

: 2305621735

Name

: MRS.MAMTA V SHANBHAG

Age / Gender

:51 Years / Female

Consulting Dr.

.

Reg. Location

: Borivali West (Main Centre)

Authenticity Check

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: 25-Feb-2023 / 09:15 : 25-Feb-2023 / 12:41 T

# MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

Collected

Reported

	CRC (Complet	e Blood Count), Blood	
	RESULTS	BIOLOGICAL REF RANGE	METHOD
PARAMETER	KESUL 13	DIOEOGICAL NE. 19 III -	
RBC PARAMETERS		42.0.45.0 m/dl	Spectrophotometri
Haemoglobin	12.2	12.0-15.0 g/dL	Elect. Impedance
RBC	4.45	3.8-4.8 mil/cmm	Measured
PCV	37.5	36-46 %	Calculated
MCV	84	80-100 fl	Calculated
MCH	27.4	27-32 pg	
MCHC	32.5	31.5-34.5 g/dL	Calculated
RDW	16.0	11.6-14.0 %	Calculated
WBC PARAMETERS			
WBC Total Count	8420	4000-10000 /cmm	Elect. Impedance
WBC DIFFERENTIAL AND A	ABSOLUTE COUNTS		
Lymphocytes	25.8	20-40 %	
Absolute Lymphocytes	2172.4	1000-3000 /cmm	Calculated
Monocytes	7.2	2-10 %	
Absolute Monocytes	606.2	200-1000 /cmm	Calculated
Neutrophils	51.5	40-80 %	
Absolute Neutrophils	4336.3	2000-7000 /cmm	Calculated
Eosinophils	14.6	1-6 %	
Absolute Eosinophils	1229.3	20-500 /cmm	Calculated
Basophils	0.9	0.1-2 %	
Absolute Basophils	75.8	20-100 /cmm	Calculated
Immature Leukocytes	*		

WBC Differential Count by Absorbance & Impedance method/Microscopy.

DI	ATEL	ET	PΛ	RΔ	ME	TFRS.

PLATELLIFANAMILIENO			
Platelet Count	241000	150000-400000 /cmm	Elect. Impedance
MPV	9.9	6-11 fl	Calculated
PDW	16.8	11-18 %	Calculated

**RBC MORPHOLOGY** 

Page 1 o



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:25-Feb-2023 / 12:18

Hypochromia

Microcytosis

Macrocytosis

Anisocytosis

ocytosis

Poikilocytosis

Polychromasia

**Target Cells** 

Basophilic Stippling

Normoblasts

Others

WBC MORPHOLOGY

PLATELET MORPHOLOGY

COMMENT

Eosinophilia

Mild

Mild

Advice: 1)Stool examination for parasites

2)Allergy testing

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR

28

2-30 mm at 1 hr.

Sedimentation

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





Binhaskar

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

Page 2 of 1



: 2305621735

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GLUCOSE (SUGAR) FASTING,

GLUCOSE (SUGAR) PP, Fluoride 97.0

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: 25-Feb-2023 / 09:15

Reported

:25-Feb-2023 / 20:00

METHOD

Hexokinase

# MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT **BIOLOGICAL REF RANGE**

**PARAMETER** 

Fluoride Plasma

Plasma PP/R

**RESULTS** 

94.0

Non-Diabetic: < 100 mg/dl Hexokinase

Impaired Fasting Glucose: 100-125 mg/dl

Diabetic: >/= 126 mg/dl

Non-Diabetic: < 140 mg/dl

Impaired Glucose Tolerance:

140-199 mg/dl

Diabetic: >/= 200 mg/dl

Urine Sugar (Fasting)

Absent

Absent

Urine Ketones (Fasting)

Absent

Absent

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





Bahaskar

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

Page 3 of 12



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: -

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:25-Feb-2023 / 17:50

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

PARAMETER		INCTION LESIS	
	RESULTS	BIOLOGICAL REF RANGE	METHOD
BLOOD UREA, Serum	15.3		
BUN, Serum	7.1	12.8-42.8 mg/dl	Kinetic
CREATININE, Serum		6-20 mg/dl	Calculated
eGFR, Serum	0.79	0.51-0.95 mg/dl	Enzymatic
	82	>60 ml/min/1.73sqm	Calculated
TOTAL PROTEINS, Serum	7.0	6.4-8.3 g/dL	
ALBUMIN, Serum	4.4		Biuret
GLOBULIN, Serum	2.6	3.5-5.2 g/dL	BCG
A/G RATIO, Serum		2.3-3.5 g/dL	Calculated
	1.7	1 - 2	Calculated
URIC ACID, Serum	5.8	2.4-5.7 mg/dl	
PHOSPHORUS, Serum	3.5	2.7-4.5 mg/dl	Enzymatic
CALCIUM, Serum	9.4		Molybdate UV
SODIUM, Serum		8.6-10.0 mg/dl	N-BAPTA
POTASSIUM, Serum	139	135-148 mmol/l	ISE
	4.2	3.5-5.3 mmol/l	ISE
CHLORIDE, Serum	105	98-107 mmol/l	41
*Cample pro-			ISE

<sup>\*</sup>Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West





Dr.VIPUL JAIN M.D. (PATH) Pathologist

Page 4 of 12



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: 25-Feb-2023 / 09:15

:25-Feb-2023 / 14:49

# MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER

**RESULTS** 

BIOLOGICAL REF RANGE METHOD

Glycosylated Hemoglobin (HbA1c), EDTA WB - CC

60

Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 %

HPLC

Estimated Average Glucose (eAG), EDTA WB - CC

125.5

Diabetic Level: >/= 6.5 % 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

# 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
- 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

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamia

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 \*\*\*



Binhaskar Dr.KETAKI MHASKAR

M.D. (PATH) **Pathologist** 

Page 5 of 12



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: 25-Feb-2023 / 09:15

:25-Feb-2023 / 18:51

# MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

DADAMETER	URINE EXAMIN	NATION REPORT	
PARAMETER	RESULTS	<b>BIOLOGICAL REF RANGE</b>	METHOD
PHYSICAL EXAMINATION			METHOD
Color Reaction (pH) Specific Gravity Transparency Volume (ml) CHEMICAL EXAMINATION	Pale yellow 5.0 1.010 Clear 30	Pale Yellow 4.5 - 8.0 1.001-1.030 Clear	- Chemical Indicator Chemical Indicator - -
Proteins Glucose Ketones Blood Bilirubin Urobilinogen Nitrite MICROSCOPIC EXAMINATION	Absent Absent Absent Absent Normal Absent	Absent Absent Absent Absent Absent Normal Absent	pH Indicator GOD-POD Legals Test Peroxidase Diazonium Salt Diazonium Salt Griess Test
Leukocytes(Pus cells)/hpf Red Blood Cells / hpf Epithelial Cells / hpf	1-2 Absent 3-4	0-5/hpf 0-2/hpf	
Casts Crystals Amorphous debris Bacteria / hpf Others	Absent Absent +(>20/hpf)	Absent Absent Absent Less than 20/hpf	

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

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







Dr.VIPUL JAIN M.D. (PATH) Pathologist

Page 6 of 12



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: 25-Feb-2023 / 09:15 :25-Feb-2023 / 16:34

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

PARAMETER

**RESULTS** 

ABO GROUP

В

Rh TYPING

Positive

NOTE: Test performed by automated Erythrocytes magnetized technology (EMT) which is more sensitive than conventional

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 origi
- 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 2
- 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 phenoty that lacks normal expression of ABH antigens because of inheritance of hh genotype.

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

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



Dr.LEENA SALUNKHE M.B.B.S, DPB (PATH) **Pathologist** 

Page 8 of 12



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: .

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Collected Reported

: 25-Feb-2023 / 09:15

:25-Feb-2023 / 16:44

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	197.9	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	232.5	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	GPO-POD
HDL CHOLESTEROL, Serum	34.3	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	163.6	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	128.1	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	35.5	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	5.8	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO,	3.7	0-3.5 Ratio	Calculated

Note: LDL test is performed by direct measurement.

<sup>\*</sup>Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
\*\*\* End Of Report \*\*\*







Binhaskar

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

Page 9 of 12



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Collected Reported

: 25-Feb-2023 / 09:15 : 25-Feb-2023 / 13:56

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

PARAMETER	THYROID FUNCT	ION TESTS	
Free T3, Serum	RESULTS	BIOLOGICAL REF RANGE	METHOD
Free T4, Serum	3.9	3.5-6.5 pmol/L	ECLIA
sensitiveTSH, Serum	13.9	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
oo.louve rom, serum		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



: 2305621735

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Age / Gender

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Reg. Location : Borivali West (Main Centre) Collected

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:25-Feb-2023 / 09:15

Reported

:25-Feb-2023 / 13:56

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

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,

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, tyrosin 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
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-

Diumal 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.

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

Jietz ,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 \*\*\*







Binhaskar

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

Page 11 of 12



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: 25-Feb-2023 / 09:15

:25-Feb-2023 / 16:04

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

PARAMETER	= · · = · · · · · · · · · · · · · · · ·	ZIT ILSIS	
TAKAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
BILIRUBIN (TOTAL), Serum	0.4	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.14	0-0.3 mg/dl	
BILIRUBIN (INDIRECT), Serum	0.26		Diazo
TOTAL PROTEINS, Serum		0.1-1.0 mg/dl	Calculated
	7.0	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.4	3.5-5.2 g/dL	
GLOBULIN, Serum	2.6		BCG
A/G RATIO, Serum		2.3-3.5 g/dL	Calculated
	1.7	1 - 2	Calculated
SGOT (AST), Serum	18.3	5-32 U/L	
SGPT (ALT), Serum	13.2		NADH (W/o P-5-P)
	13.2	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	10.4	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE,	130.0	35-105 U/L	
Serum		33-103 U/L	Colorimetric

<sup>\*</sup>Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
\*\*\* End Of Report \*\*\*









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

Page 12 of 12



Date:-

Name:-

25/02/23 Manta Shanbhag

CID: 2305624735

Sex / Age: 7/ p

EYE CHECK UP

Chief complaints:

Systemic Diseases:

Past history:

Unaided Vision:

Aided Vision:

Refraction:

Rl-

NILO

N/16

(Left Eye) (Right Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / Abnormal

Remark:

R-E

Suburban Diagnostics (1) Pvt. Ltd. 301& 302, 3rd Floor, Vini Eleganance, Above Tanisq Jweller, L. T. Road. Borivali (West), Mumbai - 400 092.



Mrs. Manita Shenbang.

25/2/23

# GYNAECOLOGICAL CONSULTATION

PARAMETER:

**EXAMINATION:** 

RS:

0 (F. BREAST EXAMINATION: N A D

PER ABDOMEN:

PER VAGINAL:

MENSTRUAL HISTORY: Dec. 2022. Irreguler

MENARCHE: 124M

PAST MENSTRUAL HISTORY:

OBSTETRIC HISTORY: G. P. A. L. ( & 2 Cyes) LSCS. - MAS.

PERSONAL HISTORY: HTN : 744.

ALLERGIES: WO

BLADDER:

BOWEL HABITS:

DRUGHISTORY: Ou Ry HTN.

PREVIOUS SURGERIES: D& C 2411 ago-fol Continous bluding

FAMILY HISTORY: N.

CHIEF GYNAE COMPLAINTS: -

RECOMMENDATIONS:

DR. MONALI SHAH CONSTITUTING HOMOEOPATH REG. NO. 57282 DIETITIAN & NUTRITIONIST



### भारत सरकार Government of India







Mamta Vinod Shanbhag DOB: 13/03/1971 FEMALE





9917 4422 3534

मेरा आधार, मेरी पहचान







# भारतीय विशिष्ट पहचान प्राधिकरण Unique Identification Authority of India



Address: A-1 ADITYA C.H.S.L FLAT NO 303, NEW LINK ROAD, CHIKU WADI, Borivali West S.O. Mumbai, Maharashtra, 400092



9917 4422 3534







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# SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

Name: MAMTA SHANBHAG

Date: 25-02-2023 Time: 09:37

Age: 51 Gender: M

Height: 155 cms

Weight: 62 Kg

ID: 2305621735

Clinical History: HTN

Medications: HTNRX

Test Details:

Protocol: Bruce

Predicted Max HR:

Target HR: 143

Exercise Time:

Max BP:

0:06:02

160/80

Achieved Max HR:

158 (93% of Predicted MHR)

Max BP x HR:

25280

Max Mets: 7

Test Termination Criteria:

TEST COMPLET

# Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate	BP	RPP	Max ST Level	Max ST Slope
Supine	00:30	1	0	0	81	mmHg 120/80	0720	mm	mV/s
Standing	00:15	1	0	0	77	120/80	9720	-0.6 II	-2.7 II
lyperVentilation	00:07	1	0	0	77	120/80	9240	0.7 II	-4.2 II
PreTest	00:06	1	1.6	0	76	120/80	9240	0.4 II	-3.7 II
tage: 1	03:00	4.7	2.7	10	152		9120	-0.4 V3	-3.8 II
tage: 2	03:00	7	4	12		150/80	22800		3.6 V6
eak Exercise	00:02	6.8	5.5		154	160/80	24640	-1.1 V3	-2.3 II
tecovery1	01:00	1	0.0	14	158	160/80	25280	-1.4 V5	-3.3 II
ecovery2	01:00	1	0	0	135	160/80	21600	0.8 V2	0.6 V2
	101.00	1	10	0	113	140/80	15820	-0.9 m	0.4 V2

# Interpretation

The Patient Exercised according to Bruce Protocol for 0:06:02 achieving a work level of 7 METS. Resting Heart Rate, initially 81 bpm rose to a max, heart rate of 158bpm (93% of Predicted Maximum Heart Rate). Resting Blood Pressure of 120/80 mmHg, rose to a maximum Blood Pressure of 160/80 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.

