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CID : 2233020755
Name : MR.RAVINDRA YADAV
Age / Gender : 42 Years / Male
Consulting Dr. : -
Reg. Location : Kalina, Santacruz East (Main Centre)

Collected : 26-Nov-2022 / 09:40
Reported : 26-Nov-2022 / 15:35

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	13.8	13.0-17.0 g/dL	Spectrophotometric
RBC	4.67	4.5-5.5 mil/cmm	Elect. Impedance
PCV	42.1	40-50 %	Calculated
MCV	90.1	80-100 fl	Measured
MCH	29.5	27-32 pg	Calculated
MCHC	32.7	31.5-34.5 g/dL	Calculated
RDW	15.8	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	6630	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	35.8	20-40 %	
Absolute Lymphocytes	2373.5	1000-3000 /cmm	Calculated
Monocytes	6.0	2-10 %	
Absolute Monocytes	397.8	200-1000 /cmm	Calculated
Neutrophils	56.1	40-80 %	
Absolute Neutrophils	3719.4	2000-7000 /cmm	Calculated
Eosinophils	2.0	1-6 %	
Absolute Eosinophils	132.6	20-500 /cmm	Calculated
Basophils	0.1	0.1-2 %	
Absolute Basophils	6.6	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	134000	150000-400000 /cmm	Elect. Impedance
MPV	14.0	6-11 fl	Measured
PDW	31.8	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 Megaplatelets seen on smear

COMMENT -

Result rechecked.
Kindly correlate clinically.

Specimen: EDTA Whole Blood

ESR, EDTA WB 24 2-15 mm at 1 hr. Westergren

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

*** End Of Report ***



J. Thakker

Dr. JYOT THAKKER
M.D. (PATH), DPB
Pathologist & AVP(Medical
Services)



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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	140.3	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	299.5	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.39	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.18	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.21	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	8.0	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.4	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	3.6	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.2	1 - 2	Calculated
SGOT (AST), Serum	29.5	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	43.4	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	37.4	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	191.6	40-130 U/L	Colorimetric
BLOOD UREA, Serum	26.6	12.8-42.8 mg/dl	Kinetic
BUN, Serum	12.4	6-20 mg/dl	Calculated
CREATININE, Serum	0.60	0.67-1.17 mg/dl	Enzymatic



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Reported : 28-Nov-2022 / 15:05

eGFR, Serum	157	>60 ml/min/1.73sqm	Calculated
URIC ACID, Serum	4.0	3.5-7.2 mg/dl	Enzymatic
Urine Sugar (Fasting)	+	Absent	
Urine Ketones (Fasting)	Absent	Absent	
Urine Sugar (PP)	+++	Absent	
Urine Ketones (PP)	Absent	Absent	

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



Anupa

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



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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	9.1	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	214.5	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.

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*** End Of Report ***



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Reported : 26-Nov-2022 / 19:01

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**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	Absent	Absent
Blood	Absent	Absent
<u>CHEMICAL EXAMINATION</u>		
Reaction (pH)	Acidic (6.5)	-
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	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
Reducing Substances	-	Absent

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*** End Of Report ***



MC-2111

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.025	1.001-1.030	Chemical Indicator
Transparency	Slight hazy	Clear	-
Volume (ml)	30	-	-
CHEMICAL EXAMINATION			
Proteins	Trace	Absent	pH Indicator
Glucose	1+	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	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	0-1		
Casts	Absent	Absent	
Crystals	Calcium oxalate ++	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	2-3	Less than 20/hpf	
Others	-		

Interpretation: The concentration values of Chemical analytes corresponding to the grading given in the report are as follows:

- Protein:(1+ -25 mg/dl, 2+ -75 mg/dl, 3+ - 150 mg/dl, 4+ - 500 mg/dl)
- Glucose:(1+ - 50 mg/dl, 2+ -100 mg/dl, 3+ -300 mg/dl,4+ -1000 mg/dl)
- Ketone:(1+ -5 mg/dl, 2+ -15 mg/dl, 3+ - 50 mg/dl, 4+ - 150 mg/dl)

Reference: Pack insert



MC-2111



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

<u>PARAMETER</u>	<u>RESULTS</u>
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.

References:

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

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	139.5	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	71.8	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	32.3	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	107.2	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	93.0	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	14.2	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.3	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.9	0-3.5 Ratio	Calculated

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*** End Of Report ***



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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	5.0	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	12.6	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	4.32	0.35-5.5 microIU/ml	ECLIA



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R
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T

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 becuase 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 ***



Anupa

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Director

Date:- 26 Nov 2022

CID: 2233020755

Name:- Mr. Ravindra
Yadav

Sex / Age: 42 / M

EYE CHECK UP

Chief complaints: Nil

Systemic Diseases: Nil

Past history: Nil

Unaided Vision: N.V- RL }
LL } N-8
BL }

D.V- RL }
LL } 6/9
BL }

Aided Vision: —

Refraction: —

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	—————			6/9	—————			6/9
Near	—————			N-8	—————			N-8

Colour Vision: Normal / Abnormal

Remark: WNL

Suburban Diagnostics (I) Pvt. Ltd.
1st Floor, Harbhajan, Above HDFC Bank,
Opp. Nafa Petrol Pump, Kalina, CST Road,
Santacruz (East),
Tel. No. 022-61700000

Dr. D.G. HATALKAR
R.No. 61067 M.D. (Ob.Gy)

Suburban Diagnostics Kalina

Patient Details

Date: 28-Nov-22

Time: 11:04:50 AM

Name: MR. RAVINDRA YADAV ID: 2233020755

Age: 42 y

Sex: M

Height: 170 cms.

Weight: 87 Kg.

Clinical History: Routine Test

Medications: NONE

Test Details

Protocol: Bruce

Pr.MHR: 178 bpm

THR: 151 (85 % of Pr.MHR) bpm

Total Exec. Time: 9 m 34 s

Max. HR: 152 (85% of Pr.MHR) bpm

Max. Mets: 13.50

Max. BP: 180 / 70 mmHg

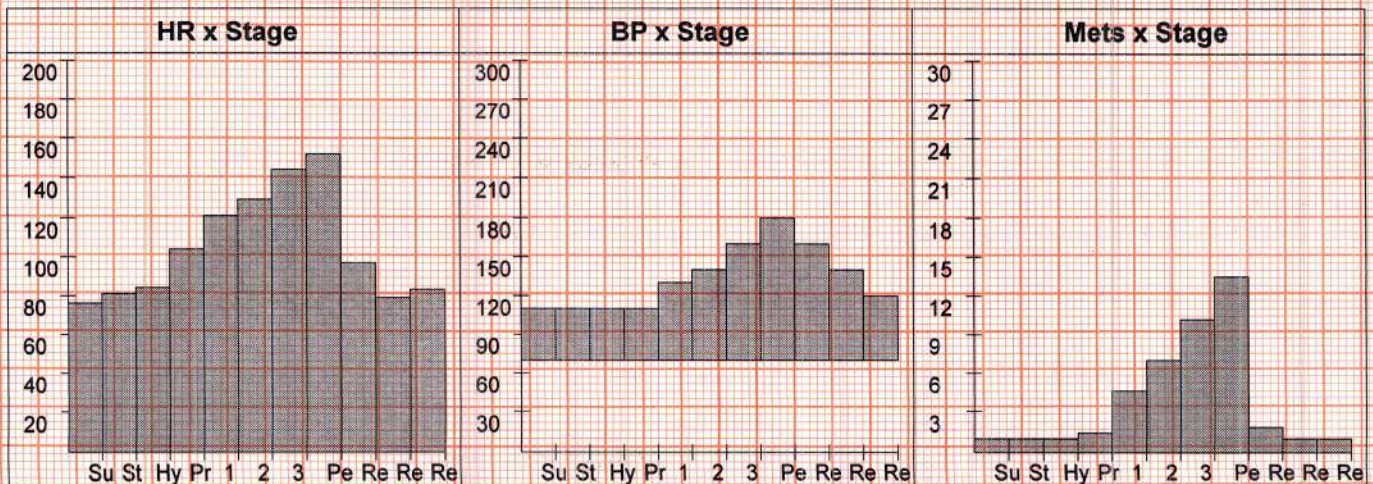
Max. BP x HR: 27360 mmHg/min

Min. BP x HR: 5320 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 : 12	1.0	0	0	76	110 / 70	-1.49 aVR	1.77 II
Standing	0 : 8	1.0	0	0	81	110 / 70	-1.49 aVR	1.77 II
Hyperventilation	0 : 44	1.0	0	0	84	110 / 70	-1.70 aVR	2.12 II
1	3 : 0	4.6	1.7	10	121	130 / 70	-1.91 aVR	4.25 V2
2	3 : 0	7.0	2.5	12	129	140 / 70	-2.12 aVR	4.60 II
3	3 : 0	10.2	3.4	14	144	160 / 70	-1.70 aVR	5.66 V2
Peak Ex	0 : 34	13.5	4.2	16	152	180 / 70	-1.49 aVR	5.66 V2
Recovery(1)	2 : 0	1.8	1	0	97	160 / 70	4.03 III	5.66 V2
Recovery(2)	2 : 0	1.0	0	0	79	140 / 70	4.03 aVL	2.48 II
Recovery(3)	1 : 9	1.0	0	0	83	120 / 70	-1.27 aVR	1.77 II



Suburban Diagnostics Kalina

Patient Details

Date: 28-Nov-22

Time: 11:04:50 AM

Name: MR. RAVINDRA YADAV ID: 2233020755

Age: 42 y

Sex: M

Height: 170 cms.

Weight: 87 Kg.

Interpretation

GOOD EFFORT TOLEREANCE
NORMAL HEART RATE RESPONSE
NORMAL BLOOD PRESSURE RESPONSE
NO ANGINA/ANGINA EQUIVALENTS
NO ARRTHYMIAS
NO SIGNIFICANT ST-T CHANGES NOTED AS COMPARED TO BASELINE
ECG
IMPRESSION : STRESS TEST IS NEGATIVE FOR 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

Suburban Diagnostics (I) Pvt. Ltd.
1st Floor, Harbhajan, Above HDFC Bank,
Opp. Nafa Petrol Pump, Kalina, CST Road,
Santacruz (East),
Tel. No. 022-61700000

DR. SHEIKH NAVEED
MBBS/PGDCC
Clinical Cardiologist
Reg. No. 2016/11/4694



Ref. Doctor:

Doctor:

(Summary Report edited by user)

Suburban Diagnostics Kalina

MR. RAVINDRA YADAV (42 M)

ID: 2233020755

Date: 28-Nov-22

B.P: 110 / 70

Protocol: Bruce

Stage: Supine

Speed: 0 mph

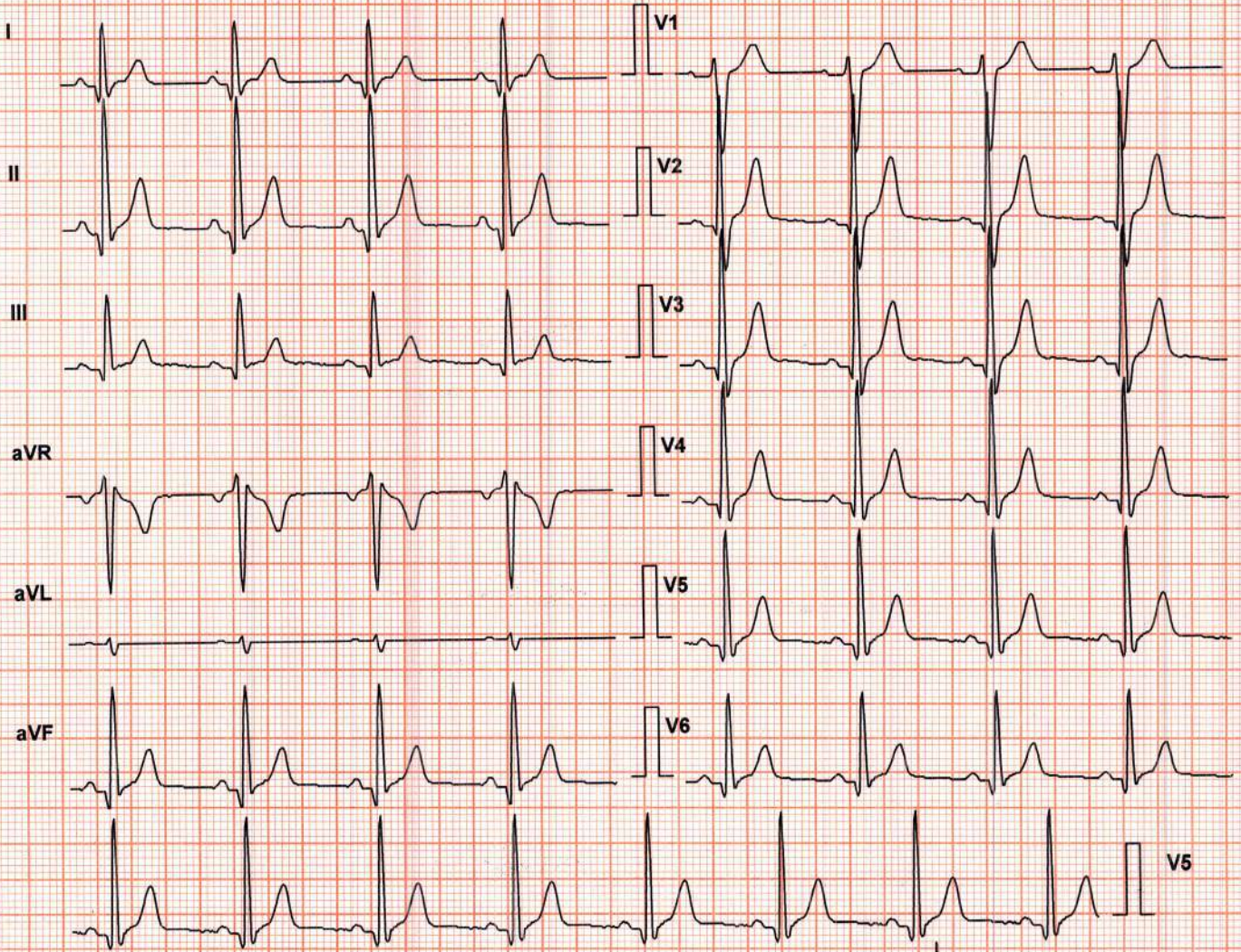
Grade: 0 %

Exec Time : 0 m 0 s

Stage Time : 0 m 6 s

HR: 76 bpm

(THR: 151 bpm)



Lead	ST Level (mm)	ST Slope (mV/s)
I	0.6	0.4
II	1.7	1.4
III	0.8	0.4
aVR	-1.3	-1.1
aVL	0.0	0.0
aVF	1.3	1.1
V1	1.1	1.4
V2	2.3	1.8
V3	1.9	1.4
V4	1.7	1.4
V5	1.3	1.1
V6	1.1	0.7

Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Schiller Spandan V 4.51

Iso = R - 60 ms J = R + 60 ms

Post J = J + 60 ms

Linked Median



MR. RAVINDRA YADAV (42 M)

ID: 2233020755

Date: 28-Nov-22

B.P: 110/70

Protocol: Bruce

Stage: Standing

Speed: 0 mph

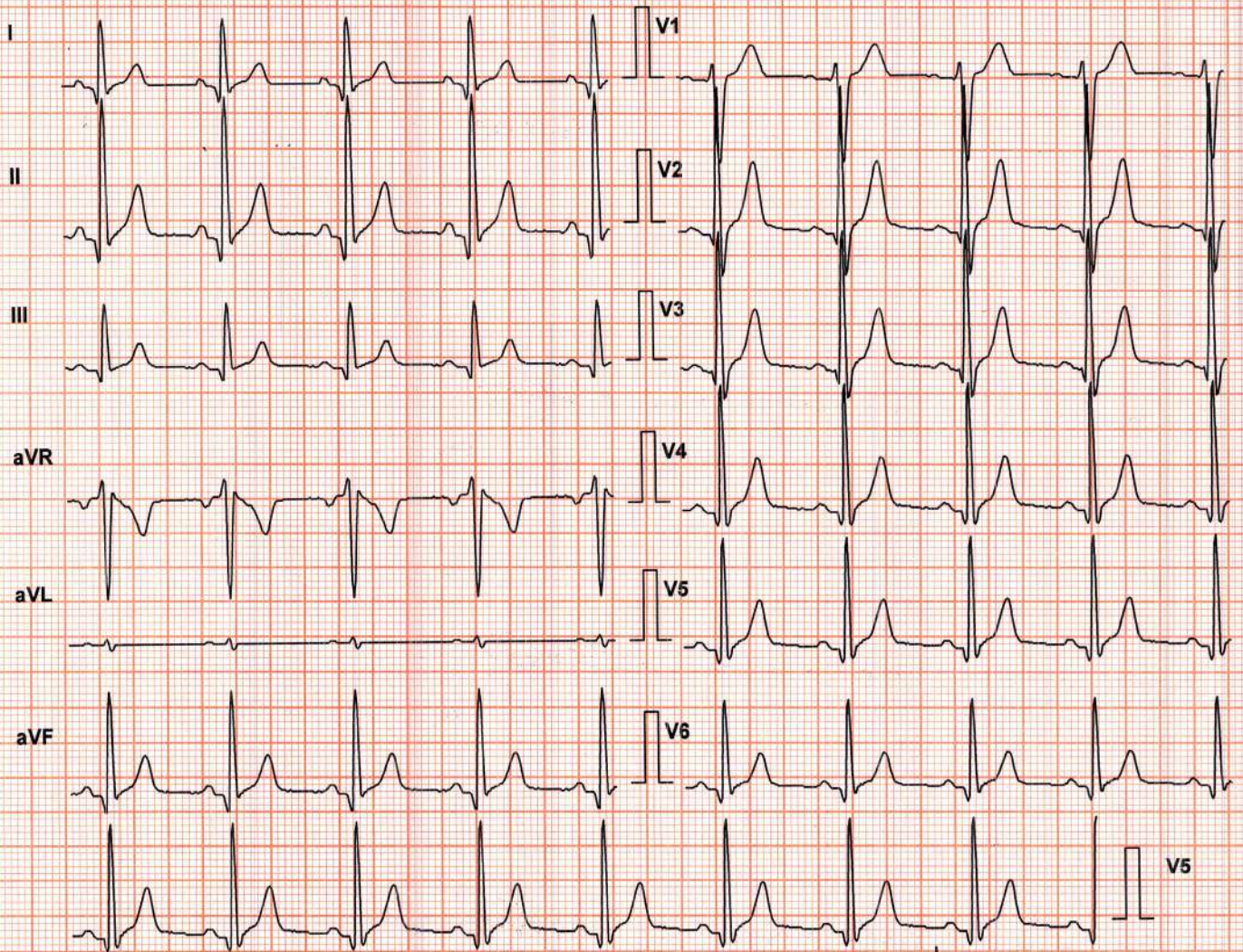
Grade: 0 %

Exec Time : 0 m 0 s

Stage Time : 0 m 2 s

HR: 82 bpm

(THR: 151 bpm)



Lead	ST Level (mm)	ST Slope (mV/s)
I	0.6	0.7
II	1.9	1.8
III	0.8	0.7
aVR	-1.3	-1.4
aVL	0.0	0.0
aVF	1.3	1.1
V1	1.3	1.4
V2	2.3	1.8
V3	1.9	1.4
V4	1.7	1.1
V5	1.5	1.1
V6	1.1	0.7

Chart Speed: 25 mm/sec
Schiller Spandan V 4.51

Filter: 35 Hz
Iso = R - 60 ms J = R + 60 ms

Mains Filt: ON
Post J = J + 60 ms

Amp: 10 mm
Linked Median



Suburban Diagnostics Kalina

MR. RAVINDRA YADAV (42 M)

ID: 2233020755

Date: 28-Nov-22

B.P: 110 / 70

Protocol: Bruce

Stage: Hyperventilation

Speed: 0 mph

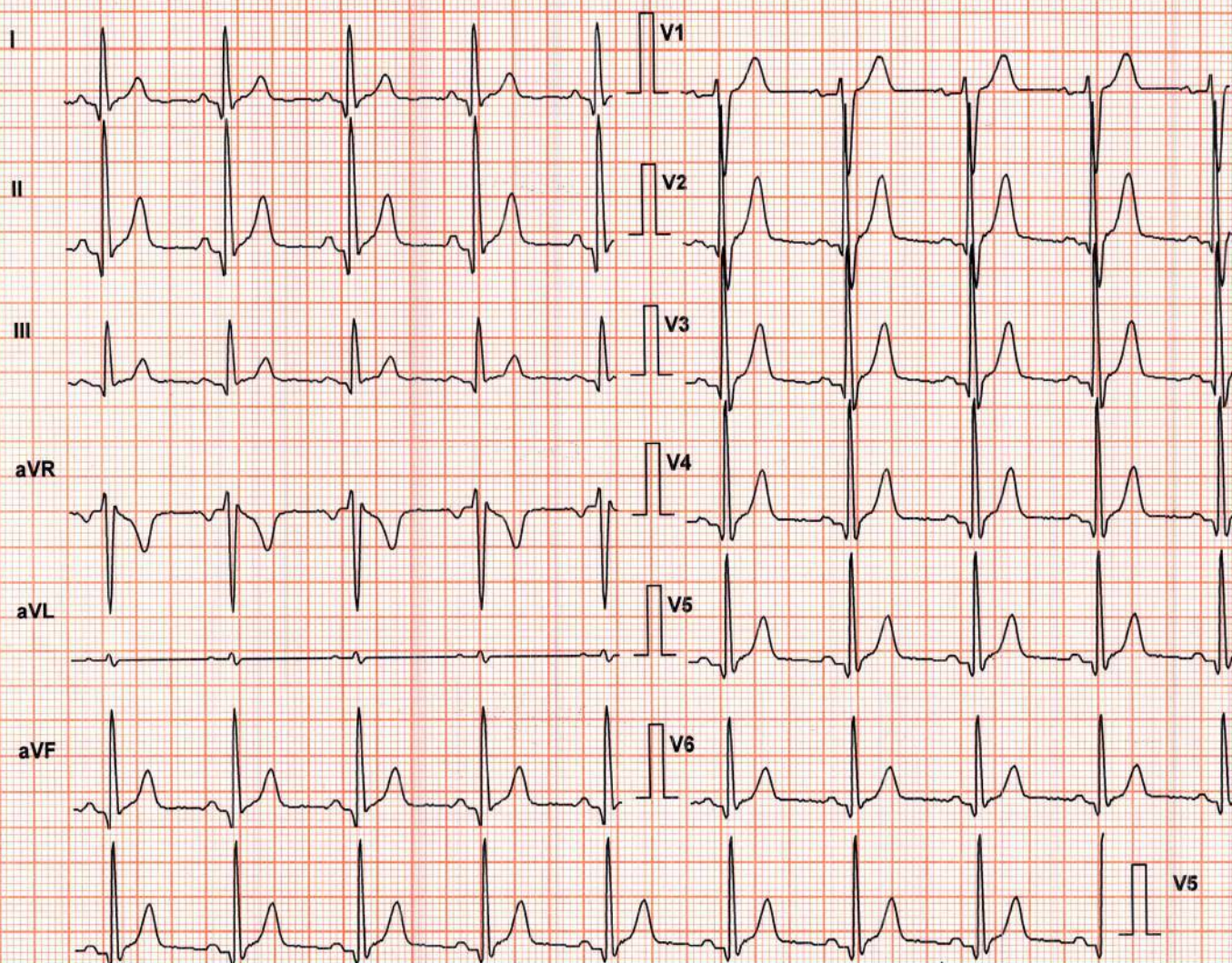
Grade: 0 %

Exec Time : 0 m 0 s

Stage Time : 0 m 38 s

HR: 82 bpm

(THR: 151 bpm)



Lead	ST Level (mm)	ST Slope (mV/s)
I	0.8	0.7
II	1.9	1.4
III	0.6	0.4
aVR	-1.3	-1.1
aVL	0.0	0.0
aVF	1.3	1.1
V1	1.5	1.8
V2	2.3	1.8
V3	2.1	1.4
V4	1.7	1.4
V5	1.5	1.1
V6	1.3	0.7

Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Schiller Spandan V 4.51

Iso = R - 60 ms J = R + 60 ms

Post J = J + 60 ms

Linked Median



Suburban Diagnostics Kalina

MR. RAVINDRA YADAV (42 M)

ID: 2233020755

Date: 28-Nov-22 B.P: 130 / 70

Protocol: Bruce

Stage: 1

Speed: 1.7 mph

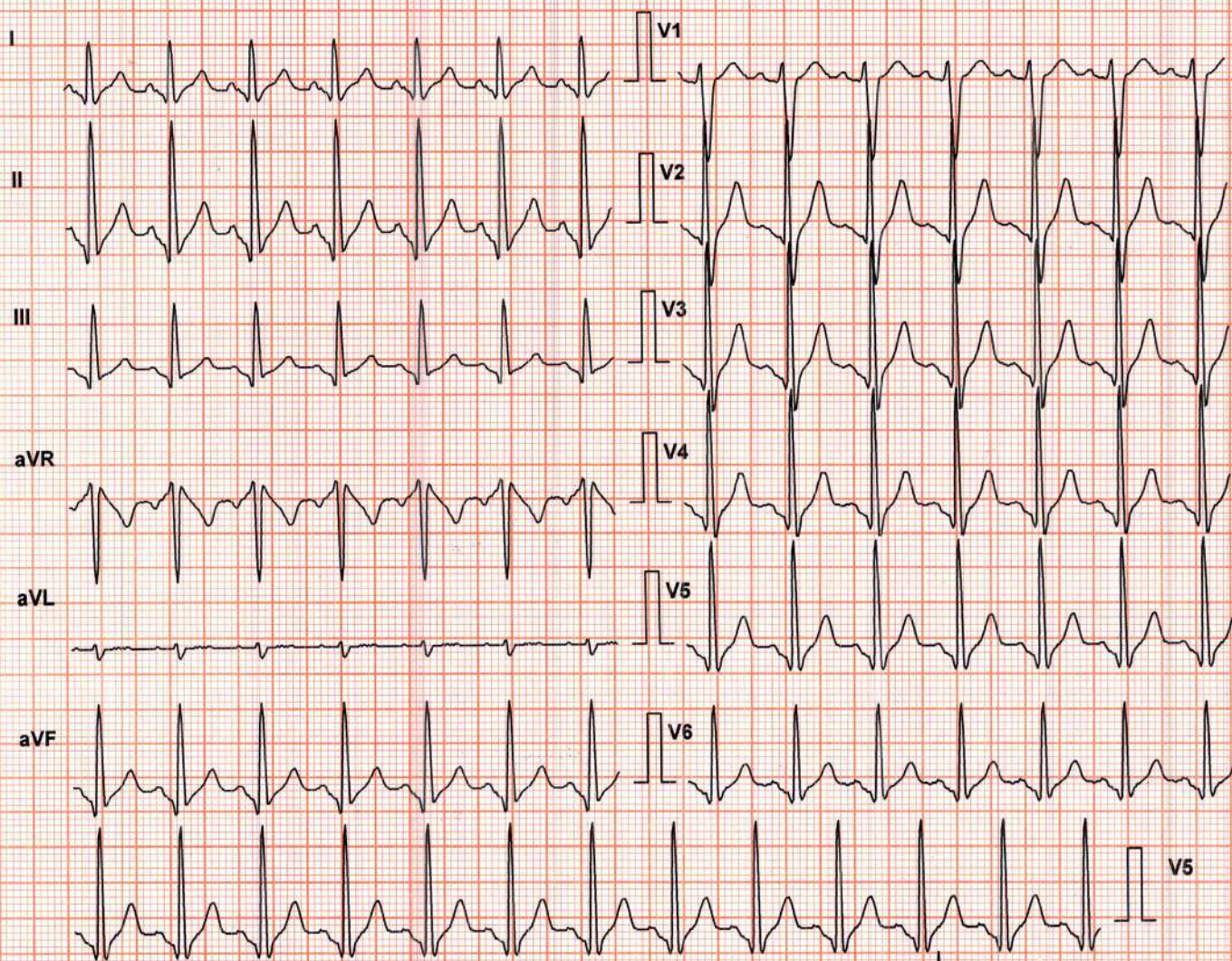
Grade: 10 %

Exec Time : 2 m 54 s

Stage Time : 2 m 54 s

HR: 122 bpm

(THR: 151 bpm)



Lead	ST Level (mm)	ST Slope (mV/s)
I	1.3	1.4
II	2.8	3.2
III	1.3	1.4
aVR	-2.1	-2.5
aVL	0.2	0.4
aVF	1.9	2.1
V1	1.5	2.1
V2	3.6	4.2
V3	3.4	3.5
V4	2.8	2.8
V5	2.3	2.5
V6	1.7	1.4

Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Schiller Spandan V 4.51

Iso = R - 60 ms J = R + 60 ms

Post J = J + 60 ms

Linked Median



MR. RAVINDRA YADAV (42 M)

ID: 2233020755

Date: 28-Nov-22

B.P: 140/70

Protocol: Bruce

Stage: 2

Speed: 2.5 mph

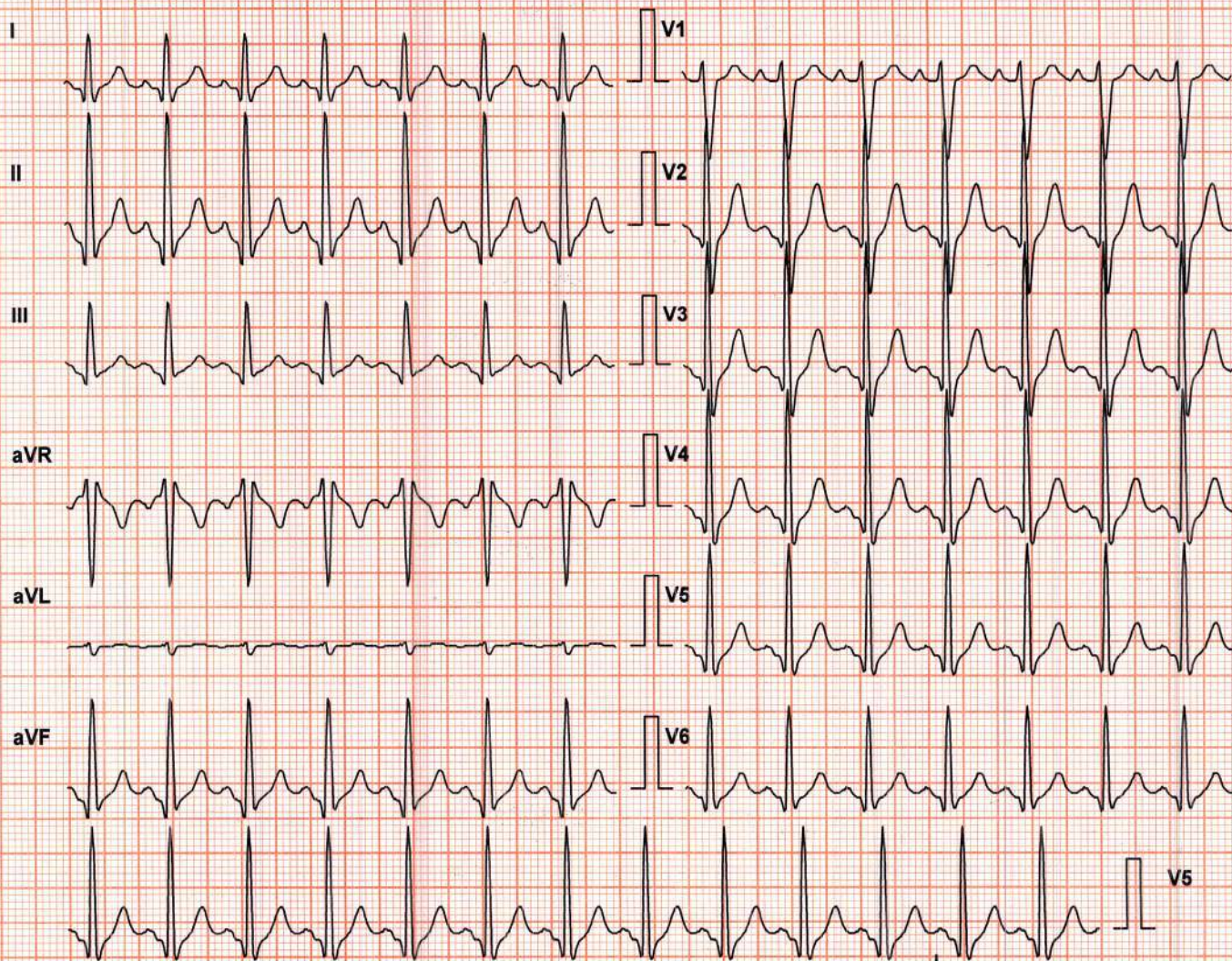
Grade: 12 %

Exec Time : 5 m 54 s

Stage Time : 2 m 54 s

HR: 129 bpm

(THR: 151 bpm)



Lead	ST Level (mm)	ST Slope (mV/s)
I	0.8	1.1
II	2.3	2.8
III	1.1	1.4
aVR	-1.5	-2.1
aVL	0.0	0.0
aVF	1.7	2.1
V1	1.1	1.8
V2	2.5	3.9
V3	2.3	3.5
V4	1.7	2.8
V5	1.5	2.5
V6	1.3	1.8

Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Schiller Spandan V 4.51

Iso = R - 60 ms J = R + 60 ms

Post J = J + 60 ms

Linked Median



Suburban Diagnostics Kalina

MR. RAVINDRA YADAV (42 M)

ID: 2233020755

Date: 28-Nov-22

B.P: 160 / 70

Protocol: Bruce

Stage: 3

Speed: 3.4 mph

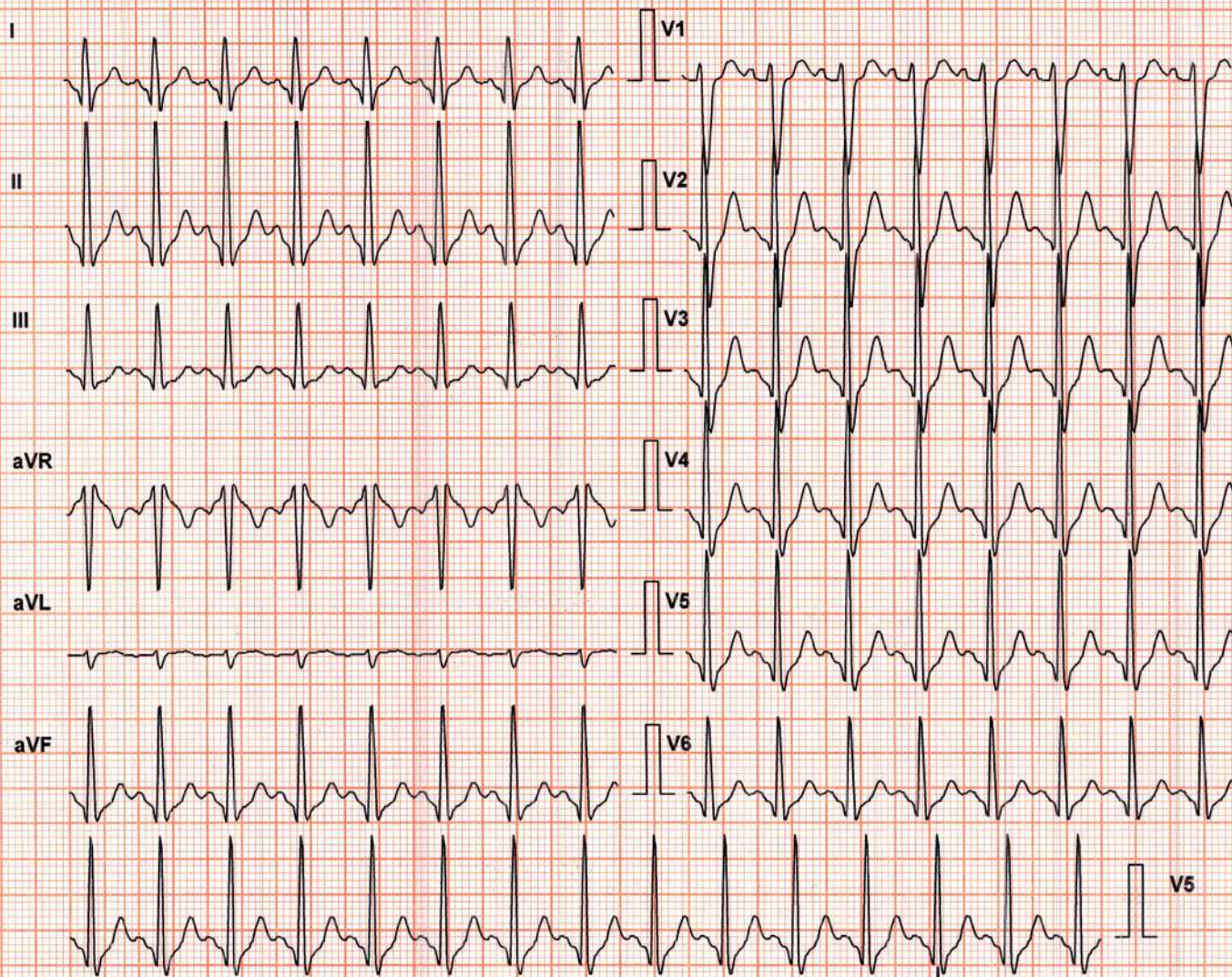
Grade: 14 %

Exec Time : 8 m 54 s

Stage Time : 2 m 54 s

HR: 145 bpm

(THR: 151 bpm)



Lead	ST Level (mm)	ST Slope (mV/s)
I	1.1	1.1
II	1.9	3.5
III	0.2	1.4
aVR	-1.5	-2.5
aVL	0.2	0.0
aVF	1.1	2.5
V1	1.7	2.8
V2	3.0	3.9
V3	2.3	4.6
V4	1.7	3.5
V5	1.5	3.2
V6	0.8	2.1

Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Schiller Spandan V 4.51

Iso = R - 60 ms J = R + 60 ms

Post J = J + 60 ms

Linked Median



Suburban Diagnostics Kalina

MR. RAVINDRA YADAV (42 M)

ID: 2233020755

Date: 28-Nov-22

B.P: 180 / 70

Protocol: Bruce

Stage: Peak Ex

Speed: 4.2 mph

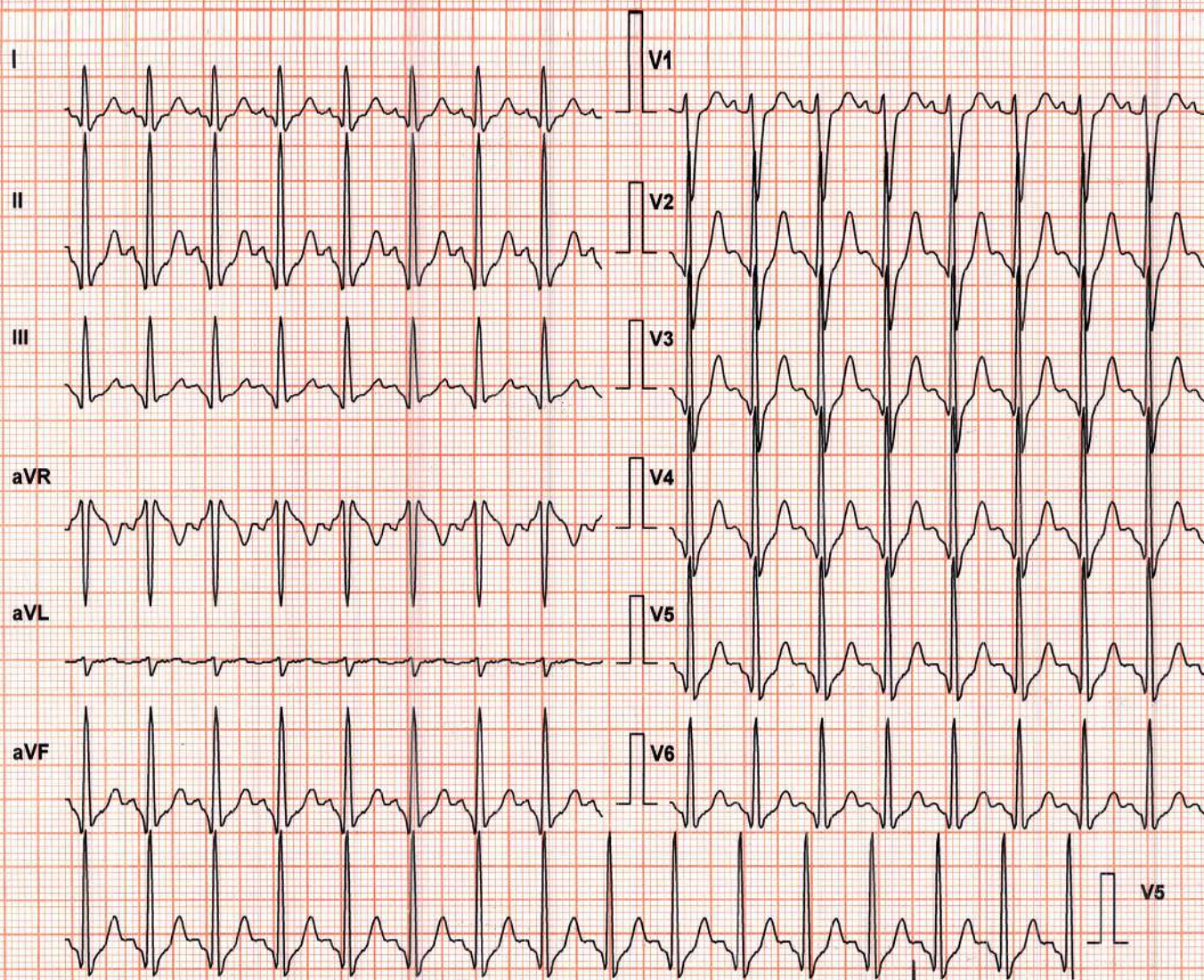
Grade: 16 %

Exec Time : 9 m 28 s

Stage Time : 0 m 28 s

HR: 150 bpm

(THR: 151 bpm)



Lead	ST Level (mm)	ST Slope (mV/s)
I	0.8	1.4
II	1.7	3.2
III	0.6	1.4
aVR	-1.3	-2.5
aVL	0.2	0.0
aVF	1.1	2.5
V1	1.5	2.5
V2	3.4	3.9
V3	1.9	3.9
V4	1.9	3.9
V5	1.3	3.2
V6	1.1	2.1

Chart Speed: 25 mm/sec

Schiller Spandan V 4.51

Filter: 35 Hz

Iso = R - 60 ms J = R + 60 ms

Mains Filt: ON

Post J = J + 60 ms

Amp: 10 mm

Linked Median



Suburban Diagnostics Kalina

MR. RAVINDRA YADAV (42 M)

ID: 2233020755

Date: 28-Nov-22

B.P: 160 / 70

Protocol: Bruce

Stage: Recovery(1)

Speed: 1 mph

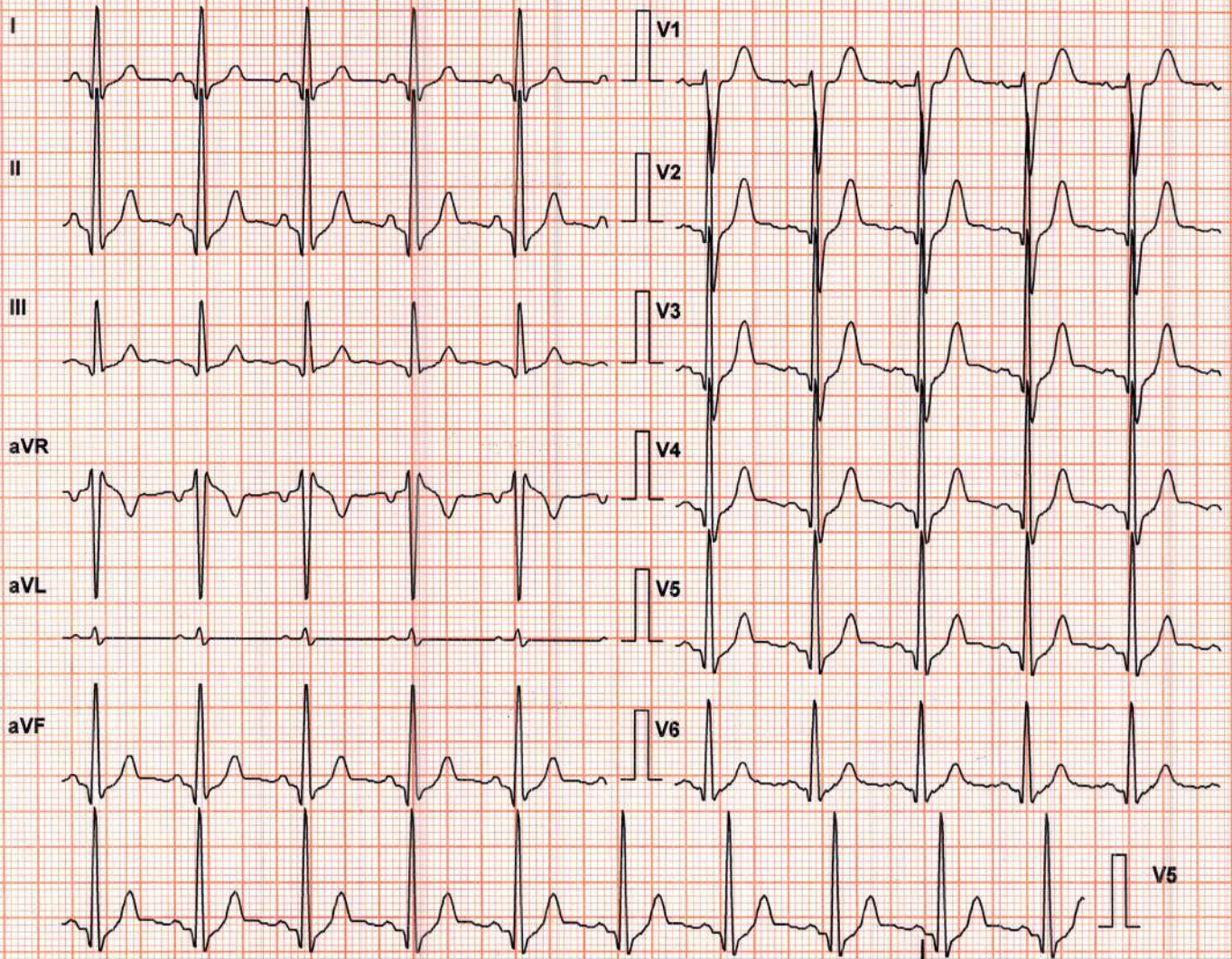
Grade: 0 %

Exec Time : 9 m 34 s

Stage Time : 1 m 54 s

HR: 95 bpm

(THR: 151 bpm)



Lead	ST Level (mm)	ST Slope (mV/s)
I	0.2	1.1
II	0.6	2.1
III	0.4	0.7
aVR	-0.6	-1.8
aVL	0.0	0.0
aVF	0.4	1.4
V1	0.8	0.7
V2	1.1	2.1
V3	0.8	2.1
V4	0.8	1.8
V5	0.6	1.8
V6	0.6	1.1

Chart Speed: 25 mm/sec
Schiller Spandan V 4.51

Filter: 35 Hz
Iso = R - 60 ms J = R + 60 ms

Mains Filt: ON
Post J = J + 60 ms

Amp: 10 mm
Linked Median



Suburban Diagnostics Kalina

MR. RAVINDRA YADAV (42 M)

ID: 2233020755

Date: 28-Nov-22

B.P: 140 / 70

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph

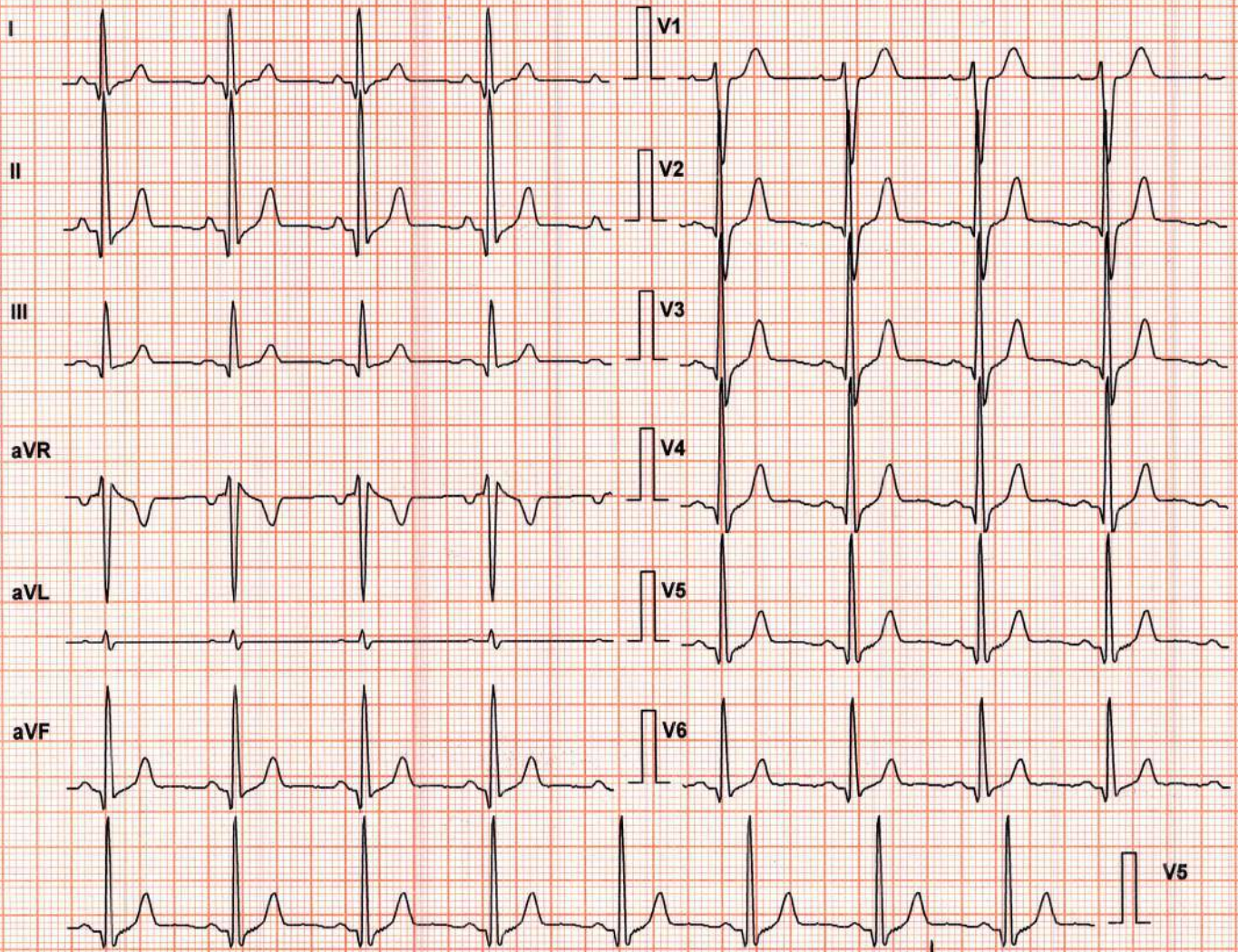
Grade: 0 %

Exec Time : 9 m 34 s

Stage Time : 1 m 54 s

HR: 78 bpm

(THR: 151 bpm)



Lead	ST Level (mm)	ST Slope (mV/s)
I	0.4	1.1
II	0.6	1.4
III	0.4	0.7
aVR	-0.6	-1.4
aVL	0.0	0.0
aVF	0.6	1.1
V1	0.4	0.7
V2	1.1	1.4
V3	0.8	1.8
V4	0.6	1.1
V5	0.6	1.1
V6	0.6	0.7

Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Schiller Spandan V 4.51

Iso = R - 60 ms J = R + 60 ms

Post J = J + 60 ms

Linked Median



Suburban Diagnostics Kalina

MR. RAVINDRA YADAV (42 M)

ID: 2233020755

Date: 28-Nov-22

B.P: 120 / 70

Protocol: Bruce

Stage: Recovery(3)

Speed: 0 mph

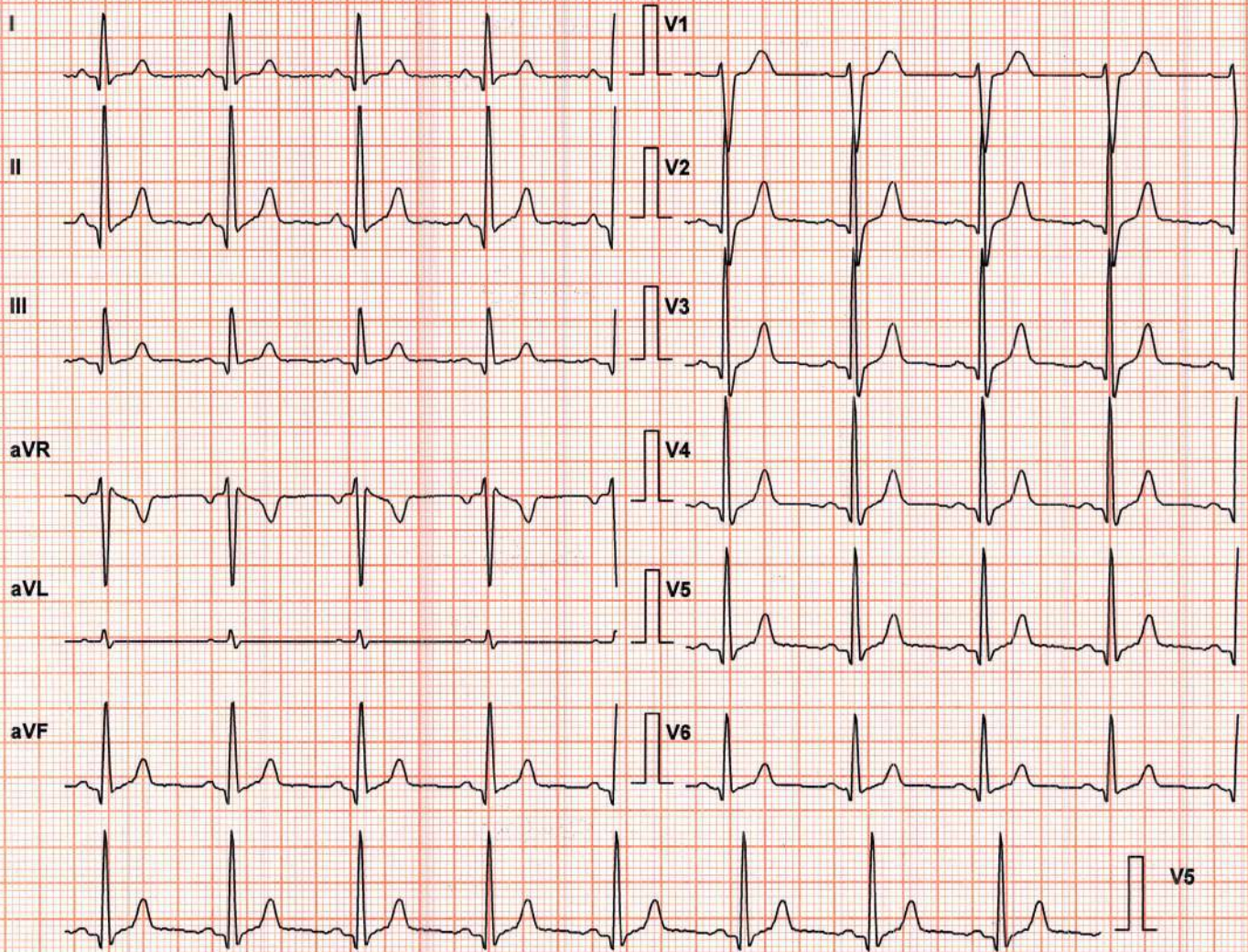
Grade: 0 %

Exec Time : 9 m 34 s

Stage Time : 1 m 3 s

HR: 80 bpm

(THR: 151 bpm)



Lead	ST Level (mm)	ST Slope (mV / s)
I	0.4	0.4
II	1.3	1.4
III	0.6	0.7
aVR	-0.8	-1.1
aVL	0.0	0.0
aVF	1.1	1.4
V1	0.4	0.7
V2	1.1	1.1
V3	1.1	1.1
V4	0.8	0.7
V5	0.8	0.7
V6	0.4	0.4

Chart Speed: 25 mm/sec

Schiller Spandan V 4.51

Filter: 35 Hz

Iso = R - 60 ms J = R + 60 ms

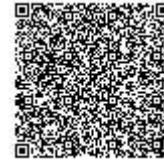
Mains Filt: ON

Post J = J + 60 ms

Amp: 10 mm

Linked Median





CID : 2233020755
Name : Mr RAVINDRA YADAV
Age / Sex : 42 Years/Male
Ref. Dr :
Reg. Location : Kalina, Santacruz East Main Centre

Reg. Date : 26-Nov-2022
Reported : 26-Nov-2022/12:02

USG OF WHOLE ABDOMEN

Clinical profile: for routine checkup. Patient denies any health related issues at present with no history of medical or surgical problems in the past. No previous reports provided at the time of ultrasound study.

Real time ultrasonography of whole abdomen was performed using transabdominal approach.

Liver:

Liver is enlarged in size (16.8 cm) and shows bright echopattern. No focal mass lesion is seen. The intrahepatic biliary radicals are normal. Hepatic veins & IVC are normal in caliber. Portal vein is normal in caliber and measures 10.5 mm.

Gallbladder:

Gallbladder is well distended and reveals normal wall thickness. No evidence of calculus or mass lesion seen. No obvious pericholecystic collection visualized.

CBD is normal in caliber (4.3 mm).

Spleen:

Spleen is normal in size (10.8 cm), shape and echotexture. No focal lesions seen. Splenic vein appears normal in caliber.

Pancreas:

Pancreas is visualized and is normal in size shape and echopattern. No focal lesions seen. Part of pancreatic tail and adjacent retroperitoneum obscured due to bowel gases.

Kidneys:

Both kidneys are normal in size, shape and position. No evidence of hydronephrosis, calculi or scarring.

Right Kidney measures: 10.6 x 4.6 cm.

Left Kidney measures: 10.0 x 5.1 cm.

Corticomedullary differentiation appears preserved.

No evidence of free fluid in abdomen and pelvis.

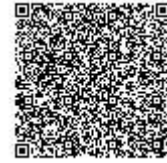
Visualized retroperitoneum appears unremarkable with no obvious lymphadenopathy.

Urinary bladder:

Urinary bladder is well distended and shows normal wall thickness. No evidence of any calculi or focal mass lesion is seen within it.

Pre void volume is 190 ml with no significant post void residue.

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2022112609312917>



Use a QR Code Scanner
Application To Scan the Code

CID : 2233020755
Name : Mr RAVINDRA YADAV
Age / Sex : 42 Years/Male
Ref. Dr :
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Reg. Date : 26-Nov-2022
Reported : 26-Nov-2022/12:02

**R
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Prostate:

Prostate is normal in size & measures 4.1 x 2.4 x 2.4 cm (volume ~13.4 cc)

IMPRESSION:

Mild hepatomegaly with fatty infiltration.

No significant abnormality detected in ultrasound study of whole abdomen.

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

This report is prepared and physically checked by Dr Vaseem Anjum Ansari before dispatch.

Dr Vaseem Anjum Ansari
Radiologist (MBBS,DMRD)
Reg No. 2003/06/2275

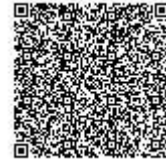
Investigations have their limitations. Solitary Pathological / Radiological and other investigations never confirm the final diagnosis of disease. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly.



Use a QR Code Scanner
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CID : 2233020755
Name : Mr RAVINDRA YADAV
Age / Sex : 42 Years/Male
Ref. Dr :
Reg. Location : Kalina, Santacruz East Main Centre

Reg. Date : 26-Nov-2022
Reported : 26-Nov-2022/12:02



CID : 2233020755
Name : Mr RAVINDRA YADAV
Age / Sex : 42 Years/Male
Ref. Dr :
Reg. Location : Kalina, Santacruz East Main Centre

Reg. Date : 26-Nov-2022
Reported : 26-Nov-2022/13:33

X-RAY CHEST PA VIEW

Expiratory phase of respiration.

Visualized lung fields are clear.

Both costo-phrenic angles are clear.

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-----

This report is prepared and physically checked by Dr Vaseem Anjum Ansari before dispatch.

Dr Vaseem Anjum Ansari
Radiologist (MBBS,DMRD)
Reg No. 2003/06/2275



Use a QR Code Scanner
Application To Scan the Code

CID : 2233020755
Name : Mr RAVINDRA YADAV
Age / Sex : 42 Years/Male
Ref. Dr :
Reg. Location : Kalina, Santacruz East Main Centre

Reg. Date : 26-Nov-2022
Reported : 26-Nov-2022/13:33