

Consultant Radiologist & Sonologist

Dr. Roopa Goyal

MD (Radio-Diagnosis)

GOYAL
DIAGNOSTICS
4-D ULTRASOUND * COLOUR DOPPLER

SHOP NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948

Patient Name : PAWAN KUMAR CHHIPA

Age / Gender : 42 years / Male

Endo ID : 146611

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL

Collected Date & Time : Sep 17, 2023, 10:53 a.m.

Reported Date & Time : Sep 17, 2023, 11:42 a.m.

Sample ID :



Test Description	Value(s)	Unit(s)	Reference Range
HAEMATOLOGY			
Hemoglobin (HB)	14.6	gm/dl	13.5 - 18.0
Erythrocyte (RBC) Count	5.6	mil/cu.mm	4.7 - 6.0
Packed Cell Volume (PCV)	47.5	%	42 - 52
Mean Cell Volume (MCV)	84.8	FL	78 - 100
Mean Cell Haemoglobin (MCH)	26.1	Pg	27 - 31
Mean Corpuscular Hb Conc. (MCHC)	30.8	g/dl	32 - 36
Red Cell Distribution Width (RDW)	13.5	%	11.5 - 14.0
Total Leucocytes Count (WBC)	8940	Cell/cu.mm	4000 - 10000
Neutrophils	68	%	40 - 80
Lymphocytes	23	%	20 - 40
Monocytes	05	%	2 - 10
Eosinophils	04	%	1-6
Basophils	00	%	0-1
Mean Platelet Volume (MPV)	8.3	fL	7.2 - 11.7
PCT	0.24	%	0.2 - 0.5
Platelet Count	293	10 ³ /ul	150 - 450

END OF REPORT

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Dr. Nishi Prasad
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Collected Date & Time : Sep 17, 2023, 10:53 a.m.

Reported Date & Time : Sep 17, 2023, 12:02 p.m.

Sample ID :



232600029

Test Description	Value(s)	Unit(s)	Reference Range
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HAEMATOLOGY

ESR	10	mm	0 - 20
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CLINICAL PATHOLOGY

General Examination

Colour	Pale yellow		Pale Yellow
Transparency (Appearance)	Clear		Clear
Reaction (pH)	Acidic		Acidic / Alkaline
Specific gravity	1.020		1.005 - 1.030

Chemical Examination

Urine Protein (Albumin)	NIL		NIL
Urine Glucose (Sugar)	NIL		NIL

Microscopic Examination

Pus cells (WBCs)	3-4	/hpf	0-9
Epithelial cells	2-3	/hpf	0-4
Red blood cells	NIL	/hpf	0-4
Crystals	Absent		Absent
Cast	Absent		Absent
Amorphous deposits	Absent		Absent
Bacteria	Absent		Absent
Yeast cells	Absent		Absent

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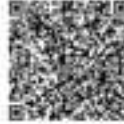
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Collected Date & Time : Sep 17, 2023, 10:53 a.m.

Reported Date & Time : Sep 17, 2023, 12:08 p.m.

Sample ID :



232600029

Test Description	Value(s)	Unit(s)	Reference Range
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HAEMATOLOGY

BLOOD GROUP ABO AND RHTYPE

Method : Gel Technique & Tube Agglutination

Medical Remark :

'O' POSITIVE

The blood group done is forward blood group only. In case of any discrepancy kindly contact the lab

****END OF REPORT****

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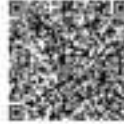
Collected Date & Time : Sep 17, 2023, 10:53 a.m.

Reported Date & Time : Sep 17, 2023, 11:43 a.m.

Sample ID :



232600029



Test Description	Value(s)	Unit(s)	Reference Range
BIOCHEMISTRY			
LIPID PROFILE			
Cholesterol Total Method : ENZYMATIC COLORIMETRIC METHOD CHOD - POD	191.0	mg/dL	130 -250
Triglycerides Method : ENZYMATIC COLORIMETRIC	83.5	mg/dL	60 -170
HDL Cholesterol Method : PHOSPHOTUNGSTIC ACID	46.0	mg/dL	Normal: 40-60 Major Risk for Heart: > 60
VLDL Cholesterol Method : Calculated	16.70	mg/dL	6 - 38
LDL Cholesterol Method : Calculated	128.30	mg/dL	Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190
CHOL/HDL Ratio Method : Calculated	4.15		2.6-4.9
LDL/HDL Ratio Method : Calculated	2.79		0.5-3.4

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BIOCHEMISTRY

LIVER FUNCTION TEST

Bilirubin - Total	0.53	gm/dl	0.0 - 1.20
Bilirubin - Direct	0.15	mg/dL	0.00 - 0.30
Bilirubin - Indirect	0.38	mg/dL	0.1 - 1.0
Method : Calculated			
ASPARTATE AMINO TRANSFERASE (SGOT-AST)	24.5	U/L	5.0-40.0
Method : IFCC with Serum			
ALANINE AMINO TRANSFERASE (SGPT-ALT)	21.3	U/L	5.0 - 40.0
Method : IFCC with POD Serum			
Alkaline Phosphatase	87.0	U/L	MALE & FEMALE
Method : IFCC with Serum			4-19 YEAR: 54-369 U/L
			20-59 YEAR: 42-98 U/L
			>60 YEAR: 53-141 U/L
Total Protein	6.98	g/dL	6.00 - 8.00
Method : Biuret, with Serum			
Albumin	4.03	g/dL	3.40 - 5.50
Method : Tech; BCG with Serum			
Globulin	2.95	g/dL	1.5 - 3.5
Method : Calculated			
A/G Ratio	1.37		1.5 - 2.5
Method : Calculated			

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Test Description	Value(s)	Unit(s)	Reference Range
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HAEMATOLOGY

HbA1c (GLYCOSYLATED HEMOGLOBIN)	5.4	%	> 8% Action Suggested 7 - 8 % Good Control < 7% Goal 6 - 7 % Near Normal Glycemia < 6% Normal level
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BLOOD

Method : Nephelometry Methodology

Instrument: Mispa i2

Clinical Information:

Glycated hemoglobin measurement is not appropriate where there has been a change in diet or treatment within 6 weeks. Hence, people with recent blood loss, hemolytic anemia, or genetic differences in the hemoglobin molecule (hemoglobinopathy and Hb variants viz: HbS, HbC, HbE, HbD, elevated HbF, as well as those that have donated blood recently, are not suitable for this test. Conditions associated with false increased HbA1C values: HbF, Uremia, Lead Poisoning, Hypertriglyceridemia, Alcoholism, Opiate addiction, Iron deficiency state, Postsplenectomy, Hyperbilirubinemia, Chronic aspirin therapy. Conditions associated with false low HbA1C values: HbS, HbC, Hemolytic anemia, Pregnancy, Acute or chronic blood loss

AVERAGE BLOOD GLUCOSE	108.28		90 - 120 Very Good Control 121 - 150 Adequate Control 151 - 180 Sub-optimal Control 181 - 210 Poor Control > 211 Very Poor Control
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Test Description	Value(s)	Unit(s)	Reference Range
IMMUNOLOGY			
T3-Triiodothyronine Method : CHEMILUMINESCENCE	1.48	ng/dL	0.60-1.81
T4-Thyroxine Method : CHEMILUMINESCENCE	10.5	ug/dL	4.5 - 10.9
TSH -ULTRA SENSITIVE Method : CHEMILUMINESCENCE	0.96	uIU/mL	0.35 - 5.50

Interpretation:

TSH measurement is useful in screening and diagnosis for euthyroidism, hyperthyroidism and hypothyroidism. TSH levels may be affected by acute illness and drugs like doapmine and glucocorticoids. Low or undetectable TSH is suggestive of graves disease TSH between 5.5 to 15.0 with normal T3 T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3 T4 with slightly low TSH suggests subclinical Hyperthyroidism. TSH suppression does not reflect severity of hyperthyroidism therefore , measurement of FT3 FT4 is important. FreeT3 is first hormone to increase in early Hyperthyroidism. Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3 , FreeT4 along with TSH should be checked.

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BIOCHEMISTRY

Urea	27.3	mg/dL	10.0 - 40.0
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Method : Urlicase

CREATININE	1.15	mg/dL	0.60 - 1.40
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Method : Serum, Jaffe

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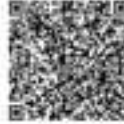
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BIOCHEMISTRY

Uric Acid	7.3	mg/dL	3.5-7.0
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Method : Uriase, Colorimetric

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BIOCHEMISTRY

Calcium	9.2	mg/dL	8.50 - 10.20
Method : Arsenazo III			

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BIOCHEMISTRY

Gamma GT	25.3	U/L	8-61
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Method : G-Glutamyl-Carboxy-Nitrosamide

Interpretation

A high GGT level can help rule out bone disease as the cause of an increased ALP level, but if GGT is low or normal, then an increased ALP is more likely due to bone disease. Even small amounts of alcohol within 24 hours of a GGT test may cause a temporary increase in the GGT.

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BIOCHEMISTRY

Glucose fasting	98.1	mg/dL	70.0-110.0
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Method : Fluoride Plasma-F, Hexokinase

END OF REPORT

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53 / PAWAN KUMAR CHHOPA / 42 Yrs / M / 162 Cms / 74 Kg / HR : 145

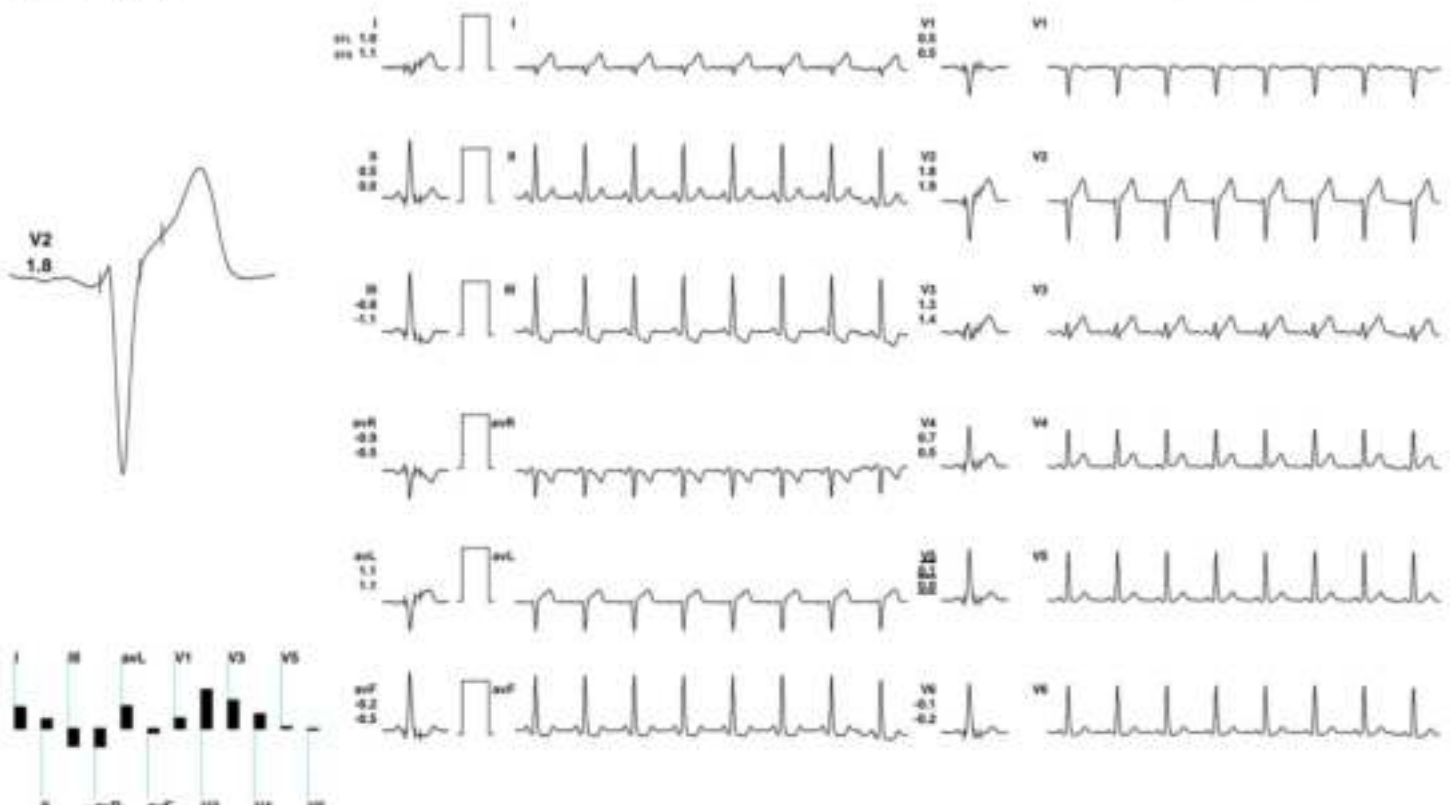
BRUCE:Supine(0:15)



Date: 17-09-2023 12:09:28 PM METS: 1.0/145 bpm 81% of THR BP: 119/76 mmHg Combined Medians/ BLC On/ Natch On HF 0.05 Hz LF 35 Hz

ExTime: 00:00 0.0 mph 0.0%
25 mm/Sec. 1.0 Cm/1V

4X 80 mV Post. J



53 / PAWAN KUMAR CHAWLA / 42 Yrs / M / 162 Cms / 74 Kg / HR : 130

BRUCE: Standing(0:08)

