



CID : 2405105686
Name : MRS.MARIYA ANJUM
Age / Gender : 33 Years / Female
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 20-Feb-2024 / 10:11
Reported : 20-Feb-2024 / 15:44

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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> |
|---|----------------|-----------------------------|--------------------|
| <u>RBC PARAMETERS</u> | | | |
| Haemoglobin | 13.5 | 12.0-15.0 g/dL | Spectrophotometric |
| RBC | 4.54 | 3.8-4.8 mil/cmm | Elect. Impedance |
| PCV | 41.8 | 36-46 % | Calculated |
| MCV | 92.0 | 81-101 fl | Measured |
| MCH | 29.7 | 27-32 pg | Calculated |
| MCHC | 32.3 | 31.5-34.5 g/dL | Calculated |
| RDW | 14.2 | 11.6-14.0 % | Calculated |
| <u>WBC PARAMETERS</u> | | | |
| WBC Total Count | 5460 | 4000-10000 /cmm | Elect. Impedance |
| <u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u> | | | |
| Lymphocytes | 37.1 | 20-40 % | |
| Absolute Lymphocytes | 2025.7 | 1000-3000 /cmm | Calculated |
| Monocytes | 7.9 | 2-10 % | |
| Absolute Monocytes | 431.3 | 200-1000 /cmm | Calculated |
| Neutrophils | 52.6 | 40-80 % | |
| Absolute Neutrophils | 2872.0 | 2000-7000 /cmm | Calculated |
| Eosinophils | 1.9 | 1-6 % | |
| Absolute Eosinophils | 103.7 | 20-500 /cmm | Calculated |
| Basophils | 0.5 | 0.1-2 % | |
| Absolute Basophils | 27.3 | 20-100 /cmm | Calculated |
| Immature Leukocytes | - | | |
| WBC Differential Count by Absorbance & Impedance method/Microscopy. | | | |
| <u>PLATELET PARAMETERS</u> | | | |
| Platelet Count | 193000 | 150000-410000 /cmm | Elect. Impedance |
| MPV | 12.6 | 6-11 fl | Measured |
| PDW | 27.1 | 11-18 % | Calculated |
| <u>RBC MORPHOLOGY</u> | | | |
| Hypochromia | - | | |
| Microcytosis | - | | |



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| | |
|----------------------|-----------------------------|
| Macrocytosis | - |
| Anisocytosis | - |
| Poikilocytosis | - |
| Polychromasia | - |
| Target Cells | - |
| Basophilic Stippling | - |
| Normoblasts | - |
| Others | Normocytic, Normochromic |
| WBC MORPHOLOGY | - |
| PLATELET MORPHOLOGY | Megaplatelets seen on smear |
| COMMENT | - |

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR 18 2-20 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- Sickle 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
- Brigden 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 SDRL, Vidyavihar Lab

*** End Of Report ***



Dr. TRUPTI SHETTY
M. D. (PATH)
Pathologist



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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 | 93.6 | Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl | Hexokinase |
| GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R | 91.9 | Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl | Hexokinase |
| BILIRUBIN (TOTAL), Serum | 0.73 | 0.3-1.2 mg/dl | Vanadate oxidation |
| BILIRUBIN (DIRECT), Serum | 0.24 | 0-0.3 mg/dl | Vanadate oxidation |
| BILIRUBIN (INDIRECT), Serum | 0.49 | <1.2 mg/dl | Calculated |
| TOTAL PROTEINS, Serum | 7.8 | 5.7-8.2 g/dL | Biuret |
| ALBUMIN, Serum | 4.6 | 3.2-4.8 g/dL | BCG |
| GLOBULIN, Serum | 3.2 | 2.3-3.5 g/dL | Calculated |
| A/G RATIO, Serum | 1.4 | 1 - 2 | Calculated |
| SGOT (AST), Serum | 25.2 | <34 U/L | Modified IFCC |
| SGPT (ALT), Serum | 20.3 | 10-49 U/L | Modified IFCC |
| GAMMA GT, Serum | 10.5 | <38 U/L | Modified IFCC |
| ALKALINE PHOSPHATASE, Serum | 55.1 | 46-116 U/L | Modified IFCC |
| BLOOD UREA, Serum | 25.0 | 19.29-49.28 mg/dl | Calculated |
| BUN, Serum | 11.7 | 9.0-23.0 mg/dl | Urease with GLDH |
| CREATININE, Serum | 0.6 | 0.55-1.02 mg/dl | Enzymatic |

Note: Kindly note in change in reference range w.e.f. 07-09-2023



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| | | | |
|-------------|-----|------------------------------------|------------|
| eGFR, Serum | 121 | (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 | 5.5 | 3.1-7.8 mg/dl | Uricase/ Peroxidase |
| 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 SDRL, Vidyavihar Lab
*** End Of Report ***



Anupa

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



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

| <u>PARAMETER</u> | <u>RESULTS</u> | <u>BIOLOGICAL REF RANGE</u> | <u>METHOD</u> |
|---|----------------|--|---------------|
| Glycosylated Hemoglobin (HbA1c), EDTA WB - CC | 5.1 | Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 % | HPLC |
| Estimated Average Glucose (eAG), EDTA WB - CC | 99.7 | 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 SDRL, Vidyavihar Lab

*** End Of Report ***



Namrata Raul

Dr.NAMRATA RAUL
M.D (Biochem)
Biochemist



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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> |
|---------------------------------------|----------------|-----------------------------|--------------------|
| <u>PHYSICAL EXAMINATION</u> | | | |
| Color | Pale yellow | Pale Yellow | - |
| Reaction (pH) | 6.0 | 4.5 - 8.0 | Chemical Indicator |
| Specific Gravity | 1.005 | 1.001-1.030 | Chemical Indicator |
| Transparency | Slight hazy | Clear | - |
| Volume (ml) | 40 | - | - |
| <u>CHEMICAL EXAMINATION</u> | | | |
| Proteins | Absent | Absent | pH Indicator |
| Glucose | Absent | Absent | GOD-POD |
| Ketones | Absent | Absent | Legals Test |
| Blood | 1+ | Absent | Peroxidase |
| Bilirubin | Absent | Absent | Diazonium Salt |
| Urobilinogen | Normal | Normal | Diazonium Salt |
| Nitrite | Absent | Absent | Griess Test |
| <u>MICROSCOPIC EXAMINATION</u> | | | |
| Leukocytes(Pus cells)/hpf | 6-8 | 0-5/hpf | |
| Red Blood Cells / hpf | 1-2 | 0-2/hpf | |
| Epithelial Cells / hpf | 3-4 | | |
| Casts | Absent | Absent | |
| Crystals | Absent | Absent | |
| Amorphous debris | Absent | Absent | |
| Bacteria / 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 ***



J. Thakker

Dr.JYOT THAKKER..
M.D. (PATH), DPB
Pathologist & AVP(Medical Services)



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

| <u>PARAMETER</u> | <u>RESULTS</u> |
|------------------|----------------|
| ABO GROUP | O |
| 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

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*** 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 | 143.9 | Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl | CHOD-POD |
| TRIGLYCERIDES, Serum | 83.0 | Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl | Enzymatic colorimetric |
| HDL CHOLESTEROL, Serum | 39.7 | Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl | Elimination/ Catalase |
| NON HDL CHOLESTEROL, Serum | 104.2 | Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl | Calculated |
| LDL CHOLESTEROL, Serum | 87.6 | 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 | 16.6 | < /= 30 mg/dl | Calculated |
| CHOL / HDL CHOL RATIO, Serum | 3.6 | 0-4.5 Ratio | Calculated |
| LDL CHOL / HDL CHOL RATIO, Serum | 2.2 | 0-3.5 Ratio | Calculated |

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Namrata Raul

Dr.NAMRATA RAUL
M.D (Biochem)
Biochemist



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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 | 5.0 | 3.5-6.5 pmol/L | CLIA |
| Free T4, Serum | 16.7 | 11.5-22.7 pmol/L | CLIA |
| sensitiveTSH, Serum | 3.195 | 0.55-4.78 microIU/ml | CLIA |



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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 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)

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*** End Of Report ***



Anupa

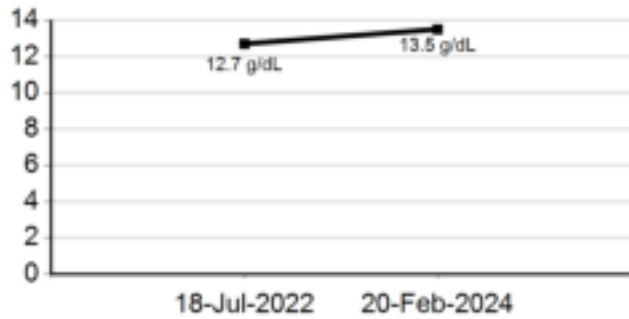
Dr.ANUPA DIXIT
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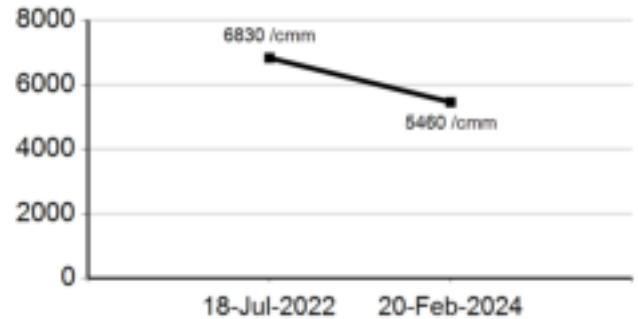
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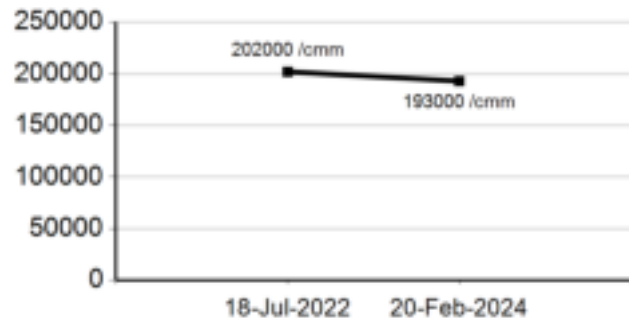
Haemoglobin



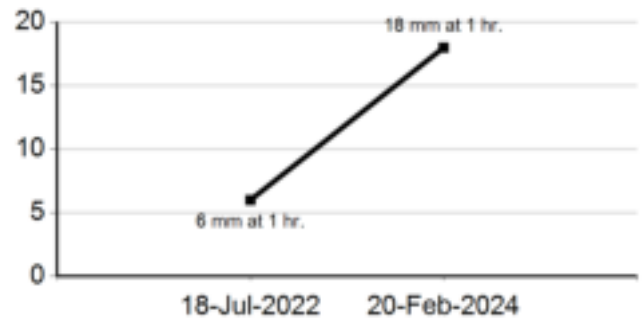
WBC Total Count



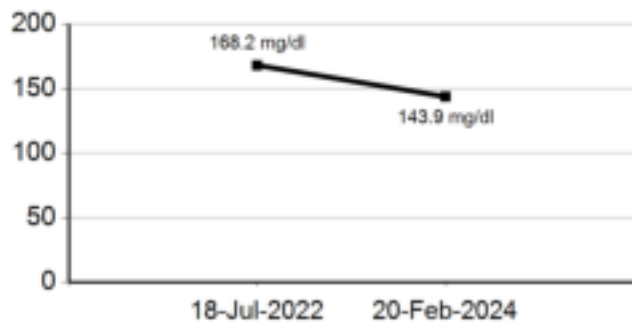
Platelet Count



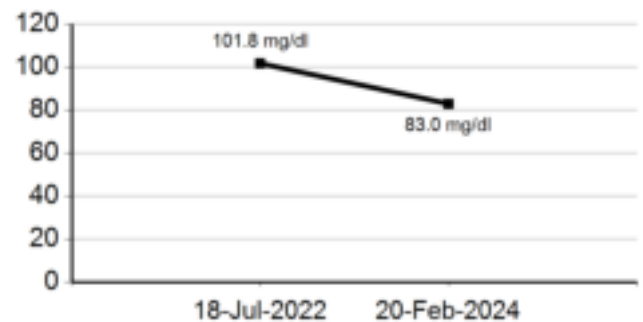
ESR



CHOLESTEROL



TRIGLYCERIDES

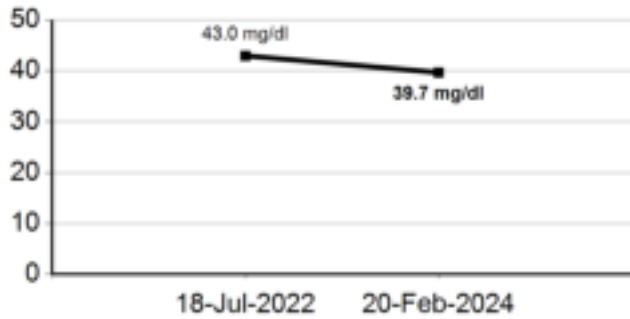




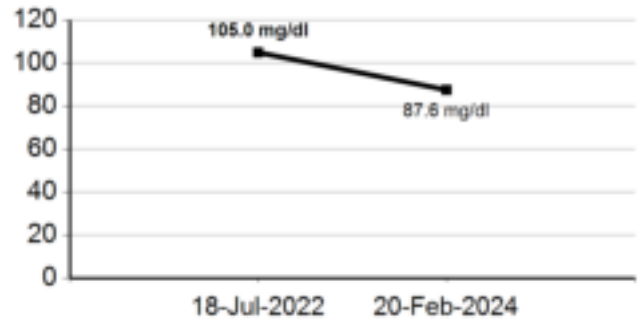
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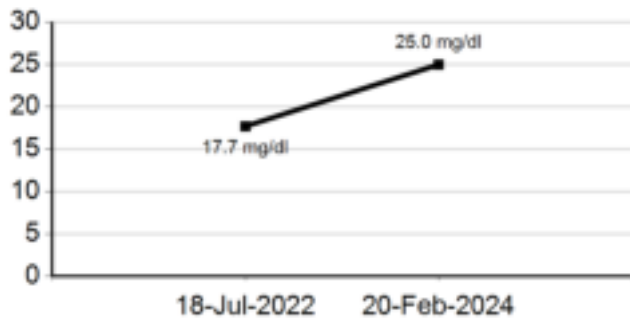
HDL CHOLESTEROL



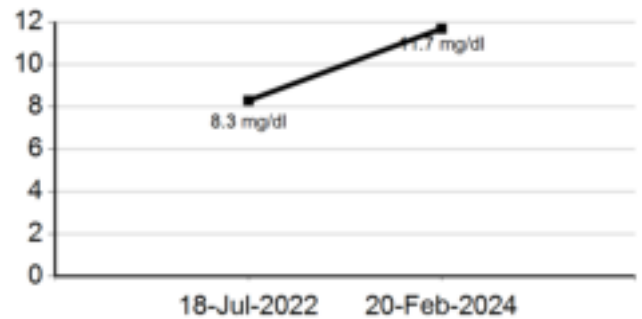
LDL CHOLESTEROL



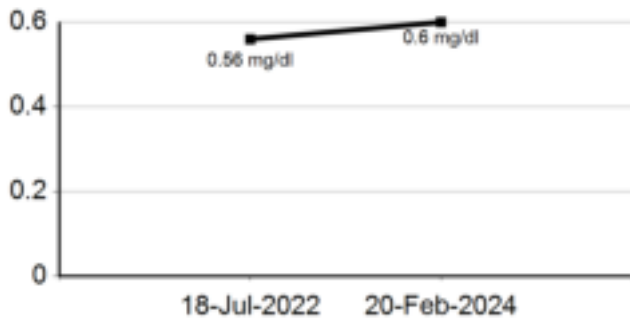
BLOOD UREA



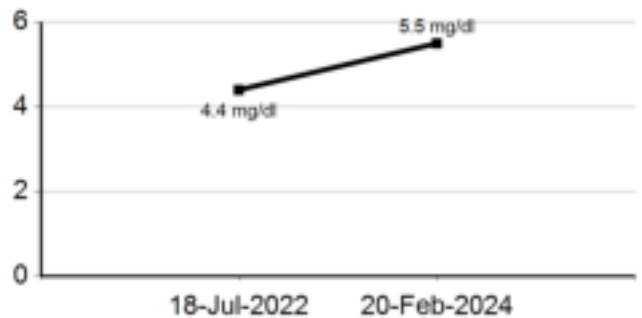
BUN



CREATININE



URIC ACID

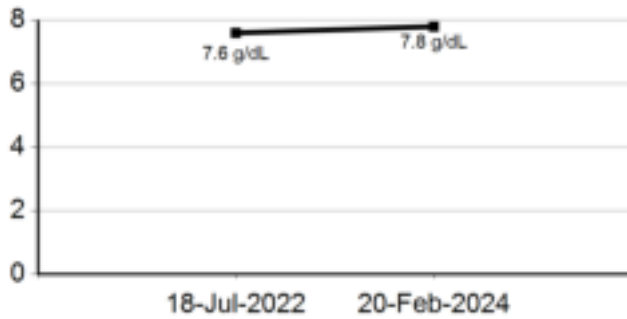




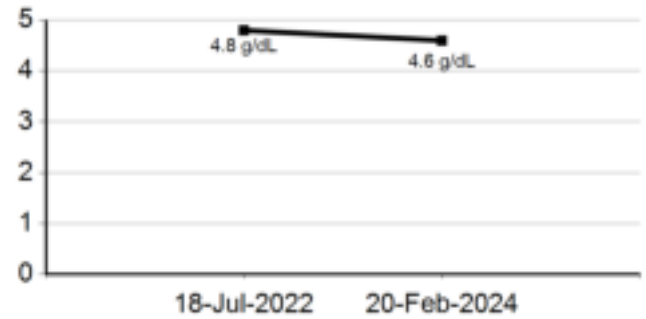
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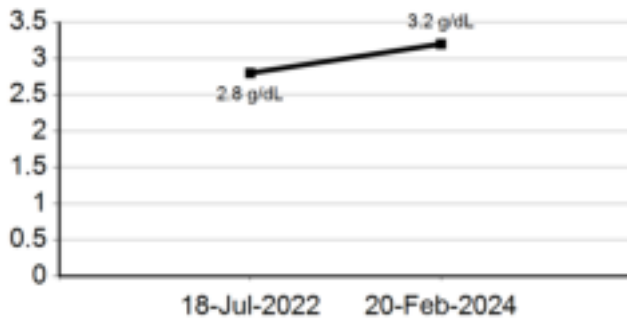
TOTAL PROTEINS



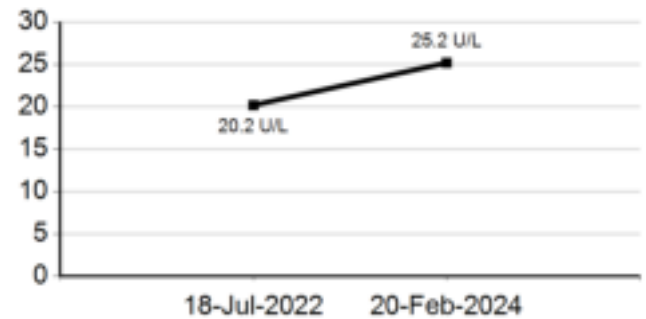
ALBUMIN



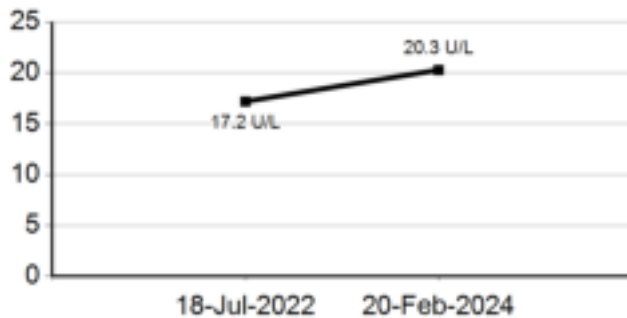
GLOBULIN



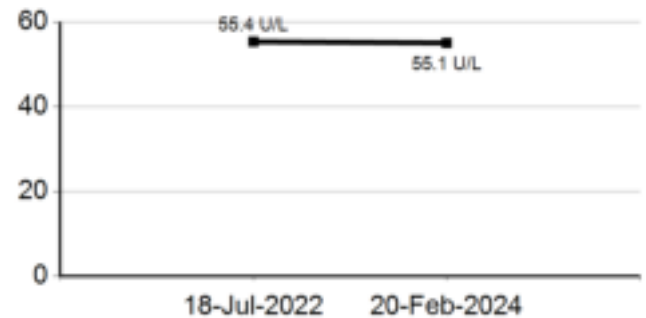
SGOT (AST)



SGPT (ALT)



ALKALINE PHOSPHATASE

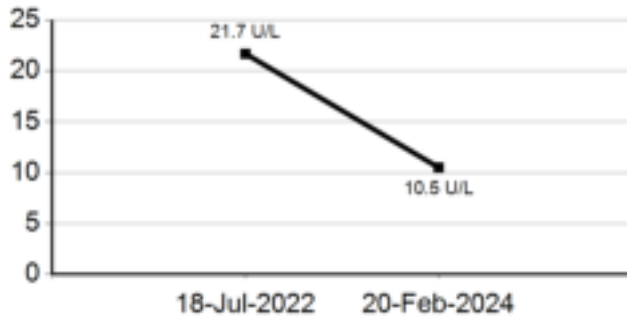




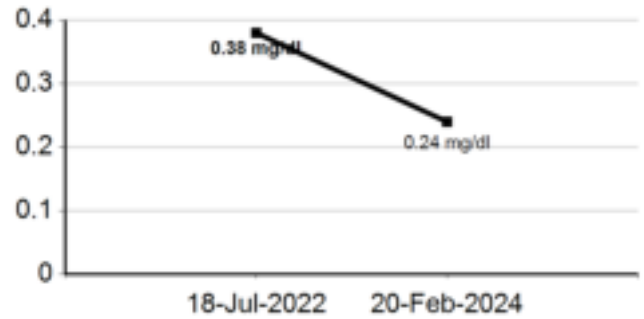
CID : 2405105686
 Name : MRS.MARIYA ANJUM
 Age / Gender : 33 Years / Female
 Consulting Dr. : -
 Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner
 Application To Scan the Code

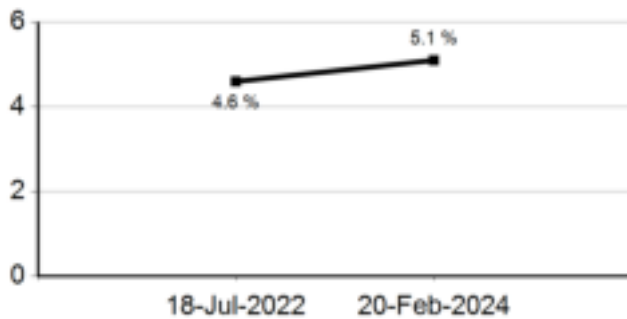
GAMMA GT



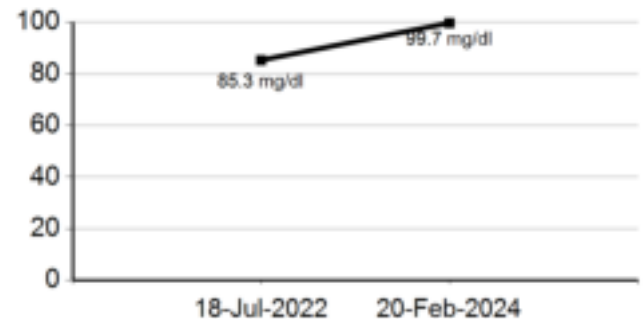
BILIRUBIN (DIRECT)



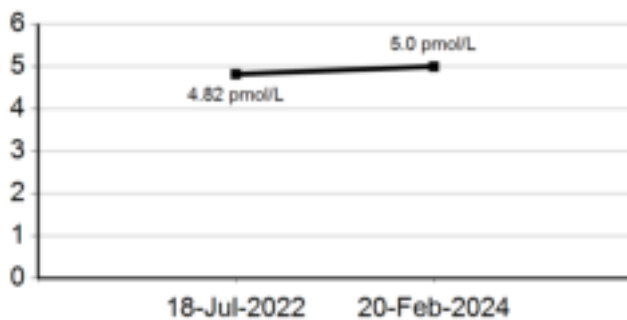
Glycosylated Hemoglobin (HbA1c)



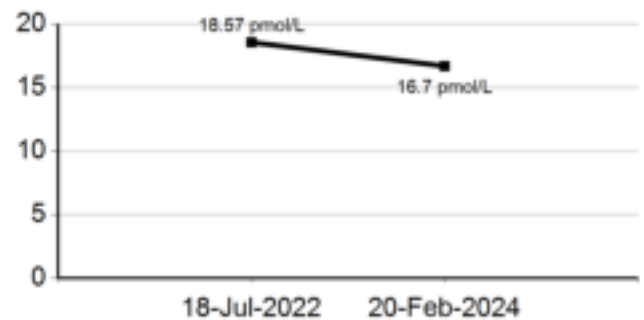
Estimated Average Glucose (eAG)



Free T3



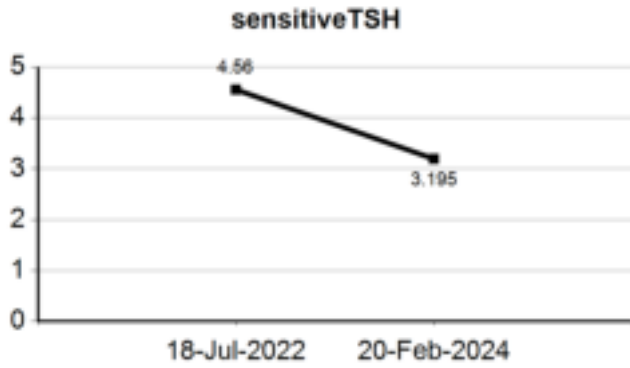
Free T4





Use a QR Code Scanner
Application To Scan the Code

CID : 2405105686
Name : MRS.MARIYA ANJUM
Age / Gender : 33 Years / Female
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)





Name : MRS. MARIYA ANJUM

Age / Gender : 33 Years/Female

Consulting Dr. :

Collected : 20-Feb-2024 / 10:04

Reg. Location : Borivali West (Main Centre)

Reported : 20-Feb-2024 / 16:59

PHYSICAL EXAMINATION REPORT

History and Complaints:

Nil

EXAMINATION FINDINGS:

Height (cms): 168

Weight (kg): 59

Temp (0c): Afebrile

Skin: Normal

Blood Pressure (mm/hg): 120/80

Nails: Normal

Pulse: 72/min

Lymph Node: Not palpable

Systems

Cardiovascular: Normal

Respiratory: Normal

Genitourinary: Normal

GI System: Normal

CNS: Normal

IMPRESSION:

Normal

ADVICE:

—

Name : MRS.MARIYA ANJUM

Age / Gender : 33 Years/Female

Consulting Dr. :

Reg.Location : Borivali West (Main Centre)

Collected : 20-Feb-2024 / 10:04

Reported : 20-Feb-2024 / 16:59

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 |
| 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 |


Suburban Diagnostics (I) Pvt. Ltd.
3016, 2nd Floor, Sundervan E-Complex,
Above Mercedes Showroom, L.T. Road,
Borivali (West), Mumbai - 400 092

PERSONAL HISTORY:

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

DR. NITIN SONAVANE
M.B.B.S (P.H.), D.D.M.S. (D.GARD),
CONSULTANT GYNECOLOGIST
REGD. NO. 10714

*** End Of Report ***


Dr.NITIN SONAVANE
PHYSICIAN

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

Name: MARIYA ANJUM

Date: 20-02-2024 Time: 11:05

Age: 33 Gender: F Height: 168 cms Weight: 59 Kg ID: 2405105686

Clinical History: NIL

Medications: NIL

Test Details:

Protocol: Bruce Predicted Max HR: 187 Target HR: 158 (85% of Pr. MHR)
 Exercise Time: 0:09:01 Achieved Max HR: 162 (87% of Pr. MHR)
 Max BP: 160/80 Max BP x HR: 25920 Max Mets: 10.1
 Test Termination Criteria: TEST COMPLET

Protocol Details:

| Stage Name | Stage Time | METS | Speed kmph | Grade % | Heart Rate bpm | BP mmHg | RPP | Max ST Level mm | Max ST Slope mV/s |
|------------------|------------|------|------------|---------|----------------|---------|-------|-----------------|-------------------|
| Supine | 00:33 | 1 | 0 | 0 | 88 | 120/80 | 10560 | 0.4 II | 3.6 V2 |
| Standing | 00:22 | 1 | 0 | 0 | 74 | 120/80 | 8880 | 0.5 II | 3.8 V2 |
| HyperVentilation | 00:12 | 1 | 0 | 0 | 73 | 120/80 | 8760 | 0.4 V5 | 3.4 V2 |
| PreTest | 00:06 | 1 | 1.6 | 0 | 74 | 120/80 | 8880 | 0.6 II | 3.8 V2 |
| Stage 1 | 03:00 | 4.7 | 2.7 | 10 | 126 | 140/80 | 17640 | -0.6 V2 | 3.5 V2 |
| Stage 2 | 03:00 | 7 | 4 | 12 | 131 | 140/80 | 18340 | -0.9 V3 | -3 III |
| Stage 3 | 03:00 | 10.1 | 5.5 | 14 | 162 | 140/80 | 22680 | -1.2 V3 | -3.4 III |
| Peak Exercise | 00:01 | 10.1 | 6.8 | 16 | 162 | 140/80 | 22680 | -1.2 V3 | -3.4 III |
| Recovery1 | 01:00 | 1 | 0 | 0 | 124 | 160/80 | 19840 | 0.4 II | -4.2 III |
| Recovery2 | 01:00 | 1 | 0 | 0 | 98 | 140/80 | 13720 | -0.3 V4 | -3.3 III |
| Recovery3 | 00:17 | 1 | 0 | 0 | 96 | 120/80 | 11520 | 0.4 II | -3.5 III |

Interpretation

The Patient Exercised according to Bruce Protocol for 0:09:01 achieving a work level of 10.1 METS.
 Resting Heart Rate, initially 88 bpm rose to a max. heart rate of 162bpm (87% of Predicted Maximum Heart Rate).
 Resting Blood Pressure of 120/80 mmHg, rose to a maximum Blood Pressure of 160/80 mmHg
 Good Effort tolerance Normal HR & BP Response No Angina or Arrhythmias
 No Significant ST-T Change Noted During Exercise Stress test Negative for Stress inducible ischaemia.

Suburban Diagnostics (I) Pvt. Ltd.
 3018 309, 3rd Floor, New Elegance
 Above Taxis Junction, L. T. Road
 Borivali (West), Mumbai - 400 082.

Ref. Doctor: ---

SCHILLER
The Art of Diagnostics

DR. NITIN S. SONAVANE DR. NITIN SONAVANE
 M.B.B.SAFER, D.M.M. (Seminar) Report edited by User)
 CONSULTANT CARDIOLOGIST
 REGD. NO. : 87714

SUBURBAN DIANOSTICS PVT. LTD. BOHIVALI

MARIYA ANJUM (33 F)

HR: 88 bpm

Bruce Protocol

ID: 2405105686

Date: 20-02-2024

Stage: Supine

Speed: 0 km/h

Exec Time: 0:00:00

Stage Time: 00:33

SBP: 120/80 mmHg

ST1: 0.00 (mV)

ST1 Slope: 0% (mV/s)

ST1 Slope: 0% (mV/s)

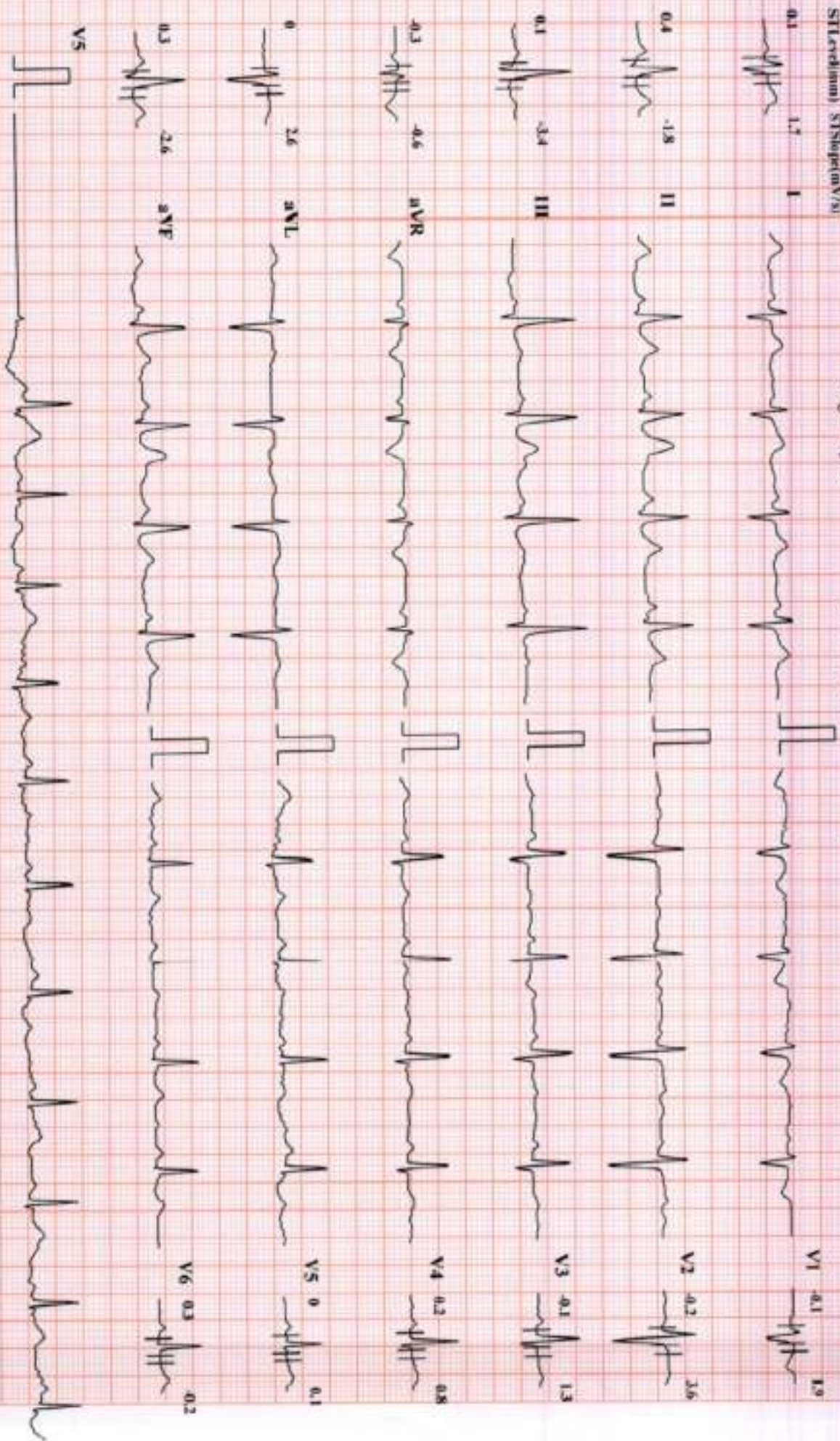


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz. Matrix Filter ON

ISO = R - 60 ms, J = R + 60 ms, 2xST1 = J + 60 ms



SUBURBAN DIANOSTICS PVT. LTD. BORIVALLI

MARIYA ANJUM (33 F)

