

PHYSICAL EXAMINATION REPORT

Vasavi

Patient Name	2 a ka vath.	Sex/Age	F / 29
Date	18/12/23.	Location	Thane.

History and Complaints

C/O - PCOD.
- Hair fall.

EXAMINATION FINDINGS:

Height (cms):	150	Temp (0c):	37
Weight (kg):	53.6	Skin:	Acne
Blood Pressure	110/80	Nails:	NAD
Pulse	72/min	Lymph Node:	NAD

Systems :

Cardiovascular:

Respiratory:

Genitourinary:

GI System:

CNS:

NAD

Impression:

- Mild Hypochromia, Microcytosis.
- ↑ A/G Ratio.
- USG - Polycystic changes in B/L ovaries.
- ECG - Bradycardia.

Advice:

- Iron Supplement.
- Reg. Exercise.
- Gynaec consultation.

1)	Hypertension:	
2)	IHD	
3)	Arrhythmia	
4)	Diabetes Mellitus	
5)	Tuberculosis	Nil
6)	Asthma	
7)	Pulmonary Disease	
8)	Thyroid/ Endocrine disorders	
9)	Nervous disorders	
10)	GI system	
11)	Genital urinary disorder	
12)	Rheumatic joint diseases or symptoms	Nil
13)	Blood disease or disorder	
14)	Cancer/lump growth/cyst	d/o - PCOD
15)	Congenital disease	
16)	Surgeries	USCS
17)	Musculoskeletal System	Nil

PERSONAL HISTORY:

1)	Alcohol	No
2)	Smoking	No
3)	Diet	Mixed
4)	Medication	No

[Signature]
Dr. Manasee Kulkarni
M.B.B.S
2005/09/3439

Date: 13/12/25
 Name: Lakshmi Vasavi
 CID: 2335200888
 Sex / Age: F 29

EYE CHECK UP

Chief complaints: RUV

Systemic Diseases: Nil

Past history: Nil

Unaided Vision: 3/6 @ HV 2H17

Aided Vision:

Refraction:

	(Right Eye)				(Left Eye)			
	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / Abnormal

Remark: Poor Vision

MR. PRAKASH KUDVA
 SR. OPTOMETRIST



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CID : 2335200898
Name : MRS. LAKAVATH VASAVI
Age / Gender : 31 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 18-Dec-2023 / 09:58
Reported : 18-Dec-2023 / 11:11

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

CBC (Complete Blood Count), Blood

PARAMETER	RESULTS	BIOLOGICAL REF. RANGE	METHOD
RBC PARAMETERS			
Haemoglobin	12.5	12.0-15.0 g/dL	Spectrophotometric
RBC	4.84	3.8-4.8 mil/cmm	Elect. Impedance
PCV	37.4	36-46 %	Measured
MCV	77.2	80-100 fl	Calculated
MCH	25.8	27-32 pg	Calculated
MCHC	33.4	31.5-34.5 g/dL	Calculated
RDW	14.2	11.6-14.0 %	Calculated
WBC PARAMETERS			
WBC Total Count	4330	4000-10000 /cmm	Elect. Impedance
WBC DIFFERENTIAL AND ABSOLUTE COUNTS			
Lymphocytes	40.9	20-40 %	
Absolute Lymphocytes	1771.0	1000-3000 /cmm	Calculated
Monocytes	5.5	2-10 %	
Absolute Monocytes	238.2	200-1000 /cmm	Calculated
Neutrophils	49.0	40-80 %	
Absolute Neutrophils	2121.7	2000-7000 /cmm	Calculated
Eosinophils	4.6	1-6 %	
Absolute Eosinophils	199.2	20-500 /cmm	Calculated
Basophils	0.0	0.1-2 %	
Absolute Basophils	0.0	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
PLATELET PARAMETERS			
Platelet Count	248000	150000-400000 /cmm	Elect. Impedance
MPV	8.8	6-11 fl	Calculated
PDW	11.2	11-18 %	Calculated
RBC MORPHOLOGY			
Hypochromia	Mild		
Microcytosis	Occasional		

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Macrocytosis -
Anisocytosis -
Poikilocytosis -
Polychromasia -
Target Cells -
Basophilic Stippling -
Normoblasts -
Others -
WBC MORPHOLOGY -
PLATELET MORPHOLOGY -
COMMENT -

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR 15 2-20 mm at 1 hr. Sedimentation

Clinical Significance: The erythrocyte sedimentation rate (ESR), also called a sedimentation rate is the rate red blood cells sediment in a period of time.

Interpretation:

Factors that increase ESR: Old age, Pregnancy, Anemia
Factors that decrease ESR: Extreme leukocytosis, Polycythemia, Red cell abnormalities- Sickle cell disease

Limitations:

- It is a non-specific measure of inflammation.
- The use of the ESR as a screening test in asymptomatic persons is limited by its low sensitivity and specificity.

Reflex Test: C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.

Reference:

- Pack Insert
- Bridgen ML. Clinical utility of the erythrocyte sedimentation rate. American family physician. 1999 Oct 1;60(5):1443-50.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***

I. Mujawar
Dr. IMRAN MUJAWAR
M.D (Path)
Pathologist



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Collected : 18-Dec-2023 / 09:58
Reported : 18-Dec-2023 / 12:24

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	99.8	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: > / = 126 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.85	0.1-1.2 mg/dl	Diazo
BILIRUBIN (DIRECT), Serum	0.27	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.58	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.3	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	5.0	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.3	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	2.2	1 - 2	Calculated
SGOT (AST), Serum	13.2	5-32 U/L	IFCC without pyridoxal phosphate activation
SGPT (ALT), Serum	9.7	5-33 U/L	IFCC without pyridoxal phosphate activation
GAMMA GT, Serum	11.4	3-40 U/L	IFCC
ALKALINE PHOSPHATASE, Serum	60.4	35-105 U/L	PNPP
BLOOD UREA, Serum	28.7	12.8-42.8 mg/dl	Urease & GLDH
BUN, Serum	13.4	6-20 mg/dl	Calculated
CREATININE, Serum	0.76	0.51-0.95 mg/dl	Enzymatic



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 Reported : 18-Dec-2023 / 15:01

eGFR, Serum	107	(ml/min/1.73sqm)	Calculated
		Normal or High: Above 90	
		Mild decrease: 60-89	
		Mild to moderate decrease: 45-59	
		Moderate to severe decrease: 30-44	
		Severe decrease: 15-29	
		Kidney failure: <15	

Note: eGFR estimation is calculated using 2021 CKD-EPI GFR equation w.e.f 16-08-2023

URIC ACID, Serum	5.1	2.4-5.7 mg/dl	Uricase
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
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J. Mujawar
Dr. IMRAN MUJAWAR
 M.D (Path)
 Pathologist



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CID : 233520089B
Name : MRS.LAKAVATH VASAVI
Age / Gender : 31 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 18-Dec-2023 / 09:58
Reported : 18-Dec-2023 / 12:24

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	5.4	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	108.3	mg/dl	Calculated

Intended use:

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1c goal for non pregnant adults in general is Less than 7%.

Clinical Significance:

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

Test Interpretation:

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

Factors affecting HbA1c results:

Increased in: High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

Reflex tests: Blood glucose levels, CGM (Continuous Glucose monitoring)

References: ADA recommendations, AACC, Wallach's Interpretation of diagnostic tests 10th edition.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***

Dr. Imran Mujawar
Dr. IMRAN MUJAWAR
M.D (Path)
Pathologist



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Age / Gender : 31 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 18-Dec-2023 / 09:58
Reported : 18-Dec-2023 / 16:49

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
URINE EXAMINATION REPORT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	Acidic (6.0)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.020	1.010-1.030	Chemical Indicator
Transparency	Slight hazy	Clear	-
Volume (ml)	30	-	-
CHEMICAL EXAMINATION			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legal's Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
MICROSCOPIC EXAMINATION			
Leukocytes(Pus cells)/hpf	4-5	0-5/hpf	-
Red Blood Cells / hpf	Absent	0-2/hpf	-
Epithelial Cells / hpf	1-2	-	-
Casts	Absent	Absent	-
Crystals	Absent	Absent	-
Amorphous debris	Absent	Absent	-
Bacteria / hpf	2-3	Less than 20/hpf	-
Others	-	-	-

Interpretation: The concentration values of Chemical analytes corresponding to the grading given in the report are as follows:

- Protein (1+ = 25 mg/dl , 2+ = 75 mg/dl , 3+ = 150 mg/dl , 4+ = 500 mg/dl)
- Glucose(1+ = 50 mg/dl , 2+ = 100 mg/dl , 3+ = 300 mg/dl , 4+ = 1000 mg/dl)
- Ketone (1+ = 5 mg/dl , 2+ = 15 mg/dl , 3+ = 50 mg/dl , 4+ = 150 mg/dl)

Reference: Pack Invt

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***

Vandana Kulkarni

Dr.VANDANA KULKARNI
M.D (Path)
Pathologist



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Collected : 18-Dec-2023 / 09:58
Reported : 18-Dec-2023 / 13:51

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
BLOOD GROUPING & Rh TYPING

PARAMETER	RESULTS
ABO GROUP	B
Rh TYPING	Positive

NOTE: Test performed by Semi- automated column agglutination technology (CAT)

Specimen: EDTA Whole Blood and/or serum

Clinical significance:
ABO system is most important of all blood group in transfusion medicine

- Limitations:
- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
 - Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
 - Confirmation of newborn's blood group is indicated when A & B antigen expression and the agglutinins are fully developed at 1 to 4 years of age & remains constant throughout life.
 - Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result.
 - The Rh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

References:
1. Denise M Hammenig, Modern Blood Banking and Transfusion Practices- 6th Edition 2012, F.A. Davis company, Philadelphia

2. AABB technical manual

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***

J. Mujawar
Dr. IMRAN MUJAWAR
M.D (Path)
Pathologist



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	179.1	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	83.6	Normal: <150 mg/dl Bordertine-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high: >=500 mg/dl	GPO-POD
HDL CHOLESTEROL, Serum	50.7	Desirable: >60 mg/dl Bordertine: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	128.4	Desirable: <130 mg/dl Bordertine-high: 130 - 159 mg/dl High: 160 - 189 mg/dl Very high: >=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	111.0	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Bordertine High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >= 190 mg/dl	Calculated
VLDL CHOLESTEROL, Serum	17.4	< / = 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.5	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.2	0-3.5 Ratio	Calculated

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***

Imjawar

Dr. IMRAN MUJAWAR
M.D (Path)
Pathologist



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Name : MRS.LAKAVATH VASAVI
Age / Gender : 31 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 18-Dec-2023 / 09:58
Reported : 18-Dec-2023 / 14:56

Interpretation:

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

Clinical Significance:

1) TSH Values between high abnormal upto 15 microUnit should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.

2) TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & doxapamine, Non Thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

Diurnal Variation: TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am, and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 200%. Biological variation: 19.7% (with in subject variation)

Reflex Tests: Anti thyroid Antibodies, USG Thyroid, TSH receptor Antibody, Thyroglobulin, Calcitonin

Limitations:

1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. This assay is designed to minimize interference from heterophilic antibodies.

Reference:

1. Oksanen et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
2. Interpretation of the thyroid function tests, Dayan et al, THE LANCET, Vol 357
3. Tietz, Test Book of Clinical Chemistry and Molecular Biology -5th Edition
4. Biological Variation: From principles to Practice-Carlton G Fraser (AACC Press)

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***

J. Mujawar
Dr. IMRAN MUJAWAR
M.D (Path)
Pathologist

CID : 2335200898
Name : Mrs LAKAVATH VASAVI
Age / Sex : 31 Years/Female
Ref. Dr :
Reg. Location : G B Road, Thane West Main Centre
Reg. Date : 18-Dec-2023
Reported : 18-Dec-2023 / 14:50

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X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

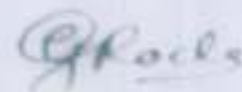
The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

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



Dr Gauri Varma
Consultant Radiologist
MBBS / DMRE
MMC- 2007/12/4113

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Ref. Dr :
Reg. Location : G B Road, Thane West Main Centre
Reg. Date : 18-Dec-2023
Reported : 18-Dec-2023 / 11:37

USG WHOLE ABDOMEN

LIVER: Liver appears normal in size and echotexture. There is no intra-hepatic biliary radical dilatation. No evidence of any focal lesion.

GALL BLADDER: Gall bladder is distended and appears normal. Wall thickness is within normal limits. There is no evidence of any calculus.

PORTAL VEIN: Portal vein is normal. **CBD:** CBD is normal.

PANCREAS: Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification. Pancreatic duct is not dilated.

KIDNEYS: Right kidney measures 10.5 x 3.3 cm. Left kidney measures 9.7 x 4.2 cm. Both kidneys are normal in size, shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

SPLEEN: Spleen is normal in size, shape and echotexture. No focal lesion is seen.

URINARY BLADDER: Urinary bladder is distended and normal. Wall thickness is within normal limits.

UTERUS: Uterus is anteverted and measures 6.2 x 3.2 x 4.3 cm. Uterine myometrium shows homogenous echotexture. Endometrial echo is in midline and measures 6 mm. Cervix appears normal.

OVARIES:

Both ovaries are bulky in size and show central echogenic stroma with multiple peripherally arranged small follicles.

The right ovary measures 3.0 x 2.3 x 2.9 cm and ovarian volume is 11 cc.

The left ovary measures 2.7 x 2.5 x 2.9 cm and ovarian volume is 10.6 cc.

No free fluid or significant lymphadenopathy is seen.

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Page no 1 of 2

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Ref. Dr :
Reg. Location : G B Road, Thane West Main Centre
Reg. Date : 18-Dec-2023
Reported : 18-Dec-2023 / 11:37

IMPRESSION:

BILATERAL BULKY OVARIES WITH POLYCYSTIC CHANGES.SUGGEST SR.FSH,SR LH,SR PROLACTIN CORRELATION.

Advice: Clinical co-relation further evaluation and follow up.

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USC is known to have inter-observer variations. Further/follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis.

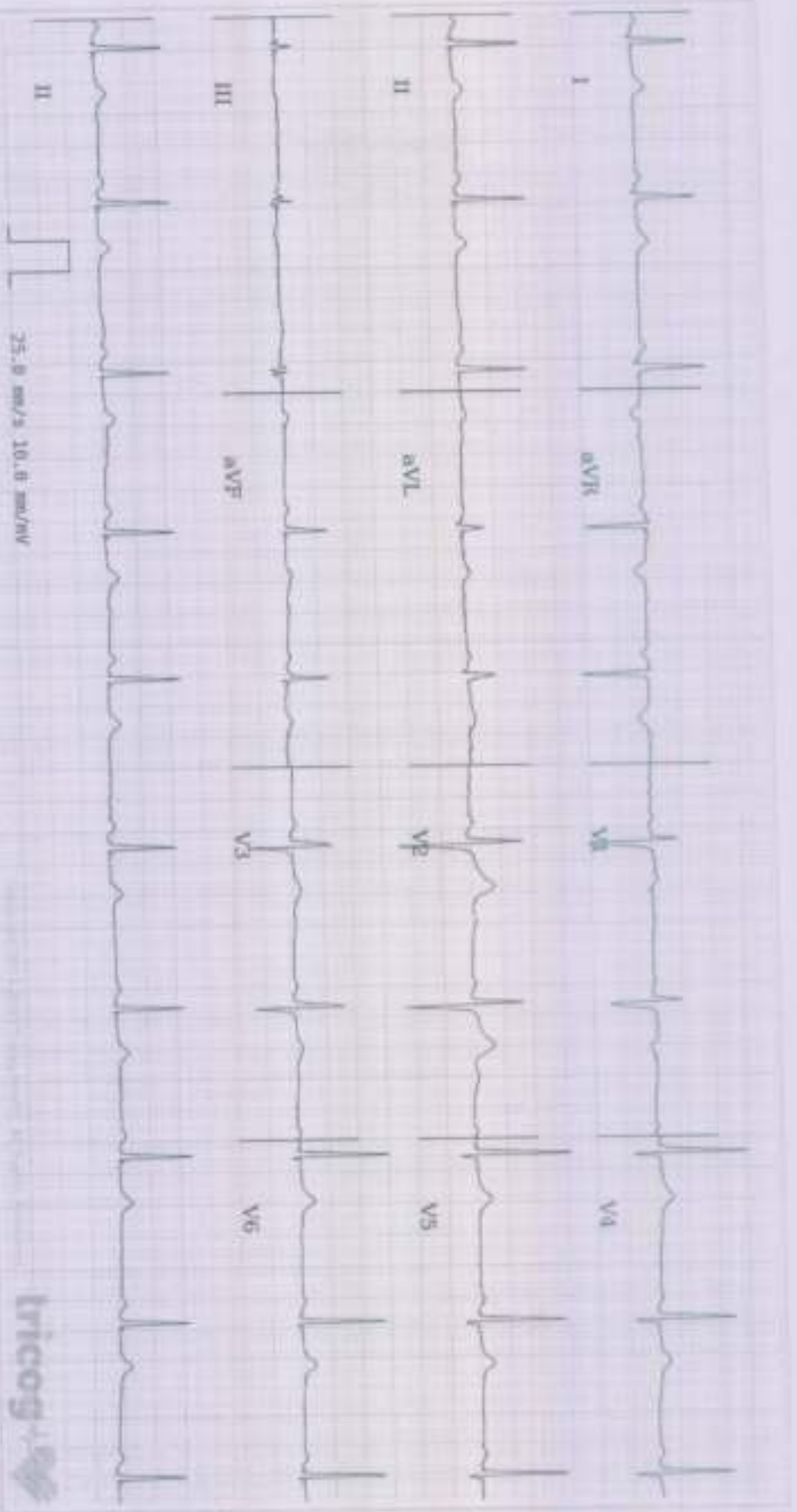
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Dr Gauri Varma
Consultant Radiologist
MBBS / DMRE
MMC- 2007/12/4113

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Patient Name: **LAKAVATH VASAVI**
Patient ID: **2335200898**

SUBURBAN DIAGNOSTICS - G B ROAD, THANE WEST
Date and Time: **18th Dec 23 10:30 AM**



Sinus Bradycardia. Please correlate clinically.

Age: **31** years
Sex: **Female**

Heart Rate: **58bpm**

Patient Vitals

- BP: NA
- Weight: NA
- Height: NA
- Pulse: NA
- Spo2: NA
- Temp: NA
- Others: NA

Measurements

- QRSD: 88ms
- QT: 434ms
- QTcB: 42ms
- PR: 132ms
- P-R-T: 35° 54° 19°

REPORTED BY

S

DR. SURESH K. PILLAI
MD, MRCP (Gen Int), MRCP (Card)
Senior Consultant

Disclaimer: This report is for informational purposes only. It is not intended to be used as a substitute for clinical judgment. The accuracy of this report is dependent on the quality of the information provided to the laboratory. The laboratory is not responsible for any errors or omissions in this report. The laboratory is not responsible for any actions taken based on this report. The laboratory is not responsible for any consequences arising from the use of this report. The laboratory is not responsible for any actions taken based on this report. The laboratory is not responsible for any consequences arising from the use of this report.

SUBURBAN DIAGNOSTICS (THANE GB ROAD)

Report



Email:

376 (2335200898) / LAKAVATH VASAVI / 31 Yrs / F / 150 Cms / 53 Kg

Date: 18 / 12 / 2023 11:52:07 AM

Stage	Time	Duration	Speed(mph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:11	0:11	00.0	00.0	01.0	074	39 %	110/70	081	00	
Standing	00:22	0:11	00.0	00.0	01.0	071	38 %	110/70	078	00	
HV	00:32	0:10	00.0	00.0	01.0	074	39 %	110/70	081	00	
EXStart	00:42	0:10	00.0	00.0	01.0	078	41 %	110/70	085	00	
BRUCE Stage 1	03:42	3:00	01.7	10.0	04.7	120	63 %	120/70	144	00	
BRUCE Stage 2	06:42	3:00	02.5	12.0	07.1	146	77 %	130/80	189	00	
PeakEX	07:17	0:35	03.4	14.0	07.7	160	85 %	140/80	224	00	
Recovery	08:17	1:00	00.0	00.0	01.1	135	71 %	140/80	189	00	
Recovery	09:17	2:00	00.0	00.0	01.0	109	59 %	120/80	130	00	
Recovery	10:17	3:00	00.0	00.0	01.0	108	56 %	120/80	127	00	
Recovery	10:27				00.0	000	0 %	140/80	000	00	

FINDINGS :

Exercise Time : 06:35
 Initial HR (EXStrt) : 78 bpm 41% of Target 189
 Initial BP (EXStrt) : 110/70 (mm/Hg)
 Max Workload Attained : 7.7 Fair response to induced stress
 Max ST Dep Lead & Avg ST Value: II & -2.6 mm in PeakEX
 Test End Reasons : Leg Pain, Heart Rate Achieved

Max HR Attained 160 bpm 85% of Target 189
 Max BP Attained 140/80 (mm/Hg)

Dr. SHAILAJA PILLAI
 M.D. (GEN.MED)
 R.NO. 49972
 Doctor : DR. SHAILAJA PILLAI



EM Pillai
376 / LAKKAVATH VASAVI / 31 Yrs / F / 150 Cms / 53 Kg Date: 18 / 12 / 2023 11:52:07 AM

REPORT :

Sample Name: Stress Test Graded Exercise Treadmill

PROCEDURE DONE: Graded exercise treadmill stress test

STRESS ECG RESULTS: The initial HR was recorded as 71.0 bpm, and the maximum predicted Target Heart Rate 189.0 The BP increased at the time of generating report as 140.0/80.0 mmHg The Max Dep went upto 0.4, 0.0 Ectopic Beats were observed during the Test

The Test was completed because of Leg Pain . Heart Rate Achieved.

CONCLUSIONS:

1. Stress test is negative for ischemia
2. Basic ECG Nonspecific ST T changes. No significant ST T changes seen.
3. HR and Blood pressure response to exercise is normal.

Dr. SHAILAJA PILLAI

M.D. (GEN.MED)

R.NO. 49972

Doctor : DR. SHAILAJA PILLAI

SUBURBAN DIAGNOSTICS (THANE GB ROAD)

376 (23335200899) / LAKAVATH VASAVI / 31 Yrs / F / 150 Cms / 53 Kg / HR : 74

Date: 18 / 12 / 2023 11:52:07 AM

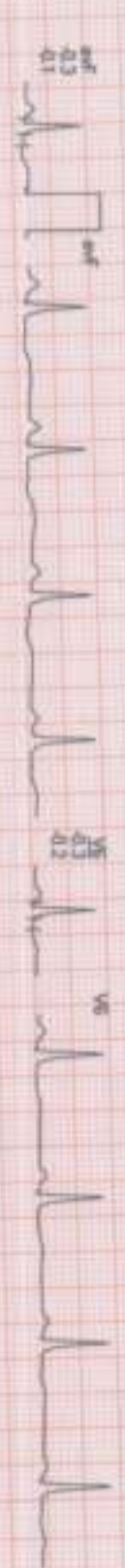
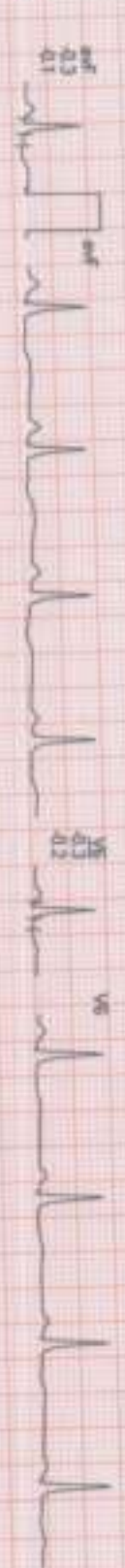
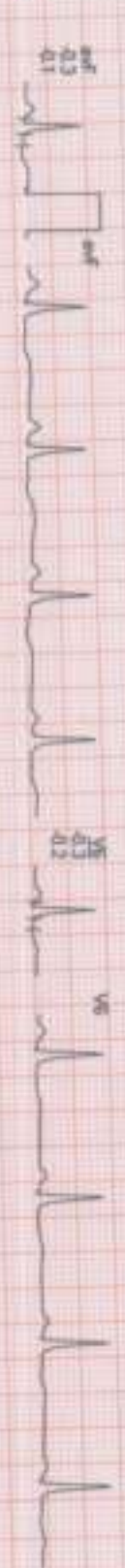
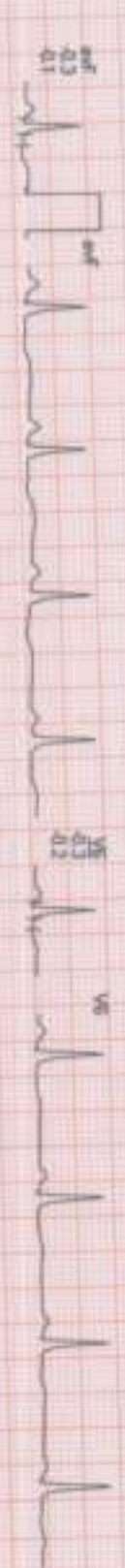
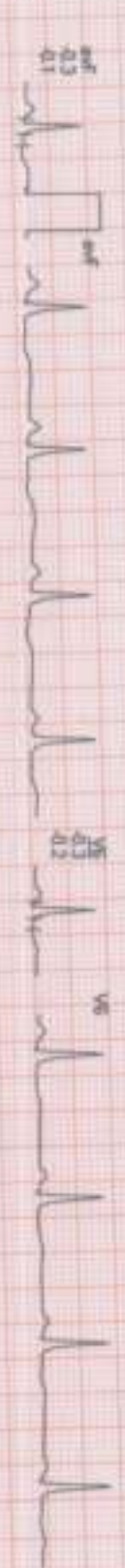
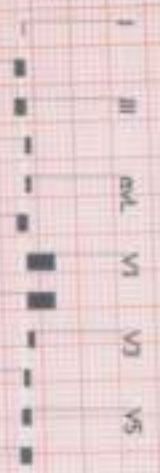
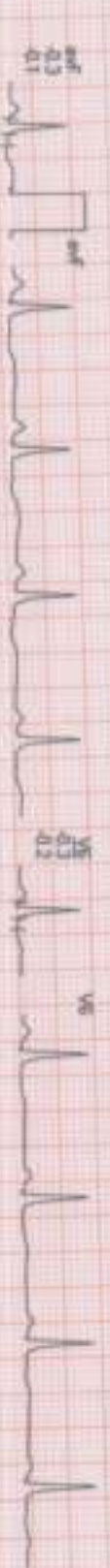
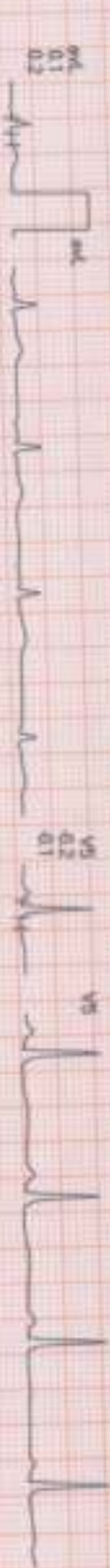
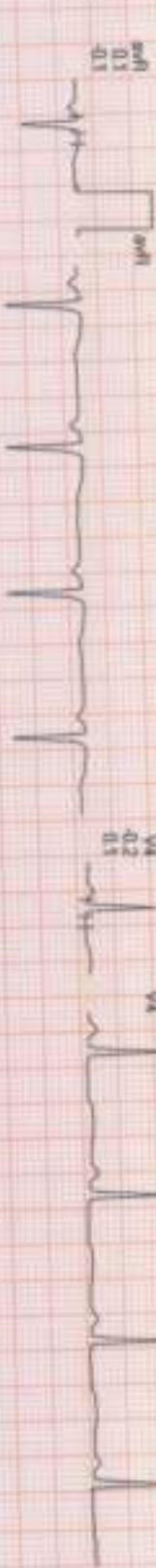
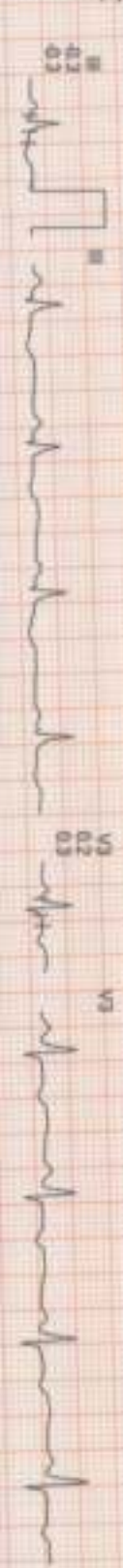
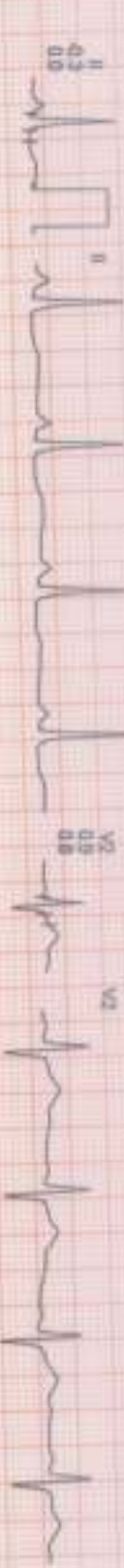
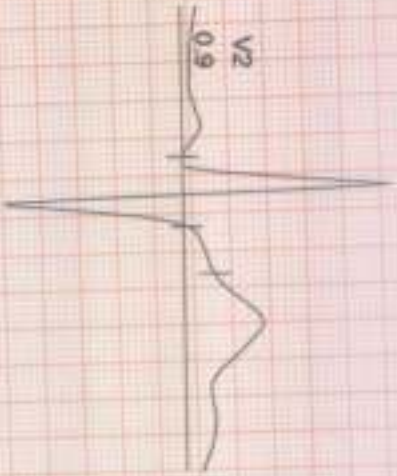
METS: 1.0/74 bpm 35% of THR. BP: 110/70 mmHg. Pwr ECG/SLC On/ Natch On/ HF 0.05 Hz/US 35 Hz

40X 60 Hz Print 1

SUPINE (00:01)



ExtTime: 00:00 0.0mVpk 0.0%
DistTime: 1.00mV



REMARKS:
I II aVR aVL V1 V2 V3 V4 V5 V6

SUBURBAN DIAGNOSTICS (THANE GB ROAD)

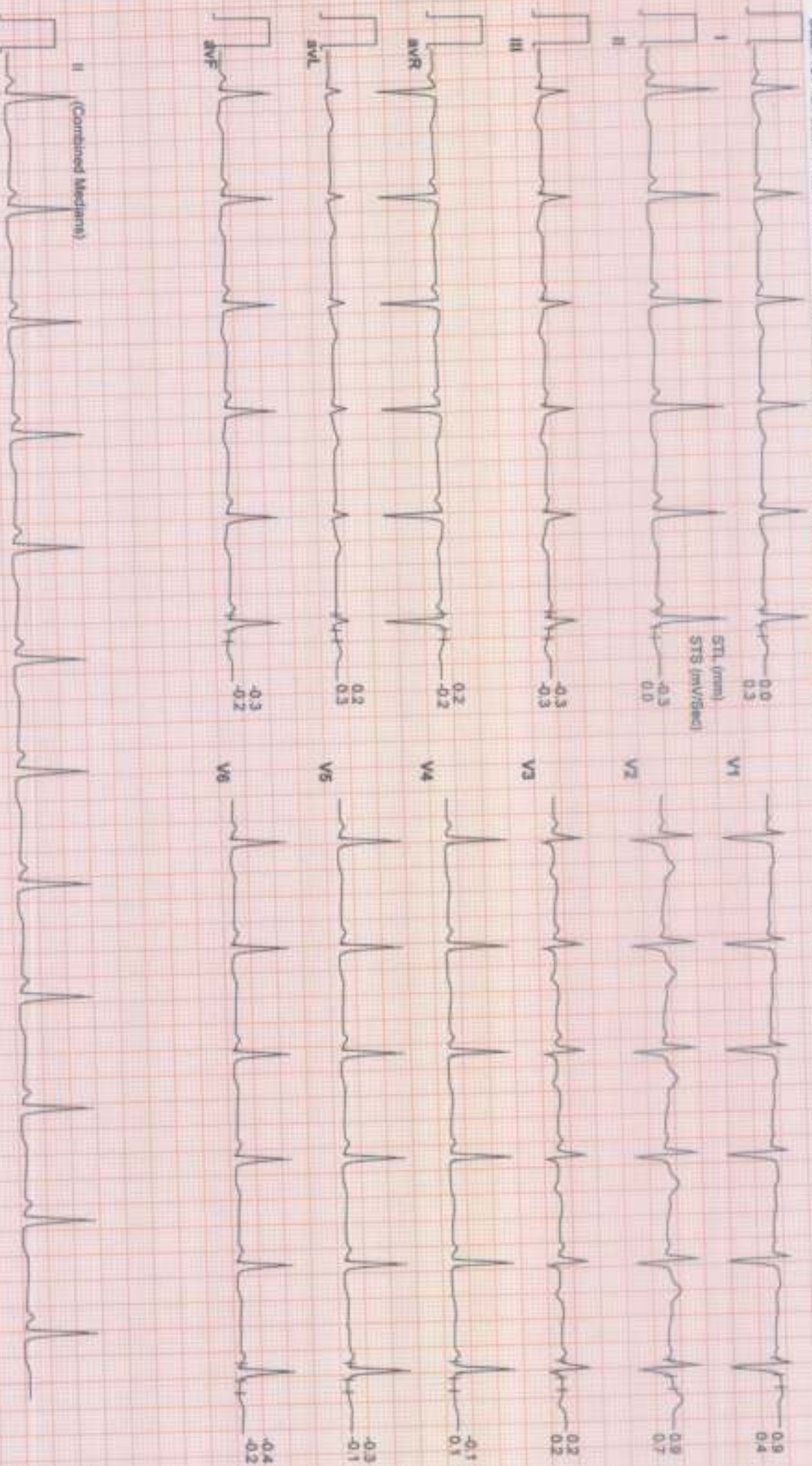
376 / LAKAVATH VASAVI / 31 Yrs / Female / 150 Cm / 53 Kg

6X2 Combine Medians + 1 Rhythm
STANDING (00:00)



Date: 18 / 12 / 2023 11:52:07 AM METB : 1.0 HR : 71 Target HR : 38% of 168 BP : 110/70 Post J @50m/Sec

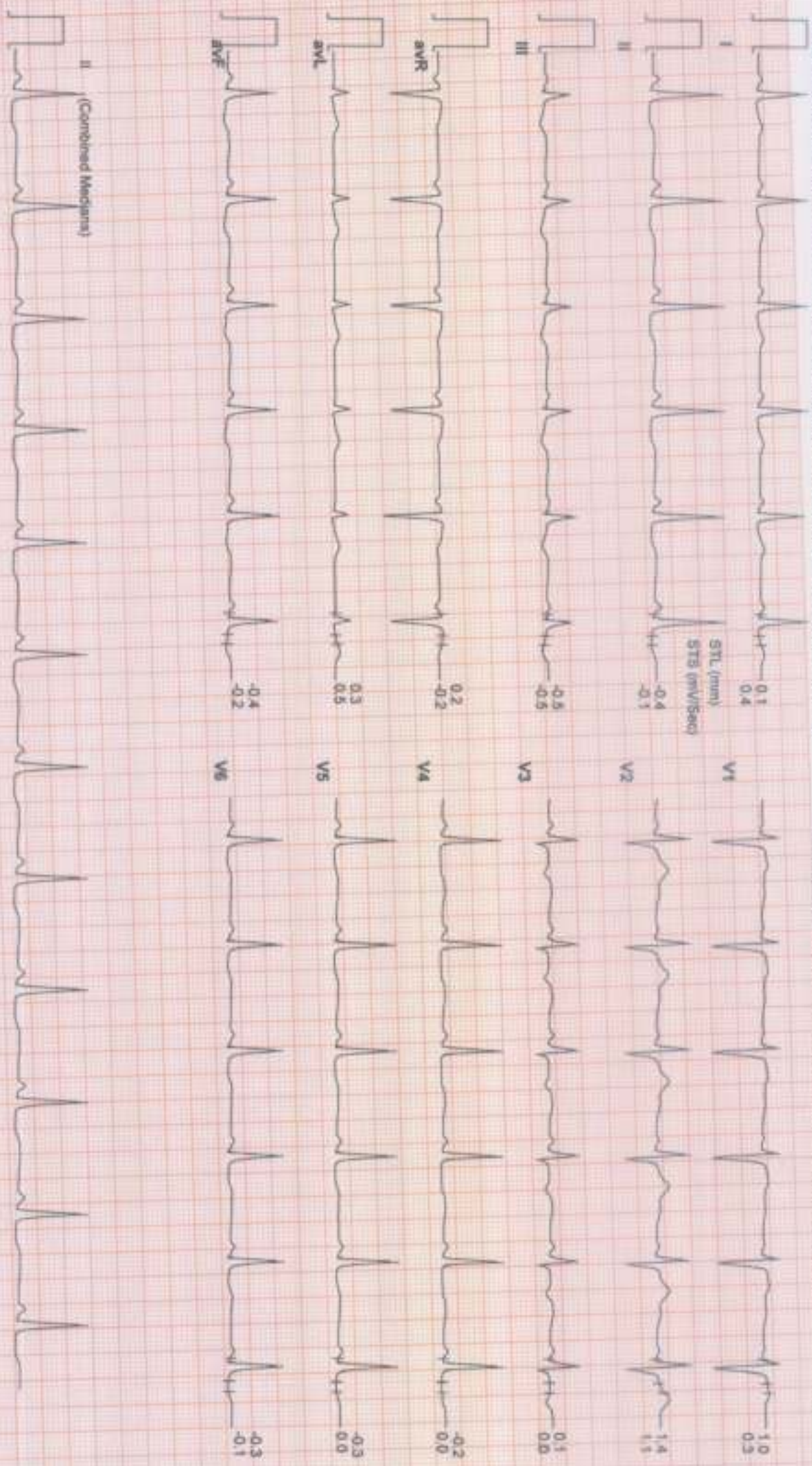
ExTime: 00:00 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec 1.0 Cm/mV





Date: 18 / 12 / 2023 11:52:07 AM METS : 1.0 HR : 74 Target HR : 20% of 188 BP : 110/70 Post J @romSec

ExTime: 00:00 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec: 1.0 Cm/mV



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

376 / LAKAVATH VASAVI / 31 Yrs / Female / 150 Cm / 53 Kg

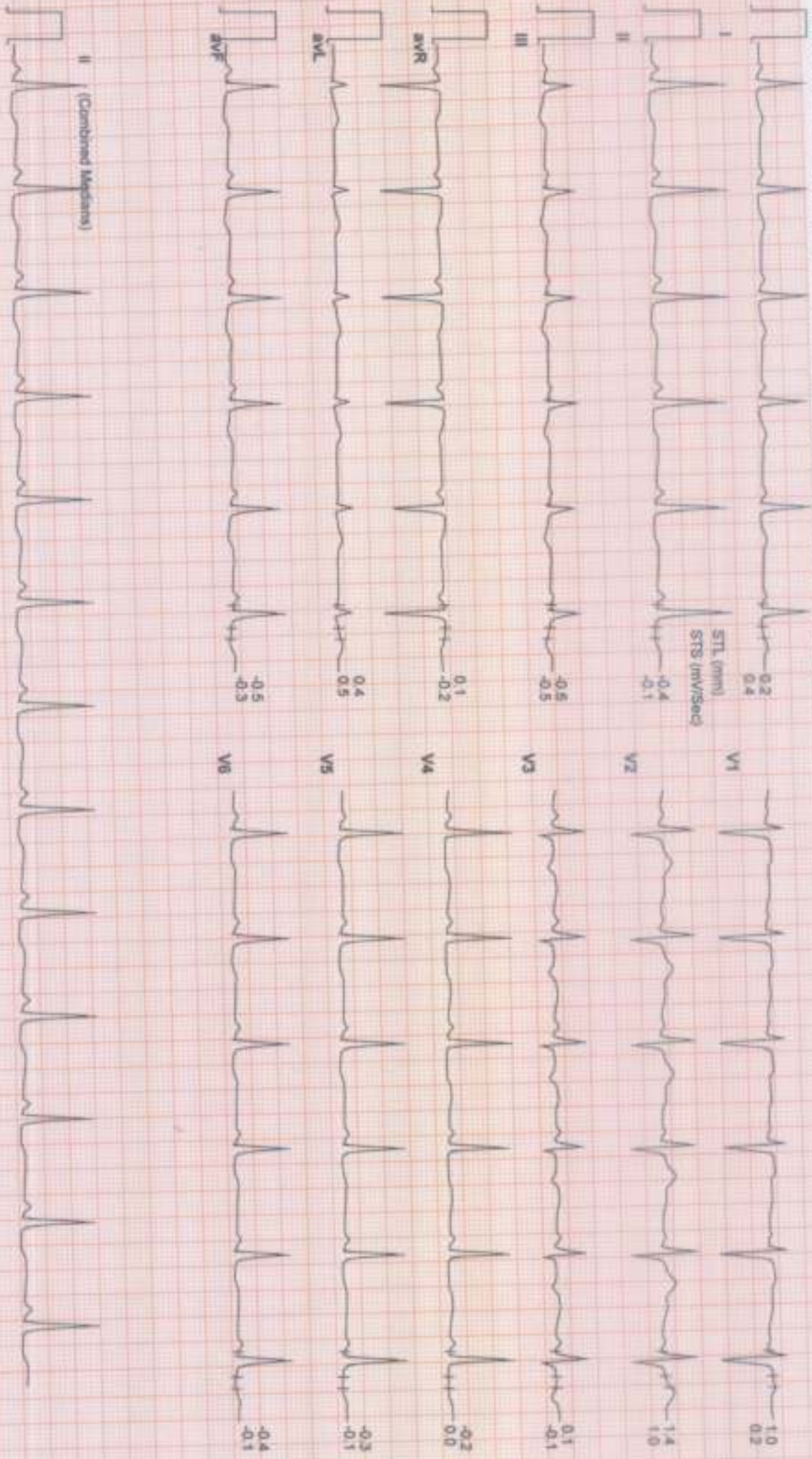
6X2 Combine Medians + 1 Rhythm

ExStit



Date: 18 / 12 / 2023 11:52:07 AM METs : 1.0 HR: 78 Target HR: 41% of 189 BP: 110/70 Post J @80b/Sec

ExTime: 00:00 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec 1.0 Cm/mV



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

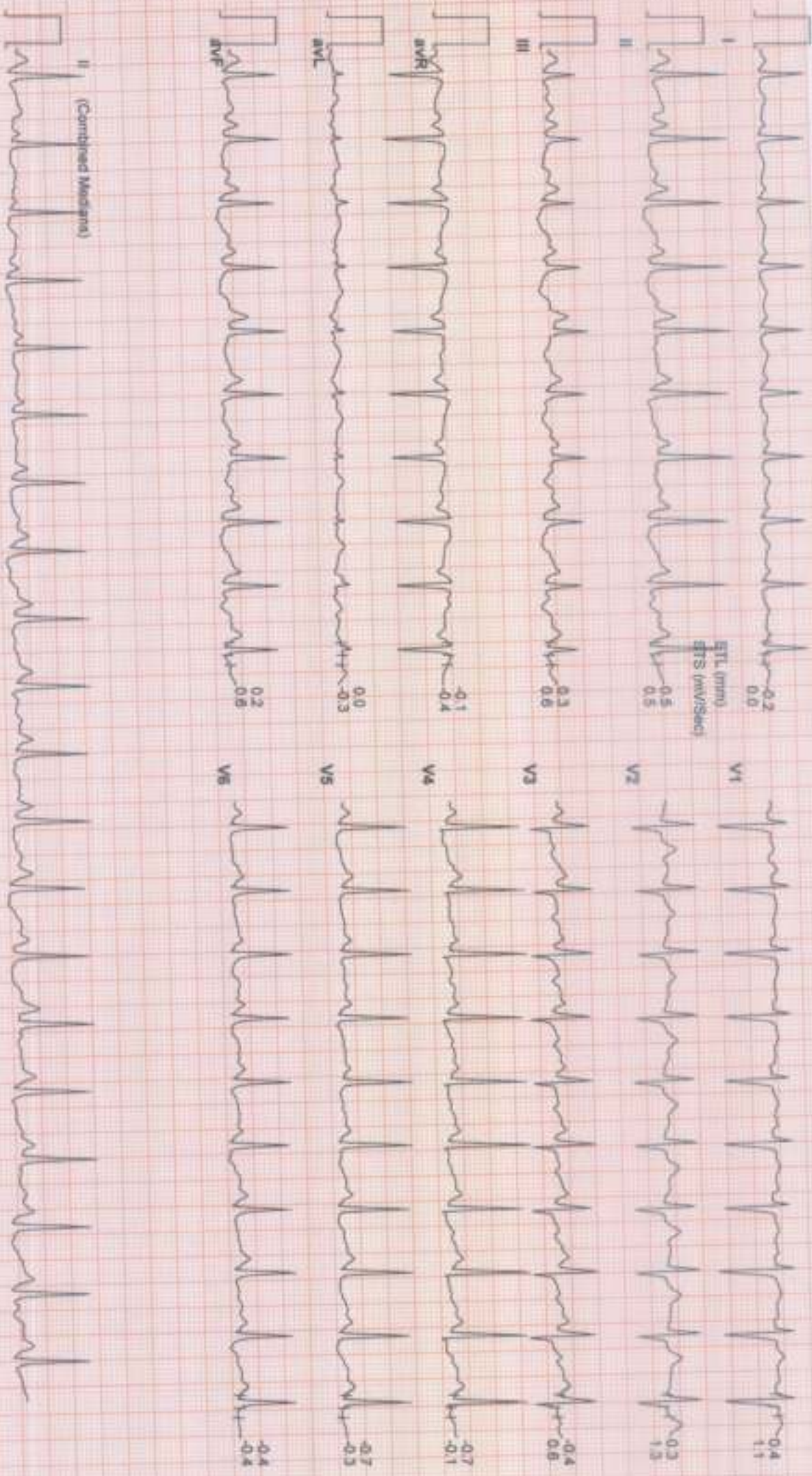
376 / LAKAVATH VASAVI / 31 Yrs / Female / 150 Cm / 53 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE : Stage 1 (03:00)



Date: 18 / 12 / 2023 11:02:07 AM METs : 4.7 HR : 120 Target HR : 63% of 166 BP : 120/70 Post J GibbonSec

ExTime: 03:00 Speed: 1.7 mph Grade : 10.00 % 25 min/Sec 1.0 Cm/min



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

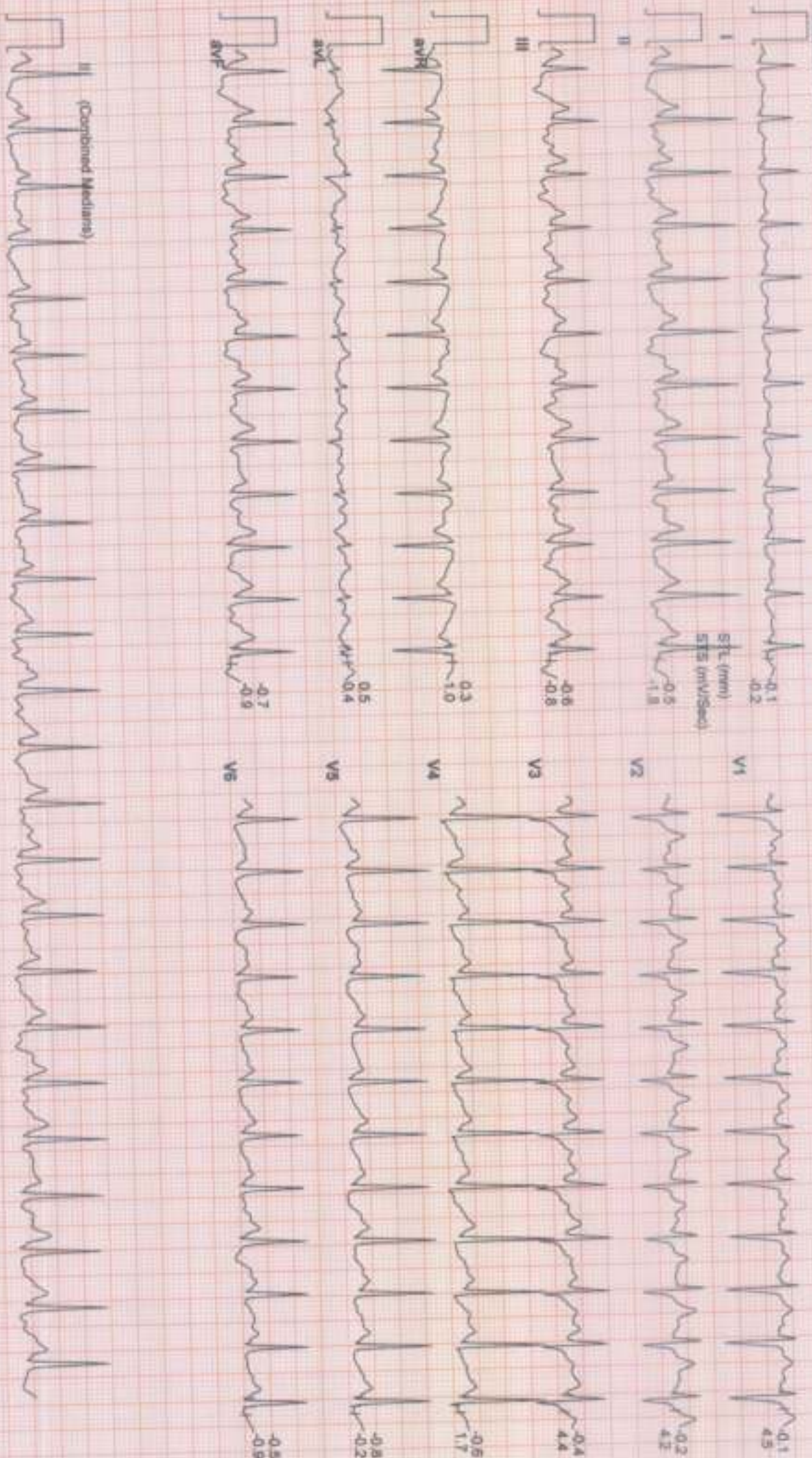
376 / LAKAVATH VASAVI / 31 Yrs / Female / 150 Cm / 53 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE : Stage 2 (03:00)



Date: 18 / 12 / 2023 11:52:07 AM METS : 7.1 HR : 148 Target HR : 77% of 159 BP : 120/60 Post J @500bpm

ExTime: 06:00 Speed: 2.5 mph Grade: 12.00 % 25 mm/Sec 1.0 Cm/mV



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

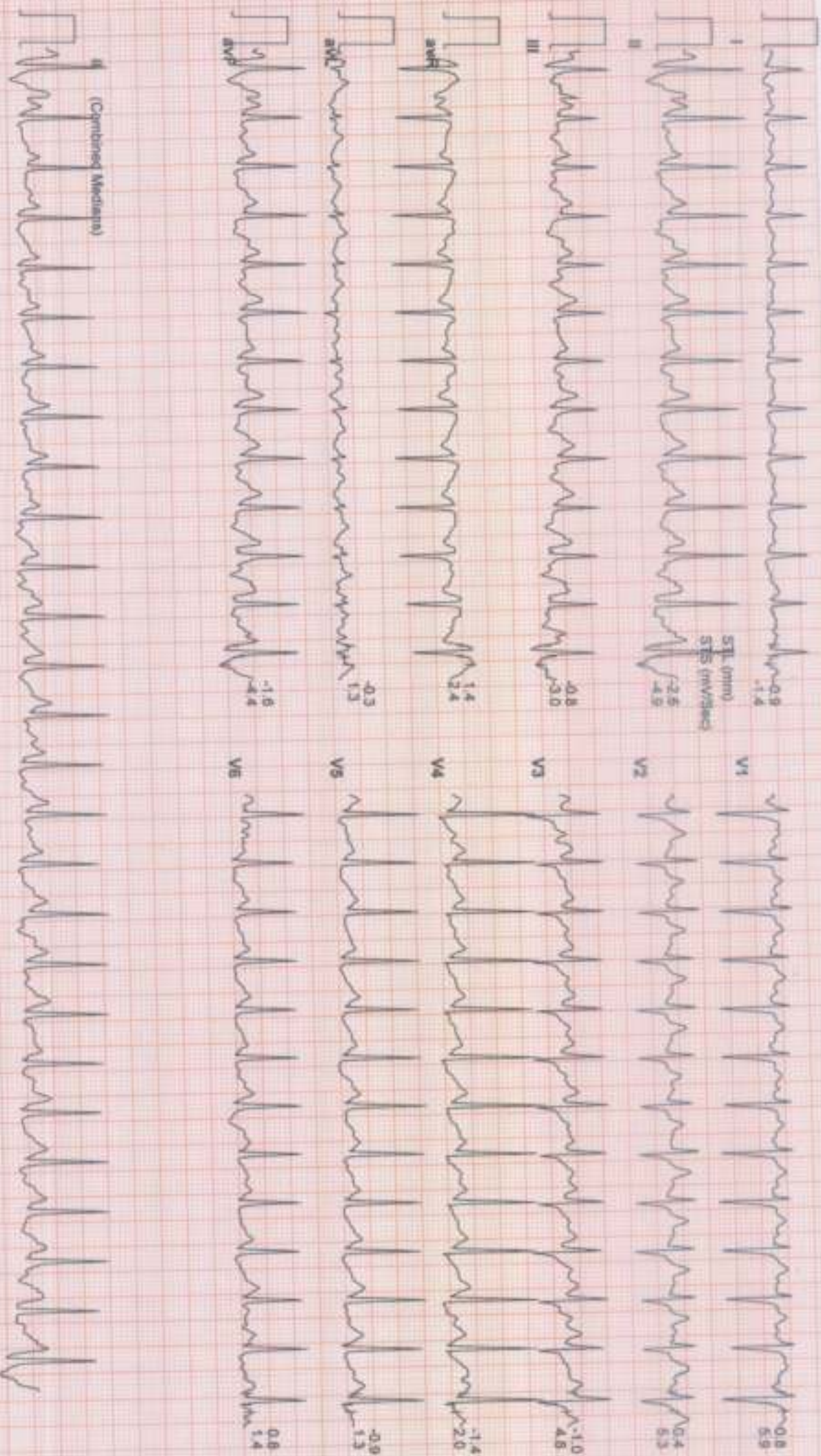
376 / LAKAVATH VASAVI / 31 Yrs / Female / 150 Cm / 53 Kg

6X2 Combine Medians + 1 Rhythm
PeakEx



Date: 18 / 12 / 2023 11:52:07 AM METN : 7.7 HR : 160 Target HR : 85% of 168 BP : 140/80 Post J @50/5Sec

ExTime: 06:35 Speed: 3.4 mph Grade : 14.00 % 25 mm/Sec: 1.0 Cm/mV



(Combined Medians)

SUBURBAN DIAGNOSTICS (THANE GB ROAD)

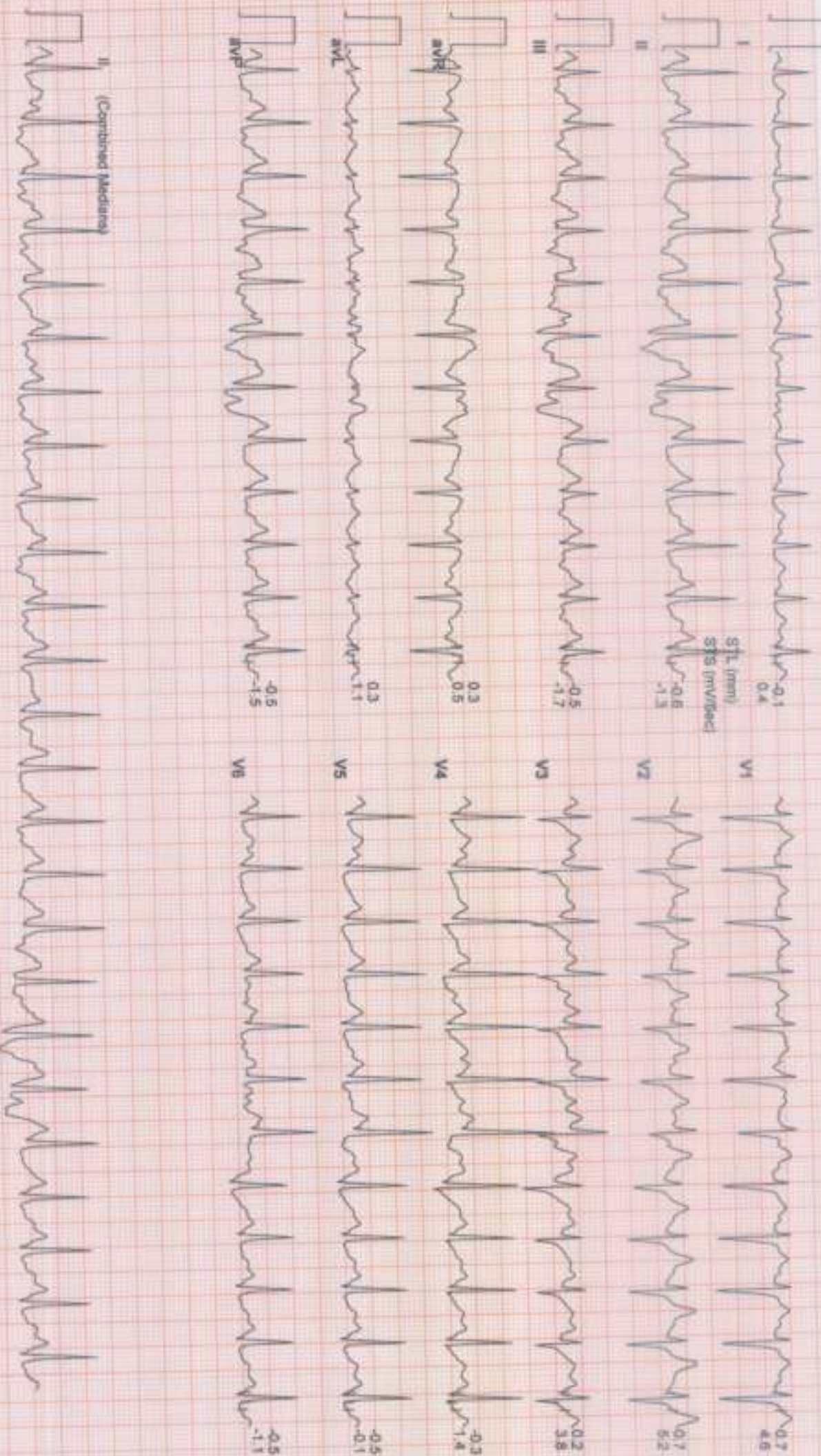
376 / LAKAVATH VASAVI / 31 Yrs / Female / 150 Cm / 53 Kg

6X2 Combine Medians + 1 Rhythm
Recovery : (01:00)



Date: 18 / 12 / 2023 11:52:07 AM METR: 1.1 HR: 148 Target HR: 78% of 169 BP: 140/80 Post J @60mSec

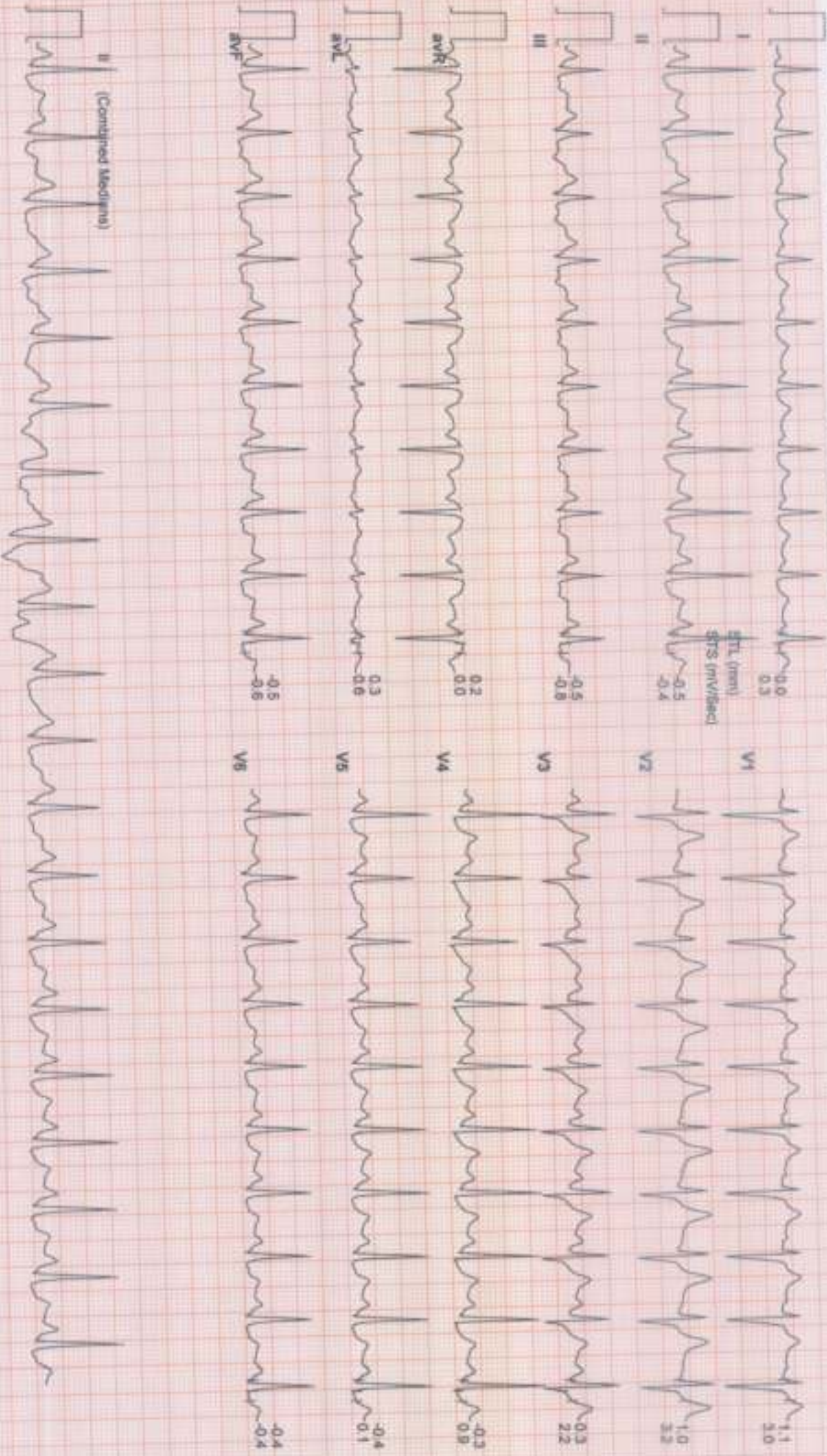
ExTime: 06:35 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec: 1.0 Cm/mV





Date: 18 / 12 / 2023 11:52:07 AM METs : 1.0 HR : 120 Target HR : 63% of 169 BP : 120/80 Post J @GanSec

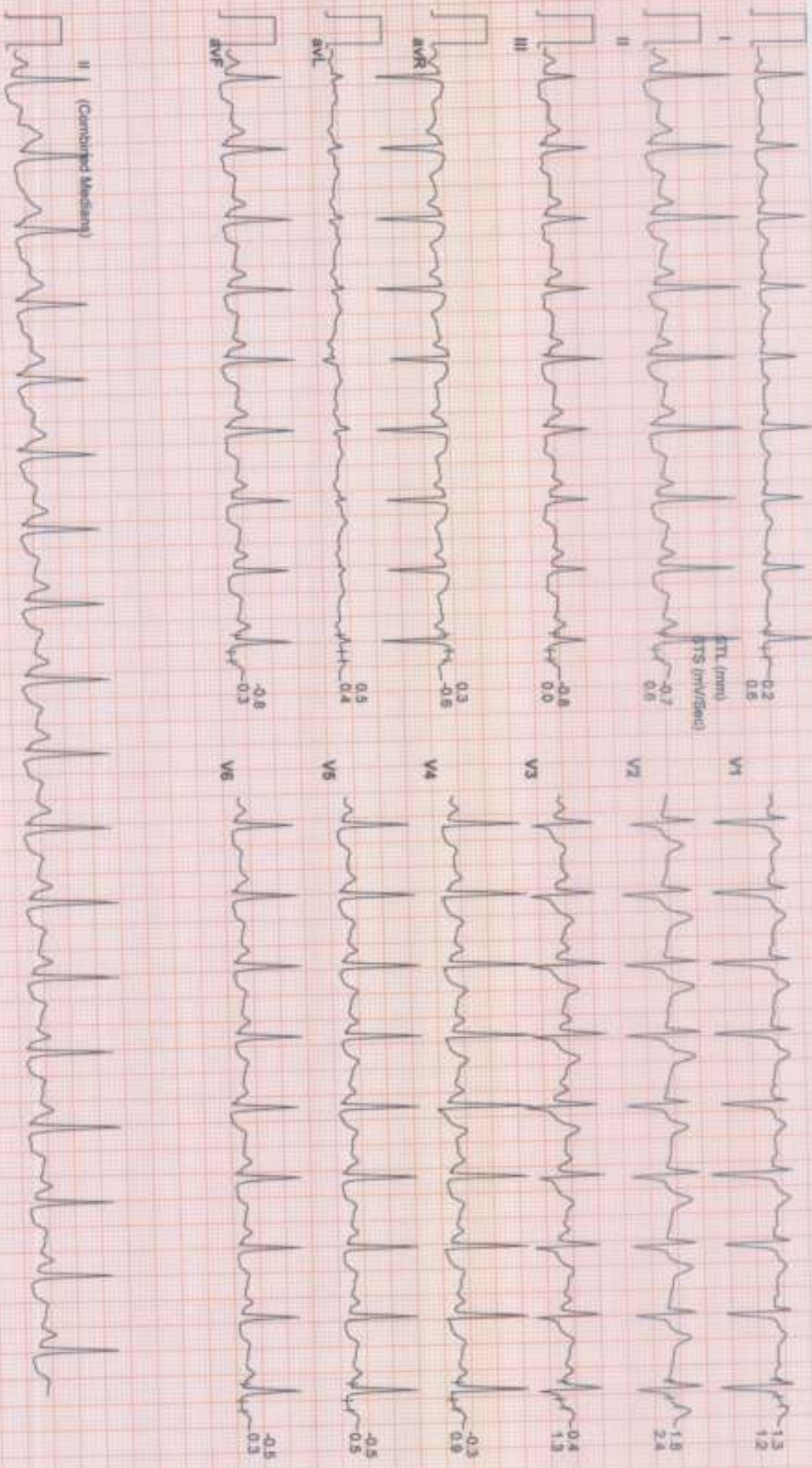
EXTime: 06:35 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec: 1.0 Cm/mV





Date: 18 / 12 / 2023 11:52:07 AM METs : 1.0 HR : 108 Target HR : 57% of 188 BP : 120/90 Post J @ 7m56s

ETime: 06:35 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec 1.0 Cm/mV





Date: 18 / 12 / 2023 11:52:07 AM METs : 1.0 HR: 98 Target HR: 52% of 168 BP : 120/80 Post J @TomSec

ExTime: 06:35 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec 1.0 Cm/IV

