



CONCLUSION OF HEALTH CHECKUP

ECU Number : 8450	MR Number : 23225756	Patient Name : DIPAK TANAJI KHOMANE
Age : 29	Sex : Male	Height : 172
Weight : 69.4	Ideal Weight : 70	BMI : 23.46
Date : 13/01/2024		

Fit

Dr. Manish Mittal

Internal Medicine

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





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ECU Number : 8450 MR Number : 23225756 Patient Name : DIPAK TANAJI KHOMANE
Age : 29 Sex : Male Height : 172
Weight : 69.4 Ideal Weight : 70 BMI : 23.46
Date : 13/01/2024

Past H/O : NO P/H/O ANY MAJOR ILLNESS

Present H/O : NO MEDICAL COMPLAIN AT PRESENT

Family H/O : HEALTHY

Habits : NO HABITS

Gen.Exam. : G.C.GOOD

B.P : 120/80

Pulse : 80

Others : SPO2 98 %

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :





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ECU Number : 8450
Age : 29
Weight : 69.4
Date : 13/01/2024

MR Number : 23225756
Sex : Male
Ideal Weight : 70

Patient Name: DIPAK TANAJI KHOMANE
Height : 172
BMI : 23.46

Ophthalmic Check Up :

Right

Left

Ext Exam

NIL

Vision Without Glasses

NA

NA

Vision With Glasses

6/6 N.5

6/6 N.5

Final Correction

NA

NA

Fundus

NORMAL

Colour Vision

NORMAL

Advice

NIL

Orthopedic Check Up :

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice



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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. DIPAK TANAJI KHOMANE
Gender / Age : Male / 29 Years 2 Months 27 Days
MR No / Bill No. : 23225756 / 242072335
Consultant : Dr. Manish Mittal
Location : OPD

Type : OPD
Request No. : 191199
Request Date : 13/01/2024 11:19 AM
Collection Date : 13/01/2024 11:24 AM
Approval Date : 13/01/2024 03:18 PM

CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	16.6	gm/dL	13 - 17
Red Blood Cell Count (T-RBC)	5.47	mill/cmm	4.5 - 5.5
Hematocrit (HCT)	48.6	%	40 - 50
Mean Corpuscular Volume (MCV)	88.8	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	30.3	pg	27 - 32
MCH Concentration (MCHC)	34.2	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	11.9	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	39.0	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	6.47	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	60	%	40 - 80
Lymphocytes	31	%	20 - 40
Eosinophils	3	%	1 - 6
Monocytes	6	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	3.83	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.99	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.21	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.39	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.05	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.5	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	324	thou/cmm	150 - 410
Remarks	This is cell counter generated CBC report, Smear review is not done		
ESR	5	mm/1 hr	0 - 10

Test Results are dependent on number of variables & technical limitations. Hence, it is advised to correlate with clinical findings & do not rely on single test results.



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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mr. DIPAK TANAJI KHOMANE	Type	: OPD
Gender / Age	: Male / 29 Years 2 Months 27 Days	Request No.	: 191199
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CBC + ESR

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

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

--- End of Report ---

Dr. Ameet Soni
MD (Path)

Test Results are dependent on number of variables & technical interventions. Hence, it is advised to correlate with clinical findings and to retest in subsequent visits before any firm opinion is made. Retest/ retest may be requested.

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Consultant : Dr. Manish Mittal
Location : OPD

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Approval Date : 13/01/2024 03:15 PM

Haematology

Test	Result	Units	Biological Ref. Range
Blood Group			
ABO system	A		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method
Note :

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

--- End of Report ---

Dr. Ameer Soni
MD (Path)

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

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : **Mr. DIPAK TANAJI KHOMANE**
Gender / Age : **Male / 29 Years 2 Months 27 Days**
MR No / Bill No. : **23225756 / 242072335**
Consultant : **Dr. Manish Mittal**
Location : **OPD**

Type : **OPD**
Request No. : **191199**
Request Date : **13/01/2024 11:19 AM**
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Approval Date : **13/01/2024 03:28 PM**

Fasting Plasma Glucose

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
Fasting Plasma Glucose			
Fasting Plasma Glucose	79	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	92	mg/dL	70 - 140

By Hexokinase method on EXL Dade Dimension

---- End of Report ----

Dr. Rakesh Vaidya
MD (Path), DCP.

Test Results are dependent on number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and/or refer to the investigator's advice any firm opinion is made. Recheck/ retest may be requested.

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HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
HbA1c (Glycosylated Hb)			
Glycosylated Hemoglobin (HbA1c)	4.9	%	
estimated Average Glucose (e AG) *	93.93	mg/dL	

(Method:

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

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

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

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

--- End of Report ---

Dr. Rakesh Vaidya
MD (Path). DCP.

Test Results are dependent on accuracy of vasodilators & venous flow measurements. Hence, it is advised to correlate with clinical findings and/or repeat investigation before any firm opinion is made. Recheck / repeat may be required.

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Complete Lipid Profile

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and/or retest/reinvestigation, and/or any further opinion is made. Retest/ request may be requested.

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides	56	mg/dL	1 - 150
<i>(Done by Lipase /Glycerol kinase on Vitros 5600)</i>			
<i>< 150 Normal</i>			
<i>150-199 Borderline High</i>			
<i>200-499 High</i>			
<i>> 499 Very High)</i>			
Total Cholesterol	122	mg/dL	1 - 200
<i>(Done by Colorimetric - Cholesterol Oxidase, esterase, peroxidase on Vitros 5600.)</i>			
<i><200 mg/dL - Desirable</i>			
<i>200-239 mg/dL - Borderline High</i>			
<i>> 239 mg/dL - High)</i>			
HDL Cholesterol	32	mg/dL	40 - 60
<i>(Done by Colorimetric: non HDL precipitation method PTAMgCl2 on Vitros 5600)</i>			
<i>< 40 Low</i>			
<i>> 60 High)</i>			
Non HDL Cholesterol (calculated)	90	mg/dL	1 - 130
<i>(Non- HDL Cholesterol)</i>			
<i>< 130 Desirable</i>			
<i>139-159 Borderline High</i>			
<i>160-189 High</i>			
<i>> 191 Very High)</i>			
LDL Cholesterol	80	mg/dL	1 - 100
<i>(Done by Enzymatic (Two Step CHE/CHO/POD) on Vitros 5600)</i>			
<i>< 100 Optimal</i>			
<i>100-129 Near / above optimal</i>			
<i>130-159 Borderline High</i>			
<i>160-189 High</i>			
<i>> 189 Very High)</i>			
VLDL Cholesterol (calculated)	11.2	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	2.5		2.1 - 3.5
T. Ch./HDL Ch. Ratio	3.81		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

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Dr. Rakesh Vaidya
MD (Path). DCP.



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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.82	mg/dL	0 - 1
Bilirubin - Direct	0.28	mg/dL	0 - 0.3
Bilirubin - Indirect	0.54	mg/dL	0 - 0.7
<i>(Done by Dual Wavelength - Reflectance Spectrophotometry on Vitros 5600)</i>			
Aspartate Aminotransferase (SGOT/AST)	22	U/L	15 - 40
<i>(Done by Multipoint Rate Colorimetric with P-5-P on Vitros 5600)</i>			
Alanine Aminotransferase (SGPT/ALT)	20	U/L	16 - 63
<i>(Done by Multipoint-Rate/Colorimetric with P-5-P (pyridoxa-5-phosphate) on Vitros 5600)</i>			
Alkaline Phosphatase	79	U/L	53 - 128
<i>(Done by Multipoint-Rate - p-nitrophenyl Phosphate, AMP buffer on Vitros 5600)</i>			
Gamma Glutamyl Transferase (GGT)	16	U/L	15 - 85
<i>(Done by Multipoint Rate - L-γ³-glutamyl-p-nitroanilide on Vitros 5600)</i>			
Total Protein			
Total Proteins	8.18	gm/dL	6.4 - 8.2
Albumin	4.76	gm/dL	3.4 - 5
Globulin	3.42	gm/dL	3 - 3.2
A : G Ratio	1.39		1.1 - 1.6
<i>(Done by Biuret endpoint and Bromocresol green method on vitros 5600.)</i>			

---- End of Report ----

Dr. Rakesh Vaidya
MD (Path). DCP.

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👤 Patient Name : **MR. DIPAK FANAJI KHOMANE** : 📱 📧
Gender / Age : Male / 29 Years 2 Months 27 Days
MR No / Bill No. : **23225756 / 242072335**
Consultant : Dr. Manish Mittal
Location : **OPD**

Type **DEPARTMENT OF LABORATORY MEDICINE**
Request No. : **191199**
Request Date : **13/01/2024 11:19 AM**
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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea <i>(Done by Endpoint/Colorimetric - Urease on Vitros 5600)</i>	13	mg/dL	10 - 45
BUN	6.07	mg/dL	5 - 21
Creatinine <i>(By Modified Kinetic Jaffe Technique)</i>	0.89	mg/dL	0.9 - 1.3
Estimate Glomerular Filtration rate <i>(Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)</i>	More than 60		
Uric acid <i>(Done by Colorimetric - Uricase, Peroxidase on Vitros 5600)</i>	6.1	mg/dL	3.4 - 7.2

— End of Report —

Dr. Rakesh Vaidya
MD (Path), DCP.

Test Results are dependent on number of vasistases & technical specifications. Hence, it is advised to correlate with clinical findings & antibiotic, reagent, investigation, before any firm opinion is made. Recheck/ retest may be requested.



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Gender / Age : Male / 29 Years 2 Months 27 Days

MR No / Bill No. : 23225756 / 242072335

Consultant : Dr. Manish Mittal

Location : OPD

Type : DEPARTMENT OF LABORATORY MEDICINE

Request No. : 191199

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Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
Triiodothyronine (T3) (Done by CLIA based method on automated immunoassay Vitros 5600. Reference interval (ng/ml) 1 - 3 days : 0.1 - 7.4 1-11 months : 0.1 - 2.45 1-5 years : 0.1 - 2.7 6-10 years : 0.9 - 2.4 11-15 years : 0.8 - 2.1 16-20 years : 0.8 - 2.1 Adults (20 - 50 years) : 0.7 - 2.0 Adults (> 50 years) : 0.4 - 1.8 Pregnancy (in last 5 months) : 1.2 - 2.5 (Reference : Tietz - Clinical guide to laboratory test, 4th edition))	1.38	ng/ml	
Thyroxine (T4) (Done by CLIA based method on automated immunoassay Vitros 5600. Reference interval (mcg/dL) 1 - 3 days : 11.8 - 22.6 1-2 weeks : 9.8 - 16.6 1 - 4 months : 7.2 - 14.4 4 - 12 months : 7.8 - 16.5 1-5 years : 7.3 - 15.0 5 - 10 years : 6.4 - 13.3 10 - 20 years : 5.6 - 11.7 Adults / male : 4.6 - 10.5 Adults / female : 5.5 - 11.0 Adults (> 60 years) : 5.0 - 10.7 (Reference : Tietz - Clinical guide to laboratory test, 4th edition))	8.73	mcg/dL	
Thyroid Stimulating Hormone (US-TSH) (Done by CLIA based method on automated immunoassay Vitros 5600. Reference interval (microIU/ml) Infants (1-4 days) : 1.0 - 39 2-20 weeks : 1.7 - 9.1 5 months - 20 years : 0.7 - 6.4 Adults (21 - 54 years) : 0.4 - 4.2 Adults (> 55 years) : 0.5 - 8.9 Pregnancy : 1st trimester : 0.3 - 4.5 2nd trimester : 0.5 - 4.6 3rd trimester : 0.8 - 5.2 (Reference : Tietz - Clinical guide to laboratory test, 4th edition))	2.14	microIU/ml	

Test Results are dependent on accuracy of reagents, reagent lot numbers, storage conditions, etc. It is advised to correlate with clinical findings and other test results. If necessary, re-confirmation before any firm opinion is made. Accuracy of result may be requested.

— End of Report —

Dr. Rakesh Vaidya
MD (Path). DCP.



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Gender / Age : Male / 29 Years 2 Months 27 Days
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Consultant : Dr. Manish Mittal
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Urine routine analysis (Auto)

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	30	mL	
Colour	Pale Yellow		
Appearance	Clear		
Chemical Examination (By Reagent strip method)			
pH	7.0		
Specific Gravity	1.011		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

--- End of Report ---

Dr. Ameer Soni
MD (Path)



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Ultra High Resolution Sonography

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Magnetic Resonance Imaging (MRI)

Mammography

Interventional Radiology

Digital Subtraction Angiography (DSA)

Foetal Echocardiography

Echocardiography

4D USG & Doppler

DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23225756 Report Date : 13/01/2024
 Request No. : 190097422 13/01/2024 11.19 AM
 Patient Name : Mr. DIPAK TANAJI KHOMANE
 Gender / Age : Male / 29 Years 2 Months 27 Days

X-Ray Chest AP

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

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

Dr. Priyanka Patel, MD.

Consultant Radiologist





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Magnetic Resonance Imaging (MRI)

Mammography

Interventional Radiology

Digital Subtraction Angiography (DSA)

Foetal Echocardiography

Echocardiography

4D USG & Doppler

DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23225756 Report Date : 13/01/2024

Request No. : 190097426 13/01/2024 11.19 AM

Patient Name : Mr. DIPAK TANAJI KHOMANE

Gender / Age : Male / 29 Years 2 Months 27 Days

USG : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen

Liver is normal in size and echo pattern. No mass lesion identified. The hepatic veins are clear and patent. PV patent. No dilated IHBR.

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

Pancreas shows no obvious abnormality. Tail obscured.
Spleen is minimally enlarged size(13 cm) and echo pattern.

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

No ascites.

COMMENT:

- Minimally enlarged spleen.
- Bilateral tiny renal concretions.

Kindly correlate clinically

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

Dr. Harsh Sanjay Vyas,

Consultant Radiologist



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FOR ALL YOUR
HEALTHCARE NEEDS

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Patient No. : 23225756 Report Date : 13/01/2024
Request No. : 190097418 13/01/2024 11.19 AM
Patient Name : Mr. DIPAK TANAJI KHOMANE
Gender / Age : Male / 29 Years 2 Months 27 Days

Echo Doppler Screening

MITRAL VALVE : NORMAL
AORTIC VALVE : TRILEAFLET, NORMAL
TRICUSPID VALVE : NORMAL, NO TR, NO PAH
PULMONARY VALVE : NORMAL
LEFT ATRIUM : NORMAL
AORTA : NORMAL
LEFT VENTRICLE : NORMAL, NO REGIONAL WALL MOTION ABNORMALITY,
LVEF=60-65%
RIGHT ATRIUM : NORMAL
RIGHT VENTRICLE : NORMAL
I.V.S. : INTACT
I.A.S. : INTACT
PULMONARY ARTERY : NORMAL
PERICARDIUM : NORMAL

COLOUR/DOPPLER : NO LV diastolic dysfunction,
FLOW MAPPING : NO AR, MR, TR, NO PAH

FINAL CONCLUSION:

1. ALL CARDIAC CHAMBERS ARE NORMAL IN DIMENSIONS
2. NO REGIONAL WALL MOTION ABNORMALITY AT REST
3. NORMAL LV SYSTOLIC FUNCTION, LVEF=60-65%
4. NORMAL VALVES
5. NO LV DIASTOLIC DYSFUNCTION
6. NO AR, MR, TR, NO PULMONARY HYPERTENSION , (IVC COLLAPSING)
7. NO PERICARDIAL EFFUSION, CLOT VEGETATION.

Dr.KILLOL KANERIA MD, DM
Consultant Cardiologist



Name: **Dipak t Khomane -**
Patient ID: **Ecu/ 23225756**

13.01.2024 12:03:39
Standard 12-Lead

BHAIJAL AMIN GENERAL HOSPITAL

Age: **029Y**
Gender: **Male**

Ref. phys:

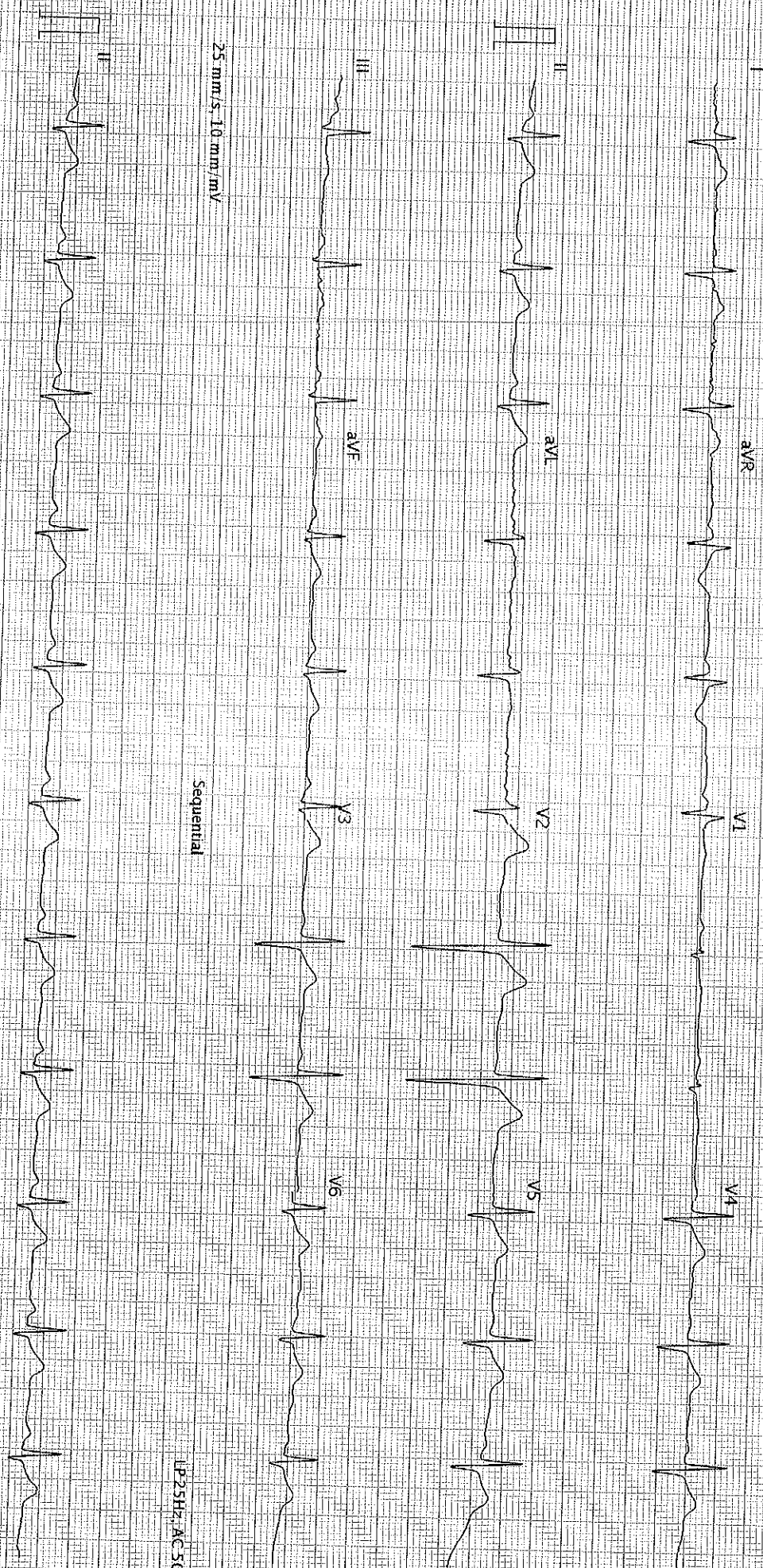
Facemaker: **Unknown**

Remark:

HR	66 bpm	RR	903 ms
P axis	43°	PR	105 ms
QRS axis	94°	QT	161 ms
T axis	45°	QTcB	90 ms
			326 ms
			396 ms

Unconfirmed report

pm



25 mm/s, 10 mm/mV

Sequential

LP 25Hz, AC 50Hz

25 mm/s, 10 mm/mV

AT-102-G2-1-Z-0 (0080-011030)

SCHILLER

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LP 25Hz, AC 50Hz

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