

Date:

To,  
**Suburban Diagnostics (India) Private Limited**  
1,2,3, Pride Park, Opp Lawkim Company,  
Near R Mall, Ghodbander Road,  
Thane (W), Mumbai- 400607

**SUBJECT- TO WHOMSOEVER IT MAY CONCERN**

Dear Sir/ Madam,

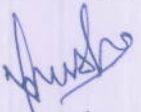
This is to inform you that I, Myself ~~Mr~~ Mrs/ Ms. Anusha Bajaj  
don't want to performed the following tests:

- 1) Stool
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_
- 4) \_\_\_\_\_
- 5) \_\_\_\_\_
- 6) \_\_\_\_\_

CID No. & Date \_\_\_\_\_ :

Corporate/ TPA/ Insurance Client Name :  
\_\_\_\_\_

Thanking you.



Yours sincerely,

(Mr/Mrs/Ms. \_\_\_\_\_)

**PHYSICAL EXAMINATION REPORT**

Patient Name	Anusha Bajaj	Sex/Age	F/36
Date	25/2/23	Location	Thane

**History and Complaints**

Allergy to Fluoroquinolones.  
 C/o - cough/cold  
 C/o - Migraine  
 Frequent Headache  
 Watery eyes  
 Pain in Lower Abdomen on/off.

**EXAMINATION FINDINGS:**

Height (cms):	169	Temp (0c):	37.8
Weight (kg):	69	Skin:	
Blood Pressure	120/80	Nails:	NAD
Pulse	72/min	Lymph Node:	

**Systems :**

Cardiovascular:	NAD
Respiratory:	
Genitourinary:	
GI System:	
CNS:	

**Impression:** All Parameters WNL

Advice:

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

Nil

no

Migraine,

H/O  
febrile  
convulsions

2 yrs  
Rf  
taken  
↓  
Recurrent  
↓  
6-7  
yrs.  
Rf  
taken

Nil

**PERSONAL HISTORY:**

1)	Alcohol
2)	Smoking
3)	Diet
4)	Medication

no Rare  
No  
Mixed

*[Signature]*

**Dr. Manasee Kulkarni**  
M.B.B.S

2005/09/3439

0000-0718-5507

Date:- 20/2/23

CID:

Name:- Ansha Bajaj

Sex / Age: F 36

**EYE CHECK UP**

Chief complaints: PCV

Systemic Diseases: Nil

Past history: Nil

Unaided Vision: 13 E 6/6 NUBND

Aided Vision:

Refraction:

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

Colour Vision: Normal / Abnormal

Remark: Good Vision.

**MR. PRAKASH KUDVA**  
  
**SR. OPTOMETRIST**

Authenticity Check



Use a QR Code Scanner  
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CID : 2305621664  
Name : MRS.ANUSHA BAJAJ  
Age / Gender : 36 Years / Female  
Consulting Dr. : -  
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 25-Feb-2023 / 08:59  
Reported : 25-Feb-2023 / 10:51

**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	13.9	12.0-15.0 g/dL	Spectrophotometric
RBC	4.64	3.8-4.8 mil/cmm	Elect. Impedance
PCV	42.4	36-46 %	Measured
MCV	91.2	80-100 fl	Calculated
MCH	29.9	27-32 pg	Calculated
MCHC	32.7	31.5-34.5 g/dL	Calculated
RDW	13.8	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	6450	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	30.4	20-40 %	
Absolute Lymphocytes	1960.8	1000-3000 /cmm	Calculated
Monocytes	6.2	2-10 %	
Absolute Monocytes	399.9	200-1000 /cmm	Calculated
Neutrophils	62.3	40-80 %	
Absolute Neutrophils	4018.3	2000-7000 /cmm	Calculated
Eosinophils	1.1	1-6 %	
Absolute Eosinophils	71.0	20-500 /cmm	Calculated
Basophils	0.0	0.1-2 %	
Absolute Basophils	0.0	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<b><u>PLATELET PARAMETERS</u></b>			
Platelet Count	246000	150000-400000 /cmm	Elect. Impedance
MPV	9.4	6-11 fl	Calculated
PDW	13.6	11-18 %	Calculated
<b><u>RBC MORPHOLOGY</u></b>			

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Reported : 25-Feb-2023 / 11:06

Hypochromia	-
Microcytosis	-
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                      15                      2-20 mm at 1 hr.                      Sedimentation

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

AREA OF SPECIAL EXPERTISE

OUR PRESENCE



*Amit Taori*

Dr. AMIT TAORI  
M.D ( Path )  
Pathologist



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Consulting Dr. : -  
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 25-Feb-2023 / 08:59  
Reported : 25-Feb-2023 / 12:36

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	93.4	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	89.8	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.54	0.1-1.2 mg/dl	Diazo
BILIRUBIN (DIRECT), Serum	0.23	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.31	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.8	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.6	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.2	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	2.1	1 - 2	Calculated
SGOT (AST), Serum	14.0	5-32 U/L	IFCC without pyridoxal phosphate activation
SGPT (ALT), Serum	11.3	5-33 U/L	IFCC without pyridoxal phosphate activation
GAMMA GT, Serum	14.9	3-40 U/L	IFCC
ALKALINE PHOSPHATASE, Serum	61.4	35-105 U/L	PNPP
BLOOD UREA, Serum	16.7	12.8-42.8 mg/dl	Urease & GLDH
BUN, Serum	7.8	6-20 mg/dl	Calculated

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Reg. Location : G B Road, Thane West (Main Centre)

Collected : 25-Feb-2023 / 11:52  
Reported : 25-Feb-2023 / 13:50

CREATININE, Serum	0.72	0.51-0.95 mg/dl	Enzymatic
eGFR, Serum	97	>60 ml/min/1.73sqm	Calculated
URIC ACID, Serum	3.7	2.4-5.7 mg/dl	Uricase
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 G B Road Lab, Thane West  
\*\*\* End Of Report \*\*\*



*Amit Taori*

**Dr.AMIT TAORI**  
M.D ( Path )  
Pathologist



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Collected : 25-Feb-2023 / 08:59  
Reported : 25-Feb-2023 / 11:38

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

**GLYCOSYLATED HEMOGLOBIN (HbA1c)**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.2	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	102.5	mg/dl	Calculated

**Intended use:**

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

**Clinical Significance:**

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of 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 G B Road Lab, Thane West  
\*\*\* End Of Report \*\*\*



*Amit Taori*

**Dr.AMIT TAORI**  
M.D ( Path )  
Pathologist



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Collected : 25-Feb-2023 / 08:59  
Reported : 25-Feb-2023 / 16:10

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
<b>PHYSICAL EXAMINATION</b>			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	Neutral (7.0)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.010	1.010-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	50	-	-
<b>CHEMICAL EXAMINATION</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>MICROSCOPIC EXAMINATION</b>			
Leukocytes(Pus cells)/hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	3-4		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	4-5	Less than 20/hpf	

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

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

Reference: Pack insert

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



*Amit Taori*  
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M.D ( Path )  
Pathologist

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Collected : 25-Feb-2023 / 08:59  
Reported : 25-Feb-2023 / 13:43

CID : 2305621664  
Name : MRS.ANUSHA BAJAJ  
Age / Gender : 36 Years / Female  
Consulting Dr. : -  
Reg. Location : G B Road, Thane West (Main Centre)

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

PARAMETER	RESULTS
ABO GROUP	O
Rh TYPING	Positive

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

Note : This Sample has also been tested for Bombay group/Bombay phenotype /Oh using anti H lectin

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 G B Road Lab, Thane West  
\*\*\* End Of Report \*\*\*



*Amit Taori*  
**Dr.AMIT TAORI**  
M.D ( Path )  
Pathologist

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Age / Gender : 36 Years / Female  
Consulting Dr. : -  
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 25-Feb-2023 / 08:59  
Reported : 25-Feb-2023 / 12:38

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**LIPID PROFILE**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	131.2	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	82.9	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	42.9	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	88.3	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	71.0	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	17.3	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.1	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	1.7	0-3.5 Ratio	Calculated

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



*Amit Taori*

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Pathologist

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Name : MRS.ANUSHA BAJAJ  
Age / Gender : 36 Years / Female  
Consulting Dr. : -  
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 25-Feb-2023 / 08:59  
Reported : 25-Feb-2023 / 13:46

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Free T3, Serum	4.2	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	17.8	11.5-22.7 pmol/L First Trimester:9.0-24.7 Second Trimester:6.4-20.59 Third Trimester:6.4-20.59	ECLIA
sensitiveTSH, Serum	1.11	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

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Age / Gender : 36 Years / Female  
Consulting Dr. : -  
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 25-Feb-2023 / 08:59  
Reported : 25-Feb-2023 / 13:46

**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 G B Road Lab, Thane West  
\*\*\* End Of Report \*\*\*



MC-5314

*Amit Taori*

**Dr.AMIT TAORI**  
M.D ( Path )  
Pathologist

**SID** : 2305621664  
**Name** : Ms anusha bajaj  
**Age / Sex** : 36 Years/Female  
**Ref. Dr** :  
**Reg. Location** : G B Road, Thane West Main Centre  
**Reg. Date** : 25-Feb-2023  
**Reported** : 25-Feb-2023 / 13:02

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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.**

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

This report is prepared and physically checked by DR GAURI VARMA before dispatch.



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

Click here to view images <<ImageLink>>

Page no 1 of 1

# SUBURBAN DIAGNOSTICS (THANE GB ROAD)

Email:

502 (2305621664) / ANUSHA BAJAJ / 36 Yrs / F / 169 Cms / 69 Kg  
Date: 25 / 02 / 2023 11:27:30 AM

Report



Stage	Time	Duration	Speed(mph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:47	0:47	00.0	00.0	01.0	085	46 %	110/70	093	00	
Standing	00:56	0:09	00.0	00.0	01.0	094	51 %	110/70	103	00	
HV	01:05	0:09	00.0	00.0	01.0	097	53 %	110/70	106	00	
ExStart	01:14	0:09	00.0	00.0	01.0	099	54 %	110/70	108	00	
BRUCE Stage 1	04:14	3:00	01.7	10.0	04.7	144	78 %	130/80	187	00	
PeakEx	05:09	0:55	02.5	12.0	05.4	157	85 %	140/80	219	00	
Recovery	06:09	1:00	00.0	00.0	01.0	118	64 %	140/80	165	00	
Recovery	07:09	2:00	00.0	00.0	01.0	108	59 %	140/80	151	00	
Recovery	09:09	4:00	00.0	00.0	01.0	105	57 %	120/70	125	00	
Recovery	09:19	4:10	00.0	00.0	01.0	107	58 %	120/70	128	00	

**FINDINGS :**

Exercise Time : 03:55  
 Initial HR (ExStrt) : 99 bpm 54% of Target 184  
 Initial BP (ExStrt) : 110/70 (mm/Hg)  
 Max WorkLoad Attained : 5.4 Fair response to induced stress  
 Max ST Dep Lead & Avg ST Value : II & -3.4 mm in PeakEX  
 Test End Reasons : Fatigue, Heart Rate Achieved

Max HR Attained 157 bpm 85% of Target 184  
 Max BP Attained 140/80 (mm/Hg)

**Dr. SHAILAJA PILLAI**

**M.D. (GEN.MED)**

**R.NO. 49972**

Doctor : DR SHAILAJA PILLAI







EMail: ANUSHA BAJAJ / 36 Yrs / F / 169 Cms / 69 Kg Date: 25 / 02 / 2023 11:27:30 AM

REPORT :

**PROCEDURE DONE:** Graded exercise treadmill stress test

**STRESS ECG RESULTS:** The initial HR was recorded as 94.0 bpm, and the maximum predicted Target Heart Rate 184.0. The BP increased at the time of generating report as 140.0/80.0 mmHg. The Max Dep went upto 0.0. 0.0 Ectopic Beats were observed during the Test. The Test was completed because of Fatigue, Heart Rate Achieved.

**CONCLUSIONS:**

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

Dr. SHAILAJA PILLAI

M.D. (GEN.MED)

