



33799 080325

Registration ID : 33799	Sample Collection : 08/03/2025 09:26:21
Name : MR. ANKUSH BHOSALE	Sample Received : 08/03/2025 09:26:21
Age/Sex : 49 Yrs. / M	Printed : 11/03/2025 15:20:01
Ref. By : BANK OF BARODA	Report Released : 09/03/2025 10:16:46
Sent By : Arcofemi Healthcare Pvt Ltd	

COMPLETE BLOOD COUNT *

Test	Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	: 12.6	g/dL	13-18 g/dL
Total RBC (Electrical Impedence)	: 4.26	10 ⁶ /μL	3.0-6.0 10 ⁶ /μL
Hematocrit (PCV) (Calculated)	: 39.2	%	36-54 %
Mean Corpuscular Volume (MCV) (calculated)	: 92.0	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	: 29.6	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated)	: 32.1	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	: 14.00	%	12-15 %
Total Leucocytes Count (Light Scattering)	: 6410	/cumm	4000-11000 /cumm
Neutrophils (Calculated)	: 66	%	40-75 %
Eosinophils Percentage (Calculated)	: 02	%	1-6 %
Lymphocyte Percentage (Calculated)	: 28	%	20-45 %
Basophils Percentage (Calculated)	: 0	%	0-1 %
Monocytes Percentage (Calculated)	: 04	%	1-10 %
RBC Morphology	: Normocytic, Normochromic		
WBC Morphology	: Normal Morphology		
Platelet Count (Electrical Impedence)	: 312000	/ul	150000-450000 /ul
Platelets on Smear	: Adequate		Adequate
E.S.R	: 14	mm at 1hr	0-20 mm at 1hr

Sample Type: EDTA whole blood (Westergren)

Sample Type : EDTA Whole Blood

Test done with THREE PART CELL COUNTER (Sysmex KX-21)

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 09:26:21, Received At: 08/03/2025 09:26:21, Reported At: 09/03/2025 10:16:46)



Dr. Santosh Khairnar
Dr. Santosh Khairnar
 M.D. (Pathologist)
 Reg. No.-
 2000/08/2926





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



NABL MELT-00683

Dr. Santosh Khairnar
Dr. Santosh Khairnar
M.D. (Pathologist)
Reg. No.-
2000/08/2926





33799 080325

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Age/Sex : 49 Yrs. / M	Printed : 11/03/2025 15:20:01
Ref. By : BANK OF BARODA	Report Released : 10/03/2025 16:44:58
Sent By : Arcofemi Healthcare Pvt Ltd	

Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

Test	Result	Unit	Biological Ref. Range
GLUCOSE (SUGAR) FASTING, (Fluoride Plasma Used)	: 97	mg/dL	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl
<i>Method: GOD-POD</i>			
GLUCOSE (SUGAR) PP, (Fluoride Plasma Used)	: 79	mg/dl	Non-Diabetic: < 140 mg/dl 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 09:26:21, Received At: 08/03/2025 09:26:21, Reported At: 10/03/2025 16:44:58)

HbA1c (Whole Blood)

Test	Result	Unit	Reference Range
HbA1C-Glycosylated Haemoglobin	: 5.30	%	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)	: 105.41	mg/dl	65.1-136.3 mg/dL mg/dl
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EDTA Whole Blood, Method: Calculated

Interpretation:

- 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.
- HbA1c has been endorsed by clinical groups and ADA (American Diabetes Association) 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.
- To estimate the eAG from the HbA1c value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$.
- 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 09:26:21, Received At: 08/03/2025 09:26:21, Reported At: 09/03/2025 10:16:50)



Signature
Dr. Santosh Khairnar
 M.D. (Pathologist)
 Reg. No.-
 2000/08/2926





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BLOOD GROUP


Test	Result	Unit	Biological Ref. Range
Blood Group	: 'B' Rh POSITIVE		

Slide and Tube Agglutination Test

(Collected At: 08/03/2025 09:26:21, Received At: 08/03/2025 09:26:21, Reported At: 09/03/2025 10:15:47)

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




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2000/08/2926





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Age/Sex : 49 Yrs. / M	Printed : 11/03/2025 15:20:01
Ref. By : BANK OF BARODA	Report Released : 09/03/2025 10:17:37
Sent By : Arcofemi Healthcare Pvt Ltd	

LIPID PROFILE

Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: 171	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
<i>Serum, Method: CHOD-PAP</i>			
S. Triglyceride	: 70	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
<i>Serum, Method: GPO-Trinder</i>			
HDL Cholesterol	: 42	mg/dl	35.3-79.5 mg/dl
<i>serum,Direct method</i>			
LDL Cholesterol	: 115.00	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
<i>Serum, (Calculated)</i>			
VLDL Cholesterol	: 14.0	mg/dl	5-30 mg/dl
<i>Serum, Method: Calculated</i>			
LDL/HDL Ratio	: 2.7		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
<i>Serum, Method: Calculated</i>			
TC/HDL Ratio	: 4.1		Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0
<i>Serum, Method: Calculated</i>			

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*

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Dr. Santosh Khairnar
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Report Released : 09/03/2025 10:17:15

Ref. By : BANK OF BARODA

Sent By : Arcofemi Healthcare Pvt Ltd

LIVER FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total) <i>Serum, Method: Diazo (walter & Gerarde)</i>	: 0.39	mg/dl	0-2.0 mg/dl
S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter & Gerarde)</i>	: 0.22	mg/dl	0-0.4 mg/dl
S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i>	: 0.17	mg/dl	0.10-1.0 mg/dl
Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i>	: 22.0	IU/L	0-35 IU/L
Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i>	: 16.0	IU/L	0-45 IU/L
S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i>	: 72	IU/L	53-128 IU/L
Total Proteins <i>Serum, Method: Biuret</i>	: 6.9	gm/dl	6.4-8.3 gm/dl
S. Albumin <i>Serum, Method: BCG</i>	: 4.1	gm/dl	3.5-5.2 gm/dl
S. Globulin <i>Serum, Method: Calculated</i>	: 2.8	gm/dl	2.3-3.5 gm/dl
A/G Ratio <i>Serum, Method: Calculated</i>	: 1.46		0.90-2.00
Gamma GT <i>Serum, Method: G glutamyl carboxy nitroanilide</i> <i>Test Done on - Automated Biochemistry Analyzer (EM 200).</i>	: 21	U/L	0-55 U/L

*All Samples Processed At Excellas Clinics Mulund Centre .

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Dr. Santosh Khairnar
Dr. Santosh Khairnar
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 2000/08/2926





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Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

BLOOD UREA NITROGEN (BUN)

Test	Result	Unit	Biological Ref. Range
Urea	: 23.11	mg/dl	19-45 mg/dl

Serum, Method: Urease - GLDH

Blood Urea Nitrogen : 10.80 mg/dl 5-18 mg/dl

*Test Done on - Automated Biochemistry Analyzer (EM 200)***All Samples Processed At Excellas Clinics Mulund Centre**(Collected At: 08/03/2025 09:26:21, Received At: 08/03/2025 09:26:21, Reported At: 09/03/2025 10:16:22)***SERUM CREATININE**

Test	Result	Unit	Biological Ref. Range
S. Creatinine	: 0.83	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 09:26:21, Received At: 08/03/2025 09:26:21, Reported At: 09/03/2025 10:16:27)***SERUM URIC ACID**

Test	Result	Unit	Biological Ref. Range
S. Uric Acid	: 5.40	mg/dl	3.5-7.2 mg/dl

*Serum, Method: Uricase - POD**Test Done on - Automated Biochemistry Analyzer (EM 200).**(Collected At: 08/03/2025 09:26:21, Received At: 08/03/2025 09:26:21, Reported At: 09/03/2025 10:16:12)*

Dr. Santosh Khairnar
Dr. Santosh Khairnar
M.D. (Pathologist)
Reg. No.-
2000/08/2926





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BUN CREAT RATIO (BCR)

Test	Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	: 13.01		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 09:26:21, Received At: 08/03/2025 09:26:21, Reported At: 09/03/2025 10:16:33)

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




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2000/08/2926





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Age/Sex : 49 Yrs. / M	Printed : 11/03/2025 15:20:01
Ref. By : BANK OF BARODA	Report Released : 09/03/2025 10:16:04
Sent By : Arcofemi Healthcare Pvt Ltd	

THYROID FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
Total T3	: 1.2	ng/dl	0.70-2.04 ng/dl
<i>Serum, Method: CLIA</i>			
Total T4	: 6.32	µg/dl	5.1-14.1 µg/dl
<i>Serum, Method: CLIA</i>			
TSH (Thyroid Stimulating Hormone)	: 1.07	µIU/ml	0.27-5.3 µIU/ml
<i>Serum, Method: CLIA</i>			

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 09:26:21, Received At: 08/03/2025 09:26:21, Reported At: 09/03/2025 10:16:04)

PROSTATE SPECIFIC ANTIGEN

Test	Result	Unit	Biological Ref. Range
PSA - TOTAL	: 1.40	ng/ml	0- 4 ng/ml
<i>Serum, Method: CLIA</i>			

NOTE :

Prostate specific antigen is a seminal fluid protein produced by normal and malignant epithelial cells of prostate gland and is recognized as a tumour marker for evaluation of prostate cancer activity.

In normal individuals, S.PSA levels do not exceed 4.0 ng/ml.

S.PSA level is useful in detection of cancer of prostate gland and in detection of recurrence of prostate cancer after radical prostatectomy. Serum PSA levels may also be elevated in conditions like BPH, UTI, Digital rectal examination, Transurethral ultrasonography. Confirmation of prostate cancer can be done by transrectal ultrasonography and prostate biopsy.

(Collected At: 08/03/2025 09:26:21, Received At: 08/03/2025 09:26:21, Reported At: 09/03/2025 10:17:23)

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



Dr. Santosh Khairnar
Dr. Santosh Khairnar
 M.D. (Pathologist)
 Reg. No.-
 2000/08/2926





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Age/Sex : 49 Yrs. / M	Printed : 11/03/2025 15:20:01
Ref. By : BANK OF BARODA	Report Released : 09/03/2025 08:30:21
Sent By : Arcofemi Healthcare Pvt Ltd	

EXAMINATION OF URINE

Test	Result	Unit	Biological Ref. Range
<u>PHYSICAL EXAMINATION</u>			
Quantity :	30	ml	
Colour :	Pale yellow		
Appearance :	Clear		
Reaction (pH) :	5.0		4.5 - 8.0
Specific Gravity :	1.010		1.010 - 1.030
<u>CHEMICAL EXAMINATION</u>			
Protein :	Absent		Absent
Glucose :	Absent		Absent
Ketones Bodies :	Absent		Absent
Occult Blood :	Absent		Absent
Bilirubin :	Absent		Absent
Urobilinogen :	Absent		Normal
<u>MICROSCOPIC EXAMINATION</u>			
Epithelial Cells :	1 - 2	/ hpf	
Pus cells :	2 - 3	/ hpf	
Red Blood Cells :	Absent	/ hpf	
Casts :	Absent	/ lpf	Absent / lpf
Crystals :	Absent		Absent
<u>OTHER FINDINGS</u>			
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 09:26:21, Received At: 08/03/2025 09:26:21, Reported At: 09/03/2025 08:30:21)

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



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Report Released : 11/03/2025 15:14:18

Ref. By : BANK OF BARODA

Sent By : Arcofemi Healthcare Pvt Ltd

X RAY CHEST PA VIEW

Right basal congestion.

Rest of 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:

Right basal congestion.

(Collected At: 08/03/2025 09:26:21, Received At: 08/03/2025 09:26:21, Reported At: 11/03/2025 15:14:18)

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



Dr. Reshma Gokran
MD (Radiologist)
Reg. No-
2009/09/3296





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Ref. By : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd

USG ABDOMEN & PELVIS - MALE

Liver:- is normal in size and shows normal parenchymal echogenicity. No focal or diffuse lesion is seen. The portal and hepatic veins are normal. No IHBR dilatation seen.

Gall Bladder:- is well distended. No calculus or mass lesion is seen.
No GB wall thickening or pericholecystic fluid is seen.

CBD :- is normal.

Pancreas:-is normal in size and reflectivity. No focal lesion seen.

Spleen:- is normal in size (8.4 cms) and reflectivity. No focal lesion is seen.

Kidneys:- Both Kidneys are normal in size, shape, position. They show normal reflectivity. CMD is maintained. No calculi or hydronephrosis seen on either side.

Right kidney – 10.0 x 4.3 cms

Left kidney – 10.0 x 4.4 cms

Urinary Bladder:- is well distended and shows normal wall thickness.
No intraluminal lesion seen.

Prostate:- is normal in size, reflectivity and measures 3.1 x 3.2 x 3.3 cms
(Volume – 18 cc). No focal lesions.

No ascites is seen. No significant lymphadenopathy is seen.

IMPRESSION:

- **No significant abnormality is seen.**

Thanks for the Referral

(Collected At: 08/03/2025 09:26:21, Received At: 08/03/2025 09:26:21, Reported At: 11/03/2025 15:16:02)

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



Dr. Reshma Gokran
MD (Radiologist)
Reg. No-
2009/09/3296





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OPHTHALMIC EVALUATION

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

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



MEDICAL EXAMINATION REPORT

Name	Mr./ Mrs./ Miss	Ankush Bhosale	
Sex	Male / Female		
Age (yrs.)	49	UHID :	
Date	/ / 20	Bill No :	
Marital Status	Single / Married / Widow / Widower :		
	No. of Children : 2		
Present Complaints	NO		
Past Medical History :	NO		
Surgical History :			
Personal History	Diet : Veg <input type="checkbox"/> / Mixed <input checked="" type="checkbox"/> : Addiction : Smoking <input type="checkbox"/> / Tobacco Chewing <input type="checkbox"/> / Alcohol <input type="checkbox"/> : 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		
	NO		
History of Allergies	Drug Allergy Any Other		
	NO		
History of Medication	For HT / DM / HD / Hypothyroidism Any Other		
	NO		
On Examination (O/E)	G. E. : normal R. S. : normal C. V. S. : S1 & 2 @ C. N. S. : normal P/A : soft Any Other Positive Findings : NO		

Height 166 / cms	Weight 67.6 Kgs	BMI 24.5
Pulse (per min.) 86	Blood Pressure (mm of Hg) 138/90	
Gynaecology		
Examined by	Dr.	
Complaint & Duration		
Other Symptoms (Mict, bowels etc)		
Menstrual History	Menarche _____ Cycle _____ Loss _____ Pain _____ I.M.B. _____ P.C.B. _____ L.M.P. _____ Vaginal Discharge _____ Cx. Smear _____ Contraception _____	
Obstetric History		
Examination :		
Breast		
Abdomen		
P.S.		
P.V.		
Gynaecology Impression & Recommendation		
Recommendation		
Physician Impression	EXCELLAS CLINICS PVT. LTD B-1, Vikas Trade Centre Commercial, Below Axis Bank, LBS Marg, Near Santosh Mata Mandir, Mulund (West), Mumbai - 400080.	
Examined By :	- Overweight = To Reduce Weight - Underweight = To Increase Weight	

Ref.By : BOB

Protocol : BRUCE

Medication : NIL

History : NIL

Stage	Time (Min:Sec)	Phase	Speed (mph)	Grade (%)	METs	H.R. (bpm)	E.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine					1.0	74	130/80	96	-	
Standing					1.0	74	130/80	96	-	
HV					1.0	77	130/80	100	-	
ExStart					1.0	71	130/80	92	-	
Stage 1	3:00	3:01	1.7	10.0	4.7	117	140/90	163	-	
Stage 2	3:00	6:01	2.5	12.0	7.1	125	150/90	187	-	
PeakEx	0:15	6:16	3.4	14.0	7.4	141	150/90	211	-	
Recovery	1:00		0.0	0.0	1.2	107	160/90	171	-	
Recovery	2:00		0.0	0.0	1.0	66	150/90	99	-	
Recovery	3:00		0.0	0.0	1.0	61	150/90	91	-	
Recovery	3:05		0.0	0.0	1.0	69	150/90	103	-	

Findings :

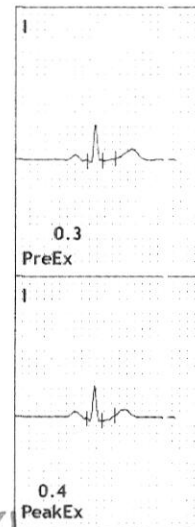
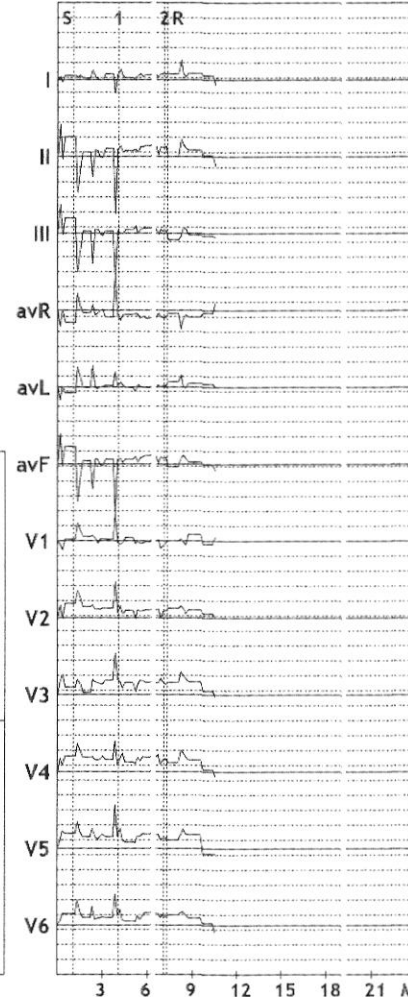
Exercise Time : 6:16 minutes
 Max HR attained : 141 bpm 82% of Max Predictable HR 171
 Max BP : 150/90(mmHg)
 WorkLoad attained : 7.4 (Fair Effort Tolerance)
 No significant ST segment changes noted during exercise or recovery.
 No Angina/Arrhythmia/S3/murmur
 Final Impression : Test is negative for inducible ischaemia.
 Maximum Depression: 2:49

Mansu

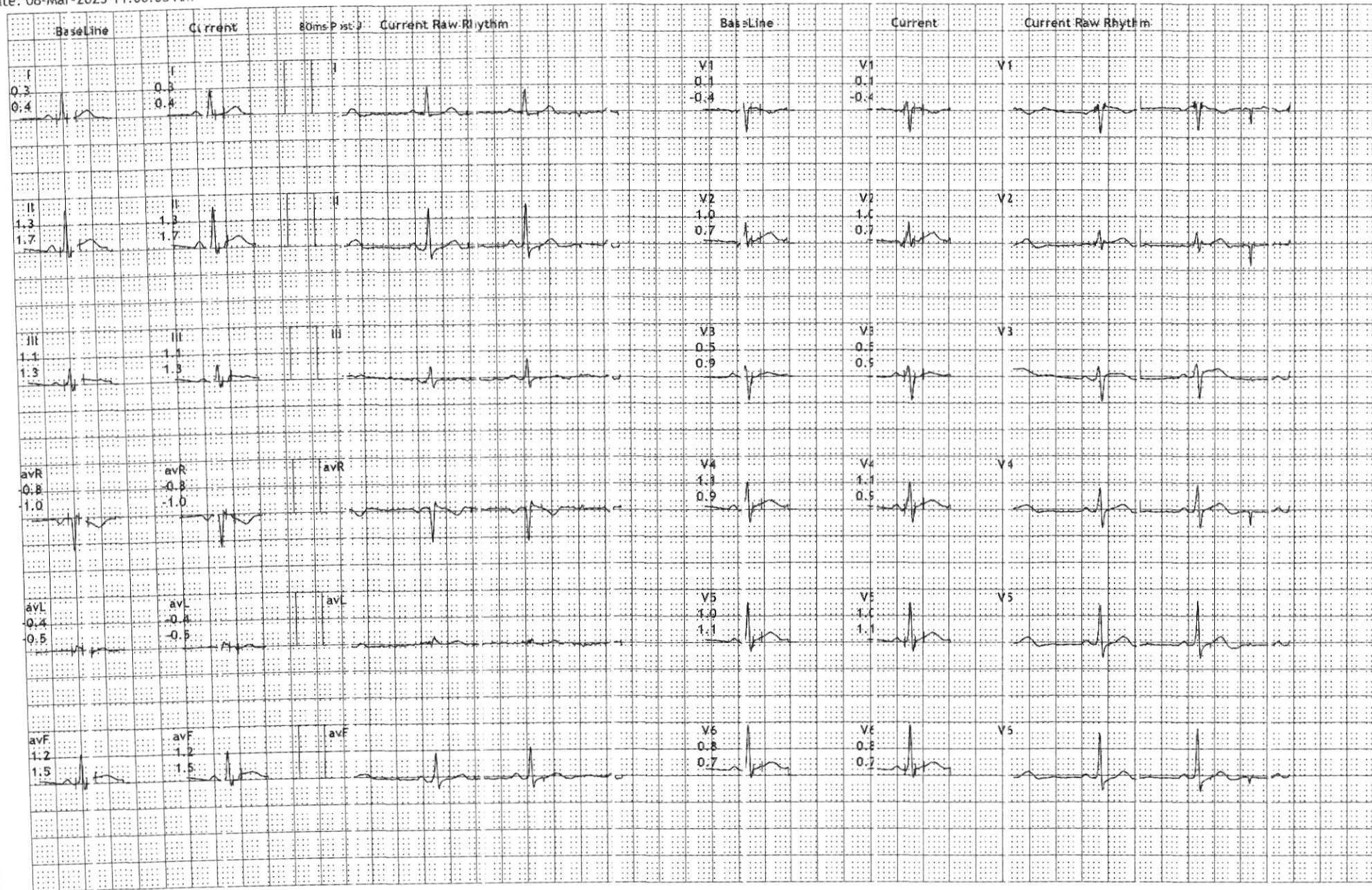
DR. MANSI SOLANKI
 MBBS MD GENERAL MEDICINE
 REG. NO. MMC 2024042065

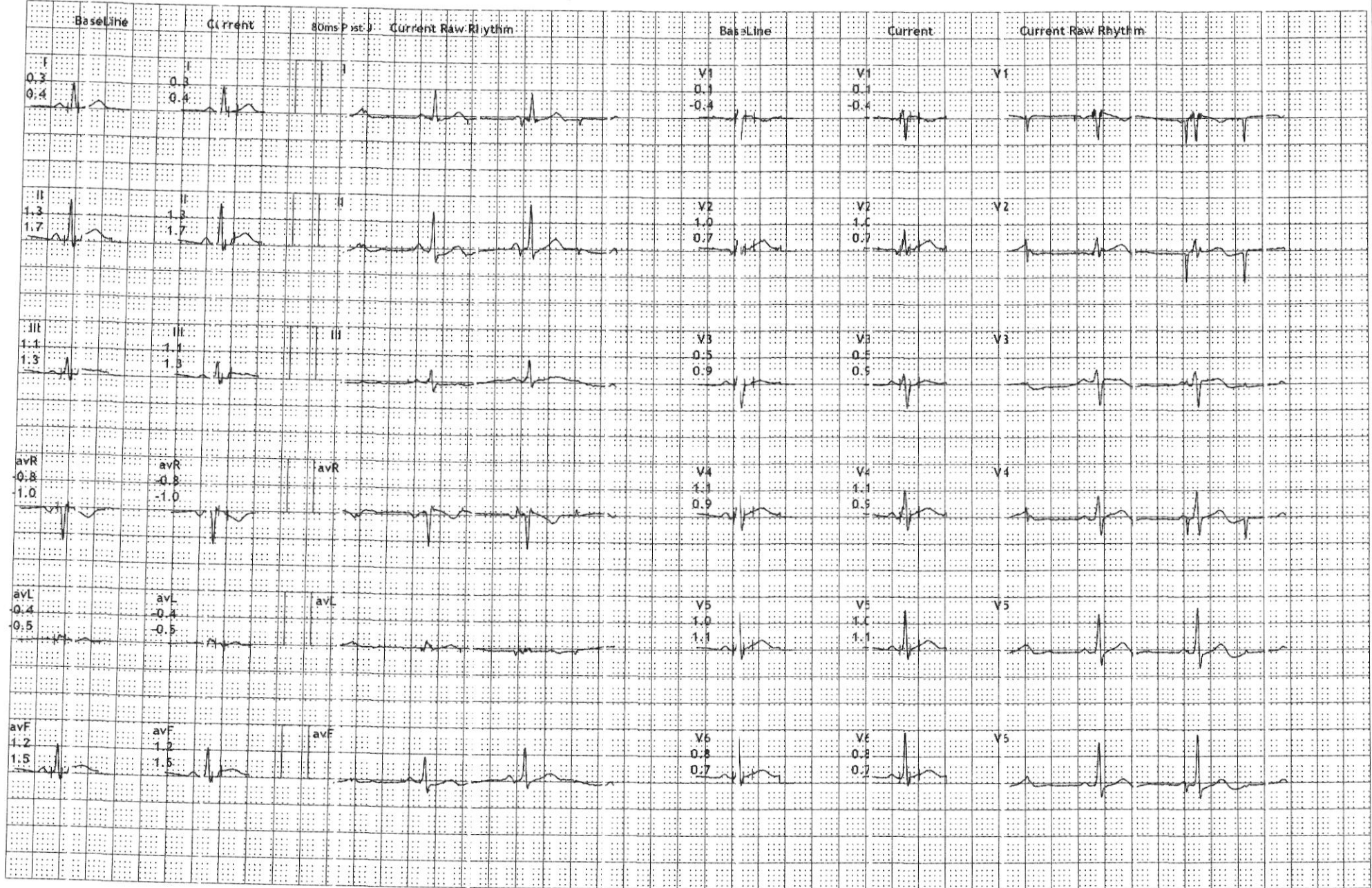
STL

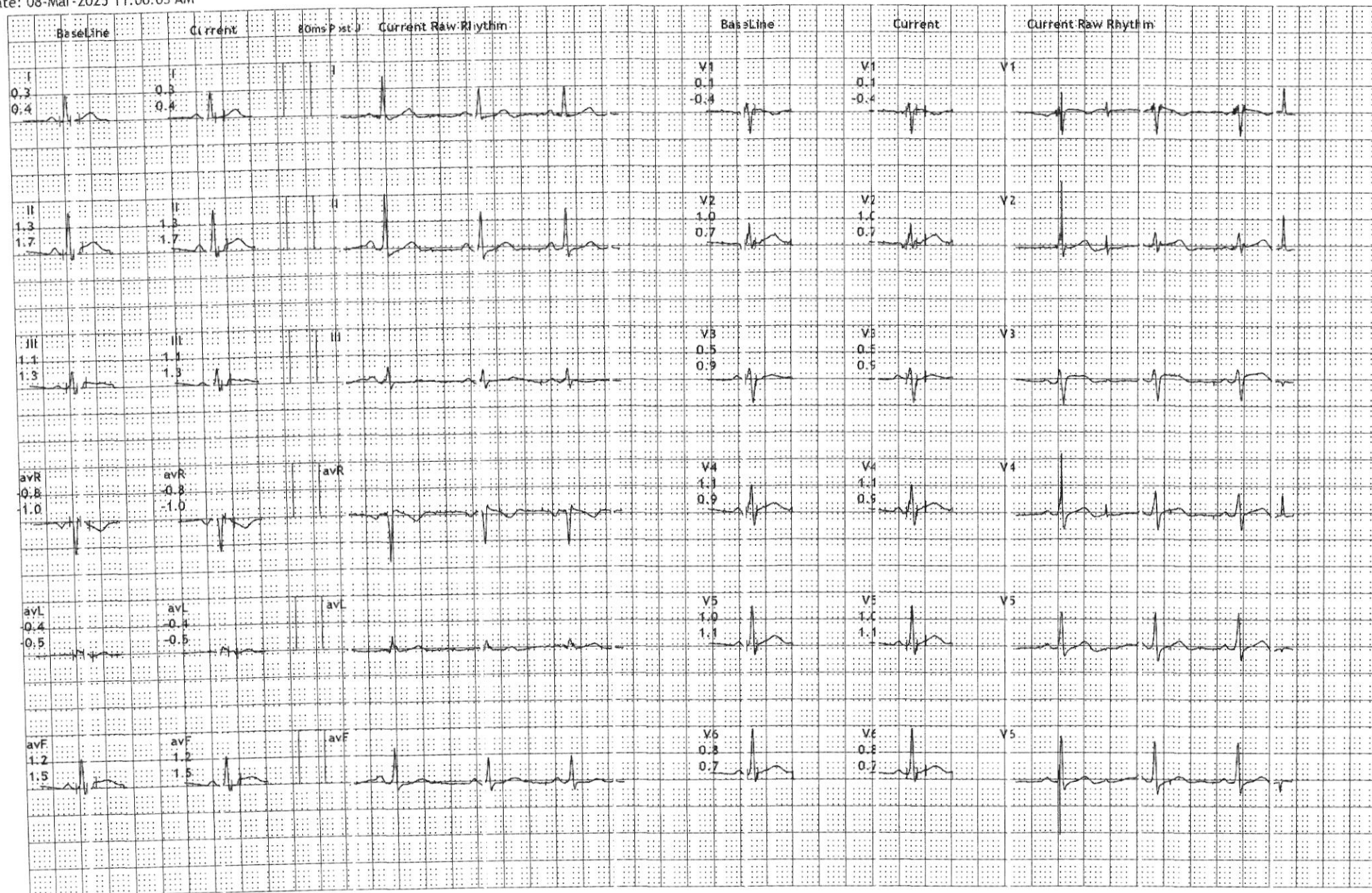
1 mm/Div

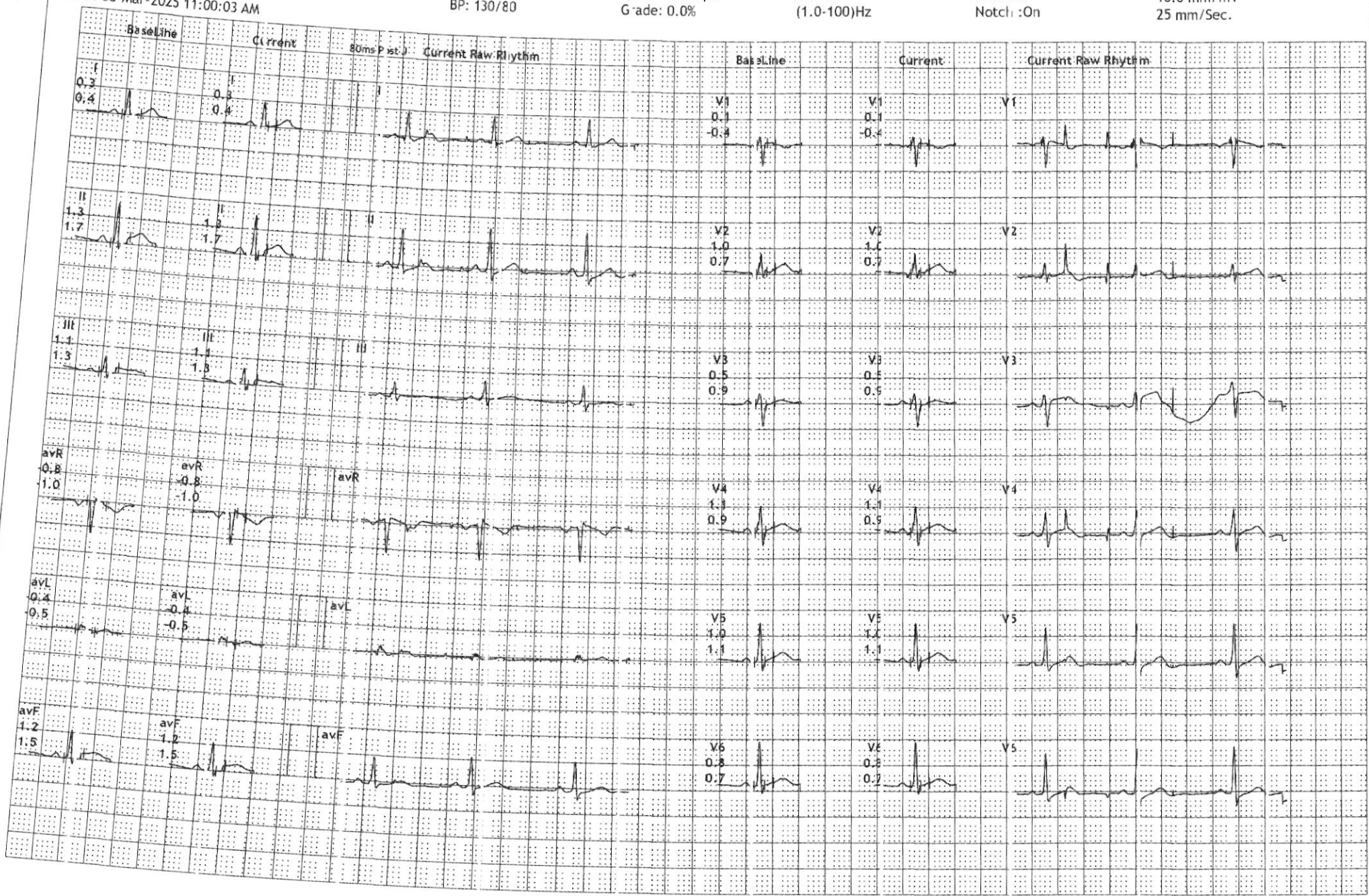


Advice/Comments:









Excellas Clinics Pvt Ltd
 B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai
 730/ANKUSH BHOSALE
 49 Yrs/Male
 67 Kg/166 Cms
 Date: 08-Mar-2025 11:00:03 AM

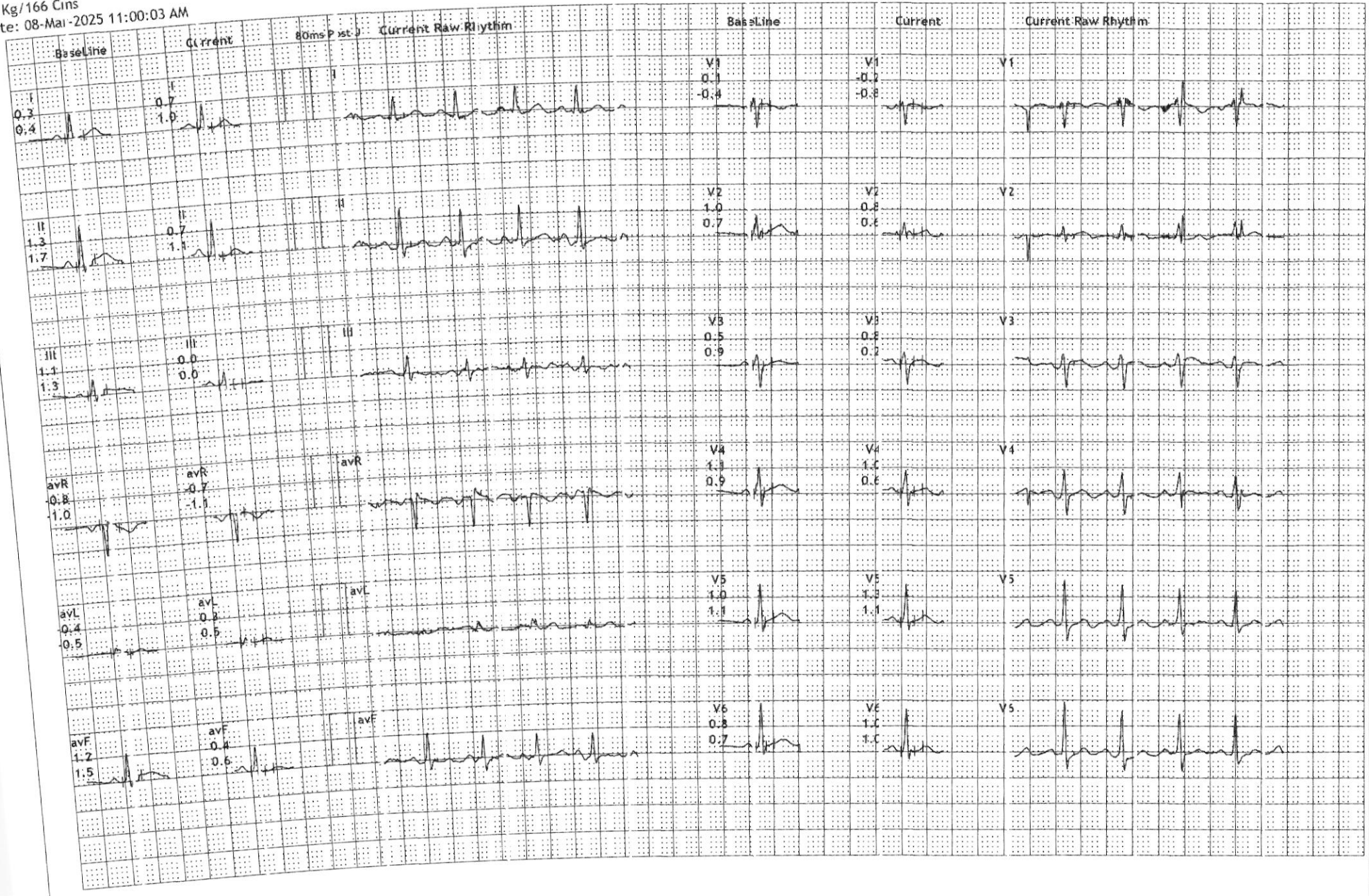
HR: 117 bpm
 METS: 4.7
 BP: 140/90

M²HR: 68% of 171
 Speed: 1.7 mph
 Grade: 10.0%

Raw ECG
 BRUCE
 (1.0-100)Hz

Ex Time 03:00
 BLC : On
 Notch : On

Stage 1 (03:00)
 10.0 mm/mV
 25 mm/Sec.





B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai
 730/ANKUSH BHOSALE
 49 Yrs/Male
 67 Kg/166 Cms
 Date: 08-Mar-2025 11:00:03 AM

HR: 141 bpm
 METS: 7.4
 BP: 150/90

MHR: 82% of 171
 Speed: 3.4 mph
 Grade: 14.0%

Raw ECG
 BRUCE
 (1.0-100)Hz

Ex Time 06:15
 BLC : On
 Notch : On

PeakEx
 10.0 mm/mV
 25 mm/Sec.



Excellas Clinics Pvt Ltd

B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai
730/ANKUSH BHOSALE

49 Yrs/Male
67 Kg/166 Cms

Date: 08-Mar-2025 11:00:03 AM

HR: 107 bpm
METS: 1.1
BP: 160/90

M:HR:62% of 171
Speed: 0.0 mph
Grade: 0.0%

12 Lead + Comparison

Raw ECG
BRUCE
(1.0-100)Hz

Ex Time 06:15
BLC : On
Notch : On

Recovery : (01:00)
10.0 mm/mV
25 mm/Sec.



HR: 66 bpm

METS: 1.0

BP: 150/90

MHR: 38% of 171

Speed: 0.0 mph

Grade: 0.0%

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 06:15

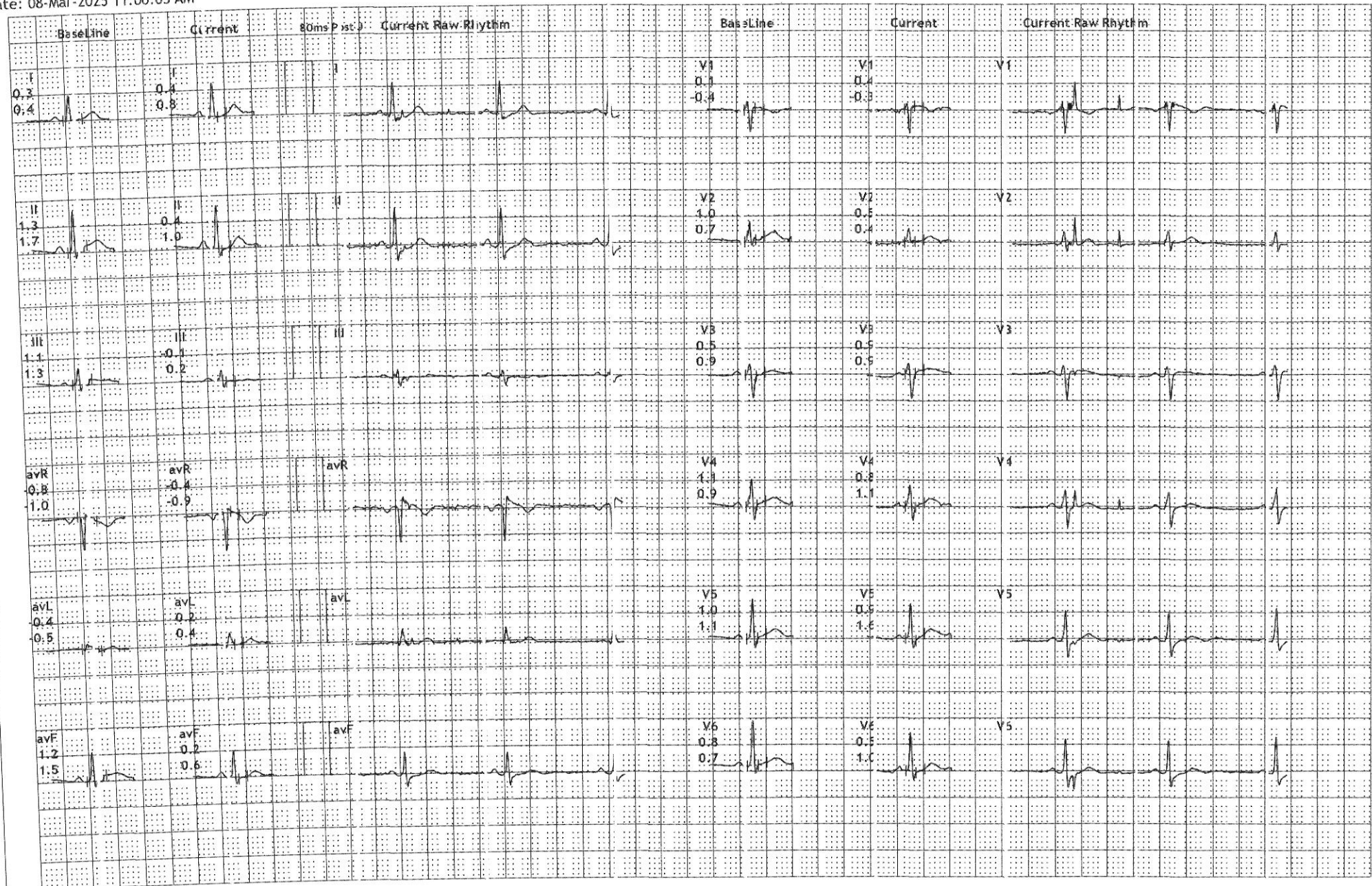
BLC : On

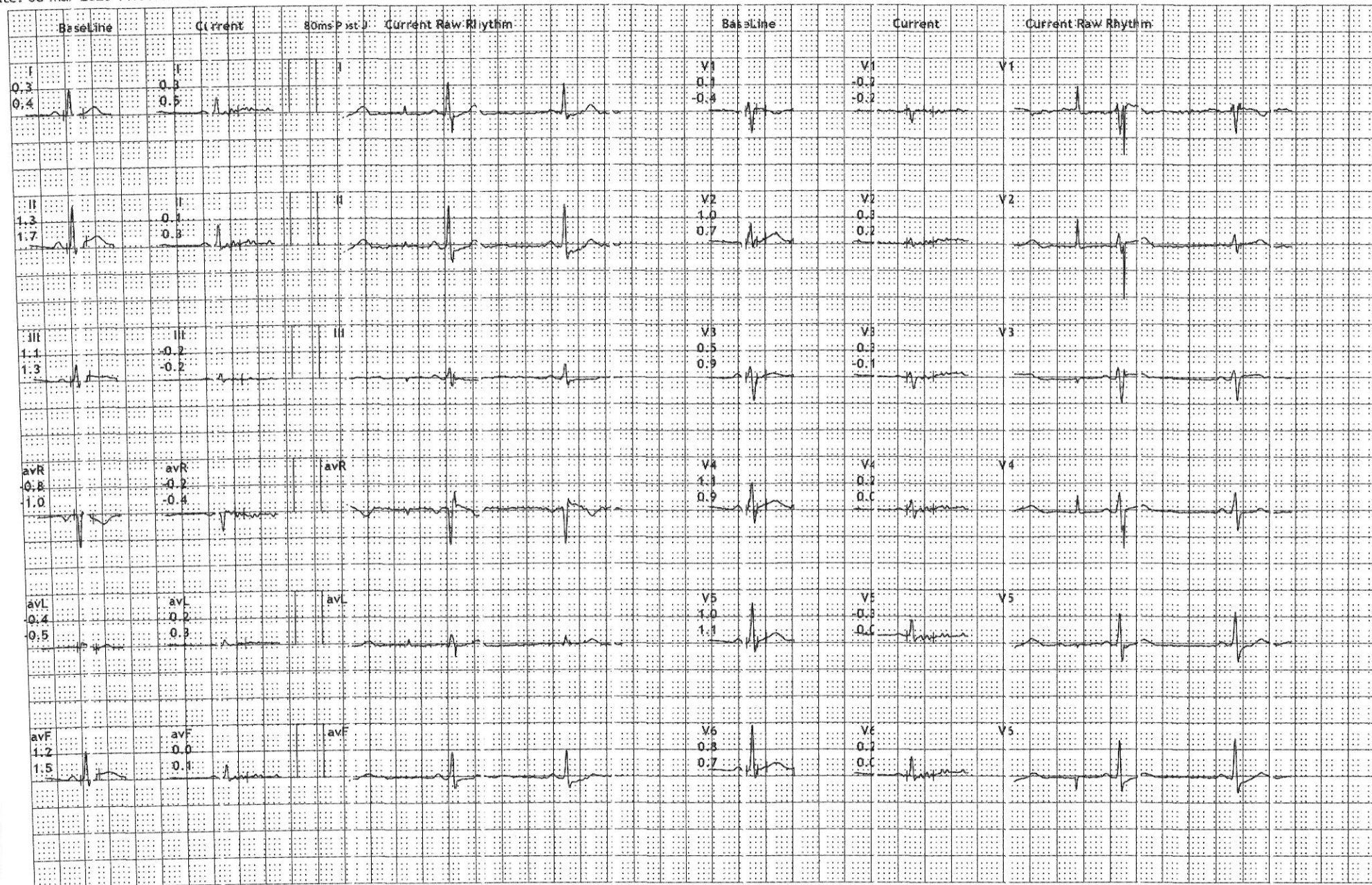
Notch : On

Recovery : (02:00)

10.0 mm/mV

25 mm/Sec.





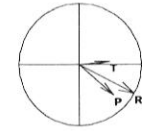
Excellas Clinics Pvt Ltd

B-1, Vikas Paradise Com, LBS Marg, Mulund W, Mumbai - 400080

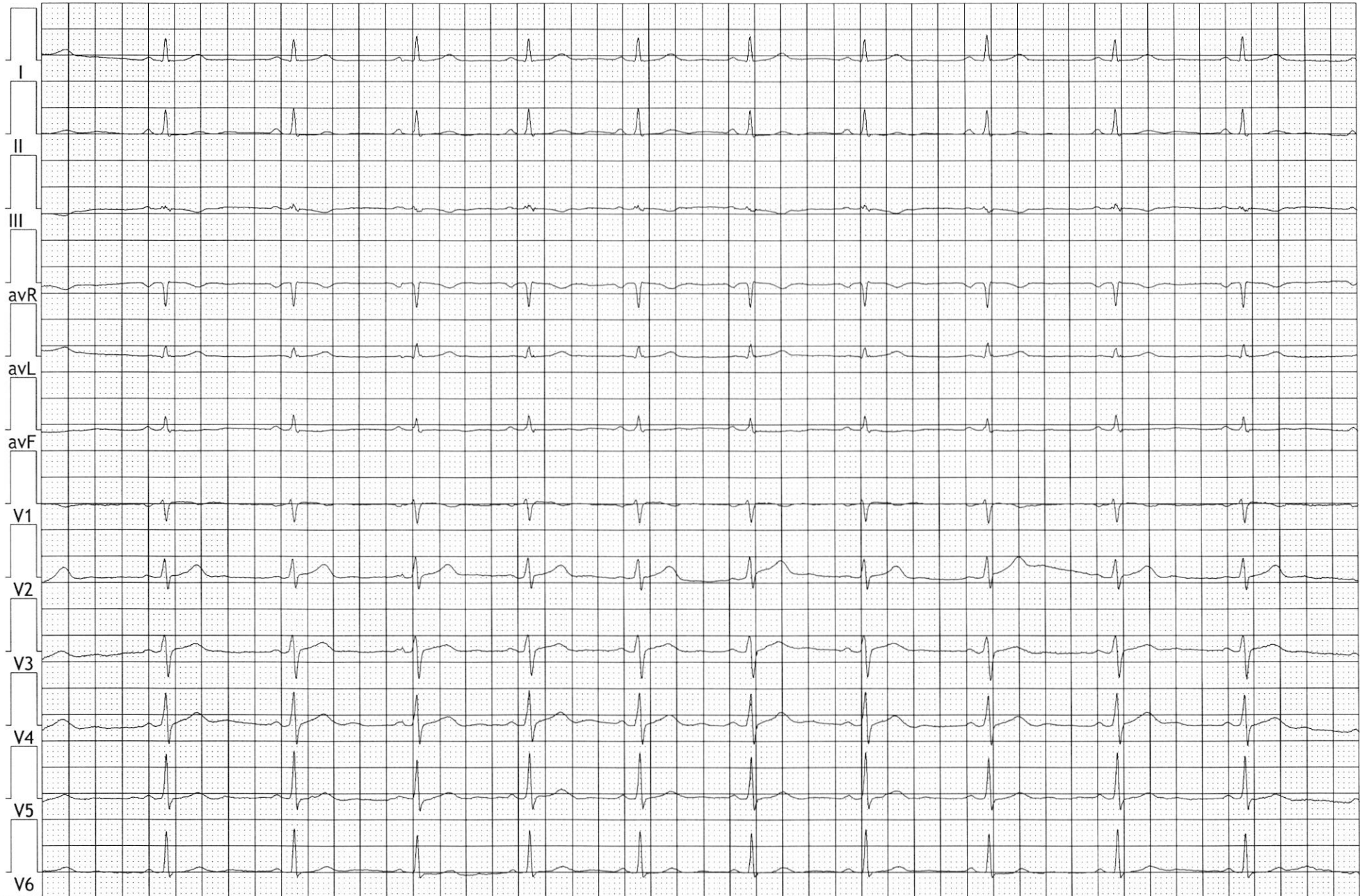
44530/Ankush Bhosale 49Yrs/Male Kgs/ Cms BP: ___/___ mmHg

Ref.: Test Date: 08-Mar-2025(09:44:04) Notch: 50Hz 0.05Hz - 100Hz 10mm/mV 25mm/Sec

HR: 65 bpm



PR Interval: 152 ms
QRS Duration: 86 ms
QT/QTc: 368/386ms
P-QRS-T Axis: 41 - 28 - -7 (Deg)



As per M
corroborate clinically

DR. ...
MBBS MD General Medicine
REG. NO. MRC 2024042065