



ASHOK JAIN

M

30/09/1992 Permanent Account Number

AWEPJ8681N

भारत सरकार GOVT. OF INDIA



Signature



# Referral : SELF

Collection Time : Jan 15, 2023, 02:10 p.m. Receiving Time : Jan 15, 2023, 02:10 p.m. Reporting Time : Jan 15, 2023, 04:46 p.m. Sample ID :



Test Description	Value(s)	Reference Range	
Complete Blood Count			
WBC	7200	4000-10000	cell/cu.mm
Neu%	50	50 - 70	%
Lym%	41	20.0 - 40.0	%
Mon%	04	3.0 - 12.0	%
Eos%	05	0.5 - 5.0	%
Bas%	00	0.0 - 1.0	%
RBC	4.01	4.0 - 5.50	10^6/uL
HGB	11.8	12.0 - 16.0	g/dL
НСТ	34.8	40.0 - 54.0	%
MCV	86.8	83 - 101	fL
MCH	29.4	27 - 32	pg
MCHC	33.9	31.5 - 34.5	g/dL
RDW-CV	13.8	11.0 - 16.0	%
PLT	287	100 - 300	10^3/ul
RBC	Normocytic no	ormochromic	
WBC	Within normal	limits	
Platelet	Adequate		

\*\*END OF REPORT\*\*

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**Dr.Rajendra Ramling Shete** 

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Madyoasis Medical Services Pvt Ltd.: CIN No.: U85320PN2018PTC175152 | GST NO: 27AALCM6611R1ZR age Add.: Office No-406 , Bhakti Genesis, Wakad Rd, Shedge Vasti, Shankar Kalate Nagar, Wakad, Pimpri-Chinchwad, Maharashtra 411057



Patient Name : MRS. ASHIKA JAINReferral : SELFAge / Gender : 30 years / FemaleCollection Time : Jan 15, 2023, 02:10 p.m.Mobile No. : -Receiving Time : Jan 15, 2023, 02:10 p.m.Patient ID : 9Reporting Time : Jan 15, 2023, 04:46 p.m.Source : DIRECTSample ID :Test DescriptionValue(s)Keference Range

ESR - Erythrocyte Sedimentation Rate Method : EDTA Whole Blood, Manual Westergren

Interpretation:

• It indicates presence and intensity of an inflammatory process. It does not diagnose a specific disease. Changes in the ESR are more significant than the abnormal results of a single test.

0-15

• It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis and polymyalgia rheumatica.

• It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

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\*\*END OF REPORT\*\*

**Dr.Rajendra Ramling Shete** 

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Madyoasis Medical Services Pvt Ltd.: CIN No.: U85320PN2018PTC175152 | GST NO: 27AALCM6611R12R age 2 of 2 Reg. Add.: Office No-406 , Bhakti Genesis, Wakad Rd, Shedge Vasti, Shankar Kalate Nagar, Wakad, Pimpri-Chinchwad, Maharashtra 411057



# Referral : SELF

Collection Time : Jan 15, 2023, 02:10 p.m. Receiving Time : Jan 15, 2023, 02:10 p.m. Reporting Time : Jan 15, 2023, 04:46 p.m. Sample ID :



Test Description	Value(s)	Reference Range	
LIPID PROFILE			
Cholesterol-Total Method : Spectrophotometry	102	Desirable level   < 200 Borderline High   200-239 High   >or = 240	mg/dL
Triglycerides Method : Serum, Enzymatic, endpoint	67	Normal: < 150 Borderline High: 150-199 High: 200-499 Very High: >= 500	mg/dL
HDL Cholesterol Method : Serum, Direct measure-PEG	22	Normal: > 40 Major Risk for Heart: < 40	mg/dL
LDL Cholesterol Method : Enzymatic selective protection	66.60	Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190	mg/dL
VLDL Cholesterol Method : Serum, Enzymatic (Calculated)	13.40	6 - 38	mg/dL
CHOL/HDL Ratio Method : Serum, Enzymatic	4.64	UP TO 5.0	
LDL/HDL Ratio Method : Serum, Enzymatic Note:	3.03	UP TO3.5	
8-10 hours fasting sample is required.			

\*\*END OF REPORT\*\*

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Madyoasis Medical Services Pvt Ltd.: CIN No.: U85320PN2018PTC175152 | GST NO: 27AALCM6611R12R age 3 of 2 Reg. Add.: Office No-406 , Bhakti Genesis, Wakad Rd, Shedge Vasti, Shankar Kalate Nagar, Wakad, Pimpri-Chinchwad, Maharashtra 411057



# Referral : SELF

Collection Time : Jan 15, 2023, 02:10 p.m. Receiving Time : Jan 15, 2023, 02:10 p.m. Reporting Time : Jan 15, 2023, 04:46 p.m. Sample ID :



Test Description	Value(s)	Reference Range	
Urea, Serum			
Urea Method : Uricase	15	17 - 43	mg/dL

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Madyoasis Medical Services Pvt Ltd.: CIN No.: U85320PN2018PTC175152 | GST NO: 27AALCM6611R1ZR age 4 of 12 Reg. Add.: Office No-406 , Bhakti Genesis, Wakad Rd, Shedge Vasti, Shankar Kalate Nagar, Wakad, Pimpri-Chinchwad, Maharashtra 411057



Patient Name : MRS. ASHIKA JAINReferral : SELFAge / Gender : 30 years / FemaleCollection Time : Jan 15, 2023, 02:10 p.m.Mobile No. : -Receiving Time : Jan 15, 2023, 02:10 p.m.Patient ID : 9Reporting Time : Jan 15, 2023, 04:46 p.m.Source : DIRECTSample ID :Test DescriptionValue(s)Reference Range

# CREATININE Creatinine 0.6 0.57 - 1.11 mg/dL Method : Serum, Jaffe Method : Serum, Jaffe Method : Serum, Jaffe

\*\*END OF REPORT\*\*

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Test Description	Value(s)	Reference Range	
Uric Acid, Serum			
Uric Acid	2.3	2.6 - 6.0	mg/dL
Method : Uricase, Colorimetric			

\*\*END OF REPORT\*\*

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Collection Time : Jan 15, 2023, 02:10 p.m. Receiving Time : Jan 15, 2023, 02:10 p.m. Reporting Time : Jan 15, 2023, 04:46 p.m. Sample ID :



Test Description	Value(s)	Reference Range	
LIVER FUNCTION TEST ( LFT )			
Total Protein	7.92	6.6 - 8.3	g/dL
Method : Serum, Biuret, reagent blank end point			
Albumin	4.55	3.2 - 4.6	g/dL
Method : Serum, Bromocresol green			
Bilirubin - Total	0.45	0.3 - 1.2	mg/dL
Method : Serum, Jendrassik Grof			
Bilirubin - Direct	0.16	< 0.2	mg/dL
Method : Serum, Diazotization			
SGOT	18	Upto 40	U/L
Method : Serum, UV with P5P, IFCC 37 degree			
SGPT	14	Upto 42	U/L
Method : Serum, UV with P5P, IFCC 37 degree			
Alkaline Phosphatase	50	30 - 120	U/L
Method : PNPP-AMP Buffer/Kinetic			

\*\*END OF REPORT\*\*

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Collection Time : Jan 15, 2023, 02:10 p.m. Receiving Time : Jan 15, 2023, 02:10 p.m. Reporting Time : Jan 15, 2023, 04:46 p.m. Sample ID :



			000001020
Test Description	Value(s)	Reference Range	
THYROID FUNCTION TEST (TFT)			
T3-Total	1.1	0.6 - 1.80	ng/mL
T4-Total	7.8	4.5 to 10.9	microgm/dl
TSH-Ultrasensitive	3.3	0.35 to 5.55	microU/mL

Method : CLIA

Interpretation

TSH levels may be affected by acute illness and drugs like doapamine and gluco corticoids .

Low or undetectable TSH is suggestive of Grave~s disease

TSH between 5.5 to 15.0 with normal T3 T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3 T4 with slightly low TSH suggests subclinical Hyperthyroidism.

TSH suppression does not reflect severity of hyperthyroidism therefore , measurement of FT3 & FT4 is important.

FreeT3 is first hormone to increase in early Hyperthyroidism.

Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3, FreeT4 along with TSH should be checked. During pregnancy, T3 T4 can be high and TSH can be slightly low

\*\*END OF REPORT\*\*

**Dr.Rajendra Ramling Shete** 







Patient Name : MRS. ASHIKA JAINReferral : SELFAge / Gender : 30 years / FemaleCollection Time : Jan 15, 2023, 02:10 p.m.Mobile No. : -Receiving Time : Jan 15, 2023, 02:10 p.m.Patient ID : 9Reporting Time : Jan 15, 2023, 04:46 p.m.Source : DIRECTSample ID :Test DescriptionValue(s)Reference RangeGamma Glutamyl Transferase ( GGTP )

<38

# Gamma GT

Method : G-Glutamyl-Carboxy-Nitoanilide

# Interpretation

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

26

\*\*END OF REPORT\*\*

**Dr.Rajendra Ramling Shete** 

U/L







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Collection Time : Jan 15, 2023, 02:10 p.m. Receiving Time : Jan 15, 2023, 02:10 p.m. Reporting Time : Jan 15, 2023, 04:46 p.m. Sample ID :



Test Description	Value(s)	Reference Range	
FASTING BLOOD SUGAR			
Glucose fasting	94	Normal: 70 - 99	mg/dL
Method : Fluoride Plasma-F, Hexokinase		Impaired Tolerance: 100-125	
		Diabetes mellitus: >= 126	
		(on more than one occassion)	
		(American diabetes association	
		guidelines 2018)	
Urine Fasting	Absent		

\*\*END OF REPORT\*\*

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**Dr.Rajendra Ramling Shete** 

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Madyoasis Medical Services Pvt Ltd.: CIN No.: U85320PN2018PTC175152 | GST NO: 27AALCM6611R1ZR age 10 0112 Reg. Add.: Office No-406 , Bhakti Genesis, Wakad Rd, Shedge Vasti, Shankar Kalate Nagar, Wakad, Pimpri-Chinchwad, Maharashtra 411057



# Referral : SELF

Collection Time : Jan 15, 2023, 02:10 p.m. Receiving Time : Jan 15, 2023, 02:10 p.m. Reporting Time : Jan 15, 2023, 04:46 p.m. Sample ID :



Test Description	Value(s)	Reference Range	
PPBS			
Blood Glucose-Post Prandial	97	70 - 140	mg/dL
Method : Hexokinase Urine Post Prandial	Absent		

\*\*END OF REPORT\*\*

# **Dr.Rajendra Ramling Shete**

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Madyoasis Medical Services Pvt Ltd.: CIN No.: U85320PN2018PTC175152 | GST NO: 27AALCM6611R1ZR Reg. Add.: Office No-406 , Bhakti Genesis, Wakad Rd, Shedge Vasti, Shankar Kalate Nagar, Wakad, Pimpri-Chinchwad, Maharashtra 411057



# Referral : SELF

 Collection Time : Jan 15, 2023, 02:10 p.m.
 Receiving Time : Jan 15, 2023, 02:10 p.m.

 Reporting Time : Jan 15, 2023, 04:46 p.m.

 Sample ID :
 Image: Image:



Test Description	Value(s)	Reference Range	
URINE ROUTINE EXAMINATION			
Volume*	20	-	ml
Colour*	Pale Yellow		
Transparency (Appearance)*	Clear		
Deposit*	Absent		
Reaction (pH)*	6.5	4.5 - 8	
Specific Gravity*	1.005	1.010 - 1.030	
Chemical Examination (Automated Dig	ostick Method) Urine		
Urine Glucose (sugar)*	Absent		
Urine Protein (Albumin)*	Absent		
Microscopic Examination Urine			
Pus Cells (WBCs)*	0-1	0 - 5	/hpf
Epithelial Cells*	0-1	0 - 4	/hpf
Red blood Cells*	Absent		/hpf
Crystals*	Absent		
Cast*	Absent		
Bacteria*	Absent		
Mucus Thread	Absent		

\*\*END OF REPORT\*\*

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Madyoasis Medical Services Pvt Ltd.: CIN No.: U85320PN2018PTC175152 | GST NO: 27AALCM6611R1ZR age 12 0112 Reg. Add.: Office No-406 , Bhakti Genesis, Wakad Rd, Shedge Vasti, Shankar Kalate Nagar, Wakad, Pimpri-Chinchwad, Maharashtra 411057



# USG ABDOMEN AND PELVIS

# FINDINGS:-

Liver is normal in size, shape and echopattern. No evidence of focal lesion. Portal and hepatic venous confluence are normal. No IHBR dilatation seen.

Gall bladder is well distended and normal. No calculus or mass seen. CBD is normal in caliber.

Pancreas is normal in size and echopattern. No focal lesion.

Spleen is normal in size with homogenous echopattern. No focal lesion.

Both kidneys are normal in size, shape, location and appear homogenous in echopattern. Nc evidence of calculus or hydronephrosis. Both ureters are not dilated.

Urinary bladder is well distended and shows normal wall thickness. No mass or calculus seen.

Uterus is normal in size, shape and echopattern. No focal lesion The endometrial echo is central with empty cavity.

Both ovaries are normal.No obvious adnexal mass noted

Aorta, IVC and retroperitoneum are normal.

No free fluid or lymphadenopathy.

There is no obvious bowel dilatation. No abnormal bowel wall thickening is seen .

# IMPRESSION :-

No significant abnormality detected.

--End Of Report--

DR ABHIJIT PAWAR MBBS, DNB, DMRE RADIOLOGIST

Print Date: 14/01/2023 14:44:46

Page 1 of 2

1

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For Home Visit & Appointments: 07969 00 7969 Email info.medimap@gmail.com

# **MEDIMAP DIAGNOSTICS**

# Patient

D

Name Birth Date Gender







14012023-022933PM JAIN, ASHIKA

Exam Accession # Exam Date Description Operator

14-01-2023

STORE WITH THE REAL









I DUTE

 Patient ID No.
 : 132300208

 Reg.Date/Time
 : 14/01/2023 1

 Patient's Name
 : Ashika Jain

 Ref.
 By
 : Dr.Self

 Client Name
 : MADYOSIS 1

: 132300208 Card ID : 20231690
: 14/01/2023 13:02:50
: Ashika Jain - 30 Year / Female
: Dr.Self
: MADYOSIS 1



# RADIOGRAPH OF CHEST PA VIEW

# FINDINGS:

Visualised lungs bilaterally reveal normal aeration pattern.

Both the costophrenic angles are clear.

The mediastinal silhouette is maintained.

Cardiac and aortic silhouettes appear normal.

Both the domes of diaphragm are normal in position and contour.

Thoracic wall soft tissues and bony cage are normal.

# IMPRESSION:

NO SIGNIFICANT ABNORMALITY DETECTED.

--End Of Report--

DR ABHIJIT PAWAR MBRS, DNB, DMRE RADIOLOGIST

Print Date : 14/01/2023 14:43:58

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# MADYOASIS DIÅGNOSTIÈS

Shop No 20, Cross Road Building Bhumkar Chowk, Wakad, pune, Maharashtra 411057

L+91 74100 01785 / 77966 95666

www.madyoasis.in

# Ms. Ashika Jain

History

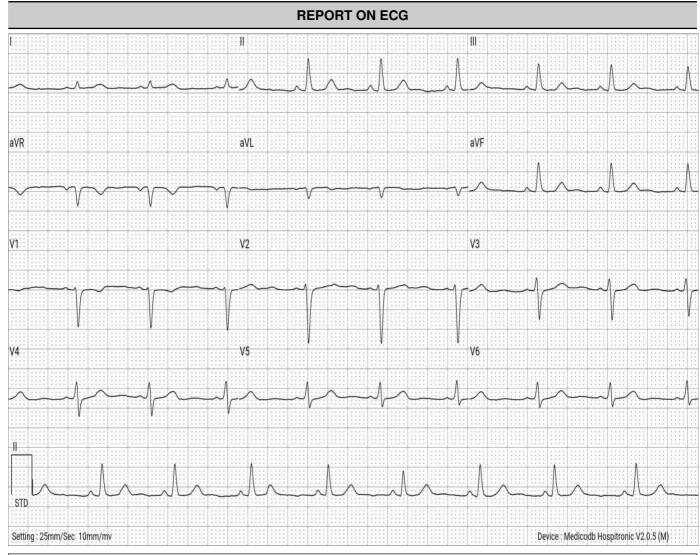


Gendr/DOB (Age) : Female/14-Jan-1993(30Y 0M) Referred By

Pimple Nilakh Vishal Nagar Wakad Pune Maharashtra India

Medico ID Date

: 23011401224792 : 14-Jan-2023 / 03:17 PM



VITALS	:	TEMP	: - (F)	PULSE RATE	:- /MIN	RBS	: - mg/dL
		HR	: 0/MIN	BP	: 0 / 0 mmHg	SPO2	: 0.0 %
MEASUREMENTS*	:	PR	: 0.0 ms	QT	: 0.0 ms	Р	: 0.0 deg
(ECG Parameters)		ST	: 0.0 ms	QTc	: 0.0 ms	QRs	: 0.0 deg
		R-R	: 0.0 ms	QRS	: 0.0 ms	Т	: 0.0 deg
FINDINGS	: N	ORMAL S	INUS RHYTHM. NO SI	GNIFICANT ST C	HANGES NOTED		
IMPRESSION RECOMMENDATION			S FOUND TO BE WITH CORRELATION	HIN NORMAL LIM	ITS.		

This is electronically authenticated report; hence doesn't require signature. \* Software calculated values; to be verified manually.

**Printed By** : Madyoasis Medical SPL ECG Technician On 14-Jan-2023 / 03:19 PM (*Rs. 0.00/- Received for this ECG*)

Diheth. R

Reported By Express Diagnostics HQ

(Dr. Dinesh S. Chandana (MD,Medicine)) Reg. No : G-3366



Patient Name : MRS. ASHIKA JAIN

Age / Gender : 30 years / Female Collection Time : Jan 16, 2023, 01:52 p.m. Mobile No. : -Receiving Time : Jan 16, 2023, 01:52 p.m. Patient ID: 9 Reporting Time : Jan 16, 2023, 01:52 p.m. Sample ID : Source : DIRECT **Test Description** Value(s) **Reference Range** Blood Group Abo & Rh Typing, Blood Blood Group (ABO typing) "O" Method : Manual-Hemagglutination RhD Factor (Rh Typing) Positive

Referral : SELF

Method : Manual hemagglutination

\*\*END OF REPORT\*\*

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**Dr.Rajendra Ramling Shete** 







HbA1c (GLYCOSYLATED HEMOGLOBIN),

Patient Name : MRS. ASHIKA JAINReferral : SELFAge / Gender : 30 years / FemaleCollection Time : Jan 16, 2023, 01:52 p.m.Mobile No. : -Receiving Time : Jan 16, 2023, 01:52 p.m.Patient ID : 9Reporting Time : Jan 16, 2023, 01:52 p.m.Source : DIRECTSample ID :Test DescriptionValue(s)Reference RangeGLYCOSYLATED HAEMOGLOBIN ( GHB / HBA1c )

%

BLOOD		
Method : (HPLC, NGSP certified)		
Estimated Average Glucose :	114.02 -	mg/dL
Interpretation		
As per American Diabetes Association (ADA)		]
Reference Group	HbA1c in %	1
Non diabetic adults >=18 years	<5.7	
At risk (Prediabetes)	5.7 - 6.4	-
Diagnosing Diabetes	>= 6.5	
	Age > 19 years	1
	Goal of therapy: < 7.0	
Therapeutic goals for glycemic control	Action suggested: > 8.0	
	Age < 19 years	
	Goal of therapy: <7.5	

5.6

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.

# 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.

### ADA criteria for correlation between HbA1c & Mean plasma glucose levels.

HbA1c(%)	Mean Plasma Glucose (mg/dL)
6	126
7	154
8	183







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Collection Time : Jan 16, 2023, 01:52 p.m. Receiving Time : Jan 16, 2023, 01:52 p.m. Reporting Time : Jan 16, 2023, 01:52 p.m. Sample ID :



Test De	scription	Value(s)	Reference Range	
9	212			
10	240			
11	269			
12	298			

\*\*END OF REPORT\*\*

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# **Dr.Rajendra Ramling Shete**





# EYE CHECK UP

DATE: 14 Jan 2023

NAME: - Ashika Jain.

AGE:- 30

HISTORY:- Nil.

# **EXAMINATIONS:-**

Vision :-

:

	Near	Distance	Distance							
Right Eye	616 N	Iormal @	310	6	Normal					
Left Eye	616 N	vormel 6	516	6	Normal.					

Colour Vision (Tick Only)

NORMAL	V
PARTIAL:RED/GREENDEFICIENCY	
COMPLETE:RED/GREEN DEFICIENCY	R
	1 . N
	( Vac -

DR. RAJESH MAIL AGIRE General Physic (1955) Doctor Signature 2018/04/1055



Office No-406 , 4th Floor, Bhakti Genesis, Wakad Rd, Wakad, Pune MH-411057

# Patient Name : MRS. ANSHIKA JAIN

Age / Gender : 30 Years / Female

**Referral Doctor: MADYOASIS DIAGNOSTICS** 

Collected At : TRUE LABS HEALTHCARE PVT. LTD.

Collection Date : 17/01/2023 03:35 PM Accession On : 18/01/2023 08:56 AM Reporting Date : 18/01/2023 09:01 AM Pt.Type / ID : Direct/ 281

# STOOL ANALYSIS REPORT

Test Description	Value(s)	Unit	Reference Range					
	Physical Exam	ination						
Colour	Brown		Brown					
Mucus	Absent		Absent					
Frank Blood	Absent		Absent					
Consistency	Semi solid		Semi solid					
Parasite	Absent		Absent					
Reaction	Acidic		Acidic					
Occult Blood	Negative		Negative					
	Microscopic Examin	nation (/hpf)						
Ova of Parasites	Absent		Absent					
RBC	Absent		Absent					
Pus cells	4-5		Absent					
Macrophages	Absent		Absent					
Fat Globules	Few		Absent					
Veg. Matter	Absent		Absent					
Vegetative Forms	Absent		Absent					
Cysts	Absent		Absent					
Epithelial cells	Occasional		Absent					

\*\*END OF REPORT\*\*



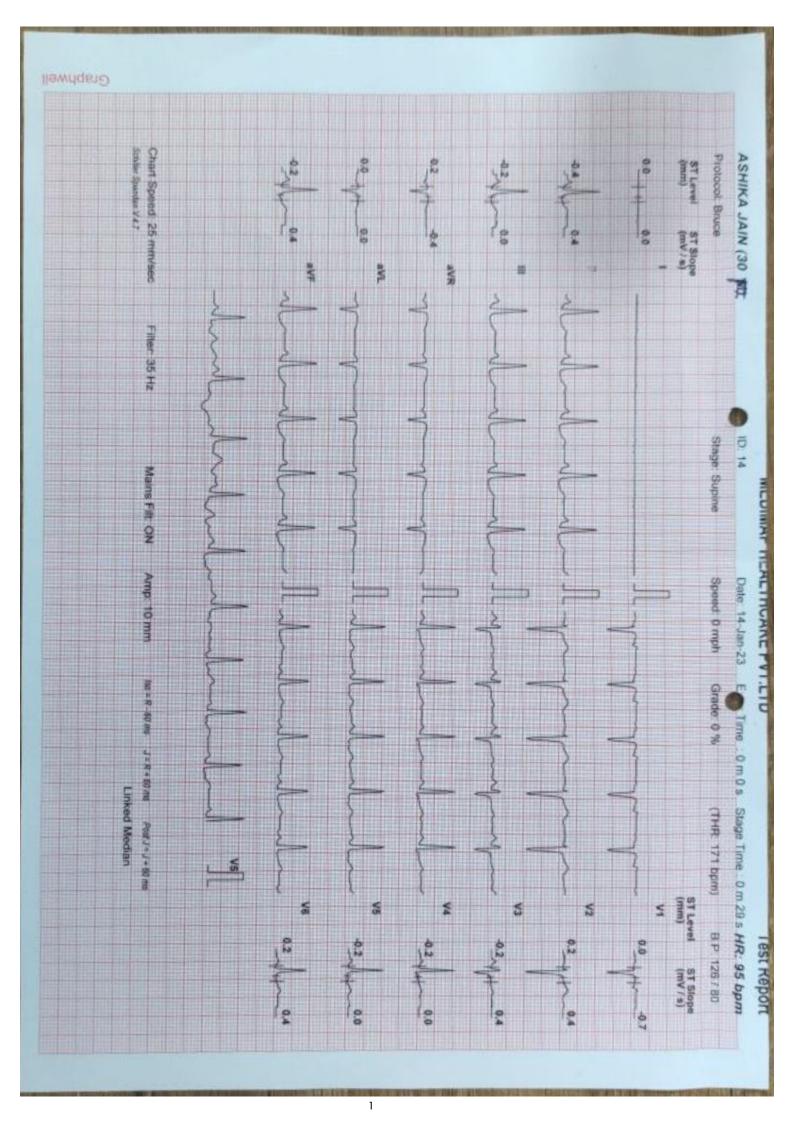
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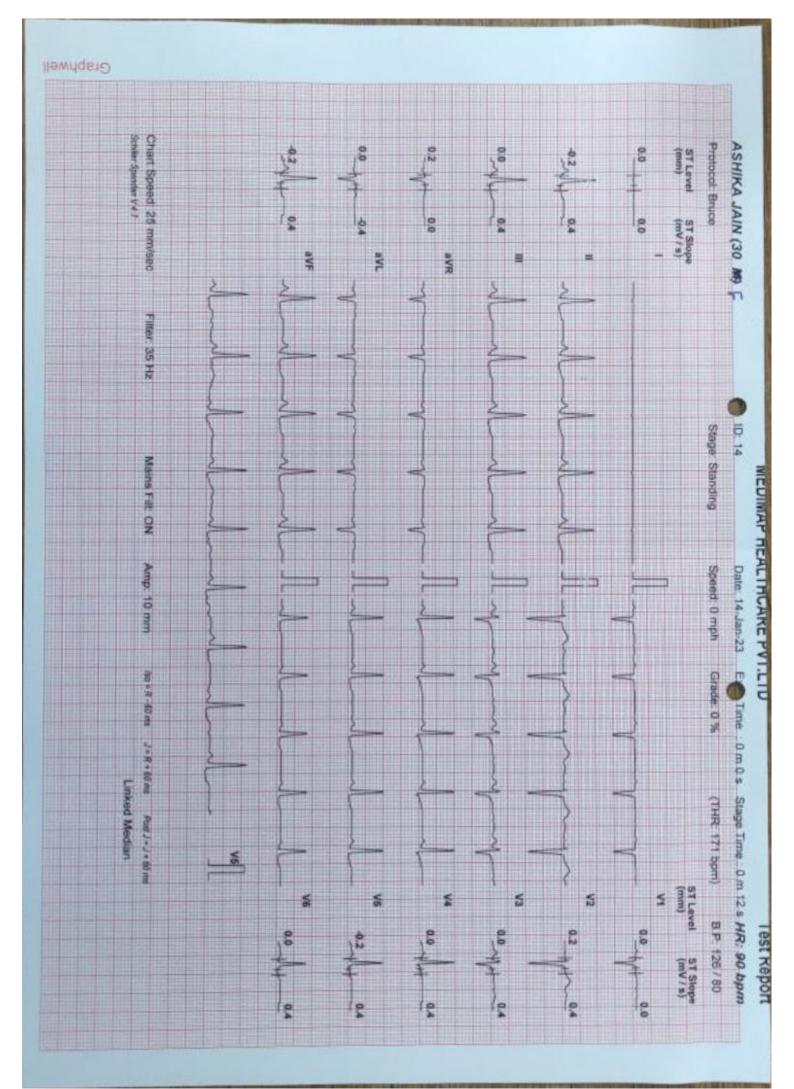
Dr. Purti Vora MD Pathologist Reg No. I-73900A

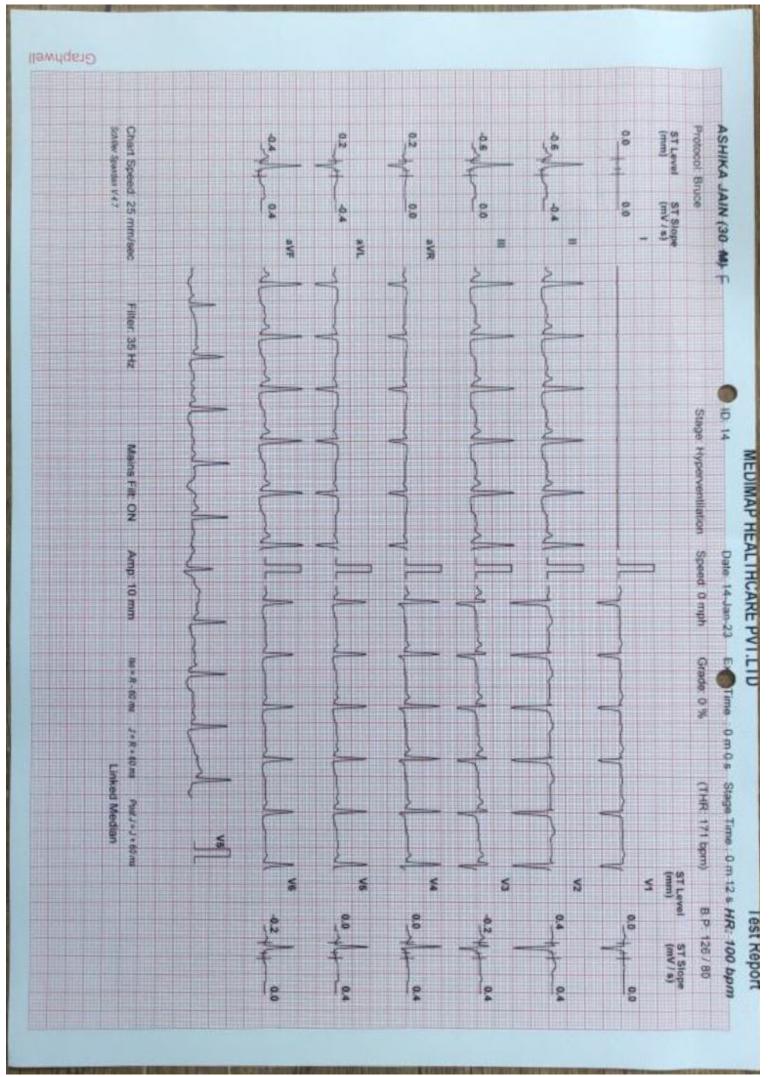
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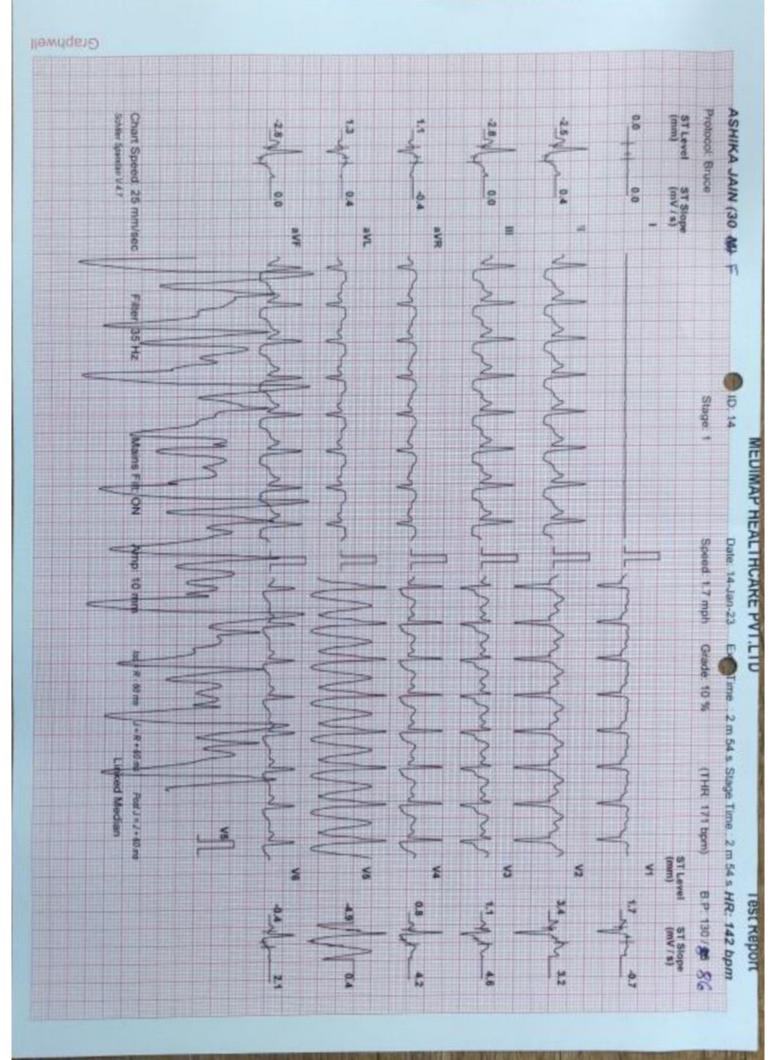


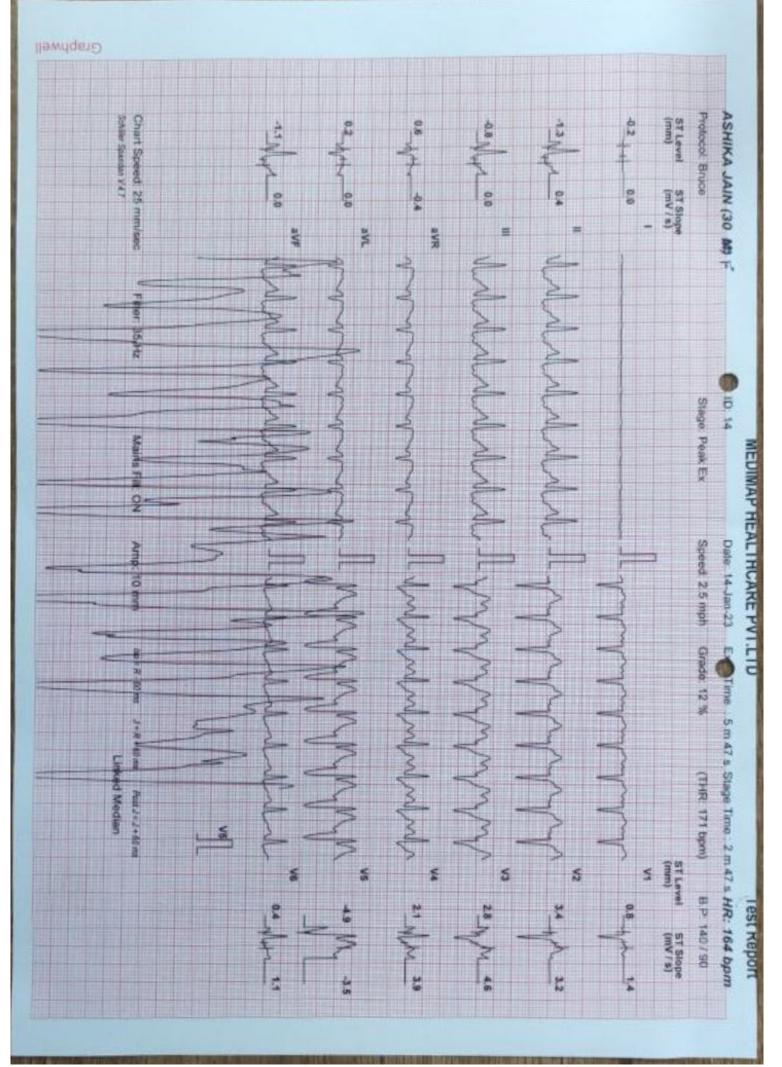
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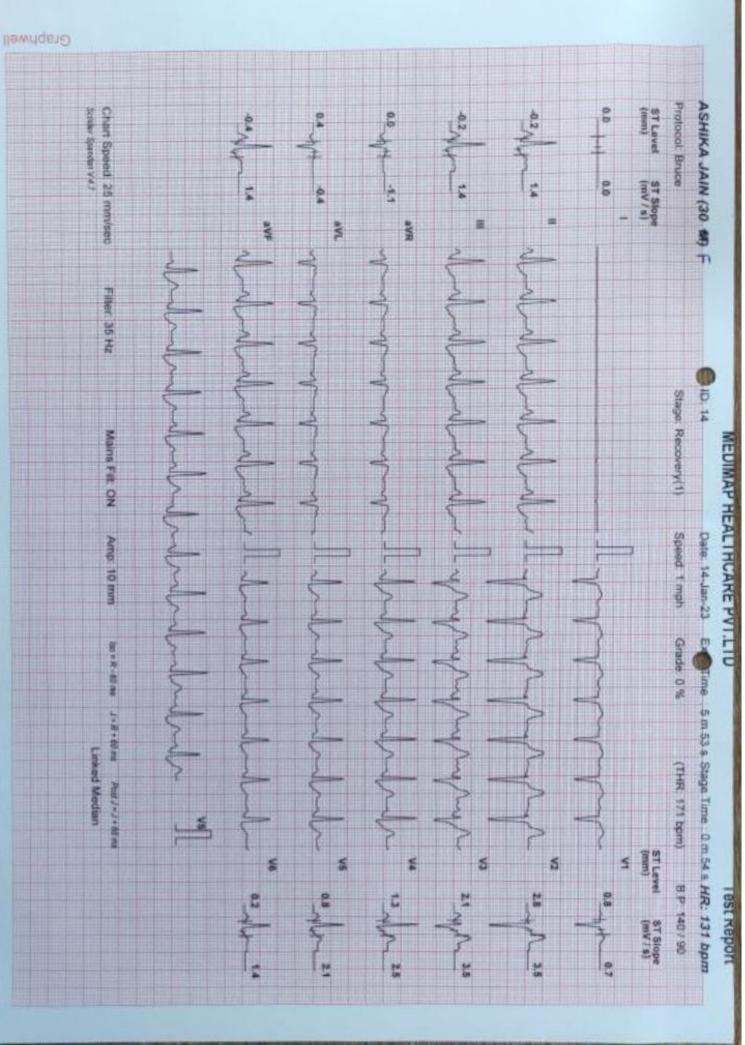


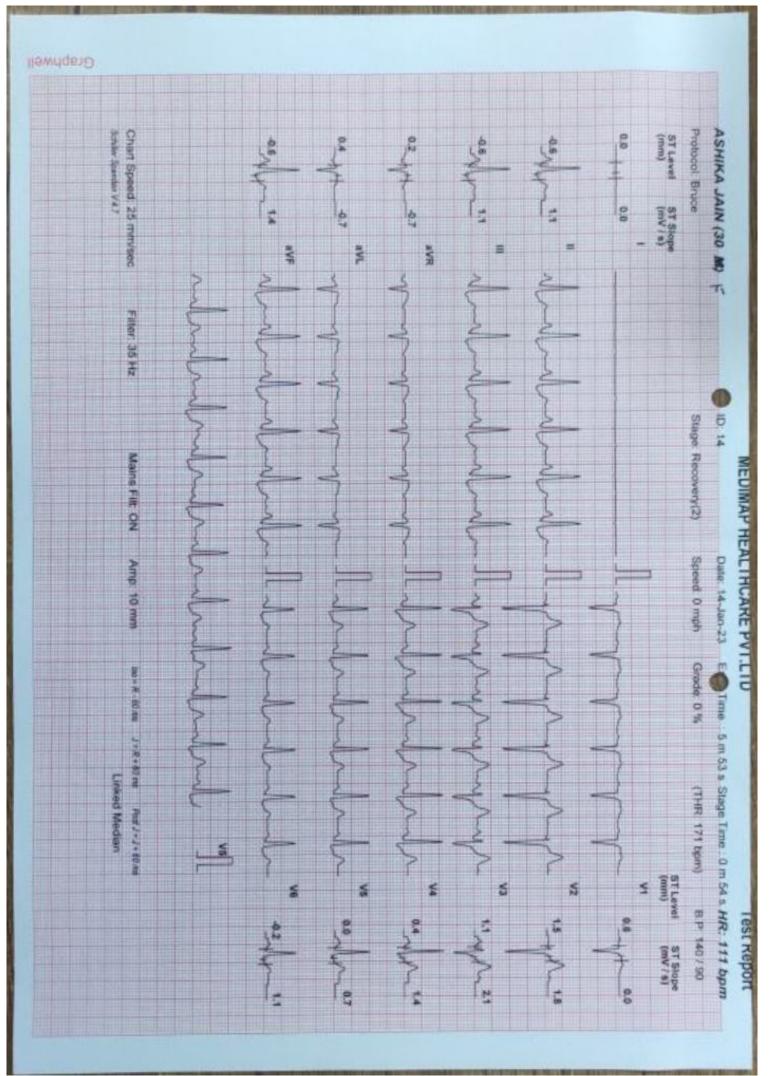


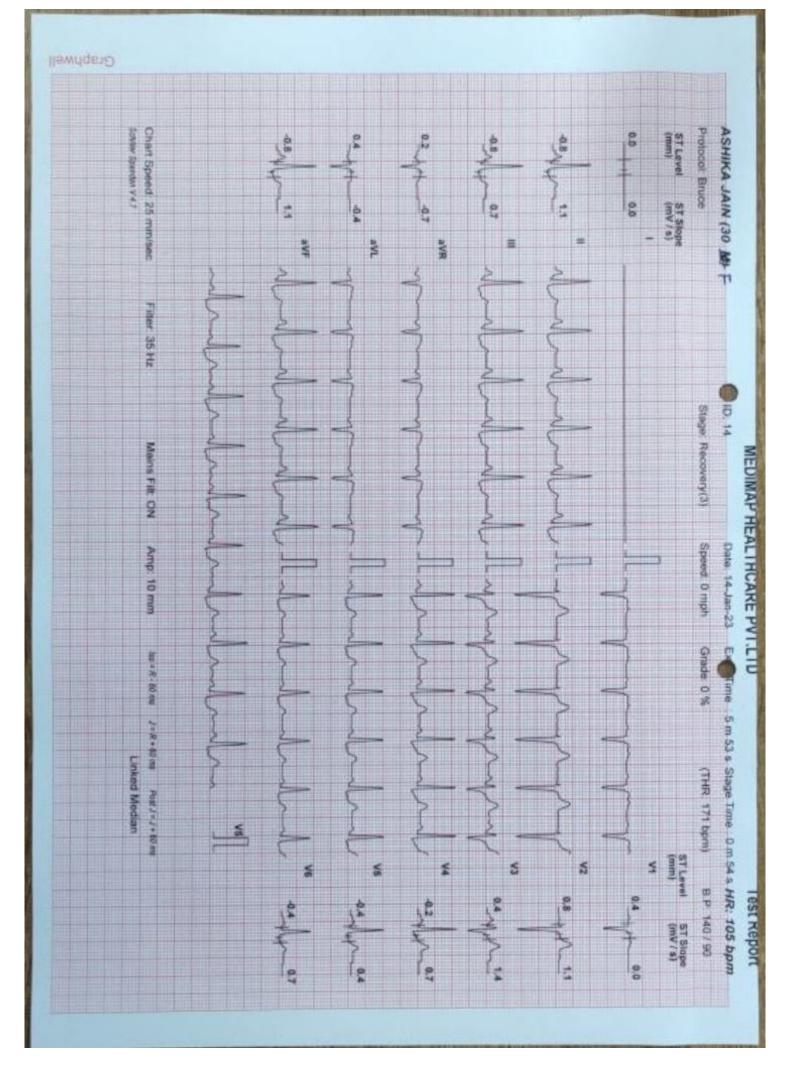


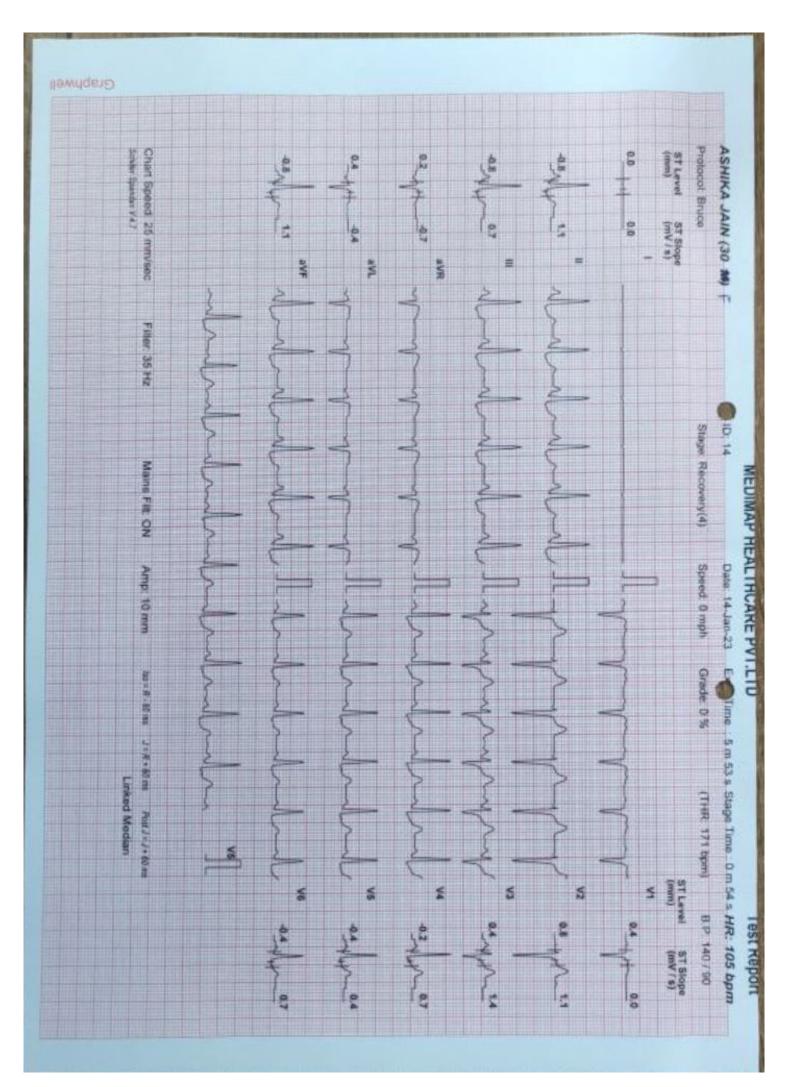












Date: 14-Jan-23         Time: 1:17:14 PM         Moight:157 cms.         Moight:157 cms.         Moight:151 Kg.           Be: M         Hoight:157 cms.         Moight:157 cms.         Moight:157 cms.         Moight:151 Kg.           Sm 53         Fr.MHR:         190 bpm         Max. HR:         190 bpm         Max. Mest: 700 of Pr.MHR) bpm           Sm 63         Max. HR:         190 bpm         Max. HR:         190 bpm         Max. Mest: 2132 mont-gmm           Sm 63         Max. BP x HR:         23960 mm/g/min         Max. ST         Max. Mest: 2132 mont-gmm           Sm 63         Mest:         Speed         Grado         Hant         Max. ST         Max. ST         Max. ST           Stage Time:         Mest:         Speed         Grado         Hont         Max. ST         Max. ST         Max. ST           10         10         0         0         10         100 k0 / 10         0.04 k1         0.04 k1         0.04 k1           10         10         10         10         10.02 k1         10.04 k1         10.04 k1         10.04 k1           10         10         10         10         10.02 k1         10.04 k1         10.04 k1         10.04 k1           10         10         10         10.01 k1<	(Wistoney	Dannianday	Recovery(3)	Decourse 21	Recovered	Deat/Pu	Hyperversiation	Standing	Supine		Stage Name	Protocol Details	Test Termination Criteria:	Max. BP: 140/90 mmHg	Protocol: Bruce	Test Details	Medications:	Age: JU y Clinical History:	Name: ASHIKA JAIN ID: 14	Patient Details
Jan-23         Time: 1:17:14 PM         Weight:157 cms.         Weight:157 cms.           Height:157 cms.         Weight:157 cms.         Weight:157 cms.         Weight:157 cms.           Pr.MHR:         190 bpm         THR: 171 (90 %         Max. HR:         154 (86% of Pr.MHR.) bpm         Max. Mets.           Max. HR:         154 (86% of Pr.MHR.) bpm         Max. ST         Max. Mets.         71 (90 %           Max. HR:         154 (86% of Pr.MHR.) bpm         Max. ST         Max. Mets.         71 (90 %           Max. HR:         154 (86% of Pr.MHR.) bpm         Max. ST         Max. Mets.         71 (90 %           Max. BP x HR:         23960 mmHg/min         Max. ST         Max. Mets.         71 (90 %           10         0         0         10 (10 (10 (10 (10 (10 (10 (10 (10 (10 (				21210		6 . S	A DOWN	244-0.1	a manufacture of the	(min : sec)	Stage Time		teria:	5 m 53 s mHg				Sex: N	1111	Date: 1
Time: 1:17:14 PM           Height:157 cms.         Weight:51 Kg.           Pr.MHR:         190 bpm         THR: 171 (90 %           Max. HR:         150 kpm         THR: 171 (90 %           Max. HR:         150 kpm         Max. BP           Max. BP x HR:         22960 mmHg/min         Max. Mets:           Cmph)         CM         Rate         Max. BP           Max. BP x HR:         156 / 90         Cevel         Max. Mets:           0         85         126 / 90         Cevel         Max. ST           (mph)         CM         126 / 90         Cevel         Stope           0         10         142         126 / 90         Cevel         Stope           1         100         100 / 90         5.52 / 95         5.91 / 9         5.91 / 9           1         100         104         140 / 90         1.91 / 1         1.95 / 2           1         0         1.92 / 90         0.85 / 1         1.92 / 2           1         0         1.92 / 90         0.85 /	1.0	• •	1.0		8	4.0	0.1	10	1.0		Mets									14-Jan-2
Image: 1:17:14 PM         Weight:51 Kg.           eight:157 cms.         Weight:51 Kg.           190 bpm.         THR: 171 (90 %           194 (86%. of Pr.MHR ) bpm.         Max. ST           194 (86%. of Pr.MHR ) bpm.         Max. Mets: 71           194 (86%. of Pr.MHR ) bpm.         Max. ST           194 (86%. of Pr.MHR ) bpm.         Max. Mets: 71           194 (86%. of Pr.MHR ) bpm.         Max. ST           195 (80)         Max. ST           196 (90)         Max. ST           197 (90 %         Max. ST           198 (90,10)         0.64.0           199 (90)         0.64.0           190 (90)         0.64.0           190 (90)         5.52.V5           194 (90) (90)         5.52.V5           195 (90)         0.485.0           190 (90)         4.51.1           190 (90)         4.52.V5           190 (90)         4.53.0           190 (90)         4.55.1           190 (90)         4.85.1           190 (90)         4.85.1           190 (90)         4.85.1           190 (90)         4.85.1           190 (90)         4.85.1           190 (90)         4.85.1	c	5	ö.	> •	- 44	3.7	0	0	0	(mph)	Speed				-					ω
Image: 1:17:14 PM         Weight: 57 cms, Weight: 51 Kg.           eight: 157 cms, Methods, Method	e	2	0 0	5 4	0 8	10	0	0	0	(%)	Grade			Max. HR:	PEMHR:			I		T
A         Weight:51 Kg.           Weight:51 Kg.         THR: 171 (90 %           YMHR ) bpm         Max. Mets: 7/4           ImmHg/min         Max. ST           NMR. ST         Stope           NMN. BP x HR:         106 AVF           180         -0.64 II           -0.65 II         0.71 V2           190         -5.52 V5         5.66 V3           190         -1.91 II         4.95 V2           190         -0.85 II         1.389 V2           190         -0.85 II         1.42 V3	104		104	11	8 9	142	101	86	82	Rate (bpm)				104 (原	190 bpr			eight:15;		me: 1:17
Weight:51 Kg. THR: 171 (90 % Max. Mets: 7:1 Min. BP x HR: Stope 1 071 V2 V4 1.06 aVF 1 0.71 V2 V5 5.31 V5 5.31 V5 5.31 V5 1 4.95 V2 1 3.89 V2 1 2.12 V3	06/041	AND INCOME.	140/90	VOI UNA	140 100	1307.25	126780	126780	126/80		Max. BP			2960 mmHol				7 cms.		14 PM
71 (90 % xHR: 71	1000	-			EA 70-0-	-0.94 VS	-0.85 II	-1.06 V4	-0.64 II	Level (mm)	Max. ST			t) bpm				Diem		
	142 V3		212 13	ALCO P	4 04 1/3	531V5	0.71/2	1.06 aVF	0.71 V2	Slope (mV/s)	Max. ST				THR: 171 (90 % of Pt			htist Kg.		