HR: 74 bpm

Bruce Protocol
ST1:ekdmm) ST5:lope(mV/s)

ID: 2405105686
Date: 20-02-2024
Stage: Standing
Speed: 0
Exec Time: 0:00:00
Slope: 0.5%
Stage Time: 00:22
THR: 158 bpm

BP: 120/80 mmHg
ST1:ekdmm) ST5:lope(mV/s)

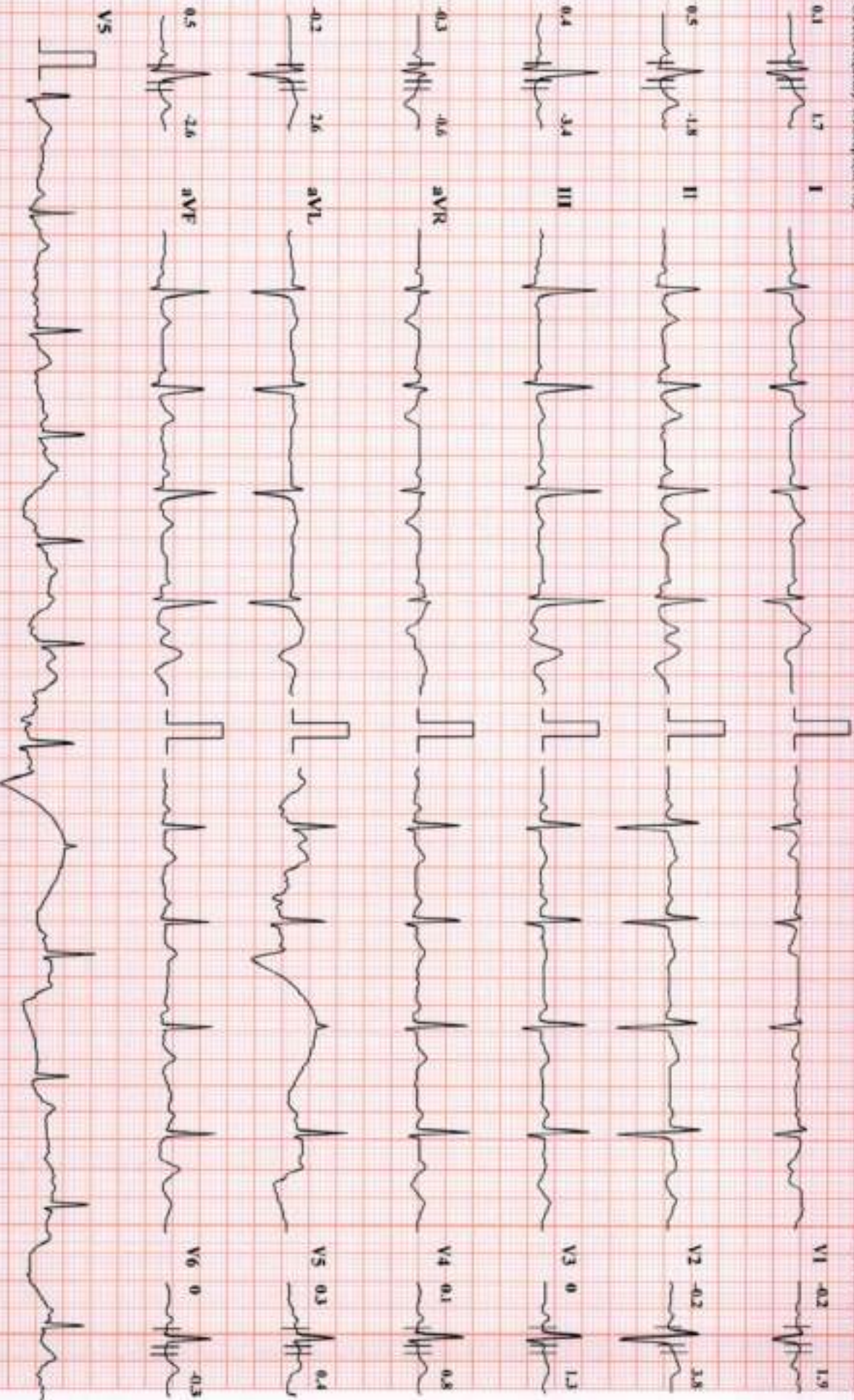


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms

Schiller Cardioport CS-30 Version: 3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

MARIYA ANJUM (33 F)

ID: 2405105666

Date: 26-02-2024

Exec Time : 0:00:00

Stage Time: 00:12

HR: 73 bpm

BP: 120/80 mmHg

STLeads(m) STSIleads(Vs)

Bruce Protocol

Stage: HyperVentilation

Speed: 0

Slope: 0%

STLeads(m) STSIleads(Vs)

STLeads(m) STSIleads(Vs)

V1 -0.1 1.2

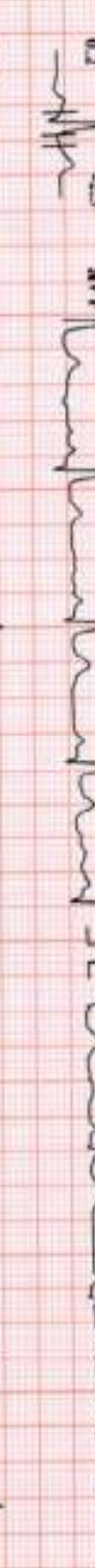
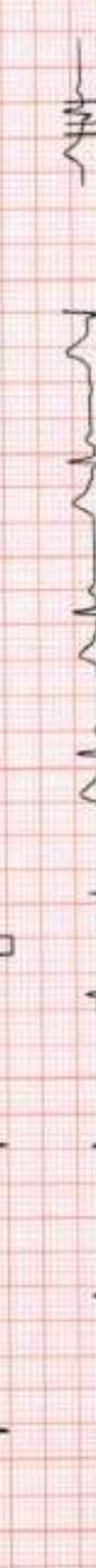


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Main Filter: ON

ISO - R - 60 ms, J - R + 60 ms, Post J - J + 60 ms

Schiller Cardiotracer CS-20 Version: 3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

MARIYA ANJUM (33F)

ID: 2405165686

Date: 20-02-2024

Exec Time: 0:03:00

Stage Time: 03:00

HR: 126 bpm

BP: 140/86 mmHg

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

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

Stage: 1

Speed: 2.7 kmph

Slope: 10%

THR: 158 bpm

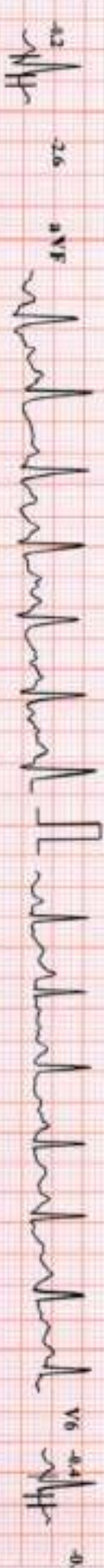
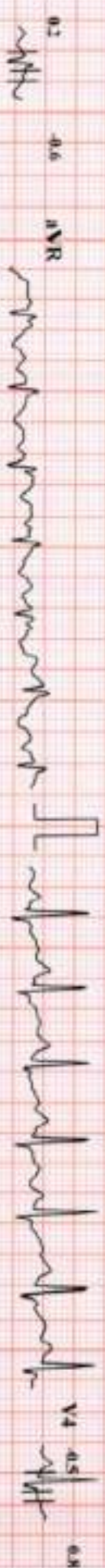
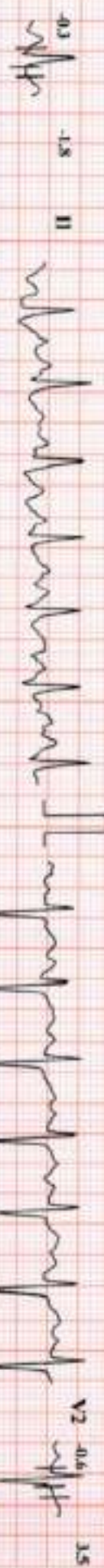


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO - R - 60 ms, J + R + 60 ms, Post J - J + 60 ms

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

MARIYA ANJUM (33 F)

ID: 2405105686

Date: 20-02-2024

Exec Time: 0:06:00

Stage Time: 03:00

HR: 131 bpm

Bruc Protocol

Stage: 2

Speed: 4 kmph

Slope: 12 %

THR: 158 bpm

Exp: 140-20 mmHg
STSegment STSegmentV9

STSegment STSegmentV9

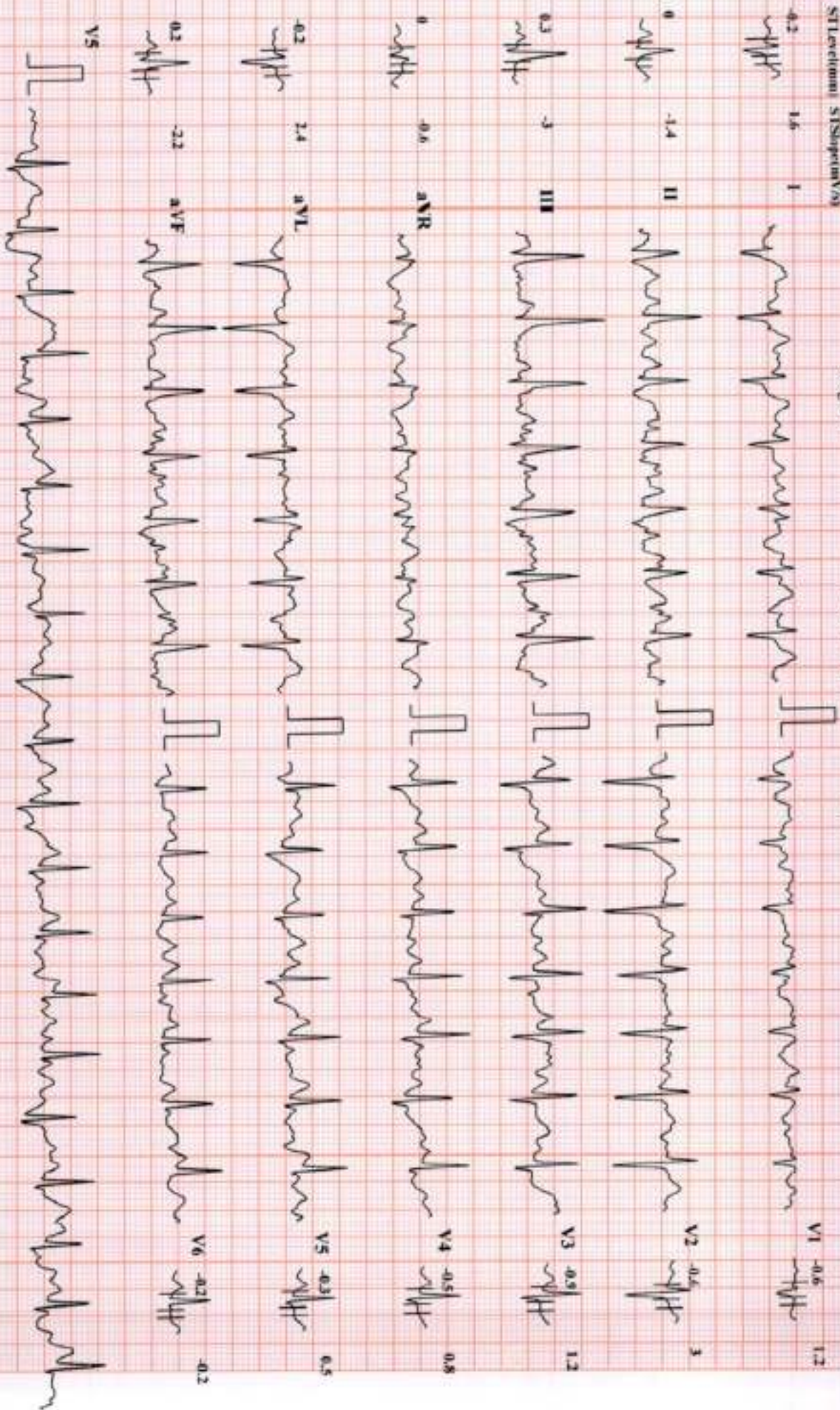


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO - R - 60 ms, J - R + 60 ms, Post J = J + 60 ms

SUBURBAN DIANOSTICS PVT. LTD. BORIVALLI

MARIYA ANJUM (33 F)

ID: 2405105686

Date: 20-02-2024

Exec Time: 0:09:00

Sage Time: 03:00

HR: 162 bpm

Brace Protocol

STL:evl(mml) ST:Slpqr(mV%)

Sage: 3

Speed: 5.5 kmph

Slope: 14 %

THR: 158 bpm

BP: 140/80 mmHg

STL:evl(mml) ST:Slpqr(mV%)

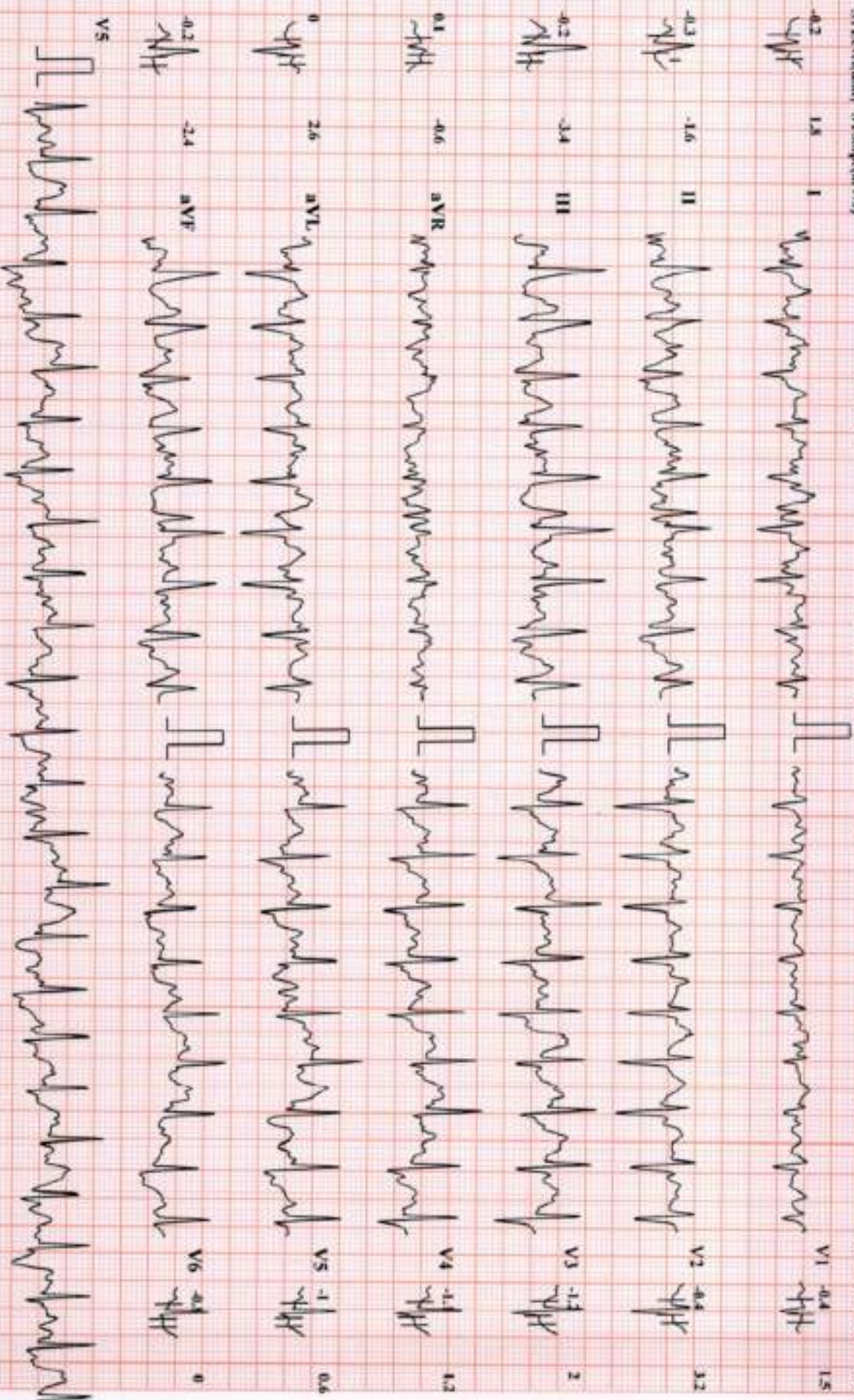


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz

Mains Filter: ON

ESD - R - 40 ms, J + R + 60 ms, Post J - J + 60 ms



SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

MARIYA ANJUM (33 F)

ID: 2405105686

Date: 20-02-2024

Exec Time: 0:09:01

Stage Time: 00:01

HR: 162 bpm

Bruce Protocol

Stage: 4 Peak Exercise

Speed: 6.8 kmph

Slope: 16 %

THR: 158 bpm

BP: 140/80 mmHg

STLevel(mV) STSlope(mV/s)

STLevel(mV) STSlope(mV/s)

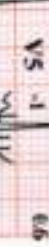
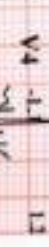
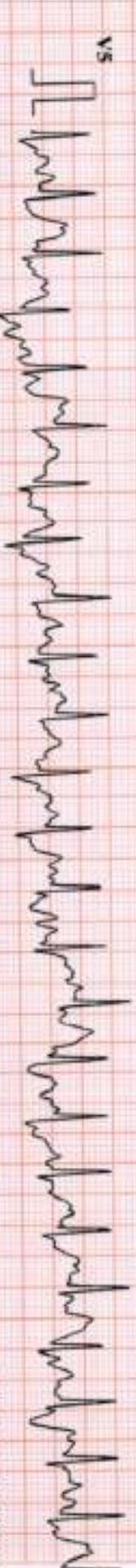
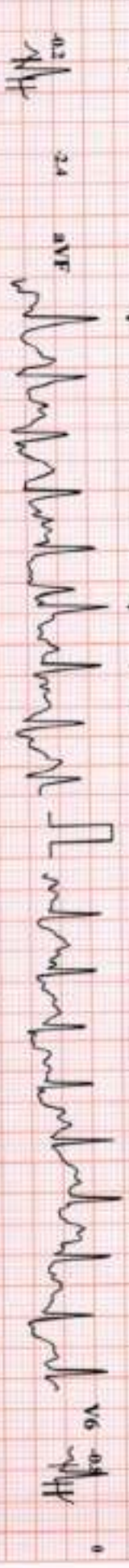
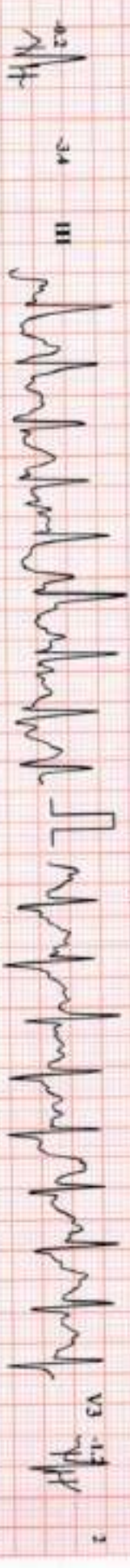
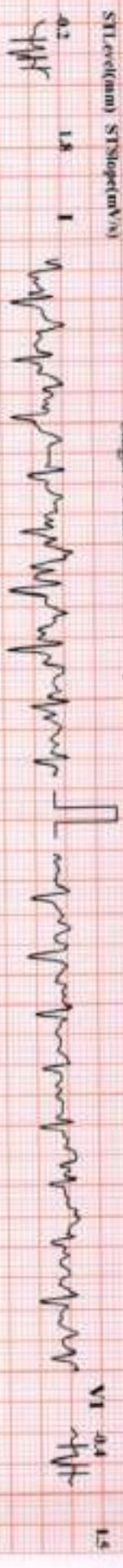


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz, Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms

SUBURBAN DIAGNOSTICS PVT. LTD. BORIVALI

MARIYA ANJUM (33 F)

Brace Protocol
STLead(m) STSlope(mV/s)

ID: 2405105686
Stage: Recovery 1

Date: 20-02-2024
Speed: 0 kmph

Exec Time: 00:00
Slope: 0 %

Stage Time: 01:00
THR: 158 bpm

HR: 124 bpm

BP: 160/80 mmHg
STLead(m) STSlope(mV/s)

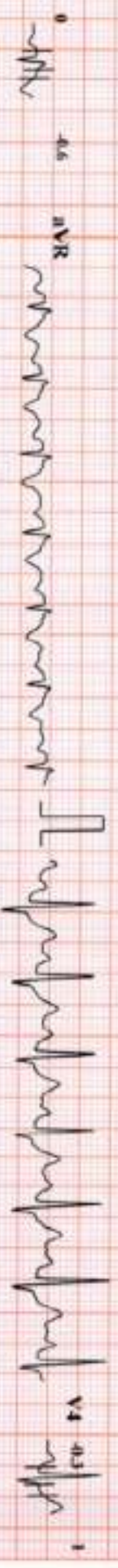
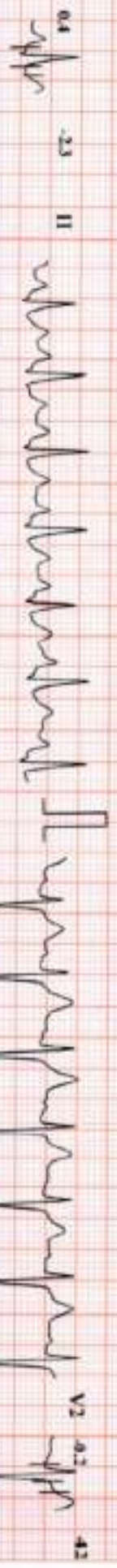


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO - R - 66 ms, J - R + 60 ms, Pse J = J + 60 ms

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

MARIYA ANJUM (33 F)

ID: 2405105686

Date: 20-02-2024

Exec Time : 00:00

Stage Time: 00:07

HR: 114 bpm

Bruce Protocol

Stage: Recovery2

Speed: 0 kmph

Slope: 0%

THR: 158 bpm

BP: 140/80 mmHg
ST(Slope/mm) ST(Slope(mV/s))

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

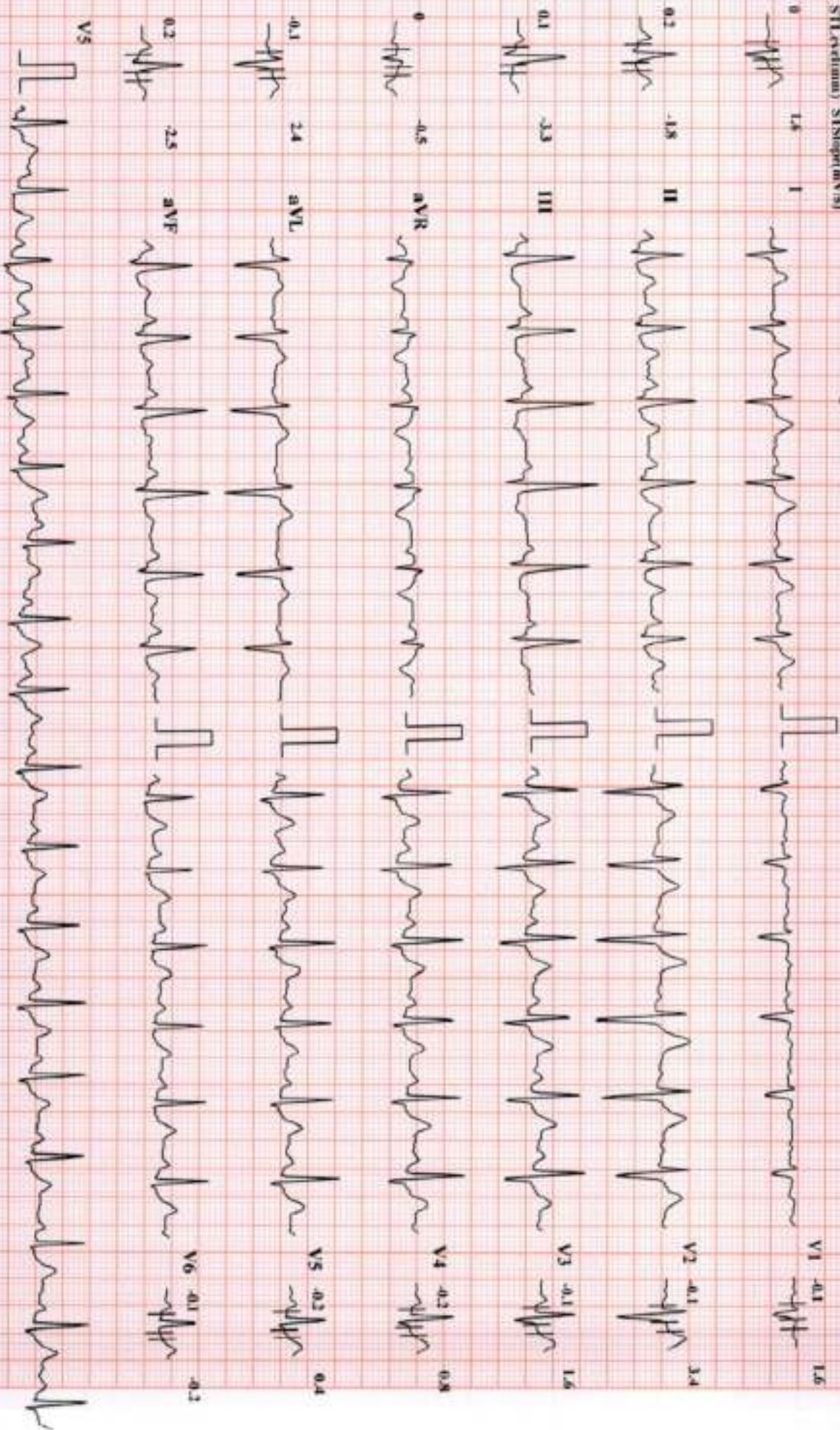


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz, Main Filter ON

ISO = R - 60 ms, J = E + 60 ms, Post J = J + 60 ms

Schiller Cardiot CS-20 Version 3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

MARIYA ANJUMI (33 F)

ID: 2405105686

Date: 20-02-2024

Exec Time: 00:00

Stage Time: 01:00

HR: 98 bpm

Brace Protocol

Stage: Recovery/2

Speed: 0 kmph

Slope: 0 %

THR: 158 bpm

BP: 140/80 mmHg
STL(s/dmm) STSllope(mV/s)

STL(s/dmm) STSllope(mV/s)

V1 -0.1 1.4

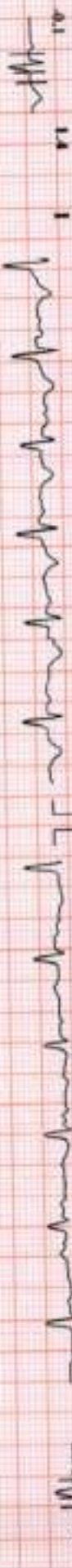


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter ON

SD - R - 60 ms, J - R + 60 ms, Post J - J + 60 ms

SUBURBAN DIAGNOSTICS PVT. LTD. BORIVALI

MARIYA ANJUM (33 F)

Bruce Protocol
STLevel(mV) STSlope(mV/s)

ID: 2405105686
Stage: Recovery/3

Date: 20-02-2024
Speed: 0 kmph

Exec Time: 00:00
Slope: 0 %

Stage Time: 00:13
THR: 158 bpm

HR: 93 bpm

BP: 120/80 mmHg
STLevel(mV) STSlope(mV/s)

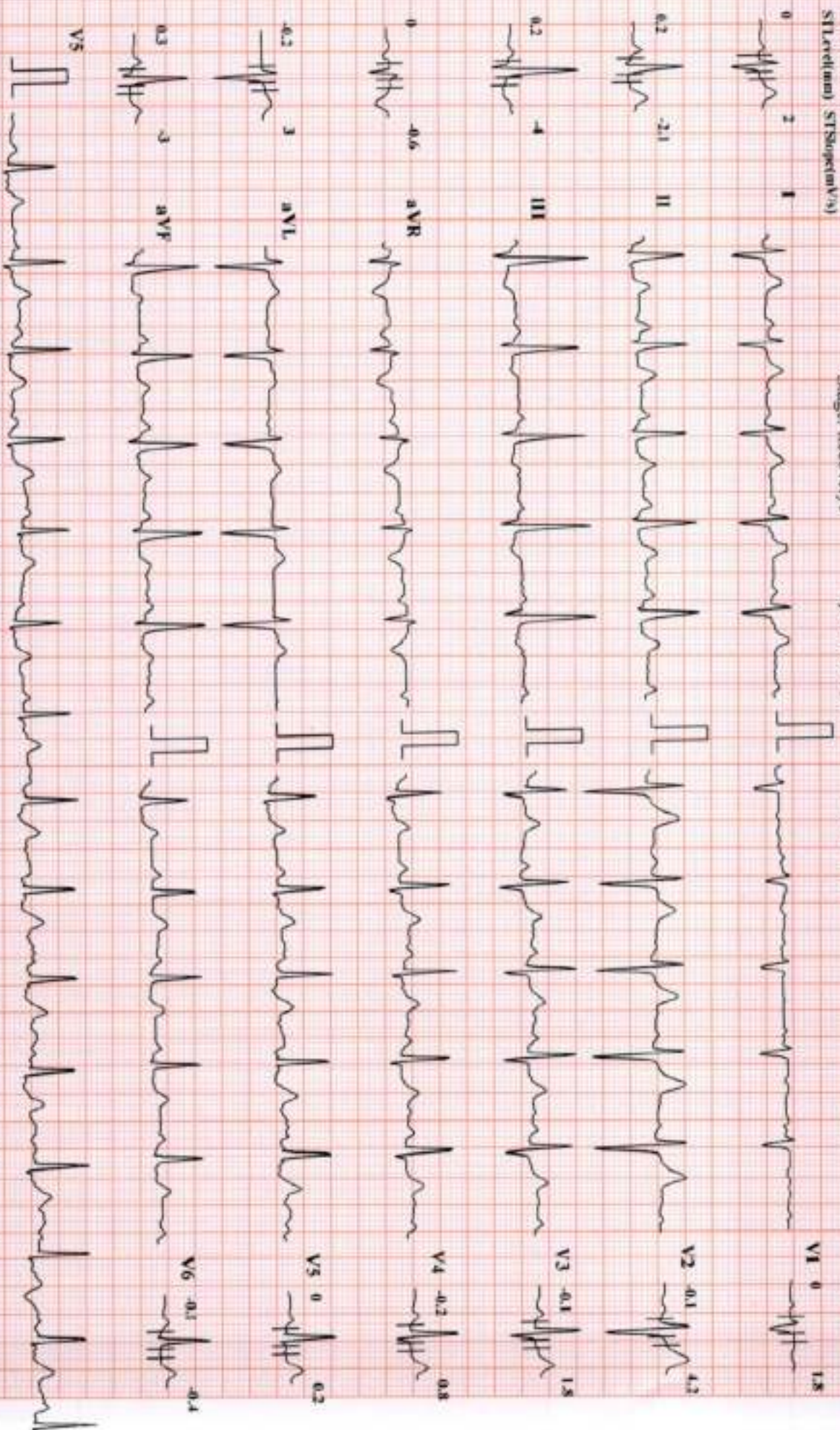


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz, Main Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 60 ms



CID : 2405105686
Name : Mrs MARIYA ANJUM
Age / Sex : 33 Years/Female
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 20-Feb-2024
Reported : 20-Feb-2024/11:37

USG WHOLE ABDOMEN

LIVER: Liver is normal in size 13.8 cm, with mild generalized increase in parenchymal echotexture. There is no intra-hepatic biliary radical dilatation.No evidence of any focal lesion.

GALL BLADDER: Gall bladder is distended and appears normal. No obvious wall thickening is noted. There is no evidence of any calculus.

PORTAL VEIN: Portal vein is normal. **CBD:** CBD is normal.

PANCREAS: Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification.

KIDNEYS: Right kidney measures 9.4 x 3.6 cm. Left kidney measures 9.8 x 4.1 cm.

Both kidneys are normal in shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

SPLEEN: Spleen is normal in size, shape and echotexture. No focal lesion is seen.

URINARY BLADDER: Urinary bladder is distended and normal. Wall thickness is within normal limits.

UTERUS: Uterus is retroverted, normal and measures 5.2 x 3.7 x 4.8 cm. Uterine myometrium shows homogenous echotexture. Endometrium is normal in thickness and measures 5.8 mm. Cervix appears normal.

OVARIES: Both ovaries appear normal in size and echotexture.

The right ovary measures 1.7 x 2.9 cm.

The left ovary measures 2.0 x 1.8 cm.

Bilateral adnexa is clear.

No free fluid or obvious significant lymphadenopathy is seen.



Use a QR Code Scanner
Application To Scan the Code

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Name : Mrs MARIYA ANJUM
Age / Sex : 33 Years/Female
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 20-Feb-2024
Reported : 20-Feb-2024/11:37

Opinion:

Grade I fatty infiltration of liver.

For clinical correlation and follow up.

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have inter-observer variations. Further / Follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis. Patient was explained in detail verbally about the USG findings, USG measurements and its limitations. In case of any typographical error in the report, patient is requested to immediately contact the center for rectification within 7 days post which the center will not be responsible for any rectification. Please interpret accordingly.

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

DR.SUDHANSHU SAXENA
Consultant Radiologist
M.B.B.S DMRE (RadioDiagnosis)
RegNo .MMC 2016061376.



Use a QR Code Scanner
Application To Scan the Code

CID : 2405105686
Name : Mrs MARIYA ANJUM
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Reg. Location : Borivali West

Reg. Date : 20-Feb-2024
Reported : 20-Feb-2024/11:37



Use a QR Code Scanner
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CID : 2405105686
Name : Mrs MARIYA ANJUM
Age / Sex : 33 Years/Female
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 20-Feb-2024
Reported : 20-Feb-2024/13:12

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.SUDHANSHU SAXENA
Consultant Radiologist
M.B.B.S DMRE (RadioDiagnosis)
RegNo .MMC 2016061376.



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