



CID : 2402718364  
Name : MRS.VARSHA BONAGIRI  
Age / Gender : 32 Years / Female  
Consulting Dr. : -  
Reg. Location : Malad West (Main Centre)

Collected : 27-Jan-2024 / 10:27  
Reported : 27-Jan-2024 / 13:01

Use a QR Code Scanner  
Application To Scan the Code

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

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

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>RBC PARAMETERS</u></b>			
Haemoglobin	11.8	12.0-15.0 g/dL	Spectrophotometric
RBC	4.43	3.8-4.8 mil/cmm	Elect. Impedance
PCV	35.2	36-46 %	Calculated
MCV	79.5	80-100 fl	Measured
MCH	26.5	27-32 pg	Calculated
MCHC	33.4	31.5-34.5 g/dL	Calculated
RDW	14.7	11.6-14.0 %	Calculated
<b><u>WBC PARAMETERS</u></b>			
WBC Total Count	9280	4000-10000 /cmm	Elect. Impedance
<b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>			
Lymphocytes	24.5	20-40 %	
Absolute Lymphocytes	2270	1000-3000 /cmm	Calculated
Monocytes	7.3	2-10 %	
Absolute Monocytes	680	200-1000 /cmm	Calculated
Neutrophils	65.3	40-80 %	
Absolute Neutrophils	6040	2000-7000 /cmm	Calculated
Eosinophils	2.6	1-6 %	
Absolute Eosinophils	240	20-500 /cmm	Calculated
Basophils	0.3	0.1-2 %	
Absolute Basophils	30	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<b><u>PLATELET PARAMETERS</u></b>			
Platelet Count	276000	150000-400000 /cmm	Elect. Impedance
MPV	6.2	6-11 fl	Measured
PDW	10.1	11-18 %	Calculated
<b><u>RBC MORPHOLOGY</u></b>			
Hypochromia	-		
Microcytosis	-		



CID : 2402718364  
Name : MRS.VARSHA BONAGIRI  
Age / Gender : 32 Years / Female  
Consulting Dr. : -  
Reg. Location : Malad West (Main Centre)

Collected : 27-Jan-2024 / 10:27  
Reported : 27-Jan-2024 / 13:46

Use a QR Code Scanner  
Application To Scan the Code

Macrocytosis	-
Anisocytosis	-
Poikilocytosis	-
Polychromasia	-
Target Cells	-
Basophilic Stippling	-
Normoblasts	-
Others	Normocytic, Normochromic
WBC MORPHOLOGY	-
PLATELET MORPHOLOGY	-
COMMENT	-

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR                      16                      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 CPL, Andheri West

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



*J Thakker*

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



**CID** : 2402718364  
**Name** : MRS.VARSHA BONAGIRI  
**Age / Gender** : 32 Years / Female  
**Consulting Dr.** : -  
**Reg. Location** : Malad West (Main Centre)

**Collected** : 27-Jan-2024 / 10:27  
**Reported** : 27-Jan-2024 / 14:16

Use a QR Code Scanner  
Application To Scan the Code

**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	82.5	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	113.4	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.48	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.17	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.31	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.7	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.3	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.4	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.8	1 - 2	Calculated
SGOT (AST), Serum	12.0	5-32 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	13.4	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	12.6	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	64.9	35-105 U/L	Colorimetric
BLOOD UREA, Serum	12.3	12.8-42.8 mg/dl	Kinetic
BUN, Serum	5.7	6-20 mg/dl	Calculated
CREATININE, Serum	0.61	0.51-0.95 mg/dl	Enzymatic



CID : 2402718364  
Name : MRS.VARSHA BONAGIRI  
Age / Gender : 32 Years / Female  
Consulting Dr. : -  
Reg. Location : Malad West (Main Centre)

Collected : 27-Jan-2024 / 13:40  
Reported : 27-Jan-2024 / 18:35

Use a QR Code Scanner  
Application To Scan the Code

eGFR, Serum	122	(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	4.7	2.4-5.7 mg/dl	Enzymatic
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 CPL, Andheri West  
\*\*\* End Of Report \*\*\*



*J. Thakker*

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



CID : 2402718364  
Name : MRS.VARSHA BONAGIRI  
Age / Gender : 32 Years / Female  
Consulting Dr. : -  
Reg. Location : Malad West (Main Centre)

Use a QR Code Scanner Application To Scan the Code  
Collected : 27-Jan-2024 / 10:27  
Reported : 27-Jan-2024 / 13:58

**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	5.3	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	105.4	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 CPL, Andheri West

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



*J. Thakker*

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



CID : 2402718364  
Name : MRS.VARSHA BONAGIRI  
Age / Gender : 32 Years / Female  
Consulting Dr. : -  
Reg. Location : Malad West (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code  
Collected : 27-Jan-2024 / 10:27  
Reported : 27-Jan-2024 / 18:27

**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**URINE EXAMINATION REPORT**

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	5.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.005	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	30	-	-
<b><u>CHEMICAL EXAMINATION</u></b>			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Leukocytes(Pus cells)/hpf	0-1	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	3-4		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	10-15	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 CPL, Andheri West  
\*\*\* End Of Report \*\*\*



*Thakker*

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



CID : 2402718364  
Name : MRS.VARSHA BONAGIRI  
Age / Gender : 32 Years / Female  
Consulting Dr. : -  
Reg. Location : Malad West (Main Centre)

Use a QR Code Scanner  
Application To Scan the Code  
Collected : 27-Jan-2024 / 10:27  
Reported : 27-Jan-2024 / 15:14

**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 column agglutination technology (CAT) which is more sensitive than conventional methods.

Note: This sample is not tested for Bombay blood group.

