




PARKLINE DIAGNOSTICS PVT. LTD.

L.G. 3, 4 & 5, Bhuvana Towers, S.D. Road, Secunderabad - 500 003 Tel : 040-42038139, 27845852
7995421787, 7093445852 Email : parklinediagnostics@gmail.com www.parklinediagnostics.com



TEST REPORT

Name : **MR.M V ARUN KUMAR [MA40737]** TID/SID : UMR0978976/ 24311188
 Age / Gender : 59 Years / Male Registered on : 17-Dec-2022 / 08:37 AM
 Ref.By : - Collected on : 17-Dec-2022 / 08:39 AM
 Req.No  Reported on : 17-Dec-2022 / 12:35 PM
 BIL2642840 Reference : Medi Wheel

DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Colour Method:Photo detectors(instrument)	Straw		Light Yellow
Appearance Method:Photo diode array sensor	Clear		Clear
Specific gravity Method:Ion concentration/colour indicator	1.005		1.003-1.030
Reaction and pH Method:Double Indicator	6.0		5.0-8.0
Protein Method:Protein Error of pH indicators	Negative		Negative
Glucose Method:Double sequential enzymatic/GOD-PAP	Negative		Negative
Urobilinogen Method:Reagent strip/Reflectance photometry	Negative		0.2-1.0 mg%
Ketones Method:Strip method/Nitroprusside method	Negative		Negative
Blood Method:Peroxidase	Negative		Negative
Bile Salt Method:Hays Method	Negative		Negative
Bile Pigment Method:Fouchets Method	Negative		Negative
Microscopic Examination			
Pus cells (leukocytes) Method:Microscopy Of Sediment	1 - 2	/hpf	0-5 /hpf
RBC (erythrocytes) Method:Microscopy Of Sediment	Nil	/hpf	0-2 /hpf
Epithelial cells Method:Microscopy Of Sediment	Nil	/hpf	0-8 /hpf
Crystals Method:Microscopy Of Sediment	Nil	/lpf	Nil /lpf

Lab Timings (Weekdays) : 7.00 am to 8.30 pm
Sundays & Holidays : 7.00 am to 1.00 pm

Radiologists Timings (Weekdays) : 7.30 am to 1.30 pm
& 5.45 pm to 7.45 pm
Sundays & Holidays : 7.30 am to 9.30 am




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Certificate No.:MC-2566

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DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Casts	Nil	/lpf	Nil
Method:Microscopy Of Sediment			/lpf
Others	Nil		Nil
Method:Microscopy Of Sediment			

* Sample processed at Parkline

--- End Of Report ---

Dr.Jyothi Kiranmai
Regd. No: 52272
MD PATHOLOGY






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Ref.By : - Collected on : 17-Dec-2022 / 08:39 AM
Req.No  Reported on : 17-Dec-2022 / 12:46 PM
BIL2642840 Reference : Medi Wheel

DEPARTMENT OF HEMATOLOGY

Blood Grouping ABO And Rh Typing, EDTA Whole Blood

Parameter	Results
Blood Grouping (ABO)	B
Rh Typing (D)	POSITIVE -
Method:Agglutination	

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Reference : Medi Wheel
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DEPARTMENT OF HEMATOLOGY

Complete Blood Picture (CBP), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Hemoglobin	15.5	g/dL	13.0-17.0 g/dL
Method:Spectrophotometry			
Erythrocyte Count(RBC)	4.9	mill /cu.mm	4.5-5.5 mill /cu.mm
Method:Electrical Impedence			
PCV/HCT	44	%	40-50 %
Method:Numeric Integration			
MCV	90	fL	83-101 fL
Method:Calculated			
MCH	31.7	pg	27-32 pg
Method:Calculated			
MCHC	35.1	gm/dL	31.5-34.5 gm/dL
Method:Calculated			
RDW (CV)	14.2	%	11.6-14.0 %
Method:Calculated			
Total WBC Count	6.1	10 ³ /μL	4-10 10cap;3/μL 10 ³ /μL
Method:Impedence flowcytometry/Light scattering			
Differential Count			
Neutrophils	54	%	40-80 %
Method:Flowcytometry/Microscopy			
Lymphocytes	37	%	20-40 %
Method:Flowcytometry/Microscopy			
Monocytes	6	%	2-10 %
Method:Flowcytometry/Microscopy			
Eosinophils	3	%	1-6 %
Method:Flowcytometry/Microscopy			
Basophils	0	%	0-2 %
Method:Flowcytometry/Microscopy			
Absolute Neutrophil Count	3.29	10 ³ /μL	2.0-7.0 10 ³ /μL
Absolute Lymphocyte Count	2.26	10 ³ /μL	1.0-3.0 10 ³ /μL




