

Name : MRS.SHRUTIKA PIMPLE

Age / Gender : 33 Years / Female

Consulting Dr. : -

Reg. Location: Bhayander East (Main Centre)



Use a QR Code Scanner Application To Scan the Code

Collected

Reported

:07-Apr-2023 / 09:16 :07-Apr-2023 / 13:26

Calculated

Calculated

E

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

CBC (Complete Blood Count), Blood									
<u>PARAMETER</u>	RESULTS BIOLOGICAL REF RANGE								
RBC PARAMETERS									
Haemoglobin	11.5	12.0-15.0 g/dL	Spectrophotometric						
RBC	4.08	3.8-4.8 mil/cmm	Elect. Impedance						
PCV	35.6	36-46 %	Measured						
MCV	87	80-100 fl	Calculated						
MCH	28.1	27-32 pg	Calculated						
MCHC	32.2	31.5-34.5 g/dL	Calculated						
RDW	13.8	11.6-14.0 %	Calculated						
WBC PARAMETERS									
WBC Total Count	7660	4000-10000 /cmm	Elect. Impedance						
WBC DIFFERENTIAL AND ABS	OLUTE COUNTS								
Lymphocytes	36.9	20-40 %							
Absolute Lymphocytes	2826.5	1000-3000 /cmm	Calculated						
Monocytes	9.3	2-10 %							
Absolute Monocytes	712.4	200-1000 /cmm	Calculated						
Neutrophils	50.8	40-80 %							
Absolute Neutrophils	3891.3	2000-7000 /cmm	Calculated						

1-6 %

0.1-2 %

20-500 /cmm

20-100 /cmm

WBC Differential Count by Absorbance & Impedance method/Microscopy.

2.7

0.3

23.0

206.8

PLATELET PARAMETERS

Platelet Count	308000	150000-400000 /cmm	Elect. Impedance
MPV	8.8	6-11 fl	Calculated
PDW	15.2	11-18 %	Calculated

RBC MORPHOLOGY

Eosinophils

Basophils

Absolute Eosinophils

Absolute Basophils

Immature Leukocytes



Name : MRS.SHRUTIKA PIMPLE

Age / Gender : 33 Years / Female

Consulting Dr. : -

Reg. Location: Bhayander East (Main Centre)



Use a QR Code Scanner Application To Scan the Code

Collected

Reported

: 07-Apr-2023 / 09:16

:07-Apr-2023 / 12:38

Hypochromia Microcytosis

ypocnromia -

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 24

2-20 mm at 1 hr.

Sedimentation

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







Dr.JYOT THAKKER M.D. (PATH), DPB

Pathologist & AVP(Medical Services)

Page 2 of 12



CID : 2309717429

Name : MRS.SHRUTIKA PIMPLE

Age / Gender :33 Years / Female

Consulting Dr.

Reg. Location

: Bhayander East (Main Centre)

Authenticity Check

E

Use a QR Code Scanner Application To Scan the Code

Collected :07-Apr-2023 / 09:16 Reported :07-Apr-2023 / 13:27

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>				
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	97.0	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase				
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	97.0	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase				
BILIRUBIN (TOTAL), Serum	0.31	0.1-1.2 mg/dl	Colorimetric				
BILIRUBIN (DIRECT), Serum	0.13	0-0.3 mg/dl	Diazo				
BILIRUBIN (INDIRECT), Serum	0.18	0.1-1.0 mg/dl	Calculated				
TOTAL PROTEINS, Serum	7.3	6.4-8.3 g/dL	Biuret				
ALBUMIN, Serum	4.6	3.5-5.2 g/dL	BCG				
GLOBULIN, Serum	2.7	2.3-3.5 g/dL	Calculated				
A/G RATIO, Serum	1.7	1 - 2	Calculated				
SGOT (AST), Serum	24.9	5-32 U/L	NADH (w/o P-5-P)				
SGPT (ALT), Serum	25.7	5-33 U/L	NADH (w/o P-5-P)				
GAMMA GT, Serum	21.8	3-40 U/L	Enzymatic				
ALKALINE PHOSPHATASE, Serum	93.8	35-105 U/L	Colorimetric				
BLOOD UREA, Serum	16.1	12.8-42.8 mg/dl	Kinetic				
BUN, Serum	7.5	6-20 mg/dl	Calculated				
CREATININE, Serum	0.71	0.51-0.95 mg/dl	Enzymatic				



Name : MRS.SHRUTIKA PIMPLE

Age / Gender : 33 Years / Female

Consulting Dr. : -

Reg. Location: Bhayander East (Main Centre)



Use a QR Code Scanner Application To Scan the Code

Collected

:07-Apr-2023 / 09:16

Reported :07-Apr-2023 / 18:44

eGFR, Serum 101 >60 ml/min/1.73sqm Calculated

URIC ACID, Serum 4.4 2.4-5.7 mg/dl Enzymatic

Urine Sugar (Fasting)AbsentAbsentUrine Ketones (Fasting)AbsentAbsent

Urine Sugar (PP)AbsentAbsentUrine Ketones (PP)AbsentAbsent

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







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

Page 4 of 12



Name : MRS.SHRUTIKA PIMPLE

Age / Gender : 33 Years / Female

Consulting Dr. : - Collected : 07-Apr-2023 / 09:16

Reg. Location : Bhayander East (Main Centre) Reported : 07-Apr-2023 / 13:00

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

<u>PARAMETER</u> <u>RESULTS</u> <u>BIOLOGICAL REF RANGE</u> <u>METHOD</u>

Glycosylated Hemoglobin 5.7 Non-Diabetic Level: < 5.7 % HPLC (HbA1c), EDTA WB - CC Prediabetic Level: 5.7-6.4 %

Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

Estimated Average Glucose 116.9 mg/dl Calculated

(eAG), EDTA WB - CC

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 ***

AVAUNOSTICS (B. P.V.)

Dr.JYOT THAKKER M.D. (PATH), DPB

Pathologist & AVP(Medical Services)

Page 5 of 12



CID : 2309717429

Name : MRS.SHRUTIKA PIMPLE

Age / Gender : 33 Years / Female

Consulting Dr.

