



भारत सरकार
Government of India



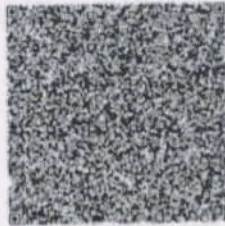
भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

नामांकन क्रम/ Enrolment No.: 2189/24485/76441

Download Date: 24/11/2020

To
शरिफ अख्तर
Sharique Akhtar
S/O: Akhtar Hussain
house no 963
munger
dilawerpur
Munger
Munger
Munger Bihar - 811201
7257938588

Issue Date: 29/01/2019



आपका आधार क्रमांक / Your Aadhaar No. :

2058 7130 2301

VID : 9179 5409 3954 0694

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



Download Date: 24/11/2020



शरिफ अख्तर
Sharique Akhtar
जन्म तिथि/DOB: 15/11/1986
पुरुष/ MALE

Issue Date: 29/01/2019

2058 7130 2301

VID : 9179 5409 3954 0694

मेरा आधार, मेरी पहचान



Government of India



सूचना

- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- स्मार्ट QR कोड / ऑफलाइन XML / ऑनलाइन ऑथेंटिकेशन से पहचान प्रमाणित करें।
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

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- आधार में मोबाइल नंबर और ईमेल ID अपडेट रखें।
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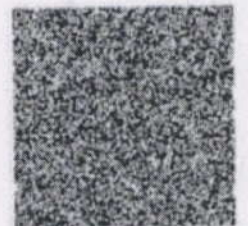


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पता:
S/O: अख्तर हुसैन, हाउस न 963, दिलावरपुर, मुंगेर,
मुंगेर, मुंगेर,
बिहार - 811201

Address:
S/O: Akhtar Hussain, house no 963,
dilawerpur, munger, Munger, Munger,
Bihar - 811201



2058 7130 2301

VID : 9179 5409 3954 0694

1947 | help@uidai.gov.in | www.uidai.gov.in

Sharique Akhtar
19/07/2020

Suburban Diagnostics (I) Pvt. Ltd.
301 & 302, 3rd Floor, V.K. Pedanemba,
Above Tanisq Jeweller, L. T. Road,
Borivali (West), Mumbai - 400 092.

CID# : 2219901225
Name : MR.SHARIQUE AKHTAR
Age / Gender : 35 Years/Male
Consulting Dr. : -
Reg.Location : Borivali West (Main Centre)
Collected : 18-Jul-2022 / 10:08
Reported : 18-Jul-2022 / 14:04

PHYSICAL EXAMINATION REPORT

History and Complaints:

Asymptomatic

EXAMINATION FINDINGS:

Height (cms):	176cms	Weight (kg):	80.8kg
Temp (0c):	Afebrile	Skin:	Normal
Blood Pressure (mm/hg):	110/70mmhg	Nails:	Normal
Pulse:	74/min	Lymph Node:	Not palpable

Systems

Cardiovascular: S1S2 audible
Respiratory: AEBE
Genitourinary: NAD
GI System: Liver & Spleen not plapable
CNS: NAD

IMPRESSION:

Lipids

ADVICE:

- Low oily diet
- Reg. exercise

CHIEF COMPLAINTS:

- | | |
|----------------------|----|
| 1) Hypertension: | NO |
| 2) IHD | NO |
| 3) Arrhythmia | NO |
| 4) Diabetes Mellitus | NO |
| 5) Tuberculosis | NO |

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

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Age / Gender : 35 Years/Male
Consulting Dr. :-
Reg.Location : Borivali West (Main Centre)

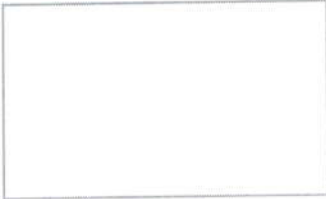
Collected : 18-Jul-2022 / 10:08
Reported : 18-Jul-2022 / 14:04

- | | |
|--|----|
| 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
PHYSICIAN

DR. NITIN SONAVANE
M.B.B.S.AFLH, D.DIAB, D.CARD.
CONSULTANT-CARDIOLOGIST
REGD. NO. : 87714

Suburban Diagnostics (I) Pvt. Ltd.
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Name : MR.SHARIQUE AKHTAR
Age / Gender : 35 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 18-Jul-2022 / 10:11
Reported : 18-Jul-2022 / 15:50

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	14.2	13.0-17.0 g/dL	Spectrophotometric
RBC	5.13	4.5-5.5 mil/cmm	Elect. Impedance
PCV	44.1	40-50 %	Measured
MCV	86	80-100 fl	Calculated
MCH	27.7	27-32 pg	Calculated
MCHC	32.3	31.5-34.5 g/dL	Calculated
RDW	14.8	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	7190	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	30.0	20-40 %	
Absolute Lymphocytes	2157.0	1000-3000 /cmm	Calculated
Monocytes	3.0	2-10 %	
Absolute Monocytes	215.7	200-1000 /cmm	Calculated
Neutrophils	63.0	40-80 %	
Absolute Neutrophils	4529.7	2000-7000 /cmm	Calculated
Eosinophils	4.0	1-6 %	
Absolute Eosinophils	287.6	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	165000	150000-400000 /cmm	Elect. Impedance
MPV	12.6	6-11 fl	Calculated
PDW	32.8	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			
Hypochromia	-		
Microcytosis	-		

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Collected : 18-Jul-2022 / 10:11
Reported : 18-Jul-2022 / 12:03

Macrocytosis -
Anisocytosis -
Poikilocytosis -
Polychromasia -
Target Cells -
Basophilic Stippling -
Normoblasts -
Others Normocytic, Normochromic
WBC MORPHOLOGY -
PLATELET MORPHOLOGY Megaplatelets seen on smear
COMMENT -

Specimen: EDTA Whole Blood

ESR, EDTA WB 6 2-15 mm at 1 hr. Westergren

*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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CID : 2219901225
Name : MR.SHARIQUE AKHTAR
Age / Gender : 35 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 18-Jul-2022 / 10:11
Reported : 18-Jul-2022 / 13:00

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	88.6	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	83.9	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.42	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.18	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.24	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.5	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.9	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.6	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.9	1 - 2	Calculated
SGOT (AST), Serum	26.2	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	31.3	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	32.0	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	103.8	40-130 U/L	Colorimetric
BLOOD UREA, Serum	20.6	12.8-42.8 mg/dl	Kinetic
BUN, Serum	9.6	6-20 mg/dl	Calculated
CREATININE, Serum	0.71	0.67-1.17 mg/dl	Enzymatic
eGFR, Serum	134	>60 ml/min/1.73sqm	Calculated
URIC ACID, Serum	6.4	3.5-7.2 mg/dl	Enzymatic

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Age / Gender : 35 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 18-Jul-2022 / 15:22
Reported : 18-Jul-2022 / 19:16

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 ***



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

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Name : MR.SHARIQUE AKHTAR
Age / Gender : 35 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 18-Jul-2022 / 10:11
Reported : 18-Jul-2022 / 15:33

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
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

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 CPL, Andheri West
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J. Thakker
Dr. JYOT THAKKER
M.D. (PATH), DPB
Pathologist & AVP (Medical
Services)

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Name : MR.SHARIQUE AKHTAR
Age / Gender : 35 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 18-Jul-2022 / 10:11
Reported : 18-Jul-2022 / 15:45

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
URINE EXAMINATION REPORT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.015	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	30	-	-
CHEMICAL EXAMINATION			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Trace	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
MICROSCOPIC EXAMINATION			
Leukocytes(Pus cells)/hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	Occasional	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	-		

*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 : 35 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 18-Jul-2022 / 10:11
Reported : 18-Jul-2022 / 14:44

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

PARAMETER	RESULTS
ABO GROUP	O
Rh TYPING	POSITIVE

NOTE: Test performed by automated column agglutination technology (CAT) which is more sensitive than conventional methods.

Note: This sample is not tested for Bombay blood group.

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 CPL, Andheri West
*** End Of Report ***



J. Thakker

Dr. JYOT THAKKER
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Collected : 18-Jul-2022 / 10:11
Reported : 18-Jul-2022 / 13:20

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	227.4	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	190.5	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	38.1	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	189.3	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	151.0	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	38.3	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	6.0	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	4.0	0-3.5 Ratio	Calculated

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



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

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Collected : 18-Jul-2022 / 10:11
Reported : 18-Jul-2022 / 12:48

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
THYROID FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Free T3, Serum	4.5	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	16.2	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	3.4	0.35-5.5 microIU/ml	ECLIA

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)



Anupa

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

Date:- 18/7/22

CID: 2219901225

Name:- Mr Sharique Akhtar

Sex / Age: M / 35

EYE CHECK UP

Chief complaints: nil

Systemic Diseases: nil

Past history: nil

Unaided Vision: ✓

Aided Vision: nil

Refraction: nil

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance				6/6				6/6
Near				N/6				N/6

Colour Vision: Normal / Abnormal Normal

Remark: Normal

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Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2219901225
Name : Mr SHARIQUE AKHTAR
Age / Sex : 35 Years/Male
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 18-Jul-2022
Reported : 18-Jul-2022 / 16:34

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. NIKHIL DEV
M.B.B.S, MD (Radiology)
Reg No – 2014/11/4764
Consultant Radiologist

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2022071810090652>
ADDRESS: 2 Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

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CID : 2219901225
Name : Mr SHARIQUE AKHTAR
Age / Sex : 35 Years/Male
Ref. Dr :
USG. Location : Mahavir Nagar, Kandivali West Main Centre
Reg. Date : 18-Jul-2022
Reported : 18-Jul-2022 / 17:14

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (14.9cm), shape and smooth margins. It shows normal parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein and CBD appears normal.

GALL BLADDER:

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

PANCREAS:

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

KIDNEYS:

Both the kidneys are normal in size shape and echotexture.
No evidence of any calculus, hydronephrosis or mass lesion seen.
Right kidney measures 10.3 x 4.1cm. Left kidney measures 10.5 x 4.5cm.

SPLEEN:

The spleen is normal in size (10.0cm) 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 measuring 3.9 x 3.0 x 2.8cm and volume is 18.2cc.

IMPRESSION:

No significant abnormality is seen.

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



DR. NIKHIL DEV
M.B.B.S, MD (Radiology)
Reg No – 2014/11/4764
Consultant Radiologist

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

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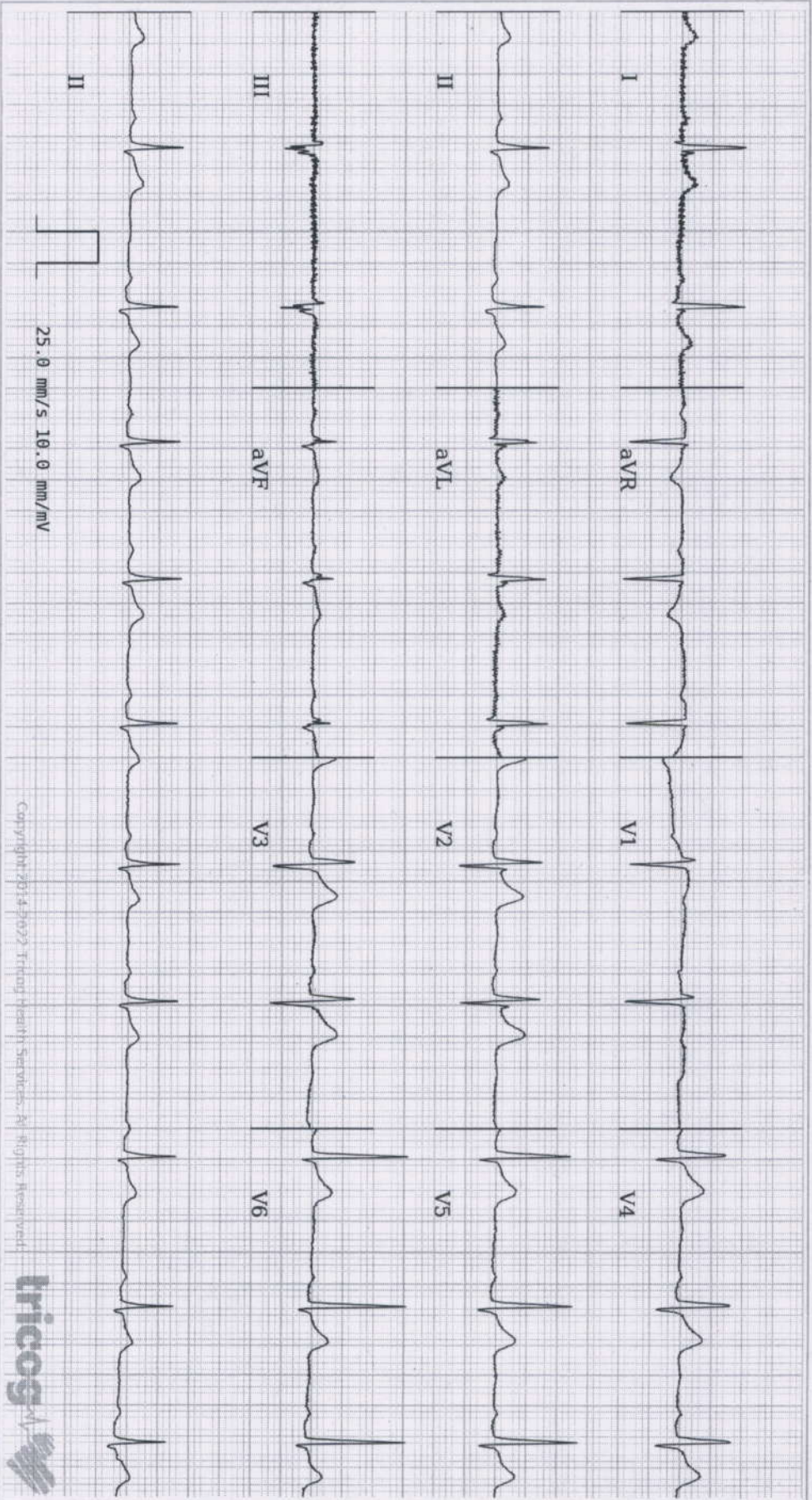
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SUBURBAN DIAGNOSTICS - BORIVALI WEST

Patient Name: SHARIQUE AKHTAR
Patient ID: 2219901225

Date and Time: 18th Jul 22 10:38 AM



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Age **35** 8 3
years months days

Gender **Male**

Heart Rate **65bpm**

Patient Vitals

BP: 110/70 mmHg

Weight: 80 kg

Height: 176 cm

Pulse: NA

Spo2: NA

Resp: NA

Others:

Measurements

QRSD: 88ms

QT: 364ms

QTc: 378ms

PR: 188ms

P-R-T: 49° 11° 25°

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

REPORTED BY

Suburban Diagnostics (I) Pvt. Ltd.
301 & 302, 3rd Floor, Vmi Elegance,
Above Tanisq Jeweller, L. T. Road,
Borivali (West), Mumbai - 400 092.

Dr Nitin Somavane
M.B.S.,A.F.L.H., D.DIAB.D.CARD
Consultant Cardiologist
87714

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 PVT. LTD.

Patient Details **Date:** 18-Jul-22 **Time:** 10:49:51
Name: MR SHARIQUE AKHTAR **ID:** 2219901225
Age: 35 y **Sex:** M **Height:** 176 cms **Weight:** 80 Kgs
Clinical History: NIL

Medications: NIL

Test Details

Protocol: Bruce **Pr.MHR:** 185 bpm **THR:** 166 (90 % of Pr.MHR) bpm
Total Exec. Time: 12 m 2 s **Max. HR:** 169 (91% of Pr.MHR) bpm **Max. Mets:** 14.90
Max. BP: 170 / 70 mmHg **Max. BP x HR:** 28730 mmHg/min **Min. BP x HR:** 5180 mmHg/min
Test Termination Criteria: TEST COMPLET

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	2 : 46	1.0	0	0	76	110 / 70	-0.85 V1	2.12 V3
Standing	0 : 32	1.0	0	0	90	110 / 70	-1.91 V1	5.66 II
Hyperventilation	0 : 33	1.0	0	0	74	110 / 70	-1.06 V1	5.66 V3
1	3 : 0	4.6	1.7	10	105	110 / 70	-1.70 III	-2.48 V1
2	3 : 0	7.0	2.5	12	121	120 / 70	-1.27 III	3.18 V4
3	3 : 0	10.2	3.4	14	137	140 / 70	-0.85 aVR	3.18 V3
4	3 : 0	13.5	4.2	16	169	170 / 70	-1.06 aVR	3.89 V3
Peak Ex	0 : 2	14.9	5	18	169	170 / 70	-0.42 aVR	3.54 V3
Recovery(1)	1 : 0	1.8	1	0	114	150 / 70	-5.31 aVR	5.66 V6
Recovery(2)	1 : 0	1.0	0	0	101	150 / 70	-1.27 aVR	5.66 V3
Recovery(3)	0 : 10	1.0	0	0	101	130 / 70	-1.06 aVR	5.66 V3

