



# APEX HOSPITALS KANDIVALI

CASHLESS FACILITY

2/3/24

Apex Road, Near to Lanka Woods, Lakhmawala Townshio, Near Marimara Gate No 4, Kandivali (E), Mumbai 400701  
email: info@apexhospitals.in | www.apexgroupofhospitals.com



Tele: 022-62747000 (100 Lines)

S/Ps Minoli D.

160cms  
108.5kg  
41.7 kg/m<sup>2</sup>

Ms. Gireesh Babu 87/M

40 Dyslipidemia, HbA1c - 7.0%, DM on Rx.

Fatty liver (ASPT)

Adv.

⊕ ↑ Fiber (All s meals & wkd meals as well)

o Big bowl of salad raw vegetables.

= 2 fruits a day (Melon, Berries, Apple/pear)  
Gym.

= Green leafy vegetables.

= Sprouts (Chana, moong, matar)

= Soups (vegetable)

⊕ Oil - 1 tea spoon a day (Almond/olive)  
Rice bran + Sesame oil

⊕ Salt - 1/2 tea spoon a day

Orthopedic | Spine | Cardiology | General Surgery | Laparoscopy | Critical Care | Gastroenterology | Cancer | Diabetology  
Neurology | Nephrology | Vascular Surgery | ENT | Ophthalmology | Plastic Surgery | Urology | Pediatric Surgery



Akurl Road, Next to Lodha Woods, Lokhandwala Township,  
Near Mahindra Gate No. 4, Kandivali (E), Mumbai 400101.  
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Tele.:  
022-62747000 ( 100 Lines)

Patient Name: Mr. GIRISH BABU MADDELA

M /39 Yrs.

Ref. by: SELF

Date: -02 /03/2024

## SONOGRAPHY OF ABDOMEN AND PELVIS

**TECHNIQUE:** Real time, B mode, gray scale sonography of the abdominal and pelvic organs was performed with convex transducer.

**LIVER:** The liver is **enlarged** in size (17.5 cm), shape and has smooth margins. The hepatic parenchyma shows **bright** echotexture without solid or cystic mass lesion or calcification. No evidence of intrahepatic biliary radical dilatation.

**PORTAL VEIN:** It measures 12 mm in transverse diameter.

**GALL BLADDER:** The gall bladder is well distended. There is no evidence of calculus, wall thickening or pericholecystic collection.

**COMMON BILE DUCT:** The visualised common bile duct is normal in caliber. No evidence of calculus is seen in the common bile duct. Terminal common bile duct is obscured due to bowel gas artifacts.

**PANCREAS:** The head and part of body of pancreas is normal in size, shape, contours and echo texture. Rest of the pancreas is obscured due to bowel gas artifacts.

**SPLEEN:** The spleen measures 10.4 cm and is normal in size and shape. Its echotexture is homogeneous.

### KIDNEYS:

Right kidney	Left kidney
10.3 x 4.4 cm	10.6 x 5.4 cm

The kidneys are normal in size and have smooth renal margins. Cortical echotexture is normal. The central echo complex does not show evidence of hydronephrosis. No evidence of hydroureter or calculi, bilaterally.

**URINARY BLADDER:** The urinary bladder is well distended. It shows uniformly thin walls and sharp mucosa. No evidence of calculus is seen. No evidence of mass or diverticulum is noted.

.....Continue On Page 2



**PROSTATE:** It measures about 2.8 x 3.3 x 2.9 cm; volume is 14 gm. The prostate gland shows well defined and smooth margins. The prostatic echotexture is normal and homogeneous.

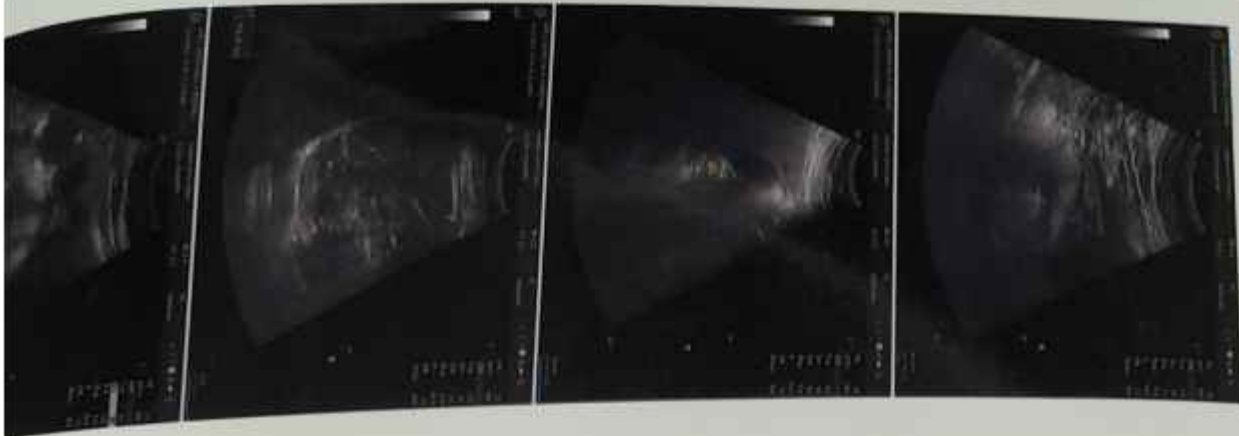
There is no ascites. There is no obvious evidence of significant lymphadenopathy.

**IMPRESSION:**

- Grade 1/2 fatty liver with mild to moderate hepatomegaly. Advice lipid profile and LFT correlation.
- No other significant abnormality seen.

