



LABORATORY REPORT

Name : Ms. Archana Ahuja
Sex/Age : Female/58 Years
Ref. By :
Client Name : Mediwheel

Reg. No : 303101261
Reg. Date : 25-Mar-2023 02:23 PM
Collected On :
Report Date : 25-Mar-2023 04:03 PM

Medical Summary

GENERAL EXAMINATION

Height (cms) :148

Weight (kgs) :49.8

Blood Pressure : 120/80mmHg

Pulse : 59/Min

No Clubbing/Cynosis/Pallor/PedelOedem

Systemic Examination:

Cardio vascular System - S1,S2 Normal, No Murmur

Respiratory system - AEBE

Central Nervous System - No FND

Abdomen - Soft, Non Tender, No Organomegaly

Epilepsy -- N/A

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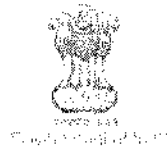

Dr. Jay Soni
M.D, GENERAL MEDICINE

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भारत सरकार
Government of India

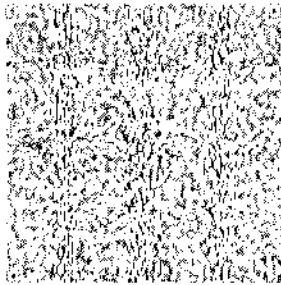
आधार कार्ड / Aadhaar Card

Enrollment No.: 0000/00630/44449

To
Anchana Shyam Anchana
E-102 Sechi Chakra Apartments
Near Petrol Pump
Ahmedabad City
Ahmedabad Gujarat - 380005
87 95061235



Dr. Jay Soni
M.D. (General Medicine)
Reg. No. G-23899



आधार नंबर / Your Aadhaar No

2002 4072 5683

VID : 9148 3846 3155 9649

मासे आधार, मासे योत्सव



भारत सरकार
Government of India

आधार नंबर
Anchana Shyam Anchana
UIDAI ID: 157091904
SEX: FEMALE

Anchana, 8755061235

2002 4072 5683

VID : 9148 3846 3155 9649

मासे आधार, मासे योत्सव

आधार

- आधार एकमात्र सत्य पहचान प्रमाण है।
- आधार नंबर को गुप्त रखें और किसी भी व्यक्ति को अपने आधार नंबर को साझा न करें।
- आधार नंबर को किसी भी संस्था को नहीं देना है।

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure ID Code (SIM) & XMITX Authentication.
- This is electronically generated letter.

- आधार नंबर को गुप्त रखें।
- आधार नंबर को किसी भी व्यक्ति को साझा न करें।
- आधार नंबर को किसी भी संस्था को नहीं देना है।
- आधार नंबर को किसी भी संस्था को नहीं देना है।
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- Carry Aadhaar in your smart phone using mva.aadhaar App.

आधार नंबर / Aadhaar Number

UIDAI ID: 157091904

Address:
E-102 Sechi Chakra Apartments, Near
Petrol Pump, Ahmedabad City, Ahmedabad,
Gujarat - 380005



2002 4072 5683

VID : 9148 3846 3155 9649


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Reg. No : 303101261	Ref Id :	Collected On : 25-Mar-2023 02:23 PM
Name : Ms. Archana Ahuja		Reg. Date : 25-Mar-2023 02:23 PM
Age/Sex : 58 Years / Female	Pass. No. :	Tele No. : 8735061235
Ref. By :		Dispatch At :
Location : CHPL		Sample Type : EDTA Whole Blood

Parameter	Results	Unit	Biological Ref. Interval
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COMPLETE BLOOD COUNT (CBC)
 Specimen: EDTA blood

Hemoglobin Colorimetric method	L 11.4	g/dL	12.5 - 16.0
Hematocrit (Calculated) Calculated	L 34.70	%	37 - 47
RBC Count	L 4.04	million/cmm	4.2 - 5.4
MCV	85.9	fL	78 - 100
MCH (Calculated)	28.3	Pg	27 - 31
MCHC (Calculated)	32.9	%	31 - 35
RDW (Calculated)	11.5	%	11.5 - 14.0
WBC Count	4500	/cmm	4000 - 10500
MPV (Calculated)	9.7	fL	7.4 - 10.4

DIFFERENTIAL WBC COUNT	[%]	EXPECTED VALUES	[Abs]	EXPECTED VALUES
Neutrophils (%)	55	% 42.02 - 75.2	2475 /cmm	2000 - 7000
Lymphocytes (%)	41	% 20 - 45	1845 /cmm	1000 - 3000
Eosinophils (%)	02	% 0 - 6	90 /cmm	200 - 1000
Monocytes (%)	02	% 2 - 10	90 /cmm	20 - 500
Basophils (%)	00	% 0 - 1	0 /cmm	0 - 100


PERIPHERAL SMEAR STUDY

RBC Morphology : Normocytic and Normochromic.
 WBC Morphology : Normal

PLATELET COUNTS

Platelet Count (Volumetric Impedance) : 304000 /cmm 150000 - 450000
 Platelets : Platelets are adequate with normal morphology.
 Parasites : Malarial parasite is not detected.
 Comment : -

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 * This test has been out sourced.

Approved By : 
 Dr. Keyur Patel
 M.B.D.C.P.

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Approved On : 25-Mar-2023 07:08 PM



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Location : CHPL		Sample Type : EDTA Whole Blood

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Location : CHPL		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
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HEMATOLOGY
BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Forward Reverse Tube Agglutination

ABO	"O"
Rh (D)	Positive
Note	-

ERYTHROCYTE SEDIMENTATION RATE [ESR]

ESR 1 hour <i>Intra test measurement</i>	13	mm/hr	ESR AT 1 hour : 3-12
--	----	-------	----------------------

ERYTHRO SEDIMENTATION RATE, BLOOD -

Erythrocyte sedimentation rate (ESR) is a non-specific phenomena and is clinically useful in the diagnosis and monitoring of disorders associated with an increased production of acute phase reactants. The ESR is increased in pregnancy from about the 3rd month and returns to normal by the 4th week post partum. ESR is influenced by age, sex, menstrual cycle and drugs (eg. corticosteroids, contraceptives). It is especially low (0-1mm) in polycythemia, hypofibrinogenemia or congestive cardiac failure and when there are abnormalities of the red cells such as poikilocytosis, spherocytosis or sickle cells.

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Age/Sex : 58 Years / Female	Pass. No. :	Tele No. : 8735061235
Ref. By :		Dispatch At :
Location : CHPL		Sample Type : Flouride F, Flouride PP

Parameter	Result	Unit	Biological Ref. Interval
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FASTING PLASMA GLUCOSE
 Specimen: Flouride plasma

Fasting Blood Sugar (FBS)	93.50	mg/dL	70 - 110
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GOD-POD Method

Criteria for the diagnosis of diabetes

1. HbA1c \geq 6.5 %
Or
2. Fasting plasma glucose $>$ 126 mg/dL. Fasting is defined as no caloric intake at least for 8 hrs
Or
3. Two hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.
Or
4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose \geq 200 mg/dL.


*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.
 American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34:S11.

POST PRANDIAL PLASMA GLUCOSE
 Specimen: Flouride plasma

Post Prandial Blood Sugar (PPBS)	119.2	mg/dL	70 - 140
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GOD-POD Method

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Name : Ms. Archana Ahuja		Reg. Date : 25-Mar-2023 02:23 PM
Age/Sex : 58 Years / Female	Pass. No. :	Tele No. : 8735061235
Ref. By :		Dispatch At :
Location : CHPL		Sample Type : Serum


Parameter	Result	Unit	Biological Ref. Interval
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Lipid Profile

Cholesterol	188.00	mg/dL	Desirable : < 200 Borderline High : 200-239 High : > 240
<i>Enzymatic, colorimetric method</i>			
Triglyceride	68.00	mg/dL	Normal : < 150 Borderline High : 150-199 High : 200-499 Very High : > 500
<i>Enzymatic, colorimetric method</i>			
HDL Cholesterol	59.30	mg/dL	High Risk : < 40 Low Risk : = 60
<i>Accelerator selective detergent method</i>			
LDL	115.10	mg/dL	Optimal : < 100.0 Near / above optimal : 100-129 Borderline High : 130-159 High : 160-189 Very High : > 190.0
<i>Calculated</i>			
VLDL	13.60	mg/dL	15-35
<i>Calculated</i>			
LDL / HDL RATIO	1.94		0-3.5
<i>Calculated</i>			
Cholesterol / HDL Ratio	3.17		0-5.0
<i>Calculated</i>			

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Ref. By :		Dispatch At :
Location : CHPL		Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
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BIO - CHEMISTRY

LFT WITH GG1

Total Protein <i>Buret Reaction</i>	6.29	gm/dL	Premature 1 Day : 3.4 - 5.0 1 Day to 1 Month : 4.0 - 6.8 2 to 12 Months : 4.8 - 7.6 1 Year : 6.0 - 8.0 Adults : 6.6 - 8.7
Albumin <i>By Bromocresol Green</i>	4.36	g/dL	0 - 4 days : 2.8 - 4.4 4 days - 14 yrs : 3.8 - 5.4 14 - 19 yrs : 3.2 - 4.5 20 - 60 yrs : 3.5 - 5.2 60 - 90 yrs : 3.2 - 4.6 > 90 yrs : 2.9 - 4.5
Globulin <i>Calculated</i>	1.93	g/dL	2.3 - 3.5
A/G Ratio <i>Calculated</i>	2.26		0.8 - 2.0
SGOT <i>UV without P5P</i>	20.50	U/L	0 - 40
SGPT <i>UV without P5P</i>	7.30	U/L	0 - 40
Alkaline Phosphatase <i>P-nitrophenyl phosphatase AMP Buffer, Multiple-point rate</i>	56.6	IU/l	39 - 118
Total Bilirubin <i>Vanadate Oxidation</i>	0.68	mg/dL	0 - 1.2
Conjugated Bilirubin	0.19	mg/dL	0.0 - 0.4

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Ref. By : **Dispatch At** :
Location : CHPL **Sample Type** : Serum

Unconjugated Bilirubin 0.49 mg/dL 0.0 - 1.1
Calculated

GGT 11.30 mg/dL < 32
SZASZ Method

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Age/Sex : 58 Years Female	Pass. No. :	Tele No. : 8735061235
Ref. By :		Dispatch At :
Location : CHPL		Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
-----------	--------	------	--------------------------

BIO - CHEMISTRY

Uric Acid <i>Enzymatic, colorimetric method</i>	2.8	mg/dL	2.6 - 6.0
Creatinine <i>Enzymatic Method</i>	0.53	mg/dL	0.6 - 1.1
BUN <i>UV Method</i>	10.60	mg/dL	6.0 - 20.0

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Location : CHPL		Sample Type : EDTA Whole Blood

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HEMOGLOBIN A1 C ESTIMATION

Specimen: Blood EDTA

*Hb A1C	5.4	% of Total Hb	Normal : < 5.7 % Pre-Diabetes : 5.7 % - 6.4 % Diabetes : 6.5 % or higher
---------	-----	---------------	--

Boronate Affinity with Fluorescent Quenching

Mean Blood Glucose	108.28	mg/dL
--------------------	--------	-------

Calculated
Degree of Glucose Control Normal Range:

Poor Control >7.0% *

Good Control 6.0 - 7.0 %**Non-diabetic level < 6.0 %

* High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy, etc.

* Some danger of hypoglycemic reaction in Type I diabetics.

* Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1c levels in this area

EXPLANATION :-

*Total haemoglobin A1 c is continuously synthesised in the red blood cell through its 120 days life span. The concentration of HbA1c in the cell reflects the average blood glucose concentration it encounters.

*The level of HbA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.

*The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.

*It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

HbA1c assay Interferences:

*Erroneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c(HbF) or differences in their glycation from that of HbA(HbS)

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Age/Sex : 58 Years / Female	Pass. No. :	Tele No. : 8735061235
Ref. By :		Dispatch At :
Location : CHPL		Sample Type : Urine Spot

Test	Result	Unit	Biological Ref. Interval
------	--------	------	--------------------------

URINE ROUTINE EXAMINATION
PHYSICAL EXAMINATION

Quantity	30 cc	
Colour	Pale Yellow	
Clarity	Clear	Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC)

pH	8	4.6 - 8.0
Sp. Gravity	1.000	1.001 - 1.035
Protein	Nil	Nil
Glucose	Nil	Nil
Ketone Bodies	Nil	Nil
Urobilinogen	Nil	Nil
Bilirubin	Nil	
Nitrite	Nil	Nil
Blood	Nil	Nil

MICROSCOPIC EXAMINATION (MANUAL BY MICROSCOPY)

Leucocytes (Pus Cells)	Occasional/hpf	Absent
Erythrocytes (Red Cells)	Nil	Absent
Epithelial Cells	1 - 2/hpf	Absent
Crystals	Absent	Absent
Casts	Absent	Absent
Amorphous Material	Absent	Absent
Bacteria	Absent	Absent
Remarks		

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IMMUNOLOGY
THYROID FUNCTION TEST

T3 (Triiodothyronine) <small>CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY</small>	1.14	ng/mL	0.86 - 1.92
---	------	-------	-------------

Triiodothyronine (T3) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus.

In the circulation, 99.7% of T3 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and prealbumin. The remaining unbound T3 is free in the circulation and is metabolically active.

In hypothyroidism and hyperthyroidism, F T3 (free T3) levels parallel changes in total T3 levels. Measuring F T3 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG.

T4 (Thyroxine) <small>CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY</small>	7.10	µg/dL	3.2 - 12.6
--	------	-------	------------

Thyroxin (T4) is a hormone synthesized and secreted by the thyroid gland in response to the pituitary hormone TSH (Thyroid stimulating hormone) and is regulated by a negative feedback mechanism involving the thyroid gland, pituitary gland and hypothalamus. In the circulation, 99.95% of T4 is reversibly bond to transport proteins, primarily thyroxine-binding globulin (TBG) and to a lesser extent albumin and thyroxine-binding prealbumin. The remaining unbound T4 is free in the circulation and is both metabolically active and a precursor to triiodothyronine (T3)

In hypothyroidism and hyperthyroidism, F T4 (free T4) levels parallel changes in total T4 levels. Measuring F T4 is useful in certain conditions such as normal pregnancy and steroid therapy, when altered levels of total T4 occur due to changes in T4 binding proteins, especially TBG.

Limitations:

1. The anticonvulsant drug phenytoin may interfere with total and F T4 levels due to competition for TBG binding sites.
2. F T4 values may be decreased in patients taking carbamazepine
3. Thyroid autoantibodies in human serum may interfere and cause falsely elevated F T4 results

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Location : CHPL		Sample Type : Serum

TSH 2.55 μ U/ml 0.35 - 5.50
CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate 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.

TSH levels During Pregnancy :

First Trimester : 0.1 to 2.5 μ U/mL

Second Trimester : 0.2 to 3.0 μ U/mL

Third trimester : 0.3 to 3.0 μ U/mL

Referance : Carl A. Burtis, Edward R. Ashwood, David E. Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Eddition. Philadelphia: WB Saunders, 2012: 2170

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Sex/Age :	Female/58 Years	Reg. Date :	25-Mar-2023 02:23 PM
Ref. By :		Collected On :	25-Mar-2023 02:23 PM
Client Name :	Mediwheel	Report Date :	27-Mar-2023 03:42 PM

BILATERAL BREAST SONOGRAPHY :-

Normal breast parenchyma is seen on either side. No evidence of solid or cystic mass lesion is seen.

No evidence of mass or architectural distortion is seen.

No evidence of skin thickening or nipple retraction is noted.

No evidence of axillary lymphadenopathy.

Vasculature appears normal.

No evidence of abnormal collection or mass lesion seen.

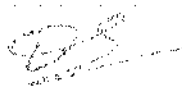
COMMENT :

- No significant abnormality detected.
- No direct or indirect sign of malignancy seen.

BIRADS Categories :

- 0 - Need imaging evaluation
- I - Negative
- II - Benign finding
- III - probably benign finding.
- IV - Suspicious abnormality
- V - Highly suggestive of malignancy.

This is an electronically authenticated report



DR DHAVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494

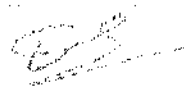


LABORATORY REPORT

Name	: Ms. Archana Ahuja	Reg. No	: 303101261
Sex/Age	: Female/58 Years	Reg. Date	: 25-Mar-2023 02:23 PM
Ref. By	:	Collected On	: 25-Mar-2023 02:23 PM
Client Name	: Mediwheel	Report Date	: 27-Mar-2023 03:42 PM

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

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Consultant Radiologist
MB,DMRE
Reg No:0494

Page 14 of 1

CUROVIS HEALTHCARE PVT. LTD.

'B' Block, Mondeal Business Park, Near Gurudwara, Bodakdev, S.G. Highway, Ahmedabad - 380 054, Gujarat



LABORATORY REPORT

Name : Ms. Archana Ahuja
Sex/Age : Female/58 Years
Ref. By :
Client Name : Mediwheel

Reg. No : 303101261
Reg. Date : 25-Mar-2023 02:23 PM
Collected On :
Report Date : 25-Mar-2023 04:09 PM

Electrocardiogram

Findings

Sinus Bradycardia.

Rest Within Normal Limit.

This is an electronically authenticated report



Dr. Jay Soni
M.D, GENERAL MEDICINE



BRCHANA

HR 59/min

Rx is: 54°

AHUIA

28

Female

Intervals:

RR 1025 ms

P 102 ms

PR 144 ms

QRS 86 ms

QT 422 ms

QTc 418 ms

(Bazett)

T 17°

P (II) 0.12 mV

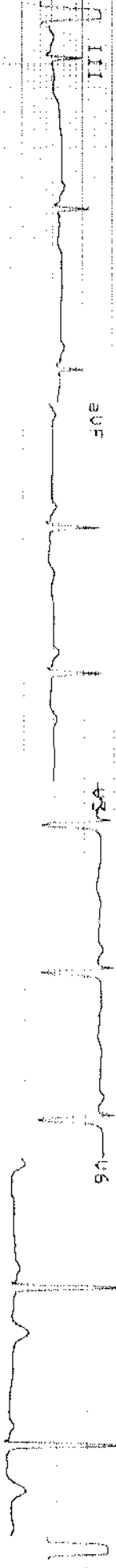
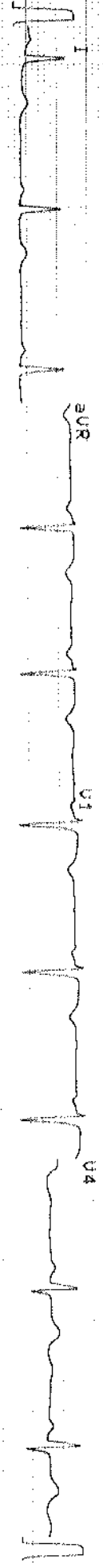
S (V1) -1.04 mV

R (V5) 2.85 mV

Sokol. 3.44 mV

S. Bailey cardiac

10 mm/mV



10 mm/mV

25 mm/s

2025-05-25 11:48:33

CURCOWS HEALTHCARE

frankina

AT-102015 1.24 C



LABORATORY REPORT

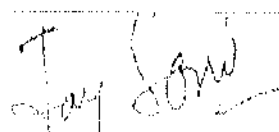
Name : Ms. Archana Ahuja
Sex/Age : Female/58 Years
Ref. By :
Client Name : Mediwheel

Reg. No : 303101261
Reg. Date : 25-Mar-2023 02:23 PM
Collected On :
Report Date : 25-Mar-2023 04:09 PM

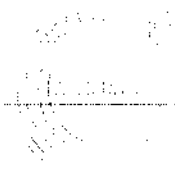
2D Echo Colour Doppler

TMT done.

This is an electronically authenticated report



Dr. Jay Soni
M.D, GENERAL MEDICINE




LABORATORY REPORT

Name : Ms. Archana Ahuja
Sex/Age : Female/58 Years
Ref. By :
Client Name : Mediwheel

Reg. No : 303101261
Reg. Date : 25-Mar-2023 02:23 PM
Collected On :
Report Date : 25-Mar-2023 02:38 PM

Eye Check - Up

No Eye Complaints

RIGHT EYE

SP: -4.25

CY:

AX:

LEFT EYE

SP: -4.30

CY:

AX:

	Without Glasses	With Glasses
Right Eye	6/36	6/5
Left Eye	6/36	6/5

Near Vision: Right Eye - N/6, Left Eye - N/6

Fundus Examination - Within Normal Limits.

Color Vision : Normal

Comments: Normal

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

This is an electronically authenticated report



Dr Kejal Patel
 MB,DO(Ophth)



LABORATORY REPORT

Name :	Ms. Archana Ahuja	Reg. No :	303101261
Sex/Age :	Female/58 Years	Reg. Date :	25-Mar-2023 02:23 PM
Ref. By :		Collected On :	
Client Name :	Mediwheel	Report Date :	27-Mar-2023 03:38 PM

USG ABDOMEN

Liver appears normal in size & in echogenicity. No evidence of focal solid or cystic lesion seen. No evidence of dilatation of intra-hepatic biliary or portal radicals. PV is normal in caliber.

Gall bladder is normally distended. No evidence of calculus or mass seen. Gall bladder wall thickness appears normal.

Pancreas Visualized portion appears normal in size and echopattern. No evidence of focal lesions.

Spleen appears normal in size & echopattern.

Both kidneys are normal in size, shape and position. C.M. differentiation on both sides is maintained. No evidence of hydronephrosis, calculus or solid mass on either side.

Urinary bladder is partially distended. No evidence of calculus or mass lesion.

Uterus is atrophic.

No evidence of ascites.

No evidence of lymph adenopathy.

No evidence of dilated small bowel loops.

COMMENTS :

NO SIGNIFICANT ABNORMALITY DETECTED.

This is an electronically authenticated report



DR DHAVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494





LABORATORY REPORT

Name : Ms. Archana Ahuja

Reg. No : 303101261

Sex/Age : Female/58 Years

Reg. Date : 25-Mar-2023 02:23 PM

Ref. By :

Collected On :

Client Name : Mediwheel

Report Date : 27-Mar-2023 03:38 PM

X RAY CHEST PA

Both lung fields appear clear.

No evidence of any active infiltrations or consolidation.

Cardiac size appears within normal limits.

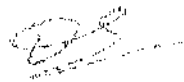
Both costo-phrenic angles appear free of fluid.

Both domes of diaphragm appear normal.

COMMENT: No significant abnormality is detected.

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

This is an electronically authenticated report



DR DHAVAL PATEL
Consultant Radiologist
MB,DMRE
Reg No:0494



Page 2 of 2

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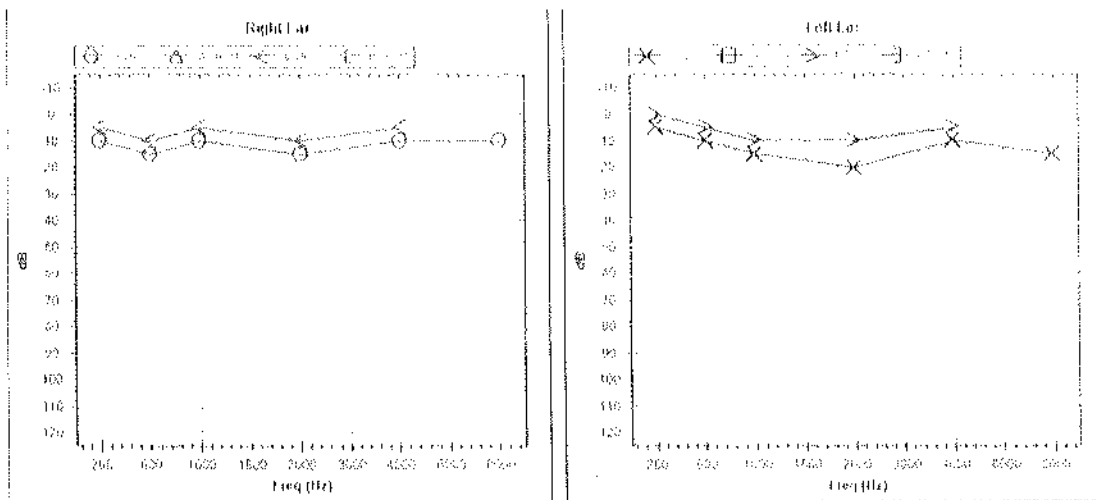
NAME:- ARCHANA AHUJA.

ID NO :-

AGE:- 58Y/ F

Date:- 25/03/2023

AUDIOGRAM



EAR	MODE	Air Conduction		Bone Conduction		Compar. Code
		Masked	unMasked	Masked	unMasked	
LEFT		⊗	⊗	⊗	⊗	11
RIGHT		⊕	⊕	⊕	⊕	11

NO RESPONSE: Add ⊕ below the respective symbols.

