

SEABIRD MEDICARE CENTRE POWAI

Patient Details Date: 27-Nov-23 Time: 12:54:47
Name: SUDEEPA MAHANT ID: 2306
Age: 37-y **Sex:** F **Height:** 155 cms. **Weight:** 94 Kg.
Clinical History: HTN & DM

Medications: ON TREATMENT

Test Details

Protocol: Bruce **Pr.MHR:** 183 bpm **THR:** 155 (85 % of Pr.MHR) bpm
Total Exec. Time: 6 m 7 s **Max. HR:** 166 (91% of Pr.MHR)bpm **Max. Mets:** 10.20
Max. BP: 160 / 100 mmHg **Max. BP x HR:** 26660 mmHg/min **Min. BP x HR:** 7200 mmHg/min
Test Termination Criteria: THR ACHIEVED

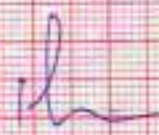
Protocol Details

Stage Name	Stage Time (min : sec)	Mets	Speed (mph)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
Supine	1 : 24	1.0	0	0	90	130 / 90	-0.85 V6	0.71 I
Standing	0 : 1	1.0	0	0	90	130 / 90	-0.21 II	0.71 I
Hyperventilation	0 : 11	1.0	0	0	107	130 / 90	-0.21 II	0.71 I
1	3 : 0	4.6	1.7	10	137	140 / 90	-2.76 V6	4.60 V6
2	3 : 0	7.0	2.5	12	165	150 / 100	-4.46 V6	5.86 V6
Peak Ex	0 : 7	10.2	3.4	14	165	150 / 100	-1.06 II	1.42 V6
Recovery(1)	2 : 0	1.8	1	0	109	160 / 100	-1.70 II	3.18 V6
Recovery(2)	2 : 0	1.0	0	0	105	160 / 90	-0.64 II	1.66 I
Recovery(3)	2 : 0	1.0	0	0	114	130 / 80	-0.85 II	0.71 I
Recovery(4)	0 : 3	1.0	0	0	114	130 / 80	-0.42 I	0.35 I

Interpretation

The patient exercised according to the Bruce protocol for 6 m 7 s achieving a work level of Max. METS : 10.20. Resting heart rate initially 90 bpm, rose to a max. heart rate of 166 (91% of Pr.MHR) bpm. Resting blood Pressure 130 / 90 mmHg, rose to a maximum blood pressure of 160 / 100 mmHg. No significant ST-T changes. Negative for induced Ischaemic heart diseases

Sudeepa


Dr. Mrinalini Singh
 Consultant Physician
 MBBS, DNB, MRCP (UK), EDIC
 Reg. No. 2019/02/0392
 Doctor

Ref. Doctor: APOLLO

(Summary Report edited by user)

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SUDEEPA MAHANT (37 F)

ID: 2306

Date: 21-Nov-23

Exer Time: 6 m 7 s

Stage Time: 2 m 0 s

HR: 114 bpm

Protocol: Bruce

Stage Recovery(3)

Speed: 0 mph

Grade: 0%

(THR: 155 bpm)

B.P: 130 / 80

ST Level (mm)



ST Level (mm)

ST Slope (mV/s)

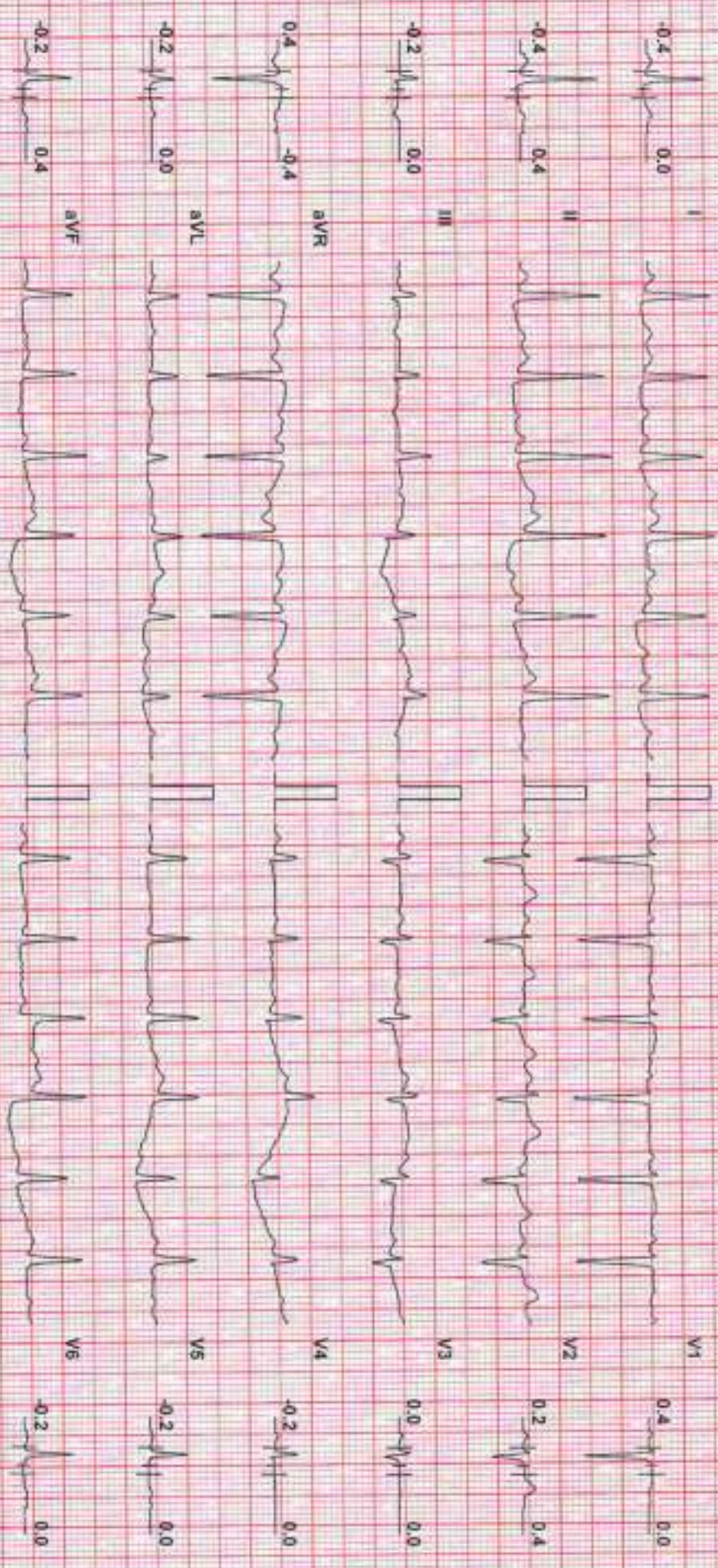


Chart Speed: 25 mm/sec
 Scale: Standard V & I

Paper: 35 Hz

Main: Fil: ON

Amp: 10 mm

Imp + R: 40 ms

J: R: 60 ms

Post J: J + 40 ms

SUDEEPA MAHANT (37 F)

ID: 2306

Date: 27-Nov-23

Exec Time: 0m-0s

Stage Time: 1m-24s

HR: 90 bpm

Protocol: Bruce

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 155 bpm)

