

Patient Name : NAGENDRA SHEKHAWAT

Age / Gender : 32 years / Male

Endo ID : 126183

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL



Collected Date & Time : May 31, 2023, 09:52 a.m.

Reported Date & Time : May 31, 2023, 11:27 a.m.

Sample ID :



231510011

Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY

LIPID PROFILE

Cholesterol Total Method : ENZYMETIC COLORIMETRIC METHOD CHOD - POD	208.0	mg/dL	130 -250
Triglycerides Method : ENZYMETIC COLORIMETRIC	232.7	mg/dL	60 -170
HDL Cholesterol Method : PHOSPHOTUNGSTIC ACID	50.2	mg/dL	Normal: 40-60 Major Risk for Heart: > 60
VLDL Cholesterol Method : Calculated	46.54	mg/dL	6 - 38
LDL Cholesterol Method : Calculated	111.26	mg/dL	Optimal < 100 Near / Above Optimal 100-129 Borderline High 130-159 High 160-189 Very High >or = 190
CHOL/HDL Ratio Method : Calculated	4.14		2.6-4.9
LDL/HDL Ratio Method : Calculated	2.22		0.5-3.4

END OF REPORT

Dr. Nishi Prasad
M.D. (Patho.)

Patient Name : NAGENDRA SHEKHAWAT

Age / Gender : 32 years / Male

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Referral : MEDIWHEEL



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Test Description	Value(s)	Unit(s)	Reference Range
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IMMUNOLOGY

T3-Triiodothyronine Method : CHEMILUMINOSCECE	0.78	ng/dL	0.60-1.81
T4-Thyroxine Method : CHEMILUMINOSCECE	7.0	ug/dL	4.5 - 10.9
TSH -ULTRA SENSITIVE Method : CHEMILUMINOSCECE	3.88	uIU/mL	0.35 - 5.50

Interpretation:

TSH measurement is useful in screening and diagnosis for euthyroidism, hyperthyroidism and hypothyroidism. TSH levels may be affected by acute illness and drugs like doapmine and glucocorticoids. Low or undetectable TSH is suggestive of graves disease TSH between 5.5 to 15.0 with normal T3 T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3 T4 with slightly low TSH suggests subclinical Hyperthyroidism. TSH suppression does not reflect severity of hyperthyroidism therefore , measurement of FT3 FT4 is important. FreeT3 is first hormone to increase in early Hyperthyroidism. Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3 , FreeT4 along with TSH should be checked.

END OF REPORT

Dr. Nishi Prasad
M.D. (Patho.)

Patient Name : NAGENDRA SHEKHAWAT

Age / Gender : 32 years / Male

Endo ID : 126183

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL



Collected Date & Time : May 31, 2023, 09:52 a.m.

Reported Date & Time : May 31, 2023, 11:18 a.m.

Sample ID :



231510011

Test Description	Value(s)	Unit(s)	Reference Range
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HAEMATOLOGY

HbA1c (GLYCOSYLATED HEMOGLOBIN)

4.9

%

> 8% Action Suggested

7 - 8 % Good Control

< 7% Goal

6 - 7 % Near Normal Glycemia

< 6% Normal level

BLOOD

Method : Nephelometry Methodology

Instrument:Mispa i2

Clinical Information:

Glycated hemoglobin measurement is not appropriate where there has been a change in diet or treatment within 6 weeks. Hence, people with recent blood loss, hemolytic anemia, or genetic differences in the hemoglobin molecule (hemoglobinopathy and Hb variants viz: HbS,HbC,HbE, HbD,elevated HbF, as well as those that have donated blood recently, are not suitable for this test. Conditions associated with false increased HbA1C values: HbF, Uremia,Lead Poisoning, Hypertriglyceridemia, Alcoholism, Opiate addiction, Iron deficiency state,Postsplenectomy, Hyperbilirubinemia, Chronic aspirin therapy. Conditions associated with false low HbA1C values: HbS, HbC, Hemolytic anemia, Pregnancy, Acute or chronic blood loss

AVERAGE BLOOD GLUCOSE

93.93

90 - 120 Very Good Control

121 - 150 Adequate Control

51 - 180 Sub-optimal Control

181 - 210 Poor Control

> 211 Very Poor Control

END OF REPORT

Dr. Nishi Prasad

M.D. (Patho.)

Patient Name : NAGENDRA SHEKHAWAT

Age / Gender : 32 years / Male

Endo ID : 126183

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL



Collected Date & Time : May 31, 2023, 09:52 a.m.

Reported Date & Time : May 31, 2023, 11:28 a.m.

Sample ID :



231510011

Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY

RENAL FUNCTION TEST

Urea Method : Uricase	24.0	mg/dL	10 - 45
Creatinine Method : Serum, Jaffe	0.92	mg/dL	0.6 - 1.4
Uric Acid Method : Serum, Uricase	7.4	mg/dL	3.0 - 7.0
Calcium Method : ARSENASO with serum	9.4	mg/dl	8.6 - 10.2
Sodium Method : Ion-Selective Electrode with serum	140	mmol/L	135 - 145
Potassium Method : Ion Selective Electrode with serum	3.7	mmol/L	3.50 - 5.00
Chlorides Method : Ion-Selective Electrode with serum	101	mmol/L	98 - 106

END OF REPORT

Dr. Nishi Prasad
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Sample ID :



231510011

Test Description	Value(s)	Unit(s)	Reference Range
HAEMATOLOGY			
Hemoglobin (HB)	12.6	gm/dl	13.5 - 18.0
Erythrocyte (RBC) Count	6.03	mil/cu.mm	4.7 - 6.0
Packed Cell Volume (PCV)	40	%	42 - 52
Mean Cell Volume (MCV)	66.4	FL	78 - 100
Mean Cell Haemoglobin (MCH)	20.9	Pg	27 - 31
Mean Corpuscular Hb Conc. (MCHC)	31.5	g/dl	32 - 36
Red Cell Distribution Width (RDW)	16.3	%	11.5 - 14.0
Total Leucocytes Count (WBC)	8320	Cell/cu.mm	4000 - 10000
Neutrophils	54	%	40 - 80
Lymphocytes	40	%	20 - 40
Monocytes	03	%	2 - 10
Eosinophils	03	%	1-6
Basophils	00	%	0-1
Mean Platelet Volume (MPV)	12.1	fL	7.2 - 11.7
PCT	0.13	%	0.2 - 0.5
Platelet Count	120	10 ³ /ul	150 - 450

END OF REPORT

Dr. Nishi Prasad
M.D. (Patho.)

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Endo ID : 126183

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Referral : MEDIWHEEL

Collected Date & Time : May 31, 2023, 09:52 a.m.

Reported Date & Time : May 31, 2023, 11:31 a.m.

Sample ID :



231510011



Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY

IRON - SERUM	69.0	ug/dL	65 - 175
TOTAL IRON BINDING CAPACITY(TIBC)	402	ug/dL	228 - 428
FERRITIN	259	ng/mL	Male:22-322 Female:10-291
TRANSFERRIN SATURATION %	17.16	%	16 - 50

Method : Serum CLIA

Method : Calculated

INTERPRETATION

The serum iron test is used to measure the amount of iron that is in transit in the body – the iron that is bound to transferrin in the blood. Along with other tests, it is used to help detect and diagnose iron deficiency or iron overload. Testing may also be used to help differentiate various causes of anemia. The amount of iron present in the blood will vary throughout the day and from day to day. For this reason, serum iron is almost always measured with other iron tests, including ferritin, transferrin, and calculated total iron-binding capacity (TIBC) and transferrin saturation. Serum ferritin appears to be in equilibrium with tissue ferritin and is a good indicator of storage iron in normal subjects and in most disorders. In patients with some hepatocellular diseases, malignancies and inflammatory diseases, serum ferritin is a disproportionately high estimate of storage iron because serum ferritin is an acute phase reactant. In such disorders iron deficiency anemia may exist with a normal serum ferritin conc. In the presence of inflammation, persons with low serum ferritin are likely to respond to iron therapy.