R.NO. 49972

Doctor : DR SHAILAJA PILLAI

# SUBURBAN DIAGNOSTICS (THANE GB ROAD)

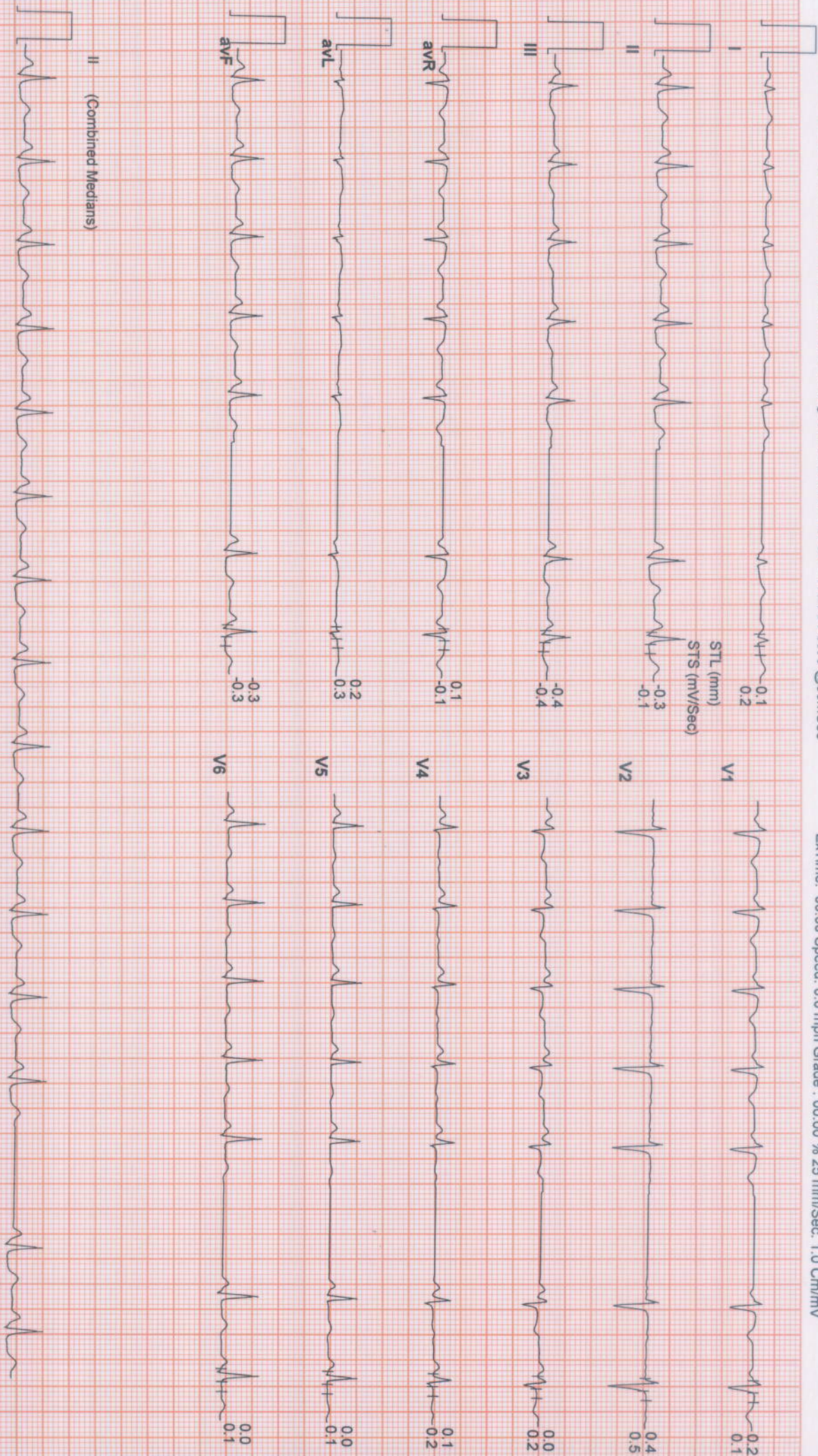
502 / ANUSHKA BAJAJ / 36 Yrs / Female / 169 Cm / 69 Kg

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



Date: 25 / 02 / 2023 11:27:30 AM METs : 1.0 HR : 94 Target HR : 51% of 184 BP : 110/70 Post J @80mSec

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



**SUBURBAN DIAGNOSTICS (THANE GB ROAD)**

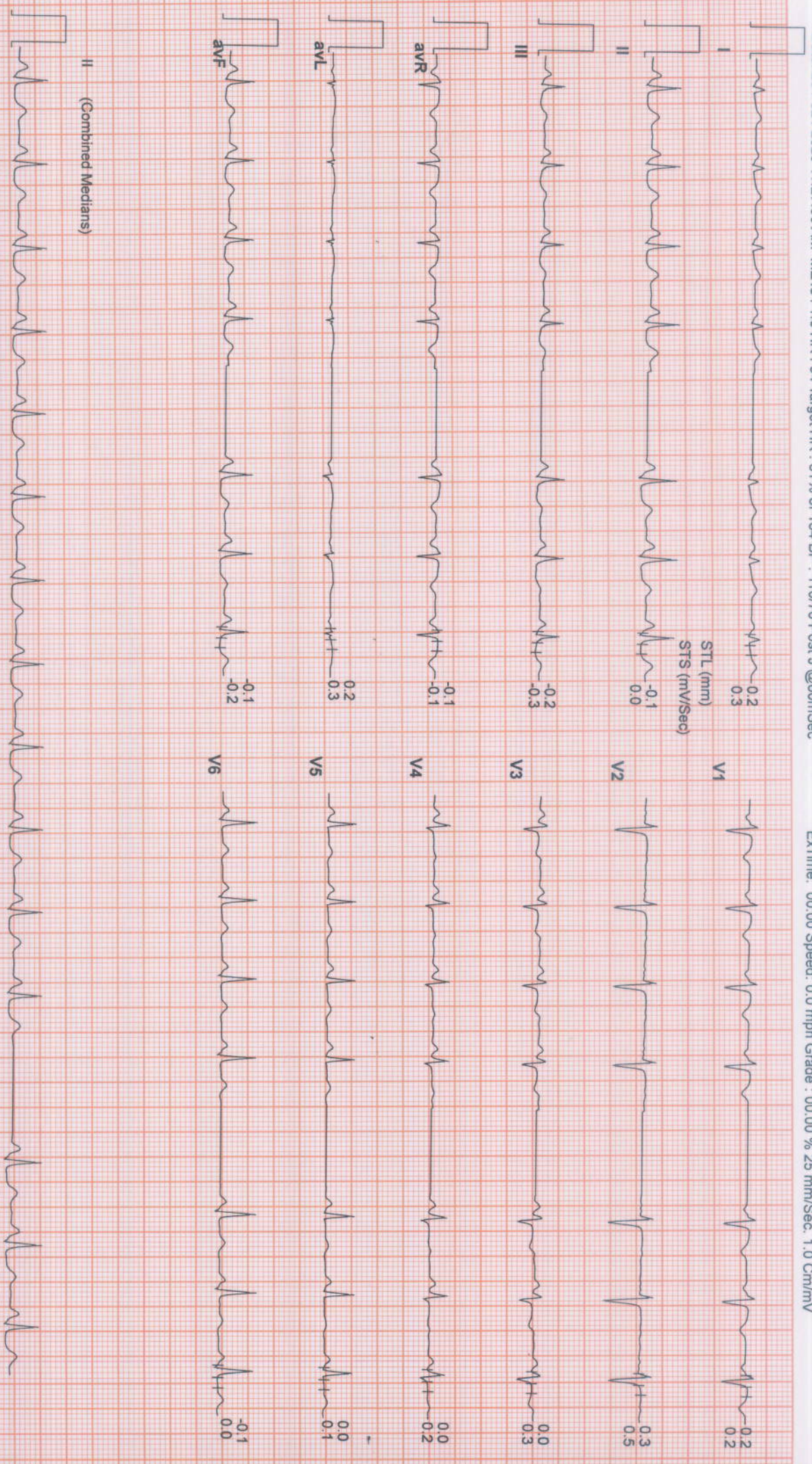
502 / ANUSHA BAJAJ / 36 Yrs / Female / 169 Cm / 69 Kg

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



Date: 25 / 02 / 2023 11:27:30 AM METs : 1.0 HR : 94 Target HR : 51% of 184 BP : 110/70 Post J @60mSec

