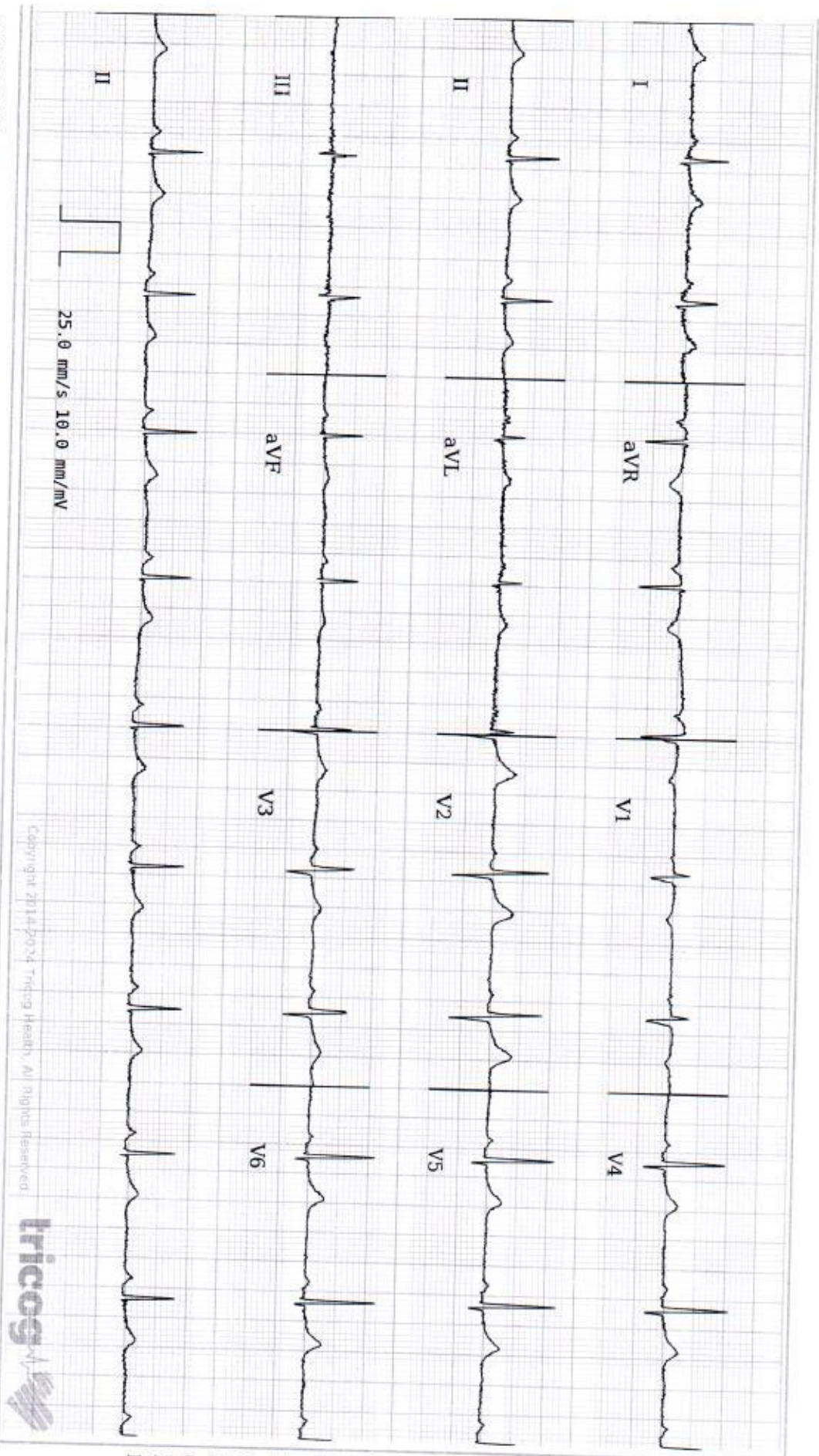


Patient Name: ANJANA NARAYAN
Patient ID: 2426208814

SUBURBAN DIAGNOSTICS - KANDIVALI EAST

Date and Time: 18th Sep 24 9:59 AM



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Age 47 NA NA
years months days

Gender Female

Heart Rate 62bpm

Patient Vitals

BP: 110/80 mmHg
Weight: 58 kg
Height: 152 cm
Pulse: NA
Spo2: NA
Resp: NA
Others:

Measurements

QRSD: 66ms
QT: 408ms
QTcB: 414ms
PR: 150ms
P-R-T: 51° 51° 29°

REPORTED BY

[Signature]

DR AKHIL PARULEKAR
MBBS MD MEDICINE DNB Cardiology
Cardiologist
2012082483

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

Disclaimer: 1) Analyses in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. 2) Patient vitals are as entered by the clinician and not derived from the ECG.