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 CPL, Andheri West  
\*\*\* End Of Report \*\*\*



*J. Thakker*

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



CID : 2402718364  
Name : MRS.VARSHA BONAGIRI  
Age / Gender : 32 Years / Female  
Consulting Dr. : -  
Reg. Location : Malad West (Main Centre)

Use a QR Code Scanner Application To Scan the Code  
Collected : 27-Jan-2024 / 10:27  
Reported : 27-Jan-2024 / 14:16

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

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	144.4	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	183.0	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	36.8	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	107.6	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	71.0	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	36.6	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.9	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	1.9	0-3.5 Ratio	Calculated

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



*J. Thakker*

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





CID : 2402718364  
Name : MRS.VARSHA BONAGIRI  
Age / Gender : 32 Years / Female  
Consulting Dr. : -  
Reg. Location : Malad West (Main Centre)

Collected : 27-Jan-2024 / 10:27  
Reported : 27-Jan-2024 / 13:58

Use a QR Code Scanner  
Application To Scan the Code

**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	4.9	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	12.0	11.5-22.7 pmol/L First Trimester:9.0-24.7 Second Trimester:6.4-20.59 Third Trimester:6.4-20.59	ECLIA
sensitiveTSH, Serum	3.90	0.35-5.5 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0 mIU/ml	ECLIA



CID : 2402718364  
Name : MRS.VARSHA BONAGIRI  
Age / Gender : 32 Years / Female  
Consulting Dr. : -  
Reg. Location : Malad West (Main Centre)

Collected : 27-Jan-2024 / 10:27  
Reported : 27-Jan-2024 / 13:58

Use a QR Code Scanner  
Application To Scan the Code

**Interpretation:**

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

**Clinical Significance:**

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

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

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

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

**Limitations:**

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

**Reference:**

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

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



*J Thakker*

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

Name : MRS. VARSHA BONAGIRI

Age / Gender : 32 Years/Female

Consulting Dr. :

Reg. Location : Malad West (Main Centre)

Collected : 27-Jan-2024 / 10:13

Reported : 27-Jan-2024 / 13:26

### PHYSICAL EXAMINATION REPORT

#### History and Complaints:

Nil

#### EXAMINATION FINDINGS:

Height (cms): 151

Temp (0c): Afebrile

Blood Pressure (mm/hg): 120/80

Pulse: 74/ min

Weight (kg): 53

Skin: Normal

Nails: Normal

Lymph Node: Not Palpable

#### Systems

Cardiovascular: Normal

Respiratory: Normal

Genitourinary: Normal

GI System: Normal

CNS: Normal

IMPRESSION: -

ADVICE: *Regular exercise*

#### 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 |

Name : MRS.VARSHA BONAGIRI

Age / Gender : 32 Years/Female

Consulting Dr. :

Reg.Location : Malad West (Main Centre)

Collected : 27-Jan-2024 / 10:13

Reported : 27-Jan-2024 / 13:26

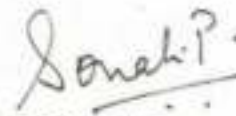
- 8) Thyroid/ Endocrine disorders No
- 9) Nervous disorders No
- 10) GI system No
- 11) Genital urinary disorder No
- 12) Rheumatic joint diseases or symptoms No
- 13) Blood disease or disorder No
- 14) Cancer/lump growth/cyst No
- 15) Congenital disease No
- 16) Surgeries LSCS in 2018 and 2020
- 17) Musculoskeletal System No

**PERSONAL HISTORY:**

- 1) Alcohol No
- 2) Smoking No
- 3) Diet Veg
- 4) Medication No

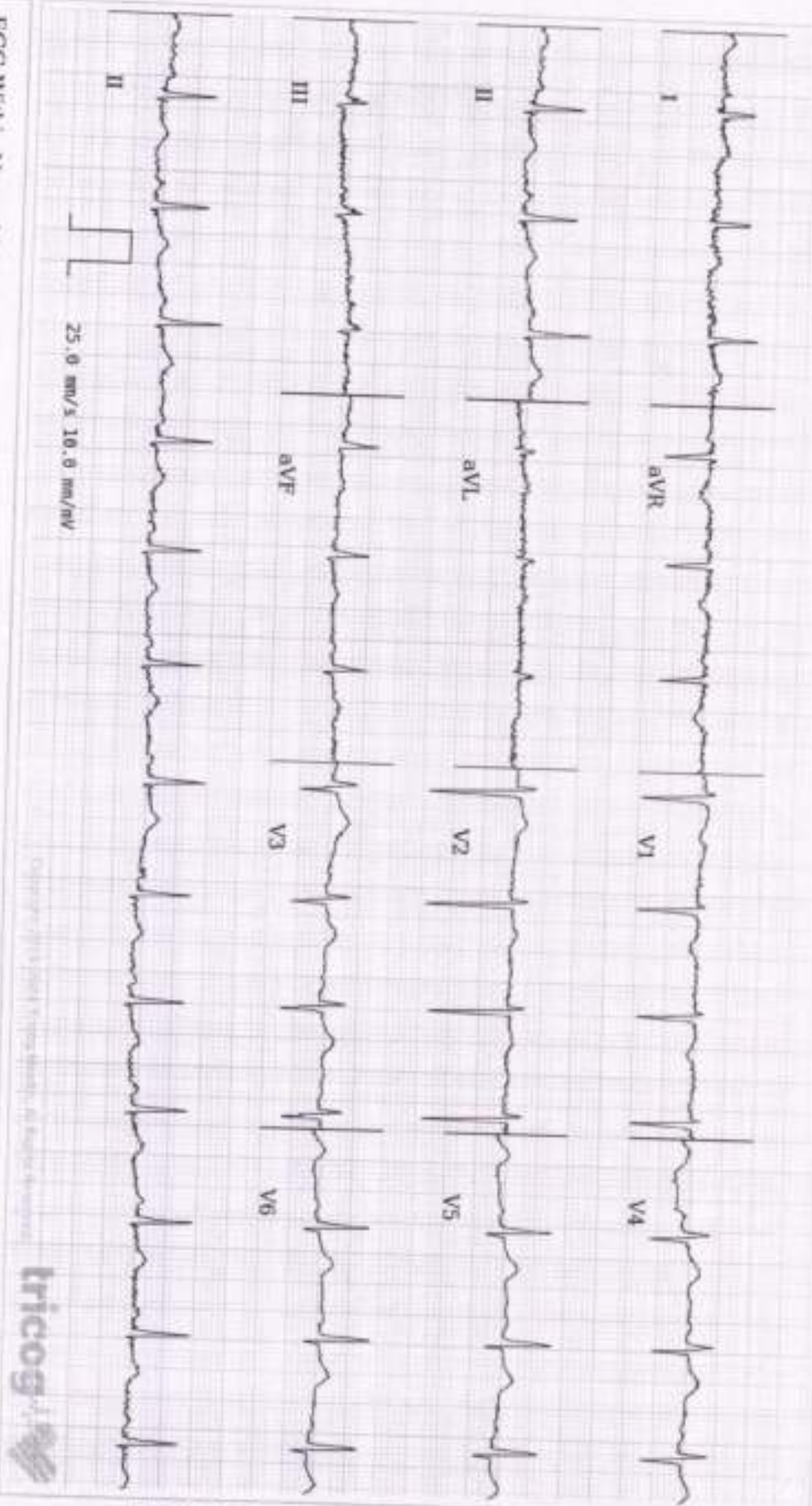
\*\*\* End Of Report \*\*\*

**DR. SONALI HONRAO**  
MD (G.MED)  
CONSULTING PHYSICIAN  
REG NO.2001/04/1882



**Dr.Sonali Honrao**  
MD physician  
Sr. Manager-Medical Services  
(Cardiology)

**SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.**  
102-104, Wharshi Circle,  
Opp. Gopichand Sports Club,  
Link Road, Malad (W), Mumbai - 400 064.



