



CID : 2424005994
Name : MR.VISHAL VORA
Age / Gender : 41 Years / Male
Consulting Dr. : -
Reg. Location : Borivali West (Main Centre)

Collected : 27-Aug-2024 / 10:33
Reported : 27-Aug-2024 / 13:38

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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	14.6	13.0-17.0 g/dL	Spectrophotometric
RBC	5.03	4.5-5.5 mil/cmm	Elect. Impedance
PCV	41.0	40-50 %	Measured
MCV	82	80-100 fl	Calculated
MCH	29.0	27-32 pg	Calculated
MCHC	34.0	31.5-34.5 g/dL	Calculated
RDW	13.8	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	6560	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	36.9	20-40 %	
Absolute Lymphocytes	2420.6	1000-3000 /cmm	Calculated
Monocytes	8.1	2-10 %	
Absolute Monocytes	531.4	200-1000 /cmm	Calculated
Neutrophils	50.4	40-80 %	
Absolute Neutrophils	3306.2	2000-7000 /cmm	Calculated
Eosinophils	4.2	1-6 %	
Absolute Eosinophils	275.5	20-500 /cmm	Calculated
Basophils	0.4	0.1-2 %	
Absolute Basophils	26.2	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	271000	150000-400000 /cmm	Elect. Impedance
MPV	8.9	6-11 fl	Calculated
PDW	15.1	11-18 %	Calculated
<u>RBC MORPHOLOGY</u>			
Hypochromia	-		
Microcytosis	-		



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<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma Fasting	91.1	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP	131.1	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.34	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.13	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.21	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.5	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.1	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	3.4	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.2	1 - 2	Calculated
SGOT (AST), Serum	24.6	5-40 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	25.2	5-45 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	20.9	3-60 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	69.4	40-130 U/L	Colorimetric
BLOOD UREA, Serum	20.8	12.8-42.8 mg/dl	Kinetic
BUN, Serum	9.7	6-20 mg/dl	Calculated
CREATININE, Serum	0.83	0.67-1.17 mg/dl	Enzymatic



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eGFR, Serum	113	(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

URIC ACID, Serum	5.4	3.5-7.2 mg/dl	Enzymatic
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*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***



Bmhasakar

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



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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	5.8	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	119.8	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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Reported : 27-Aug-2024 / 16:56

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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	-
Transparency	Clear	Clear	-
<u>CHEMICAL EXAMINATION</u>			
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
<u>MICROSCOPIC EXAMINATION</u>			
(WBC)Pus cells / hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	0-1	0-5/hpf	
Hyaline Casts	Absent	Absent	
Pathological cast	Absent	Absent	
Crystals	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	10-12	0-20/hpf	
Yeast	Absent	Absent	



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Others -

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*** End Of Report ***



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Collected : 27-Aug-2024 / 10:33
Reported : 27-Aug-2024 / 18:14

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

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

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

Specimen: EDTA Whole Blood and/or serum

Clinical significance:

ABO system is most important of all blood group in transfusion medicine

Limitations:

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

References:

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

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

*** End Of Report ***



Dr. Vrushi Shroff

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



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
CHOLESTEROL, Serum	171.0	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	119.0	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	31.2	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	139.8	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	116.0	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	23.8	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	5.5	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	3.7	0-3.5 Ratio	Calculated

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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	5.5	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	15.3	11.5-22.7 pmol/L	ECLIA
sensitiveTSH, Serum	2.19	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 transiently altered because 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 ***



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Collected : 27-Aug-2024 / 13:11
Reported : 27-Aug-2024 / 17:33

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

<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	Absent	
Urine Ketones (PP)	Absent	Absent	

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*** End Of Report ***



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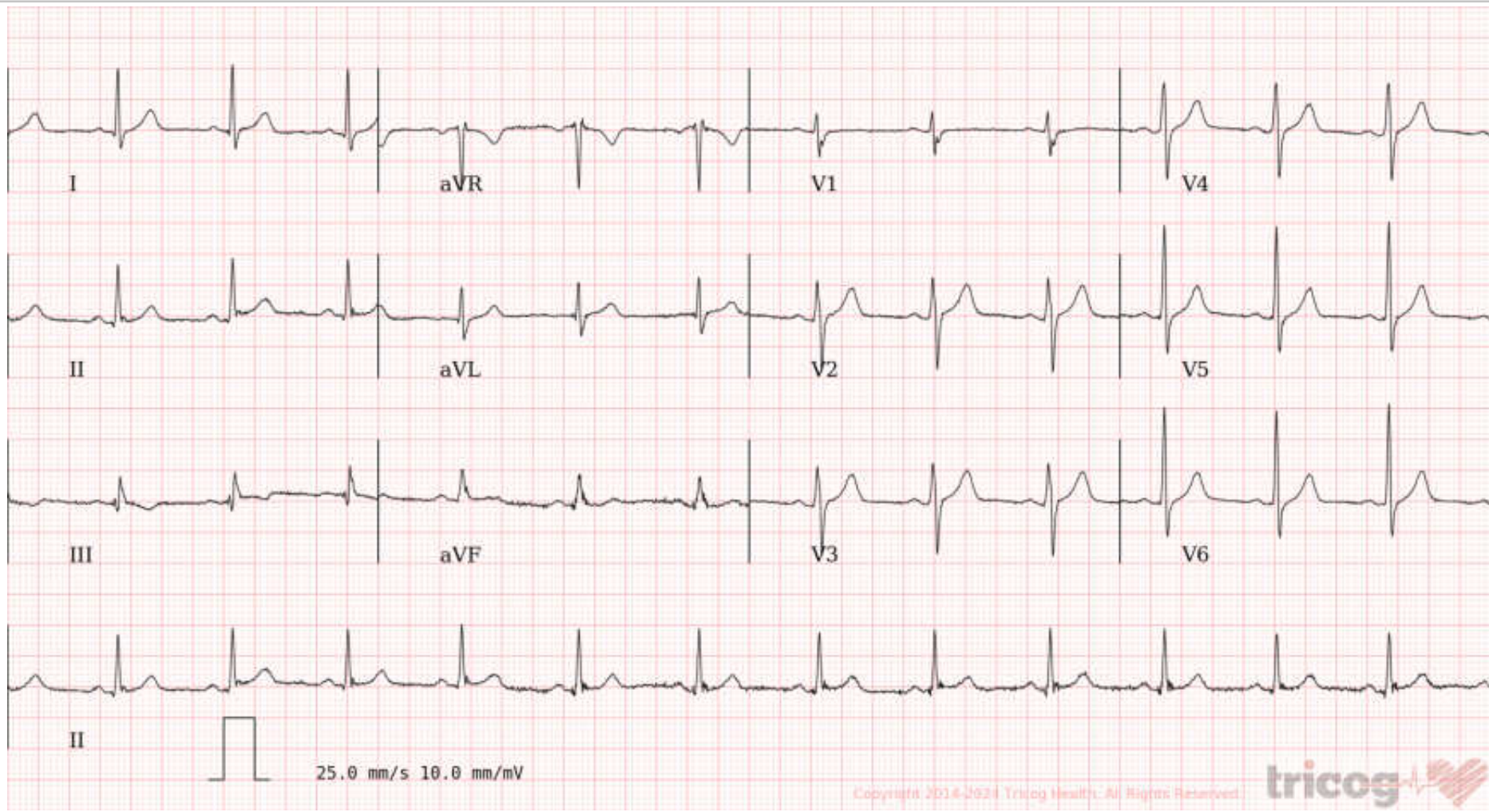
SUBURBAN DIAGNOSTICS - BORIVALI WEST



Patient Name: VISHAL VORA

Date and Time: 27th Aug 24 11:02 AM

Patient ID: 2424005994



Age **41** **NA** **NA**
years months days

Gender **Male**

Heart Rate **80bpm**

Patient Vitals

BP: NA
Weight: NA
Height: NA
Pulse: NA
Spo2: NA
Resp: NA
Others: _____

Measurements

QRSD: 96ms
QT: 344ms
QTcB: 396ms
PR: 136ms
P-R-T: 57° 44° 23°

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

REPORTED BY

Dr Nitin Sonavane
M.B.B.S.AFLH, D.DIAB, D.CARD
Consultant Cardiologist
87714

Disclaimer: 1) Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. 2) Patient vitals are as entered by the clinician and not derived from the ECG.

✱

22/8/24
[Handwritten Signature]
Suburban

DL No. MH48 20120815550
Valid Till 14-06-2032 (INT)

DOB: 15-06-2012

DLD: 05-06-2013
OF VEHICLE TYPE: COV/TCVA

COV: 15-06-2012
MCOV: 15-06-2012
LNV: 15-06-2012

FORM 1
FOOT IMPR.

Name: VISHAL VORA
SEM of DHIRAJI VORA
A02 E-706, KINGSTONE TOWER, AGARWAL COMPLEX
BARBHOLA NAKA, VASAI (W), TAL. VASAI, DIST. THANE

DOB: 15-06-1982

PG:

Signature & ID of Issuing Authority: MH48 201311C

Signature/Thumb Impression of Holder

Suburban Diagnostics (I) Pvt. Ltd.
301 & 302, 3rd Floor, Vini Elegance
Above Tanisq Jeweller, L. T. Road,
Borivali (West), Mumbai - 400 092

Date:-

CID: 2424005994

Name:-

Vishal - Vora

Sex / Age: 41 / M

EYE CHECK UP

Chief complaints:

Nil

Systemic Diseases:

Past history:

RE LE

Unaided Vision:

6/9 6/9

Aided Vision:

H/G H/G

Refraction:

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / Abnormal

Remark:

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Age / Gender : 41 Years/Male

Consulting Dr. :

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PHYSICAL EXAMINATION REPORT

History and Complaints:

Nil

EXAMINATION FINDINGS:

Height (cms): 179

Weight (kg): 77

Temp (0c): Afebrile

Skin: NAD

Blood Pressure (mm/hg): 120/80

Nails: NAD

Pulse: 80/min

Lymph Node: Not Palpable

Systems

Cardiovascular: S1S2-Normal

Respiratory: Chest-Clear

Genitourinary: NAD

GI System: NAD

CNS: NAD

IMPRESSION:

Normal

ADVICE:

CHIEF COMPLAINTS:

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

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- 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 Veg
- 4) Medication No

*** End Of Report ***

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Above Tanisq Jeweller, L. T. Road,
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Dr.NITIN SONAVANE
PHYSICIAN