Interpretation

The patient exercised according to the Bruce protocol for 12 m 2 s achieving a work level of Max. METS : 14.90. Resting heart rate initially 76 bpm, rose to a max. heart rate of 169 (91% of Pr.MHR) bpm. Resting blood Pressure 110 / 70 mmHg, rose to a maximum blood pressure of 170 / 70 mmHg. GOOD EFFORT TOLERANCE
 NORMAL CHRONOTROPIC RESPONSE
 NO ANGINA/ANGINA EQUIVALENTS
 NO ARRHYTHMIAS
 NO SIGNIFICANT ST-T CHANGES FROM BASELINE
 IMPRESSION STRESS TEST IS NEGATIVE FOR STRESS INDUCIBLE ISCHEMIA

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

Ref. Doctor: ARCOFEMI
 (Summary Report edited by user)

Suburban Diagnostics (I) Pvt. Ltd.
 301& 302, 3rd Floor, Viraji Elegance,
 Above Tanisq Jeweller, L. T. Road,
 Borivali (West), Mumbai - 400 092.

Doctor: DR NITIN SONAVANE
 of Schlier Healthcare, India Pvt. Ltd. V-4-53
DR. NITIN SONAVANE
 M.B.B.S.AFLH, D.DIAG, D.CARD.
CONSULTANT-CARDIOLOGIST
 REGD. NO. : 87714



SUBURBAN DIAGNOSTICS PVT. LTD.

MR SHARIQUE AKHTAR (35 M)

ID: 2219901225

Date: 18-Jul-22

Exec Time : 0 m 0 s

Stage Time : 2 m 46 s

HR: 76 bpm

Protocol: Bruce

Stage: Supine

Speed: 0 mph

Grade: 0%

(THR: 166 bpm)

B.P: 110/70

ST Level (mm)

ST Level (mm)

ST Slope (mV/s)

ST Slope (mV/s)

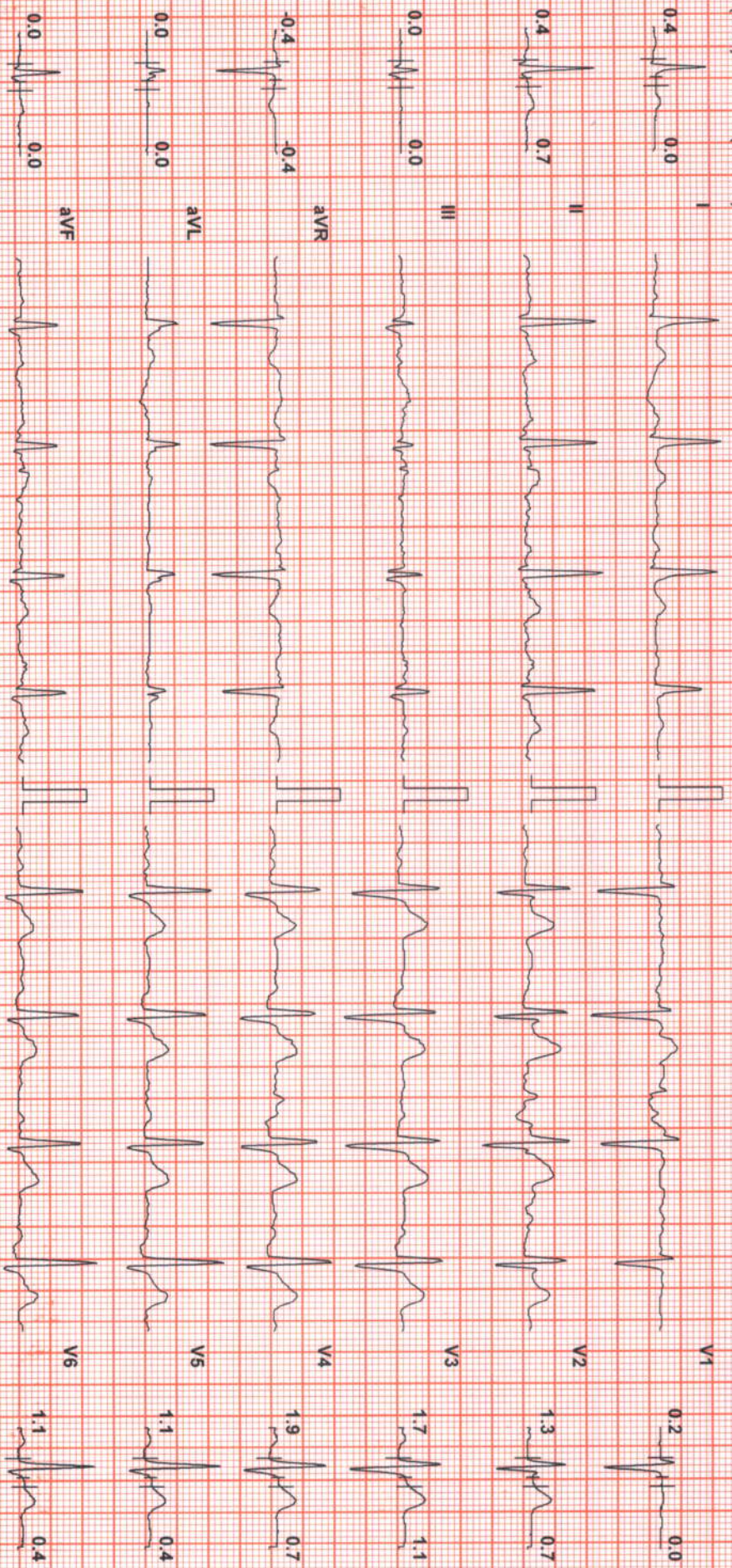


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Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R: 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Standard V 4.52



SUBURBAN DIAGNOSTICS PVT. LTD.

MR SHARIQUE AKHTAR (35 M)

ID: 2219901225

Date: 18-Jul-22

Exec Time : 0 m 0 s

Stage Time : 0 m 32 s

HR: 90 bpm

Protocol: Bruce

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 166 bpm)

B.P: 110/70

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

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

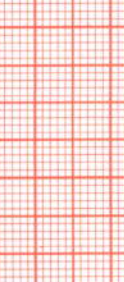
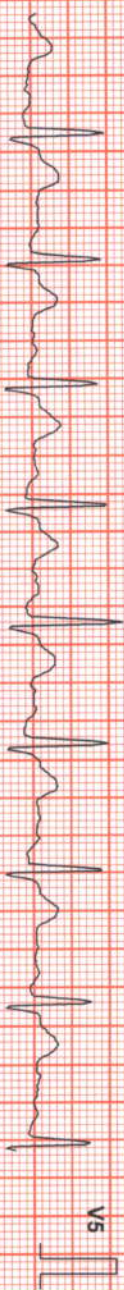
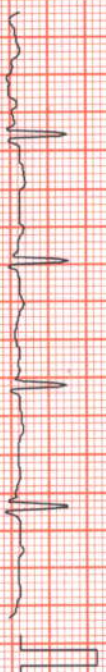
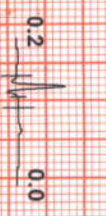
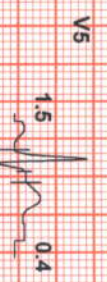
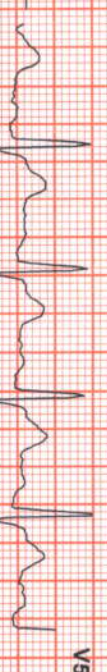
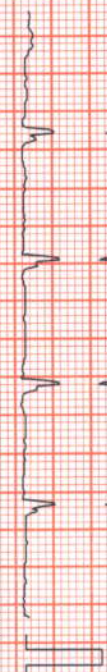
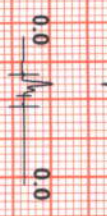
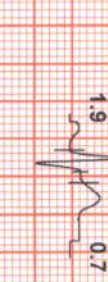
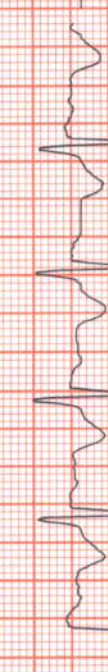
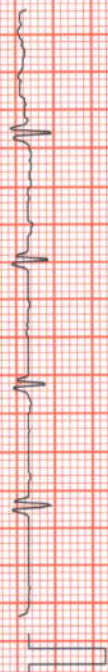
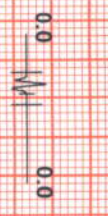
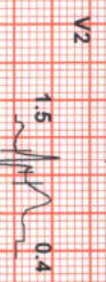
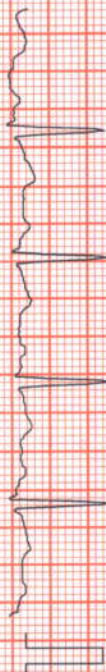
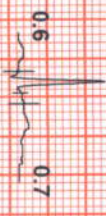
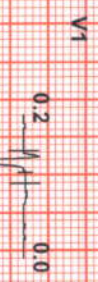


