

संघ सरकार
Government of India

संघ सरकार अंतर्गत
Vishwa Kamdhenu Mission
2024 अंश / Year of Birth: 1964
पुरुष / Male



8372 3679 8641

आधार - सामान्य माणसाचा अधिकार

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Dr. Jal B. Raisinghani
M.D., D.S., D.L.
Clinical Otorhinolaryngologist
Reg. No. 29981 (MCI)



MER- MEDICAL EXAMINATION REPORT

Date of Examination	22/6/2024		
NAME	Vishwas R More		
AGE	59 yrs.	Gender:	male
HEIGHT(cm)	165cm	WEIGHT(kg):	62K BMI: 22.8
B.P.	110/80 mmHg		
ECG	Report Attached		
X Ray	" "		
Vision Checkup:	Left Eye		Right Eye
	Distance Vision:	6/6	6/6
	Near Vision:	6/6	6/6
	Color Vision:	Normal	
ENT / Audiometry Checkup	-		
Present Ailments	No		
Details of Past ailments (If Any)	No		
Comments / Advice : She /He is Physically Fit	He is Physically Healthy		
No Any medical History			

Dr. Jai B. Raisinghani

M.D., D. Card.
Clinical Cardiologist
Reg. No. 10881 (MCI)

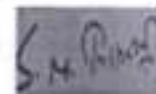
Signature with Stamp of Medical Examiner



Patient Name : Vishwas R More	Patient ID : AHCN-34018062401000
Age/Sex : 59 Years /Male	Register Date : 22 Jun, 2024
Ref. By : Apollo Health - Arcofemi - Mediwheel	Reported Date : 22 Jun, 2024

Investigation	Observed Value	Biological Reference Interval	Unit
CBC with ESR			
Hemoglobin (Hb)	13.1	13 - 17	g/dL
Hemoglobin %	77.06	0 - 100	
Total RBC Count	4.72	4.5 - 5.5	mill/cumm
Packed Cell Volume (PCV)	39.4	40.7 - 50.3	%
Mean Corpuscular Volume(MCV)	83.47	76.2 - 97.90	fL
Mean Corpuscular Hemoglobin (MCH)	27.75	27 - 33	pg/cell
Mean Corpuscular Hemoglobin Concentration (MCHC)	33.25	33 - 36	g/dL
Hematocrit Value (Hct)	39.4	40 - 50	%
Red cell Distribution Width (RDW)	14.5	11.5 - 14	%
Total WBC Count	8008	4000 - 11000	cumm
Neutrophils	67	40 - 70	%
Lymphocytes	24	20 - 40	%
Eosinophils	04	1 - 4	%
Monocytes	05	1 - 6	%
Basophils	00	0 - 1	%
Platelet Count	274000	150000 - 450000	/cumm
Erythrocyte Sedimentation Rate (ESR)	15	0 - 22	mm/hr

*****END OF REPORT*****



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 M.D. (Path)
 Reg No. 2000/04/1994

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Investigation	Observed Value	Biological Reference Interval	Unit
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BLOOD GROUP, ABO & RH TYPING

Blood Group, ABO & RH Typing

ABO Group	B
RH Factor	Positive

The test to determine your blood group is called ABO typing. Your blood sample is mixed with antibodies against type A and B blood. Then, the sample is checked to see whether or not the blood cells stick together. If blood cells stick together, it means the blood reacted with one of the antibodies.

Rhesus (Rh) factor is an inherited protein found on the surface of red blood cells. If your blood has the protein, you're Rh positive. If your blood lacks the protein, you're Rh negative.

Fasting Glucose And Post Prandial Glucose

Fasting Blood Glucose	93.04	70 - 110	mg/dL
Fasting Urine Glucose	Absent		
Fasting Urine ketone	Absent		
Post Prandial Blood Glucose	104.6	70 - 140	mg/dL
Post Prandial Urine Glucose	SNR		
Post Prandial Urine ketone	SNR		

Thyroid Function Test

Thyroid Function Test (TFT)

Serum Triiodothyronine (T3)	0.92	0.69 - 2.15	ng/mL
Serum thyroxine (T4)	96	52 - 127	ng/mL
Thyroid Stimulating Hormone (TSH)	2.86	0.5 - 5	µIU/mL

Alkaline Phosphatase

Alkaline Phosphatase	67	60 - 320	U/L
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Serum Calcium

Serum Calcium	8.9	8.6 - 10	mg/dL
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Interpretation

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Patient ID : AHCN-34018062401000

Age/Sex : 59 Years /Male

Register Date : 22 Jun, 2024

Ref. By : Apollo Health - Arcofemi - Mediwheel

Reported Date : 22 Jun, 2024

Glycosylated Hemoglobin(HbA1c)

Investigation	Observed Value	Biological Reference Interval	Unit
Glycosylated Hemoglobin(GHb/HbA1c)	5.9	5.7 - 6.4 <=5.6 Non-Diabetic 5.7-6.4 Borderline >6.4 Diabetic	%
Mean Blood Glucose	122.63	90 - 210 90-120 Excellent Control 121-150 Good Control 151-180 Average Control 181-210 Action Suggested >210 Panic Value	mg/dL

Comment

- HbA1c is an indicator of glycemic control. HbA1c represents average Glycemia over the past six to eight weeks. Glycation of Hemoglobin occurs over the entire 120 day life span of the Red Blood Cell, but within this 120 days. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four.
- Mean Plasma Glucose mg/dL = $28.7 \times A1C - 46.7$. Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only this means that to predict or estimate average glucose from HbA1c or vice-versa is not "perfect" but gives a good working ballpark estimate.
- Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime Glucose levels, which are easier to predict and control. As per IFCC recommendations 2007, HbA1c being reported as above maintaining traceability to both IFCC (mmol/mol) & NGSP (%) units.



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Age/Sex : 59 Years /Male

Register Date : 22 Jun, 2024

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Reported Date : 22 Jun, 2024

Lipid Profile

Investigation	Observed Value	Biological Reference Interval	Unit
Total Cholesterol	172.5	120 - 200	mg/dL
Serum Triglycerides	127.9	00 - 150	mg/dL
HDL Cholesterol	60.00	40 - 60	mg/dL
LDL Cholesterol	86.92	0 - 100	mg/dL
VLDL Cholesterol	25.58	0 - 30	mg/dL
Non-HDL cholesterol	112.50	- >130 Optimal	mg/dL
LDL HDL Cholesterol Ratio	1.45	1.5 - 3.5	
Total-HDL Cholesterol Ratio	2.88	3.5 - 5	
Triglycerides HDL Ratio	2.13		

Total Cholesterol (mg/dL)	HDL Cholesterol (mg/dL)	LDL Cholesterol (mg/dL)	Triglycerides (mg/dL)
Desirable <200	Low <40	Optimal <100 Near Optimal 100-129 Borderline High 130-159	Normal <150 Borderline High 150-199 High 200-499 Very High >500
Borderline High 200-239 High >240	High <60	High 160-189 Very High > 190	

*****END OF REPORT*****



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Age/Sex : 59 Years /Male

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Investigation	Observed Value	Biological Reference Interval	Unit
Liver Function Test (LFT)			
Total Bilirubin	0.62	0 - 2.0	mg/dL
Direct Bilirubin	0.16	0 - 0.3	mg/dL
Indirect Bilirubin	0.47	0.2 - 0.8	mg/dL
SGPT (ALT)	18.7	00 - 40	U/L
SGOT (AST)	20.7	0 - 40	U/L
Alkaline Phosphatase	67	60 - 320	U/L
Total Serum Protein	8.5	6.3 - 7.9	g/dL
Serum Albumin	4.5	3.5 - 5.5	g/dL
Serum Globulin	2.00	2.3 - 3.5	gm/dL
A/G Ratio	2.25	1.0 - 2.3	
Gamma Glutamyl Transferase (GGT)	17	0 - 60	U/L
Kidney Function Test (KFT)			
Blood Urea Nitrogen	8.50	8 - 20	mg/dL
Serum Urea	18.2	10 - 40	mg/dL
Serum Creatinine	0.84	0.60 - 1.40	mg/dL
Serum Calcium	8.9	8.5 - 10	mg/dL
Serum Potassium	3.7	3.8 - 5.2	mmol/L
Serum Sodium	138	135 - 145	mmol/L
Serum Uric Acid	5.8	3.5 - 7.2	mg/dL
Urea / Creatinine Ratio	21.67		
BUN / Creatinine Ratio	10.12		

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Investigation	Observed Value	Biological Reference Interval	Unit
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Calcium is one of the most important minerals in your body. You need calcium for healthy bones and teeth. Calcium is also essential for proper functioning of your nerves, muscles, and heart. About 99% of your body's calcium is stored in your bones.

25 Hydroxy Vitamin D

25 Hydroxy Vitamin D	85	75 - 250	nmol/L
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Interpretation:

LEVEL	REFERENCE RANGE IN nmol/L	COMMENTS
Deficient	< 50	High risk for developing bone disease
Insufficient	50-74	Vitamin D concentration which normalizes Parathyroid hormone concentration
Sufficient	75-250	Optimal concentration for maximal health benefit
Potential intoxication	>250	High risk for toxic effects

Note:

The assay measures both D2 (Ergocalciferol) and D3 (Cholecalciferol) metabolites of vitamin D. - 25 (OH)D is influenced by sunlight, latitude, skin pigmentation, sunscreen use and hepatic function. - Optimal calcium absorption requires vitamin D 25 (OH) levels exceeding 75 nmol/L. - It shows seasonal variation, with values being 40-50% lower in winter than in summer. - Levels vary with age and are increased in pregnancy. - A new test Vitamin D, Ultrasensitive by LC-MS/MS is also available. Comments Vitamin D promotes absorption of calcium and phosphorus and mineralization of bones and teeth. Deficiency in children causes Rickets and in adults leads to Osteomalacia. It can also lead to Hypocalcemia and Tetany. Vitamin D status is best determined by measurement of 25 hydroxy vitamin D, as it is the major circulating form and has longer half life (2-3 weeks) than 1,25 Dihydroxy vitamin D (5-8 hrs).

Decreased Levels:

- Inadequate exposure to sunlight
- Dietary deficiency
- Vitamin D malabsorption
- Severe Hepatocellular disease
- Drugs like Anticonvulsants
- Nephrotic syndrome

Increased levels:

- Vitamin D intoxication



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Investigation	Observed Value	Biological Reference Interval	Unit
Vitamin B12			
Vitamin B12	235	211 - 911	pg/mL

Interpretation

1. Interpretation of the result should be considered in relation to clinical circumstances.
2. It is recommended to consider supplementary testing with plasma Methylmalonic acid (MMA) or plasma homocysteine levels to determine biochemical cobalamin deficiency in presence of clinical suspicion of deficiency but indeterminate levels. Homocysteine levels are more sensitive but MMA is more specific.
3. False increase in Vitamin B12 levels may be observed in patients with intrinsic factor blocking antibodies, MMA measurement should be considered in such patients.
4. The concentration of Vitamin B12 obtained with different assay methods cannot be used interchangeably due to differences in assay methods and reagent specificity.

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Ref. By : Apollo Health - Arcofemi - Mediwheel	Reported Date : 22 Jun, 2024

Investigation	Observed Value	Biological Reference Interval	Unit
PSA (Prostate Specific Antigen), Free Result			
PSA (Prostate Specific Antigen), Free	3.25	0 - 4	ng/mL

Interpretation :

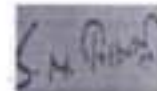
REFERENCE GROUP	FREE PSA 0-0.5 ng/mL	FREE PSA >0.5-2.5 ng/mL	FREE PSA >2.5-5.0 ng/mL	FREE PSA >5.0-10 ng/mL	FREE PSA >10.0 ng/mL
Healthy males	87.2 %	12.8%	0%	0%	0%
BPH	51.9%	42.9%	4.2%	0.5%	0.5%
Stage A Prostate Cancer	38.5%	42.3%	11.5%	3.8%	3.8%
Stage B Prostate Cancer	23.9%	68.7%	7.5%	0%	0%

Note:

- Free PSA values regardless of levels should not be interpreted as absolute evidence for the presence or absence of disease. All values should be correlated with clinical findings and results of other investigations
- False negative / positive results are observed in patients receiving mouse monoclonal antibodies for diagnosis or therapy
- Free PSA levels may appear consistently elevated / depressed due to the interference by heterophilic antibodies & nonspecific protein binding.
- Immediate Free PSA testing following digital rectal examination, ejaculation, prostatic massage, ultrasonography and needle biopsy of prostate is not recommended as they falsely elevate levels
- Hormone therapy affects Free PSA expression

Clinical Use:

- An aid in the early detection of Prostate cancer in males 50 years or older with Total PSA values between 4.0 and 10.0 ng/mL and nonsuspicious digital rectal examination.
- An aid in discriminating between Prostate cancer and Benign Prostatic disease. Free PSA level is not used alone, but is mostly useful when expressed in a ratio with Total PSA. Hence PSA profile (Total + Free PSA) is the recommended test. Patients with benign conditions have a higher proportion of Free PSA compared with Prostate cancer



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Age/Sex : 59 Years /Male

Register Date : 22 Jun, 2024

Ref. By : Apollo Health - Arcofemi - Mediwheel

Reported Date : 22 Jun, 2024

Urine Examination Routine

Urine Examination Routine

Investigation	Observed Value	Biological Reference Interval	Unit
Quantity	20 ml		ml
Appearance <i>clear</i>	Clear		
Colour	Pale yellow		
PH	6.0	5.0 - 8.0	
Specific Gravity	1.015	1.005 - 1.030	
Proteins	Absent		
Glucose	Absent		
Ketones	Absent		
Bilirubin	Absent		
Urobilinogen	Absent		
Leucocyte Esterase	Absent		
Nitrite	Absent		
Occult Blood	Absent		
R.B.C.	Absent		
Pus Cells	2-4	0-5	WBC / hpf
Epithelial Cells	2-1	0-2	/hpf
Casts	Absent	0-0	/pf
Crystals	Absent		
Amorphous Material	Absent		
Bacteria	Absent		

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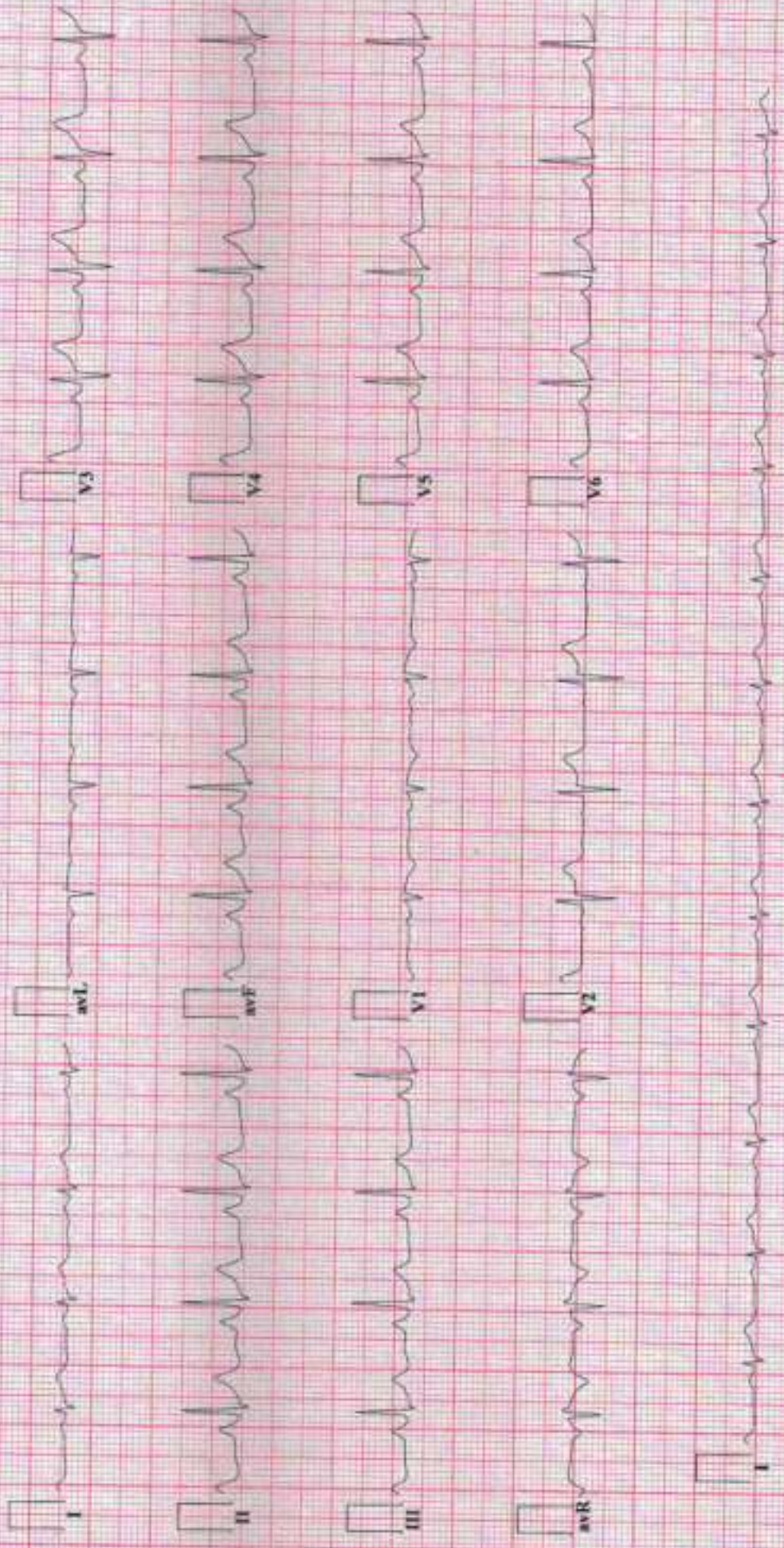
29 Vishwas More
 59 Yrs M 62 Kg / 165 cms Ref. No.:
 Date: 22/05/2024 Time: 09:48 AM

KNA Healthcare
 KALYAN EAST (MUMBAI)

BP: -- mmHg
 Natch: On

Cain: 10 mm/mV
 Sweep: 25 mm/s
 Filter: 0.1 - 35 Hz

HR: 73 QRS Int: 70 P Axis: 73 Ref: By
 P Int: 86 QT Int: 324 QRS Axis: 71 Tech:
 PR Int: 168 QTc Int: 357 T Axis: 67



Comments: Sinus Rhythm

[Signature]

within Normal limits.

Impression: Normal ECG

Normal ECG



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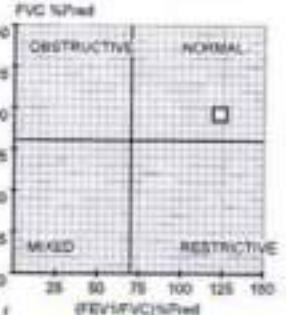
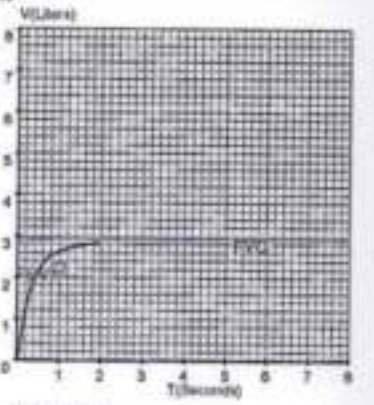
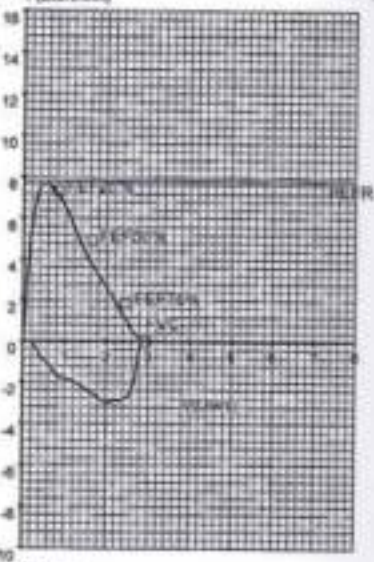
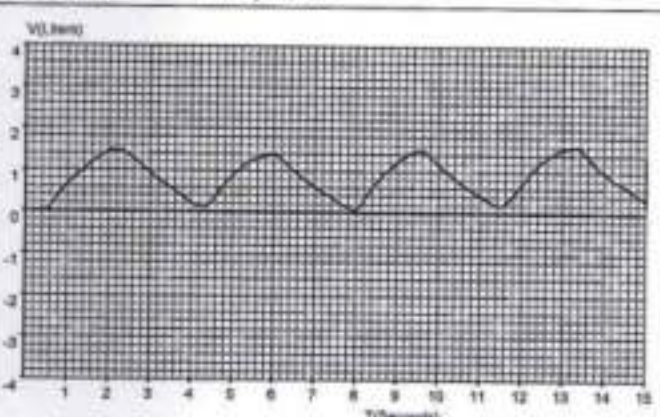
Printed on: 22/05/2024

BPL DYNATRAC

06 - VISHWAS MORE
59 Years / Male / Ht 165 Cms / 62 Kgs / Non-Smoker

Combined Report
Date: 22-06-2024 (T2)

Pred Eqn : CLARITY Eth.Corr : 100 Temp : 0°C
Ref By : NONE



NORMAL

Parameter	Unit	Pre	Pre	Pre%	Post	Post%	Imp%
FVC	[L]	2.85	2.92	98	-	-	-
FEV1	[L]	2.33	2.85	119	-	-	-
FEV5	[L]	-	2.24	-	-	-	-
FEV5	[L]	2.85	-	-	-	-	-
FEV5	[L]	-	-	-	-	-	-
FEFR	[L/s]	7.83	7.60	98	-	-	-
FEF25-75	[L/s]	2.89	4.85	162	-	-	-
FEF75-95	[L/s]	-	1.84	-	-	-	-
FEF2-12	[L/s]	5.34	6.71	126	-	-	-
FEF25%	[L/s]	7.33	8.75	119	-	-	-
FEF50%	[L/s]	4.92	4.97	101	-	-	-
FEF75%	[L/s]	1.67	2.45	152	-	-	-
FEV1/FVC	[%]	-	79.18	-	-	-	-
FEV1/FVC	[%]	76.54	93.00	123	-	-	-
FEV3/FVC	[%]	87.00	-	-	-	-	-
FEV6/FVC	[%]	-	-	-	-	-	-
FEV1/FEM	[%]	-	-	-	-	-	-
FET	[s]	-	1.90	-	-	-	-
ExpTime	[s]	-	5.09	-	-	-	-
UnspGr	[g]	33.00	48.00	81	-	-	-
FVC	[L]	-	2.56	-	-	-	-
PFR	[L/s]	-	2.96	-	-	-	-
PF25%	[L/s]	-	8.95	-	-	-	-
SVC	[L]	-	3.01	-	-	-	-
SRV	[L]	1.37	6.11	10	-	-	-
RV	[L]	-	0.76	-	-	-	-
VE	[L]	-	20.88	-	-	-	-
RF	[%]	-	8.49	-	-	-	-
TI	[s]	-	2.73	-	-	-	-
TE	[s]	-	3.04	-	-	-	-
VT	[L]	-	2.21	-	-	-	-
VT/VI	[%]	-	0.81	-	-	-	-
VT/VE	[%]	-	0.43	-	-	-	-
MVV	[L]	111.54	22.43	20	-	-	-
MRF	[%]	-	4.33	-	-	-	-
MVT	[s]	-	1.38	-	-	-	-
Ti	[s]	-	8.83	-	-	-	-
Te	[s]	-	10.12	-	-	-	-
TE/TI	[%]	-	1.53	-	-	-	-

* Pre: Symptomatic with Normal range as FVC% > 80 and FEV1/FVC > 70



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Dr. Jai RajSinghani

Not For Medico Legal Purpose



SHREE GANESH DIAGNOSTIC CENTER

Let's do good...

SONOGRAPHY | COLOR DOPPLER | DIGITAL X-RAY | PATHOLOGY

Dr. Abhishek Singh

MBBS, DMRE, FMF (Mumbai)

Consultant Radiologist & Sonologist

Previous post in

- 1) Krishna Scan (Chennai)
- 2) Premier Scan (Kerala)
- 3) Shubha Atomic Research Centre (Chembur, Mumbai)
- 4) Lokmanya Tilak Hospital (Scot, Mumbai)
- 5) Maharishi Vaidika Hospital (Delhi)

Name of Patient: VISHWAS MORE	Age/Sex: 59 Years / MALE
	Date: 22/06/2024

SONOGRAPHY OF ABDOMEN & PELVIS

Liver is normal in size and shape with bright parenchymal echotexture & without any focal mass.

Gall bladder is physiologically distended without any calculus.

Common bile duct is normal in diameter.

Portal vein is normal in diameter.

Pancreas and upper para-aortic regions are normal.

Spleen appeared normal in size and shape with normal echotexture.

Right kidney is normal in size and shape with normal echotexture.

Left kidney is normal in size and shape with normal echotexture.

Approx. 32 x 29 mm sized simple cyst noted in lower pole cortex of left kidney.

Renal cortex pyramids and central echo complex are normal.

No hydronephrosis, ureteric dilatation or calculus is seen on either side.

No focal mass or fluid collection is seen in either iliac fossa.

Urinary bladder is normal without any intrinsic mass or calculus.

Prostate is normal in size.

No ascites is seen. No abnormal bowel thickening or dilatation is noted.

IMPRESSION:

- > Grade I fatty infiltration of liver.
- > Left renal simple cortical cyst.

DR ABHISHEK SINGH,
MBBS DMRE FMF
CONSULTANT RADIOLOGIST



SHREE GANESH DIAGNOSTIC CENTER

Let's do good...

SONOGRAPHY | COLOR DOPPLER | DIGITAL X-RAY | PATHOLOGY

Dr. Abhishek Singh

MBBS, DMRE, FMF (Mumbai)

Consultant Radiologist & Sonologist

Previous post in

1) Krishna Scan (Chennai)

2) Premier Scan (Kerala)

3) Bhakti Atomic Research Centre (Chembur, Mumbai)

4) Lokmanya Tilak Hospital (Sion, Mumbai)

5) Mahatma Vaidya Hospital (Delhi)

Name of patient : VISHWAS MORE	Age/Sex : 59Years/MALE
	Date: 22/06/2024

RADIOGRAPH OF CHEST PA VIEW

Both the lung fields are clear.

The broncho vascular markings are appears normal.

