




# PARKLINE DIAGNOSTICS PVT. LTD.

L.G. 3, 4 & 5, Bhuvana Towers, S.D. Road, Secunderabad - 500 003 Tel : 040-42038139, 27845852  
7995421787, 7093445852 Email : parklinediagnostics@gmail.com www.parklinediagnostics.com

## TEST REPORT

Name : **MR.KUMAR SANJAI [158417]** TID/SID : UMR0827836/ 23630917  
Age / Gender : 44 Years / Male Registered on : 25-Jun-2022 / 08:41 AM  
Ref.By : - Collected on : 25-Jun-2022 / 08:44 AM  
Req.No  Reported on : 25-Jun-2022 / 13:02 PM  
Reference : Medi Wheel  
BIL2135145

### DEPARTMENT OF CLINICAL PATHOLOGY

### Complete Urine Examination (CUE), Urine


Investigation	Observed Value	Units	Biological Reference Interval
Colour Method:Photo detectors(instrument)	Yellow		Light Yellow
Appearance Method:Photo diode array sensor	Clear		Clear
Specific gravity Method:Ion concentration/colour indicator	1.010		1.003-1.030
Reaction and pH Method:Double Indicator	5.5		5.0-8.0
Protein Method:Protein Error of pH indicators	+		Negative
Glucose Method:Double sequential enzymatic/GOD-PAP	Negative		Negative
Urobilinogen Method:Reagent strip/Reflectance photometry	Negative		0.2-1.0 mg%
Ketones Method:Strip method/Nitroprusside method	Negative		Negative
Blood Method:Peroxidase	Negative		Negative
Bile Salt Method:Hays Method	Negative		Negative
Bile Pigment Method:Fouchets Method	Negative		Negative
<b>Microscopic Examination</b>			
Pus cells (leukocytes) Method:Microscopy Of Sediment	Occasional	/hpf	0-5 /hpf
RBC (erythrocytes) Method:Microscopy Of Sediment	Nil	/hpf	0-2 /hpf
Epithelial cells Method:Microscopy Of Sediment	Occasional	/hpf	0-8 /hpf
Crystals Method:Microscopy Of Sediment	Nil	/lpf	Nil /lpf



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### DEPARTMENT OF CLINICAL PATHOLOGY

### Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Casts	Nil	/lpf	Nil
Method:Microscopy Of Sediment			/lpf
Others	Nil		Nil
Method:Microscopy Of Sediment			

\* Sample processed at Parkline

--- End Of Report ---

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Name : **MR.KUMAR SANJAI [158417]** TID/SID : UMR0827836/ 23630915  
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Ref.By : - Collected on : 25-Jun-2022 / 08:44 AM  
Req.No  Reported on : 25-Jun-2022 / 12:19 PM  
BIL2135145 Reference : Medi Wheel

### DEPARTMENT OF HEMATOLOGY

#### Blood Grouping ABO And Rh Typing, EDTA Whole Blood

Parameter	Results
Blood Grouping (ABO)	B
Rh Typing (D)	POSITIVE -
Method:Agglutination	

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### DEPARTMENT OF HEMATOLOGY

#### Complete Blood Picture (CBP), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Hemoglobin	15.0	g/dL	13.0-17.0 g/dL
Method:Spectrophotometry			
Erythrocyte Count(RBC)	5.3	mill /cu.mm	4.5-5.5 mill /cu.mm
Method:Electrical Impedence			
PCV/HCT	43	%	40-50 %
Method:Numeric Integration			
MCV	<b>81</b>	fL	83-101 fL
Method:Calculated			
MCH	28.1	pg	27-32 pg
Method:Calculated			
MCHC	<b>34.8</b>	gm/dL	31.5-34.5 gm/dL
Method:Calculated			
RDW (CV)	13.9	%	11.6-14.0 %
Method:Calculated			
Total WBC Count	8.0	cells/cumm	4-10 cells/cumm
Method:Impedence flowcytometry/Light scattering			
<b>Differential Count</b>			
Neutrophils	70	%	40-80 %
Method:Flowcytometry/Microscopy			
Lymphocytes	24	%	20-40 %
Method:Flowcytometry/Microscopy			
Monocytes	4	%	2-10 %
Method:Flowcytometry/Microscopy			
Eosinophils	2	%	1-6 %
Method:Flowcytometry/Microscopy			
Basophils	0	%	0-2 %
Method:Flowcytometry/Microscopy			
Absolute Neutrophil Count	5.6	10 <sup>3</sup> /μL	2.0-7.0 10 <sup>3</sup> /μL
Absolute Lymphocyte Count	1.92	10 <sup>3</sup> /μL	1.0-3.0 10 <sup>3</sup> /μL






