



CID : 2406221901
Name : MR.ASHUTOSH RASTOGI
Age / Gender : 36 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 02-Mar-2024 / 10:24
Reported : 02-Mar-2024 / 13:07

Use a QR Code Scanner
Application To Scan the Code

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>
<u>RBC PARAMETERS</u>			
Haemoglobin	14.2	13.0-17.0 g/dL	Spectrophotometric
RBC	4.94	4.5-5.5 mil/cmm	Elect. Impedance
PCV	41.9	40-50 %	Measured
MCV	85	80-100 fl	Calculated
MCH	28.7	27-32 pg	Calculated
MCHC	33.8	31.5-34.5 g/dL	Calculated
RDW	14.9	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	5840	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	37.5	20-40 %	
Absolute Lymphocytes	2190.0	1000-3000 /cmm	Calculated
Monocytes	6.5	2-10 %	
Absolute Monocytes	379.6	200-1000 /cmm	Calculated
Neutrophils	51.5	40-80 %	
Absolute Neutrophils	3007.6	2000-7000 /cmm	Calculated
Eosinophils	4.0	1-6 %	
Absolute Eosinophils	233.6	20-500 /cmm	Calculated
Basophils	0.5	0.1-2 %	
Absolute Basophils	29.2	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	260000	150000-400000 /cmm	Elect. Impedance
MPV	12.1	6-11 fl	Calculated
PDW	25.1	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			
Hypochromia	-		
Microcytosis	-		



CID : 2406221901
Name : MR.ASHUTOSH RASTOGI
Age / Gender : 36 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner
Application To Scan the Code
Collected : 02-Mar-2024 / 10:24
Reported : 02-Mar-2024 / 12:42

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 **23** 2-15 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
- Brigiden 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 Borivali Lab, Borivali West

*** End Of Report ***



J Thakker

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



CID : 2406221901
Name : MR.ASHUTOSH RASTOGI
Age / Gender : 36 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 02-Mar-2024 / 10:24
Reported : 02-Mar-2024 / 14:43

Use a QR Code Scanner
Application To Scan the Code

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	95.7	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.42	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.2	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.22	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.2	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	5.2	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.0	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	2.6	1 - 2	Calculated
SGOT (AST), Serum	24.1	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	27.4	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	12.7	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	91.5	40-130 U/L	Colorimetric
BLOOD UREA, Serum	31.7	12.8-42.8 mg/dl	Kinetic
BUN, Serum	14.8	6-20 mg/dl	Calculated
CREATININE, Serum	1.11	0.67-1.17 mg/dl	Enzymatic
eGFR, Serum	88	(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



CID : 2406221901
Name : MR.ASHUTOSH RASTOGI
Age / Gender : 36 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 02-Mar-2024 / 10:24
Reported : 02-Mar-2024 / 16:38

Use a QR Code Scanner
Application To Scan the Code

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

URIC ACID, Serum	6.7	3.5-7.2 mg/dl	Enzymatic
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

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



Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2406221901
Name : MR.ASHUTOSH RASTOGI
Age / Gender : 36 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 02-Mar-2024 / 10:24
Reported : 02-Mar-2024 / 13:56

Use a QR Code Scanner
Application To Scan the Code

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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	6.2	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	131.2	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 Borivali Lab, Borivali West

*** End Of Report ***



J Thakker

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



CID : 2406221901
Name : MR.ASHUTOSH RASTOGI
Age / Gender : 36 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner
Application To Scan the Code
Collected : 02-Mar-2024 / 10:24
Reported : 02-Mar-2024 / 17:47

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

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

NOTE: Test performed by automated Erythrocytes magnetized technology (EMT) 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 SDRL, Vidyavihar Lab
*** End Of Report ***



Dr. Leena Salunkhe
Dr.LEENA SALUNKHE
M.B.B.S, DPB (PATH)
Pathologist



CID : 2406221901
Name : MR.ASHUTOSH RASTOGI
Age / Gender : 36 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner
Application To Scan the Code
Collected : 02-Mar-2024 / 10:24
Reported : 02-Mar-2024 / 16:05

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	291.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	252.0	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	36.7	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	254.3	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	208.0	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	46.3	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	7.9	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	5.7	0-3.5 Ratio	Calculated

Note : LDL test is performed by direct measurement.

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



Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



CID : 2406221901
 Name : MR.ASHUTOSH RASTOGI
 Age / Gender : 36 Years / Male
 Consulting Dr. : -
 Reg. Location : Borivali West (Main Centre)

Collected : 02-Mar-2024 / 10:24
 Reported : 02-Mar-2024 / 14:24

Use a QR Code Scanner
 Application To Scan the Code

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	4.9	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	13.7	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	4.69	0.35-5.5 microIU/ml	ECLIA



CID : 2406221901
Name : MR.ASHUTOSH RASTOGI
Age / Gender : 36 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner
Application To Scan the Code
Collected : 02-Mar-2024 / 10:24
Reported : 02-Mar-2024 / 14:24

Interpretation:

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

Clinical Significance:

- 1)TSH Values between high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2)TSH values may be trasiently altered becuae 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 Borivali Lab, Borivali West
*** End Of Report ***



Bmhasakar

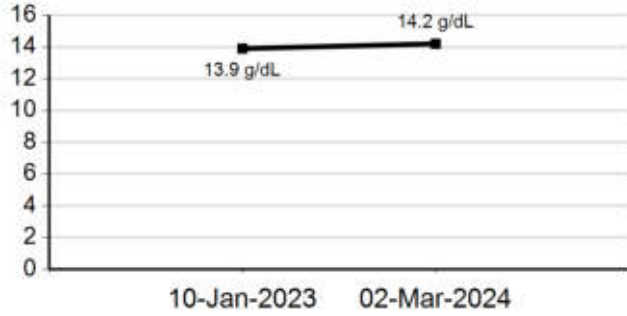
Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



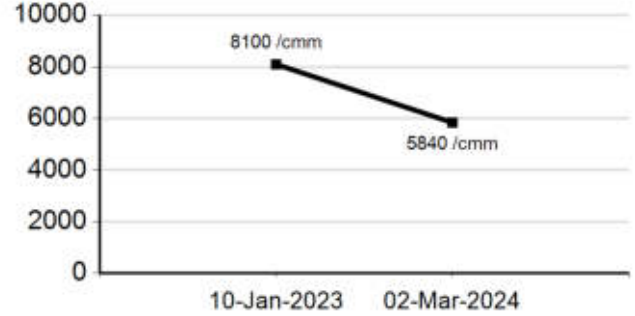
Use a QR Code Scanner Application To Scan the Code

CID : 2406221901
 Name : MR.ASHUTOSH RASTOGI
 Age / Gender : 36 Years / Male
 Consulting Dr. : -
 Reg. Location : Borivali West (Main Centre)

