

Apollo Hospitals International Ltd., Plot 1A, Bhat GIDC Estate, Gandhinagar-382428 Phone : (079) 66701800 Dr. Jagrili Sirha
Dr. Jagrili Sirha
Wis Josenhaltur. Grabial
Wish Jananahaltur. Grabial
Simanahaltur. Grabial

Remark (if any):

Near

AHMROP0016V1

Signature Date & Time



Promoting Health. Delivering Happiness.

Mr. BRIJESH KUMAR (39 /M)

UHID

AHIL.0000799032

AHC No

AHILAH163669

Date

12/09/2022

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE



Dear Mr. BRIJESH KUMAR

Thank you for choosing Apollo ProHealth, India's first personalized, predictive health screening program with health risk assessments curated just for you to guide targeted intervention, continuum of care and a path to wellness. Our holistic care continuum integrates clinical expertise and artificial intelligence to gauge and avert the risk, onset and progression of non-communicable diseases (NCDs).

In this personalized health report, you will find your

- Medical History and Physical examination results
- Investigations Results
- Artificial Intelligence powered risk scores
- Physician's Impressions on your Health
- Path to Wellness: A personalized management protocol, including follow-up assessments
- Vaccination counselling advice

Apollo ProHealth encompasses the following processes:

Personalized Health Risk Assessment (pHRA): Based on your online risk assessment, medical history, physical examination, and psychological evaluation, we recommended a health screening assessment for you, including diagnostic and imaging tests. Based on the results of these assessments, we have advised additional follow-up tests and consultations - details of which we have included in your report. Your physician will explain their relevance, and we strongly suggest you comply with the recommendations.

Health Mentor: We have assigned a dedicated health mentor to proactively work with you towards your health goals and ensure that you regularly adhere to the guidance and recommendations from clinical and nutrition consultants. Your health mentor will call you periodically to track your progress and support you with any queries that you may have or advice you need.

ProHealth App: You will get access to the Apollo ProHealth App, which will facilitate easy navigation of personal health records, progress towards your health goals, appointment booking, customized tips and guidance for health and lifestyle management, and regularly connecting with your Health Mentor through the in-app chat. Until you return for your 2nd-year assessment, you will receive periodic updates and reminders to motivate you to keep up the momentum regarding health goal milestones.

Follow- Up Consultation:

For any follow-up consultations, you can visit your ProHealth physician in-person at the center or you can book a virtual consultation through https://www.apollo247.com/specialties or through the Apollo 247 app on your phone.

Scan the QR code to download the Apollo 247 App

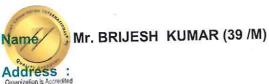


You can also download the Apollo 247 app on

ANDROID IOS

Disclaimer: The services offered in the program may vary as per the respective agreements made in the program or center or agreed mutual consent.

Note: You are entitled to one complimentary follow-up consultation with your ProHealth physician within a period of 1 year. Please contact your health mentor for the complimentary consult coupon code. This is available for ProHealth Super, Regal and Covid Recovery and Wellness programs



Examined by : Dr. SHASHIKANT NIGAM

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

Date



UHID

: AHIL.0000799032

AHC No : AHILAH163669



Chief Complaints

For Annual health checkup Alternating bowel habits, Incomplete evacuation of bowels Knee pain,LEFT- 2 MONTHS

Present Known illness

No history of : - Diabetes mellitus, Hypertension, Dyslipidemia, Thyroid disorder, Heart disease



Drug Allergy

NO KNOWN ALLERGY

:12/09/2022



Systemic Review

Cardiovascular system

- Nil Significant

Respiratory system

- Nil Significant

Oral and dental

- Nil Significant

Gastrointestinal system

- Nil Significant

Genitourinary system

- Nil Significant

Gynaec history

- Nil Significant

Central nervous system

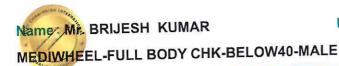
- Nil Significant

Eyes

- Nil Significant

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Date : 12/09/2022 AHC No : AHILAH163669

Organization is Accredited by Joint Commission international

Nil Significant

Musculoskeletal system

Spine and joints

- Nil Significant

Skin

Nil Significant

General symptoms

- Nil Significant

=0

Past medical history

Do you have any

- No

allergies?