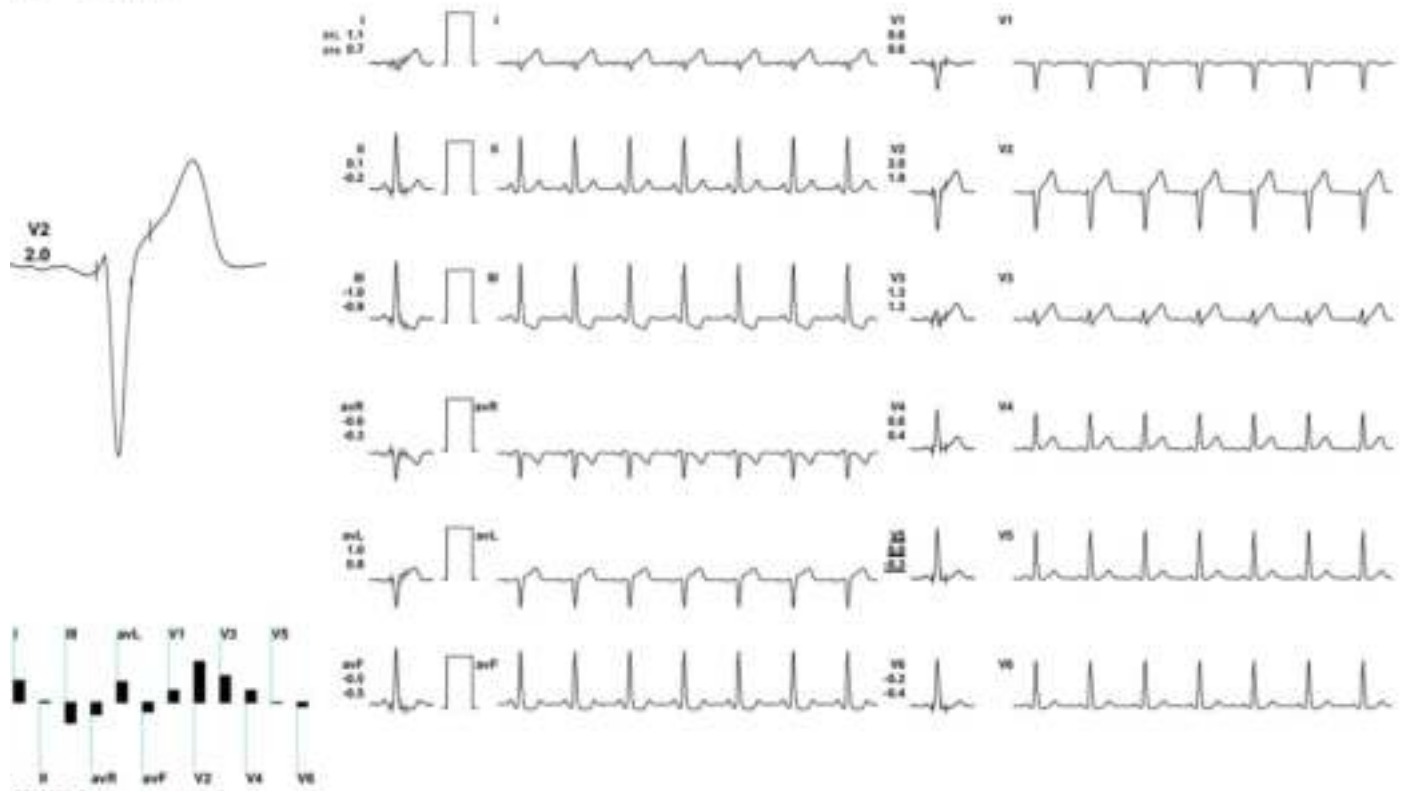


Date: 17 - 09 - 2023 12:09:28 PM METS: 1.0 130 bpm 72% of THR BP: 110/70 mmHg Combined Meds: B.C. Ov. Neath Ov. HF 0.05 Hz/UF 35 Hz

ExTime: 00:00 0.0 mph 0.0%

25 mm/Sec. 1.0 Cm/mV

4X Max Post J



PAWAN KUMAR CHHOPA / 42 Yrs / M / 162 Cms / 74 Kg / HR: 120

BRUCE:HV(0:11)

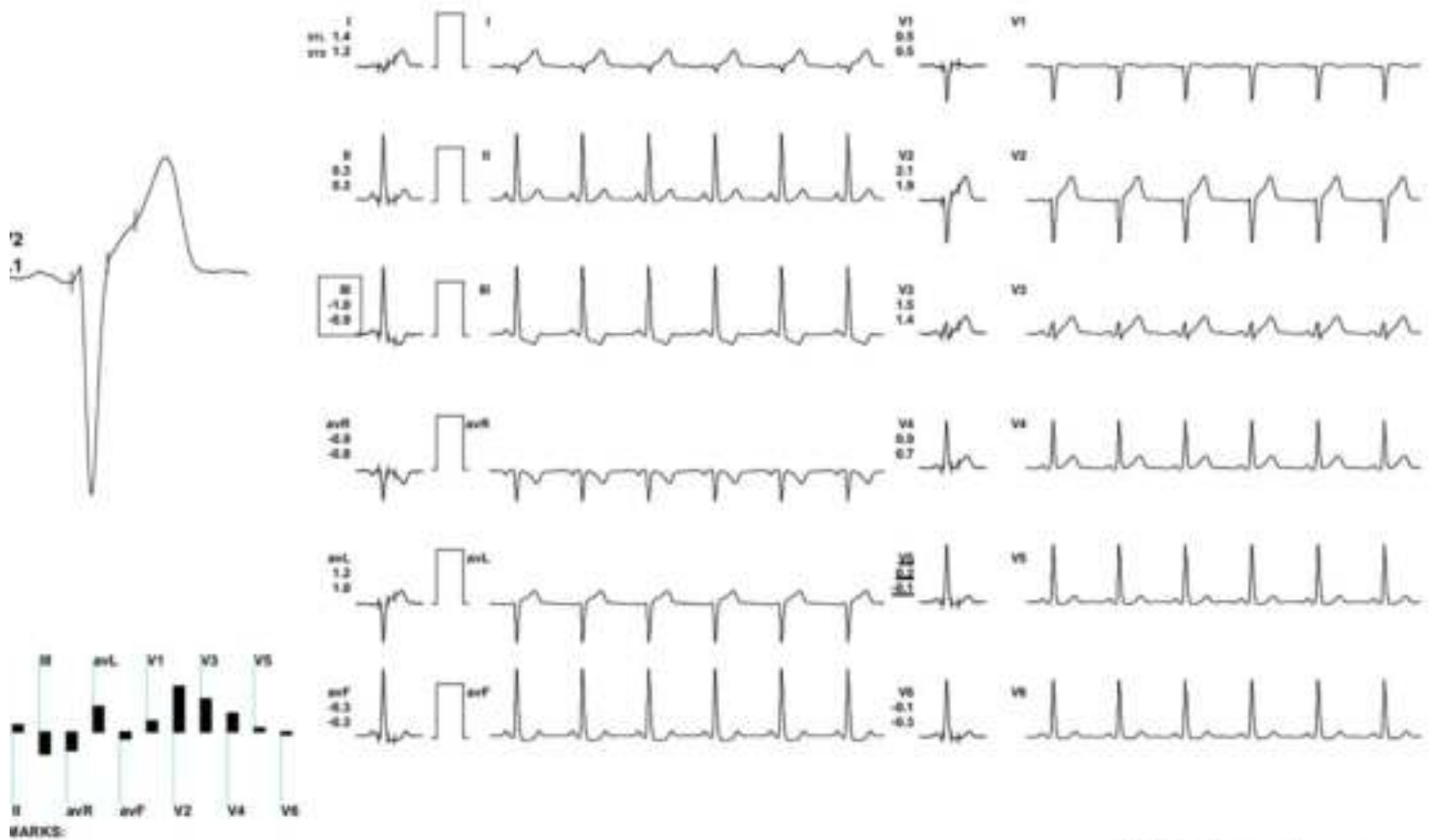


17-09-2023 12:09:28 PM METS: 1.8/120 bpm 67% of THR BP: 110/70 mmHg Combined Medians/ BLD On/ Noach On/ HF 0.05 Hz/ LF 35 Hz

ExTime: 00:00 0.0 mph, 0.0%

25 mm/Sec. 1.0 Cm/mV

88 mS Post J



SADJ_GEM21.722330(r)Akengen

53 / PAWAN KUMAR CHHIPA / 42 Yrs / M / 162 Cms / 74 Kg / HR : 110

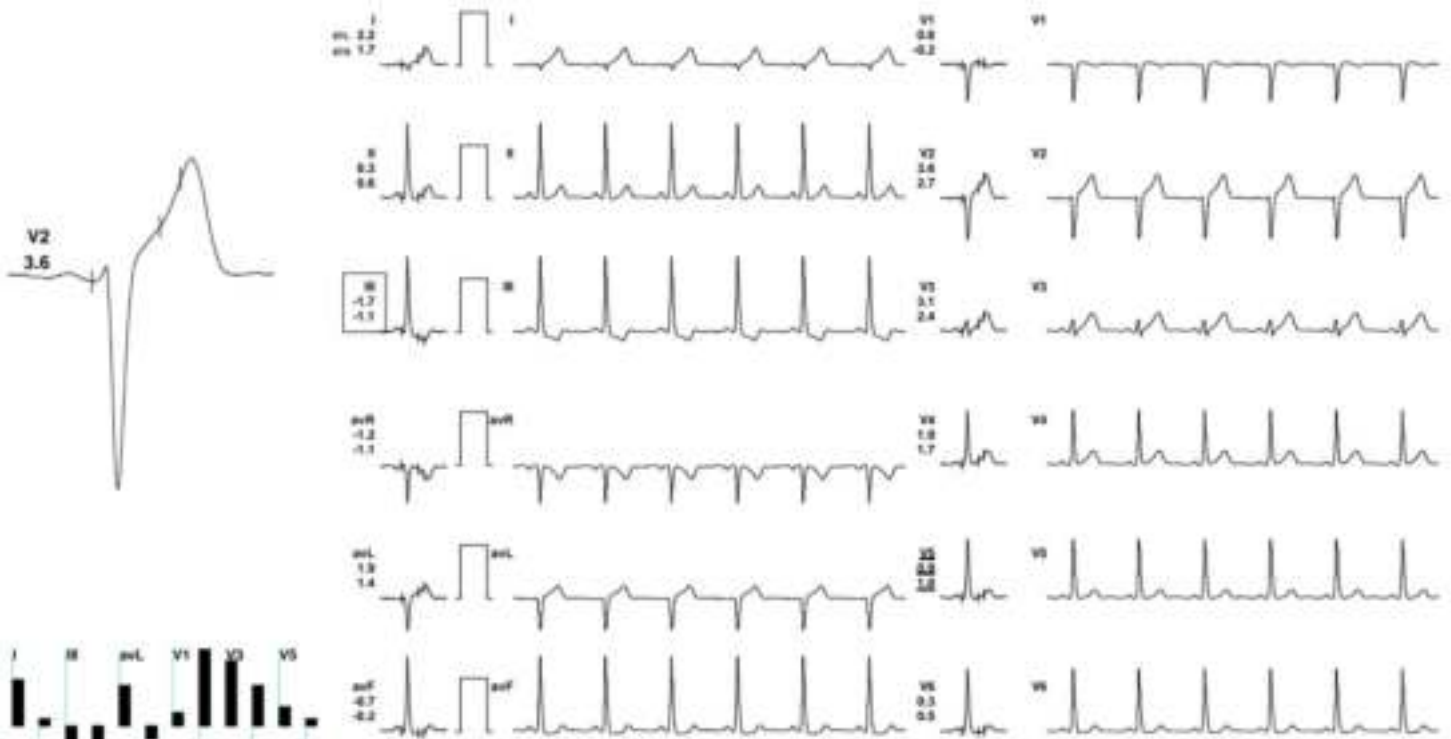
BRUCE:Warm Up(0:10)



Date: 17-09-2023 12:09:28 PM METS: 1.6/110 bpm 62% of THR BP: 110/70 mmHg Combined Meds: BLC On/ Natch On/ HF 0.05 Na/LF 25 Hz

ExTime: 00:00 0.0 mph, 0.0%
25 mm/Sec, 1.0 Cm/mV

4X 50 mS Post J



REMARKS:

(ADX_GEM21720030)(R)Allergens

53 / PAWAN KUMAR CHHOPA / 42 Yrs / M / 162 Cms / 74 Kg / HR : 100

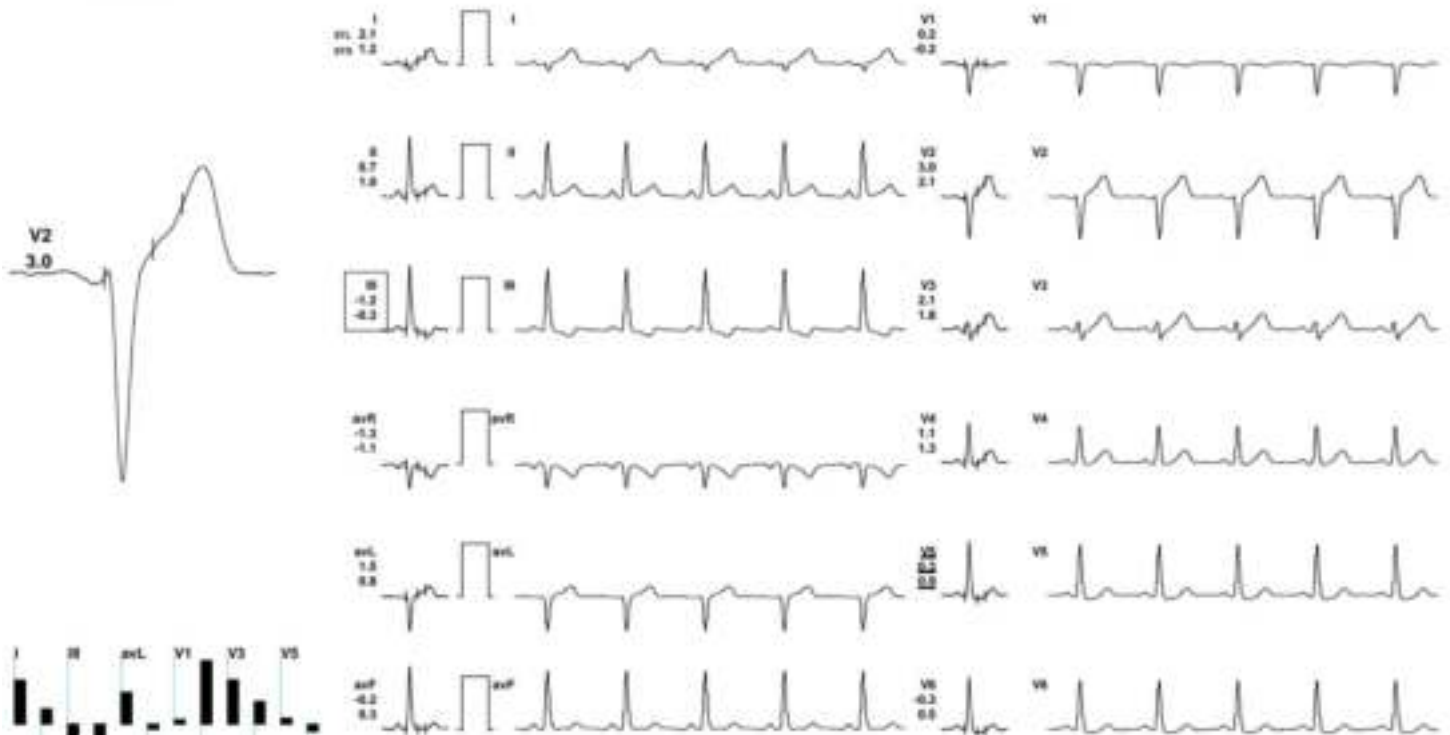
Date: 17-08-2023 12:59:28 PM METS: 1.6/100 bpm 58% of THR BP: 110/70 mmHg Combined Modera/ BLD On/ Neach On/ HF 0.05 Hz/LF 35 Hz

ExStart



ExTime: 00:00 1.0 mph, 0.0%
25 min/sec, 1.8 Cal/KV

4X 90 min Post J



REMARKS:

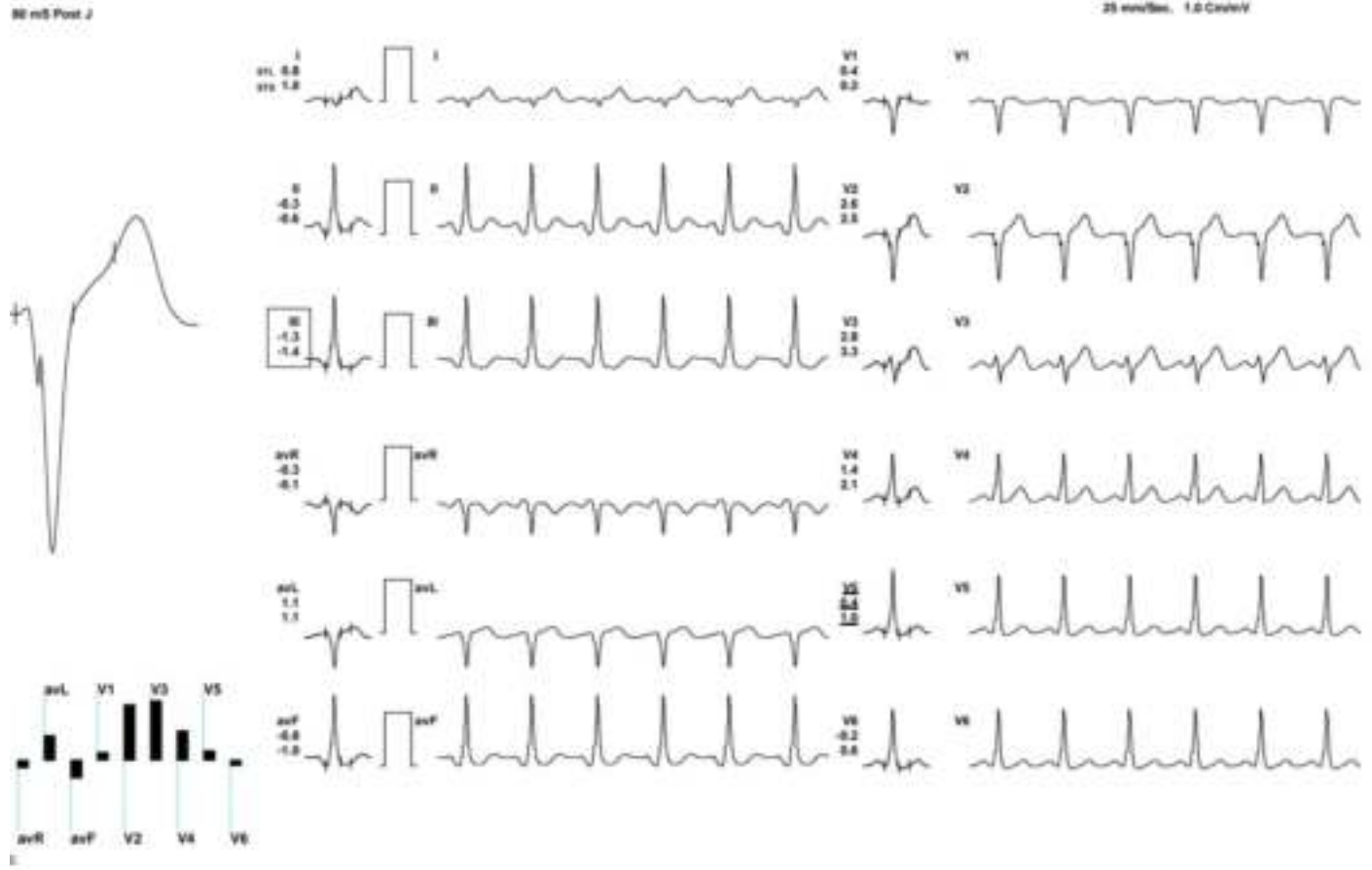
12/17/2023 12:59:28 PM

AN KUMAR CHHOPA / 42 Yrs / M / 162 Cms / 74 Kg / HR : 115

1 - 2023 12:09:28 PM METS: 4.3/ 115 bpm 66% of THR BP: 120/74 mmHg Combined Mediana/ BLC On/ Neach On/ HF 0.05 Hz/LF 35 Hz

ExTime: 03:00 1.7 mph 10.0%

25 mm/Sec. 1.0 Cm/mV



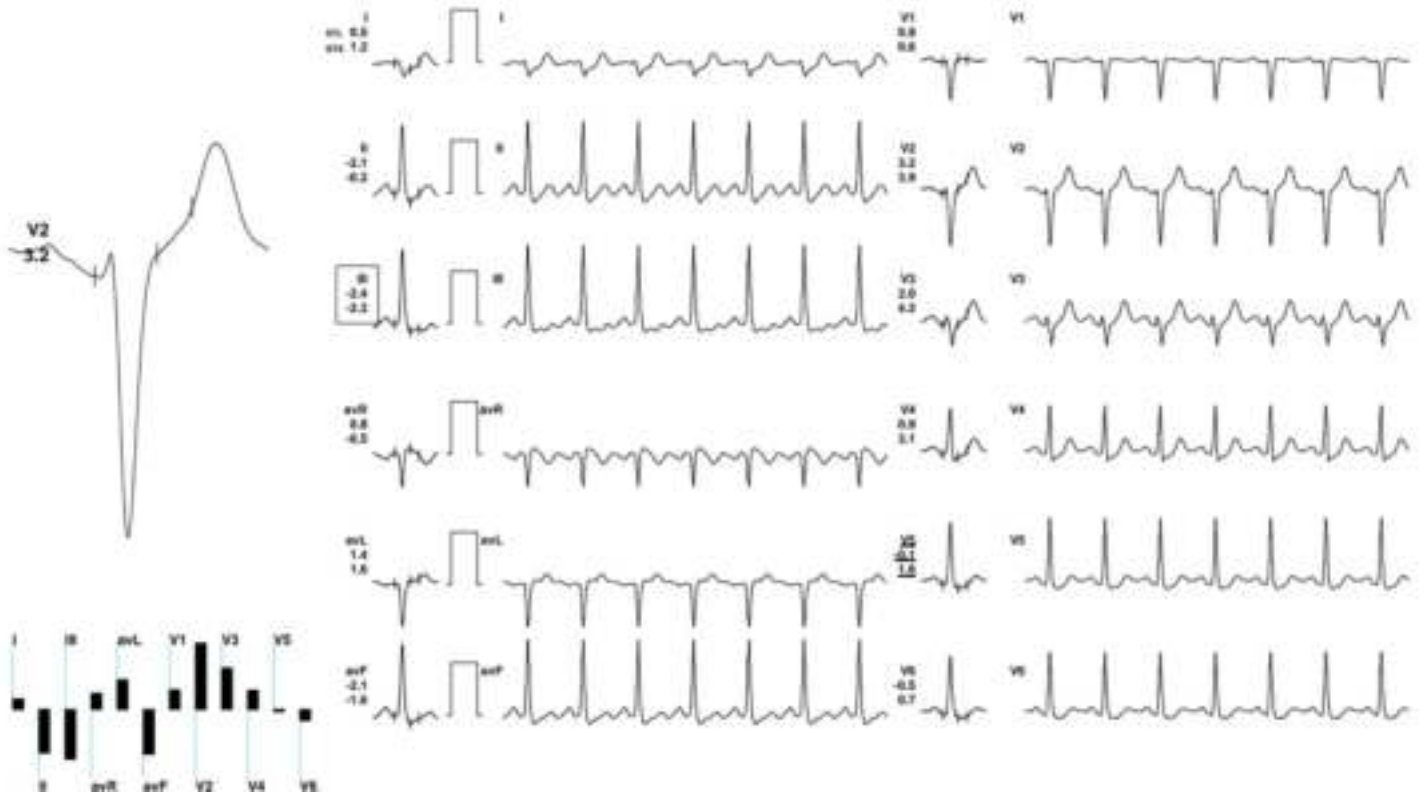
(ADX_GEM21720030)RjAbengara

53 / PAWAN KUMAR CHHOPA / 42 Yrs / M / 162 Cms / 74 Kg / HR : 137

Date: 17-09-2023 12:09:28 PM METS: 7.1/137 bpm 77% of THR BP: 130/78 mmHg Combined Meds: BLD On/ Noch On/ HF 0.00 Hz/LF 35 Hz

ExTime: 06:00 2.5 mph 12.0%
25 min/Sec 1.0 Calorie

4X 60 sec Post J



53 / PAWAN KUMAR CHHIPA / 42 Yrs / M / 162 Cms / 74 Kg / HR : 161

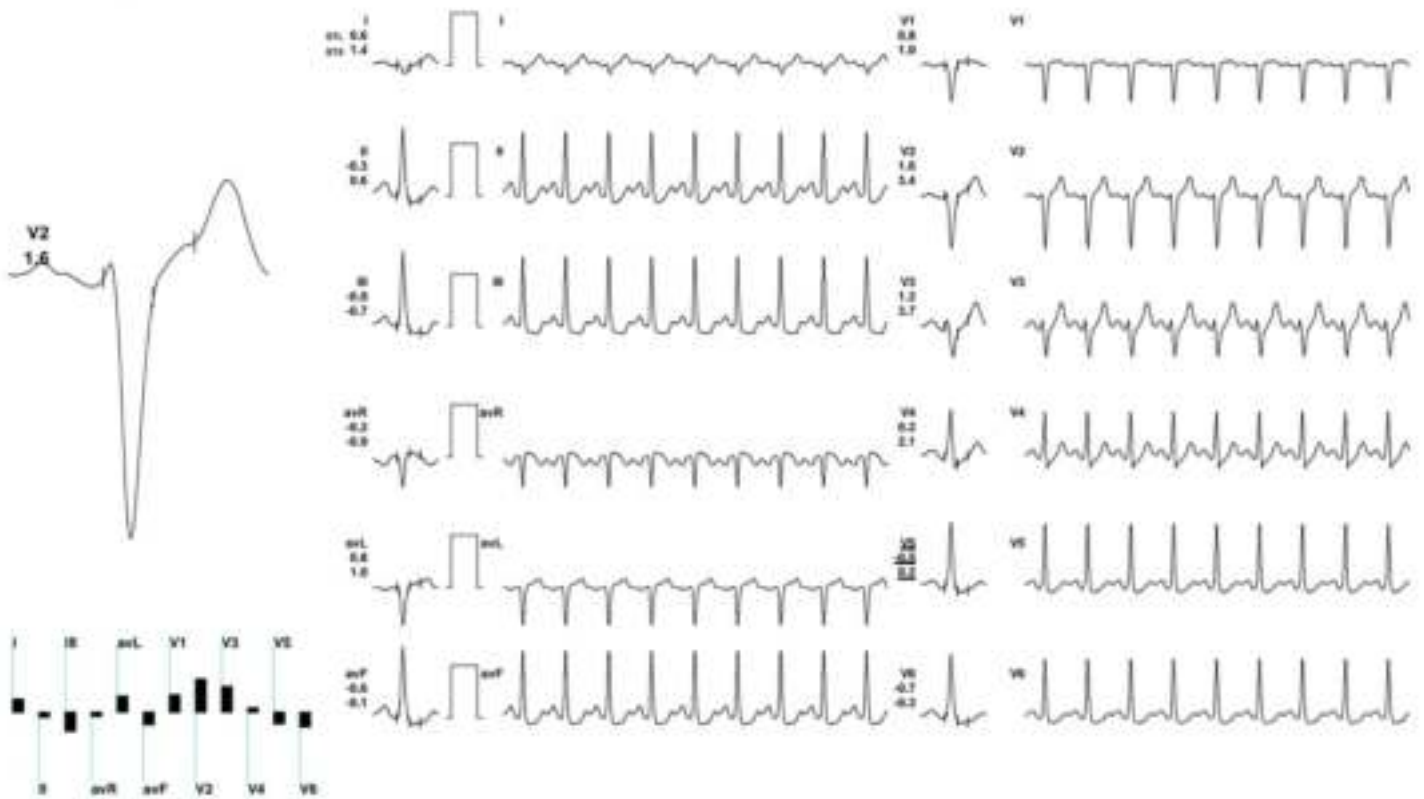
Date: 17 - 09 - 2023 12:09:26 PM METS: 9.3/161 bpm 96% of THR BP: 149/82 mmHg Combined Medication: BLD Div/ Natch Div/ HF 0.05 R/L/F 35 Hz

PeakEx



4X 60 mm Post J

ExTime: 08:29 3.4 mph, 14.0%
25 mm/Sec, 1.0 Cal/cm

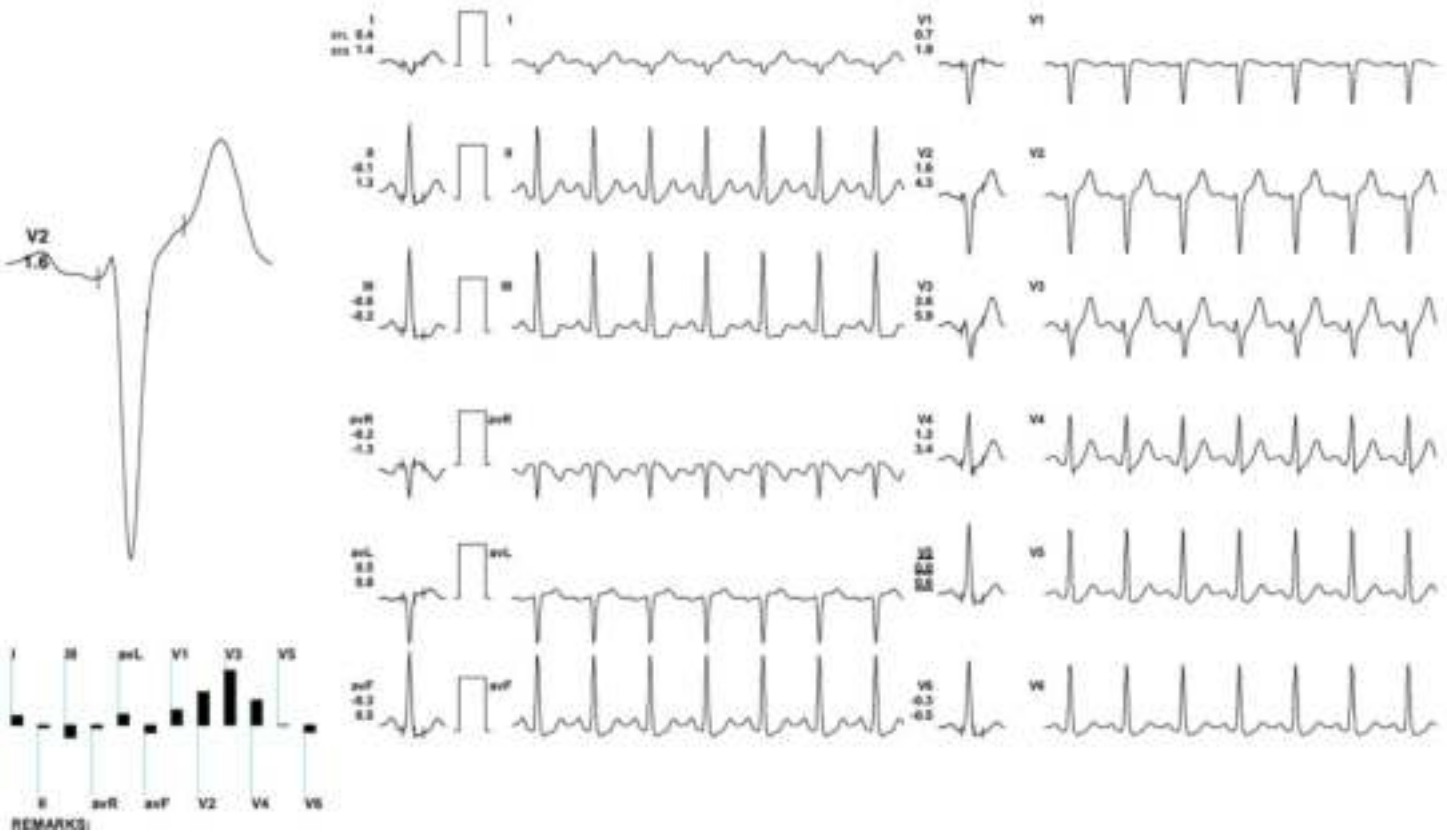


S3 / PAWAN KUMAR CHHOPA / 42 Yrs / M / 162 Cms / 74 Kg / HR : 135

Date: 17 - 09 - 2023 12:09:28 PM METS: 1.2/ 135 bpm 78% of THR BP: 150/95 mmHg Combined Medication: BLC Oxi Natch Oxi HF 0.05 Hz/LF 25 Hz

ExTime: 08:29 0.0 mph, 0.0%
25 mm/sec, 1.0 Cm/mV

4X 60 mS Post J



Recovery(2:00)

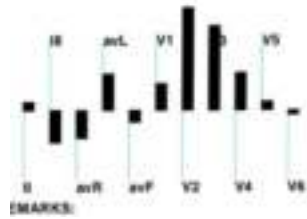
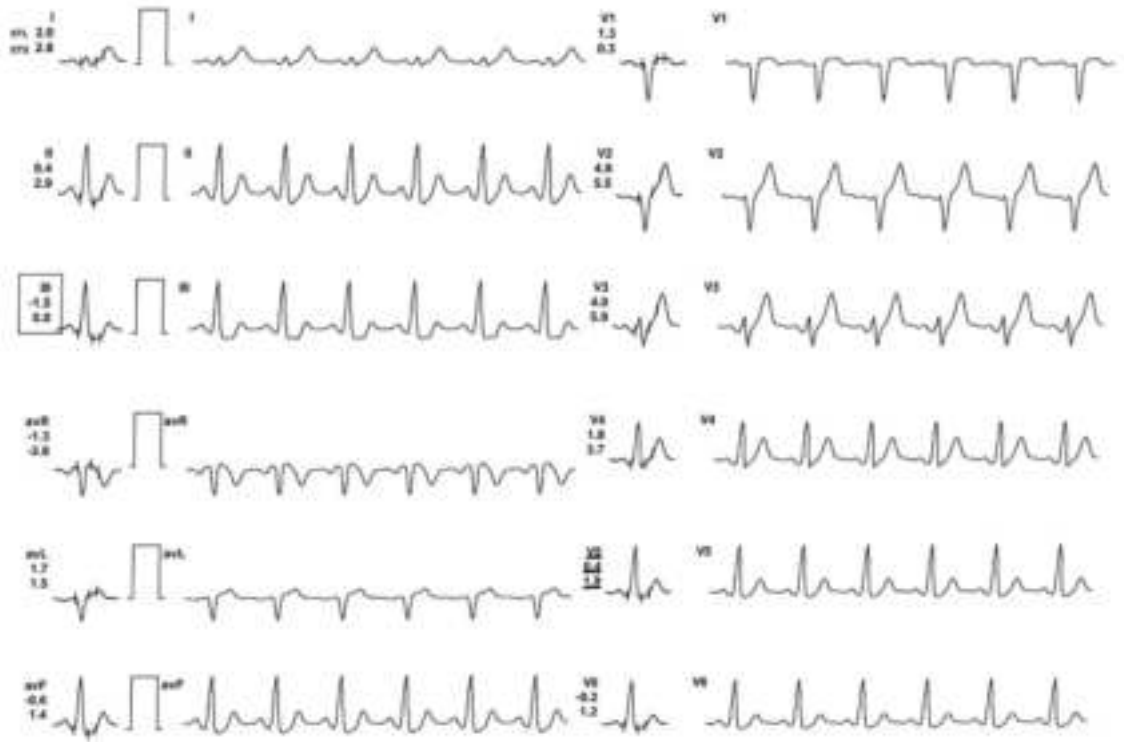
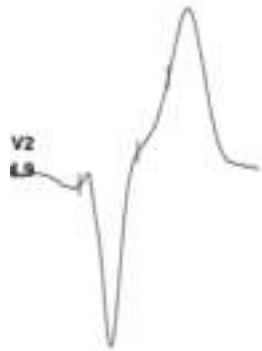


I / PAWAN KUMAR CHHIPA / 42 Yrs / M / 162 Cms / 74 Kg / HR : 110

Ex: 17 - 09 - 2023 12:09:28 PM METS: 1.87 110 bpm 62% of THR BP: 145/91 mmHg Combined Mediana/ BLC On/ Match On/ HF 0.05 PsoLF 35 Hz

ExTime: 08:29 0.0 mph, 0.0%
25 mm/Sec. 1.0 Cm/1V

K 90 mB Post J



53 / PAWAN KUMAR CHHIPA / 42 Yrs / M / 162 Cms / 74 Kg / HR : 95

Recovery(3:00)



Date: 17-01-2023 12:08:26 PM METS: 1.8/95 bpm 53% of THR. BP: 135/77 mmHg Combined Median/ SLC Oxy Sat/ Ch/ HF 0.05 Hz/ LF 35 Hz

ExTime: 08:29 0.0 mph 0.0%
28 sec/Sec. 1.8 Calorie

4X 00 sec Post /



53 / PAWAN KUMAR CHHOPA / 42 Yrs / M / 162 Cms / 74 Kg / HR : 93

Date: 17 - 09 - 2023 12:08:28 PM METS: 1.0/83 bpm 52% of THR BP: 125/75 mmHg Combined Meds: SLC On/ Natch On/ HF 0.05 Kg/LF 35 Hz

ExTime: 00:29 6.8 mph 8.8%
25 mm/Sec 1.0 Cal/cmV

4X 75 mm Post J



53 / PAWAN KUMAR CHHOPA / 42 Yrs / M / 162 Cms / 74 Kg / HR : 91

Date: 17 - 09 - 2023 12:09:28 PM METS: 1.0/91 bpm 51% of Th-R. BP: 125/75 mmHg Continued Metformin/ SLC Ov Nuch Ov/ HF 0.05 Hz/LF 35 Hz

Recovery(4:35)



ExTime: 06:29 0.0 mph, 0.0%
28 mm/Sec, 1.0 Cm/1V

4X 30 sec Post J



REMARKS:

Report



Email:

U3 / PAWAN KUMAR CHHIPA / 42 Yrs / M / 162 Cms / 74 Kg

Date: 17 - 09 - 2023 12:09:28 PM

Infirmité Angine / Hypercholestérolémie / Diabète / Positive Estrogène / Non-Athlète

Stage	Time	Duration	Speed(mph)	Elevation	METs	Rate	%THR	BP	RPP	PVC	Comments
Supine	00:15	0:15	00.0	00.0	01.0	145	81 %	110/70	159	00	
Standing	00:23	0:08	00.0	00.0	01.0	130	73 %	110/70	143	00	
TV	00:34	0:11	00.0	00.0	01.0	120	67 %	110/70	132	00	
Warm Up	00:44	0:10	00.0	00.0	01.0	110	62 %	110/70	121	00	
ExStart	01:01	0:17	01.0	00.0	01.0	100	56 %	110/70	110	00	
BRUCE Stage 1	04:01	3:00	01.7	10.0	04.7	115	65 %	120/74	138	00	
BRUCE Stage 2	07:01	3:00	02.5	12.0	07.1	137	77 %	130/78	178	00	
PeakEx	09:30	2:29	03.4	14.0	09.7	161	90 %	140/82	225	00	
Recovery	10:30	1:00	00.0	00.0	01.2	135	76 %	150/85	202	00	
Recovery	11:30	2:00	00.0	00.0	01.0	110	62 %	145/81	159	00	
Recovery	12:30	3:00	00.0	00.0	01.0	095	53 %	135/77	128	00	
Recovery	13:30	4:00	00.0	00.0	01.0	093	52 %	125/75	116	00	
Recovery	14:05	4:35	00.0	00.0	01.0	091	51 %	125/75	113	00	

FINDINGS :


Exercise Time : 08:29
 Initial HR (ExStart) : 100 bpm 56% of Target 178
 Initial BP (ExStart) : 110/70 (mm/Hg)
 Max WorkLoad Attained : 9.7 Good response to induced stress
 Max ST Dep Lead & Avg ST Value : III & -1.9 mm in Recovery
 Duke Treadmill Score : 08.1
 Test End Reasons : Test Complete, Heart Rate Achieved

Max HR Attained 161 bpm 90% of Target 178
 Max BP Attained 150/85 (mm/Hg)

VO2Max : 34.0 ml/Kg/min (Fair)

REPORT :



 **GPS Map Camera**



Ajmer, Rajasthan, India

FJ9M+XHX, Jln Hospital Rd, Kala Bagh, Ajmer,
Rajasthan 305001, India

Lat 26.469926°

Long 74.634034°

17/09/23 10:38 AM GMT +05:30

Consultant Radiologist & Sonologist

Dr. Roopa Goyal

MD (Radio-Diagnosis)

GOYAL
DIAGNOSTICS
4-D ULTRASOUND * COLOUR DOPPLER

SHOP NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948

NAME - Pawan Kumar Chhipa AGE- 42 Yrs DATE - 17.09.23
REF BY- BOB

SKIAGRAM CHEST PA VIEW

BOTH CP ANGLES ARE CLEAR

CARDIAC SIZE IS WITHIN NORMAL LIMITS

LUNG FIELDS ARE CLEAR

NAD IN HEART AND LUNGS

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
Consultant Radiologist & Sonologist
RMC No - 00450715600

धूम्र पान करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है।

HOLTER TMT ECHOCARDIOGRAPHY SPIROMETRY DIGITAL X-RAY BMD OPG MAMMOGRAPHY CLINICAL LAB. PAP SMEAR FNAC
THE DIAGNOSIS FINDING SHOULD ALWAYS BE CO-RELATED WITH THE CLINICAL AND OTHER INVESTIGATION FINDING WHERE APPLICABLE THIS REPORT IS NOT MEANT FOR MEDICO-LEGAL PURPOSE.

USG ABDOMEN-PELVIS

NAME - Pawan Kumar Cheepa AGE -- 42 yrs Date - 17.09.23
REF BY -- BOB

LIVER : is Enlarged and bright 14.9 cm and shows homogeneous echotexture. No evidence of intrahepatic biliary radicles dilatation / focal space occupying lesion. The portal vein and common bile duct show normal caliber.

GALL BLADDER : distended and shows smooth walls. Wall thickness appears normal. No evidence of sludge/ calculus . No evidence of pericholecystic collection.

SPLEEN: normal in size and shows normal echopattern.

PANCREAS: Normal in size , shape and position . Parenchyma is homogenous.

RT.KIDNEY- Normal in size, shape and position . Measures :-- 9.5 x 3.7 cm
Cortex is homogenous. Corticomedullary differentiation is maintained
pelvicalyceal system is not dilated.

Two calculi are Seen , Measuring 4.0 mm in Middle calyx and 4.7 mm in Lower calyx .

LT. KIDNEY- Normal in size, shape and position. Measures :-- 9.8 x 4.2 cm
Cortex is homogenous. Corticomedullary differentiation is maintained.
pelvicalyceal system is not dilated.
No evidence of any calculus is Seen

URINARY BLADDER : is distended with smooth walls.
No evidence of diverticulum or calculus.

PROSTATE: is normal in size **15.0 Gms** and shows normal homogeneous echotexture

No evidence of ascites / pleural effusion.

IMPRESSION:-

- **Enlarged fatty Liver .**
- **Left renal calculi .**

(Adv- clinical correlation , further evaluation)

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
Consultant Radiologist & Sonologist
RMC No.-004507/15600

रोग परीक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है

TMT ECHOCARDIOGRAPHY SPIROMETRY DIGITAL X-RAY BMD OPG MAMMOGRAPHY CLINICAL LAB. PAP SMEAR FNA

ALL FINDING SHOULD ALWAYS BE CO-RELATED WITH THE CLINICAL AND OTHER INVESTIGATION FINDING WHERE APPLICABLE THIS REPORT IS NOT MEANT FOR MEDICO-LEGAL PURPOSE

GOVAL DIAGNOSTICS

Patient Name: PAVAN KUMAR CHIPPA 42M

September 17, 2023

5 Seconds ECG Report



INTERPRETATION

Sinus Rhythm, PR is normal, Normal QRS Width, Normal QT interval, QRS Axis is normal,
T wave inversion in Lead III, V1,
Otherwise Normal ECG

