

SUBURBAN DIAGNOSTICS BHAYANDER

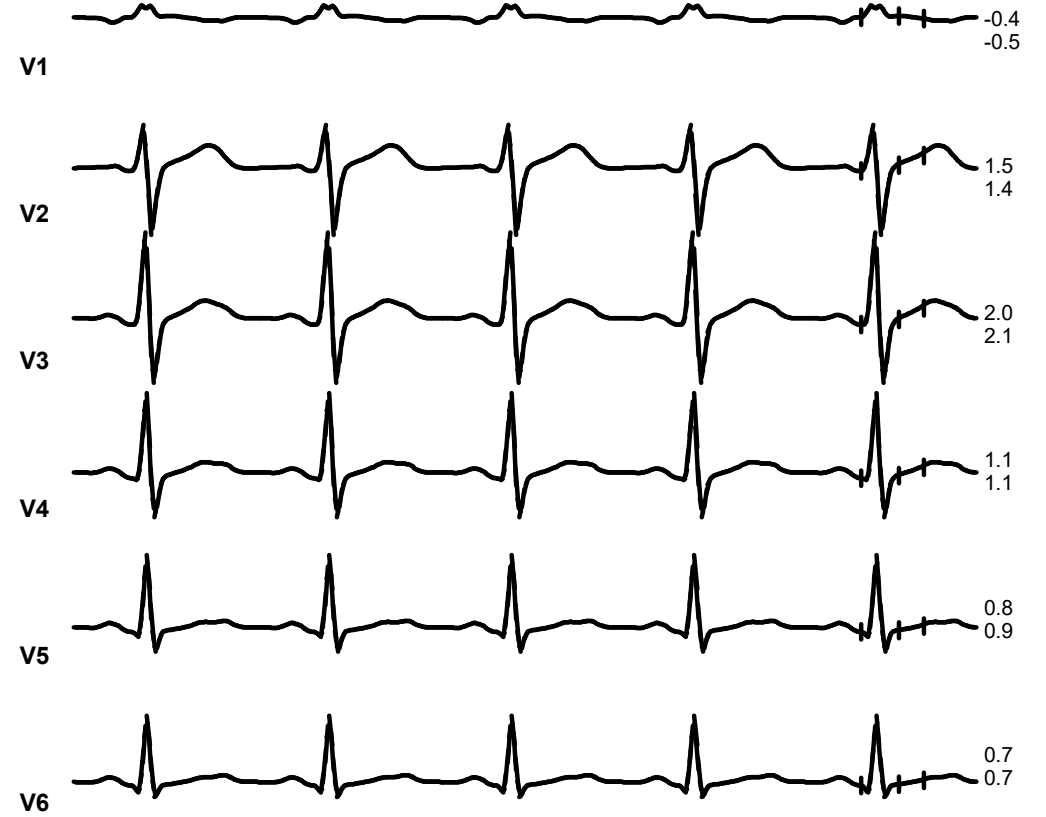
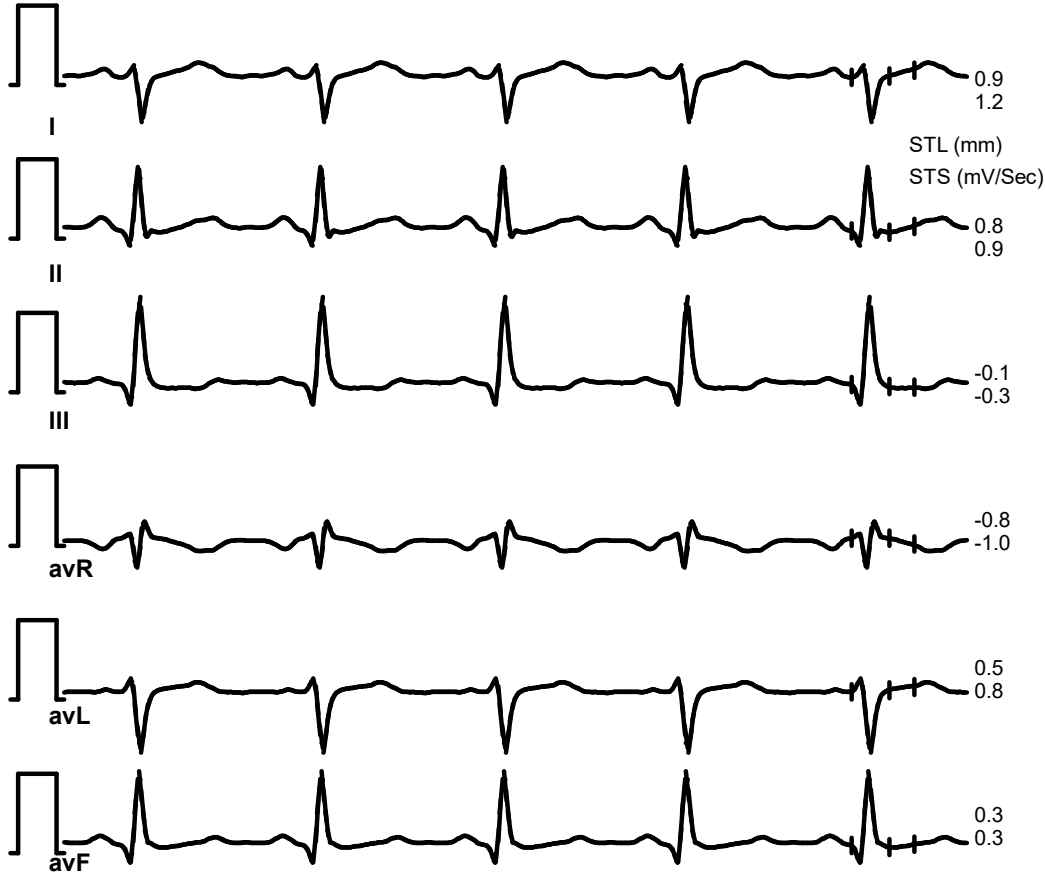
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE:Supine(0:06)



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.0 HR : 65 Target HR : 36% of 182 BP : 110/80 Post J @80mSec

ExTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

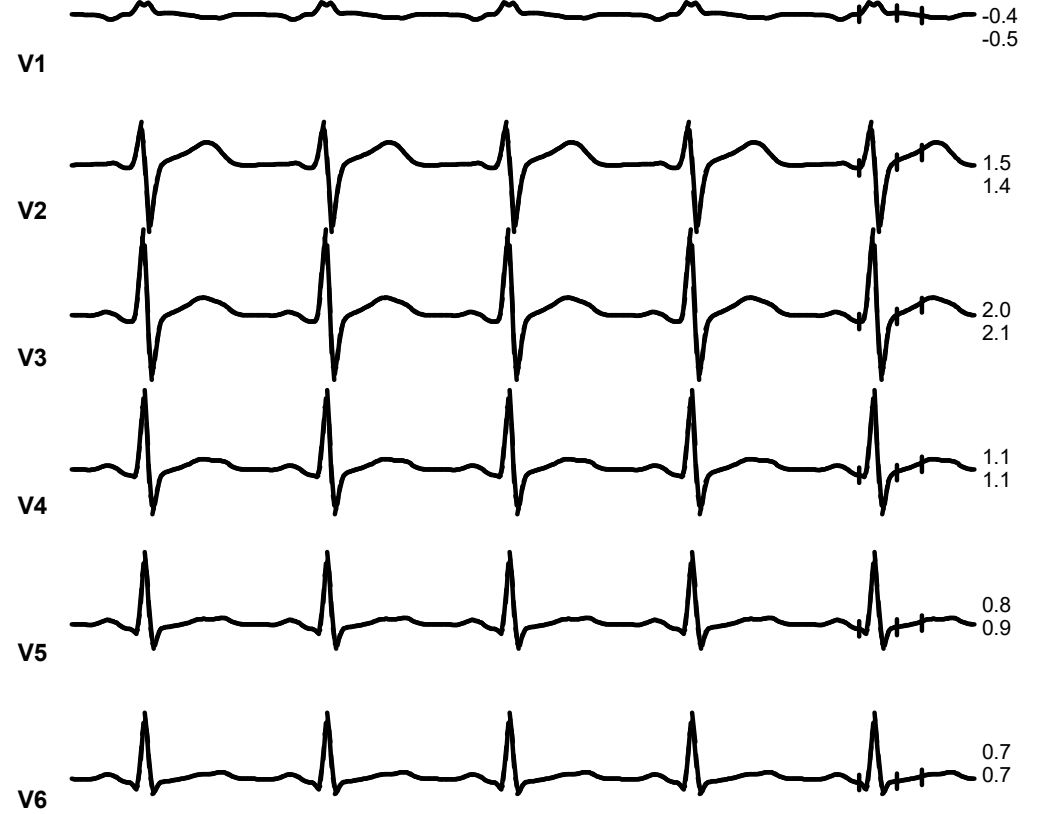
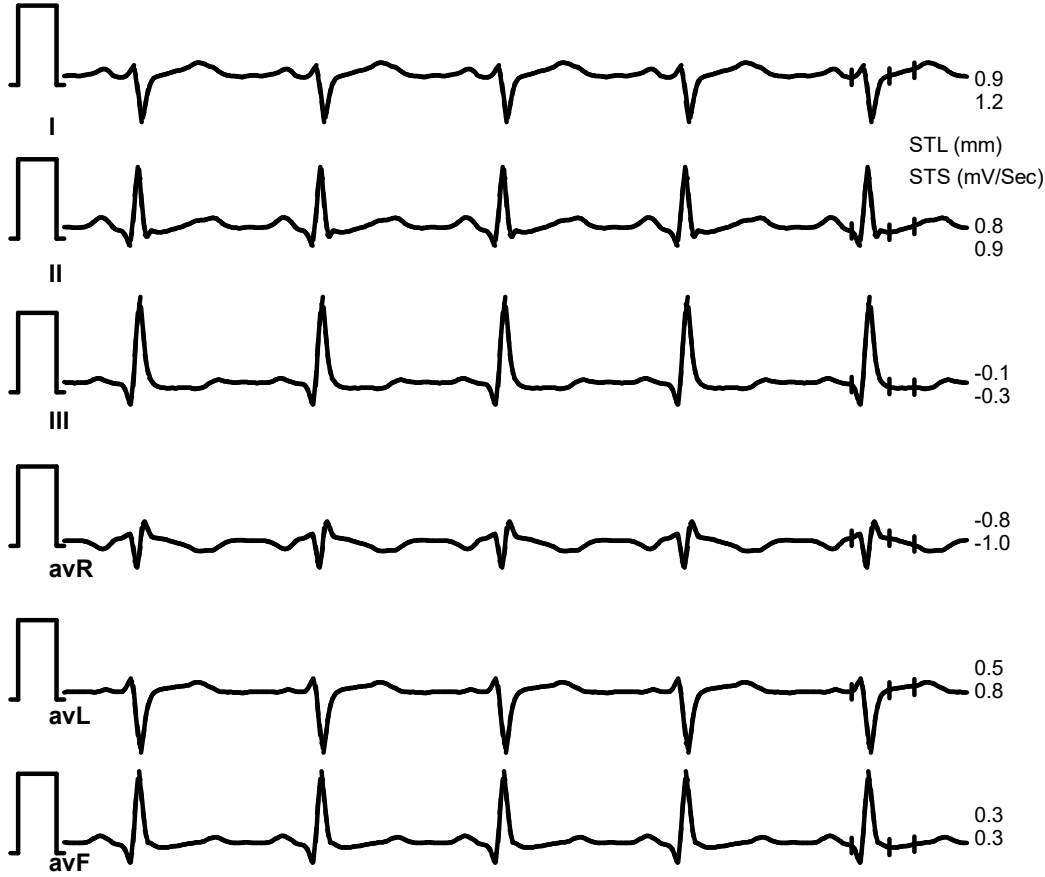
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE:Standing(0:05)



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.0 HR : 65 Target HR : 36% of 182 BP : 110/80 Post J @80mSec

ExTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

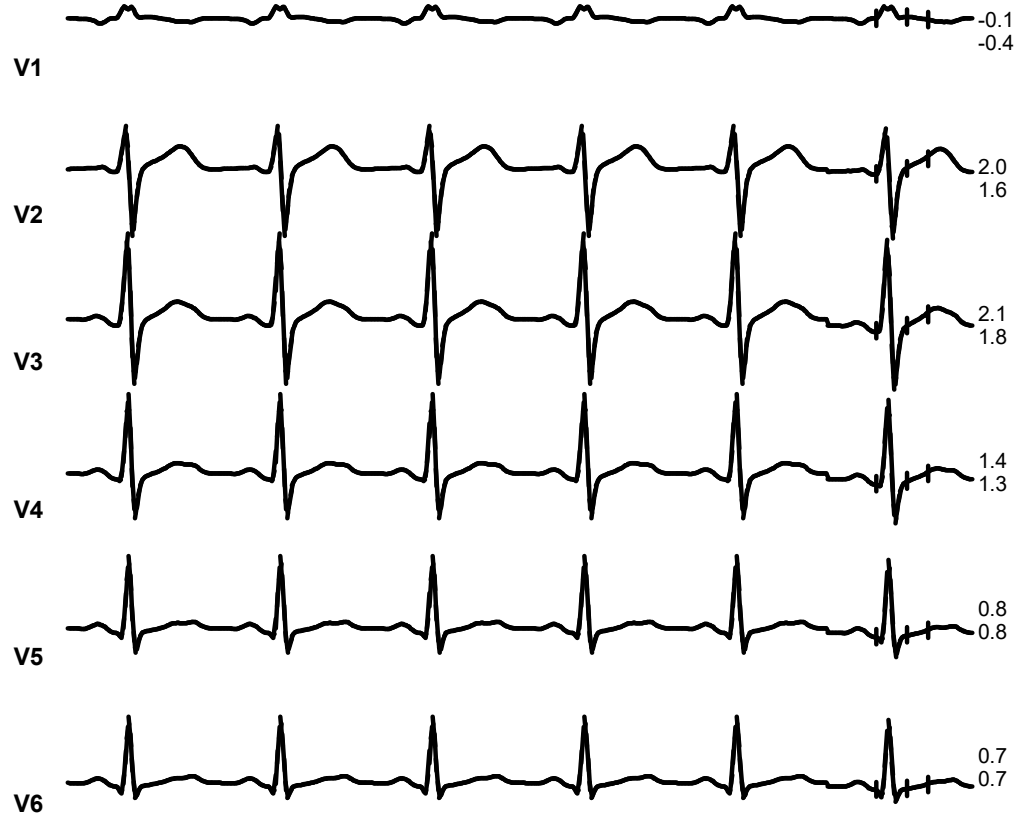
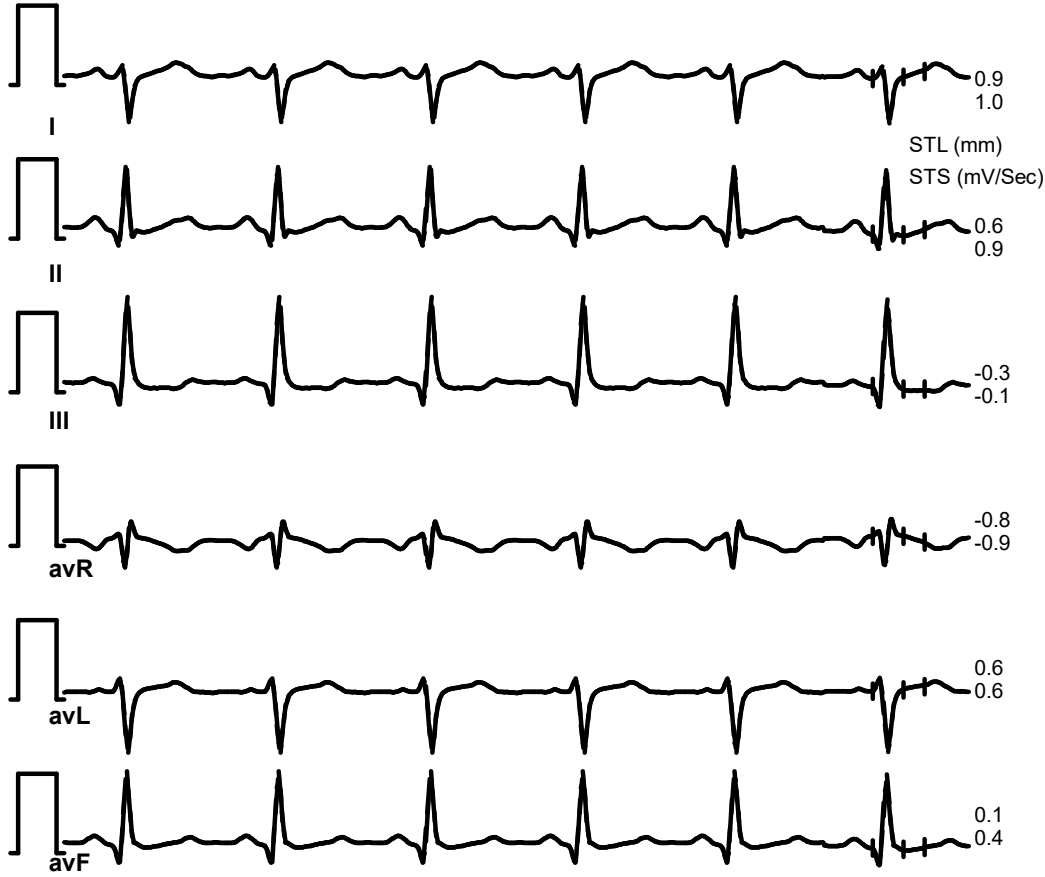
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE:HV(0:05)



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.1 HR : 70 Target HR : 38% of 182 BP : 110/80 Post J @80mSec

ExTime: 00:00 Speed: 1.7 mph Grade : 10.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

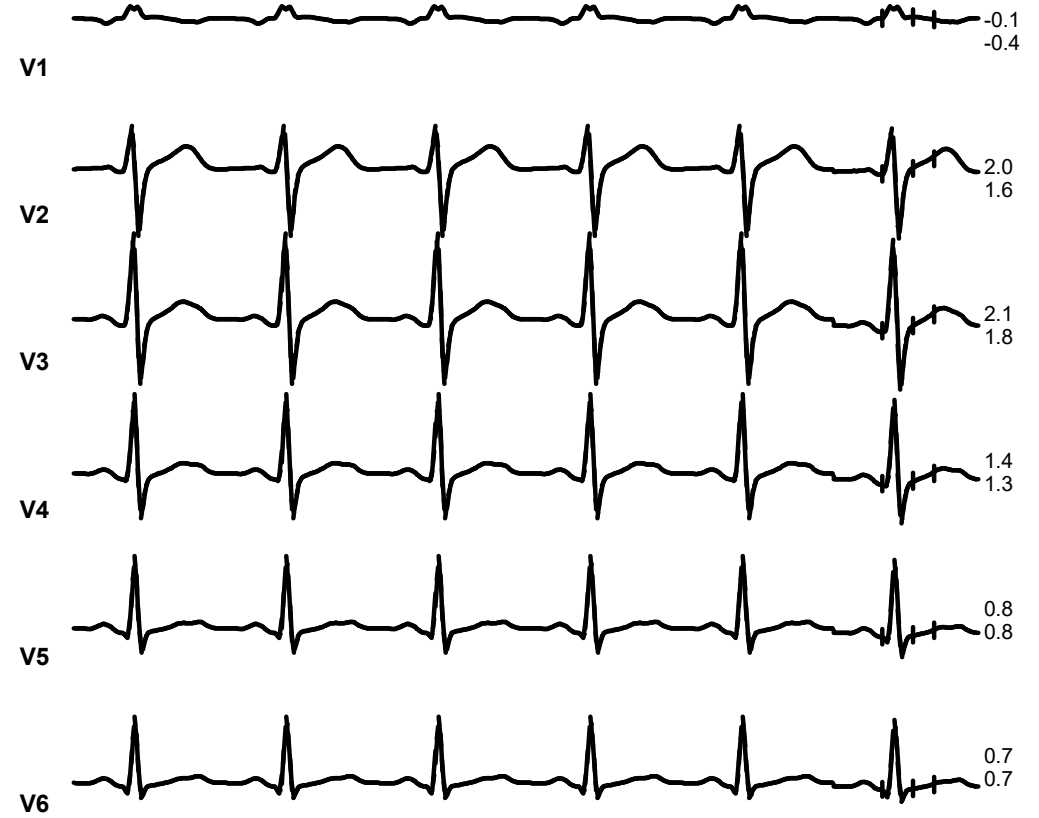
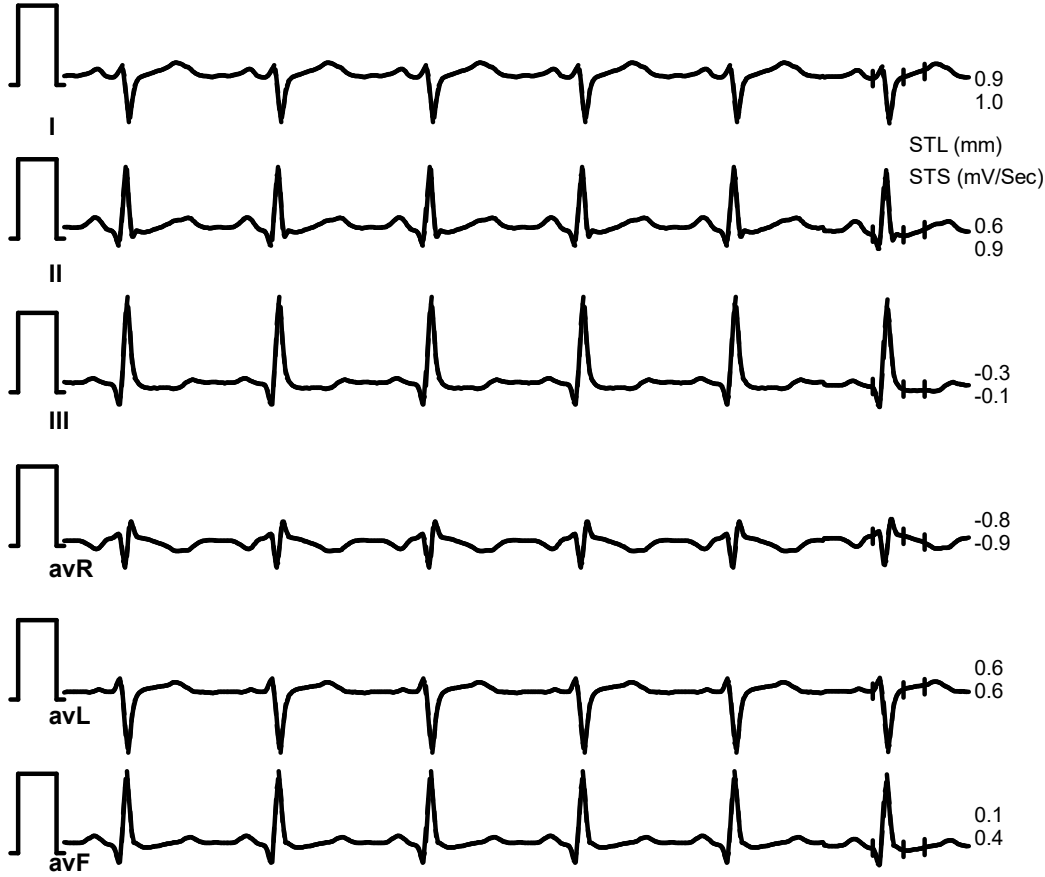
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm
ExStart



