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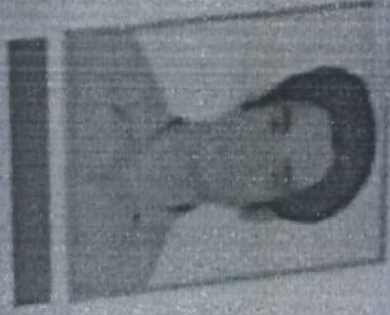
Name PRASHIK ASHOK BHUTANGE

एकमात्र खाता क्र.

E. C. No. 127227

NIAS-11

संश्लेषण अधिकारी  
Issuing Authority



हस्ताक्षर  
Signature of Holder

**PHYSICAL EXAMINATION REPORT**

Patient Name	Prashik Bhutange	Sex/Age	M / 28
Date	22/10/22	Location	Thane

**History and Complaints**

heavy

**EXAMINATION FINDINGS:**

Height (cms):	171	Temp (0c):	Arb
Weight (kg):	59.9	Skin:	NAD
Blood Pressure	106/76	Nails:	TL
Pulse	70/min	Lymph Node:	Not palpable

**Systems :**

Cardiovascular:	Clear NAD ↓
Respiratory:	
Genitourinary:	
GI System:	
CNS:	

**Impression:**

↓ HDL, ↑ LDL, Adv.  
 ↑ fruits & veg in diet.

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

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

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R.NO. 49972

Advice:

1)	Hypertension:	
2)	IHD	
3)	Arrhythmia	
4)	Diabetes Mellitus	
5)	Tuberculosis	NO
6)	Asthama	
7)	Pulmonary Disease	
8)	Thyroid/ Endocrine disorders	
9)	Nervous disorders	
10)	GI system	NAD
11)	Genital urinary disorder	
12)	Rheumatic joint diseases or symptoms	
13)	Blood disease or disorder	NO
14)	Cancer/lump growth/cyst	
15)	Congenital disease	
16)	Surgeries	
17)	Musculoskeletal System	NAD

PERSONAL HISTORY:

1)	Alcohol	NO
2)	Smoking	NO
3)	Diet	Mixed
4)	Medication	NO

Dr. SHAILAJA PILLAI  
M.D. (GEN.MED)  
R.NO. 49972

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Application To Scan the Code

CID : 2229520225  
Name : MR.PRASHIK ASHOK BHUTANGE  
Age / Gender : 28 Years / Male  
Consulting Dr. : -  
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 22-Oct-2022 / 08:35  
Reported : 22-Oct-2022 / 11:59

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

**CBC (Complete Blood Count), Blood**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>RBC PARAMETERS</u></b>			
Haemoglobin	14.2	13.0-17.0 g/dL	Spectrophotometric
RBC	4.96	4.5-5.5 mil/cmm	Elect. Impedance
PCV	43.4	40-50 %	Measured
MCV	87	80-100 fl	Calculated
MCH	28.5	27-32 pg	Calculated
MCHC	32.7	31.5-34.5 g/dL	Calculated
RDW	17.1	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	5000	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	32.1	20-40 %	
Absolute Lymphocytes	1605.0	1000-3000 /cmm	Calculated
Monocytes	10.0	2-10 %	
Absolute Monocytes	500.0	200-1000 /cmm	Calculated
Neutrophils	56.5	40-80 %	
Absolute Neutrophils	2825.0	2000-7000 /cmm	Calculated
Eosinophils	1.4	1-6 %	
Absolute Eosinophils	70.0	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	192000	150000-400000 /cmm	Elect. Impedance
MPV	9.3	6-11 fl	Calculated
PDW	18.5	11-18 %	Calculated

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Collected : 22-Oct-2022 / 08:35  
Reported : 22-Oct-2022 / 11:12

**RBC MORPHOLOGY**

Hypochromia -  
Microcytosis -  
Macrocytosis -  
Anisocytosis Mild  
Poikilocytosis Mild  
Polychromasia -  
Target Cells -  
Basophilic Stippling -  
Normoblasts -  
Others Elliptocytes-occasional  
WBC MORPHOLOGY -  
PLATELET MORPHOLOGY -  
COMMENT -

Specimen: EDTA Whole Blood

ESR, EDTA WB 14 2-15 mm at 1 hr. Westergren

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West  
\*\*\* End Of Report \*\*\*



*Amit Taori*

Dr.AMIT TAORI  
M.D ( Path )  
Pathologist



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Age / Gender : 28 Years / Male  
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Reg. Location : G B Road, Thane West (Main Centre)

Collected : 22-Oct-2022 / 08:35  
Reported : 22-Oct-2022 / 11:30

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	87.3	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	109.9	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.63	0.1-1.2 mg/dl	Diazo
BILIRUBIN (DIRECT), Serum	0.26	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.37	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.5	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.5	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	3	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.5	1 - 2	Calculated
SGOT (AST), Serum	15.7	5-40 U/L	IFCC without pyridoxal phosphate activation
SGPT (ALT), Serum	14.0	5-45 U/L	IFCC without pyridoxal phosphate activation
GAMMA GT, Serum	22.5	3-60 U/L	IFCC
ALKALINE PHOSPHATASE, Serum	68.5	40-130 U/L	PNPP
BLOOD UREA, Serum	18.3	12.8-42.8 mg/dl	Urease & GLDH
BUN, Serum	8.6	6-20 mg/dl	Calculated

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Reported : 22-Oct-2022 / 15:14

CREATININE, Serum	0.92	0.67-1.17 mg/dl	Enzymatic
eGFR, Serum	104	>60 ml/min/1.73sqm	Calculated
URIC ACID, Serum	6.9	3.5-7.2 mg/dl	Uricase
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West  
\*\*\* End Of Report \*\*\*



*Amid Taori*

Dr.AMIT TAORI  
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Pathologist



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Consulting Dr. : -  
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 22-Oct-2022 / 08:35  
Reported : 22-Oct-2022 / 15:58

**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	5.4	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	108.3	mg/dl	Calculated

Note: Variant window (32.8 %) detected. Advice: Hb electrophoresis for confirmation of abnormal hemoglobin.





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Collected : 22-Oct-2022 / 08:35  
Reported : 22-Oct-2022 / 15:58

**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 SDRL, Vidyavihar Lab  
\*\*\* End Of Report \*\*\*



*Anupa*

**Dr. ANUPA DIXIT**  
**M.D.(PATH)**  
**Consultant Pathologist & Lab**  
**Director**



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Reg. Location : G B Road, Thane West (Main Centre)

Collected : 22-Oct-2022 / 08:35  
Reported : 22-Oct-2022 / 14:26

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**EXAMINATION OF FAECES**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>
<b><u>PHYSICAL EXAMINATION</u></b>		
Colour	Brown	Brown
Form and Consistency	Semi Solid	Semi Solid
Mucus	Absent	Absent
Blood	Absent	Absent
<b><u>CHEMICAL EXAMINATION</u></b>		
Reaction (pH)	Acidic (6.5)	-
Occult Blood	Absent	Absent
<b><u>MICROSCOPIC EXAMINATION</u></b>		
Protozoa	Absent	Absent
Flagellates	Absent	Absent
Ciliates	Absent	Absent
Parasites	Absent	Absent
Macrophages	Absent	Absent
Mucus Strands	Absent	Absent
Fat Globules	Absent	Absent
RBC/hpf	Absent	Absent
WBC/hpf	Absent	Absent
Yeast Cells	Absent	Absent
Undigested Particles	Present +	-
Concentration Method (for ova)	No ova detected	Absent
Reducing Substances	-	Absent

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West  
\*\*\* End Of Report \*\*\*

*Amit Taori*

Dr. AMIT TAORI  
M.D ( Path )  
Pathologist





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Collected : 22-Oct-2022 / 08:35  
Reported : 22-Oct-2022 / 13:17

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
<b>PHYSICAL EXAMINATION</b>			
Color	Yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.020	1.001-1.030	Chemical Indicator
Transparency	Slight hazy	Clear	-
Volume (ml)	20	-	-
<b>CHEMICAL EXAMINATION</b>			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	2+	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
<b>MICROSCOPIC EXAMINATION</b>			
Leukocytes(Pus cells)/hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	2-3	0-2/hpf	
Epithelial Cells / hpf	3-4		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	4-5	Less than 20/hpf	
Others	-		

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



*Dr. Vrushi Shroff*  
**Dr.VRUSHALI SHROFF**  
**M.D.(PATH)**  
**Pathologist**



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Consulting Dr. : -  
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Collected : 22-Oct-2022 / 08:35  
Reported : 22-Oct-2022 / 13:14

**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 Semi- automated column agglutination technology (CAT)

Specimen: EDTA Whole Blood and/or serum

Clinical significance:  
ABO system is most important of all blood group in transfusion medicine

**Limitations:**

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

**References:**

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

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West  
\*\*\* End Of Report \*\*\*



*Dr. Amit Taori*

**Dr. AMIT TAORI**  
M.D ( Path )  
Pathologist



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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	167.1	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	77.0	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	35.6	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	131.5	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	117.0	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	14.5	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.7	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	3.3	0-3.5 Ratio	Calculated

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West  
\*\*\* End Of Report \*\*\*



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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	5.1	3.5-6.5 pmol/L	CLIA
Kindly note change in Ref range and method w.e.f.11-07-2022			
Free T4, Serum	14.5	11.5-22.7 pmol/L	CLIA
Kindly note change in Ref range and method w.e.f.11-07-2022			
sensitiveTSH, Serum	2.025	0.55-4.78 microIU/ml	CLIA
Kindly note change in Ref range and method w.e.f.11-07-2022			

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Reported : 22-Oct-2022 / 15:12

**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 transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart severe burns, trauma and surgery etc.

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

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

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

**Limitations:**

1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

**Reference:**

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

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



*Anupa*

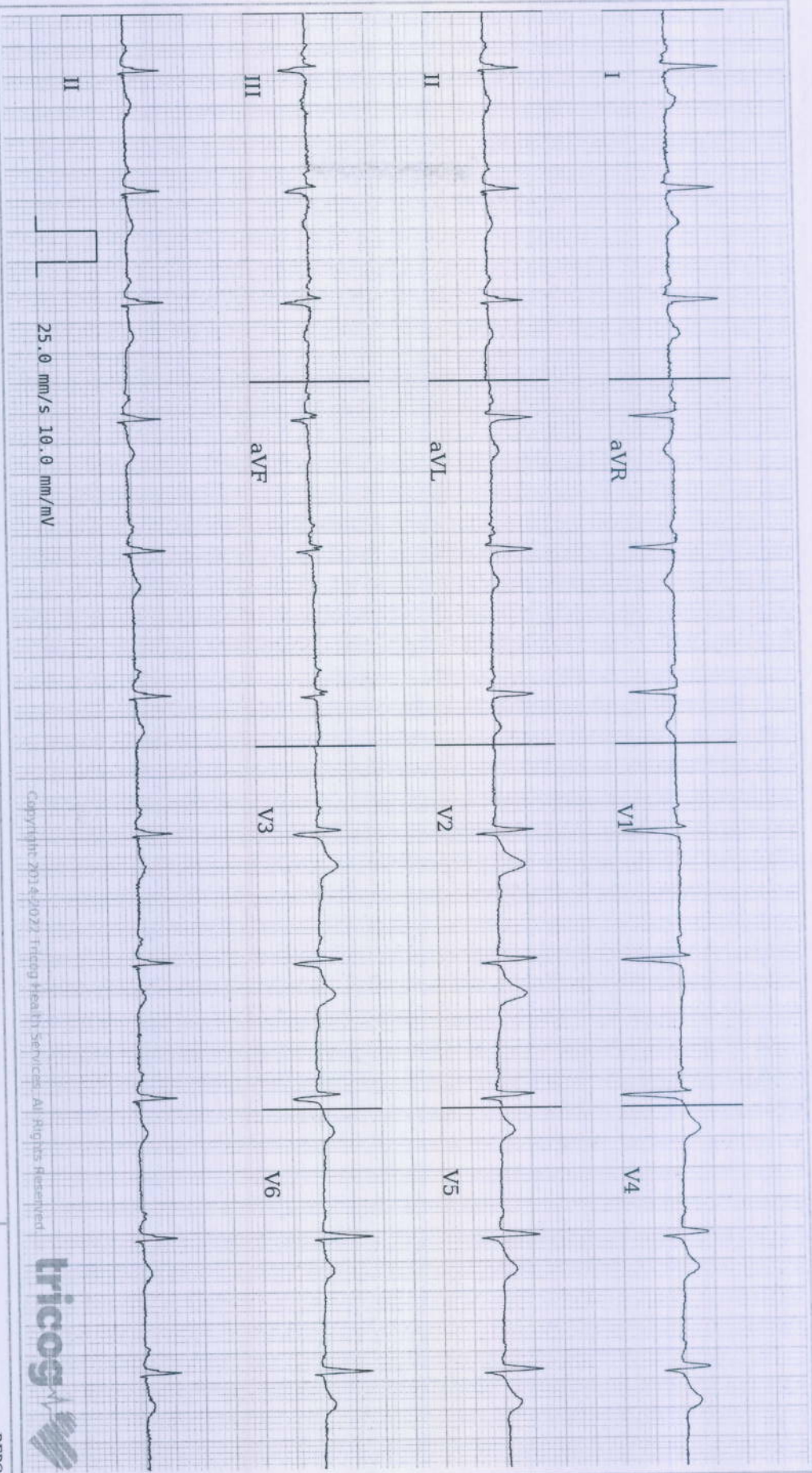
**Dr.ANUPA DIXIT**  
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Consultant Pathologist & Lab  
Director

**SUBURBAN DIAGNOSTICS - G B ROAD, THANE WEST**

Patient Name: PRASHIK ASHOK BHUTANGE

Date and Time: 22nd Oct 22 9:38 AM

Patient ID: 2229520225



Age 28 5 4  
years months days

Gender Male

Heart Rate 70bpm

**Patient Vitals**

BP: NA  
Weight: NA  
Height: NA  
Pulse: NA  
SpO2: NA  
Resp: NA  
Others:

**Measurements**

QRSD: 78ms  
QT: 368ms  
QTc: 397ms  
PR: 142ms  
P-R-T: 28° 6° 8°

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

REPORTED BY

DR SHAILAJA PILLAI  
MBBS, MD Physician  
MD Physician  
49972

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Disclaimer: 1) Analysis in this report is based on ECG alone and should 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. 2) Patient vitals are as entered by the clinician and not derived from the ECG.



**SUBURBAN DIAGNOSTICS THANE GB**  
**THANE GB**

1083 (2229520225) / PRASHIK BHUTANGE / 28 Yrs / M / 59 Cms / 171 Kg Date: 22-Oct-2022

Stage	Time	Duration	Speed(mph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:12	0:12	00.0	00.0	01.0	067	35 %	110/70	073	00	
Standing	00:16	0:04	00.0	00.0	01.0	069	36 %	110/70	075	00	
HV	00:20	0:04	00.0	00.0	01.0	071	37 %	110/70	078	00	
ExStart	00:29	0:09	00.0	00.0	01.0	071	37 %	110/70	078	00	
BRUCE Stage 1	03:29	3:00	01.7	10.0	04.7	120	62 %	120/70	144	00	
BRUCE Stage 2	06:29	3:00	02.5	12.0	07.1	144	75 %	130/80	187	00	
BRUCE Stage 3	09:29	3:00	03.4	14.0	10.2	166	86 %	140/80	232	00	
PeakEx	09:37	0:08	04.2	16.0	10.4	165	86 %	150/80	247	00	
Recovery	10:37	1:00	00.0	00.0	04.2	126	66 %	150/80	189	00	
Recovery	11:37	2:00	00.0	00.0	01.0	108	56 %	150/80	162	00	
Recovery	13:37	4:00	00.0	00.0	01.0	101	53 %	120/70	121	00	
Recovery	13:47				00.0	000	0 %	---/---	000	00	

**FINDINGS :**

Exercise Time : 09:08  
 Max HR Attained : 166 bpm 86% of Target 192  
 Max BP Attained : 150/80  
 Max Workload Attained : 10.4 Good response to induced stress  
 Test End Reasons : Heart Rate Achieved, Fatigue,

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**M.D. (GEN.MED)**  
**R.NO. 49972**

Doctor : DR SHAILAJA PILLAI



**REPORT :**

**PROCEDURE DONE:** Graded exercise treadmill stress test.

**STRESS ECG RESULTS:** The initial HR was recorded as 69.0 bpm, and the maximum predicted Target Heart Rate 192.0. The BP increased at the time of generating report as 150.0/80.0 mmHg. The Max Dep went upto 4.0. 0.0 Ectopic Beats were observed during the Test.

The Test was completed because of Heart Rate Achieved, Fatigue,.

**CONCLUSIONS:**

1. TMT is negative for exercise induced ischemia.
2. Normal chronotropic and Normal inotropic response.
3. No significant ST T changes seen.

**Dr. SHAILAJA PILLAI**  
**M.D. (GEN.MED)**  
**R.NO. 49972**

**Doctor : DR SHAILAJA PILLAI**



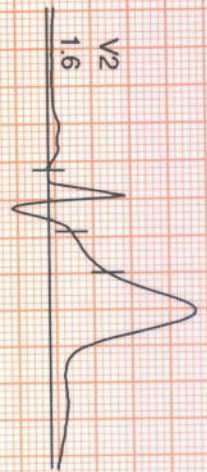


1083 (2229320225) / PRASHIK BHUTANGE / 28 Yrs / M / 59 Cms / 171 Kg / HR : 67

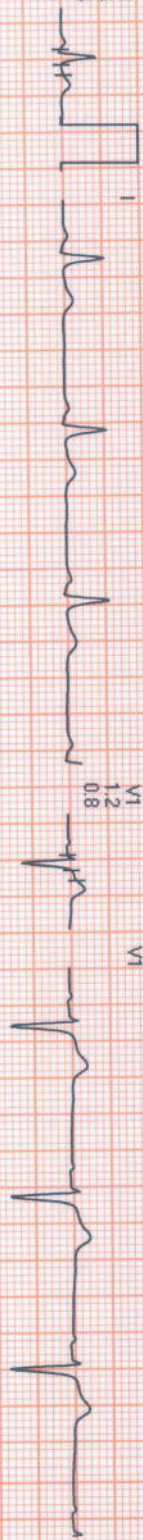
Date: 22-Oct-2022 11:31:05 AM METS: 1.0/ 67 bpm 35% of THR BP: 110/70 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 20 Hz

4X 80 ms Post J

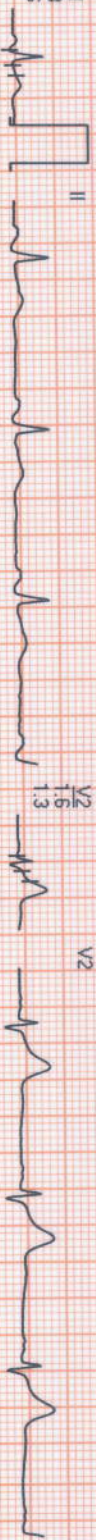
EXTime: 00:00 0.0 mph, 0.0%  
25 mm/Sec. 1.0 Cm/mV



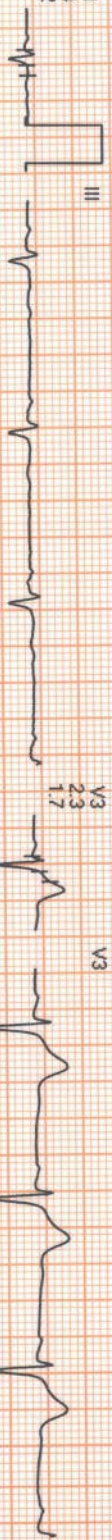
I  
STL 0.4  
STS 0.4



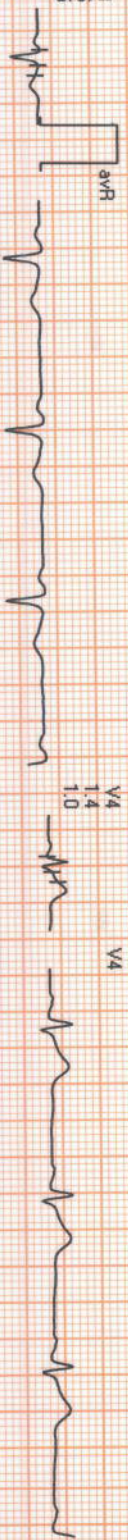
II  
0.8  
0.6



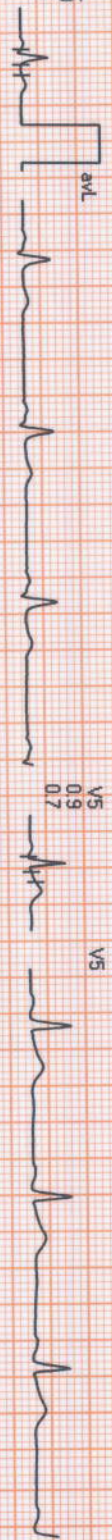
III  
0.4  
0.2



avR  
-0.6  
-0.5



avL  
0.0  
0.1



avF  
0.6  
0.4



REMARKS:



1083 (2229520225) / PRASHIK BHUTANGE / 28 Yrs / M / 59 Cms / 171 Kg / HR : 69

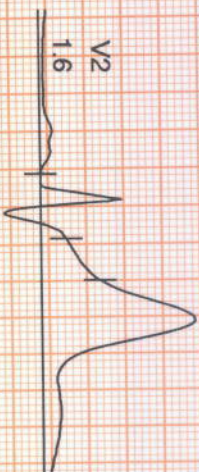
Date: 22-Oct-2022 11:31:05 AM

METS: 1.0/ 69 bpm 36% of THR BP: 110/70 mmHg Rew ECG/ BLC On/ Natch On/ HF 0.05 Hz/LF 20 Hz

EXTime: 00:00 0.0 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



I  
STL 0.5  
STS 0.4



II  
0.8  
0.5



III  
0.4  
0.1



aVR  
-0.7  
-0.5

IV  
0.4  
0.1



V1  
1.1  
0.7



V2  
1.6  
1.2



V3  
2.2  
1.6

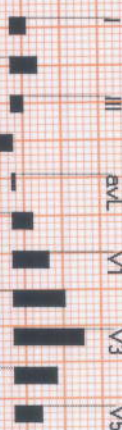
V4  
1.4  
0.9



V5  
0.9  
0.6



V6  
0.6  
0.5



aVR  
0.8  
0.4



V1  
1.1  
0.7



V2  
1.6  
1.2



V3  
2.2  
1.6

REMARKS:

(ADX\_GEM216201125)(A)Allengers

# SUBURBAN DIAGNOSTICS THANE GB

THANE GB  
1083 / PRASHIK BHUTANGE / 28 Yrs / Male / 59 Cm / 171 Kg

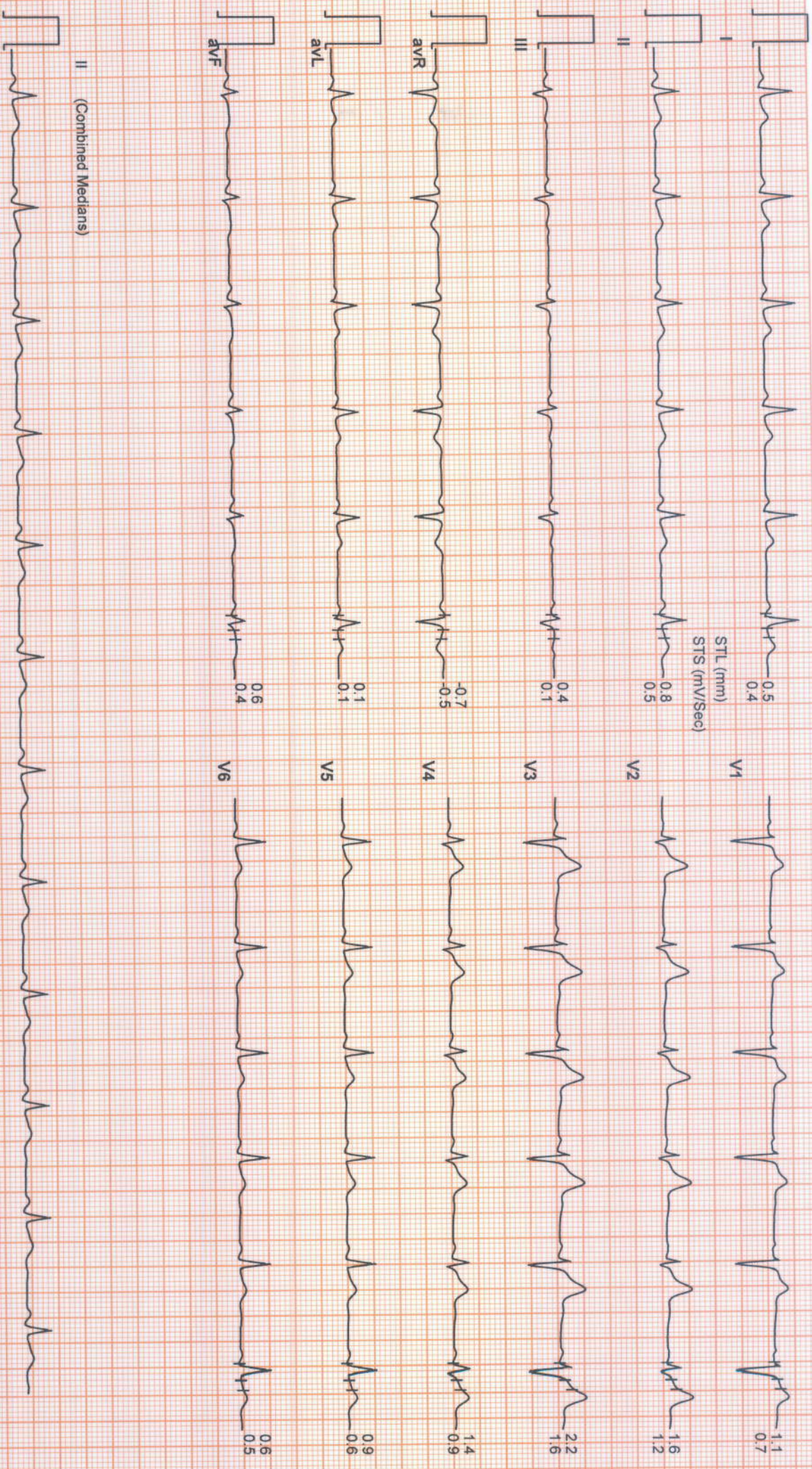
# 6X2 Combine Medians + 1 Rhythm

HV ( 00:00 )



Date: 22 / 10 / 2022 11:31:05 AM METs : 1.0 HR : 69 Target HR : 36% of 192 BP : 110/70 Post J @80mSec

ExTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)

# SUBURBAN DIAGNOSTICS THANE GB

THANE GB  
1083 / PRASHIK BHUTANGE / 28 Yrs / Male / 59 Cm / 171 Kg

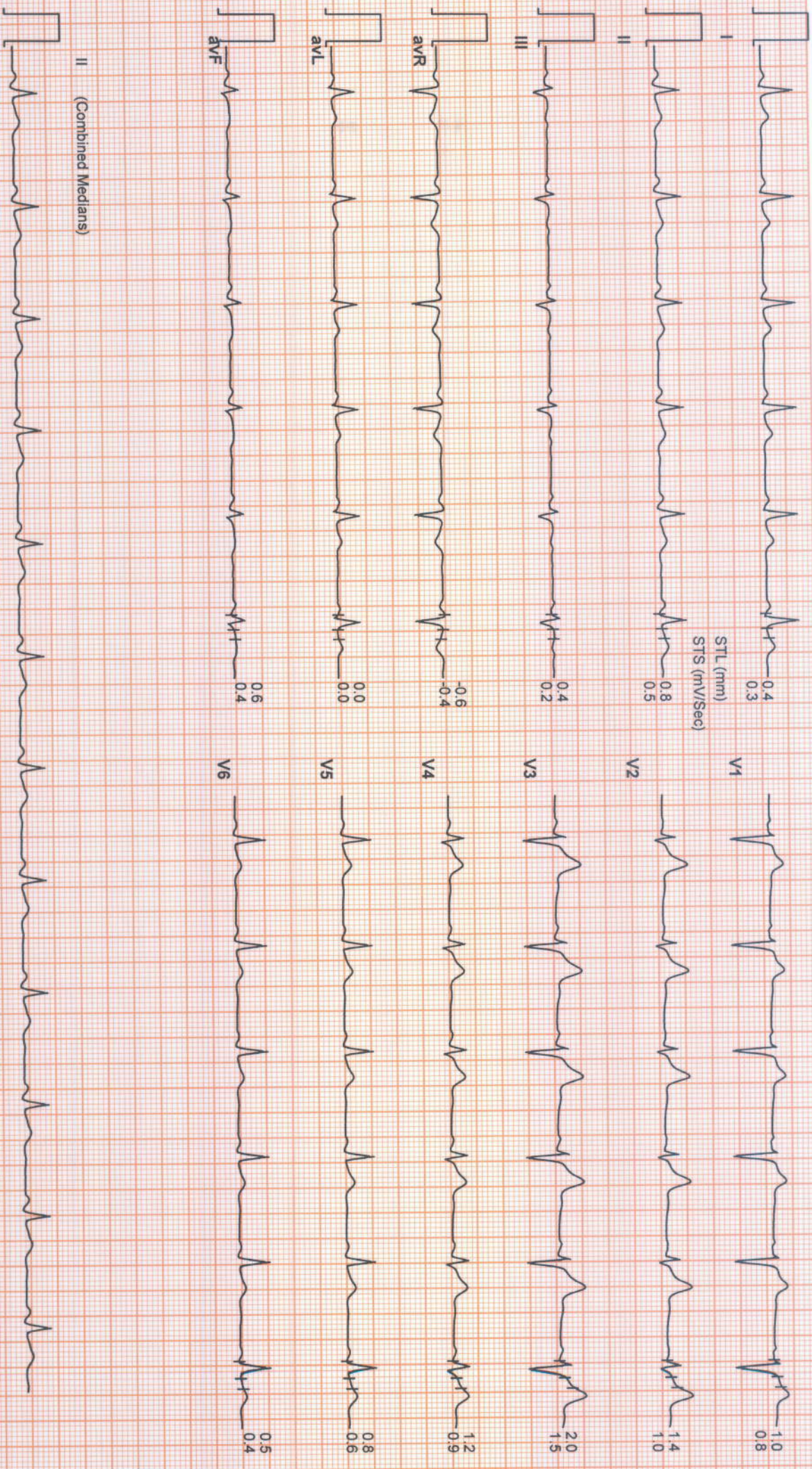
# 6X2 Combine Medians + 1 Rhythm

ExStt



Date: 22 / 10 / 2022 11:31:05 AM METs : 1.0 HR : 71 Target HR : 37% of 192 BP : 110/70 Post J @80mSec

ExTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



# SUBURBAN DIAGNOSTICS THANE GB

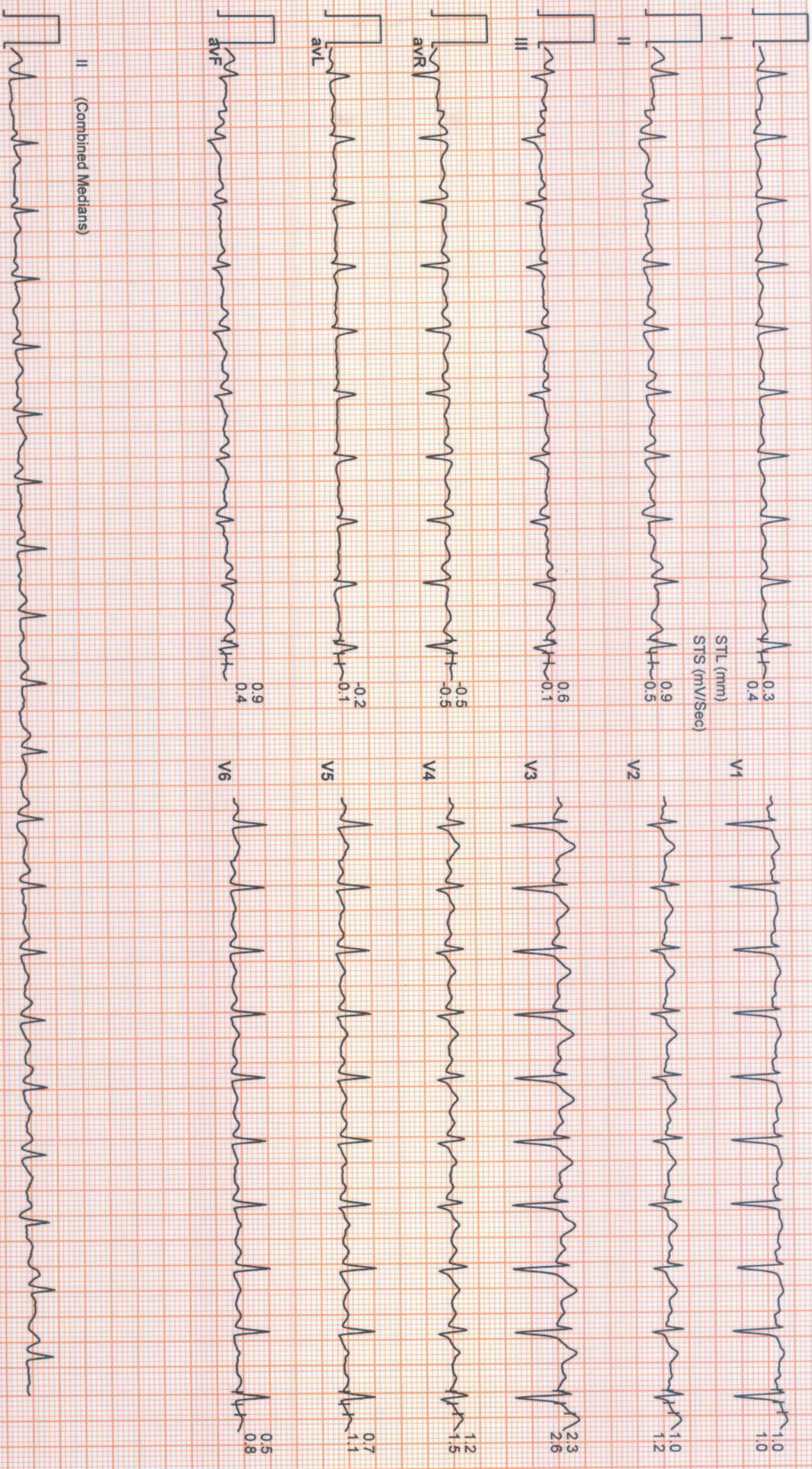
THANE GB  
1083 / PRASHIK BHUTANGE / 28 Yrs / Male / 59 Cm / 171 Kg

6X2 Combine Medians + 1 Rhythm  
BRUCE : Stage 1 ( 03:00 )



Date: 22 / 10 / 2022 11:31:05 AM METs : 4.7 HR : 120 Target HR : 62% of 192 BP : 120/70 Post J @80mSec

EXTime: 03:00 Speed: 1.7 mph Grade : 10.00 % 25 mm/Sec. 1.0 Cm/mV



# SUBURBAN DIAGNOSTICS THANE GB

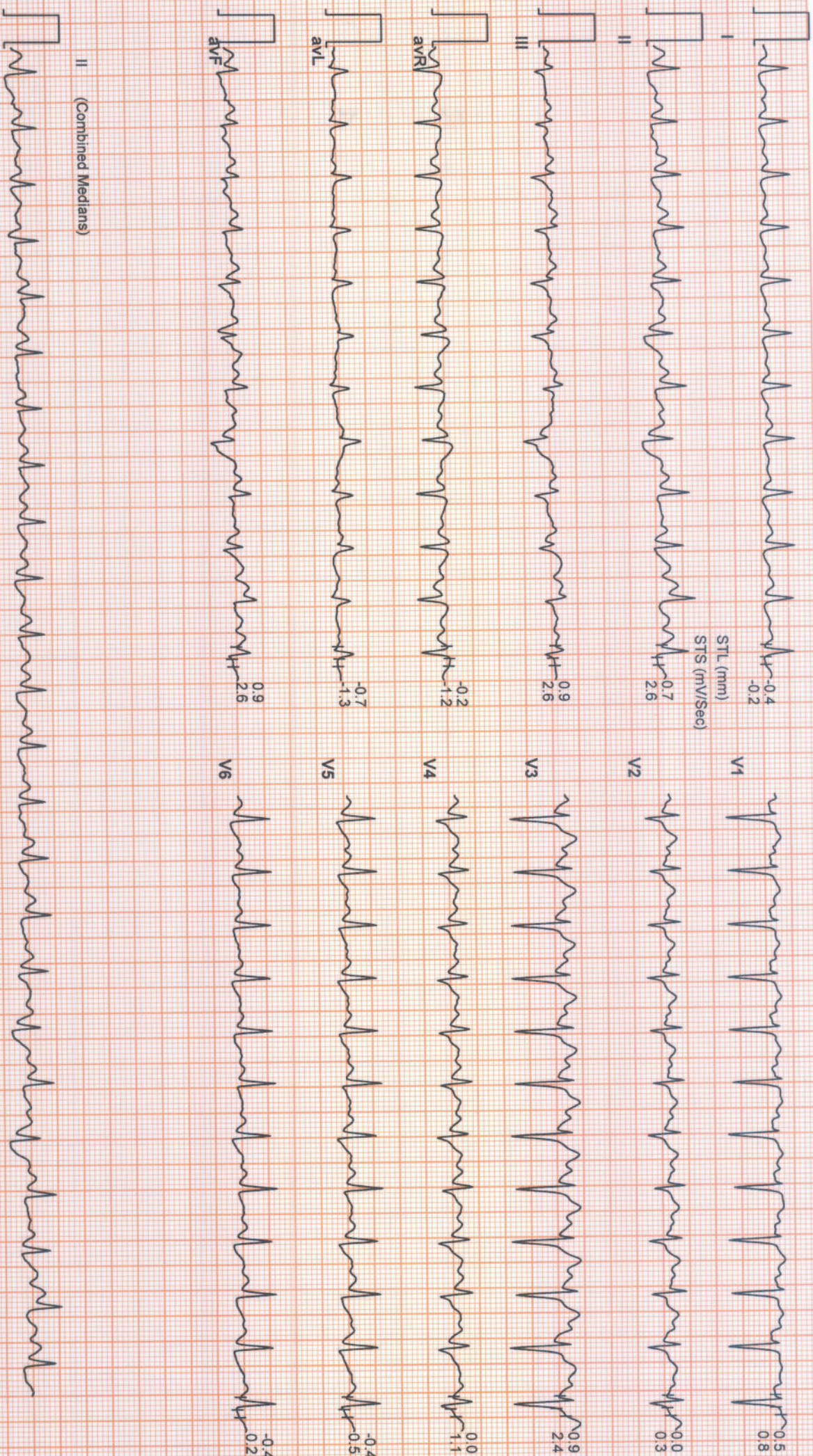
THANE GB  
1083 / PRASHIK BHUTANGE / 28 Yrs / Male / 59 Cm / 171 Kg

6X2 Combine Medians + 1 Rhythm  
BRUCE : Stage 2 ( 03:00 )



Date: 22 / 10 / 2022 11:31:05 AM METs : 7.1 HR : 144 Target HR : 75% of 192 BP : 130/80 Post J @60mSec

EXTime: 06:00 Speed: 2.5 mph Grade : 12.00 % 25 mm/Sec. 1.0 Cm/mV





# SUBURBAN DIAGNOSTICS THANE GB

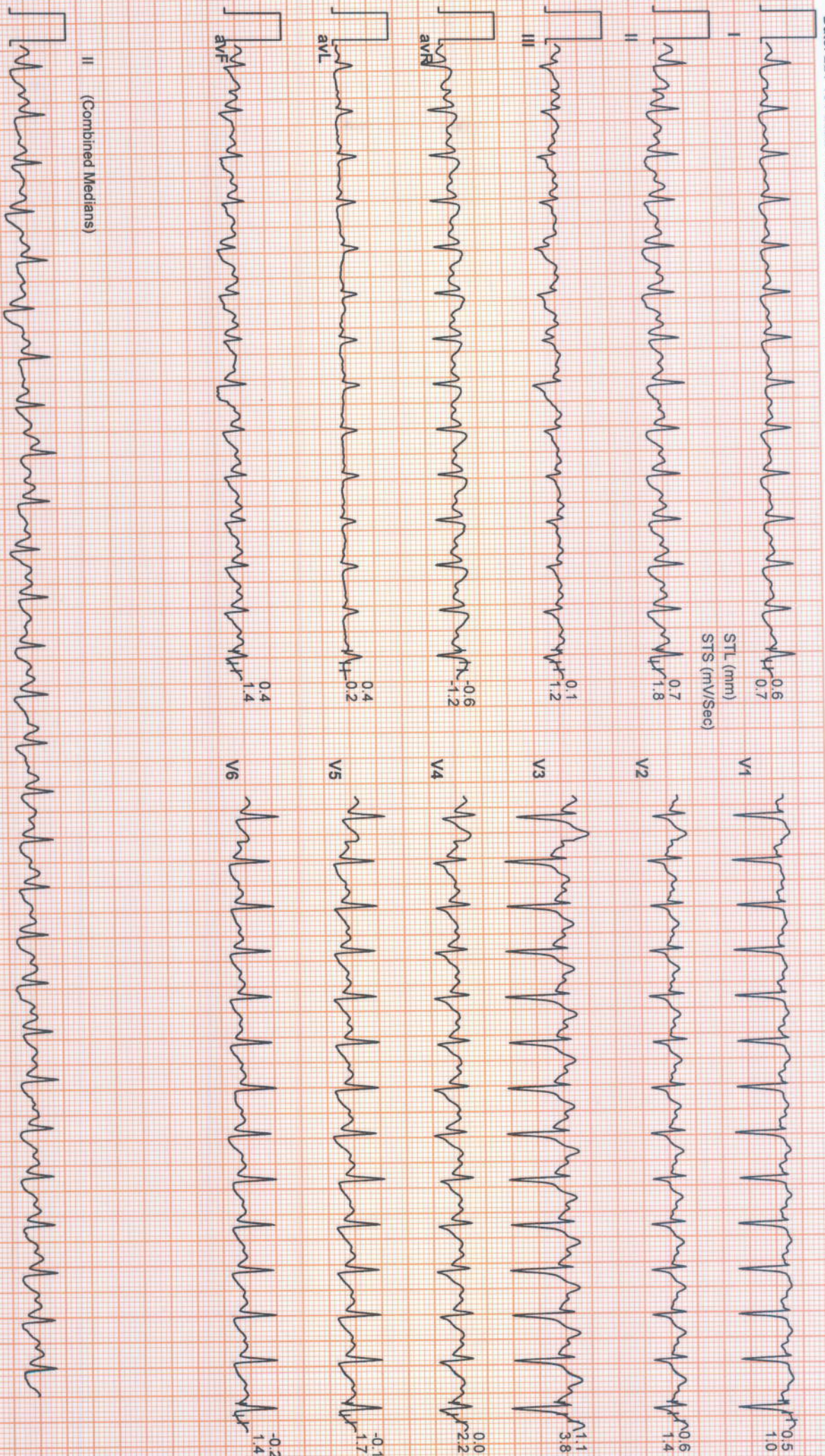
THANE GB  
1083 / PRASHIK BHUTANGE / 28 Yrs / Male / 59 Cm / 171 Kg

6X2 Combine Medians + 1 Rhythm  
BRUCE : Stage 3 ( 03:00 )



Date: 22 / 10 / 2022 11:31:05 AM METs : 10.2 HR : 166 Target HR : 86% of 192 BP : 150/80 Post J @60mSec

ExTime: 09:00 Speed: 3.4 mph Grade : 14.00 % 25 mm/Sec. 1.0 Cm/mV



# SUBURBAN DIAGNOSTICS THANE GB

THANE GB  
1083 / PRASHIK BHUTANGE / 28 Yrs / Male / 59 Cm / 171 Kg

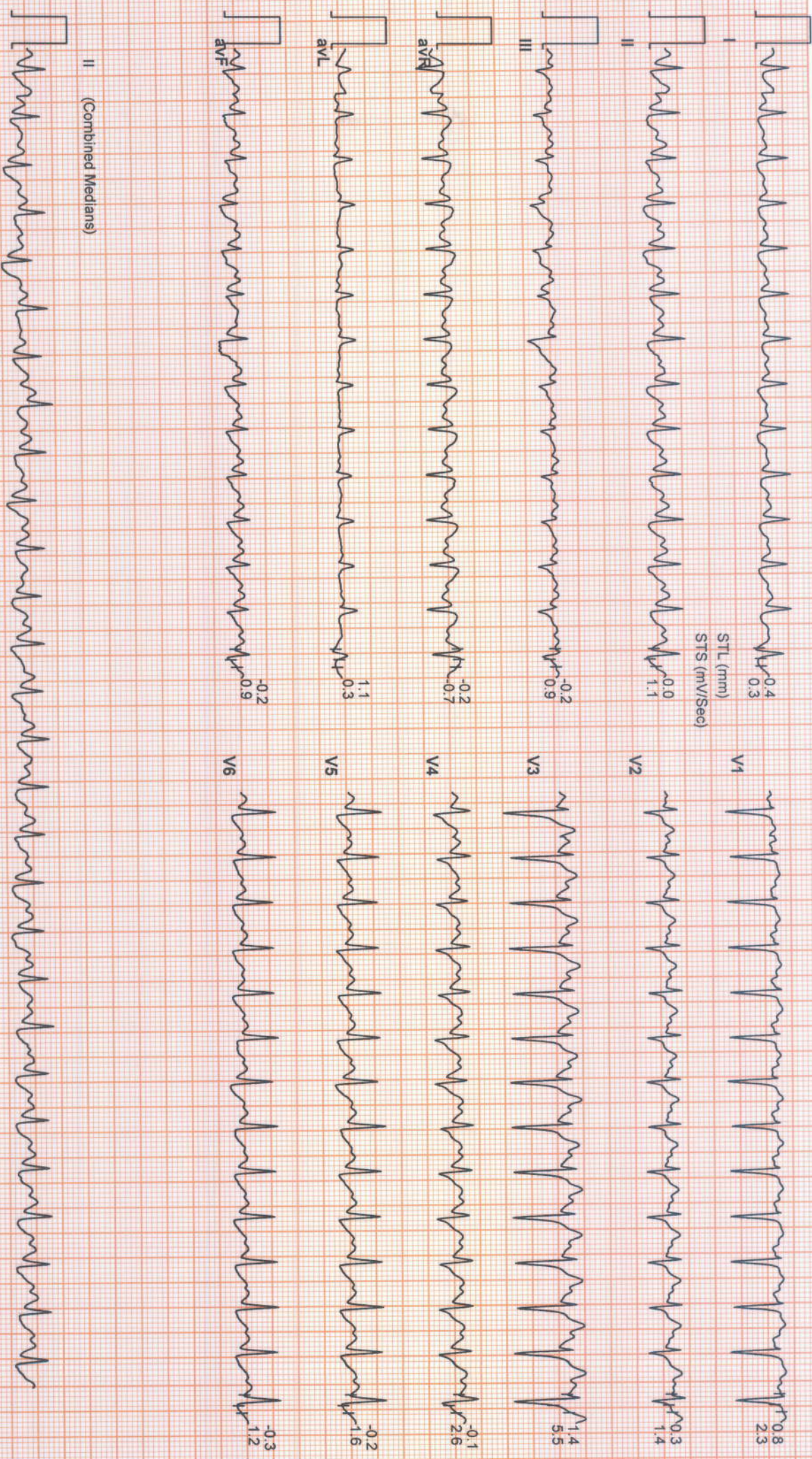
## 6X2 Combine Medians + 1 Rhythm

PeakEx



Date: 22 / 10 / 2022 11:31:05 AM METs : 10.4 HR : 165 Target HR : 86% of 192 BP : 150/80 Post J @60mSec

EXTime: 09:08 Speed: 4.2 mph Grade : 16.00 % 25 mm/Sec. 1.0 Cm/mV



# SUBURBAN DIAGNOSTICS THANE GB

THANE GB  
1083 / PRASHIK BHUTANGE / 28 Yrs / Male / 59 Cm / 171 Kg

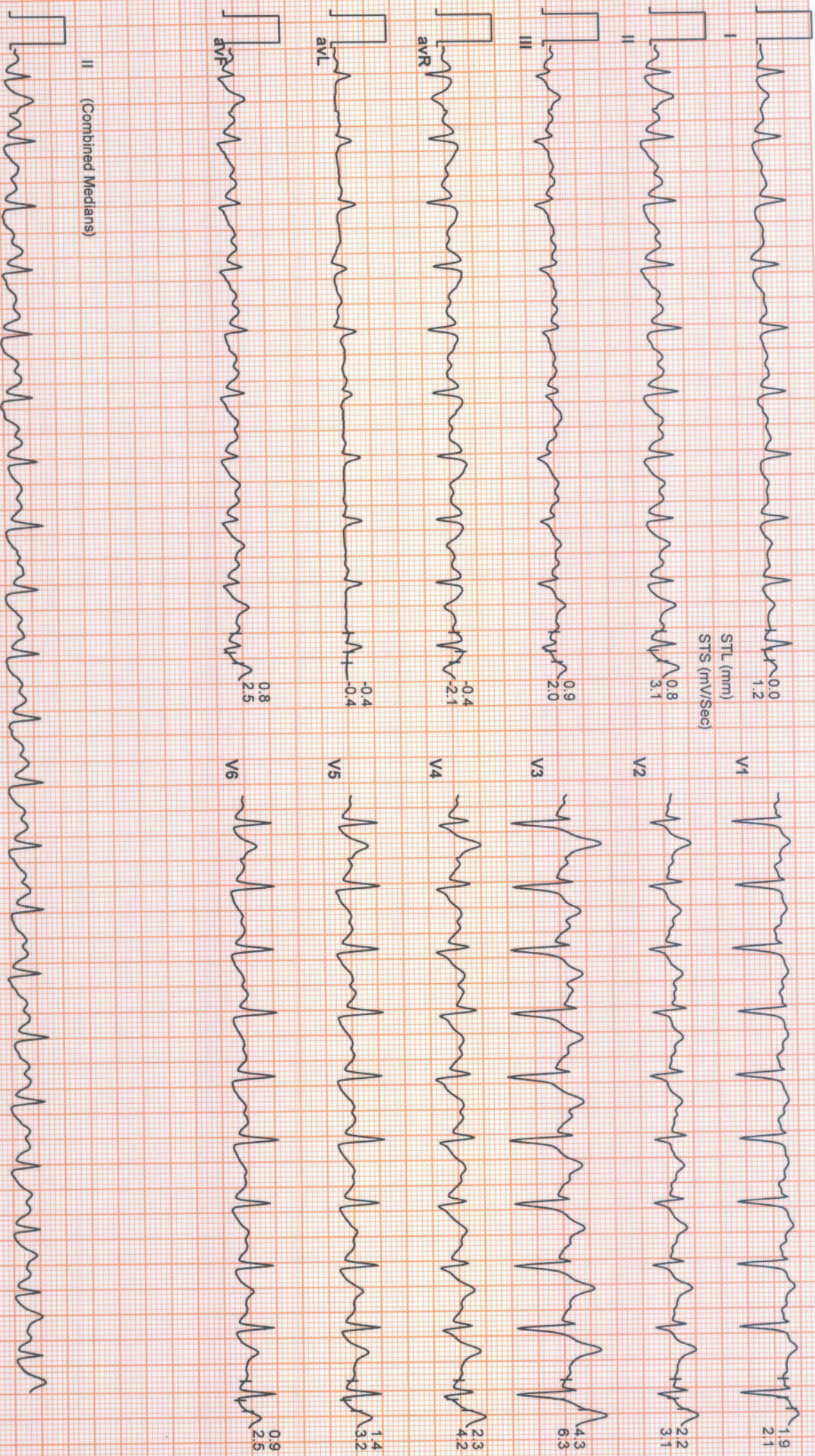
# 6X2 Combine Medians + 1 Rhythm

Recovery : ( 01:00 )



Date: 22 / 10 / 2022 11:31:05 AM METs : 4.2 HR : 126 Target HR : 66% of 192 BP : 150/80 Post J @80mSec

EXTime: 09:08 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



(ADX\_GEM216201125)A/Jallengers



# SUBURBAN DIAGNOSTICS THANE GB

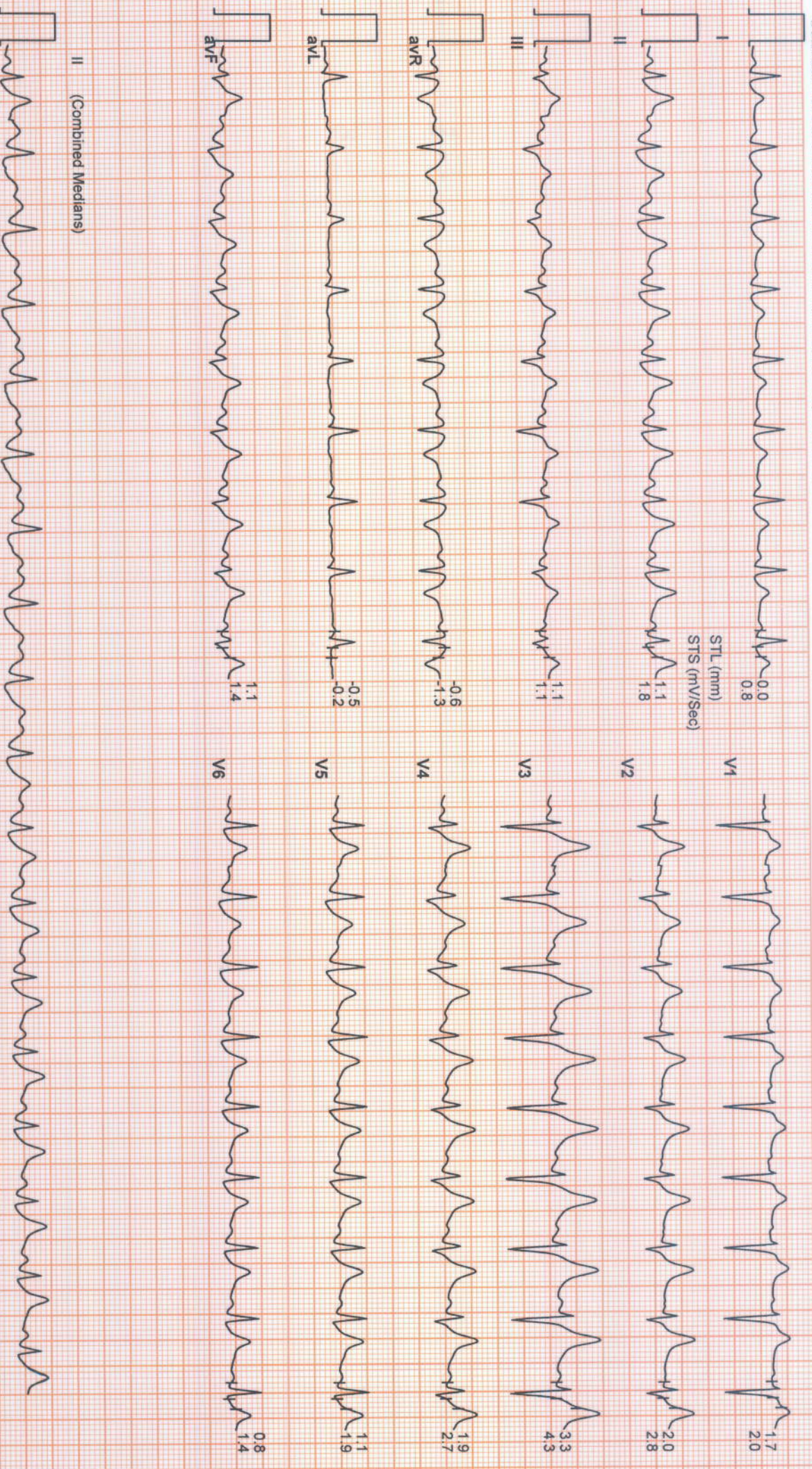
THANE GB  
1083 / PRASHIK BHUTANGE / 28 Yrs / Male / 59 Cm / 171 Kg

6X2 Combine Medians + 1 Rhythm  
Recovery : ( 02:00 )



Date: 22 / 10 / 2022 11:31:05 AM METs : 1.0 HR : 108 Target HR : 56% of 192 BP : 150/80 Post J @80mSec

EXTime: 09:08 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



# SUBURBAN DIAGNOSTICS THANE GB

THANE GB  
1083 / PRASHIK BHUTANGE / 28 Yrs / Male / 59 Cm / 171 Kg

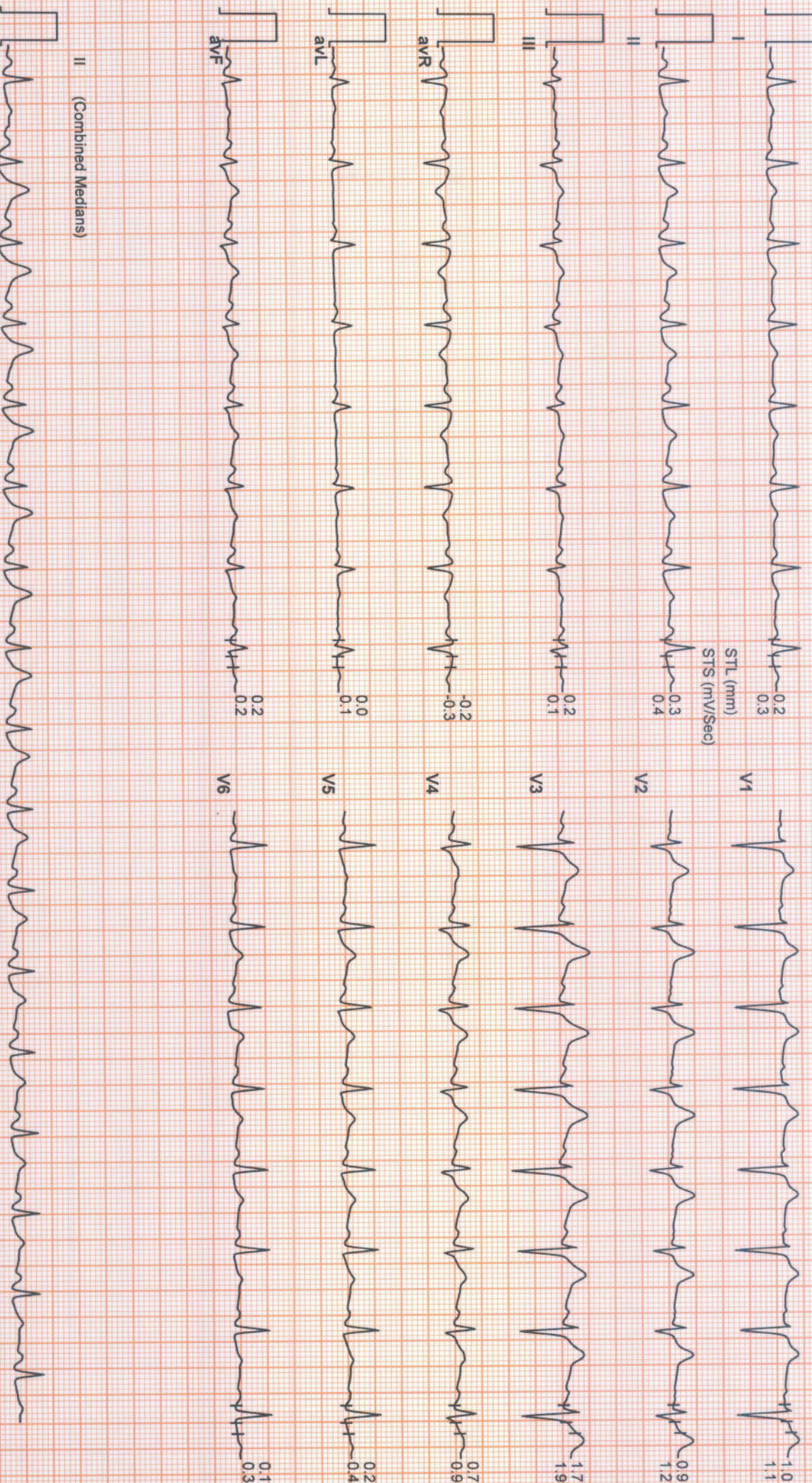
## 6X2 Combine Medians + 1 Rhythm

Recovery : ( 04:00 )



Date: 22 / 10 / 2022 11:31:05 AM METs : 1.0 HR : 101 Target HR : 53% of 192 BP : 120/70 Post J @80mSec

EXTime: 09:08 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



# SUBURBAN DIAGNOSTICS THANE GB

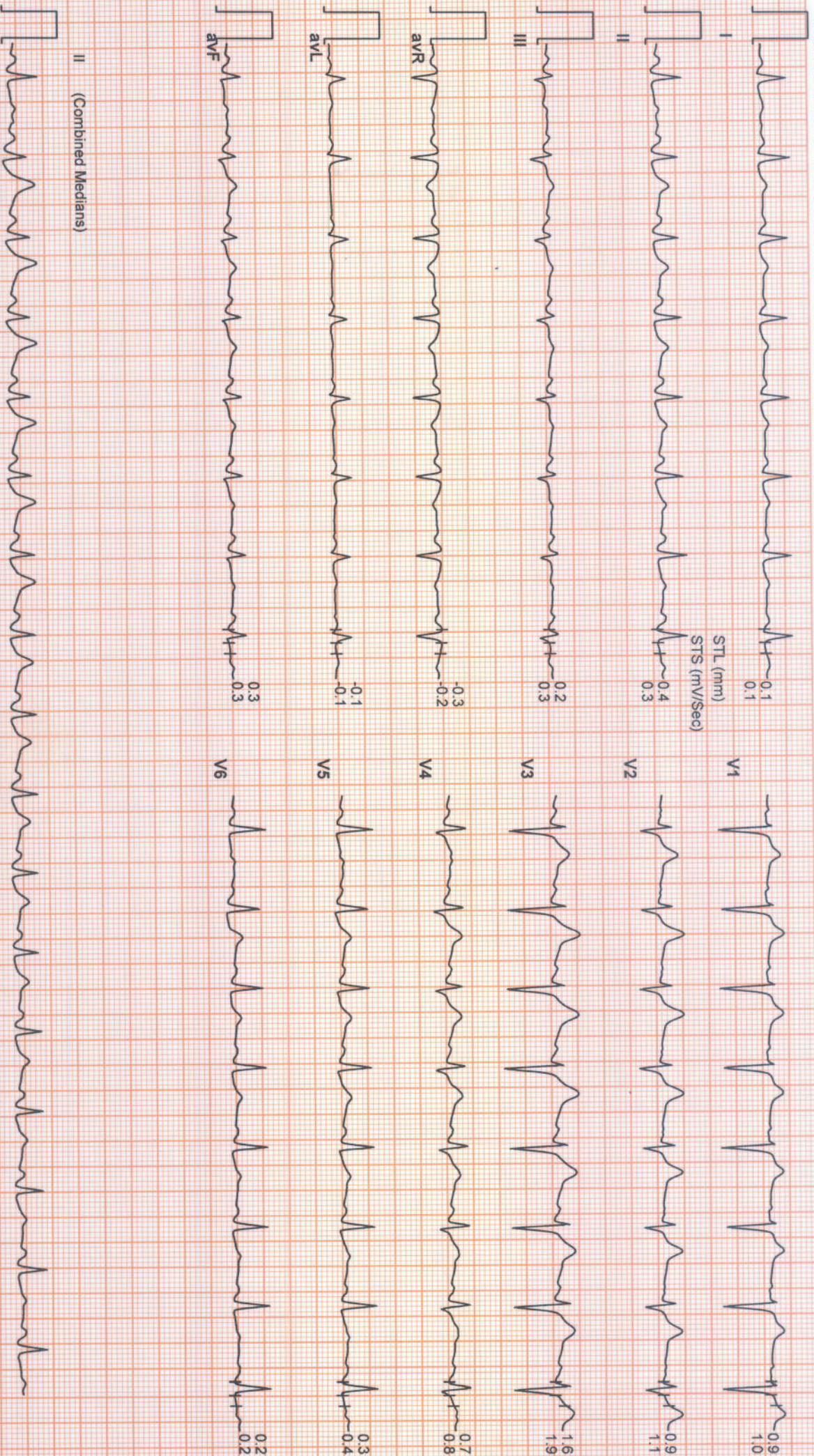
THANE GB  
1083 / PRASHIK BHUTANGE / 28 Yrs / Male / 59 Cm / 171 Kg

## 6X2 Combine Medians + 1 Rhythm



Date: 22 / 10 / 2022 11:31:05 AM METs : 1.0 HR : 100 Target HR : 52% of 192 BP : 120/70 Post J @80mSec

EXTime: 09:08 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV





Use a QR Code Scanner  
Application To Scan the Code

CID : 2229520225  
Name : Mr PRASHIK ASHOK BHUTANGE  
Age / Sex : 28 Years/Male  
Ref. Dr :  
Reg. Location : G B Road, Thane West Main Centre  
Reg. Date : 22-Oct-2022  
Reported : 22-Oct-2022 / 14:33

**X-RAY CHEST PA VIEW**

Both lung fields are clear.  
Both costo-phrenic angles are clear.  
The cardiac size and shape are within normal limits.  
The domes of diaphragm are normal in position and outlines.  
The skeleton under review appears normal.

**IMPRESSION:**

**NO SIGNIFICANT ABNORMALITY IS DETECTED.**

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

This report is prepared and physically checked by DR GAURAV FARTADE before dispatch.

*G. R. Fartade*

Dr.GAURAV FARTADE  
MBBS, DMRE  
Reg No -2014/04/1786  
Consultant Radiologist

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2022102208311029>

Page no 1 of 1

ADDRESS: 2<sup>nd</sup> 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](http://www.suburbandiagnosics.com)

Date:- 22/10/22

CID:

Name:- Prashant Bhutange Sex / Age: M. 28

**EYE CHECK UP**

Chief complaints: IR UV

Systemic Diseases: N/A

Past history: N/A

Unaided Vision: BR 6/12 NUBL N 10

Aided Vision: BR 6/6 NUB2 N 16.

Refraction:

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / Abnormal

Remark: USC over Spectacles

MR. PRAKASH KUDVA  
*Prakash Kudva*  
SR. OPTOMETRIST

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

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

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