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DEPARTMENT OF HEMATOLOGY

Complete Blood Picture (CBP), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Absolute Monocyte Count	0.37	10 ³ /μL	0.20-1.0 10 ³ /μL
Absolute Eosinophil Count	0.18	10 ³ /μL	0.02-0.5 10 ³ /μL
Absolute Basophil Count	00	10 ³ /μL	0.02-0.1 10 ³ /μL
Platelet Count	240	10 ³ /μL	150-410 10 ³ /μL
Method:Electrical Impedence			

Peripheral Smear

RBC Normocytic and Normochromic
Method:Microscopy
WBC Within normal limits.No abnormal cells seen.
Method:Microscopy
Platelets Discrete and adequate.Normal in morphology
Method:Microscopy

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DEPARTMENT OF HEMATOLOGY

Erythrocyte Sedimentation Rate (ESR), Sodium Citrate Whole Blood

Investigation	Observed Value	Units	Biological Reference Intervals
ESR 1st Hour Method:Westergren	07	mm/hour	0-10 mm/hour

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Ref.By : - Collected on : 17-Dec-2022 / 08:39 AM
Req.No :  Reported on : 17-Dec-2022 / 13:05 PM
Reference : Medi Wheel
BIL2642840

DEPARTMENT OF CLINICAL CHEMISTRY I

Blood Urea Nitrogen (BUN), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Blood Urea Nitrogen. Method:Calculated	8.0	mg/dL	7-23 mg/dL

Creatinine, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Creatinine. Method:Alkaline Picrate	1.02	mg/dL	0.60-1.30 mg/dL

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TEST REPORT

Name : **MR.M V ARUN KUMAR [MA40737]** TID/SID : UMR0978976/ 24311189F
Age / Gender : 59 Years / Male Registered on : 17-Dec-2022 / 08:37 AM
Ref.By : - Collected on : 17-Dec-2022 / 08:39 AM
Req.No  Reported on : 17-Dec-2022 / 15:40 PM
BIL2642840 Reference : Medi Wheel

DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Fasting (FBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Fasting Method:GOD - PAP	99	mg/dL	Normal: <100 Impaired FG: 100-125 Diabetic : \geq 126 mg/dL

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Name : **MR.M V ARUN KUMAR [MA40737]** TID/SID : UMR0978976/ 24311189P
Age / Gender : 59 Years / Male Registered on : 17-Dec-2022 / 08:37 AM
Ref.By : - Collected on : 17-Dec-2022 / 08:39 AM
Req.No  Reported on : 17-Dec-2022 / 15:40 PM
BIL2642840 Reference : Medi Wheel

DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Post Prandial (PPBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Post Prandial Method:GOD - PAP	108	mg/dL	Normal : 90 - 140 Impaired Glucose Tolerance: 141-199 Diabetic : \geq 200 mg/dL

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Ref.By : - Collected on : 17-Dec-2022 / 08:39 AM
Req.No  Reported on : 17-Dec-2022 / 14:24 PM
Reference : Medi Wheel
BIL2642840

DEPARTMENT OF CLINICAL CHEMISTRY I

Glycosylated Hemoglobin (HbA1C), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Glycosylated Haemoglobin Method:High Performance Liquid Chromatography(HPLC)	5.4	%	< 5.7% : Normal 5.7% - 6.4% : Prediabetes > 6.4% Diabetes
Mean Plasma Glucose (MPG) Estimate Method:Derived from HBA1c	108	mg/dL	Excellent Control : 90 to 120 Good Control : 121 to 150 Average Control : 151 to 180 Panic Value : > 211 mg/dL

Note:Mean Plasma Glucose is calculated from HBA1c value and it indicates Average Blood Sugar level over the past three months.

INTERPRETATION :

- 1.Glycated hemoglobin (glycohemoglobin / HbA1c) is a form of hemoglobin (Hb) that is chemically linked to a sugar.
- 2.A1c is measured primarily to determine the three-month average blood sugar level and can be used as a diagnostic test for diabetes mellitus and as an assessment test for glycemic control in people with diabetes.
- 3.In diabetes, higher amounts of glycated hemoglobin, indicating poorer control of blood glucose levels, have been associated with cardiovascular disease, nephropathy, neuropathy, and retinopathy.
4. American diabetes Association (ADA) recommends an A1C goal for many non pregnant adults of < 7% (without significant hypoglycemia). On the basis of provider judgment and patient preference, achievement of lower A1C levels than the goal of 7% may be acceptable, and even beneficial, if it can be achieved safely without significant hypoglycemia or other adverse effects of treatment. Less stringent A1C goals (such as < 8%) may be appropriate for patients with severe hypoglycemia, extensive co morbid conditions etc, or where the harms of treatment are greater than the benefits.
5. Glycemic goals for some older adults might reasonably be relaxed as part of individualized care, but hyperglycemia leading to symptoms or risk of acute hyperglycemia complications should be avoided in all patients.

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Req.No	:  BIL2642840	Reported on	: 17-Dec-2022 / 13:05 PM
		Reference	: Medi Wheel

DEPARTMENT OF CLINICAL CHEMISTRY I

Lipid Profile, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Cholesterol Method:CHOD-PAP	173	mg/dL	Desirable Level: < 200 Borderline : 200 - 239 High : > 240 mg/dL
HDL Cholesterol Method:Enzymatic Reaction	48	mg/dL	<40:Major risk factor for heart disease 40-59:The higher,the better >=60:Considered protective against heart disease mg/dL
LDL Cholesterol Method:Calculated	111	mg/dL	< 100 mg/dL
VLDL Cholesterol Method:Calculated	14	mg/dL	10-55 mg/dL
Triglycerides Method:GPO-POD	73	mg/dL	Normal:<150 Borderline:150-199 High:200-499 Very High:>=500 mg/dL
Chol/HDL Ratio Method:Calculated	3.60		Normal : <4 Low risk : 4 - 6 High risk : >6
LDL Cholesterol/HDL Ratio	2.31		

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Reference : Medi Wheel
BIL2642840

DEPARTMENT OF CLINICAL CHEMISTRY I

Liver Function Test (LFT), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Bilirubin. Method:Diazo with sulphanilic acid	0.48	mg/dL	0.3-1.2 mg/dL
Direct Bilirubin. Method:Diazo with sulphanilic acid	0.12	mg/dL	0.00-0.40 mg/dL
Indirect Bilirubin. Method:Calculated	0.36	mg/dL	
Alanine Aminotransferase ,(ALT/SGPT) Method:IFCC without P5P	37	U/L	10-40 U/L
Aspartate Aminotransferase,(AST/SGOT) Method:IFCC without P5P	25	U/L	10-40 U/L
ALP (Alkaline Phosphatase). Method:AMP-IFCC	56	U/L	30-115 U/L
PROTEINS			
Total Protein. Method:Biuret	7.07	g/dL	6.0-8.0 g/dL
Albumin. Method:Bromocresol Green (BCG)	3.92	g/dL	3.5-4.8 g/dL
Globulin. Method:Calculated	3.15	g/dL	2.3-3.5 g/dL
A/GRatio. Method:Calculated	1.24		0.8-2.0
Gamma GT. Method:IFCC-Enzymatic	23	U/L	7.0-50.0 U/L

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Reference : Medi Wheel
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DEPARTMENT OF CLINICAL CHEMISTRY I

Prostate Specific Antigen (PSA) Total, Serum

Investigation	Observed Value	Biological Reference Interval
Prostate Specific Antigen (PSA) Total Method:Enhanced chemiluminescence	1.00 ng/mL	0-3.9 ng/mL

Interpretation:

- 1.Prostate specific antigen (PSA) is a glycoprotein that is expressed by both normal and neoplastic prostate tissue
- 2.Elevated serum PSA concentrations are found in men with prostate cancer, benign prostatic hyperplasia (BPH) or inflammatory conditions of other adjacent genitourinary tissues. PSA can also be elevated after digital rectal examination,prostatic massage,cystoscopy,needle biopsy etc
- 3.Measurement of serum PSA by itself is not recommended as a screening procedure for the diagnosis of cancer because elevated PSA levels are also observed in patients with benign prostatic hyperplasia.
4. When employed for the management of prostate cancer patients, serial measurement of PSA is useful in detecting residual tumor and recurrent cancer after radical prostatectomy.
- 5.PSA has been demonstrated to be an accurate marker for monitoring advanced clinical stage in untreated patients and for monitoring response to therapy by radical prostatectomy, radiation therapy and anti-androgen therapy.

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Reference : Medi Wheel
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DEPARTMENT OF CLINICAL CHEMISTRY I

Thyroid Profile (T3,T4,TSH), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Triiodothyronine Total (T3) Method:Enhanced chemiluminescence	1.48	ng/mL	0.970-1.69 ng/mL
Thyroxine Total (T4) Method:Enhanced chemiluminescence	9.20	µg/dL	5.53-11.0 µg/dL
Thyroid Stimulating Hormone (TSH) Method:Enhanced chemiluminescence	1.93	µIU/mL	0.465-4.68 µIU/mL

Note: Change in method and reference range
NOTE:

TSH - Reference ranges during pregnancy:*

1st Trimester : 0.10 - 2.50

2nd Trimester : 0.20 - 3.00

3dr Trimester : 0.30 - 3.00

*As per the Guidelines of American Thyroid Association for the diagnosis and management of thyroid disease during pregnancy and post partum.

1.Primary Hyperthyroidism is accompanied by elevated T3 & T4 values along with depressed TSH level.

2.Primary Hypothyroidism is accompanied by depressed T3 & T4 levels and elevated TSH levels.

3.Normal T4 levels accompanied by high T3 levels are seen in patients with T3 Thyrotoxicosis.

4.Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol and propylthiouracil.

5.Although elevated TSH levels are nearly always indicative of primary hypothyroidism, rarely they can result form TSH secreting pituitary tumors(secondary).

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DEPARTMENT OF CLINICAL CHEMISTRY I

Uric Acid, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Uric Acid. Method:Uricase	5.68	mg/dL	2.5-8.0 mg/dL

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Name : **MR.M V ARUN KUMAR [MA40737]** TID/SID : UMR0978976/ 24313470
Age / Gender : 59 Years / Male Registered on : 17-Dec-2022 / 08:37 AM
Ref.By : - Collected on : 17-Dec-2022 / 08:39 AM
Req.No  Reported on : 17-Dec-2022 / 15:48 PM
BIL2642840 Reference : Medi Wheel

DEPARTMENT OF HEALTH CHECKUP

Glucose Urine Fasting

Urine Glucose Fasting Nil NIL
Method:Reagent strip/Reflectance photometry

Glucose Urine Post Prandial

Urine Glucose Post Prandial Nil NIL
Method:Reagent strip/Reflectance photometry

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Email parklinediagnostics@gmail.com www.parklinediagnostics.com



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Certificate No.MC-

MEDICAL EXAMINATION REPORT

Name	Mr. M.V. Arun Kumar		Date : 17/12/2022
Company	C/o: Mediwheel		Reg. No. : 260280
Contact No.	9866099632		Sex <input checked="" type="checkbox"/> M Age : <input type="checkbox"/> 59
Type	Pre-Emp		Emp. No.: MA40732
	Overseas		Height 170cm
	Annual	<input checked="" type="checkbox"/>	Weight 85 kgs.
Remarks	<p>- Both physical and lab parameters within \approx limits.</p>		
Fitness Status	Medically Fit / Unfit		<p>DR. PRIYANKA SANNIDHI MBBS Regn. No 11351</p> <p>Physician's Signature</p>

COMPREHENSIVE MEDICAL EXAMINATION REPORT

NAME Mr. M.V. ARUN KUMAR

AGE 59 yrs Male

MARITAL STATUS Married CHILDREN : M F

IDENTIFICATION (IF ANY) A mole on the left thigh.

PAST HISTORY

Any family H/o : High Blood Pressure, Heart Disease, Tuberculosis, Diabetes, Asthma, Cancer

Any personal H/o Major illness like : Typhoid.....NIL.....Jaundice.....NIL.....Etc.

Any H/o STD.....Skin infection.....NIL

H/o Blood Transfusion.....Recent Vaccination.....COVID19 2 Doses ✓

H/o Epilepsy.....NIL.....Giddiness.....NIL

H/o Surgery.....Fracture in the past.....NIL

Any Personal H/O.

High Blood Pressure, Heart Disease Tuberculosis, Diabetes, Asthma, Cancer

Drug Abuse, Drug Allergy, Micturition, Bowels, Alcohol, Smoking, Sleep, MC, Wt. Loss/Wt. Gain

occasional

Present illness / Medication _____

GENERAL EXAMINATION

Conjunctiva :	Bone, Joints :	<u>Normal</u>
Skin :	Nutritional Status :	<u>Well Nourished</u>
Ears :	Lymph Nodes :	<u>NPD</u>
Nose :	Edema Feet :	<u>NIL</u>
Throat & Oral Cavity :	Varicose Veins :	<u>NAD</u>

Distant Vision : Near Vision :

Right Eye: 6/6

With glasses / Without glasses

left Eye: 6/6

with glasses / without glasses

Right Eye: N10 +3.0 sph

With glasses / Without glasses

left Eye: N10 +3.0 sph

with glasses / without glasses

Colour Vision :

DE normal
Hb IOL (CF)

Ophthalmologist's Signature

Right Ear

Left Ear

Hearing :

(N)

(N)

Rinee's Test ;

Weber Test :

Discharge :

NIL

NIL

SYSTEMIC EXAMINATION

Pulse : 76 bpm

B.P. : 140/90 mmHg

Lungs : A. Shape of Chest B/L symmetrical
B. Breath Sounds B/L - clear ⊕
C. Adventitious Sounds No

Heart : A. Sounds S₁ S₂ ⊕
B. Murmurs No murmurs

Abdomen : A. Liver NPD
B. Spleen NPD
C. Piles NIL
D. Any Lump NAD

Nervous System

A. Higher Function :
B. Cranial Nerves :
C. Sensory System :
D. Motor System :
E. Jerks :

(N)

General : A. Hernia
B. Hydrocele
C. Varicocele
NAD

Breast : Rt _____ Lt. _____

CANDIDATE'S DECLARATION

I hereby solemnly declare that I am not suffering from Asthma, Hypertension, Diabetes, Occult Psychological disorders or any other ailment which can be suppressed without my voluntary declaration.

Date :



Signature

Place :

Note : General Physical Examination and Investigation included in the health check-up Have certain limitations and may not be able to detect all latent and asymptomatic diseases. Any new symptoms developing after the health check-up or persisting thereafter should be brought to the attention of the treating physician.



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Certificate No. M-0862

ENT CONSULTATION

S.No. 2642840

Emp.No. MA40732

Date 17/12/22

Name Mr. M.V. Arun Kumar Age 59 Yrs

Sex M/F

EARS : Right Left

EAC	:	(N)	(N)
TM	:	(?) (N)	(N) (N)
TFT	:	Reiner's Ac>Rc Wabes ABC ← → cd some as earache	Ac>Bc

NOSE : Septum cd (N)

THROAT : AD, TF, PPW (N)

NECK : No ct / ltr neck swelling

IMPRESSION : ENT within (N) limits

h
Dr. POORNIMA
M.B.B.S., D.L.O., (ENT)
Reg No. 100155 (KMC)
Consultant ENT



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TEST REPORT

Name : **Mr . M V ARUN KUMAR [MA40737]**
Age / Gender : 59 Years / Male
Ref.By :
Req. No : BIL2642840

TID : UMR0978976
Registered on : 17-Dec-2022 08:37 AM
Reported On : 17-Dec-2022 10:03 AM
Reference : Medi Wheel

DEPARTMENT OF ULTRASOUND Ultrasound Whole Abdomen

LIVER : Normal in size and increased echotexture. No focal lesions.
No IHBB /CBD dilatation. Portal vein is normal in size.

SPLEEN : Normal in size and echotexture. No focal lesion seen.

GALL BLADDER : Well distended. No sludge / gall stones / sol.
Gall bladder -Wall thickness is normal.
No pericholecystic oedema.

PANCREAS : Normal in size and echotexture.No calcification / sol.
Pancreatic duct is normal. No peripancreatic fluid collection.

RIGHT KIDNEY : 9.8 x 5.1 cms
Normal in size and echotexture.
Cortical thickness is normal.
No evidence of calculi / sol.
Pelvi calyceal system is normal.

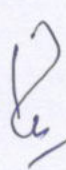
LEFT KIDNEY : 9.8 x 5.6 cms
Normal in size and echotexture.
Cortical thickness is normal.
No evidence of calculi / sol.
Pelvi calyceal system is normal.

URINARY BLADDER : Well distended. Normal ii contour.
Wall thickness is normal. No calculus / sol.

PROSTATE : Measuring 3.9 x 3.4 x 2.9 (Vol :20.8 cc) Normal in size and echotexture normal.
No calcification / sol.
No pre or para aortic adenopathy / ascites noted.

IMPRESSION : Grade I fatty liver.

Clinical correlation


Dr. D.J. MOHAN
MD DMRD
(Reg No. 8995)
Consultant Radiologist



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7995421787, 7093445852 Email : parklinediagnostics@gmail.com www.parklinediagnostics.com

TEST REPORT

Name : **Mr . M V ARUN KUMAR [MA40737]**
Age / Gender : 59 Years / Male
Ref.By :
Req. No : BIL2642840

TID : UMR0978976
Registered on : 17-Dec-2022 08:37 AM
Reported On : 17-Dec-2022 12:05 PM
Reference : Medi Wheel

X-RAY CHEST PA VIEW

Mild cardiomegaly with unfolding of Aorta.

Lung fields are clear.

Hila are normal.

C P angles are free.

Bony cage is normal.

Soft tissues are normal.

Advised: Clinical correlation.


Dr. PRAJAKTA SUKHADEVE
DNB RADIOLOGY
Reg. No. 68493

PATIENT SUMMARY REPORT

PARKLINE DIAGNOSTICS PVT.LTD

ID : 2642840
NAME : MR.M.V. ARUN KUMAR
AGE / SEX : 59 / MALE

HEIGHT (cm) : 170
WEIGHT (kg) : 85
PROTOCOL : BRUCE

REF. BY : MEDIWHEEL
DONE BY : DR.PRASHANTH P
TECHNICIAN : G.M.SURESH

CASE HISTORY :

MEDICATION :

OBJECT OF TEST : Routine Check Up.

RISK FACTOR : None

ACTIVITY : Very Active.

OTHER INVESTIGATION : ECG

REASON FOR TERMINATION : THR ACHIEVED

EXERCISE TOLERANCE : Good (> 10 METS).

EXERCISE INDUCED ARRHYTHMIAS : No.

HAEMO RESPONSE : Normal.

CHRONO RESPONSE : Normal.

FINAL IMPRESSION :

EXTRA COMMENTS

*TMT
Negative
for inducible
ischaemia*



DR. PRASHANT PHADTARE
DM CARDIOLOGY
MMC - 1848

Confirmed By _____

Signature

ID: 2642840 17-12-2022 11:08:59 AM
MR M V ARUN KUMAR
Male 59Years

CARDIART

HR : 74 bpm
P : 102 ms
PR : 152 ms
QRS : 81 ms
QT/QTc : 366/408 ms
P/QRS/T : 29/49/24 °
RV5/SV1 : 1.659/1.032 mV

Diagnosis Information:
Sinus Rhythm
Normal ECG

WNL



DR. PRASHANT PHADTARE
DM CARDIOLOGY
MMC - 1848

Report Confirmed by: