



CID : 2302714969  
Name : MR.JAYESH GIRDHAR CHAUDHARI  
Age / Gender : 35 Years / Male  
Consulting Dr. : -  
Reg. Location : Vashi (Main Centre)

Collected : 27-Jan-2023 / 09:19  
Reported : 27-Jan-2023 / 11:51

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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>
<b><u>RBC PARAMETERS</u></b>			
Haemoglobin	15.0	13.0-17.0 g/dL	Spectrophotometric
RBC	4.94	4.5-5.5 mil/cmm	Elect. Impedance
PCV	45.2	40-50 %	Measured
MCV	92	80-100 fl	Calculated
MCH	30.4	27-32 pg	Calculated
MCHC	33.2	31.5-34.5 g/dL	Calculated
RDW	13.4	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	6240	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	29.6	20-40 %	
Absolute Lymphocytes	1847.0	1000-3000 /cmm	Calculated
Monocytes	6.4	2-10 %	
Absolute Monocytes	399.4	200-1000 /cmm	Calculated
Neutrophils	57.4	40-80 %	
Absolute Neutrophils	3581.8	2000-7000 /cmm	Calculated
Eosinophils	5.4	1-6 %	
Absolute Eosinophils	337.0	20-500 /cmm	Calculated
Basophils	1.2	0.1-2 %	
Absolute Basophils	74.9	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<b><u>PLATELET PARAMETERS</u></b>			
Platelet Count	288000	150000-400000 /cmm	Elect. Impedance
MPV	7.9	6-11 fl	Calculated
PDW	11.7	11-18 %	Calculated



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**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 3 2-15 mm at 1 hr. Sedimentation

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



*J. Mujawar*  
**Dr. IMRAN MUJAWAR**  
**M.D ( Path )**  
**Pathologist**



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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	87.1	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	97.1	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	1.29	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.39	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.90	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.5	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.8	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	1.7	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	2.8	1 - 2	Calculated
SGOT (AST), Serum	14.2	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	17.7	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	21.4	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	61.4	40-130 U/L	Colorimetric
BLOOD UREA, Serum	13.2	12.8-42.8 mg/dl	Kinetic
BUN, Serum	6.2	6-20 mg/dl	Calculated
CREATININE, Serum	0.91	0.67-1.17 mg/dl	Enzymatic



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eGFR, Serum	101	>60 ml/min/1.73sqm	Calculated
URIC ACID, Serum	5.7	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	

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



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**M.D ( Path )**  
**Pathologist**





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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.5	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	111.2	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.

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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE  
EXAMINATION OF FAECES**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>
<b><u>PHYSICAL EXAMINATION</u></b>		
Colour	Brown	Brown
Form and Consistency	Semi Solid	Semi Solid
Mucus	Absent	Absent
Blood	Absent	Absent
<b><u>CHEMICAL EXAMINATION</u></b>		
Reaction (pH)	Acidic (6.5)	-
Occult Blood	Absent	Absent
<b><u>MICROSCOPIC EXAMINATION</u></b>		
Protozoa	Absent	Absent
Flagellates	Absent	Absent
Ciliates	Absent	Absent
Parasites	Absent	Absent
Macrophages	Absent	Absent
Mucus Strands	Absent	Absent
Fat Globules	Absent	Absent
RBC/hpf	Absent	Absent
WBC/hpf	Absent	Absent
Yeast Cells	Absent	Absent
Undigested Particles	Present +	-
Concentration Method (for ova)	No ova detected	Absent

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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**URINE EXAMINATION REPORT**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	Acidic (6.5)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.015	1.001-1.030	Chemical Indicator
Transparency	Slight hazy	Clear	-
Volume (ml)	50 ml	-	-
<b><u>CHEMICAL EXAMINATION</u></b>			
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
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Leukocytes(Pus cells)/hpf	5-6	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	3-4		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	6-8	Less than 20/hpf	

Kindly correlate clinically.

**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



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**M.D ( Path )**  
**Pathologist**



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

<b><u>PARAMETER</u></b>	<b><u>RESULTS</u></b>
ABO GROUP	A
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.

**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 SDRL, Vidyavihar Lab  
\*\*\* End Of Report \*\*\*



**Dr. TRUPTI SHETTY**  
**M. D. (PATH)**  
**Pathologist**





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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	167.4	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	131.0	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	35.8	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	131.6	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	106.0	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	25.6	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.7	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	3.0	0-3.5 Ratio	Calculated

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**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	4.8	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	<b>29.9</b>	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	0.553	0.35-5.5 microIU/ml	ECLIA



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**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)

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



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**M.D ( Path )**  
**Pathologist**



**PHYSICAL EXAMINATION REPORT**

Patient Name	Mr Joyesh Chaudhari	Sex/Age	m/35
Date	27/01/23	CID	2302714969

**History and Complaints**

No etc

**EXAMINATION FINDINGS:**

Height (cms):	173	Temp (0c):	Normal
Weight (kg):	81	Skin:	Normal
Blood Pressure	130/80	Nails:	clubbing + cyanosed
Pulse	68/m	Lymph Node:	Thyroid Enlargement (+)
BMI	27.1		

**Systems :**

Cardiovascular:	Normal
Respiratory:	Normal -
Genitourinary:	normal -
GI System:	Acidity,
CNS:	Drugs, No

**Impression:** USG Abd - mild splenomegaly  
LFT → ↑ ALP, ↑ T4 -

**Advice:** Refer to physician for further management

**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	+
9)	Nervous disorders	Drumell,
10)	GI system	Acidity & ...
11)	Genital urinary disorder	normal
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	NAD

**PERSONAL HISTORY:**

1)	Alcohol	Occasional / 1mtn / 10 yr
2)	Smoking	NO
3)	Diet	Veg
4)	Medication	Thyronorm 1gmg



**Dr. Alka Patnaik**  
M.B.B.S., C.G.O.-Nagpur Reg. No. 73367  
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**X-RAY CHEST PA VIEW**

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

**IMPRESSION:**

**NO SIGNIFICANT ABNORMALITY IS DETECTED.**

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

Dr R K Bhandari  
M D , DMRE  
MMC REG NO. 34078



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आयकर विभाग  
INCOME TAX DEPARTMENT

भारत सरकार  
GOVT. OF INDIA

JAYESH GIRDHAR CHAUDHARI  
GIRDHAR KHANDU CHAUDHARI

09/09/1987  
Permanent Account Number  
AMYPC3655M

  
Signature



17/2/2009

  
**Dr. Alka Patnaik**  
M.B.B.S., C.C. Registrar Reg. No. 73367  
Dip. Psychotherapy-U.K. Reg. No. OF395



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Sector-17, Vashi, Navi Mumbai - 400 703  
Tel 27884547 / 27864548.



Date:- 27/1/23

CID: 2302714969

Name:- Mr Jayesh choudhreei

Sex / Age: M / 35

**EYE CHECK UP**

Chief complaints: No

Systemic Diseases: No

Past history: No

Unaided Vision: No

Aided Vision: Yes

Refraction: without glass

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance				6/6				6/6
Near				N/6				N/6

Colour Vision: Normal / Abnormal

Remark:

  
**Dr. Alka Patnaik**  
M.B.B.S., C.G.O. Nagpur Reg. No. 7111  
Dip. Psysextherapy-U.K. Reg. No. 01395

**SUBURBAN DIAGNOSTICS (I) PVT. LTD.**  
Shop No. 22, Ground Floor, Raikar Bhavan,  
Sector-17, Vashi, Navi Mumbai - 400 703  
Tel 27884547 / 27864548.

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

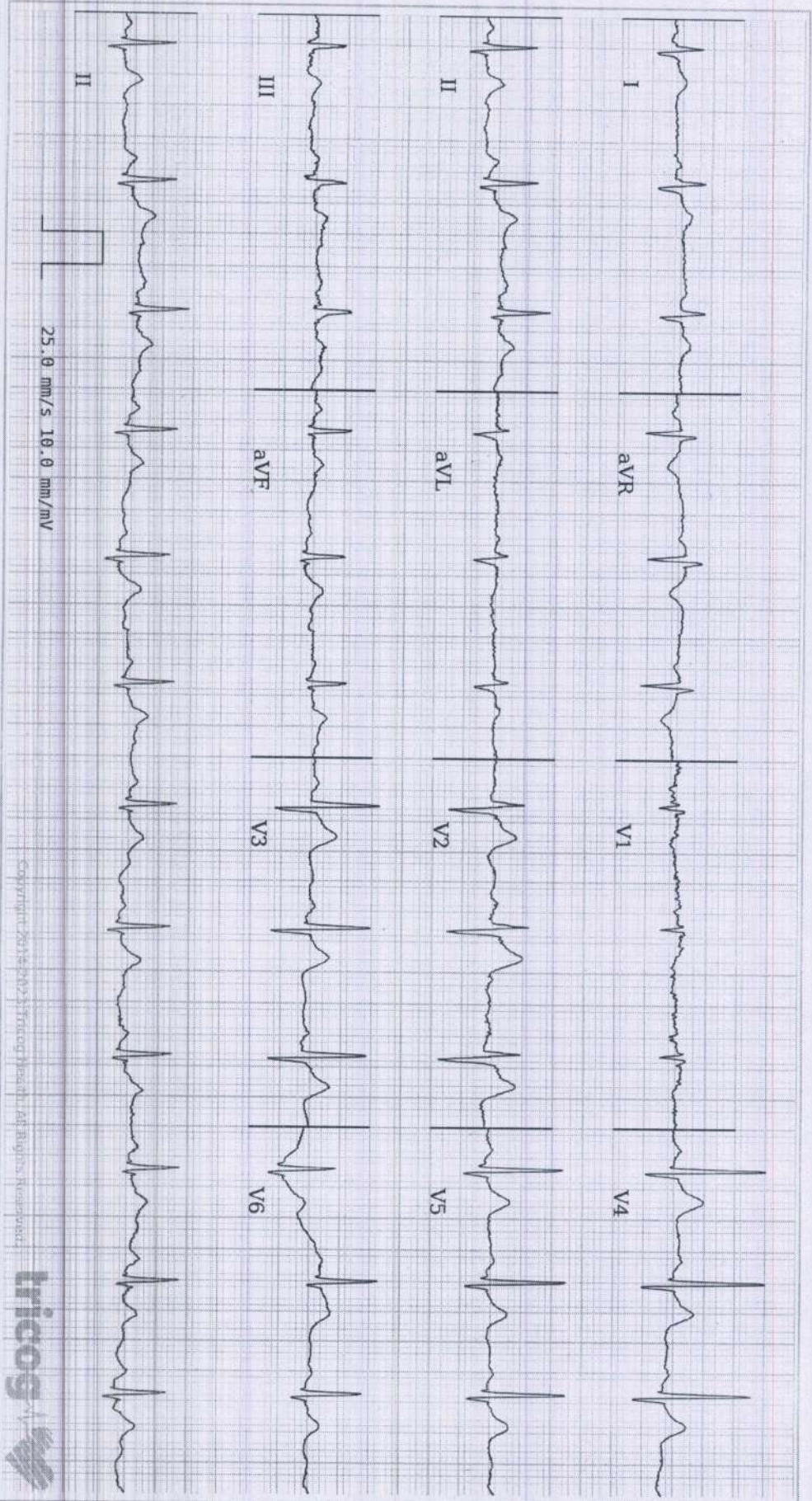
HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343

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



**Patient Name:** JAYESH GIRDHAR CHAUDHARI  
**Date and Time:** 27th Jan 23 12:00 PM  
**Patient ID:** 2302714969

**SUBURBAN DIAGNOSTICS - VASHI**



Age **35** years **4** months **18** days

Gender **Male**

Heart Rate **75bpm**

Patient Vitals

BP: 130/80 mmHg

Weight: 81 kg

Height: 173 cm

Pulse: NA

Spo2: NA

Resp: NA

Others:

**Measurements**

QRSD: 94ms

QT: 354ms

QTc: 395ms

PR: 148ms

P-R-T: 58° 81° 61°

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

REPORTED BY

*Aravind*

Dr Aravind 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.





Authenticity Check



Use a QR Code Scanner  
Application To Scan the Code

**CID** : 2302714969  
**Name** : Mr JAYESH GIRDHAR CHAUDHARI  
**Age / Sex** : 35 Years/Male  
**Ref. Dr** :  
**Reg. Location** : Vashi Main Centre

**Reg. Date** : 27-Jan-2023  
**Reported** : 27-Jan-2023 / 10:30

## 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 physiologically distended and appears normal. No evidence of gall stones or mass lesions seen.

### PANCREAS:

The pancreas is well visualised and appears normal. No evidence of solid or cystic mass lesion.

### KIDNEYS:

Both the kidneys are normal in size shape and echotexture.  
No evidence of any calculus, hydronephrosis or mass lesion seen.  
Right kidney measures 8.9 x 3.9 cm. Left kidney measures 10.3 x 3.3 cm.

### SPLEEN:

The spleen is enlarged in size (13.1 cm) and has normal echotexture. No evidence of focal lesion is noted. There is no evidence of any lymphadenopathy or ascites.

### URINARY BLADDER:

The urinary bladder is well distended and reveal no intraluminal abnormality.

### PROSTATE:

The prostate is normal in size and measures 2.7 x 3.2 x 3.3 cm volume is 15.4 cc.

### IMPRESSION:

Mild splenomegaly.

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

Dr Shilpa Beri  
MBBS DMRE  
Reg No 2002/05/2302  
Consultant Radiologist

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023012709180938>

Page no 1 of 1



## SUBURBAN DIAGNOSTICS

**Patient Details**

Date: 27-Jan-23

Time: 12:31:51 PM

Name: MR.JAYESH CHAUDHARI ID: 2302714969

Age: 35 y

Sex: M

Height: 173 cms

Weight: 81 Kgs

Clinical History: H/O HYPOTHYROIDISM

Medications: FOR HYPOTHYROIDISM

**Test Details**

Protocol: Bruce

Total Exec. Time: 7 m 12 s

Max. BP: 160 / 90 mmHg

Test Termination Criteria: THR ACHIEVED

P.r.MHR: 185 bpm

Max. HR: 163 ( 88% of P.r.MHR ) bpm

Max. BP x HR: 26080 mmHg/min

THR: 157 ( 85 % of P.r.MHR ) bpm

Max. Mets: 10.20

Min. BP x HR: 608 mmHg/min

**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 : 33	1.0	0	0	78	130 / 80	-0.85 aVR	2.12 V2
Standing	0 : 25	1.0	0	0	78	130 / 80	-1.06 aVR	1.77 V2
Hyperventilation	0 : 13	1.0	0	0	76	130 / 80	-1.06 aVR	1.77 V2
1	3 : 0	4.6	1.7	10	120	140 / 8	-1.49 aVR	3.54 II
2	3 : 0	7.0	2.5	12	150	150 / 86	-1.70 aVR	3.89 II
Peak Ex	1 : 12	10.2	3.4	14	163	160 / 90	-1.70 aVR	4.60 II
Recovery(1)	1 : 0	1.8	1	0	132	160 / 90	-3.82 aVR	-5.66 aVR
Recovery(2)	1 : 0	1.0	0	0	114	160 / 90	-3.82 aVR	5.66 II
Recovery(3)	1 : 0	1.0	0	0	106	140 / 80	-2.34 aVR	4.95 II
Recovery(4)	1 : 0	1.0	0	0	109	140 / 80	-1.27 aVR	2.83 II
Recovery(5)	1 : 0	1.0	0	0	97	130 / 80	-0.85 aVR	1.77 II
Recovery(6)	0 : 19	1.0	0	0	101	130 / 80	-0.85 aVR	1.77 V2



# SUBURBAN DIAGNOSTICS

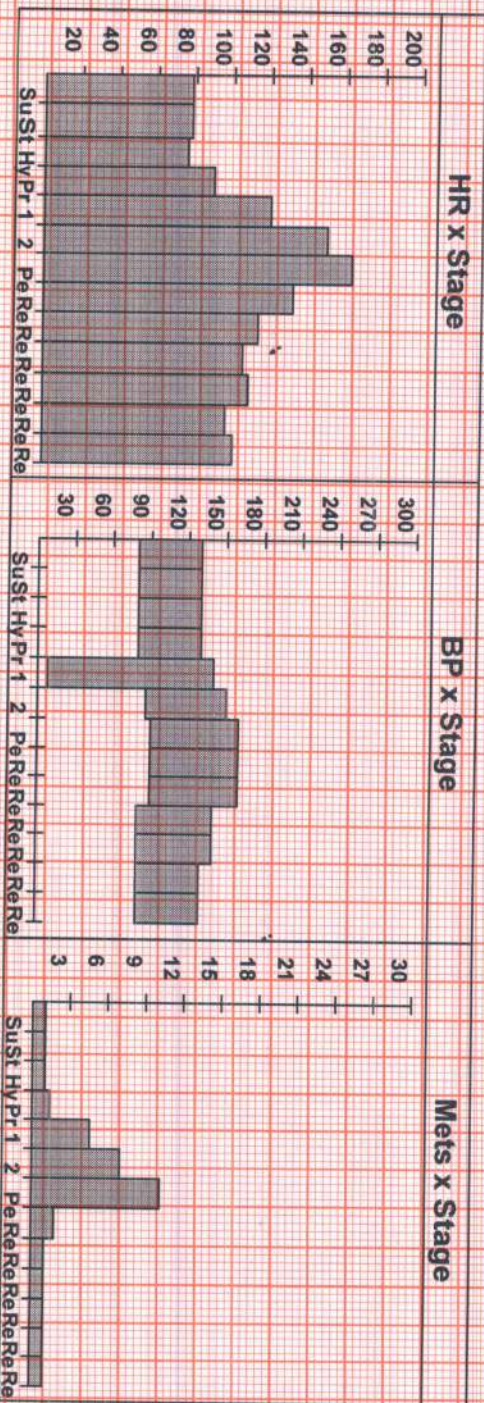
**Patient Details**

Name: MR. JAYESH CHAUDHARI ID: 2302714969  
 Date: 27-Jan-23  
 Age: 35 y Sex: M

Time: 12:31:51 PM

Height: 173 cms

Weight: 81 Kgs



**Interpretation**

FAIR EFFORT TOLERANCE  
 NORMAL CHRONOTROPIC RESPONSE  
 NORMAL INOTROPIC RESPONSE  
 NO ANGINA / ANGINA EQUIVALENTS  
 NO ARRHYTHMIAS  
 NO SIGNIFICANT ST-T CHANGES FROM BASELINE SEEN DURING THE TEST

**IMPRESSION:**

**STRESS TEST IS NEGATIVE FOR STRESS INDUCIBLE ISCHAEMIA**

Disclaimer: Negative stress test does not rule out Coronary Artery Disease.  
 Positive stress test is suggestive but not confirmatory of coronary Artery Disease.  
 Hence clinical correlation is mandatory.

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 Tel. 27884547/27864548

**DR. ANAND N. MOTWANI**  
 M.D. (GENERAL MEDICINE)  
 Doctor: Dr. Anand Motwani, NO. 39329 (M.M.C.)  
 (e) Schiller Healthcare India Pvt. Ltd V-47

Ref. Doctor: .....  
 (Summary Report edited by user)





# SUBURBAN DIAGNOSTICS

## Test Report

MR. JAYESH CHAUDHARI (35 M)

ID: 2302714969

Date: 27-Jan-23

Exec Time : 0 m 0 s

Stage Time : 0 m 27 s HR: 82 bpm

Protocol: Bruce

Stage: Supine

Speed: 0 mph

Grade: 0%

(THR: 157 bpm)

B.P: 130 / 80

ST Level (mm)      ST Slope (mV/s)

ST Level (mm)      ST Slope (mV/s)

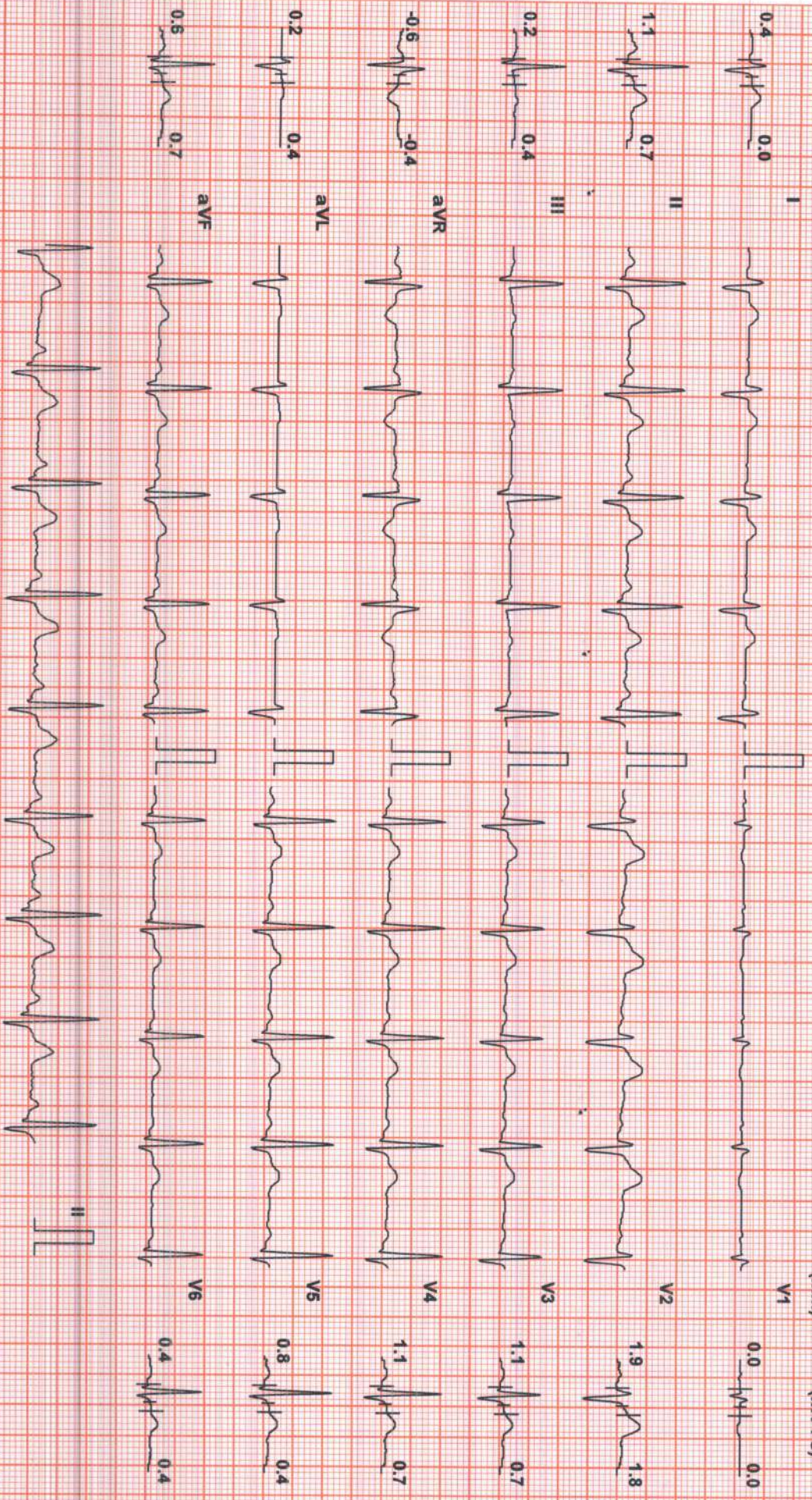


Chart Speed: 25 mm/Sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schler Standard V4.7

Linked Median





# SUBURBAN DIAGNOSTICS

## Test Report

MR. JAYESH CHAUDHARI (35 M)

ID: 2302714969

Date: 27-Jan-23

Exec Time : 0 m 0 s

Stage Time : 0 m 19 s HR: 76 bpm

Protocol: Bruce

Stage: Standing

Speed: 0 mph

Grade: 0%

(THR: 157 bpm)

B.P: 130 / 80

ST Level (mm)      ST Slope (mV/s)

ST Level (mm)      ST Slope (mV/s)

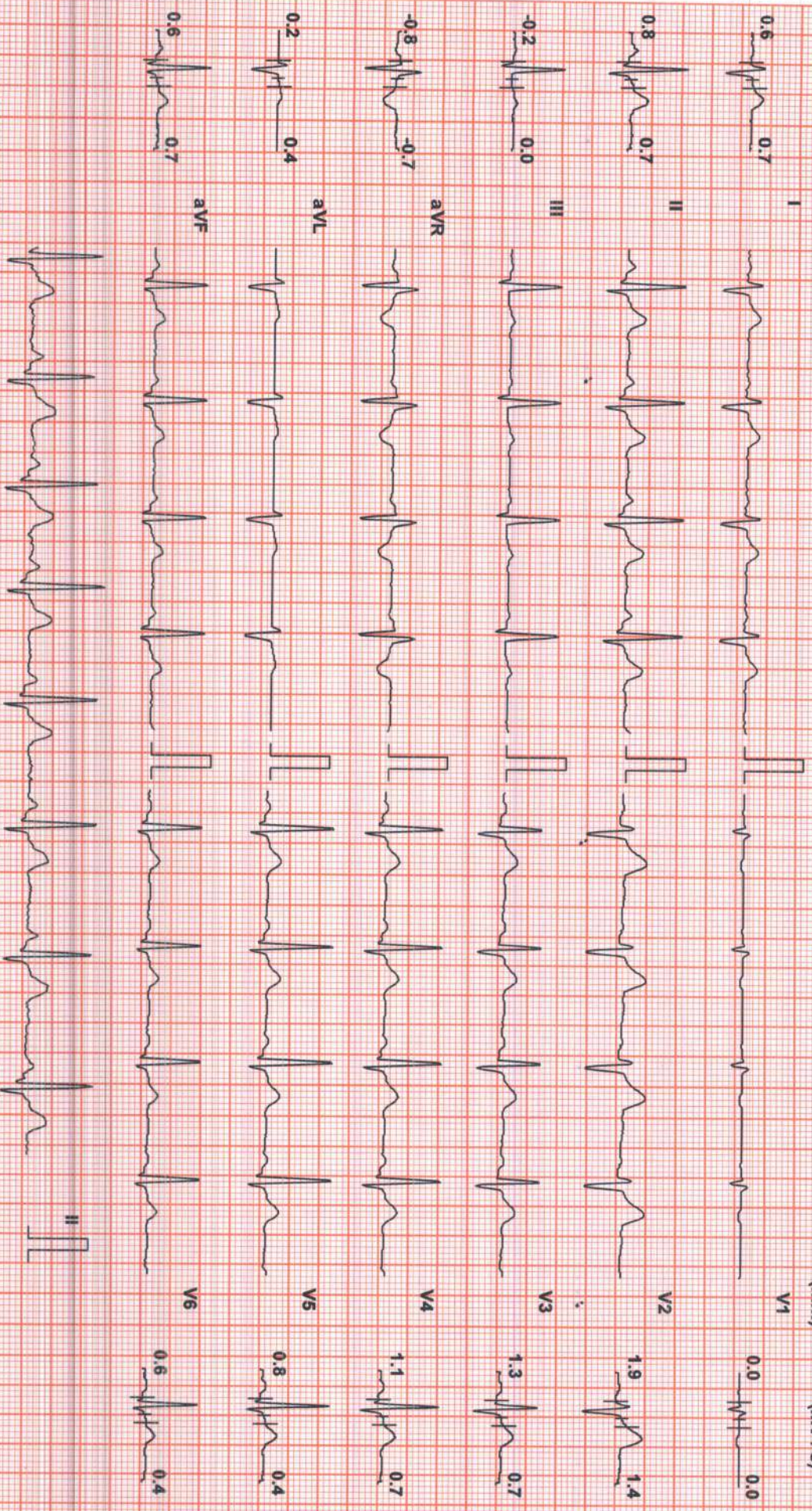


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

Schiller Spandan V-4-7





# SUBURBAN DIAGNOSTICS

## Test Report

MR. JAYESH CHAUDHARI (35 M)

ID: 2302714969

Date: 27-Jan-23

Exec Time : 0 m 0 s

Stage Time : 0 m 7 s

HR: 78 bpm

Protocol: Bruce

Stage: Hyperventilation

Speed: 0 mph

Grade: 0 %

(THR: 157 bpm)

B.P: 130 / 80

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

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

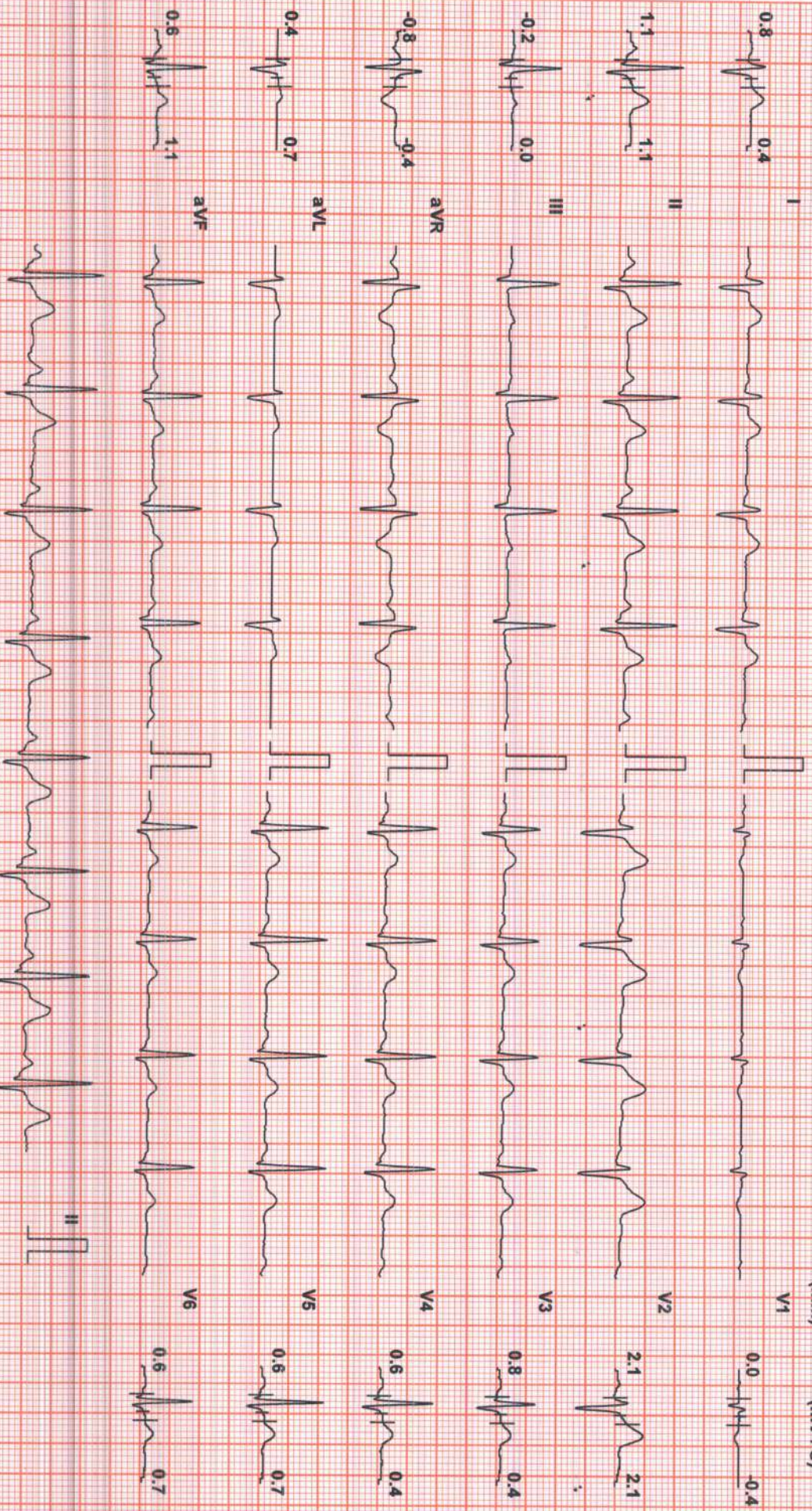


Chart Speed: 25 mm/Sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spanden V4-7

Linked Median





# SUBURBAN DIAGNOSTICS

## Test Report

MR. JAYESH CHAUDHARI (35 M)

ID: 2302714969

Date: 27-Jan-23

Exec Time : 2 m 54 s Stage Time : 2 m 54 s HR: 125 bpm

Protocol: Bruce

Stage: 1

Speed: 1.7 mph

Grade: 10%

(THR: 157 bpm)

B.P: 140 / 8

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

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

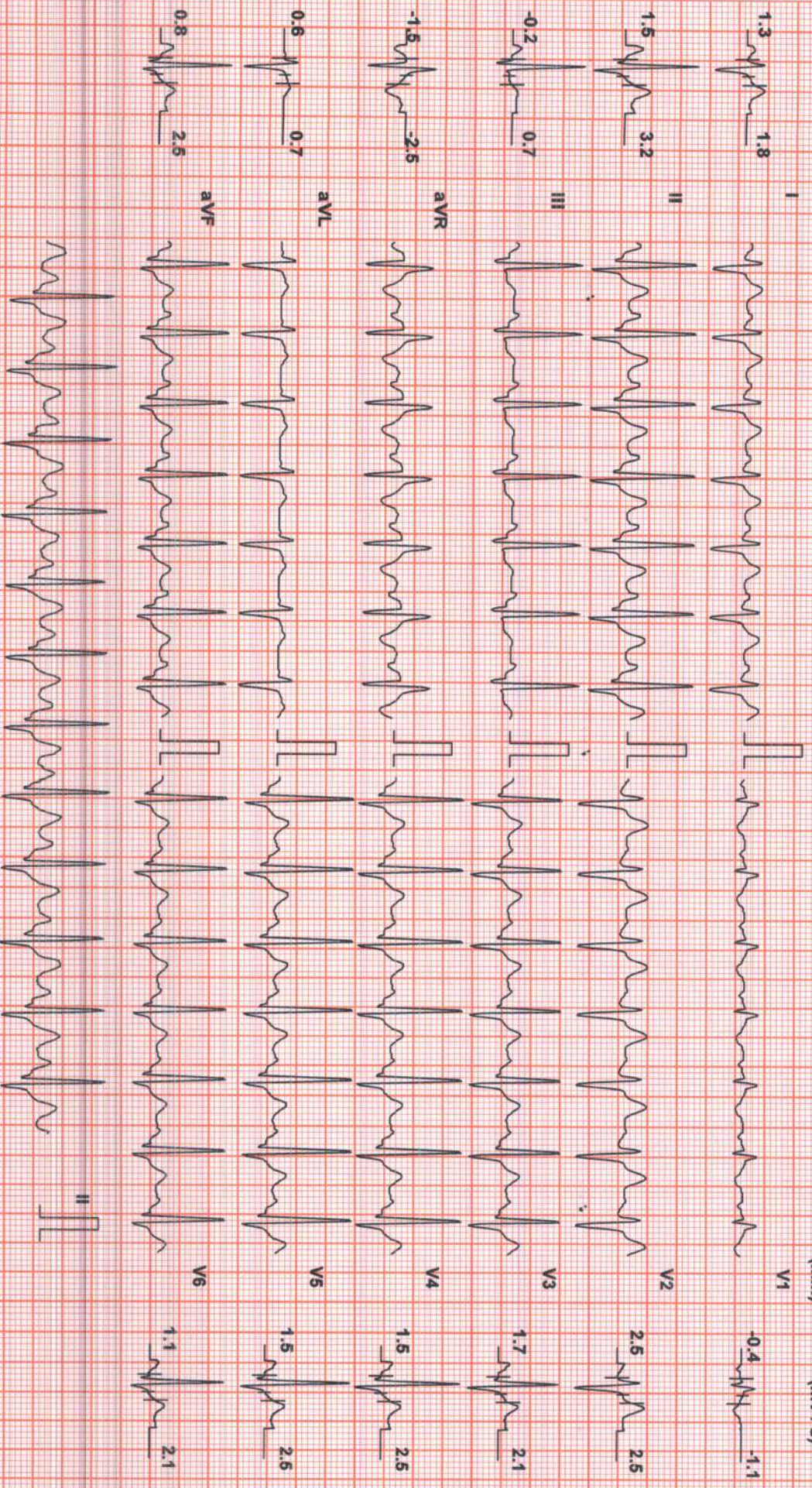


Chart Speed: 25 mm/Sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spanden V 4.7

Linked Median





# SUBURBAN DIAGNOSTICS

## Test Report

MR. JAYESH CHAUDHARI (35 M)

ID: 2302714969

Date: 27-Jan-23

Exec Time : 5 m 54 s Stage Time : 2 m 54 s HR: 148 bpm

Protocol: Bruce

Stage: 2

Speed: 2.5 mph

Grade: 12 %

(THR: 157 bpm)

B.P: 150 / 86

ST Level (mm)      ST Slope (mV/s)

ST Level (mm)      ST Slope (mV/s)

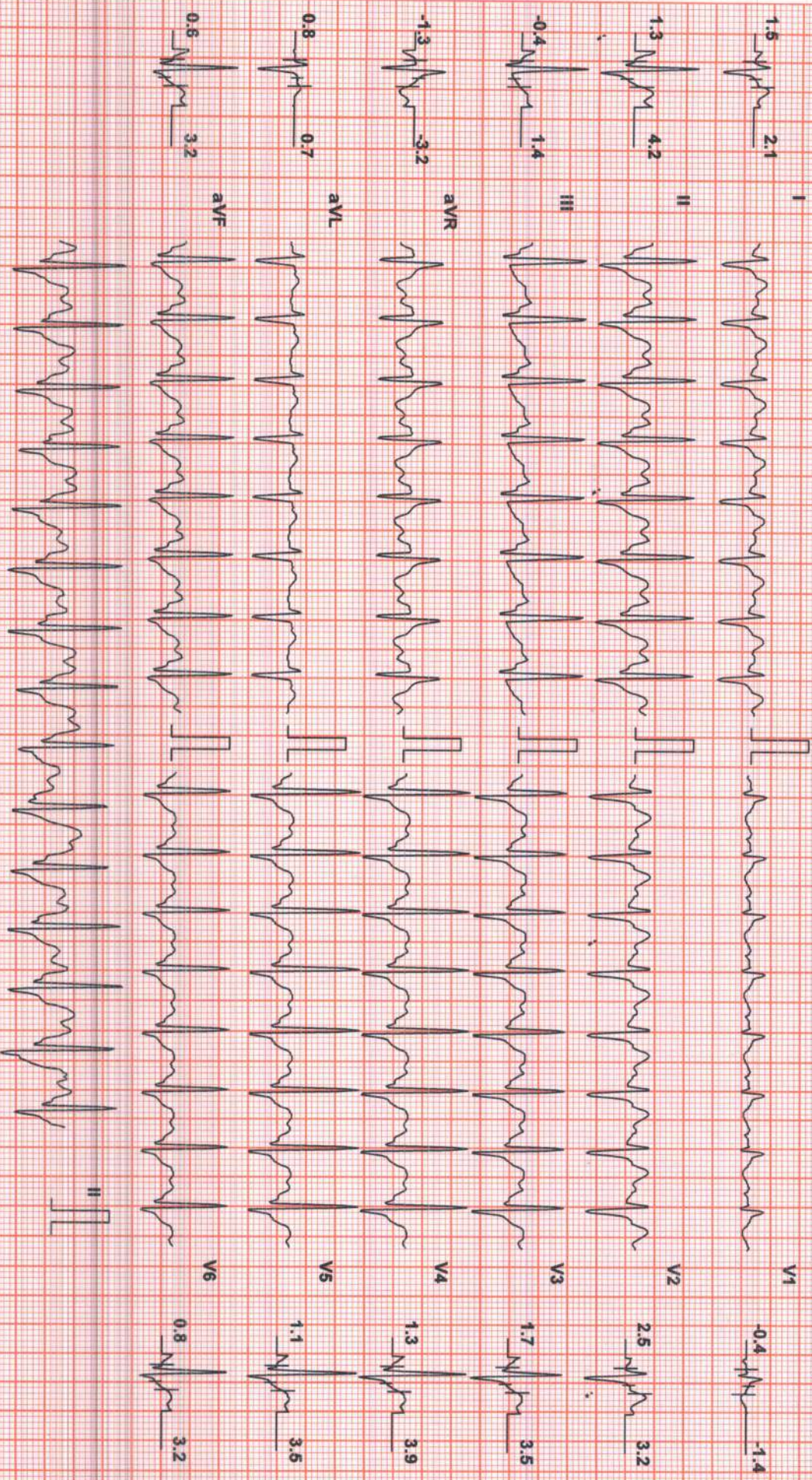


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schlier Standard V 4.7

Linked Median





# SUBURBAN DIAGNOSTICS

## Test Report

MR. JAYESH CHAUDHARI (35 M)

ID: 2302714969

Date: 27-Jan-23

Exec Time : 7 m 6 s

Stage Time : 1 m 6 s

HR: 165 bpm

Protocol: Bruce

Stage: Peak Ex

Speed: 3.4 mph

Grade: 14 %

(THR: 157 bpm)

B.P: 160 / 90

ST Level (mm)      ST Slope (mV/s)

ST Level (mm)      ST Slope (mV/s)

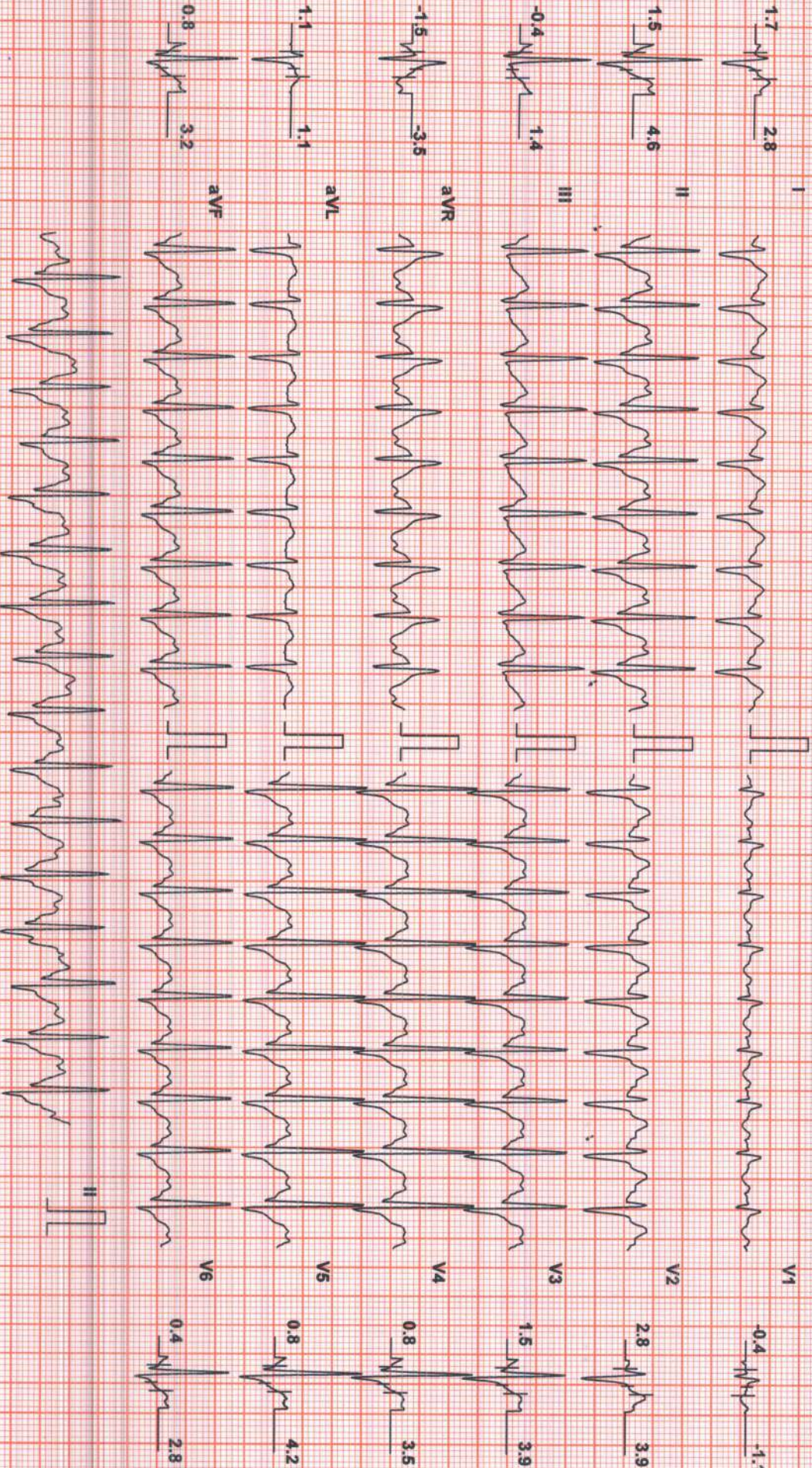


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schlier-Ständer V 4.7

Linked Median





# SUBURBAN DIAGNOSTICS

## Test Report

MR. JAYESH CHAUDHARI (35 M)

ID: 2302714969

Date: 27-Jan-23

Exec Time : 7 m 12 s Stage Time : 0 m 54 s HR: 125 bpm

Protocol: Bruce

Stage: Recovery(1)

Speed: 1 mph

Grade: 0 %

(THR: 157 bpm)

B.P: 160 / 90

ST Level (mm)      ST Slope (mV/s)

ST Level (mm)      ST Slope (mV/s)

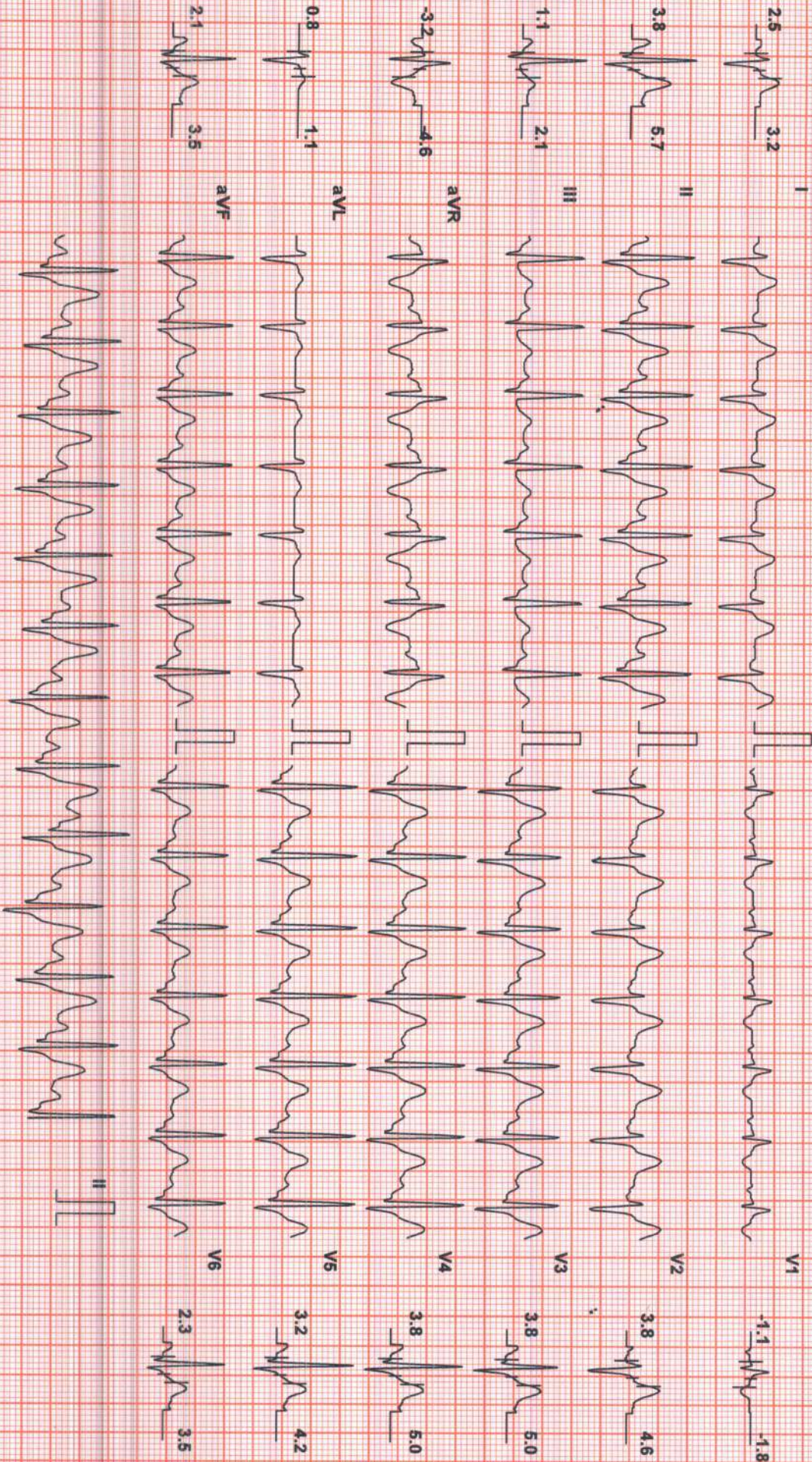


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schlier-Spenden V4.7

Linked Median





# SUBURBAN DIAGNOSTICS

## Test Report

MR. JAYESH CHAUDHARI (35 M)

ID: 2302714969

Date: 27-Jan-23

Exec Time : 7 m 12 s Stage Time : 0 m 54 s HR: 110 bpm

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 157 bpm)

B.P: 160 / 90

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

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

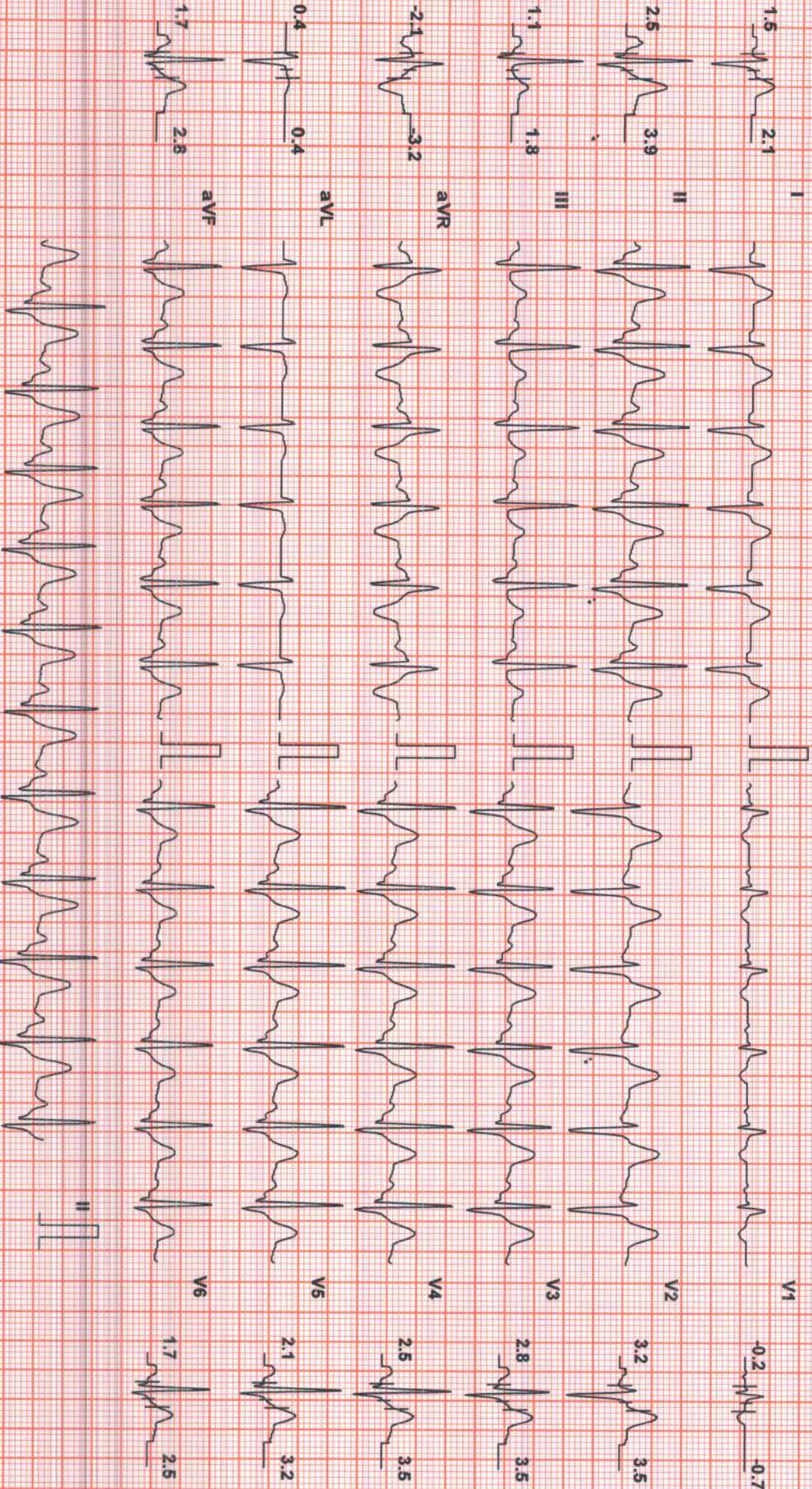


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Sehler-Standen V4.7

Linked Median





# SUBURBAN DIAGNOSTICS

## Test Report

MR. JAYESH CHAUDHARI (35 M)

ID: 2302714969

Date: 27-Jan-23

Exec Time : 7 m 12 s Stage Time : 0 m 54 s HR: 103 bpm

Protocol: Bruce

Stage: Recovery(3)

Speed: 0 mph

Grade: 0%

(THR: 157 bpm)

B.P: 140 / 80

ST Level (mm)      ST Slope (mV/s)

ST Level (mm)      ST Slope (mV/s)

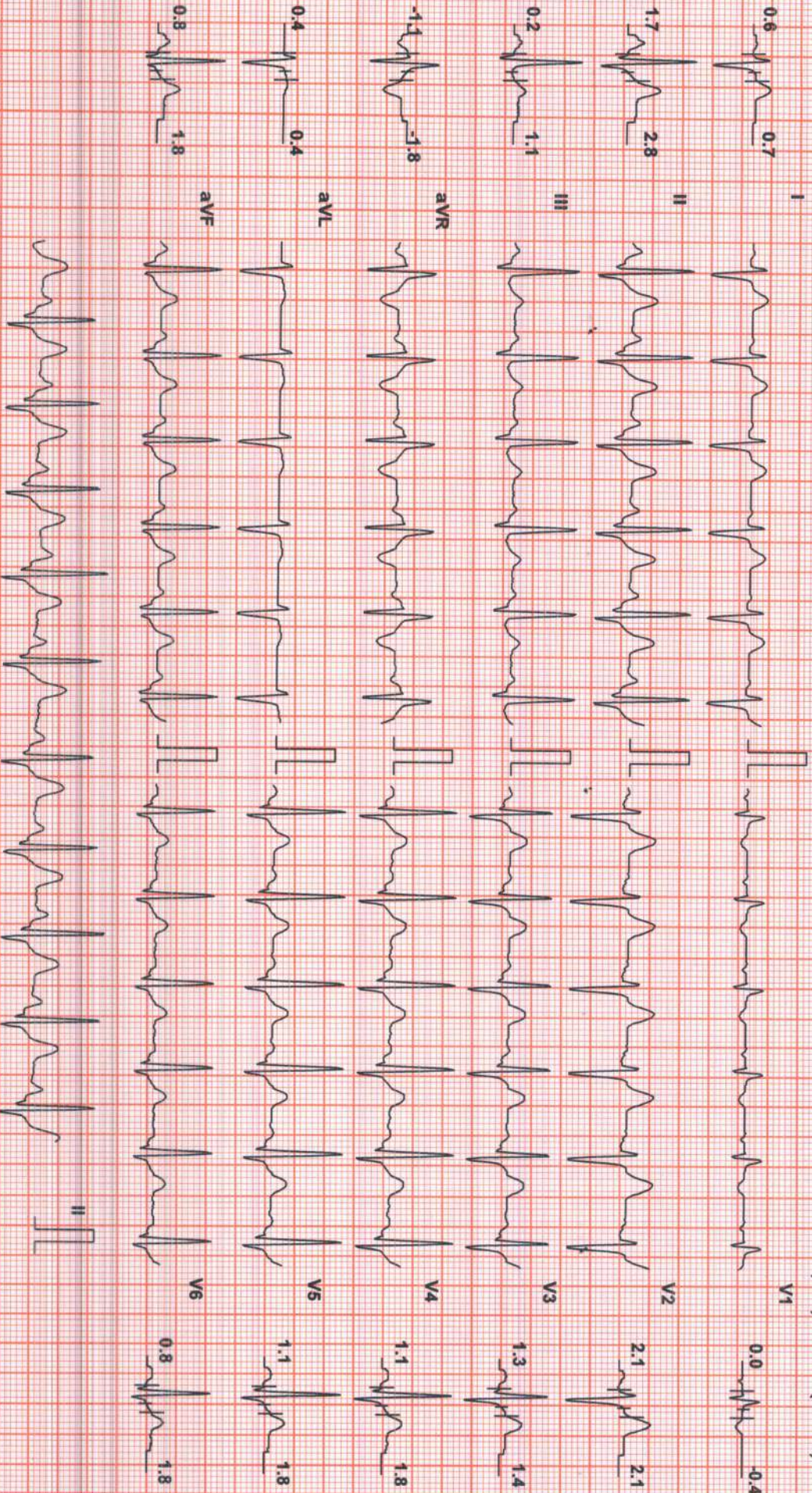


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schler Spandan V 4.7

Linked Median





# SUBURBAN DIAGNOSTICS

## Test Report

MR. JAYESH CHAUDHARI (35 M)

ID: 2302714969

Date: 27-Jan-23

Exec Time : 7 m 12 s Stage Time : 0 m 54 s HR: 104 bpm

Protocol: Bruce

Stage: Recovery(4)

Speed: 0 mph

Grade: 0 %

(THR: 157 bpm)

B.P: 140 / 80

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

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

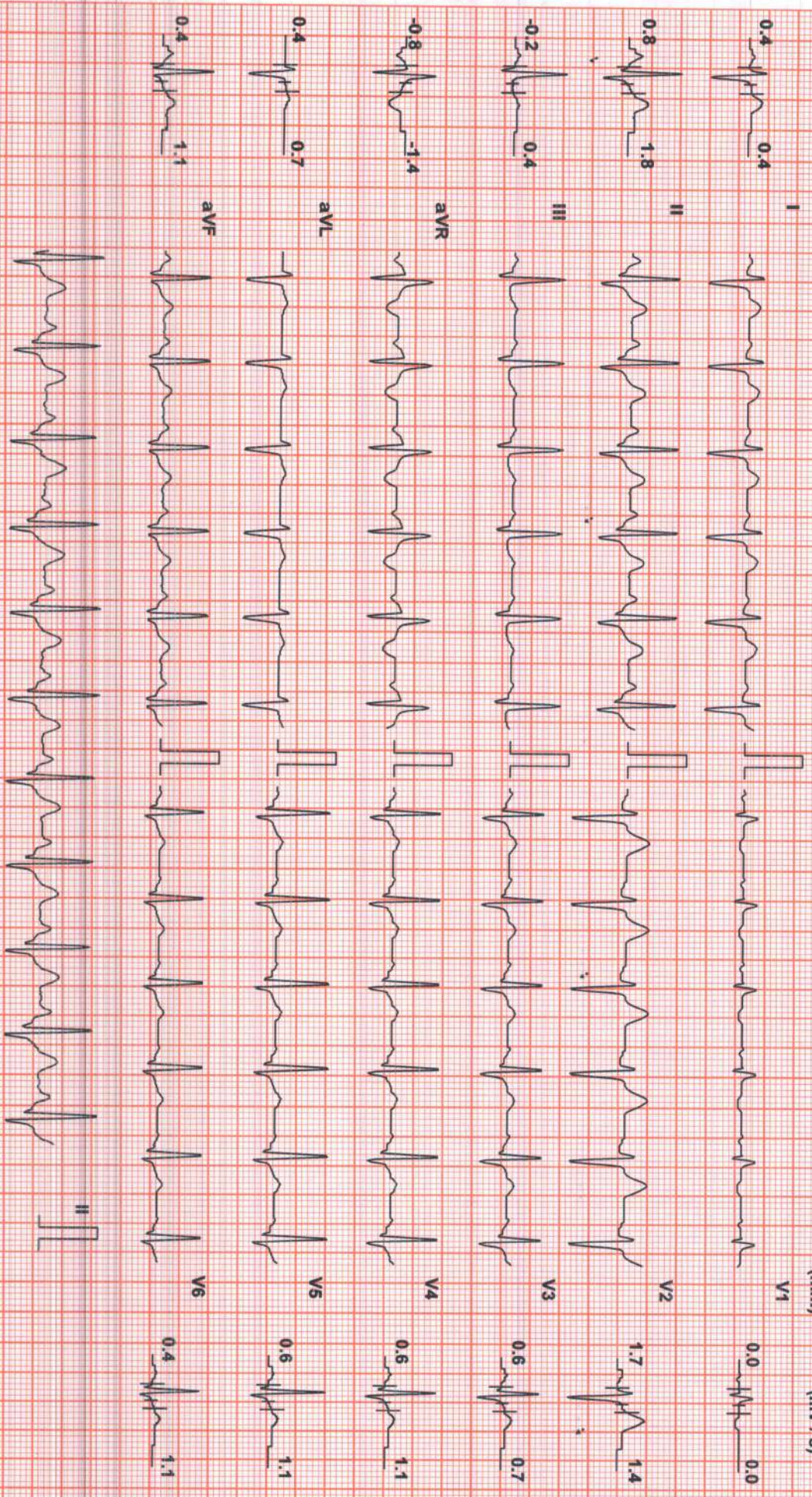


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller-Standen V 4.7

Linked Median





# SUBURBAN DIAGNOSTICS

## Test Report

MR. JAYESH CHAUDHARI (35 M)

ID: 2302714969

Date: 27-Jan-23

Exec Time : 7 m 12 s Stage Time : 0 m 54 s HR: 104 bpm

Protocol: Bruce

Stage: Recovery(5)

Speed: 0 mph

Grade: 0 %

(THR: 157 bpm)

B.P: 130 / 80

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

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

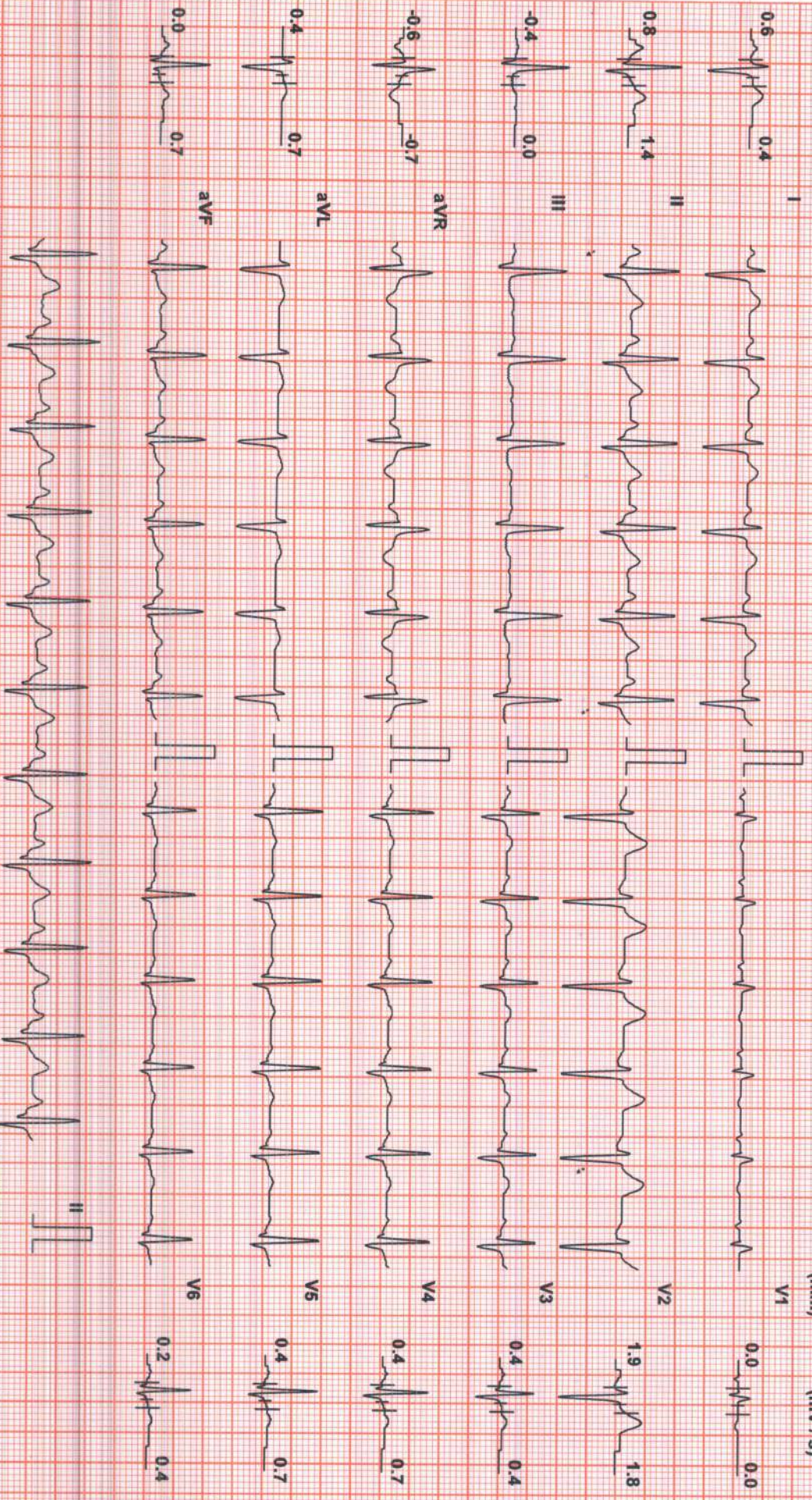


Chart Speed: 25 mm/sec  
Schlifer Spanden V4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median





**MR. JAYESH CHAUDHARI (35 M)**

**SUBURBAN DIAGNOSTICS**

**Test Report**

Protocol: Bruce

ID: 2302714969

Date: 27-Jan-23

Exec Time : 7 m 12 s Stage Time : 0 m 54 s **HR: 104 bpm**

Stage: Recovery(6)

Speed: 0 mph

Grade: 0 %

(THR: 157 bpm)

B.P: 130 / 80

ST Level (mm)      ST Slope (mV/s)

ST Level (mm)      ST Slope (mV/s)

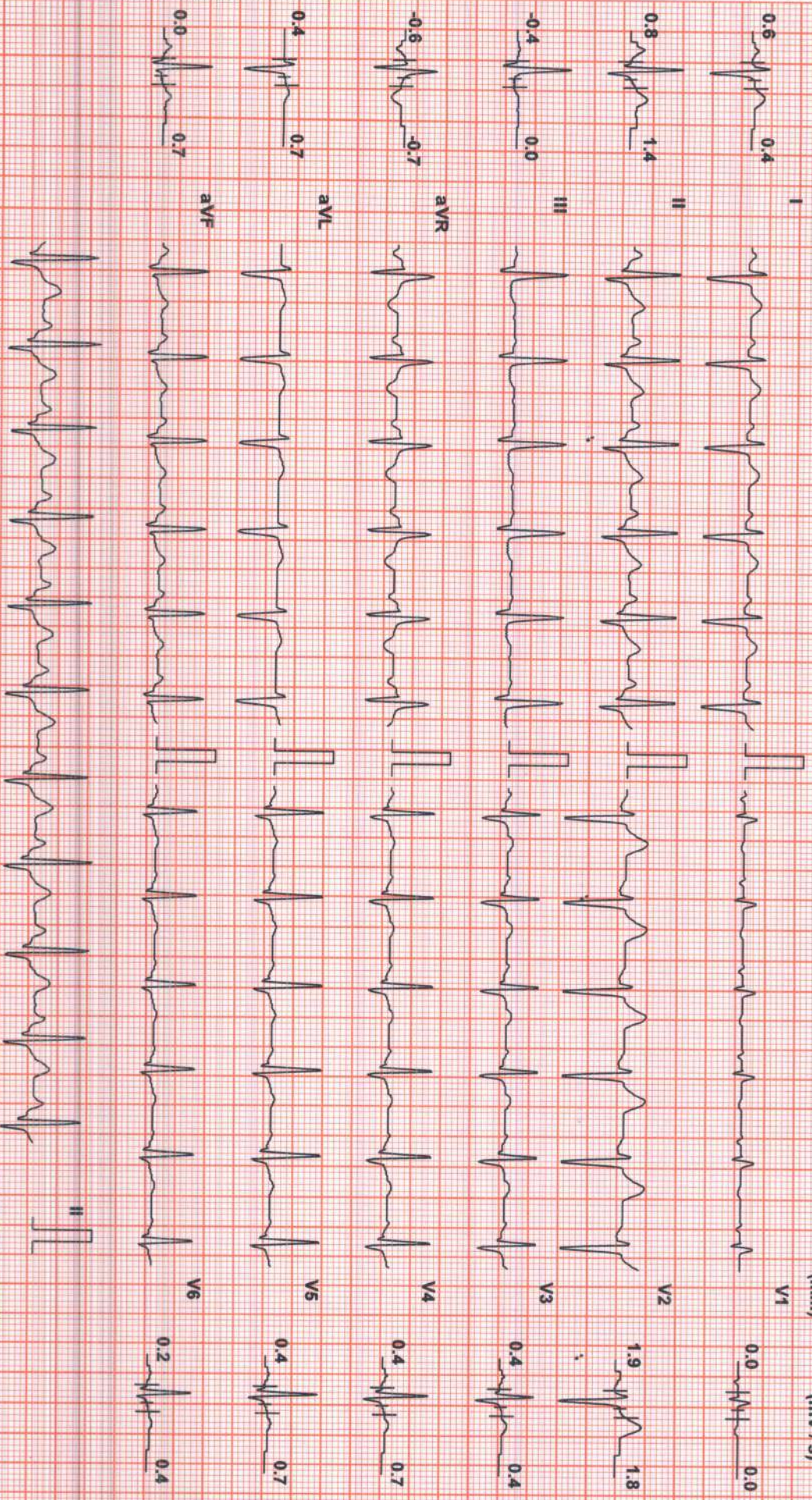


Chart Speed: 25 mm/sec  
Schlier-Spenden V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median