Suburban Diagnostics (I) Pvt. Ltd. 301& 302, 3rd Floor, Vini Eleganance, Above Tanisa Jweller, L. T. Road, Borivali (West), Mumbai - 400 092

DR. NITIN SONAVANE W.8 B.S.AFLH, D.DIAB, D.CARD. CONSULTANTICARDIOLOGIST

REGD. NO.: 87714

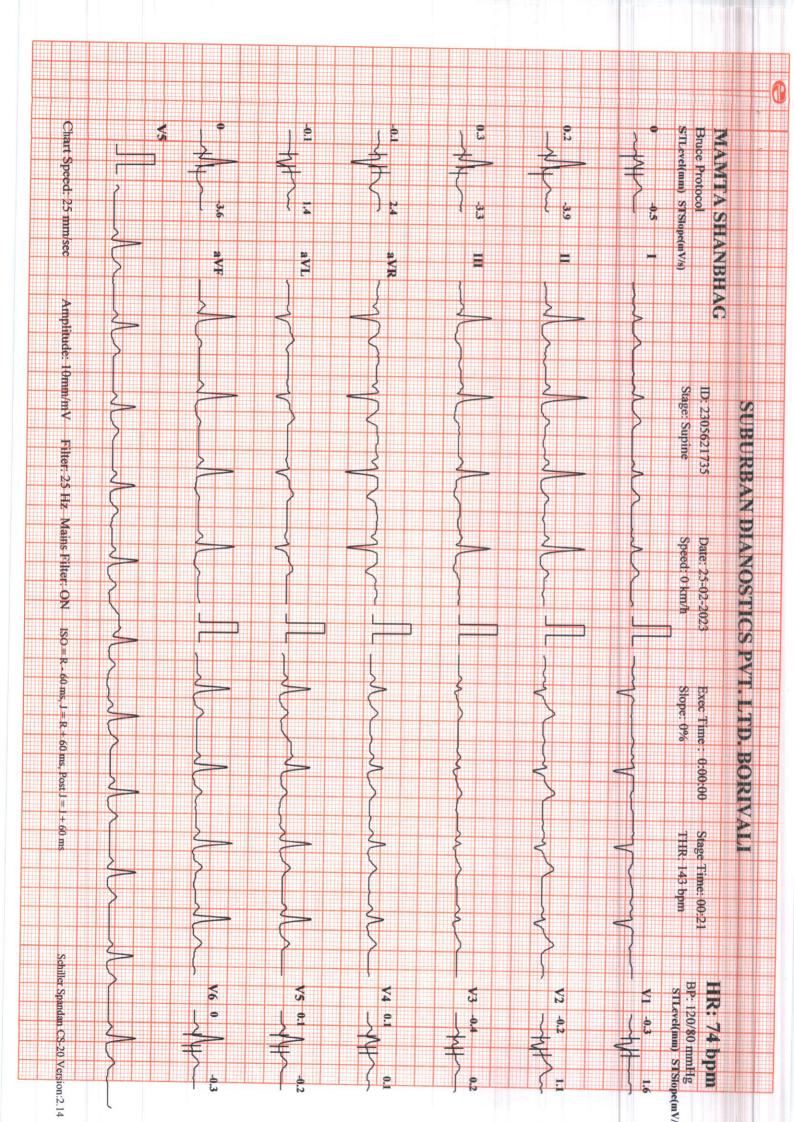
Ref. Doctor: ----

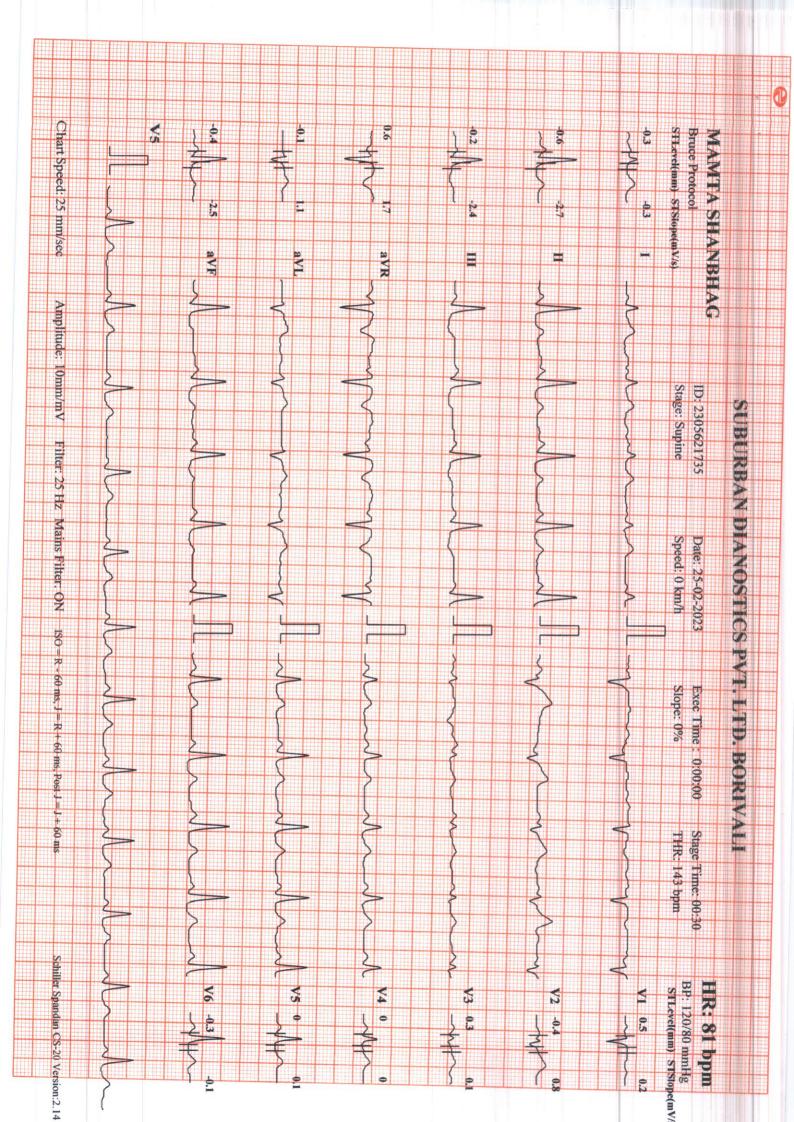
SCHILLER

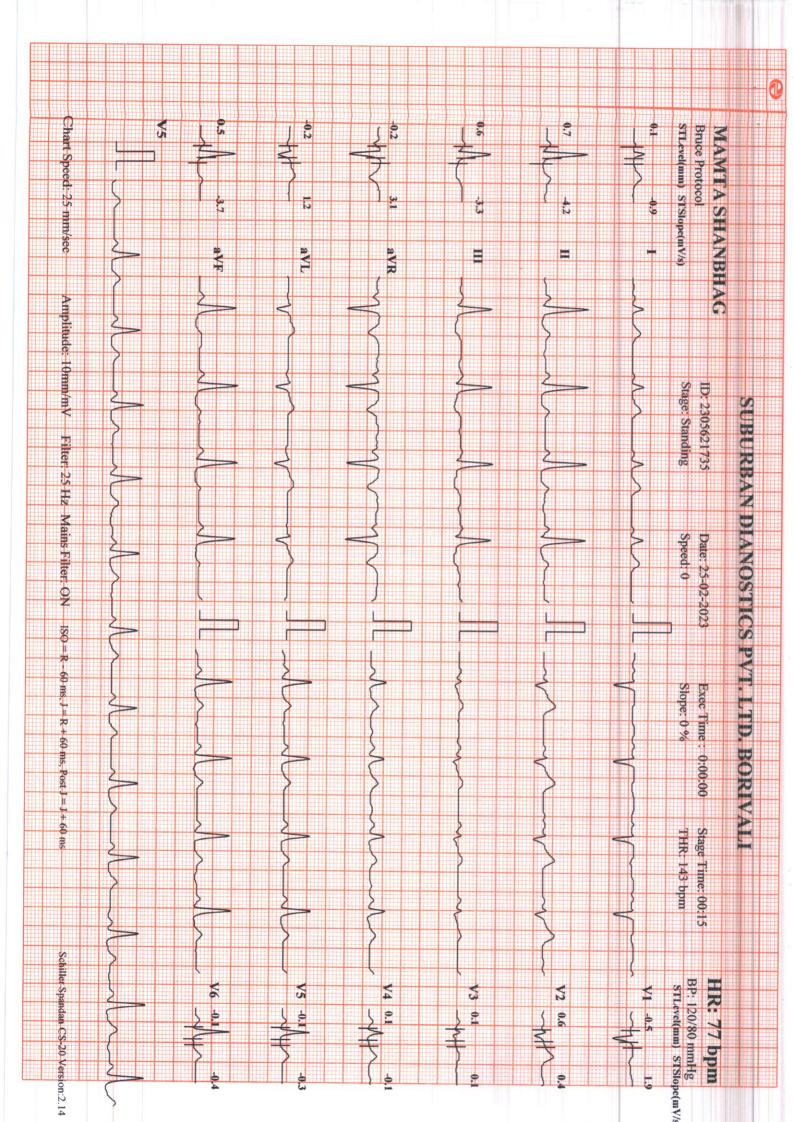
The Art of Diagnostics

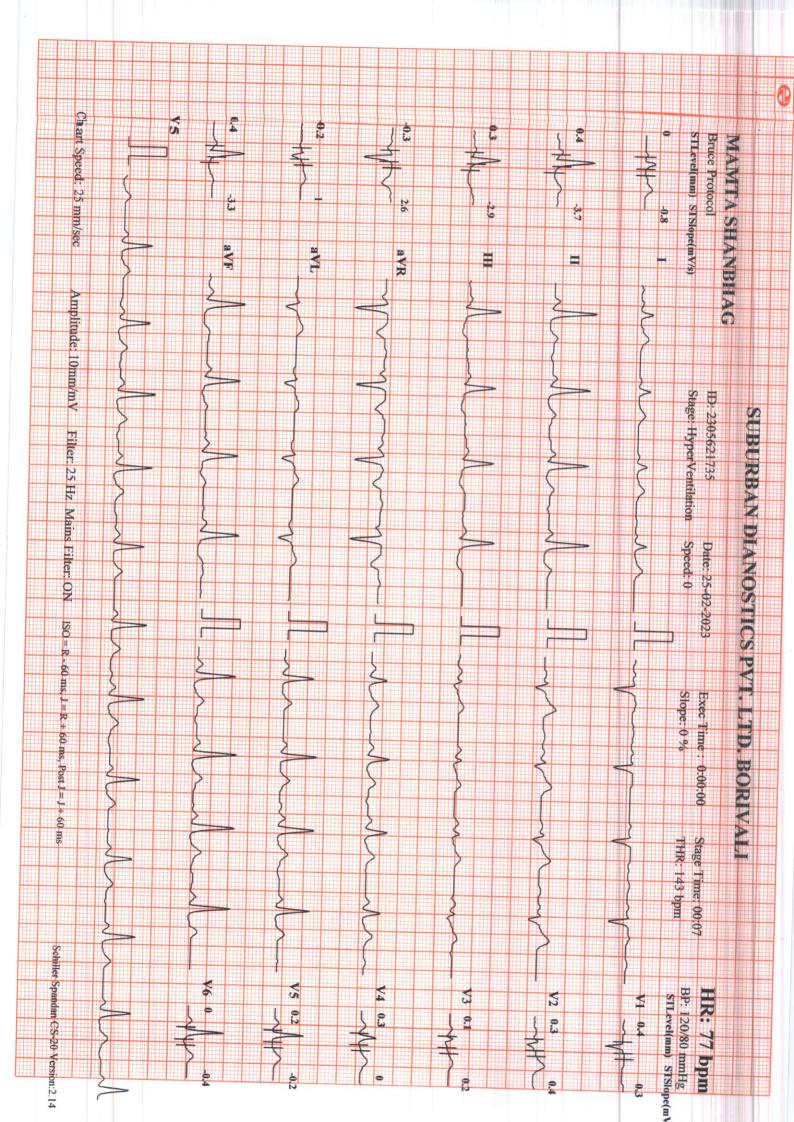
Doctor: DR. NITIN SONAVANE

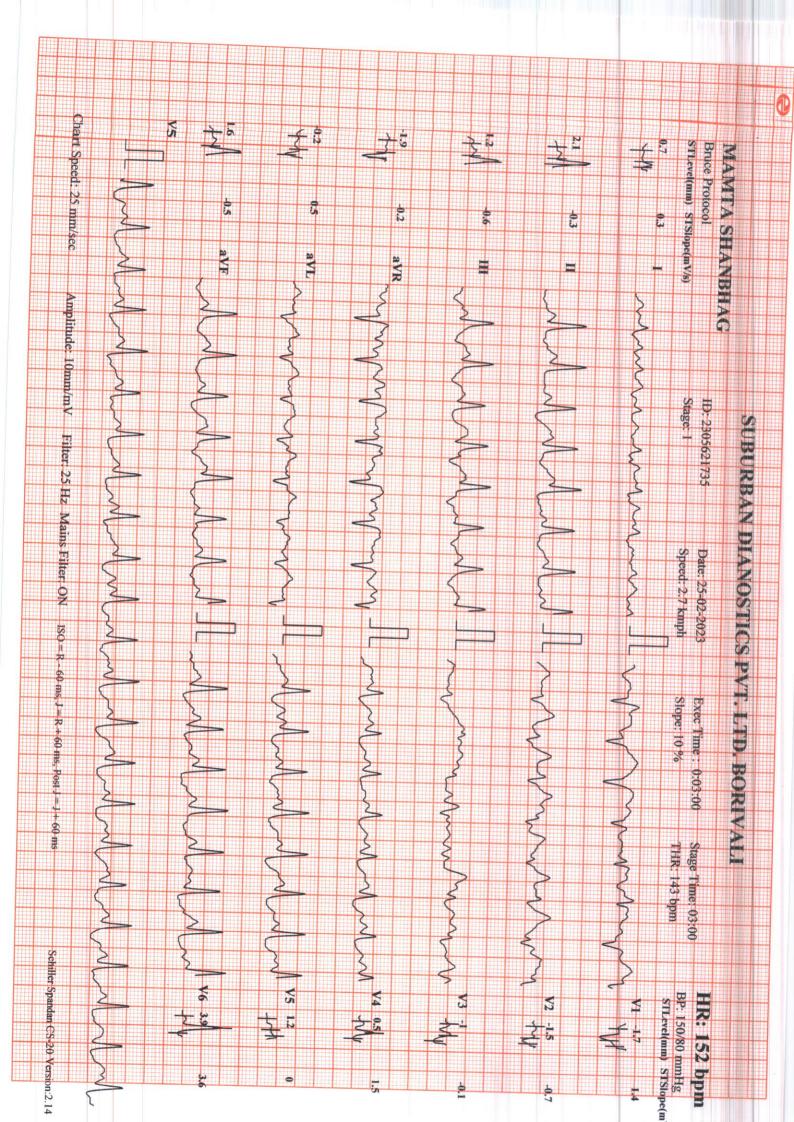
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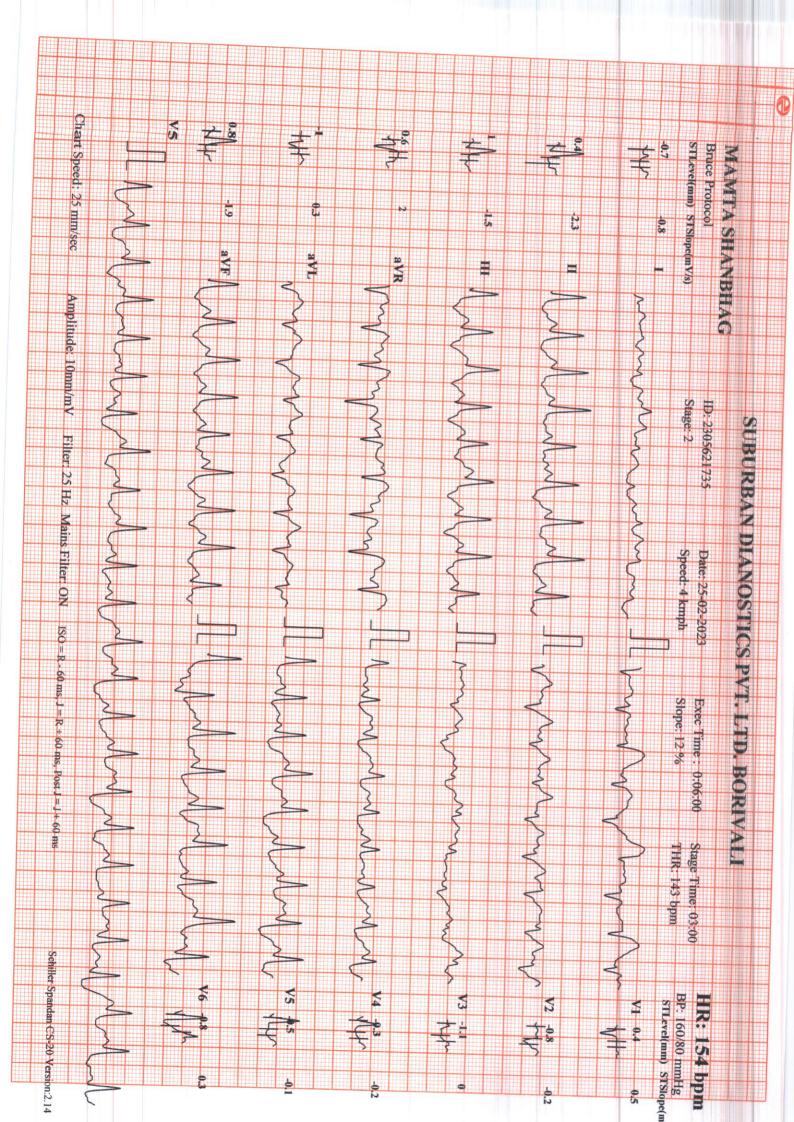


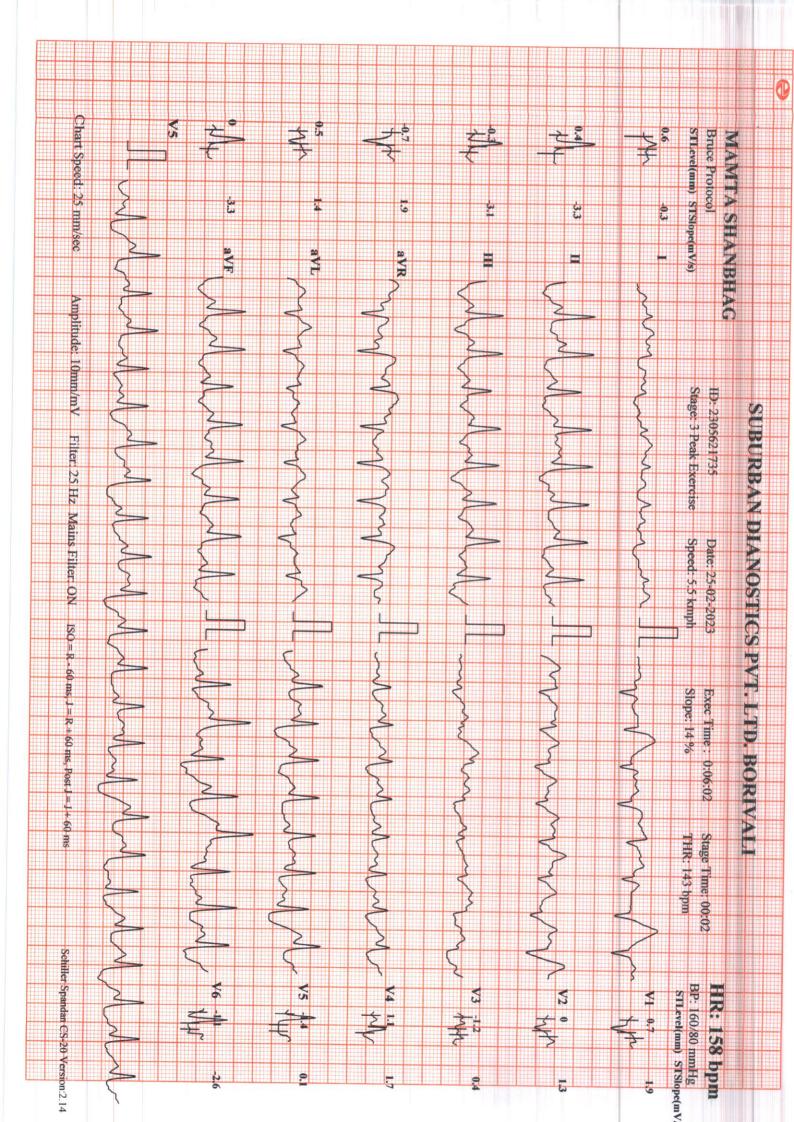


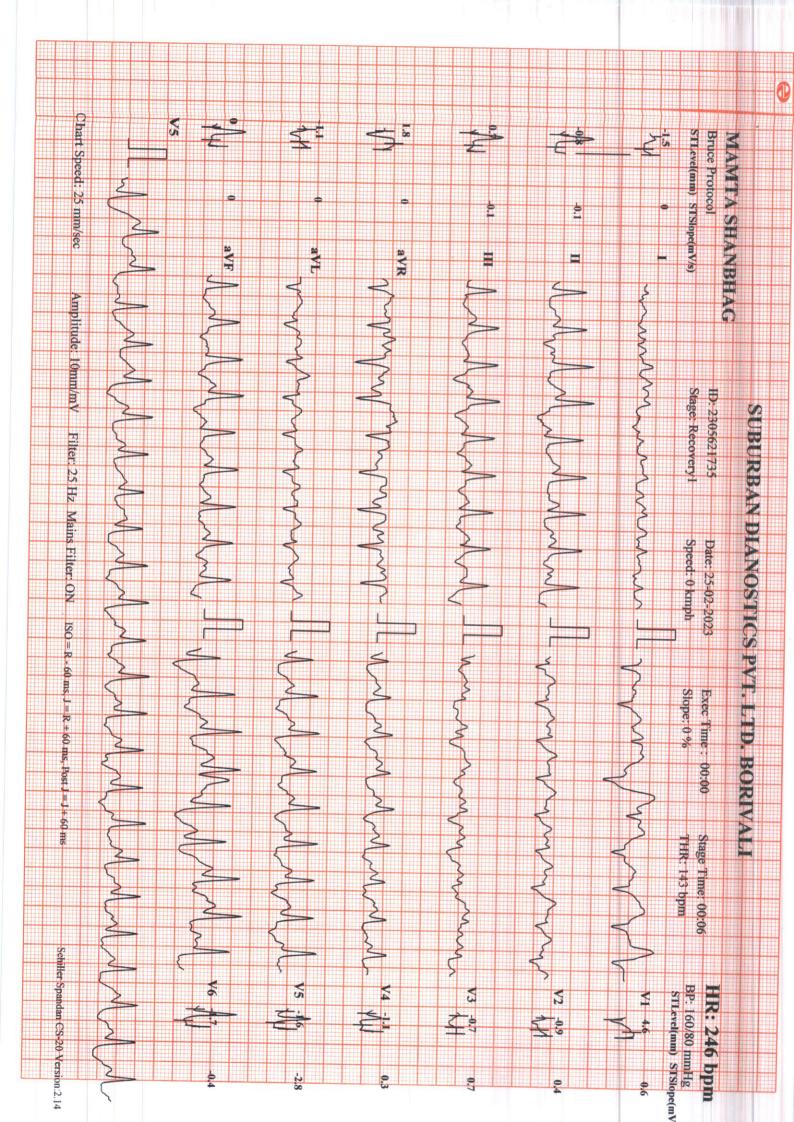


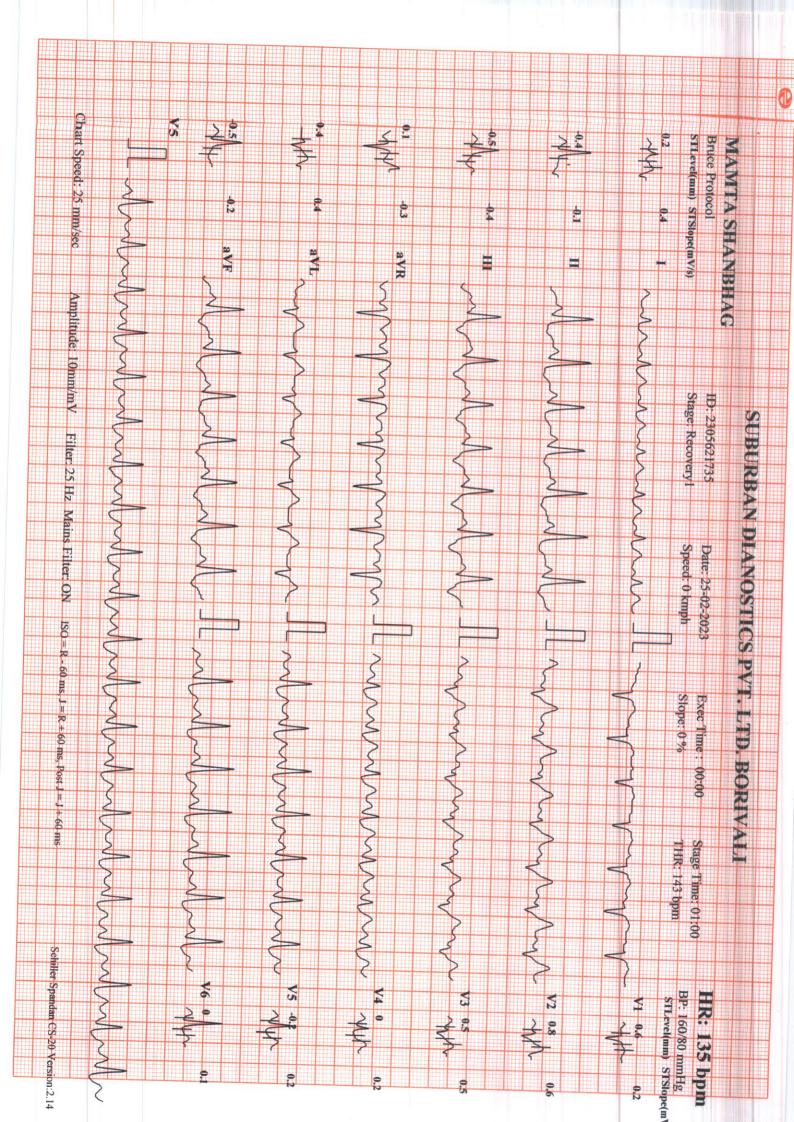


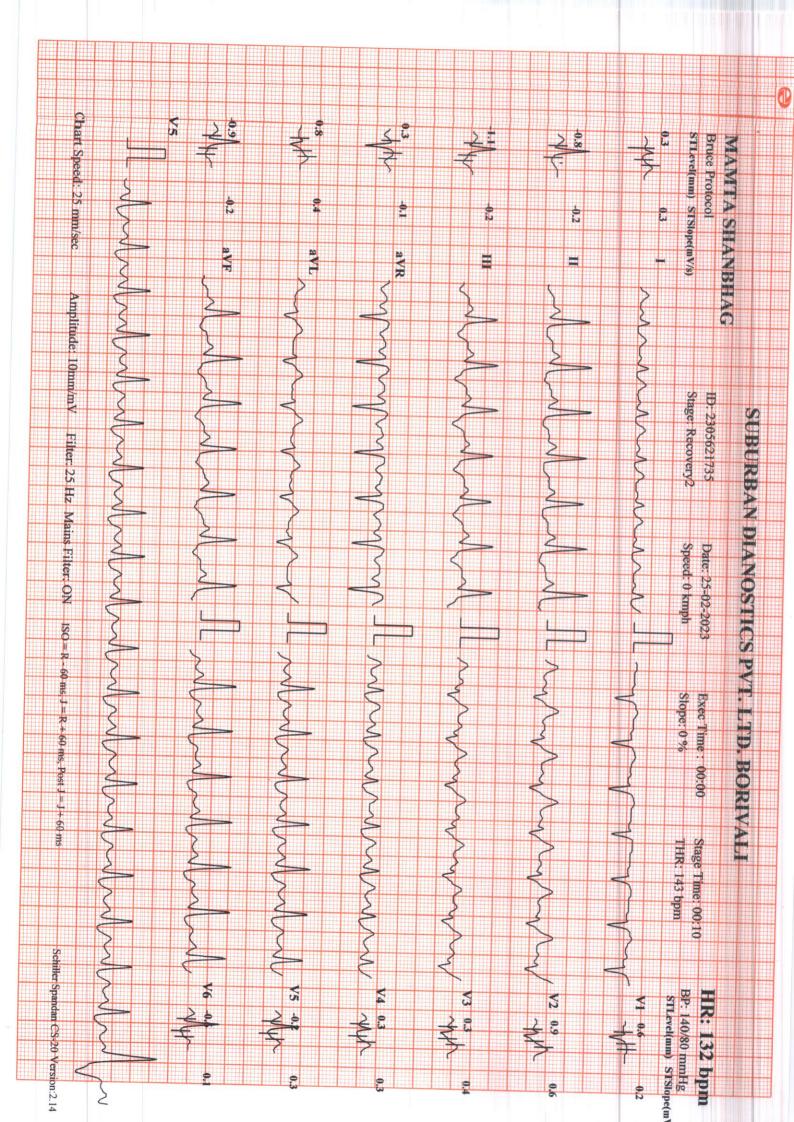


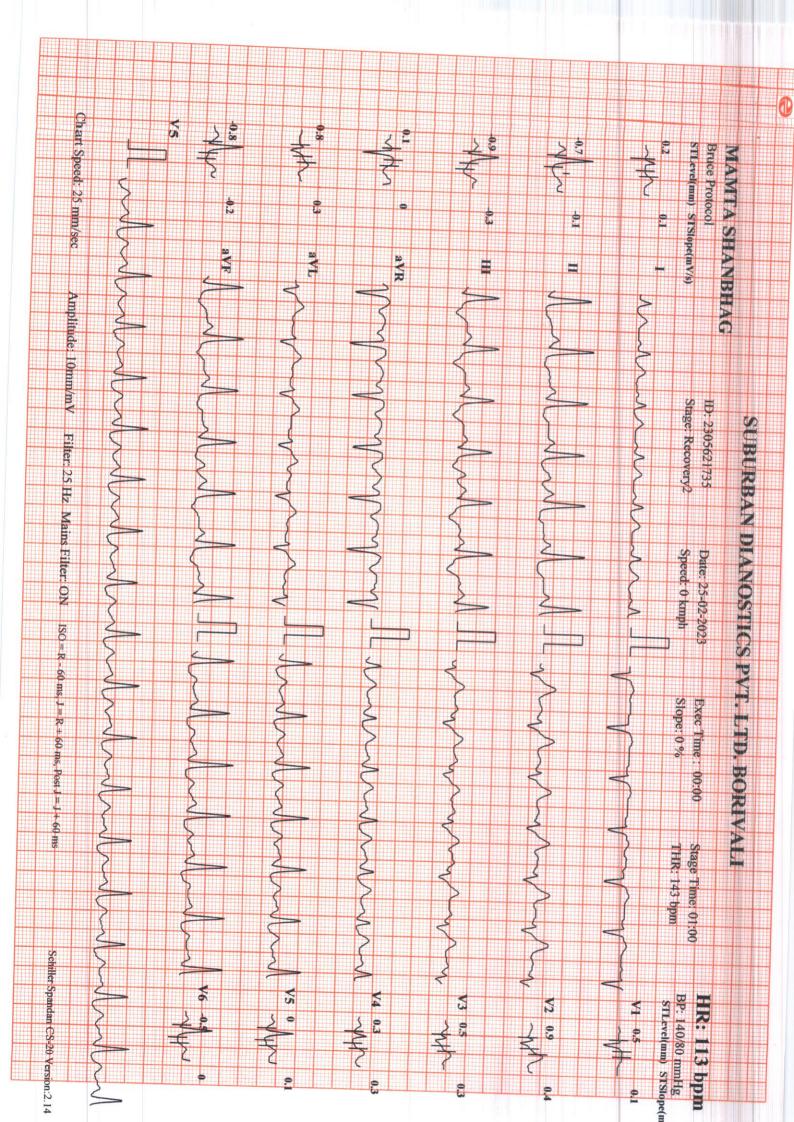


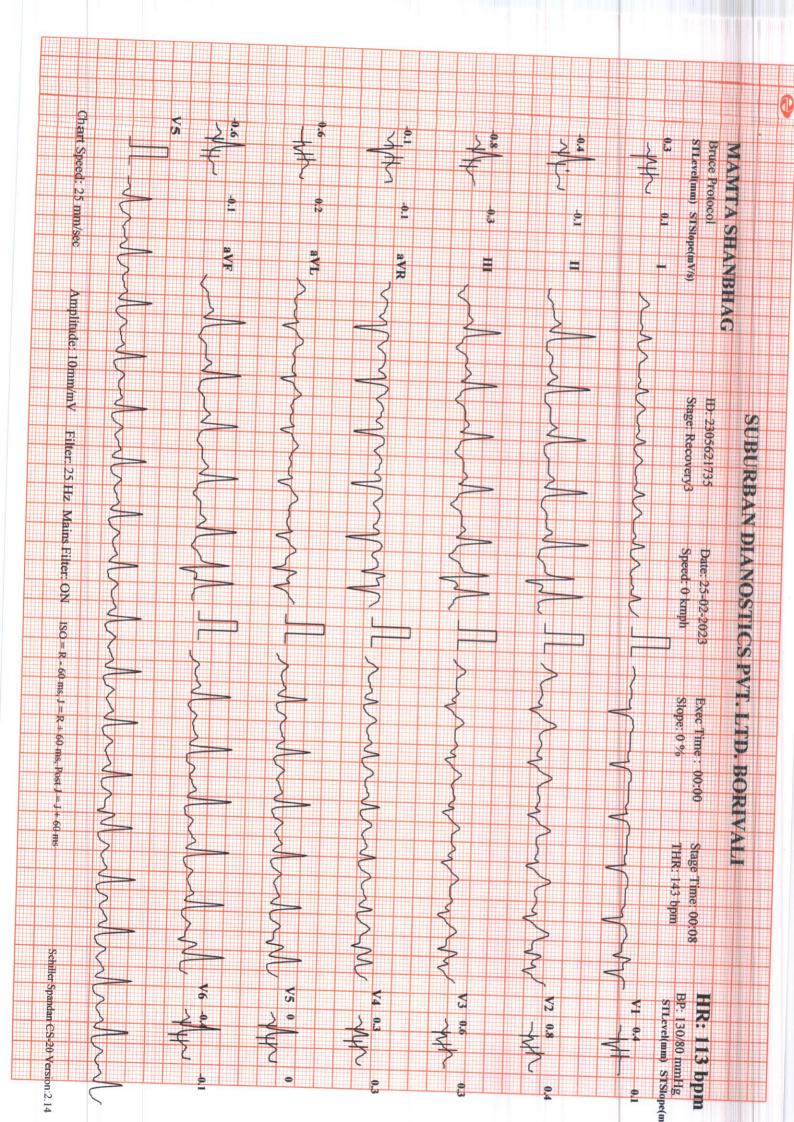


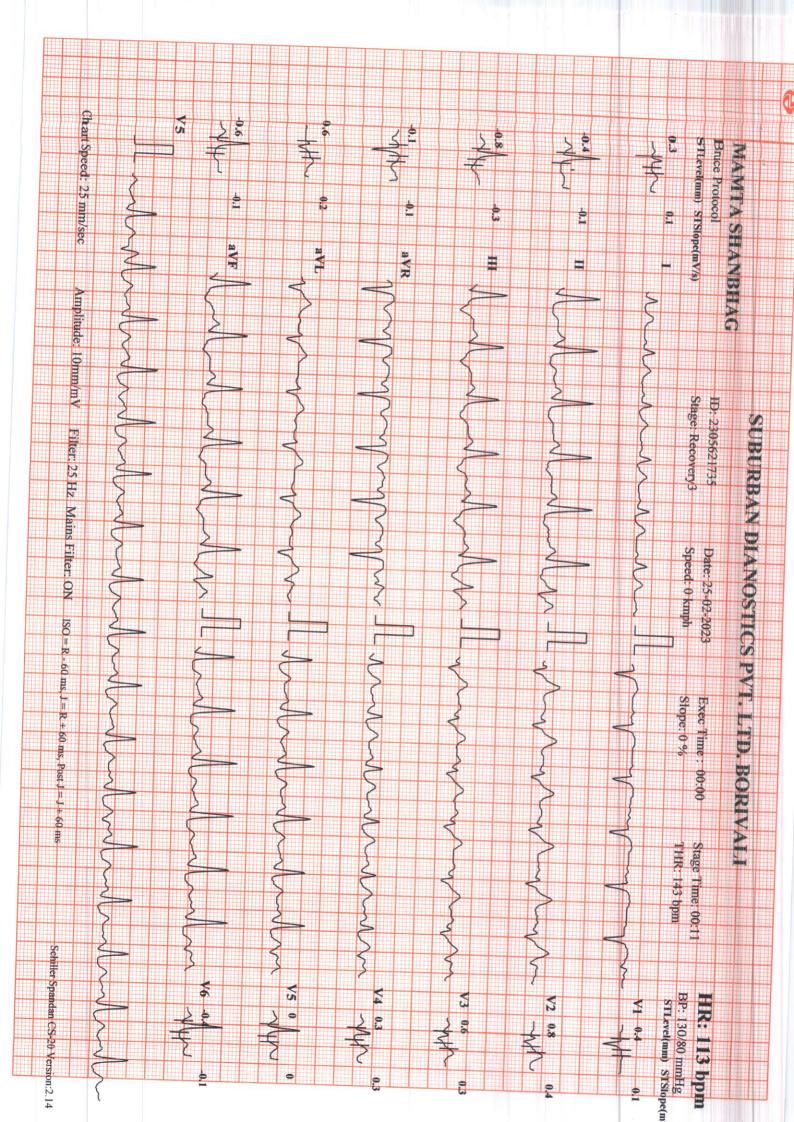












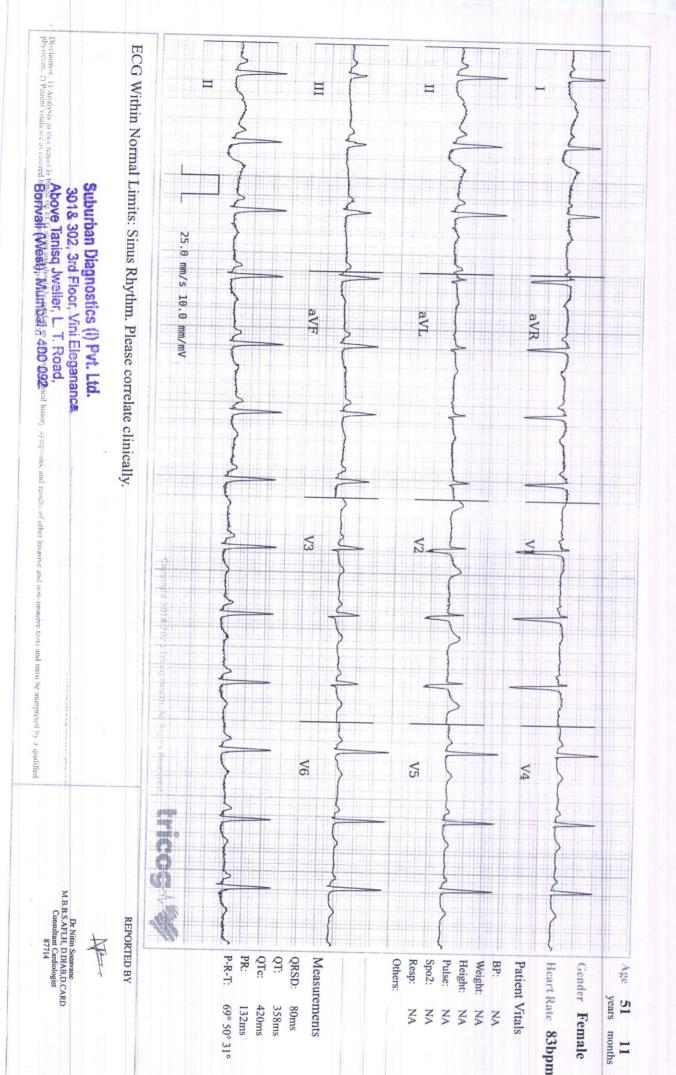
# SUBURBAN DIAGNOSTICS - BORIVALI WEST

SUBURBAN STICS

Patient Name: MAMTA V SHANBHAG
Patient ID: 2305621735

Date and Time: 25th Feb 23 9:11 AM

12 days





**Authenticity Check** 



CID

: 2305621735

Name

: Mrs MAMTA V SHANBHAG

Age / Sex

Reg. Location

: 51 Years/Female

Ref. Dr

.

:

: Borivali West

Reg. Date

Application To Scan the Code

Use a OR Code Scanner

: 25-Feb-2023

Reported : 25-Feb-2023 / 13:03

# **USG WHOLE ABDOMEN**

LIVER: Liver is normal in size, shape and echotexture. There is no intra-hepatic biliary radical dilatation. No evidence of any obvious 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 9.0 x 3.7 cm. Left kidney measures 9.8 x 4.4 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.

<u>UTERUS</u>: Uterus is anteverted, normal and measures 6.4 x 4.4 x 4.7 cm. Uterine myometrium shows homogenous echotexture. Endometrium is normal in thickness and measures 5.5 mm. Cervix appears normal.

OVARIES: Both ovaries appear normal in size and echotexture.

The right ovary measures 1.8 x 1.5 cm.

The left ovary measures 2.0 x 1.4 cm.

Bilateral adnexa is clear.

No free fluid or obvious significant lymphadenopathy is seen.

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: 2305621735

Name

: Mrs MAMTA V SHANBHAG

Age / Sex

: 51 Years/Female

Ref. Dr

.

Reg. Location

: Borivali West

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

Reg. Date

: 25-Feb-2023

Reported : 25-Feb-2023 / 13:03

# Opinion:

No significant abnormality is detected.

# For clinical correlation and follow up.

Investigations have their limitations. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly.

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

This report is prepared and physically checked by DR SUDHANSHU SAXENA before dispatch.

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

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Authenticity Check



Application To Scan the Code

: 25-Feb-2023 / 17:53

: 25-Feb-2023

Reg. Date

Reported

CID

: 2305621735

Name

: Mrs MAMTA V SHANBHAG

Age / Sex

: 51 Years/Female

Ref. Dr

Reg. Location

: Borivali West

# 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-----

This report is prepared and physically checked by Dr Rohit before dispatch.

DR. ROHIT MALIK DNB, DMRD, DMRE (MUM) RADIO DIAGNOSIS REG. No. 82356

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Page no 1 of 1