: Bhayander East (Main Centre) Reg. Location



Use a QR Code Scanner Application To Scan the Code

Collected

Reported

:07-Apr-2023 / 09:16

:07-Apr-2023 / 16:04

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE **EXAMINATION OF FAECES**

<u>PARAMETER</u>	<u>RESULTS</u>	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 Reducing Substances Absent





Dr..JYOT THAKKER M.D. (PATH), DPB Pathologist & AVP(Medical Services)

Page 6 of 12

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



CID : 2309717429

Name : MRS.SHRUTIKA PIMPLE

:33 Years / Female Age / Gender

Consulting Dr. Collected :07-Apr-2023 / 09:16 Reported :07-Apr-2023 / 14:06 : Bhayander East (Main Centre) Reg. Location



Use a QR Code Scanner Application To Scan the Code

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE URINE EXAMINATION REPORT

<u>PARAMETER</u>	TER RESULTS BIOLOGICAL REF RANGE			
PHYSICAL EXAMINATION				
Color	Pale yellow	Pale Yellow	-	
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator	
Specific Gravity	1.005	1.001-1.030	Chemical Indicator	
Transparency	Clear	Clear	-	
Volume (ml)	30	-	-	
CHEMICAL EXAMINATION				
Proteins	Absent	Absent	pH Indicator	
Glucose	Absent	Absent	GOD-POD	
Ketones	Absent	Absent	Legals Test	
Blood	Absent	Absent	Peroxidase	
Bilirubin	Absent	Absent	Diazonium Salt	
Urobilinogen	Normal	Normal	Diazonium Salt	
Nitrite	Absent	Absent	Griess Test	
MICROSCOPIC EXAMINATIO	<u>N</u>			
Leukocytes(Pus cells)/hpf	3-4	0-5/hpf		
Red Blood Cells / hpf	Absent	0-2/hpf		
Epithelial Cells / hpf	1-2			
Casts	Absent	Absent		
Crystals	Absent	Absent		
Amorphous debris	Absent	Absent		
Bacteria / hpf	+(>20/hpf)	Less than 20/hpf		
Others	-			

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

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

Reference: Pack insert

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







Dr.JYOT THAKKER M.D. (PATH), DPB Pathologist & AVP(Medical Services)

Page 7 of 12



Name : MRS.SHRUTIKA PIMPLE

Age / Gender : 33 Years / Female

Consulting Dr. :-

Reg. Location: Bhayander East (Main Centre)

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

Collected: Reported:

*** End Of Report ***

Page 8 of 12



CID : 2309717429

Name : MRS.SHRUTIKA PIMPLE

Age / Gender : 33 Years / Female

Consulting Dr. Collected :07-Apr-2023 / 09:16 Reported :07-Apr-2023 / 14:00 Reg. Location : Bhayander East (Main Centre)

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

PARAMETER RESULTS

ABO GROUP 0

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

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

Limitations:

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

Refernces:

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

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







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

Authenticity Check

Use a OR Code Scanner

Application To Scan the Code

Page 9 of 12



CID : 2309717429

Name : MRS.SHRUTIKA PIMPLE

:33 Years / Female Age / Gender

Consulting Dr.

Reg. Location : Bhayander East (Main Centre)



Use a QR Code Scanner Application To Scan the Code

Collected

Reported

:07-Apr-2023 / 09:16 :07-Apr-2023 / 13:27

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE LIPID PROFILE

<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
CHOLESTEROL, Serum	194.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	100.9	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	48.1	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	145.9	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	126.0	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	19.9	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.0	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.6	0-3.5 Ratio	Calculated

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







Dr.JYOT THAKKER M.D. (PATH), DPB Pathologist & AVP(Medical Services)

Page 10 of 12



Name : MRS.SHRUTIKA PIMPLE

Age / Gender : 33 Years / Female

Consulting Dr. : -

Reg. Location

: Bhayander East (Main Centre)

Authenticity Check

R

E

Use a QR Code Scanner Application To Scan the Code

Collected : 07-Apr-2023 / 09:16

Reported :07-Apr-2023 / 14:32

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE THYROID FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
Free T3, Serum	4.9	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	15.6	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	2.21	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



Name : MRS.SHRUTIKA PIMPLE

Age / Gender : 33 Years / Female

Consulting Dr. : - Collected : 07-Apr-2023 / 09:16

Reg. Location : Bhayander East (Main Centre) Reported :07-Apr-2023 / 14:32

Interpretation:

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

Clinical Significance:

- 1)TSH Values between high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors
- can give falsely high TSH.
- 2)TSH values may be trasiently altered becuase of non thyroidal illness like severe infections, liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

Diurnal Variation:TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am, and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7%(with in subject variation)

Reflex Tests: Anti thyroid Antibodies, USG Thyroid , TSH receptor Antibody. Thyroglobulin, Calcitonin

Limitations:

- 1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
- 2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

Reference:

- 1.O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2.Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3. Tietz , Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4.Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)

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

*** End Of Report ***







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

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

Page 12 of 12

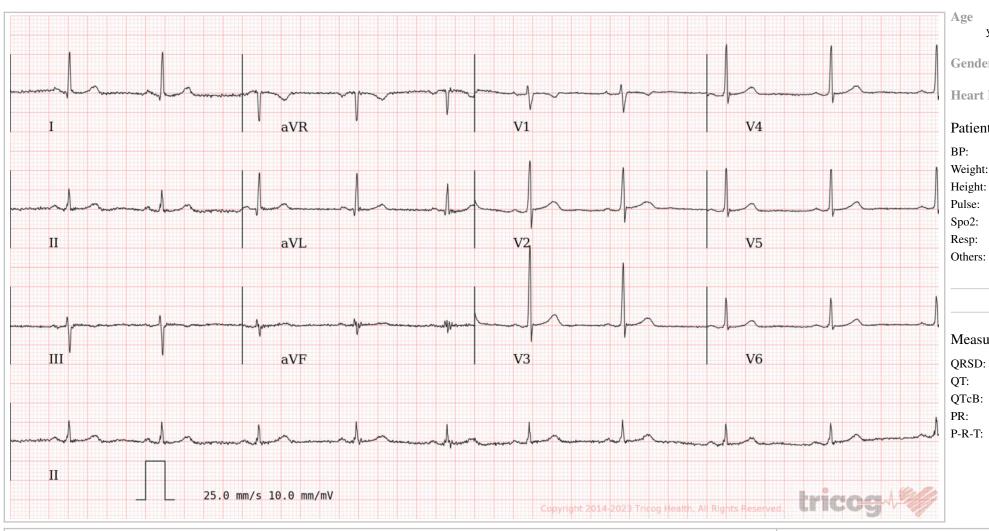
SUBURBAN DIAGNOSTICS - BHAYANDER EAST



Patient Name: SHRUTIKA PIMPLE

Date and Time: 7th Apr 23 9:30 AM

Patient ID: 2309717429



Age 33 NA 2 years months days

Gender Female

Heart Rate 60bpm

Patient Vitals

BP: 110/70 mmHg

Weight: 52 kg Height: 154 cm

Pulse: NA

Spo2: NA Resp: NA

Measurements

QRSD: 78ms
QT: 388ms
QTcB: 388ms
PR: 160ms

P-R-T: 34° -5° 15°

ECG Within Normal Limits: Sinus Rhythm, Normal axis No significant ST-T changes. Please correlate clinically.

REPORTED BY

Hom

Dr. Smita Valani MBBS, D. Cardiology 2011/03/0587

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.

Vn



Date: 7/4/23

Name: Strutika pim/pe

CID: 23097 173929

Sex / Age: 331F

EYE CHECK UP

Chief complaints:

Systemic Diseases:

Past history:

Unaided Vision:

Aided Vision:

Refraction:

HO

RE (E 616 616 N10 N16

(Left Eve)

						- /		
	Sph	СуІ	Axis	Vn	Sph	Cyl	Axis	,
Distance	.1							
							1	

Colour Vision: Normal / Abnormal

(Right Eye)

Remark:

Near

SUBURBAN DIAGNOSTICS (I) PVT. LTD Shep No. 101-A, 1st Floor, Kshitij Building Above Reymond, Near Thuriga Hospital Misa - Bhayander Road, Besynader (E) Dist. Thane-401105.

Phone No : 022 - 61700000



SUBURBANDIAGNOSTICS (I) PVT. LT SUBURBANDIAGNOSTICS (I) PVT. LT Shop No. 101-A 1st Fisher 1035. Above Resident Thance 1135. Mira - Bird Thance 1135.

DR. ANTTA CHOTTOTARY
CONSULTO 201111215553
Reg. No. 201111215553

R

Name VID

: Mrs . Shrutika Pimple

: 2309717429

Ref By

: Arcofemi Healthcare Limited

Reg Date

: 07-Apr-2023 09:08

Age/Gender

: 33 Years

Regn Centre

: Bhayander East (Main Centre)

History and Complaints:

No Complaint

EXAMINATION FINDINGS:

Height (cms):

154

Weight (kg):

52

Temp (0c):

Afebrile

Skin:

NAD

Blood Pressure (mm/hg):

110/70

Nails:

NAD

Pulse:

86/min

Lymph Node:

Not Palpable

Systems

Cardiovascular: S1S2-Normal

Respiratory: Genitourinary: Chest-Clear NAD

GI System:

NAD

CNS:

IMPRESSION:

USL with

0+ne 1

BIL Pury cythic Ovaries and supplied left ovary mits harmoulhappie and consultation.

Empert consultation.

CHIEF COMPLAINTS:

1) Hypertension: IHD

No No

No

3) Arrhythmia 4) Diabetes Mellitus

No

5) Tuberculosis

No No

6) Asthama 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 symptoms No

13) Blood disease or disorder 14) Cancer/lump growth/cyst

No No

15) Congenital disease

No

16) Surgeries

No

No

17) Musculoskeletal System



Name VID

Ref By

: Mrs . Shrutika Pimple

: 2309717429

: Arcofemi Healthcare Limited

Reg Date

: 07-Apr-2023 09:08

Age/Gender Regn Centre : 33 Years

: Bhayander East (Main Centre)

PERSONAL HISTORY:

1) Alcohol

2) Smoking

3) Diet

4) Medication

No

No

Mixed

No

DR. ANITA CHOUDSTARY

CO. 2017/12/5553

SUBURBAN DIAGNOSTICS (I) PVT. LTD.

Shop No. 101-A, 1st Floor (Schill) Building.

Shop No. 101-A, 1st Floor (Schill) Building.

Above Revisional Floor (Schill) Building.

Above Revisional Floor (Schill) Building.

Mira - Bhayantar Rose (Schill) Building.

Dist. Thansacture 10.

Phone No: 022 - 01700000

Report



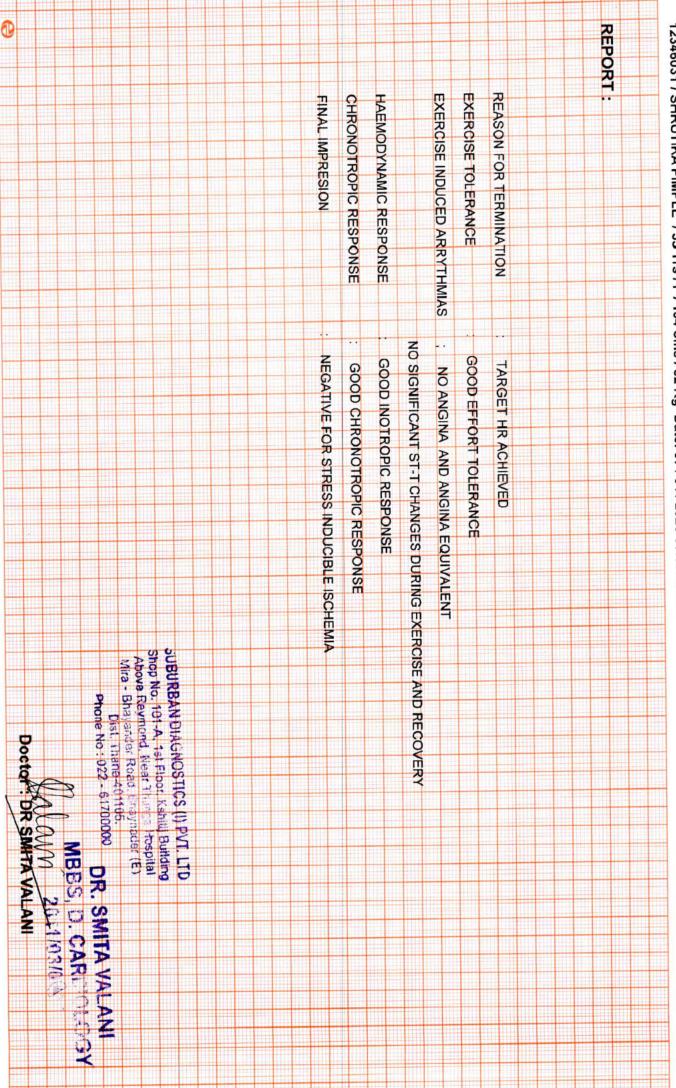
EMail: 12346031 (2309717429) / SHRUTIKA PIMPLE / 33 Yrs / F / 154 Cms / 52 Kg

