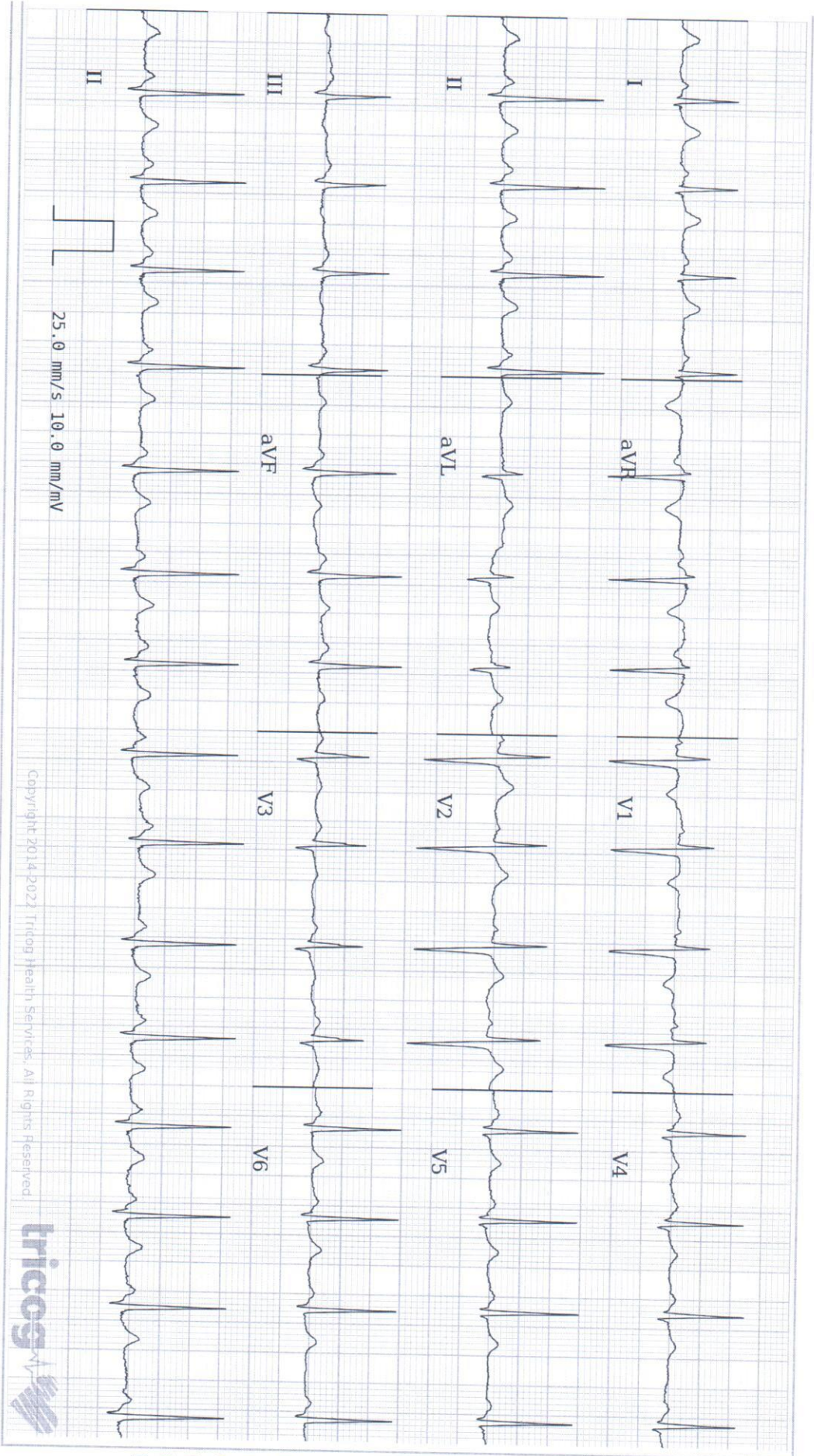


**SUBURBAN DIAGNOSTICS - SWARGATE, PUNE**

Patient Name: CHAVAN SNEHAL GAJANAN  
Patient ID: 2231622015

Date and Time: 12th Nov 22 11:45 AM



Age **33** 5 5  
years months days

Gender **Male**

Heart Rate **94bpm**

Patient Vitals

BP: 138/88 mmHg

Weight: 59 kg

Height: 148 cm

Pulse: NA

Spo2: NA

Resp: NA

Others:

**Measurements**

QRSD: 88ms

QT: 334ms

QTc: 417ms

PR: 120ms

P-R-T: 57° 63° 28°

REPORTED BY

*[Signature]*

DR. ISHWARLAL BAMB  
M.B.B.S MD (MEDICINE)  
cardiologist  
39452

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

**SUBURBAN DIAGNOSTICS PVT. LTD.**  
Scrapp Centre, Opp. Pentagon Mall,  
Near Panchami Hotel,  
Shahu College Road, Pune-411 009.

Tel: 020-41094509

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 Center ,Pune

**Patient Details**                      **Date:** 12-Nov-22                      **Time:** 12:14:26 PM  
**Name:** CHAVAN SNEHAL ID: 2231622015  
**Age:** 33 y                      **Sex:** F                      **Height:** 148 cms                      **Weight:** 59 Kgs  
**Clinical History:** NO

**Medications:** NO

### Test Details

**Protocol:** Bruce                      **Pr.MHR:** 187 bpm                      **THR:** 168 (90 % of Pr.MHR) bpm  
**Total Exec. Time:** 5 m 5 s                      **Max. HR:** 161 (86% of Pr.MHR) bpm                      **Max. Mets:** 7.00  
**Max. BP:** 158 / 90 mmHg                      **Max. BP x HR:** 25438 mmHg/min                      **Min. BP x HR:** 8712 mmHg/min  
**Test Termination Criteria:** Target HR attained

### Protocol Details

Stage Name	Stage Time (min : sec)	Mets	Speed (mph)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
Supine	0 : 28	1.0	0	0	99	138 / 88	-0.64 aVR	1.77 II
Standing	0 : 4	1.0	0	0	104	138 / 88	-0.64 aVR	1.42 II
Hyperventilation	0 : 9	1.0	0	0	112	138 / 88	-0.64 aVR	1.42 II
1	3 : 0	4.6	1.7	10	150	150 / 88	-3.82 V4	4.60 V4
Peak Ex	2 : 5	7.0	2.5	12	161	158 / 90	-3.82 V4	4.60 V4
Recovery(1)	1 : 0	1.8	1	0	130	158 / 90	-1.49 III	3.54 II
Recovery(2)	1 : 0	1.0	0	0	117	158 / 90	-1.06 aVR	3.89 II
Recovery(3)	1 : 0	1.0	0	0	112	158 / 90	-1.27 aVR	2.12 II
Recovery(4)	0 : 50	1.0	0	0	110	158 / 90	-0.64 II	1.42 I

### Interpretation

Good Effort Tolerance.  
 No Significant ST T Changes as compared to Baseline.  
 No Chest Pain / Arrhythmias noted during the test.  
 Stress Test is Negative For Stress Induced Ischemia

Disclaimer : Negative Stress test dose not rule out coronary artery Diseases  
 Positive Stress Test is Suggestive but not confirmatory of Coronary Artery  
 Disease.  
 Hence Clinical Correlation is mandatory.