DR. NITIN SONAVANE
M.B.B.S.AFLH, D.DIAB, D.CARD.
CONSULTANT-CARDIOLOGIST
REGD. NO.: 87714

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

Name: VISHAL VORA Date: 27-08-2024 Time: 11:30
 Age: 41 Gender: M Height: 179 cms Weight: 77 Kg ID: 2424005994
 Clinical History: NIL
 Medications: NIL

Test Details:

Protocol: Bruce Predicted Max HR: 179 Target HR: 152 (85% of Pr. MHR)
 Exercise Time: 0:07:11 Achieved Max HR: 179 (100% of Pr. MHR)
 Max BP: 160/80 Max BP x HR: 28640 Max Mets: 8
 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	00:40	1	0	0	114	120/80	13680	0.4 V5	-3 III
Standing	00:10	1	0	0	109	120/80	13080	0.5 I	-2.8 III
Hyper Ventilation	00:11	1	0	0	105	120/80	12600	0.5 V4	-3 III
Pre Test	00:07	1	1.6	0	93	120/80	11160	0.5 V4	-2.2 III
Stage: 1	03:00	4.7	2.7	10	128	120/80	15360	0.1 II	-2.8 III
Stage: 2	03:00	7	4	12	160	140/80	22400	-0.5 V6	2.4 V2
Peak Exercise	01:11	8	5.5	14	179	150/80	26850	-0.9 V5	2.6 V2
Recovery1	01:00	1	0	0	142	160/80	22720	0.3 V2	2.8 V2
Recovery2	01:00	1	0	0	122	140/80	17080	0.2 V4	-2.6 III
Recovery3	01:00	1	0	0	119	130/80	15470	0.2 I	-2.4 III
Recovery4	00:08	1	0	0	115	130/80	14950	0.2 III	-2.4 III

Interpretation

The Patient Exercised according to Bruce Protocol for 0:07:11 achieving a work level of 8 METS.
 Resting Heart Rate, initially 114 bpm rose to a max. heart rate of 179bpm (100% 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.

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 Borivali (West), Mumbai - 400 092

ND
 Doctor: DR. NITIN SONAVANE

Ref. Doctor: ----

SCHILLER
 The Art of Diagnostics

DR. NITIN SONAVANE (Signature by User)
 M.B.B.S./FLM, D.D.IAB, D.CARD.
 CONSULTANT-CARDIOLOGIST
 REGD. NO.: 87714



VISHAL VORA (41 M)

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

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

ID: 2424005994
Stage: Supine

Date: 27-08-2024
Speed: 0 km/h

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

Sage Time: 00:40
THR: 152 bpm

HR: 114 bpm

Bp: 120/80 mmHg
STTcvd(mm) STSlope(mV/s)

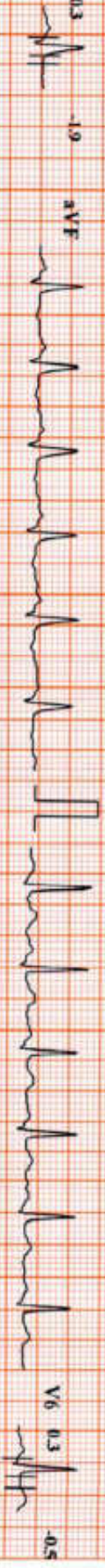
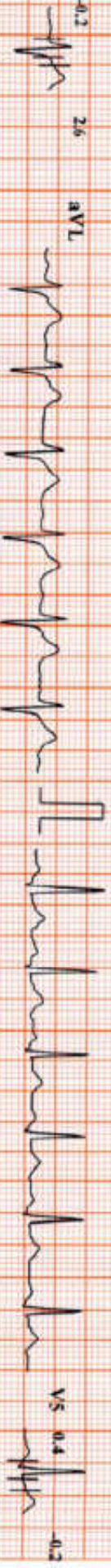


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

Schiller Cardiovit CS-20 Versen-34



VISHAL VORA (41 M)

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

Bruce Protocol

ID: 2424005994

Date: 27-08-2024

Exec Time: 0:00:00

Stage Time: 00:10

HR: 109 bpm

STLevel(mm) STSlope(mV/s)

Stage: Standing

Speed: 0

Slope: 0%

THR: 152 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

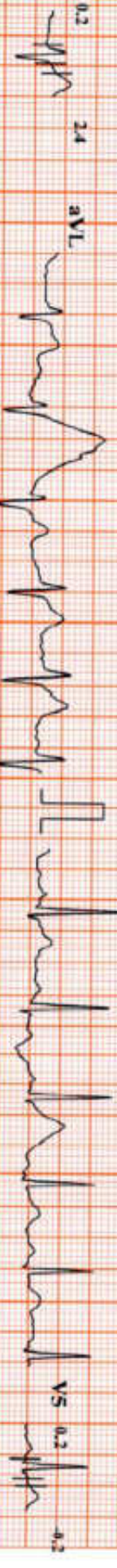
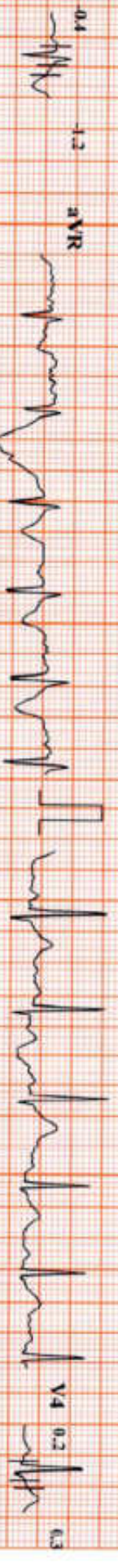


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

Schiller CardioNet CS-20 Version 3.4

VISHAL VORA (41 M)

Brice Protocol
ST1.evd(mm) STSlope(mV/s)

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

ID: 2424005994

Date: 27-08-2024

Exec Time: 0:00:00

Stage Time: 00:11

Stage: Hypert Ventilation

Speed: 0

Slope: 0%

THR: 152 bpm

HR: 105 bpm

Bp: 120/80 mmHg
ST1.evd(mm) STSlope(mV/s)

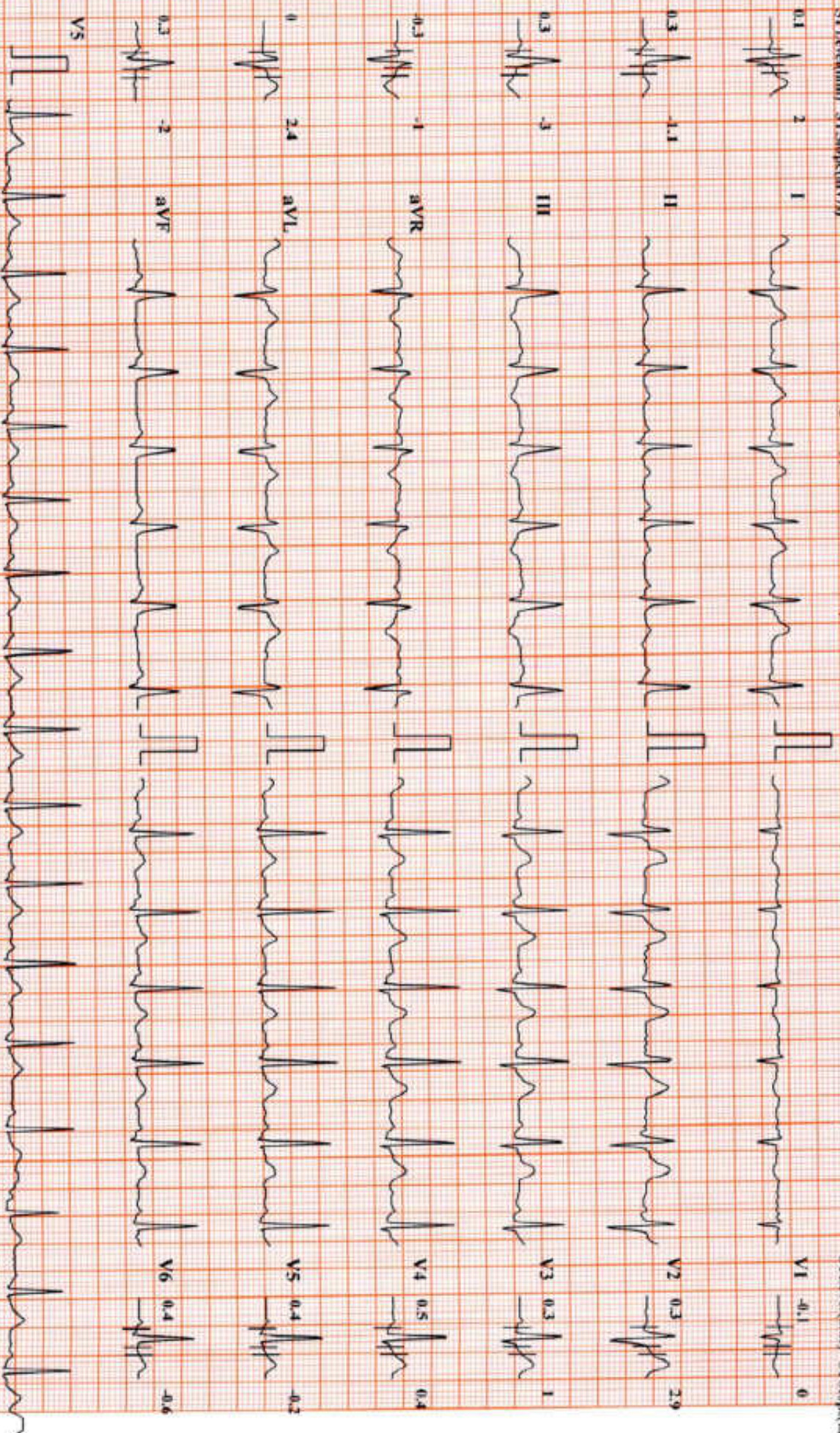


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz

Mains Filter: ON

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

Schiller Cardiovet CS-20 Version 3.4



SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

VISHAL VORA (41 M)

Bruce Protocol

ID: 2424005994

Date: 27-08-2024

Exec Time : 0:03:00

Stage Time: 03:00

HR: 128 bpm

ST1:cvd(mm) ST2:slp(mV/s)

Stage: 1

Speed: 2.7 kmph

Slope: 10%

THR: 152 bpm

BP: 120/80 mmHg

ST1:cvd(mm) ST2:slp(mV/s)

