



भारत सरकार  
GOVERNMENT OF INDIA



कुमार गौरव  
Kumar Gaurav  
जन्म तिथि/DOB: 03/11/1987  
पुंलिंग/ MALE  
Mobile No: 9810266619  
**4535 1197 8592**  
VID : 9102 3074 4016 4189

मेरा आधार, मेरी पहचान

*Kumar*



**PHYSICAL EXAMINATION REPORT**

Patient Name	Mr. Kumar Gaurav	Sex/Age	Male / 36yrs
Date	02.03.24	Location	KASARVADAVALI

**History and Complaints**

Nil

**EXAMINATION FINDINGS:**

Height	178cm	Temp (0c):	Not done
Weight	95kg	Skin:	Not done
Blood Pressure	130/80	Nails:	Not done
Pulse	72b	Lymph Node:	Not done

**Systems :**

Cardiovascular:	Not done
Respiratory:	Not done
Genitourinary:	Not done
GI System:	Not done
CNS:	Not done

**Impression:**

1) Obesity 2) S. alk. ans ↑ 3) Systemic Hypertension 4) Early CKD

**ADVICE :**

To Reduce weight, to take low fat diet & to monitor lipid profile and follow up with family physician

**CHIEF COMPLAINTS :**

*Anand*  
**DR. ANAND N. MOTWANI**  
M.D. (GENERAL MEDICINE)  
Reg. No. 39329 (M.M.C)

1)	Hypertension:	No
2)	IHD	No
3)	Arrhythmia	No
4)	Diabetes Mellitus	No
5)	Tuberculosis	No
6)	Asthma	No
7)	Pulmonary Disease	No
8)	Thyroid/ Endocrine disorders	No
9)	Nervous disorders	No
10)	GI system	No
11)	Genital urinary disorder	No
12)	Rheumatic joint diseases or symptom	No
13)	Blood disease or disorder	No
14)	Cancer/lump growth/cyst	No
15)	Congenital disease	No
16)	Surgeries	No



**PERSONAL HISTORY:**

1)	Alcohol	Occasionally
2)	Smoking	
3)	Diet	Non-veg
4)	Medication	Nil

Date: 02.03.24

CID: 2406221936

Name: Mr. Kumar Gaurav Sex/Age: male/36ys.

EYE CHECK UP

Chief complaints: Nil

Systematic Diseases: Nil

Past History: Nil

Unaided Vision: Rt - 6/6, NG  
Lt - 6/6, NG

Aided Vision: -

Refraction: -

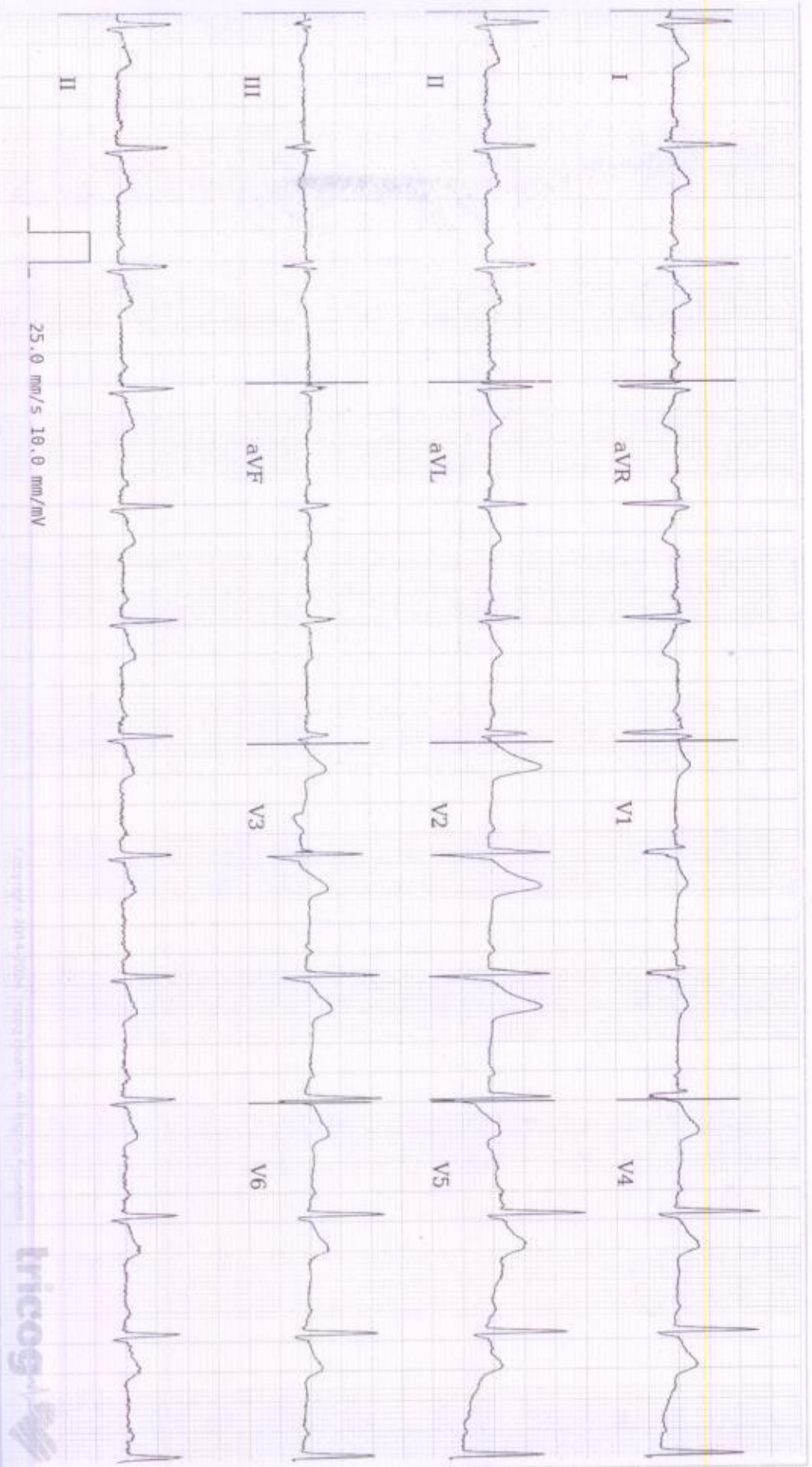
Colour Vision: Normal

Remarks: -

Patient Name: GAURAV KUMAR

Date and Time: 2nd Mar 24 11:57 AM

Patient ID: 2406221936



Age **36** NA  
years months

Gender **Male**

Heart Rate **76bpm**

Patient Vitals

BP: NA  
Weight: NA  
Height: NA  
Pulse: NA  
SpO2: NA  
Resp: NA  
Others:

**Measurements**

QRSD: 90ms  
QT: 364ms  
QTcB: 409ms  
PR: 146ms  
P-R-T: 22° 23° 19°

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

REPORTED BY

*Aravind*

Dr. Aravind N. Mohanani  
M.D (General Medicine)  
Reg No 39329 M.M.C

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

## SUBURBAN DIAGNOSTICS THANE KASARVADAVALI

**Patient Details**

Date: 02-Mar-24

Time: 12:41:13 PM

Name: MR. KUMAR GAURAV ID: 2406221936

Age: 36 y

Sex: M

Height: 178 cms

Weight: 98 Kgs

Clinical History: NIL

Medications: NIL

**Test Details**

Protocol: Bruce

Pr.MHR: 184 bpm

THR: 156 (85 % of Pr.MHR) bpm

Total Exec. Time: 8 m 12 s

Max. HR: 157 (85% of Pr.MHR) bpm

Max. Mets: 10.20

Max. BP: 190 / 86 mmHg

Max. BP x HR: 29830 mmHg/min

Min. BP x HR: 6960 mmHg/min

Test Termination Criteria: THR ACHIEVED

**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 : 23	1.0	0	0	103	130 / 80	-2.76 III	-4.60 III
Standing	0 : 11	1.0	0	0	87	130 / 80	-1.06 aVR	3.54 V2
Hyperventilation	0 : 13	1.0	0	0	88	130 / 80	-1.06 aVR	3.54 V2
1	3 : 0	4.6	1.7	10	123	150 / 80	-1.27 aVR	4.25 V2
2	3 : 0	7.0	2.5	12	137	170 / 86	-1.06 III	4.25 V2
Peak Ex	2 : 12	10.2	3.4	14	157	190 / 86	-1.06 aVR	5.31 V4
Recovery(1)	1 : 0	1.8	1	0	140	190 / 86	-1.06 aVR	5.66 V4
Recovery(2)	1 : 0	1.0	0	0	118	190 / 86	-1.06 aVR	5.66 V2
Recovery(3)	1 : 0	1.0	0	0	107	170 / 86	-0.64 aVR	3.89 V2
Recovery(4)	1 : 0	1.0	0	0	106	150 / 86	-5.52 aVR	-5.31 aVR
Recovery(5)	0 : 10	1.0	0	0	105	140 / 86	-1.06 aVR	2.48 V2

**Interpretation**

GOOD EFFORT TOLERANCE  
 NORMAL HEART RATE AND BP RESPONSE  
 NO ARRHYTHMIAS NO ANGINAL OR ANGINAL EQUIVALENT SYMPTOMS  
 NO SIGNIFICANT ST-T CHANGES FROM BASELINE SEEN DURING THE TEST

**IMPRESSION**

STRESS TEST IS NEGATIVE FOR STRESS INDUCIBLE MYOCARDIAL ISCHAEMIA

DISCLAIMER: Negative stress test does not rule out coronary artery disease and positive stress test is suggestive but not confirmatory of coronary artery disease. Hence clinical co-relation is mandatory.

*Anand*  
**DR. ANAND N. MOTWANI**

M.D. (GENERAL MEDICINE)

Reg. No. 38329 (M.M.C)



Ref. Doctor: CORPORATE

( Summary Report edited by user )

Doctor: Dr. Anand Motwani

(c) Schiller Healthcare India Pvt. Ltd. V 4.7



MR. KUMAR GAURAV (36 M)

SUBURBAN DIAGNOSTICS THANE KASARVADAVALI

Test Report

Protocol: Bruce

ID: 2406221936

Date: 02-Mar-24

Exec Time: 0 m 0 s

Stage Time: 0 m 17 s

HR: 89 bpm

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 156 bpm)

B.P.: 130 / 80

ST Level (mm)

ST Slope (mV/s)

ST Level (mm)

ST Slope (mV/s)



Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

50 = R - 60 ms

J = R + 60 ms

Post J = I + 60 ms

Linked Median

MR. KUMAR GAURAV (36 M)

ID: 2406221936

Date: 02-Mar-24

Exec Time : 0 m 0 s

Stage Time : 0 m 5 s

HR: 89 bpm

SUBURBAN DIAGNOSTICS THANE KASARVADAVALI

Test Report

Protocol: Bruce

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 156 bpm)

B.P: 130 / 80

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

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

1.3 1.4

0.2 0.0

0.6 0.7

3.4 3.5

-0.2 -0.4

1.9 2.1

-1.1 -0.7

1.9 1.8

0.8 0.7

1.5 1.1

0.0 0.0

1.5 1.1

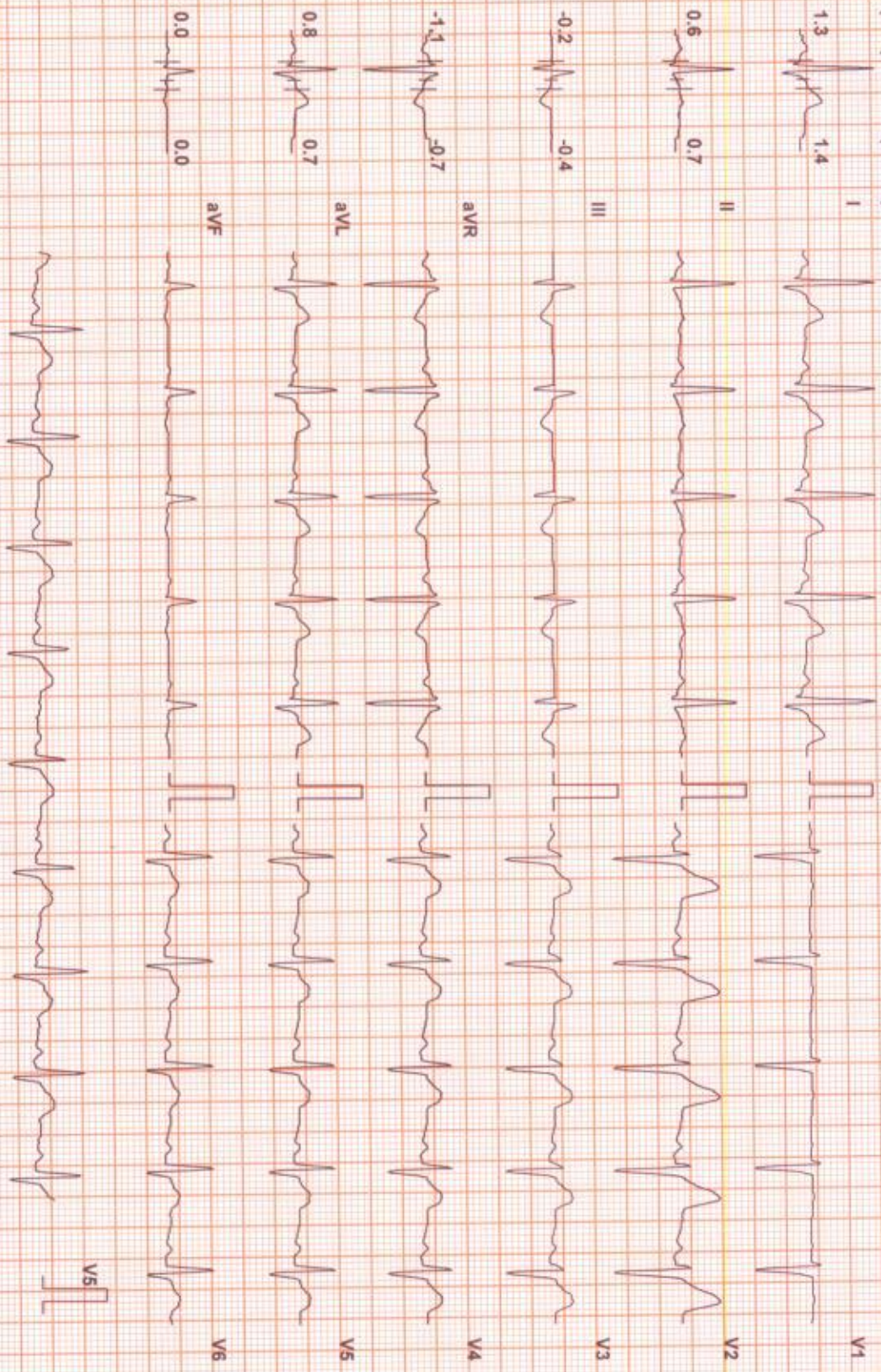


Chart Speed: 25 mm/sec  
Schiller Spanden V 47

Filter: 35 Hz

Mains Filt. ON

Amp: 10 mm

ISO = R - 50 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median





MR. KUMAR GAURAV (36 M)

SUBURBAN DIAGNOSTICS THANE KASARVADAVALI

Test Report

Protocol: Bruce

ID: 2406221936

Date: 02-Mar-24

Exec Time : 0 m 0 s

Stage Time : 0 m 7 s

HR: 88 bpm

Stage: Hyperventilation

Speed: 0 mph

Grade: 0 %

(THR: 156 bpm)

B.P: 130 / 80

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

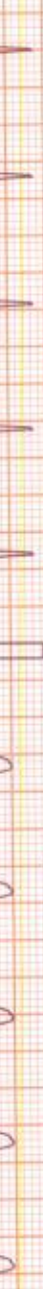
ST Level (mm) ST Slope (mV/s)

1.3 1.8



0.2 0.0

0.6 1.1



3.2 3.2

-0.6 -0.7



1.9 1.8

-0.8 -1.1



1.7 1.4

0.8 0.7



1.5 1.1

0.0 0.0



1.3 0.7

0.0 0.0



0.2 0.0

0.0 0.0



3.2 3.2

0.0 0.0



1.9 1.8

0.0 0.0



1.7 1.4

0.0 0.0



1.5 1.1

0.0 0.0



1.3 0.7

Chart Speed: 25 mm/sec  
Schiller Spandon V 47

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

60 = R - 60 ms

J = R - 60 ms

Post J = J + 60 ms

Linked Median



MR. KUMAR GAURAV (36 M)

SUBURBAN DIAGNOSTICS THANE KASARVADAVALI

Test Report

ID: 2406221936

Date: 02-Mar-24 Exec Time: 2 m 54 s Stage Time: 2 m 54 s HR: 123 bpm

Protocol: Bruce

Stage: 1

Speed: 1.7 mph Grade: 10 %

(THR: 156 bpm)

B.P: 150 / 80

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

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

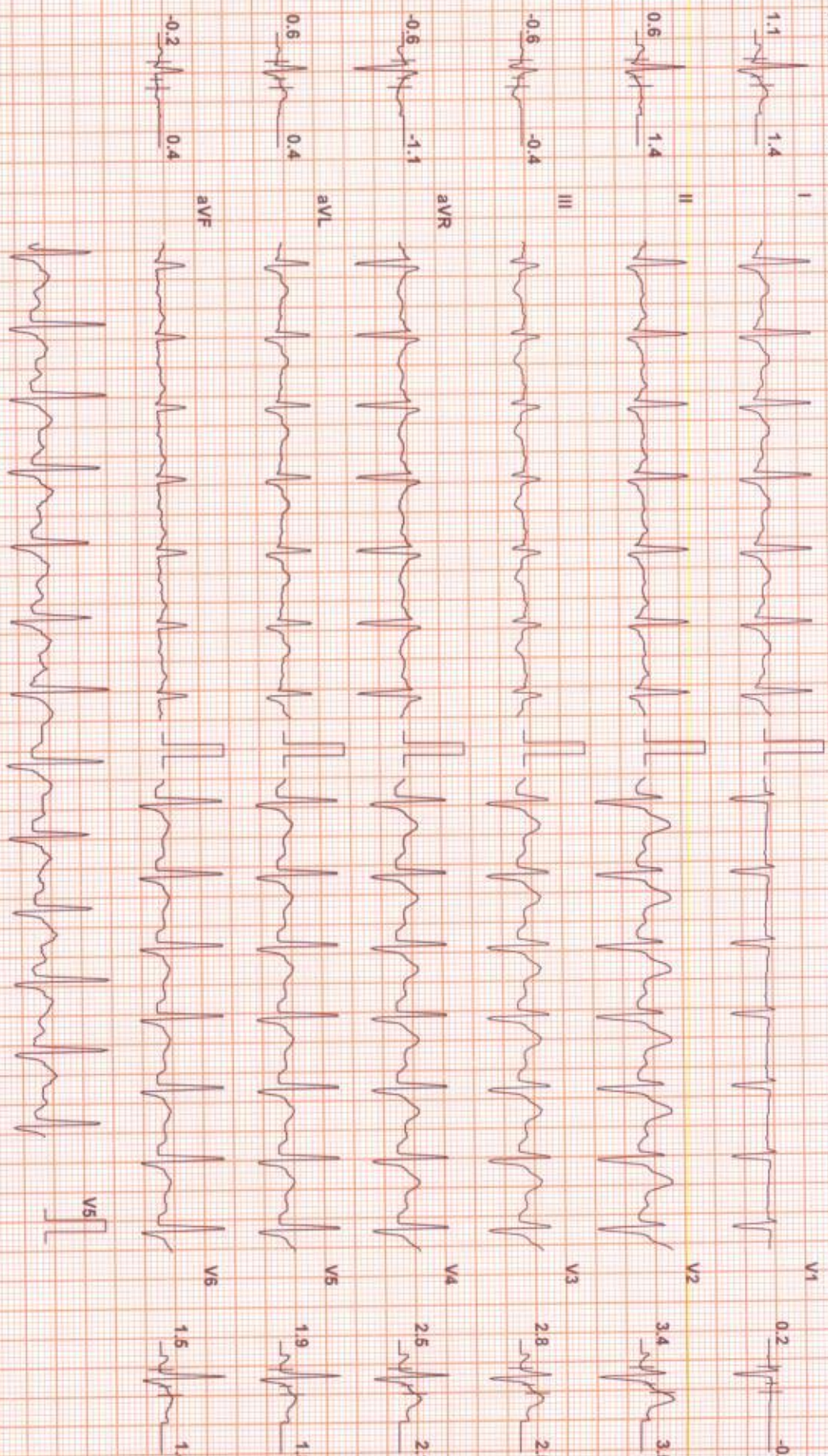


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

f<sub>50</sub> = R - 60 ms

f<sub>1</sub> = R + 60 ms

Post J = J + 60 ms

Linked Median



MR. KUMAR GAURAV (36 M)

SUBURBAN DIAGNOSTICS THANE KASARVADAVALI

Test Report

ID: 2406221936

Date: 02-Mar-24

Exec Time : 5 m 54 s

Stage Time : 2 m 54 s

HR: 134 bpm

Protocol: Bruce

Stage: 2

Speed: 2.5 mph

Grade: 12 %

(THR: 156 bpm)

B.P.: 170 / 86

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

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

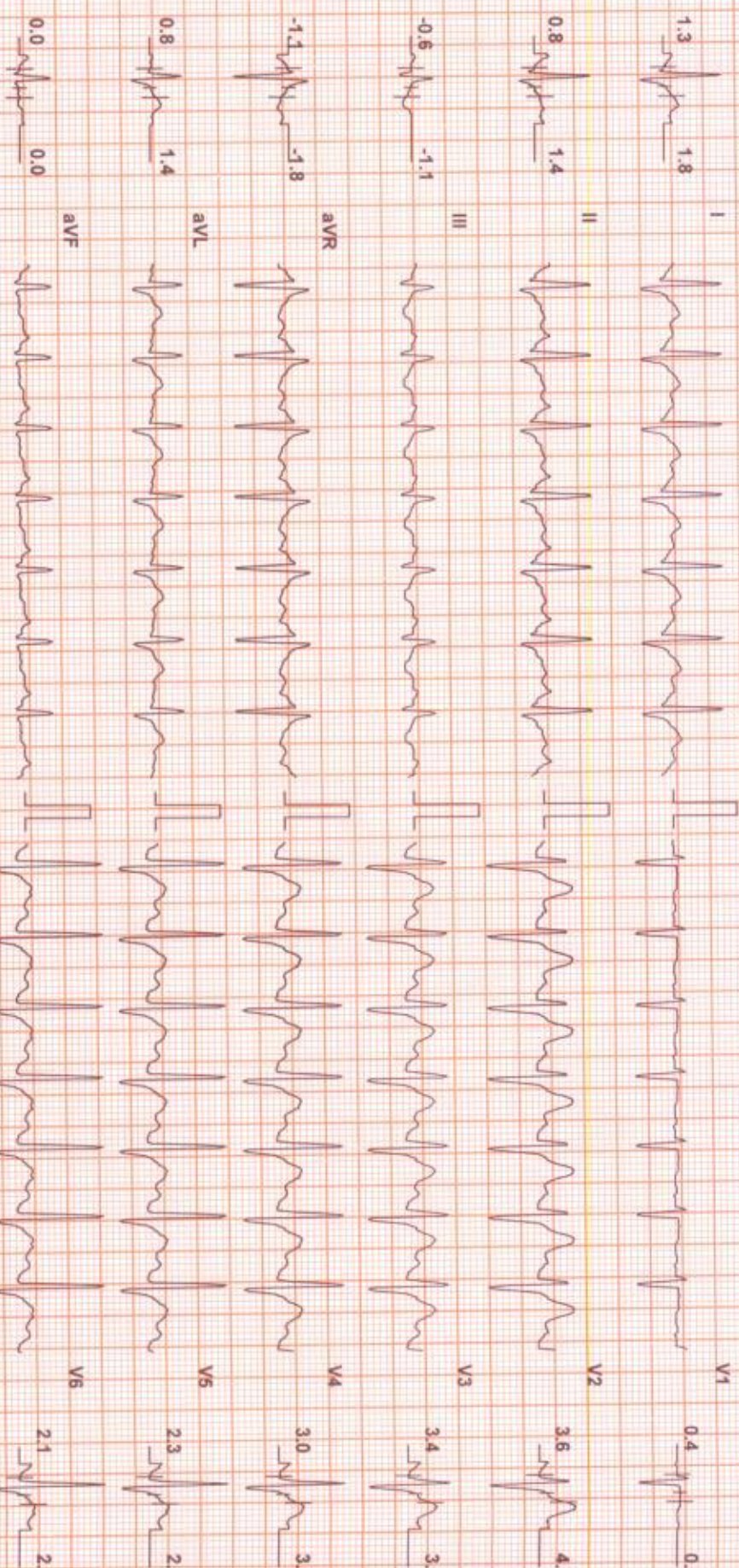


Chart Speed: 25 mm/sec  
Schlitz Spandern V 47

Filter: 35 Hz

Mains Filtr. ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



MR. KUMAR GAURAV (36 M)

SUBURBAN DIAGNOSTICS THANE KASARVADAVALI

Test Report

Protocol: Bruce

ID: 2406221936  
Stage: Peak Ex

Date: 02-Mar-24  
Speed: 3.4 mph  
Grade: 14 %

Exec Time : 8 m 6 s  
Stage Time : 2 m 6 s  
(THR: 156 bpm)

HR: 157 bpm  
B.P: 190 / 85

ST Level (mm)      ST Slope (mV/s)

ST Level (mm)      ST Slope (mV/s)

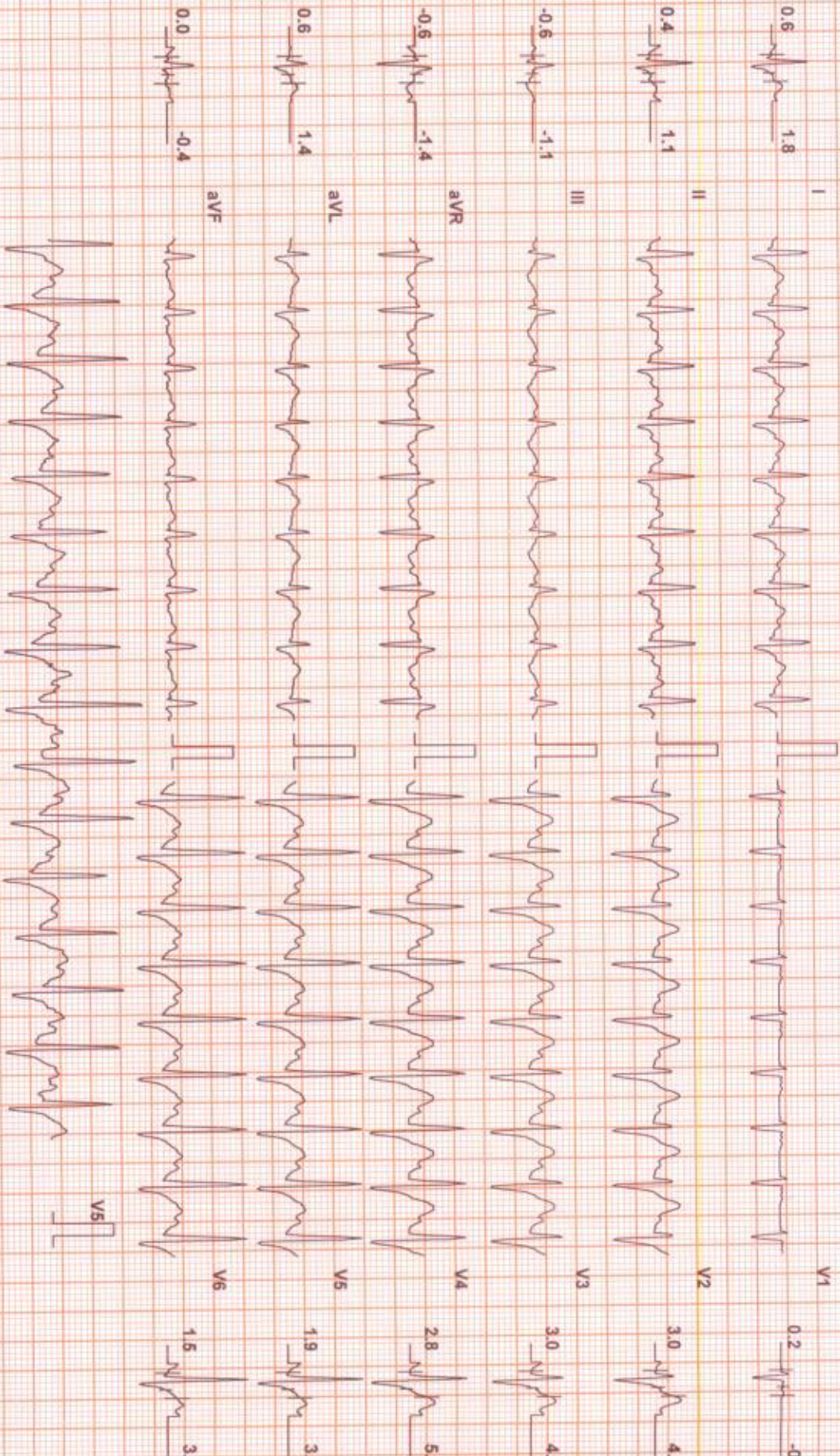


Chart Speed: 25 mm/sec  
Schlier Spandan V 47

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

150 ± R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



MR. KUMAR GAURAV (36 M)

SUBURBAN DIAGNOSTICS THANE KASARVADAVALI

Test Report

Protocol: Bruce

ID: 2406221936

Date: 02-Mar-24

Exec Time: 8 m 12 s

Stage Time: 0 m 54 s

HR: 129 bpm

Stage: Recovery (1)

Speed: 1 mph

Grade: 0 %

(THR: 156 bpm)

B.P.: 190 / 85

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

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

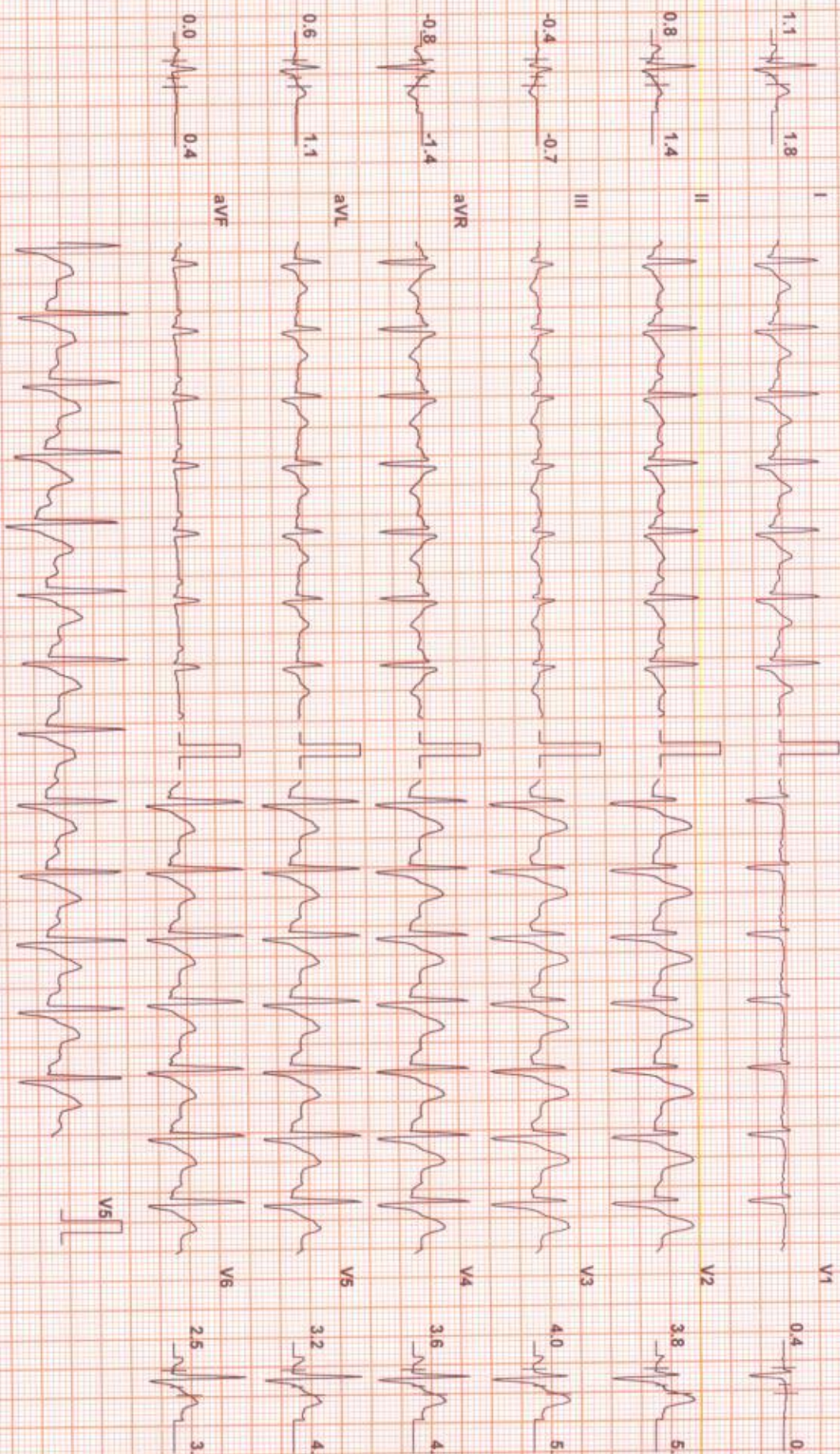


Chart Speed: 25 mm/sec  
Scale: Standard V4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

fs0 = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



MR. KUMAR GAURAV (36 M)

SUBURBAN DIAGNOSTICS THANE KASARVADAVALI

Test Report

ID: 2406221936

Date: 02-Mar-24

Exec Time: 8 m 12 s Stage Time: 0 m 54 s

HR: 113 bpm

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 156 bpm)

B.P: 190 / 86

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

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

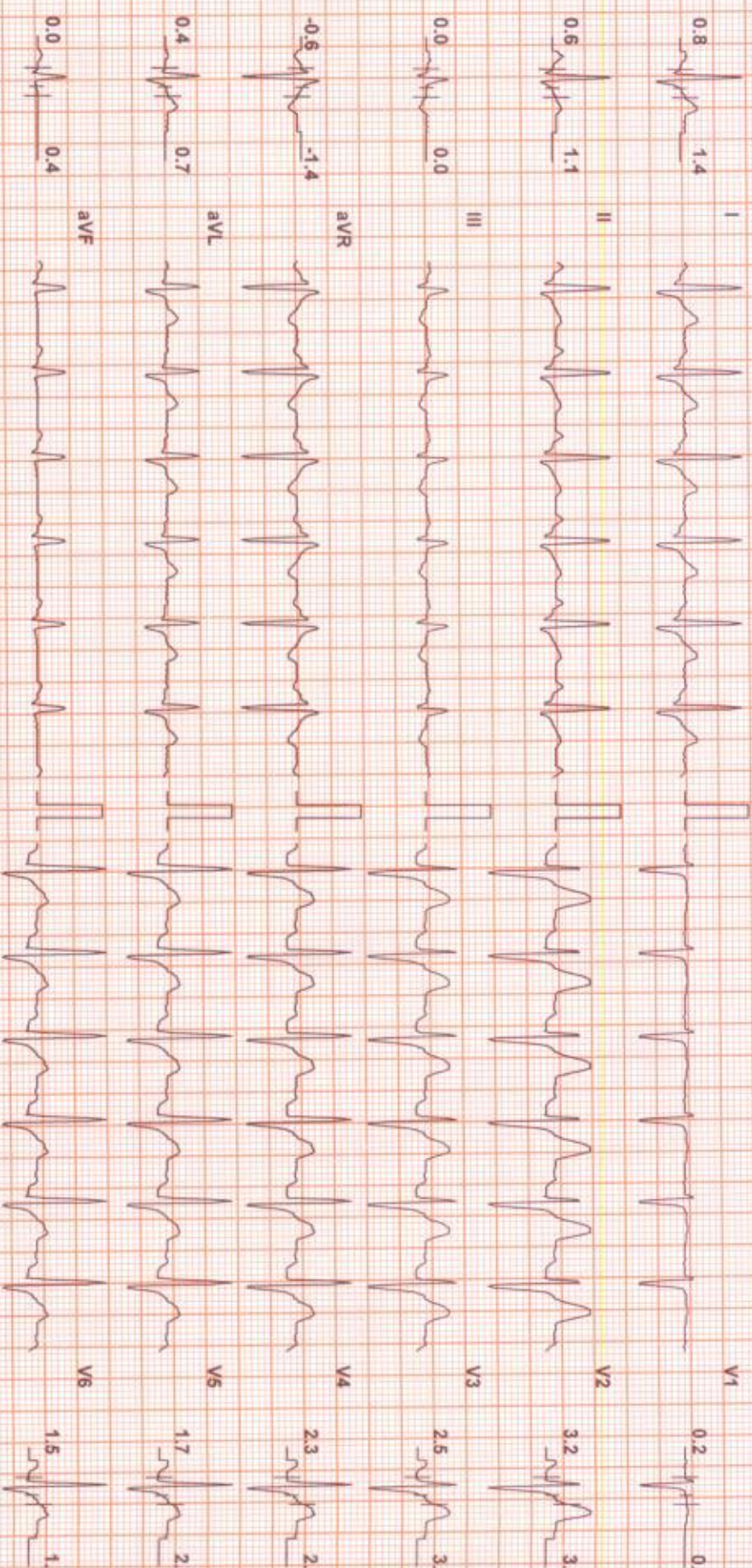


Chart Speed: 25 mm/sec  
Schiller Spindan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



MR. KUMAR GAURAV (36 M)

SUBURBAN DIAGNOSTICS THANE KASARVADAVALI

Test Report

Protocol: Bruce

ID: 2406221936

Date: 02-Mar-24

Exec Time : 8 m 12 s

Stage: Recovery(3)

Speed: 0 mph

Grade: 0 %

(THR: 156 bpm)

B.P: 170 / 86

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

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

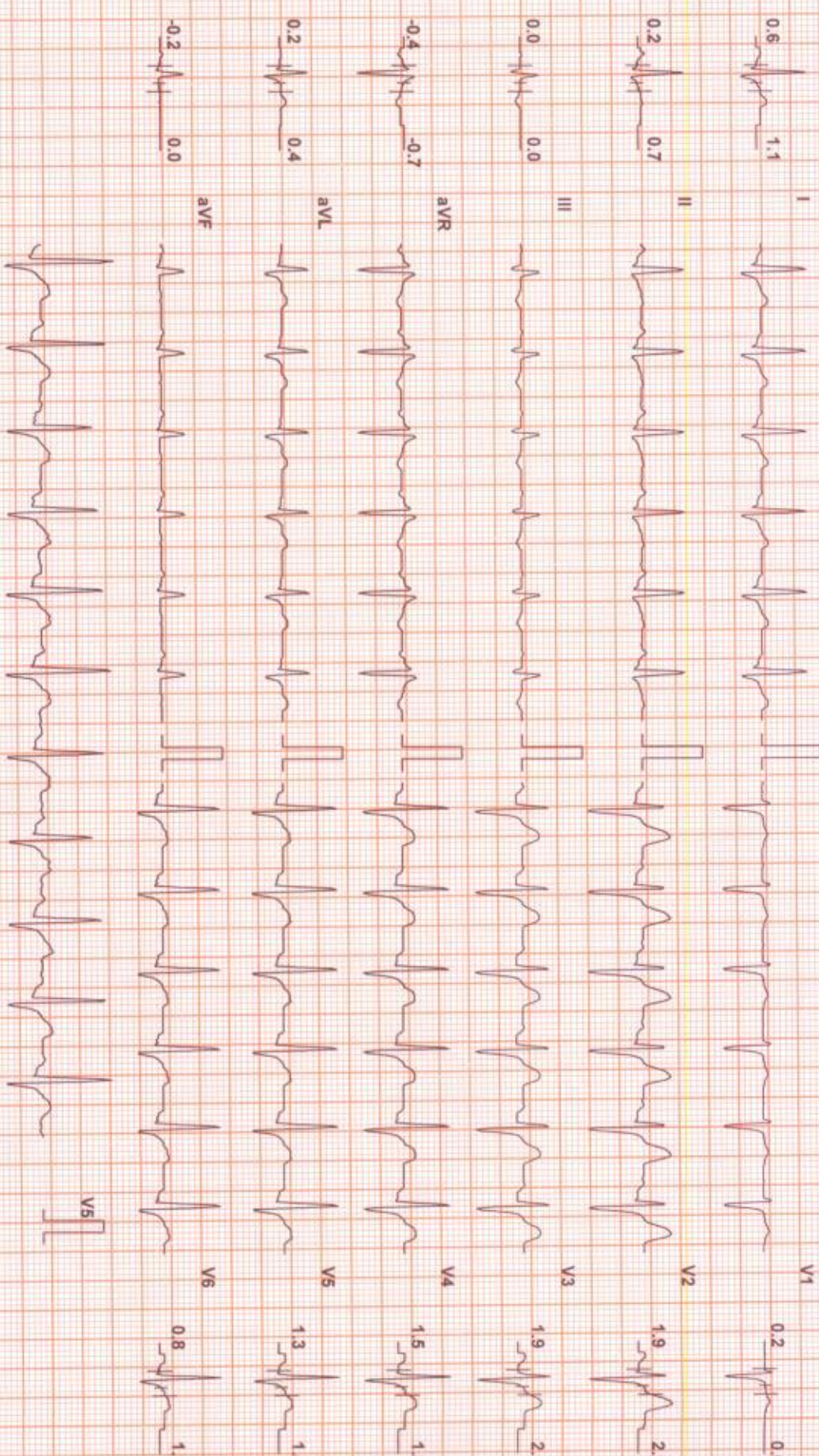


Chart Speed: 25 mm/sec  
Schiller Spenton V47

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R · 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



MR. KUMAR GAURAV (36 M)

ID: 2406221936

Date: 02-Mar-24

Exec Time : 8 m 12 s Stage Time : 0 m 54 s

HR: 105 bpm

SUBURBAN DIAGNOSTICS THANE KASARVADAVALI

Test Report

Protocol: Bruce

Stage: Recovery(4)

Speed: 0 mph

Grade: 0 %

(THR: 156 bpm)

B.P: 150 / 86

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

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

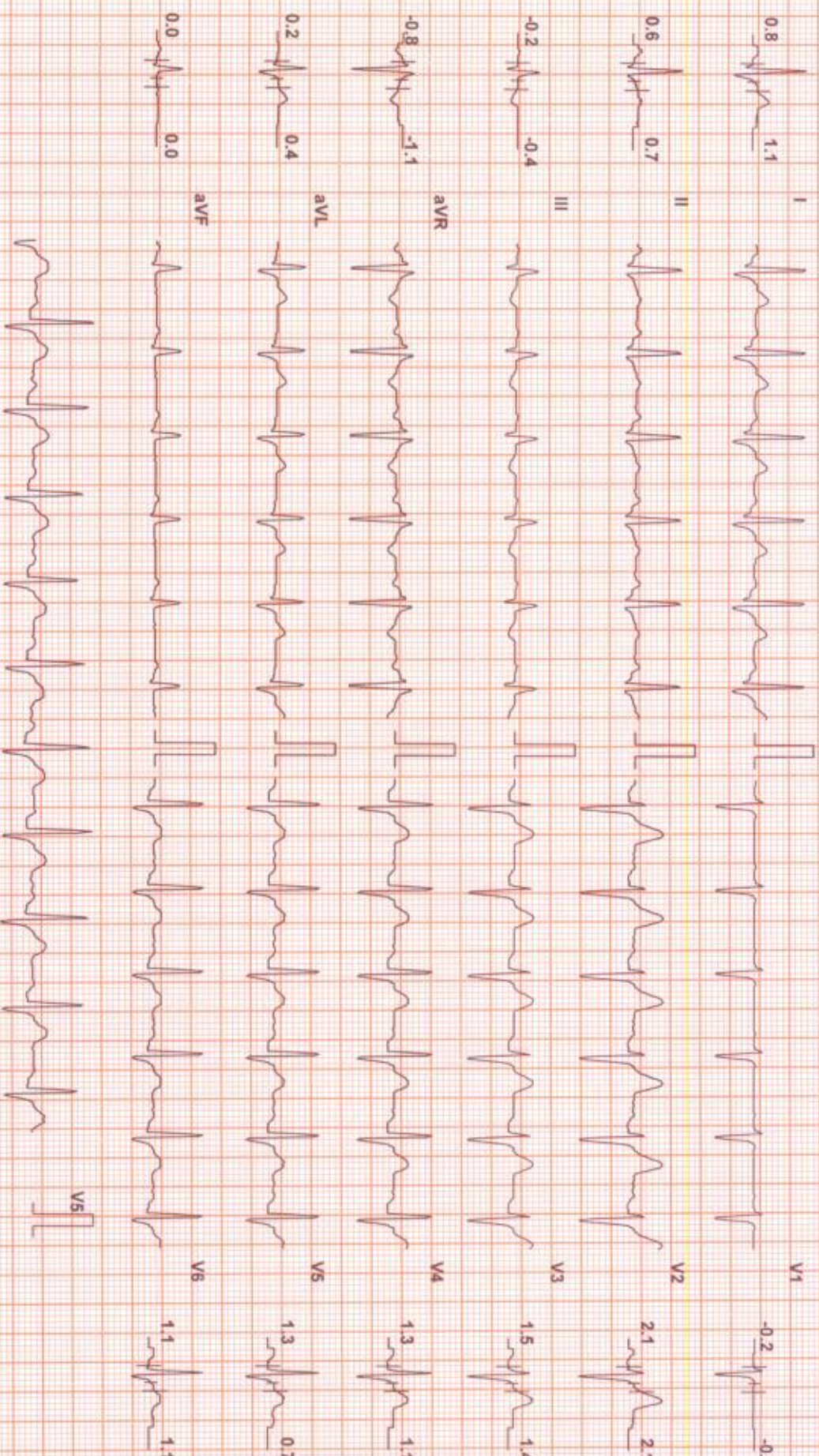


Chart Speed: 25 mm/sec  
Schwinn Spandiv V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

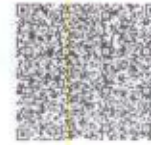
50 ± R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median





Use a QR Code Scanner  
Application To Scan the Code

CID : 2406221936  
Name : Mr KUMAR GAURAV  
Age / Sex : 36 Years/Male  
Ref. Dr :  
Reg. Location : Thane Kasarvadavali Main Centre  
Reg. Date : 02-Mar-2024  
Reported : 02-Mar-2024 / 11:23

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T

**USG ABDOMEN AND PELVIS**

**LIVER:** Liver is normal in size and shows mild fatty infiltrations. There is no intra-hepatic biliary radical dilatation. No evidence of any focal lesion.

**GALL BLADDER:** Gall bladder is distended and appears normal. Wall thickness is within normal limits. There is no evidence of any calculus.

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

**PANCREAS:** Visualised pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification. Pancreatic duct is not dilated.

**KIDNEYS:** Right kidney measures 11.3 x 4.9 cm. Left kidney measures 10.5 x 5.3 cm. Both kidneys are normal in size, 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, normal echotexture and measures 2.8 x 3.8 x 2.9 cm in dimension and 17.3 cc in volume. No evidence of any focal lesion. Median lobe does not show significant hypertrophy.

No free fluid or significant lymphadenopathy is seen. **Bowel gas ++**

**IMPRESSION:**  
**MILD FATTY LIVER.**

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.

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

*G. R. Fartade*

Dr. GAURAV FARTADE  
MBBS, DMRE  
Reg No -2014/04/1786  
Consultant Radiologist

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024030210092690>



CID : 2406221936  
Name : Mr KUMAR GAURAV  
Age / Sex : 36 Years/Male  
Ref. Dr :  
Reg. Location : Thane Kasarvadavali Main Centre

Reg. Date : 02-Mar-2024  
Reported : 02-Mar-2024 / 11:09

### X-RAY CHEST PA VIEW

Both lung fields are clear.  
Both costo-phrenic angles are clear.  
The cardiac size and shape are within normal limits.  
The domes of diaphragm are normal in position and outlines.  
The skeleton under review appears normal.

**IMPRESSION:**  
**NO SIGNIFICANT ABNORMALITY IS DETECTED.**

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

*G. R. Fartade*

Dr.GAURAV FARTADE  
MBBS, DMRE  
Reg No -2014/04/1786  
Consultant Radiologist

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024030210092700>

CID	: 2406221936	SID	: 177806731345
Name	: MR.KUMAR GAURAV	Registered	: 02-Mar-2024 / 10:08
Age / Gender	: 36 Years / Male	Collected	: 02-Mar-2024 / 10:39
Dr.	: -	Reported	: 02-Mar-2024 / 14:38
Reg. Location	: Thane Kasarvadavali (Main Centre)	Printed	: 04-Mar-2024 / 18:22

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

**CBC (Complete Blood Count), Blood**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>RBC PARAMETERS</u></b>			
Haemoglobin	15.3	13.0-17.0 g/dL	Spectrophotometric
RBC	5.42	4.5-5.5 mil/cmm	Elect. Impedance
PCV	51.0	40-50 %	Measured
MCV	94.1	80-100 fl	Calculated
MCH	28.3	27-32 pg	Calculated
MCHC	30.1	31.5-34.5 g/dL	Calculated
RDW	15.7	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	6960	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	36.2	20-40 %	
Absolute Lymphocytes	2519.5	1000-3000 /cmm	Calculated
Monocytes	7.0	2-10 %	
Absolute Monocytes	487.2	200-1000 /cmm	Calculated
Neutrophils	52.8	40-80 %	
Absolute Neutrophils	3674.9	2000-7000 /cmm	Calculated
Eosinophils	3.8	1-6 %	
Absolute Eosinophils	264.5	20-500 /cmm	Calculated
Basophils	0.2	0.1-2 %	
Absolute Basophils	13.9	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<b><u>PLATELET PARAMETERS</u></b>			
Platelet Count	153000	150000-400000 /cmm	Elect. Impedance
MPV	12.5	6-11 fl	Calculated
PDW	26.4	11-18 %	Calculated
<b><u>RBC MORPHOLOGY</u></b>			
Hypochromia	-		
Microcytosis	-		
Macrocytosis	-		

<b>CID</b>	: 2406221936	<b>SID</b>	: 177806731345
<b>Name</b>	: MR.KUMAR GAURAV	<b>Registered</b>	: 02-Mar-2024 / 10:08
<b>Age / Gender</b>	: 36 Years / Male	<b>Collected</b>	: 02-Mar-2024 / 10:39
<b>Dr.</b>	: -	<b>Reported</b>	: 02-Mar-2024 / 14:38
<b>Reg. Location</b>	: Thane Kasarvadavali (Main Centre)	<b>Printed</b>	: 04-Mar-2024 / 18:22

Anisocytosis	Mild
Poikilocytosis	Mild
Polychromasia	-
Target Cells	-
Basophilic Stippling	-
Normoblasts	-
Others	Elliptocytes-occasional
WBC MORPHOLOGY	-
PLATELET MORPHOLOGY	Megaplatelets seen on smear
COMMENT	-

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR	<b>20</b>	2-15 mm at 1 hr.	Sedimentation
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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 G B Road Lab, Thane West

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

<b>CID</b> : 2406221936	<b>SID</b> : 177806731345
<b>Name</b> : MR.KUMAR GAURAV	<b>Registered</b> : 02-Mar-2024 / 10:08
<b>Age / Gender</b> : 36 Years / Male	<b>Collected</b> : 02-Mar-2024 / 10:39
<b>Dr.</b> : -	<b>Reported</b> : 02-Mar-2024 / 14:38
<b>Reg. Location</b> : Thane Kasarvadavali (Main Centre)	<b>Printed</b> : 04-Mar-2024 / 18:22

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	87.9	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	113.2	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.58	0.3-1.2 mg/dl	Vanadate oxidation
BILIRUBIN (DIRECT), Serum	0.18	0-0.3 mg/dl	Vanadate oxidation
BILIRUBIN (INDIRECT), Serum	0.40	<1.2 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.7	5.7-8.2 g/dL	Biuret
ALBUMIN, Serum	4.6	3.2-4.8 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	31.7	<34 U/L	Modified IFCC
SGPT (ALT), Serum	40.5	10-49 U/L	Modified IFCC
GAMMA GT, Serum	18.8	<73 U/L	Modified IFCC
ALKALINE PHOSPHATASE, Serum	134.8	46-116 U/L	Modified IFCC
BLOOD UREA, Serum	21.4	19.29-49.28 mg/dl	Calculated
BUN, Serum	10.0	9.0-23.0 mg/dl	Urease with GLDH
CREATININE, Serum	0.64	0.73-1.18 mg/dl	Enzymatic

**Note: Kindly note in change in reference range w.e.f. 07-09-2023**

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<b>Age / Gender</b>	: 36 Years / Male	<b>Collected</b>	: 02-Mar-2024 / 10:39
<b>Dr.</b>	: -	<b>Reported</b>	: 02-Mar-2024 / 14:38
<b>Reg. Location</b>	: Thane Kasarvadavali (Main Centre)	<b>Printed</b>	: 04-Mar-2024 / 18:22

eGFR, Serum	126	(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	5.8	3.7-9.2 mg/dl	Uricase/ Peroxidase
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 G B Road Lab, Thane West

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

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

<b><u>PARAMETER</u></b>	<b><u>RESULTS</u></b>	<b><u>BIOLOGICAL REF RANGE</u></b>	<b><u>METHOD</u></b>
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.1	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	99.7	mg/dl	Calculated

**Intended use:**

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

**Clinical Significance:**

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

**Test Interpretation:**

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

**Factors affecting HbA1c results:**

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

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

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

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

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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	Acidic (6.0)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.015	1.010-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	50	-	-
<b><u>CHEMICAL EXAMINATION</u></b>			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Leukocytes(Pus cells)/hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	3-4		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	1-2	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

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



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

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	O
Rh TYPING	Positive

NOTE: Test performed by Semi- automated column agglutination technology (CAT)

Note: This sample has also been tested for Bombay group/Bombay phenotype/Oh using anti H lectin

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 G B Road Lab, Thane West

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

<b><u>PARAMETER</u></b>	<b><u>RESULTS</u></b>	<b><u>BIOLOGICAL REF RANGE</u></b>	<b><u>METHOD</u></b>
CHOLESTEROL, Serum	<b>222.8</b>	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	137.0	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	Enzymatic colorimetric
HDL CHOLESTEROL, Serum	49.6	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Elimination/ Catalase
NON HDL CHOLESTEROL, Serum	<b>173.2</b>	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	<b>145.8</b>	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	27.4	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.5	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.9	0-3.5 Ratio	Calculated

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab  
\*\*\* 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	5.6	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	15.7	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	1.37	0.35-5.5 microlU/ml	ECLIA

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West  
 \*\*\* End Of Report \*\*\*

PROVISIONAL REPORT