

vikal kr burman
30years
Male

Caucasian

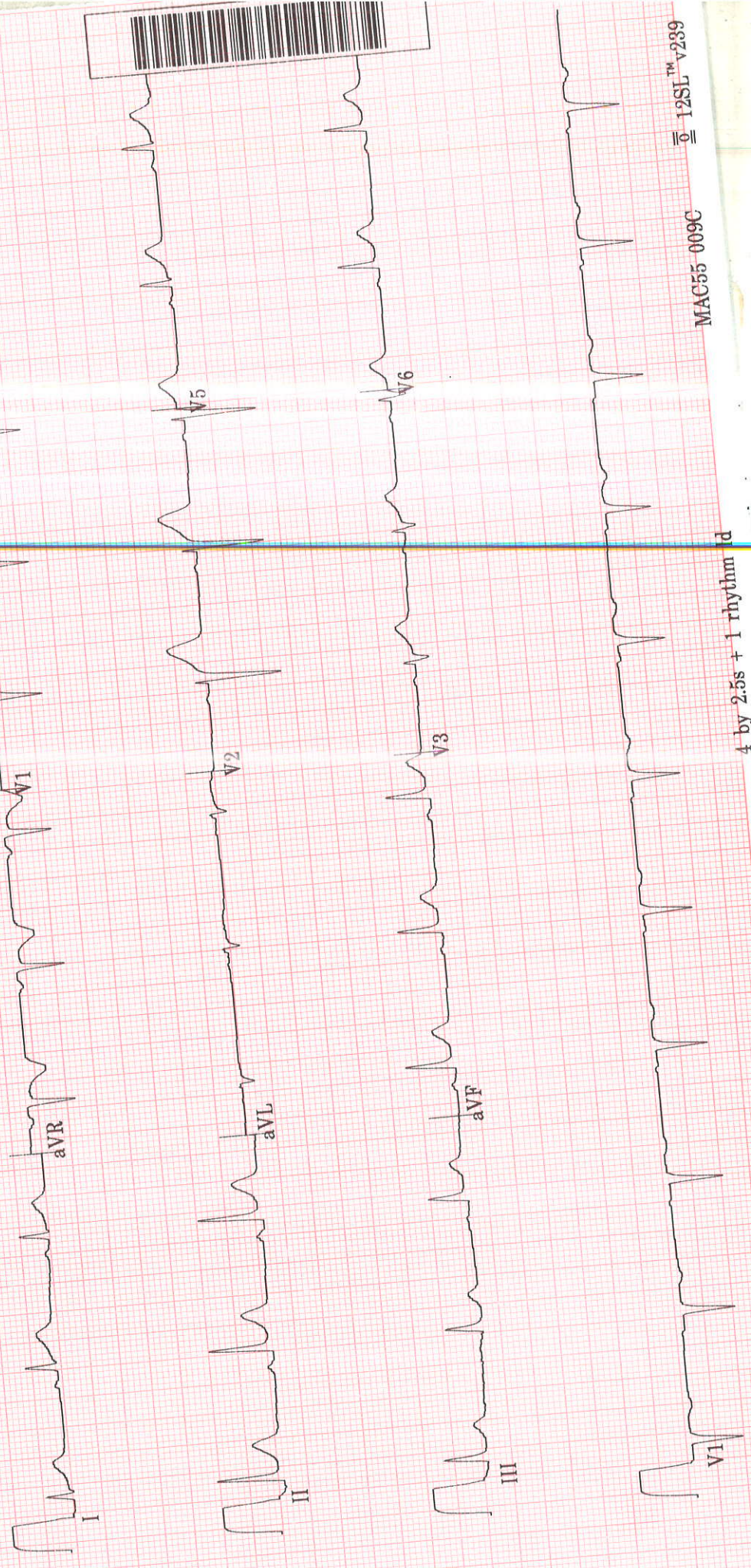
Vent. rate 65 bpm
PR interval 146 ms
QRS duration 74 ms
QT/QTc 350/364 ms
I-R-T axes 48 64 57

Normal sinus rhythm
Normal ECG

Technician:
Test ind:

Referred by:

Unconfirmed





TMT INVESTIGATION REPORT

Patient Name : Mr Vikal BURMAN	Location : Ghaziabad
Age/Sex : 30Year(s)/male	Visit No : V0000000001-GHZB
MRN No : MH010877870	Order Date : 25/03/2023
Ref. Doctor : HCP	Report Date : 25/03/2023

Protocol : Bruce	MPHR : 190BPM
Duration of exercise : 9min 07sec	85% of MPHR : 161BPM
Reason for termination : THR achieved	Peak HR Achieved : 164BPM
Blood Pressure (mmHg) : Baseline BP : 132/80mmHg	% Target HR : 86%
Peak BP : 146/80mmHg	METS : 10.2METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	81	132/80	Nil	No ST changes seen	Nil
STAGE 1	3:00	115	136/80	Nil	No ST changes seen	Nil
STAGE 2	3:00	130	140/80	Nil	No ST changes seen	Nil
STAGE 3	3:00	162	146/80	Nil	No ST changes seen	Nil
STAGE 4	0:07	163	146/80	Nil	No ST changes seen	Nil
RECOVERY	3:49	103	140/80	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.
- Good effort tolerance.

IMPRESSION:

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

Dr. Bhupendra SinghMD, DM (CARDIOLOGY), FACC
Sr. Consultant Cardiology**Dr. Abhishek Singh**MD, DNB (CARDIOLOGY), MNAMS
Sr. Consultant Cardiology**Dr. Sudhanshu Mishra**MD
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RADIOLOGY REPORT

Name	Vikal BURMAN	Modality	DX
Patient ID	MH010877870	Accession No	R5341141
Gender/Age	M / 30Y 8M 3D	Scan Date	28-03-2023 10:01:54
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	28-03-2023 10:27:49

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. Prabhat Prakash Gupta,
 MBBS,DNB,MNAMS,FRCR(I)
 Consultant Radiologist, Reg no DMC/R/14242

MANIPAL HOSPITALS

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This report is subject to the terms and conditions mentioned overleaf

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LABORATORY REPORT

Name : MR VIKAL BURMAN Age : 30 Yr(s) Sex : Male
 Registration No : MH010877870 Lab No : 32230310916
 Patient Episode : H18000000393 Collection Date : 28 Mar 2023 12:35
 Referred By : HEALTH CHECK MGD Reporting Date : 28 Mar 2023 14:49
 Receiving Date : 28 Mar 2023 12:38

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Specimen Type : Serum

THYROID PROFILE, Serum

T3 - Triiodothyronine (ECLIA)	1.17	ng/ml	[0.70-2.04]
T4 - Thyroxine (ECLIA)	7.18	mcg/dl	[4.60-12.00]
Thyroid Stimulating Hormone (ECLIA)	1.780	µIU/mL	[0.340-4.250]

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

Name : MR VIKAL BURMAN Age : 30 Yr(s) Sex : Male
 Registration No : MH010877870 Lab No : 202303002844
 Patient Episode : H18000000393 Collection Date : 28 Mar 2023 09:44
 Referred By : HEALTH CHECK MGD Reporting Date : 28 Mar 2023 12:15
 Receiving Date : 28 Mar 2023 11:14

HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)		SPECIMEN-EDTA Whole Blood	
RBC COUNT (IMPEDENCE)	4.86	millions/cu mm	[4.50-5.50]
HEMOGLOBIN	15.2	g/dl	[12.0-16.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	44.1	%	[40.0-50.0]
MCV (DERIVED)	90.7	fL	[83.0-101.0]
MCH (CALCULATED)	31.3	pg	[27.0-32.0]
MCHC (CALCULATED)	34.5	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	12.9	%	[11.6-14.0]
Platelet count	208	x 10 ³ cells/cumm	[150-400]
MPV (DERIVED)	10.5		
WBC COUNT (TC) (IMPEDENCE)	4.04	x 10 ³ cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	47.0	%	[40.0-80.0]
Lymphocytes	43.0	%	[17.0-45.0]
Monocytes	8.0	%	[2.0-10.0]
Eosinophils	2.0	%	[2.0-7.0]
Basophils	0.0	%	[0.0-2.0]
ESR	15.0 #	/1sthour	[0.0-

LABORATORY REPORT

Name	: MR VIKAL BURMAN	Age	: 30 Yr(s) Sex :Male
Registration No	: MH010877870	Lab No	: 202303002844
Patient Episode	: H18000000393	Collection Date	: 28 Mar 2023 09:44
Referred By	: HEALTH CHECK MGD	Reporting Date	: 28 Mar 2023 17:44
Receiving Date	: 28 Mar 2023 11:14		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Glycosylated Hemoglobin			
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 glycemic control.

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction [pH]	7.0	(4.6-8.0)
Specific Gravity	1.005	(1.003-1.035)

CHEMICAL EXAMINATION

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

LABORATORY REPORT

Name	: MR VIKAL BURMAN	Age	: 30 Yr(s) Sex :Male
Registration No	: MH010877870	Lab No	: 202303002844
Patient Episode	: H18000000393	Collection Date	: 28 Mar 2023 11:14
Referred By	: HEALTH CHECK MGD	Reporting Date	: 28 Mar 2023 12:23
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CLINICAL PATHOLOGY

MICROSCOPIC EXAMINATION (Automated/Manual)

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

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	214 #	mg/dl	[<200] Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	216 #	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL	44.0	mg/dl	[35.0-65.0]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	43 #	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	127.0 #	mg/dl	[<120.0] 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)	4.9		
LDL.CHOL/HDL.CHOL Ratio(Calculated)	2.9		<3 Optimal 3-4 Borderline >6 High Risk

Note:

LABORATORY REPORT

Name : MR VIKAL BURMAN **Age** : 30 Yr(s) Sex :Male
Registration No : MH010877870 **Lab No** : 202303002844
Patient Episode : H1800000393 **Collection Date** : 28 Mar 2023 09:44
Referred By : HEALTH CHECK MGD **Reporting Date** : 28 Mar 2023 12:15
Receiving Date : 28 Mar 2023 11:14

BIOCHEMISTRY

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

KIDNEY PROFILE

Specimen: Serum

UREA 17.0 mg/dl [15.0-40.0]

Method: GLDH, Kinatic assay

BUN, BLOOD UREA NITROGEN 7.9 # mg/dl [8.0-20.0]

Method: Calculated

CREATININE, SERUM 0.85 mg/dl [0.70-1.20]

Method: Jaffe rate-IDMS Standardization

URIC ACID 6.3 mg/dl [4.0-8.5]

Method: uricase PAP

SODIUM, SERUM 137.10 mmol/L [136.00-144.00]

POTASSIUM, SERUM 4.21 mmol/L [3.60-5.10]

SERUM CHLORIDE 102.5 mmol/l [101.0-111.0]

Method: ISE Indirect

eGFR (calculated) 116.9 mL/min/1.73sq.m [>60.0]

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.