

PHYSICAL EXAMINATION REPORT

Patient Name	Bhagyashree Kewi.	Sex/Age	F/53
Date	14/4/23	Location	Thane.

History and Complaints

Nil

EXAMINATION FINDINGS:

Height (cms):	160	Temp (0c):	37.2
Weight (kg):	70.7	Skin:	Dry skin (+)
Blood Pressure	130/90	Nails:	NAD.
Pulse	76/min	Lymph Node:	NAD.

Systems :

Cardiovascular:	NAD
Respiratory:	NAD
Genitourinary:	Lump in R7. Breast (1.9)
GI System:	NAD
CNS:	NAD

Impression:

↑ FSR
 ↑ choly
 ↑ LDL
 ↑ SCEPT
 BSL (F) - Impaired.
 ↑ HbA1c
 Urine - Pus cells (10-12/hpf)
 Fatty Liver

Chest Xray → opacities (+)
↑ B/V prominence

Advice:

Repeat
sugar profile,
Lipid Profile
after 6 months

- Low Fat, Low sugar Diet .
- Reg. Exercise .
- Drink Plenty of Liquids .
- Chest Physician's Consultation .

1)	Hypertension:	
2)	IHD	
3)	Arrhythmia	
4)	Diabetes Mellitus	
5)	Tuberculosis	nil
6)	Asthama	
7)	Pulmonary Disease	
8)	Thyroid/ Endocrine disorders	
9)	Nervous disorders	
10)	GI system	
11)	Genital urinary disorder	
12)	Rheumatic joint diseases or symptoms	
13)	Blood disease or disorder	
14)	Cancer/lump growth/cyst	nil
15)	Congenital disease	
16)	Surgeries	
17)	Musculoskeletal System	

PERSONAL HISTORY:

1)	Alcohol	No
2)	Smoking	No
3)	Diet	Mixed
4)	Medication	No



Dr. Manasee Kulkarni
M.B.B.S.
2605/09/3439

0000-0773-5307

NAME: - Bhagyashree Kewi AGE / SEX :- F/53.
REGN NO :- REF DR :-

GYNECOLOGICAL EXAMINATION REPORT

OBSERVED VALUE

TEST DONE

CHIEF COMPLAINTS :-

Nil

MARITAL STATUS :-

Married

MENSTRUAL HISTORY :-

- MENARCHE :- 12 yrs.
- PRESENT MENSTRUAL HISTORY :- Post-Menopausal
- PAST MENSTRUAL HISTORY :- Regular
- OBSTETRIC HISTORY :- G₄ P₂ A₂ 2 Miscarriages
- PAST HISTORY :- Nil
- PREVIOUS SURGERIES :- Nil
- ALLERGIES :- contact Dermatitis d/lz stockings
- FAMILY HISTORY :- Nil

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- DRUG HISTORY :- Nil
- BOWEL HABITS :- 1/2
- BLADDER HABITS :-

PERSONAL HISTORY :-

TEMPERATURE :- 2

RS :-

CVS :-

PULSE / MIN :-

BP (mm of hg):-

BREAST EXAMINATION:-

PER ABDOMEN :-

PRE VAGINAL:-

RECOMMENDATION :-

NAD
76/min
130/90
Lump in R7-Breast (n.)
NAD
Mammography.

Dr. Manasee Kulkarni
M.B.B.S.
2105/09/3439

Date:- 14/11/23

CID:

Name:- B Daggashoa
Kemi

Sex / Age: F 53-

EYE CHECK UP

Chief complaints: RCV

Systemic Diseases: All

Past history: All

Unaided Vision: R 4/60 12 1/2 HVRL 136

Aided Vision: B 12/60 12 1/2 HVRL 136

Refraction:

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

Colour Vision: Normal / Abnormal

Remark: Use over Spectacles

MR. PRAKASH KUDVA
[Signature]
SR. OPTOMETRIST



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CID : 2310416745
Name : MRS.KENI BHAGYASHREE SANJAY
Age / Gender : 53 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 14-Apr-2023 / 08:29
Reported : 14-Apr-2023 / 11:21

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

CBC (Complete Blood Count), Blood

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
RBC PARAMETERS			
Haemoglobin	12.2	12.0-15.0 g/dL	Spectrophotometric
RBC	4.24	3.8-4.8 mil/cmm	Elect. Impedance
PCV	36.8	36-46 %	Measured
MCV	86.6	80-100 fl	Calculated
MCH	28.7	27-32 pg	Calculated
MCHC	33.1	31.5-34.5 g/dL	Calculated
RDW	13.7	11.6-14.0 %	Calculated
WBC PARAMETERS			
WBC Total Count	4630	4000-10000 /cmm	Elect. Impedance
WBC DIFFERENTIAL AND ABSOLUTE COUNTS			
Lymphocytes	25.4	20-40 %	
Absolute Lymphocytes	1176.0	1000-3000 /cmm	Calculated
Monocytes	4.9	2-10 %	
Absolute Monocytes	226.9	200-1000 /cmm	Calculated
Neutrophils	65.9	40-80 %	
Absolute Neutrophils	3051.2	2000-7000 /cmm	Calculated
Eosinophils	3.8	1-6 %	
Absolute Eosinophils	175.9	20-500 /cmm	Calculated
Basophils	0.0	0.1-2 %	
Absolute Basophils	0.0	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
PLATELET PARAMETERS			
Platelet Count	276000	150000-400000 /cmm	Elect. Impedance
MPV	8.5	6-11 fl	Calculated
PDW	10.8	11-18 %	Calculated
RBC MORPHOLOGY			
Hypochromia	-		
Microcytosis	-		

Authenticity Check



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Reported : 14-Apr-2023 / 10:34

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 41 2-30 mm at 1 hr. Sedimentation

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

AREAS OF SPECIAL EXPERTISE

OUR PRESENCE



J. Mujawar

Dr. IMRAN MUJAWAR
M.D (Path)
Pathologist

022-6170-0000



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Reported : 14-Apr-2023 / 11:25

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	109.9	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	98.4	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
KIDNEY FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
BLOOD UREA, Serum	14.4	12.8-42.8 mg/dl	Urease & GLDH
BUN, Serum	6.7	6-20 mg/dl	Calculated
CREATININE, Serum	0.56	0.51-0.95 mg/dl	Enzymatic
eGFR, Serum	120	>60 ml/min/1.73sqm	Calculated
Note: eGFR estimation is calculated using MDRD (Modification of diet in renal disease study group) equation			
TOTAL PROTEINS, Serum	7.4	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.5	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.9	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.6	1 - 2	Calculated
URIC ACID, Serum	3.2	2.4-5.7 mg/dl	Uricase
PHOSPHORUS, Serum	4.1	2.7-4.5 mg/dl	Ammonium molybdate
CALCIUM, Serum	9.2	8.6-10.0 mg/dl	N-BAPTA
SODIUM, Serum	146	135-148 mmol/l	ISE
POTASSIUM, Serum	5.1	3.5-5.3 mmol/l	ISE
CHLORIDE, Serum	93	98-107 mmol/l	ISE

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	6.3	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	134.1	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.

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Pathologist



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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
EXAMINATION OF FAECES

PARAMETER	RESULTS	BIOLOGICAL REF RANGE
PHYSICAL EXAMINATION		
Colour	Brown	Brown
Form and Consistency	Semi Solid	Semi Solid
Mucus	Absent	Absent
Blood	Absent	Absent
CHEMICAL EXAMINATION		
Reaction (pH)	Acidic (6.0)	-
Occult Blood	Absent	Absent
MICROSCOPIC EXAMINATION		
Protozoa	Absent	Absent
Flagellates	Absent	Absent
Ciliates	Absent	Absent
Parasites	Absent	Absent
Macrophages	Absent	Absent
Mucus Strands	Absent	Absent
Fat Globules	Absent	Absent
RBC/hpf	Absent	Absent
WBC/hpf	Absent	Absent
Yeast Cells	Absent	Absent
Undigested Particles	Present +	-
Concentration Method (for ova)	No ova detected	Absent

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*** End Of Report ***



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Reported : 14-Apr-2023 / 12:32

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
URINE EXAMINATION REPORT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	Acidic (5.0)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.020	1.010-1.030	Chemical Indicator
Transparency	Slight hazy	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	10-12	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	4-5		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	+(>20/hpf)	Less than 20/hpf	

Kindly correlate clinically.

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

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

Reference: Pack insert

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0000-0776-5507



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Age / Gender : 53 Years / Female
Consulting Dr. : -
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Collected : 14-Apr-2023 / 08:29
Reported : 14-Apr-2023 / 13:16

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
BLOOD GROUPING & Rh TYPING

PARAMETER	RESULTS
ABO GROUP	B
Rh TYPING	Positive

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

Specimen: EDTA Whole Blood and/or serum

Clinical significance:
ABO system is most important of all blood group in transfusion medicine

Limitations:

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

References:

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

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	220.3	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	73.3	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	55.6	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	164.7	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	150.0	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl	Calculated
VLDL CHOLESTEROL, Serum	14.7	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.0	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.7	0-3.5 Ratio	Calculated

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*** End Of Report ***

OUR PRESENCE



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022-6170-0000



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Age / Gender : 53 Years / Female
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Reg. Location : G B Road, Thane West (Main Centre)

Collected : 14-Apr-2023 / 08:29
Reported : 14-Apr-2023 / 12:26

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
THYROID FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Free T3, Serum	4.2	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	15.7	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	1.95	0.35-5.5 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0	ECLIA

AREAS OF SPECIAL EXPERTISE

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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 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)

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MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
LIVER FUNCTION TESTS

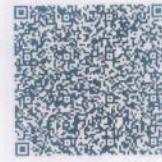
PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
BILIRUBIN (TOTAL), Serum	0.29	0.1-1.2 mg/dl	Diazo
BILIRUBIN (DIRECT), Serum	0.13	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.16	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.4	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.5	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.9	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.6	1 - 2	Calculated
SGOT (AST), Serum	23.0	5-32 U/L	IFCC without pyridoxal phosphate activation
SGPT (ALT), Serum	41.3	5-33 U/L	IFCC without pyridoxal phosphate activation
GAMMA GT, Serum	23.0	3-40 U/L	IFCC
ALKALINE PHOSPHATASE, Serum	88.7	35-105 U/L	PNPP

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Ref. Dr :
Reg. Location : G B Road, Thane West Main Centre
Reg. Date : 14-Apr-2023
Reported : 14-Apr-2023 / 11:35

X-RAY CHEST PA VIEW

Radioopacities are noted in left lung field and right mid zone.

Soft tissue opacities are noted in left upper zone.

There is evidence of increased bilateral bronchovascular prominence.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The aorta shows normal radiological features.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

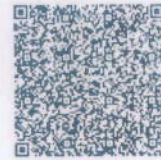
Suggest clinico pathological co-relation, further evaluation.

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

Dr Gauri Varma
Consultant Radiologist
MBBS / DMRE
MMC- 2007/12/4113

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023041408281387>

Page no 1 of 1



Use a QR Code Scanner
Application To Scan the Code

CID : 2310416745
Name : Mrs KENI BHAGYASHREE SANJAY
Age / Sex : 53 Years/Female
Ref. Dr :
Reg. Location : G B Road, Thane West Main Centre
Reg. Date : 14-Apr-2023
Reported : 14-Apr-2023 / 10:16

R
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R
T

USG ABDOMEN AND PELVIS

LIVER: Liver appears normal in size and *shows increased echorefectivity*. 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: Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification. Pancreatic duct is not dilated.

KIDNEYS: Right kidney measures 10.0 x 4.2 cm. Left kidney measures 10.6 x 4.7 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.

UTERUS : Uterus appears atrophic (post-menopausal status).

Bilateral adnexa are clear.

No free fluid or significant lymphadenopathy is seen.

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023041408281369>

Page no 1 of 2



Use a QR Code Scanner
Application To Scan the Code

CID : 2310416745
Name : Mrs KENI BHAGYASHREE SANJAY
Age / Sex : 53 Years/Female
Ref. Dr :
Reg. Location : G B Road, Thane West Main Centre
Reg. Date : 14-Apr-2023
Reported : 14-Apr-2023 / 10:16

IMPRESSION:

GRADE I FATTY INFILTRATION OF LIVER.

Advice: Clinical co-relation sos further evaluation 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.

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

Dr Gauri Varma
Consultant Radiologist
MBBS / DMRE
MMC- 2007/12/4113

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023041408281369>

Reg. No. : 2310416745	Sex : FEMALE
NAME : MRS. BHAGYSHREE SANJAY KENI	Age : 53 YRS
Ref. By : -----	Date : 14.04.2023

MAMMOGRAPHY

Bilateral mammograms have been obtained using a low radiation dose film screen technique in the cranio-caudal and oblique projections. Film markers are in the axillary / lateral portions of the breasts.

Predominantly fatty with few scattered heterogenous fibroglandular densities is noted in the both breasts.

No evidence of any abnormal density mass lesion / nipple retraction is seen.

No architectural distortion is seen.

Both nipple shadows and subcutaneous soft tissue shadows appear normal. No abnormal skin thickening is seen. Few lymph nodes noted in both axilla with preserved fatty hilum.

On Sonomammography of both breasts mixed fibroglandular tissues are seen .

No focal solid or cystic mass lesion is seen in both breasts. No duct ectasia is seen. Both retromammary regions appear normal. No significant axillary lymphadenopathy is seen.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IN BOTH BREASTS.

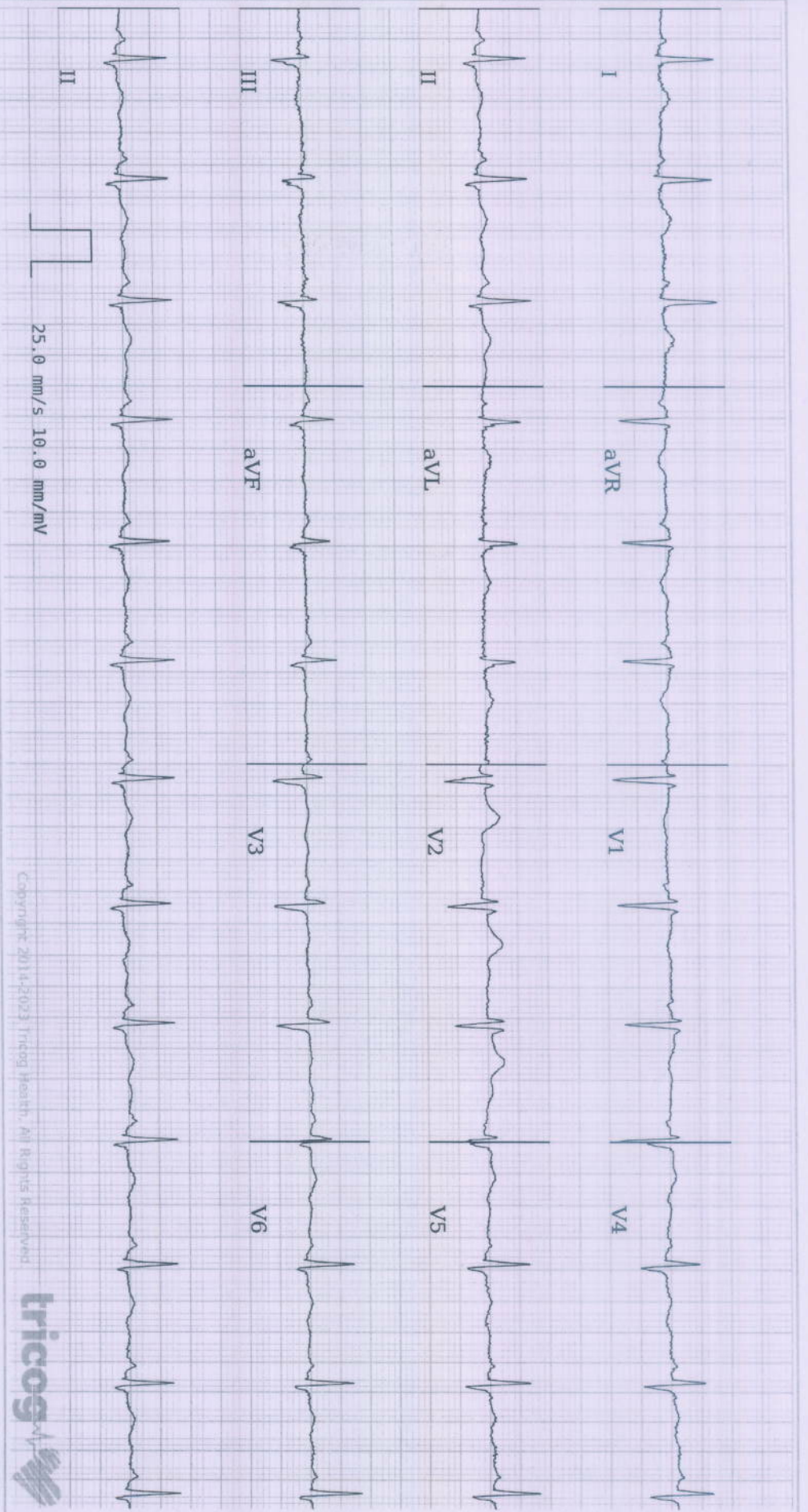
ACR BIRADS CATEGORY I BOTH BREASTS.

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.



DR. GAURI VARMA
MBBS, DMRE
(CONSULTANT RADIOLOGIST)

SUBURBAN DIAGNOSTICS - G B ROAD, THANE WEST
 Patient Name: KENI BHAGYASHREE SANJAY Date and Time: 14th Apr 23 9:44 AM
 Patient ID: 2310416745



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

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Age **53** 1 **23**
years months days

Gender **Female**

Heart Rate **79bpm**

Patient Vitals

BP: 130/90 mmHg
 Weight: 70 kg
 Height: 160 cm
 Pulse: NA
 SpO2: NA
 Resp: NA
 Others:

Measurements

QRSD: 100ms
 QT: 386ms
 QTcB: 442ms
 PR: 136ms
 P-R-T: 54° 17° 18°

REPORTED BY

DR SHAILAJA PILLAI
 MBBS, MD Physician
 MD Physician
 49972

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 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.

SUBURBAN DIAGNOSTICS (THANE GB ROAD)

Email:

887 (2310416745) / BHAGYASHREE KENI / 53 Yrs / F / 160 Cms / 70 Kg
Date: 14 / 04 / 2023 10:31:24 AM

Report



Stage	Time	Duration	Speed(mph)	Elevation	METs	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:10	0:10	00.0	00.0	01.0	086	51 %	120/80	103	00	
Standing	00:20	0:10	00.0	00.0	01.0	087	52 %	120/80	104	00	
HV	00:29	0:09	00.0	00.0	01.0	082	49 %	120/80	098	00	
ExStart	00:39	0:10	00.0	00.0	01.0	087	52 %	120/80	104	00	
BRUCE Stage 1	03:39	3:00	01.7	10.0	04.7	137	82 %	130/80	178	00	
PeakEx	04:13	0:34	02.5	12.0	05.2	145	87 %	150/80	217	00	
Recovery	05:13	1:00	00.0	00.0	01.0	112	67 %	150/80	168	00	
Recovery	06:13	2:00	00.0	00.0	01.0	100	60 %	150/80	150	00	
Recovery	07:13	3:01	00.0	00.0	01.0	098	59 %	130/80	127	00	

FINDINGS :

Exercise Time : 03:34
 Initial HR (ExStrt) : 87 bpm 52% of Target 167
 Initial BP (ExStrt) : 120/80 (mm/Hg)
 Max WorkLoad Attained : 5.2 Fair response to induced stress
 Max ST Dep Lead & Avg ST Value : II & -1.1 mm in PeakEx
 Test End Reasons : , Fatigue, Heart Rate Achieved

Max HR Attained 145 bpm 87% of Target 167
 Max BP Attained 150/80 (mm/Hg)

Doctor : DR SHAILAJA PILLAI

Dr. SHAILAJA PILLAI
 M.D. (GEN.MED)
 R.NO. 49972



REPORT :

PROCEDURE DONE: Graded exercise treadmill stress test.

STRESS ECG RESULTS: The initial HR was recorded as 87.0 bpm, and the maximum predicted Target Heart Rate 167.0. The BP increased at the time of generating report as 150.0/80.0 mmHg The Max Dep went upto 0.2. 0.0 Ectopic Beats were observed during the Test.

CONCLUSIONS:

1. TMT is negative for exercise induced ischemia.
2. Normal chronotropic and Normal inotropic response.
3. No significant ST T changes seen.

