 **GPS Map Camera**

Bhilai, Chhattisgarh, India
Shastri Market, Uttam Talkies, Power House Flyover,
Janjiri, Bhilai, Chhattisgarh 490001, India
Lat 21.206247° Long 81.374505°
23/11/24 02:42 PM GMT +05:30



Google



ଭାରତ ସରକାର
Government of India

ଭାରତୀୟ ବିଶିଷ୍ଟ ପରିଚୟ ପ୍ରାଧିକରଣ
Unique Identification Authority of India

ନାମାଙ୍କନ କ୍ରମ / Enrolment No.: 0000/00567/02067

To
ମି.ମି. ନାଗେଶ୍ୱର
Mitaran Nageshwar
Qr. No. 30 C
Street no. 00
Sector Ruabandha
CMC Centre Bhalai
Durg Chhattisgarh - 490006
9753805886



Signature valid



ଆପଣଙ୍କ ଆଧାର ବ୍ୟାଙ୍କ / Your Aadhaar No. :

6443 9804 3921

VID : 9158 8312 7292 5455

ମୋ ଆଧାର, ମୋ ପରିଚୟ



ନାମାଙ୍କନ କ୍ରମ
Mitaran Nageshwar
ପୂର୍ଣ୍ଣ ନାମ / DOB: 20/03/1988
ପୁରୁଷ / MALE

6443 9804 3921

VID : 9158 8312 7292 5455

ମୋ ଆଧାର, ମୋ ପରିଚୟ



ସୂଚନା

- ଆଧାର ପରିଚୟର ପ୍ରମାଣ ଅଟେ, ନାଗରିକତାର ଦୃଢ଼ି ।
- ପୁରୁଣା କ୍ରମାଙ୍କୁ ବୋଧ / ଅପରାଧର ଏହାପାଇଁ ଆଧାରର ପ୍ରମାଣାବଳୀ ବ୍ୟବହାର କରି ପରିଚୟ ପାଠ୍ୟ ନକରୁ ।
- ଏହା ଇଲେକଟ୍ରୋନିକ୍ ପଦ୍ଧତୀ ଦ୍ୱାରା ଗଠିତ ନିରାପତ୍ତ ହୋଇ ଅଟେ ।

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.

- ଆଧାର ସାରା ଦେଶପାଇଁ ବୈଧ ଅଟେ ।
- ଆଧାର ବିଶିଷ୍ଟ ସରକାରୀ ଏବଂ ବେସରକାରୀ ସେବାଗୁଡ଼ିକୁ ସହଜରେ ପାଳିବାରେ ସାହାଯ୍ୟ କରିଥାଏ ।
- ଆଧାରରେ ଆପଣଙ୍କ ନାମାଙ୍କନ ନମ୍ବର ଏବଂ ଇ-ମେଲ ଆଇଡି ଅପଡେଟ୍ କରନ୍ତୁ ।
- ଏହି ଆଧାର ଆପଣଙ୍କ ବ୍ୟବହାର କରି ଆଧାରକୁ ଆପଣଙ୍କ ସ୍ମାର୍ଟ ଫୋନ୍‌ରେ ରଖନ୍ତୁ ।

- Aadhaar is valid throughout the country.
- Aadhaar helps you avail various Government and non-Government services easily.
- Keep your mobile number & email ID updated in Aadhaar.
- Carry Aadhaar in your smart phone – use mAadhaar App.



ଭାରତୀୟ ବିଶିଷ୍ଟ ପରିଚୟ ପ୍ରାଧିକରଣ
Unique Identification Authority of India



ଠିକଣା:
ପ୍ଲଟ ନଂ ୩୦ ଟି, ସ୍ଟ୍ରିଟ ନଂ ୦୦, ଚେନ୍ନାଇ
ସେକ୍ଟର ରୁଆବନ୍ଧା, ଇସିସି ସେଣ୍ଟର ବିହାଲ, ଦୁର୍ଗ,
ଚିତ୍ତୀଶଗର - 490006

Address:
Qr. No. 30 C, Street no. 00, Sector
Ruabandha, CMC Centre Bhalai, Durg,
Chhattisgarh - 490006



6443 9804 3921

VID : 9158 8312 7292 5455

1827 | help@uidai.gov.in | www.uidai.gov.in

M. Nageshwar

9753805886



ଭାରତ ସରକାର
Government of India

ଭାରତୀୟ ବିଶିଷ୍ଟ ପରିଚୟ ପ୍ରାଧିକରଣ
Unique Identification Authority of India

ନମାସ୍କରଣ କ୍ରମ/Enrolment No.: 0000/00567/02067

To
Mizram Nageshwar
Qr. No. 30 C
Street no. 00
Sector Ruabandha
Civic Centre Bhalai
Durg Chhattisgarh - 490006
9753805886



Signature valid



ଆପଣଙ୍କ ଆଧାର ସଂଖ୍ୟା / Your Aadhaar No. :

~~XXXXXXXXXXXX~~ 3921
VID : 9158 8312 7292 5455

ମୋ ଆଧାର, ମୋ ପରିଚୟ



ଭାରତ ସରକାର
Government of India



ନାମ
Mizram Nageshwar
ଜନ୍ମ ତାରିଖ/DOB: 20/03/1989
ଲିଙ୍ଗ/ GENDER: MALE

Issue Date: 20/11/2011

~~XXXXXXXXXXXX~~ 3921
VID : 9158 8312 7292 5455

ମୋ ଆଧାର, ମୋ ପରିଚୟ



Government of India



ସୂଚନା

- ଆଧାର ପରିଚୟ ପ୍ରମାଣ ଅଟେ, ନାଗରିକତା ପ୍ରମାଣ ନୁହେଁ ।
- ପୁରୁଣା ସ୍ୱାଧୀନ ଭାବେ / ଅପରାଧର ଫଳସ୍ୱରୂପ / ଅନିଚ୍ଛାକୃତ ଭାବେ ପ୍ରମାଣିତ ହୋଇଥିବା ବ୍ୟକ୍ତିଙ୍କ ପରିଚୟ ପ୍ରମାଣ ନୁହେଁ ।
- ଏହା ଇଲେକ୍ଟ୍ରୋନିକ୍ ପଦ୍ଧତି ଦ୍ୱାରା ଉତ୍ପାଦିତ କରାଯାଇଛି ଏବଂ ଏହା

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.

- ଆଧାର ଦ୍ୱାରା ଦେଶବ୍ୟାପୀ ହେବ
- ଆଧାର ବିଭିନ୍ନ ସରକାରୀ ଏବଂ ଅସରକାରୀ ସେବାଗୁଡ଼ିକୁ ସହଜରେ ପ୍ରାପ୍ତ କରିବାକୁ ସହାୟକ କରିବ
- ଆଧାରରେ ଆପଣଙ୍କ ମୋବାଇଲ ନମ୍ବର ଏବଂ ଇ-ମେଲ ଆଇଡି ଅପଡେଟ୍ କରନ୍ତୁ
- ଏହି ଆଧାର ଆପଣଙ୍କ ସ୍ମାର୍ଟ ଫୋନ୍ରେ ଆପଣଙ୍କ ଫୋନ୍ରେ ରଖନ୍ତୁ

- Aadhaar is valid throughout the country.
- Aadhaar helps you avail various Government and non-Government services easily.
- Keep your mobile number & email ID updated in Aadhaar.
- Carry Aadhaar in your smart phone – use mAadhaar App.

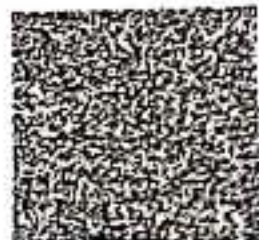


ଭାରତୀୟ ବିଶିଷ୍ଟ ପରିଚୟ ପ୍ରାଧିକରଣ
Unique Identification Authority of India



ପଠକ: ଭାରତ ସରକାର, ଭାରତ ସରକାର, ଭାରତ ସରକାର, ଭାରତ ସରକାର, ଭାରତ ସରକାର, ଭାରତ ସରକାର, ଭାରତ ସରକାର - 490006

Address:
Qr. No. 30 C, Street no. 00, Sector Ruabandha, Civic Centre Bhalai, Durg, Chhattisgarh - 490006



Vertical text on the left side of the bottom section.

~~XXXXXXXXXXXX~~ 3921
VID : 9158 8312 7292 5455

1847 | help@uidai.gov.in | www.uidai.gov.in

M. Nageshwar

9753805886



From No. LIC 03-

DIVISIONAL OFFICE, RAIPUR
HAEMOGRAM

Full Name of the life to be Assured		MR. MAITRAM NAGESHWAR	
Age	36	Sex	M
Division		Branch	381
Proposal No.	5638	Agent Code No.:	
		Dev. Officer code No.	
Introducer	Name	Designation/Club Membership	Signature (In full)
Agent			
Second Introducer			

1. Red Blood Cell Count :	4.88	(4.4-6.1 mill/cumm)	
2. Hb% :	14.7 gm%	(11-15 F; 12-18 M)	
3. Hematocrit :	47.2	(45-55%)	
4. Indices :			
(a) MCV (Mean Corpuscular Volume) :	86.4	78-92 fl	
(b) MCH (Mean Corpuscular Hb) :	27.6	26.5 pg	
(c) MCHC (Mean Corpuscular Hb Concentration) :	33.4	32-36 g/dl	
5. Morphology			
Macrocytes	Microcytes :00	Hypochromia : 00	
Poikilocytosis :	Anisocytosis :00		
6. Target Cells			
Spherocytes :	Eliptocytes :00		
7. White Blood cells			
Total Count :	7,200	4000-11000 Cell/cumm	
Differential Count :			
A) Neutrophils	63 (40-75%)	C) Eosinophils : 01 (01-06%)	E) Basophils : 00 (00-01%)
B) Lymphocytes :	30 (25-45%)	D) Monocytes : 06 (01-10%)	00
8. Platelets :	2.47	1.5-4.5 Lakh/cumm	
9. Erythrocytes Sedimentation rate :	08 mm	0 - 20mm/1hrs F; 0 - 15mm/1hrsM	
(Method Westergren method)			

I declare that the person examined/investigated, signed/affix thumb impression in the space earmarked below, in my presence and I am not related to him/her or the Agent or the Development Officer.

Dated at	Bhilai	on the	23	day of	11	2024	at	02:00W	PM
----------	---------------	--------	-----------	--------	-----------	-------------	----	---------------	-----------

Signature of Thumb Impression of L.A.



Signature of the Pathologist	Dr. A. K. Singh
Name of the Pathologist :	MBBS, MD (PATHOLOGY)
Qualification :	CGMC-5777-2014
Name & Address of the Hospital/Clinic/Lab :	Consultant Pathologist



PT.'S. NAME	MR. MAITRAM NAGESHWAR	AGE	36	YRS	GENDER	M
REF. BY	LIC (381)				PROP. NO.	5638
DATE OF SAMPLE COLLECTION	23.11.24	REPORT GENERATION DATE			23.11.24	

GLYCOSYLATED HAEMOGLOBIN

RESULT : 4.8 %

INTERPRETAION : NON DIABETICS HAVE AN AVERAGE HbA1C OF 5% WITH A RANGE OF 3-7% CRITERIA GIVEN BELOW CAN BE USED TO ASSESS DIABETICS.

<8 % : DIABETIC WITH GOOD CONTROL.

8.0 % - 9 % : DIABETIC WITH FAIR CONTROL.

ABOVE 9.0 % : DIABETIC WITH POOR CONTROL.



Dr. A. K. Singh
 MBBS, MD (PATHOLOGY)
 CGMC-5/6/2014
 Consultant Pathologist

CHECKED BY

DR. A. K. SINGH
 PATHOLOGIST

This document is not for medico legal purpose and must be co-related clinically



Form No. LIC 03 -

SPECIAL BIO-CHEMICAL TESTS – 13 (SBT – 13)

Zone:		Division:		Branch :	381
Proposal No.:	5638				
Agent D.O. Code :		Introduced by :			
Full Name of Life to be assured :		MR. MAITRAM NAGESHWAR			
Age Sex :	36	Yrs.	M		

SPECIAL BIO-CHEMISTRY TESTS-13 (SBT-13)

PARAMETER	RESULT		NORMAL RANGE
Blood Sugar (Method GOD, POD)	82.14		70-140
Total Cholesterol	192.1	mg/dl	130 - 250
HDL	38.42	mg/dl	M:30 - 70/F:30 - 85
LDL	127.3	mg/dl	100 - 150
S. Triglycerides	131.6	mg/dl	< 190
S. Creatinine	1.03	mg/dl	0.6-1.4
Blood Urea Nitrogen	20.36	mg/dl	10-40
S. Protien	6.92	mg/dl	6.0 - 8.3
Albumin	3.64	mg/dl	3.2 - 5.6
Globulin	3.28	mg/dl	2.3 - 3.5
A/G Ratio	1.10	mg/dl	1.0 - 2.2
S. Bilirubin			
Total	0.66	mg/dl	Upto 1.00
Direct	0.21	mg/dl	Upto 0.25
Indirect	0.45	mg/dl	Upto 0.75
SGOT	20.13	mg/dl	0 - 46
SGPT	24.63	mg/dl	0 - 46
GGTP (GGT)	33.26	U/L	05 - 50 U/L
S. Alkaline Phosphatase	87.63	mg/dl	42 - 128
HbsAg (Australia Antigen)	Negative		NON REACTIVE
Elisa for HIV (Method Elisa)	Negative	0.26	NON REACTIVE

I declare that the person examined signed (affixed his/her thumb impression) in the space earmarked below, in my presence and I am not related to related to him/her or the Agent or the Development Officer.

Dated at	BIHILAI	on the	23	day of	11	2024	at	02:00	PM
----------	---------	--------	----	--------	----	------	----	-------	----

Signature of the L.A.

Signature of the Pathologist
Pathologist's Name & Address

Dr. A. K. Singh
 MBBS, MD (PATHOLOGY)
 CCMC-5/6/7/8/9
 Consultant Pathologist



From No. LIC 03-

DIVISIONAL OFFICE, RAIPUR
ROUTINE URINE ANALYSIS

Full Name of the life to be Assured		MR. MAITRAM NAGESHWAR			
Age	36	Sex	M		
Division		Branch	381		
Proposal No.	5638	Agent Code No.:		Dev. Officer code No.	
Introducer	Name	Designation/Club Membership	Signature (In full)		
Agent					
Second Introducer					

1. Physical Examination

(i)	Colour	YELLOW	(ii)	Sediment	CLEAR
(iii)	Transparency	CLEAR	(iv)	Reaction	Acidic

2. Chemical Examination

(i)	Protein	NIL	(ii)	Sugar	NIL
(iii)	Bile salt	NIL	(iv)	Bile pigments	Nil

3. Microscopic Examination

(i)	Red Blood Cells	NIL	(ii)	Epithelial Cells	2-3
(iii)	Crystals	NIL	(iv)	Pus Cells	0-1
(v)	Casts	NIL	(vi)	Deposits	Clear

(Bacteria's Absent.....)

Remarks

If pus cells are present GRAM STAIN is necessary
 If haematuria is present ZIEHL NEELSEN METHOD is necessary

I declare that the person examined/investigated, signed/affix thumb impression in the space earmarked below, in my presence and I am not related to him/her or the Agent or the Development Officer.

Dated at	Bhilai	on the	23	day of	11	2024	at	02:00	PM
----------	---------------	--------	-----------	--------	-----------	-------------	----	--------------	-----------

Signature of Thumb Impression of L.A.

Signature of the Pathologist:	Dr. A. K. Singh
Name of the Pathologist:	Dr. A. K. Singh
Qualification:	MBBS, MD (PATHOLOGY)
Name & Address of the Hospital/Clinic/Lab:	CCMC, Raipur Consultant Pathologist




Pt.'s. NAME	MR. MAITRAM NAGESHWAR	AGE	36	YRS	GENDER	M
REF. BY	LIC (381)				PRO. NO.	5638
DATE OF SAMPLE COLLECTION	23.11.24	REPORT GENERATION DATE	23.11.24			

CLINICAL PATHOLOGY

URINE COTININE / NICOTINE	NEGATIVE
---------------------------	----------




Dr. A. K. Singh
 MBBS, MD (PATHOLOGY)
 Consultant Pathologist
DR. A. K. SINGH
 PATHOLOGIST

CHECKED BY

This document is not for medico legal purpose and must be co-related clinically.

ID: 291
MITARAM NAGESHWAR
Male 36Years
kg

23-11-2024 14:09:09
HR : 63 bpm
P : 102 ms
PR : 128 ms
QRS : 96 ms
QT/QTc : 406/416 ms
P/QRS/T : 36/52/56 °
RV5/SV1 : 1.024/0.724 mV

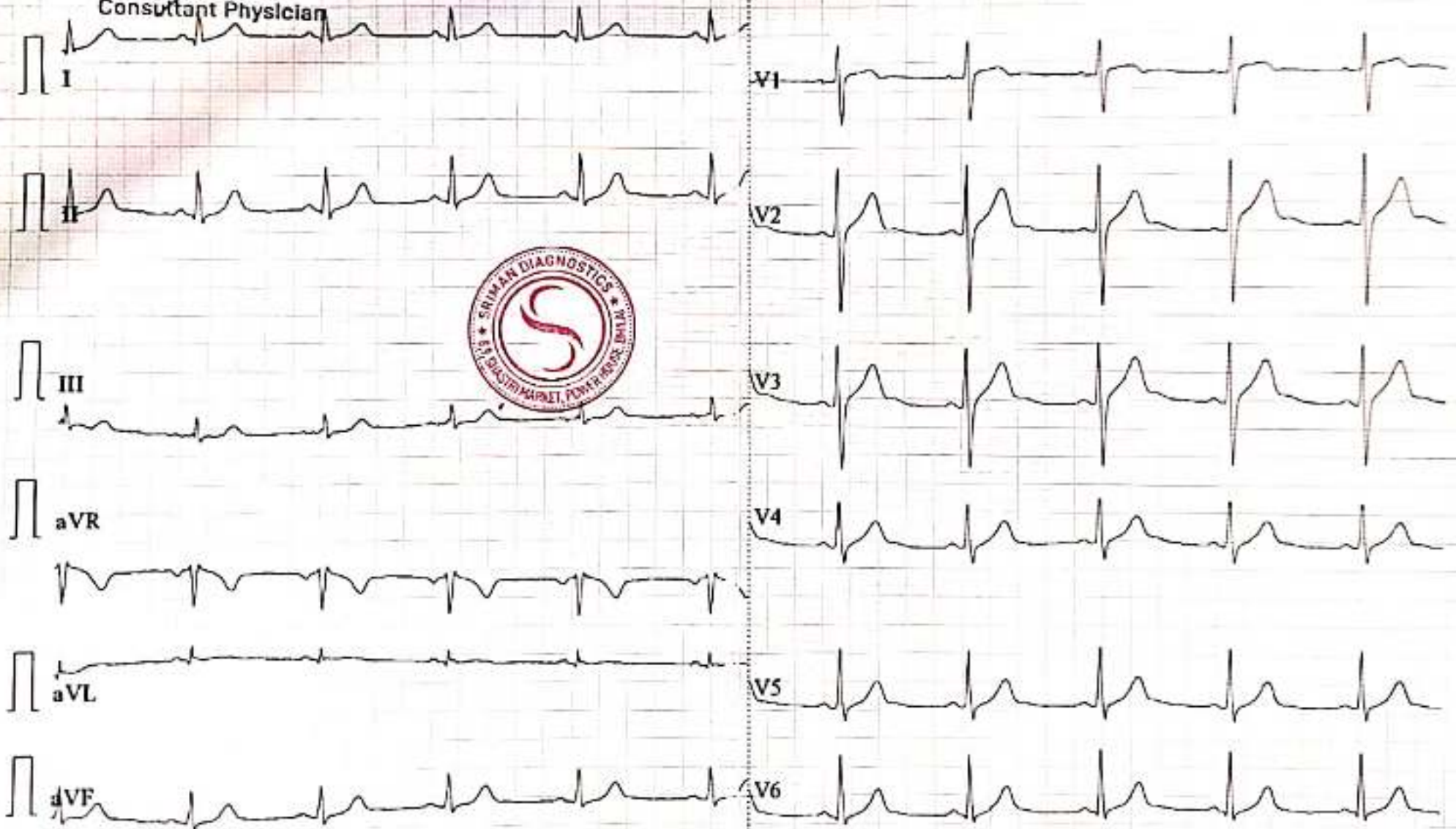
Diagnosis Information:
Sinus rhythm
Normal ECG

Dr. Suman Rao

MBBS, MD (MED)
Fellowship in Haemodialysis
CGMC-1552/2008
Consultant Physician

M. Nageshwar

Ref-Phys. : LIC
Report Confirmed by:





From No. LIC 03-

DIVISIONAL OFFICE, RAIPUR
ELECTROCARDIOGRAM

Full Name of the life to be Assured		MR. MAITRAM NAGESHWAR	
Age :	36	Sex:	M
Division		Branch	381
Proposal No.	5638	Agent Code No.:	
		Dev. Officer code No.	
Introducer	Name	Designation/Club Membership	Signature (In full)
Agent			
Second Introducer			

Instruction to the Cardiologist

- I. Please satisfy yourself about the identity of the examinee to guard against impersonation
- II. The examinee and the person's introducing him must sign in your presence Do not use the form signed in advance Also obtain signatures on ECG tracings
- III. The base line must be steady The tracing must be pasted on a folder.
- IV. Rest ECG should be 12 leads along with standardization slip each lead with minimum of 3 complexes Long lead II if L-III and AVF shows deep Q or Twave change. They should be recorded additionally in deep inspiration, if V Shows a tall R -Wave. Additional lead VR be recorded

DECLARATION

I hereby declare that the foregoing answers are given by me after fully understanding the questions They are true and complete and no information has been withheld. I do agree that these will form part of proposal dated given by me to LIC of India

Signature of witness

Name of witness

Signature of Thumb Impression of L.A

Note - Cardiologist is requested to explain following questions to L.A and to note the answer there of

I. Have you ever had chest pain, palpitation, breathlessness at rest or exertion ?

NO

II. Are you suffering from heart disease, diabetes, high or low Blood Pressure or Kidney diseases

NO

III. Have you ever had Chest X-Ray, ECG, Blood Sugar, Cholesterol or any other test done ?

NO

If the answer's to any all of the above questions is "yes" Submit all relevant papers with this form I declare that the person examined/investigated. signed/affix thumb impression

in the space earmarked below, in my presence and I am not related to him/her or the Agent or the Development officer.

Dated at	Bhilai	on the	23	day of	11	2024	at	02:00	PM
----------	--------	--------	----	--------	----	------	----	-------	----

Signature of Thumb Impression of L.A.



Signature of the Cardiologist:	<i>[Signature]</i>
Name of the Cardiologist:	Dr. Anil Kumar Singh
Qualification :	MBBS, MD, DM (Cardiology)
Name & Address of the Hospital/Lab :	GGMC, Raipur



Form No. LIC 03-0

Divisional Office, Raipur

Full Name of the life to be Assured | **MR. MAITRAM NAGESHWAR**

(A) Measurements

Height (Cm)	Weight (Kg)	Blood Pressure	Pulse Rate
165	56	120/80	63

(B) Cardiovascular System

.....

Rest ECG Report

Position	SUPINE		P Wave	NORMAL	
Standard dictation 1 mv	10 um		PR Interval	128	ms
Mechanism	Sinus		QRS Complexes	96	ms
Voltage	1 um		Q-T Duration	406/416	ms
Electrical Axis	CLEAR		S-T Segment	NORMAL	
Auricular Rate	63	bpm	T-Wave	NORMAL	
Ventricular Rate	63	bpm	Q-Wave	NORMAL	
Rhythm	Sinus Rhythm				
Additional Findings, if Any	No				

Conclusion

.....W.N.L.....

Dated at **Bhilai** on the **23** day of **11** **2024** at **02:00** **PM**

Signature of Thumb Impression of L.A.



Signature of the Cardiologist: **[Signature]**
 Name of the Cardiologist: **DR. K. D.**
 Qualification: **FRCP (C)**
 Name & Address: **155277-30 of the Hospital Clinic Lab Consultant Physician**



From No. LIC 03-

COMPUTERIZED TREADMILL TEST

Full Name of the life to be Assured		MR. MAITRAM NAGESHWAR			
Age :	36	Sex:	M		
Division		Branch:	381		
Proposal No.	5638	Agent Code No.:		Dev. Officer code No.	
Introducer	Name	Designation/Club Membership	Signature (In full)		
Agent					
Second Introducer					

DECLARATION

I hereby declare that the following answers are given by me after fully understanding the questions. They are true and complete and no information has been withheld. I do agree that these will form part of the proposal dated _____ given by me to LIC of India.

Signature of witness

Name of witness

Signature of Thumb Impression of L.A

Note - Cardiologist is requested to explain following questions to L.A and to note the answer date of

I. Have you ever had chest pain, palpitation, breathlessness at rest or exertion ?

NO

II. Are you suffering from heart disease, diabetes, high or low Blood Pressure or Kidney diseases

NO

III. Have you ever had Chest X-Ray, ECG, Blood Sugar, Cholesterol or any other test done ?

NO

If the answer's to any all of the above questions is "yes" Submit all relevant papers with this form.

I declare that the person examined/investigated, signed/affix thumb impression in the space earmarked below, in my presence and I am not related to him/her or the Agent or the Development officer.

Dated at **Bhilai** on the **23** day of **11** **2024** at **02:00** **PM**

Signature of Thumb Impression of L.A.



Dr. Subban Rao

Signature of the Cardiologist :	(MED)
Name of the Cardiologist :	Dr. Subban Rao Haemodialysis
Qualification :	CBMC 1582/2006
Name & Address of the Hospital/Clinic/Lab :	Consultant Physician



Divisional Office, Raipur

Full Name of the life to be Assured : **MR. MAITRAM NAGESHWAR**

(a) Pre-test: Supine Standing Hyperventilation

(b) Exercise: Stage I)
 Stage II) 3 minutes each
 Stage III)
peak exercise

(c) Recovery Recovery Recovery Recovery.

Phase Name	Stage Name	Time In Stage	Speed [mph]	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP
PRETEST	SUPINE							
	SITTING							
	STANDING							
	HYPERVENTILATION							
EXERCISE	WARM UP							
	STAGE 1							
	STAGE 2							
	STAGE 3							
	PEAK EXERCISE							
RECOVERY	RECOVERY							
	RECOVERY							
	RECOVERY							

AS PER REPORT

The protocol used - BRUCE : _____

Total Exercise Time - _____

Maximum Blood Pressure - _____

Maximum Workload _____

Maximum Heart Rate _____

Reason for Termination - _____

Maximum predicted Heart Rate _____ %

Comments

.....W.N.L.....

Dated at **Bhilai** on the **23** day of **11** 2024 at **02:00** PM

Signature of Thumb Impression of LA



Signature of the Cardiologist **Dr. Suman Rao**
 Name of the Cardiologist **Dr. Suman Rao**
 Qualification **C.C.T. (CC)**
 Name & Address of the Hospital **Dr. Suman Rao, [Address]**



Divisional Office, Raipur

Full Name of the life to be Assured : **MR. MAITRAM NAGESHWAR**

(a) Pre-test: Supine Standing Hyperventilation

(b) Exercise: Stage I)
 Stage II) 3 minutes each
 Stage III)
peak exercise

(c) Recovery Recovery Recovery Recovery.

Phase Name	Stage Name	Time In Stage	Speed (mph)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP
PRETEST	SUPINE							
	SITTING							
	STANDING							
	HYPERVENTILATION							
	WARM UP							
EXERCISE	STAGE 1							
	STAGE 2							
	STAGE 3							
	PEAK EXERCISE							
	RECOVERY	RECOVERY						
	RECOVERY							
	RECOVERY							

AS PER REPORT

The protocol used - BRUCE : _____
 Total Exercise Time - _____
 Maximum Blood Pressure - _____
 Maximum Workload _____
 Maximum Heart Rate _____
 Reason for Termination - _____

Maximum predicted Heart Rate _____ %

Comments

.....W.N.L.....

Dated at **Dhilai** on the **23** day of **11** 2024 at **02:00** PM

Signature of Thumb Impression of L.A.



Signature of the Cardiologist : **Dr. Suman Raj**
 Name of the Cardiologist : **MBBS, MD (A.P.D)**
 Qualification : **CCMC-1552**
 Name & Address of the Hospital/Clinic/Lab : **CCMC-1552**



Summary

SHRIMAN DIAGNOSTIC POWER HOUSE, BHILAI
933/MITARAM NAGESHWAR 36 Yrs/Male 56 Kg/165 Cms
Date: 23-Nov-2024 02:20:36 PM

Stage	Ref. By	LIC	Phase Time	Protocol	BRUCE	Grade	Relative METS	H.R. (bpm)	TESTING PURPOSE B.P. (mmHg)	R.P.P.V. (%)	PVC	Comments
	(Min:Sec)		(min:sec)		(kmph)	(%)						
Supine							1.0	73	120/80	87	-	
Standing							1.0	75	120/80	90	-	
HV							1.0	69	120/80	82	-	
ExStart							1.0	73	120/80	87	-	
Stage 1	3:01		3:02		2.7	10.0	4.6	99	130/80	128	-	
Stage 2	3:01		6:02		4.0	12.0	7.0	114	130/80	148	-	
Stage 3	3:01		9:02		5.5	14.0	10.2	143	160/110	228	-	
PeakEx	0:27		9:28		6.8	16.0	10.7	161	160/110	257	-	
Recovery	1:00				1.8	0.0	4.3	128	160/110	204	-	

Medication : NO

History :

Test End Reason :

Findings :

The patient exercised according to BRUCE for 9:27, achieving a work level of Max METS:10.7. Resting heart rate initially 73 bpm, rose to a max. heart rate of 161 bpm which represents 88% of maximum age predicted heart rate. Resting blood pressure 120/80 mmhg, rose to a maximum blood Pressure of 160/110 mmhg. The exercise stress test was stopped due to

Parameters :

Exercise Time :09:27
Max HR Attained :161 bpm 88% of Max Predictable HR 184
Max BP : 160/110(mmHg)
Max WorkLoad attained :10.7(Good Effort Tolerance)

M. Nageshwar

Dr. Suresh Rao

MBBS, MD (EM)
Fellow in Intensive Hemodialysis
CCMO
Consultant Physician

Advice/Comments:



Summary

SHRIMAN DIAGNOSTIC

POWER HOUSE, BHILAI

913/MITARAM HAGESHWAR 36 Yrs/Male 56 Kg/165 Cms

Date: 23-Nov-2024 02:20:36 PM

Ref.By : LMC

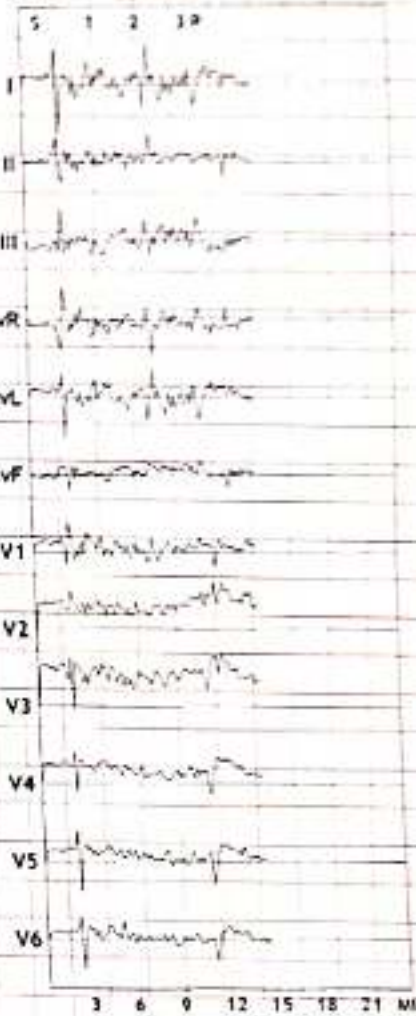
Protocol : BQICE

Medication : NO
Objective : FOR TESTING PURPOSE ONLY.

Stage	Stage Time	Phase Time	Speed	Grade	METS	HR	HRmax	BP	RPE	PVE	Comments
						(bpm)	(bpm)	(mmHg)	x100		
Supine					1.0	73	120/80		87	-	
Standing					1.0	75	120/80		90	-	
HV					1.0	69	120/80		82	-	
ExStart					1.0	73	120/80		87	-	
Stage 1	3:01	3:02	2.7	10.0	4.6	99	130/80		128	-	
Stage 2	3:01	6:02	4.0	12.0	7.0	114	130/80		148	-	
Stage 3	3:01	9:02	5.5	14.0	10.2	143	160/110		228	-	
PeakEx	0:27	9:28	6.8	16.0	10.7	161	160/110		257	-	
Recovery	1:00		1.8	0.0	4.3	128	160/110		204	-	

STL

0.5 mm/10



Findings :

Exercise Time :09:27
 Max HR Attained :161 bpm 88% of Max Predictable HR 184
 Max BP : 160/110(mmHg)
 Max WorkLoad attained :10.7(Good Effort Tolerance)



Advice/Comments:



Linked Medians Report

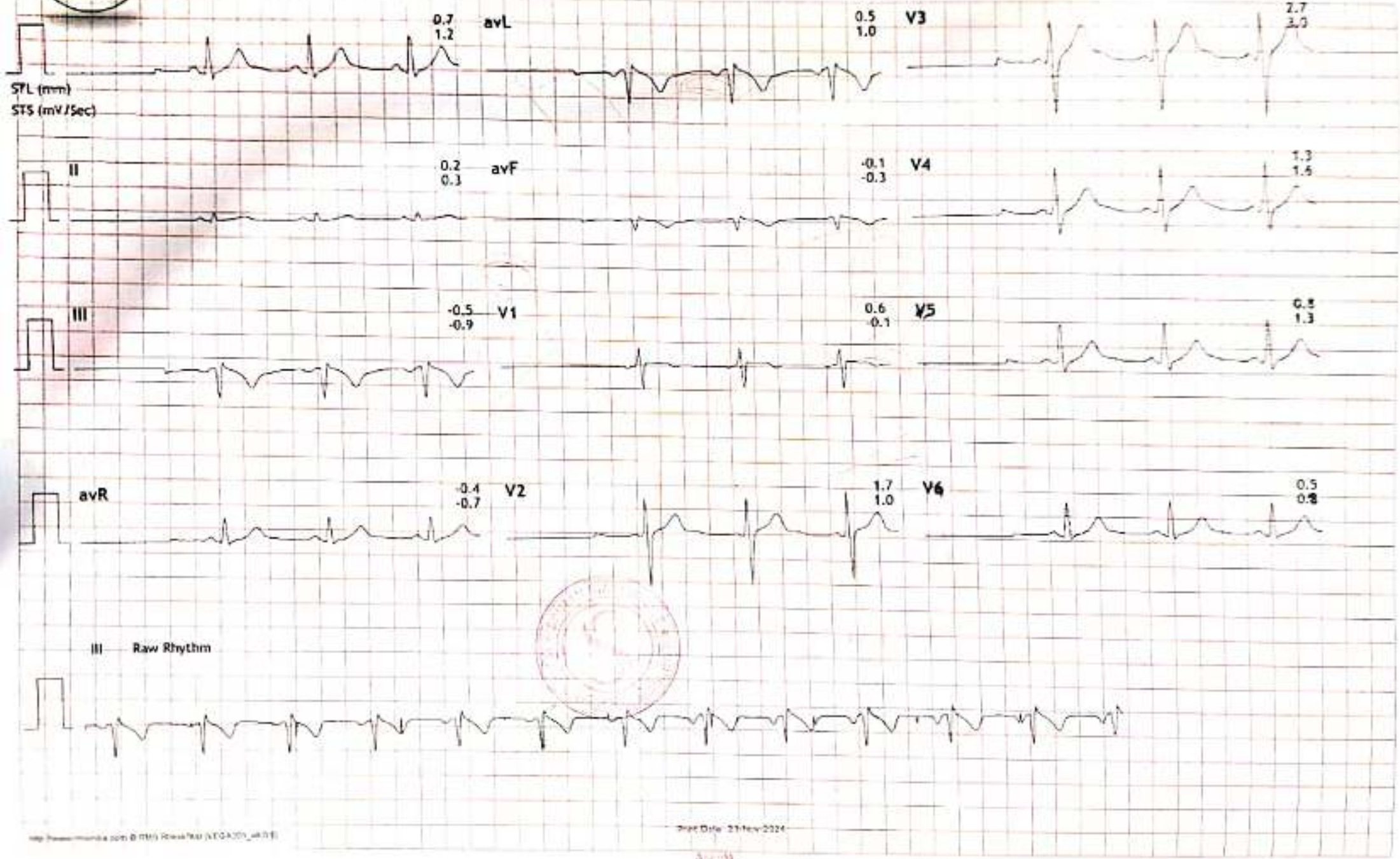
933/MTARAM NAGESHWAR: 72 bpm
36 Yrs/Male METS: 1.0
56 kg/165 Cms BP: 120/80
Date: 23-Nov-2024 02:20:36 PM

MpHR: 39% of 184
Speed: 0.0 kmph
Grade: 0.0%

SHRIMAN DIAGNOSTIC
POWER HOUSE, BHILAI
BRUCE
(1.0-100)Hz

Ex Time 00:33
BLE : On
Hatch : On

Supine
10.0 mm/mf
25 mm/Sec.





Linked Medians Report

933/MITARAM NAGESHWAR: 75 bpm
36 Yrs/Male METS: 1.0
56 Kg/165 Cms BP: 120/80
Date: 23-Nov-2024 02:20:36 PM

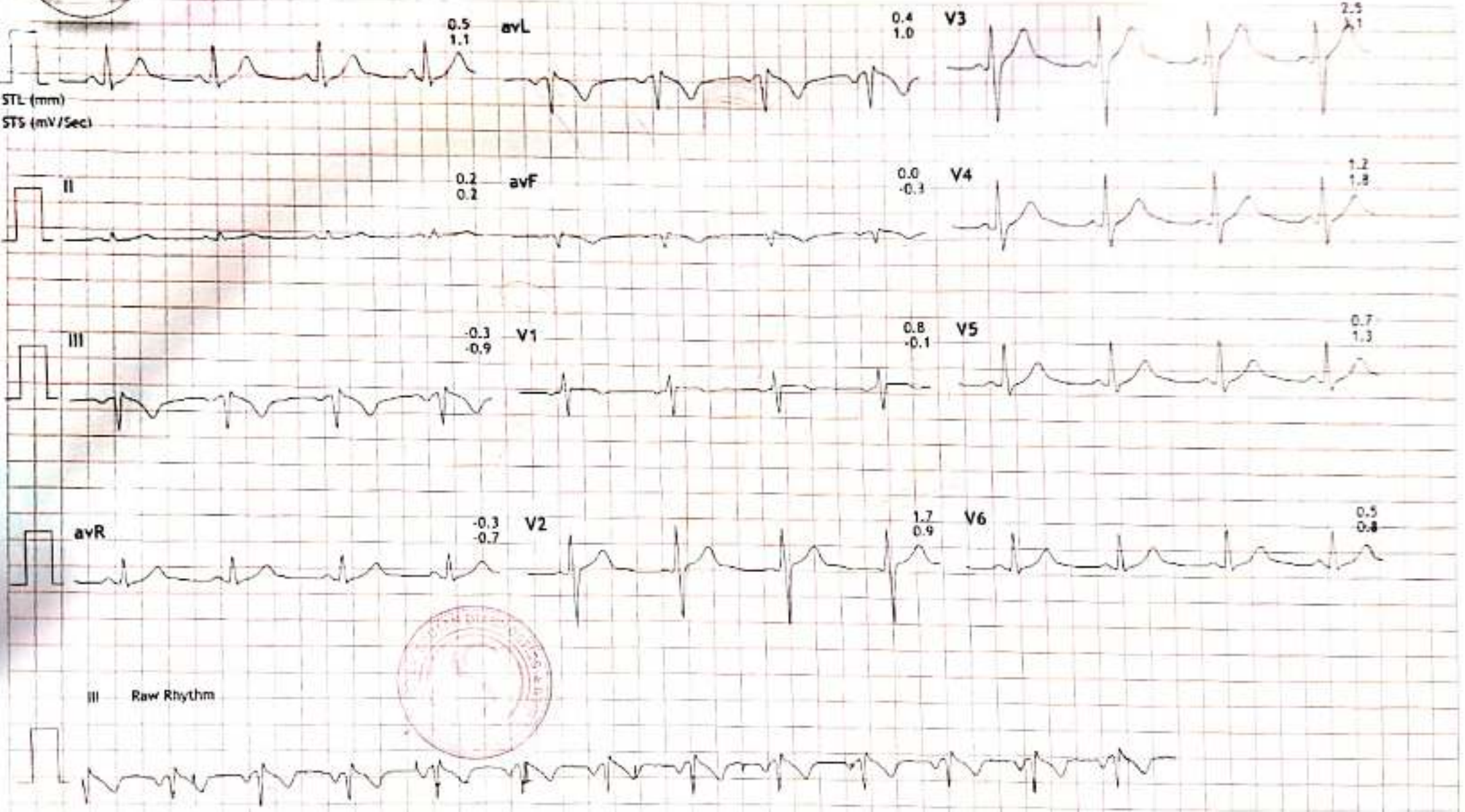
SHRMAN DIAGNOSTIC
POWER HOUSE, BHILAI

MPHR: 40% of 184
Speed: 0.0 kmph
Grade: 0.0%

BRUCE
(1.0-100)Hz

Ex Time 00:50
BLC On
Notch On

Standing
10.0 mm/mV
25 mm/Sec





Linked Medians Report

933/MITARAM NAGESHWAR: 72 bpm
 36 Yrs/Male METS: 1.0
 56 Kg/165 Cms BP: 120/80
 Date: 23-Nov-2024 02:20:36 PM

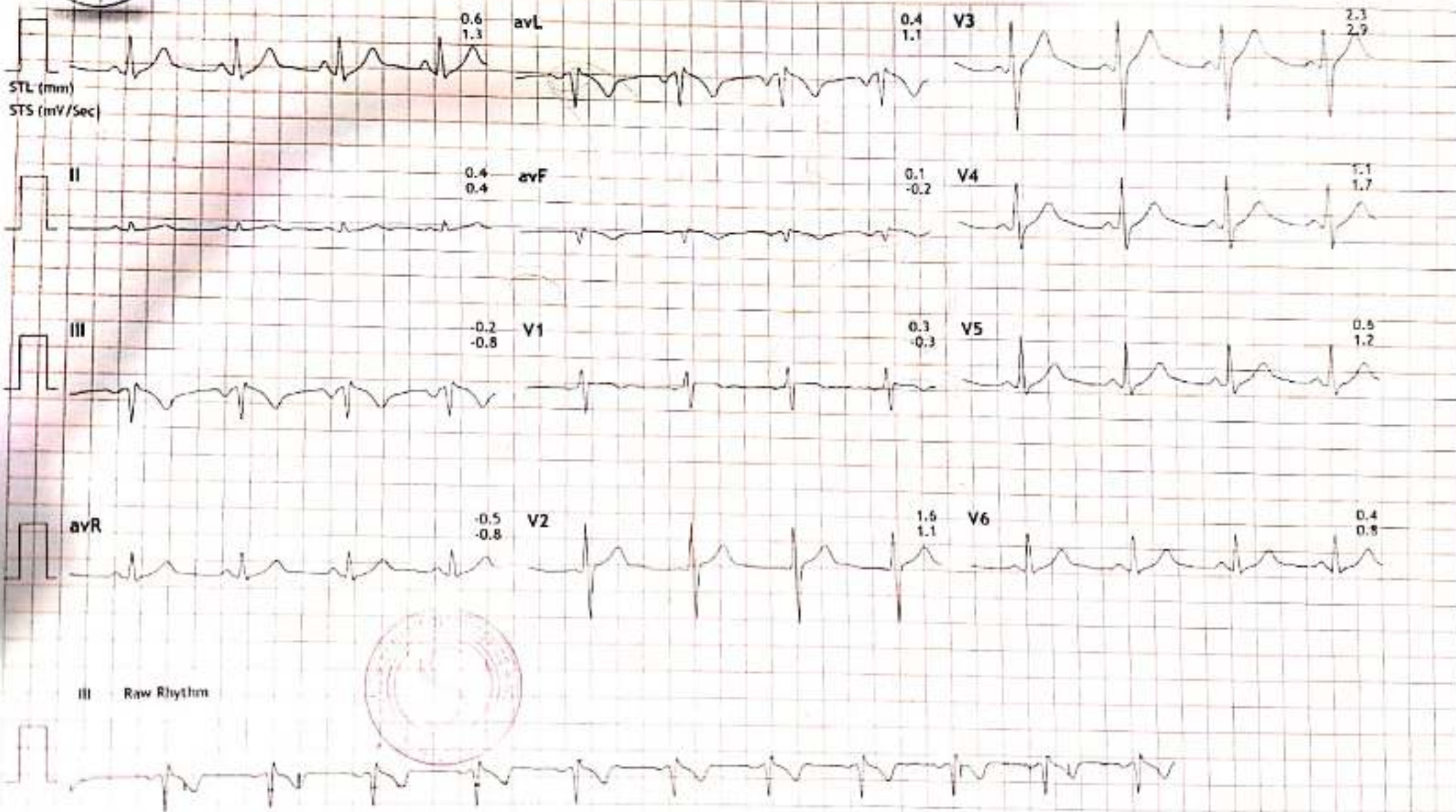
MHR: 39% of 184
 Speed: 0.0 kmph
 Grade: 0.0%

SHRIMAN DIAGNOSTIC POWER HOUSE, BHILAI

BRUCE
 (1.0-100)Hz

Ex Time 01:16
 BLC :On
 Hatch :On

HV
 10.0 mm/mV
 25 mm/Sec.



III Raw Rhythm



Linked Medians Report

933/MITARAM HAGESHWAR: 72 bpm
36 Yrs/Male METS: 1.0
56 Kg/165 Cms BP: 120/80
Date: 23-Nov-2024 02:20:36 PM

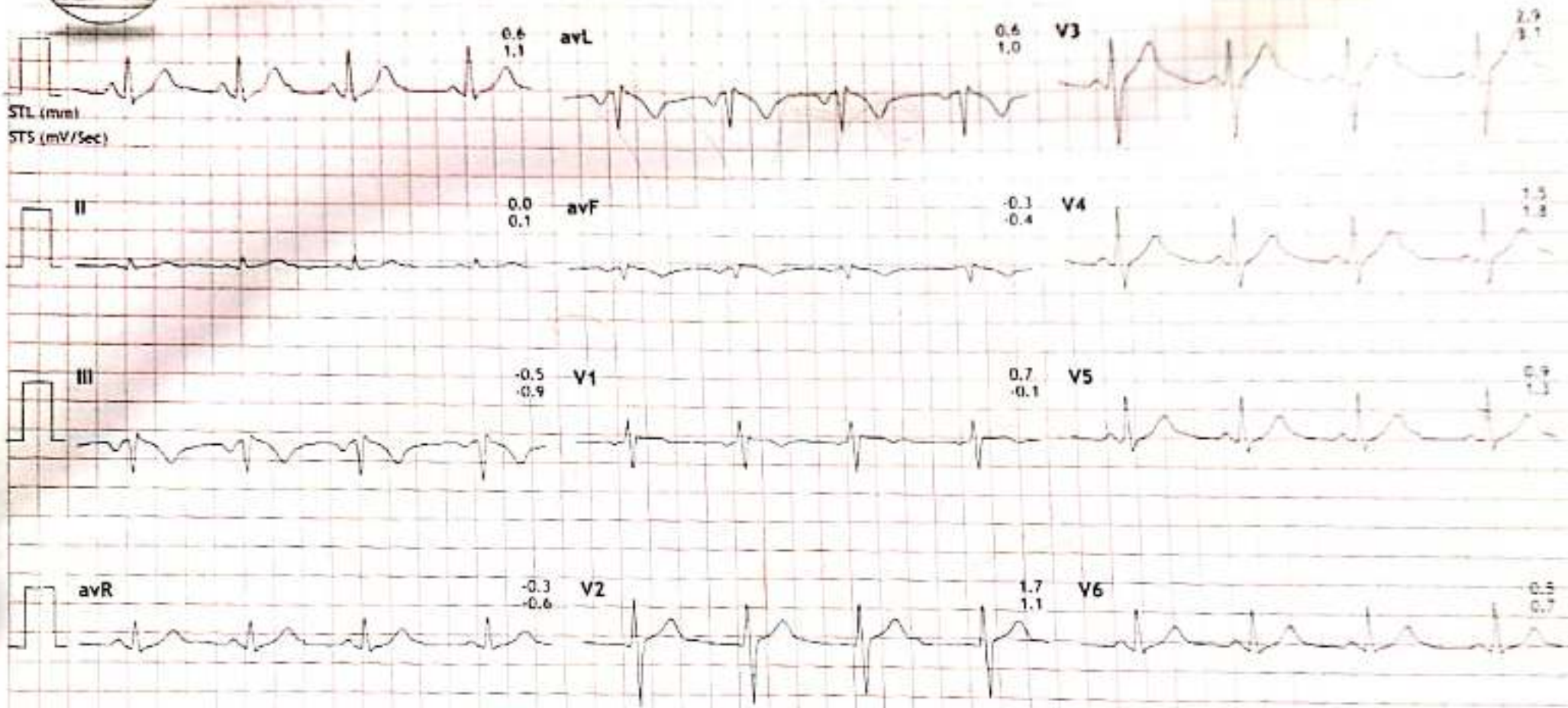
MPHR: 39% of 184
Speed: 0.0 kmph
Grade: 0.0%

SHRIMAN DIAGNOSTIC
POWER HOUSE, BHILAI

BRUCE
11.0 100Hz

Ex Time 01:30
ELC On
Watch On

ExStart
10.0 mm/min
25 mm/Sec.



III Raw Rhythm





Linked Medians Report

933/ANITARAM NAGESHWAR 89 bpm
 36 Yrs/Male METS: 4.6
 56 Kg/165 Cms BP: 130/80
 Date: 23-Nov-2024 02:20:36 PM

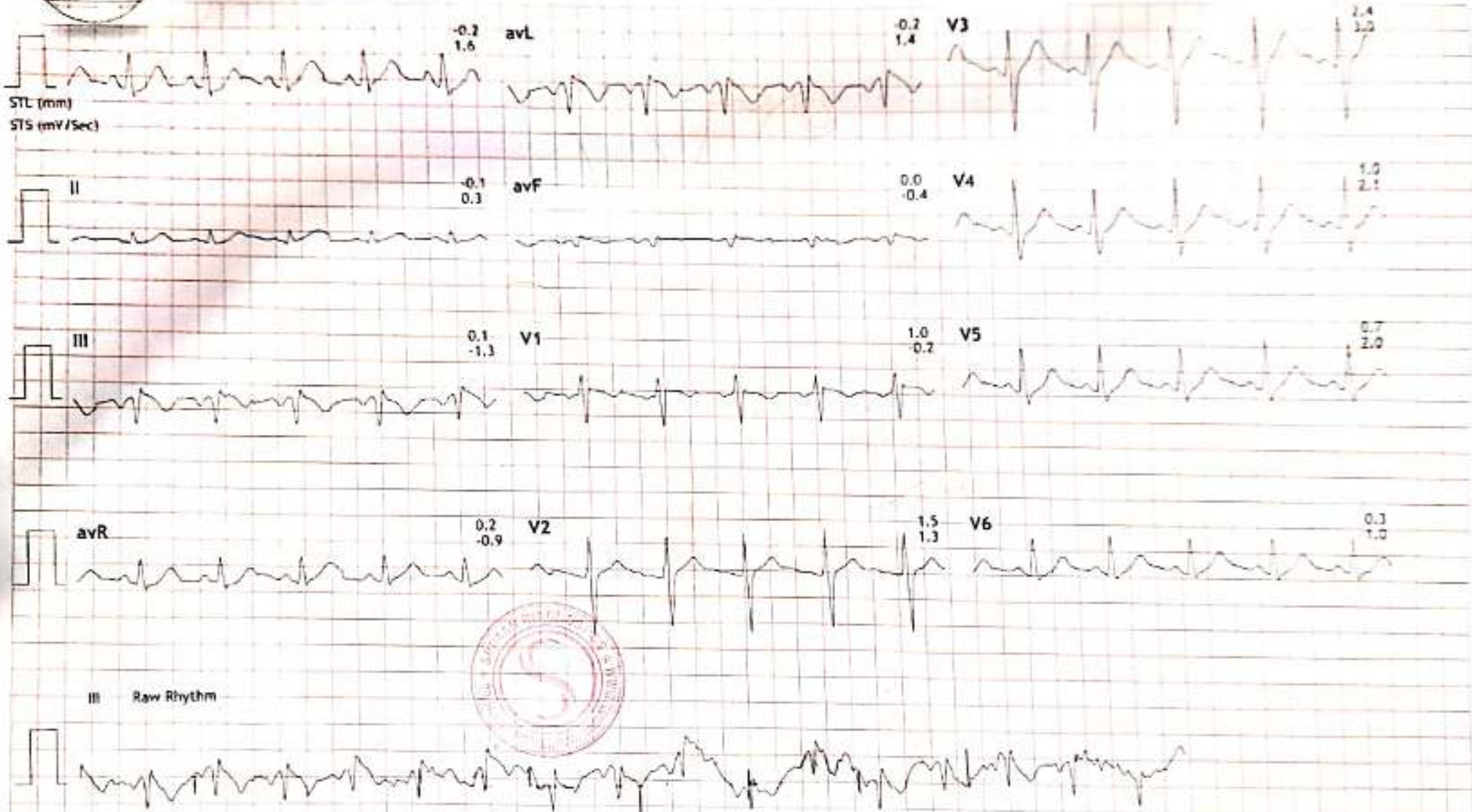
MHR: 51% of 184
 Speed: 2.7 kmph
 Grade: 10.0%

SHRIMAN DIAGNOSTIC POWER HOUSE, BHILAI

BRUCE
 (1.0-100)Hz

Ex Time 03:00
 ECG On
 Mech On

BRUCE Stage 1 (3-5G)
 10.0 mm/Div
 25 mm/Sec





Linked Medians Report

933/WITARAM NAGESHWAR: 114 bpm
36 Yrs/Male METS: 7.0
56 Kgr/165 Cms BP: 130/80
Date: 23-Nov-2024 02:20:36 PM

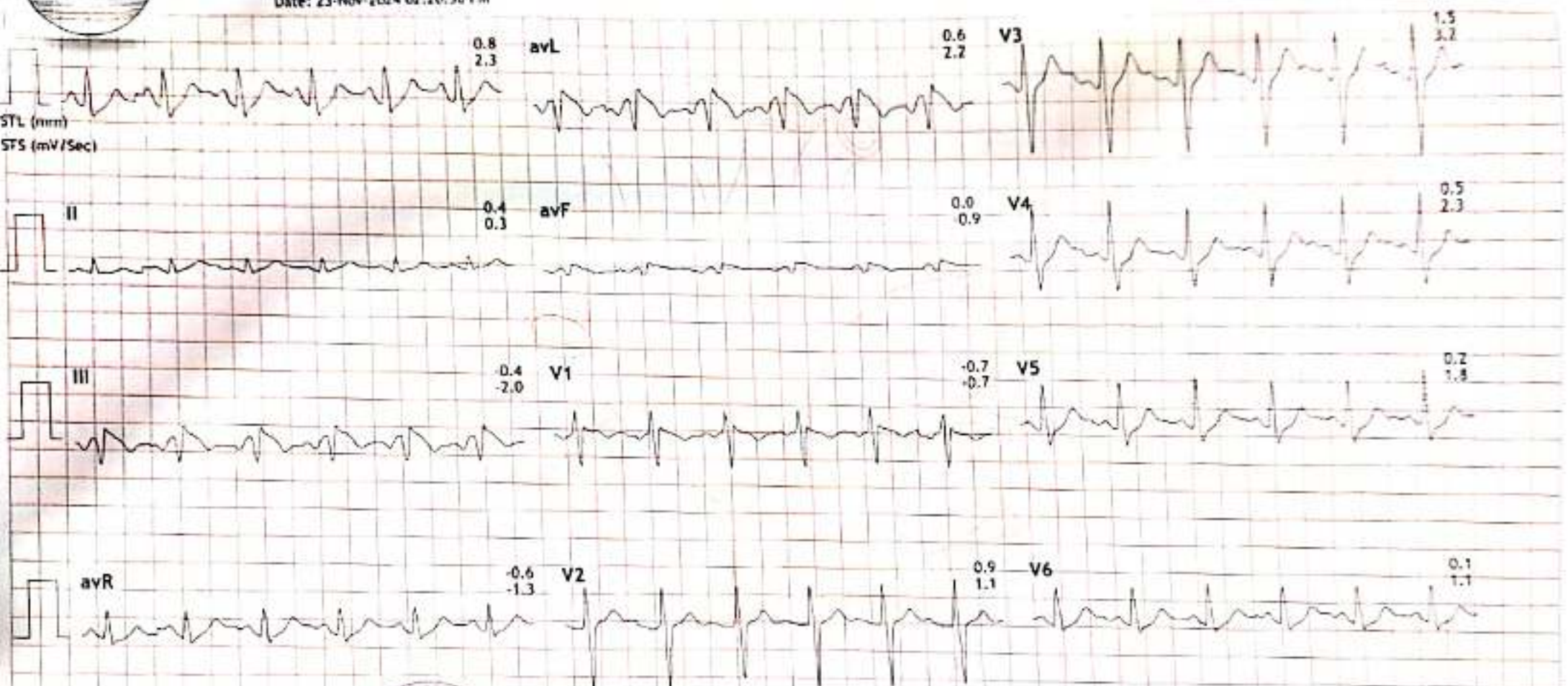
MHR: 61% of 184
Speed: 4.0 kmph
Grade: 12.0%

SHRIMAN DIAGNOSTIC
POWER HOUSE, BHILAI

BRUCE
11.0-100)Hz

Ex Time 06:00
BLC :On
Notch :On

BRUCE: Stage 2(3:00)
10.0 mm/mV
25 mm/Sec.



III Raw Rhythen





Linked Medians Report

933/NTARAM NAGESHWAR, 143 bpm
36 Yrs/Male METS: 10.2
56 Kg/165 Cms BP: 160/110
Date: 23-Nov-2024 02:20:36 PM

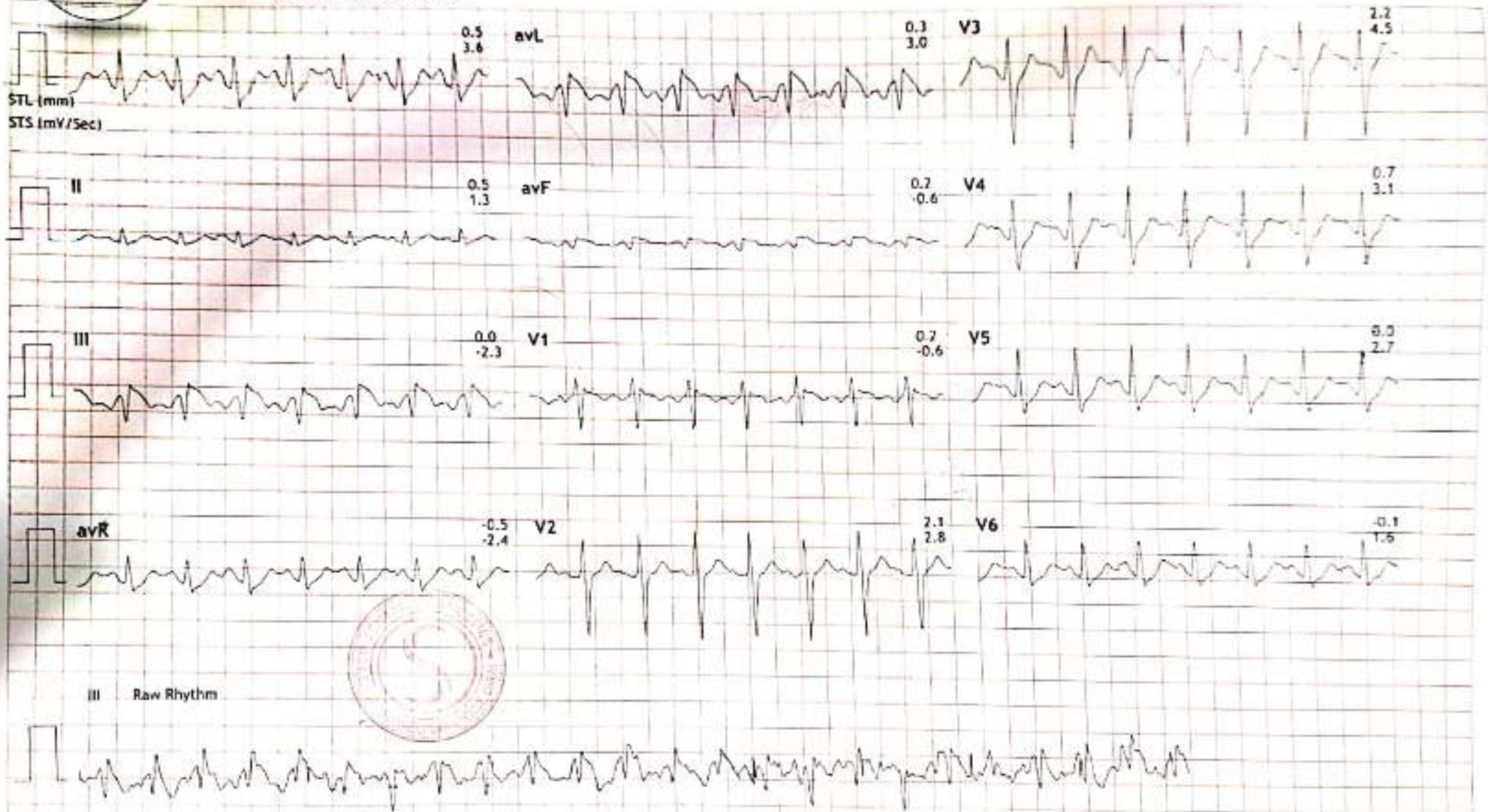
MPHR: 77% of 184
Speed: 5.5 kmph
Grade: 14.0%

SHRIMAN DIAGNOSTIC
POWER HOUSE, BHILAI

BRUCE
(1.0-100)Hz

Ex Time 09:00
BLE : On
Notch : On

BRUCE: Stage 3(3:00)
10.0 mm/mV
25 mm/Sec.





Linked Medians Report

933/MITARAM NAGESHWAR 161 bpm
36 Yrs/Male METS: 10.7
56 Kg/165 Cms BF: 160/110
Date: 23-Nov-2024 02:20:36 PM

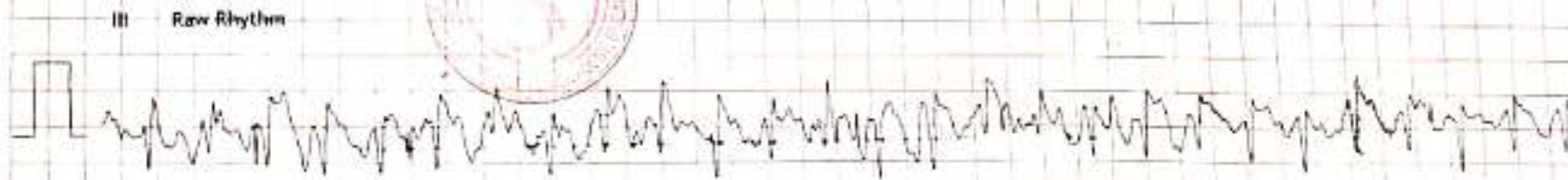
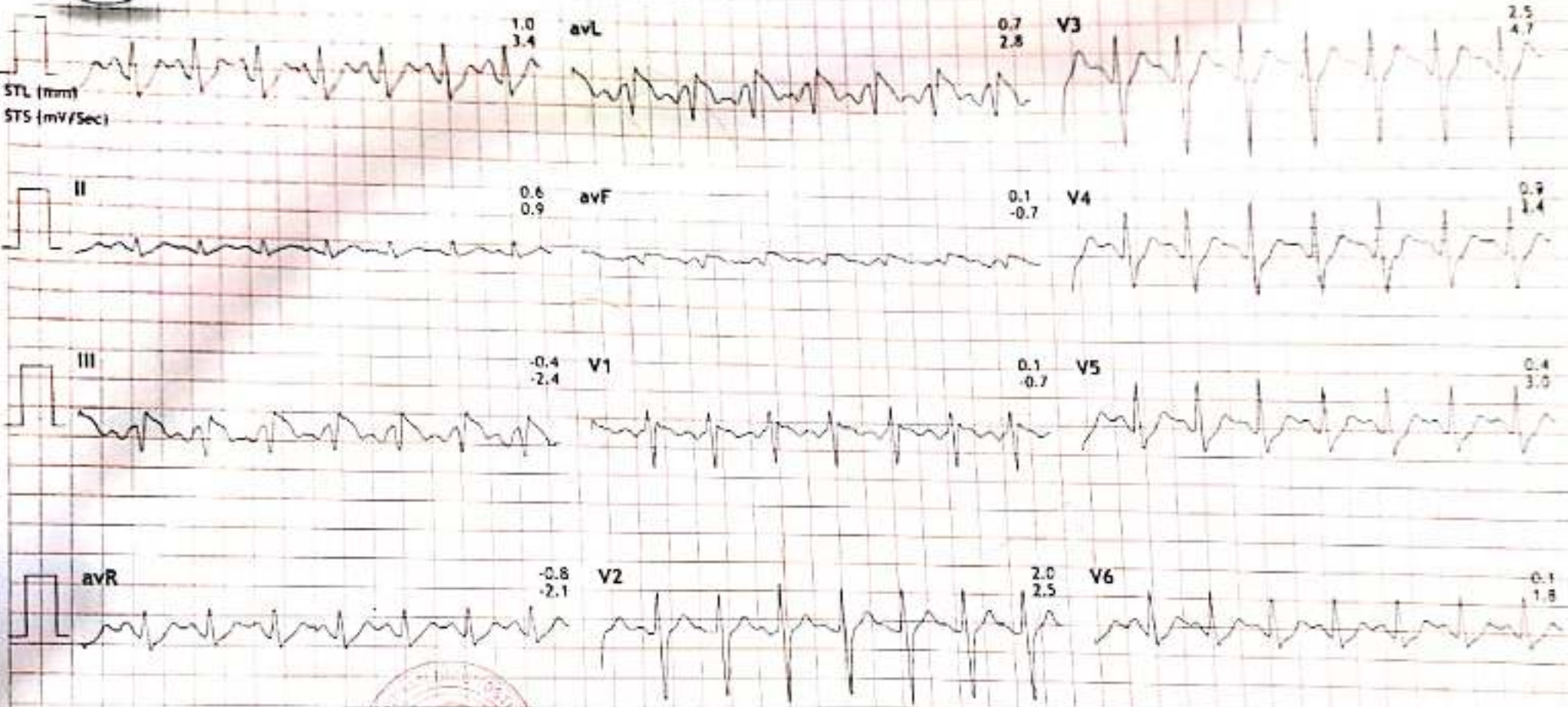
MHR: 87% of 184
Speed: 6.8 kmph
Grade: 16.0%

SHRIMAN DIAGNOSTIC
POWER HOUSE, BHILAI

BRUCE
11.0 100Hz

Ex Time 09:25
BLC On
Notch On

BRUCE: PeakEx(0:25)
10.0 mm/mf
25 mm/Sec.





Linked Medians Report

933/MITARAM NAGESHWAR: 129 bpm
36 Yrs/Male METS: 4.4
56 Kg/165 Cms BP: 160/110
Date: 23-Nov-2024 02:20:36 PM

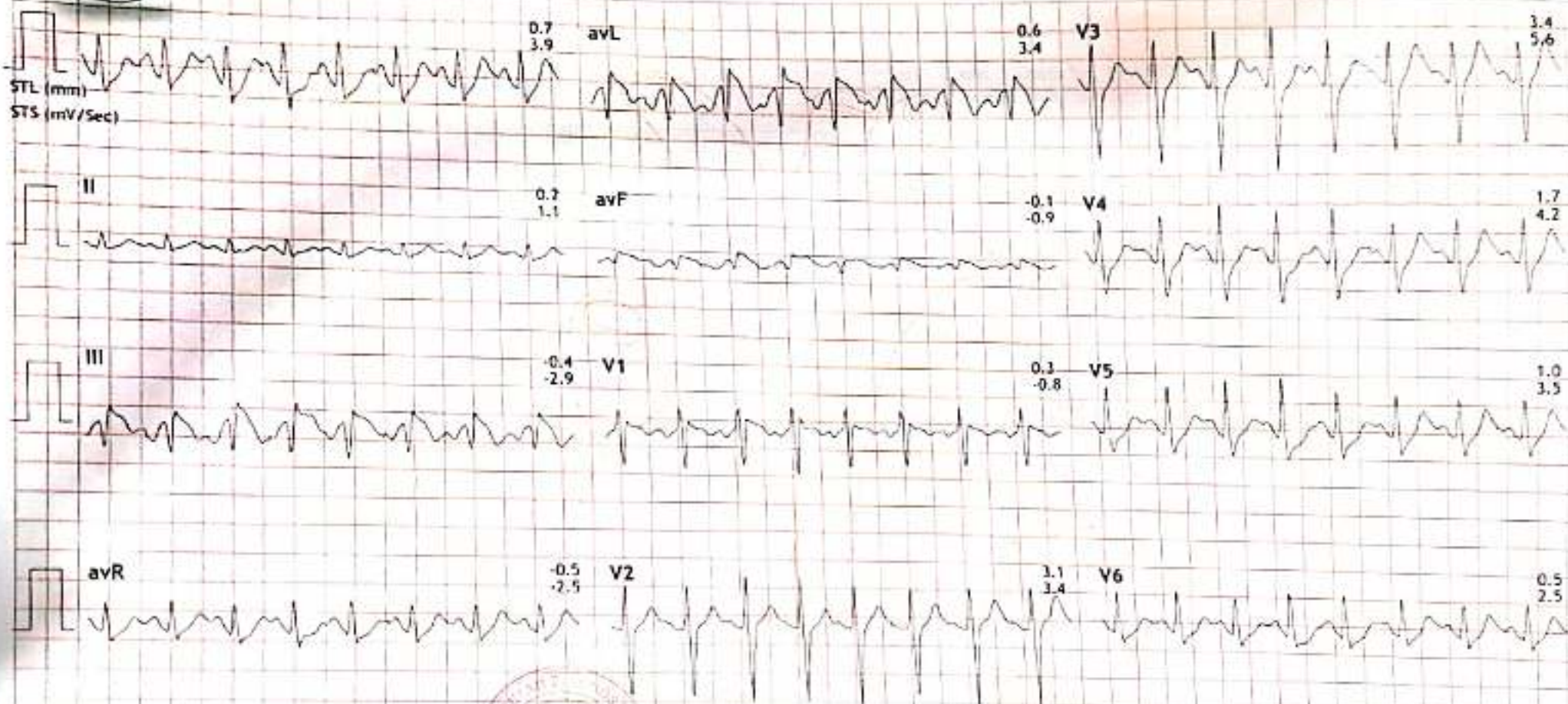
MPHR: 70% of 184
Speed: 1.8 kmph
Grade: 0.0%

SHRIMAN DIAGNOSTIC
POWER HOUSE, BHILAI

BRUCE
(1.0-100)Hz

Ex Time 09:27
BLC : On
Hatch : On

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



III Raw Rhythm





Linked Median Report

SHRIMAN DIAGNOSTIC
POWER HOUSE, BHILAI

933/INITARAM NAGESHWAR 36 Yrs/Male

56 Kg/165 Cms

Date: 23-Nov-2024 02:20:36 PM

Time (Min.)	HR (Bpm)	PR Int (mS)	QRS Wid (mS)	QRS Axis (Deg.)	QTC (mS)	P(µV) (Max)	R(µV) (Max)	S(µV) (Min)	T(µV) (Max)	Min. J (µV)	Leads for (J & PJ)	Min. Post JRR Var (µV)	JRR Var (%)	PVC (Counts)	Missed Beats (Counts)
00:30	73	367	103	-15	302	76	494	-568	362	-8	III	-59	32.47	-	-
01:00	80	130	103	-16	307	121	459	-564	354	4	III	-55	14.55	-	-
01:30	73	397	103	-18	290	107	486	-548	375	-14	III	-67	41.23	-	-
02:00	89	123	100	-7	431	-120	501	-521	367	-61	V1	-90	11.01	-	-
02:30	96	273	107	2	323	165	465	-532	284	-69	II	-114	4.69	-	-
03:00	99	263	110	-10	318	137	472	-526	284	-85	I	-51	5.65	-	-
03:30	99	140	110	-8	310	162	512	-579	295	-112	I	-41	3.98	-	-
04:00	96	250	110	-9	309	128	504	-590	306	4	III	-59	7.49	-	-
04:30	99	253	110	-10	302	142	501	-583	319	49	III	-18	3.31	-	-
05:00	109	160	103	-8	436	131	522	-606	297	-39	III	-71	3.55	-	-
05:30	112	150	107	-2	434	139	508	-625	286	-151	avL	-67	3.70	-	-
06:00	112	117	110	-24	415	143	469	-593	267	-94	avL	-2	3.66	-	-
06:30	109	120	113	-29	435	156	510	-607	294	-175	I	-90	3.90	-	-
07:00	112	150	113	-30	419	161	513	-622	290	53	III	-45	4.24	-	-
07:30	113	117	120	-31	415	156	495	-635	273	65	III	-73	3.85	-	-
08:00	124	127	120	-21	433	201	530	-662	286	51	III	-122	2.50	-	-
08:30	129	123	83	-30	418	173	507	-657	250	-277	V5	-53	2.16	-	-
09:00	135	120	120	-21	421	158	473	-661	275	-173	avL	-45	2.14	-	-
09:30	138	110	83	-13	412	157	494	-650	272	-252	avL	-87	2.31	-	-
10:00	141	107	83	-31	427	192	468	-659	252	-240	avL	-63	2.42	-	-





Time (Min.)	HR (Bpm)	PR Int (mS)	QRS Wid (mS)	QRS Axis (Deg.)	QTc (mS)	P(μV) (Max)	R(μV) (Max)	S(μV) (Min)	T(μV) (Max)	Min. J Leads for (μV) (J & PJ)	Min. Post JPR Var (μV) (%)	PVC (Counts)	Missed Beats (Counts)
10:30	143	110	83	-23	306	168	458	-641	237	-293 avL	-100	2.36	-
11:00	162	100	80	-3	413	218	517	-704	262	-273 V5	-126	10.38	-
11:30	141	107	103	-28	312	179	421	-664	337	112 III	-41	3.17	-
12:00	124	120	100	5	310	164	431	-662	409	108 III	-55	3.45	-
12:30	112	110	103	-13	312	169	459	-651	404	100 III	-55	3.82	-
13:00	112	123	107	-12	318	199	468	-661	389	57 III	-75	1.96	-
13:30	102	150	100	-2	331	155	458	-659	356	75 III	-43	7.78	-
14:00	102	233	107	-19	317	163	494	-613	341	83 III	-14	4.62	-
14:30	103	163	100	-6	312	144	504	-608	311	-77 avL	-18	4.14	-



...&search=off&permhid=thead-f.1816428870143584