

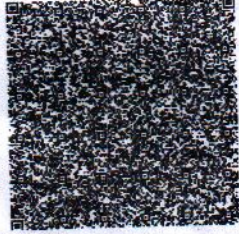
HT - 152 cm
WT - 64 kg
BP - 100/60 mmHg
Pp - 76/min.

भारतीय विशिष्ट पहचान अधिकरण
Unique Identification Authority of India

पता:
आत्मजा: अनिल कुमार वर्मा, तेराहा बाज़ार, वॉर्ड न-12,
सलेम्पुर, बाढ़, पटना,
बिहार - 803213

Address:
D/O: Anil Kumar Verma, Teraha bazar, ward
no -12, salemipur, Barh, Patna,
Bihar - 803213

Download Date: 13/02/2023



2911 5331 0487
VID : 9179 4194 6030 1661

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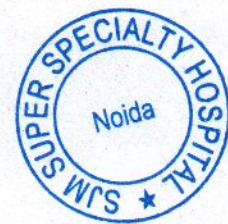
भारतीय सरकार
Government of India

अनु कुमारी
Annu Kumari
जन्म तिथि/DOB: 30/12/1994
महिला/ FEMALE

Issue Date: 08/03/2015



2911 5331 0487
VID : 9179 4194 6030 1661
मेरा आधार, मेरी पहचान



Annu,
10/02/22.
9479736201.



SJM SUPER SPECIALITY HOSPITAL, & IVF CENTRE



100 Bedded Super Speciality Hospital

Sector-63, Noida, NH-9, Near Hindon Bridge

Ph.: 0120-6530900 / 10, Mob.: +91 9599259072

E-mail: sjmhospital@yahoo.com / Website: sjmhospital.com

(24 Hours Emergency, NICU/ICU, Pharmacy & Ambulance Available)

(IVF SPECIALIST)

Dr. Pushpa Kaul (IVF)
M.B.B.S, MD(Obst, & Gynae)
Dr. Neha Zutshi (Embryologist)

OTHER SPECIALIST

Dr. Pushpa Kaul (IVF)
M.B.B.S, MD(Obst, & Gynae)
Dr. Smritee Virmani (Endoscopy)
MBBS, DGO, DNB, ICOG (Obst. & Gynae)
Dr. Vinod Bhat
M.B.B.S, MD (General Medicine)
Dr. Vineet Gupta, MS (ENT)
Dr. Naveen Gupta, MS (EYE)
Dr. Ashutosh Singh, MS (Urology)
Dr. Rahul Kaul (Spine Surgeon)
MBBS, MS, (Orthopaedic)
Dr Raj Ganjoo MD (Psychiatric)
Dr. Akash Mishra (Neuro Surgeon)
Dr. Sanjay Sharma (Cardiologist)
Dr. S.K. Pandita, MS (Surgeon)
Dr. B.P. Gupta, MS (Surgeon)
Dr. Jaisika Rajpal
(MDS), (Periodontist & Implantologist)
Dr. Akash Arora
(MDS), Maxillofacial Surgeon
Dr. Deepa Maheshwari
M.B.B.S., MD, FRM, (IVF Specialist)
Dr. Vivek Kumar Gupta
MBBS, MS (General Surgeon)
M.Ch. (Plastic Surgery)
Dr. Anand Kumar
MBBS, MD (Paediatrics)
Dr. Amit kumar Kothari
MBBS, MD (Medicine)
Dr. Amit Aggarwal
M.B.B.S., M.S. Ortho.

Annu
28x12

10/7/22

Dr. Annu

Chirp

Dr

2 mt

Dr. Annu
with
x3m

Dr. Annu
OP - 0 - 0

- Facilities:**
- 100 Beds. Private & Public wards
 - Inpatient & Outpatient - (OPD)Facilities
 - 24-Hour ambulance and emergency
 - 3 Operation theatres
 - Laposcopic & Conventional Surgery
 - In vitro fertilization centre (IVF)
 - Intensive Care Unit. (ICU)
 - Neonatal ICUs (NICU)
 - Dental Clinic
 - Computerized pathology lab
 - Digital X-ray and ultrasound
 - Physiotherapy facilities
 - 24-Hour Pharmacy
 - Cafeteria & Kitchen

SJM SUPER SPECIALITY HOSPITAL
Dr. Amit Kothari
M.B.B.S, MD (Medicine)
Consultant Physician
Reg. No. 52955 (MCI)

CGHS & AYUSHMAN BHARAT

+ Not for medico legal purpose + No substitution of drugs allowed

Panels: Raksha TPA Pvt Ltd., Vipul Med Corp TPA Pvt Ltd., E-Meditek (TPA) Services Ltd., Medi-Assit India TPA Pvt Ltd., Park Mediclaim, Genins India TPA Pvt Ltd., Family Healthcare TPA Pvt Ltd., Medsave Healthcare TPA Pvt Ltd., Vidal Health Care TPA Pvt Ltd., MD India Healthcare, DHS TPA (India) Private Ltd., Medicate TPA Service (I) Pvt. Ltd., East West Assist TPA Pvt Ltd., United Healthcare Parekh TPA Pvt Ltd., Good Health TPA Services Ltd., Bajaj Allianz General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., Universal Insurance General Co. Ltd., TATAAIG General Insurance Co. Ltd., Cholamandalam General Insurance Co. Ltd., Liberty Videocon General Insurance Ltd., SBI General Insurance Co. Ltd., Kotak Mahindra General Insurance Co. Ltd., HDFC Standard Life Insurance Co. Ltd., The Oriental Insurance Co. Ltd.(Corporate), National Insurance Co. Ltd.(Corporate), The New India Insurance Co. Ltd. (Corporate), United India Insurance Co Ltd. (Corporate)

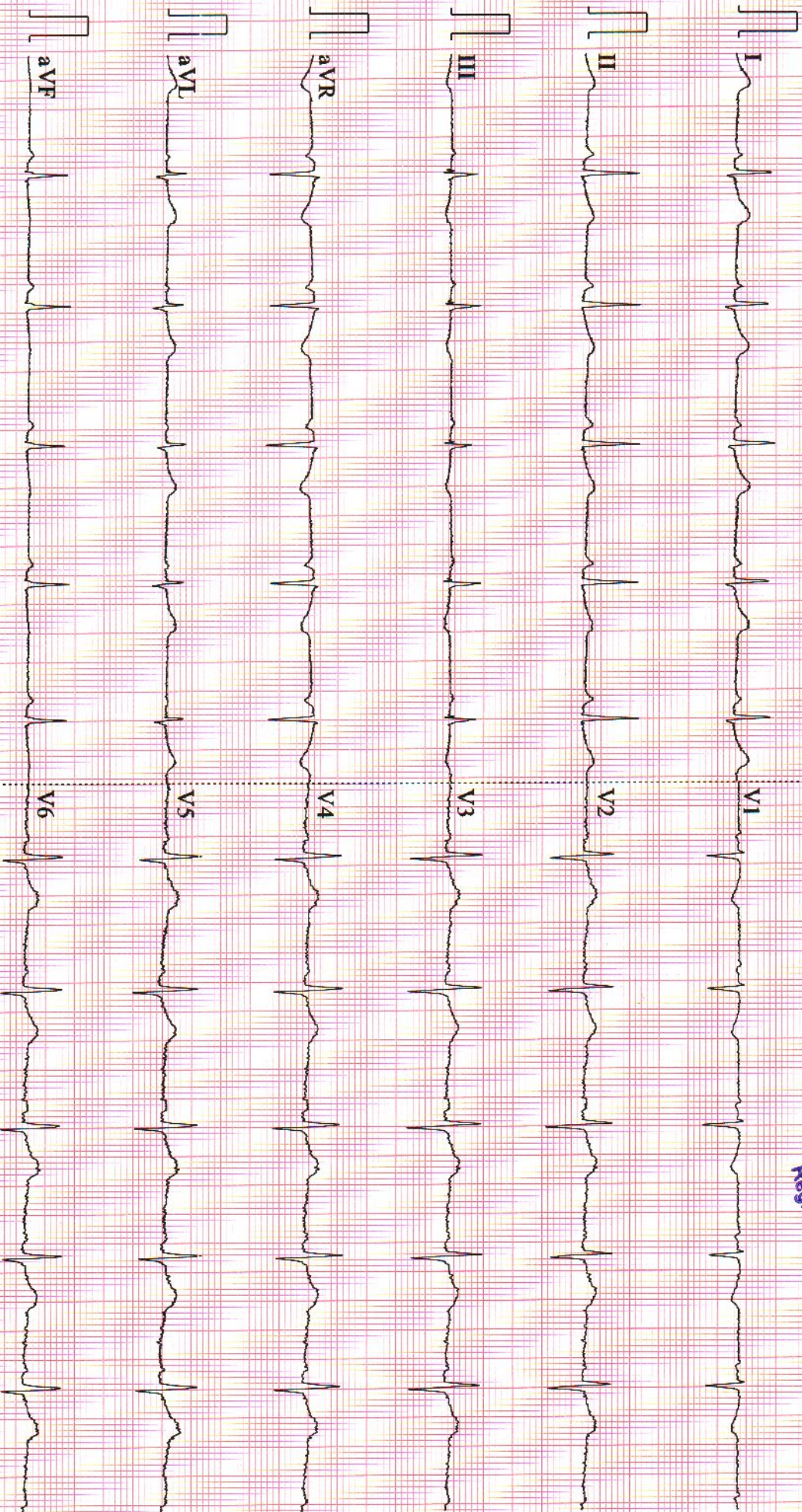
ANNU Female 28Years

HR	: 64	bpm
P	: 95	ms
PR	: 152	ms
QRS	: 72	ms
QT/QTc	: 404/420	ms
P/QRS/T	: 51/55/11	°
RV5/SV1	: 0.639/0.543	mV

Diagnosis Information:
Sinus Rhythm
Normal ECG

Report Confirmed by:

SJM SUPER SPECIALITY HOSPITAL
 Dr. Arpit Kohari
 M.D. (Medicine)
 Consultant Physician
 Reg. No. 52955 (MCI)



X-Ray Report

Patient ID.	19375	Name	MRS.ANNU	Sex/Age	F/28YRS
Date	10-07-2022 11:42 AM	Ref. Physician		Chest, CHEST	

X-RAY CHEST PA VIEW

OBSERVATION:

The lung fields are clear.

Both hila are normal.

Cardiophrenic and costophrenic angles are normal.

The trachea is central.

The mediastinal and cardiac silhouette are normal.

Cardiothoracic ratio is normal.

Bones of the thoracic cage are normal.

Soft tissues of the chest wall are normal.

IMPRESSION:

- No significant abnormality seen.


Dr. SANTOSH BHARAT RATHOD
MBBS, DNB
CONSULTANT RADIOLOGIST



Laboratory Report

Lab Serial no.	: LSHHI223751	Mr. No	: 92962
Patient Name	: Mrs. ANNU KUMARI	Reg. Date & Time	: 10-Jul-2022 04:41 AM
Age / Sex	: 28 Yrs / F	Sample Receive Date	: 10-Jul-2022 04:42 PM
Referred by	: Dr. SELF	Result Entry Date	: 10-Jul-2022 06:25PM
Doctor Name	: Dr. AMIT KOTHARI	Reporting Time	: 10-Jul-2022 06:25 PM
OPD	: OPD		

HAEMATOTOLOGY

	results	unit	reference
CBC / COMPLETE BLOOD COUNT			
HB (Haemoglobin)	9.8	gm/dl	12.0 - 16.0
TLC	8.9	Thousand/mm	4.0 - 11.0
DLC			
Neutrophil	65	%	40 - 70
Lymphocyte	26	%	20 - 40
Eosinophil	08	%	02 - 06
Monocyte	01	%	02 - 08
Basophil	00	%	00 - 01
R.B.C.	5.06	Thousand / UI	3.8 - 5.10
P.C.V	33.7	million/UI	0 - 40
M.C.V.	66.6	fL	78 - 100
M.C.H.	19.4	pg	27 - 32
M.C.H.C.	29.1	g/dl	32 - 36
Platelet Count	2.28	Lacs/cumm	1.5 - 4.5

Comments:

To determine your general health status; to screen for, diagnose, or monitor any one of a variety of diseases and conditions that affect blood cells, such as anemia, infection, inflammation, bleeding disorder or cancer



technician :

Typed By : Mr. BIRJESH

Page 1

Swati
Dr. Swati Chandel
Consultant Pathologist
39292 (MCI)

Dr. Bupinder Zutshi
(M.B.B.S., MD)
Pathologist & Microbiologist

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HAEMATOLOGY

results	unit	reference
---------	------	-----------

ESR / ERYTHROCYTE SEDIMENTATION RATE

ESR (Erythrocyte Sedimentation Rate)	32	mm/1hr	00 - 20
--------------------------------------	-----------	--------	---------

Comments

The ESR is a simple non-specific screening test that indirectly measures the presence of inflammation in the body. It reflects the tendency of red blood cells to settle more rapidly in the face of some disease states, usually because of increases in plasma fibrinogen, immunoglobulins, and other acute-phase reaction proteins. Changes in red cell shape or numbers may also affect the ESR.

BIOCHEMISTRY

results	unit	reference
---------	------	-----------

KFT, Serum

Blood Urea	13.0	mg/dL	13 - 40
Serum Creatinine	0.59	mg/dl	0.6 - 1.1
Uric Acid	8.2	mg/dl	2.6 - 6.0
BUN/ Blood Urea Nitrogen	6.07	mg/dL	7 - 18

Comment:-

Kidneys play an important role in the removal of waste products and maintenance of water and electrolyte balance in the body. Kidney Function Test (KFT) includes a group of blood tests to determine how well the kidneys are working.



technician :

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BIOCHEMISTRY

	results	unit	reference
BLOOD SUGAR (PP), Serum			
SUGAR PP	135.4	mg/dl	80 - 140

Comments:

Accurate measurement if glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions. High levels of serum glucose may be seen in case of diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents. Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.

METHOD:- GOD-POD METHOD, END POINT

BLOOD SUGAR F, Sodium Fluoride Pla

Blood Sugar (F)	102.3	mg/dl	70 - 110
-----------------	-------	-------	----------

Comments:

Accurate measurement if glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions.

High levels of serum glucose may be seen in case of Diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents.

Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.



technician :

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BIOCHEMISTRY

	results	unit	reference
LIPID PROFILE, Serum			
S. Cholesterol	144.0	mg/dl	< - 200
HDL Cholesterol	39.1	mg/dl	42.0 - 88.0
LDL Cholesterol	77.4	mg/dl	50 - 150
VLDL Cholesterol	27.5	mg/dl	00 - 40
Triglyceride	137.3	mg/dl	00 - 170
Chloestrol/HDL RATIO	3.7	%	

Comment:

Lipid profile or *lipid panel* is a panel of blood tests that serves as an initial screening tool for abnormalities in lipids, such as cholesterol and triglycerides. The results of this test can identify certain genetic diseases and can determine approximate risks for cardiovascular disease, certain forms of pancreatitis, and other diseases.

Centre for Excellent Patient Care



technician :

Typed By : Mr. BIRJESH

Page 1

Swati
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Consultant Pathologist
39292 (MCI)

Dr. Bupinder Zutshi
(M.B.B.S., MD)
Pathologist & Micrbiologist



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Laboratory Report

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Doctor Name : Dr. AMIT KOTHARI	ReportingTime : 10-Jul-2022 06:25 PM
OPD/IPD : OPD	:

TEST NAME

VALUE

ABO

"B"

Rh

POSITIVE

Comments:

Human red blood cell antigens can be divided into four groups A, B, AB AND O depending on the presence or absence of the corresponding antigens on the red blood cells. There are two glycoprotein A and B on the cell's surface that are responsible for the ABO types. Blood group is further classified as RH positive and RH negative.

URINE SUGAR (Fasting)

CHEMICAL EXAMINATION

Glucose : Nil

URINE SUGAR (PP)

CHEMICAL EXAMINATION

Glucose : Nil



Mr. BIRJESH

Swati
Dr. Swati Chandel
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 39292 (MCI)

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 (M.B.B.S., MD)
 Pathologist & Microbiologist

10-07-2022



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Doctor Name : Dr. AMIT KOTHARI	ReportingTime : 10-Jul-2022 06:25 PM
OPD/IPD : OPD	

URINE EXAMINATION TEST

PHYSICAL EXAMINATION

Quantity: 20 ml
 Color: Yellow
 Transparency: clear

CHEMICAL EXAMINATION

Albumin: nil
 PH: Acidic

MICROSCOPIC EXAMINATION

Pus cells: 1-2 /HPF
 RBC's: nil
 Crystals: nil
 Epithelial cells: 2-3 /HPF
 Others: nil

Note:-

A **urinalysis** is a test of your urine. It's used to detect and manage a wide range of disorders, such as urinary tract infections, kidney disease and diabetes. A urinalysis involves checking the appearance, concentration and content of urine.

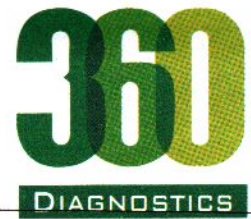


Mr. BIRJESH

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 39292 (MCI)

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 (M.B.B.S., MD)
 Pathologist & Microbiologist

10-07-2022



Patient Name : Mrs. ANNU	Registration No
Age/Sex : 28 Y/Female	Registered : 10/Jul/2022
Patient ID : 012207100033	Collection : 10/Jul/2022 02:52PM
Barcode : 10099701	Received : 10/Jul/2022 03:15PM
Ref. By : Self	Reported : 10/Jul/2022 04:57PM
SRF No. :	Panel : SJM Hospital
Aadhar-Nation : - Indian	Passport No. :

Test Name	Value	Unit	Bio Ref.Interval
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HbA1c(Glycosylated Hemoglobin):EDTA

Hb A1c, GLYCOSYLATED Hb ,EDTA Particle enhanced immunoturbidimetric	5.60	%	
Average Glucose Calculated	114.02	mg/dL	<125.0

Interpretation:

AS PER AMERICAN DIABETES ASSOCIATION (ADA)

REFERENCE GROUP	HbA1c IN %
NON DIABETIC ADULTS >=18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING DIABETES	>= 6.5
THERAPEUTIC GOALS FOR GLYCEMIC CONTROL	AGE > 19 YEARS GOAL OF THERAPY: <7.0 ACTION SUGGESTED: > 8.0 AGE <19 YEARS GOAL OF THERAPY: <7.5

Comment :

Glycosylated Hb is a normal adult Hb which is covalently bounded to a glucose molecule. Glycosylated Hb concentration is dependent on the average blood glucose concentration and is stable for the life of the RBC (120 days). Glycohaemoglobin serves as suitable marker of metabolic control of diabetics. Its estimation is unaffected by diet, insulin, exercise on day of testing and thus reflects average blood glucose levels over a period of last several weeks /months. There is a 3 - 4 week time before percent Glycohaemoglobin reflects changes in blood glucose levels.

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

- 1.Glycosylated hemoglobin (HbA1c) test is three monthly monitoring done to assess compliance with therapeutic regimen in diabetic patients.
- 2.Since Hb1c reflects long term fluctuations in blood glucose concentration, a diabetic patient who has recently under good control may still have high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled.
- 3.Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In

Jhatia
Dr. Jatinder Bhatia
MD Pathology
Director

Madhusmita Das
Dr. Madhusmita Das
MD MICROBIOLOGY



Priyanka
Dr. Priyanka Rana
MD Pathology

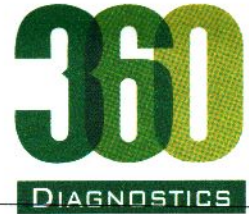


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360 Diagnostics & Health Services Pvt. Ltd.

C-1/2 Sector-31, Noida - 201 301 (U.P.) Tel.: 0120-4224797, 7042922881

E-mail: admin@360healthservices.com | Website : www.360healthservice.com



Patient Name : Mrs. ANNU	Registration No
Age/Sex : 28 Y/Female	Registered
Patient ID : 012207100033	Collection
Barcode : 10099701	Received
Ref. By : Self	Reported
SRF No. :	Panel
Aadhar-Nation : - Indian	Passport No.

Test Name	Value	Unit	Bio Ref.Interval
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patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0% may not be appropriate.

4.High HbA1c (>9.0 -9.5 %) is strongly associated with risk of development and rapid progression of microvascular and nerve complications

5.Any condition that shorten RBC life span like acute blood loss, hemolytic anemia falsely lower HbA1c results.

6.HbA1c results from patients with HbSS,HbSC and HbD must be interpreted with caution , given the pathological processes including anemia,increased red cell turnover, and transfusion requirement that adversely impact HbA1c as a marker of long-term glycemic control.

7.Specimens from patients with polycythemia or post-splenectomy may exhibit increase in HbA1c values due to a somewhat longer life span of the red cells.

*** End Of Report ***

Jhatia
Dr. Jatinder Bhatia
MD Pathology
Director

Madhusmita Das
Dr. Madhusmita Das
MD MICROBIOLOGY



Priyanka Rana
Dr. Priyanka Rana
MD Pathology



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DIAGNOSTICS

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Barcode : 10099701	Received : 10/Jul/2022 03:15PM
Ref. By : Self	Reported : 10/Jul/2022 04:56PM
SRF No. :	Panel : SJM Hospital
Aadhar-Nation : - Indian	Passport No. :

Test Name	Value	Unit	Bio Ref.Interval
THYROID PROFILE,(TFT)SERUM			
T3 ,Serum	127.00	ng/dl	69-215
T4 ,Serum ECLIA	9.60	ug/dL	5.2-12.7
TSH(ultrasensitive) ECLIA	1.70	uIU/mL	0.3-4.5

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within range	Decreased	Within range	Isolated Low T3-often seen in elderly & associated non-thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within range	Within Range	Isolated high TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with physiological & biological TSH variability.
			Subclinical Autoimmune Hypothyroidism
			Intermittent T4 therapy for hypothyroidism
			Recovery phase after non-thyroidal illness"
Raised	Decreased	Decreased	Chronic Autoimmune Thyroiditis
			Post thyroidectomy, post radioiodine
			Hypothyroid phase of transient thyroiditis"
			Interfering antibodies to thyroid hormones (anti-TPO antibodies)
Raised or within range	Raised	Raised / Normal	Intermittent T4 therapy or T4 overdose Drug interference- Amiodarone, Heparin,Beta blockers,steroids, anti-epileptics

Jhatia
Dr. Jatinder Bhatia
 MD Pathology
 Director

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Priyanka
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SRF No. :	Panel : SJM Hospital
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Test Name	Value	Unit	Bio Ref.Interval
Decreased	Raised / Normal	Raised / Normal	Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness
			Subclinical Hyperthyroidism
			Thyroxine ingestion"
Decreased	Decreased	Decreased	Central Hypothyroidism
			Non-Thyroidal illness
			Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	Primary Hyperthyroidism (Graves' disease),Multinodular goitre, Toxic nodule
			Transient thyroiditis:Postpartum, Silent (lymphocytic), Postviral (granulomatous,subacute, DeQuervain's),Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased or	Raised	Within range	T3 toxicosis
Within range			Non-Thyroidal illness

TSH(μIU/ml) for pregnant females (As per American Thyroid Association)

First Trimester	0.10-2.5
Second Trimester	0.20-3.00
Third Trimester	0.30-3.00

*** End Of Report ***

Jhatia
Dr. Jatinder Bhatia
 MD Pathology
 Director

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Sector-63, Noida, NH-09, Near Hindon Bridge
Tel.: 0120-6530900 / 10, Mob.:9599259072

Ultrasound Report

NAME: Mrs. Annu Kumari

AGE: 28yr/F

DATE: 10/07/2022

Real time USG of abdomen and pelvis reveals –

LIVER--Liver appears normal in size and shape, contour and echopattern. There is no evidence of any focal lesion seen in the parenchyma. Intra-hepatic vascular and biliary radicles appear normal. Portal vein and common bile duct are normal.

GALL BLADDER- Gall bladder is physiologically distended. The wall thickness is normal. There is no Evidence of calculi in gall bladder.

PANCREAS-Pancreas is normal in size, shape and echo pattern. No focal mass lesion seen. Pancreatic duct is not dilated.

SPLEEN-Spleen show normal size, shape and homogeneous echopattern. No focal mass lesion is seen in parenchyma.

KIDNEY -Both the kidneys are normal in size, shape, position and axis. Parenchymal echopattern is normal bilaterally. No focal solid or cystic lesion is seen. There is no evidence of renal calculi on both sides.

RETROPERITONIUM- -There is evidence of ascites or Para – aortic adenopathy seen. Retroperitoneal structures appear normal.

URINARY BLADDER- - Adequately distended. Walls were regular and thin. Contents are normal. No stone formation seen.

UTERUS- Uterus and both ovaries are normal in size, shape and echopattern. No focal lesion is seen. Endometrium normal. There is no evidence of free fluid seen in the pouch of Douglas. There is no evidence of adnexal mass is seen.

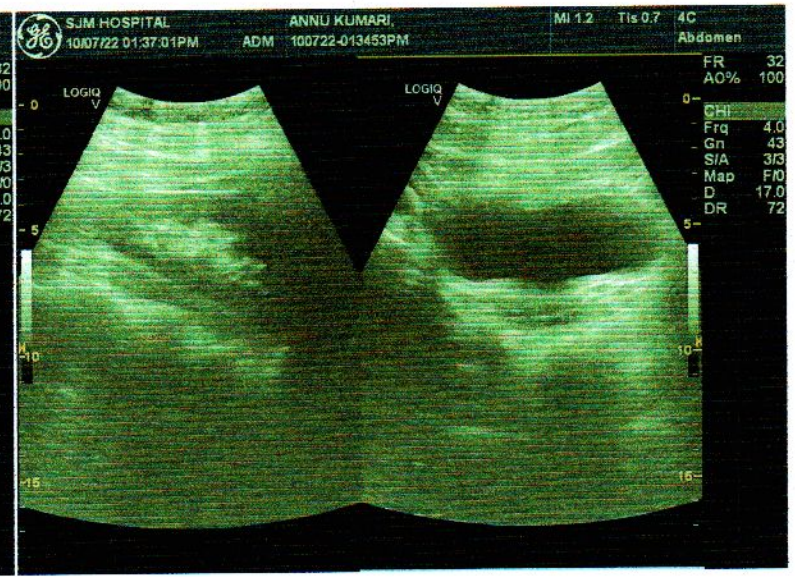
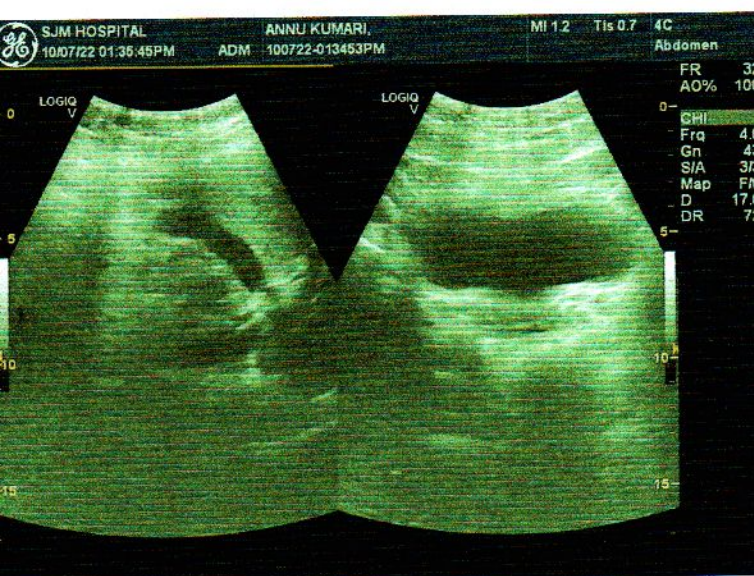
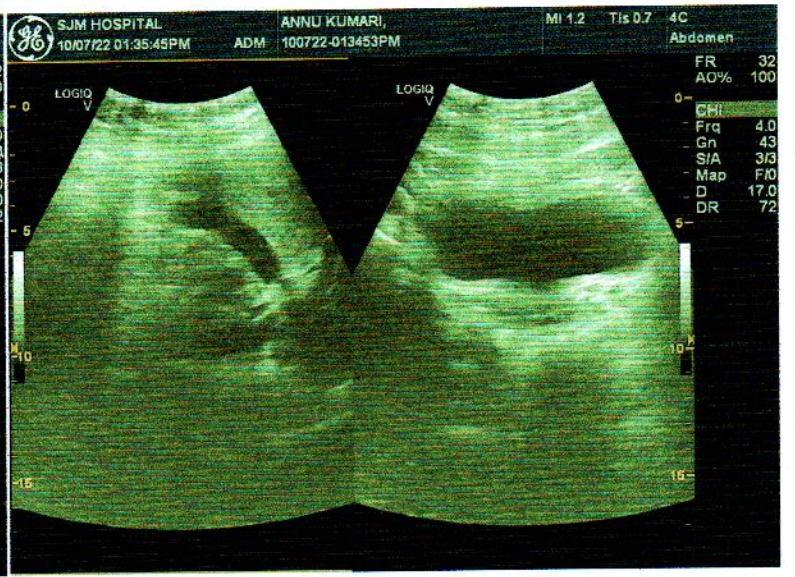
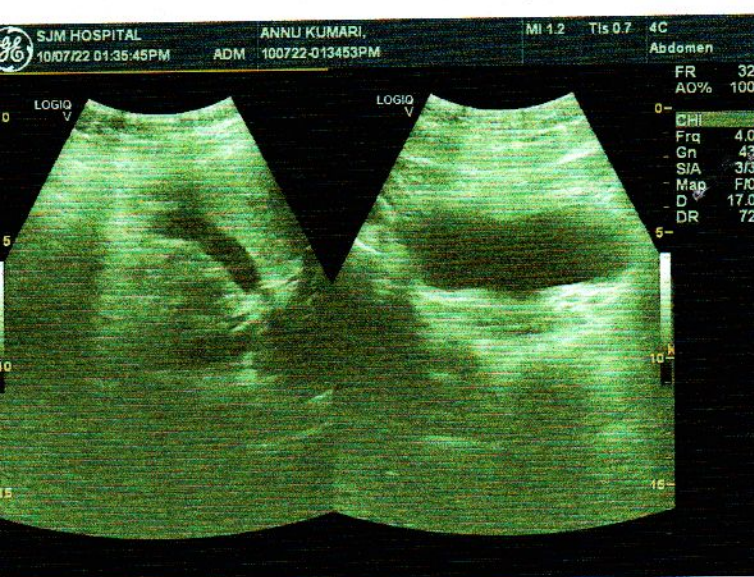
IMPRESSION:- Normal Scan.

For SJM Super Specialty Hospital

DR. PUSHPA KAUL


DR. P.K GUPTA





Hi+ 165cm
Wt - 75kg
BP - 130/80
Pu - 84/mic

1800 300 1947
1947
help@uidai.gov.in
www.uidai.gov.in
P. O. Box No. 1947,
Bangalore-560 001



Address:
S/O Jaihind Prasad, 21/132,
Vijaya Bank, Jayendraganj,
Gird, Lashkar City, Gird,
Gwalior, Madhya Pradesh,
474009

UNIQUE IDENTIFICATION AUTHORITY OF INDIA
भारतीय पहचान प्राधिकरण

Piyush Kumar
10/07/22



भारत सरकार
GOVERNMENT OF INDIA



पियूष कुमार
Piyush Kumar
DOB: 05-01-1989
Gender: Male



4388 4074 0797

आधार - आम आदमी का अधिकार



SJM SUPER SPECIALITY HOSPITAL, & IVF CENTRE



100 Bedded Super Speciality Hospital

Sector-63, Noida, NH-9, Near Hindon Bridge

Ph.: 0120-6530900 / 10, Mob.: +91 9599259072

E-mail: sjmhospital@yahoo.com / Website: sjmhospital.com

(24 Hours Emergency, NICU/ICU, Pharmacy & Ambulance Available)

(IVF SPECIALIST)

Dr. Pushpa Kaul (IVF)
M.B.B.S, MD(Obst, & Gynae)
Dr. Neha Zutshi (Embryologist)

OTHER SPECIALIST

Dr. Pushpa Kaul (IVF)
M.B.B.S, MD(Obst, & Gynae)
Dr. Smritee Virmani (Endoscopy)
MBBS, DGO, DNB, ICOG (Obst. & Gynae)
Dr. Vinod Bhat
M.B.B.S, MD (General Medicine)
Dr. Vineet Gupta, MS (ENT)
Dr. Naveen Gupta, MS (EYE)
Dr. Ashutosh Singh, MS (Urology)
Dr. Rahul Kaul (Spine Surgeon)
MBBS, MS, (Orthopaedic)
Dr Raj Ganjoo MD (Psychiatric)
Dr. Akash Mishra (Neuro Surgeon)
Dr. Sanjay Sharma (Cardiologist)
Dr. S.K. Pandita, MS (Surgeon)
Dr. B.P. Gupta, MS (Surgeon)
Dr. Jaisika Rajpal
(MDS), (Periodontist & Implantologist)
Dr. Akash Arora
(MDS), Maxillofacial Surgeon
Dr. Deepa Maheshwari
M.B.B.S., MD, FRM, (IVF Specialist)
Dr. Vivek Kumar Gupta
MBBS, MS (General Surgeon)
M.Ch. (Plastic Surgery)
Dr. Anand Kumar
MBBS, MD (Paediatrics)
Dr. Amit kumar Kothari
MBBS, MD (Medicine)
Dr. Amit Aggarwal
M.B.B.S., M.S. Ortho.

Facilities:

100 Beds. Private & Public wards
Inpatient & Outpatient - (OPD)Facilities
24-Hour ambulance and emergency
3 Operation theatres
Laprosopic & Conventional Surgery
In vitro fertilization centre (IVF)
Intensive Care Unit. (ICU)
Neonatal ICUs (NICU)
Dental Clinic
Computerized pathology lab
Digital X-ray and ultrasound
Physiotherapy facilities
24-Hour Pharmacy
Cafeteria & Kitchen

Pigwala
32x/M

10/7/22

do chulpede our

AE
TMD

Cap Haski 60k
- - - week
(4)

SJM SUPER SPECIALITY HOSPITAL
Dr. Amit Kothari
M.B.B.S, M.D (Medicine)
Consultant Physician
Reg. No. 52955 (MCI)

CGHS & AYUSHMAN BHARAT

+ Not for medico legal purpose + No substitution of drugs allowed

Panels: Raksha TPA Pvt Ltd., Vipul Med Corp TPA Pvt Ltd., E-Meditek (TPA) Services Ltd., Medi-Assit India TPA Pvt Ltd., Park Mediclaim, Genins India TPA Pvt Ltd., Family Healthcare TPA Pvt Ltd., Medsave Healthcare TPA Pvt Ltd., Vidal Health Care TPA Pvt Ltd., MD India Healthcare, DHS TPA (India) Private Ltd., Mediatec TPA Service (I) Pvt. Ltd., East West Assist TPA Pvt Ltd., United Healthcare Parckh TPA Pvt Ltd., Good Health TPA Services Ltd., Bajaj Allianz General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., Universal Insurance General Co. Ltd., TATAAIG General Insurance Co. Ltd., Cholamandalam General Insurance Co. Ltd., Liberty Videocon General Insurance Ltd., SBI General Insurance Co. Ltd., Kotak Mahindra General Insurance Co. Ltd., HDFC Standard Life Insurance Co. Ltd., The Oriental Insurance Co. Ltd.(Corporate), National Insurance Co. Ltd.(Corporate), The New India Insurance Co. Ltd. (Corporate), United India Insurance Co Ltd. (Corporate)

ID: 1

10-07-2022 11:35:24 AM

BPL-02

PIYUSH
Male 32Years

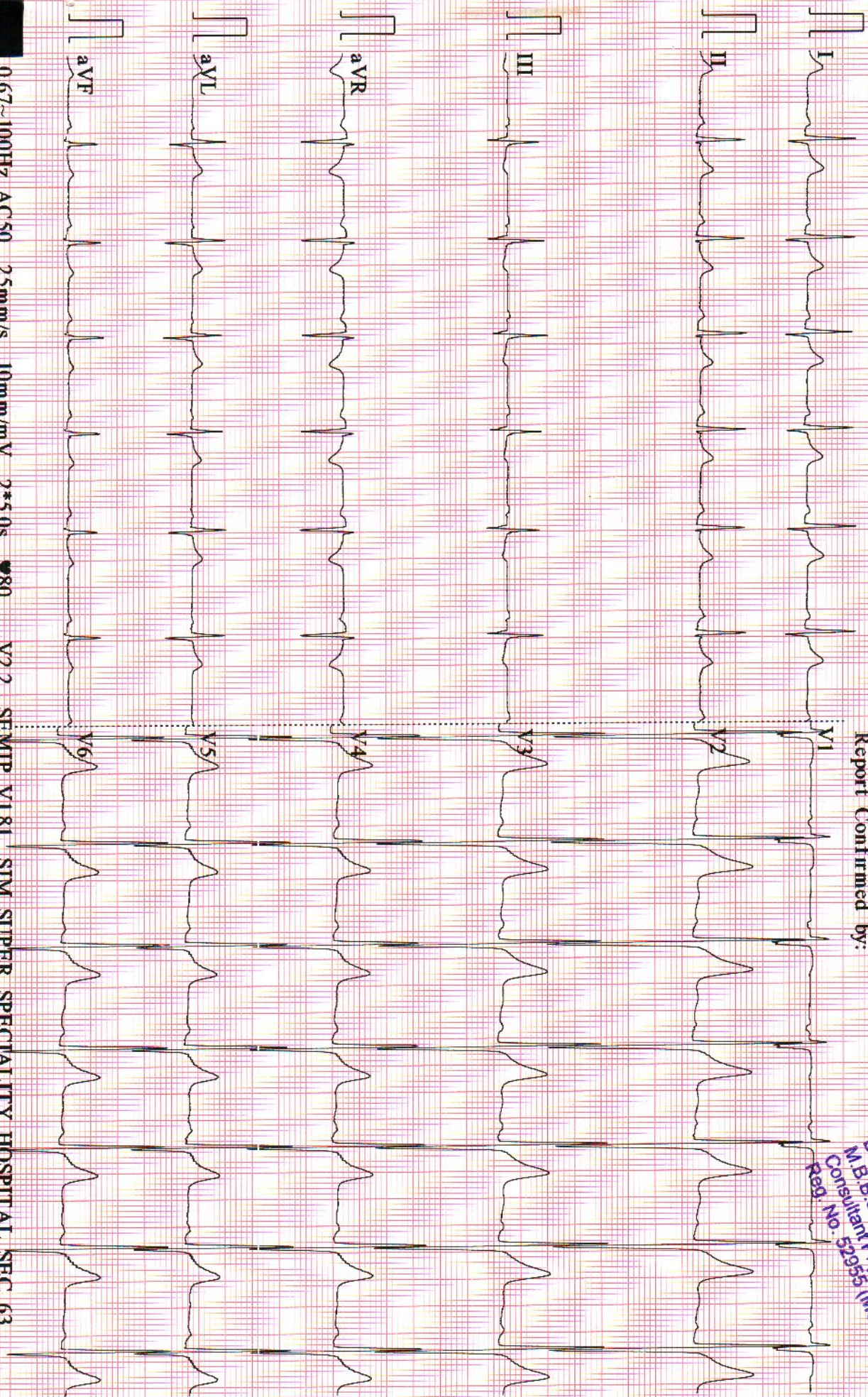
HR	: 80	bpm
P	: 104	ms
PR	: 151	ms
QRS	: 78	ms
QT/QTc	: 326/376	ms
P/QRS/T	: 50/51/18	°
R/S/SV1	: 1.909/0.672	mV

Diagnosis Information:

Sinus Rhythm
Normal ECG

Report Confirmed by:

(Signature)
SIM SUPER SPECIALITY HOSPITAL
 Dr. Amit Kothari
 M.B.B.S. M.D. (Medicine)
 Consultant Physician
 Reg. No. 52955 (MCI)



Ultrasound Report

Name: Mr. Piyush

Age:32/M

Date: 10/07/2022

Ultrasound - Male Abdomen

Liver: Liver appears normal in size. There is no evidence of any focal lesion seen in the parenchyma. Intra-hepatic vascular and biliary radicles appear normal. Portal vein and common bile duct are normal.

GALL BLADDER:-Gall bladder is physiologically distended. The wall thickness is normal. There is no Evidence of any intraluminal mass lesion or calculi seen.

PANCREAS: -Pancreas is normal in size, shape and echo pattern. No focal mass lesion seen. Pancreatic duct is not dilated.

SPLEEN: -Spleen show normal in size, shape and homogeneous echopattern. No focal mass lesion is seen in parenchyma.

KIDNEYS:- Both the kidneys are normal in size, shape, position and axis. Parenchymal echopattern is normal bilaterally. No focal solid or cystic lesion is seen. There is no evidence of renal concretion on left side. **Right kidney shows renal calculus meas. 5mm in upper pole.**

PARAAORTIC REGIONS: Any mass/ lymph nodes: -- no mass or lymph nodes seen.

URINARY BLADDER:- Adequately distended. Wall were regular and thin. Contents are Normal. No stone formation seen.

PROSTATE: - Normal in shape and position. Parenchymal echotexture is normal. No free ascetic fluid or pleural effusion seen.

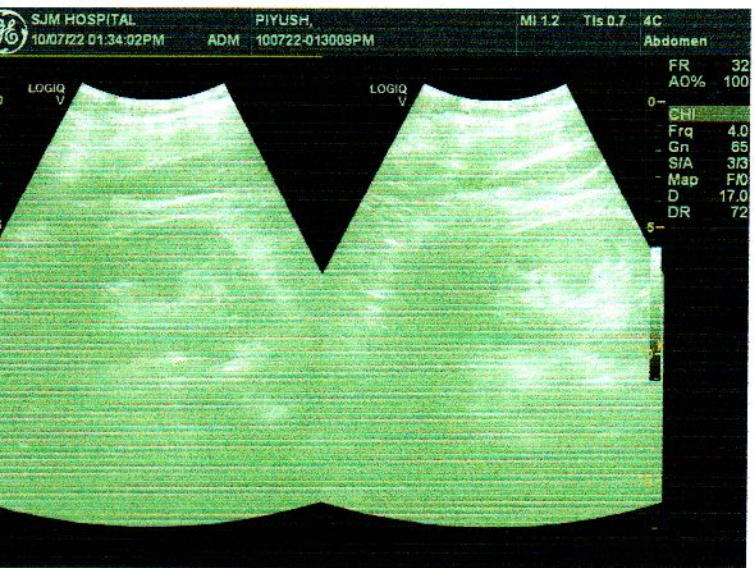
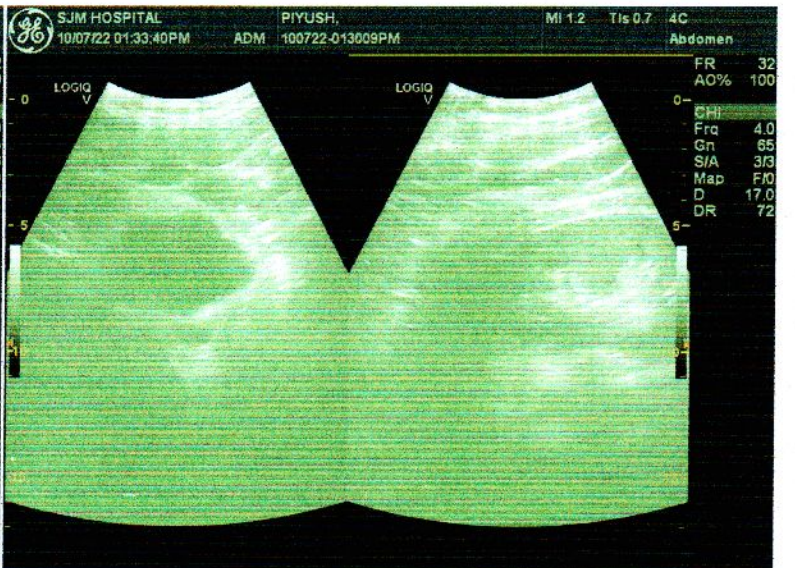
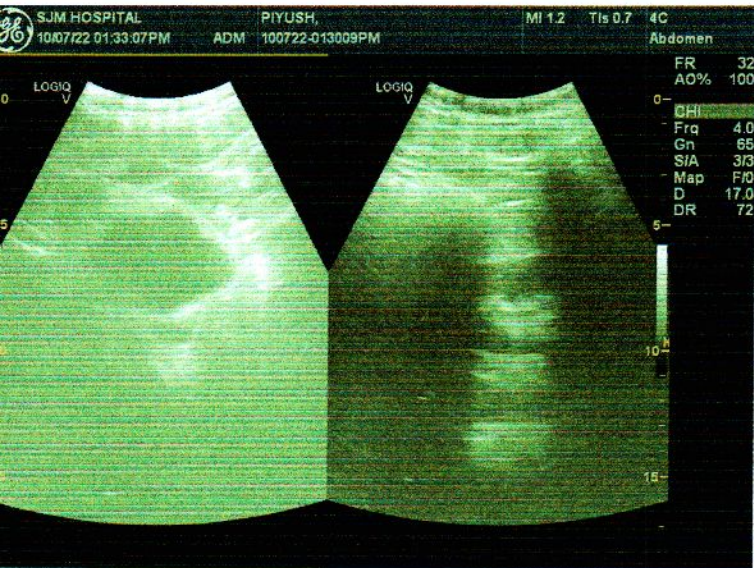
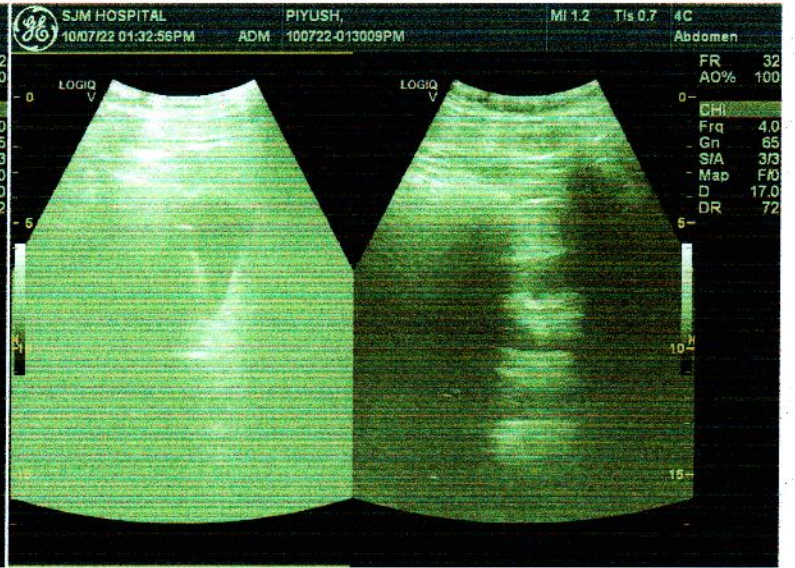
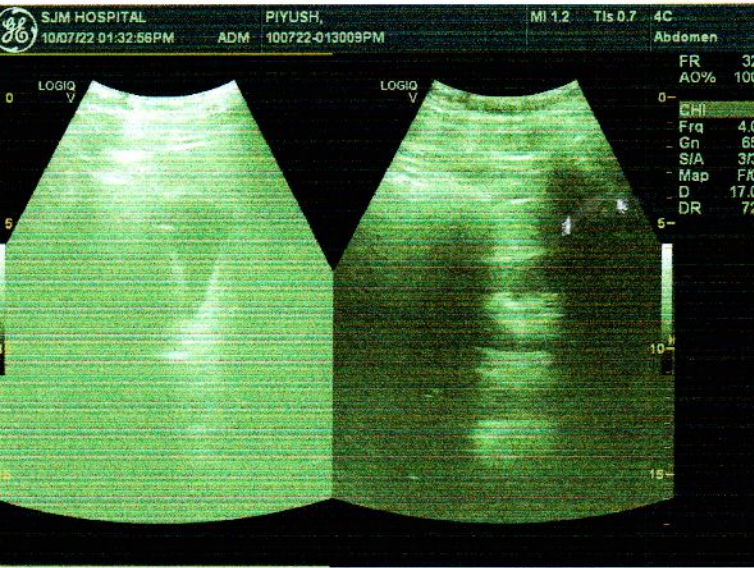
IMPRESSION: - Right renal calculus.

For SJM Super Speciality Hospital

DR. PUSHPA KAUL

DR. P.K GUPTA





X-Ray Report

Patient ID.	19374	Name	MR.PIYUSH	Sex/Age	M/32YRS
Date	10-07-2022 11:43 AM	Ref. Physician		Chest, CHEST	

X-RAY CHEST PA VIEW

OBSERVATION:

The lung fields are clear.

Both hila are normal.

Cardiophrenic and costophrenic angles are normal.

The trachea is central.

The mediastinal and cardiac silhouette are normal.

Cardiothoracic ratio is normal.

Bones of the thoracic cage are normal.

Soft tissues of the chest wall are normal.

IMPRESSION:

- No significant abnormality seen.


Dr. SANTOSH BHARAT RATHOD
MBBS, DNB
CONSULTANT RADIOLOGIST



Laboratory Report

Lab Serial no. : LSHHI223750	Mr. No : 92961
Patient Name : Mr. PIYUSH KUMAR	Reg. Date & Time : 10-Jul-2022 04:37 AM
Age / Sex : 33 Yrs / M	Sample Receive Date : 10-Jul-2022 04:42 PM
Referred by : Dr. SELF	Result Entry Date : 10-Jul-2022 06:14PM
Doctor Name : Dr. RMO	Reporting Time : 10-Jul-2022 06:14 PM
OPD : OPD	

HAEMATOLOGY

	results	unit	reference
CBC / COMPLETE BLOOD COUNT			
HB (Haemoglobin)	14.4	gm/dl	12.5 - 16.0
TLC	6.5	Thousand/mm	4.0 - 11.0
DLC			
Neutrophil	64	%	40 - 70
Lymphocyte	28	%	20 - 40
Eosinophil	06	%	01 - 06
Monocyte	02	%	02 - 08
Basophil	00	%	00 - 01
R.B.C.	4.80	Thousand / UI	3.8 - 5.10
P.C.V	44.1	million/UI	00 - 40
M.C.V.	91.9	fL	78 - 100
M.C.H.	30.0	pg	27 - 31
M.C.H.C.	32.7	g/dl	32 - 36
Platelet Count	1.63	Lacs/cumm	1.5 - 4.5

Comments:

To determine your general health status; to screen for, diagnose, or monitor any one of a variety of diseases and conditions that affect blood cells, such as anemia, infection, inflammation, bleeding disorder or cancer

technician :

Typed By : Mr. BIRJESH



Laboratory Report

Lab Serial no.	: LSHHI223750	Mr. No	: 92961
Patient Name	: Mr. PIYUSH KUMAR	Reg. Date & Time	: 10-Jul-2022 04:37 AM
Age / Sex	: 33 Yrs / M	Sample Receive Date	: 10-Jul-2022 04:42 PM
Referred by	: Dr. SELF	Result Entry Date	: 10-Jul-2022 06:14PM
Doctor Name	: Dr. RMO	Reporting Time	: 10-Jul-2022 06:14 PM
OPD	: OPD		

HAEMATOTOLOGY

results unit reference

ESR / ERYTHROCYTE SEDIMENTATION RATE

ESR (Erythrocyte Sedimentation Rate) 16 mm/1hr 00 - 22

Comments

The ESR is a simple non-specific screening test that indirectly measures the presence of inflammation in the body. It reflects the tendency of red blood cells to settle more rapidly in the face of some disease states, usually because of increases in plasma fibrinogen, immunoglobulins, and other acute-phase reaction proteins. Changes in red cell shape or numbers may also affect the ESR.

BIOCHEMISTRY

results unit reference

KFT, Serum

Blood Urea	33.9	mg/dL	18 - 55
Serum Creatinine	0.71	mg/dl	0.7 - 1.3
Uric Acid	5.6	mg/dl	3.5 - 7.2
BUN/ Blood Urea Nitrogen	15.84	mg/dL	7 - 18

Comment:-

Kidneys play an important role in the removal of waste products and maintenance of water and electrolyte balance in the body. Kidney Function Test (KFT) includes a group of blood tests to determine how well the kidneys are working.



technician :

Typed By : Mr. BIRJESH



SJM SUPER SPECIALITY HOSPITAL

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Web.: www.sjmhospital.com



Laboratory Report

Lab Serial no. : LSHHI223750	Mr. No : 92961
Patient Name : Mr. PIYUSH KUMAR	Reg. Date & Time : 10-Jul-2022 04:37 AM
Age / Sex : 33 Yrs / M	Sample Receive Date : 10-Jul-2022 04:42 PM
Referred by : Dr. SELF	Result Entry Date : 10-Jul-2022 06:14PM
Doctor Name : Dr. RMO	Reporting Time : 10-Jul-2022 06:14 PM
OPD : OPD	

BIOCHEMISTRY

	results	unit	reference
BLOOD SUGAR (PP),Serum			
SUGAR PP	197.8	mg/dl	80 - 140

Comments:

Accurate measurement if glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions. High levels of serum glucose may be seen in case of diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents. Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.

METHOD:- GOD-POD METHOD, END POINT

BLOOD SUGAR F, Sodium Fluoride Pla

Blood Sugar (F)	136.5	mg/dl	70 - 110
-----------------	--------------	-------	----------

Comments:

Accurate measurement if glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions.

High levels of serum glucose may be seen in case of Diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents.

Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.



technician :

Typed By : Mr. BIRJESH

Swati
Dr. Swati Chandel
Consultant Pathologist
39292 (MCI)

Dr. Bupinder Zutshi
(M.B.B.S., MD)
Pathologist & Micrbiologist



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Laboratory Report

Lab Serial no.	: LSHHI223750	Mr. No	: 92961
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Doctor Name	: Dr. RMO	Reporting Time	: 10-Jul-2022 06:14 PM
OPD	: OPD		

BIOCHEMISTRY

	results	unit	reference
LIPID PROFILE, Serum			
S. Cholesterol	139.0	mg/dl	< - 200
HDL Cholesterol	39.1	mg/dl	35.3 - 79.5
LDL Cholesterol	77.6	mg/dl	50 - 150
VLDL Cholesterol	22.3	mg/dl	00 - 40
Triglyceride	111.6	mg/dl	00 - 170
Chloestrol/HDL RATIO	3.6	%	

Comment:

Lipid profile or lipid panel is a panel of blood tests that serves as an initial screening tool for abnormalities in lipids, such as cholesterol and triglycerides. The results of this test can identify certain genetic diseases and can determine approximate risks for cardiovascular disease, certain forms of pancreatitis, and other diseases.

Centre for Excellent Patient Care

technician :

Typed By : Mr. BIRJESH



Swati
Dr. Swati Chandel
Consultant Pathologist
39292 (MCI)

Dr. Bupinder Zutshi
(M.B.B.S., MD)
Pathologist & Microbiologist

Laboratory Report

Lab Serial no. : LSHHI223750	Mr. No : 92961
Patient Name : Mr. PIYUSH KUMAR	Reg. Date & Time : 10-Jul-2022 04:37 AM
Age / Sex : 33 Yrs / M	Sample Receive Date : 10-Jul-2022 04:42 PM
Referred by : Dr. SELF	Result Entry Date : 10-Jul-2022 06:14PM
Doctor Name : Dr. RMO	Reporting Time : 10-Jul-2022 06:14 PM
OPD : OPD	

BIOCHEMISTRY

	results	unit	reference
LIVER FUNCTION TEST, Serum			
Bilirubin- Total	0.64	mg/dL	00 - 2.0
Bilirubin- Direct	0.27	mg/dL	0.0 - 0.20
Bilirubin- Indirect	0.37	mg/dL	0.2 - 1.2
SGOT/AST	40.5	IU/L	00 - 35
SGPT/ALT	43.1	IU/L	00 - 45
Alkaline Phosphate	117.0	U/L	53 - 128
Total Protein	6.81	g/dL	6.4 - 8.3
Serum Albumin	4.55	gm%	3.50 - 5.20
Globulin	2.26	gm/dl	1.8 - 3.6
Albumin/Globulin Ratio	2.01	%	

A Liver Function test or one or more of its component tests may be used to help diagnose liver disease if a person has symptoms that indicate possible liver dysfunction. If a person has a known condition or liver disease, testing may be performed at intervals to monitor liver status and to evaluate the effectiveness of any treatments.

technician :

Typed By : Mr. BIRJESH



Swati
Dr. Swati Chandel
Consultant Pathologist
39292 (MCI)

Dr. Bupinder Zutshi
(M.B.B.S., MD)
Pathologist & Microbiologist

Laboratory Report

Lab Serial No. : LSHHI223750	Reg. No. : 92961
Patient Name : MR. PIYUSH KUMAR	Reg. Date & Time : 10-Jul-2022 04:37 AM
Age/Sex : 33 Yrs /M	Sample Collection Date : 10-Jul-2022 04:42 PM
Referred By : SELF	Sample Receiving Date : 10-Jul-2022 04:42 PM
Doctor Name : Dr. RMO	ReportingTime : 10-Jul-2022 06:14 PM
OPD/IPD : OPD	:

TEST NAME

VALUE

ABO

"B"

Rh

POSITIVE

Comments:

Human red blood cell antigens can be divided into four groups A, B, AB AND O depending on the presence or absence of the corresponding antigens on the red blood cells. There are two glycoprotein A and B on the cell's surface that are responsible for the ABO types. Blood group is further classified as RH positive and RH negative.

URINE SUGAR (Fasting)

CHEMICAL EXAMINATION

Glucose : Nil

URINE SUGAR (PP)

CHEMICAL EXAMINATION

Glucose : [+++]



Mr. BIRJESH

Swati
Dr. Swati Chandel
Consultant Pathologist
39292 (MCI)

Dr. Bupinder Zutshi
(M.B.B.S., MD)
Pathologist & Microbiologist

Laboratory Report

Lab Serial No. : LSHHI223750 Reg. No. : 92961
Patient Name : MR. PIYUSH KUMAR Reg. Date & Time : 10-Jul-2022 04:37 AM
Age/Sex : 33 Yrs /M Sample Collection Date : 10-Jul-2022 04:42 PM
Referred By : SELF Sample Receiving Date : 10-Jul-2022 04:42 PM
Doctor Name : Dr. RMO ReportingTime : 10-Jul-2022 06:14 PM
OPD/IPD : OPD :

URINE EXAMINATION TEST

PHYSICAL EXAMINATION

Quantity: 20 ml
Color: Yellow
Transparency: clear

CHEMICAL EXAMINATION

Albumin: nil
PH: Acidic

MICROSCOPIC EXAMINATION

Pus cells: 1-2 /HPF
RBC's: nil
Crystals: nil
Epithelial cells: 0-1 /HPF
Others: nil

Note:-

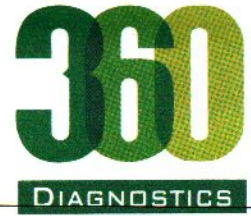
A **urinalysis** is a test of your urine. It's used to detect and manage a wide range of disorders, such as urinary tract infections, kidney disease and diabetes. A urinalysis involves checking the appearance, concentration and content of urine.



Mr. BIRJESH

Swati
Dr. Swati Chandel
Consultant Pathologist
39292 (MCI)

Dr. Bupinder Zutshi
(M.B.B.S., MD)
Pathologist & Microbiologist
10-07-2022



Patient Name : Mr. PIYUSH	Registration No
Age/Sex	Registered
Patient ID	Collection
Barcode	Received
Ref. By	Reported
SRF No.	Panel
Aadhar-Nation	Passport No.

Test Name	Value	Unit	Bio Ref.Interval
-----------	-------	------	------------------

HbA1C(Glycosylated Hemoglobin):EDTA

Hb A1C, GLYCOSYLATED Hb ,EDTA <small>Particle enhanced immunoturbidimetric</small>	6.30	%	
Average Glucose <small>Calculated</small>	134.11	mg/dL	<125.0

Interpretation:
AS PER AMERICAN DIABETES ASSOCIATION (ADA)

REFERENCE GROUP	HbA1c IN %
NON DIABETIC ADULTS >=18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING DIABETES	>= 6.5
THERAPEUTIC GOALS FOR GLYCEMIC CONTROL	AGE > 19 YEARS GOAL OF THERAPY: <7.0 ACTION SUGGESTED: > 8.0 AGE <19 YEARS GOAL OF THERAPY: <7.5

Comment :

Glycosylated Hb is a normal adult Hb which is covalently bounded to a glucose molecule. Glycosylated Hb concentration is dependent on the average blood glucose concentration and is stable for the life of the RBC (120 days). Glycohaemoglobin serves as suitable marker of metabolic control of diabetics. Its estimation is unaffected by diet, insulin, exercise on day of testing and thus reflects average blood glucose levels over a period of last several weeks /months. There is a 3 - 4 week time before percent Glycohaemoglobin reflects changes in blood glucose levels.

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

1. Glycosylated hemoglobin (HbA1c) test is three monthly monitoring done to assess compliance with therapeutic regimen in diabetic patients.
2. Since Hb1c reflects long term fluctuations in blood glucose concentration, a diabetic patient who has recently under good control may still have high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled.
3. Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In

J. Bhatia
Dr. Jatinder Bhatia
MD Pathology
Director

Madhusmita Das
Dr. Madhusmita Das
MD MICROBIOLOGY

Priyanka Rana
Dr. Priyanka Rana
MD Pathology

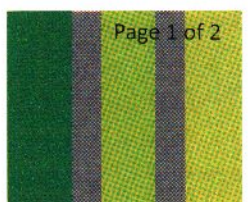


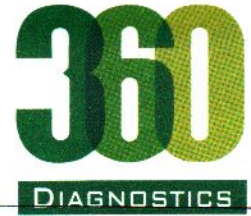
NABL ACCREDITED & ICMR APPROVED FOR COVID-19



360 Diagnostics & Health Services Pvt. Ltd.

C-1/2 Sector-31, Noida - 201 301 (U.P) Tel.: 0120-4224797, 7042922881
E-mail: admin@360healthservices.com | Website : www.360healthservice.com





Patient Name : Mr. PIYUSHI	Registration No
Age/Sex	Registered
Patient ID	Collection
Barcode	Received
Ref. By	Reported
SRF No.	Panel
Aadhar-Nation	Passport No.

Test Name	Value	Unit	Bio Ref.Interval
<p>patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0% may not be appropriate.</p> <p>4.High HbA1c (>9.0 -9.5 %) is strongly associated with risk of development and rapid progression of microvascular and nerve complications</p> <p>5.Any condition that shorten RBC life span like acute blood loss, hemolytic anemia falsely lower HbA1c results.</p> <p>6.HbA1c results from patients with HbSS,HbSC and HbD must be interpreted with caution , given the pathological processes including anemia,increased red cell turnover, and transfusion requirement that adversely impact HbA1c as a marker of long-term glycemc control.</p> <p>7.Specimens from patients with polycythemia or post-splenectomy may exhibit increase in HbA1c values due to a somewhat longer life span of the red cells.</p>			

*** End Of Report ***

Jhatia
Dr. Jatinder Bhatia
 MD Pathology
 Director

Madhusmita Das
Dr. Madhusmita Das
 MD MICROBIOLOGY

Priyanka Rana
Dr. Priyanka Rana
 MD Pathology



NABL ACCREDITED & ICMR APPROVED FOR COVID-19

360 Diagnostics & Health Services Pvt. Ltd.

C-1/2 Sector-31, Noida - 201 301 (U.P) Tel.: 0120-4224797, 7042922881

E-mail: admin@360healthservices.com | Website : www.360healthservice.com



Patient Name : Mr. PIYUSH
 Age/Sex : 32 Y/Male
 Patient ID : 012207100036
 Barcode : 10099705
 Ref. By : Self
 SRF No. :
 Aadhar-Nation : - Indian

Registration No : 96176
 Registered : 10/Jul/2022
 Collection : 10/Jul/2022 03:06PM
 Received : 10/Jul/2022 03:15PM
 Reported : 10/Jul/2022 04:58PM
 Panel : SJM Hospital
 Passport No. :

Test Name	Value	Unit	Bio Ref.Interval
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THYROID PROFILE.(TFT)SERUM

T3 ,Serum	115.00	ng/dl	69-215
T4 ,Serum ECLIA	8.40	ug/dL	5.2-12.7
TSH(ultrasensitive) ECLIA	2.0	uIU/mL	0.3-4.5

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within range	Decreased	Within range	Isolated Low T3-often seen in elderly & associated non-thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within range	Within Range	Isolated high TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with physiological & biological TSH variability.
			Subclinical Autoimmune Hypothyroidism
			Intermittent T4 therapy for hypothyroidism
			Recovery phase after non-thyroidal illness"
Raised	Decreased	Decreased	Chronic Autoimmune Thyroiditis
			Post thyroidectomy, post radioiodine
			Hypothyroid phase of transient thyroiditis" Interfering antibodies to thyroid hormones (anti-TPO antibodies)
Raised or within range	Raised	Raised / Normal	Intermittent T4 therapy or T4 overdose Drug interference- Amiodarone, Heparin,Beta blockers,steroids, anti-epileptics

J. Bhatia
 Dr. Jatinder Bhatia
 MD Pathology
 Director

Madhusmita Das
 Dr. Madhusmita Das
 MD MICROBIOLOGY

Priyanka Rana
 Dr. Priyanka Rana
 MD Pathology



NABL ACCREDITED & ICMR APPROVED FOR COVID-19

360 Diagnostics & Health Services Pvt. Ltd.

C-1/2 Sector-31, Noida - 201 301 (U.P.) Tel.: 0120-4224797, 7042922881

E-mail: admin@360healthservices.com | Website : www.360healthservice.com



DIAGNOSTICS

Patient Name : Mr. PIYUSH
Age/Sex : 32 Y/Male
Patient ID : 012207100036
Barcode : 10099705
Ref. By : Self
SRF No. :
Aadhar-Nation : - Indian

Registration No : 96176
Registered : 10/Jul/2022
Collection : 10/Jul/2022 03:06PM
Received : 10/Jul/2022 03:15PM
Reported : 10/Jul/2022 04:58PM
Panel : SJM Hospital
Passport No. :

Test Name	Value	Unit	Bio Ref.Interval
Decreased	Raised / Normal	Raised / Normal	Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness
			Subclinical Hyperthyroidism
			Thyroxine ingestion"
Decreased	Decreased	Decreased	Central Hypothyroidism
			Non-Thyroidal illness
			Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	Primary Hyperthyroidism (Graves' disease),Multinodular goitre, Toxic nodule
			Transient thyroiditis:Postpartum, Silent (lymphocytic), Postviral (granulomatous,subacute, DeQuervain's),Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased or	Raised	Within range	T3 toxicosis
Within range			Non-Thyroidal illness

TSH(μ IU/ml) for pregnant females (As per American Thyroid Association)

First Trimester	0.10-2.5
Second Trimester	0.20-3.00
Third Trimester	0.30-3.00

*** End Of Report ***

Jhatia
Dr. Jatinder Bhatia
MD Pathology
Director

Madhusmita Das
Dr. Madhusmita Das
MD MICROBIOLOGY



Priyanka
Dr. Priyanka Rana
MD Pathology



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360 Diagnostics & Health Services Pvt. Ltd.

ID : 121
 NAME : PIYUSH KUMAR
 AGE / SEX : 32 / MALE
 HEIGHT (cm) : 165
 WEIGHT (kg) : 75
 PROTOCOL : BRUCE
 REF. BY : DR. VIIOND BHAT
 DONE BY : VINOD BHAT
 TECHNICIAN :

CASE HISTORY : NA
 MEDICATION : NA
 OBJECT OF TEST : Routine Check Up.
 RISK FACTOR : None.
 ACTIVITY : Moderate Active.
 OTHER INVESTIGATION : X - Ray.
 REASON FOR TERMINATION : Max HR.
 EXERCISE TOLERANCE : Moderate (< 10 METS).
 EXERCISE INDUCED ARRHYTHMIAS : Yes.
 HAEMO RESPONSE : Normal.
 CHRONO RESPONSE : Normal.
 FINAL IMPRESSION : Stress Test is Negative for Inducible Ischemia.
 EXTRA COMMENTS :

SJM SPECIALTY HOSPITAL
 Dr. Vinod Bhat
 Consultant Physician
 (N.B.S. M.D. (Medicine))
 Reg. No. 52395 (MCI)

Confirmed By : _____

Signature

PATIENT ID : 121
 PATIENT NAME : PIYUSH KUMAR
 PROTOCOL : BRUCE

DR. VIJND BHAT
 Tested On 10-07-2022, 14:09:16
 BPL DYNATRAC

Total METS achieved 10.60
 Maximum HR achieved 169 bpm, 89 % of 188 bpm
 Maximum ST depression (II) -0.86 mm
 Total Exercise time 08:58 (min.sec)

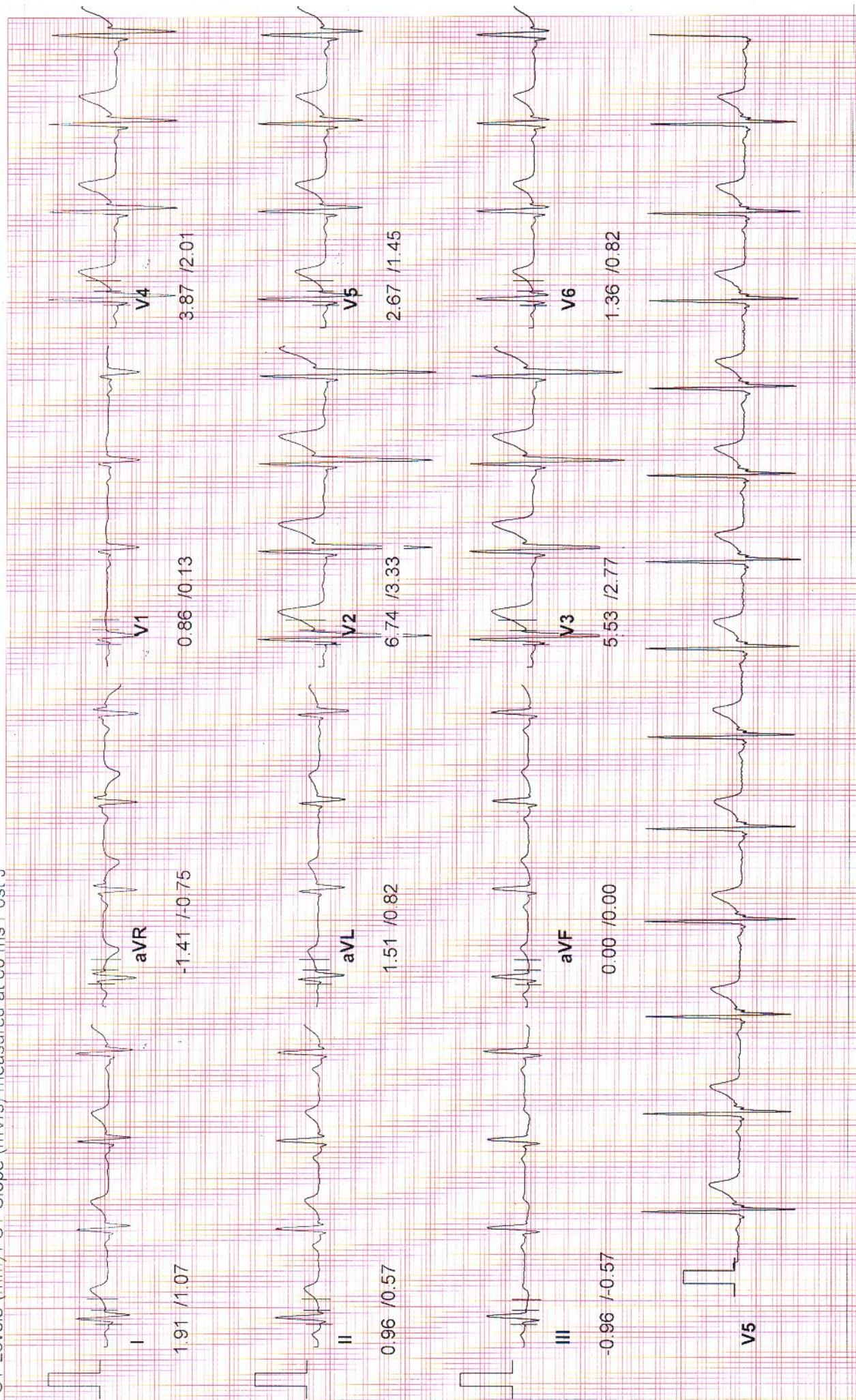
Stage Name	Time (min:sec)	Speed (kmph)	Grade (%)	HR (bpm)	BP (mmHg)	R.P.P	METS	STLevel (II)	Stage Comments
Pre-Test	00:15	0.00	0.00	90	0/0	0	0.00	0.75	
Supine	00:22	0.00	0.00	84	0/0	0	0.00	0.81	
Hyper Ventilation	00:13	0.00	0.00	88	0/0	0	0.00	0.96	
Wait For Exercise	01:58	0.00	0.00	96	0/0	0	0.00	1.16	
Exercise 1	02:55	2.70	10.00	126	130/80	16380	5.10	0.75	
Exercise 2	02:56	4.00	12.00	144	130/80	18720	7.10	-0.15	
Exercise 3	02:00	5.50	14.00	162	130/90	21060	10.00	-0.86	
Peak Exercise	00:57	6.80	16.00	169	140/90	23660	10.60	3.67	
Recovery 1	00:56	0.00	0.00	166	140/90	23240	0.00	0.10	
Recovery 2	01:54	0.00	0.00	141	130/80	18330	0.00	0.30	
Recovery 3	02:52	0.00	0.00	125	130/80	16250	0.00	0.55	
Recovery 4	03:41	0.00	0.00	118	130/80	15340	0.00	0.81	

ID : 121
 NAME : PIYUSH KUMAR
 AGE : 32
 BP : 0/0 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Supine
 RECORDED TIME : 00:43 (min.sec)
 STAGE DURATION : 00:25 (min.sec)
 HR : 86 bpm (45%)

PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00 %
 METs : 0.00

DR. VIJOND BHAT
 Tested On 10-07-2022, 14
 BPL DYNATRAC



ID : 121
 NAME : PIYUSH KUMAR
 AGE : 32
 BP : 0/0 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Wait For Exercise
 RECORDED TIME : 03:06 (min:sec)
 STAGE DURATION : 02:04 (min:sec)
 HR : 101 bpm (53%)

PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00 %
 METs : 0.00

DR.VIOND BHAT
 Tested On 10-07-2022, 14
 BPL DYNATRAC



121
 20 Hz Filter
 10mm/mV, 25mm/Sec

DR. VIOND BHAT
Tested On 10-07-2022, 14
BPL DYNATRAC

STAGE : Exercise1
RECORDED TIME : 03:00 (min:sec)
STAGE DURATION : 03:00 (min:sec)
HR : 125 bpm (66%)
PROTOCOL : BRUCE
SPEED : 2.7 kmph
GRADE : 10.00 %
METs : 5.10

ID : 121
NAME : PIYUSH KUMAR
AGE : 32
BP : 130/80 mmHg

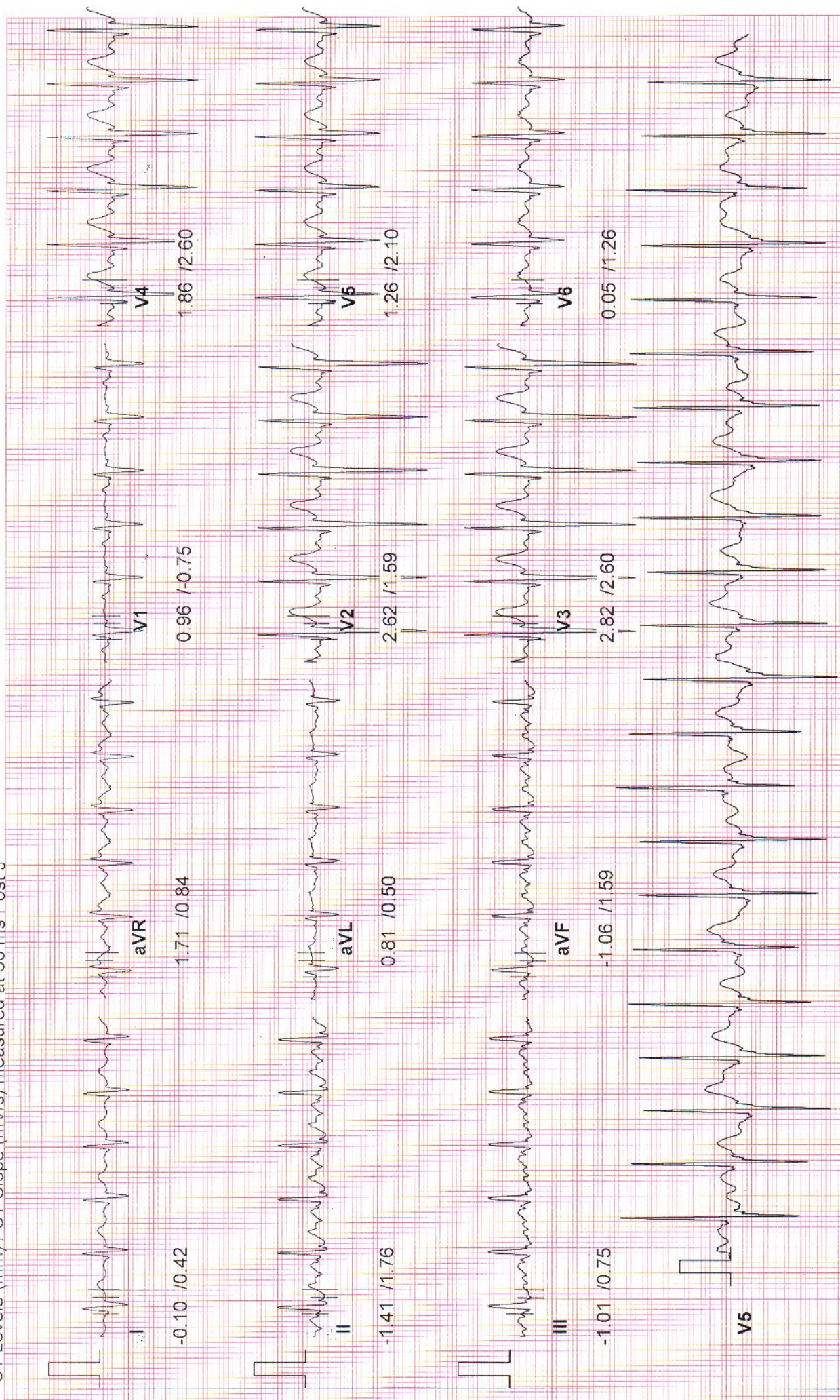
ST Levels (mm)/ST Slope (mV/s) measured at 60 ms Post J



ID : 121
 NAME : PIYUSH KUMAR
 AGE : 32
 BP : 130/80 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise2
 RECORDED TIME : 06:00 (min:sec)
 STAGE DURATION : 03:00 (min:sec)
 HR : 142 bpm (75%)
 PROTOCOL : BRUCE
 SPEED : 4.0 kmph
 GRADE : 12.00 %
 METs : 7.10

DR. VIOND BHAT
 Tested On : 10-07-2022, 14
 BPL DYNATRAC



ID : 121
 NAME : PIYUSH KUMAR
 AGE : 32
 BP : 130/90 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise3
 RECORDED TIME : 08:00 (min:sec)
 STAGE DURATION : 02:00 (min:sec)
 HR : 162 bpm (86%)

PROTOCOL : BRUCE
 SPEED : 5.5 kmph
 GRADE : 14.00 %
 METS : 10.00

DR. VIOND BHAT
 Tested On 10-07-2022, 14
 BPL DYNATRAC



ID : 121
 NAME : PIYUSH KUMAR
 AGE : 32
 BP : 140/90 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise4(Peak Ex) PROTOCOL : BRUCE
 RECORDED TIME : 08:58 (min.sec) SPEED : 6.8 kmph
 STAGE DURATION : 00:58 (min.sec) GRADE : 16.00 %
 HR : 171 bpm (90 %) METs : 10.60

DR.VIOND BHAT
 Tested On 10-07-2022, 14
 BPL DYNATRAC

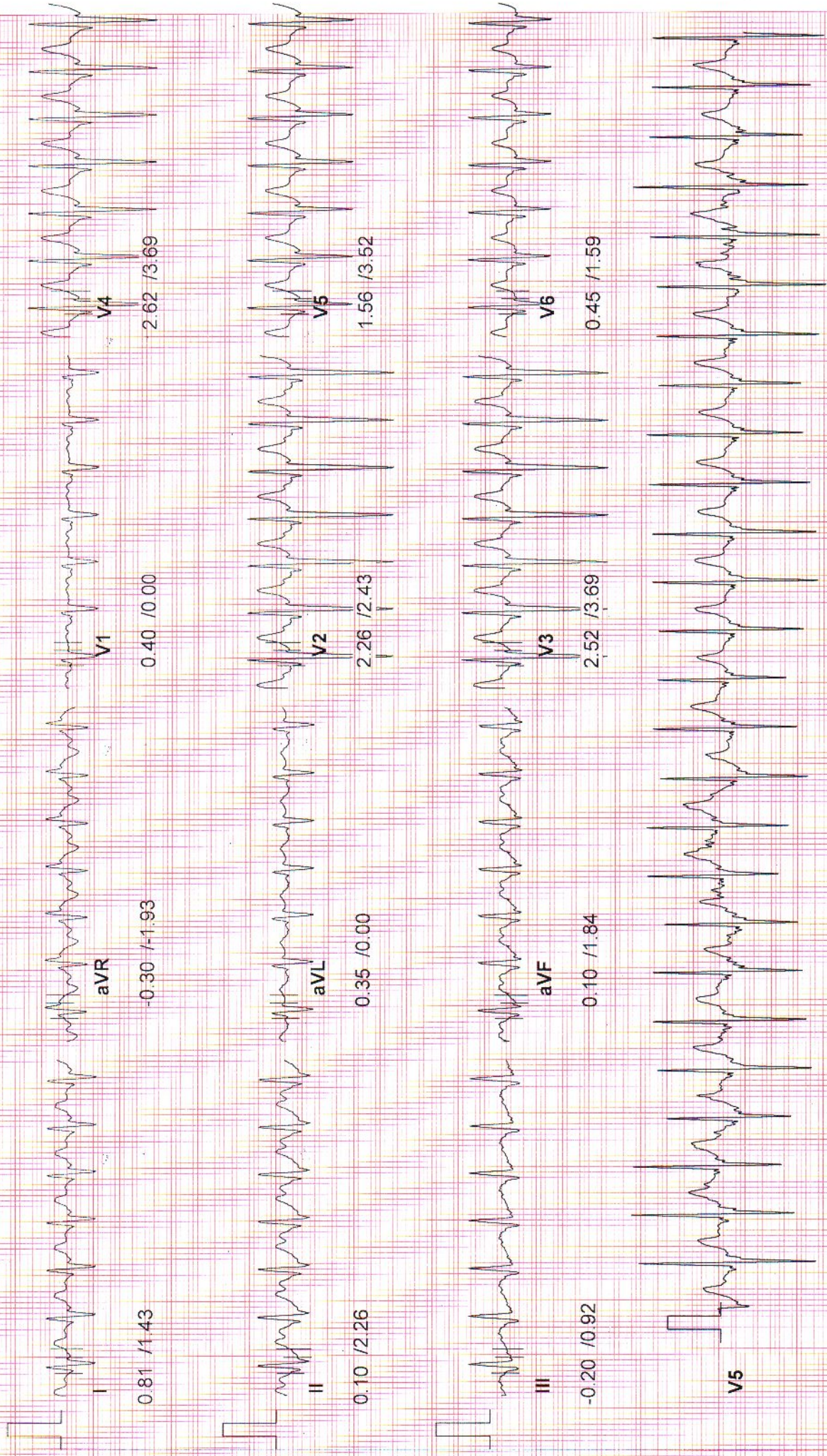


DR. VIJOND BHAT
 Tested On 10-07-2022, 14
 BPL DYNATRAC

STAGE : Recovery 1
 RECORDED TIME : 00.59 (min:sec)
 STAGE DURATION : 00.59 (min:sec)
 HR : 166 bpm (88 %)
 PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00 %
 METS : 0.00

ID : 121
 NAME : PIYUSH KUMAR
 AGE : 32
 BP : 140/90 mmHg

ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J



ID : 121
 NAME : PIYUSH KUMAR
 AGE : 32
 BP : 130/80 mmHg
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Recovery 3
 RECORDED TIME : 02:59 (min:sec)
 STAGE DURATION : 02:59 (min:sec)
 HR : 125 bpm (66%)

PROTOCOL : BRUCE
 SPEED : 0.0 kmph
 GRADE : 0.00%
 METs : 0.00

DR VIOND BHAT
 Tested On 10-07-2022, 14
 BPL DYNATRAC



10mm/mV, 25mm/Sec
20 Hz Filter
121