Thanks for the reference.  
With regards,

**Dr. Ravi Kumar, M.D.**  
Consultant Radiologist





# APEX HOSPITALS KANDIVALI DIAGNOSTIC

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## DEPARTMENT OF LABORATORY SCIENCES

<b>Patient Name</b>	Mr. GIRISH BABU MADDELA	<b>LabNo</b>	14456	
<b>UHID/IP No</b>	150009514 / 11004	<b>Sample Date</b>	24/02/2024 10:02AM	
<b>Age/Gender</b>	37 Yrs/Male	<b>Receiving Date</b>	24/02/2024 12:30PM	
<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	24/02/2024 1:20PM	
<b>Prescribed By</b>	Dr. Rajmangal Maurya	<b>Report Status</b>	Final	

### HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>COMPLETE BLOOD COUNT(CBC) EDTA WHOLE BLOOD</b>				
Sample: W. B. EDTA				
Haemoglobin Estimation (Hb)	13.9	gm/dl	13.5 - 18.0	SLS- Hb Method
RBC Count (Red Blood Cell)	4.90	10 <sup>6</sup> /uL	4.70 - 6.00	
PCV (Haematocrit)	40.15	%	40.0 - 50.0	Calculated
MCV	81.94	fl	78 - 100	Calculated
MCH	28.37	pg	27 - 31	Calculated
MCHC	34.62	gm/dl	30 - 36	Calculated
RDW	15.3	%	11.0 - 16.0	Calculated
Total Leukocyte Count (TLC)	8820	cells/cu.mm	4000.0 - 10500.0	
Neutrophil %	68	%	40 - 80	
Lymphocyte %	30	%	20 - 40	
Eosinophil %	01	%	0 - 6	
Monocytes %	01	%	1 - 12	
Basophil %	00	%	0 - 2	
Band Cells	00	%		Calculated
Absolute Neutrophil Count (ANC)	5997.6	/cu.mm	2000 - 7000	Calculated
Absolute Lymphocyte Count	2646	/cu.mm	1000 - 3000	Calculated
Absolute Eosinophil Count (AEC)	88.2	/cu.mm	20 - 500	Calculated
Absolute Monocyte Count	<b>88.2 L</b>	/cu.mm	200 - 1000	Calculated
Absolute Basophil Count	0.00	/cu.mm		CALCULATED
WBCs Morphology	Within normal limits.			
RBCs Morphology	Normocytic Normochromic.			
Platelet Count	359	10 <sup>3</sup> /uL	150 - 400	DC Detection
Platelets Morphology	Adequate on smear			
IPV	8.0	fl	7 - 12	

--End Of Report--

**Dr. SANDEEP B PORWAL**  
MBBS MD (Path) Mumbai


**DEPARTMENT OF LABORATORY SCIENCES**

<b>Patient Name</b>	MR. GURISH BABU MAURWA	<b>LabNo</b>	19456
<b>UHID/IP No</b>	150009514 / 11004	<b>Sample Date</b>	24/02/2024 10:00AM
<b>Age/Gender</b>	37 Yrs/Male	<b>Receiving Date</b>	24/02/2024 12:30PM
<b>Bed No./Ward</b>	OPD	<b>Report Date</b>	24/02/2024 1:20PM
<b>Prescribed By</b>	Dr. Rajmangal Maurya	<b>Report Status</b>	Final

**HAEMATOLOGY**

Test Name	Result	Unit	Biological Ref. Range	Method
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR)</b>				
Sample: W. B. EDTA				
ESR (Erythrocyte Sed. Rate)	20 H	mm/hr	< 15	Westergren

--End Of Report--

  
**Dr. SANDEEP B PORWAL**  
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## IMMUNO-HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>BLOOD GROUPING</b> Sample: W. B. EDTA				
Blood Group (ABO and Rh)	"B" Rh Positive			SLIDE METHOD

--End Of Report--

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MBBS MD (Path) Mumbai



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## BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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### GLUCOSE (PP)

Sample: Fl. Plasma

Blood Sugar(2 Hours PP)	<b>182.0 H</b>	mg/dl	70 - 140	Glucose Oxidase,Hydrogen Peroxide
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Note: An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons :  
The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity, Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycae & Insulin treatment.

### GLUCOSE (FASTING)

Sample: Fl. Plasma

Glucose (Fasting Blood Sugar / FBS)	<b>160.0 H</b>	mg/dl	70 - 110	Glucose Oxidase,Hydr Peroxide
Urine Fasting Sugar	Trace		Nil	
Urine Fasting Ketone	Absent		Absent	

--End Of Report--

**Dr. SANDEEP B P**  
MBBS MD (Path) Mu





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## BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>LIPID PROFILE SERUM</b>				
Sample: Serum				
Cholesterol-Total	114	mg/dl	< 200.00	Cholesterol Oxidase, Esterase, Nitrate
Triglycerides	92	mg/dl	< 150	Enzymatic End
HDL Cholesterol	46	mg/dl	40.00 - 60.00	Phosphotungst
VLDL Cholesterol	18.40	mg/dl	6.00 - 38.00	Calculated V
LDL Cholesterol	49.60	mg/dl	< 100.00	Calculated
Cholesterol Total : HDL Cholesterol Ratio	<b>2.48 L</b>		3.50 - 5.00	Calculated
LDL Cholesterol : HDL Cholesterol Ratio	<b>1.08 L</b>		2.50 - 3.50	Calculate

--End Of Report--

Dr. SAND  
MBBS MD (C)



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## BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>LIVER FUNCTION TEST (LFT) SERUM</b>				
Sample: Serum				
Bilirubin Total (TBil)	0.66	mg/dl	0.30 - 1.30	Diphenyl Diazonium Salt
Bilirubin Direct (Dbil)	0.23	mg/dl	0.00 - 0.50	
Bilirubin indirect	0.43	mg/dl	0 - 1	
SGPT (ALT)	<b>48.86 H</b>	U/L	5 - 40	IFCC modified
SGOT (AST)	31.41	U/L	5 - 40	IFCC modified
Protein Total	6.3	gm/dl	6.00 - 8.00	Biuret
Albumin	4.1	gm/dl	3.20 - 5.00	Bromocresol Green (BCG)
Globulin	2.20	gm/dl	1.80 - 3.50	Calculated Value
A/G Ratio (Albumin/Globulin Ratio)	1.86		1.00 - 2.50	Calculated Value
Alkaline Phosphatase	77.94	IU/L	42 - 140	
GGTP (GAMMA GT)	20.38	IU/L	15.0 - 72.0	UV Kinetic IFCC

--End Of Report--

Dr. SANDEEP B P  
MBBS MD (Path) Mur

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**UHID/IP No** 150009514 / 11004  
**Age/Gender** 37 Yrs/Male  
**Bed No/Ward** OPD  
**Prescribed By** Dr. Rajmangal Maurya

**LabNo** 14456  
**Sample Date** 24/02/2024 10:02AM  
**Receiving Date** 24/02/2024 12:30PM  
**Report Date** 24/02/2024 1:20PM  
**Report Status** Final



## BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
<b>RFT (RENAL FUNCTION TEST)</b>				
Sample: Serum				
● Creatinine	1.0	mg/dl	0.70 - 1.50	Jaffes
● UREA	21.28	mg/dl	15 - 50	CDC Urease, Colorimetric
BUN - Blood Urea Nitrogen	9.94	mg/dl	7 - 20	
● Calcium	9.0	mg/dl	8.6 - 10.5	Arsenazo III
● Uric Acid	5.9	mm/hr	3.5 - 8.5	URICASE- PEROXIDASE
● Phosphorus	3.7	mg/dl	2.5 - 5.0	Phosphomolybdate Reduction
● Sodium	142.0	mEq/L	135 - 146	ISE Direct
● Potassium	4.8	mEq/L	3.5 - 5.5	ISE Direct
● Chloride	101.0	mEq/L	98 - 108	ISE Direct
● Protein Total	6.3	gm/dl	6.00 - 8.00	Biuret
● Albumin	4.1	gm/dl	3.20 - 5.00	Bromocresol Green (BCG)
● Globulin	2.20	gm/dl	1.80 - 3.50	Calculated Value
● A/G Ratio (Albumin/Globulin Ratio)	1.86		1.00 - 2.50	Calculated Value

--End Of Report--

**Dr. SANDEEP B PORWA**  
MBBS MD (Path) Mumbai



**DEPARTMENT OF LABORATORY SCIENCES**

**Patient Name** Mr. GIRISH BABU MADDELA  
**UHID/IP No** 150009514 / 11004  
**Age/Gender** 37 Yrs/Male  
**Bed No/Ward** OPD  
**Prescribed By** Dr. Rajmangal Maurya


**LabNo** 14456  
**Sample Date** 24/02/2024 10:02AM  
**Receiving Date** 24/02/2024 12:30PM  
**Report Date** 24/02/2024 1:53PM  
**Report Status** Final



**CLINICAL PATHOLOGY**

Test Name	Result	Unit	Biological Ref. Range	Method
<b>URINE ROUTINE</b> Sample: Urine				
<b>PHYSICAL EXAMINATION</b>				
Quantity	30	ml		
Color	Pale Yellow			
Appearance	Clear			
Specific Gravity	1.020		Clear 1.010 - 1.025	Clear
<b>CHEMICAL EXAMINATION</b>				
pH	6.5		4.5 - 8.5	
Protein	Absent			
Glucose	Trace			
Ketone	Absent		Nil	
Occult Blood	Absent			
Bile Salt	Absent			
Bile Pigment	Absent			Absent
<b>MICROSCOPIC EXAMINATION</b>				
Pus Cells	1-2/hpf			
RBCs	Absent			
Epithelial Cells	0-1/hpf			
Crystals	Absent			Absent
Casts	Absent			Absent
Bacteria	Absent			Absent
Yeast Cells	Normal		Normal	
Amorphous Deposit	Absent			
Others	Absent			

--End Of Report--

  
**Dr. SANDEEP B PORWAL**  
 MBBS MD (Path) Mumbai

Patient Id : PVD18323-24/58232  
Patient : MR GIRISH BABU MADDELA  
Age/sex : 37 Yrs/ Male  
Center : APEX HOSPITALS KANDIVALI  
Ref. By : Self

Sample ID : 24026559  
Reg. Date : 24/02/2024  
Report Date : 24/02/2024  
Case No. :



**HBA1C-GLYCOSYLATED HAEMOGLOBIN**

Test Description	Result	Unit	Biological Reference Range
HbA1c- (EDTA WB)	7.9 *	%	< 5.6 Non-diabetic 5.7-6.4 Pre-diabetic > 6.5 Diabetic
Estimated Average Glucose (eAG)	180.03	mg/dL	
Method	: HPLC-Biorad D10-USA		

**INTERPRETATION**

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
- HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes off point of 6.5%.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low glycosylated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory disease, anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- To estimate the eAG from the HbA1C value, the following equation is used:  $eAG(mg/dl) = 28.7 \times A1c - 46.7$
- Interference of Haemoglobinopathies in HbA1c estimation.
  - For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
  - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
  - Heterozygous state detected (D10/ Tosho G8 is corrected for HbS and HbC trait).
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control.
  - Excellent Control - 6 to 7 %
  - Fair to Good Control - 7 to 8 %
  - Unsatisfactory Control - 8 to 10 %
  - and Poor Control - More than 10 %.

**Note** : Haemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy

Patient Id : PVD18323-24/68232  
Patient : MR GIRISH BABU MADDELA  
Age/Sex : 37 Yrs/ Male  
Center : APEX HOSPITALS KANDIVALI  
Ref. By : Self

Sample ID : 24026559  
Reg. Date : 24/02/2024  
Report Date : 24/02/2024  
Case No. :



**IMMUNOASSAY**

Test Description	Result	Unit	Biological Reference Range
<b>TOTAL T3 T4 TSH (TFT)</b>			
T3 (Triiodothyronine)	135.02	ng/dl	83-200  For Pregnant females: First Trim: 104.8 - 229.8 2nd Trim: 128.9 - 262.3 Third trim : 135.4 - 261.7
T4 (Thyroxine)	8.10	ug/dL	5.13 - 14.10  For Pregnant females: First Trim : 7.33 - 14.8 Second Trim : 7.93 - 16.1 Third Trim : 6.95 - 15.7
TSH(Thyroid Stimulating Hormone)	3.78	uIU/ml	0.27 - 4.20

Method : ECLIA

**INTERPRETATION**

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	• Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within Range	Within Range	• Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. • Subclinical Autoimmune Hypothyroidism • Intermittent T4 therapy for hypothyroidism • Recovery phase after Non-Thyroidal illness*
Raised	Decreased	Decreased	• Chronic Autoimmune Thyroiditis • Post thyroidectomy, Post radiiodine • Hypothyroid phase of transient thyroiditis*
Raised or within Range	Raised	Raised or within Range	• Interfering antibodies to thyroid hormones (anti-TPO antibodies) • Intermittent T4 therapy or T4 overdose • Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics*
Decreased	Raised or within Range	Raised or within Range	• Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness • Subclinical Hyperthyroidism • Thyroxine ingestion*
Decreased	Decreased	Decreased	• Central Hypothyroidism • Non-Thyroidal illness • Recent treatment for Hyperthyroidism (TSH remains suppressed)*
Decreased	Raised	Raised	• Primary Hyperthyroidism (Graves' disease), Multinodular goitre, Toxic nodule • Transient thyroiditis: Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain's), G thyrotoxicosis with hyperemesis gravidarum*
Within Range	Raised	Within Range	• T3 toxicosis • Non-Thyroidal illness

-----End Of Report-----

\* & Conditions\* Test processed at Pathvision Central Processing Laboratory- Dahisar west Mumbai-68 Individual laboratory investigations are r  
ld be used along with other relevant clinical examinations to achieve final diagnosis. Any discrepancy with clinical condition the referring doctor or pa  
24hr of sample collection and get test redone. Partial reproduction of this report is not permitted The test report is not valid for Medico-legal p

DR. SANJAY  
MBBS  
MMC R

**CENTRAL PROCESSING LABORATORY**

Plot No. 208/209/210, S.V. Road, Dahisar (East), Mumbai - 400 068.

Phone: 63 7645 • Mob: 86910 17023 / 81042 45961 • www.pathvisiondiagnostics.com



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<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	24/02/2024 6:46PM
<b>Prescribed By</b>	Dr. Rajmangal Maurya	<b>Report Status</b>	Final



## XRAY CHEST PA VIEW

- The lung on either side shows adequate translucency and exhibit normal vasculature.
- Both hila are symmetrical in outline size and shape.
- Trachea is central in position and no mediastinal abnormality is visible.
- The costophrenic angles appear clear.
- Cardiac shadow is unremarkable.
- Bone thorax appears unremarkable.

--End Of Report--

**Dr. SAUMIL PANDYA**  
MD, D.N.B

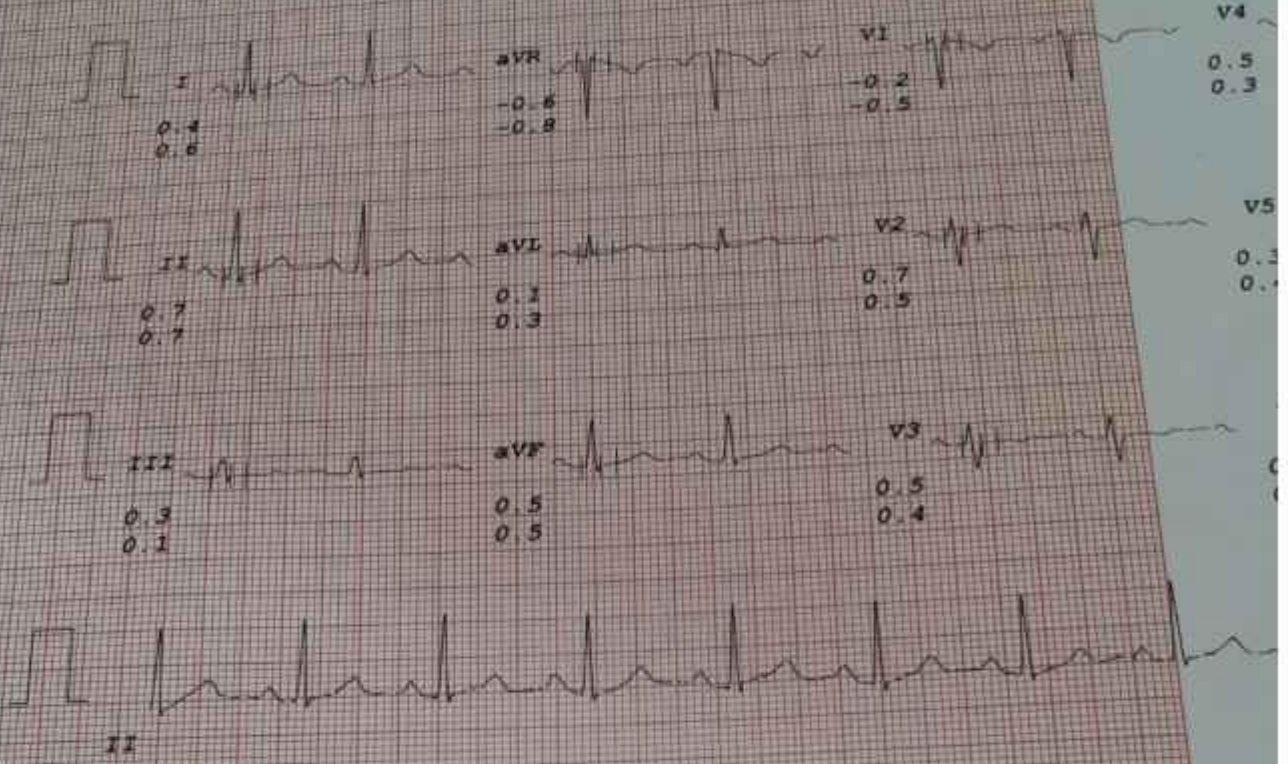
# APEX HOSPITAL

PRETEST  
SUPINE

ST @ 10mm/  
80ms Post.

