

khushbu jha

Female 29Years

Req. No. :

Diagnosis Information:

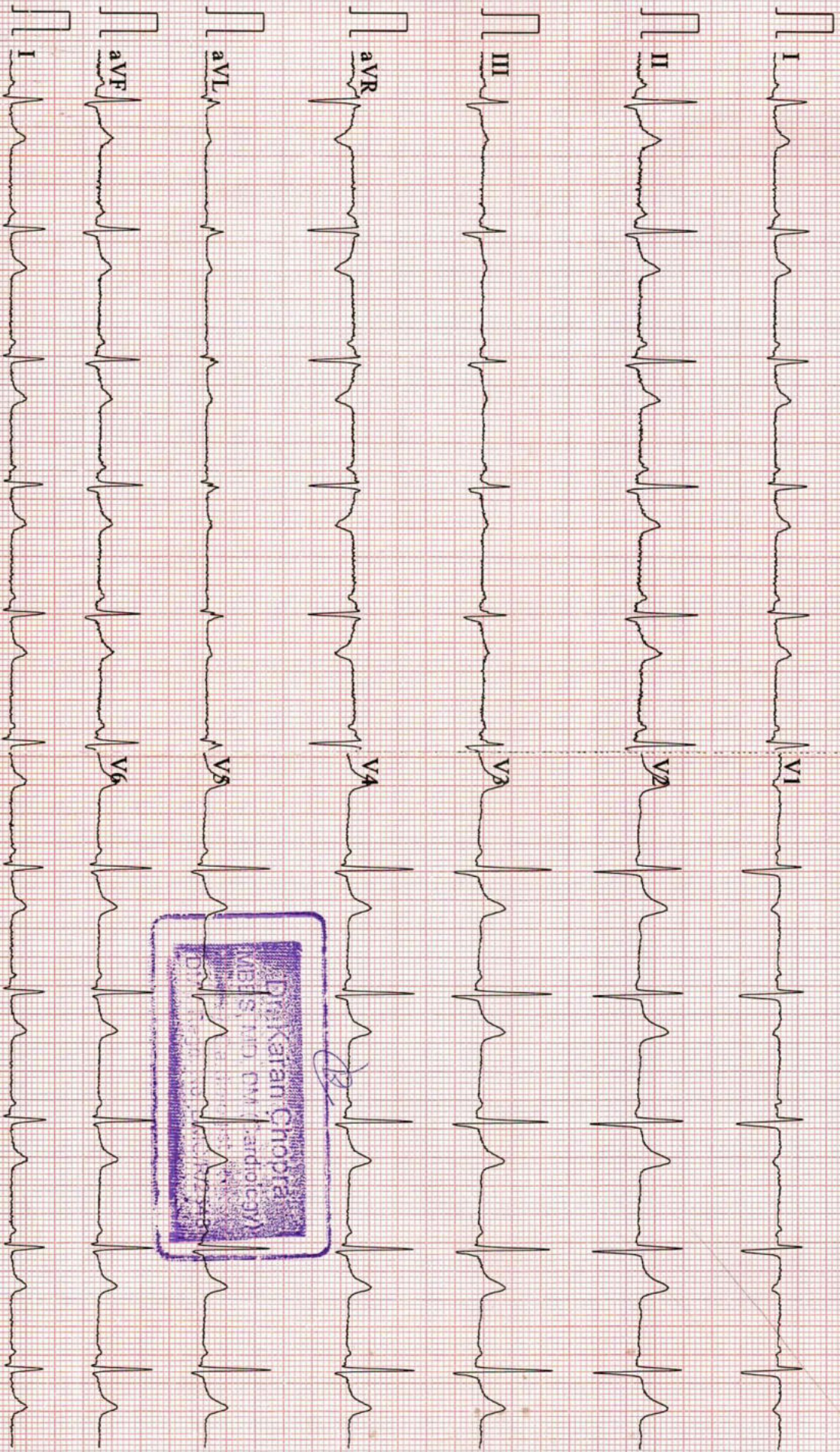
Sinus rhythm

Normal ECG

[Handwritten Signature]

HR	: 66	bpm
P	: 100	ms
PR	: 140	ms
QRS	: 92	ms
QT/QTcBz	: 404/424	ms
PQRST	: 57/48/46	°
RV5/SV1	: 1.173/0.662	mV

Report Confirmed by:



Dr. Kaifan Chopra
 MBBS (MD) (MCh) (Cardiology)
 Director, Cardiology
 Dr. Kaifan Chopra (MCh) (Cardiology)
 Director, Cardiology

IPSC PAIN AND SPINE HOSPITAL
 PLOT-453 NEAR SBI BANK SECTOR-19
 DWARKA NEW DELHI-110075, PH: 9555437357

KHUSBU JHA.

TREADMILL TEST REPORT

ID : 3723
 DATE : 11-03-2023
 AGE/SEX : 29 / F
 HT/WT : 0 / 0
 REF. BY :

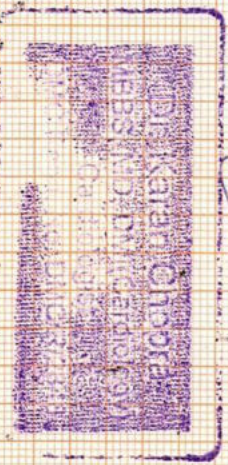
PROTOCOL : Bruce
 HISTORY :
 INDICATION : Checkup/Physical fitness,
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	B.P. mmHg	RPP x100	ST LEVEL (MM)			METS
								II	V1	V5	
SUPINE					69	110 / 80	75	1.1	0.3	1	
STANDING					96	110 / 80	105	1.1	0.4	1.1	
HYPERVENT					86	110 / 80	94	1.1	0.5	1.1	
Stage 1	2:55	2:55	2.7	10	138	130 / 80	179	2.9	-2.1	-2.3	4.67
PR-EXERCISE	4:52	1:52		12	183	150 / 90	274	1.4	0.1	0.6	6.23
RECOVERY	5:58	0:55			132	140 / 90	184	1.9	0.5	1.8	
RECOVERY	6:58	1:55			115	140 / 90	161	2.4	0.5	2	
RECOVERY	7:58	2:55			103	130 / 80	133	1.3	0.7	1.1	
RECOVERY	8:58	3:55			98	120 / 80	117	1.1	0.5	0.7	

RESULTS

EXERCISE DURATION : 4:52
 MAX HEART RATE : 183 bpm
 MAX BLOOD PRESSURE : 150 / 90 mm Hg
 REASON OF TERMINATION : Achieved THR,
 BP RESPONSE : Normal,
 ARRYTHMIA : None,
 H.K. RESPONSE : Normal Chronotropic Response,
IMPRESSIONS :
 Negative for Provocable myocardial ischemia,

MAX WORK LOAD : 6.23 METS



Technician :

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KHUSEBU JHA
I. D. 3723
Age 29/F
Date 11-03-2023

RATE 69bpm
B.P. 110/80

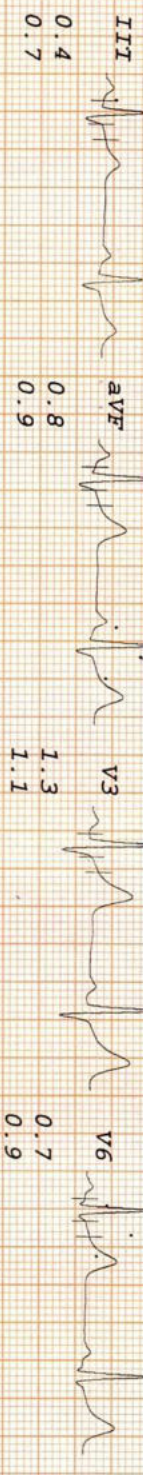
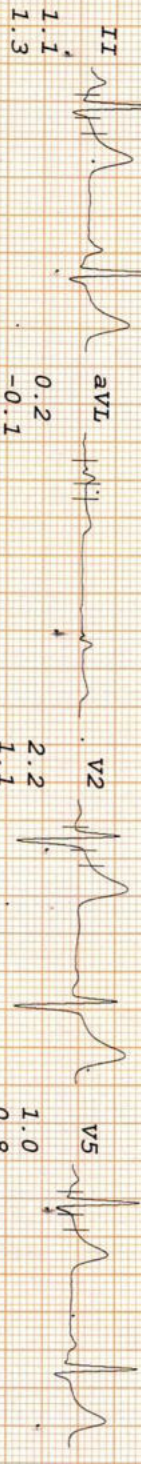
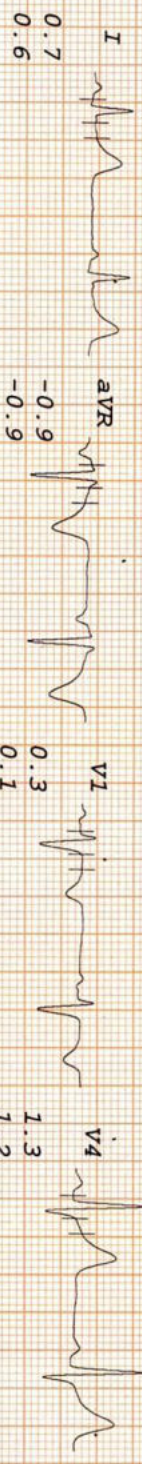
PRETEST
SUPINE

ST @ 10mm/mv
80ms PostJ

LINKED MEDIAN

Mag. X.12

V1



0.3
0.1

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KHUSBU JHA
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 Age 29/F
 Date 11-03-2023

RATE 96bpm
 B.P. 110/80

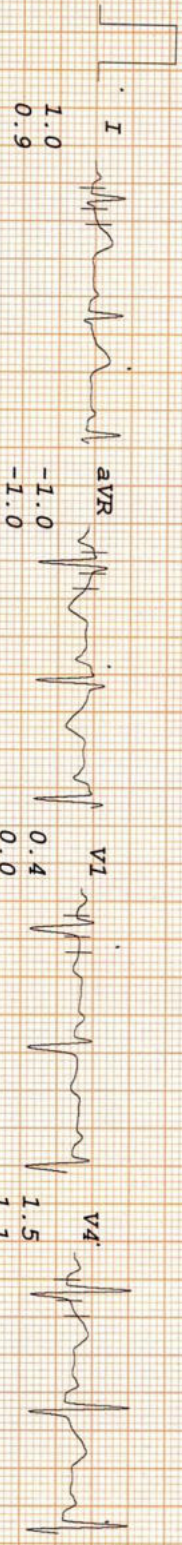
PRETEST
 STANDING

ST @ 10mm/mV
 80ms PostJ

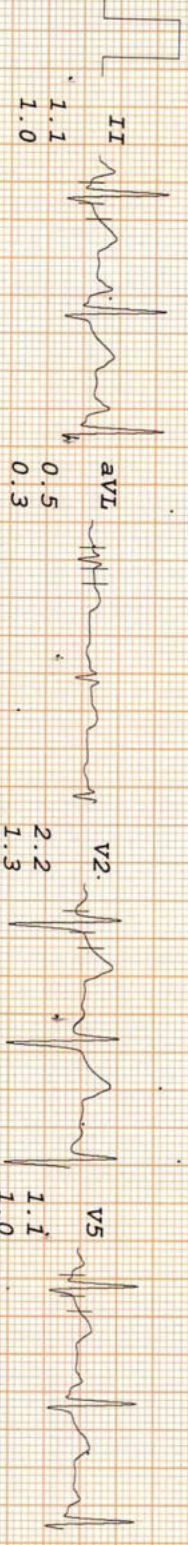
LINKED MEDIAN

Mag. X 2

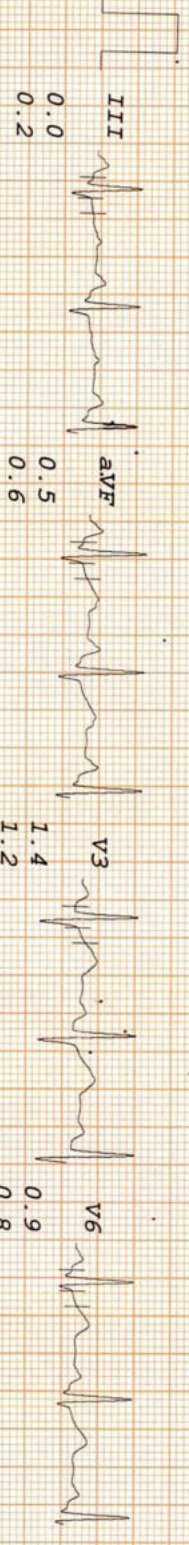
III



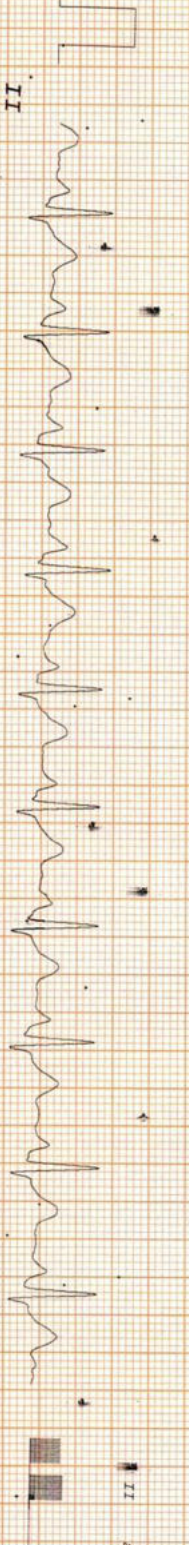
V4
 1.5
 1.1



V5
 1.1
 1.0



V6
 0.9
 0.8



0.0
 0.2

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KHUSBU JHA
I.D. 3723
Age 29/F
Date 11-03-2023

RATE 86bpm
B.P. 110/80

PRETEST
HYPERVENT

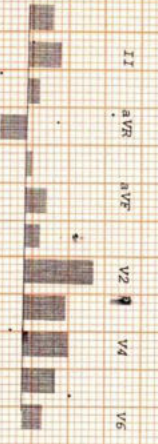
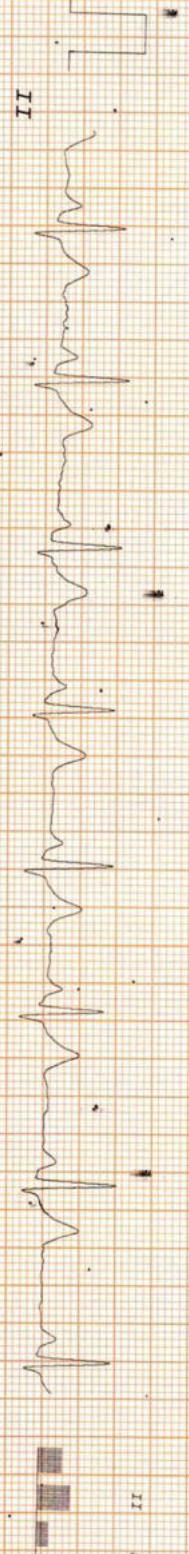
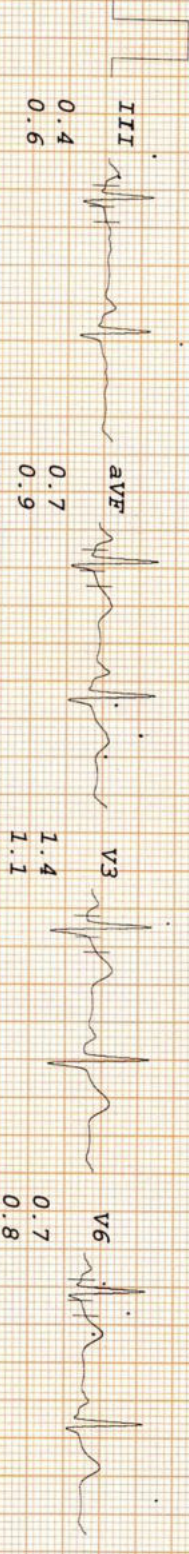
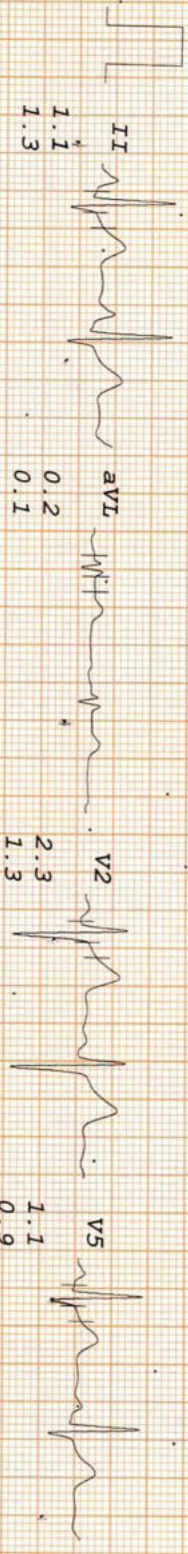
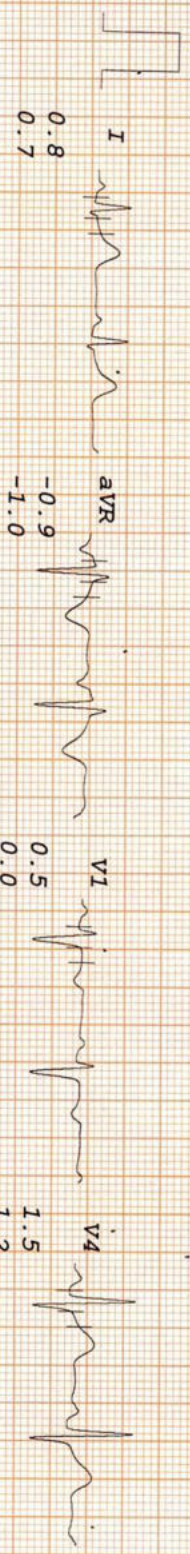
ST @ 10mm/mV
80ms PostJ

PHASE TIME 0:16

LINKED MEDIAN

Mag. X.1,2

III



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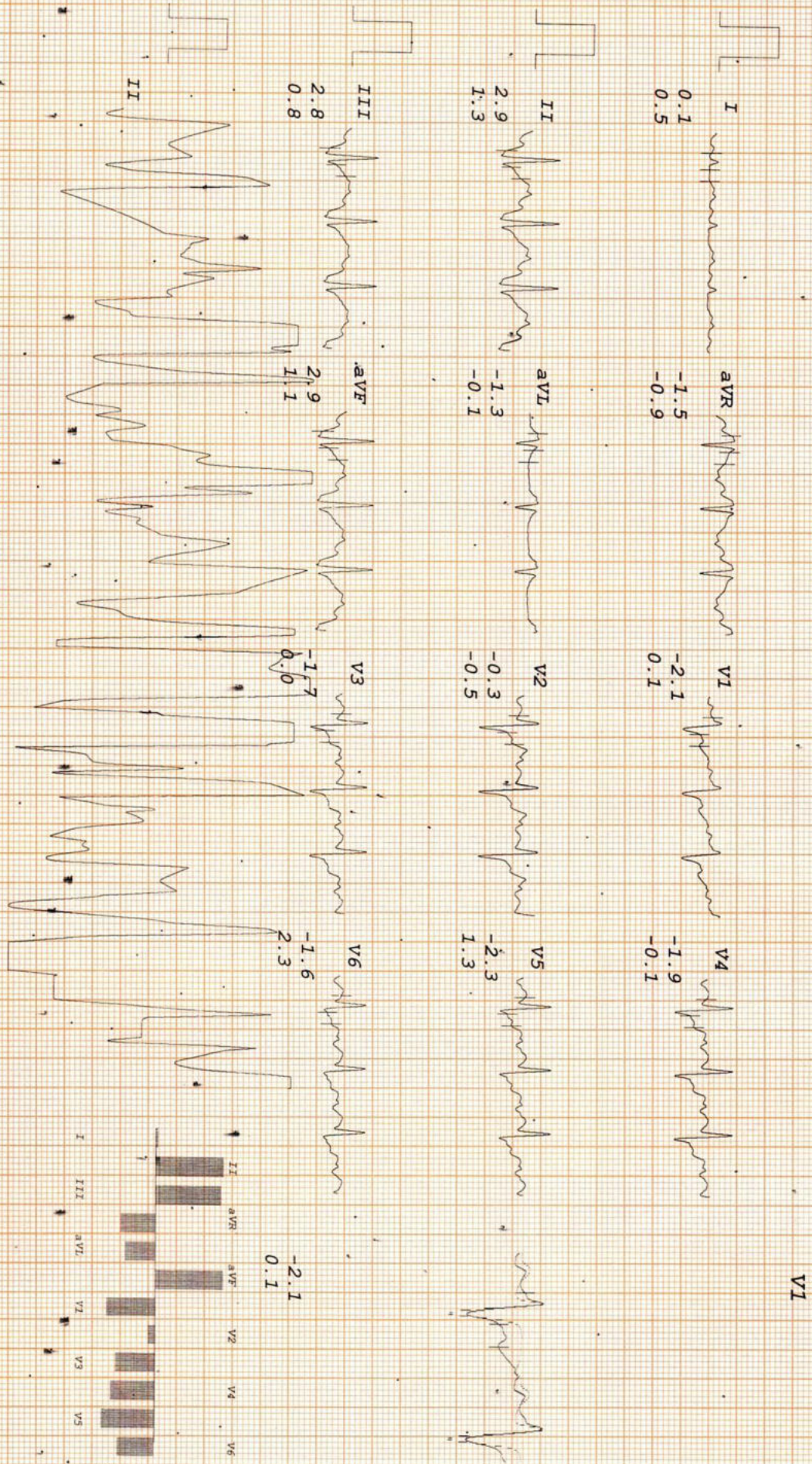
KHUSEBU JHA
 I. D. 3723
 Age 29/F
 Date 11-03-2023

Rate 138bpm
 B.P. 130/80
 Bruce
 Stage 1
 TOTAL TIME 2:55
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ
 Speed 2:7 km/hr
 SLOPE 10 %

LINKED MEDIAN

Mag. X 2



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KHUSBU JHA
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 Date 11-03-2023

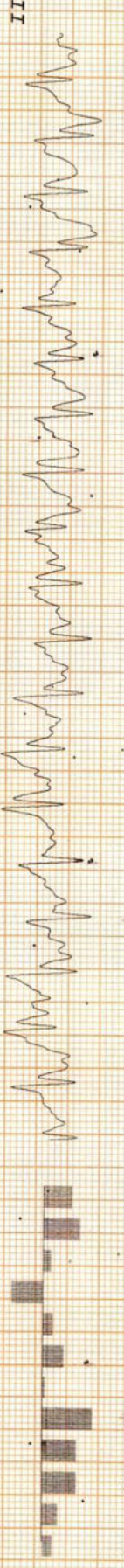
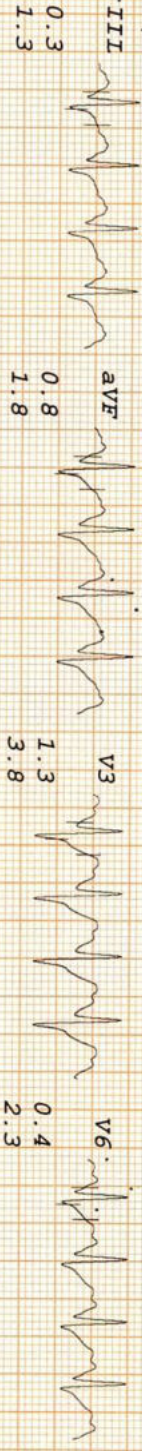
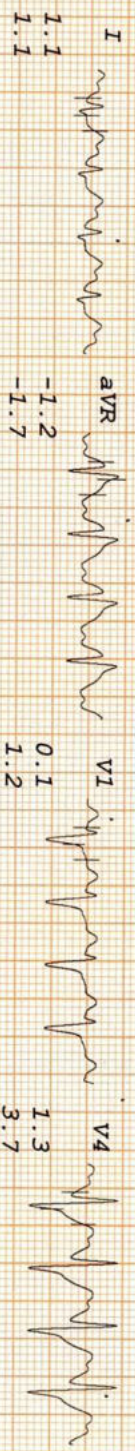
RATE 183bpm
 B.P. 150/90
 BRUCE
 PK-EXERCISE
 TOTAL TIME 4:52
 PHASE TIME 1:52

ST @ 10mm/mV
 80ms PostJ
 Speed 4 km/hr
 SLOPE 12 %

LINKED MEDIAN

Mag. X 2

V1



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KHUSEBU JHA
 I. D. 3723
 Age: 29/F
 Date 11-03-2023

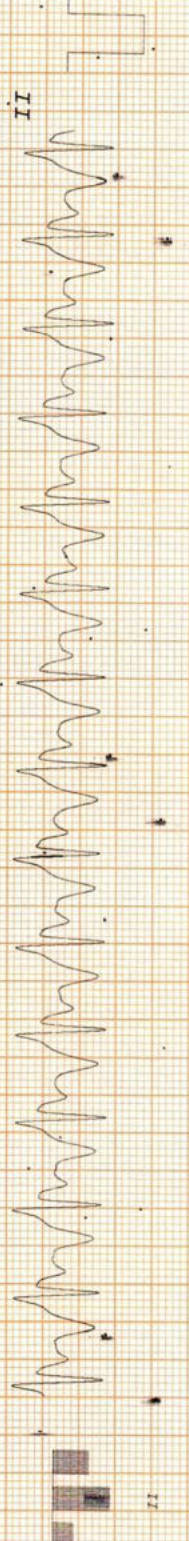
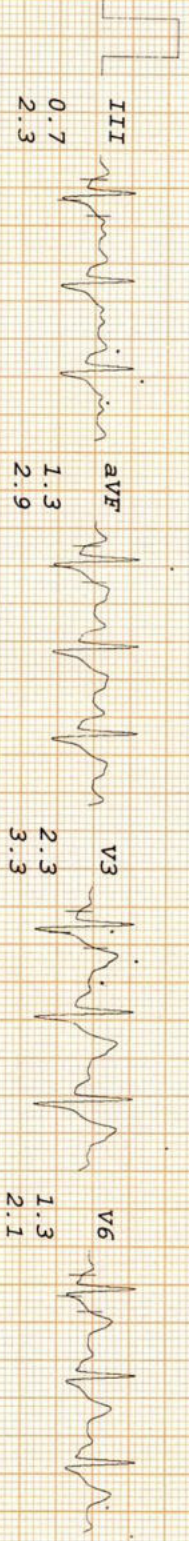
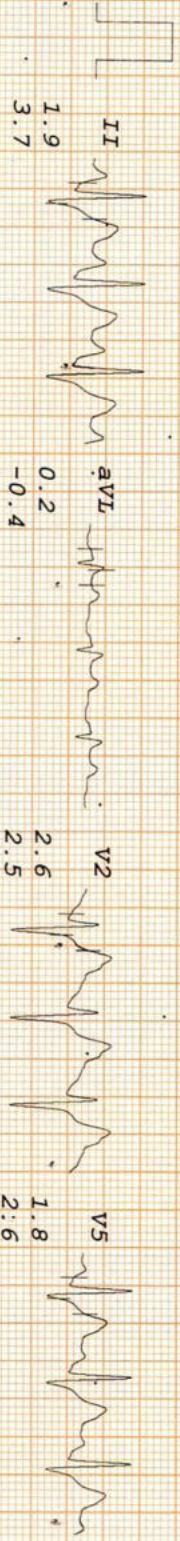
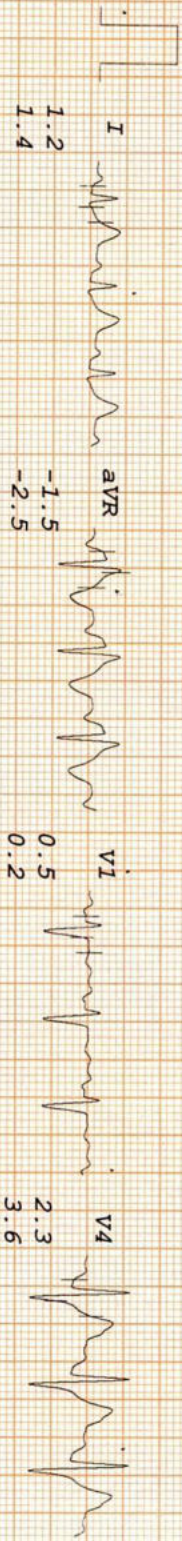
Rate 132bpm
 B.P. 140/90
 RECOVERY
 TOTAL TIME 5:58
 PHASE TIME 0:55

ST @ 10mm/mv
 80ms PostJ.

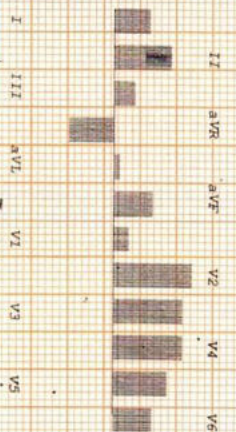
LINKED MEDIAN

Mag. X 2

V1



0.5
 0.2



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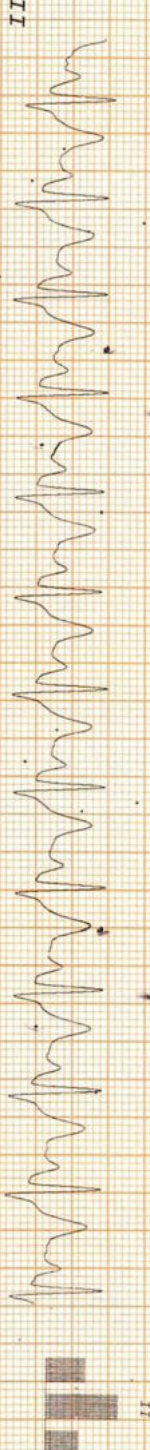
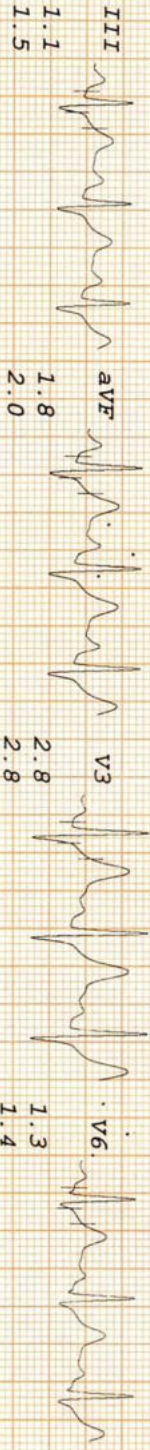
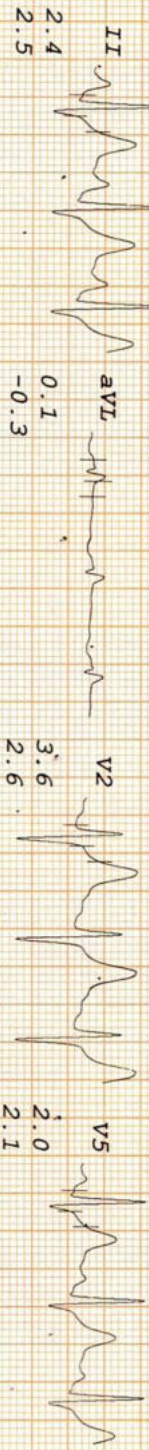
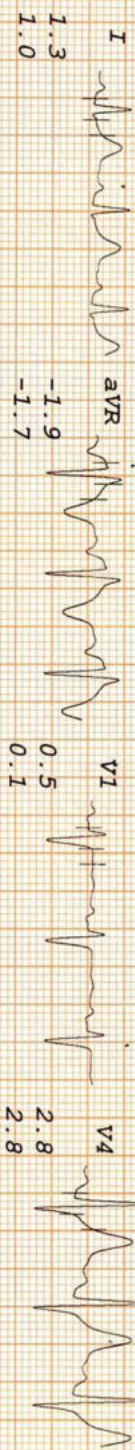
Rate 115bpm
 B.P. 140/90
 Bruce
 RECOVERY
 TOTAL TIME 6:58
 PHASE TIME 1:55

ST @ 10mm/mV
 80ms PostJ

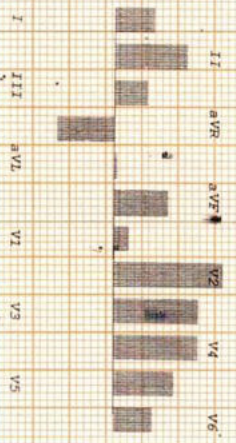
LINKED MEDIAN

Mag. X 2

V1



0.5
 0.1



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KHUSEBU JHA
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 Age 29/F
 Date 11-03-2023

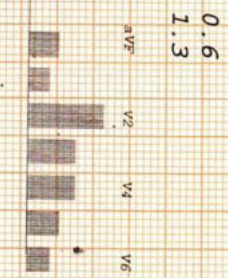
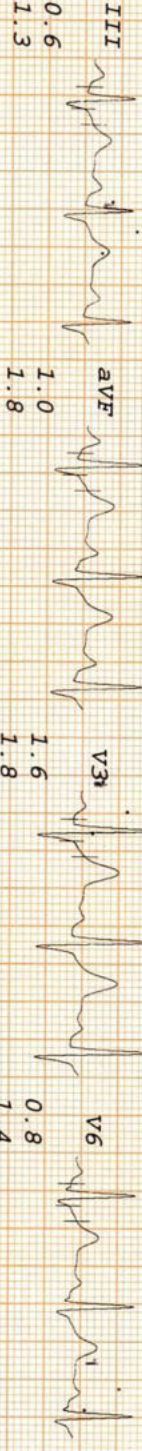
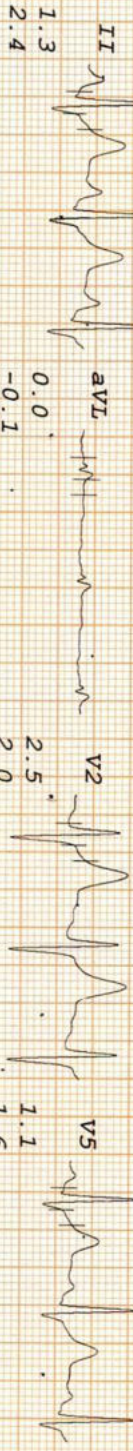
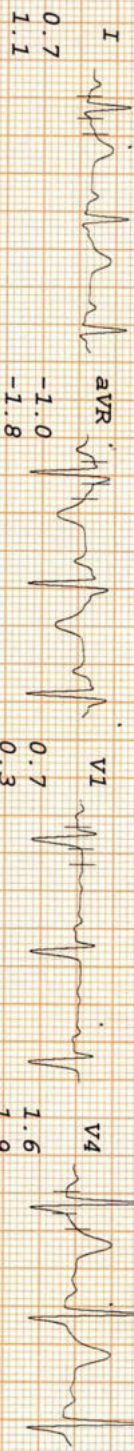
BRUCE
 RECOVERY
 TOTAL TIME 7:58
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ

LINKED MEDIAN

MAG. X 2

III



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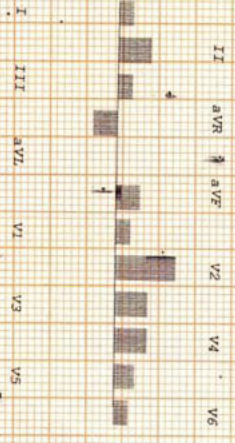
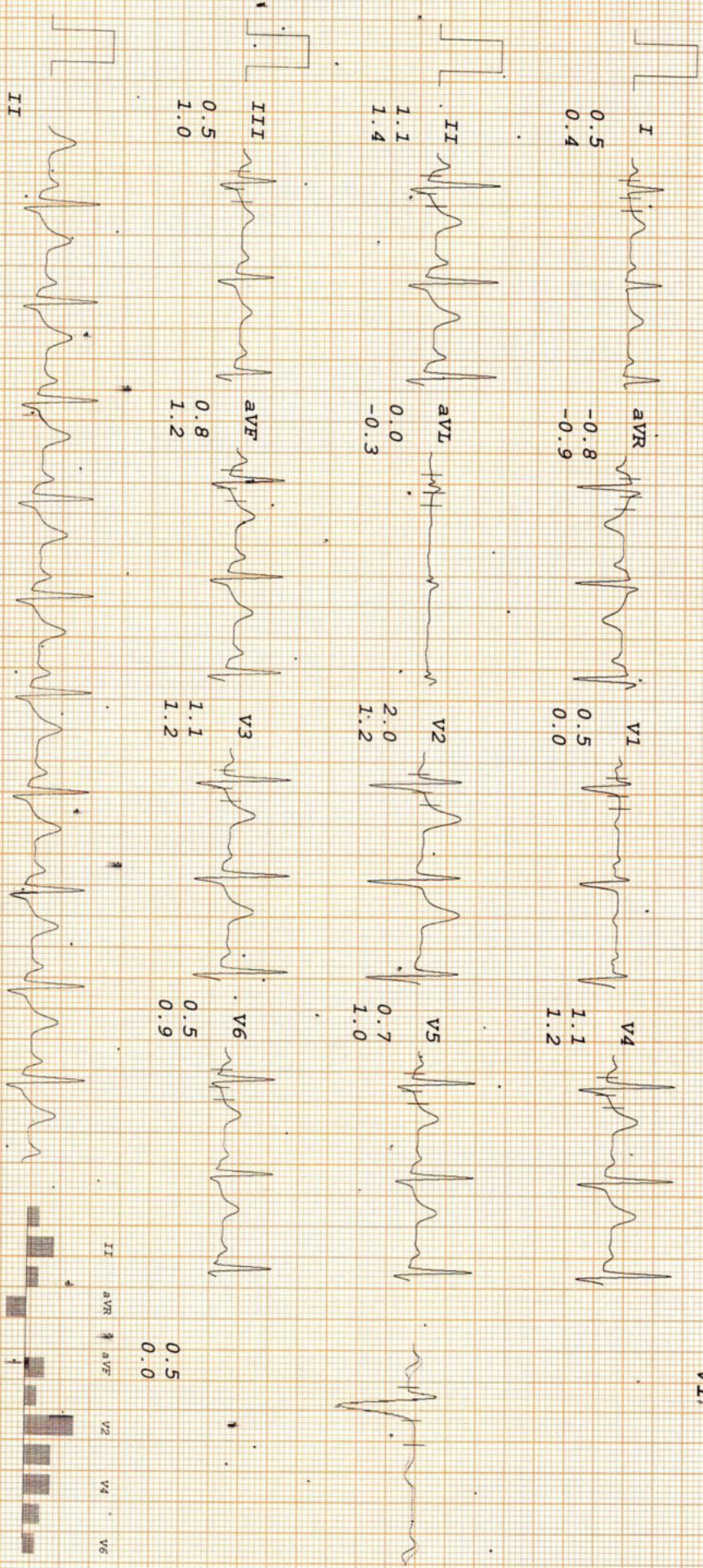
KHUSEBU JHA
 I. D. 3723
 Age 29/F
 Date 11-03-2023


RATE 98bpm
 B.P. 120/80
 RECOVERY
 TOTAL TIME 8:58
 PHASE TIME 3:55

ST @ 10mm/mV
 80ms Post J

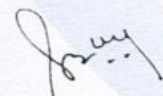
LINKED MEDIAN

Mag. X 2



Patient Name : Mrs. KHUSBU JHA	Reg No. : 6780/UHID22DL	Lab ID. : 7264/OPDPB22DL
Age / Gender : 29Y / Female	Date : 11-Mar-2023	
Mobile No. : 9910208309	Manual No.	Collected : 11-Mar-2023 08.50
Refd. By : Dr. INSURANCE		Received : 11-Mar-2023 08.51
Sample Type : EDTA whole blood	Sample ID : 23666	Report : 11-Mar-2023 14.45

TEST NAME	RESULT	UNIT	RANGE	METHOD
HEAMOTOLOGY				
COMPLETE BLOOD COUNT				
HEMOGLOBIN	11.4	g/dl	11.9-15	Colorimetric
TOTAL LEUCOCYTE COUNT	5.0	10 ³ /uL	4.0-11.0	Electrical impedance
DIFFERENTIAL LEUCOCYTE COUNT(DLC)				
Neutrophil	62	%	40-75	Electrical impedance
Lymphocyte	30	%	20-45	Electrical impedance
Eosinophil	05	%	1-6	Microscopy
Monocyte	03	%	2-10	Microscopy
Basophil	00	%	0-2	Microscopy
ESR	20	mm/1sthr	0-20	Westergren's
RBC COUNT	4.12	mili/cmm	3.8-5.5	Electrical impedance
PCV	35	%	35-45	Calculated
MCV	83.60	fL	80-100	Calculated
MCH	27.7	Picogram	27.5-33.2	Calculated
MCHC	33.10	gm/dl	32-36	Calculated
PLATELET COUNT	152	10 ³ /uL	150-450	Electrical impedance
-----End of Report-----				




Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : ramshankar



BOOK APPOINTMENT



Patient Name : Mrs. KHUSBU JHA	Reg No. : 6780/UHID22DL	Lab ID. : 7264/OPDPB22DL
Age / Gender : 29Y / Female	Date : 11-Mar-2023	
Mobile No. : 9910208309	Manual No.	Collected : 11-Mar-2023 08.50
Refd. By : Dr. INSURANCE		Received : 11-Mar-2023 08.51
Sample Type : EDTA whole blood	Sample ID : 23666	Report : 11-Mar-2023 14.45

TEST NAME	RESULT	UNIT	RANGE	METHOD
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HBA1C (GLYCOSYLATED HB)	5.0	%	4-6	PEIT
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HEAMOTOLOGY

Metabolically healthy patients 4.5 - 6.0 %
6.1 - 6.5 %

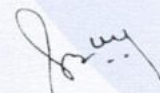
Good control :

Fair control : 6.6 - 7.0 %

Poor control : Above - >7.0 %

COMMENTS: HbA1c is an indicator of glycemic control. HbA1c represents average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but with in this 120 days.Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four. Estimated Average Glucose mg/dl = (HbA1c x 35.6) - 77.3) Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only this means that to predict or estimate average glucose from Hb-A1c or vice-versa is not "perfect" but gives a good working ballpark estimate. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime glucose levels, which are easier to predict and control. As per IFCC recommendations 2007, HbA1c being reported as above maintaining traceability to both IFCC (mmol/mol) & NGSP (%) units.

-----End of Report-----



Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : chand



BOOK APPOINTMENT



Patient Name : Mrs. KHUSBU JHA

Reg No. : 6780/UHID22DL

Lab ID. : 7264/OPDPB22DL

Age / Gender : 29Y / Female

Date : 11-Mar-2023



Mobile No. : 9910208309

Manual No.

Collected : 11-Mar-2023 08.50

Refd. By : Dr. INSURANCE

Received : 11-Mar-2023 08.51

Sample Type : Serum

Sample ID : 23666

Report : 11-Mar-2023 14.45

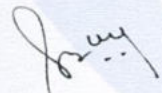
TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

KIDNEY FUNCTION TEST

Blood Urea	15.6	mg/dl	15.0-45.0	urease
Serum Creatinine	0.7	mg/dl	07-1.3	Jaffes Kinetic
Serum Uric Acid	3.50	mg/dl	2.6-6.0	Uricase
Total Protein				
PROTEN	6.41	g/dl	6.4-8.3	Biuret
ALBUMIN	4.1	g/dl	3.4-4.8	Bcg
GLOBULIN	2.31	g/dl	2.3-3.5	
A/G RATIO	1.77	g/dl		
Calcium	8.7	mg/dl	8.6-10.2	Arsenazo
Sodium	141.0	mmol/L	136.0-149.0	ISE Indirect
Potasium	4.1	mmol/L	3.5-5.5	ISE Indirect
Chloride	103.4	mmol/L	98.0-109.0	ISE Indirect

-----End of Report-----



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BOOK APPOINTMENT



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Age / Gender : 29Y / Female	Date : 11-Mar-2023	
Mobile No. : 9910208309	Manual No.	Collected : 11-Mar-2023 08.50
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Sample Type : Serum	Sample ID : 23666	Report : 11-Mar-2023 14.45

TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

LIPID PROFILE

Total Cholesterol	162.00	mg/dl	123-199	CHOD-PAP
Triglycerides	83.4	mg/dl	35-135	Gpo
HDL Cholesterol Direct	46.9	mg/dl	42-88	Direct
Vldl	17	mg/dl	4.7-22.1	
LDL Cholesterol Direct	98.4	mg/dl	63-129	
Total Cholesterol/HDL Ratio	3.5		0.0-4.97	
LDL/HDL Ratio	2.1		0.0-3.55	

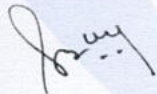
INTERPRETATION:-

Acceptable/Low Risk	: < 200 mg/dL	: <130 mg/dL	: < 4.5
Borderline High Risk	: 200-239 mg/dL	: 130-159 mg/dl	: 4.5 - 6.0
High Risk	: > 240 mg /dL	: > 160 mg/dL	: > 6.0

APO A1 & APO B: Recent studies have shown that Apolipoproteins A1 & B might be the best indicators of Coronary Artery.

COMMENTS:-

TRIGLYCERIDE level > 250mg/dL is associated with an approximately 2-fold greater risk of coronary vascular disease. Elevation of triglycerides can be seen with obesity, medication, fast less than 12 hrs., alcohol intake, diabetes melitus, and




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Age / Gender : 29Y / Female	Date : 11-Mar-2023	
Mobile No. : 9910208309	Manual No.	Collected : 11-Mar-2023 08.50
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Sample Type : Serum	Sample ID : 23666	Report : 11-Mar-2023 14.45

pancreatitis.

CHOLESTEROL, its fractions and triglycerides are the important plasma lipids in defining cardiovascular risk factors and in the management of cardiovascular disease. Highest acceptable and optimum values of cholesterol vary with age. Values above 220 mgm/dl are associated with increased risk of CHD regardless of HDL & LDL values.

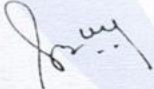
HDL-CHOLESTEROL level <35 mg/dL is associated with an increased risk of coronary vascular disease even in the face of desirable levels of cholesterol and LDL - cholesterol.

LDL - CHOLESTEROL & TOTAL CHOLESTEROL levels can be strikingly altered by thyroid, renal and liver disease as well as hereditary factors. Based on total cholesterol, LDL- cholesterol, and total cholesterol/HDL - cholesterol ratio, patients may be divided into the three risk categories :-

CHOLESTEROL	LDL-CHOLESTEROL	CHO/HDL RATIO
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Artery Disease risk in an individual. Patients who have normal lipid profile may have abnormal Apo A1 & Apo B values. Ratio of Apo B : Apo A1 is >1 in cases of increased CHD risk.

-----End of Report-----



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BOOK APPOINTMENT



Patient Name : Mrs. KHUSBU JHA	Reg No. : 6780/UHID22DL	Lab ID. : 7264/OPDPB22DL
Age / Gender : 29Y / Female	Date : 11-Mar-2023	
Mobile No. : 9910208309	Manual No.	Collected : 11-Mar-2023 08.50
Refd. By : Dr. INSURANCE		Received : 11-Mar-2023 08.51
Sample Type : Serum	Sample ID : 23666	Report : 11-Mar-2023 14.45

TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

LIVER FUNCTION TEST

Serum Bilirubin

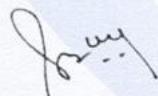
Total Bilirubin	0.47	mg/dl	0.0-2.0	Diazo
Direct Bilirubin	0.22	mg/dl	0-0.4	Diazo
Indirect Bilirubin	0.25	mg/dl	0-0.8	Calculated

Total Protein

PROTEN	6.41	g/dl	6.4-8.3	Biuret
ALBUMIN	4.1	g/dl	3.4-4.8	Bcg
GLOBULIN	2.31	g/dl	2.3-3.5	
A/G RATIO	1.77	g/dl		
SGOT	17	U/L	0-31	IFCC
SGPT	12	U/L	0.0-34	IFCC

Gamma GT	15.5	U/L	0-38	Glupa-c
Alkaline Phosphatase	78	U/L	42-98	Amp

-----End of Report-----




Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : chand



BOOK APPOINTMENT



Patient Name : Mrs. KHUSBU JHA	Reg No. : 6780/UHID22DL	Lab ID. : 7264/OPDPB22DL
Age / Gender : 29Y / Female	Date : 11-Mar-2023	
Mobile No. : 9910208309	Manual No.	Collected : 11-Mar-2023 08.50
Refd. By : Dr. INSURANCE		Received : 11-Mar-2023 08.51
Sample Type : Serum	Sample ID : 23666	Report : 11-Mar-2023 15.47

TEST NAME	RESULT	UNIT	RANGE	METHOD
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HORMONES

THYROID PROFILE

T3	1.10	ng/dl		CLIA
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All values

Adults (euthyroid) 0.50-2.00

Newborns 0.73-2.88

6d - 3 mth 0.80-2.75

4 - 12 mth 0.86-2.65

1 - 6 yr 0.92-2.48

7 - 11 yr 0.93-2.31

12- 20 yr 0.91-2.18

Pregnancy

First trimester 0.05 - 3.70

Second trimester 1.7 - 4.3

Third trimester 0.4 - 3.9

T4	7.73	µg/dl		CLIA
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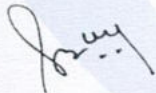
Adults - M - 4.4-10.8 µg/dl

F- 4.8 - 11.6 µg/dl

1st Trimester 7.3-15.00 µg/dl

2nd Trimester 8.92-17.38

3rd Trimester 7.98-17.70




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BOOK APPOINTMENT



Patient Name : Mrs. KHUSBU JHA	Reg No. : 6780/UHID22DL	Lab ID. : 7264/OPDPB22DL
Age / Gender : 29Y / Female	Date : 11-Mar-2023	
Mobile No. : 9910208309	Manual No.	Collected : 11-Mar-2023 08.50
Refd. By : Dr. INSURANCE		Received : 11-Mar-2023 08.51
Sample Type : Serum	Sample ID : 23666	Report : 11-Mar-2023 15.47

TSH 2.84 μ U/ml CLIA

Adults

21-100 yrs 0.42 - 5.45

Pediatric

0-12 Months 0.98-5.63

1-5 years 0.64-5.76

6-10 Years 0.51-4.82

11-14 Years 0.53-5.27

15-20 years 0.43-4.20

Pregnancy

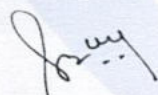
First trimester 0.1 - 2.5*

Second trimester 0.2 - 3*

Third trimester 0.3 - 3*

COMMENTS: Assay results should be interpreted in context to the clinical condition and associated results of other investigations. Previous treatment with corticosteroid therapy may result in lower TSH levels while thyroid hormone levels are normal. Results are invalidated if the client has undergone a radionuclide scan within 7-14 days before the test. Abnormal thyroid test findings often found in critically ill clients should be repeated after the critical nature of the condition is resolved. The production, circulation, and disintegration of thyroid hormones are altered throughout the stages of pregnancy

-----End of Report-----




Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : chand



BOOK APPOINTMENT



Patient Name : Mrs. KHUSBU JHA	Reg No. : 6780/UHID22DL	Lab ID. : 7264/OPDPB22DL
Age / Gender : 29Y / Female	Date : 11-Mar-2023	
Mobile No. : 9910208309	Manual No.	Collected : 11-Mar-2023 08.50
Refd. By : Dr. INSURANCE		Received : 11-Mar-2023 08.51
Sample Type : URINE	Sample ID : 23666	Report : 11-Mar-2023 14.45

TEST NAME	RESULT	UNIT	RANGE	METHOD
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CLINICAL PATHOLOGY

URINE ROUTINE

MICROSCOPY

PHYSICAL EXAMINATION

QUANTITY

30.00 ml 10-30

COLOUR

PALE YELLOW

TRANSPARENCY

CLEAR

SPECIFIC GRAVITY

1.020 1.015-1.025

PH

6.0 5.5 - 7

CHEMICAL EXAMINATION

ALBUMIN

NIL

SUGAR

NIL

MICROSCOPIC EXAMINATION

PUS CELLS

1-2 /hpf MICROSCOPIC

RBC'S

NIL NIL

CASTS

NIL

CRYSTALS

NIL

EPITHELIAL CELLS

2-3

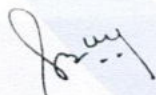
BACTERIA

NIL

OTHERS

NIL

-----End of Report-----



Dr. Sangeeta B
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DMC/25252

Lab Technician : chand



BOOK APPOINTMENT



Radiology No.	: 7264/OPDPB22DL	Date	: 11-Mar-2023
Patient Name	: Mrs. KHUSBU JHA	Age/Sex	: 29Y
Guardian Name	:	UHID No.	: 6780/UHID22DL
Consultant	: Dr. INSURANCE	Mobile No.	: 9910208309

X-RAY CHEST

Indication: Routine checkup.

Image quality:-

No evidence of rotation.

PA view. Normal penetration.

Airway:- Trachea central.

Carina & bronchi are normal.

No hilar abnormality.

Lung fields:- Clear.

Cardiac:- Cardiac borders are visible.

Normal heart size.

Diaphragm:- Costophrenic angles on right & left are normal.

Cardiophrenic angles on right & left are normal.

Diaphragm portion are normal.

Bony cage:- The ribs on the right are more oblique as compare to the left likely congenital.

No evidence of cervical ribs seen.

Impression: No significant abnormality detected.



Dr. Harshita Surange
MBBS, DMRD (RADIO DIAGNOSIS)
DIPLOMA IN MSK, UCAM (Spain)
Reg. No. MCI/16522, DMC/18402



BOOK APPOINTMENT



R

PSC

2023

11-03-2023 10:02:02 AM

ID: 23
khusbu jha
Female 29Years
Req. No. :

Diagnosis Information:
Sinus rhythm
Normal ECG

Rf

HR : 66 bpm
P : 100 ms
PR : 140 ms
QRS : 92 ms
QT/QTcBz : 404/424 ms
P/QRS/T : 57/48/46 °
RV5/SV1 : 1.1730.662 mV

Report Confirmed by:

