



# CHANDAN DIAGNOSTIC CENTRE

Add: Indra Deep Complex, Sanjay Gandhi Puram, Faizabad Road, Indira Nagar  
Ph: 7706041643,7706041644  
CIN : U85196UP1992PLC014075



Patient Name	: Mr.VINAY KUMAR YADAV -36838	Registered On	: 06/Aug/2023 10:42:17
Age/Gender	: 45 Y 7 M 4 D /M	Collected	: 06/Aug/2023 10:55:09
UHID/MR NO	: IDCD.0000181370	Received	: 06/Aug/2023 11:18:17
Visit ID	: IDCD0199952324	Reported	: 06/Aug/2023 12:22:35
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF HAEMATOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### Blood Group (ABO & Rh typing) \* , Blood

Blood Group	O
Rh ( Anti-D)	POSITIVE

#### Complete Blood Count (CBC) \* , Whole Blood

Haemoglobin	12.00	g/dl	1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl 1 Mo- 10.0-18.0 g/dl 3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl	
TLC (WBC)	8,000.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
<u>DLC</u>				
Polymorphs (Neutrophils )	64.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	26.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	7.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	3.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE
<u>ESR</u>				
Observed	22.00	Mm for 1st hr.		
Corrected	8.00	Mm for 1st hr.	<9	
PCV (HCT)	38.00	%	40-54	
<u>Platelet count</u>				
Platelet Count	1.90	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.00	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	45.50	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.20	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	12.30	fL	6.5-12.0	ELECTRONIC IMPEDANCE
<u>RBCCount</u>				
RBC Count	4.62	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
<u>Blood Indices (MCV, MCH, MCHC)</u>				





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Test Name	Result	Unit	Bio. Ref. Interval	Method
MCV	80.10	fl	80-100	CALCULATED PARAMETER
MCH	26.00	pg	28-35	CALCULATED PARAMETER
MCHC	32.40	%	30-38	CALCULATED PARAMETER
RDW-CV	16.20	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	49.50	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	5,120.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	240.00	/cu mm	40-440	



Dr. Shoaib Irfan (MBBS, MD, PDCC)





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Age/Gender	: 45 Y 7 M 4 D /M	Collected	: 06/Aug/2023 10:55:09
UHID/MR NO	: IDCD.0000181370	Received	: 06/Aug/2023 11:58:40
Visit ID	: IDCD0199952324	Reported	: 06/Aug/2023 13:26:44
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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### GLUCOSE FASTING , Plasma

Glucose Fasting	79.50	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD
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#### Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

Dr. Shoaib Irfan (MBBS, MD, PDCC)





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Age/Gender	: 45 Y 7 M 4 D /M	Collected	: 07/Aug/2023 13:47:52
UHID/MR NO	: IDCD.0000181370	Received	: 07/Aug/2023 14:51:07
Visit ID	: IDCD0199952324	Reported	: 07/Aug/2023 15:31:42
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

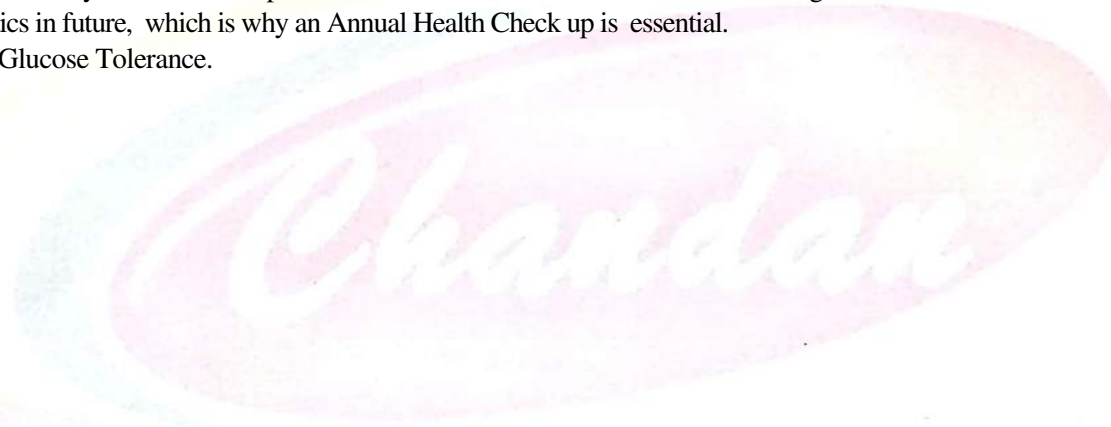
## DEPARTMENT OF BIOCHEMISTRY


### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Glucose PP <i>Sample: Plasma After Meal</i>	117.80	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD

#### Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.



  
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UHID/MR NO	: IDCD.0000181370	Received	: 06/Aug/2023 13:36:38
Visit ID	: IDCD0199952324	Reported	: 06/Aug/2023 16:11:32
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#### GLYCOSYLATED HAEMOGLOBIN (HBA1C) \*\* , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	6.70	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	50.00	mmol/mol/IFCC		
Estimated Average Glucose (eAG)	145	mg/dl		

#### Interpretation:

##### NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes management.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

\*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

\*\*Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated VARIANT II TURBO HPLC Analyser.

#### Clinical Implications:

\*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

\*With optimal control, the HbA 1c moves toward normal levels.

\*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated \*Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy





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### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

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c. Alcohol toxicity d. Lead toxicity

\*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

\*Pregnancy d. chronic renal failure. Interfering Factors:

\*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.



**Dr. Anupam Singh (MBBS MD Pathology)**





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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) <i>Sample:Serum</i>	7.82	mg/dL	7.0-23.0	CALCULATED
Creatinine <i>Sample:Serum</i>	0.88	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20-275 Female-20-320	MODIFIED JAFFES
Uric Acid <i>Sample:Serum</i>	5.44	mg/dl	3.4-7.0	URICASE
<b>LFT (WITH GAMMA GT) * , Serum</b>				
SGOT / Aspartate Aminotransferase (AST)	46.80	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	63.10	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	38.50	IU/L	11-50	OPTIMIZED SZAZING
Protein	7.30	gm/dl	6.2-8.0	BIURET
Albumin	3.99	gm/dl	3.4-5.4	B.C.G.
Globulin	3.31	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.21		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	154.16	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.66	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.23	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.43	mg/dl	< 0.8	JENDRASSIK & GROF
<b>LIPID PROFILE ( MINI ) , Serum</b>				
Cholesterol (Total)	92.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	24.10	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	56	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	12.10	mg/dl	10-33	CALCULATED
Triglycerides	60.50	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP





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## DEPARTMENT OF BIOCHEMISTRY

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## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

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#### URINE EXAMINATION, ROUTINE \* , Urine

Color	PALE YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic ( 6.0 )			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	1-2/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	1-2/h.p.f			
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

#### STOOL, ROUTINE EXAMINATION \* , Stool

Color	BROWNISH
Consistency	SEMI SOLID
Reaction (PH)	Acidic ( 6.0 )
Mucus	ABSENT
Blood	ABSENT
Worm	ABSENT
Pus cells	ABSENT
RBCs	ABSENT





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## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Ova	ABSENT			
Cysts	ABSENT			
Others	ABSENT			

### SUGAR, FASTING STAGE\* , Urine

Sugar, Fasting stage ABSENT gms%

#### Interpretation:

- (+) < 0.5
- (++) 0.5-1.0
- (+++) 1-2
- (++++>) > 2



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UHID/MR NO	: IDCD.0000181370	Received	: 07/Aug/2023 14:29:31
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## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

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SUGAR, PP STAGE\* , Urine

Sugar, PP Stage ABSENT

#### Interpretation:

- (+) < 0.5 gms%
- (++) 0.5-1.0 gms%
- (+++) 1-2 gms%
- (++++) > 2 gms%



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## DEPARTMENT OF IMMUNOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
PSA (Prostate Specific Antigen), Total ** <i>Sample:Serum</i>	0.460	ng/mL	< 2.0	CLIA

#### Interpretation:

1. PSA is detected in the serum of males with normal, benign hypertrophic, and malignant prostate tissue.
2. Measurement of serum PSA levels is not recommended as a screening procedure for the diagnosis of cancer because elevated PSA levels also are observed in patients with benign prostatic hypertrophy. However, studies suggest that the measurement of PSA in conjunction with digital rectal examination (DRE) and ultrasound provide a better method of detecting prostate cancer than DRE alone.
3. PSA levels increase in men with cancer of the prostate, and after radical prostatectomy PSA levels routinely fall to the undetectable range.
4. If prostatic tissue remains after surgery or metastasis has occurred, PSA appears to be useful in detecting residual and early recurrence of tumor.
5. Therefore, serial PSA levels can help determine the success of prostatectomy, and the need for further treatment, such as radiation, endocrine or chemotherapy, and in the monitoring of the effectiveness of therapy.