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Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R: 60 ms

J = R: 60 ms

Post J = J: 60 ms

Schiller Spardan V4.52



SUBURBAN DIAGNOSTICS PVT. LTD.

MR SHARIQUE AKHTAR (35 M)

ID: 2219901225

Date: 18-Jul-22

Exec Time : 0 m 0 s

Stage Time : 0 m 33 s

HR: 74 bpm

Protocol: Bruce

Stage: Hyperventilation

Speed: 0 mph

Grade: 0%

(THR: 166 bpm)

B.P: 110/70

ST Level (mm)

ST Slope (mV/s)

0.6

0.2

-0.4

0.0

0.6

1.7

0.4

1.1

0.0

1.7

0.0

1.4

-0.8

1.7

-0.4

1.1

0.2

1.5

-0.4

0.7

0.2

0.8

0.0

0.4

0.0

0.4

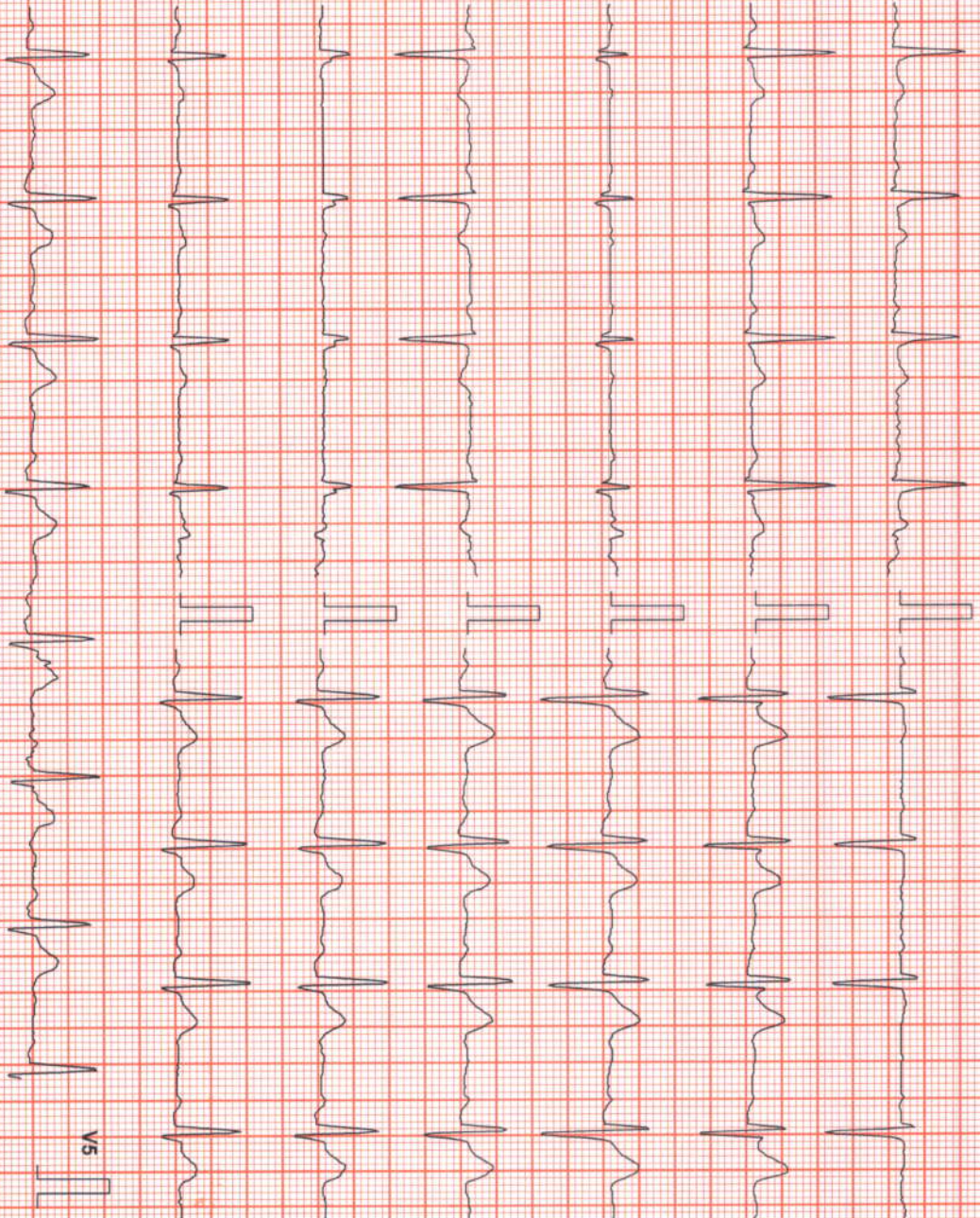


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

Isq = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Standard V 4.32



MR SHARIQUE AKHTAR (35 M)

ID: 2219901225

Date: 18-Jul-22

Exec Time : 3 m 0 s

Stage Time : 3 m 0 s

HR: 105 bpm

Protocol: Bruce

Stage: 1

Speed: 1.7 mph

Grade: 10 %

(THR: 166 bpm)

B.P.: 110/70

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

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

0.4 0.4

0.2 -0.4

0.8 0.4

1.1 0.4

0.4 0.4

1.9 2.1

-0.6 -0.4

0.8 1.1

-0.2 0.0

1.5 1.1

0.4 0.4

1.1 0.7

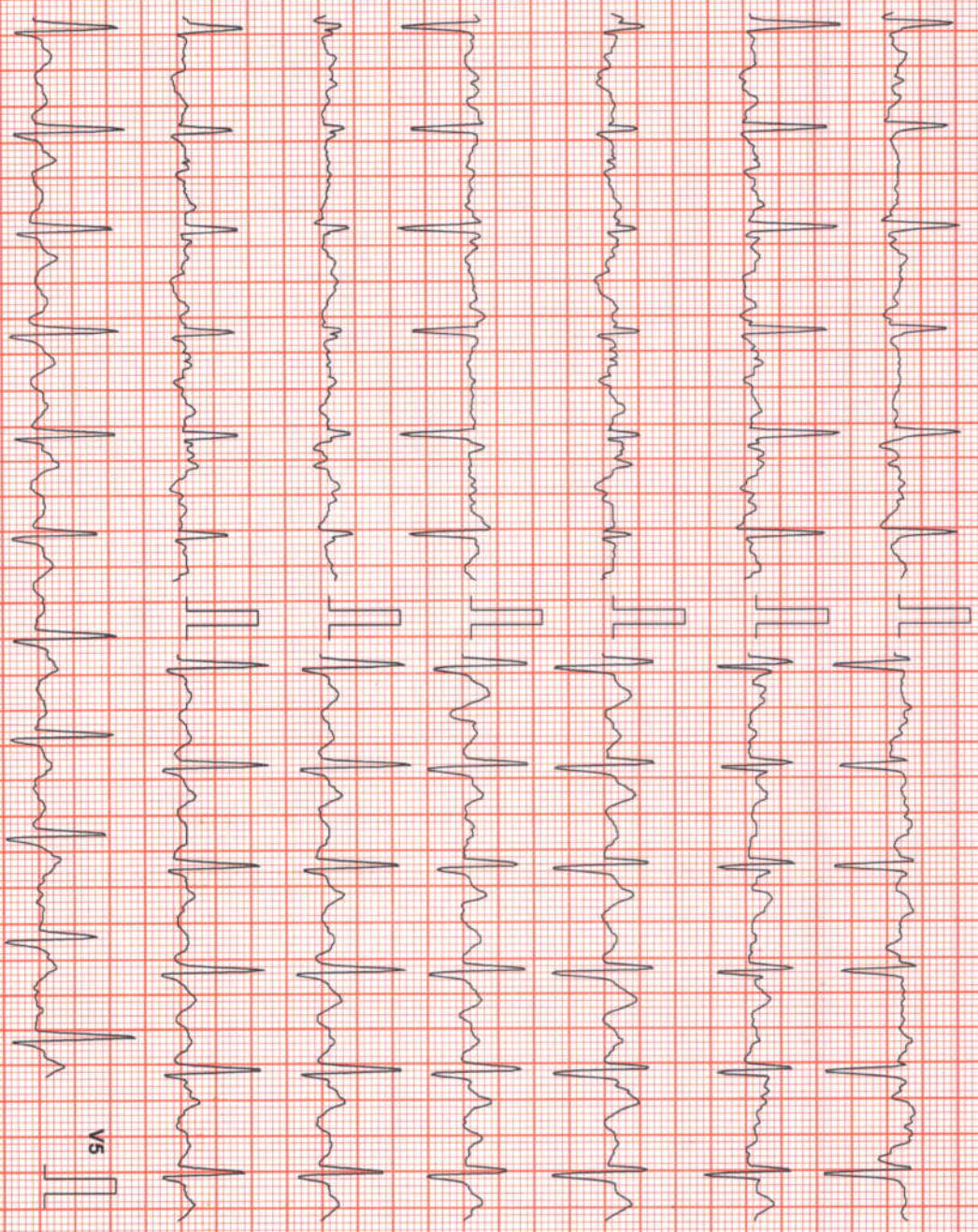


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Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

Iso = R 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Standard V 4.52



SUBURBAN DIAGNOSTICS PVT. LTD.

MR SHARIQUE AKHTAR (35 M)

ID: 2219901225

Date: 18-Jul-22

Exec Time: 6 m 0 s

Stage Time: 3 m 0 s

HR: 121 bpm

Protocol: Bruce

Stage: 2

Speed: 2.5 mph

Grade: 12 %

(THR: 166 bpm)

B.P: 120/70

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

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

0.2 0.4

-0.8 -1.8

I

V1

0.6 0.7

0.8 0.4

II

V2

0.2 0.0

2.1 1.8

III

V3

-0.4 -0.4

1.9 2.1

aVR

V4

0.0 0.0

1.7 1.4

aVL

V5

0.6 0.7

1.1 1.1

aVF

V6

Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

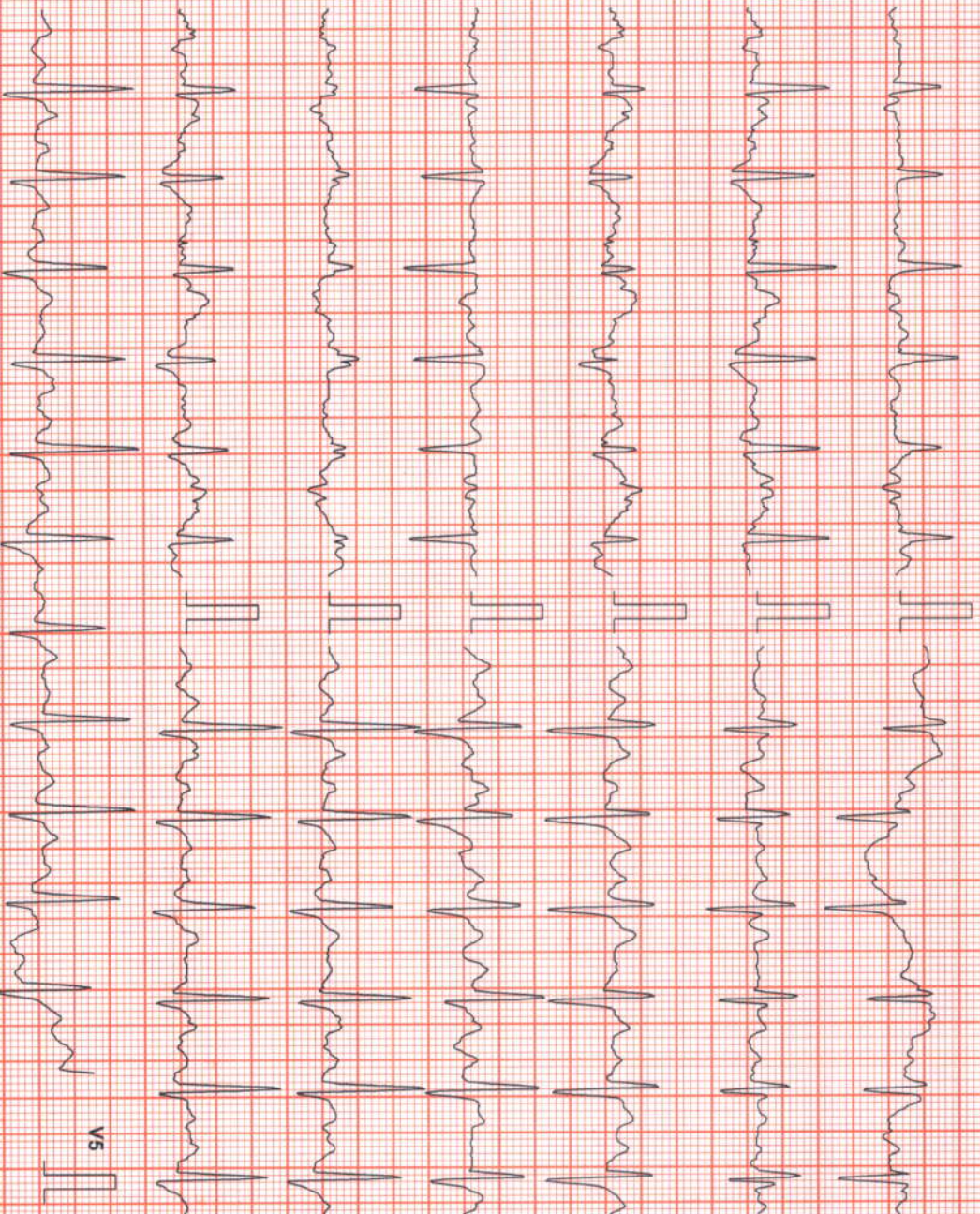
Amp: 10 mm

ISO = R: 60 ms

J = R + 50 ms

Post J = J + 80 ms

Schiller Spandax V 4 52





SUBURBAN DIAGNOSTICS PVT. LTD.

MR SHARIQUE AKHTAR (35 M)

ID: 2219901225

Date: 18-Jul-22

Exec Time : 9 m 0 s

Stage Time : 3 m 0 s

HR: 137 bpm

Protocol: Bruce

Stage: 3

Speed: 3.4 mph

Grade: 14 %

(THR: 166 bpm)

B.P: 140 / 70

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

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

0.6 0.7

0.8 0.7

0.8 1.4

1.1 1.1

0.4 0.7

1.9 2.5

-0.6 -0.7

1.9 3.2

0.0 0.0

1.5 2.1

0.8 1.1

1.1 1.8

I

V1

II

V2

III

V3

aVR

V4

aVL

V5

aVF

V6

V5

Chart Speed: 25 mm/sec
Schiller Spindan V 4 52

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

Isd = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms



SUBURBAN DIAGNOSTICS PVT. LTD.

MR SHARIQUE AKHTAR (35 M)

ID: 2219901225

Date: 18-Jul-22

Exec Time : 12 m 0 s Stage Time : 3 m 0 s

HR: 169 bpm

Protocol: Bruce

Stage: 4

Speed: 4.2 mph

Grade: 16 %

(THR: 166 bpm)

B.P: 170 / 70

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

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

0.2 0.7

0.6 0.0

0.4 1.8

0.8 1.1

0.2 0.7

2.3 3.5

-0.4 -1.4

1.9 3.5

0.0 0.0

1.5 3.2

0.4 1.1

1.3 2.8

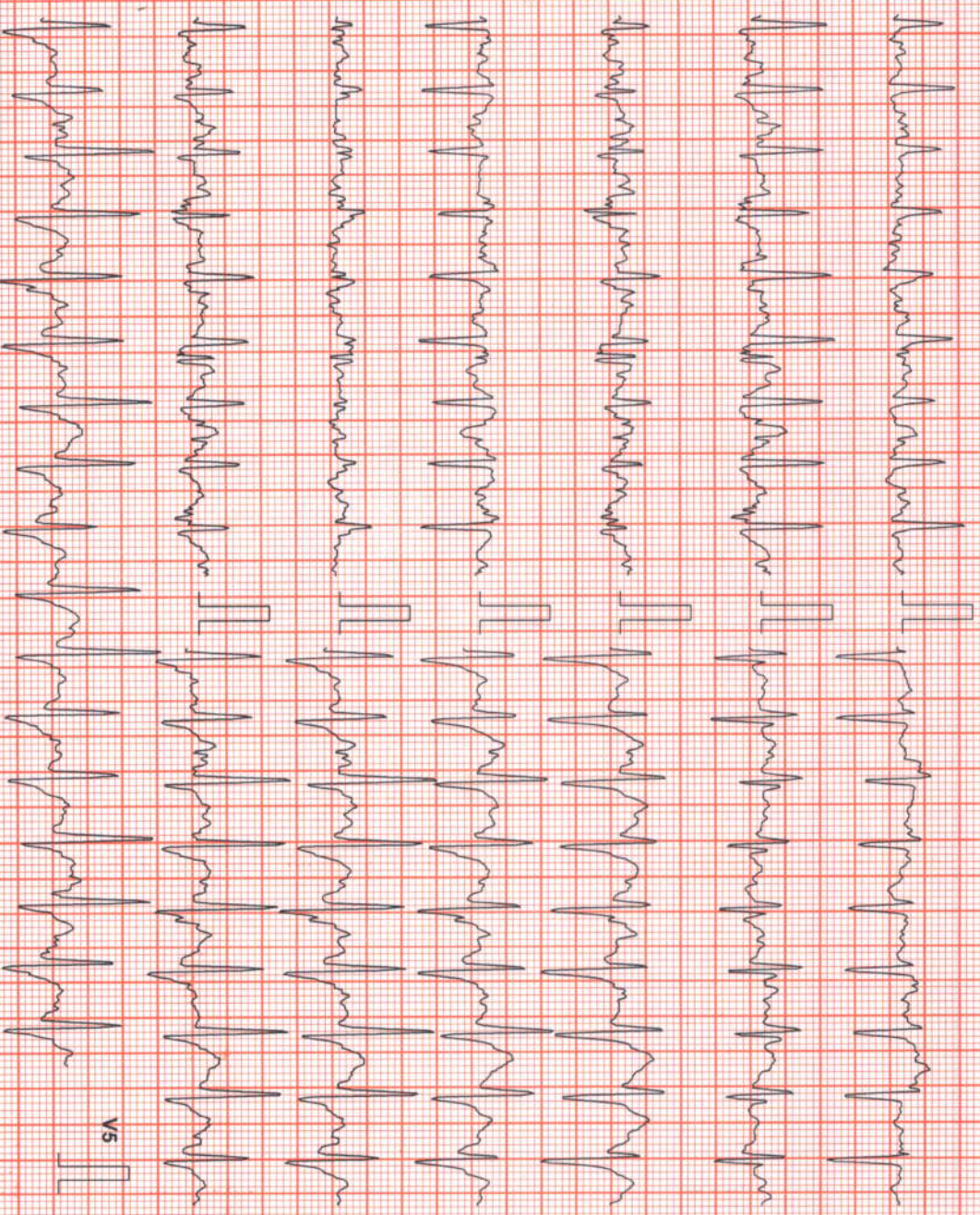


Chart Speed: 25 mm/sec
Schiller Spandax V 4.52

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms J = R + 60 ms Post J = J + 60 ms



SUBURBAN DIAGNOSTICS PVT. LTD.

MR SHARIQUE AKHTAR (35 M)

ID: 2219901225

Date: 18-Jul-22

Exec Time : 12 m 2 s Stage Time : 0 m 2 s

HR: 169 bpm

Protocol: Bruce

Stage: Peak Ex

Speed: 5 mph

Grade: 18 %

(THR: 166 bpm)

B.P: 170 / 70

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

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

0.2 1.1

0.2 -0.4

0.8 2.1

1.1 1.4

0.4 0.7

2.5 3.5

-0.4 -1.4

2.1 3.5

-0.2 -0.4

1.5 3.5

0.6 1.4

1.1 2.8



Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

90° = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Standard V 4.52



SUBURBAN DIAGNOSTICS PVT. LTD.

MR SHARIQUE AKHTAR (35 M)

ID: 2219901225

Date: 18-Jul-22

Exec Time: 12 m 2 s

Stage Time: 0 m 43 s

HR: 126 bpm

Protocol: Bruce

Stage: Recovery(1)

Speed: 0 mph

Grade: 0 %

(THR: 166 bpm)

B.P: 170/70

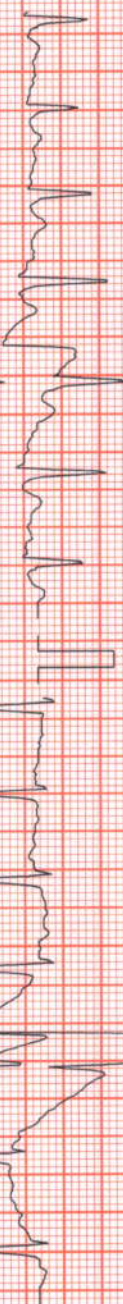
ST Level (mm)

ST Slope (mV/s)

ST Level (mm)

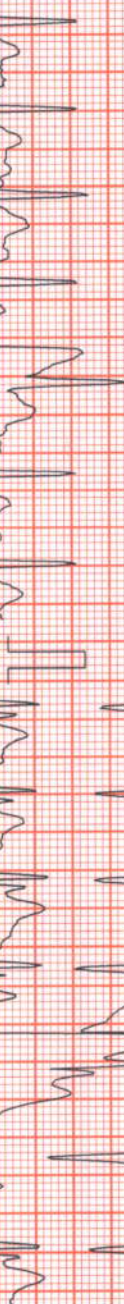
ST Slope (mV/s)

0.4 1.4



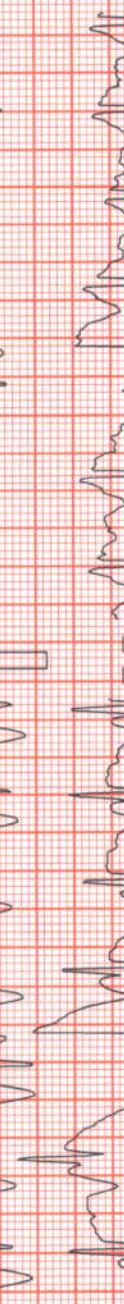
0.0 0.0

1.9 3.5



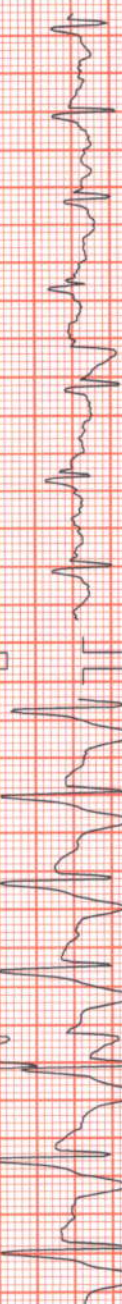
2.8 4.2

1.1 1.8



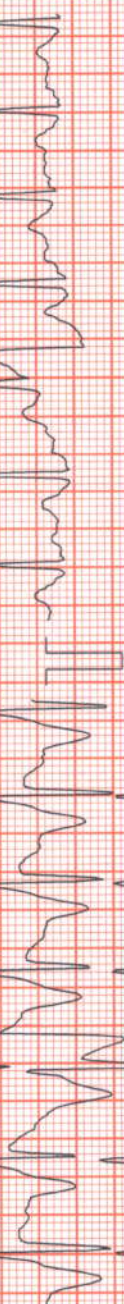
3.2 2.5

-1.3 -2.5



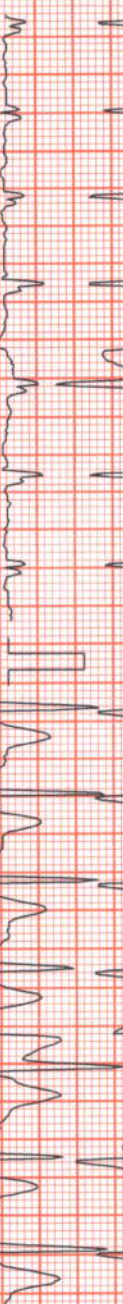
2.8 1.8

-0.2 -0.4



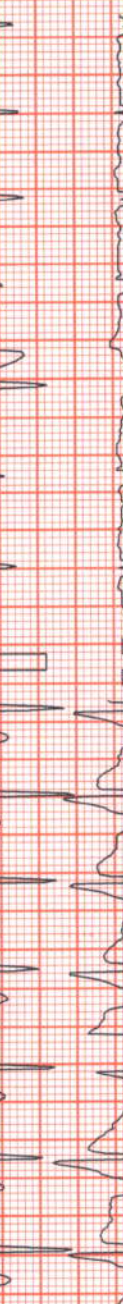
5.5 2.5

1.3 2.5



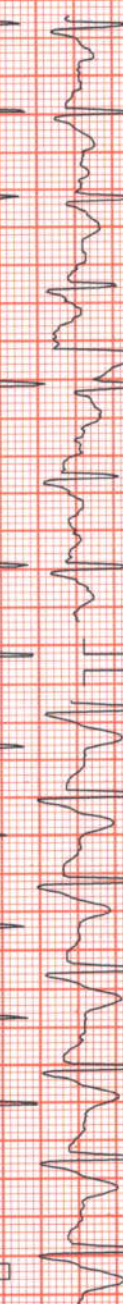
4.5 5.7

1.3 2.5



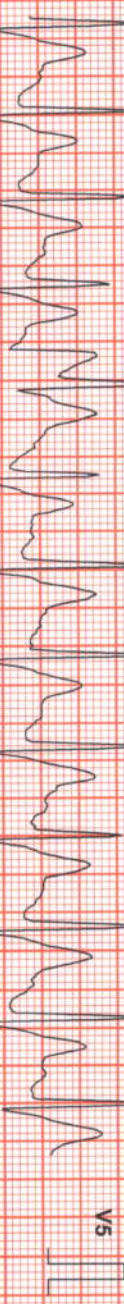
4.5 5.7

1.3 2.5



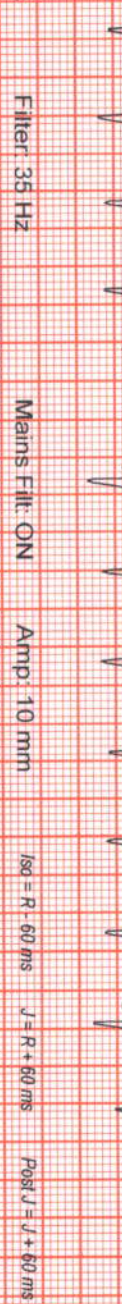
4.5 5.7

1.3 2.5



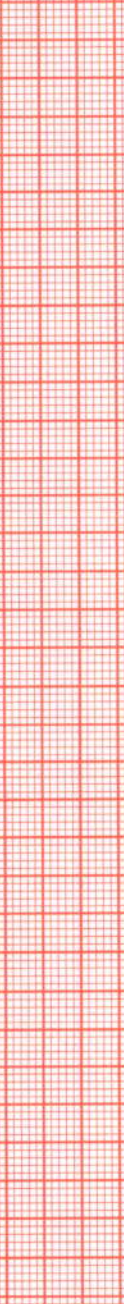
4.5 5.7

1.3 2.5



4.5 5.7

1.3 2.5



4.5 5.7

1.3 2.5



4.5 5.7

Chart Speed: 25 mm/sec
Schiller Spardan V 4.82

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Isd = R - 60 ms

J = R + 60 ms

Post V = J + 60 ms



SUBURBAN DIAGNOSTICS PVT. LTD.

MR SHARIQUE AKHTAR (35 M)

ID: 2219901225

Date: 18-Jul-22

Exec Time : 12 m 2 s Stage Time : 1 m 0 s

HR: 114 bpm

Protocol: Bruce

Stage: Recovery(1)

Speed: 0 mph

Grade: 0%

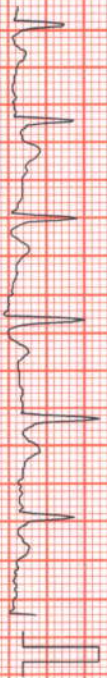
(THR: 166 bpm)

B.P: 150 / 70

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

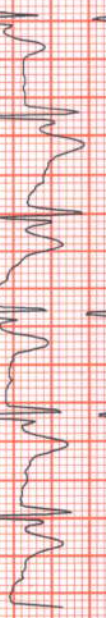
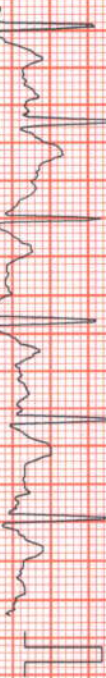
ST Level (mm) ST Slope (mV/s)

0.6 1.1



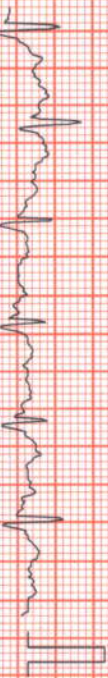
0.8 0.4

1.7 2.8



3.4 4.2

0.6 1.1



3.2 2.5

-1.1 -2.1



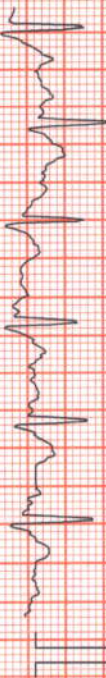
2.8 1.8

0.0 0.0



5.5 2.5

1.1 1.8



4.0 5.7

Chart Speed: 25 mm/sec
Schiller Spandan V4.52

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

Isr = R: 60 ms

J = R + 60 ms

Post J = J + 60 ms



SUBURBAN DIAGNOSTICS PVT. LTD.

MR SHARIQUE AKHTAR (35 M)

ID: 2219901225

Date: 18-Jul-22

Exec Time : 12 m 2 s

Stage Time : 0 m 56 s

HR: 100 bpm

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph

Grade: 0%

(THR: 166 bpm)

B.P: 150/70

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

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

0.6 1.1

0.6 0.0

1.3 1.8

2.3 2.5

0.6 1.1

4.9 5.7

-0.8 -1.4

4.5 5.3

0.0 0.0

3.6 4.6

0.8 1.1

2.5 3.5

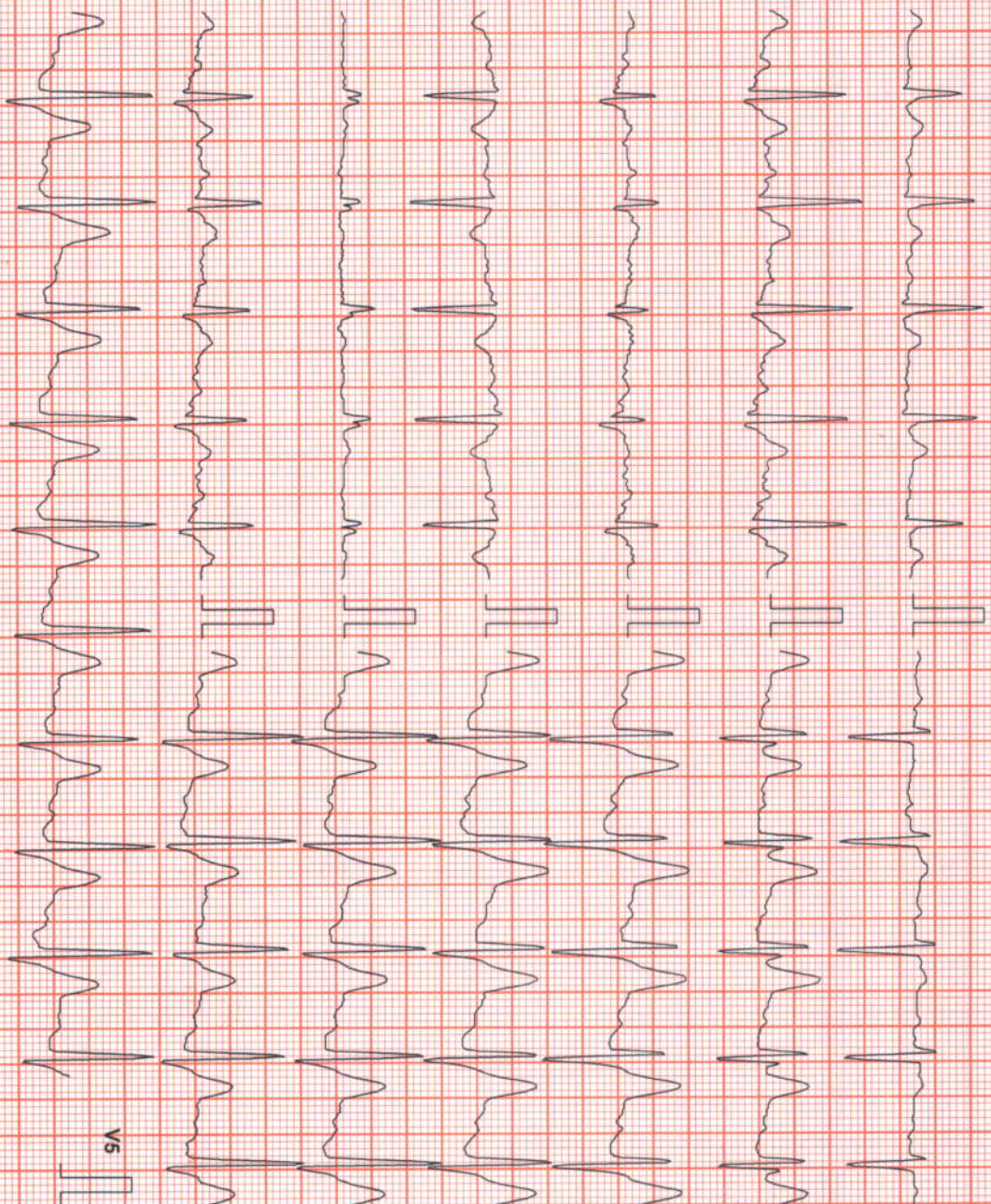


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms

J - R + 60 ms

Post J = J + 60 ms

Schiller Spardan V4.52



SUBURBAN DIAGNOSTICS PVT. LTD.

MR SHARIQUE AKHTAR (35 M)

ID: 2219901225

Date: 18-Jul-22

Exec Time : 12 m 2 s Stage Time : 1 m 0 s

HR: 101 bpm

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 166 bpm)

B.P: 150 / 70

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

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

0.6 1.1



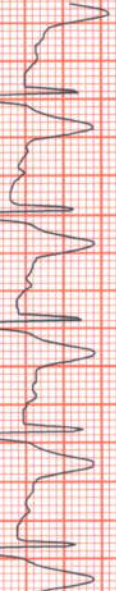
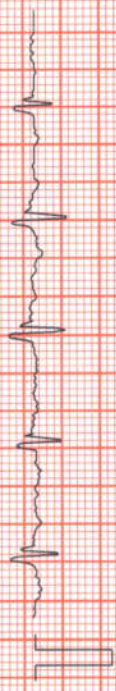
0.6 0.4

1.3 2.1



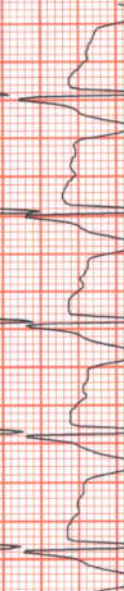
2.8 2.5

0.2 0.4



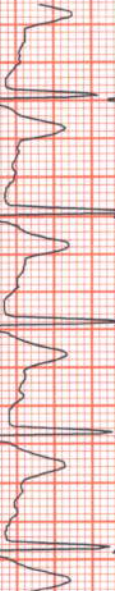
5.1 5.7

-1.1 -1.8



4.7 5.7

0.0 0.0



3.8 4.6

0.6 1.1



2.8 3.5

Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Isd = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spandan V 4.52



SUBURBAN DIAGNOSTICS PVT. LTD.

MR SHARIQUE AKHTAR (35 M)

ID: 2219901225

Date: 18-Jul-22

Exec Time : 12 m 2 s Stage Time : 0 m 7 s

HR: 101 bpm

Protocol: Bruce

Stage: Recovery(3)

Speed: 0 mph

Grade: 0%

(THR: 166 bpm)

B.P: 130/70

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

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

0.8 1.4

0.6 0.4

1.3 2.1

3.0 2.8

0.4 0.4

5.1 5.7

-1.1 -1.8

4.5 5.3

0.0 0.0

3.8 4.6

0.8 1.1

2.8 3.5

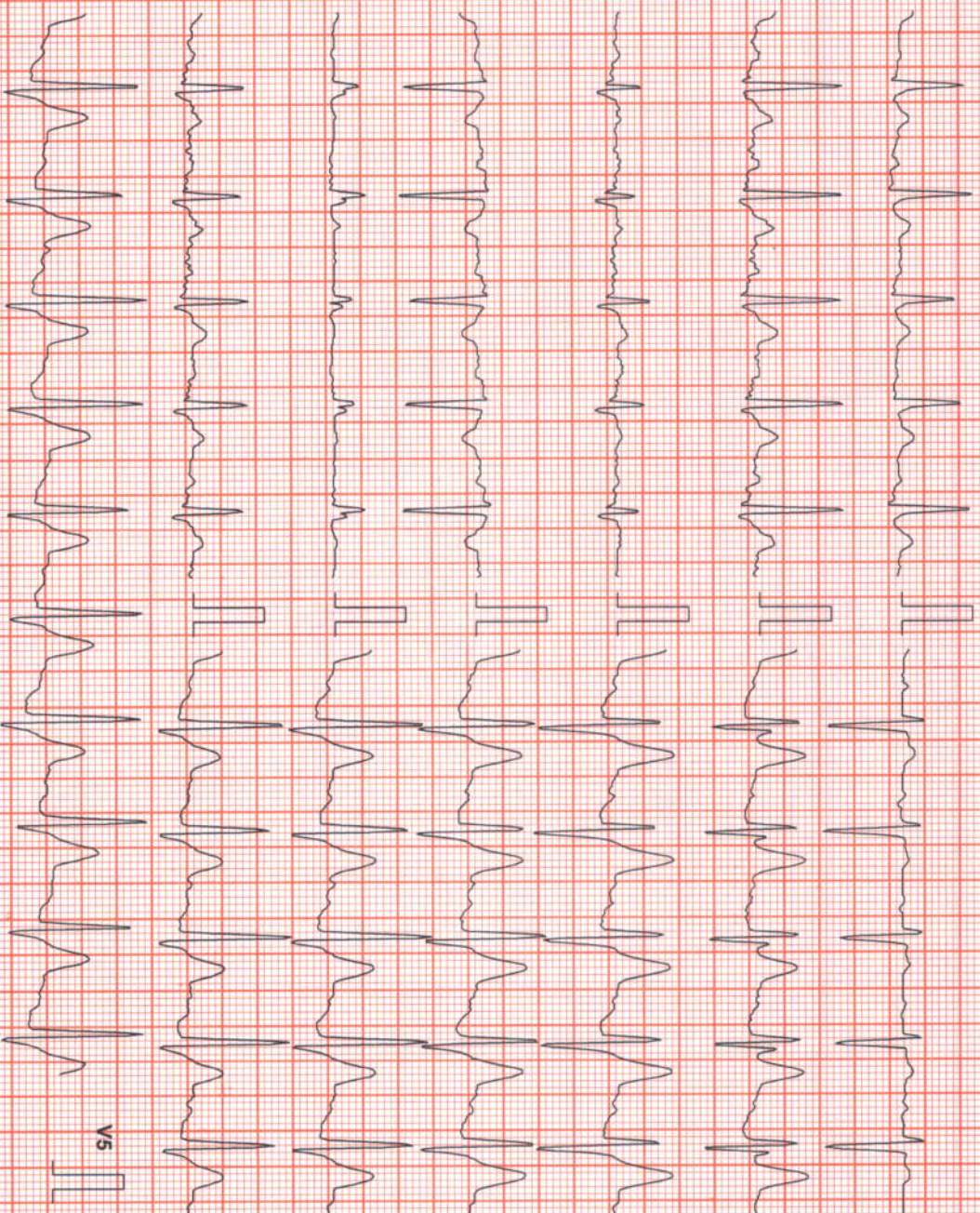


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schlier Spandan V 4.52