

Name : Mr. AMARNATH
PID No. : MED111444697
SID No. : 423000634
Age / Sex : 39 Year(s) / Male
Type : OP
Ref. Dr : MediWheel

Register On : 05/01/2023 10:09 AM
Collection On : 05/01/2023 10:10 AM
Report On : 05/01/2023 4:38 PM
Printed On : 19/01/2023 7:53 PM

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

HAEMATOLOGY

Complete Blood Count With - ESR

Haemoglobin (EDTA Blood/Spectrophotometry)	13.1	g/dL	13.5 - 18.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood)	40.4	%	42 - 52
RBC Count (EDTA Blood)	4.68	mill/cu.mm	4.7 - 6.0
Mean Corpuscular Volume(MCV) (EDTA Blood)	86.3	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood)	28.1	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood)	32.6	g/dL	32 - 36
RDW-CV (EDTA Blood)	12.7	%	11.5 - 16.0
RDW-SD (EDTA Blood)	38.36	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood)	7900	cells/cu.mm	4000 - 11000
Neutrophils (EDTA Blood)	59.3	%	40 - 75
Lymphocytes (EDTA Blood)	25.4	%	20 - 45
Eosinophils (EDTA Blood)	6.2	%	01 - 06
Monocytes (EDTA Blood)	8.6	%	01 - 10


Dr Anusha.K.S
Sr.Consultant Pathologist
Reg No : 100674
APPROVED BY

Name : Mr. AMARNATH
PID No. : MED111444697 Register On : 05/01/2023 10:09 AM
SID No. : 423000634 Collection On : 05/01/2023 10:10 AM
Age / Sex : 39 Year(s) / Male Report On : 05/01/2023 4:38 PM
Type : OP Printed On : 19/01/2023 7:53 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Basophils (Blood)	0.5	%	00 - 02
INTERPRETATION: Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.			
Absolute Neutrophil count (EDTA Blood)	4.68	10 ³ / µl	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood)	2.01	10 ³ / µl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood)	0.49	10 ³ / µl	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood)	0.68	10 ³ / µl	< 1.0
Absolute Basophil count (EDTA Blood)	0.04	10 ³ / µl	< 0.2
Platelet Count (EDTA Blood)	228	10 ³ / µl	150 - 450
MPV (EDTA Blood)	8.2	fL	7.9 - 13.7
PCT (EDTA Blood/Automated Blood cell Counter)	0.19	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citrate Blood)	9	mm/hr	< 15


Dr Anusha.K.S
Sr.Consultant Pathologist
Reg No : 100674

APPROVED BY

Name : Mr. AMARNATH
PID No. : MED111444697 Register On : 05/01/2023 10:09 AM
SID No. : 423000634 Collection On : 05/01/2023 10:10 AM
Age / Sex : 39 Year(s) / Male Report On : 05/01/2023 4:38 PM
Type : OP Printed On : 19/01/2023 7:53 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

BIOCHEMISTRY

Liver Function Test

Bilirubin(Total) (Serum/DCA with ATCS)	0.31	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.10	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.21	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	12.92	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	17.52	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	18.50	U/L	< 55
Alkaline Phosphatase (SAP) (Serum/Modified IFCC)	55.5	U/L	53 - 128
Total Protein (Serum/Biuret)	6.92	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.32	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.60	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.66		1.1 - 2.2


Dr Anusha.K.S
Sr.Consultant Pathologist
Reg No : 100674
APPROVED BY

Name : Mr. AMARNATH
PID No. : MED111444697 **Register On** : 05/01/2023 10:09 AM
SID No. : 423000634 **Collection On** : 05/01/2023 10:10 AM
Age / Sex : 39 Year(s) / Male **Report On** : 05/01/2023 4:38 PM
Type : OP **Printed On** : 19/01/2023 7:53 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>Lipid Profile</u>			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	202.13	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	204.61	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 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.

HDL Cholesterol (Serum/Immunoinhibition)	36.30	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	124.9	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	40.9	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	165.8	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220


Dr Anusha.K.S
 Sr.Consultant Pathologist
 Reg No : 100674
APPROVED BY

Name : Mr. AMARNATH
PID No. : MED111444697 **Register On** : 05/01/2023 10:09 AM
SID No. : 423000634 **Collection On** : 05/01/2023 10:10 AM
Age / Sex : 39 Year(s) / Male **Report On** : 05/01/2023 4:38 PM
Type : OP **Printed On** : 19/01/2023 7:53 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

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.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	5.6		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
---	-----	--	--

Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	5.6		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
--	-----	--	--

LDL/HDL Cholesterol Ratio (Serum/Calculated)	3.4		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
---	-----	--	---


Dr Anusha.K.S
 Sr.Consultant Pathologist
 Reg No : 100674
APPROVED BY

Name : Mr. AMARNATH
PID No. : MED111444697 Register On : 05/01/2023 10:09 AM
SID No. : 423000634 Collection On : 05/01/2023 10:10 AM
Age / Sex : 39 Year(s) / Male Report On : 05/01/2023 4:38 PM
Type : OP Printed On : 19/01/2023 7:53 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>Glycosylated Haemoglobin (HbA1c)</u>			
HbA1C (Whole Blood/HPLC)	5.6	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 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 114.02 mg/dL
(Whole Blood)

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 glycaemic 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.


Dr Anusha.K.S
Sr.Consultant Pathologist
Reg No : 100674
APPROVED BY

Name : Mr. AMARNATH
PID No. : MED111444697 **Register On** : 05/01/2023 10:09 AM
SID No. : 423000634 **Collection On** : 05/01/2023 10:10 AM
Age / Sex : 39 Year(s) / Male **Report On** : 05/01/2023 4:38 PM
Type : OP **Printed On** : 19/01/2023 7:53 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

IMMUNOASSAY

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/ECLIA)	1.01	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)	8.03	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)	2.28	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

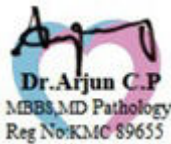
(Indian Thyroid Society Guidelines)

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&lt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.



APPROVED BY

Name : Mr. AMARNATH
PID No. : MED111444697 **Register On** : 05/01/2023 10:09 AM
SID No. : 423000634 **Collection On** : 05/01/2023 10:10 AM
Age / Sex : 39 Year(s) / Male **Report On** : 05/01/2023 4:38 PM
Type : OP **Printed On** : 19/01/2023 7:53 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

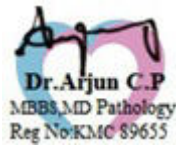
CLINICAL PATHOLOGY

PHYSICAL EXAMINATION (URINE COMPLETE)

Colour (Urine)	Yellow		Yellow to Amber
Appearance (Urine)	Clear		Clear
Volume(CLU) (Urine)	20		

CHEMICAL EXAMINATION (URINE COMPLETE)

pH (Urine)	5.5		4.5 - 8.0
Specific Gravity (Urine)	1.019		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



APPROVED BY

Name : Mr. AMARNATH
PID No. : MED111444697 **Register On** : 05/01/2023 10:09 AM
SID No. : 423000634 **Collection On** : 05/01/2023 10:10 AM
Age / Sex : 39 Year(s) / Male **Report On** : 05/01/2023 4:38 PM
Type : OP **Printed On** : 19/01/2023 7:53 PM
Ref. Dr : MediWheel

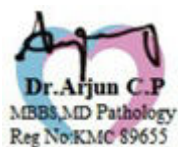
<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Glucose (Urine/GOD - POD)	Negative		Negative
Leukocytes(CP) (Urine)	Negative		

MICROSCOPIC EXAMINATION
(URINE COMPLETE)

Pus Cells (Urine)	0-2	/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.

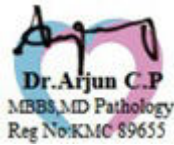
Casts (Urine)	NIL	/hpf	NIL
Crystals (Urine)	NIL	/hpf	NIL



APPROVED BY

Name : Mr. AMARNATH
PID No. : MED111444697 **Register On** : 05/01/2023 10:09 AM
SID No. : 423000634 **Collection On** : 05/01/2023 10:10 AM
Age / Sex : 39 Year(s) / Male **Report On** : 05/01/2023 4:38 PM
Type : OP **Printed On** : 19/01/2023 7:53 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>PHYSICAL EXAMINATION(STOOL COMPLETE)</u>			
Mucus (Stool)	Absent		Absent
Consistency (Stool)	Semi Solid		Semi Solid to Solid
Colour (Stool)	Brown		Brown
Blood (Stool)	Absent		Absent
<u>MICROSCOPIC EXAMINATION(STOOL COMPLETE)</u>			
Ova (Stool)	NIL		NIL
Cysts (Stool)	NIL		NIL
Trophozoites (Stool)	NIL		NIL
RBCs (Stool)	NIL	/hpf	Nil
Pus Cells (Stool)	1-2	/hpf	NIL
Others (Stool)	NIL		
<u>CHEMICAL EXAMINATION(STOOL ROUTINE)</u>			
Reaction (Stool)	Acidic		Alkaline



APPROVED BY

Name : Mr. AMARNATH

PID No. : MED111444697

SID No. : 423000634

Age / Sex : 39 Year(s) / Male

Type : OP

Ref. Dr : MediWheel

Register On : 05/01/2023 10:09 AM

Collection On : 05/01/2023 10:10 AM

Report On : 05/01/2023 4:38 PM

Printed On : 19/01/2023 7:53 PM

Investigation

Reducing Substances
(Stool/Benedict's)

**Observed
Value**

Negative

Unit

**Biological
Reference Interval**

Negative



APPROVED BY

Name : Mr. AMARNATH

PID No. : MED111444697

Register On : 05/01/2023 10:09 AM

SID No. : 423000634

Collection On : 05/01/2023 10:10 AM

Age / Sex : 39 Year(s) / Male

Report On : 05/01/2023 4:38 PM

Type : OP

Printed On : 19/01/2023 7:53 PM

Ref. Dr : MediWheel

Investigation

Observed
Value

Unit

Biological
Reference Interval

IMMUNOHAEMATOLOGY

BLOOD GROUPING AND Rh TYPING
(EDTA Blood/Agglutination)

'A' Positive'


Dr Anusha.K.S
Sr.Consultant Pathologist
Reg No : 100674

APPROVED BY

Name : Mr. AMARNATH
PID No. : MED111444697 **Register On** : 05/01/2023 10:09 AM
SID No. : 423000634 **Collection On** : 05/01/2023 10:10 AM
Age / Sex : 39 Year(s) / Male **Report On** : 05/01/2023 4:38 PM
Type : OP **Printed On** : 19/01/2023 7:53 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>BIOCHEMISTRY</u>			
BUN / Creatinine Ratio	18.0		6.0 - 22.0
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	97.83	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 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) (Urine - F/GOD - POD)	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP)	88.50	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.

Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	15.9	mg/dL	7.0 - 21
Creatinine (Serum/Modified Jaffe)	0.88	mg/dL	0.9 - 1.3

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 (Serum/Enzymatic)	6.56	mg/dL	3.5 - 7.2
--------------------------------	------	-------	-----------


Dr Anusha.K.S
 Sr.Consultant Pathologist
 Reg No : 100674
APPROVED BY

Name : Mr. AMARNATH
PID No. : MED111444697 Register On : 05/01/2023 10:09 AM
SID No. : 423000634 Collection On : 05/01/2023 10:10 AM
Age / Sex : 39 Year(s) / Male Report On : 05/01/2023 4:38 PM
Type : OP Printed On : 19/01/2023 7:53 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>IMMUNOASSAY</u>			
Prostate specific antigen - Total(PSA) (Serum/Manometric method)	0.276	ng/ml	Normal: 0.0 - 4.0 Inflammatory & Non Malignant conditions of Prostate & genitourinary system: 4.01 - 10.0 Suspicious of Malignant disease of Prostate: > 10.0

INTERPRETATION: Analytical sensitivity: 0.008 - 100 ng/mL

PSA is a tumor marker for screening of prostate cancer. Increased levels of PSA are associated with prostate cancer and benign conditions like bacterial infection, inflammation of prostate gland and benign hypertrophy of prostate/ benign prostatic hyperplasia (BPH).

Transient elevation of PSA levels are seen following digital rectal examination, rigorous physical activity like bicycle riding, ejaculation within 24 hours.

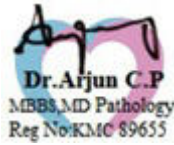
PSA levels tend to increase in all men as they age.

Clinical Utility of PSA:

• In the early detection of Prostate cancer.

• As an aid in discriminating between Prostate cancer and Benign Prostatic disease.

• To detect cancer recurrence or disease progression.



APPROVED BY

-- End of Report --

STS Summary Report

MEDALL CLUMAX

01234567890

Name : **AMARNATH**
 ID : **MED111444697**
 Age,Wt,Ht : **39years(Male), Kg,cm**

Tested on : **05/01/2023,08:37 PM**
 Doctor : **C/O MEDIWHEEL**

BPL DYNATRAC NEO

Test Summary Report

Target HR = 181 Total time = 12:55 Protocol = BRUCE
 HR achieved = 169 (93%) Excercise time = 08:53 Max ST(mm)=4.95(Lead V3)
 Peak Ex = Exercise 3 Recovery time = 03:05 Min ST(mm)=-2.94(Lead V1)

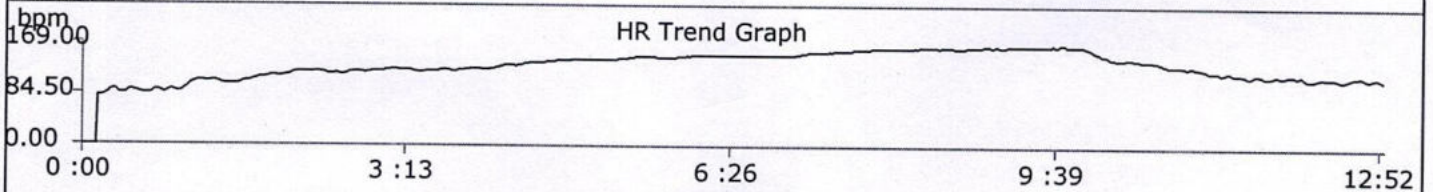
Stagewise Summary

Stage Name	Duration (mm:ss)	Max HR (bpm)	Max ST (mm)	Min ST (mm)	Speed km/hr	Slope (%)	METS	sys/dia (map)
Supine	00:27	91	4.95(V3)	-2.94(V1)	0.0	0.0	0.00	---/---(---)
Waiting for Exercise	00:30	91	1.49(V4)	-1.32(AVR)	0.0	0.0	0.00	---/---(---)
Exercise 1	03:00	127	4.95(V3)	-2.94(V1)	2.7	10.0	5.10	120/80(93)
Exercise 2	03:00	150	2.34(V4)	-1.33(AVR)	4.0	12.0	7.10	126/80(95)
Peak Exercise 3	02:53	169	2.58(V4)	-1.54(AVL)	5.5	14.0	10.00	---/---(---)
Recovery 1	01:00	166	2.49(II)	-1.75(AVR)	5.5	14.0	0.00	120/80(93)
Recovery 2	01:00	134	2.37(V3)	-1.79(AVR)	5.5	14.0	0.00	---/---(---)
Recovery 3	01:00	121	3.09(II)	-2.22(AVR)	5.5	14.0	0.00	120/80(93)
Recovery 4	00:05	117	1.48(II)	-1.08(AVR)	5.5	14.0	0.00	---/---(---)

Rpp: 15240(Exercise 1) ,18900(Exercise 2) ,19920(Recovery 1) ,14520(Recovery 3)

Stage comments: none

Object of test :
 Risk factor :
 Activity :
 Other Investigation :
 Ex tolerance :
 Ex Arrhythmia :
 Hemo Response :
 Chrono response :
 Reason for Termination :



Medication:

History:

Observations:

Final Impression:

Stren Test Negative for Inducible Ischemia

SUBRAMANI.K.S.
 MD, DM (CARDIOLOG)
 Consultant Cardiologist
 KMC REG No : 46604
 Clumax Diagnostics

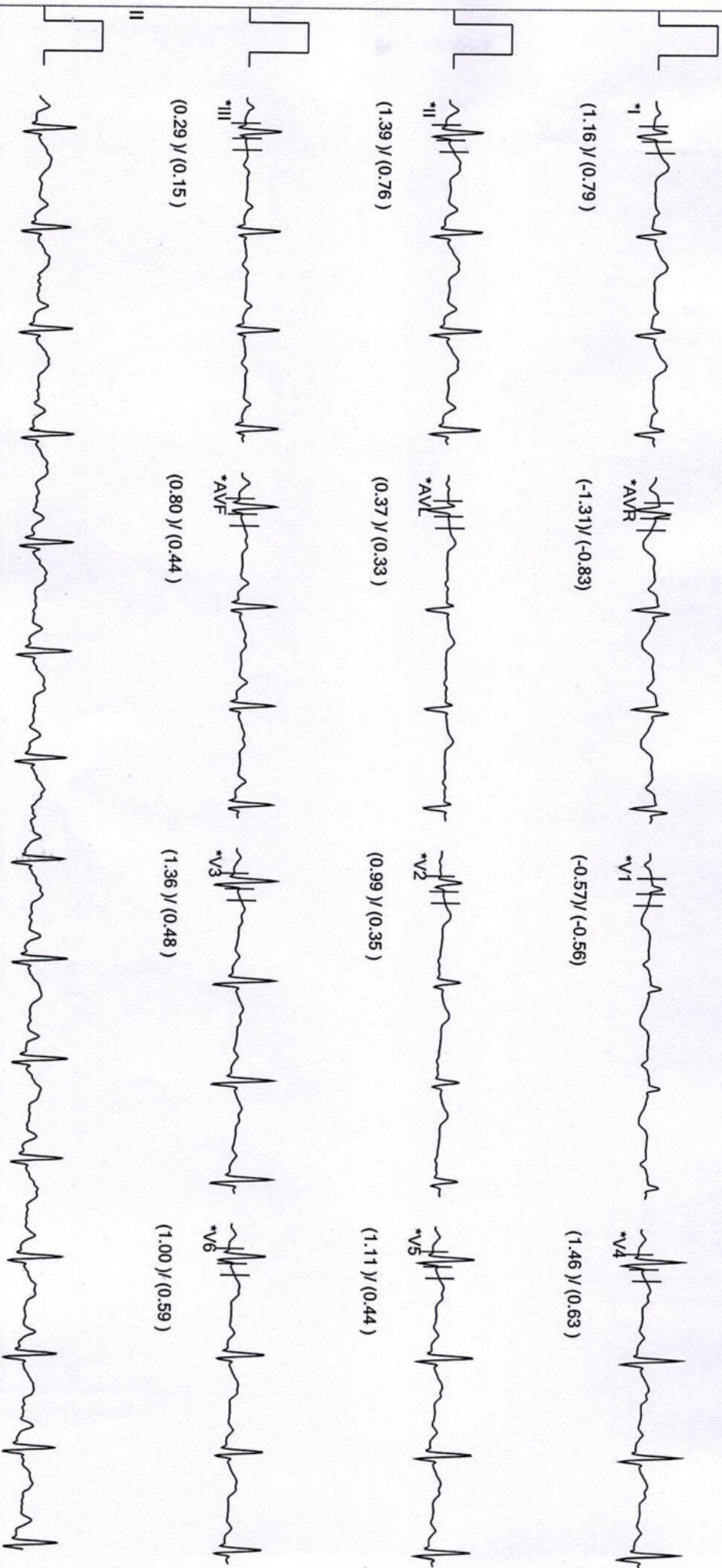
Technician:

Done By:Dr. SUBRAMANI K S Confirmed by -

MEDALL CLUMAX

01234567890

ID : MED111444697	Stage : Supine	Protocol : BRUCE
NAME : AMARNATH	Pre Test Time : 00:27	Speed(Km/h) : 0.0
AGE : 39	Stage Time : 00:27	Test on : 05/01/2023,08:37 PM
NIBP : ---/---(---)	HR : 88 (48%)	Grader(%) : 0.00
ST Level(mm), ST Slope (mV/sec) at 80ms PJ	METS : 0.00	Doctor : C/O MEDIWHEEL
		BPL DYNATRAC NEO



Linked Median Report

MEDALL CLUMAX

01234567890

ID : MED111444697

NAME : AMARNATH

AGE : 39

NIBP : ---/---(---)

