

**CONCLUSION OF HEALTH CHECKUP**

ECU Number : 10900	MR Number : 23210623	Patient Name: PUNAM VIVEK TELGOTE
Age : 31	Sex : Female	Height : 153
Weight : 63.2	Ideal Weight : 54	BMI : 27
Date : 11/04/2024		

*Diagnosed*

*Lifestyle Modification*

  
Dr. Manish Mittal

Internal Medicine

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.

ECU Number : 10900      MR Number : 23210623      Patient Name: PUNAM VIVEK TELGOTE  
Age : 31      Sex : Female      Height : 153  
Weight : 63.2      Ideal Weight : 54      BMI : 27  
Date : 11/04/2024

Past H/O : K/C/O HYPOTHYROIDISM  
T. THYRONORM 50MCG OD

Present H/O : NO MEDICAL COMPLAINS AT PRESENT.

Family H/O : NO F/H/O ANY MAJOR ILLNESS.

Habits : NO

Gen.Exam. : G.C.GOOD

B.P : 106/70

Pulse : 68/MIN REG

Others : SPO2 98 %

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :



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ECU Number : 10900

Age : 31

Weight : 63.2

Date : 11/04/2024

MR Number : 23210623

Sex : Female

Ideal Weight : 54

Patient Name: PUNAM VIVEK TELGOTE

Height : 153

BMI : 27

## Ophthalmic Check Up :

Right

Left

Ext Exam

NIL

Vision Without Glasses

6/6

6/6

Vision With Glasses

N.6

N.6

Final Correction

14.6

14.6

Fundus

NORMAL

Four Vision

NORMAL

Advice

NIL

## Orthopaedic Check Up :

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

## General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice





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Age : 31

Weight : 63.2

Date : 11/04/2024

MR Number : 23210623

Sex : Female

Ideal Weight : 54

Patient Name: PUNAM VIVEK TELGOTE

Height : 153

BMI : 27

## Gynaec Check Up :

OBSTETRIC HISTORY < PTS B - LSCS - MALE < FT LSCS - MALE 5 YRS

MENSTRUAL HISTORY -

PRESENT MENSTRUAL CYCLE LMP = 24/03/2024

PAST MENSTRUAL CYCLE REGULAR

CHIEF COMPLAINTS NIL

PA SOFT

PS Cx - (N) PINHDE OS Vg - (N) WHITE DISCHARGE

PV UT NS Fx CLEAR

BREAST EXAMINATION RIGHT NORMAL

BREAST EXAMINATION LEFT NORMAL

PAPSMEAR TAKEN

BMD

MAMMOGRAPHY

ADVICE FOLLOW UP WITH REPORTS.



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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mrs. PUNAM VIVEK TELGOTE  
Gender / Age : Female / 32 Years 3 Months 8 Days  
MR No / Bill No. : 23210623 / 251002888  
Consultant : Dr. Manish Mittal  
Location : OPD

Type : OPD  
Request No. : 218200  
Request Date : 11/04/2024 08:32 AM  
Collection Date : 11/04/2024 09:42 AM  
Approval Date : 11/04/2024 04:41 PM

Haematology

Test	Result	Units	Biological Ref. Range
<b>Blood Group</b>			
ABO system	B		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method

Note :

This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontrol.  
This method checks group both on Red blood cells and in Serum for "ABO" group.

--- End of Report ---



Dr. Ameer Soni  
MD (Path)

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.



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 Location : OPD

Type : OPD  
 Request No. : 218200  
 Request Date : 11/04/2024 08:32 AM  
 Collection Date : 11/04/2024 09:42 AM  
 Approval Date : 11/04/2024 05:45 PM

**Pap Smear**

Test	Result	Units	Biological Ref. Range
Pap Smear	Pap Smear Screening Report / Cervico-Vaginal Cytology...		

Cyto No : P/986/24  
 Received at 01.45 pm.

Clinical Details : No Complain  
 P/V findings : Cx. - Pinhole OS / Vg. - White Discharge  
 LMP : 24/03/2024

TBS Report / Impression :

- \* Satisfactory for evaluation; transformation zone components identified.
- \* Mild acute inflammatory cellularity. No evidence of T. vaginalis / Fungal elements.
- \* No epithelial cell abnormality favouring squamous intraepithelial lesion or frank malignancy ( NILM ).

