


Name : AJAY KUMAR JHA
Age/Gender : 50 Years/Male
UHID : QL302245576
Refer By :
Wing : BERLIN GENERAL HOSPITAL RANCHI
Client Name : BDDC - CGHS

Reg.No. : 
240320QLBG009
Reg.Date : 20-Mar-24 12:15 PM
Received On : 20-Mar-24 12:15 PM
Reported On : 22-Mar-24 04:17 PM

Test Particular	Result	Unit	Biological Reference Interval
Thyroid Profile			
Thyroid Function Test [By CLIA] :-			
Tri-iodo Thyronine (T3)	1.40	ng/ml	(0.8 - 2.0) 11-15 Years (0.83 - 2.13) 1-10 Years (0.94 - 2.69) 1-12 Months (1.05 - 2.45) 1-7 Days (0.36 - 3.16) 1-4 Weeks (1.05 - 3.45)
Thyroxine (T4)	6.42	µg/dl	(5.1 - 14.1) 1-12 Months (5.9 - 16) 1-7 Days (11 - 22) 1-4 Weeks (8.2 - 17) 1-10 Years (6.4 - 15) 11-15 Years (5.5 - 12)
Thyroid Stimulating Hormone (T S H)	2.89	µIU/ml	Up to 1 Week (0.7-15.2) 1 week-4 week (0.7- 11.0) 1-12 Months (0.7- 8.4) 1-19 Years (0.6-4.9) 19 Years Above (0.5-5.5) 1st Trimester (0.6 - 3.4) 2nd Trimester (0.37 - 3.6) 3rd Trimester(0.38 - 4.04)

Mild to moderate degree of elevation normal T3&T4 levels indicates impaired thyroid hormone reserves and indicates subclinical hypothyroidism.

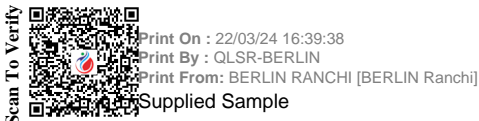
Mild to moderate decrease with normal T3 & T4 indicates subclinical hyperthyroidism.

TSH measurement is used for screening & diagnosis of Euthyroidism, hypothyroidism & hyperthyroidism.

Suppressed TSH (< 0.01 µ IU/ml) suggests diagnosis of hyperthyroidism.

Elevated concentration of TSH (>7 µ IU/ml) suggest diagnosis of hypothyroidism.


Please correlate clinically.




Dr. Suchismita Panda
MD (Biochemistry)

P.T.O.

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Reported On : 22-Mar-24 04:17 PM

Test Particular	Result	Unit	Biological Reference Interval
P. S. A. [By ECLIA] Method: CHEMILUMINESCENCE	0.24	ng/ml	< 4.0 For Healthy Man


PSA :-
 PSA is elevated in benign prostrate hypertrophy. Clinically an elevated PSA value is not of diagnostic value as a specific test for cancer and should only be used in conjunction with other clinical symptom and diagnostic procedure.

VITAMIN B 12 VIT B 12:-	245.3	Pg/ml	(187 - 883)
-----------------------------------	-------	-------	-------------


VIT B 12 a member of the corrin family, is a cofactor in the synthesis of methionine from Homocysteine is implicated in the formation of myeline and along with folate is for DNA synthesis.
 Deficiency of VIT B12 may cause megaloblastic anemia , nerve damage and degeneration of the spinal cord.
 Low serum B12 levels may be indicated in conditions associated iron deficiency, normal near-term pregnancy, vegetarianism, partial gastrectomy, treated epilepsy and advancing age.
 Normal range:- 187 pg/ml - 883 pg/ml

Vitamin D (25 O-H) Method: By E411 Cobas Chemiluminescence	16.24	ng/ml	Deficient (0 - 10 ng/ml) Insufficient (10 - 30 ng/ml) Sufficient (30 -100 ng/ml) Toxicity >100 (ng/ml)
--	--------------	-------	--

25-OH VITAMIN D:-
 Vitamin D is a fat soluble steroid hormone mainly produced photo chemically in the skin from 7-dehydrocholesterol.
 Vitamin-D deficiency is a cause of secondary hyperparathyroidism and disease related to impaired bone metabolism like rickets, osteoporosis, osteomalacia.
 Low values are also seen in chronic illness like cancer, auto immune, infectious disease or cardiovascular problem.


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Print On : 22/03/24 16:39:38
 Print By : QLSR-BERLIN
 Print From: BERLIN RANCHI [BERLIN Ranchi]
 Supplied Sample


Dr. Suchismita Panda
 MD (Biochemistry)

End Of Report


Name : AJAY KUMAR JHA
Age/Gender : 50 Years/Male
UHID : QL302245576
Refer By :
Wing : BERLIN GENERAL HOSPITAL RANCHI
Client Name : BDDC - CGHS

Reg.No. : 
240320QLBG009
Reg.Date : 20-Mar-24 12:15 PM
Received On : 20-Mar-24 12:15 PM
Reported On : 22-Mar-24 05:43 PM

Test Particular	Result	Unit	Biological Reference Interval
HBA1C (Nephelometry)			
HBA1C Method: HPLC	7.5	%	Non diabetic level(< 6.0) Goal(< 7.0) Action Suggested(> 8.0)
Average Blood Glucose (eAg)	169.26	mg/dl	




Print On : 22/03/24 17:49:17
Print By : QLSR-BERLIN
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Supplied Sample


Dr. Richa Verma
MBBS, MD (Pathology)

End Of Report

Name : AJAY KUMAR JHA
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UHID : QL302245576
Refer By :
Wing : BERLIN GENERAL HOSPITAL RANCHI
Client Name : BDDC - CGHS

Reg.No. : 
240320QLBG009
Reg.Date : 20-Mar-24 12:15 PM
Received On : 20-Mar-24 12:15 PM
Reported On : 20-Mar-24 05:55 PM

Test Particular	Result	Unit	Biological Reference Interval
Fasting Plasma Glucose Method: (By GOD-POD Method)	120	mg/dl	(65 - 110)
Post Prandial Plasma Glucose Method: (By GOD-POD Method)	148	mg/dl	(75 - 140)
Fasting Urine Sugar	Nil		
<u>LIPID PROFILE : -</u>			
Serum Triglyceride Method: (By Enzymatic,end point)	131	mg/dl	(< 150)
Serum Cholesterol Method: (By Oxidase, Esterase, Peroxidase)	248	mg/dl	(125 - 200)
Serum HDLc (Direct) Method: (By PTA/MgC12, Reflectance photometry)	62	mg/dl	(30 - 65)
Serum LDLc (Direct) Method: (By Direct Homogeneous, Spectrophotometry)	159.8	mg/dl	(85 - 150)
VLDL	26.2	mg/dl	(5 - 40)
LDL & HDL Ratio Method: (By Calculated)	2.58		(1.5 - 3.5)
Total Cholestrol & HDL Ratio Method: (By Calculated)	4.00		Low Risk(0 - 3) High Risk(5 - 10)

Scan To Verify




Print On : 21/03/24 10:29:19
Print By : QLSR-BERLIN
Print From: BERLIN RANCHI [BERLIN Ranchi]
Supplied Sample

Richa Verma
Dr. Richa Verma
MBBS, MD (Pathology)

P.T.O.

Name : AJAY KUMAR JHA
Age/Gender : 50 Years/Male
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Wing : BERLIN GENERAL HOSPITAL RANCHI
Client Name : BDDC - CGHS

Reg.No. : 
Reg.Date : 20-Mar-24 12:15 PM
Received On : 20-Mar-24 12:15 PM
Reported On : 20-Mar-24 05:55 PM

Test Particular	Result	Unit	Biological Reference Interval
LFT :-			
Serum Bilirubin (Total) Method: (By Diphylline, Diazonium Salt)	0.68	mg/dl	(0.2 - 1.3)
Serum Bilirubin (Direct) Method: (By Diphylline, Diazonium Salt)	0.22	mg/dl	(0.1 - 0.4)
Serum Bilirubin (Indirect)	0.46000	mg/dl	(0.2-1.1)
S G O T (AST) Method: By IFCC	80.8	u/l	(17 - 59)
S G P T (ALT) Method: By IFCC	49.1	u/l	(21-72)
Serum Alkaline Phosphate (ALP) Method: By IFCC	214	u/l	Adult (38 - 126)
Serum Protein Method: By Biuret Method	7.3	gm/dl	Adult(6.2 - 8.2) Children(5.6 - 8.4)
Serum Albumin Method: By BCG, Dye Binding Method	4.1	gm/dl	Newborn Children(2.4 - 4.8) Adult(3.5 - 5.0)
Serum Globulin	3.20		Adult(2.3 - 3.6)
Serum Albumin / Globulin (A / G) Method: By BCG	1.28	gm/dl	(1 - 2.3)
KFT			
Serum Urea Method: GLDH,Kinetic Assay	28.0	mg/dl	Adult (17 - 43) New Born (8.4 - 25.8) Infant (10.8 - 38.4)
Serum Creatinine Method: Modified Jaffe, Kinetic	1.1	mg/dl	Male: (0.72-1.18) Neonate : (0.26 - 1.01) Infant { 2months - less than 3 yrs } : (0.15 - 0.37) Children { 3 yrs - less than 15 yrs } : (0.24 - 0.73)
Serum Sodium (Na+) Method: By Indirect ISE	142.7	mmol/L	(136 - 145)
Serum Potassium (K+) Method: By Indirect ISE	4.53	mmol/L	(3.5 - 5.1)
Serum Chloride Method: (By Ion-selective Electrode)	103.3	mmol/L	(98 - 107)
Serum Uric Acid Method: By uricase-Colorimetric	6.3	mg/dl	(3.5 - 8.5)




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MBBS, MD (Pathology)

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Reported On : 20-Mar-24 05:55 PM

Test Particular	Result	Unit	Biological Reference Interval
CBC :-			
Haemoglobin Method: (By Sahli's Method)	14.3	gm%	Adult Men (13 - 18) Adult Women (11.5 - 16.5) Children (11 - 13) Children (1-6) : (12 - 14) Children (6-12) : (12 - 14)
P. C. V.	45.3	%	(35 - 45)
Total Platelet Count	1.6	Lacs Per cmm	(1.5 - 4)
Total R. B. C. Count	5.0	mill./uL	Women (4.2 - 5.4) Male (4.7 - 6.1) Children (4.6 - 4.8)
Total W. B. C. Count Method: Flow Cytometry	5,100	Per cmm	Adult :-Adult :- (4,000 - 11,000) New Born (10,000 - 26,000) (1-4) Years : (6,000 - 18,000) (5-7) Years : (5,000 - 15,000) (8-12) Years : (4,500 - 12,500)
M. C. V.	90.0	fl	(76 - 96)
MCH	28.3	pg	(22 - 32)
MCHC	31.6	g/dl	(30 - 35)
Neutrophils	57	%	(40 - 70)
Eosinophils	06	%	(0.5 - 7)
Basophils	00	%	(0 - 1)
Lymphocytes	36	%	(15 - 40)
Monocytes	01	%	(0 - 6)




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Refer By :
Wing : BERLIN GENERAL HOSPITAL RANCHI
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Reg.No. : 
Reg.Date : 20-Mar-24 12:15 PM
Received On : 20-Mar-24 12:15 PM
Reported On : 20-Mar-24 05:54 PM

URINE RM

Particular	Findings	Unit	Biological Reference Interval
PHYSICAL			
Colour	Pale Yellow		
Transparency	Clear		
Deposite	Nil		
Sp Gravity	1025		
Reaction	Acidic		
CHEMICAL			
Sugar	Nil	gm%	
Protein	xx		
pH	xx		
Ketone	xx		
Blood	xx		
Albumin	Nil		
Phosphate	Nil		
MICROSCOPIC			
RBC	Nil	/HPF	
Pus Cells	2-4	/HPF	
Epith Cells	0-2	/HPF	
Bacteria	Nil		
Casts	Nil	/HPF	
Crystals	Nil	/HPF	
Yeast	Nil		
Spermatozoa	Nil	/HPF	



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 Supplied Sample


Dr. Richa Verma
 MBBS, MD (Pathology)

End Of Report



Patient Name	MR. AJAY KUMAR JHA	Requested By	MEDIWHEEL
MRN	BER/2024/OPD21038	Procedure Date	20.03.2024
Age/Sex	51Y/MALE	Hospital	BERLIN DIAGNOSTICS & DAY CARE

USG WHOLE ABDOMEN

Liver : The liver is enlarged in size (16.9 cm) and outline. It reveals diffuse fatty infiltration. No obvious focal lesion is seen. The intra and extra hepatic biliary passage are not dilated. The portal vein is normal in caliber at the porta hepatis.

Gall bladder : The gall bladder is not seen.

CBD : The CBD is of normal caliber.

Pancreas : The pancreas is partly obscured by bowel gas. No obvious focal lesion is seen.

Kidneys : Both kidneys were normal in position:

Right kidney measures 10.9 cm

Left Kidney measures 10.9 cm

The renal cortical thickness and corticomedullary differentiation were adequate on both sides. No evidence of renal calculus or hydronephrosis seen on either sides.

Spleen : The spleen is normal in size and echogenicity.

Urinary Bladder : The urinary bladder is normal in size. Its walls show a smooth outline. There is no evidence of any intraluminal or perivesical abnormality.

Prostate : The prostate is normal in size, measures (13.0 gm) and shows normal parenchymal echogenicity.

No significant probe tenderness in RIF.

No evidence of pleural effusion on either side.

No evidence of ascites or lymphadenopathy seen.

IMPRESSION : ENLARGED GRADE – II FATTY LIVER.

Please correlate clinically.



Dr. Ambuj Srivastav
M.D. Consultant Radiologist.

MR. ADAR KUMAR SHA, Age - 48

4-03-20 12:24:50



ID: 2024032011221855

Name

2024-03-20 12:24:50

Vent. Rate (bpm) 48
PR Interval (ms) 150
QRS Duration (ms) 96
QT/QTc Interval (ms) 446/425
P/QRS/T Axes (deg) 25/11/15

Sinus bradycardia

--- Interpretation made without knowing patient's gender/age ---

Normal ECG except for rate

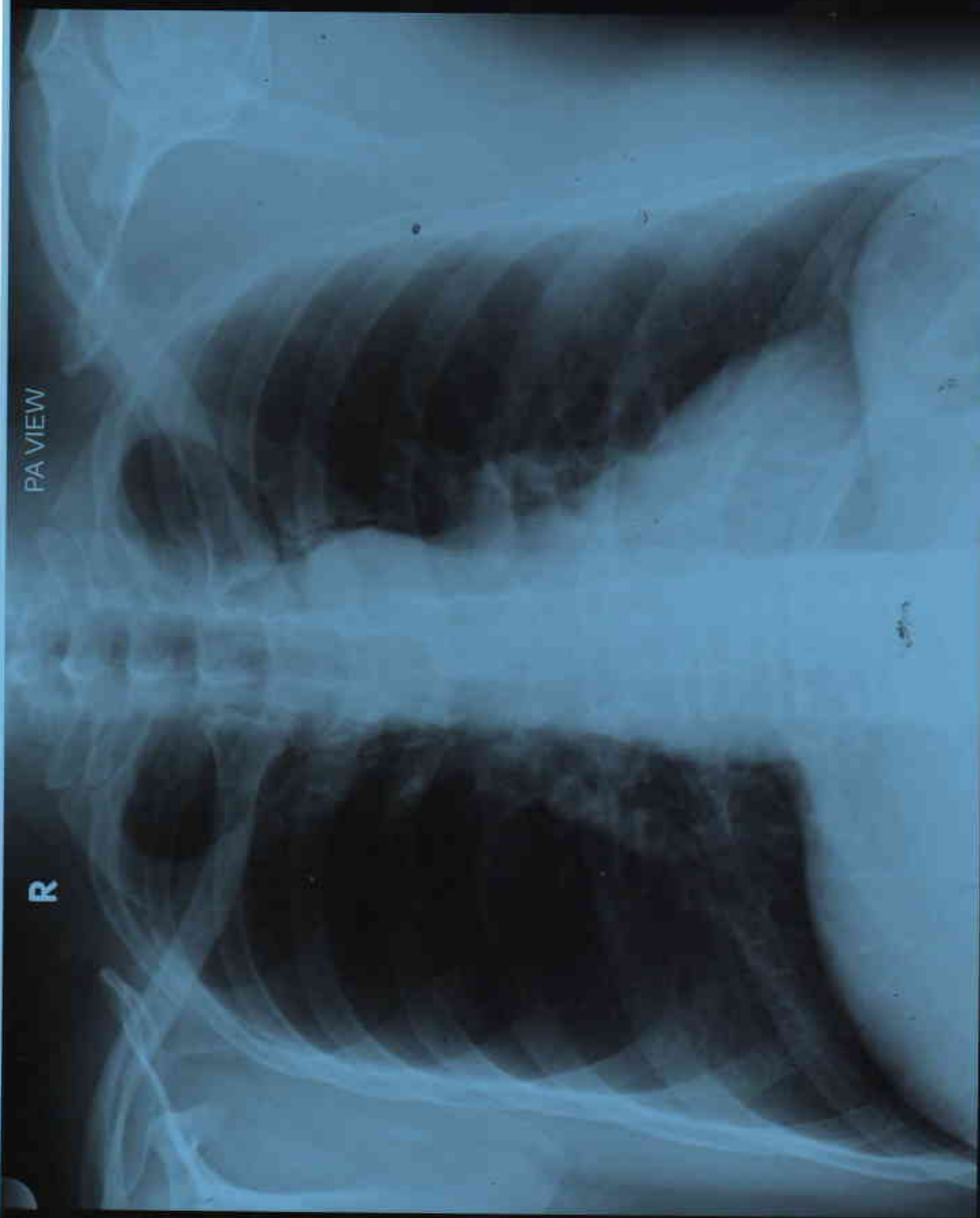
Unconfirmed Diagnosis



Dr. Krishna Mirani Prasad
MBBS, DNB, Cardiology

PA VIEW

R



AJAY KUMAR JHA, AGE 51Y/M, MEDIWHEEL, EBR/202421038, CHEST PA VIEW, 20/03/2024
BERLIN DIAGNOSTICS & DAY CARE, BARIATU ROAD, RANCHI.

Patient Name	AJAY KUMAR JHA	Patient ID	BER/202421038
Age/Gender	51Years / M	Study Date	20-Mar-2024
Referred By	MEDIWHEEL	Reported Date	20-Mar-2024

X – RAY CHEST PA VIEW:

FINDINGS :-

Both lung fields under vision appear normal.

Cardiac size appears normal.

Both costophrenic angles are clear.

Hilar regions are normal.

Both domes appear normal in position.

Bony thorax under vision appears normal.

IMPRESSION : NORMAL STUDY



Dr. Anjali Tanna
MD Radiology REG-34614

Date Reported: 20-Mar-2024

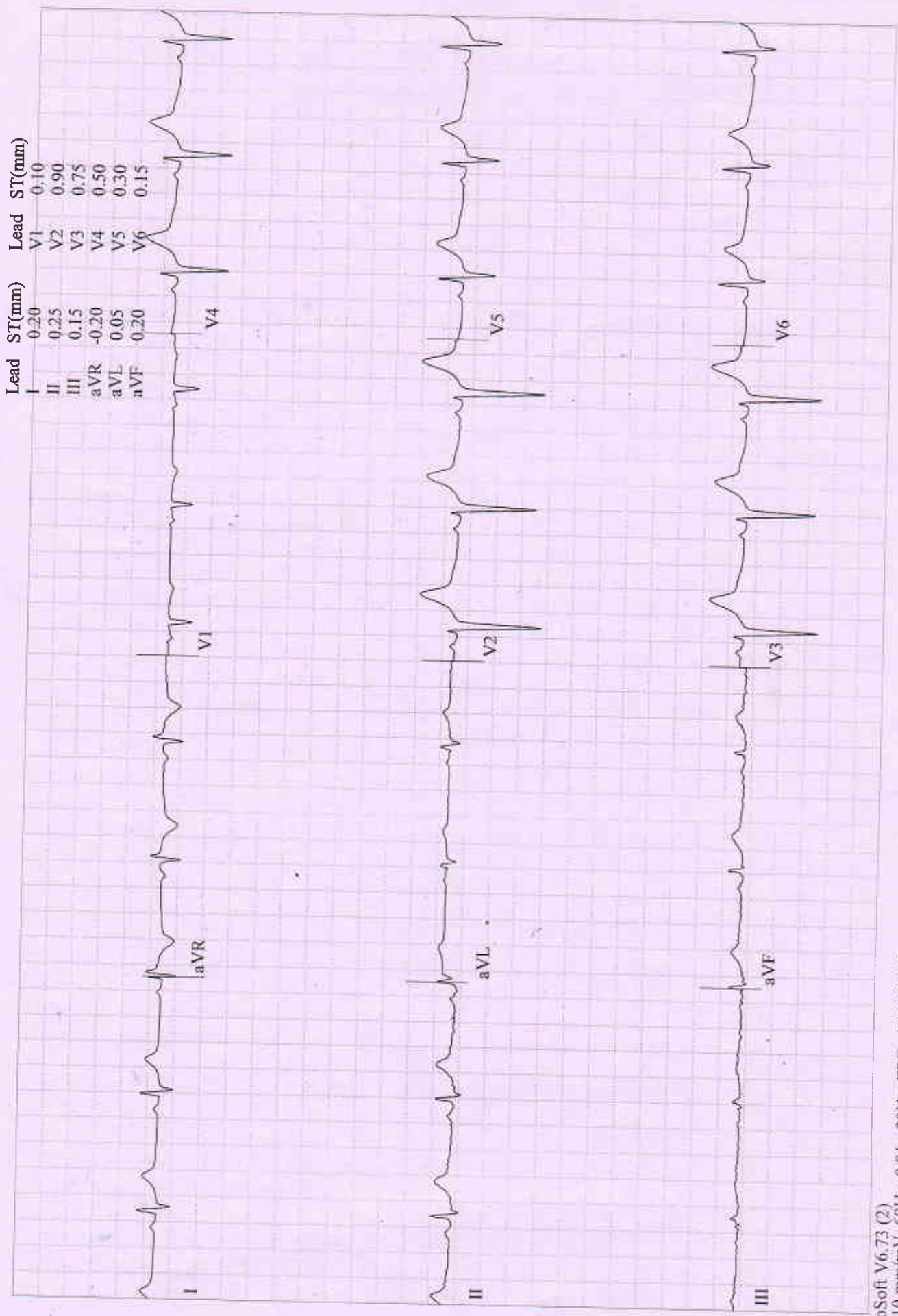
JHA, MR. AJAY KUMAR
Patient ID 202421038
20.03.2024
10:56:45am

12-Lead Report
PRETEST
SUPINE
01:02

70 bpm
120/90 mmHg

BRUCE
0.0 km/h
0.0 %

BERLIN DIAGNOSTICS AND DAY CARE
Measured at 60ms Post J (10mm/mV)
Auto Points



GE CardioSoft V6.73 (2)
2.5 mm/s 10 mm/mV 60Hz 0.01 - 20Hz FRF- HR(V2,V3)

Start of Test: 10:55:25am

JHA, MR. AJAY KUMAR

Patient ID 202421038

20.03.2024

10:57:20am

12-Lead Report

PRETEST

STANDING

01:37

69 bpm

120/90 mmHg

BERLIN DIAGNOSTICS AND DAY CARE

BRUCE

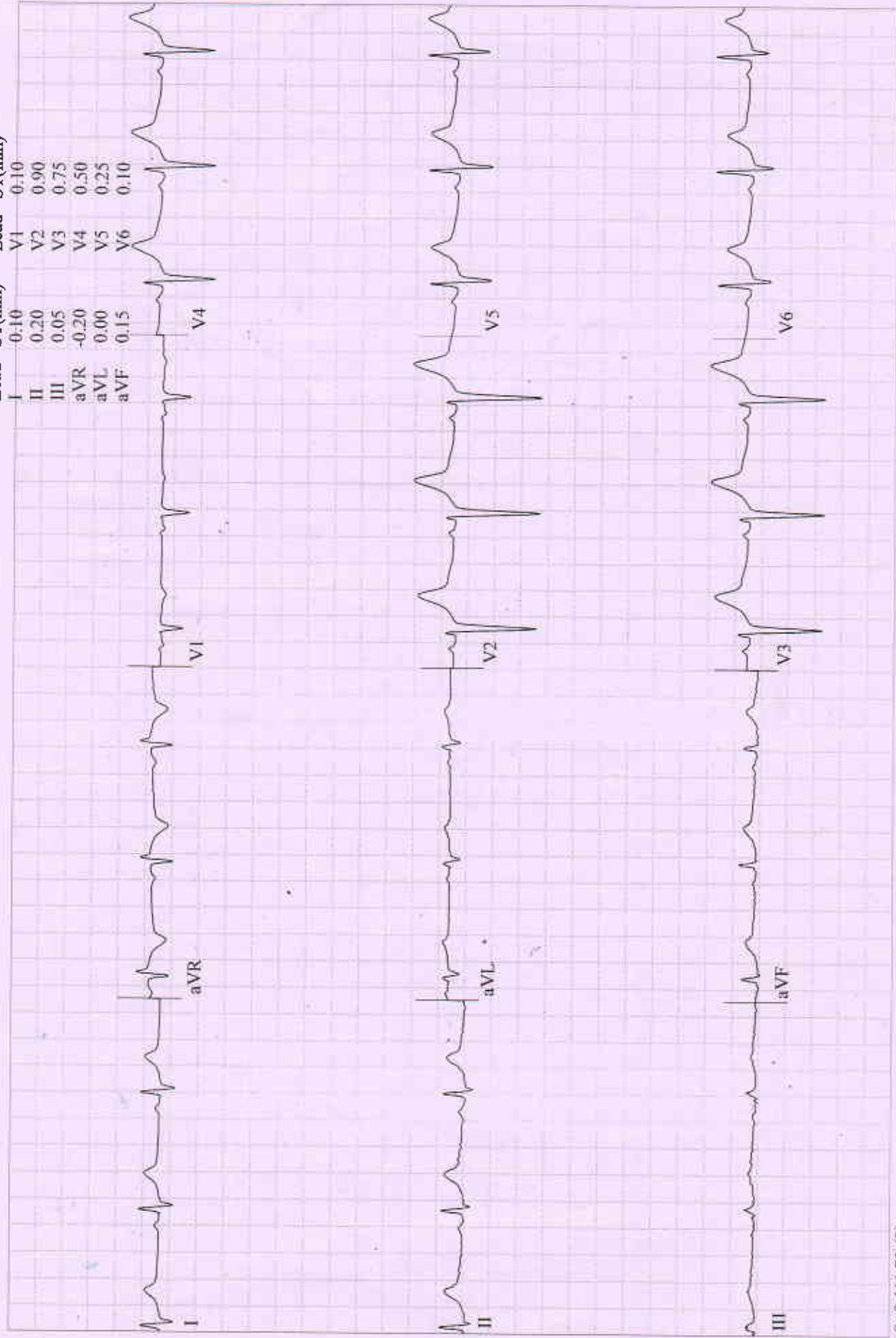
0.0 km/h

0.0 %

Measured at 60ms Post J (10mm/mV)

Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.10	V1	0.10
II	0.20	V2	0.90
III	0.05	V3	0.75
aVR	-0.20	V4	0.50
aVL	0.00	V5	0.25
aVF	0.15	V6	0.10



JHA, MR. AJAY KUMAR
Patient ID 202421038
20.03.2024
10:58:02am

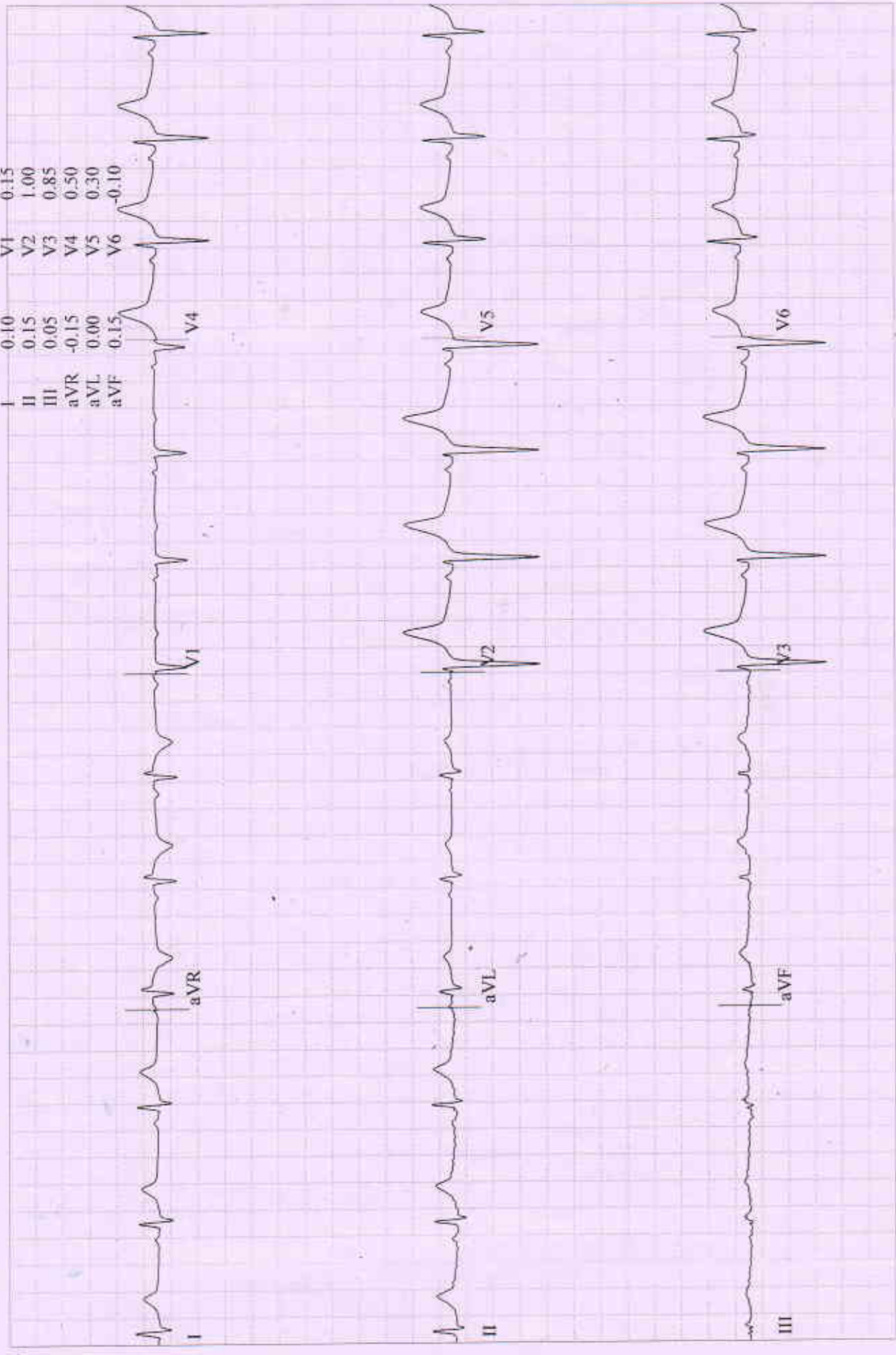
12-Lead Report
PRETEST
HYPERV.
02:19

73 bpm
120/90 mmHg

BRUCE
0.0 km/h
0.0 %

BERLIN DIAGNOSTICS AND DAY CARE
Measured at 60ms Post J (10mm/mV)
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	0.10	V1	0.15
II	0.15	V2	1.00
III	0.05	V3	0.85
aVR	-0.15	V4	0.50
aVL	0.00	V5	0.30
aVF	0.15	V6	-0.10



JHA, MR. AJAY KUMAR
Patient ID 202421038
20.03.2024
10:58:23am

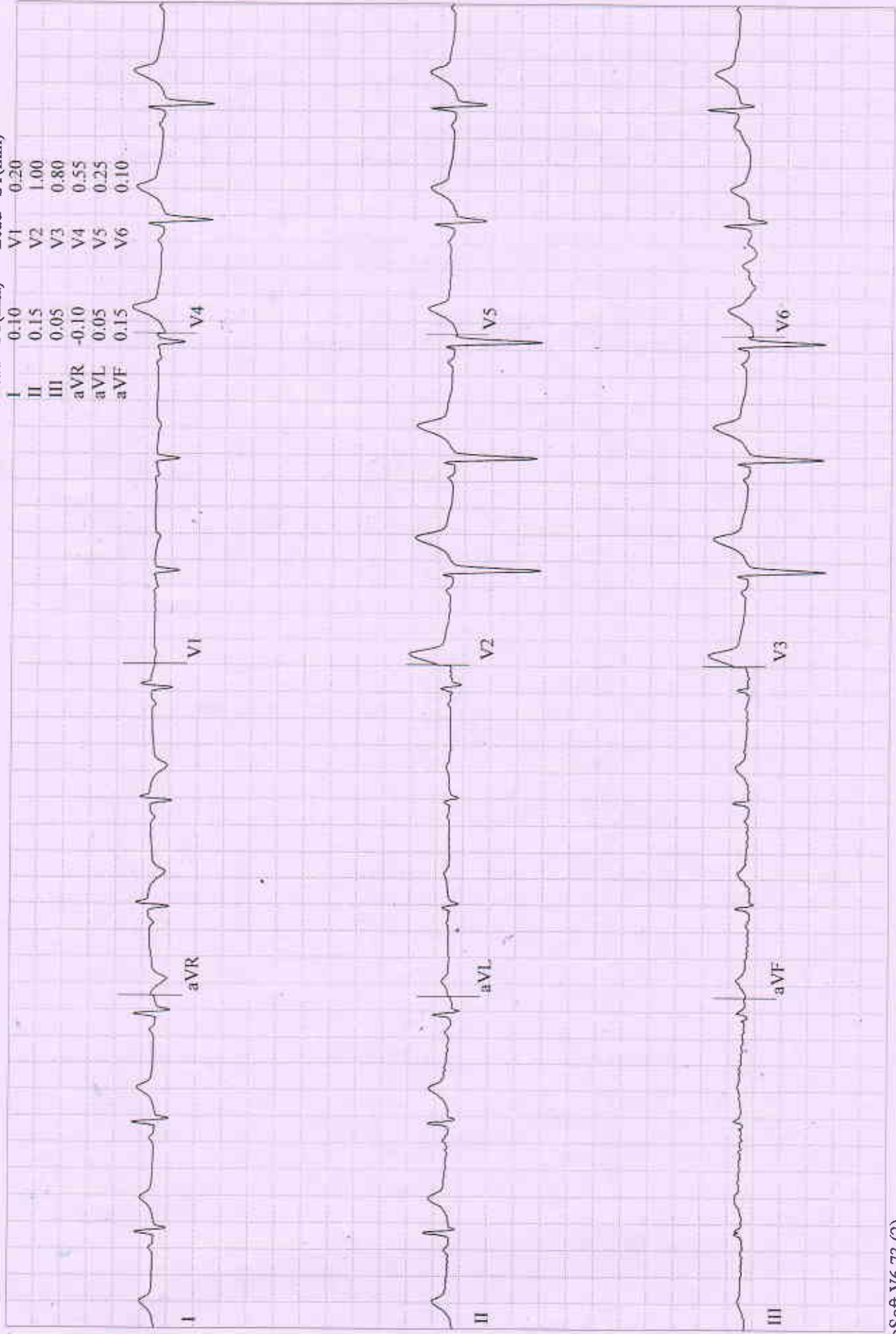
12-Lead Report
PRETEST
WARM-UP
02:40

72 bpm
120/90 mmHg

BERLIN DIAGNOSTICS AND DAY CARE
Measured at 60ms Post J (10mm/mV)
Auto Points

BRUCE
0.0 km/h
0.0 %

Lead	ST(mm)	Lead	ST(mm)
I	0.10	V1	0.20
II	0.15	V2	1.00
III	0.05	V3	0.80
aVR	-0.10	V4	0.55
aVL	0.05	V5	0.25
aVF	0.15	V6	0.10



JHA, MR. AJAY KUMAR
 Patient ID 202421038
 20.03.2024
 11:01:47am

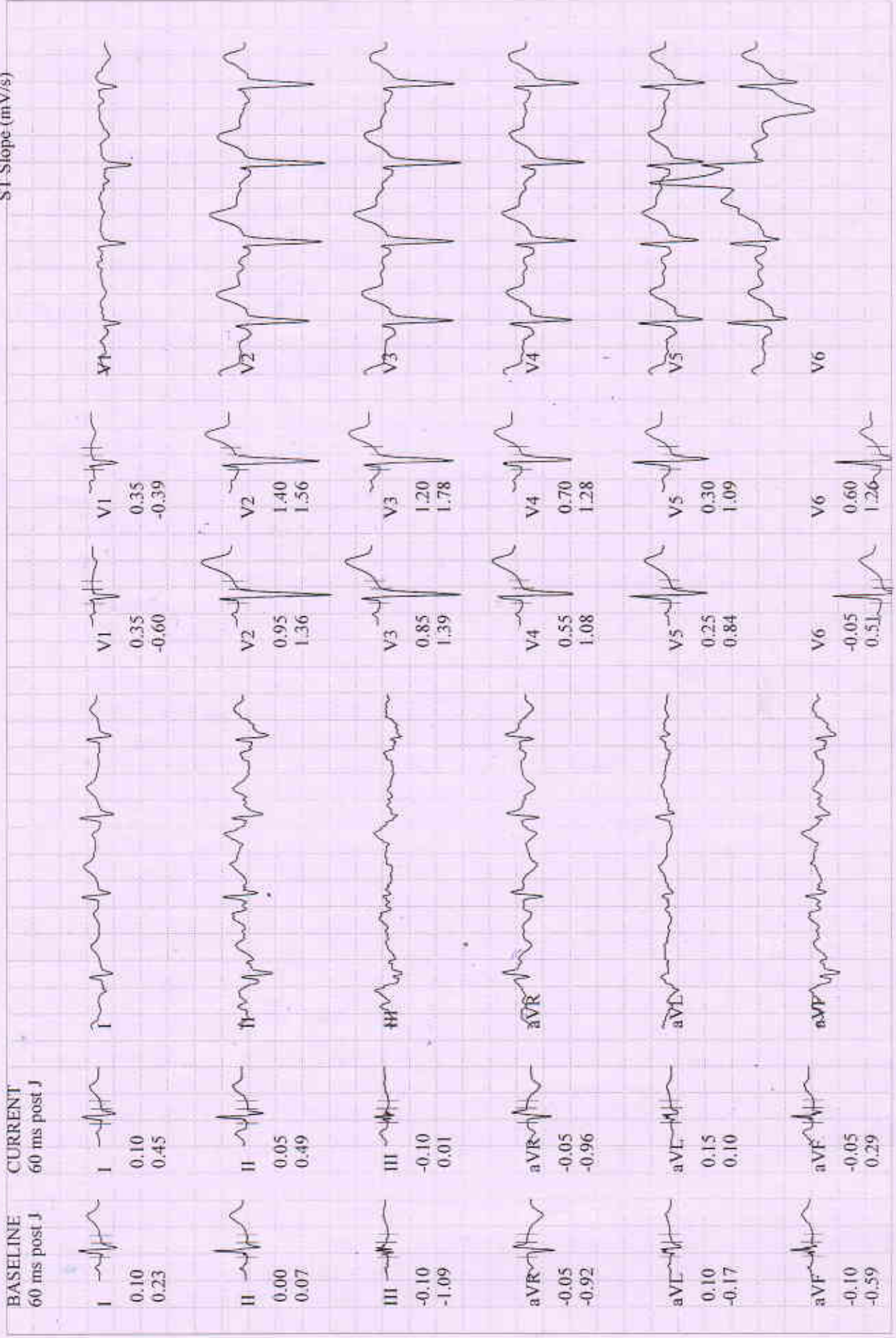
Comparative Medians Report

EXERCISE
 STAGE 1
 02:50

101 bpm
 130/96 mmHg

BRUCE
 2.7 km/h
 10.0 %

Lead
 ST Level (mm)
 ST Slope (mV/s)



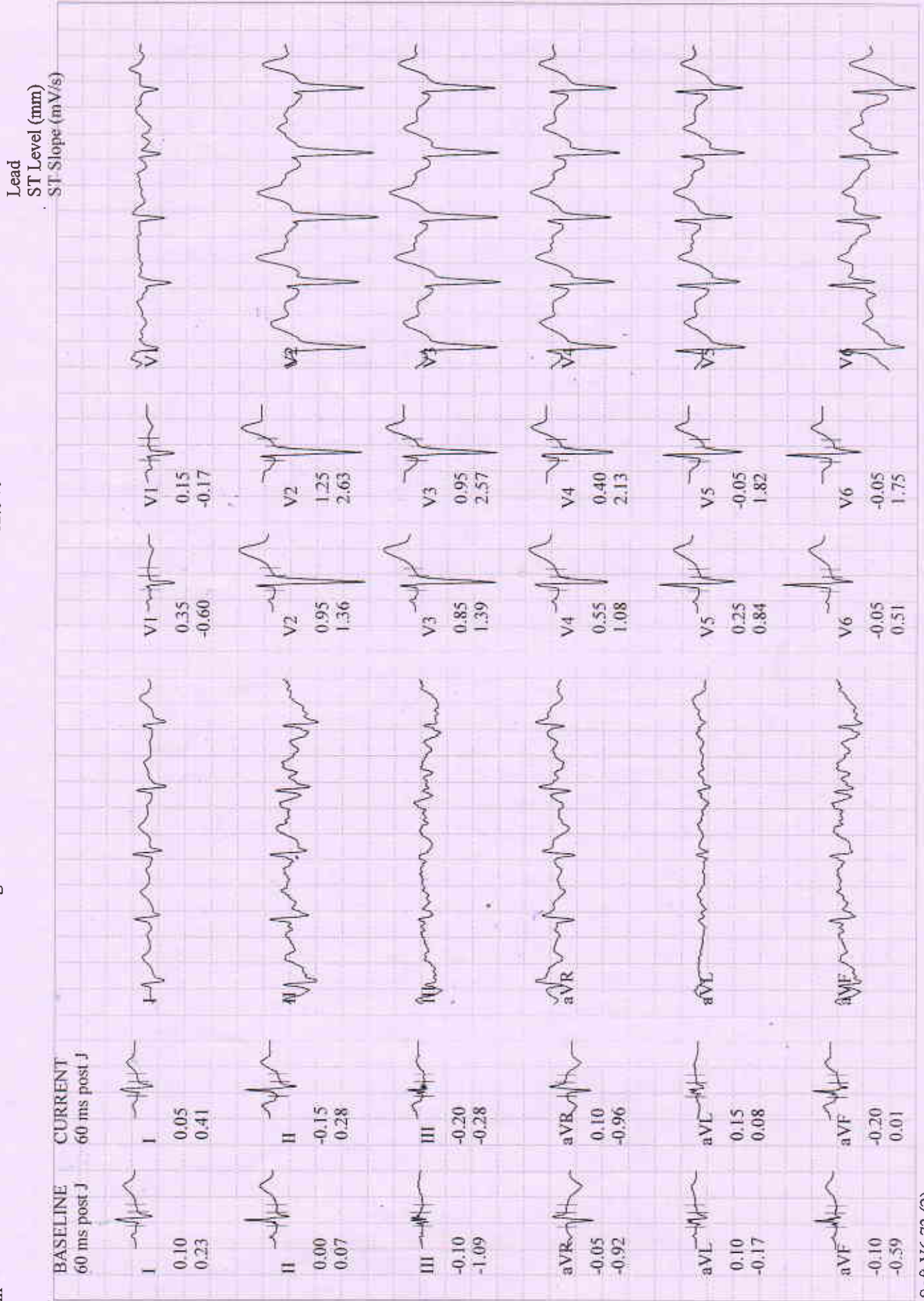
JHA, MR. AJAY KUMAR
 Patient ID 202421038
 20.03.2024
 11:04:47am

Comparative Medians Report
 EXERCISE
 STAGE 2
 05:50

120 bpm
 140/100 mmHg

BRUCE
 4.0 km/h
 12.0 %

BERLIN DIAGNOSTICS AND DAY CARE



JHA, MR. AJAY KUMAR
Patient ID 202421038
20-03-2024
11:07:12am

12-Lead Report (PEAK EXERCISE)

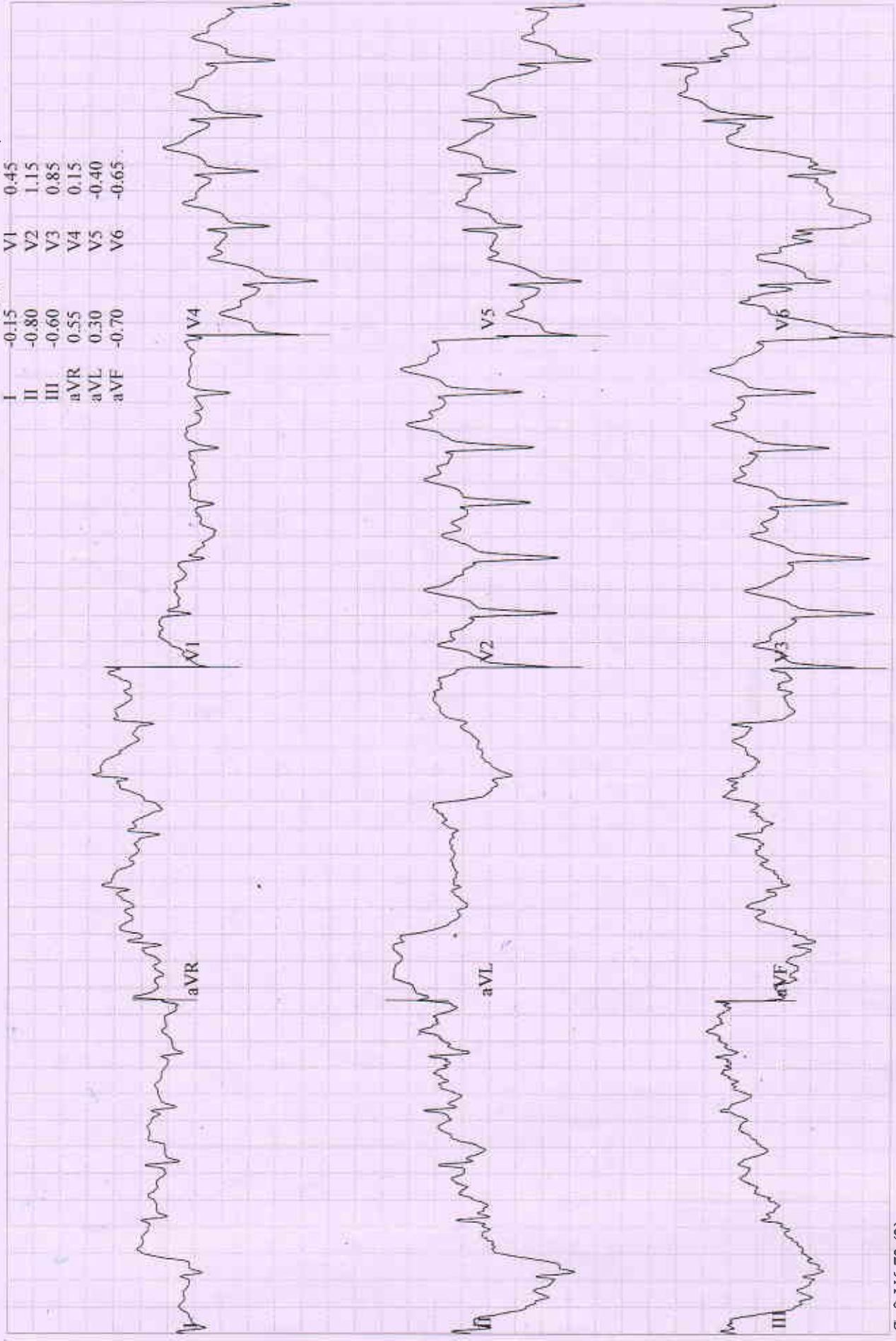
EXERCISE
STAGE 3
08:10

144 bpm
146/104 mmHg

BERLIN DIAGNOSTICS AND DAY CARE

Measured at 60ms Post J (10mm/mV)
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	-0.15	V1	0.45
II	-0.80	V2	1.15
III	-0.60	V3	0.85
aVR	0.55	V4	0.15
aVL	0.30	V5	-0.40
aVF	-0.70	V6	-0.65



JHA, MR. AJAY KUMAR
 Patient ID 202421038
 20.03.2024
 11:07:56am

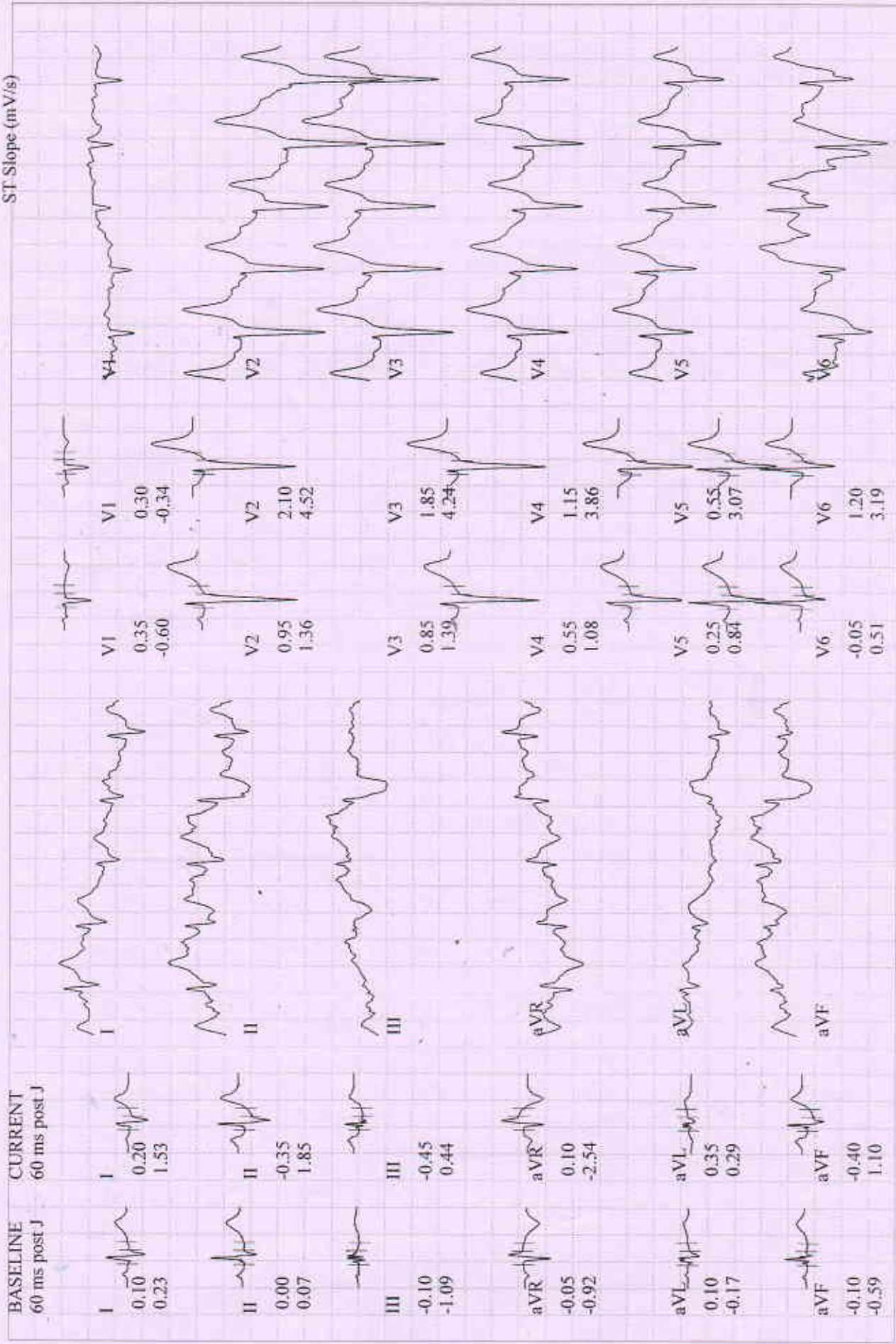
127 bpm
 140/100 mmHg

Comparative Medians Report
 RECOVERY
 #1
 00:50

BRUCE
 2.4 km/h
 0.0 %

BERLIN DIAGNOSTICS AND DAY CARE

Lead
 ST Level (mm)
 ST Slope (mV/s)



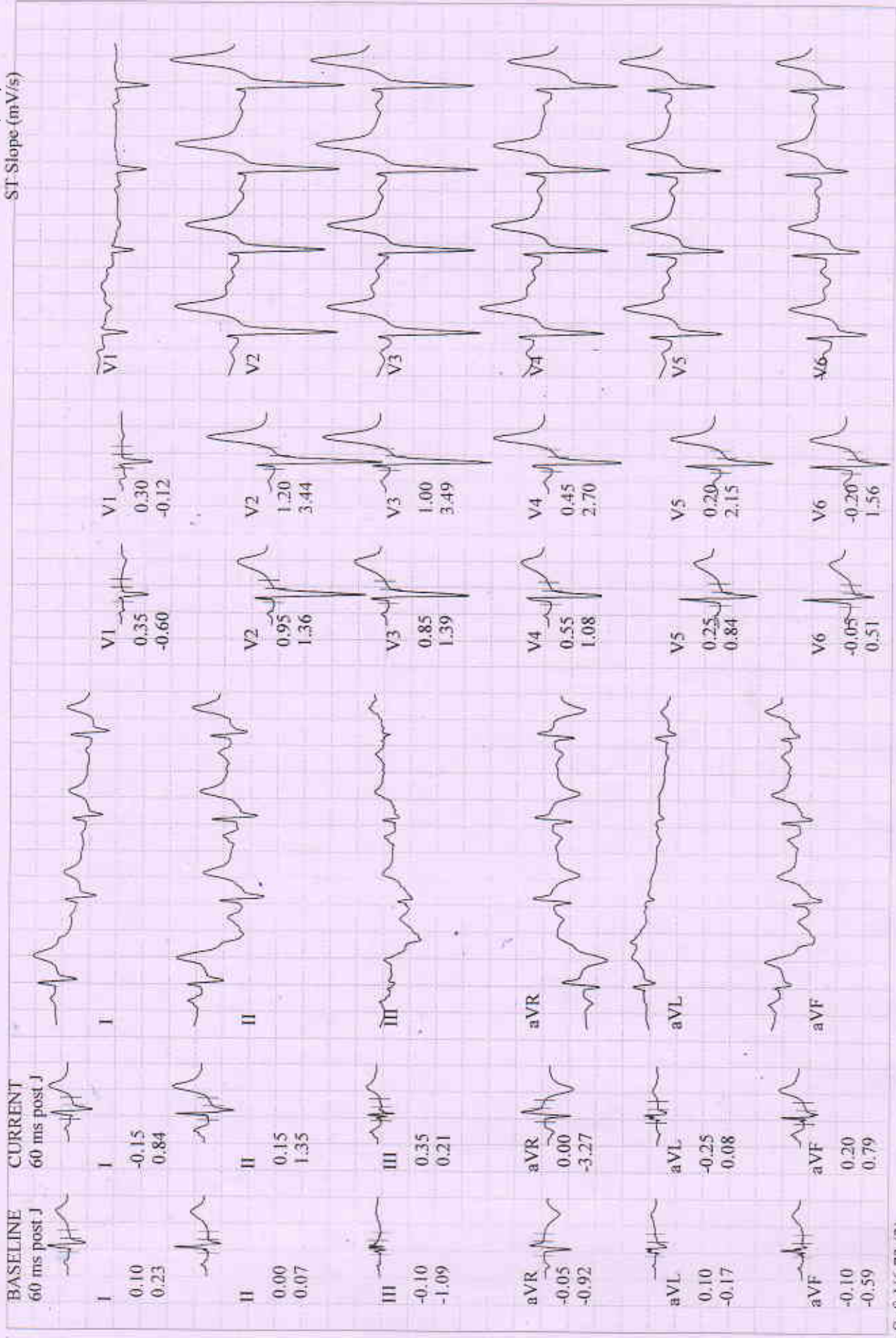
JHA, MR. AJAY KUMAR
 Patient ID 202421038
 20.03.2024
 11:08:56am

Comparative Medians Report
 RECOVERY #1 01:50
 97 bpm
 136/94 mmHg

BRUCE
 0.0 km/h
 0.0 %

BERLIN DIAGNOSTICS AND DAY CARE

Lead
 ST Level (mm)
 ST Slope (mV/s)



JHA, MR. AJAY KUMAR
 Patient ID 202421038
 20.03.2024
 11:09:46am

Comparative Medians Report

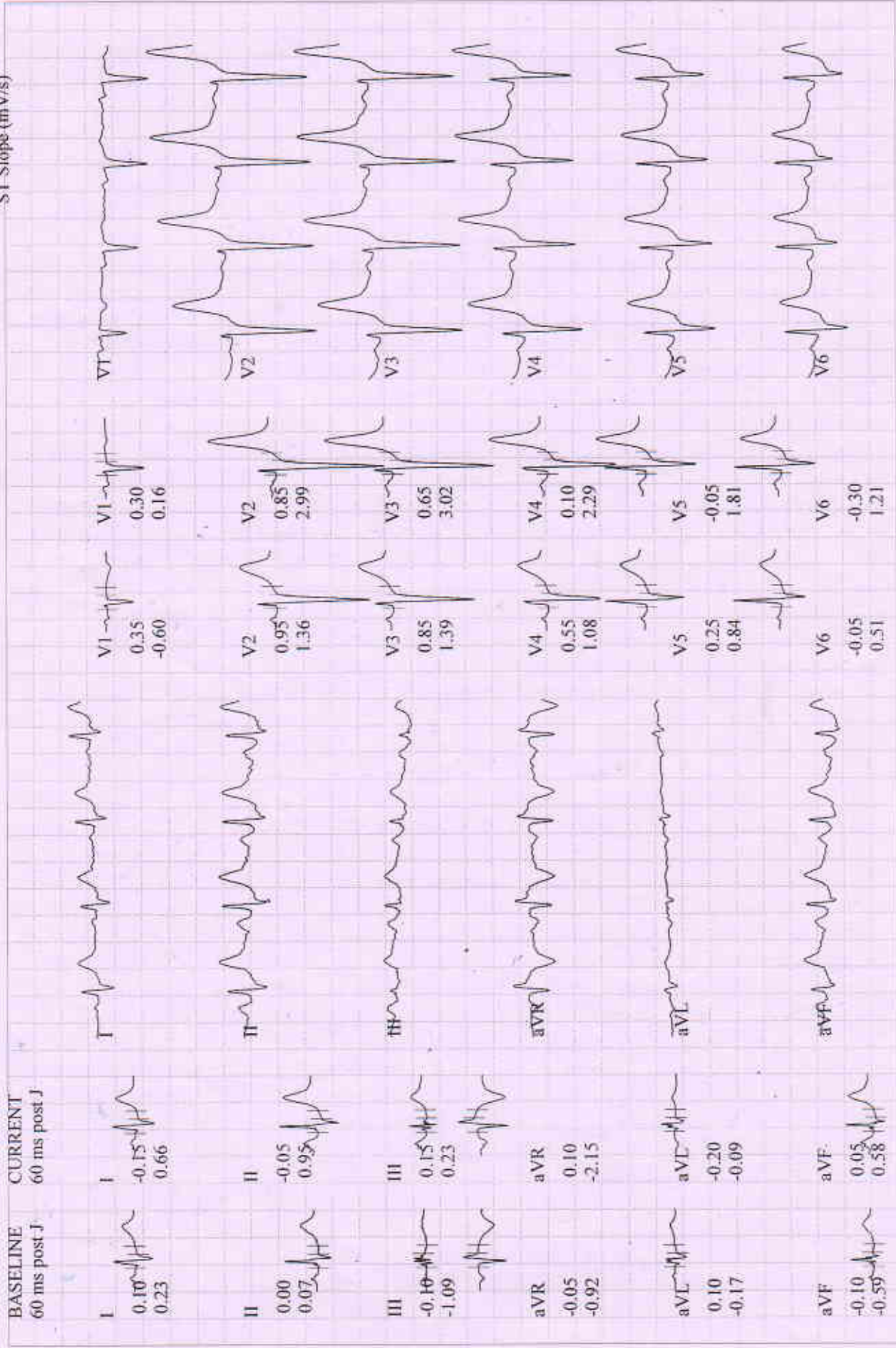
BRUCE
 0.0 km/h
 0.0 %

95 bpm
 130/90 mmHg

RECOVERY
 #1
 02:40

Lead

ST Level (mm)
 ST Slope (mV/s)



BASELINE EXERCISE	MAX. ST EXERCISE	PEAK EXERCISE	TEST END RECOVERY	BASELINE EXERCISE	MAX. ST EXERCISE	PEAK EXERCISE	TEST END RECOVERY
0:01 75 bpm 120/90 mmHg	8:00 142 bpm 146/104 mmHg	8:10 144 bpm 146/104 mmHg	2:21 101 bpm 130/90 mmHg	0:01 75 bpm 120/90 mmHg	8:00 142 bpm 146/104 mmHg	8:10 144 bpm 146/104 mmHg	2:21 101 bpm 130/90 mmHg
I 0.10 mm 0.23 mV/s	I 0.10 0.32	I -0.25 0.17	I -0.15 0.84	V1 0.35 -0.60	V1 0.25 0.01	V1 0.50 0.47	V1 0.25 -0.08
II 0.00 0.07	II -0.90 0.06	II -0.90 -0.41	II -0.10 1.33	V2 0.95 1.36	V2 1.20 3.40	V2 1.45 3.75	V2 0.95 3.17
III -0.10 -1.09	III -1.05 -0.14	III -0.45 -0.34	III 0.00 0.20	V3 0.85 1.39	V3 0.85 3.04	V3 0.45 3.73	V3 0.85 3.09
aVR -0.05 -0.92	aVR 0.40 -0.61	aVR 0.70 -0.07	aVR 0.10 -2.10	V4 0.55 1.08	V4 -0.15 2.54	V4 0.20 3.31	V4 0.45 2.42
aVL 0.10 -0.17	aVL 0.60 0.28	aVL 0.15 0.20	aVL -0.05 0.08	V5 0.25 0.84	V5 -0.65 2.10	V5 -0.50 2.32	V5 -0.05 1.81
aVF -0.10 -0.59	aVF -0.95 -0.04	aVF -0.65 -0.20	aVF 0.00 0.79	V6 -0.05 0.51	V6 0.20 2.52	V6 0.10 5.40	V6 -0.20 1.33

JHA, MR. AJAY KUMAR
 Patient ID 202421038
 20.03.2024 Male 187 cm 111 kg
 10:55:25am 50yrs Asian
 Meds:

Tabular Summary

BERLIN DIAGNOSTICS AND DAY CARE

BRUCE: Total Exercise Time 08:09
 Max HR: 146 bpm 85% of max predicted 170 bpm HR at rest: 65
 Max BP: 146/104 mmHg BP at rest: 120/90 Max RPP: 21024 mmHg*bpm
 Maximum Workload: 10.00 METS
 Max. ST: -1.05 mm, 0.00 mV/s in III; EXERCISE STAGE 3 08:00
 Arrhythmia: A:20, PVC:1
 ST/HR index: 1.18 μ V/bpm

Reasons for Termination: Target heart rate achieved

Summary: Functional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: appropriate response. Chest Pain: none. Arrhythmias: none.

Conclusion:

- (ve) TMT is insignificant ST-changes.
 - stress study.

Ref. MD: Ordering MD:
 Technician: Test Type:
 Comment:

DR. R.K. CHATURVEDI
 M.B.B.S. M.D (N.MED) 2010/3/2024
 DIP. CARDIOLOGY

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (mmHg*bpm)	VE (/min)	ST Level (III mm)	Comment
PRETEST	SUPINE	01:27	0.00	0.00	1.0	69	120/90	8280	0	0.05	
	STANDING	00:23	0.00	0.00	1.0	68	120/90	8160	0	0.05	
	HYPERV.	00:41	0.00	0.00	1.0	74	120/90	8880	0	0.10	
EXERCISE	WARM-UP	00:50	1.60	0.00	1.5	74	120/90	8880	0	-0.20	
	STAGE 1	03:00	2.70	10.00	4.6	103	130/96	13390	0	-0.15	
	STAGE 2	03:00	4.00	12.00	7.0	120	140/100	16800	0	-0.25	
RECOVERY	STAGE 3	02:10	5.40	14.00	10.0	144	146/104	21024	1	-0.45	
		02:43	0.00	0.00	1.0	96	130/90	12480	0	0.10	

BERLIN
 DIAGNOSTICS & DAY CARE
 R. K. CHATURVEDI
 MBBS, MD (N. Medicine)
 Fellowship from Houston University, USA
 Reg. No: 62434 (Bihar)