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### DEPARTMENT OF HEMATOLOGY

#### Complete Blood Picture (CBP), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Absolute Monocyte Count	0.32	10 <sup>3</sup> /μL	0.20-1.0 10 <sup>3</sup> /μL
Absolute Eosinophil Count	0.16	10 <sup>3</sup> /μL	0.02-0.5 10 <sup>3</sup> /μL
Absolute Basophil Count	<b>0</b>	10 <sup>3</sup> /μL	0.02-0.1 10 <sup>3</sup> /μL
Platelet Count	190	10 <sup>3</sup> /μL	150-410 10 <sup>3</sup> /μL
Method:Electrical Impedence			

#### Peripheral Smear

RBC Normocytic and Normochromic  
Method:Microscopy  
WBC Within normal limits.No abnormal cells seen.  
Method:Microscopy  
Platelets Discrete and adequate.Normal in morphology  
Method:Microscopy

\* Sample processed at Parkline

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### DEPARTMENT OF HEMATOLOGY

#### Erythrocyte Sedimentation Rate (ESR), Sodium Citrate Whole Blood

Investigation	Observed Value	Units	Biological Reference Intervals
ESR 1st Hour	9	mm/hour	0-10 mm/hour
Method:Westergren			

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Req.No  Reported on : 25-Jun-2022 / 13:24 PM  
BIL2135145 Reference : Medi Wheel

### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Blood Urea Nitrogen (BUN), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Blood Urea Nitrogen.	15.4	mg/dL	7-23 mg/dL
Method:Calculated			

#### Creatinine, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Creatinine.	1.14	mg/dL	0.60-1.30 mg/dL
Method:Alkaline Picrate			

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## TEST REPORT

Name : **MR.KUMAR SANJAI [158417]** TID/SID : UMR0827836/ 23630918F  
Age / Gender : 44 Years / Male Registered on : 25-Jun-2022 / 08:41 AM  
Ref.By : - Collected on : 25-Jun-2022 / 08:44 AM  
Req.No :  Reported on : 25-Jun-2022 / 14:42 PM  
Reference : Medi Wheel  
BIL2135145

### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Glucose Fasting (FBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Fasting Method:GOD - PAP	<b>181</b>	mg/dL	Normal: <100 Impaired FG: 100-125 Diabetic : $\geq$ 126 mg/dL

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Req.No :  Reported on : 25-Jun-2022 / 14:42 PM  
Reference : Medi Wheel  
BIL2135145

### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Glucose Post Prandial (PPBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Post Prandial Method:GOD - PAP	<b>199</b>	mg/dL	Normal : 90 - 140 Impaired Glucose Tolerance: 141-199 Diabetic : $\geq$ 200 mg/dL

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BIL2135145 Reference : Medi Wheel

### DEPARTMENT OF CLINICAL CHEMISTRY I

### Glycosylated Hemoglobin (HbA1C), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Glycosylated Haemoglobin Method:High Performance Liquid Chromatography(HPLC)	<b>10.7</b>	%	< 5.7% : Normal 5.7% - 6.4% : Prediabetes > 6.4% Diabetes
Mean Plasma Glucose (MPG) Estimate Method:Derived from HBA1c	260	mg/dL	Excellent Control : 90 to 120 Good Control : 121 to 150 Average Control : 151 to 180 Panic Value : > 211 mg/dL

**Note:**Mean Plasma Glucose is calculated from HBA1c value and it indicates Average Blood Sugar level over the past three months.

#### INTERPRETATION :

- 1.Glycated hemoglobin (glycohemoglobin / HbA1c) is a form of hemoglobin (Hb) that is chemically linked to a sugar.
- 2.A1c is measured primarily to determine the three-month average blood sugar level and can be used as a diagnostic test for diabetes mellitus and as an assessment test for glycemic control in people with diabetes.
- 3.In diabetes, higher amounts of glycated hemoglobin, indicating poorer control of blood glucose levels, have been associated with cardiovascular disease, nephropathy, neuropathy, and retinopathy.
4. American diabetes Association (ADA) recommends an A1C goal for many non pregnant adults of < 7% (without significant hypoglycemia). On the basis of provider judgment and patient preference, achievement of lower A1C levels than the goal of 7% may be acceptable, and even beneficial, if it can be achieved safely without significant hypoglycemia or other adverse effects of treatment. Less stringent A1C goals (such as < 8%) may be appropriate for patients with severe hypoglycemia, extensive co morbid conditions etc, or where the harms of treatment are greater than the benefits.
5. Glycemic goals for some older adults might reasonably be relaxed as part of individualized care, but hyperglycemia leading to symptoms or risk of acute hyperglycemia complications should be avoided in all patients.

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### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Lipid Profile, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Cholesterol Method:CHOD-PAP	126	mg/dL	Desirable Level: < 200 Borderline : 200 - 239 High : > 240 mg/dL
HDL Cholesterol Method:Enzymatic Reaction	26	mg/dL	<40:Major risk factor for heart disease 40-59:The higher,the better >=60:Considered protective against heart disease mg/dL
LDL Cholesterol Method:Calculated	56	mg/dL	< 100 mg/dL
VLDL Cholesterol Method:Calculated	44	mg/dL	10-55 mg/dL
Triglycerides Method:GPO-POD	<b>222</b>	mg/dL	Normal:<150 Borderline:150-199 High:200-499 Very High:>=500 mg/dL
Chol/HDL Ratio Method:Calculated	4.85		Normal : <4 Low risk : 4 - 6 High risk : >6
LDL Cholesterol/HDL Ratio	2.15		

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### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Liver Function Test (LFT), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Bilirubin. Method:Diazo with sulphanilic acid	0.74	mg/dL	0.3-1.2 mg/dL
Direct Bilirubin. Method:Diazo with sulphanilic acid	0.16	mg/dL	0.00-0.40 mg/dL
Indirect Bilirubin. Method:Calculated	0.58	mg/dL	
Alanine Aminotransferase ,(ALT/SGPT) Method:IFCC without P5P	34	U/L	10-40 U/L
Aspartate Aminotransferase,(AST/SGOT) Method:IFCC without P5P	30	U/L	10-40 U/L
ALP (Alkaline Phosphatase). Method:AMP-IFCC	62	U/L	30-115 U/L
<b>PROTEINS</b>			
Total Protein. Method:Biuret	7.18	g/dL	6.0-8.0 g/dL
Albumin. Method:Bromocresol Green (BCG)	4.30	g/dL	3.5-4.8 g/dL
Globulin. Method:Calculated	2.88	g/dL	2.3-3.5 g/dL
A/GRatio. Method:Calculated	1.49		0.8-2.0
Gamma GT. Method:IFCC-Enzymatic	31	U/L	7.0-50.0 U/L

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BIL2135145 Reference : Medi Wheel

### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Prostate Specific Antigen (PSA) Total, Serum

Investigation	Observed Value	Biological Reference Interval
Prostate Specific Antigen (PSA) Total	0.592 ng/mL	0-3.9 ng/mL
Method:Enhanced chemiluminescence		

#### Interpretation:

- 1.Prostate specific antigen (PSA) is a glycoprotein that is expressed by both normal and neoplastic prostate tissue
- 2.Elevated serum PSA concentrations are found in men with prostate cancer, benign prostatic hyperplasia (BPH) or inflammatory conditions of other adjacent genitourinary tissues. PSA can also be elevated after digital rectal examination,prostatic massage,cystoscopy,needle biopsy etc
- 3.Measurement of serum PSA by itself is not recommended as a screening procedure for the diagnosis of cancer because elevated PSA levels are also observed in patients with benign prostatic hyperplasia.
4. When employed for the management of prostate cancer patients, serial measurement of PSA is useful in detecting residual tumor and recurrent cancer after radical prostatectomy.
- 5.PSA has been demonstrated to be an accurate marker for monitoring advanced clinical stage in untreated patients and for monitoring response to therapy by radical prostatectomy, radiation therapy and anti-androgen therapy.

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### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Thyroid Profile (T3,T4,TSH), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Triiodothyronine Total (T3) Method:Enhanced chemiluminescence	1.17	ng/mL	0.970-1.69 ng/mL
Thyroxine Total (T4) Method:Enhanced chemiluminescence	9.46	µg/dL	5.53-11.0 µg/dL
Thyroid Stimulating Hormone (TSH) Method:Enhanced chemiluminescence	3.09	µIU/mL	0.465-4.68 µIU/mL

Note: Change in method and reference range  
NOTE:

TSH - Reference ranges during pregnancy:\*

1st Trimester : 0.10 - 2.50

2nd Trimester : 0.20 - 3.00

3dr Trimester : 0.30 - 3.00

\*As per the Guidelines of American Thyroid Association for the diagnosis and management of thyroid disease during pregnancy and post partum.

1.Primary Hyperthyroidism is accompanied by elevated T3 & T4 values along with depressed TSH level.

2.Primary Hypothyroidism is accompanied by depressed T3 & T4 levels and elevated TSH levels.

3.Normal T4 levels accompanied by high T3 levels are seen in patients with T3 Thyrotoxicosis.

4.Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol and propylthiouracil.

5.Although elevated TSH levels are nearly always indicative of primary hypothyroidism, rarely they can result form TSH secreting pituitary tumors(secondary).

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### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Uric Acid, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Uric Acid.	3.20	mg/dL	2.5-8.0 mg/dL
Method:Uricase			

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## TEST REPORT

Name : **MR.KUMAR SANJAI [158417]** TID/SID : UMR0827836/ 23632668  
Age / Gender : 44 Years / Male Registered on : 25-Jun-2022 / 08:41 AM  
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Req.No  Reported on : 25-Jun-2022 / 15:11 PM  
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BIL2135145

### DEPARTMENT OF HEALTH CHECKUP

#### Glucose Urine Fasting

Urine Glucose Fasting Nil NIL  
Method:Reagent strip/Reflectance photometry

#### Glucose Urine Post Prandial

Urine Glucose Post Prandial Nil NIL  
Method:Reagent strip/Reflectance photometry

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NABL Accredited  
Certificate No.MC-2566

## MEDICAL EXAMINATION REPORT

Name	Mr. Kumar Saijai		Date :	25/06/2022	
Company	Elo: Mediwheel		Reg. No. :	2135115	
Contact No.	9960080020		Sex	<input checked="" type="checkbox"/> M	Age : <input type="checkbox"/> 44
Type	Pre-Emp		Emp. No.:	158417	
	Overseas		Height	170 cms.	
	Annual	<input checked="" type="checkbox"/>	Weight	87 Kg	
Remarks	<p>- Hyperglycemia ⊕ <math>\bar{c}</math> HbA<sub>1c</sub> - 10.2% Advice follow up <math>\bar{c}</math> Diabetologist.</p> <p>- Hypertriglyceridemia ⊕. Advice follow up.</p> <p>- Rest all clinical, lab parameters WNL.</p>				
				DR. PRIYANKA SANNIDHI MBBS Regn. No. 11351	
Fitness Status	Medically Fit / Unfit		Physician's Signature		



# COMPREHENSIVE MEDICAL EXAMINATION REPORT

NAME Mr. Kumar Saijai

AGE 44 yrs / male

MARITAL STATUS Married CHILDREN : M  F

IDENTIFICATION (IF ANY) A mole on the left palm.

## PAST HISTORY

Any family H/o : High Blood Pressure, Heart Disease, Tuberculosis, Diabetes, Asthma, Cancer Noticed

Mother    Mother  Ca Breast 2019.

Any personal H/o Major illness like : Typhoid..... NIL..... Jaundice..... 1999..... Etc.

Any H/o STD..... Skin infection..... NIL

H/o Blood Transfusion..... NIL..... Recent Vaccination..... COVAXIN 2 Doses

H/o Epilepsy..... Giddiness..... NIL

H/o Surgery..... Cholecystectomy 2018..... Fracture in the past..... NIL

## Any Personal H/O.

High Blood Pressure, Heart Disease Tuberculosis, Diabetes, Asthma, Cancer

since 2018    2007  X15 yrs

Drug Abuse, Drug Allergy, Micturition, Bowels, Alcohol, Smoking, Sleep, MC, Wt. Loss/Wt. Gain

Present illness / Medication T. VOLIX TRIO 2mg, T. TAZO 20mg.

## GENERAL EXAMINATION

Conjunctiva :

Skin :

Ears :

Nose :

Throat & Oral Cavity :

NAD

Bone, Joints :

Nutritional Status :

Lymph Nodes :

Edema Feet :

Varicose Veins :

(N)  
well nourished  
NPD  
NIL  
NIL



**Distant Vision : Near Vision :**

Right Eye: 6/6

Right Eye: 6/6

With glasses / Without glasses

With glasses / Without glasses

left Eye: 6/6

left Eye: 6/6

with glasses / without glasses

with glasses / without glasses

Colour Vision : BE normal

**DR. KAPPA**  
M.B.B.S., D.O., F.R.F  
1961 (AMQ)  
**Ophthalmologist's Signature**

**Right Ear**

**Left Ear**

Hearing : (N)

(N)

Rinee's Test ;

Weber Test :

Discharge :

NIL

NIL

**SYSTEMIC EXAMINATION**

Pulse : 80 bpm

B.P. :

Lungs : A. Shape of Chest B/L symmetrical  
B. Breath Sounds B/L - clear ⊕  
C. Adventitious Sounds No

Heart : A. Sounds S<sub>1</sub> S<sub>2</sub> ⊕  
B. Murmurs No murmurs

**Nervous System**

Abdomen : A. Liver NPD  
B. Spleen NPD  
C. Piles NIL  
D. Any Lump NAD

A. Higher Function :  
B. Cranial Nerves :  
C. Sensory System : (N)  
D. Motor System :  
E. Jerks :

General : A. Hernia  
B. Hydrocele  
C. Varicocele  
NPD

Breast : Rt — Lt. —



## CANDIDATE'S DECLARATION

I hereby solemnly declare that I am not suffering from Asthma, Hypertension, Diabetes, Occult Psychological disorders or any other ailment which can be suppressed without my voluntary declaration.

Date : 25/06/2022

Place : Secunderabad

  
Signature

Note : General Physical Examination and Investigation included in the health check-up Have certain limitations and may not be able to detect all latent and asymptomatic diseases. Any new symptoms developing after the health check-up or persisting thereafter should be brought to the attention of the treating physician.





# PARKLINE DIAGNOSTICS PVT. LTD.

L.G. 3, 4 & 5, Bhuvana Towers, S.D. Road, Secunderabad - 500 003 Tel : 040-42038139, 27845852  
7995421787, 7093445852 Email : parklinediagnostics@gmail.com www.parklinediagnostics.com



NABL Accredited  
Certificate No. M-0862

## ENT CONSULTATION

S.No. 2135105 Emp.No. 158017 Date 25/6/22  
 Name Mr. Kumar Saijai Age 44 Yrs Sex M/F

EARS :	Right	Left
EAC	: Patent. no Cerumen.	-ob-
TM	: Contact, pearly white. Cone of light (+)	-ob-
TFT	: Rinne's +ve Weber's - Centralized	Rinne's +ve
NOSE	: Septum: (no). Bil. Turbinate: (no). Pass: (no). Mucosa	
THROAT	: Oropharynx: (no). Bil. Uvula: (no) moving Arytenoids } bil.	
NECK	: (no)	
IMPRESSION	: ENT clinically NAD.	

*D. Hari Krishna Reddy*  
 Consultant ENT  
 Dr. D. Hari Krishna Reddy  
 MS (ENT)  
 Head & Neck Surgeon  
 Reg. No: 88379



7799686970

Name : Sanjai Kumar ..... Sex : Male Age : 44 yrs .....

⇒ Regular checkup

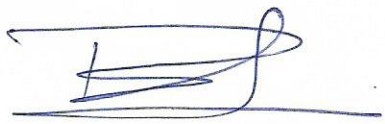
Date : 25/6/22 .....

OPD No : 708 .....

O/E  
Stains ++

Rx  
oral prophylaxis Done.

  
MULTI SPECIALITY DENTAL CLINIC  
Dr. Sowmya Bommakanti  
BDS, IMPLANTOLOGIST (USA)  
1-3-1, Rajamudaliar Street, Kalasiguda,  
Secunderabad, Cell : 8977910590,








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## TEST REPORT

Name : Mr . KUMAR SANJAI [158417]

TID : UMR0827836

Age / Gender : 44 Years / Male

Registered on : 25-Jun-2022 08:41 AM

Ref.By : Medi Wheel

Reported On : 25-Jun-2022 10:53 AM

Req. No : BIL2135145

### DEPARTMENT OF ULTRASOUND Ultrasound Whole Abdomen

**LIVER** : Normal in size and mild increased echotexture. No focal lesions.  
No IHBD /CBD dilatation. Portal vein is normal in size.

**SPLEEN** : Normal in size and echotexture. No focal lesion seen.

**GALL BLADDER** : Cholecystectomy.

**PANCREAS** : Normal in size and echotexture.No calcification / sol.  
Pancreatic duct is normal. No peripancreatic fluid collection.

**RIGHT KIDNEY** : 10.24 x 4.47 cms.  
Normal in size and echotexture.  
Cortical thickness is normal.  
No evidence of calculi / sol.  
Pelvi calyceal system is normal.

**LEFT KIDNEY** : 12.02 x 4.64 cms.  
Normal in size and echotexture.  
Cortical thickness is normal.  
No evidence of calculi / sol.  
Pelvi calyceal system is normal.

**URINARY BLADDER** : Well distended. Normal ii contour.  
Wall thickness is normal. No calculus / sol.

**PROSTATE** : Measuring 4.68 x 3.01 x 2.47 cms (Vol: 18.21 cc). Normal in size and echotexture.  
No calcification / sol.  
No pre or para aortic adenopathy / ascites noted.

**IMPRESSION** : Grade I fatty liver.

Clinical correlation

Dr. D.J. MOHAN  
MD DMRD  
(Reg No. 8995)  
Consultant Radiologist

Lab Timings (Weekdays) : 7.00 am to 8.30 pm

Sundays & Holidays : 7.00 am to 1.00 pm

Radiologists Timings (Weekdays) : 7.30 am to 1.30 pm  
& 5.45 pm to 7.45 pm

Sundays & Holidays : 7.30 am to 9.30 am

Free Home Visit for Sample Collection.

Call : 7995421787, 7093445852, 8121147282, 9885202212





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## TEST REPORT

Name : Mr . KUMAR SANJAI [158417]

TID : UMR0827836

Age / Gender : 44 Years / Male

Registered on : 25-Jun-2022 08:41 AM

Ref.By : Medi Wheel

Reported On : 25-Jun-2022 12:32 PM

Req. No : BIL2135145

### X-RAY CHEST PA VIEW

Lung fields are clear.

Cardia is normal.


Hila are normal.

C P angles are free.

Bony cage is normal.

Soft tissues are normal.

IMPRESSION : NORMAL CHEST X-RAY

  
Dr. PRAJAKTA SUKHADEVE  
DNB RADIOLOGY  
Reg. No. 68493

Lab Timings (Weekdays) : 7.00 am to 8.30 pm

Sundays & Holidays : 7.00 am to 1.00 pm

Radiologists Timings (Weekdays) : 7.30 am to 1.30 pm

& 5.45 pm to 7.45 pm

Sundays & Holidays

: 7.30 am to 9.30 am



MR. KUMAR SANJAI  
Male 44Years

HR : 77 bpm  
P : 114 ms  
PR : 170 ms  
QRS : 87 ms  
QT/QTc : 357/406 ms  
P/QRS/T : 44/-35/14 °  
RV5/SV1 : 1.191/0.228 mV

Diagnosis Information:  
Sinus Rhythm  
Left Axis Deviation

*NSR*  
*en*

*S*  
Dr. SAMUEL G. VANKAR  
MD., D.M.  
Consultant Interventional Cardiologist  
Reg. No. 5245

Report Confirmed by:



**PATIENT SUMMARY REPORT**

**PARKLINE DIAGNOSTICS PVT.LTD**

ID : 2135145  
NAME : **MR.KUMAR SANJAI**  
AGE / SEX : 44 / MALE

HEIGHT (cm) : 170  
WEIGHT (kg) : 87  
PROTOCOL : BRUCE

REF. BY : MEDIWHEEL  
DONE BY : DR.SAMEER G VANKAR  
TECHNICIAN : G.M.SURESH

CASE HISTORY :

MEDICATION :

OBJECT OF TEST :

Routine Check Up.

RISK FACTOR :

Hypertension. Diabetes.

ACTIVITY :

Very Active.

OTHER INVESTIGATION :

E C G

REASON FOR TERMINATION :

THR ACHIEVED

EXERCISE TOLERANCE :

Good ( > 10 METS ).

EXERCISE INDUCED ARRHYTHMIAS :

No.

HAEMO RESPONSE :

Normal.

CHRONO RESPONSE :

Normal.

FINAL IMPRESSION :

*Tmt negative*

EXTRA COMMENTS :



**Dr. SAMEER G. VANKAR**  
MD, DM  
Consultant Interventional Cardiology  
Reg.No.8245

Confirmed By : \_\_\_\_\_

Signature