

Name : MR. PRADEEP KUMAR

Ref. By : BANK OF BARODA

Sent By : Arcofemi Healthcare Pvt Ltd

LAB ID : 312 Age : 39 Yrs. Sex : M Printed : 12/03/2025 11:05 Sample Collection : 08/03/2025 13:43 Sample Received : 08/03/2025 13:43 Report Released : 09/03/2025 12:39

		CC	MPLETE BLOOD	COUNT *
Test		Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	:	15.8	g/dL	13-18 g/dL
Total RBC (Electrical Impedence)	:	5.46	10^6/µL	3.0-6.0 10^6/µL
Hematocrit (PCV) (Calculated)	:	48.7	%	36-54 %
Mean Corpuscular Volume (MCV) (calulated)	:	89.2	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	:	28.9	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC)	:	32.4	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	- :	14.60	%	12-15 %
Total Leucocytes Count (Light Scattering)	:	5970	/cumm	4000-11000 /cumm
Neutrophils	:	58	%	40-75 %
(Calculated)				
Eosinophils Percentage	:	06	%	1-6 %
(Calculated)				
Lymphocyte Percentage	:	30	%	20-45 %
(Calculated)				
Basophils Percentage (Calculated)	:	0	%	0-1 %
Monocytes Percentage (Calculated)	:	06	%	1-10 %
RBC Morphology	:	Normocytic,	Normochromic	
WBC Morphology	:	Normal Morp		
Platelet Count (Electrical Impedence)	:	250000	/ul	150000-450000 /ul
Platelets on Smear	:	Adequate		Adequate
E.S.R Sample Type:EDTA whole blood(Westergren) Sample Type : EDTA Whole Blood Test done with THREE PART CELL COUNTER (S	: Sysme	02 x KX-21)	mm at 1hr	0-20 mm at 1hr

Note: Tests marked with * are included in NABL scope.

*All Samples Processed At Excellas Clinics Mulund Centre . *ESR NOT IN NABL scope.

(Collected At: 08/03/2025 13:43:32, Received At: 08/03/2025 13:43:32, Reported At: 09/03/2025 12:39:36)



Dr. Santosh Khairnar

Reg. No.-2000/08/2926





Name : MR. PRADEEP KUMAR Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd LAB ID : 312 Age : 39 Yrs. Sex : M Printed : 12/03/2025 11:05 Sample Collection : 08/03/2025 13:43 Sample Received : 08/03/2025 13:43 Report Released : 09/03/2025 12:39

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





Reg. No.-2000/08/2926



Name : MR. PRADEEP KUMAR

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Sent By : Arcofemi Healthcare Pvt Ltd

LAB ID : 312 Age : 39 Yrs. Sex : M Printed : 12/03/2025 11:05 Sample Collection : 08/03/2025 13:43 Sample Received : 08/03/2025 13:43 Report Released : 09/03/2025 12:39

HbA1c (Whole Blood)				
Test		Result	Unit	Reference Range
HbA1C-Glycosylated Haemoglobin	:	5.40	%	Non-diabetic: 4-6
				Excellent Control: 6-7
				Fair to good control: 7-8
				Unsatisfactory control: 8-10
				Poor Control: >10
EDTA Whole Blood, Method: HPLC				
Estimated Average Glucose (eAG)	:	108.28	mg/dl	65.1-136.3 mg/dL mg/dl
EDTA Whole Blood, Method: Calculated				

Interpretation:

1. The term HbA1c refers to Glycated Haemoglobin. Measuring HbA1c gives an overall picture of what the average blood sugar levels have been over a period of weeks/month. Higher the HbA1c, the greater the risk of developing diabetes-related complications.

2.HbA1c has been endorsed by clinical groups and ADA (American Diabetes Assocation) guidelines 2012, for the diagnosis of diabetes using a cut-off point of 6.5%. ADA defined biological reference range for HbA1c is between 4-6%. Patients with HBA1c value between 6.0-6.5% are considered at risk for developing diabetes in the future. Trends in HbA1c area a better indicator of glucose control than standalone test.

3. To estimate the eAG from the HbA1c value, the following equation is used: eAG(mg/dl) = 28.7*A1c-46.7.

4.Diabetic must aspire to keep values under 7% to avoid the various complications resulting from diabetes.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 08/03/2025 13:43:32, Received At: 08/03/2025 13:43:32, Reported At: 09/03/2025 12:39:42)

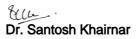
Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)				
Test		Result	Unit	Biological Ref. Range
GLUCOSE (SUGAR) FASTING,	:	86	mg/dL	Non-Diabetic: < 100 mg/dl
(Fluoride Plasma Used)				Impaired Fasting Glucose: 100-
				125 mg/dl Diabetic: >/= 126 mg/dl
Method: GOD-POD				
GLUCOSE (SUGAR) PP, (Fluoride	:	87	mg/dl	Non-Diabetic: < 140 mg/dl
Plasma Used)				Impaired Glucose Tolerance: 140-
				199 mg/dl Diabetic: >/= 200 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 08/03/2025 13:43:32, Received At: 08/03/2025 13:43:32, Reported At: 09/03/2025 12:37:54)







Name : MR. PRADEEP KUMAR

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Sent By : Arcofemi Healthcare Pvt Ltd

LAB ID : 312 Age : 39 Yrs. Sex : M Printed : 12/03/2025 11:05 Sample Collection : 08/03/2025 13:43 Sample Received : 08/03/2025 13:43 Report Released : 09/03/2025 12:39

BLOOD GROUP					
Test	Result	Unit	Biological Ref. Range		
Blood Group	: 'O' Rh POSITIVI	E			

Slide and Tube Aggllutination Test

(Collected At: 08/03/2025 13:43:32, Received At: 08/03/2025 13:43:32, Reported At: 09/03/2025 12:37:18)

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







Name : MR. PRADEEP KUMAR

Ref. By : BANK OF BARODA

Sent By : Arcofemi Healthcare Pvt Ltd

LAB ID : 312 Age : 39 Yrs. Sex : M Printed : 12/03/2025 11:05 Sample Collection : 08/03/2025 13:43 Sample Received : 08/03/2025 13:43 Report Released : 09/03/2025 12:38

		LIPIC	PROFILE	
Test		Result	Unit	Biological Ref. Range
Total Cholesterol	:	174	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
Serum, Method: CHOD-PAP				
S. Triglyceride	:	145	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
Serum, Method: GPO-Trinder				
HDL Cholesterol serum,Direct method	:	37	mg/dl	35.3-79.5 mg/dl
LDL Cholesterol	:	108.00	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
Serum, (Calculated)				
VLDL Cholesterol Serum, Method: Calculated	:	29.0	mg/dl	5-30 mg/dl
LDL/HDL Ratio	:	2.9		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
Serum, Method: Calculated				
TC/HDL Ratio	:	4.7		Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0

Serum, Method: Calculated

Test Done on - Automated Biochemistry Analyzer (EM 200).

Interpretation

1. Triglycerides: When triglycerides are very high greater than 1000 mg/dL, there is a risk of developing pancreatitis in children and adults. Triglycerides change dramatically in response to meals, increasing as much as 5 to 10 times higher than fasting levels just a few hours after eating. Even fasting levels vary considerably day to day. Therefore, modest changes in fasting triglycerides measured on different days are not considered

to be abnormal.

2. HDL-Cholesterol: HDL- C is considered to be beneficial, the so-called "good" cholesterol, because it removes excess cholesterol from tissues and carries it to the liver for disposal.

3. LDL-Cholesterol: Desired goals for LDL-C levels change based on individual risk factors.

*All Samples Processed At Excellas Clinics Mulund Centre

(Collected At: 08/03/2025 13:43:32, Received At: 08/03/2025 13:43:32, Reported At: 09/03/2025 12:38:27)

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



Mu. Dr. Santosh Khairnar

Reg. No.-2000/08/2926



Name : MR. PRADEEP KUMAR

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Sent By : Arcofemi Healthcare Pvt Ltd

LAB ID : 312 Age : 39 Yrs. Sex : M Printed : 12/03/2025 11:05 Sample Collection : 08/03/2025 13:43 Sample Received : 08/03/2025 13:43 Report Released : 09/03/2025 12:40

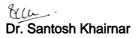
		LIVER FUN	CTION TEST	
Test		Result	Unit	Biological Ref. Range
S. Bilirubin (Total)	:	1.00	mg/dl	0-2.0 mg/dl
Serum, Method: Diazo (walter & Gerarde)				
S. Bilirubin (Direct)	:	0.34	mg/dl	0-0.4 mg/dl
Serum, Method: Diazo (walter & Gerarde)				
S. Bilirubin (Indirect)	:	0.66	mg/dl	0.10-1.0 mg/dl
Serum, Method: Calculated				
Aspartate Transaminase (AST/SGOT)	:	65	IU/L	0-35 IU/L
Serum, Method: UV Kinetic with P5P				
Alanine Transaminase (ALT/SGPT)	:	40	IU/L	0-45 IU/L
Serum, Method: UV Kinetic with P5P				
S. Alkaline Phosphatase	:	71	IU/L	53-128 IU/L
Serum, Method: IFCC with AMP buffer				
Total Proteins	:	7.6	gm/dl	6.4-8.3 gm/dl
Serum, Method: Biuret				
S. Albumin	:	5.0	gm/dl	3.5-5.2 gm/dl
Serum, Method: BCG			-	-
S. Globulin	:	2.6	gm/dl	2.3-3.5 gm/dl
Serum, Method: Calculated				
A/G Ratio	:	1.92		0.90-2.00
Serum, Method: Calculated				
Gamma GT	:	29	U/L	0-55 U/L
Serum, Method: G glutamyl carboxy nitroanilide				
Test Done on - Automated Biochemistry Analyzer	(EM 2	00).		

*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 08/03/2025 13:43:32, Received At: 08/03/2025 13:43:32, Reported At: 09/03/2025 12:40:08)

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







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		BLOOD UREA	NITROGEN (BUN)		
Test		Result	Unit	Biological Ref. Range	
Urea	:	29.74	mg/dl	19-45 mg/dl	
Serum, Method: Urease - GLDH					
Blood Urea Nitrogen	:	13.90	mg/dl	5-18 mg/dl	
Test Done on - Automated Biochemistry Analyzer (EM 200)					
*All Samples Processed At Excellas Clinics Mulun	d Centre				

(Collected At: 08/03/2025 13:43:32, Received At: 08/03/2025 13:43:32, Reported At: 09/03/2025 12:39:00)

SERUM CREATININE					
Test		Result	Unit	Biological Ref. Range	
S. Creatinine	:	1.06	mg/dl	0.7-1.3 mg/dl	
Serum, Method: Enzymatic					

Test Done on - Automated Biochemistry Analyzer (EM 200).

*All Samples Processed At Excellas Clinics Mulund Centre

(Collected At: 08/03/2025 13:43:32, Received At: 08/03/2025 13:43:32, Reported At: 09/03/2025 12:39:05)

SERUM URIC ACID Test Result Unit Biological Ref. Range				
Serum, Method: Uricase - POD				

Test Done on - Automated Biochemistry Analyzer (EM 200).

(Collected At: 08/03/2025 13:43:32, Received At: 08/03/2025 13:43:32, Reported At: 09/03/2025 12:38:42)









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BUN CREAT RATIO (BCR)					
Test		Result	Unit	Biological Ref. Range	
BUN/Creatinine ratio	:	13.10		5-20	
Serum, Method: Calculated					

NOTE:

A blood urea nitrogen (BUN)/creatinine ratio (BCR) >20 is used to distinguish pre-renal azotemia (PRA) and acute tubular necrosis (ATN) (*Collected At: 08/03/2025 13:43:32, Received At: 08/03/2025 13:43:32, Reported At: 09/03/2025 12:39:09*)

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





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THYROID FUNCTION TEST					
Test		Result	Unit	Biological Ref. Range	
Total T3	:	1.3	ng/dl	0.70-2.04 ng/dl	
Serum, Method: CLIA					
Total T4	:	10.90	µg/dl	5.1-14.1 µg/dl	
Serum, Method: CLIA					
TSH (Thyroid Stimulating Hormone)	:	3.09	µIU/mI	0.27-5.3 µIU/mI	

Serum, Method: CLIA

Interpretation Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, sub-clinical hyperthyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis ,estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age ,marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 08/03/2025 13:43:32, Received At: 08/03/2025 13:43:32, Reported At: 09/03/2025 12:38:08)

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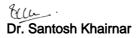
		EXAMINATION OF	URINE	
Test		Result	Unit	Biological Ref. Range
PHYSICAL EXAMINATI	ON			
Quantity	:	25	ml	
Colour	:	Pale yellow		
Appearance	:	Clear		
Reaction (pH)	:	6.0		4.5 - 8.0
Specific Gravity	:	1.015		1.010 - 1.030
CHEMICAL EXAMINAT	ION			
Protein	:	Absent		Absent
Glucose	:	Absent		Abesnt
Ketones Bodies	:	Absent		Abesnt
Occult Blood	:	Absent		Absent
Bilirubin	:	Absent		Absent
Urobilinogen	:	Absent		Normal
MICROSCOPIC EXAMI	NATION			
Epithelial Cells	:	4 - 5	/ hpf	
Pus cells	:	2 - 3	/ hpf	
Red Blood Cells	:	Absent	/ hpf	
Casts	:	Absent	/ lpf	Absent / Ipf
Crystals	:	Absent		Absent
OTHER FINDINGS				
Yeast Cells	:	Absent		Absent
Bacteria	:	Absent		Absent
Mucus Threads	:	Absent		
Spermatozoa	:	Absent		
Deposit	:	Absent		Absent
Amorphous Deposits	:	Absent		Absent
sample type:Urine				

Method:Visual and Microscopic

(Collected At: 08/03/2025 13:43:32, Received At: 08/03/2025 13:43:32, Reported At: 09/03/2025 12:37:39)

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





Reg. No.-2000/08/2926



Name : MR. PRADEEP KUMAR Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd LAB ID : 312 Age : 39 Yrs. Sex : M Printed : 12/03/2025 11:05 Sample Collection : 08/03/2025 13:43 Sample Received : 08/03/2025 13:43 Report Released : 10/03/2025 13:26

X RAY CHEST PA VIEW

CLINICAL PROFILE: NO COMPLAINTS

Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

Bony thorax appears normal.

Soft tissues appear normal.

IMPRESSION:

No significant abnormality detected.

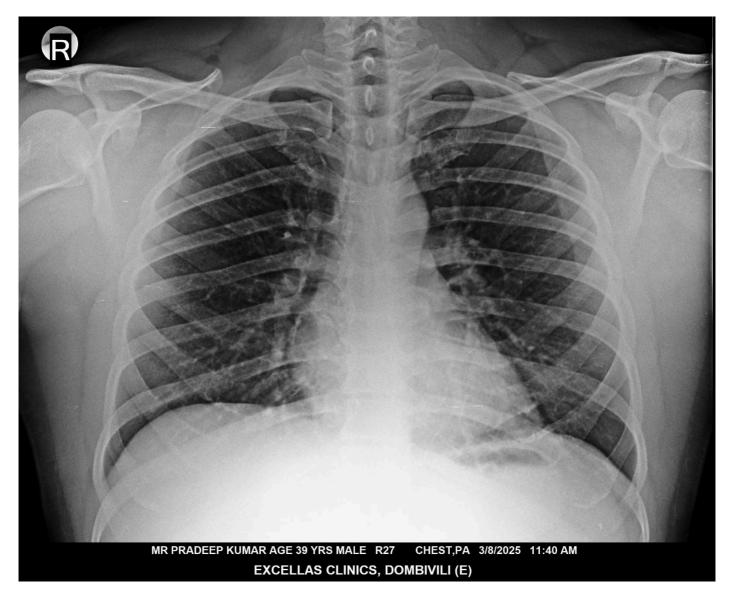


Co کی بینج Dr. Raj Shah DMRE , M.B.B.S REG. NO. 2019/05/3609





Name : MR. PRADEEP KUMAR Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd LAB ID : 312 Age : 39 Yrs. Sex : M Printed : 12/03/2025 11:05 Sample Collection : 08/03/2025 13:43 Sample Received : 08/03/2025 13:43 Report Released : 10/03/2025 13:26



(Collected At: 08/03/2025 13:43:32, Received At: 08/03/2025 13:43:32, Reported At: 10/03/2025 13:26:08)

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



Dr. Raj Shah DMRE , M.B.B.S REG. NO. 2019/05/3609





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OPTHALMIC EVALUATION

Examination	Right Eye	Left Eye				
Distance Vision	6/6	6/6				
Near Vision	N/6	N/6				
Color Vision	Noi	Normal				
Remarks	Νοι	Normal				

(Collected At: 08/03/2025 13:43:32, Received At: 08/03/2025 13:43:32, Reported At: 08/03/2025 16:46:25)

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



Excellas Clinics

	, # * \	Excellas Clinic					
MEDICAL EXAMINATION REPORT							
Name Mr./ Mrs./ Miss	Pradeep Lumar						
Sex	Male / Female						
Age (yrs.)	UHID :						
Date	مد 20 / ع	Bill No :					
Marital Status	Single / Married / Widow / Widower : No. of Children :						
Present Complaints	No						
Past Medical History : Surgical History :	MO						
Personal History	Diet : Veg □ / Mixed ⊡ : Addiction : Smoking □/ Tobacco Chewing □ / Alcohol □ : Any Other : No						
Family History	Father = HT / DM / IHD / Stroke / Any Other Mother = HT / DM / IHD / Stroke / Any Other Siblings = HT / DM / IHD / Stroke / Any Other						
History of Allergies	Drug Allergy Amox Any Other						
History of Medication	For HT / DM / HD / Hypothyroidism Any Other No						
On Examination (O/E)	G. E. : $fair R. S. : AZAZ C. V. S. : g_{2}C. N. S. : g_{2}P/A : corrAny Other Positive Findings :$						

Height 15 q 1 cms	Weight 🥖	4. Kgs	BMI 29.2
Pulse (per min.)	Blood Pressure	e (mm of Hg) <u>⊮ø/80</u>	mmg
180	Gyna	ecology	
Examined by	Dr.	- I aller	sold (units - BittBhy
Complaint & Duration			· · · · · · · · · · · · · · · · · · ·
Other Symptoms (Mict, bowels etc)	e Le		
Menstrual History	Menarche	Cycle	Loss
			P.C.B.signe@lineard
	L.M.P.	Vaginal Discharge	
	Cx. Smear	Contraception	🧊 Nata Manaka M Manaka kata Manaka Ma
Obstetric History	-		Para and Astronomic Transformer
Examination :	n fatar n		
Breast		the manual gala	· · · · · ·
Abdomen	— — — — — — — — — — — — — — — — — — —	Y. 9,016.	sation industria. Alter
P.S.		n istica	
P.V.	+ P / Ströke n	s tel s s sis	-
Gynaecology Impression & Recommendation	3 *1	ar¥ v£jaik ⊥ var-	2016 제Alter exercit. *
Recommendation	nsaurput in	n n McChine I.	a wabala ya kas
		•	
Physician Impression			P.WC, ROUNTLE
Examined By :	- Underweight	To Reduce Weight = To Increase Weight	' .

DAWADI, SONAR PADA DOMBIVLI.

Mr. PRADEEP KUMARID : 86Age/Sex : 39/MHt/Wt : 169/84Ref. by : MEDIWHEELRecorded : 8- 3-2025 11:41Indication1 :Indication2 :Indication3 :Indication3 :						TREADMILL TEST SUMMARY REPORT Protocol: BRUCE History: NIL Medication1 : Medication2 : Medication3 :						
PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100		ST LEVEL (mm) V2	V5	METS	
JPINE					70	120/80	84	0.1				
	0:02	0:02			74 73	120/80 120/80	88 87	-0.1 -0.1 -0.2	-0.3 -0.5 0.6	0.0 0.1 0.0		
TAGE 1	2:59	2:59	2.70	10.00	116	120/80	139	0.3	-0.5			
TAGE 2 TAGE 3	5:59 7:14	2:59 1:14	4.00 5.40	12.00 14.00	145 147	130/80 130/80	188 191	0.7 0.4	-7.7 -3.8	0.1 0.1 0.2	4.80 7.10 8.30	
EAK EXER	7:25	1:25			151	130/80	196	0.1	-1.4	0.3	8.48	
SULTS												
cise Duration Heart Rate Blood Pressure Work Load son of Termination	1 1	7:25 Minutes 151 bpm 83 % c 130/80 mmHg 8.48 METS Achieved THR	f target heart rate	e 181 bpm								
ANGINA/ARRYTH	MIA'S/LV	NORMAL IONOTR DYSFUNCTION. N RCISE INDUCED R	O SIGNIFICANT	ST CHANGES A	SPONCE. IT PEAK OF TES	ST.		P	ron We			
								r	Dr. VINAY HIRAY			
									DNB MED Reg. No. 2012/09/2681			

Mr. PRADEEP KUMAR I.D. : 86 AGE/SEX : 39/M RECORDED : 8- 3-2025 11:41

RATE : 101 BPM B.P. : 120/80 mmHg BRUCE RECOVERY PHASE TIME : 2:59

ST @ 10mm/mV 80ms PostJ SPEED : 0.0 Km./Hr. GRADE : 0.0 %



Mr. PRADEEP KUMAR I.D. : 86 AGE/SEX : 39/M RECORDED : 8- 3-2025 11:41

RATE : 102 BPM B.P. : 120/80 mmHg BRUCE RECOVERY PHASE TIME: 1:59

ST @ 10mm/mV 80ms PostJ SPEED : 0.0 Km./Hr. GRADE : 0.0 %



Mr. PRADEEP KUMAR I.D. : 86 AGE/SEX : 39/M RECORDED : 8- 3-2025 11:41

RATE : 105 BPM B.P. : 130/80 mmHg

EXCELLAS CLINICS-DOMBIVLI

BRUCE RECOVERY PHASE TIME: 0:59

ST @ 10mm/mV 80ms PostJ SPEED : 0.0 Km./Hr. GRADE : 0.0 %



 Mr. PRADEEP KUMAR

 I.D. : 86

 AGE/SEX : 39/M

 RECORDED : 8- 3-2025 11:41

RATE : 151 BPM B.P. : 130/80 mmHg BRUCE PEAK EXER PHASE TIME : 7:25 STAGE TIME : 1:25

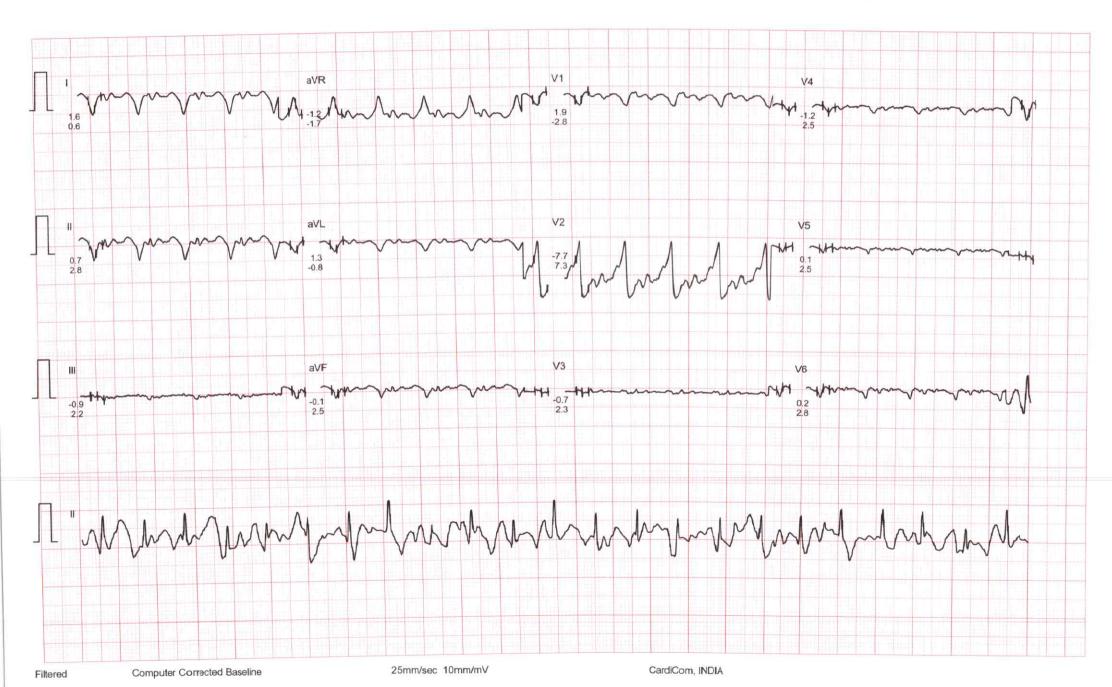
ST @ 10mm/mV 80ms PostJ SPEED : 5.4 Km./Hr. GRADE : 14.0 %



Mr. PRADEEP KUMAR I.D. : 86 AGE/SEX : 39/M RECORDED : 8- 3-2025 11:41

RATE : 145 BPM B.P. : 130/80 mmHg BRUCE EXERCISE 2 PHASE TIME : 5:59 STAGE TIME : 2:59

ST @ 10mm/mV 80ms PostJ SPEED : 4.0 Km./Hr. GRADE : 12.0 %



Mr. PRADEEP KUMAR I.D. : 86 AGE/SEX : 39/M RECORDED : 8- 3-2025 11:41

RATE : 116 BPM B.P. : 120/80 mmHg BRUCE EXERCISE 1 PHASE TIME : 2:59 STAGE TIME : 2:59

ST @ 10mm/mV 80ms PostJ SPEED : 2.7 Km./Hr. GRADE : 10.0 %



EXCELLAS CLINICS-DOMBIVLI STANDING PRETEST

ST @ 10mm/mV 80ms PostJ

Mr. PRADEEP KUMAR I.D. : 86 AGE/SEX : 39/M RECORDED: 8- 3-2025 11:41

RATE: 73 BPM B.P. : 120/80 mmHg



HYPERVENTILATION PRETEST

ST @ 10mm/mV 80ms PostJ

Mr. PRADEEP KUMAR I.D. : 86 AGE/SEX : 39/M RECORDED : 8- 3-2025 11:41

RATE : 74 BPM B.P. : 120/80 mmHg

STAGE TIME : 0:02



EXCELLAS CLINICS-DOMBIVLI SUPINE PRETEST

ST @ 10mm/mV 80ms PostJ

 Mr. PRADEEP KUMAR

 I.D. : 86

 AGE/SEX : 39/M

 RECORDED : 8- 3-2025 11:41

RATE : 70 BPM B.P. : 120/80 mmHg

RAW E.C.G.



