

PHYSICAL EXAMINATION REPORT

Patient Name	<i>Sanjana Mishra</i>	Sex/Age	<i>F / 28</i>
Date	<i>11/3/20</i>	Location	<i>Thane</i>

History and Complaints

NIL

EXAMINATION FINDINGS:

Height (cms):	<i>156cm</i>	Temp (0c):	<i>Afebr</i>
Weight (kg):	<i>64.4</i>	Skin:	<i>NAD</i>
Blood Pressure	<i>94/72</i>	Nails:	<i>- 11 -</i>
Pulse	<i>72</i>	Lymph Node:	<i>NAD</i>

Systems :

Cardiovascular:	<i>]</i>
Respiratory:	
Genitourinary:	
GI System:	
CNS:	

Impression:

↑ ESR (63)
Urine - Bactera (+)
↓ HDL

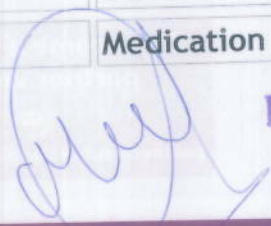
- Drink Plenty of Liquids
- Reg. Exercise

Advice:

1)	Hypertension:	
2)	IHD	
3)	Arrhythmia	
4)	Diabetes Mellitus	NO
5)	Tuberculosis	
6)	Asthama	
7)	Pulmonary Disease	
8)	Thyroid/ Endocrine disorders	
9)	Nervous disorders	
10)	GI system	NAD
11)	Genital urinary disorder	
12)	Rheumatic joint diseases or symptoms	NO
13)	Blood disease or disorder	
14)	Cancer/lump growth/cyst	
15)	Congenital disease	
16)	Surgeries	
17)	Musculoskeletal System	NAD

PERSONAL HISTORY:

1)	Alcohol	NO
2)	Smoking	NO
3)	Diet	pure veg
4)	Medication	NO



Dr. Manasee Kulkarni
M.B.B.S
2005/09/3439

0000-0270-0000

Date:- 11/01/23

CID:

Name:- Sanjara Mishra Sex / Age: F 28

EYE CHECK UP

Chief complaints: RCV

Systemic Diseases: All

Past history: All

Unaided Vision: 3/60 4/60

Aided Vision:

Refraction:

	(Right Eye)				(Left Eye)			
	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance								
Near								

Colour Vision: Normal / Abnormal

Remark: Good Vision

MR. PRAKASH KUDVA
SR. OPTOMETRIST



Use a QR Code Scanner Application To Scan the Code

CID : 2307019297
Name : MRS.SANJANA MISHRA
Age / Gender : 28 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 11-Mar-2023 / 09:51
Reported : 11-Mar-2023 / 15:04

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

CBC (Complete Blood Count), Blood

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>RBC PARAMETERS</u>			
Haemoglobin	12.2	12.0-15.0 g/dL	Spectrophotometric
RBC	3.82	3.8-4.8 mil/cmm	Elect. Impedance
PCV	36.9	36-46 %	Measured
MCV	96.7	80-100 fl	Calculated
MCH	32.1	27-32 pg	Calculated
MCHC	33.2	31.5-34.5 g/dL	Calculated
RDW	15.0	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	5460	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	35.2	20-40 %	
Absolute Lymphocytes	1921.9	1000-3000 /cmm	Calculated
Monocytes	5.8	2-10 %	
Absolute Monocytes	316.7	200-1000 /cmm	Calculated
Neutrophils	53.4	40-80 %	
Absolute Neutrophils	2915.6	2000-7000 /cmm	Calculated
Eosinophils	5.6	1-6 %	
Absolute Eosinophils	305.8	20-500 /cmm	Calculated
Basophils	0.0	0.1-2 %	
Absolute Basophils	0.0	20-100 /cmm	Calculated
Immature Leukocytes	-		

WBC Differential Count by Absorbance & Impedance method/Microscopy.

PLATELET PARAMETERS

Platelet Count	284000	150000-400000 /cmm	Elect. Impedance
MPV	8.3	6-11 fl	Calculated
PDW	10.2	11-18 %	Calculated

RBC MORPHOLOGY

Authenticity Check



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Hypochromia -
Microcytosis -
Macrocytosis -
Anisocytosis -
Poikilocytosis -
Polychromasia -
Target Cells -
Basophilic Stippling -
Normoblasts -
Others Normocytic, Normochromic
WBC MORPHOLOGY -
PLATELET MORPHOLOGY -
COMMENT -

Specimen: EDTA Whole Blood

ESR, EDTA WB-ESR **63** 2-20 mm at 1 hr. Sedimentation

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***



J. Mujawar

Dr. IMRAN MUJAWAR
M.D (Path)
Pathologist



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	85.1	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	67.8	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.38	0.1-1.2 mg/dl	Diazo
BILIRUBIN (DIRECT), Serum	0.15	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.23	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	6.3	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.2	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.1	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	2.0	1 - 2	Calculated
SGOT (AST), Serum	12.8	5-32 U/L	IFCC without pyridoxal phosphate activation
SGPT (ALT), Serum	8.1	5-33 U/L	IFCC without pyridoxal phosphate activation
GAMMA GT, Serum	7.0	3-40 U/L	IFCC
ALKALINE PHOSPHATASE, Serum	69.5	35-105 U/L	PNPP
BLOOD UREA, Serum	20.3	12.8-42.8 mg/dl	Urease & GLDH
BUN, Serum	9.5	6-20 mg/dl	Calculated



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Collected : 11-Mar-2023 / 13:16
Reported : 11-Mar-2023 / 22:48

CREATININE, Serum	0.68	0.51-0.95 mg/dl	Enzymatic
eGFR, Serum	110	>60 ml/min/1.73sqm	Calculated
Note: eGFR estimation is calculated using MDRD (Modification of diet in renal disease study group) equation			
URIC ACID, Serum	4.4	2.4-5.7 mg/dl	Uricase
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	
Urine Sugar (PP)	Absent	Absent	
Urine Ketones (PP)	Absent	Absent	

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***



Amit Taori

Dr.AMIT TAORI
M.D (Path)
Pathologist



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	4.8	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	91.1	mg/dl	Calculated

Intended use:

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

Clinical Significance:

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

Test Interpretation:

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

Factors affecting HbA1c results:

Increased in: High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

Reflex tests: Blood glucose levels, CGM (Continuous Glucose monitoring)

References: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***



J. Mujawar

Dr. IMRAN MUJAWAR
M.D (Path)
Pathologist



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
URINE EXAMINATION REPORT

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>PHYSICAL EXAMINATION</u>			
Color	Yellow	Pale Yellow	-
Reaction (pH)	7.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.010	1.001-1.030	Chemical Indicator
Transparency	Slight hazy	Clear	-
Volume (ml)	30	-	-
<u>CHEMICAL EXAMINATION</u>			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
<u>MICROSCOPIC EXAMINATION</u>			
Leukocytes(Pus cells)/hpf	0-1	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	1-2		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	+(>20/hpf)	Less than 20/hpf	
Others	-		

Kindly rule out contamination.

Authenticity Check



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Interpretation: The concentration values of Chemical analytes corresponding to the grading given in the report are as follows:

- Protein:(1+ -25 mg/dl, 2+ -75 mg/dl, 3+ - 150 mg/dl, 4+ - 500 mg/dl)
- Glucose:(1+ - 50 mg/dl, 2+ -100 mg/dl, 3+ -300 mg/dl,4+ -1000 mg/dl)
- Ketone:(1+ -5 mg/dl, 2+ -15 mg/dl, 3+ - 50 mg/dl, 4+ - 150 mg/dl)

Reference: Pack insert

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab
*** End Of Report ***



Anupa
Dr.ANUPA DIXIT
M.D.(PATH)
Consultant Pathologist & Lab Director



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
BLOOD GROUPING & Rh TYPING

<u>PARAMETER</u>	<u>RESULTS</u>
ABO GROUP	A
Rh TYPING	Positive

NOTE: Test performed by Semi- automated column agglutination technology (CAT)

Specimen: EDTA Whole Blood and/or serum

Clinical significance:
ABO system is most important of all blood group in transfusion medicine

Limitations:

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

References:

1. Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia
2. AABB technical manual

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*** End Of Report ***



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	136.6	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	61.8	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	GPO-POD
HDL CHOLESTEROL, Serum	39.7	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	96.9	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	85.0	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl	Calculated
VLDL CHOLESTEROL, Serum	11.9	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	3.4	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	2.1	0-3.5 Ratio	Calculated

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***

OUR PRESENCE



J. Mujawar

Dr.IMRAN MUJAWAR
M.D (Path)
Pathologist

Authenticity Check



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
THYROID FUNCTION TESTS

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
Free T3, Serum	4.7	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	15.9	11.5-22.7 pmol/L First Trimester:9.0-24.7 Second Trimester:6.4-20.59 Third Trimester:6.4-20.59	ECLIA
sensitiveTSH, Serum	2.48	0.35-5.5 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0	ECLIA

AREAS OF SPECIAL EXPERTISE

OUR PRESENCE



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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

CBC (Complete Blood Count), Blood

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>RBC PARAMETERS</u>			
Haemoglobin	12.2	12.0-15.0 g/dL	Spectrophotometric
RBC	3.82	3.8-4.8 mil/cmm	Elect. Impedance
PCV	36.9	36-46 %	Measured
MCV	96.7	80-100 fl	Calculated
MCH	32.1	27-32 pg	Calculated
MCHC	33.2	31.5-34.5 g/dL	Calculated
RDW	15.0	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	5460	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	35.2	20-40 %	
Absolute Lymphocytes	1921.9	1000-3000 /cmm	Calculated
Monocytes	5.8	2-10 %	
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Basophils	0.0	0.1-2 %	
Absolute Basophils	0.0	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	284000	150000-400000 /cmm	Elect. Impedance
MPV	8.3	6-11 fl	Calculated
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<u>RBC MORPHOLOGY</u>			

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Interpretation:

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

Clinical Significance:

- 1)TSH Values between high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2)TSH values may be trasiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

Diurnal Variation:TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am , and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7%(with in subject variation)

Reflex Tests:Anti thyroid Antibodies,USG Thyroid ,TSH receptor Antibody. Thyroglobulin, Calcitonin

Limitations:

1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

Reference:

- 1.O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2.Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3.Tietz ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4.Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD G B Road Lab, Thane West
*** End Of Report ***



Amit Taori

Dr.AMIT TAORI
M.D (Path)
Pathologist

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Ref. Dr :
Reg. Location : G B Road, Thane West Main Centre
Reg. Date : 11-Mar-2023
Reported : 11-Mar-2023 / 15:45

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

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

This report is prepared and physically checked by DR GAURAV FARTADE before dispatch.

G. R. Fartade

Dr.GAURAV FARTADE
MBBS, DMRE
Reg No -2014/04/1786
Consultant Radiologist

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023031109482742>

Authenticity Check



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Reg. Location : G B Road, Thane West Main Centre
Reg. Date : 11-Mar-2023
Reported : 11-Mar-2023 / 11:30

USG WHOLE ABDOMEN

LIVER: Liver appears normal in size and echotexture. There is no intra-hepatic biliary radical dilatation. No evidence of any focal lesion.

GALL BLADDER: Gall bladder is distended and appears normal. Wall thickness is within normal limits. There is no evidence of any calculus.

PORTAL VEIN: Portal vein is normal. **CBD:** CBD is normal.

PANCREAS: Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification. Pancreatic duct is not dilated.

KIDNEYS: Right kidney measures 9.3 x 4.5 cm. Left kidney measures 9.0 x 4.2 cm. Both kidneys are normal in size, shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

SPLEEN: Spleen is normal in size, shape and echotexture. No focal lesion is seen.

URINARY BLADDER: Urinary bladder is distended and normal. Wall thickness is within normal limits.

UTERUS: Uterus is anteverted and measures 5.7 x 3.4 x 3.7 cm. Uterine myometrium shows homogenous echotexture. Endometrial echo is in midline and measures 5 mm. Cervix appears normal.

OVARIES: Both ovaries are normal. Bilateral adnexa are clear.

The right ovary measures 2.7 x 1.4 cm .

The left ovary measures 3.0 x 1.9 cm .

No free fluid or significant lymphadenopathy is seen.

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023031109482733>

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Reported : 11-Mar-2023 / 11:30

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have inter-observer variations. Further/follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis.

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

This report is prepared and physically checked by DR GAURI VARMA before dispatch.

