



To,

The Coordinator,  
Mediwheel (Arcofemi Healthcare Limited)  
Helpline number: 011- 41195959

Dear Sir / Madam,

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	ROOBI .
DATE OF BIRTH	08-07-1987
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	11-02-2023
BOOKING REFERENCE NO.	22M180303100040892S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. KUMAR MUKESH
EMPLOYEE EC NO.	180303
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR A
EMPLOYEE PLACE OF WORK	DELHI,MAYUR VIHAR 1
EMPLOYEE BIRTHDATE	16-12-1981

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **08-02-2023** till **31-03-2023**.The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager  
HRM Department  
Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



भारत सरकार



Issue Date: 15/11/2013

रूबी  
Roobi

पुष्टिस त्त / DOB : 08/07/1987  
स्त्री / Female



8108 3673 6061

मेरा आधार, मेरी पहचान



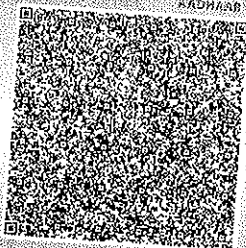
सर्वोच्च न्यायालय, भारत सरकार

Supreme Court of India



ਦਿੱਖਾਵਾ: W/O: ਮੁਕੇਸ਼ ਕੁਮਾਰ, ਏ-125,  
ਸੈਕਟਰ-09, ਜੇਕੇਜੀਸ ਸਕੂਲ ਨੇਰ, ਨਿਯੁ ਵੀਜੈ  
ਨਗਰ, ਗ਼ਾਜ਼ੀਆਬਾਦ, ਉਤਰ ਪ੍ਰਦੇਸ਼,  
201001  
Address: W/O: Mukesh Kumar, E-125,  
Sector -09, Near JKGS School, New Vijay  
Nagar, Ghaziabad, Ghaziabad, Uttar  
Pradesh, 201001

Print Date: 20/01/2022



8108 3673 6061

1947

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Manipal Hospital Ghaziabad

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad 201 002  
0120 3535 353 / +91 88609 45566

URN : MH010773021

## OUTPATIENT RECORD

Hospital No: MH010773021	Visit No: H18000000213																						
Name: MRS ROOBI	Age/Sex: 35 Yrs/Female																						
Doctor Name: HEALTH CHECK MGD	Specialty: HC SERVICE MGD																						
Date: 11/02/2023 09:44AM																							
BP Systolic: 95 mmHg	BP Diastolic: 69 mmHg	Pulse Rate: 76beats per minute																					
Saturation(Oxygen): 100%	Height: 157cm	Weight : 71kg																					
BMI: 28.80	Pain Score: 00	Ideal Body Weight (calculated): 49.69kg																					
Mean Arterial Pressure-MAP: 78 mmHg																							
<p>OPD Notes :</p> <p>PRESENT OPHTHALMIC COMPLAINS -PHC SYSTEMIC/ OPHTHALMIC HISTORY - N/C</p> <table border="1"> <thead> <tr> <th>EXAMINATION DETAILS</th> <th>RIGHT EYE</th> <th>LEFT EYE</th> </tr> </thead> <tbody> <tr> <td>VISION</td> <td>6/6</td> <td>6/6</td> </tr> <tr> <td>CONJ</td> <td>NORMAL</td> <td>NORMAL</td> </tr> <tr> <td>CORNEA</td> <td>CLEAR</td> <td>CLEAR</td> </tr> <tr> <td>LENS</td> <td>CLEAR</td> <td>CLEAR</td> </tr> <tr> <td>OCULAR MOVEMENTS</td> <td>FULL</td> <td>FULL</td> </tr> <tr> <td>NCT</td> <td>17</td> <td>18</td> </tr> </tbody> </table> <p>ADVISE / TREATMENT E/D NISOL 4 TIMES DAILY BE REVIEW AFTER 6 MTH</p>			EXAMINATION DETAILS	RIGHT EYE	LEFT EYE	VISION	6/6	6/6	CONJ	NORMAL	NORMAL	CORNEA	CLEAR	CLEAR	LENS	CLEAR	CLEAR	OCULAR MOVEMENTS	FULL	FULL	NCT	17	18
EXAMINATION DETAILS	RIGHT EYE	LEFT EYE																					
VISION	6/6	6/6																					
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CORNEA	CLEAR	CLEAR																					
LENS	CLEAR	CLEAR																					
OCULAR MOVEMENTS	FULL	FULL																					
NCT	17	18																					

HEALTH CHECK MGD

RADIOLOGY REPORT

Name	ROOBI	Modality	DX
Patient ID	MH010773021	Accession No	R5150388
Gender / Age	F / 35Y 7M 6D	Scan Date	11-02-2023 10:11:06
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	11-02-2023 10:22:36

XR- CHEST PA VIEW

**FINDINGS:**

LUNGS: Normal.  
TRACHEA: Normal.  
CARINA: Normal.  
RIGHT AND LEFT MAIN BRONCHI: Normal.  
PLEURA: Normal.  
HEART: Normal.  
RIGHT HEART BORDER: Normal.  
LEFT HEART BORDER: Normal.  
PULMONARY BAY: Normal.  
PULMONARY HILA: Normal.  
AORTA: Normal.  
THORACIC SPINE: Normal.  
OTHER VISUALIZED BONES: Normal.  
VISUALIZED SOFT TISSUES: Normal.  
DIAPHRAGM: Normal.  
VISUALIZED ABDOMEN: Normal.  
VISUALIZED NECK: Normal.

**IMPRESSION:**

**No significant abnormality noted.**  
Recommend clinical correlation.



Dr. Monica Shekhawat, MBBS, DNB,  
Consultant Radiologist, Reg No MCI 11 10887

RADIOLOGY REPORT

<b>Name</b>	ROOBI	<b>Modality</b>	US
<b>Patient ID</b>	MH010773021	<b>Accession No</b>	R5150389
<b>Gender/Age</b>	F / 35Y 7M 6D	<b>Scan Date</b>	11-02-2023 10:37:31
<b>Ref. Phys</b>	Dr. HEALTH CHECK MGD	<b>Report Date</b>	11-02-2023 11:15:35

**USG ABDOMEN & PELVIS  
FINDINGS**

LIVER: appears normal in size (measures 149 mm) and shape but shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 91 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 10.1 mm.

COMMON BILE DUCT: Appears normal in size and measures 4.2mm.

IVC, HEPATIC VEINS: Normal.

BILIARY SYSTEM: Normal.

GALL BLADDER: Gall bladder is well distended but is folded on itself. Wall thickness is normal and lumen is echofree. Rest normal.

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.

Right Kidney: measures 102 x 37 mm.

Left Kidney: measures 97 x 45 mm.

PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged.

FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

UTERUS: Uterus is anteverted, normal in size (measures 88 x 45 x 45 mm), shape and echotexture. Endometrial thickness measures 5.6 mm. Cervix appears normal.

OVARIES: Both ovaries are normal in size, shape and echotexture. Rest normal.

Right ovary measures 26 x 24 x 13 mm with volume 4 cc.

Left ovary measures 26 x 24 x 19 mm with volume 6 cc.

BOWEL: Visualized bowel loops appear normal.

**IMPRESSION**

**-Diffuse grade I fatty infiltration in liver.**

Recommend clinical correlation.

RADIOLOGY REPORT

<b>Name</b>	ROOBI	<b>Modality</b>	US
<b>Patient ID</b>	MH010773021	<b>Accession No</b>	R5150389
<b>Gender/Age</b>	F / 35Y 7M 6D	<b>Scan Date</b>	11-02-2023 10:37:31
<b>Ref. Phys</b>	Dr. HEALTH CHECK MGD	<b>Report Date</b>	11-02-2023 11:15:35

*Monica*

Dr. Monica Shekhawat, MBBS, DNB,  
Consultant Radiologist, Reg No MCI 11 10887

## LABORATORY REPORT

Name	: MRS ROOBI	Age	: 35 Yr(s) Sex :Female
Registration No	: MH010773021	Lab No	: 32230204442
Patient Episode	: H18000000213	Collection Date	: 11 Feb 2023 14:05
Referred By	: HEALTH CHECK MGD	Reporting Date	: 11 Feb 2023 15:40
Receiving Date	: 11 Feb 2023 14:11		

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>THYROID PROFILE, Serum</b>			
T3 - Triiodothyronine (ECLIA)	0.97	ng/ml	[0.70-2.04]
T4 - Thyroxine (ECLIA)	7.03	micg/dl	[4.60-12.00]
Thyroid Stimulating Hormone (ECLIA)	3.570	μIU/mL	[0.340-4.250]
1st Trimester:0.6 - 3.4	micIU/mL		
2nd Trimester:0.37 - 3.6	micIU/mL		
3rd Trimester:0.38 - 4.04	micIU/mL		

Note : TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m.and at a minimum between 6-10 pm.Factors such as change of seasons hormonal fluctuations,Ca or Fe supplements,high fibre diet,stress and illness affect TSH results.

