



CID : 2309822065
Name : MRS.RASHI SHARMA
Age / Gender : 39 Years / Female
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

Collected : 08-Apr-2023 / 10:03
Reported : 08-Apr-2023 / 15:10

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

CBC (Complete Blood Count), Blood

| <u>PARAMETER</u> | <u>RESULTS</u> | <u>BIOLOGICAL REF RANGE</u> | <u>METHOD</u> |
|---|----------------|-----------------------------|--------------------|
| <u>RBC PARAMETERS</u> | | | |
| Haemoglobin | 11.9 | 12.0-15.0 g/dL | Spectrophotometric |
| RBC | 4.97 | 3.8-4.8 mil/cmm | Elect. Impedance |
| PCV | 37.4 | 36-46 % | Measured |
| MCV | 75 | 80-100 fl | Calculated |
| MCH | 24.0 | 27-32 pg | Calculated |
| MCHC | 31.9 | 31.5-34.5 g/dL | Calculated |
| RDW | 15.3 | 11.6-14.0 % | Calculated |
| <u>WBC PARAMETERS</u> | | | |
| WBC Total Count | 5240 | 4000-10000 /cmm | Elect. Impedance |
| <u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u> | | | |
| Lymphocytes | 38.4 | 20-40 % | |
| Absolute Lymphocytes | 2012.2 | 1000-3000 /cmm | Calculated |
| Monocytes | 6.1 | 2-10 % | |
| Absolute Monocytes | 319.6 | 200-1000 /cmm | Calculated |
| Neutrophils | 53.0 | 40-80 % | |
| Absolute Neutrophils | 2777.2 | 2000-7000 /cmm | Calculated |
| Eosinophils | 2.0 | 1-6 % | |
| Absolute Eosinophils | 104.8 | 20-500 /cmm | Calculated |
| Basophils | 0.5 | 0.1-2 % | |
| Absolute Basophils | 26.2 | 20-100 /cmm | Calculated |
| Immature Leukocytes | - | | |
| WBC Differential Count by Absorbance & Impedance method/Microscopy. | | | |
| <u>PLATELET PARAMETERS</u> | | | |
| Platelet Count | 327000 | 150000-400000 /cmm | Elect. Impedance |
| MPV | 7.4 | 6-11 fl | Calculated |
| PDW | 11.8 | 11-18 % | Calculated |

RBC MORPHOLOGY



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| | |
|----------------------|------|
| Hypochromia | Mild |
| Microcytosis | Mild |
| Macrocytosis | - |
| Anisocytosis | - |
| Poikilocytosis | - |
| Polychromasia | - |
| Target Cells | - |
| Basophilic Stippling | - |
| Normoblasts | - |
| Others | - |
| WBC MORPHOLOGY | - |
| PLATELET MORPHOLOGY | - |
| COMMENT | - |

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR 5 2-20 mm at 1 hr. Sedimentation

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***

Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

| <u>PARAMETER</u> | <u>RESULTS</u> | <u>BIOLOGICAL REF RANGE</u> | <u>METHOD</u> |
|--|----------------|---|--------------------|
| GLUCOSE (SUGAR) FASTING, Fluoride Plasma | 91.6 | Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl | Hexokinase |
| GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R | 135.4 | Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl | Hexokinase |
| BILIRUBIN (TOTAL), Serum | 0.36 | 0.3-1.2 mg/dl | Vanadate oxidation |
| BILIRUBIN (DIRECT), Serum | 0.13 | 0-0.3 mg/dl | Vanadate oxidation |
| BILIRUBIN (INDIRECT), Serum | 0.23 | <1.2 mg/dl | Calculated |
| TOTAL PROTEINS, Serum | 6.9 | 5.7-8.2 g/dL | Biuret |
| ALBUMIN, Serum | 4.2 | 3.2-4.8 g/dL | BCG |
| GLOBULIN, Serum | 2.7 | 2.3-3.5 g/dL | Calculated |
| A/G RATIO, Serum | 1.6 | 1 - 2 | Calculated |
| SGOT (AST), Serum | 16.9 | <34 U/L | Modified IFCC |
| SGPT (ALT), Serum | 13.0 | 10-49 U/L | Modified IFCC |
| GAMMA GT, Serum | 10.2 | <38 U/L | Modified IFCC |
| ALKALINE PHOSPHATASE, Serum | 63.7 | 46-116 U/L | Modified IFCC |
| BLOOD UREA, Serum | 21.1 | 19.29-49.28 mg/dl | Calculated |
| BUN, Serum | 9.9 | 9.0-23.0 mg/dl | Urease with GLDH |
| CREATININE, Serum | 0.50 | 0.50-0.80 mg/dl | Enzymatic |



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| | | | |
|---|--------|--------------------|---------------------|
| eGFR, Serum | 146 | >60 ml/min/1.73sqm | Calculated |
| Note: eGFR estimation is calculated using MDRD (Modification of diet in renal disease study group) equation | | | |
| URIC ACID, Serum | 4.1 | 3.1-7.8 mg/dl | Uricase/ Peroxidase |
| Urine Sugar (Fasting) | Absent | Absent | |
| Urine Ketones (Fasting) | Absent | Absent | |
| Urine Sugar (PP) | Absent | Absent | |
| Urine Ketones (PP) | Absent | Absent | |

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West
*** End Of Report ***

Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist





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

| <u>PARAMETER</u> | <u>RESULTS</u> | <u>BIOLOGICAL REF RANGE</u> | <u>METHOD</u> |
|---|----------------|--|---------------|
| Glycosylated Hemoglobin (HbA1c), EDTA WB - CC | 5.9 | Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 % | HPLC |
| Estimated Average Glucose (eAG), EDTA WB - CC | 122.6 | 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 Borivali Lab, Borivali West

*** End Of Report ***



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Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
URINE EXAMINATION REPORT

| <u>PARAMETER</u> | <u>RESULTS</u> | <u>BIOLOGICAL REF RANGE</u> | <u>METHOD</u> |
|---------------------------------------|----------------|-----------------------------|--------------------|
| <u>PHYSICAL EXAMINATION</u> | | | |
| Color | Pale yellow | Pale Yellow | - |
| Reaction (pH) | 6.5 | 4.5 - 8.0 | Chemical Indicator |
| Specific Gravity | 1.010 | 1.001-1.030 | Chemical Indicator |
| Transparency | Clear | Clear | - |
| Volume (ml) | 40 | - | - |
| <u>CHEMICAL EXAMINATION</u> | | | |
| Proteins | Absent | Absent | pH Indicator |
| Glucose | Absent | Absent | GOD-POD |
| Ketones | Absent | Absent | Legals Test |
| Blood | Absent | Absent | Peroxidase |
| Bilirubin | Absent | Absent | Diazonium Salt |
| Urobilinogen | Normal | Normal | Diazonium Salt |
| Nitrite | Absent | Absent | Griess Test |
| <u>MICROSCOPIC EXAMINATION</u> | | | |
| Leukocytes(Pus cells)/hpf | 1-2 | 0-5/hpf | |
| Red Blood Cells / hpf | Absent | 0-2/hpf | |
| Epithelial Cells / hpf | 0-1 | | |
| Casts | Absent | Absent | |
| Crystals | Absent | Absent | |
| Amorphous debris | Absent | Absent | |
| Bacteria / hpf | +(>20/hpf) | 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 insert

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Borivali Lab, Borivali West

Bmhasakar

Dr.KETAKI MHASKAR
M.D. (PATH)
Pathologist



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Reported :

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

| <u>PARAMETER</u> | <u>RESULTS</u> |
|------------------|----------------|
| ABO GROUP | A |
| Rh TYPING | Positive |

NOTE: Test performed by automated Erythrocytes magnetized technology (EMT) which is more sensitive than conventional methods.

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 isoagglutinins are fully developed at 2 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 Hh 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.

Refernces:

1. Denise M Harmening, 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 SDRL, Vidyavihar Lab
*** End Of Report ***

Dr. Leena Salunkhe

Dr.LEENA SALUNKHE
M.B.B.S, DPB (PATH)
Pathologist





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Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

| <u>PARAMETER</u> | <u>RESULTS</u> | <u>BIOLOGICAL REF RANGE</u> | <u>METHOD</u> |
|----------------------------------|----------------|---|------------------------|
| CHOLESTEROL, Serum | 148.0 | Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl | CHOD-POD |
| TRIGLYCERIDES, Serum | 57.0 | Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl | Enzymatic colorimetric |
| HDL CHOLESTEROL, Serum | 47.4 | Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl | Elimination/ Catalase |
| NON HDL CHOLESTEROL, Serum | 100.6 | Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl | Calculated |
| LDL CHOLESTEROL, Serum | 89.2 | Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl | Calculated |
| VLDL CHOLESTEROL, Serum | 11.4 | < /= 30 mg/dl | Calculated |
| CHOL / HDL CHOL RATIO, Serum | 3.1 | 0-4.5 Ratio | Calculated |
| LDL CHOL / HDL CHOL RATIO, Serum | 1.9 | 0-3.5 Ratio | Calculated |

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab
*** End Of Report ***



Rashi

Dr.NAMRATA RAUL
M.D (Biochem)
Biochemist



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
THYROID FUNCTION TESTS

| <u>PARAMETER</u> | <u>RESULTS</u> | <u>BIOLOGICAL REF RANGE</u> | <u>METHOD</u> |
|---------------------|----------------|-----------------------------|---------------|
| Free T3, Serum | 4.9 | 3.5-6.5 pmol/L | CLIA |
| Free T4, Serum | 12.6 | 11.5-22.7 pmol/L | CLIA |
| sensitiveTSH, Serum | 7.372 | 0.55-4.78 microIU/ml | CLIA |



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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 upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2)TSH values may be trasiently altered becuae 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 & dopamine), 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 206%. 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.O.koulouri 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 ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4.Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab
*** End Of Report ***



Namrata

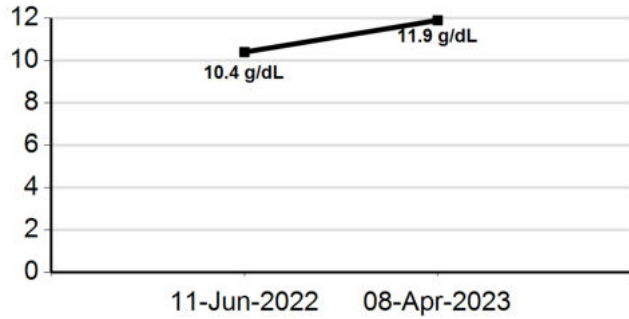
Dr.NAMRATA RAUL
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Biochemist



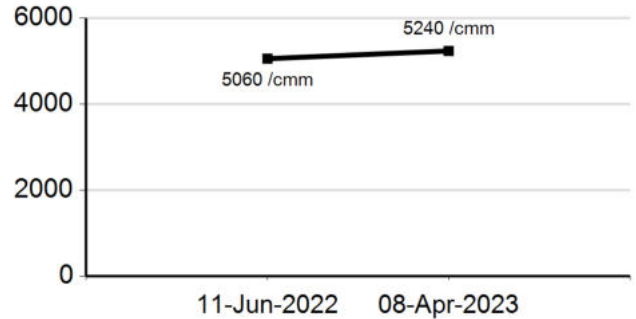
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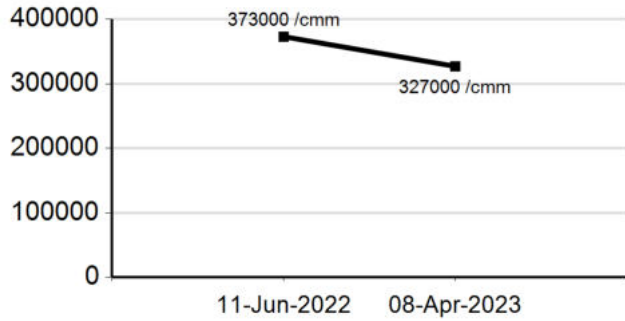
Haemoglobin



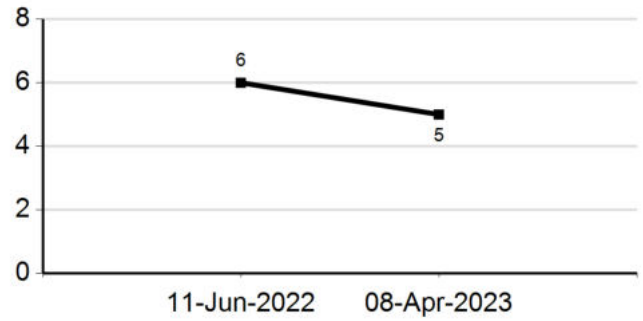
WBC Total Count



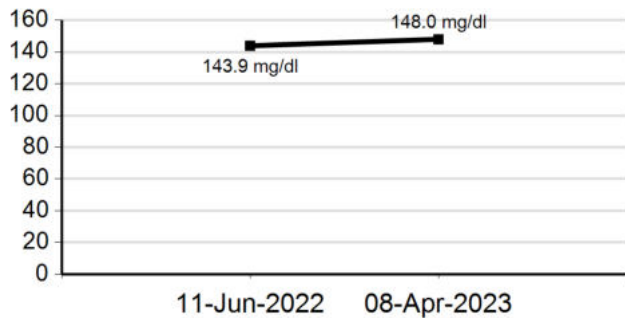
Platelet Count



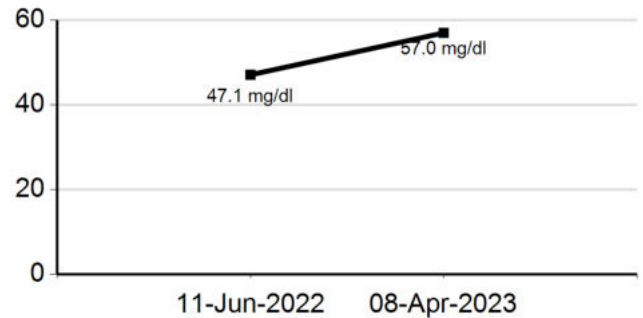
ESR



CHOLESTEROL



TRIGLYCERIDES

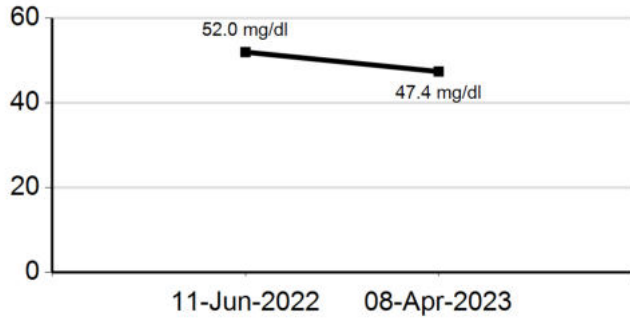




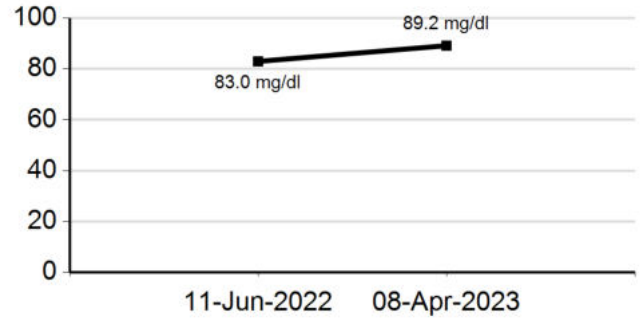
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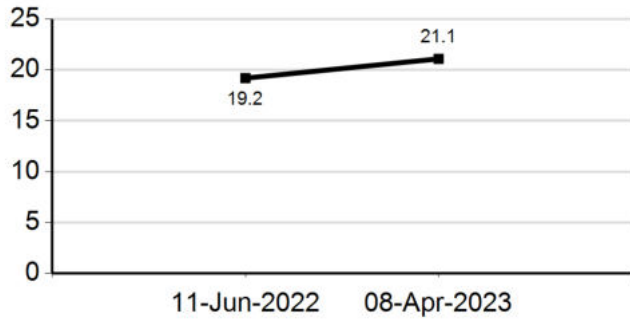
HDL CHOLESTEROL



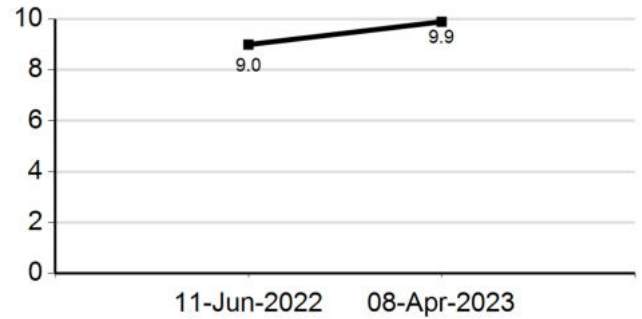
LDL CHOLESTEROL



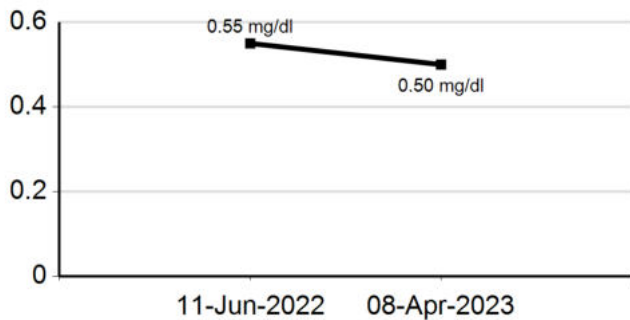
BLOOD UREA



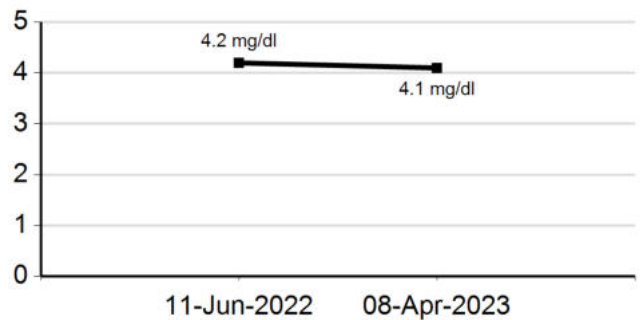
BUN



CREATININE



URIC ACID

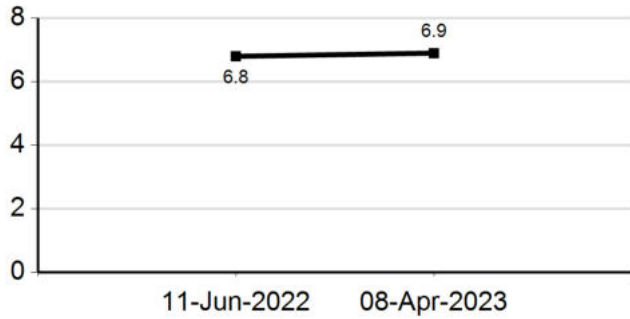




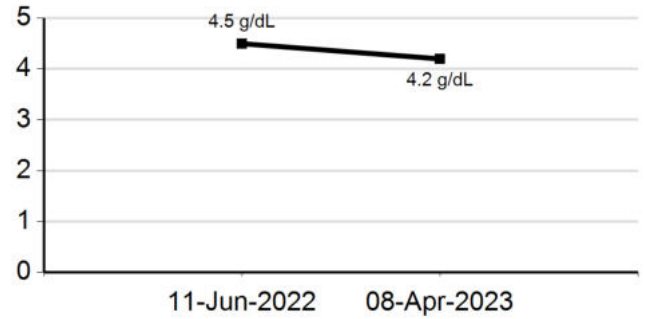
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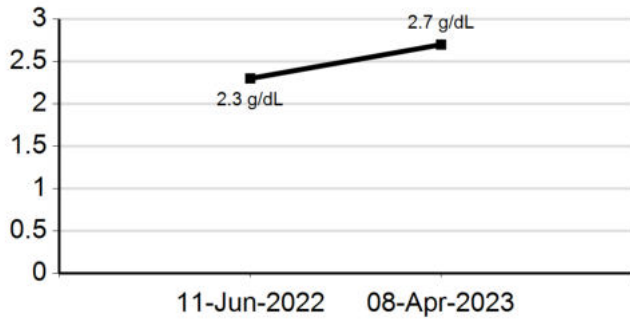
TOTAL PROTEINS