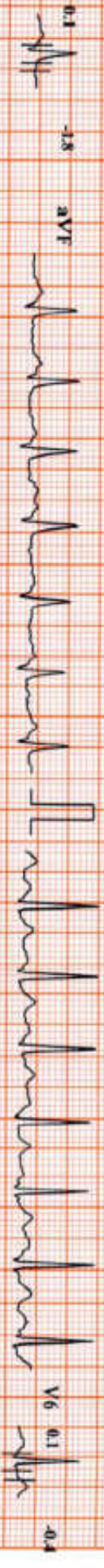
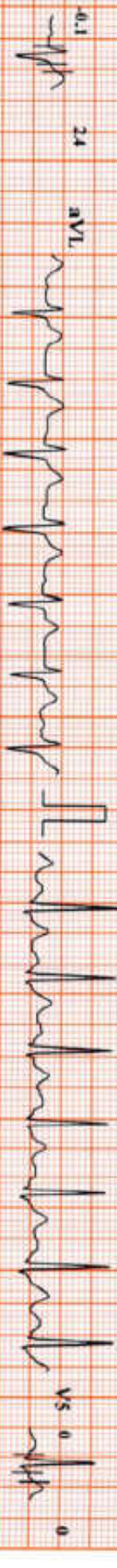


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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



SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

VISHAL VORA (41 M)

Brush Protocol
ST1:ex(kmm) ST2:Sl:cp:ex(V/s)

ID: 2424005994

Date: 27-08-2024

Exec Time: 0:06:00

Stage Time: 03:00

HR: 160 bpm

BP: 140/86 mmHg

THR: 152 bpm

ST1:ex(kmm) ST2:Sl:cp:ex(V/s)

Stage: 2

Speed: 4 kmph

Slope: 12 %

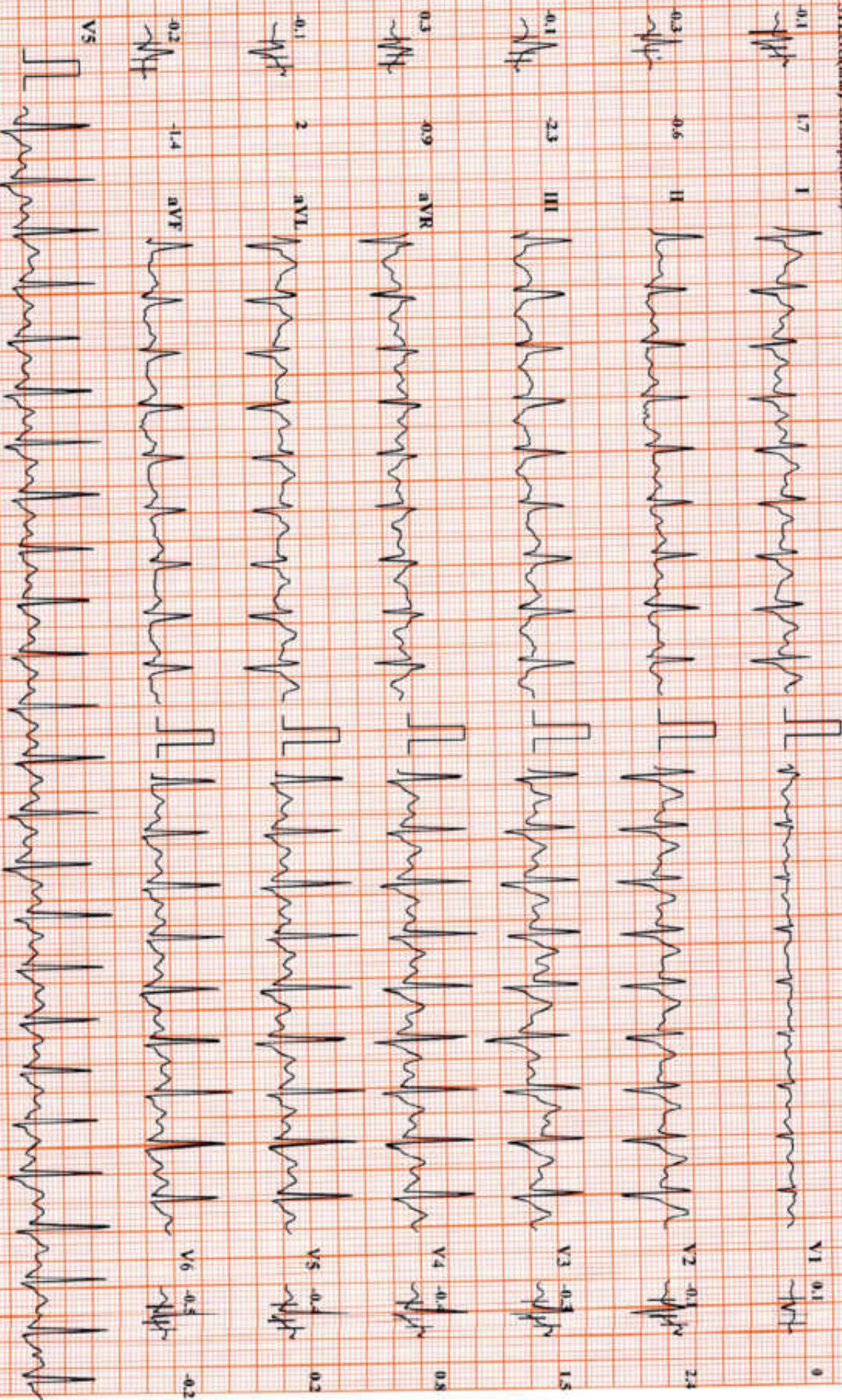


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

Schiller CardioV CS-20 Version 3.4

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

VISHAL VORA (41 M)

