

Patient Name Mrs. DEEPIKA SAKHALA 34/F

5 Seconds ECG Report

December 10, 2022

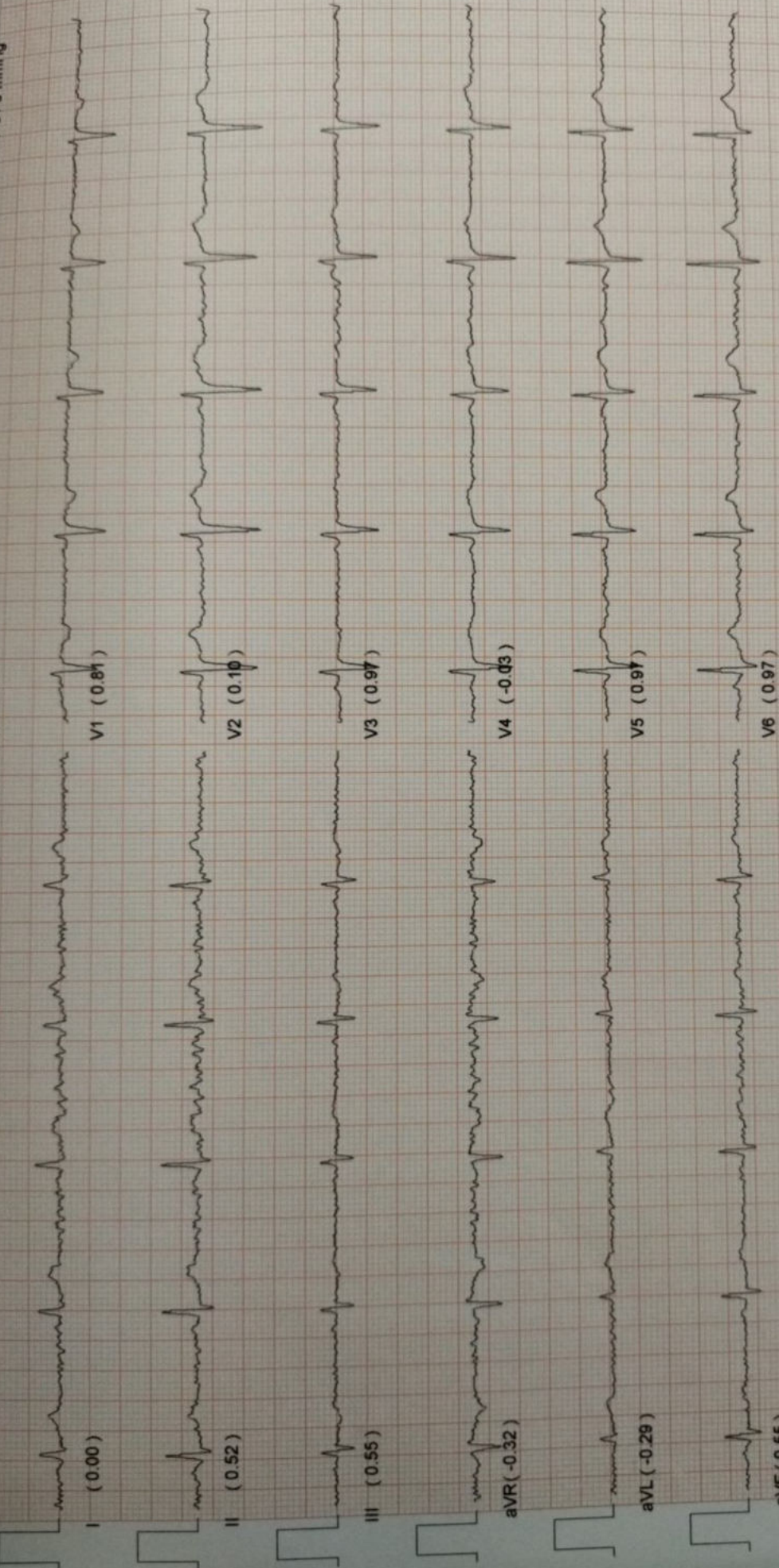
Time: 10:20:17

P-QRS-T Axis (41)-(50)-(41) deg

PR Interval: 0.13 sec
QRS Duration: 0.048 Sec

RR Interval: 0.89 sec

HR: 67 bpm
BP: 0/0 mmHg



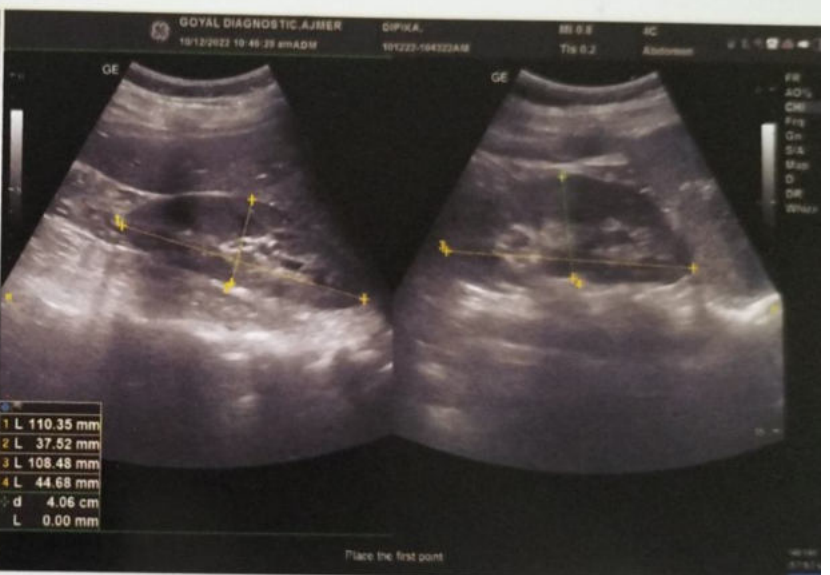
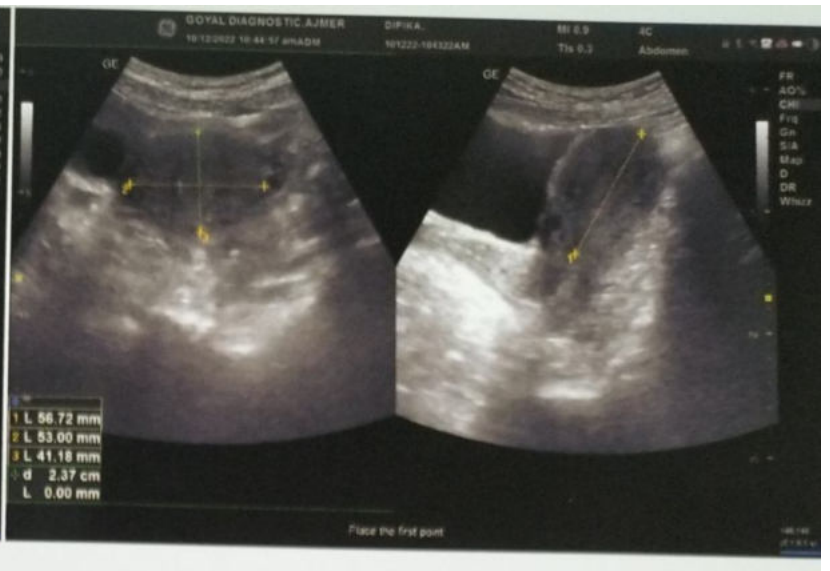
INTERPRETATION

Sinus Rhythm, PR is normal, Normal QRS Width, Normal QT interval, QRS Axis is normal, T wave inversion in Lead aVL, V1, V2, V4, ECG not normal

DR
MD

10mm/mv, 25mm/sec NASAN Simul-G BL J 4 6/1 13

*Unconfirmed Reporting. Refer to Clinician



NAME – Mrs. Deepika

AGE – 34 Yrs

Date – 10-12-22

REF BY –

USG ABDOMEN-PELVIS

LIVER : is Normal in size 12.6 cm and shows homogeneous echotexture.
No evidence of intrahepatic biliary radicles dilatation / focal space occupying lesion.
The portal vein and common bile duct show normal caliber.

GALL BLADDER : distended and shows smooth walls. Wall thickness appears normal.
No evidence of sludge/ calculus . No evidence of pericholecystic collection.

SPLEEN: normal in size and shows normal echopattern.

PANCREAS: Normal in size , shape and position.
Parenchyma is homogenous.

KIDNEYS : Both the kidneys are normal in size , shape and location. Both show normal cortico- medullary differentiation.

Right kidney –measures 11.0 x 3.7 cm
Left kidney -- measures 10.8 x 4.4 cm

No evidence of hydronephrosis or calculus.

URINARY BLADDER : is distended with smooth walls.
No evidence of diverticulum or calculus

UTERUS: Normal In Size Shape And Position
Myometrium is homogenous and normal in thickness.
Endometrium Is Normal

OVARY:
Right ovary :-- shows a cyst of 2.3 x 1.8 mm with clear fluid .
Left ovary:-- Appears normal.

No evidence of ascites / pleural effusion.

IMPRESSION:--

- > **Right ovarian cyst with clear fluid .**
- > **Rest of the abdominal organs are within normal limits.**

(Adv- clinical correlation , further evaluation)

Dr. DEVENDRA GOYAL (M.L.)
RMC No.: 004250/15000
Consultant Radiologist
And Sonologist

Consultant Radiologist & Sonologist

Dr. Roopa Goyal
(Radio-Diagnosis)

GOYAL
DIAGNOSTICS
4-D ULTRASOUND • COLOUR DOPPLER

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

NAME- Mrs. Deepika sankhla AGE- 34 yrs DATE— 10-12-22

REF.BY --

SKIAGRAM CHEST PA VIEW

BOTH CP ANGLES ARE CLEAR
CARDIAC SIZE IS WITHIN NORMAL LIMITS
BOTH LUNG FIELDS ARE CLEAR

NAD IN HEART AND LUNGS

DR. DEVENDRA GOYAL (M.D.)
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And Sonologist

Mammography B/L Breast

Name - Mrs. Deepika Sankhla Age -- 33 yrs Date- 10-12-22

Ref. By -

Films are taken in both craniocaudal projections

Skin and nipple are normal

The breast architecture is normal

The Breast Tissues Are dense

IMP - Findings are s/o Fibroadenosis

No Definite mass lesion Seen

BIRADS II

Dr. ROOPA GOYAL (M.B.B.S., M.D.)

Consultant Radiologist & Sonologist

RMC No. -004507/15600

Radiologist

Dr Roopa Goyal

Consultant Radiologist & Sonologist

Dr. Roopa Goyal

MD (Radio-Diagnosis)



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

Patient Name : MRS. DEEPIKA

Age / Gender : 34 years / Female

Endo ID : 98691

Organization : Goyal Diagnostics Profile

Referral : MEDIWHEEL



Collected Date & Time : Dec 10, 2022, 10:40 a.m.

Reported Date & Time : Dec 10, 2022, 12:07 p.m.

Sample ID :



223440013

Test Description	Value(s)	Unit(s)	Reference Range
<u>BIOCHEMISTRY</u>			
<u>LIPID PROFILE</u>			
Cholesterol Total Method : ENZYMETIC COLORIMETRIC METHOD CHOD - POD	244.99	mg/dL	130 -250
Triglycerides Method : ENZYMETIC COLORIMETRIC	137.23	mg/dL	60 -170
HDL Cholesterol Method : PHOSPHOTUNGSTIC ACID	57.77	mg/dL	Normal: 40-60 Major Risk for Heart: > 60
VLDL Cholesterol Method : Calculated	27.45	mg/dL	6 - 38
LDL Cholesterol Method : Calculated	159.77	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	4.24		2.6-4.9
LDL/HDL Ratio Method : Calculated	2.77		0.5-3.4

END OF REPORT

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IMMUNOLOGY

T3-Triiodothyronine Method : CHEMILUMINESCENCE	1.24	ng/dL	0.60-1.81
T4-Thyroxine Method : CHEMILUMINESCENCE	9.5	ug/dL	4.5 -10.9
TSH -ULTRA SENSITIVE Method : CHEMILUMINESCENCE	1.56	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 doamine 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****

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Collected Date & Time : Dec 10, 2022, 10:40 a.m.

Reported Date & Time : Dec 10, 2022, 11:00 a.m.

Sample ID :



223440013

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

HbA1c (GLYCOSYLATED HEMOGLOBIN)
BLOOD

5.6

%

> 8% Action Suggested

7 - 8 % Good Control

< 7% Goal

6 - 7 % Near Normal Glycemia

< 6% Normal level

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

114.02

90 - 120 Very Good Control

121 - 150 Adequate Control

51 - 180 Sub-optimal Control

181 - 210 Poor Control

> 211 Very Poor Control

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<u>BIOCHEMISTRY</u>			
<u>RENAL FUNCTION TEST</u>			
Urea Method : Uricase	22.54	mg/dL	10 - 45
Creatinine Method : Serum, Jaffe	0.75	mg/dL	0.6 - 1.4
Uric Acid Method : Serum, Uricase	3.53	mg/dL	3.0 - 7.0
Calcium Method : ARSENASO with serum	8.77	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	4.3	mmol/L	3.50 - 5.00
Chlorides Method : Ion-Selective Electrode with serum	104	mmol/L	98 - 106

END OF REPORT

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Test Description	Value(s)	Unit(s)	Reference Range
HAEMATOLOGY			
Hemoglobin (HB)	12.9	gm/dl	13.5 - 18.0
Erythrocyte (RBC) Count	4.28	mil/cu.mm	4.7 - 6.0
Packed Cell Volume (PCV)	37.1	%	42 - 52
Mean Cell Volume (MCV)	86.8	FL	78 - 100
Mean Cell Haemoglobin (MCH)	30.3	Pg	27 - 31
Mean Corpuscular Hb Conc. (MCHC)	34.9	g/dl	32 - 36
Red Cell Distribution Width (RDW)	13.3	%	11.5 - 14.0
Total Leucocytes Count (WBC)	8430	Cell/cu.mm	4000 - 10000
Neutrophils	55	%	40 - 80
Lymphocytes	40	%	20 - 40
Monocytes	03	%	2 - 10
Eosinophils	02	%	1-6
Basophils	00	%	0-1
Mean Platelet Volume (MPV)	8.9	fL	7.2 - 11.7
PCT	0.30	%	0.2 - 0.5
Platelet Count	342	10 ³ /ul	150 - 450

END OF REPORT

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Referral : MEDIWHEEL



Collected Date & Time : Dec 10, 2022, 10:40 a.m.

Reported Date & Time : Dec 10, 2022, 12:08 p.m.

Sample ID :



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

IRON - SERUM	79	ug/dL	65 - 175
TOTAL IRON BINDING CAPACITY(TIBC)	394	ug/dL	228 - 428
FERRITIN	8.6	ng/mL	Male:22-322 Female:10-291
Method : Serum CLIA			
TRANSFERRIN SATURATION %	20.05	%	16 - 50
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

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Collected Date & Time : Dec 10, 2022, 10:40 a.m.

Reported Date & Time : Dec 10, 2022, 12:16 p.m.

Sample ID :



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

C-Reactive Protein; CRP, SERUM	1.16	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

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Referral : MEDIWHEEL

Collected Date & Time : Dec 10, 2022, 10:40 a.m.

Reported Date & Time : Dec 10, 2022, 12:06 p.m.

Sample ID :



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

LIVER FUNCTION TEST

Bilirubin - Total	0.40	gm/dl	0.0 - 1.20
Bilirubin - Direct	0.14	mg/dL	0.0 - 0.3
Bilirubin - Indirect	0.26	mg/dL	0.1 - 1.0
Method : Calculated			
ASPARTATE AMINO TRANSFERASE (SGOT-AST)	21.56	U/L	5.0 - 40
Method : IFCC with Serum			
ALANINE AMINO TRANSFERASE (SGPT-ALT)	19.56	U/L	5.0 - 40.0
Method : IFCC with POD Serum			
Alkaline Phosphatase	95.40	U/L	MALE & FEMALE
Method : IFCC with Serum			4-15 YEAR: 54-369 U/L
			20-59 YEAR: 42-98 U/L
			>60 YEAR: 53-141 U/L
Total Protein	7.28	g/dL	6.0 - 8.0
Method : Biuret, with Serum			
Albumin	4.53	g/dL	3.4 - 5.5
Method : Tech; BCG with Serum			
Globulin	2.75	g/dL	1.5 - 3.5
Method : Calculated			
A/G Ratio	1.65		1.5 - 2.5
Method : Calculated			

END OF REPORT

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Collected Date & Time : Dec 10, 2022, 10:40 a.m.

Reported Date & Time : Dec 10, 2022, 12:04 p.m.

Sample ID :



223440013

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

Gamma GT	15	U/L	5-36
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Method : G-Glutamyl-Carboxy-Nitoanilide

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

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HAEMATOLOGY

ESR	15	mm	0 - 20
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HAEMATOLOGY

BLOOD GROUP ABO AND RHTYPE

'B' POSITIVE

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

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Sample ID :



223440013



Test Description	Value(s)	Unit(s)	Reference Range
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CLINICAL PATHOLOGY

General Examination

Colour	Pale yellow		Pale Yellow
Transparency (Appearance)	S.turbid		Clear
Reaction (pH)	Acidic		Acidic / Alkaline
Specific gravity	1.020		1.005 - 1.030

Chemical Examination

Urine Protein (Albumin)	NIL		NIL
Urine Glucose (Sugar)	NIL		NIL

Microscopic Examination

Pus cells (WBCs)	3-4	/hpf	0-9
Epithelial cells	10-15	/hpf	0-4
Red blood cells	NIL	/hpf	0-4
Crystals	Absent		Absent
Cast	Absent		Absent
Amorphous deposits	Absent		Absent
Bacteria	Absent		Absent
Yeast cells	Absent		Absent

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BIOCHEMISTRY

Glucose fasting	85.91	mg/dL	70.0-110.0
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Method : Fluoride Plasma-F, Hexokinase

END OF REPORT

Dr. Nishi Prasad

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2022-12

भारत सरकार
Unique Identification Authority of India

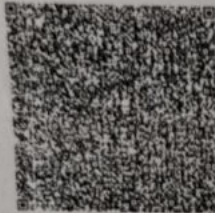
नामांकन क्रम / Enrollment No.: 2091/50205/02675

To
दीपिका सांखला
Deepika Sankhla
W/O Mukesh Sankhla
641/28 shringar chawari
behari ganj
Ajmer
Ajmer
Ajmer
Bhinay Ajmer
Rajasthan 305001
8854825722

148771865
14/03/2013



ME487718650FH



आपका आधार क्रमांक / Your Aadhaar No. :

9988 3893 5651

मेरा आधार, मेरी पहचान



0४ दीपिका सांखला
6६ Deepika Sankhla
7१ जन्म तिथि / DOB : 11/04/1988
महिला / Female

9988 3893 5651

मेरा आधार, मेरी पहचान

भारत सरकार
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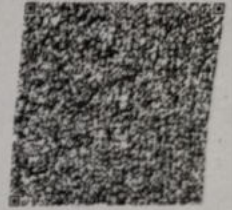
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To
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Deepika Sankhla
W/O Mukesh Sankhla
641/28 shringar chawari
behari ganj
Ajmer
Ajmer
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Rajasthan 305001
8854825722

148771865
14/03/2013



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आपका आधार क्रमांक / Your Aadhaar No. :

9988 3893 5651

मेरा आधार, मेरी पहचान



0४ दीपिका सांखला
6६ Deepika Sankhla
7१ जन्म तिथि / DOB : 11/04/1988
महिला / Female

9988 3893 5651

मेरा आधार, मेरी पहचान

Deephati

Dr. ROOPA GOYAL (M.B.B.S., M.D.)
Consultant Radiologist & Sonologist
RMC No.-004507/15600



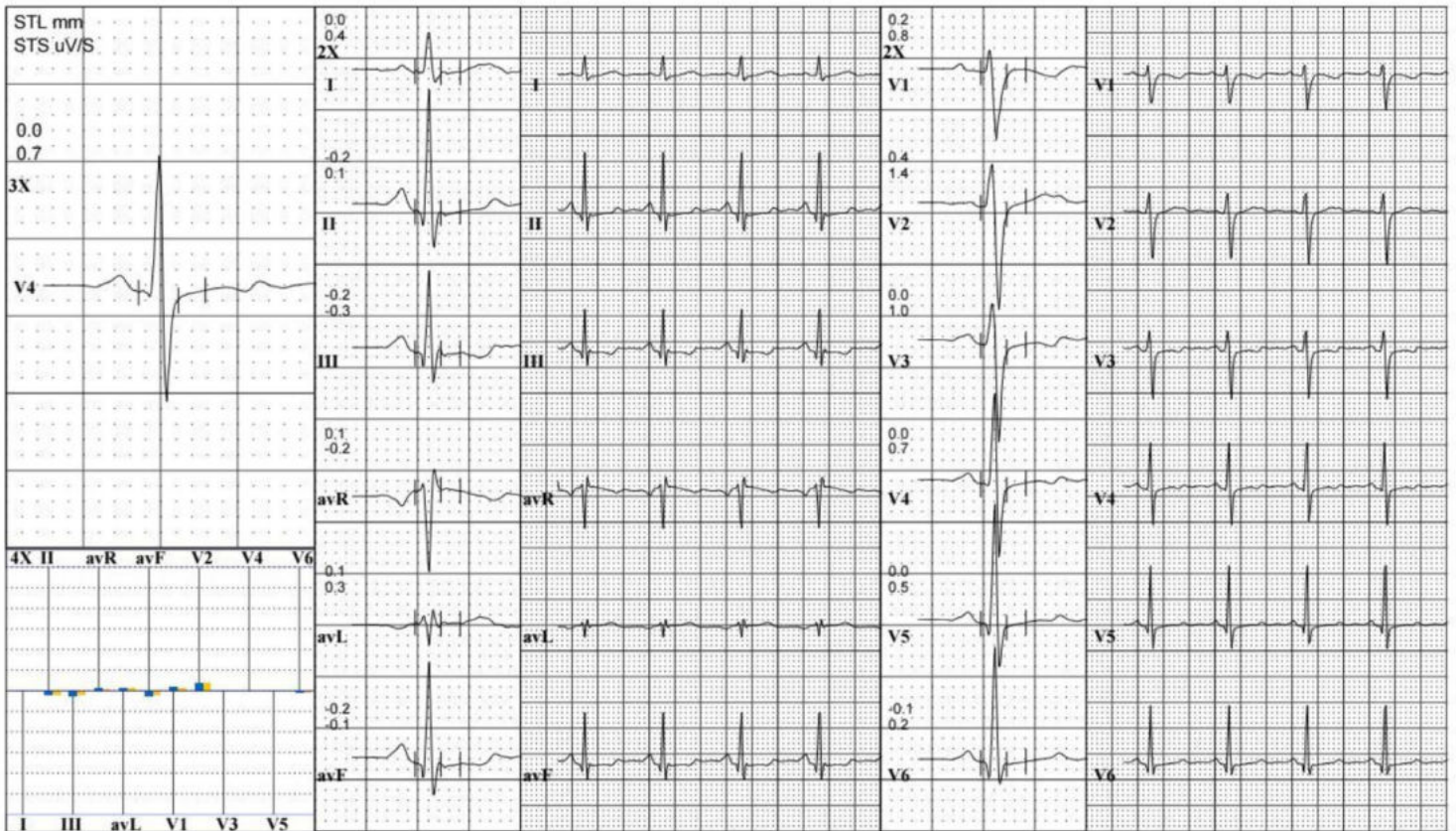
GOYAL DIAGNOSTIC
AJMER

555 DEEPIKA SANKHLA
34 Yrs / M Kg / Ht- cms Ref.No.:
Date: 10/12/2022 Time: 05:40 PM

Speed: -- mph Hr: 96 Target Hr: 51 % of 186 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
Grade: -- % Mets: 1 Ex Time: -- min:sec BLC: On Sweep: 25 mm/S
Protocol: Bruce BP: --/-- mmHg Curr Time: 00:08 NotchOn Median Sweep 25 mm/S

Linked Medians
Pre Ex

Post J: 73 mS





GOYAL DIAGNOSTIC

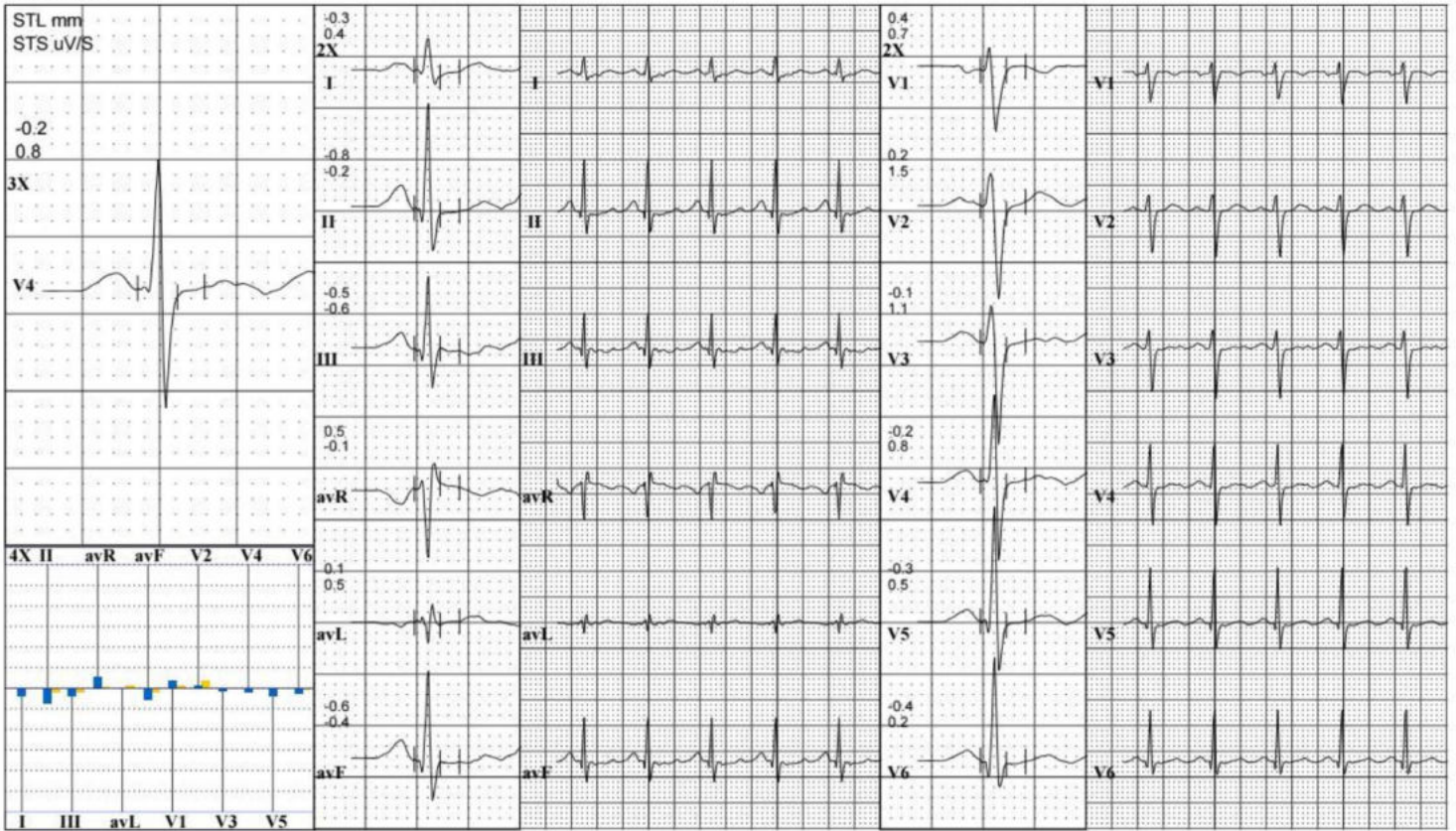
AJMER

555 DEEPIKA SANKHLA
34 Yrs / M Kg / Ht- cms Ref.No.:
Date: 10/12/2022 Time: 05:40 PM

Speed: 1.7 mph Hr: 118 Target Hr: 63 % of 186 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
Grade: 10 % Mets: 4.8 Ex Time: 03:00 BLC: On Sweep: 25 mm/S
Protocol: Bruce BP: 127/84 mmHg Curr Time: 03:50 NotchOn Median Sweep: 25 mm/S

Linked Medians
S1

Post J: 73 mS





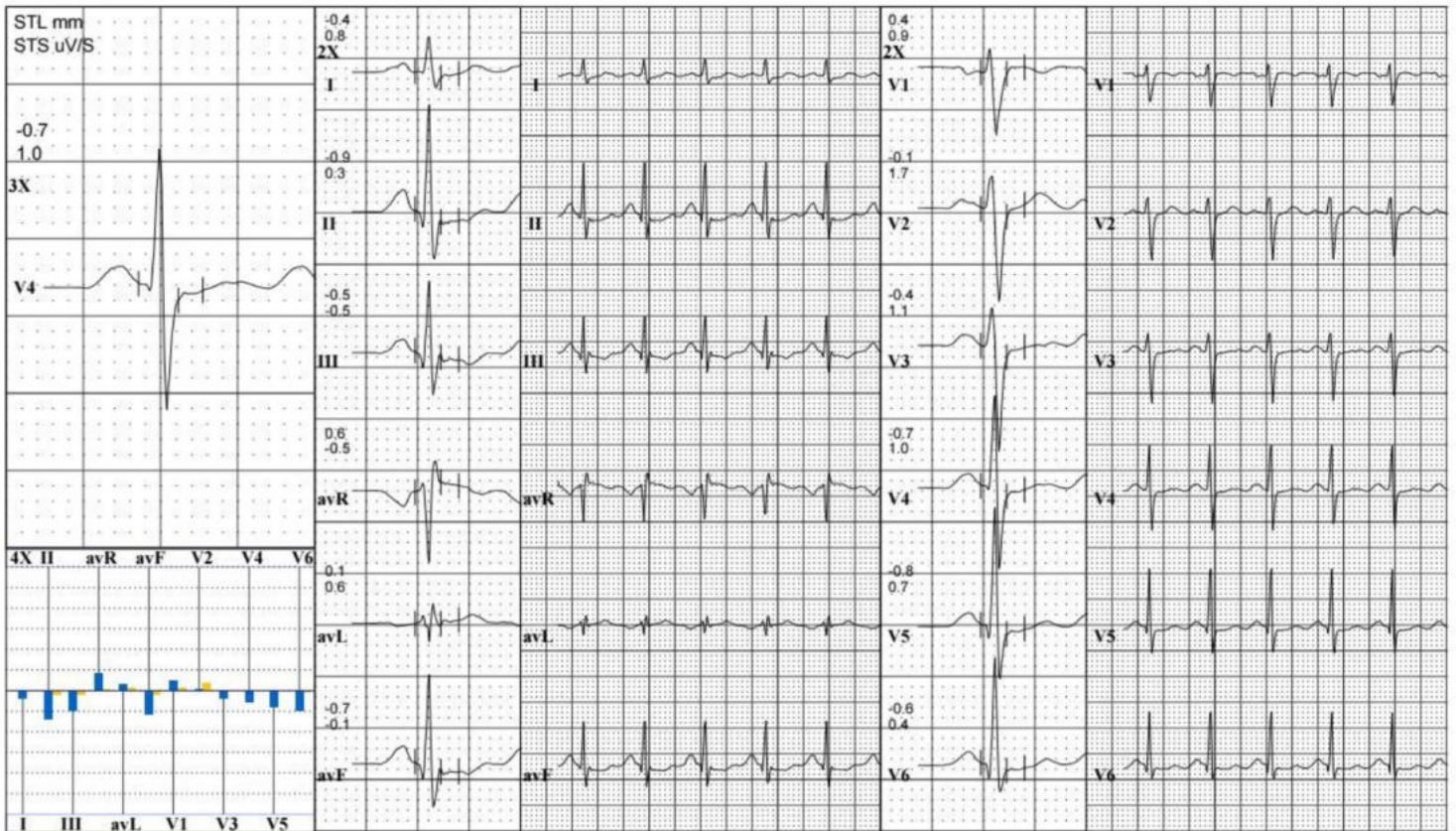
GOYAL DIAGNOSTIC
AJMER

555 **DEEPIKA SANKHLA**
34 Yrs/ M Kg / Ht- cms Ref.No.:
Date: 10/12/2022 Time: 05:40 PM

Speed: 2.5 mph Hr: 129 Target Hr: 69 % of 186 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
Grade: 12 % Mets: 6.9 Ex Time: 06:00 BLC: On Sweep: 25 mm/S
Protocol: Bruce BP: 137/88 mmHg Curr Time: 06:50 NotchOn Median Sweep 25 mm/S

Linked Medians
S2

Post J: 66 mS





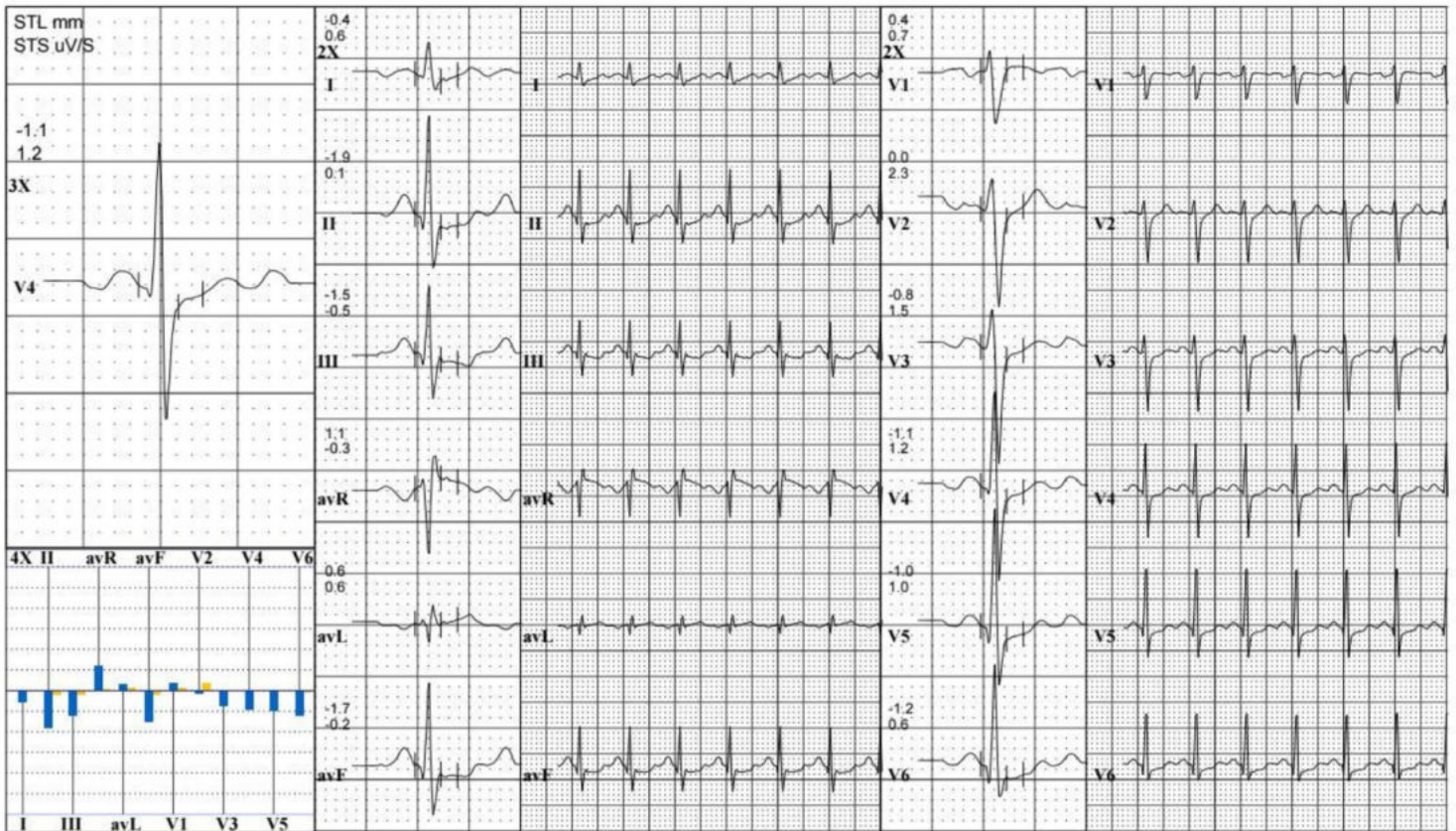
GOYAL DIAGNOSTIC
AJMER

555 **DEEPIKA SANKHLA**
34 Yrs/ M Kg / Ht- cms Ref.No.:
Date: 10/12/2022 Time: 05:40 PM

Speed: 3.4 mph Hr: 154 Target Hr: 82 % of 186 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
Grade: 14 % Mets: 9.5 Ex Time: 09:00 BLC: On Sweep: 25 mm/S
Protocol: Bruce BP: 147/92 mmHg Curr Time: 09:50 NotchOn Median Sweep 25 mm/S

Linked Medians
S3

Post J: 64 mS





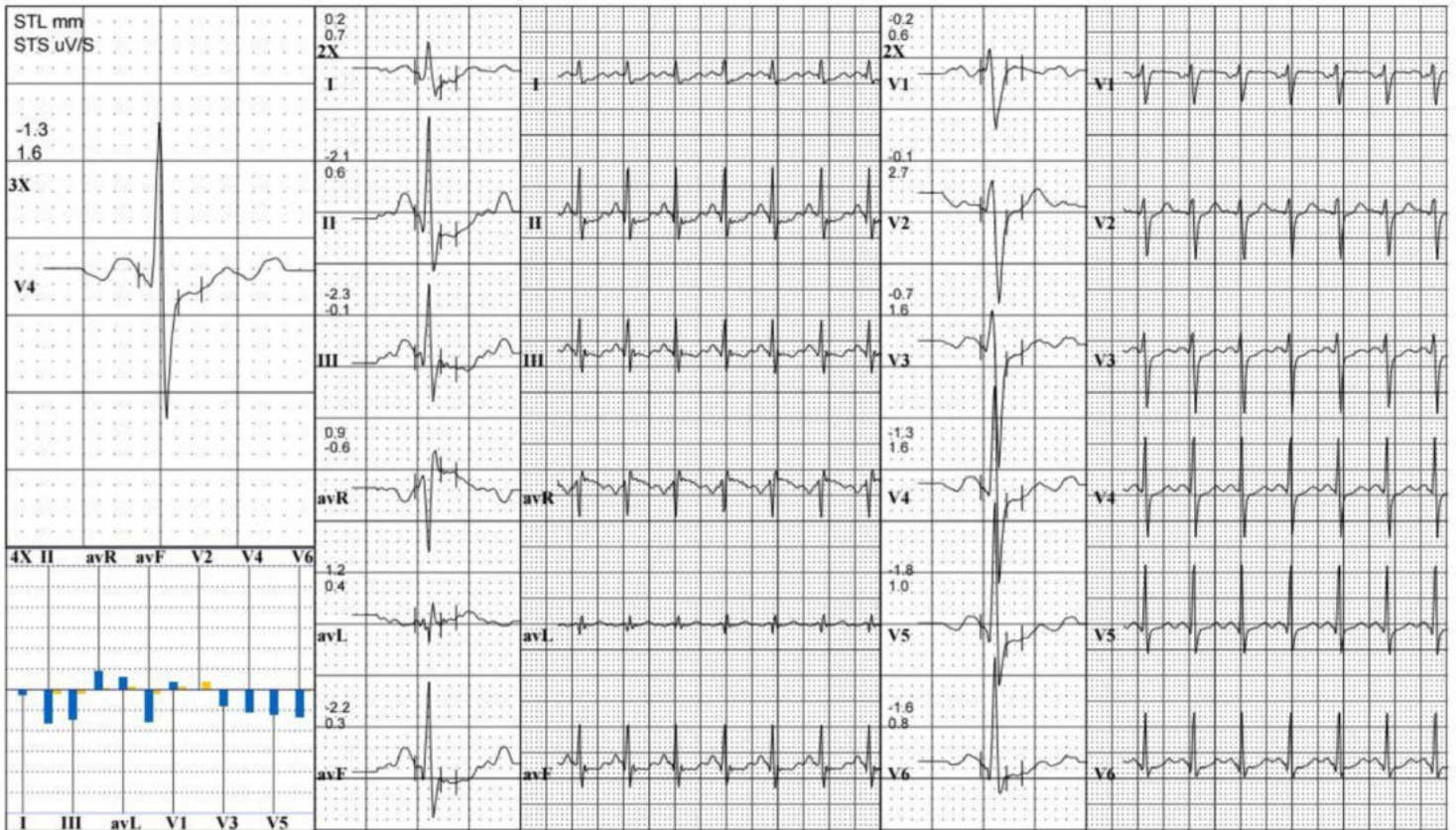
COTAL DIAGNOSTIC
AJMER

555 **DEEPIKA SANKHLA**
34 Yrs/ M Kg / Ht- cms Ref.No.:
Date: 10/12/2022 Time: 05:40 PM

Speed: 4.2 mph Hr: 161 Target Hr: 86 % of 186 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
Grade: 16 % Mets: 12.1 Ex Time: 09:30 BLC: On Sweep: 25 mm/S
Protocol: Bruce BP: 157/96 mmHg Curr Time: 10:20 NotchOn Median Sweep 25 mm/S

Linked Medians
Peak Ex

Post J: 60 mS



GOYAL DIAGNOSTIC

AJMER

11/01/2022 12:58

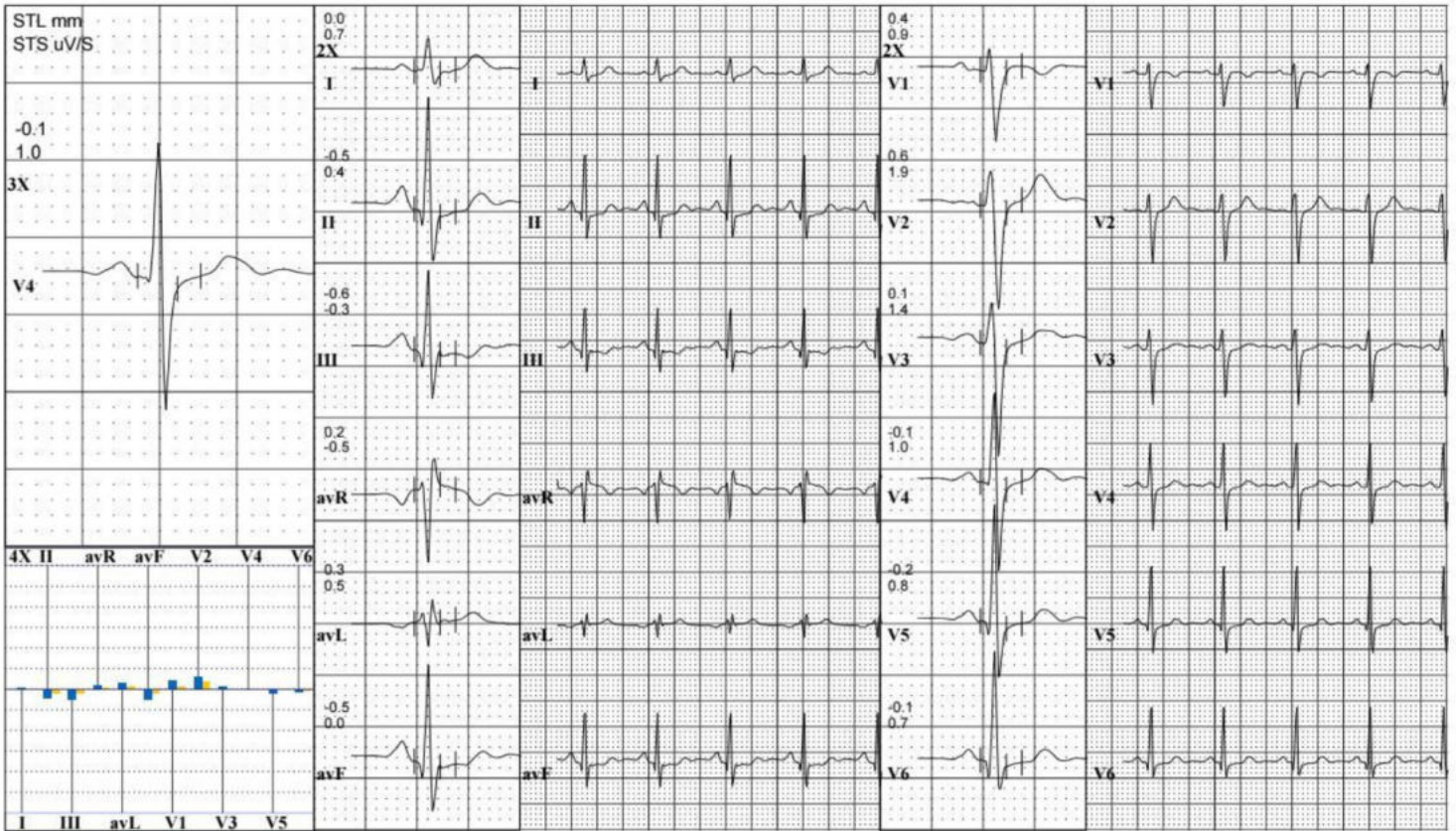


555 DEEPIKA SANKHLA
34 Yrs / M Kg / Ht- cms Ref.No.:
Date: 10/12/2022 Time: 05:40 PM

Speed: 4.2 mph Hr: 107 Target Hr: 57 % of 186 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
Grade: 16 % Mets: 12.1 Ex Time: 09:30 BLC: On Sweep: 25 mm/S
Protocol: Bruce BP: 147/92 mmHg Curr Time: 12:20 NotchOn Median Sweep: 25 mm/S

Linked Medians
Post Ex 1

Post J: 60 mS





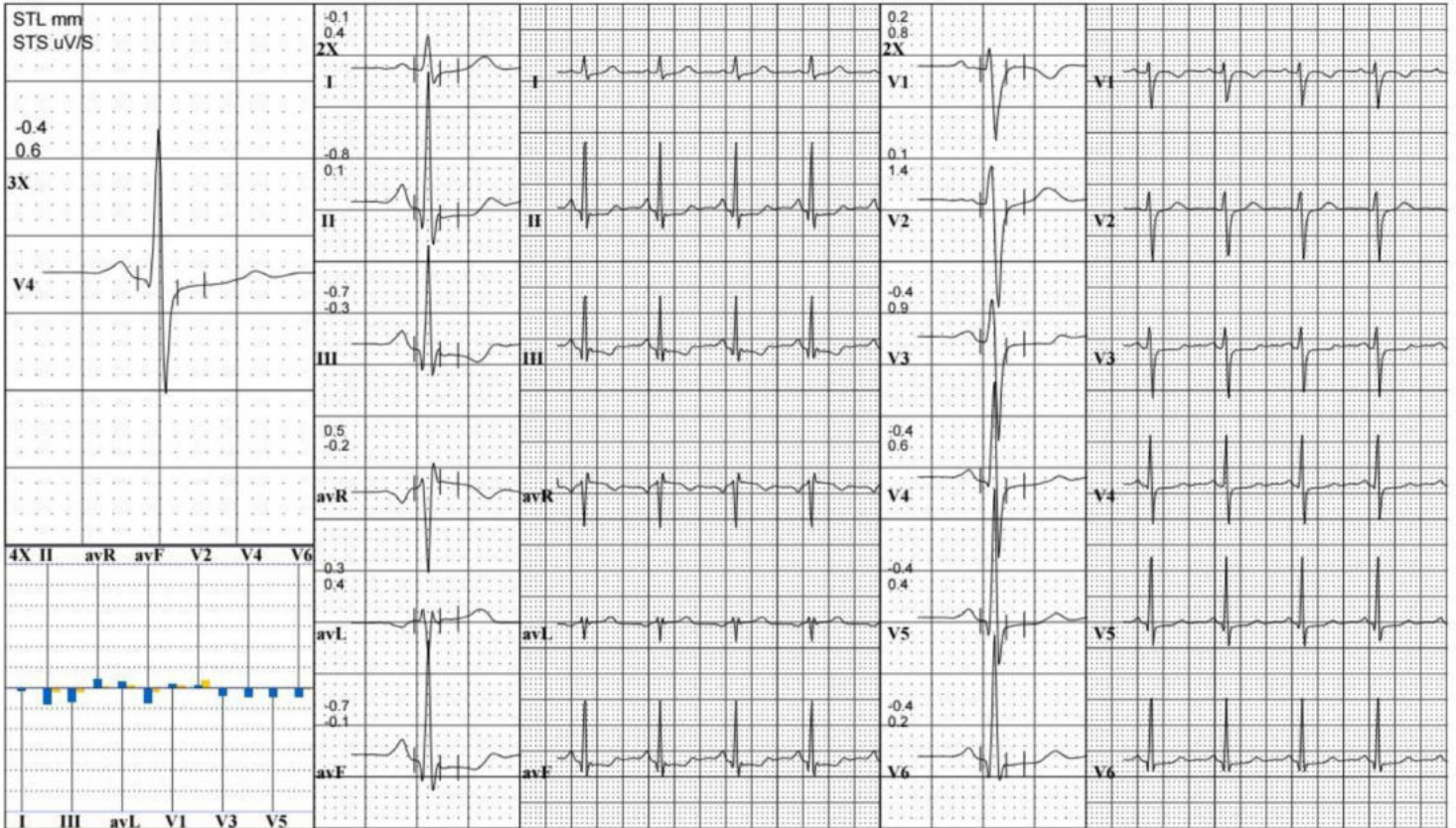
GOYAL DIAGNOSTIC
AJMER

555 **DEEPIKA SANKHLA**
34 Yrs/ M Kg / Ht- cms Ref.No.:
Date: 10/12/2022 Time: 05:40 PM

Speed: 4.2 mph Hr: 99 Target Hr: 53 % of 186 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
Grade: 16 % Mets: 12.1 Ex Time: 09:30 BLC: On Sweep: 25 mm/S
Protocol: Bruce BP: 137/88 mmHg Curr Time: 15:20 NotchOn Median Sweep: 25 mm/S

Linked Medians
Post Ex 2

Post J: 70 mS



GOYAL DIAGNOSTIC

AJMER

11/01/2022 12:56

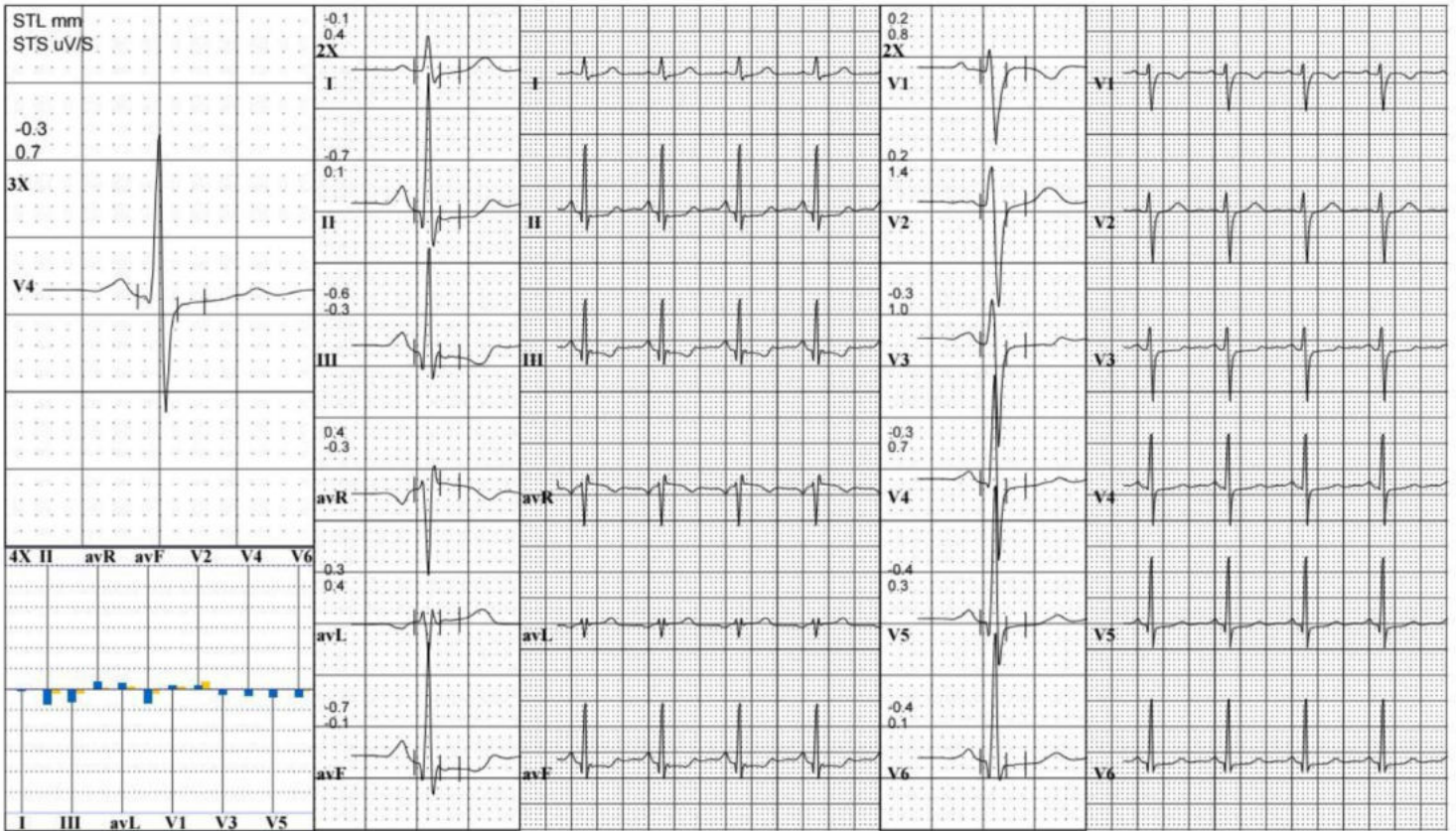


555 DEEPIKA SANKHLA
34 Yrs / M Kg / Ht- cms Ref.No.:
Date: 10/12/2022 Time: 05:40 PM

Speed: 4.2 mph Hr: 101 Target Hr: 54 % of 186 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
Grade: 16 % Mets: 12.1 Ex Time: 09:30 BLC: On Sweep: 25 mm/S
Protocol: Bruce BP: 127/84 mmHg Curr Time: 16:21 NotchOn Median Sweep: 25 mm/S

Linked Medians
Post Ex 3

Post J: 71 mS





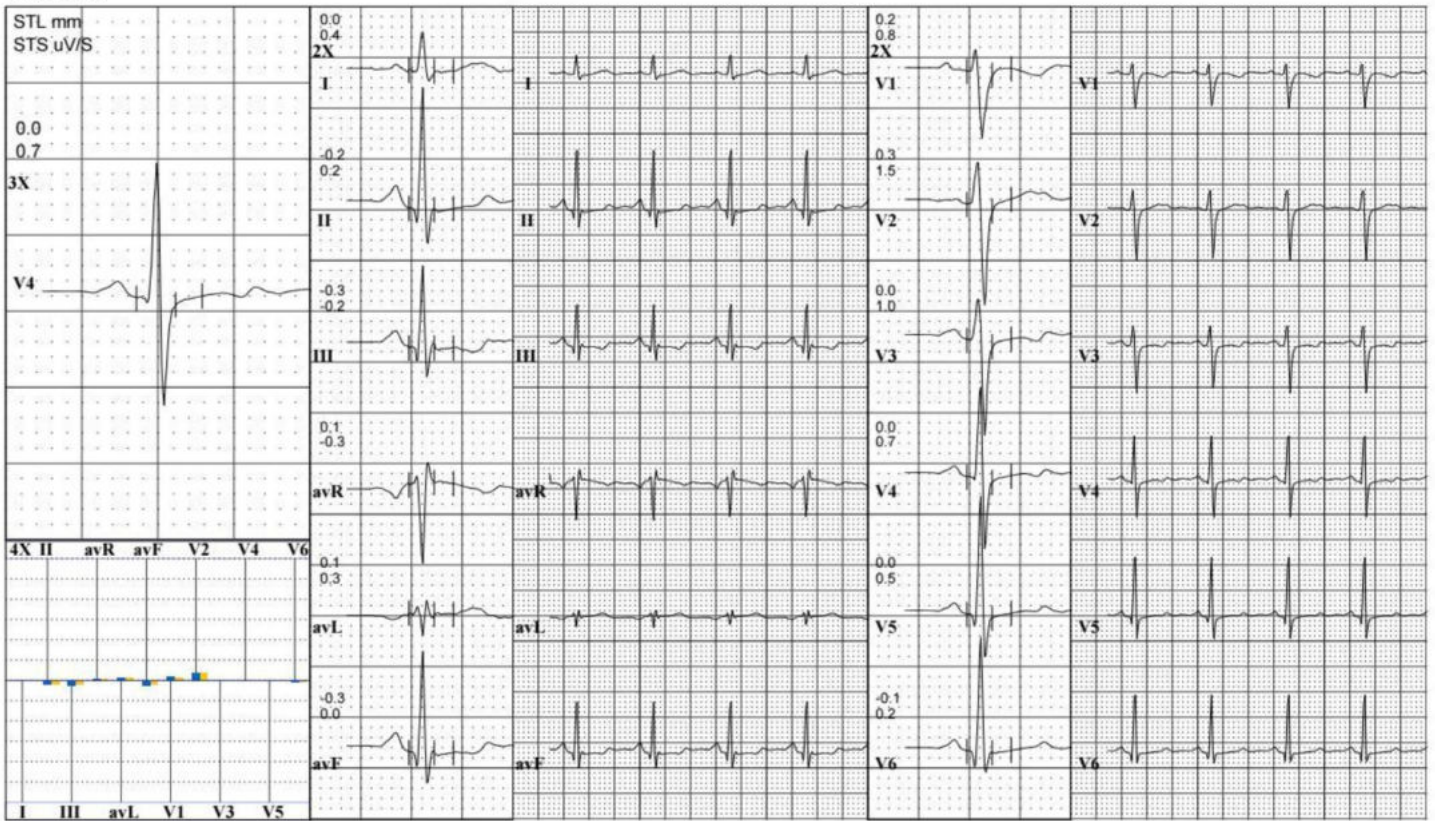
GOYAL DIAGNOSTIC
AJMER

555 DEEPIKA SANKHLA
34 Yrs/ M Kg / Ht- cms Ref.No.:
Date: 10/12/2022 Time: 05:40 PM

Speed: -- mph Hr: 95 Target Hr: 51 % of 186 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
Grade: -- % Mets: 1 Ex Time: -- min:sec BLC: On Sweep: 25 mm/S
Protocol: Bruce BP: 117/80 mmHg Curr Time: 00:09 NotchOn Median Sweep 25 mm/S

Linked Medians
Pre Ex
Supine

Post J: 71 mS



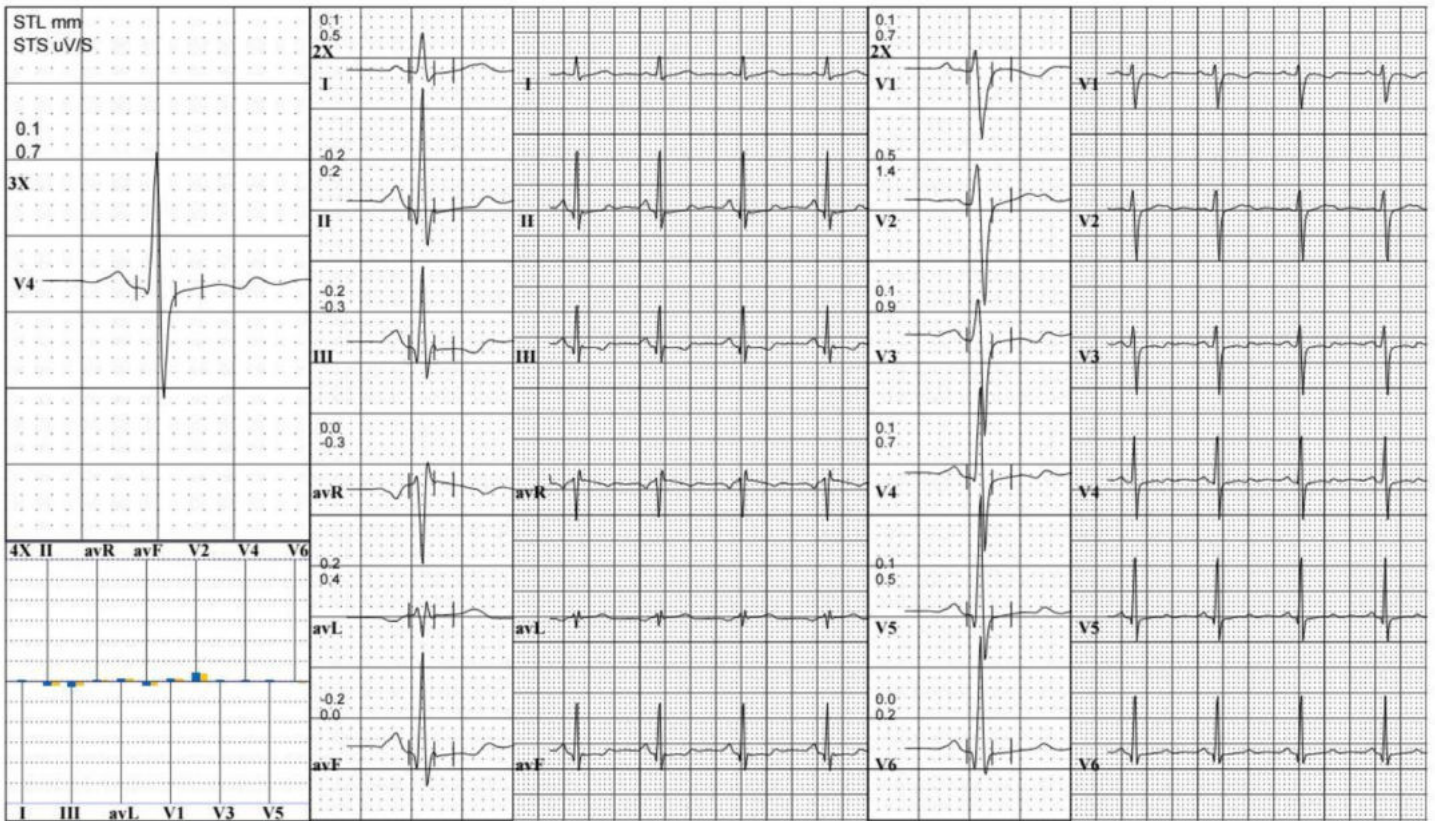


GOYAL DIAGNOSTIC AJMER

555 DEEPIKA SANKHLA
34 Yrs/ M Kg / Ht- cms Ref.No.:
Date: 10/12/2022 Time: 05:40 PM
Post J: 71 mS

Speed: -- mph Hr: 87 Target Hr: 46 % of 186 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
Grade: -- % Mets: 1 Ex Time: -- min:sec BLC: On Sweep: 25 mm/S
Protocol: Bruce BP: 117/80 mmHg Curr Time: 00:29 NotchOn Median Sweep 25 mm/S

Linked Medians
Pre Ex
Hyp Vent





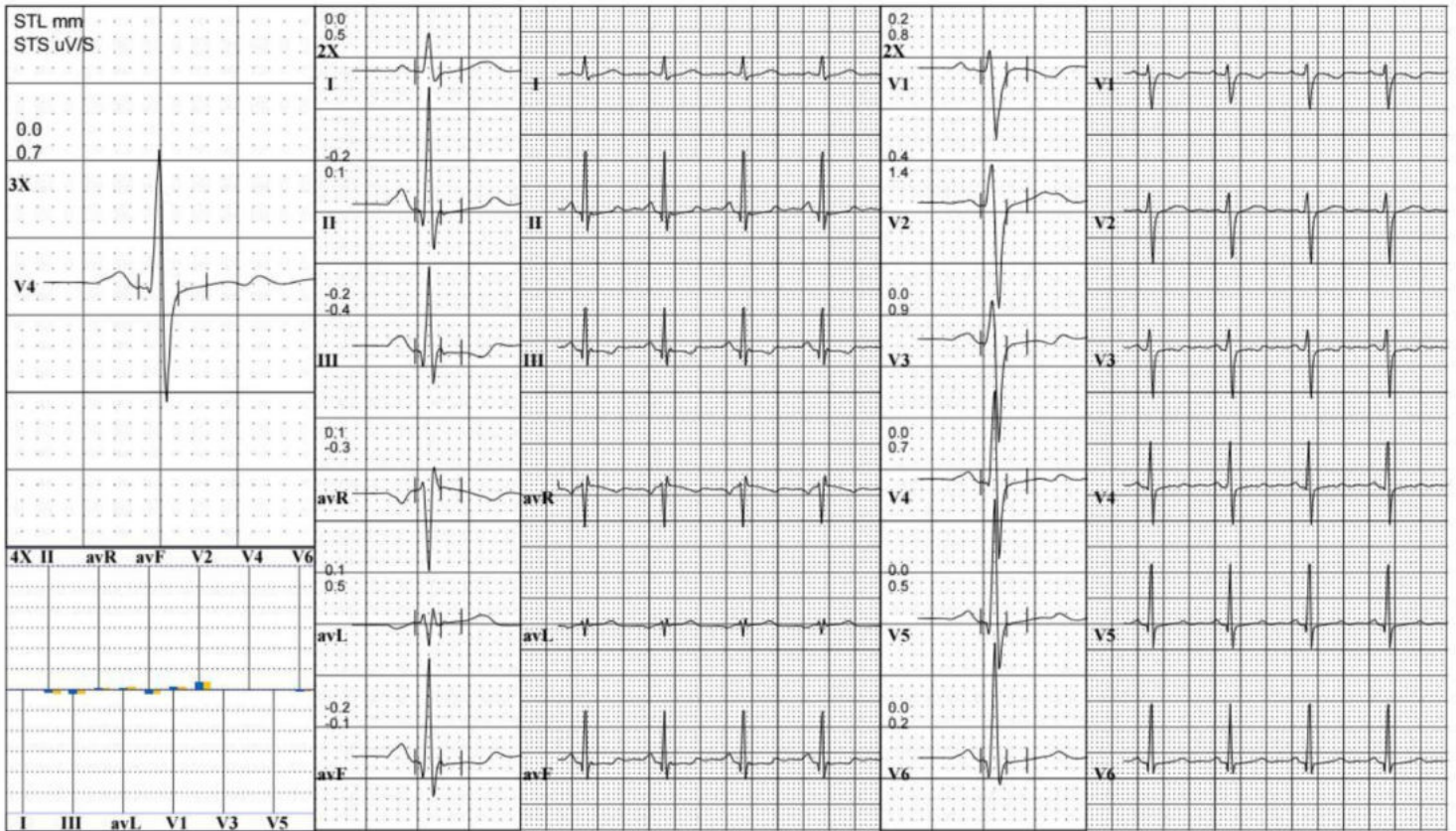
GUTAL DIAGNOSTIC
AJMER

555 **DEEPIKA SANKHLA**
34 Yrs/ M Kg / Ht- cms Ref.No.:
Date: 10/12/2022 Time: 05:40 PM

Speed: -- mph Hr: 94 Target Hr: 50 % of 186 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
Grade: -- % Mets: 1 Ex Time: -- min:sec BLC: On Sweep: 25 mm/S
Protocol: Bruce BP: 117/80 mmHg Curr Time: 00:50 NotchOn Median Sweep: 25 mm/S

Linked Medians
Pre Ex
Standing

Post J: 75 mS





GOYAL DIAGNOSTIC
AJMER

555 **DEEPIKA SANKHLA**
34 Yrs/ M Kg / Ht- cms Ref. No.:

Date: **10/12/2022** Ref By:
Time: **05:40 PM** Protocol: **Bruce**

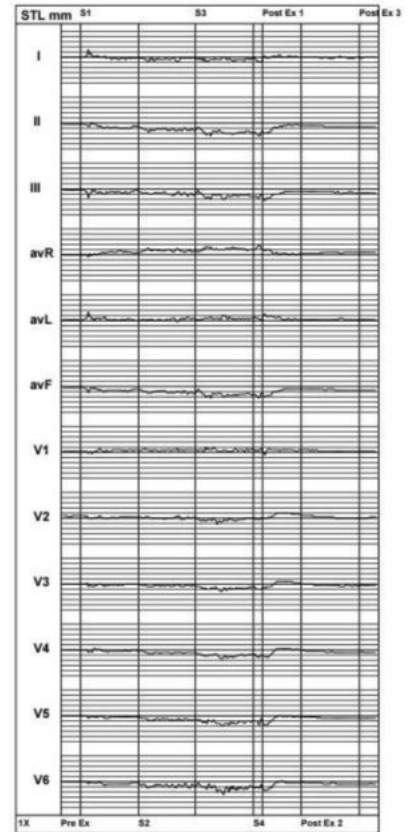
Summary

History:
Medication:

Stage	Stg Time min:sec	Speed mph	Grade %	METs	HR bpm	BP mmHg	RPP	PVCs
Pre Ex				1	95			
Supine				1	95	117/80	111	
Hyp Vent				1	87	117/80	102	
Standing				1	94	117/80	110	
S1	03:00	1.7	10.0	4.8	118	127/84	150	
S2	03:00	2.5	12.0	6.9	129	137/88	177	
S3	03:00	3.4	14.0	9.5	154	147/92	226	
Peak Ex	00:30	4.2	16.0	12.1	161	157/96	253	
Post Ex 1	02:00	4.2	16.0	12.1	107	147/92	157	
Post Ex 2	03:00	4.2	16.0	12.1	99	137/88	136	
Post Ex 3	01:01	4.2	16.0	12.1	101	127/84	128	
Finish		4.2	16.0	12.1	100	127/84	127	

Findings: Exercise Time : 09:30 mins
 Max HR attained : 161 bpm 86 % of Target 186 bpm
 Max BP : 157/96mmHg
 Max Workload attained : 12.1 METs (Good Effort Tolerance)
 Reason for Test Termination: Patient Completed Test

No significant ST segment changes noted during exercise or recovery stages.
 No Angina / Arrhythmia / S3 / Murmur
 Final Impression : Test is negative for inducible ischaemia.





GOYAL DIAGNOSTIC
AJMER

5 **DEEPIKA SANKHLA**
Yrs/ M Kg / Ht cms Ref. No.:
Date: 10/12/2022 Time: 05:40 PM

Speed: --- mph Hr: **95** Target Hr: **51 % of 186** Filter: **0.1 - 100 Hz** Gain: **10 mm/mV**
Grade: --- % Mets: **12.1 METs** Ex Time: **09:30 mins** BLC: **On** Sweep: **25 mm/S**
Protocol: **Bruce** BP: **157/96mmHg** Curr Time: **00:01** Notch **On** Median Sweep **25 mm/S**

STS Values Table

STS uV/S	II	III	avR	avL	avF	V1	V2	V3	V4	V5	V6	
Pre Ex	0.1	0.1	0.0	-0.1	0.0	0.1	0.9	1.6	1.1	0.9	0.6	0.4
Supine	0.4	0.2	-0.2	-0.3	0.3	0.0	0.8	1.5	1.0	0.7	0.5	0.2
Hyp Vent	0.5	0.2	-0.3	-0.3	0.4	0.0	0.7	1.4	0.9	0.7	0.5	0.2
Standing	0.5	0.1	-0.4	-0.3	0.5	-0.1	0.8	1.4	0.9	0.7	0.5	0.2
S1	0.4	-0.2	-0.6	-0.1	0.5	-0.4	0.7	1.5	1.1	0.8	0.5	0.2
S2	0.8	0.3	-0.5	-0.5	0.6	-0.1	0.9	1.7	1.1	1.0	0.7	0.4
S3	0.6	0.1	-0.5	-0.3	0.6	-0.2	0.7	2.3	1.5	1.2	1.0	0.6
Peak Ex	0.7	0.6	-0.1	-0.6	0.4	0.3	0.6	2.7	1.6	1.6	1.0	0.8
Post Ex 1	0.7	0.4	-0.3	-0.5	0.5	0.0	0.9	1.9	1.4	1.0	0.8	0.7
Post Ex 2	0.4	0.1	-0.3	-0.2	0.4	-0.1	0.8	1.4	0.9	0.6	0.4	0.2
Post Ex 3	0.4	0.1	-0.3	-0.3	0.4	-0.1	0.8	1.4	1.0	0.7	0.3	0.1
Finish	0.4	0.1	-0.3	-0.3	0.3	-0.1	0.9	1.5	1.0	0.7	0.4	0.2

STL Values Table

STL mm I	II	III	avR	avL	avF	V1	V2	V3	V4	V5	V6
Pre Ex	0.0	-0.1	-0.1	0.1	0.1	-0.1	0.2	0.5	0.0	0.0	0.0
Supine	0.0	-0.2	-0.3	0.1	0.1	-0.3	0.2	0.3	0.0	0.0	-0.1
Hyp Vent	0.1	-0.2	-0.2	0.0	0.2	-0.2	0.1	0.5	0.1	0.1	0.0
Standing	0.0	-0.2	-0.2	0.1	0.1	-0.2	0.2	0.4	0.0	0.0	0.0
S1	-0.3	-0.8	-0.5	0.5	0.1	-0.6	0.4	0.2	-0.1	-0.2	-0.3
S2	-0.4	-0.9	-0.5	0.6	0.1	-0.7	0.4	-0.1	-0.4	-0.7	-0.6
S3	-0.4	-1.9	-1.5	1.1	0.6	-1.7	0.4	0.0	-0.8	-1.1	-1.0
Peak Ex	0.2	-2.1	-2.3	0.9	1.2	-2.2	-0.2	-0.1	-0.7	-1.3	-1.8
Post Ex 1	0.0	-0.5	-0.6	0.2	0.3	-0.5	0.4	0.6	0.1	-0.1	-0.2
Post Ex 2	0.1	-0.8	-0.7	0.5	0.3	-0.7	0.2	0.1	-0.4	-0.4	-0.4
Post Ex 3	0.1	-0.7	-0.6	0.4	0.3	-0.7	0.2	0.2	-0.3	-0.3	-0.4
Finish	-0.1	-0.7	-0.6	0.4	0.3	-0.6	0.2	0.3	-0.2	-0.2	-0.3