Authenticity Check

Use a QR Code Scanner Application To Scan the Code

CID	: 2410422022		
Name	: MR.SARVESH SANKPAL		
Age / Gender	: 30 Years / Male		
Consulting Dr.	: -	**Collected**	: 13-Apr-2024 / 13:32
Reg. Location	: Borivali West (Main Centre)	**Reported**	: 13-Apr-2024 / 16:13

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

CBC (Complete Blood Count), Blood

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
RBC PARAMETERS			
Haemoglobin	14.6	13.0-17.0 g/dL	Spectrophotometric
RBC	4.85	4.5-5.5 mil/cmm	Elect. Impedance
PCV	43.6	40-50 %	Measured
MCV	90	80-100 fl	Calculated
MCH	30.1	27-32 pg	Calculated
MCHC	33.5	31.5-34.5 g/dL	Calculated
RDW	13.8	11.6-14.0 %	Calculated
WBC PARAMETERS			
WBC Total Count	6880	4000-10000 /cmm	Elect. Impedance
WBC DIFFERENTIAL AND ABSOLUTE COUNTS			
Lymphocytes	39.7	20-40 %	
Absolute Lymphocytes	2731.4	1000-3000 /cmm	Calculated
Monocytes	7.5	2-10 %	
Absolute Monocytes	516.0	200-1000 /cmm	Calculated
Neutrophils	51.0	40-80 %	
Absolute Neutrophils	3508.8	2000-7000 /cmm	Calculated
Eosinophils	1.1	1-6 %	
Absolute Eosinophils	75.7	20-500 /cmm	Calculated
Basophils	0.7	0.1-2 %	
Absolute Basophils	48.2	20-100 /cmm	Calculated
Immature Leukocytes	-		

WBC Differential Count by Absorbance & Impedance method/Microscopy.

PLATELET PARAMETERS			
Platelet Count	233000	150000-400000 /cmm	Elect. Impedance
MPV	10.1	6-11 fl	Calculated
PDW	**20.1**	11-18 %	Calculated
RBC MORPHOLOGY			
Hypochromia	-		
Microcytosis	-		

Authenticity Check

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CID	: 2410422022		
Name	: MR.SARVESH SANKPAL		
Age / Gender	: 30 Years / Male		
Consulting Dr.	: -	**Collected**	: 13-Apr-2024 / 13:32
Reg. Location	: Borivali West (Main Centre)	**Reported**	: 13-Apr-2024 / 16:02

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

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR	8	2-15 mm at 1 hr.	Sedimentation

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 ***

MC-6201

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

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

CID	: 2410422022		
Name	: MR.SARVESH SANKPAL		
Age / Gender	: 30 Years / Male		
Consulting Dr.	: -	**Collected**	: 13-Apr-2024 / 13:32
Reg. Location	: Borivali West (Main Centre)	**Reported**	: 13-Apr-2024 / 16:56

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	88.5	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	137.0	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	1.13	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	**0.36**	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.77	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.3	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.8	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.5	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.9	1 - 2	Calculated
SGOT (AST), Serum	25.2	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	35.9	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	27.4	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	107.1	40-130 U/L	Colorimetric
BLOOD UREA, Serum	17.0	12.8-42.8 mg/dl	Kinetic
BUN, Serum	7.9	6-20 mg/dl	Calculated
CREATININE, Serum	0.69	0.67-1.17 mg/dl	Enzymatic

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

CID	: 2410422022		
Name	: MR.SARVESH SANKPAL		
Age / Gender	: 30 Years / Male		
Consulting Dr.	: -	**Collected**	: 13-Apr-2024 / 13:32
Reg. Location	: Borivali West (Main Centre)	**Reported**	: 13-Apr-2024 / 20:06

eGFR, Serum	128	(ml/min/1.73sqm) 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	Calculated

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

URIC ACID, Serum	6.6	3.5-7.2 mg/dl	Enzymatic
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 ***

MC-6201

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

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

CID	: 2410422022		
Name	: MR.SARVESH SANKPAL		
Age / Gender	: 30 Years / Male		
Consulting Dr.	: -	**Collected**	: 13-Apr-2024 / 13:32
Reg. Location	: Borivali West (Main Centre)	**Reported**	: 13-Apr-2024 / 16:13

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.4	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	108.3	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 ***

MC-6201

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

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

CID	: 2410422022		
Name	: MR.SARVESH SANKPAL		
Age / Gender	: 30 Years / Male		
Consulting Dr.	: -	**Collected**	: 13-Apr-2024 / 13:32
Reg. Location	: Borivali West (Main Centre)	**Reported**	: 13-Apr-2024 / 18:58

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

URINE EXAMINATION REPORT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	6.0	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	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	2-3		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	+(>20/hpf)	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 ***

MC-6201

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

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

CID	: 2410422022		
Name	: MR.SARVESH SANKPAL		
Age / Gender	: 30 Years / Male		
Consulting Dr.	: -	**Collected**	: 13-Apr-2024 / 13:32
Reg. Location	: Borivali West (Main Centre)	**Reported**	: 14-Apr-2024 / 01:15

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

BLOOD GROUPING & Rh TYPING

PARAMETER	RESULTS
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.

Refernces:

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

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab

*** End Of Report ***

MC-5460

Dr.VRUSHALI SHROFF
M.D.(PATH)
Pathologist

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

CID	: 2410422022		
Name	: MR.SARVESH SANKPAL		
Age / Gender	: 30 Years / Male		
Consulting Dr.	: -	**Collected**	: 14-Apr-2024 / 08:52
Reg. Location	: Borivali West (Main Centre)	**Reported**	: 14-Apr-2024 / 12:39

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	**246.7**	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	**238.0**	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	GPO-POD
HDL CHOLESTEROL, Serum	**37.9**	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	**208.8**	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	**179.0**	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	29.8	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	**6.5**	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	**4.7**	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 ***

MC-6201

Bmhaskar

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

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

CID	: 2410422022		
Name	: MR.SARVESH SANKPAL		
Age / Gender	: 30 Years / Male		
Consulting Dr.	: -	**Collected**	: 13-Apr-2024 / 13:32
Reg. Location	: Borivali West (Main Centre)	**Reported**	: 13-Apr-2024 / 18:04

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

THYROID FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Free T3, Serum	4.9	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	18.3	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	3.63	0.35-5.5 microIU/ml	ECLIA

