

# SUBURBAN DIAGNOSTICS KANDIVALI EAST

# REPORT



Email:

3177 / ROHIT SHARMA / 35 Yrs / M / 179 Cms / 74 Kg Date: 23 / 03 / 2024 10:12:44 AM Refd By : ARCOFEMI

## REPORT :

Heart Rate 160.0 bpm

Systolic BP 170.0 mmHg Diastolic BP 80.0 mmHg

Exercise Time 09:34 Mins, Ectopic Beats 0.0

METS 10.8 Test End Reason , Heart Rate Achieved Target Heart Rate 87% of 185

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

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

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.

Post Modern Rd. 3, Aengani,

Thakur Vihar, Kandivali (east),

Mumbai - 400101.

Tel : 617700000

**Dr. Akhil P. Parulekar.**

MBBS, MD, Medicine

DIP Cardiology

Reg No. 2012082483

Doctor : DR.AKHIL PARULEKAR

# SUBURBAN DIAGNOSTICS KANDIVALI EAST

Email:

Report



3177 (2408320836) / ROHIT SHARMA / 35 Yrs / M / 179 Cms / 74 Kg  
 Date: 23 / 03 / 2024 10:12:44 AM Refd By : ARCOFEMI Examined By: DR AKHIL PARULEKAR

Stage	Time	Duration	Speed(Kmph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:04	0:04	00.0	00.0	01.0	057	31%	120/80	068	00	
Standing	00:32	0:28	00.0	00.0	01.0	059	32%	120/80	070	00	
HV	00:40	0:08	00.0	00.0	01.0	051	28%	120/80	061	00	
ExStart	01:05	0:25	00.0	00.0	01.0	073	39%	120/80	087	00	
BRUCE Stage 1	04:05	3:00	02.7	10.0	04.7	098	53%	120/80	117	00	
BRUCE Stage 2	07:05	3:00	04.0	12.0	07.1	107	58%	140/80	149	00	
BRUCE Stage 3	10:05	3:00	05.5	14.0	10.2	157	85%	150/80	235	00	
PeakEx	10:39	0:34	06.8	16.0	10.8	160	86%	170/80	272	00	
Recovery	11:39	1:00	00.0	00.0	04.2	118	64%	170/80	200	00	
Recovery	11:48	1:10	00.0	00.0	03.2	112	61%	150/80	168	00	

## FINDINGS :

Exercise Time : 09:34  
 Initial HR (ExStrt) : 73 bpm 39% of Target 185  
 Initial BP (ExStrt) : 120/80 (mm/Hg)  
 Max Workload Attained : 10.8 Good response to induced stress  
 Duke Treadmill Score : 06.3  
 Test End Reasons : Heart Rate Achieved

Max HR Attained 160 bpm 86% of Target 185  
 Max BP Attained 170/80 (mm/Hg)

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

Doctor : DR.AKHIL PARULEKAR

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.  
 Row House 185, J. Aengan,  
 Thakur Village, Kandivali (east),  
 Mumbai - 400101.  
 Tel : 617000000

SUBURBAN DIAGNOSTICS KANDIVALI EAST

SUPINE ( 00:04 )

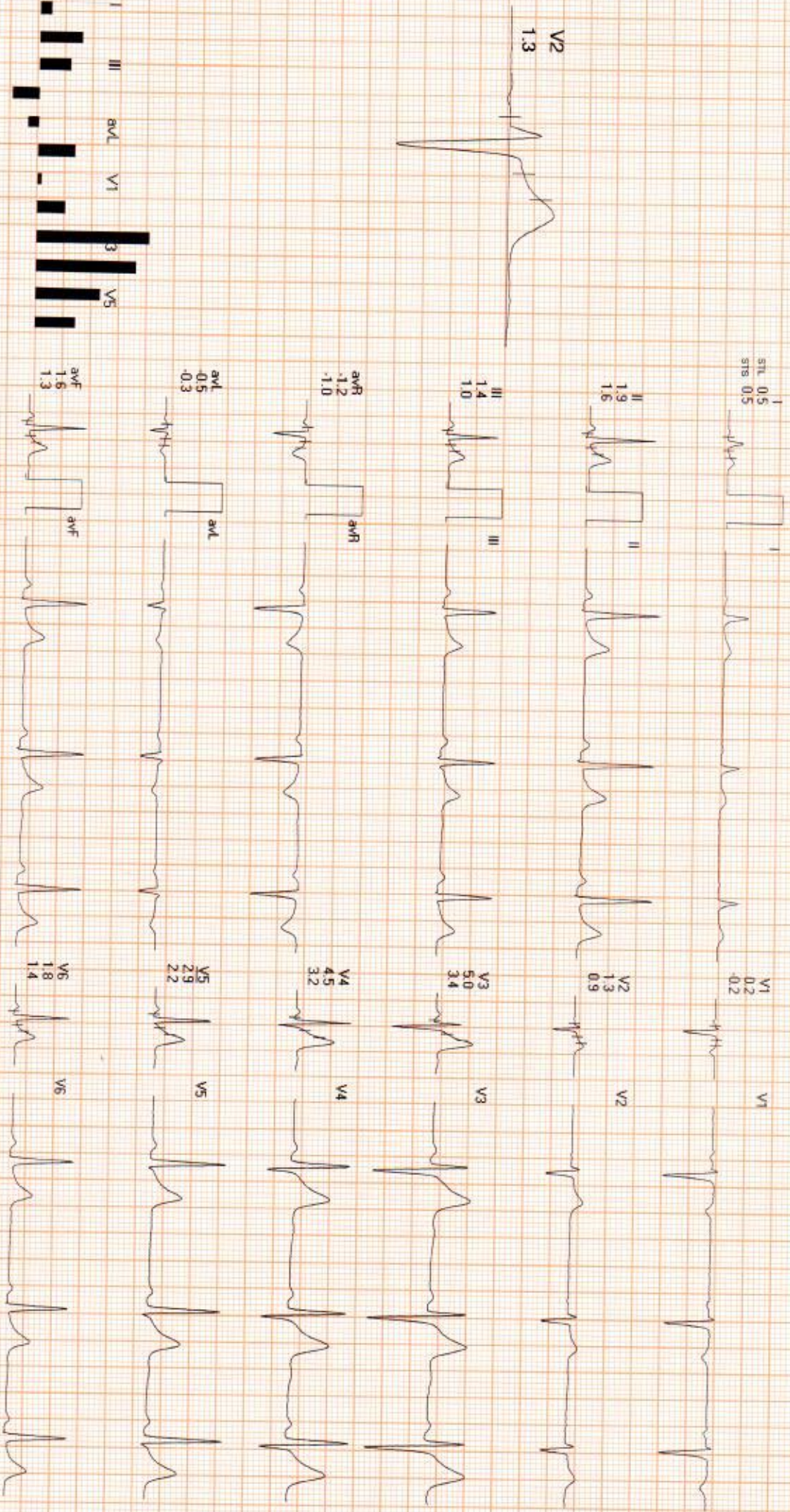


3177 (2408320836) / ROHIT SHARMA / 35 Yrs / M / 179 Cms / 74 Kg / HR : 57

Date: 23 / 03 / 2024 10:12:44 AM METS: 1.0/ 57 bpm 31% of THR BP: 120/80 mmHg Raw ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