25.0 mm/s 10.0 mm/mV



Age **32** NA  
years months

Gender **Female**

Heart Rate **82bp**

**Patient Vitals**

BP: 120/80 mm  
Weight: 53 kg  
Height: 151 cm  
Pulse: NA  
SpO2: NA  
Resp: NA  
Others: NA

**Measurements**

QRSd: 74ms  
QT: 378ms  
QTcB: 441ms  
PR: 138ms  
P-R-T: 46° 38° 22°

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

REPORTED BY

*[Signature]*

DR SONALI HONRAO  
MD (General Medicine)  
Physician  
2001/06/1982

Disclaimer: This Analytic is the output of a medical device (ECG) which may be used for reference purposes only. It is not intended to be used for diagnosis, prognosis, or treatment. The accuracy of the results may vary depending on the quality of the input data and the device's performance. Please consult your physician for a complete medical evaluation.

Date:- 27/01/24  
 Name:- Vaishali Bonagiri  
 CID: 2402718364  
 Sex / Age: 30y / F

**EYE CHECK UP**

Chief complaints:

Systemic Diseases:

Past history:

Unaided Vision: DV-RE- 6/60      NV-RE- N/6  
 LE- 6/60      LE- N/6

Refraction:

	(Right Eye)				(Left Eye)			
	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	_____				_____			
Near	_____				_____			

Colour Vision: Normal / Abnormal

Remark:

SUBURBAN DIAGNOSTICS PRIVATE LTD.  
 102-104, Bhamburda Circle,  
 Opp. Goregaon Sports Club,  
 Link Road, Malad (W), Mumbai - 400 064.



CID : 2402718364  
Name : Mrs VARSHA BONAGIRI  
Age / Sex : 32 Years/Female  
Ref. Dr :  
Reg. Location : Malad West Main Centre

Reg. Date : 27-Jan-2024  
Reported : 27-Jan-2024 / 11:53

## USG WHOLE ABDOMEN

### LIVER:

The liver is normal in size, shape and smooth margins. It shows normal parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein and CBD appears normal.

### GALL BLADDER:

The gall bladder is physiologically distended and appears normal. No evidence of gall stones or mass lesions seen.

### PANCREAS:

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

### KIDNEYS:

Both the kidneys are normal in size, shape and echotexture. No evidence of any calculus, hydronephrosis or mass lesion seen.  
Right kidney measures 8.7 x 3.5 cm.  
Left kidney measures 10.3 x 4.6 cm.

### SPLEEN:

The spleen is normal in size and echotexture. No evidence of focal lesion is noted. There is no evidence of any lymphadenopathy or ascites.

### URINARY BLADDER:

The urinary bladder is well distended and reveal no intraluminal abnormality.

### UTERUS:

The uterus is anteverted and appears normal. The endometrial thickness is 5.8 mm.

### OVARIES:

Both the ovaries are well visualised and appears normal. There is no evidence of any ovarian or adnexal mass seen.

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2024012710141603>

Authenticity Check



Use a QR Code Scanner  
Application To Scan the Code

CID : 2402718364  
Name : Mrs VARSHA BONAGIRI  
Age / Sex : 32 Years/Female  
Ref. Dr :  
Reg. Location : Malad West Main Centre

Reg. Date : 27-Jan-2024  
Reported : 27-Jan-2024 / 11:53

**IMPRESSION:-**

*No significant abnormality is seen.*

**Suggestion: Clinicopathological correlation.**

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 case for confirmation of findings. Patient has been explained in detail about the USG findings including its limitations and need for further imaging if clinically indicated. Please interpret accordingly. All the possible precaution have been taken under covid-19 pandemic.

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

Dr. Sunil Bhutka  
DMRD DNB  
MMC REG NO:2011051101

Click here to view images <http://3.111.232.119/IRISViewer/NeoradViewer?AccessionNo=2024012710141603>



Authenticity Check



Use a QR Code Scanner  
Application To Scan the Code

CID : 2402718364  
Name : Mrs VARSHA BONAGIRI  
Age / Sex : 32 Years/Female  
Ref. Dr :  
Reg. Location : Malad West Main Centre

Reg. Date : 27-Jan-2024  
Reported : 27-Jan-2024 / 16:29

**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. X-ray is known to have inter-observer variations. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests further / follow-up imaging may be needed in some case for confirmation of findings. Please interpret accordingly.

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

DR. Akash Chhari  
MBBS, MD, Radio-Diagnosis Mumbai  
MMC REG NO - 2011/08/2862

SUBURBAN DIAGNOSTICS

Malad West

Station

Telephone:

**EXERCISE STRESS TEST REPORT**

Patient Name: VARSHA, BONAGIRI

Patient ID: 2402718364

Height: 151 cm

Weight: 53 kg

DOB: 05.04.1991

Age: 32yrs

Gender: Female

Race: Asian

Study Date: 27.01.2024

Test Type: --

Protocol: BRUCE

Referring Physician: --

Attending Physician: DR SONALI HONRAO

Technician: --

Medications:

--

Medical History:

--

Reason for Exercise Test:

--

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:14	0.00	0.00	98	120/80	
	STANDING	00:06	0.00	0.00	104	120/80	
	HYPERV.	00:20	0.00	0.00	95	120/80	
EXERCISE	WARM-UP	00:12	1.00	0.00	96	120/80	
	STAGE 1	03:00	1.70	10.00	151	140/80	
	STAGE 2	01:32	2.50	12.00	171		
RECOVERY		03:02	0.00	0.00	125	140/80	

The patient exercised according to the BRUCE for 4:31 min:s, achieving a work level of Max. METS: 7.00. The resting heart rate of 97 bpm rose to a maximal heart rate of 171 bpm. This value represents 90 % of the maximal, age-predicted heart rate. The resting blood pressure of 120/80 mmHg, rose to a maximum blood pressure of 140/80 mmHg. The exercise test was stopped due to Target heart rate achieved.

Interpretation

Summary: Resting ECG: normal.

Functional Capacity: normal.

HR Response to Exercise: appropriate.

BP Response to Exercise: normal resting BP - appropriate response.

Chest Pain: none.

Arrhythmias: none.

ST Changes: none.

Overall impression: Normal stress test.

Conclusions

Good effort tolerance. No Significant ST-T changes as compared to baseline. No chest pain / arrhythmia noted. Stress test is negative for inducible ischemia.

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

SUBURBAN DIAGNOSTICS (INDIA) PVT LTD.  
102-104, Dhoomi Castle,  
Opp. Goregaon Sports Club,  
Link Road, Malad (W), Mumbai - 400 064.

DR. SONALI HONRAO

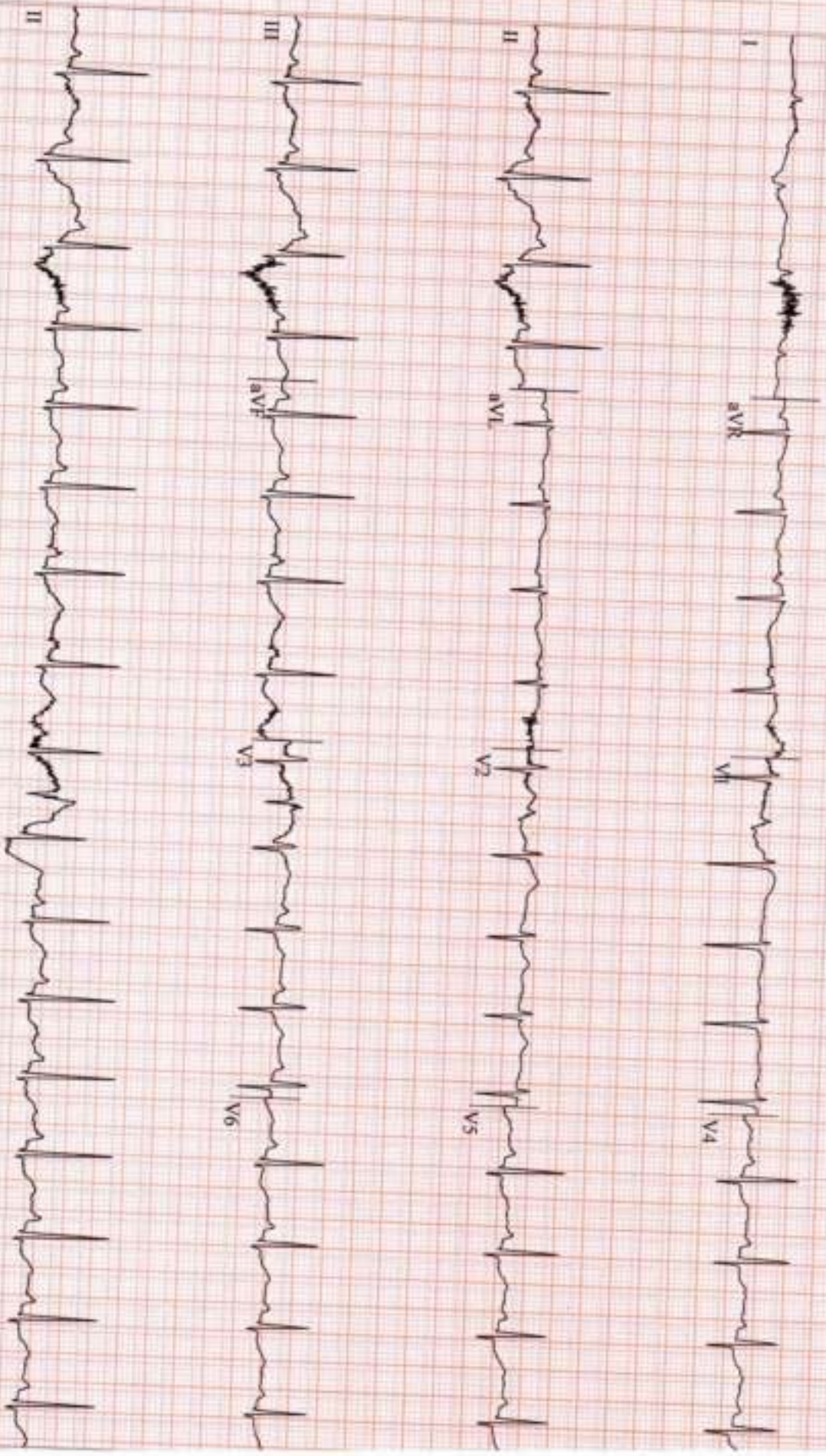
**VARSHA, BONACIRI**  
Patient ID 2402718364  
27.01.2024  
1:18-50pm

99 bpm  
120/80 mmHg

12-Lead Report  
PRETEST  
SUPINE  
00:12

BRUCE  
0.0 mph  
0.0 %

SUBURBAN DIAGNOSTI



GE CardioSoft V6.73 (Z)  
25 mm/s 10 mm/mV 50Hz 0.01Hz FRF+ HRQII, V4)

Start of Test: 1:18:32pm

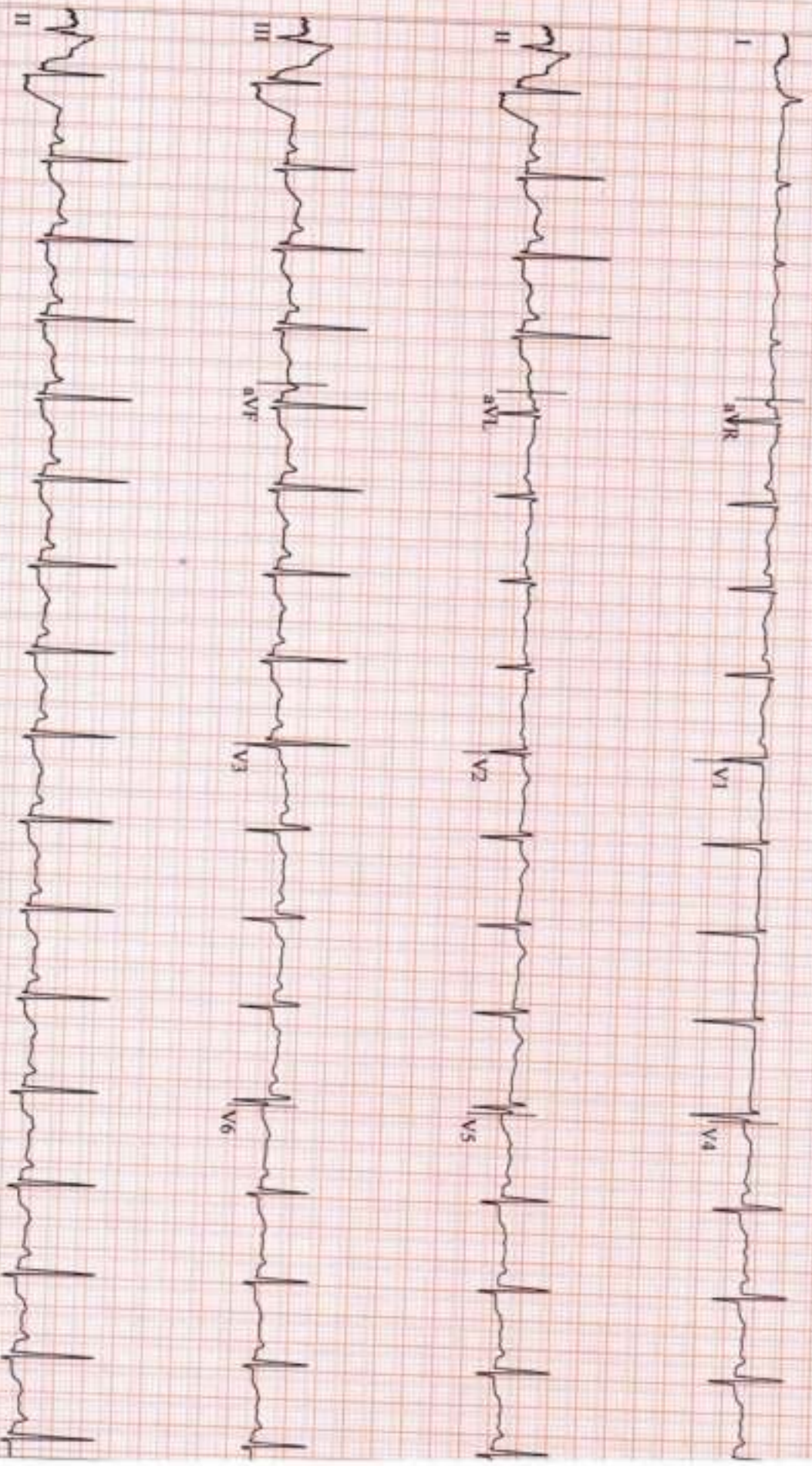
**VARSHA, BONAGIRI**  
Patient ID 2402718364  
27.01.2024  
1:18:55pm

103 bpm  
120/80 mmHg

12-Lead Report  
PRETEST  
STANDING  
00:17

BRUCE  
0.0 mph  
0.0 %

SUBURBAN DIAGNOSTIC



GE CardioSoft V6.73 (2)  
25 mm/s 10 mm/mV 50Hz 0.01Hz FRF+ HRQT, V4)

Start of Test: 1:18:32pm

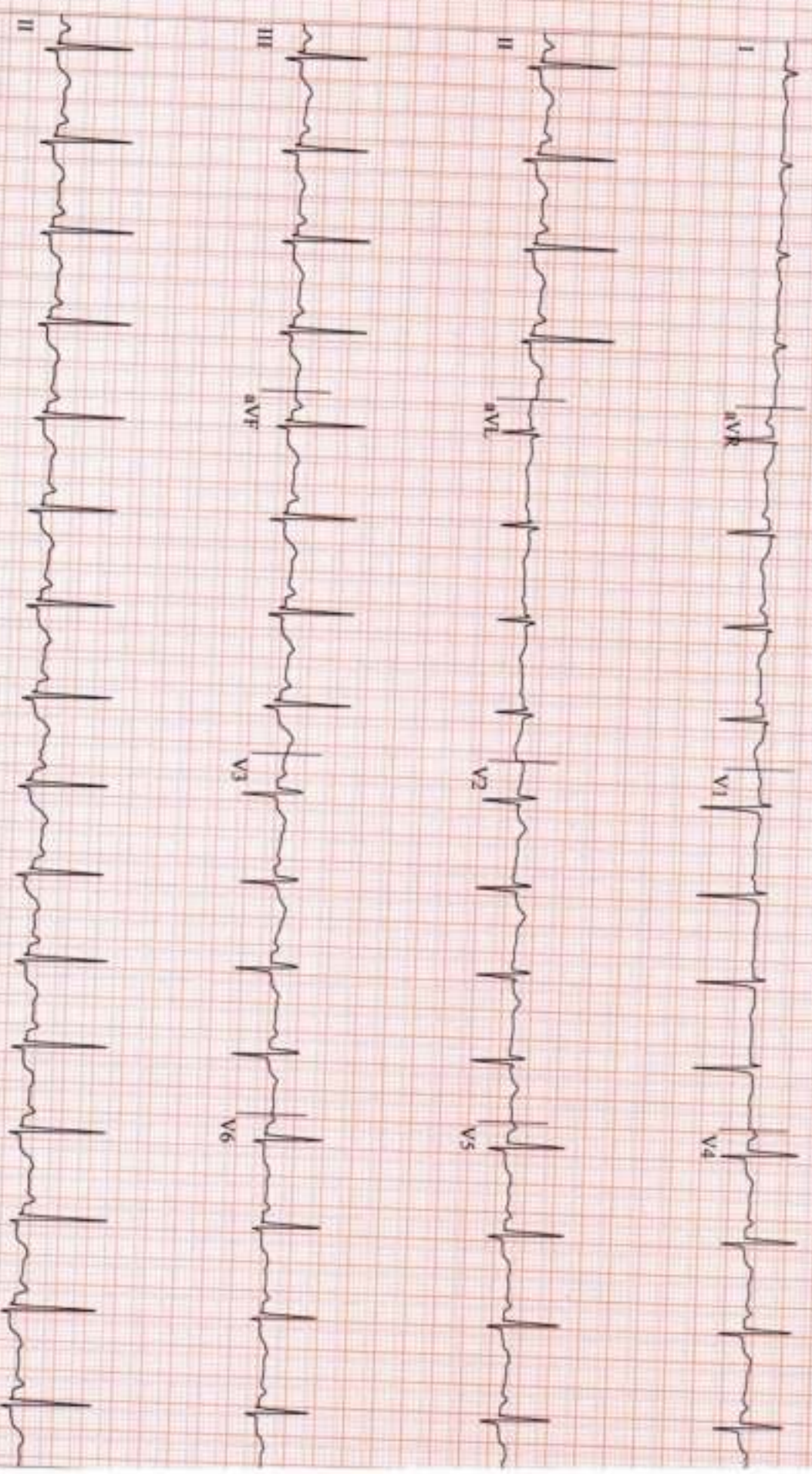
**VARSHA, BONAGIRI**  
Patient ID 2402718364  
27.01.2024  
1:19-12pm

97 bpm  
120/80 mmHg

12-Lead Report  
PRETEST  
HYPERV.  
00:35

BRUCE  
0.0 mph  
0.0 %

SUBURBAN DIAGNOSTIC



GE CardioSoft V6.73 (2)  
25 mm/s 10 mm/mV 50Hz 0.01Hz FRF+ HR(II, V4)

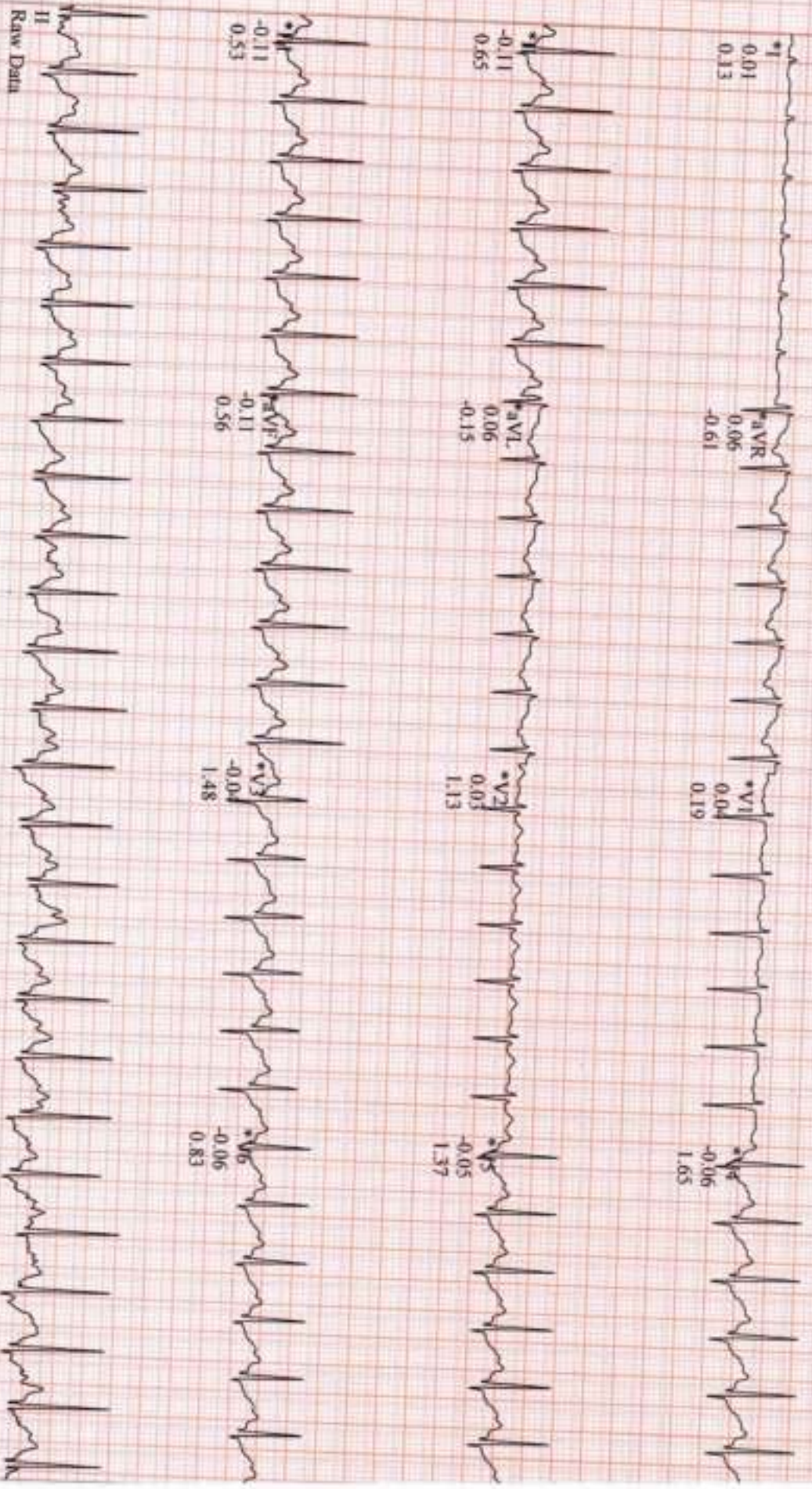
Start of Test: 1:18:32pm

**VARSHA, BONNAGIRI**  
Patient ID 2402718364  
27.01.2024  
1:22:10pm

Linked Medians  
151 bpm  
140/80 mmHg  
EXERCISE  
STAGE 1  
02:50

BRUCE  
1.7 mph  
10.0 %

SUBURBAN DIAGNOSTIC



GE CardioSoft V6.73 (Z)  
25 mm/s 10 mm/mV 50Hz 0.01Hz FRF+ HR(II,V4)

Start of Test: 1:18:32pm

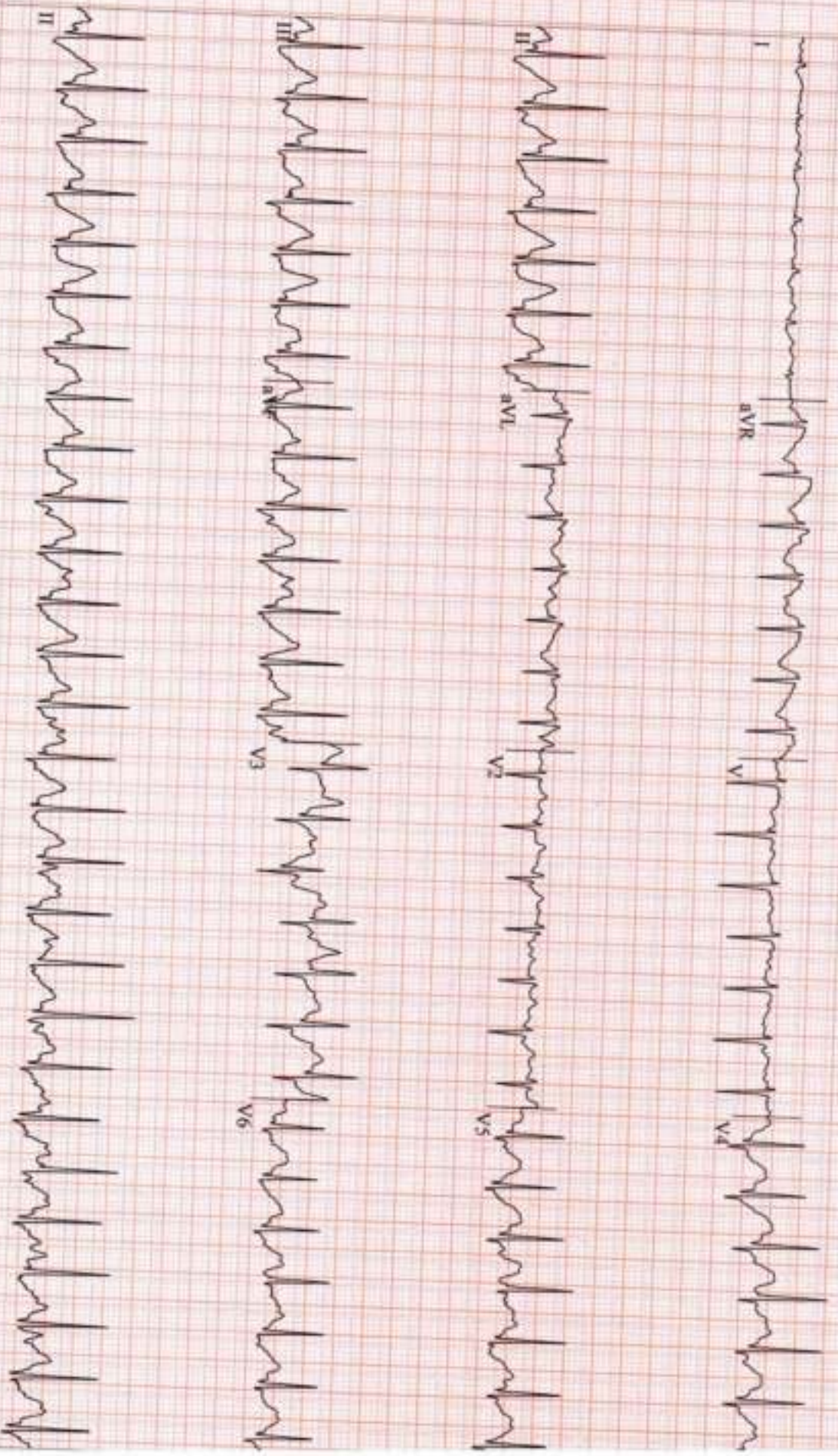
\*Computer Synthesized Rhythms

VARSHA, BONACIRI  
Patient ID 2402718364  
27.01.2024  
1:23:57pm

171 bpm

12-Lead Report ( PEAK EXERCISE )  
EXERCISE STAGE 2  
04:32  
BRUCE  
2.5 mph  
12.0 %

SUBURBAN DIAGNOSTI



GE CardioSoft V6.73 (2)  
25 mm/s 10 mm/mV 50Hz 0.01Hz FRF+ HRGILV4

Start of Test: 1:18:32pm

VARSHA, BONAGIRI  
Patient ID 2402718364  
27.01.2024  
1:24:51pm

Linked Medians  
RECOVERY #1  
148 bpm  
01:00

BRUCE  
0.0 mph  
0.0 %

SUBURBAN DIAGNOSTIC



GE CardioSoft V6.73 (2)  
25 mm/s 10 mm/mV 50Hz 0.01Hz FRF+ HR(V4,II)

Start of Test: 1:18:32pm

\*Computer Synthesized Rhythms



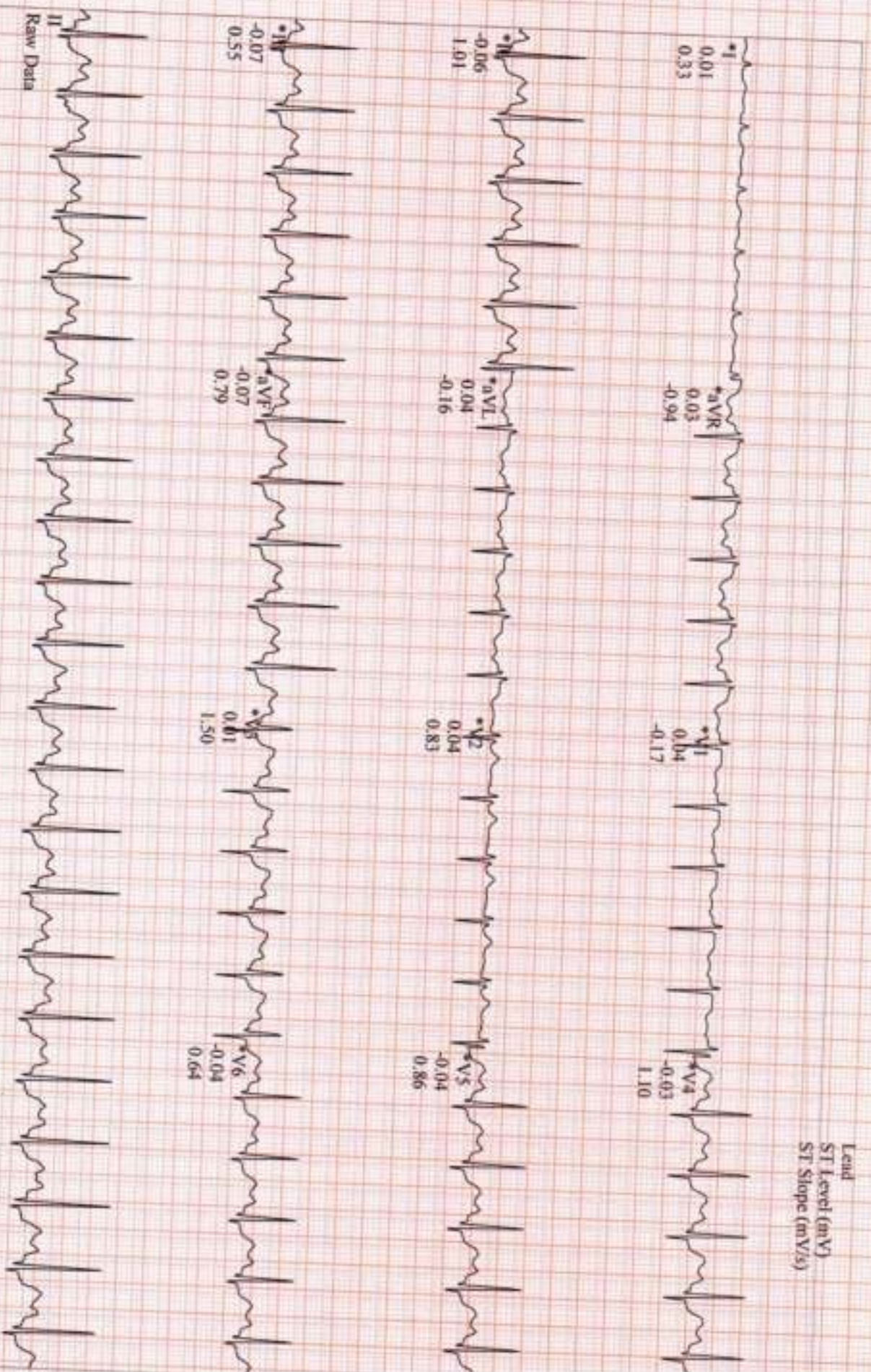
VARSHA, BONAGIRI  
Patient ID 2402718564  
27.01.2024  
125.5 bpm

131 bpm

Linked Medians  
RECOVERY #1  
02:00

BRUCE  
0.0 mph  
0.0 %

SUBURBAN DIAGNOSTI



Raw Data

GE CardioSoft V6.73 (2)  
25 mm/s 10 mm/mV 50Hz 0.01Hz FRF+ HR(VA,LD)

Start of Test: 1:18:32pm

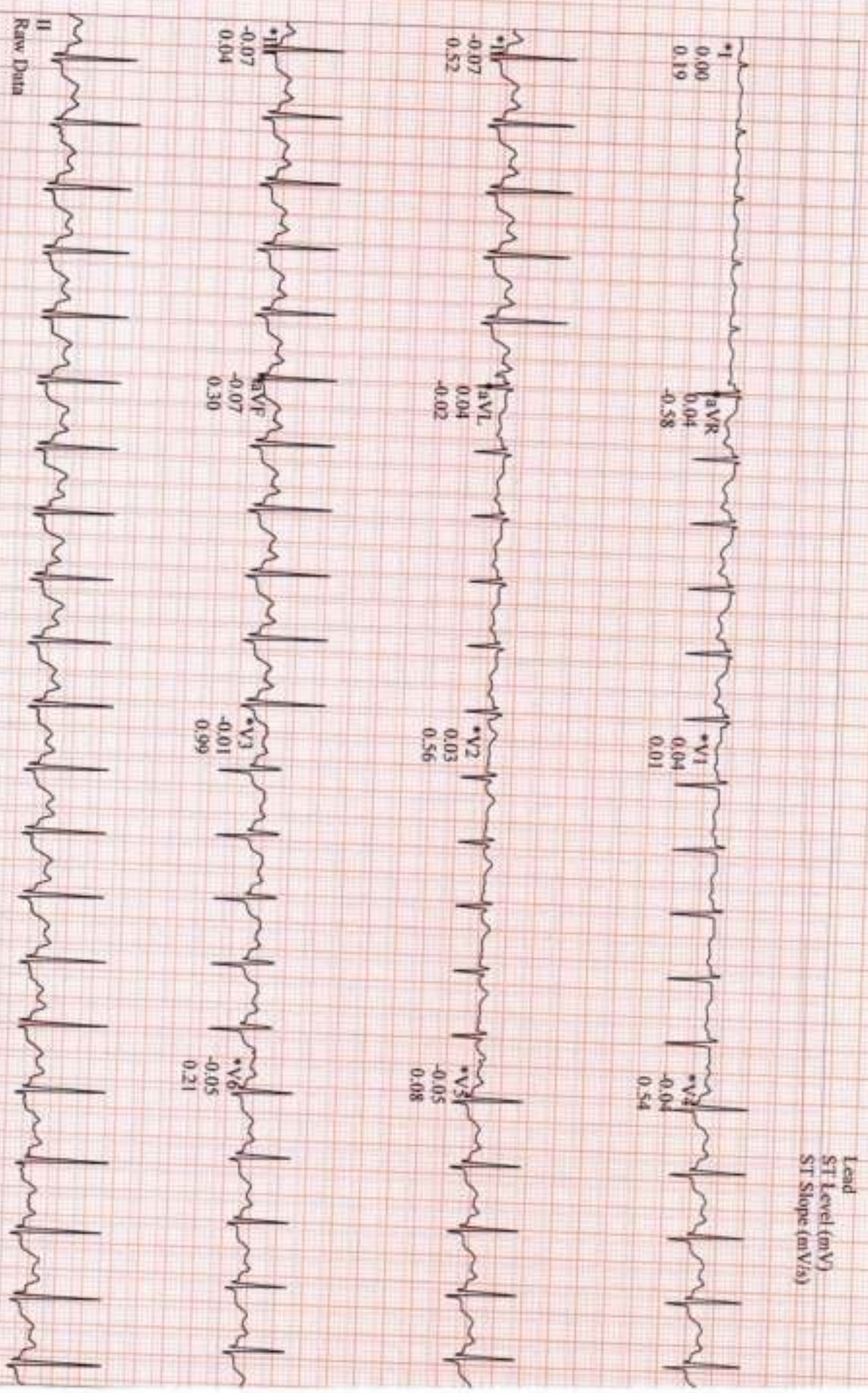
\*Computer Synthesized Rhythms

VARSHA, BONAGIRI  
Patient ID 2402718364  
27.01.2024  
1:26:51pm

Linked Medians  
RECOVERY #1  
126 bpm  
140/80 mmHg  
03:00

BRUCE  
0.0 mph  
0.0 %

SUBURBAN DIAGNOSTIC



GE CardioSoft V6.73 (2)  
25 mm/s 10 mm/mV 50Hz 0.01Hz FRF+ HR(V4,II)

Start of Test: 1:18:32pm

\*Computer Synthesized Rhythms