



CID : 2432015748  
Name : MR.MAHENDRA DHANPAL  
Age / Gender : 52 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

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**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**

**CBC (Complete Blood Count), Blood**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
<b><u>RBC PARAMETERS</u></b>			
Haemoglobin	13.8	13.0-17.0 g/dL	Spectrophotometric
RBC	6.30	4.5-5.5 mil/cmm	Elect. Impedance
PCV	42.0	40-50 %	Measured
MCV	67	80-100 fl	Calculated
MCH	21.9	27-32 pg	Calculated
MCHC	32.9	31.5-34.5 g/dL	Calculated
RDW	14.4	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	10230	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	33.1	20-40 %	
Absolute Lymphocytes	3386.1	1000-3000 /cmm	Calculated
Monocytes	5.8	2-10 %	
Absolute Monocytes	593.3	200-1000 /cmm	Calculated
Neutrophils	55.1	40-80 %	
Absolute Neutrophils	5636.7	2000-7000 /cmm	Calculated
Eosinophils	5.4	1-6 %	
Absolute Eosinophils	552.4	20-500 /cmm	Calculated
Basophils	0.6	0.1-2 %	
Absolute Basophils	61.4	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<b><u>PLATELET PARAMETERS</u></b>			
Platelet Count	322000	150000-400000 /cmm	Elect. Impedance
MPV	8.7	6-11 fl	Calculated
PDW	18.0	11-18 %	Calculated
<b><u>RBC MORPHOLOGY</u></b>			
Hypochromia	+		
Microcytosis	++		





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**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma Fasting	126.2	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase

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

GLUCOSE (SUGAR) PP, Fluoride Plasma PP	172.0	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
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Note: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

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

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



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**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**KIDNEY FUNCTION TESTS**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
BLOOD UREA, Serum	16.1	12.8-42.8 mg/dl	Kinetic
BUN, Serum	7.5	6-20 mg/dl	Calculated
CREATININE, Serum	0.96	0.67-1.17 mg/dl	Enzymatic
eGFR, Serum	95	(ml/min/1.73sqm) 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	Calculated

Note: eGFR estimation is calculated using 2021 CKD-EPI GFR equation

TOTAL PROTEINS, Serum	7.5	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.2	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	3.3	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.3	1 - 2	Calculated
URIC ACID, Serum	4.5	3.5-7.2 mg/dl	Enzymatic
PHOSPHORUS, Serum	3.8	2.7-4.5 mg/dl	Molybdate UV
CALCIUM, Serum	9.6	8.6-10.0 mg/dl	N-BAPTA
SODIUM, Serum	137	135-148 mmol/l	ISE
POTASSIUM, Serum	5.1	3.5-5.3 mmol/l	ISE
CHLORIDE, Serum	98	98-107 mmol/l	ISE

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**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**GLYCOSYLATED HEMOGLOBIN (HbA1c)**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	7.7	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	174.3	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.

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**Dr.MILLU JAIN**  
**M.D.(PATH)**  
**Pathologist**



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**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**PROSTATE SPECIFIC ANTIGEN (PSA)**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
TOTAL PSA, Serum	0.900	<4.0 ng/ml	CLIA

**Clinical Significance:**

- PSA is detected in the serum of males with normal, benign hyper-plastic, and malignant prostate tissue.
- Monitoring patients with a history of prostate cancer as an early indicator of recurrence and response to treatment.
- Prostate cancer screening 4. The percentage of Free PSA (FPSA) in serum is described as being significantly higher in patients with BPH than in patients with prostate cancer. 5. Calculation of % free PSA (ie. FPSA/TPSA x 100 ), has been suggested as way of improving the differentiation of BPH and Prostate cancer.

**Interpretation:**

**Increased In-** Prostate diseases, Cancer, Prostatitis, Benign prostatic hyperplasia, Prostatic ischemia, Acute urinary retention, Manipulations like Prostatic massage, Cystoscopy, Needle biopsy, Transurethral resection, Digital rectal examination, Radiation therapy, Indwelling catheter, Vigorous bicycle exercise, Drugs (e.g., testosterone), Physiologic fluctuations. Also found in small amounts in other cancers (sweat and salivary glands, breast, colon, lung, ovary) and in Skene glands of female urethra and in term placenta, Acute renal failure, Acute myocardial infarction,

**Decreased In-** Ejaculation within 24-48 hours, Castration, Antiandrogen drugs (e.g., finasteride), Radiation therapy, Prostatectomy, PSA falls 17% in 3 days after lying in hospital, Artfactual (e.g., improper specimen collection; very high PSA levels). Finasteride (5- $\alpha$ -reductase inhibitor) reduces PSA by 50% after 6 months in men without cancer.

**Reflex Tests:** % FREE PSA , USG Prostate

**Limitations:**

- tPSA values determined on patient samples by different testing procedures cannot be directly compared with one another and could be the cause of erroneous medical interpretations. If there is a change in the tPSA assay procedure used while monitoring therapy, then the tPSA values obtained upon changing over to the new procedure must be confirmed by parallel measurements with both methods. Immediate PSA testing following digital rectal examination, ejaculation, prostatic massage, indwelling catheterization, ultrasonography and needle biopsy of prostate is not recommended as they falsely elevate levels.
- Patients who have been regularly exposed to animals or have received immunotherapy or diagnostic procedures utilizing immunoglobulins or immunoglobulin fragments may produce antibodies, e.g. HAMA, that interferes with immunoassays.
- PSA results should be interpreted in light of the total clinical presentation of the patient, including: symptoms, clinical history, data from additional tests, and other appropriate information.
- Serum PSA concentrations should not be interpreted as absolute evidence for the presence or absence of prostate cancer.

**Note :** The concentration of PSA in a given specimen, determined with assay from different manufacturers, may not be comparable due to differences in assay methods and reagent specificity.

**Reference:**

- Wallach's Interpretation of diagnostic tests
- Total PSA Pack insert



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**Dr.ANUPA DIXIT**  
**M.D.(PATH)**  
**Consultant - Pathologist**



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**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**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	-
Transparency	Clear	Clear	-
<b><u>CHEMICAL EXAMINATION</u></b>			
Specific Gravity	1.010	1.002-1.035	Chemical Indicator
Reaction (pH)	6.0	5-8	pH Indicator
Proteins	Absent	Absent	Protein error principle
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>			
(WBC)Pus cells / hpf	0-1	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	1-2	0-5/hpf	
Hyaline Casts	Absent	Absent	
Pathological cast	Absent	Absent	
Calcium oxalate monohydrate crystals	Absent	Absent	
Calcium oxalate dihydrate crystals	Absent	Absent	
Triple phosphate crystals	Absent	Absent	
Uric acid crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	+(>20/hpf)	0-20/hpf	
Yeast	Absent	Absent	
Others	-		





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



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**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**BLOOD GROUPING & Rh TYPING**

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	A
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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**Dr. ANUPA DIXIT**  
**M.D.(PATH)**  
**Consultant Pathologist**



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**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**LIPID PROFILE**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	225.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	138.0	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	49.8	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	175.2	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	147.0	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	28.2	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.5	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	3.0	0-3.5 Ratio	Calculated

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**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**THYROID FUNCTION TESTS**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	5.8	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	18.0	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	1.79	0.35-5.5 microIU/ml microU/ml	ECLIA





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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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**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**  
**LIVER FUNCTION TESTS**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
BILIRUBIN (TOTAL), Serum	0.44	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.2	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.24	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.5	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.2	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	3.3	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.3	1 - 2	Calculated
SGOT (AST), Serum	24.0	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	26.7	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	51.6	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	73.0	40-130 U/L	Colorimetric

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**MEDIWHEEL FULL BODY HEALTH CHECKUP MALE ABOVE 40/2D ECHO**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	
Urine Sugar (PP)	+++	Absent	
Urine Ketones (PP)	Absent	Absent	

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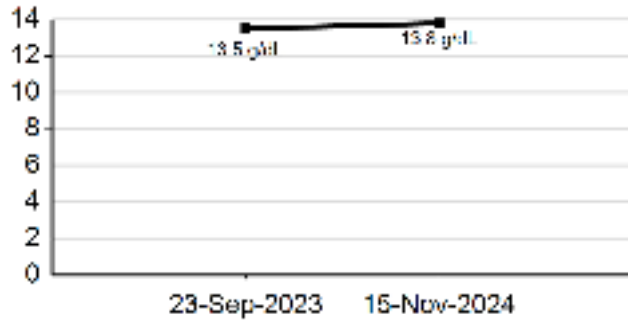
**Dr.JAGESHWAR MANDAL**  
**CHOUPAL**  
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**Pathologist**



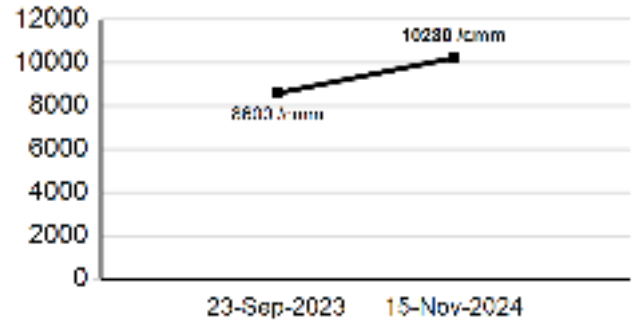
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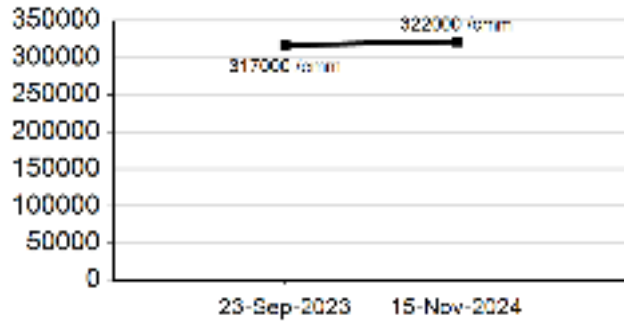
**Haemoglobin**



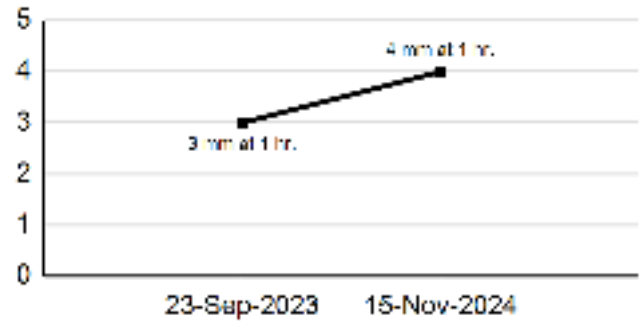
**WBC Total Count**



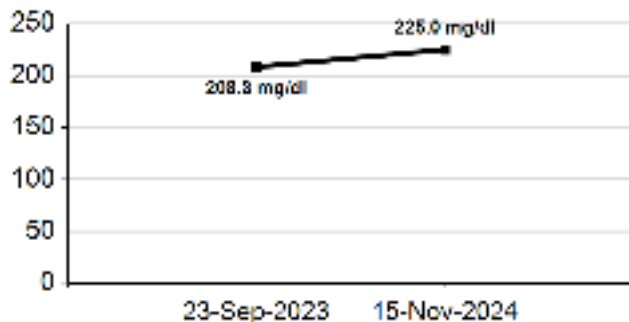
**Platelet Count**



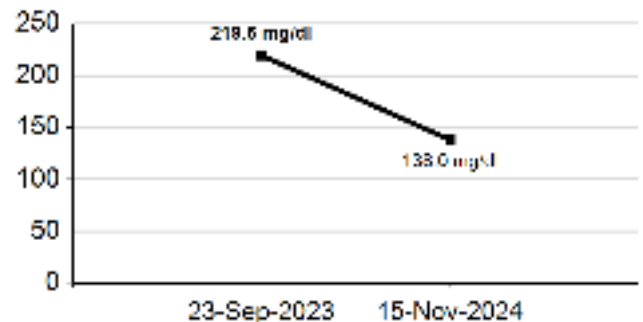
**ESR**



**CHOLESTEROL**



**TRIGLYCERIDES**



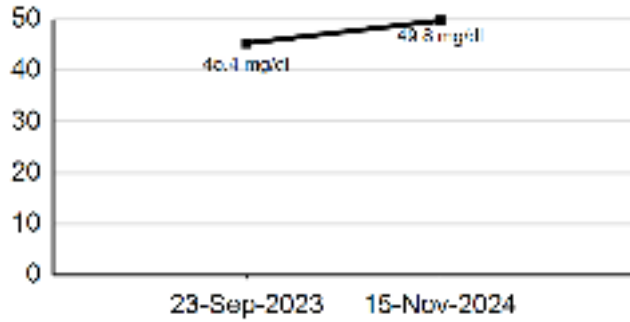




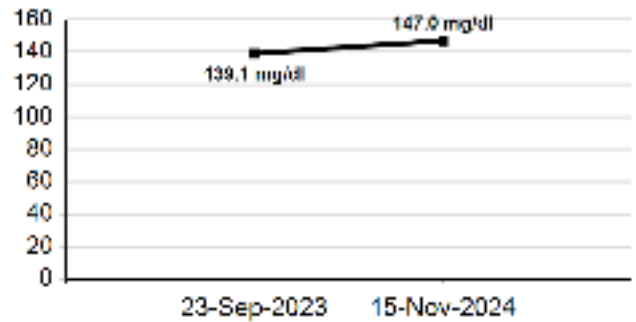
CID : 2432015748  
 Name : MR.MAHENDRA DHANPAL  
 Age / Gender : 52 Years / Male  
 Consulting Dr. : -  
 Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner  
 Application To Scan the Code

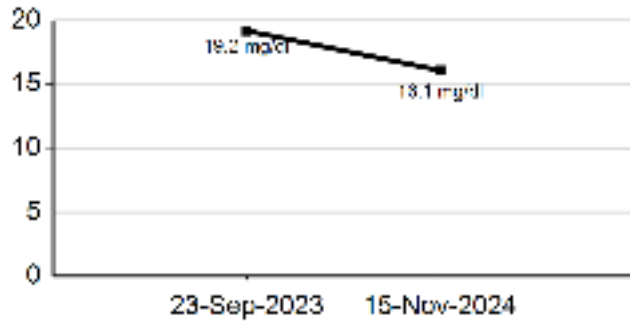
**HDL CHOLESTEROL**



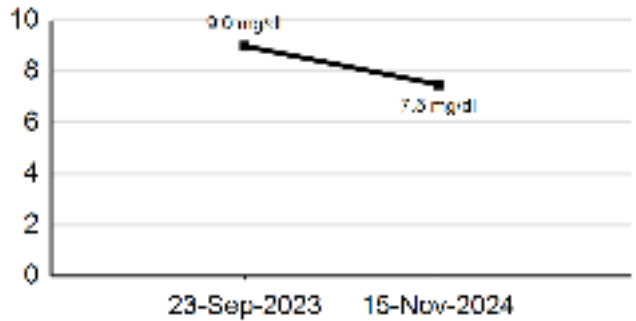
**LDL CHOLESTEROL**



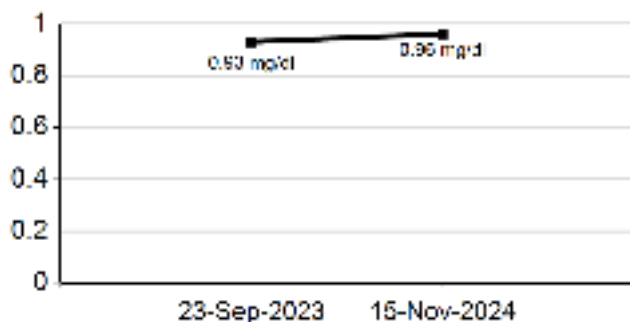
**BLOOD UREA**



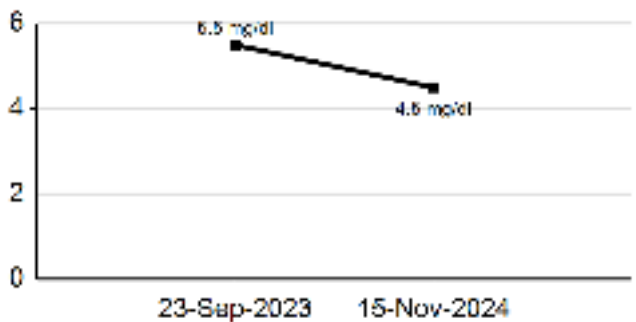
**BUN**



**CREATININE**



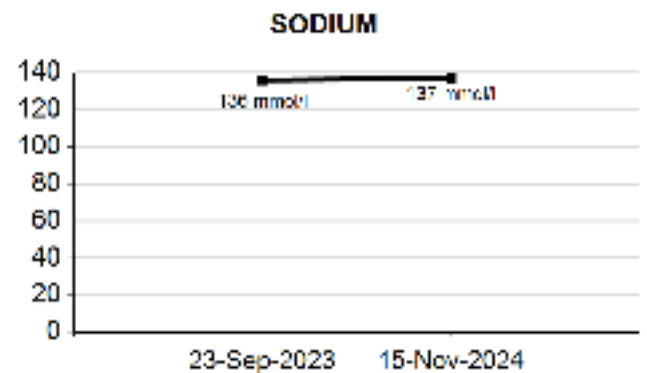
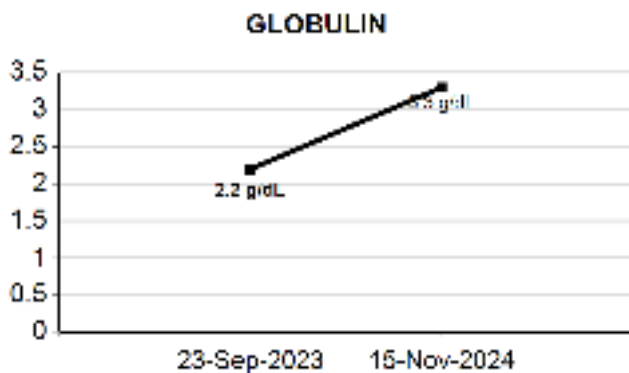
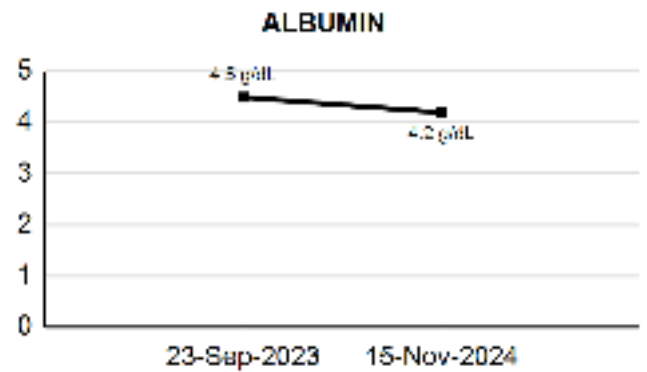
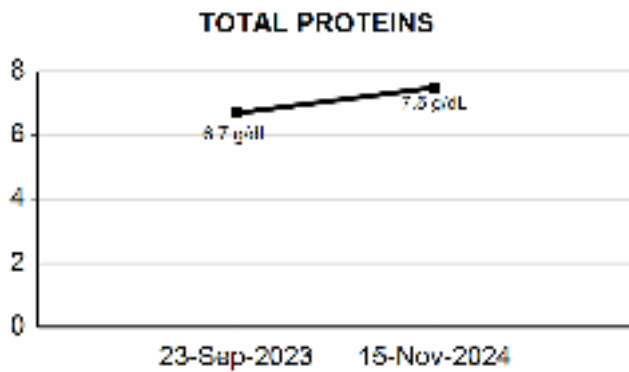
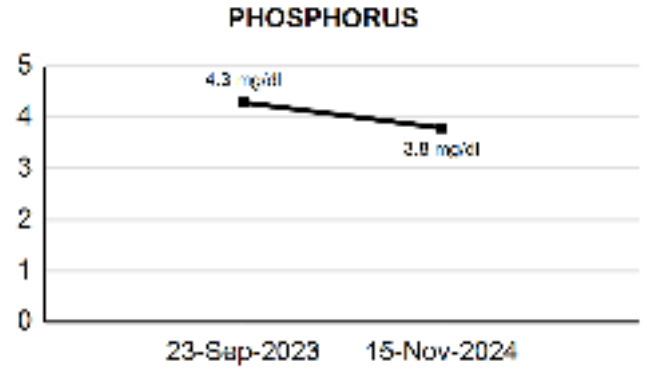
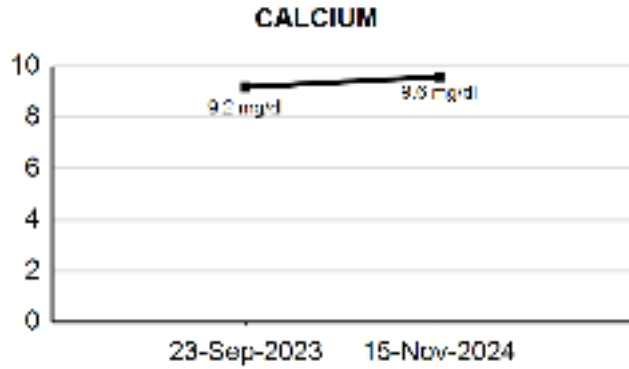
**URIC ACID**





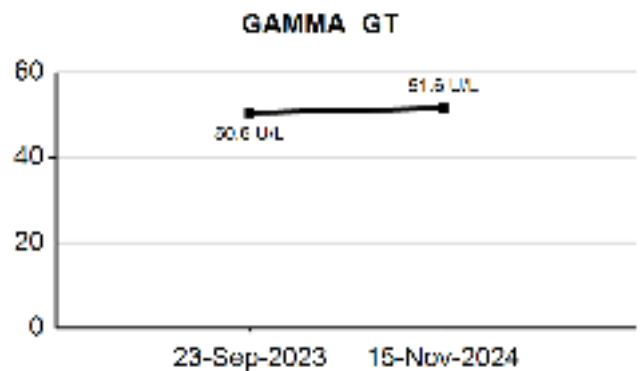
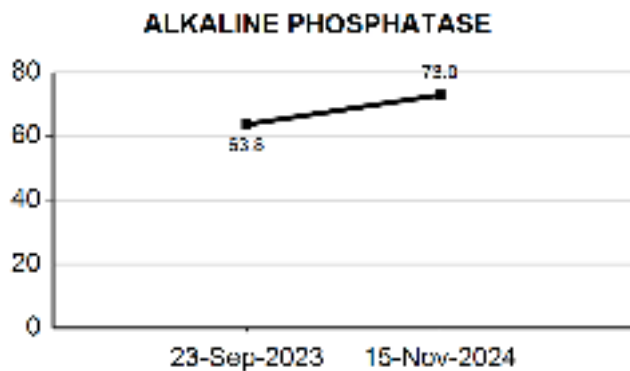
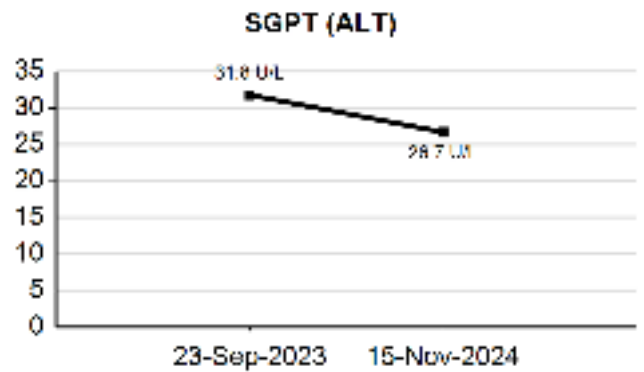
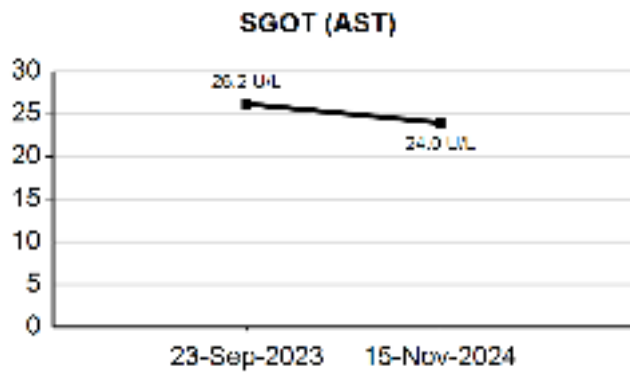
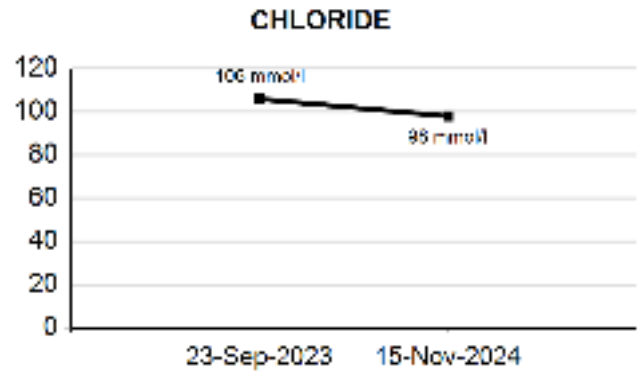
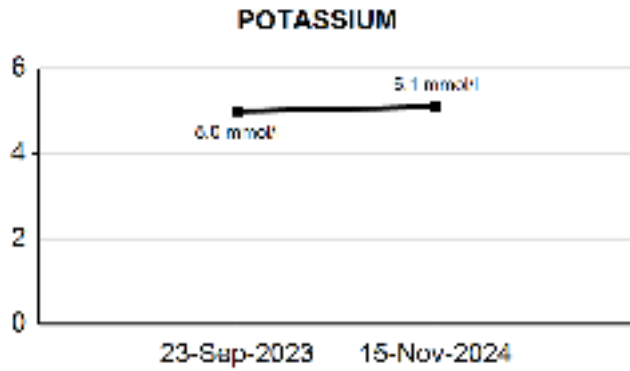
CID : 2432015748  
Name : MR.MAHENDRA DHANPAL  
Age / Gender : 52 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code



CID : 2432015748  
 Name : MR.MAHENDRA DHANPAL  
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Use a QR Code Scanner  
 Application To Scan the Code

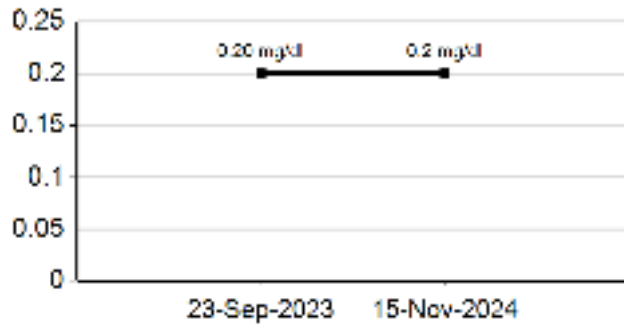




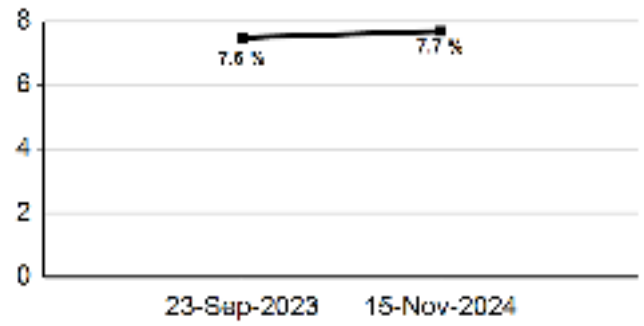
CID : 2432015748  
 Name : MR.MAHENDRA DHANPAL  
 Age / Gender : 52 Years / Male  
 Consulting Dr. : -  
 Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner  
 Application To Scan the Code

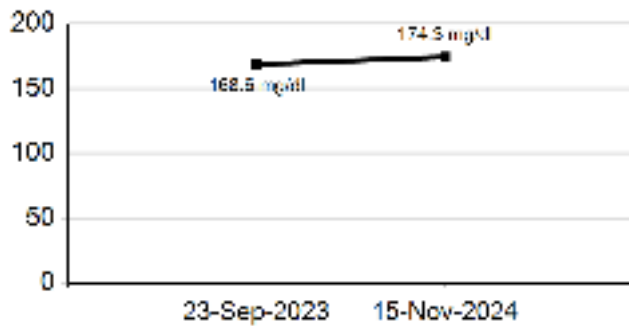
**BILIRUBIN (DIRECT)**



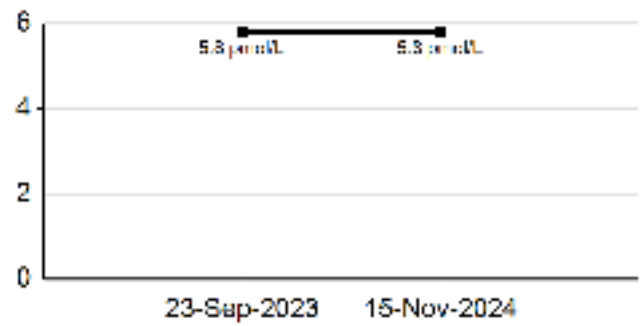
**Glycosylated Hemoglobin (HbA1c)**



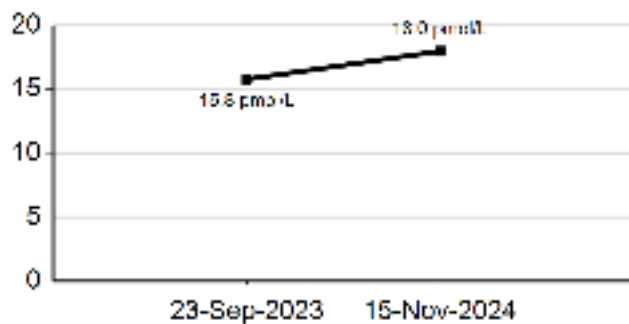
**Estimated Average Glucose (eAG)**



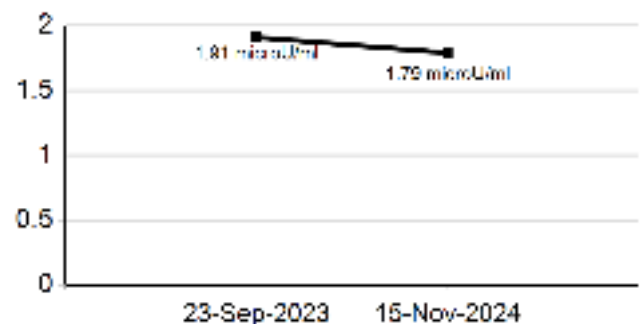
**Free T3**



**Free T4**



**sensitiveTSH**



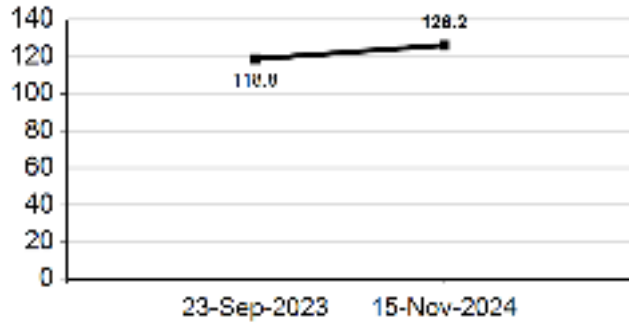




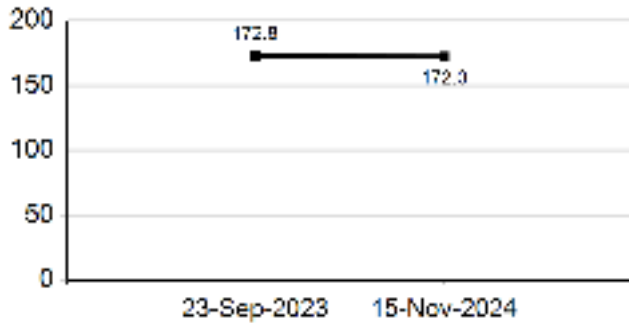
CID : 2432015748  
Name : MR.MAHENDRA DHANPAL  
Age / Gender : 52 Years / Male  
Consulting Dr. : -  
Reg. Location : Borivali West (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code

**GLUCOSE (SUGAR) FASTING**



**GLUCOSE (SUGAR) PP**




**भारत सरकार**  
**Government of India**



**Mahendra Kashinath Dhanpal**  
 महेंद्र काशिनार्थ धनपाल  
 जन्म तारीख /DOB: 01/06/1972  
 पुरुष/MALE



5328 8746 2854

माझे आधार, माझी ओळख

*(Handwritten signature)*

Suburban Diagnostics (P) Pvt. Ltd.  
 3018, 3rd/ 3rd Floor, Sion, Sion East  
 Thane, Maharashtra - 401 502  
 Ph: 022-2541 1111


**भारतीय विशिष्ट ओळख प्राधिकरण**  
**Unique Identification Authority of India**

**पत्ता:**  
 एस / ओ काशिनार्थ धनपाल, १२ रानिसिगाओ बॉईसर  
 विंगल, ठाने, महाराष्ट्र - ४०१५०१

**Address:**  
 S/O Kashinath Dhanpal, 12 RANISIGAU  
 BOISAR Shigaon, Thane, Maharashtra,  
 401501



5328 8746 2854







**CID** : 2432015748  
**Name** : Mr MAHENDRA DHANPAL  
**Age / Sex** : 52 Years/Male  
**Ref. Dr** :  
**Reg. Location** : Borivali West

**Reg. Date** : 15-Nov-2024  
**Reported** : 15-Nov-2024 / 10:30

**USG WHOLE ABDOMEN**

**LIVER:** Liver is normal in size 16.6 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 minimally distended.

(Tiny polyps/calculi may be missed due to technical limitations, sub-optimal distension of GB, adjacent gases and inter-machine variability in resolution settings)

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

**PANCREAS:** Pancreas obscured due to bowel gases.

**KIDNEYS:** Right kidney measures 10.5 x 5.2 cm. Left kidney measures 11.6 x 4.9 cm.

**Medullary cyst of size 1.8 x 1.4 cm seen in lower pole of right kidney.**

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 minimally distended.

**PROSTATE:** Prostate is normal in size and echotexture. Prostate measures 3.0 x 3.9 x 2.8 cm and prostatic weight is 18-19 gm. No evidence of any obvious focal lesion.

No free fluid or size significant lymphadenopathy is seen.

Click here to view images [http://3.111.232.119/IRISViewer/NeoradViewer?](http://3.111.232.119/IRISViewer/NeoradViewer?sessionNo=2024111508245513)  
Access



Authenticity Check



Use a QR Code Scanner  
Application To Scan the Code

CID : 2432015748  
Name : Mr MAHENDRA DHANPAL  
Age / Sex : 52 Years/Male  
Ref. Dr :  
Reg. Location : Borivali West

Reg. Date : 15-Nov-2024  
Reported : 15-Nov-2024 / 10:30

**Opinion:**

- Grade II fatty infiltration of liver.
- Right renal medullary cyst.

***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-----

*Pranali*

**Dr. Pranali Mahale**  
MD, Radiodiagnosis  
Consultant Radiologist  
Reg no. 2019/07/5682

Click here to view images [http://3.111.232.119/IRISViewer/NeoradViewer?](http://3.111.232.119/IRISViewer/NeoradViewer?Access)

stationNo=2024111508245513

REGD. OFFICE: Dr. Lal PathLabs Ltd., Block E, Sector-10, Rohini, New Delhi - 110085 | CIN No.: L74899DL2008PC00251102

MUMBAI OFFICE: Suburban Diagnostics (India) Pvt. Ltd., Aston, 2<sup>nd</sup> Floor, Sundervan Complex, Above Mercedes Showroom, Andheri West, Mumbai - 400053.

WEST REFERENCE LABORATORY: Shop No. 9, 101 to 105, Skyline Wealth Space Building, Near Dmart, Premier Road, Vidyavihar West, Mumbai - 400086.

HEALTHLINE: 022-61700000 | E-MAIL: [customerservice@suburbandiagnostics.com](mailto:customerservice@suburbandiagnostics.com) | WEBSITE: [www.suburbandiagnostics.com](http://www.suburbandiagnostics.com)

Date:-

GID:

Name:- Mahendra

Sex / Age: 52 / m

**EYE CHECK UP**

Chief complaints:

[N/I]

Systemic Diseases:

Past history:

Unaided Vision:

Aided Vision:

Refraction:

RE      LE  
6/6      6/6  
H/8      H/8

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / Abnormal

Remark:

Suburban Diagnostics (I) Pvt. Ltd.  
301 & 302, 3rd Floor, ...  
Above ...  
Boswell ...



Age 52 years NA months NA days

Gender Male

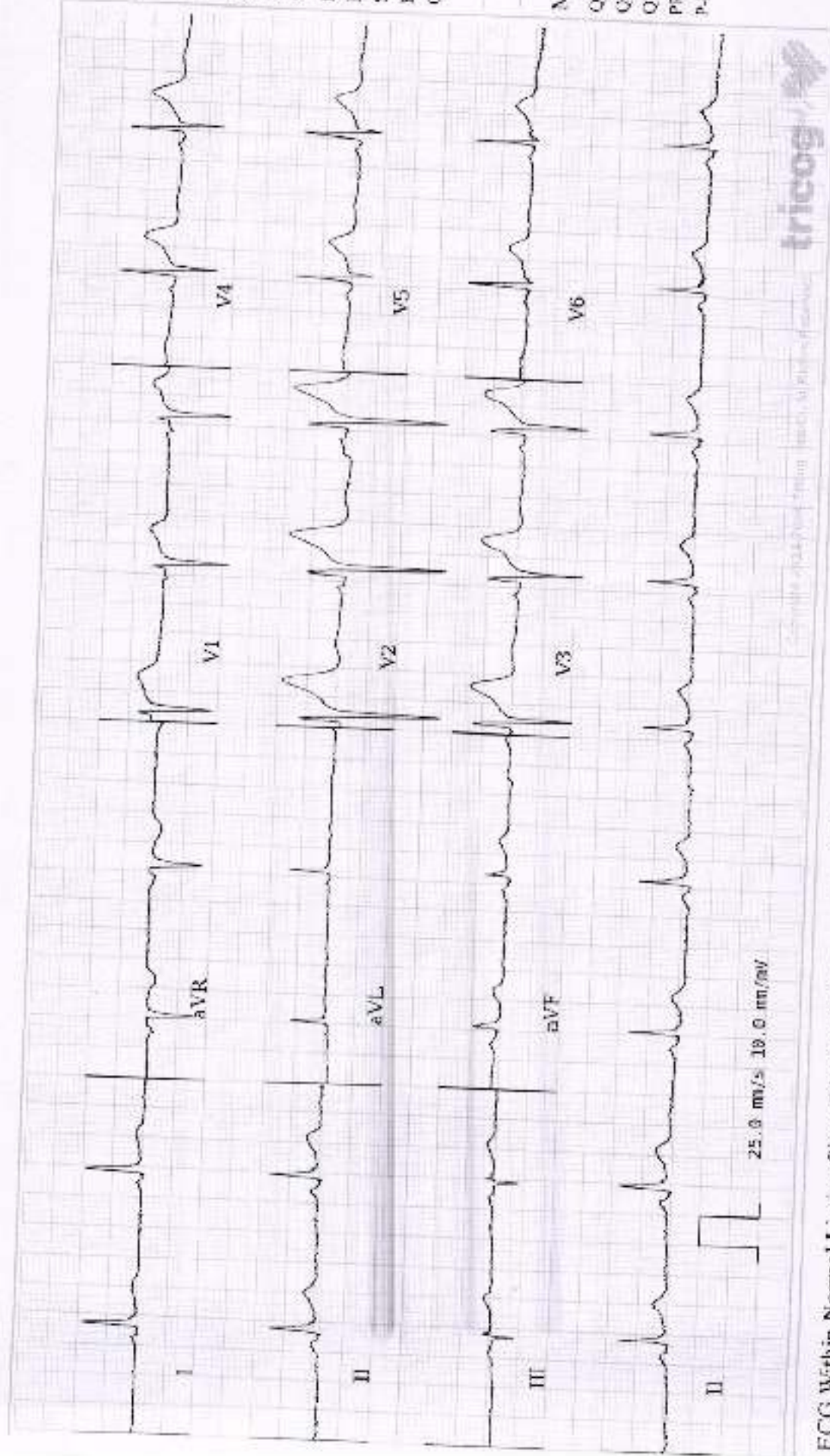
Heart Rate 60bpm

Patient Vitals

BP: NA  
Weight: NA  
Height: NA  
Pulse: NA  
SpO2: NA  
Resp: NA  
Others:

Measurements

QRSD: 97ms  
QT: 380ms  
QTcB: 380ms  
PR: 122ms  
P-R-T: 50° 15° 55°



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

REPORTED BY

*[Signature]*

Dr. Niran Senanayake  
MBBS, AER, D. D. (AB), F. CARD  
Cardiologist  
87714

Disclaimer: This report is for informational purposes only. It is not intended to be used as a substitute for clinical judgment. The accuracy of the information is not guaranteed. The information is provided for informational purposes only and should not be used for clinical purposes.

CID# : 2432015748  
 Name : MR. MAHENDRA DHANPAL  
 Age / Gender : 52 Years/Male  
 Consulting Dr. :  
 Reg. Location : Borivali West (Main Centre)

Collected : 15-Nov-2024 / 08:23  
 Reported : 16-Nov-2024 / 12:26

**PHYSICAL EXAMINATION REPORT**

**History and Complaints:**

No Complaint

**EXAMINATION FINDINGS:**

Height (cms):	163	Weight (kg):	69
Temp (0c):	Afebrile	Skin:	NAD
Blood Pressure (mm/hg):	130/80	Nails:	NAD
Pulse:	62/min	Lymph Node:	Not palpable

**Systems**

Cardiovascular: S1S2-Normal  
 Respiratory: Chest-Clear  
 Genitourinary: NAD  
 GI System: NAD  
 CNS: NAD

**IMPRESSION:**

*VLU  
 FBV, Bl. sugar ↑ | physician Ref.  
 Lipid profile  
 TMT → Cardiologist refer.*

**ADVICE:**

**CHIEF COMPLAINTS:**

- |                      |        |
|----------------------|--------|
| 1) Hypertension:     | 10 Yrs |
| 2) IHD               | No     |
| 3) Arrhythmia        | No     |
| 4) Diabetes Mellitus | No     |
| 5) Tuberculosis      | No     |
| 6) Asthama           | No     |
| 7) Pulmonary Disease | No     |



CID# : 2432015748  
Name : MR. MAHENDRA DHANPAL

Age / Gender : 52 Years/Male

Consulting Dr. :

Reg.Location : Borivall West (Main Centre)

Collected : 15-Nov-2024 / 08:23

Reported : 16-Nov-2024 / 12:26


- |  |    |
|--|----|
| 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    | No    |
| 2) Smoking    | No    |
| 3) Diet       | Mixed |
| 4) Medication | Yes   |

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

Suburban Diagnostics (I) Pvt. Ltd.  
301 & 302, 2nd Floor, VES, Regency  
Chowpatty, VES, Road,  
Borivall West, Mumbai - 400086

  
**Dr. NITIN SONAVANE**  
PHYSICIAN

**DR. NITIN SONAVANE**  
M.B.B.S., A.F.I.H., D.D.IAB, D.CARD.  
CONSULTANT-CARDIOLOGIST  
REGD. NO.: 87714



# SUBURBAN DIAGNOSTICS PVT. LTD.

Name: MAHENDRA DHANPAL

Date: 15-11-2024 Time: 09:31

## Interpretation

The Patient Exercised according to Bruce Protocol for 0:08:37 achieving a work level of 9.7 METS.  
Resting Heart Rate, initially 61 bpm rise to a max. heart rate of 129bpm (77% of Predicted Maximum Heart Rate).  
Resting Blood Pressure of 120/80 mmHg, rose to a maximum Blood Pressure of 150/80 mmHg  
THR not achieved(77% THR achieved) Patient was fatigued hence test was terminated.

Good Effort tolerance

Normal HR & BP Response

No Angina or Arrhythmias

Resting ECG: Q wave with ST depression in leads III,aVF

Exercise ECG: ST depression in leads II with T wave inversion in leads V5-V6 after 2 minutes of recovery phase which persisted till late recovery phase

### IMPRESSION:

Stress test Borderline Positive for Stress inducible ischaemia at workload achieved

Disclaimer: negative stress test does not rule out ischemic heart disease and visa versa. Clinical complaints are important

Suburban Diagnostics Pvt. Ltd.  
301&302, 2nd Floor, Suburban Hospital,  
Above 7th Main Road, Suburban Hospital,  
Borivali West, Mumbai - 400 082

*Sneha Shetty*  
**Dr. Sneha Shetty**  
MBBS, PGDCC  
Clinical Cardiology  
Reg. No. 2008/03/0660

Ref. Doctor: ARCOFEMI

Schiller Cardiovit CS-20 Version 3.6

Doctor: DR SNEHA SHETTY

( Summary Report edited by User )



MAHENDRA DHANPAL (52 M)

SUBURBAN DIAGNOSTICS PVT. LTD.

Trace Protocol: ID: 2432015748  
STLead(m) STSuprav(a) Stage: Standing

Date: 15-11-2024  
Speed: 0

Exec Time: 0:00:00  
Slope: 0 %

Stage Time: 00:08  
THR: 142 bpm

HR: 69 bpm  
49% of THR  
BP: 120/80 mmHg  
STLead(m) STSuprav(a)

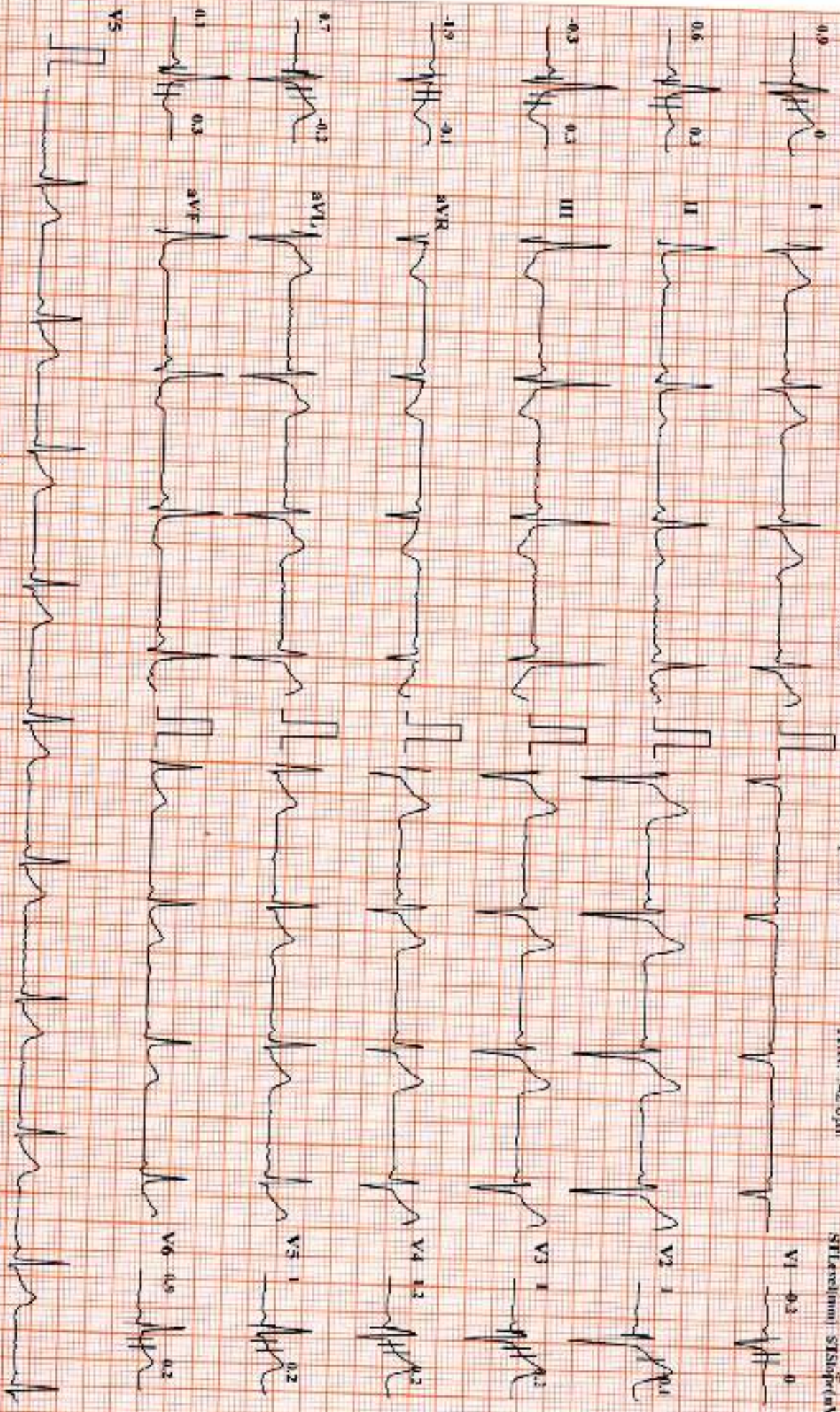


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz

Main Filter: ON

Scholar Cardiac v3.30 version



MAHENDRA DHANPAL (52 M)

SUBURBAN DIAGNOSTICS PVT. LTD.

Blue Protocol

ID: 2432015748

Date: 15-11-2024

Exec Time: 0:00:10

Stage Time: 00:13

HR: 62 bpm

STLead(mV) STISlope(mV/s)

Stage: HyperVentilation

Speed: 0

Slope: 0%

THR: 142 bpm

41% of THR

B.P.: 120/80 mmHg

STLead(mV) STISlope(mV/s)



Chart Speed 25 mm/sec

Amplitude 10mm/mV

Filter: 25 Hz Main Filter ON

ISO: R + S0 ms, J - R + 40 ms, PwL - 1 + 50 ms

Scintica Cardiview CS-20 Version 3.8



MAHENDRA DHANPAL (52 M)

SUBURBAN DIAGNOSTICS PVT. LTD.

Trace Protocol

ID: 2432015748

Date: 15-11-2024

Exec Time: 0:03:00

Stage Time: 03:00

HR: 96 bpm

STL:rsd(mn) STStop:rnVxS

Stage: 1

Speed: 2.7 kmph

Slope: 10%

THR: 142 bpm

68% of 17K

B.P.: 120/50 mmHg

STL:rsd(mn) STStop:rnVxS



Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Main Filter: ON

ISO - R - 60 mm/s - R - 60 mm/s - R - 60 mm/s - R - 60 mm/s

Scholar E-Print CS-20 Vers-07.6





MAHENDRA DHANPAL (52 M)

SUBURBAN DIAGNOSTICS PVT. LTD.

Bruce Protocol

ID: 2432015748

Date: 15-1-2024

Exec Time: 0:06:00

Sage Time: 03:40

HR: 113 bpm

STLead(mv) STISlope(mV/s)

Stage: 2

Speed: 4 kmph

Slope: 12 %

THR: 142 bpm

80% of THR  
BP: 140/80 mmHg  
STLead(mv) STISlope(mV/s)

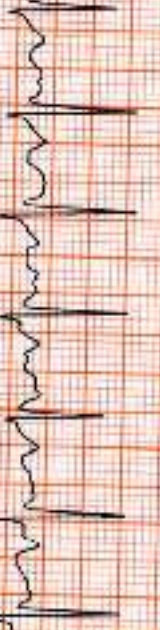


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 15 Hz Main Filter: ON

90 + R - 30 ms, 1 - R + 60 ms, Paper - 1 - 60 ms

Scholar Cardiovascular ES-30 Version 2.6



MAHENDRA DHANPAL (52 M)

SUBURBAN DIAGNOSTICS PVT. LTD.

Bruce Protocol

ID: 2437015748

Date: 14-11-2024

Exercise Time: 00:08.37

Stage Time: 02:37

HR: 129 bpm

% of THR

BP: 150/80 mmHg

ST Level (mm) STISlope (mm/V)

Stage: 3 Peak Exercise

Speed: 3.5 kmph

Slope: 14 %

THR: 147 bpm

HR: 129 bpm

% of THR

BP: 150/80 mmHg

ST Level (mm) STISlope (mm/V)

0.4

0.3

I



V1 -0.6

0.1

0.2

II



V2 -1.5

0.5

0.2

III



V3 -1.5

0.5

0.2

aVR



V4 -1.1

0.3

0.2

aVL



V5 0.1

0.2

0.2

aVF



V6 0.3

0.1

0.2

V5



Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz

Waves Filter: DN

ISO - 8 - 60 sec - 11 - 30 mm - 100 - 1 - 1 - 60 ms



# SUBURBAN DIAGNOSTICS PVT. LTD.

**MAHENDRA DHANPAL (52 M)**

BRUCE PROMAX  
ST1cevd(m) ST1Slope(mV/s)

ID: 2432015748  
Stage: Reentry-1

Date: 15-11-2024  
Speed: 0 kmph

Exec Time: 04:40  
Slope: 0%

Stage Time: 01:00  
THR: 142 bpm

**HR: 94 bpm**

60% of THR  
RR: 150/80 mmHg  
ST1cevd(m) ST1Slope(mV/s)

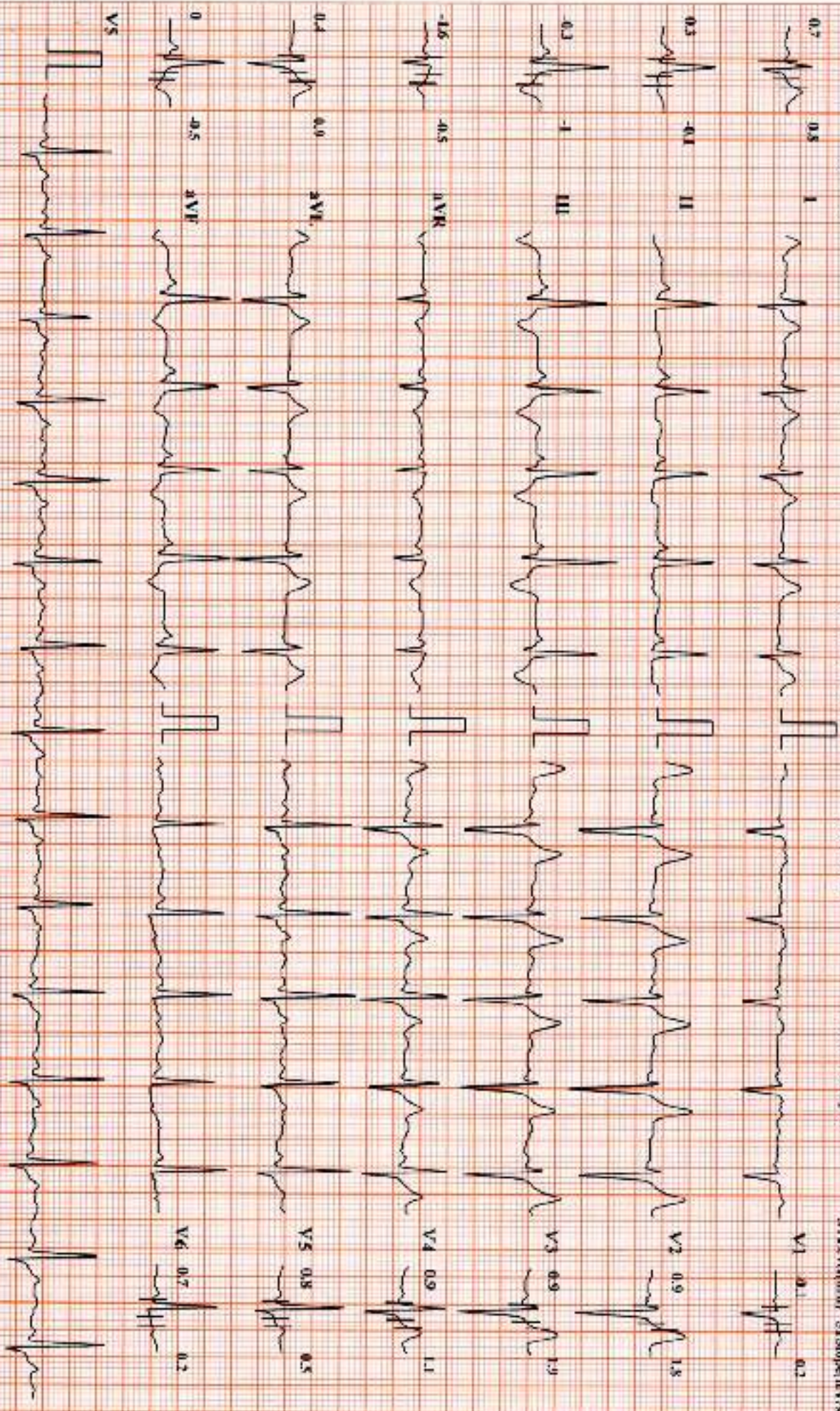


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Main Filter: ON

MO - R - 60 ms, J - R + 90 ms, Post J - 1 + 60 ms





# SUBURBAN DIAGNOSTICS PVT. LTD.

**MAHENDRA DHANPAL (52 M)**

Bruce Protocol  
STLevel(mV) STSegment(V/S)

ID: 2432015748  
Stage: Recovery/2

Date: 15-11-2024  
Speed: 0 kmph

Exec Time : 00:00  
Slope: 0 %

Stage Time: 01:30  
THR: 142 bpm

**HR: 91 bpm**  
64% of THR  
BP: 140/80 mmHg  
STLevel(mV) STSegment(V/S)

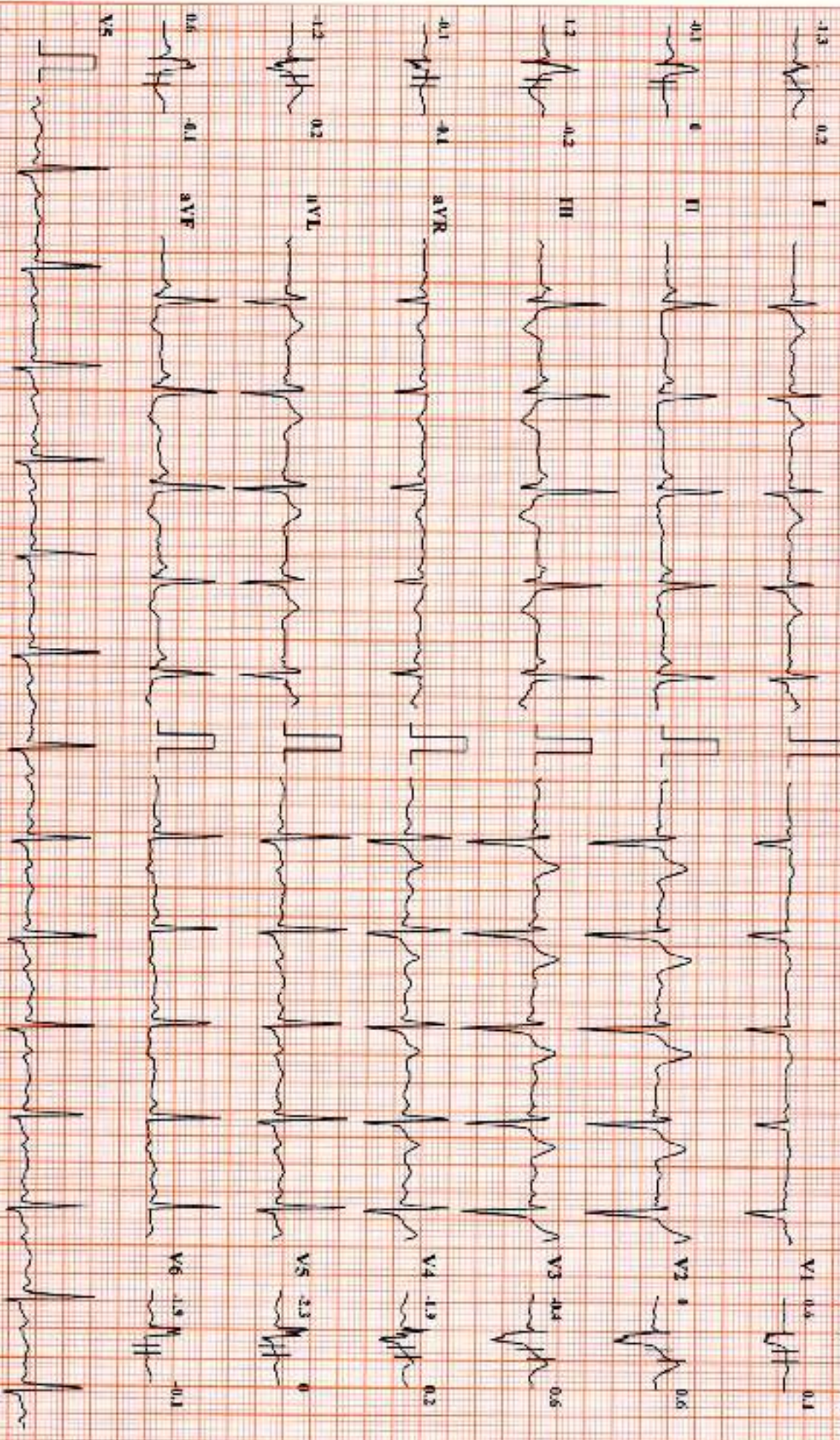


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Matrix Filter: ON

ISO - R - 60 ms, I - R - 60 ms, aVF - 1 - 60 ms



MAHENDRA DHANPAL (52 M)

SUBURBAN DIAGNOSTICS PVT. LTD.

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

ID: 2432015748  
Stage: Recovery:3

Date: 15-11-2024  
Speed: 0 kmph

Exec Time: 00:00  
Slope: 0%

Stage Time: 11:00  
THR: 142 bpm

HR: 87 bpm  
61% max HR  
BP: 130/80 mmHg  
STLevel(mm) STSlope(mV/s)

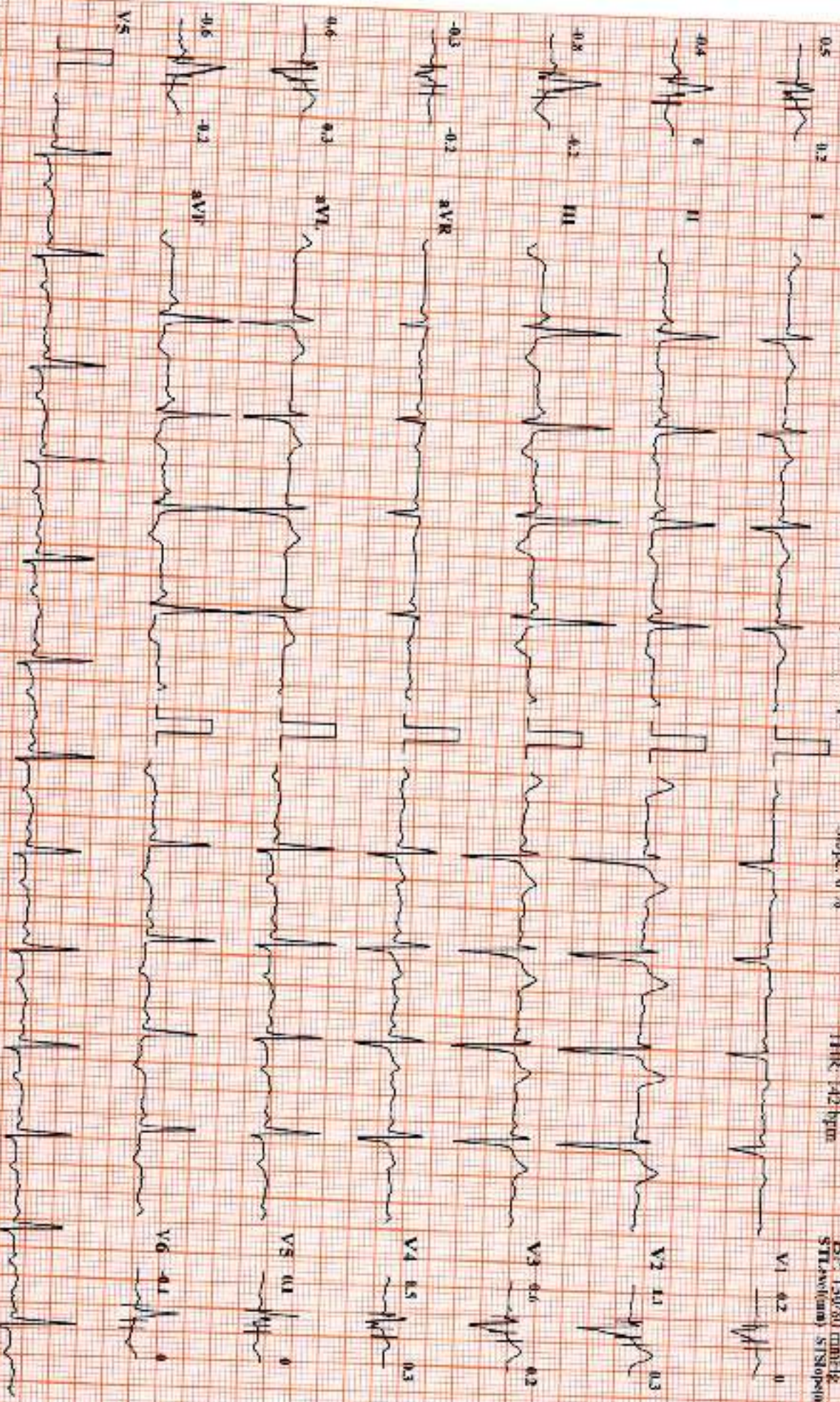


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Matrix Filter ON

ISO - R - 60 ms, J - K - 60 ms, P - Q - 1.1-1.60 s



MAHENDRA DHANPAL (52 M)

SUBURBAN DIAGNOSTICS PVT. LTD.