MR GIRISH BABU  
I.D. 8903  
Age 37/M  
Date 24-02-2024

RATE 86bpm  
B.P. 130/80



Apex Hospitals Kan  
Akuri Road, Next To Lodha  
Lokhandwala Township, Near  
G. No. 4, Kandivali (E), M.  
MUMBAI, India. Tel: 022-251-1111



HCL HL ERROR  
SUBSYSTEM  
ERROR  
OPERATOR  
POSITION

170  
InputReadError  
SetCursor  
7612

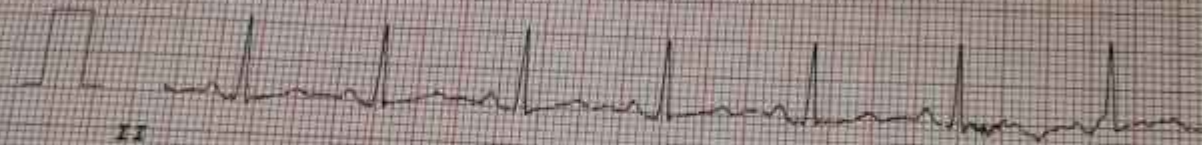
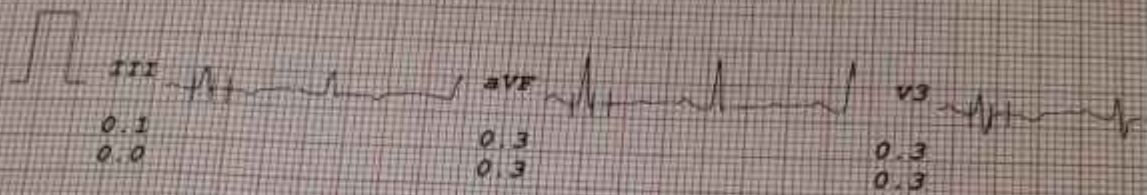
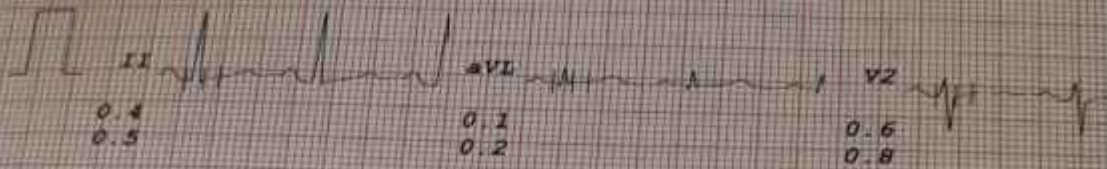
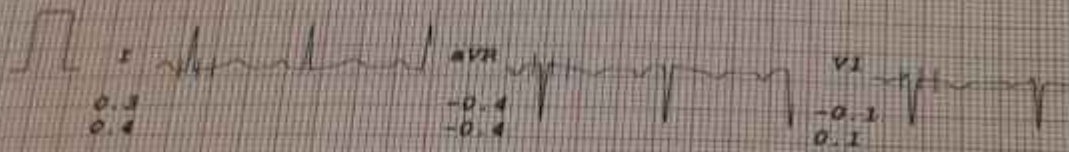
# APEX HOSPITAL

MR GIRISH BABU  
I.D. 8903  
Age 37/M  
Date 24-02-2024

RATE 93bpm  
B.P. 130/80

PRETEST  
HYPERVENT

PHASE TIME 0-02



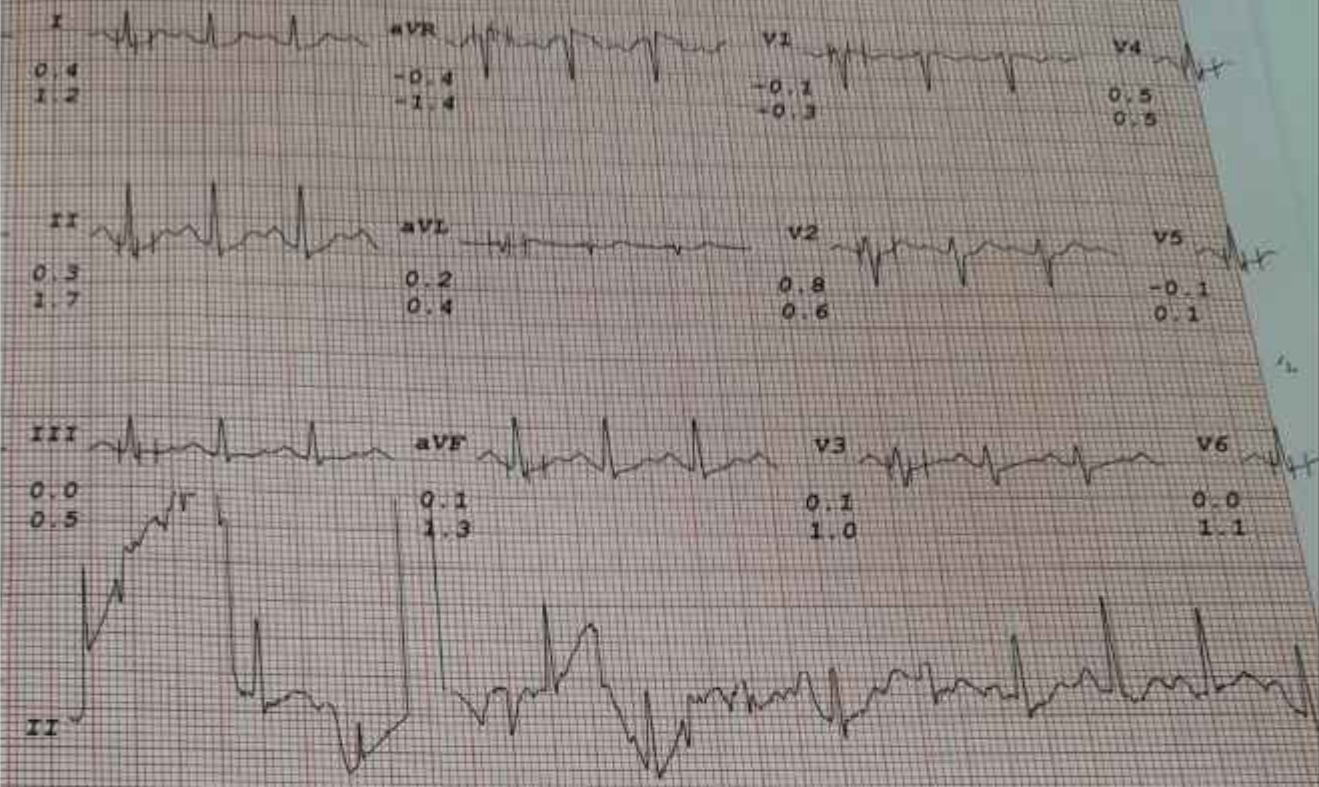
UNI EM, Indore, IN

SIRISH BABU  
18908  
5377M  
26-08-2024  
Operator:  
Position:

**APEX HOSPITAL**  
RATE 133bpm  
B.P. 130/90/0  
Input sender  
Read footer  
48

Bruce  
Stage 1  
TOTAL TIME 2:55  
PHASE TIME 2:55

ST # 10mm/m  
80ms PostJ  
Speed 2.7 k  
SLOPE 10 k



1991 EM, Indore, Tel: +91-731-403800

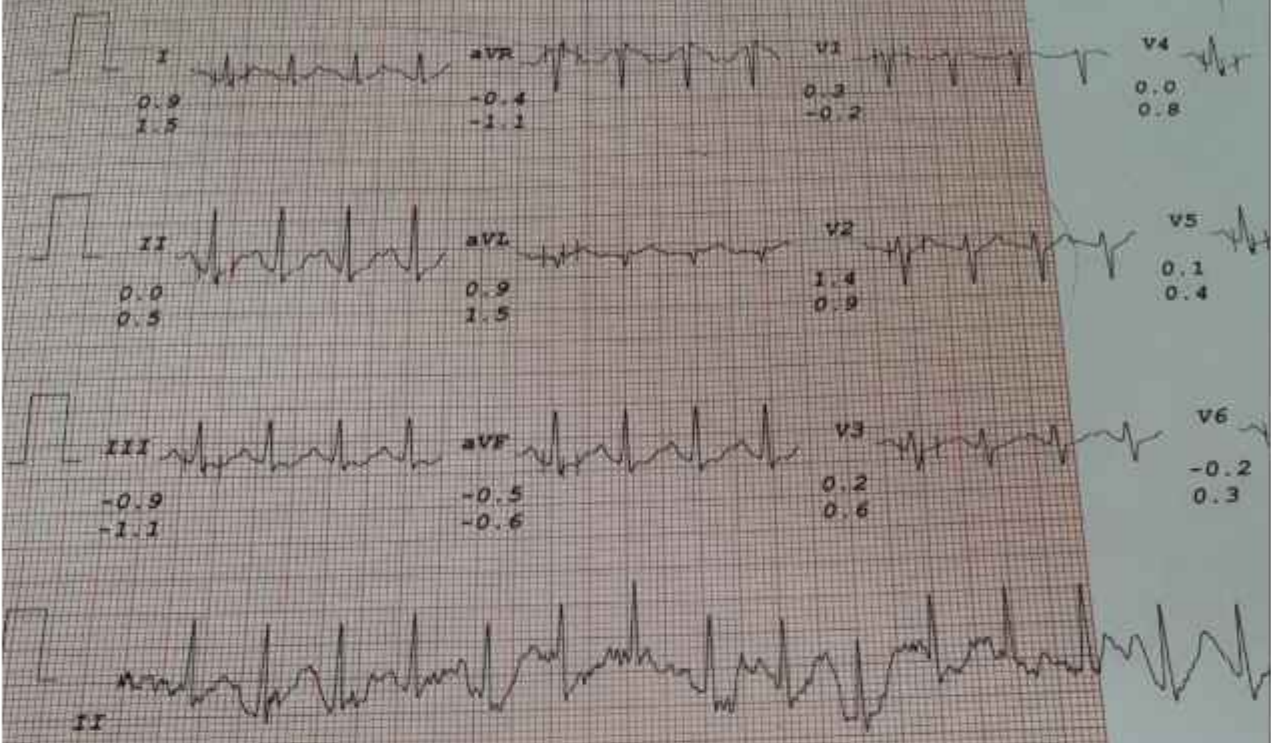
# APEX HOSPITAL

MR GIRISH BABU  
I.D: 8903  
Age 37/M  
Date 14-02-2024

RATE 159bpm  
B.P. 140/90

Bruce  
Stage 2  
TOTAL TIME 5:55  
PHASE TIME 2:55

ST # 10mm/m  
SDma PostJ  
Speed 4 km/  
SLOPE 12 %



DR. AN. INDIRA. Tel... +91-731-40300

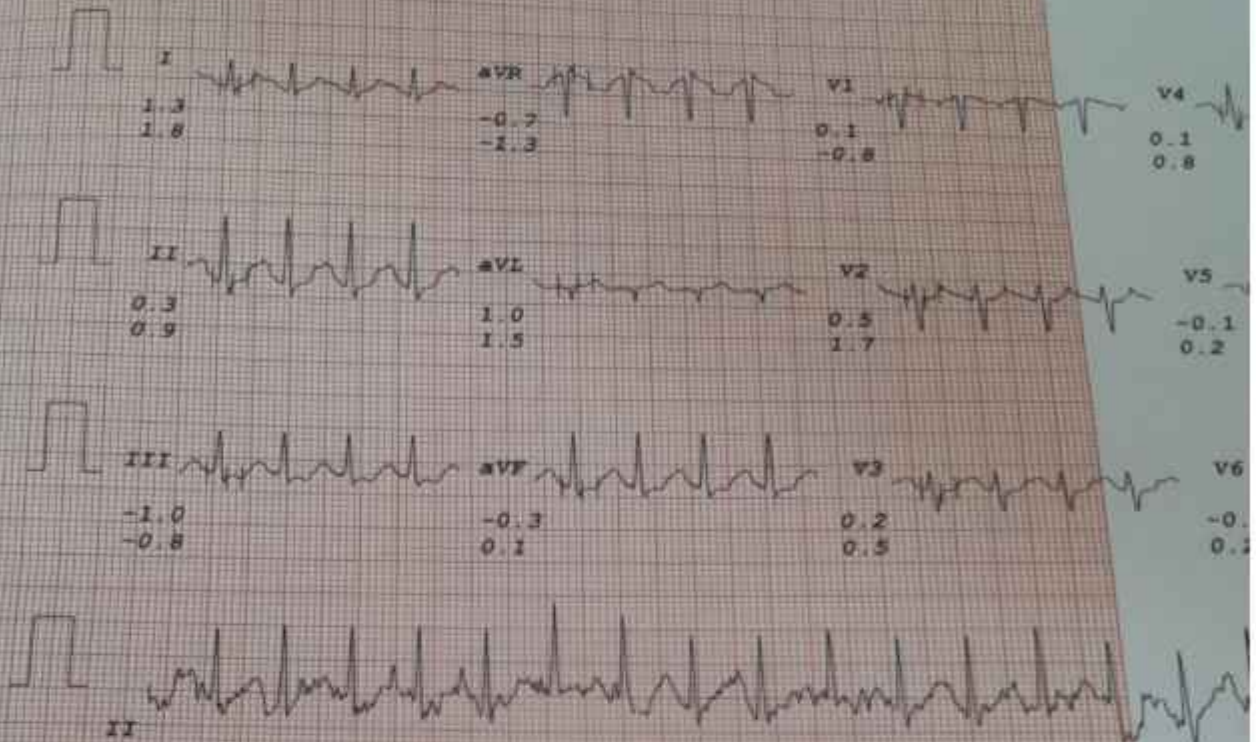
# APEX HOSPITAL

MR GIRISH BABU  
I.D. 8903  
Age 31/M  
Date 24-02-2024

RATE 172bpm  
B.P. 140/90

BRUCE  
PK-EXERCISE  
TOTAL TIME 6:47  
PHASE TIME 0:47

ST # 10mm/m  
8Cms Post J  
Speed 5.4 X  
SLOPE 14 %



1/0  
InputReader  
Reader  
Operator

XL Error  
Subsystems  
Error  
Operator  
Position

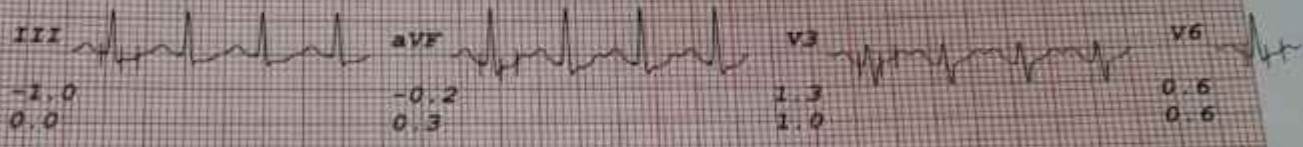
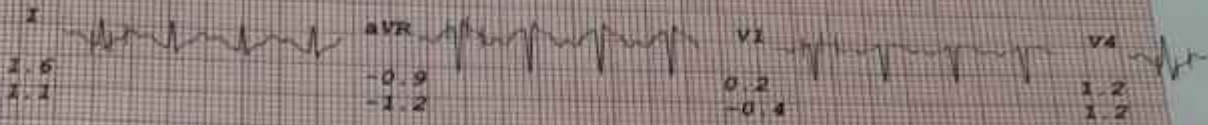
# APEX HOSPITAL

MR. GIREESH BABU  
I.D. 8903  
AGE 37/M  
Date: 24-02-2024

RATE 157bpm  
B.P. 140/90

Brace  
RECOVERY  
TOTAL TIME 7:13  
PHASE TIME 0:17

ST @ 10mm/m  
80mm PostJ



# APEX HOSPITAL

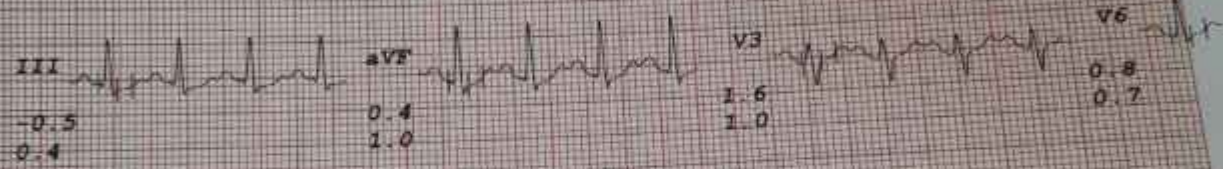
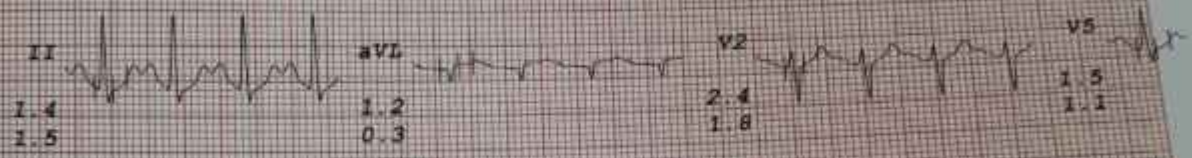
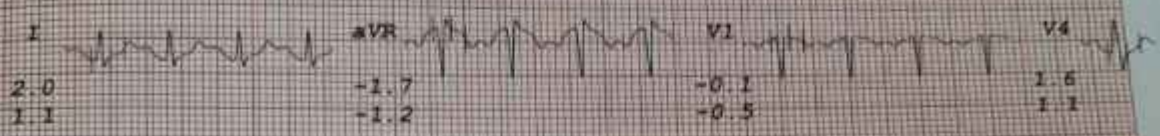
871

WISAM BASU  
8903  
37/M  
24-02-2024

RATE 153bpm  
B.P. 140/90

Bruce  
RECOVERY  
TOTAL TIME 7:25  
PHASE TIME 0:29

ST @ 10mm/m  
80ms PostJ



Dr. Dr. K. S. Srinivasan, M.D., F.R.C.P., F.A.C.C., F.A.S.A., F.A.P.A., F.A.P.P.A., F.A.P.S.A., F.A.P.S.C., F.A.P.S.O., F.A.P.S.I., F.A.P.S.E., F.A.P.S.N., F.A.P.S.M., F.A.P.S.L., F.A.P.S.K., F.A.P.S.J., F.A.P.S.I., F.A.P.S.H., F.A.P.S.G., F.A.P.S.F., F.A.P.S.E., F.A.P.S.D., F.A.P.S.C., F.A.P.S.B., F.A.P.S.A., F.A.P.S.Z., F.A.P.S.Y., F.A.P.S.X., F.A.P.S.W., F.A.P.S.V., F.A.P.S.U., F.A.P.S.T., F.A.P.S.S., F.A.P.S.R., F.A.P.S.Q., F.A.P.S.P., F.A.P.S.O., F.A.P.S.N., F.A.P.S.M., F.A.P.S.L., F.A.P.S.K., F.A.P.S.J., F.A.P.S.I., F.A.P.S.H., F.A.P.S.G., F.A.P.S.F., F.A.P.S.E., F.A.P.S.D., F.A.P.S.C., F.A.P.S.B., F.A.P.S.A.

**APEX HOSPITAL**  
KANDIVALI

**MR GIRISH BABU**  
 ID : 8903  
 DATE : 24-02-2024  
 AGE/SEX : 37 / M  
 HT/WT : 165 / 108  
 REP. BY :

**TREADMILL TEST REPORT**

PROTOCOL : Bruce  
 HISTORY :  
 INDICATION :  
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	S.P. mmHg	D.P. mmHg
		0:2			80	130 / 80	101
	2:55	2:55	2.7	10	93	133 / 80	120
	3:55	2:55	4	12	133	130 / 90	172
	6:47	0:47	5.4	14	159	140 / 90	232
	7:13	0:17			173	140 / 90	239
	7:22	0:26			157	140 / 90	214
	7:25	0:29			153	140 / 90	214
	7:25	0:29			157	140 / 90	214

**RESULTS**

EXERCISE DURATION : 6:47  
 MAX HEART RATE : 173 bpm 94 % of target heart rate (83 bpm)  
 MAX BLOOD PRESSURE : 140 / 90 mm Hg  
 REASON OF TERMINATION :

BP RESPONSE :  
 ARRHYTHMIA :  
 E.K.G. RESPONSE :

**IMPRESSIONS** :

Page : 44

HPT 04, Debraj, Tel : 08-720-80700, Fax : 08-720-80701, E-MAIL : apex@apexhospitals.net



MR. GIRISH BABU

ID : 8903  
 DATE : 26-02-2024  
 AGE/SEX : 32 / M  
 HT/WT : 165 / 198  
 REF. BY :

TREADMILL TEST REPORT

PROTOCOL : Bruce  
 HISTORY :  
 INDICATION :  
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	B.P. mmHg	RPP x100
SE		0:2			86	130 / 80	111
					83	130 / 80	120
	2:55	2:55	2.7	10	133	130 / 90	172
	5:55	2:55	4	12	159	140 / 90	222
	6:47	0:47	5.4	14	171	140 / 90	239
	7:43	0:17			159	140 / 90	219
	7:22	0:26			153	140 / 90	214
	7:25	0:29			153	140 / 90	214

RESULTS

EXERCISE DURATION : 6:47  
 MAX HEART RATE : 173 bpm 94 % of target heart rate 183 bpm  
 MAX BLOOD PRESSURE : 140 / 90 mm Hg  
 REASON OF TERMINATION :  
 BP RESPONSE :  
 ARRHYTHMIA :  
 H.R. RESPONSE :  
 IMPRESSIONS :

ian : 44



MR. GIRISH BABU

24/2/24

Age - 37y 25d

B.P - 130/80

P - 14

SpO<sub>2</sub> - 99

H.T - 165

W.T - 108.5 kg



24 Hr  
**APEX HOSPITALS KANDIVALI**  
A Superspecialty Hospital

Akurl Road, Next to Lodha Woods - Lokhandwala Township,  
Near Mahindra Gate No. 4, Kandivali (E), Mumbai 400101.  
email: info@apexhospitals.in | www.apexgroupofhospitals.com



CASHLESS FACILITY

Tele.:  
022-62747000 (100 Lines)

3/3/2024

Mr. Anish Maddal  
Age - 37 y / male.

Optical  
Distance

Ⓡ eye - 0.30

Ⓛ eye - 0.18.

Near

Ⓡ eye - N8.

Ⓛ eye - N6



अपेक्स हॉस्पिटल्स कांदिवली

Name DR. GARISH BABU

ECG / EMO / NCV

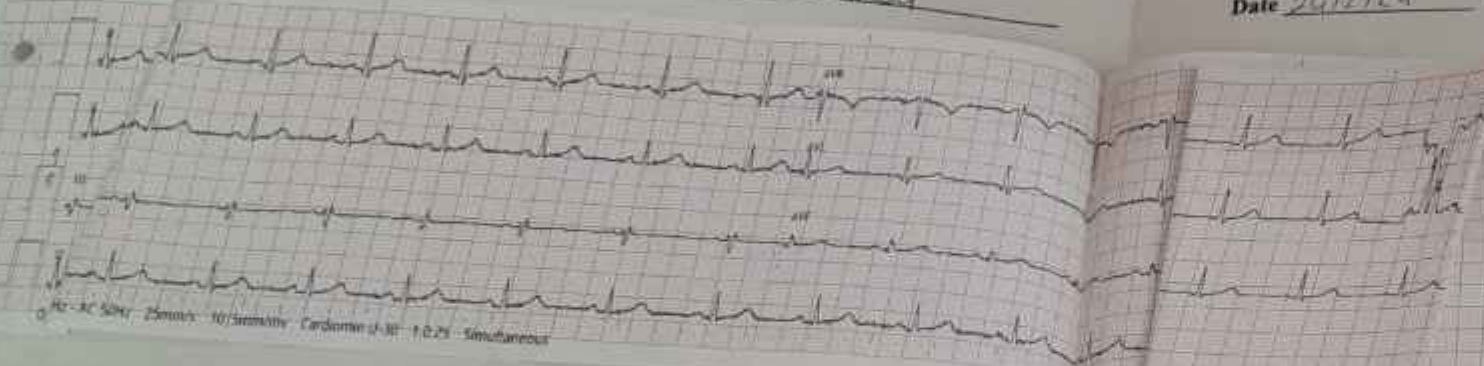
HOLMGRAN LASER

Date 24/12/24

Time 8:20 AM

Age 32

Gender M



ECG - 12 Leads - 25mm/s - 10/3mm/mV - Cardiomax II-30 - 1.0.24 - Simultaneous

HR	73 bpm
PR	138 ms
QRS	88 ms
QT/QTc	292/415 ms
PRP/SP1	56/16/31°
RV5+SV1	1.338/0.473 mV
RV5+SV7	1.311 mV

Confirm and sign: Examination time: 2024-02-24 07:44:42