

CID# : 2308422073  
Name : MR.PRAVEEN PENDLI  
Age / Gender : 30 Years/Male  
Consulting Dr. :  
Reg.Location : Kandivali East (Main Centre)  
Collected : 25-Mar-2023 / 09:57  
Reported : 26-Mar-2023 / 10:25

### PHYSICAL EXAMINATION REPORT

#### History and Complaints:

Hypothyroid 5 yrs.

#### EXAMINATION FINDINGS:

Height (cms):	170 cms	Weight (kg):	69 kgs
Temp (0c):	Afebrile	Skin:	Normal
Blood Pressure (mm/hg):	110/80	Nails:	Normal
Pulse:	72/min	Lymph Node:	Not palpable

#### Systems

Cardiovascular: Normal  
Respiratory: Normal  
Genitourinary: Normal  
GI System: Normal  
CNS: Normal

#### IMPRESSION:

*Dyslipidemia  
TSH - S. 9.54  
- use - fatty liver*

#### ADVICE:

*Low fatty diet*

*Repeat 3 mths  
Lipid Profile  
T<sub>3</sub> T<sub>4</sub> TSH*

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Reg.Location : Kandivali East (Main Centre) Reported : 26-Mar-2023 / 10:25

**CHIEF COMPLAINTS:**

- |  |                                       |
|--|---------------------------------------|
| 1) Hypertension:                         | No                                    |
| 2) IHD                                   | No                                    |
| 3) Arrhythmia                            | No                                    |
| 4) Diabetes Mellitus                     | No                                    |
| 5) Tuberculosis                          | No                                    |
| 6) Asthama                               | No                                    |
| 7) Pulmonary Disease                     | No                                    |
| 8) Thyroid/ Endocrine disorders          | Yes                                   |
| 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            | No                                    |
| 14) Cancer/lump growth/cyst              | No                                    |
| 15) Congenital disease                   | No                                    |
| 16) Surgeries                            | laser varicose veins Left LL 1yrs ago |
| 17) Musculoskeletal System               | No                                    |

**PERSONAL HISTORY:**

- |               |             |
|---------------|-------------|
| 1) Alcohol    | Occasionaly |
| 2) Smoking    | No          |
| 3) Diet       | Mixed       |
| 4) Medication | Yes         |

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

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Thakur Village, Kandivali (east),  
Mumbai - 400101.  
Tel : 61700000

*Dr. Jagruti Dhale*  
MBBS  
Consultant Physician  
Reg. No. 69548  
*J Dhale*  
Dr.JAGRUTI DHALE

CID : 2308422073  
Name : Mr PRAVEEN PENDLI  
Age / Sex : 30 Years/Male  
Ref. Dr :  
Reg. Location : Kandivali East Main Centre  
Reg. Date : 25-Mar-2023  
Reported : 25-Mar-2023 / 14:44

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**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.**

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.X ray is known to have inter observer variations.Further / follow up imaging may be needed in some cases for confirmation / exclusion of diagnosis.Please interpret accordingly.In case of any typographical error / spelling error in the report, patient is requested to immediately contact the centre within 7 days, post which the center will not be responsible for any rectification.

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

*BMS*

DR. SHRIKANT M. BODKE  
D.M.R.E., M.B.B.S.  
Reg. No. 2006/04/2376

Click here to view images <<ImageLink>>

Authenticity Check



Use a QR Code Scanner  
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CID : 2308422073  
Name : Mr PRAVEEN PENDLI  
Age / Sex : 32 Years/Male  
Ref. Dr :  
Reg. Location : Kandivali East Main Centre  
Reg. Date : 25-Mar-2023  
Reported : 25-Mar-2023 / 12:14

## USG WHOLE ABDOMEN

### LIVER:

The liver is normal in size, 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 partially distended and appears normal. No evidence of gall stones or mass lesions seen.

### PANCREAS:

The pancreas is well visualized 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 10.8 x 3.9 cm. Left kidney measures 10.3 x 3.5 cm.

### SPLEEN:

The spleen is normal in size 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.

### PROSTATE:

The prostate is normal in size and volume is 12 cc.

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023032509583489>

Authenticity Check



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Name : Mr PRAVEEN PENDLI  
Age / Sex : 32 Years/Male  
Ref. Dr :  
Reg. Location : Kandivali East Main Centre

Reg. Date : 25-Mar-2023  
Reported : 25-Mar-2023 / 12:14

**IMPRESSION:**  
Grade I fatty liver.

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

*BMS*

DR. SHRIKANT M. BODKE  
D.M.R.E., M.B.B.S.  
Reg. No. 2006/04/2376

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. Patient was explained in detail verbally about the USG findings, USG measurements and its limitations. In case of any typographical error in the report, patient is requested to immediately contact the centre for rectification. Please interpret accordingly.

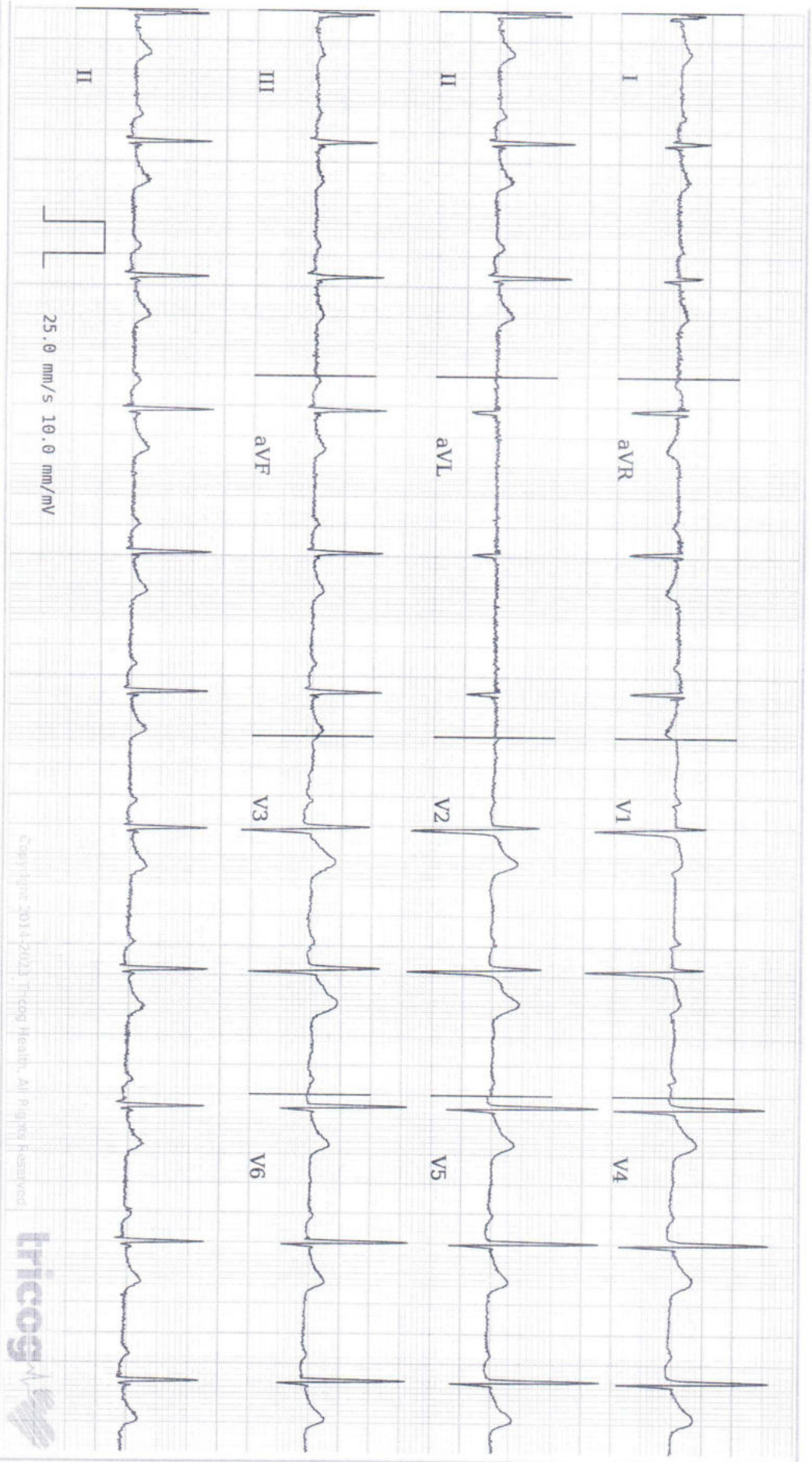
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REGD. OFFICE: Suburban Diagnostics (India) Pvt. Ltd., Aston, 2<sup>nd</sup> Floor, Sundervan Complex, Above Mercedes Showroom, Andheri West, Mumbai - 400053.

CENTRAL REFERENCE LABORATORY: Shop No. 9, 101 to 105, Skyline Wealth Space Building, Near Dmart, Premier Road, Vidyavihar (W), Mumbai - 400086.

HEALTHLINE: 022-6170-0000 | E-MAIL: customerservice@suburbandiagnosics.com | WEBSITE: www.suburbandiagnosics.com

Corporate Identity Number (CIN): U85110MH2002PTC136144



25.0 mm/s 10.0 mm/mV

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Age **30** 11 20  
years months days

Gender **Male**

Heart Rate **65bpm**

Patient Vitals

BP: 110/80 mmHg

Weight: 69 Kg

Height: 170 cm

Pulse: NA

Spo2: NA

Resp: NA

Others:

**Measurements**

QRSD: 72ms

QT: 380ms

QTc: 395ms

PR: 208ms

P-R-T: 66° 79° 59°

REPORTED BY

DR AKHIL PARULEKAR  
MBBS, MD, MEDICINE, DNB Cardiology  
Cardiologist  
2012082483

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

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.

**DENTAL CHECK - UP**

Name:- *Praveen Pendle*

CID : *2368477073*

Sex / Age : *M / 32*

Occupation:-

Date: *25/03/2023*

Chief complaints:- *NO complaints*

Medical / dental history:- *Extraction done*

**GENERAL EXAMINATION:**

**1) Extra Oral Examination:**

- a) TMJ: *Normal movements*
- b) Facial Symmetry: *Bilateral dymmetrical*

**2) Intra Oral Examination:**

- a) Soft Tissue Examination: *Normal*
- b) Hard Tissue Examination: *Normal*
- c) Calculus:  
Stains: *8/8 Extraction done*

18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28
48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38

	Missing	#	Fractured
○	Filled/Restored	RCT	Root Canal Treatment
○	Cavity/Caries	RP	Root Piece

Advised: *a) Follow up after year*

**DR. BHUMIK PATEL**  
**(B.D.S) A - 23378**

Provisional Diagnosis:-

*- NIL -*

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Mumbai - 400101.  
Tel : 61700000

*Dr. Bhumik Patel*



Date:- 25/3/23

CID: 2308 422073

Name:- Mr. Praveen Bendu

Sex/Age: m/32

**EYE CHECK UP**

Chief complaints: Routine checkup

Systemic Diseases: TSH 4+ yrs back

Past history: no h/o Ocular surgery

Unaided Vision: 6/12 6/12 blur

Aided Vision: 6/6 n/c 6/6 n/c

4 log  
← -1.0  
-1.50

Refraction: COMB! normal

	(Right Eye)				(Left Eye)			
	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	-0.25	0.50	75	6/6	-0.25	0.50	100	6/6
Near				n/c				n/c

Colour Vision: Normal / Abnormal

Remark: Vn within normal limit

*Kajal K.*  
**KAJAL NAGRECHA**  
OPTOMETRIST

**SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.**  
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Thakur Village, Kandivalli (east),  
Mumbai - 400101.  
Tel : 61700360



# SUBURBAN DIAGNOSTICS KANDIVALI EAST



Report

Email:

1340 (2308422073) / PRAVEEN PENDLI / 32 Yrs / M / 170 Cms / 69 Kg  
 Date: 25 / 03 / 2023 12:33:16 PM Refd By : AEFORCAMI Examined By : DR.AKHIL PARULEKAR

Stage	Time	Duration	Speed(Kmph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:08	0:08	00.0	00.0	01.0	070	37 %	110/80	077	00	
Standing	00:28	0:20	00.0	00.0	01.0	078	41 %	110/80	085	00	
HV	00:35	0:07	00.0	00.0	01.0	077	41 %	110/80	084	00	
ExStart	00:48	0:13	00.0	00.0	01.0	071	38 %	110/80	078	00	
BRUCE Stage 1	02:48	2:00	02.7	10.0	03.5	097	52 %	110/80	106	00	
BRUCE Stage 2	04:48	2:00	04.0	12.0	06.3	115	61 %	110/80	126	00	
BRUCE Stage 3	06:48	2:00	05.5	14.0	09.2	143	76 %	140/80	200	00	
PeakEx	08:00	1:12	06.8	16.0	11.5	163	87 %	140/80	228	00	
Recovery	09:00	1:00	00.2	00.0	04.2	132	70 %	140/80	184	00	
Recovery	09:09	1:10	00.0	00.0	03.2	126	67 %	140/80	176	00	

## FINDINGS :

Exercise Time : 07:12  
 Initial HR (ExStrt) : 71 bpm 38% of Target 188  
 Initial BP (ExStrt) : 110/80 (mm/Hg)  
 Max WorkLoad Attained : 11.5 Good response to induced stress  
 Duke Treadmill Score : 06.4  
 Test End Reasons : Heart Rate Achieved

Max HR Attained 163 bpm 87% of Target 188  
 Max BP Attained 140/80 (mm/Hg)

**Dr. Akhil P. Parulekar.**

MBS. LTD. Maharashtra

DNB Cardiology

Reg. No. 2012082453

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Row House No. 3, Aarjuni,

Thakur Village, Kandivali (East),

Mumbai - 400101.

Tel : 61700600

Doctor : DR.AKHIL PARULEKAR





**Email:**

1340 / PRAVEEN PENDLI / 32 Yrs / M / 170 Cms / 69 Kg Date: 25 / 03 / 2023 12:33:16 PM Refd By : AEFORCAMI

**REPORT :**

Heart Rate 163.0 bpm  
 Systolic BP 140.0 mmHg Diastolic BP 80.0 mmHg  
 Exercise Time 07.12 Mins. Ectopic Beats 0.0  
 METS 11.5 Test End Reason , Heart Rate Achieved Target Heart Rate 87% of 188

TEST OBJECTIVE	ROUTINE CHECK UP
RISK FACTOR	NONE
ACTIVITY	MODERATE ACTIVE
MEDICATION	NONE
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 STRESS TEST IS NEGATIVE FOR EXERCISE INDUCED ISCHAEMIC HEART DISEASE FOR GIVEN DURATION OF EXERCISE.

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

**Dr. Akhil P. Parulekar,**

MBBS, MD, Medicine  
 DNB Cardiology  
 Reg. No. 2612082403

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 Taktar Village, Kandivali (East),  
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 Tel : 61700800

**Doctor : DR.AKHIL PARULEKAR**



SUBURBAN DIAGNOSTICS KANDIVALI EAST

SUPINE ( 00:08 )

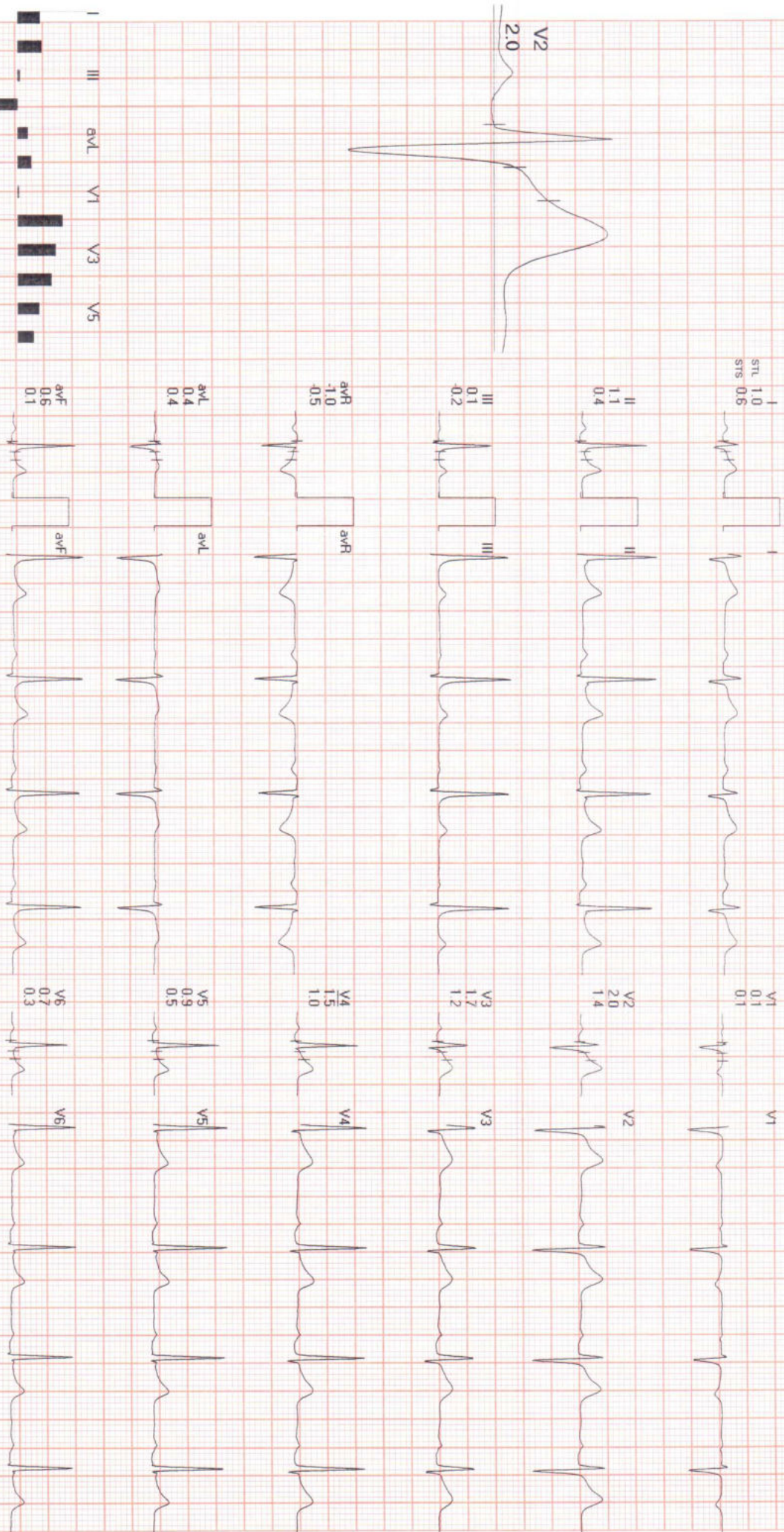


1340 (2308422073) / PRAVEEN PENDLI / 32 Yrs / M / 170 Cms / 69 Kg / HR : 70

Date: 25 / 03 / 2023 12:33:16 PM METS: 1 of 70 bpm 37% 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 Kmph. 0.0%  
25 mm/Sec. 1.0 Cm/mV



REMARKS:



**SUBURBAN DIAGNOSTICS KANDIVALI EAST**

**STANDING ( 00:20 )**

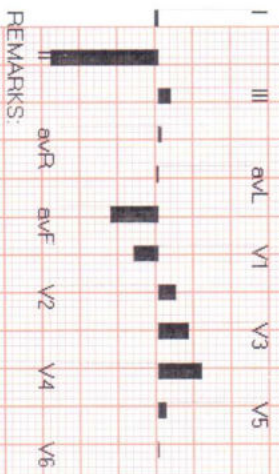
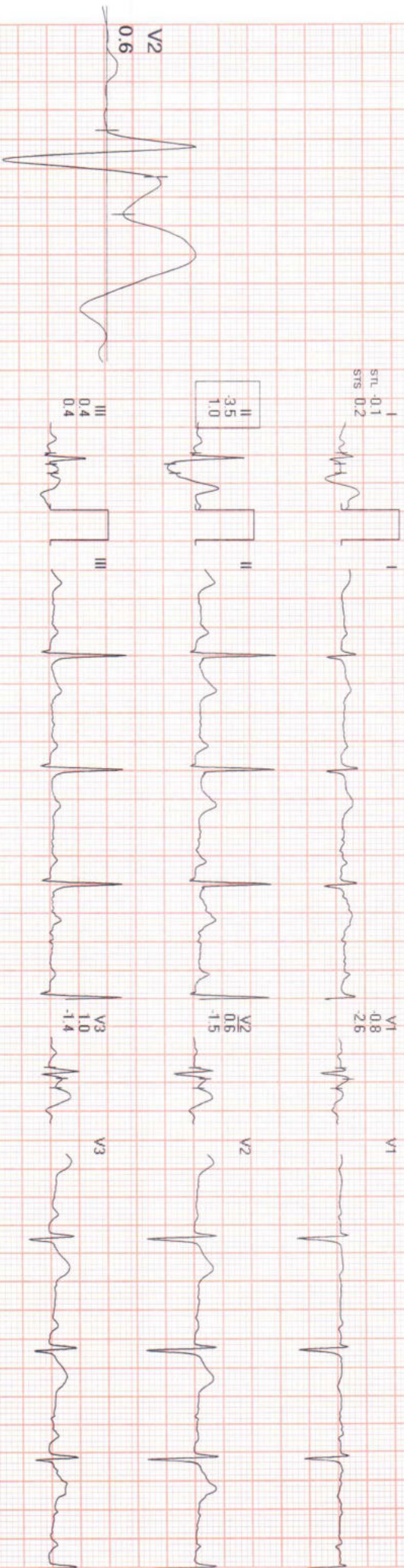


1340 (2308422073) / PRAVEEN PENDLI / 32 Yrs / M / 170 Cms / 69 Kg / HR : 78

Date: 25 / 03 / 2023 12:33:16 PM METS: 1.0 / 78 bpm 41% 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 KmPh. 0.0%  
25 mm/Sec 1.0 Cm/mV



REMARKS:



**SUBURBAN DIAGNOSTICS KANDIVALI EAST**

**HV (00:07)**

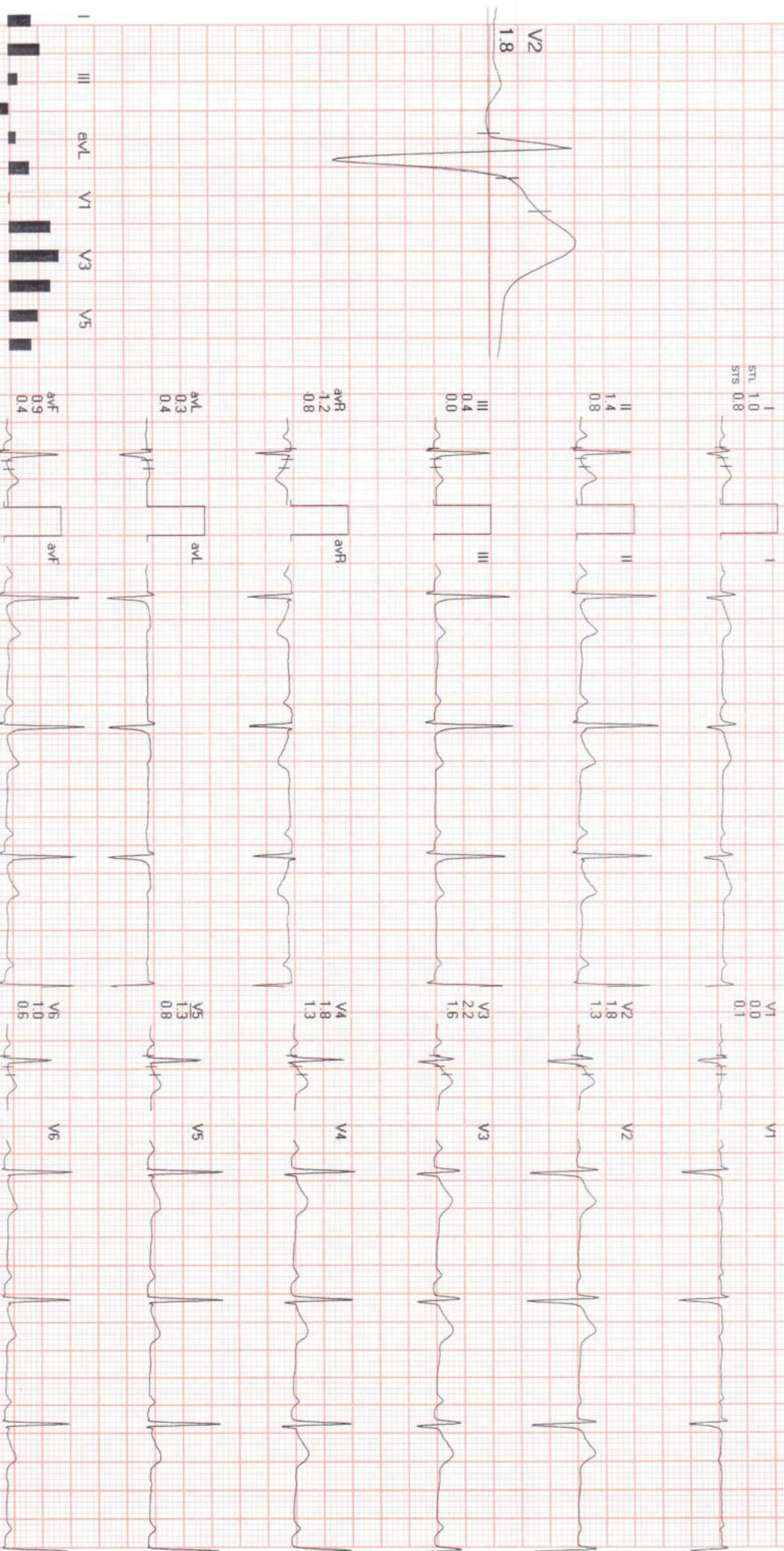


1340 (2308422073) / PRAVEEN PENDI / 32 Yrs / M / 170 Cms / 69 Kg / HR : 77

Date: 25 / 03 / 2023 12:33:16 PM METS: 1.0/ 77 bpm 41% of THR BP: 110/80 mmHg P<sub>aw</sub> ECG/ BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz

4X 80 ms Post J

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



REMARKS:



SUBURBAN DIAGNOSTICS KANDIVALI EAST

ExStnt

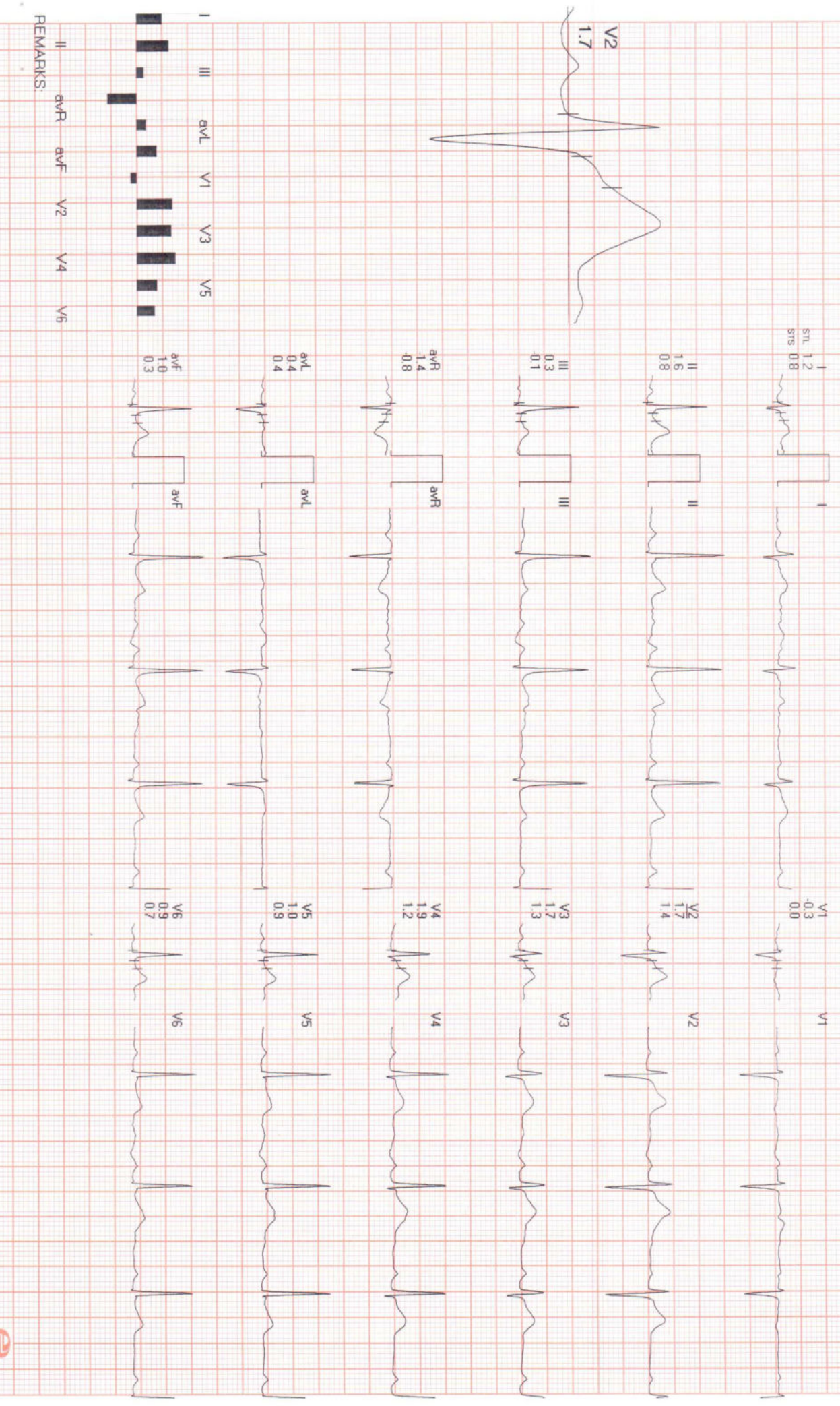


1340 (2308422073) / PRAIVEEN PENDLI / 32 Yrs / M / 170 Cms / 69 Kg / HR : 71

Date: 25 / 03 / 2023 12:33:16 PM METS: 1.0/ 71 bpm 38% 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 Kmph, 0.0%  
25 mm/Sec 1.0 Cm/mV



REMARKS:



**SUBURBAN DIAGNOSTICS KANDIVALI EAST**

**BRUCE : Stage 1 ( 02:00 )**



1340 (2308422073) / PRAVEEN PENDLI / 32 Yrs / M / 170 Cms / 69 Kg / HR : 97

Date: 25 / 03 / 2023 12:33:16 PM METS: 3.5 / 97 bpm 52% of THR BP: 110/80 mmHg Raw ECG/ BLOC On/ Noich On/ HF 0.05 Hz/LF 35 Hz

4X 80 ms Post J

ExTime: 02:00 2.7 Km/Ph. 10.0%  
25 mm/Sec 1.0 Cm/mV



REMARKS



**SUBURBAN DIAGNOSTICS KANDIVALI EAST**

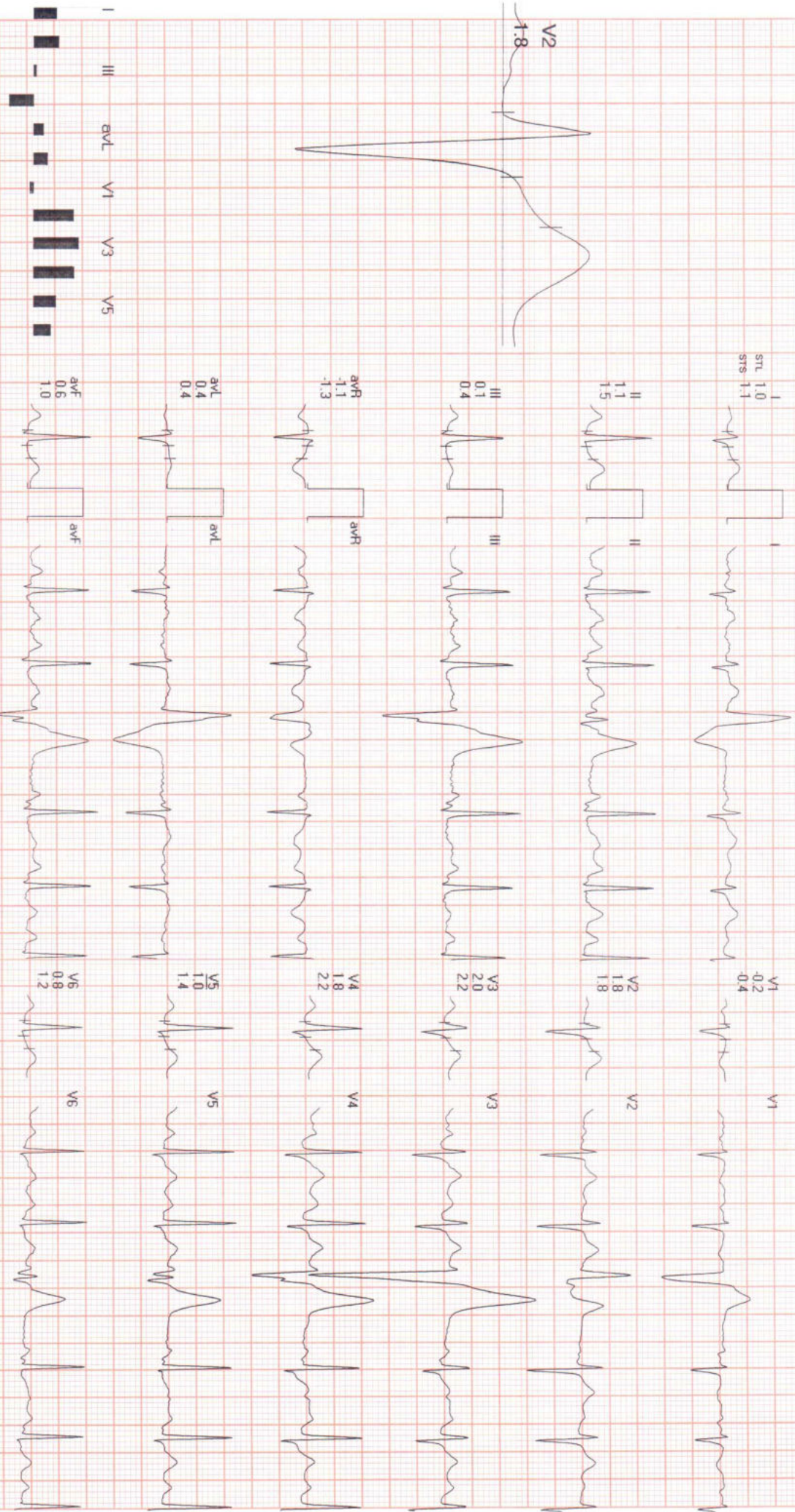
**BRUCE : Stage 2 ( 02:00 )**

1340 (2308422073) / PRAVEEN PENDLI / 32 Yrs / M / 170 Cms / 69 Kg / HR : 115

Date: 25 / 03 / 2023 12:33:16 PM METS: 6.3 / 115 bpm 61% of THR BP- 110/80 mmHg Raw ECG/ BLC On/ Noise On/ HF 0.05 Hz/LF 35 Hz

4X 80 ms Post J

EXTime: 04:00 4.0 Km/ph, 12.0%  
25 mm/Sec 1.0 Cm/mV



REMARKS:





**SUBURBAN DIAGNOSTICS KANDIVALI EAST**

**BRUCE : Stage 3 ( 02:00 )**

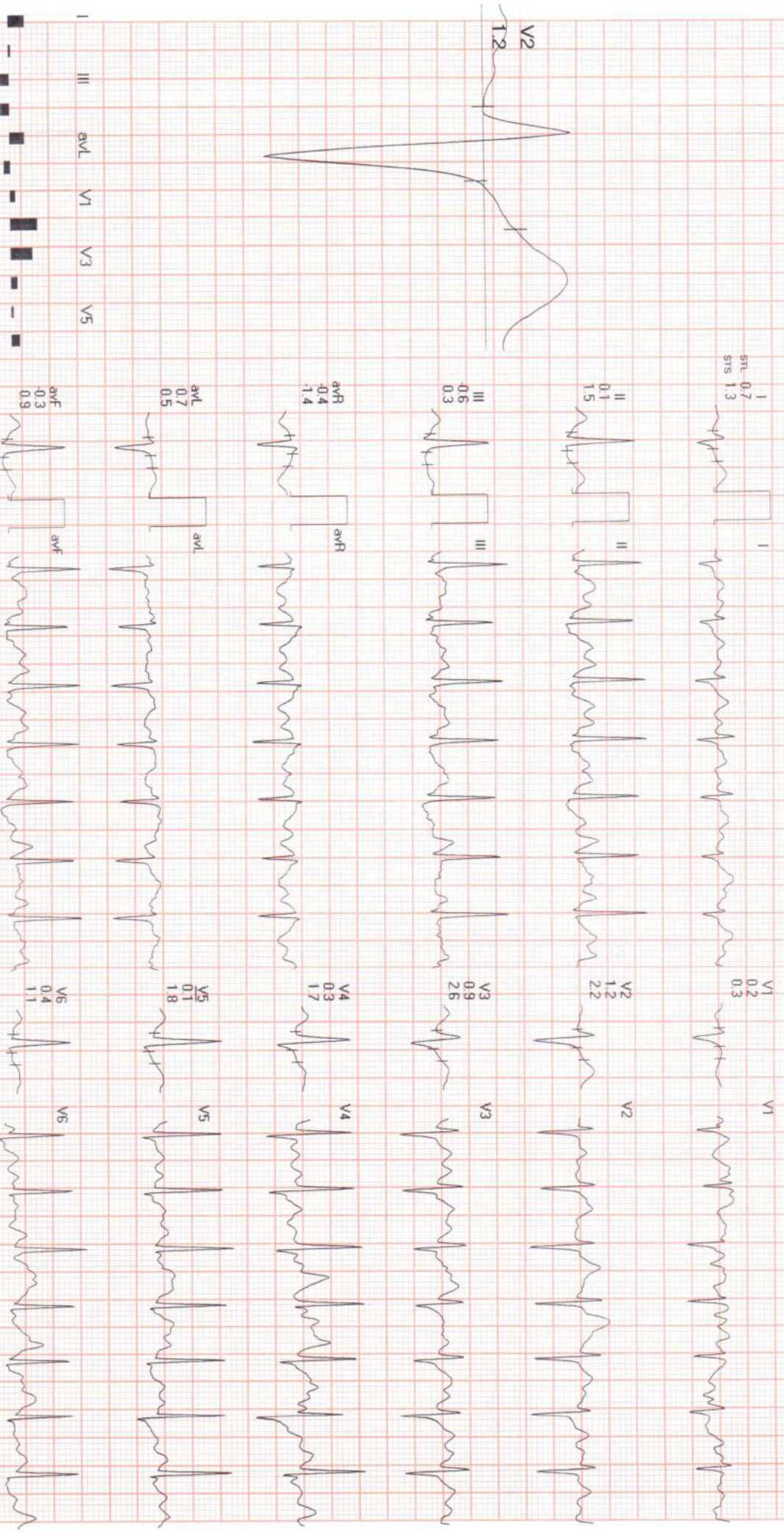


1340 (2308422073) / PRAVEEN PENDLI / 32 Yrs / M / 170 Cms / 69 Kg / HR : 143

Date: 25 / 03 / 2023 12:33:16 PM METS: 9.2 / 1.43 bpm 76% of THR BP: 140/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

4X 60 ms Post J

ExtTime: 06:00 5.5 Kmph. 14.0%  
25 mm/Sec. 1.0 Cm/mV



REMARKS:



**SUBURBAN DIAGNOSTICS KANDIVALI EAST**

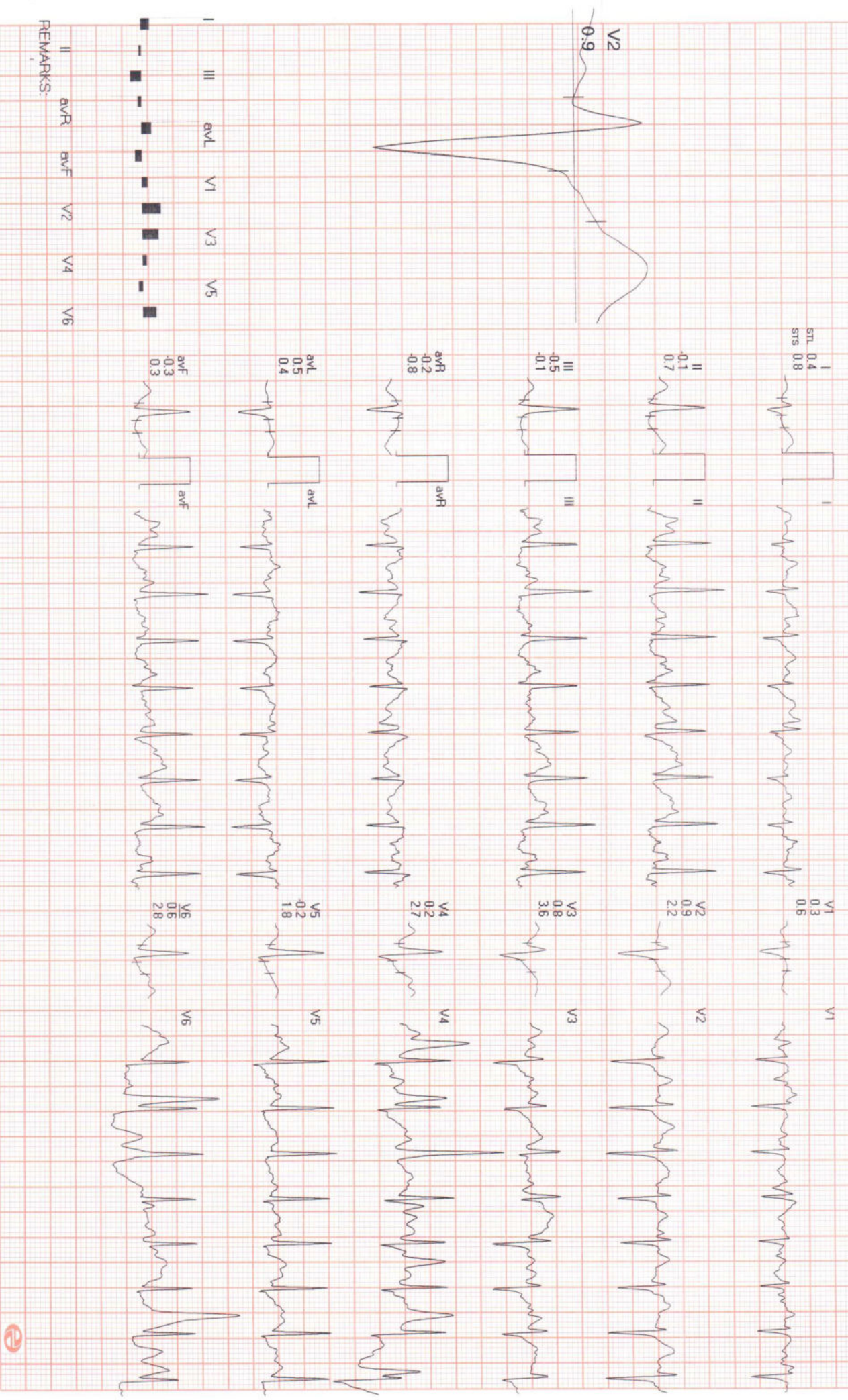


1340 (2308422073) / PRAVEEN PENDLI / 32 Yrs / M / 170 Cms / 69 Kg / HR : 163

Date: 25 / 03 / 2023 12:33:16 PM METS: 11.5 / 163 bpm 87% of THR BP: 140/80 mmHg Raw ECG/BLG On/ Notch On/ HF 0.05 Hz/LF 35 Hz

4X 60 ms Post J

ExTime: 07:12 6.8 KmPh: 16.0%  
25 mm/Sec 1.0 Cm/mV



REMARKS:



# SUBURBAN DIAGNOSTICS KANDIVALI EAST

Recovery : ( 01:00 )

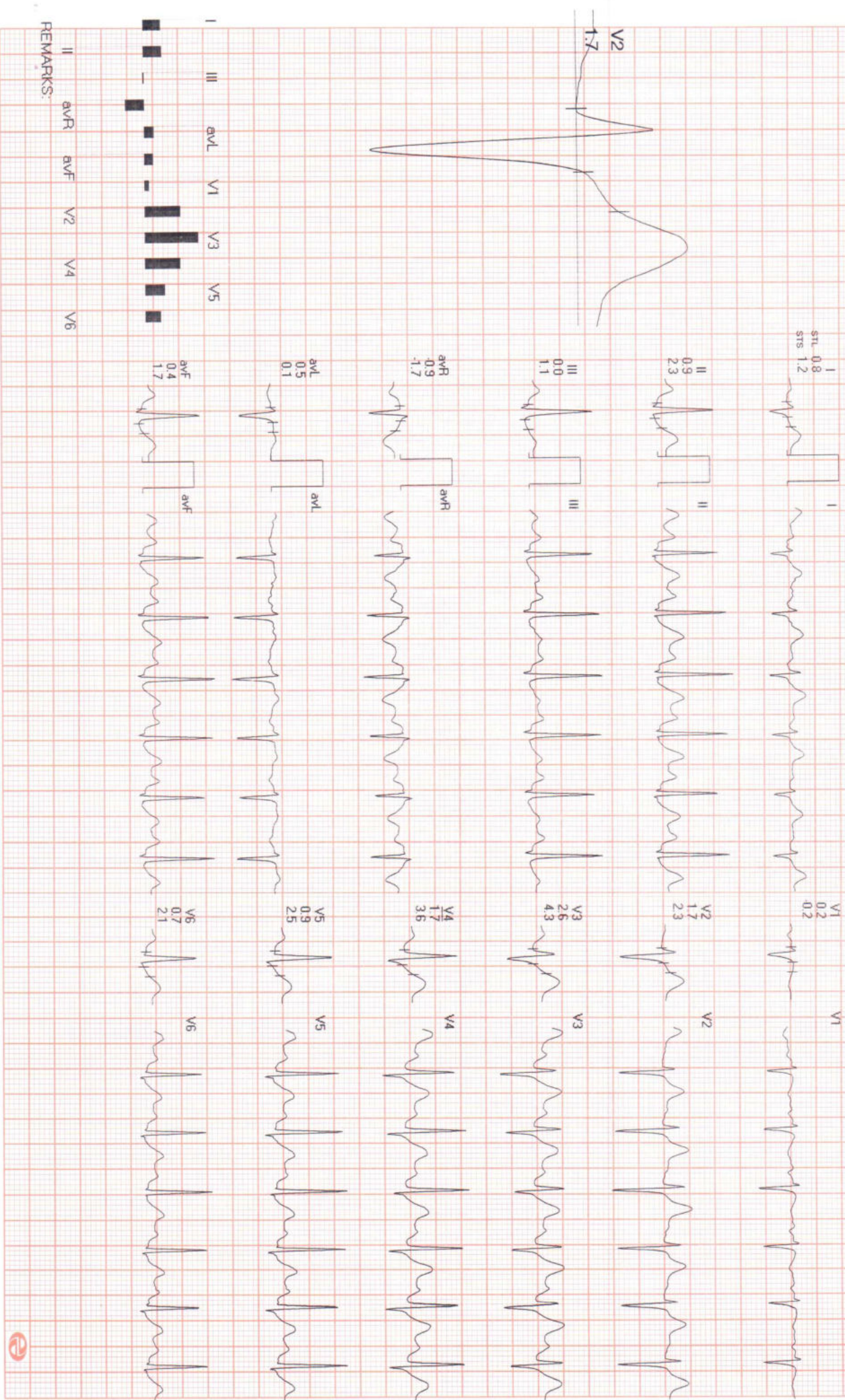


1340 (2308422073) / PRAVEEN PENDELI / 32 Yrs / M / 170 Cms / 69 Kg / HR : 132

Date: 25 / 03 / 2023 12:33:16 PM METS: 4.2 / 132 bpm 70% of THR BP: 140/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 07:12 0.2 Kmph 0.0%  
25 mm/Sec. 1.0 Cm/mV

4X 60ms Post J



REMARKS:



# SUBURBAN DIAGNOSTICS KANDIVALI EAST



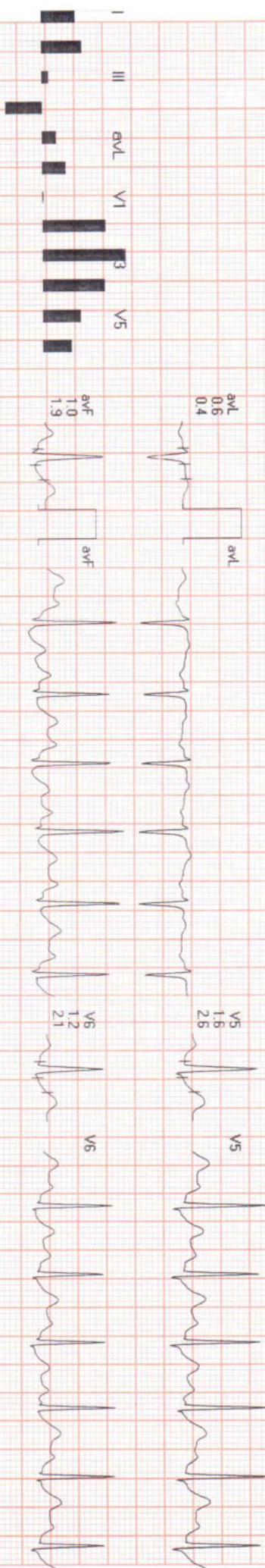
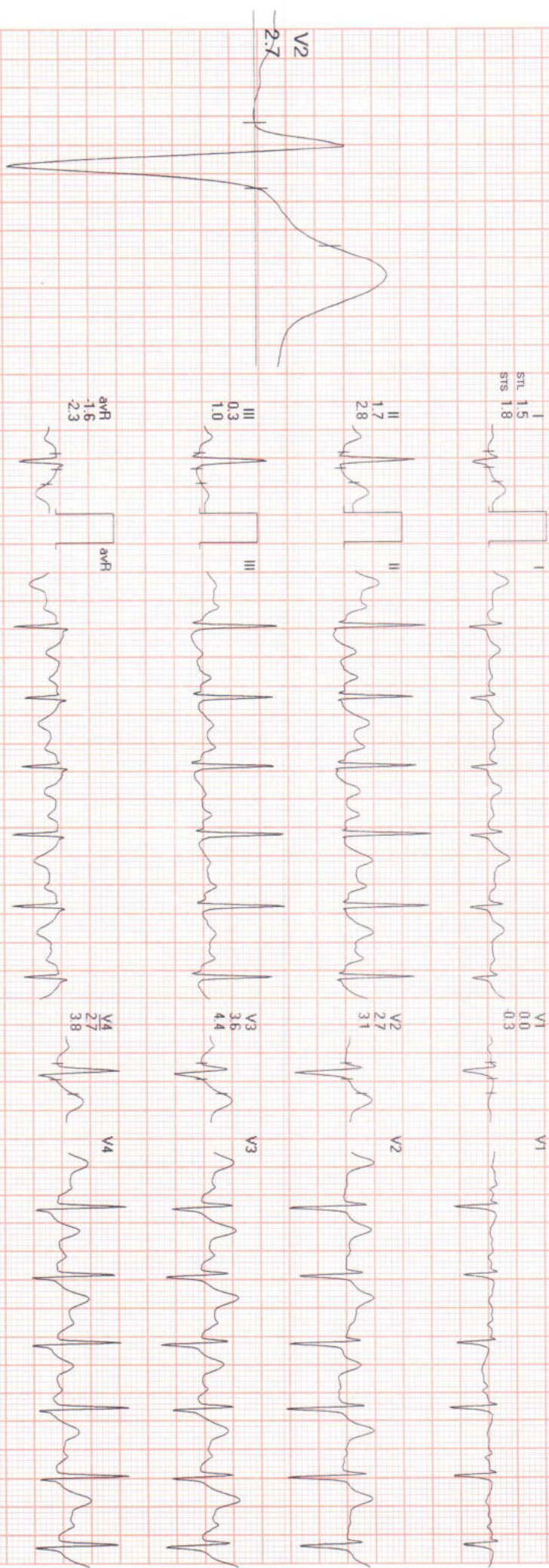
Recovery : ( 01:09 )

1340 (2308422073) / PRAVEEN PENDLI / 32 Yrs / M / 170 Cms / 69 Kg / HR 126

Date: 25 / 03 / 2023 12:33:16 PM METS: 1.0 / 126 bpm 67% of THR BP: 140/80 mmHg Raw ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

4X 80 ms Post J

EXTime: 07:12 0.0 KmPh. 0.0%  
25 mm/Sec 1.0 Cm/mV



REMARKS:





CID : 2308422073  
Name : MR.PRAVEEN PENDLI  
Age / Gender : 30 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 25-Mar-2023 / 10:15  
Reported : 25-Mar-2023 / 16:01

Use a QR Code Scanner  
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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>RBC PARAMETERS</u></b>			
Haemoglobin	14.9	13.0-17.0 g/dL	Spectrophotometric
RBC	4.97	4.5-5.5 mil/cmm	Elect. Impedance
PCV	45.5	40-50 %	Measured
MCV	92	80-100 fl	Calculated
MCH	30.0	27-32 pg	Calculated
MCHC	32.8	31.5-34.5 g/dL	Calculated
RDW	14.1	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	5410	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	36.4	20-40 %	
Absolute Lymphocytes	1969.2	1000-3000 /cmm	Calculated
Monocytes	9.3	2-10 %	
Absolute Monocytes	503.1	200-1000 /cmm	Calculated
Neutrophils	47.2	40-80 %	
Absolute Neutrophils	2553.5	2000-7000 /cmm	Calculated
Eosinophils	6.2	1-6 %	
Absolute Eosinophils	335.4	20-500 /cmm	Calculated
Basophils	0.9	0.1-2 %	
Absolute Basophils	48.7	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<b><u>PLATELET PARAMETERS</u></b>			
Platelet Count	267000	150000-400000 /cmm	Elect. Impedance
MPV	8.8	6-11 fl	Calculated
PDW	13.7	11-18 %	Calculated

**RBC MORPHOLOGY**





CID : 2308422073  
Name : MR.PRAVEEN PENDLI  
Age / Gender : 30 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 25-Mar-2023 / 10:15  
Reported : 25-Mar-2023 / 15:55

Use a QR Code Scanner  
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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	83.5	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	95.1	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.77	0.3-1.2 mg/dl	Vanadate oxidation
BILIRUBIN (DIRECT), Serum	0.23	0-0.3 mg/dl	Vanadate oxidation
BILIRUBIN (INDIRECT), Serum	0.54	<1.2 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.2	5.7-8.2 g/dL	Biuret
ALBUMIN, Serum	4.4	3.2-4.8 g/dL	BCG
GLOBULIN, Serum	2.8	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.6	1 - 2	Calculated
SGOT (AST), Serum	30.2	<34 U/L	Modified IFCC
SGPT (ALT), Serum	39.9	10-49 U/L	Modified IFCC
GAMMA GT, Serum	19.9	<73 U/L	Modified IFCC
ALKALINE PHOSPHATASE, Serum	54.6	46-116 U/L	Modified IFCC
BLOOD UREA, Serum	18.3	19.29-49.28 mg/dl	Calculated
BUN, Serum	8.5	9.0-23.0 mg/dl	Urease with GLDH
CREATININE, Serum	0.89	0.60-1.10 mg/dl	Enzymatic



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eGFR, Serum	107	>60 ml/min/1.73sqm	Calculated
Note: eGFR estimation is calculated using MDRD (Modification of diet in renal disease study group) equation			
URIC ACID, Serum	5.8	3.7-9.2 mg/dl	Uricase/ Peroxidase
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	
Urine Sugar (PP)	Absent	Absent	
Urine Ketones (PP)	Absent	Absent	

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

*Bmhasakar*

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







CID : 2308422073  
Name : MR.PRAVEEN PENDLI  
Age / Gender : 30 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 25-Mar-2023 / 10:15  
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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**GLYCOSYLATED HEMOGLOBIN (HbA1c)**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	4.8	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	91.1	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 SDRL, Vidyavihar Lab

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



*Namrata Raul*

**Dr.NAMRATA RAUL**  
**M.D (Biochem)**  
**Biochemist**



CID : 2308422073  
Name : MR.PRAVEEN PENDLI  
Age / Gender : 30 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 25-Mar-2023 / 10:15  
Reported : 25-Mar-2023 / 22:41

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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	6.5	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.005	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	30	-	-
<b><u>CHEMICAL EXAMINATION</u></b>			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Leukocytes(Pus cells)/hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	0-1		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	10-15	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 SDRL, Vidyavihar Lab



*Anupa*

**Dr. ANUPA DIXIT**  
**M.D.(PATH)**  
**Consultant Pathologist & Lab Director**



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Name : MR.PRAVEEN PENDLI  
Age / Gender : 30 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

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Age / Gender : 30 Years / Male  
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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**BLOOD GROUPING & Rh TYPING**

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	A
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

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*M Jain*

**Dr.MILLU JAIN**  
**M.D.(PATH)**  
**Pathologist**





CID : 2308422073  
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Age / Gender : 30 Years / Male  
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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**LIPID PROFILE**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
CHOLESTEROL, Serum	179.2	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	162.6	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	Enzymatic colorimetric
HDL CHOLESTEROL, Serum	30.9	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Elimination/ Catalase
NON HDL CHOLESTEROL, Serum	148.3	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	115.7	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	32.6	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	5.8	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	3.7	0-3.5 Ratio	Calculated

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



*Namrata*

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**M.D (Biochem)**  
**Biochemist**



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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**THYROID FUNCTION TESTS**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	5.1	3.5-6.5 pmol/L	CLIA
Free T4, Serum	13.5	11.5-22.7 pmol/L	CLIA
sensitiveTSH, Serum	<b>5.954</b>	0.55-4.78 microIU/ml	CLIA



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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)

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

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



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