

ashok kumar

59 years Male Caucasian

Vent. rate 78 bpm
PR interval 194 ms
QRS duration 84 ms
QT/QTc 548/624 ms
P-R-T axes 77 77 85

Technician:
Test ind:

ID:

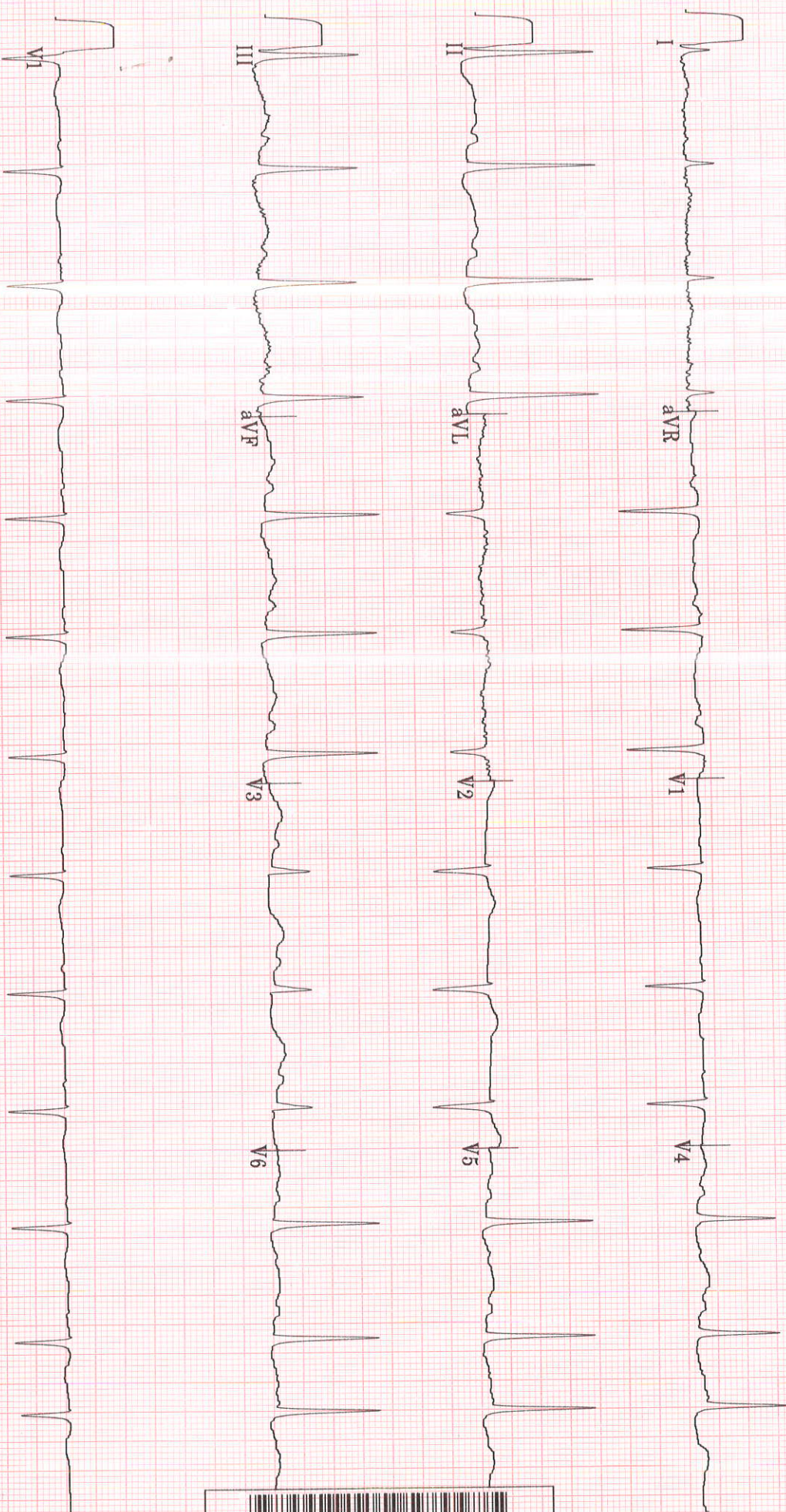
27-May-2023 12:08:41

Manipal Hospitals, Uthaziabad

Sinus rhythm with premature atrial complexes
Nonspecific ST abnormality
Prolonged QT
Abnormal ECG

Referred by:

Unconfirmed



20 Hz 25.0 mm/s 10.0 mm/mV

4 by 2.5s + 1 rhythm ld

MAC35 009C

12SL™ V239





TMT INVESTIGATION REPORT

Patient Name : Ashok KUMAR	Location : Ghaziabad
Age/Sex : 59Year(s)/male	Visit No : V0000000001-GHZB
MRN No 11023153	Order Date : 27/05/2023
Ref. Doctor : HCP	Report Date : 27/05/2023

Protocol : Bruce **MPHR** : 161BPM
Duration of exercise : 5min 0sec **85% of MPHR** : 136BPM
Reason for termination : THR achieved **Peak HR Achieved** : 137BPM
Blood Pressure (mmHg) : Baseline BP : 156/80mmHg **% Target HR** : 85%
Peak BP : 164/80mmHg **METS** : 7.0METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	73	156/80	Nil	No ST changes seen	Nil
STAGE 1	3:00	122	164/80	Nil	No ST changes seen	Nil
STAGE 2	2:00	137	164/80	Nil	No ST changes seen	Nil
RECOVERY	5:39	78	160/80	Nil	No ST changes seen	Nil

COMMENTS:

- No ST changes in base line ECG.
- No ST changes during test and recovery.
- Normal chronotropic response.
- Normal blood pressure response.
- Fair effort tolerance.

IMPRESSION:

Treadmill test is **negative** for exercise induced reversible myocardial ischemia.

Dr. Bhupendra SinghMD, DM (CARDIOLOGY),FACC
Sr. Consultant Cardiology**Dr. Abhishek Singh**MD, DNB (CARDIOLOGY),MNAMS
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LABORATORY REPORT

Name	: MR ASHOK KUMAR	Age	: 58 Yr(s) Sex :Male
Registration No	: MH011023153	Lab No	: 202305003288
Patient Episode	: H18000000593	Collection Date	: 27 May 2023 12:00
Referred By	: HEALTH CHECK MGD	Reporting Date	: 29 May 2023 12:08
Receiving Date	: 27 May 2023-12:00		

CLINICAL PATHOLOGY

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction[pH]	8.0	(4.6-8.0)
Specific Gravity	1.010	(1.003-1.035)

CHEMICAL EXAMINATION

Protein/Albumin	Negative	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	Negative	(NEGATIVE)
Urobilinogen	Normal	(NORMAL)

MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells	1-2 /hpf	(0-5/hpf)
RBC	NIL	(0-2/hpf)
Epithelial Cells	NIL /hpf	
CASTS	NIL	
Crystals	NIL	
OTHERS	NIL	

LABORATORY REPORT

Name : MR ASHOK KUMAR Age : 58 Yr(s) Sex : Male
Registration No : MH011023153 Lab No : 202305003288
Patient Episode : H18000000593 Collection Date : 27 May 2023 09:51
Referred By : HEALTH CHECK MGD Reporting Date : 29 May 2023 12:31
Receiving Date : 27 May 2023 12:00

BLOOD BANK

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Blood Group & Rh Typing (Agglutination by gel/tube technique)			Specimen-Blood
Blood Group & Rh typing	A Rh(D) Positive		

Technical note:

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

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-----END OF REPORT-----


Dr. Alka Dixit Vats
Consultant Pathologist

RADIOLOGY REPORT

NAME	MR Ashok KUMAR	STUDY DATE	27/05/2023 12:02PM
AGE / SEX	58 y / M	HOSPITAL NO.	MH011023153
ACCESSION NO.	R5592903	MODALITY	US
REPORTED ON	27/05/2023 12:32PM	REFERRED BY	HEALTH CHECK MGD

USG ABDOMEN & PELVIS**FINDINGS**

LIVER: appears enlarged in size (measures 170 mm) but normal in shape and shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 78 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 8.7 mm.

COMMON BILE DUCT: Appears normal in size and measures 4.1 mm.

IVC, HEPATIC VEINS: Normal.

BILIARY SYSTEM: Normal.

GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.

Right Kidney: measures 84 x 55 mm.

Left Kidney: measures 95 x 44 mm.

PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged.

FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PROSTATE: Prostate is normal in size, shape and echotexture. It measures 33 x 24 x 22 mm with volume 9 cc. Rest normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

- Hepatomegaly with diffuse grade I fatty infiltration in liver.

Recommend clinical correlation.



Dr. Monica Shekhawat MBBS, DNB

CONSULTANT RADIOLOGIST

*****End Of Report*****

RADIOLOGY REPORT

NAME	MR Ashok KUMAR	STUDY DATE	27/05/2023 10:15AM
AGE / SEX	58 y / M	HOSPITAL NO.	MH011023153
ACCESSION NO.	R5592902	MODALITY	CR
REPORTED ON	27/05/2023 10:51AM	REFERRED BY	HEALTH CHECK MGD

X-RAY CHEST PA VIEW

FINDINGS

LUNGS: Normal
TRACHEA: Normal
CARINA: Normal
RIGHT AND LEFT MAIN BRONCHI: Normal
PLEURA: Normal
HEART: Normal
RIGHT HEART BORDER: Normal
LEFT HEART BORDER: Normal
PULMONARY BAY: Normal
PULMONARY HILA: Normal
AORTA: Knuckle calcification is seen
THORACIC SPINE: Normal
OTHER VISUALIZED BONES: Normal
VISUALIZED SOFT TISSUES: Normal
DIAPHRAGM: Normal
VISUALIZED ABDOMEN: Normal
VISUALIZED NECK: Normal

IMPRESSION

No significant abnormality seen.

Please correlate clinically

Prabhat

Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS (FRCR 2A)
CONSULTANT RADIOLOGIST

RADIOLOGY REPORT

NAME	MR Ashok KUMAR	STUDY DATE	27/05/2023 10:15AM
AGE / SEX	58 y / M	HOSPITAL NO.	MH011023153
ACCESSION NO.	R5592902	MODALITY	CR
REPORTED ON	27/05/2023 10:51AM	REFERRED BY	HEALTH CHECK MGD

*****End Of Report*****

LABORATORY REPORT

Name	: MR ASHOK KUMAR	Age	: 58 Yr(s) Sex : Male
Registration No	: MH011023153	Lab No	: 202305003288
Patient Episode	: H18000000593	Collection Date	: 27 May 2023 09:51
Referred By	: HEALTH CHECK MGD	Reporting Date	: 27 May 2023 11:42
Receiving Date	: 27 May 2023 12:00		

HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)		SPECIMEN-EDTA Whole Blood	
RBC COUNT (IMPEDEANCE)	5.07	millions/cumm	[4.50-5.50]
HEMOGLOBIN	12.8	g/dl	[12.0-16.0]
Method: cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	40.2	%	[40.0-50.0]
MCV (DERIVED)	79.3 #	fL	[83.0-101.0]
MCH (CALCULATED)	25.2 #	pg	[27.0-32.0]
MCHC (CALCULATED)	31.8	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	14.3 #	%	[11.6-14.0]
Platelet count	281	x 10 ³ cells/cumm	[150-400]
MPV (DERIVED)	11.4		
WBC COUNT (TC) (IMPEDEANCE)	8.96	x 10 ³ cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	62.0	%	[40.0-80.0]
Lymphocytes	25.0	%	[17.0-45.0]
Monocytes	6.0	%	[2.0-10.0]
Eosinophils	7.0	%	[2.0-7.0]
Basophils	0.0	%	[0.0-2.0]
ESR	21.0 #	mm/1sthour	[0.0-

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BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Glycosylated Hemoglobin Specimen: EDTA HbA1c (Glycosylated Hemoglobin) Method: HPLC	7.7 #	%	[0.0-5.6]
			As per American Diabetes Association (ADA) HbA1c in % Non diabetic adults >= 18years <5.7 Prediabetes (At Risk) 5.7-6.4 Diagnosing Diabetes >= 6.5
Estimated Average Glucose (eAG)	174	mg/dl	

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 glyceimic control.

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	208 #	mg/dl	[<200] Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	123	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500 [35.0-65.0]
HDL- CHOLESTEROL Method : Enzymatic Immunoimhibition	47.0	mg/dl	[0-35]
VLDL- CHOLESTEROL (Calculated) CHOLESTEROL, LDL, CALCULATED	25 136.0 #	mg/dl mg/dl	[<120.0] Near/ Borderline High:130-159 High Risk:160-189

Above optimal-100-129

LABORATORY REPORT			
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Registration No	: MH011023153	Lab No	: 202305003288
Patient Episode	: H18000000593	Collection Date	: 27 May 2023 09:51
Referred By	: HEALTH CHECK MGD	Reporting Date	: 27 May 2023 11:36
Receiving Date	: 27 May 2023 12:00		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
T.Chol/HDL.Chol ratio(Calculated)	4.4		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	2.9		<3 Optimal 3-4 Borderline >6 High Risk

Note:

Reference ranges based on ATP III Classifications.

KIDNEY PROFILE

Specimen: Serum

UREA Method: GLDH, Kinatic assay	20.7	mg/dl	[15.0-40.0]
BUN, BLOOD UREA NITROGEN Method: Calculated	9.7	mg/dl	[8.0-20.0]
CREATININE, SERUM Method: Jaffe rate-IDMS Standardization	0.98	mg/dl	[0.70-1.20]
URIC ACID Method:uricase PAP	6.1	mg/dl	[4.0-8.5]
SODIUM, SERUM	138.20	mmol/L	[136.00-144.00]
POTASSIUM, SERUM	2.79 #	mmol/L	[3.60-5.10]
SERUM CHLORIDE Method: ISE Indirect	93.4 #	mmol/l	[101.0-111.0]

eGFR (calculated) 84.6 ml/min/1.73sq.m [>60.0]

Technical Note

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years.