



APEX HOSPITALS KANDIVALI DIAGNOSTIC

CASHLESS
FACILITY

Akash Road, Next to Laxtha Woods, Lakhadwala Township,
Near Mahindra Gate No. 4, Kandivali (E), Mumbai 400101.
Email: info@apexhospitals.in | www.apexgroupshospitals.com



Tele.:
022-42747000 (100 Lines)

DEPARTMENT OF LABORATORY SCIENCES

Patient Name	Mr. GURJOT BARI MADDELA	LabNo	14456
UHID/IP No	110009514 / 11004	Sample Date	24/03/2024 10:02AM
Age/Gender	37 Yrs/Male	Receiving Date	24/03/2024 12:30PM
Bed No./Ward	OPD	Report Date	24/03/2024 1:20PM
Prescribed By	Dr. Rajhansal Mistrya	Report Status	Final



HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
COMPLETE BLOOD COUNT(CBC) EDTA WHOLE BLOOD				
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 ⁶ /μL	4.70 - 6.00	
PCV (Haematocrit)	40.15	%	40.0 - 50.0	
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	%		
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	88.2 L	/cu.mm	200 - 1000	Calculated
Absolute Basophil Count	0.00	/cu.mm		CN/CU/ATED
WBCs Morphology	Within normal limits.			
RBCs Morphology	Normocytic Normochromic.			
Platelet Count	359	10 ³ /μL	150 - 400	DC Detection
Platelets Morphology	Adequate on smear			
MPV	8.0	fL	7 - 12	

-End Of Report-

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



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UHID/IP No	150009514 / 11004	Sample Date	24/02/2024 10:02AM
Age/Gender	37 Yrs/Male	Receiving Date	24/02/2024 12:30PM
Bed No/Ward	OPD	Report Date	24/02/2024 1:20PM
Prescribed By	Dr. Rajmangal Maurya	Report Status	Final



HAEMATOLOGY

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

--End Of Report--

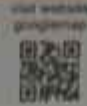

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Prescribed By	Dr. Rajmangal Maurya	Report Status	Final	

IMMUNO-HAEMATOLOGY

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

--End Of Report--

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Prescribed By	Dr. Rajmangal Maurya	Report Status	Final	

BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
GLUCOSE (PP) Sample: Fl. Plasma				
Blood Sugar(2 Hours PP)	182.0 H	mg/dl	70 - 140	Glucose Oxidase,Hydrogen Peroxide

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 hypoglycaemics & Insulin treatment.

GLUCOSE (FASTING)

Sample: Fl. Plasma

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

--End Of Report--

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Prescribed By	Dr. Rajmangal Maurya	Report Status	Final	

BIOCHEMISTRY

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

--End Of Report--

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BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
LIVER FUNCTION TEST (LFT) SERUM				
Sample: Serum				
Bilirubin Total (TBil)	0.66	mg/dl	0.30 - 1.30	Diphyline Diazonium Salt
Bilirubin Direct (Dbil)	0.23	mg/dl	0.00 - 0.50	
Bilirubin indirect	0.43	mg/dl	0 - 1	
SGPT (ALT)	48.86 H	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

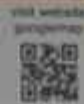
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Bed No/Ward	OPD	Report Date	24/02/2024 1:20PM	
Prescribed By	Dr. Rajmangal Maurya	Report Status	Final	

BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
RFT (RENAL FUNCTION TEST)				
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--

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UHID/IP No	150009S14 / 11004	Sample Date	24/02/2024 10:02AM	
Age/Gender	37 Yrs/Male	Receiving Date	24/02/2024 12:30PM	
Bed No/Ward	OPD	Report Date	24/02/2024 1:53PM	
Prescribed By	Dr. Rajmangal Maurya	Report Status	Final	

CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
URINE ROUTINE				
Sample: Urine				
PHYSICAL EXAMINATION				
Quantity	30	ml		
Color	Pale Yellow			
Appearance	Clear		Clear	Clear
Specific Gravity	1.020		1.010 - 1.025	
CHEMICAL EXAMINATION				
pH	6.5		4.5 - 8.5	
Protein	Absent			
Glucose	Trace		Nil	
Ketone	Absent			
Occult Blood	Absent			
Bile Salt	Absent			Absent
Bile Pigment	Absent			Absent
MICROSCOPIC EXAMINATION				
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 : PVD18323-24/68232
 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. :



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 using a cut-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 diseases, chronic 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: $eAG(mg/dl) = 28.7 \cdot A1c - 46.7$
- 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 glycaemic 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
TOTAL T3 T4 TSH (TFT)			
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 TSHespecially 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), Gestational thyrotoxicosis with hyperemesis gravidarum*
Decreased or within Range	Raised	Within Range	•T3 toxicosis •Non-Thyroidal illness

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

Term & Conditions* Test processed at Pathvision Central Processing Laboratory, Dahisar west Mumbai-68 Individual laboratory investigations are never conclusive & should be used along with other relevant clinical examinations to achieve final diagnosis. Any discrepancy with clinical condition the referring doctor or patient must report in 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 purpose.




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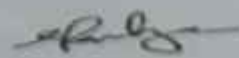
DEPARTMENT OF RADIOLOGY

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Age/Gender	37 Yrs/Male	Receiving Date	24/02/2024 10:38AM	
Bed No/Ward	OPD	Report Date	24/02/2024 6:46PM	
Prescribed By	Dr. Rajmangal Maurya	Report Status	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

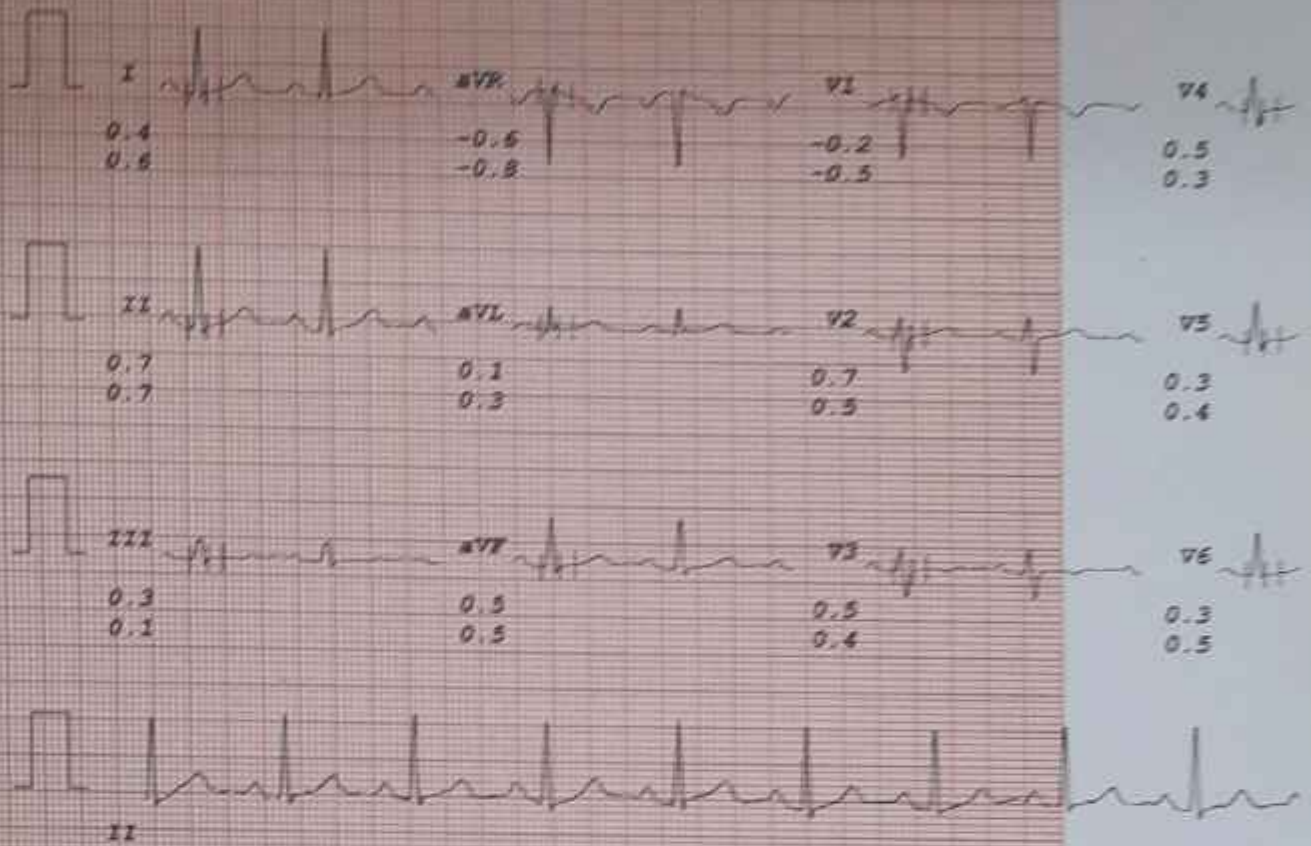
APEX HOSPITAL

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

WATE 86bpm
B.P. 130/80

PRETEST
SUSINE

ST @ 10mm/m
20mm PostJ



Apex Hospitals Kandivalli
Hatti Road, Next To Latha Woods,
Lokhandwala Township, Near Malabar,
Collyer Ave. 4, Kandivalli (E), Mumbai - 400 075.

PCL XL Error
Subsystem: I/O
Error: InputReadError
Operator: SetCursor
Position: 7612

APEX HOSPITAL

MR GIRISH BABU

I.D. 8903

Age 37/M

Date 24-02-2024

RATE 93bpm

B.P. 130/80

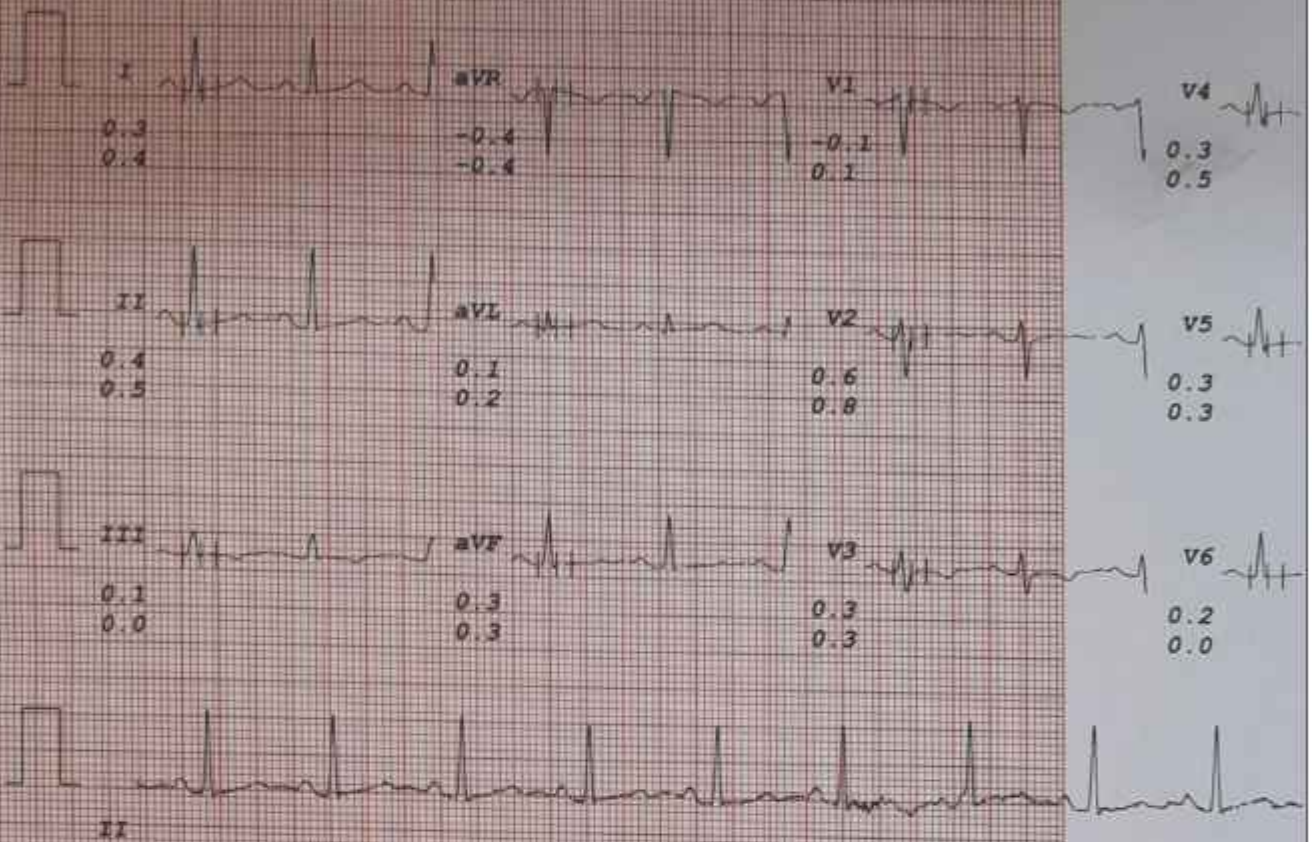
PRETEST

HYPERTENT

ST @ 10mm/m

80ms PostJ

PHASE TIME 0-02



MARK corrected

WAVEFORM, INBORN, TEL: +91-731-4030035, FAX: +91-

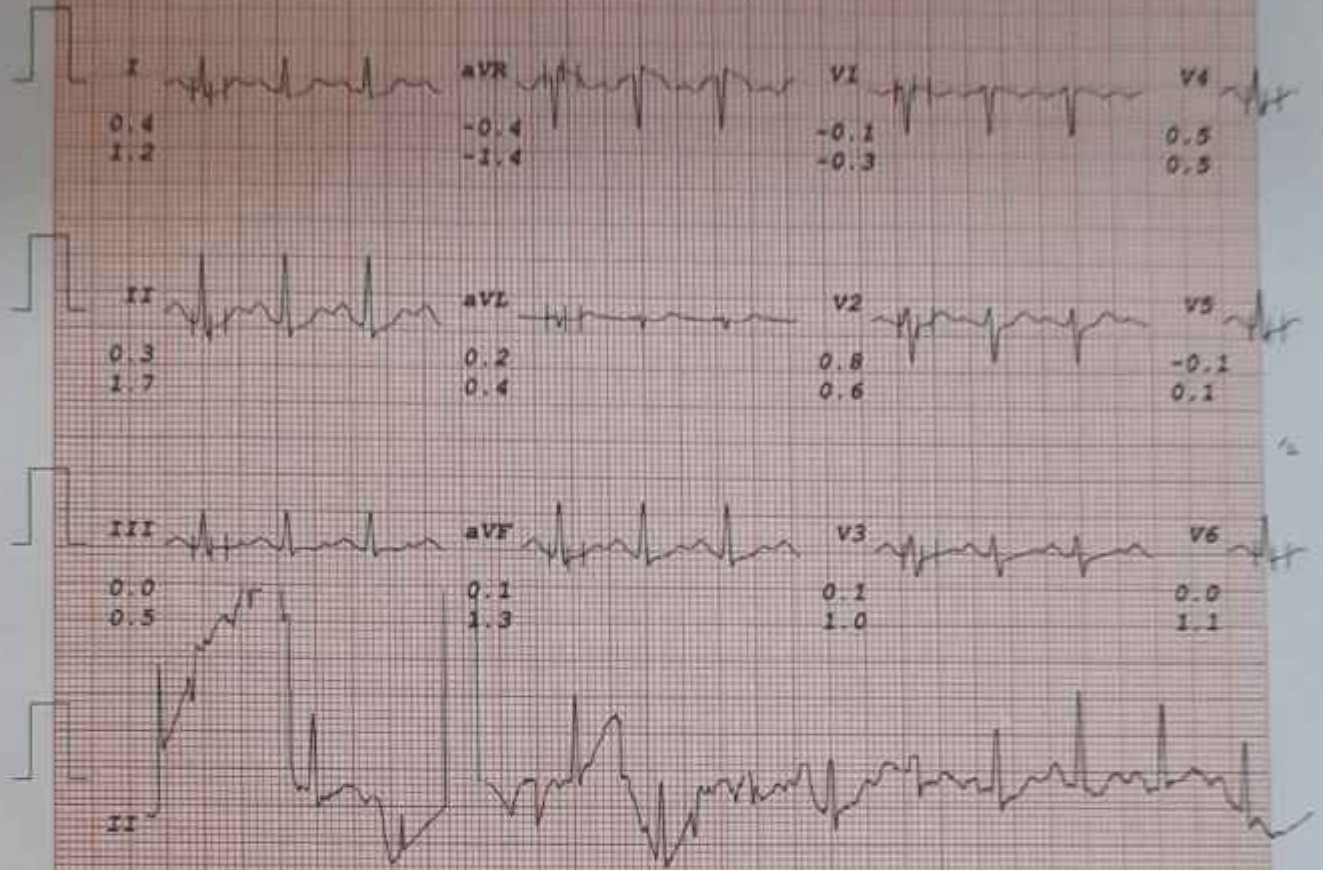
APEX HOSPITAL

MR GIRISH BABU
FCL DI 18500707
Age 132/11/10
Date ECG-02-2024
Operator:
Position:

RATE 133bpm
B.P. 130/90/0

Bruce
Stage 1
TOTAL TIME 2:55
InputReader/PHASE TIME 2:55
Readfontreader
48

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



Base Corrected

202-28- (India) Tel: +91-781-4030001, Fax: +91-

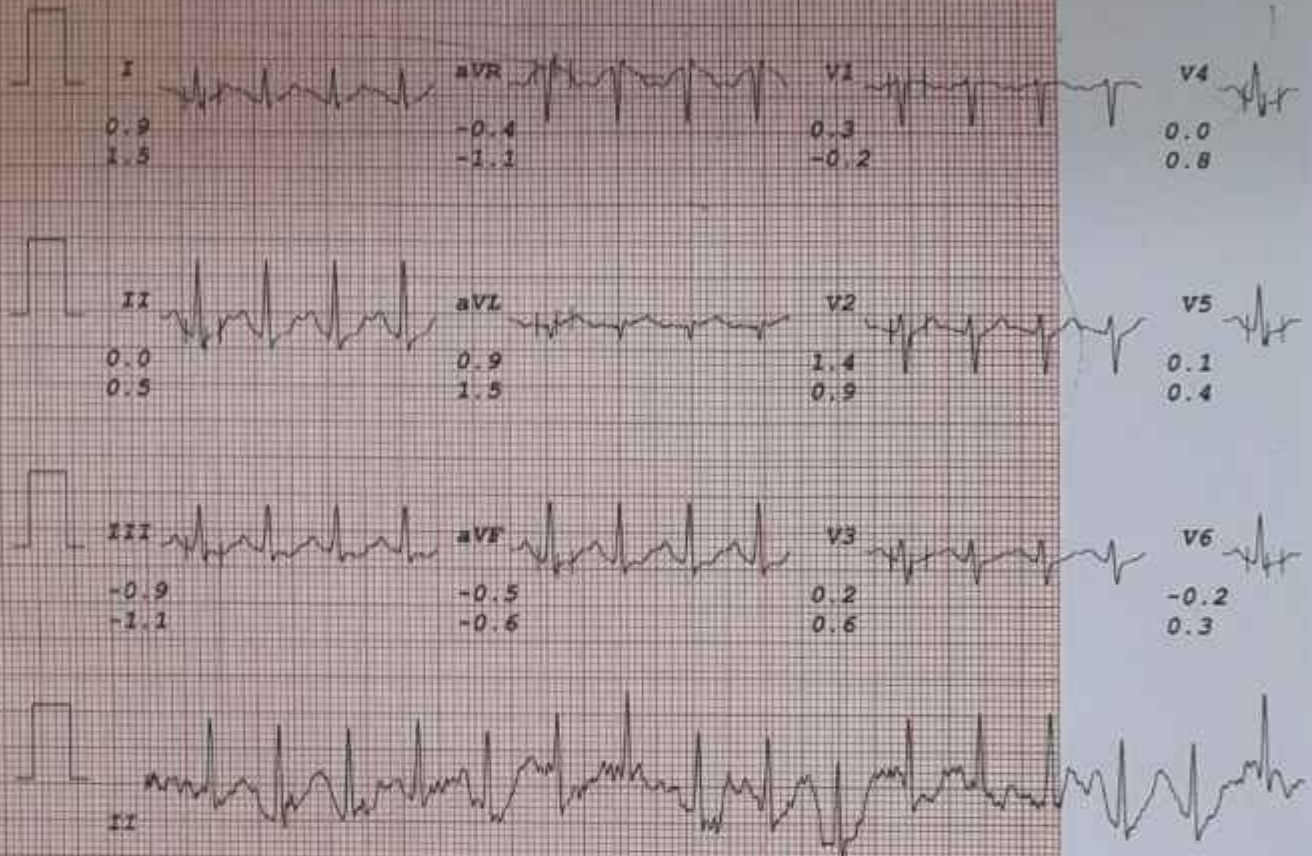
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MR GIRISH BABU
I.D. 8903
Age 37/M
Date 24-02-2024

RATE 159bpm
B.P. 140/90

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

ST @ 10mm/m
80ms PostJ
Speed 4 km/
SLOPE 12 s



None Corrected

100-200, Jayaram, Pal... 91-731-8230033, Fax: +91-

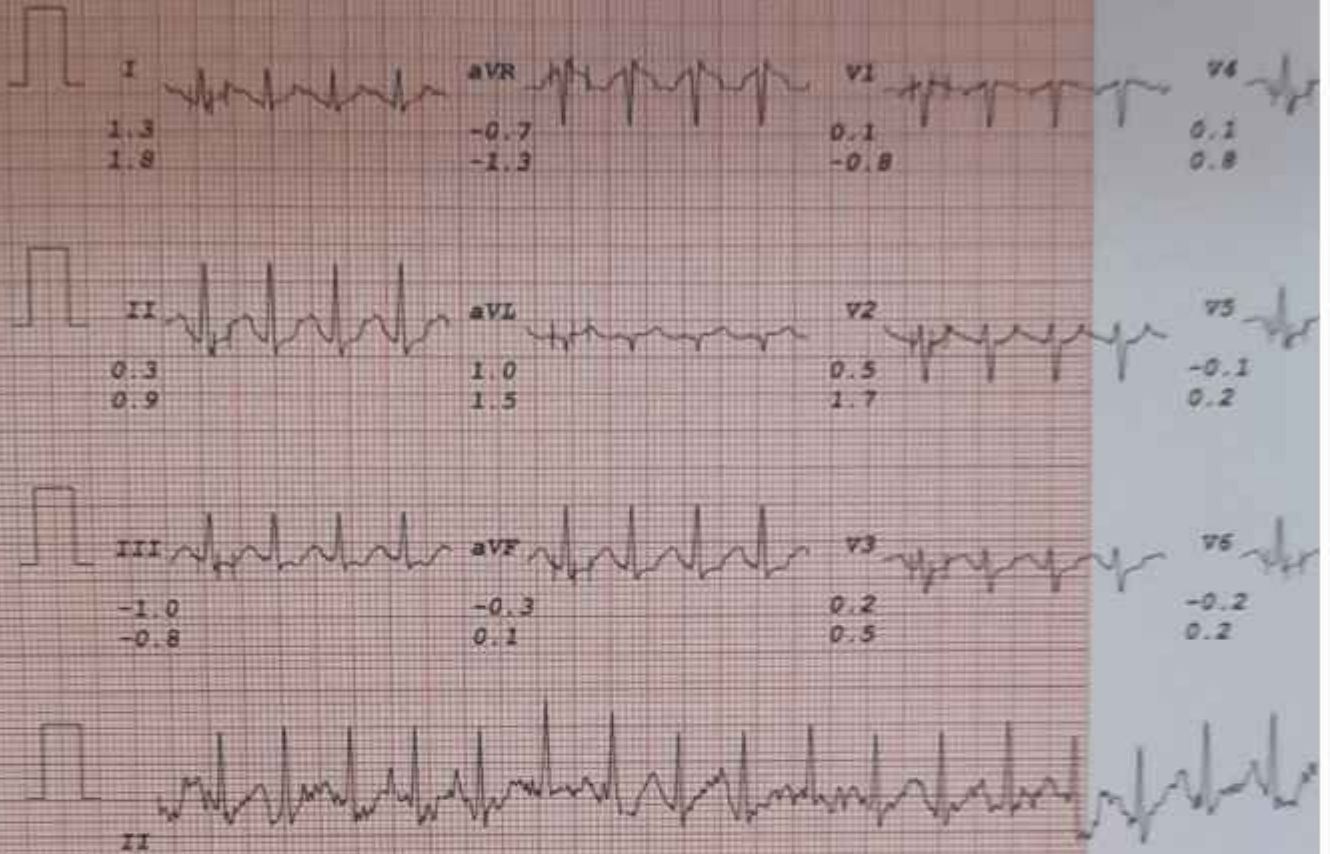
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MR GIRISH BABU
I.D. 8903
Age 37/M
Date 24-02-2024

RATE 171bpm
B.P. 140/90

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

ST @ 10mm/
80ms Post.
Speed 5.4
SLOPE 14 #



ECG Stripped

100-00, India, No. 1, 40-70-400000, New 40-

1/0
InputReader
ReadFrontHeader
49

1/0
InputReader
ReadFrontHeader
49

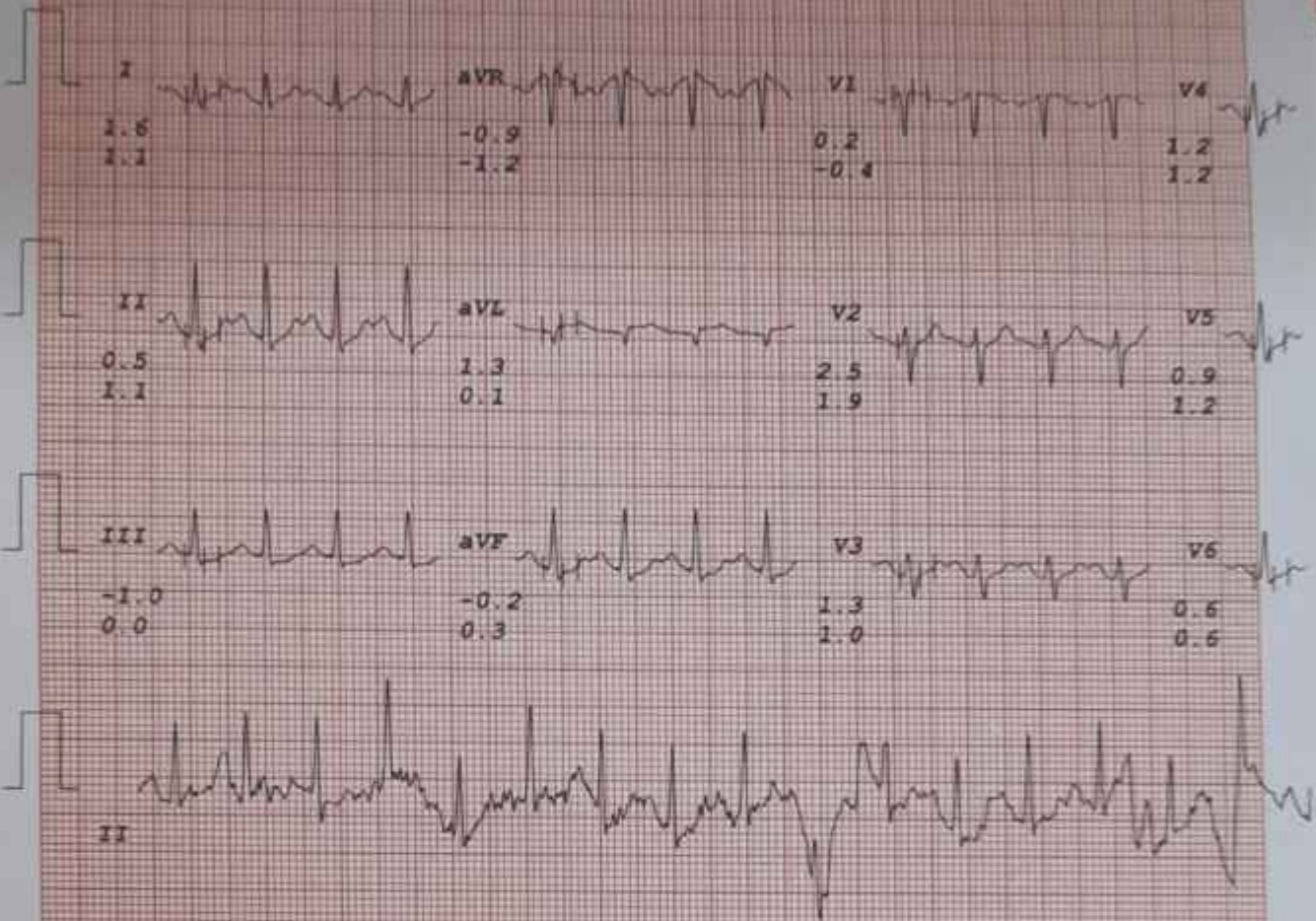
APEX HOSPITAL

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

RATE 157bpm
 S.P. 140/90

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

ST @ 10mm/m
 80mm Post-J



Base Corrected

ST-T Segment Depression (mm) = ST-T Segment Elevation (mm) x 10

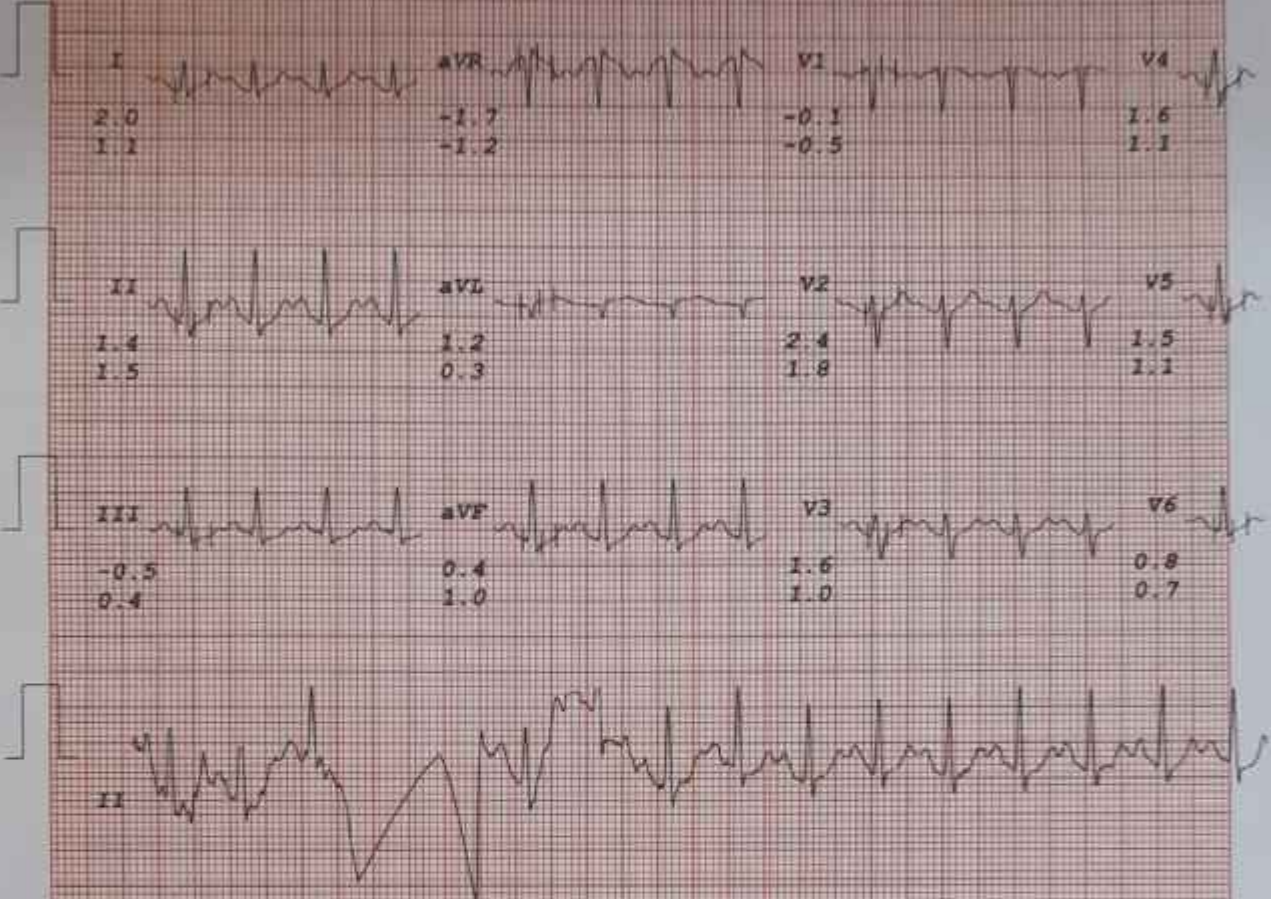
APEX HOSPITAL

MR GIRISH BABU
I.D. 8903
Age 37/M
Date 24-03-2024

RATE 153bpm
B.P. 140/90

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

ST @ 10mm/m
80ms PostJ



Case Corrected

Dr. M. Suresh, Tel. +91-934930035, Fax: +91-

APEX HOSPITAL KANDIVALI

MR GIRISH BABU
 ID 8903
 DATE 24-02-2024
 AGE/SEX 37 / M
 HT/WT 165 / 108
 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	SPY x100
SUPINE					88	130 / 80	111
HYPERVENT		0:2			93	130 / 80	120
Stage 1	2:55	2:55	2.7	10	133	130 / 90	172
Stage 2	5:55	2:55	4	12	159	140 / 90	222
PK-EXERCISE	6:47	0:47	5.4	14	171	140 / 90	239
RECOVERY	7:13	0:17			157	140 / 90	219
RECOVERY	7:22	0:26			153	140 / 90	214
RECOVERY	7:29	0:29			153	140 / 90	214
RECOVERY	7:29	0:29			153	140 / 90	214

RESULTS

EXERCISE DURATION : 6:47 MAX WORK LOAD
 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

Technician : 44

DR. J. S. SURESH, MD, FRAC (FAC), FICP (FICP), FICM (FICM), FICG (FICG), FICN (FICN), FICP (FICP), FICM (FICM), FICG (FICG), FICN (FICN) - www.apexhospitals.com

APEX HOSPITAL KANDIVALI

MR GIRISH BABU
 ID : 8903
 DATE : 24-02-2024
 AGE/SEX : 37/M
 HT/WT : 165 / 100
 REF. BY :

TREADMILL TEST REPORT

PROTOCOL : Bruce
 HISTORY :
 INDICATION :
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	H.P. mmHg	RPP x100
SUPINE					86	130 / 80	111
HYPERVENT		0:2			93	130 / 80	120
Stage 1	2:55	2:55	2.7	10	133	130 / 90	172
Stage 2	5:55	2:55	4	12	159	140 / 90	222
PK-EXERCISE	6:47	0:47	5.4	14	171	140 / 90	239
RECOVERY	7:13	0:17			157	140 / 90	219
RECOVERY	7:22	0:25			153	140 / 90	214
RECOVERY	7:25	0:29			153	140 / 90	214
RECOVERY	7:25	0:29			153	140 / 90	214

RESULTS

EXERCISE DURATION : 6:47 MAX WORK LOAD
 MAX HEART RATE : 173 bpm 94 % of target heart rate 183 bpm
 MAX BLOOD PRESSURE : 140 / 90 mm Hg
 REASON OF TERMINATION :

BT RESPONSE :
 ARRHYTHMIA :
 H.R. RESPONSE :

IMPRESSIONS

Technician : 44

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APEX HOSPITALS KANDIVALI

A Superspeciality Hospital

CASHLESS
FACILITY

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Near Mahindra Gate No. 4, Kandivali (E), Mumbai 400101.
email: info@apexhospitals.in | www.apexgroupofhospitals.com



Tele.:
022-62747000 (100 Lines)

MR. GIRISH BABU 24/2/24

Age - 37yrs

B.P - 130/80

Mr P - 14

Spa - 29

H.T - 165

W.T - 108.5kg

ORTHOPEDIC | SPINE | CARDIOLOGY | GENERAL SURGERY | LAPAROSCOPY | CRITICAL CARE | GASTROENTEROLOGY | CANCER | DIABETOLOGY
NEUROLOGY | NEPHROLOGY | VASCULAR SURGERY | ENT | OPHTHALMOLOGY | PLASTIC SURGERY | UROLOGY | PEDIATRIC SURGERY



ओपेक्स हॉस्पिटल्स कार्डिवली

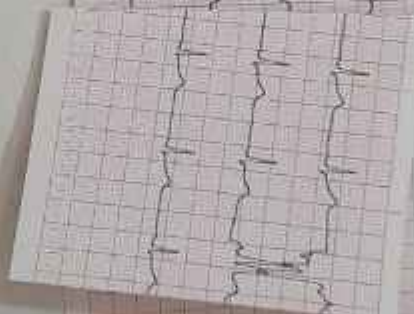
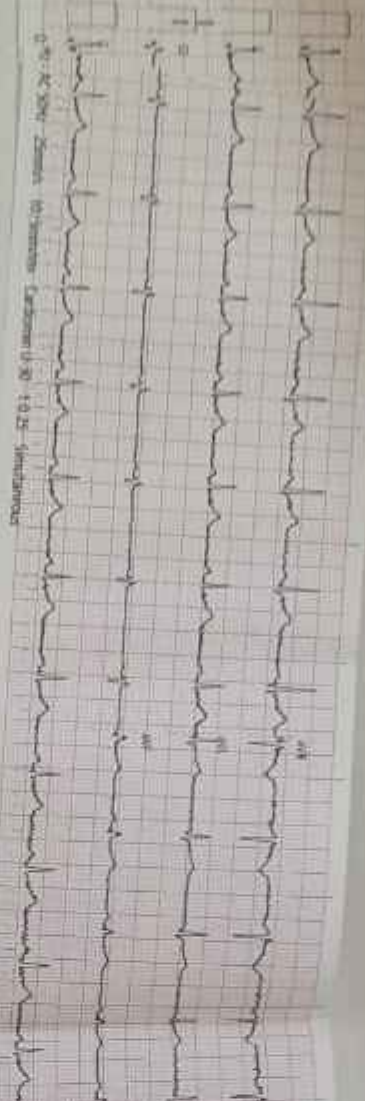
Name MR. CHARISH BODI

Date 24/12/24

Time 3:20 PM

Age 32

Gender M



HR: 71 bpm
 PR: 168 ms
 QRS: 88 ms
 QT/QTc: 374/41 ms
 P/QRS/T: 42/54/43 ms
 P/QRS/T: 181/111 ms

Cardiac and resp. 2024-12-27 14:44
 Supraventricular sinus