

738997166

wt - 61 kg
H - 163 cm

BP - 110/70
P - 74 bpm

CBC - 14.3 / 4.94 / 4.17 / 136 / 10

HbA1c - 5.6

RBS - F - 101.0 / PP - 129.0

Creatinine - 0.95

U. Acid - 3.2

Lipid - 148.0 / 106.0 / 42.0 / 84.80

LFT - 26 / 34 / 84

Mr. Bijendra Kumar Navin

Age - 38 y/m

24/02/23

For Annual Checkup
No Hb DMU/HM

Patient feels dizziness
occasionally when standing in
silly position

P

cap VITAMIN D3 1000 IU
300

2nd Act - 3000 IU
300

Dr. Animesh Choudhary

MD Medicine

Reg. No. CGMC 3583/2011

Apollo Clinic, Raipur



M.R. BUENDRA KUMAR
Male 39 years

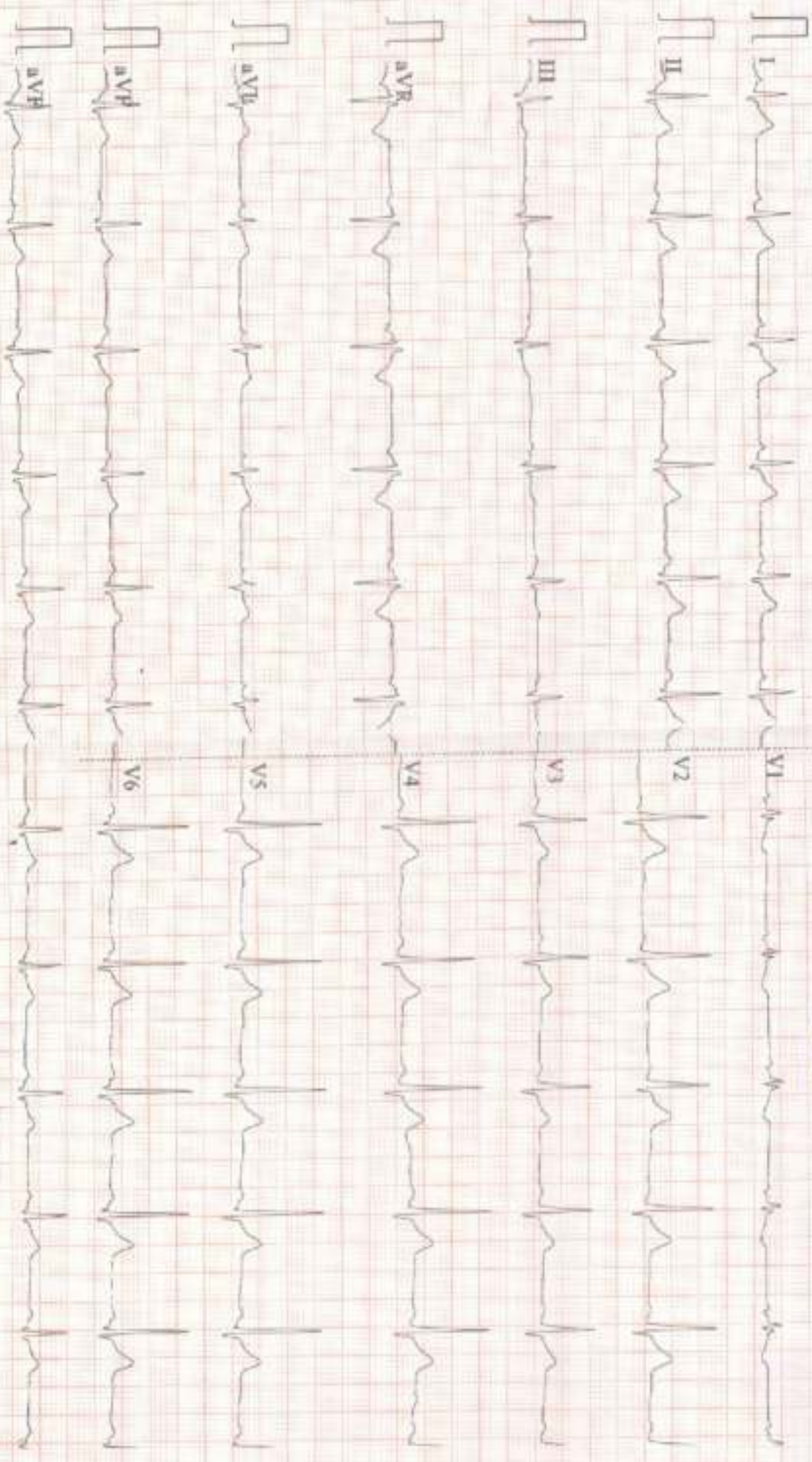
Lead	PR	QRS	QT/QTc	P/QRST	RV5/SV1
	: 104 ms	: 98 ms	: 364/385 ms	: 46/49/37	: 1.55/1.07 mV

Sinus rhythm
Normal ECG

Report Confirmed by:



Dr. Animesh Choudhary
MD Medicine
Reg. No. CGMC 3583/2011
Apollo Clinic, Raipur



0.05-45Hz AC 50 25mm/s 10mm/mV 2*5.0s+1r 67 CAR 9108 D V1.43 Glasgow V28.60 APOLLO CLINIC RAIPUR

PATIENT NAME:- MR. BIJENDRA KUMAR NAVIN
REF BY :- BOB

AGE/SEX: 39 YRS/M
DATE:- 24.02.2024

USG ABDOMEN

Liver : Liver is normal in size cm, smooth in outline with echotexture. IHBR's are not dilated. CBD is not dilated. Portal vein and hepatic veins are normal.

Gall bladder : Distended & normal.

Pancreas & Paraaortic Region : Normal.

Spleen : Is normal size measures cc cm and echotexture.

Kidneys	RIGHT	LEFT
SIZE	10.40X4.63cm	10.52X4.17cm
CORTICAL ECHOGENICITY	Normal	Normal
CORTICOMEDULLARY DIFFERENTIATION	Maintained	Maintained
PCS	Not dilated	Not dilated
Any other remarks	Nil	Nil
Urinary bladder - Distended & normal		

Prostate: is normal in size measures weight gm shape & echotexture.

No free fluid in abdomen.

Visualized bowel loops are normal.

No significant intra-abdominal lymphadenopathy seen.

IMPRESSION:

USG abomen within normal limit.

Advised clinical correlation/further evaluation if clinically indicated.

Dr. Zeeshan Ateeb Dani
MBS, MBBS
Consultant
DR. ZEESHAN ATEEB DANI
(MD)
CONSULTANT RADIOLOGIST

This report is for personal use of the doctor only and the liability completely rests with the clinician. ApolloClinic has its limitations in scope and in retroperitoneal organs. All complete abdominal studies cannot be detected on ultrasound. This report is not for reimbursement purposes.

LICENSEE : SAMRIDHI AROGYAM PVT. LTD.

Apollo Clinic @ Tiara Complex A.T. Classic Near Ashoka Ratan, VIP Estate, Shankar Nagar, Raipur (C.G.)

Email : raipur1@apolloclinic.com | Website : www.apolloclinic.com

Online appointments: www.askapollo.com | Online reports: https://phr.apolloclinic.com

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0771 4033341

EXAMINATION OF EYES :- (BY OPHTHALMOLOGIST)

Patient Name Mr. Bijendra Kumar Navin Date 24/02/24
 Sex/Age 39/M MR No Employee Id

EXTERNAL EXAMINATION				
SQUINT				
NYSTAGMUS				
COLOUR VISION				
FUNDUS:(RE):-		(LE):-		
<u>WNL</u>		<u>WNL</u>		
INDIVIDUAL COLOUR IDENTIFICATION				
<u>Good</u>				
DISTANT VISION:(RE):-		(LE):-		
<u>PC-24/6</u>		<u>PC-30/6</u>		
NEAR VISION:(RE):-		(LE):-		
<u>NG</u>		<u>NG</u>		
NIGHT BLINDNESS				
<u>NAD</u>				
	SPH	CYL	AXIS	ADD
RIGHT	<u>-3.0</u>			
LEFT	<u>-4.0</u>			
REMARKS :-				

Dr. V. [Signature]
 MBBS, MS (O) (Dist)
 Reg. No. [Number] 2006



NAME OF PATIENT: MR. BIJENDRA KUMAR NAVIN

AGE: 39YRS/MALE

REFERRED BY: BOB

DATE: 24/02/2024

CHEST X - RAY PA VIEW

FINDINGS:

- Both the domes of diaphragm and CP angles are normal.
- Both the hila and mediastinum are normal.
- Both the lung fields are clear. No e/o focal parenchymal lesion.
- Cardio-thoracic ratio is normal.
- Soft tissues and bony cage are unremarkable.

IMPRESSION:

- NO SIGNIFICANT ABNORMALITY SEEN.

Advised: Clinical correlation and further evaluation if clinically indicated.



Dr. Zeeshan Ateeb Dani
MBBS, MD
Consultant Radiologist
DR. ZEESHAN ATEEB DANI
(MD)
CONSULTANT RADIOLOGIST

This report is for perusal of the doctor only not the definitive diagnosis; findings have to be clinically correlated. This report is not for medico-legal purposes.



Patient Name : Mr. BIJENDRA KUMAR NAVIN
UHID/ MR No : 9317
Visit Date : 24/02/2024
Sample Collected On : 24/02/2024 01:41PM
Ref. Doctor : SELF
Sponsor Name :

Age/Gender : 39 Y Male
OP Visit No : OPD-UNIT-II-2
Reported On : 24/02/2024 05:33PM

HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
HEMOGRAM			
Haemoglobin(HB) Method: CELL COUNTER	14.3	gm/dl	12 - 17
Erythrocyte (RBC) Count, Method: CELL COUNTER	4.94	mill/cu.mm.	4.20 - 6.00
PCV (Packed Cell Volume) Method: CELL COUNTER	42.90	%	39 - 52
MCV (Mean Corpuscular Volume) Method: CELL COUNTER	86.8	fL	76.00 - 100
MCH (Mean Corpuscular Haemoglobin) Method: CELL COUNTER	28.9	pg	26 - 34
MCHC (Mean Corpuscular Hb Concn.) Method: CELL COUNTER	33.3	g/dl	32 - 35
RDW (Red Cell Distribution Width) Method: CELL COUNTER	13.0	%	11- 16
Total Leucocytes (WBC) Count Method: CELL COUNTER	4.17	cells/cumm	3.50 - 10.00
Neutrophils Method: CELL COUNTER	55	%	40.0 - 73.0
Lymphocytes Method: CELL COUNTER	35	%	15.0 - 45.0
Eosinophils Method: CELL COUNTER	03	%	1-6%
Monocytes Method: CELL COUNTER	07	%	4.0 - 12.0
Basophils Method: CELL COUNTER	00	%	0.0 - 2.0

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
path

Page 5 of 8

Dhananjay
DR DHANANJAY RAMCHANDRA PRASA
M.D. PATHOLOGY



Patient Name : Mr. BIJENDRA KUMAR NAVIN
 UHID/ MR No : 9317
 Visit Date : 24/02/2024
 Sample Collected On : 24/02/2024 01:41PM
 Ref. Doctor : SELF
 Sponsor Name :

Age/Gender : 39 Y Male
 OP Visit No : OPD-UNIT-II-1
 Reported On : 24/02/2024 05:33PM

HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
Platelet Count Method: CELL COUNTER	136	lacs/cu.mm	150-400
ESR- Erythrocyte Sedimentation Rate Method: Westergren's Method	10	mm /HR	0 - 10
Blood Group (ABO Typing)			
Blood Group (ABO Typing)	B		
RhD factor (Rh Typing)	POSITIVE		

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
 path

Page 6 of 6

Dhananjay
 DR DHANANJAY RAMCHANDRA PRASA
 M.D. PATHOLOGY

Patient Name : Mr. BIJENDRA KUMAR NAVIN
 UHID/ MR No : 9317
 Visit Date : 24/02/2024
 Sample Collected On : 24/02/2024 01:41PM
 Ref. Doctor : SELF
 Sponsor Name :

Age/Gender : 39 Y Male
 OP Visit No : OPD-UNIT-II-1
 Reported On : 24/02/2024 05:33PM

BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
HbA1c (Glycosalated Haemoglobin)	5.6	%	Non-diabetic: <=5.6, Pre-Diabetic 5.7-6.4, Diabetic: >=6.5

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
 - HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
 - Trends in HbA1c are a better indicator of diabetic control than a solitary test.
 - Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammation.
- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
 - HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
 - Trends in HbA1c are a better indicator of diabetic control than a solitary test.
 - Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
 - To estimate the eAG from the HbA1C value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$
 - Interference of Haemoglobinopathies in HbA1c estimation.
 - For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
 - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status.
 - Heterozygous state dete

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
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Page 4 of 8

DR DHANANJAY RAMCHANDRA PRASA
 M.D. PATHOLOGY

Patient Name : Mr. BIJENDRA KUMAR NAVIN
UHID/ MR No : 9317
Visit Date : 24/02/2024
Sample Collected On : 24/02/2024 01:41PM
Ref. Doctor : SELF
Sponsor Name :

Age/Gender : 39 Y Male
OP Visit No : OPD-UNIT-II-2
Reported On : 24/02/2024 05:33PM

BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
GLUCOSE - (POST PRANDIAL)			
Glucose -Post prandial Method: REAGENT GRADE WATER	129.0	mg/dl	70-140
GLUCOSE (FASTING)			
Glucose- Fasting SUGAR REAGENT GRADE WATER	101.0	mg/dl	70 - 120
KFT - RENAL PROFILE - SERUM			
BUN-Blood Urea Nitrogen METHOD: Spectrophotometric	10	mg/dl	7 - 20
Creatinine METHOD: Spectrophotometric	0.95	mg/dl	0.6-1.4
Uric Acid Method: Spectrophotometric	3.2	mg/dL	2.6 - 7.2

End of Report
Results are to be correlated clinically

Lab Technician / Technologist
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Page 1 of 6

Dhananjay
DR DHANANJAY RAMCHANDRA PRASAD
M.D. PATHOLOGY



Patient Name : Mr. BIJENDRA KUMAR NAVIN
 UHID/ MR No : 9317
 Visit Date : 24/02/2024
 Sample Collected On : 24/02/2024 01:41PM
 Ref. Doctor : SELF
 Sponsor Name :

Age/Gender : 39 Y Male
 OP Visit No : OPD-UNIT-II-3
 Reported On : 24/02/2024 05:33PM

BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
LIPID PROFILE TEST (PACKAGE)			
Cholesterol - Total	148.0	mg/dl	Desirable: < 200 Borderline High: 200-239 High: >= 240
Triglycerides level	106.0	mg/dl	Normal: < 150 Borderline High: 150-199 Very High: >=500
Method: Spectrophotometric HDL Cholesterol	42.0	mg/dl	Major risk factor for heart disease: < 40 Negative risk factor for heart disease: >60
Method: Spectrophotometric LDL Cholesterol	84.80	mg/dl	Optimal: < 100 Near Optimal: 100 - 129 Borderline High: 130-159 High: 160-189 Very High >=190
Method: Spectrophotometric VLDL Cholesterol	21.20	mg/dl	6 - 38
Total Cholesterol/HDL Ratio	3.52		3.5-5
Method: Spectrophotometric			

End of Report
 Results are to be correlated clinically

Lab Technician / Technologist
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DR DHANANJAY RAMCHANDRA PRASAD
 M.D. PATHOLOGY

Page 2 of 6



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Patient Name : Mr. BIJENDRA KUMAR NAVIN
 UHID/ MR No : 9617
 Visit Date : 24/02/2024
 Sample Collected On : 24/02/2024 01:41PM
 Ref. Doctor : SELF
 Sponsor Name :

Age/Gender : 39 Y Male
 OP Visit No : OPD-UNIT-II-5
 Reported On : 24/02/2024 05:33PM

BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
LIVER FUNCTION TEST			
Bilirubin - Total Method: Spectrophotometric	0.9	mg/dl	0.1- 1.2
Bilirubin - Direct Method: Spectrophotometric	0.3	mg/dl	0.05-0.3
Bilirubin (Indirect) Method: Calculated	0.60	mg/dl	0 - 1
SGOT (AST) Method: Spectrophotometric	26	U/L	0 - 40
SGPT (ALT) Method: Spectrophotometric	34	U/L	0 - 41
ALKALINE PHOSPHATASE	84	U/L	25-147
Total Proteins Method: Spectrophotometric	6.5	g/dl	6 - 8
Albumin Method: Spectrophotometric	4.2	mg/dl	3.4 - 5.0
Globulin Method: Calculated	2.3	g/dl	1.8 - 3.6
A/G Ratio Method: Calculated	1.82	%	1.1 - 2.2

End of Report
 Results are to be correlated clinically

Lab Technician / Technologist
 path

Page 3 of 6

Dhananjay
DR DHANANJAY RAMCHANDRA PRASAD
 M.D. PATHOLOGY

Patient Name : Mr. BIJENDRA KUMAR NAVIN
 UHID/ MR No : 9317
 Visit Date : 24/02/2024
 Sample Collected On : 24/02/2024 01:41PM
 Ref. Doctor : SELF
 Sponsor Name :

Age/Gender : 39 Y Male
 OP Visit No : OPD-UNIT-II-1
 Reported On : 24/02/2024 05:33PM

CLINICAL PATHOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
URINE ROUTINE EXAMINATION			
Physical Examination			
Volum of urine	30ML		Clear
Appearance	Clear		Colourless
Colour	Pale Yellow		1.001 - 1.030
Specific Gravity	1.020		
Reaction (pH)	5.0		
Chemical Examination			
Protein(Albumin) Urine	Absent		Absent
Glucose(Sugar) Urine	Absent		Absent
Blood	Absent		Absent
Leukocytes	Absent		Absent
Ketone Urine	Absent		Absent
Bilirubin Urine	Absent		Absent
Urobilinogen	Absent		Absent
Nitrite (Urine)	Absent		Absent
Microscopic Examination			
RBC (Urine)	NIL	/hpf	0 - 2
Pus cells	1-2	/hpf	0 - 5
Epithelial Cell	Occasional	/hpf	0 - 6
Crystals	Not Seen	/hpf	Not Seen
Bacteria	Not Seen	/hpf	Not Seen
Budding yeast	Not Seen	/hpf	

End of Report
 Results are to be correlated clinically

Lab Technician / Technologist
 path

Page 1 of 2

Dhananjay
 DR DHANANJAY RAMCHANDRA PRASA
 M.D. PATHOLOGY



Patient Name : Mr. BRIJENDRA KUMAR NAVIN	Collected : 24/Feb/2024 05:15PM
Age/Gender : 39 Y 0 M 0 D /M	Received : 24/Feb/2024 05:27PM
UHID/MR No : DSUS.0000006535	Reported : 24/Feb/2024 06:21PM
Visit ID : DSUSOPV7615	Status : Final Report
Ref Doctor : APOLLO CLINIC	Client Name : PUF APOLLO CLINIC SAMRIDHI AR
IPOP NO :	Patient location : Raipur, Raipur

DEPARTMENT OF IMMUNOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.17	ng/mL	0.6-1.81	CLIA
THYROXINE (T4, TOTAL)	8.90	µg/dL	3.2-12.6	CLIA
THYROID STIMULATING HORMONE (TSH)	16.000	µIU/mL	0.35-5.5	CLIA

Comment:

For pregnant females

Bio Ref Range for TSH in µIU/ml (As per American Thyroid Association)

First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0

1. TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
2. TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
3. Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
4. Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goiter, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma

*** End Of Report ***



MR B. Jindal
DK-399.

Hospital Basic Diet Soft Diet

1800, ^{Calorie} ~~Calorie~~ 40/60 gram protein High Fiber Diet

- 7am - गर्म पानी 100ml
- 8am - Black Tea cup + Merry Biscuit या खारा Biscuit.
- 9am - उयना/पहाली सेवई/दलिया 1 कटोरी
- 10am - फल-1
- 11am - Daal पानी 100ml Mung Daal पानी
- 12 O'clock Lunch - पतली मुंग खिचड़ी - 1 कटोरी, Daal - 1 कटोरी, Boil Veg, लौकी/तोखई, कददू, कच्चा परांता
- 2pm - नारियल पानी 50ml
- 4pm - Boil Veg Soup [1 Cup]
- 6pm - Daal पानी [100ml]
- 8pm - Mung add Dnily - (1 कटोरी) Boil Veg - (1 कटोरी)
- 10pm - Low fat Milk 100ml.

1. Take a Soft Diet/Boil Veg, Mix Veg all type salad, ताखा ^{Curd} ~~Curd~~ Low fat milk wheat.
2. Teke a food (थोड़ी थोड़ी मात्रा में ले)
3. Avoide, Spicy, Oily, Meda, Deep try food. Strong Tea, Coffee.
4. Take a trust juic, soup, Dal, water, Daliya, Soyabeen पीस कर food में add करें।
5. Daliya water coconut water & Juice Lemon water.

① - Panna Khet,
② - 11 P.M. - 11.30



R_EMail:

IR BIJENDRA / 39 Yrs / M / 163 Cms / 61 Kg
24 / 02 / 2024

Time	Duration	Speed(Km/h)	Elevation	METS	Rate	%THR	BP	RPP	PVC	Comments
00:10	0:10	00.0	00.0	01.0	086	48%	110/70	094	00	
00:13	0:03	00.0	00.0	01.0	086	48%	110/70	094	00	
03:13	3:00	02.7	10.0	04.7	124	69%	116/76	143	00	
06:13	3:00	04.0	12.0	07.1	140	77%	120/80	168	00	
07:05	0:52	05.5	14.0	08.0	148	81%	120/80	175	00	
07:35	0:30	00.6	00.0	04.1	140	77%	120/80	168	00	
08:05	1:00	00.6	00.0	01.1	122	67%	122/82	148	00	
09:05	2:00	00.0	00.0	01.0	113	62%	122/82	137	00	
09:09	2:03	00.0	00.0	01.0	113	62%	122/82	137	00	

WINGS :

- Exercise Time : 08:52
- Max HR Attained : 146 bpm (81% of Target 181)
- Max BP Attained : 122/82 (mm/Hg)
- Max Workload Attained : 8 Fair response to induced stress
- Test Objective : GHD/FEWAS/SAFE/ASSAS
- Test End Reasons : Test Complete, Heart Rate Achieved

PORT :

STRESS TEST IS NEGATIVE FOR REVERSIBLE MYOCARDIAL ISCHEMIA WITH FAIR FUNCTION CAPACITY



(Handwritten signature)

Doctor : DR DEEPAN DAS MBBS DIP CARDIO



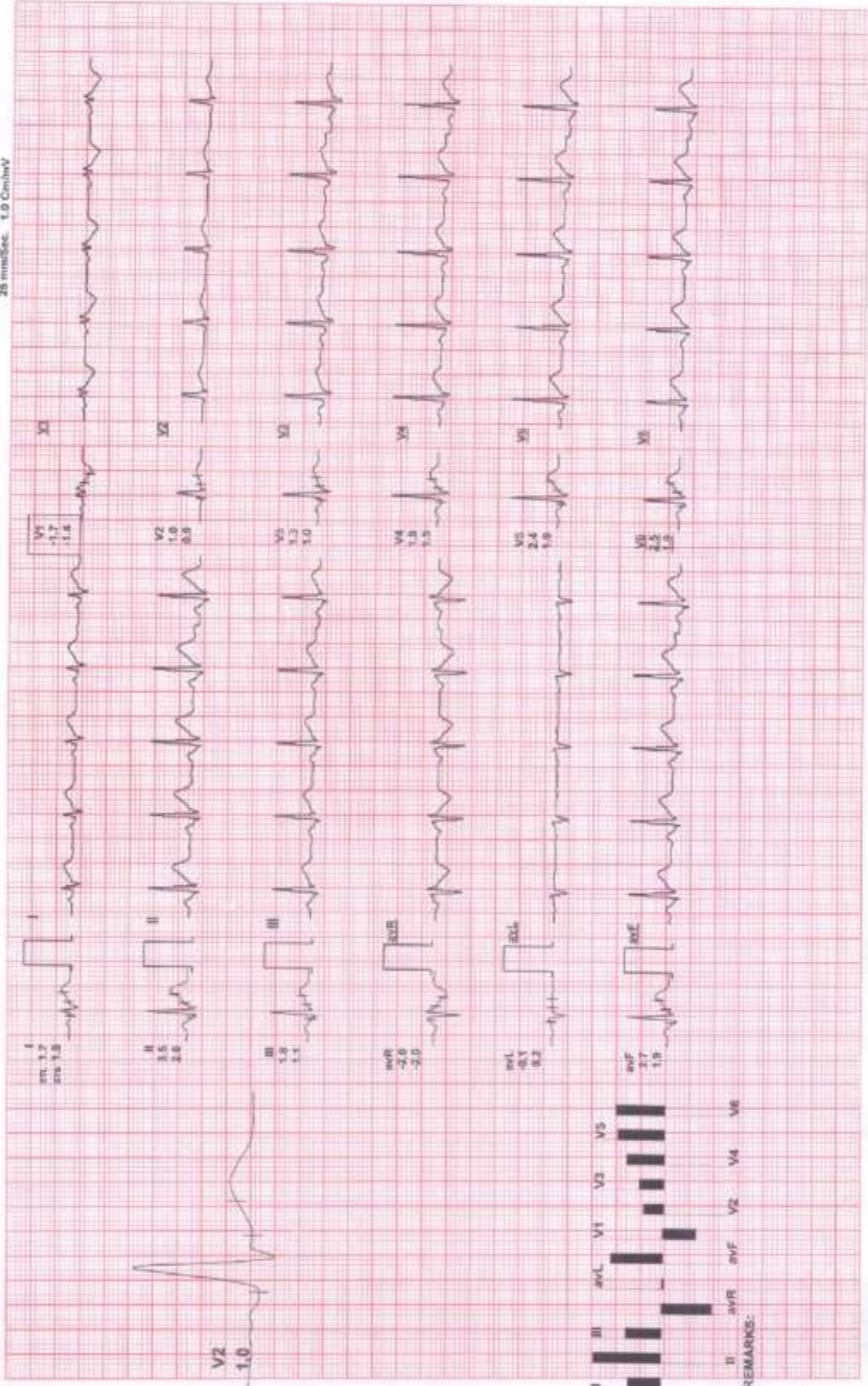
111 / MR BUENDRA / 39 Yrs / M / 163 Cms / 61 Kg / HR : 86

Date: 24 / 02 / 2024

METS: 1.0/ 86 bpm 48% of THR BP: 110/70 mmHg Combined Medialnat BLC Onv Natch Onv HF 0.05 Hz/LF 35 Hz

ExTime: 00:00 0.0 Km/hp, 0.0%
25 mm/Sec. 1.0 Cm/hp

4X 80 mS Post J



111 / MR BIJENDRA / 39 Yrs / M / 163 Cms / 61 Kg / HR : 86

Date: 24 / 02 / 2024

METS: 1.0/ 86 bpm 48% of THR BP: 110/70 mmHg Combined Mediana/ BLC On/ HF 0.05 Hz/ LF 35 Hz

ExTime: 00:00 0.0 Kmph, 0.0%
25 mm/Sec. 1.0 Cm/mV

4X 60 mS Post J



REMARKS:



BRUCE: Stage 1 (3:00)

111 / MR BUENDRA / 39 Yrs / M / 163 Cms / 61 Kg / HR : 124

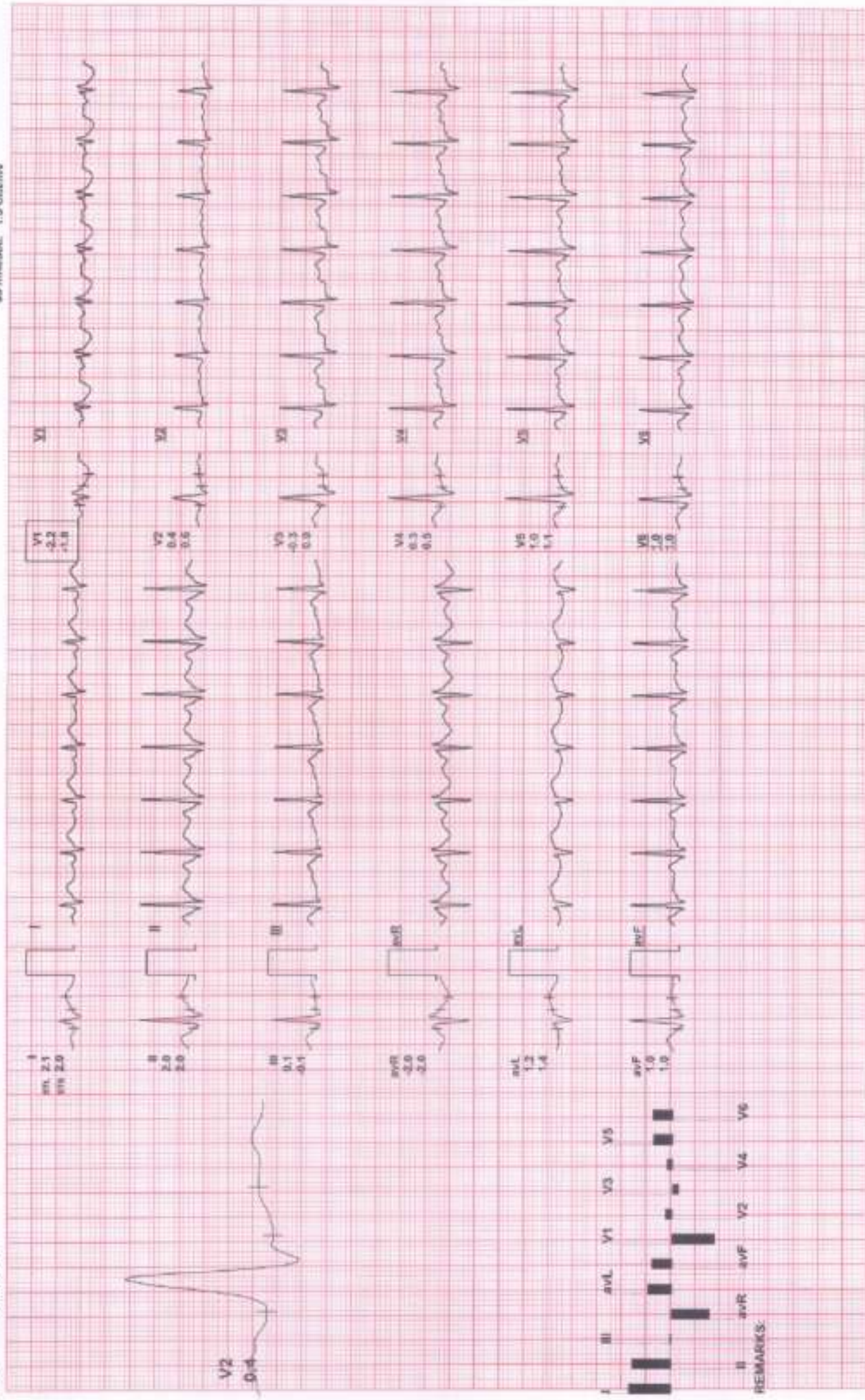
Date: 24 / 02 / 2024

METS: 4.7/124 bpm 69% of THR BP: 116/76 mmHg Combined Median/ BLD Crv Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 03:00 2.7 Kmph, 10.0%

4X 60 ms Post J

25 mm/Sec, 1.0 Cm/mV





BRUCE: Stage 2(3:00)

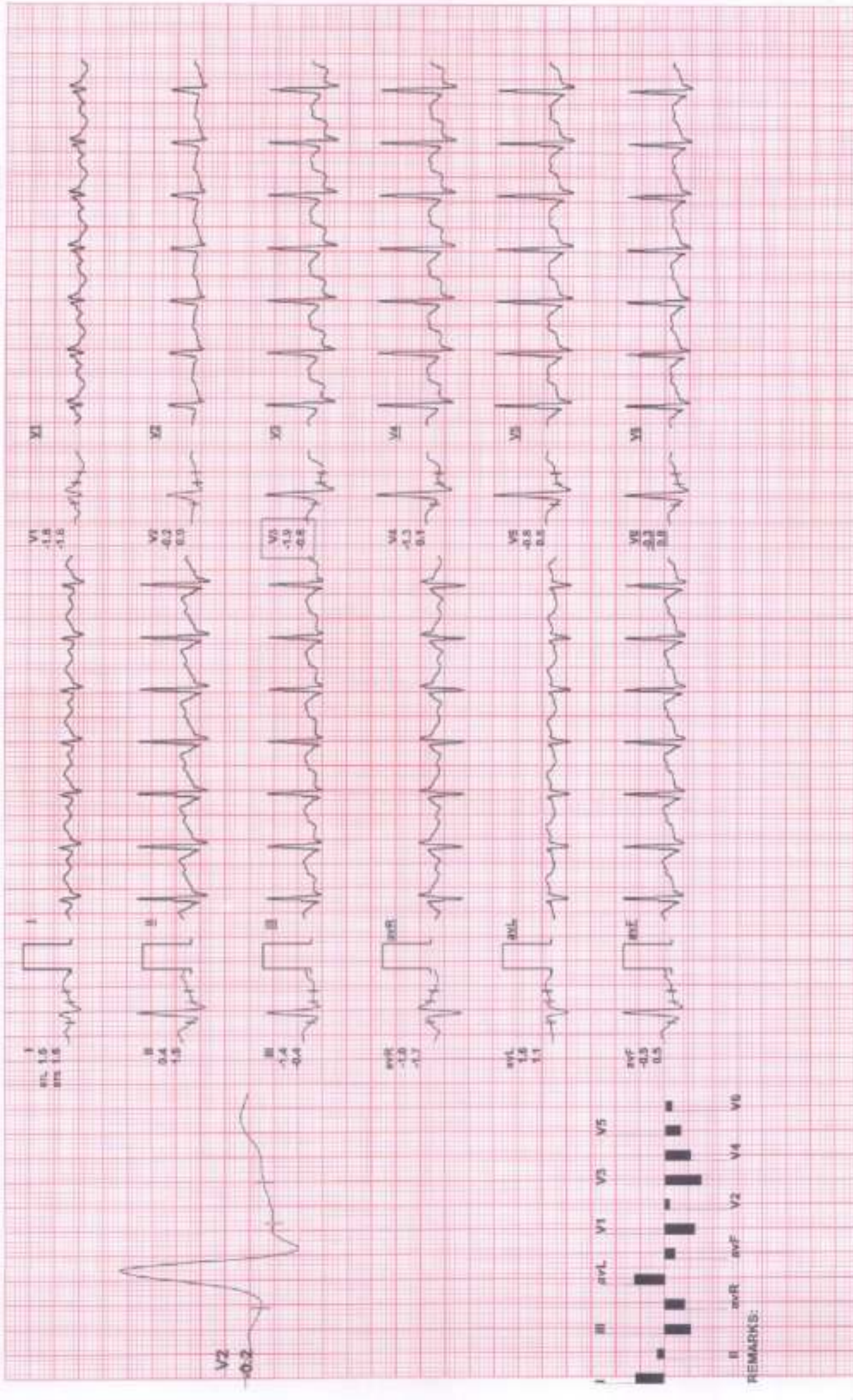
111 / MR BUJENDRA / 39 Yrs / M / 163 Cms / 61 Kg / HR : 140

Date: 24 / 02 / 2024

METS: 7.1 / 140 bpm 77% of THR BP: 120/80 mmHg Combined Medians/ BLC On/ Natch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 06:06 4.0 Kmph, 12.0%
25 mm/sec. 1.0 Cm/mV

4X 60 mS Peet J



REMARKS:

111 / MR BIJENDRA / 39 Yrs / M / 163 Cms / 61 Kg / HR : 146

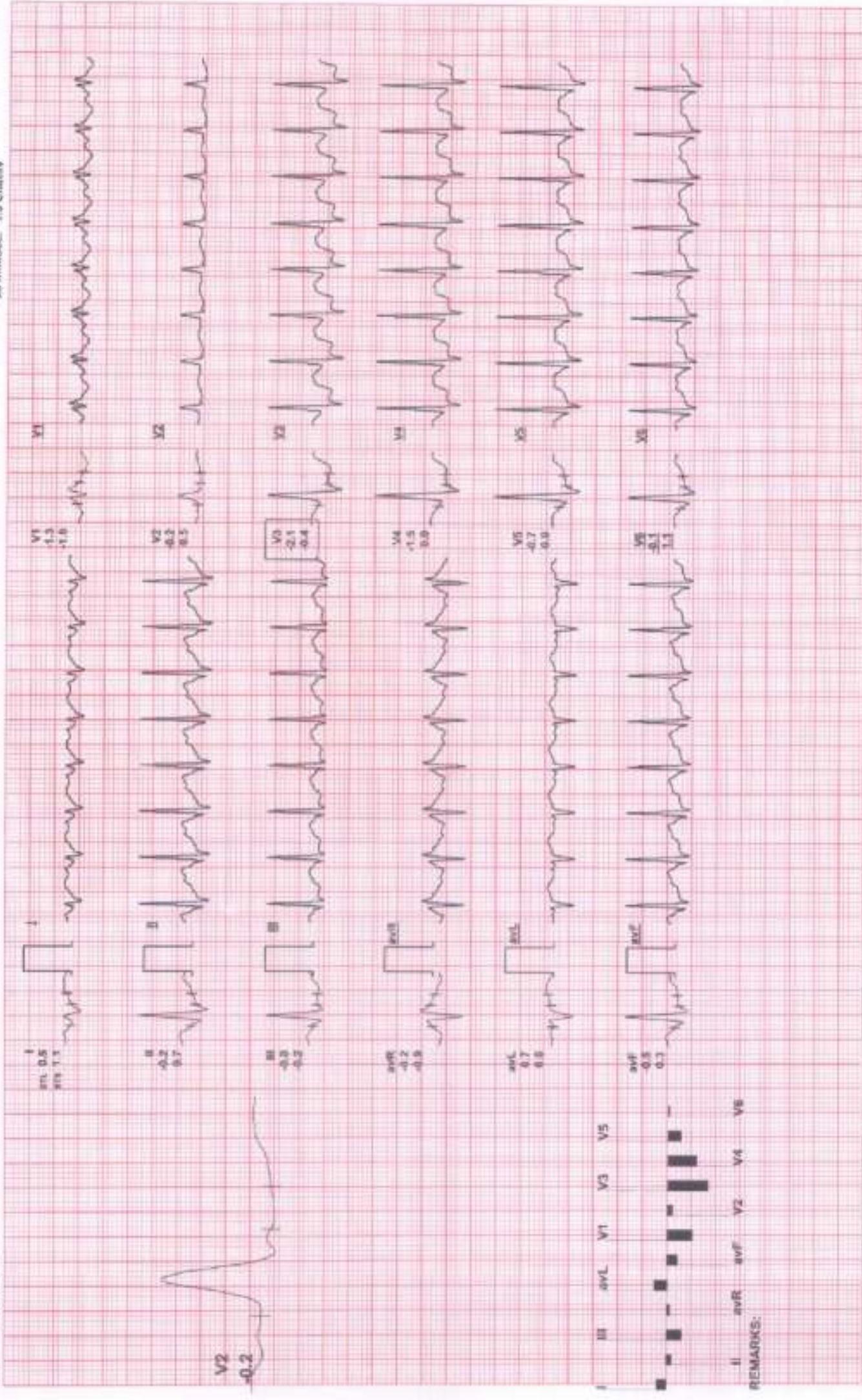
Date: 24 / 02 / 2024

METS: 8.0/ 146 bpm 81% of THR BP: 120/80 mmHg Combined Modifiers/ BLC On/ Notch On/ HF 0.05 Hz/LF 35 Hz

ExTime: 06:53 5.5 Kmph 14.8%
 25 mm/Sec. 1.0 Cm/mV

4X

60 ms Paced J





Recovery(0:30)

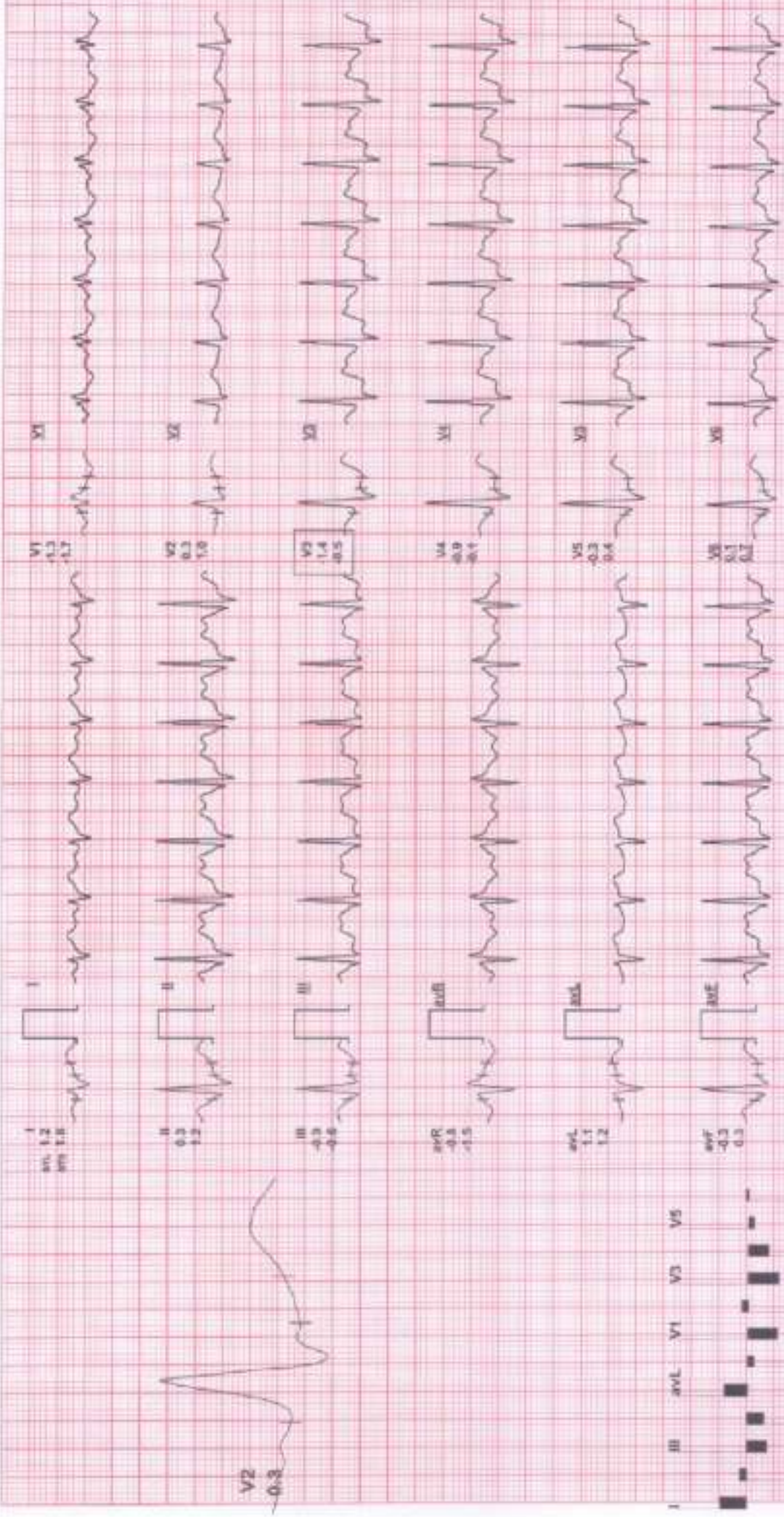
111 / MR BUENDRA / 39 Yrs / M / 163 Cms / 61 Kg / HR : 140

Date: 24 / 02 / 2024

METS: 4.1 / 140 bpm 77% of THR BP: 120/80 mmHg Combined Medians/ BLC Div/ Natch Div/ HF 0.05 Hz/ LF 35 Hz

ExTime: 06:52 0.8 Kmph, 0.0%
25 mm/Sec, 1.0 Cm/mV

4X 60 mS Post J



REMARKS:



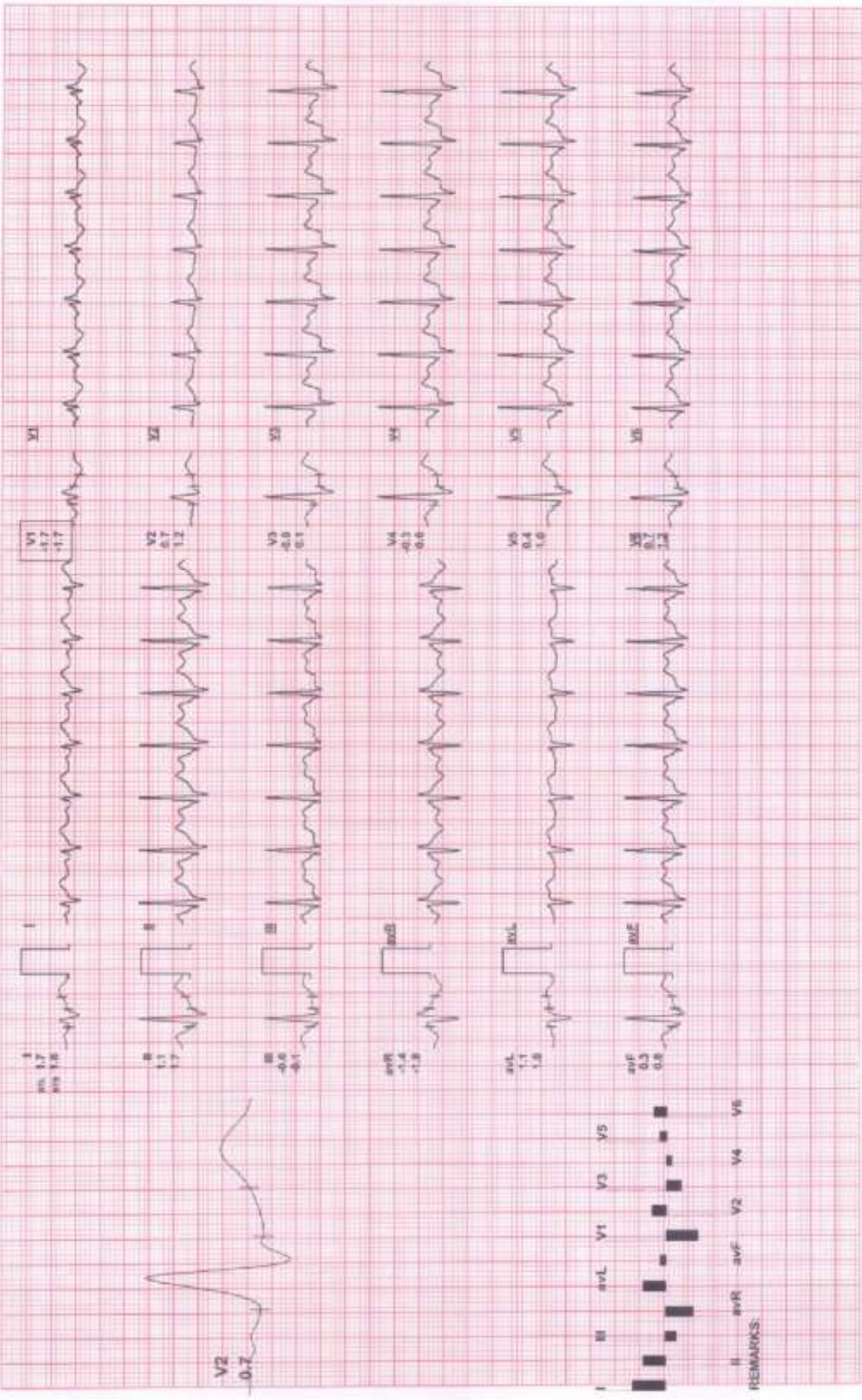
111 / MR BUJENDRA / 39 Yrs / M / 163 Cms / 61 Kg / HR : 122

Date: 24 / 02 / 2024

METS: 1.1/ 122 bpm 67% of THR BP: 122/82 mmHg Combined Medians/ BLC On/ Notch On/ HF 0.05 Hz/ LF 35 Hz

ExTime: 06:52 0.8 Kmph, 0.0%
25 mm/Sec. 1.0 Cm/Div

4X 80 mS Post J



REMARKS:



Recovery(2:00)

111 / MR BUENDRA / 39 Yrs / M / 163 Cms / 61 Kg / HR : 113

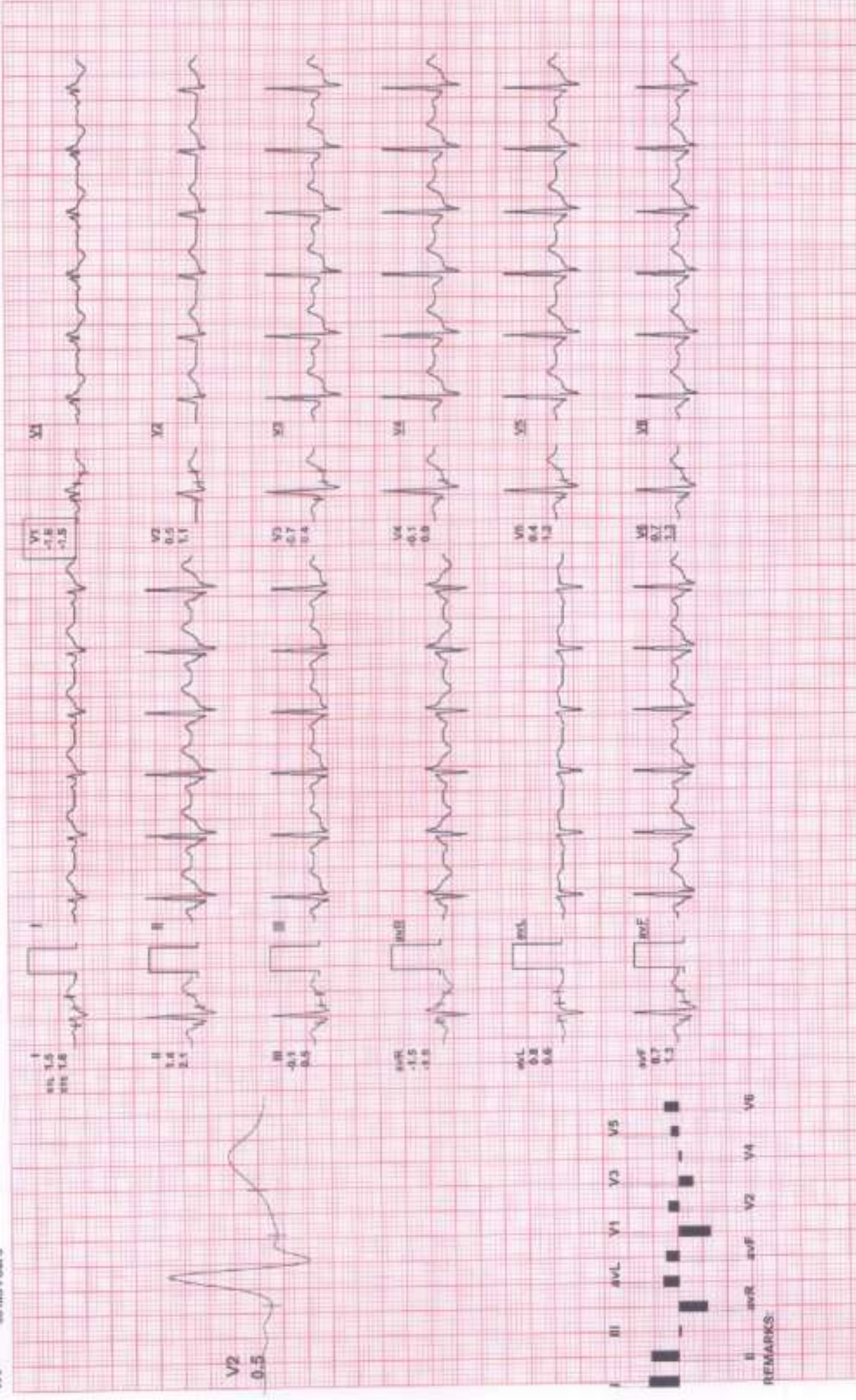
Date: 24 / 02 / 2024

METS: 1.0/ 113 bpm 62% of THR BP: 122/82 mmHg Combined Medians/ BL C Onv Notch Onv HF 0.05 Hz/LF 35 Hz

ExTime: 06:52 0.0 Kmpt. 0.0%

4X 80 ms Post-J

25 mm/sec. 1.0 Cm/mV



REMARKS: