

TEST REQUISITION FORM

Name : Mr.ROHIT YADAV
 Age/Sex : 32 YRS / Male
 Referred By : Dr. MEDIWHEEL
 Reg. No : 80858

Lab No : **012107030010**
 Mobile : 9953410478
 Receipt No. :
 BarcodeNo : **10099743**

H - 176
 W - 81

SrNoTest	Department	Sample Type	Due Date
1	HEALTH CHECKUP 2 MALE (CBC, THYROID PROFILE(T3,T4,TSH), PSA TOTAL, TMT (STRESS TEST), ECG, XRAY CHEST PA VIEW, USG WHOLE ABDOMEN, URINE ROUTINE, HBA1C (GLYCOSYLATED HB), URIC ACID, BUN (BLOOD UREA NITROGEN), CREATININE, LFT(LIVER FUNCTION TEST), LIPID PROFILE, STOOL ROUTINE, BSPP (BLOOD SUGAR PP), BSF (BLOOD SUGAR FASTING), BLOOD GROUP RH TYPE, PHYSICIAN CONSULTATION)	OPD PACKAGE	

BP-120/74

Sample Collection Time:

Sample Receiving Time:

Remarks/Clinical Information:

Created By : ANJANA Printed By : ANJANA

Print DateTime: 03/07/2021 9:44 AM



LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. YADAV ROHIT
EC NO.	96504
DESIGNATION	OFFICER ON SPECIAL DUTY
PLACE OF WORK	NEW DELHI, GOVERNMENT RELATIONS
BIRTHDATE	05-08-1989
PROPOSED DATE OF HEALTH CHECKUP	03-07-2021
BOOKING REFERENCE NO.	21S96504100000916E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **28-06-2021** till **31-03-2022** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager
HRM Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))

Transport Department Government of NCT of Delhi
Licence to Drive Vehicles Throughout India

Licence No. : DL11.20090021649 (P) D
Name : ROHIT YADAV
S/W/D : SHRI GAJENDER SINGH

DOB : 05/08/1989 BG : U
Address :
A-11-F, VIJETA VIHAR, SEC-13,
ROHINI ROHINI, NORTH WEST DELHI
110085



Auth to Drive
LMV
MCWG

Date of Issue
15/01/2009
15/01/2009

Issue Date : 12/09/2019
Validity(NT) : 14/01/2029
Validity(T) : NA
Adpt.veh.No. : NA

(Holder Signature)

Issuing Authority
NWZ-II, ROHINI

Balan

[Signature]
DR. NITIN AGARWAL
MBBS, MR
Regn. No. DMC-R-149

ONEPLUS ULTRASOUND LAB
47, Harsh Vihar, Pitam Pura
Delhi-110034
Ph 011-42480104, 8209913051
F-mail oneplusul@gmail.com



Rohit

[Signature]

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MBBS, MCh

Reg. No. DMC-R-142

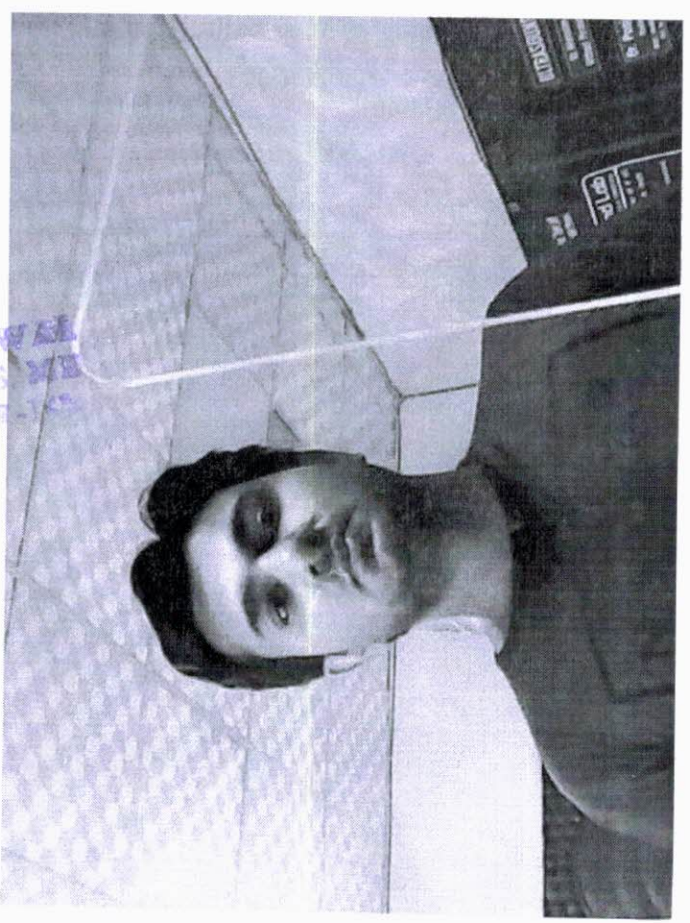
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Agarwal

[Handwritten signature]

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ONEPLUS ULTRASOUND LAB

47, HARSH VIHAR, PITAMPURA, DELHI- 110034

Mr. ROHIT YADAV
 Age : 32M
 Ref. by : MEDWHEEL

ID : 1657
 H/Wt : 176/81
 Recorded : 3-7-2021 9:45

BP : 65
 P Axis : 120/74
 QRS Axis : 55 deg
 T Axis : 39 deg

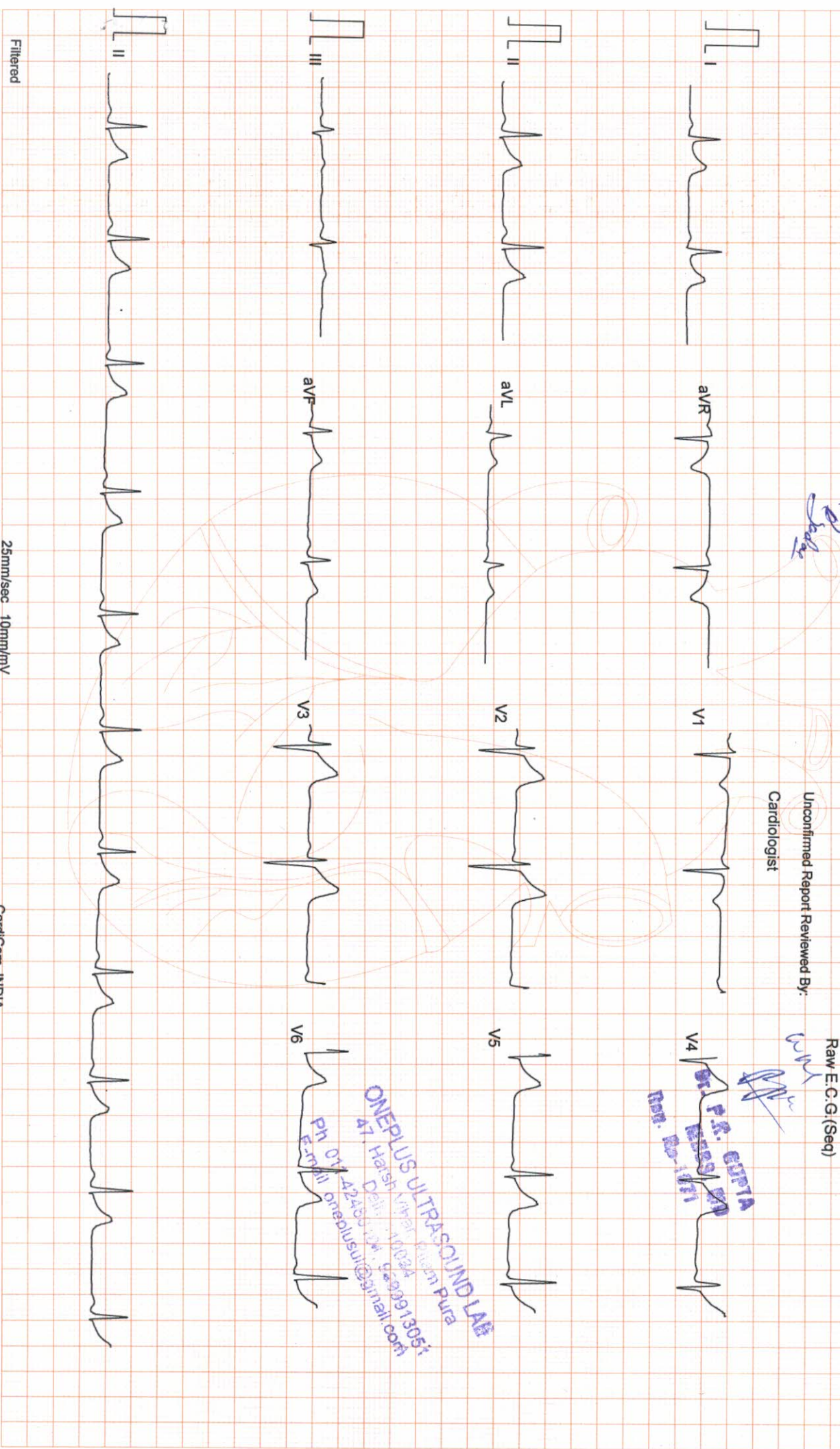
P duration : 93 msec
 PR duration : 130 msec
 QRS duration : 103 msec
 QT interval : 328 msec
 QTc interval : 334 msec

Signature

Unconfirmed Report Reviewed By:
 Cardiologist

Signature

Dr. P. R. GORTA
 Reg. No. 111



Filtered

25mm/sec 10mm/mV

ARROW

CardiCom, INDIA

ONEPLUS ULTRASOUND LAB
 47, Harsh Vihar, Pitampura
 Delhi - 110034
 Ph: 011-42485124, 9999913051
 E-mail: onepplusul@gmail.com



OnePLUS Ultrasound Lab

QUALITY FIRST... ALWAYS!

Dr. Nitin Agarwal
Pathologist & Director
Ex. Sr. Res. MAMC
& Lok Nayak Hospital
Ex. Chief of Lab Dr. Lal Path Labs.

Dr. Pooja (Garg) Agarwal
Radiologist & Director
MAMC & Lok Nayak Hospital



NAME	:Mr. ROHIT YADAV	Barcode No	:10099743
AGE/GENDER	:32 YRS/Male	SPECIMEN DATE	:03/Jul/2021 09:44AM
PATIENT ID	:80858	SPECIMEN RECEIVED	:03/Jul/2021 10:43AM
REFERRED BY	:Dr. MEDIWHEEL	REPORT DATE	:03/Jul/2021 12:55PM
CENTRE NAME	:ONEPLUS ULTRASOUND LAB	LAB NO.	:012107030010

Test Name	Result	Unit	Ref. Range
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HAEMATOLOGY

Health checkup 2 Male

Glycosylated Hemoglobin (HbA1c)	5.2	%	Non Diabetic adults <5.7 Prediabetic (at risk) 5.7-6.4 Diabetes >6.4
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Estimated average blood glucose (eag)	103
--	-----

Reference range (mg/dl):

90 - 120:Excellent control, 121 - 150:Good Control, 151 - 180:Average Control, 181 - 210:Action Suggested

>211:Panic value

REMARKS:-

In vitro quantitative determination of **HbA1C** in whole blood is utilized in long term monitoring of glycemia. The **HbA1C** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycemia monitoring than do determinations of blood glucose or urinary glucose. It is recommended that the determination of **HbA1C** be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy. On testing of HbA1C by HPLC method the result shows high variant window (93.8%) & no value of HbA1C. Therefore for accurate assay of glycaemic Control Fructosamine assay & for variant analysis Hb electrophoresis should be done.

Assay done by : Bio-Rad : D-10 (HPLC)

BLOOD GROUP (ABO)	O
Rh typing	POSITIVE

NOTE :

- * Apart from major A,B,H antigens which are used for ABO grouping and Rh typing, many minor blood group antigens exist. Agglutination may also vary according to titre of antigen and antibody.
- * So before transfusion, reconfirmation of blood group as well as cross-matching is needed.
- * Presence of maternal antibodies in newborns, may interfere with blood grouping.
- * Auto agglutination (due to cold antibody, falciparum malaria, sepsis, internal malignancy etc.) may also cause erroneous result.

CBC

Haemoglobin	12.7	g/dl	13.0-17.0
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Checked By.

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 UMC/R/01436
 MBBS,MD(PATHOLOGIST)

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CENTRE NAME	:ONEPLUS ULTRASOUND LAB	LAB NO.	:012107030010

Test Name	Result	Unit	Ref. Range
Total Leucocyte Count	5050	/cumm	4000-10000
<u>Differential leucocyte count</u>			
Neutrophils	48.5	%	40-80
Lymphocyte	41.30	%	20-40
Monocytes	7.20	%	2-10
Eosinophils	2.5	%	1-6
Basophils	0.5	%	0-2
RBC Count	4.28	million/cumm	4.5 - 5.5
PCV(Hematocrit)	39.7	%	40-50
MCV	92.8	fL	83-101
MCH	29.8	Pg	27-32
MCHC	32.1	G/dL	32-35
Platelet count	182000	/cumm	150000-450000
RDW-CV	13.4	%	11.4-14.0
ESR(WESTEGRENS METHOD)	16	mm in 1st hr	0-20
<u>BIOCHEMISTRY</u>			
<u>Blood sugar fasting</u>	92	mg/dL	70-110
<u>Bun (blood urea nitrogen)</u>	12.60	mg/dl	8.9-21.6
<u>Uric acid, serum</u>	4.3	mg/dl	3.4-7.0
<u>Creatinine, serum</u>	0.86	mg/dl	0.60-1.1
<u>LFT(LIVER FUNCTION TEST)</u>			
Bilirubin Total	0.62	mg/dl	0.1-1.2
Bilirubin Conjugated	0.24	mg/dl	0-0.4
Bilirubin Unconjugated	0.38	mg/dl	up to 0.7
SGOT (AST)	42	U/L	0-35
SGPT (ALT)	71	U/L	<45.0
Alkaline phosphatase	116	U/L	80-306
Gamma glutamyl transpeptidase	28	U/L	11-61

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CENTRE NAME	:ONEPLUS ULTRASOUND LAB	LAB NO.	:012107030010

Test Name	Result	Unit	Ref. Range
Total Protein	6.9	gm/dl	6.40 - 8.20
Albumin	3.9	g/dL	3.5-5.5
Globulin	3.00	gm/dl	1.8-3.4
Albumin/Globulin Ratio	1.30		1.10 - 2.50
LIPID PROFILE			
Cholesterol	161	mg/dl	50-240
Triglycerides	106	mg/dL	25-150
HDL Cholesterol	45	mg/dL	30-70
LDL cholesterol	95	mg/dL	<130
VLDL cholesterol	21.2	mg/dL	5-40
Cholesterol/HDL Ratio	3.6		Low Risk 3.3-4.97 Average Risk 4.4-7.1 Moderate Risk 7.1-11.0 High Risk >11.0
LDL/HDL Ratio	2.1		0 - 3.55

According to ATP III and NCEP guidelines

Parameter	Normal	Desirable	Borderline	High
Total cholesterol	<200	200-239		240
Triglycerides	<150	150-199	200-499	500
LDL	Optimal <100 Near Optimal 100-129	130-159	160-180	190
HDL	<40 : LOW 60 : HIGH			

BUN/Creatinine ratio

Bun (blood urea nitrogen)	12.60	mg/dl	8.9-21.6
CREATININE	0.86	mg/dl	0.30-1.10
BUN/Creatinine ratio	14.65		10.0 - 20.0

ENDOCRINOLOGY

Checked By.

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Page 3 of 6

Clinical correlation is essential for final diagnosis. • If test results are unsatisfactory please contact personally or on phone. • This report is for perusal of doctors only.
• All disputes Subject to Delhi Jurisdiction only. • Not for medicolegal purposes. • All congenital anomalies in a foetus may not be diagnosed in routine obstetric ultrasound.



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Test Name	Result	Unit	Ref. Range
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PSA TOTAL

Prostatic specific antigen, Total 0.62 ng/ml <4.0

< 40 years	0.21 to 1.72 ng/ml
40 - 49	0.27 to 2.19 ng/ml
50 - 59	0.27 to 3.42 ng/ml
60 - 69	0.22 to 6.16 ng/ml
> 69	0.21 to 6.77 ng/ml

Notes:

PSA is principally produced by the glandular epithelium of the prostate, and is secreted in the seminal fluid. PSA is also present in urine and blood. PSA acts on seminal fluid to fluidify and increase sperm mobility. PSA levels rise in prostatic pathologies such as benign prostatic hyperplasia (BPH) or prostate cancer.

THYROID PROFILE(T3,T4,TSH)

Triiodothyronine total [t3]	0.75	ng/dl	0.52-1.9
Thyroxine total [t4]	6.50	µg/dl	4.4 - 10.8
TSH (Thyroid Stimulating Hormone)	2.70	µIU/ml	0.25-5.0

AGE WISE VARIATION IN TSH

AGE	TSH(µIU/ml)	AGE	TSH(µIU/ml)
1-4 weeks	1.00 - 19.0	16-20 yrs	0.25 - 5.0
1-12 mths	1.70 - 9.1	21 - 80 yrs	0.25 - 5.0
1-5 yrs	0.80 - 8.2	I st trimester	0.25 - 5.0
6-10 yrs	0.25 - 5.0	II nd trimester	0.50 - 5.0
11-15 yrs	0.25 - 5.0	II rd trimester	0.4 - 6.0

Reference ranges - Interpretation of Diagnostic tests - (Jacques Wallach)

1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.
3. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.

Checked By.

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M.B.B.S., MD (Path)
DMC/R/01436 DR. NITIN AGARWAL
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CENTRE NAME	:ONEPLUS ULTRASOUND LAB	LAB NO.	:012107030010

Test Name	Result	Unit	Ref. Range
4. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis			

CLINICAL PATHOLOGY

URINE ROUTINE

Physical examination

Quantity	20		ML
Colour	PALE YELLOW		
Transparency	CLEAR		CLEAR
Sp.gravity	1.015		1.010-1.030
pH	6.00		
Reaction	ACIDIC		ACIDIC

Chemical examination

Urine protein	NIL		NIL
Urine sugar	NIL		NIL
Bilirubin, urine	NEGATIVE		NEGATIVE
Urobilinogen	NORMAL		NORMAL
Ketones	NEGATIVE		NEGATIVE

Microscopic examination

Pus cells.	2-3	/HPF	0-2
Epithelial cells	1-2	/HPF	NIL
R.B.C.	NIL	/HPF	NIL
Casts	NIL	/HPF	NIL
Crystals	NIL	/HPF	NIL
Bacteria	NIL	/HPF	NIL
Others.	NIL	NIL	NIL

Checked By.

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DMC/R/01436
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Page 5 of 6

Name	: Mr. ROHIT YADAV	Age/Sex	: 32 YRS/Male
Ref. By	: Dr. MEDIWHEEL	Lab No	: 012107030010
Date	: 03-Jul-2021	Patient ID	: LSHHI80858

X-ray-Chest PA view

Bony cage and soft tissues are normal.

Cardiothoracic ratio is normal.

Mediastinum is normal.

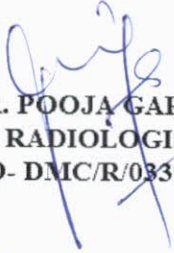
Both hila are normal.

Both costophrenic angles are clear.

Both domes of diaphragm are normal.

Lung fields are clear. No parenchymal lesion seen.

IMPRESSION: Normal Study.


DR. POOJA GARG
RADIOLOGIST
REG NO- DMC/R/03398

Dr. POOJA GARG
M.B.B.S., D.M.R.D
Reg No. DMC/R/03398
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Type By : anjana

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AP CHEST PA M 1205-7-3 35 YRS 32 ECA VADAY TION MB
APUAMPAIT, HAPZH VINA, PITA MPOKA GAB, 47-HAPZH VINA, PITA MPOKA



WEL AP

B

R

PA VIEW

MR ROHIT YADAV AGE 32 YRS 3-7-2021 M CHEST PA
OnePLUS ULTRASOUND LAB,47-HARSH VIHAR,PITAMPURA

Name	: Mr. ROHIT YADAV	Age/Sex	: 32 YRS/Male
Ref. By	: Dr. MEDIWHEEL	Lab No	: 012107030010
Date	: 03-Jul-2021	Patient ID	: LSHHI80858

ULTRASOUND EXAMINATION----WHOLE ABDOMEN

Liver is normal in size (14.1 cm) and normal in outline with **altered echopattern. Diffuse increase in echogenicity of liver parenchyma is noted, suggestive of fatty infiltration (grade I).** Intrahepatic biliary radicles are not dilated. No abscess or mass lesion seen. Hepatic veins, portal vein, IVC and aorta are normal. CBD is normal in caliber.

Gall bladder is well distended with anechoic lumen. Wall thickness is normal.

Both kidneys are normal in size, shape, position, outline and echopattern. Corticomedullary differentiation is maintained. No pelvicalyceal dilation or mass lesion is seen.

Spleen is normal in size and echotexture. No mass lesion seen.

Pancreas is normal in size, outline and echotexture.

Urinary bladder is normal in shape and position. No evidence of intravesical stone or mass seen.

Prostate is normal in size, shape and echopattern.

Prostate measures 3.5 x 2.5 x 3.9 cm. **Weight of prostate is 17 grams.**

No abnormal bowel wall thickening seen in right iliac fossa.

No free fluid seen anywhere in abdomen.

IMPRESSION:

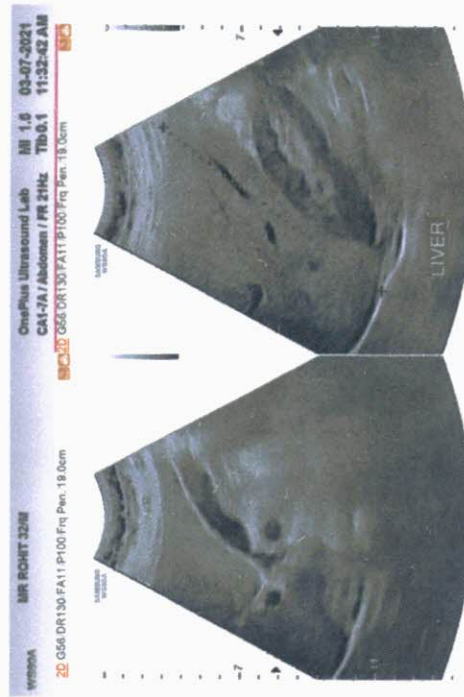
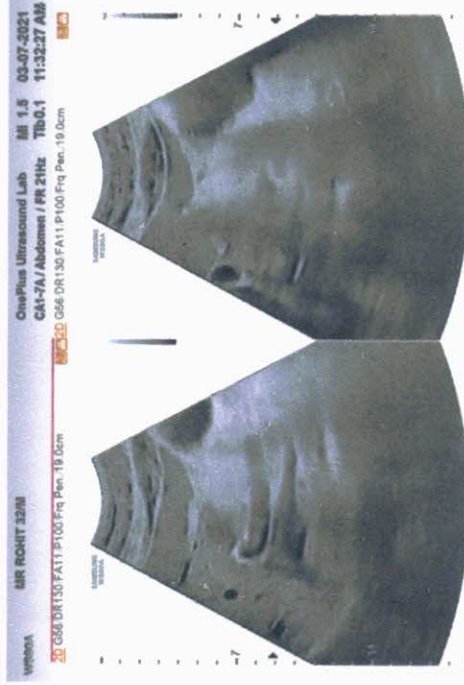
- **Fatty infiltration of liver (grade I) with no hepatomegaly.**


DR. POOJA GARG
RADIOLOGIST
REG NO- DMC/R/03398

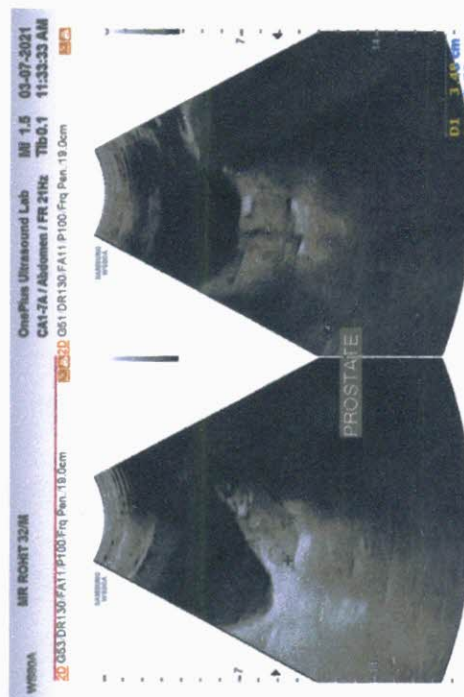
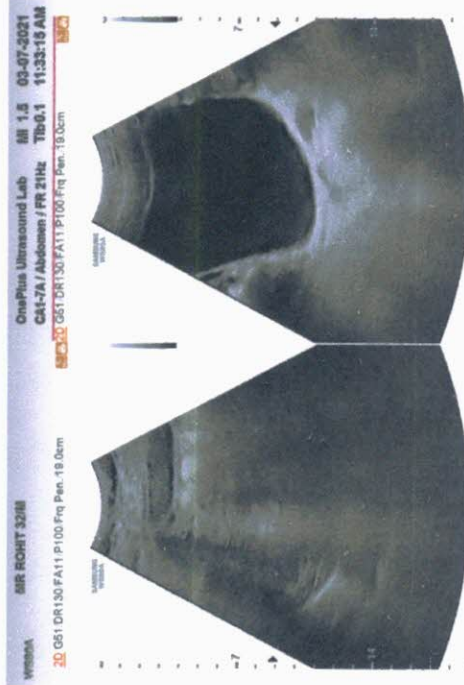
Dr. POOJA GARG
M.B.B.S., D.M.R.D
Reg No. DMC/R/03398
Radiologist

Type By : darshita

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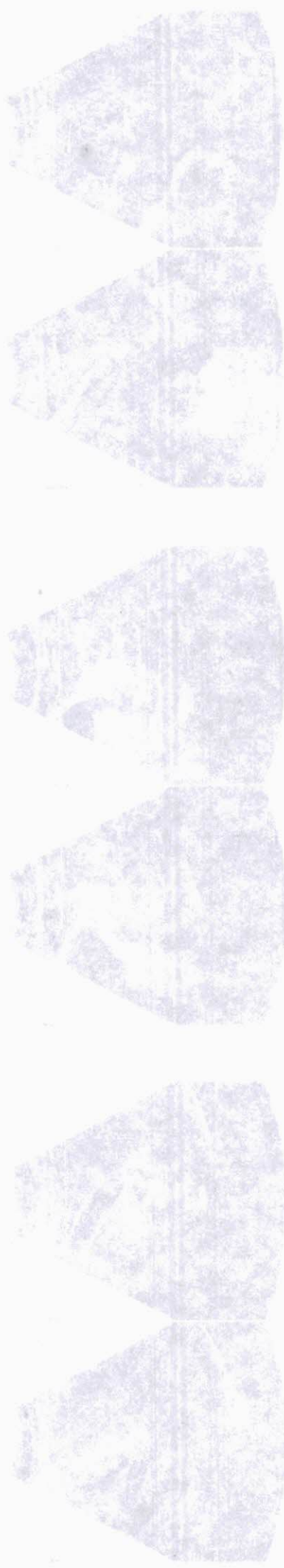
D1 14.12 cm
D2 2.52 cm
D3 3.91 cm
Vol. 17.92 ml



D1 3.48 cm
D2 2.52 cm
D3 3.91 cm
Vol. 17.92 ml

INSTRUMENTAL ANALYSIS

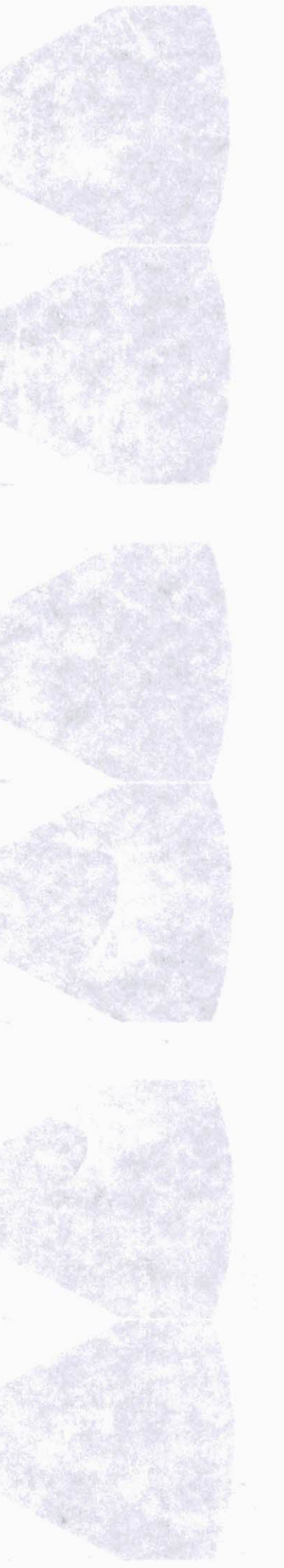
1. The first part of the analysis involves the identification of the sample. This is done by comparing the sample's characteristics with those of known substances. The results of this analysis are shown in the following table.



2. The second part of the analysis involves the determination of the sample's composition. This is done by measuring the sample's physical and chemical properties. The results of this analysis are shown in the following table.



3. The third part of the analysis involves the determination of the sample's structure. This is done by measuring the sample's physical and chemical properties. The results of this analysis are shown in the following table.



ONEPLUS ULTRASOUND LAB

47, HARSH VIHAR PITAMPURA DELHI 110034

Mr. ROHIT YADAV

Age/Sex : 32/M

Ref. by : MEDIWHEEL

Indication1 :

Indication2 :

Indication3 :

ID : 985

H/Wt : 176/81

Recorded : 3-7-2021 9:49

TREADMILL TEST SUMMARY REPORT

Protocol: BRUCE

History:

Medication1 :

Medication2 :

Medication3 :

PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100	II	ST LEVEL (mm) V2	V5	METS
SUPINE											
STANDING											
STAGE 1	2:59	2:59	2.70	10.00	67	120/74	80	0.8	3.2	1.9	
STAGE 2	5:59	2:59	4.00	12.00	66	120/74	79	1.3	3.3	2.2	
STAGE 3	8:59	2:59	5.40	14.00	97	130/80	126	1.3	3.3	2.6	4.80
STAGE 4	10:29	1:29	6.70	16.00	114	140/84	159	1.6	2.9	2.8	7.10
PEAK EXER	10:32	1:32			145	150/88	217	1.5	2.9	2.7	10.00
RECOVERY	2:59	2:59	0.00	0.00	164	162/92	265	1.1	2.7	1.8	11.99
					165	162/92	267	1.2	2.5	1.9	12.06
					87	122/74	106	0.5	1.9	1.1	

RESULTS

Exercise Duration

Max Heart Rate

Max Blood Pressure

Max Work Load

Reason of Termination

10:32 Minutes

165 bpm 87 % of target heart rate 188 bpm

162/92 mmHg

12.06 METS

Negative for ischemic chest pain

IMPRESSIONS

[Handwritten Signature]

Cardiologist/IA

REGD. MD

Reg. No-1077

ONEPLUS ULTRASOUND LAB
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Delhi - 110034
Ph: 011-4240027, 011-2620740
E-mail: onepusul@gmail.com

Ph: 011-4240027, 011-2620740
E-mail: onepusul@gmail.com

[Handwritten Signature]

Mr. ROHIT YADAV
I.D. : 985
AGE/SEX : 32M
RECORDED : 3-7-2021 9:49

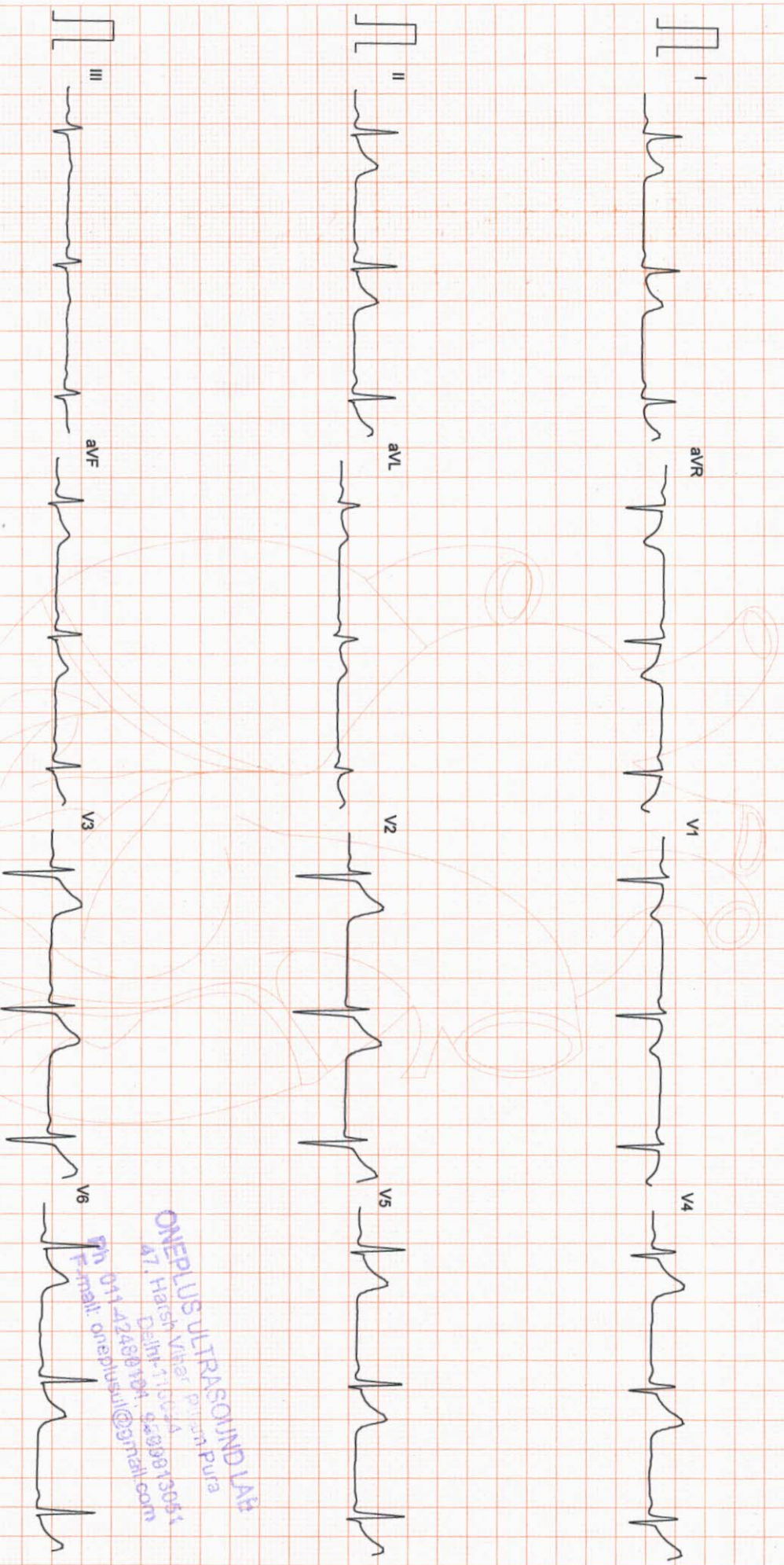
RATE : 67 BPM
B.P. : 120/74 mmHg

ONEPLUS ULTRASOUND LAB

SUPINE
PRETEST

ST @ 10mm/mV
80ms PostJ

RAW E.C.G.



Filtered

25mm/sec 10mm/mV

ARRM

CardiCom, INDIA Ph.:091-731-2620740, Telefax:091-731-2431214

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4209813051
Delhi-110024, 4209813051
Ph: 011-42488104, 4209813051
E-mail: oneplusul@3mail.com

Mr. ROHIT YADAV
I.D. : 985
AGE/SEX : 32M
RECORDED : 3-7-2021 9:49

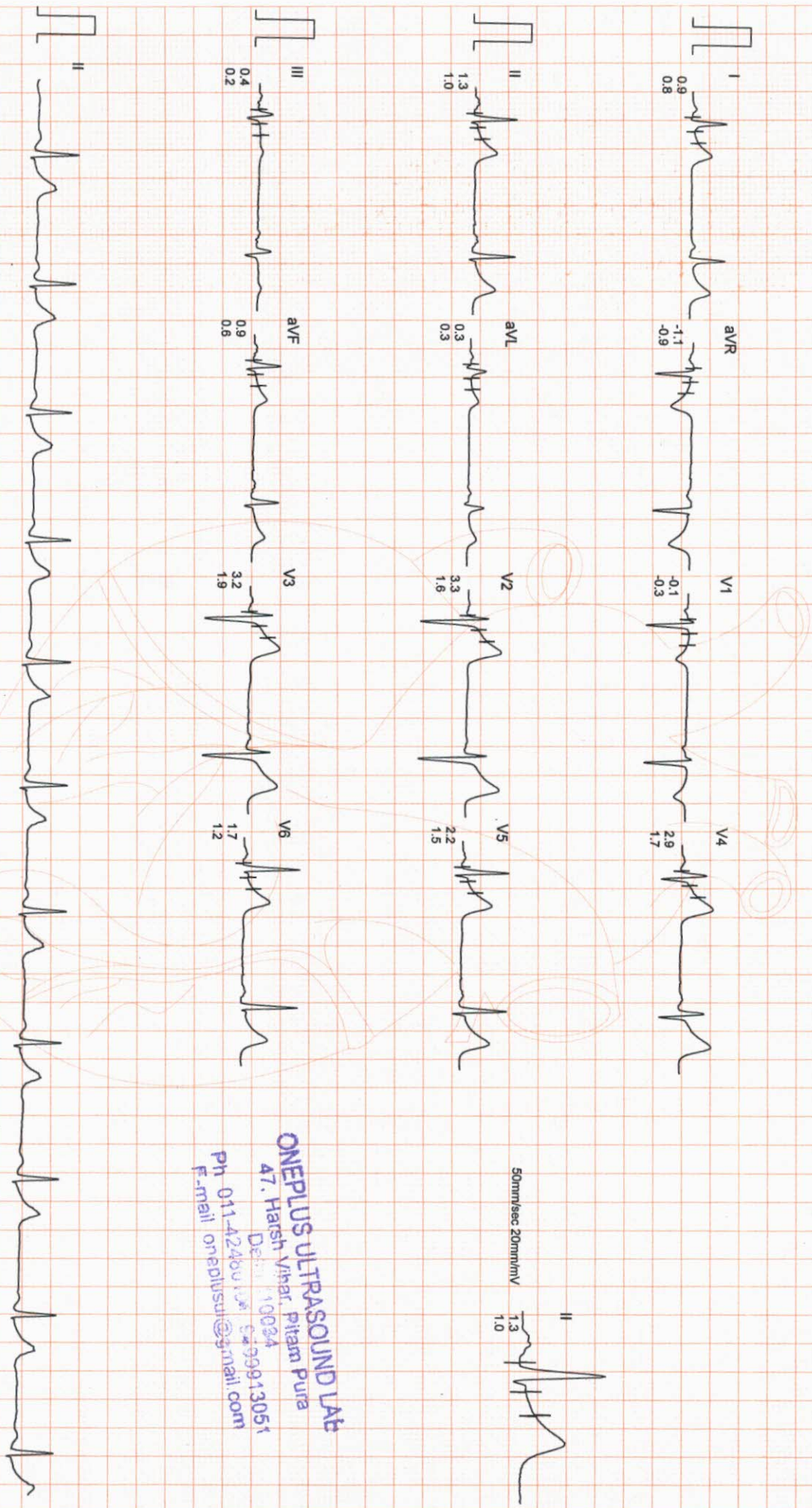
RATE : 66 BPM
B.P. : 120/74 mmHg

ONEPLUS ULTRASOUND LAB

STANDING
PRETEST

ST @ 10mm/mV
80ms PostJ

LINKED MEDIAN



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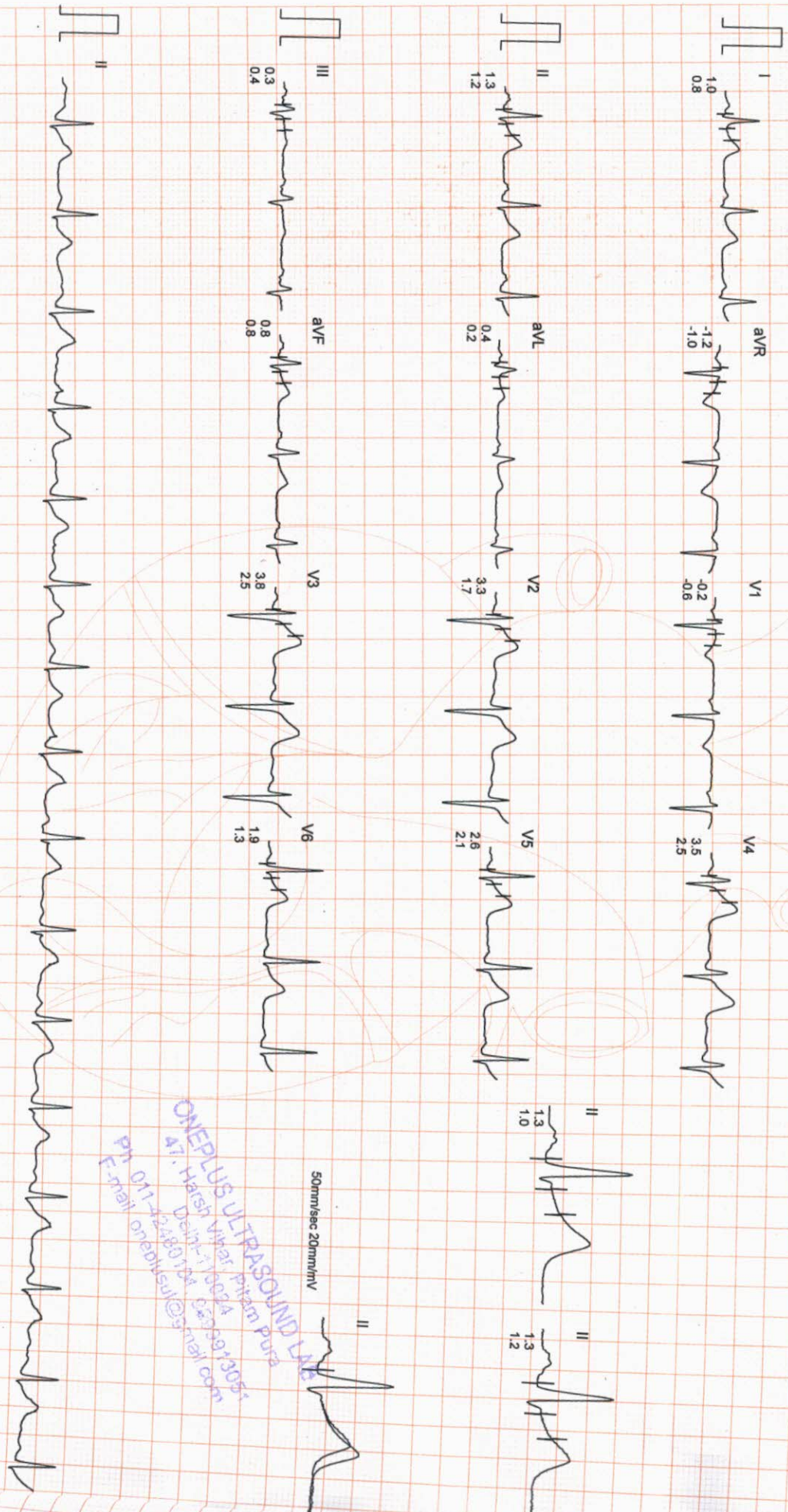
ONEPLUS ULTRASOUND LAB

Mr. ROHIT YADAV
I.D. : 985
AGE/SEX : 32/M
RECORDED : 3-7-2021 9:49

RATE : 97 BPM
B.P. : 130/80 mmHg

BRUCE
EXERCISE 1
PHASE TIME : 2:59
STAGE TIME : 2:59

ST @ 10mm/mV
80ms PostJ
SPEED : 2.7 Km./Hr.
GRADE : 10.0 %
LINKED MEDIAN



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ONEPLUS ULTRASOUND LAB

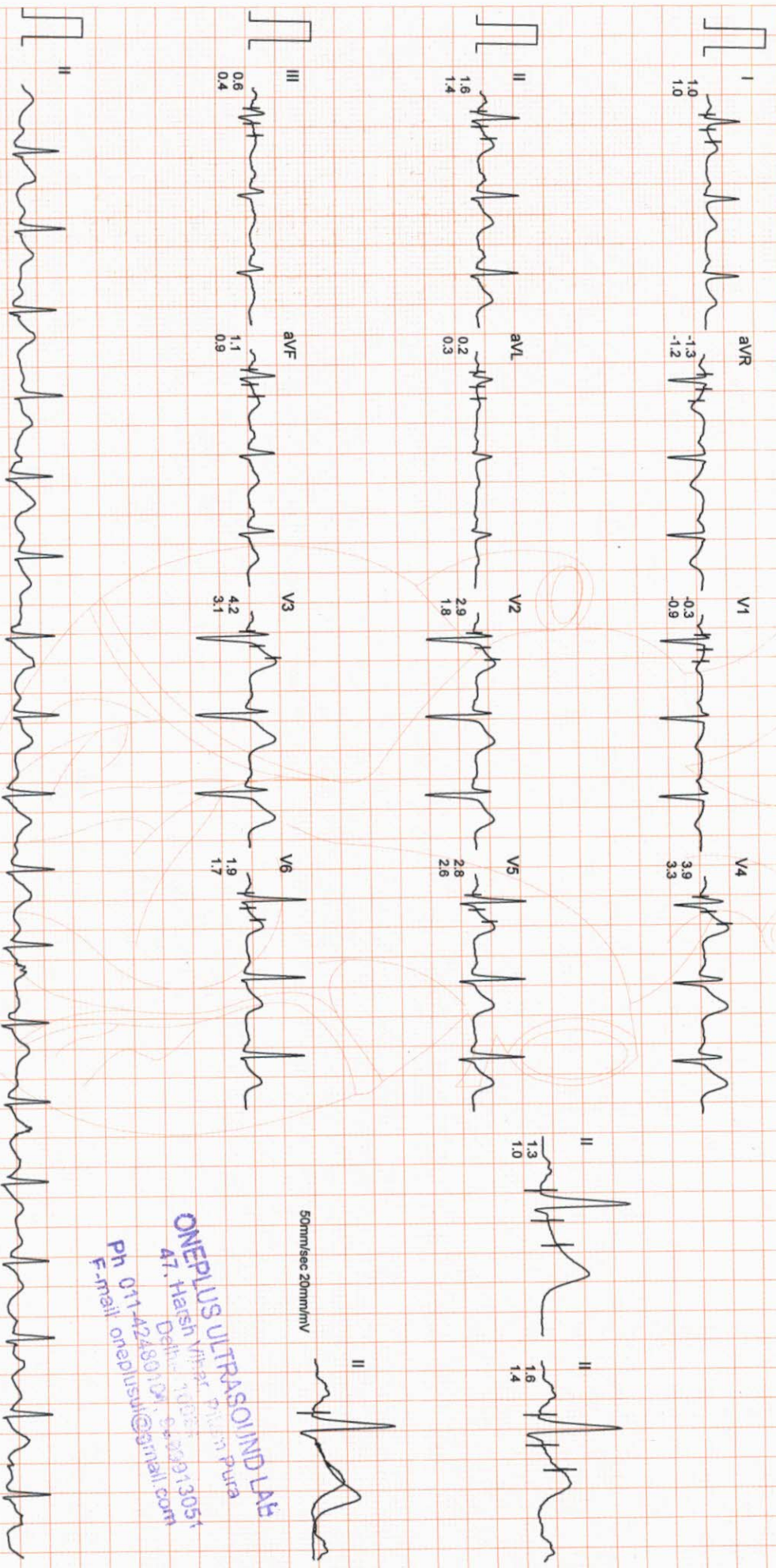
Mr. ROHIT YADAV
 I.D. : 985
 AGE/SEX : 32M
 RECORDED : 3-7-2021 9:49

RATE : 114 BPM
 B.P. : 140/84 mmHg

BRUCE
 EXERCISE 2
 PHASE TIME : 5:59
 STAGE TIME : 2:59

ST @ 10mm/mV
 80ms PostJ
 SPEED : 4.0 Km./hr.
 GRADE : 12.0 %

LINKED MEDIAN



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ONEPLUS ULTRASOUND LAB

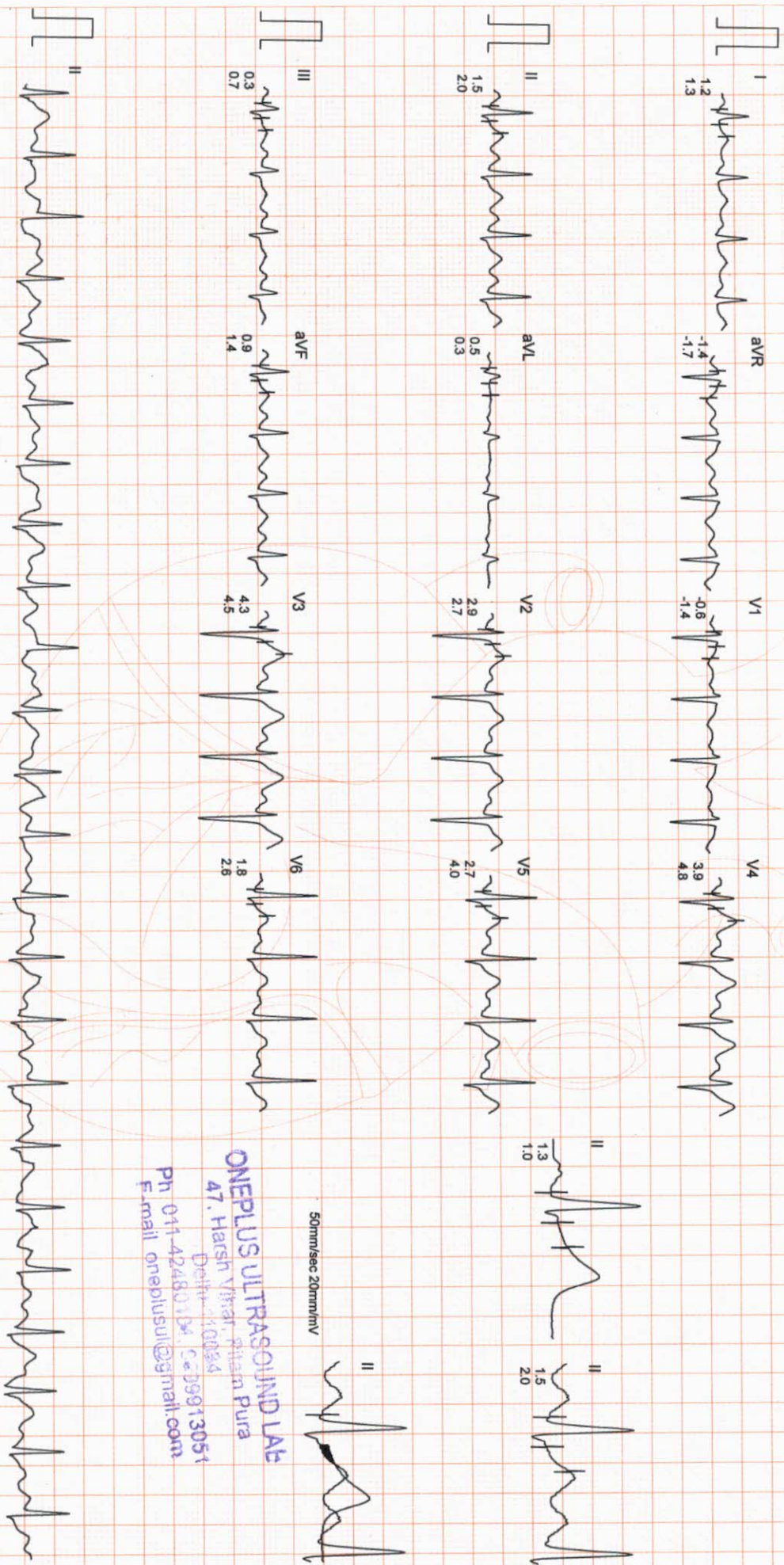
Mr. ROHIT YADAV
 I.D. : 985
 AGE/SEX : 32M
 RECORDED : 3-7-2021 9:49

RATE : 145 BPM
 B.P. : 150/88 mmHg

BRUCE
 EXERCISE 3
 PHASE TIME : 8:59
 STAGE TIME : 2:59

ST @ 10mm/mV
 80ms PostJ
 SPEED : 5.4 Km./hr.
 GRADE : 14.0 %

LINKED MEDIAN



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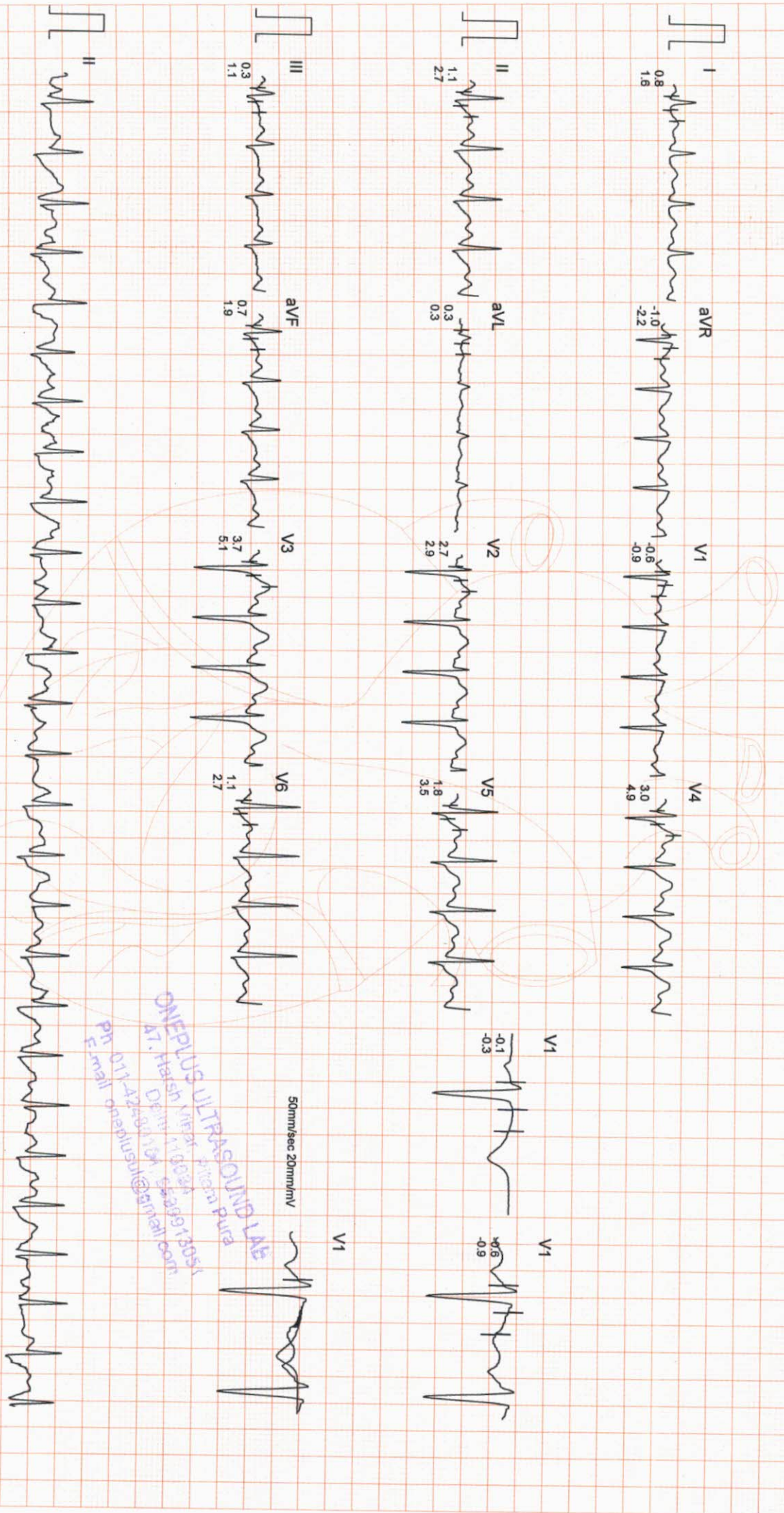
Mr. ROHIT YADAV
 I.D. : 985
 AGE/SEX : 32/M
 RECORDED : 3-7-2021 9:49

RATE : 164 BPM
 B.P. : 162/92 mmHg

BRUCE
 EXERCISE 4
 PHASE TIME : 10:29
 STAGE TIME : 1:29

ST @ 10mm/mV
 80ms PostJ
 SPEED : 6.7 Km./Hr.
 GRADE : 16.0 %

LINKED MEDIAN



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 Delhi 110028
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 Email: onepplus@gmail.com
 011-42248114

ONEPLUS ULTRASOUND LAB

MR. ROHIT YADAV

I.D. : 985

AGE/SEX : 32/M

RECORDED : 3-7-2021 9:49

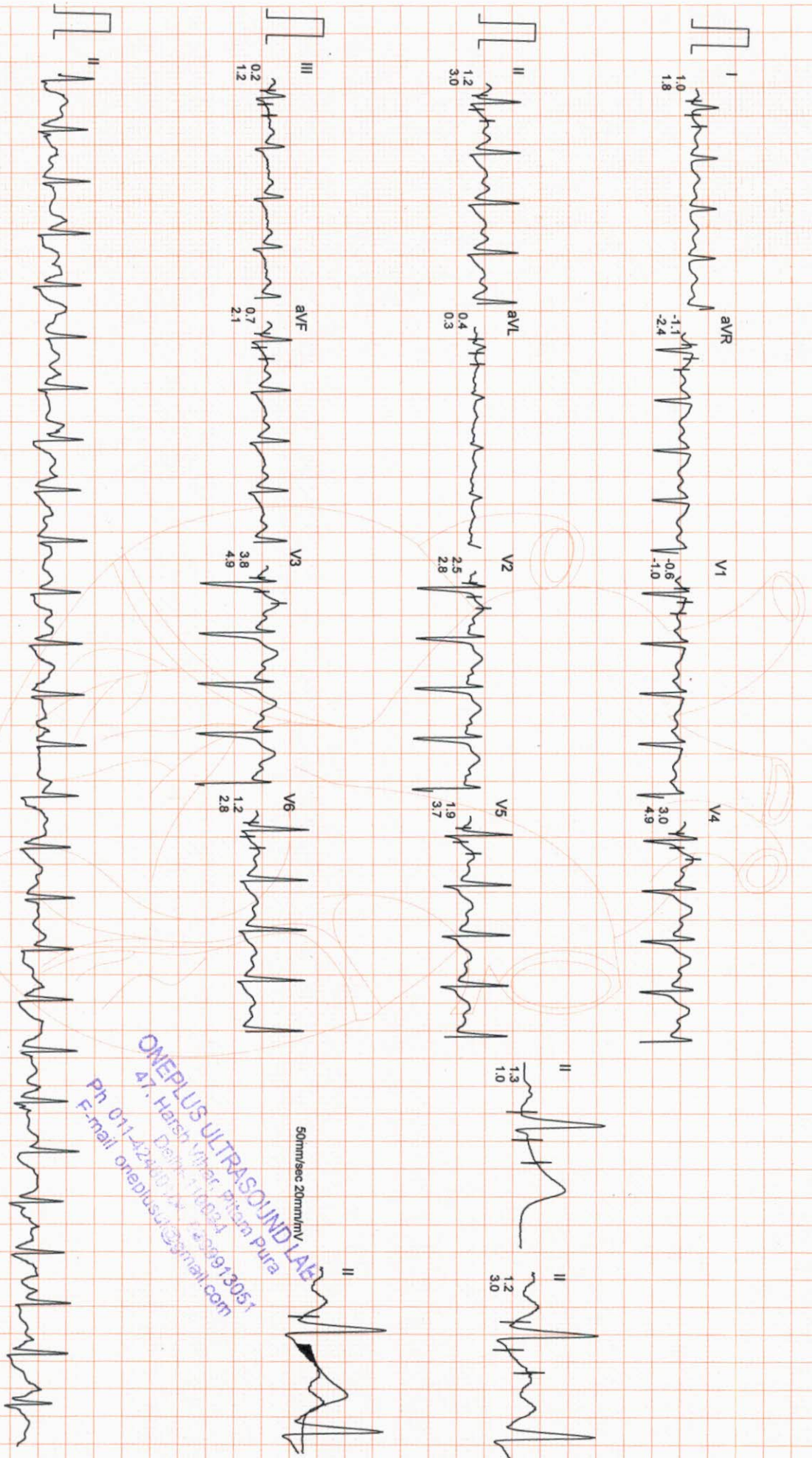
RATE : 165 BPM

B.P. : 162/92 mmHg

BRUCE
PEAK EXER
PHASE TIME : 10:32
STAGE TIME : 1:32

ST @ 10mm/mV
80ms PostJ
SPEED : 6.7 Km/Hr.
GRADE : 16.0 %

LINKED MEDIAN



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Delhi-110024
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E-mail: oneplusul@gmail.com

ONEPLUS ULTRASOUND LAB

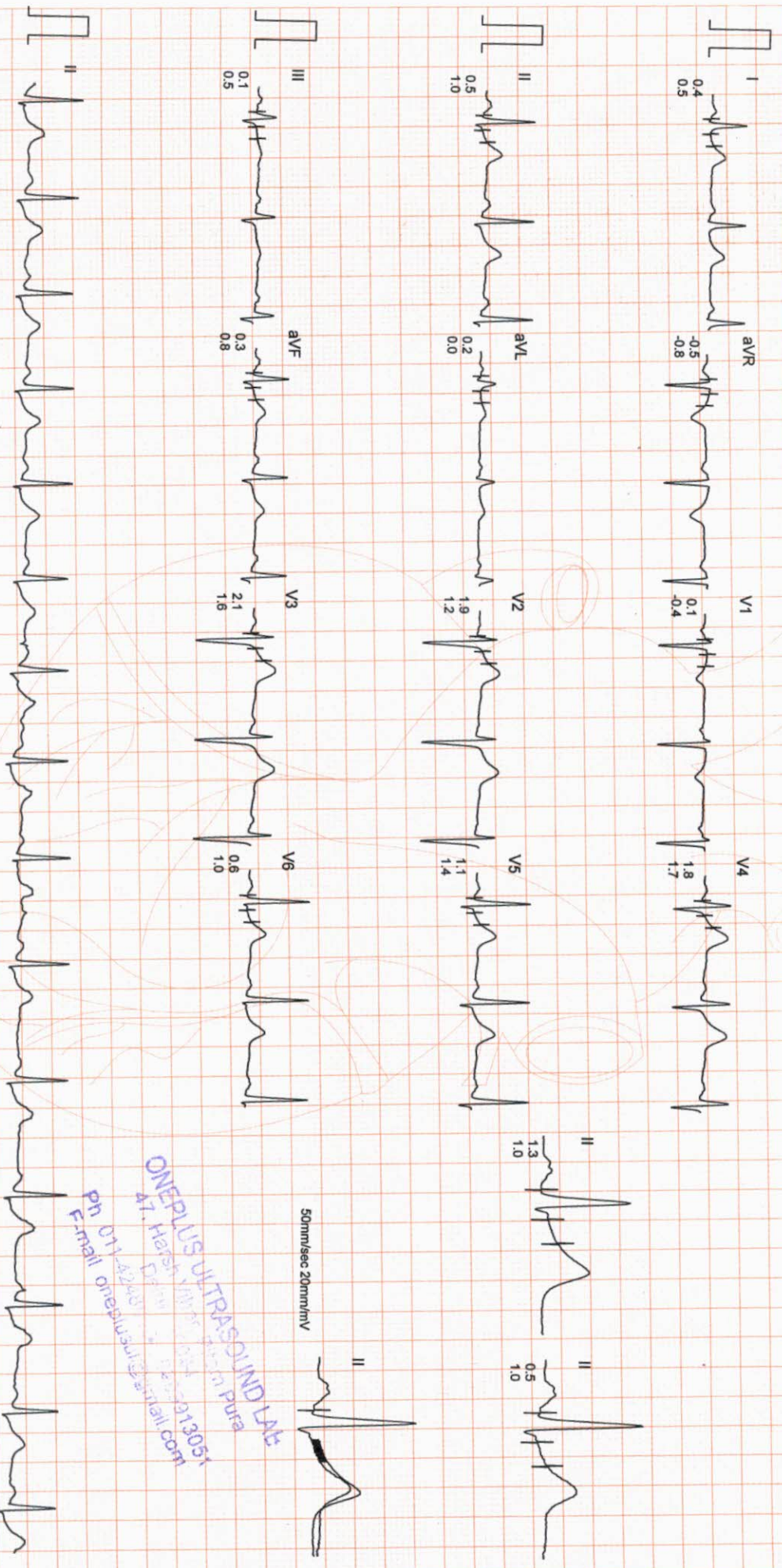
Mr. ROHIT YADAV
I.D. : 985
AGE/SEX : 32/M
RECORDED : 3-7-2021 9:49

RATE : 87 BPM
B.P. : 122/74 mmHg

BRUCE
RECOVERY
PHASE TIME : 2:59

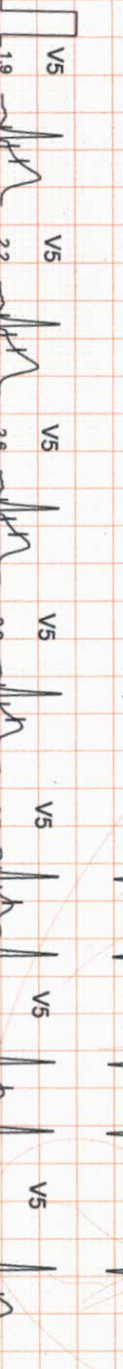
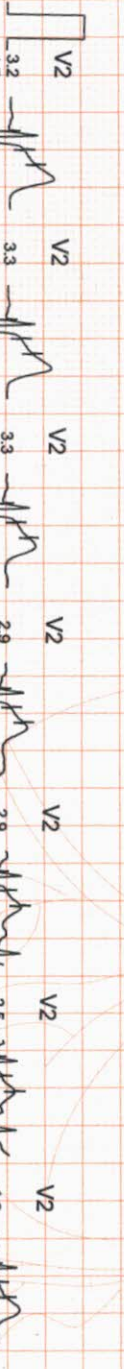
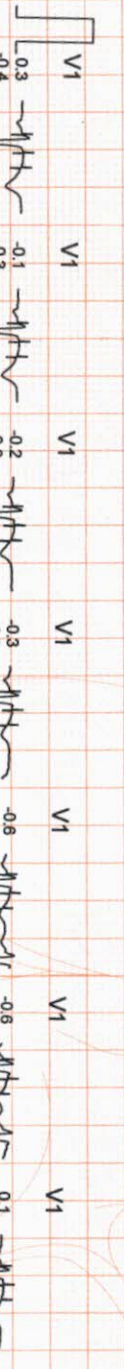
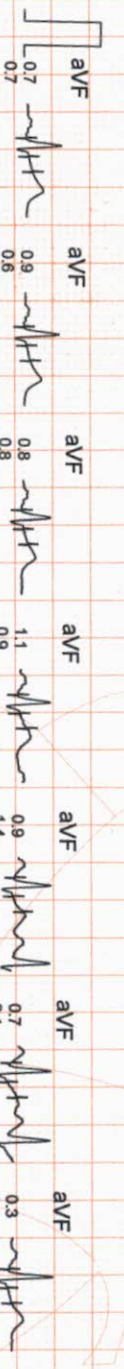
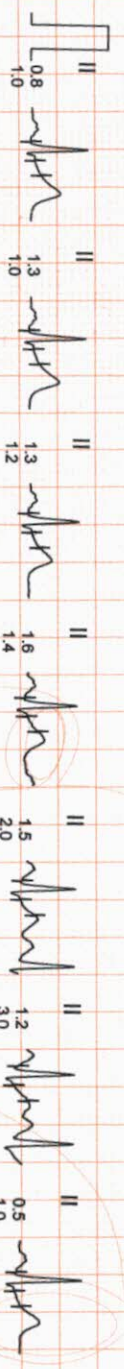
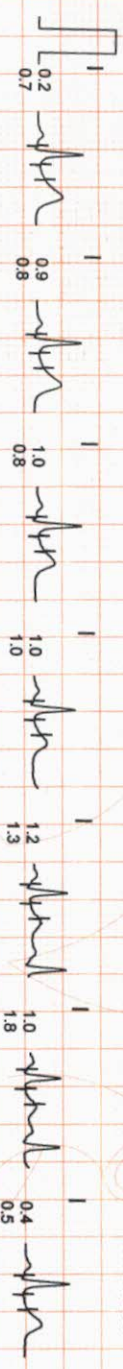
ST @ 10mm/mV
80ms PostJ
SPEED : 0.0 Km./Hr.
GRADE : 0.0 %

LINKED MEDIAN



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Dr. Harsh Vardhan
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E-mail: onepplusultrasound@gmail.com

STAGE	STAGE 1	STAGE 2	STAGE 3	PEAK EXERCISE	RECOVERY
SUPINE	STANDING	STAGE 1	STAGE 2	STAGE 3	RECOVERY
0.0Kmph 0.0% 67 bpm B.P. 120/74 80ms PostJ	0.0Kmph 0.0% 66 bpm B.P. 120/74 80ms PostJ	2.59 2.59 2.7Kmph 10.0% 97 bpm B.P. 130/80 80ms PostJ	5:59 2:59 4.0Kmph 12.0% 114 bpm B.P. 140/64 80ms PostJ	8:59 2:59 5.4Kmph 14.0% 145 bpm B.P. 150/88 80ms PostJ	10:32 1:32 6.7Kmph 16.0% 165 bpm B.P. 162/82 80ms PostJ



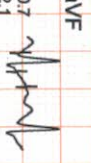
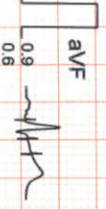
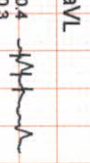
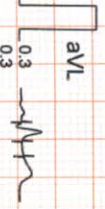
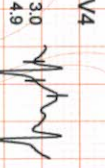
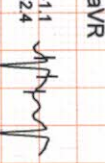
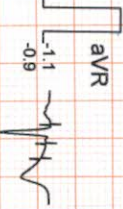
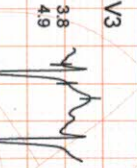
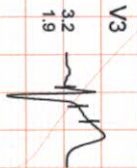
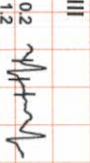
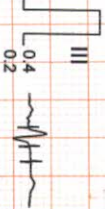
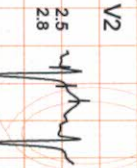
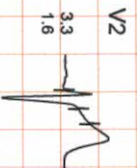
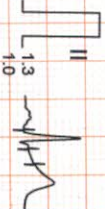
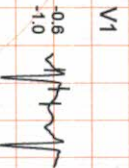
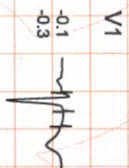
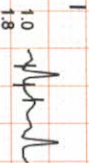
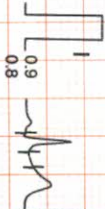
ONEPLUS ULTRASOUND LAB
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 Ph: 011-26274000, 26274001
 Email: info@oneplusultrasound.com

STANDING
 0.0Kmph
 0.0%
 66 bpm
 B.P. 120/74
 80ms PostJ

PEAK EXERCISE
 10:32
 1:32
 6.7Kmph
 16.0%
 165 bpm
 B.P. 162/92
 80ms PostJ

STANDING
 0.0Kmph
 0.0%
 66 bpm
 B.P. 120/74
 80ms PostJ

PEAK EXERCISE
 10:32
 1:32
 6.7Kmph
 16.0%
 165 bpm
 B.P. 162/92
 80ms PostJ



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 Ph: 011-42481212, 9809913051
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NAME	:Mr. ROHIT YADAV	Barcode No	:10099743
AGE/GENDER	:32 YRS/Male	SPECIMEN DATE	:03/Jul/2021 09:44AM
PATIENT ID	:80858	SPECIMEN RECEIVED	:03/Jul/2021 01:29PM
REFERRED BY	:Dr. MEDIWHEEL	REPORT DATE	:03/Jul/2021 05:21PM
CENTRE NAME	:ONEPLUS ULTRASOUND LAB	LAB NO.	:012107030010

Test Name	Result	Unit	Ref. Range
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BIOCHEMISTRY

Health checkup 2 Male

<u>Blood sugar pp</u>	103	mg/dL	70.0-140.0
------------------------------	-----	-------	------------

*** End Of Report ***

DR. NITIN AGARWAL
M.B.B.S., MD (Path)
DMC/R/01436

Checked By.


DR. NITIN AGARWAL
MBBS,MD(PATHOLOGIST)

47, Harsh Vihar, Pitampura, Delhi-34 ☎ 011-4248 0101, 9599913051

✉ Email: oneplusul@gmail.com 🌐 www.oneplusul.in

Page 1 of 1

• Clinical correlation is essential for final diagnosis. • If test results are unsatisfactory please contact personally or on phone.
• This report is for perusal of doctors only. • All disputes are subject to Delhi jurisdiction only. • Not for medico legal case.
• All congenital anomalies in a foetus may not be diagnosed in routine obstetric ultrasound.



Dr. Nitin Agarwal
 Pathologist & Director
 Ex. Sr. Res. MAMC
 & Lok Nayak Hospital
 Ex. Chief of Lab Dr. Lal Path Labs.
 Ex. Chief of Lab Dr. Lal Path Labs.

Dr. Pooja (Garg) Agarwal
 Radiologist & Director
 MAMC & Lok Nayak Hospital
 (MAMC & Lok Nayak Hospital)



NAME	:Mr. ROHIT YADAV	Barcode No	:10099743
AGE/GENDER	:32 YRS/Male	SPECIMEN DATE	:03/Jul/2021 09:44AM
PATIENT ID	:80858	SPECIMEN RECEIVED	:03/Jul/2021 01:23PM
REFERRED BY	:Dr. MEDIWHEEL	REPORT DATE	:03/Jul/2021 05:51PM
CENTRE NAME	:ONEPLUS ULTRASOUND LAB	LAB NO.	:012107030010

Test Name	Result	Unit	Ref. Range
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CLINICAL PATHOLOGY

STOOL ROUTINE

Physical examination

Colour	BROWNISH		
Consistency	FORMED		Semi Formed
Blood	ABSENT		Absent
Mucus	ABSENT		Absent

Chemical examination, stool

pH	6.00		
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Microscopic examination

Pus cells	NIL	/HPF	
Red blood cells	NIL	/HPF	NIL
Ova	NIL		NIL
Cysts	NIL		NIL
Bacteria	NIL	/HPF	NIL
Others	NIL		

*** End Of Report ***

Dr. NITIN AGARWAL
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 DMC/R/01436

DR. NITIN AGARWAL
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Checked By.

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Page 1 of 1

Clinical correlation is essential for final diagnosis. If test results are unsatisfactory, please contact doctor personally or on phone. This report is for perusal of doctors only.
 *All disputes Subject to Delhi Jurisdiction only. Not for medicolegal purposes. *All congenital anomalies in a foetus may not be diagnosed in routine obstetric ultrasound.
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