The hilar shadows are appears normal.

Both Cardiophrenic and Costophrenic angles are clear.

The Cardiac silhouette is within normal limits.

Aortic shadow is normal.

Both domes of diaphragms are normal.

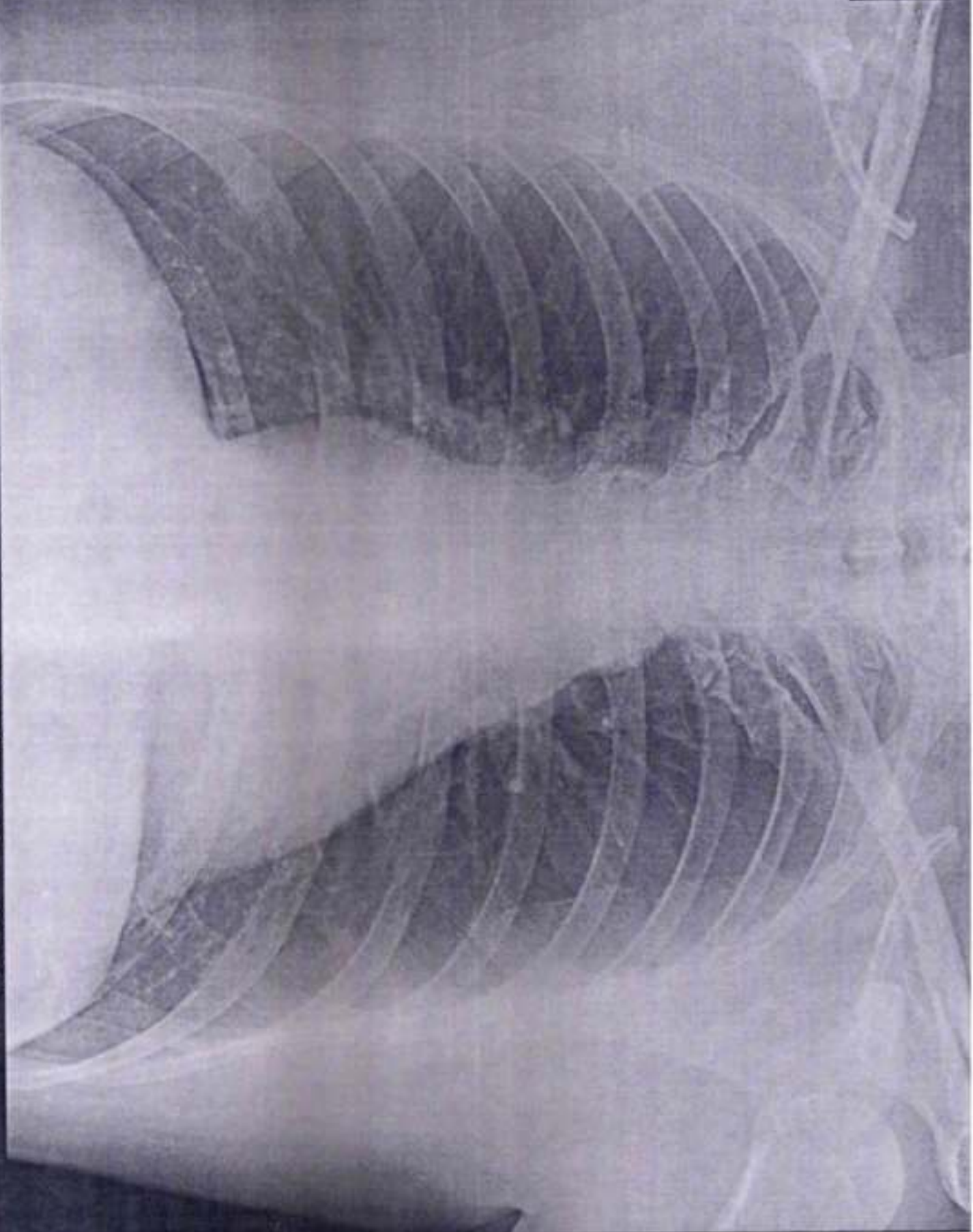
The visualised bony thorax is normal.

CONCLUSION : No Active Pulmonary Parenchymal Lesion is seen.

Abhishek

DR ABHISHEK SINGH,
MBBS DMRE FMF
CONSULTANT RADIOLOGIST

R



VISHWAS MORE 59 Y M 976446 CHEST,FRN P->A 22 6 24
SHREE GANESH DIAGNOSTIC CLINIC



Treadmill Exercise Test Consent Form

Patient Name: Vishwas R. More
Patient DOB: 09/12/1964 Blood Pressure: _____
History *(If Any): No

The treadmill exercise test includes walking and/or jogging on a moving belt for the purpose of testing the functional performance of your heart, blood vessels, and especially the coronary arteries. Preparation for the test includes shaving the chest (if warranted), rubbing the chest area with alcohol and an abrasive material. This may cause slight skin irritation.

During your treadmill exercise test, your blood pressure and electrocardiogram will be monitored. There exists the possibility of certain changes occurring during the test which include: abnormal blood pressure, fainting, disorders of the heartbeat, and in very rare instances, a heart attack (less than 1 in 10,000).

Such occurrences may require the administration of various medications, the use of needles, or other treatments and procedures as needed.

I recognize that unforeseen conditions arising during the course of the procedure listed above may necessitate additional procedures or an extension of those procedures set forth.

I have read, understand and agree to all of the above statements. I have had an opportunity to ask questions about the exercise test, and feel that the test, its risks and benefits have been adequately explained to me. I, for myself, or for the patient named above, give consent for the exercise test to be performed at the facilities of Personalized Physicians.

Patient Signature

Witness (Name & Signature)



607 Vishwas More Ref No:
60 Year M 62 Kg / Ht-165 cms

Date: 22/06/2024 Ref By: Bruce
Time: 09:57 AM Protocol:

Summary

[Signature]
KNA HEALTH CARE

History:
Medication:

Stage	Stg Time (min)	Speed (min)	Grade (%)	METS	HR (bpm)	BP (mmHg)	RRP	PVCs
Pre Ex				1	78	110/80	86	
Supine				1	74	110/80	81	
Hip Vent				1	79	110/80	87	
Standing				1	82	110/80	90	
91	03:00	1.7	10.0	4.8	109	110/80	120	
82	03:00	2.5	12.0	6.9	126	110/90	139	
Peak Ex	01:01	3.4	14.0	9.5	141	120/80	109	
Post Ex 1	01:00			1	93	140/80	130	
Post Ex 2	01:00			1	90	130/90	117	
Post Ex 3	01:00			1	91	130/80	118	
Post Ex 4	00:09			1	91	130/80	118	
Final				1		130/80		

Findings: Exercise Time : 07:01 mins
Max HR attained : 141 bpm 87 % of Target 161 bpm
Max BP : 140/80mmHg
Max Workload attained : 9.5 METs (Good Effort Tolerance)
Reason for Test Termination: Patient Completed Test

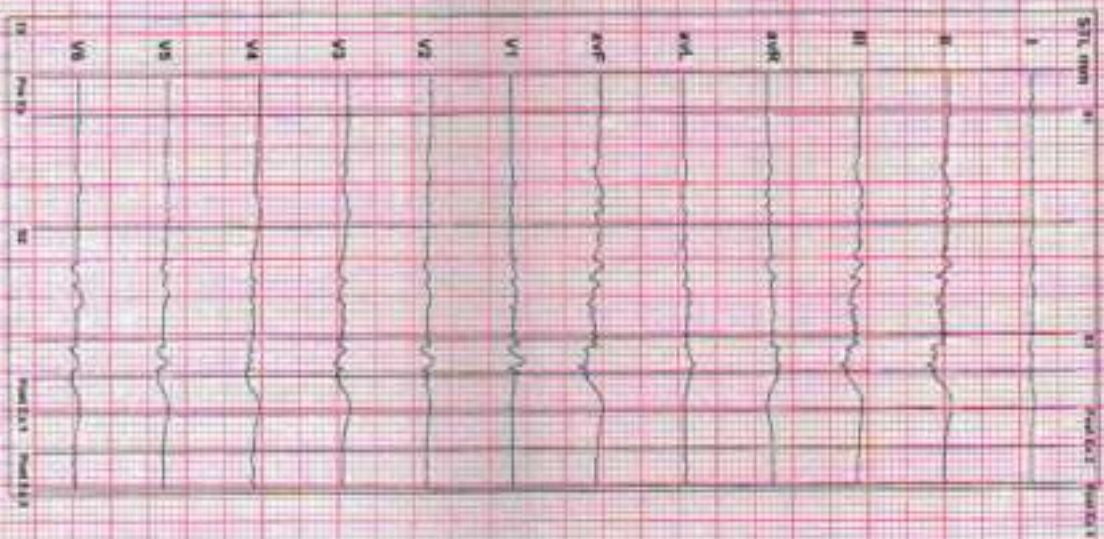
No significant ST segment changes noted during exercise or recovery stages.
No Angina / Arrhythmia / S3 / Murmur
Final Impression : Test is negative for inducible ischaemia.

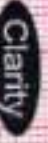


Test is negative for inducible ischaemia

Dr. Jal B Raisinghani

M.D. D'Card
Clinical Cardiologist
Reg. No. 23861 (MCI)





KNA HEALTH CARE

KALYAN EAST (MUMBAI)

507 Vishwas More
 59 Yr/ M 62 Kg / 161-155 cm Ref No.
 Date: 22/06/2024 Time: 09:57 AM

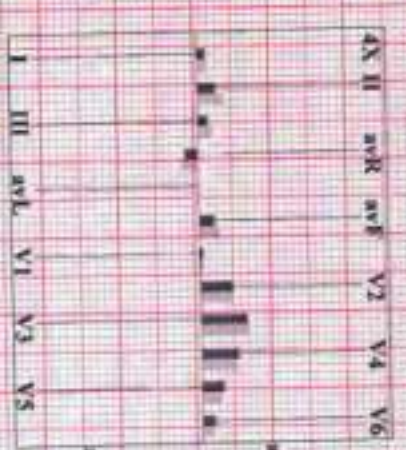
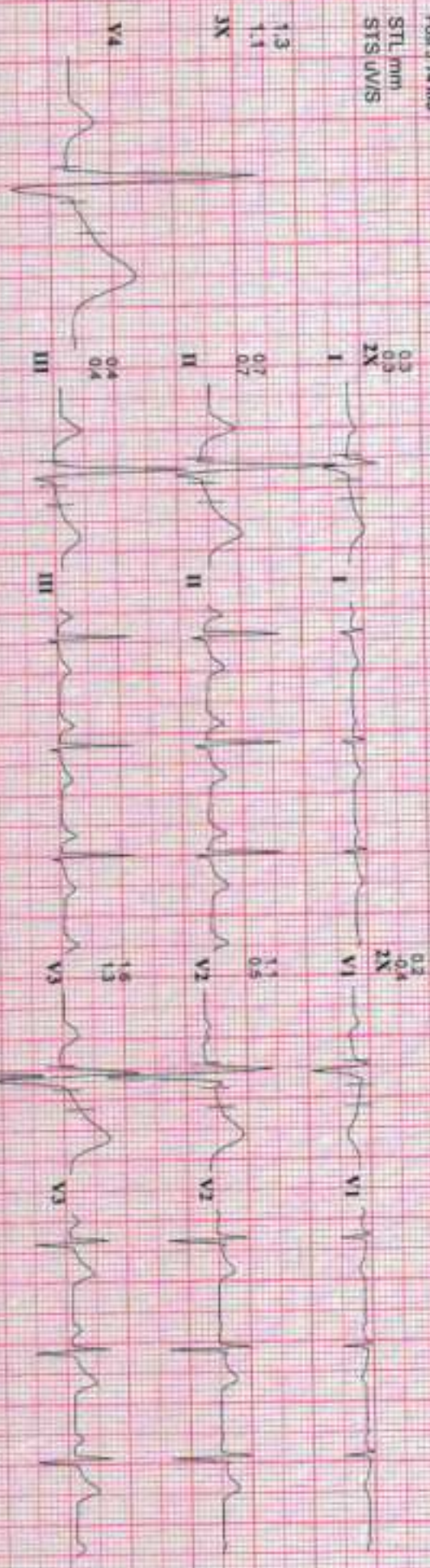
Speed: — mph W: 74 Target Ht: 45 % of 161 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
 Grade: — % Mics: 1 Ex Time: — min-sec B.C. On Sweep: 25 mm/s
 Precord Brnch: Sp: 150/80 mmHg Cur Time: 00:14 NoordOn Modest Speed: 25 mm/s

Linked Medians
 Pre Ex
 Supine

Post J 74 m/s
 STL mm
 STS uV/s

1.3
 1.1
 2X

V4





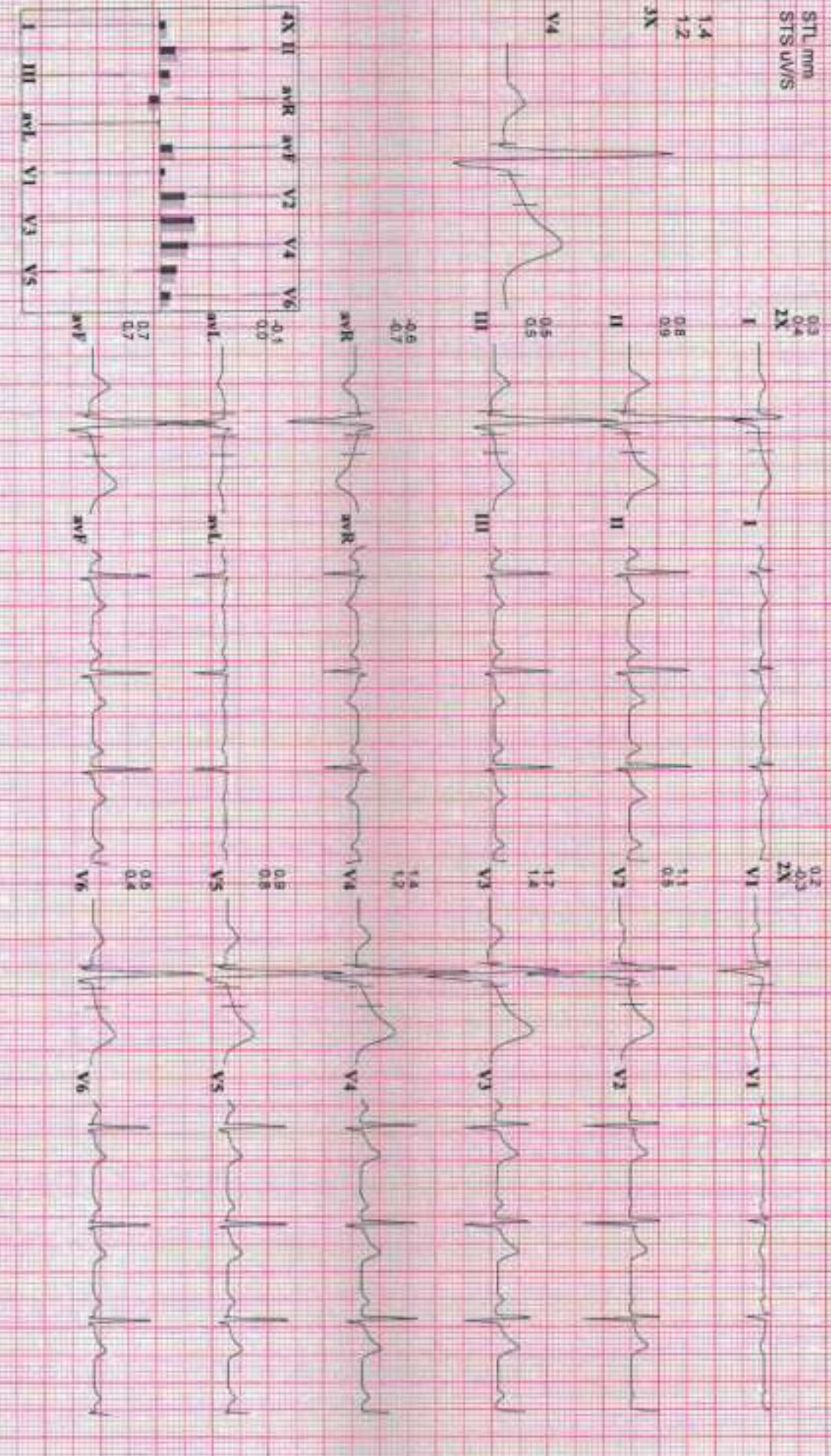
KNA HEALTH CARE

KALYAN EAST (MUMBAI)

657
 58 Yrs M 62 Kg / 161.16 cms
 Date 22/06/2024 Time 09:57 AM
 Post 2 79 ms
 STL mm
 STS uV/s

Speed — mm/s 79
 Grade — %
 Protocol Bruce BP 110/80 mmHg Cur Time 00:29
 Target (% of 161) Filter 0.1 - 100 Hz
 Ex Time — min:sec BLC ON
 Notch ON
 10 mm/mV
 25 mm/s
 Medial Speed 25 mm/s

Linked Medians
 Pre Ex
 Hyp Vent





KNA HEALTH CARE

KALYAN EAST (MUMBAI)

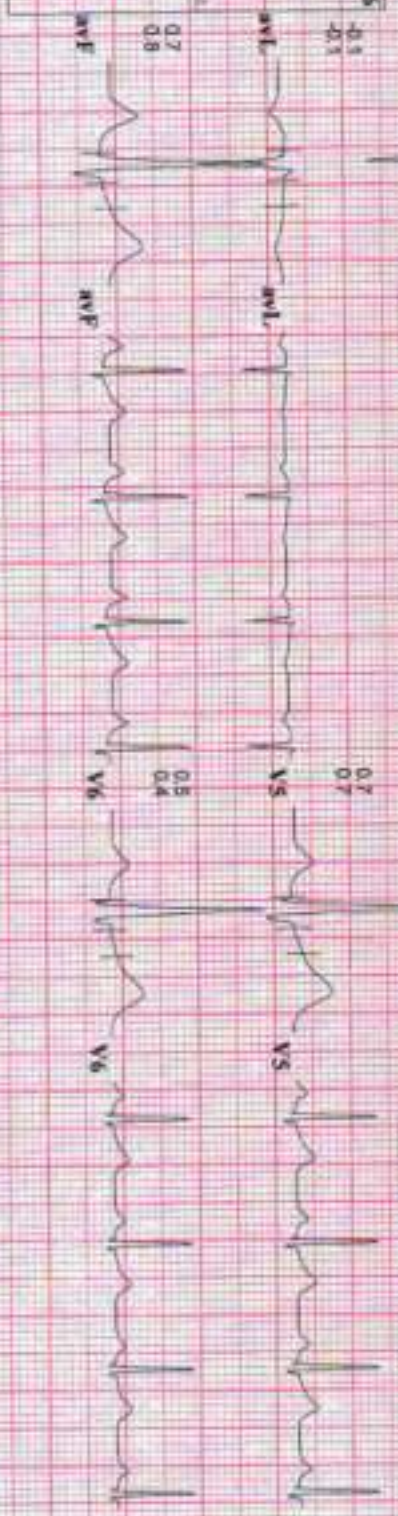
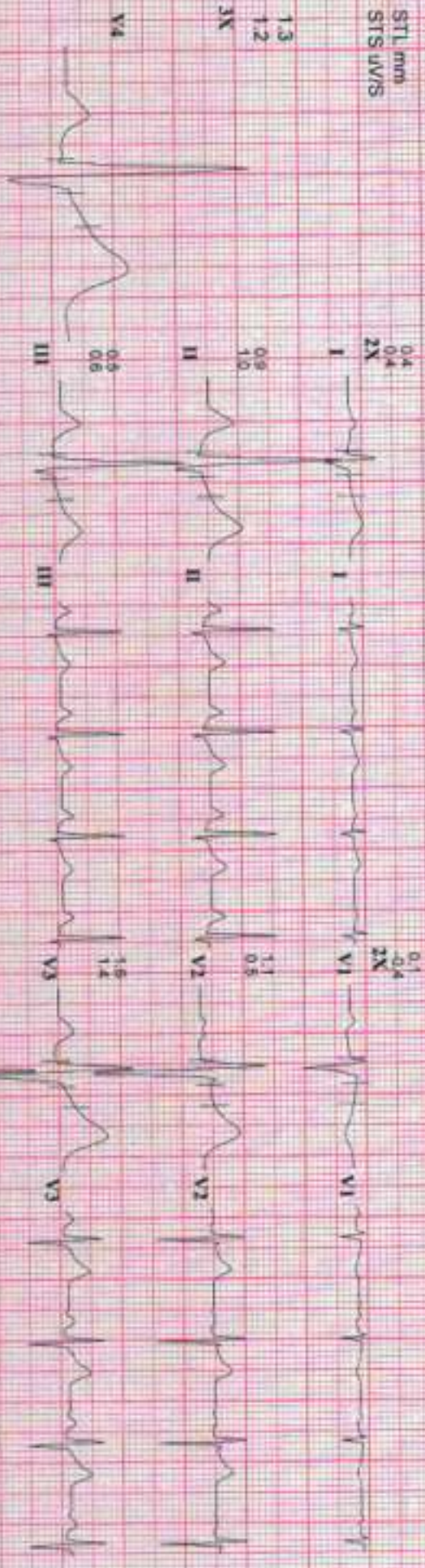
DO# 807
 80 Vial M
 Date 22/09/2024 Time 09:57 AM
 Post 1 77 mts
 STL mm
 STS uV/S

Speed 0 mph
 Grade 0%
 Physical Bruce 0R
 Hr 82
 Meds 1
 110880 mmtg
 Target Hr 80 % of 161
 Ex Time 00 min sec
 Cur Time 00:52
 Fiber 0.1 - 100 Hz
 Gain
 BLD On
 Nochr On
 10 mm/min V
 25 mm/5S
 Median Sweep 25 mm/5S

Linked Medians
Pre Ex
Standing

1.3
1.2
3X

V4





KNA HEALTH CARE

KALYAN EAST (MUMBAI)

857 Vishwas More
58 Yrs M 62 Kg / Ht-155 cms Ref.No.
Date: 22/05/2024 Time: 09:57 AM

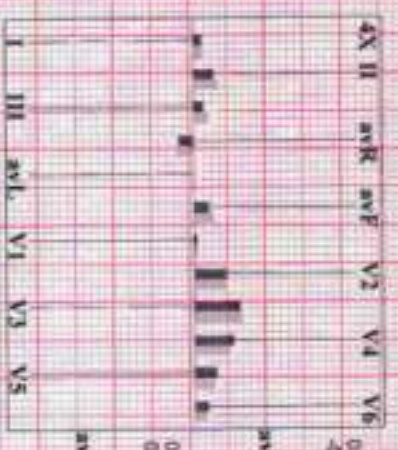
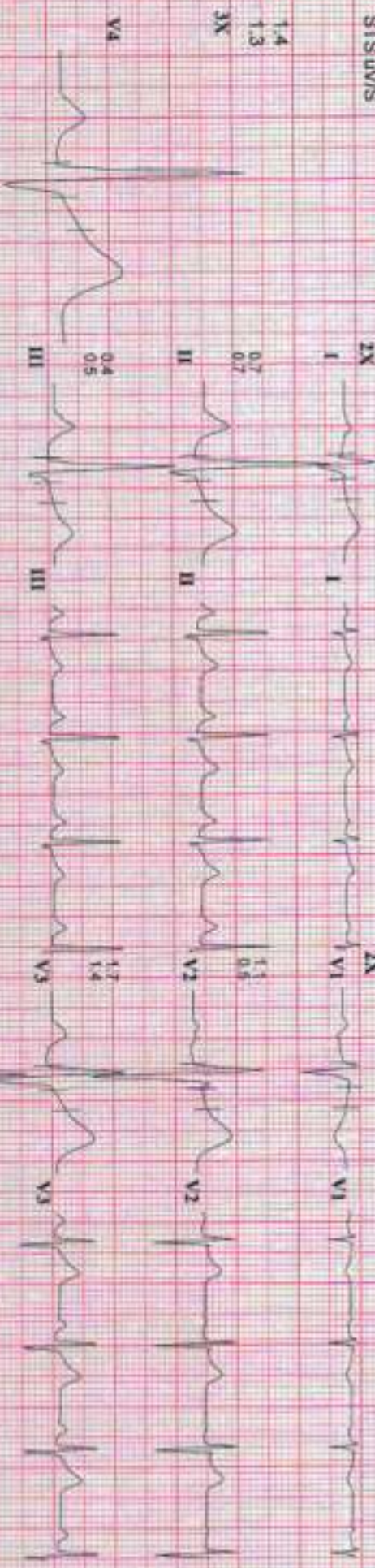
Speed: — mph Hr: 72 Target hr: 44 % of 161 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
Grade: — % Metts: 1 Ex Time: — min-sec B.L.C. On Sweep: 25 mm/s
Protocol: Bruce BPs: 110/88 mmHg Cur Time: 00:08 Notch/On Median Sweep: 25 mm/s

Linked Medians
Pre Ex

Pace: 79 mb
STL mm
STSLV/S

1.4
1.3
3X

V4





KNA HEALTH CARE

KALYAN EAST (MUMBAI)

SET
69 Yr/ M
Date: 22/06/2024 Time: 09:57 AM
Phys: J. 78 m/s

Speed: 1.7 m/s
Grade: 10 %
Protocol: Bruce
HR: 109
Meds: 4.8
BP: 110/80 mmHg

Target HR: 67 % of 181
Ex Time: 03:00
Cur Time: 03:52
Filter: 0.1 - 100 Hz
BLD: On
Med: On

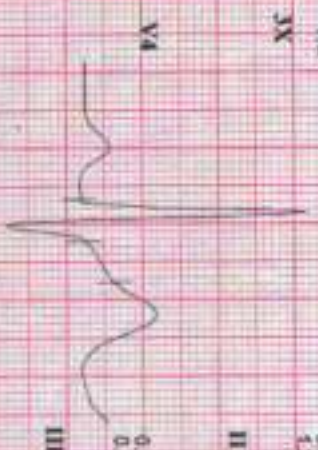
10 mm/mV
25 mm/s
Medien Sweep: 25 mm/s

Linked Medians
S1

STL mm
STS uV/s

0.9
1.3
3X

V4



0.3
0.5
2X

I

0.4
1.2

II

0.1
0.7

III

-0.3
-0.8

aVR

0.1
-0.1

aVL

0.3
0.9

aVF

0.4
0.8

V1

0.6
0.8

V2

1.3
1.5

V3

0.8
1.3

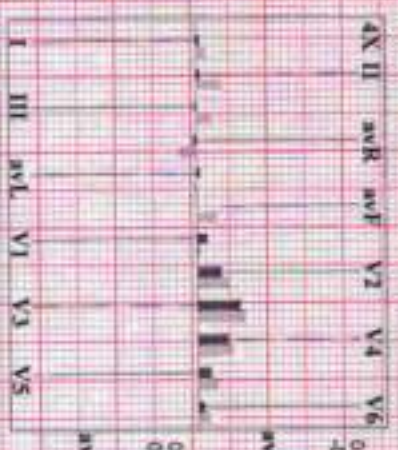
V4

0.6
0.8

V5

0.4
0.8

V6





KNA HEALTH CARE

KALYAN EAST (MUMBAI)

907 Vishwas More
58 Yr/ M 52 Kg / Ht-165 cms (Ref No.)
Date: 22/05/2024 Time: 09:57 AM

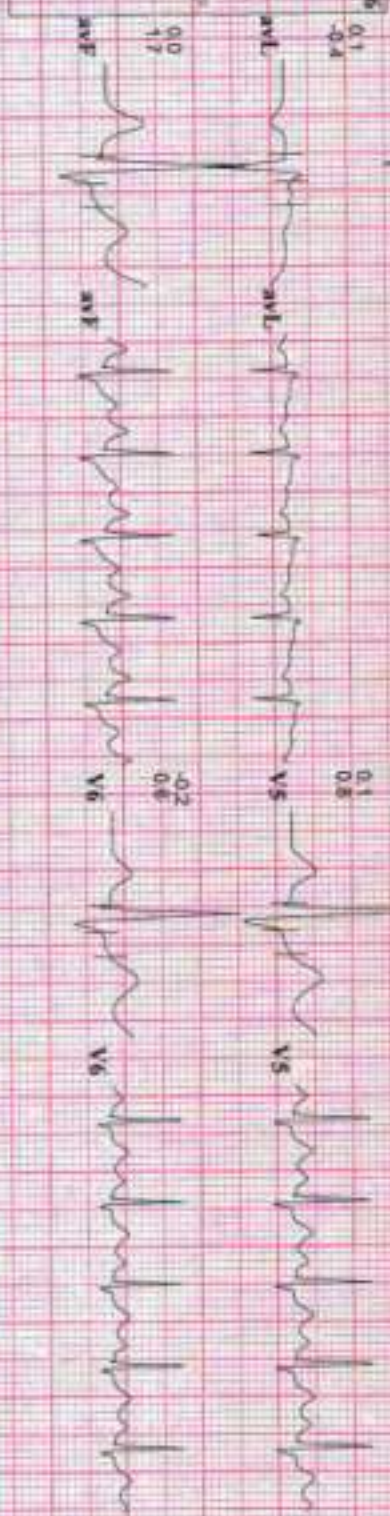
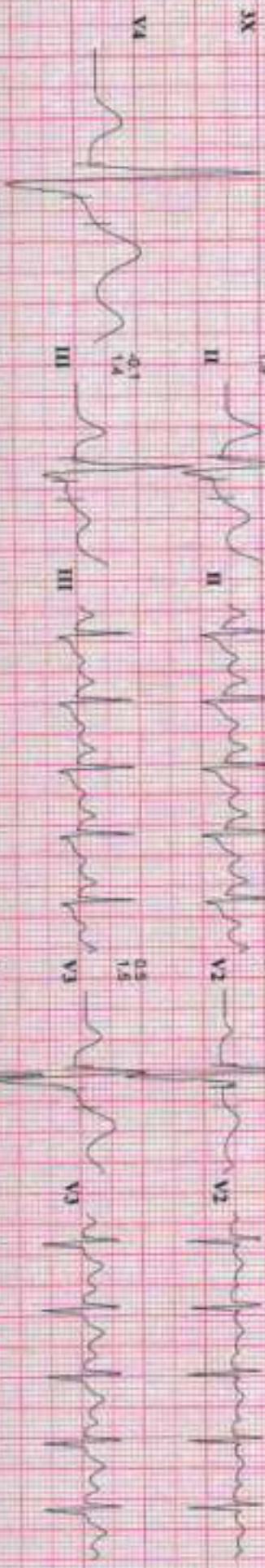
Speed: 2.5 mmph Hr: 126 Target hr: 78 % of 161 Fibr: 0.1 - 100 Hz. Clear: 10 mm/mV
Grade: 12 % Male: 6.9 Ex Time: 06:00 A.C: On Sweep: 25 mm/s
Protocol: Bruce BP: 110/80 mmHg Cur Time: 06:52 Mod/Dia: Medium Sweep: 25 mm/s

Linked Medians
S2

Papd J 69 ms
STL mm
STS Jv/S

0.1
1.1
3X

V4





KNA HEALTH CARE

KALYAN EAST (MUMBAI)

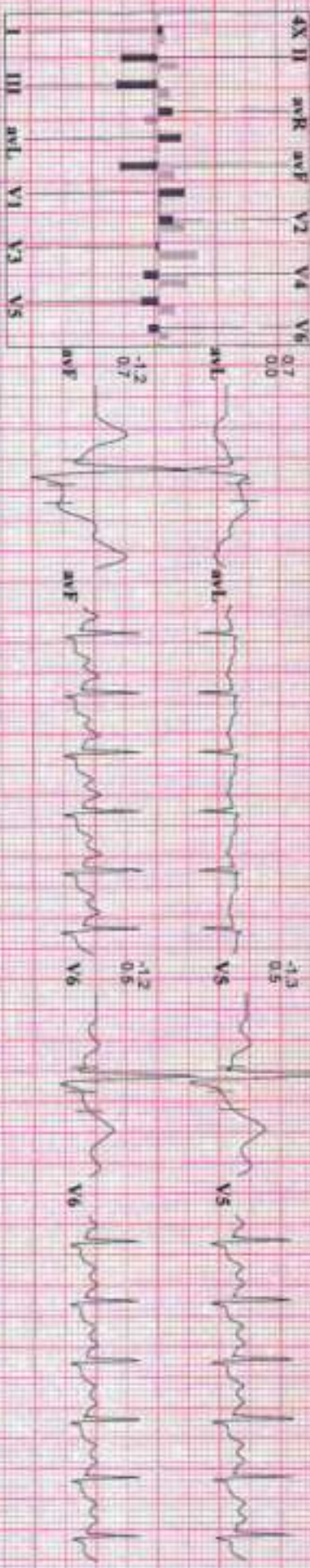
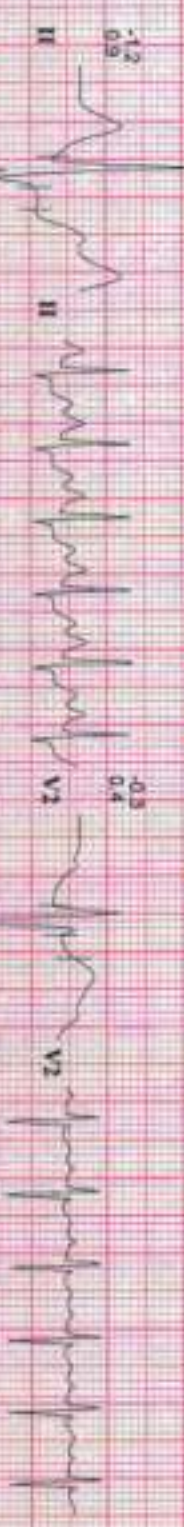
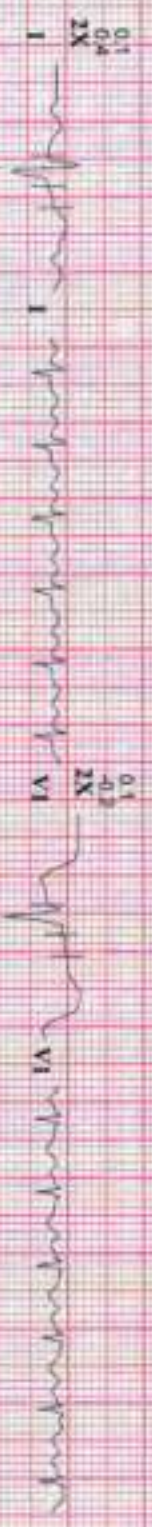
807 Vishwas More
50 Yrs M 52 Kg / Ht-165 cms RefNo:
Date: 22/06/2024 Time: 09:57 AM

Speed: 2.4 m/s Ht: 161 Target Ht: 87% of 161
Grade: 14 % Mass: 9.5 Ex Time: 07:01
Protocol: Bruce BP: 120/80 mmHg Cur Time: 07:53

Filter: 0.1 - 100 Hz Gain: 10 mm/mV
BLG: On Sweep: 25 mm/s
Notation Median Sweep: 25 mm/s

Linked Medians
Peak Ex

Pap: 1.65 m/s
STL: min
STS: U/V/S





KNA HEALTH CARE

KALYAN EAST (MUMBAI)

Linked Medians
Post Ex 1

607
50 Yrs / M
Date 22/05/2024 Time: 09:57 AM
Post: J 60 m/s

Vishwas More
62 Kg / Ht-165 cms
Ref No:
Speed: — m/s
Grade: — %
Protocol: Bruce

HR: 83
Met/s: 1
BP: 140/80 mmHg
Target HR: 57% of 161
Ex Time: 07:01
Cur Time: 06:53
Filter: 0.1 - 100 Hz
BLC: On
Modulation

10 mm/mV
25 mm/s
Medien Sweep: 25 mm/s

STL mm
STS uV/S

0.4
0.7
2X

0.2
0.4
2X

1.1
1.7
3X

0.9
1.9
2X

0.8
0.8
2X



0.5
1.2
3X

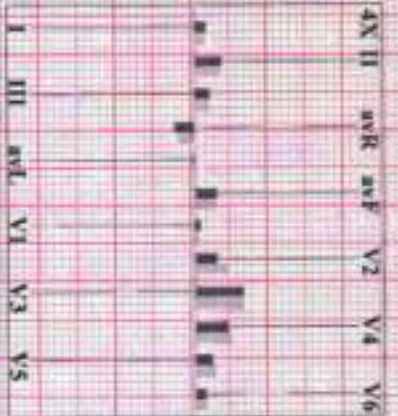
1.7
2.0
2X

0.0
0.3
2X

0.6
1.2
2X

0.7
1.5
2X

0.4
0.9
2X





KNA HEALTH CARE

KALYAN EAST (MUMBAI)

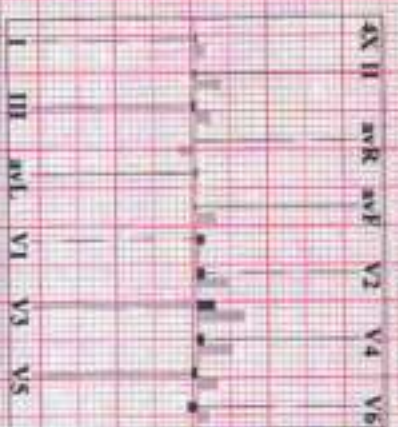
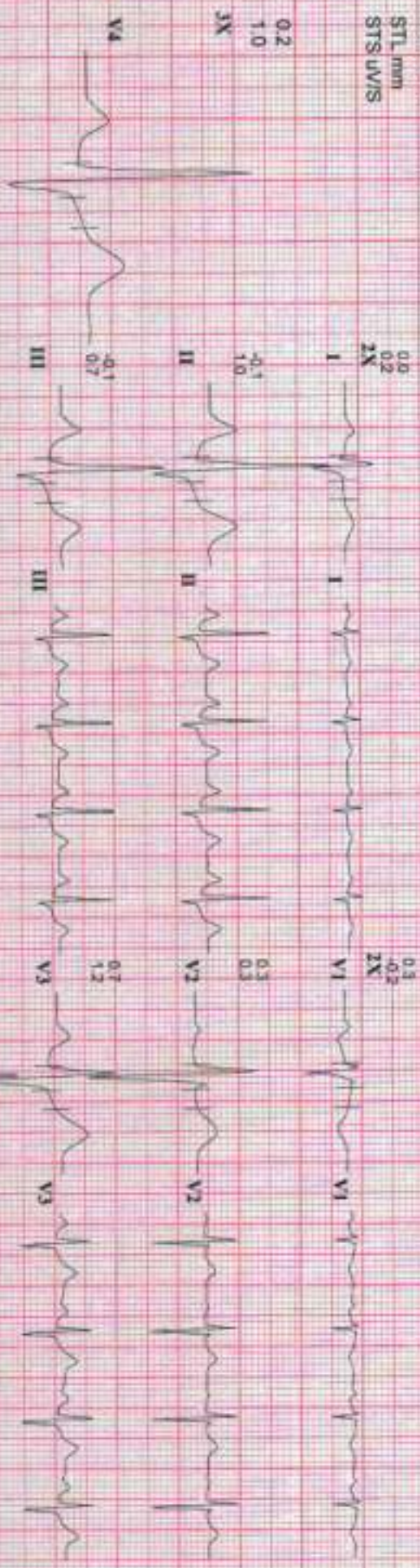
007 Vishwas More
59 Yrs M 62 Kg / 16-165 cms Ref No:
Date: 22/06/2024 Time: 09:57 AM

Speed: — mph hr 90 Target hr: 55 % of 161 ± max 0.1 - 100 Hz Gain: 10 mm/mV
Grade: — % Meds: 1 Ex Time: 07:01 B.C. On Sleep 25 mm/s
Protocol: Bruce BP: 130/90 mmHg Car Time: 09:53 Notation: Median Speed: 25 mm/s

Linked Medians
Post Ex 2

Pace: 73 m/s
STL mm
STS: LV/VS

0.2
1.0
3X





KNA HEALTH CARE

KALYAN EAST (MUMBAI)

Linked Medians

Post Ex 3

607 Vishwas More
68 Yr/M 62 Kg / Ht-165 cms Ref.No.
Date: 22/06/2024 Time: 09:57 AM
Pulse: 73 ms

Speed: 25 mm/s
Gain: 10 mm/mV
Filter: 0.1-100 Hz
Sweep: 25 mm/s
Mod'n Sweep: 25 mm/s

STL mm
STSRV/S

Speed: 25 mm/s
Gain: 10 mm/mV

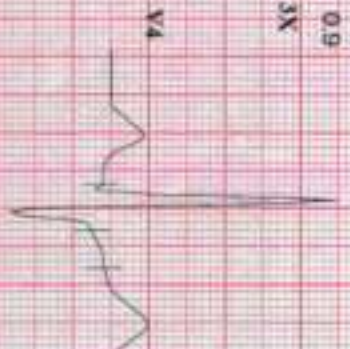
Filter: 0.1-100 Hz
Sweep: 25 mm/s

Mod'n Sweep: 25 mm/s

STL mm
STSRV/S

0.2
0.9
3X

V4



I
II
III
aVR
aVL
aVF

0.0
0.2
2X

Speed: 25 mm/s
Gain: 10 mm/mV

Filter: 0.1-100 Hz
Sweep: 25 mm/s

Mod'n Sweep: 25 mm/s

STL mm
STSRV/S

0.1
0.8

Speed: 25 mm/s
Gain: 10 mm/mV

Filter: 0.1-100 Hz
Sweep: 25 mm/s

Mod'n Sweep: 25 mm/s

STL mm
STSRV/S

0.1
0.6

Speed: 25 mm/s
Gain: 10 mm/mV

Filter: 0.1-100 Hz
Sweep: 25 mm/s

Mod'n Sweep: 25 mm/s

STL mm
STSRV/S

0.1
0.5

Speed: 25 mm/s
Gain: 10 mm/mV

Filter: 0.1-100 Hz
Sweep: 25 mm/s

Mod'n Sweep: 25 mm/s

STL mm
STSRV/S

0.1
0.5

Speed: 25 mm/s
Gain: 10 mm/mV

Filter: 0.1-100 Hz
Sweep: 25 mm/s

Mod'n Sweep: 25 mm/s

STL mm
STSRV/S

0.1
0.5

Speed: 25 mm/s
Gain: 10 mm/mV

Filter: 0.1-100 Hz
Sweep: 25 mm/s

Mod'n Sweep: 25 mm/s

STL mm
STSRV/S

0.0
0.2

Speed: 25 mm/s
Gain: 10 mm/mV

Filter: 0.1-100 Hz
Sweep: 25 mm/s

Mod'n Sweep: 25 mm/s

STL mm
STSRV/S

0.1
0.7

Speed: 25 mm/s
Gain: 10 mm/mV

Filter: 0.1-100 Hz
Sweep: 25 mm/s

Mod'n Sweep: 25 mm/s

STL mm
STSRV/S

0.3
0.8

Speed: 25 mm/s
Gain: 10 mm/mV

Filter: 0.1-100 Hz
Sweep: 25 mm/s

Mod'n Sweep: 25 mm/s

STL mm
STSRV/S



REG: Vishwas More
 59 Yrs / M 62 Kg / Ht-165 cm Ref.No.
 Date: 22/06/2024 Time: 09:57 AM
 Post: 275 amb

Speed: 25 mm/s
 Grade: 1%
 Protocol: Bruce
 Hr: 91
 Min: 1
 BP: 130/80 mmHg
 Target Hr: 56% of 161
 Ex Time: 07:01
 Cur Time: 11:12

Filter: 0.1 - 100 Hz
 Gain: 10 mm/mV
 SMC: On
 Notch: On
 Sweep: 25 mm/s
 Median Sweep: 25 mm/s

Linked Medians
 Post Ex 4

STL mm
 STS uV/S

0.2
 0.9
 IX