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



# SUBURBAN DIAGNOSTICS (THANE GB ROAD)

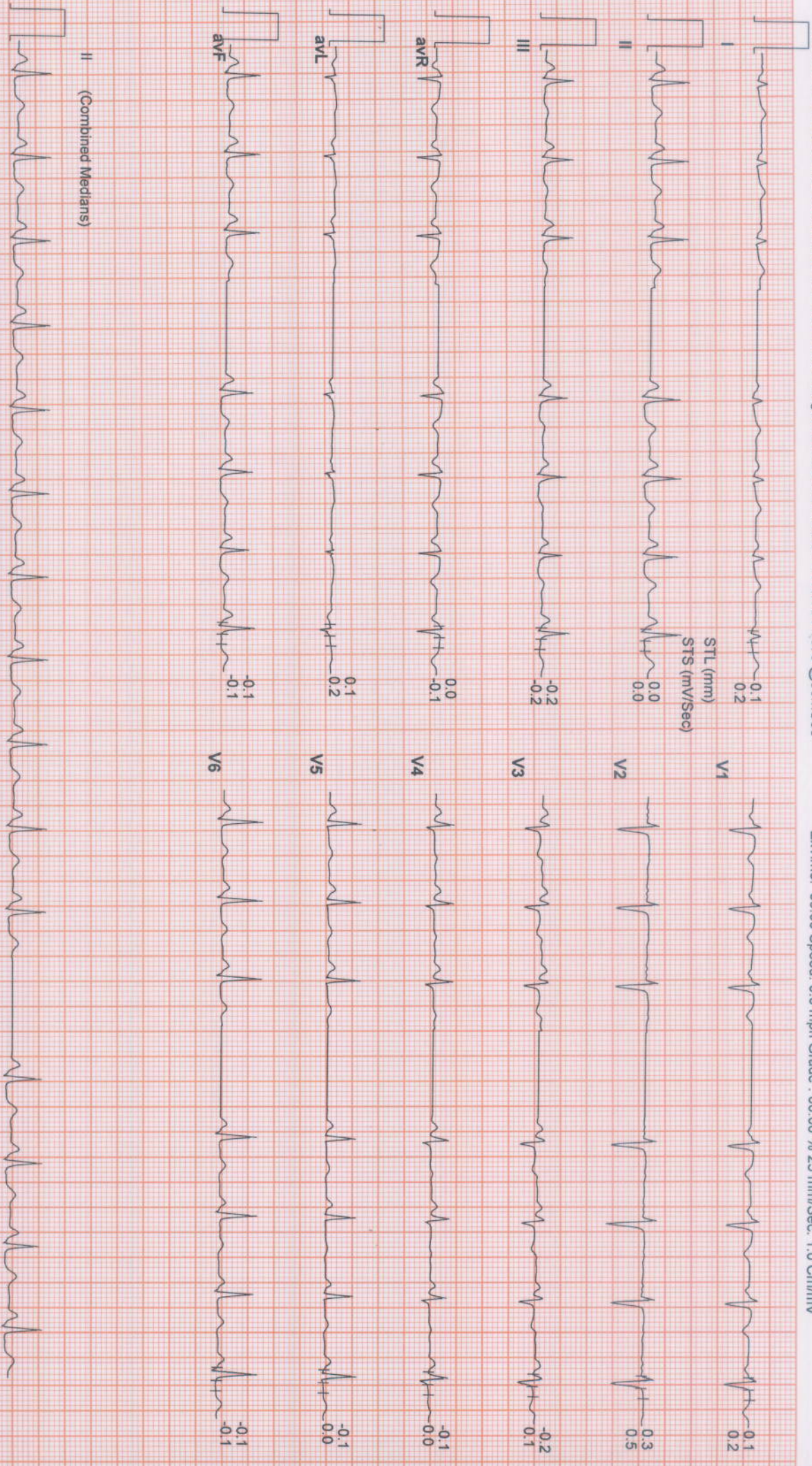
502 / ANUSHA BAJAJ / 36 Yrs / Female / 169 Cm / 69 Kg

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



Date: 25 / 02 / 2023 11:27:30 AM METs : 1.0 HR : 97 Target HR : 53% of 184 BP : 110/70 Post J @80mSec

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



# SUBURBAN DIAGNOSTICS (THANE GB ROAD)

502 / ANUSHA BAJAJ / 36 Yrs / Female / 169 Cm / 69 Kg

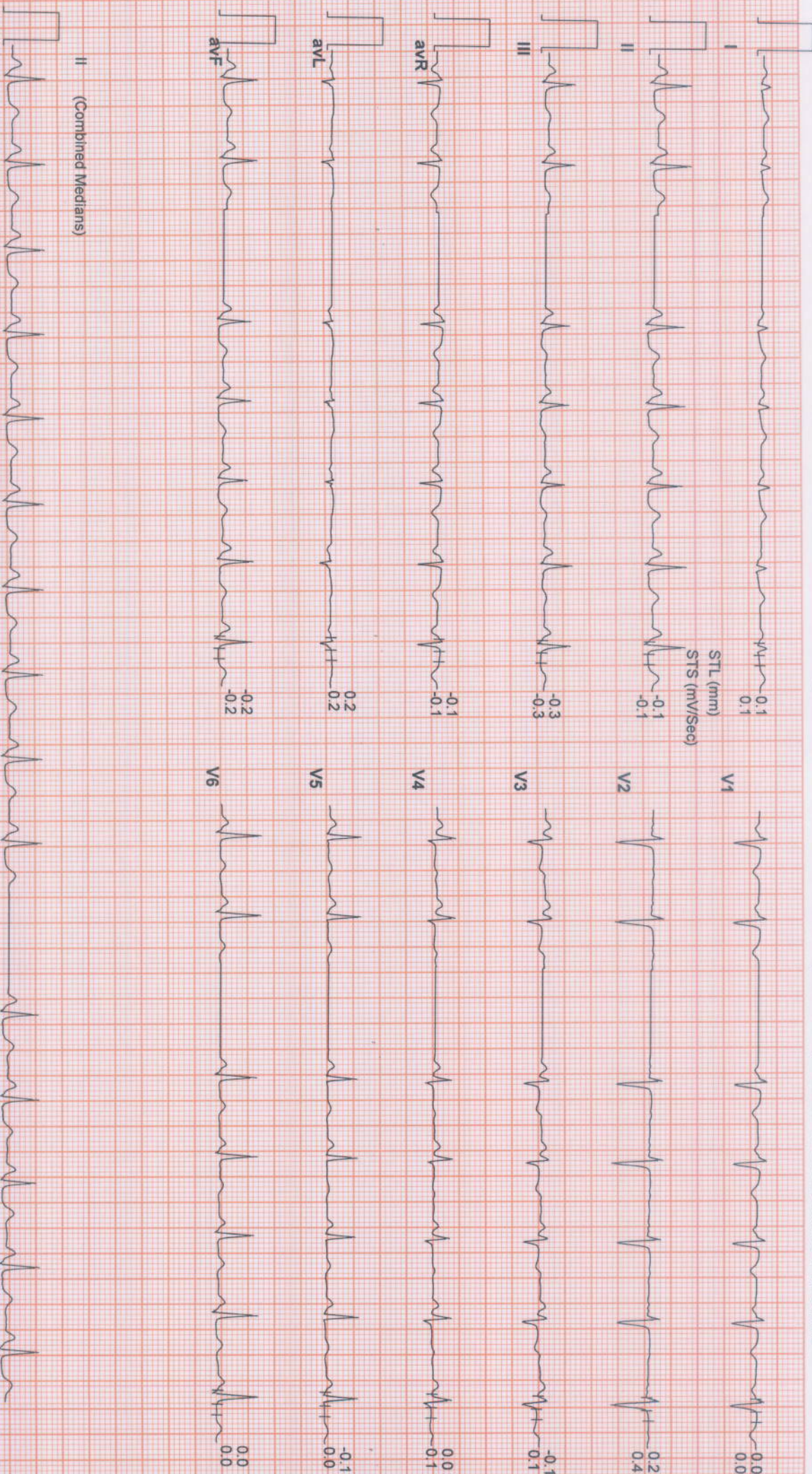
6X2 Combine Medians + 1 Rhythm

ExSt1



Date: 25 / 02 / 2023 11:27:30 AM METs : 1.0 HR : 99 Target HR : 54% of 184 BP : 110/70 Post J @80mSec