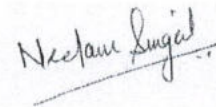
\* References ranges recommended by the American Thyroid Association

1) Thyroid. 2011 Oct;21(10):1081-125.PMID .21787128

2) <http://www.thyroid-info.com/articles/tsh-fluctuating.html>

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-----END OF REPORT-----



Dr. Neelam Singal  
CONSULTANT BIOCHEMISTRY



## LABORATORY REPORT

<b>Name</b>	: MRS ROOBI	<b>Age</b>	: 35 Yr(s) Sex :Female
<b>Registration No</b>	: MH010773021	<b>Lab No</b>	: 202302001204
<b>Patient Episode</b>	: H18000000213	<b>Collection Date</b>	: 11 Feb 2023 09:49
<b>Referred By</b>	: HEALTH CHECK MGD	<b>Reporting Date</b>	: 11 Feb 2023 16:01
<b>Receiving Date</b>	: 11 Feb 2023 09:49		

### HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>COMPLETE BLOOD COUNT (AUTOMATED)</b>		<b>SPECIMEN-EDTA Whole Blood</b>	
RBC COUNT (IMPEDEANCE)	4.03	millions/cu mm	[3.80-4.80]
HEMOGLOBIN	12.1	g/dl	[12.0-15.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	36.2	%	[36.0-46.0]
MCV (DERIVED)	89.8	fL	[83.0-101.0]
MCH (CALCULATED)	30.0	pg	[27.0-32.0]
MCHC (CALCULATED)	33.4	g/dl	[31.5-34.5]
<b>RDW CV% (DERIVED)</b>	<b>14.6 #</b>	%	<b>[11.6-14.0]</b>
Platelet count	160	x 10 <sup>3</sup> cells/cumm	[150-400]
MPV(DERIVED)	12.7		
WBC COUNT(TC) (IMPEDEANCE)	5.72	x 10 <sup>3</sup> cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	51.0	%	[40.0-80.0]
Lymphocytes	42.0	%	[17.0-45.0]
Monocytes	4.0	%	[2.0-10.0]
Eosinophils	3.0	%	[2.0-7.0]
Basophils	0.0	%	[0.0-2.0]
<b>ESR</b>	<b>35.0 #</b>	<b>/1sthour</b>	<b>[0.0-</b>

## LABORATORY REPORT

<b>Name</b>	: MRS ROOBI	<b>Age</b>	: 35 Yr(s) Sex :Female
<b>Registration No</b>	: MH010773021	<b>Lab No</b>	: 202302001204
<b>Patient Episode</b>	: H18000000213	<b>Collection Date</b>	: 11 Feb 2023 09:49
<b>Referred By</b>	: HEALTH CHECK MGD	<b>Reporting Date</b>	: 11 Feb 2023 18:00
<b>Receiving Date</b>	: 11 Feb 2023 09:49		

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>Glycosylated Hemoglobin</b>			
Specimen: EDTA			
HbA1c (Glycosylated Hemoglobin)	5.6	%	[0.0-5.6]
Method: HPLC			
			As per American Diabetes Association(ADA)
			HbA1c in %
			Non diabetic adults >= 18years <5.7
			Prediabetes (At Risk )5.7-6.4
			Diagnosing Diabetes >= 6.5
Estimated Average Glucose (eAG)	114	mg/dl	

Comments : HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemc control.

### ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

#### MACROSCOPIC DESCRIPTION

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction[pH]	5.0	(4.6-8.0)
Specific Gravity	1.010	(1.003-1.035)

#### CHEMICAL EXAMINATION

Protein/Albumin	Negative	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	Negative	(NEGATIVE)
Urobilinogen	Normal	(NORMAL)

## LABORATORY REPORT

<b>Name</b>	: MRS ROOBI	<b>Age</b>	: 35 Yr(s) Sex :Female
<b>Registration No</b>	: MH010773021	<b>Lab No</b>	: 202302001204
<b>Patient Episode</b>	: H18000000213	<b>Collection Date</b>	: 11 Feb 2023 10:53
<b>Referred By</b>	: HEALTH CHECK MGD	<b>Reporting Date</b>	: 11 Feb 2023 16:19
<b>Receiving Date</b>	: 11 Feb 2023 10:53		

### CLINICAL PATHOLOGY

#### MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells	0-1 /hpf	(0-5/hpf)
RBC	1-2 /hpf	(0-2/hpf)
Epithelial Cells	1-2 /hpf	
CASTS	nil	
Crystals	nil	
OTHERS	nil	

#### Serum LIPID PROFILE

<b>Serum TOTAL CHOLESTEROL</b>	244 #	mg/dl	<b>[&lt;200]</b> Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	113	mg/dl	<b>[&lt;150]</b> Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL	59.0	mg/dl	<b>[35.0-65.0]</b>
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	23	mg/dl	<b>[0-35]</b>
<b>CHOLESTEROL, LDL, CALCULATED</b>	162.0 #	mg/dl	<b>[&lt;120.0]</b> Near/ Borderline High:130-159 High Risk:160-189
Above optimal-100-129			<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
T.Chol/HDL.Chol ratio(Calculated)	4.1		
LDL.CHOL/HDL.CHOL Ratio(Calculated)	2.7		<3 Optimal 3-4 Borderline >6 High Risk

Note:

## LABORATORY REPORT

<b>Name</b>	: MRS ROOBI	<b>Age</b>	: 35 Yr(s) Sex :Female
<b>Registration No</b>	: MH010773021	<b>Lab No</b>	: 202302001204
<b>Patient Episode</b>	: H18000000213	<b>Collection Date</b>	: 11 Feb 2023 09:49
<b>Referred By</b>	: HEALTH CHECK MGD	<b>Reporting Date</b>	: 11 Feb 2023 11:53
<b>Receiving Date</b>	: 11 Feb 2023 09:49		

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Reference ranges based on ATP III Classifications.

#### KIDNEY PROFILE

Specimen: Serum			
UREA	25.2	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay			
BUN, BLOOD UREA NITROGEN	11.8	mg/dl	[8.0-20.0]
Method: Calculated			
CREATININE, SERUM	0.78	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardization			
URIC ACID	4.1	mg/dl	[4.0-8.5]
Method:uricase PAP			

SODIUM, SERUM	137.0	mmol/L	[136.0-144.0]
POTASSIUM, SERUM	4.34	mmol/L	[3.60-5.10]
SERUM CHLORIDE	105.1	mmol/l	[101.0-111.0]
Method: ISE Indirect			

eGFR (calculated)	98.8	ml/min/1.73sq.m	[>60.0]
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#### Technical Note

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years. eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.

## LABORATORY REPORT

<b>Name</b>	: MRS ROOBI	<b>Age</b>	: 35 Yr(s) Sex :Female
<b>Registration No</b>	: MH010773021	<b>Lab No</b>	: 202302001204
<b>Patient Episode</b>	: H18000000213	<b>Collection Date</b>	: 11 Feb 2023 09:49
<b>Referred By</b>	: HEALTH CHECK MGD	<b>Reporting Date</b>	: 11 Feb 2023 11:55
<b>Receiving Date</b>	: 11 Feb 2023 09:49		

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>LIVER FUNCTION TEST</b>			
BILIRUBIN - TOTAL Method: D P D	0.70	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.12	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.58 #	mg/dl	[0.10-0.30]
TOTAL PROTEINS (SERUM) Method: BIURET	7.70	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.36	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	3.30	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.31		[1.00-2.50]
AST (SGOT) (SERUM) Method: IFCC W/O P5P	17.00	U/L	[0.00-40.00]
ALT (SGPT) (SERUM) Method: IFCC W/O P5P	14.00	U/L	[14.00-54.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	53.0	IU/L	[40.0-98.0]
GGT	9.0		[7.0-50.0]

## LABORATORY REPORT

Name : MRS ROOBI Age : 35 Yr(s) Sex :Female  
Registration No : MH010773021 Lab No : 202302001204  
Patient Episode : H18000000213 Collection Date : 11 Feb 2023 09:49  
Referred By : HEALTH CHECK MGD Reporting Date : 11 Feb 2023 17:54  
Receiving Date : 11 Feb 2023 09:49

### BLOOD BANK

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Blood Group & Rh Typing (Agglutination by gel/tube technique)			Specimen-Blood
Blood Group & Rh typing	A Rh(D) Positive		

**Technical note:**

*ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.*

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-----END OF REPORT-----



Dr. Alka Dixit Vats  
Consultant Pathologist

## LABORATORY REPORT

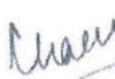
Name : MRS ROOBI Age : 35 Yr(s) Sex :Female  
Registration No : MH010773021 Lab No : 202302001205  
Patient Episode : H18000000213 Collection Date : 11 Feb 2023 09:49  
Referred By : HEALTH CHECK MGD Reporting Date : 11 Feb 2023 11:55  
Receiving Date : 11 Feb 2023 09:49

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>GLUCOSE-Fasting</b> Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	101.0	mg/dl	[70.0-110.0]

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-----END OF REPORT-----

  
Dr. Charu Agarwal  
Consultant Pathologist

## LABORATORY REPORT

Name : MRS ROOBI Age : 35 Yr(s) Sex :Female  
Registration No : MH010773021 Lab No : 202302001206  
Patient Episode : H18000000213 Collection Date : 11 Feb 2023 14:09  
Referred By : HEALTH CHECK MGD Reporting Date : 11 Feb 2023 15:29  
Receiving Date : 11 Feb 2023 14:09

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
PLASMA GLUCOSE			
Specimen: Plasma			
GLUCOSE, POST PRANDIAL (PP), 2 HOURS	89.0	mg/dl	[80.0-140.0]
Method: Hexokinase			

Note:  
Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption, post exercise

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-----END OF REPORT-----



Dr. Alka Dixit Vats  
Consultant Pathologist



roobi

ID:

11-Feb-2023

10:25:47

Manipal Hospitals, Ghaziabad



31 years  
Female  
Asian

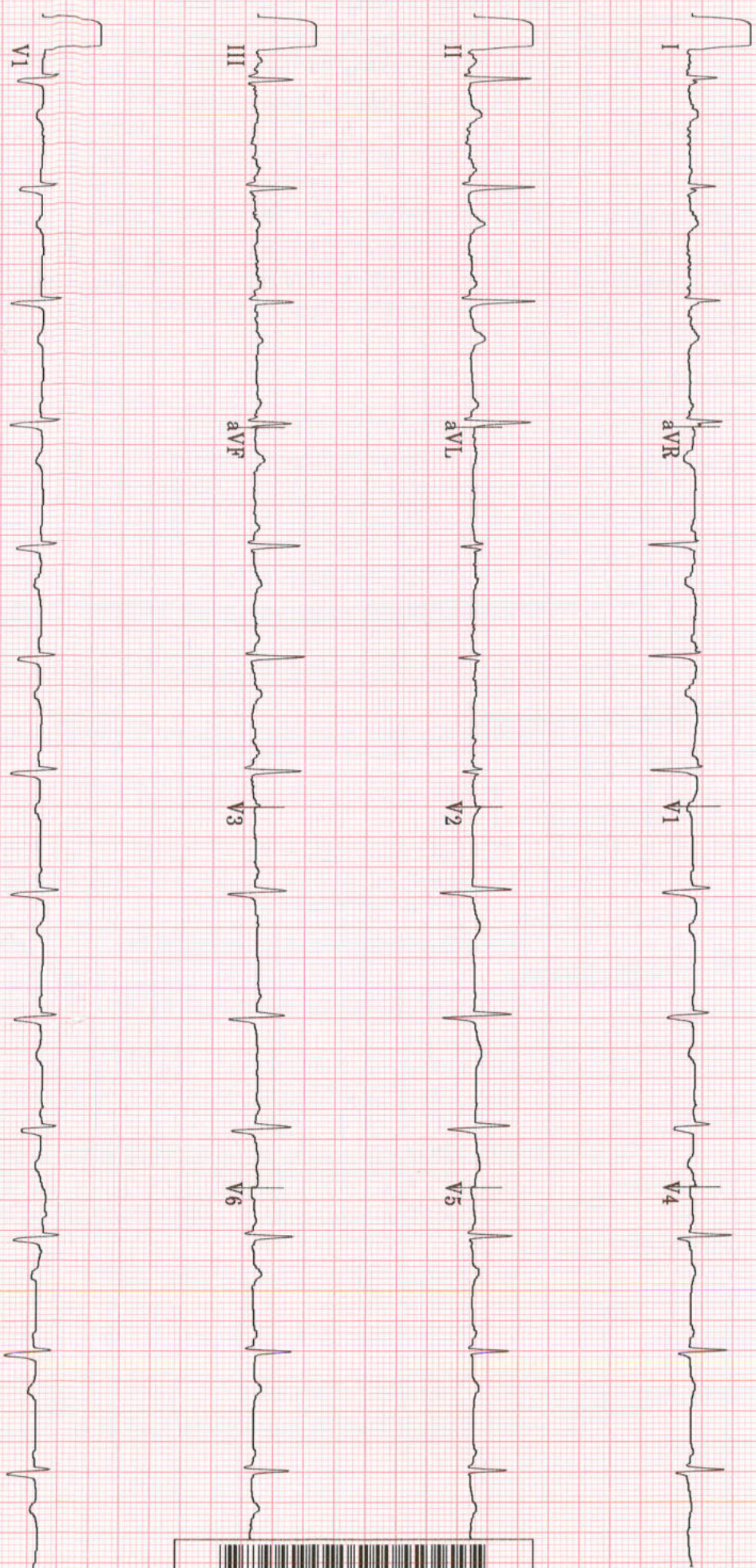
Vent. rate	79 bpm
PR interval	148 ms
QRS duration	74 ms
QT/QTc	364/417 ms
P-R-T axes	67 63 49

Technician:  
Test ind:

Normal sinus rhythm  
Normal ECG

Referred by: hcp

Unconfirmed



20 Hz

P/N 25.0 mm/s

10.0 mm/mV

Vital Signs™

4 by 2.5s + 1 rhythm ID PRINTED IN U.S.A.

MAC55 009C

12SL™ V239



## TMT INVESTIGATION REPORT

Patient Name : Mrs. ROOBI	Location	: Ghaziabad
Age/Sex : 31 Year(s)/Female	Visit No	: V0000000001-GHZB
MRN No MH010773021	Order Date	: 11/02/2023
Ref. Doctor : HCP	Report Date	: 11/02/2023

**Protocol** : Bruce **MPHR** : 189BPM  
**Duration of exercise** : 6min 34sec **85% of MPHR** : 160BPM  
**Reason for termination** : THR achieved **Peak HR Achieved** : 164BPM  
**Blood Pressure (mmHg)** : Baseline BP : 100/70mmHg **% Target HR** : 86%  
Peak BP : 126/70mmHg **METS** : 7.8METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	99	100/70	Nil	No ST changes seen	Nil
STAGE 1	3:00	125	110/70	Nil	No ST changes seen	Nil
STAGE 2	3:00	156	120/70	Nil	No ST changes seen	Nil
STAGE 3	0:34	164	126/70	Nil	No ST changes seen	Nil
RECOVERY	3:09	92	110/70	Nil	No ST changes seen	Nil

**COMMENTS:**

- No ST changes in base line ECG.
- No ST changes during exercise and recovery.
- Normal chronotropic response.
- Normal blood pressure response.
- Fair effort tolerance.

**IMPRESSION:**

Treadmill test is **negative** for exercise induced reversible myocardial ischemia.

**Dr. Bhupendra Singh**

MD, DM (CARDIOLOGY), FACC  
Sr. Consultant Cardiology

**Dr. Abhishek Singh**

MD, DNB (CARDIOLOGY), MNAMS  
Sr. Consultant Cardiology

**Dr. Sudhanshu Mishra**

MD  
Cardiology Registrar

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Opp. Bahmeta Village, Ghaziabad, Uttar Pradesh - 201 002

P : 0120-616 5666

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Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

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