

Mr. Sarak Nitin Rajram
15/11/14

Cholesterol: 201

LDL: 134

Chol/HDL: ratio 5.5

Decrease oily & fatty diet

Daily 30min

Repeat Lipid profile after
3 months

Milind Shinde
Dr. Milind Shinde

Dr. MILIND SHINDE
MBBS, DNB Medicine
Reg. No. 2011/05/1544

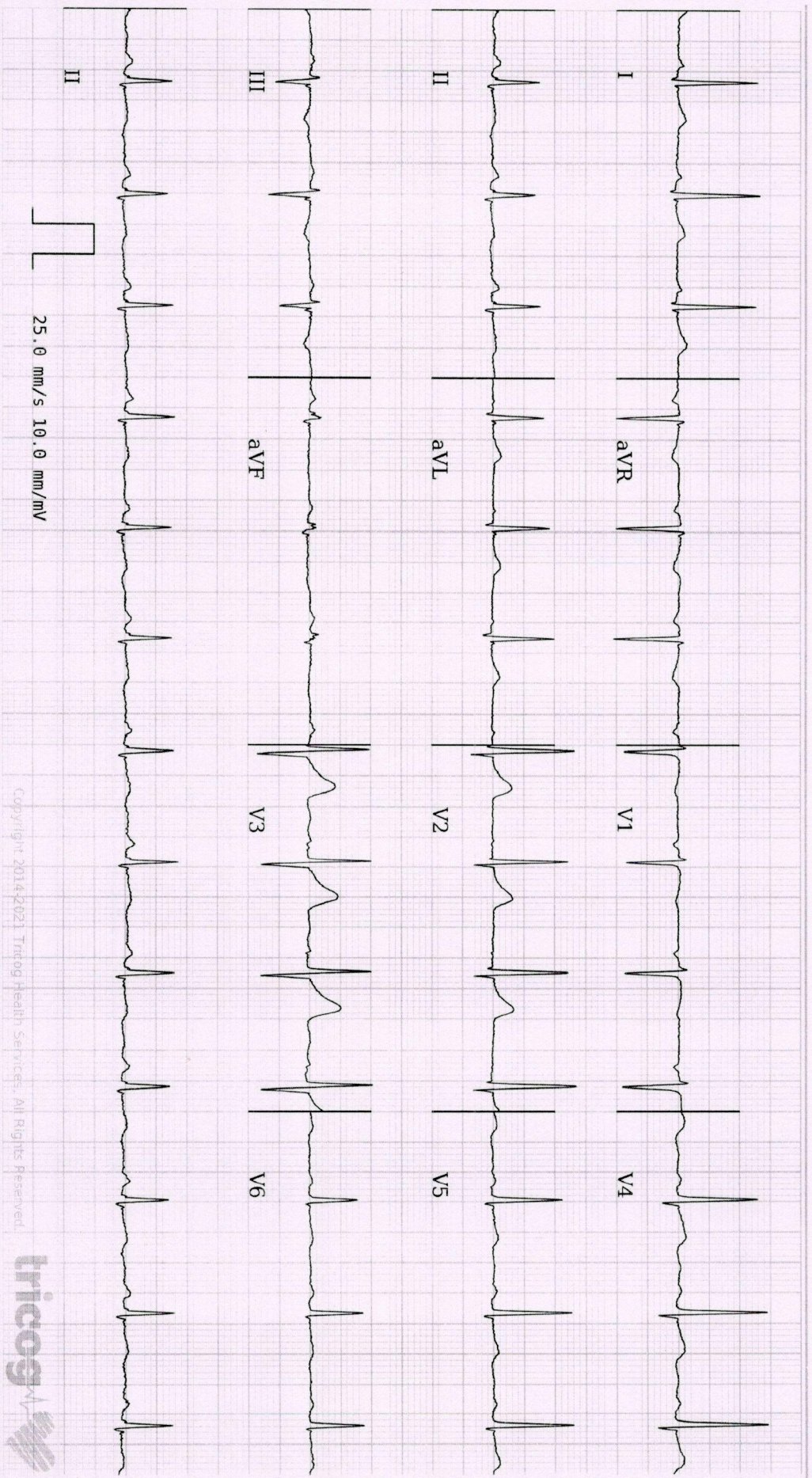


SUBURBAN DIAGNOSTICS - LULLANAGAR, PUNE

Patient Name: SARAK NITIN RAJRAM

Date and Time: 13th Nov 21 10:38 AM

Patient ID: 2131734845



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Age **40** **5** **12**
years months days

Gender **Male**

Heart Rate **82 bpm**

Patient Vitals

BP: 140/98 mmHg

Weight: 91 kg

Height: 171 cm

Pulse: NA

Spo2: NA

Resp: NA

Others:

Measurements

QSRD: 78 ms

QT: 362 ms

QTc: 422 ms

PR: 146 ms

P-R-T: 52° 8° -7°

REPORTED BY

Dr. Milind Shinde
MBBS, DNB Medicine
2011/05/1544

Sinus Rhythm, Normal Axis, Nonspecific T wave Abnormality. Please correlate clinically.



CID : 2131734845
Name : Mr SARAK NITIN RAJRAM
Age / Sex : 40 Years/Male
Ref. Dr :
Reg.Location : Lulla Nagar, Pune Main Centre

Reg. Date : 13-Nov-2021 / 10:18
Report Date : 13-Nov-2021 / 10:21
Printed : 13-Nov-2021 / 10:21

USG WHOLE ABDOMEN (SCREENING-Only Corporates)

LIVER : 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. The visualized gall bladder appears normal. No evidence of pericholecystic fluid is seen.

PANCREAS : The pancreas obscured due to excessive bowel gases.

KIDNEYS : Right kidney measures 9.3 x 5.1 cm. Left kidney measures 10.3 x 4.6 cm. Both the kidneys are normal in size, shape and echotexture. No evidence of any calculus, hydronephrosis or mass lesion seen.

SPLEEN : The spleen is normal in size, shape and echotexture. No evidence of focal lesion is noted.

URINARY BLADDER : The urinary bladder is well distended. It shows thin walls and sharp mucosa. No evidence of calculus is noted. No mass or diverticulum is seen.

PROSTATE : The prostate is normal in size and echotexture.

Visualized small bowel loops appear non-dilated. Gaseous distension of large bowel loops. There is no evidence of any lymphadenopathy or ascitis.

IMPRESSION :

- No significant abnormality seen.

Advice - Clinical correlation.

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

P. Rawal
Dr. PALLAVI RAWAL
MBBS, MD Radiology
Reg No 2013/04/1170

ADDRESS: Seraph Centre, Opp. BSNL Exchange, Shahu College Road, Off Pune-Satara Road, Behind Panchami Hotel, Pune - 411009

CENTRAL PROCESSING LAB: 2nd Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West, Mumbai - 400053

HEALTHLINE - MUMBAI: 022-6170-0000 | **OTHER CITIES:** 1800-266-4343 | **For Feedback -** customerservice@suburbandiagnostics.com | **www.suburbandiagnostics.com**

CID#	: 2131734845	SID#	: 177804465506
Name	: MR.SARAK NITIN RAJRAM	Registered	: 13-Nov-2021 / 10:02
Age / Gender	: 40 Years/Male	Collected	: 13-Nov-2021 / 10:02
Ref. Dr	: -	Reported	: 13-Nov-2021 / 10:36
Reg.Location	: Lulla Nagar, Pune (Main Centre)	Printed	: 13-Nov-2021 / 10:37

X-RAY CHEST PA VIEW

The lung fields are clear with no parenchymal lesion.

The cardiothoracic ratio is maintained and the cardiac outline is normal

The domes of the diaphragm are normal.

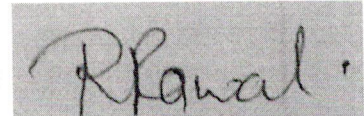
The cardio and costophrenic angles are clear.

Bony thorax is normal.

IMPRESSION:

No significant abnormality detected.

*** End Of Report ***



Dr.Pallavi Rawal
MD. RADIODIAGNOSIS
RADIOLOGIST

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Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

Collected : 13-Nov-2021 / 10:07
Reported : 13-Nov-2021 / 12:23

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MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/TMT

CBC (Complete Blood Count), Blood

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>RBC PARAMETERS</u>			
Haemoglobin	14.9	13.0-17.0 g/dL	Spectrophotometric
RBC	4.72	4.5-5.5 mil/cmm	Elect. Impedance
PCV	44.3	40-50 %	Calculated
MCV	94	80-100 fl	Calculated
MCH	31.5	27-32 pg	Calculated
MCHC	33.6	31.5-34.5 g/dL	Calculated
RDW	12.8	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	7600	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	32.9	20-40 %	
Absolute Lymphocytes	2500.4	1000-3000 /cmm	Calculated
Monocytes	3.8	2-10 %	
Absolute Monocytes	288.8	200-1000 /cmm	Calculated
Neutrophils	57.2	40-80 %	
Absolute Neutrophils	4347.2	2000-7000 /cmm	Calculated
Eosinophils	6.1	1-6 %	
Absolute Eosinophils	463.6	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.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	295000	150000-400000 /cmm	Elect. Impedance
MPV	7.8	6-11 fl	Calculated
PDW	13.3	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			
Hypochromia	-		
Microcytosis	-		
Macrocytosis	-		



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Anisocytosis -
Poikilocytosis -
Polychromasia -
Target Cells -
Basophilic Stippling -
Normoblasts -
Others Normocytic, Normochromic
WBC MORPHOLOGY -
PLATELET MORPHOLOGY -
COMMENT -

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR 5 2-15 mm at 1 hr. Westergren

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



MC-2463



Shruti Ramteke
Dr.SHRUTI RAMTEKE
M.B.B.S, DCP (PATH)
Pathologist

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

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

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MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/TMT

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	98.5	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	116.1	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

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Shamla Kulkarni

Dr.SHAMLA KULKARNI
M.D.(PATH)
Pathologist

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

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MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/TMT
GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	4.9	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	93.9	mg/dl	Calculated

Intended use:

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

Clinical Significance:

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

Test Interpretation:

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

Factors affecting HbA1c results:

Increased in: High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

Reflex tests: Blood glucose levels, CGM (Continuous Glucose monitoring)

References: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

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*** End Of Report ***



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Signature

Dr.SHRUTI RAMTEKE
M.B.B.S, DCP (PATH)
Pathologist

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

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MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/TMT
PROSTATE SPECIFIC ANTIGEN (PSA)

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
TOTAL PSA, Serum	0.599	0.03-2.5 ng/ml	ECLIA

1. PSA is detected in the serum of males with normal, benign hyper-plastic, and malignant prostate tissue.
2. The percentage of Free PSA (FPSA) in serum is described as being significantly higher in patients with BPH than in patients with prostate cancer.
3. Calculation of the ratio of Free to Total PSA (ie. FPSA/TPSA), has been suggested as way of improving the differentiation of BPH and Prostate cancer.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate

*** End Of Report ***



Dr. Shamla Kulkarni

Dr.SHAMLA KULKARNI
M.D.(PATH)
Pathologist

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Collected : 13-Nov-2021 / 10:07
Reported : 13-Nov-2021 / 13:33

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**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/TMT
URINE EXAMINATION REPORT**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>PHYSICAL EXAMINATION</u>			
Color	Yellow	Pale Yellow	-
Reaction (pH)	Acidic (5.0)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.020	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	20	-	-
<u>CHEMICAL EXAMINATION</u>			
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
<u>MICROSCOPIC EXAMINATION</u>			
Leukocytes(Pus cells)/hpf	1-2	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	5-6	Less than 20/hpf	

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate
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Signature

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M.B.B.S, DCP (PATH)
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MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/TMT
BLOOD GROUPING & Rh TYPING

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	AB
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.

Refernces:

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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MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/TMT
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	201.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	Enzymatic
TRIGLYCERIDES, Serum	147.7	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	Enzymatic
HDL CHOLESTEROL, Serum	36.7	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Enzymatic
NON HDL CHOLESTEROL, Serum	164.3	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	134	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	Colorimetric
VLDL CHOLESTEROL, Serum	30	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	5.5	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	3.7	0-3.5 Ratio	Calculated

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*** End Of Report ***



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MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/TMT
KIDNEY FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
BLOOD UREA, Serum	19.5	12.8-42.8 mg/dl	Kinetic
BUN, Serum	9.1	6-20 mg/dl	Calculated
CREATININE, Serum	0.8	0.67-1.17 mg/dl	Enzymatic
eGFR, Serum	114	>60 ml/min/1.73sqm	Calculated
TOTAL PROTEINS, Serum	7.1	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.5	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.6	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.7	1 - 2	Calculated
URIC ACID, Serum	7.5	3.5-7.2 mg/dl	Enzymatic
PHOSPHORUS, Serum	3.9	2.7-4.5 mg/dl	Molybdate UV
CALCIUM, Serum	9.1	8.6-10.0 mg/dl	N-BAPTA
SODIUM, Serum	136	135-148 mmol/l	ISE
POTASSIUM, Serum	4.4	3.5-5.3 mmol/l	ISE
CHLORIDE, Serum	99	98-107 mmol/l	ISE

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MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/TMT
THYROID FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	4.8	2.6-5.7 pmol/L	CMIA
Kindly note change in reference range and method w.e.f. 16/08/2019			
Free T4, Serum	14.5	9-19 pmol/L	CMIA
Kindly note change in reference range and method w.e.f. 16/08/2019			
sensitiveTSH, Serum	2.26	0.35-4.94 microIU/ml	CMIA

Kindly note change in reference range and method w.e.f. 16/08/2019. 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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Collected : 13-Nov-2021 / 10:07
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Interpretation:

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

Clinical Significance:

- 1)TSH Values between 5.5 to 15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2)TSH values may be transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

Diurnal Variation:TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am , and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7%(with in subject variation)

Reflex Tests:Anti thyroid Antibodies,USG Thyroid ,TSH receptor Antibody. Thyroglobulin, Calcitonin

Limitations:Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.

Reference:

- 1.O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2.Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3.Tietz ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4.Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Pune Lab, Pune Swargate

*** End Of Report ***



Shamla Kulkarni

Dr.SHAMLA KULKARNI
M.D.(PATH)
Pathologist

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

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

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



CID : 2131734845
Name : MR.SARAK NITIN RAJRAM
Age / Gender : 40 Years / Male
Consulting Dr. : -
Reg. Location : Lulla Nagar, Pune (Main Centre)

Collected : 13-Nov-2021 / 10:07
Reported : 13-Nov-2021 / 12:23

Use a QR Code Scanner
Application To Scan the Code

MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/TMT
LIVER FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
BILIRUBIN (TOTAL), Serum	0.84	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.25	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.59	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.1	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.5	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.6	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.7	1 - 2	Calculated
SGOT (AST), Serum	14.4	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	15.5	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	15.8	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	41.3	40-130 U/L	Colorimetric

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



MC-2463



Signature

Dr.SHRUTI RAMTEKE
M.B.B.S, DCP (PATH)
Pathologist

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

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

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



CID : 2131734845
 Name : MR.SARAK NITIN RAJRAM
 Age / Gender : 40 Years / Male
 Consulting Dr. : -
 Reg. Location : Lulla Nagar, Pune (Main Centre)

Use a QR Code Scanner Application To Scan the Code
 Collected : 13-Nov-2021 / 11:33
 Reported : 13-Nov-2021 / 15:36

PPUS and KETONES

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Urine Sugar (PP)	Absent	Absent	
Urine Ketones (PP)	Absent	Absent	

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



MC-2463



Shruti Ramteke
Dr.SHRUTI RAMTEKE
M.B.B.S, DCP (PATH)
Pathologist

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

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

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

Suburban Diagnostics Lullanagar

Patient Details

Date: 13-Nov-21

Time: 11:14:37 AM

Name: NITIN SARA K ID: 2131734845

Age: 40 y

Sex: M

Height: 171 cms.

Weight: 91 Kg.

Clinical History: HTN SINCE 10 YEARS

Medications: ON MEDICATION

Test Details

Protocol: Bruce

Pr.MHR: 180 bpm

THR: 162 (90 % of Pr.MHR) bpm

Total Exec. Time: 6 m 48 s

Max. HR: 164 (91% of Pr.MHR)bpm

Max. Mets: 10.20

Max. BP: 162 / 112 mmHg

Max. BP x HR: 26568 mmHg/min

Min. BP x HR: 10388 mmHg/min

Test Termination Criteria: Target HR attained

Protocol Details

Stage Name	Stage Time (min : sec)	Mets	Speed (mph)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
Supine	0 : 12	1.0	0	0	107	140 / 98	-0.42 aVR	1.42 II
Standing	0 : 9	1.0	0	0	106	140 / 98	-0.42 aVR	1.42 II
Hyperventilation	0 : 18	1.0	0	0	107	140 / 98	-0.42 aVR	1.42 II
1	3 : 0	4.6	1.7	10	146	140 / 98	-2.55 III	3.54 II
2	3 : 0	7.0	2.5	12	158	162 / 112	-2.12 III	4.95 V2
Peak Ex	0 : 48	10.2	3.4	14	164	162 / 112	-1.49 III	4.95 V2
Recovery(1)	1 : 0	1.8	1	0	133	162 / 112	-2.12 aVR	5.66 V2
Recovery(2)	1 : 0	1.0	0	0	116	162 / 112	-2.12 aVR	5.66 V2
Recovery(3)	1 : 0	1.0	0	0	111	162 / 112	-1.27 aVR	3.18 II
Recovery(4)	1 : 0	1.0	0	0	110	162 / 112	-0.64 aVR	1.77 I
Recovery(5)	1 : 0	1.0	0	0	115	162 / 112	-1.06 V6	-1.77 aVR
Recovery(6)	1 : 0	1.0	0	0	112	162 / 112	-0.64 aVR	1.42 I
Recovery(7)	1 : 0	1.0	0	0	111	162 / 112	-0.64 aVR	1.77 I
Recovery(8)	0 : 2	1.0	0	0	111	162 / 112	-0.64 aVR	1.42 I

Interpretation

The patient exercised according to the Bruce protocol for 6 m 48 s achieving a work level of Max. METS : 10.20. Resting heart rate initially 107 bpm, rose to a max. heart rate of 164 (91% of Pr.MHR) bpm. Resting blood Pressure 140 / 98 mmHg, rose to a maximum blood pressure of 162 / 112 mmHg.

Good Effort Tolerance.

No Angina/Arrhythmia/Dyspnoea/significant ST T changes during test/recovery.

Stress Test is NEGATIVE for Inducible Myocardial Ischemia.

Disclaimer :

Negative Stress Test does not rule out Coronary Artery Diseases.

Positive Test is suggestive but not confirmatory of Coronary Artery Disease.

Hence clinical correlation is mandatory.

Ref. Doctor: BOB

(Summary Report edited by user)


 Doctor: DR. MILIND SHINDE

(c) Schiller Healthcare India Pvt. Ltd. V 4.51



Dr. MILIND SHINDE
 MBBS, DNB Medicine
 Reg. No. 2011/05/1544

NITIN SARAK (40 M)

ID: 2131734845

Date: 13-NOV-21

Exec Time : 0 m 0 s

Stage Time : 0 m 6 s

HR: 107 bpm

Protocol: Bruce

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 162 bpm)

B.P: 140 / 98

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

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

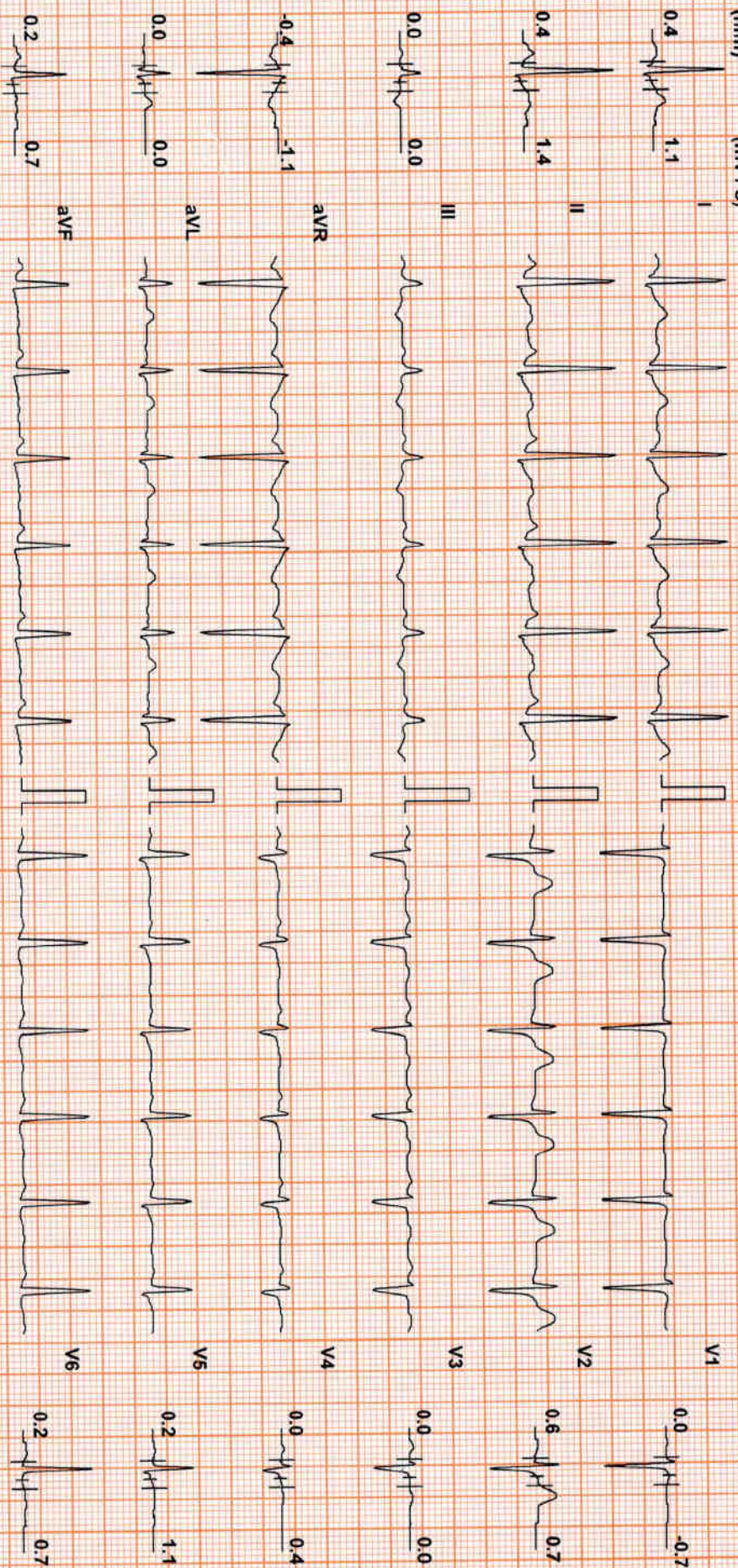


Chart Speed: 25 mm/sec
Schiller Spandan V4.51

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms
Linked Median

NITIN SARAK (40 M)

ID: 2131734845

Date: 13-Nov-21

Exec Time : 0 m 0 s

Stage Time : 0 m 3 s

HR: 108 bpm

Protocol: Bruce

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 162 bpm)

B.P: 140 / 98

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

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

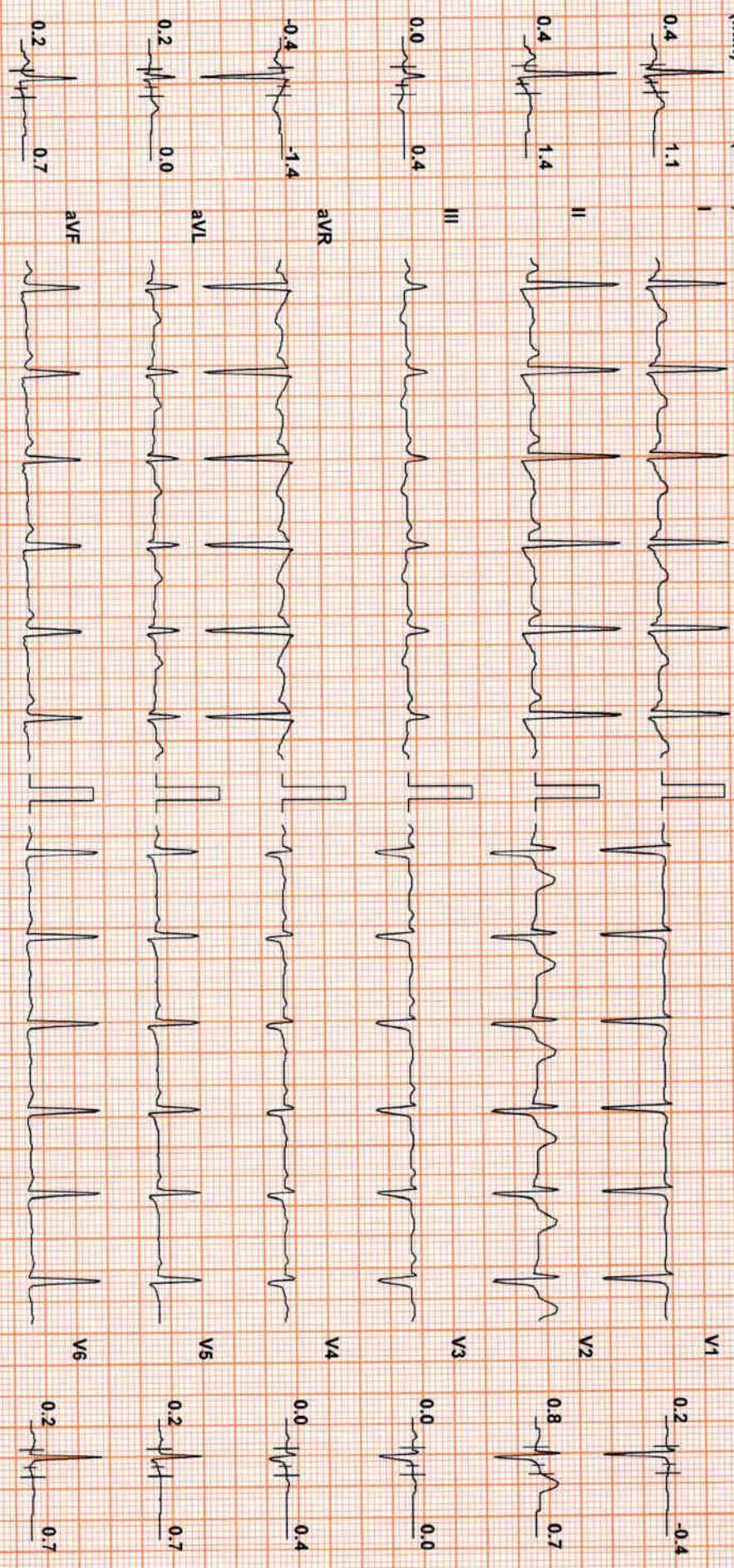


Chart Speed: 25 mm/sec
Schlier Spannen V 4.51

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

NITIN SARRAK (40 M)

ID: 2131734845

Date: 13-Nov-21

Exec Time : 0 m 0 s

Stage Time : 0 m 12 s

HR: 110 bpm

Protocol: Bruce

Stage: Hyperventilation

Speed: 0 mph

Grade: 0 %

(THR: 162 bpm)

B.P: 140 / 98

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

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

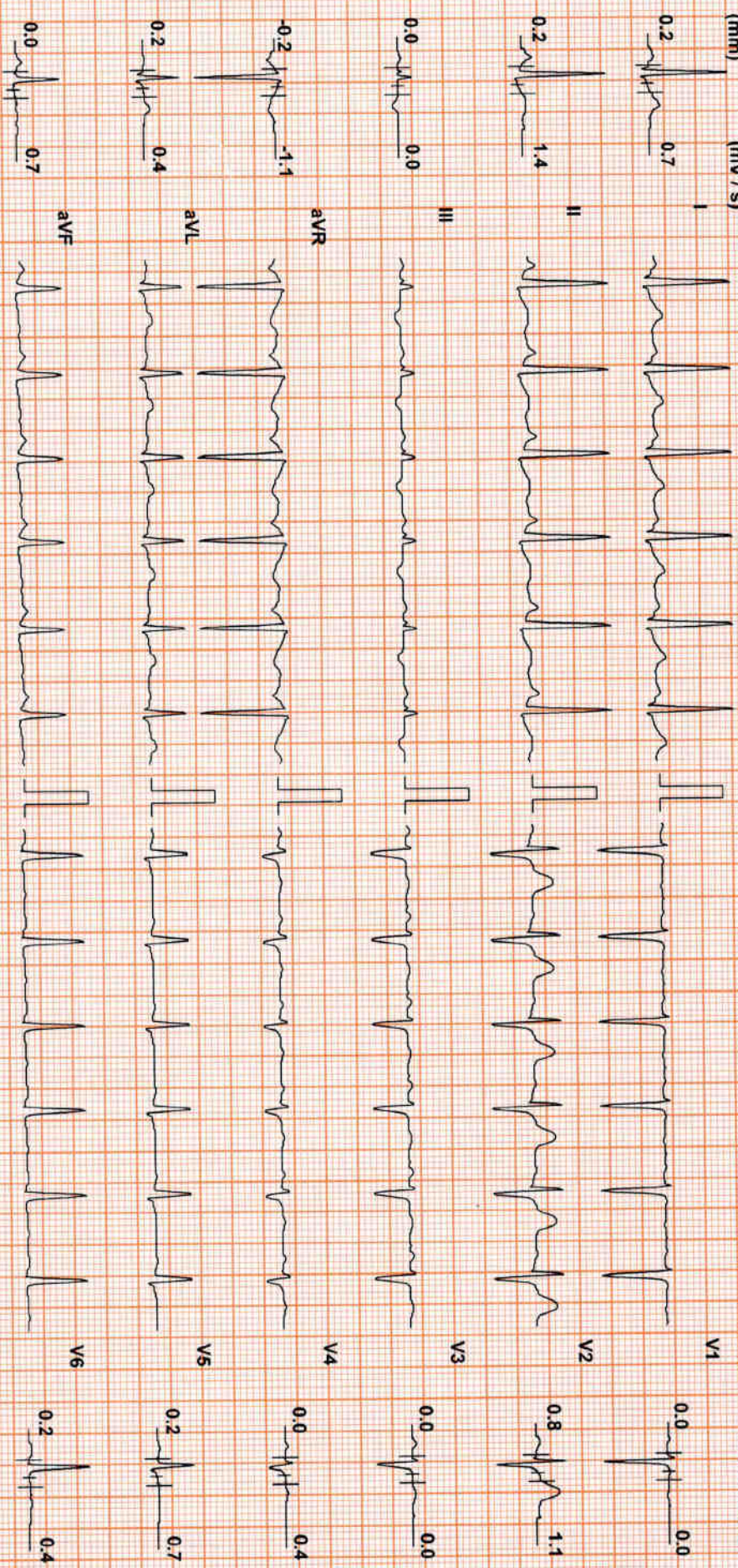


Chart Speed: 25 mm/sec
Schiller Sparden V 4.51

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

180 = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

NITIN SARAK (40 M)

ID: 2131734845

Date: 13-Nov-21 Exec Time : 2 m 54 s Stage Time : 2 m 54 s HR: 145 bpm

Protocol: Bruce

Stage: 1

Speed: 1.7 mph Grade: 10 %

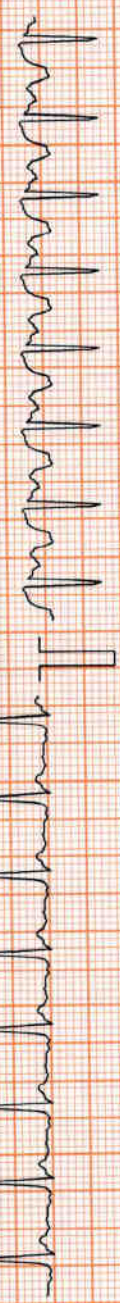
(THR: 162 bpm)

B.P.: 140 / 98

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

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

0.6 2.8



0.2 -0.4

0.2 1.8



1.7 2.8

-0.4 -0.7



0.2 1.1

-0.4 -2.1



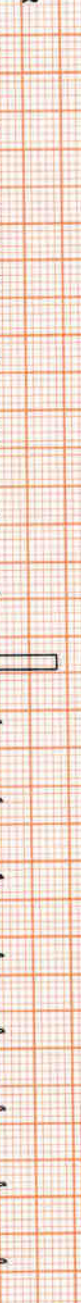
0.4 1.4

0.2 1.1



0.4 1.8

0.0 0.7



0.0 0.7

0.2 1.1



0.2 -0.4

0.2 1.1



0.2 1.4

0.2 1.1



0.2 1.1

0.2 1.1



0.4 1.4

0.2 1.1



0.2 1.8

0.0 0.7



0.0 0.7

Chart Speed: 25 mm/sec
Schlier, Sparden V.4.51

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

NITIN SARAK (40 M)

ID: 2131734845

Date: 13-Nov-21 Exec Time : 5 m 54 s Stage Time : 2 m 54 s HR: 158 bpm

Protocol: Bruce

Stage: 2

Speed: 2.5 mph

Grade: 12 %

(THR: 162 bpm)

B.P: 162 / 112

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

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

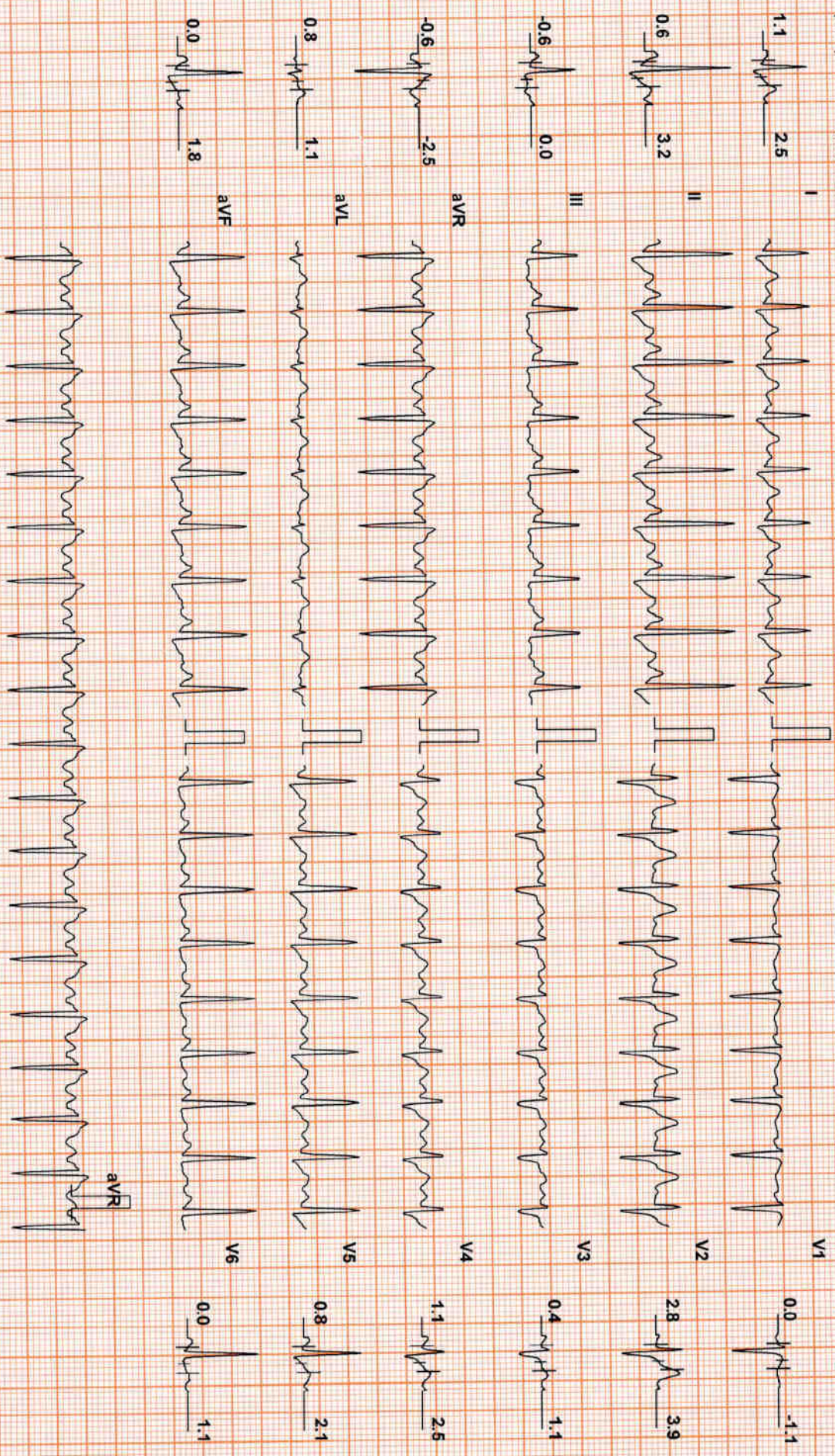


Chart Speed: 25 mm/sec
Schiller Spakden V 4 51

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

NITIN SARAK (40 M)

ID: 2131734845

Date: 13-Nov-21

Exec Time : 6 m 42 s Stage Time : 0 m 42 s HR: 164 bpm

Protocol: Bruce

Stage: Peak Ex

Speed: 3.4 mph

Grade: 14 %

(THR: 162 bpm)

B.P: 162 / 112

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

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

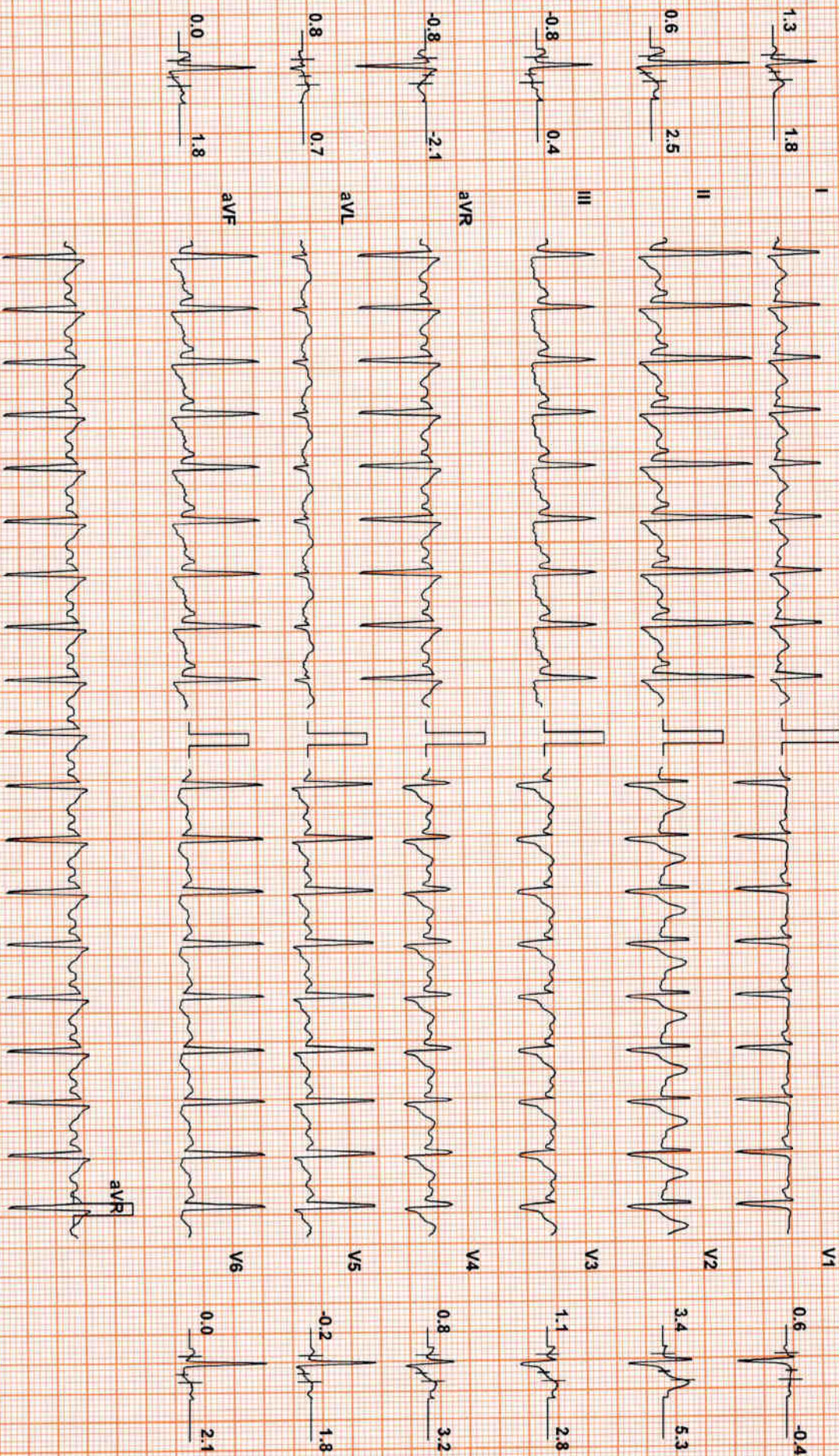


Chart Speed: 25 mm/sec
Schiller Spandan V 4 ST

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

150 = R - 60 ms

J = R + 60 ms

Pos J = J + 60 ms

Linked Median

NITIN SARAK (40 M)

ID: 2131734845

Date: 13-Nov-21

Exec Time : 6 m 48 s Stage Time : 0 m 54 s HR: 135 bpm

Protocol: Bruce

Stage: Recovery(1)

Speed: 1 mph

Grade: 0 %

(THR: 162 bpm)

B.P: 162 / 112

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

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

1.9 3.2

0.0 -0.4

I

V1

2.1 4.2

4.0 5.7

II

V2

0.0 0.7

1.9 2.5

III

V3

-1.9 -3.5

2.5 3.9

aVR

V4

0.8 0.7

1.5 2.8

aVL

V5

1.1 2.5

0.6 1.4

aVF

V6

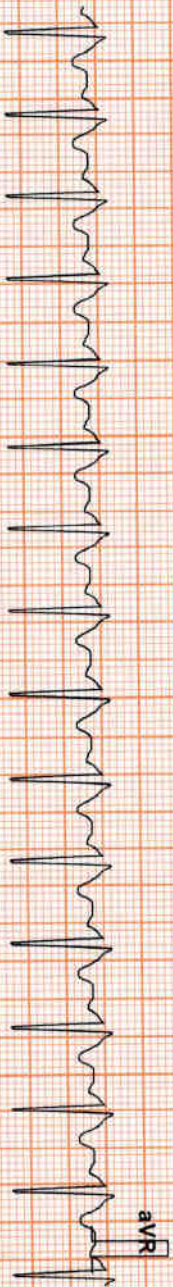


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spandian V.4.51

Linked Median

NITTIN SARAK (40 M)

ID: 2131734845

Date: 13-Nov-21

Exec Time : 6 m 48 s Stage Time : 0 m 54 s HR: 115 bpm

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 162 bpm)