Doctor : DR SHAILAJA PILLAI

Dr. SHAILAJA PILLAI
M.D. (GEN.MED)
R.NO. 49972

SUBURBAN DIAGNOSTICS (THANE GB ROAD)

SUPINE (00:01)

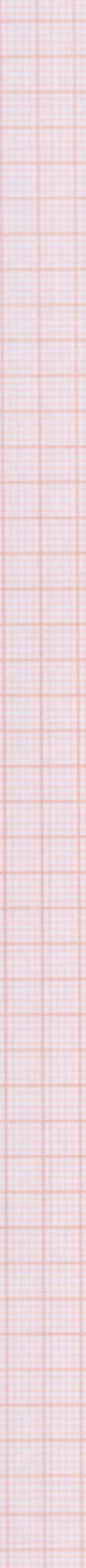
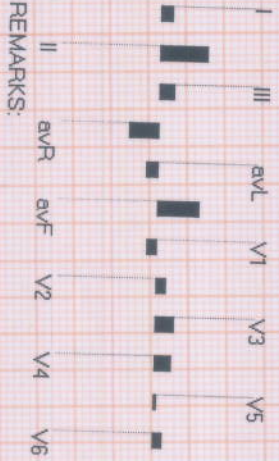
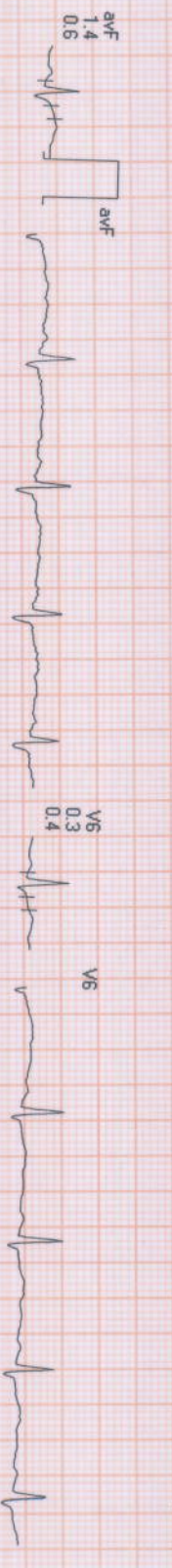
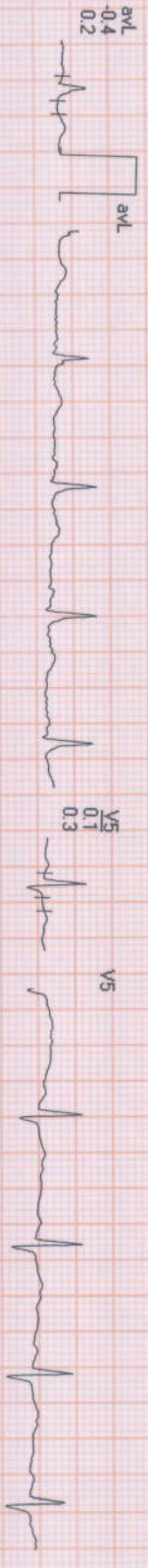
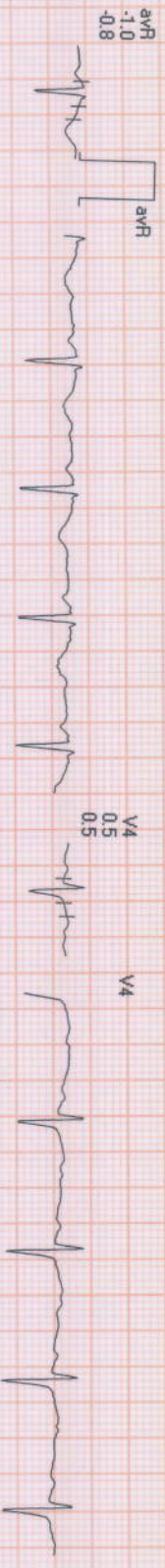
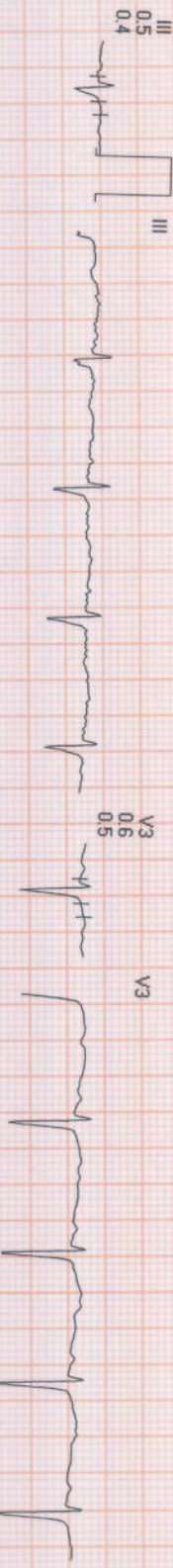
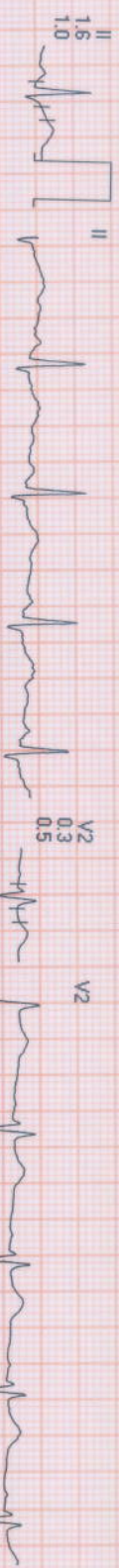
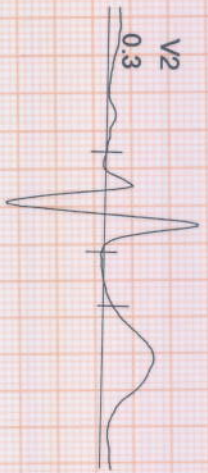
887 (2310416745) / BHAGYASHREE KENI / 53 Yrs / F / 160 Cms / 70 Kg / HR : 86



Date: 14/04/2023 10:31:24 AM METS: 1.0/ 86 bpm 51% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/ LF 100 Hz

EXTime: 00:00 0.0 mph, 0.0%
25 mm/Sec. 1.0 Cm/mV

4X 80 ms Post J



REMARKS:



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

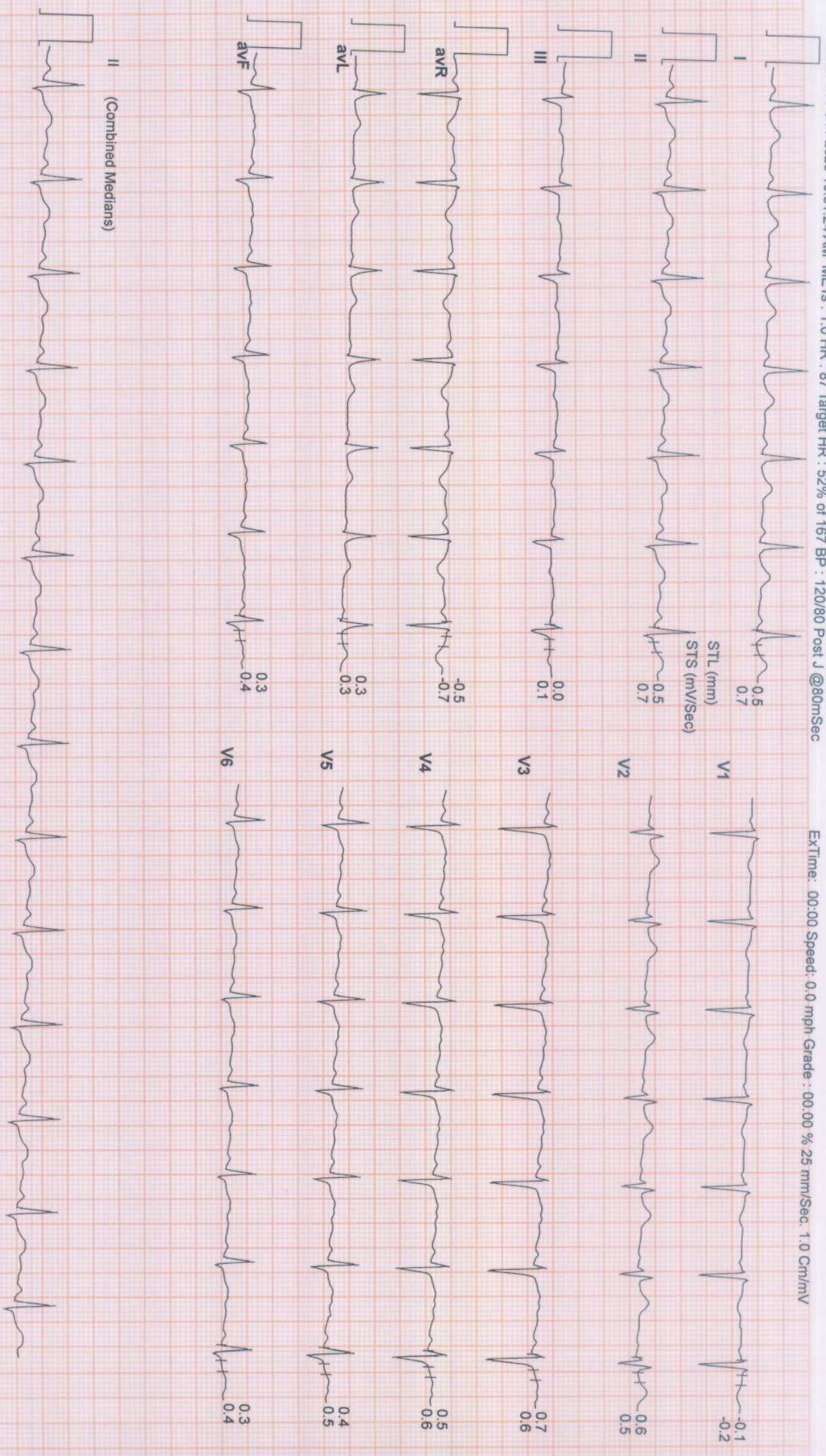
887 / BHAGYASHREE KENI / 53 Yrs / Female / 160 Cm / 70 Kg

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



Date: 14 / 04 / 2023 10:31:24 AM METs : 1.0 HR : 87 Target HR : 52% of 167 BP : 120/80 Post J @80mSec

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



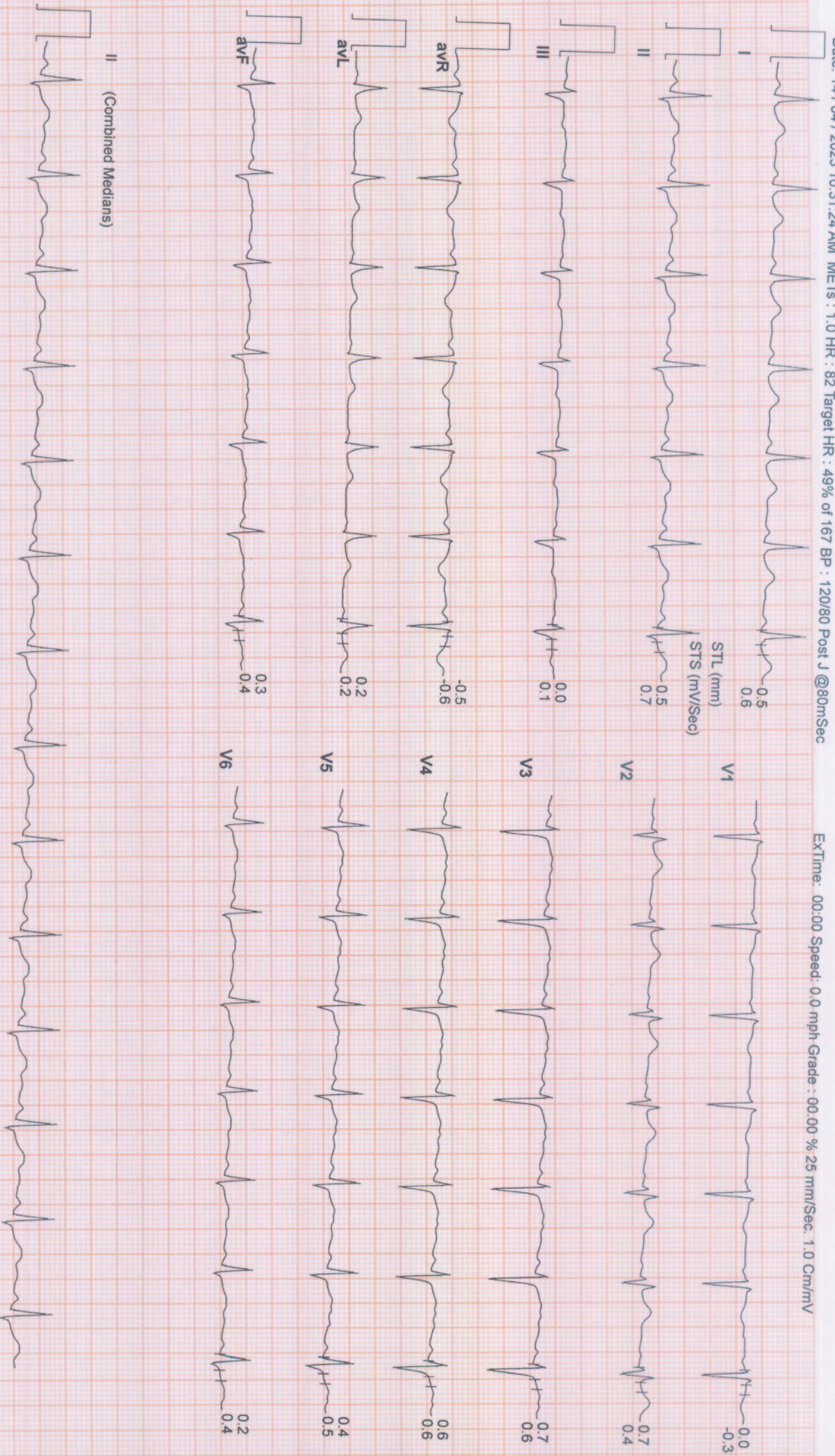
SUBURBAN DIAGNOSTICS (THANE GB ROAD)

887 / BHAGYASHREE KENI / 53 Yrs / Female / 160 Cm / 70 Kg

Date: 14 / 04 / 2023 10:31:24 AM METs : 1.0 HR : 82 Target HR : 49% of 167 BP : 120/80 Post J @80mSec

