

CID# : 2208211070
Name : MR.JYOTI PRAKASH MALLIK
Age / Gender : 38 Years/Male
Consulting Dr. : -
Reg.Location : Andheri West (Main Centre)

SID# : 177805051563
Registered : 23-Mar-2022 / 09:27
Collected : 23-Mar-2022 / 09:27
Reported : 25-Mar-2022 / 10:36
Printed : 25-Mar-2022 / 16:11

- | | |
|------------------------------------------|----|
| 1) Hypertension: | NO |
| 2) IHD | NO |
| 3) Arrhythmia | NO |
| 4) Diabetes Mellitus | NO |
| 5) Tuberculosis | NO |
| 6) Asthama | NO |
| 7) Pulmonary Disease | NO |
| 8) Thyroid/ Endocrine disorders | NO |
| 9) Nervous disorders | NO |
| 10) GI system | NO |
| 11) Genital urinary disorder | NO |
| 12) Rheumatic joint diseases or symptoms | NO |
| 13) Blood disease or disorder | NO |
| 14) Cancer/lump growth/cyst | NO |
| 15) Congenital disease | NO |
| 16) Surgeries | NO |
| 17) Musculoskeletal System | NO |

PERSONAL HISTORY:

- | | |
|---------------|--------------|
| 1) Alcohol | Occasionally |
| 2) Smoking | NO |
| 3) Diet | Mixed |
| 4) Medication | NO |

*** End Of Report ***

Sangeeta Manwani

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

ADDRESS: 2nd Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343

For Feedback - customerservice@suburbandiagnosics.com | www.suburbandiagnosics.com



Use a QR Code Scanner
Application To Scan the Code

CID : 2208211070
Name : MR. JYOTI PRAKASH MALLIK
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 23-Mar-2022 / 09:26
Reported : 23-Mar-2022 / 13:16

MEDI ASSIST - BOB HC PACKAGE MALE

CBC (Complete Blood Count), Blood

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>RBC PARAMETERS</u>			
Haemoglobin	14.9	13.0-17.0 g/dL	Spectrophotometric
RBC	6.71	4.5-5.5 mil/cmm	Elect. Impedance
PCV	45.5	40-50 %	Measured
MCV	67.8	80-100 fl	Calculated
MCH	22.2	27-32 pg	Calculated
MCHC	32.8	31.5-34.5 g/dL	Calculated
RDW	16.4	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	7160	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	30.5	20-40 %	
Absolute Lymphocytes	2183.8	1000-3000 /cmm	Calculated
Monocytes	5.7	2-10 %	
Absolute Monocytes	408.1	200-1000 /cmm	Calculated
Neutrophils	57.9	40-80 %	
Absolute Neutrophils	4145.6	2000-7000 /cmm	Calculated
Eosinophils	5.7	1-6 %	
Absolute Eosinophils	408.1	20-500 /cmm	Calculated
Basophils	0.2	0.1-2 %	
Absolute Basophils	14.3	20-100 /cmm	Calculated
Immature Leukocytes	-		

WBC Differential Count by Absorbance & Impedance method/Microscopy.

PLATELET PARAMETERS

Platelet Count	263000	150000-400000 /cmm	Elect. Impedance
MPV	9.6	6-11 fl	Calculated
PDW	19.8	11-18 %	Calculated

RBC MORPHOLOGY

Hypochromia	+
Microcytosis	+



CID : 2208211070
Name : MR. JYOTI PRAKASH MALLIK
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Use a QR Code Scanner
Application To Scan the Code

Collected : 23-Mar-2022 / 09:26
Reported : 23-Mar-2022 / 11:15

Macrocytosis -
Anisocytosis Mild
Poikilocytosis Mild
Polychromasia -
Target Cells -
Basophilic Stippling -
Normoblasts -
Others Elliptocytes-occasional
WBC MORPHOLOGY -
PLATELET MORPHOLOGY -
COMMENT -

Features suggest thalassemia trait
Advice : Hemoglobin studies by HPLC, reticulocyte count.

Specimen: EDTA Whole Blood

ESR, EDTA WB 6 2-15 mm at 1 hr. Westergren

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



Jyoti Prakash
Dr. AMAR DASGUPTA, MD, PhD
Consultant Hematopathologist
Director - Medical Services

Trupti Shetty
Dr. TRUPTI SHETTY
M. D. (PATH)
Pathologist

ADDRESS: 2nd Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343

For Feedback - customerservice@suburbandiagnosics.com | www.suburbandiagnosics.com



CID : 2208211070
Name : MR. JYOTI PRAKASH MALLIK
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Use a QR Code Scanner
Application To Scan the Code

Collected : 23-Mar-2022 / 09:26
Reported : 23-Mar-2022 / 11:27

MEDI ASSIST - BOB HC PACKAGE MALE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	213.3	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	311.6	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BLOOD UREA, Serum	15.2	12.8-42.8 mg/dl	Kinetic
BUN, Serum	7.1	6-20 mg/dl	Calculated
CREATININE, Serum	0.71	0.67-1.17 mg/dl	Enzymatic
eGFR, Serum	132	>60 ml/min/1.73sqm	Calculated
URIC ACID, Serum	4.1	3.5-7.2 mg/dl	Enzymatic

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



MC-2111

Anupa

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



CID : 2208211070
Name : MR. JYOTI PRAKASH MALLIK
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 23-Mar-2022 / 09:26
Reported : 23-Mar-2022 / 13:10

Use a QR Code Scanner
Application To Scan the Code

MEDI ASSIST - BOB HC PACKAGE MALE
GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	12.6	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	314.9	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 CPL, Andheri West
*** End Of Report ***



M. Sharma
Dr. MEGHA SHARMA
M.D. (PATH), DNB (PATH)
Pathologist



CID : 2208211070
Name : MR. JYOTI PRAKASH MALLIK
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 23-Mar-2022 / 09:26
Reported : 23-Mar-2022 / 11:27

Use a QR Code Scanner
Application To Scan the Code

**MEDI ASSIST - BOB HC PACKAGE MALE
PROSTATE SPECIFIC ANTIGEN (PSA)**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
TOTAL PSA, Serum	0.407	0.03-2.5 ng/ml	ECLIA

Clinical Significance:

- PSA is detected in the serum of males with normal, benign hyper-plastic, and malignant prostate tissue.
- Monitoring patients with a history of prostate cancer as an early indicator of recurrence and response to treatment.
- Prostate cancer screening 4. The percentage of Free PSA (FPSA) in serum is described as being significantly higher in patients with BPH than in patients with prostate cancer. 5. Calculation of % free PSA (ie. FPSA/TPSA x 100), has been suggested as way of improving the differentiation of BPH and Prostate cancer.

Interpretation:

Increased In- Prostate diseases, Cancer, Prostatitis, Benign prostatic hyperplasia, Prostatic ischemia, Acute urinary retention, Manipulations like Prostatic massage, Cystoscopy, Needle biopsy, Transurethral resection, Digital rectal examination, Radiation therapy, Indwelling catheter, Vigorous bicycle exercise, Drugs (e.g., testosterone), Physiologic fluctuations. Also found in small amounts in other cancers (sweat and salivary glands, breast, colon, lung, ovary) and in Skene glands of female urethra and in term placenta, Acute renal failure, Acute myocardial infarction.

Decreased In- Ejaculation within 24-48 hours, Castration, Antiandrogen drugs (e.g., finasteride), Radiation therapy, Prostatectomy, PSA falls 17% in 3 days after lying in hospital, Artfactual (e.g., improper specimen collection; very high PSA levels). Finasteride (5- α -reductase inhibitor) reduces PSA by 50% after 6 months in men without cancer.

Reflex Tests: % FREE PSA , USG Prostate

Limitations:

tPSA values determined on patient samples by different testing procedures cannot be directly compared with one another and could be the cause of erroneous medical interpretations. If there is a change in the tPSA assay procedure used while monitoring therapy, then the tPSA values obtained upon changing over to the new procedure must be confirmed by parallel measurements with both methods. Immediate PSA testing following digital rectal examination, ejaculation, prostatic massage, indwelling catheterization, ultrasonography and needle biopsy of prostate is not recommended as they falsely elevate levels.

Reference:

- Wallach's Interpretation of diagnostic tests, 10th Edition
- Pack insert

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



MC-2111

Anupa Dixit

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



CID : 2208211070
Name : MR. JYOTI PRAKASH MALLIK
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 23-Mar-2022 / 09:26
Reported : 23-Mar-2022 / 15:27

Use a QR Code Scanner
Application To Scan the Code

MEDI ASSIST - BOB HC PACKAGE MALE
URINE EXAMINATION REPORT

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>PHYSICAL EXAMINATION</u>			
Color	Yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.025	1.001-1.030	Chemical Indicator
Transparency	Slight hazy	Clear	-
Volume (ml)	15	-	-
<u>CHEMICAL EXAMINATION</u>			
Proteins	Trace	Absent	pH Indicator
Glucose	3+	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Trace	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
<u>MICROSCOPIC EXAMINATION</u>			
Leukocytes(Pus cells)/hpf	6-8	0-5/hpf	
Red Blood Cells / hpf	Occasional	0-2/hpf	
Epithelial Cells / hpf	1-2		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	8-10	Less than 20/hpf	
Others	-		

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



Shashi D

Dr. SHASHIKANT DIGHADE
M.D. (PATH)
Pathologist



CID : 2208211070
Name : MR.JYOTI PRAKASH MALLIK
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 23-Mar-2022 / 09:26
Reported : 23-Mar-2022 / 13:10

Use a QR Code Scanner
Application To Scan the Code

MEDI ASSIST - BOB HC PACKAGE MALE
BLOOD GROUPING & Rh TYPING

PARAMETER	RESULTS
ABO GROUP	B
Rh TYPING	POSITIVE

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

Specimen: EDTA Whole Blood and/or serum

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

Limitations:

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

References:

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

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



MC-2111

M. Sharma
Dr.MEGHA SHARMA
M.D. (PATH), DNB (PATH)
Pathologist



CID : 2208211070
Name : MR. JYOTI PRAKASH MALLIK
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Use a QR Code Scanner
Application To Scan the Code

Collected : 23-Mar-2022 / 09:26
Reported : 23-Mar-2022 / 13:10

MEDI ASSIST - BOB HC PACKAGE MALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	230.2	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	Enzymatic
TRIGLYCERIDES, Serum	232.4	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high: >/=500 mg/dl	Enzymatic
HDL CHOLESTEROL, Serum	37.7	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Enzymatic
NON HDL CHOLESTEROL, Serum	192.5	Desirable: <130 mg/dl Borderline-high: 130 - 159 mg/dl High: 160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	161.2	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	31.3	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	6.1	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	4.3	0-3.5 Ratio	Calculated

Note : LDL test is performed by direct measurement.

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

*** End Of Report ***



MC-2111

M. Sharma
Dr. MEGHA SHARMA
M.D. (PATH), DNB (PATH)
Pathologist



CID : 2208211070
Name : MR. JYOTI PRAKASH MALLIK
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 23-Mar-2022 / 09:26
Reported : 23-Mar-2022 / 11:27

Use a QR Code Scanner
Application To Scan the Code

MEDI ASSIST - BOB HC PACKAGE MALE
THYROID FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Free T3, Serum	4.7	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	15.3	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	4.03	0.35-5.5 microIU/ml	ECLIA

Interpretation:

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

Clinical Significance:

- 1)TSH Values between 5.5 to 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: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.

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 ***



MC-2111

Anupa

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



CID : 2208211070
Name : MR.JYOTI PRAKASH MALLIK
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 23-Mar-2022 / 09:26
Reported : 23-Mar-2022 / 11:48

Use a QR Code Scanner
Application To Scan the Code

MEDI ASSIST - BOB HC PACKAGE MALE
LIVER FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
BILIRUBIN (TOTAL), Serum	0.51	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.23	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.28	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.9	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.8	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.1	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	2.3	1 - 2	Calculated
SGOT (AST), Serum	15.1	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	21.7	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	52.9	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	64.0	40-130 U/L	Colorimetric

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



MC-2111

M. Sharma
Dr.MEGHA SHARMA
M.D. (PATH), DNB (PATH)
Pathologist

CID#	: 2208211070	SID#	: 177805051563
Name	: MR.JYOTI PRAKASH MALLIK	Registered	: 23-Mar-2022 / 09:27
Age / Gender	: 38 Years/Male	Collected	: 23-Mar-2022 / 09:27
Consulting Dr.	: -	Reported	: 23-Mar-2022 / 13:18
Reg.Location	: Andheri West (Main Centre)	Printed	: 24-Mar-2022 / 12:59

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

No hilar abnormality is seen.

The cardiac size and shape are within normal limits.

The aorta shows normal radiological features.

The trachea is central.

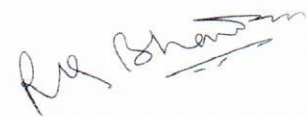
The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

*** End Of Report ***



Dr.R K BHANDARI
M.D.,D.M.R.E
CONSULTANT RADIOLOGIST

ADDRESS: 2nd Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343

For Feedback - customerservice@suburbandiagnosics.com | www.suburbandiagnosics.com

Patient's Name : JYOTI PRAKASH MALLIK

Age : 38 YRS / MALE

Requesting Doctor : --

Date : 23.03.2022

CID. No : 2208211070

2D-ECHO & COLOUR DOPPLER REPORT

Structurally Normal : MV / AV / TV / PV.
No significant valvular stenosis.

Trivial Mitral Regurgitation , Trivial Aortic Regurgitation
Trivial Pulmonary Regurgitation ,

Trivial Tricuspid regurgitation. No Pulmonary arterial hypertension.
PASP by TRjet vel.method = 16 mm Hg.

LV / LA / RA / RV - Normal in dimension.
IAS / IVS is Intact.

No Left Ventricular Diastolic Dysfunction [LVDD].
No doppler evidence of raised LVEDP

No regional wall abnormality. No thinning / scarring / dyskinesia of LV wall
noted. Normal LV systolic function. LVEF = 60 % by visual estimation.

No e/o thrombus in LA / LV.
No e/o Pericardial effusion.

IVC normal in dimension with good inspiratory collapse.
Normal RV systolic function (by TAPSE)

Impression:

**NORMAL LV SYSTOLIC FUNCTION, LVEF = 60 % ,
NO RWMA, NO PAH, NO LVDD,
NO LV HYPERTROPHY.**

ADDRESS: 2nd Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343

For Feedback - customerservice@suburbandiagnosics.com | www.suburbandiagnosics.com

Patient Name : MR JYOTI PRAKASH MALLIK

Age : 38 Years / MALE

Ref Dr. : --

Date : 23.03.2022

CID. No : 2208211070

USG WHOLE ABDOMEN

LIVER: Liver is normal in size (14.5cm. cranio-caudal) and **shows bright 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 10.7 x 4.8cm. Left kidney measures 10.7 x 5.4cm. Both kidneys are normal in shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

SPLEEN: Spleen is normal in size (9.2cm.), shape and echotexture. No focal lesion is seen.

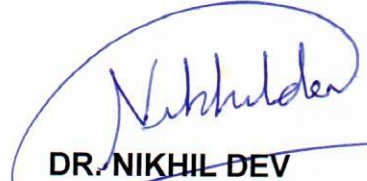
URINARY BLADDER: Urinary bladder is distended and normal. Wall thickness is within normal limits.

PROSTATE: Prostate measures 3.7 x 3.3 x 2.8cm. and prostatic weight is 18.7g. Median lobe does not show significant hypertrophy.

No free fluid or significant lymphadenopathy is seen.

IMPRESSION: Grade II fatty liver.

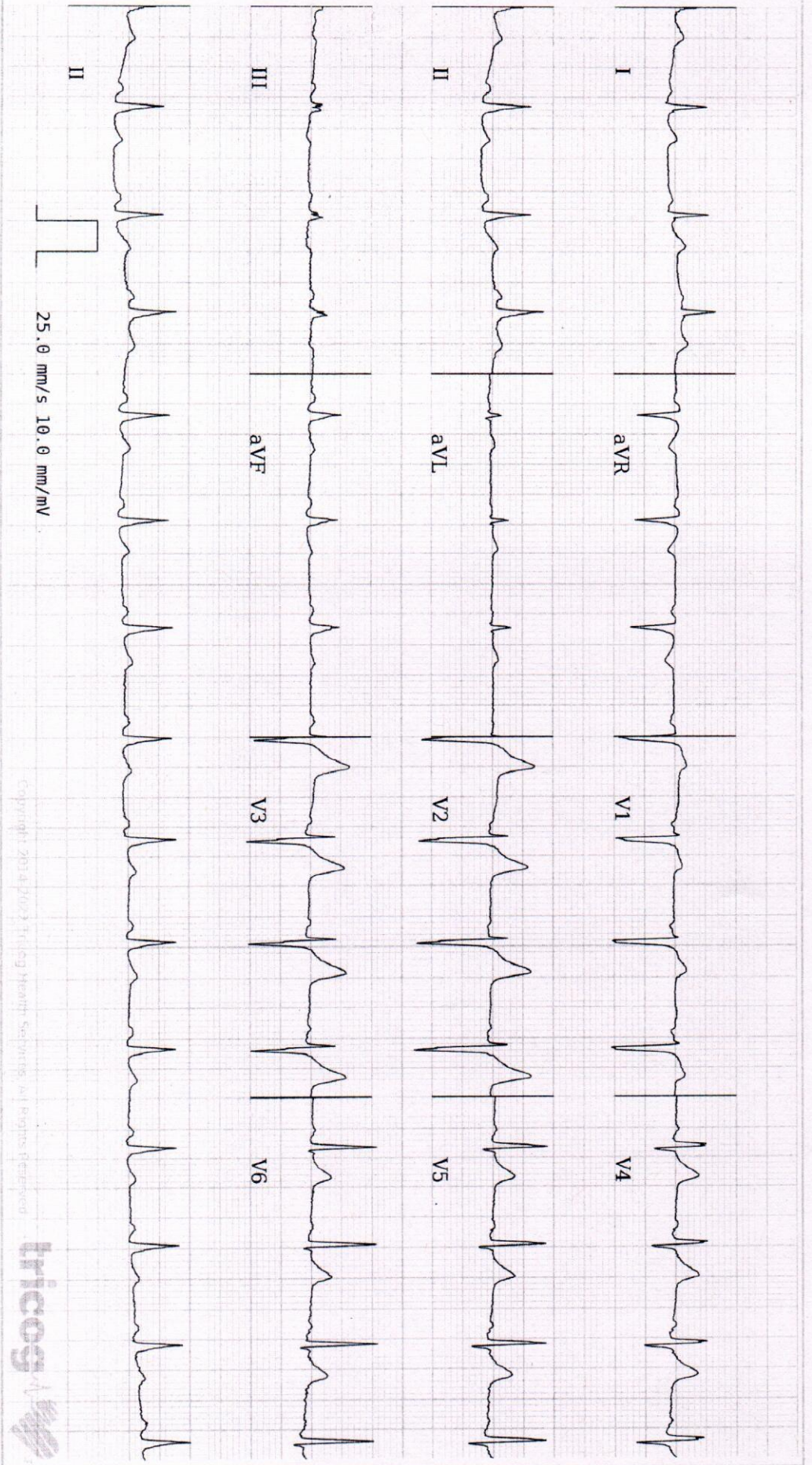
*** End of Report ***


DR. NIKHIL DEV
MD. RADIOLOGIST

Patient Name: JYOTI PRAKASH MALLIK

Date and Time: 23rd Mar 22 10:11 AM

Patient ID: 2208211070



25.0 mm/s 10.0 mm/mV

Copyright 2014 Philips Trading Health Services, All Rights Reserved



Age **38** **1** **19**
years months days

Gender **Male**

Heart Rate **88bpm**

Patient Vitals

BP: NA
Weight: NA
Height: NA
Pulse: NA
Spo2: NA
Resp: NA
Others:

Measurements

QSRD: 78ms
QT: 320ms
QTc: 387ms
PR: 118ms
P-R-T: 65° 45° 35°

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

REPORTED BY

DR RAVI CHAVAN
MD, D.CARD, D. DIABETES
Cardiologist & Diabetologist
2004/06/2468

Disclaimer: 1) Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, and results of other invasive and non-invasive tests. 2) Patient vitals are as entered by the clinician and not derived from the ECG.

SUBURBAN DIAGNOSTICS

Patient Details

Date: 23-Mar-22

Time: 12:25:57 PM

Name: JYOTI PRAKASH MALLIK ID: 2208211070

Age: 38 y

Sex: M

Height: 159 cms.

Weight: 64 Kg.

Clinical History: NONE

Medications: NONE

Test Details

Protocol: Bruce

Pr.MHR: 182 bpm

THR: 154 (85 % of Pr.MHR) bpm

Total Exec. Time: 6 m 40 s

Max. HR: 186 (102% of Pr.MHR) bpm

Max. Mets: 10.20

Max. BP: 180 / 80 mmHg

Max. BP x HR: 33480 mmHg/min

Min. BP x HR: 7600 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 : 15	1.0	0	0	95	120 / 80	-1.06 III	1.42 V2
Standing	0 : 15	1.0	0	0	101	120 / 80	-1.49 III	1.42 aVL
Hyperventilation	0 : 47	1.0	0	0	116	120 / 80	-5.94 V5	-4.25 V4
1	3 : 0	4.6	1.7	10	149	130 / 80	-2.55 III	2.83 V2
2	3 : 0	7.0	2.5	12	171	140 / 80	-2.97 III	3.89 V2
Peak Ex	0 : 40	10.2	3.4	14	186	180 / 80	-2.97 II	3.89 V2
Recovery(1)	1 : 0	1.8	1	0	151	160 / 80	-2.97 III	5.66 V2
Recovery(2)	1 : 0	1.0	0	0	136	160 / 80	-2.34 III	5.66 V2
Recovery(3)	1 : 0	1.0	0	0	122	140 / 80	-2.34 III	4.95 V2
Recovery(4)	1 : 0	1.0	0	0	115	140 / 80	-1.91 III	3.18 V2
Recovery(5)	0 : 29	1.0	0	0	118	120 / 80	-1.27 III	1.77 V2

Interpretation

GOOD EFFORT TOLERANCE

ACCELERATED CHRONOTROPIC RESPONSE

NORMAL INOTROPIC RESPONSE

NO ANGINA/ ANGINA EQUIVALENTS

NO ARRHYTHMIAS

BASELINE ST-T CHANGES ABNORMALITIES IN INFEROLATERAL LEADS WHICH

PERSISTED THROUGHOUT EXERCISE & RECOVERY.

IMPRESSION: STRESS TEST IS EQUIVOCAL 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; D Card

Consultant Cardiologist

Reg.No : 2004/06/2468

Ref. Doctor: MEDI ASSIST HEALTHCARE

(Summary Report edited by user)

Doctor: DR. RAVI CHAVAN

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

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22

Exec Time : 0 m 0 s

Stage Time : 0 m 9 s

HR: 93 bpm

Protocol: Bruce

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 154 bpm)

B.P: 120 / 80

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

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

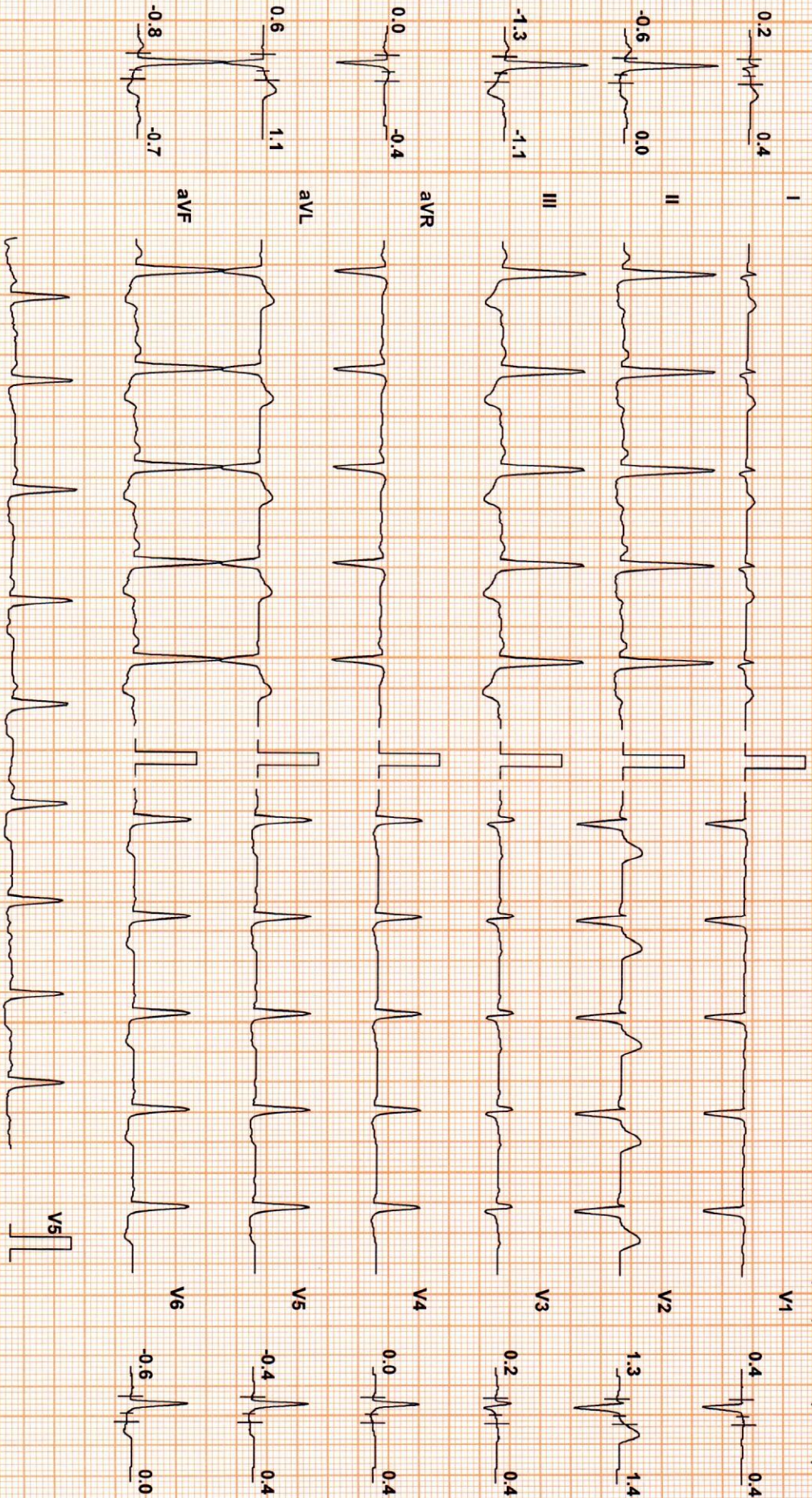


Chart Speed: 25 mm/sec
Schiller Spandan V.4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22

Exec Time : 0 m 0 s

Stage Time : 0 m 9 s

HR: 101 bpm

Protocol: Bruce

Stage: Standing

Speed: 0 mph

Grade: 0%

(THR: 154 bpm)

B.P: 120 / 80

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

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

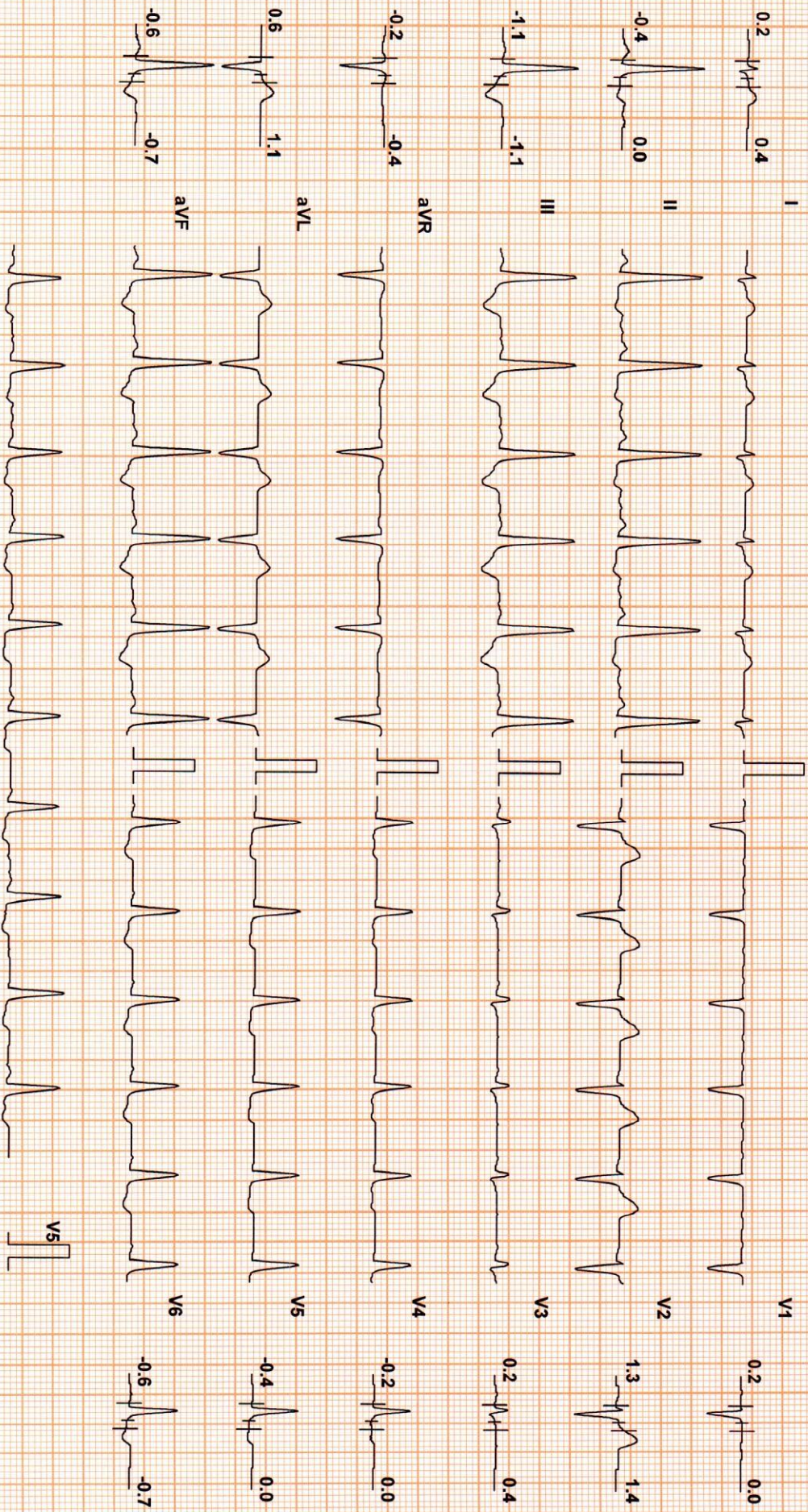


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22

Exec Time : 0 m 0 s

Stage Time : 0 m 41 s HR: 115 bpm

Protocol: Bruce

Stage: Hyperventilation

Speed: 0 mph

Grade: 0 %

(THR: 154 bpm)

B.P: 120 / 80

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

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

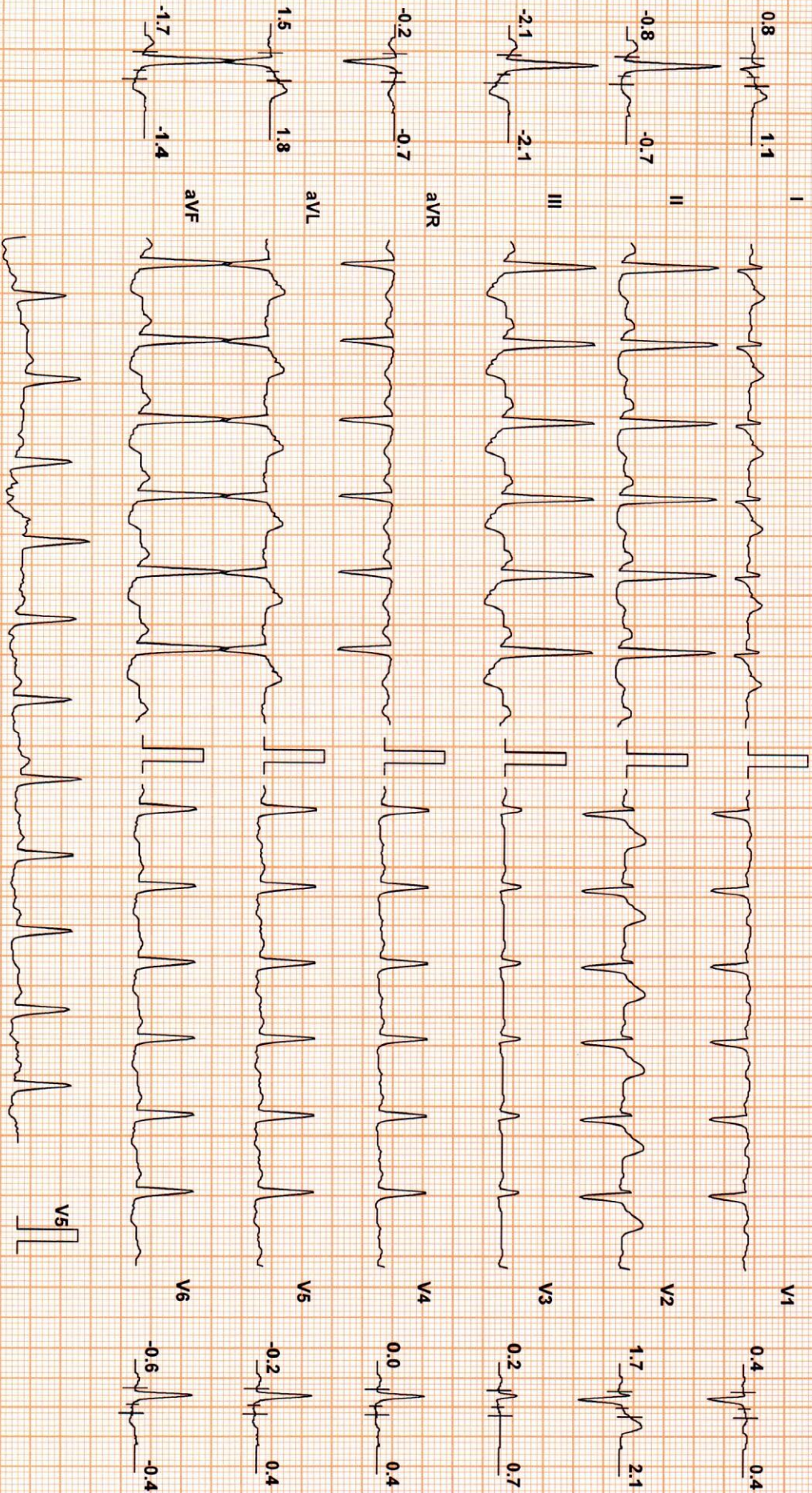


Chart Speed: 25 mm/sec
Schlier Spanden V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22 Exec Time : 2 m 54 s Stage Time : 2 m 54 s HR: 149 bpm

Protocol: Bruce

Stage: 1

Speed: 1.7 mph Grade: 10% (THR: 154 bpm) B.P: 130 / 80

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

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

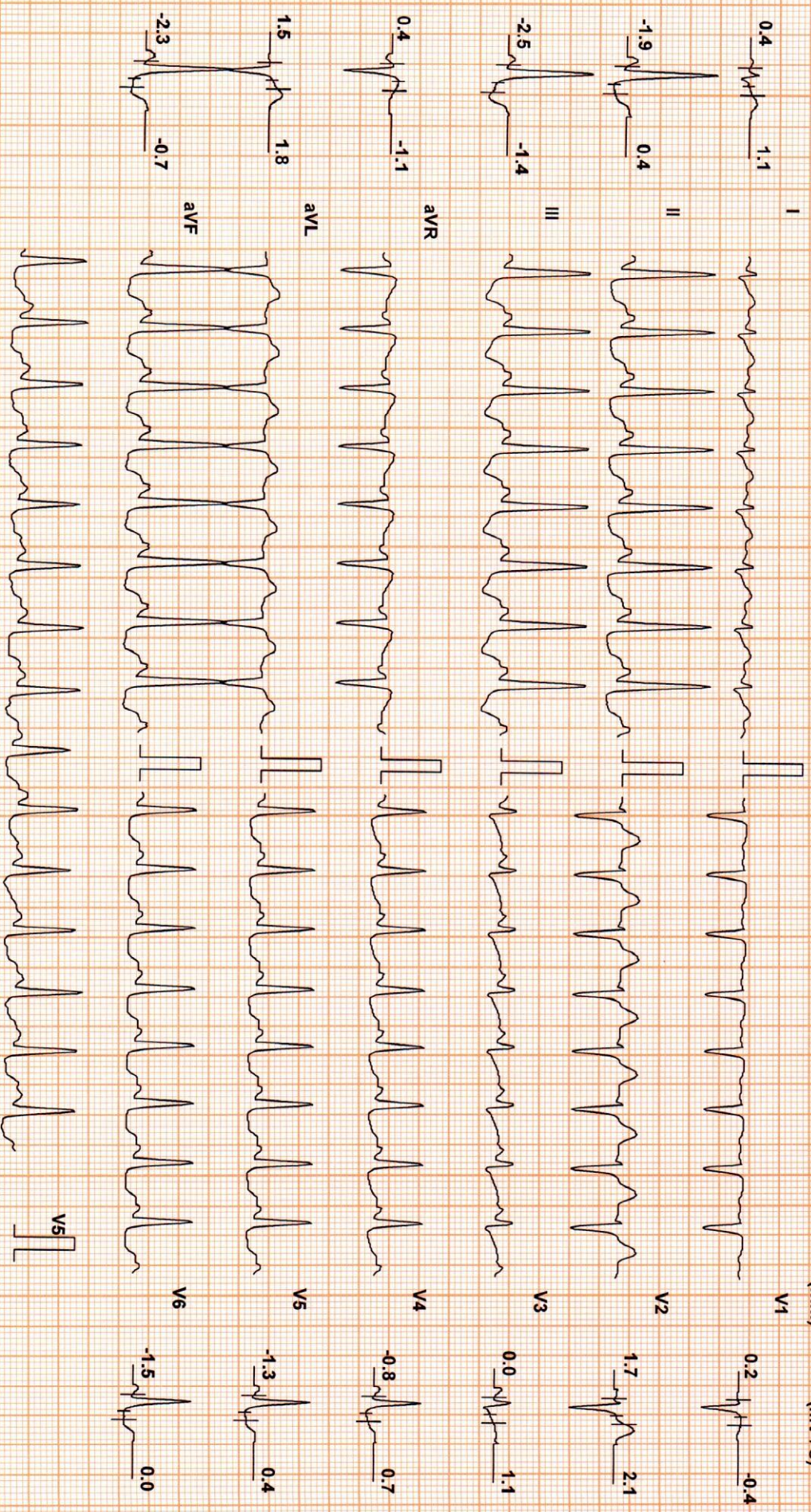


Chart Speed: 25 mm/sec
Schlier Spanden V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms J = R + 60 ms Pos: J = J + 60 ms

Linked Median

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22

Exec Time : 3 m 5 s

Stage Time : 0 m 5 s

HR: 147 bpm

Protocol: Bruce

Stage: 2

Speed: 2.5 mph

Grade: 12 %

(THR: 154 bpm)

B.P: 140 / 80

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

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

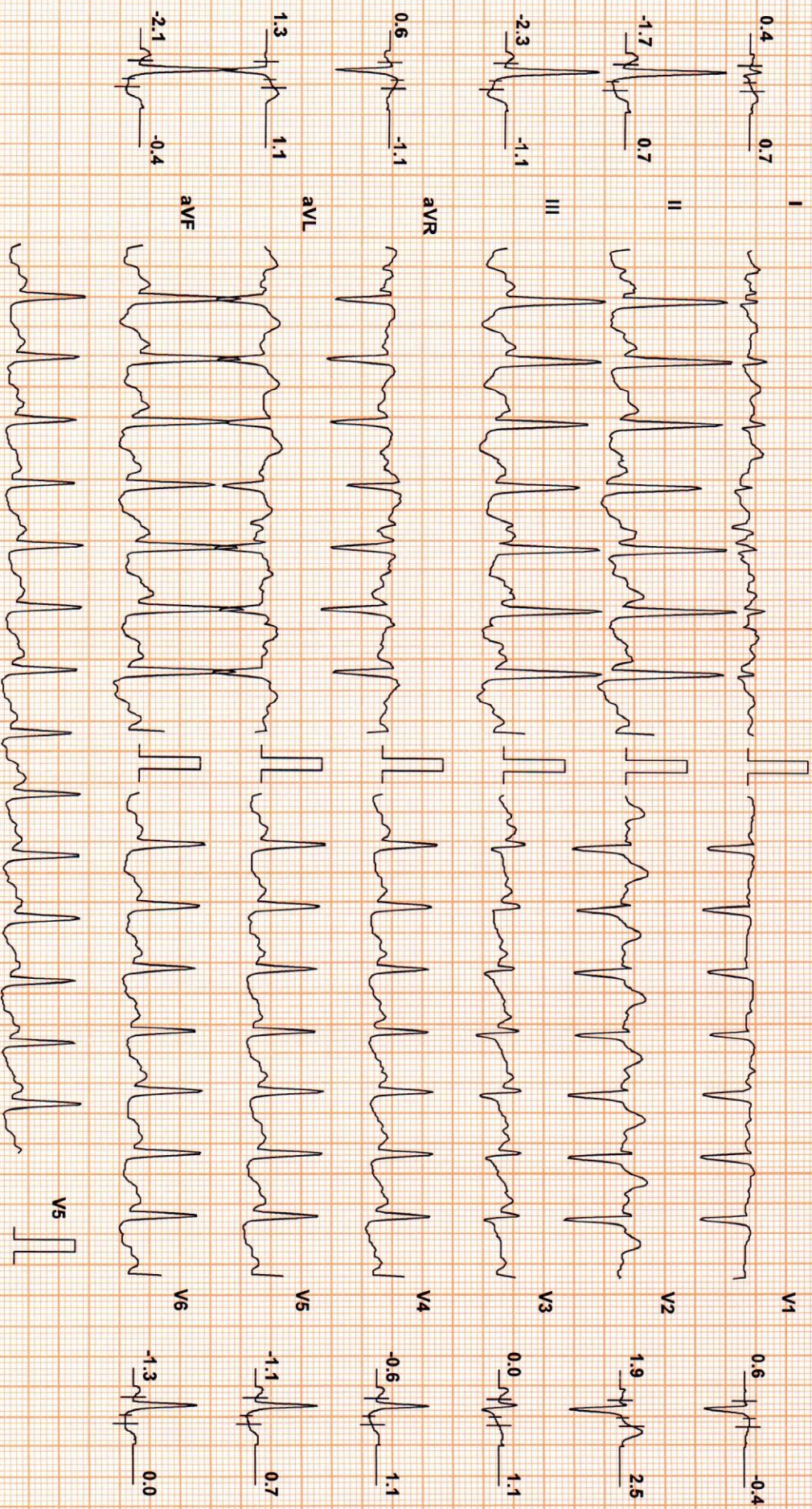


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms J = R + 60 ms

Post J = J + 60 ms

Protocol: Bruce

Stage: 2

Speed: 2.5 mph

Grade: 12 %

(THR: 154 bpm)

B.P: 140 / 80

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

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

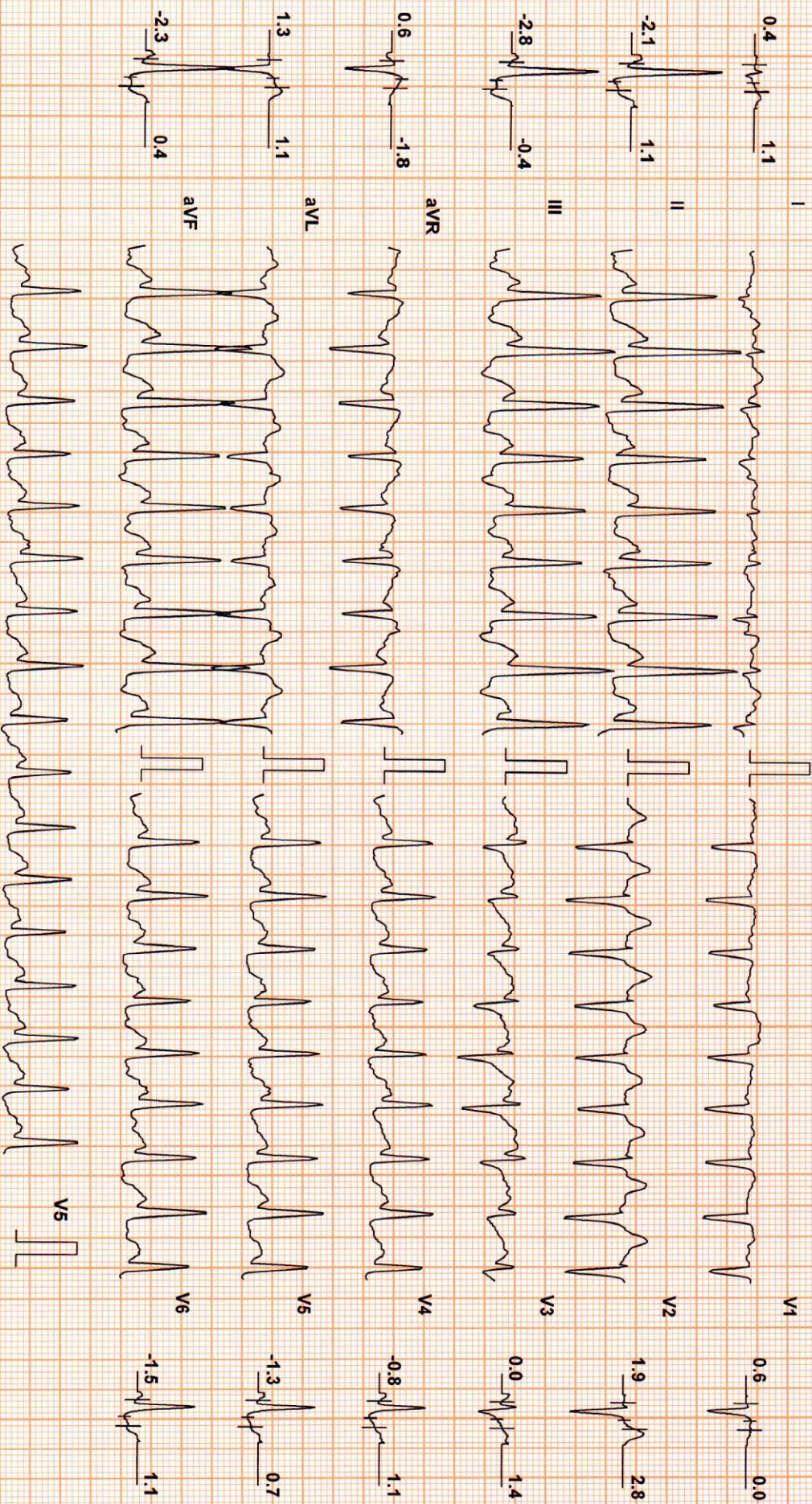


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22 Exec Time: 5 m 54 s Stage Time: 2 m 54 s HR: 171 bpm

Protocol: Bruce

Stage: 2

Speed: 2.5 mph Grade: 12 %

(THR: 154 bpm)

B.P: 140 / 80

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

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

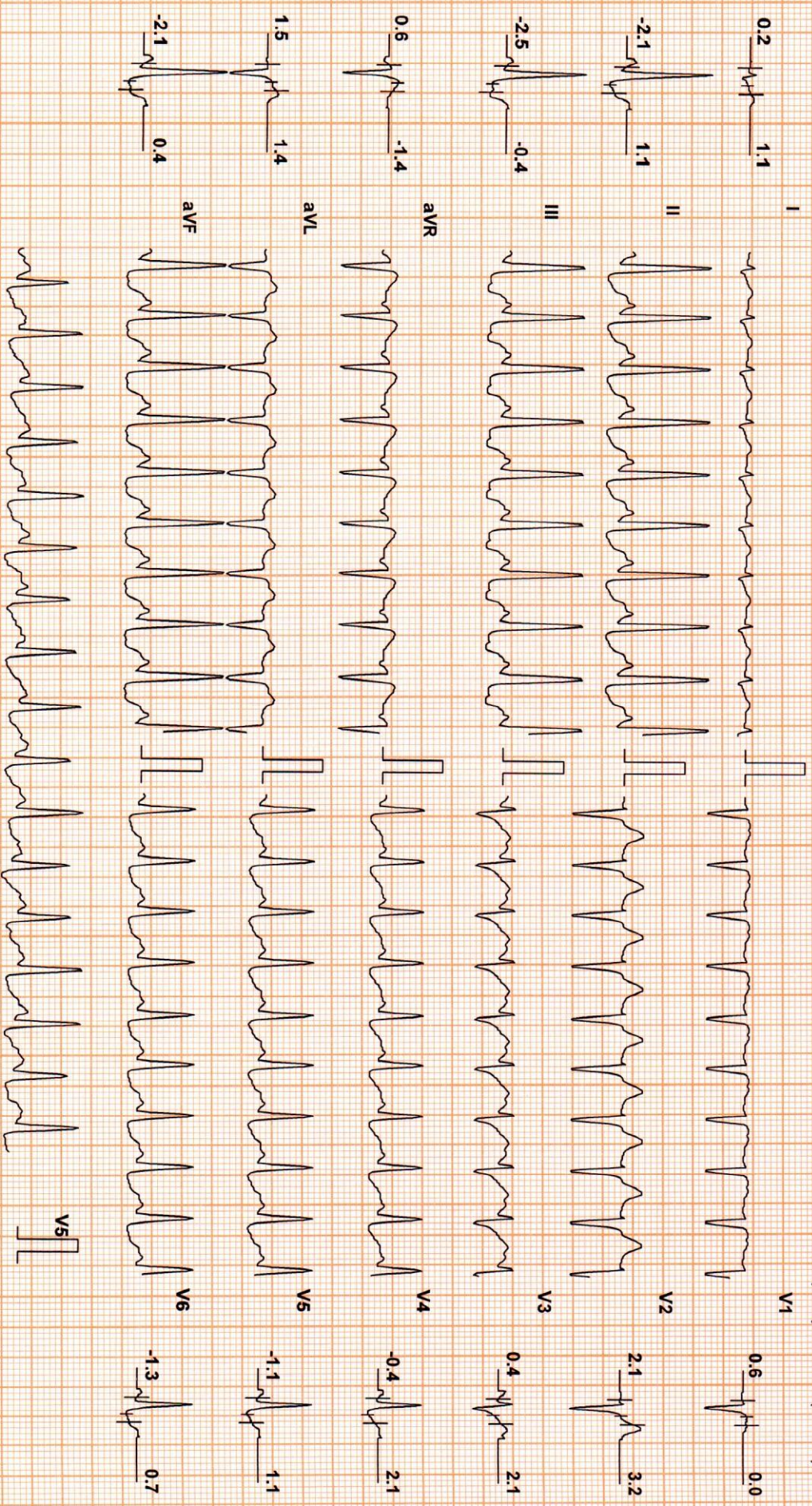


Chart Speed: 25 mm/sec
Schiller Spandan V4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22 Exec Time: 6 m 34 s Stage Time: 0 m 34 s HR: 183 bpm

Protocol: Bruce

Stage: Peak Ex

Speed: 3.4 mph Grade: 14 % (THR: 154 bpm) B.P: 180 / 80

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

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

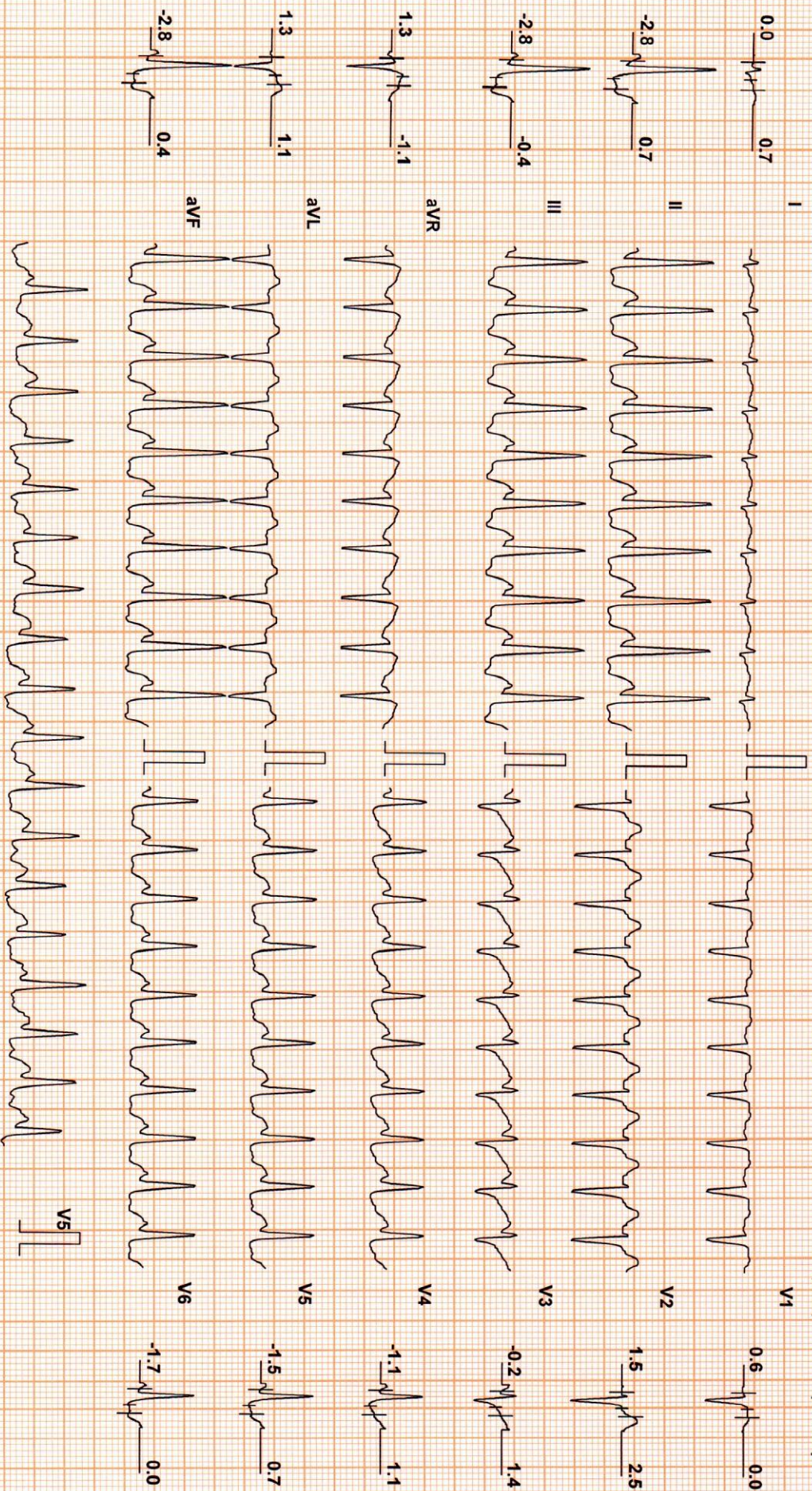


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22 Exec Time : 6 m 35 s Stage Time : 0 m 35 s HR: 183 bpm

Protocol: Bruce

Stage: Peak Ex

Speed: 3.4 mph

Grade: 14 %

(THR: 154 bpm)

B.P: 180 / 80

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

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

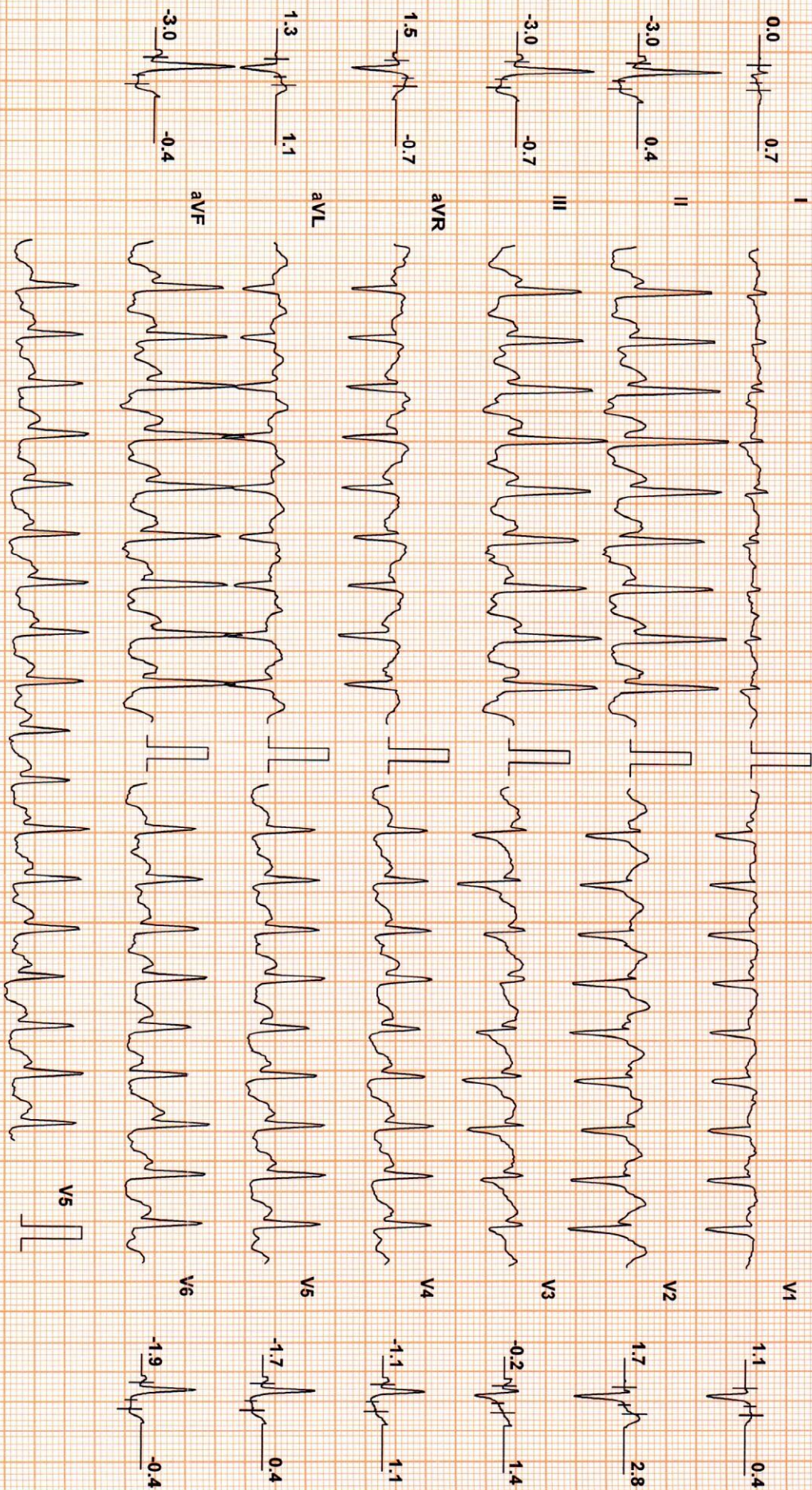


Chart Speed: 25 mm/sec
Schlifer Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms J = R + 60 ms

Post J = J + 60 ms

SUBURBAN DIAGNOSTICS

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22

Exec Time : 6 m 40 s Stage Time : 0 m 19 s **HR: 184 bpm**

Protocol: Bruce

Stage: Recovery(1)

Speed: 1 mph

Grade: 0 %

(THR: 154 bpm)

B.P: 160 / 80

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

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

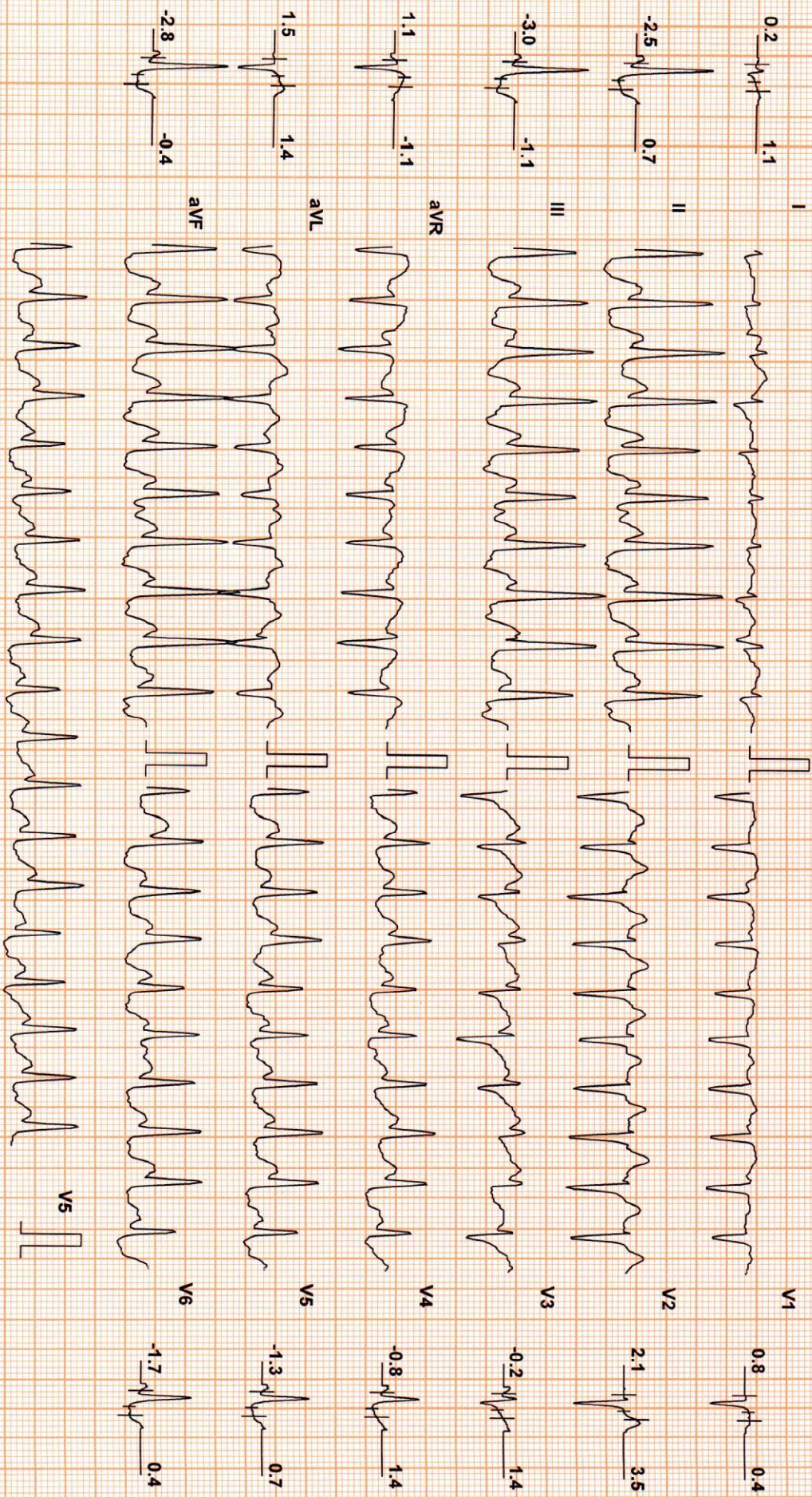


Chart Speed: 25 mm/sec
Schiller Spandau V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms J = R + 60 ms

Post J = J + 60 ms

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22

Exec Time : 6 m 40 s Stage Time : 0 m 54 s HR: 155 bpm

Protocol: Bruce

Stage: Recovery(1)

Speed: 1 mph

Grade: 0 %

(THR: 154 bpm)

B.P.: 160 / 80

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

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

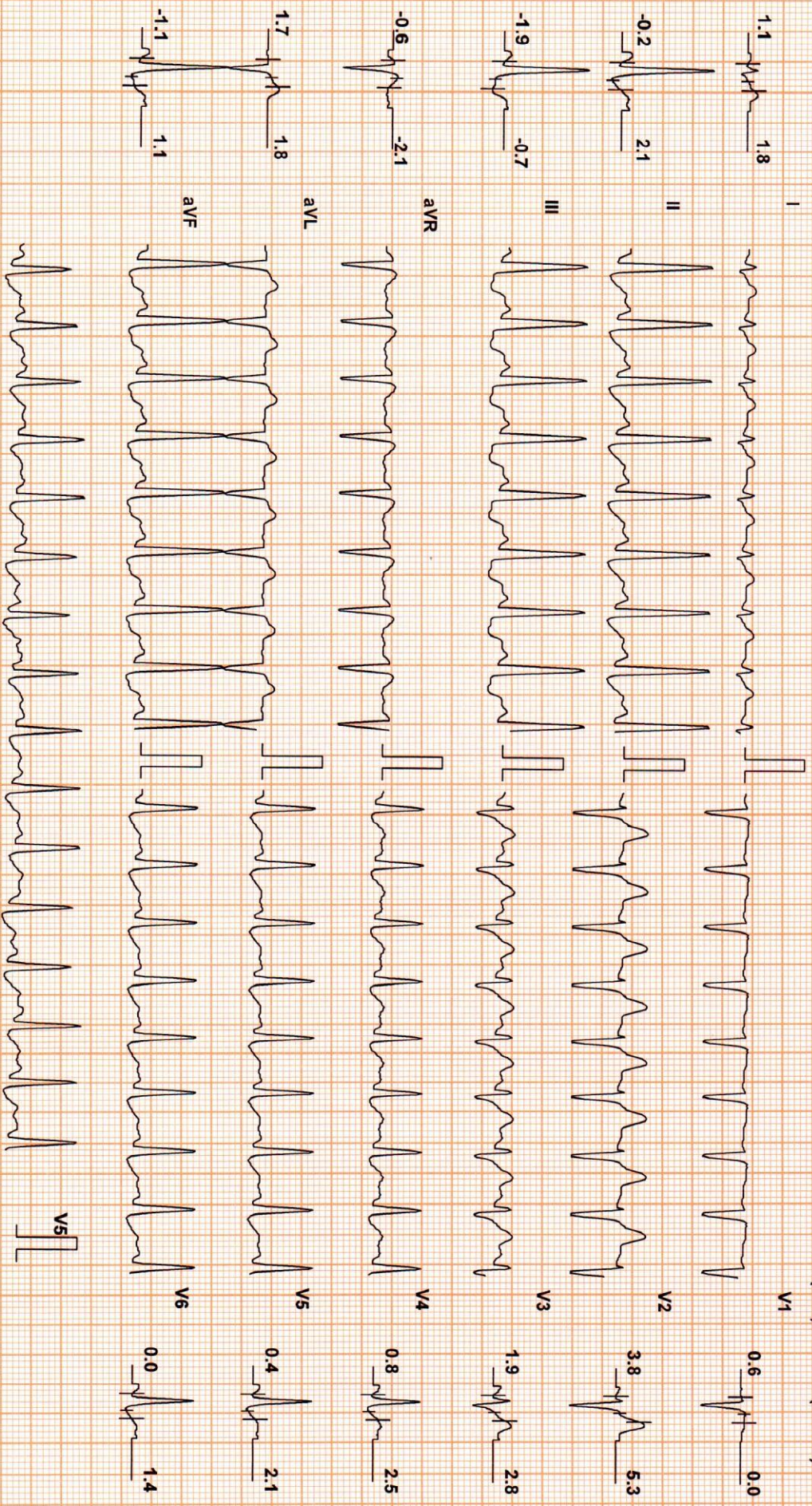


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fit: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

JYOTTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22

Exec Time : 6 m 40 s Stage Time : 0 m 54 s HR: 135 bpm

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 154 bpm)

B.P: 160 / 80

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

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

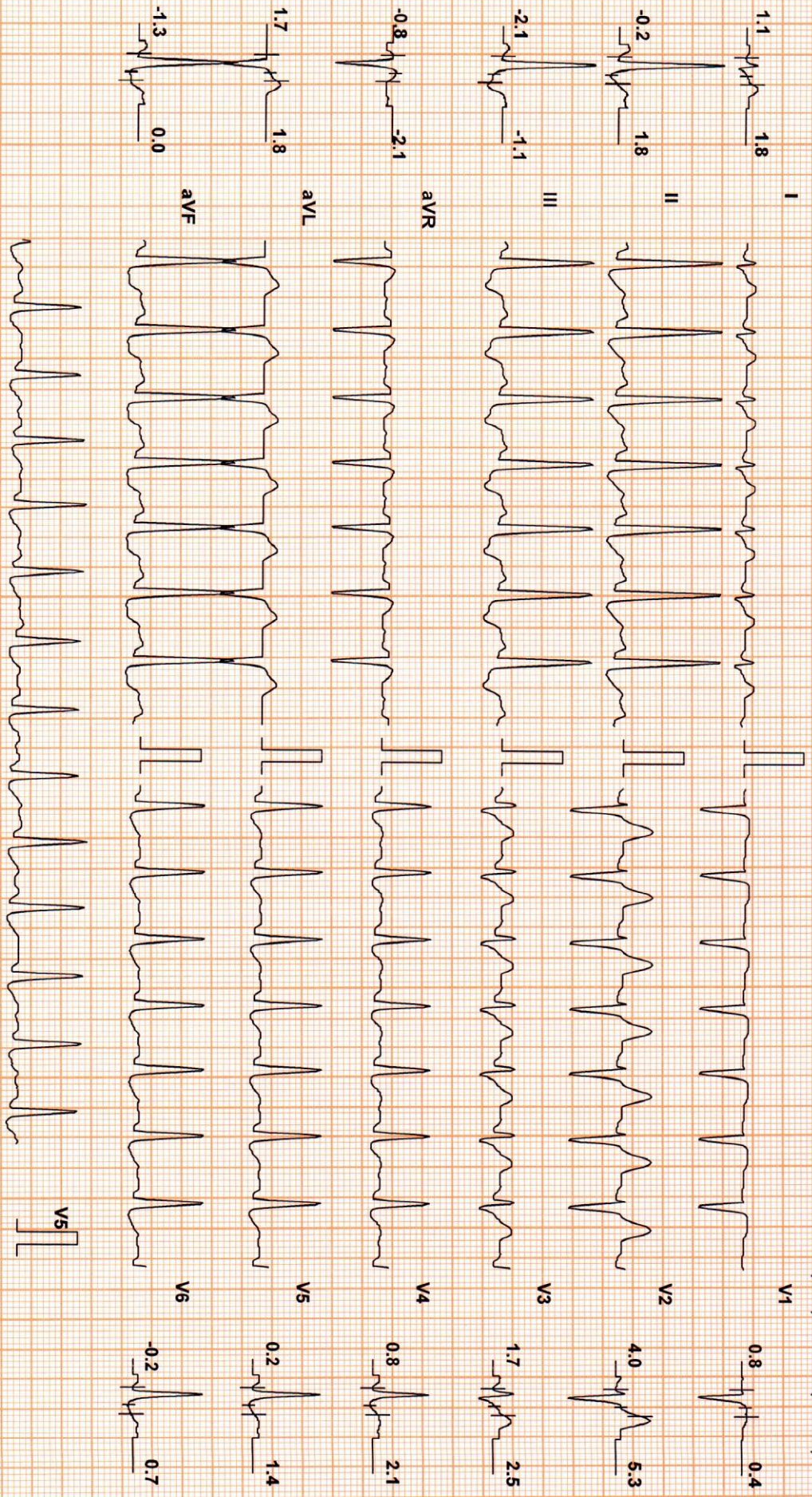


Chart Speed: 25 mm/sec
Schiller Spandan V4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22 Exec Time : 6 m 40 s Stage Time : 0 m 54 s HR: 120 bpm

Protocol: Bruce

Stage: Recovery(3)

Speed: 0 mph

Grade: 0 %

(THR: 154 bpm)

B.P: 140 / 80

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

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

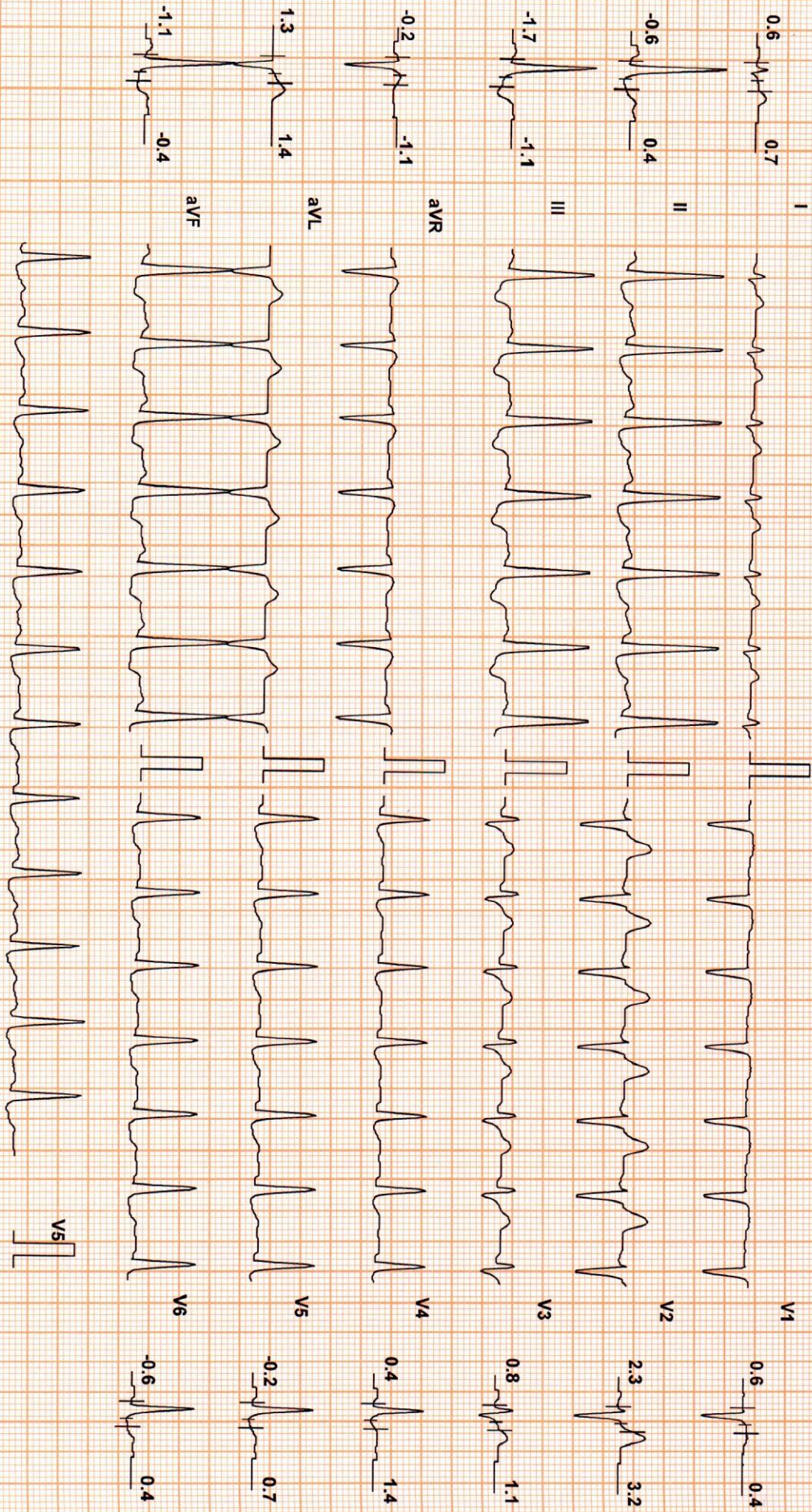


Chart Speed: 25 mm/sec
Schlier Spandan V4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22

Exec Time : 6 m 40 s Stage Time : 0 m 7 s

HR: 120 bpm

Protocol: Bruce

Stage: Recovery(4)

Speed: 0 mph

Grade: 0 %

(THR: 154 bpm)

B.P: 140 / 80

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

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

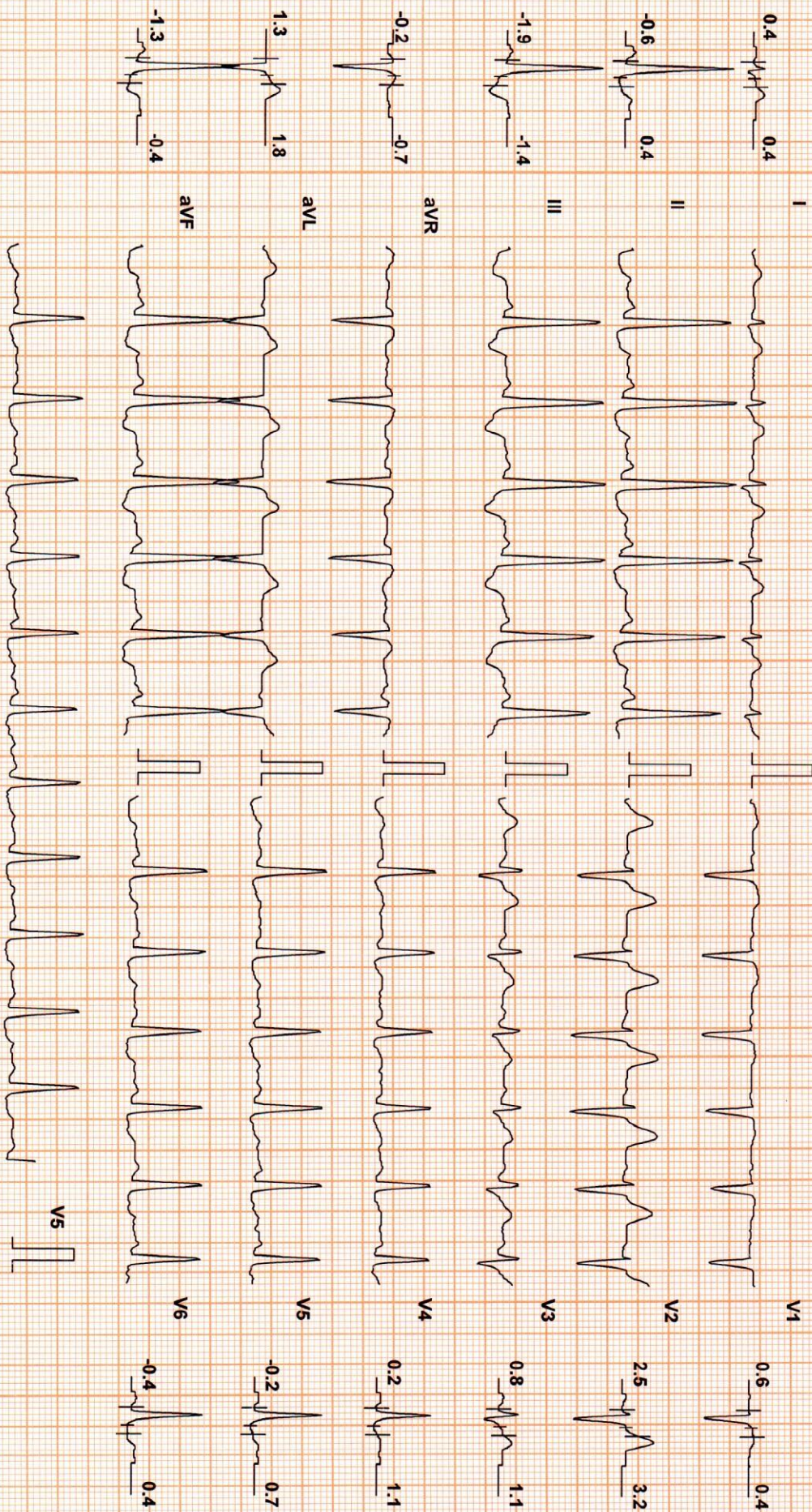


Chart Speed: 25 mm/sec
Schiller Spardan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22 Exec Time : 6 m 40 s Stage Time : 0 m 54 s HR: 121 bpm

Protocol: Bruce

Stage: Recovery(4)

Speed: 0 mph

Grade: 0 %

(THR: 154 bpm)

B.P: 140 / 80

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

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

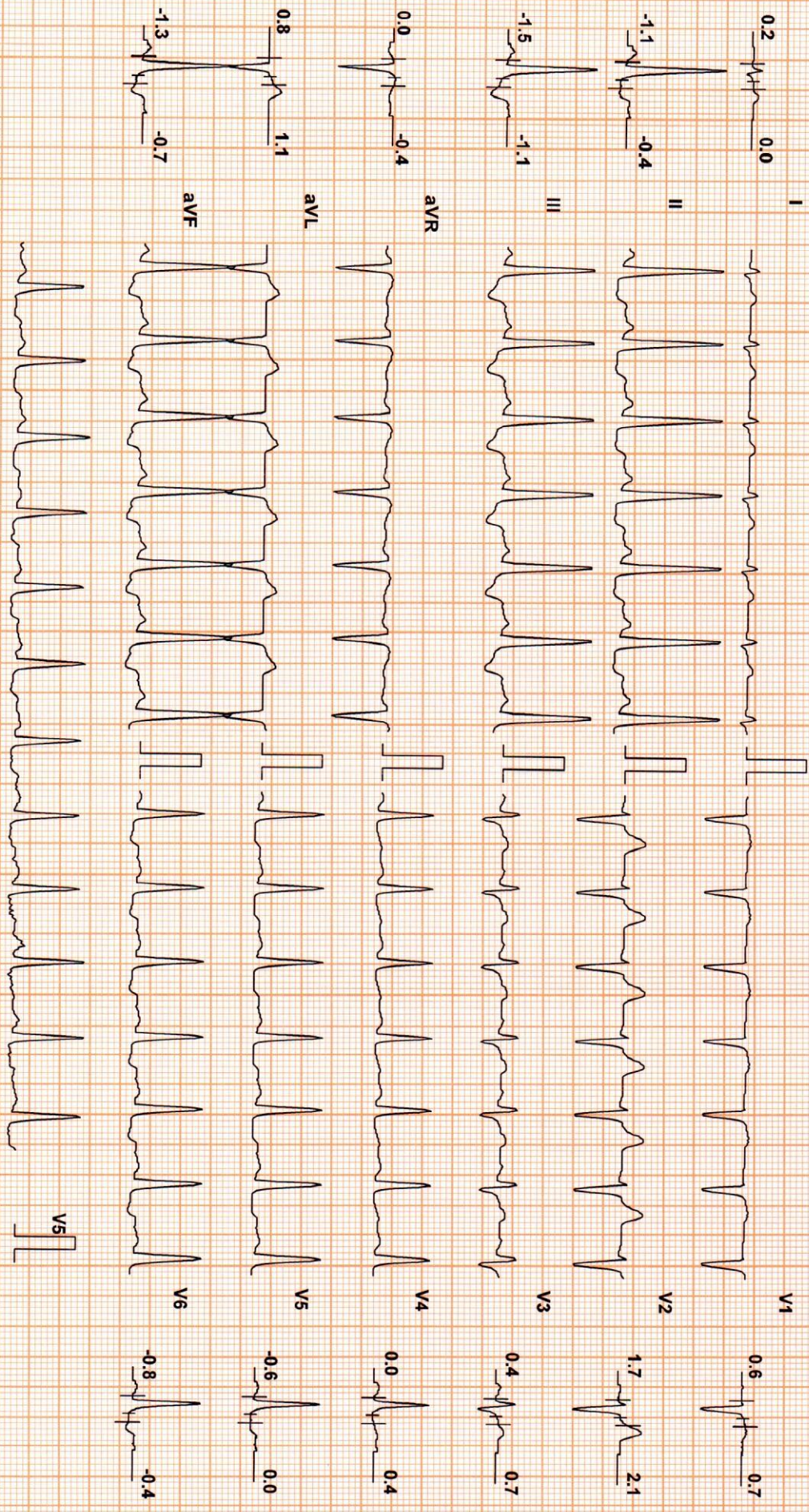


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22

Exec Time : 6 m 40 s Stage Time : 0 m 7 s

HR: 106 bpm

Protocol: Bruce

Stage: Recovery(5)

Speed: 0 mph

Grade: 0 %

(THR: 154 bpm)

B.P: 120 / 80

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

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

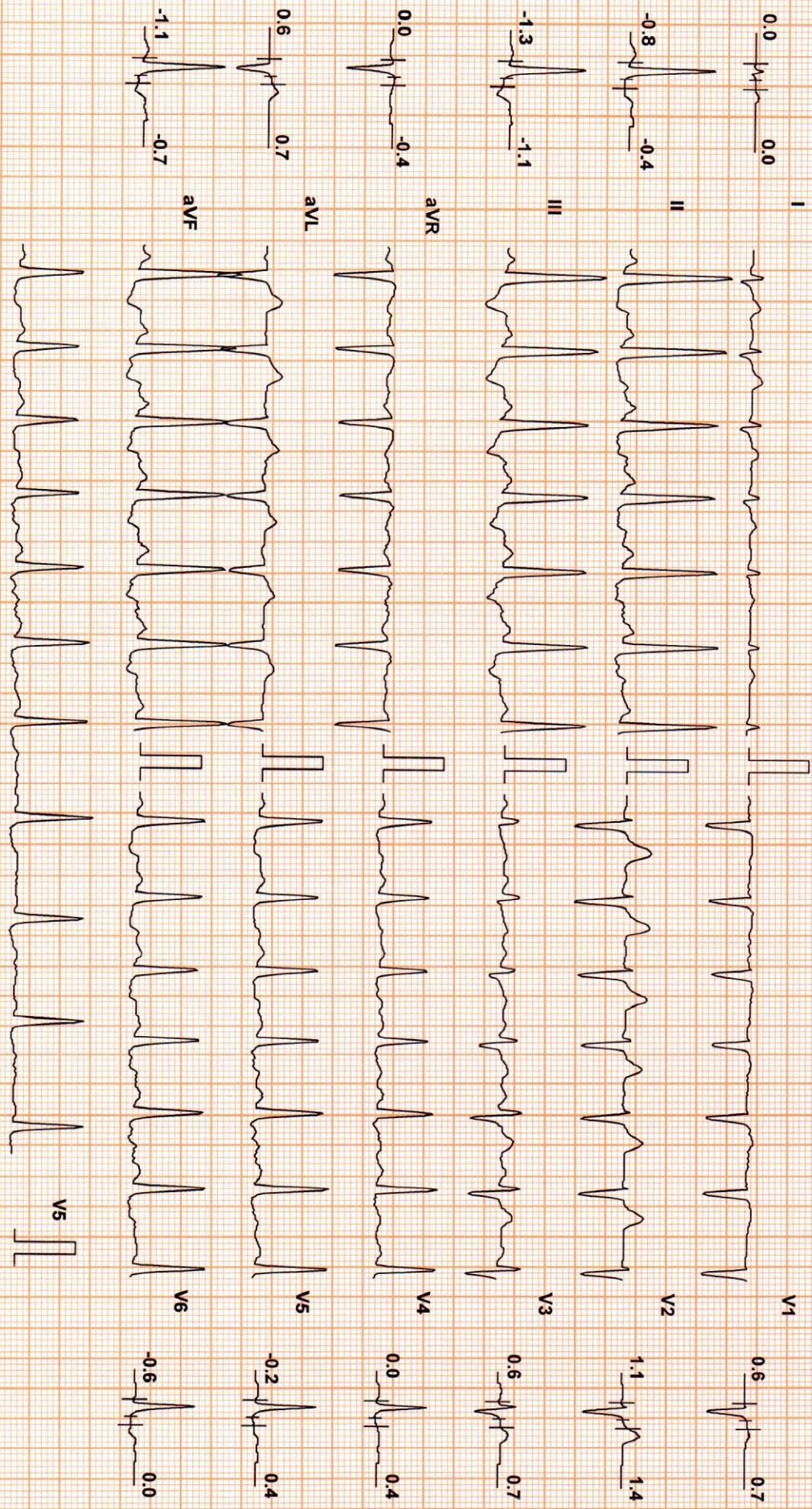


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms J = R + 60 ms

Post J = J + 60 ms

JYOTI PRAKASH MALLIK (38 M)

ID: 2208211070

Date: 23-Mar-22

Exec Time : 6 m 40 s Stage Time : 0 m 23 s HR: 115 bpm

Protocol: Bruce

Stage: Recovery(5)

Speed: 0 mph

Grade: 0 %

(THR: 154 bpm)

B.P: 120 / 80

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

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

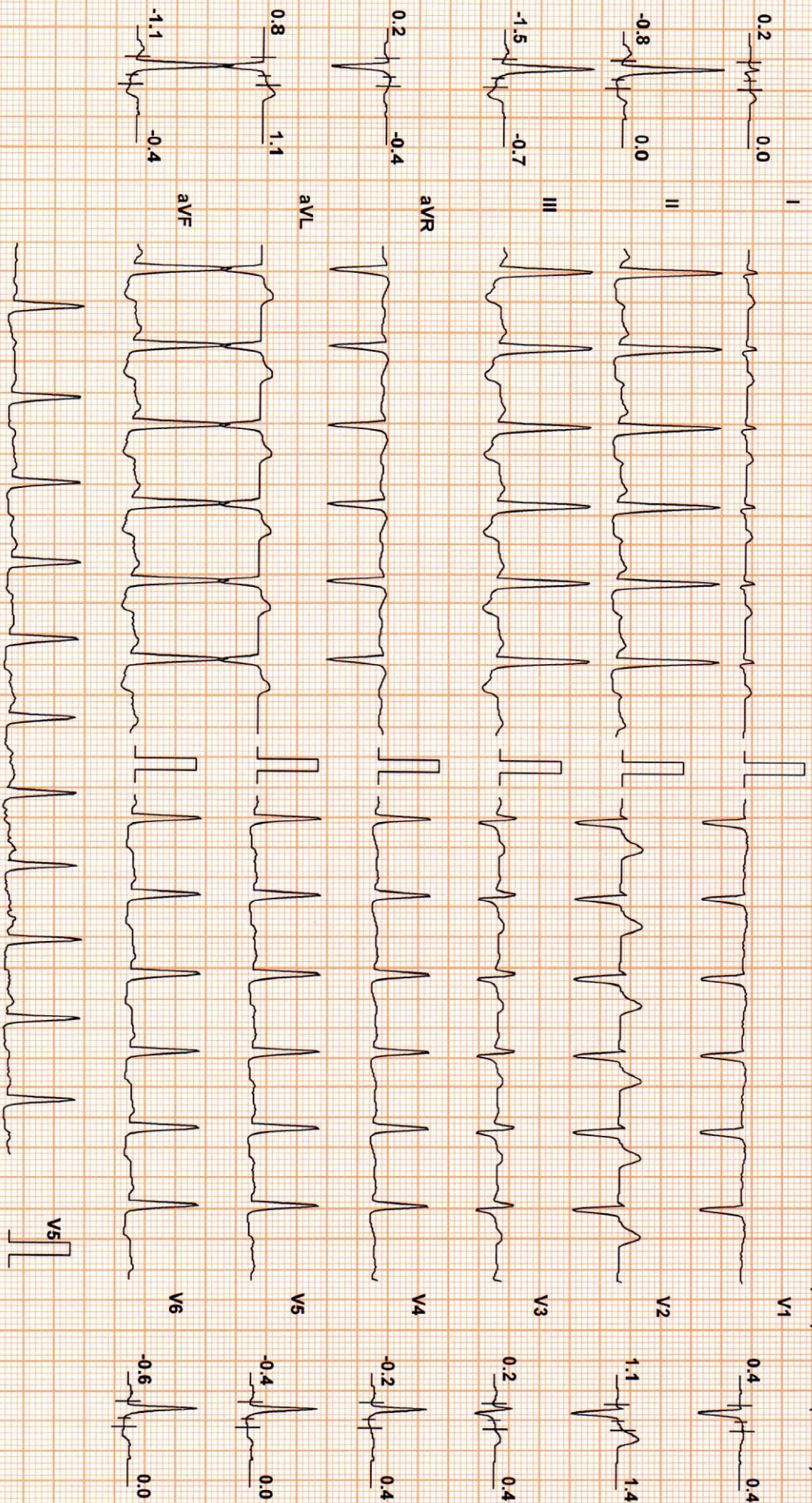


Chart Speed: 25 mm/sec
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median