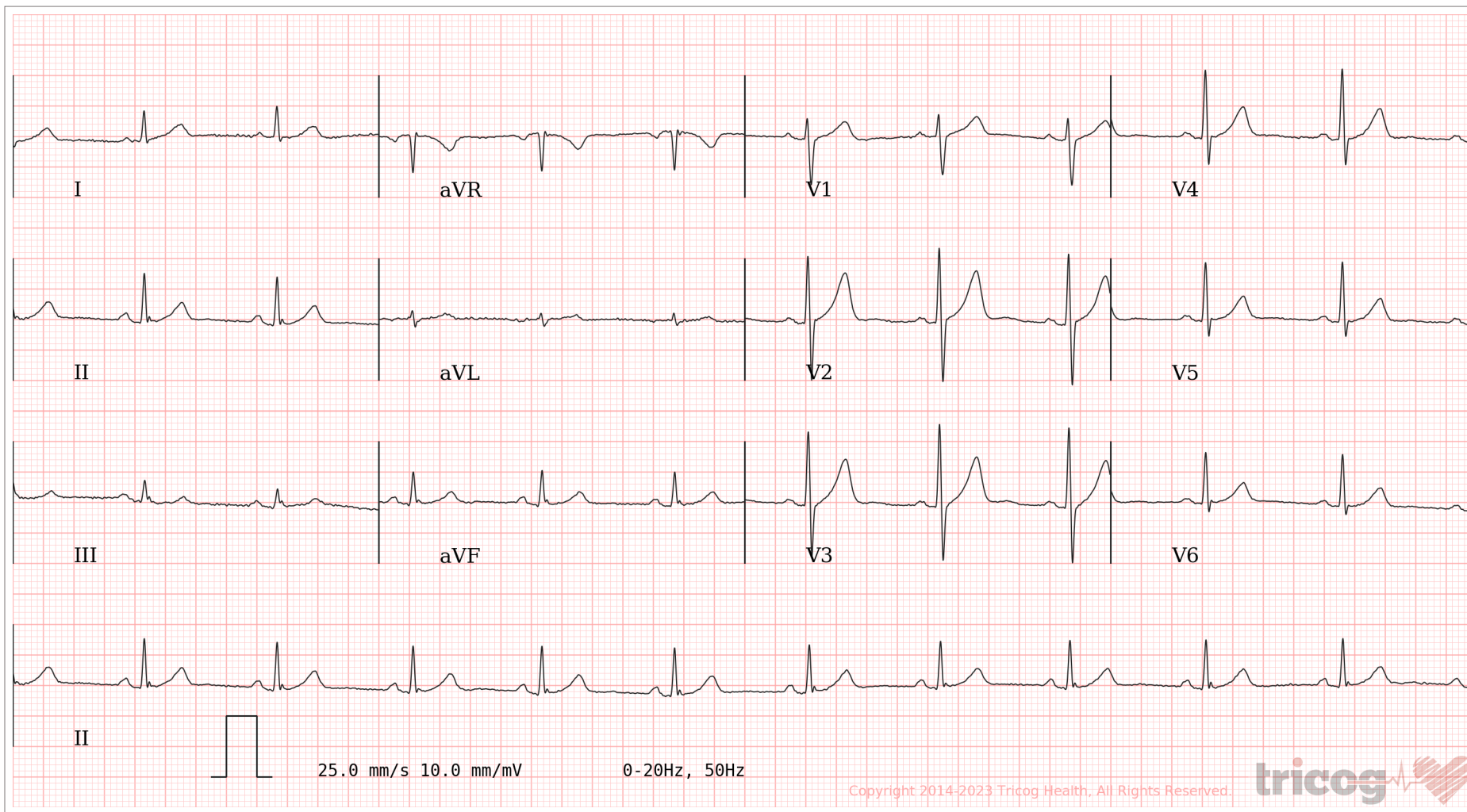


Chandan Diagnostic



Age / Gender: 42/Male
Patient ID: CHLD0134872223
Patient Name: Mr.SUBODH KOTNALA ECG

Date and Time: 28th Jan 23 10:50 AM



AR: 69bpm VR: 69bpm QRSD: 72ms QT: 366ms QTc: 392ms PRI: 136ms P-R-T: 68° 59° 51°

ECG Within Normal Limits: Sinus Rhythm. Please correlate clinically.

AUTHORIZED BY

Dr. Charit
MD, DM: Cardiology

REPORTED BY

Dr. Prajna Jinachandra Jain

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.

63382



CHANDAN DIAGNOSTIC CENTRE

Add: Opp. Vishal Megamart, Nainital Road, Haldwani
Ph: ,9235400975
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SUBODH KOTNALA	Registered On	: 28/Jan/2023 10:10:37
Age/Gender	: 42 Y 6 M 22 D /M	Collected	: 28/Jan/2023 10:29:06
UHID/MR NO	: CHLD.0000086672	Received	: 28/Jan/2023 10:48:56
Visit ID	: CHLD0134872223	Reported	: 28/Jan/2023 13:28:52
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
-----------	--------	------	--------------------	--------

Blood Group (ABO & Rh typing) * , Blood

Blood Group	O
Rh (Anti-D)	POSITIVE

Complete Blood Count (CBC) * , Whole Blood

Haemoglobin	14.60	g/dl	1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl 1 Mo- 10.0-18.0 g/dl 3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl
-------------	-------	------	--

TLC (WBC)	6,400.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
-----------	----------	--------	------------	----------------------

DLC

Polymorphs (Neutrophils)	68.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	27.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	1.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	4.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE

ESR

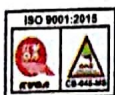
Observed	14.00	Mm for 1st hr.	
Corrected	12.00	Mm for 1st hr.	<9
PCV (HCT)	46.00	%	40-54

Platelet count

Platelet Count	1.58	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	17.10	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	47.90	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.20	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	13.20	fL	6.5-12.0	ELECTRONIC IMPEDANCE

RBC Count

RBC Count	4.90	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
-----------	------	-------------	---------	----------------------





CHANDAN DIAGNOSTIC CENTRE

Add: Opp. Vishal Megamart, Nainital Road, Haldwani
Ph: ,9235400975
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SUBODH KOTNALA	Registered On	: 28/Jan/2023 10:10:37
Age/Gender	: 42 Y 6 M 22 D /M	Collected	: 28/Jan/2023 10:29:06
UHID/MR NO	: CHLD.0000086672	Received	: 28/Jan/2023 10:48:56
Visit ID	: CHLD0134872223	Reported	: 28/Jan/2023 13:28:52
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Indices (MCV, MCH, MCHC)				
MCV	89.80	fl	80-100	CALCULATED PARAMETER
MCH	29.80	pg	28-35	CALCULATED PARAMETER
MCHC	33.10	%	30-38	CALCULATED PARAMETER
RDW-CV	12.40	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	41.60	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	4,352.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	256.00	/cu mm	40-440	




Dr Vinod Ojha
MD Pathologist





CHANDAN DIAGNOSTIC CENTRE

Add: Opp. Vishal Megamart, Nainital Road, Haldwani
Ph: ,9235400975
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SUBODH KOTNALA	Registered On	: 28/Jan/2023 10:10:39
Age/Gender	: 42 Y 6 M 22 D /M	Collected	: 28/Jan/2023 10:29:06
UHID/MR NO	: CHLD.0000086672	Received	: 28/Jan/2023 10:48:56
Visit ID	: CHLD0134872223	Reported	: 28/Jan/2023 12:26:45
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
-----------	--------	------	--------------------	--------

GLUCOSE FASTING , Plasma

Glucose Fasting	180.20	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD
-----------------	---------------	-------	--	---------

Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

Glucose PP

Sample: Plasma After Meal

223.80	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD
---------------	-------	--	---------

Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

GLYCOSYLATED HAEMOGLOBIN (HBA1C) * , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	8.00	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	64.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	183	mg/dl	

Interpretation:

NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes management.





CHANDAN DIAGNOSTIC CENTRE

Add: Opp. Vishal Megamart, Nainital Road, Haldwani
Ph: ,9235400975
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SUBODH KOTNALA	Registered On	: 28/Jan/2023 10:10:39
Age/Gender	: 42 Y 6 M 22 D /M	Collected	: 28/Jan/2023 10:29:06
UHID/MR NO	: CHLD.0000086672	Received	: 28/Jan/2023 10:48:56
Visit ID	: CHLD0134872223	Reported	: 28/Jan/2023 12:26:45
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
-----------	--------	------	--------------------	--------

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%) NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

**Some danger of hypoglycemic reaction in Type 1 diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.

Clinical Implications:

*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

*With optimal control, the HbA 1c moves toward normal levels.

*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated *Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy c. Alcohol toxicity d. Lead toxicity

*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

*Pregnancy d. chronic renal failure. Interfering Factors:

*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

BUN (Blood Urea Nitrogen) Sample: Serum	9.80	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample: Serum	0.91	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20-275 Female-20-320	MODIFIED JAFFES
Uric Acid Sample: Serum	4.34	mg/dl	3.4-7.0	URICASE





CHANDAN DIAGNOSTIC CENTRE

Add: Opp. Vishal Megamart, Nainital Road, Haldwani
Ph: ,9235400975
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SUBODH KOTNALA	Registered On	: 28/Jan/2023 10:10:39
Age/Gender	: 42 Y 6 M 22 D /M	Collected	: 28/Jan/2023 10:29:06
UHID/MR NO	: CHLD.0000086672	Received	: 28/Jan/2023 10:48:56
Visit ID	: CHLD0134872223	Reported	: 28/Jan/2023 12:26:45
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
-----------	--------	------	--------------------	--------

LFT (WITH GAMMA GT) * , Serum

SGOT / Aspartate Aminotransferase (AST)	30.03	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	32.95	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	29.40	IU/L	11-50	OPTIMIZED SZAIZING
Protein	7.13	gm/dl	6.2-8.0	BIRUET
Albumin	4.21	gm/dl	3.8-5.4	B.C.G.
Globulin	2.92	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.44		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	104.54	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.44	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.18	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.26	mg/dl	< 0.8	JENDRASSIK & GROF

LIPID PROFILE (MINI) , Serum

Cholesterol (Total)	191.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	41.00	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	105	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	45.14	mg/dl	10-33	CALCULATED
Triglycerides	225.70	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP


Dr Vinod Ojha
MD Pathologist





CHANDAN DIAGNOSTIC CENTRE

Add: Opp. Vishal Megamart, Nainital Road, Haldwani
Ph: ,9235400975
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SUBODH KOTNALA	Registered On	: 28/Jan/2023 10:10:38
Age/Gender	: 42 Y 6 M 22 D /M	Collected	: 28/Jan/2023 14:55:12
UHID/MR NO	: CHLD.0000086672	Received	: 28/Jan/2023 15:23:24
Visit ID	: CHLD0134872223	Reported	: 28/Jan/2023 16:13:14
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
-----------	--------	------	--------------------	--------

URINE EXAMINATION, ROUTINE * , Urine

Color	PALE YELLOW			
Specific Gravity	1.010			
Reaction PH	Acidic (6.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	PRESENT (+)	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	2-3/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	1-2/h.p.f			
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

SUGAR, FASTING STAGE * , Urine

Sugar, Fasting stage	PRESENT(+)	gms%
----------------------	------------	------

Interpretation:

(+)	< 0.5
(++)	0.5-1.0
(+++)	1-2
(++++)	> 2





CHANDAN DIAGNOSTIC CENTRE

Add: Opp. Vishal Megamart, Nainital Road, Haldwani
Ph: ,9235400975
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SUBODH KOTNALA	Registered On	: 28/Jan/2023 10:10:38
Age/Gender	: 42 Y 6 M 22 D /M	Collected	: 28/Jan/2023 14:55:12
UHID/MR NO	: CHLD.0000086672	Received	: 28/Jan/2023 15:23:24
Visit ID	: CHLD0134872223	Reported	: 28/Jan/2023 16:13:14
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
-----------	--------	------	--------------------	--------

SUGAR, PP STAGE * , Urine

Sugar, PP Stage PRESENT (++)

Interpretation:

- (+) < 0.5 gms%
- (++) 0.5-1.0 gms%
- (+++) 1-2 gms%
- (++++) > 2 gms%




Dr Vinod Ojha
MD Pathologist





CHANDAN DIAGNOSTIC CENTRE

Add: Opp. Vishal Megamart, Nainital Road, Haldwani
Ph: ,9235400975
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SUBODH KOTNALA	Registered On	: 28/Jan/2023 10:10:38
Age/Gender	: 42 Y 6 M 22 D /M	Collected	: 28/Jan/2023 10:29:06
UHID/MR NO	: CHLD.0000086672	Received	: 28/Jan/2023 10:48:56
Visit ID	: CHLD0134872223	Reported	: 28/Jan/2023 13:48:05
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
PSA (Prostate Specific Antigen), Total * <i>Sample:Serum</i>	0.600	ng/mL	< 2.0	CLIA

Interpretation:

1. PSA is detected in the serum of males with normal, benign hypertrophic, and malignant prostate tissue.
2. Measurement of serum PSA levels is not recommended as a screening procedure for the diagnosis of cancer because elevated PSA levels also are observed in patients with benign prostatic hypertrophy. However, studies suggest that the measurement of PSA in conjunction with digital rectal examination (DRE) and ultrasound provide a better method of detecting prostate cancer than DRE alone.
3. PSA levels increase in men with cancer of the prostate, and after radical prostatectomy PSA levels routinely fall to the undetectable range.
4. If prostatic tissue remains after surgery or metastasis has occurred, PSA appears to be useful in detecting residual and early recurrence of tumor.
5. Therefore, serial PSA levels can help determine the success of prostatectomy, and the need for further treatment, such as radiation, endocrine or chemotherapy, and in the monitoring of the effectiveness of therapy.

THYROID PROFILE - TOTAL * , Serum

T3, Total (tri-iodothyronine)	91.80	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	10.20	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	5.60	µIU/mL	0.27 - 5.5	CLIA

Interpretation:

0.3-4.5	µIU/mL	First Trimester
0.5-4.6	µIU/mL	Second Trimester
0.8-5.2	µIU/mL	Third Trimester
0.5-8.9	µIU/mL	Adults 55-87 Years
0.7-27	µIU/mL	Premature 28-36 Week
2.3-13.2	µIU/mL	Cord Blood > 37Week
0.7-64	µIU/mL	Child(21 wk - 20 Yrs.)
1-39	µIU/mL	Child 0-4 Days
1.7-9.1	µIU/mL	Child 2-20 Week

1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.





CHANDAN DIAGNOSTIC CENTRE

Add: Opp. Vishal Megamart, Nainital Road, Haldwani
Ph: ,9235400975
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SUBODH KOTNALA	Registered On	: 28/Jan/2023 10:10:38
Age/Gender	: 42 Y 6 M 22 D /M	Collected	: 28/Jan/2023 10:29:06
UHID/MR NO	: CHLD.0000086672	Received	: 28/Jan/2023 10:48:56
Visit ID	: CHLD0134872223	Reported	: 28/Jan/2023 13:48:05
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
-----------	--------	------	--------------------	--------

- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.


Dr Vinod Ojha
MD Pathologist





CHANDAN DIAGNOSTIC CENTRE

Add: Opp. Vishal Megamart, Nainital Road, Haldwani
Ph: ,9235400975
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SUBODH KOTNALA	Registered On	: 28/Jan/2023 10:10:39
Age/Gender	: 42 Y 6 M 22 D /M	Collected	: N/A
UHID/MR NO	: CHLD.0000086672	Received	: N/A
Visit ID	: CHLD0134872223	Reported	: 28/Jan/2023 10:55:46
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD	Status	: Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

X-RAY DIGITAL CHEST PA *

(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

DIGITAL CHEST P-A VIEW:-

- Bilateral lung fields appear grossly unremarkable.
- Diaphragmatic shadows are normal on both sides.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Bilateral hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Soft tissue shadow appears normal.
- Bony cage is normal.

IMPRESSION:-

No significant abnormality is seen.

Adv:-Clinico-pathological correlation.

Dr Sushil Pandey(MD Radiodignosis)





CHANDAN DIAGNOSTIC CENTRE

Add: Opp. Vishal Megamart, Nainital Road, Haldwani
Ph: ,9235400975
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SUBODH KOTNALA	Registered On	: 28/Jan/2023 10:10:39
Age/Gender	: 42 Y 6 M 22 D /M	Collected	: N/A
UHID/MR NO	: CHLD.0000086672	Received	: N/A
Visit ID	: CHLD0134872223	Reported	: 28/Jan/2023 12:26:48
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

ULTRASOUND WHOLE ABDOMEN

LIVER: Is normal in size and echotexture. No SOL seen. No dilatation of IHBR seen. Hepatic vessels are normal. Portal vein is patent.

GALL BLADDER: Lumen anechoic, wall is normal in thickness (~3 mm). No pericholecystic fluid seen.

CBD: Normal in caliber and smoothly tapering towards its lower end.

PANCREAS: Normal in size and echotexture.

SPLEEN: Normal in size and echotexture.

KIDNEYS:-

Right kidney is normal in size, shape and echotexture with maintained CM differentiation. No dilatation of PC system is seen. No calculus seen.

Left kidney is normal in size, shape and echotexture with maintained CM differentiation. No dilatation of PC system is seen. No calculus seen.

URINARY BLADDER: Normal capacity bladder with anechoic lumen and smooth regular walls of normal thickness.

PROSTATE: Is normal in size (volume ~17 cc) and normal in echotexture. No focal lesion seen.

No evidence of any free fluid/retroperitoneal lymphadenopathy.





CHANDAN DIAGNOSTIC CENTRE

Add: Opp. Vishal Megamart, Nainital Road, Haldwani
Ph: ,9235400975
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SUBODH KOTNALA	Registered On	: 28/Jan/2023 10:10:39
Age/Gender	: 42 Y 6 M 22 D /M	Collected	: N/A
UHID/MR NO	: CHLD.0000086672	Received	: N/A
Visit ID	: CHLD0134872223	Reported	: 28/Jan/2023 12:26:48
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

IMPRESSION:- Essentially a normal scan.

(Adv:- Clinico-pathological correlation and further evaluation).

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

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG, Tread Mill Test (TMT)



Dr Sushil Pandey(MD Radiodignosis)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing *
365 Days Open *Facilities Available at Select Location



S K NURSING HOME AND HOSPITAL
G B PANT MARG TIKONIA HALDWANI
HALDWANI

Station
Telephone: 05946-221040,220263

EXERCISE STRESS TEST REPORT

Patient Name: SUBODH KOTNALA,
Patient ID: 54862
Height: 161 cm
Weight: 70 kg

DOB: 07.07.1980
Age: 42yrs
Gender: Male
Race:

Study Date: 28.01.2023
Test Type: --
Protocol: BRUCE

Referring Physician: CHANDAN DIAGNOSTIC
Attending Physician: DR.DEVASHISH GUPTA(MD)
Technician: MR.BHUWAN

Medications:
--

Medical History:
--

Reason for Exercise Test:
--

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:32	0.00	0.00	93	120/80	
	STANDING	00:30	0.00	0.00	93		
	HYPERV.	00:27	0.80	0.00	94		
EXERCISE	STAGE 1	03:00	2.70	10.00	133	130/80	
	STAGE 2	03:00	4.00	12.00	155	140/90	
	STAGE 3	02:10	5.40	14.00	171	150/90	
RECOVERY		03:07	0.00	0.00	116	120/80	

The patient exercised according to the BRUCE for 8:09 min:s, achieving a work level of Max. METS: 10.00. The resting heart rate of 93 bpm rose to a maximal heart rate of 171 bpm. This value represents 96 % of the maximal, age-predicted heart rate. The resting blood pressure of 120/80 mmHg, rose to a maximum blood pressure of 150/90 mmHg. The exercise test was stopped due to Max HR.

Interpretation

Summary: Resting ECG: normal.
Functional Capacity: above average (>20%).
HR Response to Exercise: appropriate.
BP Response to Exercise: normal resting BP - appropriate response.
Chest Pain: none.
Arrhythmias: none.
ST Changes: none.
Overall impression: Normal stress test.

Conclusions

--

Physician-

DR DEVASHISH GUPTA (MD)

Chandan Diagnostic Centre
Plot No.-1051, Near Chaudhary Kothi
Nainital Road, HALDWANI
Cont. No.- 9235400975

SUBODH KOTNALA,

Patient ID 54862

28.01.2023

2:28:52pm

12-Lead Report

PRETEST

SUPINE

00:29

94 bpm

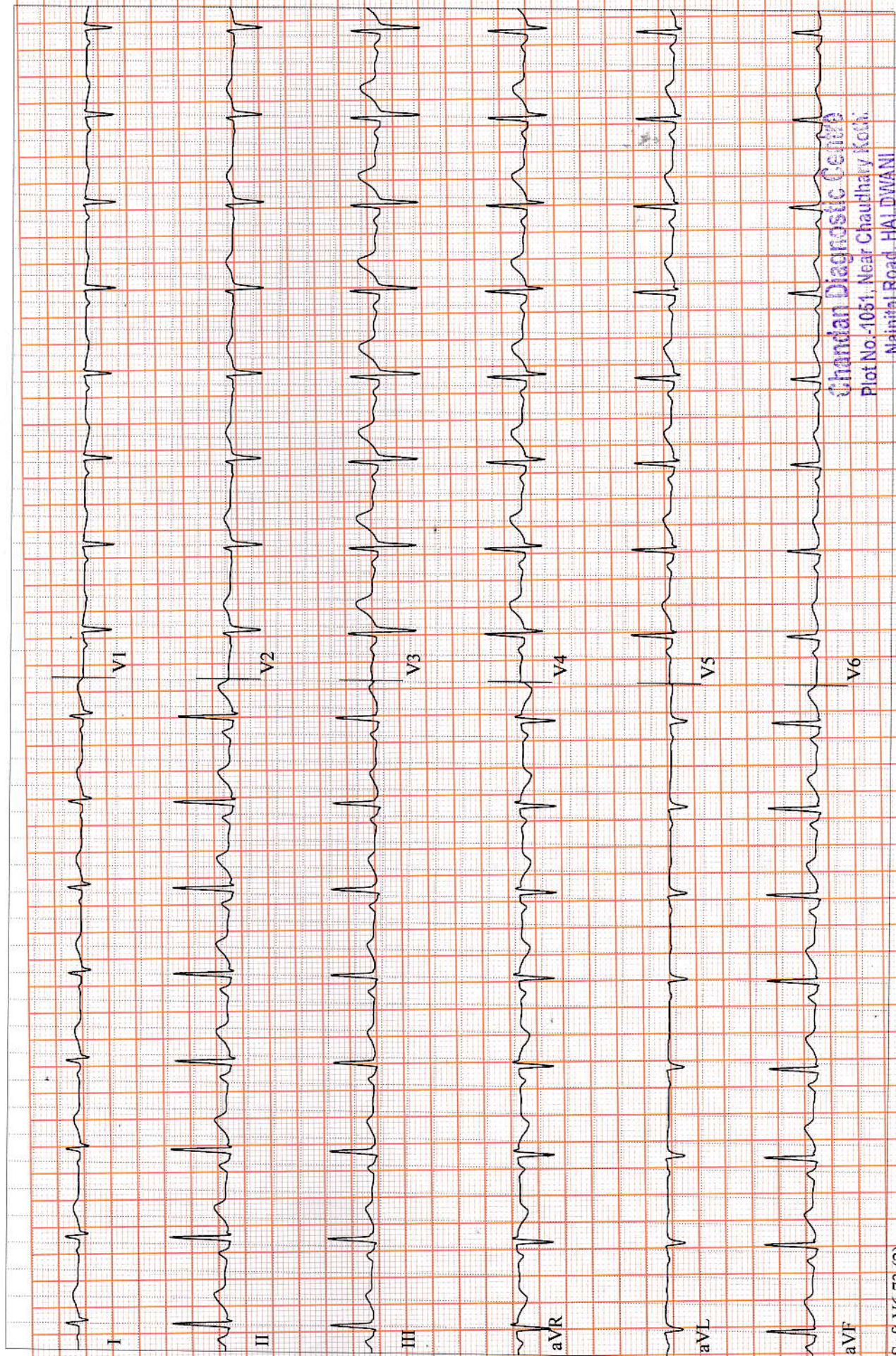
120/80 mmHg

BRUCE

0.0 km/h

0.0 %

S K NURSING HOME AND HOSPITAL



GE CardioSoft V6.73 (2)

25 mm/s 10 mm/mV 50Hz 0.01 - 20Hz S+ HR(V3,II)

Chandan Diagnostic Centre

Plot No.-1051, Near Chauthary Kothi,

Nainital Road, HAL DWANI

Start of Test: 2:28:18pm

Cont. No.- 9235400975

MICRO MED CHARTS

Page

SUBODH KOTNALA,
Patient ID 54862
28.01.2023
2:29:23pm

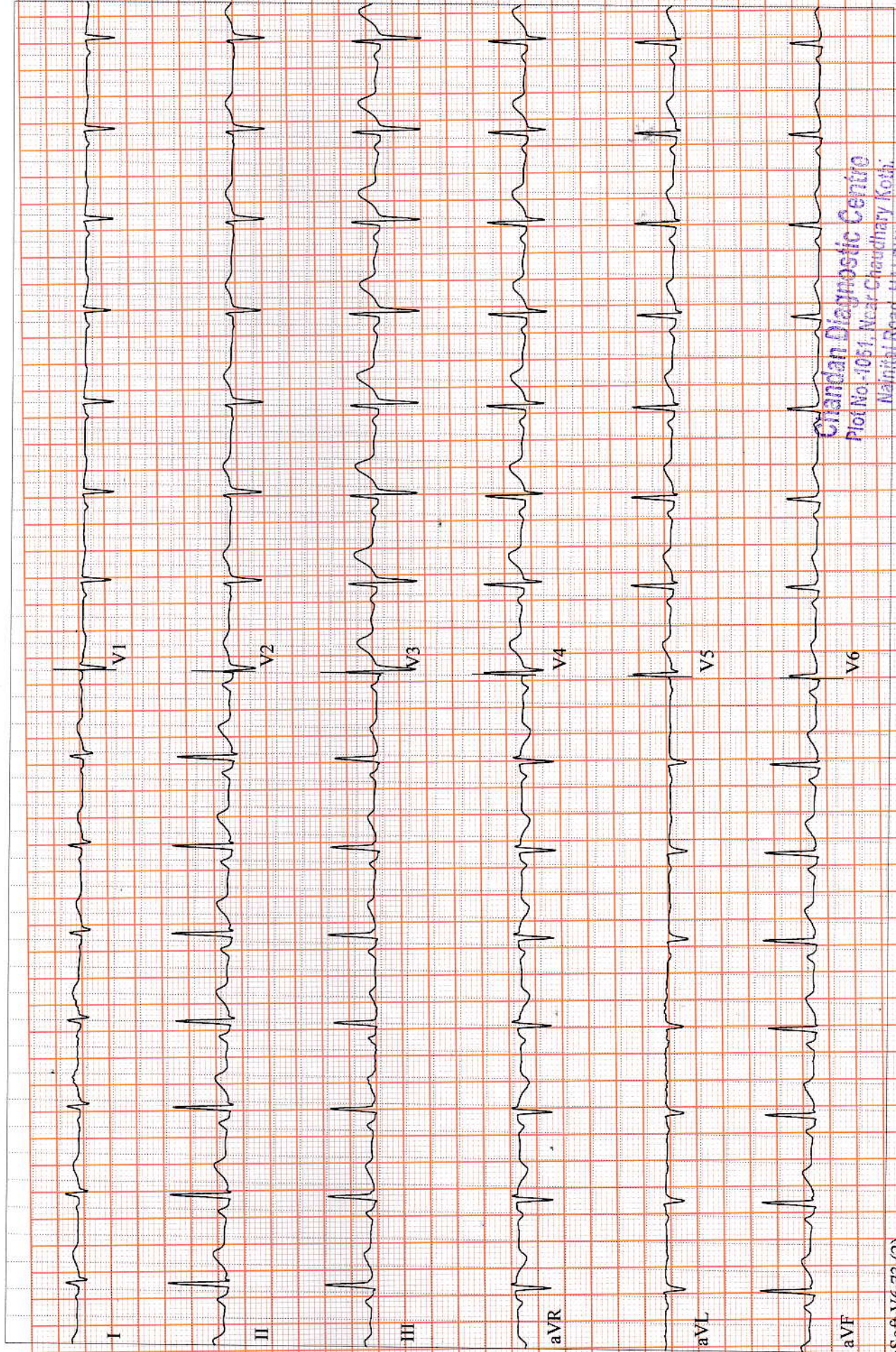
12-Lead Report

PRETEST
STANDING
01:00

93 bpm
120/80 mmHg

BRUCE
0.0 km/h
0.0 %

S K NURSING HOME AND HOSPITAL



GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01 - 20Hz S+ HR(V3,II)

Chandan Diagnostic Centre
Plot No.-1051, Near Chaudhary Kotli,
Mainki Road, HALDWAN
Cont. No. - 9235400975

Start of Test: 2:28:18pm

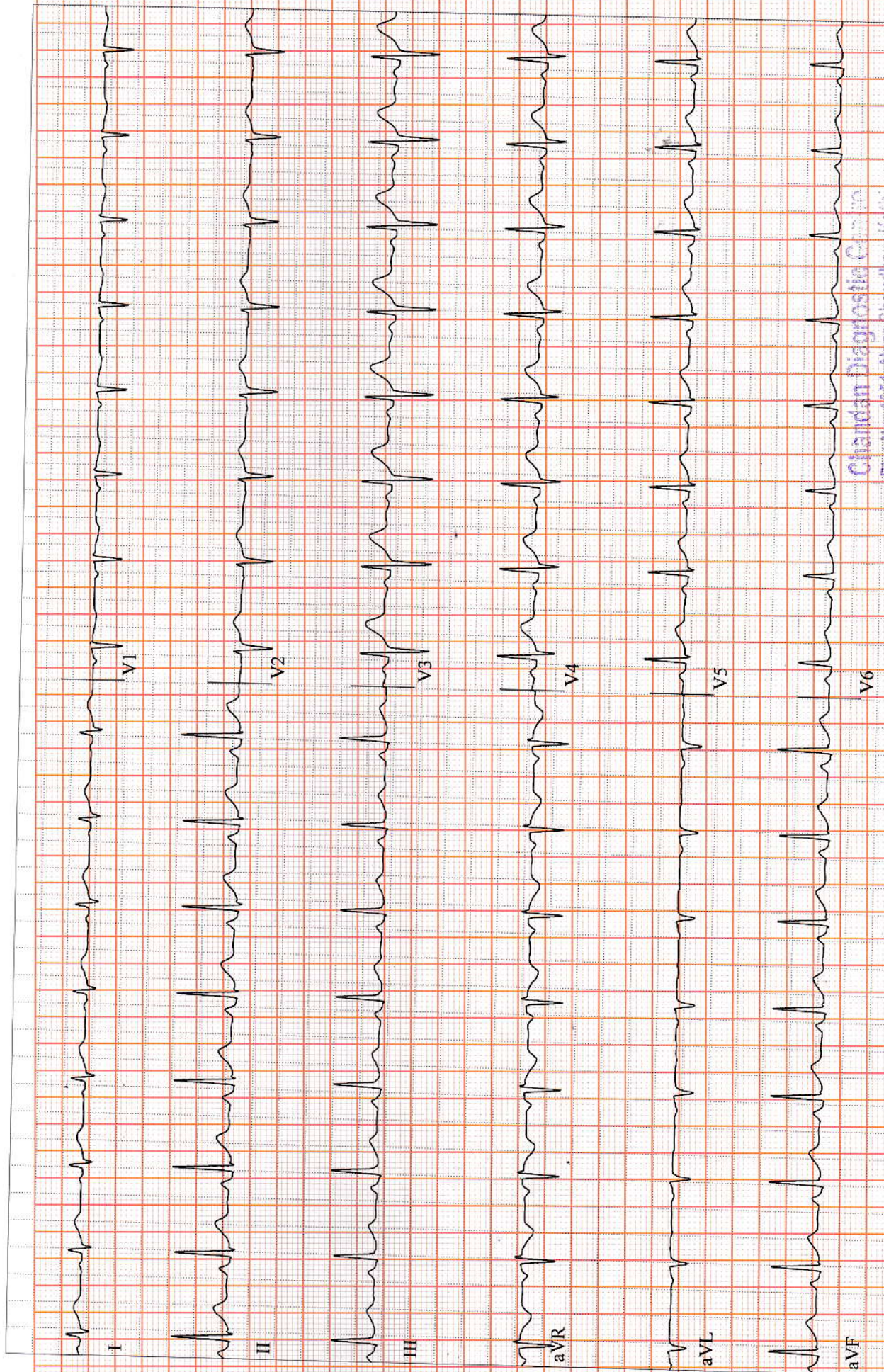
SUBODH KOTNALA,
Patient ID 54862
28.01.2023
2:29:46pm

12-Lead Report
PRETEST
HYPERV.
01:22

93 bpm

BRUCE
0.0 km/h
0.0 %

S K NURSING HOME AND HOSPITAL



GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01 - 20Hz S+ HR(V3,II)

Chandan Diagnostic Centre
Plot No.-1051, Near Chandikela, Matha
Naitital Road, JA. Dillalji

Start of Test: 2:28:18pm Cont. No.- 9235400075

SUBODH KOTNALA,

Patient ID 54862

28.01.2023

2:32:51pm

12-Lead Report

EXERCISE

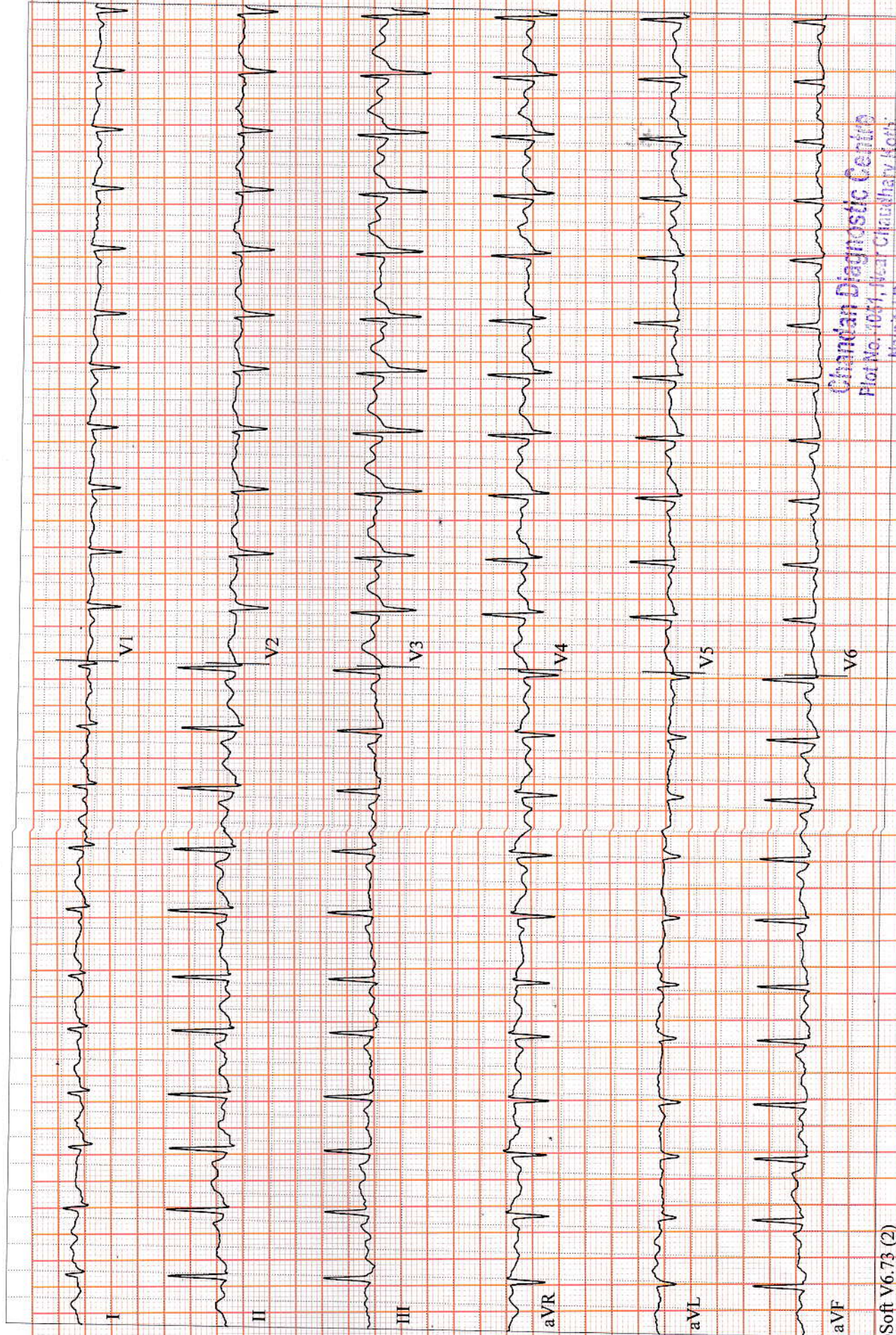
STAGE 1

03:00

133 bpm
130/80 mmHg

BRUCE
2.7 km/h
10.0 %

S K NURSING HOME AND HOSPITAL



GE CardioSoft V6.73 (2)

25 mm/s 10 mm/mV 50Hz 0.01 - 20Hz S+ HR(V3,II)

Chandan Diagnostic Centre
Plot No. 1631, Near Chaudhary Mohi
Nawal Road, HAL, DWAI

Start of Test: 2:28:18pm

Cont. No. 0300

MICRO MED CHARTS
D-202

SUBODH KOTNALA,

Patient ID 54862

28.01.2023

2:35:51pm

12-Lead Report

EXERCISE

STAGE 2

06:00

155 bpm

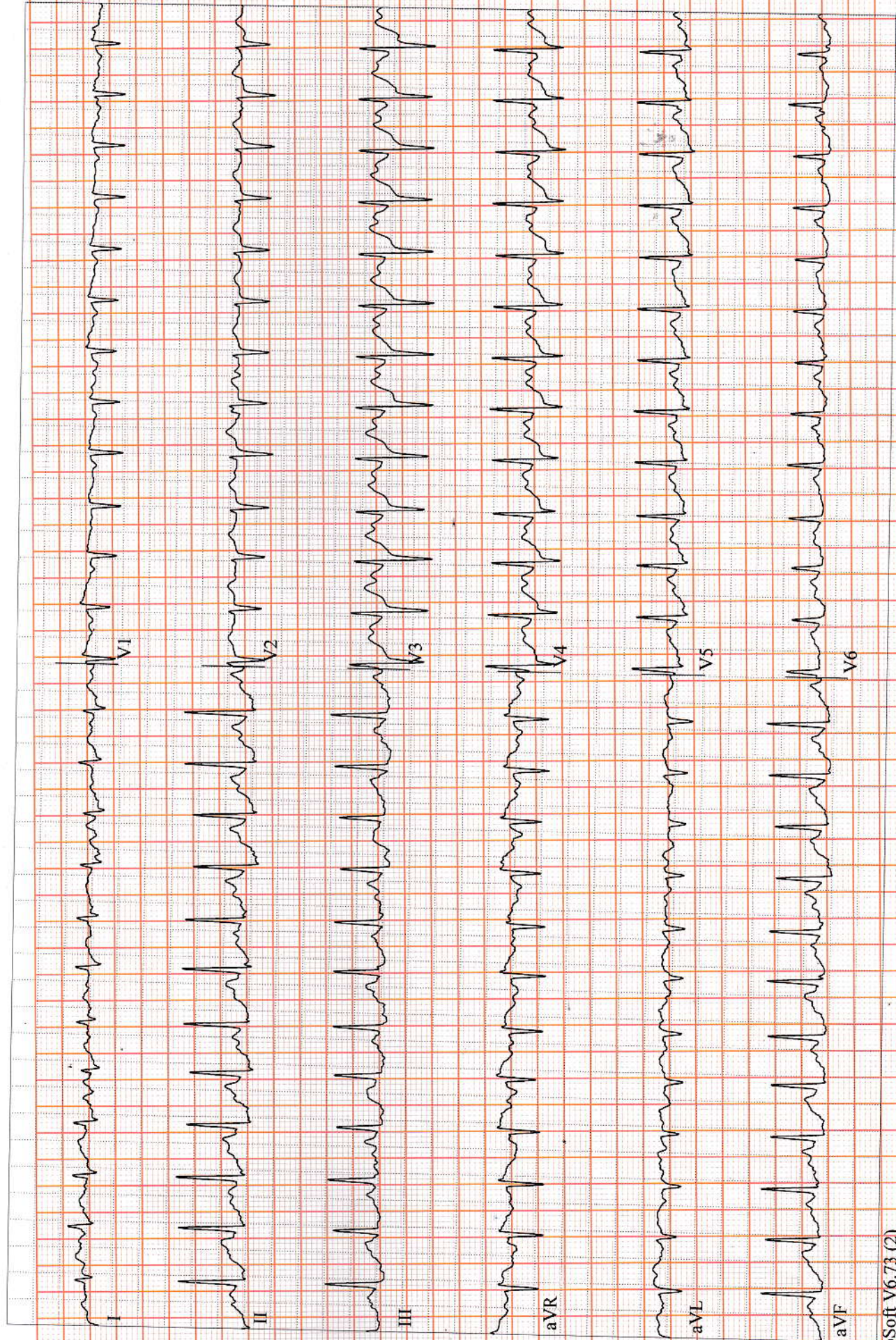
140/90 mmHg

BRUCE

4.0 km/h

12.0 %

S K NURSING HOME AND HOSPITAL



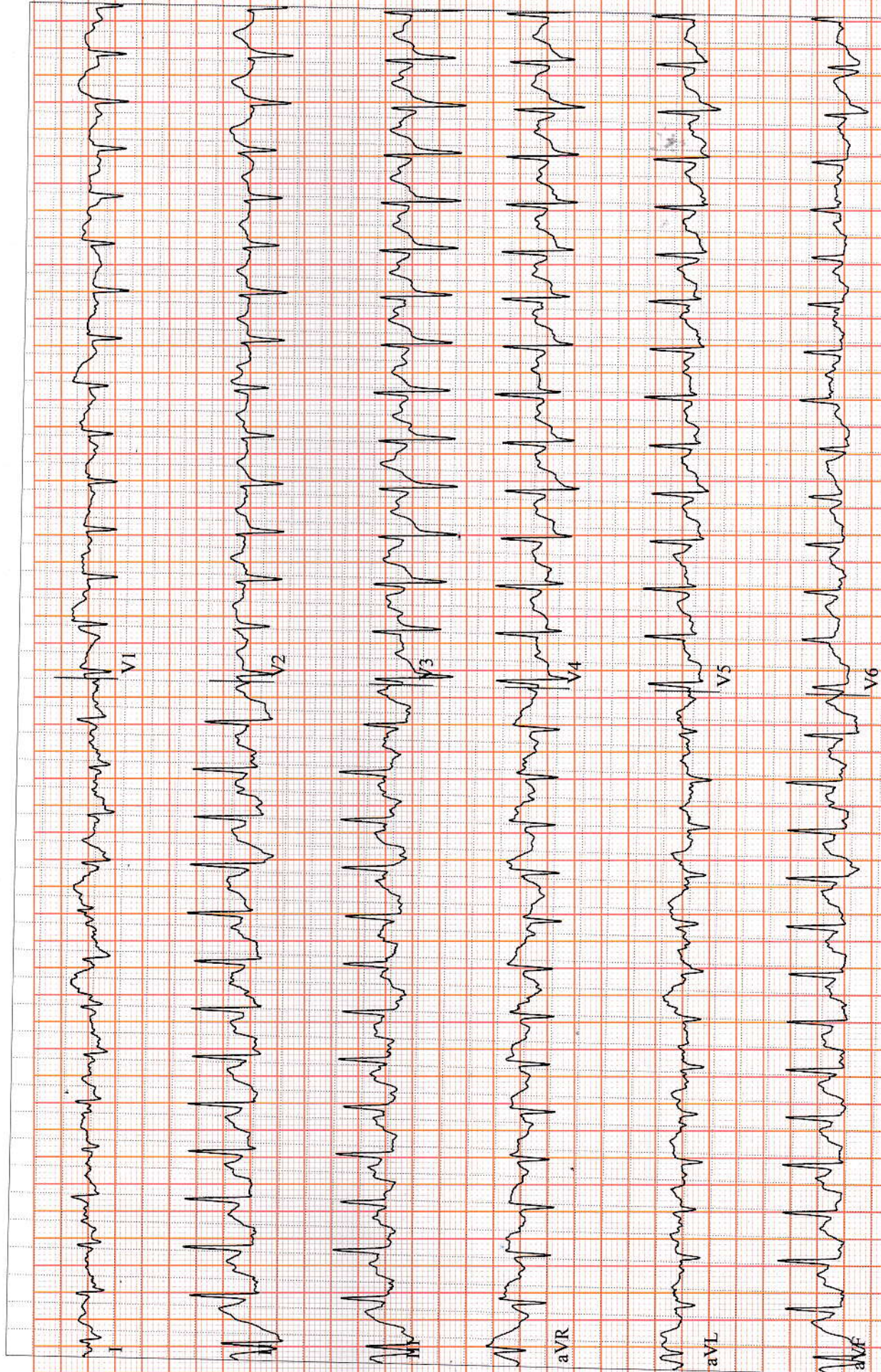
SUBODH KOTNALA,
Patient ID 54862
28.01.2023
2:38:01pm

12-Lead Report (PEAK EXERCISE)
EXERCISE STAGE 3
08:10

S K NURSING HOME AND HOSPITAL

171 bpm
150/90 mmHg

BRUCE
5.4 km/h
14.0 %



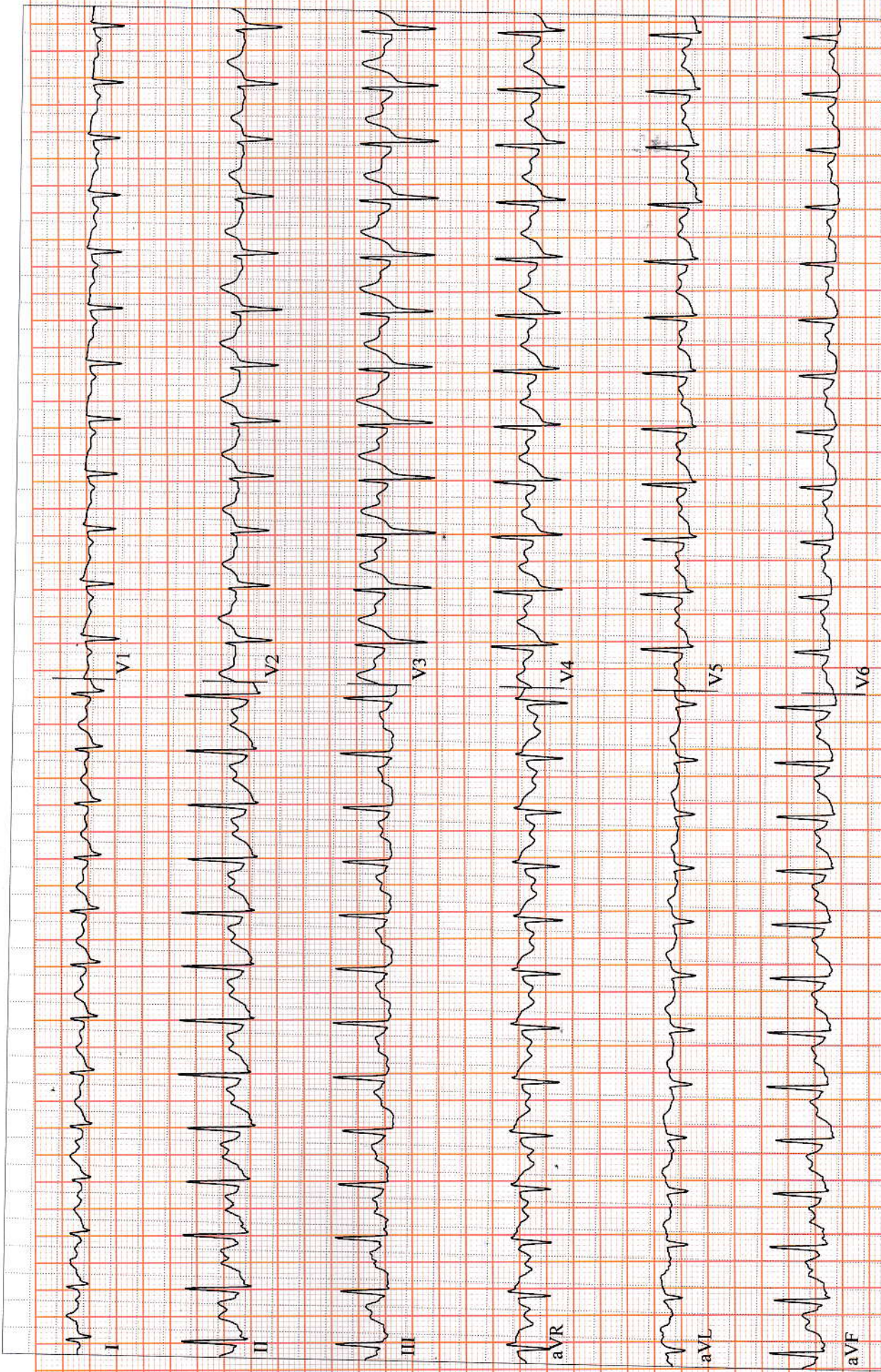
SUBODH KOTNALA,
Patient ID 54862
28.01.2023
2:39:00pm

12-Lead Report
RECOVERY
#1
01:00

151 bpm
140/90 mmHg

BRUCE
0.0 km/h
0.0 %

S K NURSING HOME AND HOSPITAL



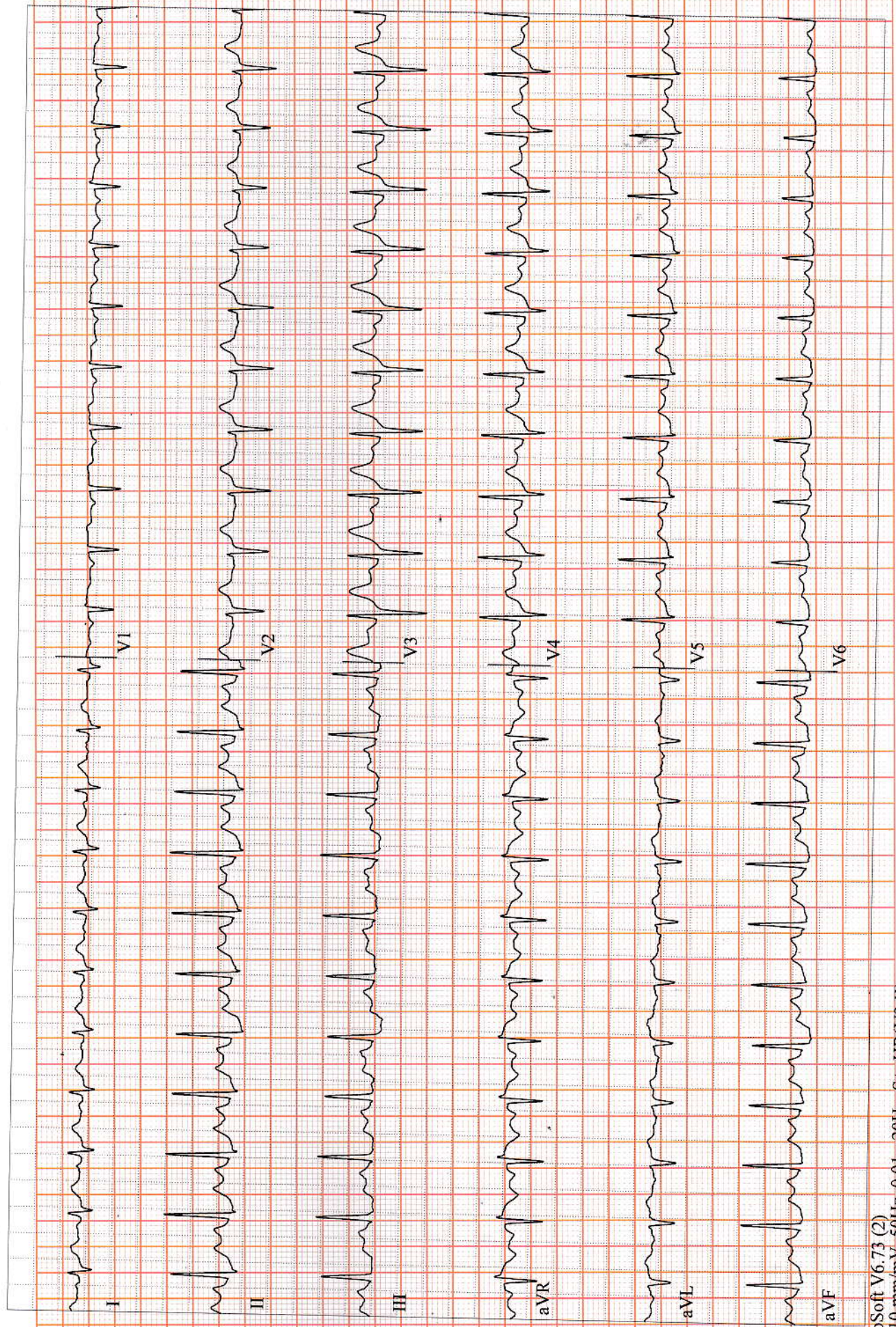
SUBODH KOTNALA,
Patient ID 54862
28.01.2023
2:40:00pm

12-Lead Report
RECOVERY
#1
02:00

130 bpm
130/90 mmHg

BRUCE
0.0 km/h
0.0 %

S K NURSING HOME AND HOSPITAL



GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01 - 20Hz S+ HR(V3,II)

Start of Test: 2:28:18pm

SUBODH KOTNALA,
Patient ID 54862
28.01.2023
2:41:00pm

12-Lead Report
RECOVERY
#1
03:00

117 bpm
120/80 mmHg

BRUCE
0.0 km/h
0.0 %

S K NURSING HOME AND HOSPITAL

