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Male/Female	
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281912024	Bill No. :
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Diet : Veg @// Mixed □ : Addiction : Smoking □ / Toba Any Other № © .	acco Chewing 🗆 / Alcohol 🗆/
HT / DM / IHD / Stroke / Any Mother = HT / DM / IHD / Str Siblings = HT / DM / IHD / St	oke / Any Other
Drug Allergy Any Other	
For HT / DM / IHD / Hypothyr Any Other NO.	oidism
G.E.: NAD R.S.: AEBE clear. C.V.S.: S, S2 (D) C.N.S.: NAD P/A: Soft	
	Male/FemaleUHID: $2g/g/2024$ Married/No. of Children / UnrNONOMuth complationMOHIOHemangiona (INO.Diet: Veg g/ Mixed \Box :Addiction : Smoking \Box / TobaAny OtherNO.HT / DM / IHD / Stroke / AnyMother = HT / DM / IHD / StrSiblings = HT / DM / IHD / StrSiblings = HT / DM / IHD / StrG. E.:May OtherFor HT / DM / IHD / HypothyrAny OtherNO.G. E.:MADR. S.:A E B EC.V. S.:S S S S CC.N.S.:NAD



Contact No: 77 9009 8009 • Email: support@simirahealthcare.com

www.simiradiagnostics.com



Billion (
Pulse (per min.) 64/uit	Blood Pressure (mm of Hg) 100/40 mm of Hg
	Gynaecology
Examined by	Dr. Santash Wakchaure
Complaint & Duration	
Other symptoms (Mict, boweis etc)	-
Menstrual History	Menarche Cycle Loss
	PainP.C.B
	L.M.PVagnal Discharge
	Cx. SmearContraception
Obstetric History	
Examination :	
Breast	-
Abdomen	-
	_
P.S.	
P.V.	
Gynaecology Impression & Recommendation	
Recommendation	
hysician Impression	
xamined by :	Overweight = To Reduce Weight
automos wy .	- Underweight = To Increase Weight

LARC :

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Name, Signature and Registration Number of the Oynaecologist / Radiologist / Director of the Clinic

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Place:

ID CENTER

Ref. Doctor Self



Name - Aughil Zale. Age/Sex. Year/m

Center Address - New Parvel

Vision Test- Appendix V

Visual Acuity Form R

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Signature of Candidata

DR. SANTOSHU WAS CHAL

1041 03 Faller a 147 Aug. 100 2010/10/2022

Processed By : Dr. Santosh UW at 1975



28/29/2024

Dates & Cores

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आधार - सामान्य माणसाचा अधिकार

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PATIENT'S NAME: MR. ZARE SUSHIL RAMESH	AGE: 31 YRS/M	
REFERRED BY: MEDIWHEEL	DATE: 28-09-2024	

ULTRASOUND ABDOMEN AND PELVIS

LIVER:

The liver is normal in size (14.6cm), shape and smooth margins. It shows bright parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein and CBD appears normal to the extent visualized.

GALL BLADDER:

The gall bladder is physiologically distended and appears normal. No evidence of gall stones or mass lesions seen.

PANCREAS:

The pancreas head and partial body is visualized and appears normal. No evidence of solid or cystic mass lesion. Rest of the pancreas is obscured due to bowel gas shadows.

KIDNEYS:

Both the kidneys are normal in size, shape and echotexture. No evidence of any calculus, hydronephrosis or mass lesion seen. Right Kidney: 9.8 x 3.2cm. Left Kidney: 11.1 x 4.1cm.

SPLEEN:

The spleen is normal in size (9.4cm) and echotexture. No evidence of focal lesion is noted.

There is no evidence of any lymphadenopathy or ascites.

URINARY BLADDER:

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



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PATIENT'S NAME: MR. ZARE SUSHIL RAMESH	AGE: 31 YRS/M	
REFERRED BY: MEDIWHEEL	DATE: 28-09-2024	

PROSTATE:

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The prostate is normal in size and volume is 17cc.

IMPRESSION:

· Grade-I fatty liver.

Suggestion: Clinicopathological correlation.

Note: Investigations have their limitations. Solitary radialogical 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 interobserver variations. Further / Follow-up imaging may be needed in some case for confirmation of findings. Patient has been explained in detail about the USG findings including its limitations and need for further imaging if clinically indicated. Please interpret accordingly. In case of typing mistake done on the report, patient is advised to get back with report for correction within 7 days.

DR. VIVEK SINGH (M.D) CONSULTANT RADIOLOGIST



Contact No: 77 9009 8009 • Email: support@simirahealthcare.com

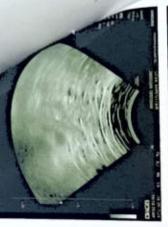
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Ultrasound Image Report





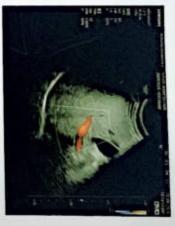






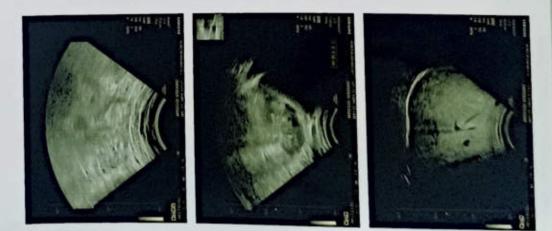














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Name : - MR.ZARE SUSHIL RAMESH

Ref by : - MEDIWHEEL

Age: 31YEARS/MALE

Date: 28/09/2024

X-RAY CHEST- PA VIEW

Both lung fields are clear. Both costophrenic angles appear clear. Cardiothoracic ratio is within normal limits. Both domes of diaphragm appear normal. Bony thoracic cage & soft tissues appear normal. Impression: No significant abnormality.

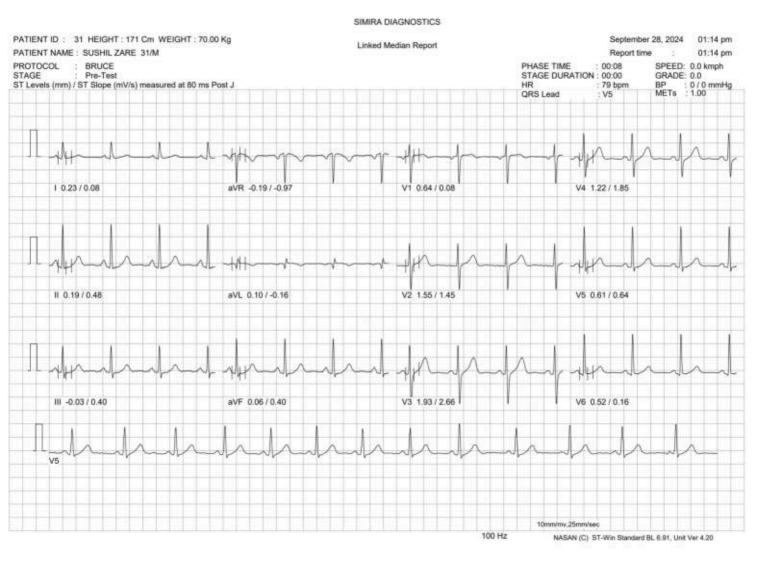
Please correlate the findings with clinical examination, history & blood investigations.

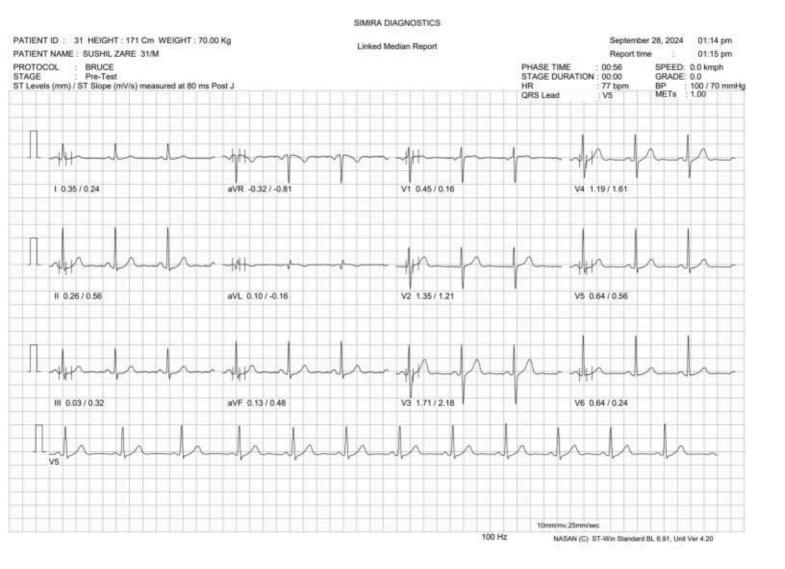
Dr. VIVEK SINGH (M.D) CONSULTANT RADIOLOGIST