Bruce Protocol

ID: 2432015748

Date: 15-11-2024

Exec Time: 00:30

Stage Time: 01:00

HR: 89 bpm

ST1 Lead (mm) ST1 Slope (mV/s)

Stage: Recovery

Speed: 0 kmph

Sepec: 0 %

THR: 142 bpm

69% of THR  
BP: 130/80 mmHg  
ST1 Lead (mm) ST1 Slope (mV/s)

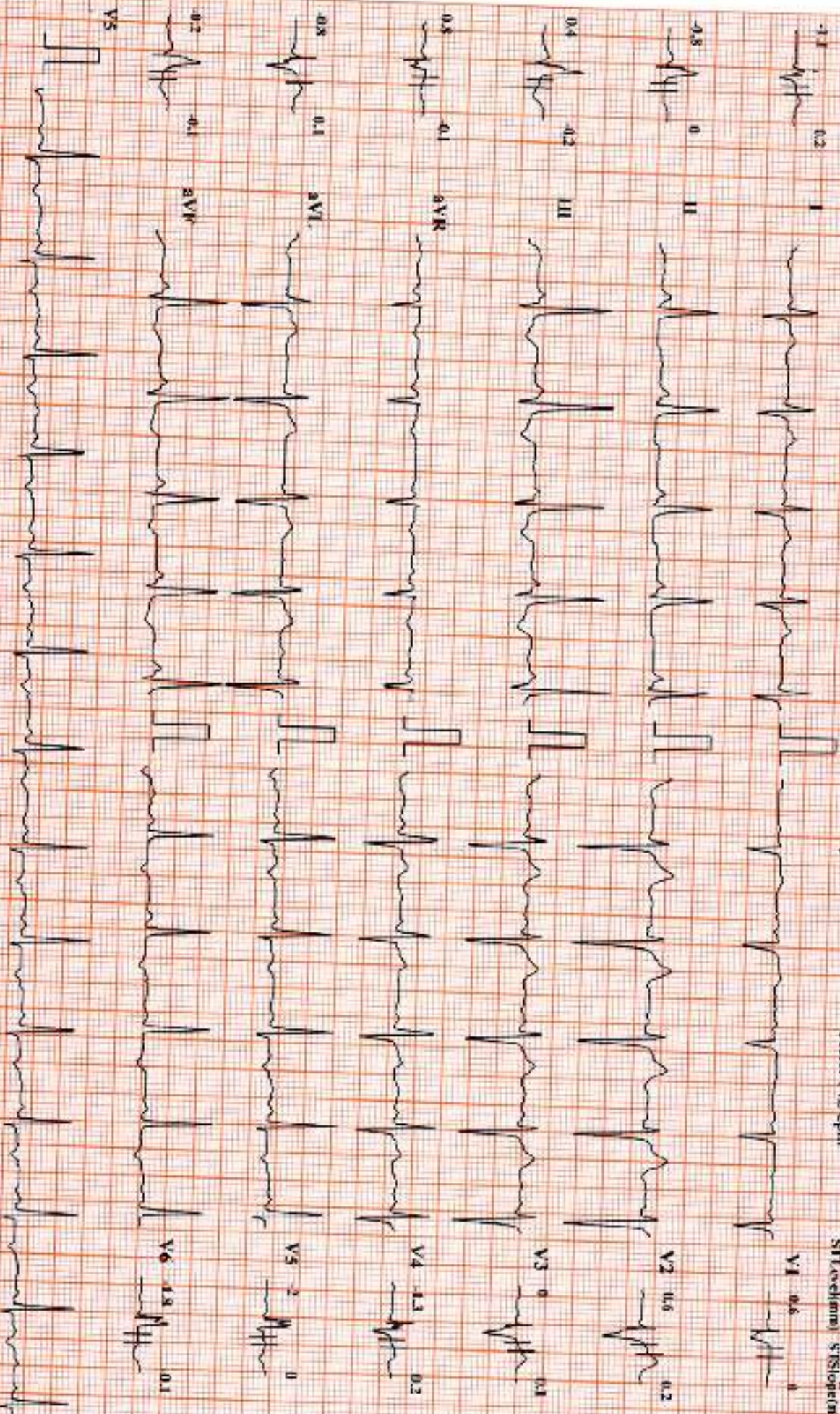


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Motion Filter: ON

ISO - R - 00 ms, J - K + 60 ms, Post J - J - 60 ms



MAHENDRA DHANPAL (52 M)

SUBURBAN DIAGNOSTICS PVT. LTD.

Print Protocol

ID: 2432015748

Date: 15-11-2024

Exec Time: 00:00

Stage: 00:11

HR: 82 bpm

SpO2: 98%

BP: 130/80 mmHg

STLeads: STIS0p0aV4

Stage: Recovery/5

Speed: 0 kmph

Slope: 0%

THR: 142 bpm

STLeads: STIS0p0aV5



V5



Chart Speed: 25 mm/sec

Amplitude: 1mm/mV

Filter: 35 Hz

Mains Filter: ON

Scanner: Carepoint CS-30 Version: 2.5



MAHENDRA DEANPAL (52 M)

SUBURBAN DIAGNOSTICS PVT. LTD.

Bruce Protocol  
STLeads(mn) STSlope(mV/s)

ID: 2432015748  
Stage: Supine

Date: 15-11-2024  
Speed: 0 Km/h

Exec Time: 0:00:00  
Slope: 0%

Stage Time: 00:15  
THR: 142 bpm

HR: 61 bpm  
43% of THR  
BP: 120/80 mmHg  
STLeads(mn) STSlope(mV/s)

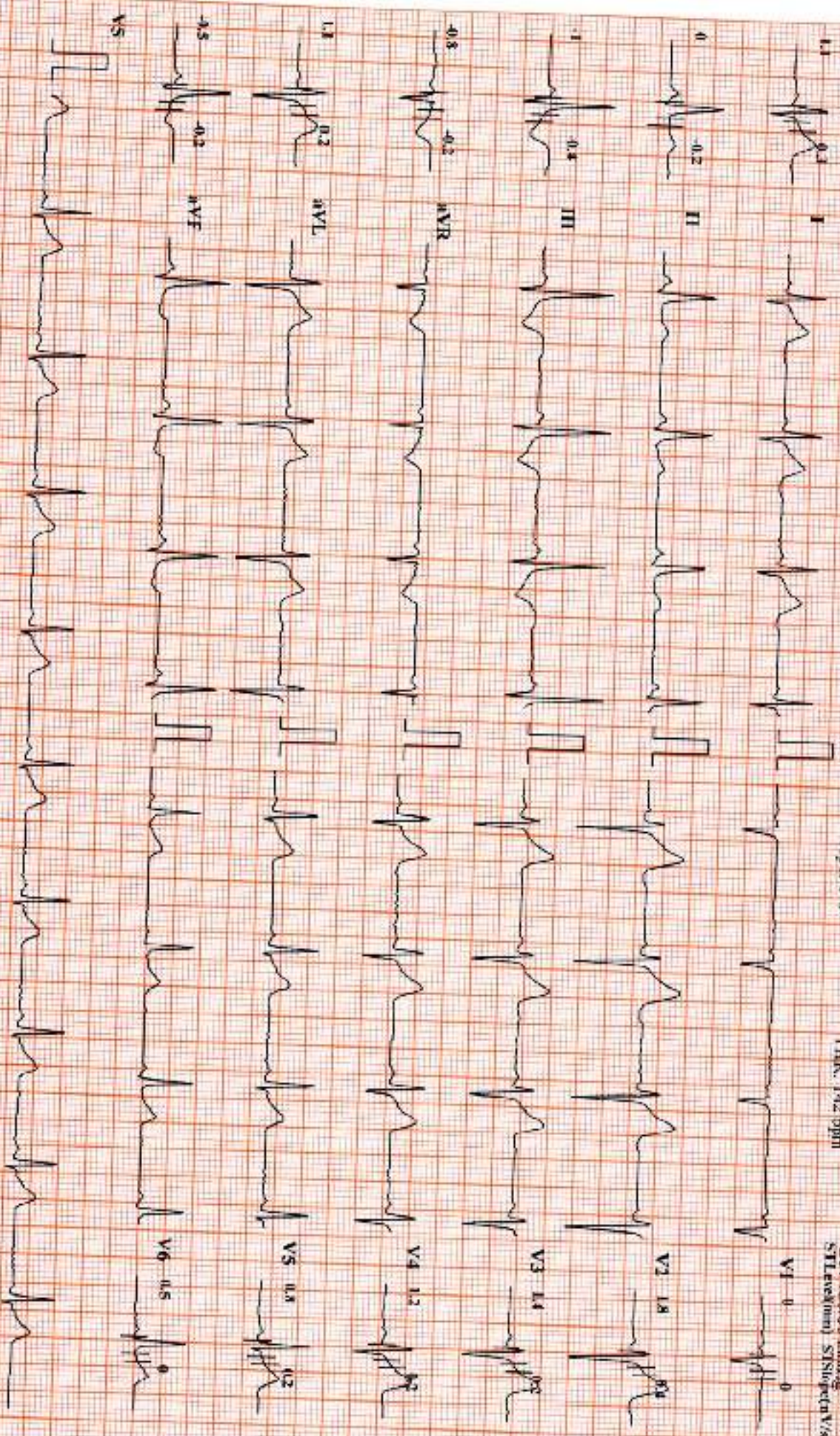


Chart Speed: 25 mm/s

Amplitude: 10mm/mV

Filter: 35 Hz - Matrix Filter: ON

ISO - R - 60 ms, J - R + 60 ms, P - J + 50 ms

Schiller Cardio 12-20 V Printer