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

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



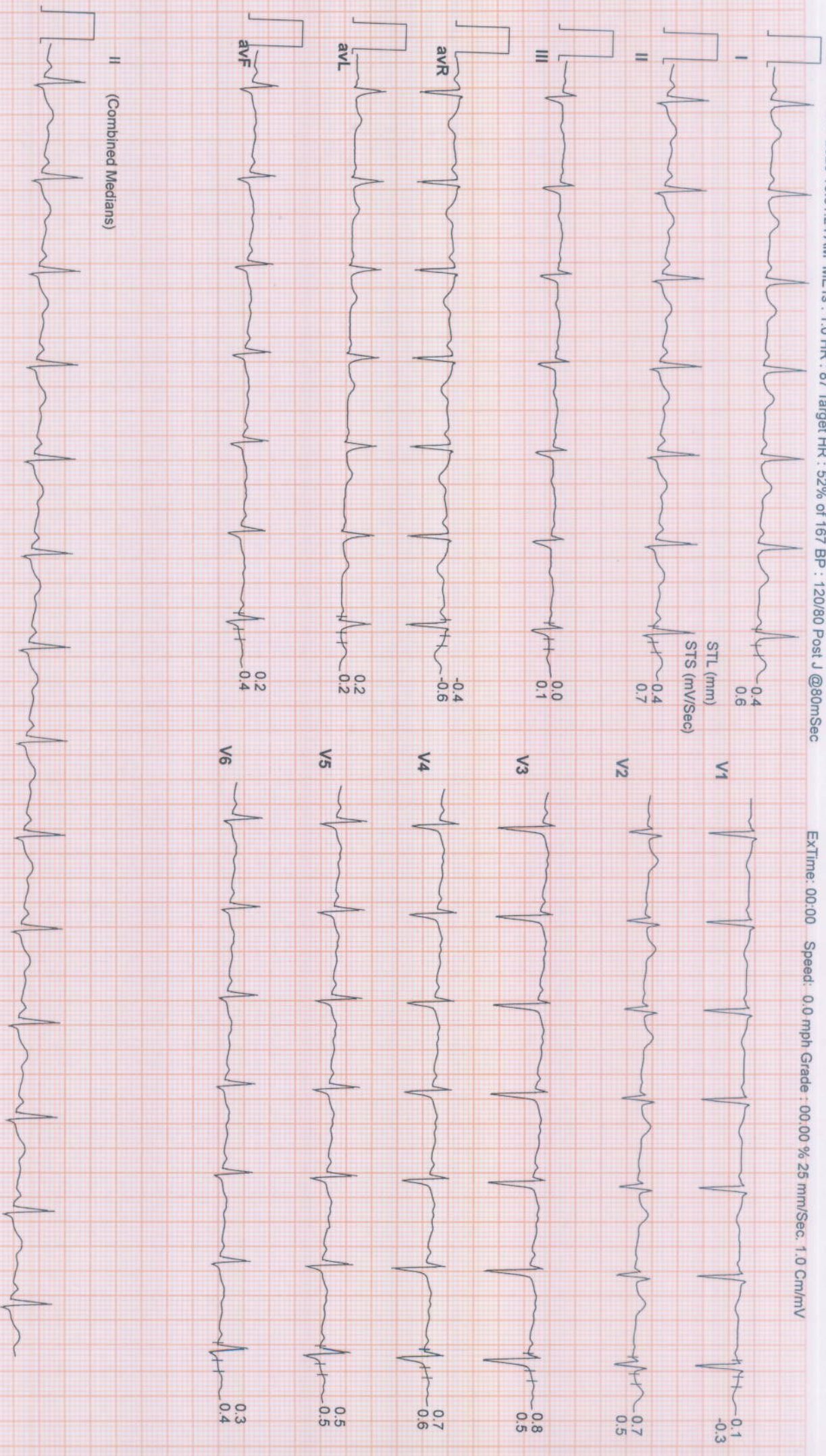
SUBURBAN DIAGNOSTICS (THANE GB ROAD)

887 / BHAGYASHREE KENI / 53 Yrs / Female / 160 Cm / 70 Kg

Date: 14 / 04 / 2023 10:31:24 AM METs : 1.0 HR : 87 Target HR : 52% of 167 BP : 120/80 Post J @80mSec

6X2 Combine Medians + 1 Rhythm ExStr

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



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

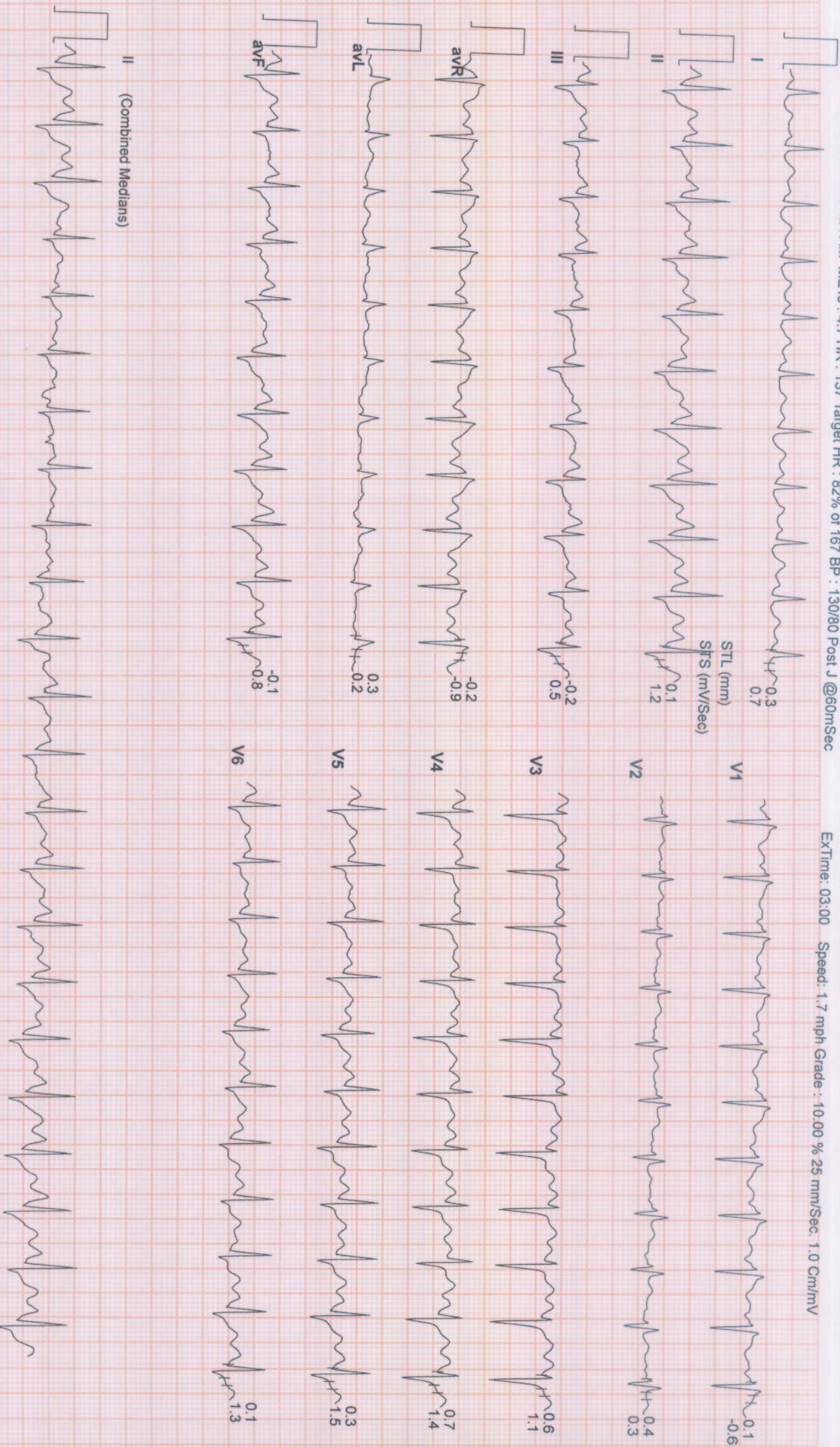
887 / BHAGYASHREE KENI / 53 Yrs / Female / 160 Cm / 70 Kg

Date: 14 / 04 / 2023 10:31:24 AM METS : 4.7 HR : 137 Target HR : 82% of 167 BP : 130/80 Post J @60mSec

6X2 Combine Medians + 1 Rhythm
BRUCE : Stage 1 (03:00)



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



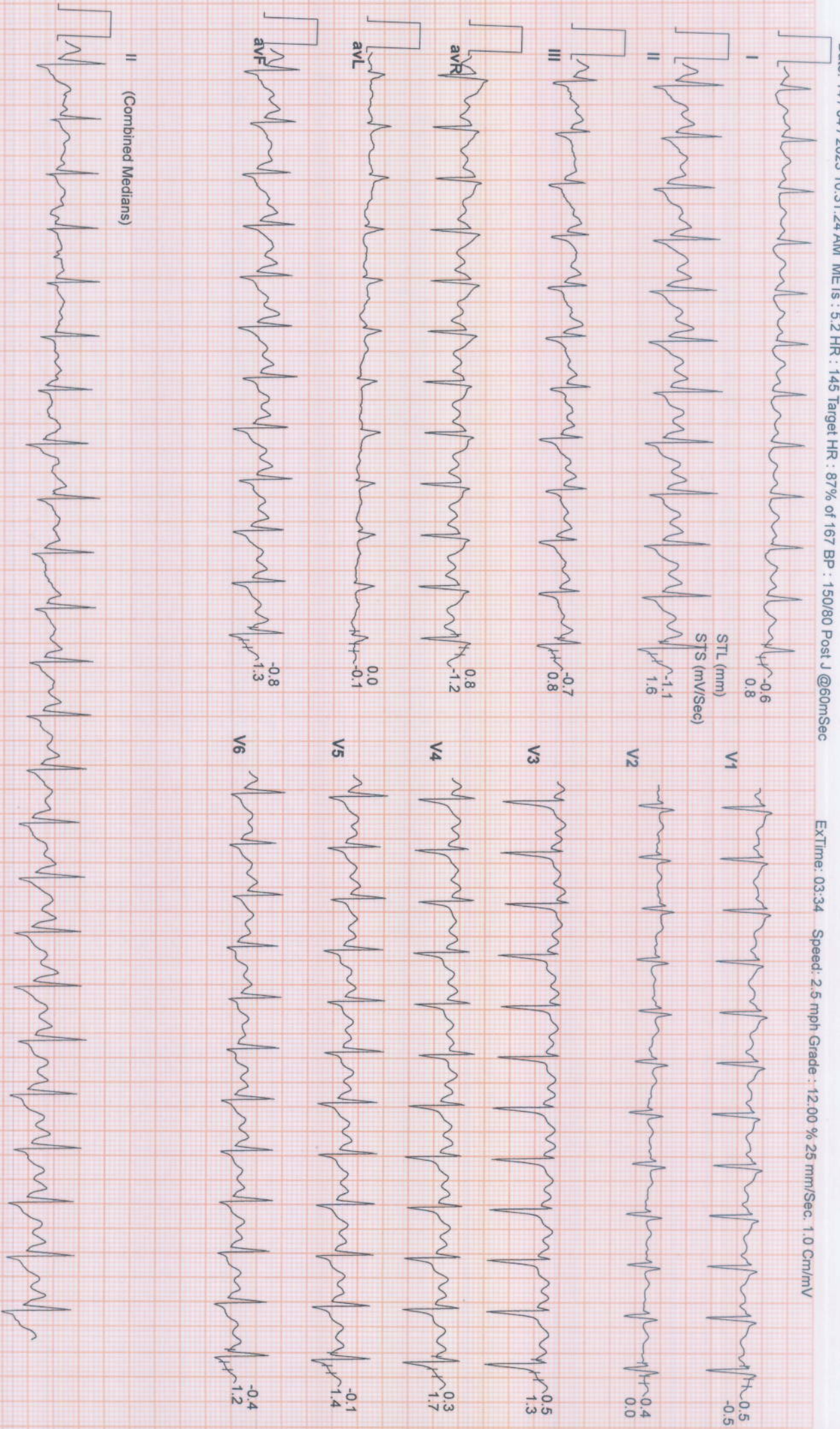
SUBURBAN DIAGNOSTICS (THANE GB ROAD)

887 / BHAGYASHREE KENI / 53 Yrs / Female / 160 Cm / 70 Kg

Date: 14 / 04 / 2023 10:31:24 AM METs : 5.2 HR : 145 Target HR : 87% of 167 BP : 150/80 Post J @60mSec

