



TEST REPORT

Reg. No : 2304100755
Name : Umesh Kumar Mali
Age/Sex : 32 Years / Male
Ref. By :
Client : MEDIWHEEL WELLNESS

Reg. Date : 08-Apr-2023
Collected On : 08-Apr-2023 11:05
Approved On : 17-Apr-2023 08:01
Printed On : 17-Apr-2023 08:42

<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	<u>Reference Interval</u>
KIDNEY FUNCTION TEST			
UREA <i>(Urease & glutamate dehydrogenase)</i>	30.0	mg/dL	10 - 50
Creatinine <i>(Jaffe method)</i>	0.93	mg/dL	0.5 - 1.4
Uric Acid <i>(Enzymatic colorimetric)</i>	6.9	mg/dL	2.5 - 7.0

----- End Of Report -----



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COMPLETE BLOOD COUNT (CBC)

SPECIMEN: EDTA BLOOD

Hemoglobin	14.2	g/dL	13.0 - 17.0
RBC Count	4.73	million/cmm	4.5 - 5.5
Hematocrit (PCV)	44.2	%	40 - 54
MCH	30.0	Pg	27 - 32
MCV	93.4	fL	83 - 101
MCHC	32.1	%	31.5 - 34.5
RDW	13.2	%	11.5 - 14.5
WBC Count	12200	/cmm	4000 - 11000

DIFFERENTIAL WBC COUNT (Flow cytometry)

Neutrophils (%)	70	%	38 - 70
Lymphocytes (%)	23	%	20 - 40
Monocytes (%)	05	%	2 - 8
Eosinophils (%)	02	%	0 - 6
Basophils (%)	00	%	0 - 2
Neutrophils	8540	/cmm	
Lymphocytes	2806	/cmm	
Monocytes	610	/cmm	
Eosinophils	244	/cmm	
Basophils	0	/cmm	
Platelet Count (Flow cytometry)	214000	/cmm	150000 - 450000
MPV	10.2	fL	7.5 - 11.5

ERYTHROCYTE SEDIMENTATION RATE

ESR (After 1 hour)	08	mm/hr	0 - 14
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Modified Westergren Method

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Parameter

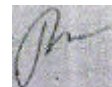
Result

BLOOD GROUP & RH

Specimen: EDTA and Serum; Method: Haemagglutination

ABO : 'A'
Rh (D) : Positive

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Parameter	Result	Unit	Reference Interval
LIPID PROFILE			
Cholesterol <i>(Enzymatic colorimetric)</i>	195.4	mg/dL	Desirable : < 200.0 Borderline High : 200-239 High : > 240.0
Triglyceride <i>(Enzymatic colorimetric)</i>	201.3	mg/dL	Normal : < 150.0 Borderline : 150-199 High : 200-499 Very High : > 500.0
VLDL <i>Calculated</i>	40.26	mg/dL	15 - 35
LDL CHOLESTEROL	111.14	mg/dL	Optimal : < 100.0 Near / above optimal : 100-129 Borderline High : 130-159 High : 160-189 Very High : >190.0
HDL Cholesterol <i>Homogeneous enzymatic colorimetric</i>	44.0	mg/dL	30 - 70
Cholesterol /HDL Ratio <i>Calculated</i>	4.44		0 - 5.0
LDL / HDL RATIO <i>Calculated</i>	2.53		0 - 3.5



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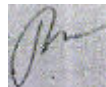
Table header with columns: Parameter, Result, Unit, Reference Interval

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP<?xml:namespace prefix = "o" ns = "urn:schemas-microsoft-com:office:office" />

LDL CHOLESTEROL
CHOLESTEROL
HDL CHOLESTEROL
TRIGLYCERIDES
Optimal<100
Desirable<200
Low<40
Normal<150
Near Optimal 100-129
Border Line 200-239
High >60
Border High 150-199
Borderline 130-159
High >240
-
High 200-499
High 160-189
-
-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
• For LDL Cholesterol level Please consider direct LDL value
Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
• Detail test interpreation available from the lab
• All tests are done according to NCEP guidelines and with FDA approved kits.
• LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
For test performed on specimens received or collected from non-KSHIPRA locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender.
KSHIPRA will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.
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<u>Parameter</u>	<u>Result</u>	<u>Unit</u>	<u>Reference Interval</u>
LIVER FUNCTION TEST WITH GGT			
Total Bilirubin <i>Colorimetric diazo method</i>	0.75	mg/dL	0.10 - 1.0
Conjugated Bilirubin <i>Sulph acid dpl/caff-benz</i>	0.17	mg/dL	0.0 - 0.3
Unconjugated Bilirubin <i>Sulph acid dpl/caff-benz</i>	0.58	mg/dL	0.0 - 1.1
SGOT <i>(Enzymatic)</i>	31.3	U/L	0 - 37
SGPT <i>(Enzymatic)</i>	61.9	U/L	0 - 40
GGT <i>(Enzymatic colorimetric)</i>	33.4	U/L	11 - 49
Alakaline Phosphatase <i>(Colorimetric standardized method)</i>	102.4	U/L	53 - 130
<u>Protien with ratio</u>			
Total Protein <i>(Colorimetric standardized method)</i>	7.2	g/dL	6.5 - 8.7
Albumin <i>(Colorimetric standardized method)</i>	4.3	mg/dL	3.5 - 5.3
Globulin <i>Calculated</i>	2.90	g/dL	2.3 - 3.5
A/G Ratio <i>Calculated</i>	1.48		0.8 - 2.0

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HEMOGLOBIN A1 C ESTIMATION

Specimen: Blood EDTA

Hb A1C <i>Boronate Affinity with Fluorescent Quenching</i>	5.9	% of Total Hb	Poor Control : > 7.0 % Good Control : 6.2-7.0 % Non-diabetic Level : 4.3-6.2 %
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Mean Blood Glucose <i>Calculated</i>	132.74	mg/dL	
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Degree of Glucose Control Normal Range:

Poor Control >7.0% *

Good Control 6.0 - 7.0 %**Non-diabetic level < 6.0 %

* High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy, etc.

* Some danger of hypoglycemic reaction in Type I diabetics.

* Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1c levels in this area.

EXPLANATION :-

*Total haemoglobin A1 c is continuously synthesised in the red blood cell through its 120 days life span. The concentration of HbA1c in the cell reflects the average blood glucose concentration it encounters.

*The level of HbA1c increases proportionately in patients with uncontrolled diabetes. It reflects the average blood glucose concentration over an extended time period and remains unaffected by short-term fluctuations in blood glucose levels.

*The measurement of HbA1c can serve as a convenient test for evaluating the adequacy of diabetic control and in preventing various diabetic complications. Because the average half life of a red blood cell is sixty days, HbA1c has been accepted as a measurement which reflects the mean daily blood glucose concentration, better than fasting blood glucose determination, and the degree of carbohydrate imbalance over the preceding two months.

*It may also provide a better index of control of the diabetic patient without resorting to glucose loading procedures.

HbA1c assay Interferences:

*Erroneous values might be obtained from samples with abnormally elevated quantities of other Haemoglobins as a result of either their simultaneous elution with HbA1c(HbF) or differences in their glycation from that of HbA(HbS)

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PLASMA GLUCOSE

Fasting Blood Sugar (FBS) <i>Hexokinase Method</i>	89.0	mg/dL	70 - 110
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Post Prandial Blood Sugar (PPBS) <i>Hexokinase Method</i>	102.1	mg/dL	70 - 140
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Criteria for the diagnosis of diabetes 1. HbA1c \geq 6.5 *

Or

2. Fasting plasma glucose $>$ 126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.

Or

3. Two hour plasma glucose \geq 200mg/dL during an oral glucose tolerance test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.

Or

4. In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose \geq 200 mg/dL.

*In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing.

American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34;S11.

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THYROID FUNCTION TEST

T3 (Triiodothyronine) <i>Chemiluminescence</i>	1.42	ng/mL	0.87 - 1.81
T4 (Thyroxine) <i>Chemiluminescence</i>	9.64	µg/dL	5.89 - 14.9
TSH (ultra sensitive) <i>Chemiluminescence</i>	0.937	µIU/ml	0.34 - 5.6

SUMMARY The hypophyseal release of TSH (thyrotropic hormone) is the central regulating mechanism for the biological action of thyroid hormones. TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid. **LIMITATION** Presence of autoantibodies may cause unexpected high value of TSH

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URINE ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Quantity : 20 cc
Colour : Pale Yellow
Appearance : Clear

CHEMICAL EXAMINATION (BY REFLECTANCE PHOTOMETRIC METHOD)

pH	6.0	5.0 - 8.0
Sp. Gravity	1.010	1.002 - 1.03
Protein	Nil	
Glucose	Nil	
Ketone Bodies	Nil	
Urine Bile salt and Bile Pigment	Nil	
Urine Bilirubin	Nil	
Nitrite	Nil	
Leucocytes	Nil	
Blood	Nil	

MICROSCOPIC EXAMINATION (MANUAL BY MCIROSCOPY)

Leucocytes (Pus Cells)	Occasional/hpf
Erythrocytes (Red Cells)	Occasional/hpf
Epithelial Cells	1-2/hpf
Amorphous Material	Nil
Casts	Nil
Crystals	Nil
Bacteria	Nil
Monilia	Nil

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STOOL EXAMINATION

Consistency Semi Solid

CHEMICAL EXAMINATION

Occult Blood Negative

Peroxidase Reaction with o-Dianisidine

Reaction Acidic

pH Strip Method

Reducing Substance Absent

Benedict's Method

MICROSCOPIC EXAMINATION

Mucus Nil

Pus Cells 1 - 2/hpf

Red Cells Nil

Epithelial Cells Nil

Vegetable Cells Nil

Trophozoites Nil

Cysts Nil

Ova Nil

Neutral Fat Nil

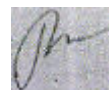
Monilia Nil

Note: Stool occult blood test is highly sensitive to peroxidase like activity of free hemoglobin.

False negative: False negative occult blood test may be observed in case of excess (>250mg/day) Vitamin C intake and in case of occasional unruptured RBCs.

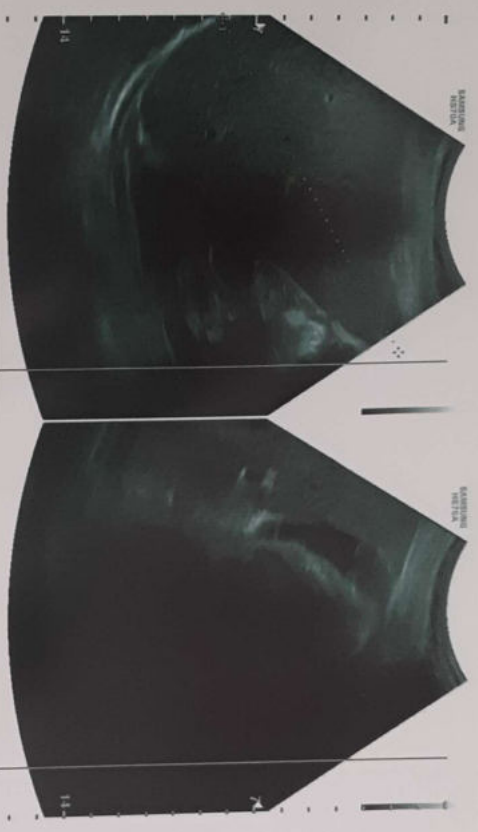
False positive: False positive occult blood test may be observed in stool samples containing vegetable peroxidase (turnips, horseradish, cauliflower, broccoli, cantaloupe, parsnips) and myoglobin from food (meat diet) intake.

----- End Of Report -----



KSHIPRA LABS UDAIPUR

HS70A 08-04-2023-0015
UMESH KUMAR MALI
 2D G65 DR135 F.A8 P90 Frq Gen., 16.0cm
 KSHIPRA LABS UDAIPUR MI 1.4 08-04-2023
 CA1-7A / Abdomen / FR 25Hz Tls 0.1 11:51:21 AM



D1 13.69 cm

D1 9.96 cm
D2 4.91 cm

HS70A 08-04-2023-0015
UMESH KUMAR MALI
 2D G64 DR135 F.A8 P90 Frq Gen., 16.0cm
 KSHIPRA LABS UDAIPUR MI 1.4 08-04-2023
 CA1-7A / Abdomen / FR 25Hz Tls 0.1 11:51:55 AM



D3 9.90 cm
D4 4.79 cm

HS70A 08-04-2023-0015
UMESH KUMAR MALI
 2D G62 DR135 F.A8 P90 Frq Gen., 16.0cm
 KSHIPRA LABS UDAIPUR MI 1.4 08-04-2023
 CA1-7A / Abdomen / FR 25Hz Tls 0.1 11:52:09 AM



D1 9.77 cm

D1 2.63 cm
D2 3.25 cm
D3 2.41 cm
Vol. 11.10 ml

HS70A 08-04-2023-0015
UMESH KUMAR MALI
 2D G54 DR135 F.A8 P90 Frq Gen., 14.0cm
 KSHIPRA LABS UDAIPUR MI 1.4 08-04-2023
 CA1-7A / Abdomen / FR 28Hz Tls 0.1 11:52:29 AM



D1 2.63 cm

Name	: Mr. Umesh kumar	Age	: 32Yrs. / M
Thanks To	: Mediwheel	Date	: 08/04/2023

ULTRASOUND STUDY OF WHOLE ABDOMEN

LIVER

Liver is normal in size, shape & echotexture. No focal mass lesion is seen. Intra hepatic biliary radicles are normal. Portal vein is normal in caliber.

GALL BLADDER

Gall bladder is well distended. The wall thickness appears normal. No evidence of calculus or mass lesion is seen. C.B.D. appears normal.

PANCREAS

Pancreas is normal in size, shape & echotexture. No focal mass lesion is seen.

SPLEEN

Spleen is normal in size, shape & echotexture. No focal mass lesion is seen.

BOTH KIDNEYS

Both kidneys are normal in size, shape & echotexture. Renal parenchyma appears normal. No evidence of hydronephrosis, calculus or cortical scarring is seen in either kidney.

Right kidney measures : 9.9 x 4.9 cms.

Left kidney measures : 9.9 x 4.7 cms.

URINARY BLADDER

Urinary bladder is well distended and appears normal in contour. The wall thickness appears normal.

PROSTATE

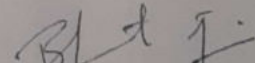
Prostate is normal in size, shape and echotexture. It measures 2.6 x 3.3 x 2.4cms. Volume: 11cc.

No obvious abdominal lymphadenopathy is seen.

No free fluid is seen in peritoneal cavity.

OPINION:

- No significant abnormality is seen.


- Dr. Bharat Jain

MD (Radio-Diagnosis)
Consultant Radiologist

N.B.: This is only a professional opinion and not the final diagnosis. MRI/CT is subject to variations due to technical limitations, hence correlation with clinical findings and other investigations should be carried out to know the true nature of illness

2-B, Ground Floor, Court Choraha, Main Road Tehsil Ke Samne, Udaipur 313001 (Raj.)

Mob. : 7229961115, 7229970005, 7229901188

(24 x 7 Customer Service) Email : Kshipralabsudaipur@gmail.com



Summary

KSHIPRA SCA & LABS
2B COURT CHOURAHA UDAIPUR
1250/MR umesh kumar mali 32 Yrs/Male 0 Kg/0 Cms
Date: 08-Apr-2023 12:03:01 PM

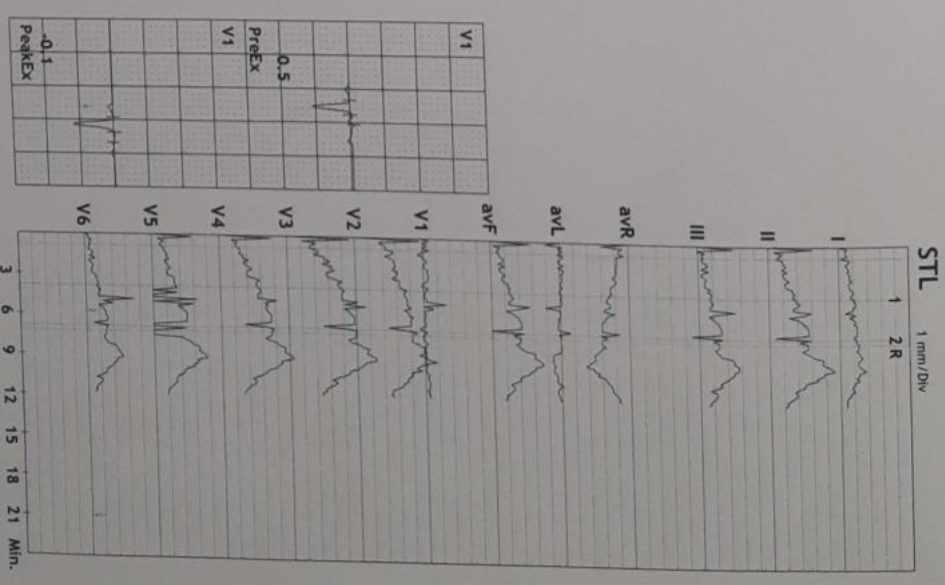
Ref By :
Medication :
Objective :
Protocol : BRUCE
History :

Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (mph)	Grade (%)	METS	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine					1.0	163	120/80	195	-	
Standing					1.0	164	120/80	196	-	
ExStart					1.0	164	120/80	196	-	
Stage 1	3:00	3:01	1.7	10.0	4.7	181	120/80	217	-	
Stage 2	3:00	6:01	2.5	12.0	7.1	186	130/80	241	-	
PeakEx	0:22	6:23	3.4	14.0	7.5	182	130/80	236	-	
Recovery	1:00		0.0	0.0	1.2	179	130/80	232	-	
Recovery	3:00		0.0	0.0	1.0	150	120/80	180	-	
Recovery	4:33		0.0	0.0	1.0	130	120/80	156	-	

Findings :

Exercise Time : 06:23
Max HR Attained : 186 bpm 99% of Max Predictable HR 188
Max BP : 130/80(mmHg)
Max Workload attained : 7.5(Fair Effort Tolerance)

Negative



Advice/Comments:

Print Date: 08-Apr-2023



12 Lead + Comparison

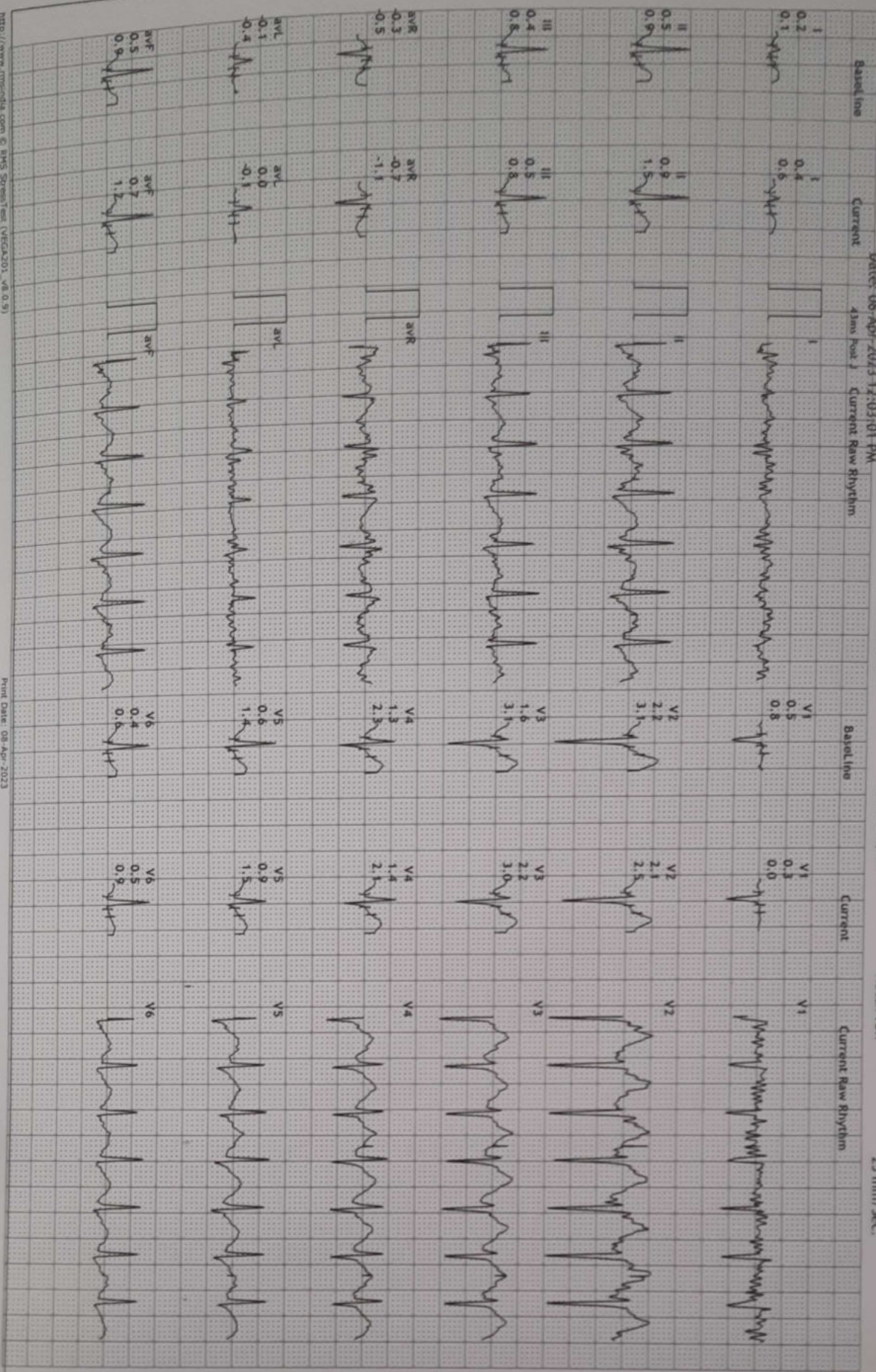
1250/AR umesh kumar **HR** 163 bpm
32 Yrs/Male METS: 1.0
0 Kg/0 Cms BP: 120/80
Date: 08-Apr-2023 12:03:01 PM

MPHR: 86% of 188
Speed: 1.1 mph
Grade: 0.0%

Raw ECG
BRUCE
(1.0-100)HZ
Ex Time 00:37
BLC :On
Notch :On

Supine
10.0 mm/mv
25 mm/Sec.

KSHIPRA SCA & LABS
2B COURT CHOURAHA UDAIPUR





12 Lead + Comparison

KSHIPRA SCLIPIS & LABS
2B COURT CHOURAHA UDAIPUR

1250/MR umesh kumar **HT** 181 bpm
32 Yrs/Male METS: 4.7
0 Kg/0 Cms BP: 120/80

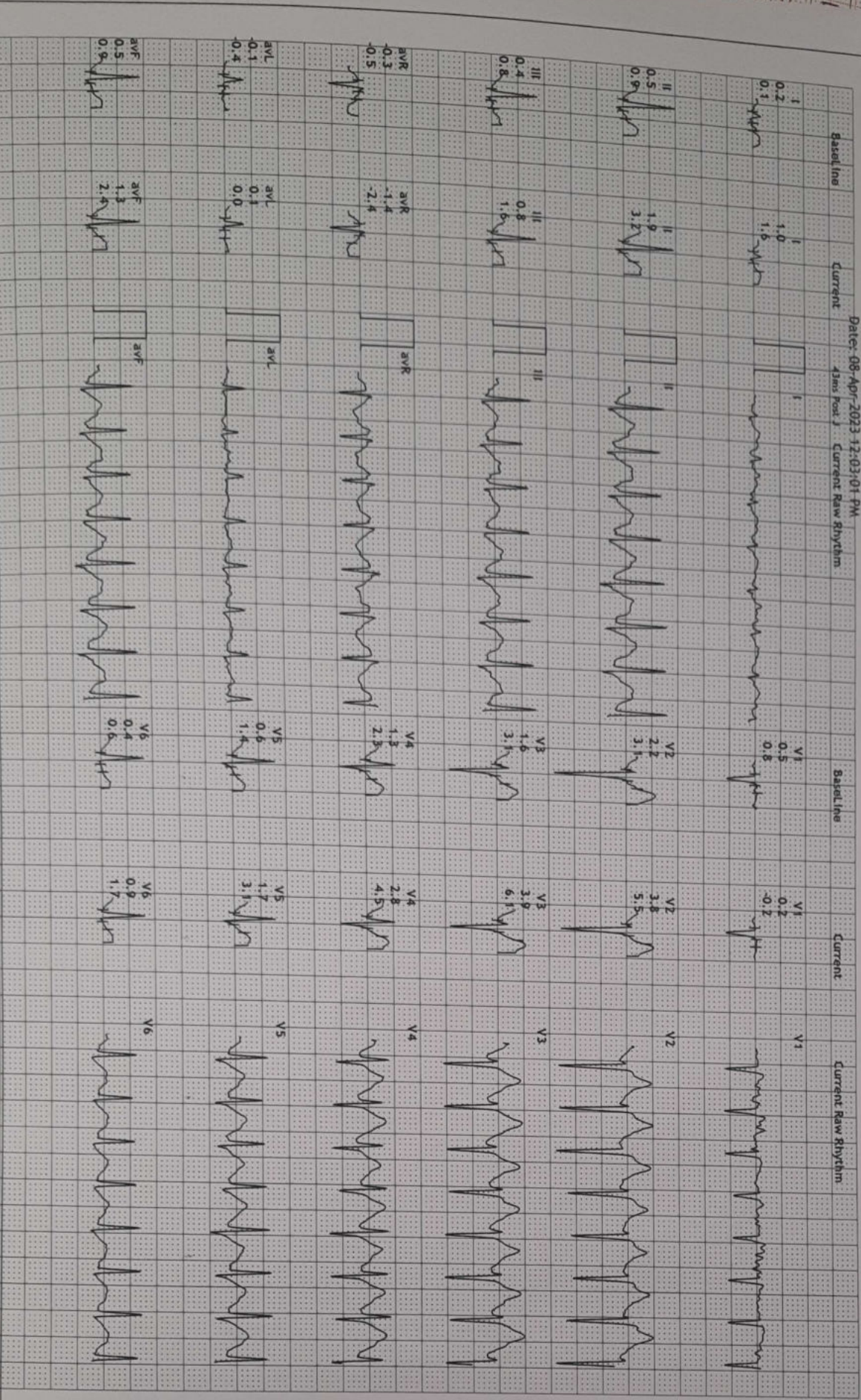
MPHR: 96% of 188
Speed: 1.7 mph
Grade: 10.0%

Raw ECG
BRUCE
(1.0-100)Hz

Ex Time 03:00
BLC : On
Notch : On

BRUCE: Stage 1 (3:00)
10.0 mm/mV
25 mm/Sec.

Date: 08-Apr-2023 12:03:01 PM
45ms Post J Current Raw Rhythm





12 Lead + Comparison

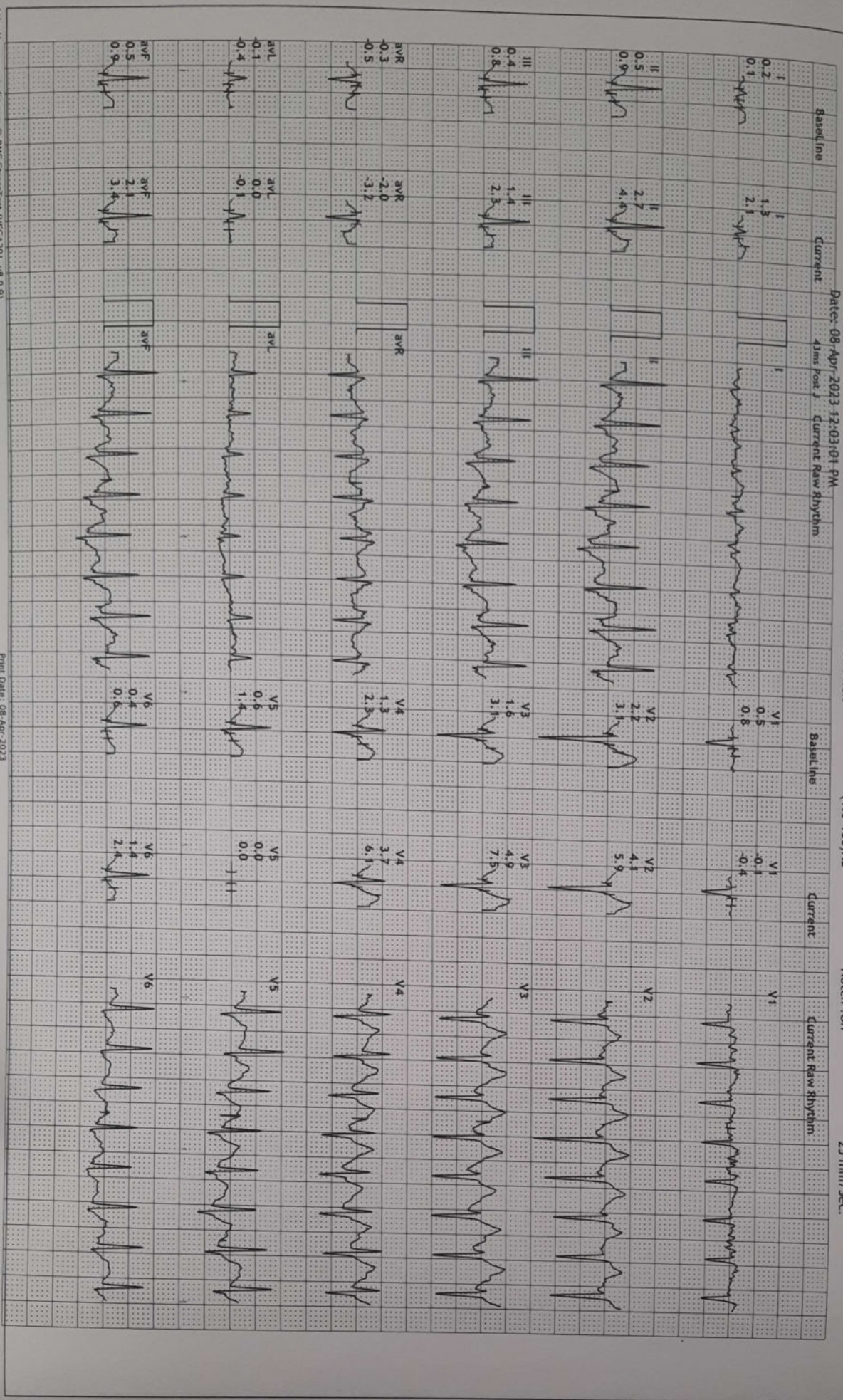
KSHIPRA SCIS & LABS
2B COURT CHOURAHA UDAIPUR

1250/MR umesh kumar (M) 182 bpm
32 Yrs/Male
0 Kg/0 Cms
Date: 08-Apr-2023 12:03:01 PM
4ms Post J Current Raw Rhythm

MPPH: 96% of 188
Speed: 3.4 mph
Grade: 14.0%

Raw ECG
BRUCE
(1.0-100)HZ
Ex Time 06:22
BLC : On
Notch : On

BRUCE: PeakEx(0:22)
10.0 mm/mv
25 mm/Sec.





12 Lead + Comparison

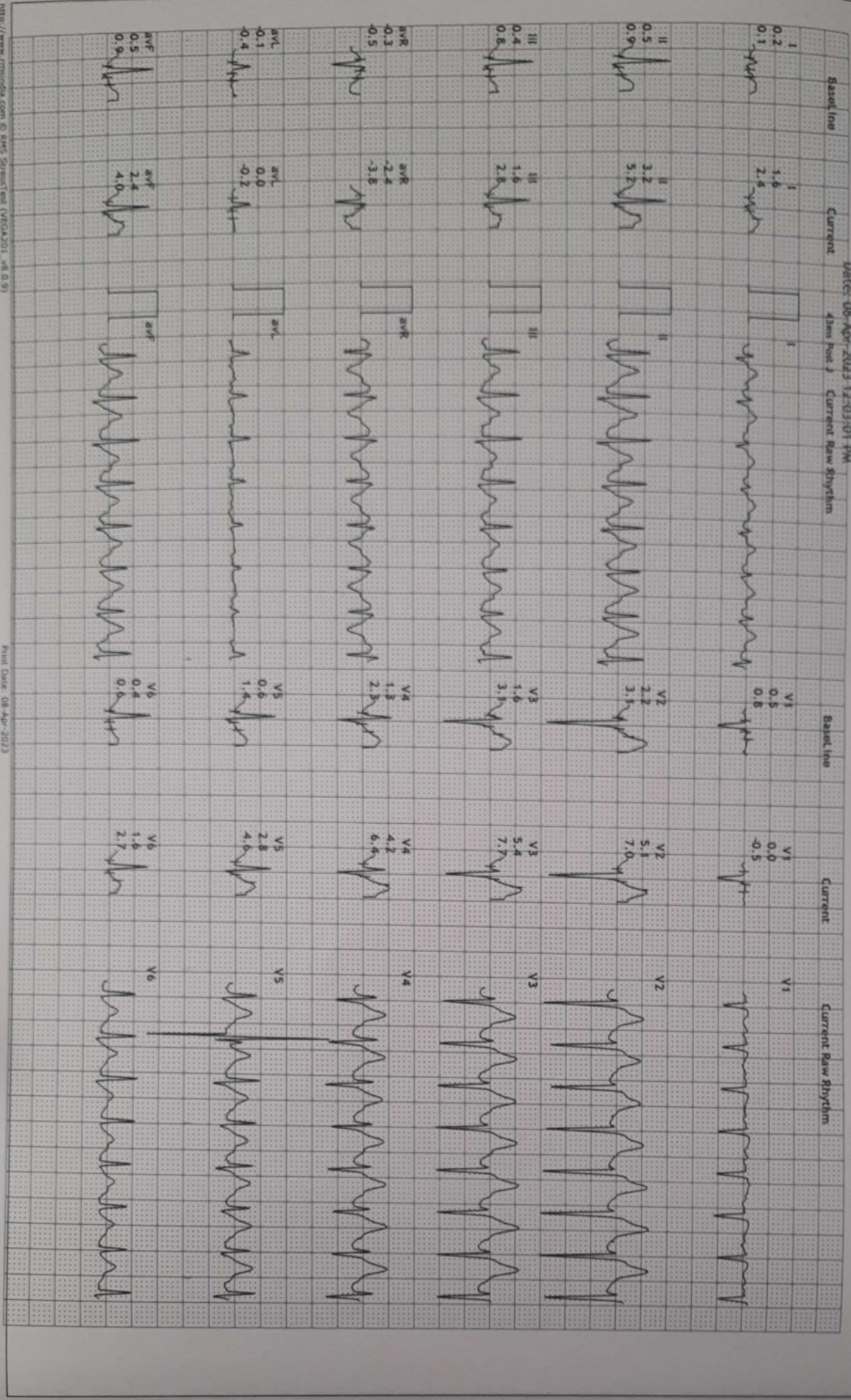
1250/MR umesh kumar (MR) 179 bpm
32 Yrs/Male METS: 1.2
0 Kg/0 Cms BP: 130/80
Date: 08-Apr-2023 12:03:01 PM
45m Post J Current Raw Rhythm

MPHR: 95% of 188
Speed: 0.0 mph
Grade: 0.0%

KSHIPRA SCIOS & LABS
ZB COURT CHOURAHA UDAIPUR
Raw ECG
BRUCE
(1.0-100)Hz

Ex Time 06:23
BLC :On
Notch :On

Recovery(1:00)
10.0 mm/mV
25 mm/Sec.





12 Lead + Comparison

1250/MR umesh kumar HMS 150 bpm
32 Yrs/Male METS: 1.0
0 Kg/0 Cms BP: 120/80
Date: 08-Apr-2023 12:03:04 PM

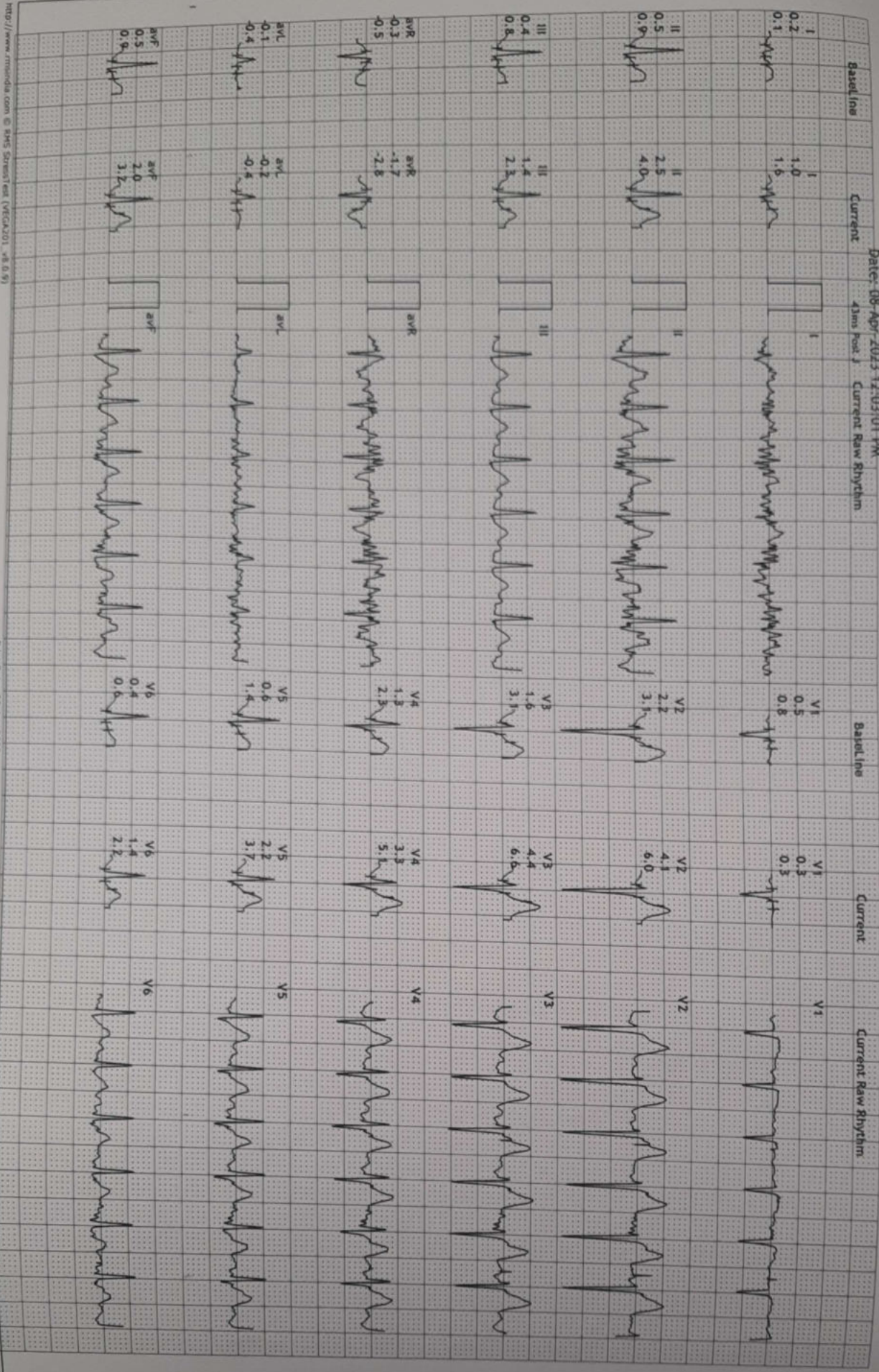
MHR: 79% of 188
Speed: 0.0 mph
Grade: 0.0%

KSHIPRA SCIS & LABS
2B COURT CHOURAHA UDAIPUR

Raw ECG
BRUCE
(1.0-100)Hz

Ex Time 06:23
BLC : On
Notch : On

Recovery(3:00)
10.0 mm/mV
25 mm/Sec.





12 Lead + Comparison

ZOZ0Z0Z0Z0/MR umesh HR: 50 bpm
32 Yrs/Male METS: 1.0
0 Kg/0 Cms BP: 120/80

Date: 08-Apr-2023 12:03:01 PM
4ms Post J Current Raw Rhythm

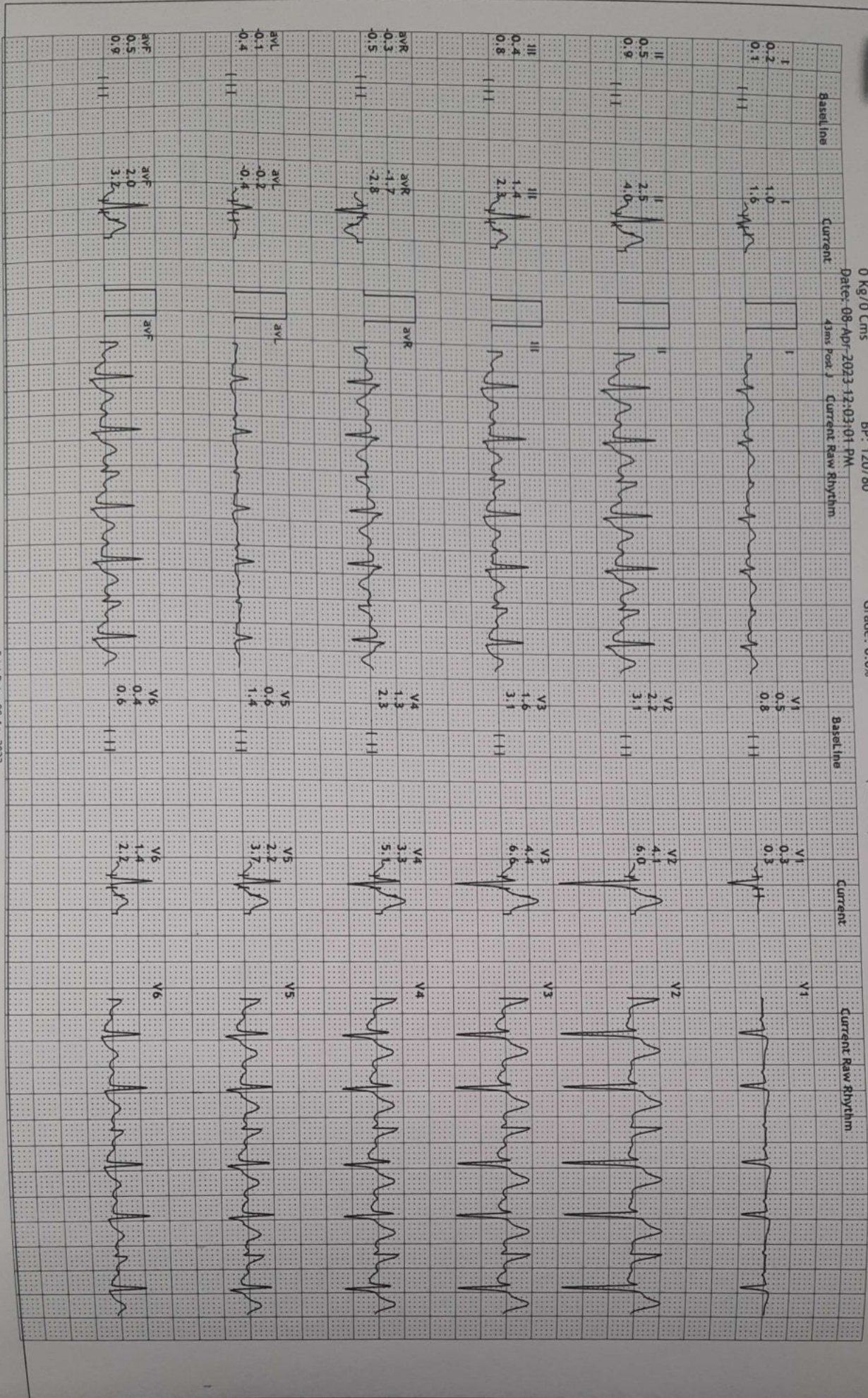
MHR: 79% of 188
Speed: 0.0 mph
Grade: 0.0%

KSHIPRA SCIENTIS & LABS
2B COURT CHOURAHA UDAIPUR

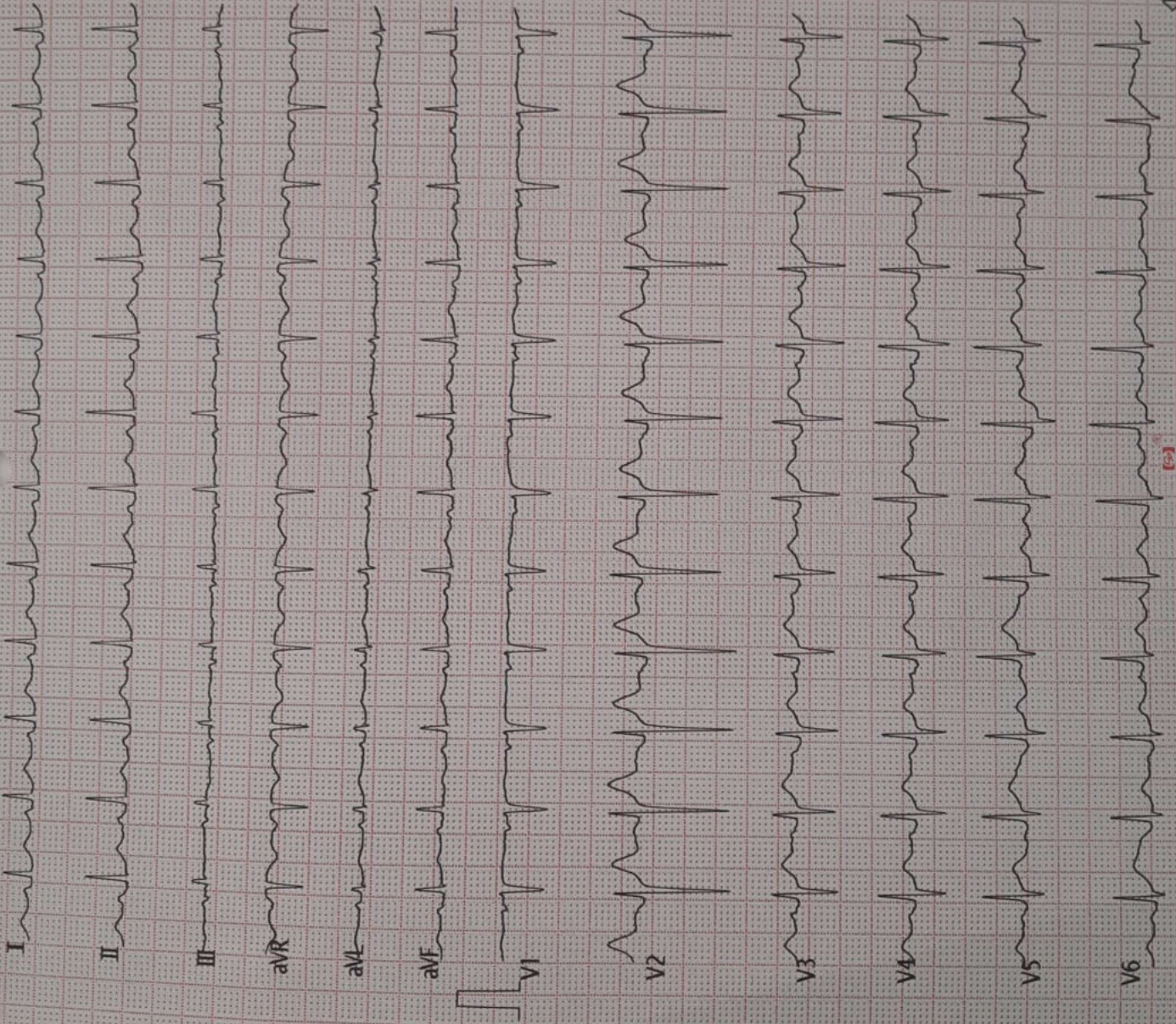
Raw ECG
BRUCE
(1.0-100)HZ

EX Time 06:23
BLC : On
Notch : On

Recovery(3:00)
10.0 mm/mV
25 mm/Sec.



10mm/mV



Vent. Rate(BPM) : 117

PR Int. (ms) : 116

P/QRS/T Int. (ms) : 91 90 163

QT/QTc Int. (ms) : 307 432

P/QRS/T Axis(Deg.) : — 53 38

RV1/SV5 Amp. (mV) : 0.05 0.32

RV5/SV1 Amp. (mV) : 0.77 0.63

V2.33 Technician :

Note: Unconfirmed Report Need to Review

<ECG Analysis Result>

802 Sinus Tachycardia

401 Short P-R Interval

*** Borderline Abnormal ECG ***

ST LEVEL (mV)

I	II	III	aVR	aVL	aVF
+0.00	+0.02	+0.01	-0.01	+0.00	+0.01
V1	V2	V3	V4	V5	V6
+0.00	+0.07	+0.01	+0.01	+0.00	+0.00

MR. Umesh

32/M

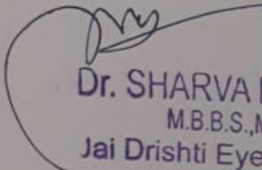
08/04/23

clo for Eye check up.

DVA $\left\{ \begin{array}{l} 6/6 \\ 6/6 \end{array} \right.$

MVA $\left\{ \begin{array}{l} 6/6 \\ 6/6 \end{array} \right.$

colour vision - defective


Dr. SHARVA PANDYA
M.B.B.S., M.S. (Ophth.)
Jai Drishti Eye Hospital
Udaipur (Raj.)

Cosmetology Partner :

Jai Drishti Eye Hospital, 23A, Residency Road, Near PC Jewellers, Sardarpura, Udaipur
जय दृष्टि आई हॉस्पिटल, 23-ए, रेजीडेन्सी रोड, पी.सी. ज्वेलर्स के पास, सरदारपुरा, उदयपुर



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