

TEST REPORT

Reg. No. : 408100272 **Reg. Date** : 12-Aug-2024 08:46 **Ref.No** : **Approved On** : 12-Aug-2024 11:23
Name : Mrs. BHATT JAGRUTI MAHESH **Collected On** : 12-Aug-2024 10:15
Age : 57 Years **Gender:** Female **Pass. No.** : **Dispatch At** :
Ref. By : APOLLO **Tele No.** :
Location :

Test	Results	Unit	Bio. Ref. Interval
Complete Blood Count			
Hemoglobin(SLS method)	13.1	g/dL	12.0 - 15.0
RBC Count(Ele.Impedence)	4.56	X 10 ¹² /L	3.8 - 4.8
Hematocrit (calculated)	39.2	%	36 - 46
MCV (Calculated)	86.0	fL	83 - 101
MCH (Calculated)	28.7	pg	27 - 32
MCHC (Calculated)	33.4	g/dL	31.5 - 34.5
RDW-SD(calculated)	43.10	fL	36 - 46
Total WBC count	7600	/μL	4000 - 10000
DIFFERENTIAL WBC COUNT			
	[%]	EXPECTED VALUES	[Abs] EXPECTED VALUES
Neutrophils	54	38 - 70	4104 /cmm 1800 - 7700
Lymphocytes	37	21 - 49	2812 /cmm 1000 - 3900
Eosinophils	03	0 - 7	228 /cmm 20 - 500
Monocytes	06	3 - 11	456 /cmm 200 - 800
Basophils	00	0 - 1	0 /cmm 0 - 100
NLR (Neutrophil: Lymphocyte Ratio)	1.46	Ratio	1.1 - 3.5
Platelet Count (Ele.Impedence)	377000	/cmm	150000 - 410000
PCT	0.36	ng/mL	< 0.5
MPV	9.50	fL	6.5 - 12.0
Peripheral Smear			
RBCs	Normocytic normochromic.		
WBCs	Normal morphology		
Platelets	Adequate on Smear		
Malarial Parasites	Not Detected		

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Test done from collected sample.



Approved by: **Dr. Keyur Patel** Page 1 of 14

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For Appointment : 7567 000 750
 www.conceptdiagnostics.com
 conceptdiaghealthcare@gmail.com

1st Floor, Sahajand Palace, Near Gopi Restaurant, Anandnagar Cross Road, Prahladnagar, Ahmedabad-15.

Approved On: 12-Aug-2024 11:23

M.B.B.S.,D.C.P(Patho)
G- 22475

TEST REPORT

Reg. No. : 408100272	Reg. Date : 12-Aug-2024 08:46	Ref.No :	Approved On : 12-Aug-2024 13:26
Name : Mrs. BHATT JAGRUTI MAHESH			Collected On : 12-Aug-2024 10:15
Age : 57 Years	Gender: Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
BLOODGROUP & RH			
<u>Specimen: EDTA and Serum; Method: Gel card system</u>			
Blood Group "ABO" <i>Agglutination</i>	"O"		
Blood Group "Rh" <i>Agglutination</i>	Positive		
EDTA Whole Blood			




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TEST REPORT

Reg. No. : 408100272	Reg. Date : 12-Aug-2024 08:46	Ref.No :	Approved On : 12-Aug-2024 12:36
Name : Mrs. BHATT JAGRUTI MAHESH			Collected On : 12-Aug-2024 10:15
Age : 57 Years	Gender: Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
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FASTING PLASMA GLUCOSE
Specimen: Fluoride plasma

Fasting Plasma Glucose <i>Hexokinase</i>	H 119.79	mg/dL	Normal: <=99.0 Prediabetes: 100-125 Diabetes :>=126
--	-----------------	--------------	---

Flouride Plasma

Criteria for the diagnosis of diabetes:

1. HbA1c >= 6.5 *

Or

2. Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.

Or

3. Two hour plasma glucose >= 200mg/dL during an oral glucose tolerance test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.

Or

4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose >= 200 mg/dL. *In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing. American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34:S11.

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Name : Mrs. BHATT JAGRUTI MAHESH			Collected On : 12-Aug-2024 12:30
Age : 57 Years	Gender: Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
POST PRANDIAL PLASMA GLUCOSE			
Specimen: Fluoride plasma			
Post Prandial Plasma Glucose <i>Hexokinase</i>	153.99	mg/dL	Normal: <=139 Prediabetes : 140-199 Diabetes: >=200
Flouride Plasma			

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Age : 57 Years	Gender: Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
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GGT	30.60	U/L	6 - 42
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L-Y-Glutamyl-3 Carboxy-4-Nitroanilide, Enzymetic Colorimetric

Serum

Uses:

- Diagnosing and monitoring hepatobiliary disease.
- To ascertain whether the elevated ALP levels are due to skeletal disease or due to presence of hepatobiliary disease.
- A screening test for occult alcoholism.

Increased in:

- Intra hepatic biliary obstruction.
- Post hepatic biliary obstruction
- Alcoholic cirrhosis
- Drugs such as phenytoin and phenobarbital.
- Infectious hepatitis (modest elevation)
- Primary/ Secondary neoplasms of liver.




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Reg. No. : 408100272	Reg. Date : 12-Aug-2024 08:46	Ref.No :	Approved On : 12-Aug-2024 12:34
Name : Mrs. BHATT JAGRUTI MAHESH			Collected On : 12-Aug-2024 10:15
Age : 57 Years	Gender: Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
<u>LIPID PROFILE</u>			
CHOLESTEROL	221.00	mg/dL	Desirable <=200 Borderline high risk 200 - 240 High Risk >240
Triglyceride <i>Enzymatic Colorimetric Method</i>	110.00	mg/dL	<150 : Normal, 150-199 : Border Line High, 200-499 : High, >=500 : Very High
Very Low Density Lipoprotein(VLDL) <i>Calculated</i>	22	mg/dL	0 - 30
Low-Density Lipoprotein (LDL) <i>Calculated Method</i>	H 134.16	mg/dL	< 100 : Optimal, 100-129 : Near Optimal/above optimal, 130-159 : Borderline High, 160-189 : High, >=190 : Very High
High-Density Lipoprotein(HDL)	64.84	mg/dL	<40 >60
CHOL/HDL RATIO <i>Calculated</i>	3.41		0.0 - 3.5
LDL/HDL RATIO <i>Calculated</i>	2.07		1.0 - 3.4
TOTAL LIPID <i>Calculated</i>	622.00	mg/dL	400 - 1000
Serum			

As a routine test to determine if your cholesterol level is normal or falls into a borderline-, intermediate- or high-risk category.
 To monitor your cholesterol level if you had abnormal results on a previous test or if you have other risk factors for heart disease.
 To monitor your body's response to treatment, such as cholesterol medications or lifestyle changes.
 To help diagnose other medical conditions, such as liver disease.
 Note : biological reference intervals are according to the national cholesterol education program (NCEP) guidelines.

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Age : 57 Years	Gender: Female	Pass. No. :	Dispatch At :
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Location :			

Test Name	Results	Units	Bio. Ref. Interval
<u>LIVER FUNCTION TEST</u>			
TOTAL PROTEIN	7.42	g/dL	6.6 - 8.8
ALBUMIN	4.27	g/dL	3.5 - 5.2
GLOBULIN <i>Calculated</i>	3.15	g/dL	2.4 - 3.5
ALB/GLB <i>Calculated</i>	1.36		1.2 - 2.2
SGOT	16.40	U/L	<31
SGPT	11.10	U/L	<31
Alkaline Phosphatase <i>ENZYMATIC COLORIMETRIC IFCC, PNP, AMP BUFFER</i>	80.20	U/L	40 - 130
TOTAL BILIRUBIN	0.66	mg/dL	0.1 - 1.2
DIRECT BILIRUBIN	0.16	mg/dL	<0.2
INDIRECT BILIRUBIN <i>Calculated</i>	0.50	mg/dL	0.0 - 1.00
Serum			

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Age : 57 Years **Gender:** Female **Pass. No. :** **Dispatch At** :
Ref. By : APOLLO **Tele No.** :
Location :

Test Name	Results	Units	Bio. Ref. Interval
HEMOGLOBIN A1C (HBA1C) <i>Method:HPLC</i>	6.50	%	Normal: <= 5.6 Prediabetes: 5.7-6.4 Diabetes: >= 6.5 Diabetes Control Criteria : 6-7 : Near Normal Glycemia <7 : Goal 7-8 : Good Control >8 : Action Suggested
Mean Blood Glucose <i>(Calculated)</i>	140	mg/dL	
EDTA Whole Blood			

Criteria for the diagnosis of diabetes

- HbA1c >= 6.5 * Or Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs. Or
- Two hour plasma glucose >= 200mg/dL during an oral glucose tolerance test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water. Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose >= 200 mg/dL. *In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011:34:S11.

Limitation of HbA1c

- In patients with Hb variants even analytically correct results do not reflect the same level of glycemic control that would be expected in patients with normal population.
 - Any cause of shortened erythrocyte survival or decreased mean erythrocyte survival or decreased mean erythrocyte age eg. hemolytic diseases, pregnancy, significant recent/chronic blood loss etc. will reduce exposure of RBC to glucose with consequent decrease in HbA1c values.
 - Glycated HbF is not detected by this assay and hence specimens containing high HbF (>10%) may result in lower HbA1c values than expected. Importance of HbA1C (Glycated Hb.) in Diabetes Mellitus
- HbA1C, also known as glycated heamoglobin, is the most important test for the assessment of long term blood glucose control(also called glycemic control).
 - HbA1C reflects mean glucose concentration over pas 6-8 weeks and provides a much better indication of longterm glycemic control than blood glucose determination.
 - HbA1c is formed by non-enzymatic reaction between glucose and Hb. This reaction is irreversible and therefore remains unaffected by short term fluctuations in blood glucose levels.
 - Long term complications of diabetes such as retinopathy (Eye-complications), nephropathy (kidney-complications) and neuropathy (nerve complications), are potentially serious and can lead to blindness, kidney failure, etc.
 - Glyemic control monitored by HbA1c measurement using HPLC method (GOLD STANDARD) is considered most important. (Ref. National Glycohaemoglobin Standardization Program - NGSP)
- Note : Biological reference intervals are according to American Diabetes Association (ADA) Guidelines.




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Age : 57 Years **Gender:** Female **Pass. No. :** **Dispatch At :**
Ref. By : APOLLO **Tele No. :**
Location :

Test Name	Results	Units	Bio. Ref. Interval
THYROID FUNCTION TEST			
T3 (triiodothyronine), Total <small>CMIA</small>	0.88	ng/mL	0.40 - 1.81
T4 (Thyroxine), Total <small>CMIA</small>	7.13	µg/dL	5.5 - 11.0
TSH (Thyroid stimulating hormone) <small>CMIA</small>	1.397	µIU/mL	0.35 - 4.94

Sample Type: Serum

Comments:

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL

Reference : Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders,2012:2170

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M.D. Biochemistry

Reg. No. :- G-32999

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TEST REPORT

Reg. No. : 408100272	Reg. Date : 12-Aug-2024 08:46	Ref.No :	Approved On : 12-Aug-2024 12:32
Name : Mrs. BHATT JAGRUTI MAHESH			Collected On : 12-Aug-2024 10:15
Age : 57 Years	Gender: Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
<u>URINE ROUTINE EXAMINATION</u>			
<u>Physical Examination</u>			
Colour	Pale Yellow		
Clarity	Clear		
<u>CHEMICAL EXAMINATION (by strip test)</u>			
pH	6.0		4.6 - 8.0
Sp. Gravity	1.030		1.002 - 1.030
Protein	Present(Trace)		Absent
Glucose	Absent		Absent
Ketone	Absent		Absent
Bilirubin	Absent		Nil
Nitrite	Absent		Nil
Leucocytes	Nil		Nil
Blood	Nil		Absent
<u>MICROSCOPIC EXAMINATION</u>			
Leucocytes (Pus Cells)	2-3		0 - 5/hpf
Erythrocytes (RBC)	6-8		0 - 5/hpf
Casts	Nil	/hpf	Absent
Crystals	Nil		Absent
Epithelial Cells	Occasional		Nil
Monilia	Absent		Nil
T. Vaginalis	Absent		Nil
Bacteria	Absent		Absent
Urine			

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Name : Mrs. BHATT JAGRUTI MAHESH			Collected On : 12-Aug-2024 10:15
Age : 57 Years	Gender : Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
Creatinine	0.89	mg/dL	0.51 - 1.5

Serum

Creatinine is the most common test to assess kidney function. Creatinine levels are converted to reflect kidney function by factoring in age and gender to produce the eGFR (estimated Glomerular Filtration Rate). As the kidney function diminishes, the creatinine level increases; the eGFR will decrease. Creatinine is formed from the metabolism of creatine and phosphocreatine, both of which are principally found in muscle. Thus the amount of creatinine produced is, in large part, dependent upon the individual's muscle mass and tends not to fluctuate much from day-to-day. Creatinine is not protein bound and is freely filtered by glomeruli. All of the filtered creatinine is excreted in the urine.




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Age : 57 Years	Gender: Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
Urea	42.1	mg/dL	17 - 43

Serum

Useful screening test for evaluation of kidney function. Urea is the final degradation product of protein and amino acid metabolism. In protein catabolism, the proteins are broken down to amino acids and deaminated. The ammonia formed in this process is synthesized to urea in the liver. This is the most important catabolic pathway for eliminating excess nitrogen in the human body. Increased blood urea nitrogen (BUN) may be due to prerenal causes (cardiac decompensation, water depletion due to decreased intake and excessive loss, increased protein catabolism, and high protein diet), renal causes (acute glomerulonephritis, chronic nephritis, polycystic kidney disease, nephrosclerosis, and tubular necrosis), and postrenal causes (eg, all types of obstruction of the urinary tract, such as stones, enlarged prostate gland, tumors). The determination of serum BUN currently is the most widely used screening test for the evaluation of kidney function. The test is frequently requested along with the serum creatinine test since simultaneous determination of these 2 compounds appears to aid in the differential diagnosis of prerenal, renal and postrenal hyperuremia.

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Age : 57 Years	Gender: Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
<u>ELECTROLYTES</u>			
Sodium (Na+) <small>Method:ISE</small>	140.1	mmol/L	136 - 145
Potassium (K+) <small>Method:ISE</small>	4.3	mmol/L	3.5 - 5.1
Chloride(Cl-) <small>Method:ISE</small>	103.2	mmol/L	98 - 107
Serum			

Comments

The electrolyte panel is ordered to identify electrolyte, fluid, or pH imbalance. Electrolyte concentrations are evaluated to assist in investigating conditions that cause electrolyte imbalances such as dehydration, kidney disease, lung diseases, or heart conditions. Repeat testing of the electrolyte or its components may be used to monitor the patient's response to treatment of any condition that may be causing the electrolyte, fluid or pH imbalance.

Report To Follow:
LBC PAP SMEAR (Cytology)

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

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G- 22475

Approved On: 12-Aug-2024 12:37



MER- MEDICAL EXAMINATION REPORT

Date of Examination		12-08-2024	
NAME		Bhatt Jagruti Mahesh	
AGE	57 Yrs	Gender	Female
HEIGHT(cm)	149 cm	WEIGHT (kg)	66 Kgs
BMI	29.7		
B.P.	136/80/85		
VISION CHECKUP		COLOR VISION: NORMAL	
SPH	CYL	Axis	Add 6/6 +2.25 6/6 NG
RE +0.75	+0.50	180°	
LE +0.75	+0.25	10°	
		RIGHT-	Normal
		LEFT-	Normal
ECG	Report Attached		
X Ray	Report Attached		
Present Ailments	— NA —		
Details of Past ailments (If Any)	— NA —		
Comments / Advice : She /He is Physically Fit	Physically fit.		

Dr. Vipul Chavda
 MD (Internal Medicine)
 Reg.No. G-18004

Signature with Stamp of Medical Examiner



MER- MEDICAL EXAMINATION REPORT

Date of Examination		12-08-2024	
NAME		Bhatt Jagruti Mahesh	
AGE		57 Yrs	Gender Female
HEIGHT(cm)		149 cm	WEIGHT (kg) 66 kgs
BMI		29.7	
B.P.			
VISION CHECKUP		COLOR VISION: NORMAL	
SPH	CYL	Axis	
RE +0.75	+0.50	180°	/ Add 6/6 +2.25 6/6 NG
LE +0.75	+0.25	10°	
		RIGHT-	Normal
		LEFT-	Normal
ECG		Report Attached	
X Ray		Report Attached	
Present Ailments		— NA —	
Details of Past ailments (If Any)		— NA —	
Comments / Advice : She /He is Physically Fit		Physically fit.	

Dr. Vipul Chavda
MD (Internal Medicine)
Reg. No. G-18004

Signature with Stamp of Medical Examiner

Jyotir Ben,

$\frac{21}{123}$ severe calculus ++

$\frac{1}{1}$ grade III mobile.

$\frac{4}{6}$ RP.

$\frac{765}{1}$ calculus ++

→ Advised treatment for all of these findings as soon as possible.





NAME :	JAGRUTI BHATT	AGE/SEX:	57 Y/F
REF. BY:	HEALTH CHEK UP	DATE :	12-Aug-24

X-RAY CHEST - PA VIEW

- Both lung fields are clear.
- No evidence of consolidation or Koch's lesion seen.
- Both CP angles are clear.
- Heart size is within normal limit.
- Both dome of diaphragm appear normal.
- Bony thorax under vision appears normal.

Dr. Tejas Patel
Diplomate N. B.
G-33659

DR. TEJAS PATEL (DNB)
CONSULTANT RADIOLOGIST



NAME :	BHATT JAGRUTI MAHESH	DATE :	12-Aug-24
AGE/SEX:	57 Y/F	REG.NO :	00
REFERRED BY: HEALTH CHECK UP			

SONOGRAPHY OF BILATERAL BREASTS:

Normal mixed fatty and fibroglandular breast parenchyma is seen bilaterally.

There is no obvious evidence of a focal spiculated mass lesion, architectural distortion, focal asymmetry or clusters of microcalcifications seen to suggest presence of a malignancy.

No evidence of any dilated ducts seen on either side.

No evidence of any significant axillary adenopathy is seen.

IMPRESSION

- Normal sonomammography of both breasts. (BIRADS I)

Dr. Tejas Patel
Diplomate N. B.
G-33659

DR. TEJAS PATEL
DNB RADIODIAGNOSIS

NOTE: Investigations are never conclusive but should be co-related along with relevant clinical examination and other investigations to achieve final diagnosis. Not for medico-legal use.

CONCEPT DIAGNOSTICS

Sahajanand Palace, First Floor, 100 Feet Anand Nagar Road Above Gopi Restaraunt, Prahladnagar, Ahmedabad EMail:
1619 / BHATT JAGRUTI MAHESH / 57 Yrs / M / 149 Cms / 66 Kg / NonSmoker

Date: 12 / 08 / 2024 11:32:29 AM

Stage	Time	Duration	Speed(mph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:29	0:29	00.0	00.0	01.0	080	49 %	136/80	108	00	
Standing	00:31	0:02	00.0	00.0	01.0	080	49 %	136/80	108	00	
HV	00:33	0:02	00.0	00.0	01.0	080	49 %	136/80	108	00	
ExStart	00:42	0:09	00.0	00.0	01.0	085	52 %	136/80	115	00	
BRUCE Stage 1	03:42	3:00	01.7	10.0	04.7	132	81 %	144/86	190	00	
BRUCE Stage 2	06:42	3:00	02.5	12.0	07.1	149	91 %	150/90	223	00	
PEAKEX	07:50	1:08	03.4	14.0	08.3	152	93 %	150/90	228	00	
Recovery	08:20	0:30	01.1	00.0	04.2	166	96 %	150/90	239	00	
Recovery	08:50	1:00	01.1	00.0	01.2	152	93 %	150/90	228	00	
Recovery	09:50	2:00	00.0	00.0	01.0	152	93 %	146/88	221	00	
Recovery	10:50	3:00	00.0	00.0	01.0	113	69 %	142/80	160	00	
Recovery	10:51	3:01	00.0	00.0	01.0	113	69 %	142/80	160	00	

FINDINGS :

Exercise Time : 07:08
 Initial HR (ExStrt) : 85 bpm 52% of Target 163
 Initial BP (ExStrt) : 136/80 (mm/Hg)
 Max Workload Attained : 8.3 Fair response to induced stress
 Duke Treadmill Score : 07.2
 Test End Reasons : Fatigue, Leg Pain, Heart Rate Achieved

TEST IS POSITIVE FOR EXERCISE INDUCED ISCHEMIA

REPORT :

Max HR Attained 156 bpm 96% of Target 163
 Max BP Attained 150/90 (mm/Hg)
 VO2Max : 29.1 ml/Kg/min (Poor)

Dr. Abhimanyu D Kothari
 DM (Intd.) in Cardiology
 Interventional Cardiologist
 Regd. No. G. 29383

Doctor : DR. ABHIMANYU KOTHARI

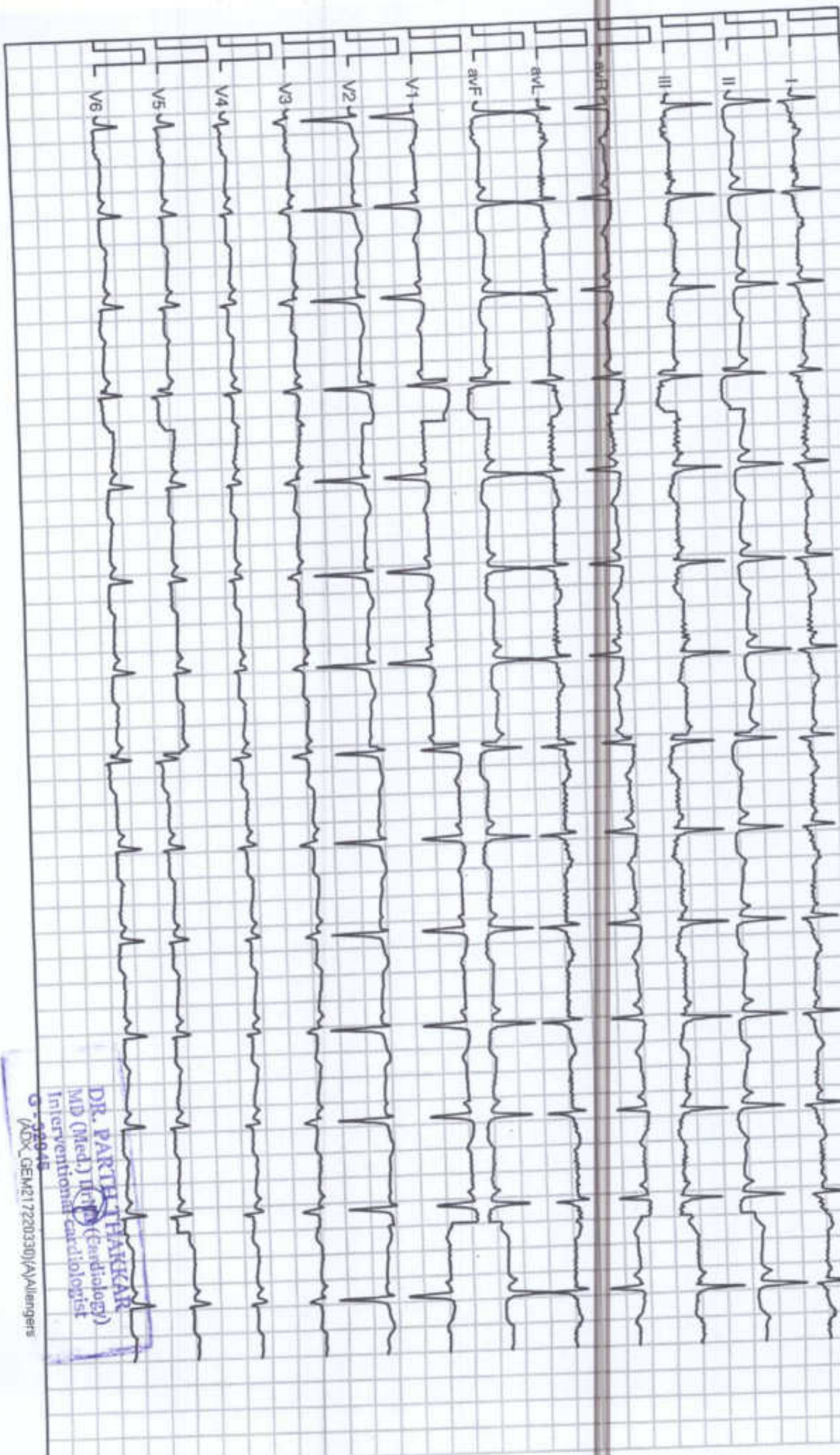
CONCEPT DIAGNOSTICS

Pre Test ECG

ACIPL

1619 / BHATT JAGRUTI MAHESH / 57 Yrs / M / 149 Cms / 66 Kg / HR 81

Date: 12/08/2024 11:32:29 AM BP: / BLC On Ncch On HF 0.05 Hz LF 100 Hz



DR. PARTH TEAKKAR
MD (Med.) (Cardiology)
Interventional cardiologist

G-209A
ADK_GEM21720330/A/Allengers

CONCEPT DIAGNOSTICS

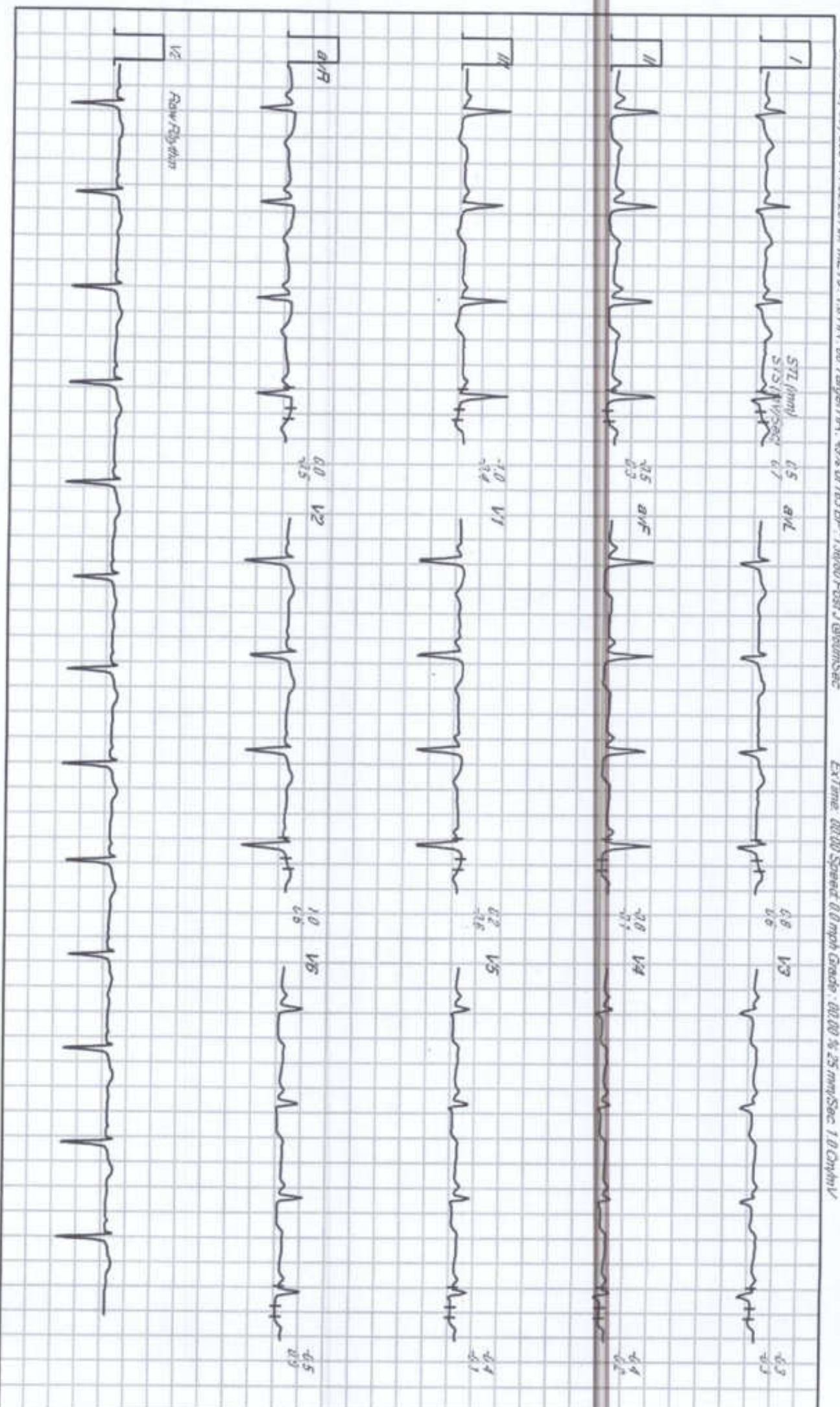
Sahajaland Palace, First Floor, 100 Feet Anand Nagar Road Above Gopi Restaurant, Prahladnagar, Ahmednagar Medians Report
1619 / BHATT JAGRUTI MAHESH / 57 Yrs / Male / 149 Cm / 65 Kg / Non Smoker

SUPINE (00:29)



Date: 12/08/2024 11:22:29 AM METs: 1.0 HR: 60 Target HR: 49% of 163 BP: 136/80 Pasi / @80mSec

Ex Time: 00:00 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec 1.0 Cm/mV



Sahajanand Palace, First Floor, 100 Feet Anand Nagar Road Above Gopi Restaurant, Prahadnagar, Ahmednagar, Maharashtra
1619 / BHATT JAGRUTI MAHESH / 57 Yrs / Male / 149 Cm / 66 kg / Non Smoker

Date: 12/08/2024 11:32:29 AM METs: 1.0 HR: 80 Target HR: 43% of 163 BP: 130/80 Post / @80mSec

ExtTime: 00:00 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec 1.0 Ch/1V



CONCEPT DIAGNOSTICS

Sahjaland Palace, First Floor, 100 Feet Anand Nagar Road Above Gopi Restaurant, Prakhadnagar, Ahmednagar, Maharashtra Medians Report
1619 / BHATT JAGRUTI MAHESH / 57 Yrs / Male / 149 Cm / 66 Kg / Non Smoker



Date: 12/08/2024 11:25:29 AM METS - 1.0 HR: 65 Target HR: 52% of 163 BP: 136/80 Post / @80mSec

ExTime: 00:00 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec 1.0 Cm/1V



CONCEPT DIAGNOSTICS

Sahjansand Palace, First Floor, 100 Feet Anand Nagar Road Above Gopi Restaurant, Prahladnagar, Ahmedabad Medians Report
1619 / BHATT JAGRUTI MAHESH / 57 Yrs / Male / 149 Cm / 66 Kg / Non Smoker

BRUCE : Stage 1 (03:00)



Date: 12/08/2024 11:32:29 AM NETS - 47 HR - 132 Target HR: 81% of 163 BP: 144/96 Post J @ 60mSec

Ex Time: 03:00 Speed: 1.7 mph Grade: 10.00 % 25 mm/Sec 1.0 Cm/mV

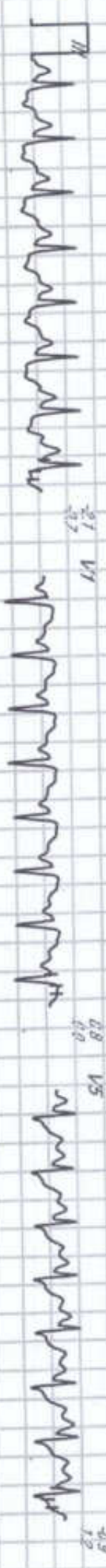


CONCEPT DIAGNOSTICS

Sahajand Palace, First Floor, 100 Feet Anand Nagar Road Above Gopi Restaurant, Pratikhnagar, Ahmednagar Medians Report
BRUCE : Stage 2 (03:00)



Date: 12/08/2024 11:32:29 AM METS: 7.1 HR: 149 Target HR: 91% of 163 BP: 150/90 Post J @60mSec ETime: 06:00 Speed: 2.5 mph Grade: 12.00 % 25 min/Sec: 1.0 Dr/W/V



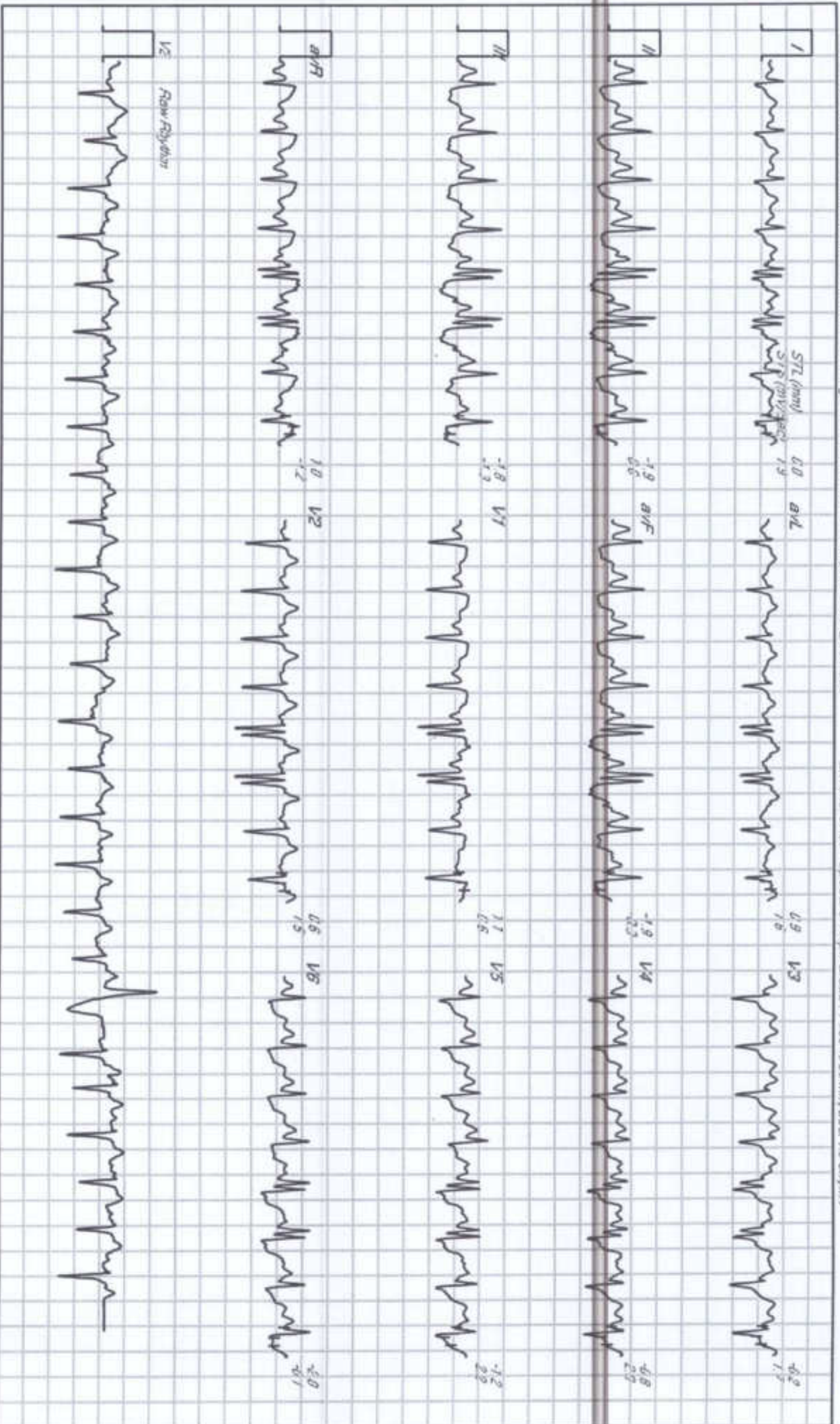
CONCEPT DIAGNOSTICS

Sahjanand Palace, First Floor, 100 Feet Anand Nagar Road Above Gopi Restaurant, Prahladnagar, Ahmednagar Medians Report
1619 / BHATT JAGRUTI MAHESH / 57 Yrs / Male / 149 Cm / 68 Kg / Non Smoker



Date: 12/08/2024 11:32:29 AM METs: 8.3 HR: 152 Target HR: 93% of 163 BP: 150/90 Post J @60mSec

ExTime: 07:08 Speed: 3.4 mph Grade: 14.00 % 25 mm/Sec 1.0 Cm/hV



CONCEPT DIAGNOSTICS

Sahjanand Palace, First Floor, 100 Feet Anand Nagar Road Above Gopi Restaurant, Pahladnagar, Ahmednagar Medians Report
Recovery : (00:30)



Date: 12/08/2024 11:32:29 AM METS: 41 HR: 156 Target HR: 95% of 163 BP: 150/90 Post J @ 60mSec
EXTime: 07:08 Speed: 1.1 mph Grade: 00.00 % 25 mmV/Sec 1.0 Cm/mV

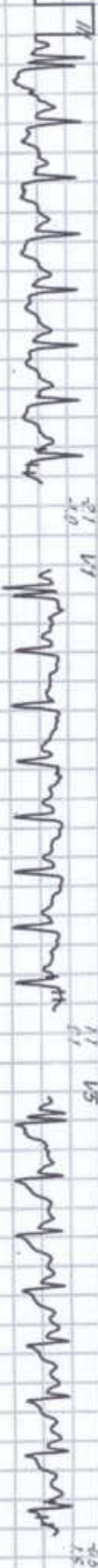
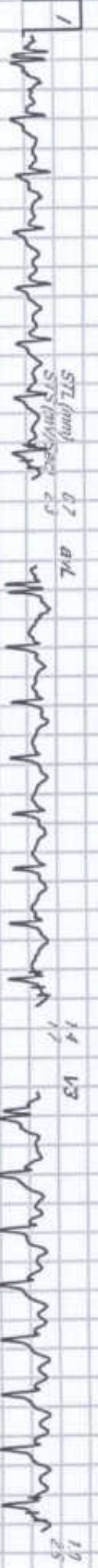


CONCEPT DIAGNOSTICS

Sahjanand Palace, First Floor, 100 Feet Anand Nagar Road Above Gopi Restaurant, Prahladnagar, Ahmedabad Medians Report
1619 / BHATT JAGRUTI MAHESH / 57 Yrs / Male / 149 Cm / 66 Kg / Non Smoker
Recovery : (01:00)



Date: 12/08/2024 11:22:29 AM METs: 1.1 HR: 152 Target HR: 93% of 163 BP: 150/90 Post / @60mSec Ext: 07:08 Speed: 1.1 mph Grade: 00.00 % 25 mm/Sec 1.0 Cm/mV



CONCEPT DIAGNOSTICS

Sahjanand Palace, First Floor, 100 Feet Anand Nagar Road Above Gopi Restaraunt, Prahlabnagar, Ahmednker Medians Report
1619 / BHATT JAGRUTI MAHESH / 57 Yrs / Male / 149 Cm / 66 Kg / Non Smoker

Recovery : (02:00)



Date: 12/08/2024 11:32:29 AM METS : 1.0 HR: 152 Target HR: 93% of 163 BP: 146/88 Post J @ 60mSec Extime: 02:08 Speed: 0.0 mph Grade: 0.000 % 25 mnySec: 1.0 Cm/ly

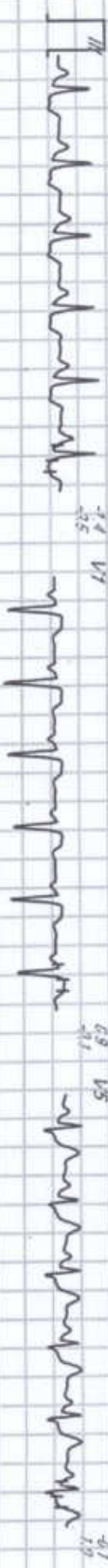


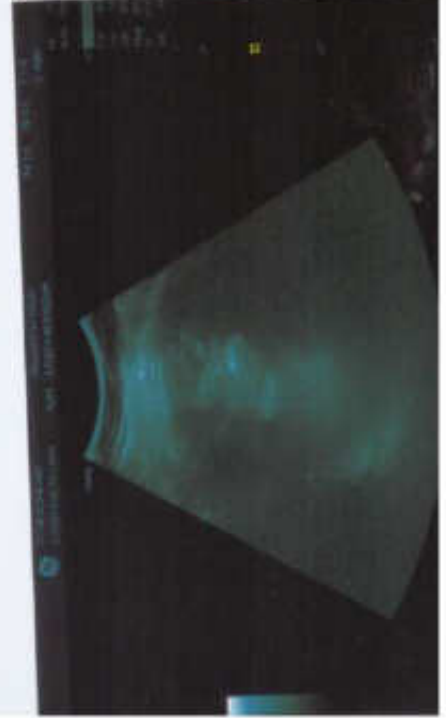
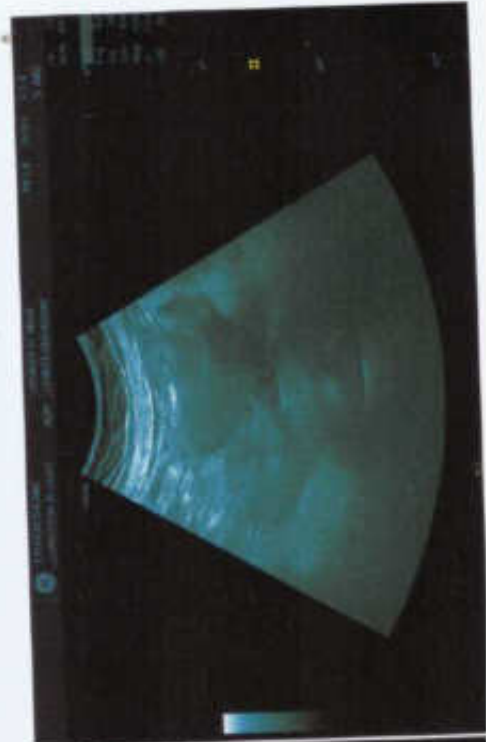
CONCEPT DIAGNOSTICS

Sahjanand Palace, First Floor, 100 Feet Anand Nagar Road Above Gopi Restaurant, Prakhrajnagar, Ahmednagar, Maharashtra, India
1619 / BHATT JAGRUTI MAHESH / 57 Yrs / Male / 149 Cm / 66 Kg / Non Smoker



Date: 12/08/2024 11:32:29 AM METs: 1.0 HR: 113 Target HR: 63% of 163 BP: 142/80 Post J @ 80mSec ExtTime: 07:08 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec 1.0 Cm/mV





Bhatt Jagruti Mahesh .

I am not able to come again for echo
So, I prefer to complete my procedure

with TMT only .

Dr. Jagruti Mahesh