	Max WorkLoad Attained Max ST Dep Lead & Avg Duke Treadmill Score Test End Reasons	Exercise Time Initial HR (ExStrt)	FINDINGS:	Recovery	Recovery	Recovery	Recovery	PeakEx	BRUCE Stage 2	BRUCE Stage 1	ExStart	ξ ;	Standing	Supine	Stage
	Max WorkLoad Attained 9.2 Good response to Ind Max ST Dep Lead & Avg ST Value V1 & -1.0 mm in Stage 1 Duke Treadmill Score -01.8 Test End Reasons , Test Complete	(Str.)		12:30	12:17	10:17	09:17	08:17	06:17	03:17	00:17	00:13	00:08	00:04	Time
	9.2 G T Value V1 & .01.8	: 08:00 : 70 bp : 110/8			4:00	2:00	1:00	2:00	3:00	3:00	0:04	0:05	0:04	0:04	Duration
	9.2 Good response to induced stress V1 & -1.0 mm in Stage 1 -01.8 , Test Complete	08:00 70 bpm 37% of Target 187 110/80 (mm/Hg)			00.0	00.0	01.1	03.4	02.5	01.7	01.7	00.0	00.0	00.0	Speed(mph)
	Se to induced Stage 1	arget 187			00.0	00.0	00.0	14.0	12.0	10.0	10.0	00.0	00.0	00.0	Elevation
	o stress			00.0	01.0	01.0	01.1	09.2	07.1	04.7	01.1	01.0	01.0	01.0	METs
Shop No. 10 Shop Rey Above Rey Nira - Bha		Max HR At		000	099	108	135	163	146	117	070	066	066	066	Rate
Suburban 191 Floor Kahili Buiting 18 Shop No. 101-A. 191 Floor Kahili Buiting 18 Shop No. 101-A. 191 Floor Kahili Buiting 18 Above Reymond (1987 Thanks Haynader (E1) Above Reymond Road (1987) Ader (E1) Above Road (1987) Ader (E1) Above Reymond Road (1987) Ader (E1) Above Road (1987) Ader (E1) Above Reymond Road (1987) Ader (E1) Above Road (1987) Ader (E1) Above Road (1987) Ader (1987) Ader (E1) Above Road (1987) Ader (1987		Attained 163 bpm 87% of Target 187 Attained 160/80 (mm/Hg)		0 %	53 %	58 %	72 %	87 %	78 %	63 %	37 %	35 %	35 %	35 %	%THR
Kahilij Buttding Kahilij Buttding Masa Hospital Masynader (E1 1700000	N PVT LTD	m 87% of Tar (mm/Hg)		US-IFF.	130/80	140/80	160/80	150/80	130/80	120/80	08/0/10	110/80	110/80	110/80	8
, , , , , , , , , , , , , , , , , , ,		get 187		000	128	3 5	216	244	189	140	0//	072	0/2	0/2	RP
MBBS, D. CAR MBBS, D. CAR 2011/03/0				8	2	3 8	3 6	8 8	8 8	3 8	3 8	3 8	8 6	8 8	PVC
DR. SMITAVALANI BBS, D. CAR 2011 10316															Comments

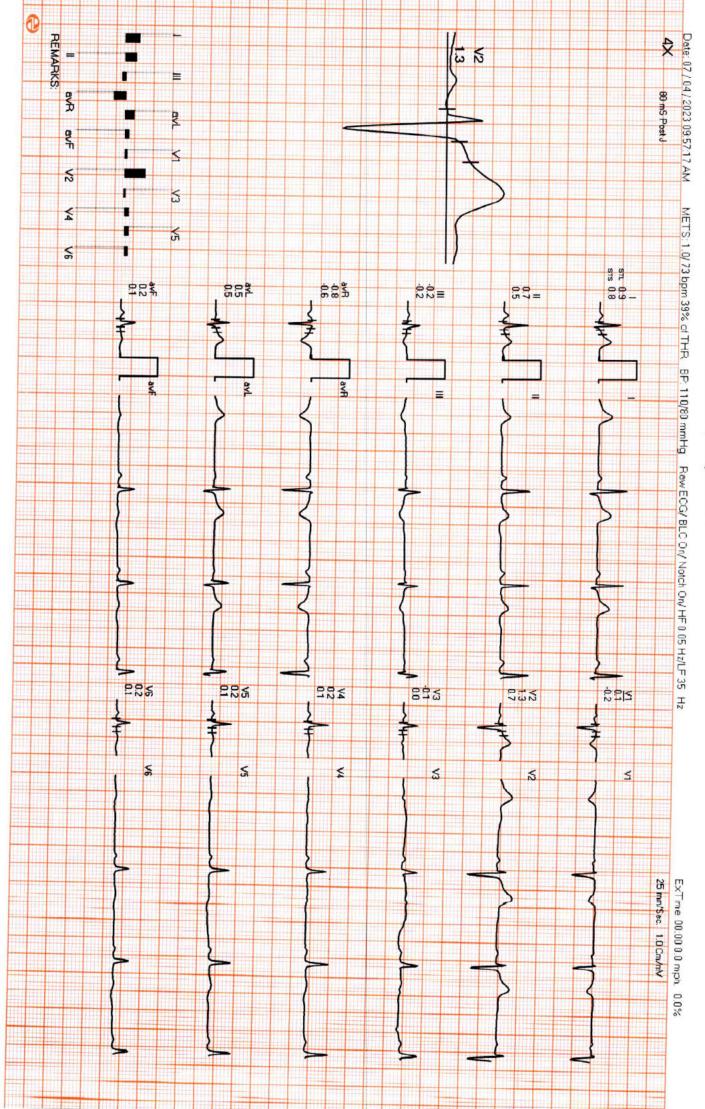
REPORT



EMail: 12346031 / SHRUTIKA PIMPLE /33 Yrs / F / 154 Cms / 52 Kg Date: 07 / 04 / 2023 09:57:17 AM