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

CID	: 2410422022		
Name	: MR.SARVESH SANKPAL		
Age / Gender	: 30 Years / Male		
Consulting Dr.	: -	**Collected**	: 13-Apr-2024 / 13:32
Reg. Location	: Borivali West (Main Centre)	**Reported**	: 13-Apr-2024 / 18:04

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)

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

*** End Of Report ***

MC-6201

Bmhaskar

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

SUBURBAN DIAGNOSTICS
PRECISE TESTING · HEALTHIER LIVING

REPORT

CID# : 2410422022
Name : MR.SARVESH SANKPAL
Age / Gender : 30 Years/Male
Consulting Dr. :
Reg.Location : Borivali West (Main Centre)

Collected : 13-Apr-2024 / 11:11
Reported : 13-Apr-2024 / 16:30

PHYSICAL EXAMINATION REPORT

History and Complaints:

Nil

EXAMINATION FINDINGS:

Height (cms):	173	**Weight (kg):**	76
Temp (0c):	Afebrile	**Skin:**	NAD
Blood Pressure (mm/hg):	120/80	**Nails:**	NAD
Pulse:	72/min	**Lymph Node:**	Not Palpable

Systems

Cardiovascular:	S1S2-Normal
Respiratory:	Chest-Clear
Genitourinary:	NAD
GI System:	NAD
CNS:	NAD

IMPRESSION: Lipid profile

ADVICE: physician Refy.

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

SUBURBAN DIAGNOSTICS
PRECISE TESTING · HEALTHIER LIVES

REPORT

CID# : 2410422022

Name : MR.SARVESH SANKPAL
Age / Gender : 30 Years/Male
Consulting Dr. :
Reg.Location : Borivali West (Main Centre)

Collected : 13-Apr-2024 / 11:11
Reported : 13-Apr-2024 / 16:30

8)	**Thyroid/ Endocrine disorders**	No
9)	**Nervous disorders**	No
10)	**GI system**	No
11)	**Genital urinary disorder**	No
12)	**Rheumatic joint diseases or symptoms**	No
13)	**Blood disease or disorder**	No
14)	**Cancer/lump growth/cyst**	No
15)	**Congenital disease**	No
16)	**Surgeries**	No
17)	**Musculoskeletal System**	No

PERSONAL HISTORY:

1)	**Alcohol**	No
2)	**Smoking**	No
3)	**Diet**	Mix
4)	**Medication**	No

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

DR. NITIN C. SAVANE
M.B.B.S., D.M.R.D.
CONSULTANT CARDIOLOGIST
REGD. NO. - 87714

Dr.NITIN SONAVANE
PHYSICIAN

SUBURBAN DIAGNOSTICS
PRECISE TESTING · HEALTHIER LIVING

REPORT

Date:-

Name:- Sarvesh Sankpal

CID: 24104220022

Sex / Age: 30 M

EYE CHECK UP

Chief complaints:

Systemic Diseases:

Past history:

Unaided Vision:

Aided Vision: RE LE

Refraction: 6/6 6/6

N/6 N/6

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

Colour Vision: Normal / Abnormal

Remark: Normal

Suburban Diagnostics (India) Pvt. Ltd.
Above Raheja ... Borivali (West) Mumbai - 400 092

SUBURBAN DIAGNOSTICS
PRECISE TESTING · HEALTHIER LIVING

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

Name: SARVESH SANKPAL **Date: 13-04-2024** **Time: 12:03**

Age: 30 **Gender:** M **Height:** 173 cms **Weight:** 76 Kg **ID:** 2410422022

Clinical History: NIL

Medications: NIL

Test Details:

Protocol: Bruce **Predicted Max HR:** 190 **Target HR:** 161 (85% of Pr. MHR)

Exercise Time: 0:08:18 **Achieved Max HR:** 161 (85% of Pr. MHR)

Max BP: 150/80 **Max BP x HR:** 24150 **Max Mets:** 9.3

Test Termination Criteria: TEST COMPLET

Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	Max ST Level mm	Max ST Slope mV/s
Supine	00:12	1	0	0	94	120/80	11280	1.7 V2	0.3 V2
Standing	00:14	1	0	0	92	120/80	11040	1.3 V2	-0.3 III
HyperVentilation	00:21	1	0	0	91	120/80	10920	1.2 V2	-0.3 III
PreTest	00:08	1	1.6	0	95	120/80	11400	1.5 V2	-0.2 III
Stage: 1	03:00	4.7	2.7	10	118	140/80	16520	1.5 V2	0.3 I
Stage: 2	03:00	7	4	12	140	140/80	19600	1.4 V2	0.4 V2
Peak Exercise	02:18	9.3	5.5	14	161	150/80	24150	2 V2	0.9 V2
Recovery1	01:00	1	0	0	135	150/80	20250	2.4 V2	0.9 V3
Recovery2	01:00	1	0	0	118	130/80	15340	1.5 V2	1.1 V2
Recovery3	00:33	1	0	0	117	130/80	15210	1.9 V2	0.6 V2

Interpretation

The Patient Exercised according to Bruce Protocol for 0:08:18 achieving a work level of 9.3 METS.
Resting Heart Rate, initially 94 bpm rose to a max. heart rate of 161bpm (85% of Predicted Maximum Heart Rate).
Resting Blood Pressure of 120/80 mmHg, rose to a maximum Blood Pressure of 150/80 mmHg
Good Effort tolerance Normal HR & BP Respone No Angina or Arrhymias
No Significant ST-T Change Noted During Exercise Stress test Negative for Stress inducible ischaemia.

Ref. Doctor: ----

Doctor: DR. NITIN SONAVANE

SCHILLER
The Art of Diagnostics

(Summary Report edited by User)
Cardiovit CS-20 Version:3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

SARVESH SANKPAL (30 M)

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 2410422022
Stage: Supine

Date: 13-04-2024
Speed: 0 km/h

Exec Time : 0:00:00
Slope: 0%

Stage Time: 00:12
THR: 161 bpm

HR: 94 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

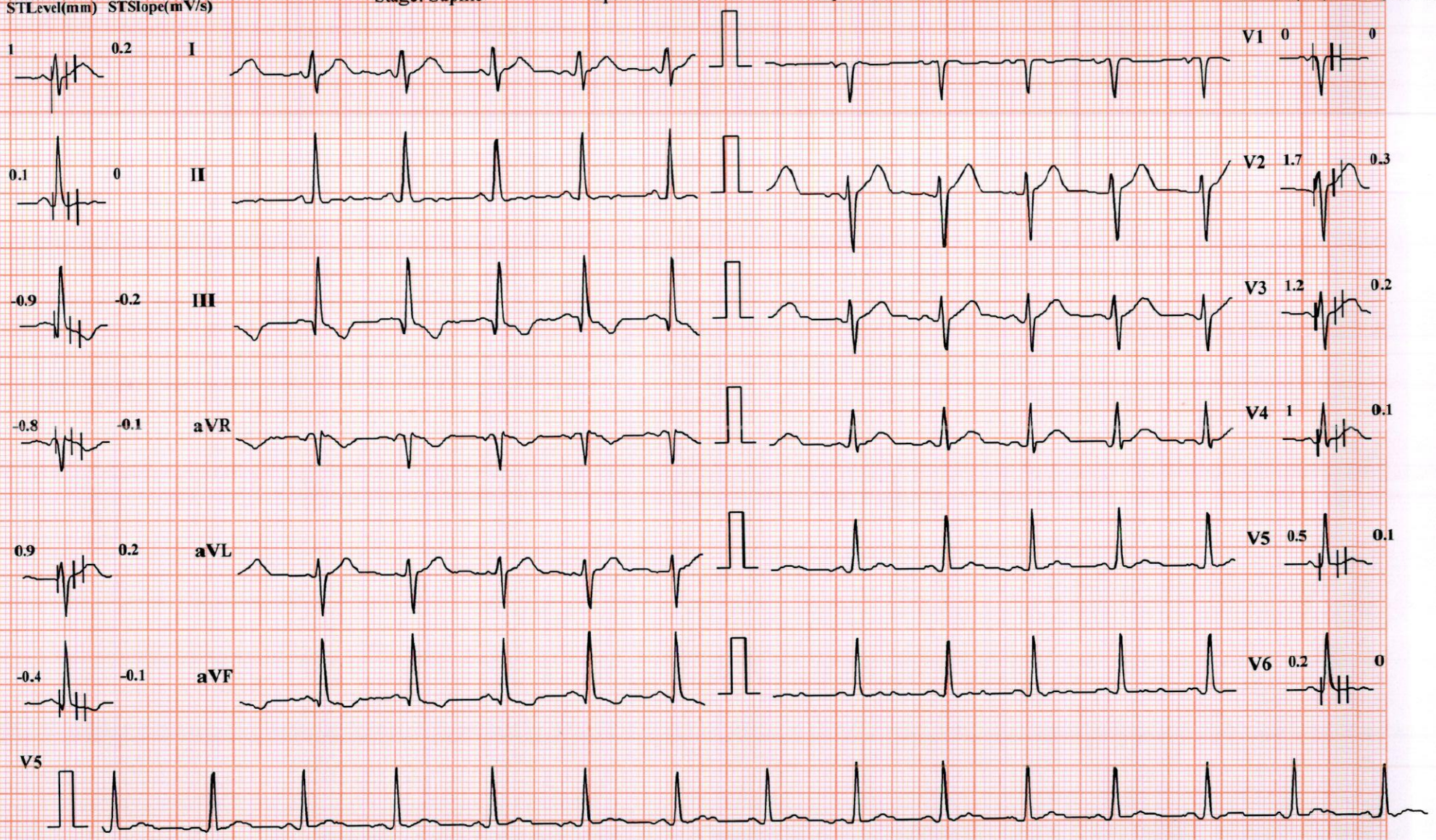

Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 25 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms

Schiller Cardiovit CS-20 Version:3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

SARVESH SANKPAL (30 M)

Bruce Protocol

ID: 2410422022 | Date: 13-04-2024 | Exec Time : 0:00:00 | Stage Time: 00:14

Stage: Standing | Speed: 0 | Slope: 0 % | THR: 161 bpm

HR: 92 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

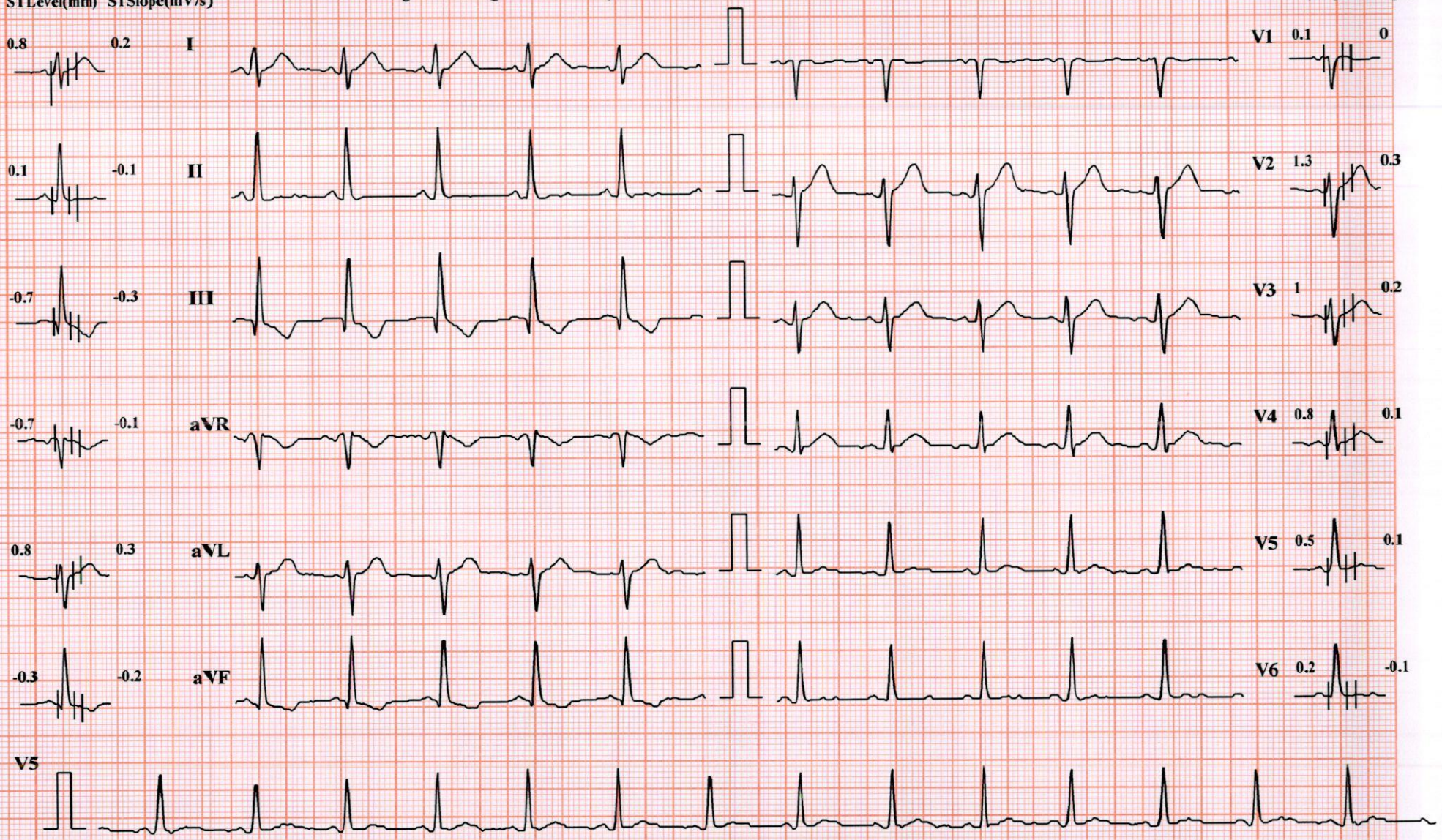

Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 25 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms

Schiller Cardiovit CS-20 Version:3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

SARVESH SANKPAL (30 M)
Bruce Protocol
STLevel(mm) STSlope(mV/s)

ID: 2410422022
Stage: HyperVentilation

Date: 13-04-2024
Speed: 0

Exec Time : 0:00:00
Slope: 0 %

Stage Time: 00:21
THR: 161 bpm

HR: 91 bpm
BP: 120/80 mmHg
STLevel(mm) STSlope(mV/s)

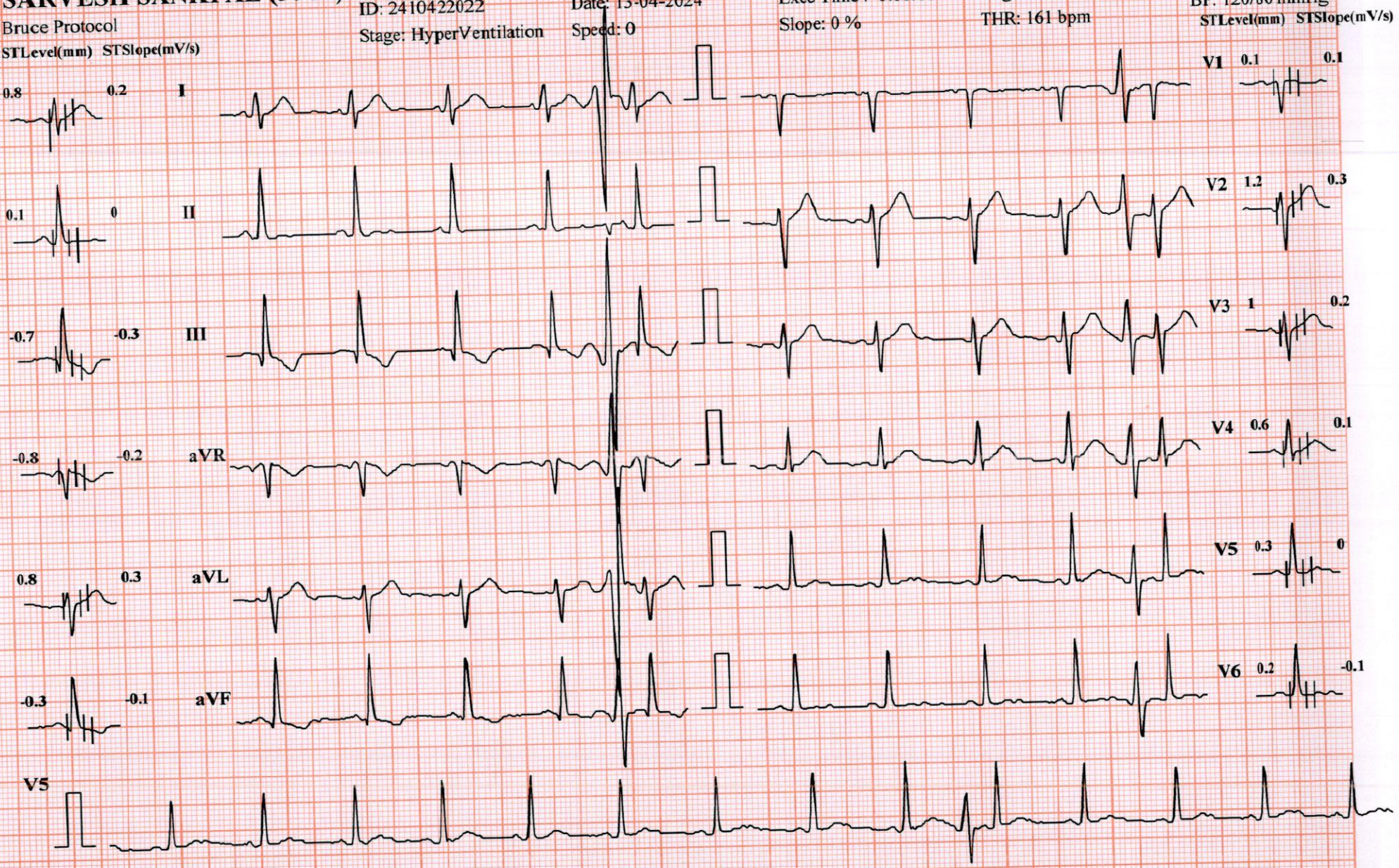

Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 25 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms

Schiller Cardiovit CS-20 Version:3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

SARVESH SANKPAL (30 M)

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 2410422022

Stage: 1

Date: 13-04-2024

Speed: 2.7 kmph

Exec Time : 0:03:00

Slope: 10 %

Stage Time: 03:00

THR: 161 bpm

HR: 118 bpm

BP: 140/80 mmHg

STLevel(mm) STSlope(mV/s)

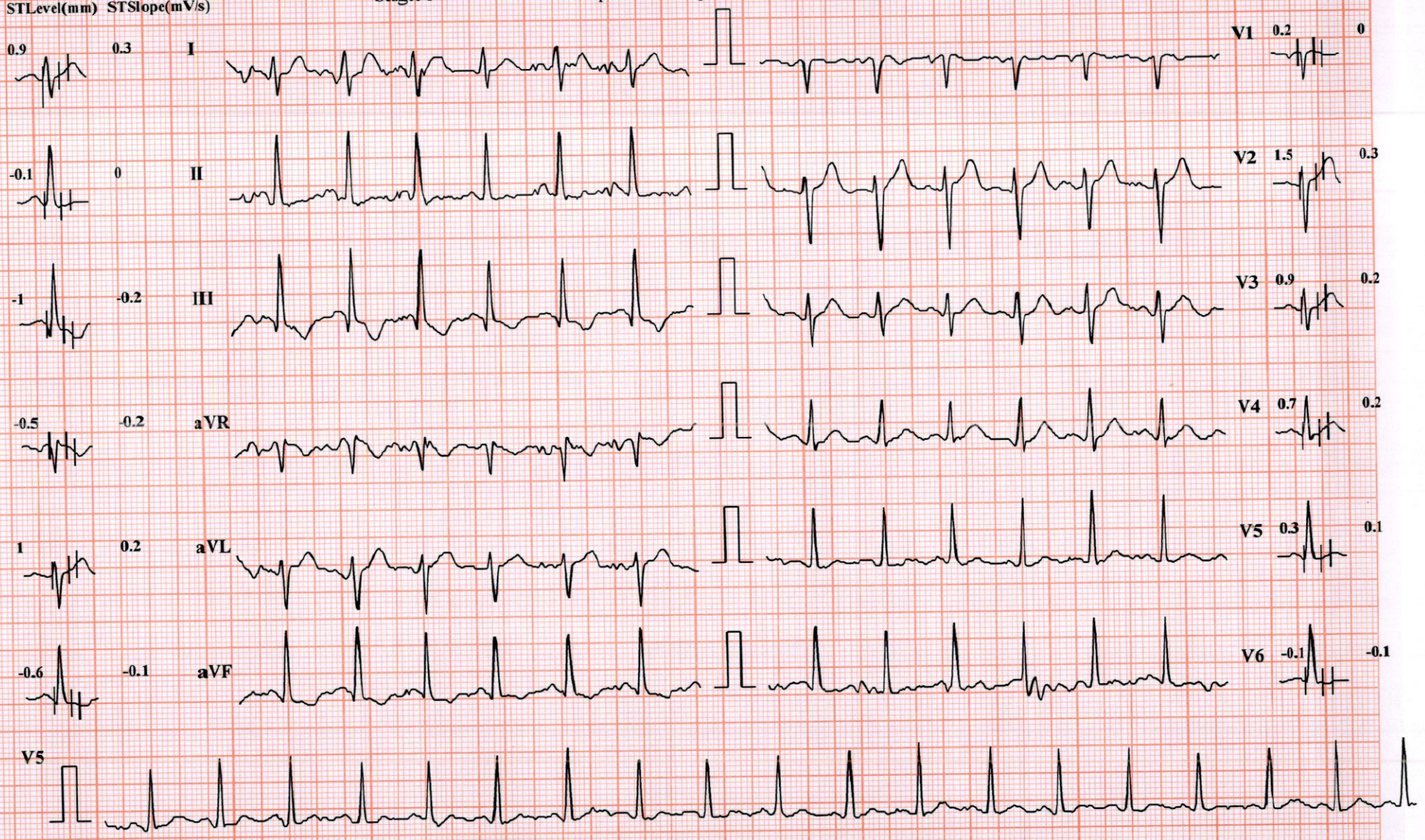

Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 25 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms

Schiller Cardiovit CS-20 Version:3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

SARVESH SANKPAL (30 M)

Bruce Protocol

ID: 2410422022 | Date: 13-04-2024 | Exec Time : 0:06:00 | Stage Time: 03:00

Stage: 2 | Speed: 4 kmph | Slope: 12 % | THR: 161 bpm

HR: 140 bpm

BP: 140/80 mmHg

	STLevel(mm)	STSlope(mV/s)		STLevel(mm)	STSlope(mV/s)
I	0.7	0.2	V1	0	-0.1
II	-0.3	0.1	V2	1.4	0.4
III	-1	-0.2	V3	0.5	0.3
aVR	-0.5	-0.2	V4	0.3	0.4
aVL	0.9	0.1	V5	-0.2	0.2
aVF	-0.6	-0.1	V6	-0.2	0

V5

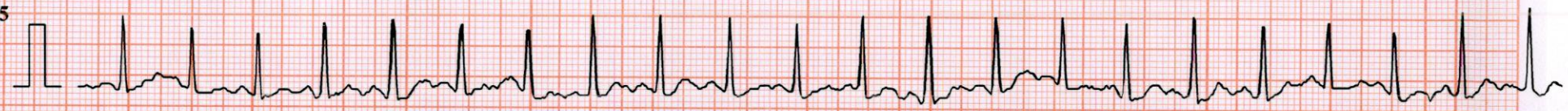

Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 25 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms Schiller Cardiovit CS-20 Version:3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

SARVESH SANKPAL (30 M)

Bruce Protocol

ID: 2410422022 | Date: 13-04-2024 | Exec Time : 0:08:18 | Stage Time: 02:18

Stage: 3 Peak Exercise | Speed: 5.5 kmph | Slope: 14 % | THR: 161 bpm

HR: 161 bpm

BP: 150/80 mmHg

	STLevel(mm)	STSlope(mV/s)
I	0.7	0.7
II	-0.3	0.2
III	-1.1	-0.4
aVR	-0.4	-0.6
aVL	0.9	0.7
aVF	-0.7	0
V1	-0.1	-0.2
V2	2	0.9
V3	1.3	0.8
V4	0.6	0.6
V5	-0.2	0.4
V6	-0.4	0

V5

Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 25 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms

Schiller Cardiovit CS-20 Version :3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

SARVESH SANKPAL (30 M)

ID: 2410422022 Date: 13-04-2024 Exec Time : 00:00 Stage Time: 00:17

Bruce Protocol Stage: Recovery1 Speed: 0 kmph Slope: 0 % THR: 161 bpm

HR: 155 bpm

BP: 150/80 mmHg

STLevel(mm) STSlope(mV/s)

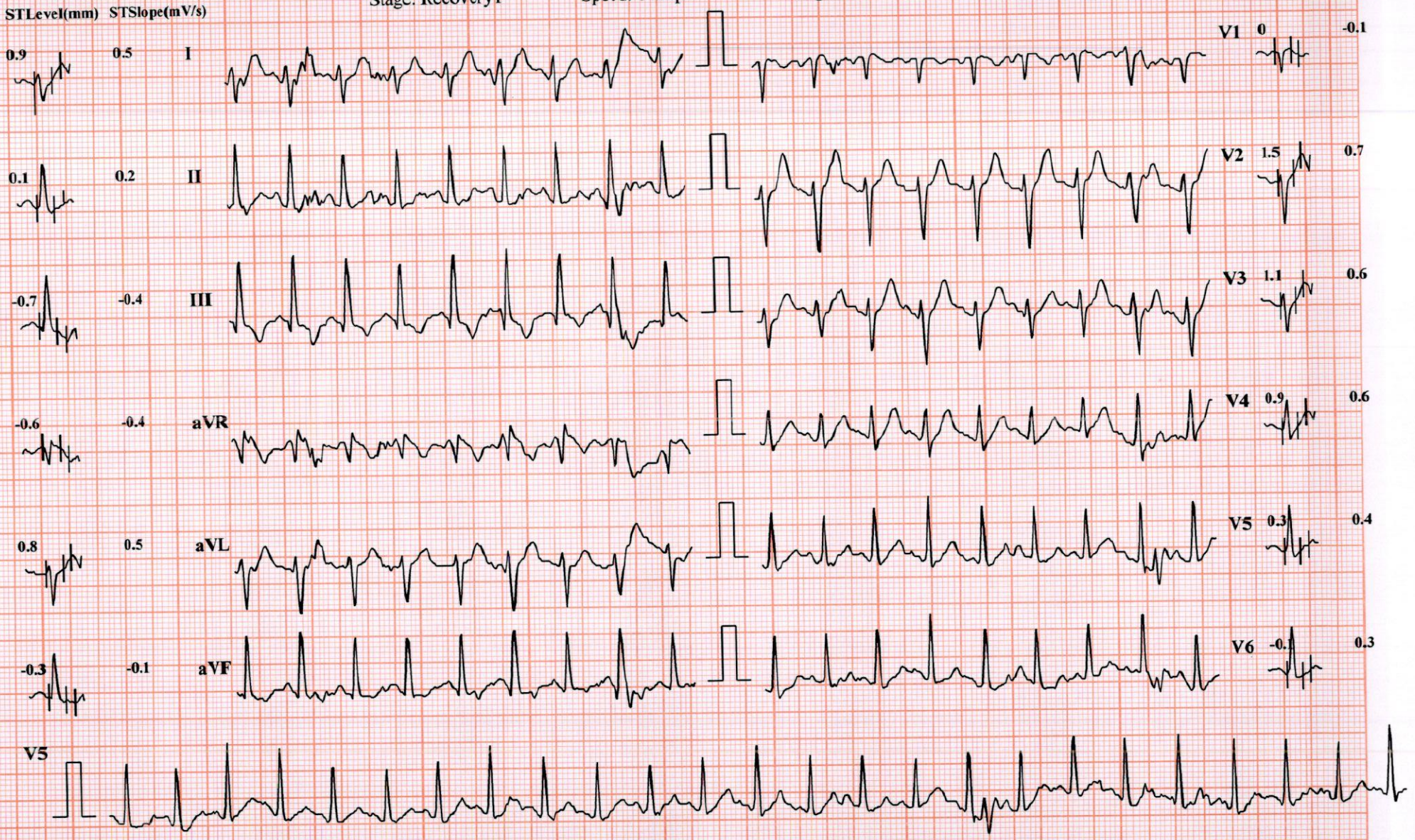

Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 25 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms

Schiller Cardiovit CS-20 Version:3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

SARVESH SANKPAL (30 M)

Bruce Protocol

ID: 2410422022 | Date: 13-04-2024 | Exec Time : 00:00 | Stage Time: 01:00

Stage: Recovery1 | Speed: 0 kmph | Slope: 0 % | THR: 161 bpm

HR: 135 bpm

BP: 150/80 mmHg

	STLevel(mm)	STSlope(mV/s)
I	1.3	0.6
II	0.2	0.4
III	-1.1	-0.2
aVR	-1	-0.5
aVL	1.2	0.4
aVF	-0.4	0.1
V1	0.1	-0.2
V2	2.4	0.8
V3	2.3	0.9
V4	1.8	0.8
V5	1	0.5
V6	0.5	0.4

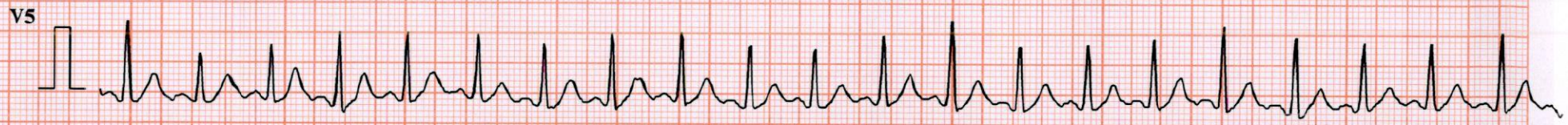

Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 25 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms

Schiller Cardiovit CS-20 Version:3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

SARVESH SANKPAL (30 M)

Bruce Protocol

ID: 2410422022

Stage: Recovery2

Date: 13-04-2024

Speed: 0 kmph

Exec Time : 00:00

Slope: 0 %

Stage Time: 00:43

THR: 161 bpm

HR: 122 bpm

BP: 130/80 mmHg

STLevel(mm) STSlope(mV/s)

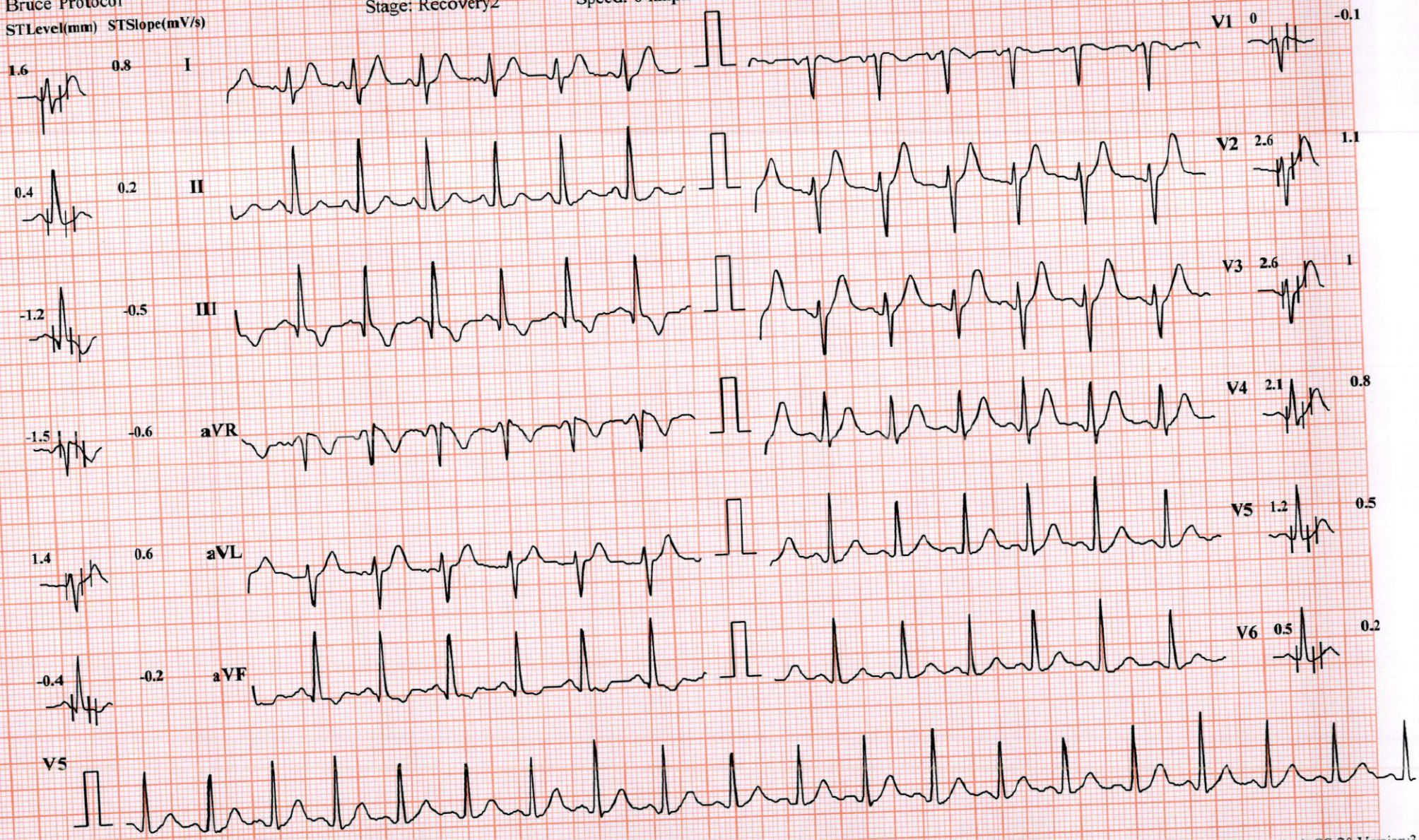

Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms

Schiller Cardiovit CS-20 Version:3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

SARVESH SANKPAL (30 M)

Bruce Protocol

ID: 2410422022 | Date: 13-04-2024 | Exec Time : 00:00 | Stage Time: 01:00

Stage: Recovery2 | Speed: 0 kmph | Slope: 0 % | THR: 161 bpm

HR: 118 bpm

BP: 130/80 mmHg

	STLevel(mm)	STSlope(mV/s)
I	0.4	0.8
II	-0.1	0.3
III	-0.6	-0.5
aVR	-0.5	-0.6
aVL	0.5	0.6
aVF	-0.4	-0.1
V1	0	-0.2
V2	1.5	1.1
V3	1.4	1.1
V4	0.8	0.9
V5	0.3	0.5
V6	-0.1	0.3

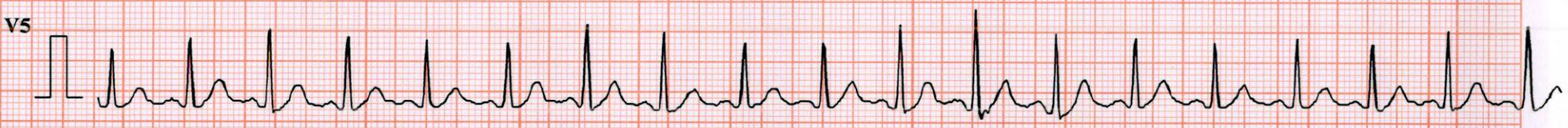

Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 25 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms

Schiller Cardiovit CS-20 Version:3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

SARVESH SANKPAL (30 M)

Bruce Protocol

ID: 2410422022 | Date: 13-04-2024 | Exec Time : 00:00 | Stage Time: 00:29

Stage: Recovery3 | Speed: 0 kmph | Slope: 0 % | THR: 161 bpm

HR: 117 bpm

BP: 130/80 mmHg

	STLevel(mm)	STSlope(mV/s)
I	1.1	0.4
II	0.2	0.3
III	-0.9	-0.2
aVR	-1.3	-0.3
aVL	1.1	0.3
aVF	-0.3	0
V1	0.1	-0.2
V2	1.9	0.6
V3	1.7	0.5
V4	1.4	0.5
V5	0.8	0.3
V6	0.4	0.1

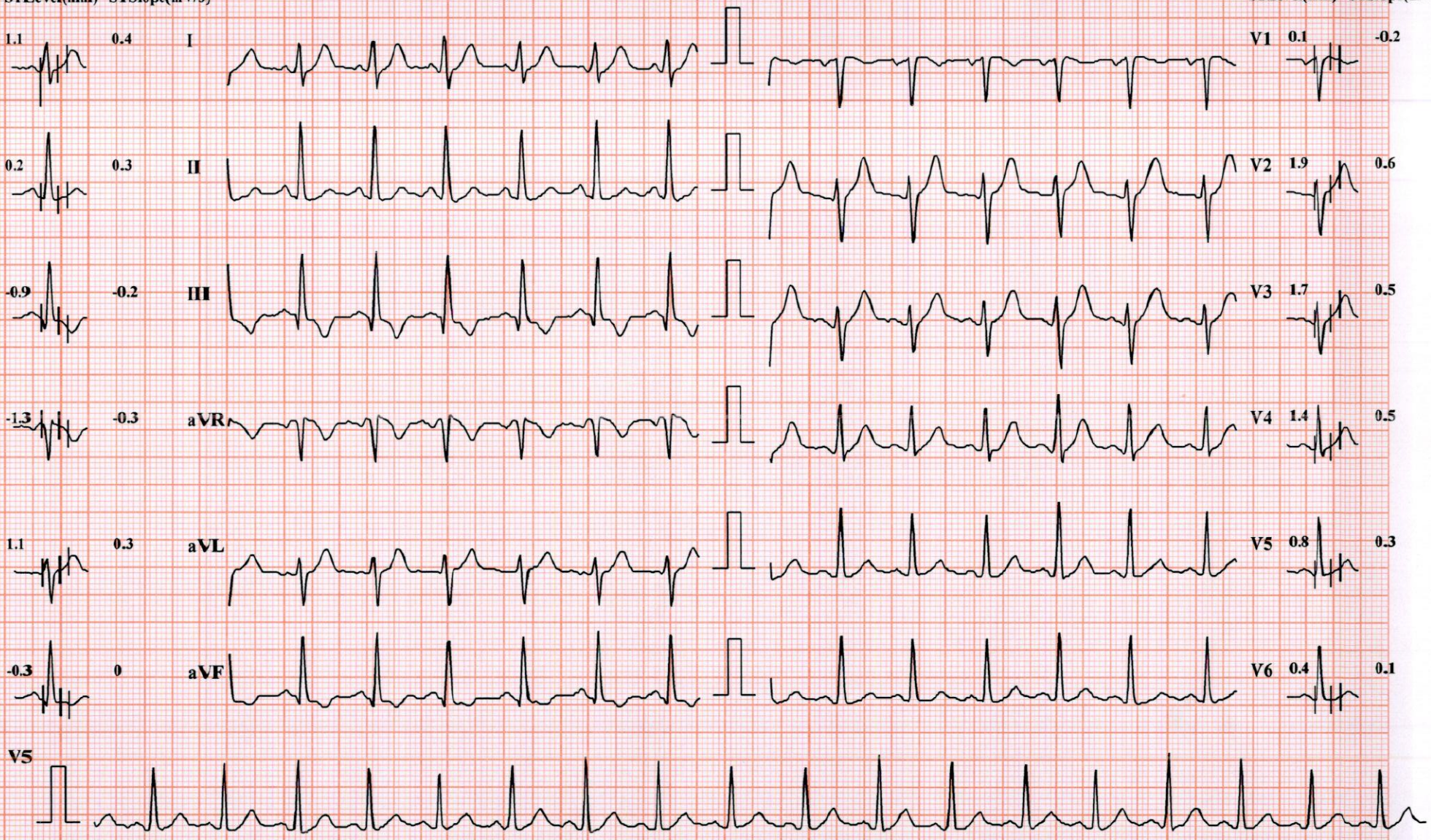

Chart Speed: 25 mm/sec Amplitude: 10mm/mV Filter: 25 Hz Mains Filter: ON ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms Schiller Cardiovit CS-20 Version:3.4

SUBURBAN DIAGNOSTICS
PRECISE TESTING · HEALTHIER LIVING

Authenticity Check

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REPORT

CID	: 2410422022		
Name	: Mr SARVESH SANKPAL		
Age / Sex	: 30 Years/Male		
Ref. Dr	:	**Reg. Date**	: 13-Apr-2024
Reg. Location	: Borivali West	**Reported**	: 13-Apr-2024/11:42

USG WHOLE ABDOMEN

LIVER: Liver is normal in size 14.2 cm, with mild generalized increase in parenchymal echotexture. There is no intra-hepatic biliary radical dilatation.No evidence of any focal lesion.

GALL BLADDER: Gall bladder is distended and appears normal. No obvious wall thickening is noted. There is no evidence of any calculus.

PORTAL VEIN: Portal vein is normal. **CBD:** CBD is normal.

PANCREAS: Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification.

KIDNEYS: Right kidney measures 9.5 x 4.6 cm. Left kidney measures 10.8 x 4.9 cm.
Both kidneys are normal in shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

SPLEEN: Spleen is normal in size , shape and echotexture. No focal lesion is seen.

URINARY BLADDER: Urinary bladder is distended and normal. Wall thickness is within normal limits.

PROSTATE: Prostate is normal in size and echotexture. Prostate measures 3.2 x 3.0 x 3.4 cm and prostatic weight is 18 gm. No evidence of any obvious focal lesion.

No free fluid or size significant lymphadenopathy is seen.

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SUBURBAN DIAGNOSTICS
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Authenticity Check

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REPORT

CID	: 2410422022		
Name	: Mr SARVESH SANKPAL		
Age / Sex	: 30 Years/Male		
Ref. Dr	:	**Reg. Date**	: 13-Apr-2024
Reg. Location	: Borivali West	**Reported**	: 13-Apr-2024/11:42

Opinion:

- **Grade I fatty infiltration of liver .**

For clinical correlation and follow up.

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have inter-observer variations. Further / Follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis. Patient was explained in detail verbally about the USG findings, USG measurements and its limitations. In case of any typographical error in the report, patient is requested to immediately contact the center for rectification within 7 days post which the center will not be responsible for any rectification. Please interpret accordingly.

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

DR.SUDHANSHU SAXENA
Consultant Radiologist
M.B.B.S DMRE (RadioDiagnosis)
RegNo .MMC 2016061376.

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SUBURBAN DIAGNOSTICS
PRECISE TESTING · HEALTHIER LIVING

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

REPORT

CID	: 2410422022		
Name	: Mr SARVESH SANKPAL		
Age / Sex	: 30 Years/Male		
Ref. Dr	:	**Reg. Date**	: 13-Apr-2024
Reg. Location	: Borivali West	**Reported**	: 13-Apr-2024/11:42

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SUBURBAN DIAGNOSTICS
PRECISE TESTING · HEALTHIER LIVING

Authenticity Check

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REPORT

CID	: 2410422022		
Name	: Mr SARVESH SANKPAL		
Age / Sex	: 30 Years/Male		
Ref. Dr	:	**Reg. Date**	: 13-Apr-2024
Reg. Location	: Borivali West	**Reported**	: 13-Apr-2024/13:03

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.

Kindly correlate clinically.

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. X ray is known to have inter-observer variations. Further / follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis. Please interpret accordingly. In case of any typographical error / spelling error in the report, patient is requested to immediately contact the centre within 7 days post which the center will not be responsible for any rectification.

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

DR.SUDHANSHU SAXENA
Consultant Radiologist
M.B.B.S DMRE (RadioDiagnosis)
RegNo .MMC 2016061376.

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SUBURBAN DIAGNOSTICS
PRECISE TESTING · HEALTHIER LIVING

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

REPORT

CID	: 2410422022		
Name	: Mr SARVESH SANKPAL		
Age / Sex	: 30 Years/Male		
Ref. Dr	:	**Reg. Date**	: 13-Apr-2024
Reg. Location	: Borivali West	**Reported**	: 13-Apr-2024/13:03

Click here to view images http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024041311185078