6X2 Combine Medians + 1 Rhythm PeakEx

EXTime: 03:34 Speed: 2.5 mph Grade : 12.00 % 25 mm/Sec: 1.0 Cm/mV



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

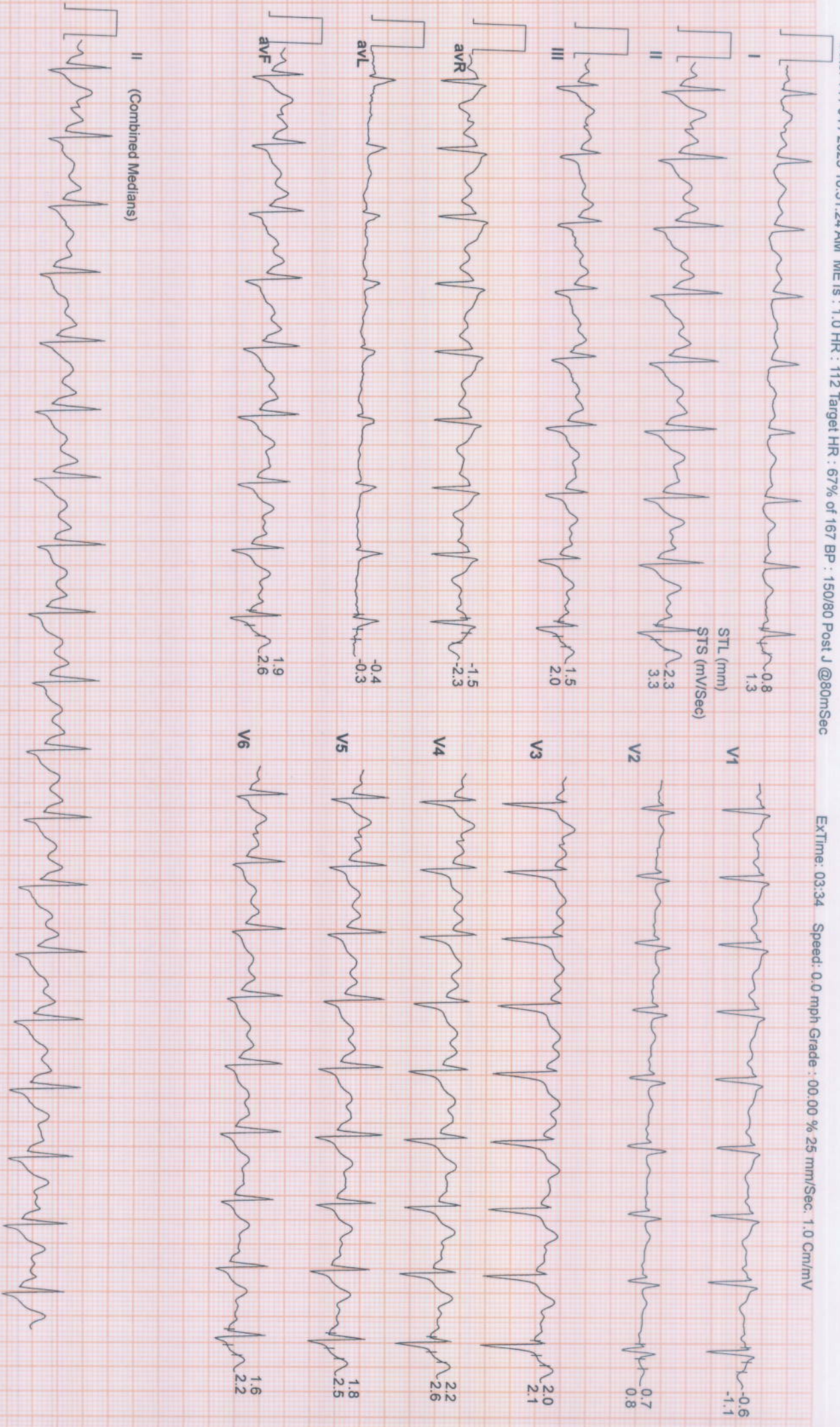
887 / BHAGYASHREE KENI / 53 Yrs / Female / 160 Cm / 70 Kg

Date: 14 / 04 / 2023 10:31:24 AM METs : 1.0 HR : 112 Target HR : 67% of 167 BP : 150/80 Post J @80mSec

6X2 Combine Medians + 1 Rhythm
Recovery : (01:00)



ExTime: 03:34 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec: 1.0 Cm/mV



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

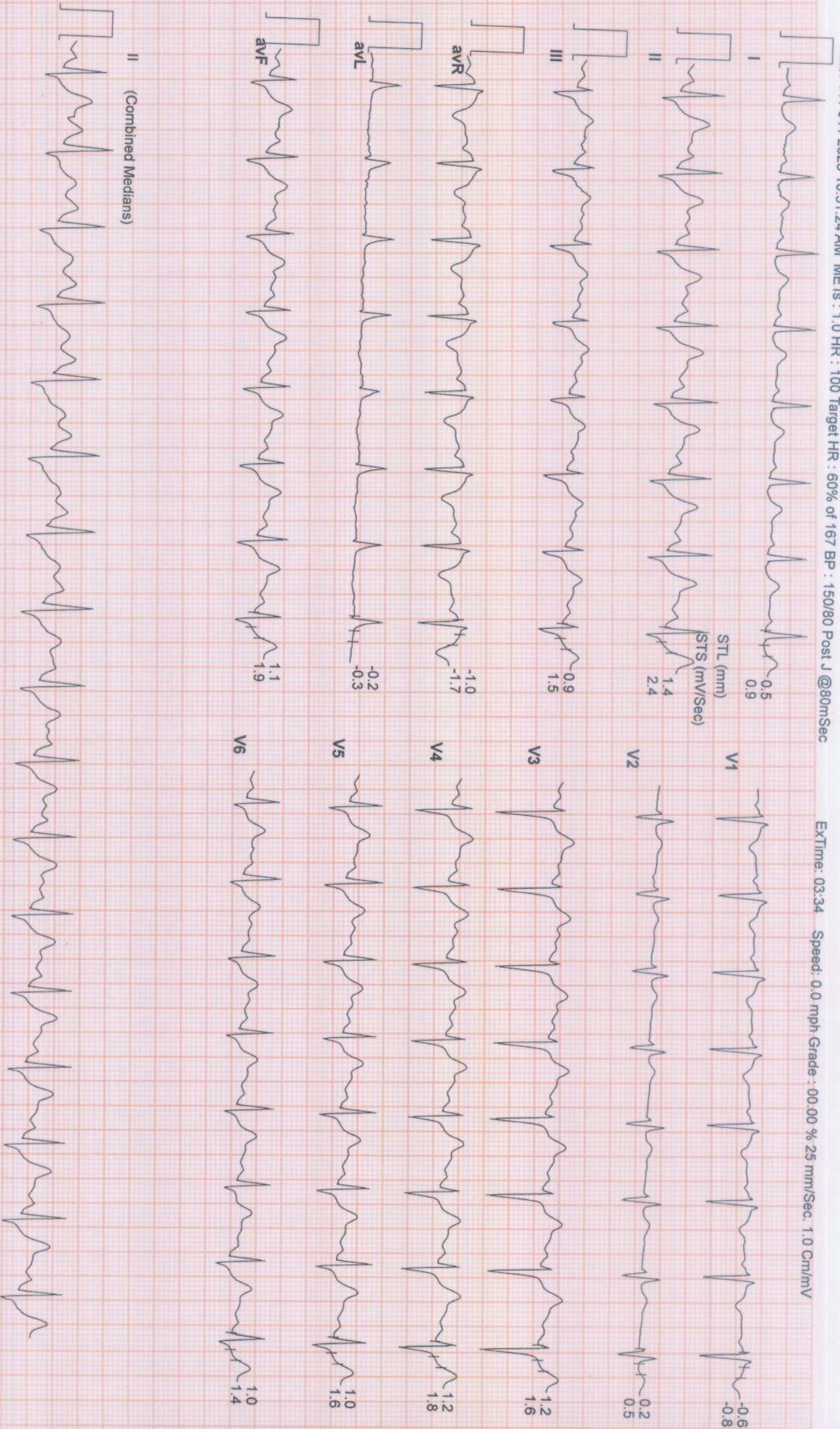
887 / BHAGYASHREE KENI / 53 Yrs / Female / 160 Cm / 70 Kg

Date: 14 / 04 / 2023 10:31:24 AM METs : 1.0 HR : 100 Target HR : 60% of 167 BP : 150/80 Post J @30mSec

6X2 Combine Medians + 1 Rhythm
Recovery : (02:00)



EXTime: 03:34 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

887 / BHAGYASHREE KENI / 53 Yrs / Female / 160 Cm / 70 Kg

Date: 14 / 04 / 2023 10:31:24 AM METs : 1.0 HR : 98 Target HR : 59% of 167 BP : 130/80 Post J @80mSec

6X2 Combine Medians + 1 Rhythm

Recovery : (03:00)



ExTime: 03:34 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV