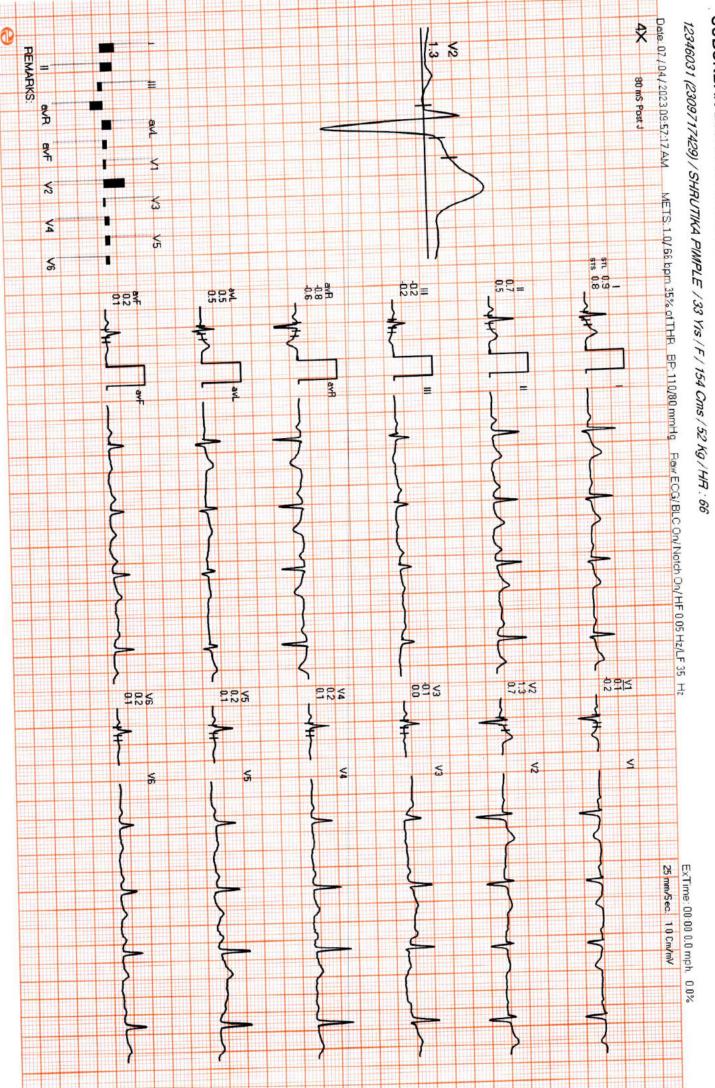
12346031 (2309717429) / SHRUTIKA PIMPLE / 33 Yrs / F / 154 Cms / 52 Kg / HR : 73





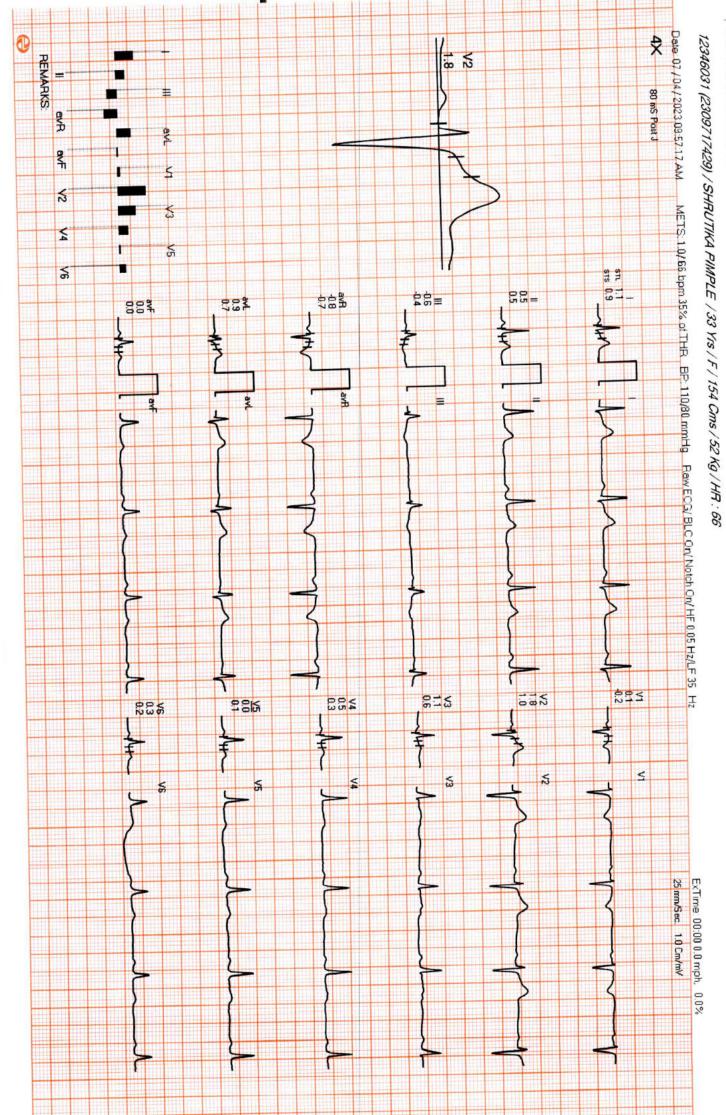
SUPINE (00:01)



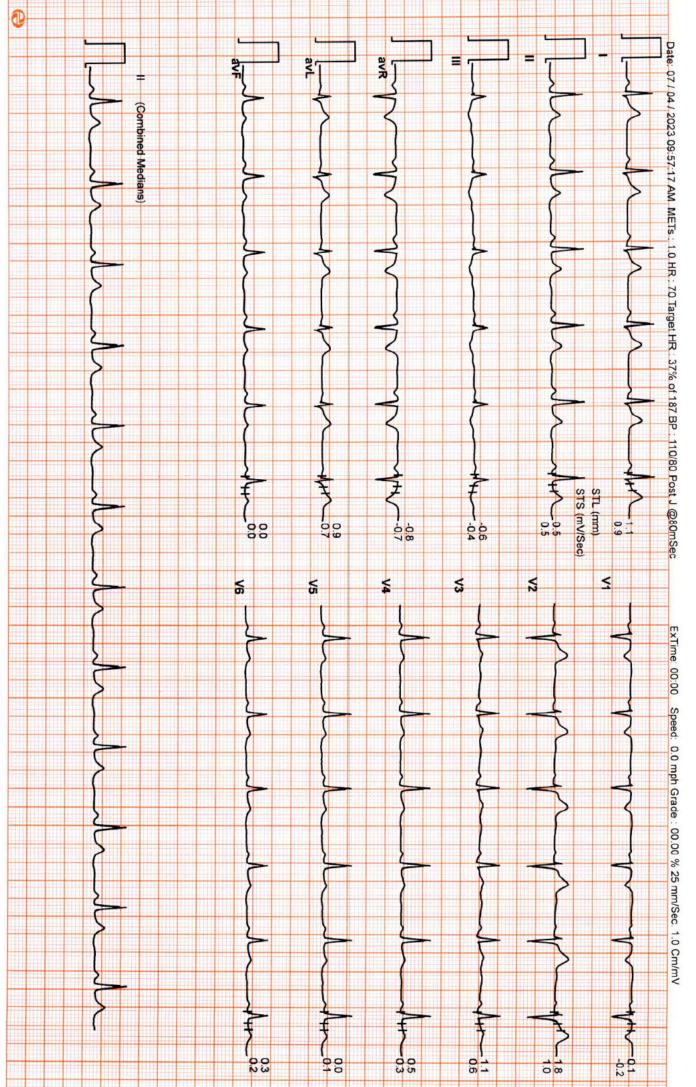


HV (00:00)





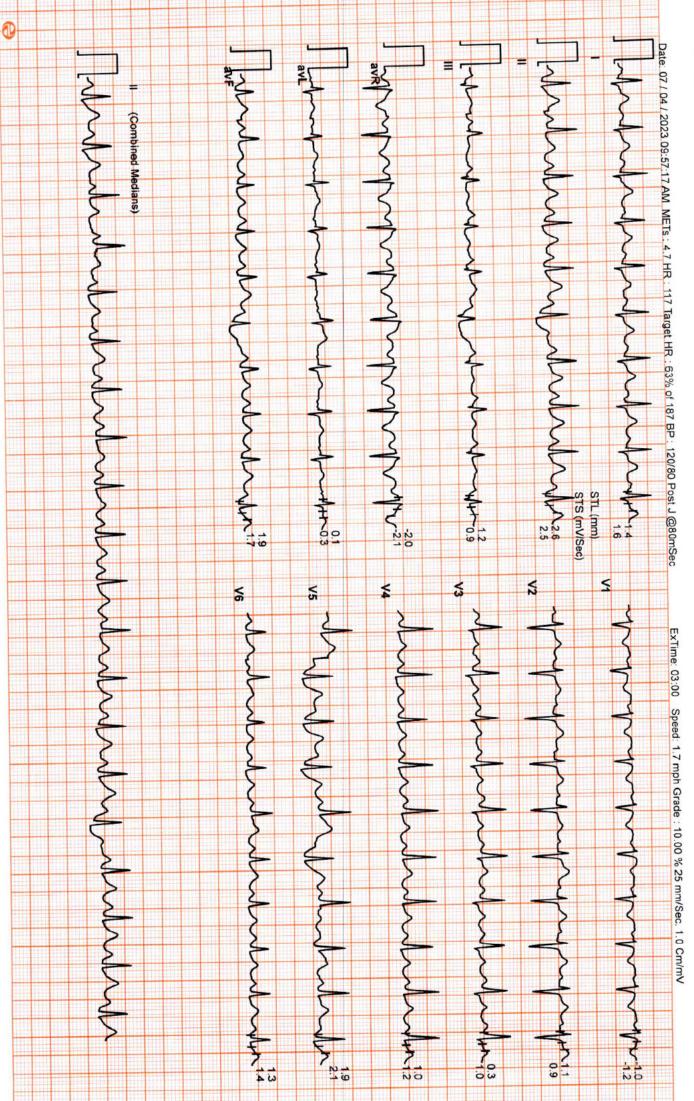
12346031 / SHRUTIKA PIMPLE / 33 Yrs / Female / 154 Cm / 52 Kg



12346031 / SHRUTIKA PIMPLE / 33 Yrs / Female / 154 Cm / 52 Kg

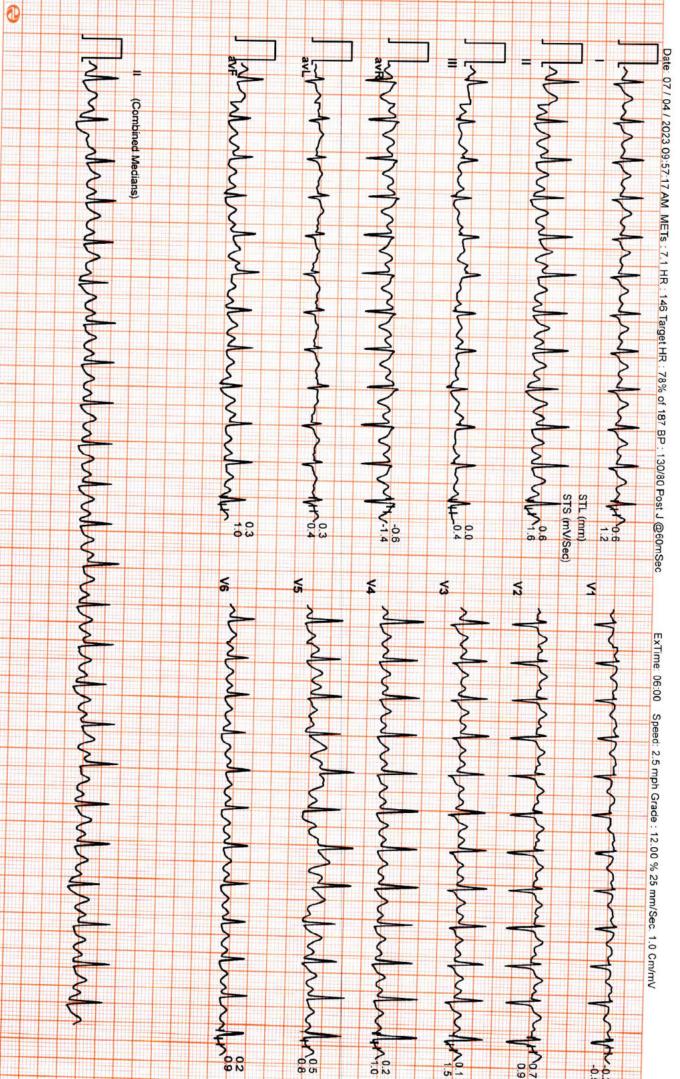
6X2 Combine Medians + 1 Rhythm BRUCE: Stage 1 (03:00)





6X2 Combine Medians + 1 Rhythm BRUCE: Stage 2 (03:00)