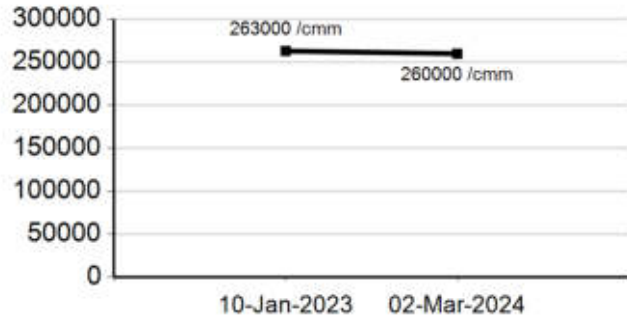
Haemoglobin



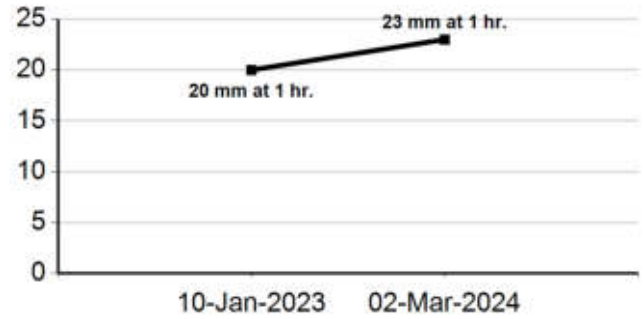
WBC Total Count



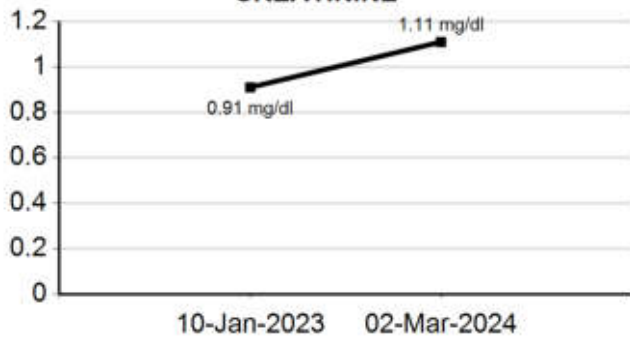
Platelet Count



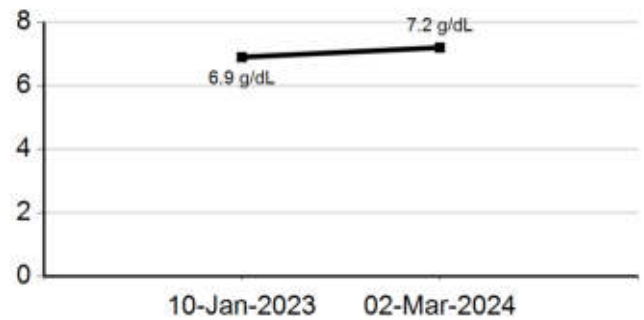
ESR



CREATININE



TOTAL PROTEINS

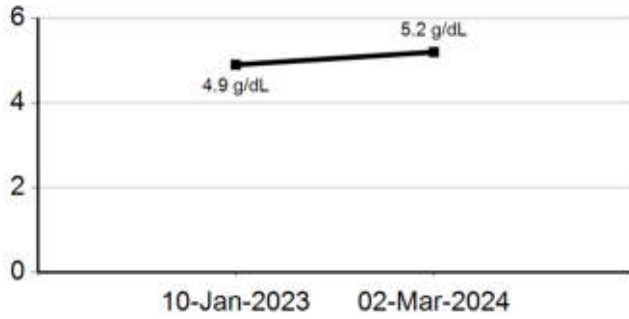




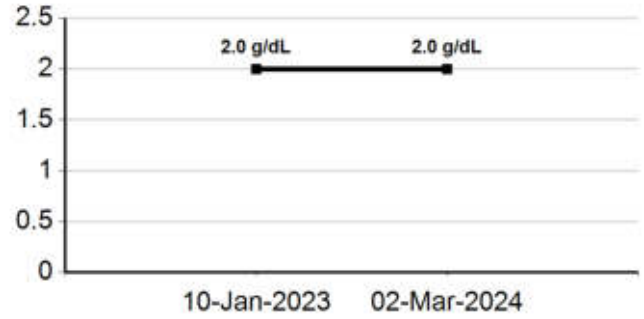
Use a QR Code Scanner
Application To Scan the Code

CID : 2406221901
Name : MR.ASHUTOSH RASTOGI
Age / Gender : 36 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

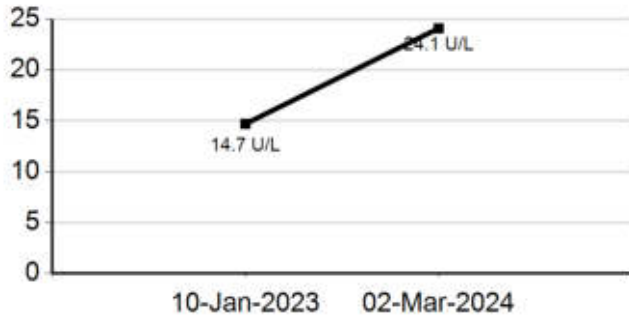
ALBUMIN



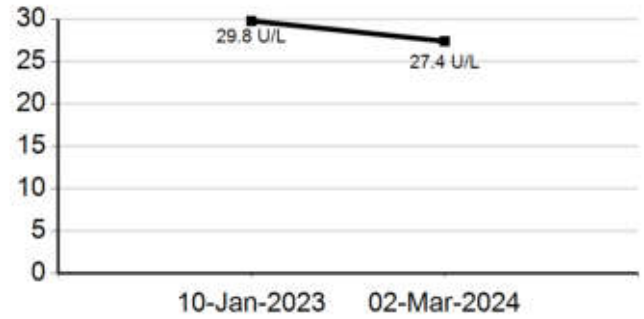
GLOBULIN



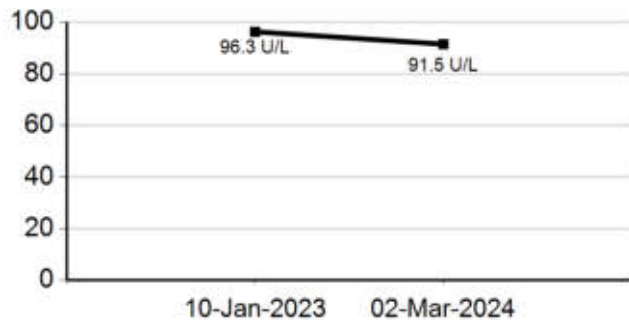
SGOT (AST)



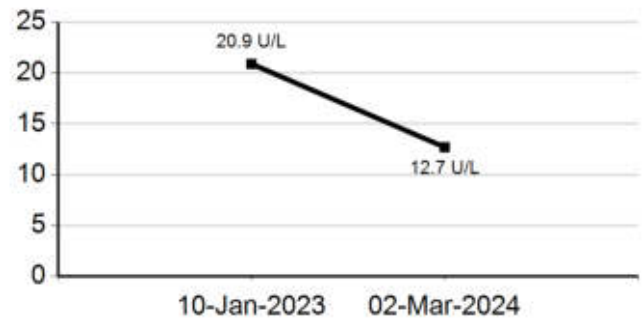
SGPT (ALT)



ALKALINE PHOSPHATASE



GAMMA GT

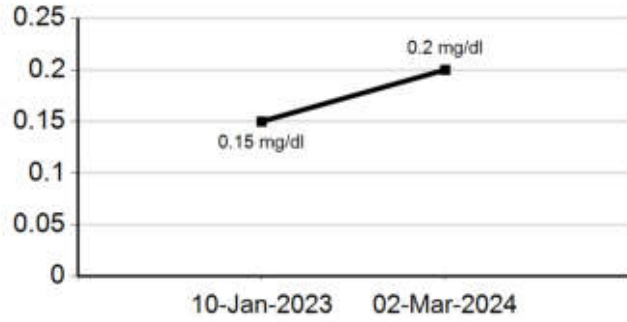




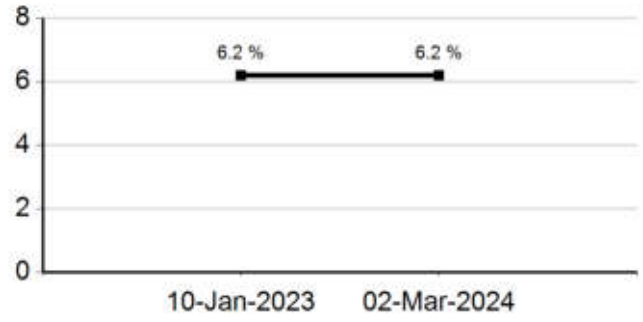
Use a QR Code Scanner Application To Scan the Code

CID : 2406221901
Name : MR.ASHUTOSH RASTOGI
Age / Gender : 36 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

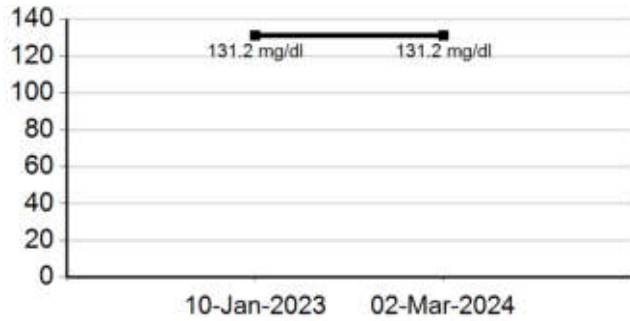
BILIRUBIN (DIRECT)



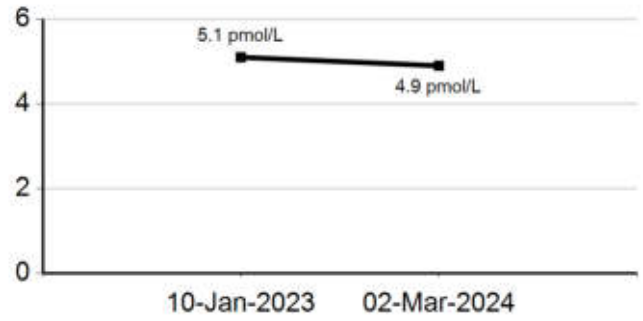
Glycosylated Hemoglobin (HbA1c)



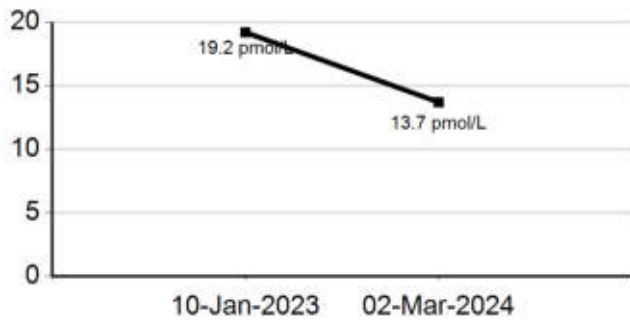
Estimated Average Glucose (eAG)



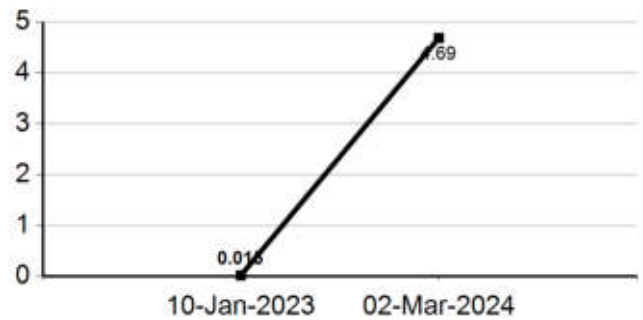
Free T3



Free T4



sensitive TSH



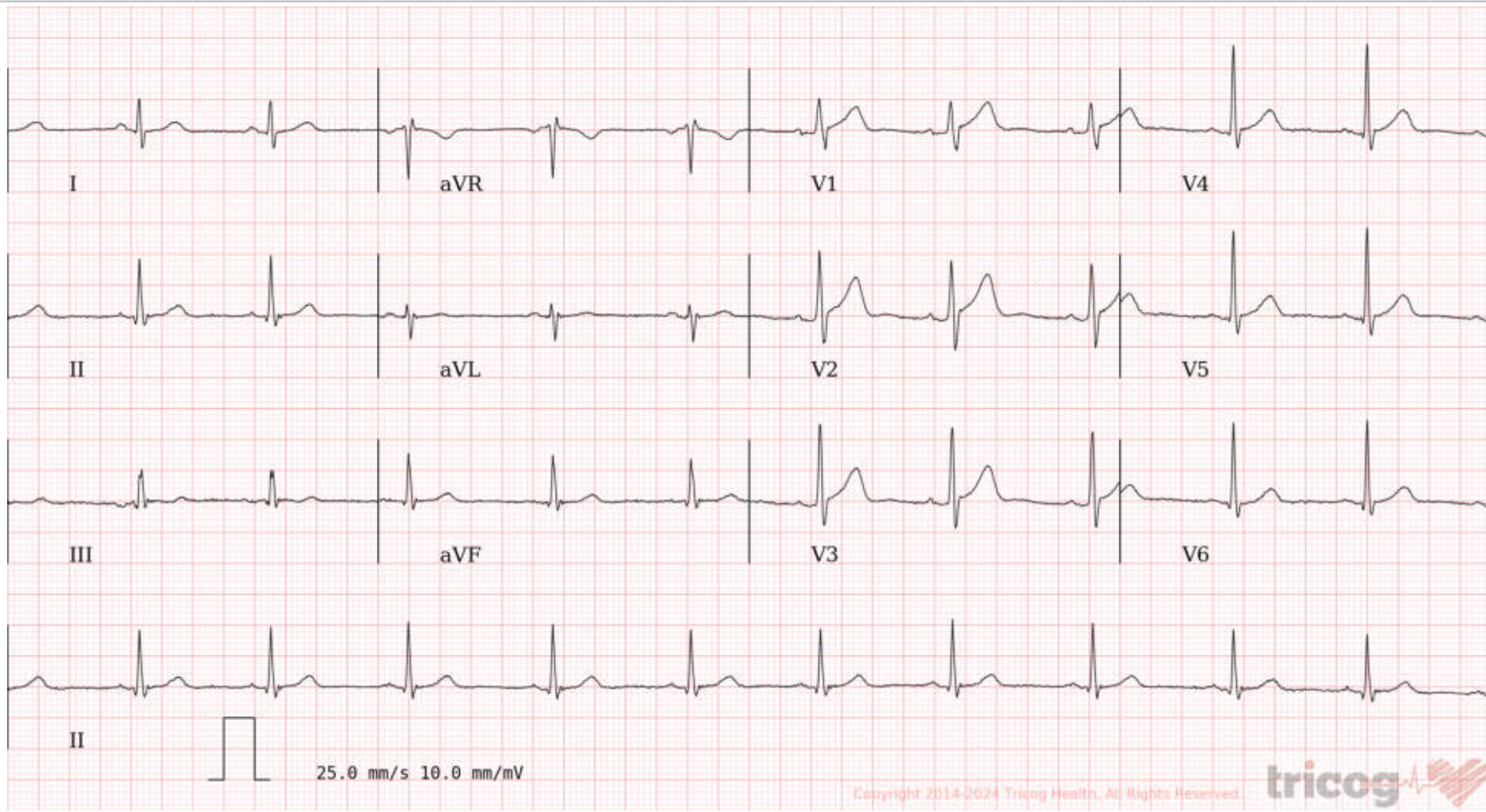
SUBURBAN DIAGNOSTICS - BORIVALI WEST



Patient Name: ASHUTOSH RASTOGI

Date and Time: 2nd Mar 24 12:34 PM

Patient ID: 2406221901



Age **36** **NA** **NA**
years months days

Gender **Male**

Heart Rate **68bpm**

Patient Vitals

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

Measurements

QRSD: 90ms
QT: 376ms
QTcB: 399ms
PR: 136ms
P-R-T: 8° 65° 32°

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

REPORTED BY

Dr Nitin Sonavane
M.B.B.S.AFLH, D.DIAB, D.CARD
Consultant Cardiologist
87714

Date:-

CID:

Name:-

Ashutosh Rastogi Sex / Age: /

EYE CHECK UP

Chief complaints:

Systemic Diseases:

Past history:

Unaided Vision:

RE LE

Aided Vision:

6/6 6/6

Refraction:

N16 N16

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / Abnormal

Remark:

Suburban Diagnostics Pvt. Ltd.
 301 & 302, 2nd Floor, Above Mercedes Showroom,
 Borivali (West), Mumbai - 400 052.

Name : MR.ASHUTOSH RASTOGI

Age / Gender : 36 Years/Male

Consulting Dr. :

Collected : 02-Mar-2024 / 10:05

Reg.Location : Borivali West (Main Centre)

Reported : 02-Mar-2024 / 17:39

PHYSICAL EXAMINATION REPORT

History and Complaints:

Nil

EXAMINATION FINDINGS:

Height (cms): 177

Weight (kg): 79

Temp (0c): Afebrile

Skin: NAD

Blood Pressure (mm/hg): 110/80

Nails: NAD

Pulse: 72/min

Lymph Node: Not Palpable

Systems

Cardiovascular: S1S2-Normal

Respiratory: Chest-Clear

Genitourinary: NAD

GI System: NAD

CNS: NAD

IMPRESSION:

Lipid r

ADVICE:

Physician Refⁿ

CHIEF COMPLAINTS:

- | | |
|----------------------|----|
| 1) Hypertension: | No |
| 2) IHD | No |
| 3) Arrhythmia | No |
| 4) Diabetes Mellitus | No |
| 5) Tuberculosis | No |
| 6) Asthama | No |
| 7) Pulmonary Disease | No |

CID# : 2406221901

Name : MR.ASHUTOSH RASTOGI

Age / Gender : 36 Years/Male

Consulting Dr. :

Collected : 02-Mar-2024 / 10:05

Reg.Location : Borivali West (Main Centre)

Reported : 02-Mar-2024 / 17:39

- | | |
|--|----|
| 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 | No |
| 2) Smoking | No |
| 3) Diet | Mix |
| 4) Medication | No |

*** End Of Report ***

Suburban Diagnostics (I) Pvt. Ltd.
301& 302, 2nd Floor, Sun Plaza, Borivali West,
Above Janta, Janta Road,
Borivali (West), Mumbai - 400 092

Dr.NITIN SONAVANE
PHYSICIAN

DR. NITIN SONAVANE
M.B.B.S. (M.D.)
CONSULTANT PHYSICIAN
REGD. NO. : 87714

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

Name: ASHUTOSH RASTOGI

Date: 02-03-2024 Time: 13:17

Age: 36 Gender: M Height: 177 cms Weight: 79 Kg ID: 2406221901

Clinical History: NIL

Medications: NIL

Test Details:

Protocol: Bruce Predicted Max HR: 184 Target HR: 156 (85% of Pr. MHR)

Exercise Time: 0:09:02 Achieved Max HR: 159 (86% of Pr. MHR)

Max BP: 160/80 Max BP x HR: 25440 Max Mets: 10.2

Test Termination Criteria: TEST COMPLET

Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	Max ST Level mm	Max ST Slope mV/s
Supine	00:07	1	0	0	85	110/80	9350	1.2 V2	2.3 V2
Standing	00:09	1	0	0	85	110/80	9350	1.5 V2	2.2 V2
HyperVentilation	00:10	1	0	0	74	110/80	8140	-1 III	2.2 V2
Pre Test	00:08	1	1.6	0	82	110/80	9020	-1.2 III	2.2 V2
Stage: 1	03:00	4.7	2.7	10	114	110/80	12540	-0.8 II	2.4 V3
Stage: 2	03:00	7	4	12	140	130/80	18200	0.9 II	0.3 I
Stage: 3	03:00	10.1	5.5	14	159	160/80	25440	0.6 V3	0.6 V3
Peak Exercise	00:02	10.2	6.8	16	158	160/80	25280	0.6 V2	0.5 V3
Recovery1	01:00	1	0	0	135	140/80	18000	1.3 V3	0.8 V3
Recovery2	00:27	1	0	0	122	140/80	17080	0.5 V3	2.1 V3

Interpretation

The Patient Exercised according to Bruce Protocol for 0:09:02 achieving a work level of 10.2 METS.
 Resting Heart Rate, initially 85 bpm rose to a max. heart rate of 159bpm (86% of Predicted Maximum Heart Rate).
 Resting Blood Pressure of 110/80 mmHg, rose to a maximum Blood Pressure of 160/80 mmHg
 Good Effort tolerance Normal HR & BP Response No Angina or Arrhythmias
 No Significant ST-T Change Noted During Exercise Stress test Negative for Stress inducible ischaemia.

DR. NITIN SONAVANE
M.B.B.S. (Genl) D.M.D.
CONSULTANT CARDIOLOGIST
REC. NO. 2714

Ref. Doctor: ---

Doctor: DR. NITIN SONAVANE

SCHILLER
The Art of Diagnostics

(Summary Report edited by User)

Suburban Diagnostics
Cardiovit CS-2D Version 3.4
3018 300, 2nd Floor, B-11, Borivali
Borivali (West), Mumbai - 400082

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ASHUTOSH RASTOGI (36 M)

Bruce Protocol
STLevel(mm) STISlope(mV/s)

ID: 2406221901
Stage: Supine

Date: 02-03-2024
Speed: 0 km/h

Exec Time : 0:00:00
Slope: 0%

Stage Time: 00:07
THR: 156 bpm

HR: 85 bpm

BP: 110/80 mmHg
STLevel(mm) STISlope(mV/s)

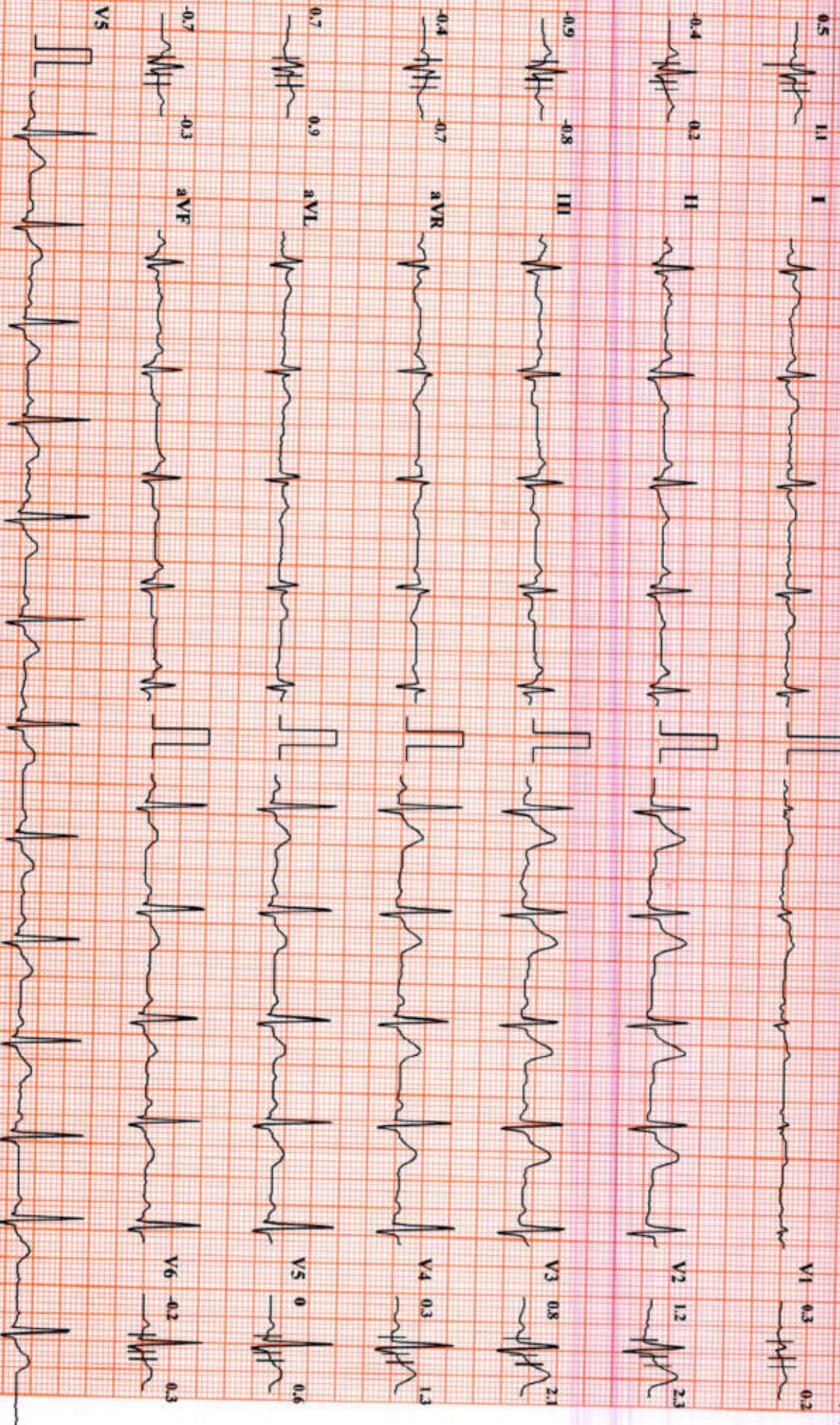


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ASHUTOSH RASTOGI (36 M)

Bruce Protocol
STLevel(mm) STISlope(mV/s)

ID: 2466221901
Stage: Standing

Date: 02-03-2024
Speed: 0

Exec Time : 0:00:00
Slope: 0%

Sage Time: 00:09
THR: 156 bpm

HR: 85 bpm

BP: 110/80 mmHg
STLevel(mm) STISlope(mV/s)

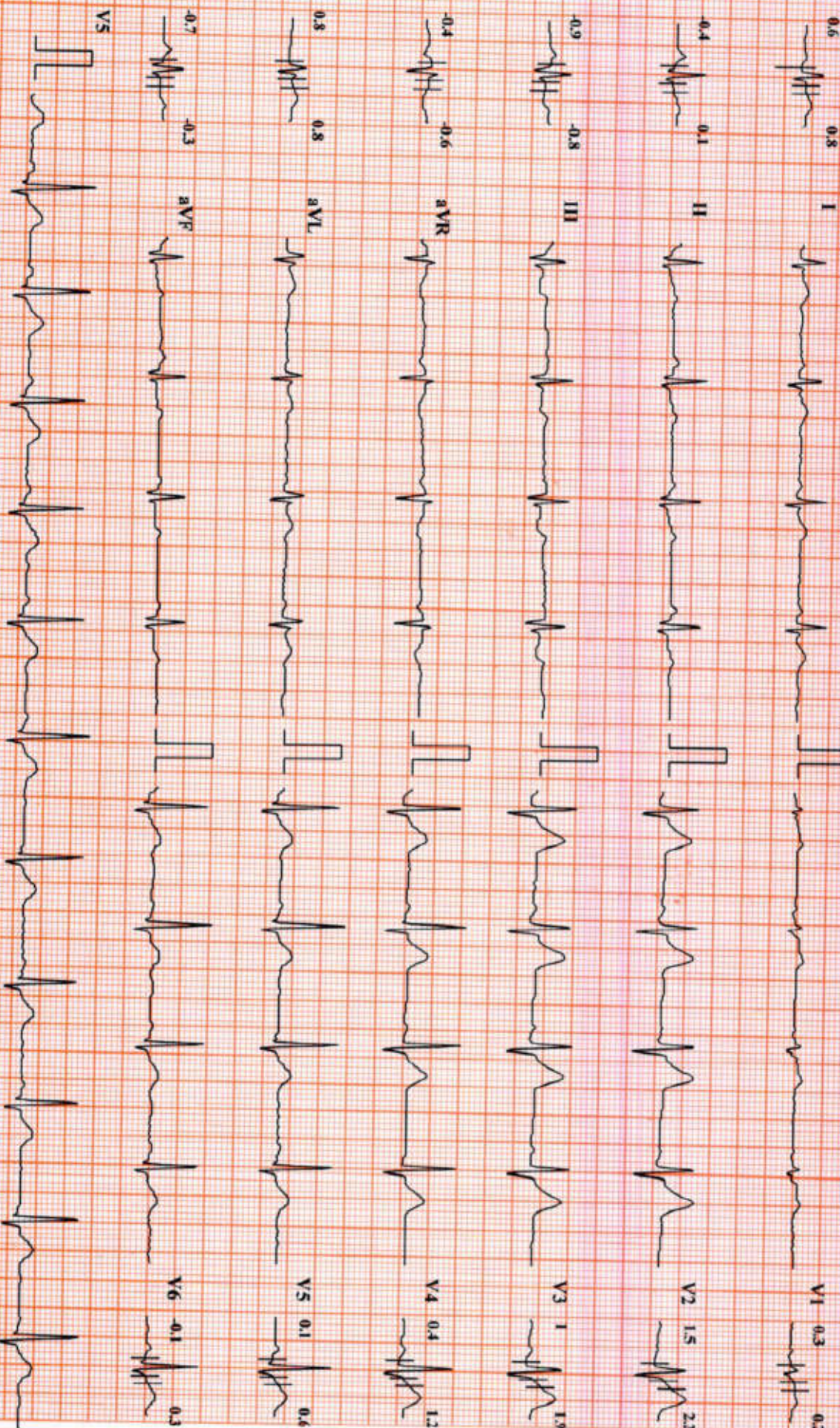


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

Schiller Cardioport CS-20 Version 3.4

ASHUTOSH RASTOGI (36 M)

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

Bruce Protocol
STL(evel)(mm) STSlope(mV/s)

ID: 2406221901
Stage: Hyper Ventilation

Date: 02-03-2024
Speed: 0

Exec Time : 0:00:00
Slope: 0 %

Stage Time: 00:10
THR: 156 bpm

HR: 74 bpm

BP: 110/80 mmHg
STL(evel)(mm) STSlope(mV/s)

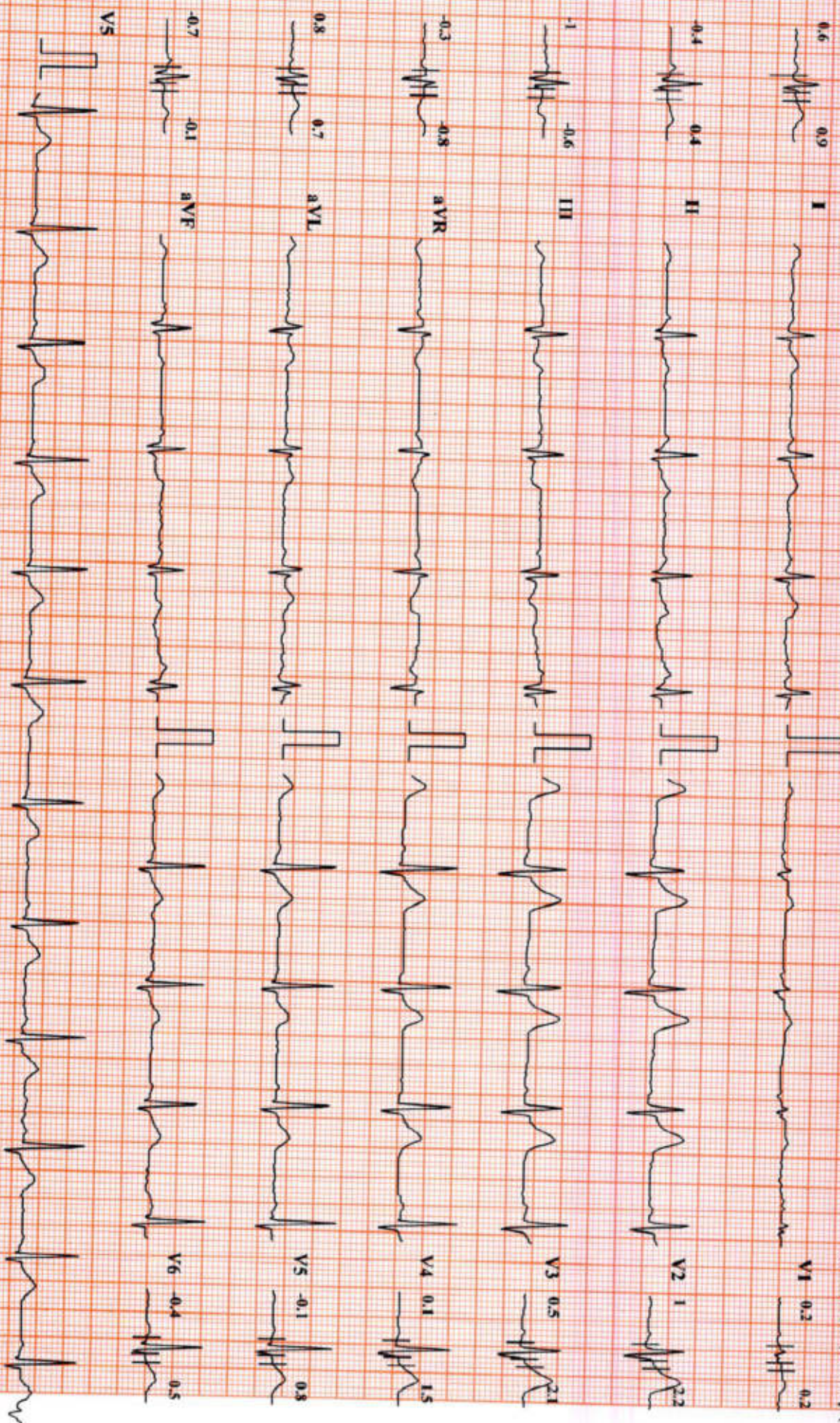


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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



SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ASHUTOSH RASTOGI (36 M)

Bruce Protocol ID: 2406221901

STLevel(mm) STSlope(mV/s) Stage: 1

Date: 02-03-2024
Speed: 2.7 kmph

Exec Time : 0:03:00
Slope: 10 %

Stage Time: 03:00
THR: 156 bpm

HR: 114 bpm

BP: 110/80 mmHg

STLevel(mm) STSlope(mV/s)

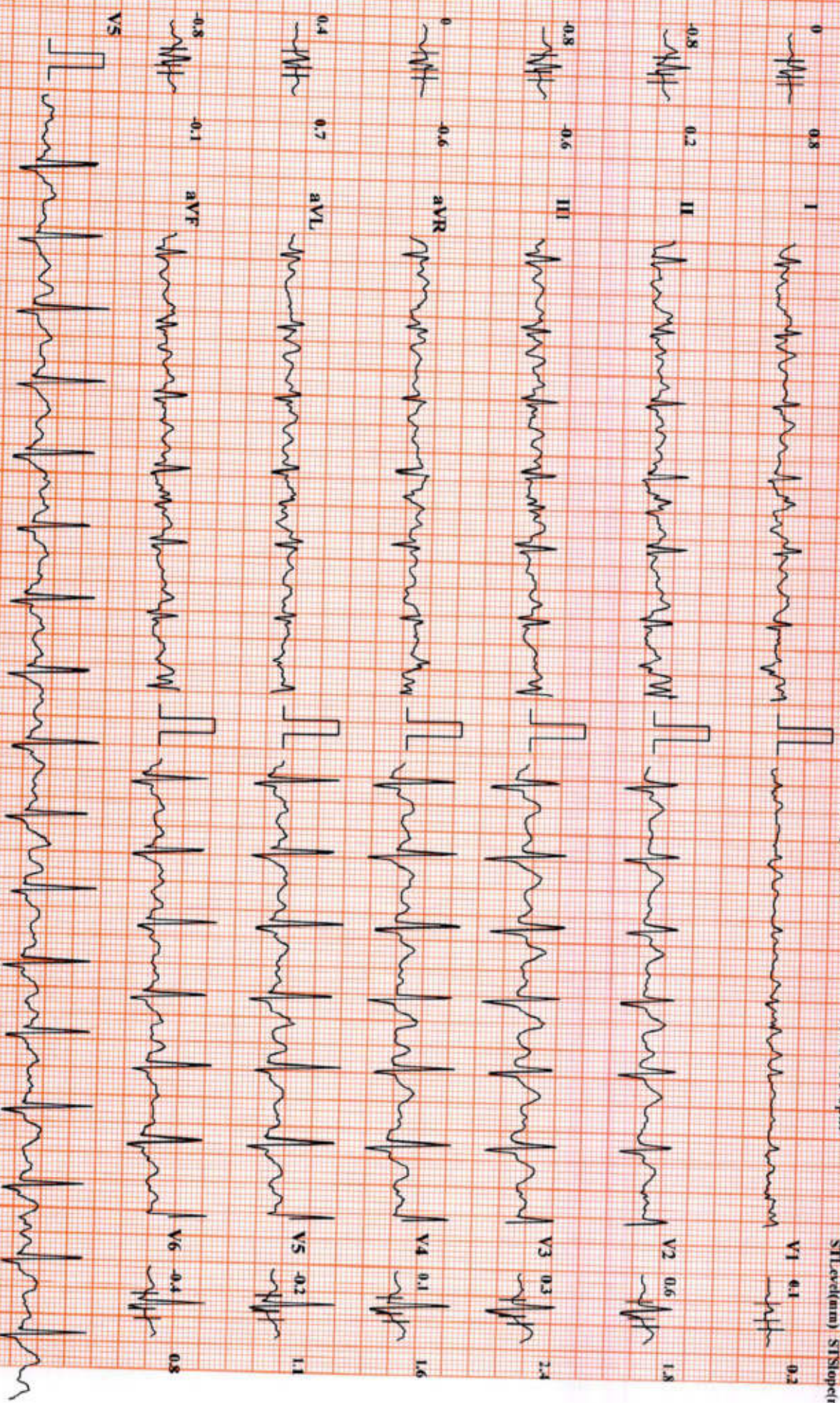


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter ON

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

Schiller Cardioit CS-26 Version 3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ASHUTOSH RASTOGI (36 M)

