# GLOBAL HOSPITAL & TRAUMA CENTRE

Healing Hands Caring Hearts MANAGE BY : SHIV SAGAR SEWA TRUST



Plot No. 107, Opp. Old Court, Sector 1/A, Gandhidham (Kutch). Mob. +91 - 9537856968 E-mail. : shivsagarsewatrust@gmail.com

Reg. No. 6 9001:2015

	Medi	cal Examinatio	n Report/Health Ch	eckup	
Name: CHAUDH Appointment Id: Date: 29-09-2		JMAR	Age Sex	: 30 Yrs : Male	
Blood Pressure: 12 Spo2: 98			Pulse: 85		
Height: 162 Waist Circumferrend	cms ce: 102	cms	Weight:	86 Kg	
BMI: 32.8	kg/m2				
		Details	Quantity	Duration	
Tobacco/Gutkha/Sn	noking			Occassionally/Regular	
in Any Form	:		A CARLES AND	-	
Alcohol, Narcotics				-	
& Drugs	:			-	
Medical History	Yes/No	<u> </u>	reatment	Duration	
Diabetic :	NO			-	
Hypertension:	NO			(	
Thyroid:	NO		J.A.		
Remark:	-				
Covid-19 History		VES			
Thyroid: Remark: <u>Covid-19 History</u> Tested Positive For Date of Positive Dia Confirm by:	Novel Coron	a virus? 🤌 🔾	2		
Date of Positive Dia	gnosis?	-	A CONTRACTOR OF		
Confirm by:		RTPCF			
Home Quarantined	/Hospitalized	1? -Home	juarantine	•	
Medical Examination	on			. L.	
Far Nose Throat Ex	amination:	-Nanna	y ENTED	camination.	Ales .
Dermatological Exa	mination : -	-			
Neurological Exami	nation: —	1.0	t.1 sam	ingtion. 19	HAN .
Dental Examination	$= N \alpha$	ima De	and contain	Tel P	15
Ortho Examination				MDHIDHAM SS	CC/
				· +·	
Remark : -~~	none	I medico	J Exami	Railion.	
		Authorise	d Seal & Signature :	Dr. Jonard Chhotela SO	
		Not for	Medico Legal Purpose.	A Start	1

24 X 7 Emergency available. Not for Medico Legal Purpose. Please bring this paper on next visit. Reaction of drug depends on patient's response. GLOBAL HOSPITAL & TRAUMA CENTRE

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	Eye Examina	ition
Name: CHAUD	HARI ANKITKUMAR	Date: 29-09-24
Age: 30/ yrs		Sex: Male
	Anterior Segment	
Conjuctiva:	Nonma	(
Cornia:	Narroral	
Iris:	Norman	
Pupil:	Nonmai	A CONTRACT OF A
Cons:	Nonmal	
	Posterior Segment	
Disc:	Josephon	Standing of Standing
Macula:	Normal	
Vitreous:	Normal	
<b>Color Vision:</b>	Normal	
Night Vision:	Nononal	
IOP/Glaucoma:	Distant Vision	
	Distant Vision	
RE:	616	
LE:	616	•
	Near Vision	
RE:	616	and a second sec
LE	616	and a second sec
	Refraction	Con anna Anna Anna Anna Anna Anna Anna Ann
Distanc		
RE: 6/0	5 516	
LE: Gl	6 616	
Both:		



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NOHIDHAMPO

Authorised Signature & Seal:

Dr. Jonwal Christelal. C. MBBS Reg. No. G152



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### **Declaration of Medical Fitness**

I have examined Mr./Mrs./Ms./CHAUDHARI ANKITKUMAR Age 30 yrs/Male today and hereby certify that he/she is medically fit to take up the admission.She/he is does not suffer from any serious illness or serious allergy and, Doesn't carry any other terminal or carry any communicable disease.

Authorized Seal & Signature :

Date:29/09/2024







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# **Prarthana** Diagnostic Centre

96 Slice CT Scan
 3D/4D SONOGRAPHY

· COLOR DOPPLER

DIGITAL X-RAY
 MAMMOGRAPHY

• O.P.G.

### Dr. Priyansh L. Thakkar

(M.B., D.M.R.D.) Consultant Radiologist & Sonologist

and the second se			
Patient Name	:	ANKIT KUMAR CHAUDHARY	

Age/Sex

: 30 Years/Male Date: 29/09/2024

Ref by

: DR. GLOBAL HOSPITAL

### ABDOMINAL SONOGRAPHY

LIVER:appears normal in size and echopattern.No focal lesion seen.No dilated IHBR seen.PV and CBD appear normal.

SPLEEN:appears normal in size and echopattern.No focal lesion seen.

GALL BLADDER: is well distended. No calculus or changes of cholecystitis or mass lesion seen.

PANCREAS:appears normal in size and echopattern.No focal mass lesion or changes of pancreatitis seen.

RIGHT KIDNEY: appears normal in size and echopattern. No evidence of calculus or hydronephrosis or mass lesion seen involving right kidney. Corticomedullary differentiation well preserved.

LEFT KIDNEY:appears normal in size and echopattern.No evidence of calculus or hydronephrosis or mass lesion seen involving left kidney.Corticomedullary differentiation well preserved.

Aorta and IVC appear normal. Paraaortic region appear normal. No ascites or lymphadenopathy is seen. No evidence of focal collection or mass lesion in RIF. No evidence of abnormally dilated bowel loops or bowel wall thickening.

URINARY BLADDER: is well distended.No calculus or mass lesion seen.

PROSTATE:appears normal in size and echopattern.

<u>IMPRESSION</u>: Normal sonographic appearance of liver, spleen, gall bladder, pancreas, both kidneys, urinary bladder and prostate.

Adv. clinical corelation. Thanks for ref.



dl DR PRIYANSH THAKKAR MB D.M.R.D

Plot : 248, Sector 1/A, Opp. Kutch Uday Press, Nr. Oslo circle, Gandhidham. Ph. (02836) 227227, M. 9429155745

E-mail : drpriyanshthacker@gmail.com \* Not for Medico Legal Purpose

# **Prarthana** Diagnostic Centre

Slice CT Scan 4D SONOGRAPHY OLOR DOPPLER

DIGITAL X-RAY

• MAMMOGRAPHY

O.P.G.

ANKIT KUMAR CHAUDHARY

**Ref by** 

Patient Name

DR. GLOBAL HOSPITAL

### X-RAY CHEST (PA) VIEW

Both lung fields are clear.

Trachea is central. Both hila appear normal.

Both cp angles are clear.

Heart size is within normal limit.

Bony thoracic cage appears normal.

Both domes of diaphragm and mediastinal shadow appear normal.

Advise : Clinical co-relation

Thanks for ref.

DR PRIYANSH L THAKKAR MB D.M.R.D



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E-mail : drpriyanshthacker@gmail.com Not for Medico Legal Purpose

### Dr. Priyansh L. Thakkar

(M.B., D.M.R.D.) **Consultant Radiologist & Sonologist** 

Age/Sex

: 30 Years/Male Date: 29/09/2024







### **TEST REPORT**

			Collockien Data	- 20 Can 2024 2-54 PM
<b>Reg. No. :</b> 218625 ( KDI-7734 )			Collection Date : 29-Sep-2024 2:54	
Name : CHAUDHARI ANK	ITKUMAR			: 30-Sep-2024 8:11 PM
<b>Age:</b> 30 Y			Pt. Tele No:	0256015152
Sex: MALE			Location :	KADI
Ref. By : GLOBAL HOSPITA	L & TRAUMA CENTRE		Report Status:	FINAL
PARAMETR	RESULT	UNIT	BIOLOGICAL	REFF. INTERVAL
		BIOCHEMISTRY		
LIPID PROFILE				
CHOLESTEROL	153.00	mg/dL	Adult Desirabl Borderline higl High: >240 Child Desirabl Borderline higl High:>199	n: 200-239 e : <170
TRIGLYCERIDE	221.00	mg/dL	Normal : <161 High: 161-199 hypertriglyceri very high: >49	demic: 200-499
HDL CHOLESTEROL	25.00	mg/dL	35.3 - 79.5	
LDL CHOLESTEROL	83.80	mg/dL	Borderline leve 130-159	l/low risk:<130 el/moderate risk : ′high risk : >160
VLDL CHOLESTEROL	44.20	mg/dL	Upto 34	
CHOL. / HDL RATIO	6.12	mg/dL	-	
LDL / HDL RATIO	3.35	mg/dL	Borderline leve 3.0-6.0	l/low risk :0.5-3.0 el/moderate risk : ′high risk : >6.0
		End Of Report		

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This is an electronically authenticated report.

Pathologist :

**Dr.Aradhana Gupta** (M.D. Path.)



Airmed Pathology Pvt. Ltd.

31, Ambika Society, Next to Nabard Bank, Opp. Usmanpura, Ahmedabad, Gujarat - 380 013.

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#### **TEST REPORT** Reg. No.: 218625 (KDI-7734) Collection Date : 29-Sep-2024 2:54 PM Name : CHAUDHARI ANKITKUMAR Reporting Date : 30-Sep-2024 8:11 PM Age : 30 Y Pt. Tele No: 0256015152 Sex: MALE Location : KADI Report Status: FINAL Ref. By : GLOBAL HOSPITAL & TRAUMA CENTRE PARAMETR RESULT UNIT **BIOLOGICAL REFF. INTERVAL** BIOCHEMISTRY **KIDNEY FUNCTION TEST (KFT)** UREA 20.40 mg/dL 18 - 39 CREATININE 1.00 mg/dL 0.7 - 1.30

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

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Age :	30 Y			Pt. Tele No:	0256015152
Sex :	MALE			Location :	KADI
Ref. By :	GLOBAL HOSPITAL	& TRAUMA CENTRE		<b>Report Status:</b>	FINAL
PARAMET	ΓR	RESULT	UNIT	BIOLOGICAL	REFF. INTERVAL
		HEMATOLO	DGY		
ABO RH					
ABO		"O"			
Rh Type		Positive			

---- End Of Report ----

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Reg. No.	: 218625 ( KDI-7734 )			Collection Date	29-Sep-2024 2:54 PM
Name :	CHAUDHARI ANKITKUMAR	L .		Reporting Date	30-Sep-2024 8:11 PM
Age :	30 Y			Pt. Tele No:	0256015152
Sex :	MALE			Location :	KADI
Ref. By :	GLOBAL HOSPITAL & TRA	UMA CENTRE		Report Status:	FINAL
PARAMETR		RESULT	UNIT	BIOLOGICAL F	REFF. INTERVAL
		CLIN	ICAL PATHOLOGY		
URINE RO	UTINE EXAMINATION				
PHYSIC	AL EXAMINATION				
Volume		20 ML			
Colour		Pale Yellow			
Appearanc	e	Clear			
Reaction		6.0			
Sp. Gravity	1	1.015			
Protein		Nil			
Glucose		Nil			
Bile Salts		Absent			
Bile Pigme	nts	Absent			
MICROS	COPIC EXAMINATIO	N [After centri	fugation at 2000	) r.p.m for 5 minute	s]
Pus Cells		5 to 6	/h.p.f.	-	
Red Cells		Absent	/h.p.f.	-	
Epithelial C	Cells	2 to 3	/h.p.f.	-	
Casts		Absent			
Fungus		Absent			
Crystals		Absent			

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

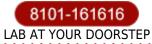
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	т	EST REPORT		
Reg. No. : 218625 ( KDI-7734	4)		Collection Date	: 29-Sep-2024 2:54 PM
Name : CHAUDHARI ANKIT	TKUMAR		Reporting Date	: 30-Sep-2024 8:11 PM
<b>Age :</b> 30 Y			Pt. Tele No:	0256015152
Sex: MALE			Location :	KADI
Ref. By : GLOBAL HOSPITAL	& TRAUMA CENTRE		<b>Report Status:</b>	FINAL
PARAMETR	RESULT	UNIT	BIOLOGICAL	REFF. INTERVAL
		BIOCHEMISTRY		
LIVER FUNCTION TEST -WIT	'H GGT			
Azobilirubin chromoph	nores colorimetry			
Direct Bilirubin	0.16	mg/dL	0.0 - 0.2	
Indirect Bilirubin	0.45	mg/dL	-	
S Billirubin				
TOTAL BILLIRUBIN	0.61	mg/dL	0.2 - 1.3	
S.G.P.T	17.00	IU/L	upto 45	
SGOT	20.00	U/L	upto 35	
ALKALINE PHOSPHATASE	50.00	U/L	39 - 118	
S. PROTEINS				
ALBUMIN	4.32	gm/dL	3.4 - 5	
GGT	20.00	IU/L	5 - 85	
		End Of Report	-	

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#### **TEST REPORT** Reg. No.: 218625 (KDI-7734) Collection Date : 29-Sep-2024 2:54 PM Name : CHAUDHARI ANKITKUMAR Reporting Date : 30-Sep-2024 8:11 PM Age : 30 Y Pt. Tele No: 0256015152 MALE Location : KADI Sex: Report Status: FINAL Ref. By : GLOBAL HOSPITAL & TRAUMA CENTRE PARAMETR RESULT UNIT **BIOLOGICAL REFF. INTERVAL** BIOCHEMISTRY FBS & PPBS (BLOOD GLUCOSE) Fasting Blood Sugar 85.00 mg/dL 70 - 110 Post Prandial Blood Sugar 117.00 mg/dL 90 - 140

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### **TEST REPORT**

Reg. No. :	218625 ( KDI-7734	)		Collection Date	: 29-Sep-2024 2:54 PM
Name :	CHAUDHARI ANKITH	KUMAR		Reporting Date	: 30-Sep-2024 8:11 PM
Age :	30 Y			Pt. Tele No:	0256015152
Sex :	MALE			Location :	KADI
Ref. By :	GLOBAL HOSPITAL	& TRAUMA CENT	RE	<b>Report Status:</b>	FINAL
PARAMET	R	RESULT	UNIT	BIOLOGICAL F	REFF. INTERVAL
			SEROLOGY/IMMUNOLOGY		
тз,т4, тѕн	<u> </u>				
TRIIODOTHY	RONINE T3	0.914	ng/mL	0.58 - 1.59	
THYROID ST (TSH)	IMULATING HORMO	NE 2.451	MicrolU/ml	0.35 - 4.94	
тѕн	T3/FT3	T4/FT4	Suggested Interpretation for the Thyroid Function Tests Pattern		
Within Range	Decreased	Within Range	- Isolated Low T3-offen seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%		
Raised	Within Range	Within Range	- Isolated High TSH especially in the range physiological & Biological TSH Variability Intermitted T4 therapy for hypothyroidism	Subclinical Autoimmune	Hypothyroidism -
Raised	Decreased	Decreased	<ul> <li>Chronic autoimmune Thyroiditis</li> <li>Post thyroidectomy, Post radioiodine</li> <li>Hypothyroid phase of transient thyroiditis</li> </ul>		
Raised or With Range	<sup>hin</sup> Raised	Raised or Within Range	<ul> <li>Interfering antibodies to thyroid hormone</li> <li>intermittent T4 therapy or T4 overdose</li> <li>Drug interference-Amiodarone, Heparin, E</li> </ul>		nti-epileptics
Decreased	Raised or within Range	Raised or within Range	- Isolated Low TSH		
Decreased	Decreased	Decreased	- Central Hypothyroidism - Non-Thyroidal illness - Recent treatment for Hyperthyroidism (TSH remains suppressed)		
Decreased	Raised	Raised	<ul> <li>Primary Hyperthyroidism (Graves disease</li> <li>Transient thyroiditis:Postpartum, Silent (Ig</li> <li>DeQuervain'a) Gestational thyrotoxicosis w</li> </ul>	/mphocytic), Postviral (gr	anulomatous, subacute,
Decreased or within range	Raised	Within Range	- T3 toxicosis - Non-Thyroidal illness		

**THYROXIN T4** 

. . . . . .

7.252

2

μg/dL

3.2 - 12.6

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

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Near Normal Glycemia:6.0-7.0

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Goal for Diabetics :<7.0 Good Control The hemoglobin A1c test also called HbA1c, glycated hemoglobin test or glycohemoglobin - is the important test for assessment of long term glucose control (also called Glycemic control) and is a better indication of long term glycemic control as than blood glucose determination. Hemoglobin A1c provides an average of your blood sugar control over a six to twelve week period. People with diabetes should have this test every three months to determine whether their blood sugars have reached the target level of control. Those who have their diabetes under good control maybe able to wait longer between the blood tests, but experts recommend checking atleast two times a year. Patients with diseases that affect hemoglobin such as anaemia may get abnormal results with this test. Other abnormalities that can affect the results of the hemoglobin A1c include supplements such as Vitamins C & E and high cholestrol levels. Kidney and liver diseases may also affect the result of the hemoglobin A1c test

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**Dr.Aradhana Gupta** (M.D. Path.)

Pathologist :

HEMOGLOBIN)



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### **TEST REPORT**

PARAMET	_	RESULT	UNIT		REFF. INTERVAL
Ref. By :	GLOBAL HOSPITAL	& TRAUMA CENTRE		<b>Report Status:</b>	FINAL
Sex :	MALE			Location :	KADI
Age :	30 Y			Pt. Tele No:	0256015152
Name :	CHAUDHARI ANKITK	CUMAR		Reporting Date	: 30-Sep-2024 8:11 PM
Reg. No. :	218625 ( KDI-7734	)		Collection Date	: 29-Sep-2024 2:54 PM

		•••••		
		HEMATOLOGY		
CBC WITH ESR				
HEMOGLOBIN	14.1	gm%	13.0 - 17.0	
Total RBC Count	5.21	mil/cumm	4.2 - 6.2	
<b>Blood indices</b>				
H.CT	40.1	%	26 - 50	
M.C.V	77.0		80 - 96	
M.C.H.	27.1	pg	26 - 33	
M.C.H.C.	35.2	%	31 - 36	
Total WBC Count (TLC)	4800	/cmm	4000 - 10000	
Platelet Count	248000	/cmm	150000 - 450000	
Differential WBC Count	<u>t</u>			
Polymorphs	67	%	40 - 70	
lymphocytes	27	fL	20 - 40	
Eosinophils	1	%	1 - 6	
Monocytes	5	%	2 - 10	
Basophils	0	%	0 - 2	
Peripheral Smear Stud	У			
Smear Study - RBC	RBC's are Predon	ninantly Microcytic & Norm	ochormic.	
Smear Study - WBC	WBC count is nor	mal.		

Platelets are adequate Smear Study - Platelets No Blood Parasites are seen. Smear Study - PS for MP 6.5 mm

---- End Of Report ----

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1 - 7

Pathologist :

ESR



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Summary

PLOT NO-107, SECTOR 1-A, GANDHIDHAM, KUTCH 30 Yrs/Male 86 Kg/162 Cms GLOBAL HOSPITAL & TRAUMA CENTRE Date: 29-Sep-2024 01:50:40 PM 956/Chaudhari Ankitkumar

By : lication : ective :
Ref. Med Obj

: BRUCE	: Nill	
Protocol	History	
	÷	

Comments

Stage	StageTime	StageTime PhaseTime Speed Grade (Min:Sec) (Min:Sec) (mph) (3)	Speed (mph)	Grade	METs	H.R.	B.P.	R. P. P.	PVC
Supine					1.0	86	125/83	107	,
Standing					1.0	85	125/83	106	
HV					1.0	81	125/83	101	,
Exstart					1.0	85	125/83	106	1
Stage 1	3:01	3:02	1.7	10.0	4.7	134	128/86	171	-
Stage 2	3:01	6:02	2.5	12.0	7.1	164	132/91	216	4
PeakEx	1:41	7:42	3.4	14.0	8.8	182	140/97	254	9
Recovery	1:00		1.1	0.0	1.1	155	130/88	201	ň

# Findings :

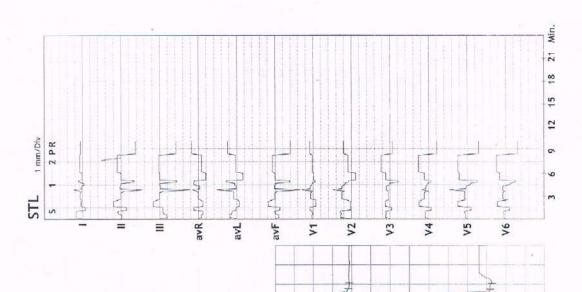
No significant ST segment changes noted during exercise or recovery. : 182 bpm 96% of Max Predictable, HR 190 Final Impression : Test is negative for inducible ischaehmia. WorkLoad attained : 8.8 (Fair Effort Tolerance : 7:41 minutes No Angina/Arrhythmia/S3/murmur Maxmum Depression: 2:23 Max BP : 140/97(mmHg) **Test is Completed** Max HR attained **Exercise Time** 

-0.7 PreEx



No. 619250 Saam hotelal. C. Dr. Johna

-1.9 PeakEx



Print Date: 29-Sep-2024

Advice//Comments:

.... 10.0 mm/mV 25 mm/Sec. avF 0.0 111 HI 0.3 0.1 Supine PLOT NO-107, SECTOR 1-A, GANDHIDHAM, KUTCH :: avL 1.2 < 2 < 5 0.2 Ex Time 00:59 GLOBAL HOSPITAL & TRAUMA CENTRE Notch: On BLC : On 12 5 EN. V4 V5 V6 -1.0 -0.7 avR V4 0.6 0.3 (1.0-100)Hz Raw ECG BRUCE 0.9 Print Date: 30-Sep-2024 Ξ V.9 0.3 MPHR:45% of 190 Speed: 0.0 mph Grade: 0.0% 2.6.1 = 0.3 0.5 12Linked Medians + En Median H ave AVL AVE 956/Chaudhari AnkitkumHR: 86 bpm BP: 125/83 METS: 1.0 Date: 29-Sep-2024 01:50:40 PM -5 0.1 5 86 Kg/162 Cms 30 Yrs/Male tip://www.rmsindla.com & PMS ScressTest (NEGR201 vs.0.5) 97 mS Post J V5 0.4 4×

	+					Z									
JTCH Standing 10.0 mm/mV 25 mm/Sec.	awr 90,3 1,3 1,3 1,3 1,3 1,3 1,3 1,3 1,3 1,3 1	9, 20 5, 00 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4				7									
SECTOR 1-A, GANDHIDHAM, KUTCH Ex Time 01:03 BLC :On Notch :On	1.1.2 K	5000 5000 5000 5000 5000		*						$\leq$					
DR 1-A, GANDHII Ex Time BLC :On Notch :O	avr 1:0 -0.7	0.0.64	W VI		\ 	< 2	EX.		¥4		22 X	;	/	t V6	
0-107, SECTC Raw ECG BRUCE (1.0-100)Hz	4	-		· · · · · · · · · · · · · · · · · · ·				$\left\{ \right\}$					2		
PLOT NO	≣ 6.0 0.8	5.5.5	Ś					$\left.\right\}$		2			2		
MPHR:44% of 190 Speed: 0.0 mph Grade: 0.0%	0:3	2.0.5 2.0 2.7	ł					$\left\{ \right\}$					>	· · · · · · · · · · · · · · · · · · ·	
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956/Chaudhari Ankitkun <b>lık</b> : 85 bpm 30 Yrs/Male METS: 1.0 86 Kg/162 Cms BP: 125/83 Date: 29-5ep-2024 01:50:40 PM		1000 1000 1000													1011
R 8 8 8	97 mS Post J				7							•			

HV 10.0 mm/mV 25 mm/Sec.	0.2 0.3	0.1 0.1							
PLOT NO-107, SECTOR 1-A, GANDHIDHAM, KUTCH Raw ECG Ex Time 01:08 BRUCE BLC :00 (1.0-100)Hz Notch :00	7 20	00 42							
PLOT NO-107, SECTOR 1-A, GANDHIDP Raw ECG Ex Time 01 BRUCE BLC : On (1.0-100)Hz Notch : On	NV 8 1.0	0.0 0.3 0.3	*	<b>x</b>	<u> </u>		*	5	<b>%</b>
PLOT NO-107, SE MPHR:43% of 190 Raw ECG Speed: 0.0 mph BRUCE Grade: 0.0% (1.0-100)Hz		100 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0	ł			ł			> > >
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956/Chaudhari Ankitkumtili: 32 bpm 30 Yrs/Male METS: 1.0 86 Kg/162 Cms BP: 125/83	Date: 29-5ep-2024 01:50:	~ <b>.</b>							
	97 mS Post J			7					

	1.4 Linked Medians + En Median 956/Chaudhari Ankitkunter 84 hnm	kunter: 84 hom		PLOT NO-107, SECTOR 1-A, GANDHIDHAM, KUTCH	1-A, GANDHIDHA	м, КИТСН	
	30 Yrs/Male METS: 1 86 Kg/162 Cms BP: 125: Date: 29-5ep-2024 01:50:40 PM	METS: 1.0 BP: 125/83 1:50:40 PM	Speed: 0.0 mph Grade: 0.0%	Raw ECG BRUCE (1.0-100)Hz	Ex Time 01:27 BLC :On Notch :On		ExStart 10.0 mm/mV 25 mm/Sec.
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