Date: - 18/9/2024

CID: 24262088/4

Name: - Mrs. Anjana Narayan

Sex/Age: 47/F

EYE CHECK UP

Chief complaints: NO

Systemic Diseases: NO

Past history: NO

Unaided Vision:

Aided Vision:

Refraction:

(Right Eye)

(Left Eye)

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

Colour Vision: Normal / Abnormal

Remark: Normal

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.
Row House No. 3, Aangan,
Thakur Village, Kandivali (east),
Mumbai - 400101.
Tel : 61700000

Name : <i>Ajaya Nayyan</i>	Age / Gender <i>47 F</i>
Dr. :	Date : - <i>18/9/24</i>

GYNAEC EXAMINATION REPORTS

PERSONAL HISTORY

CHIEF COMPLAINTS : *NO*

MARITAL STATUS : *married*

MENSTRUAL HISTORY :

(i) MENARCHE : *@ age - 15 yrs.*

(ii) PRESENT MENSTRUAL HISTORY : *Postmenopausal*

(iii) PAST MENSTRUAL HISTORY :

OBSTETRIC HISTORY : *G1P2 L2 A2*

PAST HISTORY : *NIL*

PREVIOUS SURGERIES : *Eng. Abscess @ buttock.*

ALLERGIES : *NO*

FAMILY HISTORY : *Mother - DM*

DRUG HISTORY : *NO*

BOWEL HABITS :

BLADDER HABITS : *(N)*

Dr. Jagruti Dhale
MBBS
Consultant Physician
Reg.No.69548

Name : <i>Aryana Narayan</i>	Age / Gender : <i>47/f</i>
Dr. :	Date : <i>18/9/24</i>

GYNAEC EXAMINATION REPORTS

GENERAL EXAMINATION

TEMPERATURE :

RS :

PULSE :

CVs :

BP :

Breasts :

Per Abdomen :-

Per vaginal :

RECOMMENDATIONS

ADVISE :

Jagruti Dhale
Dr. Jagruti Dhale
MBBS
Consultant Physician
Reg.No.69548

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2426208814
Name : Mrs Anjana narayan
Age / Sex : 47 Years/Female
Ref. Dr :
Reg. Location : Kandivali East Main Centre
Reg. Date : 18-Sep-2024
Reported : 18-Sept-2024 / 13:01

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (14.4cm), shape and smooth margins. **It shows bright parenchymal echo pattern.** The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein and CBD appears normal.

GALL BLADDER:

The gall bladder is physiologically distended and appears normal. No evidence of gall stones or mass lesions seen

PANCREAS:

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

KIDNEYS:

Both the kidneys are normal in size shape and echotexture.

No evidence of any calculus, hydronephrosis or mass lesion seen.

Right kidney measures 9.4 x 4.5 cm. Left kidney measures 8.8 x 5.0 cm.

SPLEEN:

The spleen is normal in size (7.7cm) and echotexture. No evidence of focal lesion is noted.

There is no evidence of any lymphadenopathy or ascites.

URINARY BLADDER:

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

UTERUS:

The uterus is anteverted and appears normal. It measures 6.0 x 3.2 x 3.9 cm in size. The endometrial thickness is 5.5 mm.

OVARIES:

Both the ovaries are well visualised and appears normal.

There is no evidence of any ovarian or adnexal mass seen.

Right ovary = 2.4 x 1.2 cm Left ovary = 2.7 x 0.9 cm

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024091809001671>

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CID : 2426208814
Name : Mrs Anjana narayan
Age / Sex : 47 Years/Female
Ref. Dr :
Reg. Location : Kandivali East Main Centre

Reg. Date : 18-Sep-2024
Reported : 18-Sept-2024 / 13:01

IMPRESSION:-
GRADE I FATTY LIVER.

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

DR. RAVI KUMAR
 MBBS, MD RADIODIANOSIS
 MMC REG NO. 2008/04/1721

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024091809001671>

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Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2426208814
 Name : Mrs Anjana narayan
 Age / Sex : 47 Years/Female
 Ref. Dr :
 Reg. Location : Kandivali East Main Centre
 Reg. Date : 18-Sep-2024
 Reported : 18-Sept-2024 / 14:12

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

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

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

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024091809001770>

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Page no 1 of 1

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8/Maliyana NARAYAN / 47 Yrs / F / 152 Cms / 58 Kg Date: 07 - 09 - 2024 08:39:59 AM ReId By : ARCOFEMI

REPORT :