Bruce Protocol ID: 2406221901

STLevel(mm) STSlope(mV/s)

Stage: 2

Date: 02-03-2024

Speed: 4 kmph

Exec Time : 0:06:00

Slope: 12 %

Stage Time: 03:00

THR: 156 bpm

HR: 140 bpm

BP: 130/80 mmHg

STLevel(mm) STSlope(mV/s)

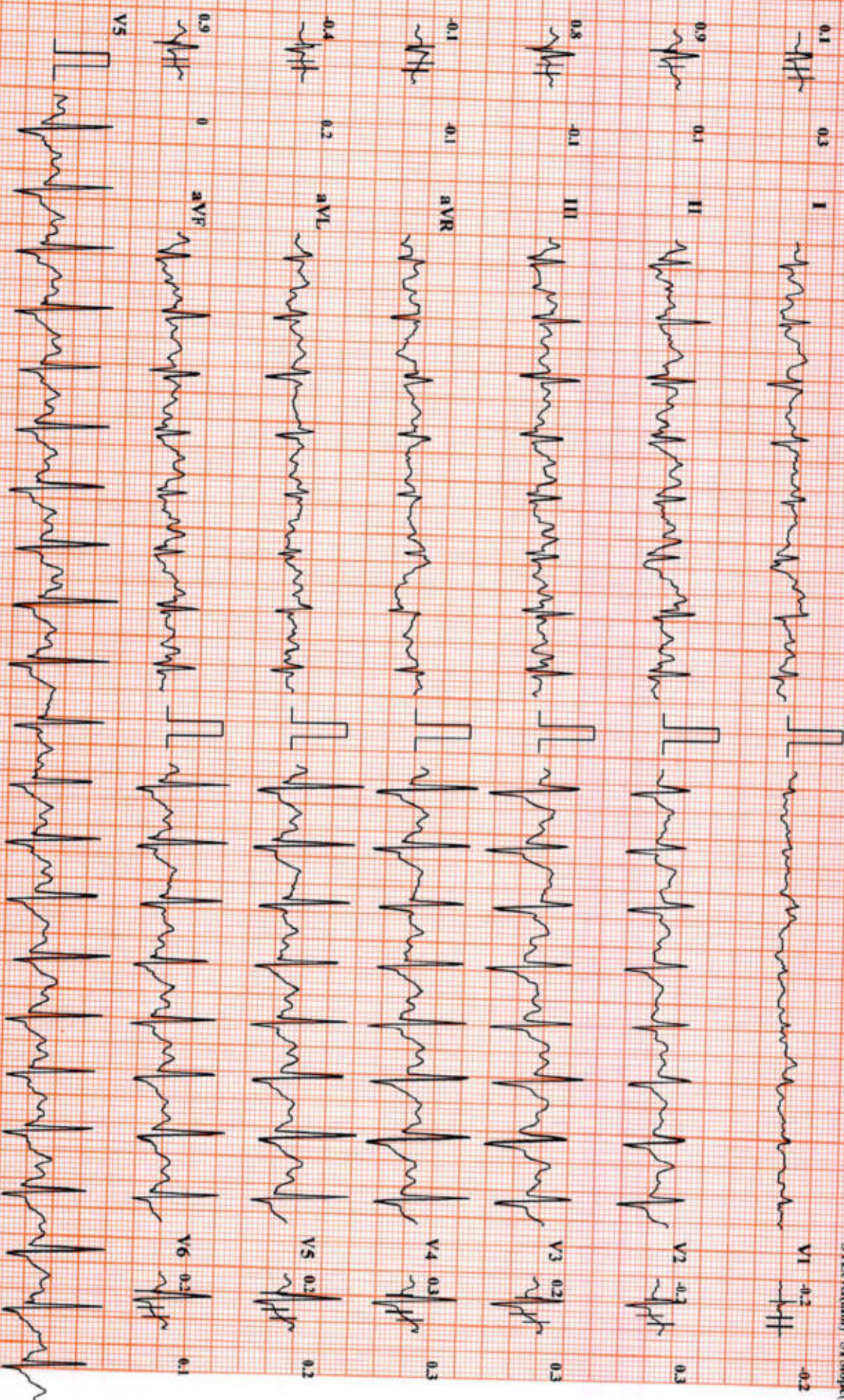


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Main Filter: ON

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

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ASHUTOSH RASTOGI (36 M)

ID: 2406221901

Date: 02-03-2024

Exec Time : 0:09:00

Stage Time: 03:00

HR: 159 bpm

Bruce Protocol
STLevel(mm) STSlope(mV/s)

Stage: 3

Speed: 5.5 kmph

Slope: 14 %

THR: 156 bpm

BP: 160/80 mmHg
STLevel(mm) STSlope(mV/s)

0.2 I



V1 0.1 -0.1

0.2 II



V2 0.5 0.5

0.2 III



V3 0.6 0.6

0.1 aVR



V4 0.3 0.5

0.1 aVL



V5 0.3 0.5

0.2 aVF



V6 0 0.3

0 V5



Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ASHUTOSH RASTOGI (36 M)

Brace Protocol
STLevel(mm) STSlope(mV/s)

ID: 2406221901
Stage: 4 Peak Exercise

Date: 02-03-2024
Speed: 6.8 kmph

Exec Time : 0:09:02
Slope: 16 %

Sage Time: 00:02
THR: 156 bpm

HR: 158 bpm

BP: 160/80 mmHg
STLevel(mm) STSlope(mV/s)

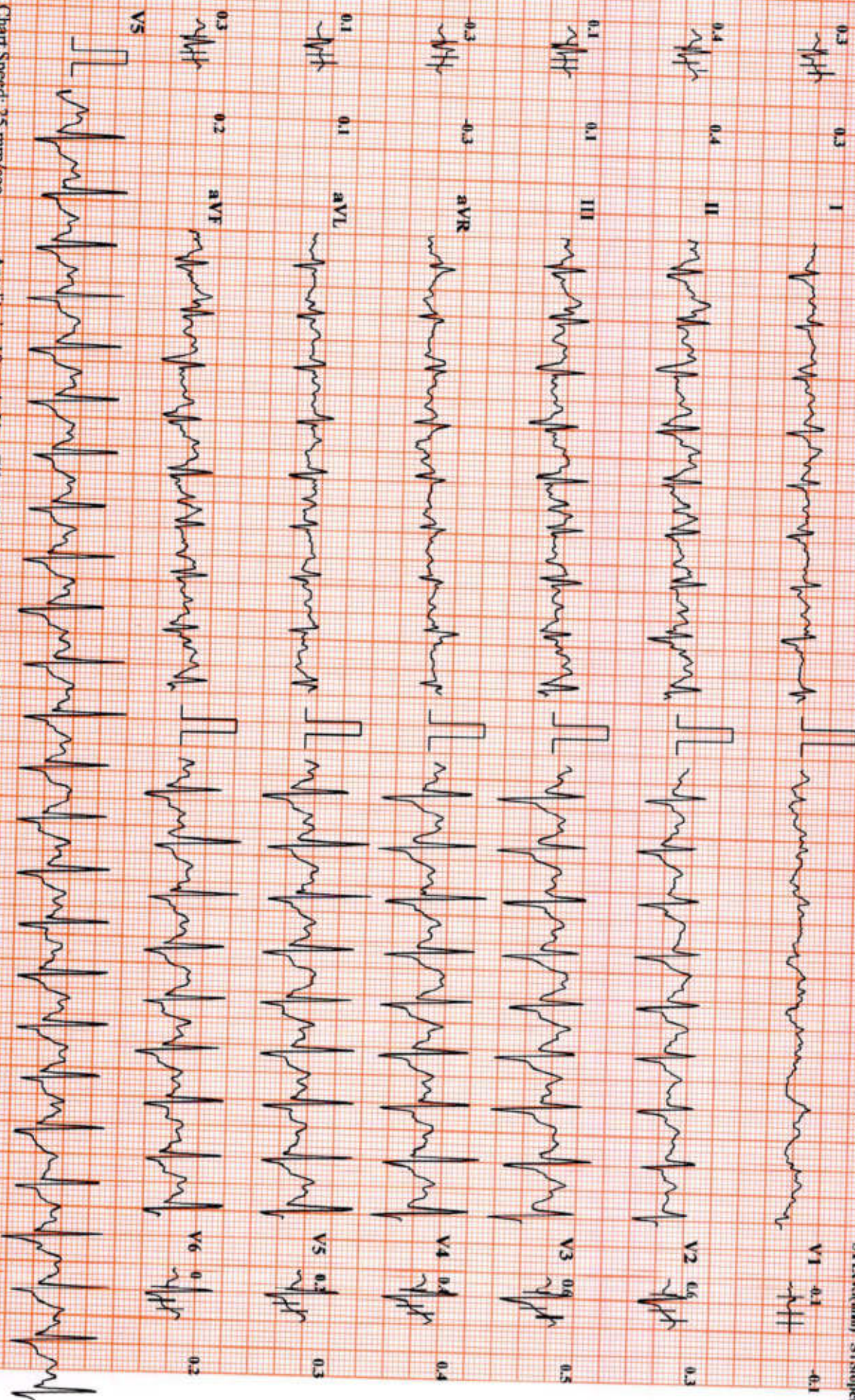


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ASHUTOSH RASTOGI (36 M)

Brice Protocol ID: 2406221901
ST1:4x(4mm) ST2:Slope(mV/s)

Date: 02-03-2024
Stage: Recovery 1
Speed: 0 kmph
Exec Time: 00:00
Slope: 0 %

HR: 145 bpm
BP: 160/80 mmHg
ST1:4x(4mm) ST2:Slope(mV/s)

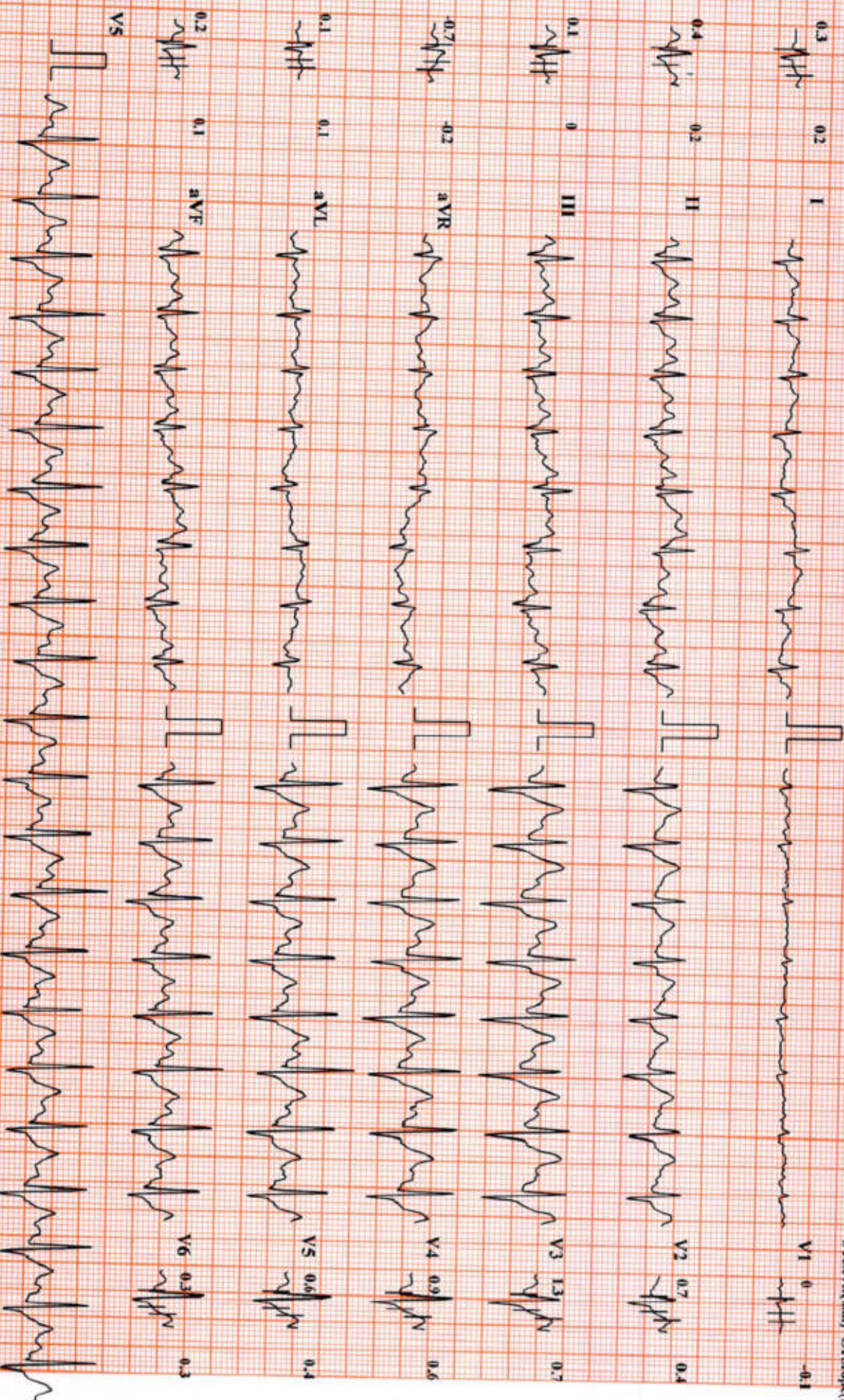


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

SUBURBAN DIAGNOSTICS PVT. LTD. BORIVALI

ASHUTOSH RASTOGI (36 M)

Brace Protocol
STLevel(mm) STSlope(mV/s)

ID: 2406221901
Stage: Recovery1

Date: 02-03-2024
Speed: 0 kmph

Exec Time : 00:00
Slope: 0 %

Stage Time: 01:00
THR: 156 bpm

HR: 135 bpm

BP: 140/80 mmHg
STLevel(mm) STSlope(mV/s)

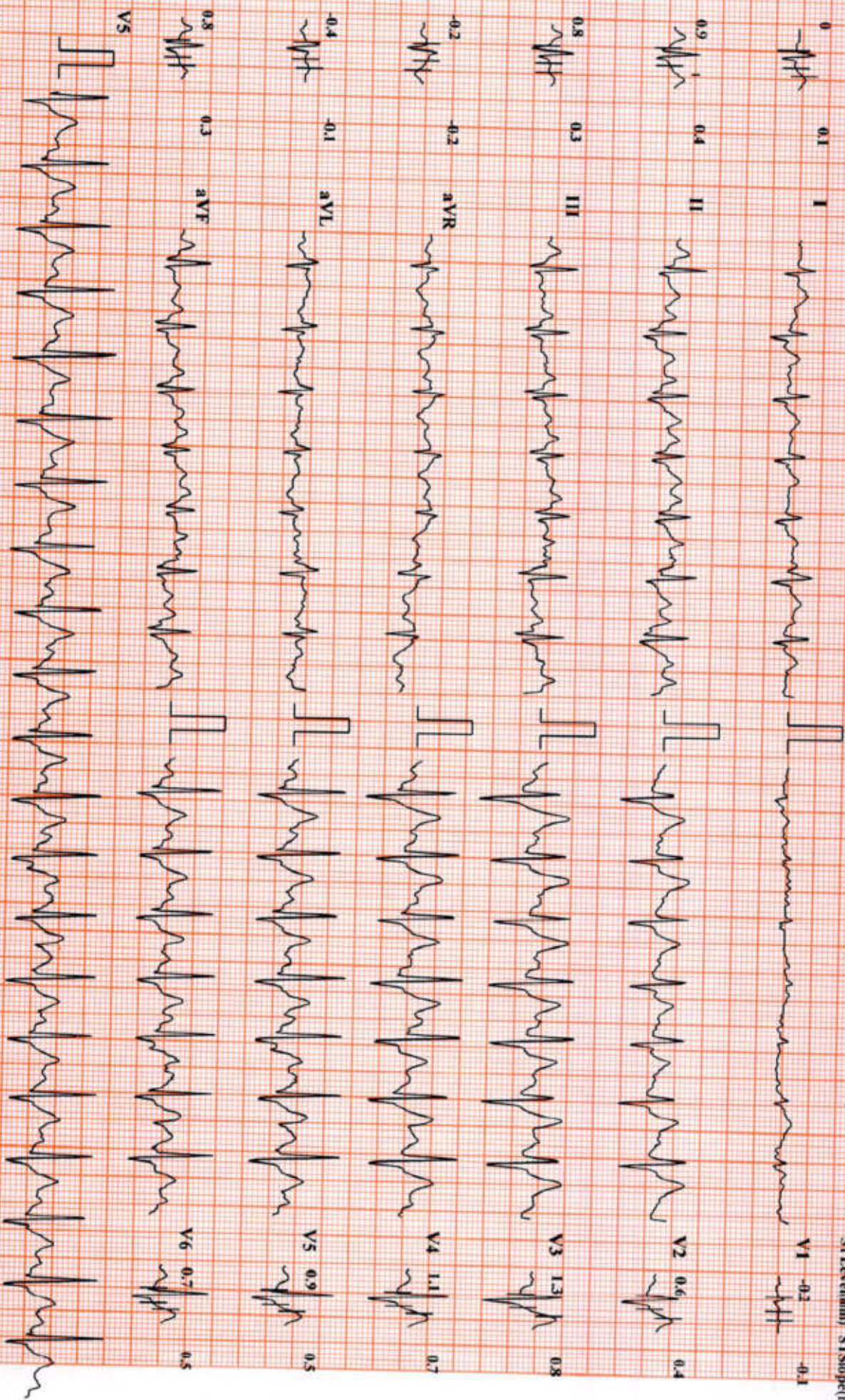


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ASHUTOSH RASTOGI (36 M)

Brace Protocol

STLevel(mm) STSlope(mV/s)

ID: 2406221901

Stage: Recovery2

Date: 02-03-2024

Speed: 0 kmph

Exec Time: 00:30

Slope: 0 %

Stage Time: 00:24

THR: 156 bpm

HR: 122 bpm

BP: 140/80 mmHg

STLevel(mm) STSlope(mV/s)

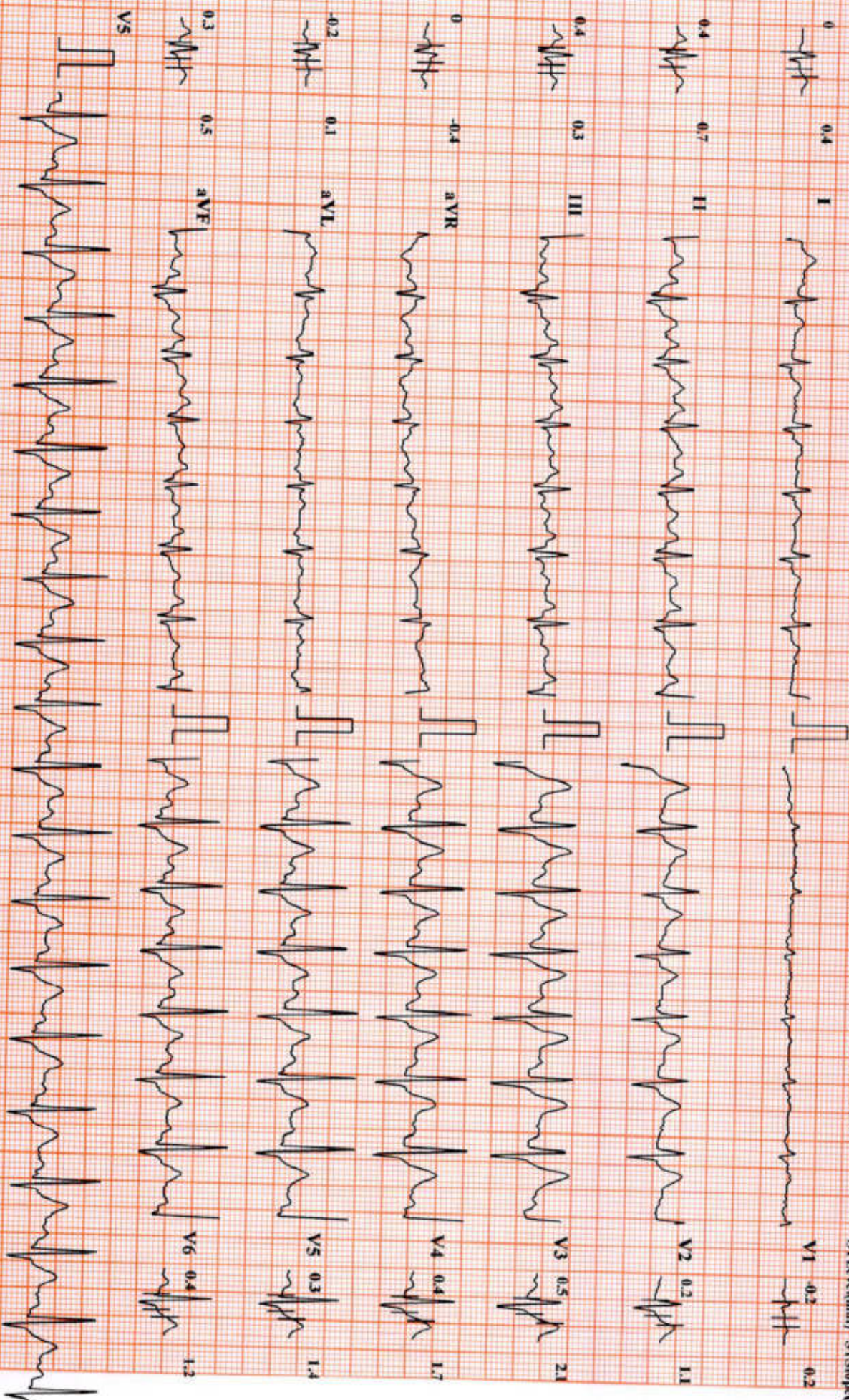
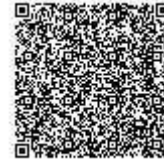


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Main Filter: ON

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



CID : 2406221901
Name : Mr Ashutosh Rastogi
Age / Sex : 36 Years/Male
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 02-Mar-2024
Reported : 02-Mar-2024/11:52

USG WHOLE ABDOMEN

LIVER: Liver is normal in size 14.2 cm with mild generalized increase in parenchymal echotexture. There is no intra-hepatic biliary radical dilatation.No evidence of any focal lesion.

GALL BLADDER: Gall bladder is distended and appears normal. No obvious wall thickening is noted. 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.

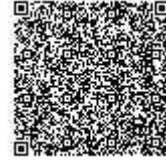
KIDNEYS: Right kidney measures 10.5 x 4 cm. Left kidney measures 10.8 x 4.6 cm. Both kidneys are normal in shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

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

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

PROSTATE: Prostate is normal in size and echotexture. Prostate measures 3.3 x 2.4 x 3 cm and prostatic weight is 13 gm. No evidence of any obvious focal lesion.

No free fluid or size significant lymphadenopathy is seen.



Use a QR Code Scanner
Application To Scan the Code

CID : 2406221901
Name : Mr Ashutosh Rastogi
Age / Sex : 36 Years/Male
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 02-Mar-2024
Reported : 02-Mar-2024/11:52

Opinion:

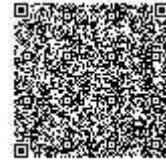
Grade I fatty infiltration of liver

For clinical correlation and follow up.

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have inter-observer variations. Further / Follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis. Patient was explained in detail verbally about the USG findings, USG measurements and its limitations. In case of any typographical error in the report, patient is requested to immediately contact the center for rectification within 7 days post which the center will not be responsible for any rectification. Please interpret accordingly.

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

DR.SUDHANSHU SAXENA
Consultant Radiologist
M.B.B.S DMRE (RadioDiagnosis)
RegNo .MMC 2016061376.



Use a QR Code Scanner
Application To Scan the Code

CID : 2406221901
Name : Mr Ashutosh Rastogi
Age / Sex : 36 Years/Male
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 02-Mar-2024
Reported : 02-Mar-2024/11:52



Use a QR Code Scanner
Application To Scan the Code

CID : 2406221901
Name : Mr Ashutosh Rastogi
Age / Sex : 36 Years/Male
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 02-Mar-2024
Reported : 02-Mar-2024/12:16

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:

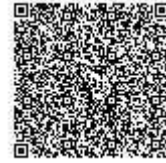
NO SIGNIFICANT ABNORMALITY IS DETECTED.

Kindly correlate clinically.

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. X ray is known to have inter-observer variations. Further / follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis. Please interpret accordingly. In case of any typographical error / spelling error in the report, patient is requested to immediately contact the centre within 7 days post which the center will not be responsible for any rectification.

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

DR.SUDHANSHU SAXENA
Consultant Radiologist
M.B.B.S DMRE (RadioDiagnosis)
RegNo .MMC 2016061376.



Use a QR Code Scanner
Application To Scan the Code

CID : 2406221901
Name : Mr Ashutosh Rastogi
Age / Sex : 36 Years/Male
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 02-Mar-2024
Reported : 02-Mar-2024/12:16