

Patient Name : Mr. PAWAN MISHRA  
Age / Gender : 31Y / Male  
Mobile No. : 8802605730  
Sample Type : BLOOD TEST

Reg No. : 2069/UHID22DL  
Date : 06-Jul-2022  
Refd. By : Dr. INSURANCE  
Manual no. :  
Sample ID : 2224

TEST NAME	RESULT	UNIT	RANGE	METHOD
<u>CLINICAL PATHOLOGY</u>				
PSA TOTAL	0.24	ng/ml	0-4.1	

&lt; 4.1

0-40 yrs : &lt; 1.4

41-50 yrs : &lt; 2.0

51-60 yrs : &lt; 3.1

61-70 yrs : &lt; 4.1

71-100 yrs : &lt; 4.4

COMMENTS: PSA levels can be also increased by prostate infection, irritation, benign prostatic hyperplasia ( BPH) and recent ejaculation, producing a false positive result. Digital rectal examination (DRE) has been shown in several studies to produce an increase in PSA.

However, the effect is clinically insignificant, since DRE causes the Most substantial increase in patients with PSA levels already elevated over 4.0 ng/mL . Most PSA in the blood is bound to serum proteins. A small amount is not protein bound and is called free PSA. In men with prostate cancer the ratio of free ( unbound) PSA to total PSA is decreased. The risk of cancer increases if the free to total ratio is less than 25%. The lower the ratio the greater the probability of prostate cancer. Measuring the Ratio of free to total PSA appears to be particularly promising promising for eliminating unnecessary biopsies in men with PSA levels between 4 and 10 ng/mL. However , both and free PSA increase immediately after ejaculation, returning slowly to baseline levels within 24 Hours.

-----End of Report-----



Dr. Sangeeta B  
DCP, DNB, PATHOLOGY,  
DMC/25252  
Lab Technician : chand



CELEBRATING



EXCELLENCE



Delhi Centre:  
IPSC Delhi : Plot No 453, Sector 19  
Dwarka, New Delhi - 110075

Contact Us : +91-7028195111

info@ipscindia.com



BOOK DIAGNOSTICS

Bengaluru Centre:  
IPSC Bangalore: 11,12 Sahakara Nagar,  
Bellary Road, Bengaluru - 560092

Contact Us : +91-7028207222

bengaluru@ipscindia.com



**Patient Name** : Mr. PAWAN MISHRA  
**Age / Gender** : 31Y / Male  
**Mobile No.** : 8802605730  
**Sample Type** : EDTA whole blood

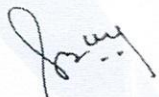
**Reg No.** : 2069/UHID22DL  
**Date** : 06-Jul-2022  
**Refd. By** : Dr. INSURANCE  
**Manual NO. :**  
**Sample ID** : 2270

**Lab ID. :** 2361/OPDPB22DL



**Collected** : 06-Jul-2022  
**Received** : 06-Jul-2022  
**Report** : 06-Jul-2022

TEST NAME	RESULT	UNIT	RANGE	METHOD
<u>HEAMOTOLOGY</u>				
COMPLETE BLOOD COUNT				
HEMOGLOBIN	14.2	g/dl	12.5-16.5	Colorimetric
TOTAL LEUCOCYTE COUNT	5.5	10 <sup>3</sup> /uL	4.0-11.0	Electrical impedance
DIFFERENTIAL LEUCOCYTE COUNT(DLC)				
Neutrophil	49	%	40-75	Electrical impedance
Lymphocyte	42	%	20-45	Electrical impedance
Eosinophil	05	%	01-06	Microscopy
Monocyte	04	%	2-10	Microscopy
Basophil	00	%	0-2	Microscopy
ESR	10	mm/1sthr	0-20	Westergren's
RBC COUNT	4.76	mili/cmm	3.8-5.5	Electrical impedance
PCV	47	%	35-45	Calculated
MCV	99.10	fL	80-100	Calculated
MCH	29.8	Picogram	27.5-33.2	Calculated
MCHC	30.10	gm/dl	32-36	Calculated
PLATELET COUNT	155	10 <sup>3</sup> /uL	150-450	Electrical impedance
-----End of Report-----				



**Dr. Sangeeta B**  
 DCP, DNB, PATHOLOGY,  
 DMC/25252  
**Lab Technician** : chand



Delhi Centre:  
 IPSC Delhi : Plot No 453, Sector 19  
 Dwarka, New Delhi - 110075

Contact Us : +91-7028195111

info@ipscindia.com



BOOK DIAGNOSTICS

Bengaluru Centre:  
 IPSC Bangalore: 11,12 Sahakara Nagar,  
 Bellary Road, Bengaluru - 560092

Contact Us : +91-7028207222

bengaluru@ipscindia.com





**Patient Name** : Mr. PAWAN MISHRA  
**Age / Gender** : 31Y / Male  
**Mobile No.** : 8802605730  
**Sample Type** : EDTA whole blood  
**Reg No.** : 2069/UHID22DL  
**Date** : 06-Jul-2022  
**Refd. By** : Dr. INSURANCE  
**manual no. :**  
**Sample ID** : 2270

**Collected** : 06-Jul-2022  
**Received** : 06-Jul-2022  
**Report** : 06-Jul-2022

TEST NAME	RESULT	UNIT	RANGE	METHOD
		<u>HEAMOTOLOGY</u>		
HBA1C (GLYCOSYLATED HB)	5.4	%	4-6	PEIT
Metabolically healthy patients 4.5 - 6.0 % 6.1 - 6.5 %				Good control :
Fair control : 6.6 - 7.0 %				
Poor control : Above - >7.0 %				

**COMMENTS:** HbA1c is an indicator of glycemic control. HbA1c represents average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but within this 120 days. Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four. Estimated Average Glucose mg/dl = (HbA1c x 35.6) - 77.3 Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only this means that to predict or estimate average glucose from Hb-A1c or vice-versa is not "perfect" but gives a good working ballpark estimate. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime glucose levels, which are easier to predict and control. As per IFCC recommendations 2007, HbA1c being reported as above maintaining traceability to both IFCC (mmol/mol) & NGSP (%) units.

-----End of Report-----



**Dr. Sangeeta B**  
 DCP, DNB, PATHOLOGY,  
 DMC/25252

**Lab Technician** : chand



Delhi Centre:  
 IPSC Delhi : Plot No 453, Sector 19  
 Dwarka, New Delhi - 110075

Contact Us : +91-7028195111

info@ipscindia.com



BOOK DIAGNOSTICS

Bengaluru Centre:  
 IPSC Bangalore: 11,12 Sahakara Nagar,  
 Bellary Road, Bengaluru - 560092

Contact Us : +91-7028207222

bengaluru@ipscindia.com



**Patient Name** : Mr. PAWAN MISHRA  
**Age / Gender** : 31Y / Male  
**Mobile No.** : 8802605730  
**Sample Type** : Serum

**Reg No.** : 2069/UHID22DL  
**Date** : 06-Jul-2022  
**Refd. By** : Dr. INSURANCE  
**Manual NO. :**  
**Sample ID** : 2270

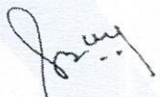
**Lab ID.** : 2361/OPDPB22DL



**Collected** : 06-Jul-2022  
**Received** : 06-Jul-2022  
**Report** : 06-Jul-2022

TEST NAME	RESULT	UNIT	RANGE	METHOD
<b>BIOCHEMISTRY</b>				
<b>KIDNEY FUNCTION TEST</b>				
Blood Urea	26.0	mg/dl	15.0-45.0	urease
Serum Creatinine	0.9	mg/dl	0.7-1.3	Jaffes Kinetic
Serum Uric Acid	4.60	mg/dl	2.5-7.2	Uricase
Total Protein	6.42	g/dl	6.4-8.3	Biuret
ALBUMIN	4.0	g/dl	3.4-4.8	Bcg
GLOBULIN	2.42	g/dl	2.3-3.5	
A/G RATIO	1.65	g/dl		
Calcium	9.7	mg/dl	8.6-10.2	Arsenazo
Sodium	143.7	mmol/L	136.0-149.0	ISE Indirect
Potassium	3.8	mmol/L	3.5-5.5	ISE Indirect
Chloride	103.6	mmol/L	98.0-109.0	ISE Indirect

-----End of Report-----



**Dr. Sangeeta B**  
 DCP, DNB, PATHOLOGY,  
 DMC/25252

**Lab Technician** : chand



Delhi Centre:  
 IPSC Delhi : Plot No 453, Sector 19  
 Dwarka, New Delhi - 110075

Contact Us : +91-7028195111

info@ipscindia.com




BOOK DIAGNOSTICS

Bengaluru Centre:  
 IPSC Bangalore: 11, 12 Sahakara Nagar,  
 Bellary Road, Bengaluru - 560092

Contact Us : +91-7028207222

bengaluru@ipscindia.com



<b>Patient Name</b> : Mr. PAWAN MISHRA	<b>Reg No.</b> : 2069/UHID22DL	<b>Lab ID.</b> : 2361/OPDPB22DL
<b>Age / Gender</b> : 31Y / Male	<b>Date</b> : 06-Jul-2022	
<b>Mobile No.</b> : 8802605730	<b>Refd. By</b> : Dr. INSURANCE	<b>Collected</b> : 06-Jul-2022
	<b>Manual No.</b> :	<b>Received</b> : 06-Jul-2022
<b>Sample Type</b> : Serum	<b>Sample ID</b> : 2270	<b>Report</b> : 06-Jul-2022

TEST NAME	RESULT	UNIT	RANGE	METHOD
<u>BIOCHEMISTRY</u>				
LIPID PROFILE				
Total Cholesterol	168.00	mg/dl	123-199	CHOD-PAP
Triglycerides	95.8	mg/dl	40-160	Gpo
HDL Cholesterol Direct	55.9	mg/dl	35.3-79.5	Direct
Vldl	19	mg/dl	4.7-22.1	
LDL Cholesterol Direct	92.9	mg/dl	63-129	
Total Cholesterol/HDL Ratio	3.0		0.0-4.97	
LDL/HDL Ratio	1.7		0.0-3.55	

**INTERPRETATION:-**

Acceptable/Low Risk	: < 200 mg/dL	: <130 mg/dL	: < 4.5
Borderline High Risk	: 200-239 mg/dL	: 130-159 mg/dl	: 4.5 - 6.0
High Risk	: > 240 mg /dL	: > 160 mg/dL	: > 6.0

APO A1 & APO B: Recent studies have shown that Apolipoproteins A1 & B might be the best indicators of Coronary Artery.

**COMMENTS:-**

TRIGLYCERIDE level > 250mg/dL is associated with an approximately 2-fold greater risk of coronary vascular disease. Elevation of triglycerides can be seen with obesity, medication, fast less than 12 hrs., alcohol intake, diabetes melitus, and pancreatitis. CHOLESTEROL, its fractions and triglycerides are the important plasma lipids in defining cardiovascular risk factors and in the



**Dr. Sangeeta B**  
 DCP, DNB, PATHOLOGY,  
 DMC/25252  
 Lab Technician : chand



**Delhi Centre:**  
 IPSC Delhi : Plot No 453, Sector 19  
 Dwarka, New Delhi - 110075  
 Contact Us : +91-7028195111  
 info@ipscindia.com



BOOK DIAGNOSTICS

**Bengaluru Centre:**  
 IPSC Bangalore: 11,12 Sahakara Nagar,  
 Bellary Road, Bengaluru - 560092  
 Contact Us : +91-7028207222  
 bengaluru@ipscindia.com



**Patient Name** : Mr. PAWAN MISHRA  
**Age / Gender** : 31Y / Male  
**Mobile No.** : 8802605730  
**Sample Type** : Serum

**Reg No.** : 2069/UHID22DL  
**Date** : 06-Jul-2022  
**Refd. By** : Dr. INSURANCE  
**Manual No.** :  
**Sample ID** : 2270

**Lab ID.** : 2361/OPDPB22DL  
  
**Collected** : 06-Jul-2022  
**Received** : 06-Jul-2022  
**Report** : 06-Jul-2022

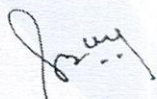
TEST NAME	RESULT	UNIT	RANGE	METHOD
-----------	--------	------	-------	--------

managment of cardiovascular disease. Highest acceptable and optimum values of cholesterol values of cholesterol vary with age. Values above 220 mgm/dl are associated with increased risk of CHD regardless of HDL & LDL values. HDL-CHOLESTEROL level <35 mg/dL is associated with an increased risk of coronary vascular disease even in the face of desirable levels of cholesterol and LDL - cholesterol.

LDL - CHOLESTEROL & TOTAL CHOLESTEROL levels can be strikingly altered by thyroid, renal and liver disease as well as hereditary factors. Based on total cholesterol, LDL- cholesterol, and total cholesterol/HDL - cholesterol ratio, patients may be divided into the three risk categories :-  
**CHOLESTEROL LDL-CHOLESTEROL CHO/HDL RATIO**

Artery Disease risk in an individual. Patients who have normal lipid profile may have abnormal Apo A1 & Apo B values. Ratio of Apo B : Apo A1 is >1 in cases of increased CHD risk.

-----End of Report-----



**Dr. Sangeeta B**  
 DCP, DNB, PATHOLOGY,  
 DMC/25252  
**Lab Technician** : chand



**Delhi Centre:**  
 IPSC Delhi : Plot No 453, Sector 19  
 Dwarka, New Delhi - 110075

Contact Us : +91-7028195111  
 info@ipscindia.com



BOOK DIAGNOSTICS

**Bengaluru Centre:**  
 IPSC Bangalore: 11,12 Sahakara Nagar,  
 Bellary Road, Bengaluru - 560092

Contact Us : +91-7028207222  
 bengaluru@ipscindia.com



**Patient Name** : Mr. PAWAN MISHRA  
**Age / Gender** : 31Y / Male  
**Mobile No.** : 8802605730  
**Sample Type** : Serum

**Reg No.** : 2069/UHID22DL  
**Date** : 06-Jul-2022  
**Refd. By** : Dr. INSURANCE  
**Manual NO.** :  
**Sample ID** : 2270

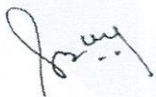
Lab ID. : 2361/OPDPB22DL



**Collected** : 06-Jul-2022  
**Received** : 06-Jul-2022  
**Report** : 06-Jul-2022

TEST NAME	RESULT	UNIT	RANGE	METHOD
<b>BIOCHEMISTRY</b>				
<b>LIVER FUNCTION TEST</b>				
Serum Bilirubin				
Total Bilirubin	0.54	mg/dl	0.0-2.0	Diazo
Direct Bilirubin	0.24	mg/dl	0-0.4	Diazo
Indirect Bilirubin	0.30	mg/dl	0-0.8	Calculated
Total Protein				
PROTEN	6.42	g/dl	6.4-8.3	Biuret
ALBUMIN	4.0	g/dl	3.4-4.8	Bcg
GLOBULIN	2.42	g/dl	2.3-3.5	
A/G RATIO	1.65	g/dl		
SGOT	30	U/L	0-35	IFCC
SGPT	31	U/L	0.0-45	IFCC
Gamma GT	45.1	U/L	0-55	Glupa-c
Alkaline Phosphatase	84	U/L	53-128	Amp

-----End of Report-----



**Dr. Sangeeta B**  
 DCP, DNB, PATHOLOGY,  
 DMC/25252  
 Lab Technician : chand



**Delhi Centre:**  
 IPSC Delhi : Plot No 453, Sector 19  
 Dwarka, New Delhi - 110075

Contact Us : +91-7028195111

info@ipscindia.com



BOOK DIAGNOSTICS

**Bengaluru Centre:**  
 IPSC Bangalore: 11,12 Sahakara Nagar,  
 Bellary Road, Bengaluru - 560092

Contact Us : +91-7028207222

bengaluru@ipscindia.com



**Patient Name** : Mr. PAWAN MISHRA  
**Age / Gender** : 31Y / Male  
**Mobile No.** : 8802605730  
**Sample Type** : Serum

**Reg No.** : 2069/UHID22DL  
**Date** : 06-Jul-2022  
**Refd. By** : Dr. INSURANCE  
**Manual No. :**  
**Sample ID** : 2270

**Lab ID.** : 2361/OPDPB22DL  
  
**Collected** : 06-Jul-2022  
**Received** : 06-Jul-2022  
**Report** : 06-Jul-2022

TEST NAME	RESULT	UNIT	RANGE	METHOD
<u>HORMONES</u>				
THYROID PROFILE				
T3	1.00	ng/dl		CLIA

**All values**

Adults (euthyroid) 0.80-2.0

Newborns 0.73-2.88

**Pregnancy**

First trimester 0.05 - 3.70

Second trimester 1.7 - 4.3

Third trimester 0.4 - 3.9

6d - 3 mth 0.80-2.75

4 - 12 mth 0.86-2.65

1 - 6 yr 0.92-2.48

7 - 11 yr 0.93-2.31

12- 20 yr 0.91-2.18

T4	9.00	ug/dl		CLIA
----	------	-------	--	------

1 <sup>st</sup> Trimester	7.3-15.00	ng/dl
2 <sup>st</sup> Trimester	8.92-17.38	
3 <sup>st</sup> Trimester	7.98-17.70	

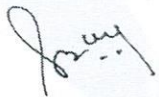
TSH	1.76	uIU/ml		CLIA
-----	------	--------	--	------

**Adults**

21-100 yrs 0.35 - 5.50

**Pediatric**

0-12 Months 0.98-5.63




**Dr. Sangeeta B**  
 DCP, DNB, PATHOLOGY,  
 DMC/25252

**Lab Technician** : chand



 **Delhi Centre:**  
 IPSC Delhi : Plot No 453, Sector 19  
 Dwarka, New Delhi - 110075


 **Contact Us** : +91-7028195111

 **info@ipscindia.com**



BOOK DIAGNOSTICS

 **Bengaluru Centre:**  
 IPSC Bangalore: 11,12 Sahakara Nagar,  
 Bellary Road, Bengaluru - 560092

 **Contact Us** : +91-7028207222

 **bengaluru@ipscindia.com**





**Patient Name** : Mr. PAWAN MISHRA  
**Age / Gender** : 31Y / Male  
**Mobile No.** : 8802605730  
**Sample Type** : Serum

**Reg No.** : 2069/UHID22DL  
**Date** : 06-Jul-2022  
**Refd. By** : Dr. INSURANCE  
**Manual no. :**  
**Sample ID** : 2270

**Collected** : 06-Jul-2022  
**Received** : 06-Jul-2022  
**Report** : 06-Jul-2022

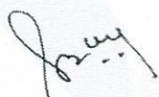
TEST NAME	RESULT	UNIT	RANGE	METHOD
1-5 years	0.64-5.76			
6-10 Years	0.51-4.82			
11-14 Years	0.53-5.27			
15-20 years	0.43-4.20			
<b>Pregnancy</b>				
First trimester	0.1 - 2.5*			
Second trimester	0.2 - 3*			
Third trimester	0.3 - 3*			

**COMMENTS:** Assay results should be interpreted in context to the clinical condition and associated results of other investigations. Previous treatment with corticosteroid therapy may result in lower TSH levels while thyroid hormone levels are normal. Results are invalidated if the client has undergone a radionuclide scan within 7-14 days before the test. Abnormal thyroid test findings often found in critically ill clients should be repeated after the critical nature of the condition is resolved. The production, circulation, and disintegration of thyroid hormones are altered throughout the stages of pregnancy

Adults 21-100 yrs 0.35 - 5.50  
 Pediatric 0-12 Months 0.98-5.63  
 1-5 years 0.64-5.76  
 6-10 Years 0.51-4.82  
 11-14 Years 0.53-5.27  
 15-20 years 0.43-4.20

**COMMENTS:** Assay results should be interpreted in context to the clinical condition and associated results of other investigations. Previous treatment with corticosteroid therapy may result in lower TSH levels while thyroid hormone levels are normal. Results are invalidated if the client has undergone a radionuclide scan within 7-14 days before the test. Abnormal thyroid test findings often found in critically ill clients should be repeated after the critical nature of the condition is resolved. The production, circulation, and disintegration of thyroid hormones are altered throughout the stages of pregnancy

-----End of Report-----



**Dr. Sangeeta B**  
 DCP, DNB, PATHOLOGY,  
 DMC/25252  
**Lab Technician** : chand



**Delhi Centre:**  
 IPSC Delhi : Plot No 453, Sector 19  
 Dwarka, New Delhi - 110075  
**Contact Us** : +91-7028195111  
 info@ipscindia.com



BOOK DIAGNOSTICS

**Bengaluru Centre:**  
 IPSC Bangalore: 11,12 Sahakara Nagar,  
 Bellary Road, Bengaluru - 560092  
**Contact Us** : +91-7028207222  
 bengaluru@ipscindia.com



**Patient Name** : Mr. PAWAN MISHRA  
**Age / Gender** : 31Y / Male  
**Mobile No.** : 8802605730

**Reg No.** : 2069/UHID22DL  
**Date** : 06-Jul-2022  
**Refd. By** : Dr. INSURANCE

**Lab ID.** : 23617OPDPB22DL



**Collected** : 06-Jul-2022  
**Received** : 06-Jul-2022  
**Report** : 06-Jul-2022

**Sample Type** : URINE

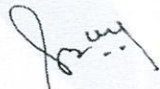
**Sample ID** : 2270

TEST NAME	RESULT	UNIT	RANGE	METHOD
-----------	--------	------	-------	--------

### CLINICAL PATHOLOGY

URINE ROUTINE MICROSCOPY PHYSICAL EXAMINATION QUANTITY	30.00	ml	10-30	Automated /Manual
COLOUR	PALE YELLOW			
TRANSPARENCY	CLEAR			
SPECIFIC GRAVITY	1.030		1.015-1.025	
PH	6.0		5.5 - 7	
CHEMICAL EXAMINATION ALBUMIN	NIL			Automated/Manual
SUGAR	NIL			
MICROSCOPIC EXAMINATION PUS CELLS	NIL	/hpf		Automated/Manual
RBC'S	NIL		NIL	
CASTS	NIL			
CRYSTALS	NIL			
EPITHELIAL CELLS	NIL			
BACTERIA	NIL			

-----End of Report-----



**Dr. Sangeeta B**  
 DCP, DNB, PATHOLOGY,  
 DMC/25252  
**Lab Technician** : chand



Delhi Centre:  
 IPSC Delhi : Plot No 453, Sector 19  
 Dwarka, New Delhi - 110075

Contact Us : +91-7028195111

info@ipscindia.com



BOOK DIAGNOSTICS

Bengaluru Centre:  
 IPSC Bangalore: 11,12 Sahakara Nagar,  
 Bellary Road, Bengaluru - 560092

Contact Us : +91-7028207222

bengaluru@ipscindia.com



# THE DIAGNOSTIC & IMAGING CENTRE

Plot No. 147, 2nd Floor, Main Road, Sec.7,  
Dwarka, New Delhi-110078 Ph. 011-49078567

**PAWAN KUMAR MISHRA**

ID : 1676  
DATE : 06-07-2022  
AGE/SEX : 31/M  
HT/WT : 0 / 0  
REF. BY :

**TREADMILL TEST REPORT**

PROTOCOL : Bruce  
HISTORY :  
INDICATION :  
MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	B.P. mmHg	RPP x100	ST LEVEL (MM)			METTS
								II	V1	V5	
SUPINE		0:22			62	120 / 80	74	1.1	0	1.1	
STANDING					91	120 / 80	109	1.8	0	1.5	
HYPERTENT					81	120 / 80	97	1.4	0.3	1.6	
Stage 1	2:55	2:55	2.7	10	97	130 / 80	126	1.7	0.1	2.1	4.67
Stage 2	5:55	2:55	4	12	106	140 / 80	148	2	-0.2	2.2	7.04
Stage 3	8:55	2:55	5.4	14	135	150 / 80	202	1.9	-0.3	2.2	9.92
Stage 4	11:3	2:3	6.7	16	160	160 / 80	256	2.3	-0.9	2.8	12.73
Stage 4	11:39	2:39	6.7	16	165	160 / 80	264	2.5	-0.7	2.9	13.53
Stage 4	11:55	2:55	6.7	16	163	160 / 80	260	2	-0.8	2.2	13.89
PK-EXERCISE	12:6	0:6	8	18	165	160 / 80	264	2.1	-0.3	2.3	14.20
RECOVERY	13:25	0:55			104	150 / 80	156	1.7	0.1	1.6	
RECOVERY	14:25	1:55			80	140 / 80	112	0.2	0.3	0.1	
RECOVERY	14:25	1:55			80	140 / 80	112	0.2	0.3	0.1	
RECOVERY	15:25	2:55			77	130 / 80	100	0.3	0.4	0.2	
RECOVERY	15:25	2:55			77	130 / 80	100	0.3	0.4	0.2	
RECOVERY	16:3	3:33			72	120 / 80	86	0.2	0.4	0.2	

**RESULTS**

EXERCISE DURATION : 12:6  
MAX HEART RATE : 165 bpm  
MAX BLOOD PRESSURE : 160 / 80 mm Hg  
REASON OF TERMINATION : Achieved THR,  
BP RESPONSE : Normal,  
ARRYTHMIA : None,  
H.R. RESPONSE : Normal Chronotropic Response,  
IMPRESSIONS :

MAX WORK LOAD : 14.20 METTS

Negative for Provocable myocardial ischemia,

Technician :

*Pawan*

DR. ...  
MBBS, MD, ...  
Cardiology  
DNO Regn. No. DNO/...



# THE DIAGNOSTIC & IMAGING CENTRE

**PAWAN KUMAR MISHRA**  
I.D. 1676

**RATE 62bpm**

**PRETEST SUPINE**

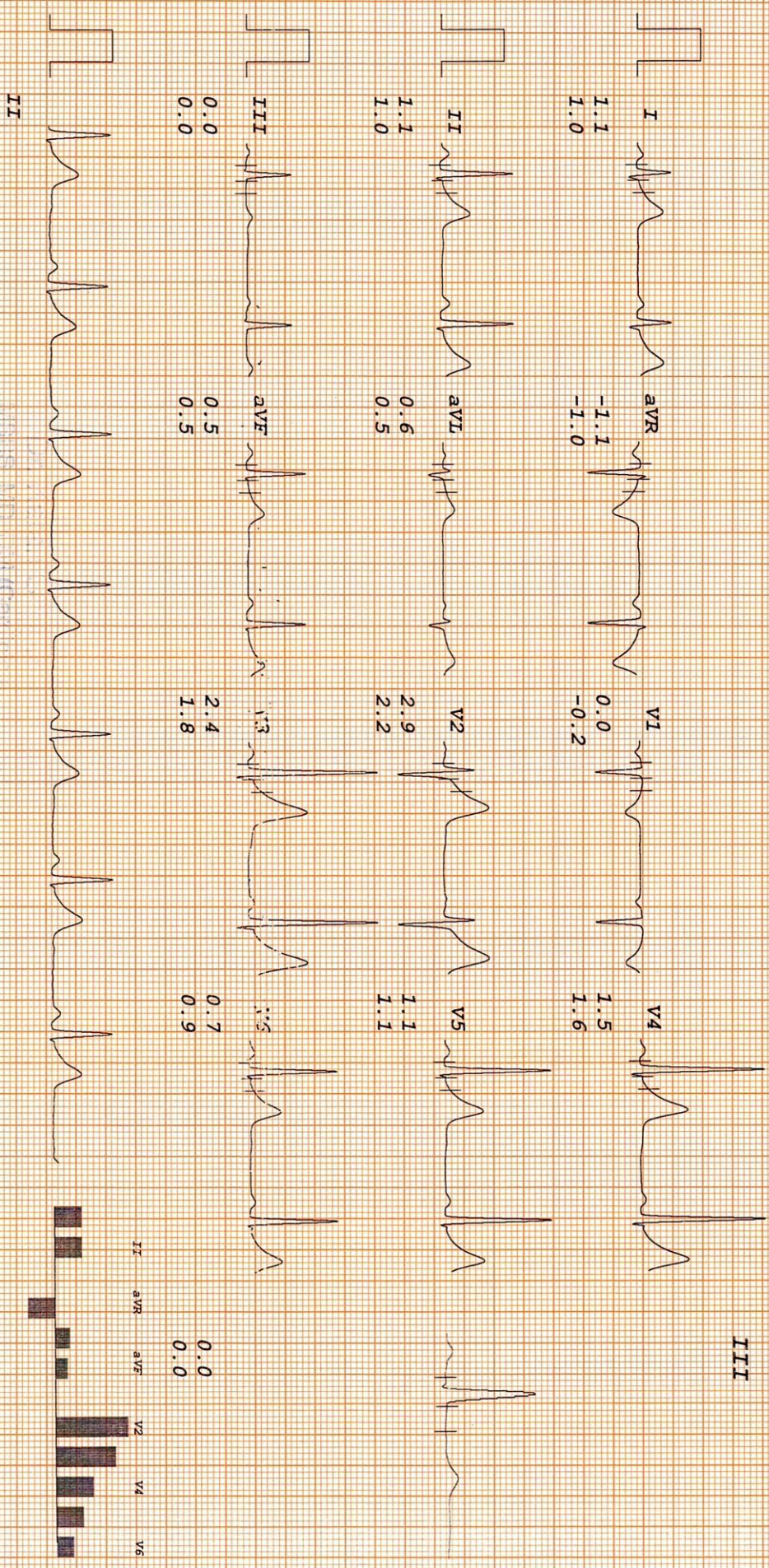
**ST @ 10mm/mV**  
80ms PostJ

**Age 31/M**  
**Date 06-07-2022**

**B.P. 120/80**

**LINKED MEDIAN**

Mag. X 2



Dr. P. K. Mishra  
Cardiologist  
DM (Gen. No. DMC/19/11)

P. K. Mishra



# THE DIAGNOSTIC & IMAGING CENTRE

PAWAN KUMAR MISHRA  
I.D. 1676

PRETEST  
STANDING

ST @ 10mm/mV  
80ms Post J

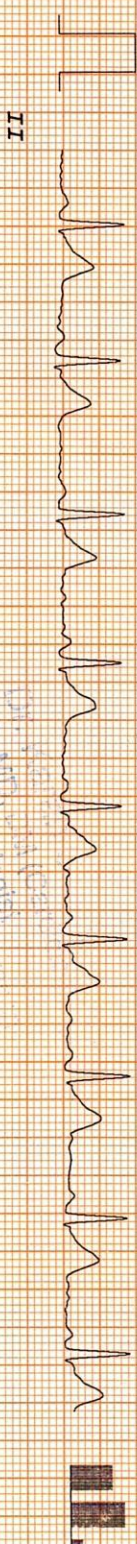
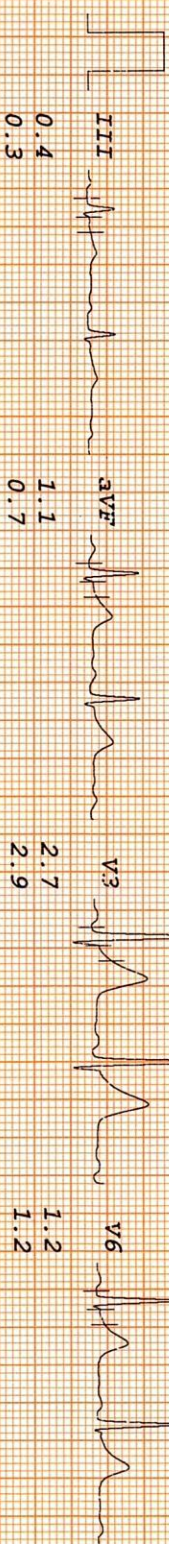
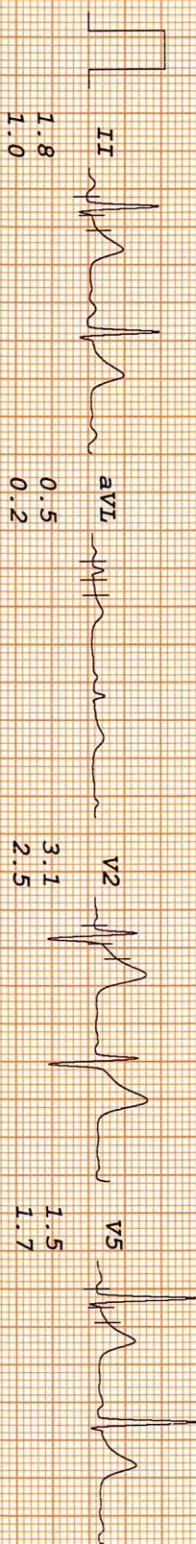
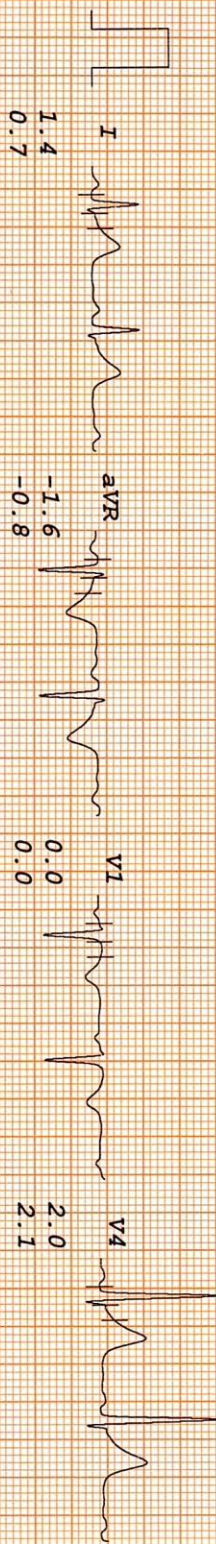
Age 31/M  
Date 06-07-2022

RATE 91bpm  
B.P. 120/80

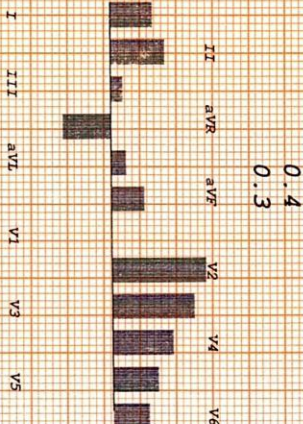
LINKED MEDIAN

Mag. X 2

III



Dr. P. K. Mishra  
Dr. S. K. Mishra  
Dr. R. K. Mishra  
Dr. A. K. Mishra  
Dr. M. K. Mishra  
Dr. N. K. Mishra  
Dr. O. K. Mishra  
Dr. P. K. Mishra  
Dr. Q. K. Mishra  
Dr. R. K. Mishra  
Dr. S. K. Mishra  
Dr. T. K. Mishra  
Dr. U. K. Mishra  
Dr. V. K. Mishra  
Dr. W. K. Mishra  
Dr. X. K. Mishra  
Dr. Y. K. Mishra  
Dr. Z. K. Mishra





# THE DIAGNOSTIC & IMAGING CENTRE

PAMAN KUMAR MISHRA

I.D. 1676

Age 31/M

Date 06-07-2022

RATE 81bpm

B.P. 120/80

PRETEST

HYPERVENT

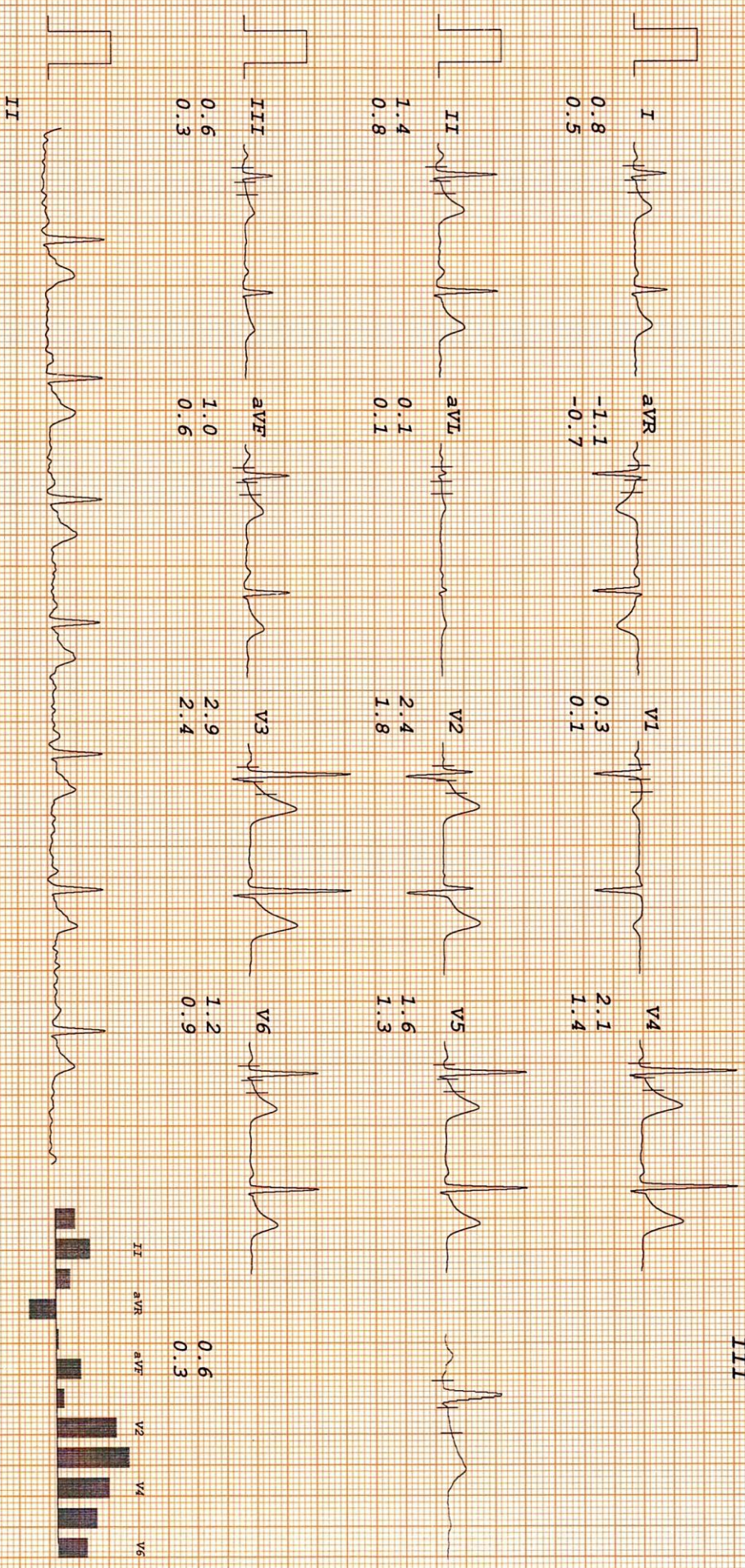
ST @ 10mm/mV

80ms PostJ

PHASE TIME 0:22

LINKED MEDIAN

Mag. X 2





# THE DIAGNOSTIC & IMAGING CENTRE

PAWAN KUMAR MISHRA

I.D. 1676  
 Age 31/M  
 Date 06-07-2022

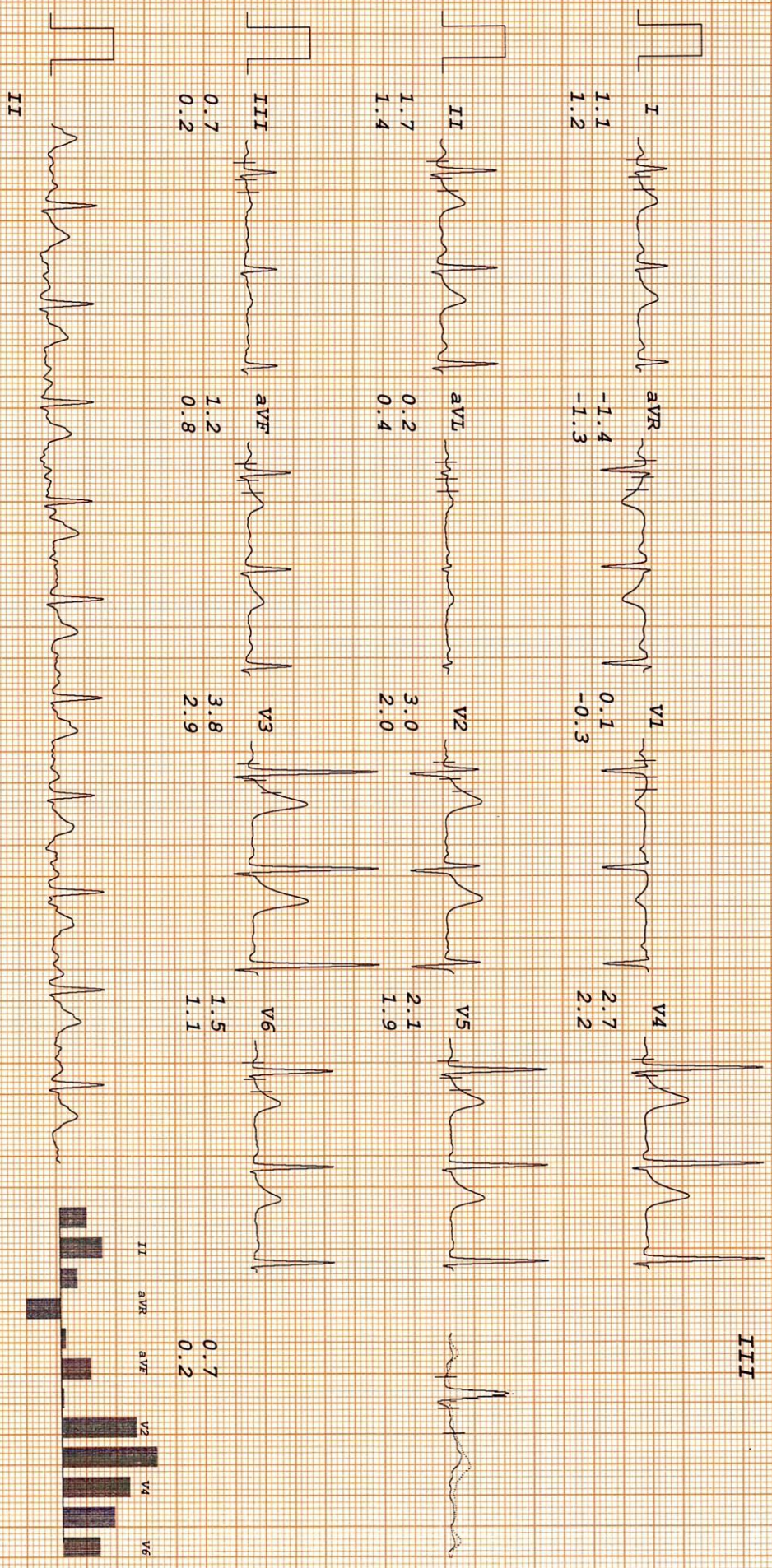
RATE 98bpm  
 B.P. 130/80

Bruce  
 Stage 1  
 TOTAL TIME 2:55  
 PHASE TIME 2:55

ST @ 10mm/mV  
 80ms PostJ  
 Speed 2.7 km/hr  
 SLOPE 10 &

LINKED MEDIAN

Mag. X 2





# THE DIAGNOSTIC & IMAGING CENTRE

PAWAN KUMAR MISHRA

I.D. 1676  
Age 31/M  
Date 06-07-2022

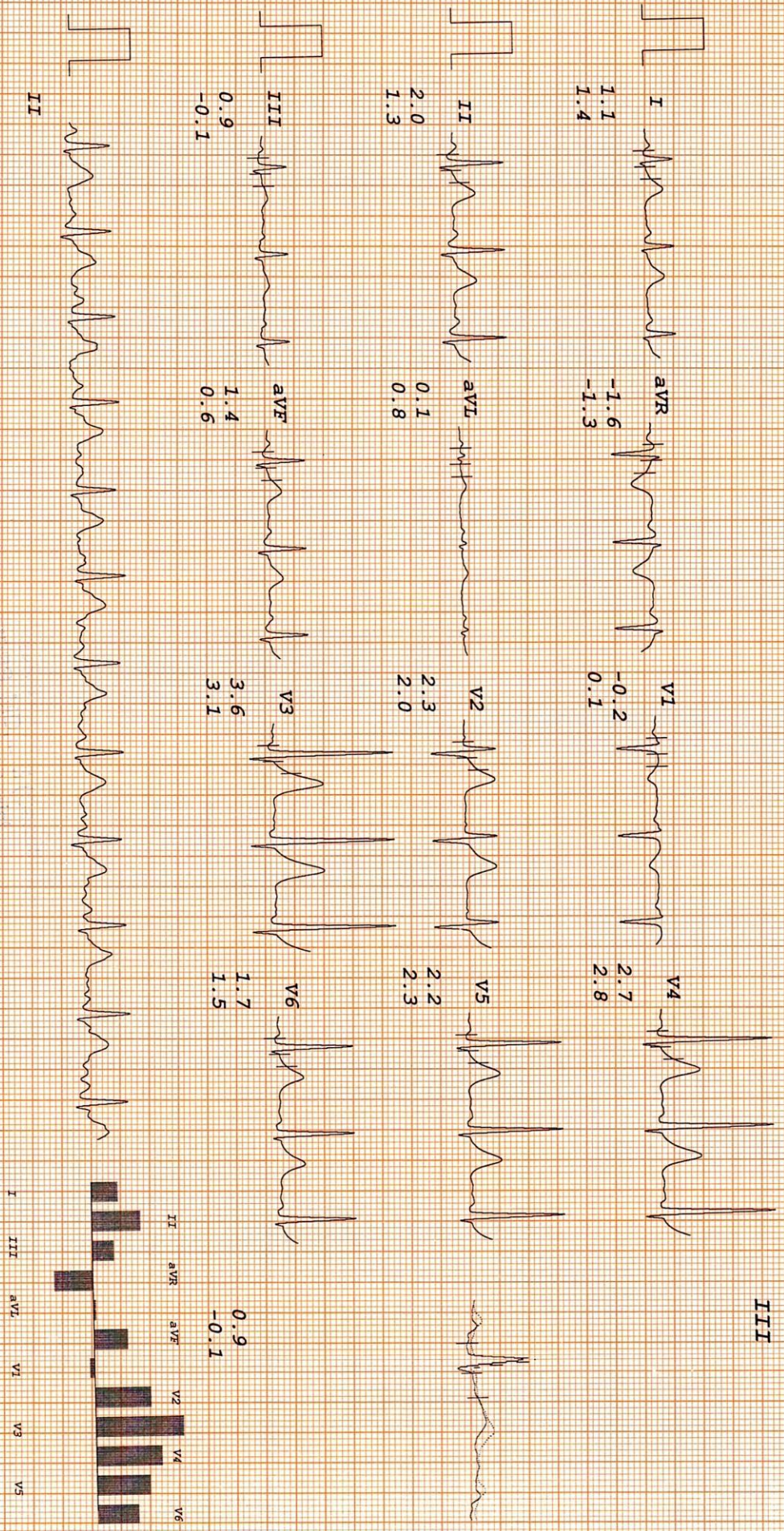
RATE 106bpm  
B.P. 140/80

Stage 2  
TOTAL TIME 5:55  
PHASE TIME 2:55

ST @ 10mm/mV  
80ms PostI  
Speed 4 km/hr  
SLOPE 12 %

LINKED MEDIAN

Mag. X 2



DR. P. K. MISHRA  
DINAKAR  
DINAKAR



# THE DIAGNOSTIC & IMAGING CENTRE

PAWAN KUMAR MISHRA

I.D. 1676

Age 31/M

Date 06-07-2022

RATE 135bpm

B.P. 150/80

Bruce  
Stage 3

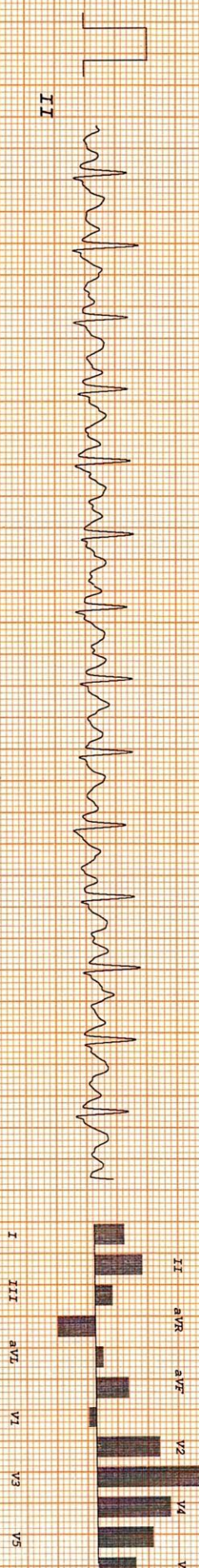
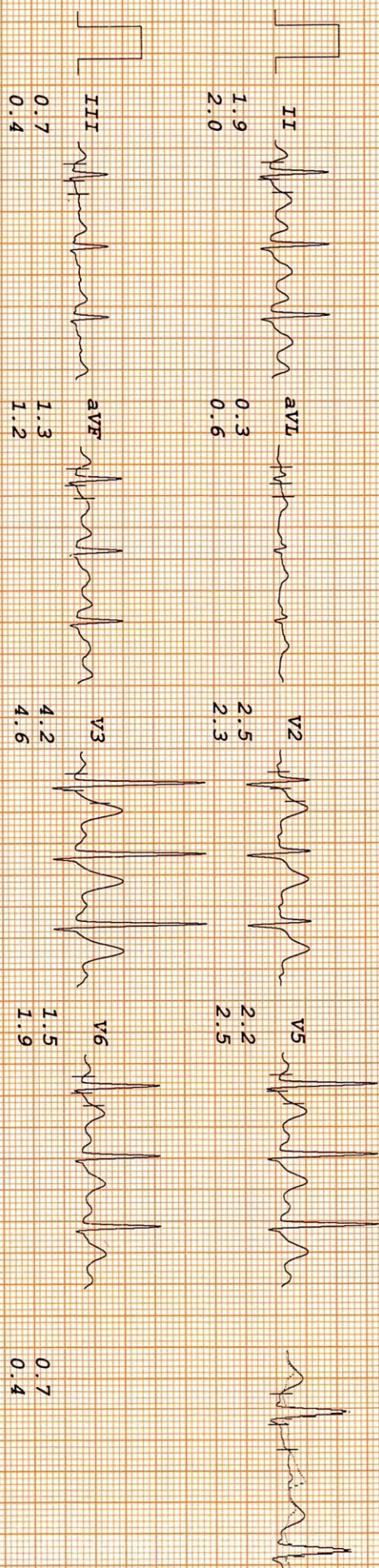
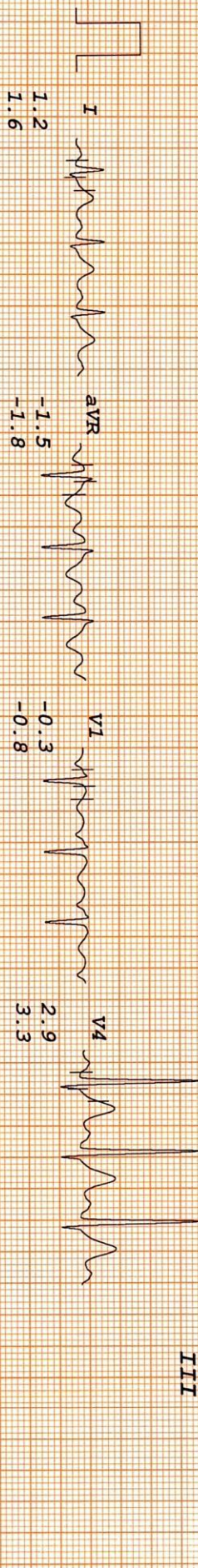
TOTAL TIME 8:55  
PHASE TIME 2:55

ST @ 10mm/mV  
80ms PostJ

Speed 5.4 km/hr  
SLOPE 14 %

LINKED MEDIAN

Mag. X 2





# THE DIAGNOSTIC & IMAGING CENTRE

PAWAN KUMAR MISHRA  
I.D. 1676

Age 31/M

Date 06-07-2022

RATE 160bpm  
B.P. 160/80

Bruce  
Stage 4

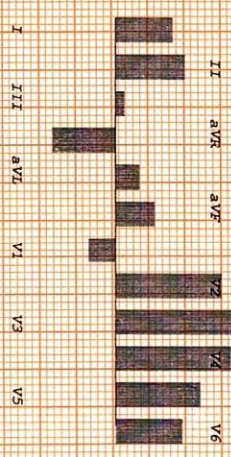
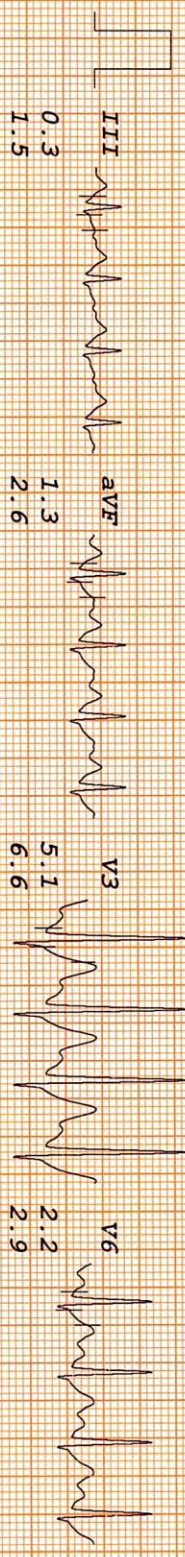
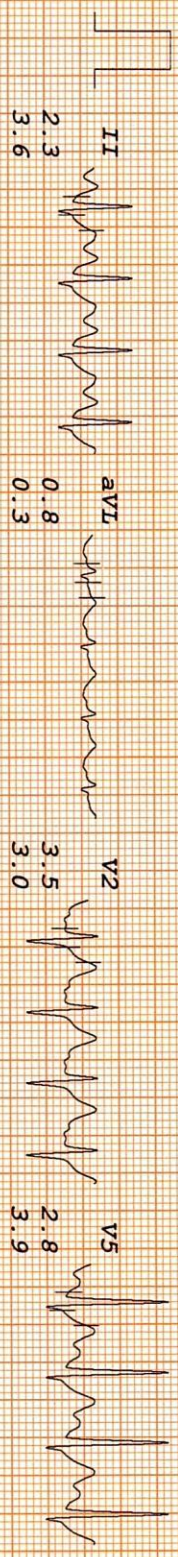
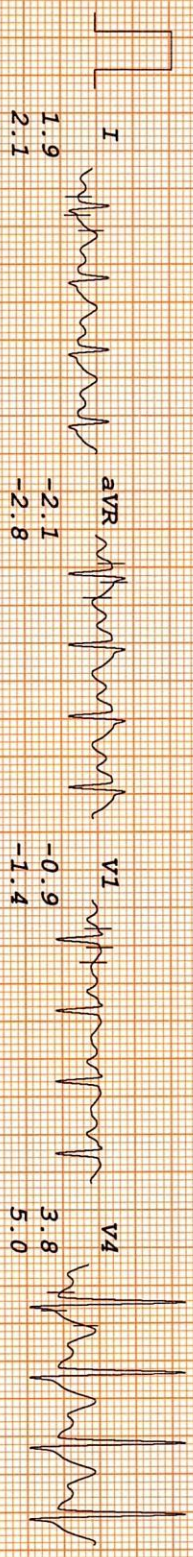
TOTAL TIME 11:03  
PHASE TIME 2:03

ST @ 10mm/mv  
80ms PostJ

Speed 6.7 km/hr  
SLOPE 16 %

LINKED MEDIAN

Mag. X 2





# THE DIAGNOSTIC & IMAGING CENTRE

PAWAN KUMAR MISHRA

I. D. 1676

Age 31/M  
Date 06-07-2022

RATE 165bpm

B.P. 160/80

Bruce  
Stage 4

TOTAL TIME 11:39  
PHASE TIME 2:39

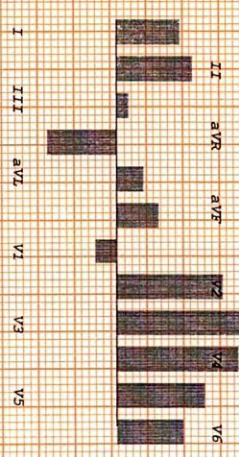
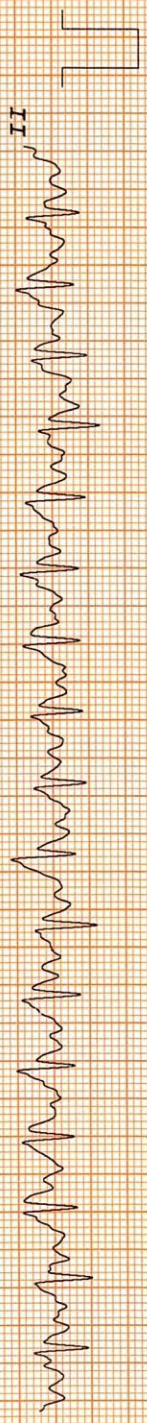
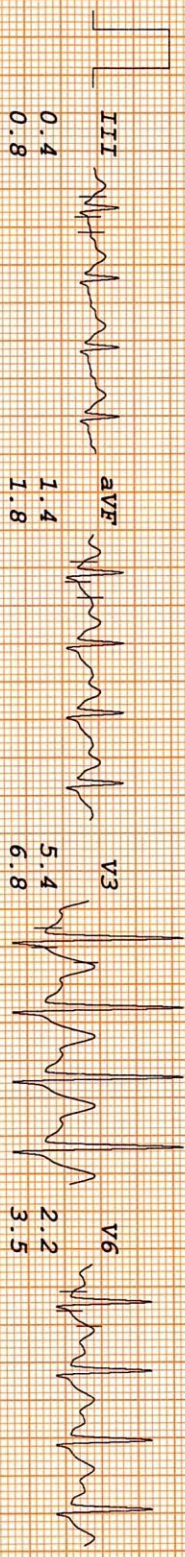
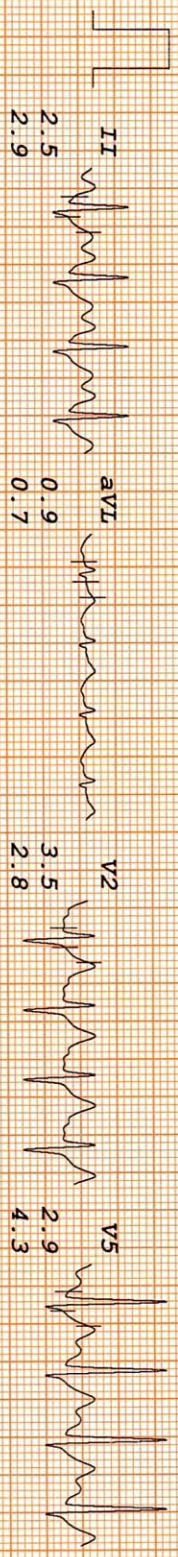
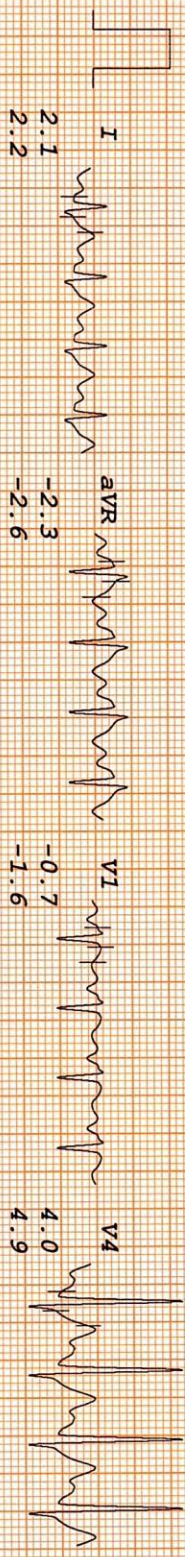
ST @ 10mm/mV  
80ms PostJ

Speed 6.7 km/hr  
SLOPE 16 %

LINKED MEDIAN

Mag. X 2

III





# THE DIAGNOSTIC & IMAGING CENTRE

PAWAN KUMAR MISHRA  
I.D. 1676

RATE 163bpm

B.P. 160/80

Age 31/M  
Date 06-07-2022

Bruce  
Stage 4

TOTAL TIME 11:55  
PHASE TIME 2:55

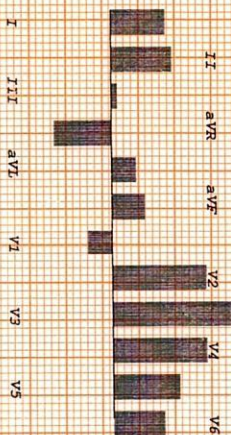
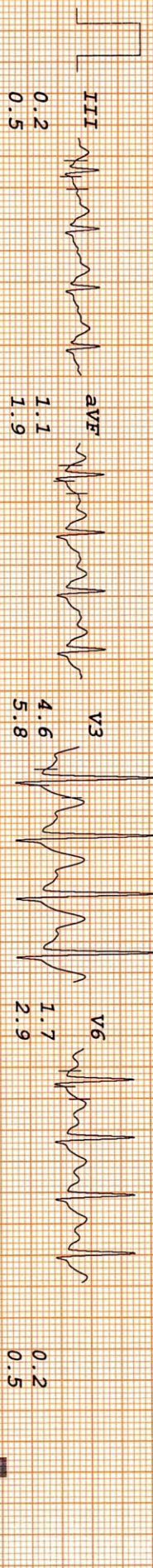
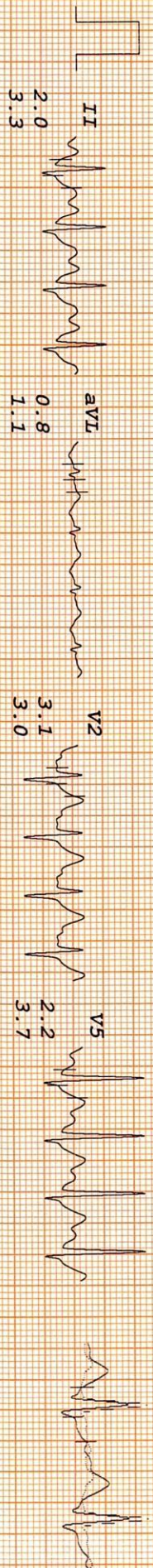
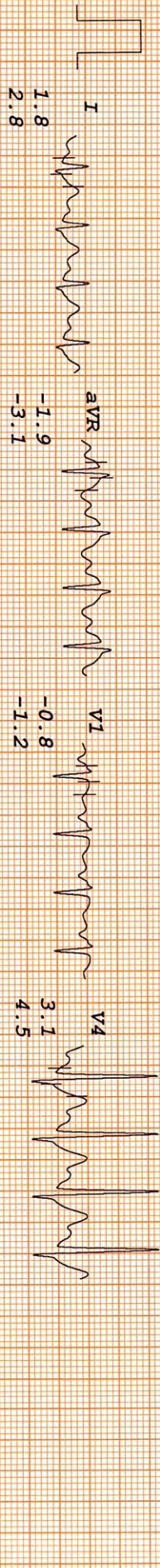
ST @ 10mm/mV  
80ms PostJ

Speed 6.7 km/hr  
SLOPE 16 %

LINKED MEDIAN

Mag. X 2

III





# THE DIAGNOSTIC & IMAGING CENTRE

PAWAN KUMAR MISHRA

I.D. 1676

Age 31/M

Date 06-07-2022

RATE 165bpm

B.P. 160/80

Bruce

PK-EXERCISE

TOTAL TIME 12:06

PHASE TIME 0:06

ST @ 10mm/mV

80ms PostJ

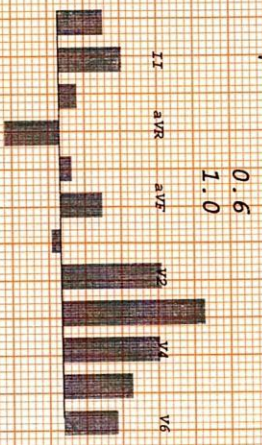
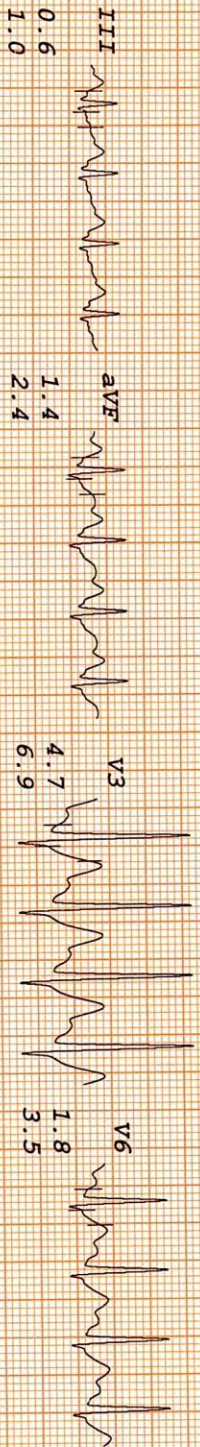
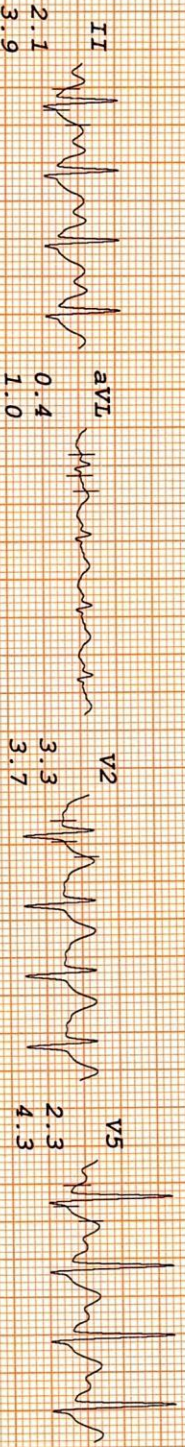
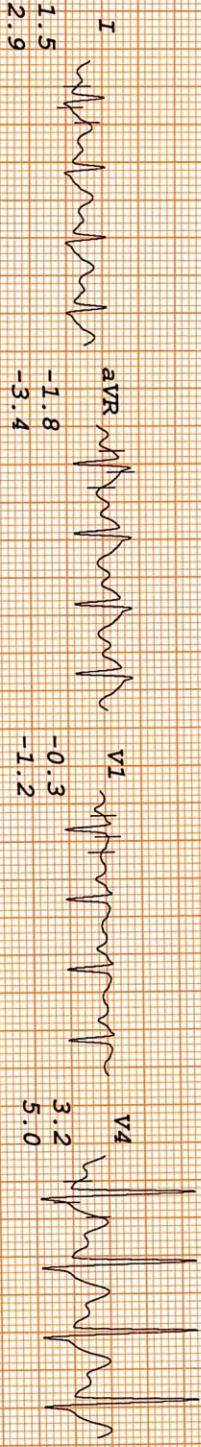
Speed 8 km/hr

SLOPE 18 %

LINKED MEDIAN

Mag. X 2

III





# THE DIAGNOSTIC & IMAGING CENTRE

ST @ 10mm/mV  
80ms PostJ

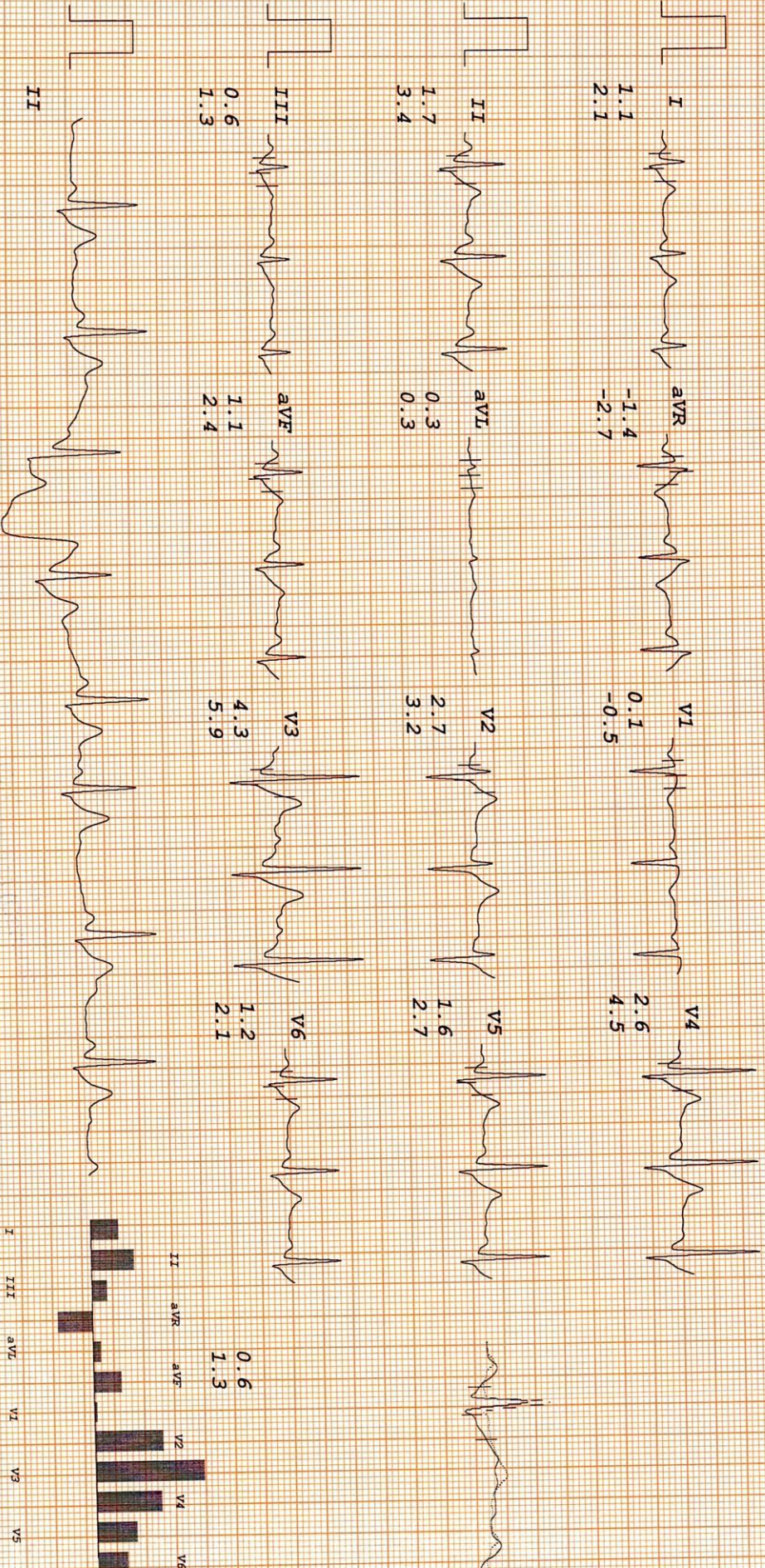
**PAWAN KUMAR MISHRA**  
I.D. 1676  
Age 31/M  
Date 06-07-2022

RATE 104bpm  
B.P. 150/80

Bruce  
RECOVERY  
TOTAL TIME 13:25  
PHASE TIME 0:55

LINKED MEDIAN

Mag. X 2





# THE DIAGNOSTIC & IMAGING CENTRE

PAWAN KUMAR MISHRA  
I.D. 1676

Age 31/M  
Date 06-07-2022

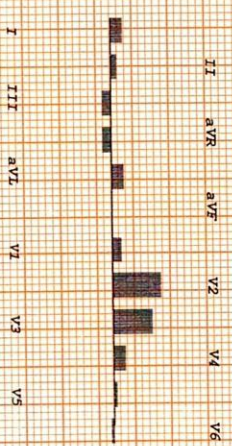
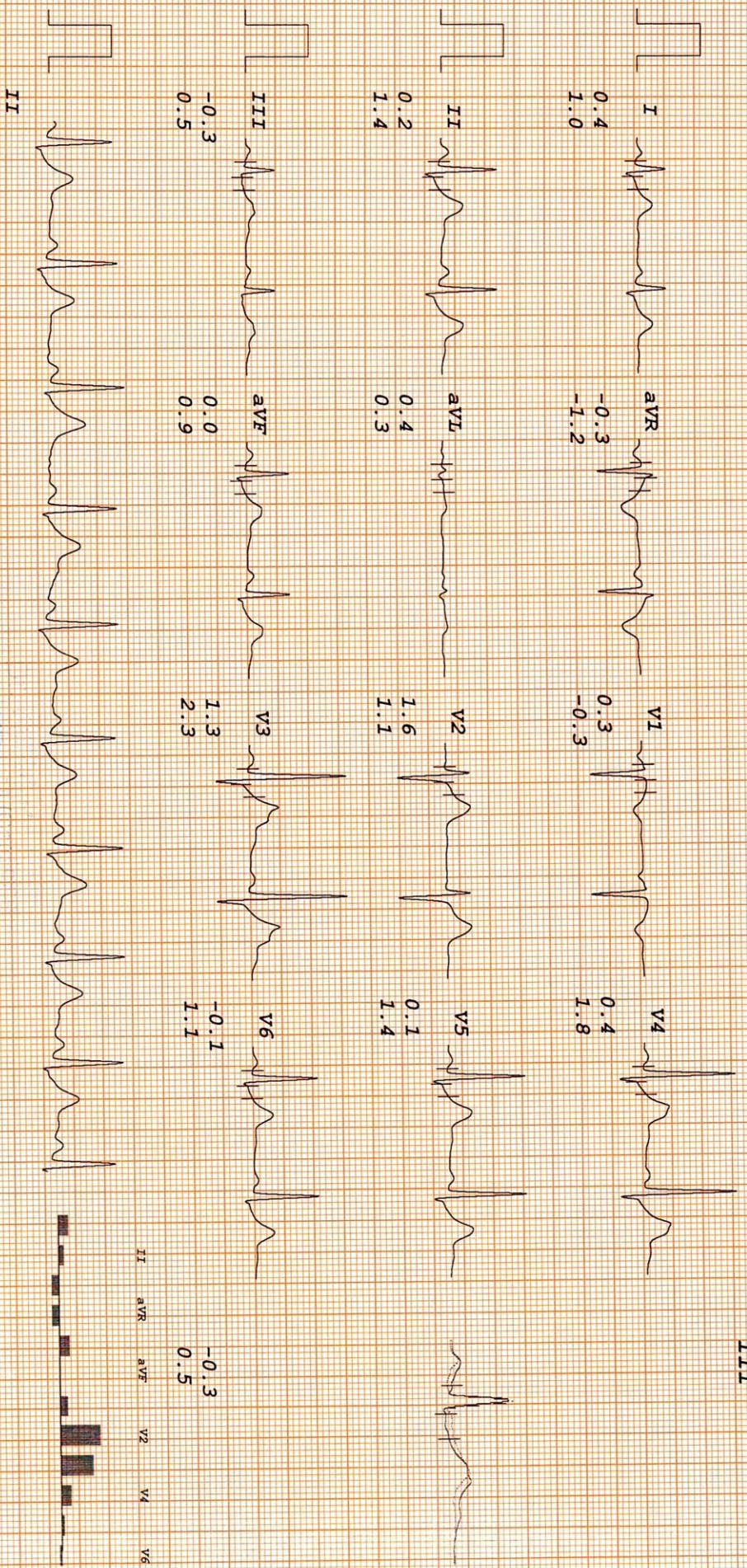
RATE 80bpm  
B.P. 140/80

Brice  
RECOVERY  
TOTAL TIME 14:25  
PHASE TIME 1:55

ST @ 10mm/mV  
80ms PostJ

LINKED MEDIAN

Mag. X 2





# THE DIAGNOSTIC & IMAGING CENTRE

PAWAN KUMAR MISHRA  
I.D. 1676

Age 31/M  
Date 06-07-2022

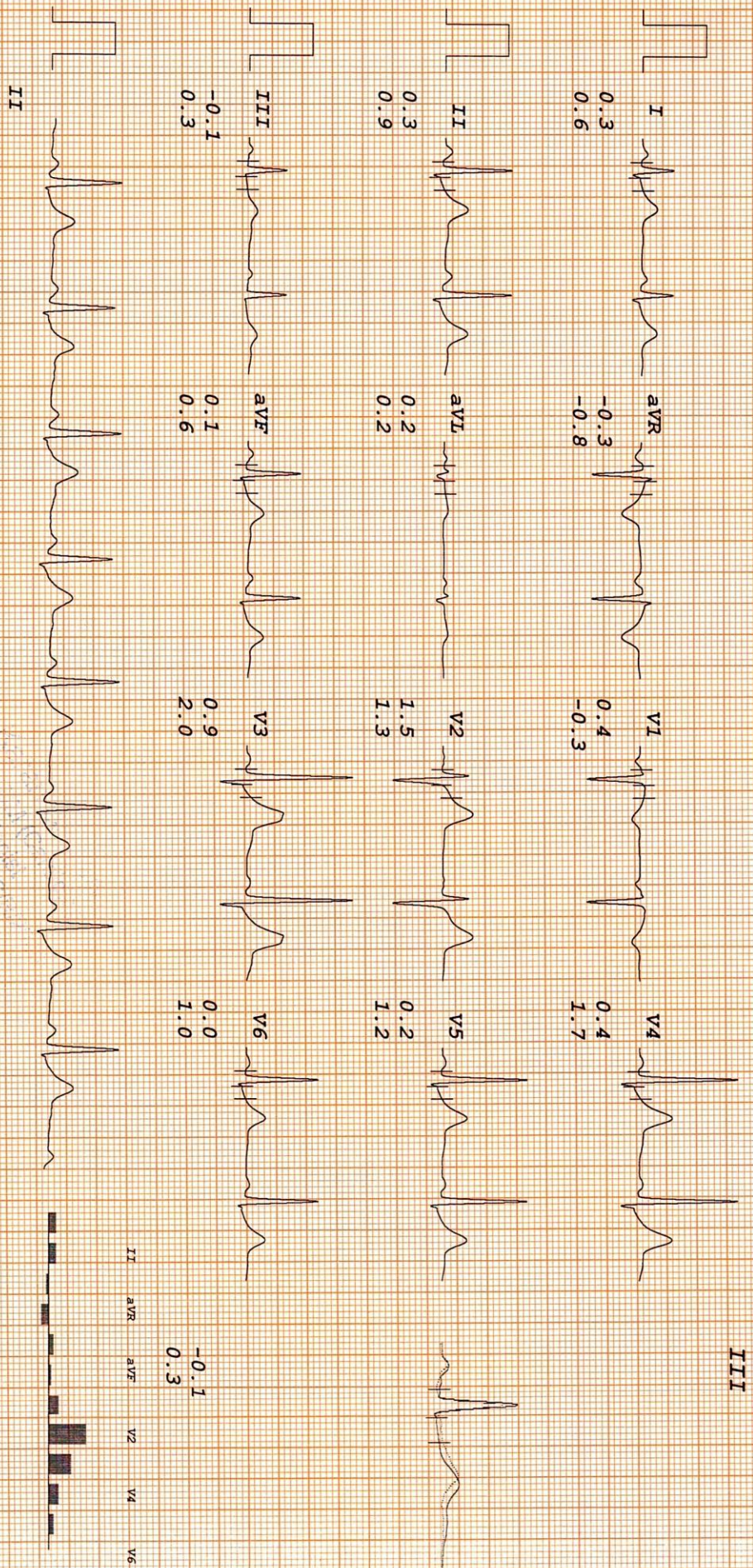
RATE 77bpm  
B.P. 130/80

Brice  
RECOVERY  
TOTAL TIME 15:25  
PHASE TIME 2:55

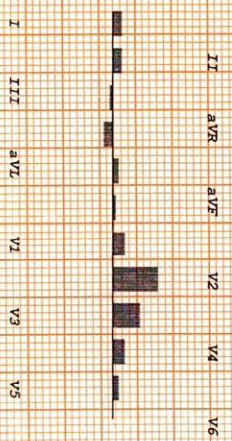
ST @ 10mm/mV  
80ms PostJ

LINKED MEDIAN

Mag. X 2



DR. C. S. SINGH  
DIRECTOR  
DR. P. K. SINGH  
HEAD OF DEPARTMENT









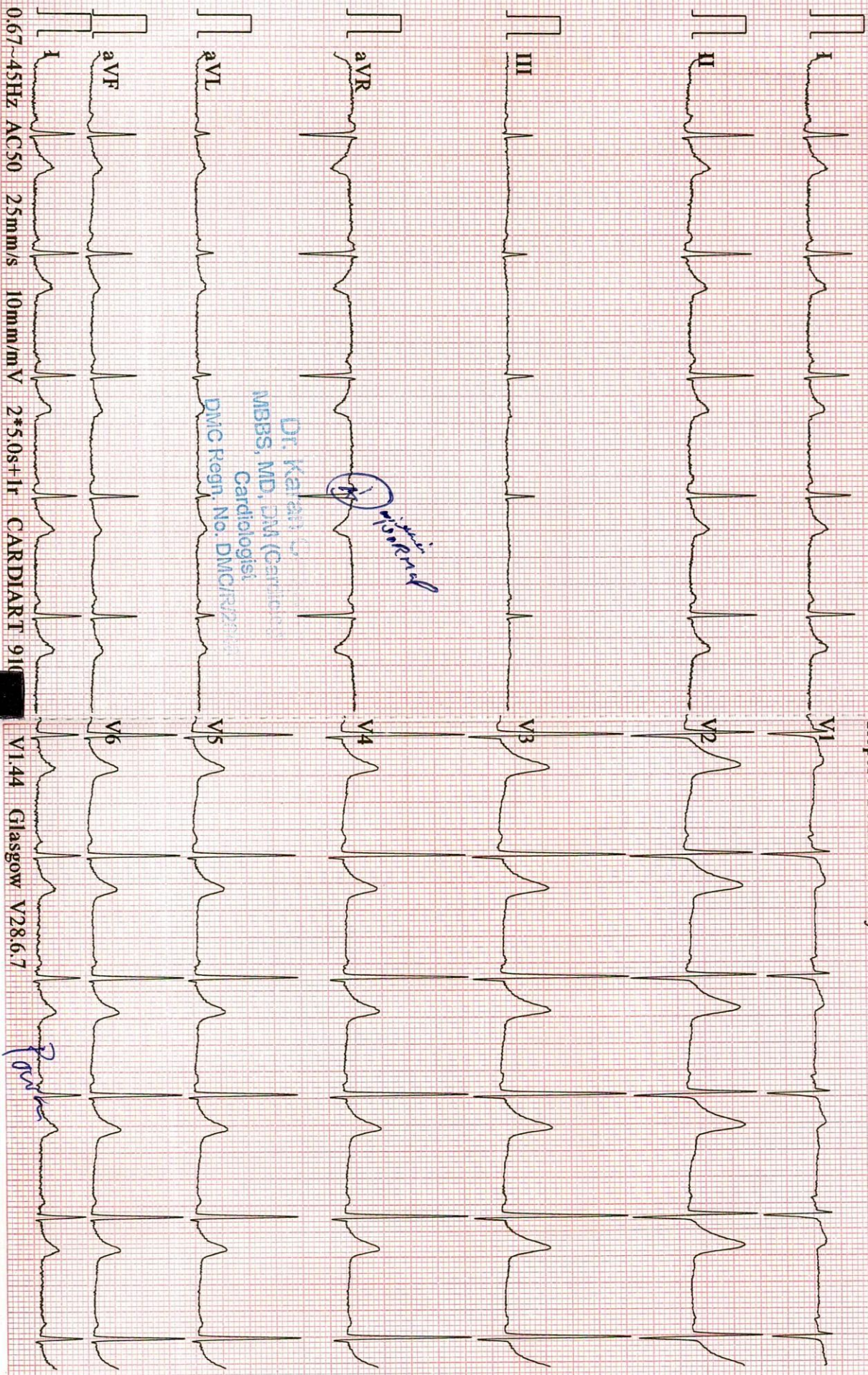
ID: 3  
pawan kumar mishra  
Male 31 Years  
Req. No. :

BPL - 02 06-07-2022 09:17:25 AM

HR : 65 bpm  
P : 96 ms  
PR : 136 ms  
QRS : 72 ms  
QT/QTcBz : 386/402 ms  
P/QRS/T : 42/50/33 °  
RV5/SV1 : 1.878/0.906 mV

Diagnosis Information:  
Sinus rhythm  
Normal ECG

Report Confirmed by:



0.67-45Hz AC50 25mm/s 10mm/mV 2\*5.0s+1r CARDIART 910

V1.44 Glasgow V28.6.7

CARDIART

Dr. Karan  
MBBS, MD, DM (Cardiology)  
Cardiologist  
DMC Regn. No. DMC/R/2018

*Dr. Karan*

*Dr. Karan*



<b>Radiology No.</b>	: 2309/OPDPB22DL	<b>Date</b>	: 06-Jul-2022
<b>Patient Name</b>	: <b>Mr. PAWAN MISHRA</b>	<b>Age/Sex</b>	: 31Y
<b>Guardian Name</b>	:	<b>UHID No.</b>	: 2069/UHID22DL
<b>Consultant</b>	: Dr. INSURANCE	<b>Mobile No.</b>	: <b>8802605730</b>

## ULTRASOUND OF WHOLE ABDOMAN

### Indication- FOLLWING CASE OF WILSON.

**The liver** is normal in size (11cm in RML) and **grossly coarsened in echotexture with ill defined tiny hypoechoic area within**. Intrahepatic bile ducts and CBD are not dilated. **Hepatic portal veins measures 10mm** and the IVC appear normal in caliber.

**Gall bladder** is adequately distended with normal intraluminal fluid contents. No evidence of calculus / wall thickness noted.

Pancreas is normal in size and contour with normal echotexture.

**Right kidney** is normal in size and position .It shows normal movements with respiration. Cortical thickness is normal.No calculus, mass or hydronephyrotic changes seen.

**Right kidney measures- 9.76x5.36 cm.**

Renal artery pulsation appear normal.

Left kidney is normal in size and position .It shows normal movements with respiration. Cortical thickness is normal . No calculus, mass or hydronephyrotic changes seen.

**Left kidney measures- 10.81x5.15cm.**

Renal artery pulsation appear normal.



Dr. Harshita Surange  
MBBS, DMRD (RADIO DIAGNOSIS)  
DIPLOMA IN MSK, UCAM (Spain)  
Reg. No. MCI/16522, DMC/18402



BOOK APPOINTMENT





<b>Radiology No.</b>	: 2309/OPDPB22DL	<b>Date</b>	: 06-Jul-2022
<b>Patient Name</b>	: <b>Mr. PAWAN MISHRA</b>	<b>Age/Sex</b>	: 31Y
<b>Guardian Name</b>	:	<b>UHID No.</b>	: 2069/UHID22DL
<b>Consultant</b>	: Dr. INSURANCE	<b>Mobile No.</b>	: <b>8802605730</b>

**Spleen is increased in size measuring 12cm in spam.** Echotexture is normal. No focal lesion is seen.

No evidence of retro-peritoneal lymphadenopathy/ ascites/ pleural effusion noted.

Urinary bladder does not show any calculus or mass lesion. No significant wall thickening noted.

**Prostate** is of normal size for age with regular contours and normal echo-texture. It measures 2.63x2.95x2.74 mm which is equal to 11.14 gms.

**Impression : Heteroechoic coarsened liver consistent with WILSON disease.**



Dr. Harshita Surange  
MBBS, DMRD (RADIO DIAGNOSIS)  
DIPLOMA IN MSK, UCAM (Spain)  
Reg. No. MCI/16522, DMC/18402



BOOK APPOINTMENT