Dr. I. U. BAMB  
 M.B.B.S., M.D. (Medicine)  
 Reg. No. 39452



**Doctor: I U BAMB**

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



**CHAVAN SNEHAL (33 F)**

**Suburban Diagnostics Center, Pune**

**Test Report**

Protocol: Bruce

ID: 2231622015

Date: 12-Nov-22

Exec Time: 0 m 0 s

HR: 103 bpm

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 168 bpm)

B.P: 138 / 88

ST Level (mm)

ST Slope (mV/s)

ST Level (mm)

ST Slope (mV/s)

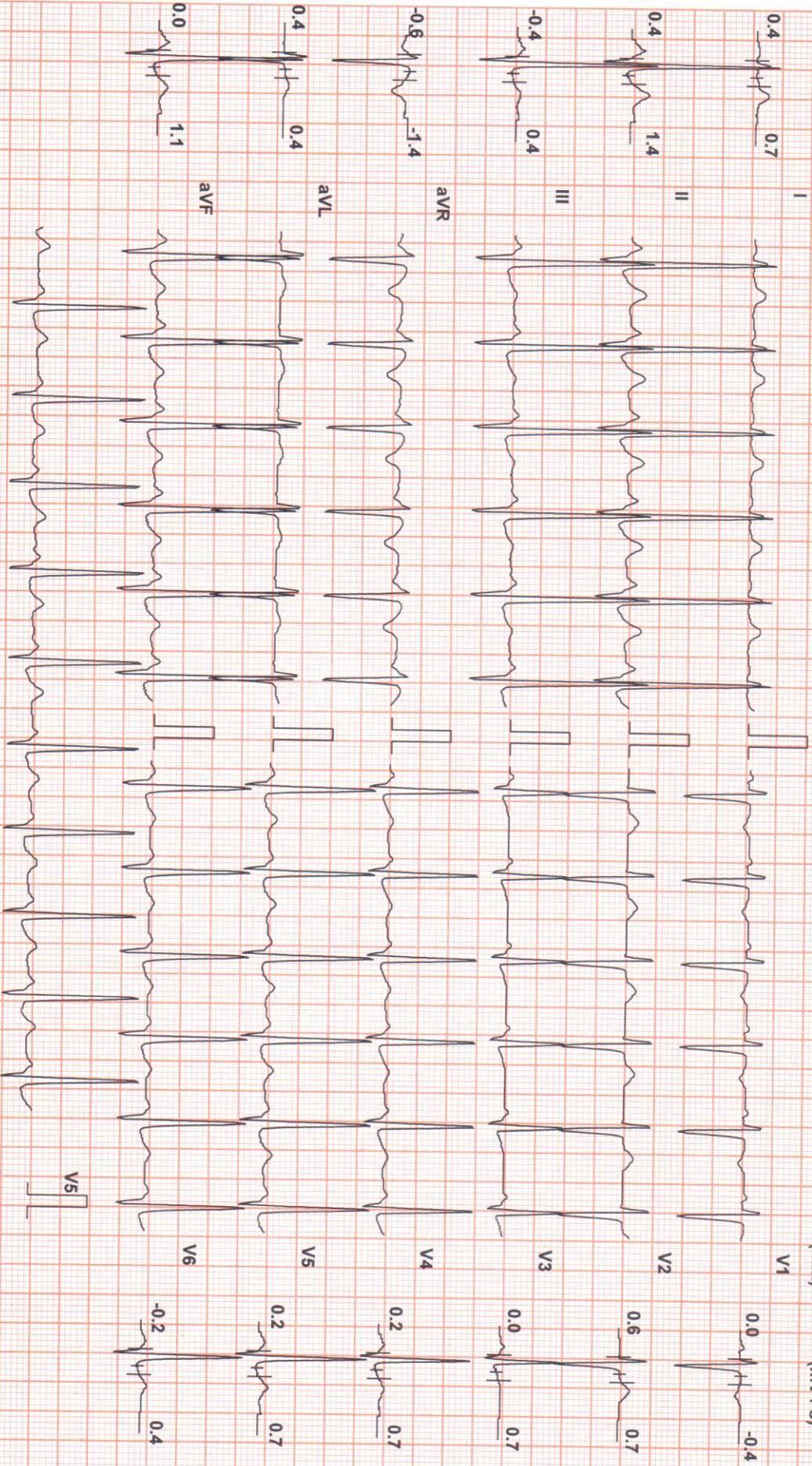


Chart Speed: 25 mm/sec  
Schiller Spandam V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



CHAVAN SNEHAL (33 F)

Suburban Diagnostics Center, Pune

Test Report

Protocol: Bruce

ID: 2231622015

Date: 12-Nov-22

Exec Time: 0 m 0 s

Stage Time: 0 m 26 s

HR: 103 bpm

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 168 bpm)

B.P: 138 / 88

ST Level (mm)

ST Level (mm)

ST Slope (mV/s)

ST Slope (mV/s)

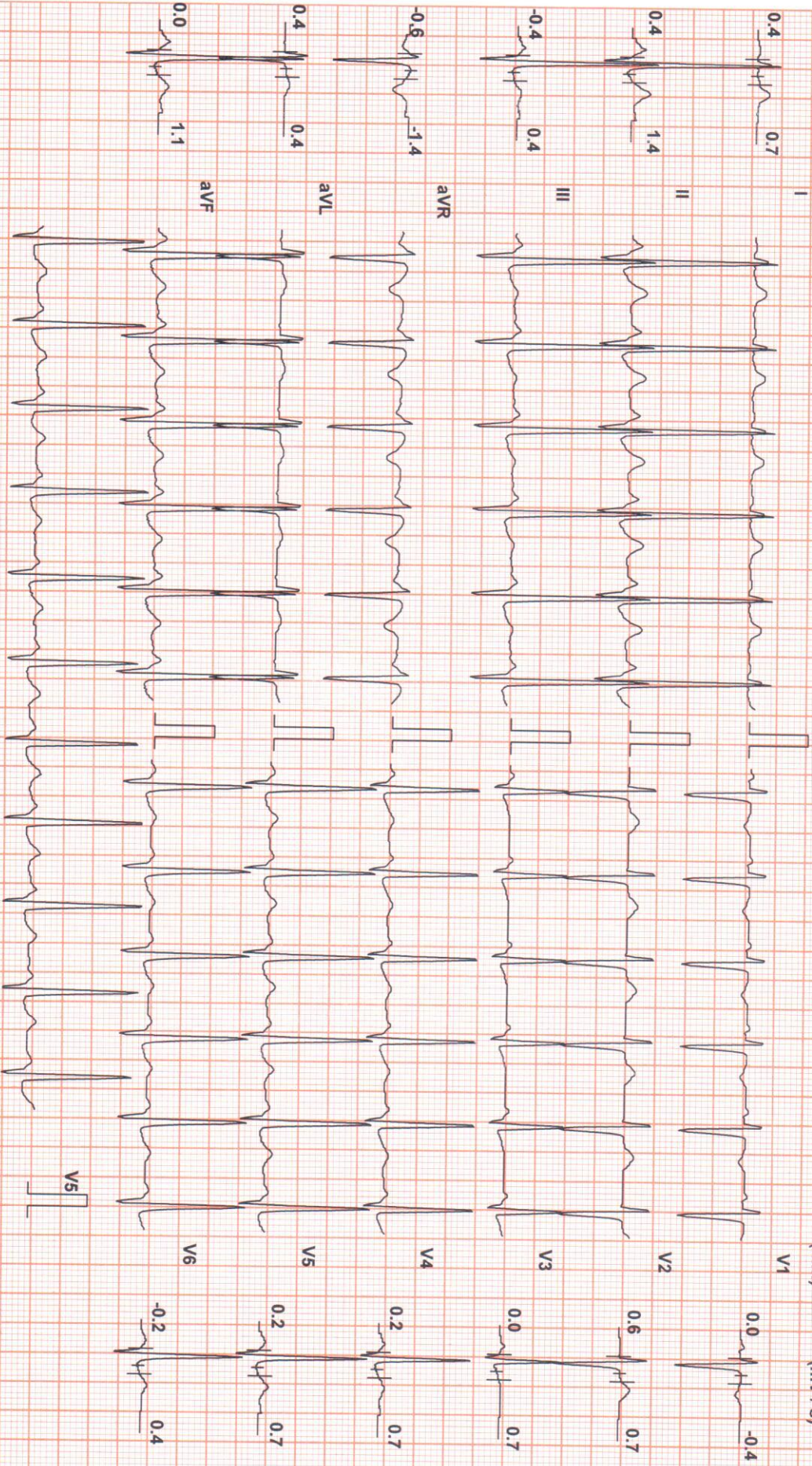


Chart Speed: 25 mm/sec  
Schiller Spardan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



**CHAVAN SNEHAL (33 F)**

**Suburban Diagnostics Center, Pune**

**Test Report**

ID: 2231622015

Date: 12-Nov-22

Exec Time: 0 m 0 s

Stage Time: 0 m 3 s

HR: 111 bpm

Protocol: Bruce

Stage: Hyperventilation

Speed: 0 mph

Grade: 0 %

(THR: 168 bpm)

B.P: 138 / 88

ST Level (mm)

ST Slope (mV / s)

ST Level (mm)

ST Slope (mV / s)

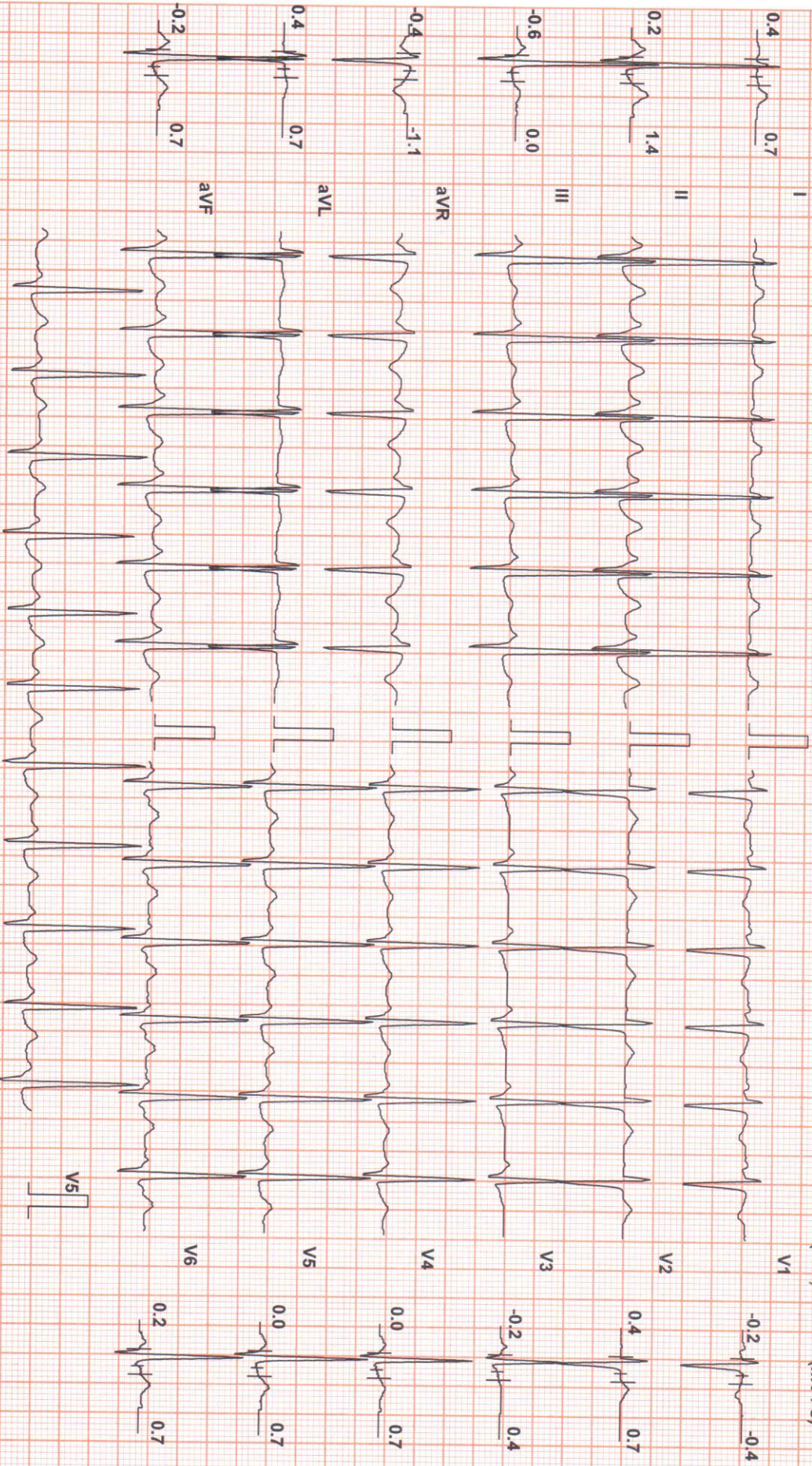


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post V = J + 60 ms

Linked Median

Schiller Spandau V 4.7



**CHAVAN SNEHAL (33 F)**

**Suburban Diagnostics Center, Pune**

**Test Report**

Protocol: Bruce

ID: 2231622015

Date: 12-Nov-22

Exec Time : 2 m 54 s Stage Time : 2 m 54 s

HR: 150 bpm

Stage: 1

Speed: 1.7 mph

Grade: 10 %

(THR: 168 bpm)

B.P: 150 / 88

ST Level (mm)      ST Slope (mV/s)

ST Level (mm)      ST Slope (mV/s)

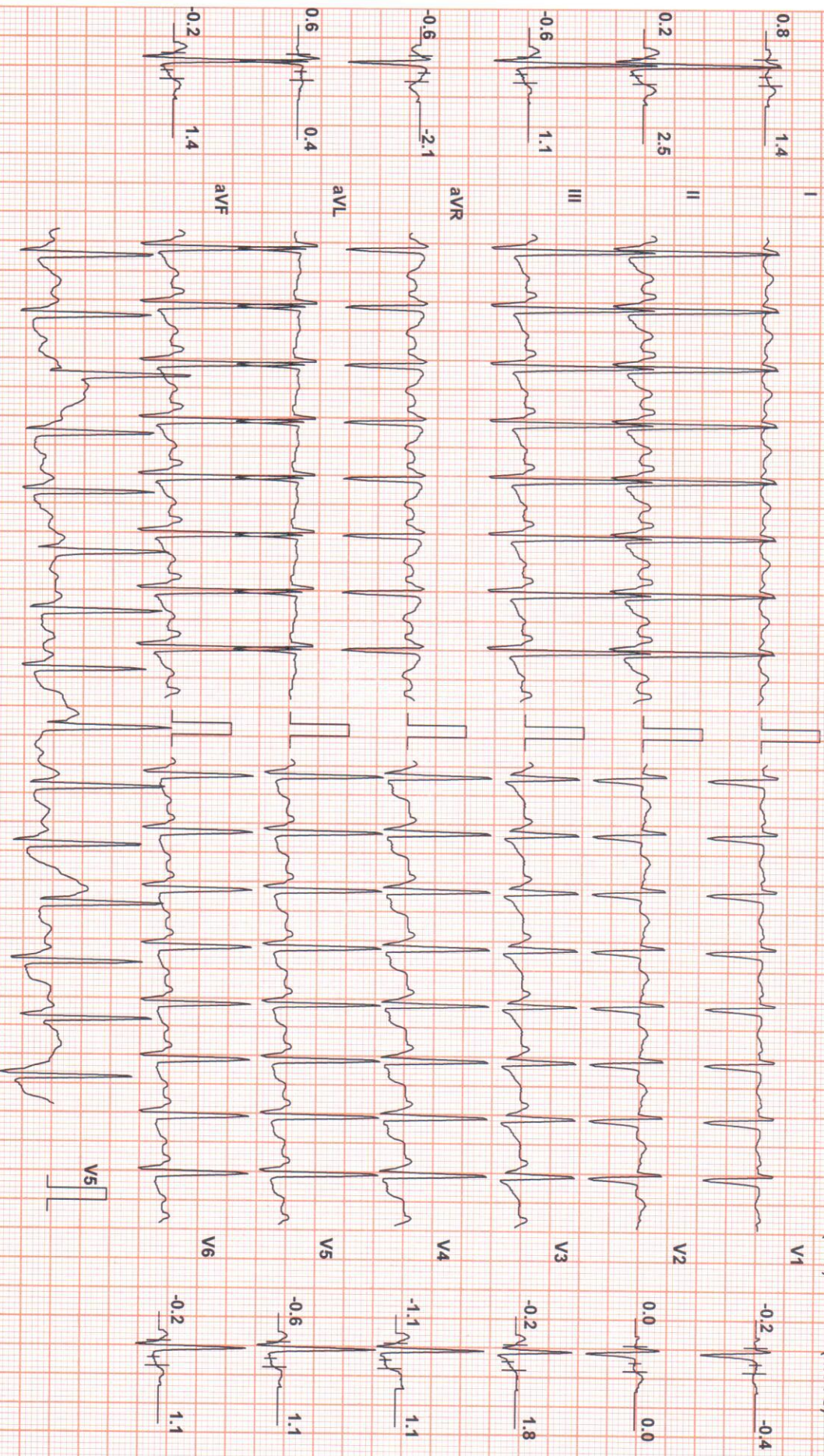


Chart Speed: 25 mm/sec  
Schiller Spandem V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



**CHAVAN SNEHAL (33 F)**

**Suburban Diagnostics Center, Pune**

**Test Report**

Protocol: Bruce

ID: 2231622015

Date: 12-Nov-22

Exec Time: 4 m 59 s Stage Time: 1 m 59 s HR: 161 bpm

Stage: Peak Ex

Speed: 2.5 mph

Grade: 12 %

(THR: 168 bpm)

B.P: 158 / 90

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

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

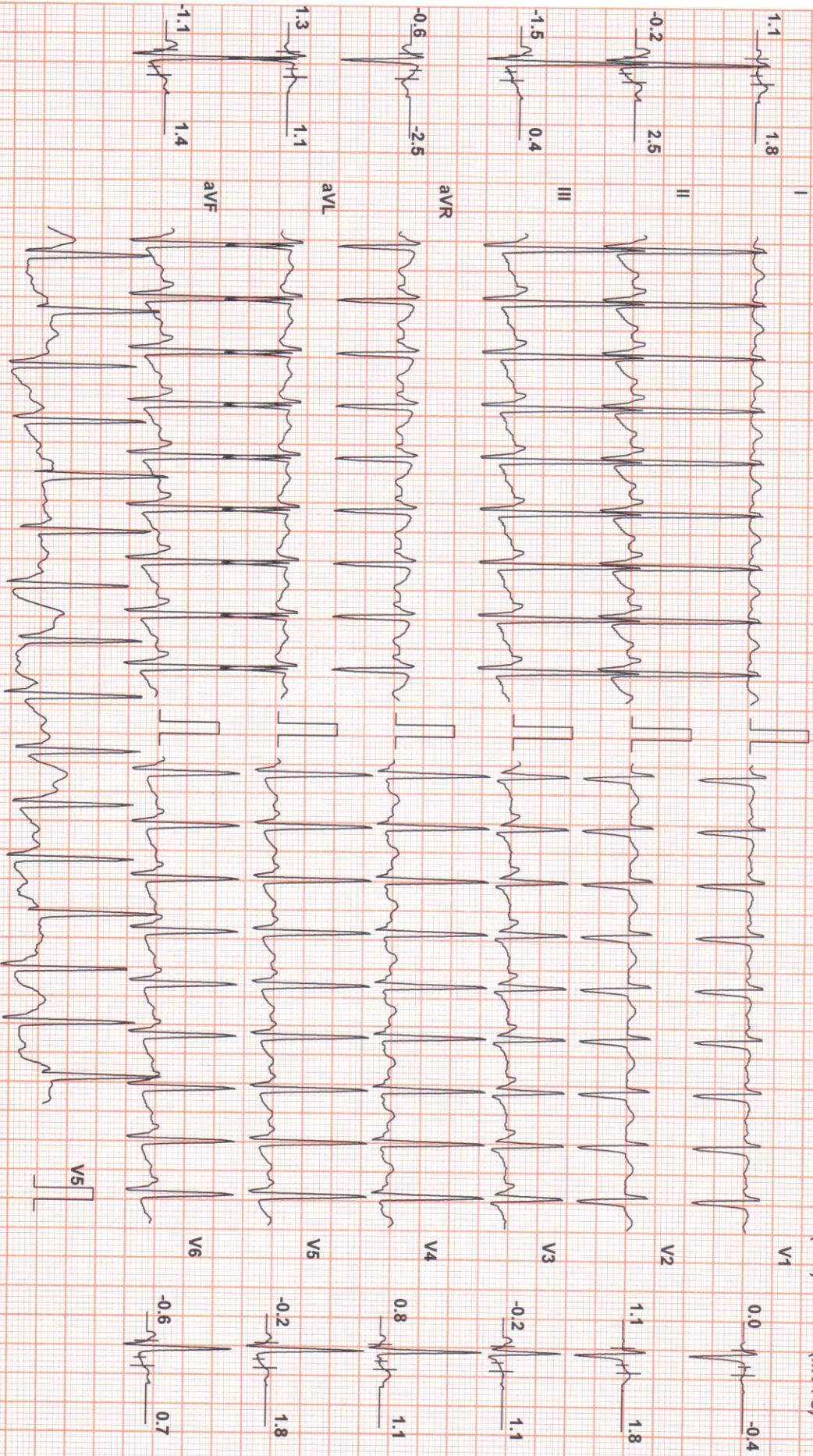


Chart Speed: 25 mm/sec  
Schiller Spandam V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post V = J + 60 ms

Linked Median



**CHAVAN SNEHAL (33 F)**

**Suburban Diagnostics Center, Pune**

**Test Report**

Protocol: Bruce

ID: 2231622015

Date: 12-Nov-22

Exec Time: 5 m 5 s

Stage Time: 0 m 54 s

HR: 132 bpm

Stage: Recovery(1)

Speed: 1 mph

Grade: 0 %

(THR: 168 bpm)

B.P: 158 / 90

ST Level (mm)      ST Slope (mV/s)

ST Level (mm)      ST Slope (mV/s)

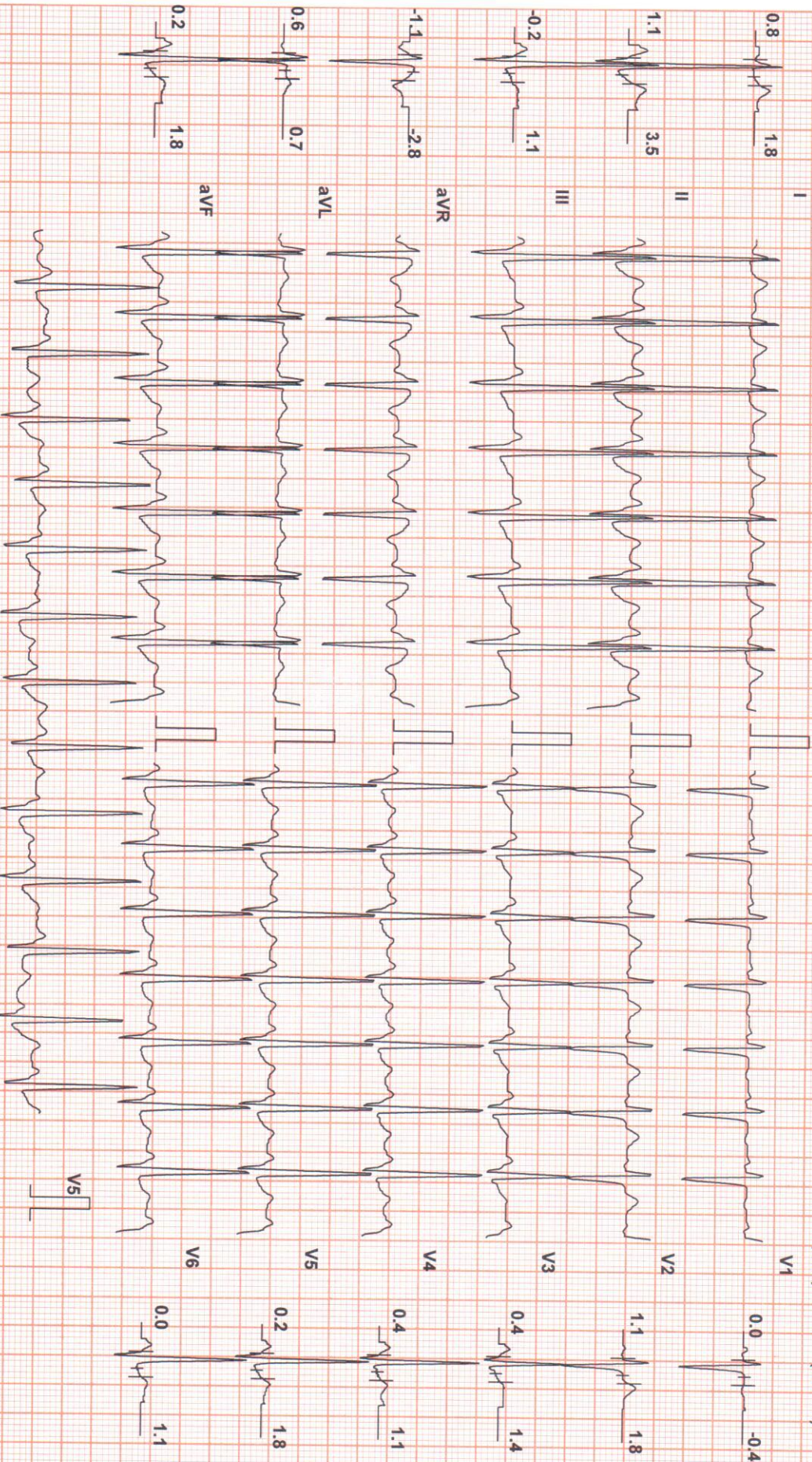


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Spandan V 4.7

Linked Median





**CHAVAN SNEHAL (33 F)**

**Suburban Diagnostics Center, Pune**

**Test Report**

Protocol: Bruce

ID: 2231622015

Date: 12-Nov-22

Exec Time : 5 m 5 s

Stage Time: 0 m 54 s

HR: 113 bpm

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 168 bpm)

B.P: 158 / 90

ST Level (mm)

ST Slope (mV / s)

ST Level (mm)

ST Slope (mV / s)

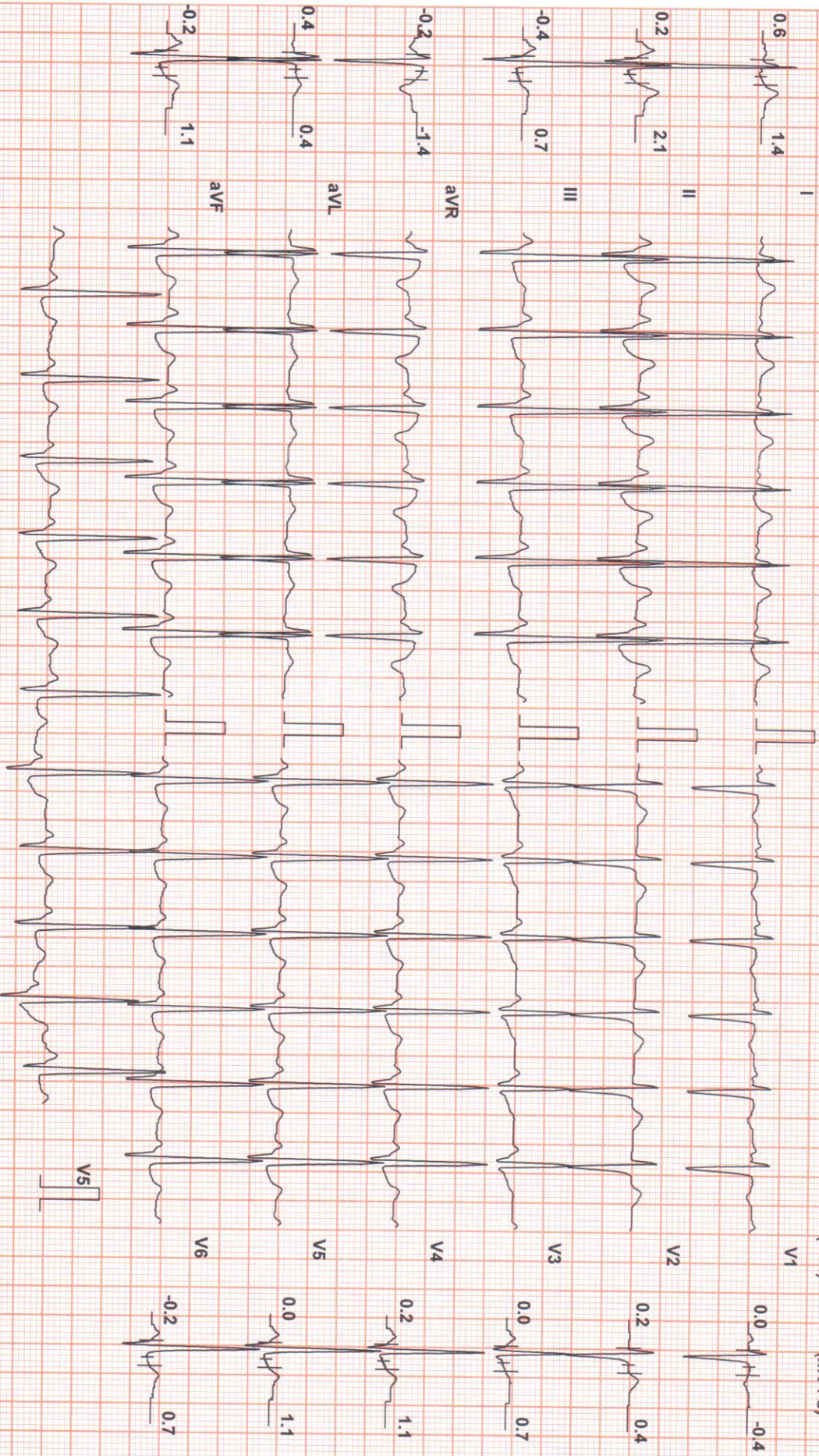


Chart Speed: 25 mm/sec  
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



**CHAVAN SNEHAL (33 F)**

**Suburban Diagnostics Center, Pune**

**Test Report**

Protocol: Bruce

ID: 2231622015

Date: 12-Nov-22

Exec Time : 5 m 5 s

Stage Time : 0 m 54 s **HR: 114 bpm**

Stage: Recovery(3)

Speed: 0 mph

Grade: 0 %

(THR: 168 bpm)

B.P: 158 / 90

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

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

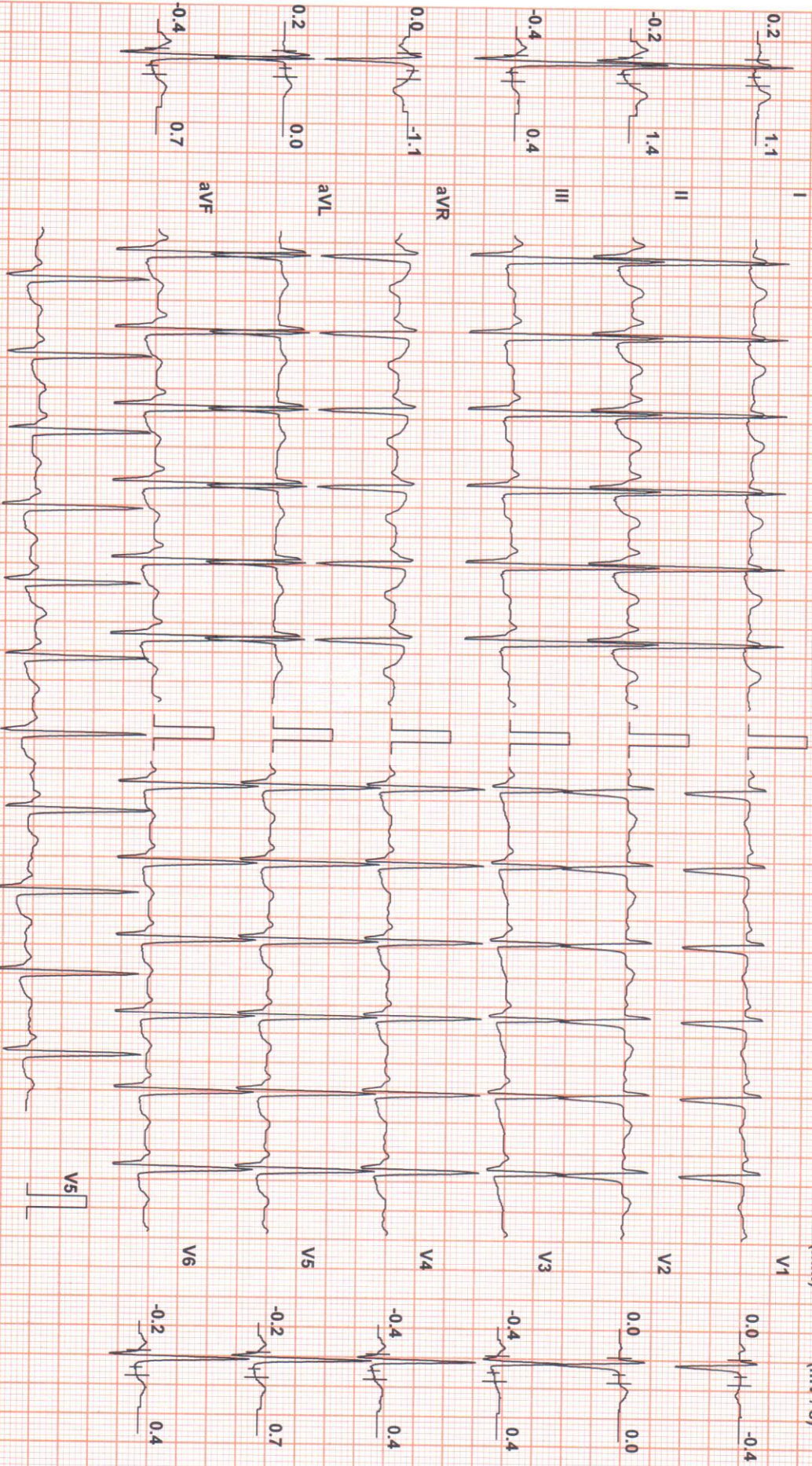


Chart Speed: 25 mm/sec  
Schiller Spandax V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



**CHAVAN SNEHAL (33 F)**

**Suburban Diagnostics Center, Pune**

**Test Report**

Protocol: Bruce

ID: 2231622015

Date: 12-Nov-22

Exec Time: 5 m 5 s

Stage Time: 0 m 44 s

HR: 107 bpm

Stage: Recovery(4)

Speed: 0 mph

Grade: 0 %

(THR: 168 bpm)

B.P: 158 / 90

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

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

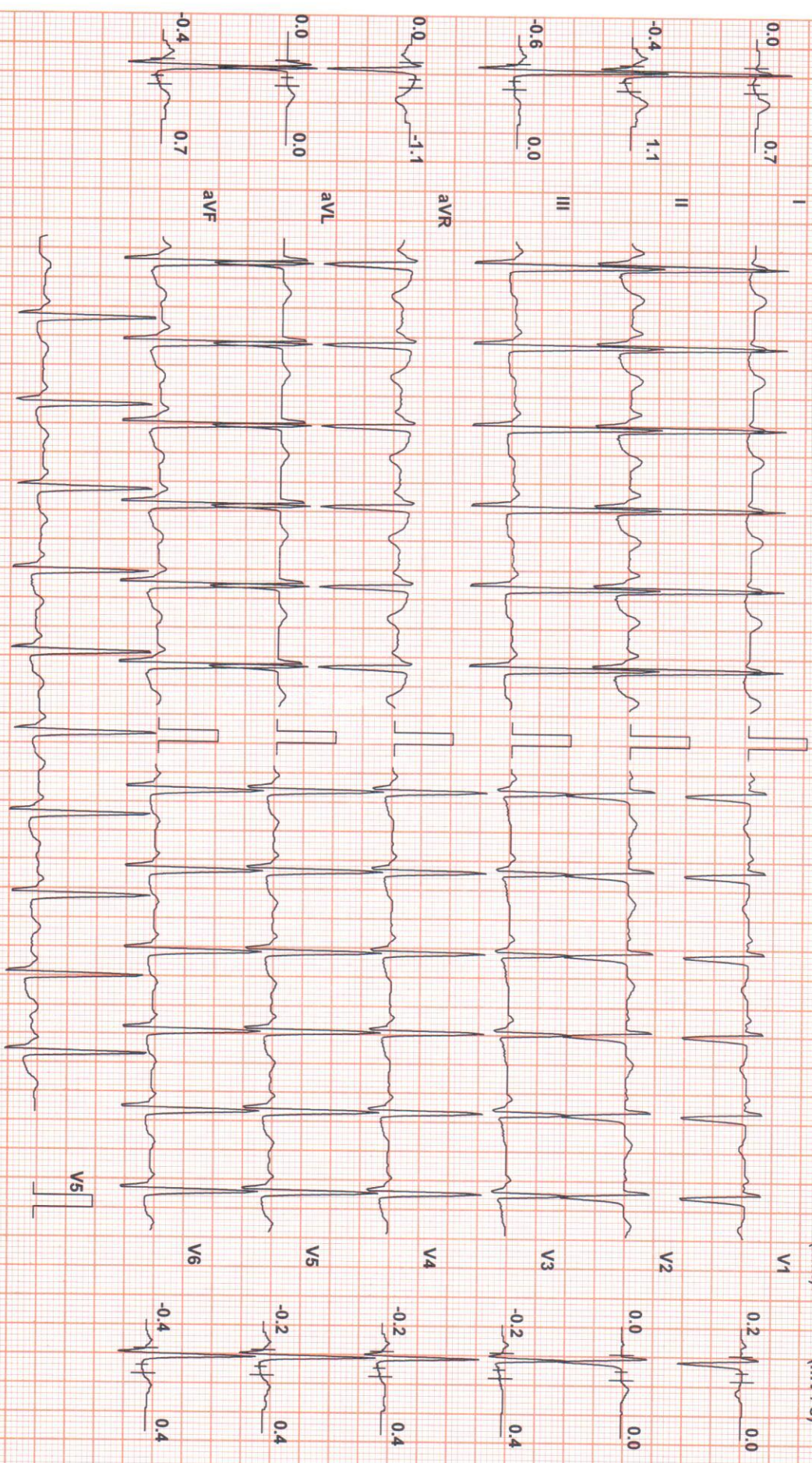


Chart Speed: 25 mm/sec  
Schiller Spandan V 4.7

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post V = J + 60 ms

Linked Median

CID# : 2231622015  
Name : MRS. CHAVAN SNEHAL GAJANAN  
Age / Gender : 33 Years/Female  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Collected : 12-Nov-2022 / 08:31  
Reported : 12-Nov-2022 / 15:48

(P)

**PHYSICAL EXAMINATION REPORT**

**History and Complaints:**

H/O bronchiectasis *bronchitis*

*X-ray Not  
AS Per client*

**EXAMINATION FINDINGS:**

Height (cms):	148cm	Weight (kg):	59kg
Temp (0c):	Afebrile	Skin:	Normal
Blood Pressure (mm/hg):	138/88mmHg	Nails:	Healthy
Pulse:	138/88mmHg	Lymph Node:	Healthy

**Systems**

Cardiovascular: S1 S2 Normal No Murmurs  
Respiratory: Normal  
Genitourinary: Normal  
GI System: Soft non tender no Organomegaly  
CNS: Normal

IMPRESSION: *Blat renal calculi*

**ADVICE:**

*- Consult family physician  
- client refused x-ray chest  
- Ref to urologist*

**CHIEF COMPLAINTS:**

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

*I*  
Dr. I. U. BAMB  
M.B.B.S., M.D. (Medicine)  
Reg. No. 39452

CID# : 2231622015  
Name : MRS.CHAVAN SNEHAL GAJANAN  
Age / Gender : 33 Years/Female  
Consulting Dr. : -  
Reg.Location : Swargate, Pune (Main Centre)

Collected : 12-Nov-2022 / 08:31  
Reported : 12-Nov-2022 / 15:48

- |  |                |
|--|----------------|
| 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                            | C-section 2018 |
| 17) Musculoskeletal System               | NO             |

**PERSONAL HISTORY:**

- |               |                                     |
|---------------|-------------------------------------|
| 1) Alcohol    | NO                                  |
| 2) Smoking    | NO                                  |
| 3) Diet       | Mixed                               |
| 4) Medication | bronchiectasis<br><i>bronchi h)</i> |

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

Dr.I U BAMB



CID : 2231622015  
Name : MRS.CHAVAN SNEHAL GAJANAN  
Age / Gender : 33 Years / Female  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Collected : 12-Nov-2022 / 10:49  
Reported : 12-Nov-2022 / 11:46

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	13.5	12.0-15.0 g/dL	Spectrophotometric
RBC	5.19	3.8-4.8 mil/cmm	Elect. Impedance
PCV	40.9	36-46 %	Calculated
MCV	79	80-100 fl	Calculated
MCH	26.1	27-32 pg	Calculated
MCHC	33.1	31.5-34.5 g/dL	Calculated
RDW	14.8	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	6700	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	41.2	20-40 %	
Absolute Lymphocytes	2760.4	1000-3000 /cmm	Calculated
Monocytes	3.8	2-10 %	
Absolute Monocytes	254.6	200-1000 /cmm	Calculated
Neutrophils	52.5	40-80 %	
Absolute Neutrophils	3517.5	2000-7000 /cmm	Calculated
Eosinophils	2.5	1-6 %	
Absolute Eosinophils	167.5	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.			
<b><u>PLATELET PARAMETERS</u></b>			
Platelet Count	251000	150000-400000 /cmm	Elect. Impedance
MPV	10.0	6-11 fl	Calculated
PDW	19.3	11-18 %	Calculated



CID : 2231622015  
Name : MRS.CHAVAN SNEHAL GAJANAN  
Age / Gender : 33 Years / Female  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code

Collected : 12-Nov-2022 / 10:49  
Reported : 12-Nov-2022 / 12:06

**RBC MORPHOLOGY**

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

Specimen: EDTA Whole Blood

ESR, EDTA WB 6 2-20 mm at 1 hr. Westergren

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



MC-2463

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



CID : 2231622015  
Name : MRS.CHAVAN SNEHAL GAJANAN  
Age / Gender : 33 Years / Female  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code

Collected : 12-Nov-2022 / 10:49  
Reported : 12-Nov-2022 / 11:48

**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	96.8	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	95.9	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.34	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.15	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.19	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.3	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.7	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.6	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.8	1 - 2	Calculated
SGOT (AST), Serum	21.3	5-32 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	23.8	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	17.8	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	79.9	35-105 U/L	Colorimetric
BLOOD UREA, Serum	14.4	12.8-42.8 mg/dl	Kinetic
BUN, Serum	6.7	6-20 mg/dl	Calculated
CREATININE, Serum	0.7	0.51-0.95 mg/dl	Enzymatic





CID : 2231622015  
Name : MRS.CHAVAN SNEHAL GAJANAN  
Age / Gender : 33 Years / Female  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code

Collected : 12-Nov-2022 / 10:49  
Reported : 12-Nov-2022 / 14:08

eGFR, Serum	102	>60 ml/min/1.73sqm	Calculated by MDRD equation (Modification of Diet)
URIC ACID, Serum	4.9	2.4-5.7 mg/dl	Enzymatic
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

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



MC-2463

*Shamla Kulkarni*  
Dr.SHAMLA KULKARNI  
M.D.(PATH)  
Pathologist



Use a QR Code Scanner Application To Scan the Code

CID : 2231622015  
Name : MRS.CHAVAN SNEHAL GAJANAN  
Age / Gender : 33 Years / Female  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Collected : 12-Nov-2022 / 10:49  
Reported : 12-Nov-2022 / 12:13

**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	5.8	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	119.8	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 Pune Lab, Pune Swargate

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



MC-2463

*Signature*

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



CID : 2231622015  
Name : MRS.CHAVAN SNEHAL GAJANAN  
Age / Gender : 33 Years / Female  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Collected : 12-Nov-2022 / 10:49  
Reported : 12-Nov-2022 / 12:16

Use a QR Code Scanner  
Application To Scan the Code

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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	Acidic (5.0)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.025	1.001-1.030	Chemical Indicator
Transparency	Slight Hazy	Clear	-
Volume (ml)	20	-	-
<b><u>CHEMICAL EXAMINATION</u></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><u>MICROSCOPIC EXAMINATION</u></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	5-6	Less than 20/hpf	

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



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



CID : 2231622015  
Name : MRS.CHAVAN SNEHAL GAJANAN  
Age / Gender : 33 Years / Female  
Consulting Dr. : -  
Reg. Location : Swargate, Pune (Main Centre)

Collected : 12-Nov-2022 / 10:49  
Reported : 12-Nov-2022 / 13:12

Use a QR Code Scanner  
Application To Scan the Code

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

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

NOTE: Test performed by Semi- automated column agglutination technology (CAT)

Specimen: EDTA Whole Blood and/or serum

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

**Limitations:**

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

**References:**

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

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

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



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**M.B.B.S, DCP (PATH)**  
**Pathologist**



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Collected : 12-Nov-2022 / 10:49  
Reported : 12-Nov-2022 / 11:56

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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
CHOLESTEROL, Serum	160.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	121.6	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	45.8	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	114.2	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	90.0	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	24.2	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.5	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.0	0-3.5 Ratio	Calculated

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Age / Gender : 33 Years / Female  
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Reg. Location : Swargate, Pune (Main Centre)

Collected : 12-Nov-2022 / 10:49  
Reported : 12-Nov-2022 / 12:51

**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	5.7	2.6-5.7 pmol/L	CMIA
Kindly note change in reference range and method w.e.f. 16/08/2019			
Free T4, Serum	13.1	9-19 pmol/L Pregnant Women (pmol/L): First Trimester:9.0-24.7 Second Trimester:6.4-20.59 Third Trimester:6.4-20.59	CMIA
Kindly note change in reference range and method w.e.f. 16/08/2019			
sensitiveTSH, Serum	2.2	0.35-4.94 microIU/ml Pregnant Women (microIU/ml): First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0	CMIA

Kindly note change in reference range and method w.e.f. 16/08/2019. NOTE: 1) TSH values between 5.5 to 15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH. 2) TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal & heart failure, severe burns, trauma & surgery etc.



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Collected : 12-Nov-2022 / 10:49  
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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 transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart severe burns, trauma and surgery etc.

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

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

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

**Limitations:**

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

**Reference:**

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

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

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



*Shruti Ramteke*  
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Pathologist

Name: Shehal Chavan

Sex / Age: 33+M / F

CID: 223162015

Date: 12/11/22

**EYE EXAMINATION**

**VISION**

Distance Vision Without Glasses	Right Eye 8/6	Left Eye 6/6
Distance Vision With Glasses	Right Eye	Left Eye
Near Vision Without Glasses	Right Eye 27/6	Left Eye 27/6
Near Vision With Glasses	Right Eye	Left Eye

**GENERAL EXAMINATION:**

LIDS  
CORNEA  
CONJUNCTIVAE  
EYE MOVEMENTS  
COLOUR VISION



DR I.U.BAMB

M.B.B.S MD (Medicine)

Reg No 39452





Preventive Health Check-up | Pathology | Digital X-Ray | Sonography | Colour Doppler | Mammography | BMD (DXA Scan) | OPG | ECG | 2D Echo  
Stress Test/TMT | Spirometry | Eye Examination | Dental Examination | Diet Consultation | Audiometry | OT Sterility | Water Sterility | Clinical Research

CID	: 2231622015	SID	: 177805614817
Name	: MRS.CHAVAN SNEHAL GAJANAN	Registered	: 12-Nov-2022 / 08:31
Age / Gender	: 33 Years/Female	Collected	: 12-Nov-2022 / 08:31
Ref. Dr	: -	Reported	: 12-Nov-2022 / 12:19
Reg.Location	: Swargate, Pune (Main Centre)	Printed	: 12-Nov-2022 / 12:22

**USG WHOLE ABDOMEN**

**LIVER:** Size, shape and echopattern are normal. No focal lesions noted. No IHBR dilatation. Hepatic veins appear normal. Portal vein and common bile duct show normal caliber.

**GALL BLADDER :** Partially distended. No evidence of any pericholecystic collection.

**PANCREAS :** Normal in size and echotexture. Pancreatic duct is normal.

**SPLEEN :** Normal in size and echopattern. No focal lesion. Splenic vein is normal.

**RIGHT KIDNEY :** Measures 9.3 x 4.0 cm. Normal in size and echogenicity. **2.6 mm calculus seen in midpole.** No hydronephrosis. Corticomedullary differentiation is maintained.

**LEFT KIDNEY :** Measures 9.1 x 3.9 cm. Normal in size and echogenicity. **3.8 mm calculus seen in midpole.** No hydronephrosis. Corticomedullary differentiation is maintained.

**Retroperitonium and flanks obscured due to bowel gas.**

Paraaortic and paracaval region appears to be normal.  
No evidence of lymphnodes noted.  
No free fluid in abdomen.

**URINARY BLADDER :** Well distended. No calculi. Wall thickness is normal.

**UTERUS :** Reteverted normal in size, measures 7.4 x 3.6 x 3.4 cm. No area of increased or decreased echogenicity.  
Endometrial echoes are normal. Endometrial thickness is 5.8 mm.


Both the ovaries are normal in size shape and echotexture.  
No obvious abnormal ovarian or adnexal mass lesion.  
No free fluid noted in the POD.

**IMPRESSION : Bilateral small non-obstructing renal calculi.**

Clinical correlation is indicated.

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



  
**Dr.NIKHIL JOSHI**  
MBBS , DMRE  
CONSULTANT RADIOLOGIST

