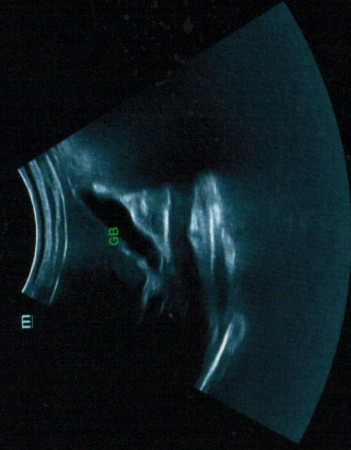


# SUBURBAN DIAGNOSTIC CENTRE

27 May 2023 Study : ABD

Name : Mr Prashant .. 005D / M

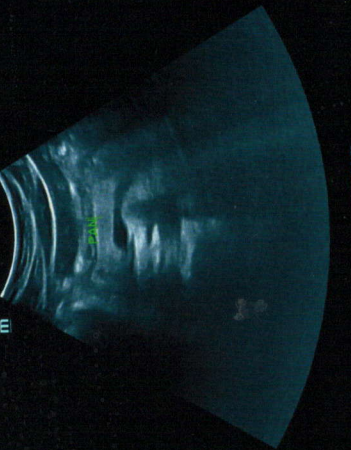
Suburban Diagnostic  
27-05-2023 10:32:23 AM  
AP 98.65% M 1.3 TB 0.4



mindray DC-60 Exp

F: H5.0  
D: 18.0  
G: 5.8  
FR: 17  
DR: 130  
iClear: 7  
iBeam: 1  
Z: 1.20

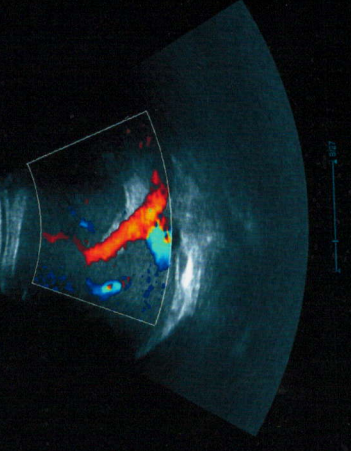
Suburban Diagnostic  
27-05-2023 10:32:38 AM  
AP 98.65% M 1.3 TB 0.4



mindray DC-60 Exp

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D: 18.0  
G: 5.8  
FR: 17  
DR: 130  
iClear: 7  
iBeam: 1  
Z: 1.20

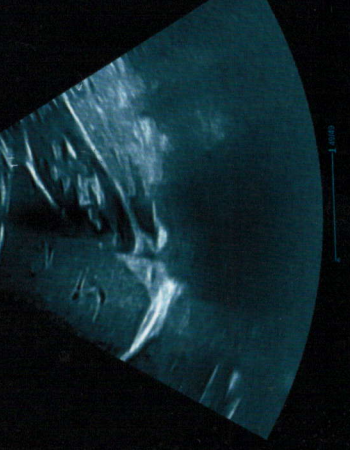
Suburban Diagnostic  
27-05-2023 10:33:13 AM  
AP 98.65% M 1.3 TB 0.4



mindray DC-60 Exp

F: H5.0  
D: 18.0  
G: 5.8  
FR: 17  
DR: 130  
iClear: 7  
iBeam: 1  
Z: 1.20

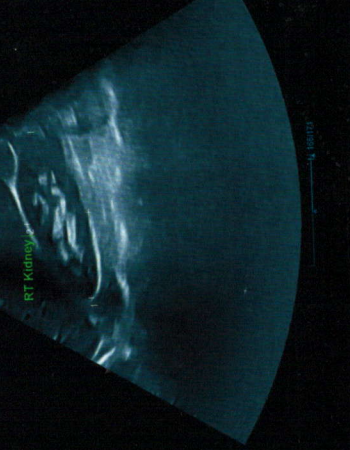
Suburban Diagnostic  
27-05-2023 10:33:24 AM  
AP 98.65% M 1.3 TB 0.5



mindray DC-60 Exp

F: H5.0  
D: 18.0  
G: 5.8  
FR: 17  
DR: 130  
iClear: 7  
iBeam: 1  
Z: 1.20

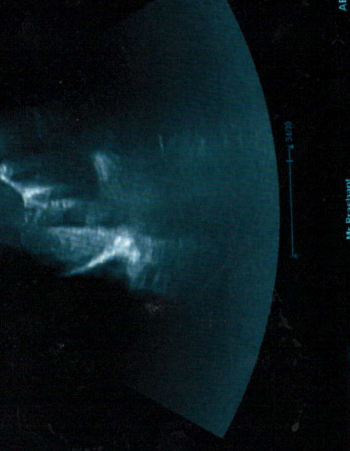
Suburban Diagnostic  
27-05-2023 10:33:30 AM  
AP 98.65% M 1.3 TB 0.5



mindray DC-60 Exp

F: H5.0  
D: 18.0  
G: 5.8  
FR: 17  
DR: 130  
iClear: 7  
iBeam: 1  
Z: 1.20

Suburban Diagnostic  
27-05-2023 10:34:03 AM  
AP 98.65% M 1.2 TB 0.5



mindray DC-60 Exp

F: H5.0  
D: 18.0  
G: 5.8  
FR: 17  
DR: 130  
iClear: 7  
iBeam: 1  
Z: 1.20

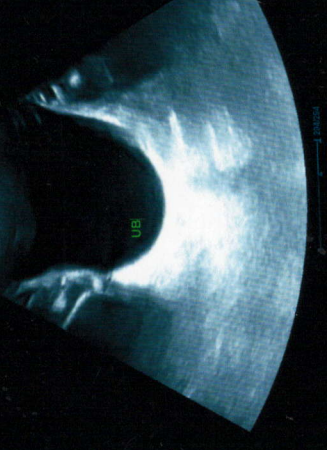
Suburban Diagnostic  
27-05-2023 10:34:15 AM  
AP 98.65% M 1.3 TB 0.5



mindray DC-60 Exp

F: H5.0  
D: 18.0  
G: 5.8  
FR: 17  
DR: 130  
iClear: 7  
iBeam: 1  
Z: 1.20

Suburban Diagnostic  
27-05-2023 10:35:28 AM  
AP 98.65% M 1.3 TB 0.5



mindray DC-60 Exp

F: H5.0  
D: 18.0  
G: 5.8  
FR: 17  
DR: 130  
iClear: 7  
iBeam: 1  
Z: 1.20

Suburban Diagnostic  
27-05-2023 10:35:56 AM  
AP 98.65% M 1.2 TB 0.5



mindray DC-60 Exp

F: H5.0  
D: 18.0  
G: 5.8  
FR: 17  
DR: 130  
iClear: 7  
iBeam: 1  
Z: 1.20

Suburban Diagnostic  
27-05-2023 10:37:23 AM  
AP 98.65% M 1.3 TB 0.5



mindray DC-60 Exp

F: H5.0  
D: 18.0  
G: 5.8  
FR: 17  
DR: 130  
iClear: 7  
iBeam: 1  
Z: 1.20

Suburban Diagnostic  
27-05-2023 10:37:59 AM  
AP 98.65% M 1.3 TB 0.5



mindray DC-60 Exp

F: H5.0  
D: 18.0  
G: 5.8  
FR: 17  
DR: 130  
iClear: 7  
iBeam: 1  
Z: 1.20

Suburban Diagnostic  
27-05-2023 10:38:33 AM  
AP 98.65% M 1.3 TB 0.5



mindray DC-60 Exp

F: H5.0  
D: 18.0  
G: 5.8  
FR: 17  
DR: 130  
iClear: 7  
iBeam: 1  
Z: 1.20

Prashant Anisrao  
40/M

TMT

27-5-23

PHY2.

R  
E  
P  
O  
R  
T

History and Complaints:

NR

EXAMINATION FINDINGS:

Height (cms):	162	Weight (kg):	48	BMI
Temp (0c):	Afebrile	Skin:	Normal	JMD
Blood Pressure (mm/hg):	100/70	Nails:	Healthy	
Pulse:	74	Lymph Node:	Not Palpable	

Systems

Cardiovascular: S1,S2 Normal No Murmurs  
Respiratory: Air Entry Bilaterally Equal  
Genitourinary: Normal  
GI System: Soft non tender No Organomegaly  
CNS: Normal

JMD

IMPRESSION:

FHT  
Repeat LMR

ADVICE:

- NR

CHIEF COMPLAINTS:

- 1) Hypertension:
- 2) IHD:
- 3) Arrhythmia:
- 4) Diabetes Mellitus :
- 5) Tuberculosis :
- 6) Asthama:
- 7) Pulmonary Disease :
- 8) Thyroid/ Endocrine disorders :

JMD  
ML

9)	Nervous disorders :	} ML
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 :	In childhood, B/L elbow #.
<b>PERSONAL HISTORY:</b>		
1)	Alcohol	3 months / socially.
2)	Smoking	no
3)	Diet	Mixed
4)	Medication	no

Kentel

...A INGLE  
 MBBS ... Pathology (USA)  
 ... - 2012 103018

Preventive Health Check-up | Pathology | Digital X-Ray | Sonography | Colour Doppler | Mammography | BMD (DXA Scan) | OPG | ECG | Stress Test/TMT | 2D Echo | Spirometry | Eye Examination | Dental Examination | Diet Consultation | Audiometry | OT Sterility | Water Sterility | Clinical Research

Date:- 27.5.23

CID:

Name:- Prashant Ahirao

Sex / Age: 40 / M

**EYE CHECK UP**

Chief complaints:

Systemic Diseases:

Past history:

Unaided Vision:

Aided Vision:

Refraction:

Y 12 / LASIK - 2009.

\_\_\_\_\_ . WNL

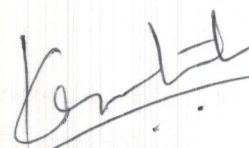
1 NA

	(Right Eye)				(Left Eye)			
	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	_____			6/6	_____			6/6
Near	_____			M6	_____			M6

Colour Vision: Normal / ~~Abnormal~~

Remark:

M12 -



Dr. KRUTIKA INGLE

MBBS, D.DM, PG in Diabetology (USA)  
MMC Regd - 2012 103018

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Application To Scan the Code

CID : 2314718216  
Name : MR.PRASHANT ..  
Age / Gender : 40 Years / Male  
Consulting Dr. : -  
Reg. Location : Pimple Saudagar, Pune (Main Centre)

Collected : 27-May-2023 / 09:07  
Reported : 27-May-2023 / 14:15

**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	15.4	13.0-17.0 g/dL	Spectrophotometric
RBC	5.37	4.5-5.5 mil/cmm	Elect. Impedance
PCV	46.4	40-50 %	Measured
MCV	86	80-100 fl	Calculated
MCH	28.7	27-32 pg	Calculated
MCHC	33.3	31.5-34.5 g/dL	Calculated
RDW	11.1	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	6050	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	44.0	20-40 %	
Absolute Lymphocytes	2662.0	1000-3000 /cmm	Calculated
Monocytes	7.3	2-10 %	
Absolute Monocytes	441.6	200-1000 /cmm	Calculated
Neutrophils	40.4	40-80 %	
Absolute Neutrophils	2444.2	2000-7000 /cmm	Calculated
Eosinophils	7.0	1-6 %	
Absolute Eosinophils	423.5	20-500 /cmm	Calculated
Basophils	1.3	0.1-2 %	
Absolute Basophils	78.7	20-100 /cmm	Calculated
Immature Leukocytes	-		

WBC Differential Count by Absorbance & Impedance method/Microscopy.

**PLATELET PARAMETERS**

Platelet Count	283000	150000-400000 /cmm	Elect. Impedance
MPV	9.0	6-11 fl	Calculated
PDW	15.1	11-18 %	Calculated

**RBC MORPHOLOGY**

Hypochromia	-
Microcytosis	-

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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 4 2-15 mm at 1 hr. Sedimentation

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Baner Balewadi Lab  
\*\*\* End Of Report \*\*\*



**Dr.PRACHI KHANDEKAR**  
MBBS M.D (Pathology)



**CID** : 2314718216  
**Name** : MR.PRASHANT ..  
**Age / Gender** : 40 Years / Male  
**Consulting Dr.** : -  
**Reg. Location** : Pimple Saudagar, Pune (Main Centre)

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**Reported** : 27-May-2023 / 15:56

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	97.1	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	116.5	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.42	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.23	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.19	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.2	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.5	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.7	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.7	1 - 2	Calculated
SGOT (AST), Serum	18.2	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	18.8	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	23.6	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	58.1	40-130 U/L	Colorimetric
BLOOD UREA, Serum	14.7	12.8-42.8 mg/dl	Kinetic
BUN, Serum	6.9	6-20 mg/dl	Calculated
CREATININE, Serum	0.83	0.67-1.17 mg/dl	Enzymatic
eGFR, Serum	109	>60 ml/min/1.73sqm	Calculated

Note: eGFR estimation is calculated using MDRD (Modification of diet in renal disease study group) equation

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Collected : 27-May-2023 / 09:07  
 Reported : 27-May-2023 / 20:09

URIC ACID, Serum	5.1	3.5-7.2 mg/dl	Enzymatic
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 Pune Baner Balewadi Lab  
 \*\*\* End Of Report \*\*\*



*Dr. Chandrakant Pawar*  
**Dr.CHANDRAKANT PAWAR**  
**M.D.(PATH)**  
**Pathologist**



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Collected : 27-May-2023 / 09:07  
Reported : 27-May-2023 / 14:53

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**GLYCOSYLATED HEMOGLOBIN (HbA1c)**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.8	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	119.8	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 Pune Lab, Pune Swargate  
\*\*\* End Of Report \*\*\*



*Dr. Chandrakant Pawar*

**Dr.CHANDRAKANT PAWAR**  
M.D.(PATH)  
Pathologist

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Name : MR.PRASHANT ..  
Age / Gender : 40 Years / Male  
Consulting Dr. : -  
Reg. Location : Pimple Saudagar, Pune (Main Centre)

Collected : 27-May-2023 / 09:07  
Reported : 27-May-2023 / 16:48

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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	Acidic (6.5)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.025	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	50	-	-
<b><u>CHEMICAL EXAMINATION</u></b>			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Leukocytes(Pus cells)/hpf	0-1	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	2-3	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 Pune Lab, Pune Swargate  
\*\*\* End Of Report \*\*\*



MC-2463

*Handwritten signature*

**Dr.CHANDRAKANT PAWAR**  
**M.D.(PATH)**  
**Pathologist**

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Consulting Dr. : -  
Reg. Location : Pimple Saudagar, Pune (Main Centre)

Collected : 27-May-2023 / 09:07  
Reported : 27-May-2023 / 15:03

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

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	A
Rh TYPING	Positive

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

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 Pune Lab, Pune Swargate  
\*\*\* End Of Report \*\*\*



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**Dr. PRACHI KHANDEKAR**  
**MBBS M.D (Pathology)**

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Age / Gender : 40 Years / Male  
Consulting Dr. : -  
Reg. Location : Pimple Saudagar, Pune (Main Centre)

Collected : 27-May-2023 / 09:07  
Reported : 27-May-2023 / 15:56

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	151.7	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	83.0	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	45.4	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	106.3	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	89	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	3.3	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.0	0-3.5 Ratio	Calculated

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Baner Balewadi Lab  
\*\*\* End Of Report \*\*\*



*Dr. Chandrakant Pawar*

**Dr.CHANDRAKANT PAWAR**  
M.D.(PATH)  
Pathologist



CID : 2314718216  
Name : MR.PRASHANT ..  
Age / Gender : 40 Years / Male  
Consulting Dr. : -  
Reg. Location : Pimple Saudagar, Pune (Main Centre)

Collected : 27-May-2023 / 09:07  
Reported : 27-May-2023 / 17:18

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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	5.4	2.6-5.7 pmol/L	CMIA
Free T4, Serum	13.4	9-19 pmol/L	CMIA
sensitiveTSH, Serum	2.64	0.35-4.94 mIU/ml	CMIA

NOTE: 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 & heart failure, severe burns, trauma & surgery etc.

