



OPD ASSESSMENT FORM



Name Mr. Rahul Mohan Ghouse Age.Sex 42/M MR.No. 5150407

Doctor Dr Pramur Shukh Date 02/03/2024

Ht : 160 cm Wt. : 62.5 kg Temp : Ⓚ Pulse : 91 bpm BP : 160/105

SPO2 : 98% Post of walk SPO2 : _____

Chief Complaints :

Dyslipidaemia
Isthm Detected HT.
Diet Control

Drug / Food Allergy :

Prior Medication Reviewed : Yes No

On examination :

Past History :

Provisional Diagnosis :

Nutritional Assessment :

- Obese
- Well nourished
- Mild- moderate nourished
- Severely mal-nourished

Treatment and further Advices :
(Write in Capital Letters)

Rx

T. Atorvastatin
(20) 1-0-0 (30)

Investigation advised :

Follow Up : _____ Date : _____





OPD ASSESSMENT FORM



Name Mr. Rahul Mohan Girase Age.Sex 43/M MR.No. 5150407

Doctor Dr. Umareg Desai Date 02/03/2024

Ht : _____ Wt. : _____ Temp : _____ Pulse : _____ BP : _____

SPO2 : _____ Post of walk SPO2 : _____

Chief Complaints :

Drug / Food Allergy :

- Routine dental check up

Prior Medication Reviewed : Yes No

On examination :

Past History :

- to stain calculus

Provisional Diagnosis :

Nutritional Assessment :

- Obese
- Well nourished
- Mild- moderate nourished
- Severely mal-nourished

Treatment and further Advices :
(Write in Capital Letters)

Rx

1) scaling

Investigation advised :

U. n. Desai
Dr. Shallaja Desai
 B.D.S. (Dental Surgeon)
 A-9793
 Dental Surgeon
 Sunshine Global Hospital, Surat
 Signature

Follow Up : _____ Date : _____



OPD ASSESSMENT FORM



Name Mr. Rahul Ghouse Age.Sex _____ MR.No. _____

Doctor Dr. Hardik Shroff Date 23/24

Ht : _____ Wt. : _____ Temp : _____ Pulse : _____ BP : _____

SPO2 : _____ Post of walk SPO2 : _____

Chief Complaints :

Drug / Food Allergy :

Go leg in RE
06.2018

Prior Medication Reviewed : Yes No

On examination : BE Ant-SAG MMS

Past History :

Vr q/c Gd4 Nig
G/B

R-1.5-6/12 (RMS)
ST L-1.5-0.75/80/6

Fundi (central)

RE P. c/d mtr 0-6-0.7
LE MMS

Provisional Diagnosis :

Nutritional Assessment :

BE Myopia RE

- Obese
- Well nourished
- Mild- moderate nourished
- Severely mal-nourished

Treatment and further Advices :
(Write in Capital Letters)

2 Amblyopia

Rx

Investigation advised :

Dr. Hardik Shroff

DOMS, DNB (Ophthalmology)
Regd. No. G-28902

Follow Up : Go Date : _____

SUNSHINE GLOBAL HOSPITAL
Piplod, SURAT
Signature

DOC. No. SGHS/FMT/OPD015 D01 14/06/2014 Rev. No. 0.0



SPECTACLE CARD



Ref. No. S150407 Name: Mr. Rahul M. Girani Date: 2/3/2024

RIGHT				LEFT			
Sph.	Cyl.	Axis	V.A.	Sph.	Cyl.	Axis	V.A.
-1.5	—	—	6/12	-1.5	-0.25	80	6/6
-0.25	—	—	NIGP	-0.25	-0.25	80	NIG

Remarks:

Progressive

INSTRUCTIONS:

- Verify your new glasses before using them.
- Bring this prescription on every visit.
- Get your glasses checked every six months to one year if necessary.
- Donate Eyes, Help Blind.
- Request to optician. Please prepare the glasses according to this prescription only.

Time : 09:00 am to 11:00 am, Monday to Saturday
Please obtain reporting time in advance & always bring OPD File

Consulting Eye Surgeon




PAT. NAME: Rahul Girase	Date :02/03/2024
REF. DOCTOR : Hosp Dr.	AGE : 35 Yrs / M
INV. : Radiograph of Chest PA	MR NO. : S150407

Clinical Details: HC.

Observation:

- Both the lung fields appears normal.
- Both costophrenic angles appear clear.
- Both the hila appears normal.
- Trachea appears in midline.
- Cardiac size and other mediastinal shadows appears normal.
- Both domes of diaphragm appear normal.
- Bony thorax appears normal.


Dr. Sneha Dumaswala
MBBS, DNB-Radiodiagnosis
Consultant Radiologist
G-21796

Transcribed By: Fenali

Page: 1 out of 1
Date & Time of report: 02/03/2024 – 12:30 PM

Surat:
Piplod
Beside Big Bazar, Gaurav Path,
Dumas Road, Surat - 395007
T : +91 0261 4111000
F : +91 0261 4111001

Vadodara :
Manjalpur
Nr. Shreyas Vidyalaya, Nalini House,
Manjalpur, Vadodara - 390 011.
T : +91 265 3300400, 2633200, 2632044
F : +91 265 2632400

Vadodara :
Tilak Road
Anant Apartment, B/s. Aradhna Cinema,
Tilak Road, Vadodara - 390 001.
T : +91 265 2429282, 2429262
F : +91 265 434073

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Toll Free No-1800 270 6666

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PAT. NAME : Rahul Girase	Date : 02/03/2024
REF. DOCTOR : Hosp. Dr.	AGE : 43 Yrs / M
INV. : USG Whole Abdomen	MR NO. : S150407

Findings:

Liver is normal in size, shape and shows normal echopattern. No e/o any focal or diffuse lesion noted. Intrahepatic biliary radicals are normal.

Gall bladder is distended and appears normal. No e/o calculus, sludge or mass lesion is seen. CBD and Portal Vein appears normal in size and calibre.


Pancreas appears normal in size and shows normal echopattern to the extent assessed. Spleen appears normal in size, shape and homogenous echopattern.

Both kidneys appear normal in size, shape and echopattern. The corticomedullary differentiation is well maintained. No e/o any calculus or hydronephrosis is seen.

Aorta and para-aortic regions appear normal. No e/o any lymphadenopathy. Urinary bladder appears well distended and normal. No e/o free fluid in pelvis.

IMPRESSION:

- No significant abnormality seen.


Dr. Sneha Dumaswala
MBBS, DNB-Radiodiagnosis
Consultant Radiologist
G-21796

Transcribed By: Fenali

Page: 1 out of 1
Date & Time of report: 03/02/2024 - 12:29 PM

Surat:
Piplod
Beside Big Bazar, Gaurav Path,
Dumas Road, Surat - 395007
T : + 91 0261 4111000
F : + 91 0261 4111001

Vadodara :
Manjalpur
Nr. Shreyas Vidyalaya, Nalini House,
Manjalpur, Vadodara - 390 011.
T : +91 265 3300400, 2633200, 2632044
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Anant Apartment, B/s. Aradhna Cinema,
Tilak Road, Vadodara - 390 001.
T : +91 265 2429282, 2429262
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MR No. : S150407
Patient Name : Mr. Rahul Mohan Girase
Ref By : Dr. Hospital A Doctor
Collection Date : 02/03/2024 10:15AM
Age : 43 Y Sex : Male
Report Date : 02/03/2024 11:11AM

HAEMATOLOGY

Parameter	Result	Units	Normal Range
CBC with ESR			
HAEMOGLOBIN	15.2	gm/dl	13.0 - 17.0
PCV	47.1	%	40 - 50
RBC COUNT	5.36	mill/cmm	4.5 - 5.5
ICV	87.9	fl	76 - 96
MCH	28.4	pg	26 - 32
MCHC	32.3	%	32 - 36
RDW	12.3	%	11 - 15
PLATELET COUNT	3.05	lacs/cmm	1.5 - 4.5
WBC COUNT	8810	/cmm	4000 - 11000
ESR	03	mm/hr	0 - 10
DIFFERENTIAL WBC COUNT			
NEUTROPHIL	66	%	40 - 70
LYMPHOCYTES	26	%	20 - 40
EOSINOPHILS	02	%	1 - 6
MONOCYTES	06	%	2 - 11
BASOPHILS	00	%	0 - 2
PERIPHERAL SMEAR			
RBC MORPHOLOGY	Normochromic Normocytic		
WBC MORPHOLOGY	Within Normal Range		
PLATELET ON SMEAR	Adequate		
HEMOPARASITES	Not Seen		