BP: 130 / 90

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

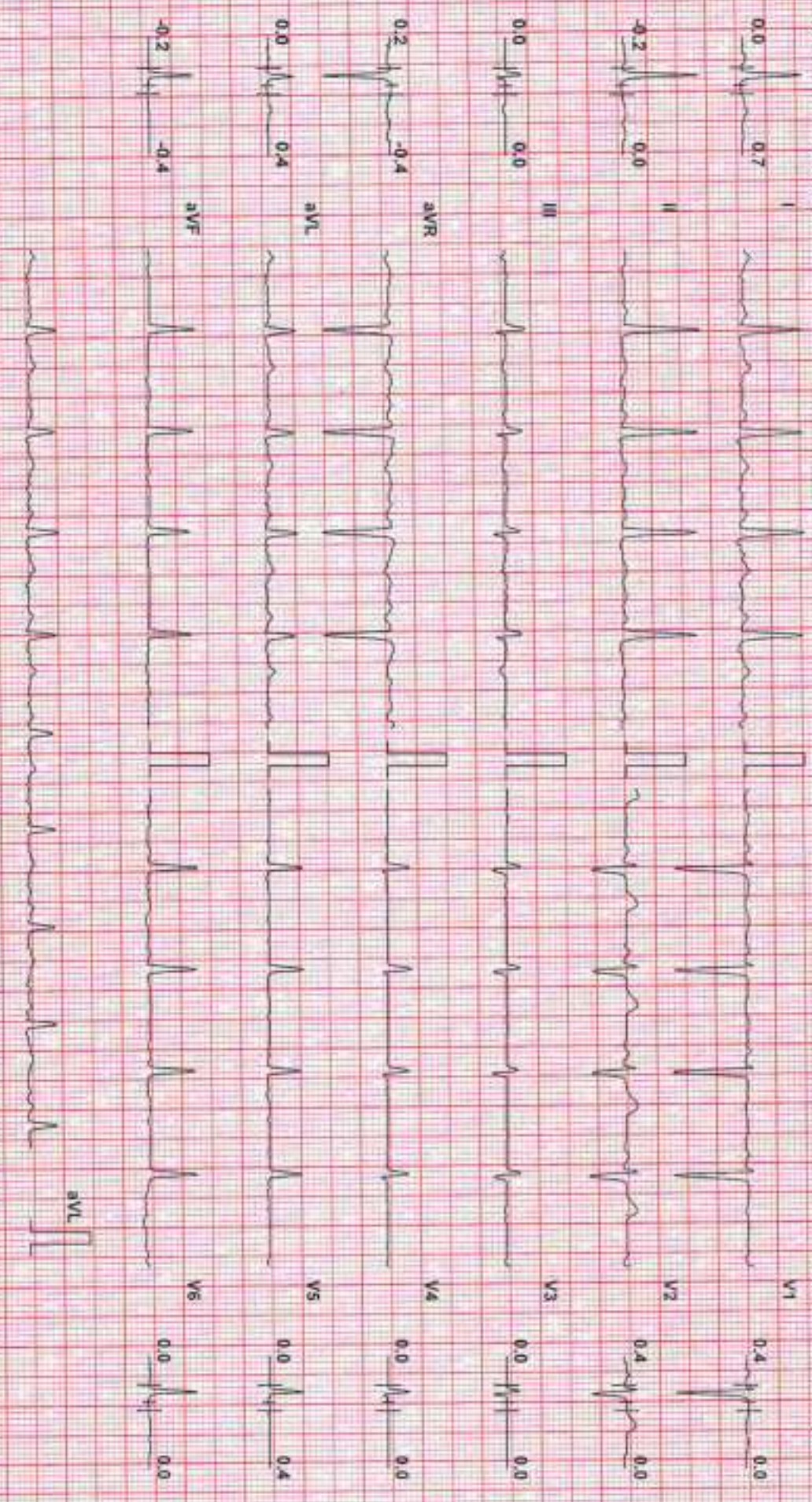


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

30 + R = 60 ms

J = R = 60 ms

Post J = J + 60 ms

Scale: Standard V x 1

SUDEEPA MAHANT (37 F)

ID: 2506

Date: 21-Nov-23

Exec Time: 0 m 0 s

Stage Time: 0 m 1 s

HR: 90 bpm

Protocol: Bruce

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 155 bpm)

BP: 130 / 60

ST Level (mm)

ST Slope (mV/s)

ST Level (mm)

ST Slope (mV/s)

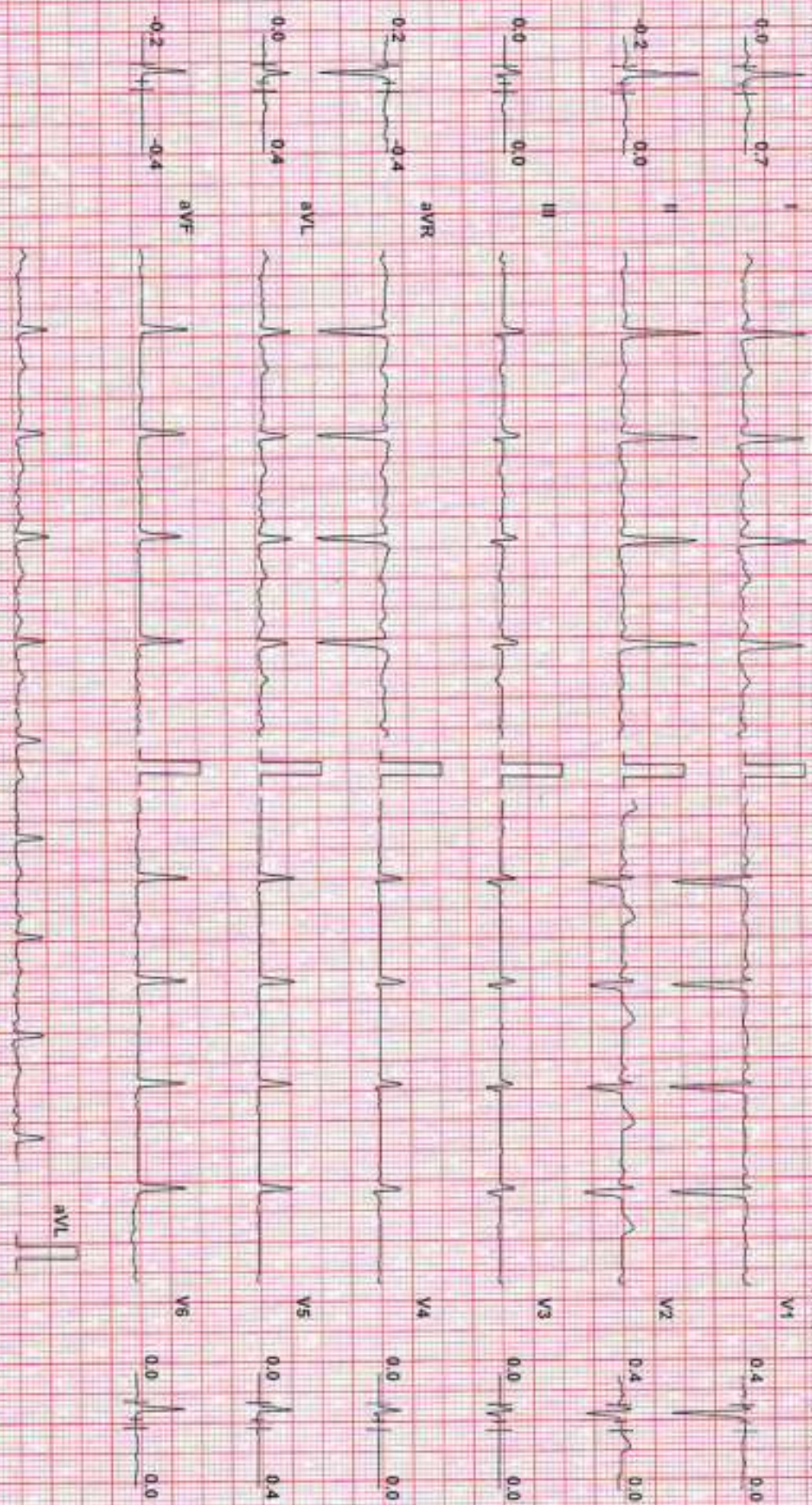


Chart Speed: 25 mm/sec
 Scale: Standard V4 x 1

Filter: 35 Hz

Means: Filtr ON

Amp: 10 mm

Imp = R = 60 ms

J = R = 60 ms

Post J = J = 60 ms

SUDEEPA MAHANT (37 F)

ID: 2306

Date: 27-Nov-23

Exec Time: 0 m 0 s

Stage Time: 0 m 11 s HR: 107 bpm

Protocol: Bruce

Stage: Hyperventilation

Speed: 0 mph

Grade: 0 %

(THR: 156 bpm)

B.P.: 130 / 90

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

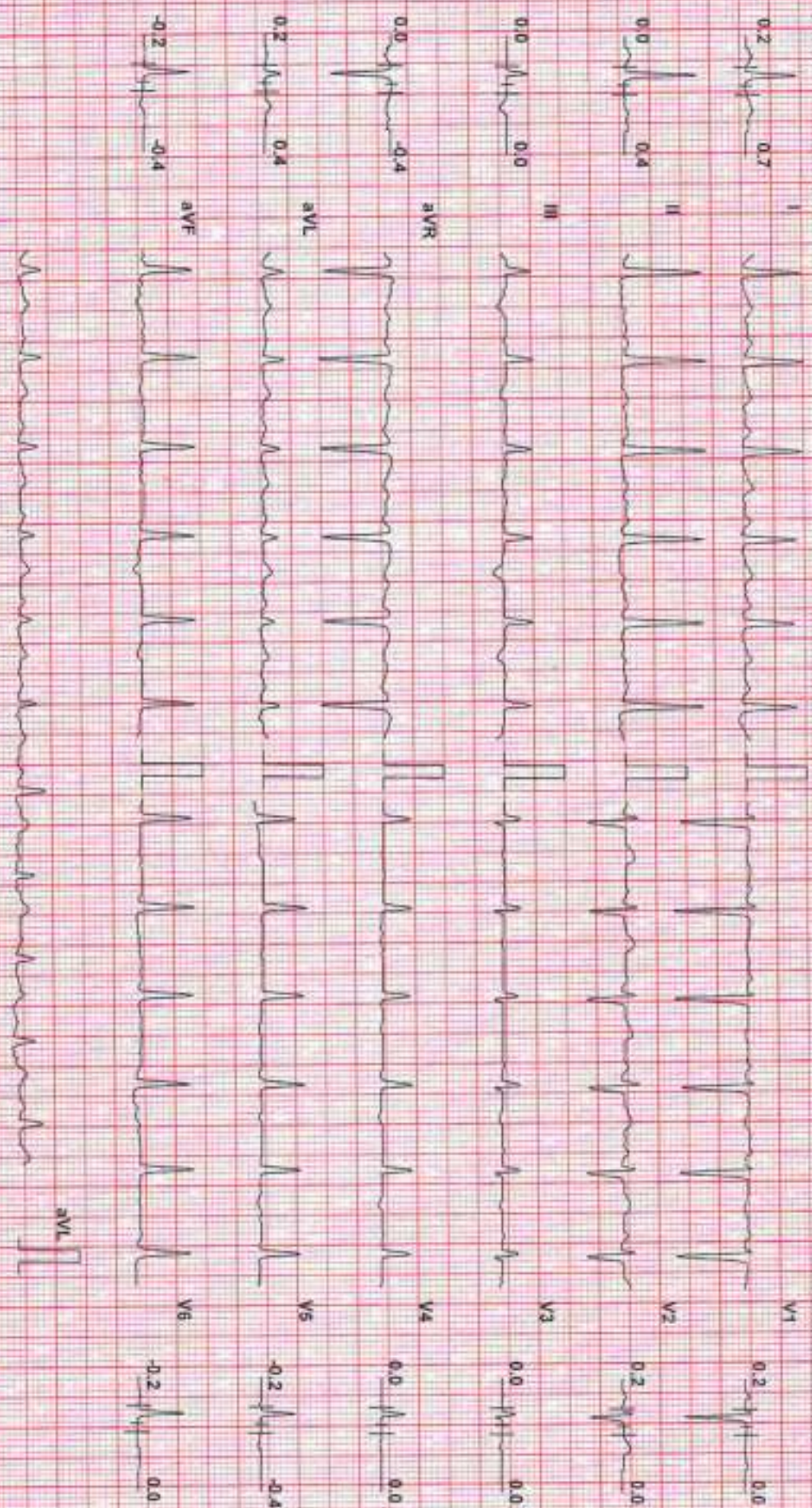


Chart Speed: 25 mm/sec
Stimul: Sinoatrial V 47

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

Imp + R - 50 ms

J = R + 80 ms

Post J = J + 80 ms

SUDEEPA MAHANT (37 F)

ID: 2306

Date: 27-Nov-23

Exec Time: 3 m 0 s

Stage Time: 3 m 0 s

HR: 137 bpm

Protocol: Bruce

Stage: 1

Speed: 1.7 mph

Grade: 10%

(THR: 156 bpm)

BP: 140 / 90

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

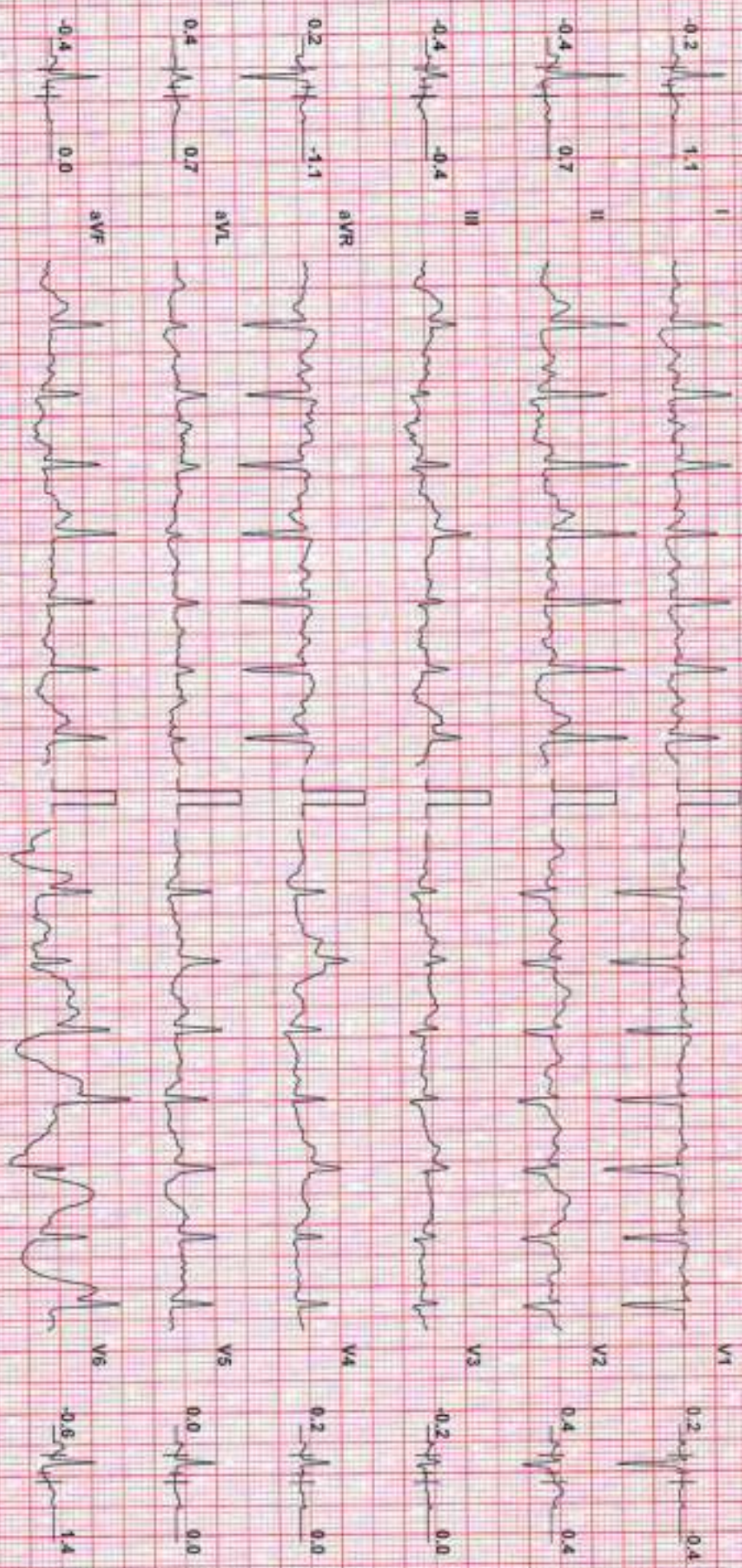


Chart Speed: 25 mm/sec
Scale: Standard V x 1

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

300 = P - 60 ms

J = P + 60 ms

Red = J + 60 ms

SUDEEPA MAHANT (37 F)

ID: 2308

Date: 21-Nov-23 Exec Time: 6 m 0 s Stage Time: 3 m 0 s HR: 165 bpm

Protocol: Bruce

Stage: 2

Speed: 2.5 mph Grade: 12% (THR: 165 bpm) B.P: 150 / 100

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

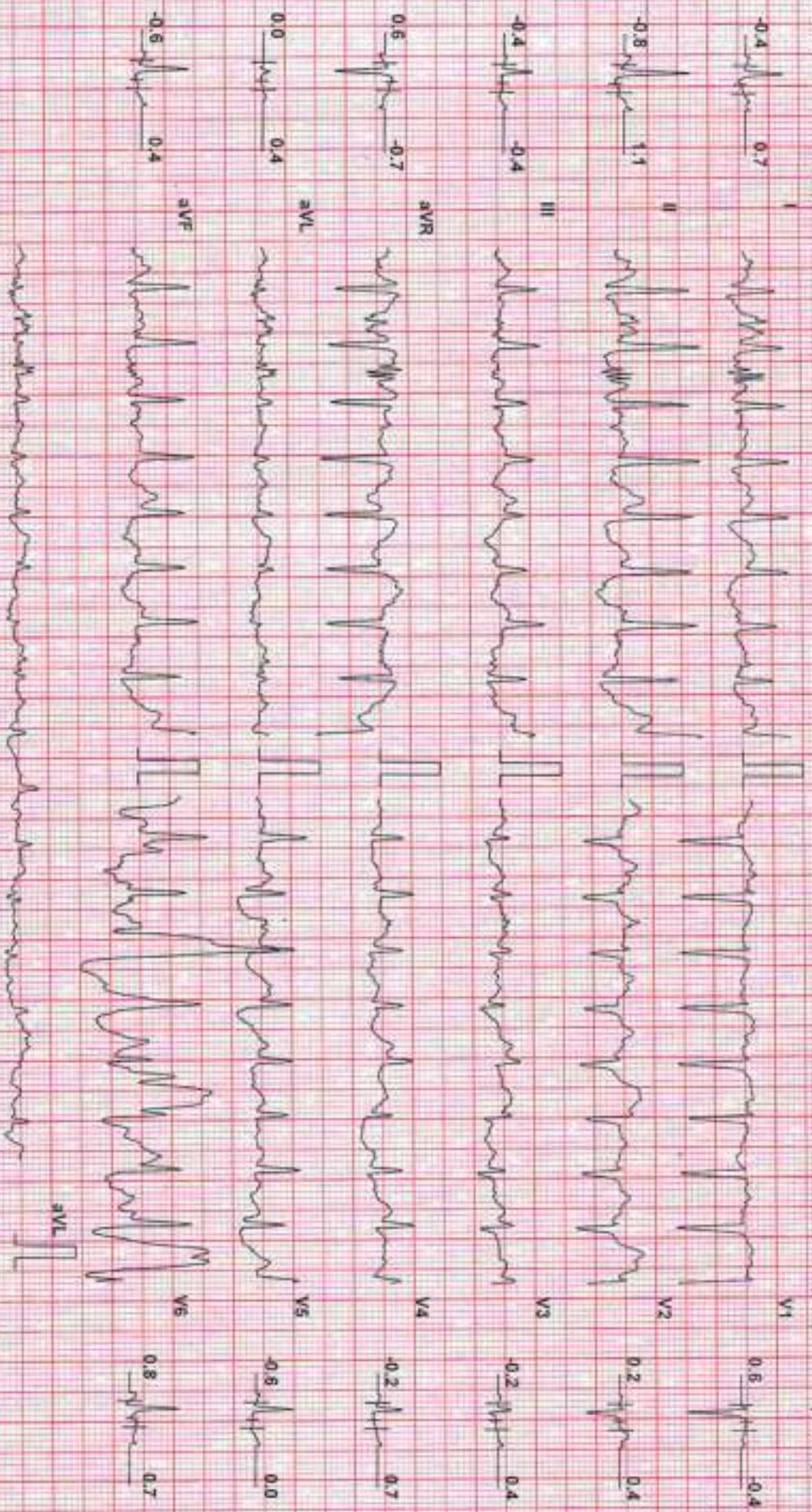


Chart Speed: 25 mm/sec
Scriber Speed: V 4.7

Filter: 35 Hz

Main: Fil: ON

Amp: 10 mm

100 = R - 50 ms

J = R + 50 ms

Post J = J + 50 ms

SUDEEPA MAHANT (37 F)

ID: 2306

Date: 21-Nov-23

Exec Time: 6m 7s

Stage Time: 0m 7s

HR: 166 bpm

Protocol: Bruce

Stage: Peak Ex

Speed: 3.4 mph

Grade: 14%

(THR: 155 bpm)

B.P: 150 / 100

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

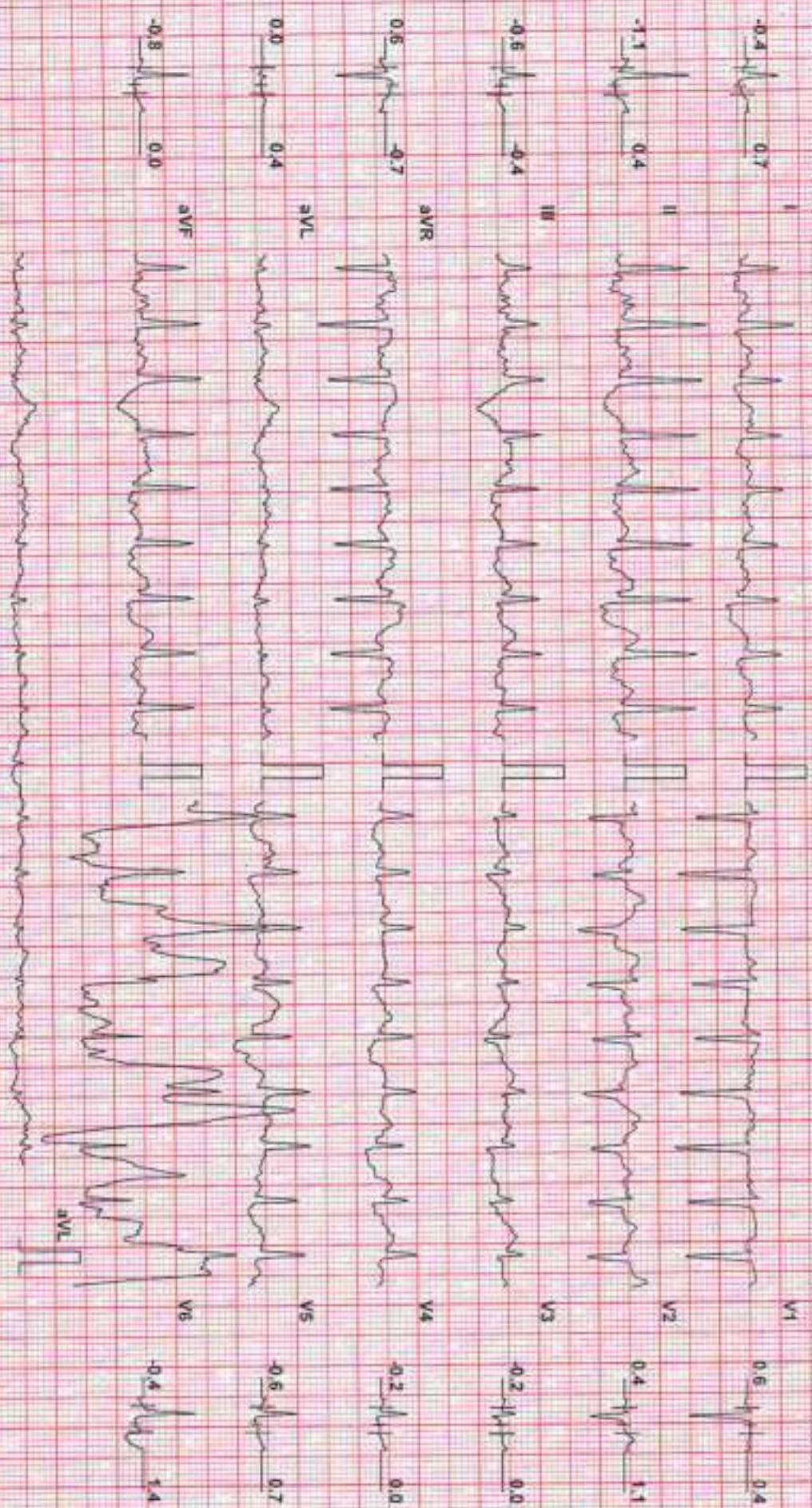


Chart Speed: 25 mm/sec
Zoom: Speed: V47

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

I = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

SUDEEPA MAHANT (37 F)

ID: 2306

Date: 27-Nov-23

Exec Time: 6m 7s

Stage Time: 1m 0s

HR: 130 bpm

Protocol: Bruce

Stage: Recovery(1)

Speed: 0 mph

Grade: 0 %

(THR: 155 bpm)

B.P: 160 / 100

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

0.2 1.1 I

0.6 0.0 V1

0.2 1.8 II

1.1 1.1 V2

0.0 0.4 III

0.4 0.7 V3

0.2 1.8 aVR

0.4 1.1 V4

0.2 0.4 aVL

0.2 1.1 V5

0.0 1.1 aVF

0.6 0.4 V6

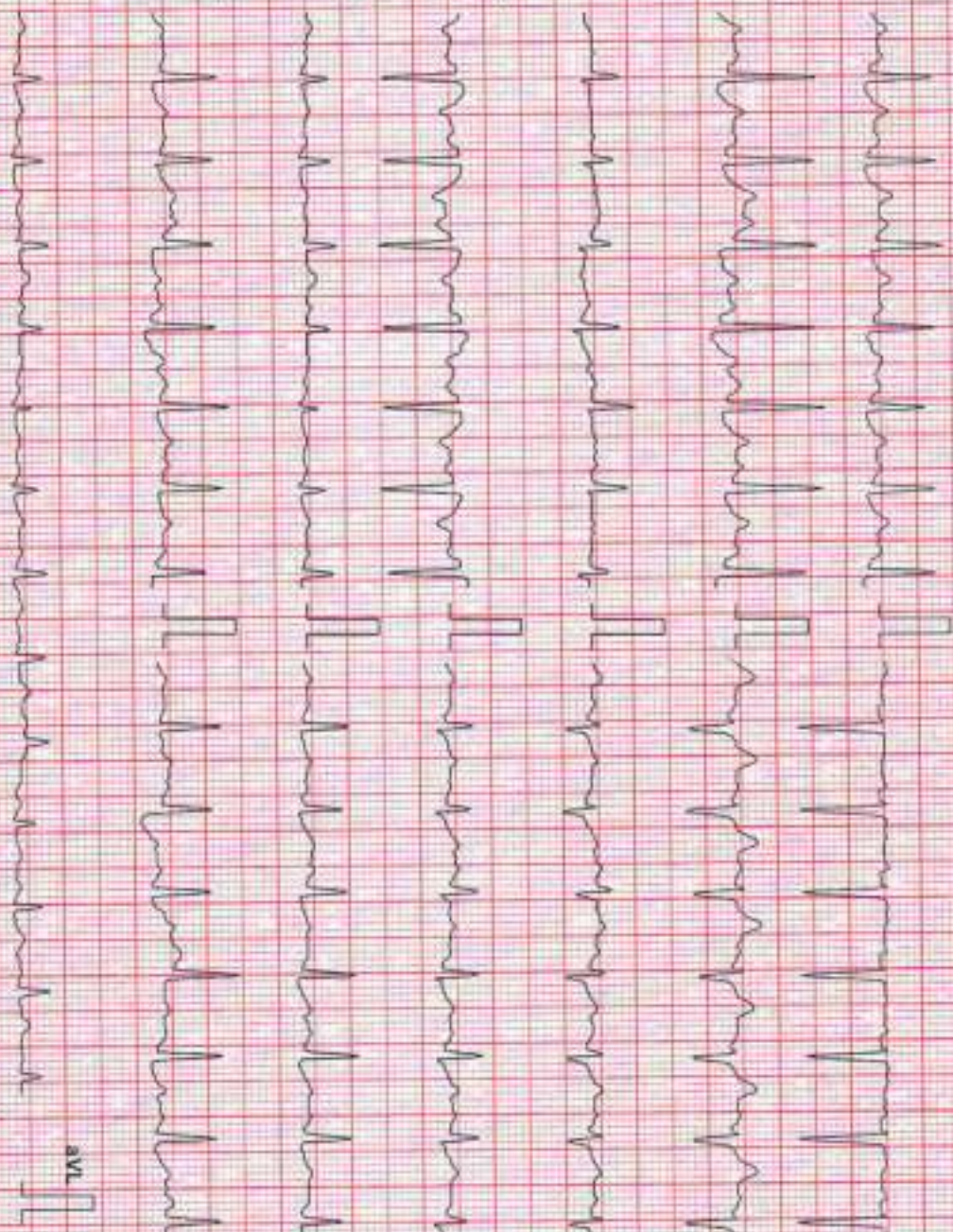


Chart Speed: 25 mm/sec
Scale: Standard V x 7

Filter: 35 Hz

Main: Fil ON

Amp: 10 mm

60 = R - 60 ms

J = R + 40 ms

Pap J = J + 60 ms

SUDEEPA MAHANT (37 F)

ID: 2506

Date: 27-Nov-23

Exec Time: 6m7s

Stage Time: 2m0s

HR: 109 bpm

Protocol: Bruce

Stage Recovery(%)

Speed: 0 mph

Grade: 0%

(THR: 155 bpm)

B.P: 160 / 100

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

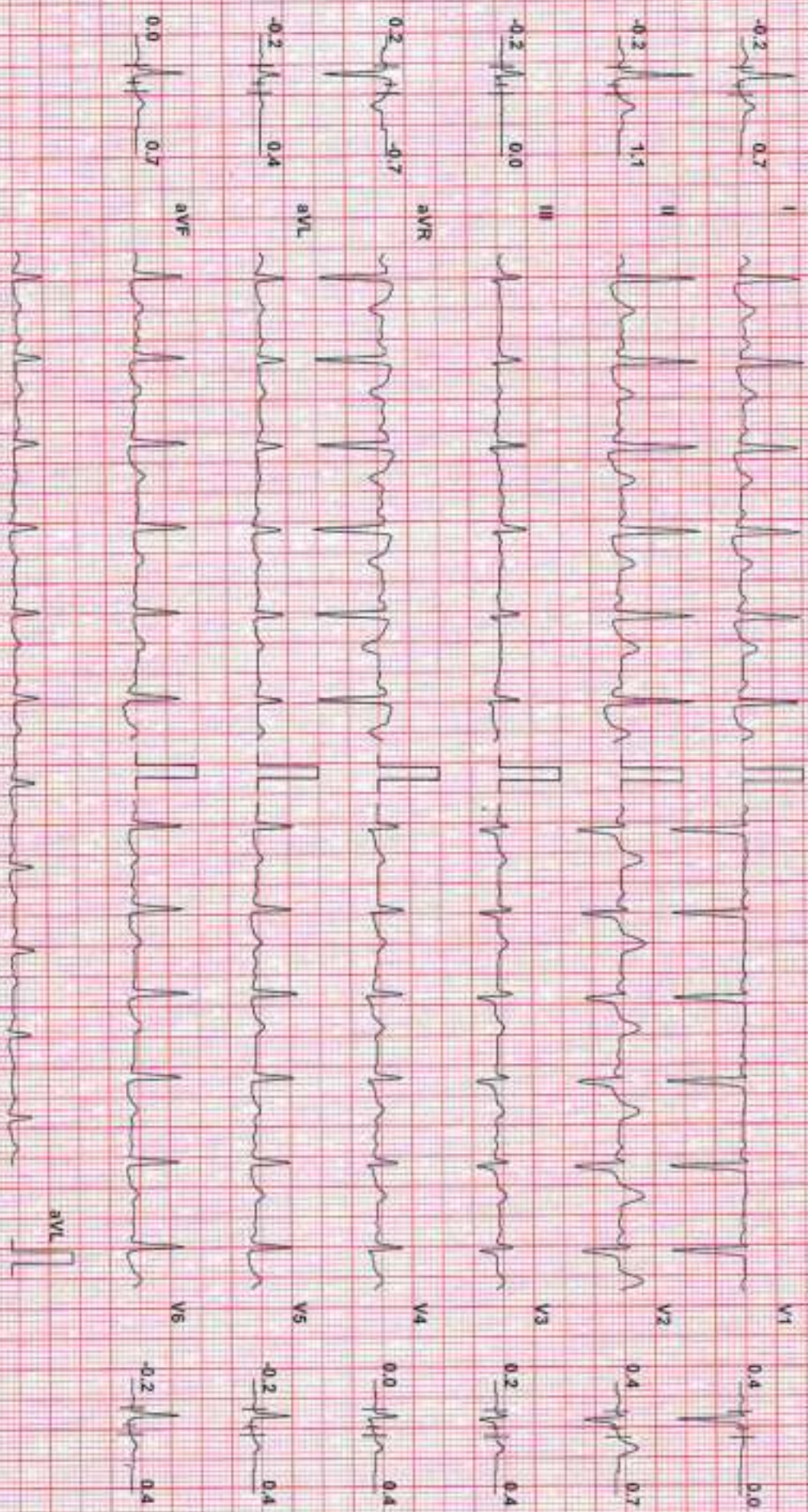


Chart Speed: 25 mm/sec
Scale: Standard V1-V6

Filter: 35 Hz

Mains Filter ON

Amp: 10 mm

60 + R - 60 ms

J + R + 60 ms

Peak J - L + 60 ms

SUDEEPA MAHANT (37 F)

ID: 2306

Date: 27-Nov-23

Exec Time: 6 m 7 s

Stage Time: 2 m 0 s

HR: 105 bpm

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 155 bpm)

BP: 160 / 80

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

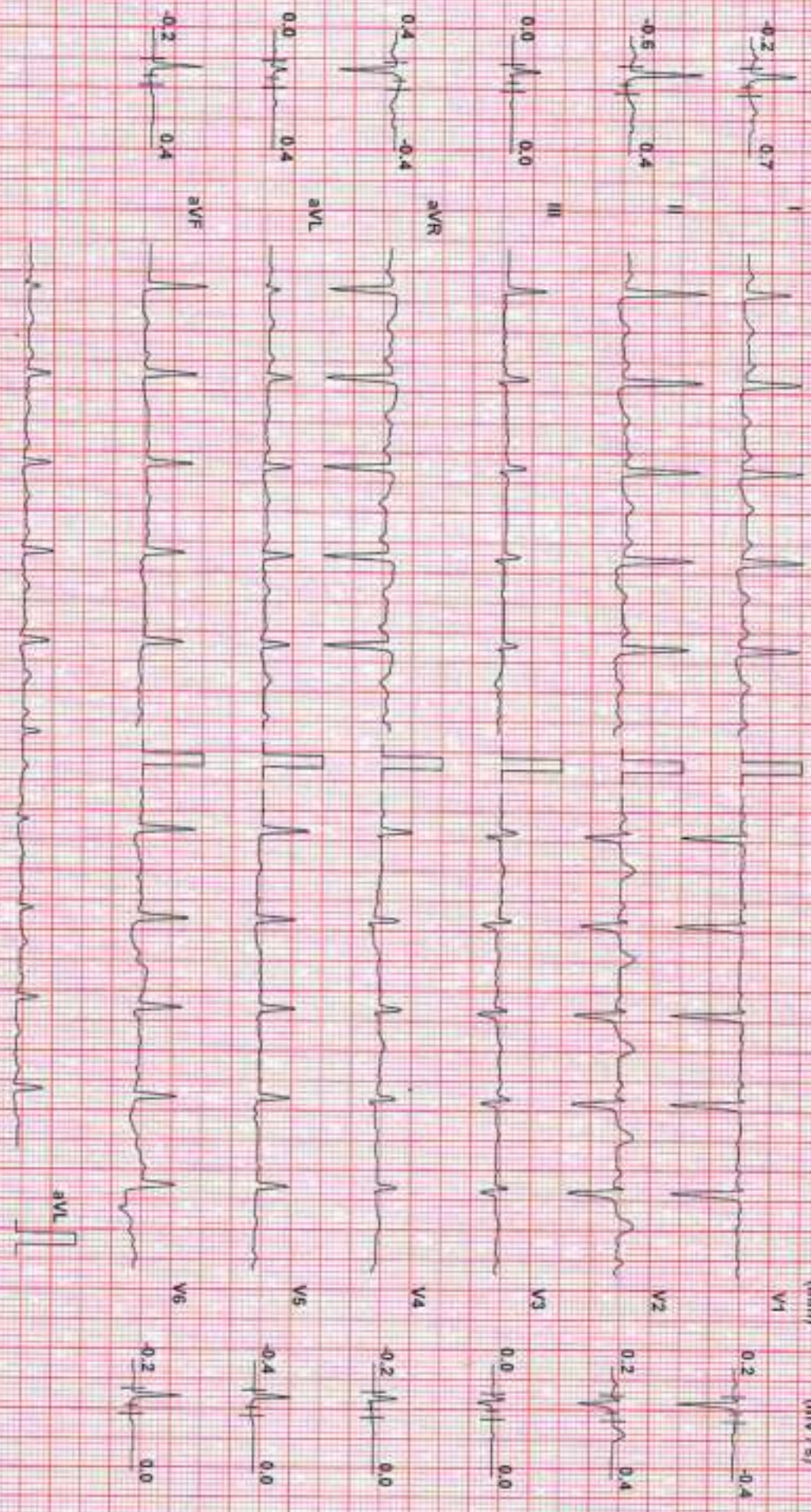


Chart Speed: 25 mm/sec
 Console Speed: V4.7

Filter: 35 Hz

Mains Filtr: ON

Ampl: 10 mm

no = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Annexure-2

Self-Health Declaration
(Please ✓ Mark Where Applicable)



1 PERSONAL DETAILS:

Name: Sudeepa First Name Middle Name Surname MAHANT
Address: 104, Building 4 Rambaug Powai
City: Mumbai Pin: 400076
Birth Place: Guahar Birth Date: 11-10-1986 Religion: Hindu
(dd/mm/yyyy)
Post applied for: _____ Marital Status: Married / Unmarried Gender: M / F

2 PREVIOUS EMPLOYMENT: Yes / No If yes specify

Name	Nature of work	Duration
i)		
ii)		
iii)		

3 NAME OF FAMILY DOCTOR:

Address:

Contact Details:

4 PERSONAL HABITS:

- i) Smoking
- ii) Tobacco chewing
- iii) Alcohol
- iv) Any other

5 MEDICAL HISTORY:

i) **ANY DISABILITY:** Yes / No If yes specify with disability %

ii) **PERSONAL HISTORY:**

Are you in good health and capable of full work
Have you ever suffered from job related disease or injury?
Have you ever been discharged or rejected on medical grounds?

Yes	No
<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>

Types of Previous Occupation (Pl. describe in brief about company, nature of work, duration in years)

iii) Have you ever suffered from any of the following (Answer Yes or No, if yes, give details)

Y	N		Y	N	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hypertension	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Hepatitis-B
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Diabetes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Cancer
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Heart disease	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Stroke
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Kidney diseases	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Bronchitis
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Tuberculosis	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Any allergy
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chronic lung disease (e.g. Pleurisy Pneumonia etc.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Any chronic ear or hearing problem (e.g. sinusitis, rhinitis otitis etc.)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Epilepsy, Fits, Fainting or Dizziness	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Mental disorder of any kind
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Any major operation or injury	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Any other illness

Details of the above if "Yes")

(For female candidates only)

Are you pregnant at present? Y N

Date of L.M.P. 12-11-2023

iv) Immunization: Yes No

Tetanus Toxoid	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Hepatitis B	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Others	<input type="checkbox"/>	<input checked="" type="checkbox"/>

6 FAMILY HISTORY:

Has anyone of your parents suffered from any of the following: Yes / No
(if yes, Please ✓ Mark Where Applicable)

	Father	Mother
Hypertension	<input type="checkbox"/>	<input type="checkbox"/>
Heart Disease	<input type="checkbox"/>	<input type="checkbox"/>
Cancer	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Tuberculosis	<input type="checkbox"/>	<input type="checkbox"/>
Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>
Any other Disease	<input type="checkbox"/>	<input type="checkbox"/>

	IF LIVING		IF DEAD	
	AGE	HEALTH (Good, Bad, Fair)	AGE AT DEATH	CAUSE OF DEATH
Father			63	Multiple Organ Failure
Mother	60	Fair		
Spouse	36	Fair		
Children-1	9	Good		
Children -2				

7 I declare that the above statements are true and complete to the best of my knowledge and belief. In case this information is found to be false by the company, then the company reserves the right to terminate my services without giving any notice. I agree that the results of this medical examination in general terms may be revealed to the company if required. I also fully understand that in case I am declared medically unfit due to any reason, I shall not be entitled for the employment in the company. However, the decision taken by recruitment committee about my medical fitness will be final and binding to me.

Date:

25/11/2023

(Signature of Candidate)

Sudeep

Annexure-3

Pre-Employment Medical Assessment

(All details given below will be filled by examine physician & treated as confidential)
(Please ✓ Mark Where Applicable)

1 Personal Habits: NO

- i) Smoking
- ii) Tobacco chewing
- iii) Alcohol
- iv) Any other

2 Medical History:

i) **Any Disability:** Yes / No If yes specify with disability %

ii) **Personal History:**

C-Section - 2014; On medication for Hypertension and Diabetes since 8 yrs.

iii) **Known case of or past history of**

Acetaminophen DM & HTN.

iv) **Immunization:**

Yes No

Tetanus Toxoid

<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Hepatitis B

Others

covid (2 doses)

v) **Family History:**

Has anyone of parents suffered from

<input checked="" type="checkbox"/>	Hypertension
<input checked="" type="checkbox"/>	Heart Disease
<input checked="" type="checkbox"/>	Cancer

<input checked="" type="checkbox"/>	Diabetes
<input checked="" type="checkbox"/>	Tuberculosis
<input checked="" type="checkbox"/>	Epilepsy
<input checked="" type="checkbox"/>	Any other Disease

3 Physical Examination:

- i) Build: Poor / Average / Strong Skin: N
- ii) Throat: N Tonsils: N Thyroid: N Lymph nodes: N
- iii) Teeth & Gums: N Tongue: N
- iv) Height 155 cms Weight 94 kg BMI 39.1
- v) Identification marks: _____

1 Vision (To be checked by eye specialist):

General Eye examination: _____

		Rt	Lt	Colour Vision (Pls ✓ Mark Applicable)
Visual Acuity	Distance	<u>6/6</u>	<u>6/6</u>	Normal Colour vision <input checked="" type="checkbox"/>
	Near	<u>N5</u>	<u>N5</u>	Total colour deficiency <input type="checkbox"/>
Corrected Vision	Distance	-	-	Partial Colour Deficiency <input type="checkbox"/>
	Near	-	-	
Power of lens	Spherical	-	-	If partial - pl. mention _____
	Cylindrical	-	-	
	Axis	-	-	

	Yes	No
Squint	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Nystagmus	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Night Blindness	<input type="checkbox"/>	<input type="checkbox"/>
Any other eye disease	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If yes pl. give details _____

Lata Bajpai
Dr LATA M. BAJPAI
 MBBS, DOMS M.S. PRCS
 Reg No. 211 11113126

Signature & Seal of Ophthalmologist

5 Hearing:

External Examination: Rt (N) Lt (N)
 Rinne's Test: - Weber's Test: -
 Conversational Hearing/ Whispering: -
 Audiometry (Comment): -
 dB Right Ear - dB Left Ear -

6 Cardio-vascular System:

Pulse-Rate 90 /min Blood Pressure 130 80 mm hg
 Sys Dia
 Heart Sounds (N) Murmur Present Absent Details if present -
 Character: Regular / Irregular Regular

7 Respiratory System:

Shape of Chest: (N) Breath Sounds (N)

8 Abdomen:

Liver: (N) Spleen: (N) Any Abdominal Lump: -

9 Genito Urinary System:

Hernia: - Hydrocele/Varicocele: -

10 Venereal Disease:

11 Special Conditions: Flat feet - Varicose Veins -

12 Nervous System:

Pupillary Reaction: (N) Planter Reflex: (N)
 Knee Jerk Reflex: (N) Romberg Sign: +ve -ve

13 Investigations:

i) Urine: Sp. Gr. 1.010 Reaction 5.0 Albumin Absent Sugar Absent
 Microscopic: Pus cells - 2-3 / hpf Cyrt - 1-2 / hpf
 Blood: Haemoglobin 12.2 g% HbA1c 8.74 % Bl. Gr. B +ve -ve

ii) Chest X-ray: Normal

iii) E.C.G: WNL

iv) USG Whole Abdomen: Grade I fatty changes in liver, Tiny uterine fibroid, Rest NAD.

v) 2D Echo/TMT: Negative for induced ischemia at given workload.

vi) PFT: FVC - FEV1 - FEV1/FVC % - PEFR -

vii) Any other Investigations / clinical finding: -

14 COMMENTS AND RECOMMENDATIONS:

(Pls \checkmark Mark Applicable)

<input checked="" type="checkbox"/> Fit	<input type="checkbox"/> Unfit
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Remarks:

Details of Examining Physician:

Name: _____

Registration No.: _____

Address: _____

Contact No.: _____



Dr. Mrinalini Singh
Consultant Physician
MBBS, DNB, MRCP (UK), EDIC
Reg. No. 2019/02/0392

Signature with Seal of Examining Physician

For office use only:

Date of receipt of original documents: _____ PEM No.: _____

MDMS No: _____

Medically

<input checked="" type="checkbox"/> Fit	<input type="checkbox"/> Temp. Unfit	<input type="checkbox"/> Unfit
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Special Remarks: _____



Sea Bird
Sea Bird Medicare Centre

Report ID : **SMM2511153136** Reg. : **25-Nov-2023**
Patient Name : **Ms. SUDEEPA MAHANT** Report Date : **27-Nov-2023**
Rank : - Company Name : **M/S.APOLLO CREW MANAGEMENT INDIA**
Ref By : **DR.PARAG ARVIND PRADHAN** Age/Sex : **37 Year / Female**

CHEST X RAY REPORT

X-Ray No : 4631

Investigation : Chest PA View.

Bony thoracic cage is normal.

Cardiac silhouette appears normal in size and configuration.

Both lungs shows equal translucency and normal vasculature.

Both Hemidiaphragm visualised normal.

No evidence of any active parenchymal lesion seen.

Impression :

Normal Chest X-Ray.


Dr. Jacob
Mathew MD

Proudly... Caring For You

HO- Sea Bird Medicare Centre (ISO 9001:2015): A-101-102, Heritage Plaza, Teli Cross Lane, Andheri East (Nr. Station), Mumbai- 69. Tel: 022- 46032704
Fossil: 022-25701053 / 25704157

Kochi: 0484- 3322022 / 4032022

Website: www.seabirdhf.com | Email: seabird@seabirdhf.com

Name: Mrs SUDEEPA
MAHANT
Date : 28/11/2023

Age : 37Y
Ref Dr : SELF

Sex : FEMALE

USG ABDOMEN AND PELVIS

LIVER: Liver appears normal in size 14.5 cm and bright in echotexture. 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 is normal. 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: Both kidneys are normal in shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

Right kidney measures 10.5 x 3.7 cm. Left kidney measures 11.0 x 4.8 cm.

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 is normal in size and shows normal echotexture. Tiny posterior wall intramural fibroid seen measuring 10 x 8 mm.

Uterus measures 7.5 x 4.9 x 4.4 cm. Endometrial thickness is normal (7.7 mm).

Right ovary is normal measures cm. Left ovary is normal measures cm.

No free fluid or significant lymphadenopathy is seen.

IMPRESSION : Grade I fatty changes in liver.

Tiny uterine fibroid.

Rest no other significant abnormality detected.

Advice: Clinical co-relation and further evaluation.



DR. PRIYANKA NERULKAR

CONSULTANT RADIOLOGIST



भारत सरकार
GOVERNMENT OF INDIA



सुदीपा महान्त
Sudeepa Mahant

जन्म वर्ष / Year of Birth : 1986
महिला / Female



6586 8187 2988

आधार – आम आदमी का अधिकार

* Sudeepa



PID NO. : BKA0927

Name : SUDEEPA MAHANT

Sex / Age : Female / 37 Years

Ref By : APOLLO HEALTH AND LIFESTYLE
LIMITED

Reference :

Sample Collected At :

Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani
Gardens, Powai, Mumbai-400076

Processing Location: - Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani
Gardens, Powai, Mumbai-400076

Reg. Date

25-Nov-2023 / 2:17 pm

Coll Date

25-Nov-2023 / 2:22 pm

Report Date

26-Nov-2023 / 3:58 pm

REPORT

BLOOD GLUCOSE

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
Blood Glucose (Fasting), plasma (Plasma, Method- Hexokinase) Interpretation: NORMAL : 70 - 100 mg/dl Pre-Diabetic : 100 - 125 mg/dl Diabetic : >125 mg/dl (ON MORE THAN ONE OCCASION) Reference : American diabetes association guidelines 2022.	165.44	mg/dl	70.00 - 100.00 mg/dl
Urine Glucose (Fasting)	Absent		Absent
Urine Ketones (Fasting)	Absent		Absent

Test Done on Fully Automated Mipa CXL PRO PLUS Biochemistry Analyser.

———— End of Report ————



MC - 5321

Pritam Dhanawade

Pritam Dhanawade
Lab Technician



DR. Ritesh Kharche

DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist

CONDITIONS OF REPORTING

SEA BIRD MEDICARE CENTRE (DIVISION OF SEA BIRD MEDICARE PVT LTD)

1. Individual Laboratory Investigation should not be considered as conclusive and should be used along with other relevant clinical examination to achieve the final diagnosis. The reported results are for the information of the referring doctors only.
2. The test results relate only to the item/ items in our laboratory.
3. The values of a laboratory investigation are dependent on the quality of sample as well as the assay procedure used.
4. For test performed on specimens received from other locations (within and outside Mumbai), it is presumed that the specimen belongs to the patient named or identified, such verification having been carried out at the point of generation of the said specimen(s).
5. Electronic images in the report are created by electronic processing. Sea Bird Medicare Centre makes no expressed or implied warranties or representations with respects to it and takes no responsibility for the authenticity, quality and size of the image, affected possibly due to a computer virus or other contamination.
6. Sea Bird Medicare centre confirms that all tests have been carried out with reasonable care, clinical safety and technical integrity
 - A. However due to certain factors such as reagent inconsistency, machine breakdown etc. beyond its control which could affect the testing, it does not make any representation or give any warranty about the accuracy of the reported results.
 - B. The test results are to be used for help in diagnosing/treating medical disease & not for forensic applications. Hence these results cannot be used for medico-legal purpose
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022 25701053 / 9324924370 or
admin@seabirdhf.com

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PID NO. : BKA0927

Name : SUDEEPA MAHANT

Sex / Age : Female / 37 Years

Ref By : APOLLO HEALTH AND LIFESTYLE LIMITED

Reference :

Sample Collected At :

Sea Bird Medicare
105-107 Gateway Plaza, Central Avenue, Hiranandani Gardens, Powai, Mumbai-400076

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Reg. Date

25-Nov-2023 / 2:17 pm

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26-Nov-2023 / 3:57 pm

REPORT

Blood Group

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
BLOOD GROUP			
ABO Group	"B"		
RH (D)	Positive		

Method : Cell (Forward) grouping by Manual Slide Method.
Sample: Whole Blood (EDTA)

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

Pritam Dhanawade
Lab Technician



DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist

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REPORT

Complete Blood Count

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Hemoglobin	12.2	gm/dl	12.0 - 15
<u>RED BLOOD CELLS</u>			
R.B.C. Count	4.26	million / cumm	3.8- 4.8
PCV	37.5	%	35-48
MCV	87.9	fL	83 - 101
MCH	28.6	pg	27 - 32
MCHC	32.5	gm / dl	31.5 - 34.5
RDW (CV)	13.2	%	11.6- 14.0
Total W.B.C. Count	10930	/cu.mm.	4000-10000
<u>DIFFERENTIAL COUNT</u>			
Neutrophils	57	%	40 - 80
Lymphocytes	37	%	20 - 40
Eosinophils	03	%	1 - 6



MC - 5121

Molly R
Lab Technician



DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist

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REPORT

Complete Blood Count

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Monocytes	03	%	2 - 10
Basophils	00	%	0 - 1
Platelet Count	535000	/cumm	150000 - 410000

MORPHOLOGY

RBC Morphology Predominantly Normocytic and Normochromic.

WBC Morphology Normal Morphology.

Platelets on Smear Increased on smear

(EDTA Whole Blood - Tests done Automated Three part cell counter (RBC, WBC, Platelets count by impedance, Haemoglobin by colorimetric Cyanmeth free method. Rest are calculated parameters. Microscopy is manual by Pathologist.)

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



MC - 5321

Molly R
Lab Technician



DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist

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REPORT

Erythrocyte Sedimentation Rate (ESR)

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
E.S.R	65	mm at 1hr	0 - 20

Method: Westergren.
Sample: Whole Blood (EDTA)

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

Pritam Dhanawade
Lab Technician

DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist



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REPORT

Glycosylated Haemoglobin (HbA1c)

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
HbA1c	8.74	%	< 5.7
Non-diabetic : ≤ 5.7 % Pre-Diabetic : 5.7 - 6.4 % Diabetic : ≥ 6.5 % (EDTA Whole Blood, Turbidimetric)			
Mean Blood Glucose (MBG)	233.84	mg/dl	

Interpretation & Remark:

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
- HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association guideline 2022, for diagnosis of diabetes using a cut-off points of 6.5 %.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- To estimate the eAG from the HbA1C value, the following equation is used : $eAG(mg/dl) = 28.7 * A1c - 46.7$.
- Interference of Haemoglobinopathies in HbA1c estimation.
 - For Hb > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
 - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status.
 - Heterozygous state detected (D10/ Tosha G8 is corrected for HbS and HbC trait).
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control.
 - Excellent Control - 6 to 7 %
 - Fair to Good Control - 7 to 8 %
 - Unsatisfactory Control - 8 to 10 %
 - and Poor Control - More than 10 %

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



MC - 5321

Pritam Dhanawade

Pritam Dhanawade
Lab Technician

DR. Ritesh Kharche

DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist



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REPORT

LFT

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Sr. Alkaline Phosphatase (Serum, Kinetic Method by IFCC)	74.57	U/L	35 - 104

Test Done on Fully Automated Mspa CXL PRO PLUS Biochemistry Analyser.

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



MC - 5321

Pritam Dhanawade

Pritam Dhanawade
Lab Technician

DR. Ritesh Kharche

DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist



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REPORT

Lipid Profile

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
Total Cholesterol Serum, Method: CHOD-PAP	190.23	mg/dl	CHILD Desirable - Less than : 170 CHILD Borderline High : 170 - 199 CHILD High - More than : 200 ADULT Desirable - Less than : 200 ADULT Borderline High : 200 - 239 ADULT High - More than : 240
Triglycerides Serum, Method: GPO-PAP	93.63	mg/dl	NORMAL : <150 Borderline High : 150 - 199 High : 200 - 499 Very High : >500
HDL Cholesterol-Direct Serum, Method: Cholesterol-esterase-Direct	54.79	mg/dl	Desirable - Above : 60 Borderline Risk : 40 - 59 Undesirable - Below : 40
LDL Cholesterol Calculated	116.71	mg/dl	Desirable - Below : 130 Borderline Risk : 130 - 159 Undesirable - Above : 160
VLDL-Cholesterol Calculated	18.73	mg/dl	5 - 51
T.CHOL/HDLC Ratio Calculated	3.47		Acceptable for Male : < 5.00 Acceptable for Female : <4.50



MC - 5321

ALBA
Lab Technician



Ritesh Kharche
DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist

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REPORT

Lipid Profile

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
LDLC/HDLC Ratio Calculated	2.13		Acceptable for Males : < 3.60 Acceptable for Females : < 3.20

NOTE:

- 1) Biological Reference Interval is as per National Cholesterol Education Program (NCEP) guidelines.
- 2) Tests done on Fully Automated Mipa CXL PRO PLUS Biochemistry Analyser.

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



MC - 6321

Mah
Lab Technician



Ritesh Kharche
DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist

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PID NO. : BKA0927

Name : SUDEEPA MAHANT

Sex / Age : Female / 37 Years

Ref By : APOLLO HEALTH AND LIFESTYLE
LIMITED

Reference :

Sample Collected At :

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105-107 Gateway Plaza, Central Avenue, Hiranandani
Gardens, Powai, Mumbai-400076

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Reg. Date

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26-Nov-2023 / 3:58 pm

REPORT

Liver Function Tests

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
S.G.O.T. (Serum, Method-IFCC / UV without P5P)	24.13	U/L	0 - 32
S.G.P.T. (Serum, Method-IFCC / UV without P5P)	31.39	U/L	0 - 33.0
GGT (Serum, Method-IFCC Method)	35.67	U/L	5 - 36
Bilirubin (Total) (Serum, Method-Diazo- End point)	0.32	mg/dl	0.0 - 1.20
Bilirubin (Direct) (Serum, Method-Diazo-End point)	0.14	mg/dl	0.0 - 0.80
Bilirubin (Indirect) Calculated	0.18	mg/dl	0.0 - 0.90
Total Proteins (serum, Method-Biuret)	7.12	g/dl	6.6 - 8.7
Albumin (Serum, Method-Bromocresol Green)	4.13	g/dl	3.5 - 5.2
Globulin Calculated	2.99	g/dl	1.90 - 3.70
A/G ratio Calculated	1.38		

Test Done on Fully Automated Miska CXL PRO PLUS Biochemistry Analyser.

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

Pritam Dhanawade

Pritam Dhanawade
Lab Technician

DR. Ritesh Kharche

DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist



MC - 5321

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Powai: 022-35701053 / 35704157

Kochi: 0484- 2322022 / 4032022

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REPORT

RENAL PROFILE

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Blood Urea Serum, Method-Urease	17	mg/dl	16.6 - 48.5 mg/dl
Blood Urea Nitrogen Serum, Method-Urease	7.94	mg/dl	06 - 20 mg/dl
Creatinine Serum, Method-Kinetic Jaffes	0.6	mg/dL	0.5 - 0.90 mg/dl
Uric Acid Serum, Method: Uricase-POD	3.2	mg/dl	2.4 - 5.7

Test Done on Fully Automated Mspa CXL PRO PLUS Biochemistry Analyser.

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



MC - 5321

Pritam Dhanawade

Pritam Dhanawade
Lab Technician

DR. Ritesh Kharche

DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist



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PID NO. : BKA0927

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REPORT

THYROID FUNCTION TEST

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
TSH	13.27	µIU/ml	0.25-5 µIU/ml
T3	0.95	nmol/l	0.92-2.33 nmol/l
T4	88.71	nmol/l	60-120 nmol/l

The assay principle combines an enzyme immunoassay competition method with a final fluorescent detection (ELFA).

INTERPRETATION

TSH : A high TSH result often means an under active thyroid gland that is not responding adequately to the stimulation of TSH due to some type of acute or chronic thyroid dysfunction. A high TSH value can also occur when someone with a known thyroid disorder or who has had their thyroid gland removed is receiving too little thyroid hormone medication. A low TSH result can indicate an over active thyroid gland (hyperthyroidism) or excessive amounts of thyroid hormone medication in those who are being treated for an under active (or removed) thyroid gland. An abnormal TSH test result is usually followed by additional testing to investigate the cause of the increase or decrease.

T3: Triiodothyronine T3 contributes significantly to the maintenance of the euthyroid state, and the total T3 concentration has a role in screening for thyroid disease in conjunction with other tests. T3 alone cannot diagnose hypothyroidism, but it may be more sensitive than thyroxine (T4) for hyperthyroidism.

T4: Thyroxine accounts for at least 90% of circulating protein-bound iodine. While >99.9% of T4 is protein-bound, primarily to thyrokin-binding globulin (TBG), it is the free fraction that is biologically active. In most patients the total T4 level is a good indicator of thyroid status, however it can sometimes be inadequate, and diagnostic efficiency may be improved by use of a total T4 test in conjunction with other tests.

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

Pritam Dhanawade
Lab Technician

DR. RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist



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REPORT

URINE ANALYSIS

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
<u>PHYSICAL EXAMINATION</u>			
Colour	Pale Yellow		Pale Yellow
Quantity	30 ml	ml	20 - 50
Appearance	Clear		Clear
Reaction (pH)	5.0		5.0 - 9.0
Specific Gravity	1.010		1.000 - 1.030
<u>CHEMICAL EXAMINATION</u>			
Proteins	Absent		Absent
Sugar	Absent		Absent
Ketone Bodies	Absent		Absent
Bile Salts	Absent		Absent
Bile Pigment	Absent		Absent
Urobilinogen	Normal	mg/dl	Normal (0.1 - 1.0 mg/dl)

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URINE ANALYSIS

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Ocult Blood	Absent		Absent
<u>MICROSCOPIC EXAMINATION</u>			
Pus Cells	2 - 3 / hpf		2 - 3 / hpf
Red Blood Cells	Absent		Absent
Epithelial cells	1 - 2 / hpf		2 - 5 / hpf
Casts	Absent		Absent
Crystals	Absent		Absent
Other Findings	Absent		

METHOD:

Physical Examination : Visual Strip Method.

Chemical Examination : Bilirubin(Azo-coupling), Blood(Peroxidase), Glucose(Specific glucose-oxidase/oxidase reaction), Ketone(Rothera's test), Leukocytes(Reflectance Photometer(Leucocyte esterase)), Nitrite(Diazotization), pH(Double Indicator), Protein(Protein Error of Indicators), Specific Gravity(Refractometric method), Urobilinogen(Ehrlich).

Microscopy Examination : Automator/Manual Microscopy.

———— End of Report ————

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SUDEEPA MAHANT (37 F)

Chart Speed 25 mm/sec

ST Level (mm) ST Slope (mV/s)

ID 2308

Date: 27-Nov-23

Time: 12:54:12

BP: 130/90 mmHg

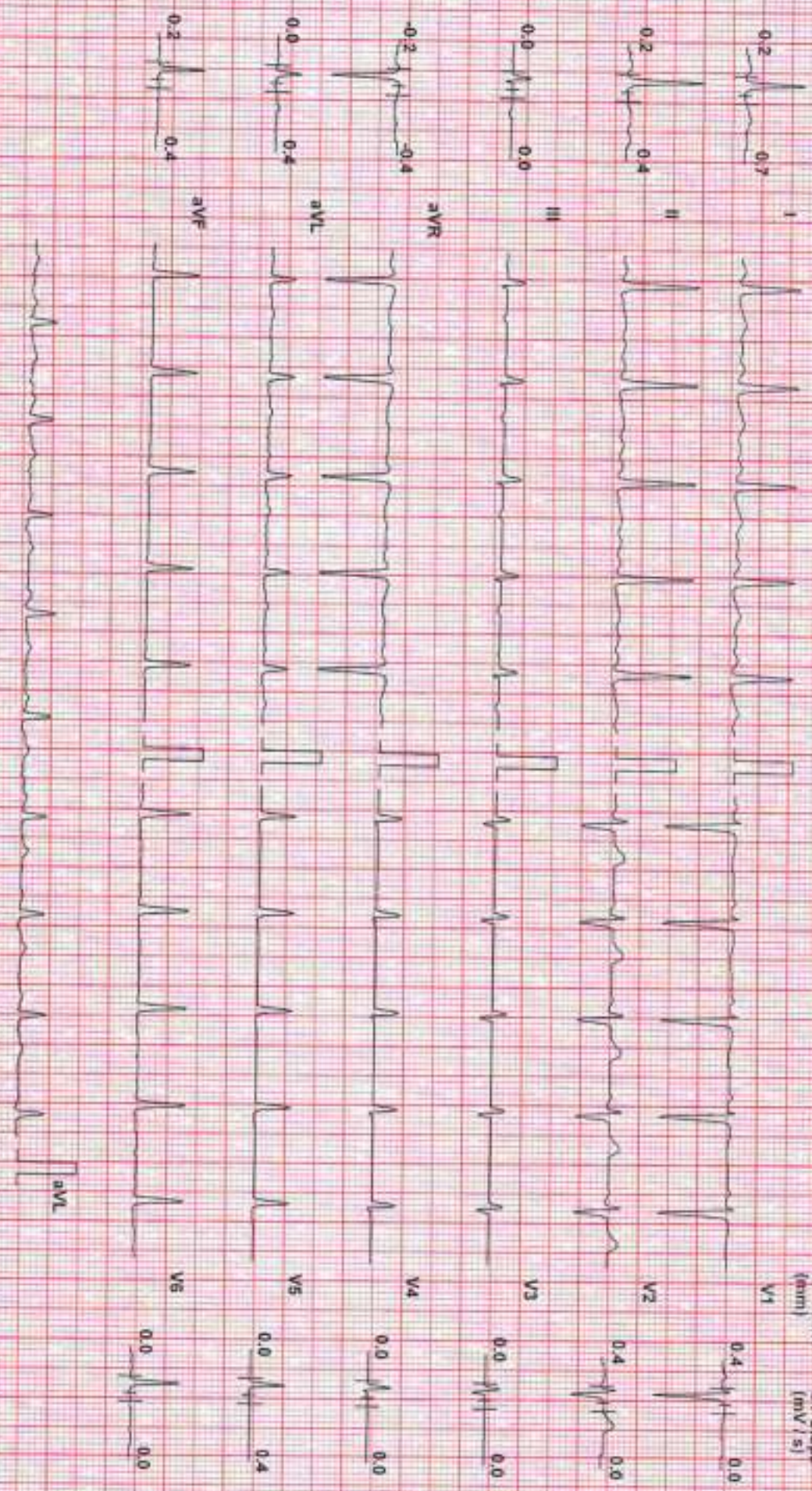
Filter: 30 Hz

Main: FIT ON

Ampl: 10 mm

HR: 90 bpm

ST Level (mm) ST Slope (mV/s)



Unlead Values: I = P = 60 ms, J = P = 85 ms, Post J = J + 60 ms

Interpretation:

Normal

Dr. Manoj Singh

Consultant Physician

MBBS, DNB, MD, DM, EDIC

Reg. No. 2015-04-0000

Scanner: Spawin V4.7

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