Allergies

- Nil

Past medical history

- nil significant

Covid 19

- Yes

- 2021

Post detection (3

- No

Weeks)

Hospitalization for

- No

Covid 19

B

Surgical history

Surgical history

- Nil



Personal history

Ethnicity

Indian Asian

Marital status

Married

No. of children

- 2

Female

- 1

Male

1

Profession

- corporate employed

Diet

Vegetarian

Alcohol

- does not consume alcohol

Smoking

- No

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Date : 12/09/2022 AHC No : AHLLAH163669

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

Organization American Strategic Company Compan

- No

Physical activity

- Sedentary



Family history

Father

alive

Mother

has expired

Brothers

- 3

Sisters

- 5

Hypertension

- father, sisters, brother

Coronary artery

- none

disease

Cancer

- mother

Type

- Not Known

Physical Examination



General

General appearance

- normal

Build

- normal

Height

- 176

Weight

- 74

BMI

- 23.89

Pallor

- No

Oedema

- no

CA

Cardiovascular system

Heart rate (Per minute)

- 82

Rhythm

- Regular

Systolic(mm of Hg)

- 167

Diastolic(mm of Hg)

- 110

2010110(11111-1-1-5)

- B.P. Sitting

Heart sounds

- S1S2+

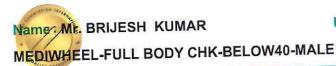
Respiratory system

Breath sounds

- Normal vesicular breath sounds

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AHC No : AH

Organization is Accordited by Joint Commission International Abdomen

Organomegaly

- No

UHID : AHIL.0000799032

Tenderness

- No

Printed By: MUKTA S ADALTI

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Date : 12/09/2022

AHC No : AHIL AH163669

HOSPITALS

Crganization is Accredited by Joint Commission Office ROUTINE

Stool test involves the collection and analysis of fecal matter to diagnose the presence or absence of a medical condition. One of the most common stool tests, the fecal occult blood test can be used to diagnose many conditions that cause bleeding in the gastrointestinal system including colorectal cancer or stomach cancer. Parasitic diseases like worm can be diagnosed by examining stools under a microscope for the presence of worm larvae or eggs. Some bacterial diseases can be detected with a stool culture. Viruses such as rotavirus can also be found in stools.

UHID : AHIL.0000799032

Stool Culture. Viracos cost. de				
Test Name	Result	Unit	Level	Range
Colour:	Brown			
Consistency:	Semi Solid			
Mucus:	Absent			
Blood:	Negative			
Reaction	Acidic			
Occult Blood	Negative			
Reducing Substances	(<u>11</u>)			
Pus:	Occasional			2-3
RBC	Nil	/hpf		0-5/hpf
Epithelial Cells	Nil			
Yeast Cells	Nil			
Vegetable Matter	Present			
Neutral Fat	Absent			
Starch Granules	Absent			
Trophozoite	Absent			
Ova:	Absent			
Cysts:	Absent			

URINE FOR ROUTINE EXAMINATION

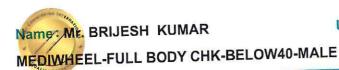
Urinalysis, is the physical, chemical and microscopic examination of the urine and is one of the most common methods of medical diagnosis. It is used to detect markers of diabetes, kidney disease, infection etc.

Test Name	Result	Unit	Level	Range
Volume	25	mL		
Specific Gravity	1.005			
Colour:	Pale-Yellow			
Transparency:	Clear			
рН	7			<u>\$</u> .
Within Normal Range	Borderline H	ligh/Low	Out	of Range

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Date AHC No : AH

Organization is Accredited by Joint Commproductional

Nil

Sugar:

Nil

Blood:

Negative

Ketone

Absent

Bile Pigments:

Absent

Urobilinogen

Nil

E.U./dL

Nitrite

Negative

Pus Cells

Occassional

0-5

RBC

Nil

/hpf

0-5/hpf

Epithelial Cells

1-2 /h.p.f Absent

Casts: Crystals:

Absent

COMPLETE BLOOD COUNT WITH ESR

Test Name	Result	Unit	Level	Range
Hemoglobin (Photometric Measurement)	14.2	gm%		13.0-17.0
Packed cell volume(Calculated)	42.4	%		40-50
RBC COUNT (Impedance)	5.21	Million/ul		4.5-5.9
MCV (From RBC Histogram)	81.4	fl		80-100
MCH(Calculated)	27.27	pg		27-32
MCHC(Calculated)	33.5	%		31-36
RDW(Calculated)	13.6	%		11.5-14.5
WBC Count (Impedance)	6087	/cu mm		4000-11000
Neutrophils	64	%		40-75
Lymphocytes	27	%		20-40
Monocytes	7	%		2-10
Eosinophils	2	%	•	01-06
Basophils	0	%		0-1
Platelet Count (Impedance)	167300	/cu mm		150000-450000
MPV (Calculated)	9.2	fl		7-11
ERYTHROCYTE SEDIMENTATION RATE (ESR) (Automated/ optic-electronic)	05	mm/1st hr	•	0-15

Within Normal Range



Borderline High/Low



Out of Range





Date : 12/09/2022 AHC No : AHIL AH16366

Organization is Accredited by Joint Committee PRINE Bal GLUCOSE (FASTING)

Test Name Result Unit Level Range

Urine Glucose (Post Prandial) Nil

URINE GLUCOSE(POST PRANDIAL)

Test Name Result Unit Level Range

Urine Glucose (Post Prandial) Nil

BLOOD GROUPING AND TYPING (ABO and Rh)

Test Name Result Unit Level Range

BLOOD GROUP: B Positive

LFT (LIVER FUNCTION TEST)

Liver function tests(LFT), are groups of clinical biochemistry blood assays that give information about the state of a patient's liver. These tests can be used to detect the presence of liver disease, distinguish among different types of liver disorders, gauge the extent of known liver damage, and follow the response to treatment.

UHID : AHIL.0000799032

Test Name	Result	Unit	Level	Range
ALT(SGPT) - SERUM / PLASMA	19	U/L	•	0-50
ALKALINE PHOSPHATASE - SERUM/PLASMA	109	U/L	•	Adult(Male): 40 - 129
AST (SGOT) - SERUM	17	U/L		> 1 year Male : <40
Total Bilirubin	0.517	mg/dL		0.300-1.200
Direct Bilirubin	0.187	mg/dL		Upto 0.3 mg/dl
Indirect Bilirubin	0.33	mg/dL	•	1 Day ≤5.1 mg/dL 2 Days ≤7.2 mg/dL 3-5 Days ≤10.3 mg/dL 6-7 Days ≤8.4 mg/dL 8-9 Days ≤6.5 mg/dL 10-11 Days ≤4.6 mg/dL 12-13 Days ≤2.7 mg/dL 14 Days - 9 Years 0.2-0.8 mg/dL 10-19 Years 0.2-1.1 mg/dL ≥20 Years 0.2-1.2 mg/dL

CREATININE - SERUM / PLASMA

Test Name Result Unit Level Range

Within Normal Range
Borderline High/Low
Out of Range

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Regd. Office

19. Bishop Gardens, R.A. Puram, Chennai - 600 028

CIN No.: U85110TN1997PLC039016 | GSTin: 24AABCA4150H2Z5

For online appointment: www.askapollo.com



Date

AHC No: AH

Organization is Accredited by Joint CommoREATININE - SERUM / PLASMA

0.79

mg/dL

Adult Male: 0.6 - 1.3

LFT (LIVER FUNCTION TEST)

Liver function tests(LFT), are groups of clinical biochemistry blood assays that give information about the state of a patient's liver. These tests can be used to detect the presence of liver disease, distinguish among different types of liver disorders, gauge the extent of known liver damage, and follow the response to treatment.

Test Name	Result	Unit	Level	Range
GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE - SERUM	14	U/L	•	Male : 10 - 71 Female : 6 - 42

GLUCOSE - SERUM / PLASMA (FASTING)

Test Name	Result	Unit	Level	Range
Glucose - Plasma (Fasting)	98	mg/dL	•	70 - 100 : Normal 100 - 125 : Impaired Glucose Tolerance >= 126 : Diabetes Mellitus

GLUCOSE - SERUM / PLASMA (POST PRANDIAL) - PPBS

Test Name	Result	Unit	Level	Range
Glucose - Plasma (Post Prandial)	109	mg/dL		70-140

GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD

GLYCOSYLATED HEMOGLOBIN (HBA1C) - WHOLE BLOOD						
Test Name	Result	Unit	Level	Range		
Glycosylated Hemoglobin (HbA1c)	5.0	%		Normal < 5.7		
				%Increased risk for Diabetes 5.7 - 6.4%		
				Diabetes >= 6.5%		
				Monitoring criteria for Diabetes Mellitus <7.0 : Well Controlled Diabetes 7.1 – 8.0 : Unsatisfactory Control		

7.1 - 8.0 : Unsatisfactory Control > 8.0 : Poor Control & Needs Immediate Treatment

Estimated Average Glucose.