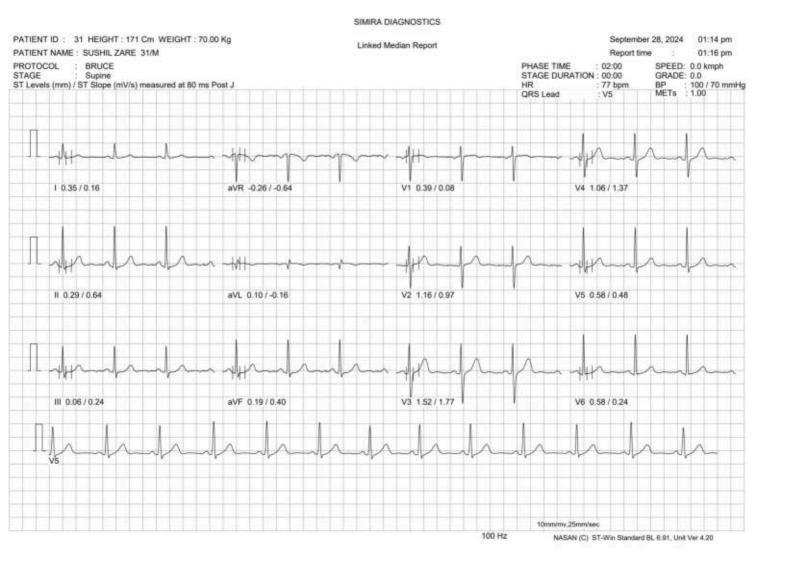


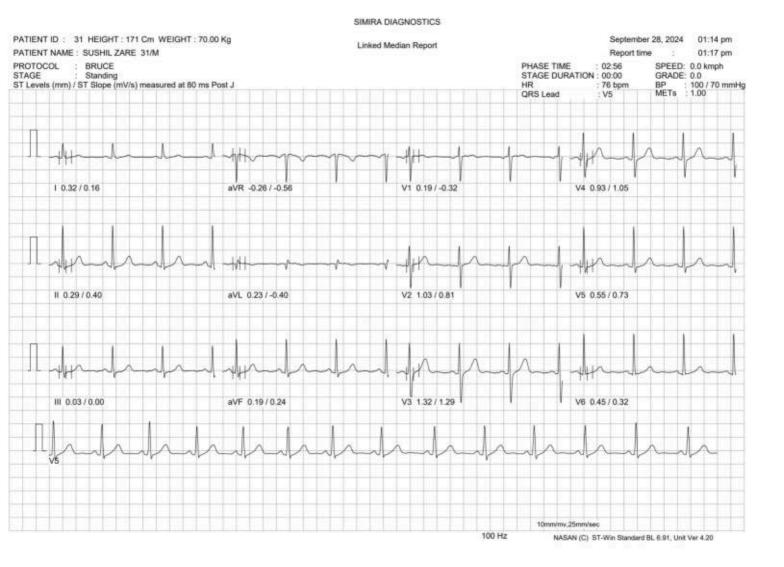
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