



BHAILAL AMIN  
GENERAL HOSPITAL

ESTD. 1964



H-2015-0297



MC-3004



E-2021-0037



### CONCLUSION OF HEALTH CHECKUP

ECU Number : 4932

Age : 54

Weight : 62

Date : 14/08/2023

MR Number : 23211604

Sex : Female

Ideal Weight : 52

Patient Name: FALGUNI M MEHTA

Height : 150

BMI : 27.56

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 : 4932                      MR Number : 23211604                      Patient Name: FALGUNI M MEHTA  
Age : 54                                      Sex : Female                                      Height : 150  
Weight : 62                                      Ideal Weight : 52                                      BMI : 27.56  
Date : 14/08/2023

Past H/O : APPENDECTOMY - 2020.

Present H/O : K/C/O HYPERTENSION - 3 YRS --> ON MEDICATION.

Family H/O : MOTHER : HYPERTENSION ; FATHER : HYPOTHYROIDISM.

Habits : NO HABITS.  
Gen.Exam. : G.C. GOOD  
B.P : 110/70 mm Hg  
Pulse : 77/MIN REG.  
Others : SPO2 : 98 %  
C.V.S : NAD  
R.S. : NAD  
Abdomen : NAD  
Spleen : NP  
Skin : NP  
C.N.S : NAD  
Advice :



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Age : 54  
Weight : 62  
Date : 14/08/2023

MR Number : 23211604  
Sex : Female  
Ideal Weight : 52

Patient Name : FALGUNI M MEHTA  
Height : 150  
BMI : 27.56

**Ophthalmic Check Up :**

**Right**

**Left**

Ext Exam

NIL

Vision Without Glasses

6/6 + 1.50 D SPH

6/6 + 2.25 D SPH + 0.50 CYL I 180

Vision With Glasses

N.6 + 2.25 D SPH

N.6 + 2.25 D SPH

Final Correction

14.6

14.6

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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Patient Name : Mrs. FALGUNI M MEHTA  
 Gender / Age : Female / 54 Years 1 Months 17 Days  
 MR No / Bill No. : 23211604 / 241042290  
 Consultant : Dr. Manish Mittal  
 Location : OPD

Type : OPD  
 Request No. : 148626  
 Request Date : 14/08/2023 08:34 AM  
 Collection Date : 14/08/2023 08:48 AM  
 Approval Date : 14/08/2023 12:29 PM

**CBC + ESR**

Test	Result	Units	Biological Ref. Range
<b>Haemoglobin.</b>			
Haemoglobin	<b>11.9</b>	gm/dL	12 - 15
Red Blood Cell Count (T-RBC)	4.23	mill/cmm	3.8 - 4.8
Hematocrit (HCT)	36.3	%	36 - 46
Mean Corpuscular Volume (MCV)	85.8	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	28.1	pg	27 - 32
MCH Concentration (MCHC)	32.8	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	13.5	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	42.8	fl	39 - 46
<b>Total Leucocyte Count (TLC)</b>			
Total Leucocyte Count (TLC)	7.56	thou/cmm	4 - 10
<b>Differential Leucocyte Count</b>			
Polymorphs	58	%	40 - 80
Lymphocytes	37	%	20 - 40
Eosinophils	01	%	1 - 6
Monocytes	04	%	2 - 10
Basophils	00	%	0 - 2
Polymorphs (Abs. Value)	4.44	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.82	thou/cmm	1 - 3
Eosinophils (Abs. Value)	<b>0.05</b>	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.23	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.02	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.1	%	1 - 3 : Borderline > 3 : Significant
<b>Platelet Count</b>			
Platelet Count	<b>419</b>	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	<b>36</b>	mm/1 hr	0 - 19

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

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mrs. FALGUNI M MEHTA	Type	: OPD
Gender / Age	: Female / 54 Years 1 Months 17 Days	Request No.	: 148626
MR No / Bill No.	: 23211604 / 241042290	Request Date	: 14/08/2023 08:34 AM
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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. 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 Ves metic 20, comparable to Westergrens method and in accordance to ICSH reference method.

--- End of Report ---

Dr. Ameet Soni  
MD (Path)

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### Haematology

Test	Result	Units	Biological Ref. Range
<b>Blood Group</b>			
ABO system	O		
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 ----

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**Fasting Plasma Glucose**

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
<b>Fasting Plasma Glucose</b>			
Fasting Plasma Glucose	94	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	99	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimension

--- End of Report ---

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**Complete Lipid Profile**

Test	Result	Units	Biological Ref. Range
<b>Complete Lipid Profile</b>			
Appearance	Clear		
Triglycerides (By Lipase / Glycerol dehydrogenase on RXL Dade Dimension < 150 Normal 150-199 Borderline High 200-499 High > 499 Very High)	118	mg/dL	1 - 150
Total Cholesterol (By enzymatic colorimetric method on RXL Dade Dimension <200 mg/dL - Desirable 200-239 mg/dL - Borderline High > 239 mg/dL - High)	236	mg/dL	1 - 200
HDL Cholesterol (By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 40 Low > 60 High)	39	mg/dL	40 - 60
Non HDL Cholesterol (calculated) (Non- HDL Cholesterol < 130 Desirable 139-159 Borderline High 160-189 High > 191 Very High)	197	mg/dL	1 - 130
LDL Cholesterol (By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High > 189 Very High)	165	mg/dL	1 - 100
VLDL Cholesterol (calculated)	23.6	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	4.23		2.1 - 3.5
T. Ch./HDL Ch. Ratio (Recent NECP / ATP III Guidelines / Classification (mg/dl) :)	6.05		3.5 - 5

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---- End of Report ----

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Date : 14/08/2023

MR Number : 23211604

Sex : Female

Ideal Weight : 52

Patient Name : FALGUNI M MEHTA

Height : 150

BMI : 27.56

**Gynaec Check Up :**

OBSTETRIC HISTORY

G1 P1 - FTND

MENSTRUAL HISTORY

MENOPAUSAL - 4 YRS.

PRESENT MENSTRUAL CYCLE

-

PAST MENSTRUAL CYCLE

-

CHIEF COMPLAINTS

APPENDISECTOMY 2020.

PA

LAPAROSCOPY SCAR ; LSCS SCAR

PS

NORMAL

PV

NORMAL

BREAST EXAMINATION RIGHT

NORMAL

BREAST EXAMINATION LEFT

NORMAL

PAPSMEAR

BMD

MAMMOGRAPHY

ADVICE

REGULAR BSE

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**Liver Function Test (LFT)**

Test	Result	Units	Biological Ref. Range
<b>Bilirubin</b>			
Bilirubin - Total	0.24	mg/dL	0 - 1
Bilirubin - Direct	0.07	mg/dL	0 - 0.3
Bilirubin - Indirect	0.17	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	15	U/L	13 - 35
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	23	U/L	14 - 59
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	86	U/L	53 - 141
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	28	U/L	5 - 55
<i>(By IFCC method on RXL Dade Dimension.)</i>			
<b>Total Protein</b>			
Total Proteins	7.65	gm/dL	6.4 - 8.2
Albumin	3.42	gm/dL	3.4 - 5
Globulin	4.23	gm/dL	3 - 3.2
A : G Ratio	0.81		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

--- End of Report ---

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MD (Path)

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**DEPARTMENT OF LABORATORY MEDICINE**

For Appointment & Inquiry : 080 69 70 70 70

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Gender / Age : Female / 54 Years 1 Months 17 Days  
MR No / Bill No. : **23211604 / 241042290**  
Consultant : Dr. Manish Mittal  
Location : **OPD**

Type : OPD  
Request No. : **148626**  
Request Date : 14/08/2023 08:34 AM  
Collection Date : 14/08/2023 08:48 AM  
Approval Date : 14/08/2023 12:02 PM

**Renal Function Test (RFT)**

Test	Result	Units	Biological Ref. Range
Urea <i>(By Urease Kinetic method on RXL Dade Dimension)</i>	36	mg/dL	10 - 45
Creatinine <i>(By Modified Kinetic Jaffe Technique)</i>	0.75	mg/dL	0.6 - 1.1
Estimate Glomerular Filtration rate <i>(Ref. range : &gt; 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>(By Uricase / Catalase method on RXL Siemens)</i>	4.9	mg/dL	2.2 - 5.8

--- End of Report ---

**Dr. Ameet Soni**  
MD (Path)

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 Gender / Age : Female / 54 Years 1 Months 17 Days  
 MR No / Bill No. : 23211604 / 241042290  
 Consultant : Dr. Manish Mittal  
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 Request No. : 148626  
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**HbA1c (Glycosylated Hb)**

Test	Result	Units	Biological Ref. Range
<b>HbA1c (Glycosylated Hb)</b>			
Glycosylated Hemoglobin (HbA1c)	6.2	%	
estimated Average Glucose (e AG) *	131.24	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. 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 ADA 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.



