




# PARKLINE DIAGNOSTICS PVT. LTD.

L.G. 3, 4 & 5, Bhuvana Towers, S.D. Road, Secunderabad - 500 003 Tel : +91 40-2784 5852, 6649 1787  
Fax : +91 40 2784 7864 Email parklinediagnostics@gmail.com www.parklinediagnostics.com



NABL Accredited  
Certificate No.MC-2566

## TEST REPORT

Name	: MRS.GOLLA CHINNA DEVI [62838]	TID/SID	: UMR0755985/ 23354301
Age / Gender	: 47 Years / Female	Registered on	: 30-Mar-2022 / 07:24 AM
Ref.By	: -	Collected on	: 30-Mar-2022 / 07:28 AM
Req.No	:  BIL1916902	Reported on	: 30-Mar-2022 / 12:05 PM
		Reference	: Medi Wheel

### DEPARTMENT OF CLINICAL PATHOLOGY

### Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Colour Method:Photo detectors(instrument)	Yellow		Light Yellow
Appearance Method:Photo diode array sensor	Clear		Clear
Specific gravity Method:Ion concentration/colour indicator	1.005		1.003-1.030
Reaction and pH Method:Double Indicator	6.0		5.0-8.0
Protein Method:Protein Error of pH indicators	Negative		Negative
Glucose Method:Double sequential enzymatic/GOD-PAP	Negative		Negative
Urobilinogen Method:Reagent strip/Reflectance photometry	Negative		0.2-1.0 mg%
Ketones Method:Strip method/Nitroprusside method	Negative		Negative
Blood Method:Peroxidase	Negative		Negative
Bile Salt Method:Hays Method	Negative		Negative
Bile Pigment Method:Fouchets Method	Negative		Negative
<b>Microscopic Examination</b>			
Pus cells (leukocytes) Method:Microscopy Of Sediment	Nil	/hpf	0-5 /hpf
RBC (erythrocytes) Method:Microscopy Of Sediment	Nil	/hpf	0-2 /hpf
Epithelial cells Method:Microscopy Of Sediment	2 - 3	/hpf	0-8 /hpf
Crystals Method:Microscopy Of Sediment	Nil	/lpf	Nil /lpf

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### DEPARTMENT OF CLINICAL PATHOLOGY

### Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Casts	Nil	/lpf	Nil
Method:Microscopy Of Sediment			/lpf
Others	Nil		Nil
Method:Microscopy Of Sediment			

\* Sample processed at Parkline

--- End Of Report ---

**Dr.Jyothi Kiranmai**  
Regd. No: 52272  
MD PATHOLOGY

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Free Home Visit for Sample Collection.

Call : 7995421787, 7093445852,8121147282, 9885202212



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## TEST REPORT

Name : **MRS.GOLLA CHINNA DEVI [62838]** TID/SID : UMR0755985/ 23354302  
Age / Gender : 47 Years / Female Registered on : 30-Mar-2022 / 07:24 AM  
Ref.By : - Collected on : 30-Mar-2022 / 07:28 AM  
Req.No  Reported on : 30-Mar-2022 / 14:34 PM  
Reference : Medi Wheel  
BIL1916902

### DEPARTMENT OF CYTOPATHOLOGY

#### Pap Smear, Conventional

Clinical Details Routine screening  
Specimen Type Conventional  
Specimen Adequacy Satisfactory for evaluation.  
Transformation zone present.  
General Categorization > 70% of the cells are obscured by neutrophils.  
Smears studied show superficial, intermediate cells, endocervical cells and neutrophils.  
Interpretation Marked inflammatory smear.  
Negative for intraepithelial lesion / malignancy.  
Suggestions Advised repeat test after treating the infection.  
Method:Microscopic Examination

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## TEST REPORT

Name : **MRS.GOLLA CHINNA DEVI [62838]** TID/SID : UMR0755985/ 23354299  
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Req.No  Reported on : 30-Mar-2022 / 12:21 PM  
Reference : Medi Wheel  
BIL1916902

### DEPARTMENT OF HEMATOLOGY

#### Blood Grouping ABO And Rh Typing, EDTA Whole Blood

Parameter	Results
Blood Grouping (ABO)	A
Rh Typing (D)	POSITIVE -
Method:Agglutination	

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Req.No	 BIL1916902	Reported on	: 30-Mar-2022 / 12:21 PM
		Reference	: Medi Wheel

### DEPARTMENT OF HEMATOLOGY

#### Erythrocyte Sedimentation Rate (ESR), Sodium Citrate Whole Blood

Investigation	Observed Value	Units	Biological Reference Intervals
ESR 1st Hour	45	mm/hour	0-20 mm/hour
Method:Westergren			

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BIL1916902

### DEPARTMENT OF HEMATOLOGY

### Hemogram, EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Hemoglobin	<b>9.9</b>	g/dL	12.0-15.0 g/dL
Method:Spectrophotometry			
Erythrocyte Count(RBC)	4.8	10 <sup>6</sup> /μL	3.8-4.8 10 <sup>6</sup> /μL
Method:Electrical Impedence			
PCV/HCT	<b>31</b>	%	36-46 %
Method:Numeric Integration			
MCV	<b>64</b>	fL	83-101 fL
Method:Calculated			
MCH	<b>20.3</b>	pg	27-32 pg
Method:Calculated			
MCHC	31.5	gm/dL	31.5-34.5 gm/dL
Method:Calculated			
RDW (CV)	<b>17.5</b>	%	11.6-14.0 %
Method:Calculated			
Total WBC Count	<b>11.6</b>	10 <sup>3</sup> /μL	4-10 10 <sup>3</sup> /μL
Method:Impedence flowcytometry/Light scattering			
<b>Differential Count</b>			
Neutrophils	71	%	40-80 %
Method:Flowcytometry/Microscopy			
Lymphocytes	23	%	20-40 %
Method:Flowcytometry/Microscopy			
Monocytes	3	%	2-10 %
Method:Flowcytometry/Microscopy			
Eosinophils	3	%	1-6 %
Method:Flowcytometry/Microscopy			
Basophils	0	%	0-2 %
Method:Flowcytometry/Microscopy			
Platelet Count	360	10 <sup>3</sup> /μL	150-410 10 <sup>3</sup> /μL
Method:Electrical Impedence			

### Peripheral Smear

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### DEPARTMENT OF HEMATOLOGY

### Hemogram, EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
RBC Method:Microscopy	Microcytic and hypochromic, Anisocytosis+		
WBC Method:Microscopy	Leucocytosis+. No abnormal cells seen.		
Platelets Method:Microscopy	Discrete and adequate. Normal in morphology.		

\* Sample processed at Parkline

--- End Of Report ---

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MD PATHOLOGY

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## TEST REPORT

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Req.No  Reported on : 30-Mar-2022 / 12:27 PM  
BIL1916902 Reference : Medi Wheel

### DEPARTMENT OF CLINICAL BIOCHEMISTRY I

#### Blood Urea Nitrogen (BUN), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Blood Urea Nitrogen.	7.6	mg/dL	7-23 mg/dL
Method:Calculated			

#### Creatinine, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Creatinine.	0.70	mg/dL	0.50-1.20 mg/dL
Method:Alkaline Picrate			

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## TEST REPORT

Name : **MRS.GOLLA CHINNA DEVI [62838]** TID/SID : UMR0755985/ 23354303F  
Age / Gender : 47 Years / Female Registered on : 30-Mar-2022 / 07:24 AM  
Ref.By : - Collected on : 30-Mar-2022 / 07:28 AM  
Req.No  Reported on : 30-Mar-2022 / 16:09 PM  
BIL1916902 Reference : Medi Wheel

### DEPARTMENT OF CLINICAL BIOCHEMISTRY I

#### Glucose Fasting (FBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Fasting Method:GOD - PAP	<b>109</b>	mg/dL	Normal: <100 Impaired FG: 100-125 Diabetic : $\geq$ 126 mg/dL

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BIL1916902

### DEPARTMENT OF CLINICAL BIOCHEMISTRY I

### Glycosylated Hemoglobin (HbA1C), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Glycosylated Haemoglobin Method:High Performance Liquid Chromatography(HPLC)	<b>6.3</b>	%	< 5.7% : Normal 5.7% - 6.4% : Prediabetes > 6.4% Diabetes
Mean Plasma Glucose (MPG) Estimate Method:Derived from HBA1c	134	mg/dL	Excellent Control : 90 to 120 Good Control : 121 to 150 Average Control : 151 to 180 Panic Value : > 211 mg/dL

**Note:**Mean Plasma Glucose is calculated from HBA1c value and it indicates Average Blood Sugar level over the past three months.

#### INTERPRETATION :

- 1.Glycated hemoglobin (glycohemoglobin / HbA1c) is a form of hemoglobin (Hb) that is chemically linked to a sugar.
- 2.A1c is measured primarily to determine the three-month average blood sugar level and can be used as a diagnostic test for diabetes mellitus and as an assessment test for glycemic control in people with diabetes.
- 3.In diabetes, higher amounts of glycated hemoglobin, indicating poorer control of blood glucose levels, have been associated with cardiovascular disease, nephropathy, neuropathy, and retinopathy.
4. American diabetes Association (ADA) recommends an A1C goal for many non pregnant adults of < 7% (without significant hypoglycemia). On the basis of provider judgment and patient preference, achievement of lower A1C levels than the goal of 7% may be acceptable, and even beneficial, if it can be achieved safely without significant hypoglycemia or other adverse effects of treatment. Less stringent A1C goals (such as < 8%) may be appropriate for patients with severe hypoglycemia, extensive co morbid conditions etc, or where the harms of treatment are greater than the benefits.
5. Glycemic goals for some older adults might reasonably be relaxed as part of individualized care, but hyperglycemia leading to symptoms or risk of acute hyperglycemia complications should be avoided in all patients.

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### DEPARTMENT OF CLINICAL BIOCHEMISTRY I

#### Lipid Profile, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Cholesterol Method:CHOD-PAP	<b>203</b>	mg/dL	Desirable Level: < 200 Borderline : 200 - 239 High : > 240 mg/dL
HDL Cholesterol Method:Enzymatic Reaction	44	mg/dL	<40:Major risk factor for heart disease 40-59:The higher,the better >=60:Considered protective against heart disease mg/dL
LDL Cholesterol Method:Calculated	<b>138</b>	mg/dL	< 100 mg/dL
VLDL Cholesterol Method:Calculated	21	mg/dL	10-55 mg/dL
Triglycerides Method:GPO-POD	109	mg/dL	Normal:<150 Borderline:150-199 High:200-499 Very High:>=500 mg/dL
Chol/HDL Ratio Method:Calculated	4.61		Normal : <4 Low risk : 4 - 6 High risk : >6
LDL Cholesterol/HDL Ratio	3.14		

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### DEPARTMENT OF CLINICAL BIOCHEMISTRY I

#### Liver Function Test (LFT), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Bilirubin. Method:Diazo with sulphanilic acid	0.51	mg/dL	0.3-1.2 mg/dL
Direct Bilirubin. Method:Diazo with sulphanilic acid	0.11	mg/dL	0.00-0.40 mg/dL
Indirect Bilirubin. Method:Calculated	0.40	mg/dL	
Alanine Aminotransferase ,(ALT/SGPT) Method:IFCC without P5P	12	U/L	10-40 U/L
Aspartate Aminotransferase,(AST/SGOT) Method:IFCC without P5P	14	U/L	10-40 U/L
ALP (Alkaline Phosphatase). Method:AMP-IFCC	54	U/L	30-115 U/L
<b>PROTEINS</b>			
Total Protein. Method:Biuret	6.82	g/dL	6.0-8.0 g/dL
Albumin. Method:Bromocresol Green (BCG)	3.80	g/dL	3.5-4.8 g/dL
Globulin. Method:Calculated	3.02	g/dL	2.3-3.5 g/dL
A/GRatio. Method:Calculated	1.26		0.8-2.0
Gamma GT. Method:IFCC-Enzymatic	22	U/L	7.0-50.0 U/L

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### DEPARTMENT OF CLINICAL BIOCHEMISTRY I

#### Thyroid Profile (T3,T4,TSH), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Triiodothyronine Total (T3) Method:Enhanced chemiluminescence	1.02	ng/mL	0.970-1.69 ng/mL
Thyroxine Total (T4) Method:Enhanced chemiluminescence	7.12	µg/dL	5.53-11.0 µg/dL
Thyroid Stimulating Hormone (TSH) Method:Enhanced chemiluminescence	2.54	µIU/mL	0.465-4.68 µIU/mL

Note: Change in method and reference range  
NOTE:

TSH - Reference ranges during pregnancy:\*

1st Trimester : 0.10 - 2.50

2nd Trimester : 0.20 - 3.00

3rd Trimester : 0.30 - 3.00

\*As per the Guidelines of American Thyroid Association for the diagnosis and management of thyroid disease during pregnancy and post partum.

1.Primary Hyperthyroidism is accompanied by elevated T3 & T4 values along with depressed TSH level.

2.Primary Hypothyroidism is accompanied by depressed T3 & T4 levels and elevated TSH levels.

3.Normal T4 levels accompanied by high T3 levels are seen in patients with T3 Thyrotoxicosis.

4.Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol and propylthiouracil.

5.Although elevated TSH levels are nearly always indicative of primary hypothyroidism, rarely they can result from TSH secreting pituitary tumors(secondary).

\* Sample processed at Parkline

--- End Of Report ---

**Dr.Jyothi Kiranmai**  
Regd. No: 52272  
MD PATHOLOGY

The Test marked with \*are not accredited by NABL.

Page 13 of 14

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& 5.45 pm to 7.45 pm

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Free Home Visit for Sample Collection.

Call : 7995421787, 7093445852, 8121147282, 9885202212



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NABL Accredited  
Certificate No.MC-2566

## TEST REPORT

Name : **MRS.GOLLA CHINNA DEVI [62838]** TID/SID : UMR0755985/ 23354300  
Age / Gender : 47 Years / Female Registered on : 30-Mar-2022 / 07:24 AM  
Ref.By : - Collected on : 30-Mar-2022 / 07:28 AM  
Req.No  Reported on : 30-Mar-2022 / 12:27 PM  
Reference : Medi Wheel  
BIL1916902

### DEPARTMENT OF CLINICAL BIOCHEMISTRY I

#### Uric Acid, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Uric Acid. Method:Uricase	5.38	mg/dL	1.9-7.5 mg/dL

\* Sample processed at Parkline

--- End Of Report ---

**Dr.Jyothi Kiranmai**  
Regd. No: 52272  
MD PATHOLOGY

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## MEDICAL EXAMINATION REPORT

Name	Ms. Golla Chinna devi		Date:	30/3/22
Company	Clo. Medi whed		Reg. No.:	1916902
Contact No.	9440029696		Sex	<input type="checkbox"/> M <input checked="" type="checkbox"/> F
			Age:	47
Type	Pre-Emp		Emp. No.:	62838
	Overseas		Height	161 cms.
	Annual		Weight	85 kgs
Remarks	<p>- Pap: Marked inflammatory smears ? infection. c &gt; 70% neutrophils. ↑ ESR Count. Advice follow up c Gynaecologist for the treatment.</p> <p>- Mammography: BIRADS - I. Advice usg Breast.</p> <p>- Microcytic Hypochromic Anemia ⊕. Advice follow up Repeat csp after 4-6 weeks.</p> <p>- Impaired glucose tolerance ⊕. c HbA1c - 6.3%. which suggest 'Pre-diabetic'.</p> <p>- Dietary modification</p>			
Fitness Status	Medically Fit / Unfit		DR. PRIYANKA SANNIDHI MBS Regn. No. 11351 Physician's Signature	

# COMPREHENSIVE MEDICAL EXAMINATION REPORT

NAME Ms. Golla chinna Devi

AGE 47 yrs / female

MARITAL STATUS Married CHILDREN : M  F

IDENTIFICATION (IF ANY) A mole on the (R) Forearm.

## PAST HISTORY

Any family H/o : High Blood Pressure, Heart Disease, Tuberculosis, Diabetes, Asthma, Cancer

Mother

Any personal H/o Major illness like : Typhoid..... NIL Jaundice..... NIL Etc.

Any H/o STD..... Skin infection..... NIL

H/o Blood Transfusion..... NIL Recent Vaccination..... COVID SHOT 2 Doses.

H/o Epilepsy..... Giddiness..... NIL

H/o Surgery..... 2 LSCS Fracture in the past..... NIL

## Any Personal H/O.

High Blood Pressure, Heart Disease Tuberculosis, Diabetes, Asthma, Cancer

Drug Abuse, Drug Allergy, Micturition, Bowels, Alcohol, Smoking, Sleep, MC, Wt. Loss/Wt. Gain

Present illness / Medication \_\_\_\_\_

## GENERAL EXAMINATION

Conjunctiva :

Skin :

Ears :

Nose :

Throat & Oral Cavity :

Bone, Joints :

Nutritional Status :

Lymph Nodes :

Edema Feet :

Varicose Veins :



**Distant Vision : Near Vision :**

Right Eye: 6/6

With glasses / Without glasses

left Eye: 6/6

with glasses / without glasses

Colour Vision : BE normal

**Right Ear**

Hearing :

Rinee's Test ;

Weber Test :

Discharge :

Right Eye: RB +1.75 sph NB

With glasses / Without glasses

left Eye : NB +1.25 sph NB

with glasses / without glasses

Ophthalmologist's Signature

**Left Ear**

*DR. KATTA*  
M.B.B.S., D.O., F.R.C.S.  
Regd. Ophthalmologist (AMC)

**SYSTEMIC EXAMINATION**

Pulse : 80 bpm.

B.P. : 120/80 mmHg.

Lungs : A. Shape of Chest R/L symmetrical  
B. Breath Sounds R/L clear ⊕  
C. Adventitious Sounds No

Heart : A. Sounds S1 S2 ⊕  
B. Murmurs No murmurs

**Nervous System**

Abdomen : A. Liver NPD  
B. Spleen NPD  
C. Piles NIL  
D. Any Lump NIL

A. Higher Function :  
B. Cranial Nerves :  
C. Sensory System :  
D. Motor System :  
E. Jerks :

(N)

General : A. Hernia  
B. Hydrocele  
C. Varicocele ] NAD

Breast : Rt (N) Lt (N)

## CANDIDATE'S DECLARATION

I hereby solemnly declare that I am not suffering from Asthma, Hypertension, Diabetes, Occult Psychological disorders or any other ailment which can be suppressed without my voluntary declaration.

**Date :**

Gehinra Devi  
**Signature**

**Place :**

**Note :** General Physical Examination and Investigation included in the health check-up Have certain limitations and may not be able to detect all latent and asymptomatic diseases. Any new symptoms developing after the health check-up or persisting thereafter should be brought to the attention of the treating physician.





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NABL Accredited  
Certificate No.: MC-2566

## TEST REPORT

Name	: Mrs . GOLLA CHINNA DEVI [62838]	TID	: UMR0755985
Age / Gender	: 47 Years / Female	Registered on	: 30-Mar-2022 07:24 AM
Ref.By	: Medi Wheel	Reported On	: 05-Apr-2022 01:09 PM
Req. No	: BIL1916902		

### ABDOMINO-PELVIC ULTRASONOGRAPHY

**LIVER** is normal shape, size ( 14.9 cms) and diffuse increase in echotexture.  
No evidence of focal lesion or intrahepatic biliary ductal dilatation.  
Hepatic and portal vein radicals are normal. Portal vein measures : 8.0 mm.

**GALL BLADDER** shows normal shape and has clear contents.  
Gall bladder wall is of normal thickness. CBD is of normal calibre.

**PANCREAS** has normal shape, size and uniform echopattern.  
No evidence of ductal dilatation or calcification.

**SPLEEN** shows normal shape, size (9.3 cms) and echopattern.

**KIDNEYS** move well with respiration and have normal shape, size and echopattern.  
Cortico- medullary differentiations are well madeout.  
No evidence of calculus or hydronephrosis.  
Right kidney measures: 10.2 x 3.5 cms, Left kidney measures: 10.3 x 4.4 cms.

**URINARY BLADDER** shows normal shape and wall thickness.  
It has clear contents. No evidence of diverticula.

**UTERUS** is anteverted has normal shape and size.  
It has uniform myometrial echopattern.  
Endometrial echo is of normal thickness 6.3 mm.  
Uterus measures 8.7 x 3.8 x 4.5 cms.

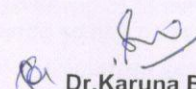
**OVARIES** are normal in size, shape and echotexture.  
Right ovary: 2.6 x 1.4 cms, Left ovary: 3.1 x 1.4 cms.

No evidence of free fluid in the abdomen and pelvis.

#### IMPRESSION:

\* Grade - I fatty liver.

Suggested clinical correlation and follow up

  
Dr. Karuna Belide  
Consultant Radiologist

The Test marked with \*are not accredited by NABL

Page:1 of 1

Lab Timings (Weekdays) : 7.00 am to 8.30 pm  
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## TEST REPORT

Name : Mrs . GOLLA CHINNA DEVI [62838]  
Age / Gender : 47 Years / Female  
Ref.By : Medi Wheel  
Req. No : BIL1916902

TID : UMR0755985  
Registered on : 30-Mar-2022 07:24 AM  
Reported On : 30-Mar-2022 11:36 AM

### DEPARTMENT OF ULTRASOUND Mammography

Bilateral CC and MLO views done.

Dense fibroglandular parenchyma moderately reducing the sensitivity of mammograph.

Rest of Both breasts show normal fibro-glandular parenchyma.

No dominant mass /pleomorphic micro calcifications /skin thickening /  
Nipple retraction on either side.

No architectural distortion.

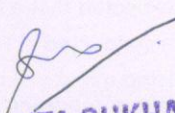
No evidence of duct dilatation.

No axillary lymphadenopathy.

**IMPRESSION : No breast abnormality noted - BIRADS- I**

**Advised : USG Breast.**

**Note: Please bring previous reports on next visit.**

  
**Dr. PRAJAKTA SUKHADEVE**  
**DNB RADIOLOGY**  
**Reg. No. 68493**

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## TEST REPORT

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Age / Gender	: 47 Years / Female	Registered on	: 30-Mar-2022 07:24 AM
Ref.By	: Medi Wheel	Reported On	: 30-Mar-2022 11:36 AM
Req. No	: BIL1916902		

### BIRADS ASSESSMENT CATEGORIES

- 0 - Needs additional imaging.
- 1 - Negative - There is nothing the comment on.
- 2 - Benign finding.
- 3 - Probably benign finding - followup after 3 months suggested.
- 4 - Suspicious abnormality. Biopsy should be considered  
[ 4A - Low suspicion ,4B - Intermediate suspicion, 4C- Moderate concern]
- 5 - Highly suggestive of malignancy.
- 6 - Known biopsy proven malignancy.

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## TEST REPORT

Name : Mrs . GOLLA CHINNA DEVI [62838]  
Age / Gender : 47 Years / Female  
Ref.By : Medi Wheel  
Req. No : BIL1916902

TID : UMR0755985  
Registered on : 30-Mar-2022 07:24 AM  
Reported On : 30-Mar-2022 09:51 AM

### X-RAY CHEST PA VIEW

Lung fields are clear.

Cardia is normal.

Hila are normal.

C P angles are free.

Bony cage is normal.

Soft tissues are normal.

IMPRESSION : NORMAL CHEST X-RAY



Dr. D.J. MOHAN  
MD DMRD  
(Reg No. 8995)  
Consultant Radiologist

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ID: 1916902

30-03-2022 07:56:30 AM

CARDIART

MRS.GOLLA CHINNA DEVI

Female 47Years

HR : 77 bpm  
P : 114 ms  
PR : 157 ms  
QRS : 83 ms  
QT/QTc : 364/412 ms  
P/QRS/T : 70/21/22  
RV5/SV1 : 0.876/0.969 mV

NSR

WNL

DR. JHAVEEN KLIMAR .C

Consultant Cardiologist  
Reg. No. 52291

Diagnosis Information:

Sinus Rhythm

Poor R Wave Progression(V4)

Report Confirmed by:



PATIENT SUMMARY REPORT

E

LINE DIAGNOSTICS PVT.LTD  
: 1916302  
: MRS GOLLA CHINNA DEVI  
SEX : 47 / FEMALE

T.I

HEIGHT (cm) : 161  
WEIGHT (kg) : 84  
PROTOCOL : BRUCE

REF. BY : MEDIWHEEL  
DONE BY : DR NAVEEN KUMAR C  
TECHNICIAN : G.M.SURESH

2022, 08:00:00

HISTORY :

INDICATION :

OBJECT OF TEST : Routine Check Up.

CLINICAL FACTOR : None.

ACTIVITY : Very Active.

TESTER INVESTIGATION : ECG

REASON FOR TERMINATION : Dyspnoea.

EXERCISE TOLERANCE : Moderate (< 10 METS).

EXERCISE INDUCED ARRHYTHMIAS : No.

HEMOGLOBIN RESPONSE : Normal.

STRESS TEST RESPONSE : Normal.

GENERAL IMPRESSION :

LABORATORY COMMENTS :

negative for inducible ischemia



Confirmed By :

Signature  
**Dr. NAVEEN KUMAR C**  
Consultant Cardiologist  
Reg. No. 52291