B.P: 162 / 112

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

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

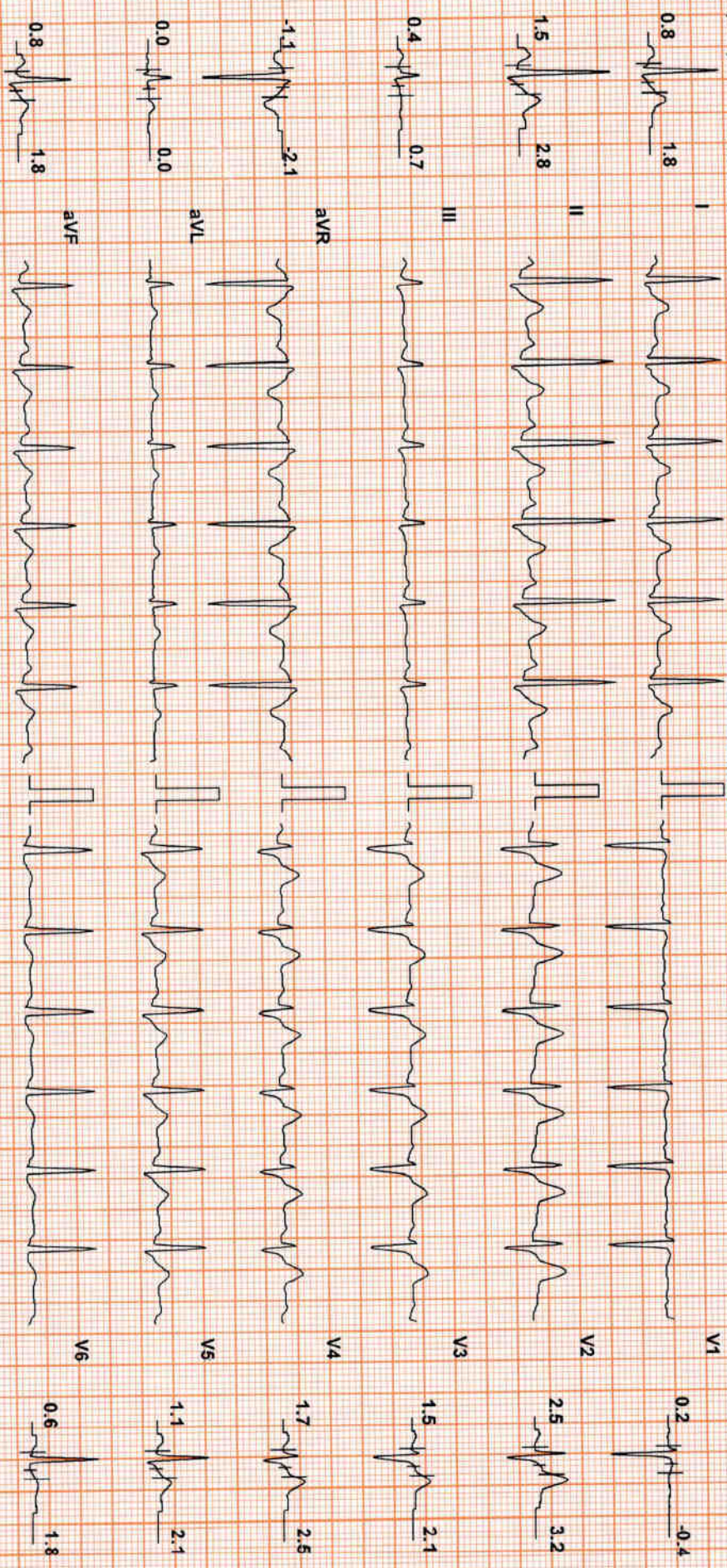


Chart Speed: 25 mm/sec
Schluter Spardan V 4.51

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

NITIN SARAK (40 M)

ID: 2131734845

Date: 13-Nov-21 Exec Time : 6 m 48 s Stage Time : 0 m 54 s HR: 111 bpm

Protocol: Bruce

Stage: Recovery(3)

Speed: 0 mph

Grade: 0 %

(THR: 162 bpm)

B.P: 162 / 112

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

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

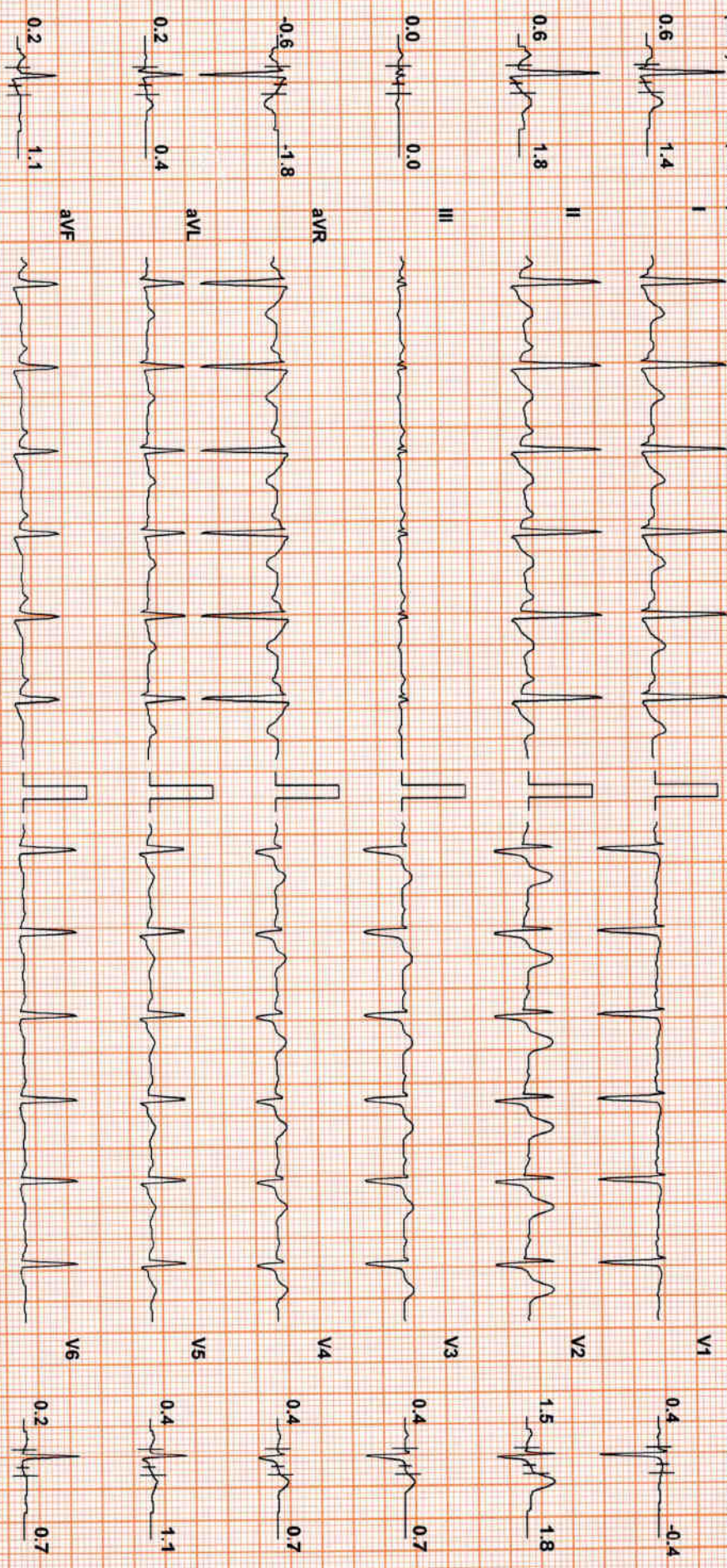


Chart Speed: 25 mm/sec
Schlier Spandan V4.5f

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

NITIN SARAK (40 M)

ID: 2131734845

Date: 13-Nov-21

Exec Time : 6 m 48 s Stage Time : 0 m 54 s

HR: 114 bpm

Protocol: Bruce

Stage: Recovery(4)

Speed: 0 mph

Grade: 0 %

(THR: 162 bpm)

B.P: 162 / 112

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

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

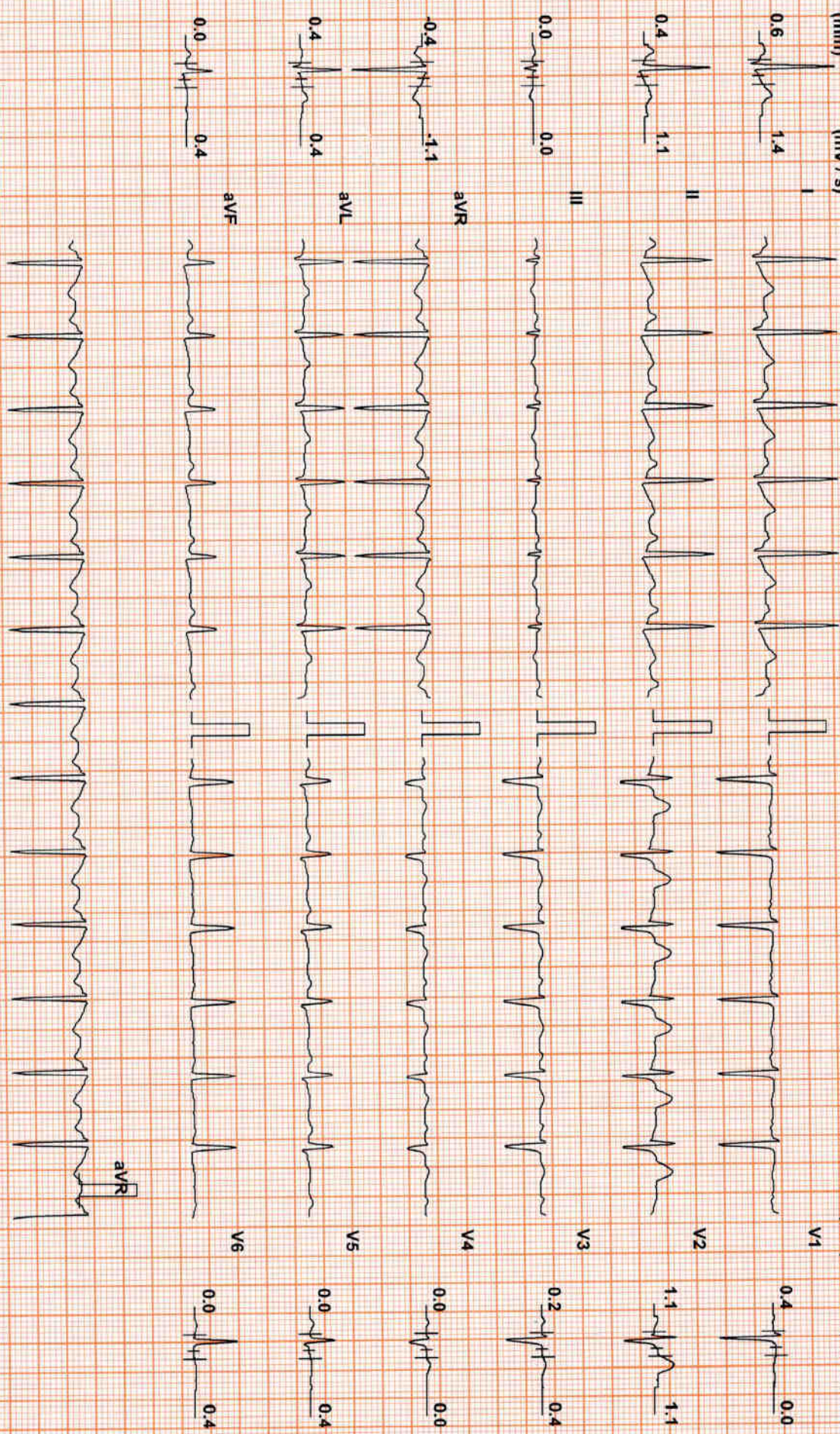


Chart Speed: 25 mm/sec
Schiller Spanken V.4.5f

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms
Linked Median

NITTIN SARRAK (40 M)

ID: 2131734845

Date: 13-Nov-21

Exec Time : 6 m 48 s Stage Time : 0 m 54 s

HR: 111 bpm

Protocol: Bruce

Stage: Recovery(5)

Speed: 0 mph

Grade: 0 %

(THR: 162 bpm)

B.P.: 162 / 112

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

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

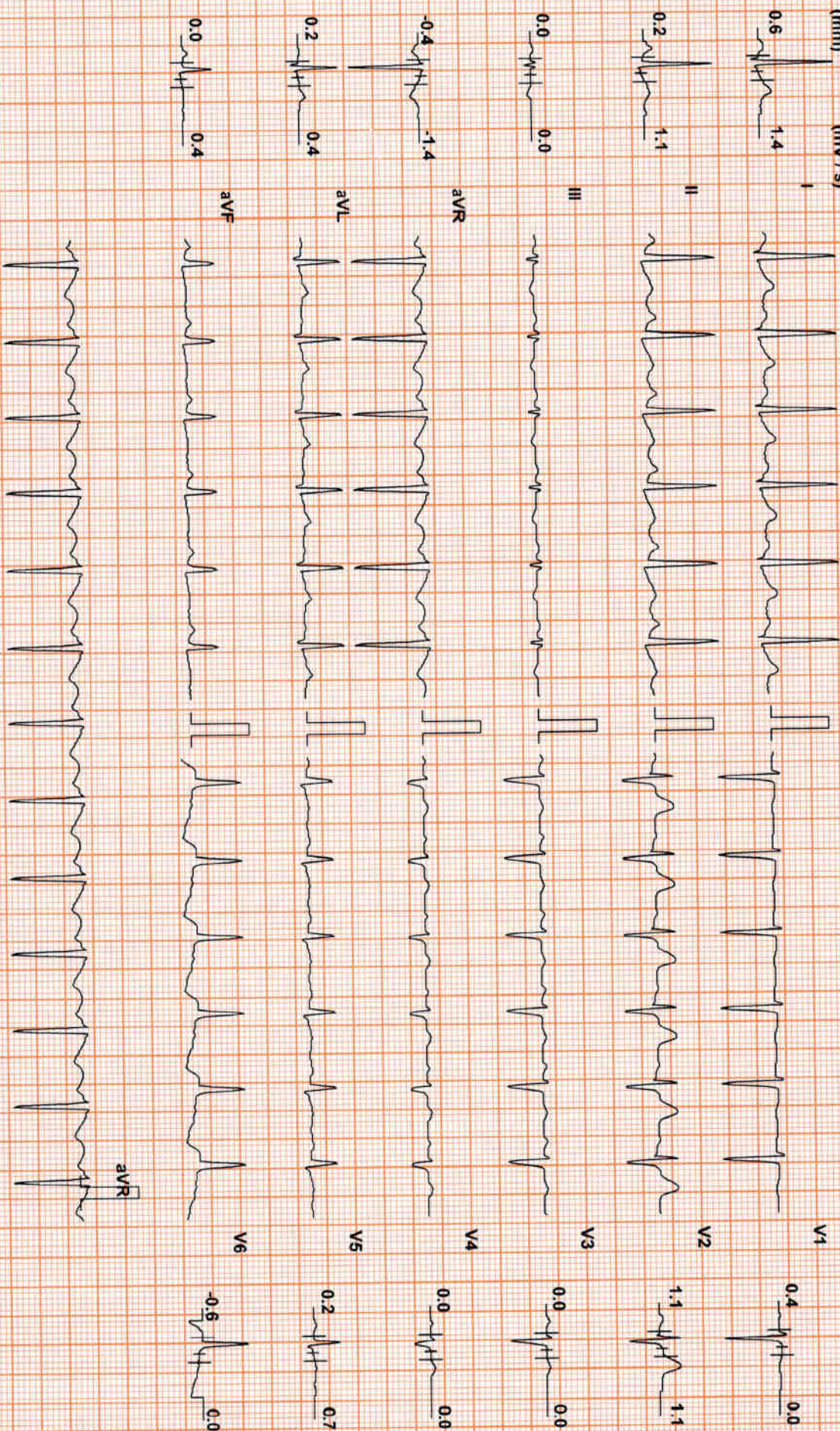


Chart Speed: 25 mm/sec
Schiller Standard V 4 51

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

NITIN SARAK (40 M)

ID: 2131734845

Date: 13-Nov-21

Exec Time : 6 m 48 s

Stage Time : 0 m 54 s

HR: 112 bpm

Protocol: Bruce

Stage: Recovery(6)

Speed: 0 mph

Grade: 0 %

(THR: 162 bpm)

B.P: 162 / 112

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

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

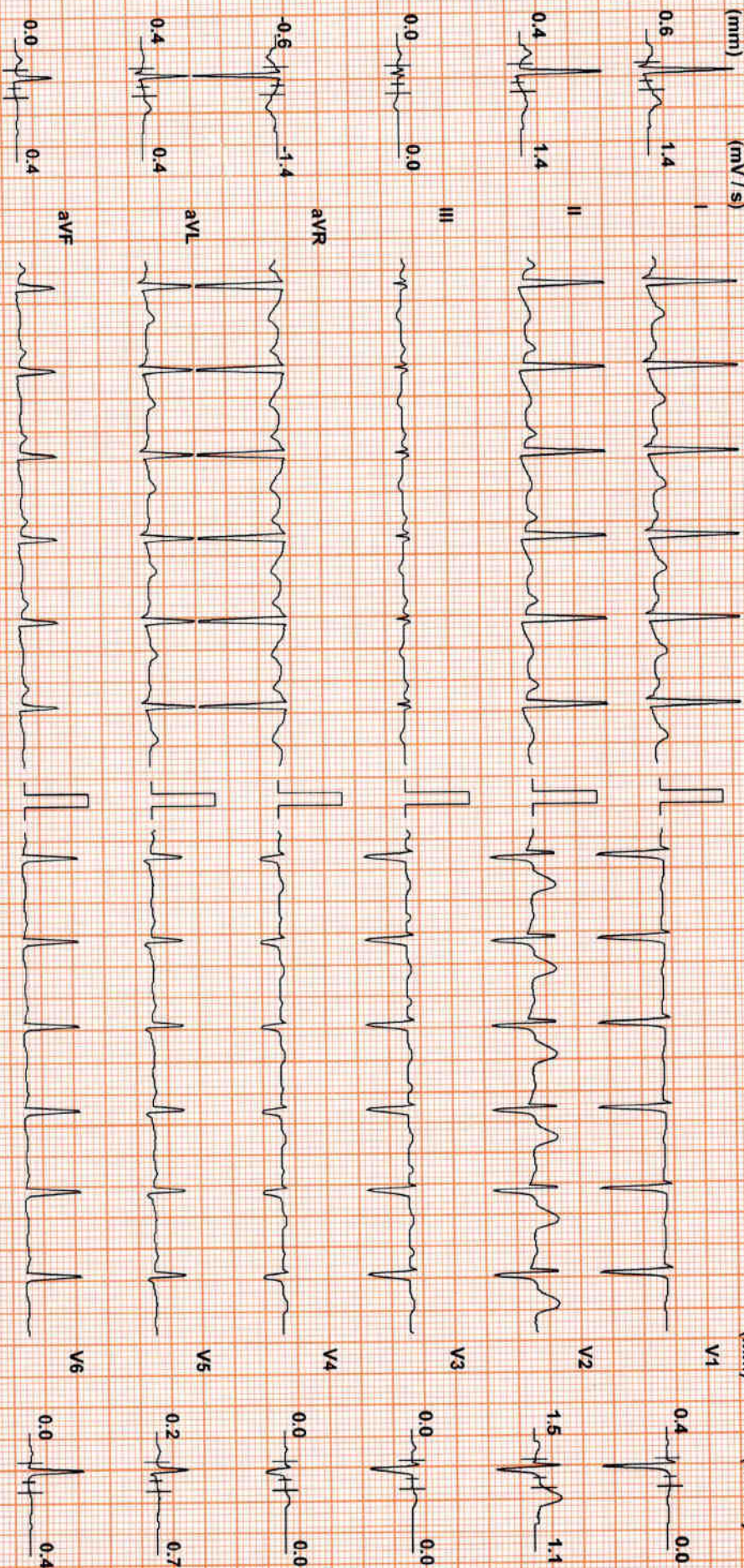


Chart Speed: 25 mm/sec
Schiller-Spenden V 4.5f

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

150 = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

NITIN SARRAK (40 M)

ID: 2131734845

Date: 13-Nov-21

Exec Time : 6 m 48 s Stage Time : 0 m 54 s

HR: 111 bpm

Protocol: Bruce

Stage: Recovery(7)

Speed: 0 mph

Grade: 0 %

(THR: 162 bpm)

B.P: 162 / 112

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

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

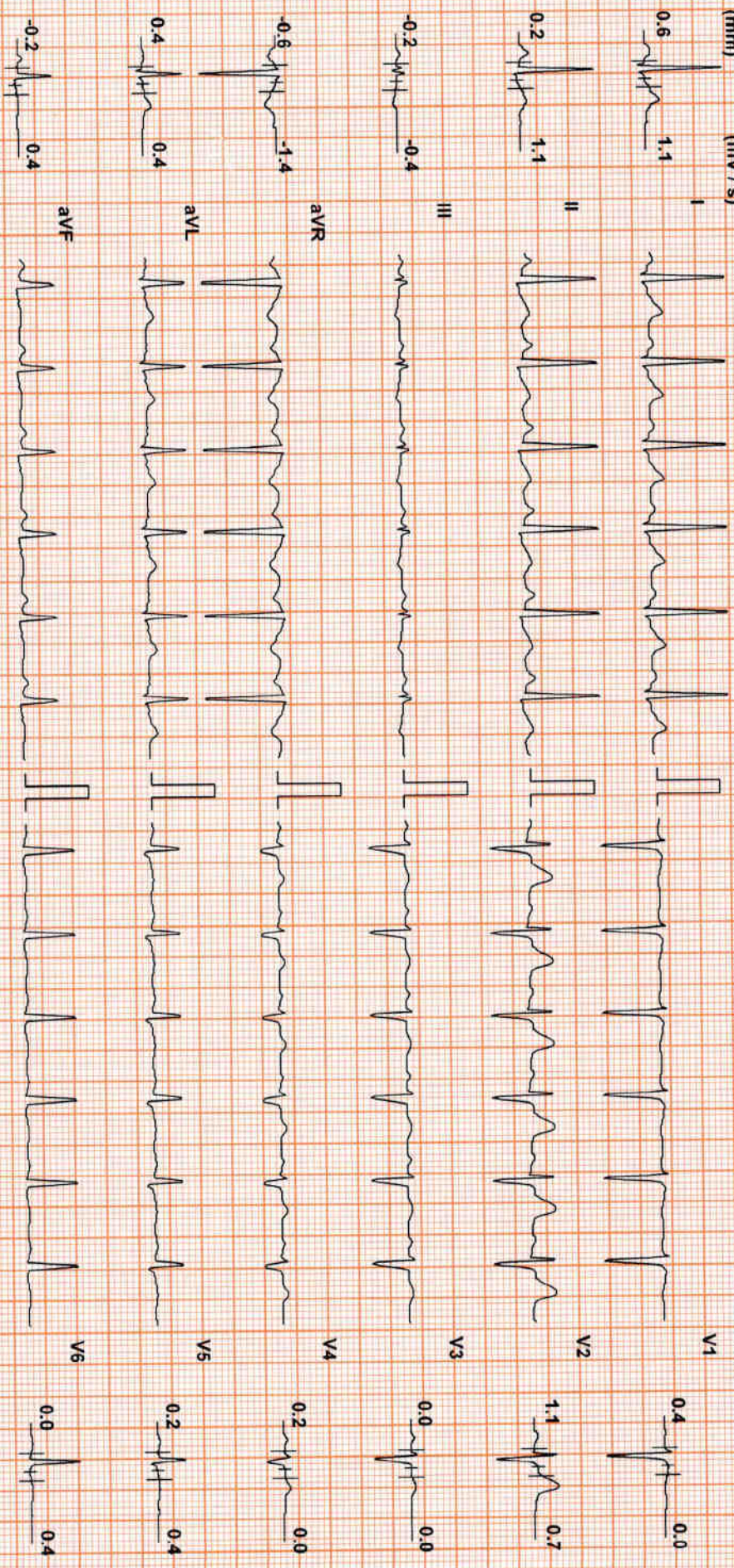


Chart Speed: 25 mm/sec
Schiller Standard V 4.51

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

NITIN SARAK (40 M)

ID: 2131734845

Date: 13-Nov-21

Exec Time : 6 m 48 s Stage Time : 0 m 56 s HR: 111 bpm

Protocol: Bruce

Stage: Recovery(8)

Speed: 0 mph

Grade: 0 %

(THR: 162 bpm)

B.P: 162 / 112

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

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

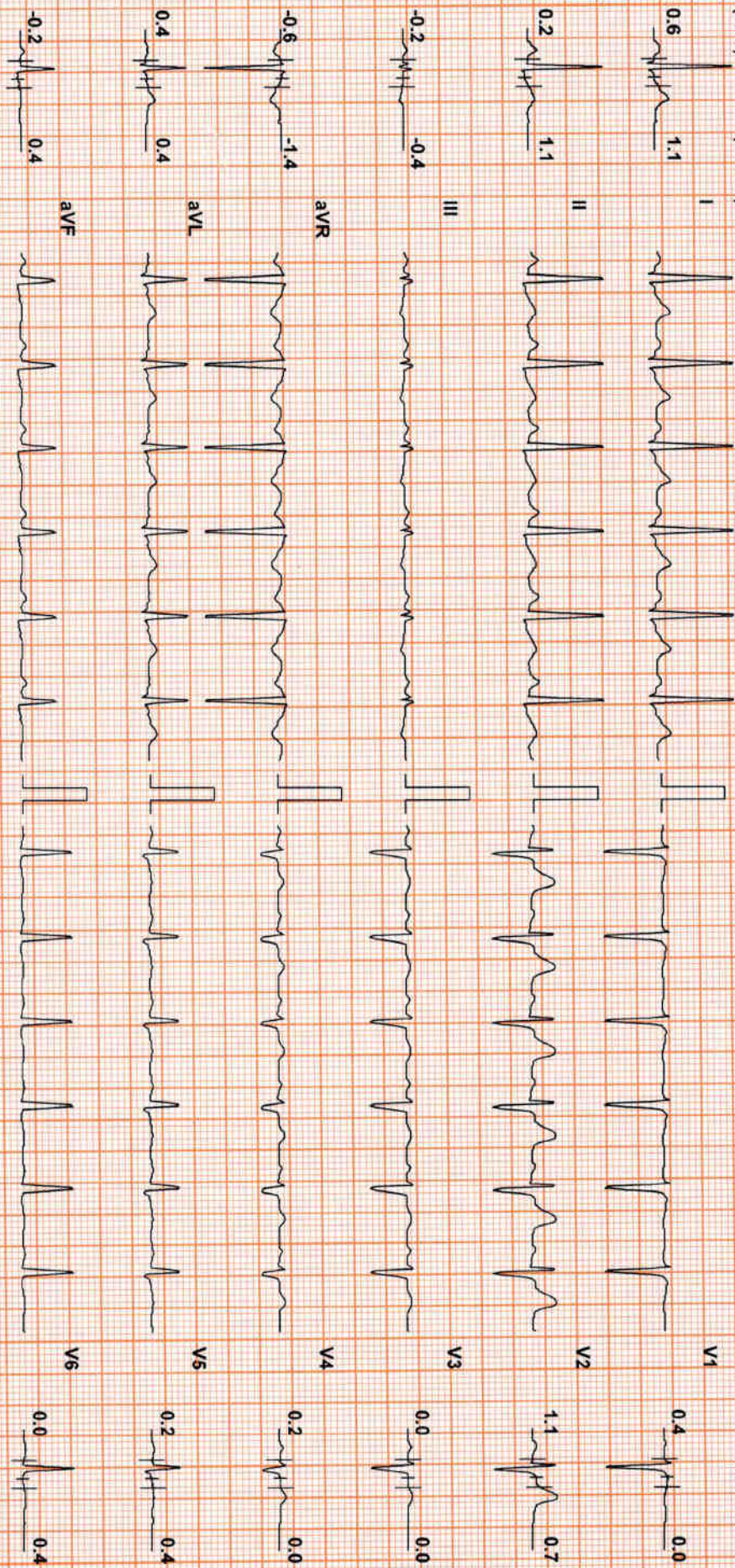


Chart Speed: 25 mm/sec
Schiller Sparden V 4.51

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = V + 60 ms

Linked Median