Bruce Protocol
ST1(evlmm) ST1Slpct(mV/s)

ID: 2424005994
Date: 27-08-2024
Stage: 3 Peak Exercise
Speed: 5.5 kmph

Exec Time : 0:07:11
Slope: 14 %
THR: 152 bpm

HR: 179 bpm
BP: 150/80 mmHg
ST1(evlmm) ST1Slpct(mV/s)

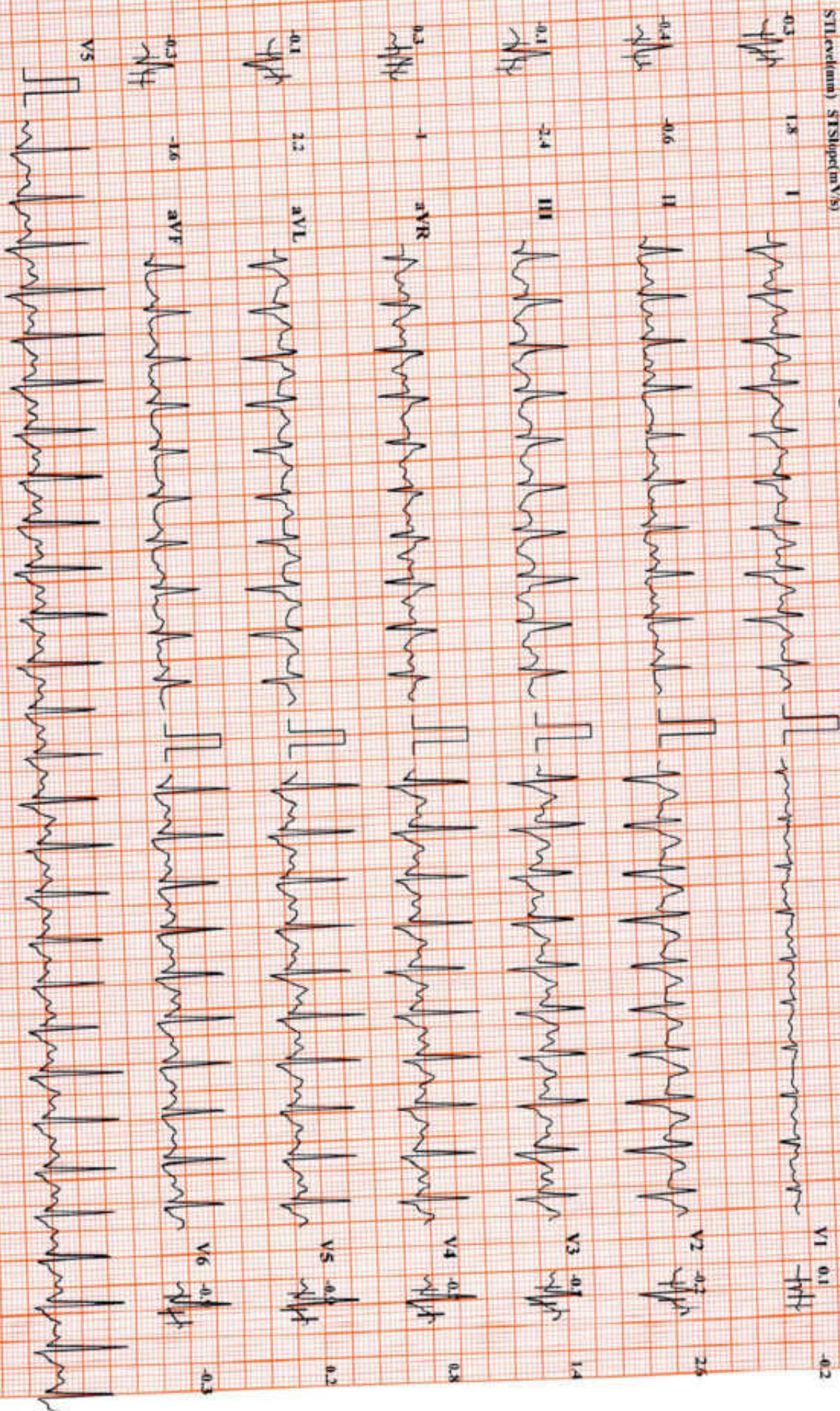


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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



SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

VISHAL VORA (41 M)

Brice Protocol
STLead(arm) STSlope(mV/s)

ID: 2474005994
Stage: Recovery 1

Date: 27-08-2024
Speed: 0 kmph

Exec Time : 00:00
Slope: 0 %

Stage Time : 01:00
THR: 152 bpm

HR: 142 bpm

BP: (60/80) mmHg
STLead(hand) STSlope(mV/s)

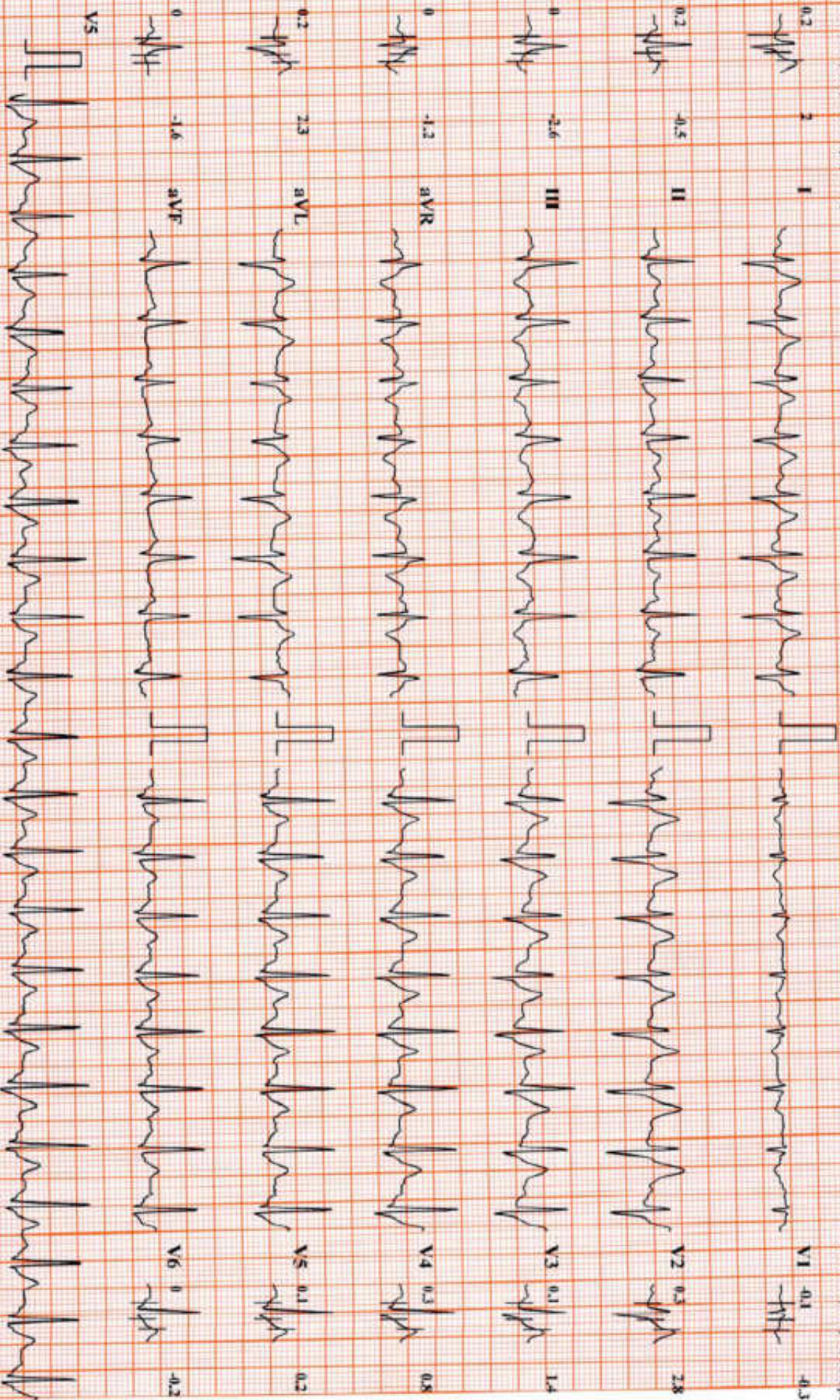


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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

Schiller CardioWit CS-20 Version 3.4



VISHAL VORA (41 M)

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

Bruce Protocol

ID: 2424005994

Date: 27-08-2024

Exec Time : 00:00

Stage Time: 01:00

HR: 122 bpm

ST1:vecl(mm) ST1Slope(mV/s)

Stage: Recovery2

Speed: 0 kmph

Slope: 0 %

THR: 152 bpm

Bp: 140/80 mmHg

ST1:vecl(mm) ST1Slope(mV/s)



Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

ISO = R: 60 ms, I = R + 60 ms, Paced J = J + 60 ms

SUBRBAN DIANOSTICS PVT. LTD. BORIVALI

VISHAL VORA (41 M)

Bruce Protocol

STLevel(mm) STSlope(mV/s)

ID: 2424005994

Stage: Recovery/3

Date: 27-08-2024

Speed: 0 kmph

Exec Time : 00:00

Slope: 0%

Stage Time: 01:00

THR: 152 bpm

HR: 119 bpm

BP: 130/80 mmHg

STLevel(mm) STSlope(mV/s)

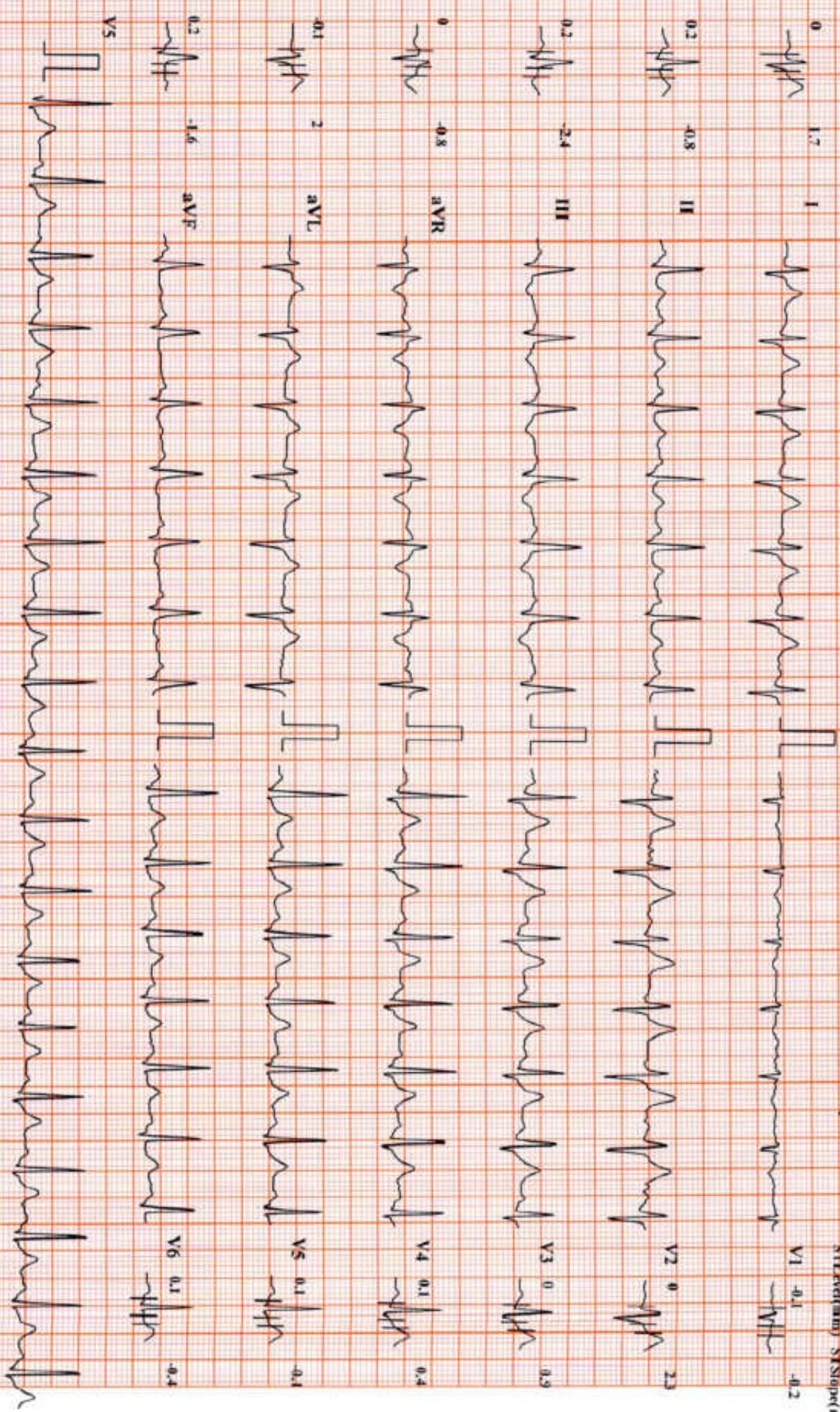


Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Mains Filter: ON

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



VISHAL VORA (41 M)

SUBURBAN DIANOSTICS PVT. LTD. BORIVALI

Bruce Protocol

ID: 2424005994

Date: 27-08-2024

Exc Time: 00:00

Stage Time: 00:05

HR: 115 bpm

STLevel(mm) STSlope(mV/s)

Stage: Recovery^d

Speed: 0 kmph

Slope: 0 %

THR: 152 bpm

BP: 130/80 mmHg

STLevel(mm) STSlope(mV/s)

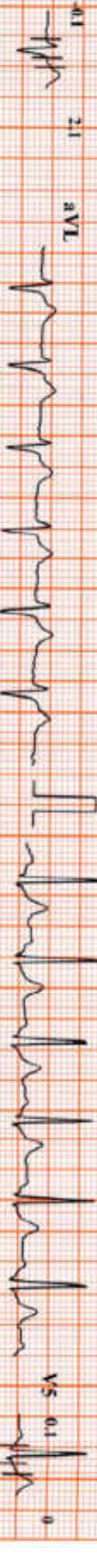


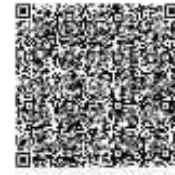
Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 25 Hz Manus Filter: ON

ISO = R : 60 ms, J = R + 60 ms, Pect J + J + 60ms

Schiller Cardiovit CS-20 Version 3.4



CID : 2424005994
Name : Mr VISHAL VORA
Age / Sex : 41 Years/Male
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 27-Aug-2024
Reported : 27-Aug-2024/11:30

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.

Kindly correlate clinically.

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. X ray is known to have inter-observer variations. Further / follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis. Please interpret accordingly. In case of any typographical error / spelling error in the report, patient is requested to immediately contact the centre within 7 days post which the center will not be responsible for any rectification.

-----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 : 2424005994
Name : Mr VISHAL VORA
Age / Sex : 41 Years/Male
Ref. Dr :
Reg. Location : Borivali West

Reg. Date : 27-Aug-2024
Reported : 27-Aug-2024/11:30