

Dr. Vimmi Goel

Head - Non Invasive Cardiology  
Incharge - Preventive Health Care  
MBBS, MD (Internal Medicine)  
Reg. No: MMC- 2014/01/0113

Preventive Health Check up  
KIMS Kingsway Hospitals  
Nagpur  
Phone No.: 7499913052



Name: Mr. Pranil Deosthale Date: 20/11/24

Age: 34 Sex: M/F Weight: 64.6 kg Height: 162.5 inc BMI: 24.5

BP: 135/86 mmHg Pulse: 59/m bpm RBS: \_\_\_\_\_ mg/dl

SpO2: 99%



KIMS - Kingsway Hospitals  
(A Unit of SPANV Medisearch Lifesciences Pvt. Ltd.)

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Maharashtra, India - 440001.

Ph No.:1800 266 8346|Mobile No.:+91-7126789100

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DEPARTMENT OF OPHTHALMOLOGY  
OUT PATIENT ASSESSMENT RECORD

<b>PRANIL DEOSTHALE</b> 33Y(S) 11M(S) 27D(S)/M MRNP2425028484 8329788509	<b>CONSULT DATE</b> : 20-11-2024 <b>CONSULT ID</b> : OPC2425092152 <b>CONSULT TYPE</b> : WALK IN <b>VISIT TYPE</b> : NORMAL <b>TRANSACTION TYPE</b> :	<b>DR. ASHISH PRAKASHCHANDRA KAMBLE</b> MBBS,MS, FVRS,FICO CONSULTANT DEPT OPHTHALMOLOGY
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**VITALS**

**Temp** : **Pulse** : **BP (mmHg)** : **spO2** : **Pain Score** : **Height** :  
- °F - /min - %RA -- /10 -- cms

**Weight** : **BMI** :  
- kgs -

**CHIEF COMPLAINTS**

ROUTINE EY CHECK UP

**MEDICATION PRESCRIBED**

#	Medicine	Route	Dose	Frequency	When	Duration
1	SOHA LIQUIGEL 10ML EYE DROPS	Eye	1-1-1-1	Every Day	NA	2 months
Instructions : BOTH EYES						
Composition : SODIUM HYALURONATE 0.18%W/V						

**NOTES**

**GLASS PRESCRIPTION :-**  
**DISTANCE VISION**

EYE	SPH	CYL	AXIS	VISION
RIGHT EYE	00	-1.00	05	6/6
LEFT EYE	00	-1.00	175	6/6

**NEAR ADDITION**

RIGHT EYE 00 N6

LEFT EYE 00 N6

REMARK- BLUE CUT GLASSES

Dr. Ashish Prakashchandra Kamble  
MBBS,MS, FVRS,FICO  
Consultant

Printed On :20-11-2024 14:23:14

Name : Mr. Pranil Deosthale Date : 20/11/24

Age : 34 yrs Sex :  M /  F Weight : \_\_\_\_\_ kg Height : \_\_\_\_\_ inc BMI : \_\_\_\_\_

BP : \_\_\_\_\_ mmHg Pulse : \_\_\_\_\_ bpm RBS : \_\_\_\_\_ mg/dl

Allergy: \_\_\_\_\_

Routine dental checkup.

PDH :- Restoration  $\bar{c}$  37.

O/E :- Buccal caries  $\bar{c}$  47.

Calculus +  
Stains +

Advice :- Restoration  $\bar{c}$  47.  
Complete oral prophylaxis.

Dr. Vidha

Treatment :- Restoration done  $\bar{c}$  47.  
Scaling done.

- Rx
- Sensodyne Toothpaste — ①
  - Tab. Paracetamol 500 — ④
- S — 0 — S



MC-6773

**KIMS-KINGSWAY**  
HOSPITALS**KIMS-KINGSWAY**  
HOSPITALS**CLINICAL DIAGNOSTIC LABORATORY****DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mr. PRANIL DEOSTHALE	<b>Age / Gender</b> : 34 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2425065508/MRNP2425028484	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 20-Nov-24 10:52 am	<b>Report Date</b> : 20-Nov-24 12:39 pm

**HAEMOGRAM**

<b>Parameter</b>	<b>Specimen</b>	<b>Results</b>	<b>Biological Reference</b>	<b>Method</b>
Haemoglobin	Blood	15.1	13.0 - 17.0 gm%	Photometric
Haematocrit(PCV)		46.5	40.0 - 50.0 %	Calculated
RBC Count		<b>5.95</b>	4.5 - 5.5 Millions/cumm	Photometric
Mean Cell Volume (MCV)		<b>78</b>	83 - 101 fl	Calculated
Mean Cell Haemoglobin (MCH)		<b>25.4</b>	27 - 32 pg	Calculated
Mean Cell Haemoglobin Concentration (MCHC)		32.5	31.5 - 35.0 g/l	Calculated
RDW		<b>17.1</b>	11.5 - 14.0 %	Calculated
Platelet count		243	150 - 450 10 <sup>3</sup> /cumm	Impedance
WBC Count		6500	4000 - 11000 cells/cumm	Impedance

**DIFFERENTIAL COUNT**

Neutrophils	57.5	50 - 70 %	Flow Cytometry/Light microscopy
Lymphocytes	33.7	20 - 40 %	Flow Cytometry/Light microscopy
Eosinophils	1.0	1 - 6 %	Flow Cytometry/Light microscopy
Monocytes	7.8	2 - 10 %	Flow Cytometry/Light microscopy
Basophils	0.0	0 - 1 %	Flow Cytometry/Light microscopy
Absolute Neutrophil Count	3737.5	2000 - 7000 /cumm	Calculated
Absolute Lymphocyte Count	2190.5	1000 - 4800 /cumm	Calculated
Absolute Eosinophil Count	65	20 - 500 /cumm	Calculated
Absolute Monocyte Count	507	200 - 1000 /cumm	Calculated
Absolute Basophil Count	0	0 - 100 /cumm	Calculated



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**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mr. PRANIL DEOSTHALE	<b>Age / Gender</b> : 34 Y(s)/Male
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<b>Received Dt</b> : 20-Nov-24 10:52 am	<b>Report Date</b> : 20-Nov-24 12:39 pm

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference Method</u>
<b><u>PERIPHERAL SMEAR</u></b>			
Microcytosis		Microcytosis +(Few)	
Hypochromasia		Hypochromia +(Few)	
Anisocytosis		Anisocytosis +(Few)	
WBC		As above	
Platelets		Adequate	
<b>E S R</b>		03	0 - 15 mm/hr Automated Westergren's Method
*** End Of Report ***			

Suggested Clinical Correlation \* If necessary, Please discuss

Verified By : : 11100245

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**Dr. Suwarna Kawade, MBBS,MD (Pathology)**

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**CLINICAL DIAGNOSTIC LABORATORY**

**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mr. PRANIL DEOSTHALE	<b>Age / Gender</b> : 34 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2425065508/MRNP2425028484	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 20-Nov-24 10:51 am	<b>Report Date</b> : 20-Nov-24 12:28 pm

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Fasting Plasma Glucose	Plasma	84	< 100 mg/dl	GOD/POD,Colorimetric
<b>GLYCOSYLATED HAEMOGLOBIN (HBA1C)</b>				
HbA1c		5.0	Non-Diabetic : <= 5.6 % Pre-Diabetic : 5.7 - 6.4 % Diabetic : >= 6.5 %	HPLC

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

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**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mr. PRANIL DEOSTHALE	<b>Age / Gender</b> : 34 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2425065508/MRNP2425028484	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 20-Nov-24 12:49 pm	<b>Report Date</b> : 20-Nov-24 03:00 pm

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Post Prandial Plasma Glucose	Plasma	82	< 140 mg/dl	GOD/POD, Colorimetric

**Interpretation:**

Clinical Decision Value as per ADA Guidelines 2021  
Diabetes Mellites If,  
Fasting  $\geq$  126 mg/dl  
Random/2Hrs. OGTT  $\geq$  200 mg/dl  
Impaired Fasting = 100-125 mg/dl  
Impaired Glucose Tolerance = 140-199 mg/dl

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Suggested Clinical Correlation \* If necessary, Please discuss  
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HOSPITALS

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**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mr. PRANIL DEOSTHALE	<b>Age / Gender</b> : 34 Y(s)/Male
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**LIPID PROFILE**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Method</u>
Total Cholesterol	Serum	175	< 200 mg/dl
Triglycerides		102	< 150 mg/dl
HDL Cholesterol Direct		<b>37</b>	> 40 mg/dl
LDL Cholesterol Direct		<b>115.85</b>	< 100 mg/dl
VLDL Cholesterol		20	< 30 mg/dl
Tot Chol/HDL Ratio		5	3 - 5

<u>Intiate therapeutic</u>	<u>Consider Drug therapy</u>	<u>LDC-C</u>
CHD OR CHD risk equivalent	>100	>130, optional at 100-129
Multiple major risk factors conferring 10 yrs CHD risk >20%	>130	10 yrs risk 10-20 % >130
Two or more additional major risk factors, 10 yrs CHD risk <20%	>160	10 yrs risk <10% >160
No additional major risk or one additional major risk factor		>190, optional at 160-189

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

Suggested Clinical Correlation \* If necessary, Please discuss

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**Received Dt** : 20-Nov-24 10:52 am

**Age /Gender** : 34 Y(s)/Male  
**Referred By** : Dr. Vimmi Goel MBBS,MD  
**Report Date** : 20-Nov-24 12:28 pm

**LIVER FUNCTION TEST(LFT)**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Total Bilirubin	Serum	0.81	0.2 - 1.3 mg/dl	
Direct Bilirubin		0.19	0.1 - 0.3 mg/dl	
Indirect Bilirubin		0.62	0.1 - 1.1 mg/dl	
Alkaline Phosphatase		89	38 - 126 U/L	
SGPT/ALT		16	10 - 40 U/L	
SGOT/AST		21	15 - 40 U/L	
Serum Total Protein		7.12	6.3 - 8.2 gm/dl	
Albumin Serum		4.36	3.5 - 5.0 gm/dl	Bromocresol green Dye Binding
Globulin		2.76	2.0 - 4.0 gm/dl	
A/G Ratio		1.6		

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

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**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF BIOCHEMISTRY**

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Age / Gender : 34 Y(s)/Male  
Bill No/ UMR No : BIL2425065508/MRNP2425028484  
Referred By : Dr. Vimmi Goel MBBS,MD  
Received Dt : 20-Nov-24 10:52 am  
Report Date : 20-Nov-24 12:51 pm

**THYROID PROFILE**

**Parameter**

**Specimen Results**

**Biological Reference**

**Method**

T3	Serum	1.36	0.55 - 1.70 ng/ml	Enhanced chemiluminescence
Free T4		1.09	0.80 - 1.70 ng/dl	
TSH		3.30	0.50 - 4.80 uIU/ml	

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

Suggested Clinical Correlation \* If necessary, Please discuss

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**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF BIOCHEMISTRY**

**Patient Name** : Mr. PRANIL DEOSTHALE  
**Age / Gender** : 34 Y(s)/Male  
**Bill No/ UMR No** : BIL2425065508/MRNP2425028484  
**Referred By** : Dr. Vimmi Goel MBBS,MD  
**Received Dt** : 20-Nov-24 10:52 am  
**Report Date** : 20-Nov-24 12:28 pm

<b>RFT</b>	<b>Specimen</b>	<b>Result Values</b>	<b>Biological Reference</b>	<b>Method</b>
<b>Parameter</b>				
Blood Urea	Serum	24	19.0 - 43.0 mg/dl	Direct ion selective electrode
Creatinine		0.9	0.66 - 1.25 mg/dl	
GFR		114.9	>90 mL/min/1.73m square.	
Sodium		139	136 - 145 mmol/L	
Potassium		4.53	3.5 - 5.1 mmol/L	
*** End Of Report ***				

N.B : This is Hence, corre

Suggested Clinical Correlation \* If necessary, Please discuss

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*Dr. Gauri Hardas*  
**DR. GAURI HARDAS, MBBS,MD**  
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**CLINICAL DIAGNOSTIC LABORATORY  
DEPARTMENT OF PATHOLOGY**

**Patient Name** : Mr. PRANIL DEOSTHALE  
**Age / Gender** : 34 Y(s)/Male  
**Bill No/ UMR No** : BIL2425065508/MRNP2425028484  
**Referred By** : Dr. Vimmi Goel MBBS,MD  
**Received Dt** : 20-Nov-24 11:23 am  
**Report Date** : 20-Nov-24 12:27 pm

**URINE MICROSCOPY**

**Parameter**

**PHYSICAL EXAMINATION**

Volume  
Colour.

Appearance

**CHEMICAL EXAMINATION**

Specific gravity

Reaction (pH)

Nitrate

Urine Protein

Sugar

Ketone Bodies

Urobilinogen

Bilirubin

**MICROSCOPIC EXAMINATION**

Pus Cells

R.B.C.

Epithelial Cells

Casts

Crystals

**Specimen Results**

Urine

30 ml  
Pale yellow  
Clear

**Biological Reference**

**Method**

Clear

1.005 - 1.025

4.6 - 8.0

Negative

Negative

Negative

Negative

Negative

Normal

Negative

0 - 4 /hpf

0 - 4 /hpf

0 - 4 /hpf

Absent

0-1

Absent

0-1

Absent

Absent

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

ion concentration  
Indicators

protein error of pH  
indicator  
GOD/POD

Legal's est Principle  
Ehrlich's Reaction  
Diazonium

Suggested Clinical Correlation \* If necessary, Please discuss

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**KIMS-KINGSWAY**  
HOSPITALS

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**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mr. PRANIL DEOSTHALE	<b>Age / Gender</b> : 34 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2425065508/MRNP2425028484	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 20-Nov-24 12:59 pm	<b>Report Date</b> : 20-Nov-24 02:28 pm

**URINE SUGAR**

Parameter

Urine Glucose

Result Values

Nil

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

Suggested Clinical Correlation \* If necessary, Please discuss

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**DEPARTMENT OF PATHOLOGY**

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<b>Bill No/ UMR No</b> : BIL2425065508/MRNP2425028484	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 20-Nov-24 11:23 am	<b>Report Date</b> : 20-Nov-24 12:27 pm

**USF(URINE SUGAR FASTING)**

<u>Parameter</u>	<u>Specimen</u>	<u>Result Values</u>	<u>Biological Reference</u>	<u>Method</u>
Urine Glucose	Urine	Negative		STRIP

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

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**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF IMMUNO HAEMATOLOGY**

<b>Patient Name</b> : Mr. PRANIL DEOSTHALE	<b>Age /Gender</b> : 34 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2425065508/MRNP2425028484	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 20-Nov-24 10:52 am	<b>Report Date</b> : 20-Nov-24 01:27 pm

**BLOOD GROUPING AND RH**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	
<b>BLOOD GROUP.</b>	EDTA Whole Blood & Plasma/ Serum	" B "	Gel Card Method
<b>Rh (D) Typing.</b>		" Positive "(+Ve)	

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

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**DEPARTMENT OF RADIOLOGY & IMAGING SCIENCE**

NAME	PRANIL DEOSTHALE	STUDY DATE	20-11-2024 12:00:05
AGE/ SEX	34Y 1D / M	HOSPITAL NO.	MRNP2425028484
ACCESSION NO.	BIL2425065508-9	MODALITY	DX
REPORTED ON	20-11-2024 13:55	REFERRED BY	Dr. Vimmi Goel

**X-RAY CHEST PA VIEW**

Both the lung fields are clear.

Heart and Aorta are normal.

Both hilar shadows appear normal.

Diaphragm domes and CP angles are clear.

Bony cage is normal.

**IMPRESSION** -No pleuro-parenchymal abnormality seen.

*Dr. Naveen Pugalía*

**DR NAVEEN PUGALIA**  
**MBBS, MD [076125]**  
**SENIOR CONSULTANT RADIOLOGIST.**

N.B: This is only a professional opinion and not the final diagnosis. Radiological investigations are subject to variations due to technical limitations. Hence, correlation with clinical findings and other investigations should be carried out to know true nature of illness.

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PATIENT NAME:	PRANIL DEOSTHALE	AGE /SEX:	34 YRS/MALE
UMR NO:	MRNP2425028484	BILL NO:	BIL2425065508-2
REF BY	DR VIMMI GOEL	DATE:	20-NOV-2024

**USG WHOLE ABDOMEN**

LIVER is normal in size and shows normal echotexture.  
No evidence of any focal lesion seen. Intrahepatic biliary radicals are not dilated.  
PORTAL VEIN and CBD are normal in course and caliber.

GALL BLADDER is physiologically distended. No sludge or calculus seen.  
Wall thickness is within normal limits.

Visualized head and body of PANCREAS is normal in shape, size and echotexture.

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

Both KIDNEYS are normal in shape, size and echotexture.  
No evidence of calculus or hydronephrosis seen.  
URETERS are not dilated.

URINARY BLADDER is partially distended. No calculus or mass lesion seen.

Prostate is normal in size, shape and echotexture. WT-17.0gms.

There is no free fluid or abdominal lymphadenopathy seen.

**IMPRESSION:**

- **No significant visceral abnormality seen.  
Suggest clinical correlation.**



**DR NAVEEN PUGALIA**  
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Station  
 Telephone:

## EXERCISE STRESS TEST REPORT

Patient Name: Mr. Pranil, Deosthale  
 Patient ID: 028484  
 Height:  
 Weight:  
 Study Date: 20.11.2024  
 Test Type: Treadmill Stress Test  
 Protocol: BRUCE

DOB: 08.05.1990  
 Age: 34yrs  
 Gender: Male  
 Race: Indian  
 Referring Physician: Mediwheel HCU  
 Attending Physician: Dr. Vimmi Goel  
 Technician: --

**Medications:**  
 --

**Medical History:**

NIL

**Reason for Exercise Test:**

Screening for CAD

**Exercise Test Summary:**

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:07	0.00	0.00	70	120/80	
	STANDING	00:01	0.00	0.00	69		
	WARM-UP	00:04	0.00	0.00	67		
EXERCISE	STAGE 1	03:00	1.70	10.00	111	120/80	
	STAGE 2	03:00	2.50	12.00	130	130/80	
	STAGE 3	01:32	3.40	14.00	166		
RECOVERY		01:00	0.00	0.00	93	140/80	
		02:00	0.00	0.00	74	120/80	
		00:41	0.00	0.00			

The patient exercised according to the BRUCE for 7:31 min:s, achieving a work level of Max. METS: 10.10. The resting heart rate of 72 bpm rose to a maximal heart rate of 166 bpm. This value represents 89% 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:**

TMT is negative for inducible ischemia.

  
**Dr. VIMMI GOEL**  
 MBBS, MD  
 Sr. Consultant-Non Invasive Cardiology  
 Reg.No.: 2014/01/0113

34 Years

MR PRANIL DEOSTHALE  
Male

20-Nov-24 11:21:35 AM  
KIMS-KINGSWAY HOSPITALS

PBC DEPT.

Rate	58	Sinus rhythm	.....	Normal P axis, V-rate	50-99
PR	125	Baseline wander in lead(s) V2	.....		
QRSD	95				
QT	392				
QTc	386				

--AXIS--  
P 57  
QRS 55  
T 36  
12 Lead; Standard Placement

- NORMAL ECG -

Unconfirmed Diagnosis



Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV  
F 50 ~ 0.50-150 Hz W 100B CL P?

PHILIPS

REORDER # M2183A