

CID# TESTING # 2402020659

Name : MRS. JYOTI RANI

Age / Gender : 49 Years/Female

Consulting Dr. :

Reg. Location : Andheri West (Main Centre)

Collected : 20-Jan-2024 / 09:05

Reported : 25-Jan-2024 / 11:53

PHYSICAL EXAMINATION REPORT**History and Complaints:**

Asymptomatic

K/c/o Hypothyroid & DM on medication

EXAMINATION FINDINGS:

Height (cms):	149 cms	Weight (kg):	58 kgs
Temp (0c):	Afebrile	Skin:	Normal
Blood Pressure (mm/hg):	120/80 mm of hg	Nails:	Normal
Pulse:	69/min	Lymph Node:	Not palpable

Systems

Cardiovascular: S1S2 audible

Respiratory: AEBE

Genitourinary: NAD

GI System: Liver & Spleen not palpable

CNS: NAD

IMPRESSION:

K/C/O DM and Hypothyroid on medication.

Stress test is Positive for stress inducible ischaemia.

E=23%, Eosinophilia.

USG shows divarication of the rectus abdominis muscle.

Mammography shows an ill-defined hypoechoic lesion with posterior shadowing in the left breast could be suggestive of ??neoplastic etiology.

ADVICE:

Kindly consult your treating physician with all your reports,
Consult Cardiologist in view of positive stress test for further evaluation,
Consult breast surgeon in view of Mammography finding,
Therapeutic life style modification is advised.

CID# TESTING REF: 2402020659

Name : MRS. JYOTI RANI

Age / Gender : 49 Years/Female

Consulting Dr. :

Reg. Location : Andheri West (Main Centre)

Collected : 20-Jan-2024 / 09:05

Reported : 25-Jan-2024 / 11:53

CHIEF COMPLAINTS:

- | | |
|--|-----------------------------------|
| 1) Hypertension: | No |
| 2) IHD | No |
| 3) Arrhythmia | No |
| 4) Diabetes Mellitus | Yes, on medication since 10 years |
| 5) Tuberculosis | No |
| 6) Asthama | No |
| 7) Pulmonary Disease | No |
| 8) Thyroid/ Endocrine disorders | Yes, on medication since 12 years |
| 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 | No |
| 17) Musculoskeletal System | No |

PERSONAL HISTORY:

- | | |
|---------------|-----------------------|
| 1) Alcohol | No |
| 2) Smoking | No |
| 3) Diet | Mixed |
| 4) Medication | Tbb. Thyronom 37.5 mg |

*** End Of Report ***

Sangeeta Manwani

Dr. Sangeeta Manwani
M.B.B.S. Reg.No.71083

CID : 2402020659
Name : Mrs JYOTI RANI
Age / Sex : 49 Years/Female
Ref. Dr :
Reg. Location : Andheri West (Main Center)
Reg. Date : 20-Jan-2024
Reported : 20-Jan-2024 / 15:31

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (13.9cm), shape and smooth margins. It shows normal 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 physiologically distended and appears normal. No evidence of gall stones or mass lesions seen

PANCREAS:

The pancreas is well visualised 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 9.6 x 4.0cm. Left kidney measures 10.2 x 3.9cm.

SPLEEN:

The spleen is normal in size (7.2cm) and echotexture. No evidence of focal lesion is noted.

There is no evidence of any lymphadenopathy or ascites.

There is evidence of divarication of the rectus abdominis muscle noted at the umbilicus.

URINARY BLADDER:

The urinary bladder is well distended and reveal no intraluminal abnormality.

UTERUS:

Uterus is anteverted. The uterine myometrium shows multiple calcifications. **A 2.8 x 2.7cm sized calcified fibroid is noted in the fundus of the uterus.** Periendometrial halo is well maintained. Endometrium measures 3.0mm. Cervix appears normal. (Post menopausal status).

CID : 2402020659
Name : Mrs JYOTI RANI
Age / Sex : 49 Years/Female
Ref. Dr :
Reg. Location : Andheri West (Main Center)
Reg. Date : 20-Jan-2024
Reported : 20-Jan-2024 / 15:53

MAMMOGRAPHY AND SONOMAMMOGRAPHY

Bilateral mammograms have been obtained a low radiation dose film screen technique in the cranio-caudal and oblique projections. Film markers are in the axillary / lateral portions of the breasts. **Bilateral breast density ACR CATEGORY II**

The left breast shows an irregular mass in the lower inner quadrant. Rest of the breast parenchyma is normal.
No abnormal skin thickening is seen.

Sonomammography of both breasts show normal parenchymal echotexture.

On sonography an ill-defined hypoechoic lesion with posterior shadowing is seen at 7 O'clock position in the left breast at the site of above mentioned density. It approximately measures 1.8 x 1.7 x 1.2cm. No evidence of any calcification, cystic component or abnormal vascularity seen within this lesion. No evidence of any satellite lesion. Findings could be suggestive of ? neoplastic etiology.

No significant axillary lymphadenopathy is seen.

IMPRESSION:

An ill-defined hypoechoic lesion with posterior shadowing in the left breast as described above could be suggestive of ? neoplastic etiology.

Normal mammography and sonomammography of the right breast.

RIGHT BREAST - BIRADS CATEGORY I
LEFT BREAST - BIRADS CATEGORY IVb

Suggest: CORE BIOPSY

*Follow up mammography after one year is suggested.
Please bring all the films for comparison.*

Regn Date :
Name :
Regn No :

Age / Sex :
Rpt Date/Time :
Ref Dr :

GYNAECOLOGICAL EXAMINATION REPORT

EXAMINATION :					
RS	:	A E B E	CVS	:	S1 S2 audible
BREAST EXAMINATION	:		PER ABDOMEN	:	Soft, Non-tender
PER VAGINAL	:	Pap Smear done.			

MENSTRUAL HISTORY :				
MENARCHE	:	15 yr.	Menopause since 2 years.	
PA. MENSTRUAL HISTORY	:	Regular		

OBSTETRIC HISTORY	
G ₃ P ₂ A ₁ L ₀ .	

PERSONAL HISTORY :					
ALLERGIES	:	Dust	BLADDER HABITS	:	No.
BOWEL HABITS	:	Tends to get constipation	DRUG HISTORY	:	Yes, for DM & Hypertension
PREVIOUS SURGERIES	:	No.			

FAMILY HISTORY :	
Both parents diabetic on medication, father died at the age of 53 due to Diabetic complication	

CHIEF GYNAE COMPLAINTS :	
None	

RECOMMENDATIONS :	
<ul style="list-style-type: none"> Inflammatory Pap smear. Repeat Pap smear after the inflammation subsides. 	

Date:-

CID:

Name:-

Sex / Age: /

EYE CHECK UP

Chief complaints: Nil

Systemic Diseases: Hypothyroid, Diabetes Mellitus

Past history: Yes, on medication

Unaided Vision:

Aided Vision:

Refraction:

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	—	—	—	6/6	—	—	—	6/6
Near	—	—	—	NS	—	—	—	NS



Colour Vision: Normal / Abnormal

Remark: Normal vision

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2402020659
Name : MRS. JYOTI RANI
Age / Gender : 49 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 20-Jan-2024 / 13:35
Reported : 24-Jan-2024 / 13:56

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
PAP SMEAR REPORT**

Liquid based cytology

Specimen : (G/SDC - 711/24)

Received EziPrep vial.

Adequacy :

Satisfactory for evaluation.

Squamous metaplastic cells are present.

Microscopic :

Smear reveals mainly parabasal and fewer intermediate squamous cells along with moderate neutrophilic infiltrate.

Interpretation :

1. Negative for intraepithelial lesion or malignancy.
2. Atrophic, inflammatory smear.

Recommended : Repeat testing after inflammation subsides.

Report as per " THE BETHESDA SYSTEM" for cervicovaginal reporting.

Note : Pap test is a screening test for cervical cancer with inherent false negative results.

LBC samples will be retained for a period of one month after release of report. Any further tests required eg. HPV testing (test code: PATH007131) may be ordered within this period.

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



Dr. VRUNDA SHETH
MBBS, DNB(Path), Dip. FRCP.
CHIEF OF HISTOPATHOLOGY &
CYTOPATHOLOGY

SUBURBAN DIAGNOSTICS

Patient Details **Date:** 20-Jan-24 **Time:** 13:48:21
Name: JYOTI RANI ID: 2402020659
Age: 48 y **Sex:** F **Height:** 140 cms. **Weight:** 58 Kg.
Clinical History: DM, HYPOTHYROID

Medications: YES

Test Details

Protocol: Bruce **Pr.MHR:** 171 bpm **THR:** 145 (85 % of Pr.MHR) bpm
Total Exec. Time: 7 m 2 s **Max. HR:** 162 (95% of Pr.MHR)bpm **Max. Mets:** 10.20
Max. BP: 210 / 90 mmHg **Max. BP x HR:** 34020 mmHg/min **Min. BP x HR:** 6720 mmHg/min
Test Termination Criteria: Target HR attained

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	0 : 36	1.0	0	0	85	140 / 80	-1.27 V1	1.42 V1
Standing	0 : 7	1.0	0	0	84	140 / 80	-0.21 II	0.35 II
Hyperventilation	0 : 10	1.0	0	0	87	140 / 80	-0.21 II	-1.06 V1
1	3 : 0	4.6	1.7	10	120	150 / 80	-1.70 II	1.06 II
2	3 : 0	7.0	2.5	12	146	160 / 80	-3.40 II	-3.89 V5
Peak Ex	1 : 2	10.2	3.4	14	162	210 / 90	-4.88 II	-2.12 II
Recovery(1)	1 : 0	1.8	1	0	141	190 / 90	-3.82 II	-2.83 III
Recovery(2)	1 : 0	1.0	0	0	106	170 / 90	-2.34 aVF	0.71 II
Recovery(3)	1 : 0	1.0	0	0	98	150 / 90	-2.12 II	-1.06 III
Recovery(4)	1 : 0	1.0	0	0	95	140 / 90	-2.34 II	-1.06 II
Recovery(5)	0 : 33	1.0	0	0	97	140 / 90	-1.91 II	-1.06 II

Interpretation

GOOD EFFORT TOLERANCE
 NORMAL CHRONOTROPIC RESPONSE
 EXAGGERATED INOTROPIC RESPONSE
 NO ANGINA/ ANGINA EQUIVALENTS
 NO ARRHYTHMIAS
 SIGNIFICANT ST SEGMENT DEPRESSIONS NOTED IN INFEROLATERAL LEADS DURING
 EXERCISE & RECOVERY
 IMPRESSION: STRESS TEST IS POSITIVE FOR STRESS INDUCIBLE ISCHAEMIA

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. Ravi Chavan
 MD - Card
 Consultant Cardiologist
 Reg. No.: 2004/06/2458

Ref. Doctor: ARCOFEMI HEALTHCARE

(Summary Report edited by user)

Doctor: DR. RAVI CHAVAN

(c) Schiller Healthcare India Pvt. Ltd. V 4.7



SUBURBAN DIAGNOSTICS

Test Report

JYOTI RANI (49 F)

ID: 2402020659

Date: 20-Jan-24

Exec Time : 0 m 0 s

Stage Time : 0 m 30 s

HR: 85 bpm

Protocol: Bruce

Stage: Supine

Speed: 0 mph

Grade: 0%

(THR: 145 bpm)

B.P.: 140 / 80

ST Level (mm)

ST Slope (mV/s)

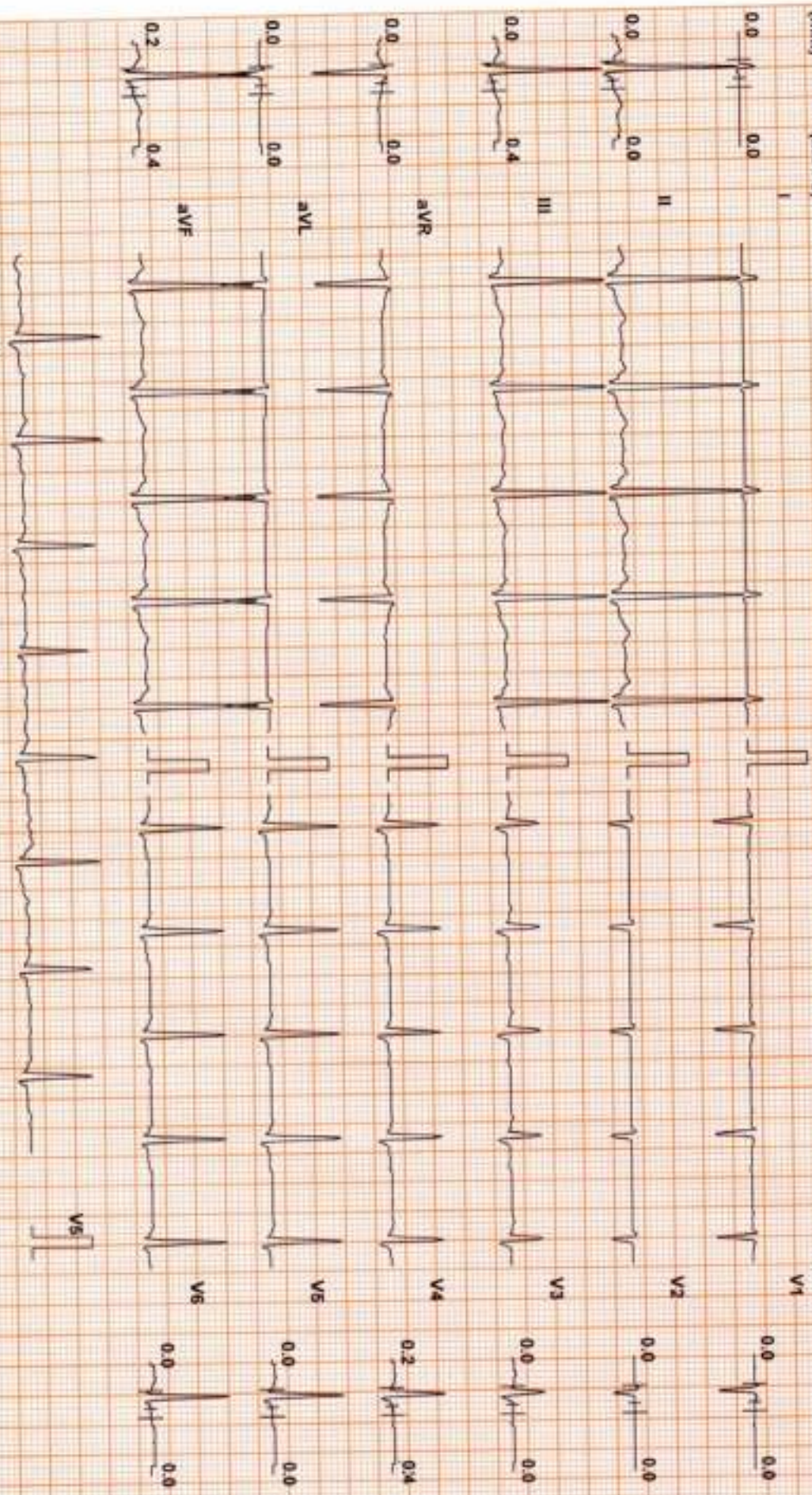


Chart Speed: 25 mm/sec

Filter: 35 Hz

Main: Fill ON

Amp: 10 mm

40-R-60ms

J= R+60ms

Post J= J+60ms

Scale: Standard V4.7

Linked Median

SUBURBAN DIAGNOSTICS

Test Report

JYOTIRANI (49 F)

ID: 2402020659

Date: 20-Jan-24

Exec Time : 0 m 0 s

Stage Time : 0 m 1 s

HR: 84 bpm

Protocol: Bruce

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 145 bpm)

B.P.: 140 / 80

ST Level (mm)

ST Slope (mV/s)

ST Level (mm)

ST Slope (mV/s)

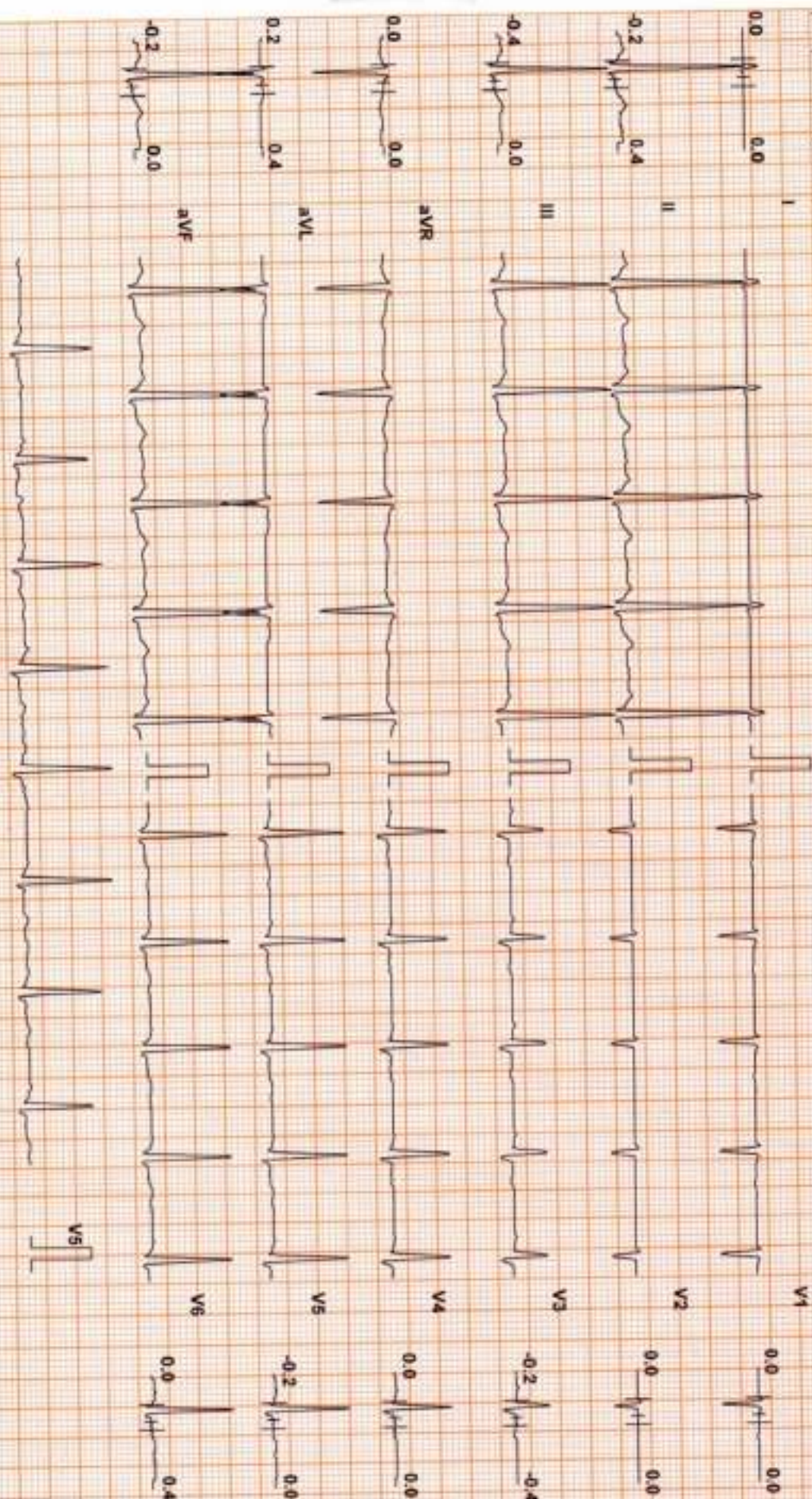


Chart Speed 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

60 = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Scale Standard V & T

Linked Median



JYOTI RANI (49 F)

Protocol: Bruce

SUBURBAN DIAGNOSTICS

Test Report

ID: 2402020659

Date: 20-Jan-24

Exec Time: 0 m 0 s

Stage Time: 0 m 4 s

HR: 86 bpm

Stage: Hyperventilation

Speed: 0 mph

Grade: 0 %

(THR: 145 bpm)

B.P: 140 / 80

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

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

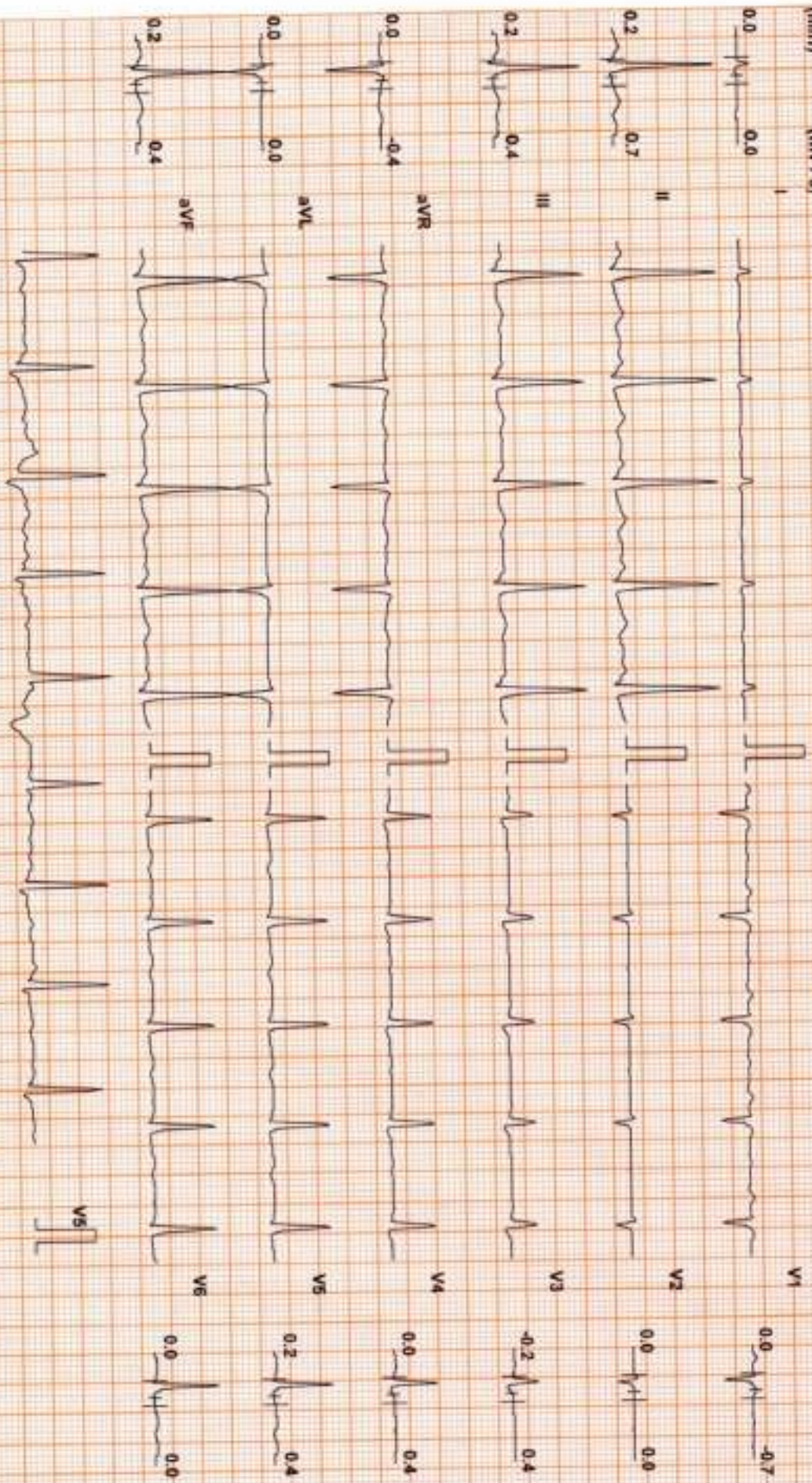


Chart Speed 25 mm/sec

Filter 35 Hz

Mains Fil: ON

Amp: 10 mm

100 - P - 80 ms

1 - R - 60 ms

Post P - 2 - 50 ms

Scale: Standard V & T

Linked Median



SUBURBAN DIAGNOSTICS

JYOTI RANI (48 F)

Protocol: Bruce

ID: 2402020659

Date: 20-Jan-24

Exec Time : 2 m 43 s Stage Time : 2 m 43 s **HR: 118 bpm**

Stage: 1

Speed: 1.7 mph

Grade: 10 %

(THR: 145 bpm)

B.P. 150 / 80

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

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

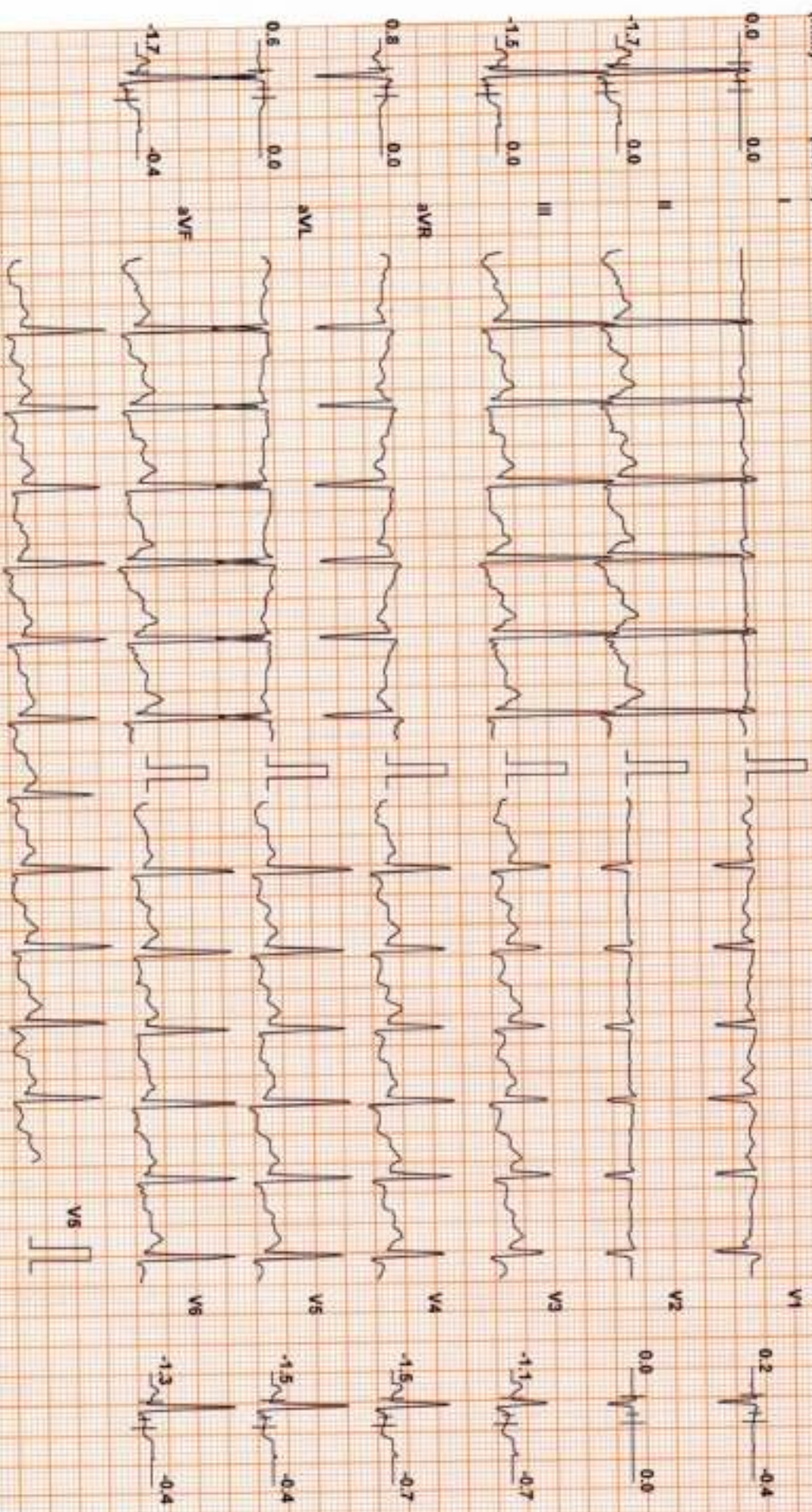


Chart Speed: 25 mm/sec

Filter: 35 Hz

Main Filter: ON

Ampl: 10 mm

(60 = R - 60) ms

J = R + 60 ms

Post J = J + 60 ms

Scholar Standard V4.7



SUBURBAN DIAGNOSTICS

Test Report

JYOTI RANI (49 F)

Protocol: Exercise

ID: 2402020659

Date: 20-Jan-24

Exec Time: 2 m 54 s

Stage Time: 2 m 54 s

HR: 120 bpm

Stage: 1

Speed: 1.7 mph

Grade: 10 %

(THR: 145 bpm)

B.P: 150 / 80

ST Level (mm)

ST Slope (mV/s)

ST Level (mm)

ST Slope (mV/s)

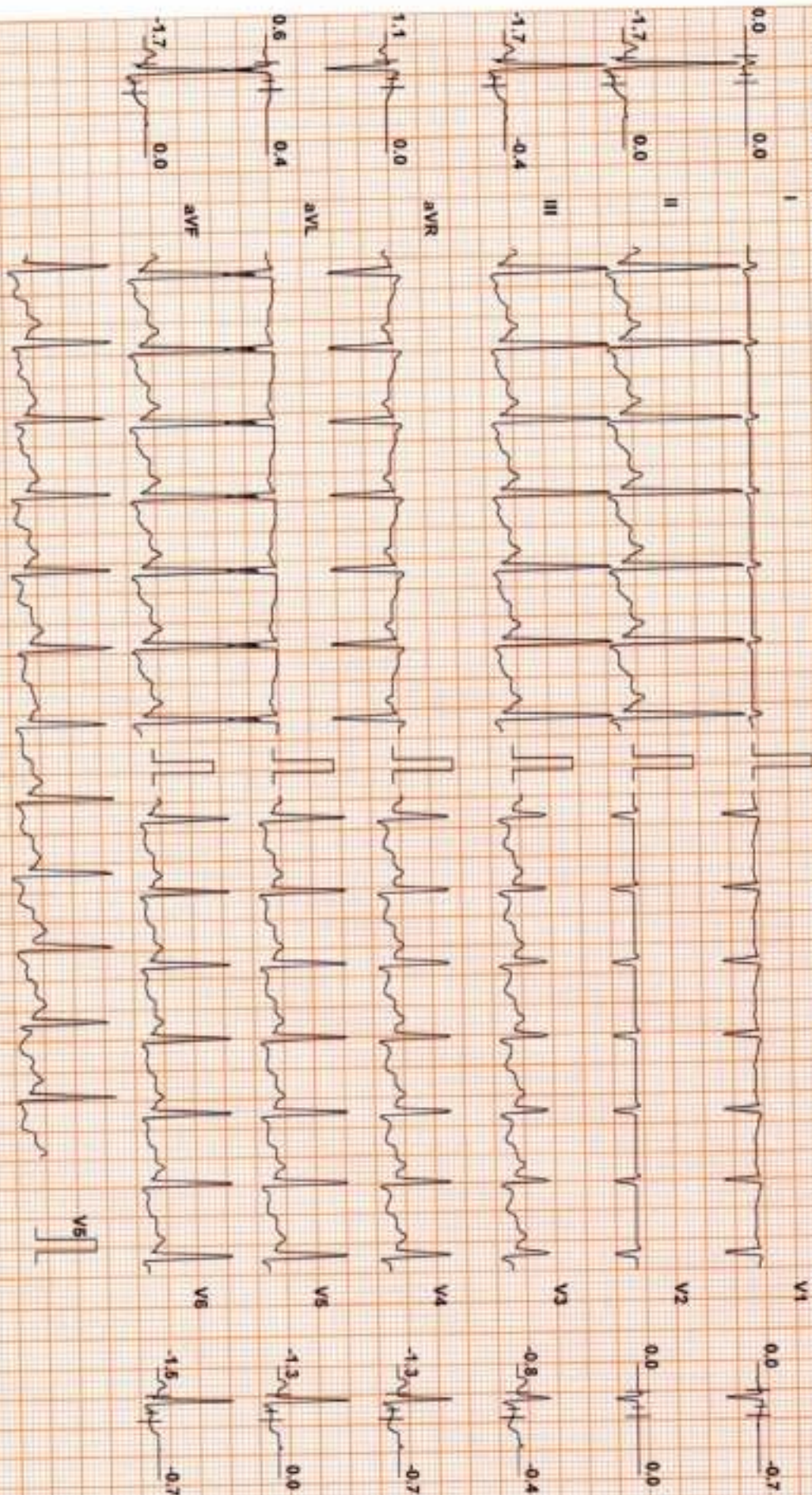


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

Imp = R - 60 ms

J = R - 60 ms

Post J = J + 60 ms

Scale: Standard V47

Linked Median



SUBURBAN DIAGNOSTICS

JYOTI RANI (48 F)

Protocol: Bruce

ID: 2402020659

Date: 20-Jan-24

Exec Time: 4 m 19 s Stage Time: 1 m 19 s HR: 134 bpm

Stage: 2

Speed: 2.5 mph

Grade: 12%

(THR: 145 bpm)

B.P.: 160 / 80

ST Level (mm)

ST Level (mm)

ST Slope (mV/s)

ST Slope (mV/s)

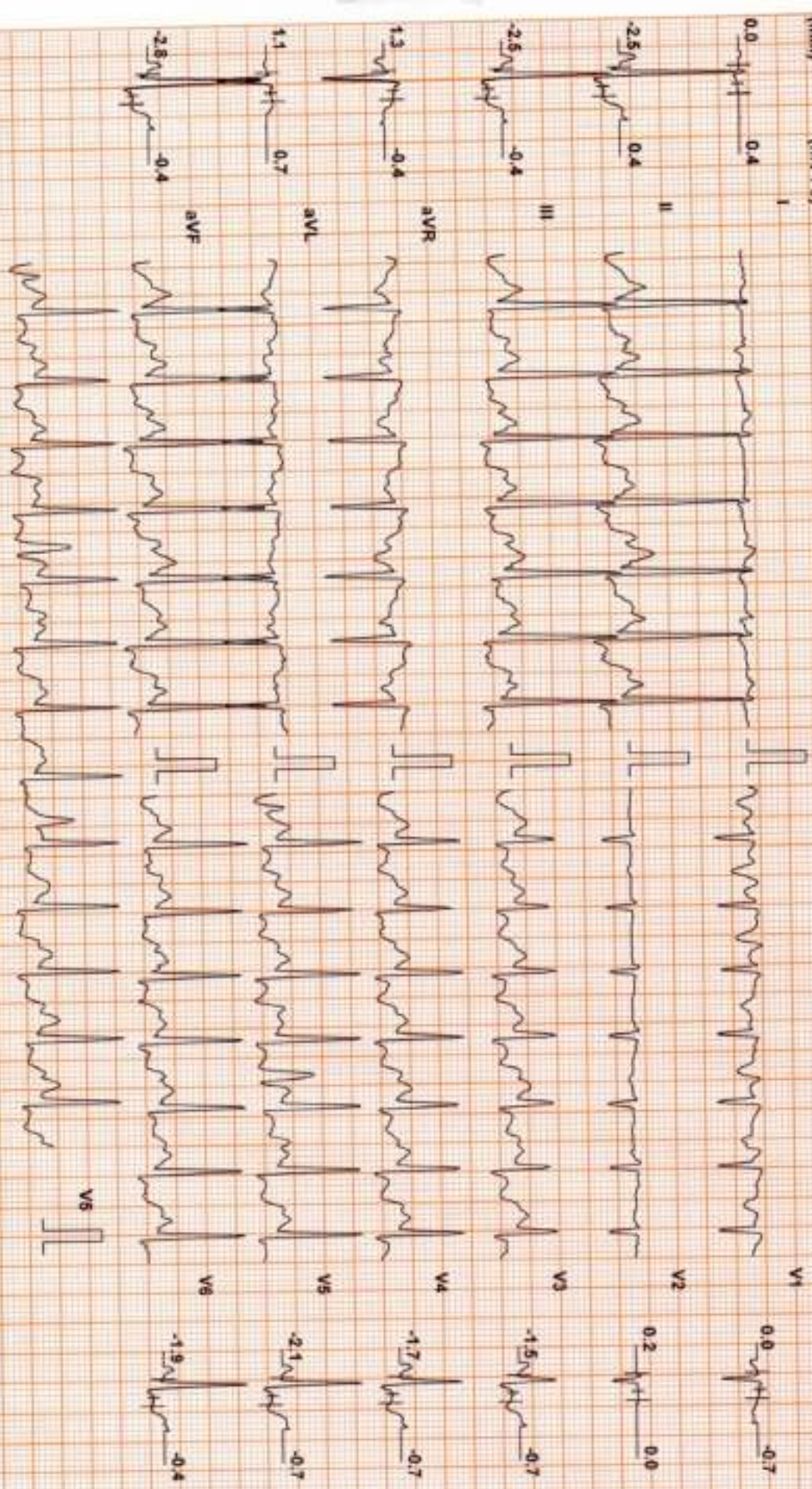


Chart Speed: 25 mm/sec
Scale: Standard V 4.7

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

100 - R - 40 ms

J - R - 60 ms

Post J - J - 60 ms



SUBURBAN DIAGNOSTICS

JYOTIRANI (48 F)

Protocol: Bruce

ID: 24020200659

Date: 20-Jan-24

Exec Time : 5 m 25 s

Stage Time : 2 m 25 s

HR: 142 bpm

Stage: 2

Speed: 2.5 mph

Grade: 12 %

THR: 145 bpm

B.P: 160 / 80

ST Level (mm)

ST Slope (mV / s)

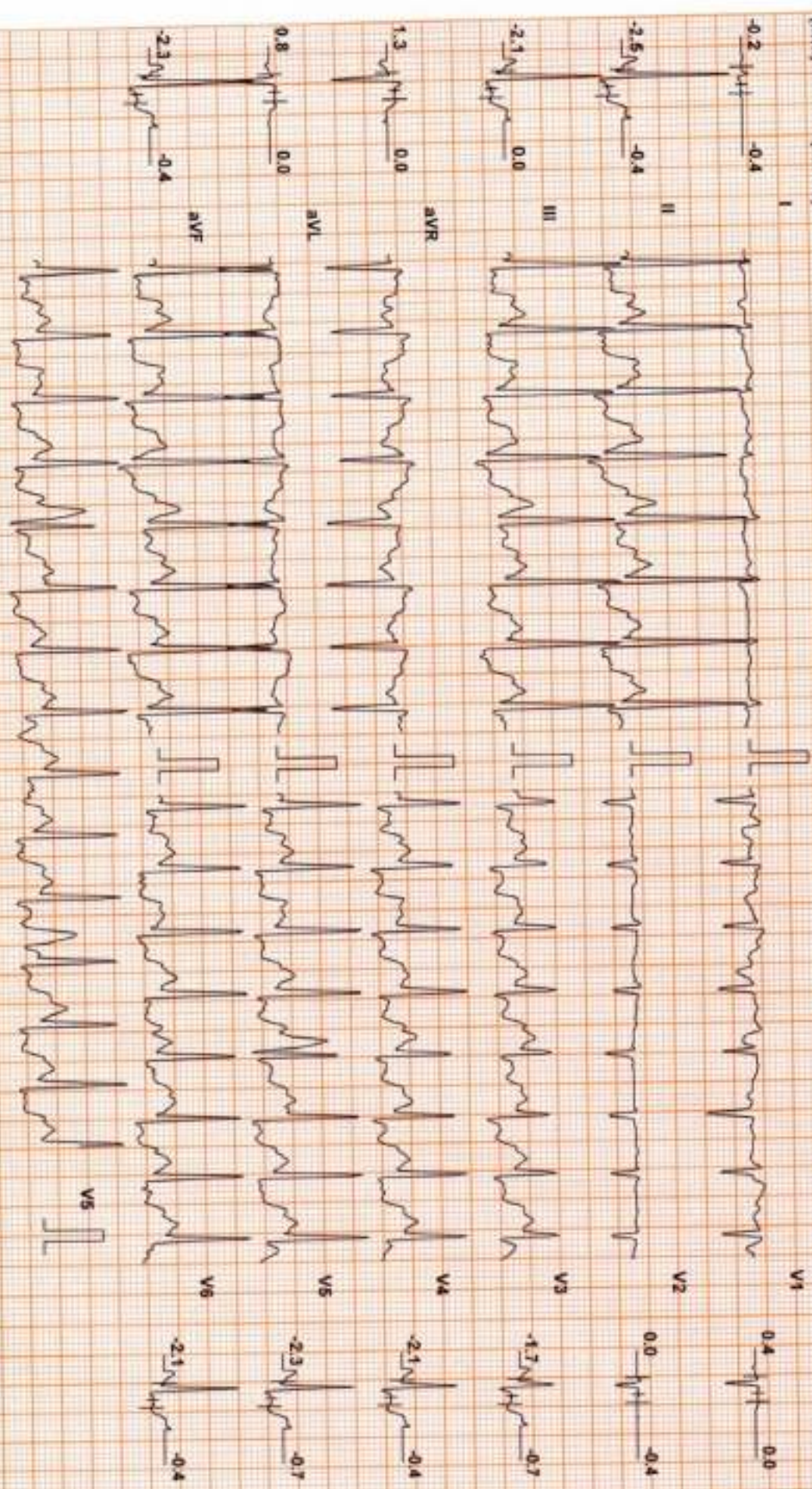


Chart Speed: 25 mm/sec

Filter: 35 Hz

Main: Filter ON

Amp: 10 mm

100-R-60 mm

V-R-60 mm

Post-R-60 mm

Serial Speed: V47



JYOTI RANI (49 F)

Protocol: Bruce

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

SUBURBAN DIAGNOSTICS

ID: 2402020659

Date: 20-Jan-24

Exec Time : 5 m 54 s Stage Time : 2 m 54 s **HR: 145 bpm**

Test Report

Stage: 2

Speed: 2.5 mph Grade: 12 %

(THR: 145 bpm)

B.P.: 160 / 80

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

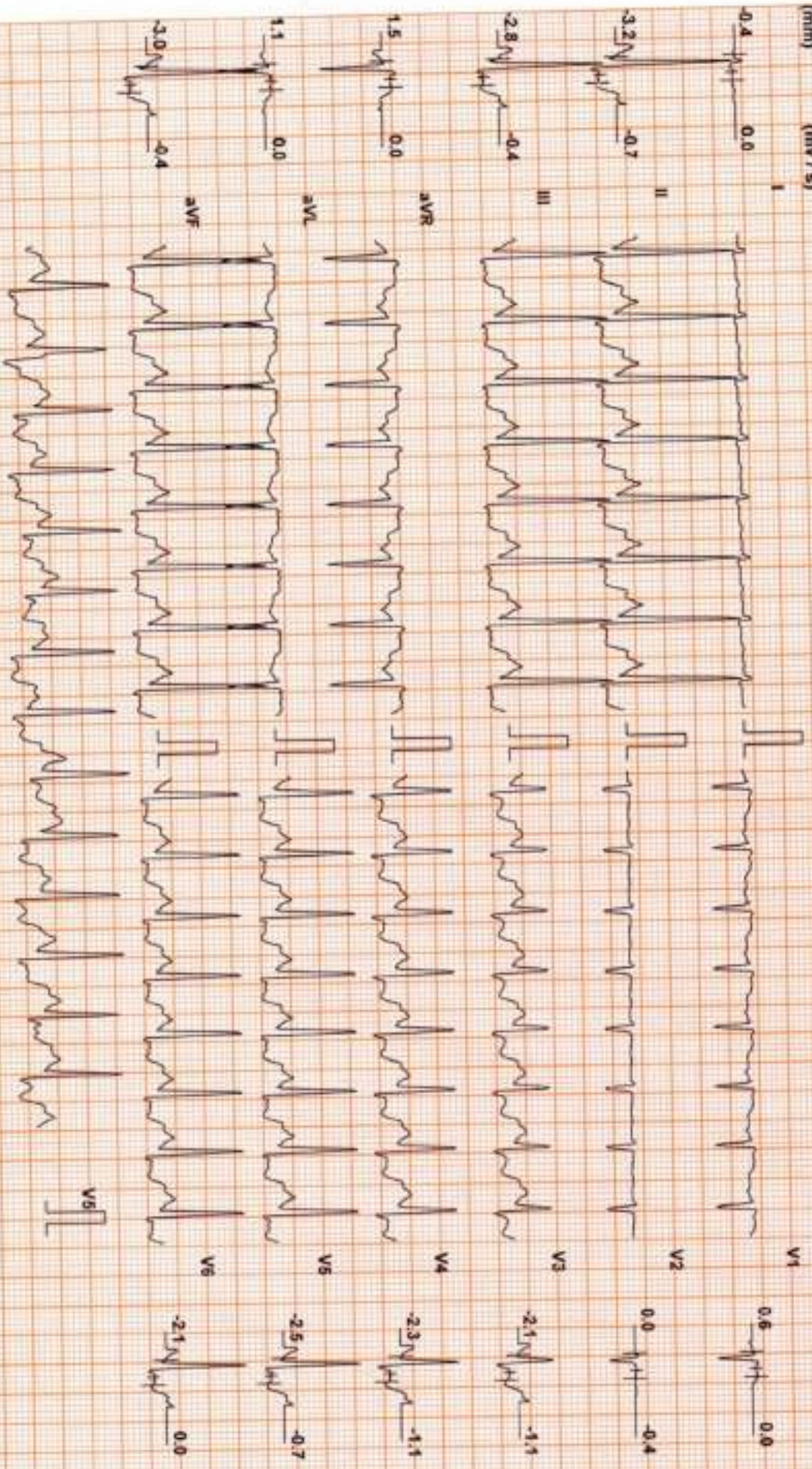


Chart Speed: 25 mm/sec

Filter: 36 Hz

Matrix Fil: ON

Amp: 10 mm

200 = R - 60 ms 2 = R - 60 ms

Puls J = J - 60 ms

Subur Diagnostics V 6.7

Linked Median



SUBURBAN DIAGNOSTICS

JYOTIRANI (48 F)

Protocol: Bruce

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

ID: 2402020859

Date: 20-Jan-24

Exec Time: 6 m 19 s

Stage Time: 0 m 19 s

HR: 151 bpm

Stage: Peak Ex

Speed: 3.4 mph

Grade: 14 %

THR: 145 bpm

B.P.: 210 / 90

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

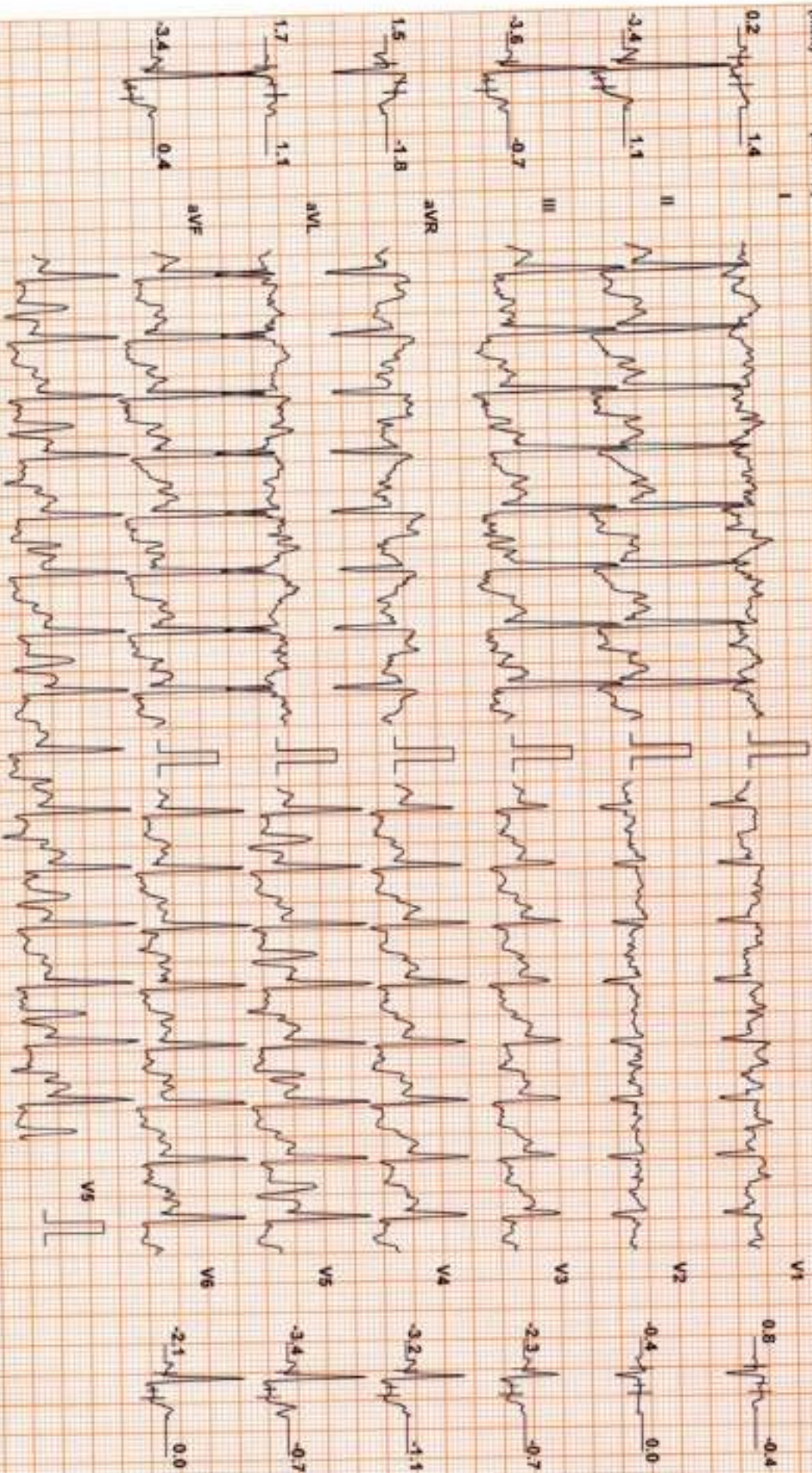


Chart Speed: 25 mm/sec

Filter: 35 Hz

Main: Filt: ON

Amp: 10 mm

100 = R - 40 ms

J = P + 60 ms

Paper J = J + 60 ms

Scale: Standard V47



SUBURBAN DIAGNOSTICS

Test Report

JYOTI RANI (49 F)

Protocol: Bruce

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

ID: 2402020659

Date: 20-Jan-24

Exec Time : 6 m 56 s Stage Time : 0 m 56 s **HR: 162 bpm**

Stage: Peak Ex

Speed: 3.4 mph

Grade: 14 %

(THR: 145 bpm)

B.P: 210 / 90

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

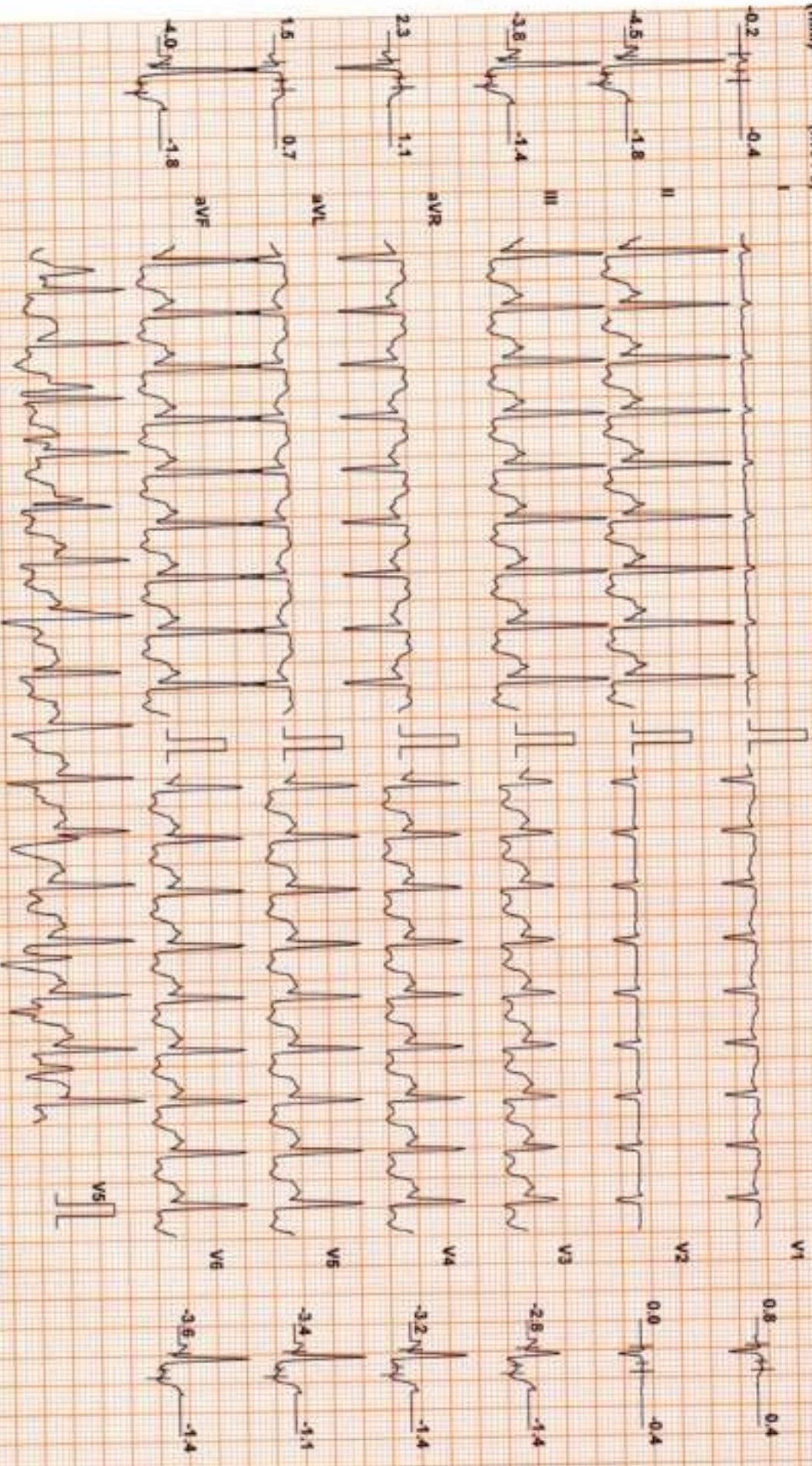


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

60 + R - 60 ms

J + R + 60 ms

Pos / - / + 60 ms

Stable Squan V.1.1

Linked Median



SUBURBAN DIAGNOSTICS

JYOTI RANI (48 F)

Protocol: Bruce

ID: 2402020659

Date: 20-Jan-24

Exec Time : 7 m 2 s

Stage Time : 0 m 29 s

HR: 158 bpm

Stage: Recovery(1)

Speed: 1 mph

Grade: 0 %

(THR: 145 bpm)

B.P: 190 / 90

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

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

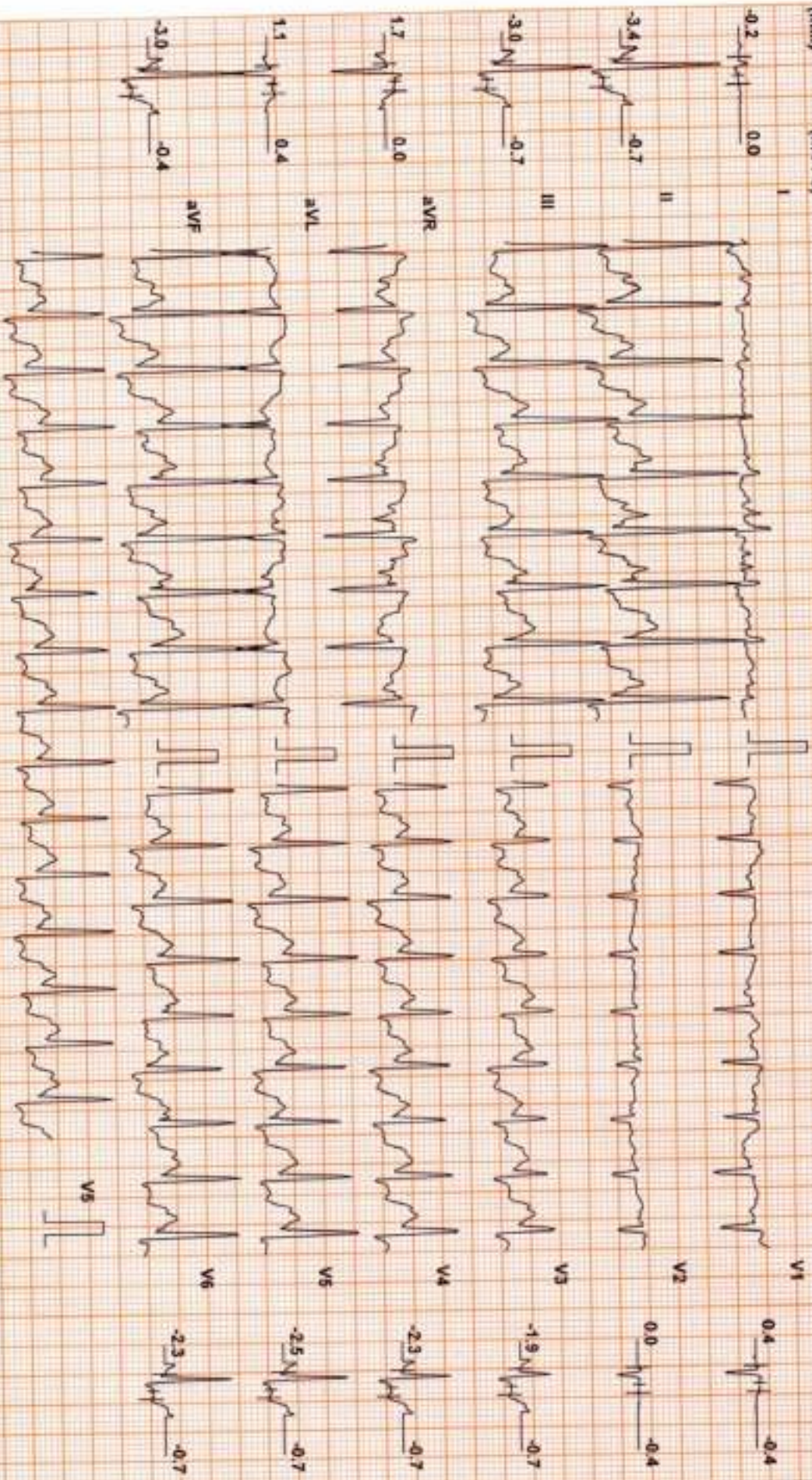


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

100 = R - 60 mm

J = R + 60 mm

Post J = J + 60 mm

Scale: Standard V x 1



SUBURBAN DIAGNOSTICS

Test Report

JYOTI RANI (49 F)

ID: 2402020656 Date: 20-Jan-24 Exec Time : 7 m 2 s Stage Time : 0 m 54 s HR: 145 bpm

Protocol: Bruce

Stage: Recovery(1) Speed: 1 mph Grade: 0 % (THR: 145 bpm) B.P.: 190 / 90

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

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

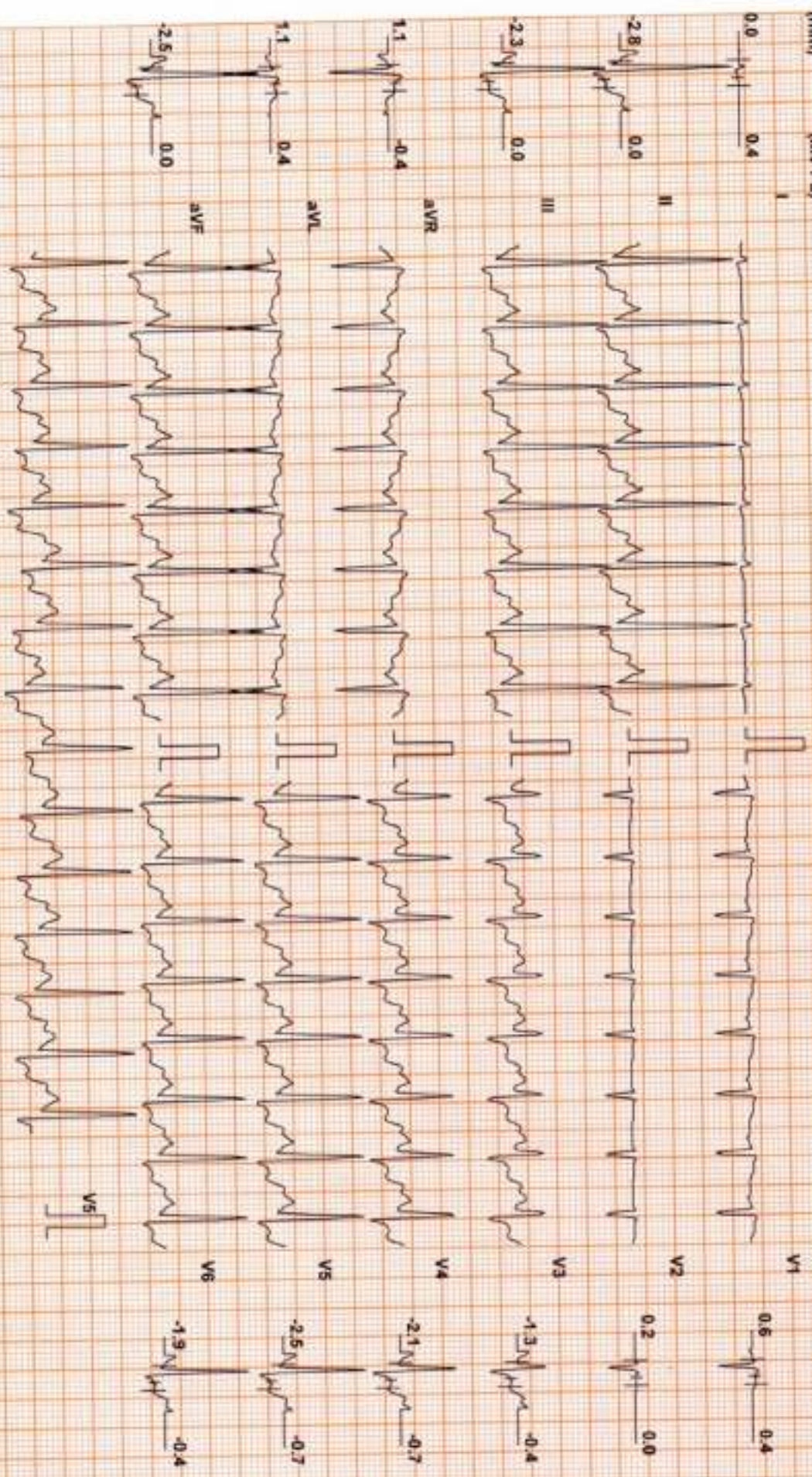


Chart Speed: 25 mm/sec
Scale: Standard V4.7

Filter: 35 Hz

Main: Fil: ON

Amp: 10 mm

60 - R - 60 ms 1 - R - 50 ms

Linked Median



SUBURBAN DIAGNOSTICS

JYOTI RANI (48 F)

Protocol: Bruce

ID: 2402020859

Date: 20-Jan-24

Exec Time : 7 m 2 s

Stage Time : 0 m 35 s **HR: 115 bpm**

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 145 bpm)

B.P: 170/90

ST Level (mm)

ST Slope (mV/s)

ST Level (mm)

ST Slope (mV/s)

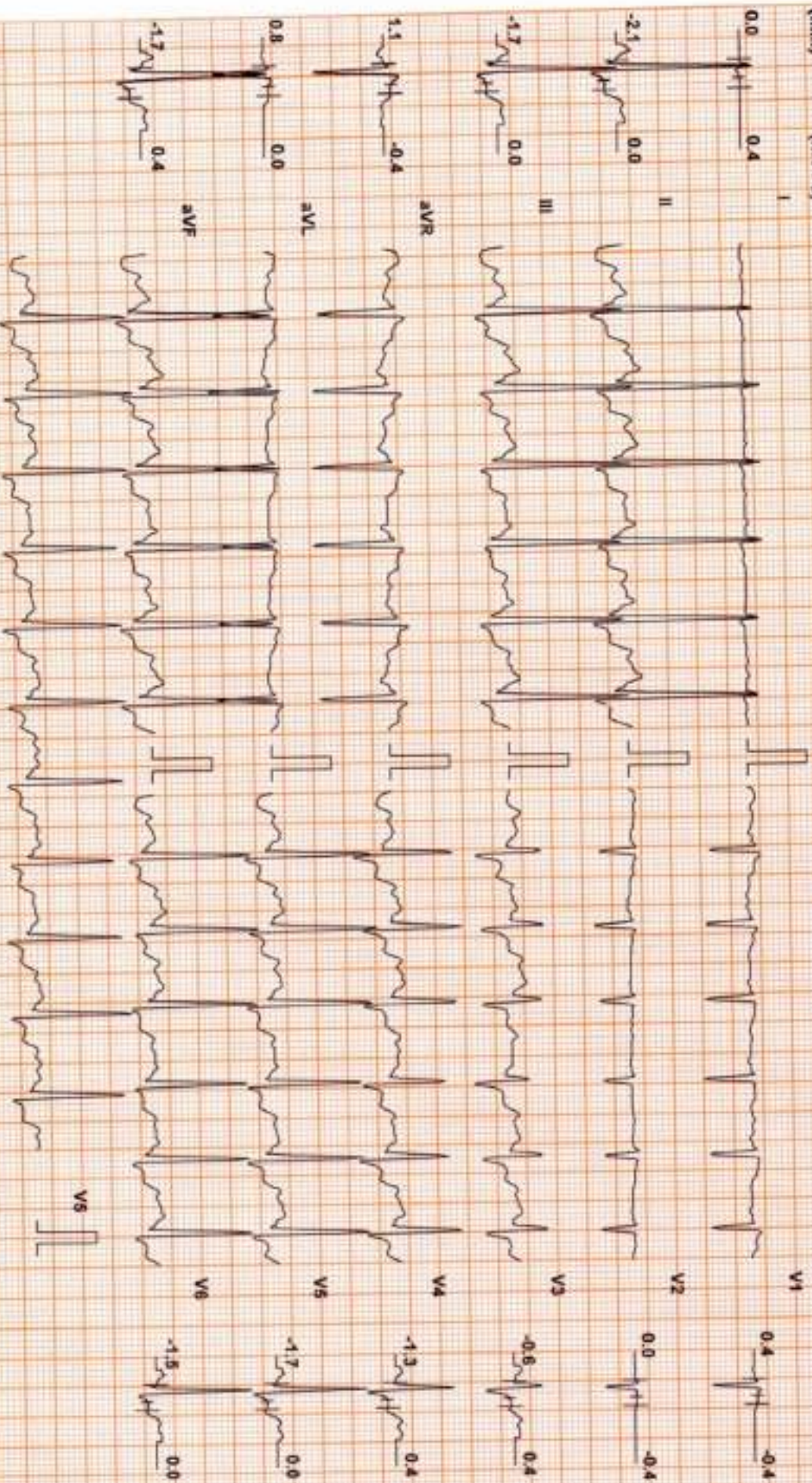


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

100 μ R - 60 mm

1 μ - R + 50 mm

Post: 1 - J + 60 mm

Scale: Standard V4.7



SUBURBAN DIAGNOSTICS

Test Report

JYOTI RANI (49 F)

ID: 2402020859 Date: 20-Jan-24 Exec Time : 7 m 2 s Stage Time : 0 m 54 s HR: 106 bpm

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 145 bpm)

B.P.: 170 / 90

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

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

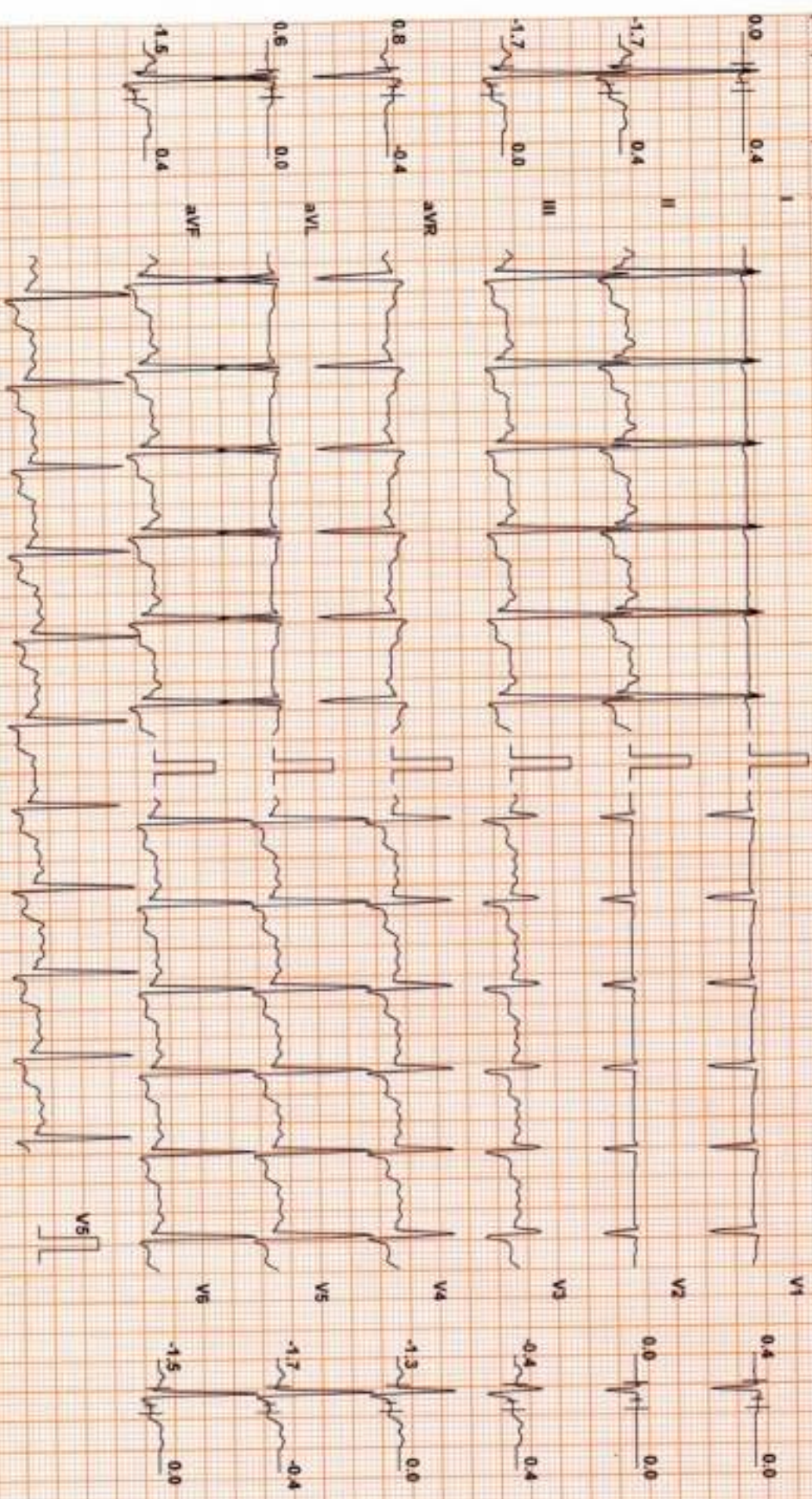


Chart Speed: 25 mm/sec
Scriber Speed: V4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

40 - R - 60 ms J - R + 60 ms

Post J = J + 60 ms

Linked Median



SUBURBAN DIAGNOSTICS

JYOTI RANI (48 F)

Protocol: Bruce

ID: 2402020659

Date: 20-Jan-24

Exec Time: 7 m 2 s

Stage Time: 0 m 53 s **HR: 102 bpm**

Stage: Recovery(3)

Speed: 0 mph

Grade: 0%

(THR: 145 bpm)

B.P.: 150 / 90

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

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

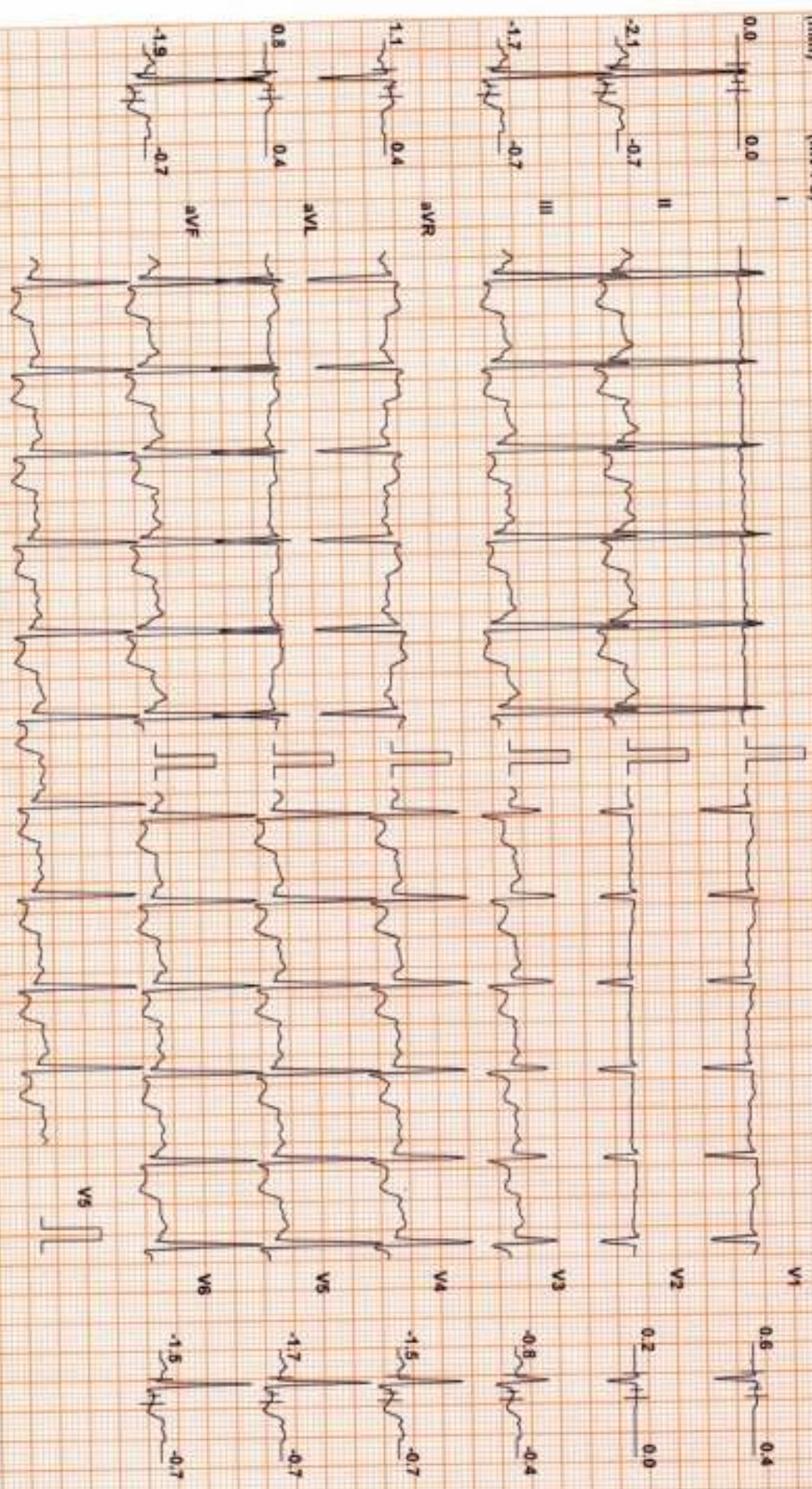


Chart Speed: 25 mm/sec
Scale: Standard V & T

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

300 = R - 60 ms

1 = R + 60 ms

Paper 1 = 1 + 60 ms



SUBURBAN DIAGNOSTICS

Test Report

JYOTI RANI (49 F)

ID: 2402020659

Date: 20-Jan-24

Exec Time : 7 m 2 s

Stage Time : 0 m 54 s **HR: 100 bpm**

Protocol: Bruce

Stage: Recovery(3)

Speed: 0 mph

Grade: 0 %

(THR: 146 bpm)

B.P: 150 / 90

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

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

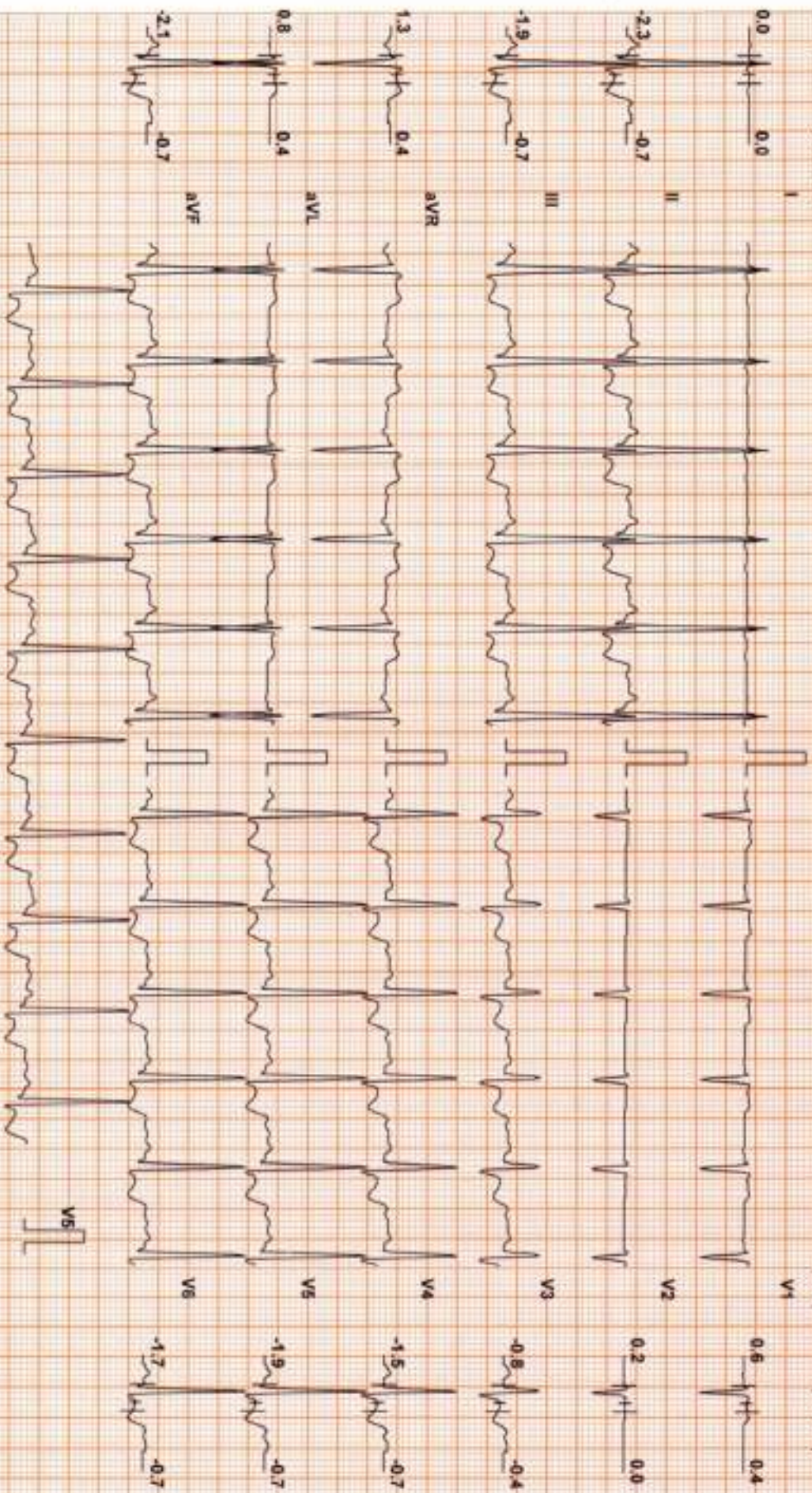


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

60 - R - 60 ms

J - R - 80 ms

Pur J - J - 80 ms

Schier Standard V4.7

Linked Median



SUBURBAN DIAGNOSTICS

JYOTI RANI (48 F)

Protocol: Bruce

ID: 2402020659

Date: 20-Jan-24

Exec Time : 7 m 2 s

Stage Time : 0 m 53 s **HR: 95 bpm**

Stage: Recovery(4)

Speed: 0 mph

Grade: 0 %

(THR: 145 bpm)

B.P: 140 / 90

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

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

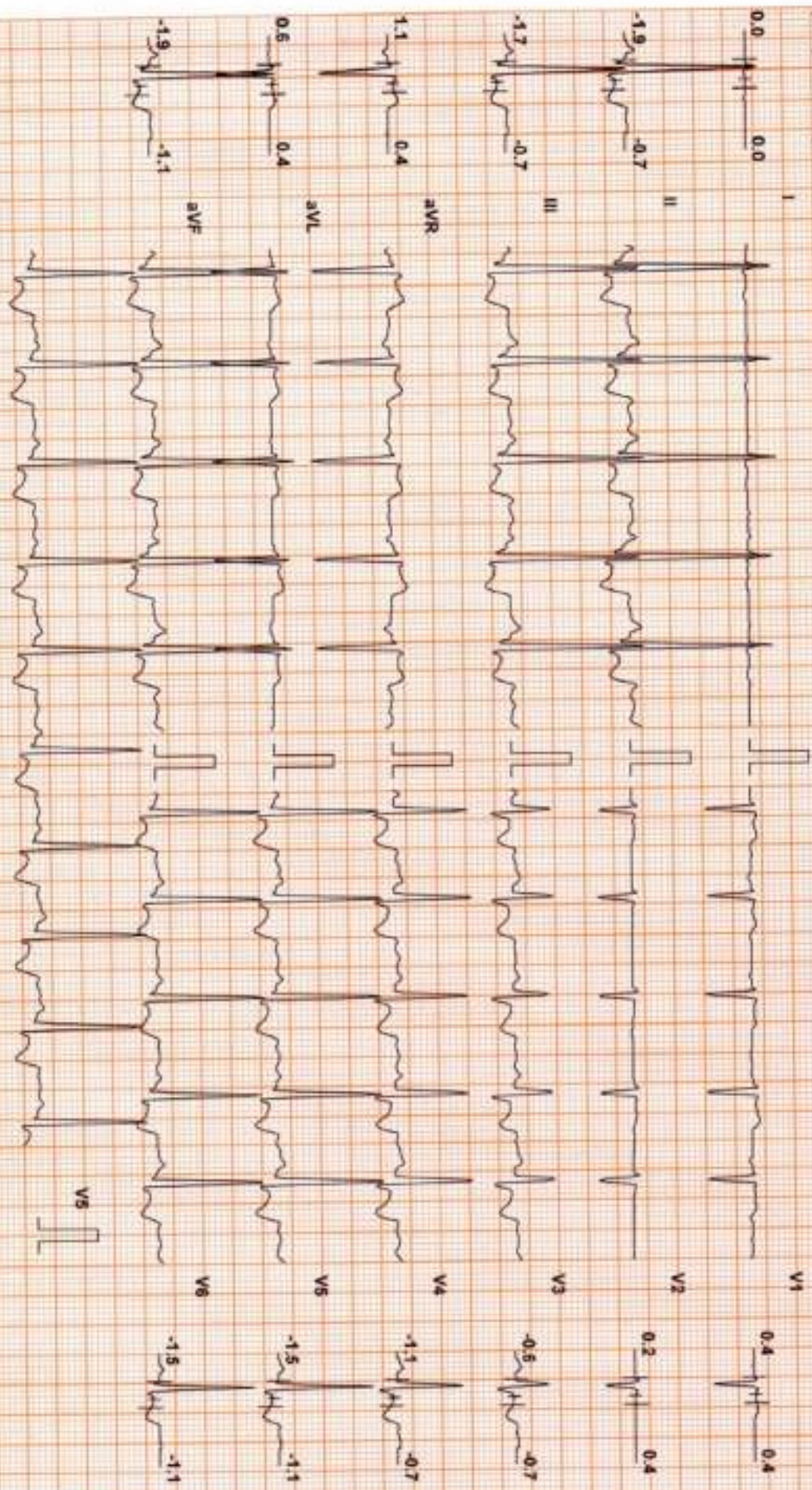


Chart Speed: 25 mm/sec
Scale: Standard V 1

Filter: 35 Hz

Main: Filtr. ON

Amp: 10 mm

RR = R - 60 ms

J = S - 60 ms

Post T = J + 60 ms



JYOTIRANI (49 F)

SUBURBAN DIAGNOSTICS

Test Report

Protocol: Bruce

ID: 2402020659

Date: 20-Jan-24

Exec Time : 7 m 2 s

Stage Time : 0 m 54 s HR: 94 bpm

Stage: Recovery(4)

Speed: 0 mph

Grade: 0 %

(THR: 145 bpm)

B.P.: 140 / 90

ST Level (mm)

ST Slope (mV/s)

ST Level (mm)

ST Slope (mV/s)

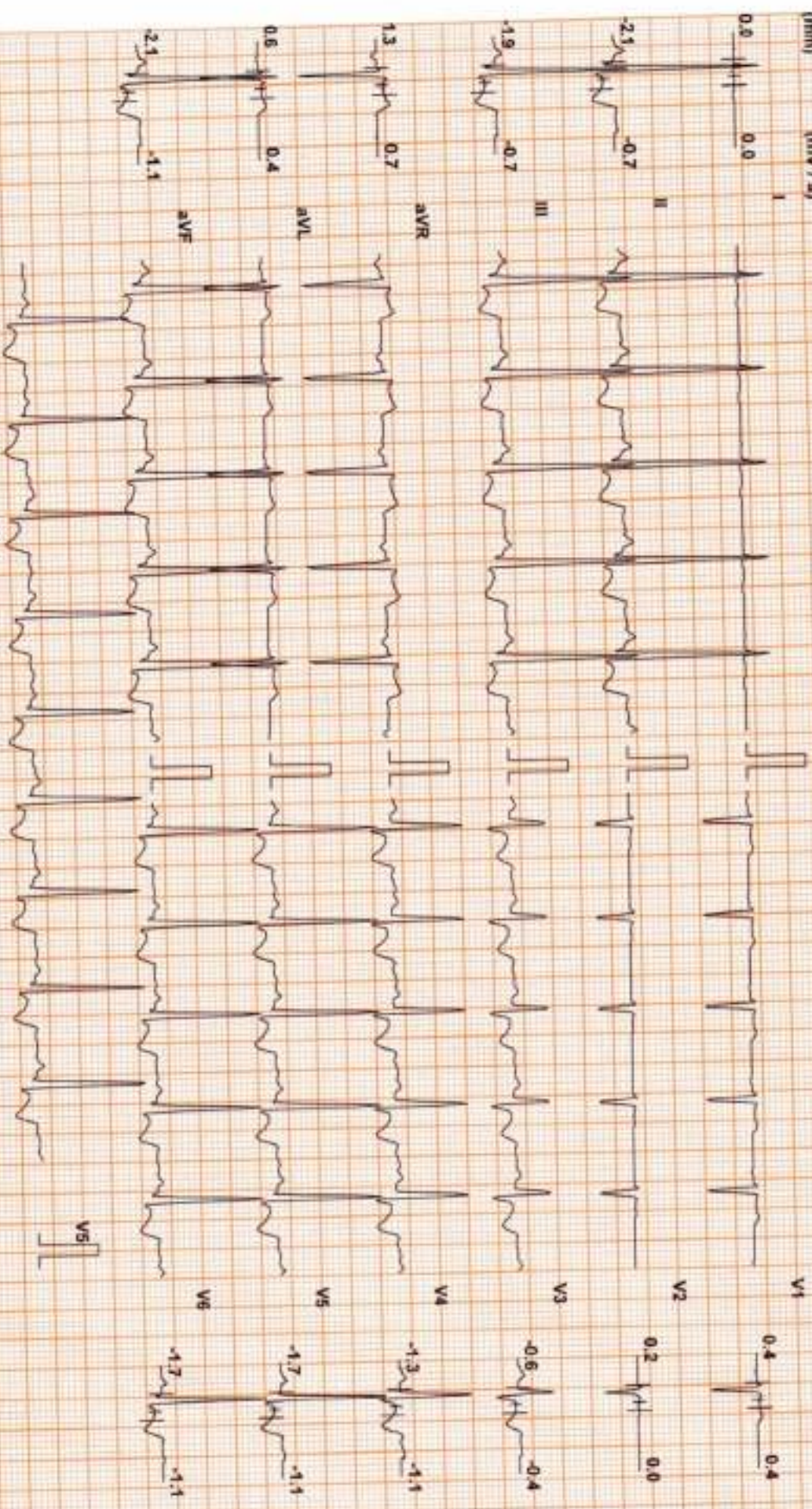


Chart Speed: 25 mm/sec

Filter: 35 Hz

Maine Fil: ON

Amp: 10 mm

50 = R - 60 ms

7 = R - 60 ms

Post V = J + 60 ms

Scale/Standard V4.7

Linked Median

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2402020659
Name : MRS. JYOTI RANI
Age / Gender : 49 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 20-Jan-2024 / 09:15
Reported : 20-Jan-2024 / 13:50

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

CBC (Complete Blood Count), Blood

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
RBC PARAMETERS			
Haemoglobin	12.5	12.0-15.0 g/dL	Spectrophotometric
RBC	4.72	3.8-4.8 mil/cmm	Elect. Impedance
PCV	40.4	36-46 %	Calculated
MCV	85.6	80-100 fl	Measured
MCH	26.4	27-32 pg	Calculated
MCHC	30.9	31.5-34.5 g/dL	Calculated
RDW	17.1	11.6-14.0 %	Calculated
WBC PARAMETERS			
WBC Total Count	10420	4000-10000 /cmm	Elect. Impedance
WBC DIFFERENTIAL AND ABSOLUTE COUNTS			
Lymphocytes	18.2	20-40 %	
Absolute Lymphocytes	1896.4	1000-3000 /cmm	Calculated
Monocytes	5.9	2-10 %	
Absolute Monocytes	614.8	200-1000 /cmm	Calculated
Neutrophils	58.2	40-80 %	
Absolute Neutrophils	6064.4	2000-7000 /cmm	Calculated
Eosinophils	16.1	1-6 %	
Absolute Eosinophils	1677.6	20-500 /cmm	Calculated
Basophils	1.6	0.1-2 %	
Absolute Basophils	166.7	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
PLATELET PARAMETERS			
Platelet Count	126000	150000-400000 /cmm	Elect. Impedance
MPV	13.5	6-11 fl	Measured
PDW	35.3	11-18 %	Calculated
RBC MORPHOLOGY			
Hypochromia	Mild		
Microcytosis	-		

Authenticity Check



Use a QR Code Scanner Application To Scan the Code

CID : 2402020659
Name : MRS. JYOTI RANI
Age / Gender : 49 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 20-Jan-2024 / 09:15
Reported : 20-Jan-2024 / 12:36

Macrocytosis	-
Anisocytosis	Mild
Poikilocytosis	Mild
Polychromasia	-
Target Cells	-
Basophilic Stippling	-
Normoblasts	-
Others	Elliptocytes-occasional
WBC MORPHOLOGY	-
PLATELET MORPHOLOGY	Megaplatelets seen on smear
COMMENT	Eosinophilia

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR 23 2-20 mm at 1 hr. Sedimentation

Clinical Significance: The erythrocyte sedimentation rate (ESR), also called a sedimentation rate is the rate red blood cells sediment in a period of time.

Interpretation:

Factors that increase ESR: Old age, Pregnancy, Anemia

Factors that decrease ESR: Extreme leukocytosis, Polycythemia, Red cell abnormalities- Sickle cell disease

Limitations:

- It is a non-specific measure of inflammation.
- The use of the ESR as a screening test in asymptomatic persons is limited by its low sensitivity and specificity.

Reflex Test: C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.

Reference:

- Pack insert
- Brigden ML. Clinical utility of the erythrocyte sedimentation rate. American family physician. 1999 Oct 1;60(5):1443-50.

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



J. Thakker

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

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2402020659
Name : MRS. JYOTI RANI
Age / Gender : 49 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 20-Jan-2024 / 09:15
Reported : 20-Jan-2024 / 16:19

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	120.2	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: > / = 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	151.8	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: > / = 200 mg/dl	Hexokinase
Urine Sugar (Fasting)	++	Absent	
Urine Ketones (Fasting)	Absent	Absent	

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



J Thakker

Dr. JYOTI THAKKER
M.D. (PATH), DPB
Pathologist and AVP(Medical Services)

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2402020659
Name : MRS. JYOTI RANI
Age / Gender : 49 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 20-Jan-2024 / 09:15
Reported : 20-Jan-2024 / 15:56

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
BLOOD UREA, Serum	24.2	12.8-42.8 mg/dl	Kinetic
BUN, Serum	11.3	6-20 mg/dl	Calculated
CREATININE, Serum	0.65	0.51-0.95 mg/dl	Enzymatic
eGFR, Serum	108	(ml/min/1.73sqm) Normal or High: Above 90 Mild decrease: 60-89 Mild to moderate decrease: 45-59 Moderate to severe decrease: 30-44 Severe decrease: 15-29 Kidney failure: <15	Calculated

Note: eGFR estimation is calculated using 2021 CKD-EPI GFR equation w.e.f 16-08-2023

TOTAL PROTEINS, Serum	7.3	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.4	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.9	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.5	1 - 2	Calculated
URIC ACID, Serum	3.1	2.4-5.7 mg/dl	Enzymatic
PHOSPHORUS, Serum	4.5	2.7-4.5 mg/dl	Molybdate UV
CALCIUM, Serum	9.2	8.6-10.0 mg/dl	N-BAPTA
SODIUM, Serum	143	135-148 mmol/l	ISE
POTASSIUM, Serum	4.8	3.5-5.3 mmol/l	ISE
CHLORIDE, Serum	103	98-107 mmol/l	ISE

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



J. Thakker

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

CID : 2402020659
Name : MRS. JYOTI RANI
Age / Gender : 49 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)



Use a QR Code Scanner Application To Scan the Code

Collected : 20-Jan-2024 / 09:15
Reported : 20-Jan-2024 / 13:47

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT

GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	6.9	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	151.3	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, Wailach's interpretation of diagnostic tests 10th edition.

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



J. Thakker

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

Authenticity Check



Use a QR Code Scanner Application To Scan the Code

CID : 2402020659
Name : MRS. JYOTI RANI
Age / Gender : 49 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 20-Jan-2024 / 09:15
Reported : 20-Jan-2024 / 19:09

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
EXAMINATION OF FAECES

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Colour	Brown	Brown	-
Form and Consistency	Semi Solid	Semi Solid	-
Mucus	Absent	Absent	-
Blood	Absent	Absent	-
CHEMICAL EXAMINATION			
Reaction (pH)	Acidic (6.5)	-	pH Indicator
Occult Blood	Absent	Absent	Guaiaac
MICROSCOPIC EXAMINATION			
Protozoa	Absent	Absent	-
Flagellates	Absent	Absent	-
Ciliates	Absent	Absent	-
Parasites	Absent	Absent	-
Macrophages	Absent	Absent	-
Mucus Strands	Absent	Absent	-
Fat Globules	Absent	Absent	-
RBC/hpf	Absent	Absent	-
WBC/hpf	Absent	Absent	-
Yeast Cells	Occasional	Absent	-
Undigested Particles	Present ++	-	-
Concentration Method (for ova)	No ova detected	Absent	-
Reducing Substances	-	Absent	Benedicts

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



J. Thakker

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

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2402020659
Name : MRS. JYOTI RANI
Age / Gender : 49 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 20-Jan-2024 / 09:15
Reported : 20-Jan-2024 / 14:06

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/TMT
URINE EXAMINATION REPORT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.005	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	50	-	-
CHEMICAL EXAMINATION			
Proteins	Absent	Absent	pH Indicator
Glucose	3+	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
MICROSCOPIC EXAMINATION			
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	6-8	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 inert

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



J. Thakker

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

Authenticity Check



Use a QR Code Scanner Application To Scan the Code

CID : 2402020659
Name : MRS. JYOTI RANI
Age / Gender : 49 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 20-Jan-2024 / 09:15
Reported : 20-Jan-2024 / 12:34

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

PARAMETER	RESULTS
ABO GROUP	O
Rh TYPING	POSITIVE

NOTE: Test performed by automated column agglutination technology (CAT) which is more sensitive than conventional methods.

Note: This sample is not tested for Bombay blood group.

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 Harming, 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 CPL, Andheri West
*** End Of Report ***



J. Thakker

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

CID : 2402020659
Name : MRS. JYOTI RANI
Age / Gender : 49 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)



Use a QR Code Scanner Application To Scan the Code

Collected : 20-Jan-2024 / 09:15
Reported : 20-Jan-2024 / 15:56

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	137.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	132.2	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	49.3	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	87.7	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	62.0	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	25.7	< / = 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	2.8	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	1.3	0-3.5 Ratio	Calculated

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



Thakker

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

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2402020659
Name : MRS. JYOTI RANI
Age / Gender : 49 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 20-Jan-2024 / 09:15
Reported : 20-Jan-2024 / 15:42

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Free T3, Serum	3.5	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	17.1	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	4.66	0.35-5.5 microIU/ml First Trimester: 0.1-2.5 Second Trimester: 0.2-3.0 Third Trimester: 0.3-3.0 mIU/ml	ECLIA

Authenticity Check



Use a QR Code Scanner Application To Scan the Code

CID : 2402020659
Name : MRS. JYOTI RANI
Age / Gender : 49 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 20-Jan-2024 / 09:15
Reported : 20-Jan-2024 / 15:42

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 upto 15 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 CPL, Andheri West
*** End Of Report ***



J. Thakker

Dr. JYOTI THAKKER
M.D. (PATH), DPB
Pathologist and AVP (Medical Services)

Authenticity Check



Use a QR Code Scanner Application To Scan the Code

CID : 2402020659
Name : MRS. JYOTI RANI
Age / Gender : 49 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 20-Jan-2024 / 09:15
Reported : 20-Jan-2024 / 15:56

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

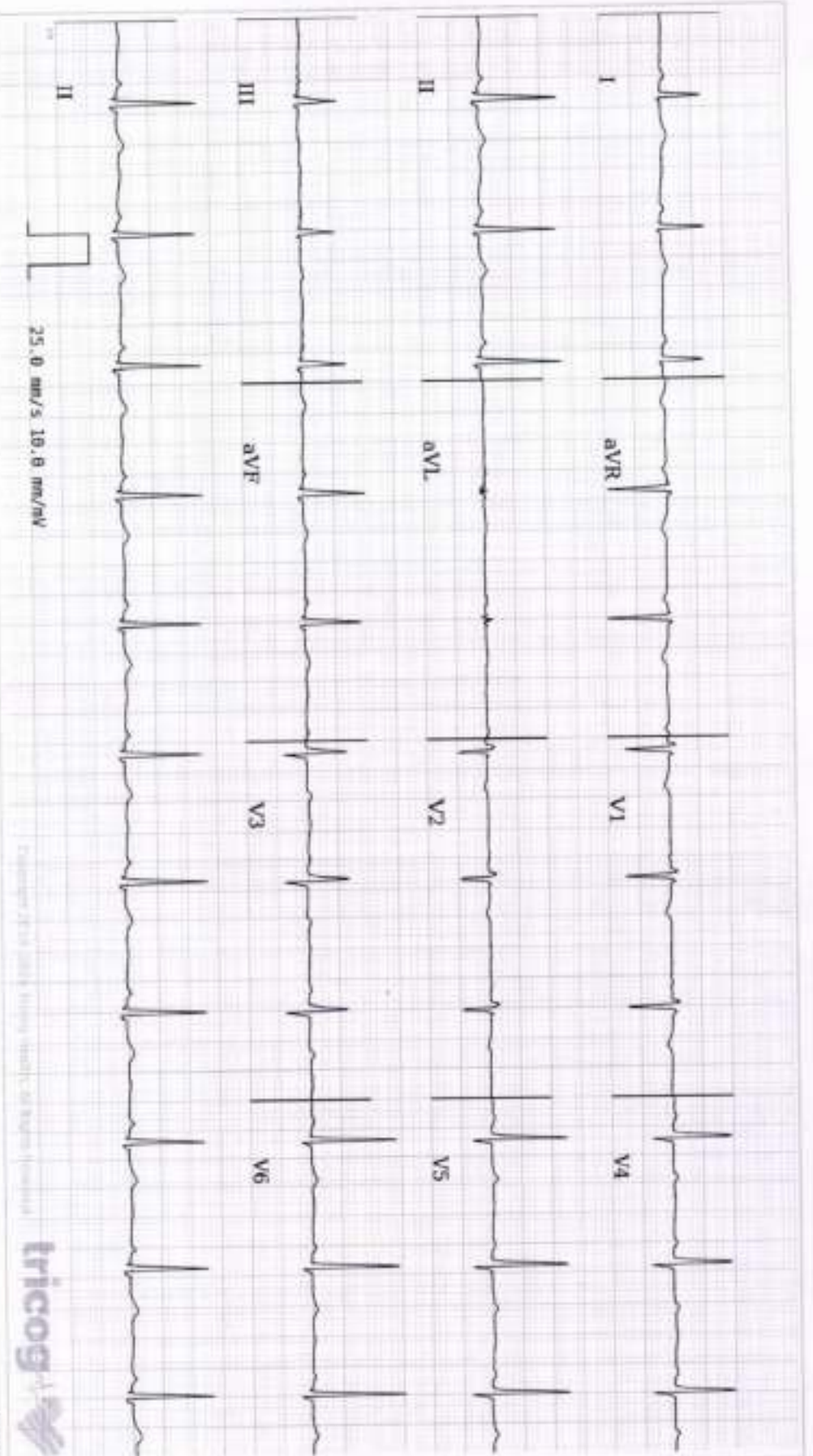
PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
BILIRUBIN (TOTAL), Serum	0.30	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.12	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.18	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.3	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.4	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.9	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.5	1 - 2	Calculated
SGOT (AST), Serum	19.3	5-32 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	21.6	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	13.2	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	111.2	35-105 U/L	Colorimetric

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



J. Thakker

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



Age **49** NA NA
years months days

Gender **Female**

Heart Rate **69bpm**

Patient Vitals

BP: **120/80 mmHg**

Weight: **NA**

Height: **NA**

Pulse: **NA**

SpO2: **NA**

Resp: **NA**

Others:

Measurements

QRSD: **88ms**

QT: **392ms**

QTcB: **420ms**

PR: **130ms**

P-R-T: **28° 59° 43°**

Sinus Rhythm, rsr' in V1 V2. Please correlate clinically.

REPORTED BY

DR. EASHU CHAWAN
MD, D.C., ABG, D. DIAGNOSTICS
Cardiologist & Diagnostician
20th Jan 2024

This document is a computer-generated report based on ECG data and should be read in conjunction with the patient's clinical history and physical examination. The accuracy of the data is dependent on the quality of the ECG recording. The information contained herein is for informational purposes only and should not be used for medical diagnosis or treatment. © 2024 Suburban Diagnostics. All rights reserved.

Authenticity Check
<<QRCode>>

CID : 2402020659
Name : Mrs JYOTI RANI
Age / Sex : 49 Years/Female
Ref. Dr :
Reg. Location : Andheri West (Main Center)
Reg. Date : 20-Jan-2024
Reported : 20-Jan-2024 / 11:15

Use a QR Code Scanner
Application To Scan the Code

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

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



Dr R K Bhandari
M D , DMRE
MMC REG NO. 34078

[Click here to view images <<ImageLink>>](#)

Page no 1 of 1