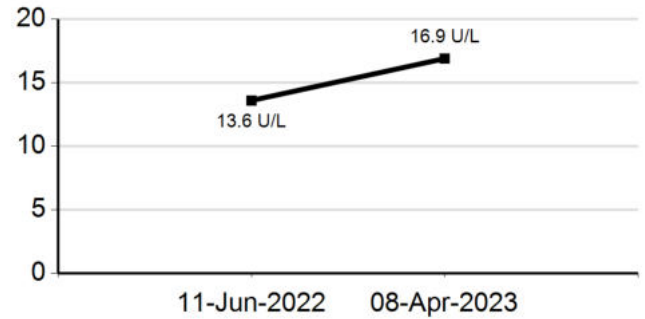
ALBUMIN



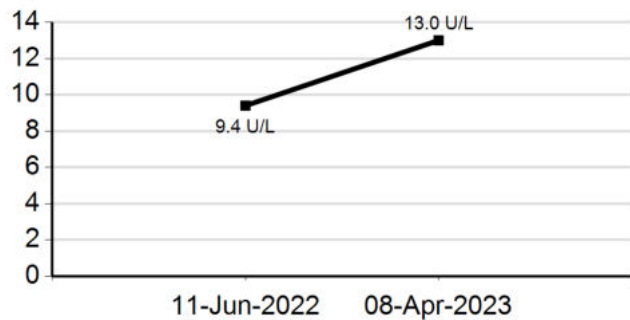
GLOBULIN



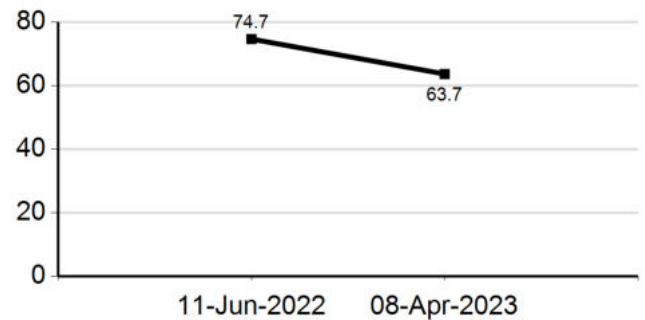
SGOT (AST)



SGPT (ALT)



ALKALINE PHOSPHATASE

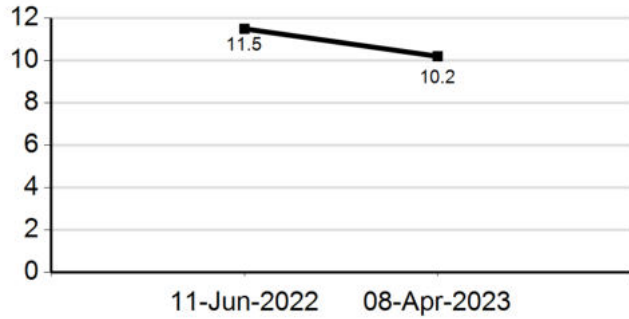




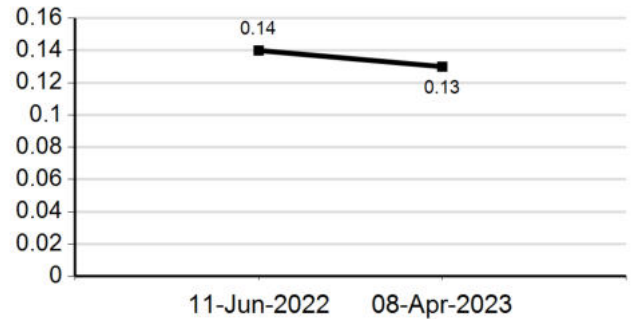
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 Consulting Dr. : -
 Reg. Location : Kandivali East (Main Centre)

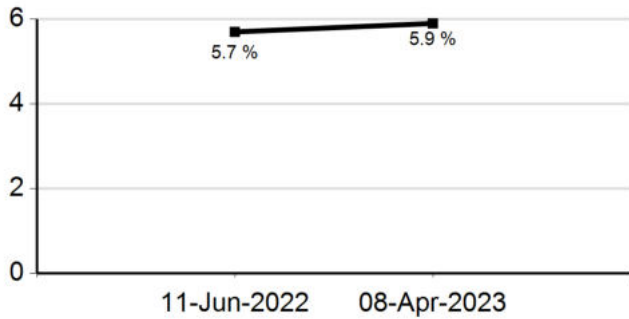
GAMMA GT



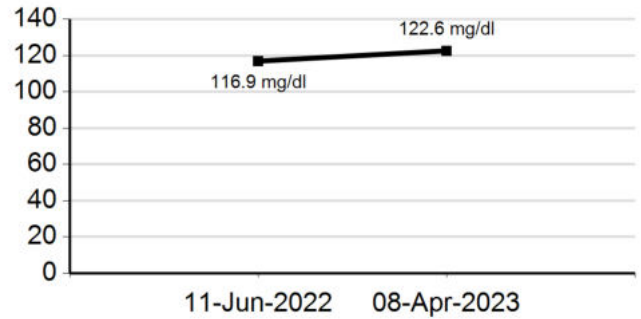
BILIRUBIN (DIRECT)



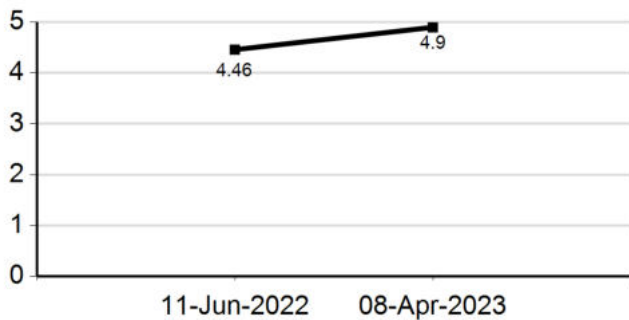
Glycosylated Hemoglobin (HbA1c)



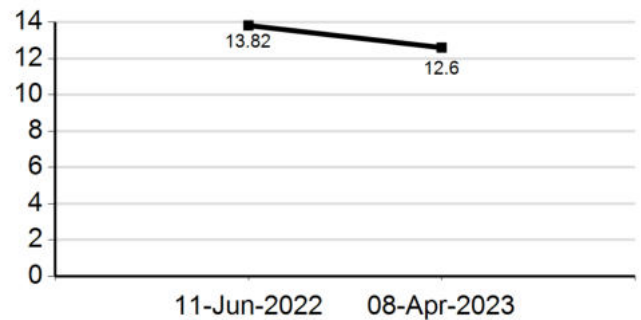
Estimated Average Glucose (eAG)



Free T3



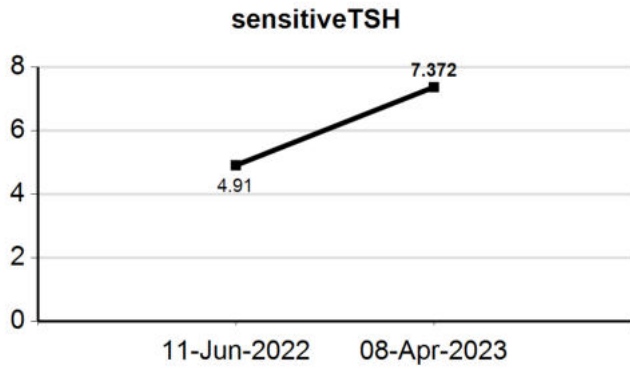
Free T4

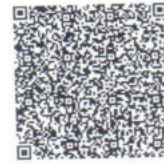




Use a QR Code Scanner
Application To Scan the Code

CID : 2309822065
Name : MRS.RASHI SHARMA
Age / Gender : 39 Years / Female
Consulting Dr. : -
Reg. Location : Kandivali East (Main Centre)





Use a QR Code Scanner
Application To Scan the Code

CID : 2309822065
Name : Mrs RASHI SHARMA
Age / Sex : 39 Years/Female
Ref. Dr :
Reg. Location : Kandivali East Main Centre

Reg. Date : 08-Apr-2023
Reported : 08-Apr-2023 / 12:56

R
E
P
O
R
T

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.

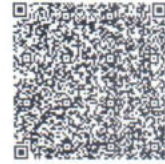
-----End of Report-----

Khilji

Dr. FAIZUR KHILJI
MBBS, RADIO DIAGNOSIS
Reg No-74850
Consultant Radiologist

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023040809550971>

Page no 1 of 1



Use a QR Code Scanner
Application To Scan the Code

CID : 2309822065
Name : Mrs RASHI SHARMA
Age / Sex : 39 Years/Female
Ref. Dr :
Reg. Location : Kandivali East Main Centre
Reg. Date : 08-Apr-2023
Reported : 08-Apr-2023 / 11:44

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (14.8 cm) shape and smooth margins. It shows normal parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein measures 10 mm and CBD appears measures 3.8 mm .
The main portal vein and CBD appears normal.

GALL BLADDER:

The gall bladder is physiologically distended and appears normal. No evidence of gall stones or mass lesions seen

PANCREAS:

The pancreas is well visualized and appears normal. No evidence of solid or cystic mass lesion.

KIDNEYS:

Right kidney measures 10.3 x 4.6 cm. Left kidney measures 10.2 x 5.1 cm.
Both the kidneys are normal in size shape and echotexture.
No evidence of any calculus, hydronephrosis or mass lesion seen.

SPLEEN:

The spleen is normal in size (7.5 cm) and echotexture. No evidence of focal lesion is noted.
There is no evidence of any lymphadenopathy or ascites.

URINARY BLADDER:

The urinary bladder is well distended and reveal no intraluminal abnormality.

UTERUS:

The uterus is anteverted and appears normal. It measures 7.8 x 5.8 x 5.1 cm in size.
The endometrial thickness is 5.9 mm.

OVARIES:

Both the ovaries are well visualized and appears normal.
There is no evidence of any ovarian or adnexal mass seen.
Right ovary = 3.0 x 1.8 cm Left ovary = 3.5 x 1.5 cm.

Click here to view images [http://3.111.232.119/iRISViewer/NeoradViewer?](http://3.111.232.119/iRISViewer/NeoradViewer?Access) sionNo=2023040809550964
Acces



Use a QR Code Scanner
Application To Scan the Code

CID : 2309822065
Name : Mrs RASHI SHARMA
Age / Sex : 39 Years/Female
Ref. Dr :
Reg. Location : Kandivali East Main Centre

Reg. Date : 08-Apr-2023
Reported : 08-Apr-2023 / 11:44

IMPRESSION:-

NO SIGNIFICANT ABNORMALITY IS SEEN.

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

DR. Akash Chhari
MBBS. MD. Radio-Diagnosis Mumbai
MMC REG NO - 2011/08/2862

Click here to view images [http://3.111.232.119/iRISViewer/NeoradViewer?
Access](http://3.111.232.119/iRISViewer/NeoradViewer?Access)

sionNo=2023040809550964

Date:- 8/6/23

CID: 2369 822065

Name:- Mrs Peshi Sharma

Sex/Age: F/39

EYE CHECK UP

Chief complaints: Punctate ch-ur

Systemic Diseases: no H/O S/G

Past history: no H/O Ocular surgery

Wlog
 $-3.50 -0.50 \times 180^\circ$
 $-3.00 -1.00 \times 180^\circ$

Unaided Vision: 6/60 6/60

Aided Vision: 6/6, N/G 6/6, N/G

Refraction:

CCMS Normal

(Right Eye)

(Left Eye)

| | Sph | Cyl | Axis | Vn | Sph | Cyl | Axis | Vn |
|----------|-------|-------|------|-----|-------|-------|------|-----|
| Distance | -3.50 | -0.50 | 180 | 6/6 | -3.50 | -1.00 | 180 | 6/6 |
| Near | | | | N/G | | | | N/G |

Colour Vision: Normal / Abnormal

Remark: Vn within normal limit

Kajal H.
KAJAL NAGRECHA
 OPTOMETRIST

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 Thakur Village, Kandivali (east),
 Mumbai - 400101.
 Tel : 61700500

DENTAL CHECK - UP

Name:- *Rushi Sharma*

CID : *2309827065* Sex / Age : *F / 38*

Occupation:-

Date: *08/14/2023*

Chief complaints:- *Spacing between incisors,*

Medical / dental history:- *Scaling done,*

GENERAL EXAMINATION:

1) Extra Oral Examination:

- a) TMJ: *Normal movements*
- b) Facial Symmetry: *Bilateral Symmetrical.*

2) Intra Oral Examination:

- a) Soft Tissue Examination: *Normal.*
- b) Hard Tissue Examination: *Crowding in lower anterior*
- c) Calculus: + *mild spacing seen;*
- Stains: +

| | | | | | | | | | | | | | | | |
|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| 18 | 17 | 16 | 15 | 14 | 13 | 12 | 11 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 |
| | | | | | | | | | | | | | | | |
| 48 | 47 | 46 | 45 | 44 | 43 | 42 | 41 | 31 | 32 | 33 | 34 | 35 | 36 | 37 | 38 |

| | | | |
|---|-----------------|-----|----------------------|
| ○ | Missing | # | Fractured |
| ○ | Filled/Restored | RCT | Root Canal Treatment |
| ○ | Cavity/Caries | RP | Root Piece |

Advised: *a) Scaling & Polishing [oral Prophylaxis] once in a year.*

DR. BHUMIK PATEL
(B.D.S) A - 23378

Provisional Diagnosis:-

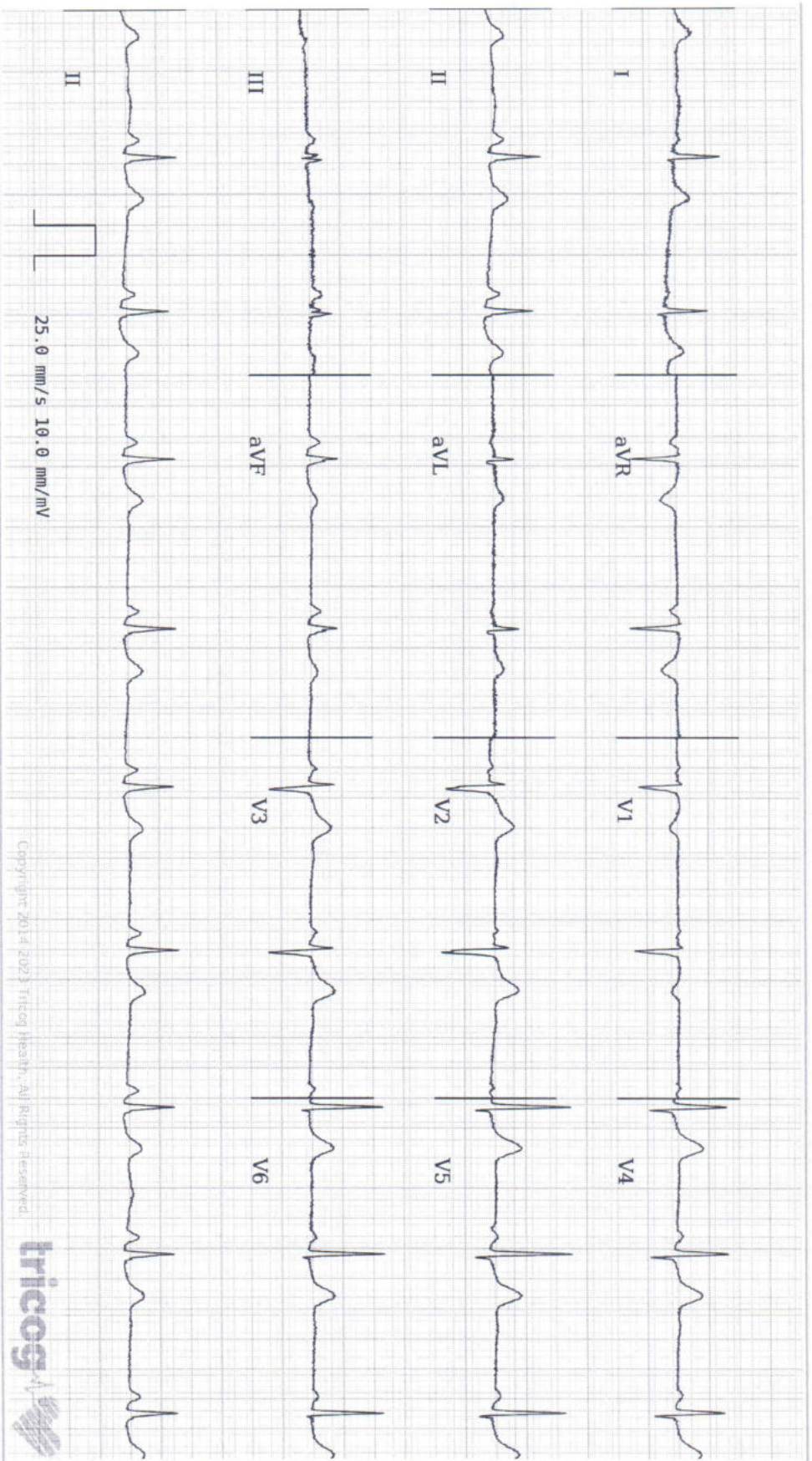
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Thakur Village, Kandivali (east),
Mumbai - 400101.
Tel : 61700600

Dr Bhunik Patel
[Signature]

Patient Name: RASHI SHARMA
Patient ID: 2309822065

Date and Time: 8th Apr 23 11:56 AM



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Age **39** **5** **15**
years months days

Gender **Female**

Heart Rate **58bpm**

Patient Vitals

BP: 110/70 mmHg

Weight: 55 kg

Height: 160 cm

Pulse: NA

Spo2: NA

Resp: NA

Others:

Measurements

QRSD: 74ms

QT: 406ms

QTcB: 39.8ms

PR: 124ms

P-R-T: 74°/43°/29°

REPORTED BY

DR. AKHIL PARULEKAR
MBBS, MD, MEDICINE, DNB Cardiology
Cardiologist
20120824853

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

Disclaimer: 1) Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. 2) Patient vitals are as entered by the clinician and not derived from the ECG.

stool

Name : Mrs. RASHI SHARMA
VID : 2309822065
Ref By :

Reg Date : 08-Apr-2023 09:54
Age/Gender : 39 Years
Regn Centre : Kandivali East (Main Centre)

History and Complaints:

No

EXAMINATION FINDINGS:

Height (cms): 160 cms
Temp (0c): Afebrile
Blood Pressure (mm/hg): 110/70
Pulse: 52/min

Weight (kg): 55 kgs
Skin: Dryness on both LL
Nails: Normal
Lymph Node: Not palpable

Systems

Cardiovascular: Normal
Respiratory: Normal
Genitourinary: Normal
GI System: Normal
CNS: Normal

IMPRESSION:

HBARC - 5.9%
FTSM - 7.372

ADVICE:

Diabetologist / Endocrinologist / Opina

Name : Mrs . RASHI SHARMA
VID : 2309822065
Ref By :
Reg Date : 08-Apr-2023 09:54
Age/Gender : 39 Years
Regn Centre : Kandivali East (Main Centre)

CHIEF COMPLAINTS:

- | | |
|--|----------------|
| 1) Hypertension: | No |
| 2) IHD | No |
| 3) Arrhythmia | No |
| 4) Diabetes Mellitus | No |
| 5) Tuberculosis | No |
| 6) Asthama | No |
| 7) Pulmonary Disease | No |
| 8) Thyroid/ Endocrine disorders | No |
| 9) Nervous disorders | No |
| 10) GI system | No |
| 11) Genital urinary disorder | No |
| 12) Rheumatic joint diseases or symptoms | No |
| 13) Blood disease or disorder | No |
| 14) Cancer/lump growth/cyst | No |
| 15) Congenital disease | No |
| 16) Surgeries | LSCS 2012,2018 |
| 17) Musculoskeletal System | No |

PERSONAL HISTORY:

- | | |
|---------------|-----|
| 1) Alcohol | No |
| 2) Smoking | No |
| 3) Diet | Veg |
| 4) Medication | No |


Dr. Jagruti Dhale

Dr. Jagruti Dhale
MBBS
Consultant Physician
Reg. No. 69548

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Row House No. 3, Aangan,
Thakur Village, Kandivali (east),
Mumbai - 400101.
Tel : 61700800

SUBURBAN DIAGNOSTICS KANDIVALI EAST

Report



ACHPL

Email:

1445 (2309822065) / RASHI SHARMA / 39 Yrs / F / 160 Cms / 55 Kg

Date: 08 / 04 / 2023 12:52:58 PM Refd By : ARCOFEMI Examined By: DR.SNEHA SHETTY

| Stage | Time | Duration | Speed(Kmph) | Elevation | METS | Rate | % THR | BP | RPP | PVC | Comments |
|---------------|-------|----------|-------------|-----------|------|------|-------|---------|-----|-----|----------|
| Supine | 00:05 | 0:05 | 00.0 | 00.0 | 01.0 | 071 | 39 % | 110/70 | 078 | 00 | |
| Standing | 00:41 | 0:36 | 00.0 | 00.0 | 01.0 | 089 | 49 % | 110/70 | 097 | 00 | |
| HV | 00:54 | 0:13 | 00.0 | 00.0 | 01.0 | 077 | 43 % | 110/70 | 084 | 00 | |
| ExStart | 01:13 | 0:19 | 00.0 | 00.0 | 01.0 | 083 | 46 % | 110/70 | 091 | 00 | |
| BRUCE Stage 1 | 04:13 | 3:00 | 02.7 | 10.0 | 04.7 | 124 | 69 % | 110/70 | 136 | 00 | |
| BRUCE Stage 2 | 07:13 | 3:00 | 04.0 | 12.0 | 07.1 | 142 | 78 % | 120/80 | 170 | 00 | |
| PeakEx | 08:12 | 0:59 | 05.5 | 14.0 | 08.1 | 161 | 89 % | 120/80 | 193 | 00 | |
| Recovery | 09:12 | 1:00 | 00.0 | 00.0 | 01.1 | 151 | 83 % | 140/80 | 211 | 00 | |
| Recovery | 10:12 | 2:00 | 00.0 | 00.0 | 01.0 | 106 | 59 % | 130/80 | 137 | 00 | |
| Recovery | 11:12 | 3:00 | 00.0 | 00.0 | 01.0 | 093 | 51 % | 120/80 | 111 | 00 | |
| Recovery | 12:12 | 4:00 | 00.0 | 00.0 | 01.0 | 095 | 52 % | 120/80 | 114 | 00 | |
| Recovery | 12:24 | | | | 00.0 | 000 | 0 % | ---/--- | 000 | 00 | |

FINDINGS :

Exercise Time : 06:59
 Initial HR (ExStrt) : 83 bpm 46% of Target 181
 Initial BP (ExStrt) : 110/70 (mm/Hg)
 Max WorkLoad Attained : 8.1 Fair response to induced stress
 Duke Treadmill Score : 07.0
 Test End Reasons : Test Complete

Max HR Attained 161 bpm 89% of Target 181
 Max BP Attained 140/80 (mm/Hg)

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 Thakur Village, Kandivali (east),
 Mumbai - 408101.
 Tel : 617000000

Sneha Shetty

Dr. Sneha Shetty

MBBS, PGDCC
 Clinical Cardiology
 Reg. No. 2008/03/0660
 Doctor : DR.SNEHA SHETTY

Email:

1455 / RASHI SHARMA / 39 Yrs / F / 160 Cms / 55 Kg Date: 08 / 04 / 2023 12:52:58 PM Refd By : ARCOFEMI

REPORT :

Heart Rate 161.0 bpm

Systolic BP 120.0 mmHg Diastolic BP 80.0 mmHg

Exercise Time 06:59 Mins Ectopic Beats 0.0

METS 8.1 Test End Reason Test Complete Target Heart Rate 89% of 181

| | |
|------------------------------|---|
| TEST OBJECTIVE | ROUTINE CHECK UP |
| RISK FACTOR | NONE |
| ACTIVITY | MODERATE ACTIVE |
| MEDICATION | NONE |
| REASON FOR TERMINATION | HEART RATE ACHIEVED |
| EXERCISE TOLERANCE | MODERATE |
| EXERCISE INDUCED ARRHYTHMIAS | NO |
| HAEMODYNAMIC RESPONSE | NORMAL |
| CHRONOTROPIC RESPONSE | NORMAL |
| ECG CHANGES | NO SIGNIFICANT ST-T CHANGES NOTED DURING EXERCISE AND RECOVERY PHASE. |
| FINAL IMPRESSION | STRESS TEST IS NEGATIVE FOR EXERCISE INDUCED ISCHEMIC HEART DISEASE FOR GIVEN DURATION OF EXERCISE. |

DISCLAIMER Negative stress test does not rule out coronary artery diseases. Positive stress test is suggestive but not confirmatory of coronary artery disease. Hence clinical correlation is mandatory

SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD.



Row House No. 3, Ashokra,

Thakur Village, Kandivli (West),

Mumbai - 408104.

Tel : 61700900

Dr. Sneha Shetty

MBBS, PGDCC

Clinical Cardiology

Reg. No. 2008/03/0660

Doctor : DR. SNEHA SHETTY



1455 (2309822065) / RASHI SHARMA / 39 Yrs / F / 160 Cms / 55 Kg / HR : 71

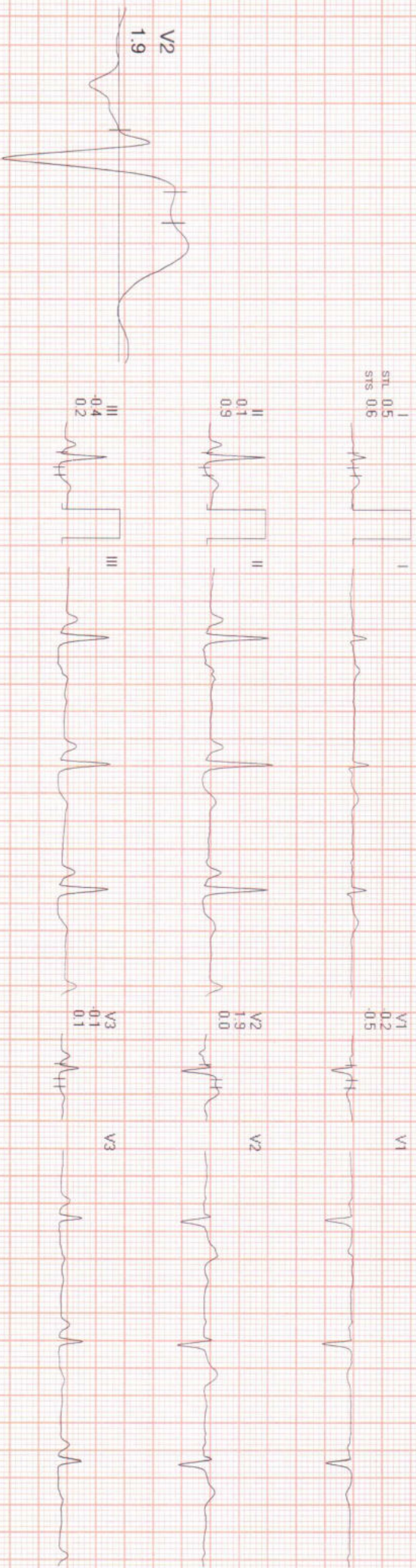
Date: 08 / 04 / 2023 12:52:58 PM

METS: 1.0 / 71 bpm 39% of THR BP: 110/70 mmHg Raw ECG/ BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz

EXTime: 00:00 0.0 Kmph, 0.0%

4X 70 mS Post J

25 mm/Sec 1.0 Cm/mV



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



SUBURBAN DIAGNOSTICS KANDIVALI EAST

STANDING (00:36)



1455 (2309822065) / RASHI SHARMA / 39 Yrs / F / 160 Cms / 55 Kg / HR : 89

Date: 08 / 04 / 2023 12:52:58 PM

METS: 1.0 / 89 bpm 49% of THR BP: 110/70 mmHg

Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

EXTime: 00:00 0.0 Kmph, 0.0%

4X 80 mS Post J

25 mm/Sec 1.0 Cm/mV

I
STL 0.5
STB 0.7



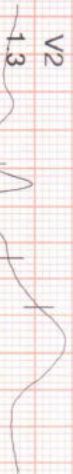
V1
0.1
0.2



II
-0.5
0.8



V2
1.3
1.1



III
-1.0
0.1



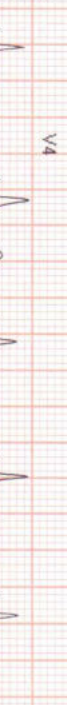
V3
-0.1
0.3



aVR
0.0
-0.8



V4
-0.1
0.5



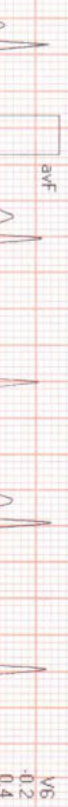
aVL
0.8
0.3



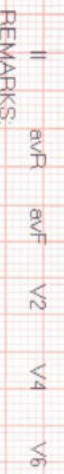
V5
-0.1
0.4



aVF
-0.8
0.5



V6
-0.2
0.4



REMARKS:





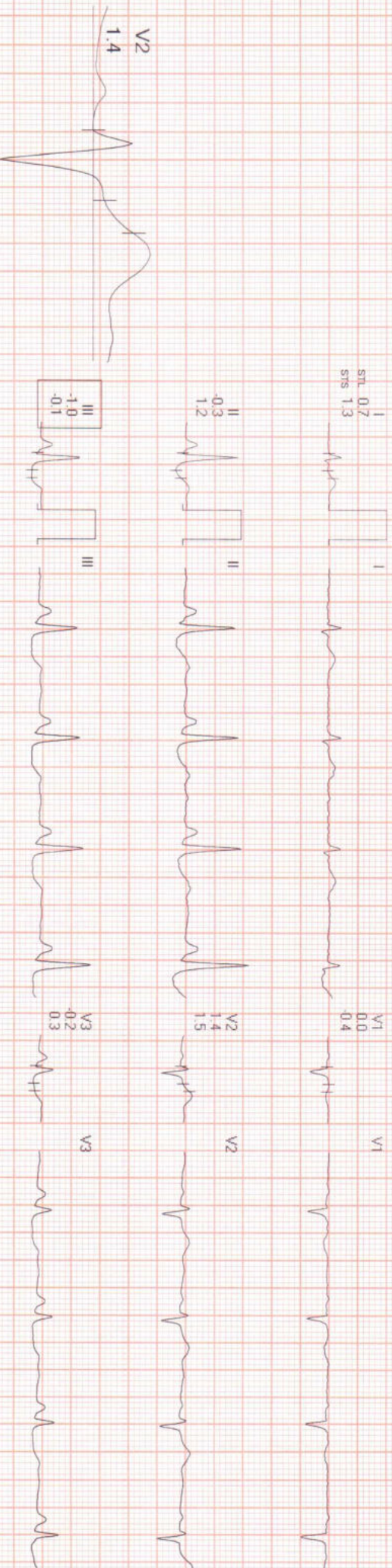
1455 (2309822065) / RASHI SHARMA / 39 Yrs / F / 160 Cms / 55 Kg / HR : 77

Date: 08 / 04 / 2023 12:52:58 PM METS: 1.0 / 77 bpm 43% of THR BP: 110/70 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

EXTime: 00:00 0.0 Km/h, 0.0%

4X 70 ms Post J

25 mm/Sec. 1.0 Cm/mV



I
STL 0.7
STB 1.3

V1
0.0
0.4

II
-0.3
1.2

V2
1.4
1.5

III
-1.0
-0.1

V3
-0.2
0.3

aVR
-0.2
-1.3

V4
0.0
0.5

aVL
0.9
0.7

V5
-0.5
0.3

aVF
-0.7
0.6

V6
-0.4
0.4

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





1455 (2309822065) / RASHI SHARMA / 39 Yrs / F / 160 Cms / 55 Kg / HR : 83

Date: 08 / 04 / 2023 12:52:58 PM

METS: 1.0 / 83 bpm 46% of THR

BP: 110/70 mmHg

Raw ECG/ BLC On/ Natch On/ HF 0.05 Hz/ LF 35 Hz

4X 80 mS Post J

EXTime: 00:00 0.0 KmPh. 0.0%

I
STL 1.6
STS 0.0

V1
0.9
0.3



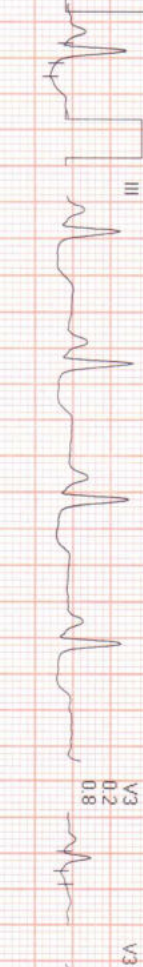
II
-1.0
-0.9

V2
1.2
1.3



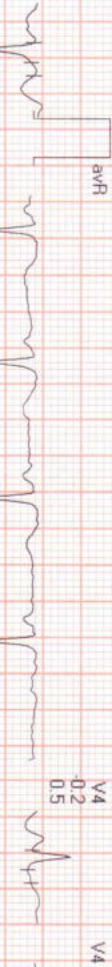
III
-2.0
-0.9

V3
0.2
0.8



aVR
0.0
0.4

V4
0.2
0.5



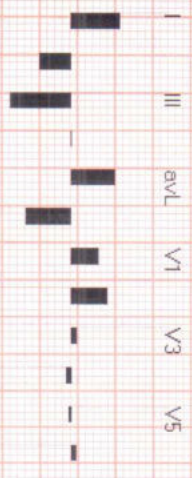
aVL
1.4
0.4

V5
-0.1
0.5



aVF
-1.5
-0.9

V6
0.2
0.2



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





1455 (2309822065) / RASHI SHARMA / 39 Yrs / F / 160 Cms / 55 Kg / HR : 124

Date: 08 / 04 / 2023 12:52:58 PM METS: 4.7 / 124 bpm 69% of THR BP: 110/70 mmHg Paw ECG/BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz

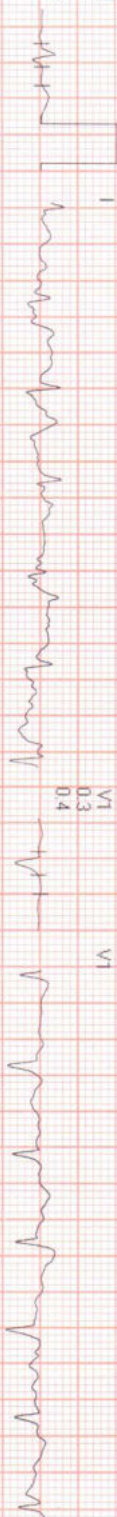
EXTime: 03:00 2.7 kmph, 10.0%

4X 80 mS Post J

25 mm/Sec. 1.0 Cm/mV

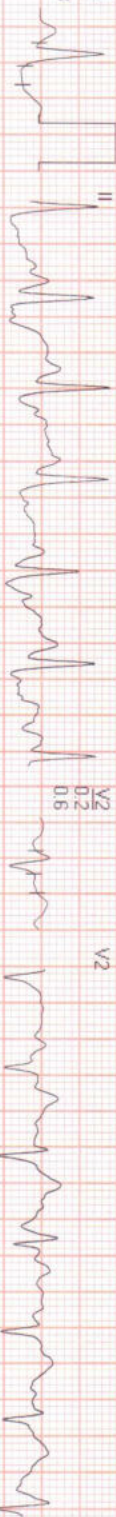
STL 0.1
STB 0.1

V1 0.3
V2 0.4



II -2.1
III -0.3

V2 0.2
V3 0.6



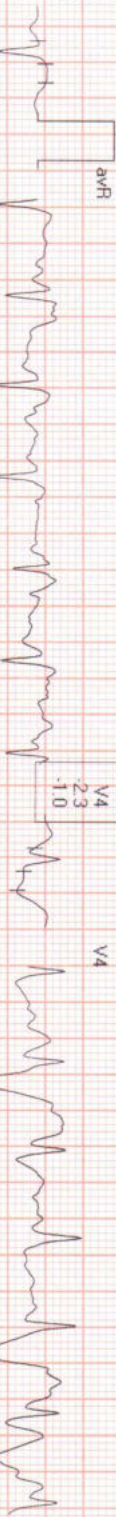
III -2.2
aVF -0.6

V3 0.8
V4 0.3



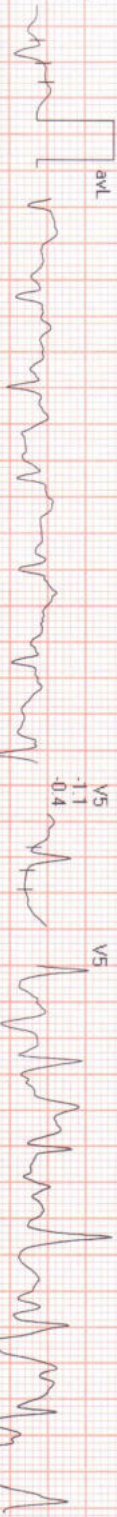
aVR 1.0
aVL 0.0

V4 2.3
V5 1.0



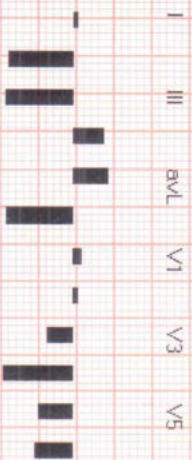
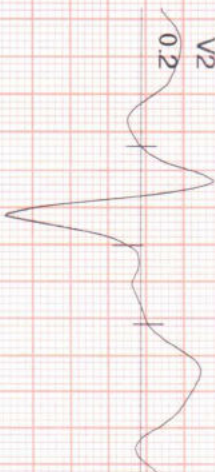
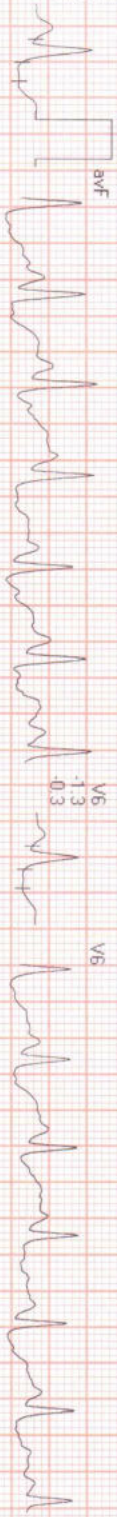
aVL 1.2
aVF 0.5

V5 1.1
V6 0.4



aVF -2.2
aVR -0.5

V6 1.3
V6 0.3



REMARKS:





1455 (2309822065) / RASHI SHARMA / 39 Yrs / F / 160 Cms / 55 Kg / HR : 142

Date: 08 / 04 / 2023 12:52:58 PM

METS: 7.1 / 142 bpm 78% of THR BP- 120/80 mmHg Raw ECG/ BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz

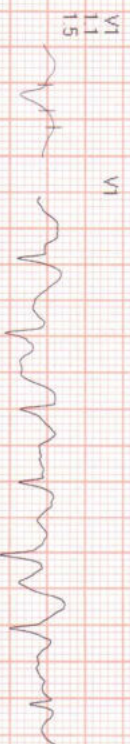
EXTime: 06:00 4.0 Kmph, 12.0%

4X 60 ms Post J

25 mm/Sec 1.0 Cm/mV

I
STL 0.6
STS 1.2

V1
1.1
1.5



II
1.3
1.2

V2
0.4
2.0



III
-2.0
-0.2

V3
-1.4
1.0



aVR
0.4
-1.0

V4
-2.3
0.6



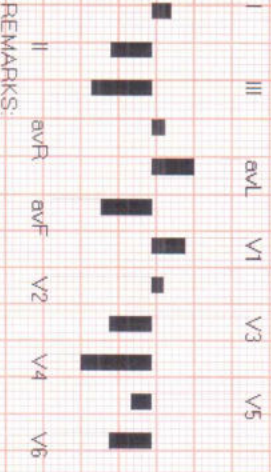
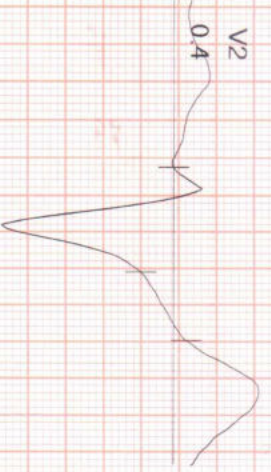
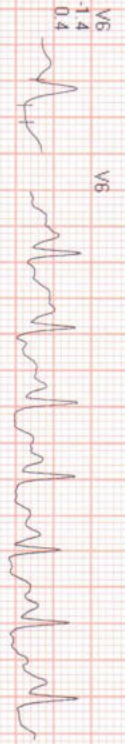
aVL
1.4
0.9

V5
-0.7
1.8



aVF
-1.7
0.5

V6
-1.4
0.4



REMARKS:



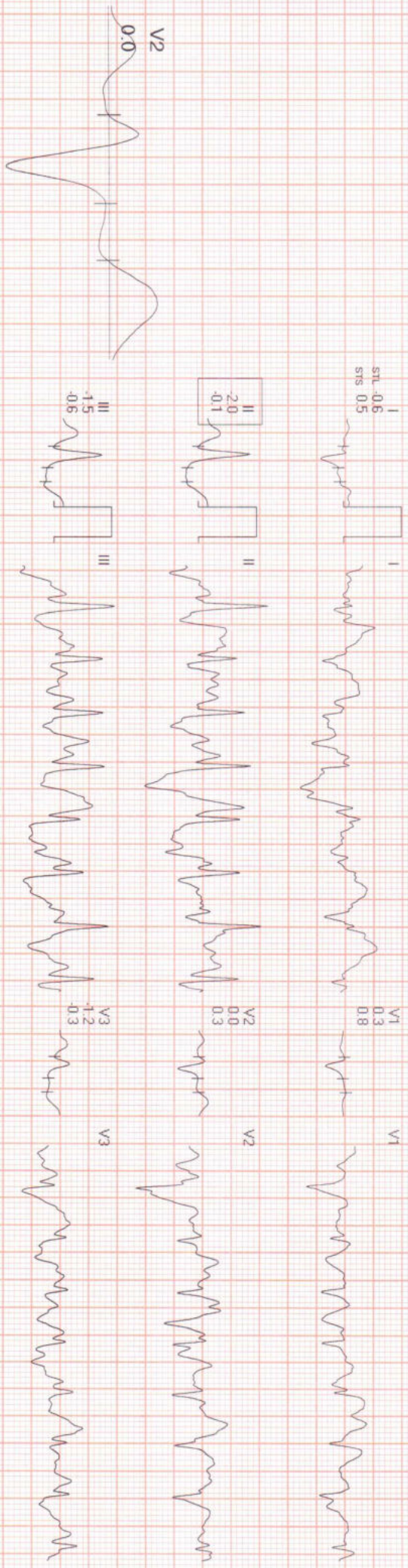
1455 (2309822065) / RASHI SHARMA / 39 Yrs / F / 160 Cms / 55 Kg / HR : 161

Date: 08 / 04 / 2023 12:52:58 PM METS: 8.1 / 161 bpm 89% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

EXTime: 06:59 5.5 Km/ph, 14.0%

4X 60 ms Post J

25 mm/Sec 1.0 Cm/mV



REMARKS:

II avR avF V2 V4 V6



SUBURBAN DIAGNOSTICS KANDIVALI EAST

Recovery : (01:00)



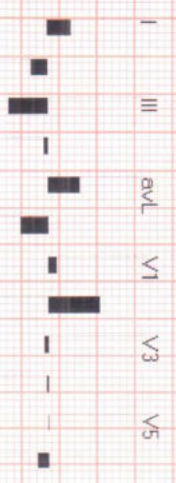
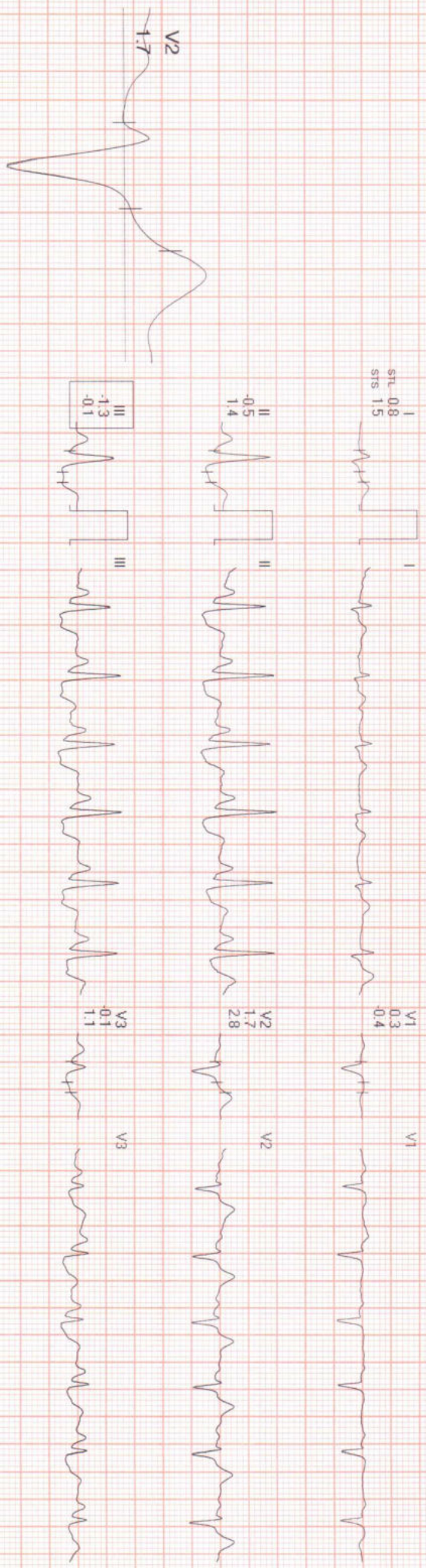
1455 (2309822065) / RASHI SHARMA / 39 Yrs / F / 160 Cms / 55 Kg / HR : 151

Date: 08 / 04 / 2023 12:52:58 PM METS: 1.1 / 151 bpm 83% of THR BP: 140/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

EXTime: 06:59 0.0 Km/ph, 0.0%

4X 50 ms Post J

25 mm/Sec 1.0 Cm/mV



REMARKS:
I avR avL avF V1 V2 V3 V4 V5 V6



SUBURBAN DIAGNOSTICS KANDIVALI EAST

Recovery : (02:00)



1455 (2309822065) / RASHI SHARMA / 39 Yrs / F / 160 Cms / 55 Kg / HR : 106

Date: 08 / 04 / 2023 12:52:58 PM METS: 1.0 / 106 bpm 59% of THR BP: 130/80 mmHg Raw ECG/ BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz

EXTime: 06:59 0.0 KmPh, 0.0%

4X 50.ms Post J

25 mm/Sec 1.0 Cm/mV

STL 0.6
STS 1.5

V1 0.4
V2 0.3



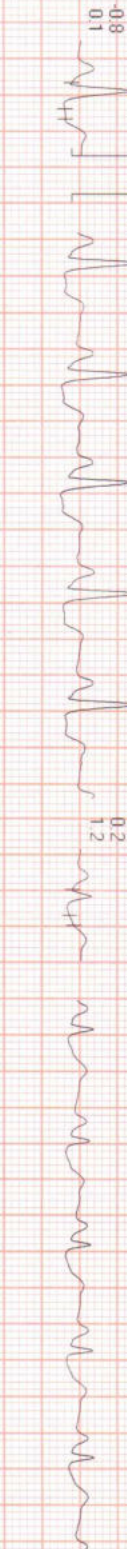
II -0.2
III -0.1

V2 1.5
V3 1.2



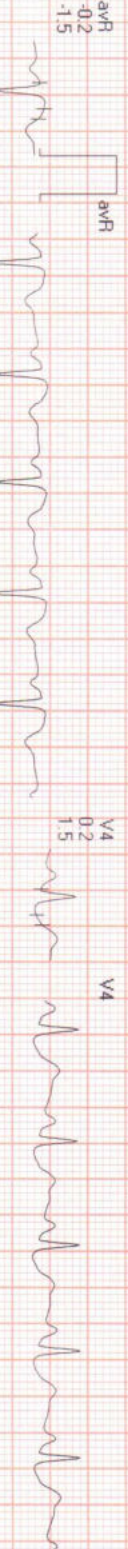
III -0.8
aVR -0.2
aVL 0.7
aVF 0.9

V3 0.2
V4 0.2
V5 0.0
V6 0.2



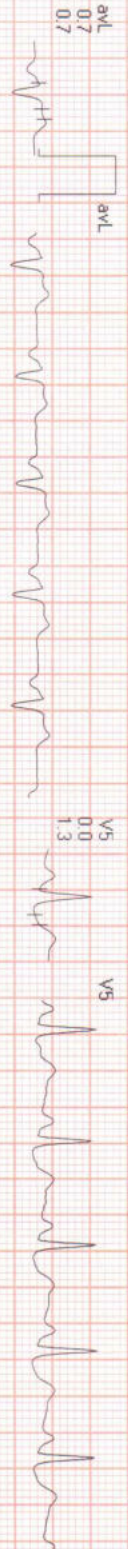
aVR -0.2
aVL 0.7
aVF 0.9

V4 0.2
V5 0.0
V6 0.2



aVL 0.7
aVF 0.9

V5 0.0
V6 0.2



aVF -0.5
V5 -0.2
V6 -0.3

V5 -0.2
V6 -0.3



REMARKS:
II avR avL V1 V2 V3 V4 V5 V6



SUBURBAN DIAGNOSTICS KANDIVALI EAST

Recovery : (03:00)



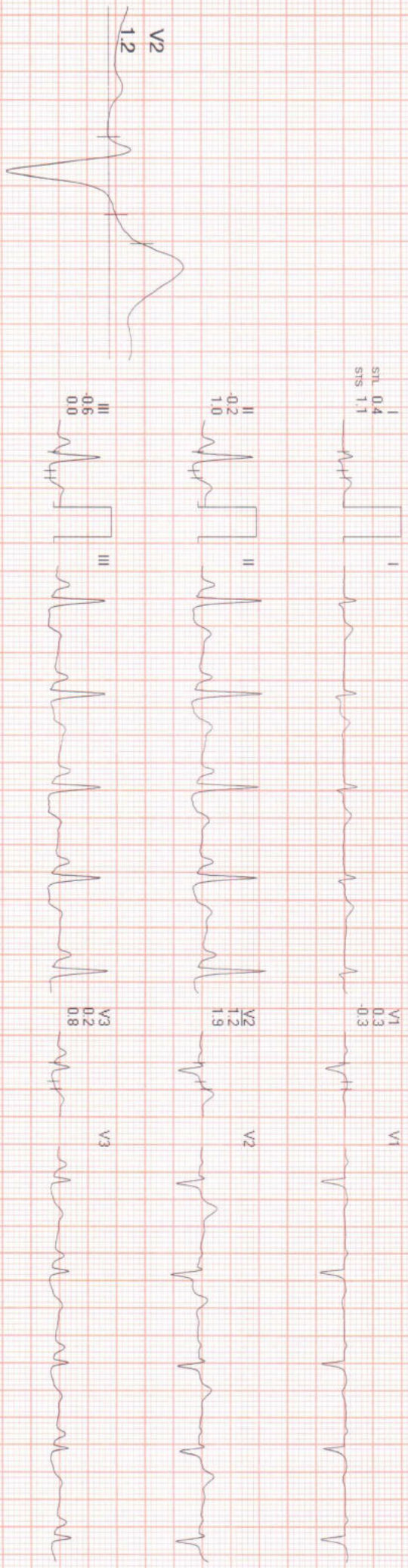
1455 (2309822065) / RASHI SHARMA / 39 Yrs / F / 160 Cms / 55 Kg / HR : 93

Date: 08 / 04 / 2023 12:52:58 PM METS: 1.0/93 bpm 51% of THR BP: 120/80 mmHg Rew ECG/ BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 06:59 0.0 Kmph, 0.0%

4X 50 mS Post J

25 mm/Sec 1.0 Cm/mV



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



SUBURBAN DIAGNOSTICS KANDIVALI EAST

Recovery : (04:00)



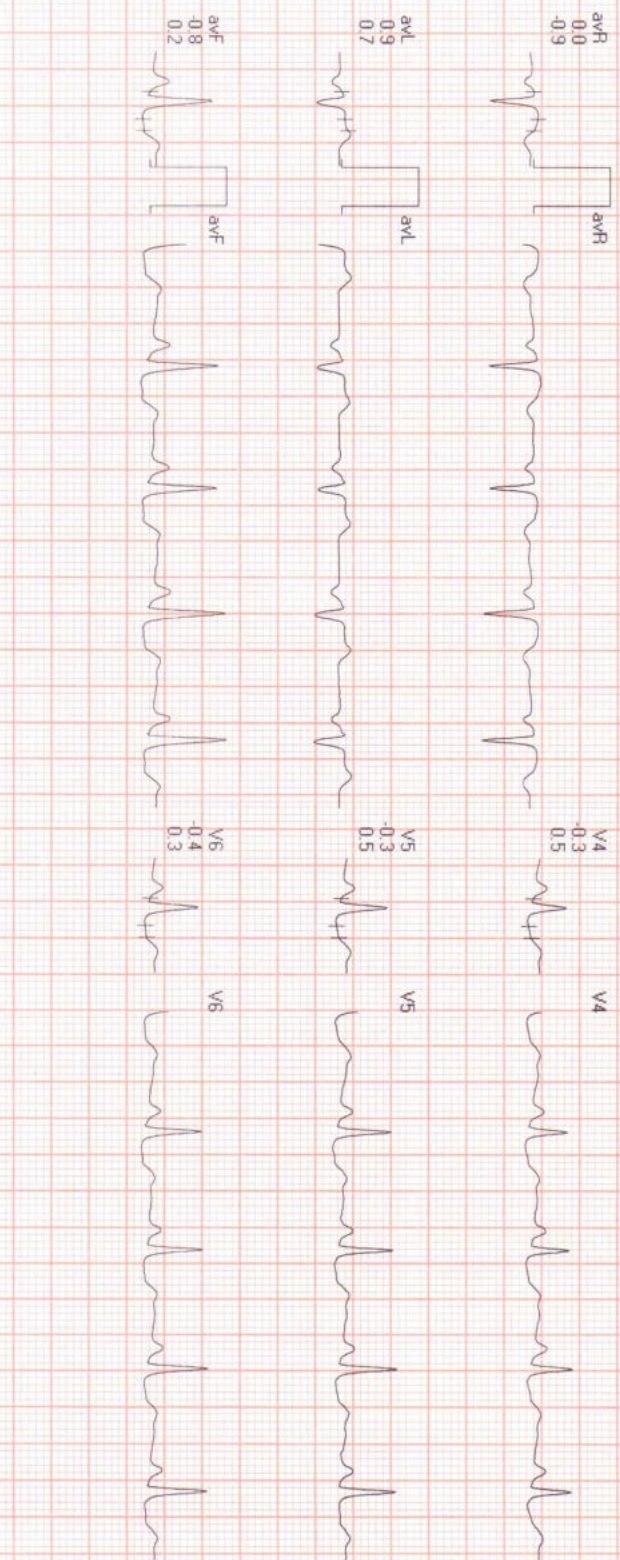
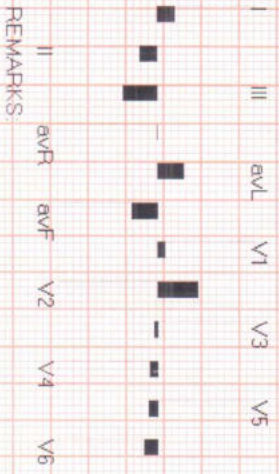
1455 (2309822065) / RASHI SHARMA / 39 Yrs / F / 160 Cms / 55 Kg / HR : 95

Date: 08 / 04 / 2023 12:52:58 PM METS: 1.0/ 95 bpm 52% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

EXTime: 06:59 0.0 Km/ph, 0.0%

4X 60 ms Post J

25 mm/Sec. 1.0 Cm/mV



REMARKS:



SUBURBAN DIAGNOSTICS KANDIVALI EAST

Recovery : (04:12)



1455 (2309822065) / RASHI SHARMA / 39 Yrs / F / 160 Cms / 55 Kg / HR 89

Date: 08 / 04 / 2023 12:52:58 PM METS: 1.0 / 89 bpm 49% of THR BP: 120/80 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

EXTime: 06:59 0.0 Kmph, 0.0%

4X 70 ms Post J

25 mm/Sec 1.0 Cm/mV



REMARKS: II aVR aVL V1 V2 V3 V4 V5 V6

