



CID : 2410210993  
Name : MRS.NEELAM TRIVEDI  
Age / Gender : 31 Years / Female  
Consulting Dr. : -  
Reg. Location : Mahavir Nagar, Kandivali West (Main Centre)

Collected : 11-Apr-2024 / 09:06  
Reported : 11-Apr-2024 / 12:31

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**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	12.1	12.0-15.0 g/dL	Spectrophotometric
RBC	3.84	3.8-4.8 mil/cmm	Elect. Impedance
PCV	36.7	36-46 %	Measured
MCV	96	80-100 fl	Calculated
MCH	31.6	27-32 pg	Calculated
MCHC	33.1	31.5-34.5 g/dL	Calculated
RDW	12.6	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	5180	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	34.8	20-40 %	
Absolute Lymphocytes	1802.6	1000-3000 /cmm	Calculated
Monocytes	5.2	2-10 %	
Absolute Monocytes	269.4	200-1000 /cmm	Calculated
Neutrophils	51.5	40-80 %	
Absolute Neutrophils	2667.7	2000-7000 /cmm	Calculated
Eosinophils	7.9	1-6 %	
Absolute Eosinophils	409.2	20-500 /cmm	Calculated
Basophils	0.6	0.1-2 %	
Absolute Basophils	31.1	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<b><u>PLATELET PARAMETERS</u></b>			
Platelet Count	165000	150000-400000 /cmm	Elect. Impedance
MPV	8.1	6-11 fl	Calculated
PDW	14.2	11-18 %	Calculated
<b><u>RBC MORPHOLOGY</u></b>			
Hypochromia	-		
Microcytosis	-		





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Reported : 11-Apr-2024 / 14:03

**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	97.2	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	88.9	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.41	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.25	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.16	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.0	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.0	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	3	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.3	1 - 2	Calculated
SGOT (AST), Serum	14.0	5-32 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	15.9	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	11.9	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	87.9	35-105 U/L	Colorimetric
BLOOD UREA, Serum	20.1	12.8-42.8 mg/dl	Kinetic
BUN, Serum	9.4	6-20 mg/dl	Calculated
CREATININE, Serum	0.69	0.51-0.95 mg/dl	Enzymatic



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Reported : 11-Apr-2024 / 15:55

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eGFR, Serum	119	(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	5.1	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 Borivali Lab, Borivali West  
\*\*\* End Of Report \*\*\*



*Bmhasakar*

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





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Collected : 11-Apr-2024 / 09:06  
Reported : 11-Apr-2024 / 12:13

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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*

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Pathologist



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Collected : 11-Apr-2024 / 09:06  
Reported : 11-Apr-2024 / 14:47

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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)	7.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.005	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	40	-	-
<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	2-3		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	+(>20/hpf)	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 \*\*\*



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**M.D. (PATH)**  
**Pathologist**



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Reported : 11-Apr-2024 / 14:46

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

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

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

Specimen: EDTA Whole Blood and/or serum

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

**Limitations:**

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

**References:**

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

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



*Dr. Vrushi Shroff*

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





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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	151.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	61.2	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	46.1	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	104.9	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	93.0	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	11.9	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.3	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.0	0-3.5 Ratio	Calculated

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



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M.D. (PATH)  
Pathologist





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Name : MRS.NEELAM TRIVEDI  
Age / Gender : 31 Years / Female  
Consulting Dr. : -  
Reg. Location : Mahavir Nagar, Kandivali West (Main Centre)

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Collected : 11-Apr-2024 / 09:06  
Reported : 11-Apr-2024 / 13:46

**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	5.3	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	14.9	11.5-22.7 pmol/L First Trimester:9.0-24.7 Second Trimester:6.4-20.59 Third Trimester:6.4-20.59	ECLIA
sensitiveTSH, Serum	2.61	0.35-5.5 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0	ECLIA



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Consulting Dr. : -  
Reg. Location : Mahavir Nagar, Kandivali West (Main Centre)

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Reported : 11-Apr-2024 / 13:46

**Interpretation:**

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

**Clinical Significance:**

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

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

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

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

**Limitations:**

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

**Reference:**

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

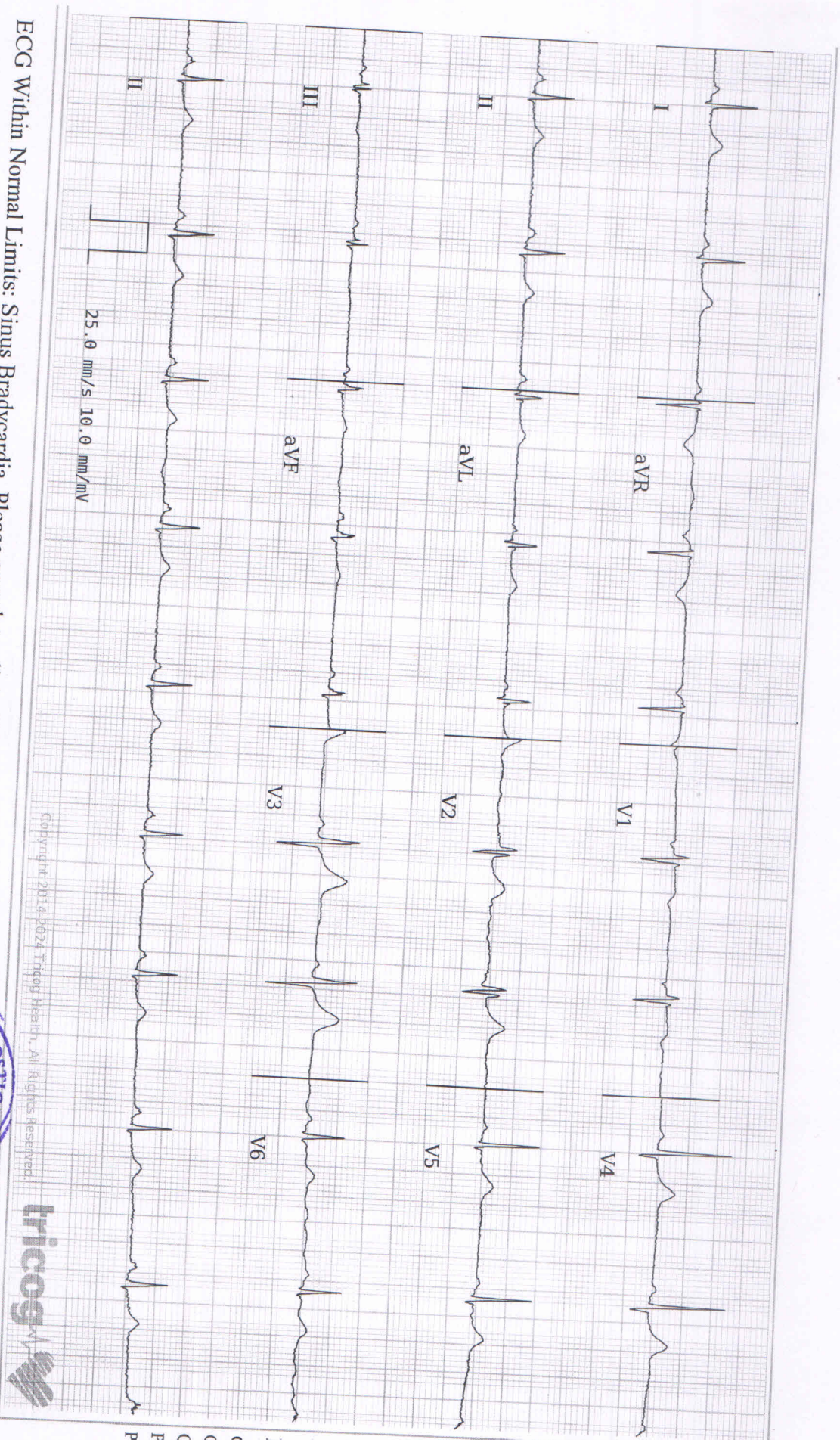
\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West  
\*\*\* End Of Report \*\*\*



*Bmhasakar*

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





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

Age **31** . NA NA  
years months days  
Gender **Female**  
Heart Rate **58bpm**  
Patient Vitals  
BP: **100/70 mmHg**  
Weight: **82 kg**  
Height: **173 cm**  
Pulse: **56 bpm**  
Spo2: **NA**  
Resp: **NA**  
Others:

Measurements  
QRSD: **78ms**  
QT: **408ms**  
QTcB: **400ms**  
PR: **130ms**  
P-R-T: **43° 36° 22°**

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REPORTED BY

*[Signature]*

Dr. Aisha Bhasia  
M.B.B.S/P.G.D.C.C (DIP Cardiology)  
2013062200

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.



Name : MRS. NEELAM TRIVEDI

Age / Gender : 31 Years/Female

Consulting Dr. :

Collected : 11-Apr-2024 / 08:52

Reg.Location : Mahavir Nagar, Kandivali West (Main Centre)

Reported : 12-Apr-2024 / 11:00

## PHYSICAL EXAMINATION REPORT

History and Complaints: NIL

### EXAMINATION FINDINGS:

Height (cms):	173	Weight (kg):	82
Temp :	Afebrile	Skin:	Normal
Blood Pressure (mm/Hg):	100/70	Nails:	Healthy
Pulse:	56/MIN	Lymph Node:	Not Palpable

### Systems

Cardiovascular: S1,S2 Normal No Murmurs

Respiratory: Air Entry Bilaterally Equal

Genitourinary: NAD

GI System: Soft non tender No Organomegaly

CNS: NAD

IMPRESSION: HEALTHY.

ADVICE: REGULAR EXERCISE. HEALTHY DIET.

### CHIEF COMPLAINTS:

- |                        |    |
|------------------------|----|
| 1) Hypertension:       | NO |
| 2) IHD:                | NO |
| 3) Arrhythmia:         | NO |
| 4) Diabetes Mellitus : | NO |
| 5) Tuberculosis :      | NO |
| 6) Asthama:            | NO |
| 7) Pulmonary Disease : | NO |



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Reg. Location : Mahavir Nagar, Kandivali West (Main Centre)

Collected : 11-Apr-2024 / 08:52

Reported : 12-Apr-2024 / 11:00

- |  |    |
|--|----|
| 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 |

**PERSONAL HISTORY:**

- |               |     |
|---------------|-----|
| 1) Alcohol    | NO  |
| 2) Smoking    | NO  |
| 3) Diet       | VEG |
| 4) Medication | NIL |

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



  
Dr. Ajita Bhosale  
PHYSICIAN

Dr. AJITA BHOSALE  
Reg. No. 2013/062200  
MBBS/D. Cardiology

Date:- 11/4/24.

CID: 241020993

Name:- Mrs Neelam Privedi

Sex / Age: F / 51 yrs.

**EYE CHECK UP**

Chief complaints: - No.

Systemic Diseases: - No.

Past history: - No

Unaided Vision: - No

Aided Vision: - Yes

Refraction: (R) 6/6

(Right Eye)

(L) 6/6 with spacts.

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	<del>        </del>			6/6	<del>        </del>			6/6
Near	<del>        </del>			N/A	<del>        </del>			N/A

Colour Vision: Normal / Abnormal

Remark: Normal vision with spacts.







सर्वजन के  
भारत सरकार



आधार

भारत सरकार  
Government of India

भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India

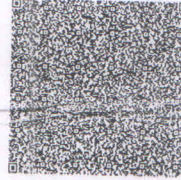
नामांकन क्रम / Enrollment No. : 0635/10288/25467

To  
**Neelam Vishal Trivedi**  
नीलम विशाल त्रिवेदी  
C/O: Vishal Trivedi,  
101 A / RAJ RESIDENCY 2,  
MAHAVIR NAGAR,  
DAHANUKARWADI,  
KANDIVALI WEST,  
VTC: Mumbai, PO: Kandivali West,  
Sub District: Borivali, District: Mumbai Suburban,  
State: Maharashtra, PIN Code: 400067.  
Mobile: 7045401577

78531883



KF785318839FI



आपका आधार क्रमांक / Your Aadhaar No. :

**8813 3959 3138**

मेरा आधार, मेरी पहचान



भारत सरकार  
Government of India



आधार

Issue Date: 24/03/2012



नीलम विशाल त्रिवेदी  
**Neelam Vishal Trivedi**  
जन्म तिथि / DOB: 14/02/1993  
महिला / Female

**8813 3959 3138**

मेरा आधार, मेरी पहचान

*Handwritten signature in blue ink*



# SUBURBAN DIAGNOSTICS PVT LTD.

## Patient Details

Date: 11-Apr-24

Time: 10:13:36 AM

Name: NEELAM TRIVEDI ID: 2410210993

Age: 31 y

Sex: F

Height: 173 cms

Weight: 82 Kgs

Clinical History: ROUTINE CHECK UP

Medications: NIL

## Test Details

Protocol: Bruce

Pr.MHR: 189 bpm

THR: 170 (90 % of Pr.MHR) bpm

Total Exec. Time: 6 m 32 s

Max. HR: 161 (85% of Pr.MHR) bpm

Max. Mets: 10.20

Max. BP: 130 / 70 mmHg

Max. BP x HR: 20930 mmHg/min

Min. BP x HR: 4760 mmHg/min

Test Termination Criteria: THR ACHIEVED

## 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	1 : 6	1.0	0	0	83	100 / 70	-2.12 II	-2.48 II
Standing	0 : 53	1.0	0	0	84	100 / 70	-4.46 aVR	4.60 V1
Hyperventilation	0 : 17	1.0	0	0	83	100 / 70	-0.42 III	1.06 II
1	3 : 0	4.6	1.7	10	133	110 / 70	-3.18 V3	4.60 V4
2	3 : 0	7.0	2.5	12	160	120 / 70	-1.49 III	-2.12 aVR
Peak Ex	0 : 32	10.2	3.4	14	161	130 / 70	-1.27 III	2.48 V3
Recovery(1)	3 : 0	1.8	1	0	68	110 / 70	-1.27 III	3.18 V3
Recovery(2)	0 : 18	1.0	0	0	84	90 / 70	-0.85 aVF	1.42 V3

## Interpretation

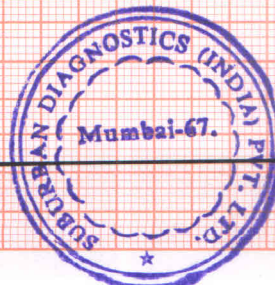
GOOD EFFORT TOLERANCE.  
MODERATE WORKLOAD ACHIEVED.  
APPROPRIATE CHRONOTROPIC AND INOTROPIC RESPONSE.  
NO SIGNIFICANT ST-T CHANGES AT PEAK EXERCISE.  
NO SIGNIFICANT ST-T CHANGES AT RECOVERY.  
NO ARRHYTHMIAS NOTED.

IMPRESSION: THIS EXERCISE STRESS TEST IS NEGATIVE FOR REVERSIBLE INDUCIBLE ISCHEMIA.

Disclaimer: Negative stress test does not rule out Coronary Artery Disease.  
Positive test is suggestive but not confirmatory of Coronary Artery Disease.  
Hence, clinical correlation is mandatory.

Ref. Doctor: ARCOFEMI

( Summary Report edited by user )



Doctor: DR AJITA BHOSALE

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Dr. AJITA BHOSALE  
Reg. No. 2013/062200  
MBBS/D. Cardiology



**NEELAM TRIVEDI (31 F)**

ID: 2410210993

Date: 11-Apr-24

Exec Time : 0 m 0 s

Stage Time : 1 m 0 s

HR: 75 bpm

Protocol: Bruce

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 170 bpm)

B.P: 100 / 70

ST Level (mm)      ST Slope (mv/s)

ST Level (mm)      ST Slope (mv/s)

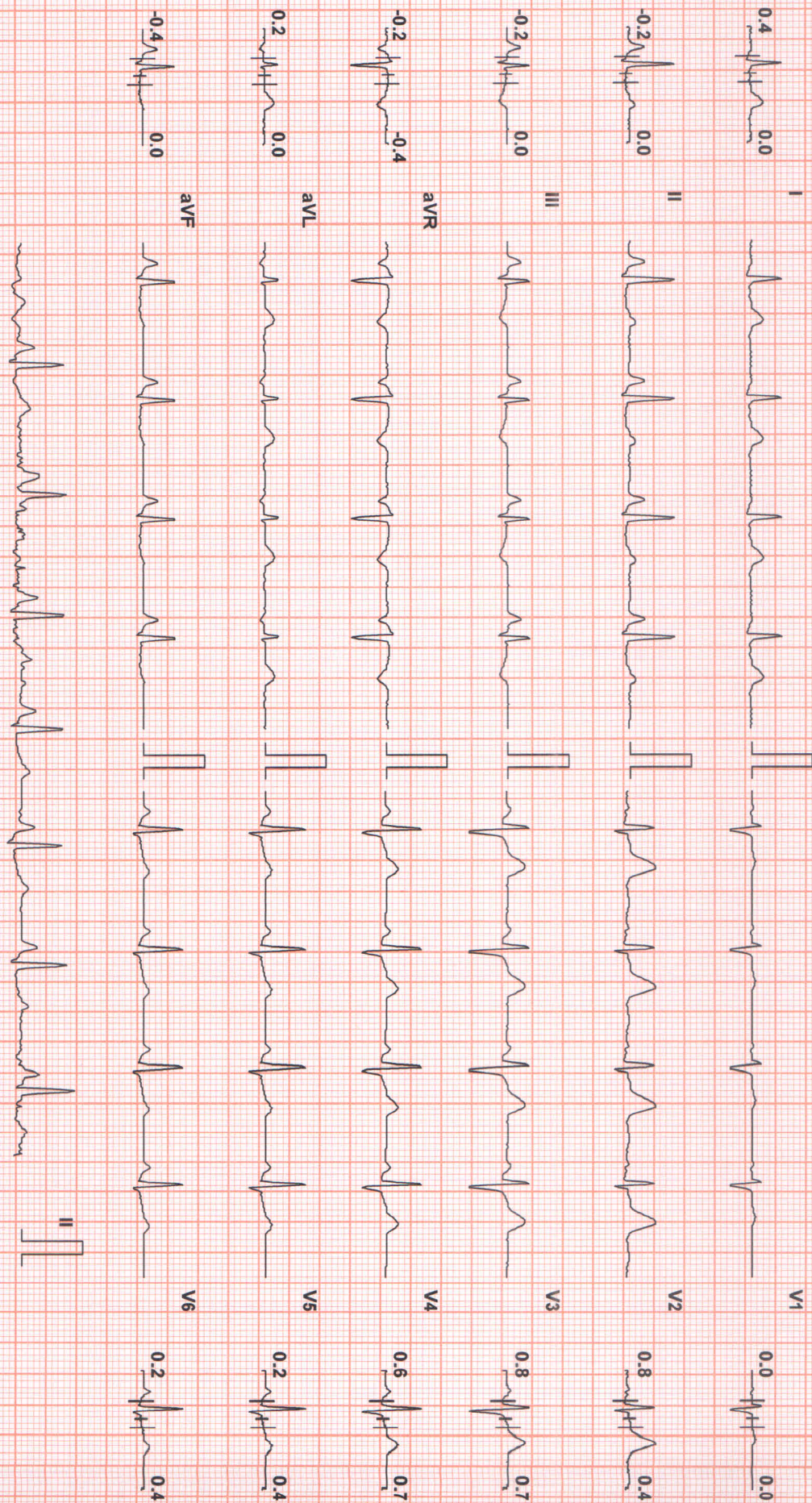


Chart Speed: 25 mm/sec  
Schiller Spandam V 4.52

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median





NEELAM TRIVEDI (31 F)

ID: 2410210993

Date: 11-Apr-24

Exec Time : 0 m 0 s

Stage Time : 0 m 47 s

HR: 100 bpm

Protocol: Bruce

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 170 bpm)

B.P: 100 / 70

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

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

I

V1

0.2 0.4



0.0 0.0

II

V2

-0.2 1.1



1.1 0.7

III

V3

-0.4 0.0



0.8 0.7

aVR

V4

0.2 -0.7



0.6 0.7

aVL

V5

0.0 -0.4



0.4 0.7

aVF

V6

-0.4 0.7



0.2 0.4



Chart Speed: 25 mm/sec  
Schiller Spanden V 4.52

Filter: 35 Hz

Mains Filter ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median





NEELAM TRIVEDI (31 F)

Protocol: Bruce

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

SUBURBAN DIAGNOSTICS PVT LTD.

ID: 2410210993

Date: 11-Apr-24

Exec Time : 0 m 0 s

Stage Time : 0 m 11 s

HR: 83 bpm

Test Report

Stage: Hyperventilation

Speed: 0 mph

Grade: 0 %

(THR: 170 bpm)

B.P: 100 / 70

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

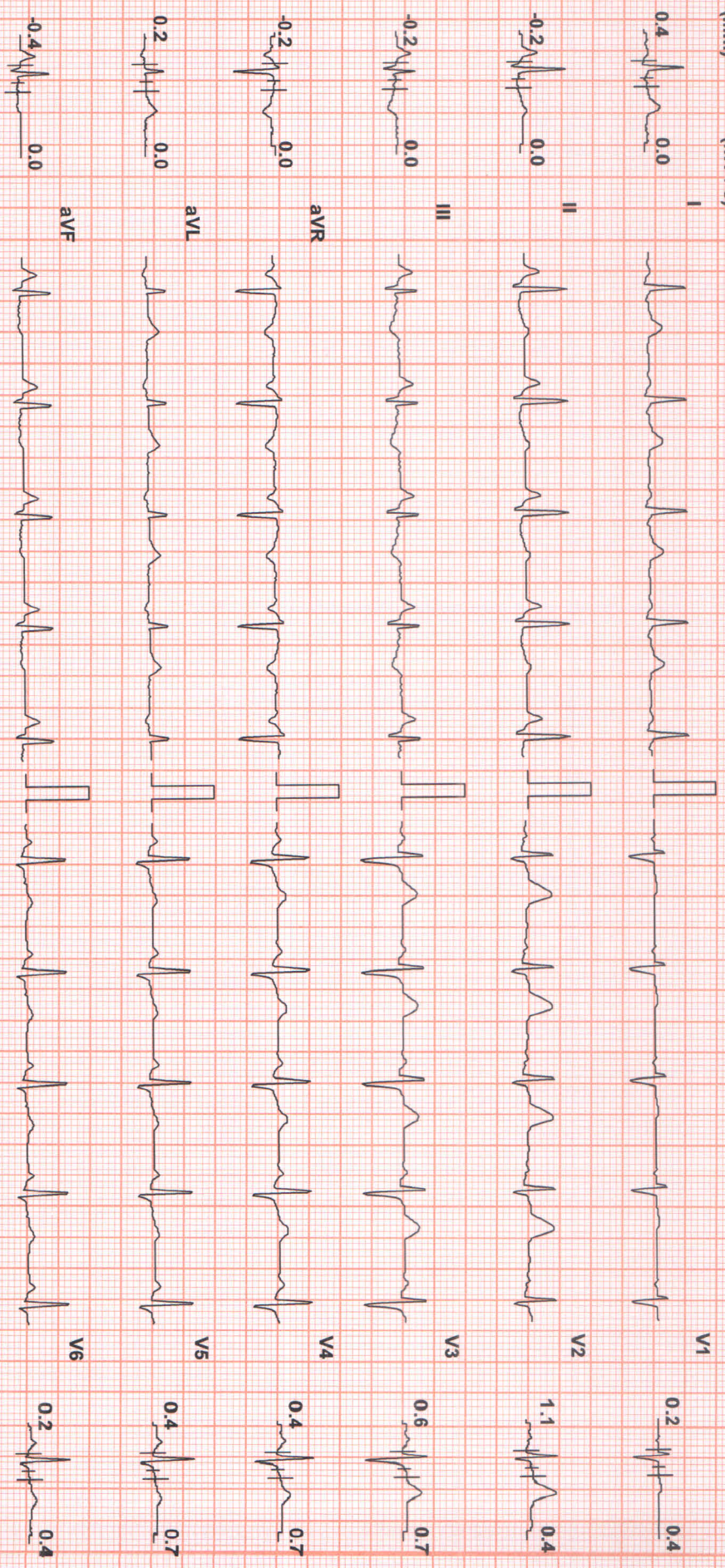


Chart Speed: 25 mm/sec  
Schiller Spandan V4.52

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median





**NEELAM TRIVEDI (31 F)**

Protocol: Bruce

ID: 2410210993

Date: 11-Apr-24

Stage: 1

Speed: 1.7 mph

Grade: 10 %

(THR: 170 bpm)

Exec Time : 2 m 54 s Stage Time : 2 m 54 s **HR: 132 bpm**

B.P: 110 / 70

**SUBURBAN DIAGNOSTICS PVT LTD.**

**Test Report**

ST Level (mm)      ST Slope (mV/s)

ST Level (mm)      ST Slope (mV/s)

0.8      0.4



0.0      0.0

0.4      1.1



0.4      0.7

0.4      0.4



0.4      1.1

0.6      -0.7



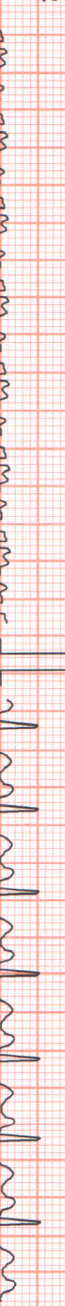
0.2      1.4

0.6      0.0



0.0      1.4

0.0      1.1



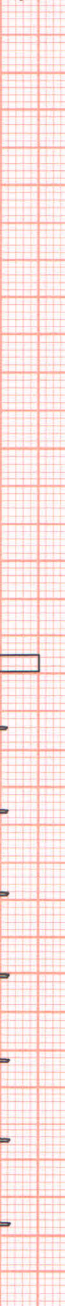
0.0      1.1

0.0      1.1



0.0      1.1

0.0      1.1



0.0      1.1

0.0      1.1



0.0      1.1

0.0      1.1



0.0      1.1

0.0      1.1



0.0      1.1

0.0      1.1



0.0      1.1

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

Linked Median





NEELAM TRIVEDI (31 F)

ID: 2410210993

Date: 11-Apr-24 Exec Time : 5 m 54 s Stage Time : 2 m 54 s HR: 158 bpm

Protocol: Bruce

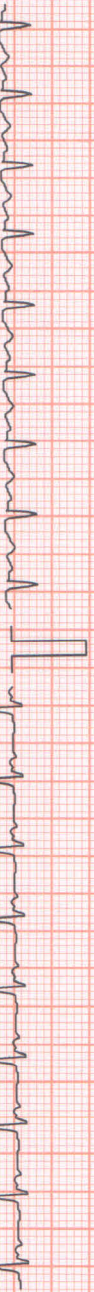
Stage: 2

Speed: 2.5 mph Grade: 12 % (THR: 170 bpm) B.P: 120 / 70

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

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

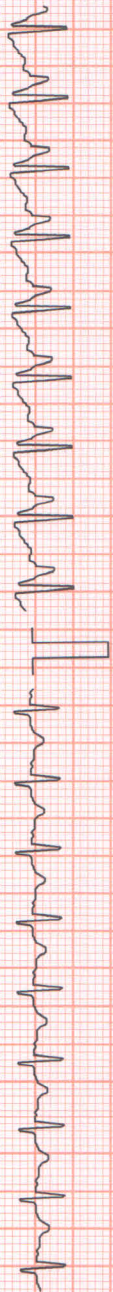
0.2 0.7



V1

0.2 0.4

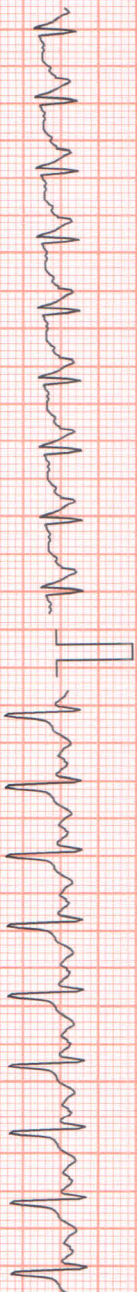
-1.1 1.4



V2

0.6 1.1

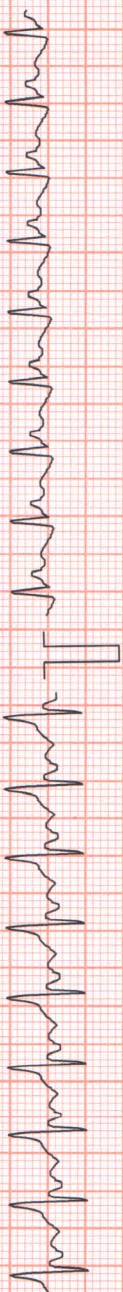
-1.5 -0.4



V3

0.6 2.1

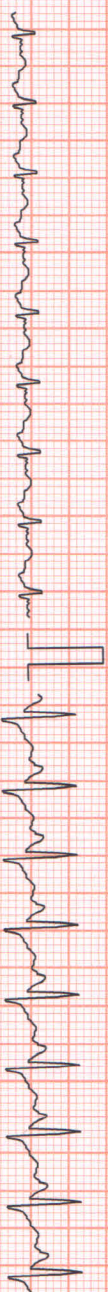
0.2 -1.1



V4

0.0 1.8

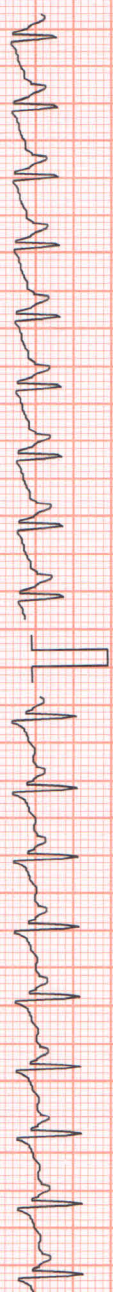
0.8 0.7



V5

-0.2 1.4

-1.5 0.4



V6

-0.2 1.1



II

Chart Speed: 25 mm/sec  
Schlier Spanden V 4.52

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median





NEELAM TRIVEDI (31 F)

Protocol: Bruce

ID: 2410210993

Date: 11-Apr-24

Exec Time : 6 m 26 s

Stage: Peak Ex

Speed: 3.4 mph

Grade: 14 %

HR: 161 bpm

B.P: 130 / 70

(THR: 170 bpm)

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Test Report

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

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

I

V1

1.1



0.0

II

V2

1.8

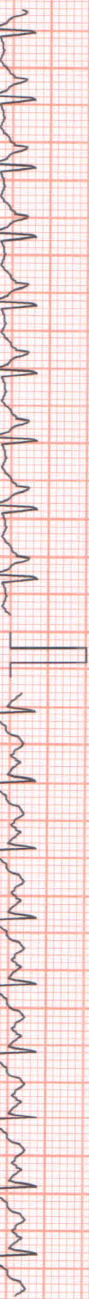


0.2

III

V3

0.0



0.4

aVR

V4

-1.4



0.0

aVL

V5

0.4

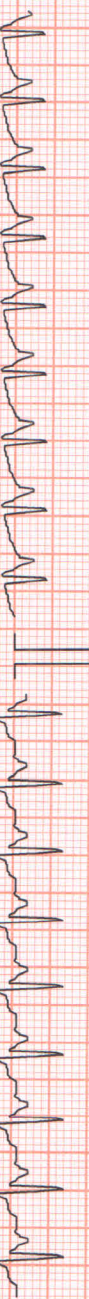


-0.4

aVF

V6

0.7



-0.4



Chart Speed: 25 mm/sec  
Schiller Sparden V 4.52

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = V + 60 ms

Linked Median





NEELAM TRIVEDI (31 F)

Protocol: Bruce

ID: 2410210993

Date: 11-Apr-24

Exec Time : 6 m 32 s

Stage Time : 2 m 54 s

HR: 77 bpm

B.P: 110 / 70

ST Level (mm)

Stage: Recovery(1)

Speed: 1 mph

Grade: 0 %

(THR: 170 bpm)

ST Level (mm)

ST Slope (mV/s)

0.0 0.4



0.0 0.0

-0.6 0.4



0.2 0.4

-0.4 0.0



0.6 1.1

0.4 0.0



0.0 0.7

0.0 0.0



-0.4 0.4

-0.6 0.4



-0.4 0.4

0.0 0.0



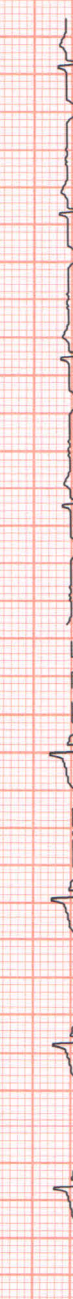
0.0 0.0

0.4 0.4



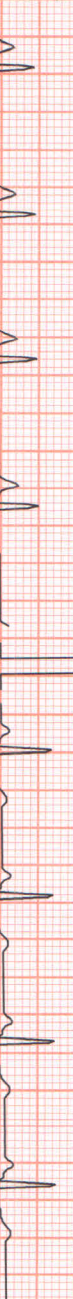
0.2 0.4

0.0 0.0



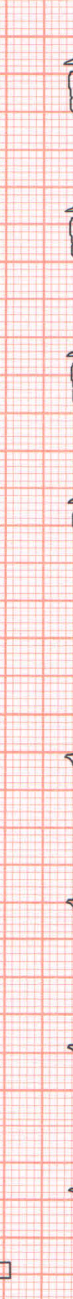
0.6 1.1

0.4 0.4



0.0 0.7

0.0 0.0



-0.4 0.4

-0.6 0.4



-0.4 0.4

Chart Speed: 25 mm/sec  
Schiller Spanden 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

Linked Median





**NEELAM TRIVEDI (31 F)**

**SUBURBAN DIAGNOSTICS PVT LTD.**

**Test Report**

Protocol: Bruce

ID: 2410210993

Date: 11-Apr-24

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

Exec Time : 6 m 32 s Stage Time : 0 m 12 s HR: 73 bpm

(THR: 170 bpm)

B.P: 90/70

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

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

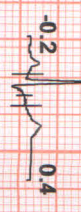
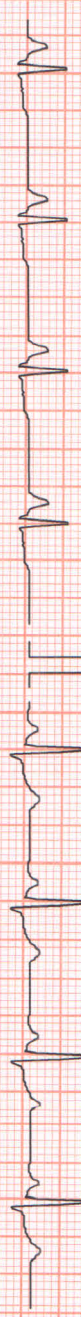
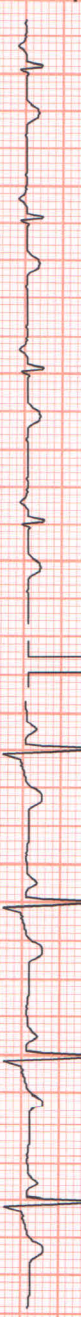
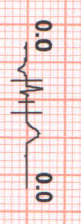
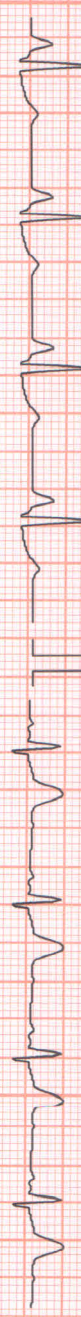
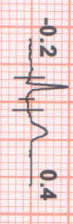


Chart Speed: 25 mm/sec  
Schiller Spandan V 4.52

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



CID : 2410210993  
Name : Mrs NEELAM TRIVEDI  
Age / Sex : 31 Years/Female  
Ref. Dr :  
Reg. Location : Mahavir Nagar, Kandivali West Main Centre  
Reg. Date : 11-Apr-2024  
Reported : 11-Apr-2024 / 9:40

## USG WHOLE ABDOMEN

### LIVER:

The liver is normal in size (12.9cm), shape and smooth margins. It shows raised echogenicity. 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 shows normal wall thickness. No evidence of gall stones or mass lesions seen

### PANCREAS:

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

### KIDNEYS:

Right kidney measures 9.1 x 3.4 cm. Left kidney measures 9.2 x 5.0 cm.  
Both the kidneys are normal in size shape and echotexture.  
No evidence of any calculus, hydronephrosis or mass lesion seen.

### SPLEEN:

The spleen is normal in size (9 cm) and echotexture. No evidence of focal lesion is noted.

### URINARY BLADDER:

The urinary bladder is well distended and reveal no intraluminal abnormality. Wall thickness appears normal.

### UTERUS:

The uterus is anteverted and appears normal. No obvious focal lesion noted  
The endometrial thickness is 7.4 mm.

### OVARIES:

Right ovary = 2.9 x 3.1 cm  
Left ovary = 2.5 x 2.3 cm  
Both the ovaries are well visualised and appears normal.  
There is no evidence of any ovarian or adnexal mass seen.

**CID** : 2410210993  
**Name** : Mrs NEELAM TRIVEDI  
**Age / Sex** : 31 Years/Female  
**Ref. Dr** :  
**Reg. Location** : Mahavir Nagar, Kandivali West Main Centre  
**Reg. Date** : 11-Apr-2024  
**Reported** : 11-Apr-2024 / 9:40

**ADDITIONAL COMMENTS:**

Visualized bowel loops shows normal peristalsis.  
There is no evidence of any lymphadenopathy or ascites.

**IMPRESSION:**

- Grade I fatty liver

**ADVICE: Clinical correlation**

NOTE: Above USG report is subject to findings evident at the time of scan & associated bowel gases. Sonography is known to have inter-observer variations. This modality has its own limitations & should be considered as a professional opinion. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Further / Follow-up imaging may be needed in some case for confirmation of findings. Please interpret accordingly. This report cannot be used for medico - legal purposes

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



Dr. Chirag Patel  
Consultant Radiologist  
M.B.B.S, MD (Radiodiagnosis)  
Reg. No. MMC 2017073319



Authenticity Check



Use a QR Code Scanner  
Application To Scan the Code

CID : 2410210993  
Name : Mrs NEELAM TRIVEDI  
Age / Sex : 31 Years/Female  
Ref. Dr :  
Reg. Location : Mahavir Nagar, Kandivali West Main Centre  
Reg. Date : 11-Apr-2024  
Reported : 11-Apr-2024 / 9:44

**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. Chirag Patel  
Consultant Radiologist  
M.B.B.S, MD (Radiodiagnosis)  
Reg. No. MMC 2017073319

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024041108531061>