#### THYROID PROFILE - TOTAL \*\* , Serum

T3, Total (tri-iodothyronine)	135.62	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	9.60	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	1.69	μIU/mL	0.27 - 5.5	CLIA

#### Interpretation:

0.3-4.5	μIU/mL	First Trimester
0.5-4.6	μIU/mL	Second Trimester
0.8-5.2	μIU/mL	Third Trimester
0.5-8.9	μIU/mL	Adults 55-87 Years
0.7-27	μIU/mL	Premature 28-36 Week
2.3-13.2	μIU/mL	Cord Blood > 37Week
0.7-64	μIU/mL	Child(21 wk - 20 Yrs.)
1-39	μIU/mL	Child 0-4 Days
1.7-9.1	μIU/mL	Child 2-20 Week

1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.





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- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

**Dr. Anupam Singh (MBBS MD Pathology)**





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## DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

X-RAY DIGITAL CHEST PA \*

(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

### DIGITAL CHEST P-A VIEW

- Soft tissue shadow appears normal.
- Bony cage is normal.
- Diaphragmatic shadows are normal on both sides.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Pulmonary parenchyma did not reveal any significant lesion.

**IMPRESSION : N O R M A L S K I A G R A M**

**Dr. Anil Kumar Verma**  
(MBBS,DMRD)





# CHANDAN DIAGNOSTIC CENTRE

Add: Indra Deep Complex, Sanjay Gandhi Puram, Faizabad Road, Indira Nagar  
Ph: 7706041643, 7706041644  
CIN : U85196UP1992PLC014075



Patient Name	: Mr.VINAY KUMAR YADAV -36838	Registered On	: 06/Aug/2023 10:42:22
Age/Gender	: 45 Y 7 M 4 D /M	Collected	: N/A
UHID/MR NO	: IDCD.0000181370	Received	: N/A
Visit ID	: IDCD0199952324	Reported	: 06/Aug/2023 12:39:47
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF ULTRASOUND

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

#### ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) \*

##### LIVER

- **Liver is enlarged in size (~ 170 mm) with grade-I fatty changes.**
- No obvious focal lesion is seen. The intra-hepatic biliary radicles are normal.
- Portal vein is normal in caliber.

##### GALL BLADDER & CBD

- The gall bladder is normal in size and has regular walls. Lumen of the gall bladder is anechoic. No wall thickening or pericholecystic fluid noted.
- Visualised proximal common bile duct is normal in caliber.

##### PANCREAS

- The pancreas is normal in size and shape and has a normal homogenous echotexture. Pancreatic duct is not dilated.

##### KIDNEYS

- Both the kidneys are normal in size and echotexture.
- Right kidney ~ approx 103 x 58 mm.
- Left kidney ~ approx 104 x 53 mm.
- **A small simple cortical cyst ~ approx 9 x 6 mm seen at lower polar region of right kidney.**
- The collecting system of both the kidneys is normal and cortico-medullary demarcation is clear.

##### SPLEEN

- The spleen is normal in size and has a normal homogenous echo-texture.

##### LYMPH NODES

- No significant lymph node noted.





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## DEPARTMENT OF ULTRASOUND

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

#### URINARY BLADDER

- Urinary bladder is partially distended. Bladder wall is normal in thickness and is regular. Patient lied down second time unable to hold urine. Sub optimal study lower abdomen. Review with full bladder.
- **Pre void urine volume is ~ 80 cc.**
- **Post void residual urine volume is ~ 6 cc.**

#### PROSTATE

- **Prostate is enlarged in size & measures ~ 42 x 41 x 40 mm, weight~ 36.2 grams with median lobe indenting bladder base.**

#### IMPRESSION

- **Hepatomegaly with grade-I fatty changes in liver.**
- **Small right renal simple cortical cyst**
- **Prostatomegaly with post void residual urine volume of ~ 6 cc.**

Report prepared by- shanaya

**Dr. Anil Kumar Verma**

**MBBS, DMRD**

(This report is a professional opinion & not a diagnosis. Kindly intimate us immediately or within 7 days for any reporting / typing error or any query regarding sonographic correlation of clinical findings)

\*\*\* End Of Report \*\*\*

(\*\*) Test Performed at Chandan Speciality Lab.

Result/s to Follow:

ECG / EKG, Tread Mill Test (TMT)



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(MBBS, DMRD)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing \*  
365 Days Open \*Facilities Available at Select Location

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Customer Care No.: +91-9918300637 E-mail: customercare.diagnostic@chandan.co.in Web: www.chandan.co.in

Home Sample Collection  
1800-419-0002

Mar. 2018



Health Check up Booking Request(bobE43111), Beneficiary Code-36838

1 message

Mediwheel <wellness@mediwheel.in>  
To: anurag.idc@gmail.com  
Cc: customercare@mediwheel.in

Tue, Aug 1, 2023 at 11:03 AM



Mediwheel  
...Your wellness partner



011-41195959

Email:wellness@mediwheel.in

Dear Chandan Healthcare Limited,

City : Lucknow . Address : Indradeep Comlex, Sanjay Gandhi Puram,

We have received the confirmation for the following booking .

Name : MR. YADAV VINAY KUMAR  
Age : 43  
Gender : Male  
Package Name : Medi-Wheel Full Body Health Checkup Male Above 40  
Contact Details : 9161360992  
Booking Date : 01-08-2023  
Appointment Date : 06-08-2023

618123  
PC-2639

Member Information			
Booked Member Name	Age	Gender	Cost(In INR)
MR. YADAV VINAY KUMAR	43	Male	Cashless
Total amount to be paid			Cashless

We will get back to you with confirmation update shortly. Please find the package details as attached for your reference.

Package Name : Medi-Wheel Full Body Health Checkup Male Above 40 - Includes (40)Tests

Tests included in this Package

Ecg, TSH, X-ray Chest, Stress Test (tmt)/ 2d Echo, Blood Sugar Postprandial, Psa(for Male), Dental Consultation, Creatinine, Serum, A:g Ratio, Blood Group, Total Cholesterol, Triglycerides, Fasting Blood Sugar, Ultrasound Whole Abdomen , Glycosylated Haemoglobin (hba1c), Hdl, Vldl, Urine Analysis, LDL, Total Protine, General Consultation, HDL/ LDL ratio, GGT(Gamma-glutamyl Transferase), Eye Check-up consultation, ALP (ALKALINE PHOSPHATASE), Uric Acid, AST/ALT Ratio, Serum Protein, CBC with ESR, Stool Analysis, Urine Sugar Fasting, Urine Sugar PP, T3, T4, Cholesterol Total / HDL Ratio, BUN, BUN/Creatinine Ratio, Bilirubin Total & Direct and Indirect, Albumin, Globulin





बैंक ऑफ़ बड़ौदा  
Bank of Baroda

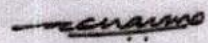
नाम विनय कुमार यादव

Name Vinay Kumar Yadav

कर्मचारी कूट संख्या  
E C Number

157723



  
जारीकर्ता प्राधिकारी  
Issuing Authority



विनय कुमार यादव

धारक के हस्ताक्षर  
Holder's Signature

# CHANDAN DIAGNOSTIC CENTRE

Faizabad Road, Lucknow

Mr. VINAY KUMAR YADAV

Age/Sex : 45/M

Recorded : 7- 8-2023 14:05

Ref by : MEDIWHEEL

Indication :

ID : 1995

Ht/Wt : /

## TREADMILL TEST SUMMARY REPORT

Protocol: BRUCE

History:

Medication : ..

PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100	II	ST LEVEL (mm) V2	V5	METS
SUPINE					100	124/84	124	3.1	4.4	3.4	
STANDING					102	124/84	126	0.1	1.4	0.6	
HYPERVENT	0:03	0:03			102	124/84	126	-0.8	1.6	0.1	
EVENT	0:46	0:46	2.70	10.00	119	124/84	147	-0.9	1.2	0.0	1.23
STAGE 1	2:59	2:59	2.70	10.00	121	134/86	162	-0.6	1.3	0.2	4.80
EVENT	4:08	1:08	4.00	12.00	131	144/88	188	-1.2	1.1	-0.1	5.67
STAGE 2	5:59	2:59	4.00	12.00	137	144/88	197	-0.9	1.4	0.1	7.10
EVENT	7:18	1:18	5.40	14.00	147	154/88	226	-1.1	0.9	-0.2	8.36
PEAK EXERCISE	7:21	1:21			147	154/88	226	-1.2	0.9	-0.2	8.41
EVENT	1:27	1:27	0.00	0.00	116	150/86	174	-0.1	2.3	0.7	

### RESULTS

Exercise Duration : 7:21 Minutes  
 Max Heart Rate : 147 bpm 84 % of target heart rate 175 bpm  
 Max Blood Pressure : 154/88 mmHg  
 Max Work Load : 8.41 METS  
 Reason of Termination :

### IMPRESSIONS

NO ANGINA ,ARRYTHMIA NO ST/T CHANGES.  
 NORMAL HR AND BP RESPONSE  
 ==> TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA .  
 GOOD EXERCISE TOLERANCE .



Dr.Naveen Chandra DM(Cardiology)

# CHANDAN DIAGNOSTIC CENTRE

Mr. VINAY KUMAR YADAV

I.D. : 1995

AGE/SEX : 45/M

RECORDED : 7-8-2023 14:05

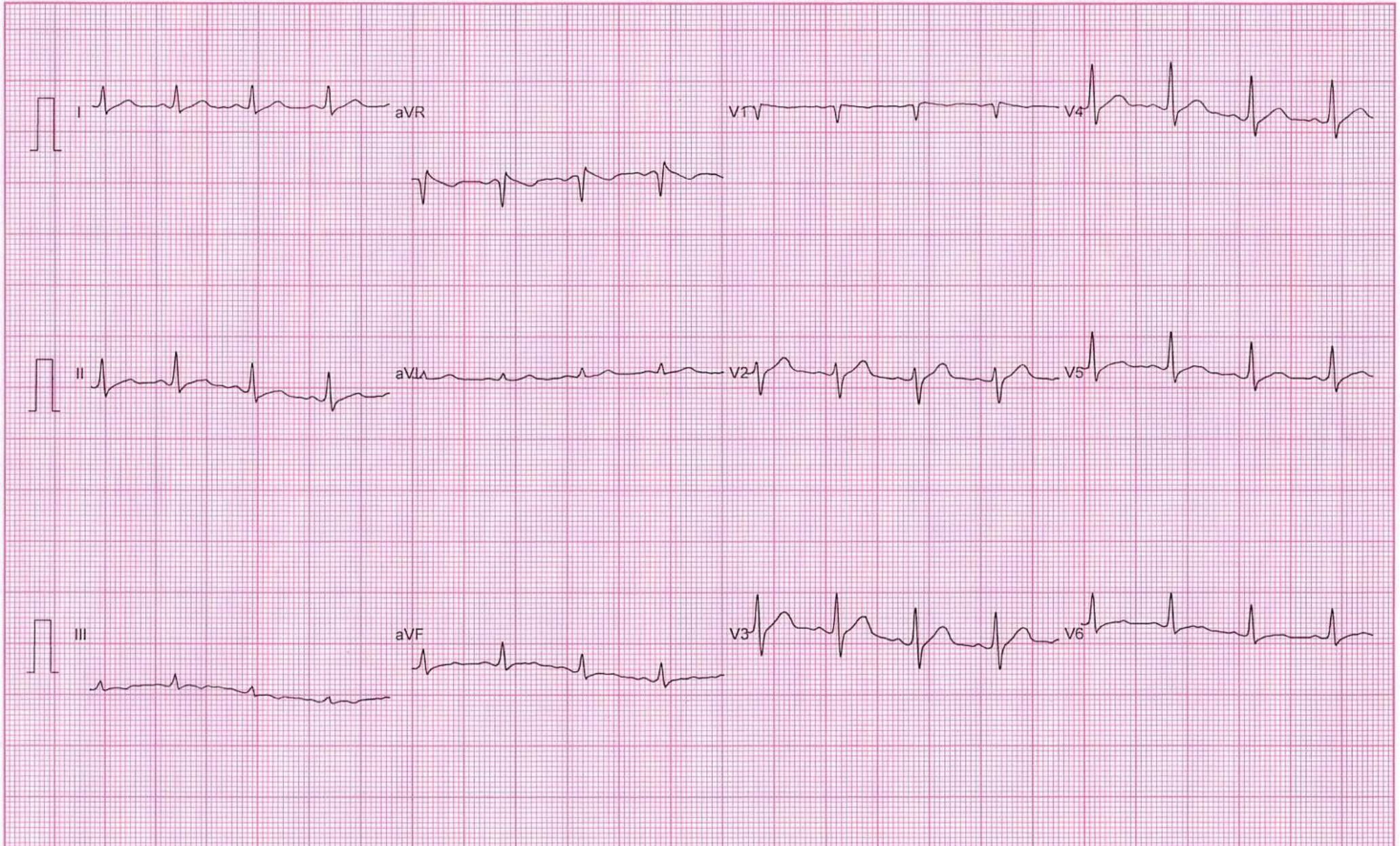
RATE : 100 BPM

B.P. : 124/84 mmHg

SUPINE  
PRETEST

ST @ 10mm/mV  
80ms PostJ

RAW E.C.G.



MEDISEARCH, MEDIAC SYSTEMS

# CHANDAN DIAGNOSTIC CENTRE

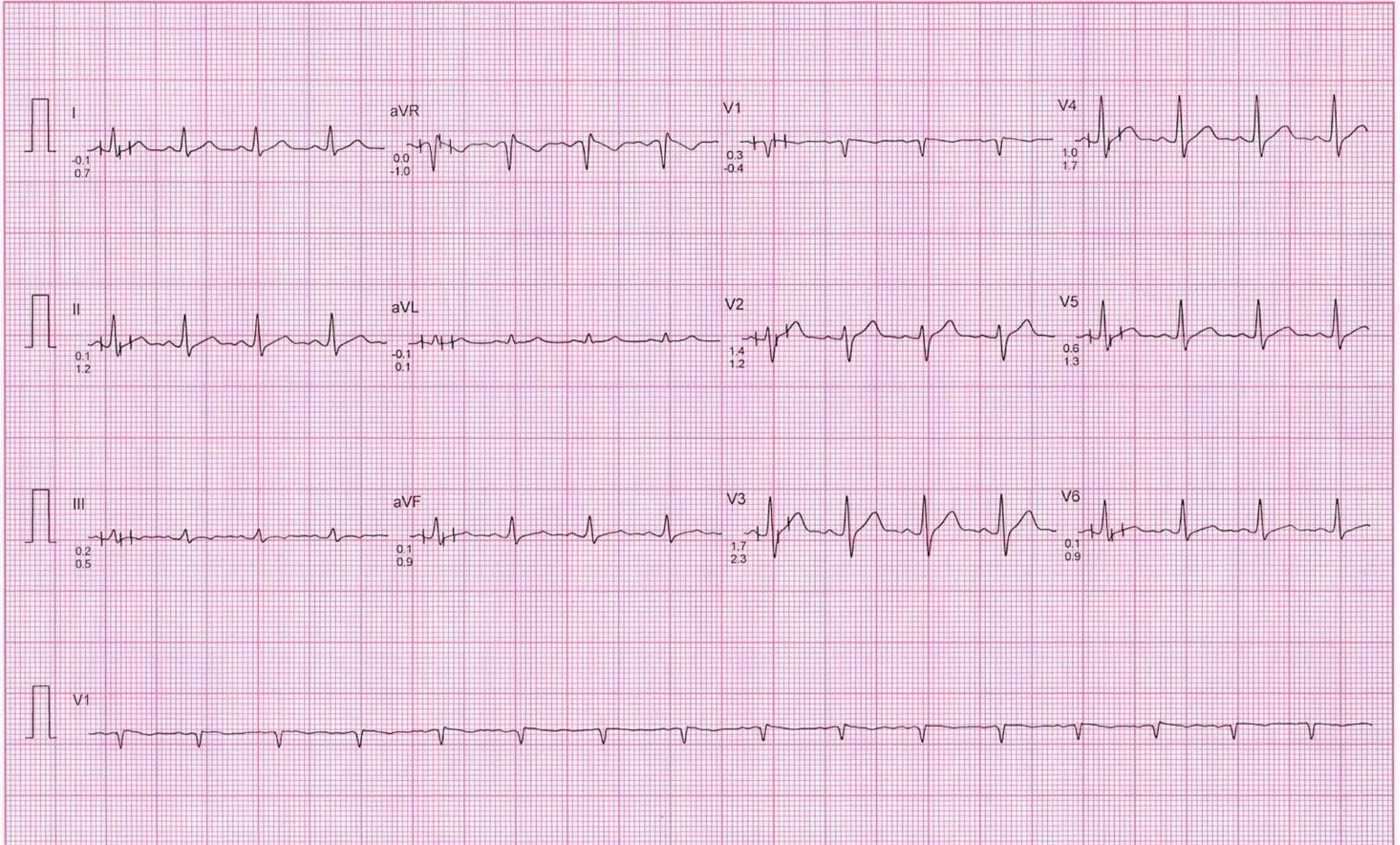
• Mr. VINAY KUMAR YADAV  
I.D. : 1995  
AGE/SEX : 45/M  
RECORDED : 7-8-2023 14:05

RATE : 102 BPM  
B.P. : 124/84 mmHg

STANDING  
PRETEST

ST @ 10mm/mV  
80ms PostJ

LINKED MEDIAN



MEDISEARCH, MEDIAC SYSTEMS

# CHANDAN DIAGNOSTIC CENTRE

• Mr. VINAY KUMAR YADAV  
I.D. : 1995  
AGE/SEX : 45/M  
RECORDED : 7- 8-2023 14:05

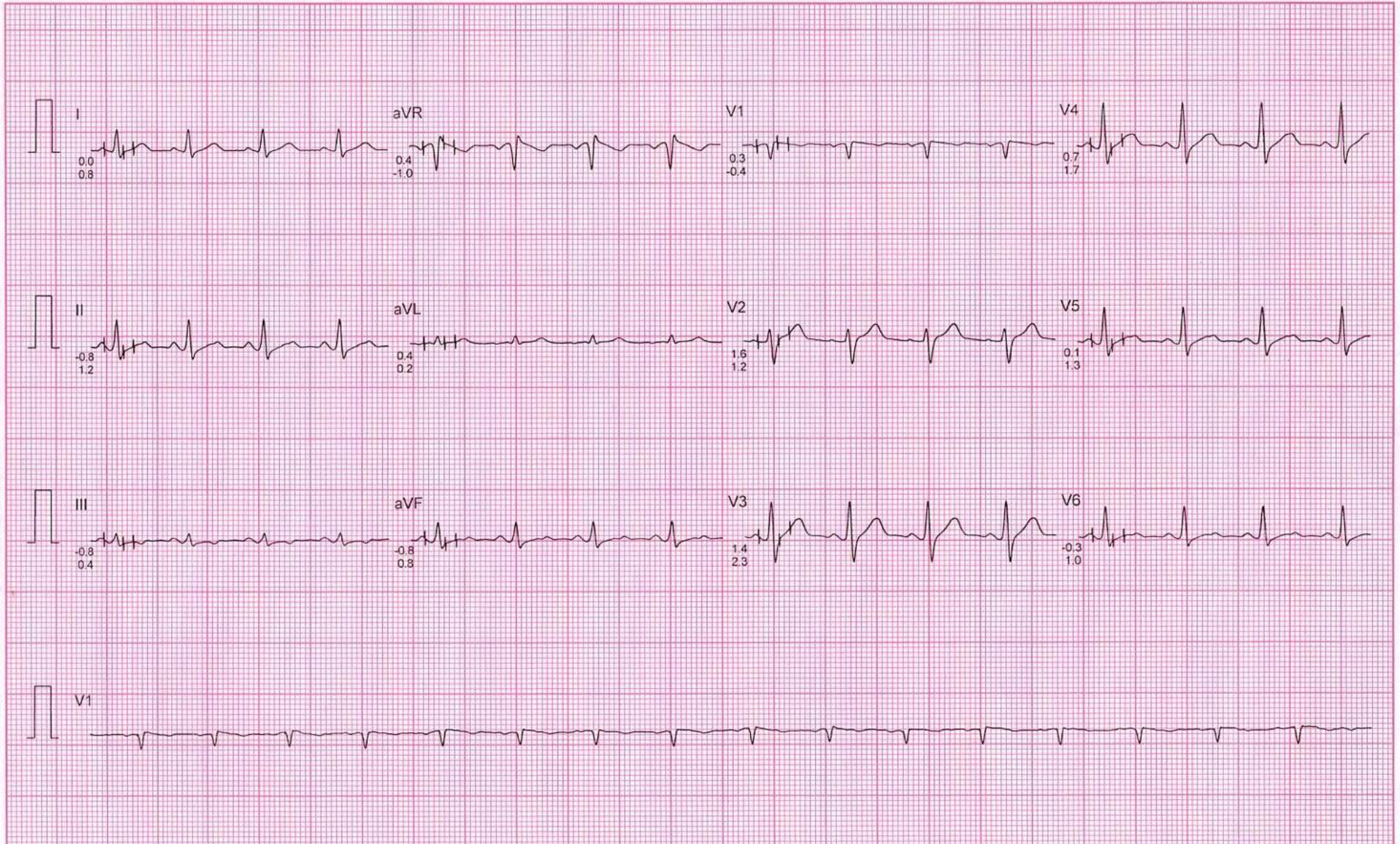
RATE : 102 BPM  
B.P. : 124/84 mmHg

HYPERVENTILATION  
PRETEST

STAGE TIME : 0:03

ST @ 10mm/mV  
80ms PostJ

LINKED MEDIAN



# CHANDAN DIAGNOSTIC CENTRE

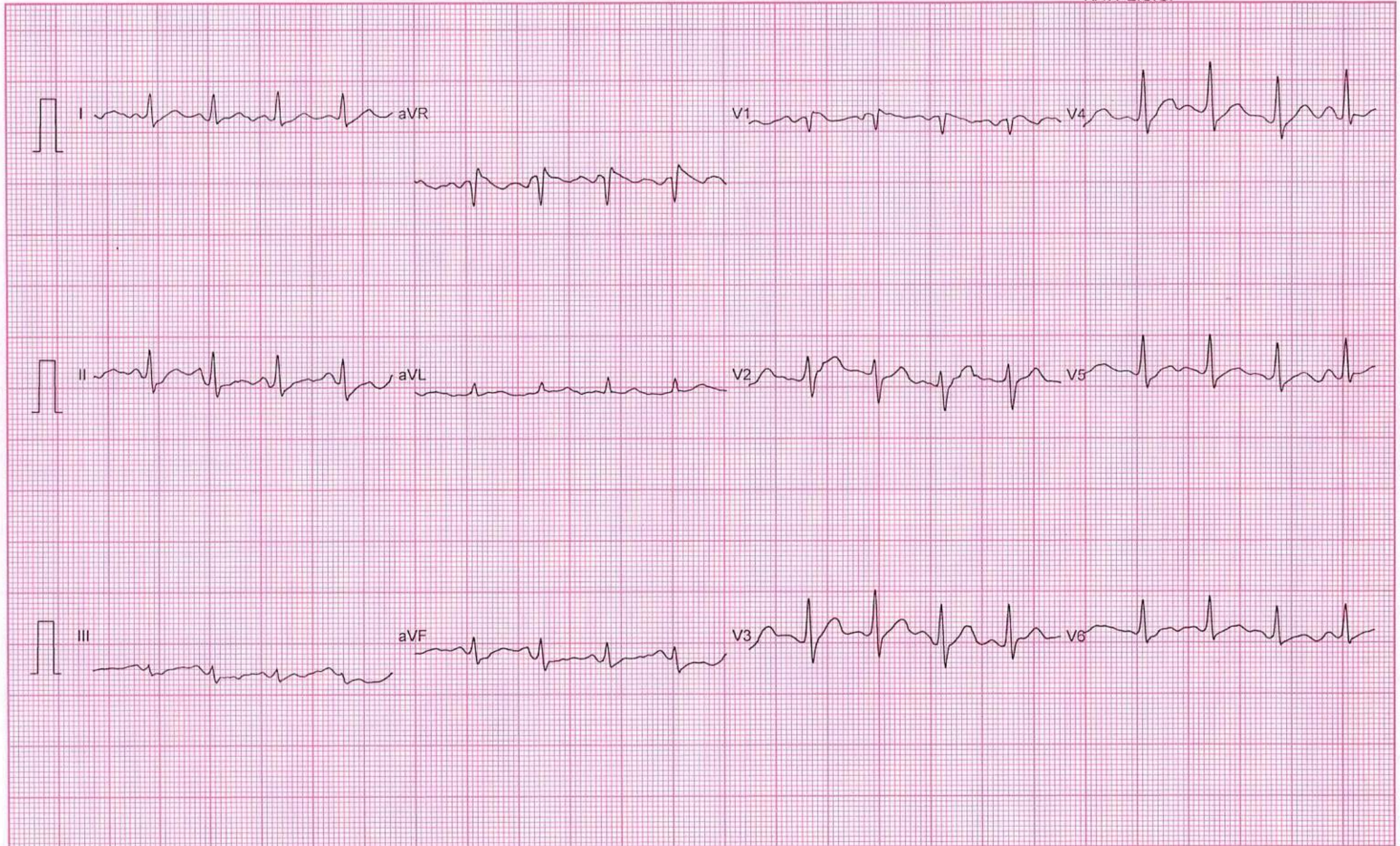
• Mr. VINAY KUMAR YADAV  
I.D. : 1995  
AGE/SEX : 45/M  
RECORDED : 7-8-2023 14:05

RATE : 119 BPM  
B.P. : 124/84 mmHg

BRUCE  
EXERCISE 1 (EVENT)  
PHASE TIME : 0:46  
STAGE TIME : 0:46

ST @ 10mm/mV  
80ms PostJ  
SPEED : 2.7 Km./Hr.  
GRADE : 10.0 %

RAW E.C.G



# CHANDAN DIAGNOSTIC CENTRE

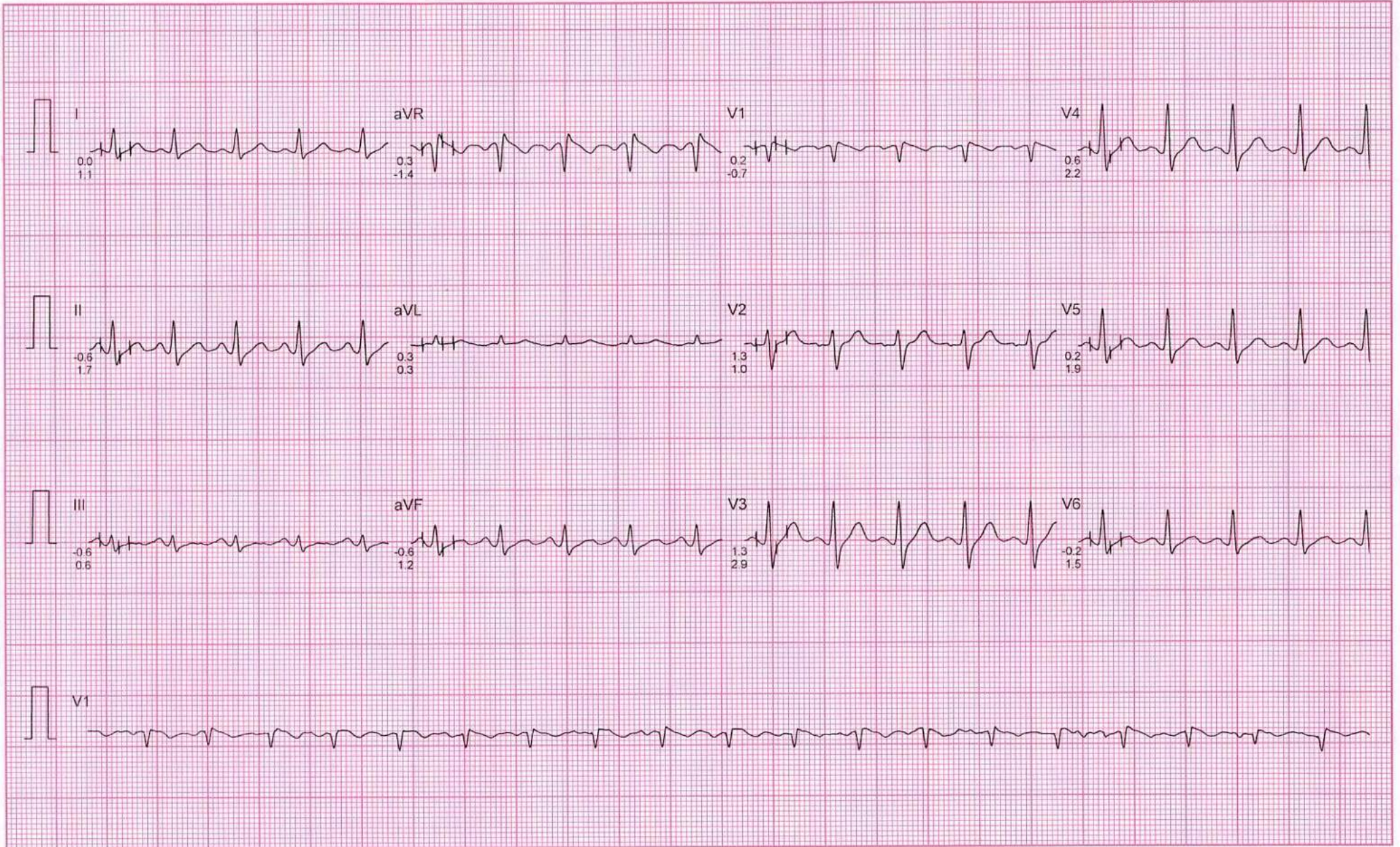
• Mr. VINAY KUMAR YADAV  
I.D. : 1995  
AGE/SEX : 45/M  
RECORDED : 7-8-2023 14:05

RATE : 121 BPM  
B.P. : 134/86 mmHg

BRUCE  
EXERCISE 1  
PHASE TIME : 2:59  
STAGE TIME : 2:59

ST @ 10mm/mV  
80ms PostJ  
SPEED : 2.7 Km./Hr.  
GRADE : 10.0 %

LINKED MEDIAN





# CHANDAN DIAGNOSTIC CENTRE

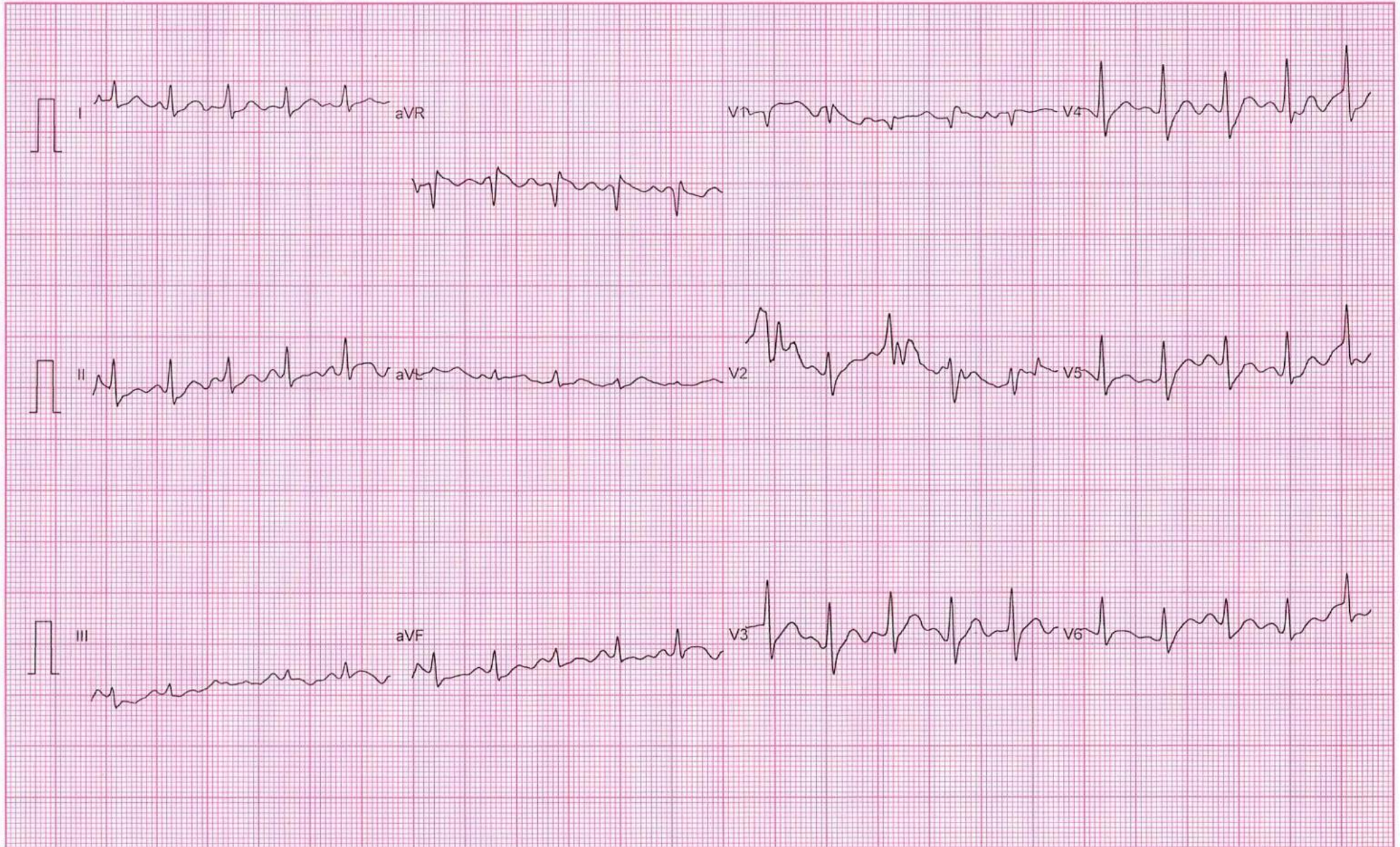
• Mr. VINAY KUMAR YADAV  
I.D. : 1995  
AGE/SEX : 45/M  
RECORDED : 7- 8-2023 14:05

RATE : 131 BPM  
B.P. : 144/88 mmHg

BRUCE  
EXERCISE 2 (EVENT)  
PHASE TIME : 4:08  
STAGE TIME : 1:08

ST @ 10mm/mV  
80ms PostJ  
SPEED : 4.0 Km./Hr.  
GRADE : 12.0 %

RAW E.C.G.



# CHANDAN DIAGNOSTIC CENTRE

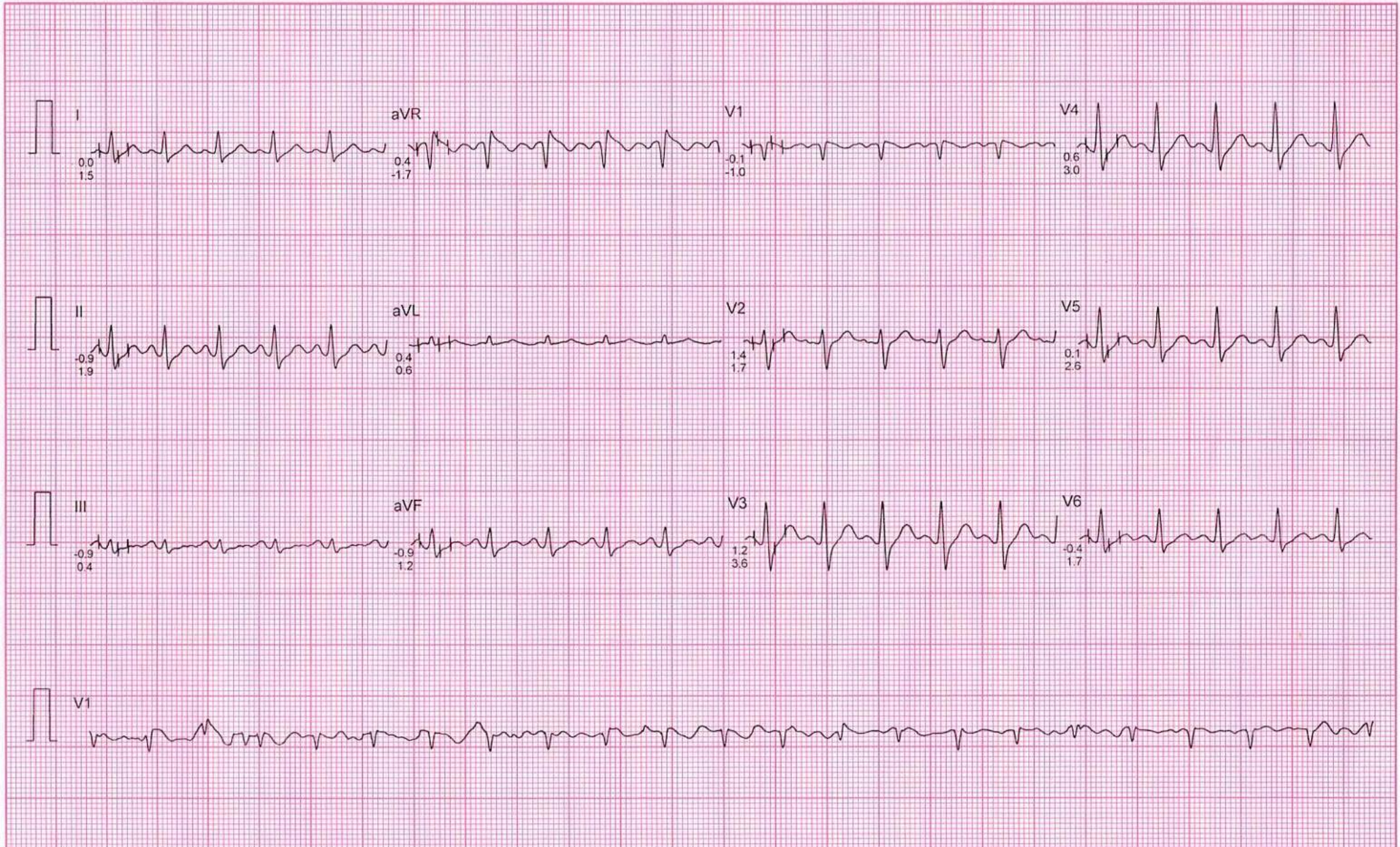
Mr. VINAY KUMAR YADAV  
I.D. : 1995  
AGE/SEX : 45/M  
RECORDED : 7-8-2023 14:05

RATE : 137 BPM  
B.P. : 144/88 mmHg

BRUCE  
EXERCISE 2  
PHASE TIME : 5:59  
STAGE TIME : 2:59

ST @ 10mm/mV  
80ms PostJ  
SPEED : 4.0 Km./Hr.  
GRADE : 12.0 %

LINKED MEDIAN



MEDISEARCH, MEDIAC SYSTEMS

# CHANDAN DIAGNOSTIC CENTRE

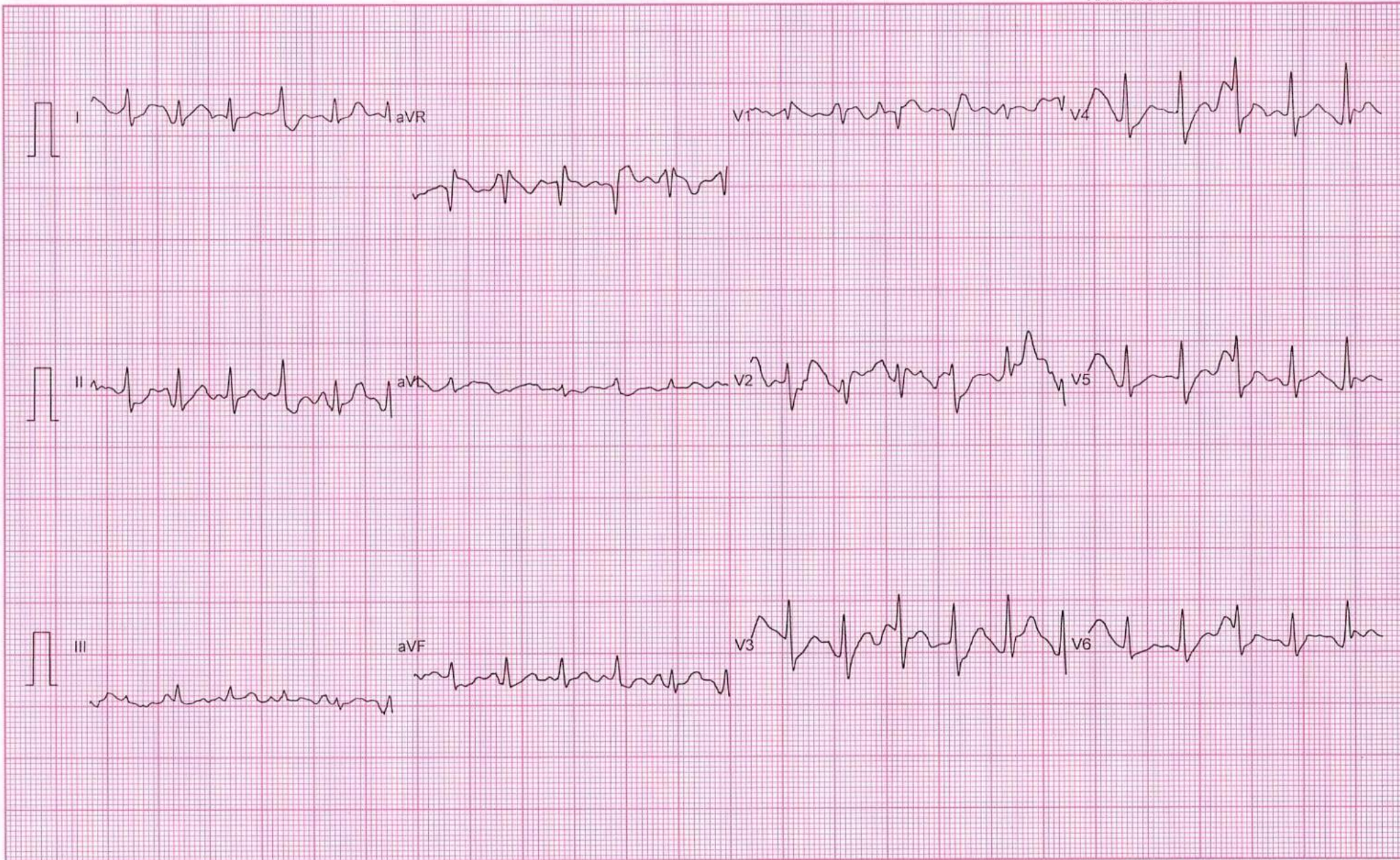
• Mr. VINAY KUMAR YADAV  
I.D. : 1995  
AGE/SEX : 45/M  
RECORDED : 7-8-2023 14:05

RATE : 147 BPM  
B.P. : 154/88 mmHg

BRUCE  
EXERCISE 3 (EVENT)  
PHASE TIME : 7:18  
STAGE TIME : 1:18

ST @ 10mm/mV  
80ms PostJ  
SPEED : 5.4 Km./Hr.  
GRADE : 14.0 %

RAW E.C.G.



# CHANDAN DIAGNOSTIC CENTRE

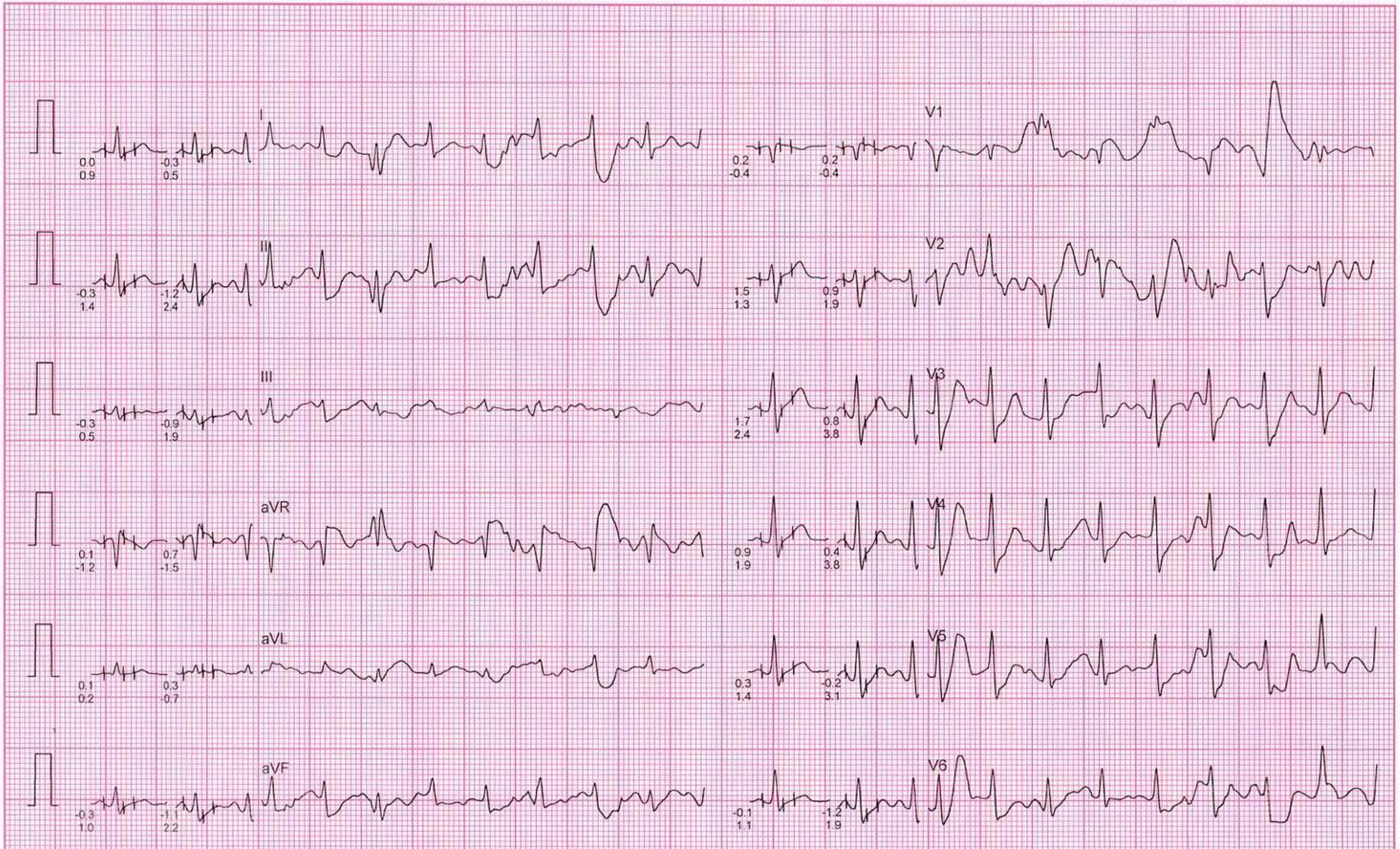
Mr. VINAY KUMAR YADAV  
I.D. : 1995  
AGE/SEX : 45/M  
RECORDED : 7-8-2023 14:05

RATE : 147 BPM  
B.P. : 154/88 mmHg

BRUCE  
PEAK EXERCISE  
PHASE TIME : 7:21  
STAGE TIME : 1:21

ST @ 10mm/mV  
80ms PostJ  
SPEED : 5.4 Km./Hr.  
GRADE : 14.0 %

MIXED E.C.G.



MEDISEARCH, MEDIAC SYSTEMS

# CHANDAN DIAGNOSTIC CENTRE

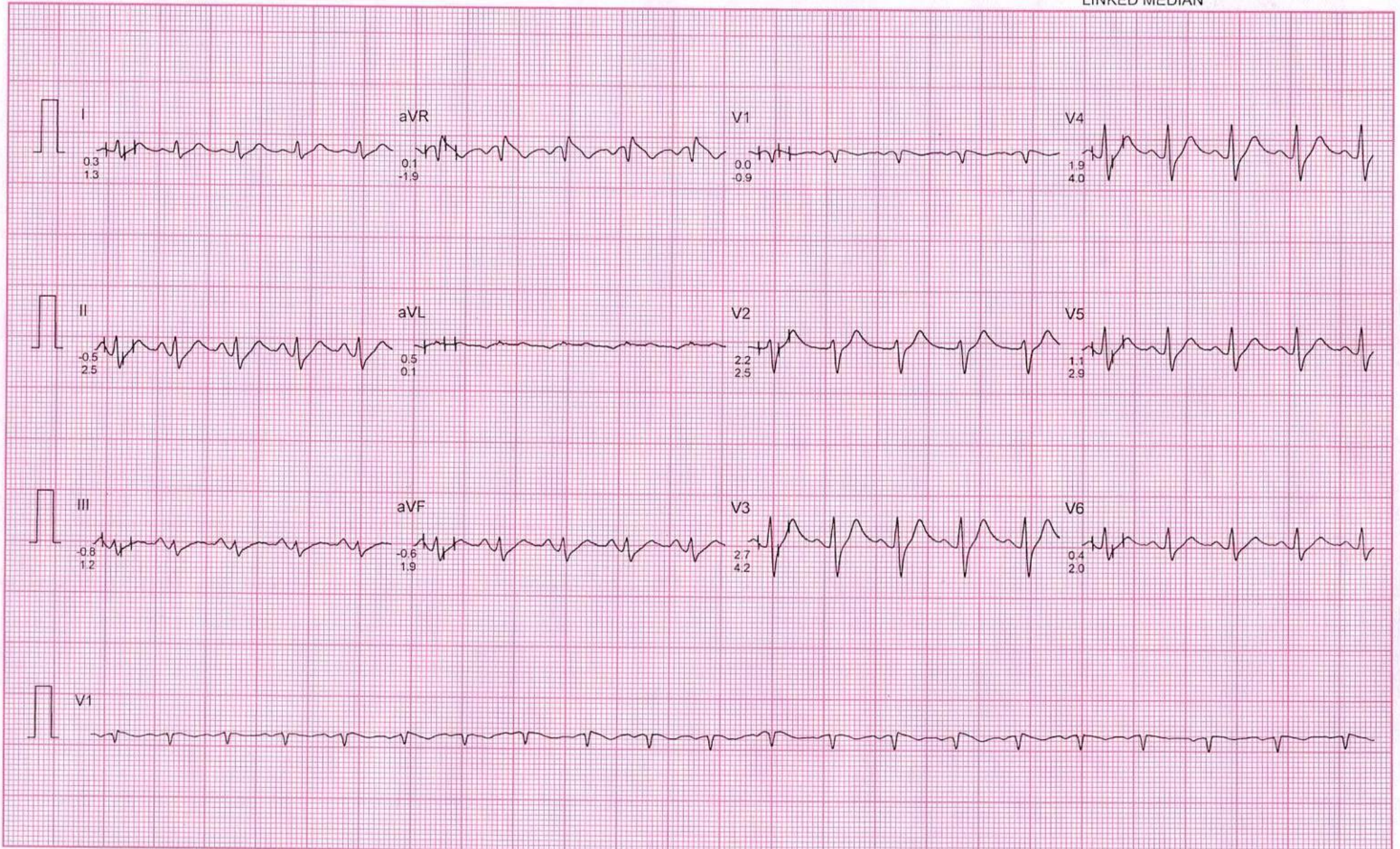
Mr. VINAY KUMAR YADAV  
I.D. : 1995  
AGE/SEX : 45/M  
RECORDED : 7-8-2023 14:05

RATE : 126 BPM  
B.P. : 154/88 mmHg

BRUCE  
RECOVERY  
PHASE TIME : 0:59

ST @ 10mm/mV  
80ms PostJ  
SPEED : 0.0 Km./Hr.  
GRADE : 0.0 %

LINKED MEDIAN



MEDISEARCH, MEDIACT SYSTEMS