ST Level(mm), ST Slope (mV/sec) at 80ms PJ

Stage

Pre Test Time : 00:57

Stage Time : 00:30

HR

: Waiting for Exe .. Protocol

: BRUCE

Speed(Km/h)

: 0.0 Test on : 05/01/2023,08:37 PM

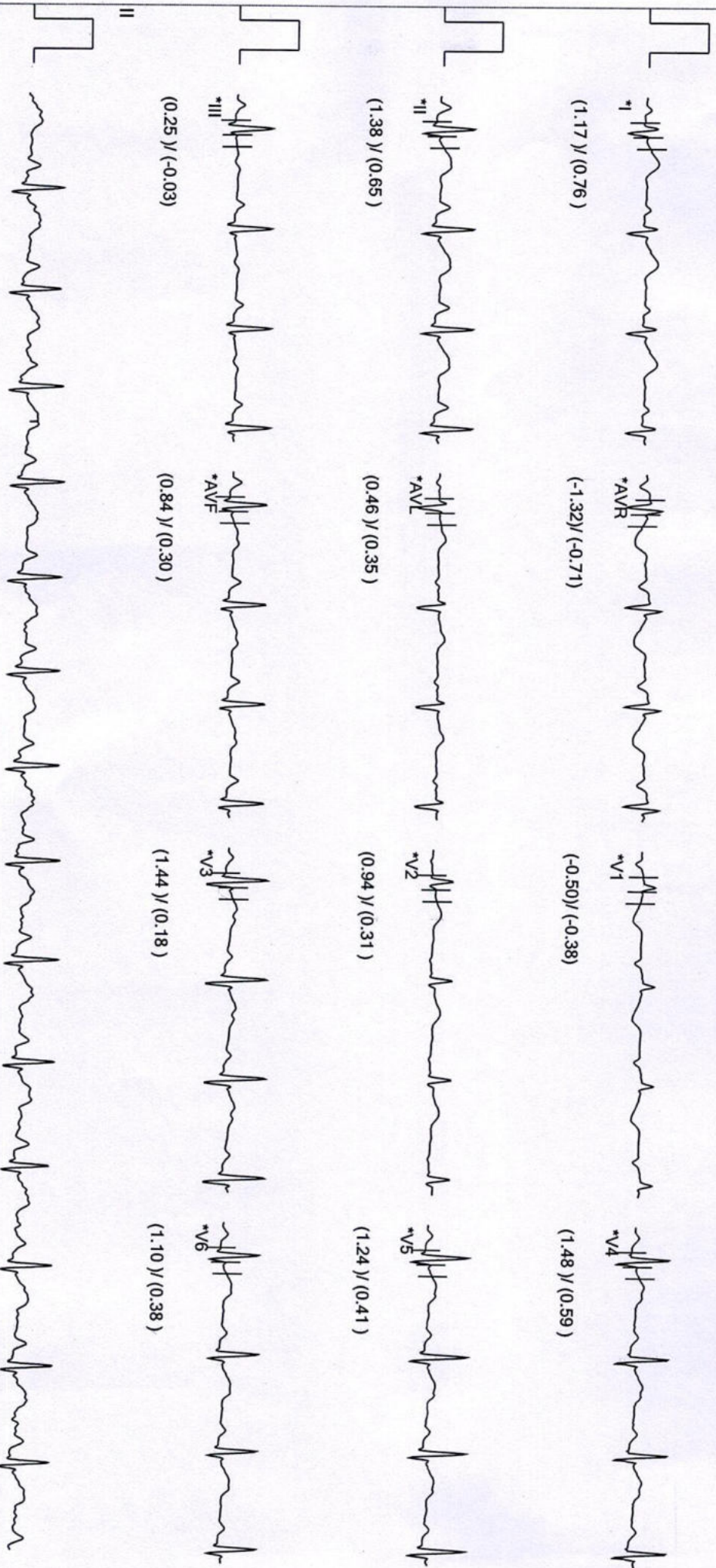
Grade(%)

: 0.00 Doctor : C/O MEDIWHEEL

METS

: 0.00

BPL DYNATRAC NEO



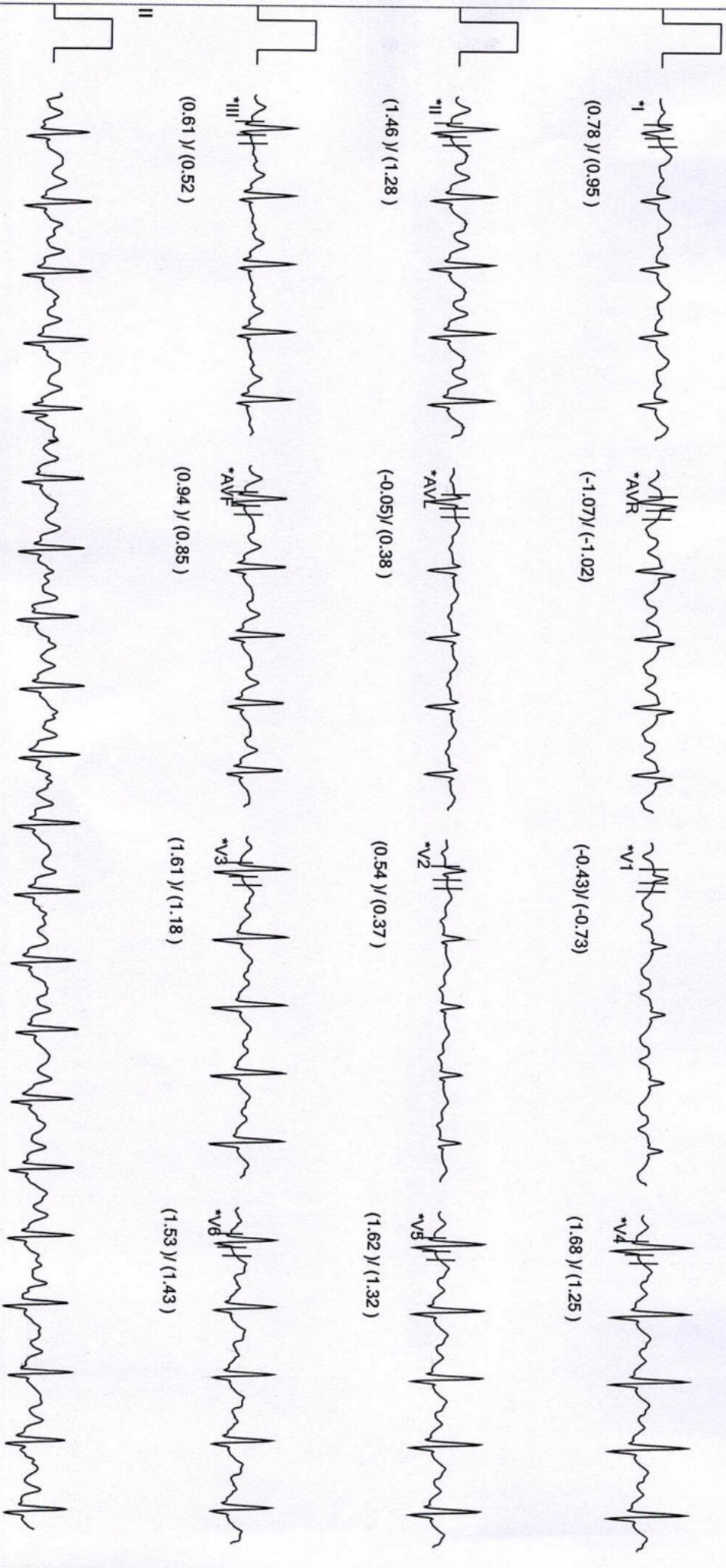
* Waveforms are computer synthesized. Technician: 20Hz filter Gain: 10mm/mV Speed: 25mm/sec

Linked Median Report

MEDALL CLUMAX

01234567890

ID : MED111444697 Stage : Exercise 1 Protocol : BRUCE
NAME : AMARNATH Exercise Time : 03:00 Speed(Km/h) : 2.7 Test on : 05/01/2023,08:37 PM
AGE : 39 Stage Time : 03:00 Grade(%) : 10.00 Doctor : C/O MEDIWHEEL
NIBP : 120/80(93) HR : 127 (70%) METS : 5.10
ST Level(mm), ST Slope (mV/sec) at 60ms PJ BPL DYNATRAC NEO

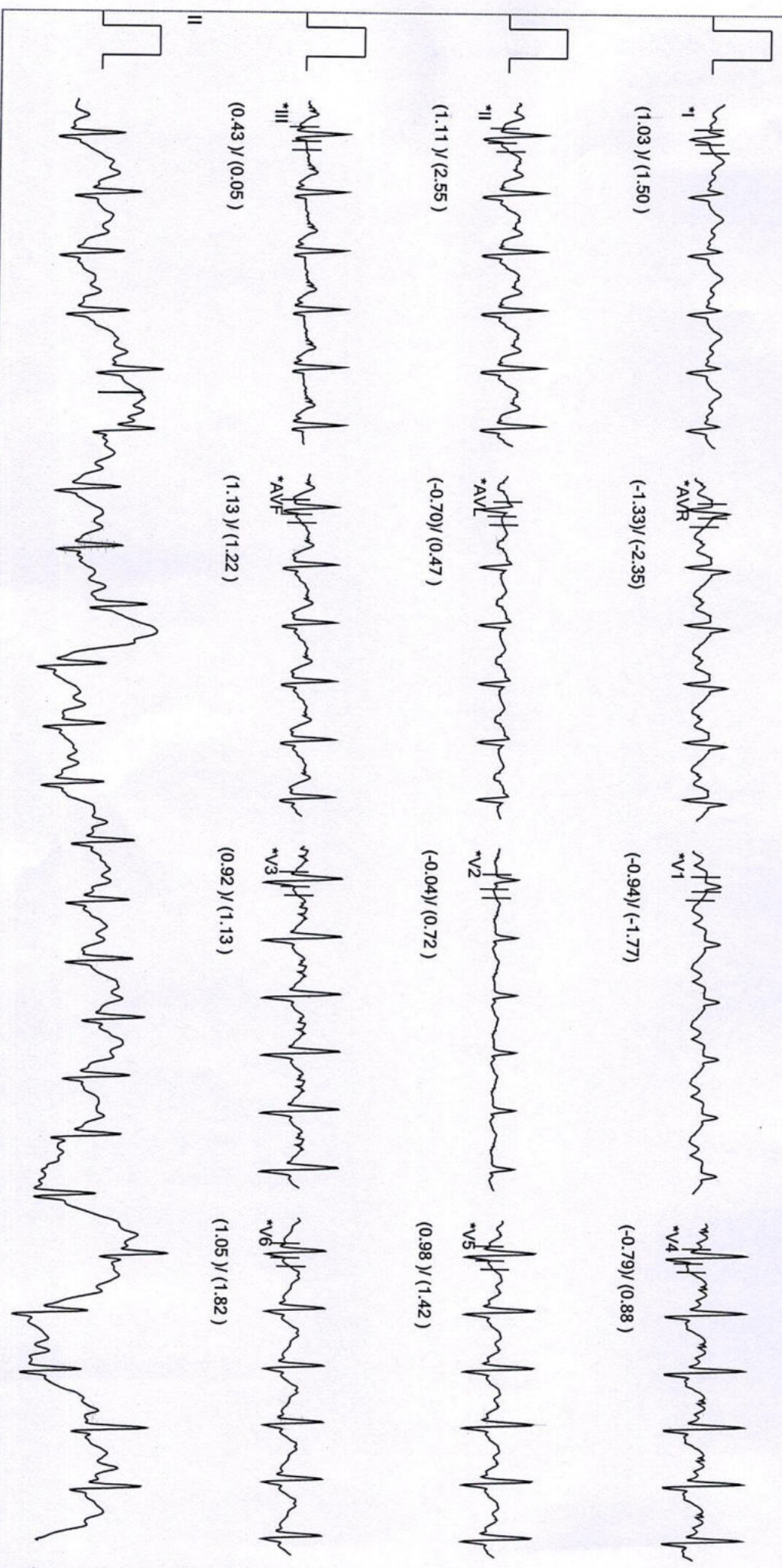


Linked Median Report

MEDALL CLUMAX

01234567890

ID : MED111444697	Stage : Exercise 2	Protocol : BRUCE
NAME : AMARNATH	Exercise Time : 06:00	Speed(Km/h) : 4.0
AGE : 39	Stage Time : 03:00	Grade(%) : 12.00
NIBP : 126/80(95)	HR : 150 (82%)	Doctor : C/O MEDIWHEEL
ST Level(mm), ST Slope (mV/sec) at 60ms PJ		METS : 7.10
		BPL DYNATRAC NEO

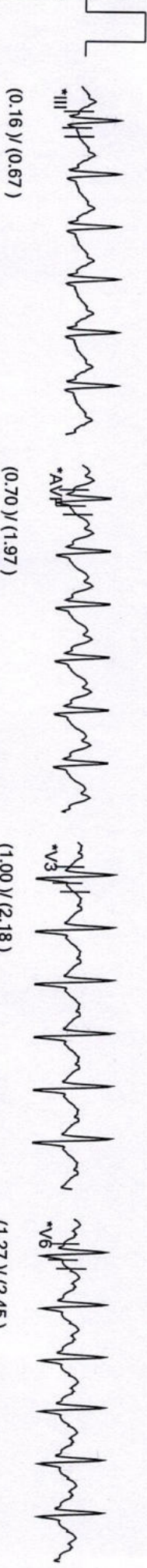
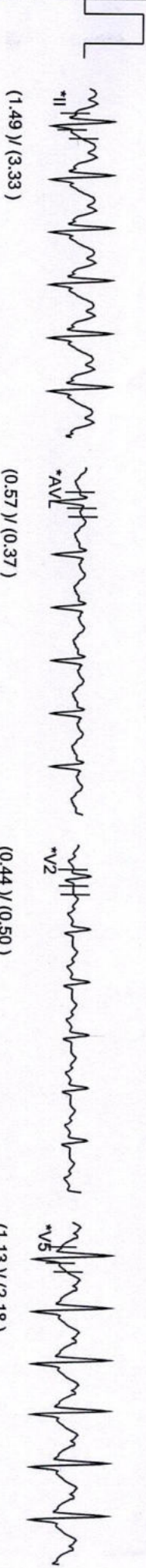
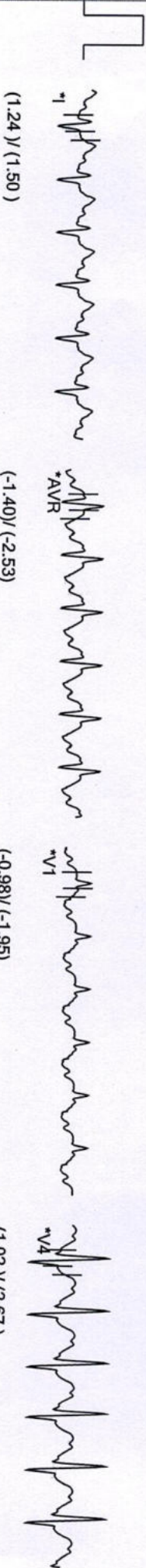


Linked Median Report

MEDALL CLUMAX

01234567890

ID : MED111444697	Stage	Peak Exercise 3	Protocol	BRUCE
NAME : AMARNATH	Exercise Time : 08:53	Speed(Km/h) : 5.5	Test on : 05/01/2023,08:37 PM	
AGE : 39	Stage Time : 02:53	Grade(%) : 14.00	Doctor : C/O MEDIWHEEL	
NIBP : ---/---(---)	HR : 166 (91%)	METS : 10.00	BPL DYNATRAC NEO	
ST Level(mm), ST Slope (mV/sec) at 60ms P1				

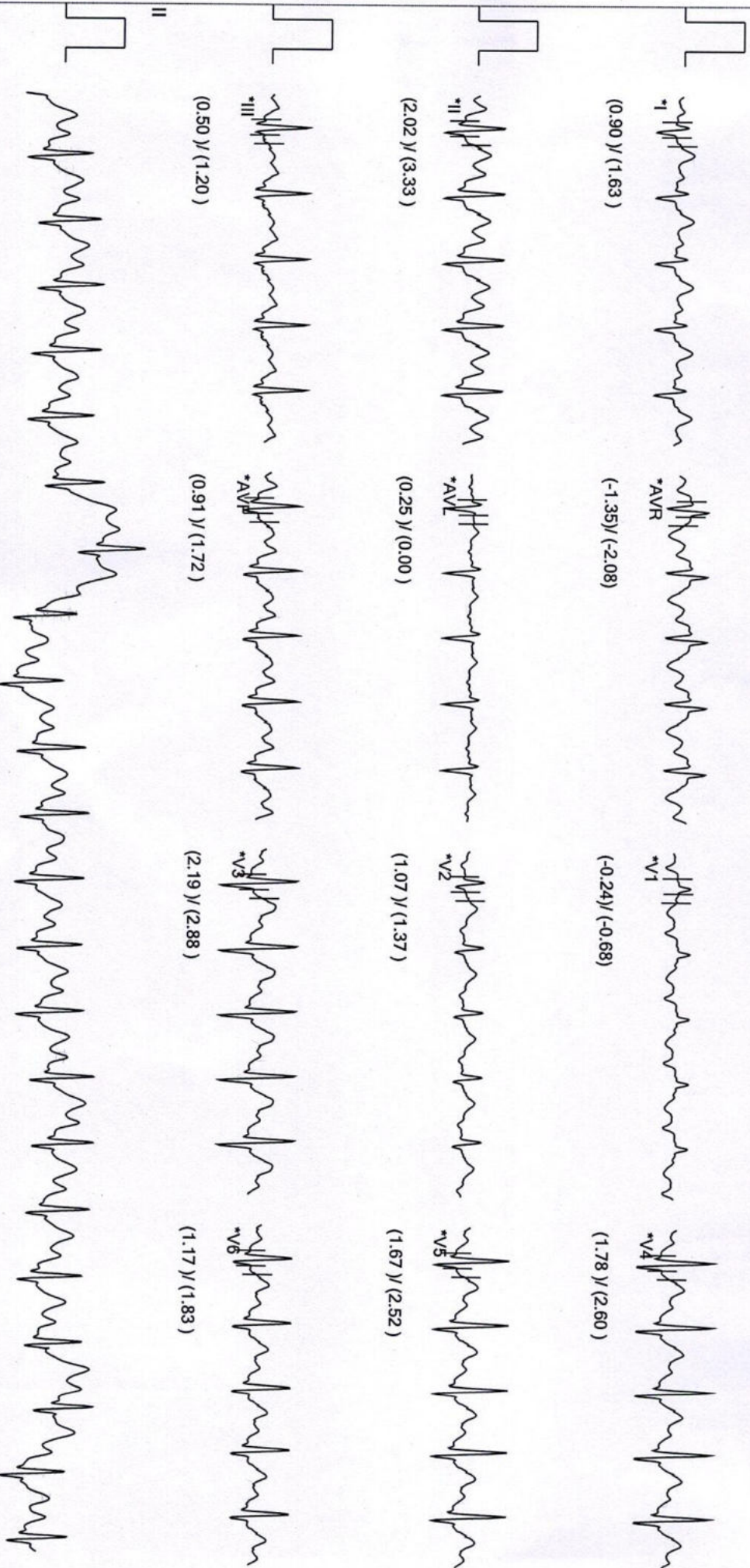


Linked Median Report

MEDALL CLUMAX

01234567890

ID : MED111444697	Stage	Recovery 1	Protocol	: BRUCE
NAME : AMARNATH	Recovery Time	: 01:00	Speed(Km/h)	: 5.5 Test on : 05/01/2023,08:37 PM
AGE : 39	Stage Time	: 01:00	Grade(%)	: 14.00 Doctor : C/O MEDIWHEEL
NIBP : 120/80(93)	HR	: 134 (74%)	METS	: 0.00
ST Level(mm), ST Slope (mV/sec) at 60ms PJ				
BPL DYNATRAC NEO				



* Waveforms are computer synthesized.

Technician:

20Hz filter

Gain: 10mm/mV

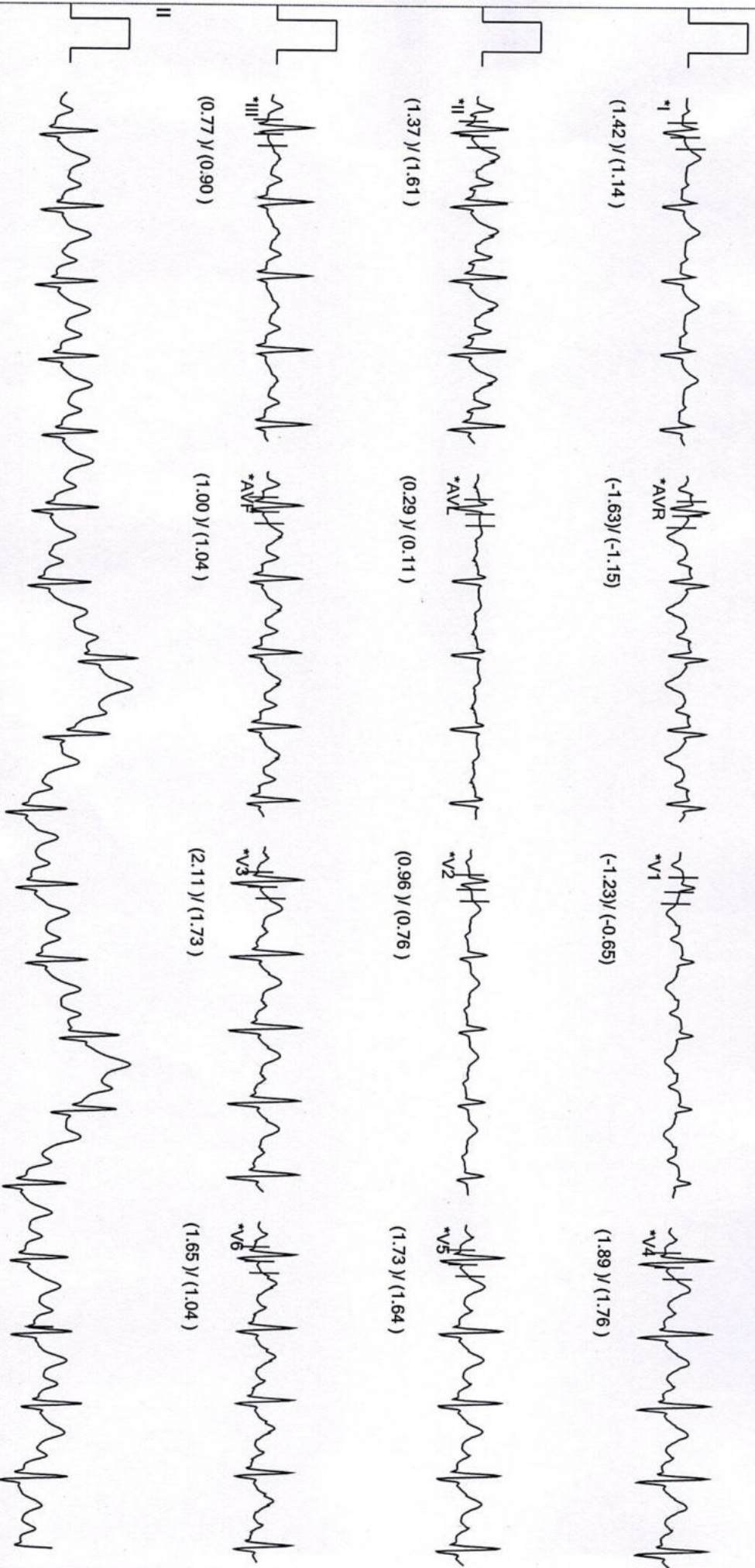
Speed: 25mm/sec

Linked Median Report

MEDALL CLUMAX

01234567890

ID : MED111444697	Stage : Recovery 2	Protocol : BRUCE
NAME : AMARNATH	Recovery Time : 02:00	Speed(Km/h) : 5.5
AGE : 39	Stage Time : 01:00	Test on : 05/01/2023,08:37 PM
NIBP : ---/---(---)	HR : 118 (65%)	Grade(%) : 14.00
ST Level(mm), ST Slope (mV/sec) at 80ms PJ	METS : 0.00	Doctor : C/O MEDIWHEEL
		BPL DYNATRAC NEO



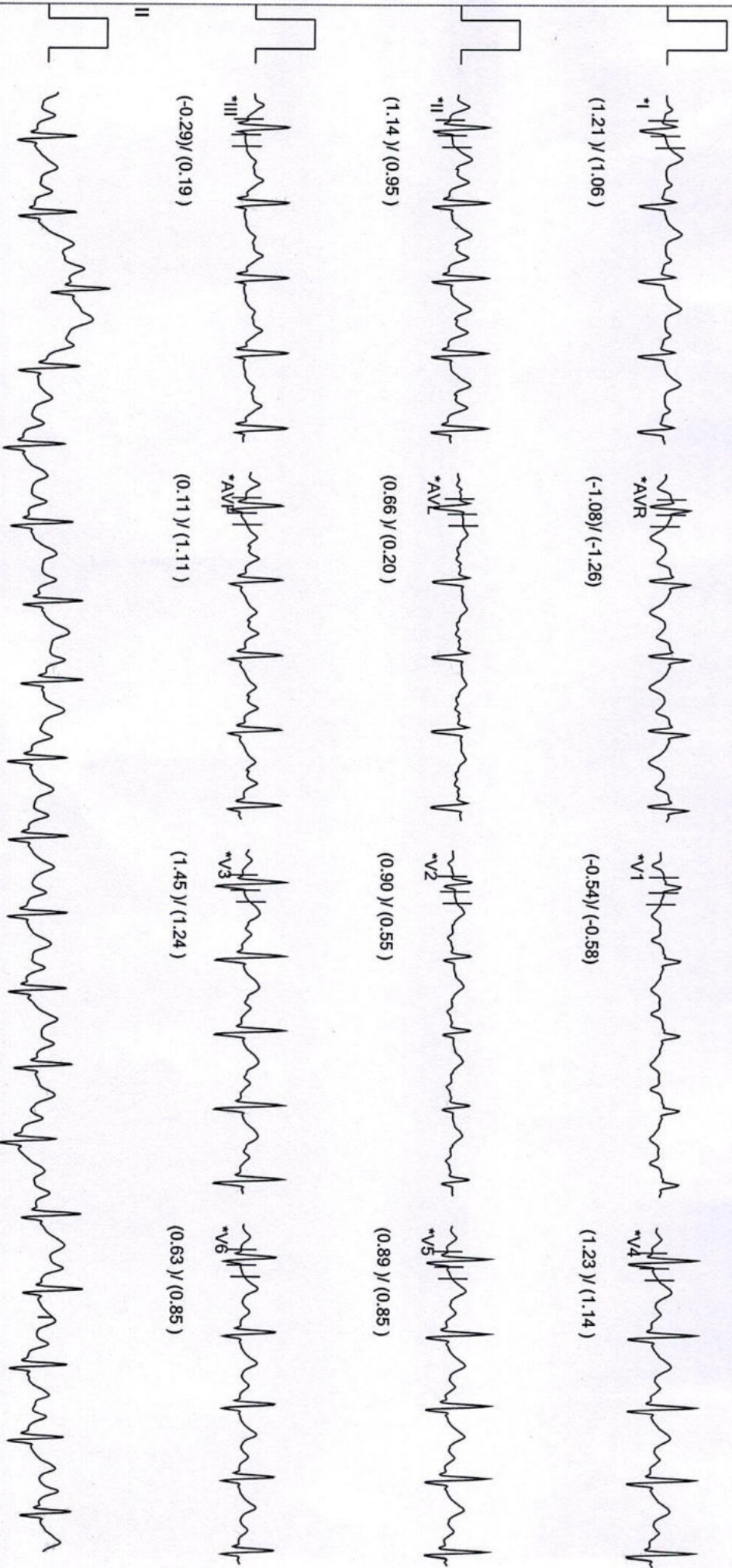
* Waveforms are computer synthesized. Technician: 20Hz filter Gain: 10mm/mV Speed: 25mm/sec

Linked Median Report

MEDALL CLUMAX

01234567890

ID : MED111444697	Stage	Recovery 3	Protocol	BRUCE
NAME : AMARNATH	Recovery Time	: 03:00	Speed(Km/h)	: 5.5 Test on : 05/01/2023,08:37 PM
AGE : 39	Stage Time	: 01:00	Grade(%)	: 14.00 Doctor : C/O MEDIWHEEL
NIBP : 120/80(93)	HR	: 117 (64%)	METS	: 0.00
ST Level(mm), ST Slope (mV/sec) at 80ms PJ				
BPL DYNATRAC NEO				



Name	MR.AMARNATH	ID	MED111444697
Age & Gender	39Y/MALE	Visit Date	05 Jan 2023
Ref Doctor Name	MediWheel		

ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in shape, size 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. Gall bladder 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 shows normal shape, size and echopattern. No demonstrable Para -aortic lymphadenopathy.

KIDNEYS move well with respiration and have normal shape, size and echopattern. Cortico- medullary differentiations are well madeout. No evidence of calculus or hydronephrosis.

The kidney measures as follows:

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	10.7	1.6
Left Kidney	11.7	1.5

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

PROSTATE shows normal shape, size and echopattern. It measures 3.5 x 3.1 x 3.9cms (Vol:22cc).

No evidence of ascites / pleural effusion.

IMPRESSION:

➤ **NO SIGNIFICANT ABNORMALITY DETECTED.**

DR. APARNA
CONSULTANT RADIOLOGIST

A/vp

Name	AMARNATH	Customer ID	MED111444697
Age & Gender	39Y/M	Visit Date	Jan 5 2023 9:51AM
Ref Doctor	MediWheel		

X - RAY CHEST PA VIEW

Bilateral lung fields appear normal.

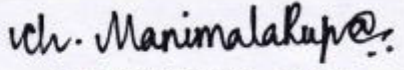
Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

Impression: Essentially normal study.

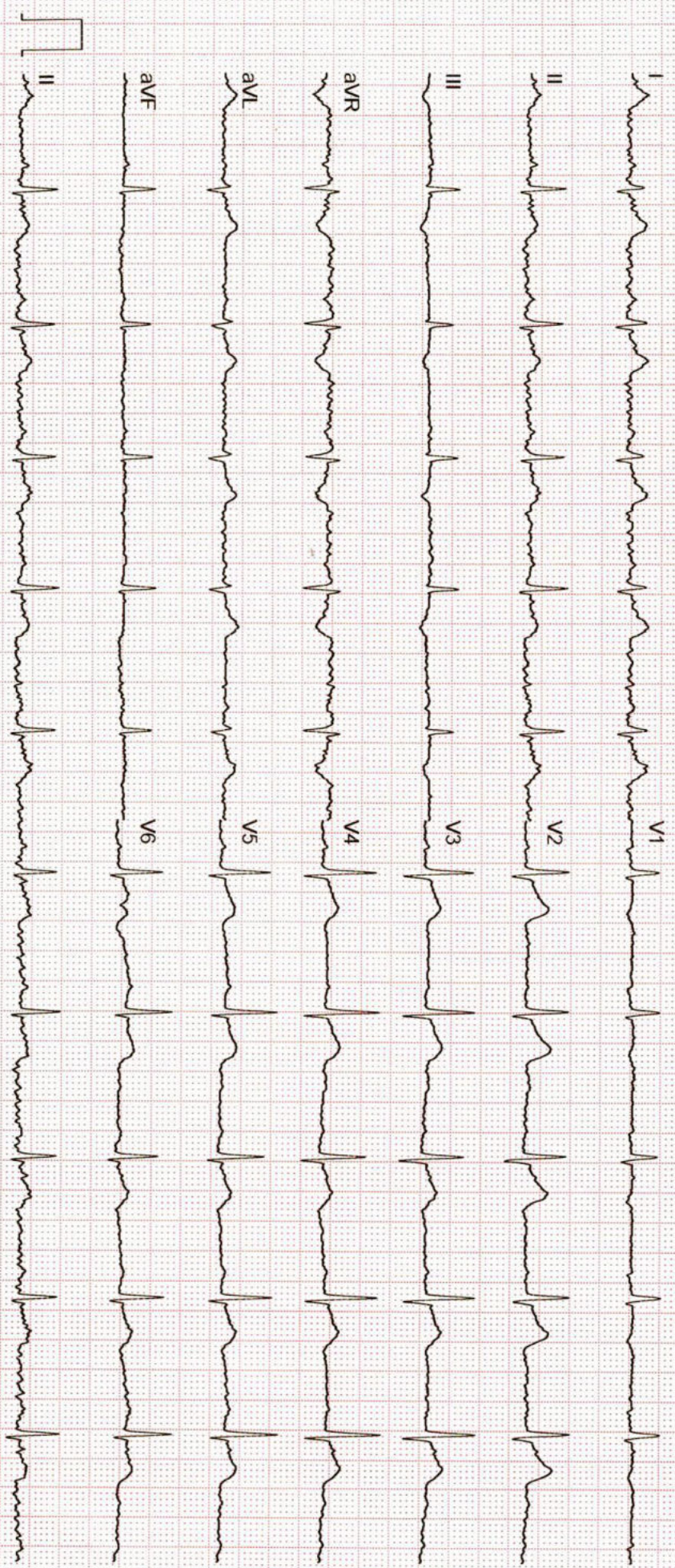

DR. MANIMALA RUPA
CONSULTANT RADIOLOGIST



05.01.2023 10:09:55
CLUMAX DIAGNOSTICS
THIPPASANDRA
BANGALORE

QRS : 72 ms
QT / QTcBaz : 394 / 409 ms
PR : 160 ms

P : 70 ms
RR / PP : 928 / 923 ms
P / QRS / T : 3 / 90 / 12 degrees



SUBRAMANIK.S
MO DM / CARDIOLOGY
Consultant Cardiologist
XMC REG ID : 4664
Clumax Diagnostics

Normal Ecg

65 bpm
--/-- mmHg

Unconfirmed