Threshold in dB	RIGHT	LEFT
AIR CONDUCTION	11.5	11.5
BONE CONDUCTION		
SPEECH		

Comments:-

Bilateral Hearing Sensitivity Within Normal Limits.



ARCHANA AHUJA (58 F)

Curovis Healthcare Pvt Ltd, Ahmedabad

Test Report

ID: 2367

Date: 25/03/2023

Exec Time : 0 m 0 s

Stage Time : 0 m 7 s

HR: 65 bpm

Protocol: Bruce

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 145 bpm)

B.P: 120 / 80

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

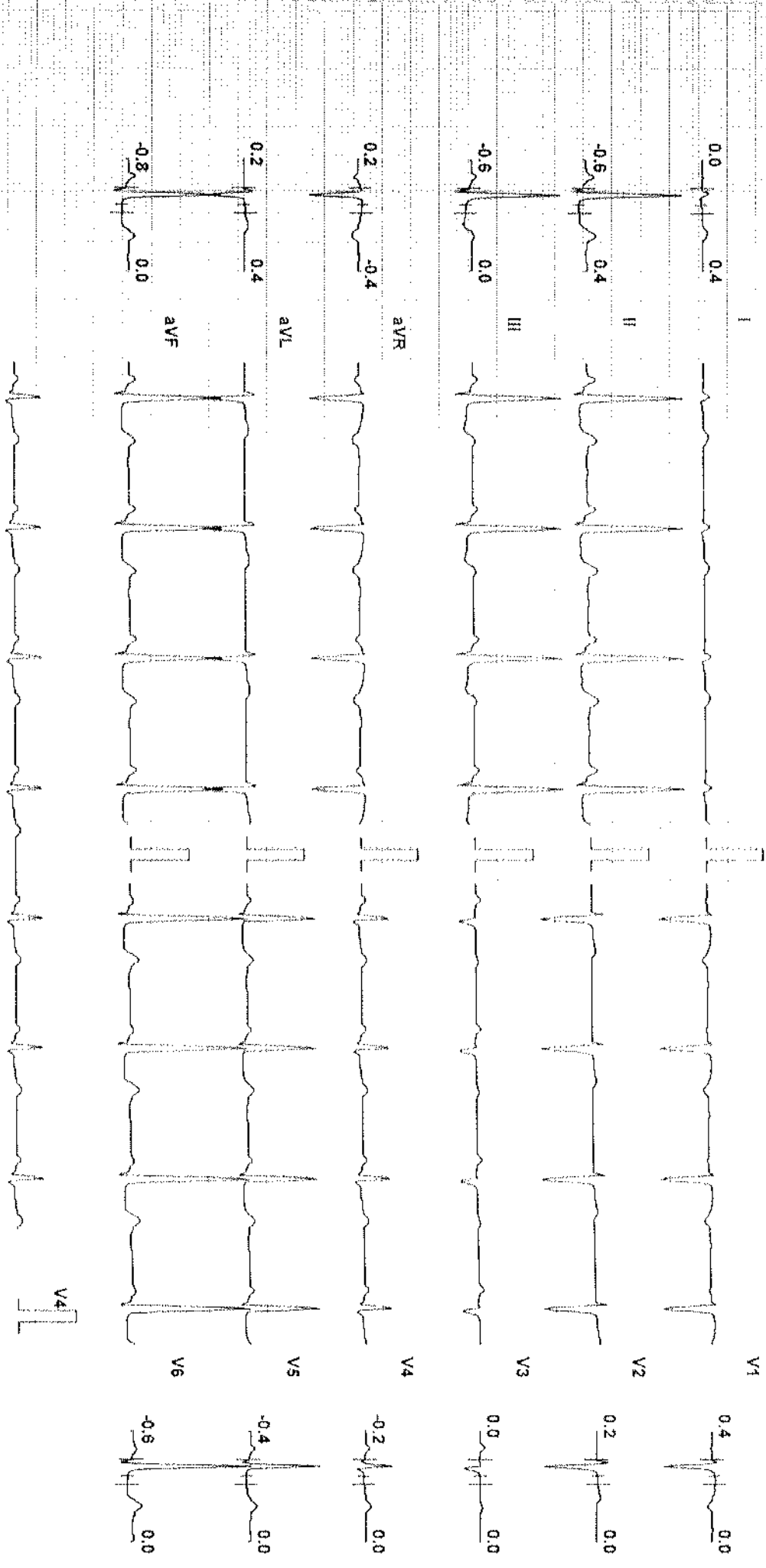


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filter ON

Ampl: 10 mm

NS = R - 50 ms

J = R + 60 ms

Post J = J + 50 ms

Linked Median

Archana S. Ahuja



ARCHANA AHUJA (58 F)

ID: 2367

Date: 25/03/2023

Exec Time : 0 m 0 s

Stage Time : 0 m 8 s

HR: 65 bpm

Protocol: Bruce

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 145 bpm)

B.P: 120 / 80

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

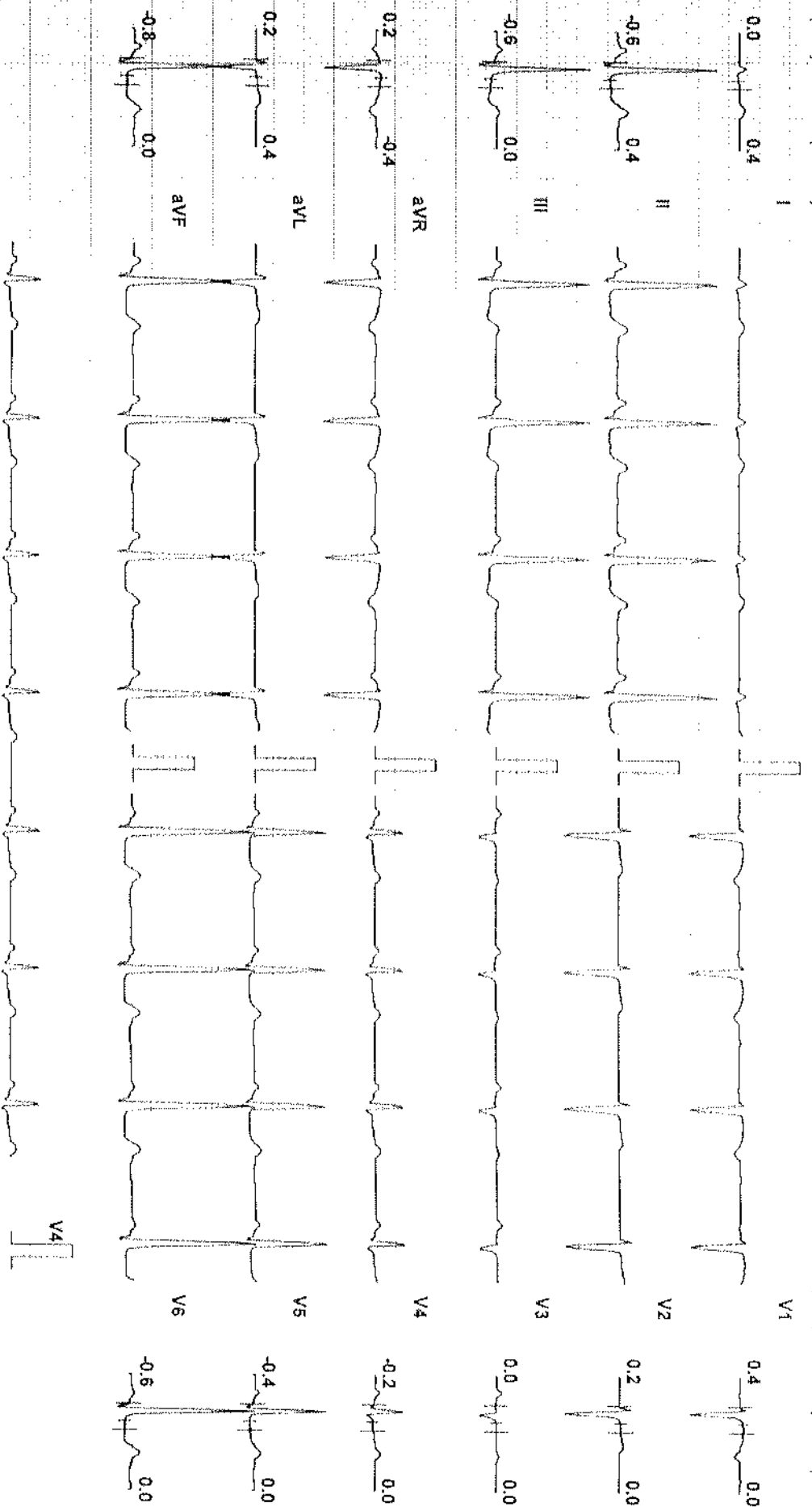


Chart Speed: 25 mm/sec

Filter: 35 Hz

Main: Filt ON

Amp: 10 mm

ISO = R - 50 ms

J = R + 50 ms

Post J = J + 60 ms

Linked Median



ARCHANA AHUJA (58 F)

ID: 2367

Date: 25/03/2023

Exec Time : 0 m 0 s

Stage Time : 0 m 9 s

HR: 65 bpm

Protocol: Bruce

Stage: Hyperventilation Speed: 0 mph

Grade: 0 %

(THR: 145 bpm)

B.P: 120 / 80

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

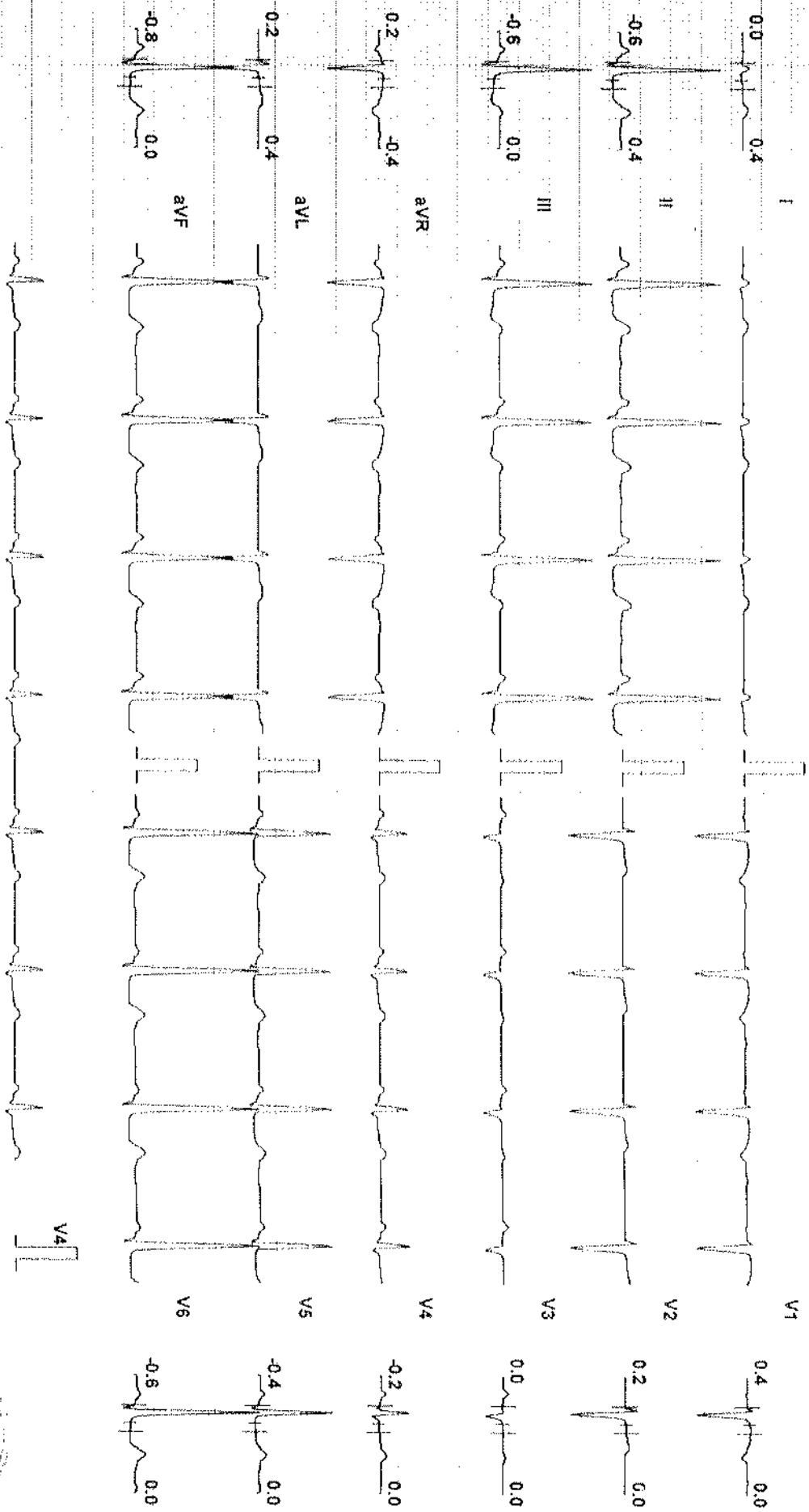


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Schiller Sparshan V4.5f

Linked Median



ARCHANA AHUJA (58 F)

ID: 2367

Date: 25/03/2023 Exec Time : 2 m 54 s Stage Time : 2 m 54 s HR: 91 bpm

Curovis Healthcare Pvt Ltd, Ahmedabad

Test Report

Protocol: Bruce

Stage: 1

Speed: 1.7 mph

Grade: 10 %

(THR: 145 bpm)

B.P: 126 / 86

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

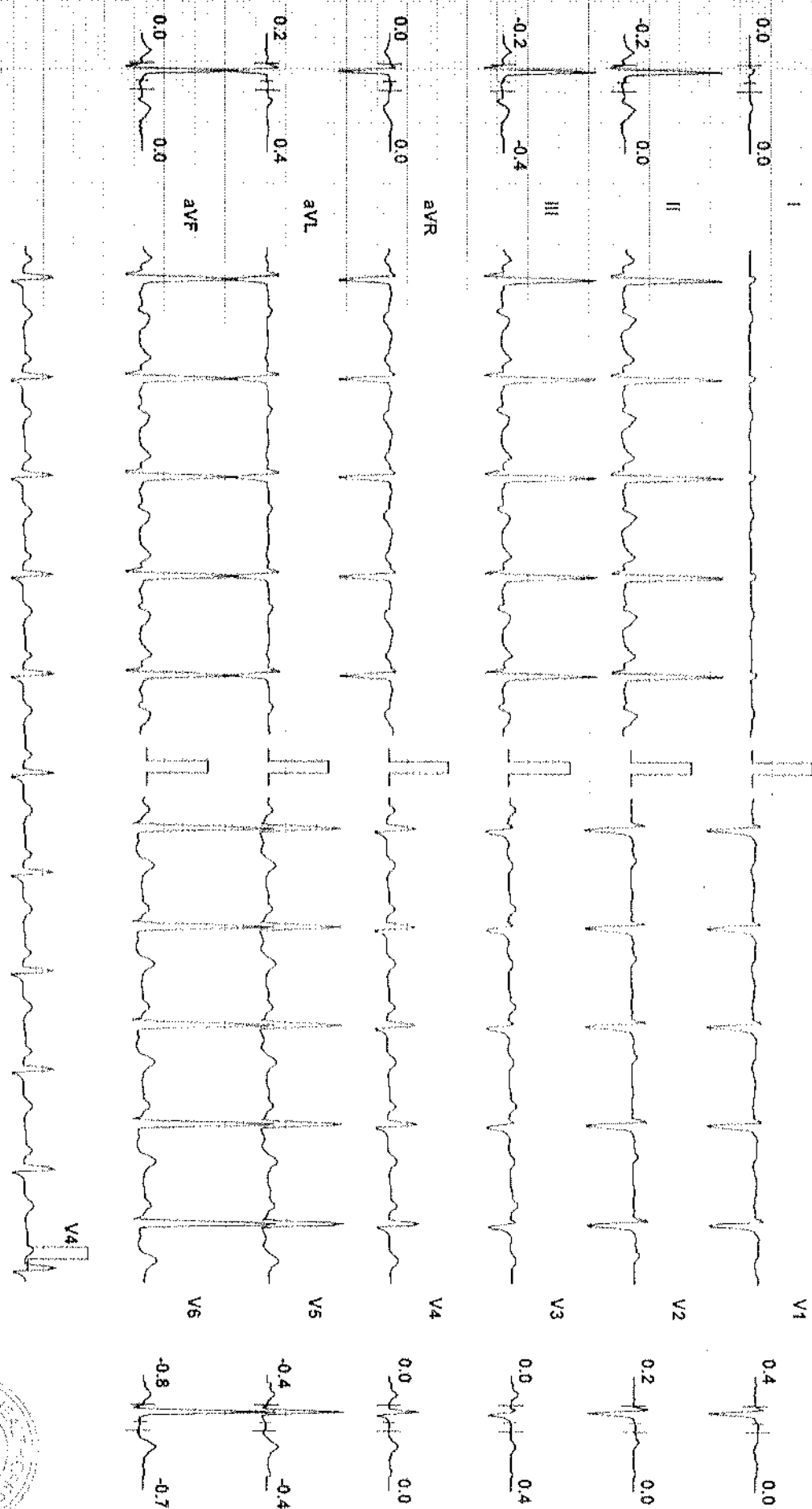


Chart Speed: 25 mm/sec
Schlier Spandan V 4.51

Filter: 35 Hz

Mains Filtr ON

ARRP: 10 mm

ISC = R - 60 ms

J = R - 60 ms

Post J = J + 60 ms

Linked Median



ARCHANA AHUJA (58 F)

ID: 2367

Date: 25/03/2023

Exec Time : 5 m 54 s Stage Time : 2 m 54 s HR: 104 bpm

Protocol: Bruce

Stage: 2

Speed: 2.5 mph

Grade: 12 %

(THR: 145 bpm)

B.P: 132 / 92

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

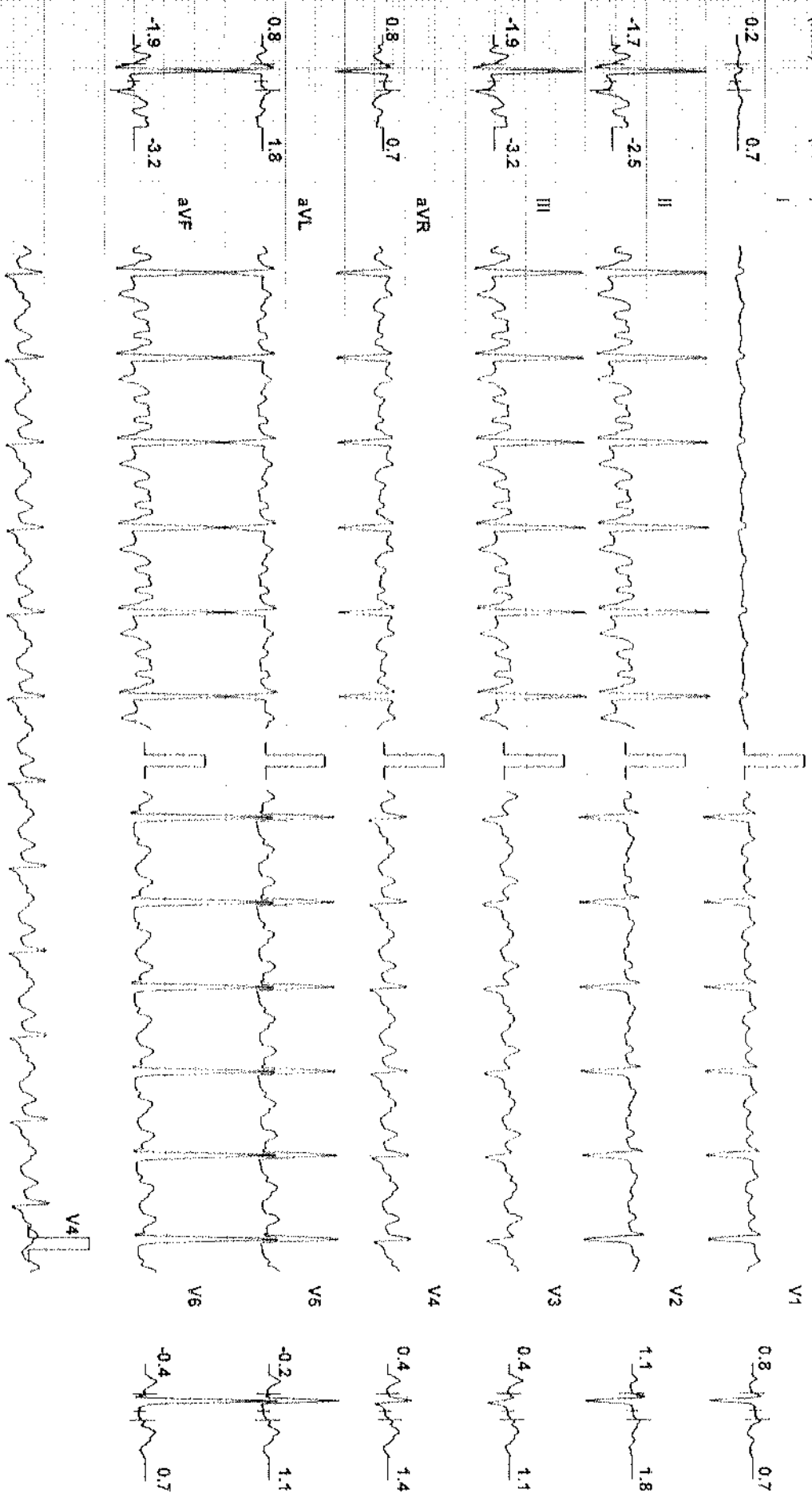


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

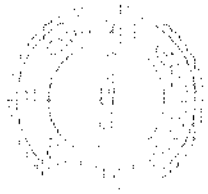
Ampl: 10 mm

50 = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



ARCHANA AHUJA (58 F)

ID: 2367

Date: 25/03/2023

Exec Time : 8 m 40 s Stage Time : 2 m 40 s HR: 123 bpm

Protocol: Bruce

Stage: Peak Ex

Speed: 3.4 mph

Grade: 14 %

(THR: 145 bpm)

B.P: 140 / 100

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

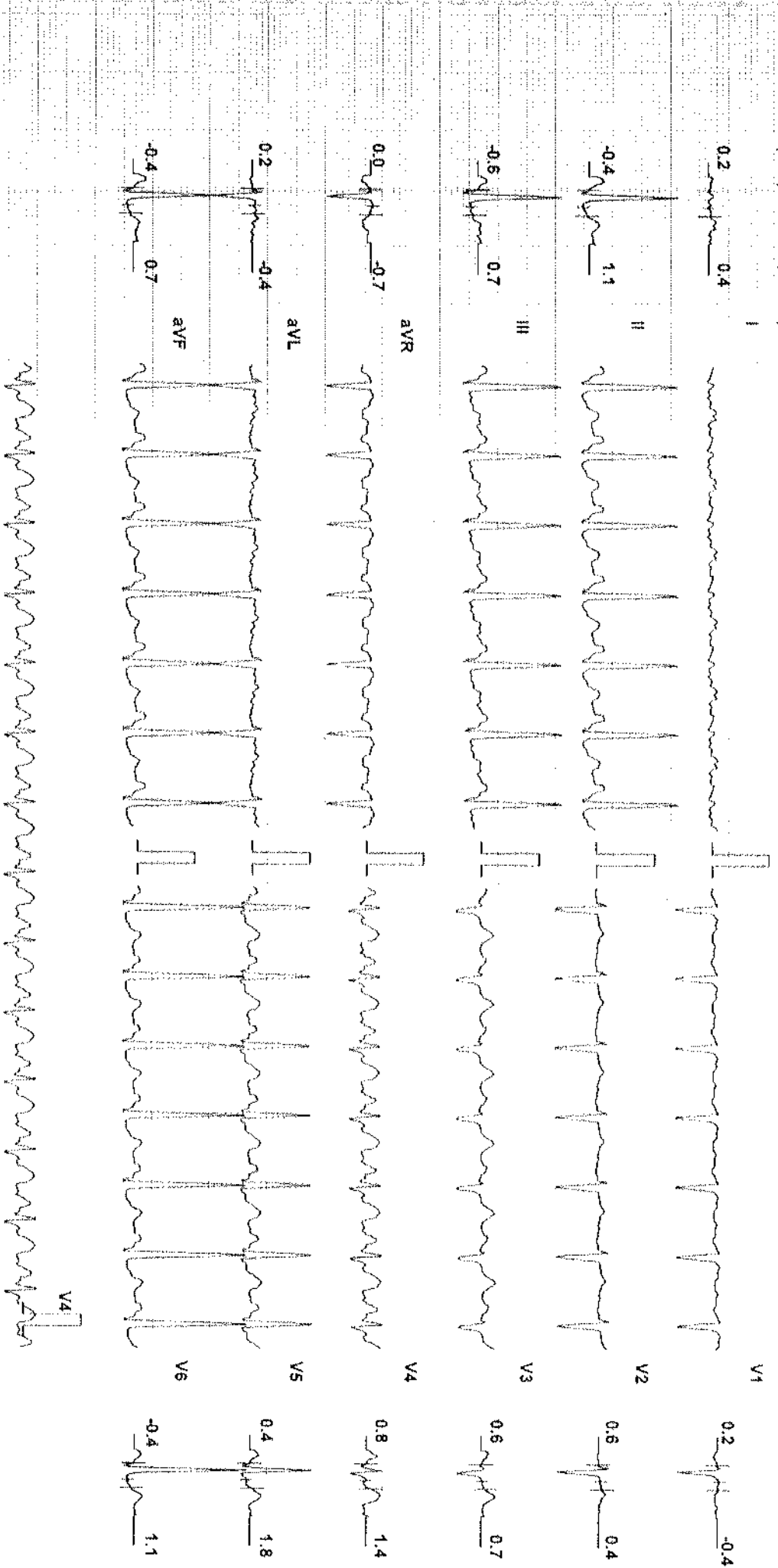


Chart Speed: 25 mm/sec
Schlier Spandan V 4.5i

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



ARCHANA AHUJA (58 F)

ID: 2367

Date: 25/03/2023 Exec Time : 8 m 46 s Stage Time : 0 m 54 s HR: 88 bpm

Curovis Healthcare Pvt Ltd, Ahmedabad

Test Report

Protocol: Bruce

Stage: Recovery(1)

Speed: 1 mph

Grade: 0 %

(THR: 145 bpm)

B.P: 136 / 96

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

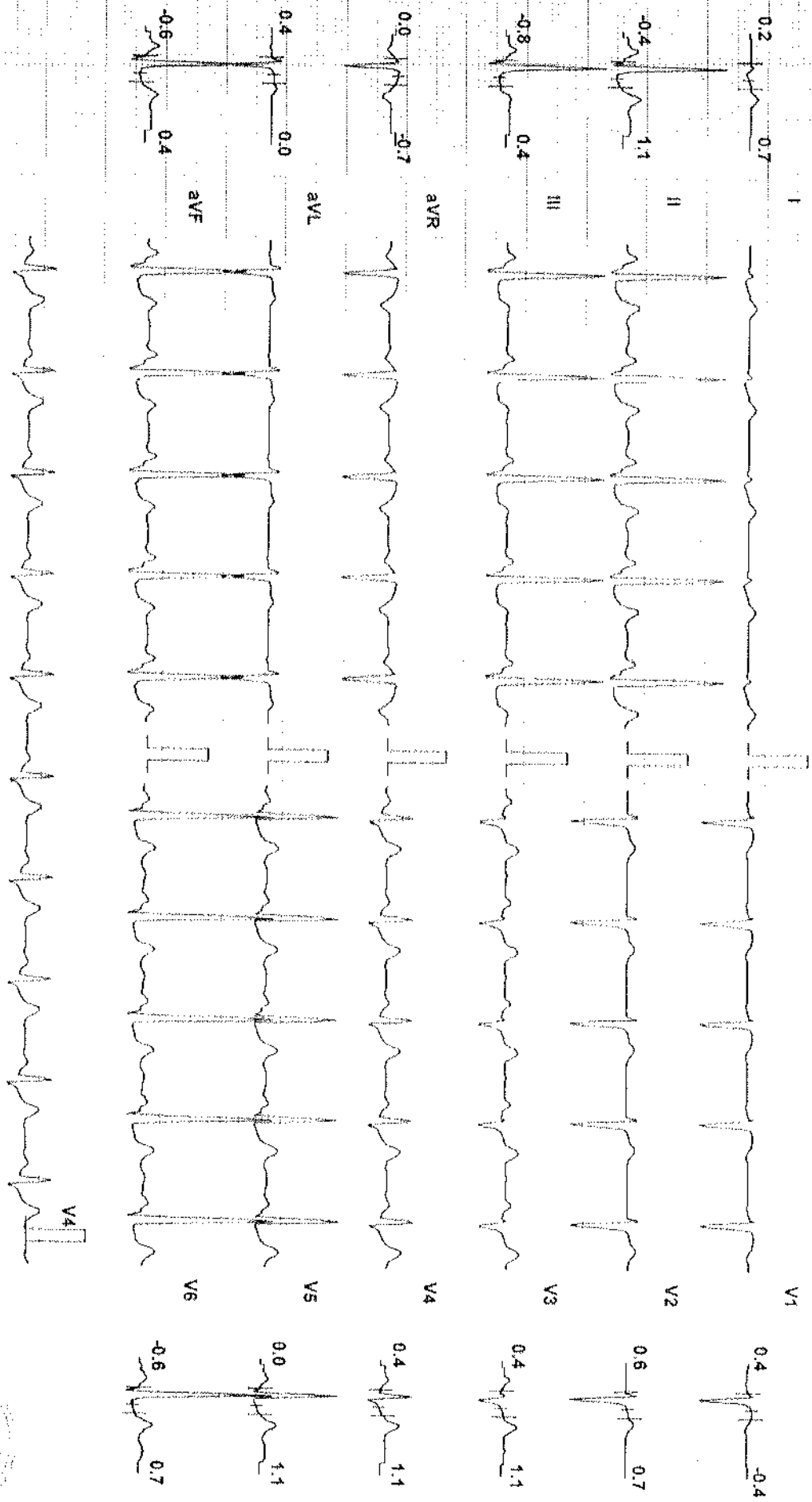


Chart Speed: 25 mm/sec
Schuler Spandan V4.51

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Pack J = J + 60 ms

Linked Median



ARCHANA AHUJA (58 F)

ID: 2367

Date: 26/03/2023

Exec Time : 8 m 46 s Stage Time : 0 m 54 s HR: 77 bpm

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 145 bpm)

B.P: 130 / 90

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

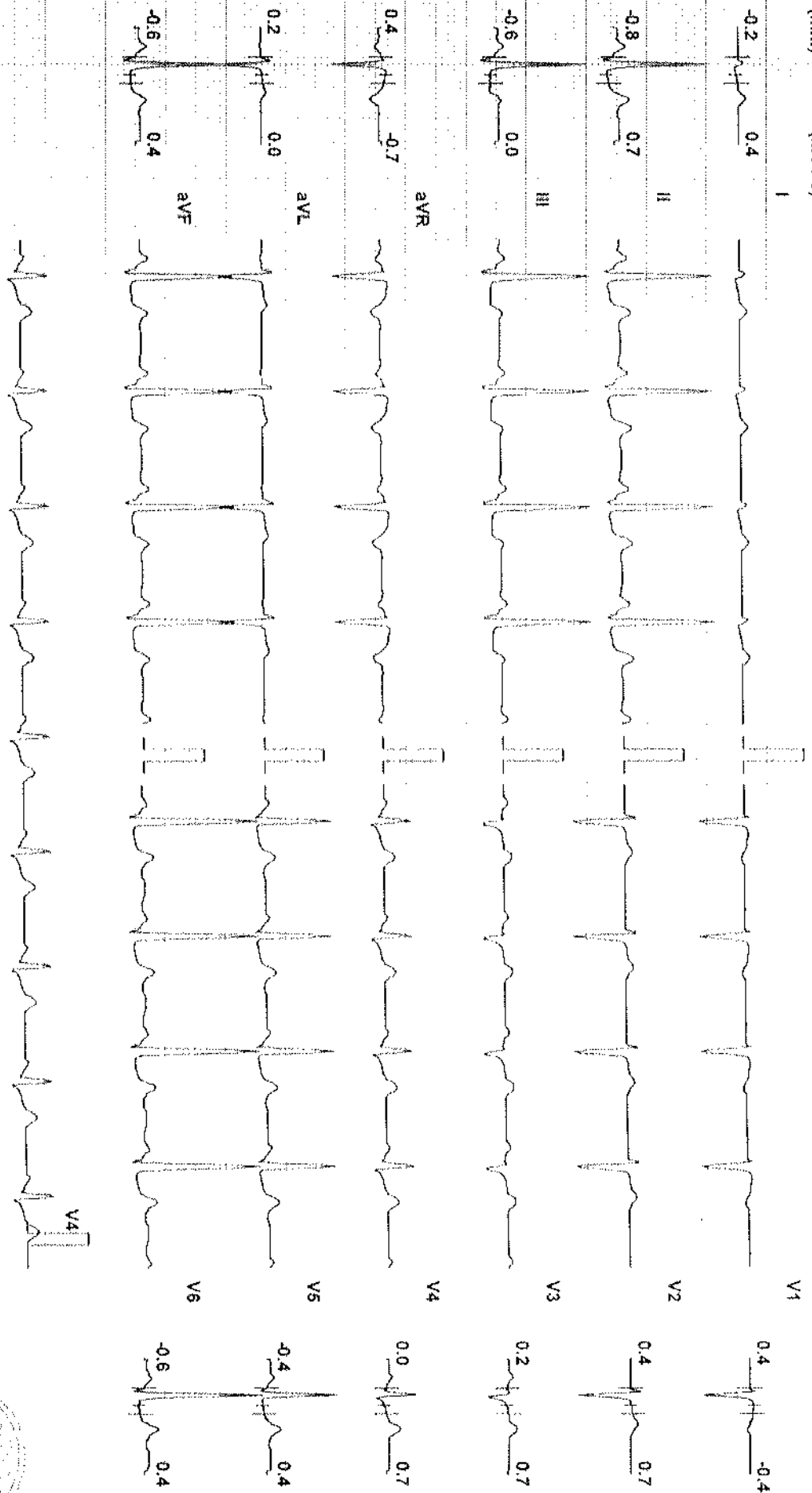


Chart Speed: 25 mm/sec
Schiller Spandan V 4.5i

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

1sec = R - 50 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



ARCHANA AHUJA (58 F)

ID: 2367

Date: 25/03/2023

Exec Time : 8 m 46 s Stage Time : 0 m 46 s HR: 83 bpm

Protocol: Bruce

Stage: Recovery(3)

Speed: 0 mph

Grade: 0 %

(THR: 145 bpm)

B.P: 124 / 84

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

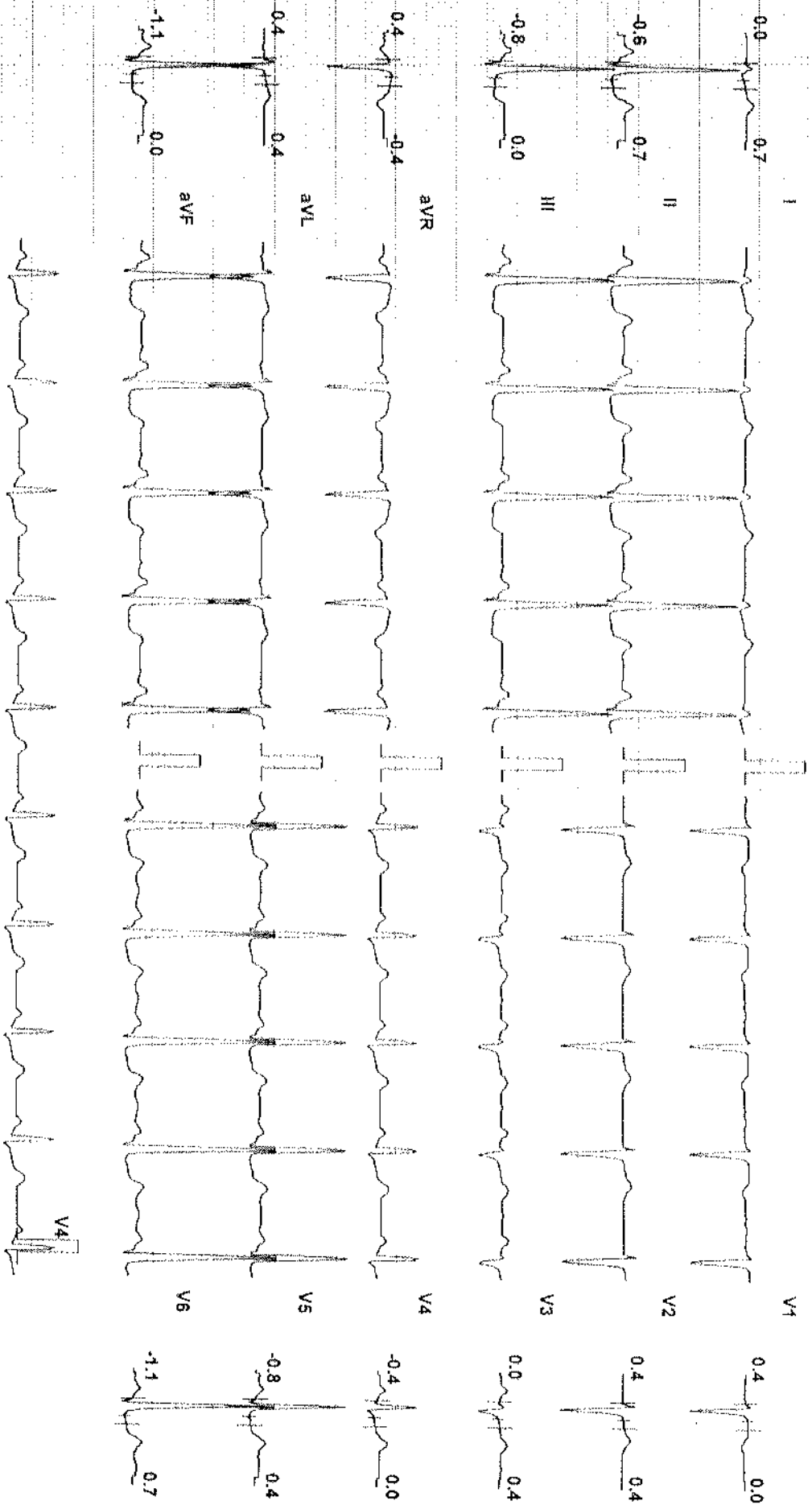


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ASO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

Archana S Ahuja



Curovis Healthcare Pvt Ltd, Ahmedabad

Patient Details	Date: 25/03/2023	Time: 1:07:40 PM	
Name: ARCHANA AHUJA ID: 2367			
Age: 58 y	Sex: F	Height: 148 cms	Weight: 50 Kgs
Clinical History:			
Medications:			

Test Details			
Protocol: Bruce	Pr.MHR: 162 bpm	THR: 145 (90 % of Pr.MHR) bpm	
Total Exec. Time: 8 m 46 s	Max. HR: 129 (80% of Pr.MHR)bpm	Max. Mets: 10.20	
Max. BP: 140 / 100 mmHg	Max. BP x HR: 18060 mmHg/min	Min. BP x HR: 5280 mmHg/min	
Test Termination Criteria: Mets attained.			

Protocol Details

Stage Name	Stage Time (min : sec)	Mets	Speed (mph)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
Supine	0 : 13	1.0	0	0	66	120 / 80	-0.64 III	0.71 II
Standing	0 : 1	1.0	0	0	66	120 / 80	-0.64 III	0.71 II
Hyperventilation	0 : 1	1.0	0	0	66	120 / 80	-0.64 III	0.71 II
1	3 : 0	4.6	1.7	10	87	126 / 86	-2.12 aVF	-2.12 III
2	3 : 0	7.0	2.5	12	129	132 / 92	-3.82 II	5.31 II
Peak Ex	2 : 46	10.2	3.4	14	123	140 / 100	-4.67 aVF	5.31 aVF
Recovery(1)	1 : 0	1.8	1	0	89	136 / 96	-1.70 III	3.89 V4
Recovery(2)	1 : 0	1.0	0	0	78	130 / 90	-1.06 III	1.06 II
Recovery(3)	0 : 52	1.0	0	0	81	124 / 84	-1.06 II	0.71 I

Interpretation

The patient exercised according to the Bruce protocol for 8 m 46 s achieving a work level of Max. METS : 10.20. Resting heart rate initially 66 bpm, rose to a max. heart rate of 129 (80% of Pr.MHR) bpm. Resting blood Pressure 120 / 80 mmHg, rose to a maximum blood pressure of 140 / 100 mmHg.

Negative Stress Test

Dr. Jay Soni
 MD. (General Medicine)
 Reg. No.: G-23896



Ref. Doctor: -----
 (Summary Report edited by user)

Doctor: -----
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