SYSTEM XN-550

***** End Report *****

Dr. Shobha Choksi
MD, DCP (Pathology)

Reg. No.: G-9074

Surat:
Piplod
02/03/2024 11:11AM
Dusse Big Bazar, Gaurav Path,
Dumas Road, Surat - 395007
T: +91 0261 4111000
F: +91 0261 4111001

Vadodara :
Manjalpur
Nr. Shreyas Vidyalaya, Nalini House,
Manjalpur, Vadodara - 390 011.
T: +91 265 3300400, 2633200, 2632044
F: +91 265 2632400

Vadodara :
Tilak Road
Anant Apartment, B/s. Aradhna Cinema,
Tilak Road, Vadodara - 390 001.
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F: +91 265 434073

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MR No. : S150407	Collection Date : 02/03/2024 10:15AM
Patient Name : Mr. Rahul Mohan Girase	Age : 43 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 02/03/2024 11:05AM

HAEMATOLOGY

Parameter	Result	Normal Range
BLOOD GROUP & RH FACTOR		
BLOOD GROUP	"A"	
RH-FACTOR	POSITIVE	

BIOCHEMISTRY

FASTING BLOOD SUGAR (FBS)			
FASTING BLOOD GLUCOSE (Hexokinase)	114	mg/dl	74 - 110
FASTING URINE GLUCOSE	Absent		
FASTING URINE KETONE	Absent		

CLINICAL CHEMISTRY

THYROID FUNCTION TEST [TFT]			
TOTAL T3 (CLIA)	1.20	ng/ml	0.846 - 2.02
TOTAL T4 (CLIA)	8.06	ug/dl	5.1 - 14.0
TSH (CLIA)	2.46	uIU/ml	0.2 - 4.5

Note:-

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 (freeT4). Additionally the hypothalamic tripeptide, thyrotropin releasing hormone (TSH) 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 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.

Dr. Shobha Choksi
MD, DCP (Pathology)

Reg. No.: G-9074

Surat:
Pinjod
02/03/2024 11:05AM
Beside Big Bazar, Gaurav Path,
Dumas Road, Surat - 395007
T : +91 0261 4111000
F : +91 0261 4111001

Vadodara :
Manjaipur
Nr. Shreyas Vidyalaya, Nalini House,
Manjalpur, Vadodara - 390 011.
T : +91 265 3300400, 2633200, 2632044
F : +91 265 2632400

Vadodara :
Tilak Road
Anant Apartment, B/s. Aradhna Cinema,
Tilak Road, Vadodara - 390 001.
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MR No. : S150407	Collection Date : 02/03/2024 10:15AM
Patient Name : Mr. Rahul Mohan Girase	Age : 43 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 02/03/2024 11:06AM

BIOCHEMISTRY

<u>Parameter</u>	<u>Result</u>	<u>Units</u>	<u>Normal Range</u>
HbA1C [GLYCOSYLATED HEAMOGLOBIN]			
HbA1C	5.4	%	Non-Diabetic level: <6 Good Control: 6 - 7 Poor Control: 7 - 8 Action Suggested > 8
MEAN BLOOD GLUCOSE	108.28	mg/dl	

The test is done on Cobas Integra 400plus-Turbidimetric Inhibition ImmunoAssay
Note:- Criteria for the diagnosis of diabetes HbA1c $\geq 6.5\%$

- HbA1c is important test for the assessment of long term blood glucose control (also called glycemic control).
- HbA1C reflects mean glucose concentration over pas 6-8 weeks and provides a much better indication of long term glycemic control than blood glucose determination.
- HbA1C is formed by non-enzymatic reaction between glucose and Hb. This reaction is irreversible and therefor remains unaffected by short term fluctuations in blood glucose levels.
- Long term complications of diabetes such as retinopathy, nephropathy, and neuropathy are potentially serious and can lead to blindness kidney failure etc.
- Genetic Variants (Hb-S trait, Hb-C trait) elevated fetal haemoglobin & chemically modified derivatives of haemoglobin (eg carbamylated Hb in patients with renal failure) can affect the accuracy of HbA1C measurement.

***** End Report *****

Dr. Shobha Choksi
MD, DCP (Pathology)

Reg. No.: G-9074

Surat:
Piplod
02/03/2024 11:06AM
Beside Eng Bazar, Gaurat Park,
Dumas Road, Surat - 395007
T: +91 0261 4111000
F: +91 0261 4111001

Vadodara :
Manjalpur
Nr. Shreyas Vidyalaya, Nalini House,
Manjalpur, Vadodara - 390 011.
T: +91 265 3300400, 2633200, 2632044
F: +91 265 2632400

Vadodara :
Tilak Road
Anant Apartment, B/s. Aradhna Cinema,
Tilak Road, Vadodara - 390 001.
T: +91 265 2429282, 2429262
F: +91 265 434073



MR No. : S150407	Collection Date : 02/03/2024 10:15AM
Patient Name : Mr. Rahul Mohan Girase	Age : 43 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 02/03/2024 11:07AM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
LIPID PROFILE			
SERUM CHOLESTEROL CHOD PAP	229 ✓	mg/dl	50 - 200
HDL CHOLESTEROL Direct	49	mg/dl	40 - 60
LDL CHOLESTEROL Direct	155.5 ✓	mg/dl	0 - 100
SERUM TRIGLYCERIDE GPO PAP	119	mg/dl	50 - 150
VLDL Calc	23.8	mg/dl	0 - 30
CHOLESTEROL / HDL RATIO	4.67		0 - 5
LDL / HDL RATIO	3.17		0 - 3

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment.
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Details on test interpretation available from the lab.

TEST	NEAR OPTIMAL (Moderate Risk)	BORDER LINE (Risk)	HIGH (Risk)	VERY HIGH
CHOLESTROL	160-199	200-239	240-279	280
HDL	50-59	40-49	< 40	
LDL	100-129	130-159	160-190	>190
TRIGLYCERIDES	150-169	170-199	240-499	>500
CHO/HDL RATIO	3.3-4.4	4.4-11.0	>11.0	
LDL/HDL RATIO	0.5-3.0	3.0-6.0	>6.0	

***** End Report *****

Dr. Shobha Choksi
MD, DCP (Pathology)

Reg. No.: G-9074

Surat:
Piplod
02/03/2024 11:07AM
Beside Old Bazar, Gaurey Park,
Dumas Road, Surat - 395007
T: +91 0261 4111000
F: +91 0261 4111001

Vadodara :
Manjalpur
Nr. Shreyas Vidyalaya, Nalini House,
Manjalpur, Vadodara - 390 011.
T: +91 265 3300400, 2633200, 2632044
F: +91 265 2632400

Vadodara :
Tilak Road
Anant Apartment, B/s. Aradhna Cinema,
Tilak Road, Vadodara - 390 001.
T: +91 265 2429282, 2429262
F: +91 265 434073

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MR No. : S150407	Collection Date : 02/03/2024 10:15AM
Patient Name : Mr. Rahul Mohan Girase	Age : 43 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 02/03/2024 11:09AM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
LIVER FUNCTION TEST			
ALKALINE PHOSPHATASE (IFCC)	97	U/L	35 - 130
BILIRUBIN TOTAL Diazo	0.6	mg/dl	0.0 - 1.2
BILIRUBIN DIRECT Diazo	0.3	mg/dl	0.0 - 0.4
BILIRUBIN INDIRECT (Calc)	0.3	mg/dl	0.0 - 0.8
SGPT (IFCC)	23	U/L	5 - 41
SGOT (IFCC)	19	U/L	5 - 40
SERUM TOTAL PROTEIN Biuret	7.7	gm/dl	6.6 - 8.7
SERUM ALBUMIN BCG	5.1	gm/dl	3.5 - 5.2
SERUM GLOBULIN Calc	2.6	gm/dl	1.5 - 3.5
SERUM A/G RATIO Calc	1.96	gm/dl	1.5 - 2.5
SERUM CREATININE			
SERUM CREATININE (JAFJE)	0.8	mg/dl	0.5 - 1.2
BUN [BLOOD UREA NITROGEN]			
BUN	11.4	mg/dl	8 - 23
ALBUMIN-CREATININE RATIO			
URINE ALBUMIN/MICROALBUMIN (Immunoturbidimetry)	4.7	mg/L	
URINE CREATININE (JAFJE)	12.0	mg/dl	
ALBUMIN-CREATININE RATIO (Calculated)	39.16	mg/gm	Normal: <30; Microalbuminuria: 30-299; Clinical Albuminuria: >300

***** End Report *****

SSC
Dr. Shobha Choksi
MD, DCP (Pathology)

Reg. No.: G-9074

Surat:
Piplod
02/03/2024 11:09AM
Bhambhaniwadi, Gauri Park,
Dumas Road, Surat - 395007
T : + 91 0261 4111000
F : + 91 0261 4111001

Vadodara :
Manjalpur
Nr. Shreyas Vidyalaya, Nalini House,
Manjalpur, Vadodara - 390 011.
T : +91 265 3300400, 2633200, 2632044
F : +91 265 2632400

Vadodara :
Tilak Road
Anant Apartment, B/s. Aradhna Cinema,
Tilak Road, Vadodara - 390 001.
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F : +91 265 434073

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MR No. : S150407	Collection Date : 02/03/2024 10:15AM
Patient Name : Mr. Rahul Mohan Girase	Age : 43 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 02/03/2024 11:07AM

BIOCHEMISTRY

Parameter	Result	Units	Normal Range
SERUM URIC ACID			
SERUM URIC ACID (Uricase)	8.1	mg/dl	3.4 - 7.0

CLINICAL CHEMISTRY

PSA [PROSTATE SPECIFIC ANTIGEN]			
PSA (CLIA)	1.44	ng/ml	0 - 4.0

CHEMILUMINESCENCE

Measurement of total PSA alone may not clearly distinguish between benign prostatic hyperplasia (BPH) from cancer, this is especially true for the total PSA values between 4-8 ng/ml.

Percentage of Free PSA = $\frac{\text{Free PSA}}{\text{Total PSA}} \times 100 = \text{Percent free PSA}$.

Patient with prostate cancer generally have a lower percentage of free PSA compared to benign prostatic hyperplasia.

Percentage free PSA of less than 25% is a high likelihood of prostatic cancer.

***** End Report *****

Dr. Shobha Choksi
MD, DCP (Pathology)

Reg. No.: G-9074

Surat:
Piplod
02/03/2024 11:08AM
Beside City Bazar, Gaurav Path,
Dumas Road, Surat - 395007
T: +91 0261 4111000
F: +91 0261 4111001

Vadodara :
Manjalpur
Nr. Shreyas Vidyalaya, Nalini House,
Manjalpur, Vadodara - 390 011.
T: +91 265 3300400, 2633200, 2632044
F: +91 265 2632400

Vadodara :
Tilak Road
Anant Apartment, B/s. Aradhna Cinema,
Tilak Road, Vadodara - 390 001.
T: +91 265 2429282, 2429262
F: +91 265 434073

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MR No. : S150407	Collection Date : 02/03/2024 10:15AM
Patient Name : Mr. Rahul Mohan Girase	Age : 43 Y Sex : Male
Ref By : Dr. Hospital A Doctor	Report Date : 02/03/2024 11:12AM

CLINICAL PATHOLOGY

<u>Parameter</u>	<u>Result</u>	<u>Normal Range</u>
URINE ROUTINE & MICROSCOPIC EXAMINATION		
TYPE OF SPECIMEN - URINE	Random	
PHYSICAL EXAMINATION		
QUANTITY	50	ml
COLOUR	Pale Yellow	
APPEARANCE	Clear	
REACTION (pH)	7.0	
SPECIFIC GRAVITY	1.010	
CHEMICAL EXAMINATION		
PROTEIN	Absent	
GLUCOSE	Absent	
KETONE	Absent	
BILE SALT	Absent	
BILE PIGMENT	Absent	
OCCULT BLOOD	Absent	
NITRITE	Absent	
MICROSCOPIC EXAMINATION		
PUS CELLS	2-3	/hpf
EPITHELIAL CELLS	2-3	/hpf
RBC	Absent	/hpf
CASTS	Absent	
CRYSTALS	Absent	
BACTERIA	Absent	
YEAST CELLS	Absent	

***** End Report *****

Dr. Shobha Choksi
MD, DCP (Pathology)

Reg. No.: G-9074

Surat:
Piplod
02/03/2024, Gauri, 11:12AM
Dumas Road, Surat - 395007
T: +91 0261 4111000
F: +91 0261 4111001

Vadodara :
Manjalpur
Nr. Shreyas Vidyalaya, Nalini House,
Manjalpur, Vadodara - 390 011.
T: +91 265 3300400, 2633200, 2632044
F: +91 265 2632400

Vadodara :
Tilak Road
Anant Apartment, B/s. Aradhna Cinema, Page 1 of 1
Tilak Road, Vadodara - 390 001.
T: +91 265 2429282, 2429262
F: +91 265 434073

TABULAR SUMMARY REPORT

Bahul Mohan, Girase

ID: S150407
 Visit:
 2-Mar-2024
 11:04:06

43years Caucasian Male

BRUCE
 Max HR: 168bpm 94% of max predicted 177bpm
 Max BP: 150/90
 Reason for Termination:
 Comments:

25.0 mm/s
 10.0 mm/mV
 100hz

Total Exercise time: 9:14

Referred by:
 Test ind:

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (x100)
PRETEST	SUPINE	0:53	0.6	0.0	1.4	109	140/90	133
EXERCISE	STAGE 1	3:00	1.7	10.0	4.6	132	140/90	185
	STAGE 2	3:00	2.5	12.0	7.0	145	150/90	218
	STAGE 3	3:00	3.4	14.0	10.1	164	150/90	246
	STAGE 4	0:14	4.2	16.0	10.4	168	128/89	145
RECOVERY	RECOVERY	4:03	**	**	1.0	113		

Treat is negative for inducible ischemia

Technician:

Unconfirmed

MAC55 010B

ID: S150407
Visit:
2-Mar-2024
11:08:30

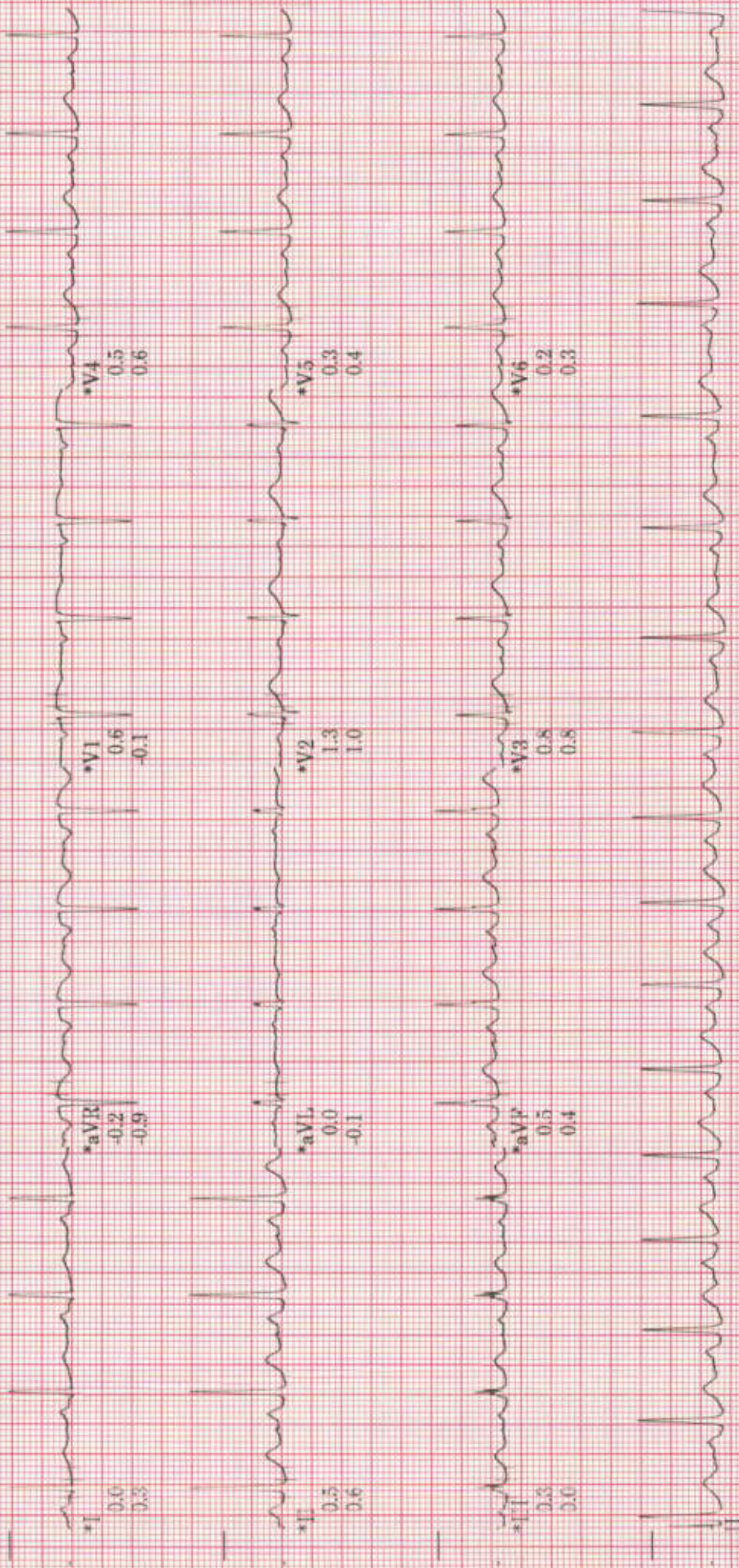
PRETEST
SUPINE
4:25

94bpm
BP: 140/90

ST @ 10mm/mV
80ms postJ

BRUCE
** *mph
** *%

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV A-H-S-50Hz HR 46

* Computer Synthesized Rhythm

MAC55 010B

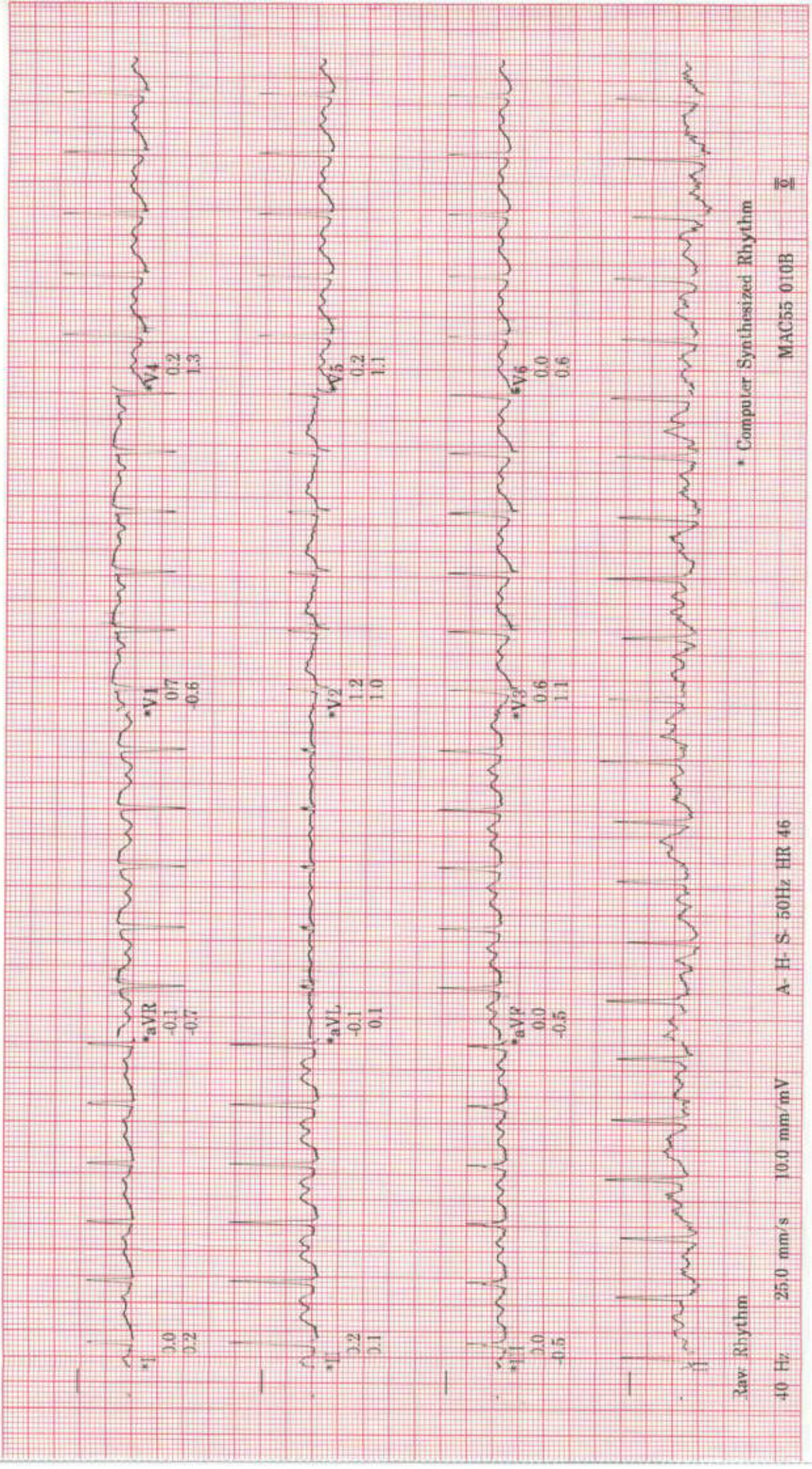
ID: S150407
Visit:
2-Mar-2024
11:3:58

132bpm
BP: 140/90
ST @ 10mm/mV
80ms postLJ

EXERCISE
STAGE 1
3:00

BR: E
1.7mph
10.0%

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm
40 Hz
25.0 mm/s
10.0 mm/mV
A-H-S 50Hz HR 46
* Computer Synthesized Rhythm
MAC55 010B

Rahul Mohan, Girase

ID: S150407

Visit:

* 2-Mar-2024

11:16:58

LINKED MEDAINS REPORT

BR E

2.5mph

12.0%

EXERCISE

STAGE 3

6:00

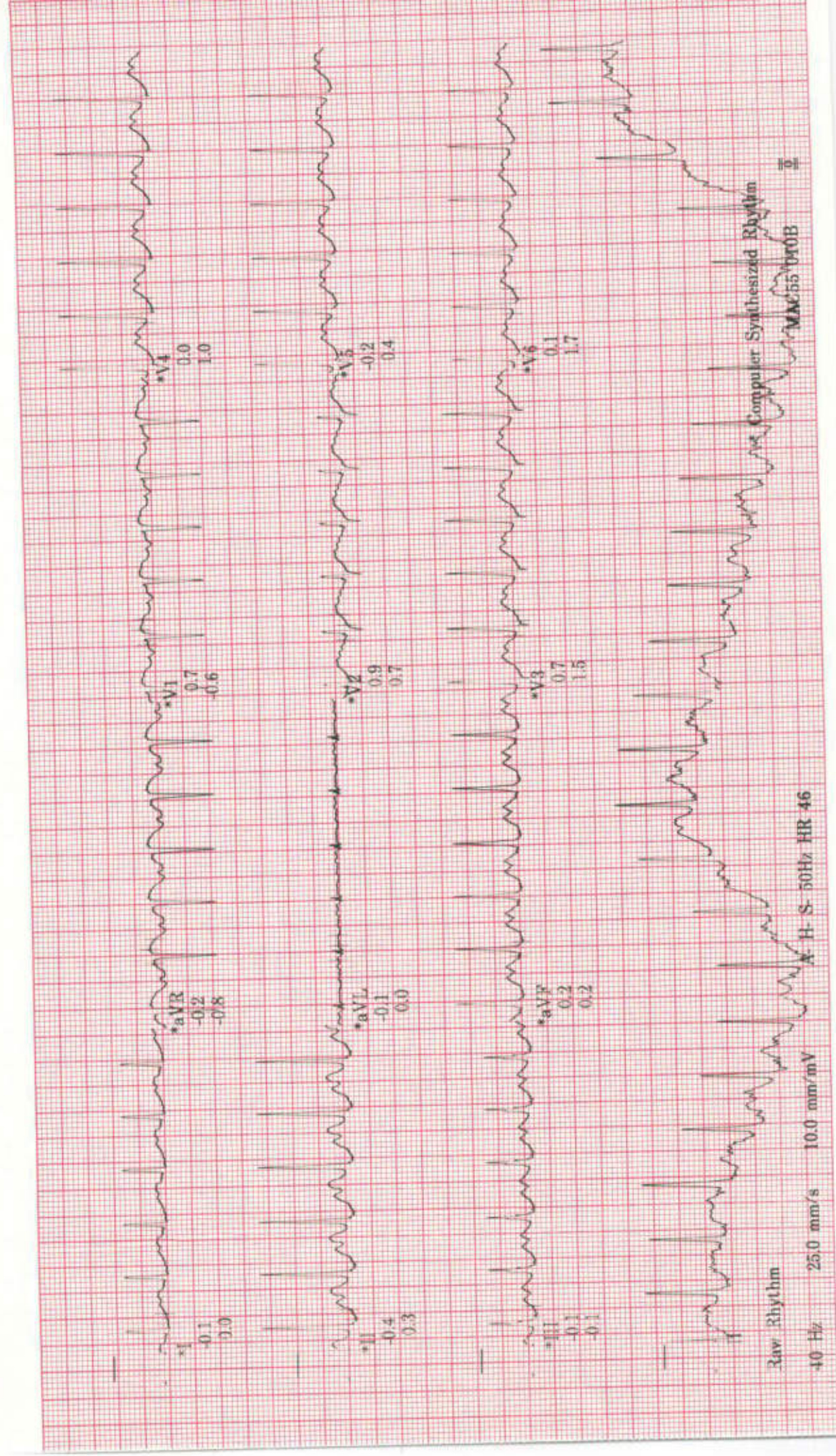
145bpm

BP: 150/90

ST @ 10mm/mV

80ms postLJ

Lead
ST(mm)
Slope(mV/s)



Rahul Mohan, Girase

ID: S150407

Visit:

2-Mar-2024

11:19:58

LINKED MEDIANS REPORT

EXERCISE

STAGE 3

9:00

164bpm

BP: 150/90

ST @ 10mm/mV

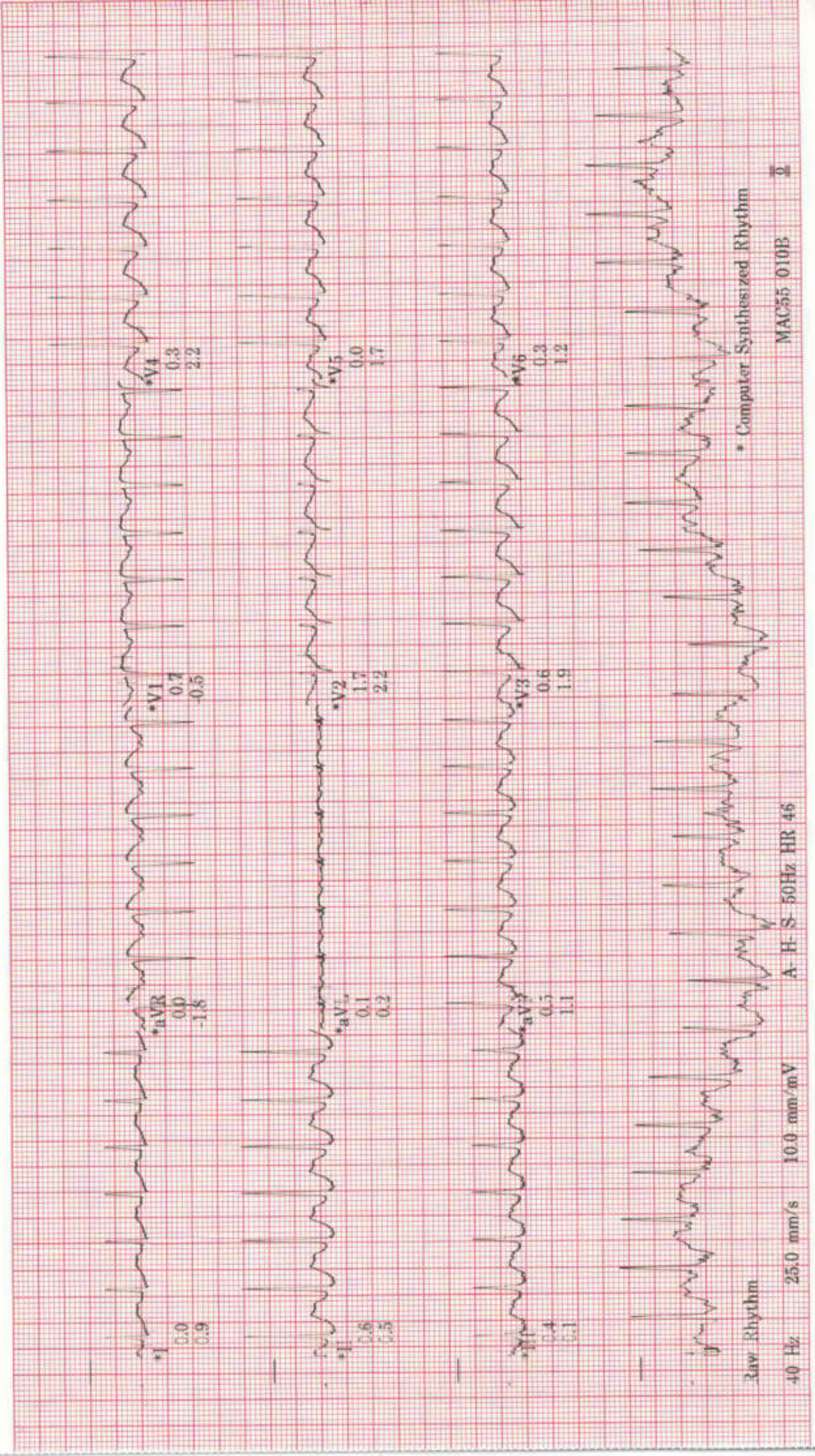
80ms post-J

BR: E

3.4mph

14.0%

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

40 Hz

25.0 mm/s

10.0 mm/mV

A-H-S-50Hz HR 46

LINKED MEDIANS REPORT

Rahul Mohan, Girase

ID: S150407
Visit: 2-Mar-2024
11:20:13

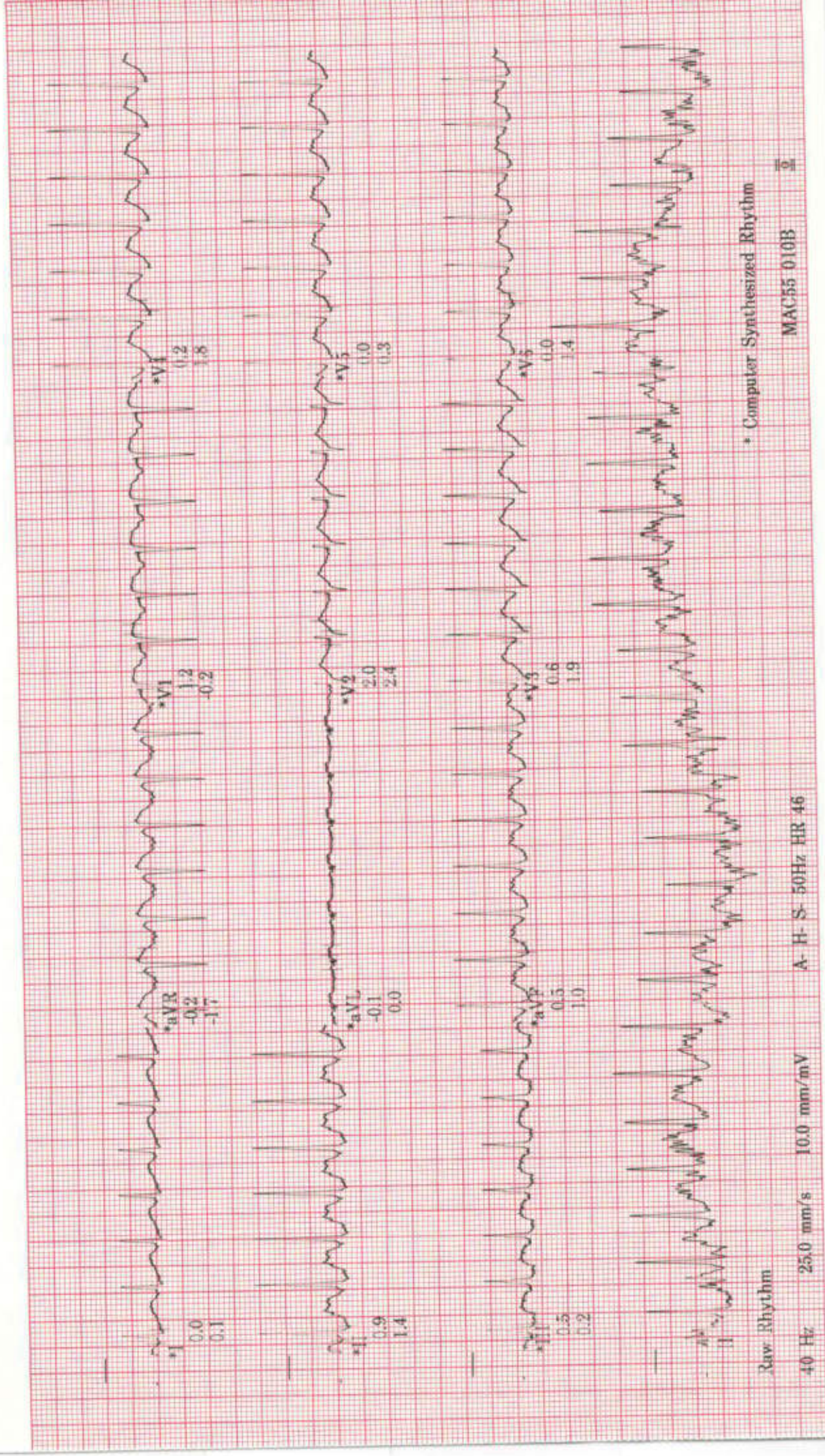
EXERCISE
STAGE 4
9:14

BR E
4.1mph
16.0%

Lead
ST(mm)
Slope(mV/s)

168bpm

ST @ 10mm/mV
80ms post



* Computer Synthesized Rhythm

Raw Rhythm
40 Hz 25.0 mm/s 10.0 mm/mV
A-H-S-50Hz HR 46

MAC55 010B

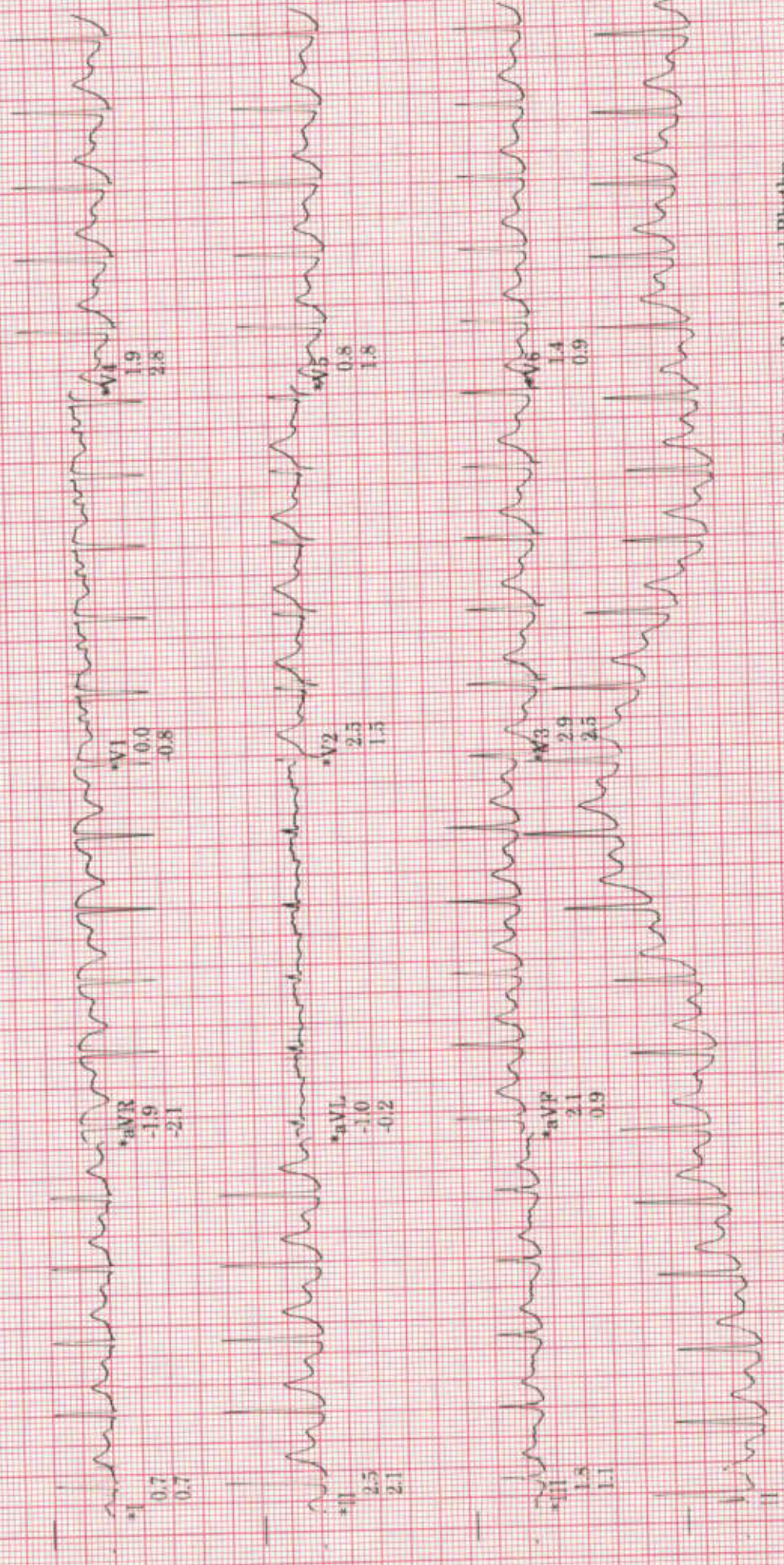
ID: S150407
Visit:
2-Mar-2024
11:22:12

RECOVERY
RECOVERY
2:00

BR E
***mph
***%

125bpm
BP: 128/89
ST @ 10mm/mV
80ms postd

Lead
ST(mm)
Slope(mV/s)



* Computer Synthesized Rhythm

Raw Rhythm
40 Hz 25.0 mm/s 10.0 mm/mV
A H S 50Hz HR 46

MAC55 010B

ID: S150407

Visit:

2-Mar-2024

11:24:12

114bpm

BP: 128/89

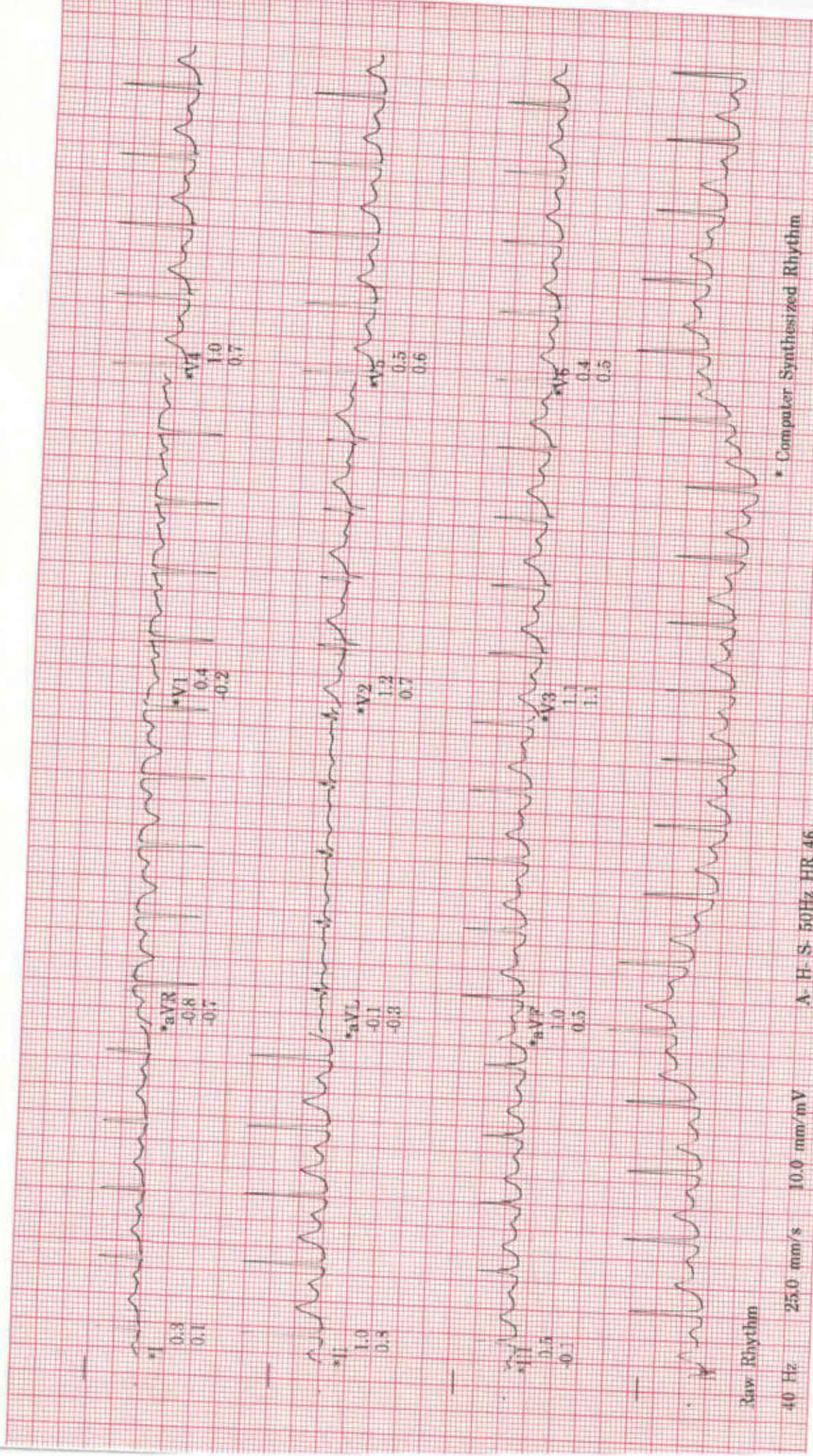
RECOVERY
RECOVERY
4:00

BR E

***mph
***%

ST @ 10mm/mV
80ms postJ

Lead
ST(mm)
Slope(mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV

A-H-S-50Hz HR 46

* Computer Synthesized Rhythm

MAC55 010B

三

ID: S150407
 Visit:
 2-Mar-2024
 11:04:06

4.3 years Caucasian Male

Referred by:
 Test ind:

BRUC3
 Max HR: 168bpm 94% of max predicted 177bpm
 Max EP: 150/90
 Reason for Termination:
 Comments:

Total Exercise time: 9:14
 25.0 mm/s
 10.0 mm/mV
 100hz



Technician:

Unconfirmed

MAC55 010B

Lead
 ST(mm)
 Slope(mV/s)

ID: S150407

Visit:

2-Mar-2024

11:04:06

43years

Caucasian

Male

BRUCE

Total Exercise time: 9:14

Max HR: 168bpm 94% of max predicted 177bpm

Max BP: 150/90

Maximum workload: 10.4METS

Reason for Termination:

Comments:

Referred by:

Test ind:

BASELINE

EXERCISE STAGE 1

0:00 1.4METS

109bpm ST @ 10mm/mV

BP: 140/90 80ms postJ

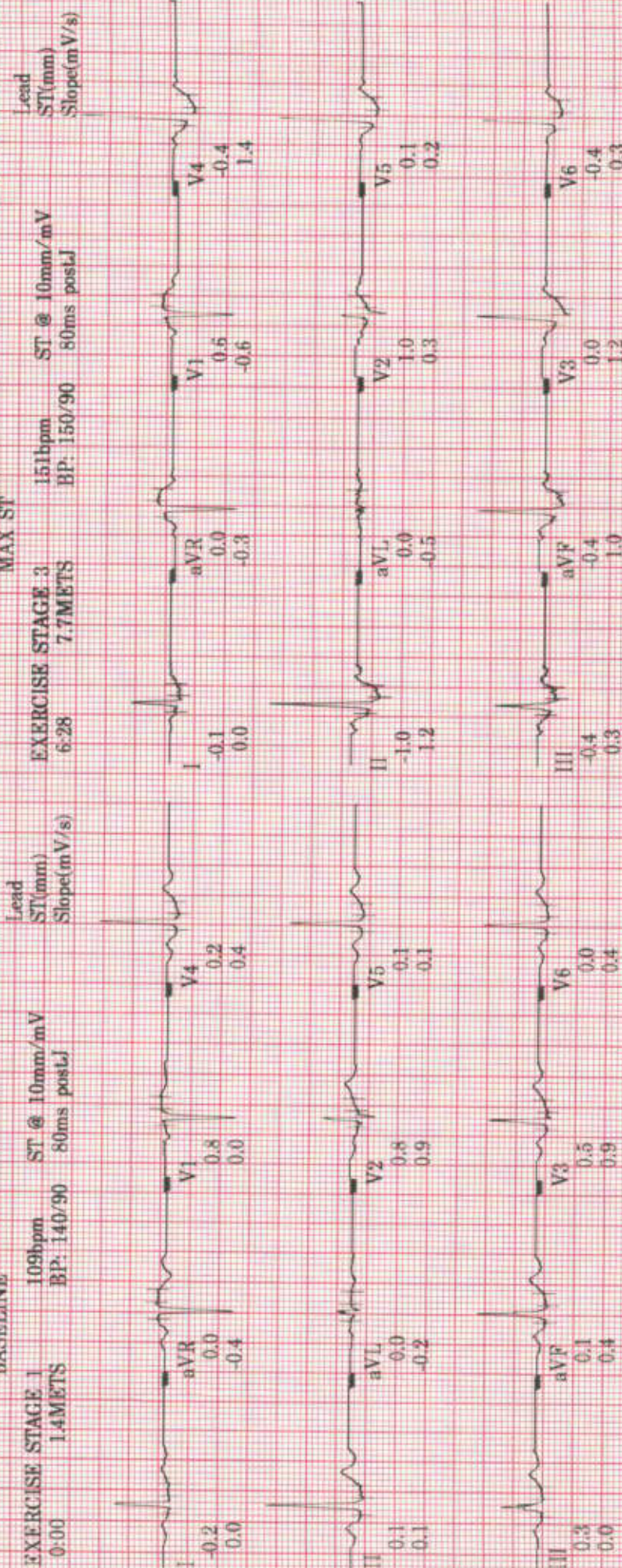
MAX ST

EXERCISE STAGE 3

6:28 7.7METS

151bpm ST @ 10mm/mV

BP: 150/90 80ms postJ



Technician:

Unconfirmed

MAC55 010B

2-Mar-2024
11:04:06

PRETEST
SUPINE
4:25
94bpm
BP: 140/90
1.0METS

EXERCISE
STAGE 1
0:00
109bpm
BP: 140/90
1.4METS

EXERCISE
STAGE 1
1:00
122bpm
BP: 140/90
3.0METS

EXERCISE
STAGE 1
2:00
124bpm
BP: 140/90
4.6METS

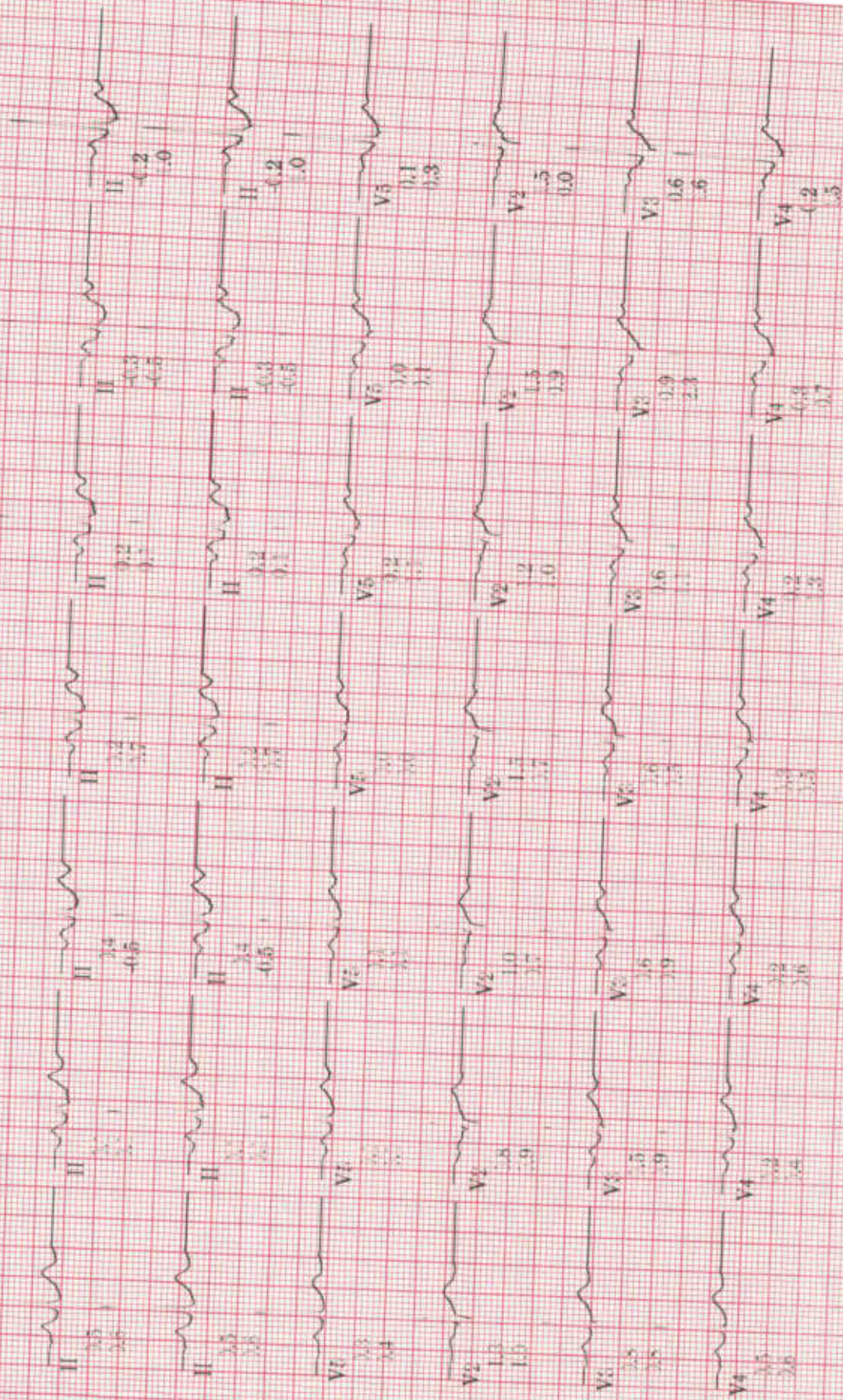
EXERCISE
STAGE 1
3:00
132bpm
BP: 140/90
4.6METS

EXERCISE
STAGE 2
4:00
137bpm
BP: 150/90
5.8METS

EXERCISE
STAGE 2
5:00
141bpm
BP: 150/90
7.0METS

BRUCE

ST @ 10mm/mV
50ms postJ
25.0 mm/s
10.0 mm/mV
100hz



Lead
ST(mm)
Slope(mV/s)

MAC55 010B

ID: 0100401

2-Mar-2024
11:04:06

EXERCISE STAGE 2
6:00
145bpm
BP: 150/90
7.0METS

EXERCISE STAGE 3
6:28
151bpm
BP: 150/90
7.7METS
MAX ST

EXERCISE STAGE 3
7:00
155bpm
BP: 150/90
8.5METS

EXERCISE STAGE 3
8:00
160bpm
10.1METS

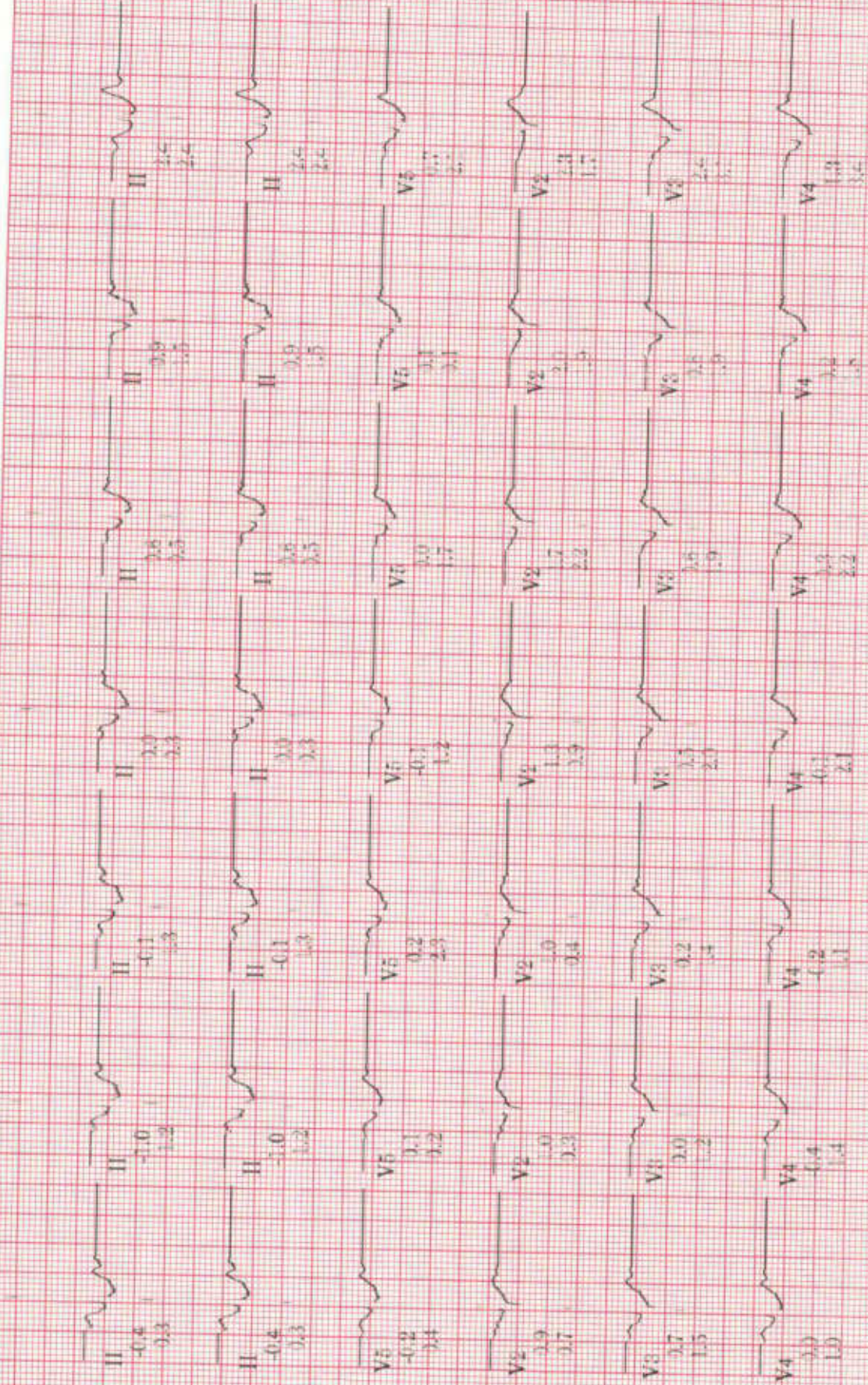
EXERCISE STAGE 3
9:00
164bpm
BP: 150/90
10.1METS

EXERCISE STAGE 4
9:14
168bpm
10.4METS
PEAK

RECOVERY
1:00
140bpm
BP: 150/90
5.7METS

BRUCE

SP @ 10mm/mV
50ms postJ
25.0 mm/s
10.0 mm/mV
100hz



Lead
ST(mm)
Slope(mV/s)

MAC15 010B

ID: S150407

Visit:

2-Mar-2024

11:04:06

BRUCE

ST @ 10mm/mV 40 PVC's/m

80ms postJ

EXERCISE

Heart Rate (bpm)

250 ---

200 ---

150 ---

100 ---

50 ---

0 ---

Time (min)

30

25

20

15

10

5

0

Time (min)

30

25

20

15

10

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Time (min)

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15

10

5

0

Time (min)

30

25

20

15

10

5

0

Time (min)

30

25

DOB: 01/01/1988

MR. MAHMOUD MOHAMMAD

01/01/1988

SINUS RHYTHM WITH SINUS ARRHYTHMIA
NORMAL ECG
INTERPRETATION BASED ON A DEFAULT AGE OF 40 YEARS

Reviewed by _____

Vent rate: 84 BPM
PR int: 161 ms
QRS dur: 81 ms
QT/QTc: 353/394 ms
P-R-T axes: 48 28 57

