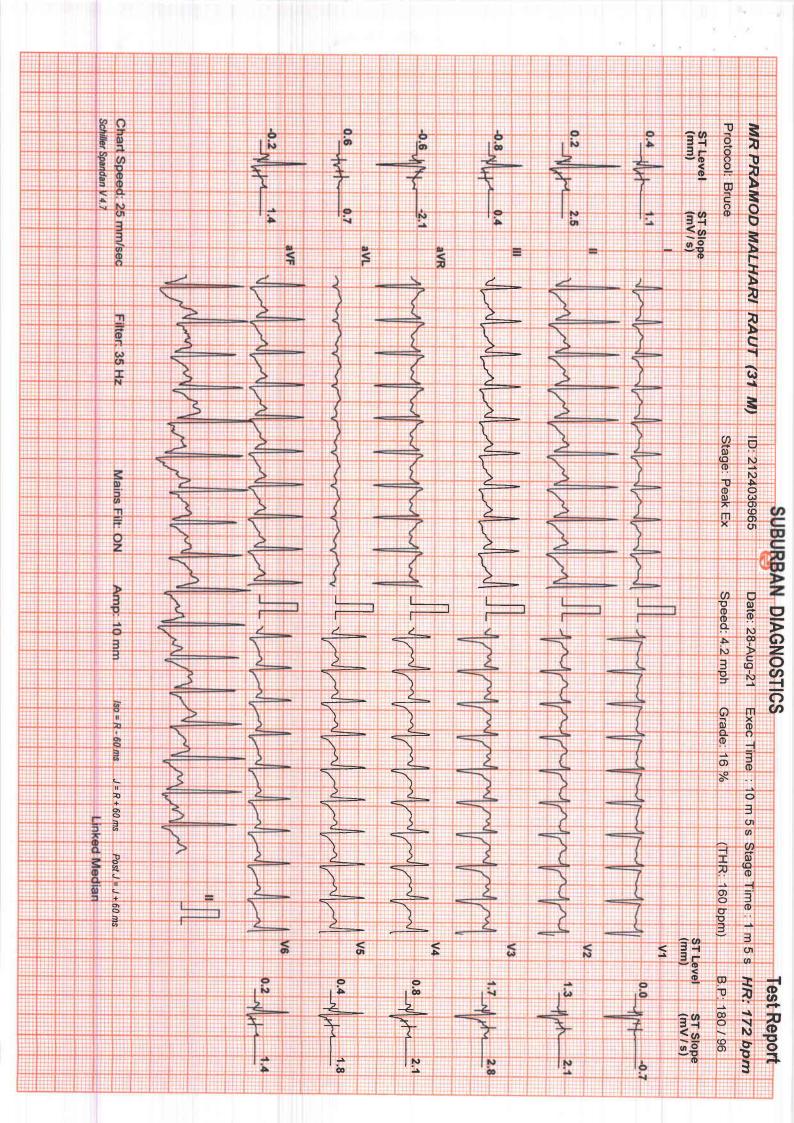


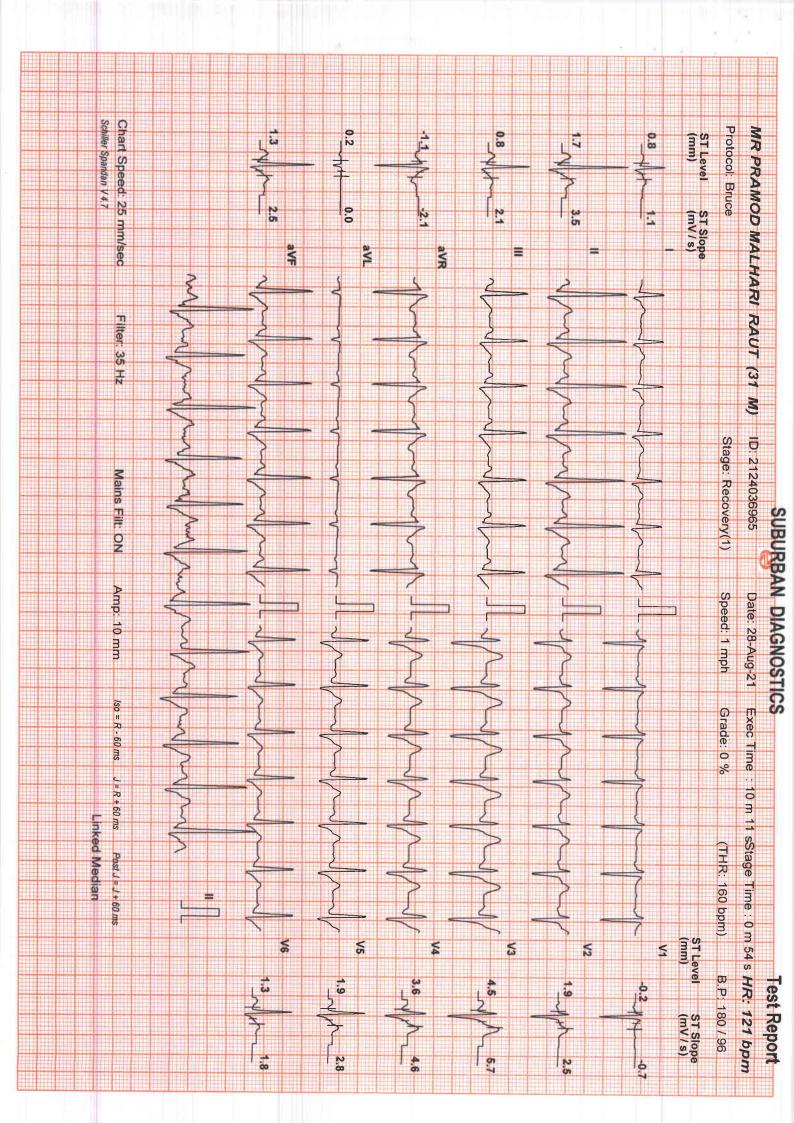


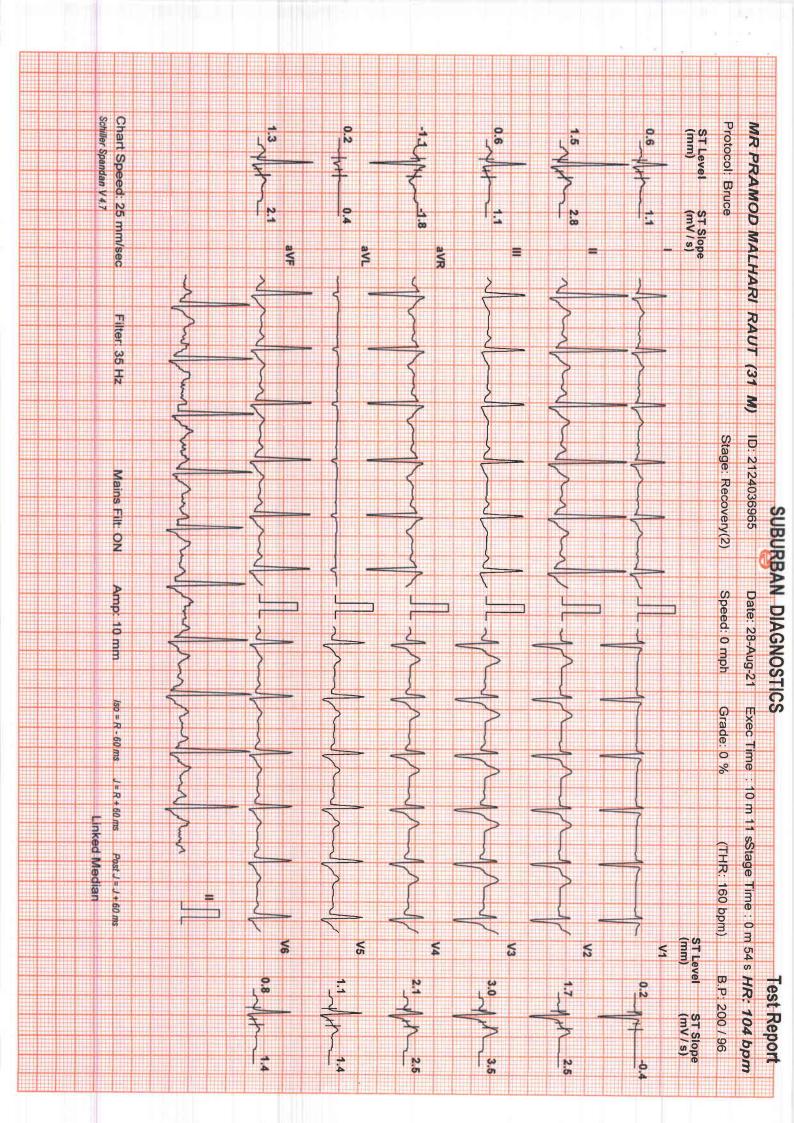


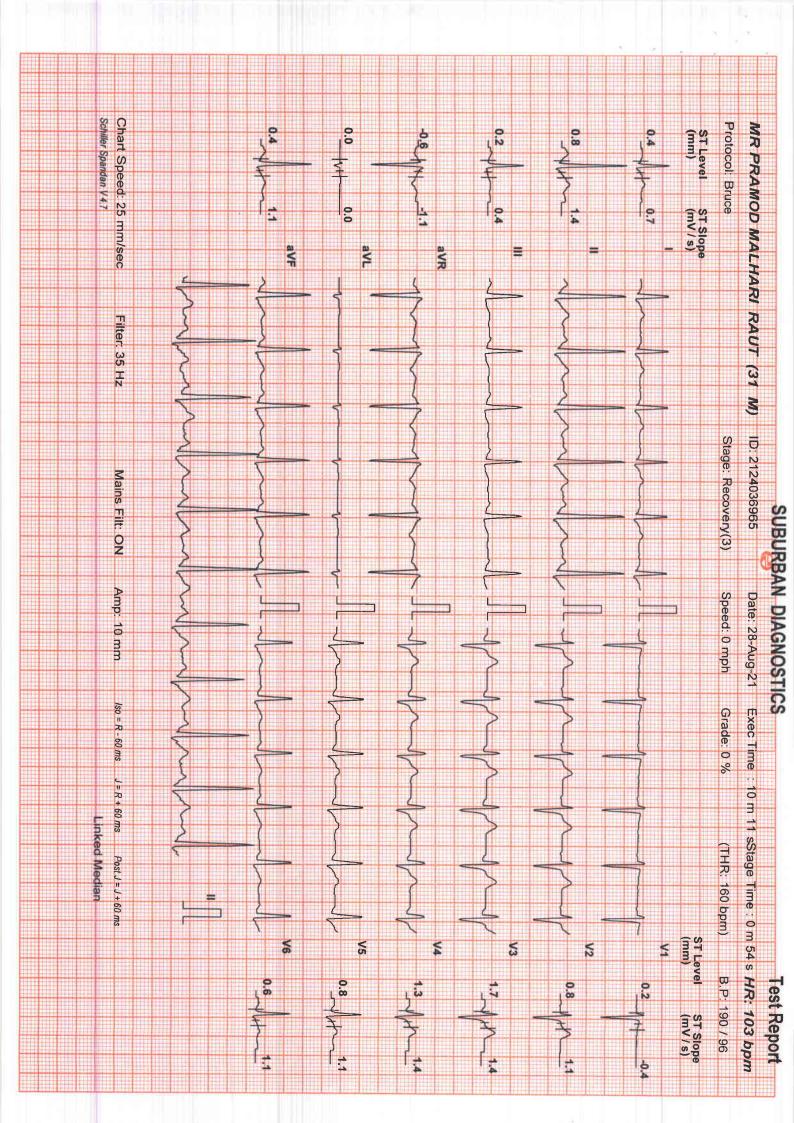


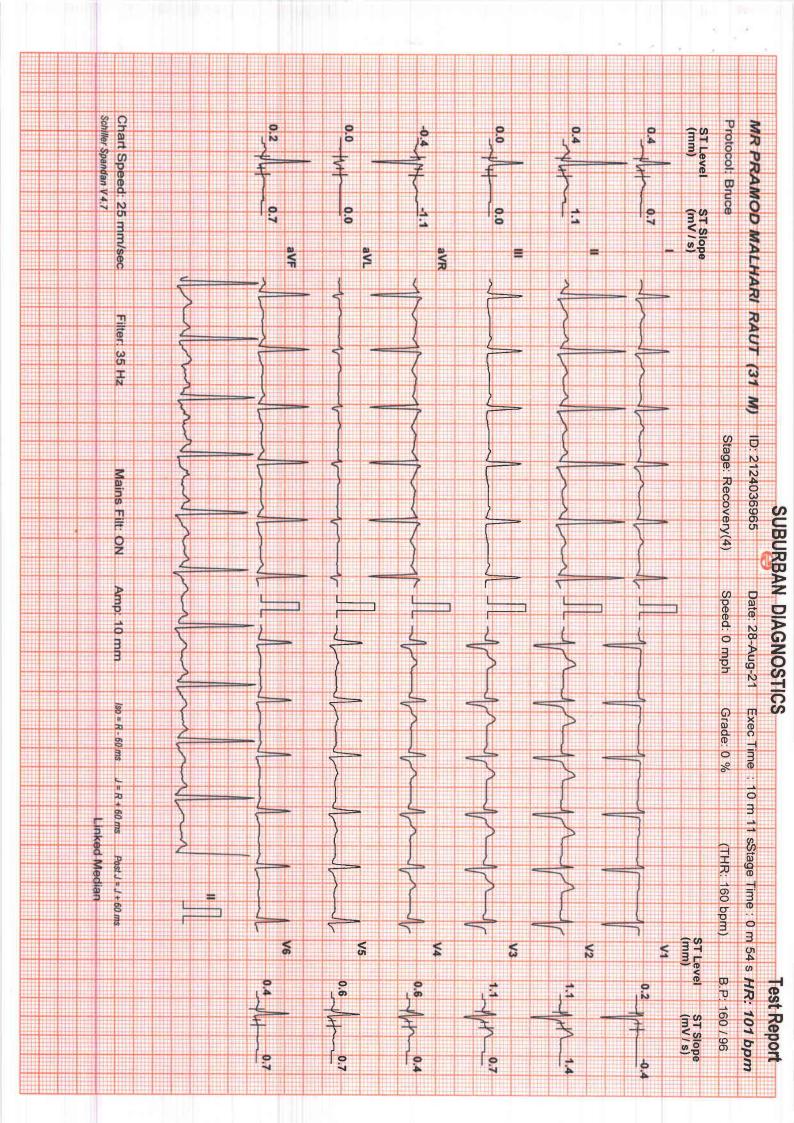


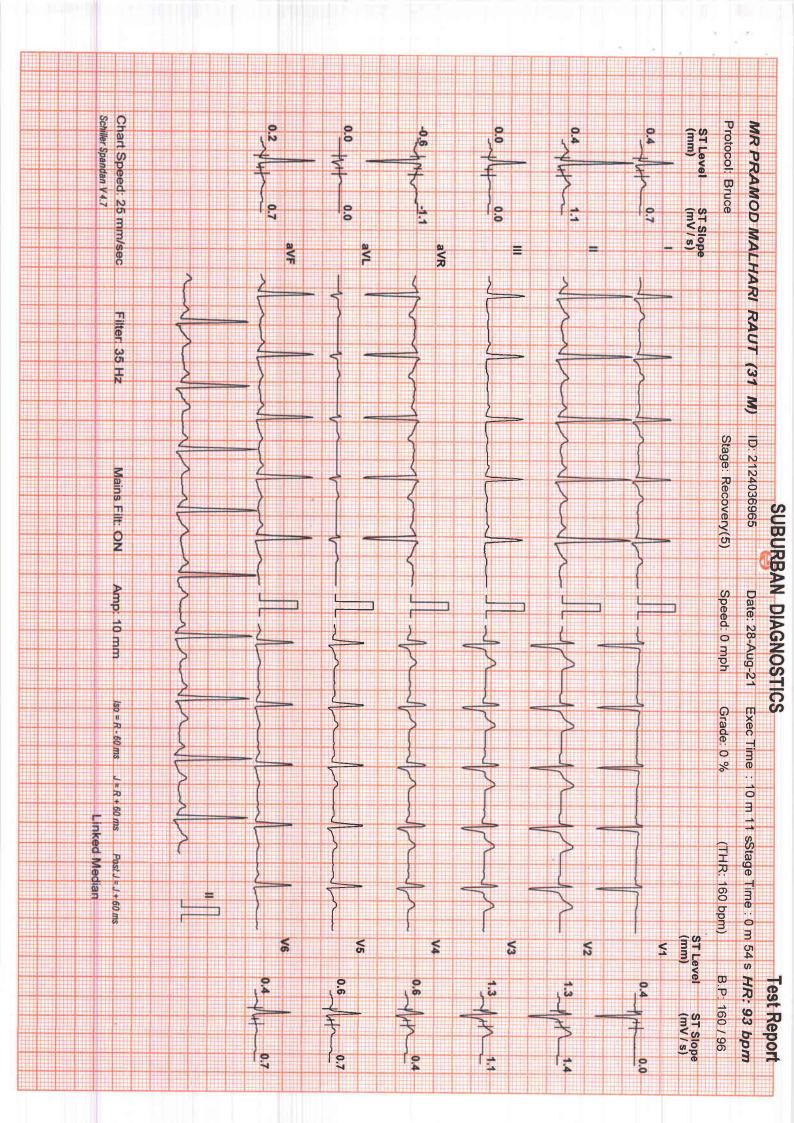


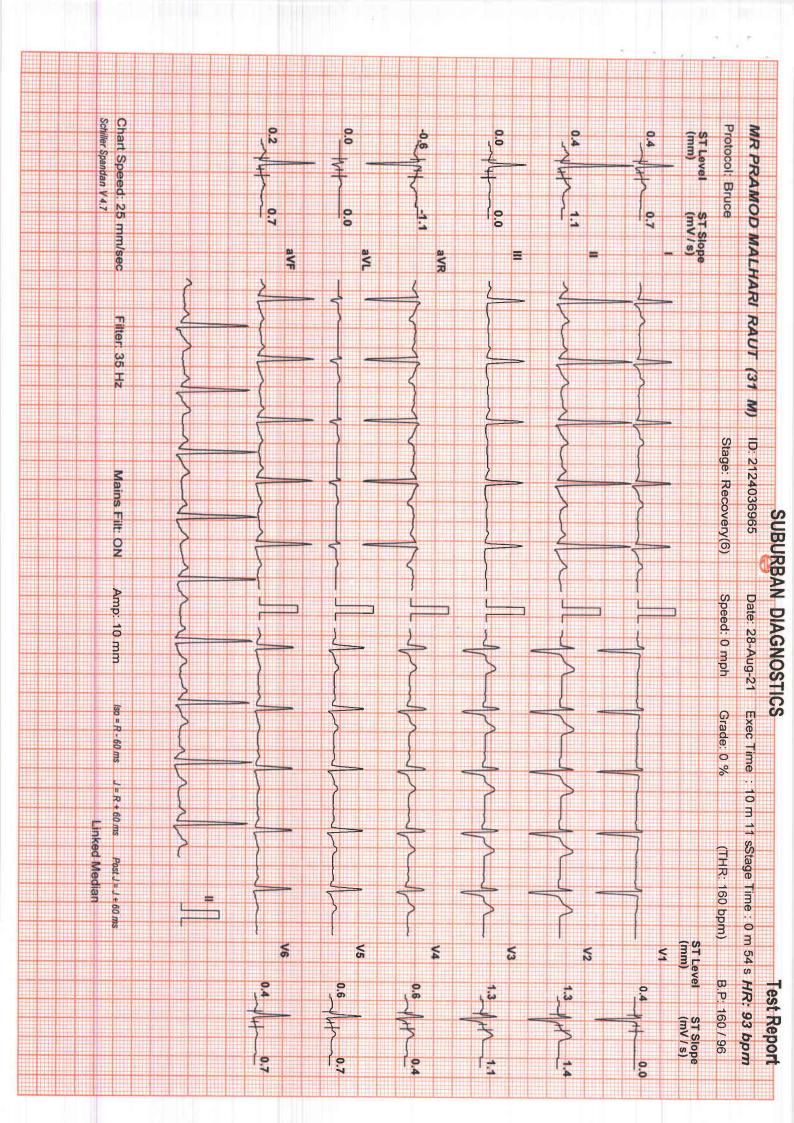














CID : **2124036965** SID : 177804061696

 Name
 : MR.PRAMOD MALHARI RAUT
 Registered
 : 28-Aug-2021 / 08:40

 Age / Gender
 : 31 Years/Male
 Collected
 : 28-Aug-2021 / 08:40

 Ref. Dr
 : Reported
 : 28-Aug-2021 / 18:24

 Reg.Location
 : Vashi (Main Centre)
 Printed
 : 01-Sep-2021 / 14:00

#### **USG WHOLE ABDOMEN**

#### LIVER:

The liver is normal in size, shape and smooth margins. It shows normal parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein and CBD appears normal.

#### **GALL BLADDER:**

The gall bladder is partially distended and appears normal. No evidence of gall stones or mass lesions seen

#### **PANCREAS:**

The pancreas well visualised and appears normal.

No evidence of solid or cystic mass lesion is noted.

#### **KIDNEYS:**

Both the kidneys are normal in size shape and echotexture.

No evidence of any calculus, hydronephrosis or mass lesion seen.

Right kidney measures 10.1 x 4.1 cms. Left kidney measures 10.7 x 4.4 cms.

#### SPLEEN:

The spleen is normal in size (12.7 cm), and shape and echotexture.

No evidence of focal lesion is noted. There is no evidence of any lymphadenopathy or ascitis.

#### **URINARY BLADDER:**

The urinary bladder is well distended. It shows thin walls and sharp mucosa.

No evidence of calculus is noted. No mass or diverticulum is seen.

#### **PROSTATE:**

The prostate is normal in size and echotexture. It measures 3.2 x 2.9 x 2.9 cms and weighs 14.8 gms.

#### **IMPRESSION:**

No Significant abnormality is detected.

\*\*\* End Of Report \*\*\*

Dr.Jamila Fanii RADIOLOGIST