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



**SUBURBAN DIAGNOSTICS (THANE GB ROAD)**

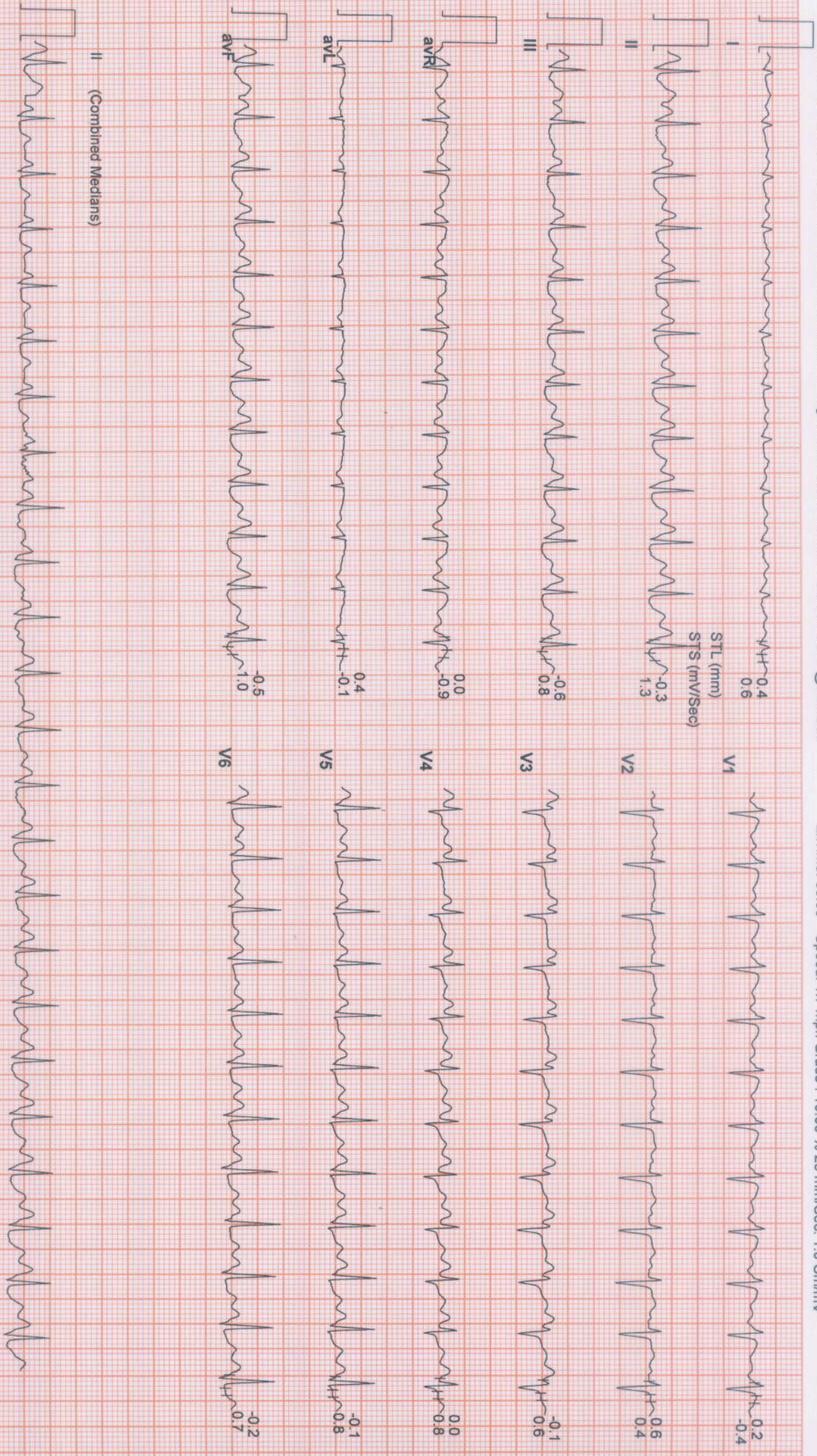
502 / ANUSHBA BAJAJ / 36 Yrs / Female / 169 Cm / 69 Kg

Date: 25 / 02 / 2023 11:27:30 AM METs : 4.7 HR : 144 Target HR : 78% of 184 BP : 130/80 Post J @60mSec

