

PHYSICAL EXAMINATION REPORT

Patient Name	Soniy a Banath	Sex/Age	F/25
Date	4/11/23	Location	Thane

History and Complaints

C/O - Irregular Menses since 2 1/2 yrs.

EXAMINATION FINDINGS:

Height (cms):	158	Temp (0c):	Ⓜ
Weight (kg):	73	Skin:	NAD
Blood Pressure	140/90	Nails:	
Pulse	83/min	Lymph Node:	

Systems :

Cardiovascular:

Respiratory:

Genitourinary:

GI System:

CNS:

NAD

Impression:

↑ ESR , ↑ HbA1c
↑ Alk. Phosph.
High Trig's ↓ HDL
OSG - Polycystic changes.

Advice:

- Low Fat, Low sugar Diet
- Reg. Exercise
- Gynaec consultation
Repeat Sugar & Lipid Profile after 3 Months.

- 1) Hypertension:
- 2) IHD
- 3) Arrhythmia
- 4) Diabetes Mellitus
- 5) Tuberculosis
- 6) Asthama
- 7) Pulmonary Disease
- 8) Thyroid/ Endocrine disorders
- 9) Nervous disorders
- 10) GI system
- 11) Genital urinary disorder
- 12) Rheumatic joint diseases or symptoms
- 13) Blood disease or disorder
- 14) Cancer/lump growth/cyst
- 15) Congenital disease
- 16) Surgeries
- 17) Musculoskeletal System

Nil

Irregular Menses.

Nil

2 LSCS
H/O - Disc Prolapse since 4 yrs.

PERSONAL HISTORY:

(Taking physio)

- 1) Alcohol
- 2) Smoking
- 3) Diet
- 4) Medication

NO NO

- Mixed
- Analgesic (S.O.S.)

Dr. Manasee Kulkarni
M.B.B.S.

6/11/23

Date: 4/11/23
 Name: Sonya Baroth
 CID: 2330821924
 Sex / Age: F 25

EYE CHECK UP

Chief complaints: 12 cv

Systemic Diseases: Nil

Past history: Nil

Unaided Vision: 3/6 R, 4/6 L

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
Prakash Kudva
SR. OPTOMETRIST

Authenticity Check



Use a QR Code Scanner Application To Scan The Code

CID : 2330821924
Name : MRS.SONIYA BANOTH
Age / Gender : 25 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 04-Nov-2023 / 09:43
Reported : 04-Nov-2023 / 12:14

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

CBC (Complete Blood Count), Blood

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
<u>RBC PARAMETERS</u>			
Haemoglobin	12.0	12.0-15.0 g/dL	Spectrophotometric
RBC	4.27	3.8-4.8 mil/cmm	Elect. Impedance
PCV	36.4	36-46 %	Measured
MCV	85.4	80-100 fl	Calculated
MCH	28.1	27-32 pg	Calculated
MCHC	32.9	31.5-34.5 g/dL	Calculated
RDW	14.1	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	6750	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	44.0	20-40 %	
Absolute Lymphocytes	2970.0	1000-3000 /cmm	Calculated
Monocytes	6.4	2-10 %	
Absolute Monocytes	432.0	200-1000 /cmm	Calculated
Neutrophils	48.0	40-80 %	
Absolute Neutrophils	3240.0	2000-7000 /cmm	Calculated
Eosinophils	1.6	1-6 %	
Absolute Eosinophils	108.0	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	256000	150000-400000 /cmm	Elect. Impedance
MPV	8.3	6-11 fl	Calculated
PDW	10.3	11-18 %	Calculated

RBC MORPHOLOGY

Hypochromia -
Microcytosis -

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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 55 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

CID : 2330821924
Name : MRS. SONIYA BANOTH
Age / Gender : 25 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)



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Collected : 04-Nov-2023 / 09:43
Reported : 04-Nov-2023 / 12:19

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	99.6	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: > / = 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	117.9	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: > / = 200 mg/dl	Hexokinase
BILIRUBIN (TOTAL), Serum	0.63	0.1-1.2 mg/dl	Diazo
BILIRUBIN (DIRECT), Serum	0.19	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.44	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.0	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.2	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.8	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.5	1 - 2	Calculated
SGOT (AST), Serum	20.0	5-32 U/L	IFCC without pyridoxal phosphate activation
SGPT (ALT), Serum	10.1	5-33 U/L	IFCC without pyridoxal phosphate activation
GAMMA GT, Serum	14.4	3-40 U/L	IFCC
ALKALINE PHOSPHATASE, Serum	136.7	35-105 U/L	PNPP
BLOOD UREA, Serum	13.5	12.8-42.8 mg/dl	Urease & GLDH
BUN, Serum	6.3	6-20 mg/dl	Calculated
CREATININE, Serum	0.58	0.51-0.95 mg/dl	Enzymatic

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Age / Gender : 25 Years / Female
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Reg. Location : G B Road, Thane West (Main Centre)

Collected : 04-Nov-2023 / 12:53
Reported : 04-Nov-2023 / 14:40

eGFR, Serum	129	(ml/min/1.73sqm)	Calculated
		Normal or High: Above 90	
		Mild decrease: 60-89	
		Mild to moderate decrease: 45-59	
		Moderate to severe decrease: 30-44	
		Severe decrease: 15-29	
		Kidney failure: <15	

Note: eGFR estimation is calculated using 2021 CKD-EPI GFR equation w.e.f 16-08-2023

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 ***



J. Mujawar

Dr. IMRAN MUJAWAR
MD (Path)
Pathologist

CID : 2330821924
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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	5.9	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: > / = 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	122.6	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 ***

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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
URINE EXAMINATION REPORT

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	Acidic (6.5)	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.025	1.010-1.030	Chemical Indicator
Transparency	Slight hazy	Clear	-
Volume (ml)	10	-	-
CHEMICAL EXAMINATION			
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
MICROSCOPIC EXAMINATION			
Leukocytes(Pus cells)/hpf	1-2	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	8-10		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	5-6	Less than 20/hpf	
Others	-		

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 G B Road Lab, Thane West
*** End Of Report ***



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Collected : 04-Nov-2023 / 09:43
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AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
BLOOD GROUPING & Rh TYPING

PARAMETER	RESULTS
ABO GROUP	B
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 isagglutinins are fully developed at 2 to 4 years of age. It 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

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



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Collected : 04-Nov-2023 / 09:43
Reported : 04-Nov-2023 / 14:40

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
LIPID PROFILE

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	145.4	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	255.3	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	29.7	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	115.7	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	88.9	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	26.8	< / = 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	4.9	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	3.0	0-3.5 Ratio	Calculated

Kindly correlate clinically.
Note : LDL test is performed by direct measurement.

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



J. Mujawar

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Age / Gender : 25 Years / Female
Consulting Dr. : -
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 04-Nov-2023 / 09:43
Reported : 04-Nov-2023 / 11:28

AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE
THYROID FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Free T3, Serum	6.1	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	16.4	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	1.25	0.35-5.5 microu/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0	ECLIA

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Collected : 04-Nov-2023 / 09:43
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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 upto 15 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 transiently 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 200%. 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, Test Book of Clinical Chemistry and Molecular Biology -5th Edition
4. Biological Variation: From principles to Practice-Callum G Fraser (AACCC Press)

*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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Age / Sex : 25 Years/Female
Ref. Dr :
Reg. Location : G B Road, Thane West Main Centre
Reg. Date : 04-Nov-2023
Reported : 04-Nov-2023 / 14:00

X-RAY CHEST PA VIEW

Rotation +

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-----

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

Click here to view images <http://3.111.232.119/iRISViewer/NeoradViewer?AccessionNo=2023110409391251>

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Reg. Location : G B Road, Thane West Main Centre
Reg. Date : 04-Nov-2023
Reported : 04-Nov-2023 / 15:12

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 10.2 x 4.4 cm. Left kidney measures 9.6 x 6.0 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 7.4 x 3.0 x 4.1 cm. Uterine myometrium shows homogenous echotexture. Endometrial echo is in midline and measures 4.1 mm. Cervix appears normal.

OVARIES:

Both ovaries are bulky in size and show central echogenic stroma with multiple peripherally arranged small follicles.

The right ovary measures 3.7 x 2.0 x 3.4 cm and ovarian volume is 13.5 cc.

The left ovary measures 3.8 x 2.1 x 3.3 cm and ovarian volume is 14.3 cc.

No free fluid or significant lymphadenopathy is seen.

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Ref. Dr :
Reg. Location : G B Road, Thane West Main Centre
Reg. Date : 04-Nov-2023
Reported : 04-Nov-2023 / 15:12

IMPRESSION:

BILATERAL BULKY OVARIES WITH POLYCYSTIC CHANGES.SUGGEST SR.FSH,SR LH,SR PROLACTIN CORRELATION.

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.

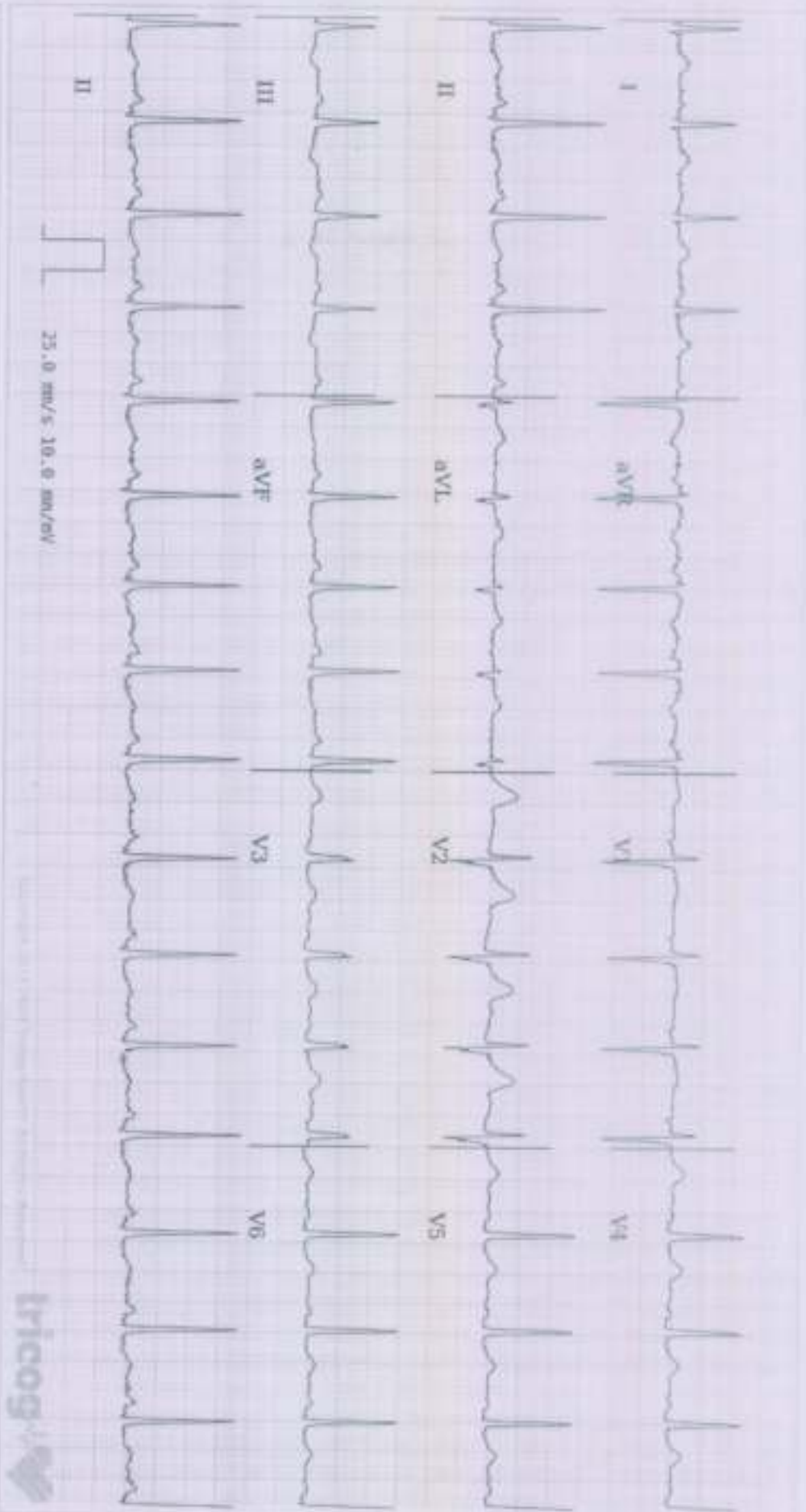
-----End of Report-----

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/NeoralViewer?AccessionNo=2023110409391241>

Patient Name: **SONIYA BANOTH**
Patient ID: **2330821924**

SUBURBAN DIAGNOSTICS - G B ROAD, THANE WEST
Date and Time: **4th Nov 23 11:30 AM**



Age: **25** years
Sex: **Female**

Heart Rate: **101bpm**

Patient Vitals

BP: **140/90 mmHg**
Weight: **77 kg**
Height: **158 cm**
Pulse: **NA**
SpO2: **NA**
Resp: **NA**
Others: **NA**

Measurements

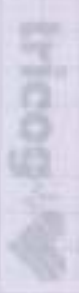
QRSD: **82ms**
QT: **354ms**
QTc: **459ms**
PR: **110ms**
P-R-T: **64° 61° 9°**

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

REPORTED BY

S

DR SONIA BANOTH
Senior Card Physician
MD Registrar
MBBS



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SUBURBAN DIAGNOSTICS (THANE GB ROAD)

Report



Email:

154 / 2330821924) / SONIYA BANOTH / 25 Yrs / F / 158 Cms / 77 Kg

Date: 04 / 11 / 2023 01:23:15 PM

Stage	Time	Duration	Speed(mph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:14	0:14	00.0	00.0	01.0	112	57 %	120/80	134	00	
Standing	00:25	0:11	00.0	00.0	01.0	110	56 %	120/80	132	00	
HV	00:34	0:09	00.0	00.0	01.0	101	52 %	120/80	121	00	
ExStart	00:43	0:09	00.0	00.0	01.0	106	54 %	120/80	127	00	
BRUCE Stage 1	03:43	3:00	01.7	10.0	04.7	144	74 %	130/80	187	00	
PeakEx	05:13	1:30	02.5	12.0	05.9	165	85 %	150/80	247	00	
Recovery	06:13	1:00	00.0	00.0	01.0	129	66 %	150/80	193	00	
Recovery	07:13	2:00	00.0	00.0	01.0	109	56 %	150/80	163	00	
Recovery	08:13	3:00	00.0	00.0	01.0	113	58 %	130/80	146	00	
Recovery	08:16				00.0	000	0 %	124/50	000	00	

FINDINGS :

Exercise Time : 04:30
 Initial HR (ExStrt) : 106 bpm 54% of Target 195
 Initial BP (ExStrt) : 120/80 (mm/Hg)
 Max Workload Attained : 5.9 Fair response to induced stress
 Max ST Dep Lead & Avg ST Value : III & -0.9 mm in Recovery
 Test End Reasons : : Heart Rate Achieved

Max HR Attained 165 bpm 85% of Target 195
 Max BP Attained 150/80 (mm/Hg)

Dr. SHAILAJA PILLAI

M.D. (GEN.MED)
 R.NO. 49972

Doctor : DR. SHAILAJA PILLAI




EMail: soniya_banoth@suburbandiagnostics.com / 25 Yrs / F / 158 Cms / 77 Kg Date: 04 / 11 / 2023 01:23:15 PM

REPORT :

Sample Name: Stress Test Graded Exercise Treadmill
PROCEDURE DONE: Graded exercise treadmill stress test.
STRESS ECG RESULTS: The initial HR was recorded as 110.0 bpm, and the maximum predicted Target Heart Rate 195.0. The BP increased at the time of generating report as 150/100.0 mmHg. The Max Dep went upto 0.3. 0.0 Ectopic Beats were observed during the Test.
The Test was completed because of . Heart Rate Achieved.

CONCLUSIONS:

1. Stress test is negative for ischaemia.
2. No significant ST T changes seen.
3. HR and Blood pressure response to exercise is normal.


DR. SHAILAJA PILLAI
M.D. (GEN.MED)
R.NO. 49972

Doctor : DR. SHAILAJA PILLAI

SUBURBAN DIAGNOSTICS (THANE GB ROAD)

SUPINE (00:01)

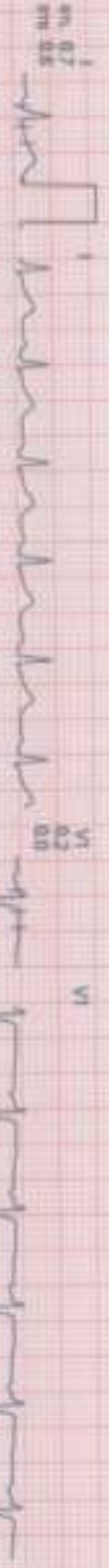
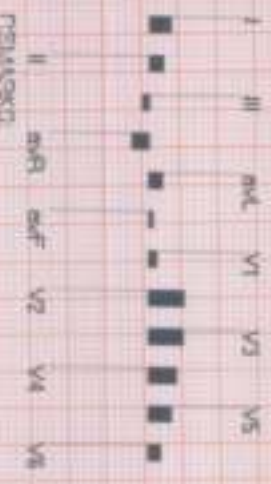
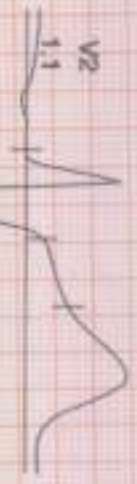


154 (2330821924) / SONIYA BANTH / 25 Yrs / F / 158 Cms / 77 Kg / HR : 112

Date: 04/11/2023 01:23:15 PM METS: 1.0/112 bpm 57% of THPR BP: 120/80 mmHg Flow ECG BLC On Hold On/Off 0.05 Hz/LF 35 Hz

