

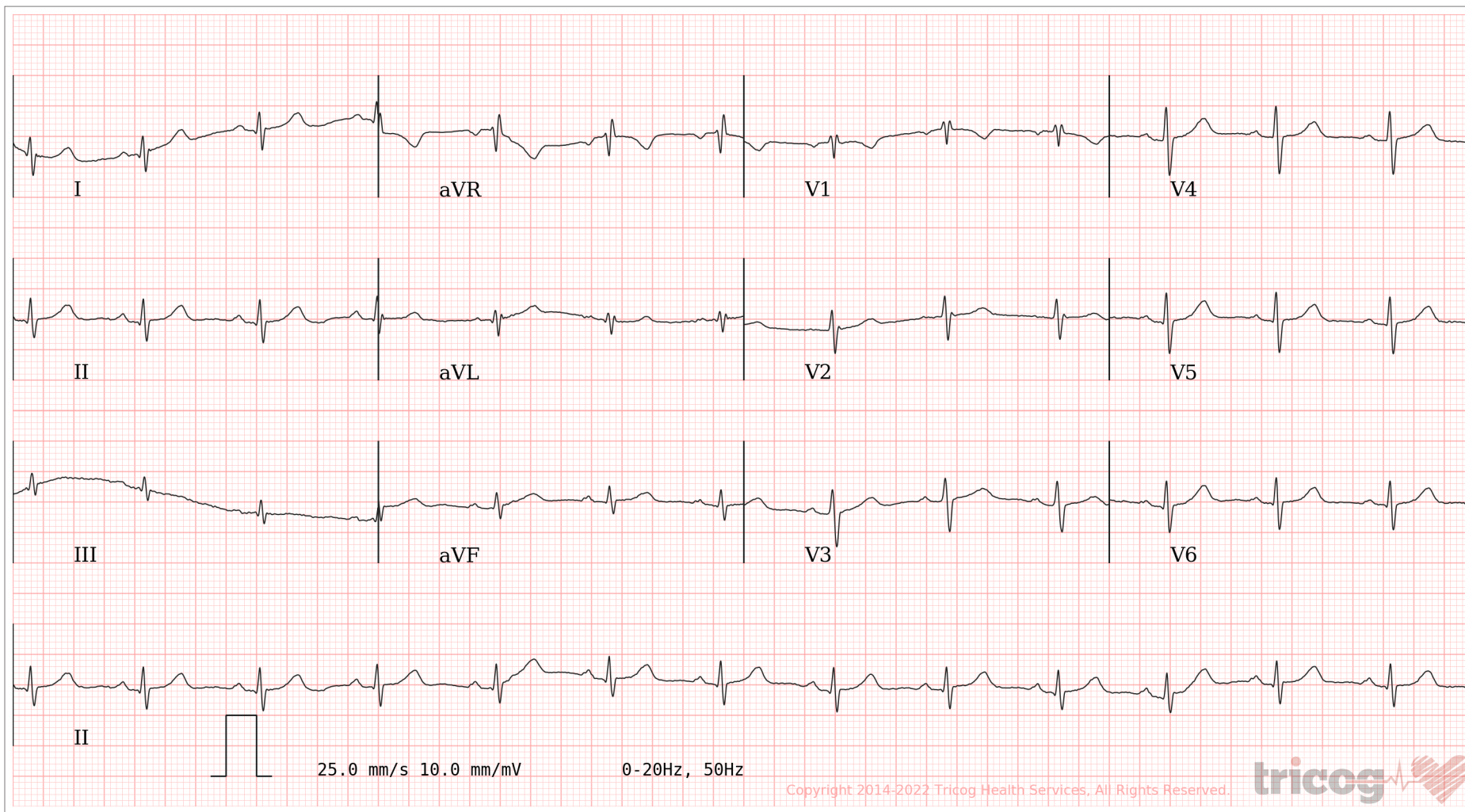


Age / Gender: 42/Female

Date and Time: 12th Nov 22 10:43 AM

Patient ID: CVAR0062322223

Patient Name: Mrs.SARIKA KUMARI-BOBS14842



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AR: 81bpm VR: 81bpm QRSD: 78ms QT: 368ms QTc: 427ms PRI: 148ms P-R-T: 42° 82° 37°

ECG Within Normal Limits: Low Voltage QRS, Sinus Rhythm. Please correlate clinically.

AUTHORIZED BY

Dr. Charit
MD, DM: Cardiology

63382

REPORTED BY

Dr. Preethi Chandramouli

72169

Disclaimer: Analysis in this report is based on ECG alone and should only 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.



CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi
Ph: 9235447795, 0542-3500227
CIN : U85110DL2003PLC308206



Patient Name	: Mrs.SARIKA KUMARI-BOBS14842	Registered On	: 12/Nov/2022 08:44:56
Age/Gender	: 42 Y 0 M 0 D /F	Collected	: 12/Nov/2022 09:45:34
UHID/MR NO	: CVAR.0000033466	Received	: 12/Nov/2022 10:32:36
Visit ID	: CVAR0062322223	Reported	: 12/Nov/2022 13:38:06
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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Blood Group (ABO & Rh typing) * , Blood

Blood Group	AB
Rh (Anti-D)	POSITIVE



S.N. Sinha
Dr.S.N. Sinha (MD Path)





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MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

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Complete Blood Count (CBC) **, Whole Blood

Haemoglobin	11.30	g/dl	1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl 1 Mo- 10.0-18.0 g/dl 3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl	
TLC (WBC)	8,600.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils)	60.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	35.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	2.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	< 1	ELECTRONIC IMPEDANCE
ESR				
Observed	24.00	Mm for 1st hr.		
Corrected	20.00	Mm for 1st hr.	< 20	
PCV (HCT)	35.00	%	40-54	
Platelet count				
Platelet Count	2.65	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.40	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	55.20	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.32	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	14.20	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	3.86	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	86.00	fl	80-100	CALCULATED PARAMETER
MCH	31.70	pg	28-35	CALCULATED PARAMETER
MCHC	36.90	%	30-38	CALCULATED PARAMETER





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Test Name	Result	Unit	Bio. Ref. Interval	Method
RDW-CV	13.70	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	49.30	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	5,160.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	172.00	/cu mm	40-440	



Dr. Shoaib Irfan (MBBS, MD, PDCC)





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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GLUCOSE FASTING , Plasma

Glucose Fasting	91.00	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD
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Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

Glucose PP

Sample: Plasma After Meal

130.00	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD
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Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.



DR. RITU BHATIA
MD (Pathology)





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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GLYCOSYLATED HAEMOGLOBIN (HBA1C) **, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.20	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	33.00	mmol/mol/IFCC		
Estimated Average Glucose (eAG)	102	mg/dl		

Interpretation:

NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes management.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

**Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.

Clinical Implications:

*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

*With optimal control, the HbA 1c moves toward normal levels.

*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated *Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy





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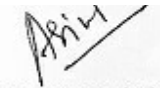
c. Alcohol toxicity d. Lead toxicity

*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

*Pregnancy d. chronic renal failure. Interfering Factors:

*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.




Dr. Anupam Singh
M.B.B.S, M.D.(Pathology)





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) Sample:Serum	8.50	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	0.50	mg/dl	0.5-1.2	MODIFIED JAFFES
Uric Acid Sample:Serum	7.90	mg/dl	2.5-6.0	URICASE
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	40.80	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	21.90	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	36.00	IU/L	11-50	OPTIMIZED SZAIZING
Protein	7.00	gm/dl	6.2-8.0	BIRUET
Albumin	4.30	gm/dl	3.8-5.4	B.C.G.
Globulin	2.70	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.59		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	114.00	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.70	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.10	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.60	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) , Serum				
Cholesterol (Total)	248.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	49.90	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	53	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
	145.06	mg/dl	10-33	CALCULATED
	725.30	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-P



S.N. Sinha
Dr.S.N. Sinha (MD Path)





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DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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URINE EXAMINATION, ROUTINE * , Urine

Color	LIGHT YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic (5.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	1-2/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	0-1/h.p.f			
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

SUGAR, FASTING STAGE * , Urine

Sugar, Fasting stage	ABSENT	gms%
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Interpretation:

- (+) < 0.5
- (++) 0.5-1.0
- (+++) 1-2
- (++++) > 2





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MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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SUGAR, PP STAGE * , Urine

Sugar, PP Stage ABSENT

Interpretation:

- (+) < 0.5 gms%
- (++) 0.5-1.0 gms%
- (+++) 1-2 gms%
- (++++) > 2 gms%



S.N. Sinha

Dr.S.N. Sinha (MD Path)





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DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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THYROID PROFILE - TOTAL **, Serum

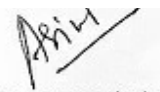
T3, Total (tri-iodothyronine)	95.36	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	5.50	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	6.22	μIU/mL	0.27 - 5.5	CLIA

Interpretation:

0.3-4.5	μIU/mL	First Trimester
0.5-4.6	μIU/mL	Second Trimester
0.8-5.2	μIU/mL	Third Trimester
0.5-8.9	μIU/mL	Adults 55-87 Years
0.7-27	μIU/mL	Premature 28-36 Week
2.3-13.2	μIU/mL	Cord Blood > 37Week
0.7-64	μIU/mL	Child(21 wk - 20 Yrs.)
1-39	μIU/mL	Child 0-4 Days
1.7-9.1	μIU/mL	Child 2-20 Week

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.




Dr. Anupam Singh
M.B.B.S, M.D. (Pathology)





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DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

X-RAY DIGITAL CHEST PA *

X-Ray Digital Chest P.A. View

- Lung fields are clear.
- Pleural spaces are clear.
- Both hilar shadows appear normal.
- Trachea and carina appear normal.
- Heart size within normal limits.
- Both the diaphragms appear normal.
- Soft tissues and Bony cage appear normal.

IMPRESSION

*** NO OBVIOUS DETECTABLE ABNORMALITY SEEN**



Dr Raveesh Chandra Roy (MD-Radio)





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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

LIVER

- The liver is normal in size **12.7 cm** in longitudinal span and has a normal homogenous echotexture. No focal lesion is seen.

PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein measures **8.9 mm** in caliber.
- Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- CBD measures **4.4 mm** in caliber.
- **Gall bladder absent (Post cholecystectomy status)**

PANCREAS

- The pancreas is normal in size and shape and has a normal homogenous echotexture. Pancreatic duct is not dilated.

KIDNEYS

- Right kidney is normal in size **9.3 x 3.5 cm** position and cortical echotexture.
- Left kidney is normal in size **9.2 x 4.0 cm** position and cortical echotexture.
- The collecting system of both the kidneys are not dilated.

SPLEEN

- The spleen is normal in size **8.2 cm** and has a normal homogenous echo-texture.

URINARY BLADDER

- Urinary bladder is normal. Bladder wall is normal in thickness and is regular.No calculus seen.Prevoid urine **volume 215 cc.**

UTERUS





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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

- Uterus is anteverted and normal in **size 86 x 47 x 40 mm/ 87 cc.**
- It has a homogenous myometrial echotexture.
- The endometrium is seen in midline. ET measures ~ **5.3 mm.**
- Cervix is normal.

ADNEXA & OVARIES

- Adnexa are normal.
- Both the ovaries are normal in size and echotexture.

FINAL IMPRESSION:-

- **Post cholecystectomy status**
- **Rest of the abdominal organs are normal**

Adv: Clinico-pathological correlation and follow-up.

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

(**) Test Performed at Chandan Speciality Lab.

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG, Tread Mill Test (TMT), PAP SMEAR FOR CYTOLOGICAL EXAMINATION



Ray

Dr Raveesh Chandra Roy (MD-Radio)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing *
365 Days Open *Facilities Available at Select Location

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Customer Care No.: +91-9918300637 E-mail: customercare.diagnostic@chandan.co.in Web: www.chandan.co.in

Home Sample Collection
1800-419-0002

Mar. 2018



भारत सरकार

GOVERNMENT OF INDIA



ਸਾਰਿਕਾ ਕੁਮਾਰੀ

Sarika Kumari

ਜਨਮ ਮਿਤੀ / DOB: 01/03/1980

ਔਰਤ / FEMALE



8971 0174 4769



P- 93, Shivaji Nagar Colony, Mahmoorganj,
Varanasi, Uttar Pradesh 221010, India

Latitude

Longitude

25.305438°

82.979043°

LOCAL 09:53:14

SATURDAY 11.12.2022

GMT 04:23:14

ALTITUDE 18 METER

Name of Company: Mediawheel
Name of Executive: Sauka Kumari
Date of Birth: 01/03/1980
Sex: Male / Female
Height: 149 CMs
Weight: 60 KGs
BMI (Body Mass Index): 27.0
Chest (Expiration / Inspiration) 92 / 100 CMs
Abdomen: 82 CMs
Blood Pressure: 132 / 86 mm/Hg
Pulse: 88 BPM - Regular / Irregular
RR: 17 Resp/Min
Ident Mark: Cut Mark on Rt eyebrow
Any Allergies: No
Vertigo: No
Any Medications: ① Hypertension - 5 yrs - (Med. Name Not Conf)
② Thyroid. Tab Thyroxin - Dmg. - 5 yrs.
Any Surgical History: ① Cholecystectomy - 2009, Dr. Army Hosp. Delhi
Habits of alcoholism/smoking/tobacco: No
Chief Complaints if any: Pain At Ankle joints. - 2 months.
Lab Investigation Reports: None
Eye Check up vision & Color vision: Normal
Left eye: Normal
Right eye: Normal
Near vision: Normal
Far vision: Normal
Dental check up: Normal

ENT Check up: *Normal*

Eye Checkup: *Normal*

Final impression

Certified that I examined *Sarika Kumari* S/o or D/o
is presently in good health and free from any cardio-respiratory/communicable
ailment, he/she is *fit/Unfit* to join any organization.

Client Signature :-

Sarika Kumari

.....
Signature of Medical Examiner

Name & Qualification - Dr. R. C. Roy (MBBS,MD)

Date....*12.1.11* /2022, Place - VARANASIS

Dr. R.C. ROY
MBBS, MD. (Radio Diagnosis)
Reg. No. - 26913

Chandan Diagnostic Cent-
99, Shivaji Nagar, Mahmoorganj,
Varanasi-221010 (U.P.)
Phone No.: 0542-2223252

CHANDAN HEALTH CARE LTD.

99-SHIVAJI NAGAR MAHMOORGANJ VARANASI-9839703068

Chandan Diagnostic Center
99, Shivaji Nagar, Mahmorganj
Varanasi-221010 (U.P.)
Phone No.: 0542-2223232

Ms. SARIKA KUMARI
Age : 42/F
Ref. by :
Indication1 :
Indication2 :
Indication3 :

ID : 62322223
Ht/Wt : 149/60
Recorded : 12/11/2022

TREADMILL TEST SUMMARY REPORT
Protocol: BRUCE
History: Hypertension, HYPERTHYROIDISM
Medication1 : TAB AMLODYPINE
Medication2 : TAB THYROXINE
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					131	132/86	172	-0.9	0.2	-0.4	
HYPERTENT	0:05	0:05			133	132/86	175	-0.8	0.3	-0.2	
VALSALVA					127	132/86	167	-0.7	0.3	-0.3	
STANDING					127	132/86	167	-0.7	0.3	-0.3	
STAGE 1	2:59	2:59	2.70	10.00	144	142/86	204	-1.5	0.4	-0.8	4.80
STAGE 2	5:59	2:59	4.00	12.00	158	152/86	240	-1.5	0.1	-0.9	7.10
EVENT	7:05	1:05	5.40	14.00	166	152/86	252	-2.1	0.0	-1.6	8.15
PEAK EXER	7:08	1:08			166	152/86	252	-2.1	0.0	-1.6	8.20
EVENT	0:35	0:35	0.00	0.00	147	152/86	223	-1.7	0.8	-1.2	
EVENT	1:01	1:01	0.00	0.00	140	152/86	212	-0.1	0.9	0.0	
EVENT	2:01	2:01	0.00	0.00	128	152/86	194	0.3	0.3	0.4	

RESULTS

Exercise Duration : 7.08 Minutes
Max Heart Rate : 166 bpm - 93 % of target heart rate 178 bpm
Max Blood Pressure : 152/86 mmHg
Max Work Load : 8.20 METS
Reason of Termination :

IMPRESSIONS

→ Target Heart Rate Achieved
→ No significant ST-T changes and peak exercise and recovery
→ TMT is negative for Reversible myocardial Ischemia

TMT is negative

Ankur Agarwal

Cardiologist

Dr. Ankita Krishna Agarwal
M.B.B.S., MD, DM
Cardiologist
Reg. No.-39794

Sarika Kumari

Ankur Agarwal

Ms. SARIKA, KUMARI

I.D. : 62322223

AGE/SEX : 42/F

RECORDED : 12/11/2022

RATE : 131 BPM

B.P. : 132/86 mmHg

SUPINE

PRETEST

ST @ 10mm/mV

80ms PostJ

RAW ECG



Ms. SARIKA KUMARI

I.D. : 62322223

AGE/SEX : 42/F

RECORDED : 12/11/2022

RATE : 133 BPM

B.P. : 132/86 mmHg

HYPERVENTILATION

PRETEST

STAGE TIME : 0:05

ST @ 10mm/mV

80ms PostJ

LINKED MEDIAN



Ms. SARIKA KUMARI

I.D. : 82322223

AGE/SEX : 42/F

RECORDED : 12/11/2022

RATE : 127 BPM

B.P. : 132/88 mmHg

VALSALVA

PRETEST

ST @ 10mm/mV

80ms PostJ

LINKED MEDIAN



Ms. SARIKA KUMARI

STANDING
PRETEST

ST @ 10mm/mV
80ms PostJ

I.D. : 62322223

RATE : 127 BPM

AGE/SEX : 42/F

B.P. : 132/86 mmHg

RECORDED : 12/11/2022

LINKED MEDIAN



ME. SARIKA KUMARI

I.D. : 62322223

AGE/SEX : 42/F

RECORDED : 12/11/2022

RATE : 144 BPM

B.P. : 142/86 mmHg

BRUCE

EXERCISE 1

PHASE TIME : 2:59

STAGE TIME : 2:59

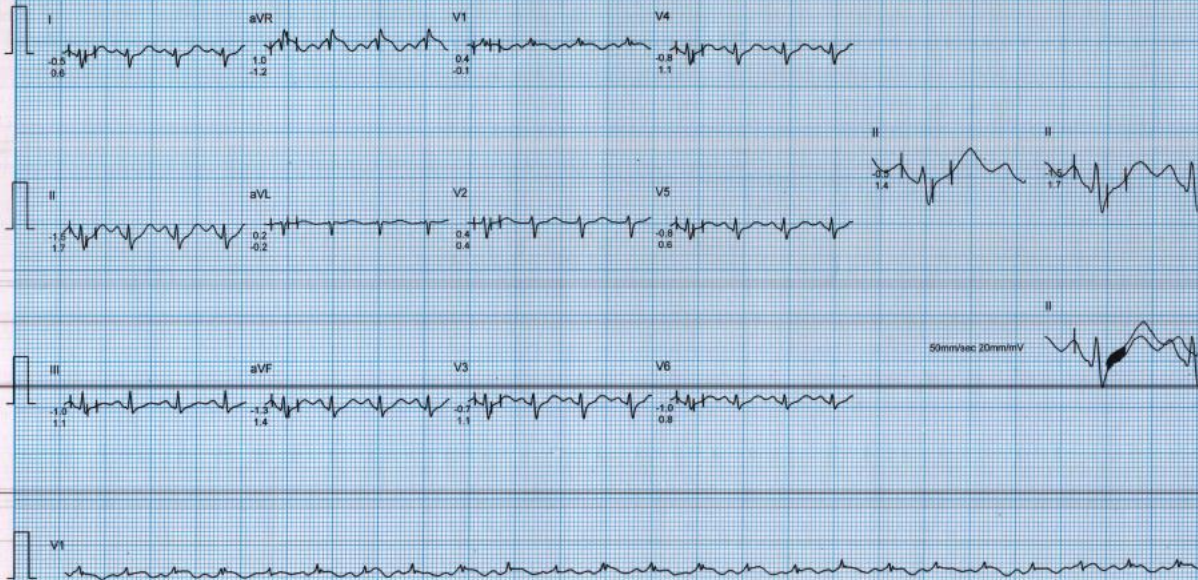
ST @ 10mm/mV

80ms PostJ

SPEED : 2.7 Km./Hr

GRADE : 10.0 %

LINKED MEDIAN



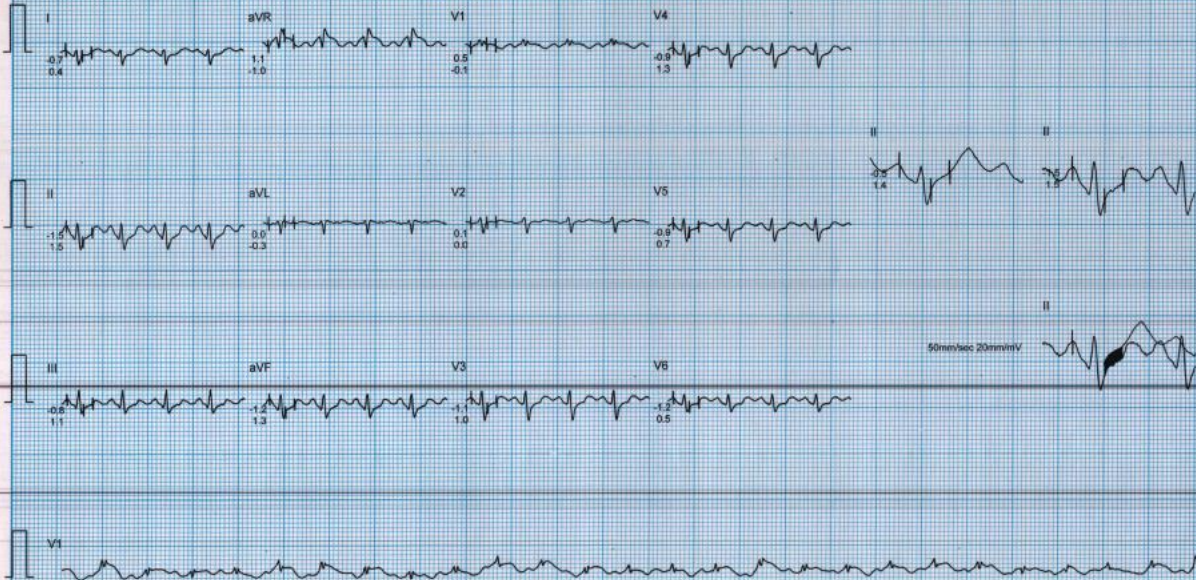
Ms. SARIKA KUMARI
 I.D. : 62322223
 AGE/SEX : 42/F
 RECORDED : 12/11/2022

RATE : 158 BPM
 B.P. : 152/86 mmHg

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

ST @ 10mm/mV
 80ms Post-I
 SPEED : 4.0 Km./Hr
 GRADE : 12.0 %

LINKED MEDIAN



Ms. SARIKA KUMARI
I.D. : 62322223
AGE/SEX : 42/F
RECORDED : 12/11/2022

RATE : 166 BPM
B.P. : 152/86 mmHg

BRUCE
EXERCISE 3 (EVENT)
PHASE TIME : 7:05
STAGE TIME : 1:05

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

RAW E.C.G.



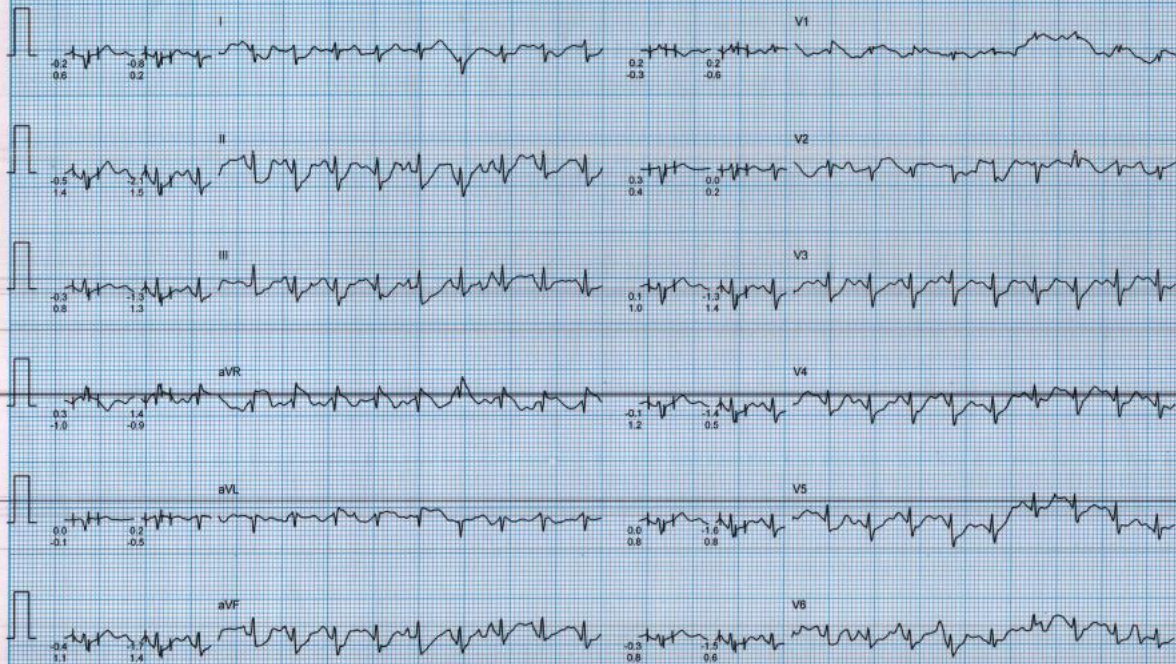
Ms. SARIKA KUMARI
 I.D. : 62322223
 AGE/SEX : 42/F
 RECORDED : 12/11/2022

RATE : 166 BPM
 B.P. : 152/86 mmHg

BRUCE
 PEAK EXER
 PHASE TIME : 7:08
 STAGE TIME : 1:08

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

MIXED E.C.G.



Ms. SARIKA KUMARI

I.D. : 62322223

AGE/SEX : 42/F

RECORDED : 12/11/2022

RATE : 147 BPM

B.P. : 152/86 mmHg

BRUCE

RECOVERY (EVENT)

PHASE TIME : 0.35

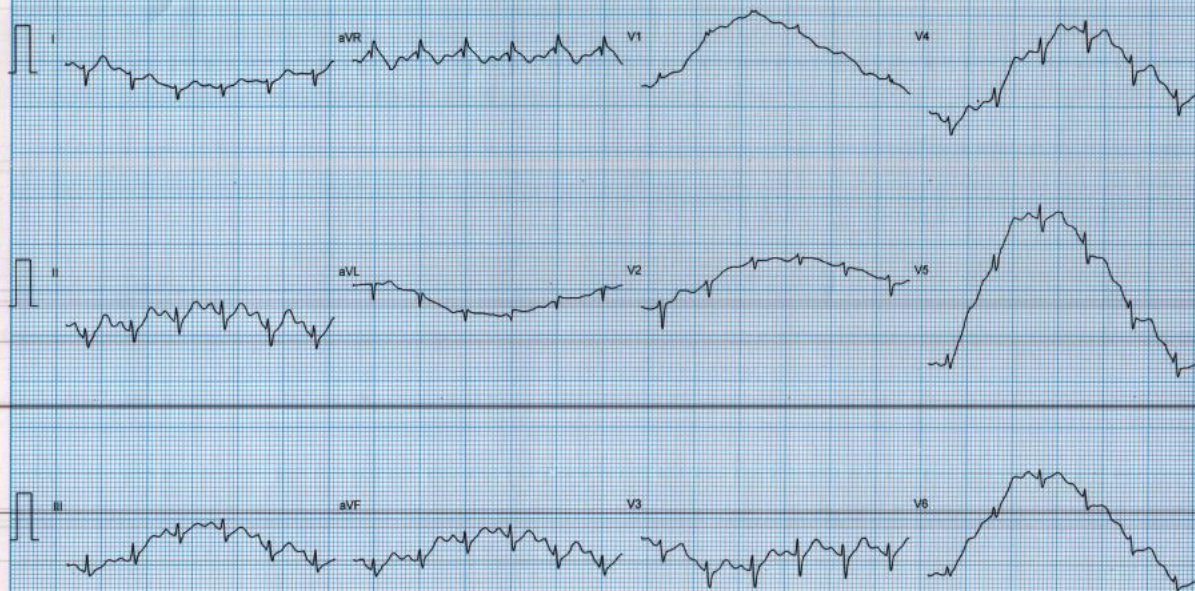
ST @ 10mm/mV

80ms PostJ

SPEED : 0.0 Km./hr.

GRADE : 0.0 %

RAW E.C.G.



Ms. SARIKA KUMARI

I.D. : 62322223

AGE/SEX : 42/F

RECORDED : 12/11/2022

RATE : 140 BPM

B.P. : 152/86 mmHg

BRUCE

RECOVERY (EVENT)

PHASE TIME : 1:01

ST @ 10mm/mV

80ms PostJ

SPEED : 0.0 Km /Hr

GRADE : 0.0 %

RAW E.C.G.



Ms. SARIKA KUMARI

I.D. : 62322223

AGE/SEX : 42/F

RECORDED : 12/11/2022

RATE : 128 BPM

B.P. : 152/86 mmHg

BRUCE

RECOVERY (EVENT)

PHASE TIME : 2:01

ST @ 10mm/mV

80ms PostJ

SPEED : 0.0 Km /Hr

GRADE : 0.0 %

RAW E.C.G