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Age / Gender : 40 Years / Male  
Consulting Dr. : -  
Reg. Location : Pimple Saudagar, Pune (Main Centre)

Collected : 27-May-2023 / 09:07  
Reported : 27-May-2023 / 17:18

**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 Pune Lab, Pune Swargate  
\*\*\* End Of Report \*\*\*

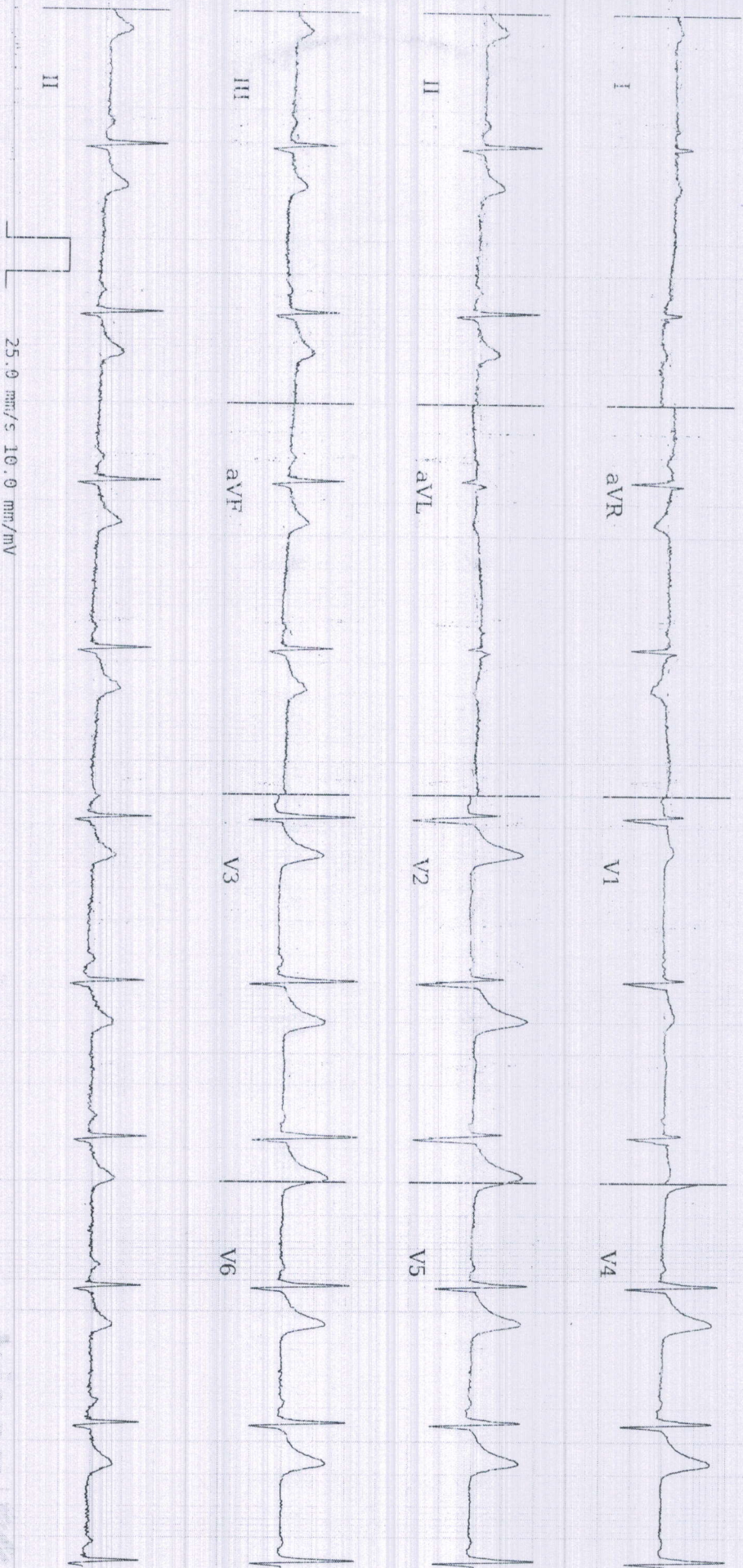


*Chandrakant Pawar*

**Dr.CHANDRAKANT PAWAR**  
M.D.(PATH)  
Pathologist

Patient Name: PRASHANT AHIRRAO  
Patient ID: HE-4F2BICE7

Date and Time: 27th May 23 9:29 AM



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

Age: 40 years  
Gender: Male

Heart Rate: 62 bpm

Patient Vitals

BP: 100/70 mmHg  
Weight: 48 kg  
Height: 162 cm  
Pulse: 74 bpm  
SpO2: NA  
Resp: NA  
Others:

Measurements  
QRSD: 72ms  
QT: 366ms  
QTcB: 371ms  
PR: 126ms  
P-R-T: 48° 75° 70°

REPORTED BY

*[Signature]*

Dr. Kratika Ingle  
MBBS, D.D.W., PG in Diabetology (USA)  
2012160418

Dr. Kratika Ingle, MD, is a board certified cardiologist with over 15 years of experience in the field of cardiology. She is currently practicing at Suburban Diagnostics, a leading diagnostic center in the region. She is also a member of the American Heart Association and the American College of Cardiology. She has published several research papers in the field of cardiology and has been invited to speak at various medical conferences. She is dedicated to providing the highest quality of care to her patients and is committed to staying up-to-date on the latest medical advancements.

Authenticity Check



Use a QR Code Scanner  
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CID : 2314718216  
Name : Mr Prashant AHIRRAO  
Age / Sex : 40 Years/Male  
Ref. Dr :  
Reg. Location : Pimple Saudagar, Pune Main Centre  
Reg. Date : 27-May-2023  
Reported : 27-May-2023 / 10:36

**ULTRASOUND ABDOMEN AND PELVIS**

**Liver-** Normal in size (11.6cm), shape and echo pattern. No focal lesion. Intrahepatic biliary and portal radicals appear normal. Visualized portion of CBD appears normal in calibre. Portal vein appears normal.

**Gall bladder-** partially distended with normal wall thickness. No calculus or mass lesion is visualized. No pericholecystic collection.

**Pancreas-** Head and body are visualized and appear normal in size, shape and echo pattern. No focal lesion seen. No peripancreatic collection noted.

**Spleen -** Appears normal in size (8.5cm), shape & echo pattern. No focal lesion seen.

**Kidneys-** Right kidney -9.6 x 3.4cm, Left kidney -10.2 x 4.9cm, both kidneys appear normal in size, shape, position & echo pattern with maintained corticomedullary differentiation. No hydronephrosis, hydroureter or calculus noted.

**Urinary bladder-** Is partially distended & shows normal wall thickness. No calculus or mass lesion is noted.

**Prostate -** appears normal-3.7 x 2.3 x 2.7cm (Vol-12cc) in size, shape and echo-pattern for age. No focal lesion .

No free fluid in abdomen and pelvis. Visualized bowel loops are well distended appear grossly normal and show normal peristalsis. No evidence of enlarged lymph nodes.

**IMPRESSION:**

**No significant sonological abnormality is detected.**

Advice - Clinical correlation and further evaluation if clinically indicated.

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

Dr. Prajakta Ingley  
MBBS, MD (Radio-diagnosis)  
Reg No - 2016/02/0283

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CID : 2314718216  
Name : Mr Prashant ..  
Age / Sex : 0 Years/Male  
Ref. Dr :  
Reg. Location : Pimple Saudagar, Pune Main Centre  
Reg. Date : 27-May-2023  
Reported : 27-May-2023 / 11:54

**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. Prajakta Ingley  
MBBS, MD (Radio-diagnosis)  
Reg No - 2016/02/0283