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



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



**SUBURBAN DIAGNOSTICS (THANE GB ROAD)**

502 / ANUSHA BAJAJ / 36 Yrs / Female / 169 Cm / 69 Kg

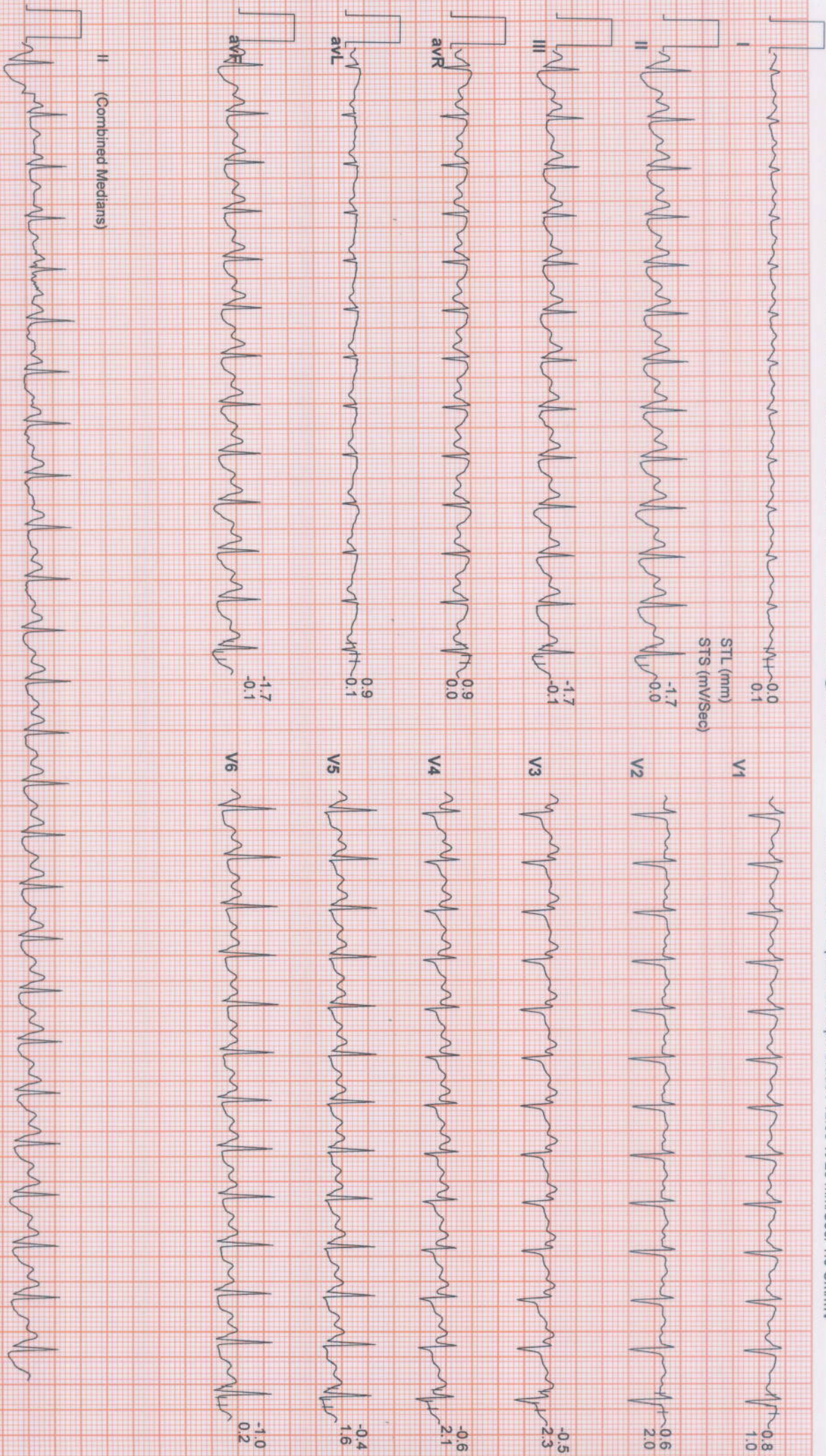
**6X2 Combine Medians + 1 Rhythm**

PeakEX



Date: 25 / 02 / 2023 11:27:30 AM METs : 5.4 HR : 157 Target HR : 85% of 184 BP : 140/80 Post J @50mSec

ExTime: 03:55 Speed: 2.5 mph Grade : 12.00 % 25 mm/Sec. 1.0 Cm/mV



**SUBURBAN DIAGNOSTICS (THANE GB ROAD)**

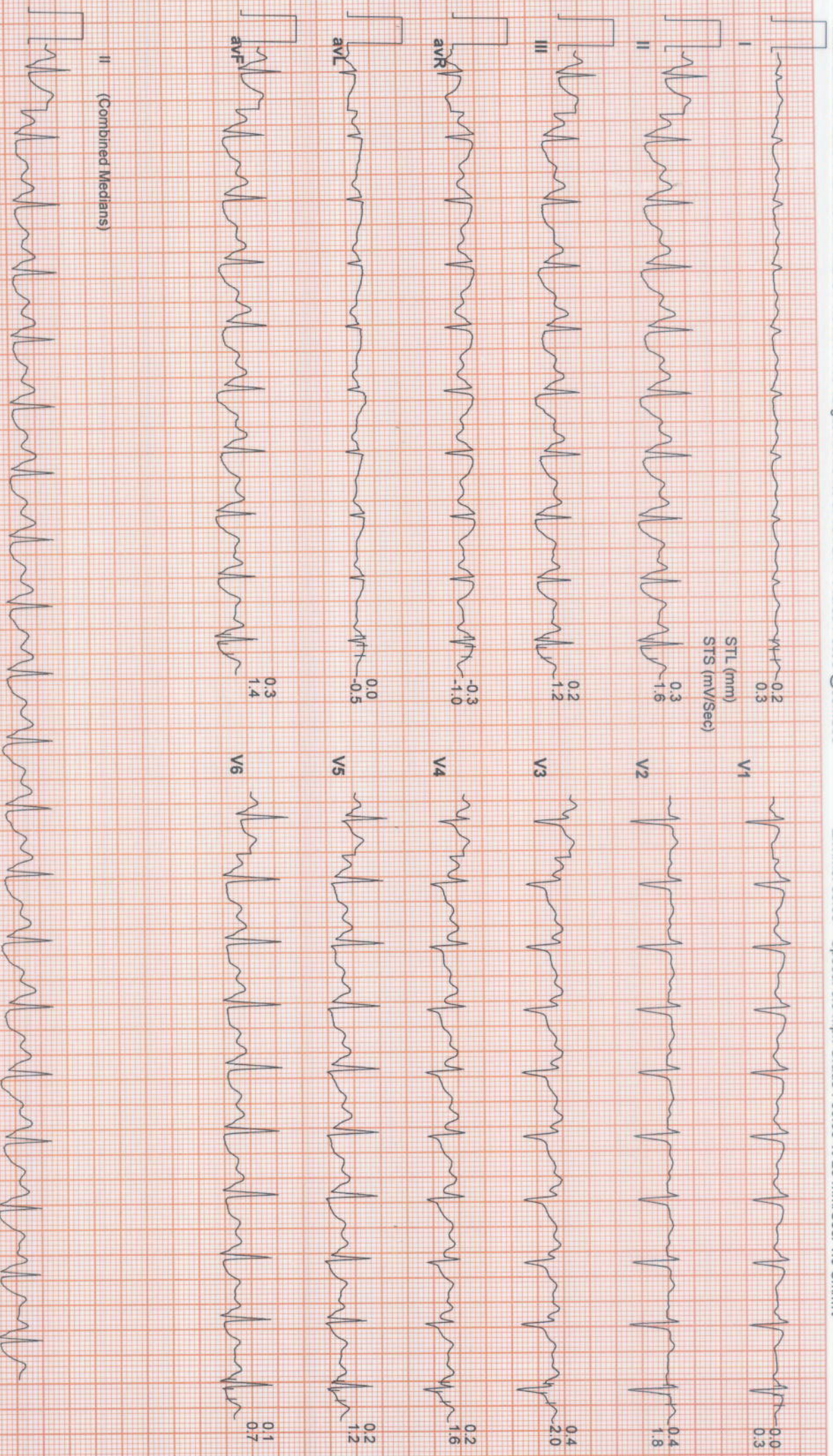
502 / ANUSHA BAJAJ / 36 Yrs / Female / 169 Cm / 69 Kg

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



Date: 25 / 02 / 2023 11:27:30 AM METS : 1.0 HR : 118 Target HR : 64% of 184 BP : 140/80 Post J @80mSec

EXTime: 03:55 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV





**SUBURBAN DIAGNOSTICS (THANE GB ROAD)**

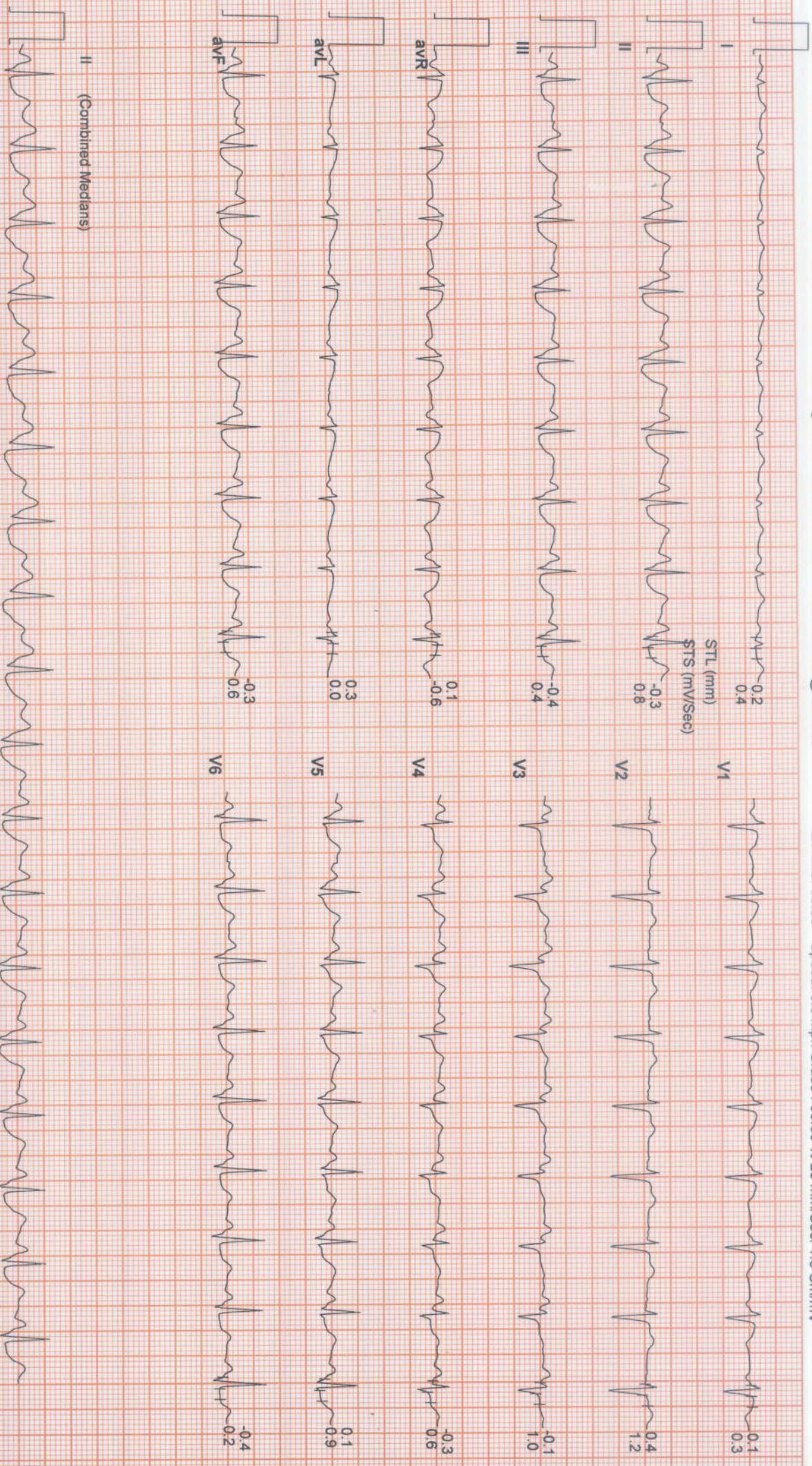
502 / ANUSHA BAJAJ / 36 Yrs / Female / 169 Cm / 69 Kg

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



Date: 25 / 02 / 2023 11:27:30 AM METs : 1.0 HR : 108 Target HR : 59% of 184 BP : 140/80 Post J @80mSec

ExTime: 03:55 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



**SUBURBAN DIAGNOSTICS (THANE GB ROAD)**

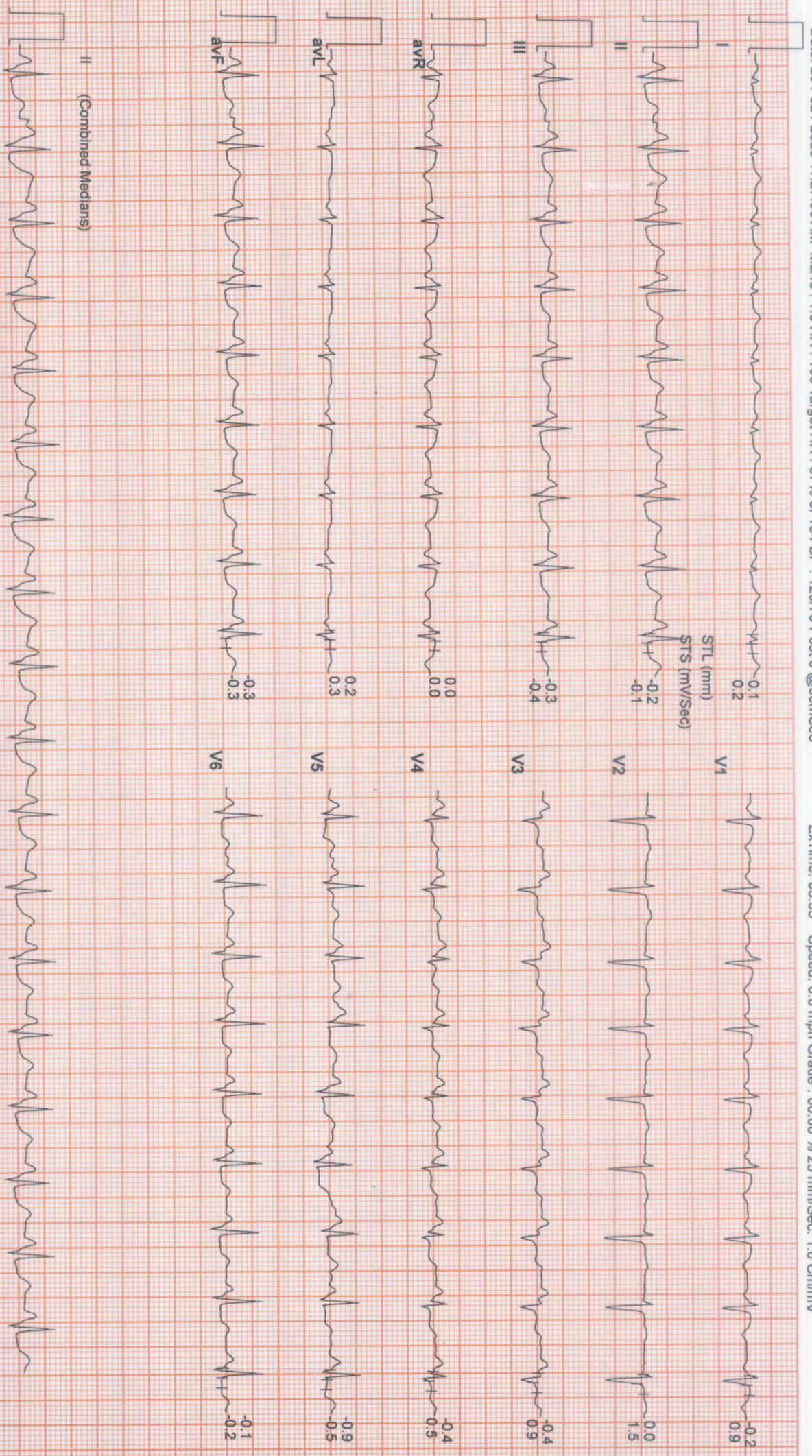
502 / ANUSHA BAJAJ / 36 Yrs / Female / 169 Cm / 69 Kg

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



Date: 25 / 02 / 2023 11:27:30 AM METs : 1.0 HR : 105 Target HR : 57% of 184 BP : 120/70 Post J @80mSec

ExTime: 03:55 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



# SUBURBAN DIAGNOSTICS (THANE GB ROAD)

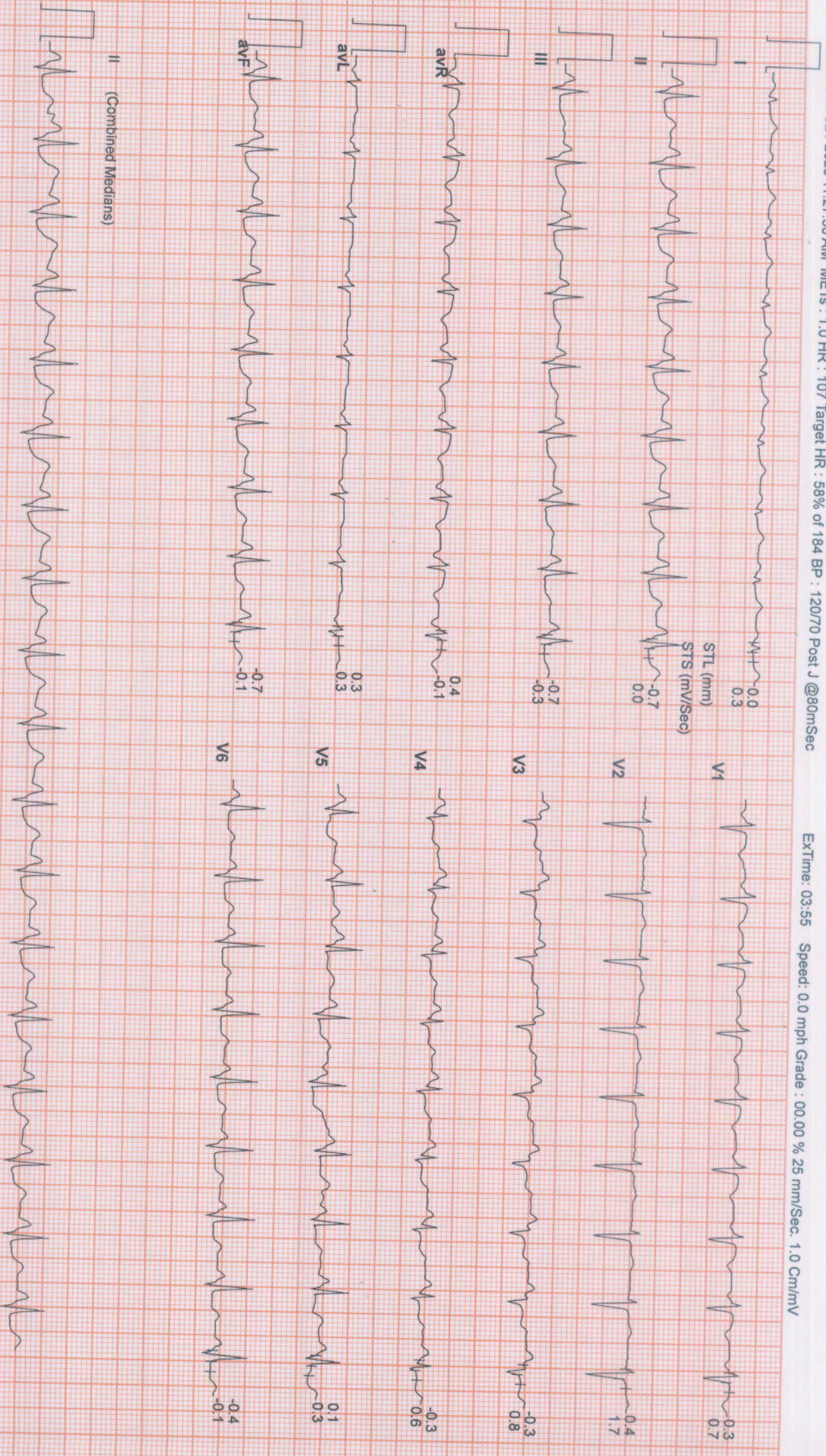
502 / ANUSHA BAJAJ / 36 Yrs / Female / 169 Cm / 69 Kg

Date: 25 / 02 / 2023 11:27:30 AM METs : 1.0 HR : 107 Target HR : 58% of 184 BP : 120/70 Post J @80mSec

6X2 Combine Medians + 1 Rhythm  
Recovery : ( 04:10 )



ExTime: 03:55 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



Authenticity Check



Use a QR Code Scanner  
Application To Scan the Code

CID : 2305621664  
Name : Ms anusha bajaj  
Age / Sex : 36 Years/Female  
Ref. Dr :  
Reg. Location : G B Road, Thane West Main Centre  
Reg. Date : 25-Feb-2023  
Reported : 25-Feb-2023 / 10:17

**USG WHOLE ABDOMEN**

**LIVER:** Liver appears normal in size and 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:** Portal vein is normal. **CBD:** CBD is normal.

**PANCREAS:** Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification. Pancreatic duct is not dilated.

**KIDNEYS:** Right kidney measures 9.0 x 3.4 cm. Left kidney measures 10.2 x 4.3 cm. Both kidneys are normal in size, shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

**SPLEEN:** Spleen is normal in size, shape and echotexture. No focal lesion is seen.

**URINARY BLADDER:** Urinary bladder is distended and normal. Wall thickness is within normal limits.

**UTERUS:** Uterus is anteverted and measures 7.2 x 3.2 x 4.8 cm. Uterine myometrium shows homogenous echotexture. Endometrial echo is in midline and measures 6 mm. ***IUCD noted in situ.*** Cervix appears normal.

**OVARIES:** Both ovaries are normal. Bilateral adnexa are clear.

No free fluid or significant lymphadenopathy is seen.

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023022508531856>

Authenticity Check



Use a QR Code Scanner  
Application To Scan the Code

CID : 2305621664  
Name : Ms anusha bajaj  
Age / Sex : 36 Years/Female  
Ref. Dr :  
Reg. Date : 25-Feb-2023  
Reg. Location : G B Road, Thane West Main Centre  
Reported : 25-Feb-2023 / 10:17

**IMPRESSION:**

**NO SIGNIFICANT ABNORMALITY IS DETECTED.**

**Advice: Clinical co-relation, further evaluation and follow up.**

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have inter-observer variations. Further/follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis.

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

This report is prepared and physically checked by DR GAURI VARMA before dispatch.

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

AREAS OF SPECIAL EXPERTISE

OUR SERVICES

022-6170-0000

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023022508531856>