

Rto - Nagpur.

Medi Wheel



Dr. Vimmi Goel  
MBBS, MD (Internal Medicine)  
Sr. Consultant Non Invasive Cardiology  
Reg. No. MMC-2014/01/0113

Name: Ms. Premendra Ramteke Date: 14/01/23  
Age: 41y Sex: (M) Weight: 81.3 kg Height: 165.1 inc BMI: 29.8  
BP: 130/80 mmHg Pulse: 67 bpm RBS: \_\_\_\_\_ mg/dl

SPO<sub>2</sub> - 98%

- FH - Mother - DM, Ca Endometrium
- obese
- no addictions

O/E  
JVP°  
Cher /  
ln  
P/A / N.

- Adv.
- S. vit D<sub>3</sub>
  - To see Dr. Pooja Padole (skin)
  - Inj Ophineuron 3cc  
1/m weekly x 5 doses

Inv.

- PMBS - 147, HbA1c - 5.3
- MCV - 113.
- HDL - 23
- Gd-II Fatty Liver.
- TMT - Hypersensitive  
BP response.

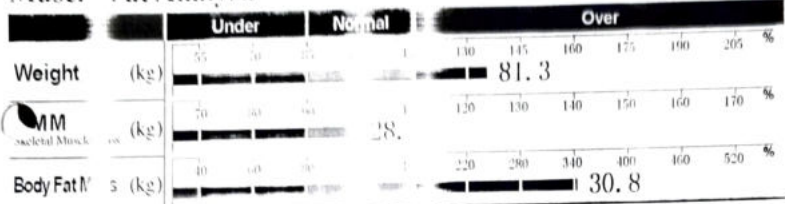
- Diet counsel
- Exercise
- weight reduction
- Rpt. FBS  
PMBS  
HbA1c } after 6 mths

ID	Height	Age	Gender	Test Date / Time
131467	165.0cm	41	Male	14.01.2023 09:28

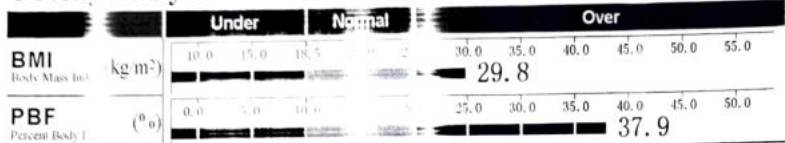
## Body Composition Analysis

Total amount of water in my body	Total Body Water (L)	37.1	(33.8~41.3)
What I need to build muscles	Protein (kg)	10.0	(9.0~11.0)
What I need for strong bones	Mineral (kg)	3.40	(3.12~3.82)
Where my excess energy is stored	Body Fat Mass (kg)	30.8	(7.2~14.4)
Sum of the above	Weight (kg)	81.3	(51.0~69.0)

## Muscle Fat Analysis



## Obesity Analysis



## Segmental Lean Analysis

Left	22.79 kg	2.96 kg
	92.5%	94.9%
	Normal	Normal
Right	23.9 kg	16.3 kg
	96.0%	428.5%
	Normal	Over
Total	8.70 kg	7.75 kg
	92.2%	89.3%
	Normal	Under

## Segmental Fat Analysis

Left	2.4 kg	2.3 kg
	439.7%	429.4%
	Over	Over
Right	16.3 kg	4.3 kg
	428.5%	276.3%
	Over	Over
Total	4.3 kg	4.3 kg
	276.3%	275.7%
	Over	Over

\* Segmental fat is estimated.

## Body Composition History

Weight (kg)	81.3
SMM (kg)	28.2
PBF (%)	37.9
Recent Total	14.01.2023 09:28

## InBody Score

53/100 Points  
 \* Total score that represents the evaluation of body composition. A normal person may score 100 points.

## Weight Control

Target Weight	60.0 kg
Weight Control	21.3 kg
Fat Control	21.8 kg
Muscle Control	+0.5 kg

## Obesity Evaluation

BMI  Normal  Under  Over  
 PBF  Normal  Slightly Over  Over

## Waist-Hip Ratio

0.99

## Visceral Fat Level

Level 15

## Research Parameters

Fat Free Mass	50.5 kg
Basal Metabolic Rate	1460 kcal (15~20)
Obesity Degree	136% (10~11)
SMI	7.9 kg/m <sup>2</sup>
Recommended calorie intake	2196 kcal

## Calorie Expenditure of Exercise

Golf	13	Gateball	1
Walking	63	Yoga	1
Badminton	81	Table Tennis	1
Tennis	44	Bicycling	1
Boxing	44	Basketball	2
Mountain Climbing	65	Jumping Rope	1
Aerobics	85	Jogging	1
Soccer	85	Swimming	2
Japanese Fencing	07	Racketball	1
Squash	407	Taekwondo	401

\* Based on your current weight  
 \* Based on 30 minute duration

## Impedance

	RA	LA	TR	RL	LL
Z(Ω) 20 kHz	294	301.4	271	216	30
100 kHz	263	271.9	242	218	93



MC-4807

**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mr. PREMENDRA RAMTEKE	<b>Age / Gender</b> : 41 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2223009629/UMR2223131467	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 14-Jan-23 12:09 pm	<b>Report Date</b> : 14-Jan-23 01:02 pm

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Post Prandial Plasma Glucose	Plasma	<u>147</u>	< 140 mg/dl	GOD/POD, Colorimetric

**Interpretation:**

Clinical Decision Value as per ADA Guidelines 2021

Diabetes Mellites If,

Fasting  $\geq$  126 mg/dl

Random/2Hrs. OGTT  $\geq$  200 mg/dl

Impaired Fasting = 100-125 mg/dl

Impaired Glucose Tolerance = 140-199 mg/dl

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

Suggested Clinical Correlation \* If necessary, Please discuss

Verified By : : 11100026

Test results related only to the item tested.

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**Dr. Anuradha Deshmukh, MBBS,MD**  
**CONSULTANT MICROBIOLOGIST**



**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mr. PREMENDRA RAMTEKE	<b>Age / Gender</b> : 41 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2223009629/UMR2223131467	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 14-Jan-23 12:48 pm	<b>Report Date</b> : 14-Jan-23 01:57 pm

**URINE SUGAR**

Parameter  
Urine Glucose

Result Values

Negative

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

Suggested Clinical Correlation \* If necessary, Please discuss

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**Dr. Anuradha Deshmukh, MBBS,MD**  
**CONSULTANT MICROBIOLOGIST**



MC-4807

**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mr. PREMENDRA RAMTEKE	<b>Age /Gender</b> : 41 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2223009629/UMR2223131467	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 14-Jan-23 08:46 am	<b>Report Date</b> : 14-Jan-23 10:27 am

**HAEMOGRAM**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Haemoglobin	Blood	14.2 ✓	13.0 - 17.0 gm%	Photometric
Haematocrit(PCV)		42.2	40.0 - 50.0 Vol%	Calculated
RBC Count		<b>3.72</b>	4.5 - 5.5 Millions/cumm	Photometric
Mean Cell Volume (MCV)		<b>113</b>	83 - 101 fl	Calculated
Mean Cell Haemoglobin (MCH)		<b>38.2</b>	27 - 32 pg	Calculated
Mean Cell Haemoglobin Concentration (MCHC)		33.7	31.5 - 35.0 g/l	Calculated
RDW		13.9 ✓	11.5 - 14.0 %	Calculated
Platelet count		260 ✓	150 - 450 10 <sup>3</sup> /cumm	Impedance
WBC Count		8500 ✓	4000 - 11000 cells/cumm	Impedance

**DIFFERENTIAL COUNT**

Neutrophils	59.5	50 - 70 %	Flow Cytometry/Light microscopy
Lymphocytes	34.3	20 - 40 %	Flow Cytometry/Light microscopy
Eosinophils	3.2	1 - 6 %	Flow Cytometry/Light microscopy
Monocytes	3.0	2 - 10 %	Flow Cytometry/Light microscopy
Basophils	0.0	0 - 1 %	Flow Cytometry/Light microscopy
Large Immature cells	0.0		Flowcytometry



MC-4807

**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mr. PREMENDRA RAMTEKE	<b>Age /Gender</b> : 41 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2223009629/UMR2223131467	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 14-Jan-23 08:46 am	<b>Report Date</b> : 14-Jan-23 10:27 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Biological Reference</u>	<u>Method</u>
Absolute Neutrophil Count		5057.5	2000 - 7000 /cumm	Calculated
Absolute Lymphocyte Count		2915.5	1000 - 4800 /cumm	Calculated
Absolute Eosinophil Count		272	20 - 500 /cumm	Calculated
Absolute Monocyte Count		255	200 - 1000 /cumm	Calculated
Absolute Basophil Count		0	0 - 100 /cumm	Calculated
<b><u>PERIPHERAL SMEAR</u></b>				
Macrocytosis		Macrocytosis++(11 %-20%)		
Anisocytosis		Anisocytosis +(Few)		
Oval Macrocytes		+		Microscopy
WBC		As Above		
Platelets		Adequate		
<b>E S R</b>		11	0 - 15 mm/hr	Automated Westergren's Method
*** End Of Report ***				

Suggested Clinical Correlation \* If necessary, Please discuss

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**Dr. VAIDEHEE NAIK, MBBS,MD**  
**CONSULTANT PATHOLOGIST**


**CLINICAL DIAGNOSTIC LABORATORY**
**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> : Mr. PREMENDRA RAMTEKE	<b>Age / Gender</b> : 41 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2223009629/UMR2223131467	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 14-Jan-23 08:43 am	<b>Report Date</b> : 14-Jan-23 10:50 am

Parameter	Specimen	Results	Biological Reference	Method
Fasting Plasma Glucose	Plasma	99	< 100 mg/dl	GOD/POD,Colorimetric
<b>GLYCOSYLATED HAEMOGLOBIN (HbA1c)</b>				
HbA1c		5.1 ✓	Non-Diabetic : <= 5.6 % Pre-Diabetic : 5.7 - 6.4 % Diabetic : >= 6.5 %	HPLC

**LIPID PROFILE**

Total Cholesterol	97	< 200 mg/dl	
Triglycerides	138	< 150 mg/dl	
HDL Cholesterol Direct	<u>23</u>	> 40 mg/dl	
LDL Cholesterol Direct	52.69	< 100 mg/dl	Enzymatic
VLDL Cholesterol	28	< 30 mg/dl	
Tot Chol/HDL Ratio	4	3 - 5	

**RFT**

Blood Urea	11	19.0 - 43.0 mg/dl	Urease with indicator dye
Creatinine	0.66	0.66 - 1.25 mg/dl	Enzymatic ( creatinine amidohydrolase)
GFR	120.8		Calculation by CKD-EPI 2021
Sodium	143	136 - 145 mmol/L	Direct ion selective electrode
Potassium	4.41	3.5 - 5.1 mmol/L	Direct ion selective electrode

**LIVER FUNCTION TEST(LFT)**

Total Bilirubin	0.96	0.2 - 1.3 mg/dl	Azobilirubin/Dyphylline
Direct Bilirubin	0.23	0.1 - 0.3 mg/dl	Calculated
Indirect Bilirubin	0.73	0.1 - 1.1 mg/dl	Dual wavelength spectrophotometric
Alkaline Phosphatase	65	38 - 126 U/L	pNPP/AMP buffer
SGPT/ALT	26	10 - 40 U/L	Kinetic with pyridoxal 5 phosphate
SGOT/AST	26	15 - 40 U/L	Kinetic with pyridoxal 5 phosphate
Serum Total Protein	7.23	6.3 - 8.2 gm/dl	Biuret (Alkaline cupric sulphate)
Albumin Serum	4.42	3.5 - 5.0 gm/dl	Bromocresol green Dye Binding
Globulin	2.81	2.0 - 4.0 gm/	Calculated
A/G Ratio	1.57		

**THYROID PROFILE**

T3	1.63	0.55 - 1.70 ng/ml	Enhanced Chemiluminescence
Free T4	1.24	0.80 - 1.70 ng/dl	Enhanced Chemiluminescence
TSH	4.24	0.50 - 4.80 uIU/ml	Enhanced chemiluminescence

 SPANV Medisearch Lifesciences Private Limited  
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 CIN: 171999MH2018PTC303510


**CLINICAL DIAGNOSTIC LABORATORY**
**DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mr. PREMENDRA RAMTEKE	<b>Age /Gender</b> : 41 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2223009629/UMR2223131467	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 14-Jan-23 08:47 am	<b>Report Date</b> : 14-Jan-23 10:49 am

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Method</u>
<b>URINE MICROSCOPY</b>			
<b>PHYSICAL EXAMINATION</b>			
<b>Volume</b>	Urine	30 ml	
<b>Colour.</b>		yellow	
<b>Appearance</b>		Clear	
<b>CHEMICAL EXAMINATION</b>			
<b>Reaction (pH)</b>	Urine	5	Indicators
<b>Specific gravity</b>		1.010	ion concentration
<b>Urine Protein</b>		Negative	protein error of pH indicator
<b>Sugar</b>		Negative	GOD/POD
<b>Bilirubin</b>		Negative	Diazonium
<b>Ketone Bodies</b>		Negative	Legal's est Principle
<b>Nitrate</b>		Negative	
<b>Urobilinogen</b>		Normal	Ehrlich's Reaction
<b>MICROSCOPIC EXAMINATION</b>			
<b>Epithelial Cells</b>	Urine	0-1	Manual
<b>R.B.C.</b>		Absent	Manual
<b>Pus Cells</b>		0-1	Manual
<b>Casts</b>		Absent	Manual
<b>Crystals</b>		Absent	Manual
<b>USF(URINE SUGAR FASTING)</b>			
<b>Urine Glucose</b>	Urine	Negative	GOD/POD

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

Suggested Clinical Correlation \* If necessary, Please discuss

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**Dr. VAIDEHEE NAIK, MBBS,MD**

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CIN: U74999MH2018PTC303510





MC-4807

**CLINICAL DIAGNOSTIC LABORATORY**  
**DEPARTMENT OF PATHOLOGY**

<b>Patient Name</b> : Mr. PREMENDRA RAMTEKE	<b>Age / Gender</b> : 41 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2223009629/UMR2223131467	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 14-Jan-23 11:16 am	<b>Report Date</b> : 14-Jan-23 11:49 am

**STOOL ROUTINE EXAMINATION**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	<u>Normal Ranges</u>	<u>Method</u>
<b><u>PHYSICAL EXAMINATION</u></b>				
Colour.	Stool	Brownish		
Consistency		Semi solid	Formed	Manual
Mucus		Absent	Absent	Manual
Blood (Gross)		Absent		Manual
<b><u>CHEMICAL EXAMINATION</u></b>				
Reaction. (pH)		Alkaline	Variable	Manual
Parasite/ part		Absent	Absent	Manual
<b><u>MICROSCOPIC EXAMINATION</u></b>				
Leucocytes (Pus cells)		Nil		Microscopy
Erythrocytes (RBC)		Nil	0 - 3 /hpf	Manual
Epithelial Cells		Absent	0 - 4 /hpf	Manual
Fat globules		Absent	Absent	Light microscopy
Vegatable fiber		Absent	Absent	Light microscopy
Cysts		Absent	Absent	Microscopy
Ova		Absent	Absent	Microscopy
Others		Nil		Microscopy



MC-4807

**CLINICAL DIAGNOSTIC LABORATORY**

**DEPARTMENT OF PATHOLOGY**

**Patient Name** : Mr. PREMENDRA RAMTEKE      **Age /Gender** : 41 Y(s)/Male  
**Bill No/ UMR No** : BIL2223009629/UMR2223131467      **Referred By** : Dr. Vimmi Goel MBBS,MD  
**Received Dt** : 14-Jan-23 11:16 am      **Report Date** : 14-Jan-23 11:49 am

**Parameter**      **Specimen**      **Results**      **Normal Ranges**      **Method**

**NOTE**

Interpretation :  
The presence of intestinal protozoa (trophozoites or cysts) or helminth eggs can be observed directly with a light microscope, and it indicates parasite infection of intestinal tract. Presence of leukocytes in stool is suggestive of Infection &/or Inflammation.  
Presence of RBCs in stool is suggestive of bleeding in lower Intestinal tract.  
\*\*\* End Of Report \*\*\*

Suggested Clinical Correlation \* If necessary, Please discuss

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**Dr. Anuradha Deshmukh, MBBS,MD**  
**CONSULTANT MICROBIOLOGIST**



MC-4807

**CLINICAL DIAGNOSTIC LABORATORY  
DEPARTMENT OF IMMUNO HAEMATOLOGY**

<b>Patient Name</b> : Mr. PREMENDRA RAMTEKE	<b>Age /Gender</b> : 41 Y(s)/Male
<b>Bill No/ UMR No</b> : BIL2223009629/UMR2223131467	<b>Referred By</b> : Dr. Vimmi Goel MBBS,MD
<b>Received Dt</b> : 14-Jan-23 08:46 am	<b>Report Date</b> : 14-Jan-23 12:13 pm

**BLOOD GROUPING AND RH**

<u>Parameter</u>	<u>Specimen</u>	<u>Results</u>	
<b>BLOOD GROUP.</b>	EDTA Whole Blood & Plasma/ Serum	" A "	Gel Card Method
<b>Rh (D) Typing.</b>		" Positive "(+Ve) *** End Of Report ***	

Suggested Clinical Correlation \* If necessary, Please discuss

Verified By : : 11100511

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**Dr. GAURI HARDAS, MBBS,MD  
CONSULTANT PATHOLOGIST**

NAME OF PATIENT:	PREMENDRA RAMTEKE .	AGE & SEX:	41Y/M
REF BY:	DR. VIMMI GOEL	DATE:	10/01/2023

**X- RAY CHEST (PA VIEW)**

Both the lung fields are clear.

Heart and Aorta are normal.

Both hilar shadows appear normal.

Diaphragm domes and CP angles are clear.

Bony cage is normal.

**IMPRESSION -**

**No pleuro-parenchymal abnormality seen.**

  
**Dr.R.R. KHANDELWAL**  
**SENIOR CONSULTANT**  
**MD RADIO DIAGNOSIS [MMC-55870]**

NAME OF PATIENT:	MR. PREMENDRA RAMTEKE	AGE & SEX:	41Y/M
UMR NO:	31467		
REF BY:	DR. VIMMI GOEL	DATE:	14/01/2023

### USG WHOLE ABDOMEN

LIVER is normal in size (15 cm) shape and **shows moderate increase in echogenicity**.  
No evidence of any focal lesion seen. Intrahepatic biliary radicals are not dilated.  
PORTAL VEIN and CBD are normal in course and caliber.

GALL BLADDER is physiologically distended. No stones or sludge seen within it.  
Wall thickness is within normal limits.

PANCREAS is normal in shape, size and echotexture.

**SPLEEN is mildly enlarged in size( 13.9 cm)**. No focal lesion seen.

Right kidney measures – 9.4 x 4.0 cm. Left kidney measures – 9.4 x 4.3 cm  
Both KIDNEYS are normal in shape, size and echotexture.  
No evidence of calculus or hydronephrosis seen.  
URETERS are not dilated.

BLADDER is partially distended. No calculus or mass lesion seen.

Prostate is normal in size, shape and echotexture.

There is no free fluid or abdominal lymphadenopathy seen.

#### **IMPRESSION:**

- Grade II fatty liver.
- Mild splenomegaly.

**Suggest clinical correlation / further evaluation.**



**DR. MILI PARIKH**  
**MD, DNB (RADIOLOGIST)**  
**REG NO. 2017083895**

Kingsway Hospitals  
44 Kingsway, Mohan Nagar,  
Near Kasturchand Park, Nagpur

Station  
Telephone:

## EXERCISE STRESS TEST REPORT

Patient Name: Mr. Premendra, Ramteke  
Patient ID: 131467  
Height:  
Weight:  
Study Date: 14.01.2023  
Test Type: Treadmill Stress Test  
Protocol: BRUCE

DOB: 24.06.1981  
Age: 41yrs  
Gender: Male  
Race: Indian  
Referring Physician: -- *mediwheel HCU*  
Attending Physician: Dr. Vimmi Goel  
Technician: --

### Medications:

--

### Medical History:

NIL

### Reason for Exercise Test:

Screening for CAD

### Exercise Test Summary:

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
● ETEST	SUPINE	00:06	0.00	0.00	75	120/80	
	HYPERV.	00:01	0.00	0.00	75		
	WARM-UP	00:05	0.00	0.00	76		
EXERCISE	STAGE 1	03:00	1.70	10.00	127	120/80	
	STAGE 2	03:00	2.50	12.00	146	180/90	
	STAGE 3	01:41	3.40	14.00	169		
RECOVERY		01:00	0.00	0.00	142	200/100	
		02:00	0.00	0.00	107	160/80	
		00:22	0.00	0.00	105		

The patient exercised according to the BRUCE for 7:41 min:s, achieving a work level of Max. METS: 10.10. The resting heart rate of 74 bpm rose to a maximal heart rate of 169 bpm. This value represents 94% of the maximal, age-predicted heart rate. The resting blood pressure of 120/80 mmHg, rose to a maximum blood pressure of 200/100 mmHg. The exercise test was stopped due to Fatigue.

### Interpretation:

Summary: Resting ECG: normal.

Functional Capacity: normal.

HR Response to Exercise: appropriate.

BP Response to Exercise: normal resting BP - exaggerated response.

Chest Pain: none.

Arrhythmias: none.

ST Changes: none.

Overall impression: Normal stress test.

### Conclusions:

TMT is negative for inducible ischemia.

Hypertensive response.

Physical deconditioning noted.

To be correlated clinically.

  
Dr. VIMMI GOEL  
MBBS, MD  
Sr. Consultant-Non Invasive Cardiology  
Reg.No.: 2014/01/0113

41 Years

MR. PREMENDRA RAMTEKE

Male

14-Jan-23 9:01:09 AM

KIMS-KINGSWAY HOSPITALS

PBC DEPT.

Rate 68 . Sinus rhythm.....normal P axis, V-rate 50- 99  
 . Borderline T abnormalities, inferior leads.....T flat/neg, II III aVF

PR 122  
 QRSD 75  
 QT 404  
 QTc 430

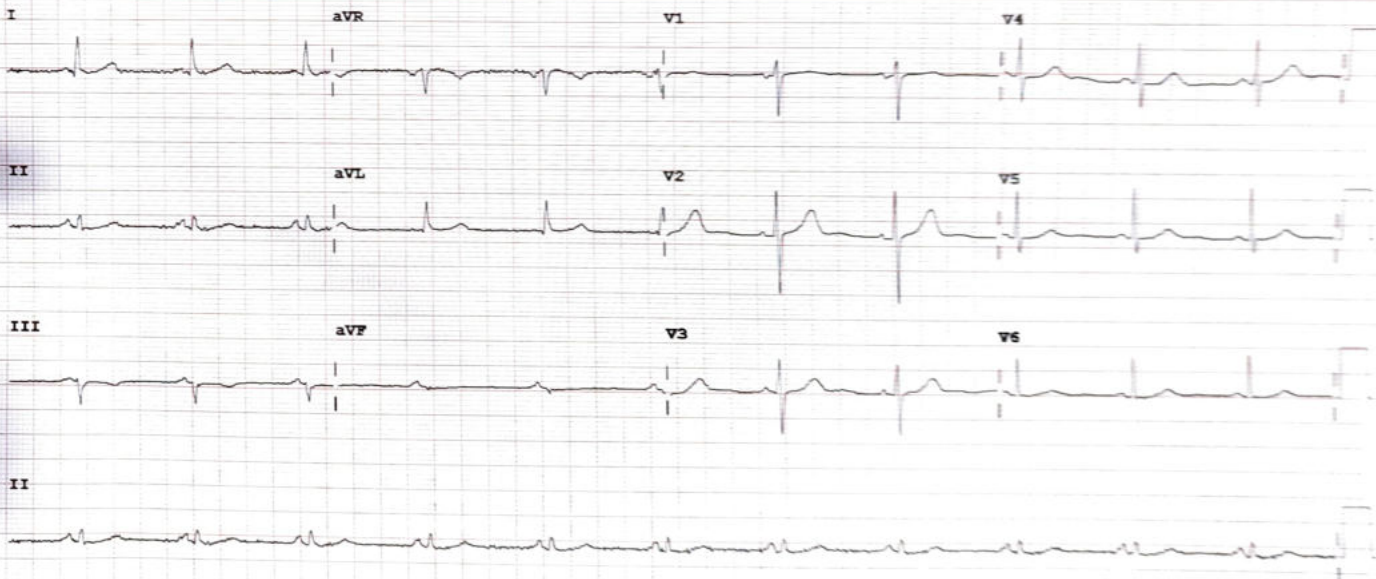
--AXIS--

P 26  
 QRS -6  
 T 4

- BORDERLINE ECG -

12 Lead; Standard Placement

Unconfirmed Diagnosis



Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 50- 0.50-150 Hz W 100B CL P?