

Name : MR.SURENDRA SHARMA

Age / Gender : 38 Years/Male

Consulting Dr. :

Collected : 19-Feb-2024 / 09:18

Reg.Location : Kandivali East (Main Centre)

Reported : 20-Feb-2024 / 09:14

### PHYSICAL EXAMINATION REPORT

#### History and Complaints:

Pain over Rt LL

#### EXAMINATION FINDINGS:

Height (cms): 178 cms

Weight (kg): 70 kgs

Temp (0c): Afebrile

Skin: Normal

Blood Pressure (mm/hg): 130/80

Nails: Normal

Pulse: 72/min

Lymph Node: Not Palpable

#### Systems

Cardiovascular: Normal

Respiratory: Normal

Genitourinary: Normal

GI System: Normal

CNS: Normal

#### IMPRESSION:

*CBE - feature of Thalassemia trait*

#### ADVICE:

*Lab studies by RFLC  
e- hematology count*

#### CHIEF COMPLAINTS:

- 1) Hypertension: No
- 2) IHD: No

Name : MR.SURENDRA SHARMA

Age / Gender : 38 Years/Male

Consulting Dr. :

Reg.Location : Kandivali East (Main Centre)

Collected : 19-Feb-2024 / 09:18

Reported : 20-Feb-2024 / 09:14

- |  |    |
|--|----|
| 3) Arrhythmia                            | No |
| 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       | Veg |
| 4) Medication | No  |

\*\*\* End Of Report \*\*\*

*Dr. Jagruti Dhale*

MBBS

Consultant Physician

Reg. No. 1548

Dr.JAGRUTI DHALE

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.  
Row House No. 3, Aangan,  
Thakur Village, Kandivali (east),  
Mumbai - 400101.  
Tel : 61700000



CID : 2405000802  
Name : Mr SURENDRA SHARMA  
Age / Sex : 38 Years/Male  
Ref. Dr :  
Reg. Location : Kandivali East Main Centre

Reg. Date : 19-Feb-2024  
Reported : 19-Feb-2024 / 13:23

Use a QR Code Scanner  
Application To Scan the Code

**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. Akash Chhari  
MBBS. MD. Radio-Diagnosis Mumbai  
MMC REG NO - 2011/08/2862

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024021909191824>



Use a QR Code Scanner  
Application To Scan the Code

CID : 2405000802  
Name : Mr SURENDRA SHARMA  
Age / Sex : 38 Years/Male  
Ref. Dr :  
Reg. Location : Kandivali East Main Centre

Reg. Date : 19-Feb-2024  
Reported : 19-Feb-2024 / 10:56

## USG WHOLE ABDOMEN

### LIVER:

The liver is normal in size (12.8 cm), 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 measures 10 mm and CBD measures 2.8 mm appears normal.

GALL BLADDER: The gall bladder appears normal. No evidence of gall stones or mass lesions seen

PANCREAS: The pancreas appears normal. No evidence of solid or cystic mass lesion.

### KIDNEYS:

Right kidney measures 9.3 x 4.1 cm. Left kidney measures 10.4 x 5.9 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 (8.4 cm) 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.

PROSTATE: The prostate is normal in size and measures 4.3 x 3.4 x 2.9 cm volume is 23 cc.

### IMPRESSION:

**NO SIGNIFICANT ABNORMALITY IS SEEN.**

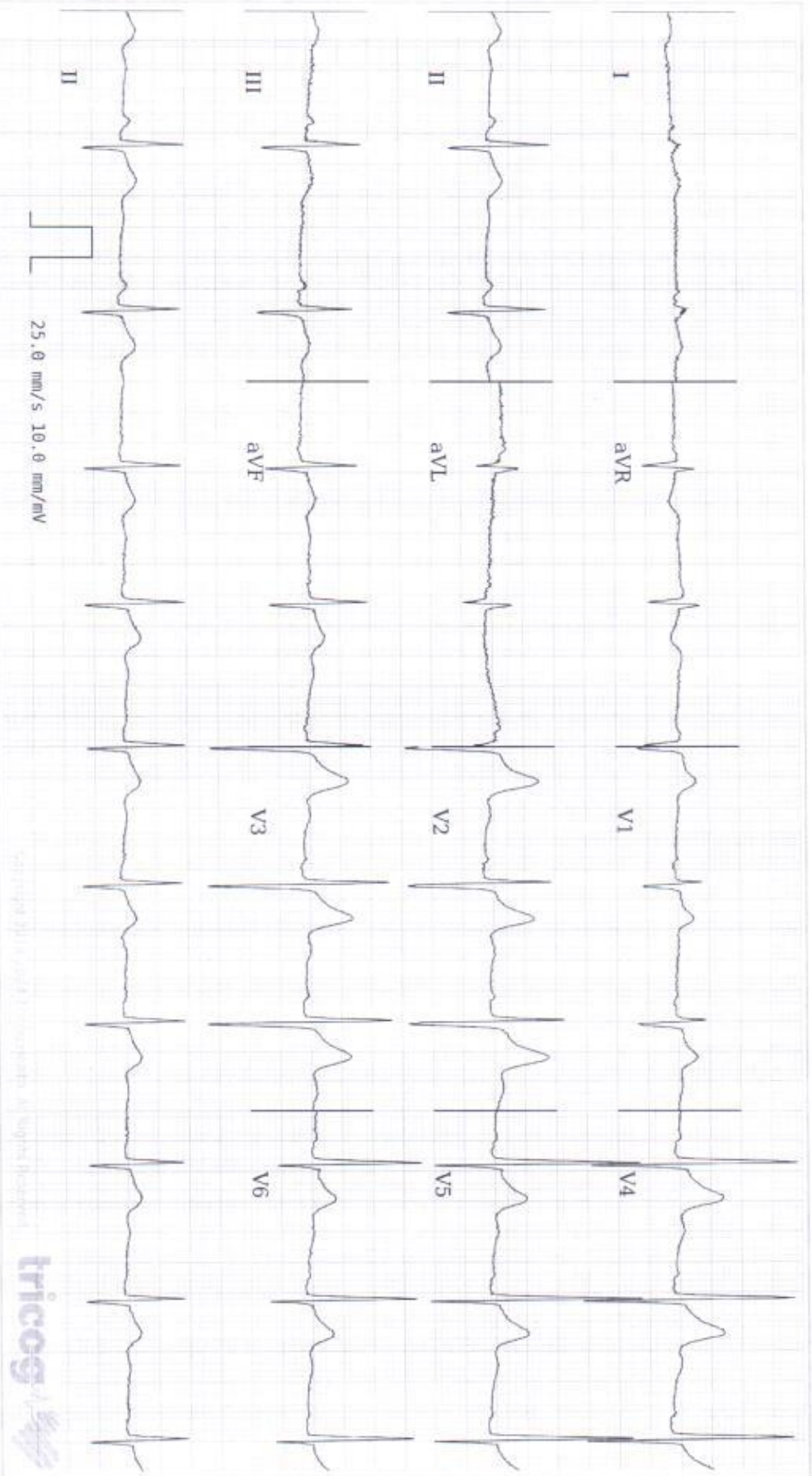
-----End of Report-----

DR. Akash Chhari  
MBBS. MD. Radio-Diagnosis Mumbai  
MMC REG NO - 2011/08/2862

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024021909191809>

Patient Name: SURENDRA SHARMA  
Patient ID: 2405000802

Date and Time: 19th Feb 24 12:15 PM



Age **38** NA  
years months

Gender **Male**

Heart Rate **63bpm**

Patient Vitals

BP: 130/80 mmHg

Weight: 70 kg

Height: 178 cm

Pulse: NA

SpO2: NA

Resp: NA

Others:

**Measurements**

QRSD: 92ms

QT: 390ms

QTcB: 399ms

PR: 148ms

P-R-T: -11° 51° 60°

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

REPORTED BY

DR AKHIL PARTHEKAR  
MBBS MD MEDICINE, DNB Cardiology  
Cardiologist  
2012082453

This document is the property of Suburban Diagnostics and should be used only for the patient's care. It is not to be reproduced or distributed without the written consent of Suburban Diagnostics. All rights reserved. A full report must be interpreted by a qualified physician. If you have any questions, please contact our office at 2405000802.

# SUBURBAN DIAGNOSTICS KANDIVALI EAST

# REPORT



Email:

2922 / SURENDRA SHARMA / 38 Yrs / M / 178 Cms / 70 Kg Date: 19 / 02 / 2024 01:03:29 PM Refd By : AERCOFEMI

## REPORT :

Heart Rate 155.0 bpm

Systolic BP 180.0 mmHg Diastolic BP 80.0 mmHg

Exercise Time 07.25 Mins - Ectopic Beats 0.0

METS 10.77 test End Reason , Heart Rate Achieved Target Heart Rate 86% of 182

TEST OBJECTIVE	:	ROUTINE CHECK UP
RISK FACTOR	:	NONE
ACTIVITY	:	MODERATE ACTIVE
MEDICATION	:	NONE
REASON FOR TERMINATION	:	HEART RATE ACHIEVED
EXERCISE TOLERANCE	:	GOOD
EXERCISE INDUCED ARRHYTHMIAS	:	NO
HAEMODYNAMIC RESPONSE	:	NORMAL
CHRONOTROPIC RESPONSE	:	NORMAL
FINAL IMPRESSION	:	NO SIGNIFICANT ST T CHANGES NOTED

DISCLAIMER Negative stress test does not rule out coronary artery disease. Positive stress test is suggestive but not confirmatory of coronary artery disease. Hence clinical correlation is mandatory.

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.  
Row House 1st, 3, Aangan,  
Thakur Village, Kandivall (west),  
Mumbai - 400101.  
Tel : 61700000

**Dr. Akhil P. Parulekar.**  
MBBS, MD, Medicine  
DNB Cardiology  
Reg. No. 2012082493

Doctor : DR. AKHIL PARULEKAR

# SUBURBAN DIAGNOSTICS KANDIVALI EAST

Email:

Report



2922 (2405000802) / SURENDRA SHARMA / 38 Yrs / M / 178 Cms / 70 Kg  
 Date: 19 / 02 / 2024 01:03:29 PM Refd By : AERCOFEMI Examined By: DR.SNEHA SHETTY

Stage	Time	Duration	Speed(Kmph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:07	0:07	00.0	00.0	01.0	071	39 %	130/80	092	00	
Standing	00:25	0:18	00.0	00.0	01.0	065	36 %	130/80	084	00	
HV	00:33	0:08	00.0	00.0	01.0	070	38 %	130/80	091	00	
ExStart	00:55	0:22	00.0	00.0	01.0	083	46 %	130/80	107	00	
BRUCE Stage 1	03:55	3:00	02.7	10.0	04.7	106	58 %	130/80	137	00	
BRUCE Stage 2	05:55	2:00	04.0	12.0	06.3	124	68 %	150/80	186	00	
BRUCE Stage 3	07:55	2:00	05.5	14.0	09.2	148	81 %	160/80	236	00	
PeakEx	08:20	0:25	06.8	16.0	10.7	155	85 %	180/80	279	00	
Recovery	09:20	1:00	00.0	00.0	04.2	117	64 %	180/80	210	00	
Recovery	09:29				00.0	000	0 %	---/---	000	00	

**FINDINGS :**

Exercise Time : 07:25  
 Initial HR (ExStrt) : 83 bpm 46% of Target 182  
 Initial BP (ExStrt) : 130/80 (mm/Hg)  
 Max Workload Attained : 10.7 Good response to induced stress  
 Duke Treadmill Score : 03.1  
 Test End Reasons : Heart Rate Achieved

Max HR Attained 155 bpm 85% of Target 182  
 Max BP Attained 180/80 (mm/Hg)

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.  
 Row House No. 3, Aangan,  
 Thakur Village, Kandivali (west),  
 Mumbai - 400101.  
 Tel : 61700099

**Dr. Akhil P. Parulekar**  
 MBBS, MD, Medicine  
 DNB Cardiology  
 Reg. No. 2012082483

Doctor : DR.AKHIL PARULEKAR

# SUBURBAN DIAGNOSTICS KANDIVALI EAST

SUPINE ( 00:07 )

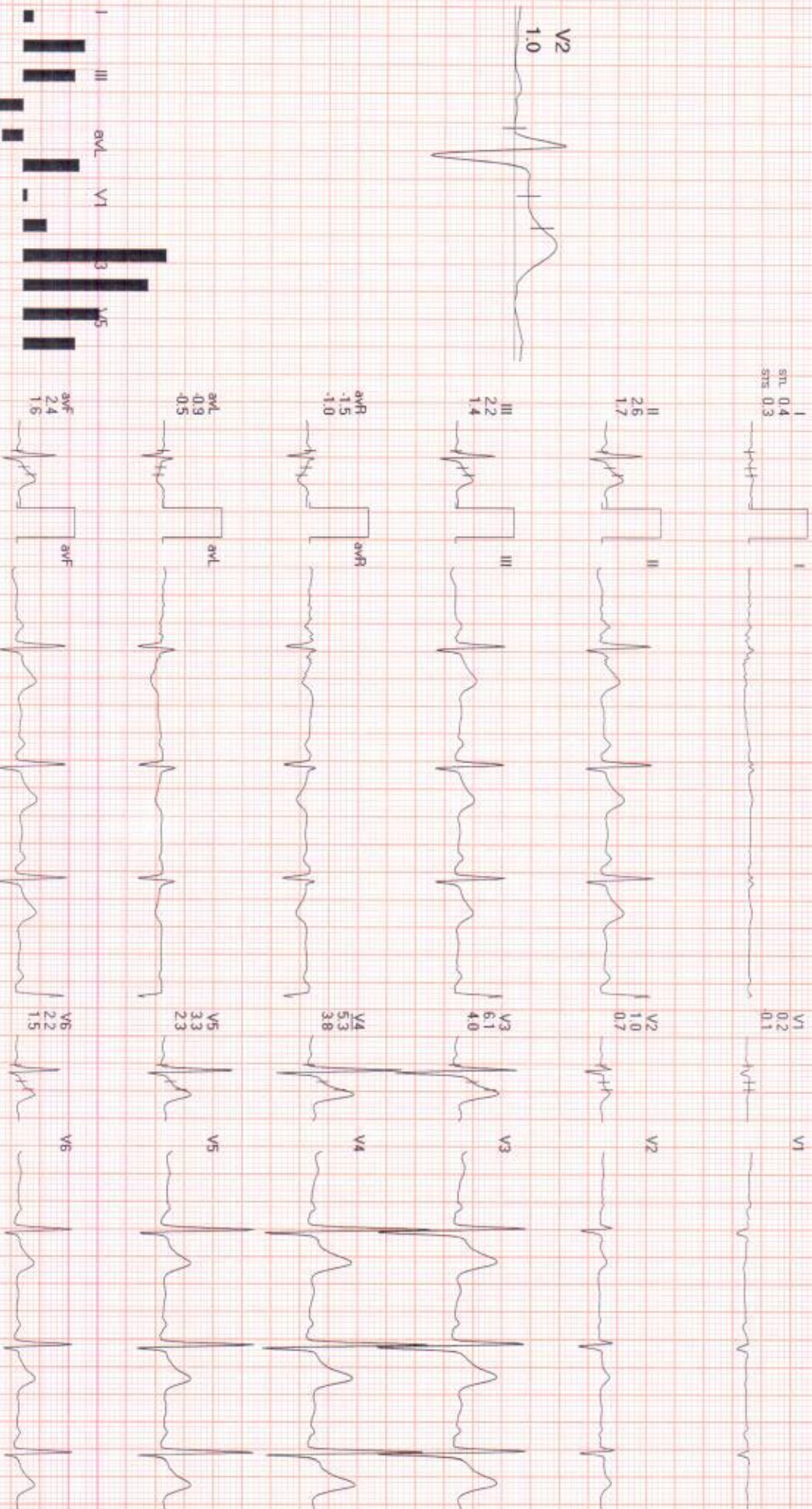


2922 (2405000802) / SURENDRA SHARMA / 38 Yrs / M / 178 Cms / 70 Kg / HR : 71

Date: 19/02/2024 01:03:29 PM METS: 10/71 bpm 39% of THR BP: 130/80 mmHg Rew ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

4X 80 ms Post J

ExTime: 00:00 0.0 KmPh: 0.0%  
25 mmv/Sec: 1.0 Cm/mv



REMARKS:



# SUBURBAN DIAGNOSTICS KANDIVALI EAST

STANDING ( 00:18 )

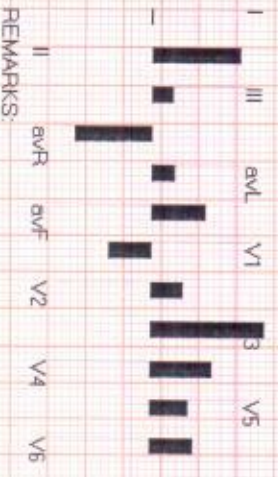
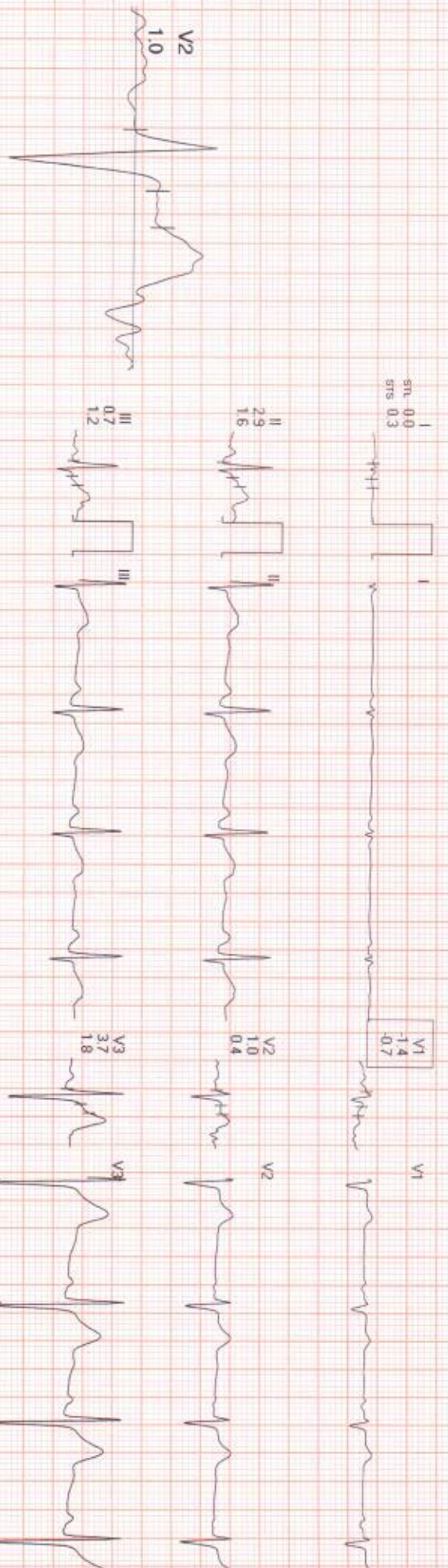


2922 (2405000802) / SURENDRA SHARMA / 38 Yrs / M / 178 Cms / 70 Kg / HR : 65

Date: 19/02/2024 01:03:29 PM METS: 1.0/65 bpm 36% of THR BP: 130/80 mmHg Raw ECG/BLC On/Match On/HF 0.05 Hz/LF 35. Hz

4X 80 mS Post J

ExTime: 00:00:0.0 Kmph. 0.0%  
25 mm/Sec. 1.0 Cm/mV



REMARKS:

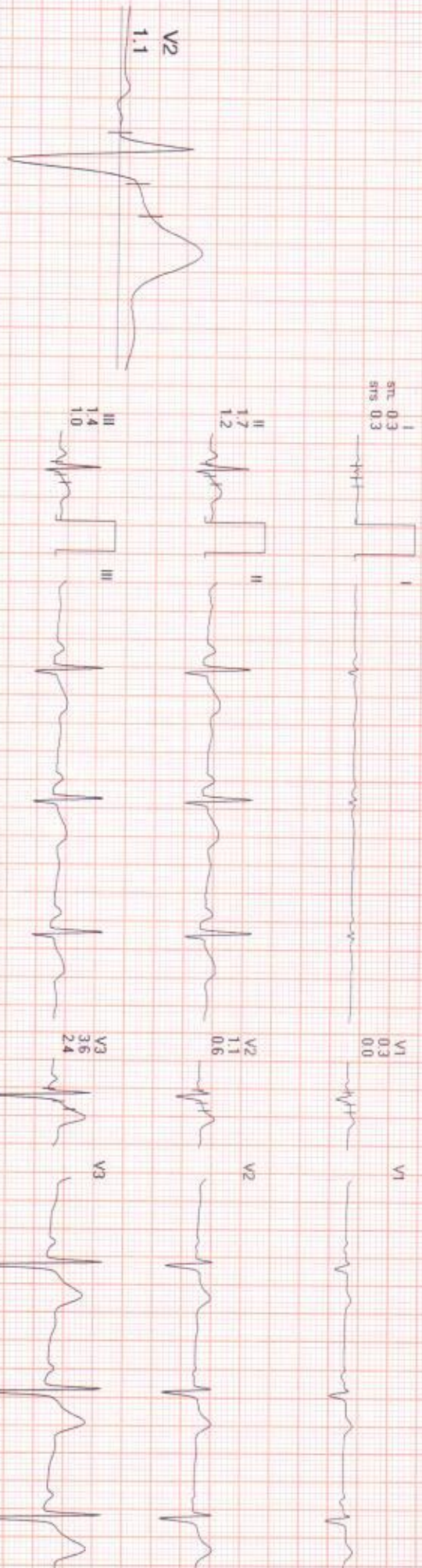
# SUBURBAN DIAGNOSTICS KANDIVALI EAST

2922 (2405000802) / SURENDRA SHARMA / 38 Yrs / M / 178 Cms / 70 Kg / HR : 70

Date: 19 / 02 / 2024 01:03:29 PM METS: 1.0/70 bpm 38% of THR BP: 130/80 mmHg Raw ECG/BLC On/Notch On/HE 0.05 Hz/AF 35. Hz

4X 80 ms Post J

ExTime: 00:00:0.0 Kmph: 0.0%  
25 mm/Sec: 1.0 Cm/mV



REMARKS:  
I II III aVR aVL aVF V1 V2 V3 V4 V5 V6

HV ( 00:08 )

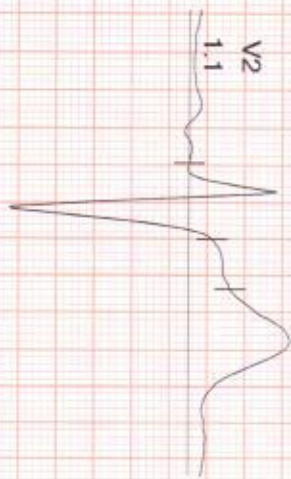


SUBURBAN DIAGNOSTICS KANDIVALI EAST

2922 (2405000802) / SURENDRA SHARMA / 38 Yrs / M / 178 Cms / 70 Kg / HR : 83

Date: 19/02/2024 01:03:29 PM METS: 1.0/83 bpm 46% of THR BP: 130/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/ LF 35 Hz  
4X 80 ms Post J

ExStit  
ACPL  
EXTIME: 00:00 0.0 kmph 0.0%  
25 mm/Sec 1.0 Cm/mV



ST: 0.4  
STs: 0.2



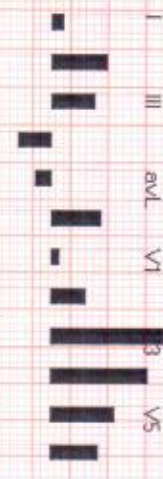
ST: 0.4  
STs: 0.2



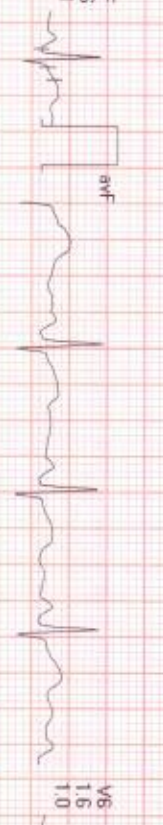
ST: 0.4  
STs: 0.2



ST: 0.4  
STs: 0.2



ST: 0.4  
STs: 0.2



REMARKS: I, II, III, aVR, aVL, aVF, V1, V2, V3, V4, V5, V6



# SUBURBAN DIAGNOSTICS KANDIVALI EAST

BRUCE : Stage 1 ( 03:00 )

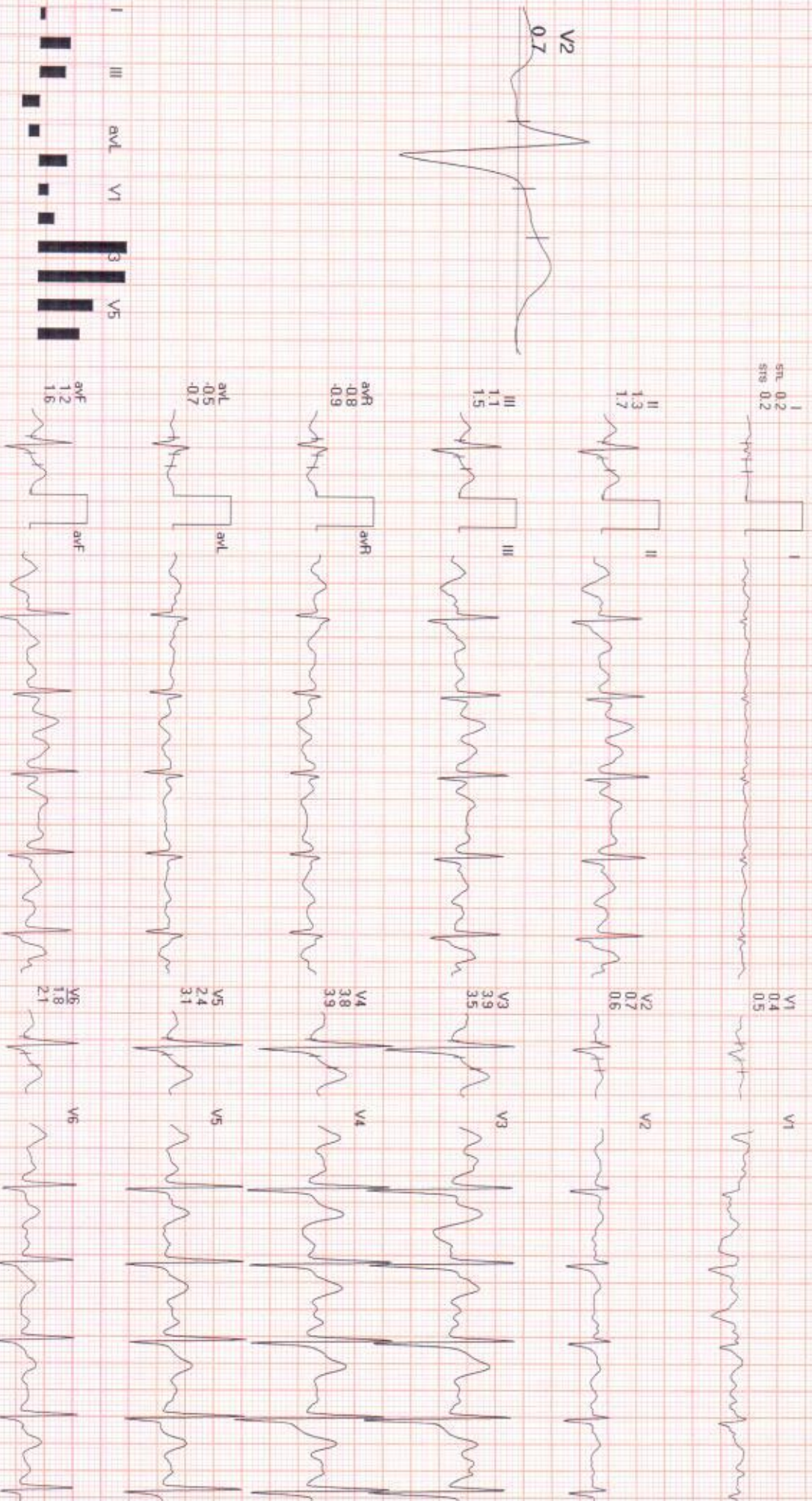


2922 (2405000802) / SURENDRA SHARMA / 38 Yrs / M / 178 Cms / 70 Kg / HR : 106

Date: 19/02/2024 01:03:29 PM METS: 47/106 bpm 58% of THR BP: 130/80 mmHg Row ECG/BLC On/Notch On/HF 0.05 HZLF 35 Hz

