



CID : 2406922373
Name : MR.AMIT KAMBLE
Age / Gender : 38 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 09-Mar-2024 / 09:39
Reported : 09-Mar-2024 / 13:40

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

CBC (Complete Blood Count), Blood

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>RBC PARAMETERS</u>			
Haemoglobin	13.8	13.0-17.0 g/dL	Spectrophotometric
RBC	4.50	4.5-5.5 mil/cmm	Elect. Impedance
PCV	40.8	40-50 %	Measured
MCV	91	80-100 fl	Calculated
MCH	30.7	27-32 pg	Calculated
MCHC	33.8	31.5-34.5 g/dL	Calculated
RDW	14.0	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	6570	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	32.8	20-40 %	
Absolute Lymphocytes	2155.0	1000-3000 /cmm	Calculated
Monocytes	8.9	2-10 %	
Absolute Monocytes	584.7	200-1000 /cmm	Calculated
Neutrophils	55.7	40-80 %	
Absolute Neutrophils	3659.5	2000-7000 /cmm	Calculated
Eosinophils	2.3	1-6 %	
Absolute Eosinophils	151.1	20-500 /cmm	Calculated
Basophils	0.3	0.1-2 %	
Absolute Basophils	19.7	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	256000	150000-400000 /cmm	Elect. Impedance
MPV	8.3	6-11 fl	Calculated
PDW	13.0	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			
Hypochromia	-		
Microcytosis	-		



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Collected : 09-Mar-2024 / 09:39
Reported : 09-Mar-2024 / 18:44

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	96.7	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	101.8	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.65	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.31	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.34	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.3	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.1	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	3.2	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.3	1 - 2	Calculated
SGOT (AST), Serum	24.3	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	34.9	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	15.2	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	79.8	40-130 U/L	Colorimetric
BLOOD UREA, Serum	20.2	12.8-42.8 mg/dl	Kinetic
BUN, Serum	9.4	6-20 mg/dl	Calculated
CREATININE, Serum	0.96	0.67-1.17 mg/dl	Enzymatic



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Reported : 09-Mar-2024 / 19:21

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eGFR, Serum	104	(ml/min/1.73sqm)	Calculated
		Normal or High: Above 90	
		Mild decrease: 60-89	
		Mild to moderate decrease: 45-59	
		Moderate to severe decrease: 30-44	
		Severe decrease: 15-29	
		Kidney failure: <15	

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

URIC ACID, Serum	5.6	3.5-7.2 mg/dl	Enzymatic
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	
Urine Sugar (PP)	Absent	Absent	
Urine Ketones (PP)	Absent	Absent	

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



Bmhasakar

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



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Reg. Location : Borivali West (Main Centre)

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Collected : 09-Mar-2024 / 09:39
Reported : 09-Mar-2024 / 14:03

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	5.7	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	116.9	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.

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

*** End Of Report ***



J Thakker

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



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
URINE EXAMINATION REPORT

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>PHYSICAL EXAMINATION</u>			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.010	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	30	-	-
<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	2-3	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	
Others	-		

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 inert

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



Dr.JAGESHWAR MANDAL
CHOUPAL
MBBS, DNB PATH
Pathologist



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Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 09-Mar-2024 / 09:39
Reported : 09-Mar-2024 / 17:02

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

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

NOTE: Test performed by automated Erythrocytes magnetized technology (EMT) which is more sensitive than conventional methods.

Specimen: EDTA Whole Blood and/or serum

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

Limitations:

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

References:

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

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



Dr. Vrushi Shroff

Dr.VRUSHALI SHROFF
M.D.(PATH)
Pathologist



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Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	192.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	114.0	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	38.8	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	153.2	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	130.0	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	23.2	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.9	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	3.4	0-3.5 Ratio	Calculated

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



Bmhasakar

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



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 Age / Gender : 38 Years / Male
 Consulting Dr. : -
 Reg. Location : Borivali West (Main Centre)

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 Reported : 09-Mar-2024 / 18:40

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	5.3	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	18.3	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	1.83	0.35-5.5 microIU/ml	ECLIA



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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 high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2)TSH values may be trasiently altered becuae of non thyroidal illness like severe infections,liver disease, renal and heart severe burns, trauma and surgery etc.

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

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

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

Limitations:

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

Reference:

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

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



Bmhasakar

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

SUBURBAN DIAGNOSTICS - BORIVALI WEST

Patient Name: AMIT KAMBLE

Date and Time: 9th Mar 24 10:46 AM

Patient ID: 2406922373

Age **38** **NA** **NA**
years months days

Gender **Male**

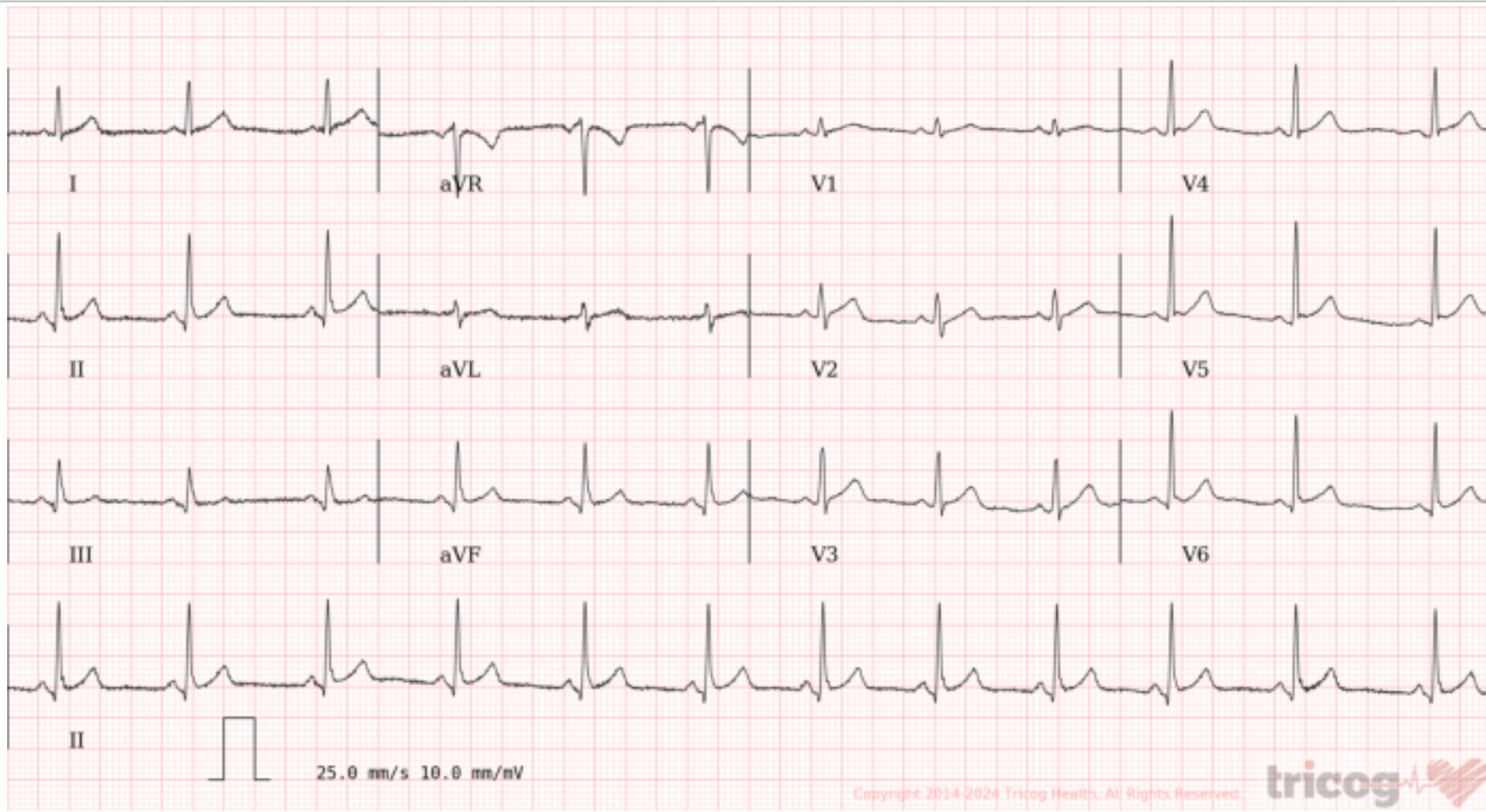
Heart Rate **74bpm**

Patient Vitals

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

Measurements

QRSD: 72ms
QT: 352ms
QTcB: 390ms
PR: 114ms
P-R-T: 80° 56° 51°



Sinus Rhythm Short PR Interval. Please correlate clinically.

REPORTED BY

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

Name : MR. AMIT KAMBLE

Age / Gender : 38 Years/Male

Consulting Dr. :

Collected : 09-Mar-2024 / 09:28

Reg. Location : Borivali West (Main Centre)

Reported : 11-Mar-2024 / 08:39

PHYSICAL EXAMINATION REPORT**History and Complaints:**

Nil

EXAMINATION FINDINGS:

Height (cms): 171

Weight (kg): 80

Temp (0c): Afebrile

Skin: Normal

Blood Pressure (mm/hg): 110/80

Nails: Normal

Pulse: 72/min

Lymph Node: Not palpable

Systems

Cardiovascular: Normal

Respiratory: Normal

Genitourinary: Normal

GI System: Normal

CNS: Normal

IMPRESSION:**ADVICE:****CHIEF COMPLAINTS:**

- | | |
|------------------|----|
| 1) Hypertension: | No |
| 2) IHD | No |
| 3) Arrhythmia | No |

Name : MR.AMIT KAMBLE

Age / Gender : 38 Years/Male

Consulting Dr. :

Reg.Location : Borivali West (Main Centre)

Collected : 09-Mar-2024 / 09:28

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- | | |
|--|----|
| 4) Diabetes Mellitus | No |
| 5) Tuberculosis | No |
| 6) Asthama | No |
| 7) Pulmonary Disease | No |
| 8) Thyroid/ Endocrine disorders | No |
| 9) Nervous disorders | No |
| 10) GI system | No |
| 11) Genital urinary disorder | No |
| 12) Rheumatic joint diseases or symptoms | No |
| 13) Blood disease or disorder | No |
| 14) Cancer/lump growth/cyst | No |
| 15) Congenital disease | No |
| 16) Surgeries | No |
| 17) Musculoskeletal System | No |

PERSONAL HISTORY:

- | | |
|---------------|-----|
| 1) Alcohol | No |
| 2) Smoking | No |
| 3) Diet | Mix |
| 4) Medication | No |

*** End Of Report ***

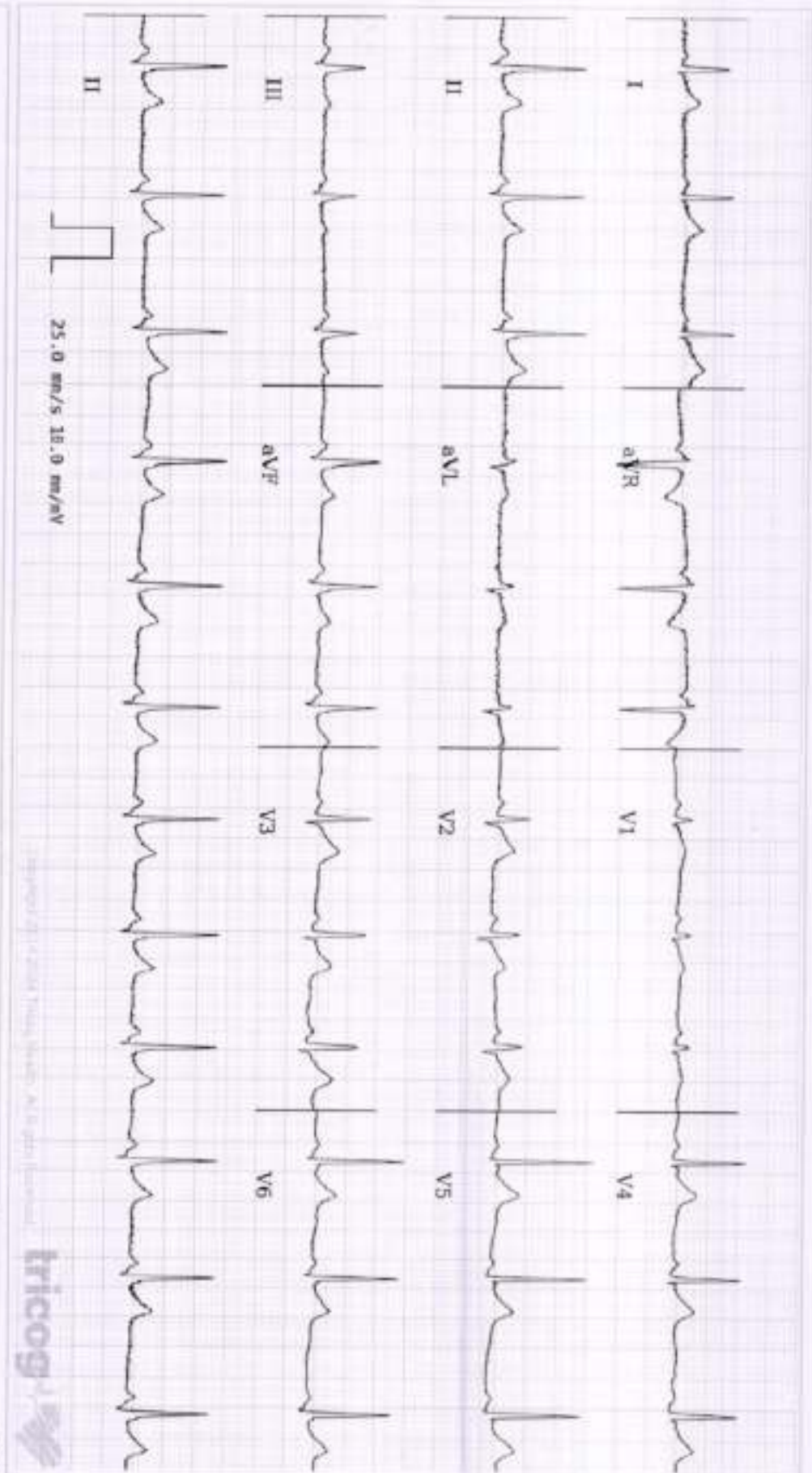
DR. NITIN SONAVANE
M.R.D. (A.P.), D.I.B.S., D.O.
CONSULTANT-CARDIOLOGIST
REGD. NO. : 87714

Suburban Diagnostics Pvt. Ltd.
301E-302, 2nd Floor, Jay Bhambhani Bldg
Above Jay Bhambhani Bldg, L.T. Road,
Borivali (West), Mumbai - 400 082.

Patient Name: AMIT KAMBLE

Patient ID: 2406922373

Date and Time: 9th Mar 24 10:46 AM



Age **38** NA NA
years months days

Gender **Male**

Heart Rate **74bpm**

Patient Vitals

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

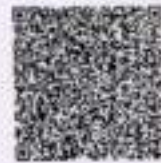
Measurements

QRSd: 72ms
QT: 352ms
QTcb: 390ms
PR: 114ms
P-R-T: 80° 56° 51°

Sinus Rhythm Short PR Interval. Please correlate clinically.

REPORTED BY

Dr Nilesh Kumar
M.B.B.S,AFILO,DDIAR,DCARD
Consultant Cardiologist
27/14



CID : 2406922785
Name : Mr AMIT KADAM
Age / Sex : 41 Years/Male
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 09-Mar-2024
Reported : 09-Mar-2024 / 12:18

USG WHOLE ABDOMEN

LIVER: Liver is normal in size 13.6 cm, with mild generalized increase in parenchymal echotexture. There is no intra-hepatic biliary radical dilatation. No evidence of any focal lesion.

GALL BLADDER: Gall bladder is distended and appears normal. No obvious wall thickening is noted. There is no evidence of any calculus.

PORTAL VEIN: Portal vein is normal. **CBD:** CBD is normal.

PANCREAS: Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification.

KIDNEYS: Right kidney measures 10.6 x 4.9 cm. Left kidney measures 10.3 x 4.8 cm. Both kidneys are normal in shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

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

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

PROSTATE: Prostate is normal in size and echotexture. Prostate measures 4.1 x 2.9 x 3.3 cm and prostatic weight is 21.5 gm. No evidence of any obvious focal lesion.

No free fluid or size significant lymphadenopathy is seen.

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Name : Mr AMIT KADAM
Age / Sex : 41 Years/Male
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 09-Mar-2024
Reported : 09-Mar-2024 / 12:18

Opinion:

Grade I fatty infiltration of liver.

For clinical correlation and follow up.

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

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

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

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Name : Mr AMIT kamble
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Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 09-Mar-2024
Reported : 11-Mar-2024 / 11:11

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-----

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

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024030909292552>

Date:-

CID: 2406922373

Name:-

Amit Kamble

Sex / Age: 38 / M

EYE CHECK UP

Chief complaints:

Systemic Diseases:

Past history:

Unaided Vision:

Aided Vision:

Refraction:

} No

RE LE

6/6 6/6

N/G N/G

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / Abnormal

Remark:

Suburban Diagnostics (I) Pvt. Ltd.
2013, 2nd Floor, Vn. Showroom
Above Mercedes Showroom, Andheri West, Mumbai - 400053
Borivali Road, Mumbai - 400082

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

Date: 09-03-2024 Time: 13:26

Name: AMIT KAMBLE

Age: 38

Gender: M

Height: 171 cms

Weight: 80 Kg

ID: 2406922373

Clinical History:

Medications:

Test Details:

Protocol: Bruce

Predicted Max HR: 182

Target HR: 154 (85% of Pr. MHR)

Exercise Time: 0:04:18

Achieved Max HR: 170 (93% of Pr. MHR)

Max BP: 150/80

Max BP x HR: 25500

Max Mets: 5

Test Termination Criteria: TEST COMPLETE

Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	Max ST Level mm	Max ST Slope mV/s
Supine	00:12	1	0	0	98	110/80	10780	0.9 V2	-0.4 III
Standing	00:10	1	0	0	104	120/80	11440	0.9 V2	0.5 V2
HyperVentilation	00:14	1	0	0	96	110/80	10560	1 V2	0.4 V2
Pre Test	00:15	1	1.6	0	89	110/80	9790	0.9 V2	-1.1 III
Stage 1	00:10	0.3	2.7	10	103	110/80	11330	0.6 V2	0.9 V2
Stage 2	03:00	3.7	4	12	145	130/80	20150	-0.9 V6	1.1 V2
Peak Exercise	01:08	5	5.5	14	170	150/80	25500	-1.1 V6	1.1 V2
Recovery1	01:00	1	0	0	130	140/80	18200	0.7 V2	1.3 V2
Recovery2	00:30	1	0	0	115	130/80	14950	0.8 V2	1.6 V2

Interpretation

The Patient Exercised according to Bruce Protocol for 0:04:18 achieving a work level of 5 METS.
 Resting Heart Rate: initially 98 bpm rose to a max. heart rate of 170bpm (93% of Predicted Maximum Heart Rate)
 Resting Blood Pressure of 110/80 mmHg. rose to a maximum Blood Pressure of 150/80 mmHg
 Good Effort tolerance Normal HR & BP Response No Angina or Arrhythmias
 No Significant ST-T Change Noted During Exercise Stress test Negative for Stress inducible ischaemia.

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SCHILLER

The Art of Diagnostics

(Summary Report edited by User)
 Cardiokit C5-20 Version: 3.4



SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

AMIT KAMBLE (38 M)

Bruce Protocol
ST(LeadII) ST(SlopeInV/9)

ID: 24J06922375

Stage: Supine

Date: 09-03-2024

Speed: 0 km/h

Exam Time: 09:00:00

Slope: 0%

Stage Time: 00:12

THR: 154 bpm

HR: 98 bpm

BP: 116/80 mmHg

ST(LeadII) ST(SlopeInV/9)

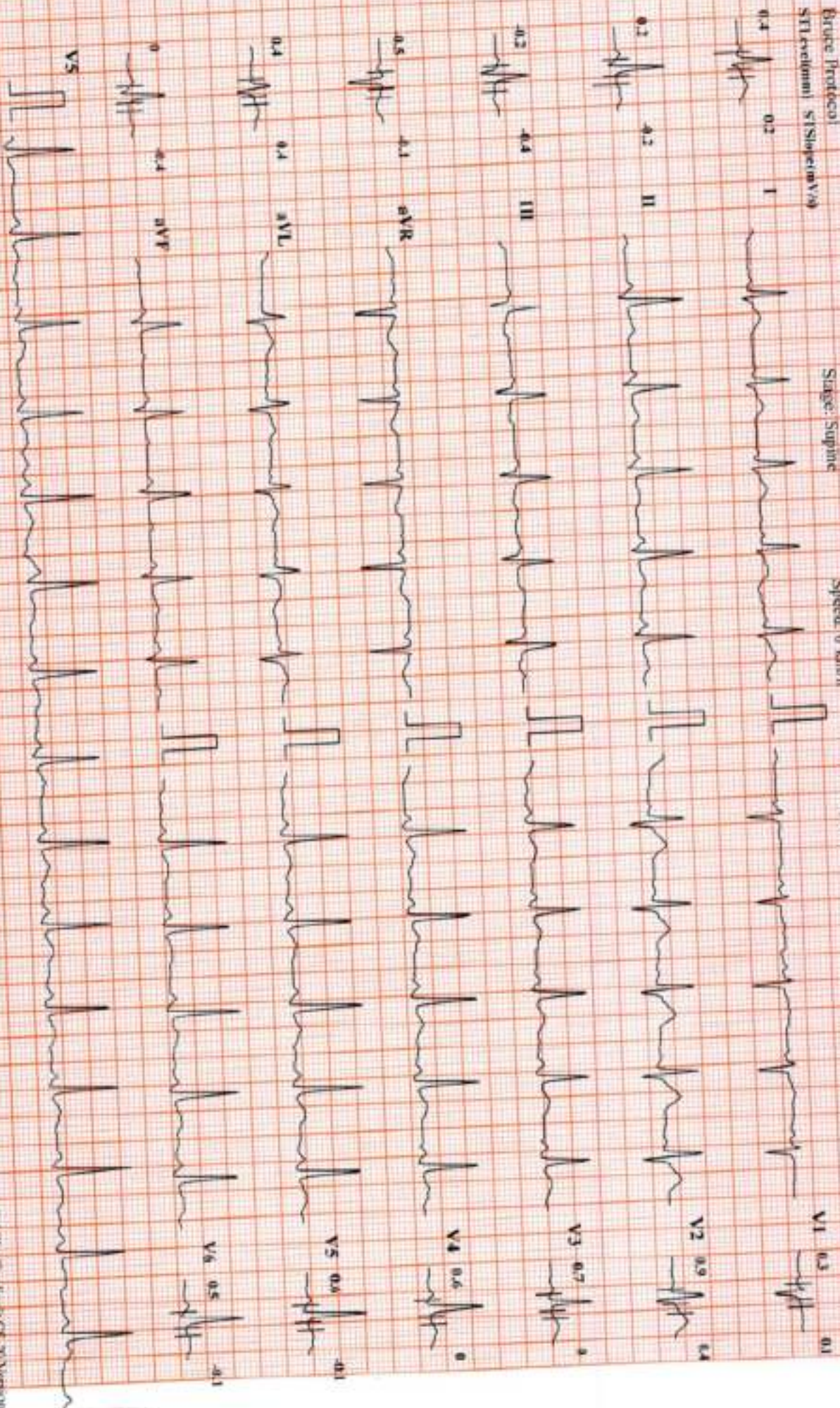


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Main Filter ON

60 - R - 02 - 03 - J - R - 60 mm Post - 1 x 60 mm

AMIT KAMBLE (38 M)

Grade Protocol
ST1 (vedhant) ST1 (SloperuV/s)

SUBURBAN DIANOSTICS PVT. LTD. BORIVALLI

ID: 2406972373

Date: 09-03-2024

Exec Time: 0:00:00

Stage Time: 00:10

HR: 104 bpm

BP: 110/80 mmHg

ST1 (vedhant) ST1 (SloperuV/s)

Stage: Standing

Speed: 0

Stage: 0%

THK: 154 bpm

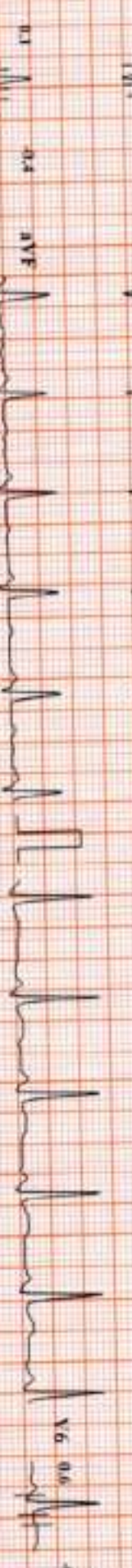
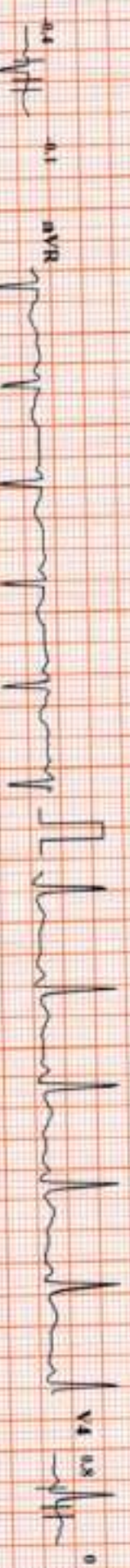
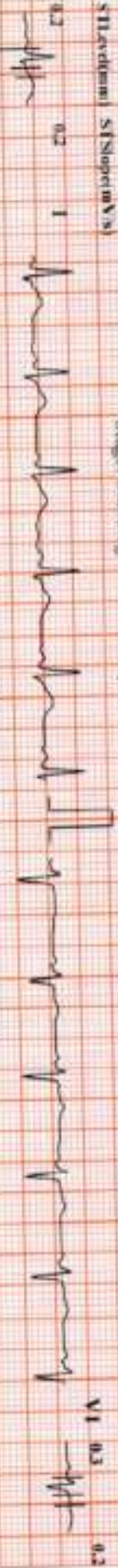


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Main Filter ON

150 - R - 60 ms, J - R - 60 ms, P - J - 1 - 60 ms

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

AMIT KAMBLE (38 M)

Bruce Protocol
STL (v/min) ST Slope(mV/s)

ID: 2406923373 Date: 09-03-2024
Stage: Hyper Ventilation Speed: 0
Exer Time: 0:00:00
Slope: 0 %

Stage Time: 00:14
THR: 154 bpm

HR: 96 bpm
BP: 110/80 mmHg
STL (v/min) ST Slope(mV/s)

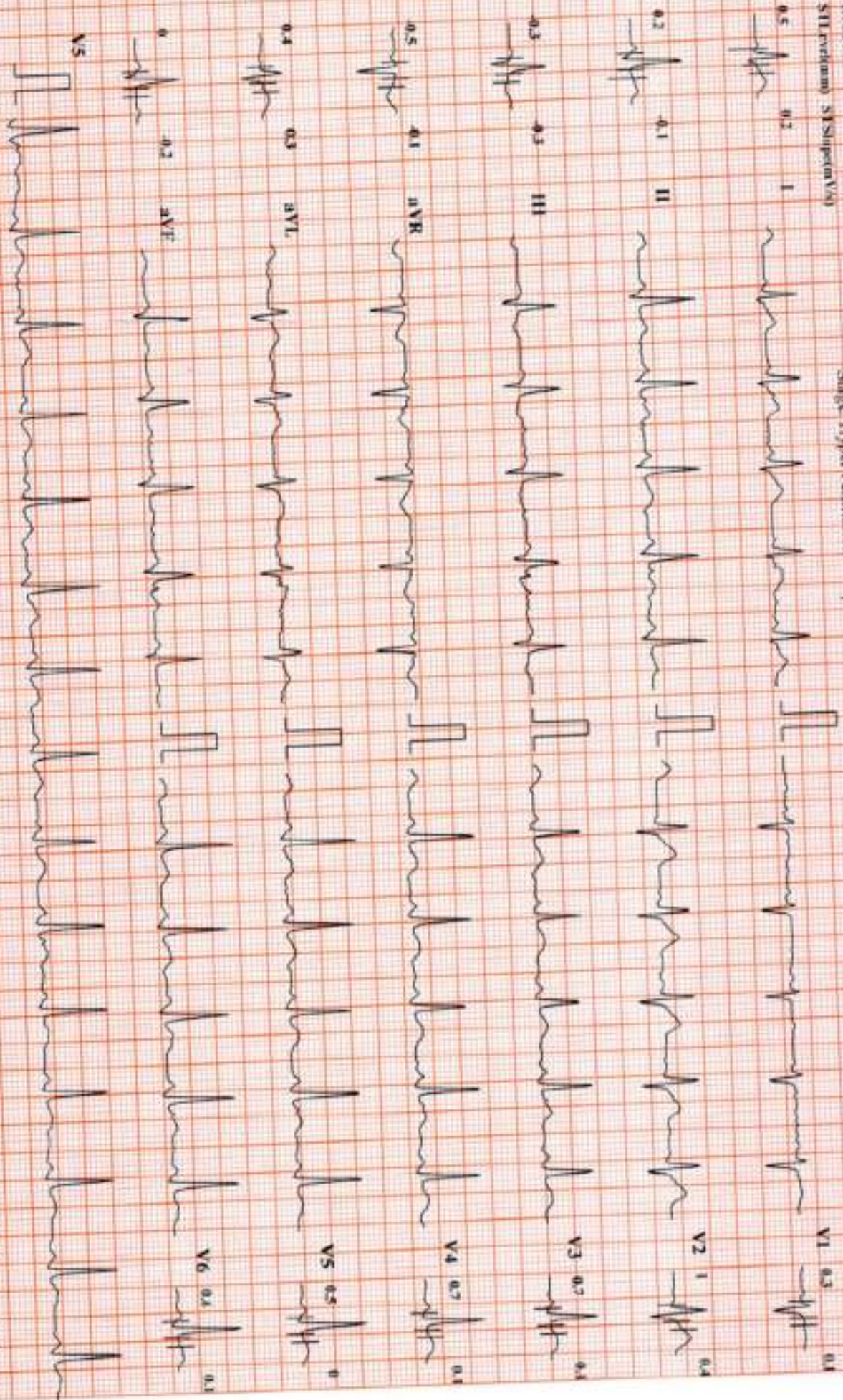


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV Filter: 25 Hz Mains Filter: ON ISO - R + 60 ms, J - R + 60 ms, Post J - J + 60 ms

AMIT KAMBLE (38 M)

Brace Protocol

ST1.ead(arm) ST3.ead(mv)9

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ID: 2406922373

Stage: 1

Date: 09-03-2024

Speed: 2.7 kmph

Exec Time: 01:00:10

Slope: 10 %

Stage Time: 00:10

THR: 154 bpm

HR: 103 bpm

BP: 110/80 mmHg

ST1.ead(arm) ST3.ead(mv)9

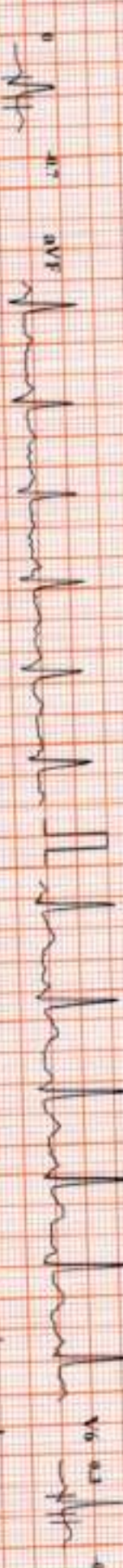
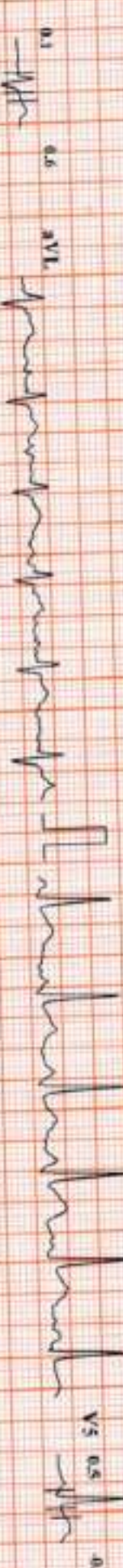
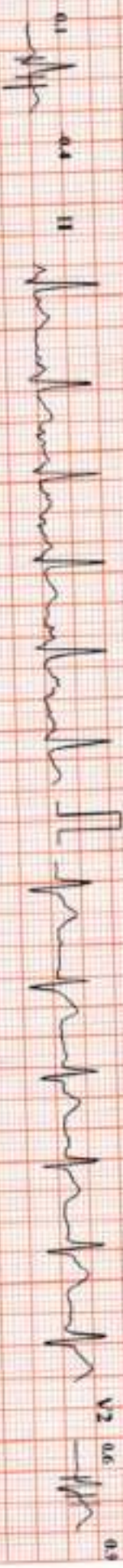


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz

Main Filter: ON

ISO - R - 40 ms, T - R x 60 ms, P - R x 60 ms

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

AMIT KAMBLE (38 M)

ID: 2406922173

Date: 19-03-2024

Speed: 4 kmph

Exec Time: 0:05:10

Stage Time: 03:00

HR: 155 bpm

Brace Protocol
ST1+red(mv) ST3+green(V6)

BP: 130/80 mmHg
ST1+red(mv) ST3+green(V6)

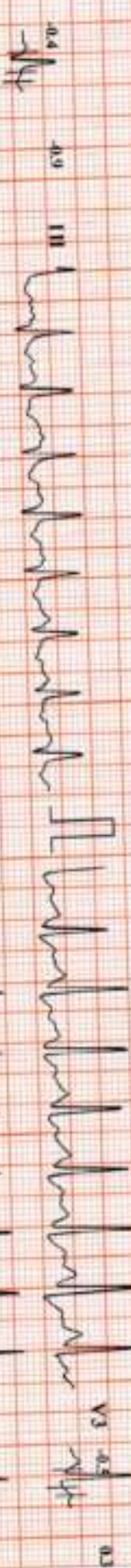


Chart Speed: 25 mm/sec

Amplitude: 1 mm/mV

Filter: 25 Hz Main Filter ON

ISO - R - 60 mm, J + R + 60 mm, Paper 1 = 1 + 60 sec

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SUBURBAN DIAGNOSTICS PVT. LTD. BORIVALI

AMIT KAMBLE (38 M)

Bruce Protocol
ST1 (chest/limb) ST3 (limb/limb)

ID: 2406922373

Date: 09-03-2024

Exct Time: 0:04:18

Stage Time: 01:08

HR: 170 bpm

BP: 150/80 mmHg

ST1 (chest/limb) ST3 (limb/limb)

Stage: 3 Peak Exercise

Speed: 5.5 kmph

Slope: 14%

THR: 154 bpm

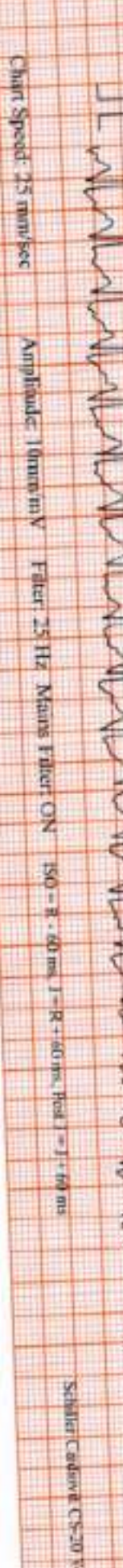
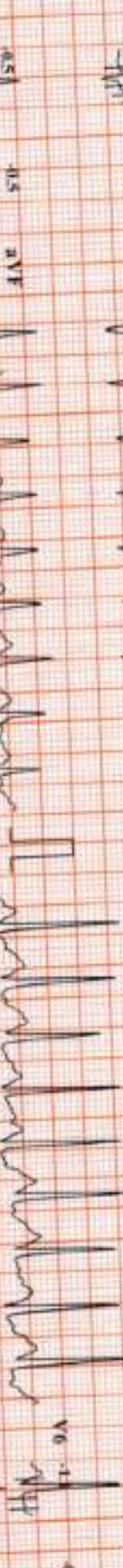
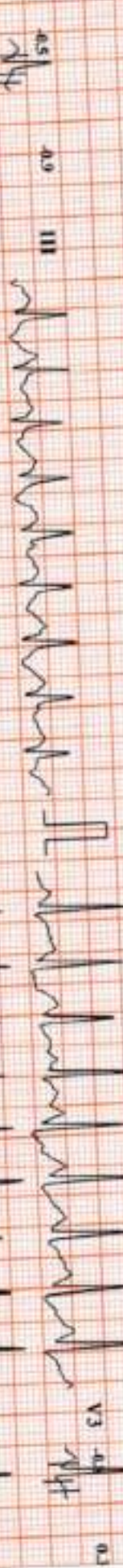
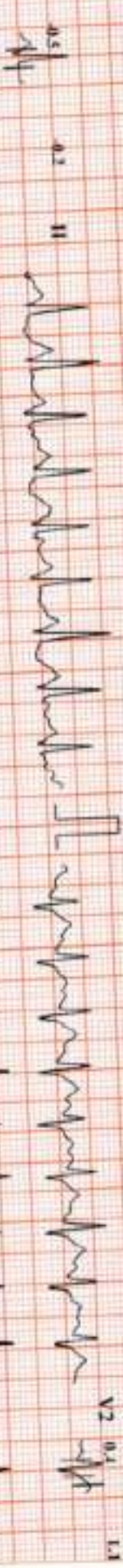


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Main Filter ON

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

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AMIT KAMBLE (38 M)

Brace Protocol

STL (column) STS (row/V%)

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ID: 2406922373

Stage: Recovery/1

Date: 09-05-2024

Speed: 0 kmph

Exec Time: 00:00

Slope: 0%

Stage Time: 00:23

THR: 154 bpm

HR: 168 bpm

BP: 161/80 mmHg

STL (column) STS (row/V%)

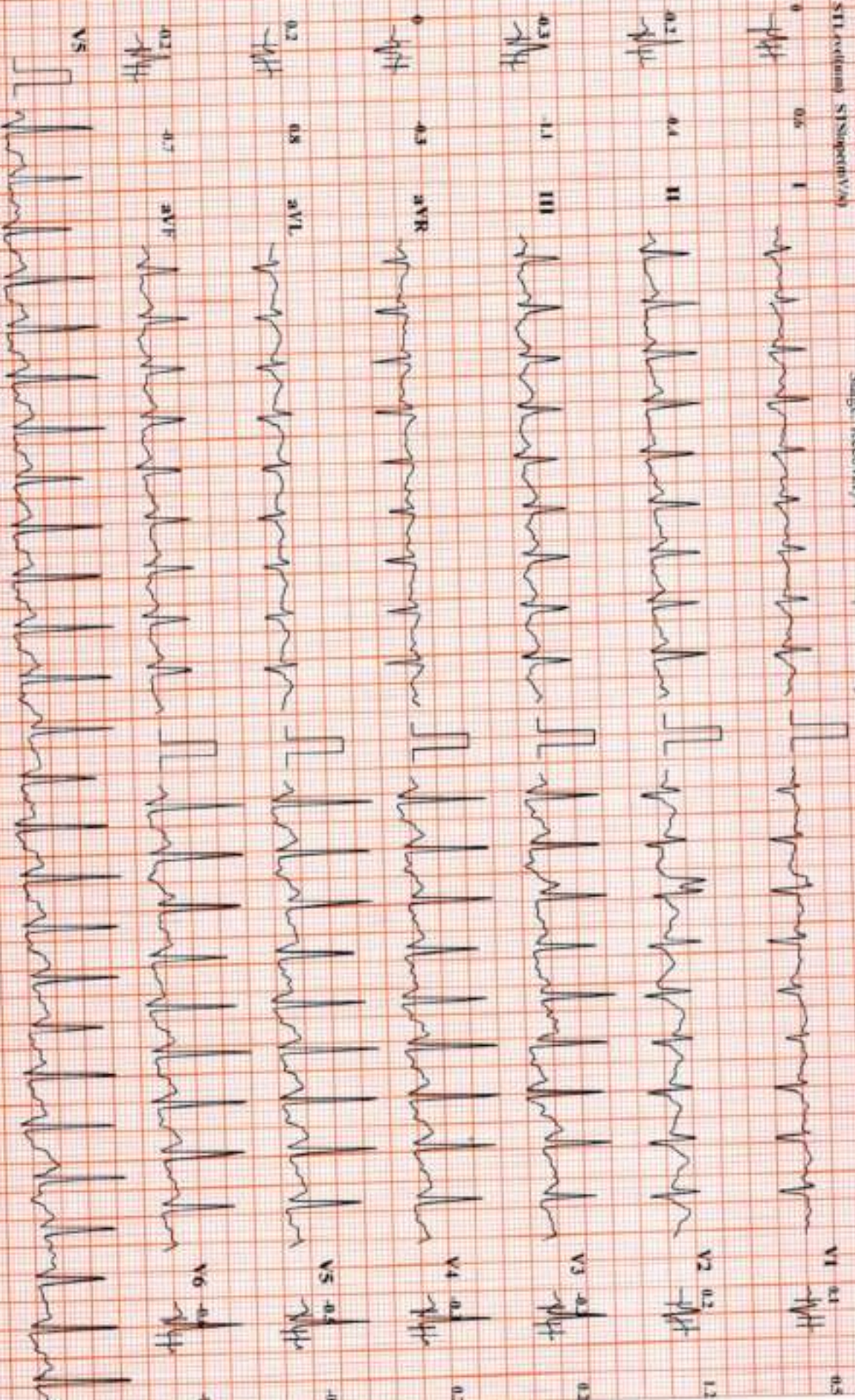


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Main Filter ON

ESQ = K - 60 ms, J - R + 60 ms, Post J - J - 60 ms

ST BURBAN DIANOSTICS PVT. LTD. BORIVALI

AMIT KAMBLE (38 M)

Brace Protocol
STLead(mml) STSlope(mV/s)

ID: 24106923173
Stage: Recovery 1

Date: 09-03-2024
Speed: 0 kmph

Exec Time: 00:00
Slope: 0 %

Stage Time: 00:38
THR: 154 bpm

HR: 157 bpm

BP: 160/80 mmHg
STLead(mml) STSlope(mV/s)

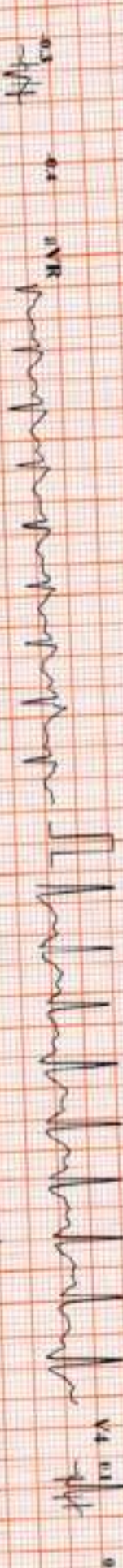
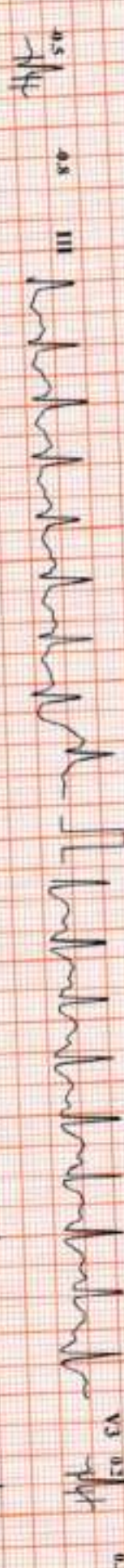


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Main Filter ON

ISD = R - 60 ms, J - R + 60 ms, Pace J = 1 - 60 ms



SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

AMIT KAMBLE (38 M)

Brace Protocol
STLead(mn) STStop(mVs)

ID: 240692373

Date: 09-03-2024

Exam Time: 00:00

Stage Time: 01:00

HR: 130 bpm

Bp: 140/80 mmHg

STLead(mn) STStop(mVs)

Stage: Recovery 1

Speed: 0 Amplitude

Slope: 0 %

THR: 154 bpm

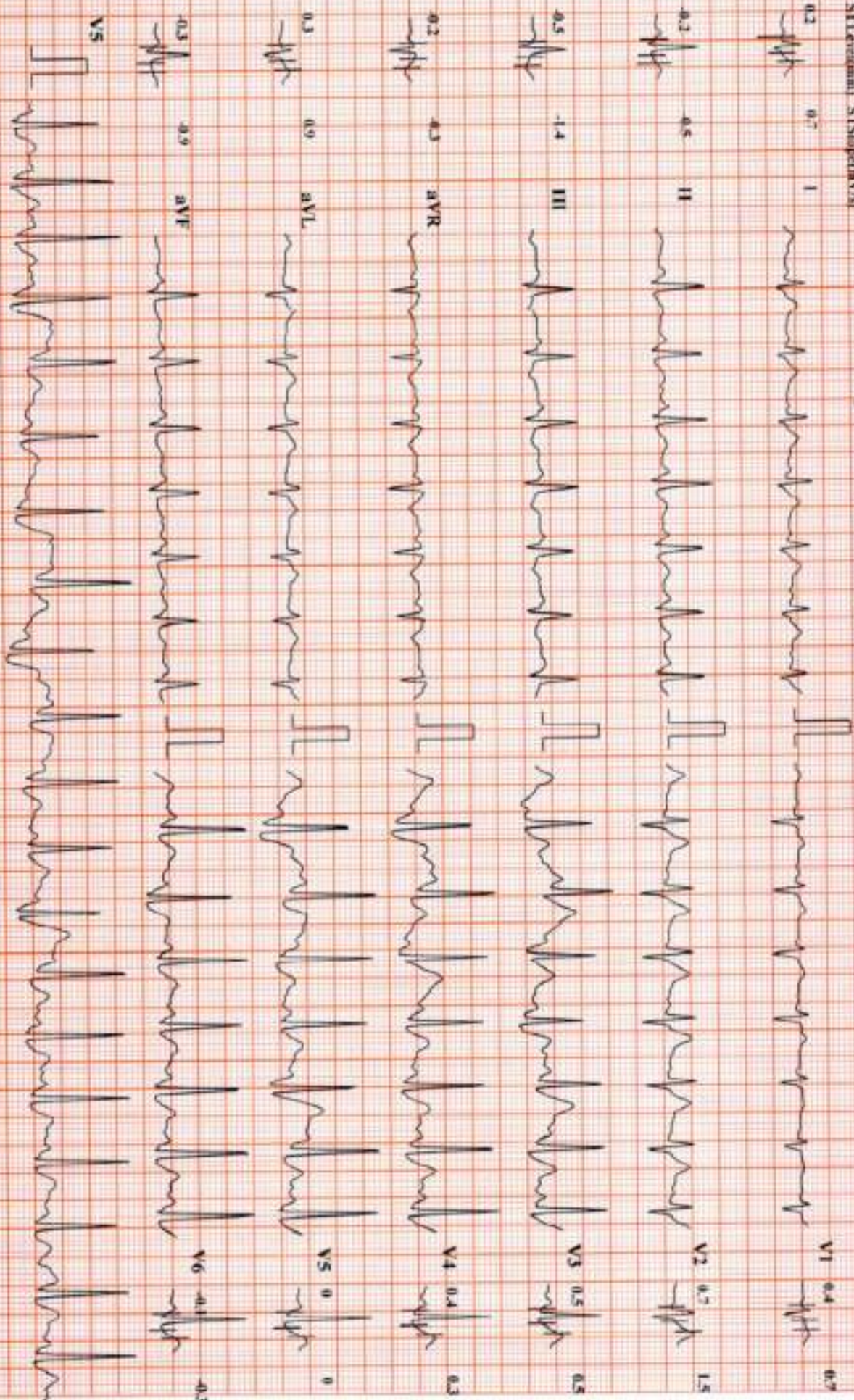


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz

Main Filter: ON

ISO - R - 60 mm, J - R - 60 mm, Post P - J - 60 mm

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

AMIT KAMBLE (38 M)

ID: 2406922171

Date: 09-03-2024

Exec Time: 00:00

HR: 115 bpm

Bruce Protocol

Surge: Recovery/2

Speed: 0 kmph

Slope: 0 %

THR: 154 bpm

BP: 130/80 mmHg

STL:stdmm STSlope(mV/s)

STL:stdmm STSlope(mV/s)

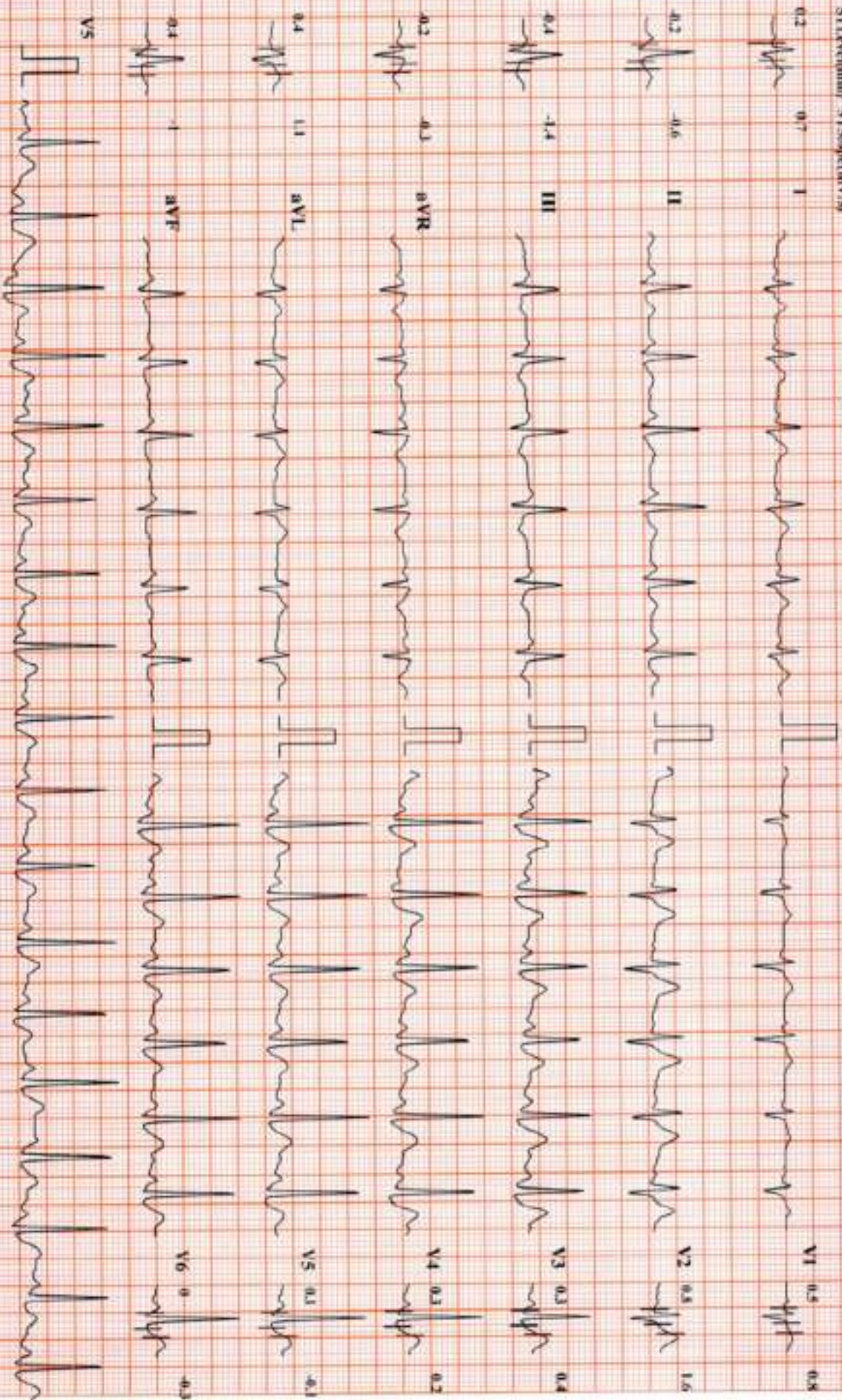


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Main Filter ON

SP - I - 00 ms, 3 - R - 60 ms, 1987 - 1 - 1 - 00 ms

Scaltec CardioCare CS-207 Version: 3.4