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is given. Recheck / retest may be requested.

Material received in LBC container, cytosmear was stained by rapid pap method and reported with due consideration to The Bethesda system (Modified 2014)

---- End of Report ----

Dr. Arnee Soni  
MD (Path)



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 Collection Date : 11/04/2024 09:42 AM  
 Approval Date : 11/04/2024 02:31 PM

**CBC + ESR**

Test	Result	Units	Biological Ref. Range
<b>Haemoglobin.</b>			
Haemoglobin	<u>11.0</u>	gm/dL	12 - 15
Red Blood Cell Count (T-RBC)	4.37	mill/cmm	3.8 - 4.8
Hematocrit (HCT)	36.3	%	36 - 46
Mean Corpuscular Volume (MCV)	83.1	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	<u>25.2</u>	pg	27 - 32
MCH Concentration (MCHC)	<u>30.3</u>	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	12.5	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	<u>38.2</u>	fl	39 - 46
<b>Total Leucocyte Count (TLC)</b>			
Total Leucocyte Count (TLC)	9.24	thou/cmm	4 - 10
<b>Differential Leucocyte Count</b>			
Polymorphs	61	%	40 - 80
Lymphocytes	32	%	20 - 40
Eosinophils	3	%	1 - 6
Monocytes	4	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	5.55	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.94	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.28	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.34	thou/cmm	0.2 - 1
Basophils (Abs. Value)	<u>0.13</u>	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.2	%	1 - 3 : Borderline > 3 : Significant
<b>Platelet Count</b>			
Platelet Count	306	thou/cmm	150 - 410
Remarks	This is cell counter generated CBC report, Smear review is not done		
ESR	<u>23</u>	mm/1 hr	0 - 12

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before reaching any firm conclusion.

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mrs. PUNAM VIVEK TELGOTE	Type	: OPD
Gender / Age	: Female / 32 Years 3 Months 8 Days	Request No.	: 218200
MR No / Bill No.	: 23210623 / 251002888	Request Date	: 11/04/2024 08:32 AM
Consultant	: Dr. Manish Mittal	Collection Date	: 11/04/2024 09:42 AM
Location	: OPD	Approval Date	: 11/04/2024 02:31 PM

**CBC + ESR**

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.  
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter by Fluorescent flow cytometry using a semi-conductor laser and hydrodynamic focusing in dedicated channels. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification.

on ESL-30, comparable to Westergrens method and in accordance to ICSH reference method.

---- End of Report ----

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.

Dr. Ameet Soni  
MD (Path)



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DEPARTMENT OF LABORATORY MEDICINE

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MR No / Bill No. : 23210623 / 251002888  
Consultant : Dr. Manish Mittal  
Location : OPD

Type : OPD  
Request No. : 218200  
Request Date : 11/04/2024 08:32 AM  
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Approval Date : 11/04/2024 02:58 PM

**Fasting Plasma Glucose**

Test	Result	Units	Biological Ref. Range
<b>Fasting Plasma Glucose</b>			
Fasting Plasma Glucose	103	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	126	mg/dL	70 - 140

By Hexokinase method on EXL Dade Dimension

---- End of Report ----

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.

Dr. Ameet Soni  
MD (Path)



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**HbA1c (Glycosylated Hb)**

Test	Result	Units	Biological Ref. Range
<b>HbA1c (Glycosylated Hb)</b>			
Glycosylated Hemoglobin (HbA1c)	5.6	%	
estimated Average Glucose (e AG) *	114.02	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

\* Calculated value for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

**Guidelines for Interpretation:**

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

---- End of Report ----

Dr. Ameet Soni  
MD (Path)



Patient Name : Mrs. PUNAM VIVEK TELGOTE Type : OPD  
 Gender / Age : Female / 32 Years 3 Months 8 Days Request No. : 218200  
 MR No / Bill No. : 23210623 / 251002888 Request Date : 11/04/2024 08:32 AM  
 Consultant : Dr. Manish Mittal Collection Date : 11/04/2024 09:42 AM  
 Location : OPD Approval Date : 11/04/2024 02:58 PM

**Complete Lipid Profile**

Test	Result	Units	Biological Ref. Range
<b>Complete Lipid Profile</b>			
Appearance	Clear		
Triglycerides (Done by Lipase /Glycerol kinase on Vitros 5600 < 150 Normal 150-199 Borderline High 200-499 High > 499 Very High)	193	mg/dL	1 - 150
Total Cholesterol (Done by Colorimetric - Cholesterol Oxidase, esterase, peroxidase on Vitros 5600. <200 mg/dL - Desirable 200-239 mg/dL - Borderline High 239 mg/dL - High)	224	mg/dL	1 - 200
HDL Cholesterol (Done by Colorimetric: non HDL precipitation method PTA/MgCl2 on Vitros 5600 < 40 Low > 60 High)	34	mg/dL	40 - 60
Non HDL Cholesterol (calculated) (Non- HDL Cholesterol < 130 Desirable 139-159 Borderline High 160-189 High > 191 Very High)	190	mg/dL	1 - 130
LDL Cholesterol (Done by Enzymatic (Two Step CHE/CHO/POD) on Vitros 5600 < 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High > 189 Very High)	155	mg/dL	1 - 100
VLDL Cholesterol (calculated)	38.6	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	4.56		2.1 - 3.5
T. Ch./HDL Ch. Ratio	6.59		3.5 - 5
(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)			

---- End of Report ----

Dr. Amee Soni  
MD (Path)



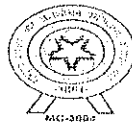
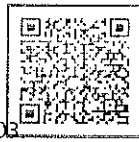
Patient Name : Mrs. PUNAM VIVEK TELGOTE Type : OPD  
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 MR No / Bill No. : 23210623 / 251002888 Request Date : 11/04/2024 08:32 AM  
 Consultant : Dr. Manish Mittal Collection Date : 11/04/2024 09:42 AM  
 Location : OPD Approval Date : 11/04/2024 02:58 PM

**Liver Function Test (LFT)**

Test	Result	Units	Biological Ref. Range
<b>Bilirubin</b>			
Bilirubin - Total	0.88	mg/dL	0 - 1
Bilirubin - Direct	0.22	mg/dL	0 - 0.3
Bilirubin - Indirect	0.66	mg/dL	0 - 0.7
<i>(Done by Dual Wavelength - Reflectance Spectrophotometry on Vitros 5600)</i>			
Aspartate Aminotransferase (SGOT/AST)	26	U/L	13 - 35
<i>(Done by Multipoint Rate Colorimetric with P-5-P on Vitros 5600)</i>			
Alanine Aminotransferase (SGPT/ALT)	31	U/L	14 - 59
<i>(Done by Multipoint-Rate/Colorimetric with P-5-P (pyridoxa-5-phosphate) on Vitros 5600)</i>			
Alkaline Phosphatase	101	U/L	42 - 98
<i>(Done by Multipoint-Rate - p-nitrophenyl Phosphate, AMP buffer on Vitros 5600)</i>			
Gamma Glutamyl Transferase (GGT)	37	U/L	5 - 55
<i>(Done by Multipoint Rate - L-γ<sup>3</sup>-glutamyl-p-nitroanilide on Vitros 5600)</i>			
<b>Optal Protein</b>			
Total Proteins	7.92	gm/dL	6.4 - 8.2
Albumin	4.13	gm/dL	3.4 - 5
Globulin	3.79	gm/dL	3 - 3.2
A : G Ratio	1.09		1.1 - 1.6
<i>(Done by Biuret endpoint and Bromocresol green method on vitros 5600.)</i>			

--- End of Report ---

Dr. Ameet Soni  
MD (Path)



Patient Name : Mrs. PUNAM VIVEK TELGOTE  
 Gender / Age : Female / 32 Years 3 Months 8 Days  
 MR No / Bill No. : 23210623 / 251002888  
 Consultant : Dr. Manish Mittal  
 Location : OPD

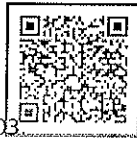
Type : OPD  
 Request No. : 218200  
 Request Date : 11/04/2024 08:32 AM  
 Collection Date : 11/04/2024 09:42 AM  
 Approval Date : 11/04/2024 02:58 PM

## Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (Done by Endpoint/Colorimetric - Urease on Vitros 5600)	13	mg/dL	10 - 45
BUN	6.07	mg/dL	5 - 21
Creatinine (By Modified Kinetic Jaffe Technique)	<u>0.58</u>	mg/dL	0.6 - 1.1
Estimate Glomerular Filtration rate (Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)	More than 60		
Uric acid (Done by Colorimetric - Uricase, Peroxidase on Vitros 5600)	6.6	mg/dL	2.2 - 5.8

---- End of Report ----

Dr. Arnee Soni  
MD (Path)



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 Gender / Age : Female / 32 Years 3 Months 8 Days  
 MR No / Bill No. : 23210623 / 251002888  
 Consultant : Dr. Manish Mittal  
 Location : OPD

Type : OPD  
 Request No. : 218200  
 Request Date : 11/04/2024 08:32 AM  
 Collection Date : 11/04/2024 09:42 AM  
 Approval Date : 11/04/2024 02:58 PM

## Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
Triiodothyronine (T3) <i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</i> <i>Reference interval (ng/ml)</i> 1 - 3 days : 0.1 - 7.4 1-11 months : 0.1 - 2.45 1-5 years : 0.1 - 2.7 6-10 years : 0.9 - 2.4 11-15 years : 0.8 - 2.1 16-20 years : 0.8 - 2.1 Adults (20 - 99 years) : 1.07 - 1.85 Pregnancy (in last 5 months) : 1.2 - 2.5 <i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition )</i>	1.20	ng/ml	
Thyroxine (T4) <i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</i> <i>Reference interval (mcg/dL.)</i> 1 - 3 days : 11.8 - 22.6 1 - 2 weeks : 9.8 - 16.6 1 - 4 months : 7.2 - 14.4 4 - 12 months : 7.8 - 16.5 1-5 years : 7.3 - 15.0 5 - 10 years : 6.4 - 13.3 10 - 20 years : 5.6 - 11.7 Adults (20-99 years) : 5.91 - 12.98 <i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition )</i>	11.0	mcg/dL	
Thyroid Stimulating Hormone (US-TSH) <i>(Done by CLIA based method on automated immunoassay Vitros 5600.)</i> <i>Reference interval (microU/ml)</i> Infants (1-4 days) : 1.0 - 39 2-20 weeks : 1.7 - 9.1 5 months - 20 years : 0.7 - 6.4 Adults (20-99 years) : 0.4001 - 4.049 Pregnancy : 1st trimester : 0.3 - 4.5 2nd trimester : 0.5 - 4.6 3rd trimester : 0.8 - 5.2 <i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition )</i>	1.48	microU/ml	

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--- End of Report ---

Dr. Ameer Soni  
MD (Path)



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 Location : OPD

Type : OPD  
 Request No. : 218200  
 Request Date : 11/04/2024 08:32 AM  
 Collection Date : 11/04/2024 09:42 AM  
 Approval Date : 11/04/2024 02:30 PM

**Urine routine analysis (Auto)**

Test	Result	Units	Biological Ref. Range
<b>Physical Examination</b>			
Quantity	30	mL	
Colour	Pale Yellow		
Appearance	Clear		
<b>Chemical Examination (By Reagent strip method)</b>			
pH	8.0		4.6 - 8.0
Specific Gravity	1.002		1.005 - 1.030
Protein	Negative		Negative
Glucose	Negative		Negative
Ketones	Negative		Negative
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
<b>Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)</b>			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	5 - 10	/hpf	0 - 5
Casts	Nil	/hpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

Reference : Wallach`s Interpretation to laboratory test, 10th edition

---- End of Report ----

Dr. Amee Soni  
MD (Path)



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Digital Subtraction Angiography (DSA)

Foetal Echocardiography

Echocardiography

4D USG & Doppler

**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 23210623 Report Date : 11/04/2024

Request No. : 190112694 11/04/2024 8.32 AM

Patient Name : Mrs. PUNAM VIVEK TELGOTE

Gender / Age : Female / 32 Years 3 Months 8 Days

X-Ray Chest AP

Both lung fields are clear.  
Both costophrenic sinuses appear clear.  
Heart size is normal.  
Hilar shadows show no obvious abnormality.  
Aorta is normal.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES  
• NOT VALID FOR MEDICO-LEGAL PURPOSES  
• CLINICAL CORRELATION RECOMMENDED

Dr. Priyanka Patel, MD.

Consultant Radiologist

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- Digital Subtraction Angiography (DSA)
- Foetal Echocardiography
- Echocardiography
- 4D USG & Doppler

**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 23210623      Report Date : 11/04/2024  
 Request No. : 190112713      11/04/2024 8.32 AM  
 Patient Name : Mrs. PUNAM VIVEK TELGOTE  
 Gender / Age : Female / 32 Years 3 Months 8 Days

**USG : Abdomen (Excluding Pelvis) Or Upper Abdomen**

Liver is normal in size and echopattern. No mass lesion identified. The hepaticveins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows no obvious abnormality. Common bile duct measures 4 mm in diameter.

Pancreas shows no obvious abnormality. Tail obscured.  
 Spleen is normal size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

No ascites.

**COMMENT:**

**• No obvious abnormality seen.**

*Kindly correlate clinically*

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES  
 • NOT VALID FOR MEDICO-LEGAL PURPOSES  
 • CLINICAL CORRELATION RECOMMENDED

**Dr.Priyanka Patel, MD.**

Consultant Radiologist



Patient No. : 23210623      Report Date : 11/04/2024  
Request No. : 190112701      11/04/2024 8.32 AM  
Patient Name : Mrs. PUNAM VIVEK TELGOTE  
Gender / Age : Female / 32 Years 3 Months 8 Days

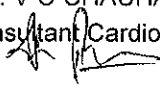
**Echo Doppler Screening**

MITRAL VALVE : NORMAL  
AORTIC VALVE : TRILEAFLET, NORMAL  
TRICUSPID VALVE : NORMAL, TRACE TR, NO PAH  
PULMONARY VALVE : NORMAL  
LEFT ATRIUM : NORMAL  
AORTA : NORMAL  
LEFT VENTRICLE : NORMAL, NO REGIONAL WALL MOTION ABNORMALITY,  
LVEF=65%  
RIGHT ATRIUM : NORMAL  
RIGHT VENTRICLE : NORMAL  
I.V.S. : INTACT  
I.A.S. : INTACT  
PULMONARY ARTERY : NORMAL  
PERICARDIUM : NORMAL  
  
COLOUR/DOPPLER FLOW MAPPING : Trace TR, NO PAH

**FINAL CONCLUSION:**

1. ALL CARDIAC CHAMBERS ARE NORMAL IN DIMENSIONS
2. NO REGIONAL WALL MOTION ABNORMALITY AT REST
3. NORMAL LV SYSTOLIC FUNCTION, LVEF=65%
4. NORMAL VALVES
5. NO E/O LV DIASTOLIC DYSFUNCTION
6. NO AR, MR, TRACE TR, NO PULMONARY HYPERTENSION , ( IVC COLLAPSING )
7. NO PERICARDIAL EFFUSION, CLOT VEGETATION.

Dr. V C CHAUHAN  
Consultant Cardiologist



Reading time Mrs. purnam v telgote -  
Patient ID Ecu/23210623

11-04-2024 10:34:02  
Standard 12-Lead

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Age 032Y  
Gender Female  
Ref. phys.

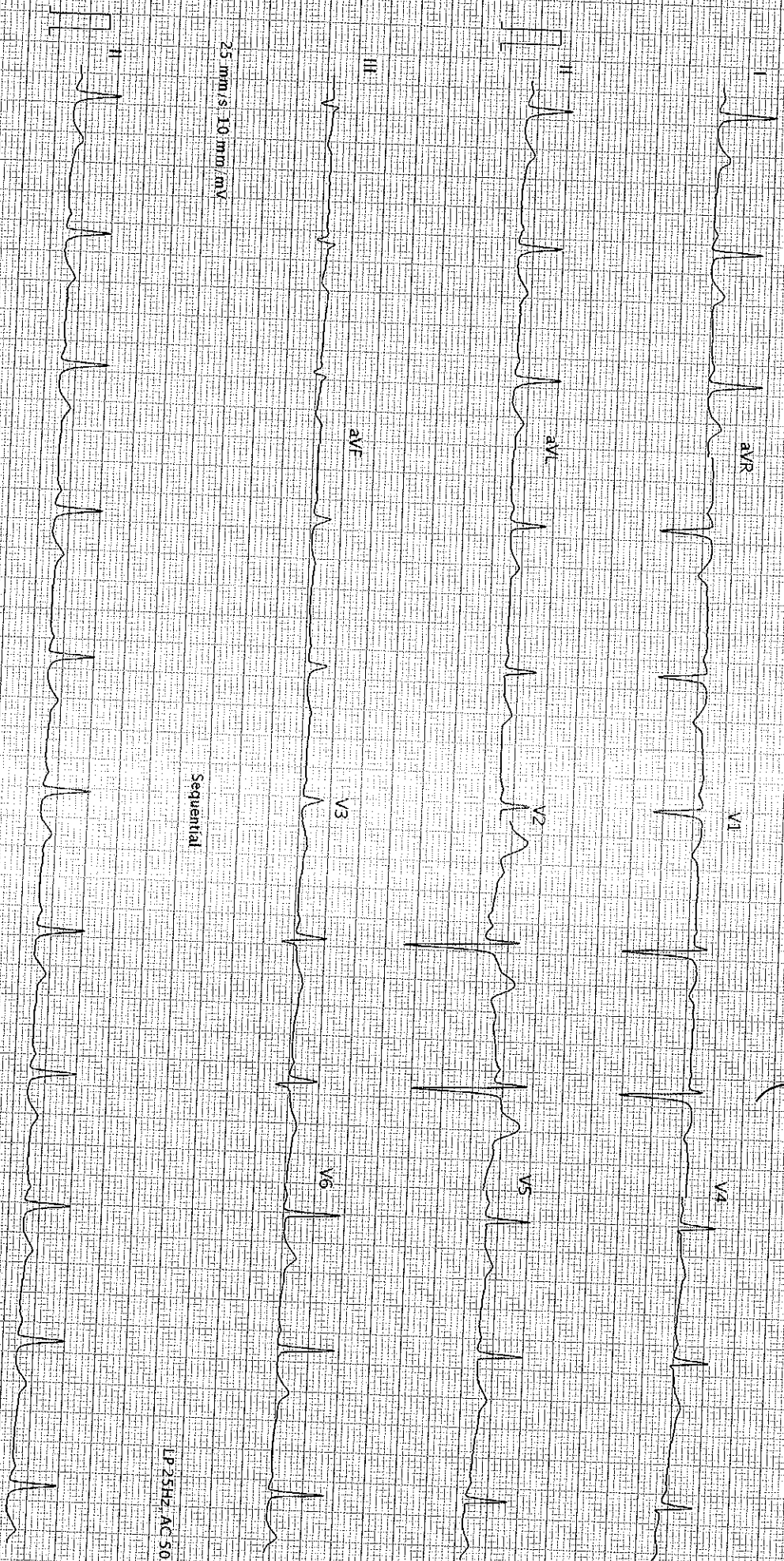
Paramaker Unknown

Remark

HR 64 bpm  
RR 935 ms  
P 99 ms  
PR 117 ms  
QRS 87 ms  
QT 413 ms  
QTcB 427 ms  
P axis 19°  
QRS axis 21°  
T axis 4°

Unconfirmed report

*Qw*



25 mm/s 10 mm/mV

Sequential

LP 25Hz, AC 50Hz

25 mm/s 10 mm/mV

AT 102 G2 1.2.0 (1080011030)

SCHILLER

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LP 25Hz, AC 50Hz