

NEF

**MEDICAL EXAMINATION REPORT (MER)**

If the examinee is suffering from an acute life threatening situation, you may be obliged to disclose the result of the medical examination to the examinee.

1. Name of the examinee	:	Mr./Mrs./Ms. <u>Neetha Susan Easo</u>
2. Mark of Identification	:	(Mole/Scar/any other (specify location)):
3. Age/Date of Birth	:	<u>109/1989</u> <u>09/11/1989</u> Gender: <u>F/M</u>
4. Photo ID Checked	:	(Passport/Election Card/PAN Card/Driving Licence/Company ID)

**PHYSICAL DETAILS:**

a. Height ..... <u>1.52</u> ..... (cms)	b. Weight ..... <u>67</u> ..... (Kgs)	c. Girth of Abdomen ..... <u>87</u> .... (cms)
d. Pulse Rate ..... <u>70</u> ..... (/Min)	e. Blood Pressure:	Systolic <u>100</u> Diastolic <u>80</u>
	1 <sup>st</sup> Reading	
	2 <sup>nd</sup> Reading	

**FAMILY HISTORY:**

Relation	Age if Living	Health Status	If deceased, age at the time and cause
Father			
Mother			
Brother(s)		<u>NS</u>	
Sister(s)			

**HABITS & ADDICTIONS:** Does the examinee consume any of the following?

Tobacco in any form	Sedative	Alcohol
<u>—</u>	<u>—</u>	<u>—</u>

**PERSONAL HISTORY**

- a. Are you presently in good health and entirely free from any mental or Physical impairment or deformity. If No, please attach details. Y/N
- b. Have you undergone/been advised any surgical procedure? Y/N
- c. During the last 5 years have you been medically examined, received any advice or treatment or admitted to any hospital? Y/N
- d. Have you lost or gained weight in past 12 months? Y/N

**Have you ever suffered from any of the following?**

- Psychological Disorders or any kind of disorders of the Nervous System? Y/N
- Any disorders of Respiratory system? Y/N
- Any Cardiac or Circulatory Disorders? Y/N
- Enlarged glands or any form of Cancer/Tumour? Y/N
- Any Musculoskeletal disorder? Y/N
- Any disorder of Gastrointestinal System? Y/N
- Unexplained recurrent or persistent fever, and/or weight loss Y/N
- Have you been tested for HIV/HBsAg / HCV before? If yes attach reports Y/N
- Are you presently taking medication of any kind? Y/N

• Any disorders of Urinary System?

Y/N

• Any disorder of the Eyes, Ears, Nose, Throat or Mouth & Skin

Y/N

**FOR FEMALE CANDIDATES ONLY**

a. Is there any history of diseases of breast/genital organs?

Y/N

d. Do you have any history of miscarriage/abortion or MTP

Y/N

b. Is there any history of abnormal PAP Smear/Mammogram/USG of Pelvis or any other tests? (If yes attach reports)

Y/N

e. For Parous Women, were there any complication during pregnancy such as gestational diabetes, hypertension etc

Y/N

c. Do you suspect any disease of Uterus, Cervix or Ovaries?

Y/N

f. Are you now pregnant? If yes, how many months?

Y/N

**CONFIDENTIAL COMMENTS FROM MEDICAL EXAMINER**

➤ Was the examinee co-operative?

Y/N

➤ Is there anything about the examinee's health, lifestyle that might affect him/her in the near future with regard to his/her job?

Y/N

➤ Are there any points on which you suggest further information be obtained?

Y/N

➤ Based on your clinical impression, please provide your suggestions and recommendations below;

Medical consult

➤ Do you think he/she is MEDICALLY FIT or UNFIT for employment.

FIT

**MEDICAL EXAMINER'S DECLARATION**

I hereby confirm that I have examined the above individual after verification of his/her identity and the findings stated above are true and correct to the best of my knowledge.

Name & Signature of the Medical Examiner :

Seal of Medical Examiner :

Dr. GEORGE THOMAS  
MD, FCSI, FIAE  
MEDICAL EXAMINER  
Reg: 86614

Name & Seal of DDRC SRL Branch :

Date & Time :






23/03/2023

**DDRC SRL Diagnostics Limited**

Corp. Office: DDRC SRL Tower, G- 131, Panampilly Nagar, Ernakulam - 682 036  
Ph No. 0484-2318223, 2318222, e-mail: info@ddrcsrl.com, web: www.ddrcsrl.com

Regd. Office: 4th Floor, Prime Square, Plot No.1, Gaiwadi Industrial Estate, S.V. Road, Goregaon (West), Mumbai - 400062.

  
 ഇൻഡ്യ തെരഞ്ഞെടുപ്പ് കമ്മീഷൻ  
 തിരഞ്ഞെടുപ്പ് കമ്മീഷൻ  
 ELECTION COMMISSION OF INDIA  
 IDENTITY CARD  
 TWH0142265

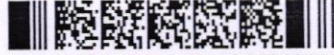
സമ്മതിദായകന്റെ പേര് : നീതു സോസൻ  
 ഈശ്വര  
 Elector's Name : Neethu Susan Easo  
 അമ്മയുടെ പേര് : സോസമ്മ ഈശ്വര  
 Mother's Name : Rosamma Easo  
 സ്ത്രീ/പുരുഷൻ: Sex : സ്ത്രീ / F  
 ജനനത്തീയതി/ : 09/11/1989  
 Date of Birth

*Neethu*

TWH0142265

വിലാസം : 793 എ  
 വൈദ്യൻപറമ്പിൽ  
 1, തുതിയൂർ  
 തൃക്കാക്കര പഞ്ചായത്ത്  
 പിൻ കോഡ് 682030  
 Address : 793 A  
 Vaidyanparambil  
 1, Thuthiyoor  
 Thrikakkara Panchayath.  
 Pincode 682030  
 ഇലക്ടറൽ രജിസ്ട്രേഷൻ ഓഫീസർ  
 83 തൃക്കാക്കര അസംബ്ലി നിയോജകമണ്ഡലം  
 Electoral Registration Officer  
 83 THRIKKAKARA LA Constituency  
 സ്ഥലം : കനയന്നൂർ  
 Place : Kanayannur  
 തീയതി/Date : 14/08/2010  
 മാതൃകാപ്രകാരം മാറ്റിയെടുക്കൽ, പുതിയ സ്ഥലം പേര് മാറ്റിയെടുക്കൽ  
 അപേക്ഷ നൽകുമ്പോൾ ഈ കാർഡ് നമ്പർ കൃത്യ  
 രേഖപ്പെടുത്തേണ്ടതാണ്.  
 In case of change in address, mention this Card No. in the  
 relevant Form for including your name in the roll at the  
 changed address and to obtain the card with the same number.





Patient Ref. No. 66600003838631

**CLIENT CODE :** CA00010147 - MEDIWHEEL  
**CLIENT'S NAME AND ADDRESS:** MEDIWHEEL HEALTHCARE LIMITED

MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED  
 F701A, LADO SARAI, NEW DELHI,  
 SOUTH DELHI, DELHI,  
 SOUTH DELHI 110030  
 DELHI INDIA  
 8800465156

DDRC SRL DIAGNOSTICS  
 DDRC SRL Tower, G-131, Panampilly Nagar,  
 PANAMPALLY NAGAR, 682036  
 KERALA, INDIA  
 Tel : 93334 93334  
 Email : customercare.ddrc@srl.in

**PATIENT NAME :** MRS. NEETHU SUSAN EASO**PATIENT ID :** NEETF2203904126**ACCESSION NO :** 4126WC007771 **AGE :** 33 Years **SEX :** Female**ABHA NO :****DRAWN :****RECEIVED :** 22/03/2023 09:36**REPORTED :** 23/03/2023 04:14**REFERRING DOCTOR :** DR. MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED**CLIENT PATIENT ID :**

Test Report Status	Final	Results	Biological Reference Interval	Units
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**MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT****TREADMILL TEST**

TREADMILL TEST

TEST COMPLETED

**OPHTHAL**

OPHTHAL

TEST COMPLETED

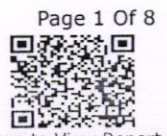


# DDRC SRL

## Diagnostic Services



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Test Report Status	Final	Results	Units
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**MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT****BLOOD UREA NITROGEN (BUN), SERUM**

BLOOD UREA NITROGEN	4	Adult(<60 yrs) : 6 to 20	mg/dL
METHOD : UREASE - UV			

**BUN/CREAT RATIO**

BUN/CREAT RATIO	7.69		
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**CREATININE, SERUM**

CREATININE	0.52	18 - 60 yrs : 0.6 - 1.1	mg/dL
METHOD : JAFFE KINETIC METHOD			

**GLUCOSE, POST-PRANDIAL, PLASMA**

GLUCOSE, POST-PRANDIAL, PLASMA	103	Diabetes Mellitus : > or = 200. Impaired Glucose tolerance/ Prediabetes : 140 - 199. Hypoglycemia : < 55.	mg/dL
METHOD : HEXOKINASE			

**GLUCOSE FASTING, FLUORIDE PLASMA**

GLUCOSE, FASTING, PLASMA	88	Diabetes Mellitus : > or = 126. Impaired fasting Glucose/ Prediabetes : 101 - 125. Hypoglycemia : < 55.	mg/dL
METHOD : HEXOKINASE			

**GLYCOSYLATED HEMOGLOBIN(HBA1C), EDTA WHOLE BLOOD**

GLYCOSYLATED HEMOGLOBIN (HBA1C)	4.8	Normal : 4.0 - 5.6%. % Non-diabetic level : < 5.7%. Diabetic : > 6.5%	
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Glycemic control goal  
 More stringent goal : < 6.5 %.  
 General goal : < 7%.  
 Less stringent goal : < 8%.

Glycemic targets in CKD :-  
 If eGFR > 60 : < 7%.  
 If eGFR < 60 : 7 - 8.5%.

MEAN PLASMA GLUCOSE	91.1	< 116.0	mg/dL
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**LIPID PROFILE, SERUM**

CHOLESTEROL	174	Desirable : < 200 Borderline : 200-239 High : > or = 240	mg/dL
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**PATIENT NAME :** MRS. NEETHU SUSAN EASO

PATIENT ID : NEETF2203904126

ACCESSION NO : 4126WC007771 AGE : 33 Years SEX : Female

ABHA NO :

DRAWN :

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REPORTED : 23/03/2023 04:14

**REFERRING DOCTOR :** DR. MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED

CLIENT PATIENT ID :

Test Report Status	Final	Results	Units
METHOD : CHOD-POD			
TRIGLYCERIDES		73	mg/dL
		Normal : < 150 High : 150-199 Hypertriglyceridemia : 200-499 Very High : > 499	
HDL CHOLESTEROL		60	mg/dL
METHOD : DIRECT ENZYME CLEARANCE			
DIRECT LDL CHOLESTEROL		110	mg/dL
		Optimum : < 100 Above Optimum : 100-139 Borderline High : 130-159 High : 160-189 Very High : >or= 190	
NON HDL CHOLESTEROL		114	mg/dL
		Desirable: Less than 130 Above Desirable: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very high: > or = 220	
VERY LOW DENSITY LIPOPROTEIN		14.6	mg/dL
CHOL/HDL RATIO		2.9	mg/dL
		<b>Low</b> 3.3-4.4 Low Risk 4.5-7.0 Average Risk 7.1-11.0 Moderate Risk > 11.0 High Risk	
LDL/HDL RATIO		1.8	
		0.5 - 3.0 Desirable/Low Risk 3.1 - 6.0 Borderline/Moderate Risk >6.0 High Risk	
<b>LIVER FUNCTION TEST WITH GGT</b>			
BILIRUBIN, TOTAL		0.65	mg/dL
METHOD : DIAZO METHOD			
BILIRUBIN, DIRECT		0.24	mg/dL
METHOD : DIAZO METHOD			
BILIRUBIN, INDIRECT		0.41	mg/dL
TOTAL PROTEIN		7.1	g/dL
		Ambulatory : 6.4 - 8.3 Recumbant : 6 - 7.8	
ALBUMIN		5.0	g/dL
GLOBULIN		2.1	g/dL
		20-60yrs : 3.5 - 5.2 2.0 - 4.0 Neonates - Pre Mature: 0.29 - 1.04	
ALBUMIN/GLOBULIN RATIO		2.3	RATIO
		<b>High</b> 1.00 - 2.00	
ASPARTATE AMINOTRANSFERASE (AST/SGOT)		14	U/L
		Adults : < 33	



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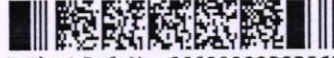
Test Report Status	Final	Results	Units
ALANINE AMINOTRANSFERASE (ALT/SGPT)		16	Adults : < 34 U/L
METHOD : IFCC WITHOUT PDP			
ALKALINE PHOSPHATASE		56	Adult (<60yrs) : 35 - 105 U/L
METHOD : IFCC			
GAMMA GLUTAMYL TRANSFERASE (GGT)		12	Adult (female) : < 40 U/L
<b>TOTAL PROTEIN, SERUM</b>			
TOTAL PROTEIN		7.1	Ambulatory : 6.4 - 8.3 g/dL Recumbant : 6 - 7.8
METHOD : BIURET			
<b>URIC ACID, SERUM</b>			
URIC ACID		4.3	Adults : 2.4-5.7 mg/dL
METHOD : SPECTROPHOTOMETRY			
<b>ABO GROUP &amp; RH TYPE, EDTA WHOLE BLOOD</b>			
ABO GROUP		TYPE A	
METHOD : GEL CARD METHOD			
RH TYPE		POSITIVE	
<b>BLOOD COUNTS, EDTA WHOLE BLOOD</b>			
HEMOGLOBIN		12.4	12.0 - 15.0 g/dL
METHOD : NON CYANMETHHEMOGLOBIN			
RED BLOOD CELL COUNT		4.11	3.8 - 4.8 mil/ $\mu$ L
METHOD : IMPEDANCE			
WHITE BLOOD CELL COUNT		5.54	4.0 - 10.0 thou/ $\mu$ L
METHOD : IMPEDANCE			
PLATELET COUNT		326	150 - 410 thou/ $\mu$ L
METHOD : IMPEDANCE			
<b>RBC AND PLATELET INDICES</b>			
HEMATOCRIT		37.6	36 - 46 %
METHOD : CALCULATED			
MEAN CORPUSCULAR VOL		91.4	83 - 101 fL
METHOD : DERIVED FROM IMPEDANCE MEASURE			
MEAN CORPUSCULAR HGB.		30.2	27.0 - 32.0 pg
METHOD : CALCULATED			
MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION		33.1	31.5 - 34.5 g/dL
METHOD : CALCULATED			
RED CELL DISTRIBUTION WIDTH		14.5	12.0 - 18.0 %



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Test Report Status	Final	Results	Units
MENTZER INDEX		22.2	
MEAN PLATELET VOLUME		8.0	6.8 - 10.9 fL
METHOD : DERIVED FROM IMPEDANCE MEASURE			
<b>WBC DIFFERENTIAL COUNT</b>			
SEGMENTED NEUTROPHILS		57	40 - 80 %
METHOD : DHSS FLOWCYTOMETRY			
LYMPHOCYTES		32	20 - 40 %
METHOD : DHSS FLOWCYTOMETRY			
MONOCYTES		7	2 - 10 %
METHOD : DHSS FLOWCYTOMETRY			
EOSINOPHILS		3	1 - 6 %
METHOD : DHSS FLOWCYTOMETRY			
BASOPHILS		1	0 - 2 %
METHOD : IMPEDANCE			
ABSOLUTE NEUTROPHIL COUNT		3.16	2.0 - 7.0 thou/ $\mu$ L
METHOD : CALCULATED			
ABSOLUTE LYMPHOCYTE COUNT		1.77	1 - 3 thou/ $\mu$ L
METHOD : CALCULATED			
ABSOLUTE MONOCYTE COUNT		0.39	0.20 - 1.00 thou/ $\mu$ L
METHOD : CALCULATED			
ABSOLUTE EOSINOPHIL COUNT		0.17	0.02 - 0.50 thou/ $\mu$ L
METHOD : CALCULATED			
ABSOLUTE BASOPHIL COUNT		0.05	0.00 - 0.10 thou/ $\mu$ L
METHOD : CALCULATED			
NEUTROPHIL LYMPHOCYTE RATIO (NLR)		1.8	
<b>ERYTHROCYTE SEDIMENTATION RATE (ESR), WHOLE BLOOD</b>			
SEDIMENTATION RATE (ESR)		10	0 - 20 mm at 1 hr
METHOD : WESTERGREN METHOD			
<b>SUGAR URINE - POST PRANDIAL</b>			
SUGAR URINE - POST PRANDIAL		NOT DETECTED	NOT DETECTED
<b>THYROID PANEL, SERUM</b>			
T3		112.70	Non-Pregnant Women 80.0 - 200.0 Pregnant Women 1st Trimester: 105.0 - 230.0 2nd Trimester: 129.0 - 262.0 3rd Trimester: 135.0 - 262.0 ng/dL
METHOD : ELECTROCHEMILUMINESCENCE			



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CIN : U85190MH2006PTC161480

(Refer to "CONDITIONS OF REPORTING" Overleaf)





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**ACCESSION NO :** 4126WC007771 **AGE :** 33 Years **SEX :** Female

**ABHA NO :**

**DRAWN :**

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Test Report Status	Final	Results	Units
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T4	7.04	Non-Pregnant Women 5.10 - 14.10 Pregnant Women 1st Trimester: 7.33 - 14.80 2nd Trimester: 7.93 - 16.10 3rd Trimester: 6.95 - 15.70	µg/dl
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METHOD : ELECTROCHEMILUMINESCENCE

TSH 3RD GENERATION	1.070	Non-Pregnant : 0.4-4.2 Pregnant Trimester-wise : 1st : 0.1 - 2.5 2nd : 0.2 - 3 3rd : 0.3 - 3	µIU/mL
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METHOD : ELECTROCHEMILUMINESCENCE

**PHYSICAL EXAMINATION, URINE**

**COLOR** PALE YELLOW  
**APPEARANCE** CLEAR

**CHEMICAL EXAMINATION, URINE**

<b>PH</b>	7.0	4.8 - 7.4
<b>SPECIFIC GRAVITY</b>	<b>1.005</b>	<b>Low</b> 1.015 - 1.030
<b>PROTEIN</b>	NOT DETECTED	NOT DETECTED
<b>GLUCOSE</b>	NOT DETECTED	NOT DETECTED
<b>KETONES</b>	NOT DETECTED	NOT DETECTED
<b>BLOOD</b>	NOT DETECTED	NOT DETECTED
<b>BILIRUBIN</b>	NOT DETECTED	NOT DETECTED
<b>UROBILINOGEN</b>	NORMAL	NORMAL
<b>NITRITE</b>	NOT DETECTED	NOT DETECTED
<b>LEUKOCYTE ESTERASE</b>	NOT DETECTED	NOT DETECTED

**MICROSCOPIC EXAMINATION, URINE**

<b>RED BLOOD CELLS</b>	NOT DETECTED	NOT DETECTED	/HPF
<b>WBC</b>	2-3	0-5	/HPF
<b>EPITHELIAL CELLS</b>	<b>5-7</b>	0-5	/HPF
<b>CASTS</b>	NOT DETECTED		
<b>CRYSTALS</b>	NOT DETECTED		
<b>BACTERIA</b>	NOT DETECTED	NOT DETECTED	
<b>YEAST</b>	NOT DETECTED	NOT DETECTED	

**SUGAR URINE - FASTING**



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**PATIENT NAME :** MRS. NEETHU SUSAN EASO**PATIENT ID :** NEETF2203904126**ACCESSION NO :** 4126WC007771 **AGE :** 33 Years **SEX :** Female**ABHA NO :****DRAWN :****RECEIVED :** 22/03/2023 09:36**REPORTED :** 23/03/2023 04:14**REFERRING DOCTOR :** DR. MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED**CLIENT PATIENT ID :**

Test Report Status	Results	Units
<b>Final</b>		
SUGAR URINE - FASTING	NOT DETECTED	NOT DETECTED

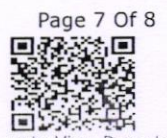


# DDRC SRL

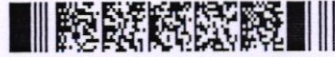
## Diagnostic Services



Scan to View Details



Scan to View Report



Patient Ref. No. 66600003838631

**CLIENT CODE :** CA00010147 - MEDIWHEEL  
**CLIENT'S NAME AND ADDRESS:** MEDIWHEEL HEALTHCARE LIMITED

MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED  
 F701A, LADO SARAI, NEW DELHI,  
 SOUTH DELHI, DELHI,  
 SOUTH DELHI 110030  
 DELHI INDIA  
 8800465156

DDRC SRL DIAGNOSTICS  
 DDRC SRL Tower, G-131, Panampilly Nagar,  
 PANAMPALLY NAGAR, 682036  
 KERALA, INDIA  
 Tel : 93334 93334  
 Email : customercare.ddrc@srl.in

**PATIENT NAME :** MRS. NEETHU SUSAN EASO**PATIENT ID :** NEETF2203904126**ACCESSION NO :** 4126WC007771 **AGE :** 33 Years **SEX :** Female**ABHA NO :****DRAWN :****RECEIVED :** 22/03/2023 09:36**REPORTED :** 23/03/2023 04:14**REFERRING DOCTOR :** DR. MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED**CLIENT PATIENT ID :**

Test Report Status	Final	Results	Units
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**MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT****ECG WITH REPORT****REPORT**

TEST COMPLETED

**USG ABDOMEN AND PELVIS****REPORT**

TEST COMPLETED

**CHEST X-RAY WITH REPORT****REPORT**

TEST COMPLETED

**\*\*End Of Report\*\***Please visit [www.ddrcsrl.com](http://www.ddrcsrl.com) for related Test Information for this accession

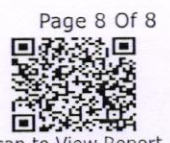
**DR.HARI SHANKAR, MBBS MD**  
 (Reg No - TCMC:62092)  
 HEAD - Biochemistry &  
 Immunology

**DR.VIJAY K N, MBBS MD(PATH)**  
 (Reg No - KMC:91816)  
 HEAD-HAEMATOLOGY &  
 CLINICAL PATHOLOGY

**DR.SMITHA PAULSON, MD**  
 (PATH),DPB  
 (Reg No - TCMC:35960)  
 LAB DIRECTOR & HEAD-  
 HISTOPATHOLOGY &  
 CYTOLOGY



Scan to View Details



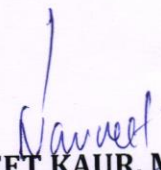
Scan to View Report

NAME: MRS NEETHU SUSAN EASO	STUDY DATE 22/03/2023
AGE / SEX : 33 YRS / F	REPORTING DATE 22/03/2023
REFERRED BY : MEDIWHEEL ARCOFEMI	ACC NO : 4126WC007771

**X - RAY - CHEST PA VIEW**

- Both the lung fields are clear.
- B/L hila and mediastinal shadows are normal.
- Cardiac silhouette appears normal.
- Cardio - thoracic ratio is normal.
- Bilateral CP angles and domes of diaphragm appear normal.

**IMPRESSION: NORMAL STUDY****Kindly correlate clinically**

  
**Dr. NAVNEET KAUR, MBBS, MD**  
**Consultant Radiologist.**



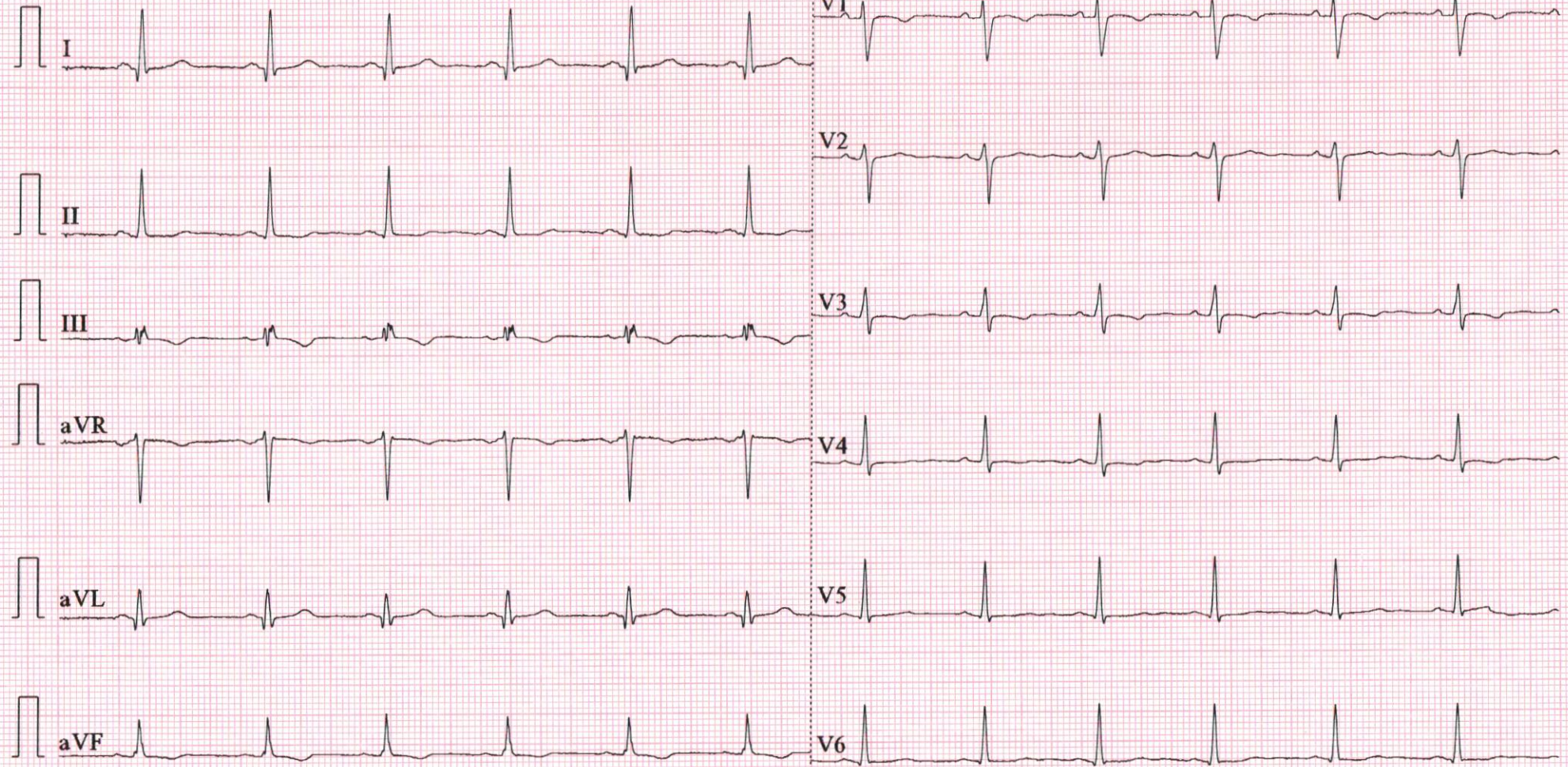
ID: 7771  
NEETHU SUSAN EASO  
Female 33Years

22-03-2023 12:04:10 PM  
HR : 75 bpm  
P : 101 ms  
PR : 131 ms  
QRS : 92 ms  
QT/QTc : 395/441 ms  
P/QRS/T : 10/49/-28 °  
RV5/SV1 : 0.947/0.697 mV

Diagnosis Information:

*Non-specific T changes*

Technician : ALEENA UR GEORGE THOMAS  
Ref-Phys. : MEDIWHEEL  
Report Confirmed by:  
MD, FCSI, FIAE  
CARDIOLOGIST



R

*Neethu*

Date..22.03.2023

**OPHTHALMOLOGY REPORT**

This is to certify that I have examined

Mr / Ms : Neelmu Susan Easo.....Aged...33...and his / her

visual standards is as follows :

**Visual Acuity:**

For far vision R: 6/12p.....  
L: 6/12.....

2PK R 6/6  
L 6/6

For near vision R: N6.....  
L: N6.....

Color Vision : Normal.....  
.....

Nannu Elizabeth  
**Nannu Elizabeth**  
**(Optometrist)**









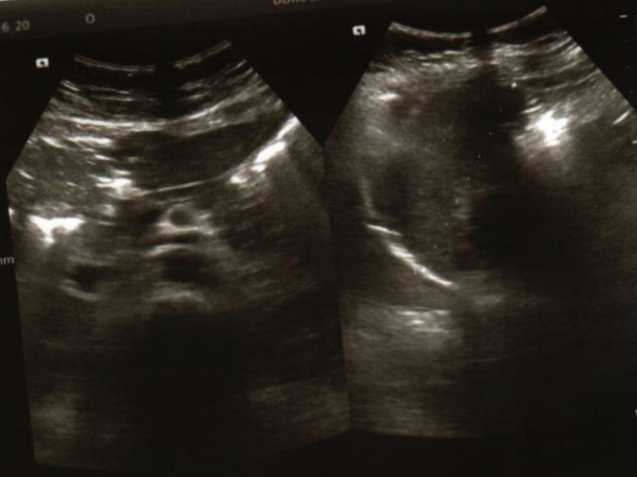
NEETHU  
22/03/2023 10:16:20

DDRC SRL KOCHI

22/03/2023 10:18:37

SC1  
Abd  
Tx Power 100%  
MI 1.01  
TIS 0.2  
TIB 0.2  
ASC 1  
DTCE Med  
Dyn R 63 dB  
TH 3.4 MHz  
0 dB  
18 fps

1 D 80.8 mm



NEETHU  
22/03/2023 10:16:20

DDRC SRL KOCHI

22/03/2023 10:18:07

SC1  
Abd  
Tx Power 100%  
MI 1.01  
TIS 0.2  
TIB 0.2  
ASC 1  
DTCE Med  
Dyn R 63 dB  
TH 3.4 MHz  
0 dB  
18 fps

1 D 129.8 mm