4X 80 ms Post J

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



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

# SUBURBAN DIAGNOSTICS KANDIVALI EAST

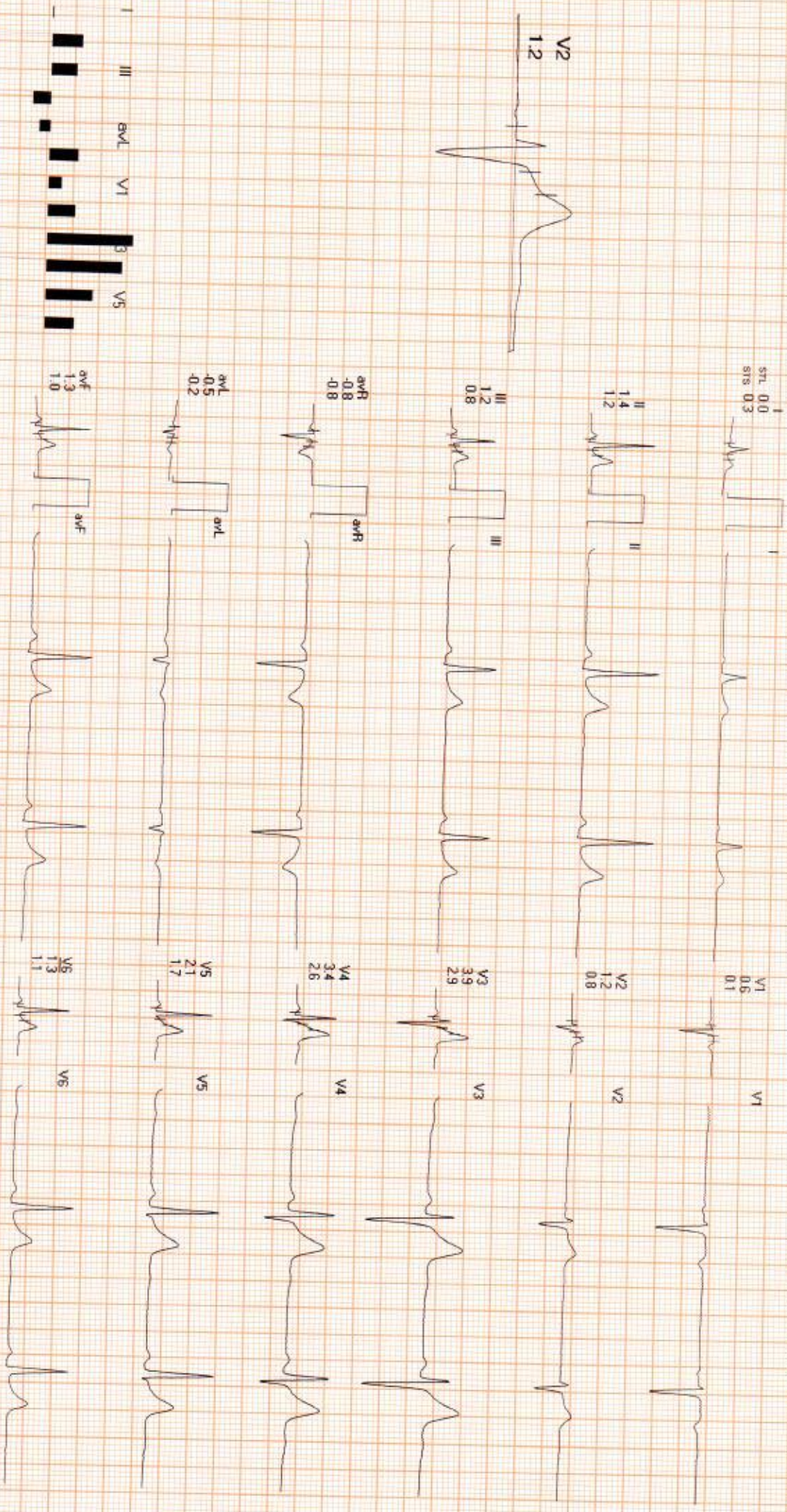
3177 (2408320836) / ROHIT SHARMA / 35 Yrs / M / 179 Cms / 74 Kg / HR : 59

Date: 23 / 03 / 2024 10:12:44 AM METS: 1.0 / 59 bpm 32% of THR BP- 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

EXTime: 00:00:00 Kropch. 0.0%

25 mm/Sec. 1.0 Cm/mV

4X 80 mS Post J



REMARKS: II aVR aVF V2 V4 V6

STANDING ( 00:28 )



SUBURBAN DIAGNOSTICS KANDIVALI EAST

HV ( 00:08 )

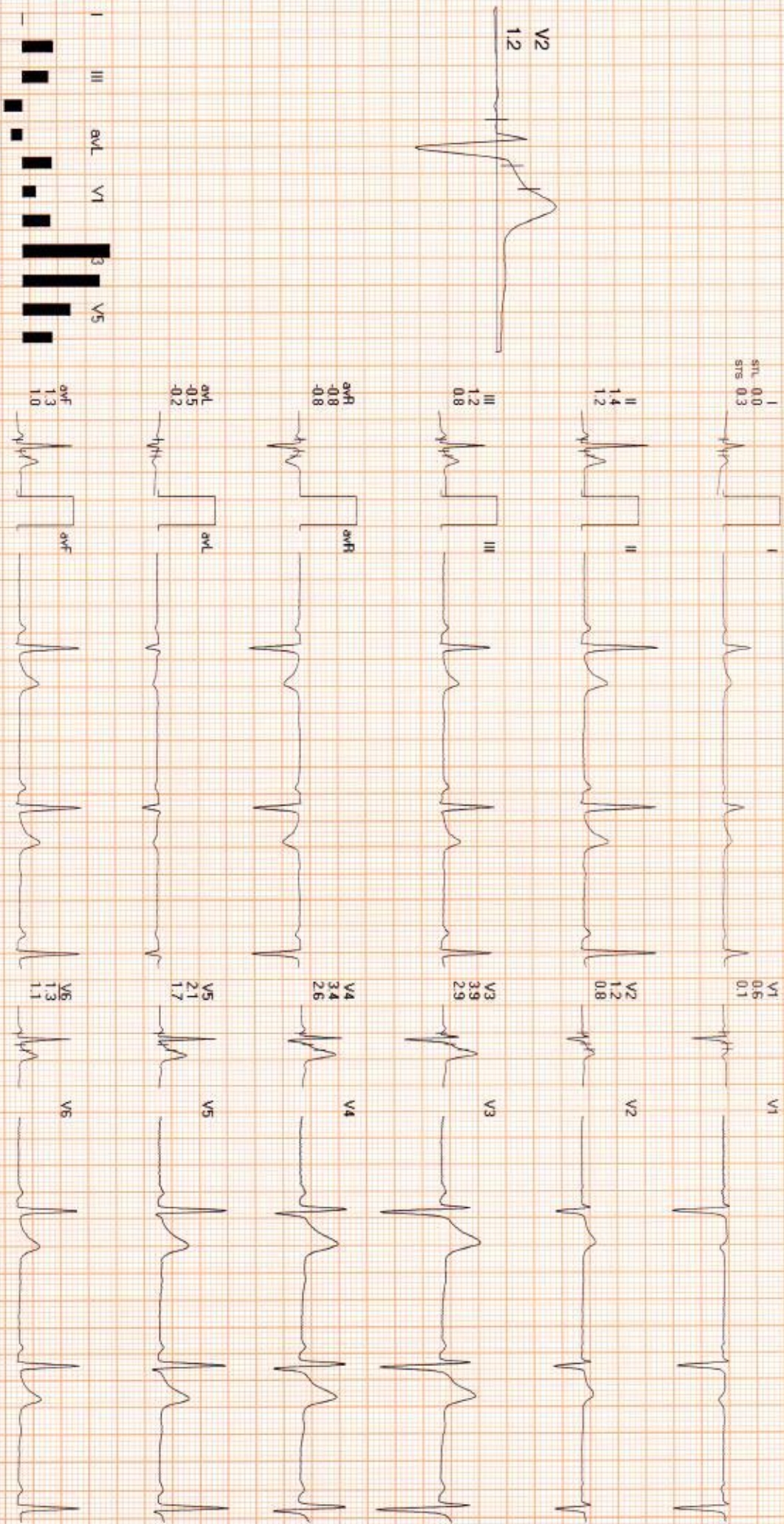


3177 (2408320836) / ROHIT SHARMA / 35 Yrs / M / 179 Cms / 74 Kg / HR : 51

Date: 23 / 03 / 2024 10:12:44 AM METS: 1.0 / 51 bpm 28% of THR BP: 120/80 mmHg Raw ECG/BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

4X 80 mS Post J

EXTime: 00:00 0.01Kmph. 0.0%  
25 mm/Sec. 1.0 Cm/mV



REMARKS

# SUBURBAN DIAGNOSTICS KANDIVALI EAST

EXStnt

3177 (2408320836) / ROHIT SHARMA / 35 Yrs / M / 179 Cms / 74 Kg / HR : 73



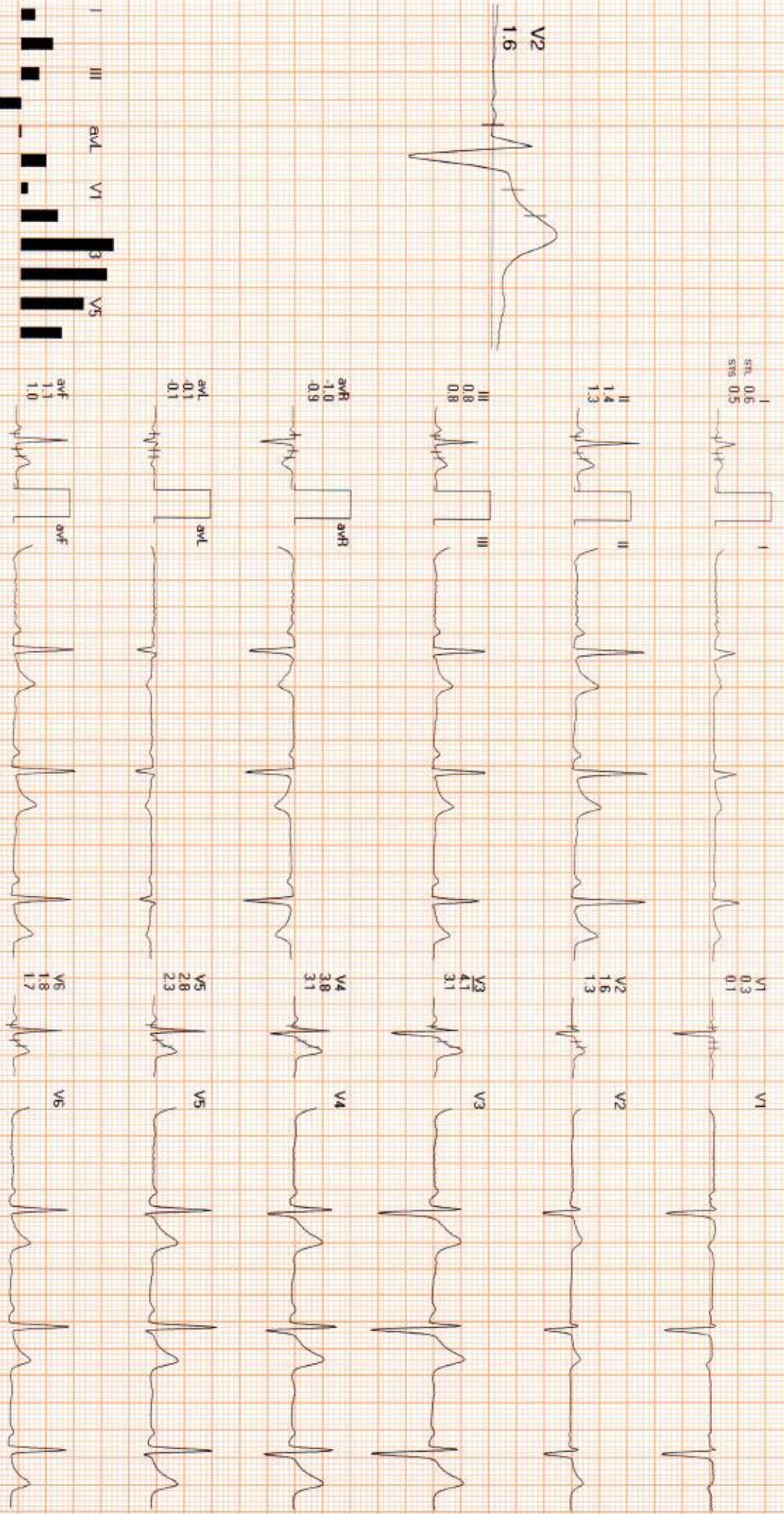
Date: 23 / 03 / 2024 10:12:44 AM

METS: 1.0 / 73 bpm 39% of THR BP: 120/80 mmHg Pwv ECG/BLC On/ Natch On/ HF 0.05 Hz/ LF 35 Hz

ExTime: 00:00 0.0 KmPh, 0.0%

4X 70 ms Post J

25 mv/Sec 1.0 Cm/mV



REMARKS:

SUBURBAN DIAGNOSTICS KANDIVALI EAST

BRUCE : Stage 1 ( 03:00 )

3177 (2408320836) / ROHIT SHARMA / 35 Yrs / M / 179 Cms / 74 Kg / HR : 98



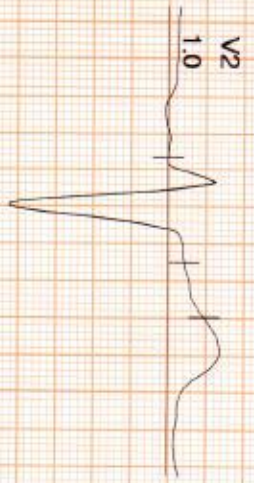
Date: 23 / 03 / 2024 10:12:44 AM

METS: 4.7 / 98 bpm 53% of THR BP: 120/80 mmHg Row ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

EXTime: 03:00 2.7 Kmph 10.0%

4X 70 ms Post J

25 mm/Sec 1.0 Cm/mV



PR 160  
QRS 100  
QT 350

V1 0.2  
V2 0.2

I 0.5  
II 1.6  
III 1.1

V3 4.3  
V4 3.6  
V5 2.6  
V6 1.7

aVR -1.0  
aVL -0.3  
aVF 1.4

V7 1.4  
V8 1.2

PR 160  
QRS 100  
QT 350

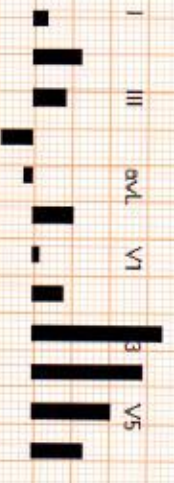
V1 0.2  
V2 0.2

I 0.5  
II 1.6  
III 1.1

V3 4.3  
V4 3.6  
V5 2.6  
V6 1.7

aVR -1.0  
aVL -0.3  
aVF 1.4

V7 1.4  
V8 1.2



PR 160  
QRS 100  
QT 350

V1 0.2  
V2 0.2

REMARKS:



**SUBURBAN DIAGNOSTICS KANDIVALI EAST**

3177 (2408320836) / ROHIT SHARMA / 35 Yrs / M / 179 Cms / 74 Kg / HR : 107

**BRUCE : Stage 2 ( 03:00 )**

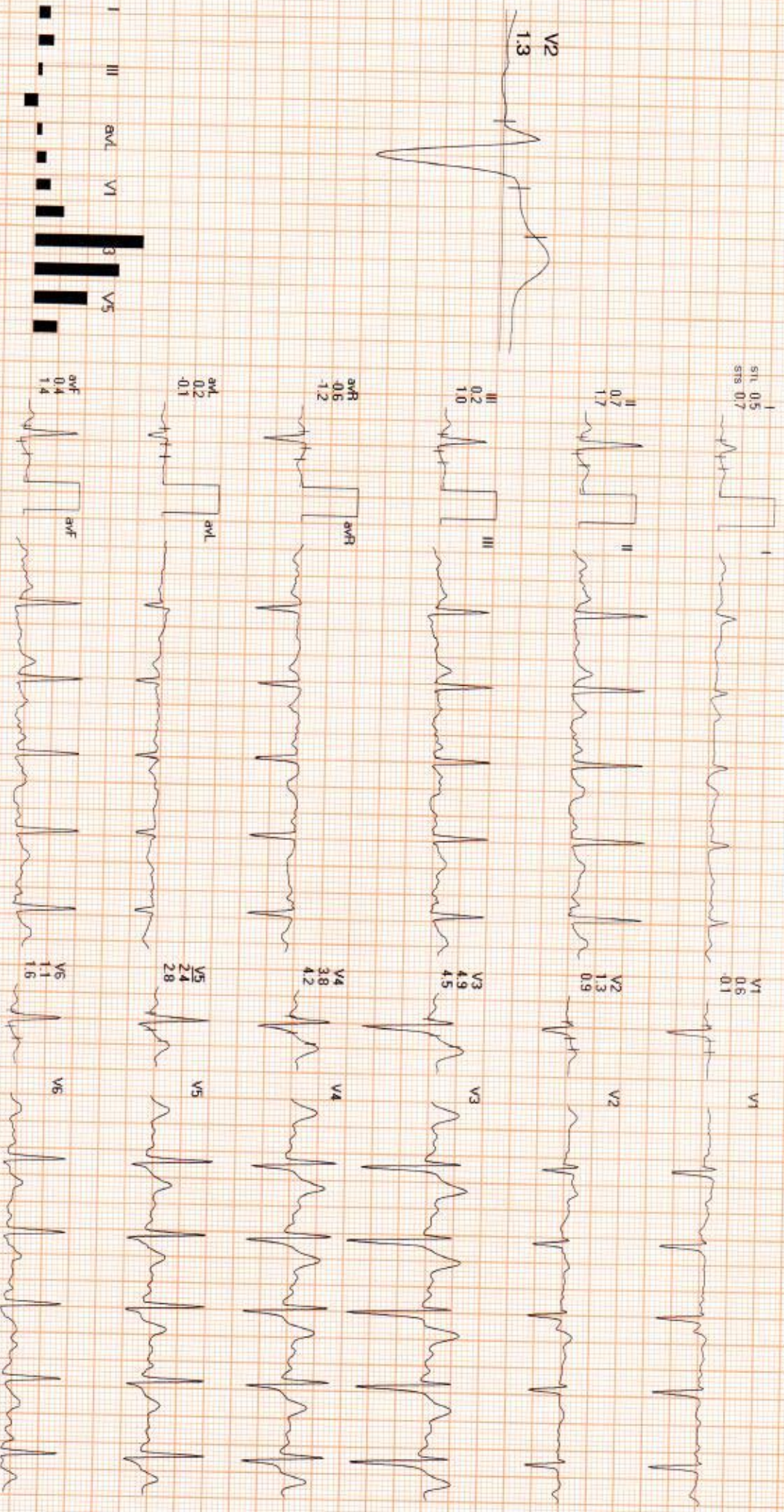


Date: 23 / 03 / 2024 10:12:44 AM METS: 7.1 / 107 bpm 58% of THR BP: 140/80 mmHg Raw ECG/ ELC On/ Notch On/ HF 0.05 Hz, LF 35 Hz

ExTime: 06:00 4.0 Kmph 12.0%

4X 80 ms Post J

25 mm/Sec 1.0 Cm/mV



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



**SUBURBAN DIAGNOSTICS KANDIVALI EAST**

3177 (2408320836) / ROHIT SHARMA / 35 Yrs / M / 179 Cms / 74 Kg / HR : 157

**BRUCE : Stage 3 ( 03:00 )**



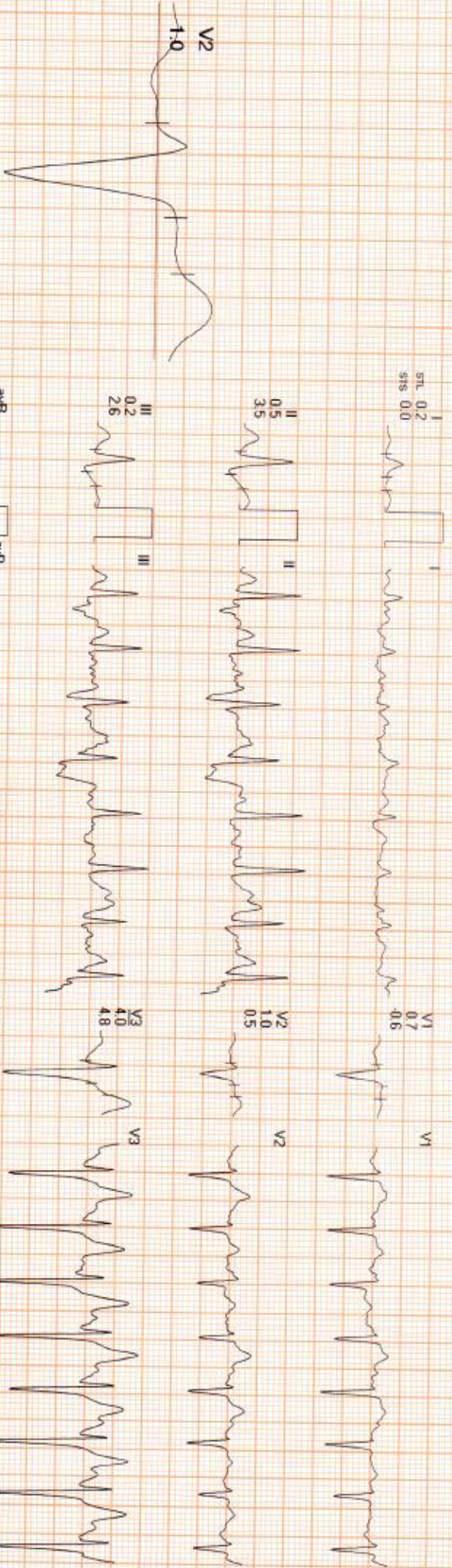
Date: 23 / 03 / 2024 10:12:44 AM

METS: 10.2/157 bpm 85% of THR BP: 150/80 mmHg Raw ECG/BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

EXTIME: 09:00 5.5 Km/h 14.0%

4X 60 m/s Post J

25 mm/Sec 1.0 Cm/hV



REMARKS

**SUBURBAN DIAGNOSTICS KANDIVALI EAST**

**PeakEx**



3177 (2408320836) / ROHIT SHARMA / 35 Yrs / M / 179 Cms / 74 Kg / HR : 160

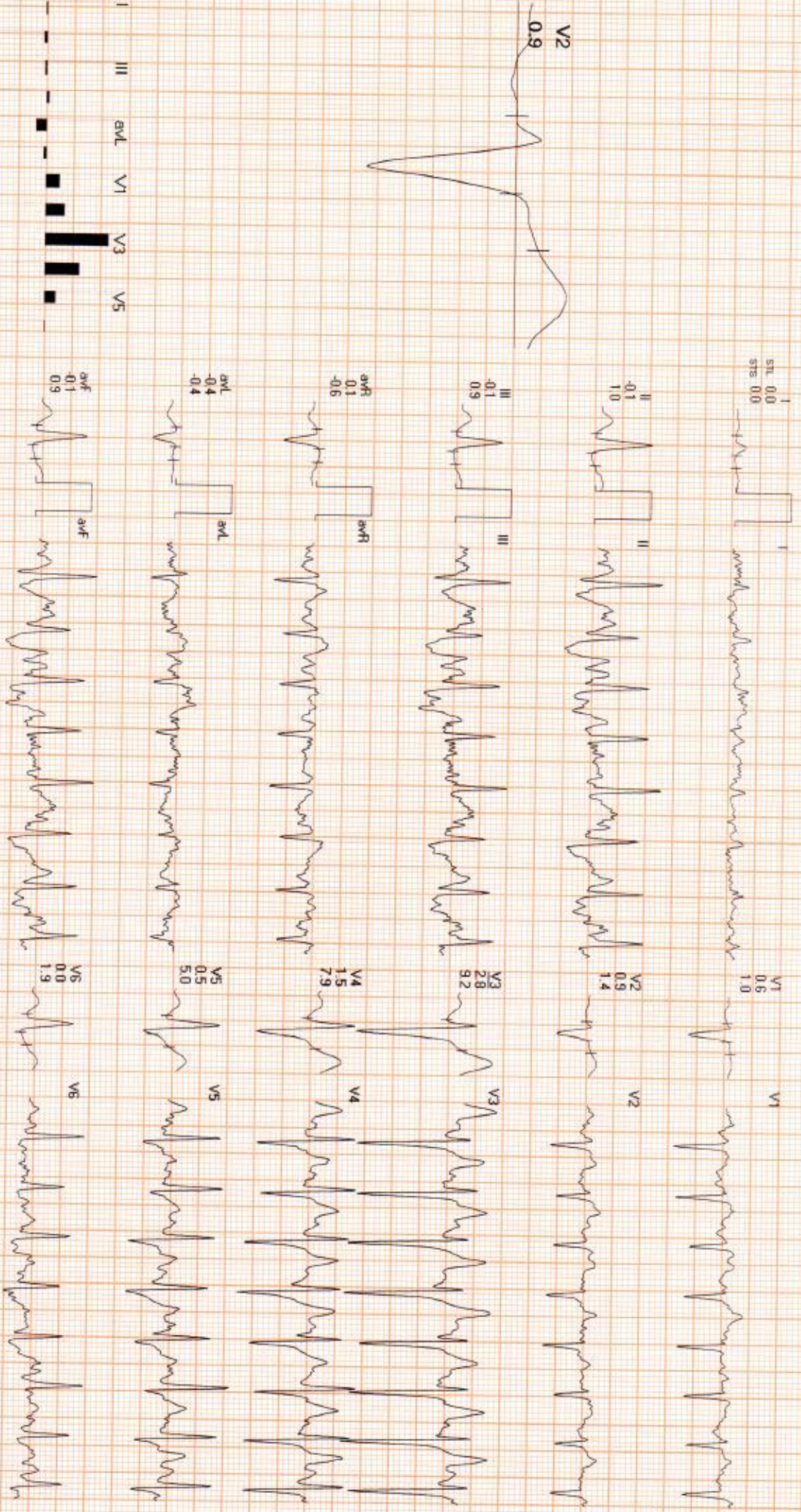
Date: 23 / 03 / 2024 10:12:44 AM

METS: 10.8 / 160 bpm 86% of THR BP: 170/80 mmHg Pwv ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

EXTime: 09:34 6.8 Km/h, 16.0%

4X 60 ms Peak J

25 mm/Sec 1.0 Cm/mV



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

# SUBURBAN DIAGNOSTICS KANDIVALI EAST

Recovery : ( 01:00 )

3177 (2408220836) / ROHIT SHARMA / 35 Yrs / M / 179 Cms / 74 Kg / HR : 118



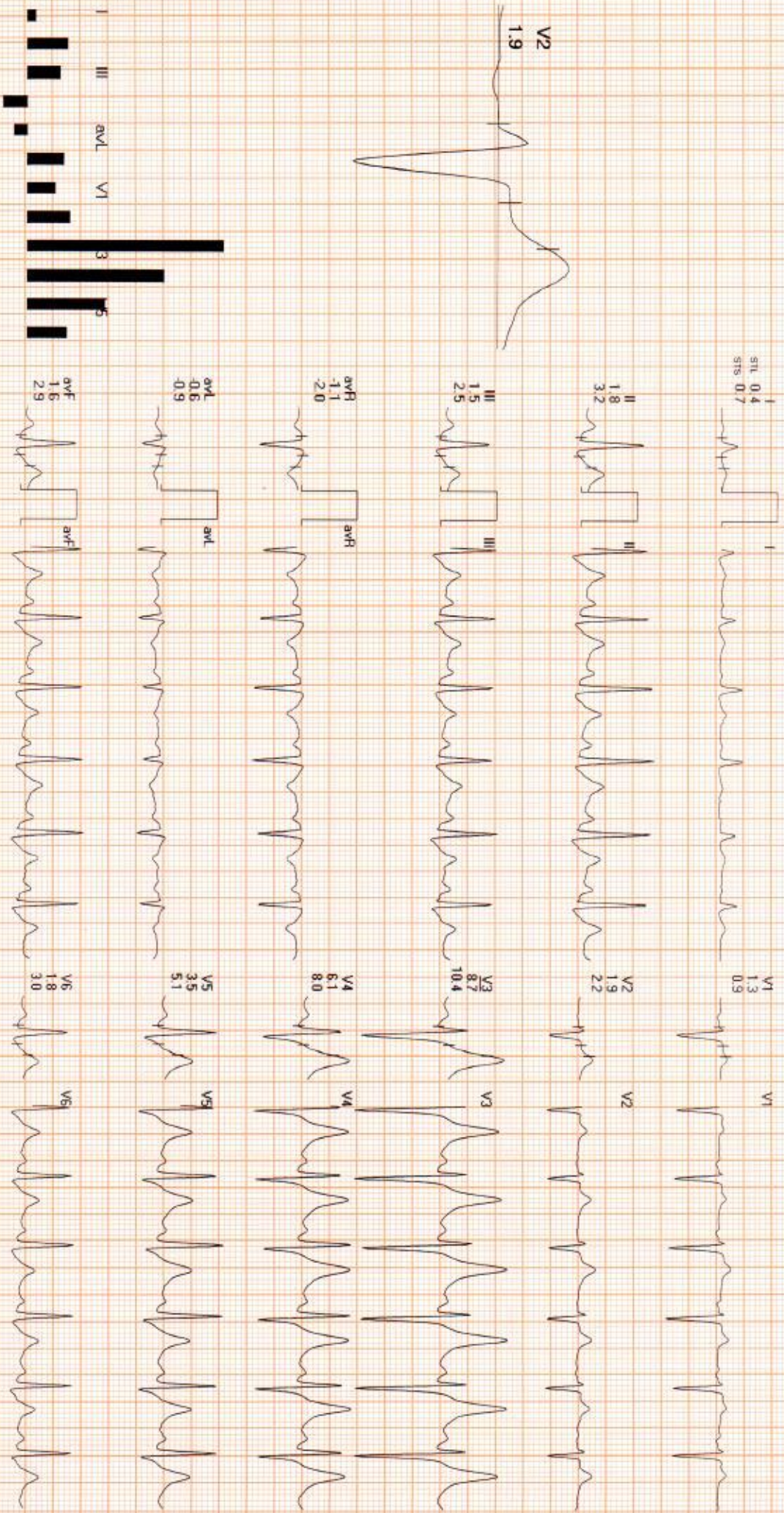
Date: 23 / 03 / 2024 10:12:44 AM

METS: 4.2/118 bpm 64% of THR BP: 120/80 mmHg Raw ECG/BLC On/Notch On/HF 0.05 Hz/LF 35 Hz

EXTime: 09:34 0.0kmph 0.0%

4X 70 ms Post J

25 mm/Sec 1.0Cm/mV



REMARKS  
II aVR aVF V2 V4 V6

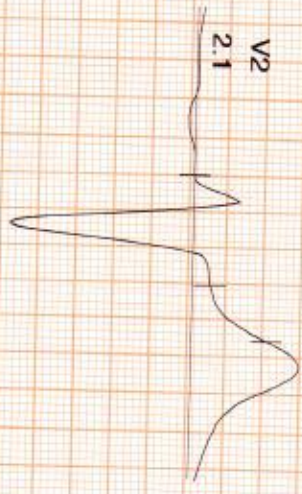
**SUBURBAN DIAGNOSTICS KANDIVALI EAST**

3177 (2408320836) / ROHIT SHARMA / 35 Yrs / M / 179 Cms / 74 Kg / HR 112

Date: 23 / 03 / 2024 10:12:44 AM METS: 1.0 / 112 bpm 61% of THR BP: 150/80 mmHg Raw ECG/BLD On/Notch On/HF 0.05 Hz/DF 35 Hz

EXTime: 09:34 0.0 Kmph 0.0%

25 mm/Sec 1.0 Cm/mV



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

Recovery : ( 01:09 )





CID : 2408320836  
Name : MR.SHARMA ROHIT ASHOK  
Age / Gender : 35 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 23-Mar-2024 / 08:48  
Reported : 23-Mar-2024 / 10:42

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	15.2	13.0-17.0 g/dL	Spectrophotometric
RBC	5.01	4.5-5.5 mil/cmm	Elect. Impedance
PCV	45.8	40-50 %	Measured
MCV	92	80-100 fl	Calculated
MCH	30.4	27-32 pg	Calculated
MCHC	33.3	31.5-34.5 g/dL	Calculated
RDW	15.7	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	6050	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	39.6	20-40 %	
Absolute Lymphocytes	2395.8	1000-3000 /cmm	Calculated
Monocytes	9.7	2-10 %	
Absolute Monocytes	586.8	200-1000 /cmm	Calculated
Neutrophils	45.4	40-80 %	
Absolute Neutrophils	2746.7	2000-7000 /cmm	Calculated
Eosinophils	4.4	1-6 %	
Absolute Eosinophils	266.2	20-500 /cmm	Calculated
Basophils	0.9	0.1-2 %	
Absolute Basophils	54.5	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<b><u>PLATELET PARAMETERS</u></b>			
Platelet Count	252000	150000-400000 /cmm	Elect. Impedance
MPV	9.0	6-11 fl	Calculated
PDW	15.5	11-18 %	Calculated
<b><u>RBC MORPHOLOGY</u></b>			
Hypochromia	-		
Microcytosis	-		



CID : 2408320836  
Name : MR.SHARMA ROHIT ASHOK  
Age / Gender : 35 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 23-Mar-2024 / 08:48  
Reported : 23-Mar-2024 / 10:46

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

Specimen: EDTA Whole Blood

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

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

**Interpretation:**

Factors that increase ESR: Old age, Pregnancy, Anemia

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

**Limitations:**

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

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

**Reference:**

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

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

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



*Bmhasakar*

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



CID : 2408320836  
Name : MR.SHARMA ROHIT ASHOK  
Age / Gender : 35 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code  
Collected : 23-Mar-2024 / 08:48  
Reported : 23-Mar-2024 / 11:16

**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	89.6	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	89.0	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.59	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.11	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.48	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.7	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.9	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.8	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.8	1 - 2	Calculated
SGOT (AST), Serum	46.9	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	84.1	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	35.6	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	105.6	40-130 U/L	Colorimetric
BLOOD UREA, Serum	26.2	12.8-42.8 mg/dl	Kinetic
BUN, Serum	12.2	6-20 mg/dl	Calculated
CREATININE, Serum	0.88	0.67-1.17 mg/dl	Enzymatic



CID : 2408320836  
Name : MR.SHARMA ROHIT ASHOK  
Age / Gender : 35 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 23-Mar-2024 / 14:05  
Reported : 23-Mar-2024 / 18:22

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eGFR, Serum	115	(ml/min/1.73sqm)	Calculated
		Normal or High: Above 90	
		Mild decrease: 60-89	
		Mild to moderate decrease: 45-59	
		Moderate to severe decrease: 30-44	
		Severe decrease: 15-29	
		Kidney failure: <15	

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

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

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



*Bmhasakar*

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





CID : 2408320836  
Name : MR.SHARMA ROHIT ASHOK  
Age / Gender : 35 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 23-Mar-2024 / 08:48  
Reported : 23-Mar-2024 / 11:07

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.6	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	114.0	mg/dl	Calculated

**Intended use:**

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

**Clinical Significance:**

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

**Test Interpretation:**

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

**Factors affecting HbA1c results:**

**Increased in:** High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

**Decreased in:** Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

**Reflex tests:** Blood glucose levels, CGM (Continuous Glucose monitoring)

**References:** ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

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

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



*Bmhasakar*

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



CID : 2408320836  
Name : MR.SHARMA ROHIT ASHOK  
Age / Gender : 35 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 23-Mar-2024 / 08:48  
Reported : 23-Mar-2024 / 18:24

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Application To Scan the Code

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**EXAMINATION OF FAECES**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
Colour	Brown	Brown	-
Form and Consistency	Semi Solid	Semi Solid	-
Mucus	Absent	Absent	-
Blood	Absent	Absent	-
<b><u>CHEMICAL EXAMINATION</u></b>			
Reaction (pH)	Acidic (6.0)	-	pH Indicator
Occult Blood	Absent	Absent	Guaiaac
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Protozoa	Absent	Absent	-
Flagellates	Absent	Absent	-
Ciliates	Absent	Absent	-
Parasites	Absent	Absent	-
Macrophages	Absent	Absent	-
Mucus Strands	Absent	Absent	-
Fat Globules	Absent	Absent	-
RBC/hpf	Absent	Absent	-
WBC/hpf	Absent	Absent	-
Yeast Cells	Absent	Absent	-
Undigested Particles	Present +	-	-
Concentration Method (for ova)	No ova detected	Absent	-
Reducing Substances	-	Absent	Benedicts

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



*Dr. Jageshwar Mandal*

**Dr.JAGESHWAR MANDAL**  
**CHOUPAL**  
**MBBS, DNB PATH**  
**Pathologist**



CID : 2408320836  
Name : MR.SHARMA ROHIT ASHOK  
Age / Gender : 35 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

Collected : 23-Mar-2024 / 08:48  
Reported : 23-Mar-2024 / 15:01

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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.005	1.001-1.030	Chemical Indicator
Transparency	Clear	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	1-2		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	2-3	Less than 20/hpf	
Others	-		

**Interpretation:** The concentration values of Chemical analytes corresponding to the grading given in the report are as follows:

- Protein ( 1+ = 25 mg/dl , 2+ =75 mg/dl , 3+ = 150 mg/dl , 4+ = 500 mg/dl )
- Glucose(1+ = 50 mg/dl , 2+ =100 mg/dl , 3+ =300 mg/dl ,4+ =1000 mg/dl )
- Ketone (1+ =5 mg/dl , 2+ = 15 mg/dl , 3+= 50 mg/dl , 4+ = 150 mg/dl )

Reference: Pack inert

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



*Bmhasakar*

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



CID : 2408320836  
Name : MR.SHARMA ROHIT ASHOK  
Age / Gender : 35 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

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

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

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

Specimen: EDTA Whole Blood and/or serum

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

**Limitations:**

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

**References:**

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

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



*Anupa*

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



CID : 2408320836  
Name : MR.SHARMA ROHIT ASHOK  
Age / Gender : 35 Years / Male  
Consulting Dr. : -  
Reg. Location : Kandivali East (Main Centre)

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	262.5	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	350.4	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	33.4	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	229.1	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	160.1	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	69.0	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	7.9	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	4.8	0-3.5 Ratio	Calculated

Note : LDL test is performed by direct measurement.

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



*Bmhasakar*

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



CID : 2408320836  
 Name : MR.SHARMA ROHIT ASHOK  
 Age / Gender : 35 Years / Male  
 Consulting Dr. : -  
 Reg. Location : Kandivali East (Main Centre)

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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**THYROID FUNCTION TESTS**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	4.4	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	17.1	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	3.03	0.35-5.5 microIU/ml	ECLIA



**CID** : 2408320836  
**Name** : MR.SHARMA ROHIT ASHOK  
**Age / Gender** : 35 Years / Male  
**Consulting Dr.** : -  
**Reg. Location** : Kandivali East (Main Centre)

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**Interpretation:**

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

**Clinical Significance:**

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

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

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

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

**Limitations:**

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

**Reference:**

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

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

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



*Bmhasakar*

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

Name : MR. SHARMA ROHIT ASHOK

Age / Gender : 35 Years/Male

Consulting Dr. :

Reg. Location : Kandivali East (Main Centre)

Collected : 23-Mar-2024 / 08:40

Reported : 24-Mar-2024 / 11:29

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### PHYSICAL EXAMINATION REPORT

#### History and Complaints:

ureteric calculi-2021

#### EXAMINATION FINDINGS:

Height (cms): 179 cms  
Temp (0c): Afebrile  
Blood Pressure (mm/hg): 120/80  
Pulse: 72/min

Weight (kg): 74 kgs  
Skin: Normal  
Nails: Normal  
Lymph Node: Not Palpable

#### Systems

Cardiovascular: Normal  
Respiratory: Normal  
Genitourinary: Normal  
GI System: Normal  
CNS: Normal

#### IMPRESSION:

A SGT, SLM  
Hypertension  
USA fatty liver  
renal non-obstructive Calculus

#### ADVICE:

Low fatty diet  
Surgeon opinion  
? R. Kumar (cont)  
SGT & SLM

#### CHIEF COMPLAINTS:

1) Hypertension: No



Name : MR.SHARMA ROHIT ASHOK

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- |  |    |
|--|----|
| 2) IHD                                   | No |
| 3) Arrhythmia                            | No |
| 4) Diabetes Mellitus                     | No |
| 5) Tuberculosis                          | No |
| 6) Asthama                               | No |
| 7) Pulmonary Disease                     | No |
| 8) Thyroid/ Endocrine disorders          | No |
| 9) Nervous disorders                     | No |
| 10) GI system                            | No |
| 11) Genital urinary disorder             | No |
| 12) Rheumatic joint diseases or symptoms | No |
| 13) Blood disease or disorder            | No |
| 14) Cancer/lump growth/cyst              | No |
| 15) Congenital disease                   | No |
| 16) Surgeries                            | No |
| 17) Musculoskeletal System               | No |

## PERSONAL HISTORY:

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

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

Dr. Jagruti Dhale

MBBS

Consultant Physician

Reg. No. 69548

Dr.JAGRUTI DHALE

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

<b>CID</b>	: 2408320836		
<b>Name</b>	: Mr SHARMA ROHIT ASHOK		
<b>Age / Sex</b>	: 35 Years/Male		
<b>Ref. Dr</b>	:	<b>Reg. Date</b>	: 23-Mar-2024
<b>Reg. Location</b>	: Kandivali East Main Centre	<b>Reported</b>	: 23-Mar-2024 / 12:52

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### X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

#### IMPRESSION:

**NO SIGNIFICANT ABNORMALITY IS DETECTED.**

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



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

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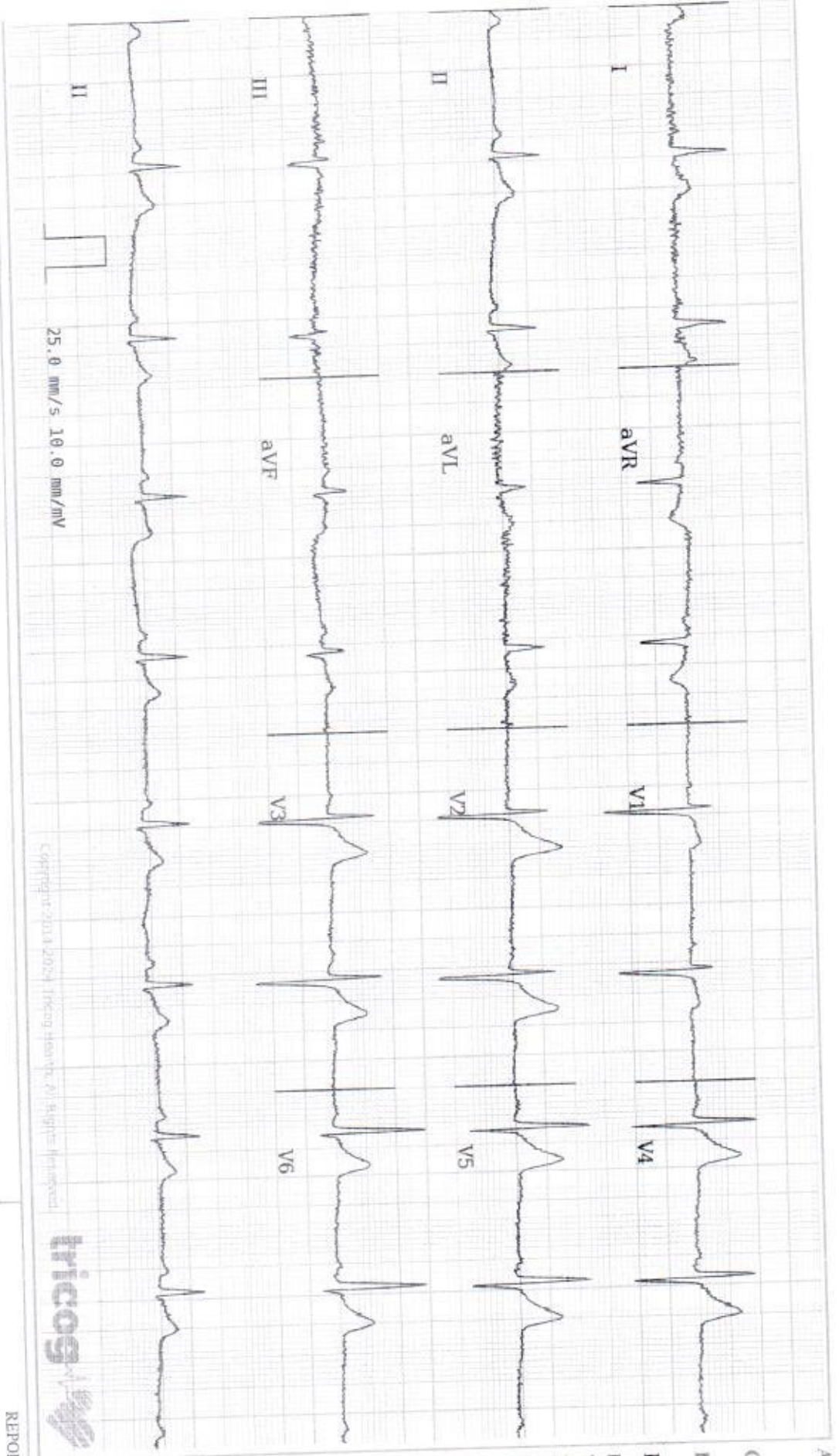
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HEALTHLINE: 022-6170-0000 | E-MAIL: customerservice@suburbandiagnosics.com | WEBSITE: www.suburbandiagnosics.com

Patient Name: SHARMA ROHIT ASHOK  
Patient ID: 2408320836

SUBURBAN DIAGNOSTICS - KANDIVALI EAST I  
Date and Time: 23rd Mar 24 9:48 AM



25.0 mm/s 10.0 mm/mV

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Age 35 NA NA  
years months days

Gender Male

Heart Rate 55bpm

Patient Vitals

BP: 120/80 mmHg

Weight: 74 Kg

Height: 179 cm

Pulse: NA

Spo2: NA

Resp: NA

Others:

Measurements

QRSD: 84ms

QT: 374ms

QTcB: 357ms

PR: 154ms

P-R-T: 64° 170° 31°

REPORTED BY

DR. AKHIL PARTHEKAR  
MBBS, MD, MEDICINE, DNB Cardiology  
Cardiologist  
2012002483

Disclaimer: This 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. This patient's data was not selected by the distribution software team from the ECG.

CID : 2408320836  
Name : Mr SHARMA ROHIT ASHOK  
Age / Sex : 35 Years/Male  
Ref. Dr :  
Reg. Location : Kandivali East Main Centre

Reg. Date : 23-Mar-2024  
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## USG WHOLE ABDOMEN

### LIVER:

The liver is normal in size (14.2 cm) shape and smooth margins. It shows bright parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein measures 10 mm and CBD appears measures 3.5 mm. 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 mass lesions seen

### PANCREAS:

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

### KIDNEYS:

Right kidney measures 11.0 x 4.1 cm. Left kidney measures 10.1 x 4.4 cm.  
A 4.6 mm sized solitary non obstructive calculus noted at mid pole of left kidney.  
Both the kidneys are normal in size shape and echotexture.  
No evidence of any hydronephrosis or mass lesion seen.

### SPLEEN:

The spleen is normal in size (9 cm) and echotexture. No evidence of focal lesion is noted.  
There is no evidence of any lymphadenopathy or ascites.

### URINARY BLADDER:

The urinary bladder is well distended and reveal no intraluminal abnormality.  
Pre-void volume - 335 cc, Post-void residue - Nil..

### PROSTATE:

The prostate is normal in size and measures 3.7 x 2.9 x 2.9 cm and volume is 16 cc.

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**IMPRESSION:**

**GRADE I FATTY LIVER.**

**LEFT RENAL NON OBSTRUCTIVE CALCULUS AS DESCRIBED.**

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



DR. Akash Chhari  
MBBS. MD. Radio-Diagnosis Mumbai  
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