



09/03/2024:-

Slb. Dr. Vinod :-



SARDAR  
PATEL HOSPITAL  
& HEART INSTITUTE

Name: DR. PIKA. SAINI

Date: 9/3/24

Age: 32 Sex: F

↑ Cho

No 9.

Low organic

new

Fat free diet

↳ A 88%  
BP - 110/80  
SpO<sub>2</sub> 98%

Tab. Forminlong 001 — (2)

Tab. Caldison XT 05 1/2 — (3)

INSURANCE

Binu



**OPD INITIAL ASSESSMENT FORM**

(To be filled by Nursing Staff)

Patient Name: - DEEPIKA - SURI UHID Number: - 024-3075

Consultant Name: - DR. VIVEK CHAVLA Date: - 4/3/24 Start Time: - 5:05 Age: - 32 (Years)  
Sex: - F (M/F)

Height: - 147 cms, Weight: - 56.4 kgs. Temp. —, Pulse: - 88 (Per minute), SPO2 98%

B.P. :- 114/80 (mm of Hg), RBS:- — First Visit / Follow Up  
Visit. First Visit

Nursing Staff Name & Signature: - Kunlax Patel End Time: - 5:15 PM

**Past History: - (TICK MARK)**

Diabetes, Hypertension, IHD, COPD, Asthma, TB, Smoker, Alcoholic, Hypothyroidism

Other:-

Family History:-

Nutritional Screening:-

Psychosocial Assessment:-

Immunization Status:-

To be filled by Clinician) Start Time:- \_\_\_\_\_

Clinical Findings:-

Diagnosis:-

Investigations and Advice:-



**OPD INITIAL ASSESSMENT FORM**

(To be filled by Nursing Staff)

Patient Name: - Deepika Saini UHID Number: - 3075

Consultant Name: Dr. Kalpesh Vadodariya Date: 9/13/24 Start Time: - \_\_\_\_\_ Age: - 32 (Years)

Sex: F (M/F)

Height: - 147 cms, Weight: - 56.4 kgs. Temp. (N), Pulse: - \_\_\_\_\_ (Per minute), SPO2 \_\_\_\_\_

B.P. :- \_\_\_\_\_ (mm of Hg), RBS:- \_\_\_\_\_ First Visit / Follow Up Visit: (Fol.)

Nursing Staff Name & Signature: - Sudhanshu Joshi End Time:- \_\_\_\_\_

Past History: - (TICK MARK)  
Diabetes, Hypertension, IHD, COPD, Asthma, TB, Smoker, Alcoholic, Hypothyroidism

Other:- NO

Family History:-

Nutritional Screening:-

Psychosocial Assessment:-

Immunization Status:-

To be filled by Clinician) Start Time:- \_\_\_\_\_  
Clinical Findings:- came for health check

Diagnosis:-

(S/D)  
DR. KALPESH VADODARIYA  
M.D. (GEN. SURGEON)  
FACIOSCOPIC SURGEON

Investigations and Advice:-  
CSF abdomen notes

<b>Patient Name:</b>	<b>DEEPIKA SAINI</b>	<b>Age / Sex:</b>	<b>32YRS/F</b>
<b>Patient ID:</b>	<b>OP-3075</b>	<b>Date:</b>	<b>09/03/2024</b>
<b>Referred By:</b>	<b>HEALTH CHEKUP</b>	<b>USG:</b>	<b>ABD</b>

### USG ABDOMEN & PELVIS

**LIVER :** normal in size shape and normal echotexture.No focal solid or cystic mass seen.  
Portal & biliary radicals normal.  
PV & CBD normal.

**G.B. :** well distended & normal. No stone or inflammation seen.

**HEAD AND BODY OF PANCREAS :** reveals normal echotexture. No mass, calcification or pancreatitis.  
Tail of pancreas : Obscure by bowel gas.

**SPLEEN :** Normal in size, 87 mm & reveals normal echotexture. No other focal mass seen.

**BOTH KIDNEY : RK: 88 X 47 mm. , LK : 98 X 51 mm.**

Both kidneys are normal size with normal cortical thickness.

No focal solid or cystic mass seen. No calculus. No hydronephrosis seen.

C.M differentiation is preserved. No parenchymal abnormality seen.

**U. BLADDER :** Well distended & normal.No mass or filling defect seen.

**UTERUS: Anteverted, Normal in size.**

**BOTH OVARIES:** appears normal size. Multiple small follicles within. No adnexal mass.

**BOWEL LOOPS :** Peristaltic bowel loops seen in lower abdomen. Bowel loops are normal calibre (Visualized).

**No free fluid seen. No enlarged lymphnodes seen.**

#### IMPRESSION:

- **No significant abnormality seen.**
- Suggest clinical correlation.



**Dr. HANSA RATHWA**  
MD (Radio Diagnosis)

**Disclaimer-**It is of medical imaging based on the available clinical data., so this report cannot be utilized for any medico legal purpose/ certifications. All modern machines/procedures have their own limitations. If there is any clinical discrepancy, this investigation may be repeated or reassessed by other tests.

<b>Patient Name:</b>	<b>DEEPIKA SAINI</b>	<b>Age /Sex:</b>	<b>32YRS/F</b>
<b>Patient ID:</b>	<b>OP-3075</b>	<b>Date :</b>	<b>09/03/2024</b>
<b>Referred By:</b>	<b>HEALTH CHEKUP</b>	<b>Modality:</b>	<b>X-RAY</b>

**X-RAY CHEST PA.**

- Both Lung fields appear normal  
No evidence of any collapse / consolidation.
- Both Hila appear normal.  
No evidence of any enlarged Hilar lymphnodes.
- Both CP angle clear.
- Cardiac size appear normal.
- Both hemi diaphragm appears normal
- Bony cage appear normal.

**IMPRESSION:**

**No significant abnormality detected. .**



**Dr. HANSA RATHWA**  
**MD (Radio Diagnosis)**

Disclaimer-It is of medical imaging based on the available clinical data, so this report cannot be utilized for any medico legal purpose/ certifications. All modern machines/procedures have their own limitations. If there is any clinical discrepancy, this investigation may be repeated or reassessed by other tests.



**LABORATORY REPORT**



Name : Mrs DEEPIKA SAINI	Sex/Age : Female / 32 Years	Case ID : 40308000442
Ref. By : Mediwheel Full Body Health Checkup Female	Dis. At :	Pt. ID :
Bill. Loc. : Health packages		Pt. Loc. :
Reg Date and Time : 09-Mar-2024 09:30	Sample Type : Whole Blood EDTA	Mobile No. :
Sample Date and Time : 09-Mar-2024 09:30	Sample Coll. By : non	Ref Id1 :
Report Date and Time : 09-Mar-2024 10:08	Acc. Remarks :	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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**HAEMOGRAM REPORT**

HB AND INDICES

Haemoglobin	12.8	G%	12.0 - 15.0
RBC (Electrical Impedance)	4.05	millions/cumm	3.80 - 4.80
PCV(Calc)	39.69	%	36.00 - 46.00
MCV (RBC histogram)	98.0	fL	83.00 - 101.00
MCH (Calc)	31.6	pg	27.00 - 32.00
MCHC (Calc)	32.2	gm/dL	31.50 - 34.50
RDW (RBC histogram)	14.40	%	11.00 - 16.00

TOTAL AND DIFFERENTIAL WBC COUNT

Total WBC Count	5040	/µL	4000.00 - 10000.00		
Neutrophil	[%] 57	%	EXPECTED VALUES 40.00 - 70.00	[Abs] 2873	EXPECTED VALUES /µL 2000.00 - 7000.00
Lymphocyte	37	%	20.00 - 40.00	1865	/µL 1000.00 - 3000.00
Eosinophil	01	%	1.00 - 6.00	50	/µL 20.00 - 500.00
Monocytes	05	%	2.00 - 10.00	252	/µL 200.00 - 1000.00
Basophil	00	%	0.00 - 2.00	0	/µL 0.00 - 100.00

PLATELET COUNT

Platelet Count	180000	/µL	150000.00 - 410000.00
MPV	H 14.80	fL	6.5 - 12
PDW	H 16.6		8 - 13

Method:  
TLC-SF cube technology(Flow Cytometry+ fluorescence),  
DC by microscopy,  
Platelet count by electrical impedance+/-SF cube technology

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

*Shweta Patel*  
**Dr. Shweta Patel**  
Consultant Pathologist  
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**LABORATORY REPORT**



Name : Mrs DEEPIKA SAINI	Sex/Age : Female / 32 Years	Case ID : 40308000442
Ref. By : Mediwheel Full Body Health Checkup Female	Dis. At :	Pt. ID :
Bill. Loc. : Health packages		Pt. Loc. :
Reg Date and Time : 09-Mar-2024 09:30	Sample Type : Whole Blood EDTA	Mobile No. :
Sample Date and Time : 09-Mar-2024 09:30	Sample Coll. By : non	Ref Id1 :
Report Date and Time : 09-Mar-2024 13:02	Acc. Remarks :	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>HAEMATOLOGY INVESTIGATIONS</b>				
ESR <i>Westergren Method</i>	10		mm after 1hr	3 - 20

**BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology)  
(Both Forward and Reverse Group )**

ABO Type	A
Rh Type	POSITIVE

Note (LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

*Shweta Patel*  
Dr. Shweta Patel  
Consultant Pathologist

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**LABORATORY REPORT**



Name : Mrs DEEPIKA SAINI      Sex/Age : Female / 32 Years      Case ID : 40308000442  
 Ref. By : Mediwheel Full Body Health Checkup Female      Dis. At :      Pt. ID :  
 Bill. Loc. : Health packages      Pt. Loc. :

Reg Date and Time : 09-Mar-2024 09:30      Sample Type : Plasma Fluoride F, Plasma Fluoride PP, Whole Blood EDTA      Mobile No. :  
 Sample Date and Time : 09-Mar-2024 09:30      Sample Coll. By : non      Ref Id1 :  
 Report Date and Time : 09-Mar-2024 14:09      Acc. Remarks :      Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Plasma Glucose - F <i>Photometric, Hexokinase</i>	97.41	mg/dL	70 - 100	FUS: NIL
Plasma Glucose - PP <i>Photometric, Hexokinase</i>	103.86	mg/dL	70 - 140	PPUS: NIL

**Glycated Haemoglobin Estimation**

HbA1C <i>Immuno-turbidimetric</i>	5.3	% of total Hb	<5.7: Normal 5.7-6.4: Prediabetes >=6.5: Diabetes
Estimated Avg Glucose (3 Mths) <i>Calculated</i>	105.41	mg/dL	Not available

Please Note change in reference range as per ADA 2021 guidelines.

**Interpretation :**

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control. Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia. Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients. Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA. In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine. The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh ,A-Abnormal)

**Dr. Shweta Patel**  
 Consultant Pathologist  
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**LABORATORY REPORT**

Name : Mrs DEEPIKA SAINI	Sex/Age : Female / 32 Years	Case ID : 40308000442
Ref. By : Mediwheel Full Body Health Checkup Female	Dis. At :	Pt. ID :
Bill. Loc. : Health packages		Pt. Loc. :
Reg Date and Time : 09-Mar-2024 09:30	Sample Type : Serum	Mobile No. :
Sample Date and Time : 09-Mar-2024 09:30	Sample Coll. By : non	Ref Id1 :
Report Date and Time : 09-Mar-2024 12:43	Acc. Remarks :	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
<b>BUN (Blood Urea Nitrogen)</b> <i>GLDH</i>	<b>11.4</b>	mg/dL	7.00 - 18.70	
<b>Uric Acid</b> <i>Uricase-Peroxidase method</i>	<b>5.62</b>	mg/dL	2.6 - 6.2	
<b>Creatinine</b> <i>Jaffe compensated</i>	<b>L 0.49</b>	mg/dL	0.55 - 1.02	

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**LABORATORY REPORT**



Name : Mrs DEEPIKA SAINI	Sex/Age : Female / 32 Years	Case ID : 40308000442
Ref. By : Mediwheel Full Body Health Checkup Female	Dis. At :	Pt. ID :
Bill. Loc. : Health packages		Pt. Loc. :
Reg Date and Time : 09-Mar-2024 09:30	Sample Type : Serum	Mobile No. :
Sample Date and Time : 09-Mar-2024 09:30	Sample Coll. By : non	Ref Id1 :
Report Date and Time : 09-Mar-2024 12:44	Acc. Remarks :	Ref Id2 :

**Liver Function Test**

<b>Albumin</b> <i>Bromo Cresol Green</i>	4.89	g/dL	3.4 - 5.0
<b>Globulin</b> <i>Calculated</i>	3.13	gm/dL	2 - 4.1
<b>A/G Ratio</b> <i>Calculated</i>	1.6		1.0 - 2.1
<b>Bilirubin Total</b> <i>Diazotized Sulfanilic Acid Method</i>	0.87	mg/dL	0.2 - 1.0
<b>Bilirubin Conjugated</b> <i>Diazotized Sulfanilic Acid Method</i>	0.26	mg/dL	
<b>Bilirubin Unconjugated</b> <i>Calculated</i>	0.61	mg/dL	0 - 0.8

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**LABORATORY REPORT**



Name : Mrs DEEPIKA SAINI	Sex/Age : Female / 32 Years	Case ID : 40308000442
Ref. By : Mediwheel Full Body Health Checkup Female	Dis. At :	Pl. ID :
Bill. Loc. : Health packages		Pl. Loc. :
Reg Date and Time : 09-Mar-2024 09:30	Sample Type : Serum	Mobile No. :
Sample Date and Time : 09-Mar-2024 09:30	Sample Coll. By : non	Ref Id1 :
Report Date and Time : 09-Mar-2024 12:44	Acc. Remarks :	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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**BIOCHEMICAL INVESTIGATIONS**

**Thyroid Function Test**

<b>Triiodothyronine (T3)</b> <small>ECLIA</small>	<b>1.42</b>	ng/mL	0.70 - 2.04	
<b>Thyroxine (T4)</b> <small>ECLIA</small>	<b>9.77</b>	µg/dL	5.5 - 11.0	
<b>TSH</b> <small>ECLIA</small>	<b>2.600</b>	µIU/mL	0.40 - 4.20	

**INTERPRETATIONS**

Useful for Monitoring patients on thyroid replacement therapy, Confirmation of thyroid-stimulating hormone (TSH) suppression in thyroid cancer patients on thyroxine therapy, for Prediction of thyrotropin-releasing hormone-stimulated TSH response, as An aid in the diagnosis of primary hyperthyroidism, for Differential diagnosis of hypothyroidism.

The ability to quantitate circulating levels of thyroid-stimulating hormone (TSH) is important in evaluating thyroid function. It is especially useful in the differential diagnosis of primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low or normal. Concentrations of 5.1 mIU/ml to 7.0 mIU/ml are considered borderline hypothyroid

**CAUTIONS**

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

TSH ref range in Pregnancy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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Consultant Pathologist

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**LABORATORY REPORT**



Name : Mrs DEEPIKA SAINI      Sex/Age : Female / 32 Years      Case ID : 40308000442  
 Ref. By : Mediwheel Full Body Health Checkup Female      Dis. At :      Pt. ID :  
 Bill. Loc. : Health packages      Pt. Loc. :

Reg Date and Time : 09-Mar-2024 09:30	Sample Type : Spot Urine	Mobile No. :
Sample Date and Time : 09-Mar-2024 09:30	Sample Coll. By : non	Ref Id1 :
Report Date and Time : 09-Mar-2024 12:24	Acc. Remarks :	Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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**URINE EXAMINATION (STRIP METHOD AND FLOWCYTOMETRY)**

Physical examination

Colour : Pale yellow  
 Transparency : Clear

Chemical Examination By Sysmex UC-3500

Sp.Gravity	1.005		1.003 - 1.035
pH	7.5		4.6 - 8
Leucocytes (ESTERASE)	Negative		Negative
Protein	Negative		Negative
Glucose	Negative		Negative
Ketone Bodies Urine	Negative		Negative
Urobilinogen	Negative		Negative
Bilirubin	Negative		Negative
Blood	Negative		Negative
Nitrite	Negative		Negative

Flowcytometric Examination By Sysmex UF-5000

Leucocyte	Nil	/HPF	Nil
Red Blood Cell	Nil	/HPF	Nil
Epithelial Cell	3-5	/HPF	Present(+)
Bacteria	Nil	/μL	Nil
Yeast	Nil	/μL	Nil
Cast	Nil	/LPF	Nil
Crystals	Nil	/HPF	Nil

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 Consultant Pathologist  
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**LABORATORY REPORT**



Name : Mrs DEEPIKA SAINI      Sex/Age : Female / 32 Years      Case ID : 40308000442  
 Ref. By : Mediwheel Full Body Health Checkup Female      Dis. At :      Pt. ID :  
 Bill. Loc. : Health packages      Pt. Loc. :  
 Reg Date and Time : 09-Mar-2024 09:30      Sample Type : Spot Urine      Mobile No. :  
 Sample Date and Time : 09-Mar-2024 09:30      Sample Coll. By : non      Ref Id1 :  
 Report Date and Time : 09-Mar-2024 12:24      Acc. Remarks :      Ref Id2 :

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
pH	-	4.6-8.0					
SG	-	1.003-1.035					
Protein	mg/dL	Negative (<10)	10	25	75	150	500
Glucose	mg/dL	Negative (<30)	30	50	100	300	1000
Bilirubin	mg/dL	Negative (0.2)	0.2	1	3	6	-
Ketone	mg/dL	Negative (<5)	5	15	50	150	-
Urobilinogen	mg/dL	Negative (<1)	1	4	8	12	-

Parameter	Unit	Expected value	Result/Notations				
			Trace	+	++	+++	++++
Leukocytes (Strip)	/micro L	Negative (<10)	10	25	100	500	-
Nitrite(Strip)	-	Negative	-	-	-	-	-
Erythrocytes(Strip)	/micro L	Negative (<5)	10	25	50	150	250
Pus cells (Microscopic)	/hpf	<5	-	-	-	-	-
Red blood cells(Microscopic)	/hpf	<2	-	-	-	-	-
Cast (Microscopic)	/lpf	<2	-	-	-	-	-

Pending Services  
Stool Examination

----- End Of Report -----

# For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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 Consultant Pathologist  
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Chikuwadi, Opp. Railway Yard, Ankleshwar - 393 001 ☎ : 247882 / 247883

**OPD INITIAL ASSESSMENT FORM**

(To be filled by Nursing Staff)

Patient Name: - Deepika Saini UHID Number: - 024-3075

Consultant Name: Dr. Shaheer Date: 13-24 Start Time: - \_\_\_\_\_ Age: 32 (Years)

Sex: - ♀ (M/F) Shah

Height: 147 cms, Weight: 56.4 kgs. Temp. 97, Pulse: - \_\_\_\_\_ (Per minute), SPO2 \_\_\_\_\_

B.P. :- \_\_\_\_\_ (mm of Hg), RBS:- \_\_\_\_\_ First Visit / Follow Up

Visit: First visit

Nursing Staff Name & Signature: - \_\_\_\_\_ End Time: - \_\_\_\_\_

**Past History: - (TICK MARK)**

Diabetes, Hypertension, IHD, COPD, Asthma, TB, Smoker, Alcoholic, Hypothyroidism

Routine check-up

Other:-

Family History:-

Nutritional Screening:-

Psychosocial Assessment:-

Immunization Status:-

To be filled by Clinician) Start Time:- \_\_\_\_\_

Clinical Findings:- V<sub>n</sub> < 6/6  
6/6

BE ASOME

A WOME

Diagnosis:-

Normal

Investigations and Advice:-



Patient Name : Mrs. Deepika Saini  
Registration No : 101-024-3075-000  
Sex : Female  
Patient Arrived At : 09-Mar-2024 09:00:00 AM  
Test Name : ECHO STUDY

DOB : 09-Mar-1992  
Age : 32 Yrs/  
Result Verified At : 09-Mar-2024 12:19

## 2D ECHO CARDIOGRAPHY REPORT

- All cardiac chambers are normal in dimension
- Normal LV Systolic function at Rest, LVEF =60 %
- No RWMA at Rest.
- No diastolic dysfunction (E>A, MV E'> 0.10 m/s )
- MV – Normal, No MS/MR AV –Normal, No AS/ AR
- TV – Normal , No TS/ Trivial TR PV – No PS / PR
- No Pulmonary Hypertension, RVSP = 26mmHg
- IAS / IVS appear Intact
- No e/o obvious Clot / Vegetation / effusion
- IVC is 14mm in diameter and collapsing > 50% on inspiration

**IMPRESSION: NORMAL LV SYSTOLIC FUNCTION, NO RWMA, NO PAH**

  
**Dr. Milan Mehta**  
D.Card (Mumbai)  
Non-Invasive cardiology

**Soorya M.**  
Echo technologist

**Dr. Jayvirsinh Atodariya**  
MD, DM, CARDIOLOGY  
Consultant: Interventional Cardiology



09.03.2024 10:33:42  
SARDAR NITEL HOSPITAL  
CHIKLA, JK  
ANKLESHWAR

Location:  
Order Number:  
Visit:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

Room:

79 bpm  
--/-- mmHg

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

QRS : 80 ms  
QT / QTcBaz : 358 / 410 ms  
PR : 138 ms  
P : 116 ms  
RR / PP : 760 / 759 ms  
P / QRS / T : 42 / 70 / 40 degrees

Normal sinus rhythm  
Normal ECG