4X 80 mS Post J

ExTime: 03:00 2.7 KmPh. 10.0% 25 mm/Sec. 1.0 Cm/mV



REMARKS:

# SUBURBAN DIAGNOSTICS KANDIVALI EAST

2922 (2405000802) / SURENDRA SHARMA / 38 Yrs / M / 178 Cms / 70 Kg / HR : 124

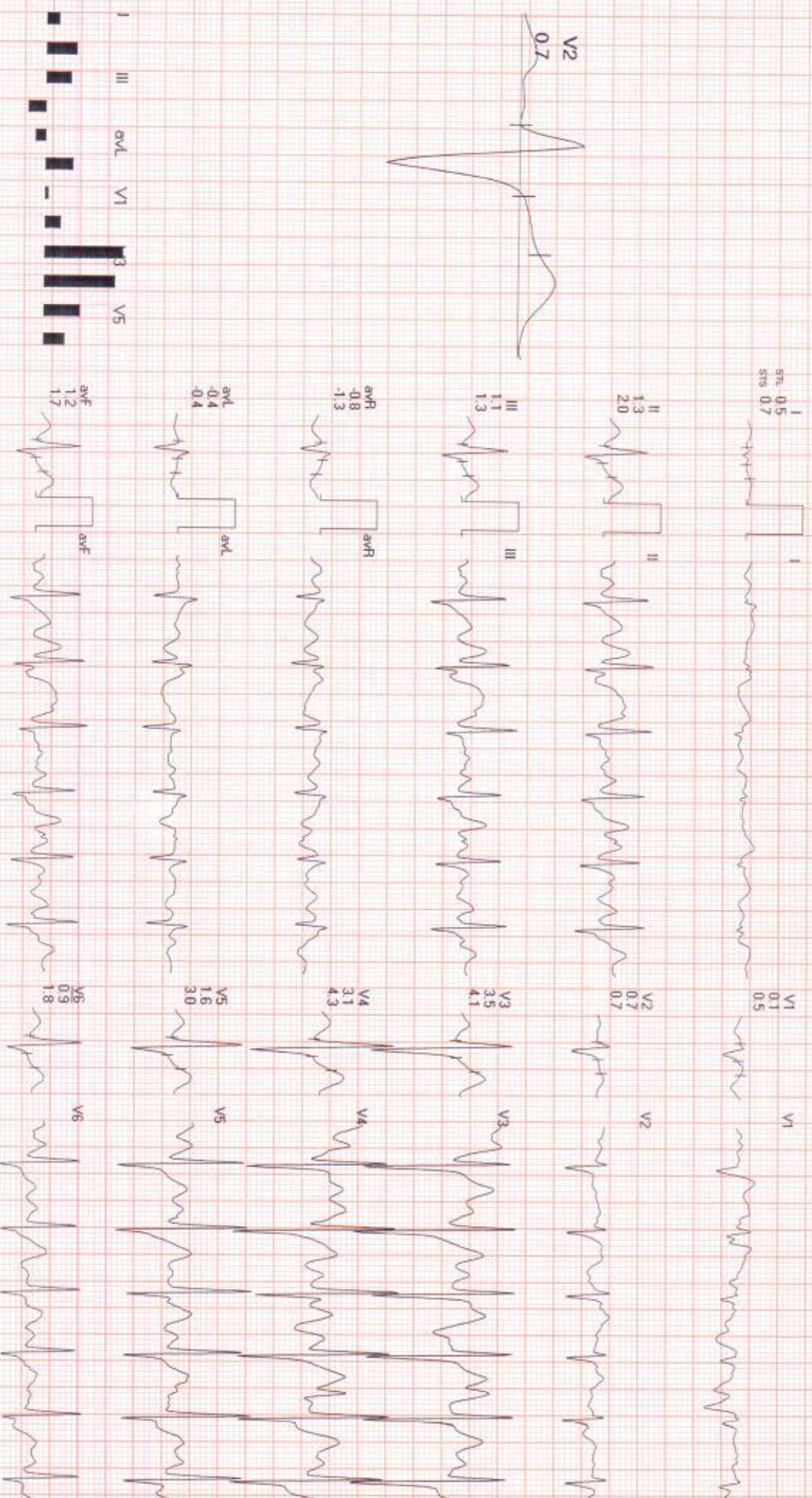
BRUCE : Stage 2 ( 02:00 )



Date: 19/02/2024 01:03:29 PM  
4X 80 ms Post J

METS: 6.3/124 bpm 68% of THR BP: 150/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 05:00 4.0 Kmph, 12.0%  
25 mm/Sec, 1.0 Cm/mV



REMARKS:



SUBURBAN DIAGNOSTICS KANDIVALI EAST

BRUCE : Stage 3 ( 02:00 )



2922 (2405000802) / SURENDRA SHARMA / 38 Yrs / M / 178 Cms / 70 Kg / HR : 148

Date: 19/02/2024 01:03:29 PM METS: 9.2/148 bpm 81% of THR BP: 160/80 mmHg Rew ECG/ BLC On/ Notch On/ HE 0.05 Hz/LF 35 Hz

4X 60 ms Post J

ExTime: 07:00 5.5 Kmph 140%  
25 mm/Sec 1.0 Cm/mV



REMARKS: I aVR aVL V1 V3 V5 II aVF aVF V2 V4 V6

**SUBURBAN DIAGNOSTICS KANDIVALI EAST**

**PeakEX**

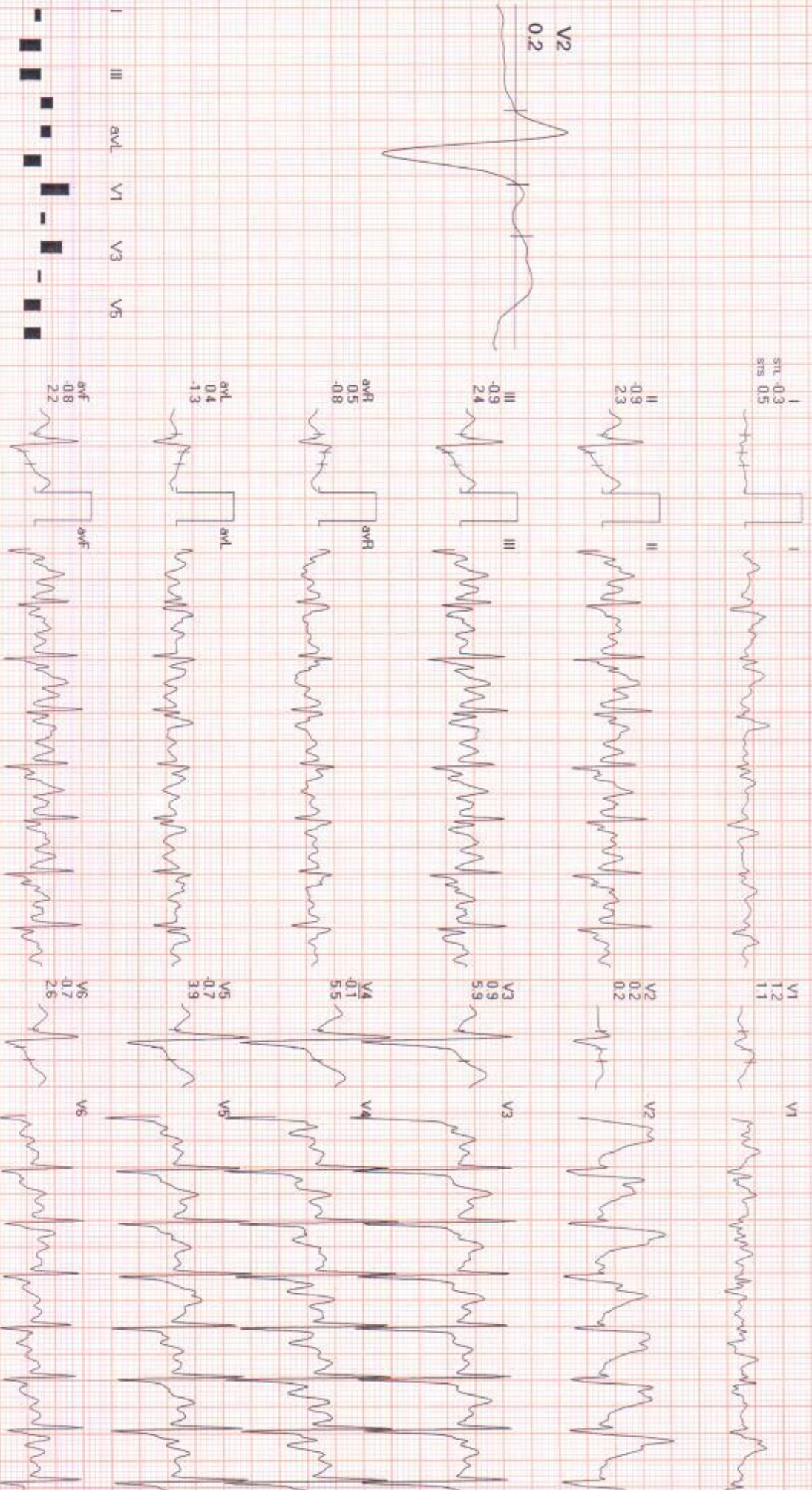


2922 (2405000802) / SURENDRA SHARMA / 38 Yrs / M / 178 Cms / 70 Kg / HR : 155

Date: 19 / 02 / 2024 01:03:29 PM METS: 10.7 / 155 bpm 85% of THR BP: 180/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35. Hz

4X 60 ms Post 1

EXTime 07:25 6.8 Kmph 16.0%  
25 mm/Sec 1.0 Cm/mV



REMARKS  
II aVR aVL aVF V1 V2 V3 V4 V5 V6



# SUBURBAN DIAGNOSTICS KANDIVALI EAST

Recovery : ( 01:00 )

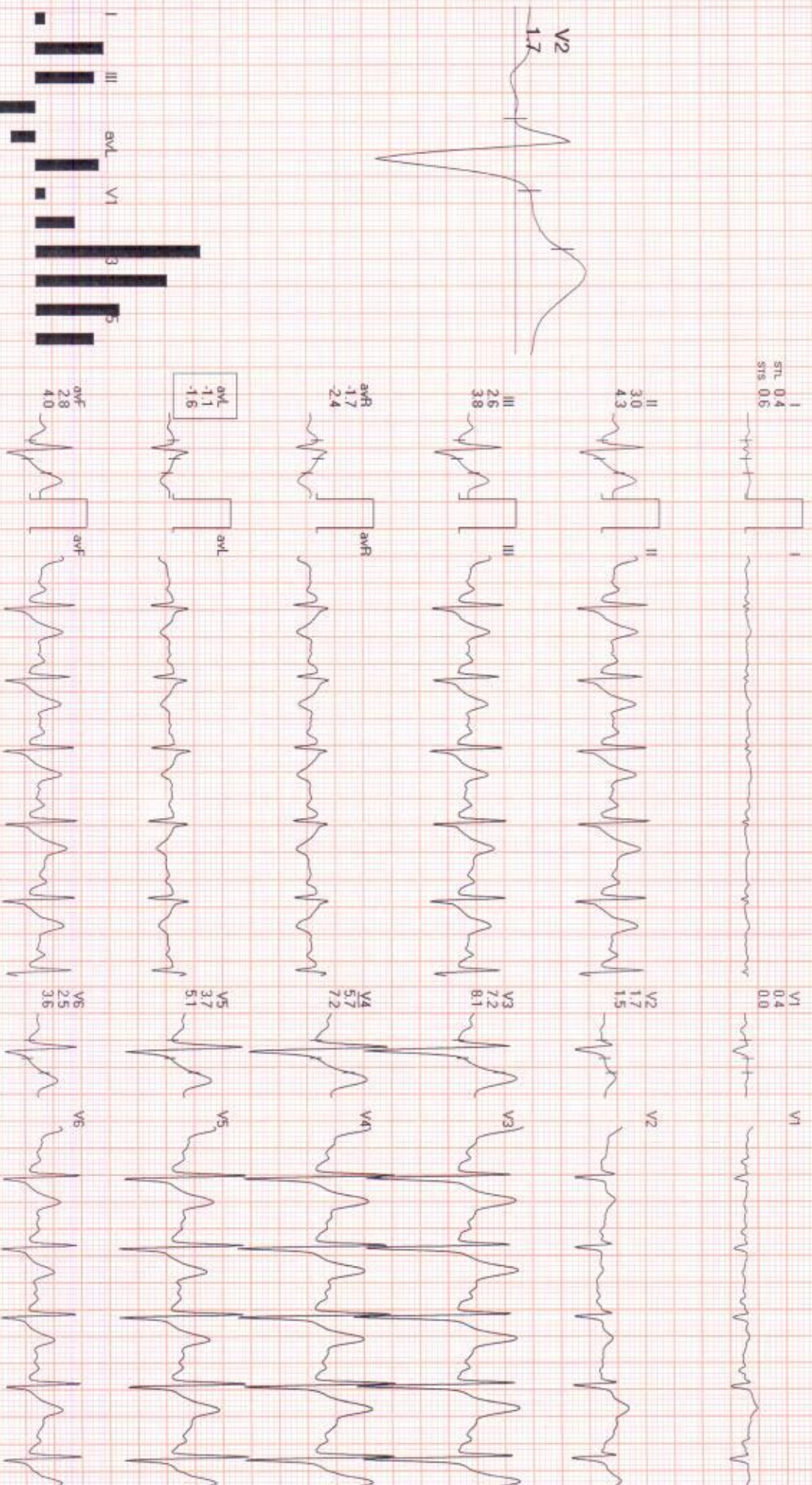


2922 (2405000802) / SURENDRA SHARMA / 38 Yrs / M / 178 Cms / 70 Kg / HR : 117

Date: 19 / 02 / 2024 01:03:29 PM METS: 4.2/117 bpm 64% of THR BP: 180/80 mmHg Raw ECG/BLCOn/Notch On/HF 0.05 Hz/LF 35 Hz

4X 80 ms Post J

ExTime: 07:25 - 0.0 KmPh - 0.0%  
25 mm/Sec - 1.0 Cm/InV



REMARKS:



# SUBURBAN DIAGNOSTICS KANDIVALI EAST

2922 (2405000802) / SURENDRA SHARMA / 38 Yrs / M / 178 Cms / 70 Kg / HR 112

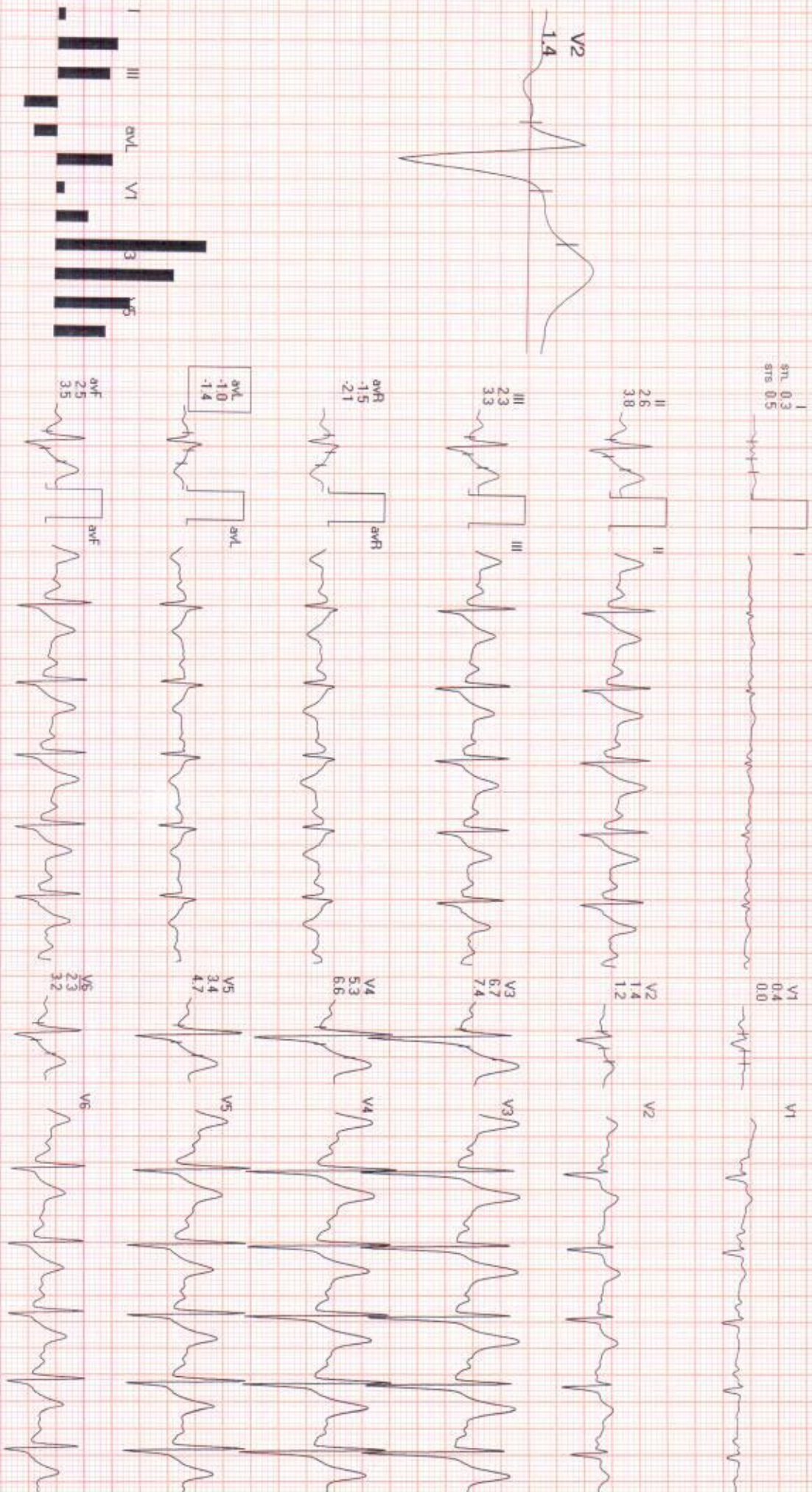
Recovery : ( 01:09 )



Date: 19/02/2024 01:03:29 PM  
 4X 80 mS Post J

METS: 1.0/112 bpm 62% of THR BP: 180/80 mmHg Pw ECG/BLC On/ Notch On/HF 0.05 Hz/LF 35 Hz

EXTime: 07:25 0.0 Km/Ph. 0.0%  
 25 mm/Sec. 1.0 Cm/mV



REMARKS:  
 II aVR aVF V2 V4 V6



CID : 2405000802  
Name : MR.SURENDRA SHARMA  
Age / Gender : 38 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 19-Feb-2024 / 09:20  
Reported : 19-Feb-2024 / 17:17

Use a QR Code Scanner  
Application To Scan the Code

**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	13.8	13.0-17.0 g/dL	Spectrophotometric
RBC	5.92	4.5-5.5 mil/cmm	Elect. Impedance
PCV	42.7	40-50 %	Calculated
MCV	72.2	81-101 fl	Measured
MCH	23.3	27-32 pg	Calculated
MCHC	32.3	31.5-34.5 g/dL	Calculated
RDW	18.8	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	6330	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	23.7	20-40 %	
Absolute Lymphocytes	1500.2	1000-3000 /cmm	Calculated
Monocytes	7.5	2-10 %	
Absolute Monocytes	474.8	200-1000 /cmm	Calculated
Neutrophils	66.4	40-80 %	
Absolute Neutrophils	4203.1	2000-7000 /cmm	Calculated
Eosinophils	2.0	1-6 %	
Absolute Eosinophils	126.6	20-500 /cmm	Calculated
Basophils	0.4	0.1-2 %	
Absolute Basophils	25.3	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<b><u>PLATELET PARAMETERS</u></b>			
Platelet Count	323000	150000-410000 /cmm	Elect. Impedance
MPV	8.6	6-11 fl	Measured
PDW	14.3	11-18 %	Calculated
<b><u>RBC MORPHOLOGY</u></b>			
Hypochromia	Mild		
Microcytosis	+		



**CID** : 2405000802  
**Name** : MR.SURENDRA SHARMA  
**Age / Gender** : 38 Years / Male  
**Consulting Dr.** : -  
**Reg. Location** : Kandivali East (Main Centre)

**Collected** : 19-Feb-2024 / 09:20  
**Reported** : 19-Feb-2024 / 17:08

Use a QR Code Scanner  
 Application To Scan the Code

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

Note : Features suggest thalassemia trait.  
 Advice : Hb studies by HPLC and reticulocyte count.

Specimen: EDTA Whole Blood

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



Use a QR Code Scanner  
Application To Scan the Code

CID : 2405000802  
Name : MR.SURENDRA SHARMA  
Age / Gender : 38 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 19-Feb-2024 / 09:20  
Reported : 19-Feb-2024 / 17:17

**Clinical Significance:** The erythrocyte sedimentation rate (ESR), also called a sedimentation rate is the rate red blood cells sediment in a period of time.

**Interpretation:**

Factors that increase ESR: Old age, Pregnancy, Anemia

Factors that decrease ESR: Extreme leukocytosis, Polycythemia, Red cell abnormalities- Sickle cell disease

**Limitations:**

- It is a non-specific measure of inflammation.
- The use of the ESR as a screening test in asymptomatic persons is limited by its low sensitivity and specificity.

**Reflex Test:** C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.

**Reference:**

- Pack Insert
- Brigden ML. Clinical utility of the erythrocyte sedimentation rate. American family physician. 1999 Oct 1;60(5):1443-50.

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

\*\*\* End Of Report \*\*\*



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



CID : 2405000802  
Name : MR.SURENDRA SHARMA  
Age / Gender : 38 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code  
Collected : 19-Feb-2024 / 09:20  
Reported : 19-Feb-2024 / 16:45

**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	94.9	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	86.6	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.59	0.3-1.2 mg/dl	Vanadate oxidation
BILIRUBIN (DIRECT), Serum	0.21	0-0.3 mg/dl	Vanadate oxidation
BILIRUBIN (INDIRECT), Serum	0.38	<1.2 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.5	5.7-8.2 g/dL	Biuret
ALBUMIN, Serum	4.4	3.2-4.8 g/dL	BCG
GLOBULIN, Serum	3.1	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.4	1 - 2	Calculated
SGOT (AST), Serum	25.9	<34 U/L	Modified IFCC
SGPT (ALT), Serum	19.2	10-49 U/L	Modified IFCC
GAMMA GT, Serum	9.5	<73 U/L	Modified IFCC
ALKALINE PHOSPHATASE, Serum	114.5	46-116 U/L	Modified IFCC
BLOOD UREA, Serum	16.8	19.29-49.28 mg/dl	Calculated
BUN, Serum	7.8	9.0-23.0 mg/dl	Urease with GLDH
CREATININE, Serum	0.67	0.73-1.18 mg/dl	Enzymatic

Note: Kindly note in change in reference range w.e.f. 07-09-2023



CID : 2405000802  
Name : MR.SURENDRA SHARMA  
Age / Gender : 38 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 19-Feb-2024 / 13:19  
Reported : 19-Feb-2024 / 18:33

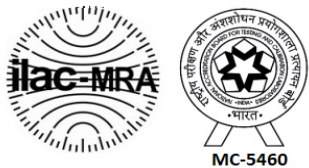
Use a QR Code Scanner  
Application To Scan the Code

eGFR, Serum	123	(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	4.5	3.7-9.2 mg/dl	Uricase/ Peroxidase
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 SDRL, Vidyavihar Lab  
\*\*\* End Of Report \*\*\*



*Anupa*

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



CID : 2405000802  
Name : MR.SURENDRA SHARMA  
Age / Gender : 38 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 19-Feb-2024 / 09:20  
Reported : 19-Feb-2024 / 16:45

Use a QR Code Scanner  
Application To Scan the Code

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
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 SDRL, Vidyavihar Lab

\*\*\* End Of Report \*\*\*



*Dr. Vrushi Shroff*

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



CID : 2405000802  
Name : MR.SURENDRA SHARMA  
Age / Gender : 38 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 19-Feb-2024 / 09:20  
Reported : 19-Feb-2024 / 19:05

Use a QR Code Scanner  
Application To Scan the Code

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
<b>PHYSICAL EXAMINATION</b>			
Color	Pale Yellow	Pale Yellow	-
Reaction (pH)	7.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.005	1.001-1.030	Chemical Indicator
Transparency	clear	Clear	-
Volume (ml)	50	-	-
<b>CHEMICAL EXAMINATION</b>			
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
<b>MICROSCOPIC EXAMINATION</b>			
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	2-3	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 SDRL, Vidyavihar Lab  
\*\*\* End Of Report \*\*\*



*Dr. Vrushi Shroff*

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





CID : 2405000802  
Name : MR.SURENDRA SHARMA  
Age / Gender : 38 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code  
Collected : 19-Feb-2024 / 09:20  
Reported : 19-Feb-2024 / 14:17

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

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	O
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**



CID : 2405000802  
Name : MR.SURENDRA SHARMA  
Age / Gender : 38 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Use a QR Code Scanner Application To Scan the Code  
Collected : 19-Feb-2024 / 09:20  
Reported : 19-Feb-2024 / 17:02

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	146.8	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	90.0	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	Enzymatic colorimetric
HDL CHOLESTEROL, Serum	43.5	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Elimination/ Catalase
NON HDL CHOLESTEROL, Serum	103.3	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	85.3	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	18.0	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.4	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.0	0-3.5 Ratio	Calculated

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



*Dr. Vrushi Shroff*

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



CID : 2405000802  
 Name : MR.SURENDRA SHARMA  
 Age / Gender : 38 Years / Male  
 Consulting Dr. : -  
 Reg. Location : Kandivali East (Main Centre)

Collected : 19-Feb-2024 / 09:20  
 Reported : 19-Feb-2024 / 16:36

Use a QR Code Scanner  
 Application To Scan the Code

**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	4.8	3.5-6.5 pmol/L	CLIA
Free T4, Serum	17.8	11.5-22.7 pmol/L	CLIA
sensitiveTSH, Serum	1.155	0.55-4.78 microIU/ml mIU/ml	CLIA



CID : 2405000802  
Name : MR.SURENDRA SHARMA  
Age / Gender : 38 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code

Collected : 19-Feb-2024 / 09:20  
Reported : 19-Feb-2024 / 16:36

**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:**

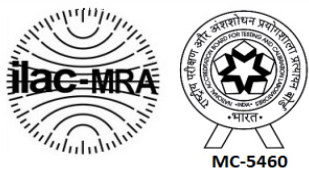
1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results.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

\*\*\* End Of Report \*\*\*



*Anupa*

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