Dr Gauri Varma
Consultant Radiologist
MBBS / DMRE
MMC- 2007/12/4113

AREA OF SPECIAL EXPERTISE

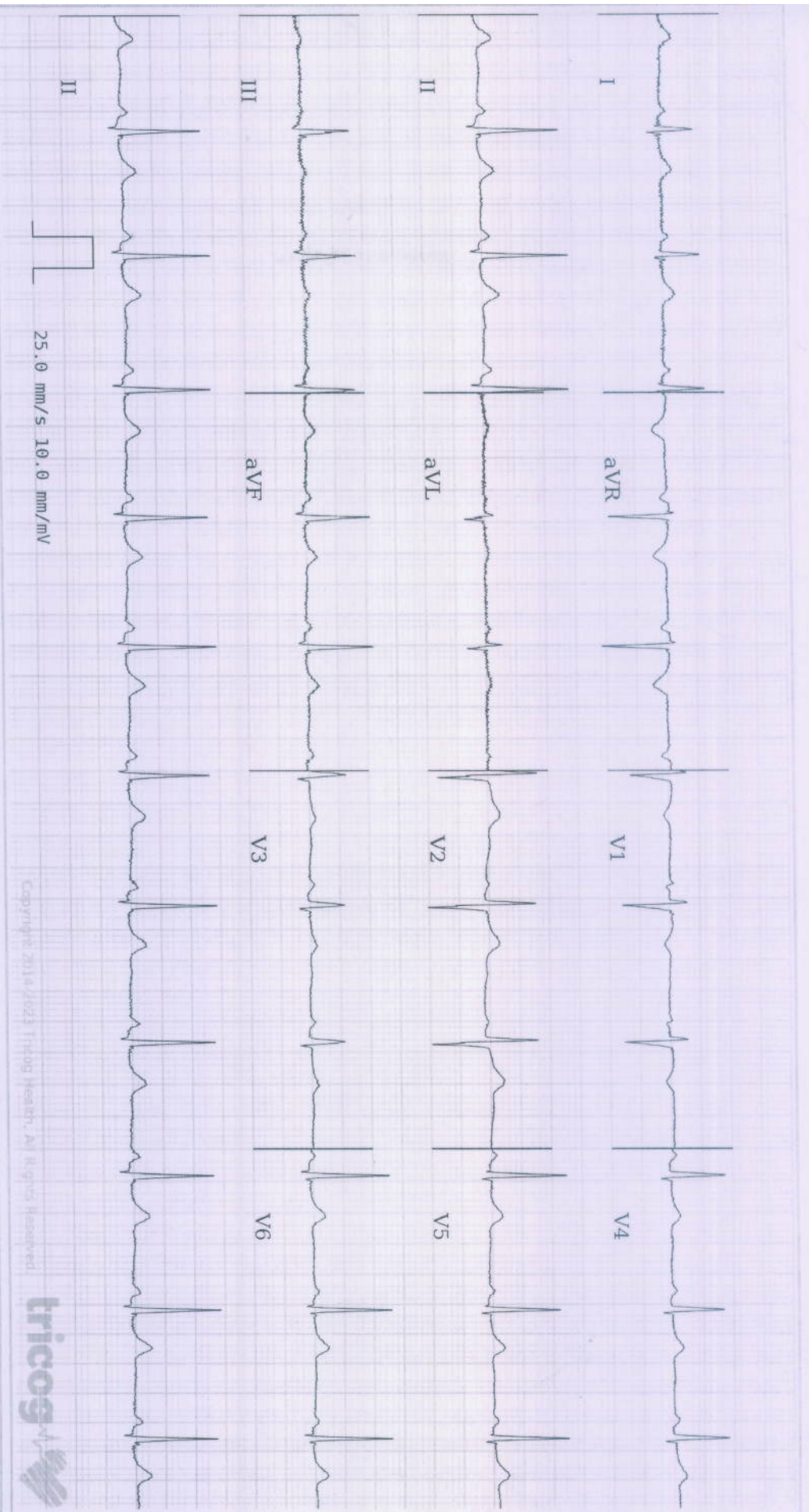
OUR PRESENCE

022-6170-0000

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023031109482733>

Patient Name: SANJANA MISHRA
Patient ID: 2307019297

SUBURBAN DIAGNOSTICS - G B ROAD, THANE WEST
Date and Time: 11th Mar 23 12:11 PM



Age 28 7 27
years months days

Gender **Female**

Heart Rate **72bpm**

Patient Vitals

BP: 90/70 mmHg
Weight: 64 kg
Height: 156 cm
Pulse: NA
Spo2: NA
Resp: NA
Others:

Measurements

QRSD: 70ms
QT: 382ms
QTc: 418ms
PR: 136ms
P-R-T: 53° 67° 55°

ECG Within Normal Limits: Sinus Rhythm. Please correlate clinically.

REPORTED BY

DR SHAILAJA PILLAI
MBBS, MD Physician
MD Physician
49972

Disclaimer: This analysis is based on ECG alone and should be used as an adjunct to clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. All Patient Vitals are as entered by the clinician and not derived from the ECG.



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

Report



Email:

620 (2307019297) / SANJANA MISHRA / 28 Yrs / F / 156 Cms / 64 Kg
Date: 11 / 03 / 2023 12:58:05 PM

Stage	Time	Duration	Speed(mph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:05	0:05	00.0	00.0	01.0	082	43 %	110/70	090	00	
Standing	00:12	0:07	00.0	00.0	01.0	082	43 %	110/70	090	00	
HV	00:19	0:07	00.0	00.0	01.0	082	43 %	110/70	090	00	
ExStart	00:36	0:17	00.0	00.0	01.0	080	42 %	110/70	088	00	
BRUCE Stage 1	03:36	3:00	01.7	10.0	04.7	138	72 %	120/70	165	00	
PeakEx	05:57	2:21	02.5	12.0	06.6	163	85 %	140/80	228	00	
Recovery	06:57	1:00	00.0	00.0	01.0	113	59 %	140/80	158	00	
Recovery	07:57	2:00	00.0	00.0	01.0	111	58 %	140/80	155	00	
Recovery	08:22	2:26	00.0	00.0	01.0	113	59 %	120/70	135	00	

FINDINGS :

Exercise Time : 05:21
 Initial HR (ExStrt) : 80 bpm 42% of Target 192
 Initial BP (ExStrt) : 110/70 (mm/Hg)
 Max Workload Attained : 6.6 Fair response to induced stress
 Max ST Dep Lead & Avg ST Value : V6 & -0.2 mm in Stage 1
 Test End Reasons : Heart Rate Achieved , Fatigue,

Max HR Attained 163 bpm 85% of Target 192
 Max BP Attained 140/80 (mm/Hg)

Doctor : DR SHAILAJA PILLAI

Dr. SHAILAJA PILLAI
 M.D. (GENMED)
 R.NO. 49972





EMail: 620 / SANJANA MISHRA / 28 Yrs / F / 156 Cms / 64 Kg Date: 11 / 03 / 2023 12:58:05 PM

REPORT :

PROCEDURE DONE: Graded exercise treadmill stress test.

STRESS ECG RESULTS: The initial HR was recorded as 82.0 bpm, and the maximum predicted Target Heart Rate 192.0. The BP increased at the time of generating report as 140.0/80.0 mmHg The Max Dep went upto 0.5. 0.0 Ectopic Beats were observed during the Test.

CONCLUSIONS:

1. TMT is negative for exercise induced ischemia.
2. Normal chronotropic and Normal inotropic response.
3. No significant ST T changes seen.

Dr. SHAILAJA PILLAI
M.D. (GENERAL MED.)
R.NO. 3972
Doctor DR SHAILAJA PILLAI



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

SUPINE (00:01)

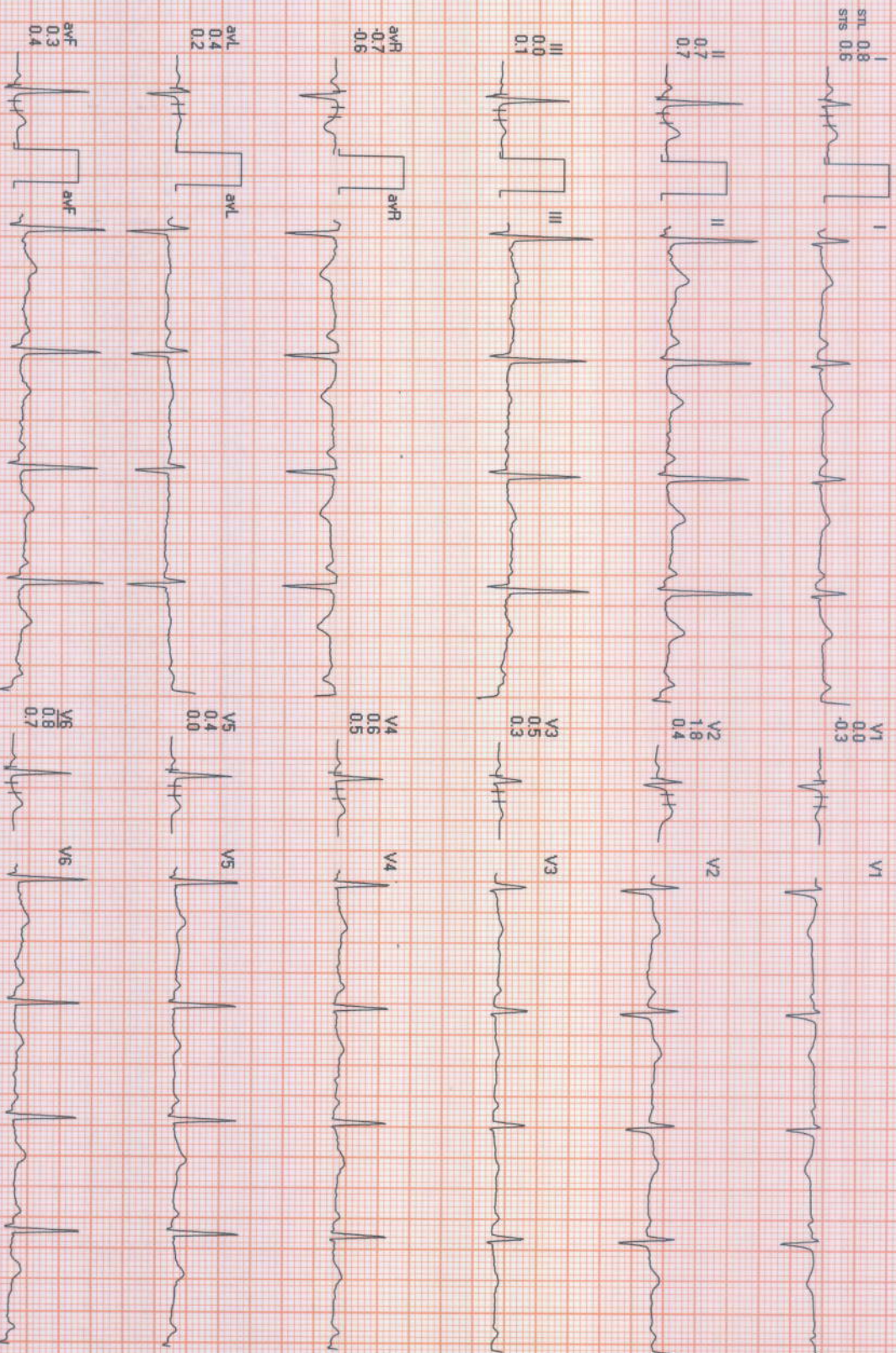
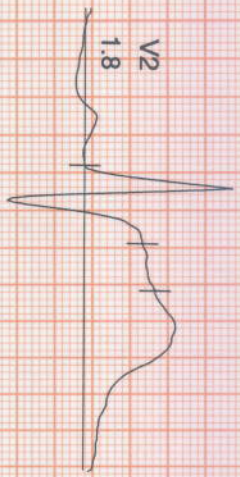


620 (2307019297) / SANKANA MISHRA / 28 Yrs / F / 156 Cms / 64 Kg / HR : 73

Date: 11 / 03 / 2023 12:58:05 PM METS: 1.0/73 bpm 38% of THR BP: 110/70 mmHg Rew ECG/BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

4X 80 mS Post J

ExTime: 00:00 0.0 mph, 0.0%
25 mm/Sec 1.0 Cm/mV



REMARKS:





620 (2307019297) / SANKANA MISHRA / 28 Yrs / F / 156 Cms / 64 Kg / HR : 82

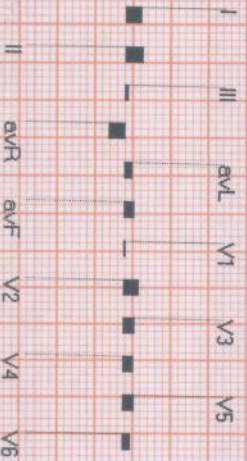
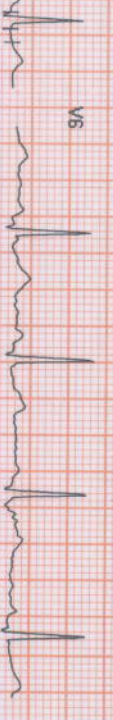
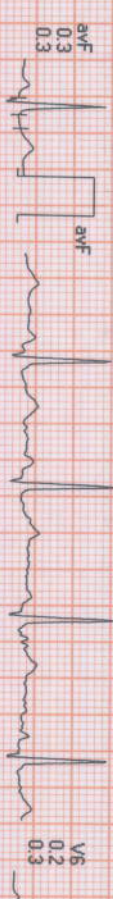
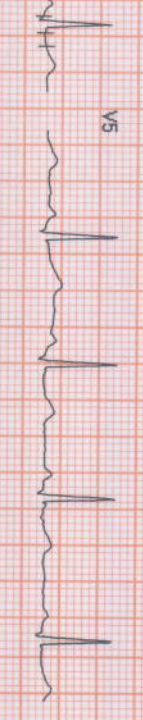
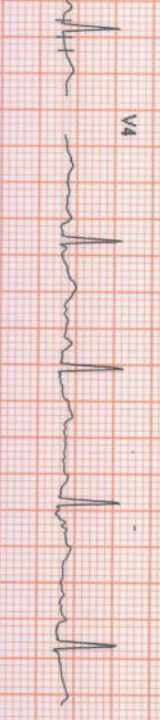
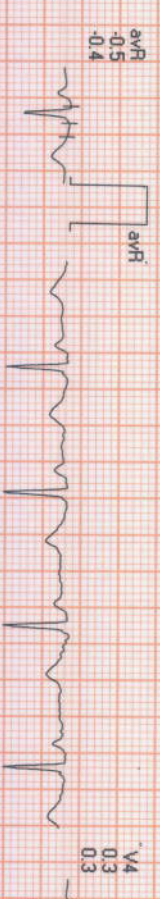
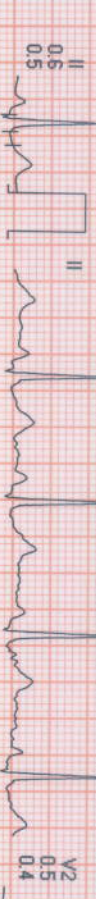
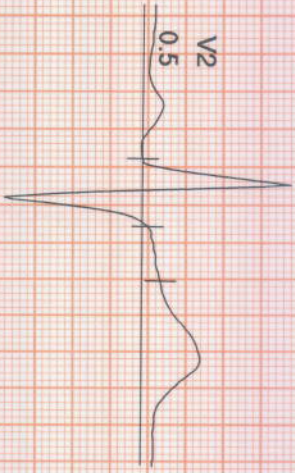
Date: 11 / 03 / 2023 12:58:05 PM

METS: 1.0/ 82 bpm 43% of THR BP: 110/70 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

4X 80 mS Post J

ExTime: 00:00 0.0 mph, 0.0%

25 mm/Sec 1.0 Cm/mV



REMARKS:



620 (2307019297) / SANJANA MISHRA / 28 Yrs / F / 156 Cms / 64 Kg / HR : 82

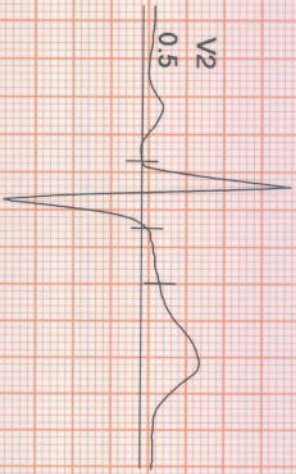
Date: 11 / 03 / 2023 12:58:05 PM

METS: 1.0/ 82 bpm 43% of THR BP: 110/70 mmHg

Rew ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

4X 80 m5 Post J

ExTime: 00:00 0.0 mph, 0.0%
25 mm/Sec 1.0 Cm/mV



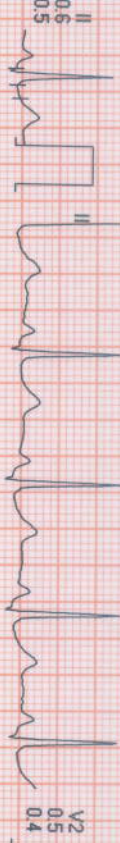
I
STL 0.5
STS 0.3



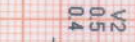
V1
0.0
-0.1



II
0.6
0.5



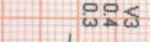
V2
0.5
0.4



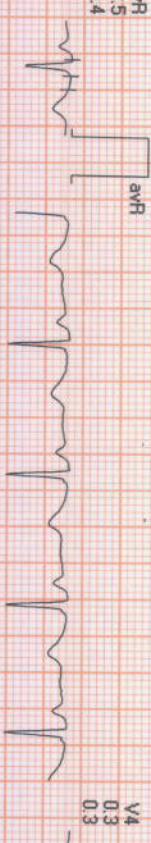
III
0.1
0.1



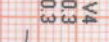
V3
0.4
0.3



aVR
-0.5
-0.4



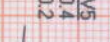
V4
0.3
0.3



aVL
0.2
0.1



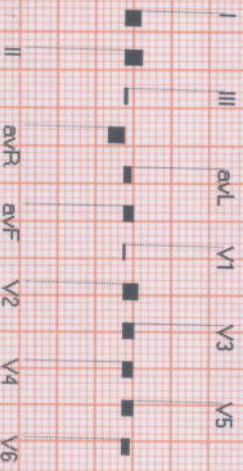
V5
0.4
0.2



aVF
0.3
0.3



V6
0.2
0.3



REMARKS:



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

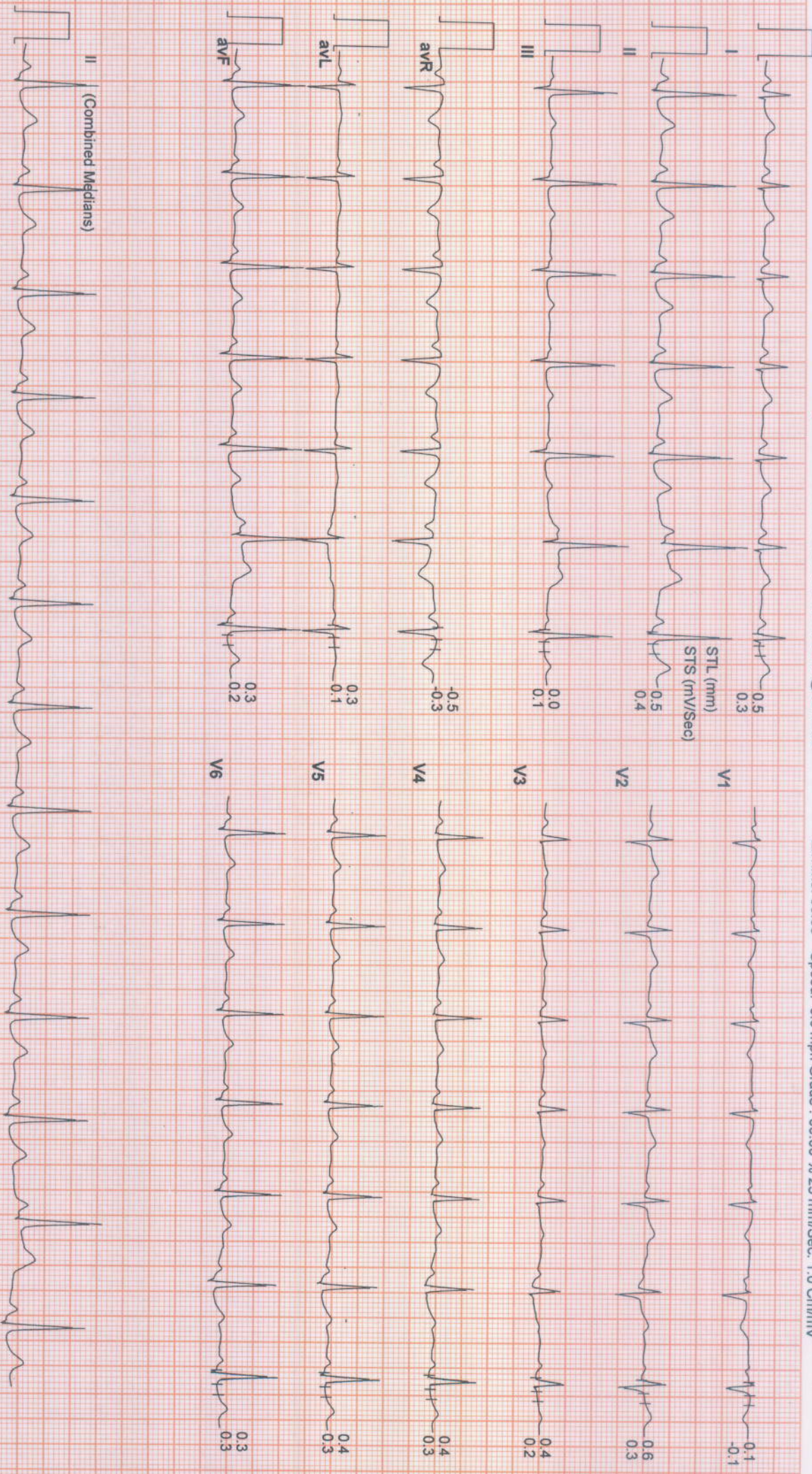
620 / SANJANA MISHRA / 28 Yrs / Female / 156 Cm / 64 Kg

6X2 Combine Medians + 1 Rhythm



Date: 11 / 03 / 2023 12:58:05 PM METs : 1.0 HR : 80 Target HR : 42% of 192 BP : 110/70 Post J @80mSec

ExTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



II (Combined Medians)



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

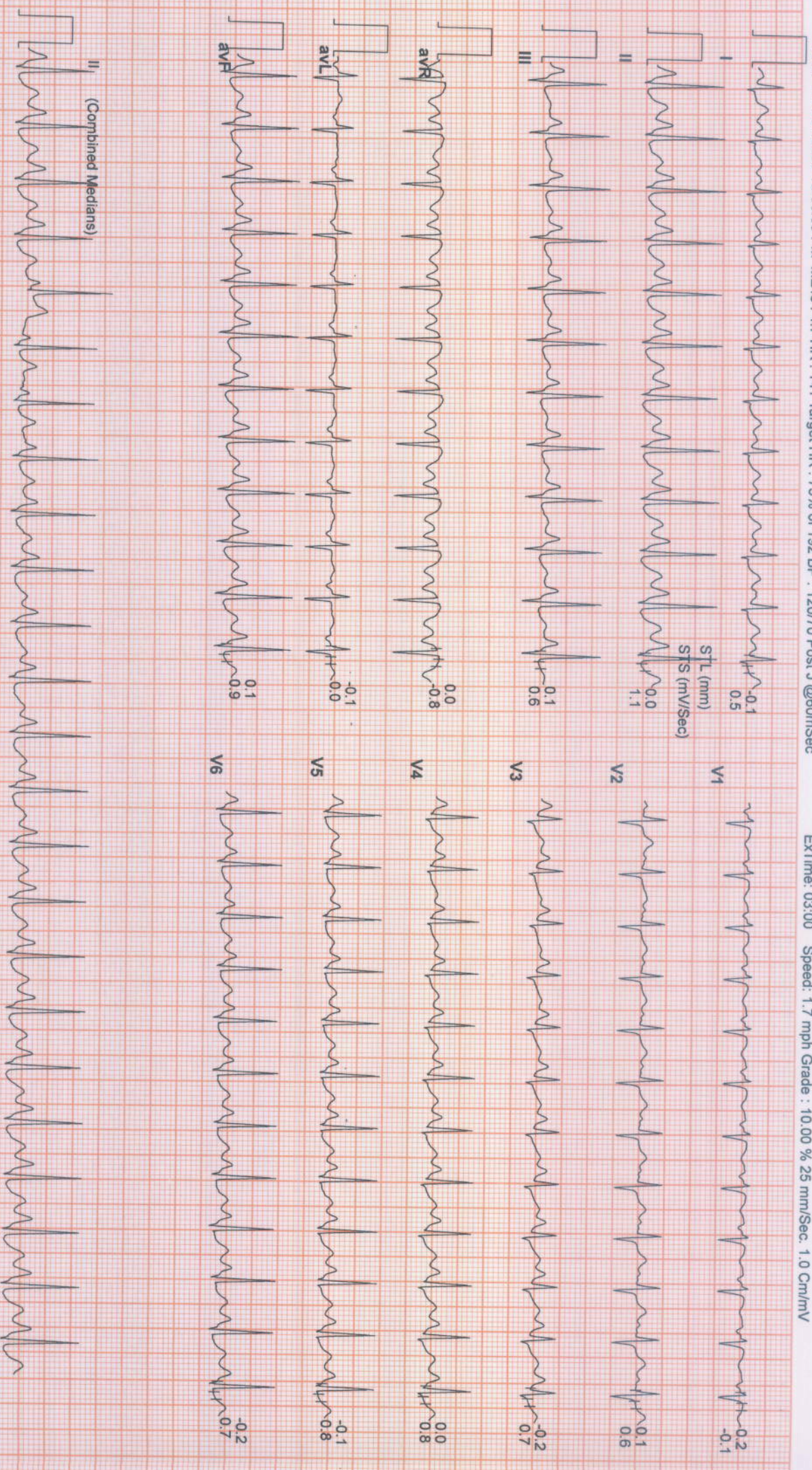
620 / SANJANA MISHRA / 28 Yrs / Female / 156 Cm / 64 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE : Stage 1 (03:00)



Date: 11 / 03 / 2023 12:58:05 PM METs : 4.7 HR : 141 Target HR : 73% of 192 BP : 120/70 Post J @60mSec

ExTime: 03:00 Speed: 1.7 mph Grade : 10.00 % 25 mm/Sec. 1.0 Cm/mV



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

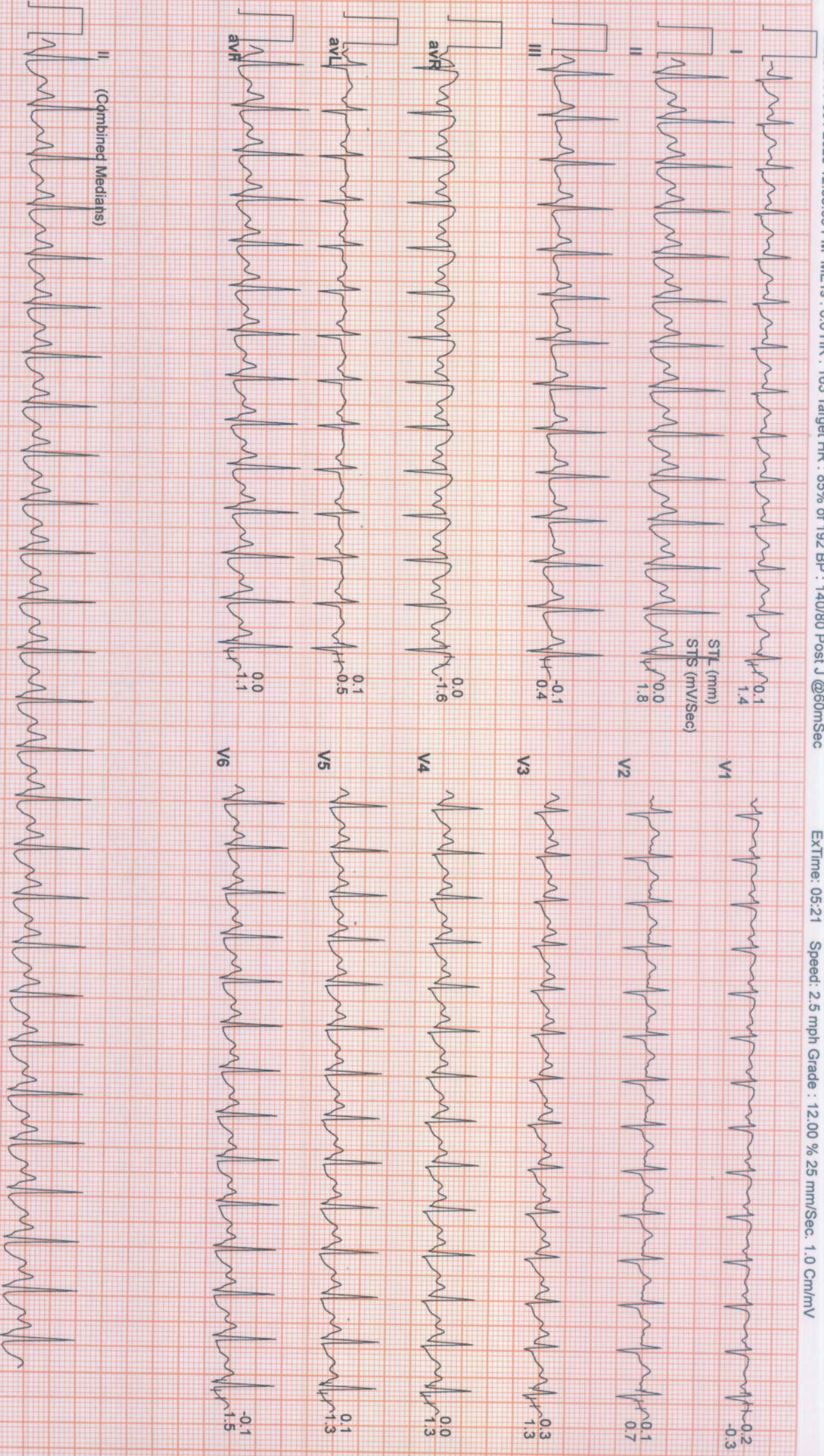
620 / SANJANA MISHRA / 28 Yrs / Female / 156 Cm / 64 Kg

6X2 Combine Medians + 1 Rhythm
PeakEX



Date: 11 / 03 / 2023 12:58:05 PM METs : 6.6 HR : 163 Target HR : 85% of 192 BP : 140/80 Post J @60mSec

ExtTime: 05:21 Speed: 2.5 mph Grade : 12.00 % 25 mm/Sec. 1.0 Cm/mV



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

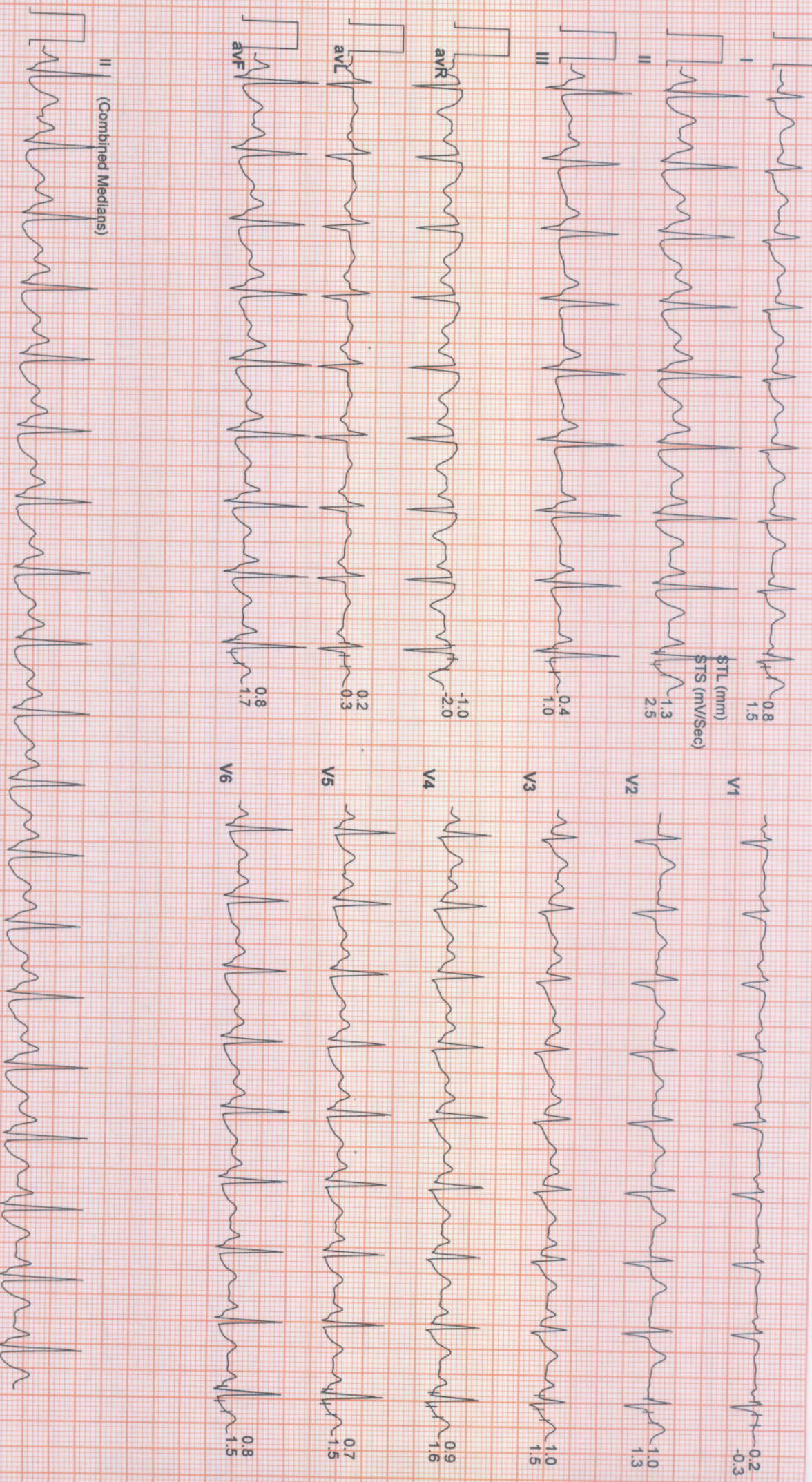
620 / SANJANA MISHRA / 28 Yrs / Female / 156 Cm / 64 Kg

6X2 Combine Medians + 1 Rhythm
Recovery : (01:00)



Date: 11 / 03 / 2023 12:58:05 PM METs : 1.0 HR : 113 Target HR : 59% of 192 BP : 140/80 Post J @80mSec

ExTime: 05:21 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



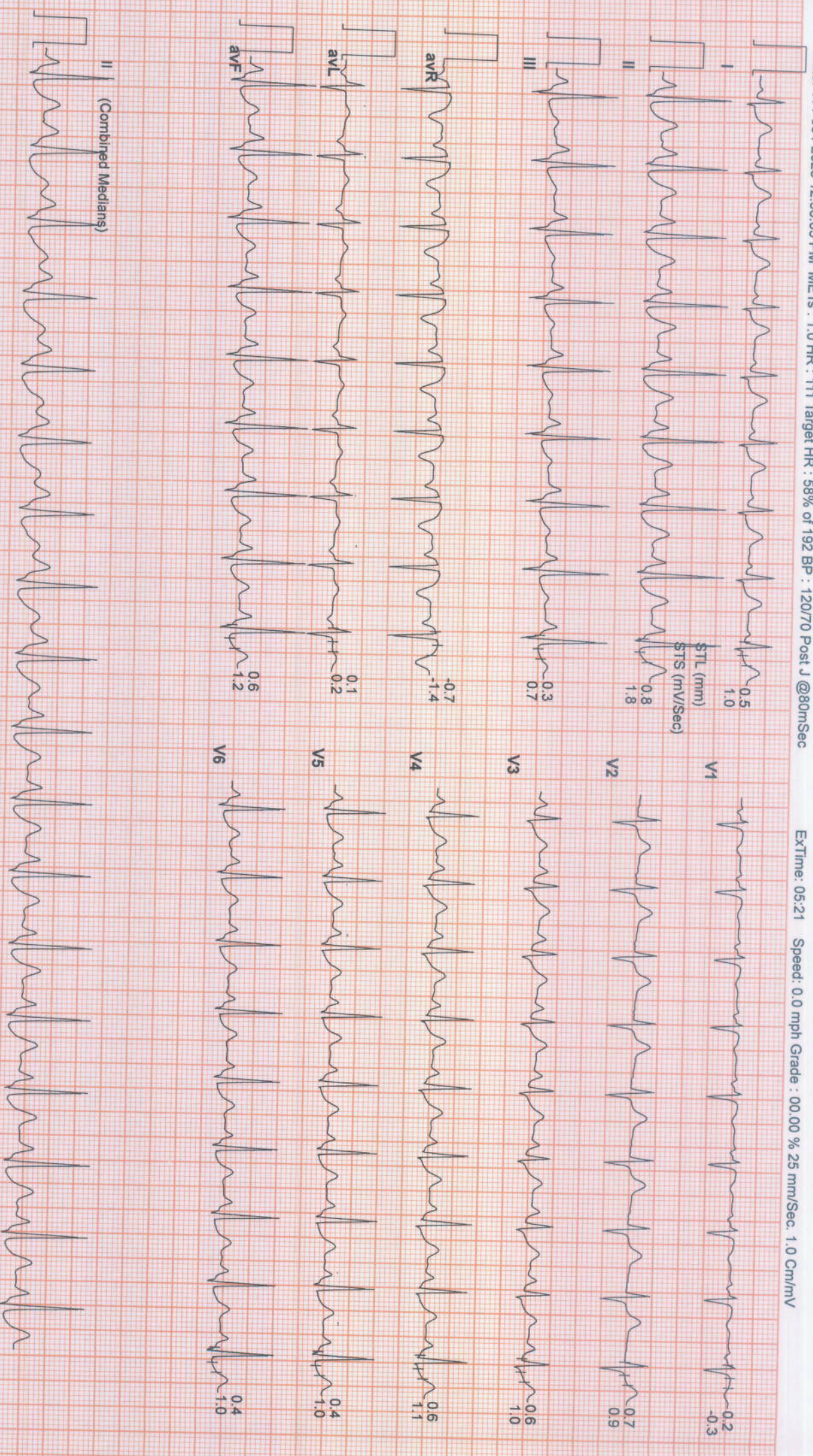
SUBURBAN DIAGNOSTICS (THANE GB ROAD)

620 / SANJANA MISHRA / 28 Yrs / Female / 156 Cm / 64 Kg

Date: 11 / 03 / 2023 12:58:05 PM METs : 1.0 HR : 111 Target HR : 58% of 192 BP : 120/70 Post J @80mSec

6X2 Combine Medians + 1 Rhythm Recovery : (02:00)

ExTime: 05:21 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec: 1.0 Cm/mV



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

620 / SANJANA MISHRA / 28 Yrs / Female / 156 Cm / 64 Kg

Date: 11 / 03 / 2023 12:58:05 PM METs : 1.0 HR : 113 Target HR : 59% of 192 BP : 120/70 Post J @80mSec

6X2 Combine Medians + 1 Rhythm

Recovery : (02:25)

ExTime: 05:21 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mv