12346031 / SHRUTIKA PIMPLE / 33 Yrs / Female / 154 Cm / 52 Kg



12346031 / SHRUTIKA PIMPLE / 33 Yrs / Female / 154 Cm / 52 Kg

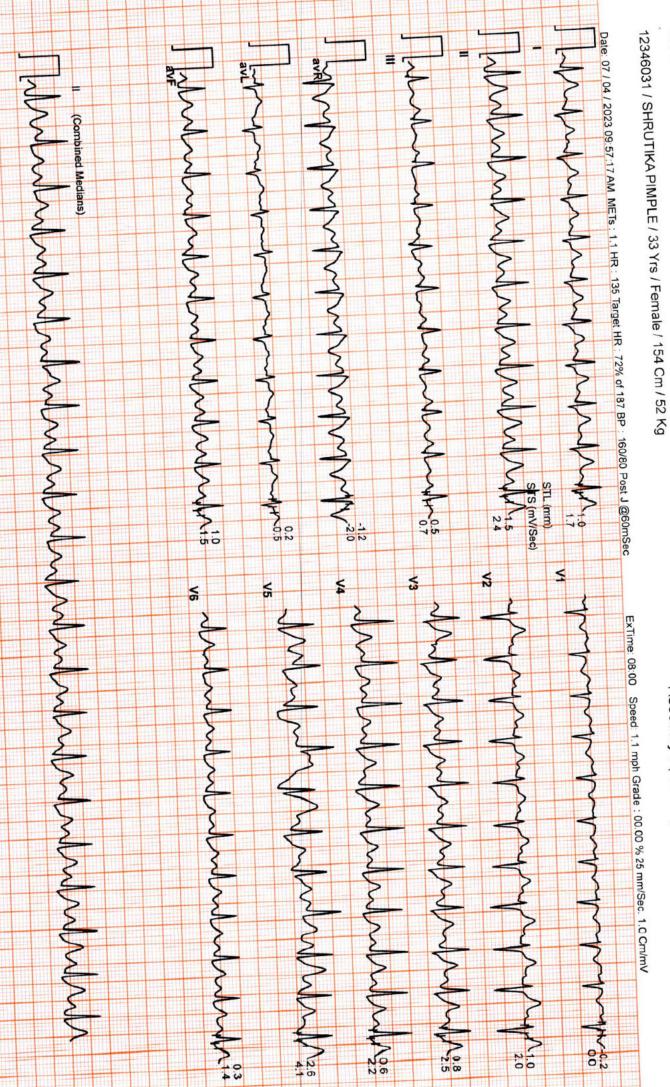
6X2 Combine Medians + 1 Rhythm PeakEx



Introduction of the control of the c Date: 07 / 04 / 2023 09:57:17 AM METs: 9.2 HR: 163 Target HR: 87% of 187 BP: 150/80 Post J @60mSec I follow from the formal and the following t 12 Maladalahalahalahalahalahahan 13 milia da mil (Combined Medians) ≤ EST MANNAMAN MANNAMAN AND SESSION OF THE SESSION OF 35 Malanlandanlandanlandanlandanlandanlanda 35 ExTime: 08:00 Speed: 3.4 mph Grade: 14.00 % 25 mm/Sec. 1.0 Cm/mV

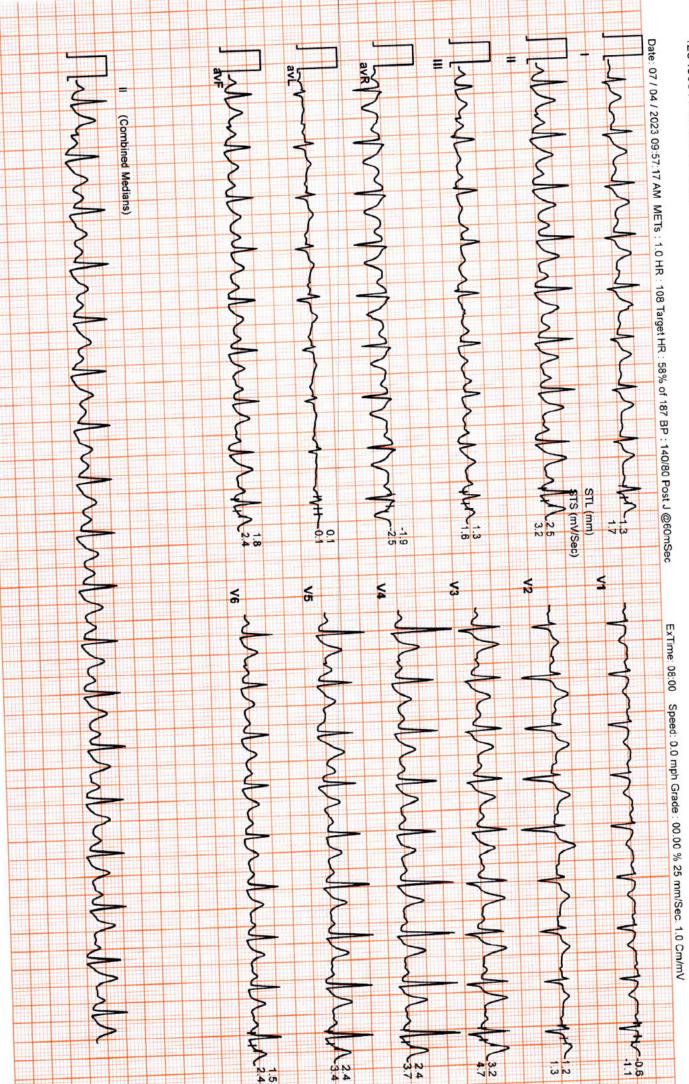
0

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



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

12346031 / SHRUTIKA PIMPLE / 33 Yrs / Female / 154 Cm / 52 Kg



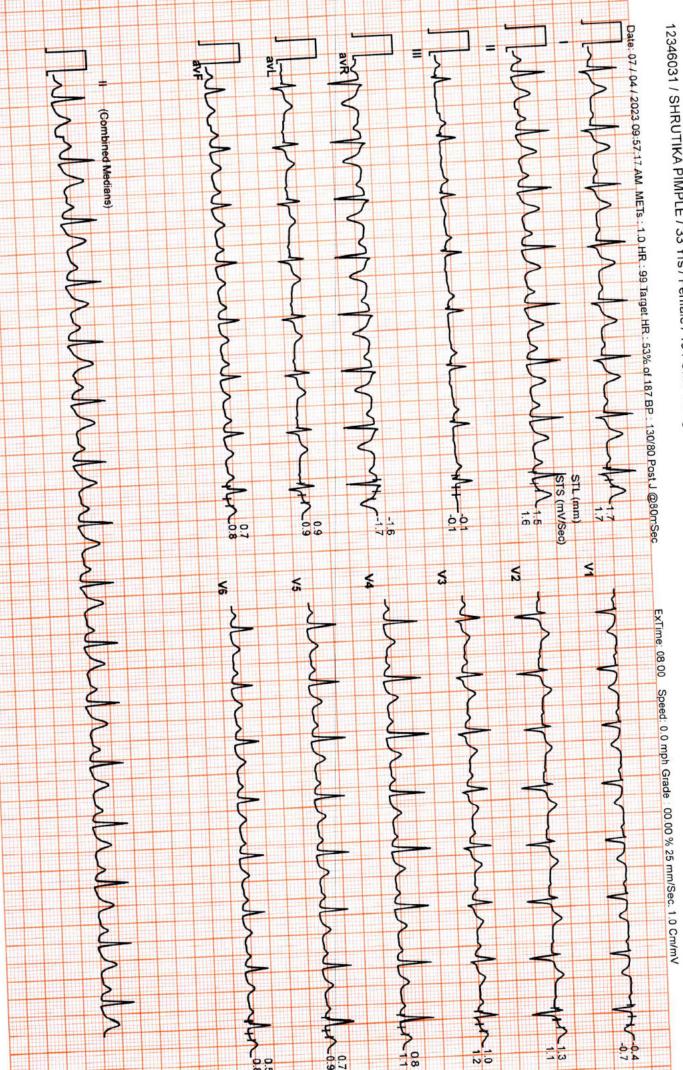
6X2 Combine Medians + 1 Rhythm Recovery: (04:00)



6X2 Combine Medians + 1 Rhythm Recovery: (04:13)



12346031 / SHRUTIKA PIMPLE / 33 Yrs / Female / 154 Cm / 52 Kg





: 2309717429 CID

Name : Mrs Shrutika Pimple Age / Sex : 33 Years/Female

Ref. Dr Reg. Date : 07-Apr-2023

Reg. Location : Bhayander East Main Centre Reported



R

 \mathbf{E}

Application To Scan the Code

: 07-Apr-2023/12:45

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (13.5 cm), shape and shows smooth margins. It shows normal parenchymal echotexture. No obvious cystic or solid lesion made out in the parenchyma. The intra hepatic biliary and portal radicals appear normal. The main portal vein appears normal.

GALL BLADDER:

The gall bladder is folded and physiologically distended. Neck region is not well visualised. Gall bladder wall appears normal. No evidence of calculus, mass lesion or sludge seen in the visualised lumen.

COMMON BILE DUCT:

The visualized common bile duct is normal in calibre. Terminal common bile duct is obscured due to bowel gas artefacts.

PANCREAS:

The pancreas appears normal. No evidence of solid or cystic mass lesion made out.

KIDNEYS:

Right kidney measures 9.8 x 3.8 cm. Left kidney measures 10.0 x 4.1 cm. Both the kidneys are normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. Pelvicalyceal system is normal. No evidence of any calculus, hydronephrosis or mass lesion seen on both sides.

SPLEEN:

The spleen is normal in size (8.1 cm). Parenchyma appears normal. No evidence of focal lesion is noted.

URINARY BLADDER:

The urinary bladder is well distended and reveals no intraluminal abnormality. Bladder wall appears normal. No obvious calculus or mass lesion made out in the lumen.

There is no evidence of any lymphadenopathy or ascites.

UTERUS:

The uterus is anteverted and appears normal. It measures 7.9 x 4.5 x 4.1 cms in size. Myometrium appears homogenous. No obvious hypo or hyperechoic mass lesion made out in the myometrium. The endometrium measures 9.2 mm and appears normal.



Name : Mrs Shrutika Pimple Age / Sex : 33 Years/Female

Ref. Dr :

Reg. Location: Bhayander East Main Centre

Authenticity Check

Use a QR Code Scanner Application To Scan the Code

Reg. Date : 07-Apr-2023

Reported : 07-Apr-2023/12:45

OVARIES:

Right ovary: 3.9 x 2.3 x 2.1 cm, Vol: 10.1 cc. Right ovary is normal in size, shape and position.

Left ovary : $5.9 \times 4.0 \times 5.0 \text{ cm}$, Vol : 62.8 cc.

Left ovary is enlarged in size. Parenchyma shows a well defined, thin walled cyst measuring 39.7 x 30.5 mm with fine septations and internal echoes within - s/o hemorrhagic cyst. Another well defined, thin walled, anechoic cyst measuring 26.1 x 20.2 mm is seen in the left ovary - possibly a functional cyst.

Multiple small follicles are seen in the periphery of echogenic stroma in both ovaries.

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

No free fluid is seen in the pouch of douglas.

IMPRESSION:

- Bilateral polycystic ovaries.
- Enlarged left ovary with haemorrhagic and functional cysts as described above.

Kindly correlate clinically.

Investigations have their limitation. Solitary pathological/Radiological & other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms & other related tests. Please interpret accordingly.

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

DR.VIBHA S KAMBLE MBBS ,DMRD Reg No -65470

Consultant Radiologist



CID : 2309717429

: Mrs Shrutika Pimple Name Age / Sex : 33 Years/Female

Ref. Dr

Reg. Location : Bhayander East Main Centre

Authenticity Check

R

E



Use a QR Code Scanner Application To Scan the Code

Reg. Date : 07-Apr-2023

: 07-Apr-2023/12:45 Reported



Name : Mrs Shrutika Pimple Age / Sex : 33 Years/Female

Ref. Dr :

Reg. Location: Bhayander East Main Centre

Authenticity Check

R

Use a QR Code Scanner Application To Scan the Code

Reg. Date : 07-Apr-2023

Reported : 07-Apr-2023/10:48

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.VIBHA S KAMBLE MBBS ,DMRD Reg No -65470 Consultant Radiologist



Name : Mrs Shrutika Pimple Age / Sex : 33 Years/Female

Ref. Dr :

Reg. Location: Bhayander East Main Centre

Authenticity Check

R

Use a QR Code Scanner Application To Scan the Code

Reg. Date : 07-Apr-2023

Reported : 07-Apr-2023/10:48