



భారత ప్రభుత్వం
GOVERNMENT OF INDIA



బతులా శ్రావణి
Batula Sravani

జన్మ సంవత్సరం - Year of Birth: 1981
హా - Female



8858 6212 0528

అధార్ - సామాన్యని హక్కు



ఆంధ్ర ప్రదేశ్ ప్రభుత్వం
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

పత్రం No (పత్రం) 14-203
పెదవలపాలెం, గణపవరం, గుంటూరు
ఆంధ్ర ప్రదేశ్, 522111

Address: GPO Srinivasaram,
14-203, Peddugilapalem,
Ganapavaram,
Guntur,
Andhra Pradesh, 522111



1947
1800 142 1947



uidai@uidai.gov.in



www.uidai.gov.in



సా. పత్ర. నె. 1947,
522111-00001

Name: Mrs. Sravani Battula
Date: 23/09/2023 Age: 31 years Sex: Female
Address: Guntur



LMP: 8/9/23

HFX SYSS

A₁ - 2 Months - spontaneous - fls OBC

A₂ - 2 Months - spontaneous - fls OBC

P₁ - L₂ $\left\{ \begin{array}{l} \delta \\ \delta \end{array} \right\}$ yrs - LSCS - HOSP
blood transfusion
(2 units)

A₃ - 206 wks - MTP kit - no fls OBC

NO HG DIL tubectomy

M/H: 3 days \leftarrow normal flow
28 days \leftarrow no clots (+)
no dyspareunia

DPV (+)

PICA (+)

NO HG DM/HTN/Thyroid/Asthma

PIA - Soft

Non-tender

Pls - cervix healthy

DPV (+), foul smelling (-)


TEMP: 98
B.P: 100/70 mm
PULSE: 81 /m
WEIGHT: 36 kg
HEIGHT: 148 cm

Adv

- Tab. Doxycycline 100mg $BD \times 7$ days
- Tab. Metrogyl 400mg $BD \times 7$ days
- Tab. Cefixime 400mg stat
- Tab. cansoft-CL 2 vaginally
3 night $\times 3$ HS
- Tab. Lyser-D $\times BD \times 3$ days
- Tab. Pantop 40mg $OD \times 1$ day

Adv

Mustard

- Tab. ~~Doxy~~ 
AF Kit $\times 1$ day
- Tab. Pantop 40mg
 $OD \times 1$ day

Shanti
Dr. B. BHARATHI
M.S. CBC
Obstetrics and Gynecology
REGD. No. APMC 9619

Name: Mrs Battula Sravani
 Date: 23/09/23 Age: 31 years Sex: Female
 Address: Guntur



Routine Health checkup

ClO Left sided chest pain

Localized x 10 days

Prickling in nature
 Eating Raw Rice
 NOHIO HTN IDM ICAO IPTB

HB - 7.6 g/dl

TEMP: 98
 B.P: 100/70 mmHg
 PULSE: 81 bpm
 WEIGHT: 36 kg
 HEIGHT: 148 cm

1) Tab. BANDY PLUS

0 - 0 - 1 - (3)

2) Tab. SEDEROM


0 - 1 - 0 - (15)

3) Cap. PPBLOCK - DS

1 - 0 - 0 - (15)

4) rap. J-POWER

0-07 - (30)


Dr. KEERTHI KISHORE NAGALLA
Regd.No: 64905 MBBS, M.D. General Medicine
CONSULTANT GENERAL PHYSICIAN
YODA DIAGNOSTICS-GUNTUR

Visit ID	: YGT30749	UHID/MR No	: YGT.0000030614
Patient Name	: Mrs. SRAVANI BATTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10710916
DOB	:	Registration	: 23/Sep/2023 09:46AM
Ref Doctor	: SELF	Collected	: 23/Sep/2023 09:46AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 23/Sep/2023 11:28AM
Hospital Name	:		

DEPARTMENT OF RADIOLOGY**ULTRASOUND WHOLE ABDOMEN & PELVIS**

LIVER : Normal in size (10.4 cm) and echo-texture. No focal lesion is seen. Intra hepatic biliary channels are not dilated. Visualised common bile duct & portal vein appears normal.

GALL BLADDER : Well distended. No evidence of calculi / wall thickening.

PANCREAS : Normal in size and outlines. Parenchymal texture normal. No ductal dilatation. No calcifications / calculi.

SPLEEN : Normal in size (8.3 cm) and echotexture. No focal lesion is seen.

RIGHT KIDNEY : measures 9.8 x 4.1 cm. Normal in size with smooth contours. Parenchymal texture normal. No focal lesion is seen. Cortico-medullary differentiation well maintained. Collecting system does not show any dilatation or calculus.

LEFT KIDNEY : measures 10.7 x 5.1 cm. Normal in size with smooth contours. Parenchymal texture normal. No focal lesion is seen. Cortico-medullary differentiation well maintained. Collecting system does not show any dilatation or calculus.

URINARY BLADDER : Well distended. No evidence of calculi or wall thickening.

UTERUS : Anteverted, measures 8.4 x 3.6 x 6.9 cm, normal in size. Myometrium shows normal echo-texture. No focal lesion is seen. Endometrial thickness is 11 mm.

Right ovary measures 4.1 x 2.2 cm and left ovary measures 3.0 x 2.2 cm.
Both ovaries are normal in size & echotexture. No adnexal lesion seen.

No enlarged nodes are visualised. No retro-peritoneal lesion is identified. Great vessels appear normal.

No free fluid is seen in pelvis.

IMPRESSION:

- No obvious sonographic abnormality detected.

Verified By :
Kollipara Venkateswara Rao



Approved By :


Dr. SUSHMA VUYYURU
MBBS, MD(Radio-Diagnosis)
CONSULTANT RADIOLOGIST

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DEPARTMENT OF RADIOLOGYX-RAY CHEST PA VIEWFindings:

Soft tissues/ bony cage normal.
Trachea and Mediastinal structures are normal.
Heart size and configuration are normal.
Aorta and pulmonary vascularity are normal.
Lung parenchyma and CP angles are clear.
Bilateral hilae and diaphragmatic contours are normal.

IMPRESSION :

- No Significant Abnormality Detected.

Suggested Clinical Correlation & Follow up.

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Client Name	: MEDI WHEELS	Received	: 23/Sep/2023 10:07AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 23/Sep/2023 10:59AM
Hospital Name	:		

DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
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ESR (ERYTHROCYTE SEDIMENTATION RATE)

Sample Type : WHOLE BLOOD EDTA

ERYTHROCYTE SEDIMENTATION RATE	15	mm/1st hr	0 - 15	Capillary Photometry
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COMMENTS:

ESR is an acute phase reactant which indicates presence and intensity of an inflammatory process. It is never diagnostic of a specific disease. It is used to monitor the course or response to treatment of certain diseases. Extremely high levels are found in cases of malignancy, hematologic diseases, collagen disorders and renal diseases.

Increased levels may indicate: Chronic renal failure (e.g., nephritis, nephrosis), malignant diseases (e.g., multiple myeloma, Hodgkin disease, advanced Carcinomas), bacterial infections (e.g., abdominal infections, acute pelvic inflammatory disease, syphilis, pneumonia), inflammatory diseases (e.g. temporal arteritis, polymyalgia rheumatic, rheumatoid arthritis, rheumatic fever, systemic lupus erythematosus [SLE]), necrotic diseases (e.g., acute myocardial infarction, necrotic tumor, gangrene of an extremity), diseases associated with increased proteins (e.g., hyperfibrinogenemia, macroglobulinemia), and severe anemias (e.g., iron deficiency or B12 deficiency).

Falsely decreased levels may indicate: Sickle cell anemia, spherocytosis, hypofibrinogenemia, or polycythemia vera.

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Client Name	: MEDI WHEELS	Received	: 23/Sep/2023 10:09AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 23/Sep/2023 10:35AM
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DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
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BLOOD GROUP ABO & RH Typing

Sample Type : WHOLE BLOOD EDTA				
ABO	B			
Rh Typing	POSITIVE			

Method : Hemagglutination Tube method by forward and reverse grouping

COMMENTS:

The test will detect common blood grouping system A, B, O, AB and Rhesus (RhD). Unusual blood groups or rare subtypes will not be detected by this method. Further investigation by a blood transfusion laboratory, will be necessary to identify such groups.

Disclaimer: There is no trackable record of previous ABO & RH test for this patient in this lab. Please correlate with previous blood group findings. Advsiied cross matching before transfusion

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Client Name : MEDI WHEELS	Received : 23/Sep/2023 10:09AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 23/Sep/2023 10:24AM
Hospital Name :	

DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
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CBC(COMPLETE BLOOD COUNT)

Sample Type : WHOLE BLOOD EDTA				
HAEMOGLOBIN (HB)	7.6	g/dl	12.0 - 15.0	Cyanide-free SLS method
RBC COUNT(RED BLOOD CELL COUNT)	3.50	million/cmm	3.80 - 4.80	Impedance
PCV/HAEMATOCRIT	23.4	%	36.0 - 46.0	RBC pulse height detection
MCV	66.9	fL	83 - 101	Automated/Calculated
MCH	21.8	pg	27 - 32	Automated/Calculated
MCHC	32.5	g/dl	31.5 - 34.5	Automated/Calculated
RDW - CV	17.8	%	11.0-16.0	Automated Calculated
RDW - SD	44.7	fl	35.0-56.0	Calculated
MPV	8.7	fL	6.5 - 10.0	Calculated
PDW	15.7	fL	8.30-25.00	Calculated
PCT	0.24	%	0.15-0.62	Calculated
TOTAL LEUCOCYTE COUNT	4,610	cells/ml	4000 - 11000	Flow Cytometry
DLC (by Flow cytometry/Microscopy)				
NEUTROPHIL	63	%	40 - 80	Impedance
LYMPHOCYTE	30	%	20 - 40	Impedance
EOSINOPHIL	02	%	01 - 06	Impedance
MONOCYTE	05	%	02 - 10	Impedance
BASOPHIL	0	%	0 - 1	Impedance
PLATELET COUNT	2.79	Lakhs/cumm	1.50 - 4.10	Impedance

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Client Add	: F-701, Lado Sarai, Mehrauli, N	Reported	: 23/Sep/2023 11:25AM
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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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THYROID PROFILE (T3,T4,TSH)

Sample Type : SERUM				
T3	0.98	ng/ml	0.60 - 1.78	CLIA
T4	10.12	ug/dl	4.82-15.65	CLIA
TSH	2.71	uIU/mL	0.30 - 5.60	CLIA

INTERPRETATION:

1. Serum T3, T4 and TSH are the measurements form three components of thyroid screening panel and are useful in diagnosing various disorders of thyroid gland function.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 values along with depressed TSH levels.
3. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH levels.
4. Normal T4 levels accompanied by high T3 levels are seen in patients with T3 thyrotoxicosis. Slightly elevated T3 levels may be found in pregnancy and in 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 hyperthyroidism).
6. Low levels of Thyroid hormones (T3, T4 & FT3, FT4) are seen in cases of primary, secondary and tertiary hypothyroidism and sometimes in non-thyroidal illness also.
7. Increased levels are found in Grave's disease, hyperthyroidism and thyroid hormone resistance.
8. TSH levels are raised in primary hypothyroidism and are low in hyperthyroidism and secondary hypothyroidism.

9. REFERENCE RANGE :

PREGNANCY	TSH in uIU/ mL
1st Trimester	0.60 - 3.40
2nd Trimester	0.37 - 3.60
3rd Trimester	0.38 - 4.04

(References range recommended by the American Thyroid Association)

Comments:

1. During pregnancy, Free thyroid profile (FT3, FT4 & TSH) is recommended.
2. TSH levels are subject to circadian variation, reaches peak levels between 2-4 AM and at a minimum between 6-10 PM. The variation of the day has influence on the measured serum TSH concentrations.

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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LIVER FUNCTION TEST(LFT)

Sample Type : SERUM				
TOTAL BILIRUBIN	0.99	mg/dl	0.3 - 1.2	JENDRASSIK & GROFF
CONJUGATED BILIRUBIN	0.26	mg/dl	0 - 0.2	DPD
UNCONJUGATED BILIRUBIN	0.73	mg/dl		Calculated
S.G.O.T	21	U/L	< 35	KINETIC WITHOUT P5P-IFCC
S.G.P.T	15	U/L	< 35	KINETIC WITHOUT P5P-IFCC
ALKALINE PHOSPHATASE	50	U/L	30 - 120	IFCC-AMP BUFFER
TOTAL PROTEINS	7.3	gm/dl	6.6 - 8.3	Biuret
ALBUMIN	4.1	gm/dl	3.5 - 5.2	BCG
GLOBULIN	3.2	gm/dl		Calculated
A/G RATIO	1.28			Calculated

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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LIPID PROFILE

Sample Type : SERUM

TOTAL CHOLESTEROL	124	mg/dl	Refere Table Below	Cholesterol oxidase/peroxidase
H D L CHOLESTEROL	46	mg/dl	> 40	Enzymatic/ Immunoinhibiton
L D L CHOLESTEROL	71.6	mg/dl	Refere Table Below	Enzymatic Selective Protein
TRIGLYCERIDES	32	mg/dl	See Table	GPO
VLDL	6.4	mg/dl	15 - 30	Calculated
T. CHOLESTEROL/ HDL RATIO	2.70		Refere Table Below	Calculated
TRIGLYCEIDES/ HDL RATIO	0.7	Ratio	< 2.0	Calculated
NON HDL CHOLESTEROL	78	mg/dl	< 130	Calculated

Interpretation

NATIONAL LIPID ASSOCIATION RECOMMENDATIONS (NLA-2014)	TOTAL CHOLESTEROL	TRI GLYCERIDE	LDL CHOLESTEROL	NON HDL CHOLESTEROL
Optimal	<200	<150	<100	<130
Above Optimal	-	-	100-129	130 - 159
Borderline High	200-239	150-199	130-159	160 - 189
High	>=240	200-499	160-189	190 - 219
Very High	-	>=500	>=190	>=220

REMARKS	Cholesterol : HDL Ratio
Low risk	3.3-4.4
Average risk	4.5-7.1
Moderate risk	7.2-11.0
High risk	>11.0

- Note:
- Measurements in the same patient can show physiological & analytical variations. Three serial samples 1 week apart are recommended for Total Cholesterol, Triglycerides, HDL & LDL Cholesterol
 - NLA-2014 identifies Non HDL Cholesterol (an indicator of all atherogenic lipoproteins such as LDL, VLDL, IDL, Lp(a), Chylomicron remnants) along with LDL-cholesterol as co-primary target for cholesterol lowering therapy. Note that major risk factors can modify treatment goals for LDL & Non HDL.
 - Apolipoprotein B is an optional, secondary lipid target for treatment once LDL & Non HDL goals have been achieved
 - Additional testing for Apolipoprotein B, hsCRP, Lp(a) & LP-PLA2 should be considered among patients with moderate risk for ASCVD for risk refinement

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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HBA1C

Sample Type : WHOLE BLOOD EDTA				
HBA1c RESULT	5.9	%	Normal Glucose tolerance (non-diabetic): <5.7% Pre-diabetic: 5.7-6.4% Diabetic Mellitus: >6.5%	HPLC
ESTIMATED AVG. GLUCOSE	123	mg/dl		

Note:
 1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled .
 2. Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0 % may not be appropriate.
 HbA1c provides an index of average blood glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control .

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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BLOOD UREA NITROGEN (BUN)

Sample Type : Serum				
SERUM UREA	15	mg/dL	13 - 43	Urease GLDH
Blood Urea Nitrogen (BUN)	7.0	mg/dl	5 - 25	GLDH-UV

Increased In:

Impaired kidney function, Reduced renal blood flow {CHF, Salt and water depletion, (vomiting, diarrhea, diuresis, sweating), Shock}, Any obstruction of urinary tract, Increased protein catabolism, AMI, Stress

Decreased In:

Diuresis (e.g. with over hydration), Severe liver damage, Late pregnancy, Infancy, Malnutrition, Diet (e.g., low-protein and high-carbohydrate, IV feedings only), Inherited hyperammonemias (urea is virtually absent in blood)


Limitations:

Urea levels increase with age and protein content of the diet.

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DEPARTMENT OF BIOCHEMISTRY

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FBS (GLUCOSE FASTING)

Sample Type : FLOURIDE PLASMA				
FASTING PLASMA GLUCOSE	97	mg/dl	70 - 100	HEXOKINASE

INTERPRETATION:

Increased I n

- Diabetes Mellitus
- Stress (e.g., emotion, burns, shock, anesthesia)
- Acute pancreatitis
- Chronic pancreatitis
- Wernicke encephalopathy (vitamin B1 deficiency)
- Effect of drugs (e.g. corticosteroids, estrogens, alcohol, phenytoin, thiazides)


Decreased I n

- Pancreatic disorders
- Extrapancreatic tumors
- Endocrine disorders
- Malnutrition
- Hypothalamic lesions
- Alcoholism
- Endocrine disorders

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Client Name	: MEDI WHEELS	Received	: 23/Sep/2023 12:37PM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 23/Sep/2023 12:57PM
Hospital Name	:		

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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PPBS (POST PRANDIAL GLUCOSE)

Sample Type : FLOURIDE PLASMA				
POST PRANDIAL PLASMA GLUCOSE	100	mg/dl	<140	HEXOKINASE

INTERPRETATION:

Increased In

- Diabetes Mellitus
- Stress (e.g., emotion, burns, shock, anesthesia)
- Acute pancreatitis
- Chronic pancreatitis
- Wernicke encephalopathy (vitamin B1 deficiency)
- Effect of drugs (e.g. corticosteroids, estrogens, alcohol, phenytoin, thiazides)


Decreased In

- Pancreatic disorders
- Extraprostatic tumors
- Endocrine disorders
- Malnutrition
- Hypothalamic lesions
- Alcoholism
- Endocrine disorders

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Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10710916
DOB	:	Registration	: 23/Sep/2023 09:46AM
Ref Doctor	: SELF	Collected	: 23/Sep/2023 09:50AM
Client Name	: MEDI WHEELS	Received	: 23/Sep/2023 10:14AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 23/Sep/2023 10:48AM
Hospital Name	:		

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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SERUM CREATININE

Sample Type : SERUM

SERUM CREATININE	0.51	mg/dl	0.51 - 0.95	KINETIC-JAFFE
------------------	------	-------	-------------	---------------

Increased In:

- Diet: ingestion of creatinine (roast meat), Muscle disease: gigantism, acromegaly,
- Impaired kidney function.

Decreased In:

- Pregnancy: Normal value is 0.4-0.6 mg/dL. A value >0.8 mg/dL is abnormal and should alert the clinician to further diagnostic evaluation.
- Creatinine secretion is inhibited by certain drugs (e.g., cimetidine, trimethoprim).

Verified By :
Kollipara Venkateswara Rao



Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID	: YGT30749	UHID/MR No	: YGT.0000030614
Patient Name	: Mrs. SRAVANI BATTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10710916
DOB	:	Registration	: 23/Sep/2023 09:46AM
Ref Doctor	: SELF	Collected	: 23/Sep/2023 09:50AM
Client Name	: MEDI WHEELS	Received	: 23/Sep/2023 10:14AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 23/Sep/2023 10:48AM
Hospital Name	:		

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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GGT (GAMMA GLUTAMYL TRANSPEPTIDASE)


Sample Type : SERUM				
GGT	11	U/L	0 - 55.0	KINETIC-IFCC

INTERPRETATION:
 GGT functions in the body as a transport molecule, helping to move other molecules around the body. It plays a significant role in helping the liver metabolize drugs and other toxins. Increased GGT include overuse of alcohol, chronic viral hepatitis, lack of blood flow to the liver, liver tumor, cirrhosis, or scarred liver, overuse of certain drugs or other toxins, heart failure, diabetes, pancreatitis, fatty liver disease.

Verified By :
 Kollipara Venkateswara Rao



Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID	: YGT30749	UHID/MR No	: YGT.0000030614
Patient Name	: Mrs. SRAVANI BATTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10710916
DOB	:	Registration	: 23/Sep/2023 09:46AM
Ref Doctor	: SELF	Collected	: 23/Sep/2023 09:50AM
Client Name	: MEDI WHEELS	Received	: 23/Sep/2023 10:14AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 23/Sep/2023 11:23AM
Hospital Name	:		

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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URIC ACID -SERUM

Sample Type : SERUM

SERUM URIC ACID	1.6	mg/dl	2.6 - 6.0	URICASE - PAP
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Uric acid is the final product of purine metabolism in the human organism. Uric acid measurements are used in the diagnosis and treatment of numerous renal and metabolic disorders, including renal failure, gout, leukemia, psoriasis, starvation or other wasting conditions, and of patients receiving cytotoxic drugs.

Verified By :
Kollipara Venkateswara Rao



Approved By :

(Signature)
 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID : YGT30749	UHID/MR No : YGT.0000030614
Patient Name : Mrs. SRAVANI BATTULA	Client Code : 1409
Age/Gender : 31 Y 0 M 0 D /F	Barcode No : 10710916
DOB :	Registration : 23/Sep/2023 09:46AM
Ref Doctor : SELF	Collected : 23/Sep/2023 09:50AM
Client Name : MEDI WHEELS	Received : 23/Sep/2023 10:14AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 23/Sep/2023 10:48AM
Hospital Name :	

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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BUN/CREATININE RATIO

Sample Type : SERUM				
Blood Urea Nitrogen (BUN)	7.0	mg/dl	5 - 25	GLDH-UV
SERUM CREATININE	0.51	mg/dl	0.51 - 0.95	KINETIC-JAFFE
BUN/CREATININE RATIO	13.70	Ratio	6 - 25	Calculated

Verified By :
Kollipara Venkateswara Rao



Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID	: YGT30749	UHID/MR No	: YGT.0000030614
Patient Name	: Mrs. SRAVANI BATTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10710916
DOB	:	Registration	: 23/Sep/2023 09:46AM
Ref Doctor	: SELF	Collected	: 23/Sep/2023 09:46AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 23/Sep/2023 01:06PM
Hospital Name	:		

DEPARTMENT OF RADIOLOGY**DOPPLER STUDY :**

MITRAL FLOW : E - 0.3m/sec, A - 0.1 m/sec.
AORTIC FLOW : 1.3m/sec
PULMONARY FLOW : 0.9m/sec
TRICUSPID FLOW : TRJV :1.1 m/sec, RVSP -22 mmHg

COLOUR FLOW MAPPING: NORMAL


IMPRESSION :

- * NORMAL SIZED CARDIAC CHAMBERS
- * NO RWMA OF LV
- * GOOD LV FUNCTION
- * NORMAL LV FILLING PATTERN
- * NO MR/ NO AR/ NO PR
- * NO TR/ NO PAH
- * NO PE / CLOT / VEGETATIONS.

Verified By :
Kollipara Venkateswara Rao



Approved By :


Dr. B. Nagaraju
MD (Internal Medicine)
DN (CARDIOLOGY)
APNC Reg. No 70760

Visit ID : YGT30749
Patient Name : Mrs. SRAVANI BATTULA
Age/Gender : 31 Y 0 M 0 D /F
DOB :
Ref Doctor : SELF
Client Name : MEDI WHEELS
Client Add : F-701, Lado Sarai, Mehravli, N
Hospital Name :

UHID/MR No : YGT.0000030614
Client Code : 1409
Barcode No : 10710916
Registration : 23/Sep/2023 09:46AM
Collected : 23/Sep/2023 09:50AM
Received : 23/Sep/2023 10:11AM
Reported : 23/Sep/2023 10:34AM

DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
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CUE (COMPLETE URINE EXAMINATION)
Sample Type : SPOT URINE
PHYSICAL EXAMINATION

TOTAL VOLUME	20 ML	ml		
COLOUR	PALE YELLOW			
APPEARANCE	CLEAR			
SPECIFIC GRAVITY	1.010		1.003 - 1.035	Bromothymol Blue

CHEMICAL EXAMINATION

pH	5.0		4.6 - 8.0	Double Indicator
PROTEIN	NEGATIVE		NEGATIVE	Protein - error of Indicators
GLUCOSE(U)	NEGATIVE		NEGATIVE	Glucose Oxidase
UROBILINOGEN	NEGATIVE	mg/dl	< 1.0	Ehrlichs Reaction
KETONE BODIES	NEGATIVE		NEGATIVE	Nitroprasside
BILIRUBIN - TOTAL	NEGATIVE		Negative	Azocoupling Reaction
BLOOD	NEGATIVE		NEGATIVE	Tetramethylbenzidine
LEUCOCYTE	NEGATIVE		Negative	Azocoupling reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization Reaction

MICROSCOPIC EXAMINATION

PUS CELLS	2-3	cells/HPF	0-5	
EPITHELIAL CELLS	1-2	/hpf	0 - 15	
RBCs	NIL	Cells/HPF	Nil	
CRYSTALS	NIL	Nil	Nil	
CASTS	NIL	/HPF	Nil	
BUDDING YEAST	NIL		Nil	
BACTERIA	NIL		Nil	
OTHER	NIL			

Verified By :
 Kollipara Venkateswara Rao



Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID	: YGT30749	UHID/MR No	: YGT.0000030614
Patient Name	: Mrs. SRAVANI BATTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10710916
DOB	:	Registration	: 23/Sep/2023 09:46AM
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Client Name	: MEDI WHEELS	Received	: 23/Sep/2023 10:11AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 23/Sep/2023 10:34AM
Hospital Name	:		

DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
-----------	--------	------	-----------------------	--------



Verified By :
Kollipara Venkateswara Rao



Approved By :

Dr. Sumalatha
 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID	: YGT30749	UHID/MR No	: YGT.0000030614
Patient Name	: Mrs. SRAVANI BATTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10710916
DOB	:	Registration	: 23/Sep/2023 09:46AM
Ref Doctor	: SELF	Collected	: 23/Sep/2023 11:18AM
Client Name	: MEDI WHEELS	Received	: 23/Sep/2023 11:46AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 23/Sep/2023 12:26PM
Hospital Name	:		

DEPARTMENT OF CYTOPATHOLOGY

PAP SMEAR - CONVENTIONAL

PAP SMEAR

Lab Ref. No.: YLLD/ PAP-124/ 23

Date of Receiving: 23-09-2023

SYSTEM: BETHESDA 2014

SPECIMEN: ONE CERVICAL SMEAR. FIXED IN ALCOHOL

ADEQUACY: SATISFACTORY FOR EVALUATION.

MI CROSCOPY: Smears show predominantly superficial and intermediate squamous epithelial cells. Epithelial cells show normal nuclear-cytoplasmic ratio. No koilocytosis seen. No evidence of dysplasia/malignancy is seen in the smears examined.

IMPRESSION: NILM (Negative for intraepithelial lesion and malignancy).

ASCO/ CAP GUIDELINES :

	HPV Unknown	HPV Positive	HPV Negative
Unsatisfactory	Repeat cytology after 2-4 mths	Colposcopy	Repeat cytology after 2-4 mths
NILM with EC/TZ	Routine screening	HPV genotyping/ repeat co-testing @ 1 Year	Routine Screening
NILM without EC/TZ	HPV teting	Repeat co-testing @ 1 Year	Routine Screening
ASCUS	HPV teting	Colposcopy	Routine Screening
LSIL	Colposcopy	Colposcopy	Repeat cotesting @ 3 year
ASC - H	Colposcopy	Colposcopy	Colposcopy
HSIL	Immediate LEEP	Immediate LEEP	Immediate LEEP
AGC	EB & Endocervical Bx	EB & Endocervical Bx	EB & Endocervical Bx

SCREENING GUIDELINE : 21-29 Years - Cytology only every 3 years ; <21 & 65 yrs - Screening not recommended

Comments- Pap Test is a screening test for cervical cancer.
 False negativity may be due to inherent limitation of this technique.

Verified By :
 Kollipara Venkateswara Rao

Approved By :

 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist



Visit ID	: YGT30749	UHID/MR No	: YGT.0000030614
Patient Name	: Mrs. SRAVANI BATTULA	Client Code	: 1409
Age/Gender	: 31 Y 0 M 0 D /F	Barcode No	: 10710916
DOB	:	Registration	: 23/Sep/2023 09:46AM
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Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 23/Sep/2023 12:26PM
Hospital Name	:		

DEPARTMENT OF CYTOPATHOLOGY

***** End Of Report *****

Verified By :
Kollipara Venkateswara Rao



Approved By :


Dr. Sumalatha
MBBS, DCP
Consultant Pathologist

ID: 30614

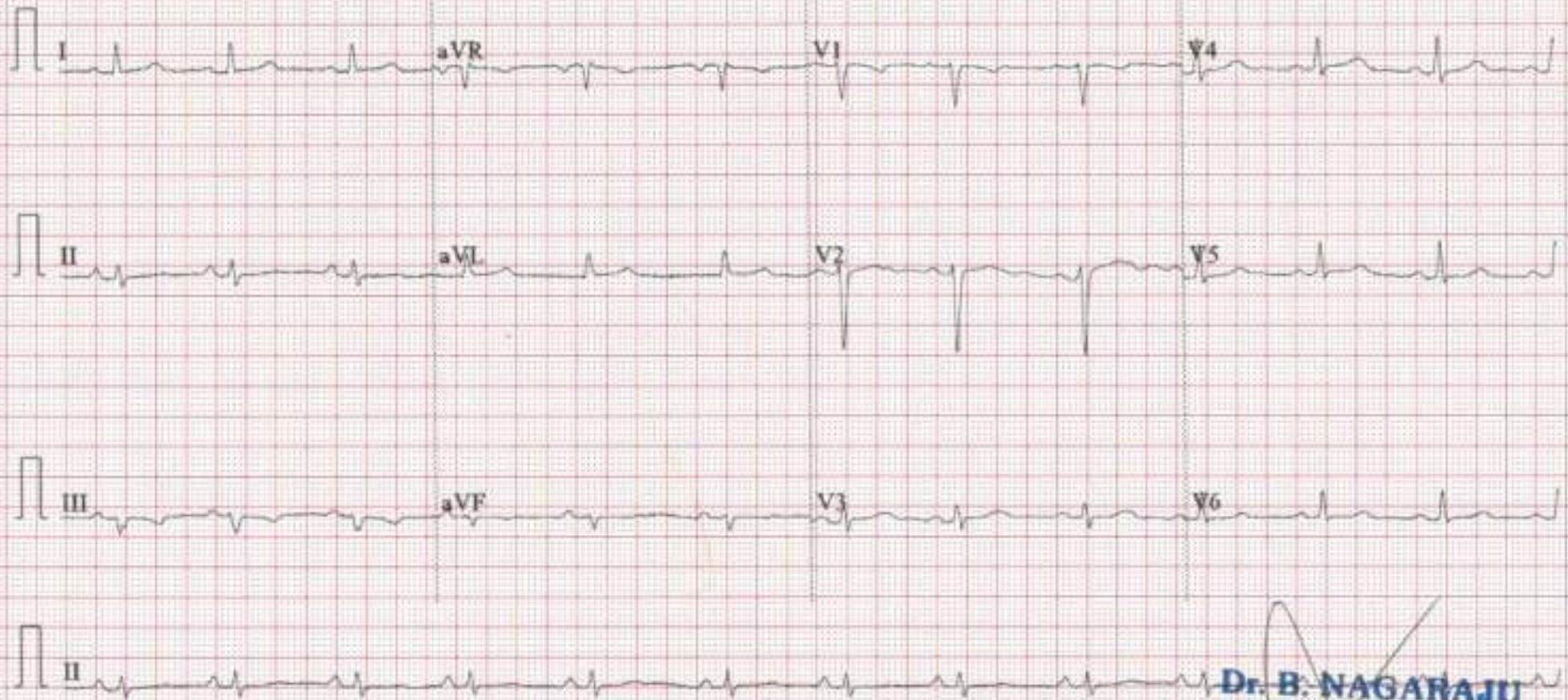
23-09-2023 10:20:52

B Sravani
Female 31Years
Req. No. :

HR : 75 bpm
P : 95 ms
PR : 168 ms
QRS : 84 ms
QT/QTcBz : 394/442 ms
PQRS/T : 66/4/-8 °
RV5/SV1 : 0.556/0.660 mV

Diagnosis Information:
Sinus Arrhythmia
Low Voltage(Limb Leads)

Report Confirmed by:



Dr. B. NAGARAJU
Regd. No: 70760 MBBS, M.D. DM
CONSULTANT CARDIOLOGIST
YODA DIAGNOSTICS-GUNTUR

DATE: 23-09-23

NAME: BATIKA SWANANI Gaw

AGE: 32/E ADDRESS: _____

TYPE OF LENS: GLASS CONTACTS

CR POLYCARBONATE

COATINGS : ARC HARD COAT

TINT : White SP2 PHOTO GREY

BIFOCALS : KRYPTOK EXECUTIVE

"D" PROGRESSIVE

	R			L		
	SPH	CYL	AXIS	SPH	CYL	AXIS
DV	-			-		
	0.75			0.75		
ADD						


INSTRUCTIONS _____

L.P.D. _____ D.V. ✓

N.V. _____ CONSTANT USE ✓

 **YODA**
AGNOSTICS

RECEPTION

 GPS Map Camera

Guntur, Andhra Pradesh, India

7FX2+PJ8, Kothapeta, Guntur, Andhra Pradesh 522001, India

Lat 16.299252°

Long 80.4516°

23/09/23 11:11 AM GMT +05:30



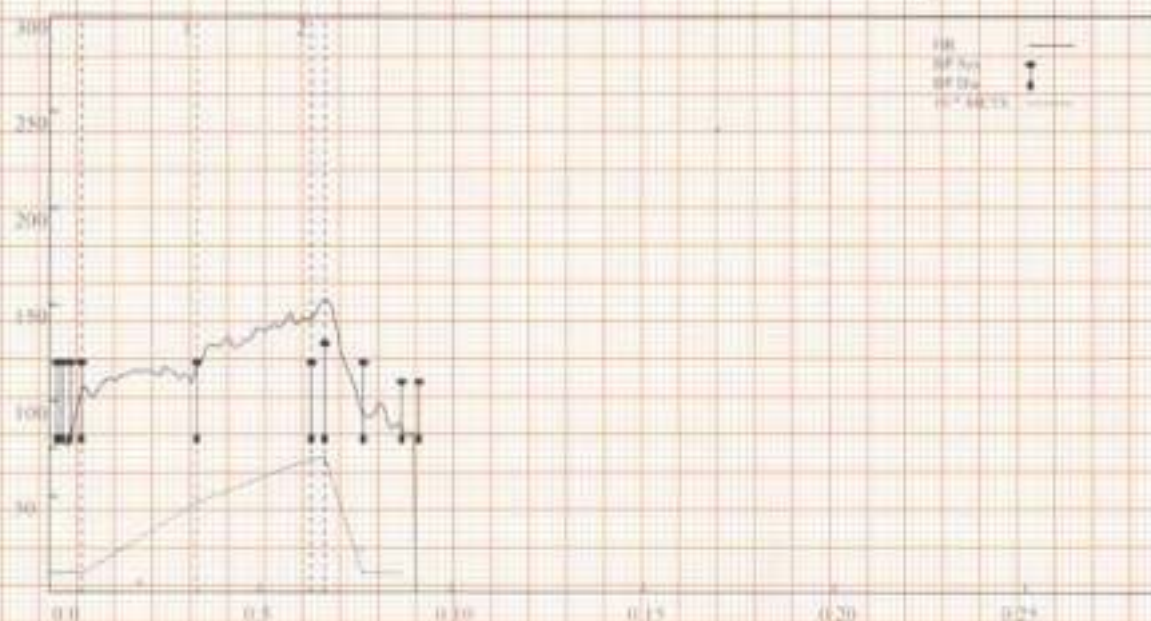
Yoda Diagnostic Guntur

Name: SRAVANI BATTULA

Date: 23-09-2023

Time: 13:12

Exercise Trend



Interpretation

The Patient Exercised according to Bruce Protocol for 0:06:20 achieving a work level of 7.1 METS
Resting Heart Rate, initially 75 bpm rose to a max. heart rate of 147bpm (78% of Predicted Maximum Heart Rate)
Resting Blood Pressure of 120/80 mmHg, rose to a maximum Blood Pressure of 130/80 mmHg
* Significant S.T. T.Changes During Exercise and Recovery
* Fair Exercise Tolerance
* Stress Test is Positive for Exercise Induced Ischemia

Dr. B. NAGARAJU
Regd.No: 70766 MBBS, M.D, DM
CONSULTANT CARDIOLOGIST
YODA DIAGNOSTICS GUNTUR

Ref. Doctor: DR SELF

Doctor: DR NAGARAJU

Yoda Diagnostic Guntur

Name: SRAVANI BATTULA **Date:** 23-09-2023 **Time:** 13:12
Age: 31 **Gender:** F **Height:** 148 cms **Weight:** 36 Kg **ID:** 10710916
Clinical History: NO
Medications: NO

Test Details:

Protocol: Bruce **Predicted Max HR:** 189 **Target HR:** 160
Exercise Time: 0:06:20 **Achieved Max HR:** 147 (78% of Predicted MHR)
Max BP: 130/80 **Max BP x HR:** 19110 **Max Mets:** 7.1
Test Termination Criteria:

Protocol Details:

Stage Name	Stage Time	ME1S	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	ST Level mm	ST Slope mV/5
Supine	00:11	1	0	0	77	120/80	9000	0.6 V4	1.9 V1
Standing	00:10	1	0	0	77	120/80	9240	-0.5 V4	1.3 V1
HyperVentilation	00:11	1	0	0	79	120/80	9480	0.7 V4	2 V1
PreTbx	00:19	1	1.6	0	81	120/80	11160	0.8 V1	1.8 V1
Stage 1	03:00	4.7	2.7	10	109	120/80	12080	0.8 V1	1.8 V1
Stage 2	03:50	7	4	12	143	120/80	17160	-0.9 V4	1.8 V1
Peak Exercise	00:20	7.1	5.5	14	147	130/80	19110	-0.9 V4	1.2 V1
Recovery1	01:50	1	0	0	107	120/80	12840	0.8 V1	1.7 V1
Recovery2	01:00	1	0	0	86	110/80	9660	-0.3 V1	2 V1

Yoda Diagnostic Guntur

SRAVANI BATTULA

HR: 75 bpm

Bruce Protocol

ID: 10710916

Date: 23-09-2023

Exec Time: 0:00:00

Stage Time: 00:11

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

Stage: Supine

Speed: 0 km/h

Slope: 0%

THR: 160 bpm

STLevel(mm) STSlope(mV/s)

0.1 0.2 I

I

I

V1 0.1 0.5

V1

0.4 0.5 II

II

II

V2 0.4 0.5

V2

0.2 0.7 III

III

III

V3 0.5 1.0

V3

0.4 0.1 aVR

aVR

aVR

V4 0.6 0.6

V4

0.2 0.5 aVL

aVL

aVL

V5 0.4 0.2

V5

0.4 0.6 aVF

aVF

aVF

V6 0.5 0

V6

II

II

Yoda Diagnostic Guntur

SRAVANI BATTULA

Bruce Protocol

ID: 10710916

Date: 23-09-2023

Exec Time: 0:00:00

Stage Time: 00:10

HR: 77 bpm

STLevel(mm) STSlope(mV/s)

Stage: Standing

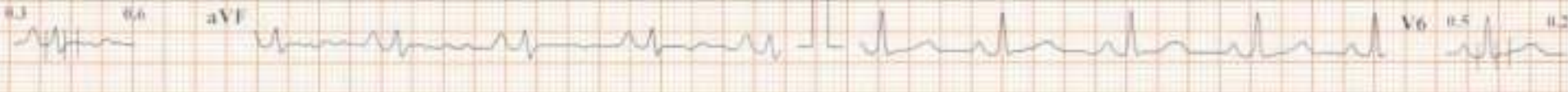
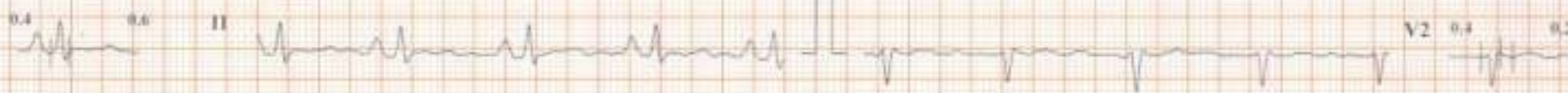
Speed: 0

Slope: 0%

THR: 160 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)



Yoda Diagnostic Guntur

SRAVANI BATTULA

HR: 79 bpm

Brace Protocol

ID: 10710916

Date: 27-09-2023

Exec Time: 0:00:00

Stage Time: 00:11

STLevel(mm) STSlope(mV/s)

Stage: HyrecVentilation

Speed: 0

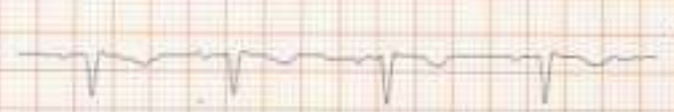
Slope: 0%

TfHR: 160 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

0.4 0.2 I



V1 0.5 0.3



0.5 0.5 II



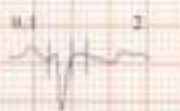
V2 0.3 0.5



0.1 0.8 III



V3 0.1 2



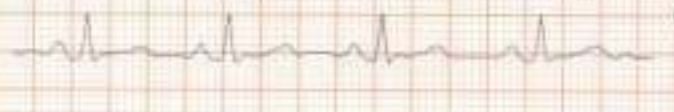
0.5 0.1 aVR



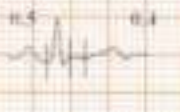
V4 0.7 0.7



0 0.5 aVL



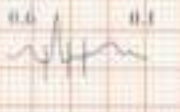
V5 0.5 0.4



0.3 0.8 aVF



V6 0.6 0.1



Yoda Diagnostic Guntur

SRAVANI BATTULA

HR: 109 bpm

Bruce Protocol

ID: 10710916

Date: 23-09-2023

Exec Time: 0:03:00

Stage Time: 03:00

STLevel(mm) STSlope(mV/s)

Stage: 1

Speed: 2.7 kmph

Slope: 10%

THR: 160 bpm

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)



Yoda Diagnostic Guntur

SRAVANI BATTULA

Bruce Protocol

ID: 10710916

Date: 23-09-2023

Exec Time: 0:06:00

Stage Time: 03:00

HR: 143 bpm

STLevel(mm) STSlope(mV/s)

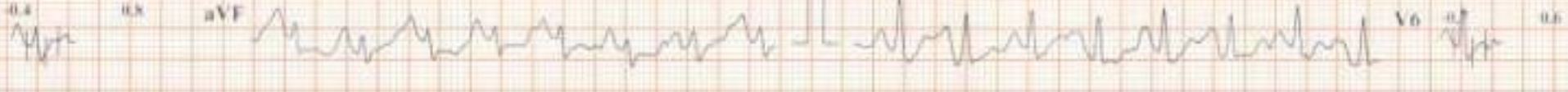
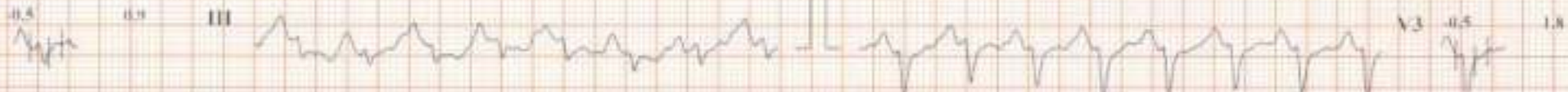
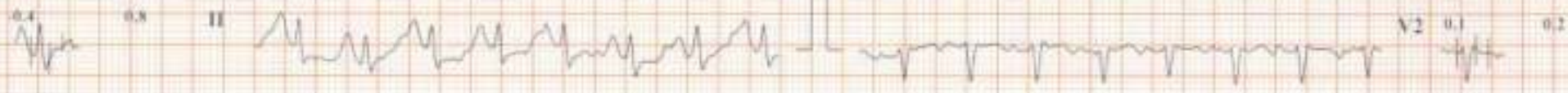
Stage: 2

Speed: 4 kmph

Slope: 12%

THR: 160 bpm

BP: 120/80 mmHg
STLevel(mm) STSlope(mV/s)



V1 0.8 0.1

V2 0.1 0.2

V3 0.5 1.8

V4 0.9 0.7

V5 0.8 0.5

V6 0.7 0.6

Yoda Diagnostic Guntur

SRAVANI BATTULA

HR: 147 bpm

Bruce Protocol

ID: 10710916

Date: 23-09-2023

Exec Time: 0:06:20

Stage Time: 00:20

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

Stage: 3 Peak Exercise

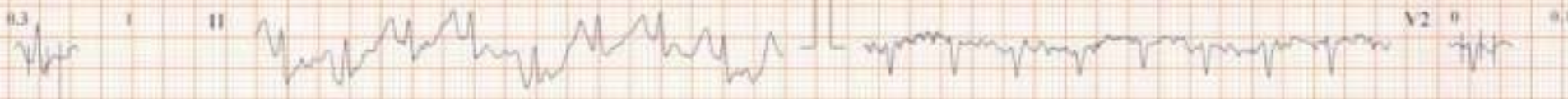
Speed: 5.5 kmph

Slope: 14%

THR: 160 bpm

BP: 130/80 mmHg

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



Yoda Diagnostic Guntur

SRAVANI BATTULA

HR: 107 bpm

Bruce Protocol

ID: 10710916

Date: 23-09-2023

Exec Time: 00:00

Stage Time: 01:00

BP: 120/80 mmHg

STLevel(mm) STSlope(mV/s)

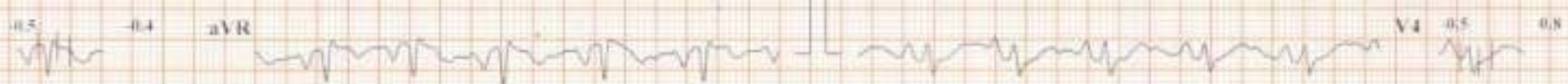
Stage: Recovery I

Speed: 0 kmph

Slope: 0 %

HR: 160 bpm

STLevel(mm) STSlope(mV/s)



Yoda Diagnostic Guntur

SRAVANI BATTULA

HR: 86 bpm

Bruce Protocol

ID: 10710916

Date: 23-09-2023

Exec Time: 00:00

Stage Time: 01:00

BP: 110/80 mmHg

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

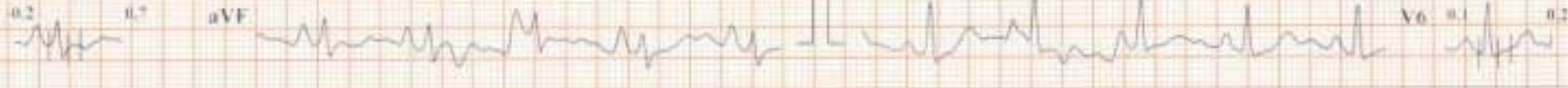
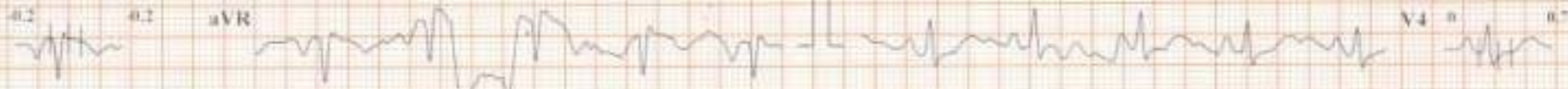
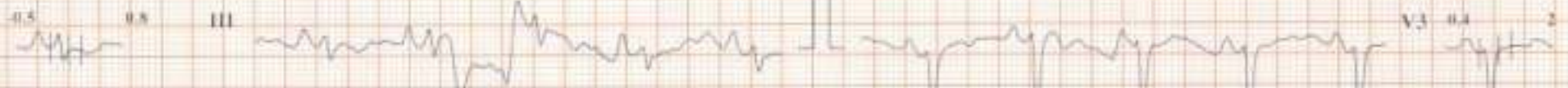
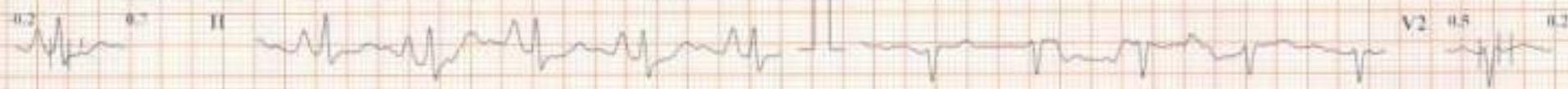
Stage: Recovery2

Speed: 0 kmph

Slope: 0 %

HR: 160 bpm

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



Yoda Diagnostic Guntur

SRAVANI BATTULA

HR: 84 bpm

Bruce Protocol

ID: 10710916

Date: 23-09-2023

Exec Time: 00:00

Stage Time: 00:25

STLevel(mm) STSlope(mV/s)

Stage: Recovery3

Speed: 0 kmph

Slope: 0%

TfHR: 160 bpm

BP: 110/80 mmHg

STLevel(mm) STSlope(mV/s)

I 1.7 0.2

I

V1 1.2 0.5



II 0 0.8

II

V2 -0.1 0.1



III 1.7 0.7

III

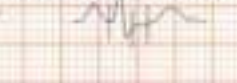
V3 0.1 2.2



aVR 1.5 0.6

aVR

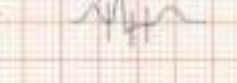
V4 0.6 0.5



aVL 1.2 0.2

aVL

V5 0.7 0.3



aVF 0.9 0.8

aVF

V6 0.5 0.2



II



SRAVANI BATTULA 31Y FEMALE 10710916 CHEST PA 23-Sep-23

YODA DIAGNOSTICS