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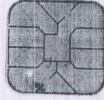
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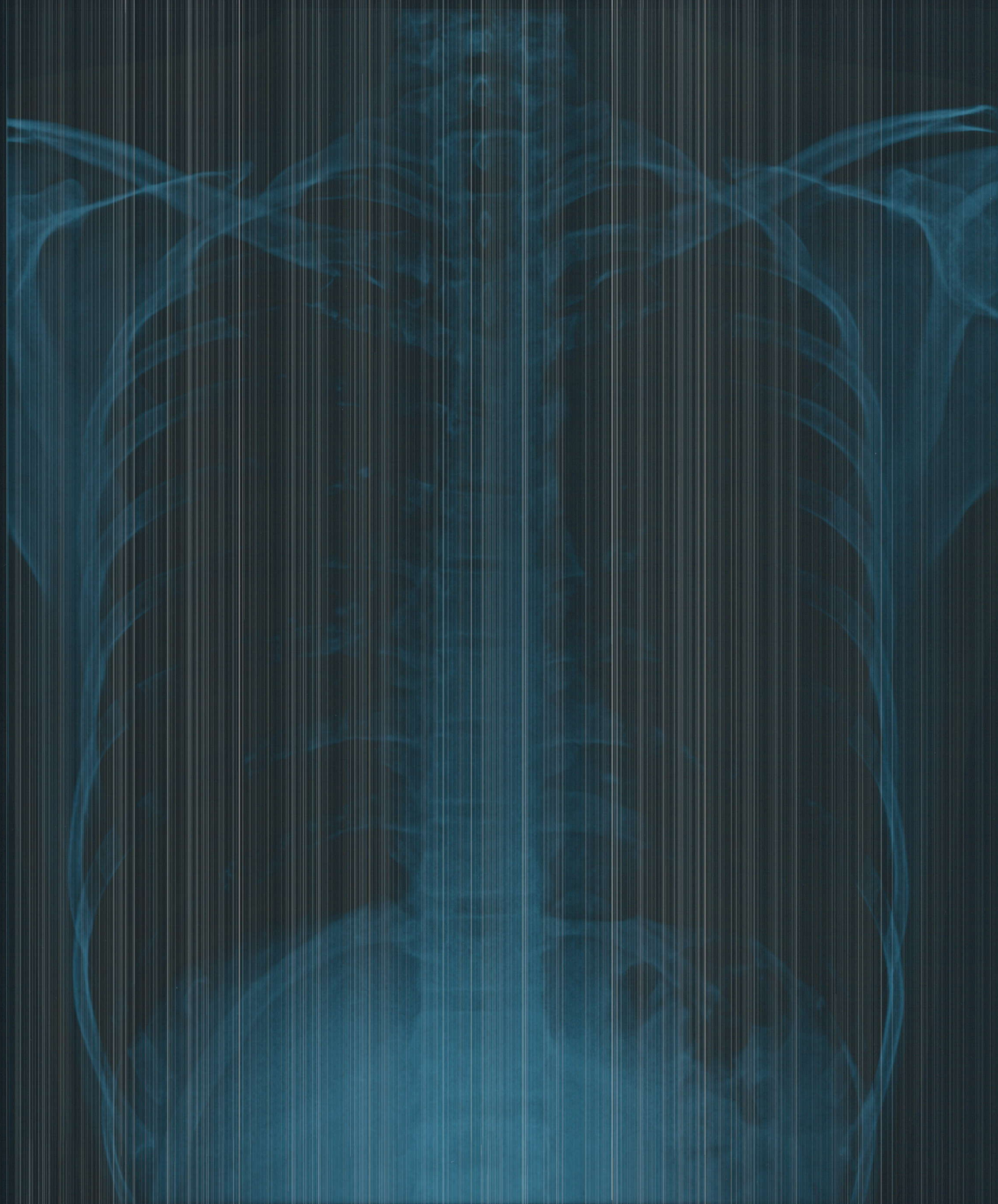
Name: PRASHANT AHIRRAO  
S/D/W of: POPATRAO  
Add: A/P. SHIVPRATAP COLONY DEOPUR, DHULE.  
DIST. DHULE.

PIN: 424002  
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Impression of Holder

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Garden Chowk, Next to Recha Krishna  
Hotel, Pimple Saudagar, Pune-411 021



Mr Prashant AHIRRAO M 40 YRS 2314718216 CHEST PA 5/27/2023  
SUBURBAN DIAGNOSTICS PIMPLE SAUDAGAR