96.80

LFT (LIVER FUNCTION TEST)

Liver function tests(LFT), are groups of clinical biochemistry blood assays that give information about the state of a patient's liver. These tests can be used to detect the presence of liver disease, distinguish among different types of liver disorders, gauge the extent of known liver damage, and follow the response to treatment.

Test Name	Result	Unit	Level	Range
PROTEIN TOTAL - SERUM / PLASMA	7.66	g/dL		6.00-8.00
Within Normal Range	Borderline	e High/Low	Out	of Range

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AHC No : A

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE

MEDIWHEEL-FULL BODY CHK-BELOW40-MALE				H		
Organization is Accredited by Joint Commission of TOTAL - SERUM / PLASMA	7.66	g/dL		6.00-8.00		
ALBUMIN - SERUM	5.00	g/dL		Adult(18 - 60 Yr): 3.5 - 5.2		
ALBUMIN - SERUM	5.00	g/dL		Adult(18 - 60 Yr): 3.5 - 5.2		
Globulin-Serum/Plasma	2.66			2.20-4.20		
Globulin-Serum/Plasma	2.66			2.20-4.20		
A/G ratio	1.88			1.00-2.00		
A/G ratio	1.88			1.00-2.00		
THYROID PROFILE (T3,T4 AND T	SH)					
Test Name	Result	Unit	Level	Range		
TOTAL T3: TRI IODOTHYRONINE -	1.9	nmol/L	•	Adults(20-120 Yrs): 1.2 - 3.1 Pregnant Female :		

SERUM			First Trimester: 1.61 - 3.53 Second Trimester: 1.98 - 4.02 Third Trimester: 2.07 - 4.02
TOTAL T4: THYROXINE - SERUM	96	nmol/L	Adults(20-100 Yrs):66 - 181 Pregnant Female : First Trimester : 94.3 - 190 Second Trimester : 102 - 207

Second Trimester: 102 - 207 Third Trimester: 89 - 202 14-120 years: 0.27 - 4.20 μIU/mL 1.17

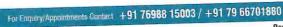
TSH: THYROID STIMULATING HORMONE - SERUM

URIC ACID - SERUM

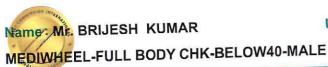
Uric acid is a product of the metabolic breakdown of purine. High blood concentrations of uric acid can lead to gout. It is also associated with other medical conditions including diabetes and the formation of kidney stones.

Test Name	Result	Unit	Level	Range
URIC ACID - SERUM	4.9	mg/dL	•	Male: 3.4-7.0 Female: 2.4-5.7
BUN (BLOOD UREA NITROGEN)				
Test Name	Result	Unit	Level	Range
BUN (BLOOD UREA NITROGEN)	7	mg/dL		6-20
UREA - SERUM / PLASMA	15	mg/dL		15 - 50
LIPID PROFILE - SERUM				
Test Name	Result	Unit	Level	Range
Within Normal Range	Borderline	e High/Low	Ou	t of Range

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AHC No : AH

M	EDIWAFEL-FULL BODY CHK-BELOWA	· · · · · · · · · · · · · · · · · · ·			HOSPITALS
Org by Join	anization is Accredited Committee tale Cholesterol	164	mg/dl		0 - 200 : Desirable 200 - 240 : Borderline High 240 - 280 : High > 280 : Very High
	Triglycerides - Serum	75	mg/dL		0-150
	HDL CHOLESTEROL - SERUM / PLASMA (Direct Enzymatic Colorimetric)	46 *	mg/dL		< 40 : Major risk factor for heart disease 40 - 59 : The higher The better. >=60 : Considered protective against heart disease
	LDL Cholesterol (Direct LDL)	106	mg/dL	•	100 : Optimal 100-129 : Near Optimal 130-159 : Borderline High 160-189 : High >=190 : Very High
\sim	VLDL CHOLESTEROL	15			< 40 mg/dl
ı	C/H RATIO	4			0-4.5

X-RAY CHEST PA

X-ray imaging creates pictures of the inside of your body. Chest X-ray can reveal abnormalities in the lungs, the heart, and bones that sometimes cannot be detected by examination.

NORMAL STUDY.

CARDIOLOGY

ECHO/TMT

ECG

Within Normal Range

Borderline High/Low

Out of Range





AHC No:

Organization is Accredited by Joint Commission Internalizative Summary



.BODY WEIGHT 74 KG, DEAL BODY WEIGHT 58-71 KG

BP-167/110

.ECG - NORMAL SINUS RHYTHM

,WORKLOAD 8.4 METS .TMT — TEST IS NEGATIVE, EXERCISE TIME 6:57

.USG ABDOMEN - NORMAL

.CHEST X-RAY - NORMAL

.VISION - NORMAL

Wellness Prescription

Advice On Diet :-



BALANCED DIET

Advice On Physical Activity :-



REGULAR 30 MINUTES WALK FOR HEALTH AND 60 MONITES FOR WEIGHT REDUCTION PRACTICE YOGA AND MEDITATION MAINTAIN WEIGHT BETWEEN 58-71 KG

Follow-up and Review Plan



PERIODIC BP MONITORING

Consell fait

Printed By: MUKTA S ADALTI

Dr.SHASHIKANT NIGAM

AHC Physician / Consultant Internal Medicine

in AskApollo App to book your follow-up appointments and

investigations

Note :- The Health Check-up examinations and routine investigations have certain limitations and may not be able to detect all the diseases. Any new or persisting symptoms should be brought to the attention of the Consulting Physician. Additional tests, consultations and follow up may be required in some cases.

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Radiology

Mr. BRIJESH KUMAR | Male | 39Yr 7Mth 6Days Patient Details :

AHC **Patient Location:** AHIL.0000799032 TIHID

AHILAH163669 Patient Identifier: 12-SEP-2022 10:55 Completed on: 222046032

DR. SHASHIKANT NIGAM **Ref Doctor**

USG WHOLE ABDOMEN

FINDINGS:

DRN

Liver appears normal in size and shows uniform normal echotexture. No evidence of focal or diffuse pathology seen. Intra and extra hepatic biliary radicles are not dilated. Portal vein is normal in calibre. Intrahepatic portal radicles appear normal.

Gall bladder appears normal with no evidence of calculus. Wall thickness appears normal. No evidence of pericholecystic collection.

Head, body and tail of pancreas appear normal in size and echotexture. No focal lesions identified. Pancreatic duct appears normal in caliber.

Spleen measures 10.0 cms and shows uniform echotexture.

Both kidneys are normal in size and show normal echopattern with good corticomedullary differentiation. Cortical outlines appear smooth. No evidence of calculi. Pelvicalyceal system on both sides appear normal.

No evidence of ascites or lymphadenopathy.

Urinary bladder is normal in contour and outline. Wall thickness appears normal. No evidence of any intraluminal pathology seen.

Prostate (volume 21 cc) and is normal in size and echopattern.

IMPRESSION:-

Normal study.

12-Sep-2022 16:18 Printed on:

153182 Printed By:

Reported By: 717876

Page 1 of 2









Mr. BRIJESH KUMAR

AHIL.0000799032

AHILAH163669

USG WHOLE ABDOMEN

--- END OF THE REPORT ----

A. A PATEL.

Dr. ALPESH A PATEL

DNB Resident

Printed on:

12-Sep-2022 16:18

Printed By: 153182

Reported By: 717876

Page 2 of 2

For Enquiry/Appointments Contact +91 76988 15003 / +91 79 66701880







DEPARTMENT OF RADIOLOGY AND IMAGING SCIENCES

Mr. BRIJESH KUMAR | Male | 39Yr 7Mth 6Days **Patient Details**

AHIL.0000799032 UHID

AHC Patient Location:

Patient Identifier:

AHILAH163669

DRN

122102217

Completed on:

12-SEP-2022 13:03

Ref Doctor

DR. SHASHIKANT NIGAM

X-RAY CHEST PA

FINDINGS:

Lung fields are clear.

Cardio thoracic ratio is normal.

Both costophrenic angles are clear.

Domes of diaphragm are well delineated.

Bony thorax shows no significant abnormality.

IMPRESSION

NORMAL STUDY.

END OF THE REPORT ----



DR. VAIBHAVI PATEL

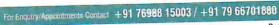
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12-Sep-2022 16:18

Printed By: 153182

Reported By: 717876

Page 1 of 1







OP1

AHIL.0000799032 MT BRIJESH KUMAR

ATION RECORDS

Name:

UHID:

39 Year(s) | Male

Distance Vision:

Right Eye - 6

Left Eye - /

Near Vision:

Left Eye:

Right Eye:

APLN.TN - Right Eye

Left Eye- 16

Both Eye - Colour Vision

Both Eye - Anterior Segment Examinations -

Both Eye Posterior Segment Examinations -

Doctor's Signature

Ophthalmologist Name

AHMROP028V1

——————————————————————————————————————					Unconfirmed 4x2.5x3_25_R1 1/1
	Technician Ordering Ph. Attending Ph.				50 Hz
Room C I Number Indication Medication 1 Medication 2					ADS 0 56-20 Hz
			\$\frac{\chi}{2}		A C
12 09:2022 10:14:53 4	Normal sinus rhythm Normal ECG:				
17 () A S Bhat Gandi	334 / 377 ms 334 / 377 ms 130 ms 114 ms 780 / 779 ms 69 / 63 / 47 degrees	AL AWR	av.		
Wr brijesh, Kumar ID 799032 Wale	QT/QTcBaz PR PP RR/PP P/QRS/T		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		

Dr. Joshul Walton





OUT PATIENT RECORD

Place Label Here

If label not available, write Pt,Name, UHID, Age, Sex

Name:

Nutritional History: Normal / bese / Thin / Cachectic Psychological History: Normal / Anxious / Depressed

Clinical Notes:

UHID:

Age & Sex:

Date: 12-9-23

Functional: Independent / Need Assistance / Dependent

Psychosocial: Nil / Smoking / Tobacco / Alcohol [Social / Excess]

Occupation: ____

Diagnosis/Provisional Diagnosis:

Allergies: ☐ No known allergies ☐ If Yes mention:

Patient's Management (Mention drug name, dose, frequency and specific instructions, if any):

Follow-up Advice/Plan:

opzee-M 2/wh. Episell.

Consultant Name & Signature

I Ke	2 _	Asian Male 74kg		Max BP: 160/90 Reason for Termination: THR ACHIEVED. Comments: TEST IS NEGATIVE FOR INDUCIBLE IS NORMAL HEYMODAYNAMIC RESPONSE NO ANGINA OCCURRED, NO ARRHYTHEMIAS AT PI	Maximum workload: THR ACHIEVED. SGATIVE FOR INDUCIBLI AMIC RESPONSE D, NO ARRHYTHEMIAS A	kload: 84METS CIBLE ISCHEMIA A TAS AT PROVOKED	8.4METS 100hz SCHEMIA AT MODERATE WORKLOAD PROVOKED
	hererred by: Dr.3A Test ind:	UKSAMEER DANI, MEC		GODERATE EFFORT T	OLERANCE.	VED	
BASELINE EXERCISE 0:00 85bpm BF: 1:30/80	MAX ST EXERCISE 6:51 162bpm	PEAK EXERCISE 6:57 163bpm 3P: 140/84	TEST END RECOVERY 3:23 103bpm	BASELINE EXERCISE 0:00 85bpm BP: 130/80	MAX ST EXERCISE 6:51 162bpm	PEAK EXERCISE 6:57 163bpm BP: 140'84	TEST END RECOVERY 3:23 103bpm
0.0	1 0 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	7 111	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	V1 C.2.2	V1 V	V (1.2.1)	V1 -0.2 -0.9
	10.7	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	910	V2 (V2 0.8 0.8	V2 V2 0.8 11.1	V2 0.7 0.4
1111 1.13 0.9	11.3 -11.3 -1.2	11.3 11.3 11.2	E.0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	X X3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7		V3 V3 L1.5	V3 V3 0.0 8:11
aVR -1.2 -1.5	aVR 0.0 t	aVR 0.0 -2.1	aVR -0.5	V4 19 1.0	V4 -0.3 1.5	V4 -6.4 I	V4 V4 V1
aVI. 0.4	aVL 1.0 -0.4	aVL 0.5 -0.7	aVI. 000 1	2V 3:1.0	V55 10.2	- V ₅ - V ₁ - V ₂ - V ₁ - V ₂ - V ₁ - V ₂ -	V5 V5 0.6 1.2
ave 1.1	aVF -0.7	aVF 0.7 2.1	avF 0.55	V6 1.3 0.8	V6 0.2 11.4	Ne Ne 11:3	V66 0.9