

CID : 2304609237

Name : MRS.KUMARI PALLAVI

Age / Gender :33 Years / Female

Consulting Dr.

Reg. Location

: Kandivali East (Main Centre)

Authenticity Check

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:15-Feb-2023 / 08:29

Collected Reported :15-Feb-2023 / 11:39

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

	CBC (Complet	te Blood Count), Blood	
<u>PARAMETER</u>	RESULTS	BIOLOGICAL REF RANGE	<u>METHOD</u>
RBC PARAMETERS			
Haemoglobin	11.8	12.0-15.0 g/dL	Spectrophotometric
RBC	4.09	3.8-4.8 mil/cmm	Elect. Impedance
PCV	37.3	36-46 %	Measured
MCV	91	80-100 fl	Calculated
MCH	28.8	27-32 pg	Calculated
MCHC	31.6	31.5-34.5 g/dL	Calculated
RDW	15.1	11.6-14.0 %	Calculated
WBC PARAMETERS			
WBC Total Count	6800	4000-10000 /cmm	Elect. Impedance
WBC DIFFERENTIAL AND A	BSOLUTE COUNTS		
Lymphocytes	25.0	20-40 %	
Absolute Lymphocytes	1700.0	1000-3000 /cmm	Calculated
Monocytes	5.5	2-10 %	
Absolute Monocytes	374.0	200-1000 /cmm	Calculated
Neutrophils	67.7	40-80 %	
Absolute Neutrophils	4603.6	2000-7000 /cmm	Calculated
Eosinophils	1.8	1-6 %	
Absolute Eosinophils	122.4	20-500 /cmm	Calculated
Basophils	0.0	0.1-2 %	
Absolute Basophils	0.0	20-100 /cmm	Calculated
Immature Leukocytes	-		

WBC Differential Count by Absorbance & Impedance method/Microscopy.

PLATELET PARAMETERS

Platelet Count	171000	150000-400000 /cmm	Elect. Impedance
MPV	12.8	6-11 fl	Calculated
PDW	26.9	11-18 %	Calculated

RBC MORPHOLOGY



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:15-Feb-2023 / 10:36

Hypochromia -

Microcytosis -

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 42 2-20 mm at 1 hr. Sedimentation

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







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

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Name : MRS.KUMARI PALLAVI

Age / Gender : 33 Years / Female

Consulting Dr. :

Reg. Location

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Reported :15-Feb-2023 / 10:31

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	93.2	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	91.5	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.4	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.19	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.21	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.7	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.4	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.3	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.9	1 - 2	Calculated
SGOT (AST), Serum	15.9	5-32 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	17.6	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	9.5	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	92.0	35-105 U/L	Colorimetric
BLOOD UREA, Serum	12.8	12.8-42.8 mg/dl	Kinetic
BUN, Serum	6.0	6-20 mg/dl	Calculated
CREATININE, Serum	0.85	0.51-0.95 mg/dl	Enzymatic



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Reported :15-Feb-2023 / 16:06

eGFR, Serum 82 >60 ml/min/1.73sqm Calculated

URIC ACID, Serum 4.8 2.4-5.7 mg/dl Enzymatic

Urine Sugar (Fasting) Absent Absent Urine Ketones (Fasting) Absent Absent

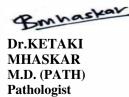
Urine Sugar (PP)AbsentAbsentUrine Ketones (PP)AbsentAbsent

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











Name : MRS.KUMARI PALLAVI

Age / Gender : 33 Years / Female

(HbA1c), EDTA WB - CC

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

PARAMETERRESULTSBIOLOGICAL REF RANGEMETHODGlycosylated Hemoglobin5.2Non-Diabetic Level: < 5.7 %</td>HPLC

Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %

Collected

Estimated Average Glucose 102.5 mg/dl Calculated (eAG), EDTA WB - CC

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 ***



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

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CID : 2304609237

Name : MRS.KUMARI PALLAVI

Age / Gender : 33 Years / Female

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:15-Feb-2023 / 16:26 : Kandivali East (Main Centre) Reported Reg. Location



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

<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.005	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	20	-	-
CHEMICAL EXAMINATION			
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
MICROSCOPIC EXAMINATION			
Leukocytes(Pus cells)/hpf	0-1	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	1-2		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	3-4	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

Others

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







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

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Name : MRS.KUMARI PALLAVI

Age / Gender : 33 Years / Female

Consulting Dr. : -

Reg. Location : Kandivali East (Main Centre)

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*** End Of Report ***



Name : MRS.KUMARI PALLAVI

Age / Gender : 33 Years / Female

Consulting Dr. : -

Reg. Location: Kandivali East (Main Centre)



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: 15-Feb-2023 / 08:29

:15-Feb-2023 / 12:49

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

Collected

Reported

<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.

Refernces:

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

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



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

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Name : MRS.KUMARI PALLAVI

Age / Gender : 33 Years / Female

Consulting Dr. :

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE LIPID PROFILE

<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
CHOLESTEROL, Serum	132.1	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	77.9	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	39.7	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	92.4	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/d High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated l
LDL CHOLESTEROL, Serum	76.0	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	16.4	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.3	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	1.9	0-3.5 Ratio	Calculated

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







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

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CID : 2304609237

Name : MRS.KUMARI PALLAVI

Age / Gender :33 Years / Female

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

<u>PARAMETER</u>	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
Free T3, Serum	3.7	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	17.2	11.5-22.7 pmol/L First Trimester:9.0-24.7 Second Trimester:6.4-20.59 Third Trimester:6.4-20.59	ECLIA
sensitiveTSH, Serum	1.14	0.35-5.5 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0	ECLIA



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Name : MRS.KUMARI PALLAVI

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Reg. Location : Kandivali East (Main Centre)



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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

can give falsely high TSH.

2)TSH values may be trasiently altered becuase 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 ***







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

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PHYSICAL EXAMINTION FORM

Name :- KUMARI PALLAVI CID:- 2304609237

Age -33 yrs Sex :F

Date:15/02/23

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History and Complaints:

HTN since 6 yrs.

EXAMINATION FINDINGS:

Height (cms): 157 cm Weight (kg): 66kg

Temp (Oc):Afebrile Skin: Normal

Blood Pressure (mm/hg): 120/80mmhg Nails: Normal

Pulse: 72/min Lymph Node: Not palpable

Systems:

Cardiovascular:- Normal

Respiratory:- Nomal

Genitourinary:- NAD

GI System:- Liver & Spleen Not Palpable

CNS:- NAD

IMPRESSION:

All reposits are within @ limits

ADVICE:



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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
- 8) Thyroid/ Endocrine disorders:- Yes
- 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:-Appendicectomy at age 13 yrs
- 17) Musculoskeletal System:- No

PERSONAL HISTORY:

1) Alcohol:- No

Smoking:No

Diet:-Mixed

4) Medication:- Yes

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.

Row Horiza No. 3, Aassan, Thakur Virisge, Kandivali (east),

Mumbai - 409101. Tel: 61700860

Dr. Jagruti Dhale

Consultant Physician Reg. No. 69548



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Date: 15/2/23

CID: 15/2/23 2304609237

Name: mors Kumovi Pallovi

Sex/Age: F/33

EYE CHECK UP

Chief complaints: Poutine ch-up

Systemic Diseases: TSH 6 6 422

Past history: No who Ocular sx 9 mjury

Unaided Vision:

6/9/10

a 661w

Aided Vision:

Refraction:

Eoms! 2097 med

(Right Eye) (Left Eye) Sph Cyl Axis Vn Sph Axis 4 66 6/6 Distance 80 100 2/61 Near 2/6

Colour Vision; Normal / Abnormal

Remark: Vn cortlan nonnal bmet

KAJAI NAGRECHA OPTOMETRIST

SUBURBAH CIAGNOSTICS (MDIA) PVT. LTD.

Row House Man Constitution (Cast),

Mumbel - 406101.

Tel: 51700800



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Age / Sex

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Ref. Dr

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: 15-Feb-2023 / 11:52

Reg. Date : 15-Feb-2023

Reported

: Kandivali East Main Centre

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.

: 2304609237

: 33 Years/Female

: Mrs KUMARI PALLAVI

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-----

This report is prepared and physically checked by DR. FAIZUR KHILJI before dispatch.