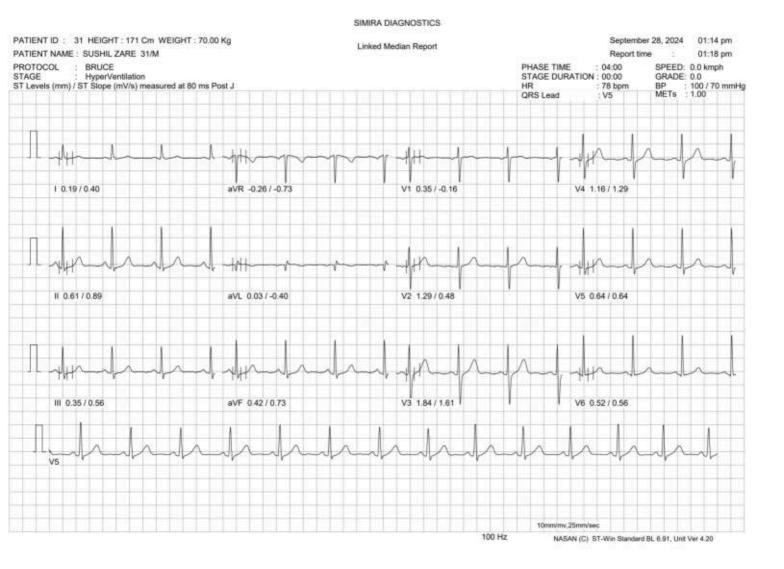
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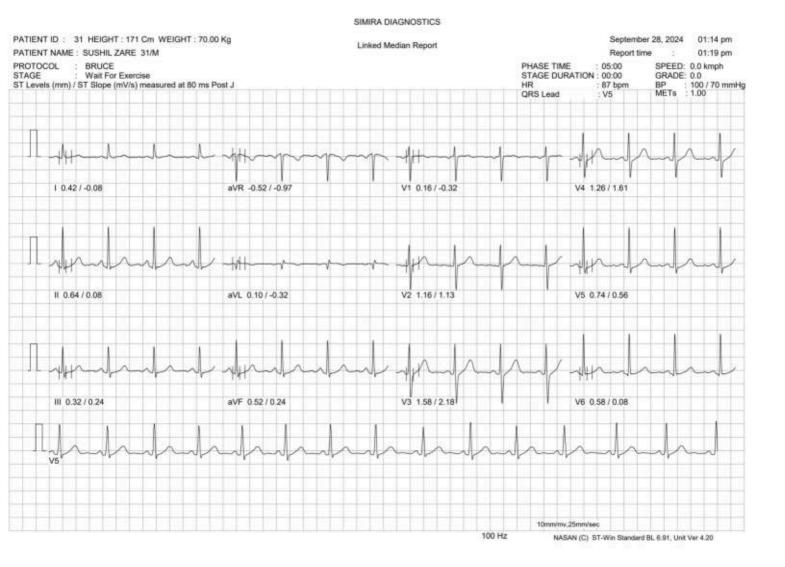


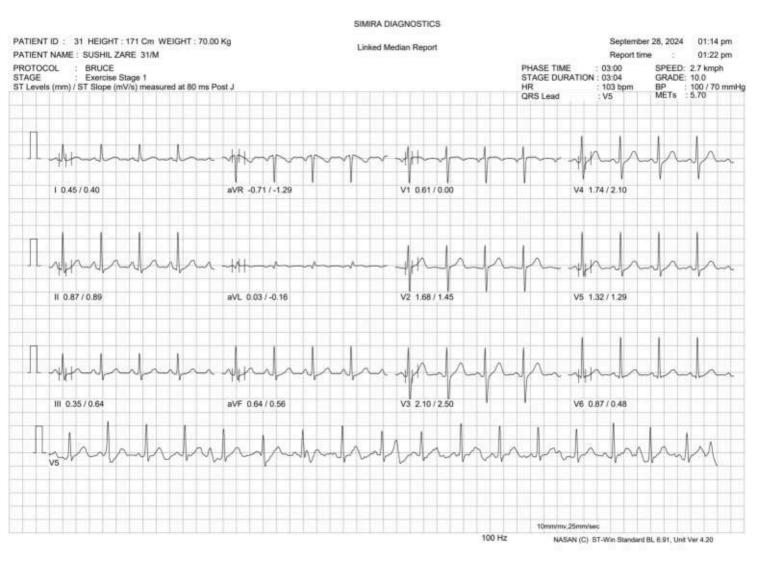


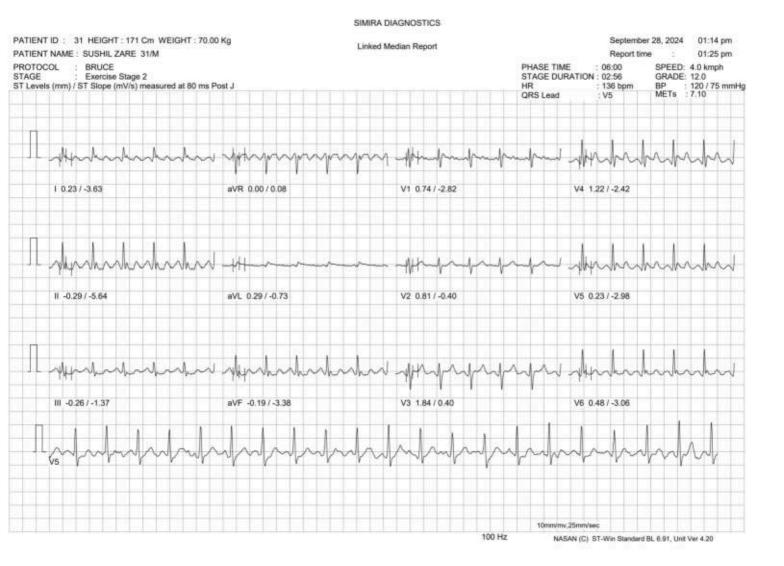


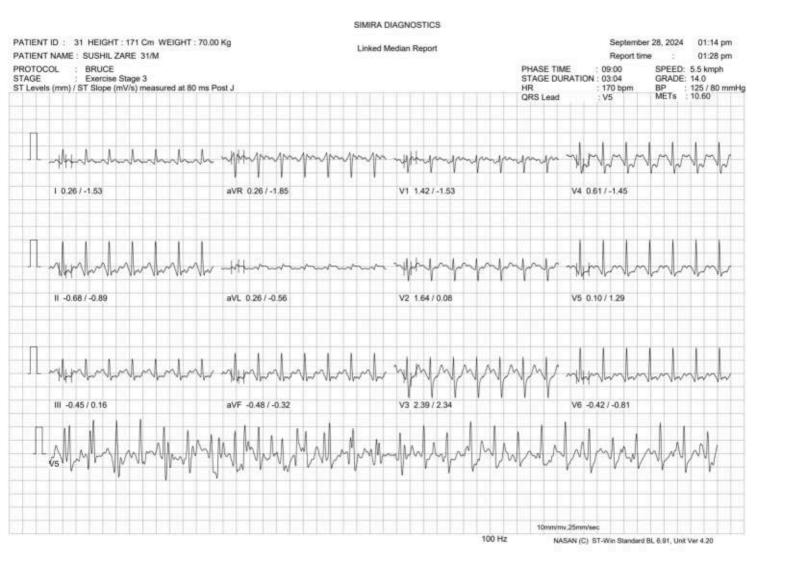


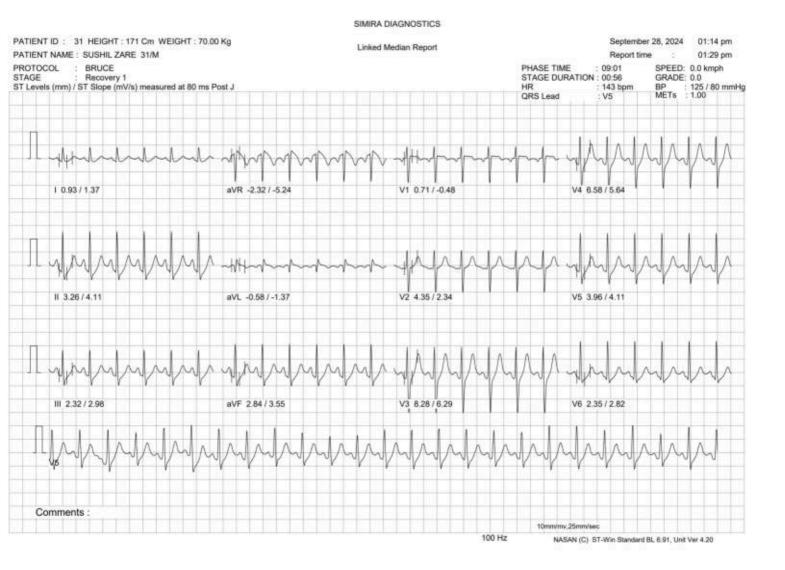


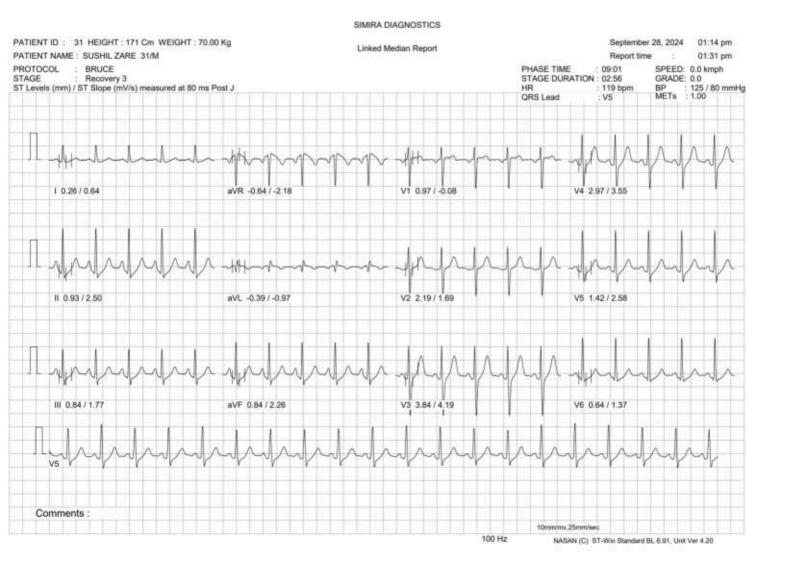












BASE STAC	SE :	Supine 01:00		77 bpm 100 / 70	0.00 MET	5	80 ms Post J		OTOCOL UCE
MAX STAG	E:	Exercise Stage 2 03:00		146 bpm 100 / 70	1.00 METS		80 ms Post J		
BASE	мах	BASE		мах	BASE	MAX	BASE		мах
ala	M	~~~		m	4~	Jun	. J	١	An
(0.35) I (0.16)	(-1.06) (-5.16)	(-026) (-0.64)	avR	(1.68) (2.18)	(0.09) V (0.08)	/1 (-0.10) (-3.95)	(1.06) (1.37)	V4	(0.29) (-2.82)
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(0.29) II (0.64)	(-2.32) (-7.41)	(0.10) (-0.16)	aVL	(0.29) (-1.53)	(1.16) V (0.97)	/2 (-0.06) (0.32)	(0.58) (0.48)	VS	(-0.81) (-3.71)
BASE	MAX	BASE		MAX	BASE	МАХ	BASE		MAX
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(0.06) III (0.24)	(-1.48) (-2.58)	(0.19) (0.40)	₽VF	(-1.84) (-5.32)	(1.52) N (1.77)	/3 (0.81) (-1.29)	(0.58) (0.24)	V6	(-0.77) (-4.75)

SIMIRA DIAGNOSTICS

CINING DIAGNOS LICS

001/1 Madhu Apartment plot no 1 sector 11 new panvel

PATIENT NAME : SUSHIL ZARE 31/M PATIENT ID : 31

Summary Report

September 28, 2024 Report time .. 01:31 pm 01:14 pm

PATIENT ADD. : PATIENT HEIGHT: 171 Cm PROTOCOL FINAL IMPRESSION **OBJECT OF TEST** CHRONO RESPONSE HAEMO RESPONSE OTHER INVESTIGATION BRIEF HISTORY MEDICATION ACTIVITY **RISK FACTOR** EXERCISE INDUCED ARRHYTHMIA : No REASON FOR TERMINATION EXERCISE TOLERANCE : BRUCE PATIENT WEIGHT: 70.00 Kg : Normal : Normal : Good : Male : Routine check up : Max HR : Sedentary : X-Ray

A.

1

Ref. By : Not Applicable

(Not Applicable)

Cardiologist Reg. No. : 2001 / 08 / 2837 Dr. Siddharth Sonkamble

M.D Cardiologist

NASAN (C) ST-Win Standard BL 6.91, Unit Ver 4.20

Dr. Siddharth Sonkambale MBBS, DMB

Page 1

NASAN (C) ST-Win Standard BL 6.91, Unit Ver 4.20				e Ischemia.	for inducible	- Conclusion : TMT is Negative for inducible Ischemia.	Page 2 -Co
¢						No Arrhythmias Noted.	
M.D Cardiologist				-	ite Achieved	90.48 % Target Heart Rate Achieved.	
Dr Siddharth Sonkamble						No Symptom's Noted.	
Cardio				opic Response.	d Chronotro	Adequate Ion tropic And Chronotropic Response.	
Dr. Siddharth Sonkambale MERS, DNB	-	Carlos -	ż		ed.	METS Workload Achieved.	
DOUBLE PRODUCT : 21375.00	DOUBLE	8	0.61 Km	DISTANCE COVERED :	DISTANC	10.60	MAX WORKLOAD : 1
⁹ : 125 / 80 mmHg	MAX BP :	bpm)	171 bpm (90.48 % of 189 bpm)		MAX HR :	9:1 min	TOTAL EXER TIME :
	0.26	1.00	14	125 / 80	119	03:00 0.00 / 0.00	Recovery 3
	0.93	1.00	17	125 / 80	143	01:00 0.00 / 0.00	Recovery 1
	0.26	10.60	21	125 / 80	170	00:01 6.80 / 16.00	Peak Exercise
	0.26	10.60	21	125 / 80	170	03:00 5.50 / 14.00	Exercise Stage 3
	0.23	8.00	16	120 / 75	136	03:00 4.00 / 12.00	Exercise Stage 2
	0.45	5.70	10	100 / 70	103	03:00 2.70 / 10.00	Exercise Stage 1
	0.42	1.00	8	100 / 70	87	00:59 0.00 / 0.00	Walt For Exercise
	0.19	1.00	7	100 / 70	78	01:00 0.00 / 0.00	HyperVentilation
	0.32	1.00	7	100 / 70	76	00:58 0.00 / 0.00	Standing
	0.35	1.00	7	100 / 70	77	01:00 0.00 / 0.00	Supine
	0.35	1.00	7	100 / 70	77	01:00 0.00 / 0.00	Pre-Test
	Level I		X 1000	mmHg	bpm	Time Grade (%)	
Stage Comments	ST	METS	R.P.P.	₽	Ħ	Stage Speed (Kmph) /	Stage
(Not Applicable)							PATIENT ADD. :
Ref. By : Not Applicable	Ref. By :				'0.00 Kg	PATIENT WEIGHT: 70.00 Kg	PROTOCOL : BRUCE PATIENT HEIGHT : 171 Cm
Report time : 01:31 pm September 28, 2024 01:14 pm		Summary Report	Sum			JARE 31/M	PATIENT NAME: SUSHIL ZARE 31/M
		1	2				PATIENT ID : 31

001/1 Madhu Apartment plot no 1 sector 11 new panvel

Simira Diagnostic - Panvel

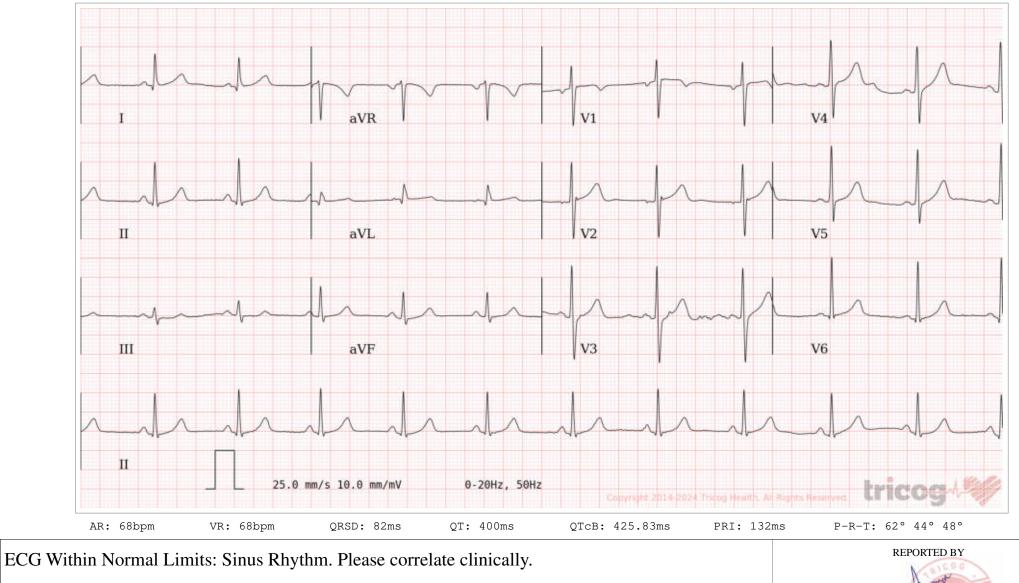


Age / Gender: 31/Male

Date and Time: 28th Sep 24 10:58 AM

Patient ID: zare

Patient Name: ZARE SUSHIL RAMESH





Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.