

Request(bobS43973), Package Code-PKG10000228,
Beneficiary Code-46388

M

Mediwheel
SUVEK SINGH, customercare@mediwheel.in

Yesterday

:



REMARKS UNLESS YOU KNOW THE SENDER
REMARKS UNLESS YOU KNOW THE SENDER



Mediwheel
Your wellness partner



011-41195959

Email:wellness@mediwheel.in

Dear Poonam devi,

Please find the confirmation for following request.

Booking Date : 11-08-2023

Package Name : Medi-Wheel Full Body Health Checkup Female Below 40

Name of Diagnostic/Hospital : Ivy Hospital

Address of

Diagnostic/Hospital : Sector - 71 , Mohali

Contact Details : 9041345708

City : Mohali

State : PUNJAB

Pincode : 160071

Appointment Date : 12-08-2023

Confirmation

Status : Confirmed

Preferred Time : 8:00am-9:00am

Comment : Confirm

Instructions to undergo Health Check:

« ▾ Reply all



मिलजे पर जिम्मलिखित को लौटाएः-
मुख्य पर्याप्त (मुद्रा),
बैंक ऑफ बड़ोदा
अंगठ कार्यालय,
पी-23 विभूति खड़, गोमती नगर
लखनऊ - 226 010
ट्रॉनाव नं. 91 522 6677645/47

रक्त संग्रह B+
सर्वाधान चिह्न - Scar mark on the right side of nose





Dr. Mukesh Vats

MBBS, MS, FVRS

(Ophthalmologist)

Retina Specialist & Phaco Surgeon

PMC Reg. No.: 45034

Mobile : +91-9357519888

Ms. Poonam Deol

ID: 381776.

Ivy Hospital

SUPER-SPECIALITY HEALTHCARE
SECTOR 71, MOHALI
Tel: 0172-7170000
CIN No.: U85110PB2005PTC027898

12/8/23

VMT 6/6
6/6
(VA)

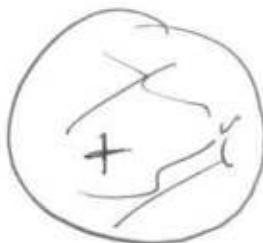
CLO funnel check-up

Pupil - NSNR

Color vision uncorr

ALS - WNL.

Lundus op os



op



Disc + macula - (N)

Adv: Medically fit.

Dr. Mukesh Vats M.S. FVRS
Retina Consultant & Phaco Surgeon
PMC 45034



Ivy Hospital

**SUPER-SPECIALITY HEALTHCARE
SECTOR 71, MOHALI
Tel: 0172-7170000
CIN No.: U85110PB2005PTC027898**

Name: Mrs. Leonam

Age: 27 | f Consultant: Dr Jagpal Date: 12 / 8 / 23
BP: 110 / 76 Pulse: 96/min RR: 18/min Temp: 98.9°F Pain: No.
Ht: 5'2" Wt: 52.4/Kg Allergies: No. Nutritional Assessment: Yes/No
Diagnosis / DD:

Complaint :

Investigations

Investigations	Clinical Notes
	<p>For general health checkup.</p> <p>U/S - mild hepatomegaly.</p> <p>ECA - (R)</p> <p>TSH - 5.0</p> <p>LF7 - (R)</p> <p>Lipid profile - (R)</p> <p>Urine R/E 12-15 RBC - monobringing.</p> <p>Hb - 10.5</p> <p>MCV - 96.1</p> <p>Ret - 143</p> <p>TLC - 5.5</p> <p>* BLOOD GROUP O +ve says was <u>B+ve</u></p> <p>* Please reconfirm Blood group</p>

S.No.	Salt/Generic Name	Route	Dose	Frequency	Duration	Special Instructions
1)	Tab MF12 OD Once daily (After Breakfast)					
2)	Tab LIUOGEN OD (2-3 hrs after Lucy).					
3)	calcival saclet once a week x 4wks.					
4)	Rpt CBC after 1mth.					

Follow up

Sign & Stamp

Ivy/OPD/Form/005

ІАУ НОСПІАТР ЗЕСЧА МОННАГА

КР-153-03

Чиєзіад
ДОЗІВЛЕННЯ
БОДІМАНДЕМІІ
ІІІ ВІДЕО

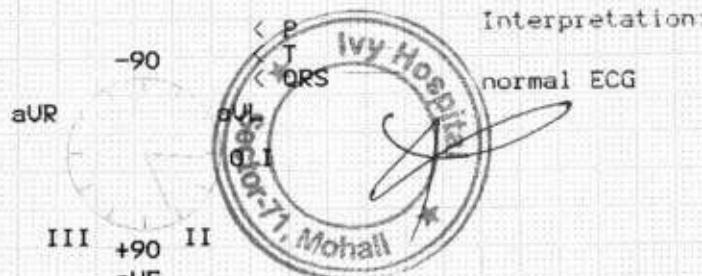
150930310030

R

Mrs. Poonam Devi
Age - 27y IF.
UHID - 381776.

Measurement Results

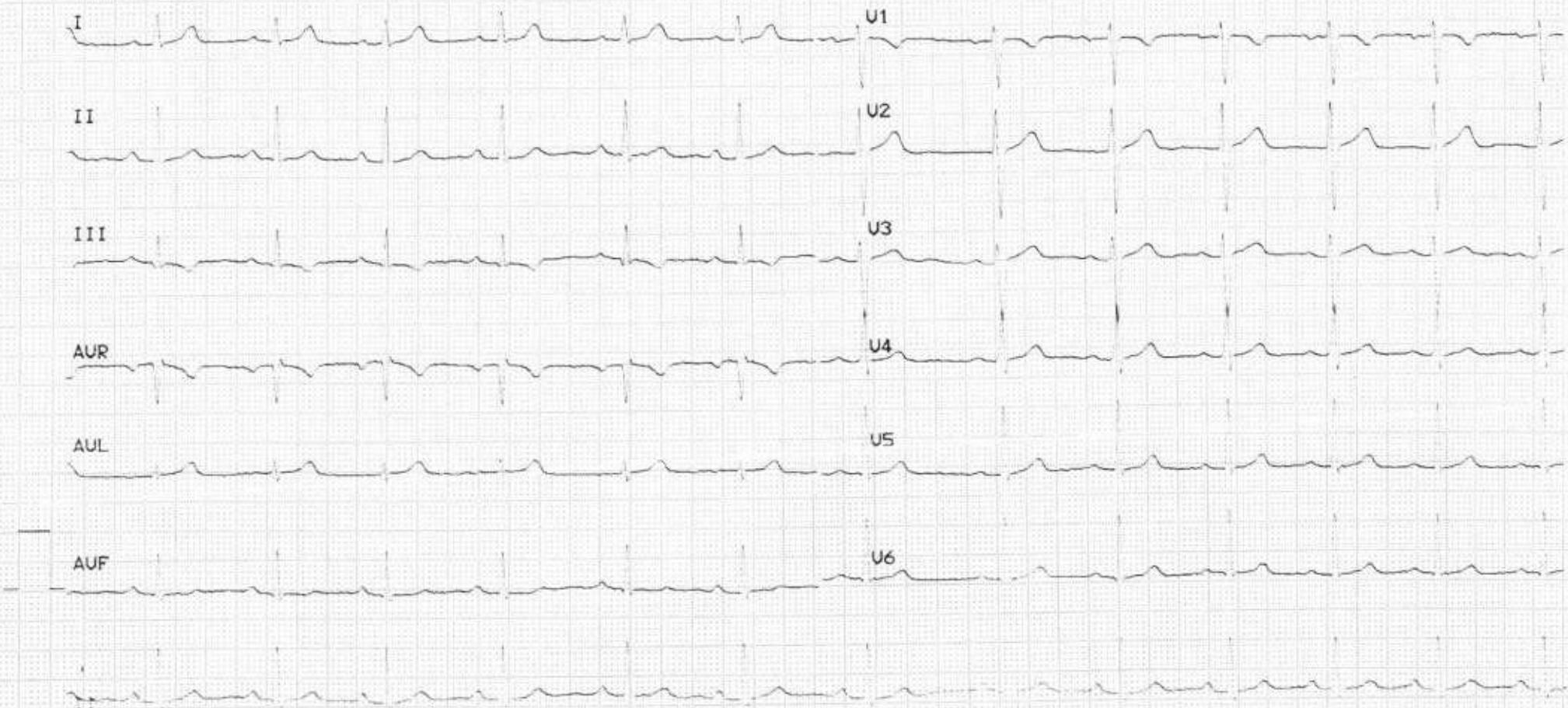
QRS		90	ms
QT/QTcB	352 /	401	ms
PR		172	ms
P		104	ms
RR/PP	772 /	745	ms
P/QRS/T	65/	65/	5 degrees
QTD/QTcBD	36 /	41	ms
Sokolow		1.9	mU
NK		11	



Interpretation

Normal ECG

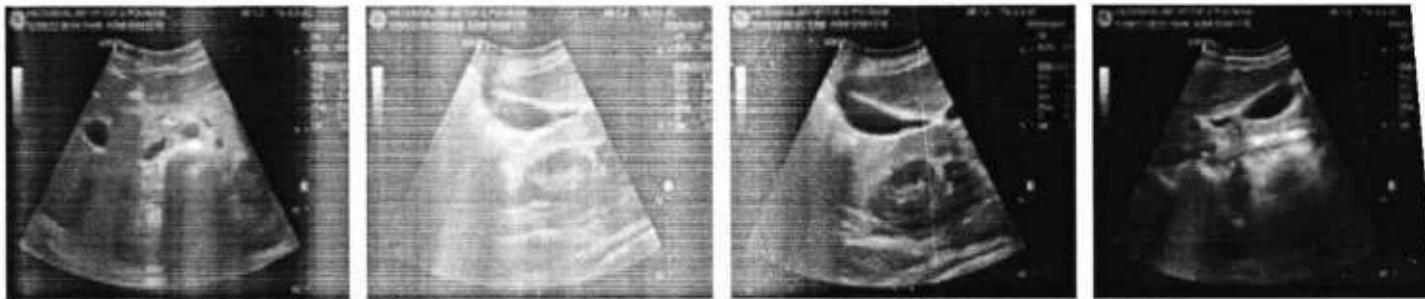
Unconfirmed report.





NAME	POONAM	SEX/AGE	F27Y
PATIENT ID	ID381776	Accession Number	
REF CONSULTANT	DIRECT	DATE	12/08/2023 09:54

USG WHOLE ABDOMEN



LIVER: is enlarged in size (~17.5 cm), normal in outline and echotexture. No focal lesion is seen. IHBR are not dilated. Portal vein is normal. CBD is not dilated.

GALL BLADDER: is normally distended. GB wall is normal. No echoes are seen in GB.

SPLEEN: is normal in size (~9.6cm), outline and echotexture. No focal lesion is seen.

PANCREAS & UPPER RETROPERITONEUM: Visualised pancreatic head and proximal body are normal in size and echotexture. Tail of pancreas is obscured by bowel gas.

RIGHT KIDNEY: It is normal in size (~11.0 cm), outline and echotexture. Corticomedullary differentiation is well-defined. No calculi / hydronephrosis is seen.

LEFT KIDNEY: It is normal in size (~9.5 cm), outline and echotexture. Corticomedullary differentiation is well-defined. No calculi / hydronephrosis is seen.

U-BLADDER: is partially distended at the time of examination. Visualized lumen is clear.

UTERUS: is normal in size, outline and echotexture. ET is ~ 10.0mm. No discrete focal lesion is seen.

OVARIES: They are normal in size and echotexture. No SOL is seen.

No free fluid is seen in peritoneal cavity.

OPINION:

-Hepatomegaly.



DR GAGANDEEP SINGH SETHI
MD RADIODIAGNOSIS

The above impression is just an opinion of the imaging findings and not a final diagnosis. Needs correlation with clinical status, lab investigations and other relevant investigations

(NOT FOR MEDICO-LEGAL PURPOSE)



Ivy Hospital

SUPER-SPECIALITY HEALTHCARE
SECTOR 71, MOHALI
Tel: 0172-7170000
CIN No.: U85110PB2005PTC027898

NAME	POONAM DEVI	SEX/AGE	F27Y
PATIENT ID	ID381776	Accession Number	XR-16353-OPD
REF CONSULTANT		DATE	12/08/2023 10:03

X-RAY CHEST PA VIEW

Rotation is present.

Cardiac shadow is normal.

No focal lung parenchymal lesion is seen.

Both hila are normal.

Both CP angle and domes of diaphragm are normal.



DR. GAGANDEEP SINGH SETHI

MUD RADIODIAGNOSIS

The above impression is just an opinion of the imaging findings and not a final diagnosis. Needs correlation with clinical status, lab investigations and other relevant investigations

(NOT FOR MEDICO-LEGAL PURPOSE)

A unit of Ivy Health and Life Sciences (P) Ltd. Website : www.ivyhospital.com, Email: cs@ivyhospital.com Fax: 91-172-2274900
Regd. Office: Administration Block, Ivy Hospital, Sector-71, S.A.S Nagar Mohali-160071, Punjab, Ph : +91-172-7170000, Fax: 91-172-5044339
All Payments to be made in favour of Ivy Health & Life Sciences (P) Ltd
IVY HELPLINE : +91 99888-23456



NAME : MRS. POONAM DEVI	Requisition Date : 12/Aug/2023 09:28AM
DOB/Gender : 20-Jan-1996/F	SampleCollDate : 12/Aug/2023 09:34AM
UHID : 381776	Sample Rec.Date : 12/Aug/2023 09:35AM
Inv. No. : 3597958	Approved Date : 12/Aug/2023 12:20PM
Panel Name : Ivy Mohali	Referred Doctor : Self
Bar Code No : 12924566	

Test Description	Observed Value	Unit	Reference Range

IMMUNOASSAY

TOTAL THYROID PROFILE

Serum Total T3 1.31 ng/mL 0.970 – 1.69
(CLIA/Vitros 3600)

Summary & Interpretation:

Triiodothyronine (T3) is the hormone principally responsible for the development of the effects of the thyroid hormones on the various target organs. T3 is mainly formed extrathyroidally, particularly in the liver, by deiodination of T4. A reduction in the conversion of T4 to T3 results in a fall in the T3 concentration. It occurs under the influence of medicaments such as propantheline, glucocorticoids or amiodarone and in severe non-thyroidal illness (NTI). The determination of T3 is utilized in the diagnosis of T3-hyperthyroidism, the detection of early stages of hyperthyroidism and for indicating a diagnosis of thyrotoxicosis factitia.

Serum Total T4 5.72 µg/dL 5.53 – 11.0
(CLIA/Vitros 3600)

Summary & Interpretation:

The hormone thyroxine (T4) is the main product secreted by the thyroid gland. The major part of total thyroxine (T4) in serum is present in protein-bound form. As the concentration of the transport proteins in serum are subject to exogenous and endogenous effects, the status of the binding proteins must also be taken into account in the assessment of the thyroid hormone concentration in serum. The determination of T4 can be utilized for the following indications : the detection of hyperthyroidism, the detection of primary and secondary hypothyroidism and the monitoring of TSH-suppression therapy.

Serum TSH 5.000 mIU/L 0.4001 – 4.049
(CLIA/Vitros 3600)

Summary & Interpretation:

TSH is formed in specific basophil cells of the anterior pituitary and is subject to a circadian secretion sequence. The determination of TSH serves as the initial test in thyroid diagnostics. Accordingly, TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid.

Note:

1. TSH levels are subject to circadian variation, reaching peak levels between 2 - 4 a.m. and at a minimum between 6-10 pm. The variation is of the order of 50% . hence time of the day has influence on the measured serum TSH concentrations
2. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
3. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.
4. Clinical Use: Primary Hypothyroidism, Hyperthyroidism, Hypothalamic – Pituitary hypothyroidism, Inappropriate TSH secretion, Nonthyroidal illness, Autoimmune thyroid disease, Pregnancy associated thyroid disorders.

PREGNANCY	REFERENCE RANGE FOR TSH IN uIU/mL
1st Trimester	0.05 – 3.70
2nd Trimester	0.31 – 4.35
3rd Trimester	0.41 – 5.18

Please correlate clinically.



The highlighted values should be correlated clinically


DR ANAND KALIA
M.D. PATHOLOGY



NAME : MRS. POONAM DEVI

DOB/Gender : 20-Jan-1996/F

UHID : 381776

Inv. No. : 3597958

Panel Name : Ivy Mohali

Bar Code No : 12924566

Requisition Date : 12/Aug/2023 09:28AM

Sample Coll Date : 12/Aug/2023 09:34AM

Sample Rec. Date : 12/Aug/2023 09:35AM

Approved Date : 12/Aug/2023 12:20PM

Referred Doctor : Self

Test Description

Observed Value

Unit

Reference Range

BIOCHEMISTRY

GLUCOSE FASTING

Primary Sample Type: Fluoride Plasma

Plasma Glucose Fasting (Hexokinase/ AU480)	96	mg/dL	< 106 Normal 107 - 125 Impaired Tolerance >126 Diabetic
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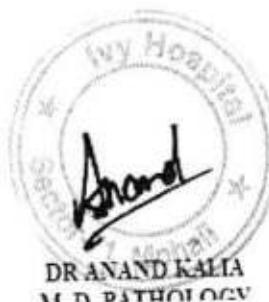
GLUCOSE PP

Plasma Glucose Post Prandial (Hexokinase/ AU480)	80	mg/dL	<140 Normal 140 - 180 Impaired Tolerance >180 Diabetic
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RFT (RENAL FUNCTION TESTS)

Serum Urea (Urease GLDH/AU480)	22.00	mg/dl	17-43
Serum Creatinine (JAFFE KINETIC/ AU480)	0.70	mg/dl	0.51-0.95
Serum Uric acid (Uricase/AU480)	4.30	mg/dl	2.6- 6.0

The highlighted values should be correlated clinically





POLO LABS PVT LTD

Polo Labs, Ivy Hospital, Sector 71,

Mohali, Punjab, 160071

Ph: 9115115257, 9115115258,

9115115624

Email: care@pololabs.in



NAME : MRS. POONAM DEVI	Requisition Date : 12/Aug/2023 09:28AM
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Test Description	Observed Value	Unit	Reference Range
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LIVER FUNCTION TEST WITH GGT

Serum Bilirubin Total (DPD/AU 480)	0.50	mg/dL	0.3-1.2
Serum Bilirubin Direct (DPD/AU 480)	0.10	mg/dl	<0.3
Serum Bilirubin Indirect (Calculated)	0.40	mg/dl	0.1-1.0
Serum SGOT(AST) (IFCC Without P5P/AU 480)	22	U/L	<35
Serum SGPT(ALT) (IFCC Without P5P/AU 480)	11	U/L	<50
Serum AST/ALT Ratio (Calculated)	2.00		
Serum GGT (IFCC/AU 480)	10	IU/L	5-32
Serum Alkaline Phosphatase (IFCC/PNPAMP Kinetic/AU 480)	125	U/L	30-120
Serum Protein Total (Biuret)	6.8	gm/dl	6.40 - 8.20
Serum Albumin (BCG/AU 480)	3.9	g/dL	3.5-5.2
Serum Globulin (Calculated)	2.90	gm/dl	2.0-3.5
Serum Albumin/Globulin Ratio (Calculated)	1.34	%	1.0 - 1.8



The highlighted values should be correlated clinically



DR ANAND KALIA
M.D. PATHOLOGY



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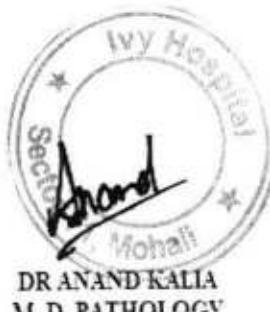
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Panel Name	: Ivy Mohali	Referred Doctor	: Self
Bar Code No	: 12924566		

Test Description	Observed Value	Unit	Reference Range
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LIPID PROFILE

Serum Cholesterol (Cholesterol AU 480)	119	mg/dL	Desirable:<200 Borderline High:200-239 High:> 240
Serum Triglycerides (Lipase GPO-PAP AU 480)	111	mg/dL	<150 Normal 150-199 Borderline High 200-499 High >500 Very High
Serum HDL Cholesterol (Immunoenzymatic AU 480)	50	mg/dL	<40 Major risk factor for CHD >60 Negative risk factor for CHD
Serum VLDL cholesterol (Calculated)	22	mg/dL	7-35
Serum LDL cholesterol (Calculated)	47	mg/dL	50-100
Serum Cholesterol-HDL Ratio (Calculated)	2.38		3-5
Serum LDL-HDL Ratio (Calculated)	0.94		1.5 - 3.5

The highlighted values should be correlated clinically





NAME	: MRS. POONAM DEVI	Requisition Date	: 12/Aug/2023 09:28AM
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Test Description	Observed Value	Unit	Reference Range

CLINICAL PATHOLOGY

COMPLETE URINE EXAMINATION

Physical Examination

Urine Volume	30.00	mL	
Urine Colour	Yellow		Light Yellow
Urine Appearance	Hazy		Clear

Chemical Examination (Reflectance Photometry)

Urine pH	6.00	4.8-7.6
Urine Specific Gravity	1.025	1.010-1.030
Urine Glucose	Absent	Absent
Urine Protein (Protein Immobilization)	Absent	NIL
Urine Ketones	Absent	Absent
Urine Bilirubin	Absent	Absent
Urine for Urobilinogen	Absent	
Urine Nitrite	Absent	Absent

Microscopic Examination

Urine Pus Cells	2-3	0-5	
Urine RBC	12-15	/hpf	Absent
Urine Epithelial Cells	0-1	/hpf	0-5
Urine Casts	Absent	/lpf	Absent
Urine Crystals	Absent	/hpf	Absent
Urine Bacteria	Absent	/hpf	Absent
Urine Yeast Cells	Absent	/hpf	Absent
Amorphous Deposit	Absent		Absent

HAEMATOLOGY

ESR

Primary Sample Type: EDTA Blood

ESR
(Automated ESR analyser)

12 mm/h 0-15



The highlighted values should be correlated clinically



NAME	: MRS. POONAM DEVI	Requisition Date	: 12/Aug/2023 09:28AM
DOB/Gender	: 20-Jan-1996/F	Sample Coll Date	: 12/Aug/2023 09:34AM
UHID	: 381776	Sample Rec. Date	: 12/Aug/2023 09:35AM
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Panel Name	: Ivy Mohali	Referred Doctor	: Self
Bar Code No	: 12924566		

Test Description	Observed Value	Unit	Reference Range
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COMPLETE BLOOD COUNT (Sample Type- Whole Blood EDTA)

Haemoglobin (Noncyanmethaemoglobin)	10.5	g/dl	12.0 - 15.0
Hematocrit(PCV) (Calculated)	34.1	%	33-45
Red Blood Cell (RBC) (Impedance/DC Detection)	3.60	10 ⁶ / µl	3.8-4.8
Mean Corp Volume (MCV) (Impedance/DC Detection)	96.1	fL	83-97
Mean Corp HB (MCH) (Calculated)	29.6	pg/mL	27-31
Mean Corp HB Cone (MCHC) (Calculated)	30.8	gm/dl	32-36
Red Cell Distribution Width -CV (Calculated)	14.4	%	11-15
Platelet Count (Impedence DC Detection/Microscopy)	143	10 ³ /µl	150-450
Mean Platelet Volume (MPV) (Impedence/DC Detection)	14.2	fL	7.5-10.3
Total Leucocyte Count (TLC) (Impedence/DC Detection)	5.5	10 ³ /µl	4.0 - 10.0

Differential Leucocyte Count (VCS/ Microscopy)

Neutrophils	46	%	40-75
Lymphocytes	42	%	20-40
Monocytes	10	%	0-8
Eosinophils	2	%	0-4
Basophils	0	%	0-1
Absolute Neutrophil Count (VCS/Microscopy)	2,530	µl	2000-7000
Absolute Lymphocyte Count	2,310	uL	1000-3000
Absolute Monocyte Count	550	uL	200-1000
Absolute Eosinophil Count (VCS/Microscopy)	110	µl	20-500

The highlighted values should be correlated clinically





MC-5870



POLO LABS PVT LTD

Polo Labs, F-317, Industrial Area,

Phase 8B, Mohali, Punjab

Ph: 1800-123-0094, 9888814844

Email: care@pololabs.in

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DOB/Gender	: 20-Jan-1996/F	Sample Coll Date	: 12/Aug/2023 09:34AM
UHID	: 381776	Sample Rec. Date	: 12/Aug/2023 12:04PM
Inv. No.	: 3597958	Approved Date	: 12/Aug/2023 12:59PM
Panel Name	: Ivy Mohali	Referred Doctor	: Self
Bar Code No	: 12924566		

Test Description	Observed Value	Unit	Reference Range

HAEAMATOLOGY

Glycosylated HB (HbA1c)

Whole Blood HbA1c (Boronate Affinity HPLC/Trinity)	4.8	%	Non diabetic:4.0-6.0 Target of therapy:<7.0 Change of therapy:>8.0
Estimated Average Glucose (eAG) (Calculated)	91	mg/dL	

ADA criteria for correlation between HbA1c & Mean plasma glucose levels:
(Last three month's average).

HbA1c (%)	Mean Plasma Glucose (mg / dl)
6	126
7	154
8	183
9	212
10	240
11	269
12	298




DR JASLEEN KAUR
M.D. PATHOLOGY



Polo Labs



NAME	: MRS. POONAM DEVI	Requisition Date	: 12/Aug/2023 09:28AM
DOB/Gender	: 20-Jan-1996/F	SampleCollDate	: 12/Aug/2023 09:34AM
UHID	: 381776	Sample Rec.Date	: 12/Aug/2023 10:17AM
Inv. No.	: 3597958	Approved Date	: 12/Aug/2023 11:22AM
Panel Name	: Ivy Mohali	Referred Doctor	: Self
Bar Code No	: 12924566		

Test Description	Observed Value	Unit	Reference Range

HAEMATOLOGY

BLOOD GROUP RH TYPE

ABO & RH Typing

Forward Grouping

Anti A	Negative
Anti B	Negative
Anti AB	Negative
Anti D	POSITIVE
Reverse Grouping A Cells	POSITIVE
Reverse Grouping B Cells	POSITIVE
Reverse Grouping O Cells	Negative
Final Blood Group	O POSITIVE

NOTE :

- * Apart from major A,B,H antigens which are used for ABO grouping and Rh typing, many minor blood group antigens exist. Agglutination may also vary according to titre of antigen and antibody.
- * So before transfusion, reconfirmation of blood group as well as cross-matching is needed.
- * Presence of maternal antibodies in newborns, may interfere with blood grouping.
- * Auto agglutination (due to cold antibody, falciparum malaria, sepsis, internal malignancy etc.) may also cause erroneous result.

*** End Of Report ***



DR ANAND KALIA
M.D. PATHOLOGY

EXERCISE STRESS TEST REPORT

Patient Name: MRS POONAM DEVI,
Patient ID: 381776
Height: 150 cm
Weight: 52 kg

DOB: 20.04.1996
Age: 27yrs
Gender: Female
Race: Indian

Study Date: 12.08.2023
Test Type: --
Protocol: BRUCE

Referring Physician: --
Attending Physician: --
Technician: --

Medications:
--

Medical History:
--

Reason for Exercise Test:
--

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:20	0.00	0.00	100	130/80	
	STANDING	00:02	0.00	0.00	100		
	HYPERV.	00:02	0.00	0.00	100	130/80	
	WARM-UP	00:55	1.60	0.00	108	130/80	
EXERCISE	STAGE 1	03:00	2.70	10.00	127	130/80	
	STAGE 2	03:00	4.00	12.00	155		
	STAGE 3	00:04	5.40	13.80	157		
	STAGE 4	00:18	0.00	14.00	155		
MANUAL RECOVERY		03:43	0.00	0.00	107	140/80	

The patient exercised according to the BRUCE for 6:20 mins, achieving a work level of Max. METS: 7.00. The resting heart rate of 104 bpm rose to a maximal heart rate of 181 bpm. This value represents 93 % of the maximal, age-predicted heart rate. The resting blood pressure of 130/80 mmHg, rose to a maximum blood pressure of 140/80 mmHg. The exercise test was stopped due to Syncope.

Interpretation

Summary: Resting ECG: normal. Functional Capacity: markedly decreased (by >40%). HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall impression: Inconclusive, submaximal stress test.

Conclusions

TMT INCONCLUSIVE FOR INDUCIBLE ISCHEMIA.

Dr. Rakesh Bhulungru
Physician Director- Non Invasive Cardiology
MBBS, MD (Medicine), DM (Cardiology) Technician
UHIC - 42528

Tabular Summary

IVY HOSPITAL

RS POONAM DEVI,

Patient ID: 381776

08.2023 Female 150 cm 52 kg

158:02pm 27yrs Indian

Meds:

Test Reason:

Medical History:

Ref. MD: Ordering MD:

Technician: Test Type:

Comment:



BRUCE Total Exercise Time 06:20

Max HR: 181 bpm 93% of max predicted 193 bpm

Max BP: 140/80 Maximum Workload: 7.00 METS

Max ST Level -0.80 mm in III; EXERCISE STAGE 1:2:59

Reasons for Termination: Syncope**Summary:** Resting ECG: normal. Functional Capacity: markedly decreased (by >40%). HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall impression: Inconclusive, submaximal stress test.**Conclusion:** TMT INCONCLUSIVE FOR INDUCIBLE ISCHEMIA.

Location Number: * 0 *

Phase	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (*100)	VE (/min)	ST Level III(mm)	Comment
RETEST	SUPINE	00:20	0.00	0.00	1.0	100	130/80	130	0	-0.45	
	STANDING	00:02	0.00	0.00	1.0	100			0	-0.45	
	HYPERV.	00:02	0.00	0.00	1.0	100	130/80	130	0	-0.45	
	WARM-UP	00:55	1.60	0.00	1.3	108	130/80	140	0	-0.60	
EXERCISE	STAGE 1	03:00	2.70	10.00	4.6	127	130/80	165	0	-0.75	
	STAGE 2	03:00	4.00	12.00	7.0	155			0	0.05	
	STAGE 3	00:04	5.40	13.80	7.0	157			0	-0.10	
MANUAL RECOVERY	STAGE 4	00:18	0.00	14.00	6.2	155			0	-0.35	
		03:43	0.00	0.00	1.0	107	140/80	149	0	-0.20	

CASE V6.51 (0)

Unconfirmed

Attending MD:

Page 1

Selected Medians Report

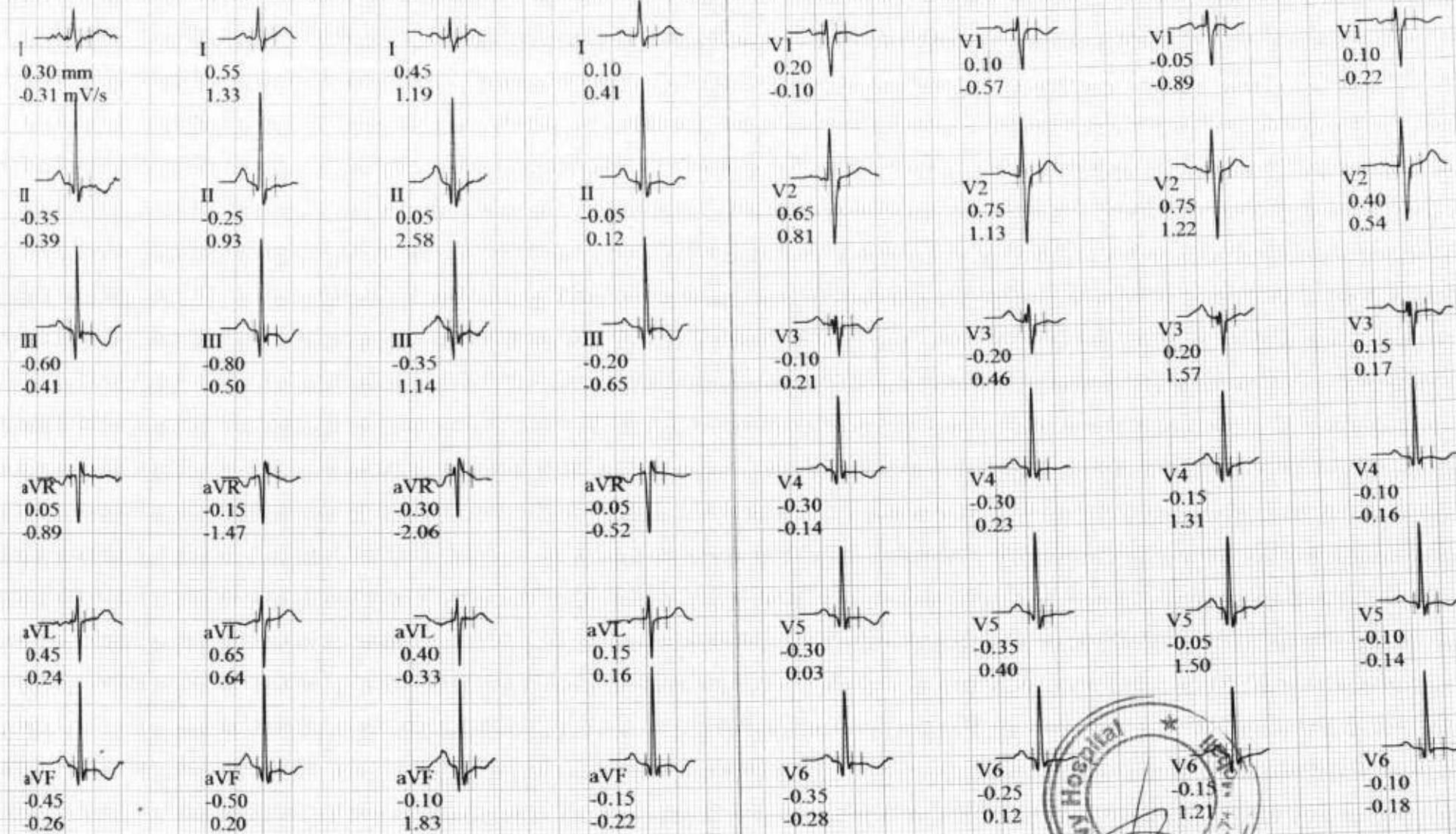
IVY HOSPITAL

MRS POONAM DEVI,

Patient ID: 381776

12.08.2023

12:58:02pm

BASELINE
EXERCISE0:00
108 bpmMAX. ST
EXERCISE
2:59
129 bpm
130/80 mmHgPEAK EXERCISE
MANUAL
6:21
155 bpmTEST END
RECOVERY
3:39
109 bpm
140/80 mmHgBASELINE
EXERCISE
0:00
108 bpmMAX. ST
EXERCISE
2:59
129 bpm
130/80 mmHgPEAK EXERCISE
MANUAL
6:21
155 bpmTEST END
RECOVERY
3:39
109 bpm
140/80 mmHg

ECG Strips

MRS POONAM DEVI,
Patient ID 381776
12.08.2023
1:02:08pm

127 bpm
130/80 mmHg

EXERCISE
STAGE 1
2.50

BRUCE
2.7 km/h
10.0 %



GE CASE V6.51 (0)
25mm/s 10mm/mV 60Hz 0.01-20Hz S+ HR(V2,V4)

Unconfirmed

Attending MD:



MRS POONAM DEVI,
Patient ID 381776
12.08.2023
1:05:08pm

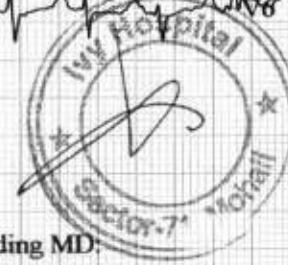
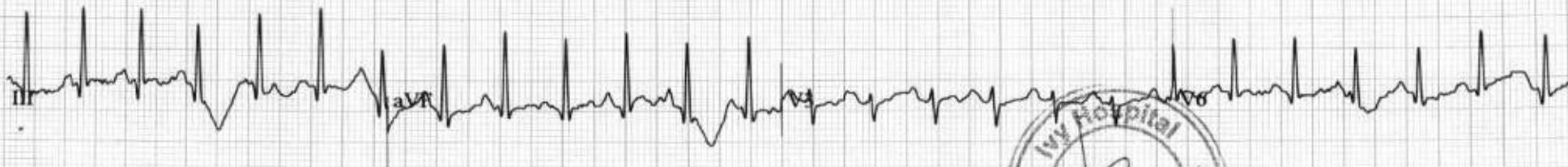
ECG Strips

IVY HOSPITAL

155 bpm

EXERCISE
STAGE 2
5:50

BRUCE
4.0 km/h
12.0 %



Attending MD:

GE CASE V6.51 (0)
25mm/s 10mm/mV 60Hz 0.01-20Hz S+ HR(V2,V4)

Unconfirmed

Page 5

MRS POONAM DEVI,
Patient ID 381776
12.08.2023
1:05:39pm

ECG Strips

IVY HOSPITAL

155 bpm

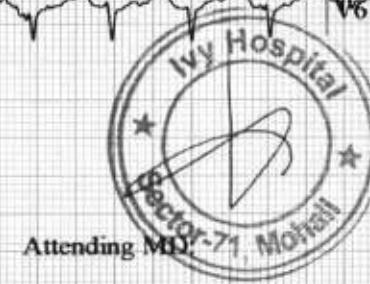
MANUAL
STAGE 4
6:21

BRUCE
0.0 km/h
14.0 %



GE CASE V6.51 (0)
25mm/s 10mm/mV 60Hz 0.01-20Hz S+ HR(V2,V4)

Unconfirmed



Attending MD:

Page 6

MRS POONAM DEVI,
Patient ID 381776
12.08.2023
1:06:28pm

ECG Strips

IVY HOSPITAL

126 bpm
140/80 mmHg

RECOVERY
0:50

BRUCE
0.0 km/h
0.0 %

)



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Attending MD:

GE CASE V6.51 (0)
25mm/s 10mm/mV 60Hz 0.01-20Hz S+ HR(V2,V4)

Unconfirmed

Page 7

MRS POONAM DEVI,
Patient ID 381776
12.08.2023
1:07:28pm

ECG Strips

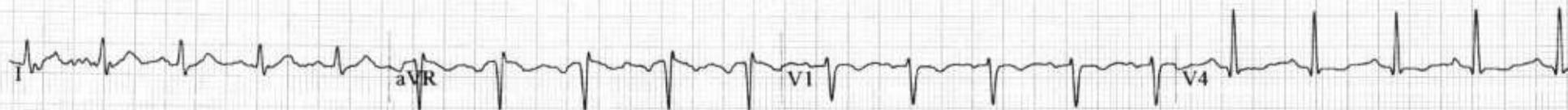
IVY HOSPITAL

117 bpm
140/80 mmHg

RECOVERY
1:50

BRUCE
0.0 km/h
0.0 %

)



[]



GE CASE V6.51 (0)
25mm/s 10mm/mV 60Hz 0.01-20Hz S+ HR(II,V2)

Unconfirmed

Attending MD:

Page 8

MRS POONAM DEVI,
Patient ID: 381776
12.08.2023
1:08:28pm

ECG Strips

116 bpm
140/80 mmHg

RECOVERY
2:50

BRUCE
0.0 km/h
0.0 %

)



AVR



V1



AVF



Attending MD:

GE CASE V6.51 (0)
25mm/s 10mm/mV 60Hz 0.01-20Hz S+ HR(II,V2)

Unconfirmed

Page 9

ECG Strips

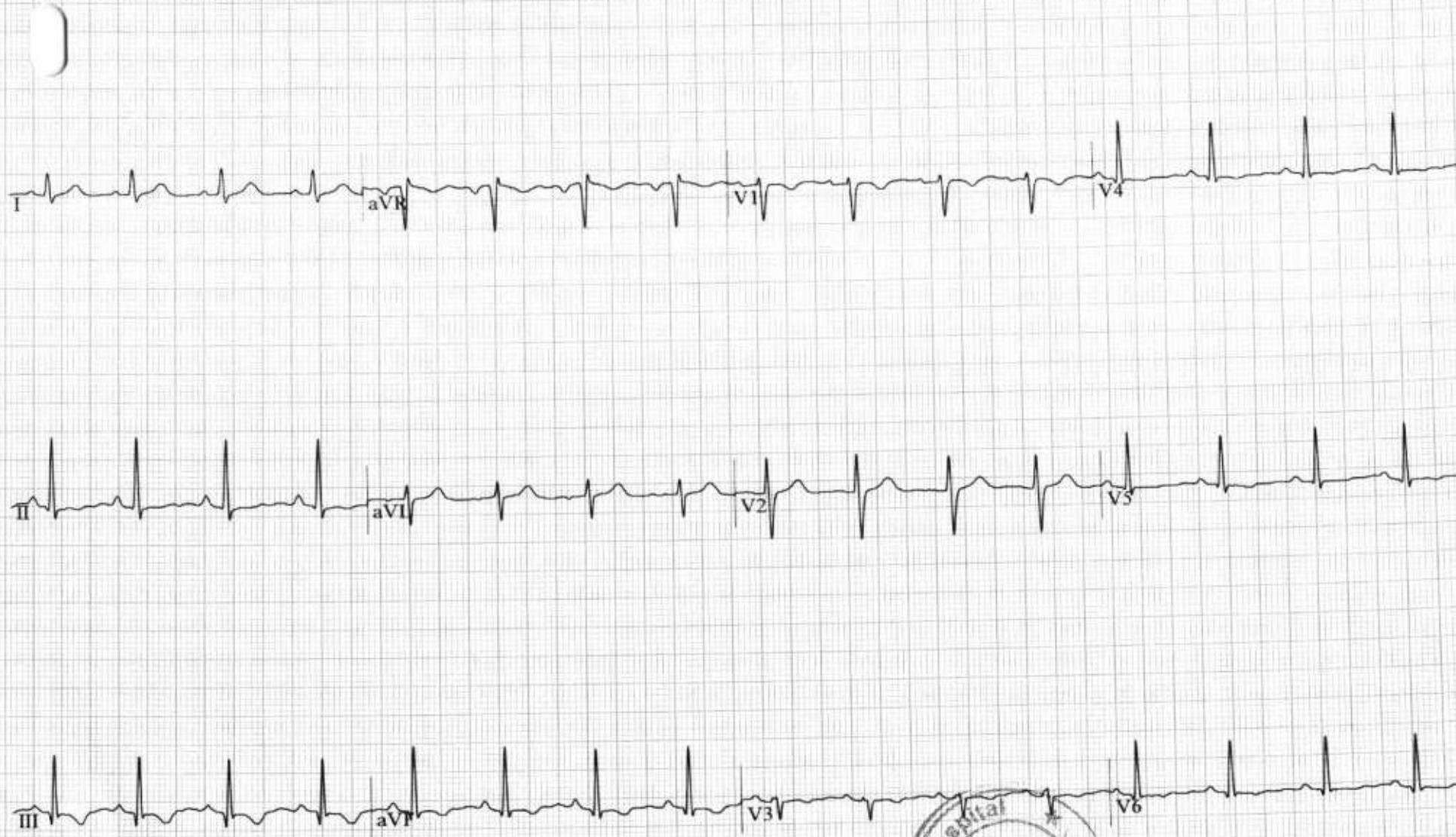
IVY HOSPITAL

MRS POONAM DEVI,
Patient ID 381776
12.08.2023
12:58:21pm

101 bpm
130/80 mmHg

PRETEST
SUPINE
0:19

BRUCE
0.0 km/h
0.0 %



Attending MD:

GE CASE V6.51 (0)
25mm/s 10mm/mV 60Hz 0.01-20Hz S+ HR(V2,V4)

Unconfirmed

Page 3