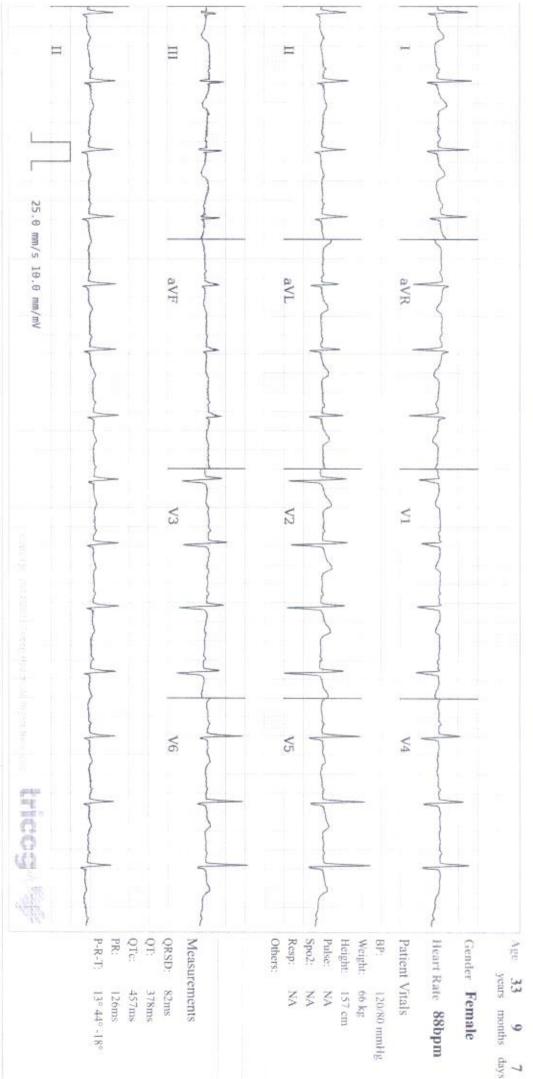
Dr.FAIZUR KHILJI MBBS, RADIO DIAGNOSIS Reg No-74850 Consultant Radiologist

SUBURBAN DIAGNOSTICS - KANDIVALI EAST

PRECISE TESTING - HEALTHIER LIVING DIAGNOSTICS

> Patient ID: Patient Name: KUMARI PALLAVI 2304609237

> > Date and Time: 15th Feb 23 8:50 AM



82ms

457ms 378ms

126ms

130 440 -180

157 cm

Z.

X

66 kg

120/80 mmHg

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



DR AKHIL PARULEKAR
MEBS.MD. MEDICINE. DNB Cardiology
Cardiologist
2012082483 REPORTED BY



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: 15-Feb-2023 / 9:32

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Reg. Date : 15-Feb-2023

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Ref. Dr

: 2304609237

: 33 Years/Female

Reg. Location

: Kandivali East Main Centre

: Mrs KUMARI PALLAVI

USG WHOLE ABDOMEN

LIVER:

CID

Name

Age / Sex

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

GALL BLADDER:

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

PANCREAS:

The pancreas is well visualized and appears normal. No evidence of solid or cystic mass lesion.

KIDNEYS:

Both the kidneys are normal in size shape and echotexture.

No evidence of any calculus, hydronephrosis or mass lesion seen.

Right kidney measures 10.3 x 3.5 cm. Left kidney measures 10.5 x 4.5 cm.

SPLEEN:

The spleen is normal in size 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 reveal no intraluminal abnormality.

UTERUS:

The uterus is anteverted and appears normal. It measures 7.4 x 4.9 x 4.0 cm in size. The endometrial thickness is 6 mm

OVARIES:

Both the ovaries are well visualised and appears normal. There is no evidence of any ovarian or adnexal mass seen. Right ovary = $2.6 \times 2.3 \times 1.8$ cm and volume is 6.1 cc Left ovary = $2.5 \times 2.4 \times 1.9$ cm and volume is 6.1 cc

Click here to view images http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023021508260574

Corporate Identity Number (CIN): U85110MH2002PTC136144



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: 2304609237 Name : Mrs KUMARI PALLAVI

Age / Sex Ref. Dr

CID

: 33 Years/Female

Reg. Location

: Kandivali East Main Centre

Reg. Date

: 15-Feb-2023 Reported

: 15-Feb-2023 / 9:32

IMPRESSION:-

No significant abnormality is seen.

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

This report is prepared and physically checked by DR. FAIZUR KHILJI before dispatch.

Dr.FAIZUR KHILJI MBBS, RADIO DIAGNOSIS Reg No-74850 Consultant Radiologist

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 centre for rectification. Please interpret accordingly. All safety precautions were taken before, during and after the USG examination in view of the ongoing Covid 19 pandemic.

SUBURBAN DIAGNOSTICS KANDIVALI EAST

EMail:

1012 (2304609237) / KUMARI PALLAVI / 33 Yrs / F / 157 Cms / 66 Kg

Date: 15 / 02 / 2023 12:44:27 PM Refd By : AERCOFEMI Examined By: DR.AKHIL PARULEKAR



								Test End Reasons	Duke Treadmill Scure	Max WorkLoad Attained	Initial BP (ExStrt)	Initial HR (ExStrt)	Exercise Time	FINDINGS:	Recovery	Recovery	Recovery	Recovery	PeakEx	BRUCE Stage 2	BRUCE Stage 1	ExStart	¥	Standing	Supine	Stage
								sons	Il Scure	d Attained	štrt)	Strt)			10:39	10:31	09:31	08:31	07:31	07.13	04.13	01:13	00:49	00:36	00.12	- Filling
								Tes	. 05.8	7.4	: 12	. 10	: 06		3.09	3:00	2:00	1:00	0.18	3.00	3:00	0.24	0.13	0:24	0:12	Duration
								Test Complete	00	1.4 Fair response to induced stress	20/80 (mm/Hg)	108 bpm 58% of Target 187	06:18		00.0	0.00	00.0	00.2	05.5	04.0	02.7	00.0	00.0	00.0	0.00	
										to induced st		Target 187			00.0	00.0	00.0	00.0	14.0	12.0	10.0	00.0	00.0	00.0	00.0	Speed(Kniph) Signation
			The	Moduc	2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7					tress					010	010	01.0	01 1	07.4	07 1	04 7	010	010	01.0	01.0	WETS
		Mumbai -		THE PROPERTY AND	200						Max BP Atta	Max HR Att			118	112	119	138	160	156	136	108	101	098	093	Rate
	1700880	-409101	The state of the s	Calmonde Late							Max BP Attained 150/80 (mm/Hg)	Max HR Attained 160 bpm 86% of Target 187			63 %	60 %	64 %	74 %	86 %	83 %	73 %	58 %	54 %	52 %	50 %	% THR
Reg	O IVID										(mm/Ha)	n 86% of Targ			120/80	120/80	130/80	150/80	130/80	130/80	120/80	120/80	120/80	120/80	120/80	60 D
Privibra	VIDDO, PGUCE	Ci. Chang oneth	n .	STORES.								let 187			147	134	154	207	208	202	163	129	121	117	-A -A -A	Ti-
Reconvibrance of the second of	3	SHOW	7		· · · · · · · · · · · · · · · · · · ·										00	00	00	8	00	00	00	00	00	00	00	PVC Comassins
																										97.6



SUBURBAN DIAGNOSTICS KANDIVALI EAST

REPORT

\$ 2

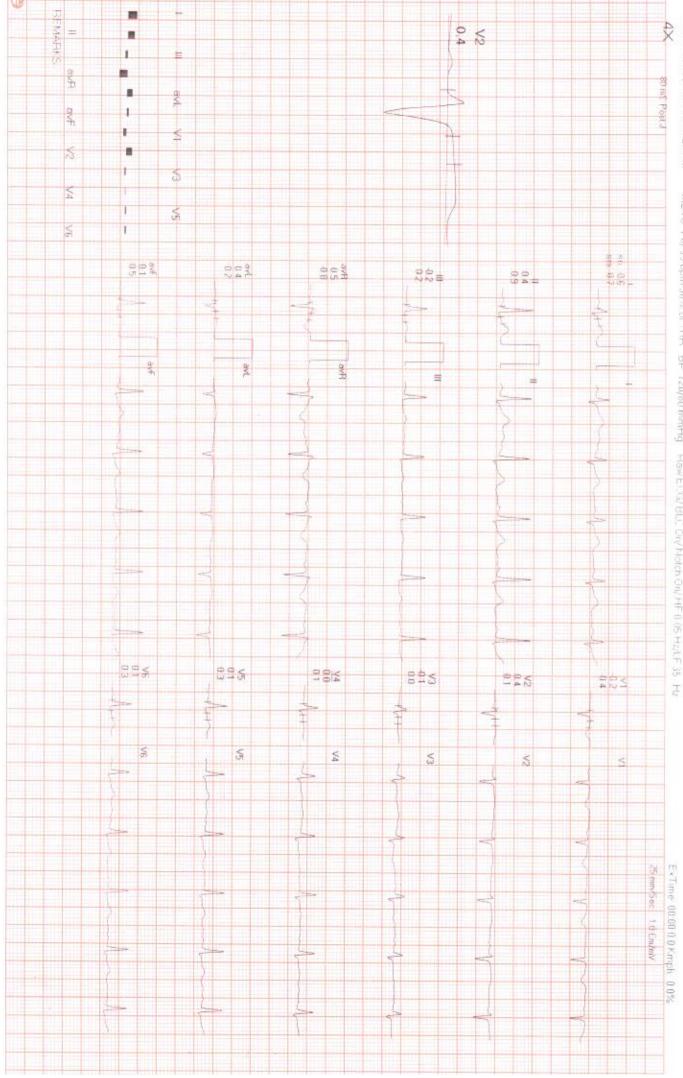
EMail:

1012 / KUMARI PALLAVI / 33 Yrs / F / 157 Cms / 66 Kg Date: 15 / 02 / 2023 12:44:27 PM Refd By : AERCOFEMI

T. Heart Rate 160.0 bpm. Systotic BP 130.0 mmHg Exercise Time 05 18 Mms Ecopic Based 0 METS 7 4 feet End Reason Test Compilet Target Heart Rate 88% of 187 TEST CRETCY ROUTINE DESCRIPTION ROUNE ROUTINE DESCRIPTION MEDICATION M				DISCLAIMER Naciative stress test does not rele out obtoing is mandatory.	FINAL IMPRESSION	EOG CHANGES	CHRONOTROPIC RESPONSE	HAEMODYNAMIC RESPONSE	EXERCISE INDUCED ARRYTHMIAS	EXERCISE TOLERANCE	REASON FOR TERMINATION	MEDICATION	ACTIVITY	RISK FACTOR	TEST OBJECTIVE	REPORT: Heart Rate 160.0 bpm Systolic BP 130.0 mmHg Diastolic BP 80.0 mmHg Exercise Time 06:18 Mins. Ectopic Beats 0.0 METS 7:4Test End Reason Test Complete Target Heart Rate 88% of 187
	hai -400101.	SUSSEAS TRADICIS (NOM) PVILID. & NEW YORK	le parting of the same of the	any artery diseas. Positive stress test is successive bat not confirmation of coronary artery discase. Hence clinical co	STRESS TEST IS NEGATIVE FOR EXERCISE INDUCED ISCHEMIC HEART DISEASE FOR GIVEN DURATION OF EXERCISE		NORMAL	NORMAL	NO.	MODERATE	HEART RATE ACHIEVED FATIGUE	NONE	MODERATE ACTIVE	NONE	ROUTINE CHECK-UP	fg et Heart Rate 88% of 187

1012 (2304609237) | KUMARI PALLAVI | 33 V/s | F | 157 Cms | 66 Kg | HR - 93

Date 15/02/2023 12 44 27 PM METS 1 0/93 bpm 50% of THR BP 120/80 mmHg Raw EDG/BLL Dry Notch Dry HF () (15 Hz/LF 35

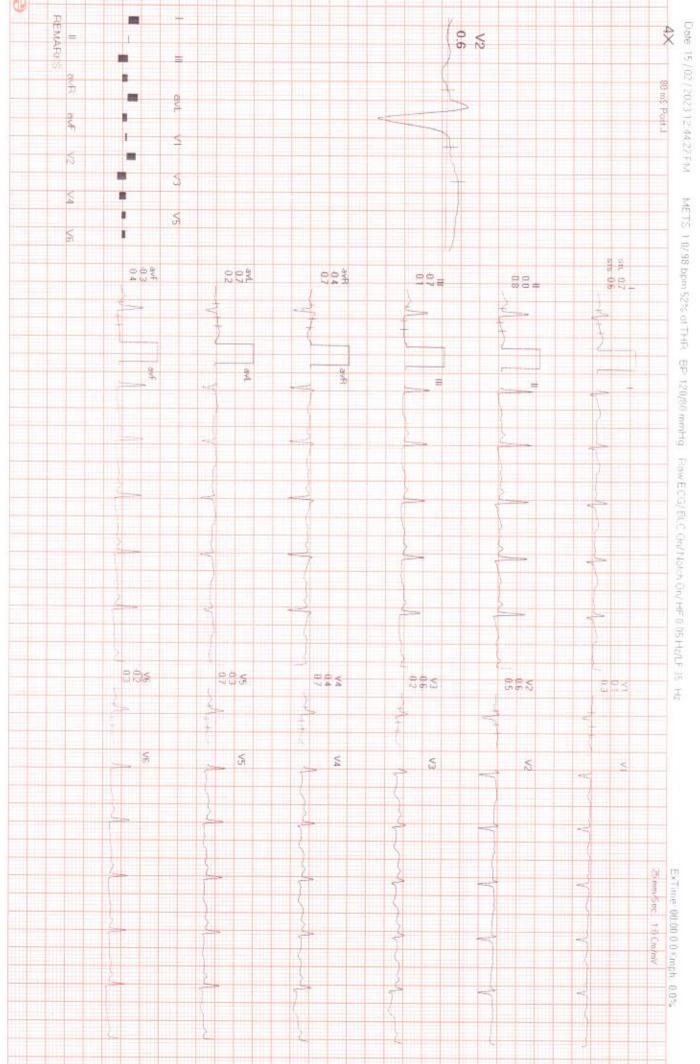




SUPINE (00:12)

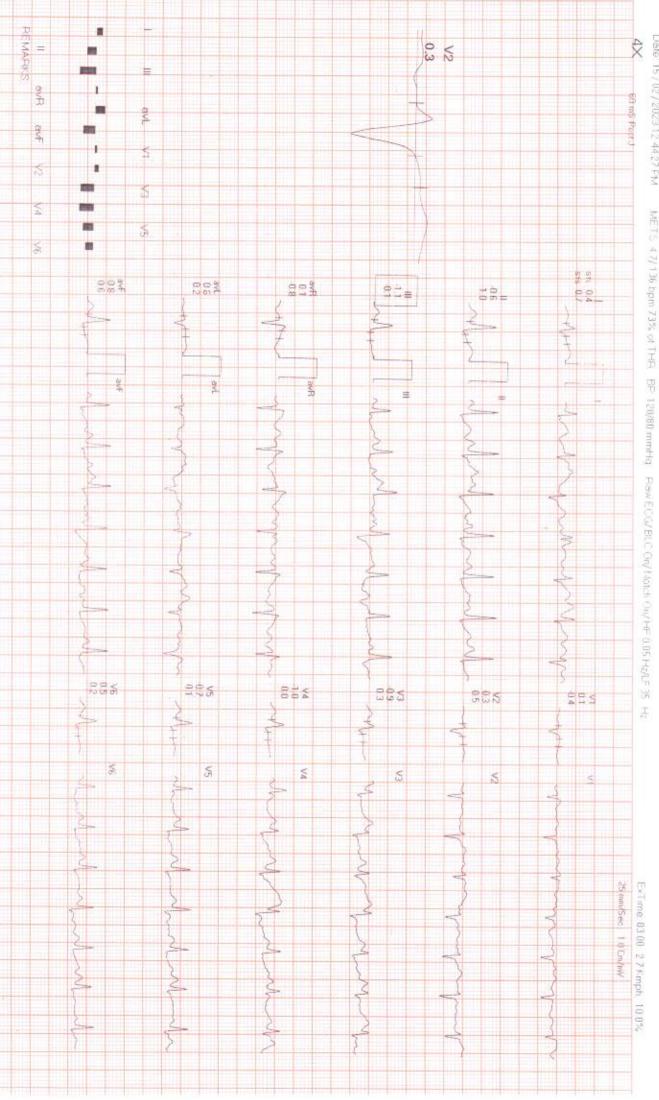
STANDING (00:24)

1012 (2304609237) / KUMARI PALLAVI / 33 Vis / F / 157 Oms / 66 Kg / HR 98



SUBURBAN DIAGNOSTICS KANDIVALI EAST

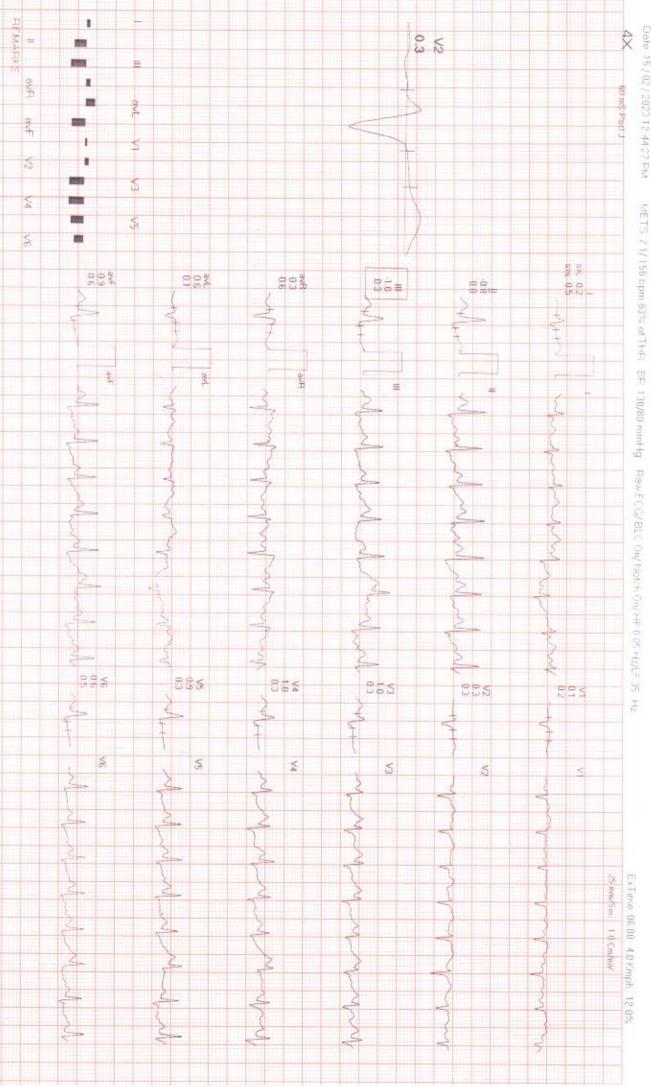
Date: 15 / 02 / 2023 12 44 27 FM 1012 (2304609237) / KUMARI PALLAVI / 33 Vrs / F / 157 Cms / 66 Kg / HR METS 477/136 bpm 73% of THR BP 120/80 mm/Hg Rew/ECG/BtCOn/Match On/HF 0.05 Hz/LF 35 136 I BRUCE : Stage 1 (03:00)





SUBURBAN DIAGNOSTICS KANDIVALI EAST

Date 15/02/202312 4427 PM 1012 (2304609237) / KUMARI PALLAVI / 33 Vis / F / 157 Cms / 66 Kg / HR





BRUCE: Stage 2 (03:00)

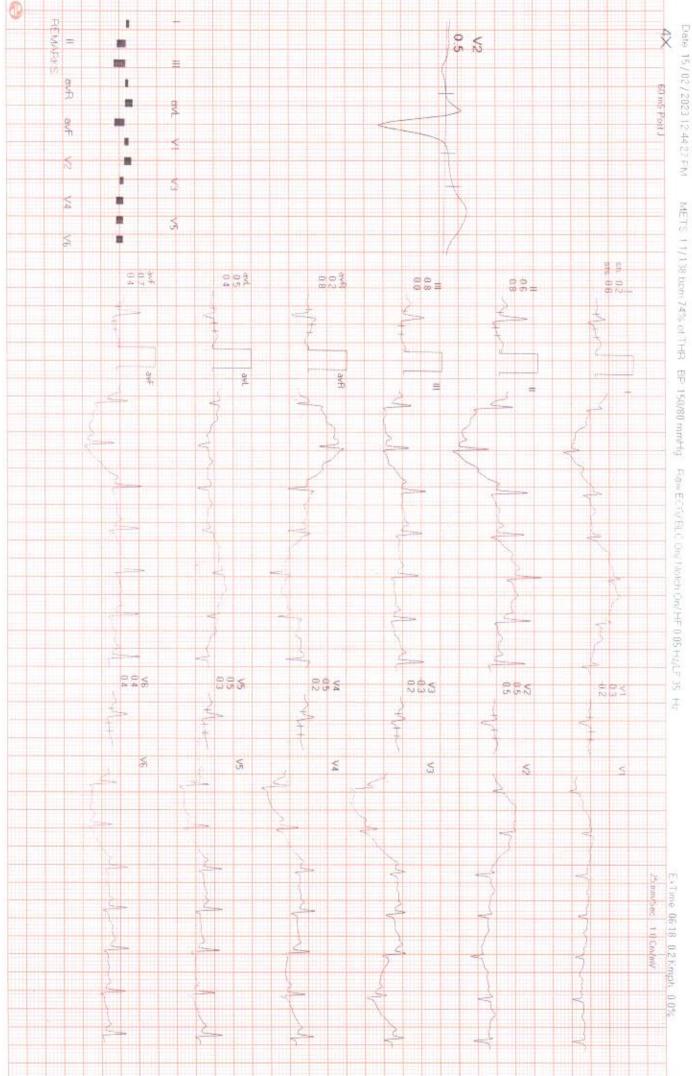
PeakEx



1012 (2304609237) | KUMARI PALLAVI | 33 YIS | F | 157 Cms | 66 Kg | HR : 160

PEMARKS -Date 15/02/202312:44:27 FM 0.6 m ave. 80 to S Post J JAD 8 100 H m S S 3 99 97 97 0.7 0.7 -1 avA 029 0.5 -03 auf NB. Ξ 1 port way and pollow the poly a very 2.96 200 251 285 # B S 8 15 \$ S 52 5 NAME AND THE PARTY OF THE PARTY Jally John Jan ExTime 06:18 55 Kmph 14.0%

1012 (2304609237) / KUMARI PALLAVI / 33 Yrs / F / 157 Cms / 66 Kg / HR : 138



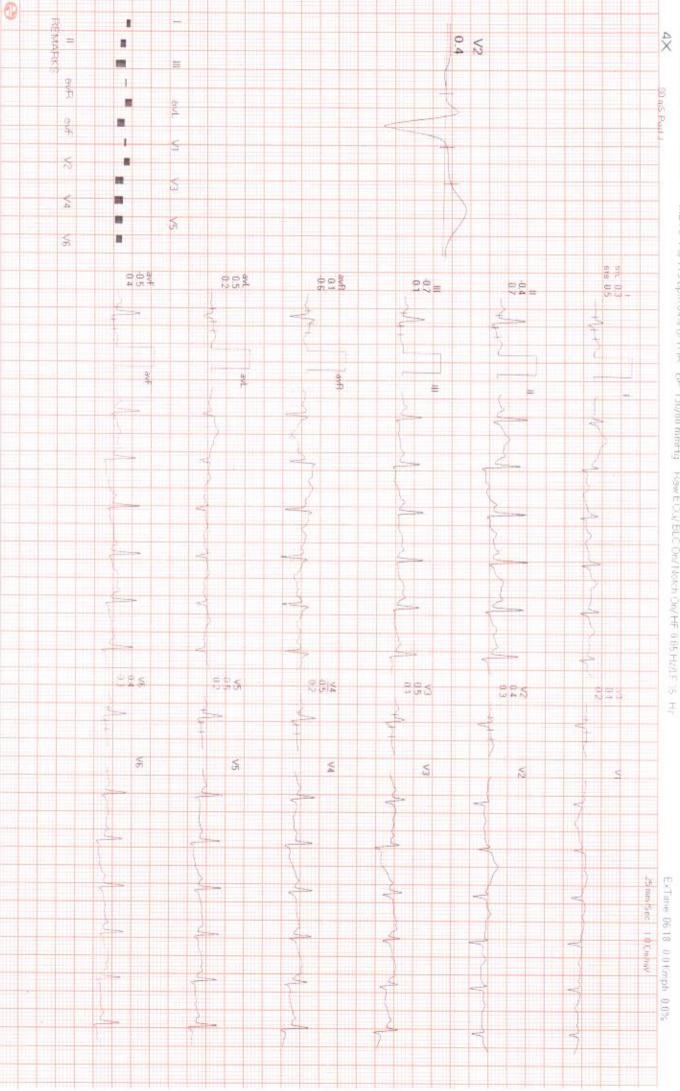


Recovery: (01:00)

SUBURBAN DIAGNOSTICS KANDIVALI EAST

1012 (2304609237) / KUMARI PALLAVI / 33 Vis / F / 157 Cms / 66 Kg / HR : 119

Date 15/02/2023 12 44 27 PM METS 1 0/119 bpm: 64% of THR BP 130/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0 05 Hz/LF 35 25 mm/Sec | 0 Cm/mV ExTime 0618 0.0 Kmph 0.0%





Recovery: (02:00)

1012 (2304609237) / KUMARI PALLAVI / 33 Yis / F / 157 Cms / 66 Kg / HR 112

Date 15/02/202312 44:27 PM

FEMARKS m 0.6 BVR 96 mS Post J DVD BUF < 52 -V3 V4 METS 1 0/112 apm 60% at THR BP 120/80 mmHg Faw ECG/BLC GryNatch DryHF 0.05 Hz/LF 35 8 8 A 050 A 0.5 05 9 No avfi = 076 005 06 73 884 1/6 S 14 3 3 25 mm/Sec 10 Lm/mV ExTime 06.18 0.0 Kmph 0.0%



Recovery: (03:00)

010 /00045000007 / 1/1/1440 / 0440

1012 (2304609237) / KUMARI PALLAVI / 33 Vis / F / 157 Cms / 66 Kg / HR 118

REMARKS 1 Date 15/02/202312 44:27 PM 0.4 V2 BB to S Post d 700 AVE 14 V2 Ħ ×3 METS 1.0/118 bpm 63% of THR BP 120/80 mmHg Raw E1 G/ BLC On/ Notch On/ HF (105 H2/LF) 5 m 100 2 2 02 02 7 0.5 0.5 00 N 000 00 0.0 3 WE dyf = 885 284 225 225 湯 I 48 8 54 5 5 ExTime 06:18 0.0 Kmph 0.0% 25 mm/sec 1.0 Lm/mV



Recovery: (03:08)