Increased Levels -

Iron overload – Hemochromatosis, Thalassemia & Sideroblastic anemia

-Malignant conditions - Acute myeloblastic & Lymphoblastic leukemia, Hodgkin's disease & Breast carcinoma

-Inflammatory diseases - Pulmonary infections, Osteomyelitis, Chronic UTI, -Rheumatoid arthritis, SLE, burns, Acute & Chronic hepatocellular disease

Decreased Levels

-Iron deficiency anemia

Dr. Nishi Prasad

M.D. (Patho.)

Consultant Radiologist & Sonologist

Dr. Roopa Goyal

MD (Radio-Diagnosis)

GOYAL
DIAGNOSTICS
4-D ULTRASOUND • COLOUR DOPPLER

SHOP NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948

Patient Name : NAGENDRA SHEKHAWAT

Age / Gender : 32 years / Male

Endo ID : 126183

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL



Collected Date & Time : May 31, 2023, 09:52 a.m.

Reported Date & Time : May 31, 2023, 11:31 a.m.

Sample ID :



231510011

Test Description	Value(s)	Unit(s)	Reference Range
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END OF REPORT

Dr. Nishi Prasad
M.D. (Patho.)

Patient Name : NAGENDRA SHEKHAWAT

Age / Gender : 32 years / Male

Endo ID : 126183

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL



Collected Date & Time : May 31, 2023, 09:52 a.m.

Reported Date & Time : May 31, 2023, 11:59 a.m.

Sample ID :



231510011

Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY

C-Reactive Protein; CRP, SERUM	1.08	mg/L	0.0-6.0
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Interpretation :

1. Measurement of CRP is useful for the detection and evaluation of infection, tissue injury, inflammatory disorders and associated diseases .
2. High sensitivity CRP (hsCRP) measurements may be used as an independent risk marker for the identification of individual at risk for future cardiovascular disease.
3. Increase in CRP values are non-Specific and should not be interpreted without a complete history.

END OF REPORT

Dr. Nishi Prasad
M.D. (Patho.)

Patient Name : NAGENDRA SHEKHAWAT

Age / Gender : 32 years / Male

Endo ID : 126183

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL



Collected Date & Time : May 31, 2023, 09:52 a.m.

Reported Date & Time : May 31, 2023, 11:31 a.m.

Sample ID :



231510011

Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY

LIVER FUNCTION TEST

Bilirubin - Total	1.13	gm/dl	0.0 - 1.20
Bilirubin - Direct	0.27	mg/dL	0.00 - 0.30
Bilirubin - Indirect	0.86	mg/dL	0.1 - 1.0
Method : Calculated			
ASPARTATE AMINO TRANSFERASE (SGOT-AST)	25.9	U/L	5.0-40.0
Method : IFCC with Serum			
ALANINE AMINO TRANSFERASE (SGPT-ALT)	30.0	U/L	5.0 - 40.0
Method : IFCC with POD Serum			
Alkaline Phosphatase	95.1	U/L	MALE & FEMALE
Method : IFCC with Serum			4-19 YEAR: 54-369 U/L
			20-59 YEAR: 42-98 U/L
			>60 YEAR: 53-141 U/L
Total Protein	7.20	g/dL	6.00 - 8.00
Method : Biuret, with Serum			
Albumin	4.34	g/dL	3.40 - 5.50
Method : Tech; BCG with Serum			
Globulin	2.86	g/dL	1.5 - 3.5
Method : Calculated			
A/G Ratio	1.52		1.5 - 2.5
Method : Calculated			

END OF REPORT

Dr. Nishi Prasad
M.D. (Patho.)

Patient Name : NAGENDRA SHEKHAWAT

Age / Gender : 32 years / Male

Endo ID : 126183

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL



Collected Date & Time : May 31, 2023, 09:52 a.m.

Reported Date & Time : May 31, 2023, 11:32 a.m.

Sample ID :



231510011

Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY

Gamma GT	24	U/L	8-61
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Method : G-Glutamyl-Carboxy-Nitroanilide

Interpretation

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

END OF REPORT

Dr. Nishi Prasad
M.D. (Patho.)

Consultant Radiologist & Sonologist

Dr. Roopa Goyal

MD (Radio-Diagnosis)

GOYAL
DIAGNOSTICS
4-D ULTRASOUND • COLOUR DOPPLER

SHOP NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948

Patient Name : NAGENDRA SHEKHAWAT

Age / Gender : 32 years / Male

Endo ID : 126183

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL

Collected Date & Time : May 31, 2023, 09:52 a.m.

Reported Date & Time : May 31, 2023, 12:02 p.m.

Sample ID :



231510011



Test Description	Value(s)	Unit(s)	Reference Range
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HAEMATOLOGY

ESR	30	mm	0 - 20
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END OF REPORT

Dr. Nishi Prasad
M.D. (Patho.)

Patient Name : NAGENDRA SHEKHAWAT

Age / Gender : 32 years / Male

Endo ID : 126183

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL



Collected Date & Time : May 31, 2023, 09:52 a.m.

Reported Date & Time : May 31, 2023, 11:43 a.m.

Sample ID :



231510011

Test Description	Value(s)	Unit(s)	Reference Range
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HAEMATOLOGY

BLOOD GROUP ABO AND RHTYPE

'O' NEGATIVE

Method : Gel Technique & Tube Agglutination

Medical Remark :

The blood group done is forward blood group only. In case of any discrepancy kindly contact the lab

END OF REPORT

Dr. Nishi Prasad

M.D. (Patho.)

Consultant Radiologist & Sonologist

Dr. Roopa Goyal

MD (Radio-Diagnosis)

GOYAL
DIAGNOSTICS
4-D ULTRASOUND • COLOUR DOPPLER

SHOP NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948

Patient Name : NAGENDRA SHEKHAWAT

Age / Gender : 32 years / Male

Endo ID : 126183

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL



Collected Date & Time : May 31, 2023, 09:52 a.m.

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231510011

Test Description	Value(s)	Unit(s)	Reference Range
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BIOCHEMISTRY

Glucose fasting	93.0	mg/dL	70.0-110.0
Method : Fluoride Plasma-F, Hexokinase			

END OF REPORT

Dr. Nishi Prasad
M.D. (Patho.)

NAME- Nagendra

AGE- 32 yrs

DATE - 31-5-23

REF.BY - BOB

USG ABDOMEN

Liver is Enlarged homogeneous in echotexture. Margins are smooth and regular. No focal lesion is seen. IHBRs and hepatic veins are normal in caliber. Portal vein is normal in caliber. Rt Lobe- 15 mm

Gall bladder is distended and normal in size, shape and wall thickness. No evidence of calculus/sludge or mass lesion is noted. CBD is normal in diameter.

Pancreas is normal in size, shape and homogeneous in echotexture. No focal lesion is seen. Pancreatic duct is not dilated.

Spleen is normal in size, shape and homogeneous in echotexture.

Right kidney is normal in size, shape & echotexture, C-M differentiation is maintained. No calculus and hydronephrosis is seen.

Left kidney is normal in size, shape & echotexture, C-M differentiation is maintained. No calculus and hydronephrosis is seen.

Urinary bladder is normally distended. Wall thickness is normal. No evidence of calculus or mass lesion is seen.

Prostate is Normal

IMPRESSION: Enlarged Fatty Liver

ADVISE -Clinical correlation and further evaluation.

GOYAL (I.D.)
Reg. No. 004507/15600
DR. ROOPA GOYAL
[MD RADIOLOGIST]
[RMC NO 004507/15600]

Note- 1. This report is not valid for medico legal purpose.

2. Sonography reports should be viewed in correlation with Clinical findings. If any doubt, USG may be repeated.

भ्रूण लिंग परीक्षण करवाना जघन्य अपराध है तथा इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है

भ्रूण लिंग परीक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है।

DAY BMD OPG MAMMOGRAPHY CLINICAL LAB. PAP SMEAR FNAC
THIS REPORT IN NOT MEANT FOR MEDICO-LEGAL PURPOSE.

Patient Name: Mr. NARENDRA 32/M

5 Seconds ECG Report

May 31, 2023

Time 09:42:22

P-QRS-T Axis (0)-(44)-(142) deg

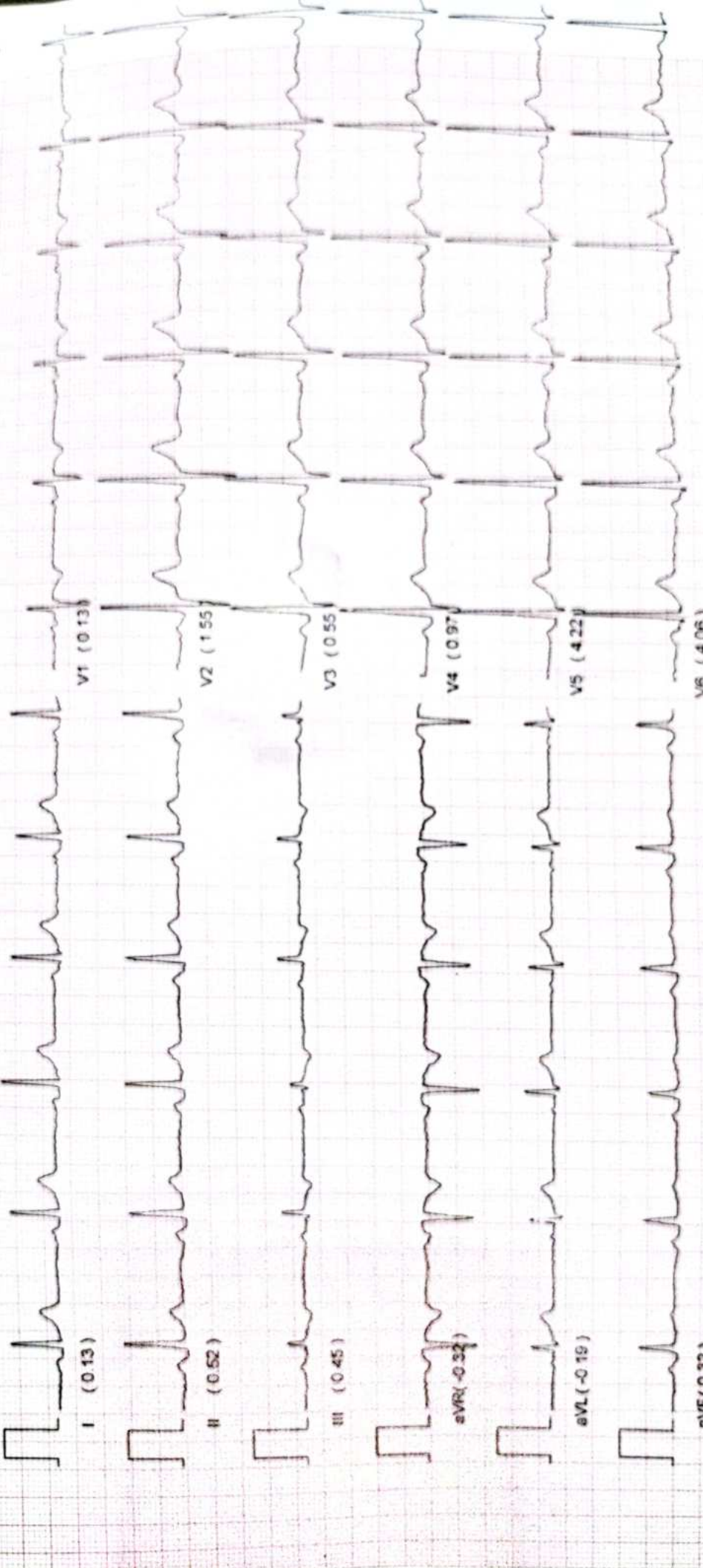
PR Interval: 0.08 sec

QRS Duration: 0.072 Sec

RR Interval: 0.87 sec

HR 58 bpm

BP 0/0 mmHg



INTERPRETATION

Sinus Rhythm, Normal QRS Width, Normal QT interval, QRS Axis is normal.
PR is short, T wave inversion in Lead I, aVL, V1.
ECG not normal

DR
MD

10mm/mv 25mm/sec NASAN Simul-G BL U 4.6/1.13

*Unconfirmed Reporting, Refer to Clinician

Consultant Radiologist & Sonologist

Dr. Roopa Goyal

MD (Radio-Diagnosis)

GOYAL
DIAGNOSTICS
4-D ULTRASOUND * COLOUR DOPPLER

SHOP NO. 16-17, 1ST FLOOR SHOPPING CENTRE, OPP. JLN HOSPITAL, AJMER -305 001 PHONE : 2428948

NAME- Nagendra Shekhawat AGE- 30yrs DATE - 31-05-2023

REF.BY -

SKIAGRAM CHEST PA VIEW

Both cp angles are clear.
Cardiac size is within normal limits.
Both lungs fields are clear.

NAD IN HEART AND LUNGS.

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
Consultant Radiologist & Sonologist
RMC No. -001507/15600

लिंग परिक्षण करवाना जघन्य अपराध है। इसकी शिकायत 104 टोल फ्री सेवा पर की जा सकती है।



72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 66

Date: 30 - 05 - 2023 10:49:25 PM METS: 1.0/ 66 bpm 35% of THR BP: 110/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 0.0 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:

(ADX_GEM217220330)(R)Allengers



72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 63

Date: 30 - 05 - 2023 10:49:25 PM METS: 1.0/ 63 bpm 34% of THR BP: 110/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 0.0 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:

(ADX_GEM217220330)(R)Allengers

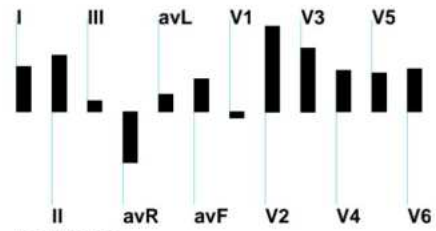
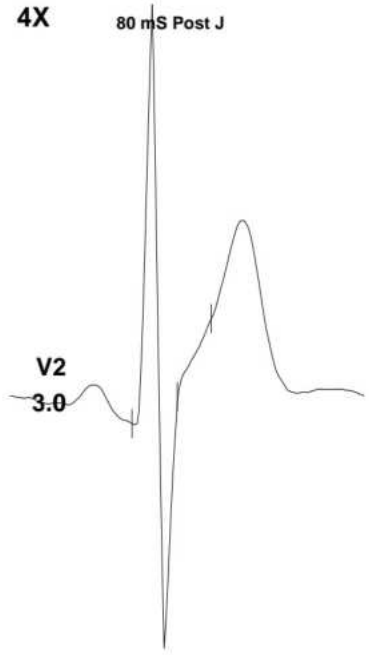


72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 65

Date: 30 - 05 - 2023 10:49:25 PM METS: 1.0/ 65 bpm 35% of THR BP: 110/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 0.0 mph, 0.0%

25 mm/Sec. 1.0 Cm/mV



REMARKS:

(ADX_GEM217220330)(R)Allengers



72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 69

Date: 30 - 05 - 2023 10:49:25 PM METS: 1.0/ 69 bpm 37% of THR BP: 110/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 0.0 mph, 0.0%

25 mm/Sec. 1.0 Cm/mV



REMARKS:

(ADX_GEM217220330)(R)Allengers



72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 87

Date: 30 - 05 - 2023 10:49:25 PM METS: 1.0/ 87 bpm 46% of THR BP: 110/80 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 1.0 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:

(ADX_GEM217220330)(R)Allengers

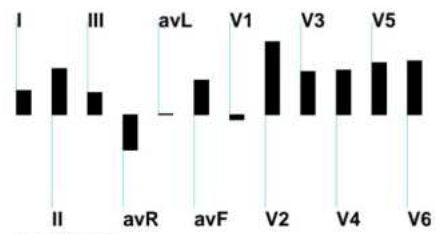
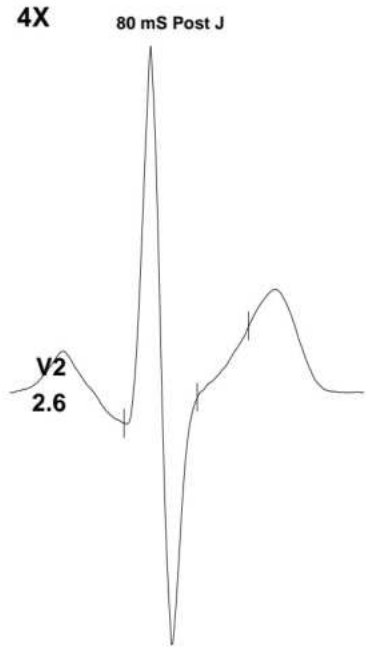


72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 103

Date: 30 - 05 - 2023 10:49:25 PM METS: 4.7/ 103 bpm 55% of THR BP: 117/81 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 03:00 1.7 mph, 10.0%

25 mm/Sec. 1.0 Cm/mV



REMARKS:

(ADX_GEM217220330)(R)Allengers



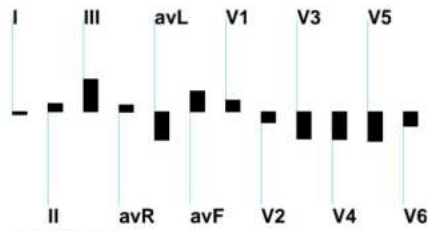
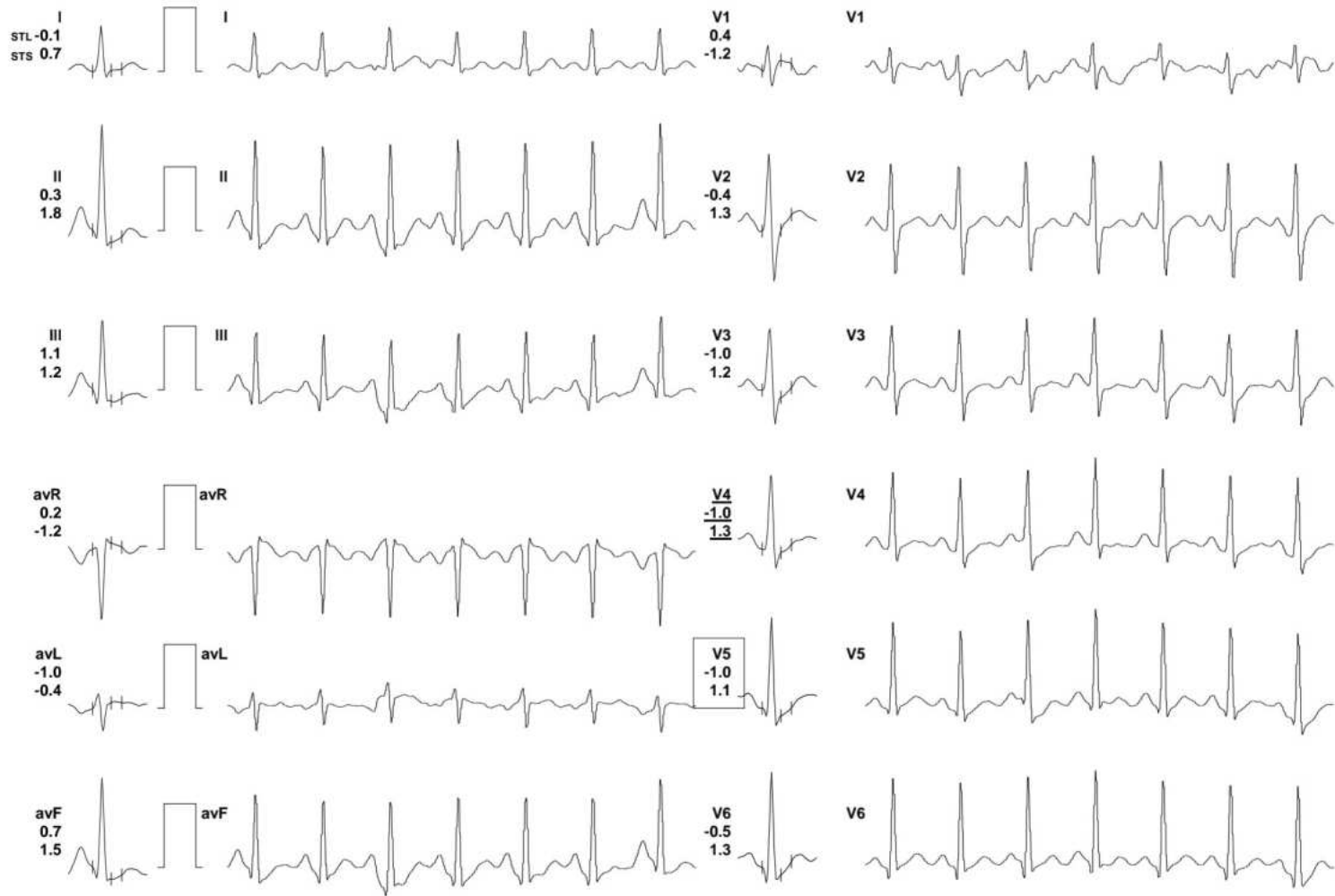
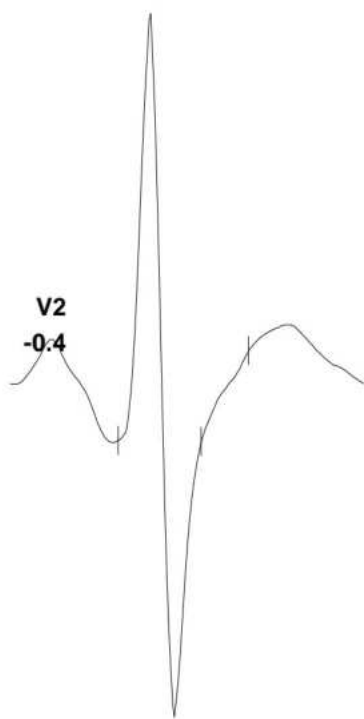
72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 139

Date: 30 - 05 - 2023 10:49:25 PM METS: 7.1/ 139 bpm 74% of THR BP: 124/82 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 06:00 2.5 mph, 12.0%

25 mm/Sec. 1.0 Cm/mV

4X 60 mS Post J



REMARKS:

(ADX_GEM217220330)(R)Allengers



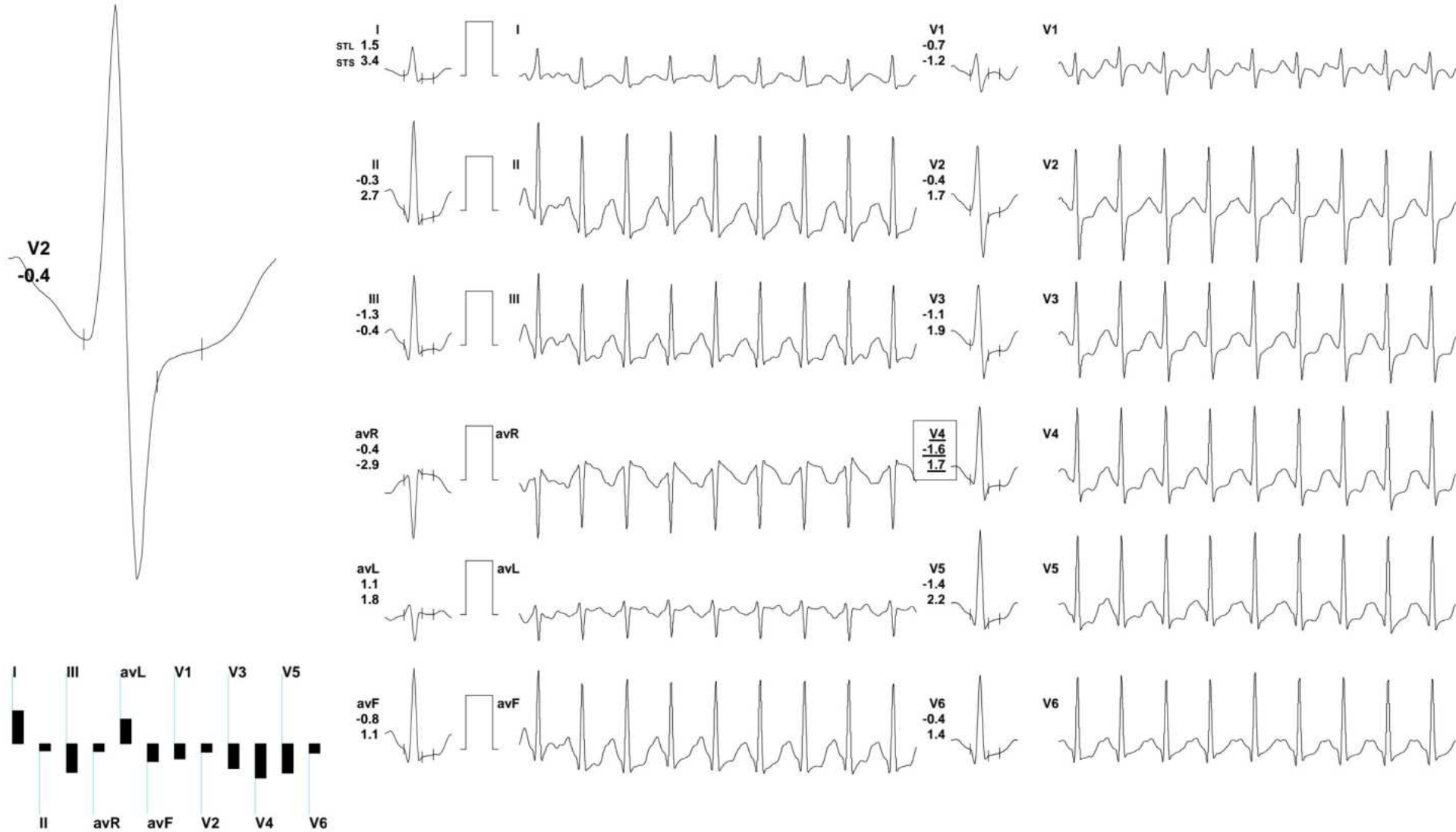
72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 168

Date: 30 - 05 - 2023 10:49:25 PM METS: 10.2/ 168 bpm 89% of THR BP: 133/85 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 09:00 3.4 mph, 14.0%

25 mm/Sec. 1.0 Cm/mV

4X 60 mS Post J



REMARKS:

(ADX_GEM217220330)(R)Allengers

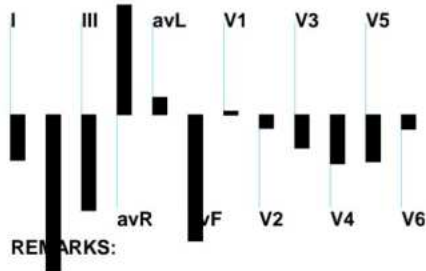
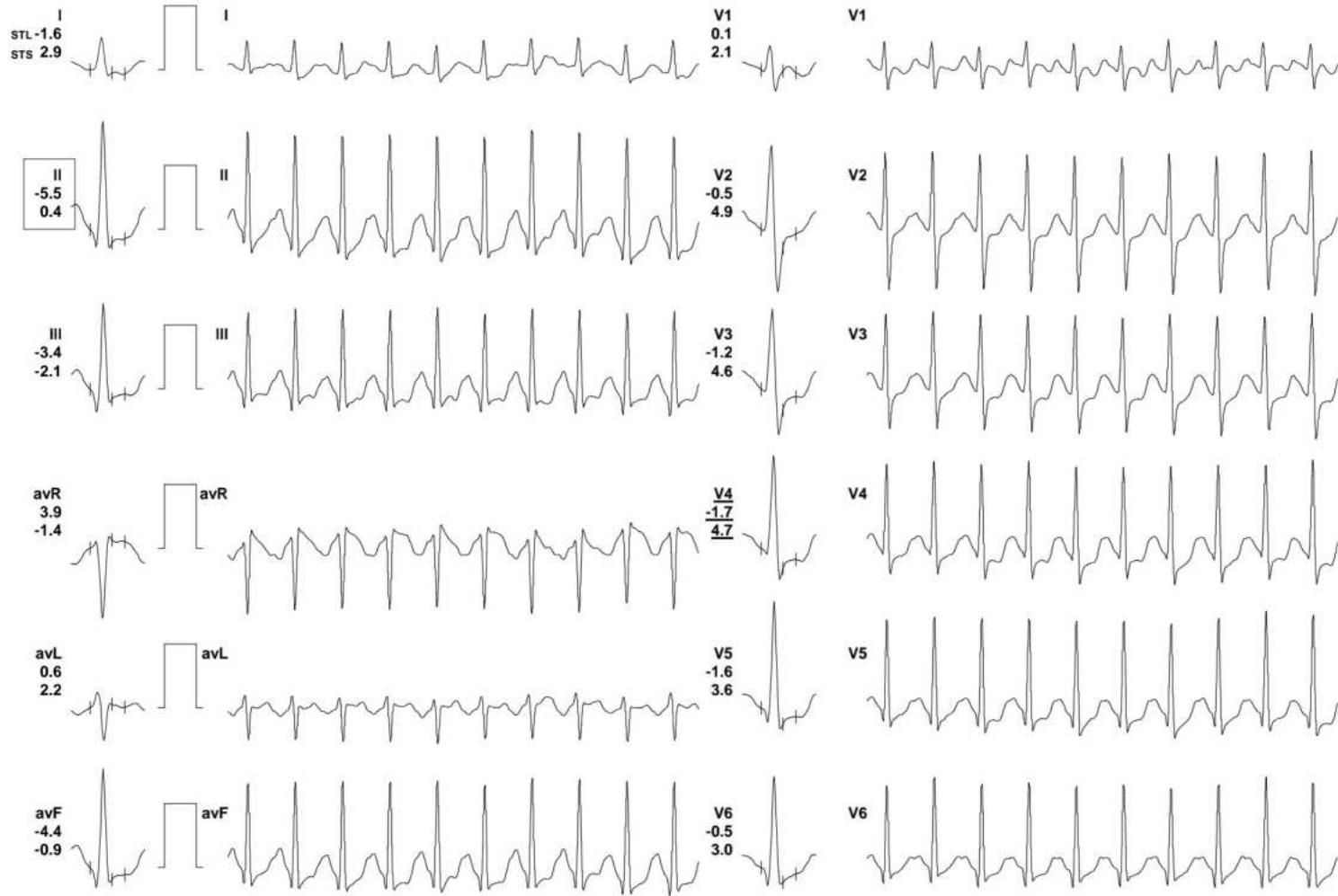
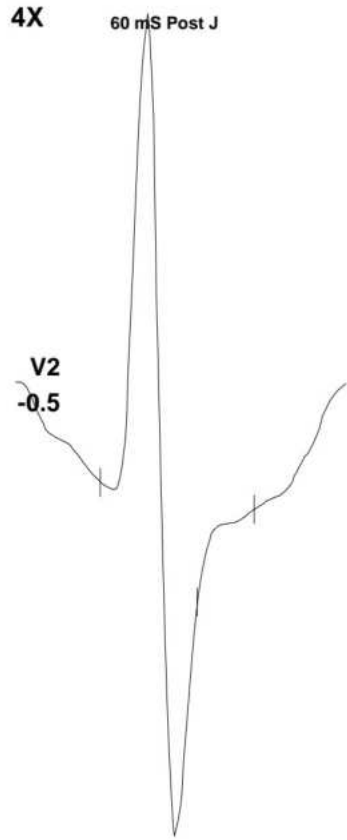


72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 181

Date: 30 - 05 - 2023 10:49:25 PM METS: 10.9/ 181 bpm 96% of THR BP: 133/85 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 09:36 4.2 mph, 16.0%

25 mm/Sec. 1.0 Cm/mV



(ADX_GEM217220330)(R)Allengers

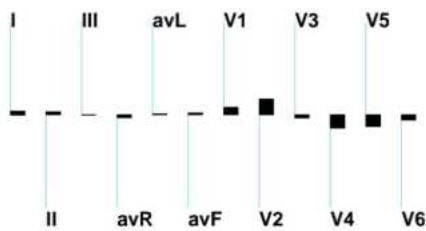
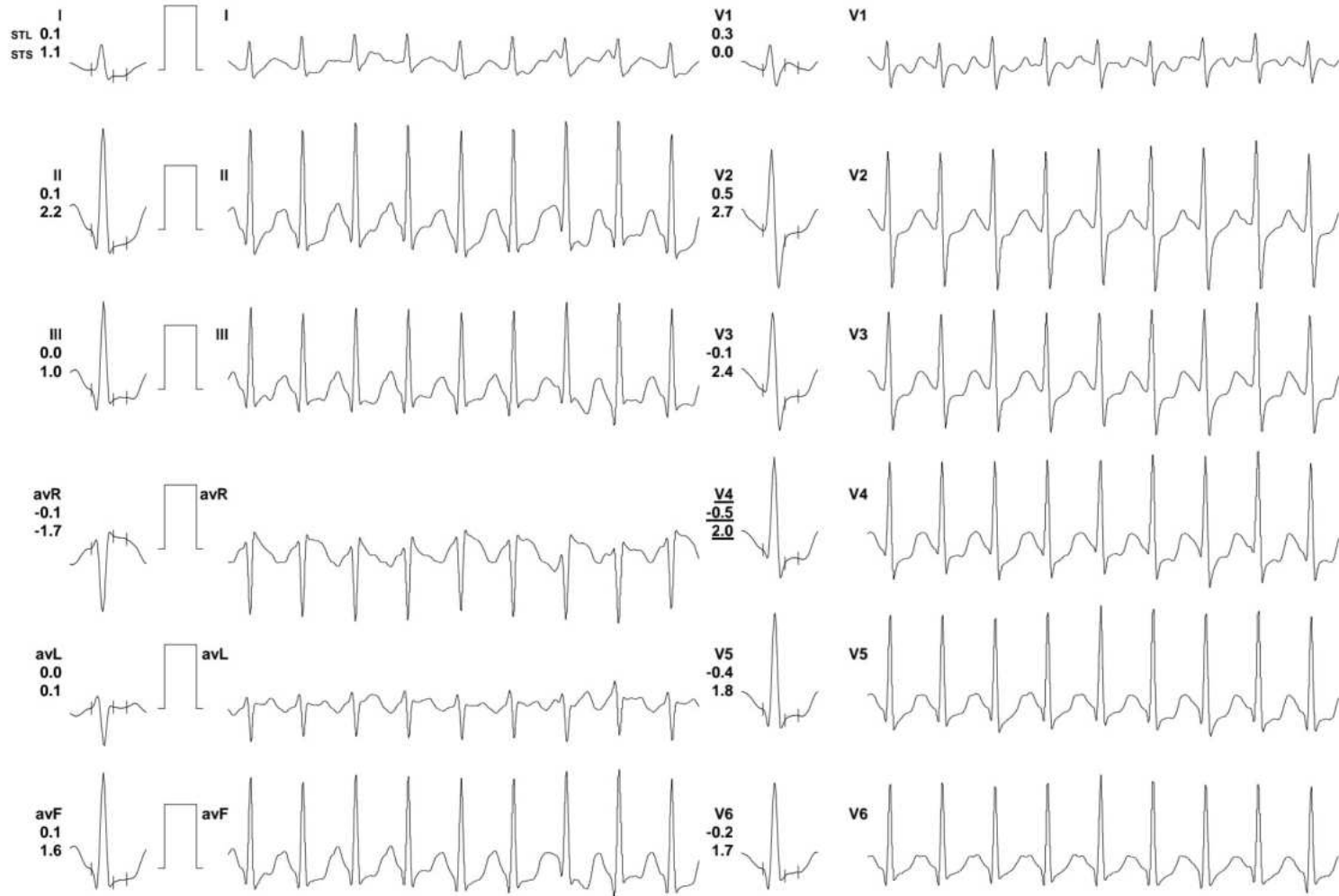
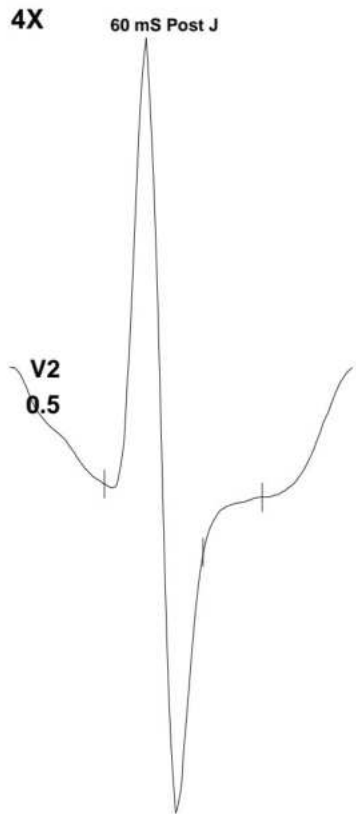


72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 164

Date: 30 - 05 - 2023 10:49:25 PM METS: 7.3/ 164 bpm 87% of THR BP: 133/85 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 09:36 1.1 mph, 0.0%

25 mm/Sec. 1.0 Cm/mV



REMARKS:

(ADX_GEM217220330)(R)Allengers



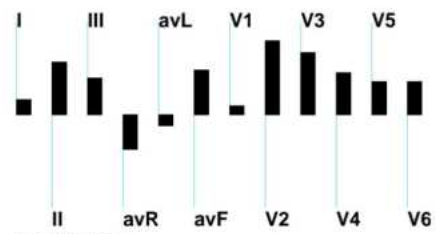
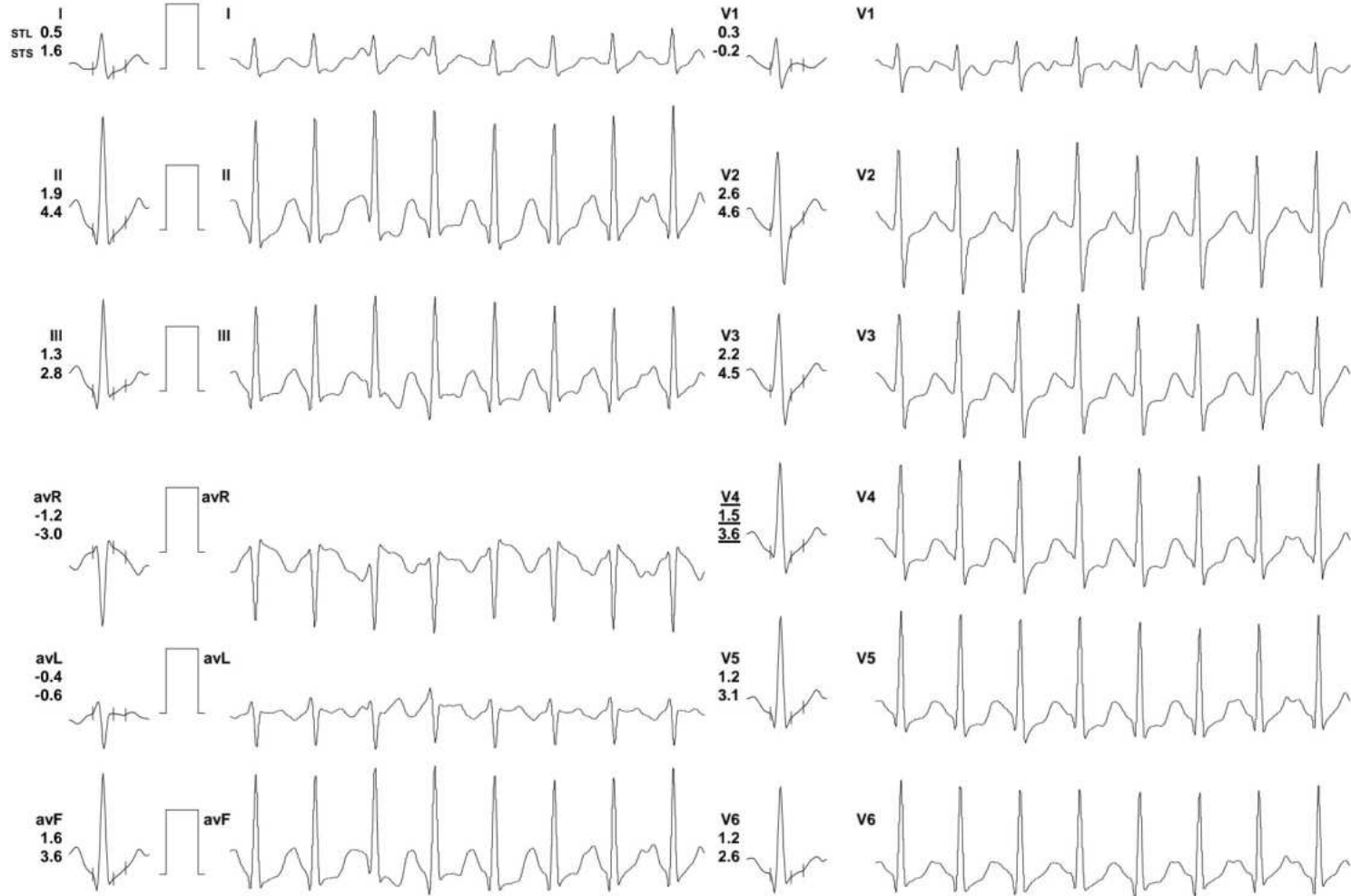
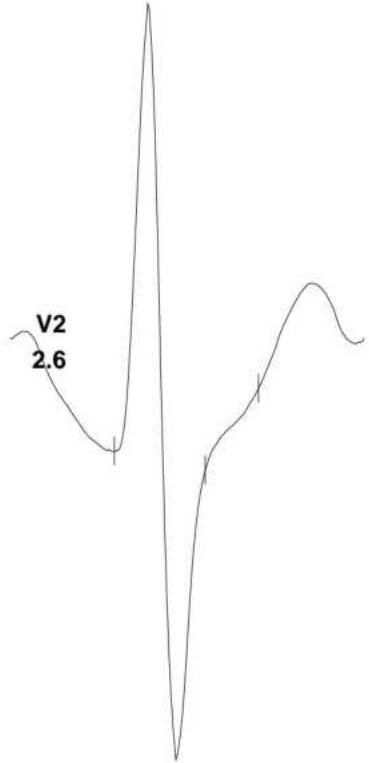
72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 142

Date: 30 - 05 - 2023 10:49:25 PM METS: 4.3/ 142 bpm 76% of THR BP: 133/85 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 09:36 0.0 mph, 0.0%

25 mm/Sec. 1.0 Cm/mV

4X 60 mS Post J



REMARKS:

(ADX_GEM217220330)(R)Allengers



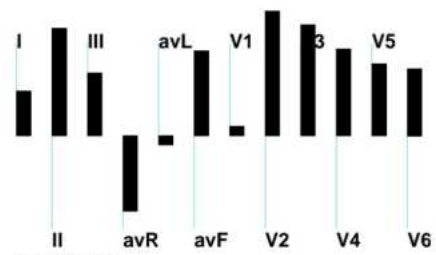
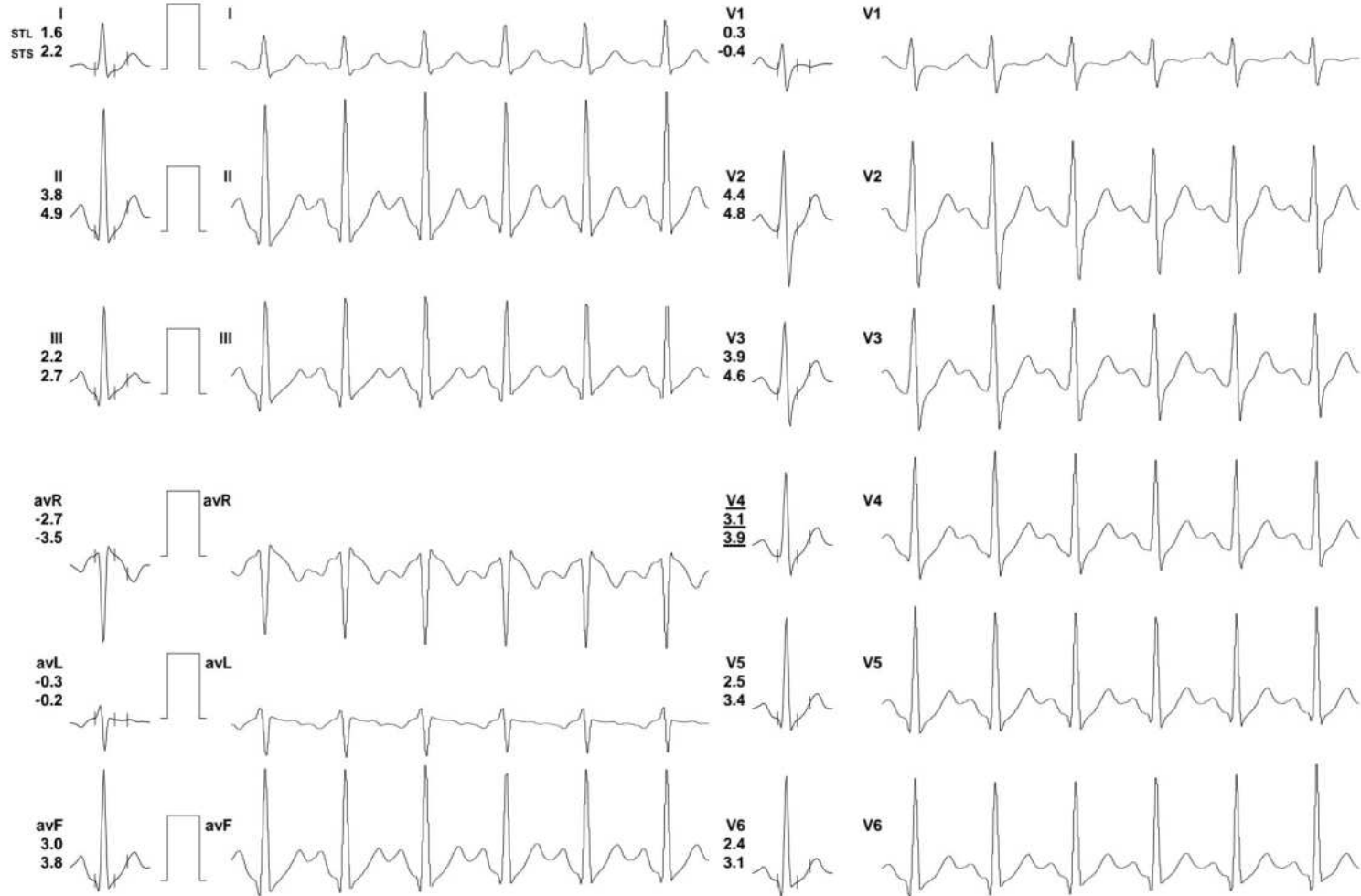
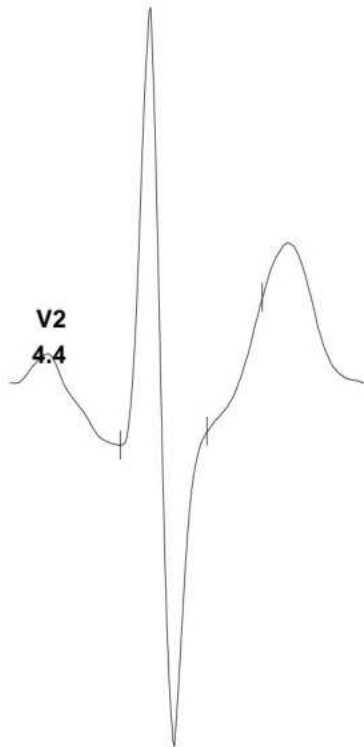
72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 116

Date: 30 - 05 - 2023 10:49:25 PM METS: 1.0/ 116 bpm 62% of THR BP: 150/89 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 09:36 0.0 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:

(ADX_GEM217220330)(R)Allengers



72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 110

Date: 30 - 05 - 2023 10:49:25 PM METS: 1.0/ 110 bpm 59% of THR BP: 142/88 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 09:36 0.0 mph, 0.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:

(ADX_GEM217220330)(R)Allengers

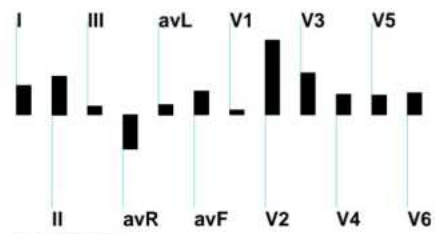
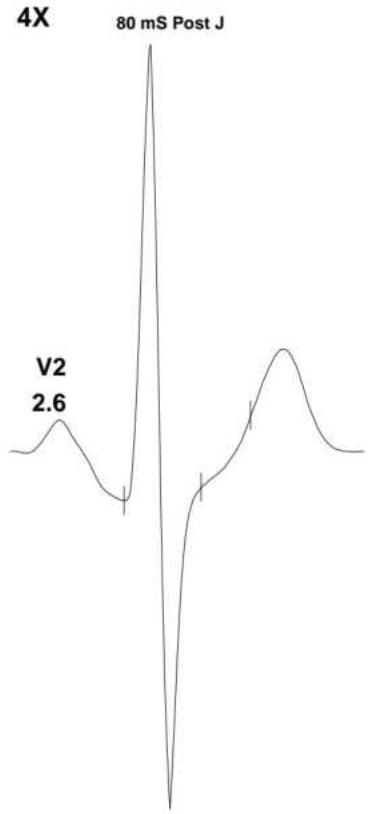


72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 104

Date: 30 - 05 - 2023 10:49:25 PM METS: 1.0/ 104 bpm 55% of THR BP: 133/85 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 09:36 0.0 mph, 0.0%

25 mm/Sec. 1.0 Cm/mV



REMARKS:

(ADX_GEM217220330)(R)Allengers

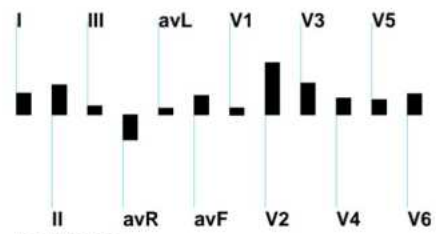
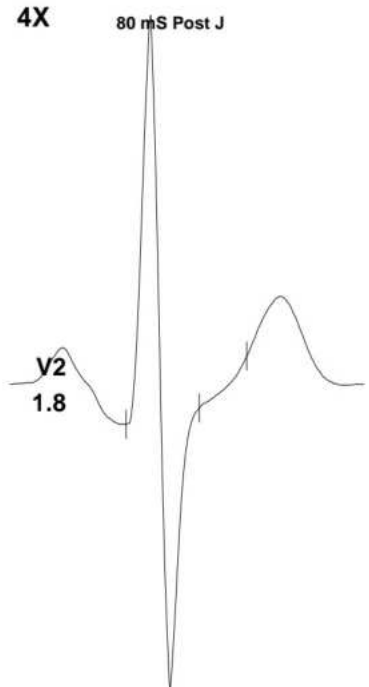


72 / NAGENDRA SHEKHAWAT / 32 Yrs / M / 165 Cms / 70 Kg / HR : 101

Date: 30 - 05 - 2023 10:49:25 PM METS: 1.0/ 101 bpm 54% of THR BP: 123/82 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 09:36 0.0 mph, 0.0%

25 mm/Sec. 1.0 Cm/mV



REMARKS:

(ADX_GEM217220330)(R)Allengers



Stage	Time	Duration	Speed(mph)	Elevation	METs	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:46	0:46	00.0	00.0	01.0	066	35 %	110/80	072	00	
Standing	00:56	0:10	00.0	00.0	01.0	063	34 %	110/80	069	00	
HV	01:10	0:14	00.0	00.0	01.0	065	35 %	110/80	071	00	
Warm Up	01:28	0:18	00.0	00.0	01.0	069	37 %	110/80	075	00	
ExStart	02:17	0:49	01.0	00.0	01.0	087	46 %	110/80	095	00	
BRUCE Stage 1	05:17	3:00	01.7	10.0	04.7	103	55 %	117/81	120	00	
BRUCE Stage 2	08:17	3:00	02.5	12.0	07.1	139	74 %	124/82	172	00	
BRUCE Stage 3	11:17	3:00	03.4	14.0	10.2	168	89 %	133/85	223	00	
PeakEx	11:53	0:36	04.2	16.0	10.9	181	96 %	133/85	240	00	
Recovery	12:23	0:30	01.1	00.0	07.3	164	87 %	133/85	218	00	
Recovery	12:53	1:00	00.0	00.0	04.3	142	76 %	133/85	188	00	
Recovery	13:53	2:00	00.0	00.0	01.0	116	62 %	150/89	174	00	
Recovery	14:53	3:00	00.0	00.0	01.0	110	59 %	142/88	156	00	
Recovery	15:53	4:00	00.0	00.0	01.0	104	55 %	133/85	138	00	
Recovery	16:34	4:41	00.0	00.0	01.0	101	54 %	123/82	124	00	

FINDINGS :

Exercise Time : 09:36
Initial HR (ExStrt) : 87 bpm 46% of Target 188
Initial BP (ExStrt) : 110/80 (mm/Hg)
Max WorkLoad Attained : 10.9 Good response to induced stress
Max ST Dep Lead & Avg ST Value: II & -5.5 mm in PeakEx
Test End Reasons : Test Complete, Heart Rate Achieved

Max HR Attained 181 bpm 96% of Target 188
Max BP Attained 150/89 (mm/Hg)

REPORT :