Heart Rate 72.0 bpm Systolic BP 160.0 mmHg Diastolic BP 80.0 mmHg
 Exercise Time 07:14 Mins. METS 8.4
 Test End Reason : Heart Rate Achieved Target Heart Rate 173.0

TEST OBJECTIVE	:	ROUTINE CHECK UP
RISK FACTOR	:	NO
ACTIVITY	:	MODERATE ACTIVE
MEDICATION	:	NO
REASON FOR TERMINATION	:	HEART RATE ACHIEVED
EXERCISE TOLERANCE	:	GOOD
EXERCISE INDUCED ARRHYTHMIAS	:	NO
HAEMODYNAMIC RESPONSE	:	NORMAL
CHRONOTROPIC RESPONSE	:	NORMAL
FINAL IMPRESSION	:	NO SIGNIFICANT ST T CHANGES NOTED NO ANGINA STRESS TEST IS NEGATIVE FOR EXERCISE INDUCED ISCHAEMIC HEART DISEASE FOR GIVEN DURATION OF EXERCISE.

DISCLAIMER Negative test does not rule out coronary artery disease. Positive stress test is suggestive of but not confirmative of coronary artery disease. Hence clinical correlation is mandatory.

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.

Row House No. 3, Aangan,
 Thakur Village, Kandivadi (east),
 Mumbai - 400101.
 Tel : 61700000

Dr. Akhil P. Parulekar.

MBBS, MD, Medicine
 Cardiology
 Reg. No. 2012002483

Doctor : DR AKHIL PARULEKAR

SUBURBAN DIAGNOSTIC KANDIVALI EAST

Report



Email:

81 (2426208814) / ANJANA NARAYAN / 47 Yrs / F / 152 Cms / 58 Kg
 Date: 07 - 09 - 2024 08:39:59 AM Field By : ARCOFEMI Examined By: DR AKHIL PARULEKAR

Stage	Time	Duration	Speed(kmph)	Elevation	METs	Rate	%THR	BP	FFP	PVC	Comments
Supine	00:05	0:05	00.0	00.0	01.0	067	39 %	110/80	073	00	
Standing	00:27	0:22	00.0	00.0	01.0	072	42 %	110/80	079	00	
HV	00:34	0:07	00.0	00.0	01.0	070	40 %	110/80	077	00	
ExStart	00:59	0:25	00.0	00.0	01.0	072	42 %	110/80	079	00	
BRUCE Stage 1	03:59	3:00	02.7	10.0	04.7	110	64 %	110/80	121	00	
BRUCE Stage 2	06:59	3:00	04.0	12.0	07.1	129	75 %	140/80	180	00	
PeakEx	08:13	1:14	05.5	14.0	08.4	149	86 %	160/80	238	00	
Recovery	09:13	1:00	00.0	00.0	01.1	108	62 %	160/80	172	00	
Recovery	09:22	1:10	00.0	00.0	01.0	096	55 %	160/80	153	00	

FINDINGS :

Exercise Time : 07:14
 Initial HR (ExStrt) : 72 bpm 42% of Target 173
 Initial BP (ExStrt) : 110/80 (mm/Hg)
 Max Workload Attained : 8.4 Fair response to induced stress
 Duke Treadmill Score : 00.6
 Test End Reasons : Heart Rate Achieved

Max HR Attained: 149 bpm 86% of Target 173
 Max BP Attained: 160/80 (mm/Hg)

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 Mumbai - 400101.
 Tel : 61700000

Dr. Akhil P. Parulekar.
 MBBS, MD, Medicine
 DNB Cardiology
 Reg. No. 2012082483

Doctor : DR AKHIL P PARULEKAR

SUBURBAN DIAGNOSTIC KANDIVALI EAST

SUPINE (00:05)

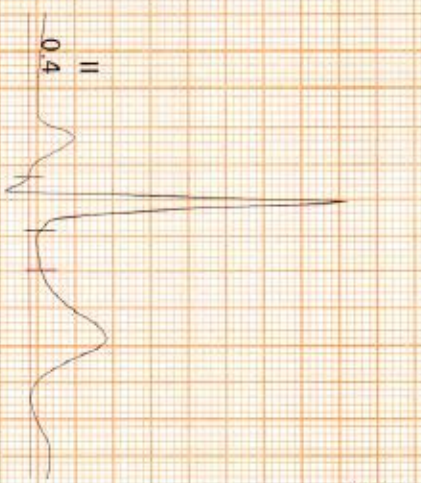


81 (2426208914) / ANJANA NARAYAN / 47 Yrs / F / 152 Cms / 58 Kg / HR : 66

Date: 07 - 09 - 2024 08:39:59 AM METS: 1.0/66 bpm 38% of THR BP: 110/80 mmHg Raw ECG/BLC On/Notch On/HF 0.05 Hz/AF 35 Hz

4X 80 ms Post J

ExTime: 00:00:0.0 Kempf: 0.0%
25 mm/Sec: 1.0 Cm/mV



REMARKS:

SUBURBAN DIAGNOSTIC KANDIVALI EAST

STANDING (00:22)



81 (2426208814) / ANJANA NARAYAN / 47 Yrs / F / 152 Cms / 58 Kg / HR : 72

Date: 07 - 09 - 2024 08:39:59 AM METS: 1.0/72 bpm 42% of THR BP: 110/80 mmHg Raw ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

4X 80 ms Post J

ExTime: 00:00 0.0 Km/ph, 0.0%

25 mm/Sec 1.0 Cm/mV

I 0.2
STL 0.2
STB 0.4



V1 0.1
0.0



II 0.3
0.1



V2 0.3
0.3
0.6



III 0.1
0.1
0.3



V3 0.3
0.3
0.4



aVR -0.2
-0.2



V4 0.3
0.3
0.3



aVL 0.1
0.1
0.3



V5 0.3
0.3
0.2



aVF 0.2
0.2
0.1



V6 0.4
0.4
0.1



REMARKS
II aVR aVF V2 V4 V6
III aVL V1 V3 V5

SUBURBAN DIAGNOSTIC KANDIVALI EAST

HV (00:07)



81 (2426208814) / ANJANA NARAYAN / 47 Yrs / F / 152 Cms / 58 Kg / HR : 70

Date: 07 - 09 - 2024 08:39:59 AM

METS: 1.0 / 70 bpm 40% of THR BP: 110/80 mmHg Raw ECG/BLC On/ Natch On/HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 0.0 Km/h 0.0%

4X 80 ms Post J

25 mm/Sec 1.0 Cm/mV



REMARKS
II avR avF V2 V4 V6

SUBURBAN DIAGNOSTIC KANDIVALI EAST

EXSiH



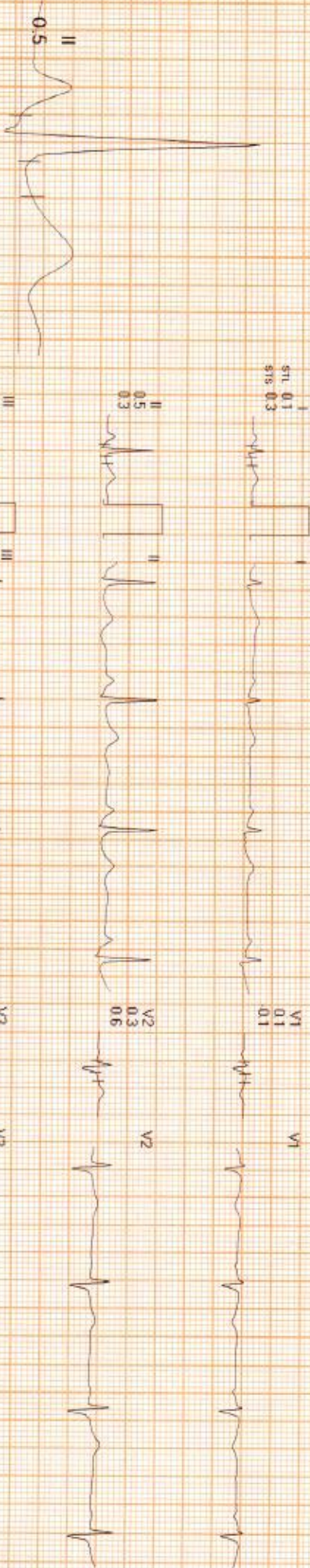
81 (2426208814) / ANJANA NARAYAN / 47 Yrs / F / 152 Cms / 58 Kg / HR : 72

Date: 07 - 09 - 2024 08:39:59 AM METS: 1.0/ 72 bpm 42% of T-HR BP: 110/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 0.0 KmPh, 0.0%

4X 80 ms Post J

25 mm/Sec 1.0 Cm/mV



ST1 0.1
ST2 0.3

V1 0.1
V2 0.1

II 0.5
III 0.3

V2 0.3
V3 0.6

III 0.4
aVR 0.1

V3 0.4
V4 0.4

aVR 0.3
aVL 0.3

V4 0.4
V5 0.3

aVL 0.1
aVF 0.2

V5 0.3
V6 0.2

aVF 0.4
V6 0.1

V6 0.4
V6 0.2

REMARKS: I II aVR aVL aVF V1 V2 V3 V4 V5 V6



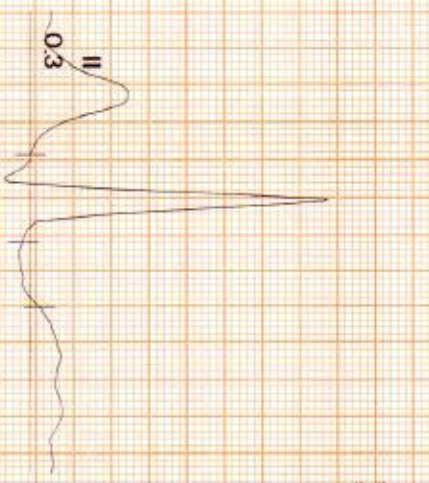
81 (2426208814) / ANJANA NARAYAN / 47 Yrs / F / 152 Cms / 58 Kg / HR : 110

Date: 07 - 09 - 2024 08:39:59 AM METS: 4.7/110 bpm 64% of THR BP: 110/80 mmHg Raw ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

EXTime: 03:00 2.7 Km/h 10.0%

4X 80 ms Post J

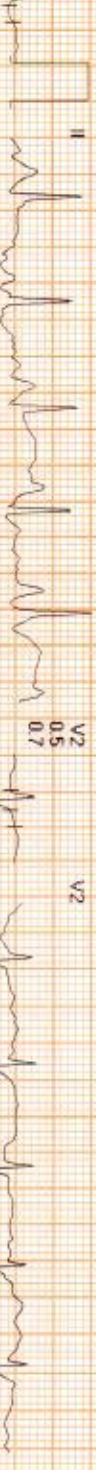
25 mm/Sec 1.0 On/mV



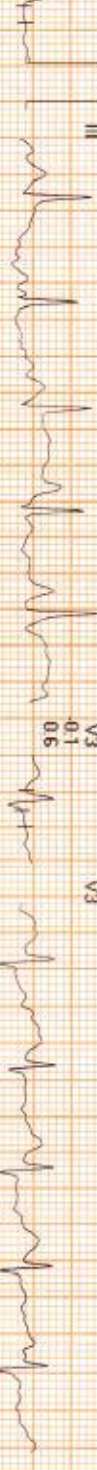
I
SRL 0.5
SRS 0.4



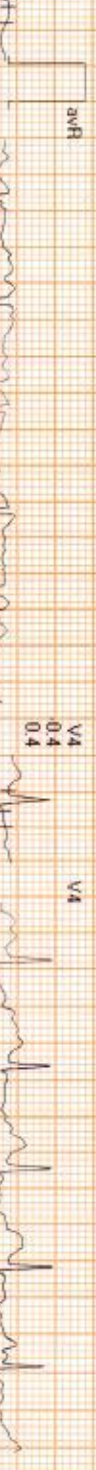
II
0.3
0.6



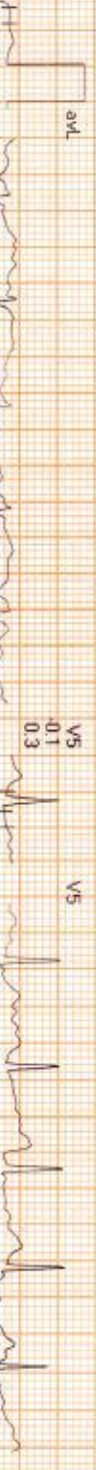
III
-0.1
0.3



aVR
-0.3
-0.5



aVL
0.3
0.0



aVF
0.1
0.5



REMARKS
II aVR aVF V2 V4 V6

SUBURBAN DIAGNOSTIC KANDIVALI EAST

BRUCE : Stage 2 (03:00)



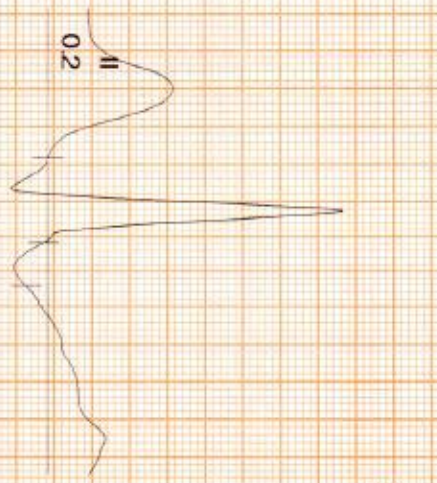
81 (2426208814) / ANJANA NARAYAN / 47 Yrs / F / 152 Cms / 58 Kg / HR : 129

Date: 07 - 09 - 2024 08:39:59 AM METS: 7.1 / 129 bpm 75% of THR BP: 16/80 mmHg Raw ECG/BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz

EXTime: 06:00 4.0 Km/h 12.0%

4X 50 mS Post J

25 mm/Sec 1.0 Cm/mV



REMARKS

SUBURBAN DIAGNOSTIC KANDIVALI EAST

PeakEX



81 (2426208914) / ANJANA NARAYAN / 47 Yrs / F / 152 Cms / 58 Kg / HR : 149

Date: 07 - 09 - 2024 08:39:59 AM

METS: 8.4 / 149 bpm 86% of THR

BP: 160/80 mmHg Raw ECG/BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 07:14 5.5 Kmph 140%

4X

30 ms Post J

25 mm/Sec 1.0 Cm/mV

91L 0.1
91R 0.1
STS 0.1

V1 0.3
V2 0.5
V3 0.8

V1

II 1.3
III 1.4
aVR 0.5
aVL 0.8
aVF 1.0

V4 1.1
V5 1.1
V6 1.7

V2

II 1.3
III 1.4
aVR 0.5
aVL 0.8
aVF 1.0

V3 0.8
V4 1.1
V5 1.1
V6 1.7

V3

II 1.3

II 1.3
III 1.4
aVR 0.5
aVL 0.8
aVF 1.0

V4 1.1
V5 1.1
V6 1.7

V4

II 1.3
III 1.4
aVR 0.5
aVL 0.8
aVF 1.0

V5 1.1
V6 1.7

V5

II 1.3
III 1.4
aVR 0.5
aVL 0.8
aVF 1.0

V6 1.7

V6

II 1.3
III 1.4
aVR 0.5
aVL 0.8
aVF 1.0

V6 1.7

V6

II 1.3
III 1.4
aVR 0.5
aVL 0.8
aVF 1.0

V6 1.7

V6

II 1.3
III 1.4
aVR 0.5
aVL 0.8
aVF 1.0

V6 1.7

V6

II 1.3
III 1.4
aVR 0.5
aVL 0.8
aVF 1.0

V6 1.7

V6

I III aVL V1 V3 V5

aVR 0.5
aVL 0.8
aVF 1.0

V6 1.7

V6

II aVR aVL V1 V3 V5

aVR 0.5
aVL 0.8
aVF 1.0

V6 1.7

V6

REMARKS



SUBURBAN DIAGNOSTIC KANDIVALI EAST

Recovery : (01:00)



81 (2426208814) / ANJANA NARAYAN / 47 Yrs / F / 152 Cms / 58 Kg / HR : 108

Date: 07 - 09 - 2024 08:39:59 AM METS: 1.1 / 108 bpm 62% of THR BP: 160/80 mmHg Rew ECG/ BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz

4X 80 mS Post J

ExtTime: 07:14 0.0 KmPl. 0.0%

25 mm/Sec. 1.0 Cm/mV

sin 0.2
sin 0.4

V1 0.2
V2 0.1

V1

II 0.5
III 1.3

V2 0.4
V3 0.7

V2

III 0.3
aVR -0.4
aVL -0.3

V3 0.5
V4 1.3

V3

aVR -0.4
aVL -0.3

V4 0.2
V5 0.9

V4

aVL 0.0
aVF 0.3

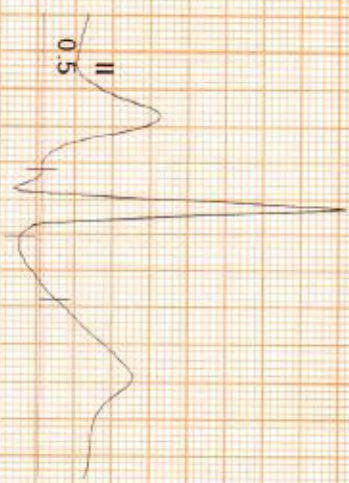
V5 0.1
V6 0.7

V5

aVF 0.4
V1 1.1

V6 0.1
V7 0.7

V6



REMARKS
II aVR aVF V2 V4 V6

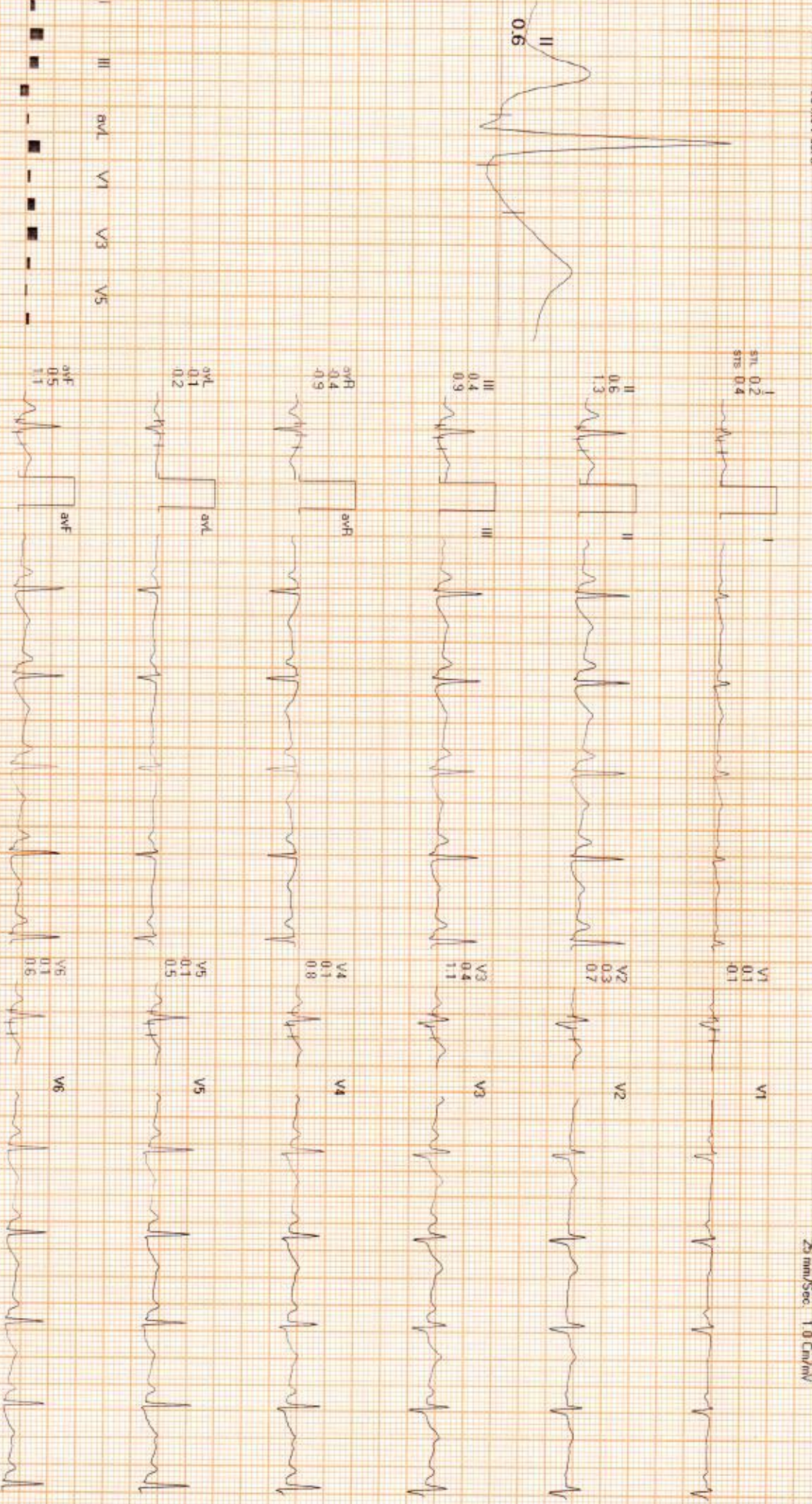
SUBURBAN DIAGNOSTIC KANDIVALI EAST

Recovery : (01:09)

81 (2426208814) / ANJANA NARAYAN / 47 Yrs / F / 152 Cms / 58 Kg / HR 96



Date: 07 - 09 - 2024 08:39:59 AM METS: 1.0/96 bpm 55% of THR BP: 160/80 mmHg Raw ECG/BLC On/Notch On/FF 0.05 Hz LF 35 Hz
4X 80 ms Post J EXTime: 07:14 0.0 KmPh 0.0%



REMARKS



CID : 2426208814
Name : MRS.ANJANA NARAYAN
Age / Gender : 47 Years / Female
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

Collected : 18-Sep-2024 / 09:10
Reported : 18-Sep-2024 / 14:24

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO

CBC (Complete Blood Count), Blood

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
<u>RBC PARAMETERS</u>			
Haemoglobin	12.4	12.0-15.0 g/dL	Spectrophotometric
RBC	4.38	3.8-4.8 mil/cmm	Elect. Impedance
PCV	37.8	36-46 %	Measured
MCV	86	80-100 fl	Calculated
MCH	28.4	27-32 pg	Calculated
MCHC	32.9	31.5-34.5 g/dL	Calculated
RDW	15.7	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	7600	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	31.7	20-40 %	
Absolute Lymphocytes	2409.2	1000-3000 /cmm	Calculated
Monocytes	5.7	2-10 %	
Absolute Monocytes	433.2	200-1000 /cmm	Calculated
Neutrophils	59.4	40-80 %	
Absolute Neutrophils	4514.4	2000-7000 /cmm	Calculated
Eosinophils	2.6	1-6 %	
Absolute Eosinophils	197.6	20-500 /cmm	Calculated
Basophils	0.6	0.1-2 %	
Absolute Basophils	45.6	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	292000	150000-400000 /cmm	Elect. Impedance
MPV	8.8	6-11 fl	Calculated
PDW	14.5	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			
Hypochromia	-		
Microcytosis	-		



