**Name** : **Mrs. UMADEVI K**

**PID No.** : MED121472330

**SID No.** : 522228425

**Age / Sex** : 48 Year(s) / Female

**Type** : OP

**Ref. Dr** : **MediWheel**

**Register On** : 12/11/2022 9:55 AM

**Collection On** : 12/11/2022 10:02 AM

**Report On** : 12/11/2022 4:37 PM

**Printed On** : 14/11/2022 4:05 PM

| Investigation | Observed Value | Unit | Biological Reference Interval |
|---|---|---|---|
| **HAEMATOLOGY** | | | |
| ***Complete Blood Count With - ESR*** | | | |
| Haemoglobin (EDTA Blood/*Spectrophotometry)* | **11.43** | g/dL | 12.5 - 16.0 |
| Packed Cell Volume(PCV)/Haematocrit (EDTA Blood*)* | **35.1** | % | 37 - 47 |
| RBC Count (EDTA Blood*)* | **3.99** | mill/cu.mm | 4.2 - 5.4 |
| Mean Corpuscular Volume(MCV) (EDTA Blood*)* | 88.0 | fL | 78 - 100 |
| Mean Corpuscular Haemoglobin(MCH) (EDTA Blood*)* | 28.6 | pg | 27 - 32 |
| Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood*)* | 32.6 | g/dL | 32 - 36 |
| RDW-CV | 13.2 | % | 11.5 - 16.0 |
| RDW-SD | 40.66 | fL | 39 - 46 |
| Total Leukocyte Count (TC) (EDTA Blood*)* | 8012 | cells/cu.mm | 4000 - 11000 |
| Neutrophils (Blood*)* | **76.11** | % | 40 - 75 |
| Lymphocytes (Blood*)* | **17.03** | % | 20 - 45 |
| Eosinophils (Blood*)* | 1.58 | % | 01 - 06 |
| Monocytes (Blood*)* | 5.01 | % | 01 - 10 |

Dr Anusha.K.S

Sr.Consultant Pathologist

Reg No : 100674

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| | | |
|---|---|---|
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| Investigation | Observed Value | Unit | Biological Reference Interval |
|---|---|---|---|
| Basophils (Blood) | 0.28 | % | 00 - 02 |

**INTERPRETATION:** Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.

| Investigation | Observed Value | Unit | Biological Reference Interval |
|---|---|---|---|
| Absolute Neutrophil count (EDTA Blood) | 6.10 | 10^3 / µl | 1.5 - 6.6 |
| Absolute Lymphocyte Count (EDTA Blood) | 1.36 | 10^3 / µl | 1.5 - 3.5 |
| Absolute Eosinophil Count (AEC) (EDTA Blood) | 0.13 | 10^3 / µl | 0.04 - 0.44 |
| Absolute Monocyte Count (EDTA Blood) | 0.40 | 10^3 / µl | < 1.0 |
| Absolute Basophil count (EDTA Blood) | 0.02 | 10^3 / µl | < 0.2 |
| Platelet Count (EDTA Blood) | 243.0 | 10^3 / µl | 150 - 450 |
| MPV (Blood) | **6.55** | fL | 8.0 - 13.3 |
| PCT (*Automated Blood cell Counter*) | **0.16** | % | 0.18 - 0.28 |
| ESR (Erythrocyte Sedimentation Rate) (Citrated Blood) | 18 | mm/hr | < 20 |

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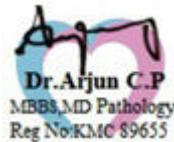| Investigation | Observed Value | Unit | Biological Reference Interval |
|---|---|---|---|
| **BIOCHEMISTRY** | | | |
| ***Liver Function Test*** | | | |
| Bilirubin(Total) (Serum/*DCA with ATCS*) | 0.56 | mg/dL | 0.1 - 1.2 |
| Bilirubin(Direct) (Serum/*Diazotized Sulfanilic Acid*) | 0.19 | mg/dL | 0.0 - 0.3 |
| Bilirubin(Indirect) (Serum/*Derived*) | 0.37 | mg/dL | 0.1 - 1.0 |
| SGOT/AST (Aspartate Aminotransferase) (Serum/*Modified IFCC*) | 11.13 | U/L | 5 - 40 |
| SGPT/ALT (Alanine Aminotransferase) (Serum/*Modified IFCC*) | 7.30 | U/L | 5 - 41 |
| GGT(Gamma Glutamyl Transpeptidase) (Serum/*IFCC / Kinetic*) | 12.25 | U/L | < 38 |
| Alkaline Phosphatase (SAP) (Serum/*Modified IFCC*) | 69.4 | U/L | 42 - 98 |
| Total Protein (Serum/*Biuret*) | 7.06 | gm/dl | 6.0 - 8.0 |
| Albumin (Serum/*Bromocresol green*) | 4.46 | gm/dl | 3.5 - 5.2 |
| Globulin (Serum/*Derived*) | 2.60 | gm/dL | 2.3 - 3.6 |
| A : G RATIO (Serum/*Derived*) | 1.72 | | 1.1 - 2.2 |

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Reg No:KMC 89655

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| | | |
|---|---|---|
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| Investigation | Observed Value | Unit | Biological Reference Interval |
|---|---|---|---|
| ***Lipid Profile*** | | | |
| Cholesterol Total <br> (Serum/*CHOD-PAP with ATCS*) | **223.40** | mg/dL | Optimal: < 200 <br> Borderline: 200 - 239 <br> High Risk: >= 240 |
| Triglycerides <br> (Serum/*GPO-PAP with ATCS*) | 116.51 | mg/dL | Optimal: < 150 <br> Borderline: 150 - 199 <br> High: 200 - 499 <br> Very High: >= 500 |

**INTERPRETATION:** The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the `usual` circulating level of triglycerides during most part of the day.

| Investigation | Observed Value | Unit | Biological Reference Interval |
|---|---|---|---|
| HDL Cholesterol <br> (Serum/*Immunoinhibition*) | **56.77** | mg/dL | Optimal(Negative Risk Factor): >= 60 <br> Borderline: 50 - 59 <br> High Risk: < 50 |
| LDL Cholesterol <br> (Serum/*Calculated*) | 143.3 | mg/dL | Optimal: < 100 <br> Above Optimal: 100 - 129 <br> Borderline: 130 - 159 <br> High: 160 - 189 <br> Very High: >= 190 |
| VLDL Cholesterol <br> (Serum/*Calculated*) | 23.3 | mg/dL | < 30 |
| Non HDL Cholesterol <br> (Serum/*Calculated*) | 166.6 | mg/dL | Optimal: < 130 <br> Above Optimal: 130 - 159 <br> Borderline High: 160 - 189 <br> High: 190 - 219 <br> Very High: >= 220 |

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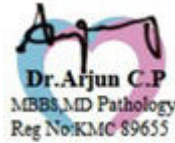**Type** : OP     **Printed On** : 14/11/2022 4:05 PM

**Ref. Dr** : **MediWheel**

| Investigation | Observed Value | Unit | Biological Reference Interval |
|---|---|---|---|

**INTERPRETATION:** 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.
2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

| Investigation | Observed Value | Unit | Biological Reference Interval |
|---|---|---|---|
| Total Cholesterol/HDL Cholesterol Ratio (Serum/*Calculated*) | 3.9 | | Optimal: < 3.3<br>Low Risk: 3.4 - 4.4<br>Average Risk: 4.5 - 7.1<br>Moderate Risk: 7.2 - 11.0<br>High Risk: > 11.0 |
| Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/*Calculated*) | 2.1 | | Optimal: < 2.5<br>Mild to moderate risk: 2.5 - 5.0<br>High Risk: > 5.0 |
| LDL/HDL Cholesterol Ratio (Serum/*Calculated*) | 2.5 | | Optimal: 0.5 - 3.0<br>Borderline: 3.1 - 6.0<br>High Risk: > 6.0 |

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*The results pertain to sample tested.*      Page 5 of 11

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| Investigation | Observed Value | Unit | Biological Reference Interval |
|---|---|---|---|
| ***Glycosylated Haemoglobin (HbA1c)*** | | | |
| HbA1C<br>(Whole Blood/*HPLC*) | 5.6 | % | Normal: 4.5 - 5.6<br>Prediabetes: 5.7 - 6.4<br>Diabetic: >= 6.5 |

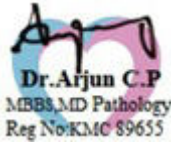**INTERPRETATION:** If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

| | | | |
|---|---|---|---|
| Estimated Average Glucose<br>(Whole Blood*)* | 114.02 | mg/dL | |

**INTERPRETATION: Comments**

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 as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia,hyperbilirubinemia,Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.

Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly,Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

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| Investigation | Observed Value | Unit | Biological Reference Interval |
|---|---|---|---|

# IMMUNOASSAY

## *THYROID PROFILE / TFT*

| | | | |
|---|---|---|---|
| T3 (Triiodothyronine) - Total (Serum/*ECLIA*) | **0.663** | ng/ml | 0.7 - 2.04 |

**INTERPRETATION:**
**Comment :**
Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

| | | | |
|---|---|---|---|
| T4 (Tyroxine) - Total (Serum/*ECLIA*) | 5.63 | µg/dl | 4.2 - 12.0 |

**INTERPRETATION:**
**Comment :**
Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

| | | | |
|---|---|---|---|
| TSH (Thyroid Stimulating Hormone) (Serum/*ECLIA*) | 3.45 | µIU/mL | 0.35 - 5.50 |

**INTERPRETATION:**
Reference range for cord blood - upto 20
1 st trimester: 0.1-2.5
2 nd trimester 0.2-3.0
3 rd trimester : 0.3-3.0
(Indian Thyroid Society Guidelines)
**Comment :**
1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.
2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.
3.Values&amplt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

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| Investigation | Observed Value | Unit | Biological Reference Interval |
|---|---|---|---|
| **CLINICAL PATHOLOGY** | | | |
| ***PHYSICAL EXAMINATION (URINE COMPLETE)*** | | | |
| Colour (Urine) | Yellow | | Yellow to Amber |
| Appearance (Urine) | Clear | | Clear |
| Volume(CLU) (Urine) | 35 | | |
| ***CHEMICAL EXAMINATION (URINE COMPLETE)*** | | | |
| pH (Urine) | 7.0 | | 4.5 - 8.0 |
| Specific Gravity (Urine) | 1.015 | | 1.002 - 1.035 |
| Ketone (Urine) | Negative | | Negative |
| Urobilinogen (Urine) | Normal | | Normal |
| Blood (Urine) | Negative | | Negative |
| Nitrite (Urine) | Negative | | Negative |
| Bilirubin (Urine) | Negative | | Negative |
| Protein (Urine) | Negative | | Negative |

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| Investigation | Observed Value | Unit | Biological Reference Interval |
|---|---|---|---|
| Glucose (Urine/*GOD - POD)* | Negative | | Negative |
| Leukocytes(CP) (Urine*)* | Negative | | |

### *MICROSCOPIC EXAMINATION (URINE COMPLETE)*

| Investigation | Observed Value | Unit | Biological Reference Interval |
|---|---|---|---|
| Pus Cells (Urine*)* | **0-1** | /hpf | NIL |
| Epithelial Cells (Urine*)* | **0-1** | /hpf | NIL |
| RBCs (Urine*)* | NIL | /HPF | NIL |
| Others (Urine*)* | NIL | | |

**INTERPRETATION:** Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.

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| Investigation | Observed Value | Unit | Biological Reference Interval |
|---|---|---|---|

## IMMUNOHAEMATOLOGY

BLOOD GROUPING AND Rh TYPING      'B' 'Positive'
(EDTA Blood/*Agglutination*)

**INTERPRETATION:** Note: Slide method is screening method. Kindly confirm with Tube method for transfusion.

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|---|---|---|---|

## BIOCHEMISTRY

| | | | |
|---|---|---|---|
| BUN / Creatinine Ratio | 12.4 | | 6.0 - 22.0 |
| Glucose Fasting (FBS)<br>(Plasma - F/*GOD-PAP)* | 87.04 | mg/dL | Normal: < 100<br>Pre Diabetic: 100 - 125<br>Diabetic: >= 126 |

**INTERPRETATION:** Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

| | | | |
|---|---|---|---|
| Glucose, Fasting (Urine)<br>(Urine - F/*GOD - POD)* | Negative | | Negative |
| Glucose Postprandial (PPBS)<br>(Plasma - PP/*GOD-PAP)* | 113.53 | mg/dL | 70 - 140 |

**INTERPRETATION:**
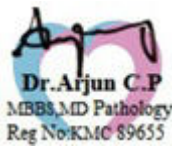Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti- diabetic medication during treatment for Diabetes.

| | | | |
|---|---|---|---|
| Urine Glucose(PP-2 hours)<br>(Urine - PP) | Negative | | Negative |
| Blood Urea Nitrogen (BUN)<br>(Serum/*Urease UV / derived)* | 9.1 | mg/dL | 7.0 - 21 |
| Creatinine<br>(Serum/*Modified Jaffe)* | 0.73 | mg/dL | 0.6 - 1.1 |

**INTERPRETATION:** Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin ,cefazolin, ACE inhibitors ,angiotensin II receptor antagonists,N-acetylcyteine , chemotherapeutic agent such as flucytosine etc.

| | | | |
|---|---|---|---|
| Uric Acid<br>(Serum/*Enzymatic)* | 4.82 | mg/dL | 2.6 - 6.0 |

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-- End of Report --

**X-ray mammogram (mediolateral oblique & craniocaudal views) followed by Sonomammography.**

## BILATERAL MAMMOGRAPHY

Breast composition Type C (The breasts are heterogeneously dense, which may obscure small masses).

No evidence of focal soft tissue lesion.

**Vascular calcification noted on the right side.**

No evidence of cluster microcalcification.

Subcutaneous fat deposition is within normal limits.

## BILATERAL SONOMAMMOGRAPHY

**Few prominent ducts are seen in the upper outer quadrant and in retroareolar region of bilateral breasts, measuring 2.8mm at around 10 O'clock position on right side and 1.5mm at around 2 O'clock position on left side. No solid components / internal echoes.**

No evidence of focal solid / cystic areas.

Rest of the breasts show normal echopattern.

Bilateral axillary lymphnodes are seen with preserved fatty hilum.

## IMPRESSION:

- **Prominent ducts in bilateral breasts as described.**
- **No other breast lesions.**
- **Bilateral benign axillary lymph nodes.**


**ASSESSMENT: BI-RADS CATEGORY -2**

**BI-RADS CLASSIFICATION**

**CATEGORY  RESULT**

| Name | MRS.UMADEVI K | ID | MED121472330 |
|---|---|---|---|
| Age & Gender | 48Y/FEMALE | Visit Date | 12 Nov 2022 |
| Ref Doctor Name | MediWheel | | |

2             Benign finding. Routine mammogram in 1 year recommended.

**DR. HEMANANDINI V.N**
**CONSULTANT RADIOLOGIST**
Hn/an

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|---|---|---|---|
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# ABDOMINO-PELVIC ULTRASONOGRAPHY

**LIVER** is normal in shape, size (12.2cms) and has uniform echopattern. No evidence of focal lesion or intrahepatic biliary ductal dilatation. Hepatic and portal vein radicals are normal.

**GALL BLADDER** shows normal shape and has clear contents. Wall is of normal thickness. CBD is of normal calibre.

**PANCREAS** has normal shape, size and uniform echopattern. No evidence of ductal dilatation or calcification.

**SPLEEN** show normal shape, size and echopattern.
No demonstrable Para-aortic lymphadenopathy.

**BOTH KIDNEYS**
**Right kidney:** Normal in shape, size and echopattern. Cortico-medullary differentiation is well madeout. No evidence of calculus or hydronephrosis.
**Left kidney:** Normal in shape, size and echopattern. Cortico-medullary differentiation is well madeout. No evidence of calculus or hydronephrosis.

The kidney measures as follows:

| | Bipolar length (cms) | Parenchymal thickness (cms) |
|---|---|---|
| Right Kidney | 10.1 | 1.6 |
| Left Kidney | 10.7 | 1.7 |

**URINARY BLADDER** show normal shape and wall thickness. It has clear contents.   No evidence of diverticula.

**UTERUS** is anteverted and has normal shape and size. It has uniform myometrial echopattern. Endometrial echo is of normal thickness - 6.2mm.
Uterus measures LS: 6.3cms          AP: 3.1cms          TS: 5.5cms.

**OVARIES** are normal in size, shape and echotexture.
Right ovary measures 2.7 x 1.3cms                Left ovary measures 2.1 x 2.6cms

POD & adnexa are free.
No evidence of ascites.

## IMPRESSION:

- **No significant abnormality detected.**

| Name | MRS.UMADEVI K | ID | MED121472330 |
|---|---|---|---|
| Age & Gender | 48Y/FEMALE | Visit Date | 12 Nov 2022 |
| Ref Doctor Name | MediWheel | | |

**DR. HEMANANDINI V.N**
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Hn/an

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| Age & Gender | 48Y/FEMALE | Visit Date | 12 Nov 2022 |
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## 2D ECHOCARDIOGRAPHIC STUDY

### M-mode measurement:

| | | | |
|---|---|---|---|
| AORTA | : | 2.12 | cms. |
| LEFT ATRIUM | : | 2.62 | cms. |
| AVS | : | 1.47 | cms. |
| **LEFT VENTRICLE** | | | |
| (DIASTOLE) | : | 3.82 | cms. |
| (SYSTOLE) | : | 2.66 | cms. |
| **VENTRICULAR SEPTUM** | : | | |
| (DIASTOLE) | : | 0.96 | cms. |
| (SYSTOLE) | : | 1.00 | cms. |
| **POSTERIOR WALL** | : | | |
| (DIASTOLE) | : | 0.96 | cms. |
| (SYSTOLE) | : | 1.31 | cms. |
| EDV | : | 62 | ml. |
| ESV | : | 26 | ml. |
| FRACTIONAL SHORTENING | : | 30 | % |
| EJECTION FRACTION | : | 60 | % |
| EPSS | : | ---- | cms. |
| RVID | : | 1.80 | cms. |

### DOPPLER MEASUREMENTS:

MITRAL VALVE:          E - 0.8 m/s      A - 0.6 m/s          NO MR.

AORTIC VALVE:                1.1 m/s                          NO AR.

TRICUSPID VALVE: E - 0.4 m/s      A -0.3 m/s          NO TR.

PULMONARY VALVE:          0.8 m/s                          NO PR.

| Name | MRS.UMADEVI K | ID | MED121472330 |
|---|---|---|---|
| Age & Gender | 48Y/FEMALE | Visit Date | 12 Nov 2022 |
| Ref Doctor Name | MediWheel | | |

## 2D ECHOCARDIOGRAPHY FINDINGS:

Left Ventricle : Normal size, Normal systolic function.
: No regional wall motion abnormalities.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Mitral Valve : Normal. No mitral valve prolapsed.

Aortic Valve : Normal.Trileaflet.

Tricuspid Valve : Normal.

Pulmonary Valve : Normal.

IAS : Intact.

IVS : Intact.

Pericardium : No pericardial effusion.

## IMPRESSION:
- **NORMAL SIZED CARDIAC CHAMBERS.**
- **NORMAL LV SYSTOLIC FUNCTION. EF: 60 %.**
- **NO REGIONAL WALL MOTION ABNORMALITIES. .**
- **NORMAL VALVES.**
- **NO CLOTS / PERICARDIAL EFFUSION / VEGETATION.**

| Name | MRS.UMADEVI K | ID | MED121472330 |
|---|---|---|---|
| Age & Gender | 48Y/FEMALE | Visit Date | 12 Nov 2022 |
| Ref Doctor Name | MediWheel | | |

**DR. YASHODA RAVI**

**CONSULTANT CARDIOLOGIST**

| Name | UMADEVI K | Customer ID | MED121472330 |
|------|-----------|-------------|--------------|
| Age & Gender | 48Y/F | Visit Date | Nov 12 2022 9:55AM |
| Ref Doctor | MediWheel | | |

## X - RAY  CHEST PA VIEW

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

**IMPRESSION:**

**No significant abnormality detected.**

DR.HEMANANDHINI
CONSULTANT  RADIOLOGIST

# OPTICAL STORE

## Unique Collection

Ph: 9611444957

Vyalikaval Main road No 12 Lakshmi Nilaya, Ground Floor,
2nd Main Road, Vyalikaval, Bengaluru Karnataka : 560003

Name *Umadevi*
Age 48/2

Ph No 9845340010

CHIEF COMPLAINTS

RE / LE / BE          DOV / Blurring / Eyeache / Burning
                      Itching / Pricking / Redness

Visual Activity

|                  | RE  |     | LE  |     |
|------------------|-----|-----|-----|-----|
| Distance/ Near   | 6   | 6   | 6   | 6   |
| With PH          |     |     |     |     |
| With Glasses/CL  |     |     |     |     |

Color Vision BE= Normal

|          | RE   |      |      |     | LE   |      |      |     |
|----------|------|------|------|-----|------|------|------|-----|
|          | SPH  | CYL  | AXIS | VN  | SPH  | CYL  | AXIS | VN  |
| Distance | Plano|      |      | 6/6 | Plano|      |      | 6/6 |
| Near     |      |      |      | ADD +1.75 |  |      |      |     |

N6[BE]

Advise     Constant Use / Near Use / Distance Only

MP Ravikumar H 2/11/22
(Consultant Optometrist)

| Patient Name | Umadevi . K | Date | 12\|11\|22 |
|---|---|---|---|
| Age | H84r | Visit Number | 522228425 |
| Sex | Female | Corporate | Medi wheel |

## MEDICAL EXAMINATION REPORT

Height : 152 cms

Weight : 61.5 cms

BMI : 26.6

- Healthy BMI range: 18.5 kg/m² - 25 kg/m²
- Healthy weight for the height: 58.0 kgs - 78.3 kgs
- Lose 8.4 kgs to reach a BMI of 25 kg/m².
- Ponderal Index: 15.6 kg/m³

Blood Pressure : 104 \|73 mm of Hg

Pulse : 90 per mt

Chest - Exhale : 83 cms

Inhale : 90 cms

Abdomen : 85 cms

Eyes : Normal          Ears : Normal

Throat : Normal        Neck Nodes : Not pdpulp

CVS : S1 S2 f          PA : NAy

RS : NVBS              CNS : NAy

Smoker / Alcoholic : Ny

Weight loss / cough : No

H/O Piles / Fever : No

Any surgery : LSCS

Medication for DM / HT/ Heart disease : No
Anxiety Depresion on medication.

**Physician signature** Dr. SHANKAR K.R.S
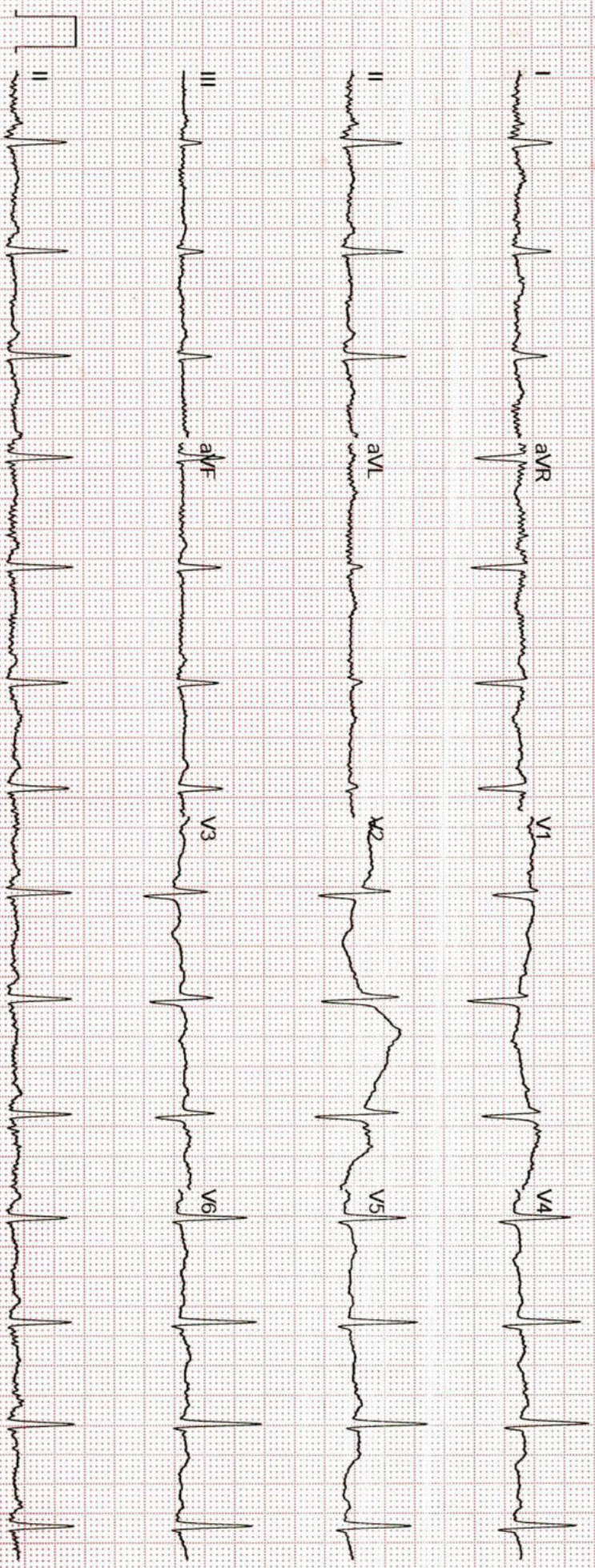Bsc. MBBS.,
KMC No: 15130

48 Years    Female

12.11.2022  12:11:35
CLUMAX DIAGNOSTICS
VYALIKAVAL
BANGALORE

| | |
|---|---|
| QRS | 82 ms |
| QT / QTcBaz | 406 / 479 ms |
| PR | 168 ms |
| P | 104 ms |
| RR / PP | 714 / 714 ms |
| P / QRS / T | 64 / 49 / 20 degrees |

Normal sinus rhythm
Nonspecific T wave abnormality
Abnormal ECG

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

**84** bpm
-- / -- mmHg

I
aVR
V1
V4

II
aVL
V2
V5

III
aVF
V3
V6

II

GE   MAC2000   1:1   12SL™ V241   25 mm/s   10 mm/mV   ADS   0.5Ｘ0 Hz   50 Hz   4x2.5x3_25_R1   Unconfirmed   1/1