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## DEPARTMENT OF LABORATORY MEDICINE

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## Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
Triiodothyronine (T3)	1.41	ng/ml	
<i>(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)</i>			
<i>Reference Interval (ng/ml)</i>			
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		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition )</i>			
Thyroxine (T4)	7.50	mcg/dL	
<i>(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)</i>			
<i>Reference Interval (mcg/dL)</i>			
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		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition )</i>			
Thyroid Stimulating Hormone (US-TSH)	3.69	microIU/ml	
<i>(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)</i>			
<i>Reference Interval (microIU/ml)</i>			
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		
<i>Pregnancy :</i>			
1st trimester	: 0.3 - 4.5		
2nd trimester	: 0.5 - 4.6		
3rd trimester	: 0.8 - 5.2		
<i>(Reference : Tietz - Clinical guide to laboratory test, 4th edition )</i>			

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— End of Report —

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**Urine routine analysis (Auto)**

Test	Result	Units	Biological Ref. Range
<b>Physical Examination</b>			
Quantity	10	mL	
Colour	Pale Yellow		
Appearance	Turbid (Slight)		
<b>Chemical Examination (By Reagent strip method)</b>			
pH	6.0		
Specific Gravity	1.020		
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	Trace		Negative
Nitrite	Negative		Negative
<b>Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)</b>			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	1 - 5	/hpf	0 - 5
Epithelial Cells	5 - 10	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

---- End of Report ----

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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 23211604      Report Date : 14/08/2023  
Request No. : 190076063      14/08/2023 8.34 AM  
Patient Name : Mrs. FALGUNI M MEHTA  
Gender / Age : Female / 54 Years 1 Months 17 Days

**ADVANCED DIGITAL SOLUTIONS**

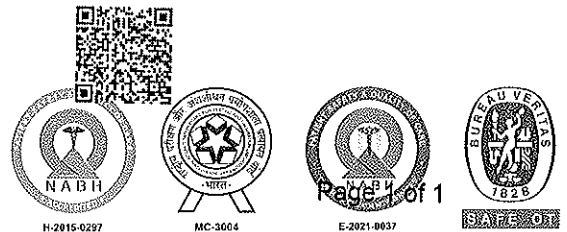
- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

**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

*P.S.*  
**Dr. Priyanka Patel, MD**  
Consultant Radiologist





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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 23211604      Report Date : 14/08/2023  
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**ADVANCED DIGITAL SOLUTIONS**

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

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

**Liver is normal in size and shows raised echo pattern. No mass lesion identified. The hepatic veins are clear and patent.**

Gall bladder shows no obvious abnormality. Common bile duct is not dilated.

Pancreas shows no obvious abnormality. Tail obscured.

Spleen is normal in size 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.

No ascites.

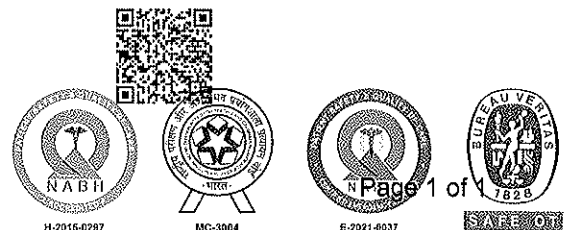
**COMMENT:**

**Grade I fatty liver.  
Otherwise No significant abnormality.**

Kindly correlate clinically.

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

**Dr. Ravij Patel, M.D (RADIO  
DIAGNOSIS)**  
Consultant Radiologist





Name: Falgumi m. mehta  
Patient ID: Ecu 23211604

14.08.2023 10:08:06  
Standard 12-lead

Age: Female  
Gender: Female  
Height: Undefined  
Weight: Undefined  
Ethnicity: Unknown  
Pacemaker: Unknown

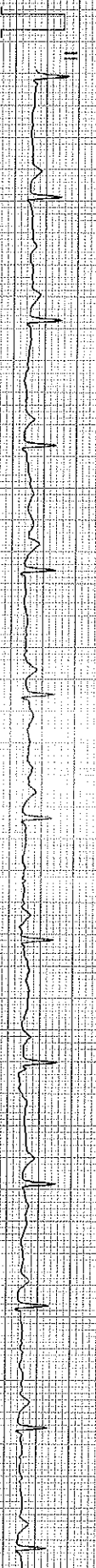
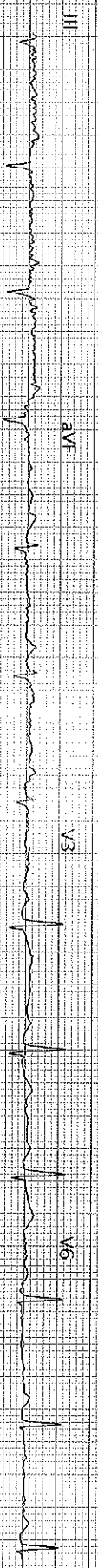
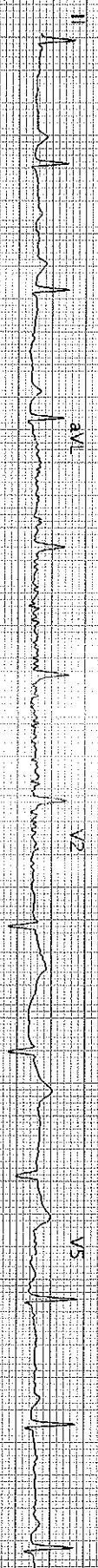
Visit ID: Room: Medication: Order ID: Ord. prev.: Ord. prot.:  
HR: 78 bpm  
P axis: 79°  
QRS axis: 7°  
T axis: 36°

RR: 772 ms  
P: 122 ms  
PR: 192 ms  
QRS: 63 ms  
QT: 371 ms  
QTc: 422 ms

Indication:  
Remark:

Unconfirmed report

*pp Lm*



25 mm/s, 10 mm/mV

Sequential

LP25Hz AC50Hz

25 mm/s, 10 mm/mV

LP25Hz AC50Hz

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SCHELE

Pati NO: 2157948W

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BHAILAL AMIN GENERAL HOSPITAL  
 BHAILAL AMIN MARG,  
 VADODARA-3, PH-(0265) 3956222

**Station**  
 Telephone: 0265-3956222,3956024.

## EXERCISE STRESS TEST REPORT

Patient Name: FALGUNI M MEHTA,  
 Patient ID: 000828  
 Height:  
 Weight:

DOB: 29.06.1969  
 Age: 54yrs  
 Gender: Female  
 Race: Indian

Study Date: 14.08.2023  
 Test Type: Treadmill Stress Test  
 Protocol: BRUCE

Referring Physician: ARCOFEMI  
 Attending Physician: DR. KILLOL KANERIA  
 Technician: RITA PANCHAL

Medications:

Medical History:

Reason for Exercise Test:  
 Screening for CAD

### Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:31	0.00	0.00	76	110/70	
	STANDING	00:02	0.00	0.00	77		
	HYPERV.	00:01	0.00	0.00	77		
	WARM UP	00:36	0.60	0.00	81		
	STAGE 1	01:01	1.70	10.00	103	130/80	
EXERCISE	STAGE 2	02:00	2.50	12.00	122	130/80	
	STAGE 3	02:31	3.40	14.00	153	130/80	
RECOVERY		03:14	0.00	0.00	96	160/90	

The patient exercised according to the BRUCE for 5:30 min's, achieving a work level of Max. METS: 10.10. The resting heart rate of 76 bpm rose to a maximal heart rate of 153 bpm. This value represents 92 % of the maximal, age-predicted heart rate. The resting blood pressure of 110/70 mmHg, rose to a maximum blood pressure of 160/90 mmHg. The exercise test was stopped due to Target heart rate achieved.

### Interpretation

Summary: Resting ECG: normal.  
 Functional Capacity: normal.  
 HR Response to Exercise: appropriate.  
 BP Response to Exercise: normal resting BP - appropriate response.  
 Chest Pain: none.  
 Arrhythmias: none.  
 ST Changes: none.  
 Overall impression: Normal stress test.

### Conclusions

Good effort tolerance, Normal HR and BP Response, No ANGINA and ARRHYTHMIAS during test, No Significant ST-T Changes seen during peak exercise and Recovery, Stress test is NEGATIVE for inducible myocardial ischemia

CONFIRMED BY : DR. KILLOL KANERIA