Use a QR Code Scanner
Application To Scan the Code

CID : 2426208814
Name : MRS.ANJANA NARAYAN
Age / Gender : 47 Years / Female
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

Collected : 18-Sep-2024 / 09:10
Reported : 18-Sep-2024 / 12:48

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 31 2-20 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 ***



Bmhasakar

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



CID : 2426208814
Name : MRS.ANJANA NARAYAN
Age / Gender : 47 Years / Female
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma Fasting	104.1	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP	126.7	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase

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Reg. Location : Kandivali East (Main Centre)

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
KIDNEY FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
BLOOD UREA, Serum	22.1	12.8-42.8 mg/dl	Kinetic
BUN, Serum	10.3	6-20 mg/dl	Calculated
CREATININE, Serum	0.78	0.51-0.95 mg/dl	Enzymatic
eGFR, Serum	94	(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

TOTAL PROTEINS, Serum	7.4	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.3	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	3.1	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.4	1 - 2	Calculated
URIC ACID, Serum	4.4	2.4-5.7 mg/dl	Enzymatic
PHOSPHORUS, Serum	4.2	2.7-4.5 mg/dl	Molybdate UV
CALCIUM, Serum	9.7	8.6-10.0 mg/dl	N-BAPTA
SODIUM, Serum	140	135-148 mmol/l	ISE
POTASSIUM, Serum	4.4	3.5-5.3 mmol/l	ISE
CHLORIDE, Serum	102	98-107 mmol/l	ISE

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



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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.5	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	111.1	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 ***



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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
URINE EXAMINATION REPORT

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>PHYSICAL EXAMINATION</u>			
Color	Pale yellow	Pale Yellow	-
Transparency	Clear	Clear	-
<u>CHEMICAL EXAMINATION</u>			
Specific Gravity	1.010	1.002-1.035	Chemical Indicator
Reaction (pH)	8.0	5-8	pH Indicator
Proteins	Absent	Absent	Protein error principle
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
<u>MICROSCOPIC EXAMINATION</u>			
(WBC)Pus cells / hpf	3-4	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	8-10	0-5/hpf	
Hyaline Casts	Absent	Absent	
Pathological cast	Absent	Absent	
Calcium oxalate monohydrate crystals	Absent	Absent	
Calcium oxalate dihydrate crystals	Absent	Absent	
Triple phosphate crystals	Absent	Absent	
Uric acid crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	++	0-20/hpf	
Yeast	Absent	Absent	
Others	-		



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Note:

- Microscopic examination performed by Automated Cuvette based technology.
- All the Abnormal results are confirmed by reagent strips and Manual method.
- The Microscopic examination findings are mentioned in decimal numbers as the arithmetic mean of the multiple fields scanned using microscopy.

Reference: Pack Insert.

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



Dr.JAGESHWAR MANDAL
CHOUPAL
MBBS, DNB PATH
Pathologist



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Collected : 18-Sep-2024 / 09:10
Reported : 18-Sep-2024 / 15:03

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
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 ***



Dr. Vrushi Shroff

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



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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	213.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	135.0	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	46.1	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	166.9	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	140.0	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	26.9	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.6	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	3.0	0-3.5 Ratio	Calculated

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
THYROID FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	5.2	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	16.2	11.5-22.7 pmol/L First Trimester:9.0-24.7 Second Trimester:6.4-20.59 Third Trimester:6.4-20.59	ECLIA
sensitiveTSH, Serum	2.81	0.35-5.5 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0 microU/ml	ECLIA



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Interpretation:

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

Clinical Significance:

- 1)TSH Values between high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2)TSH values may be trasiently altered becuae 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 ***



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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
LIVER FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
BILIRUBIN (TOTAL), Serum	0.68	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.24	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.44	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.4	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.3	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	3.1	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.4	1 - 2	Calculated
SGOT (AST), Serum	30.6	5-32 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	32.9	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	29.3	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	178.0	35-105 U/L	Colorimetric

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*** End Of Report ***



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**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
FUS and KETONES**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

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*** End Of Report ***



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