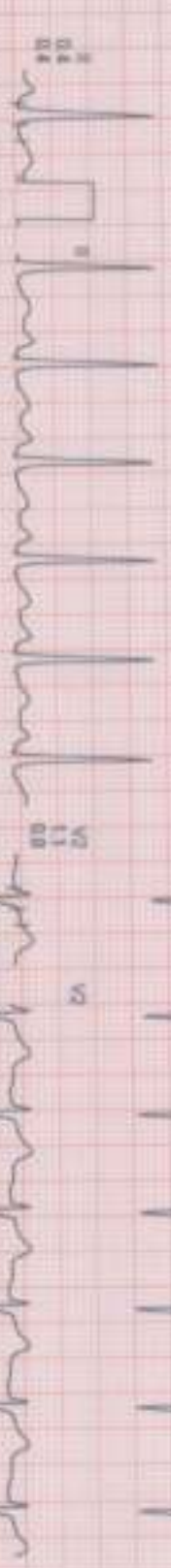
40X 60 ms/Pul J

ExTime: 00:50 0.0 mps 0.0% 20 mm/5 sec 1.00 Cal/mV



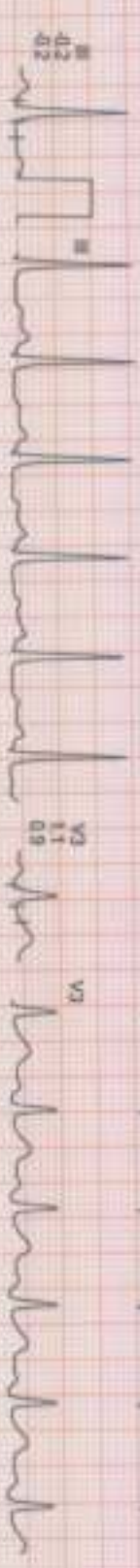
V1 0.7
0.2
0.8

V1 0.2
0.3
0.0



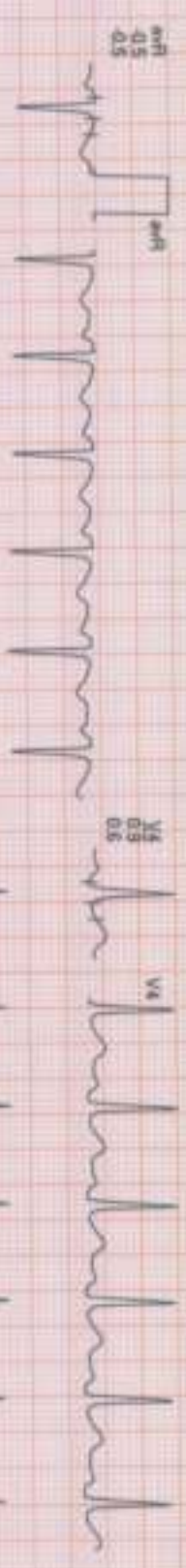
V2 0.6
0.4
0.4

V2 1.1
1.1
0.0



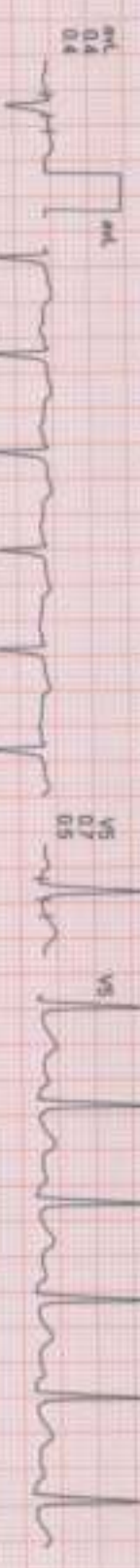
V3 1.2
0.2

V3 1.1
1.1
0.9



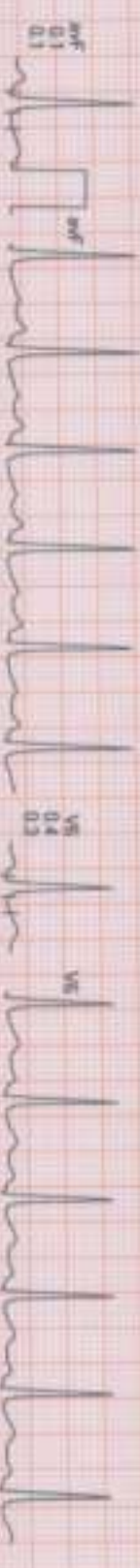
V4 0.5
0.5
0.5

V4 0.6
0.6
0.6



V5 0.4
0.4
0.4

V5 0.7
0.5
0.5



V6 0.1
0.1
0.1

V6 0.4
0.4
0.3

SUBURBAN DIAGNOSTICS (THANE GB ROAD)

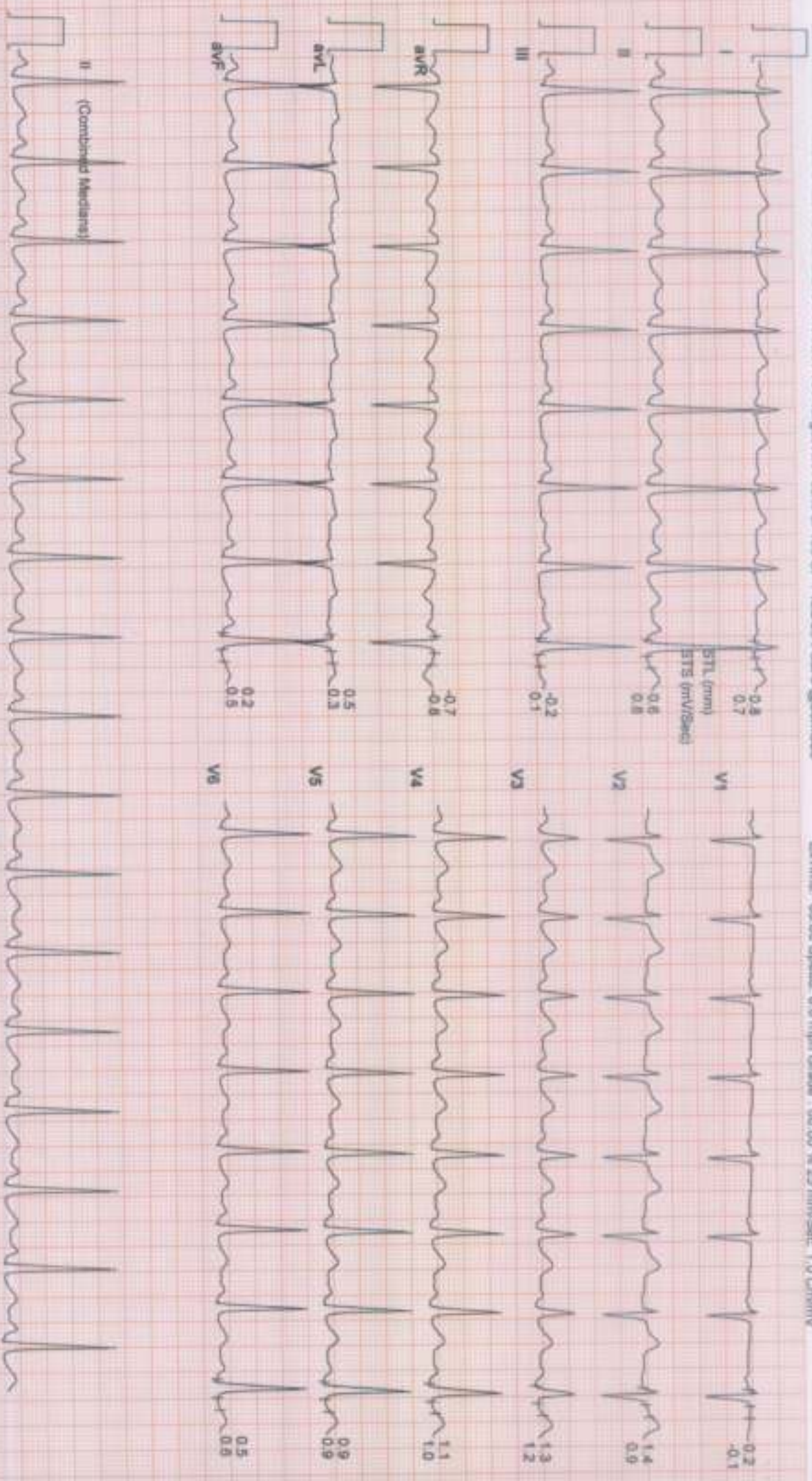
154 / SONIYA BANOTH / 25 Yrs / Female / 158 Cm / 77 Kg

6X2 Combine Medians + 1 Rhythm
HV (00:00)



Date: 04 / 11 / 2023 01:23:15 PM METs : 1.0 HR : 101 Target HR : 52% of 195 BP : 120/80 Post J @sonicac

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



SUBURBAN DIAGNOSTICS (THANE GB ROAD)

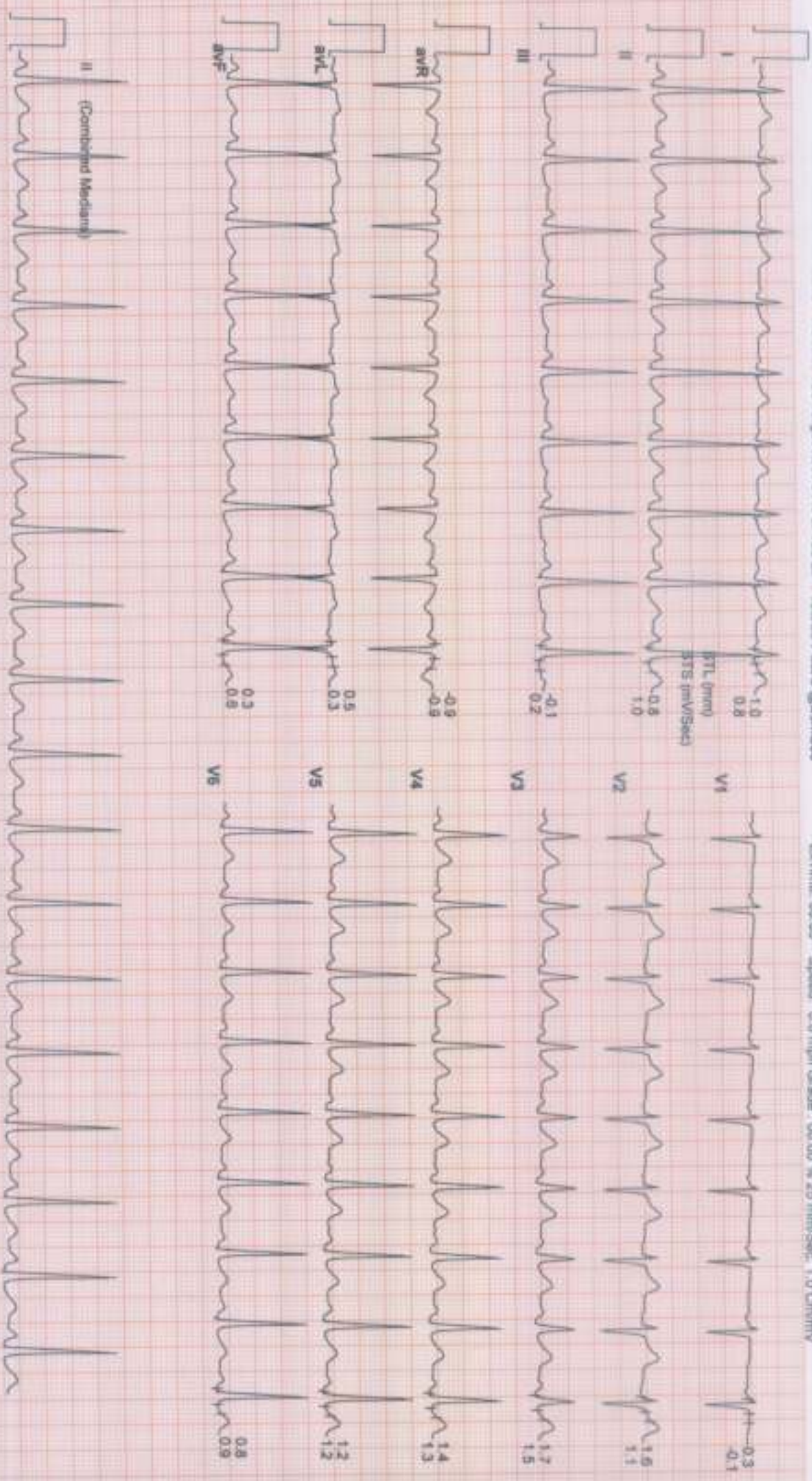
154 / SONIYA BANOTH / 25 Yrs / Female / 158 Cm / 77 Kg

6X2 Combine Medians + 1 Rhythm
ExStir



Date: 04 / 11 / 2023 01:23:15 PM METs : 1.0 HR : 106 Target HR : 84% of 195 BP : 120/80 Post J @J@nSec

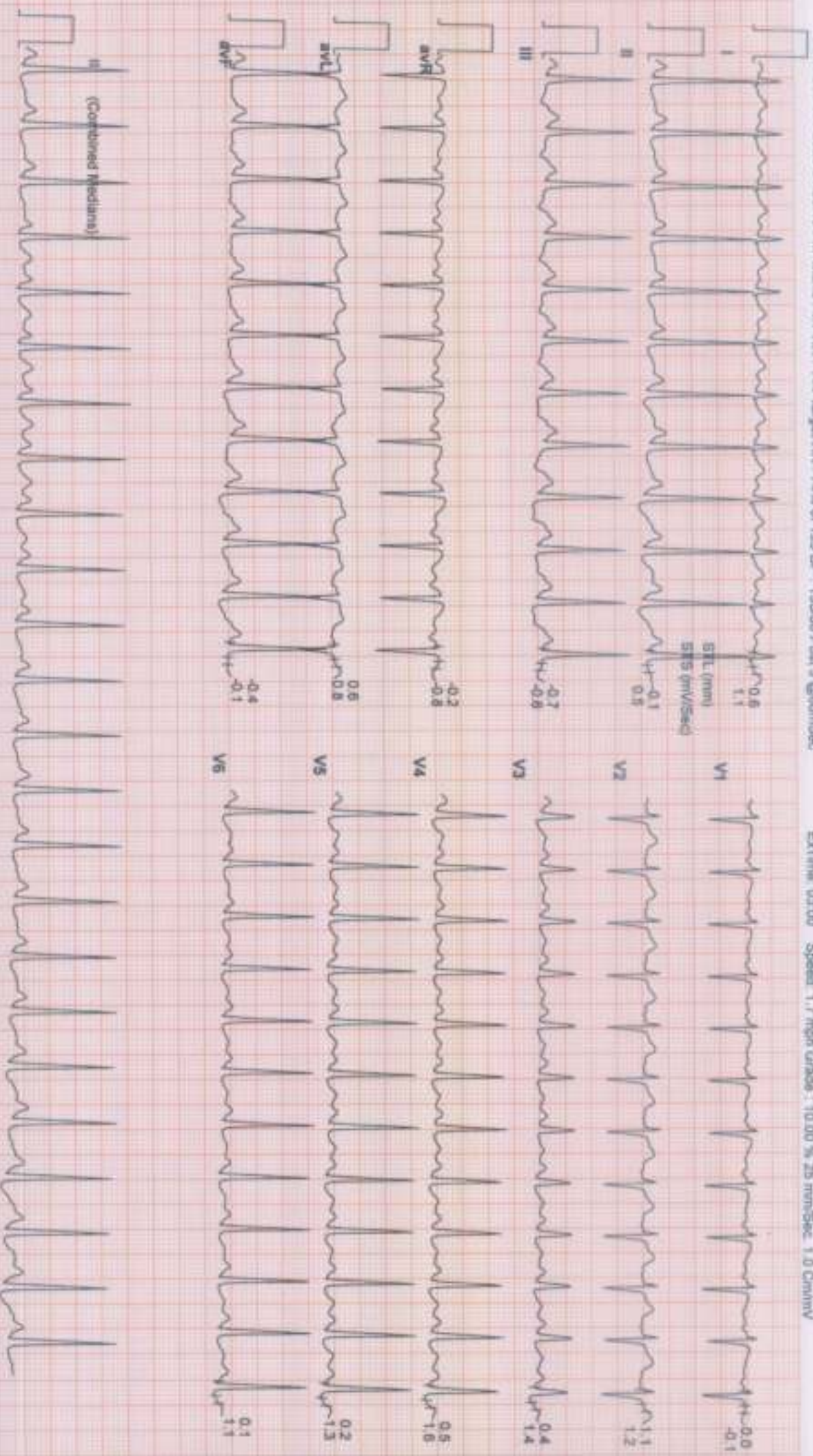
ExTime: 00:00 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec, 1.0 Cm/mV





Date: 04 / 11 / 2023 01:23:15 PM METs : 4.7 HR : 144 Target HR : 74% of 195 BP : 130/80 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)

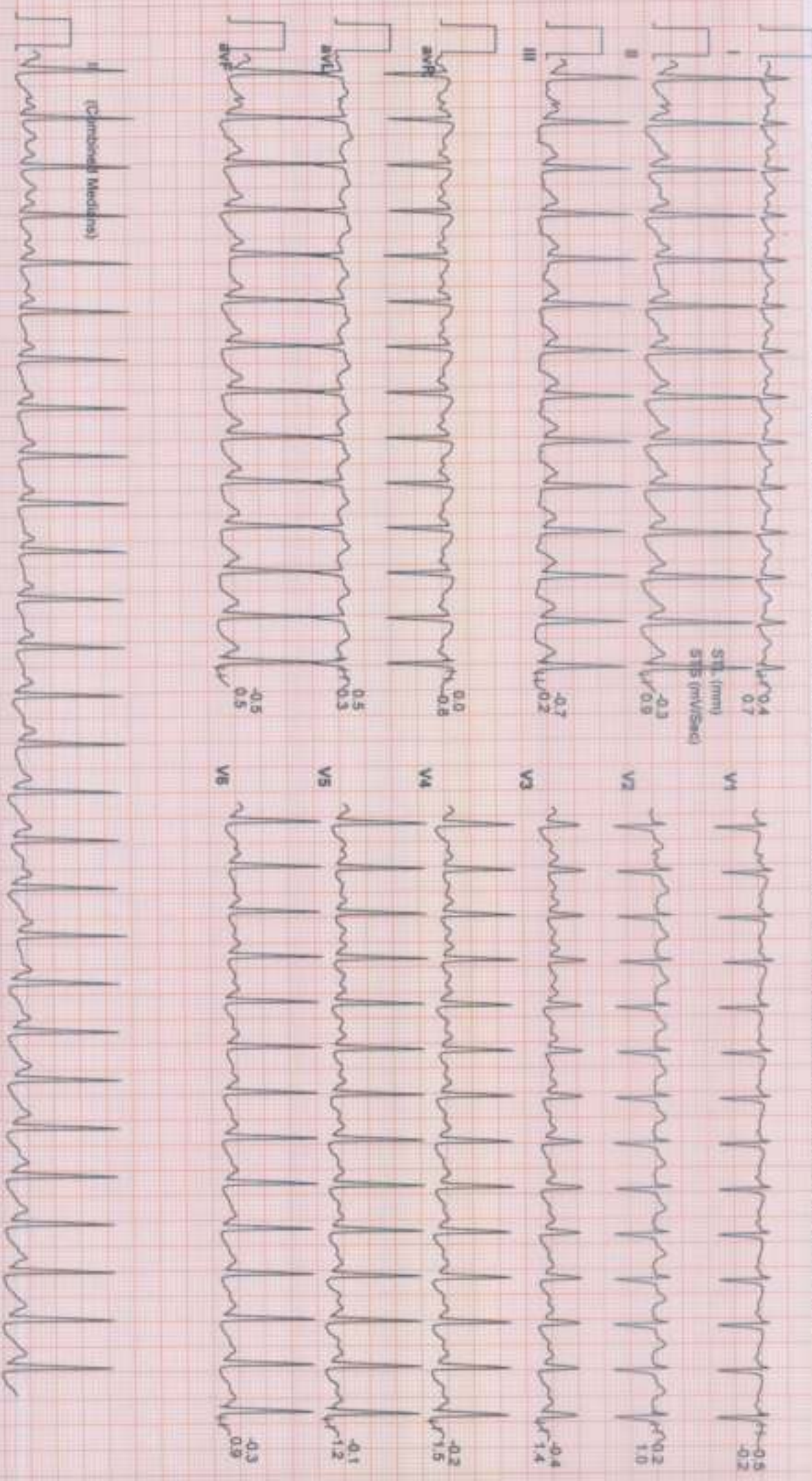
154 / SONIYA BANOTH / 25 Yrs / Female / 158 Cm / 77 Kg

6X2 Combine Medians + 1 Rhythm
PeakEx



Date: 04 / 11 / 2023 01:23:15 PM METs : 5.9 HR : 166 Target HR : 45% of 195 BP : 150/100 Post J @60mSec

ExTime: 04:30 Speed: 2.5 mm/Grade : 12.00 % 25 mm/Sec 1.0 Cm/mV

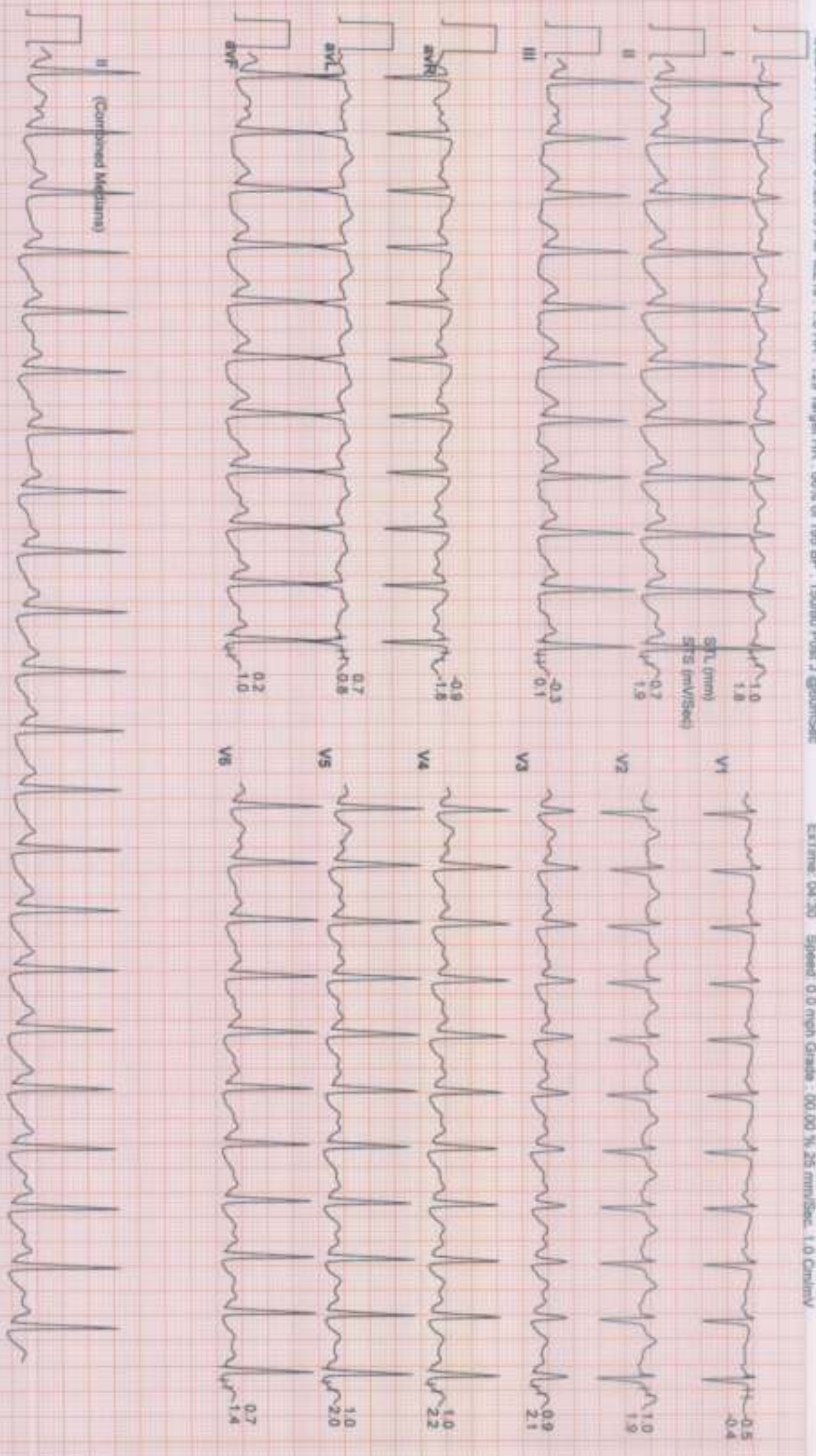


(Combine Medians)



Date: 04 / 11 / 2023 01:23:15 PM METN : 1.0 HR : 129 Target HR : 66% of 196 BP : 150/80 Post J @50mSec

ExTime: 04:30 Speed: 0.0 mph Grade : 00:00 % 25 mm/Sec 1.0 Cm/Div

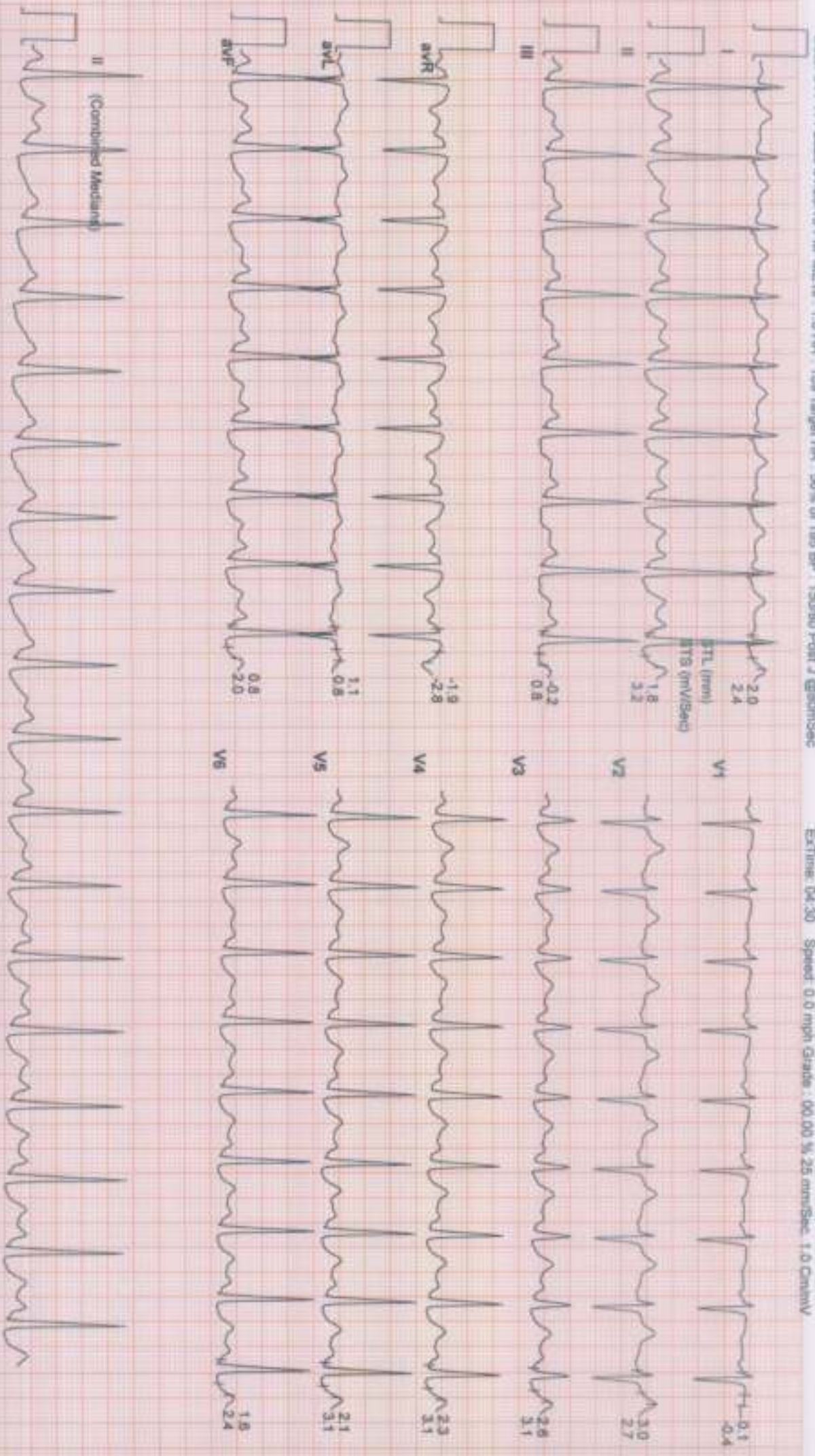


II (Combined Medians)



Date: 04 / 11 / 2023 01:23:15 PM METN : 1.0 mV : 109 Target HR : 50% of 195 BP : 150/80 Post J @30mSec

ExTime: 04:30 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec 1.0 Cm/mV



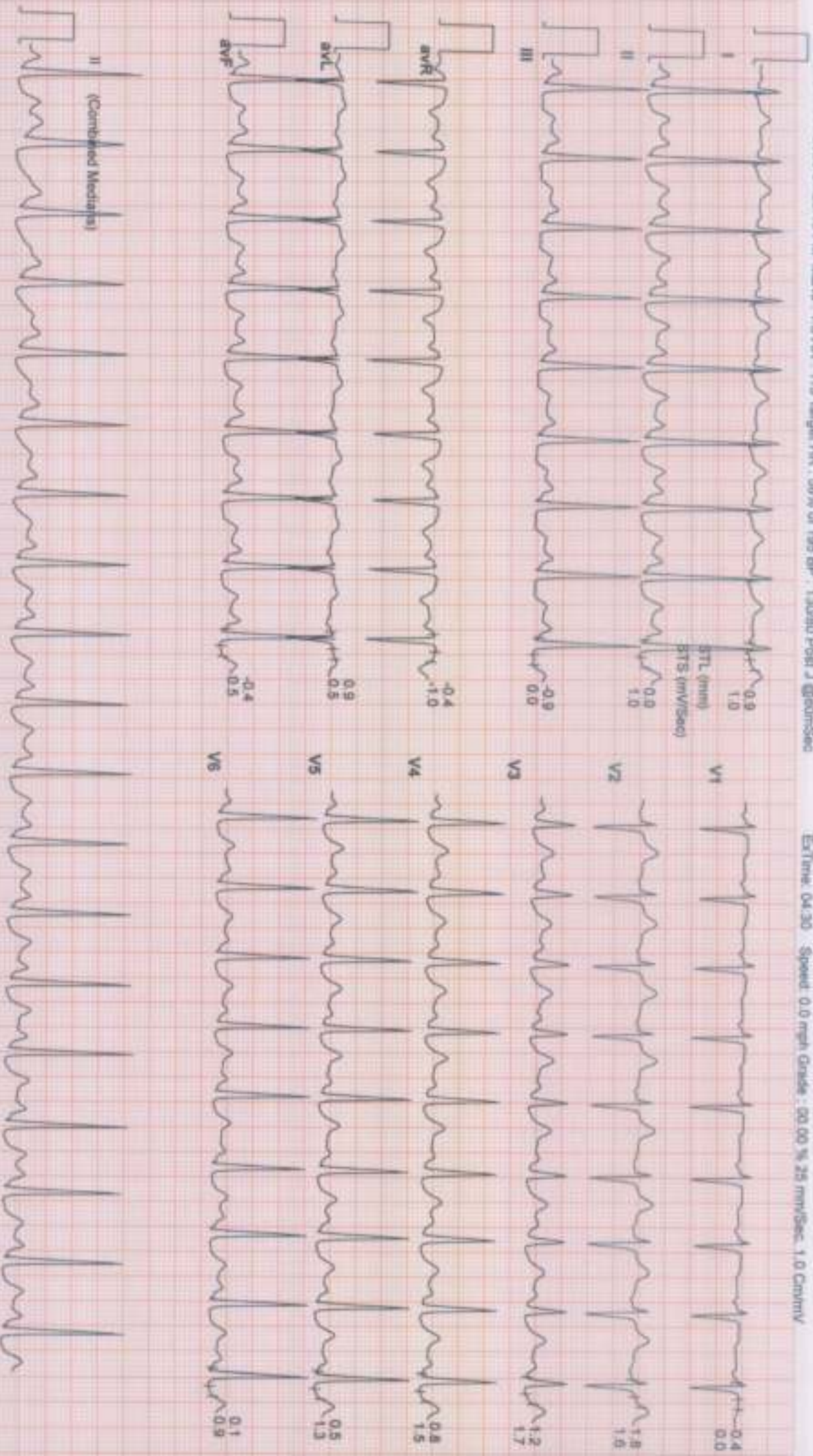
SUBURBAN DIAGNOSTICS (THANE GB ROAD)

154 / SONIYA BANOTH / 25 Yrs / Female / 158 Cm / 77 Kg

Date: 04 / 11 / 2023 01:23:15 PM METR : 1.0 HR : 113 Target HR : 96% of 195 BP : 130/90 Post J @80mSec

ExTime: 04:30 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec 1.0 Cm/mV

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





Date: 04 / 11 / 2023 01:23:15 PM METs : 1.0 HR : 115 Target HR : 56% of 195 BP : 130/80 Pres J @OmniSec

ExTime: 04:30 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec 1.0 Cm/IV