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.1 HR : 70 Target HR : 38% of 182 BP : 110/80 Post J @80mSec

ExTime: 00:00 Speed: 1.7 mph Grade : 10.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

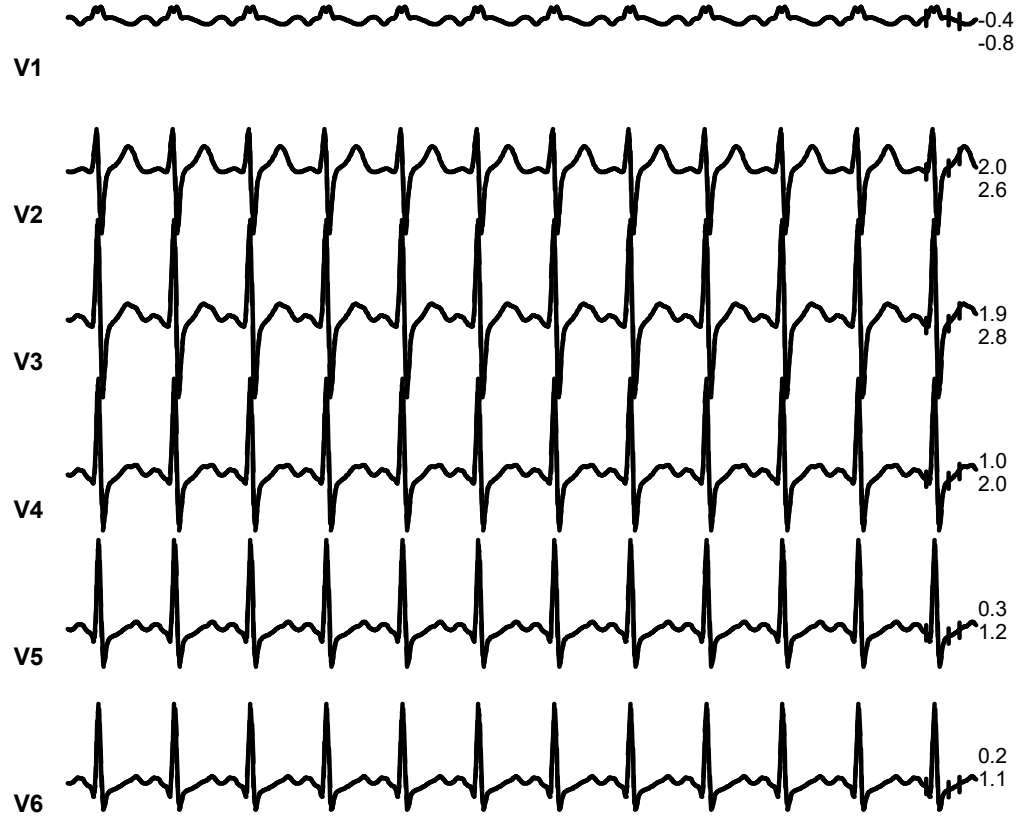
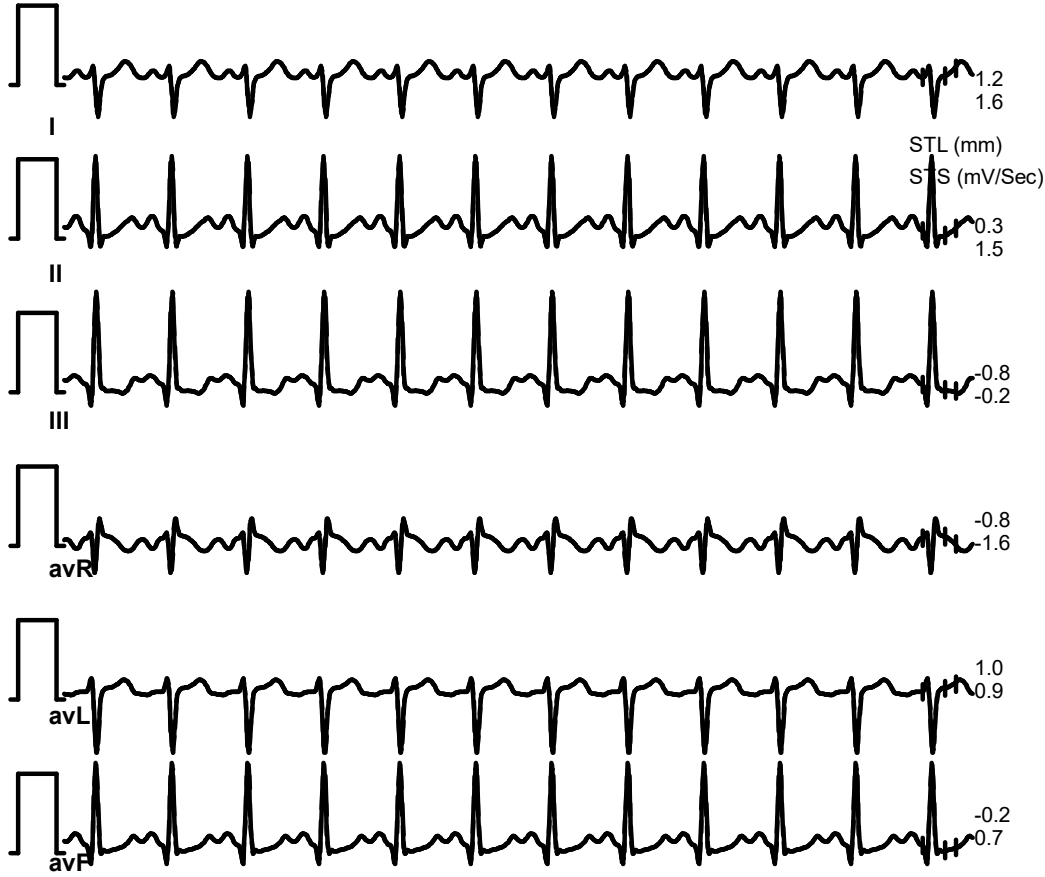
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE:Stage 1(3:00)



Date: 29 / 03 / 2024 10:10:27 AM METs : 4.7 HR : 146 Target HR : 80% of 182 BP : 120/80 Post J @60mSec

ExTime: 03:00 Speed: 1.7 mph Grade : 10.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

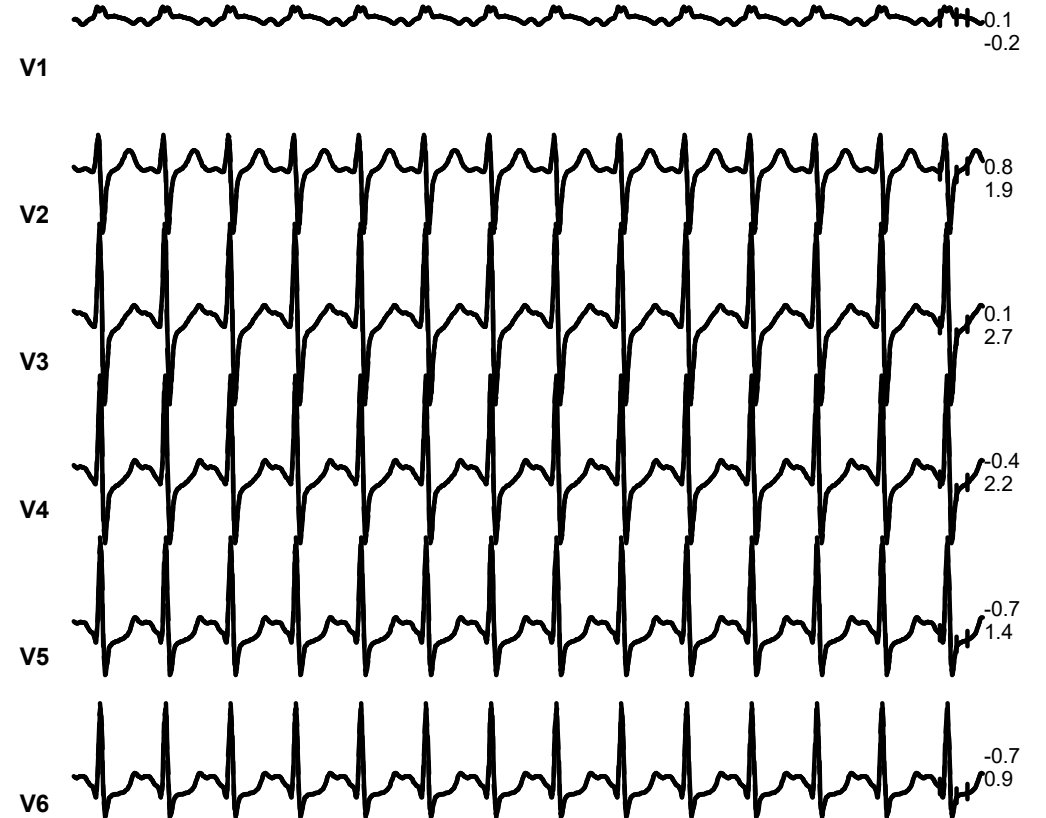
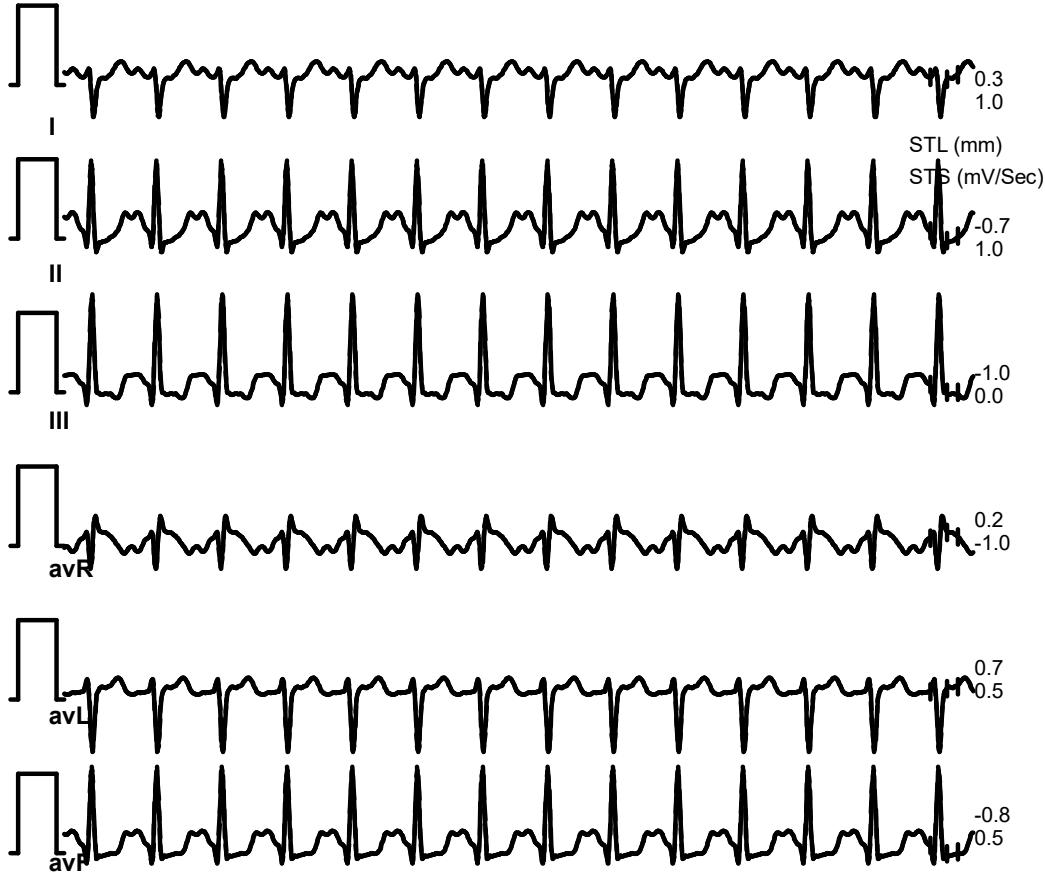
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE:Stage 2(3:00)



Date: 29 / 03 / 2024 10:10:27 AM METs : 7.1 HR : 168 Target HR : 92% of 182 BP : 130/80 Post J @60mSec

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



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

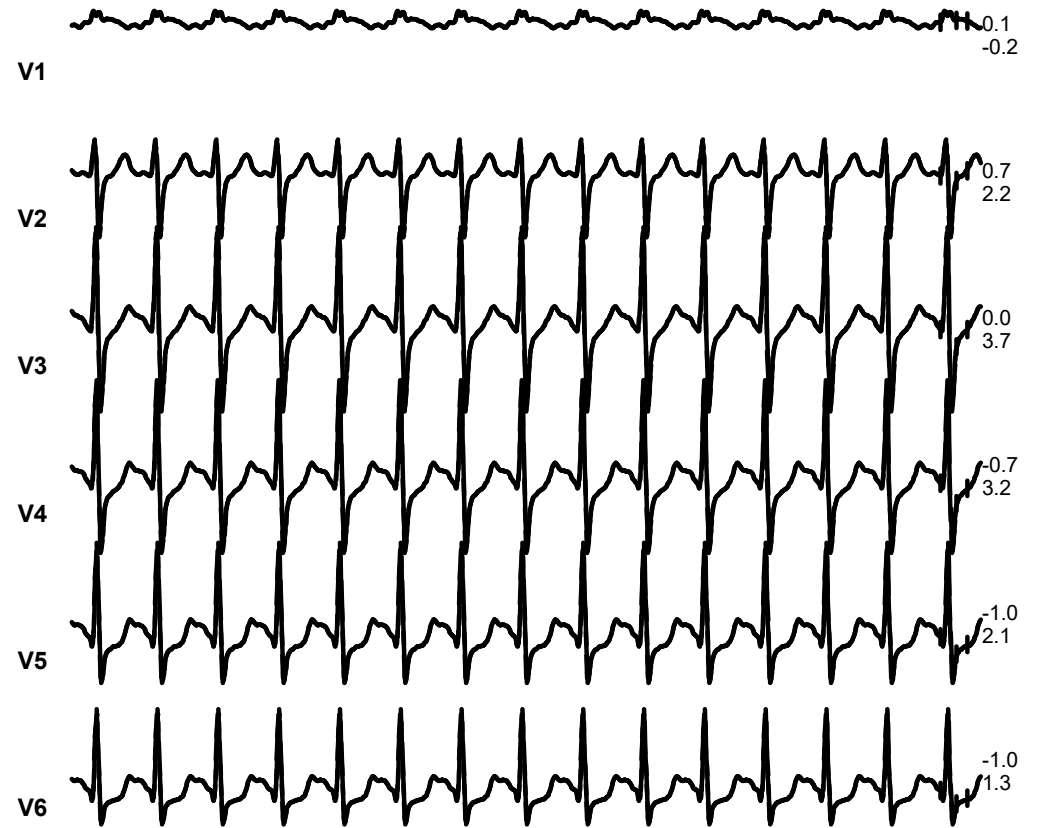
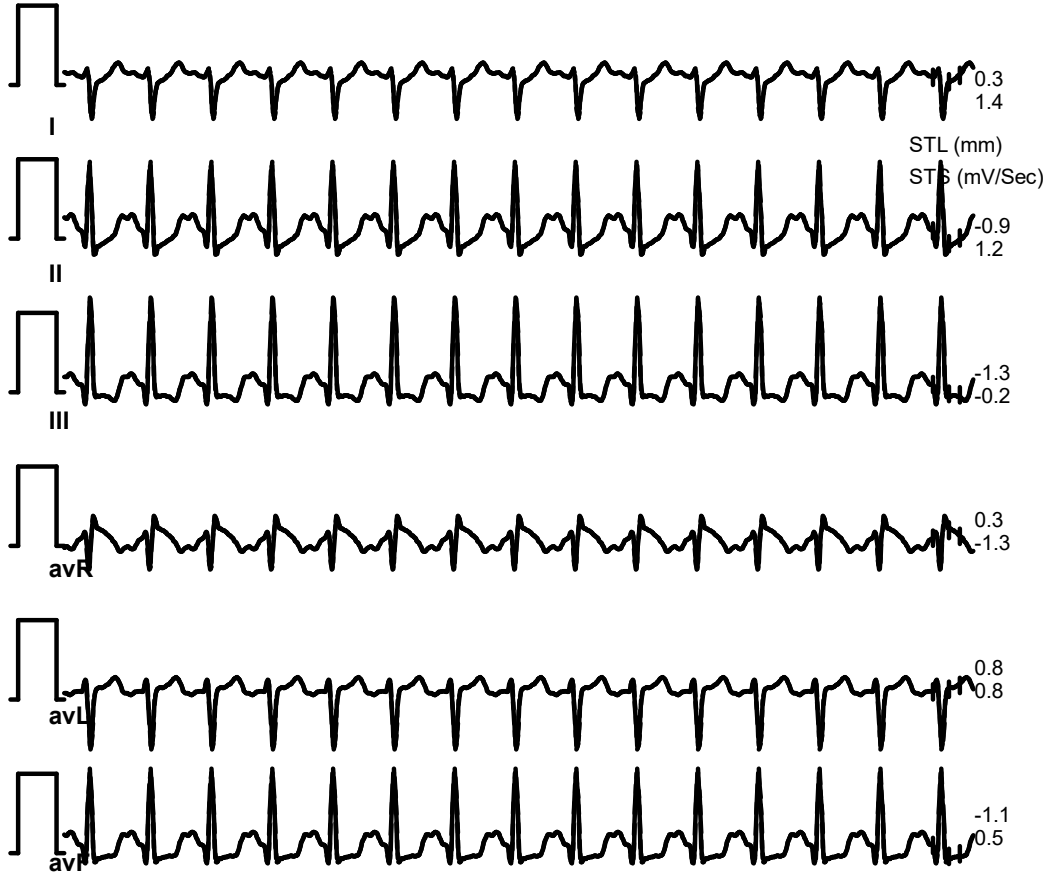
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm PeakEx



Date: 29 / 03 / 2024 10:10:27 AM METs : 8.2 HR : 178 Target HR : 98% of 182 BP : 130/80 Post J @60mSec

ExTime: 07:01 Speed: 3.4 mph Grade : 14.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

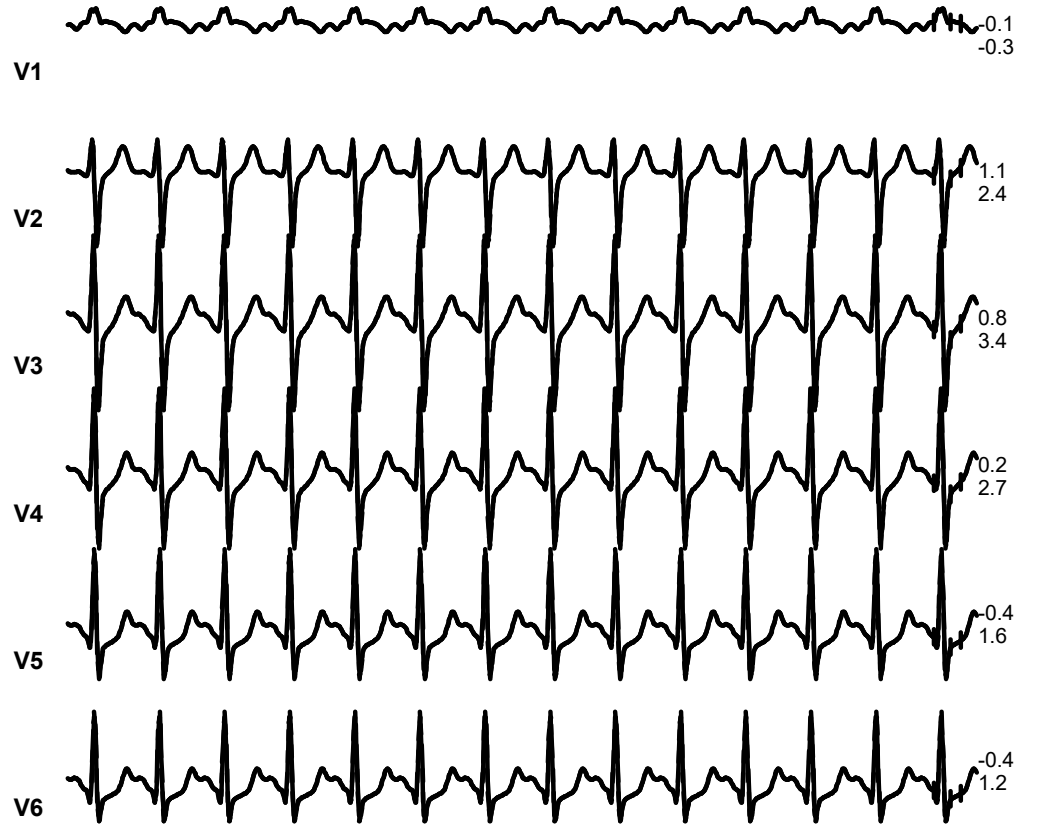
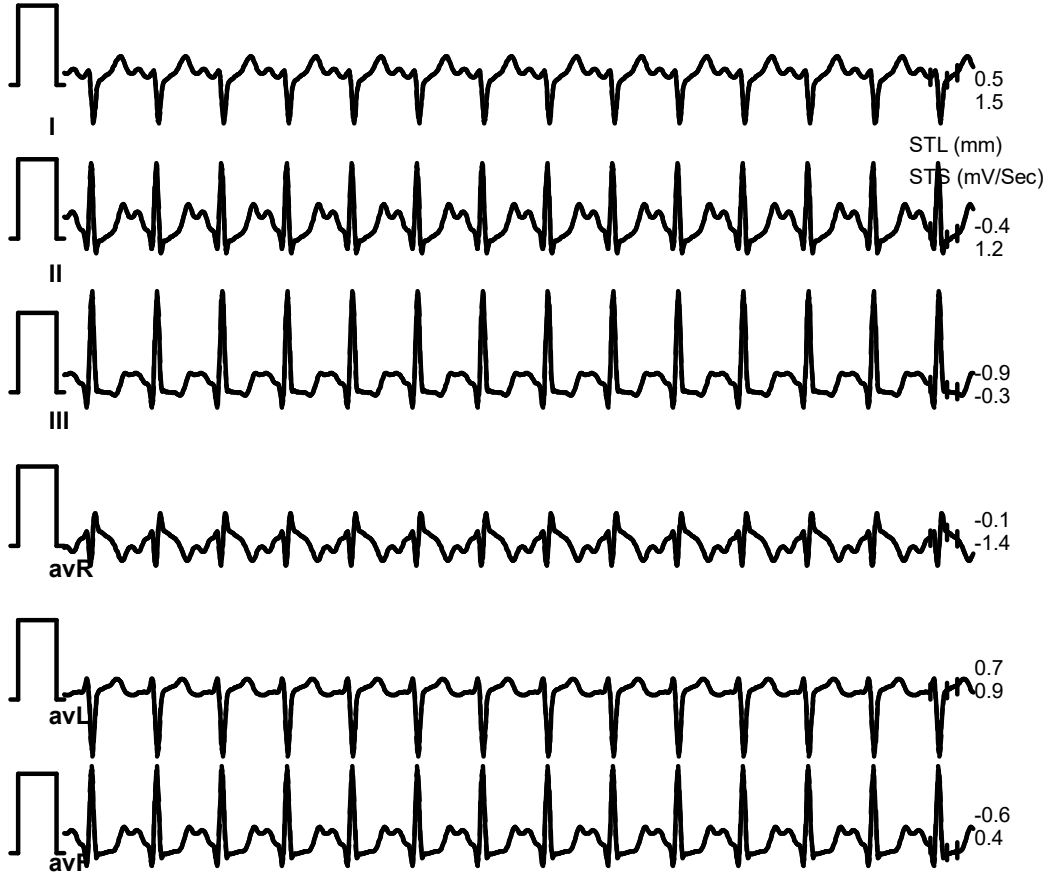
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

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



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.1 HR : 167 Target HR : 92% of 182 BP : 150/80 Post J @60mSec

ExTime: 07:00 Speed: 1.1 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

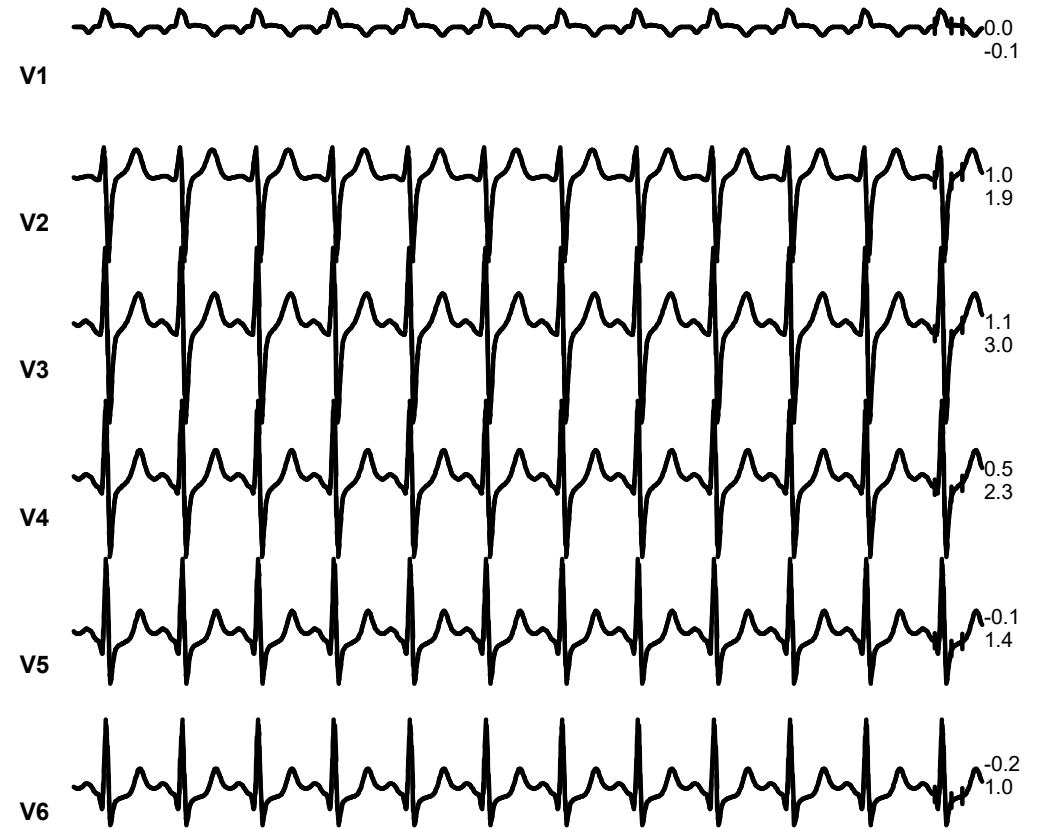
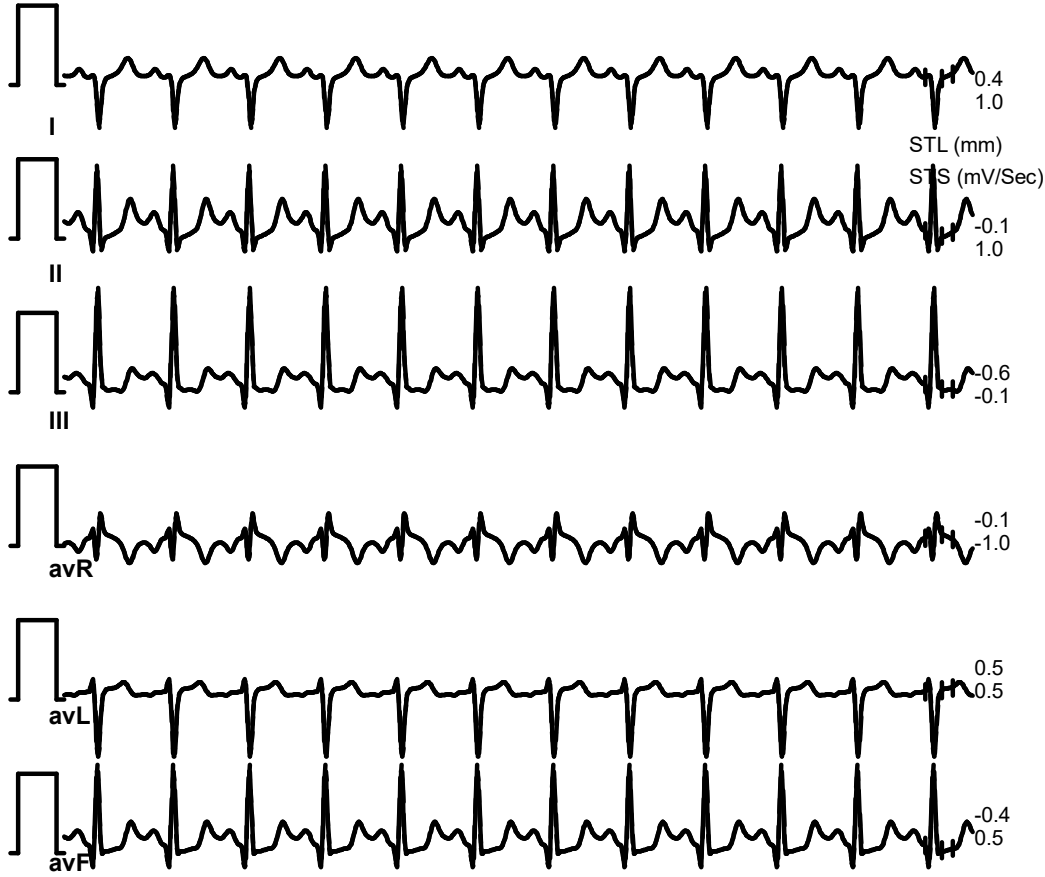
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm
Recovery(2:00)



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.0 HR : 139 Target HR : 76% of 182 BP : 130/80 Post J @60mSec

ExTime: 07:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

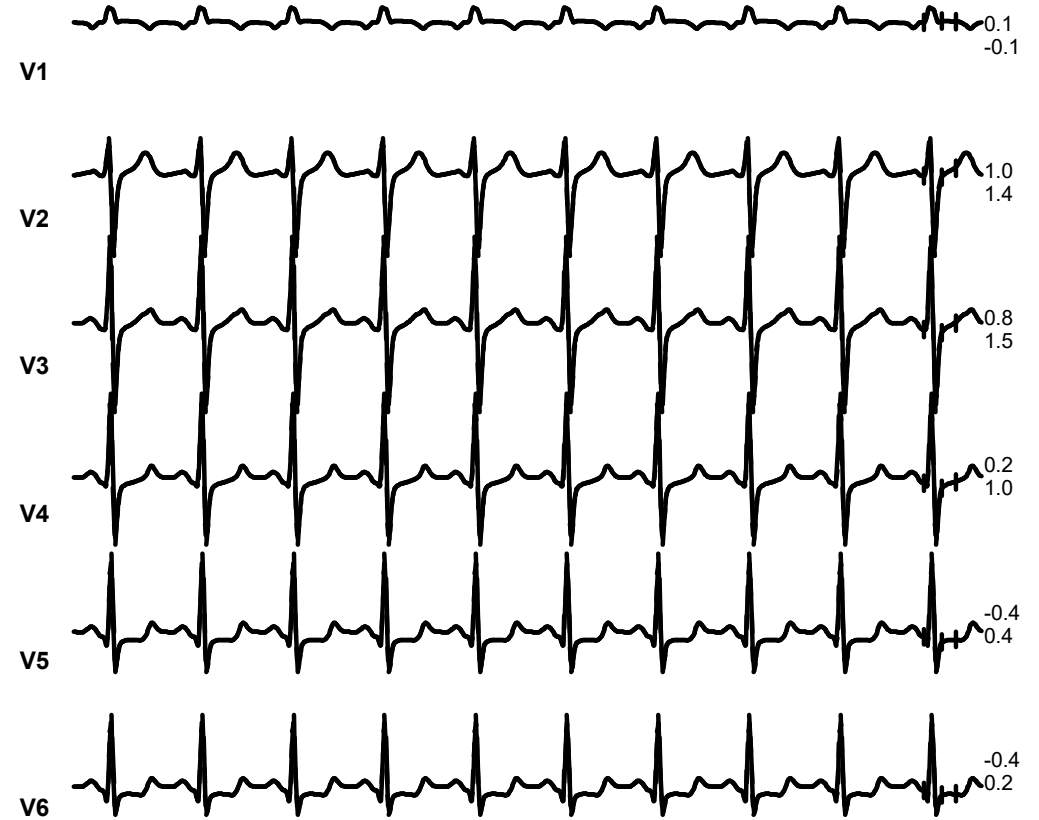
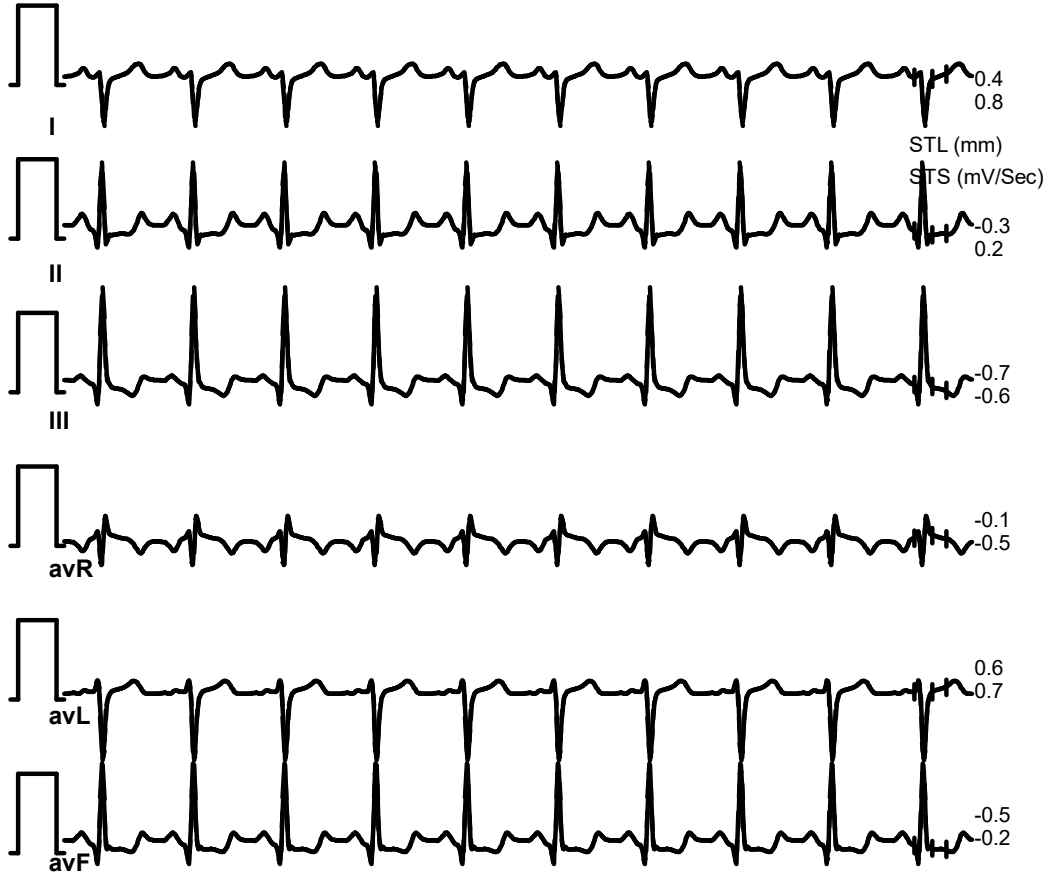
6X2 Combine Medians + 1 Rhythm

Recovery(4:00)



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.0 HR : 116 Target HR : 64% of 182 BP : 120/80 Post J @80mSec

ExTime: 07:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

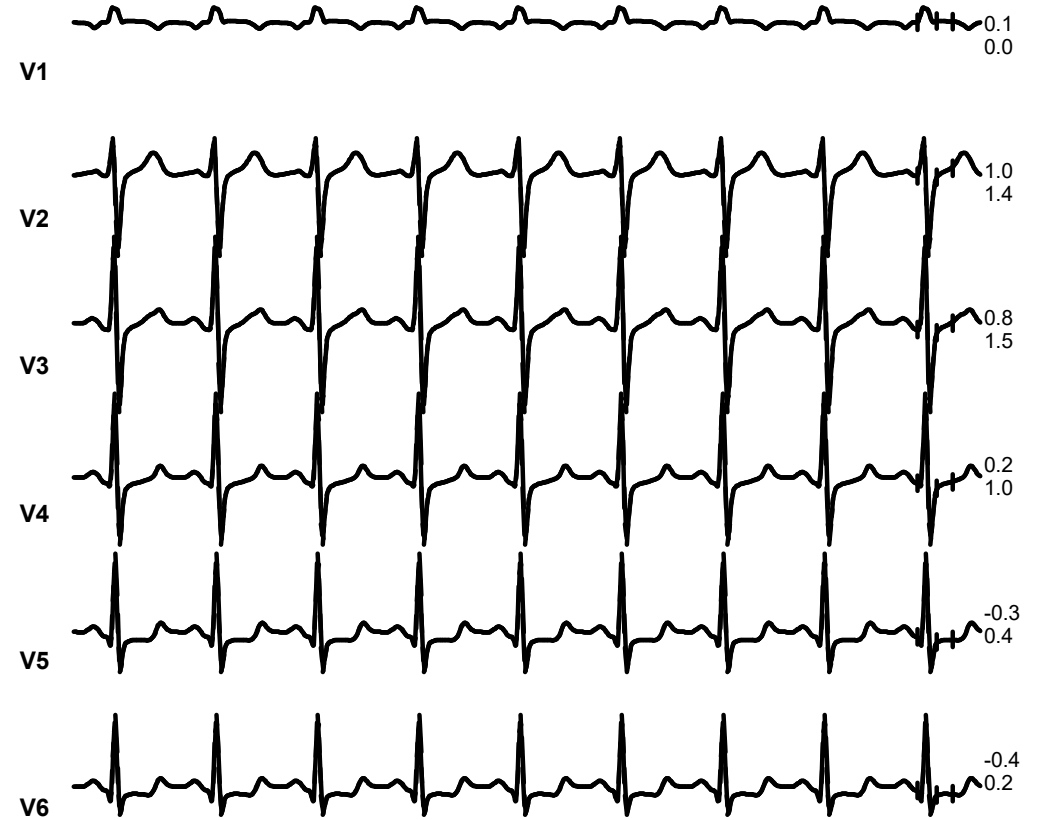
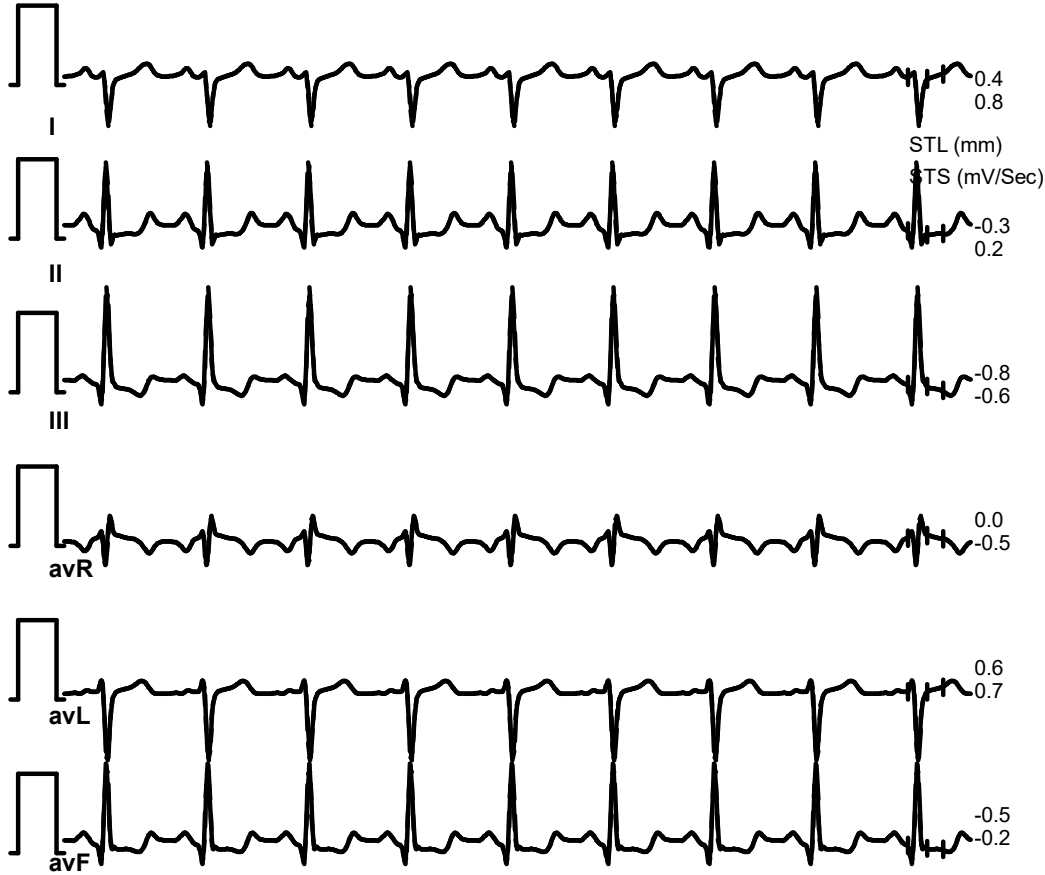
6X2 Combine Medians + 1 Rhythm

Recovery(4:07)



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.0 HR : 112 Target HR : 62% of 182 BP : 120/80 Post J @80mSec

ExTime: 07:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)





CID : 2408913379
Name : MR.MANOJ LAHU KALE
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 29-Mar-2024 / 09:47
Reported : 29-Mar-2024 / 16:23

Use a QR Code Scanner
Application To Scan the Code

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	13.2	13.0-17.0 g/dL	Spectrophotometric
RBC	4.98	4.5-5.5 mil/cmm	Elect. Impedance
PCV	39.4	40-50 %	Measured
MCV	79	80-100 fl	Calculated
MCH	26.5	27-32 pg	Calculated
MCHC	33.4	31.5-34.5 g/dL	Calculated
RDW	14.0	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	7700	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	32.2	20-40 %	
Absolute Lymphocytes	2479.4	1000-3000 /cmm	Calculated
Monocytes	7.7	2-10 %	
Absolute Monocytes	592.9	200-1000 /cmm	Calculated
Neutrophils	53.1	40-80 %	
Absolute Neutrophils	4088.7	2000-7000 /cmm	Calculated
Eosinophils	5.9	1-6 %	
Absolute Eosinophils	454.3	20-500 /cmm	Calculated
Basophils	1.1	0.1-2 %	
Absolute Basophils	84.7	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	271000	150000-400000 /cmm	Elect. Impedance
MPV	9.7	6-11 fl	Calculated
PDW	15.3	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			
Hypochromia	Mild		
Microcytosis	Occasional		



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Name : MR.MANOJ LAHU KALE
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 29-Mar-2024 / 09:47
Reported : 29-Mar-2024 / 14:50

- Macrocytosis -
- Anisocytosis -
- Poikilocytosis -
- Polychromasia -
- Target Cells -
- Basophilic Stippling -
- Normoblasts -
- Others -
- WBC MORPHOLOGY -
- PLATELET MORPHOLOGY -
- COMMENT -

Result rechecked.
 Kindly correlate clinically.

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR **18** 2-15 mm at 1 hr. Sedimentation



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Reported : 29-Mar-2024 / 16:23

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Clinical Significance: The erythrocyte sedimentation rate (ESR), also called a sedimentation rate is the rate red blood cells sediment in a period of time.

Interpretation:

Factors that increase ESR: Old age, Pregnancy, Anemia

Factors that decrease ESR: Extreme leukocytosis, Polycythemia, Red cell abnormalities- Sickle cell disease

Limitations:

- It is a non-specific measure of inflammation.
- The use of the ESR as a screening test in asymptomatic persons is limited by its low sensitivity and specificity.

Reflex Test: C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.

Reference:

- Pack Insert
- Brigden ML. Clinical utility of the erythrocyte sedimentation rate. American family physician. 1999 Oct 1;60(5):1443-50.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West

*** End Of Report ***



Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2408913379
Name : MR.MANOJ LAHU KALE
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Use a QR Code Scanner
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Collected : 29-Mar-2024 / 09:47
Reported : 29-Mar-2024 / 18:04

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	106.4	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	84.9	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.24	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.1	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.14	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.9	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.8	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	3.1	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.5	1 - 2	Calculated
SGOT (AST), Serum	28.6	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	46.3	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	33.2	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	92.2	40-130 U/L	Colorimetric
BLOOD UREA, Serum	25.8	12.8-42.8 mg/dl	Kinetic
BUN, Serum	12.0	6-20 mg/dl	Calculated
CREATININE, Serum	0.98	0.67-1.17 mg/dl	Enzymatic



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Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 29-Mar-2024 / 17:11
Reported : 29-Mar-2024 / 20:13

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eGFR, Serum	101	(ml/min/1.73sqm)	Calculated
		Normal or High: Above 90	
		Mild decrease: 60-89	
		Mild to moderate decrease: 45-59	
		Moderate to severe decrease: 30-44	
		Severe decrease: 15-29	
		Kidney failure: <15	

Note: eGFR estimation is calculated using 2021 CKD-EPI GFR equation w.e.f 16-08-2023

URIC ACID, Serum	6.2	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 Borivali Lab, Borivali West
*** End Of Report ***



Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2408913379
Name : MR.MANOJ LAHU KALE
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 29-Mar-2024 / 09:47
Reported : 29-Mar-2024 / 15:26

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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	5.9	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	122.6	mg/dl	Calculated

Intended use:

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

Clinical Significance:

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

Test Interpretation:

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

Factors affecting HbA1c results:

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

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

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

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

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West

*** End Of Report ***



Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2408913379
Name : MR.MANOJ LAHU KALE
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Collected : 29-Mar-2024 / 09:47
Reported : 29-Mar-2024 / 16:38

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
URINE EXAMINATION REPORT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.015	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	30	-	-
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	0-1	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	1-2		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	3-4	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 inert

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



Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2408913379
Name : MR.MANOJ LAHU KALE
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

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Collected : 29-Mar-2024 / 09:47
Reported : 29-Mar-2024 / 16:35

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

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	B
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

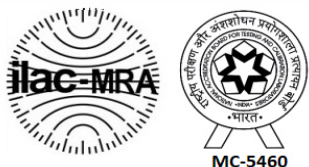
Limitations:

- 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 ***



Anupa

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



CID : 2408913379
Name : MR.MANOJ LAHU KALE
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

Use a QR Code Scanner Application To Scan the Code
Collected : 29-Mar-2024 / 09:47
Reported : 29-Mar-2024 / 19:36

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	227.1	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	238.9	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	34.7	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	192.4	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	142.3	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	50.1	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	6.5	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	4.1	0-3.5 Ratio	Calculated

Note : LDL test is performed by direct measurement.

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



Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2408913379
 Name : MR.MANOJ LAHU KALE
 Age / Gender : 38 Years / Male
 Consulting Dr. : -
 Reg. Location : Bhayander East (Main Centre)

Use a QR Code Scanner
 Application To Scan the Code
 Collected : 29-Mar-2024 / 09:47
 Reported : 29-Mar-2024 / 15:42

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	3.9	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	14.4	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	1.16	0.35-5.5 microIU/ml	ECLIA



CID : 2408913379
Name : MR.MANOJ LAHU KALE
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Collected : 29-Mar-2024 / 09:47
Reported : 29-Mar-2024 / 15:42

Interpretation:

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

Clinical Significance:

- 1)TSH Values between high abnormal 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)

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West

*** End Of Report ***



Bmhasakar

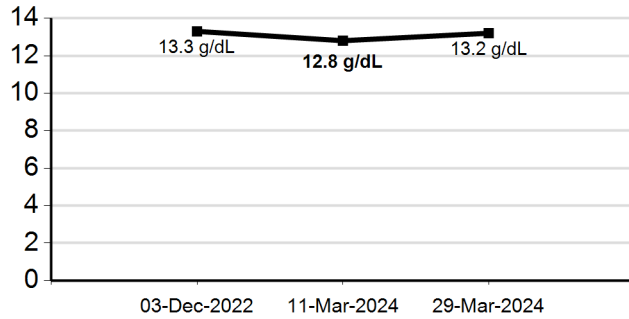
Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



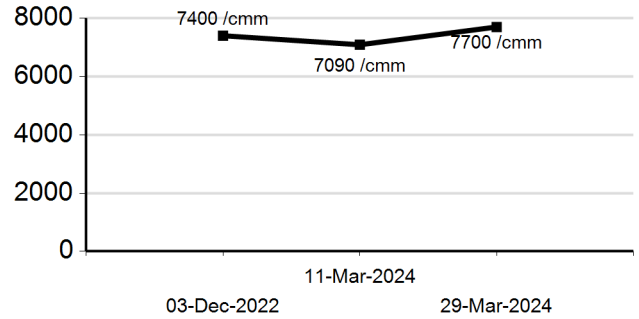
Use a QR Code Scanner
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Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

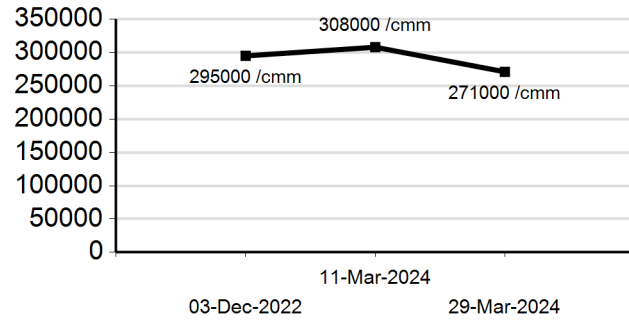
Haemoglobin



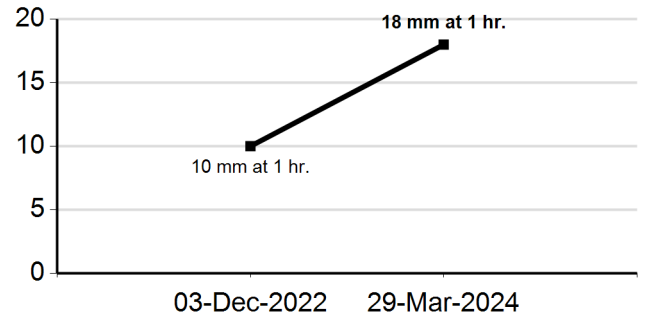
WBC Total Count



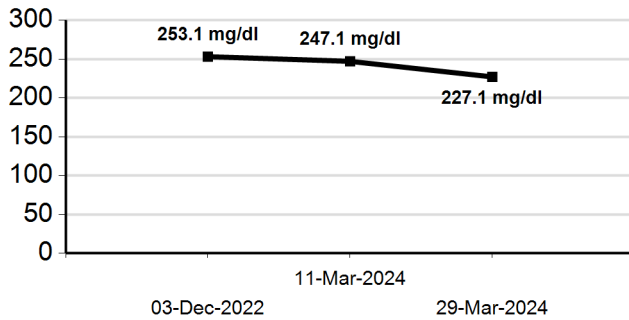
Platelet Count



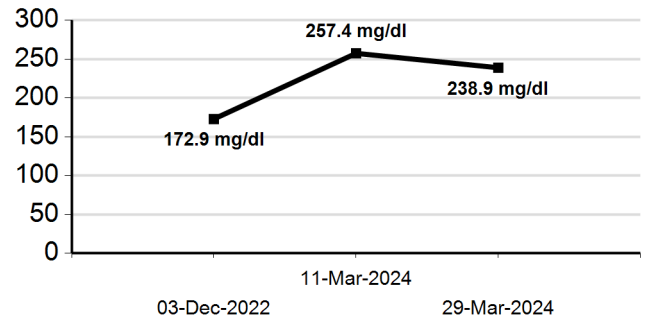
ESR



CHOLESTEROL



TRIGLYCERIDES

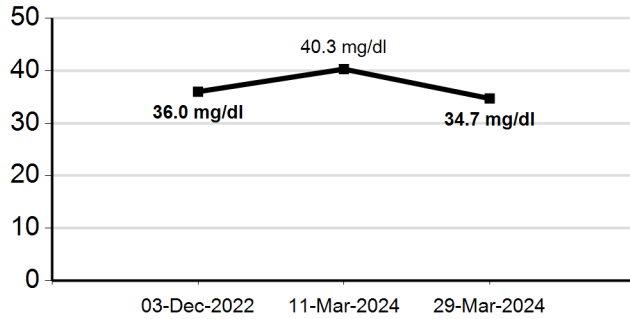




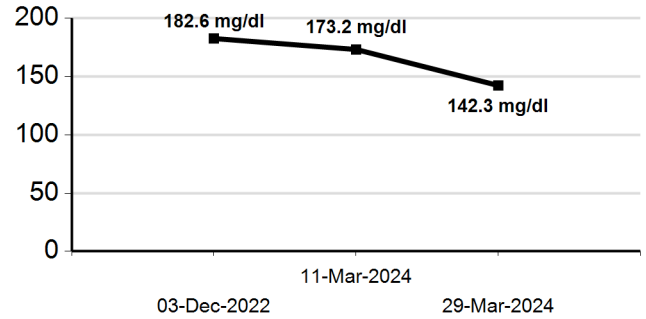
Use a QR Code Scanner
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Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)

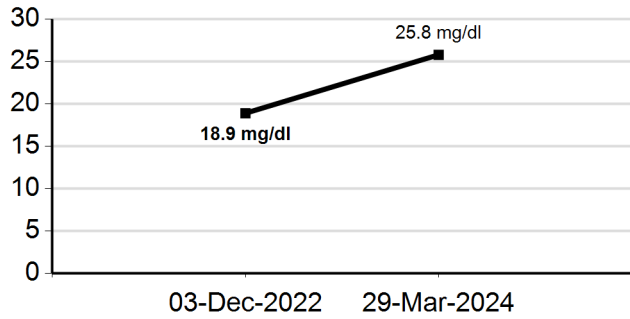
HDL CHOLESTEROL



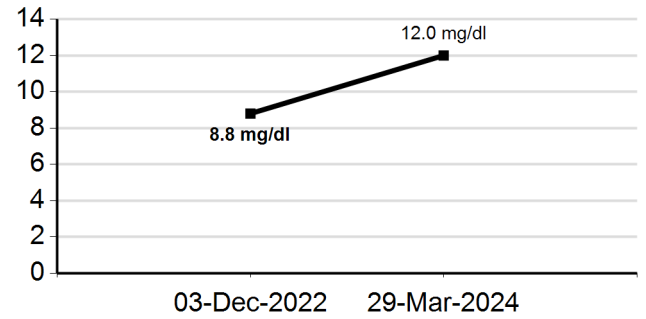
LDL CHOLESTEROL



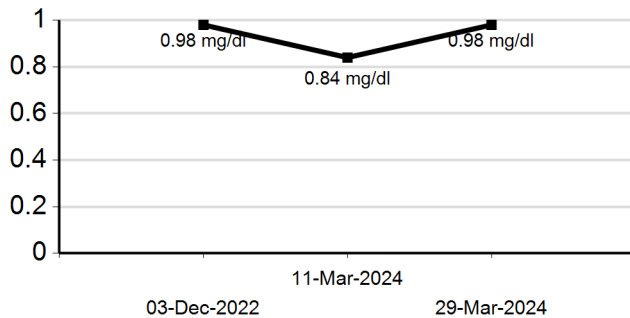
BLOOD UREA



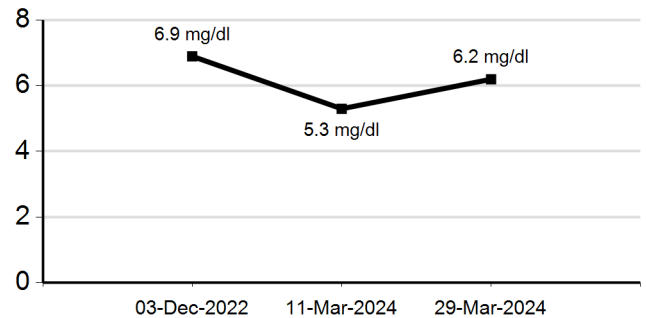
BUN



CREATININE



URIC ACID

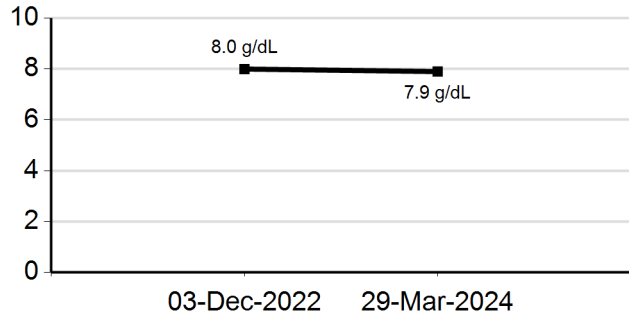




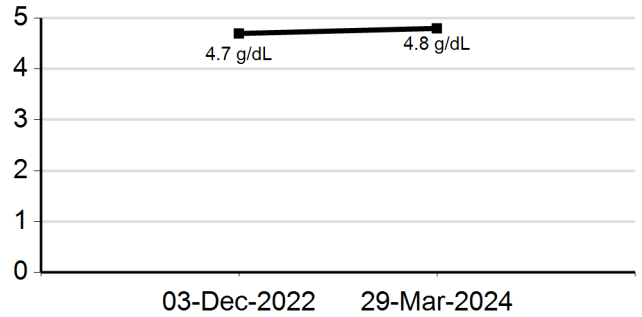
Use a QR Code Scanner
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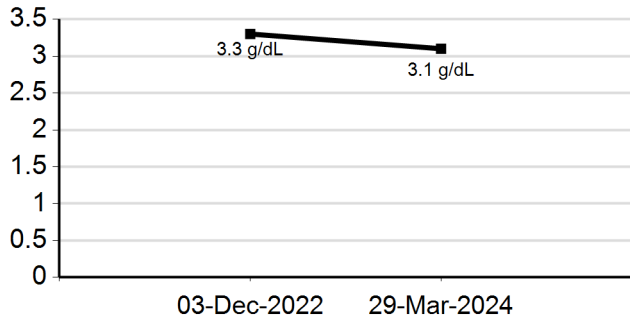
TOTAL PROTEINS



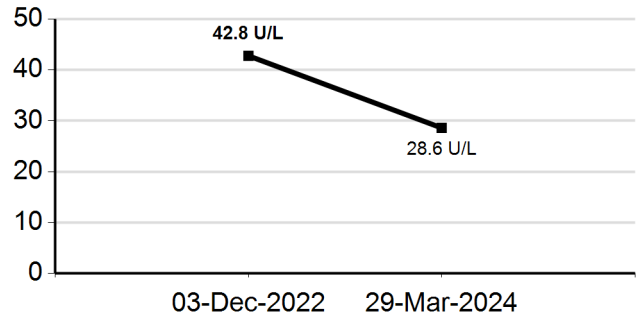
ALBUMIN



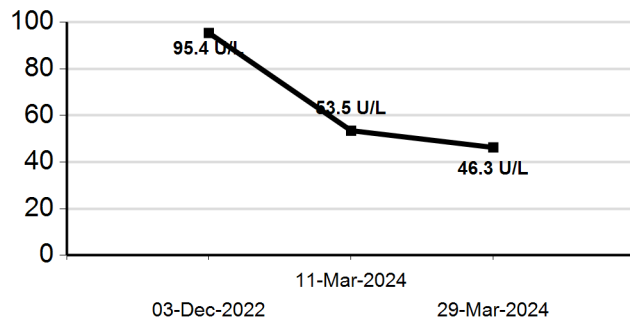
GLOBULIN



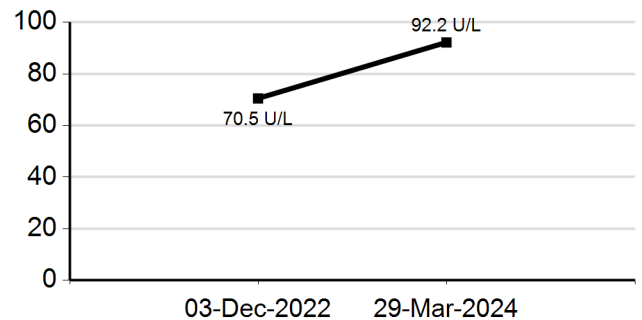
SGOT (AST)



SGPT (ALT)



ALKALINE PHOSPHATASE

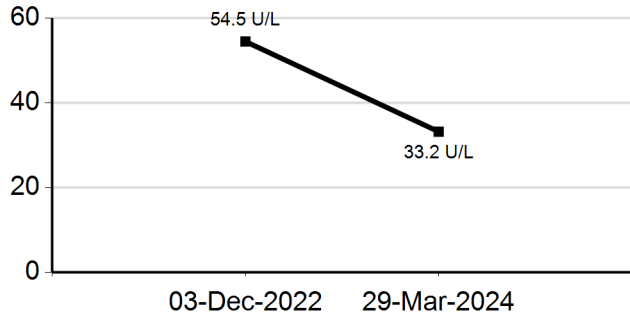




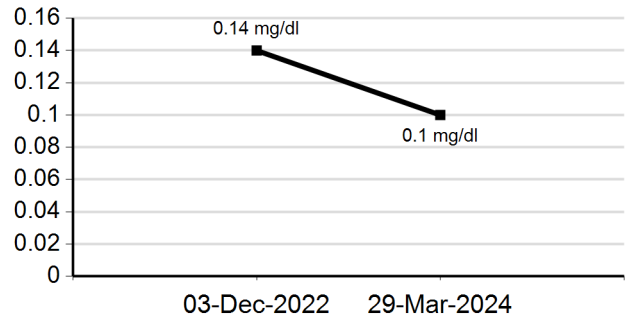
Use a QR Code Scanner
 Application To Scan the Code

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 Name : MR.MANOJ LAHU KALE
 Age / Gender : 38 Years / Male
 Consulting Dr. : -
 Reg. Location : Bhayander East (Main Centre)

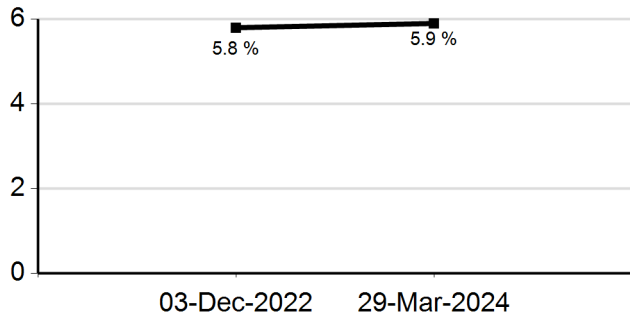
GAMMA GT



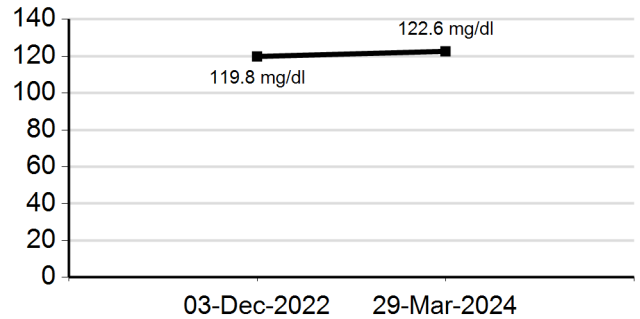
BILIRUBIN (DIRECT)



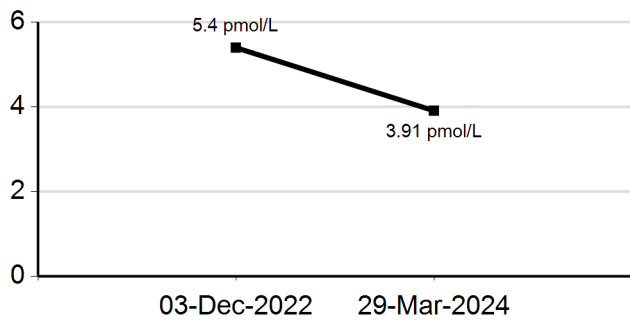
Glycosylated Hemoglobin (HbA1c)



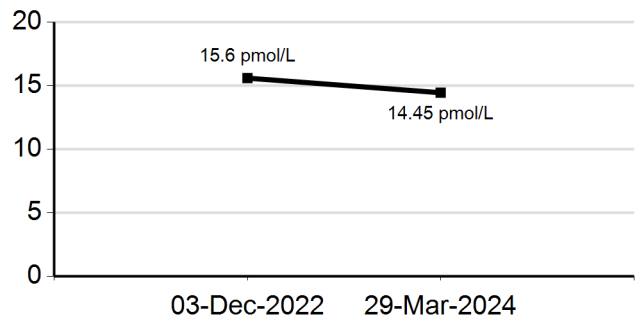
Estimated Average Glucose (eAG)



Free T3



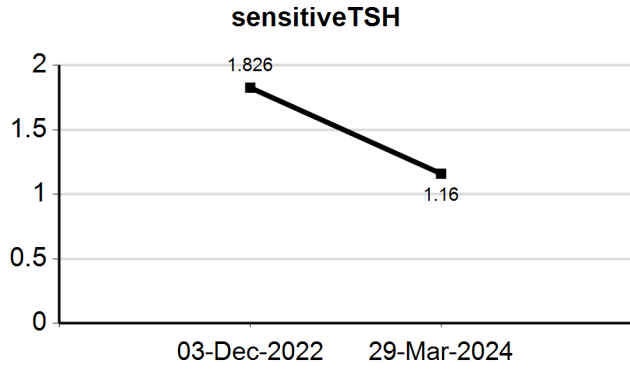
Free T4





Use a QR Code Scanner
Application To Scan the Code

CID : 2408913379
Name : MR.MANOJ LAHU KALE
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Bhayander East (Main Centre)



SUBURBAN DIAGNOSTICS - BHAYANDER EAST

Patient Name: MANOJ LAHU KALE
Patient ID: 2408913379

Date and Time: 29th Mar 24 10:28 AM

Age **38** NA NA
years months days

Gender **Male**

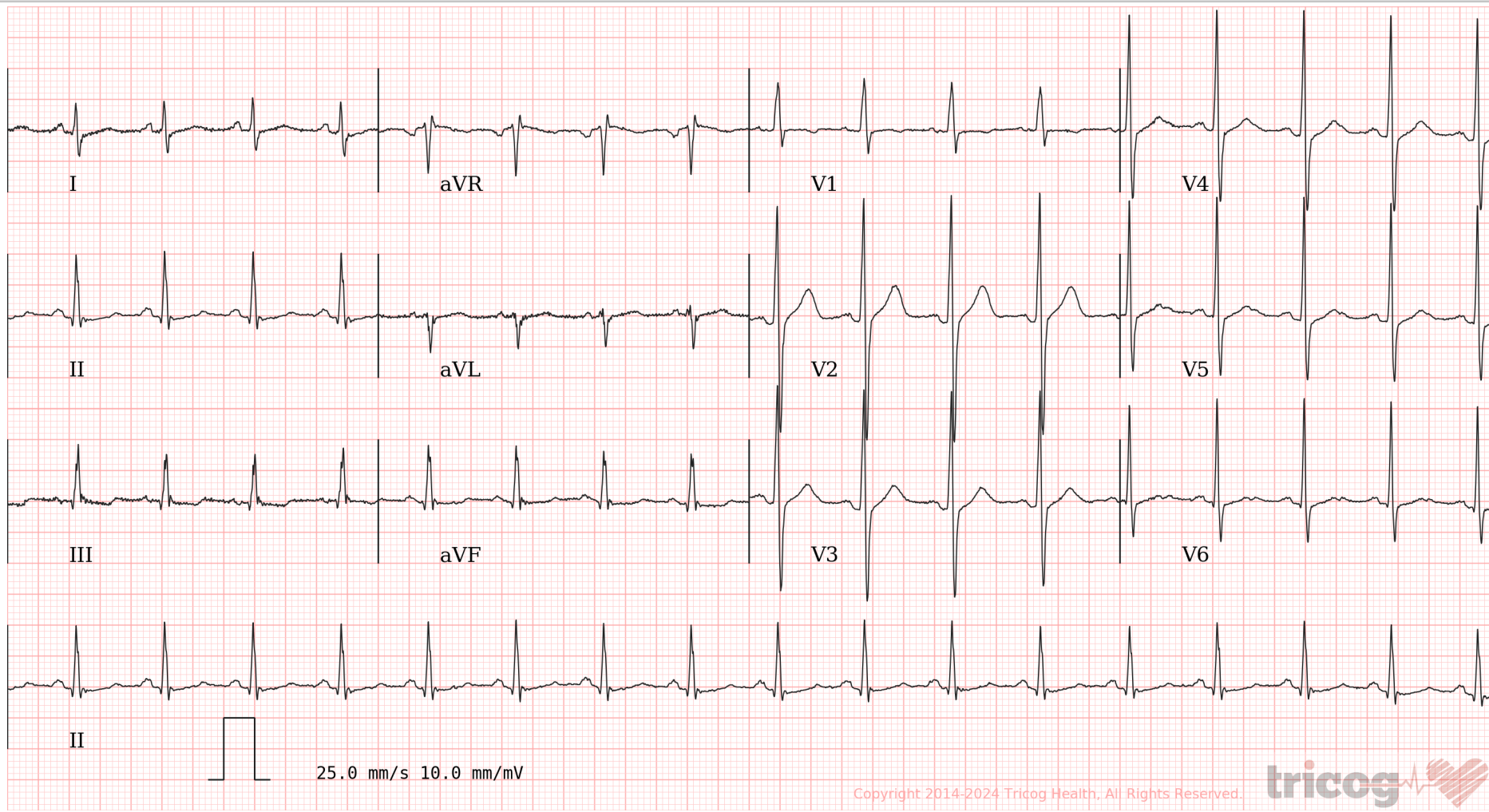
Heart Rate **106bpm**

Patient Vitals

BP: NA
Weight: NA
Height: NA
Pulse: NA
Spo2: NA
Resp: NA
Others: _____

Measurements

QRSD: 82ms
QT: 344ms
QTcB: 456ms
PR: 130ms
P-R-T: 31° 79° 13°



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ECG Within Normal Limits: Sinus tachycardia, Normal axis. No significant ST-T changes. Please correlate clinically.

REPORTED BY

Dr. Smita Valani
MBBS, D. Cardiology
2011/03/0587

QID# : 2408013079
Name : MR. MANOJ LAHU KALE

Age / Gender : 38 Years/Male

Consulting Dr. :

Collected : 29-Mar-2024 / 09:39

Reg.Location : Bhayander East (Main Centre)

Reported : 29-Mar-2024 / 15:16

PHYSICAL EXAMINATION REPORT

History and Complaints:

No Complaint

EXAMINATION FINDINGS:

Height (cms):	172	Weight (kg):	71
Temp (0c):	Afebrile	Skin:	NAD
Blood Pressure (mm/hg):	110/80	Nails:	NAD
Pulse:	76/min	Lymph Node:	Not Palpable

Systems

Cardiovascular: S1S2-Normal

Respiratory: Chest-Clear

Genitourinary: NAD

GI System: NAD

CNS: NAD

IMPRESSION:

*Lipid Profile - Borderline.
CBC, Biochemistry, CXR, all WNL
USG is Sto. GI - II fatty liver.*

ADVICE:

*and B/L Renal calculi.
Adv: - Expert consultation.*

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 |

Age / Gender : 38 Years/Male

Consulting Dr. :

Collected : 29-Mar-2024 / 09:39

Reg.Location : Bhayander East (Main Centre)

Reported : 29-Mar-2024 / 15:16

- | | |
|--|----|
| 8) Thyroid/ Endocrine disorders | No |
| 9) Nervous disorders | No |
| 10) GI system | No |
| 11) Genital urinary disorder | |
| 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 | No |
| 2) Smoking | No |
| 3) Diet | Mixed |
| 4) Medication | Yes |

*** End Of Report ***

Anita

DR. ANITA CHAUDHARY
CONSULTANT PHYSICIAN
Reg. No. 201711215553

SUBURBAN DIAGNOSTICS (I) PVT. LTD.
Shop No. 9, 101 to 105, Skyline Wealth Space Building,
Above Mercedes Showroom, Andheri West, Mumbai - 400053.
Mira - Bhayander East (E),
Dist. Thane - 401 105.
Phone.: 022 - 61700000



भारत सरकार
GOVERNMENT OF INDIA

Downloaded Date: 30/11/2019



मनोज लहु कळे
Manoj Lahu Kale
जन्म तारीख / DOB: 16/07/1985
पुरुष / MALE
Mobile No.: 9970910294
3884 7961 3360
VID : 9118 1232 8943 0101

Download Date: 30/11/2019

माझे आधार, माझी ओळख

[Handwritten signature]

DR.

C.

MAN
9970910294

Date:- 29/3/24
 Name:- Manoj Kale

CID: 24089/3339
 Sex / Age: 30/M

EYE CHECK UP

Chief complaints: }
 Systemic Diseases: } NO
 Past history: }

	RE	LE
Unaided Vision:	6/6	6/6
Aided Vision:	N/G	N/G

Refraction:

	(Right Eye)				(Left Eye)			
	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / Abnormal

Remark:

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.
 Shop No. 9, 101 to 105, Skyline Wealth Space Building, Near Dmart, Premier Road, Vidyavihar West, Mumbai - 400086.
 Phone: 022-61700000

SUBURBAN DIAGNOSTICS BHAYANDER

EMail:

12347452 (2408913379) / MANOJ LAHU KALE / 38 Yrs / M / 172 Cms / 71 Kg
 Date: 29 / 03 / 2024 10:10:27 AM

Report

ACIPL

Stage	Time	Duration	Speed(mph)	Elevation	METS	Rate	%THR	BP	RPP	PVC	Comments
Supine	00:05	0:05	00.0	00.0	01.0	065	36%	110/80	071	00	
Standing	00:08	0:03	00.0	00.0	01.0	065	36%	110/80	071	00	
HV	00:11	0:03	01.7	10.0	01.1	070	38%	110/80	077	00	
ExStart	00:13	0:02	01.7	10.0	01.1	070	38%	110/80	077	00	
BRUCE Stage 1	03:13	3:00	01.7	10.0	04.7	146	80%	120/80	175	00	
BRUCE Stage 2	06:13	3:00	02.5	12.0	07.1	168	92%	130/80	218	00	
PeakEx	07:13	1:00	03.4	14.0	08.2	178	98%	130/80	231	00	
Recovery	08:13	1:00	01.1	00.0	01.1	167	92%	150/80	250	00	
Recovery	09:13	2:00	00.0	00.0	01.0	139	76%	130/80	180	00	
Recovery	11:13	4:00	00.0	00.0	01.0	116	64%	120/80	139	00	
Recovery	11:19	4:07	00.0	00.0	01.0	112	62%	120/80	134	00	

FINDINGS :

Exercise Time : 07:00
 Initial HR (ExStrt) : 70 bpm 38% of Target 182
 Initial BP (ExStrt) : 110/80 (mm/Hg)
 Max Workload Attained : 8.2 Fair response to induced stress
 Max ST Dep Lead & Avg ST Value : III & -1.3 mm in PeakEx
 Duke Treadmill Score : 07.2
 Test End Reasons : Test Complete

Max HR Attained 178 bpm 98% of Target 182
 Max BP Attained 150/80 (mm/Hg)

SUBURBAN DIAGNOSTICS BHAYANDER

Shop No. 10, Suburban Diagnostics Bhayander, Dist. Thane - 401 105.

Address : Suburban Diagnostics Bhayander, Dist. Thane - 401 105.
 Phone : 022 - 61700000

Dist. Thane - 401 105.
 Phone : 022 - 61700000

DR. SMITA VALANI
 M.D. CARDIOLOGY

DR. SMITA VALANI
 M.D. CARDIOLOGY
 2011/03/0587

Doctor : DR. SMITA VALANI

EMail: 1234/452 / MANOJ LAHU KALE / 38 Yrs / M / 172 Cms / 71 Kg Date: 29 / 03 / 2024 10:10:27 AM

REPORT :

REASON FOR TERMINATION	TARGET HR ACHIEVED
EXERCISE TOLERANCE	GOOD EFFORT TOLERANCE
EXERCISE INDUCED ARRHYTHMIAS	NO ANGINA AND ANGINA WQUIVALENT
HAEMODYNAMIC RESPONSE	NO SIGNIFICANT ST-T CHANGES DURING EXERCISE AND RECOVERY
CHRONOTROPIC RESPONSE	GOOD INOTROPIC RESPONSE
FINAL IMPRESSION	EXAGGERATED CHRONOTROPIC RESPONSE
	NEGATIVE FOR STRESS INDUCIBLE ISCHEMIA AT THIS WORKLOAD

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Mirra - Contact: 022-61700000 (E), 022-61700000 (M)

Dist. Head - 501 103.

Phone.: 022 - 61700000

7990120/11/02

DR. SMITA VALANI
MBBS, DNB (CARDIOLOGY)

Doctor : DR. SMITA VALANI

SUBURBAN DIAGNOSTICS BHAYANDER

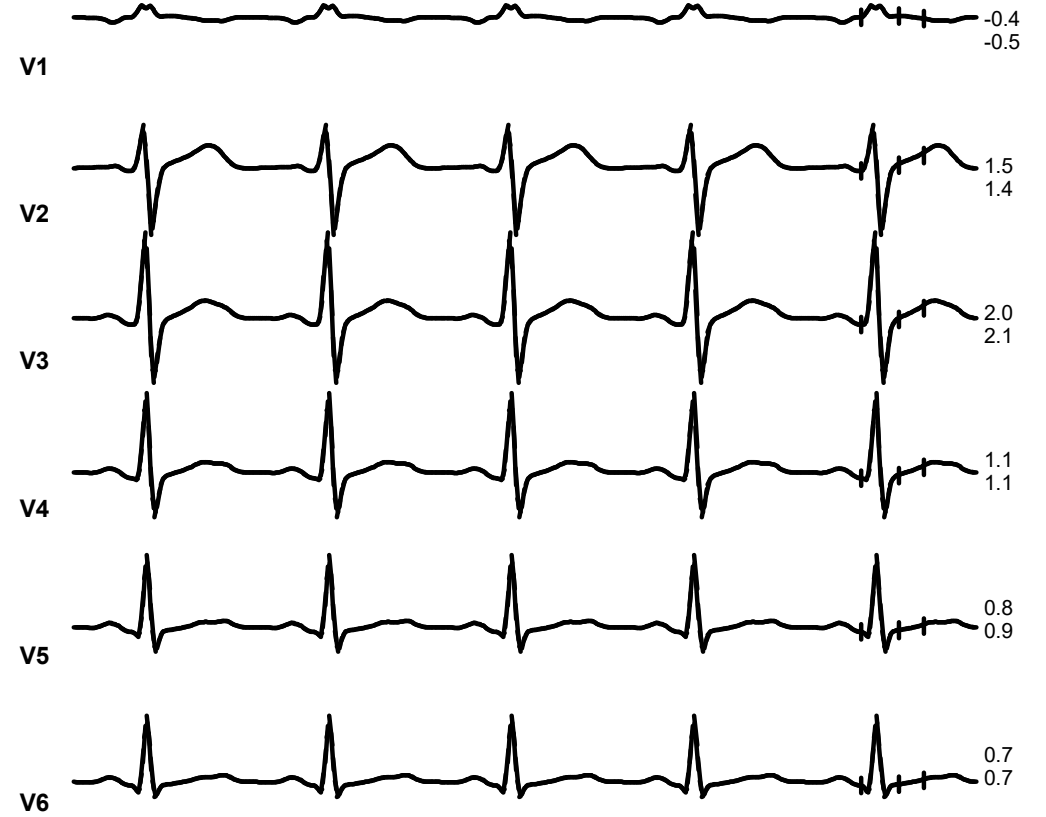
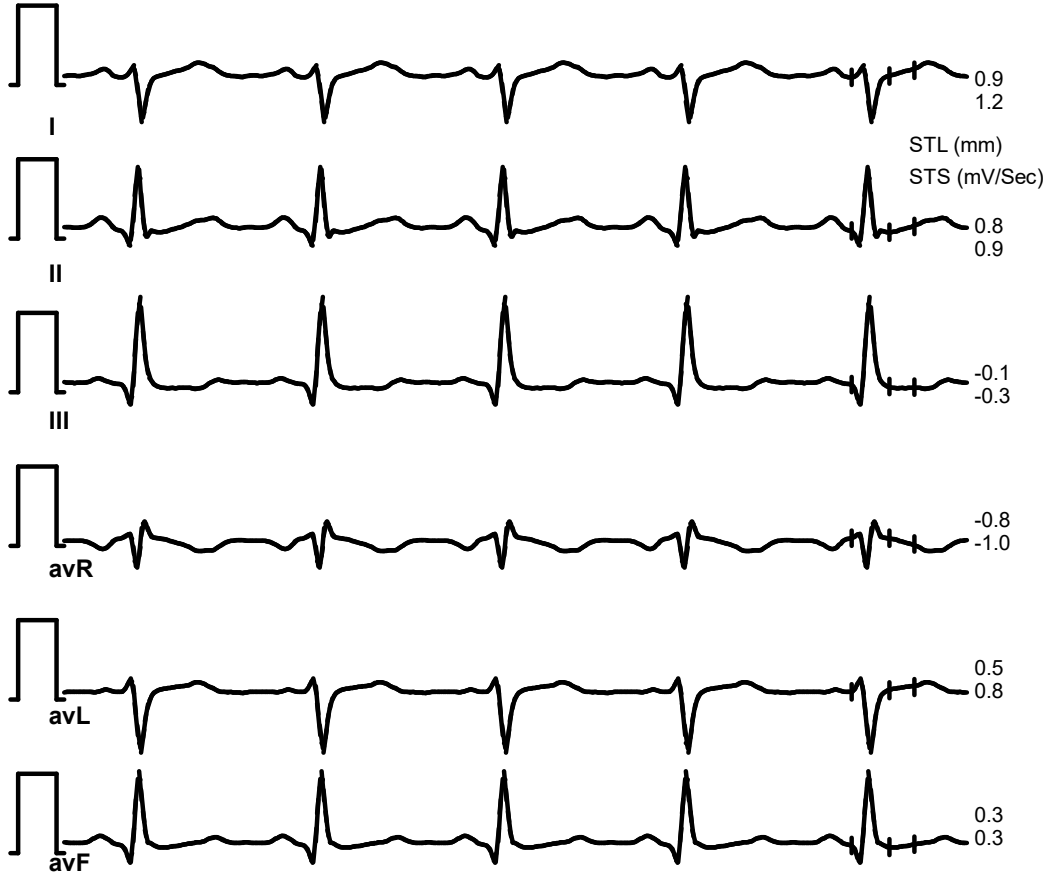
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE:Supine(0:06)



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.0 HR : 65 Target HR : 36% of 182 BP : 110/80 Post J @80mSec

ExTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

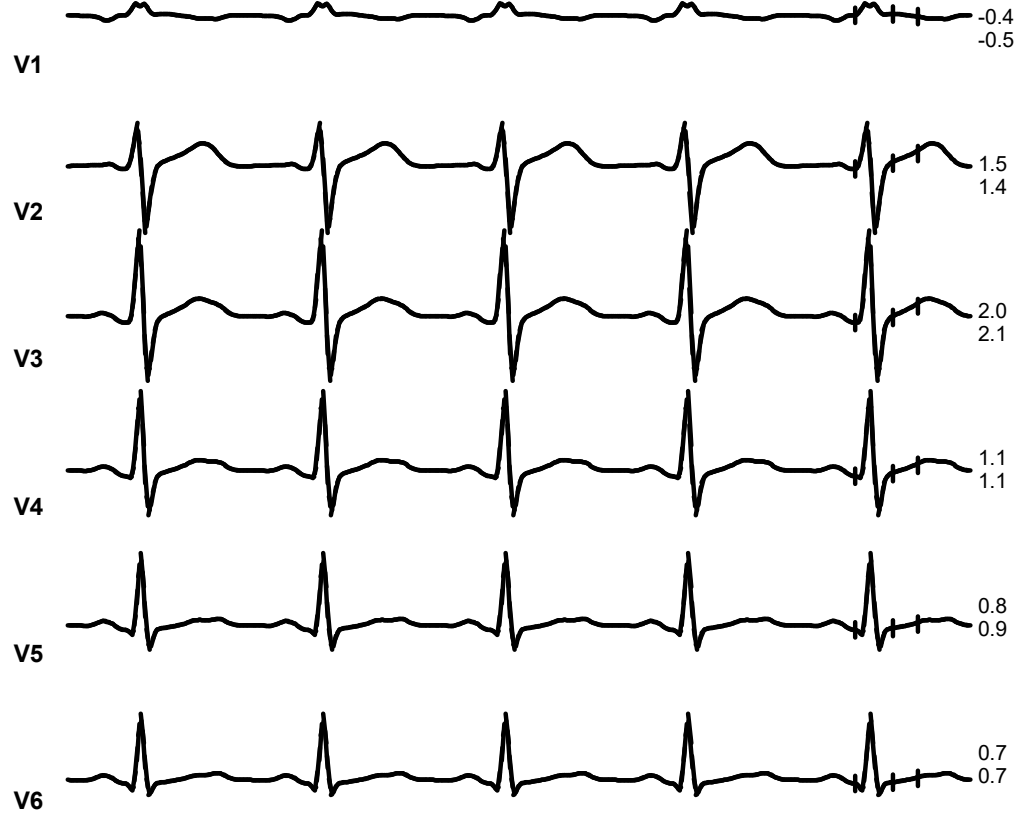
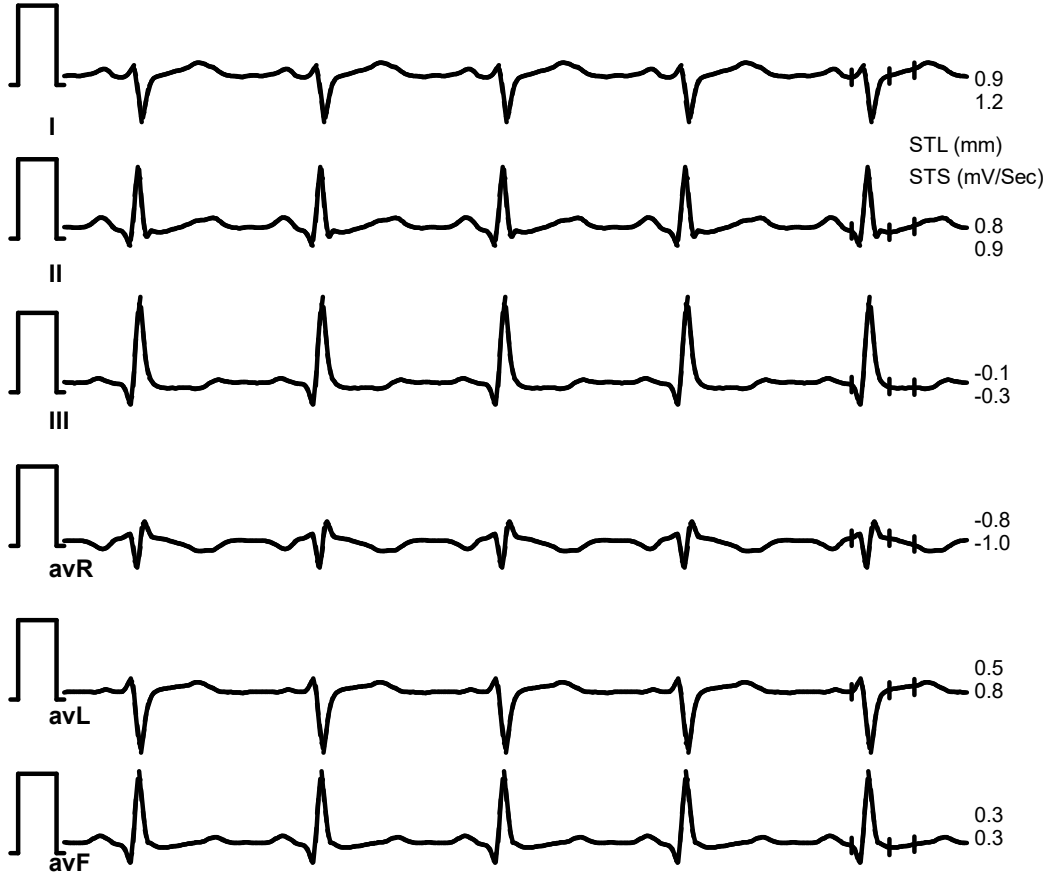
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE:Standing(0:05)



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.0 HR : 65 Target HR : 36% of 182 BP : 110/80 Post J @80mSec

ExTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

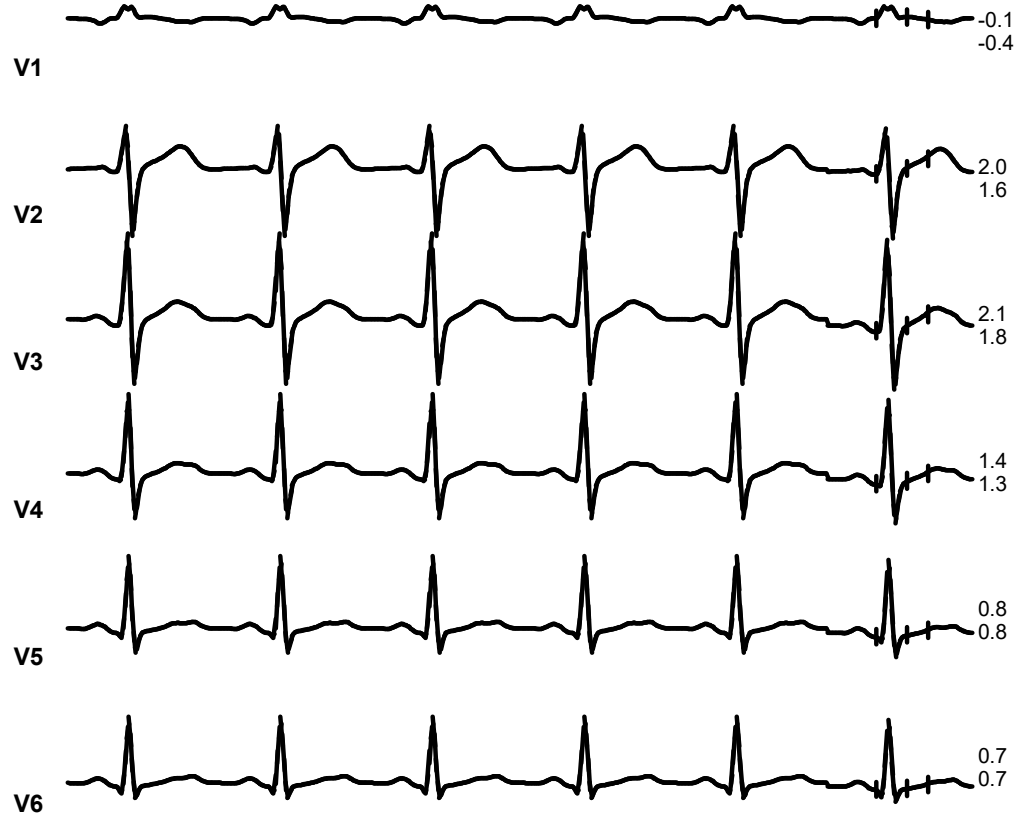
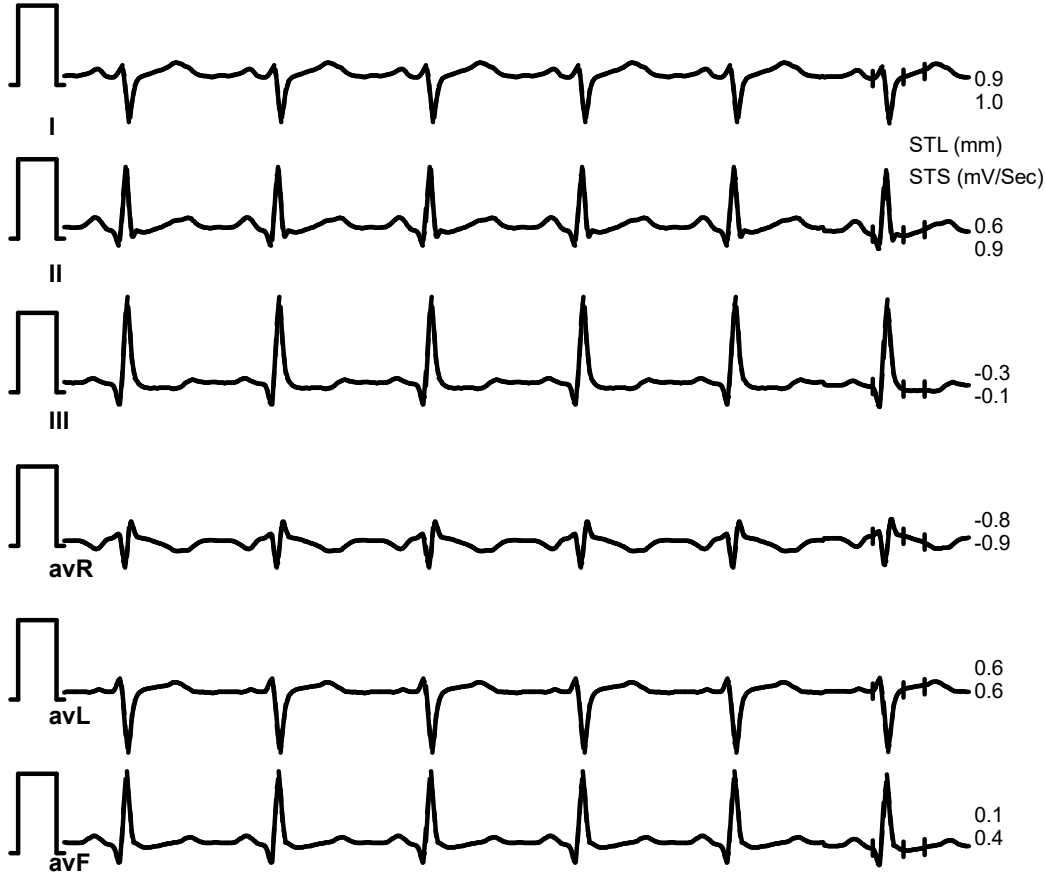
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE:HV(0:05)



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.1 HR : 70 Target HR : 38% of 182 BP : 110/80 Post J @80mSec

ExTime: 00:00 Speed: 1.7 mph Grade : 10.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

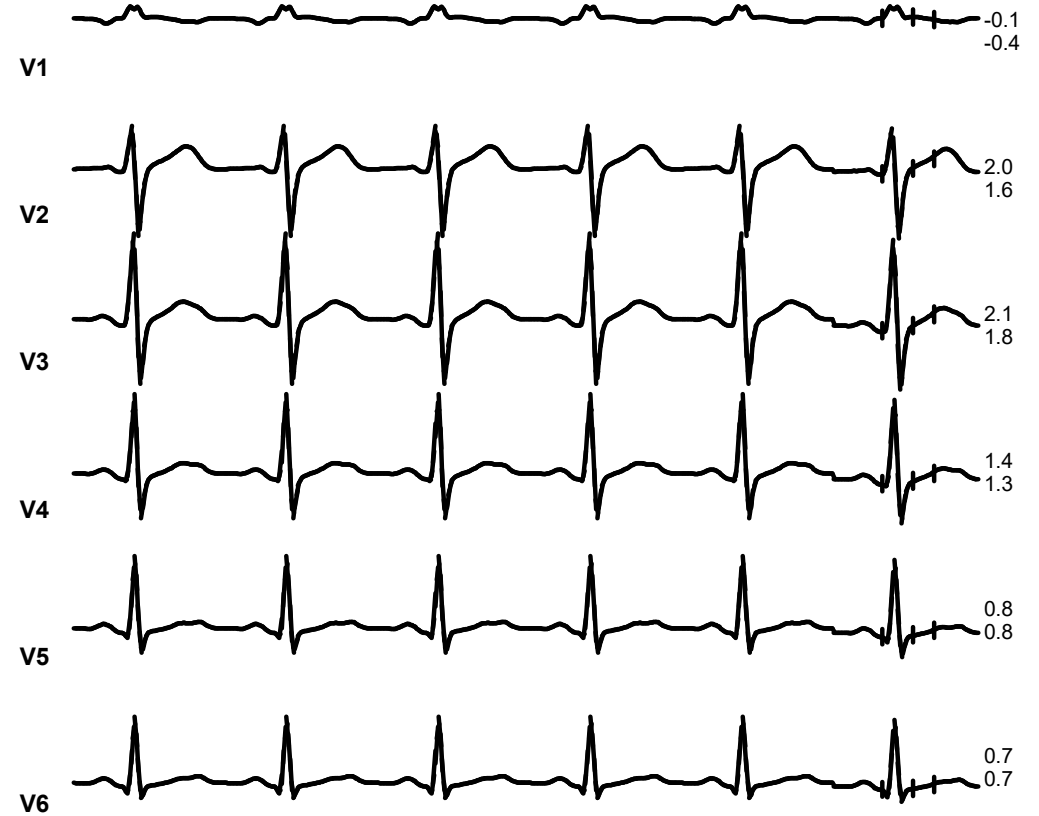
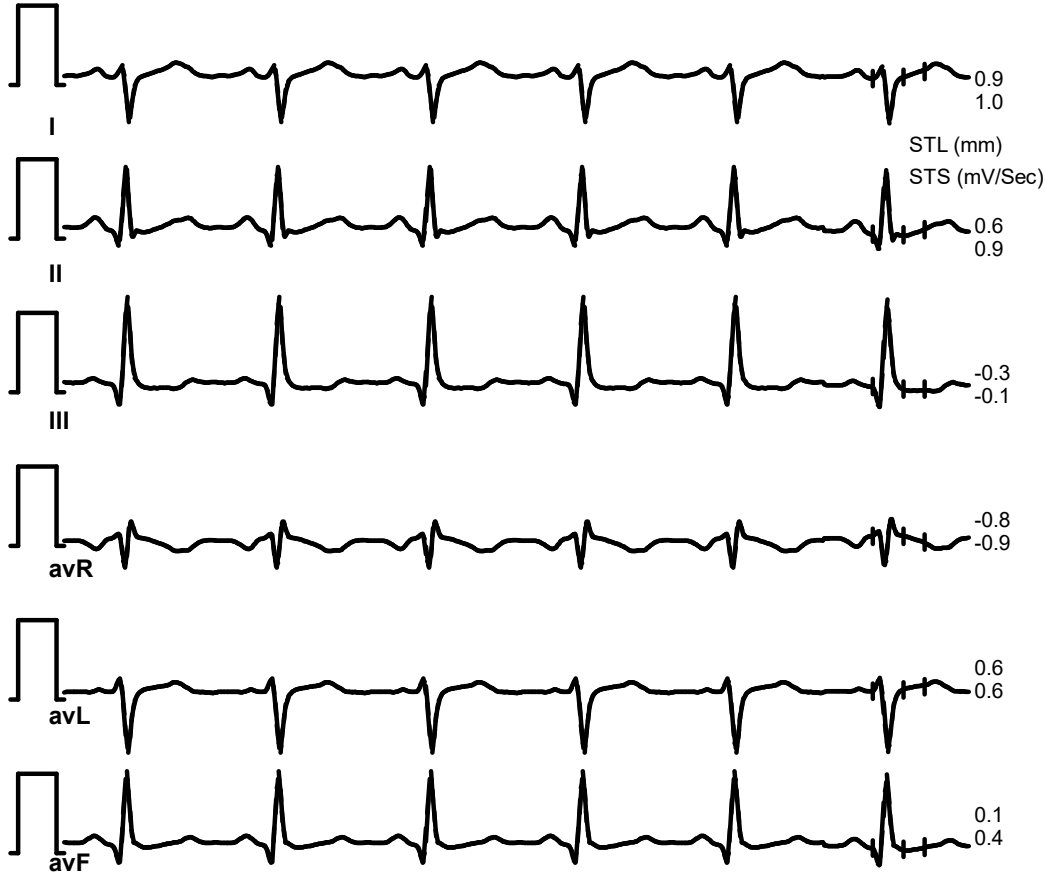
6X2 Combine Medians + 1 Rhythm

ExStart



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.1 HR : 70 Target HR : 38% of 182 BP : 110/80 Post J @80mSec

ExTime: 00:00 Speed: 1.7 mph Grade : 10.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

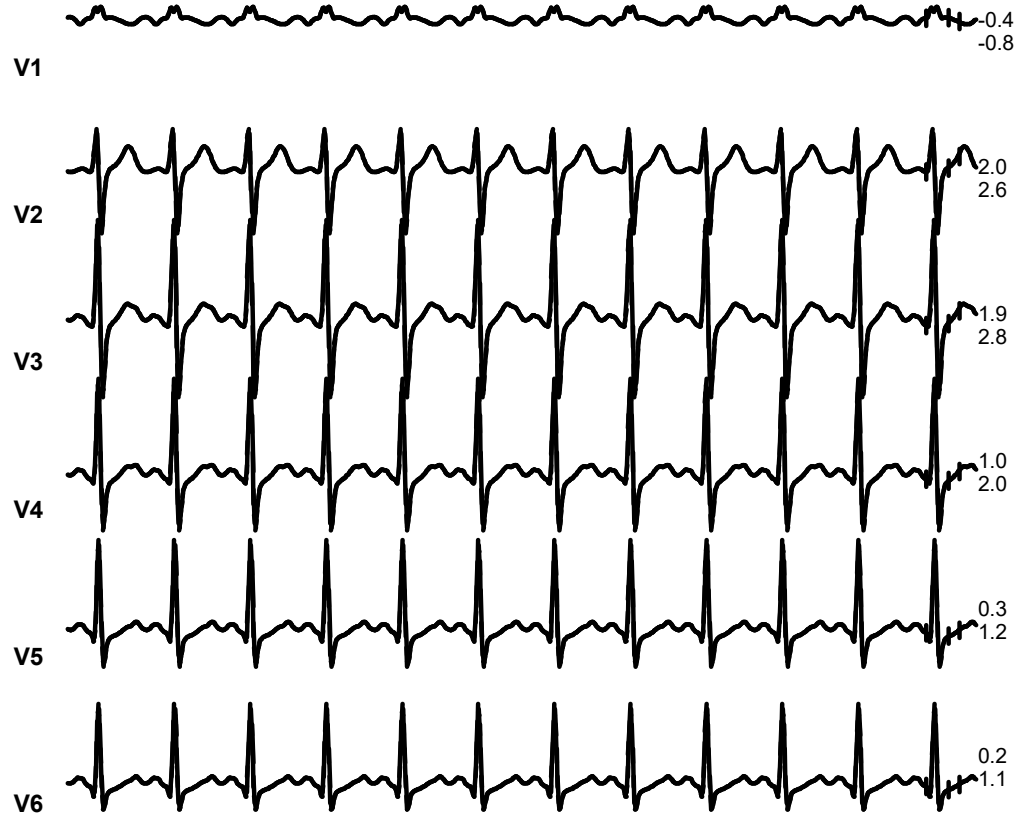
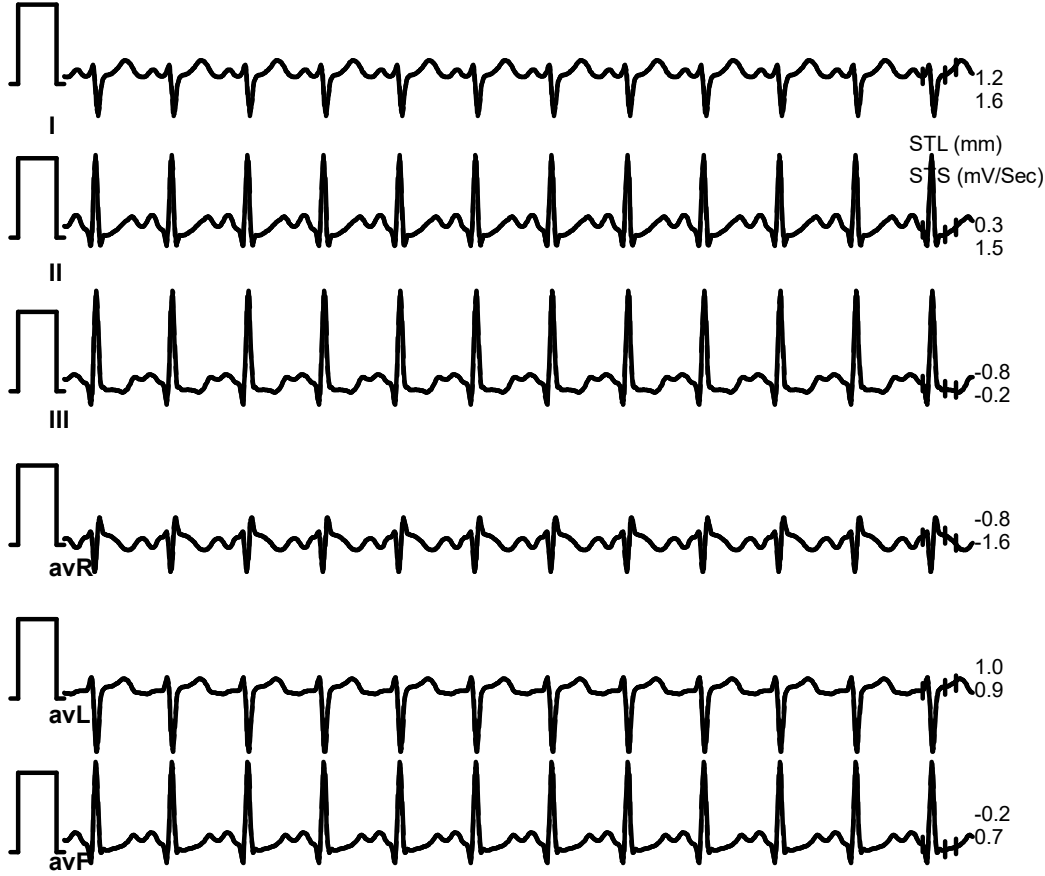
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE:Stage 1(3:00)



Date: 29 / 03 / 2024 10:10:27 AM METs : 4.7 HR : 146 Target HR : 80% of 182 BP : 120/80 Post J @60mSec

ExTime: 03:00 Speed: 1.7 mph Grade : 10.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

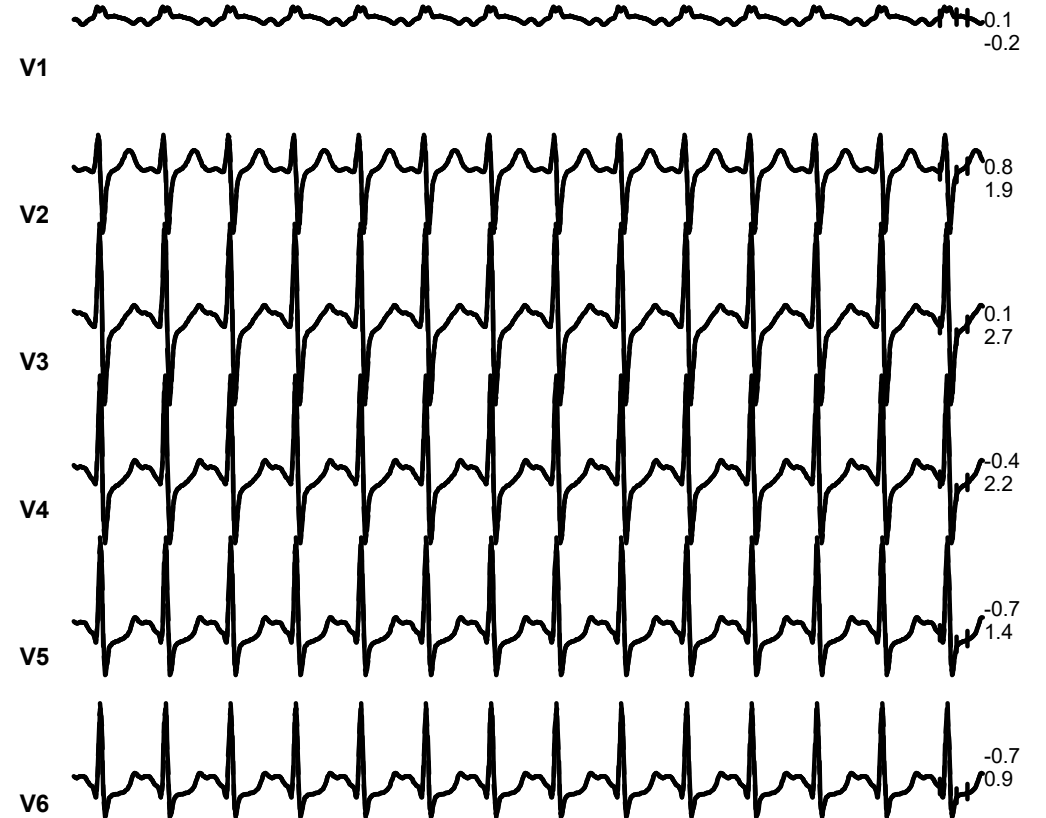
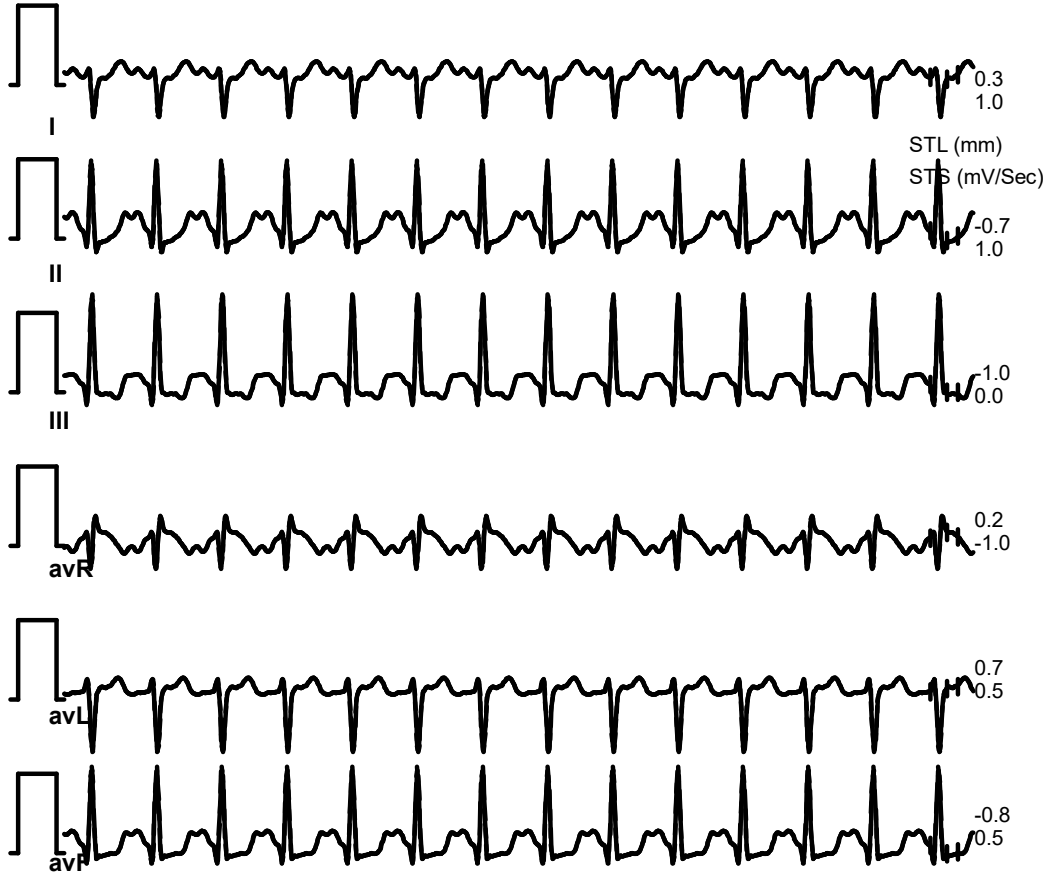
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE:Stage 2(3:00)



Date: 29 / 03 / 2024 10:10:27 AM METs : 7.1 HR : 168 Target HR : 92% of 182 BP : 130/80 Post J @60mSec

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



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

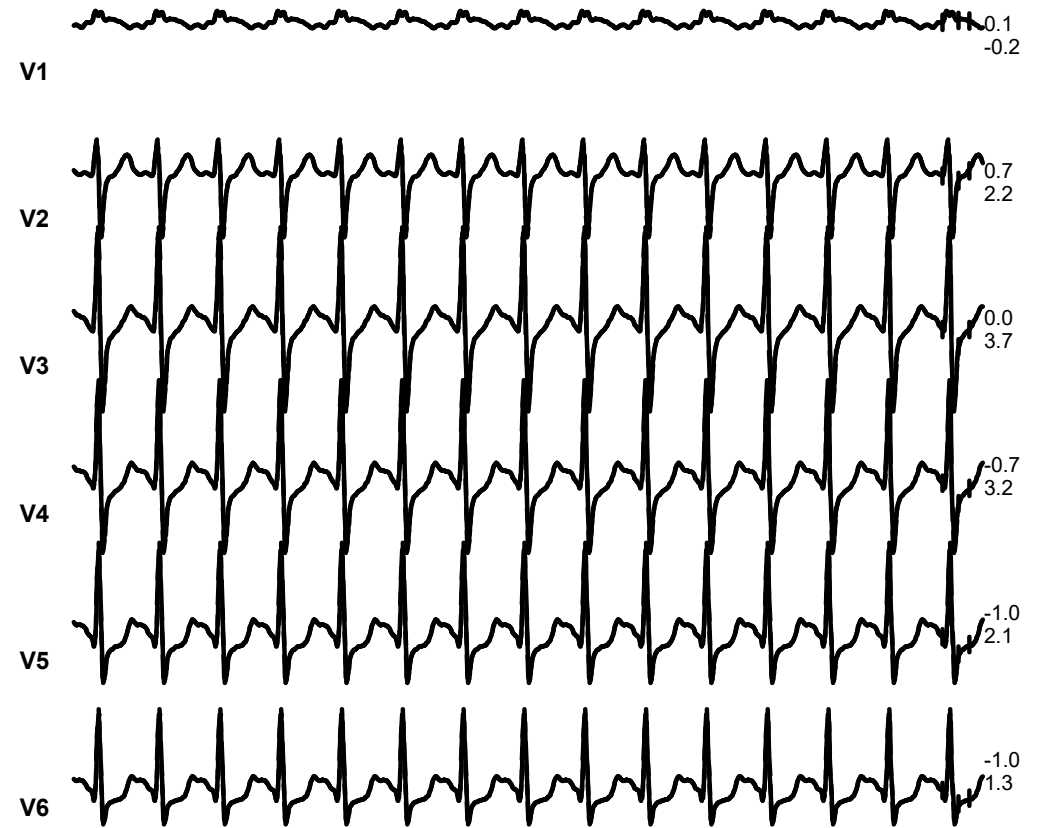
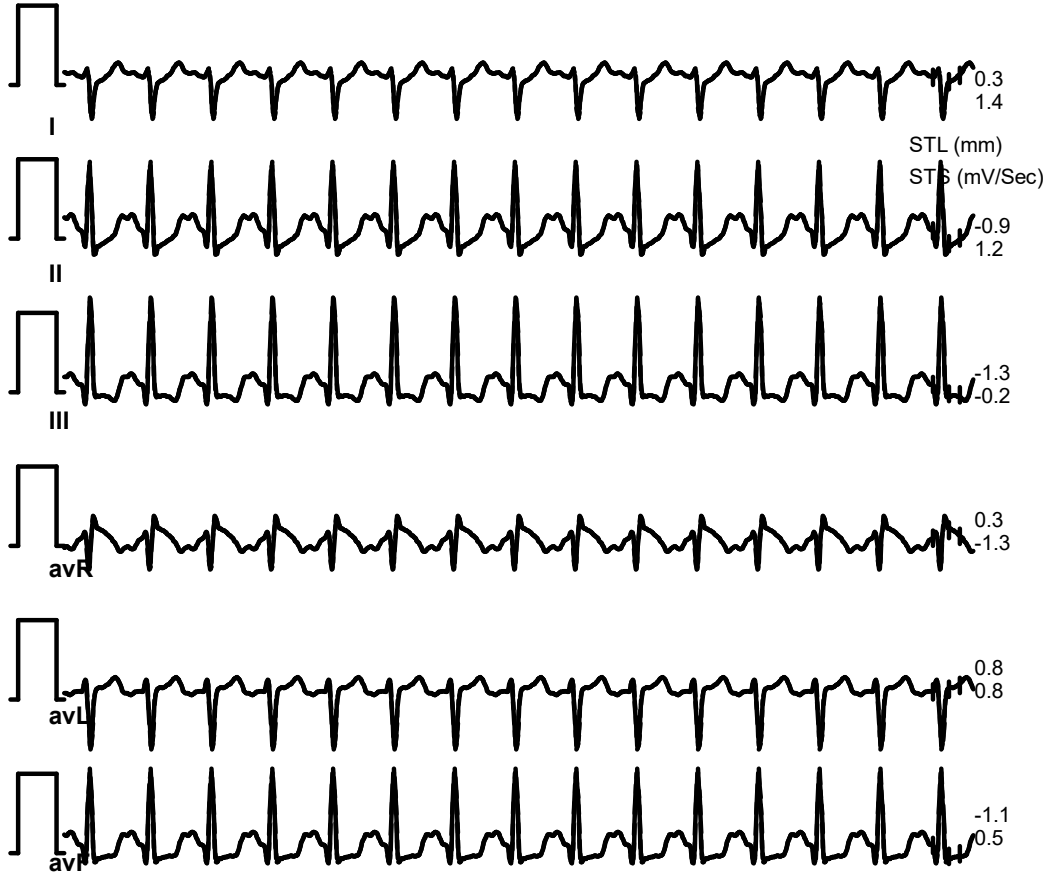
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm PeakEx



Date: 29 / 03 / 2024 10:10:27 AM METs : 8.2 HR : 178 Target HR : 98% of 182 BP : 130/80 Post J @60mSec

ExTime: 07:01 Speed: 3.4 mph Grade : 14.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

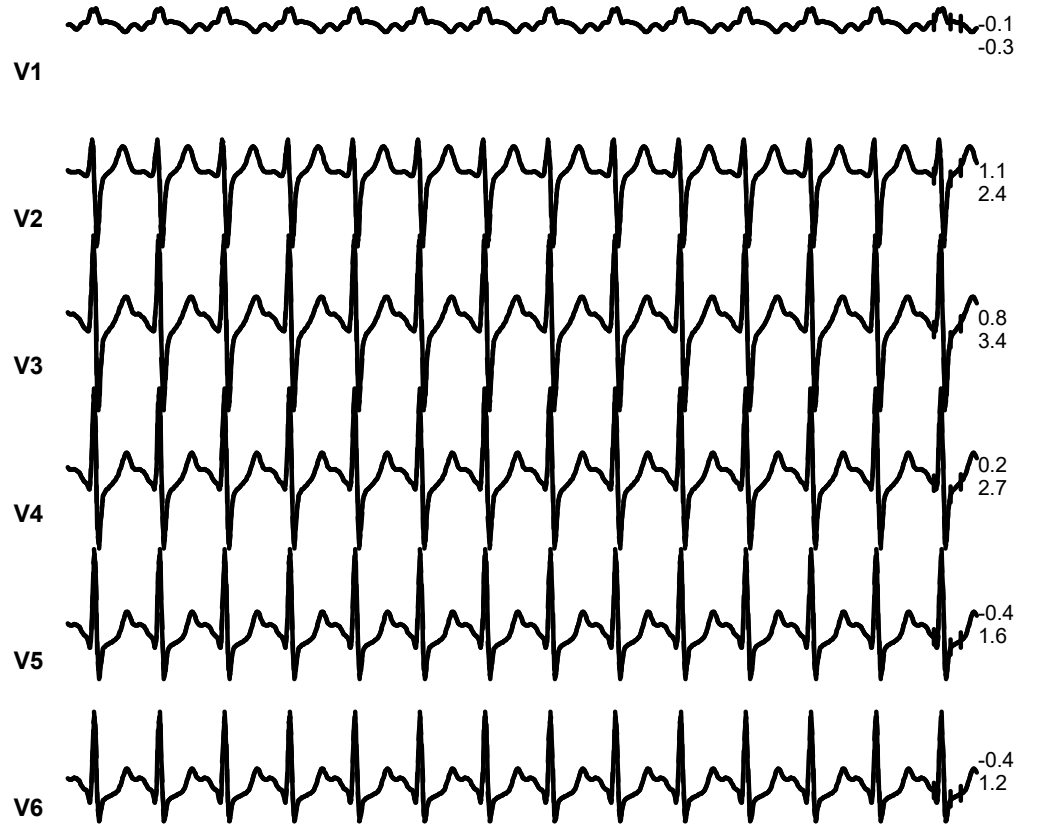
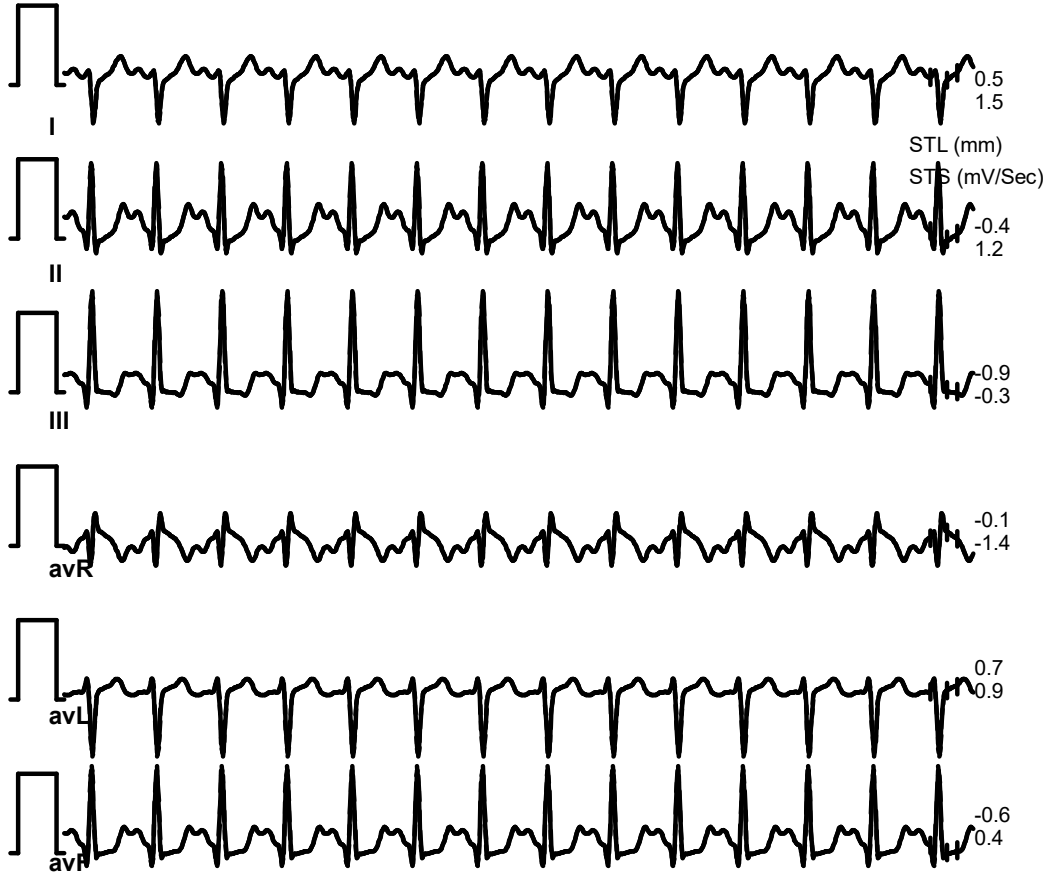
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

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



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.1 HR : 167 Target HR : 92% of 182 BP : 150/80 Post J @60mSec

ExTime: 07:00 Speed: 1.1 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

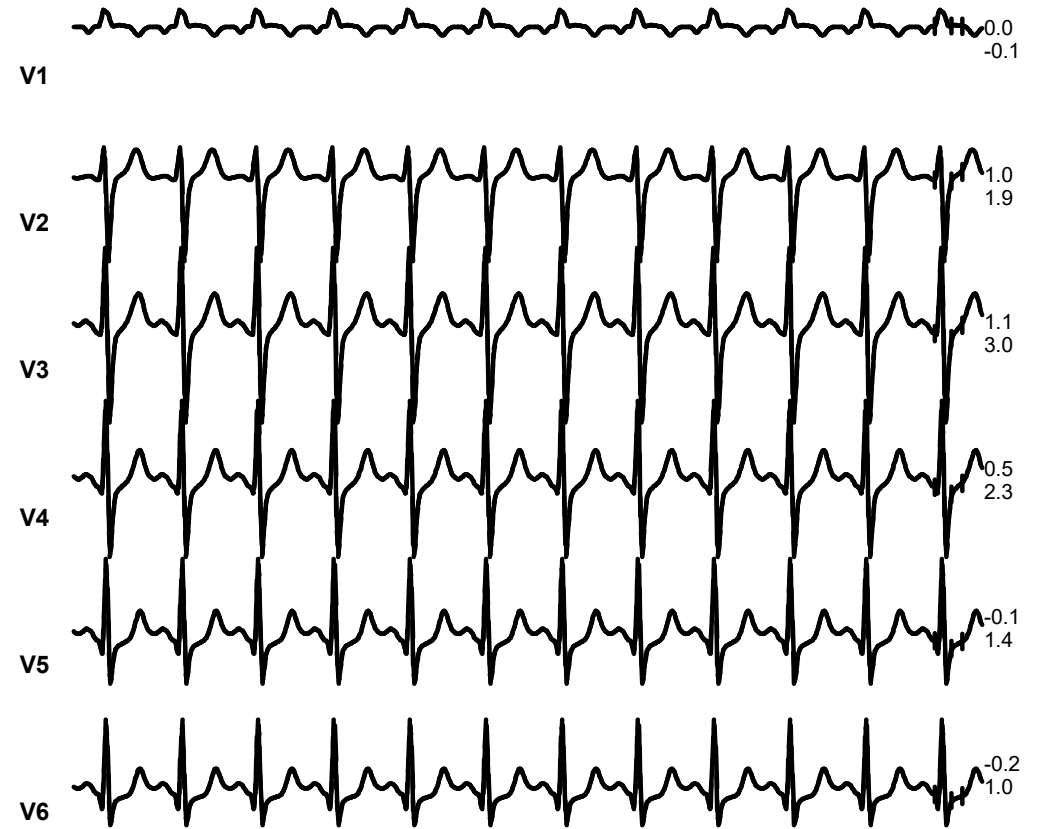
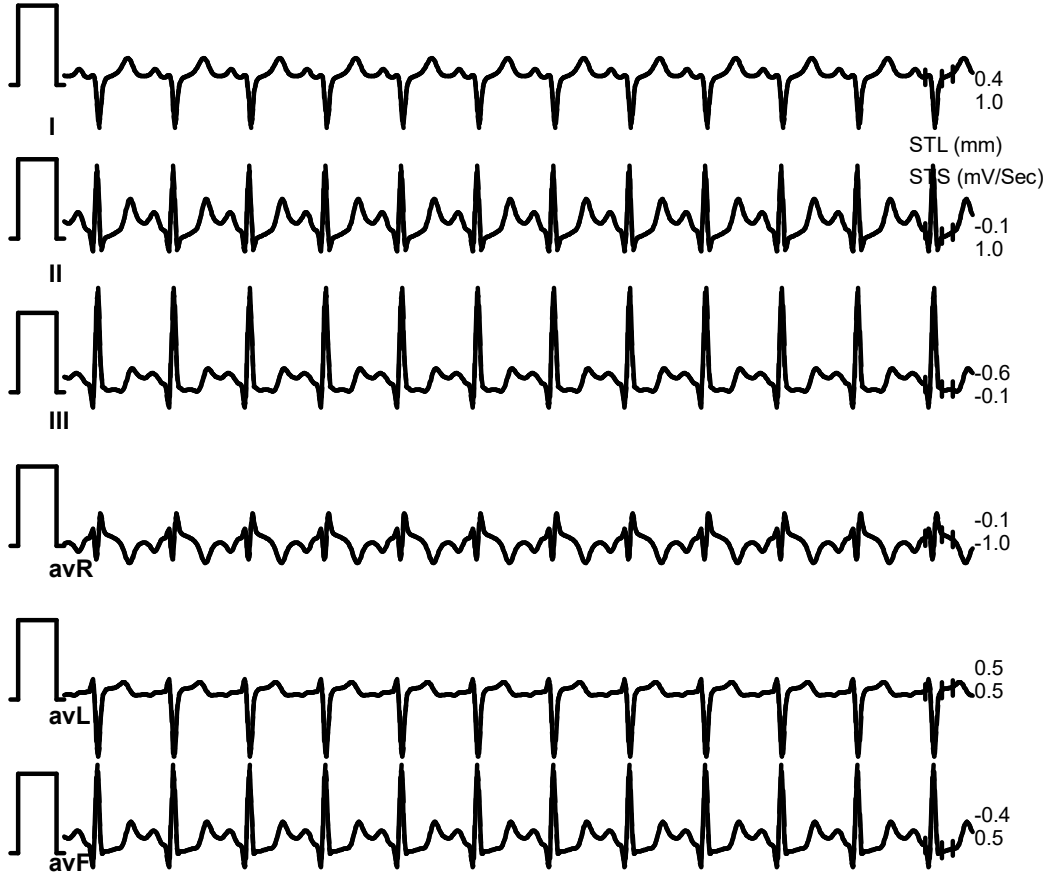
12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

6X2 Combine Medians + 1 Rhythm
Recovery(2:00)



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.0 HR : 139 Target HR : 76% of 182 BP : 130/80 Post J @60mSec

ExTime: 07:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

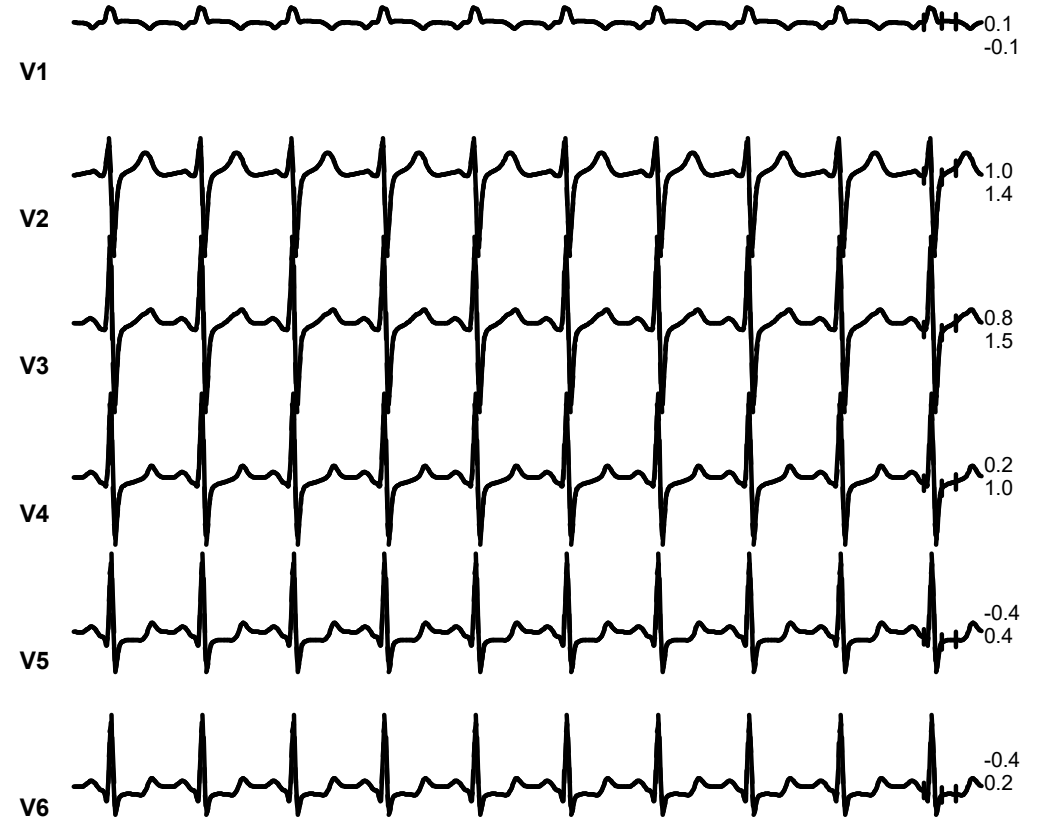
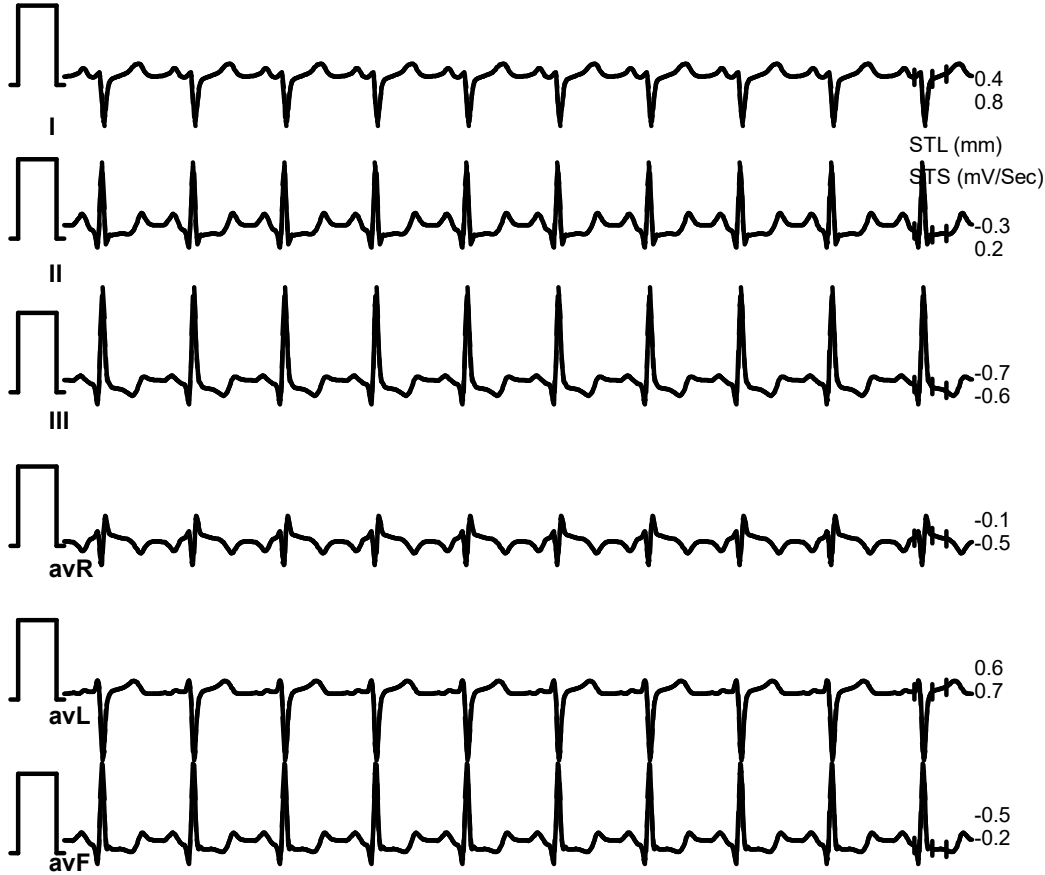
6X2 Combine Medians + 1 Rhythm

Recovery(4:00)



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.0 HR : 116 Target HR : 64% of 182 BP : 120/80 Post J @80mSec

ExTime: 07:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS BHAYANDER

12347452 / MANOJ LAHU KALE / 38 Yrs / Male / 172 Cm / 71 Kg

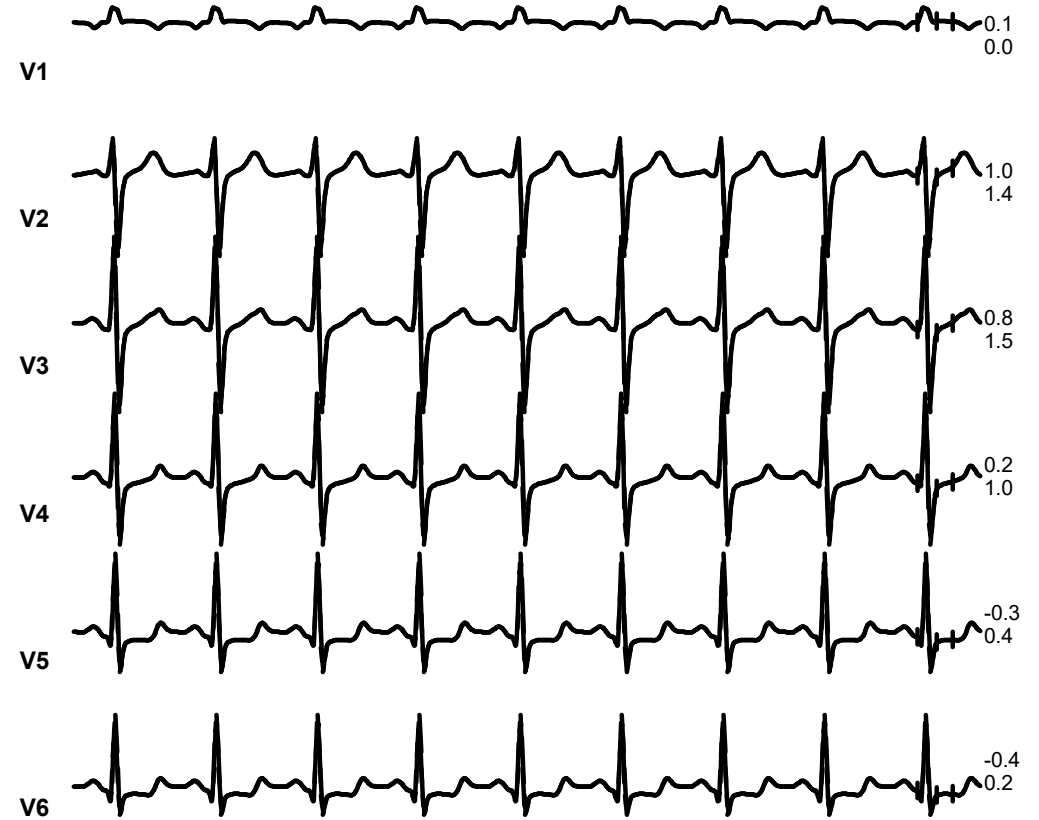
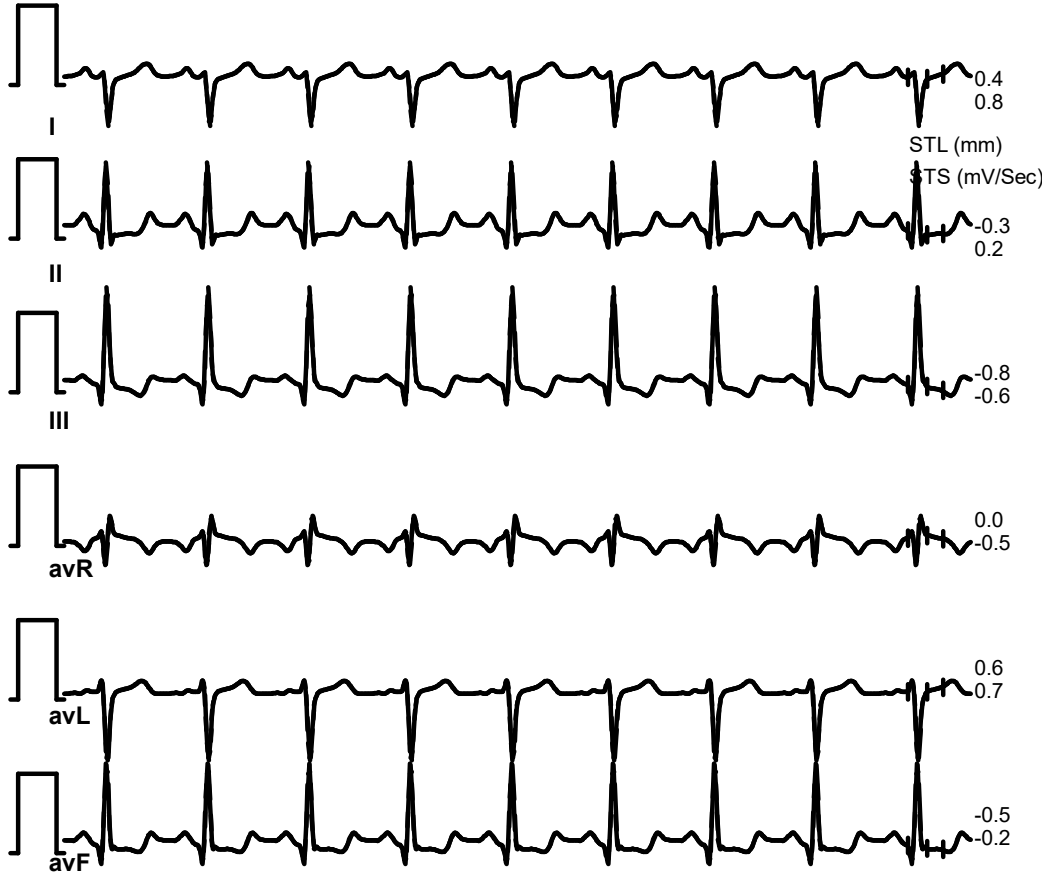
6X2 Combine Medians + 1 Rhythm

Recovery(4:07)



Date: 29 / 03 / 2024 10:10:27 AM METs : 1.0 HR : 112 Target HR : 62% of 182 BP : 120/80 Post J @80mSec

ExTime: 07:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)





CID : 2408913379
Name : Mr MANOJ LAHU KALE
Age / Sex : 38 Years/Male
Ref. Dr :
Reg. Location : Bhayander East Main Centre

Reg. Date : 29-Mar-2024
Reported : 29-Mar-2024/21:35

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (15.0 cm), normal in shape and shows smooth margins. **It shows raised parenchymal echotexture.** No obvious cystic or solid lesion made out in the parenchyma. The intra hepatic biliary and portal radicals appear normal. The main portal vein appears normal.(PV-9.1 mm)

GALL BLADDER:

The gall bladder is folded and physiologically distended. Neck region is not well visualised. Gall bladder wall appears normal. No evidence of any calculus, mass lesion or sludge seen in the visualised lumen.

COMMON BILE DUCT:

The visualized common bile duct is normal in caliber. Terminal common bile duct is obscured due to bowel gas artefacts.

PANCREAS:

The pancreas appears normal. No evidence of solid or cystic mass lesion seen.

KIDNEYS:

Right kidney measures 8.7 x 4.1 cm. Left kidney measures 9.0 x 4.7 cm. Both the kidneys are normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. Pelvicalyceal system is normal. **Evidence of 3.0 mm non obstructing calculus is seen at mid pole of right kidney and ~ 3.4 mm calculus seen in the mid pole of left kidney.** No evidence of any hydronephrosis or mass lesion seen on both sides.

SPLEEN:

The spleen is normal in size (11.0 cm) and echotexture. No evidence of focal lesion is noted.

URINARY BLADDER:

The urinary bladder is well distended and reveals no intraluminal abnormality. Bladder wall appears normal. No obvious calculus or mass lesion made out in the lumen.

PROSTATE:

The prostate is normal in size 2.9 x 2.8 x 2.1 cm and weighs 9.6 gms. It shows normal parenchymal echotexture. No obvious calcification or mass lesion made out.

There is no evidence of any lymphadenopathy or ascites.



Use a QR Code Scanner
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Reg. Date : 29-Mar-2024
Reported : 29-Mar-2024/21:35

IMPRESSION:

- **Grade II fatty infiltration of liver.**
- **Non-obstructive bilateral renal calculi.**

Kindly correlate clinically.

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

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

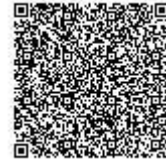
Dr. Aisha Lakhani
Mbbs, Md (Radio
Diagnosis)
Bhayander center



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X-RAY CHEST PA VIEW

Both the lung fields are clear with no active parenchymal lesion.

The cardiothoracic ratio is maintained and the cardiac outline is normal.

The domes of the diaphragm and hila are normal.

The cardio and costophrenic angles are clear.

Bony thorax is normal.

IMPRESSION:

- **No obvious active parenchymal lesion made out.**

Kindly correlate clinically.

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

Dr. Aisha Lakhani
Mbbs, Md (Radio
Diagnosis)
Bhayander center



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Name : Mr MANOJ LAHU KALE
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