

आयकर विभाग  
INCOME TAX DEPARTMENT

भारत सरकार  
GOVT. OF INDIA

J RADHA  
JAGANATHAN

17/08/1982  
Permanent Account Number  
AHYPR5007R

Signature



*J Radha*

Name	MRS.RADHA J	ID	MED121503127
Age & Gender	40Y/FEMALE	Visit Date	25/11/2022
Ref Doctor	MediWheel		

## MASTER HEALTH CHECK UP SUMMARY

Height :	148 cm	Weight:	77.9 kg
BMI :	26.5		

### PRESENT HISTORY:

- Nil.

### GENERAL EXAMINATION → P.I.C.C.L.E :

Pulse: 80/min      BP: 140/90 mmHg      Respiratory Rate: 18/min  
Temp: Normal      Others: Nil

### SYSTEMIC EXAMINATION:

CVS: S1S2+      RS: B/L NVBS      CNS: NFND  
P/A: Soft, No palpable mass, No tenderness BS +.

### INVESTIGATIONS:

#### ECG:

- Normal ECG.

#### X-RAY:

- Essentially normal study.

#### ULTRASOUND ABDOMEN:

- Grade I fatty liver.
- Gallbladder shows lesion - probably polyp.

--For clinical correlation.



Name	MRS.RADHA J	ID	MED121503127
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**TMT:**

- Negative.

**PAP SMEAR:**

- Negative for intraepithelial lesion/ malignancy.

**MAMMOGRAM:**

- ACR Type B parenchyma.
- Benign micro calcifications – BIRADS - II.
- Bilateral Axillary Lymphadenopathy.
- Suggested USG Correlation.
- Suggested annual review scans – ACR guidelines.

**LAB REPORTS:**

- Fasting and PP glucose levels high.
- HbA1c high.

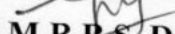
**EYE SCREENING:**

Vision	R/E	L/E
Distant Vision with glasses	6/6	6/6
Near Vision	N6	N6
Colour Vision	Normal	Normal

- Myopia - corrected.

**ADVISED:**

- Advised Diabetologist opinion.
- Gastroenterologist opinion for Gallbladder polyp.
- Advised Gynaecologist opinion for bilateral axillary nodes enlargement.

  
DR.GOMATHY.S M.B.B.S, D.M.C.H

Consultant General Physician





Name : Mrs. RADHA J  
PID No. : MED121503127  
SID No. : 602211032  
Age / Sex : 40 Year(s)/ Female  
Ref. Dr : MediWheel

Register On : 25/11/2022 11:34 AM  
Collection On : 25/11/2022 11:57 AM  
Report On : 26/11/2022 2:22 PM  
Printed On : 26/11/2022 4:20 PM  
Type : OP

Investigation	Observed Value	Unit	Biological Reference Interval
Absolute Monocyte Count (Blood/ Impedance Variation & Flow Cytometry)	0.51	10 <sup>3</sup> / $\mu$ l	< 1.0
Absolute Basophil count (Blood/Impedance Variation & Flow Cytometry)	0.03	10 <sup>3</sup> / $\mu$ l	< 0.2
Platelet Count (Blood/Impedance Variation)	291	10 <sup>3</sup> / $\mu$ l	150 - 450
MPV (Blood/Derived from Impedance)	9.1	fL	8.0 - 13.3
PCT (Blood/Automated Blood cell Counter)	0.26	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Blood/Automated - Westergren method)	19	mm/hr	< 20

### BIOCHEMISTRY

BUN / Creatinine Ratio	12.1		6.0 - 22.0
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	142.2	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: $\geq$ 126

**INTERPRETATION:** Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose, Fasting (Urine) (Urine - F/GOD - POD)	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/ GOD-PAP)	170.6	mg/dL	70 - 140

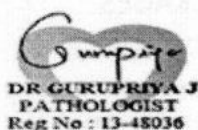
#### INTERPRETATION:

Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti-diabetic medication during treatment for Diabetes.

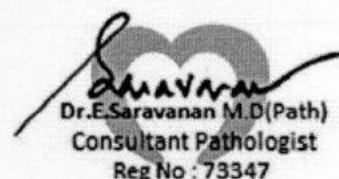
Urine Glucose(PP-2 hours) (Urine - PP)	Positive(+)		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	10.0	mg/dL	7.0 - 21
Creatinine (Serum/Modified Jaffe)	0.82	mg/dL	0.6 - 1.1

**INTERPRETATION:** Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin, cefazolin, ACE inhibitors, angiotensin II receptor antagonists, N-acetylcysteine, chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Enzymatic)	3.7	mg/dL	2.6 - 6.0
<b>Liver Function Test</b>			
Bilirubin(Total) (Serum/DCA with ATCS)	0.45	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.19	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.26	mg/dL	0.1 - 1.0



DR GURUPRIYA J  
PATHOLOGIST  
Reg No : 13-48036



Dr.E.Saravanan M.D(Path)  
Consultant Pathologist  
Reg No : 73347

The results pertain to sample tested.

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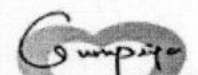
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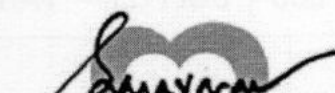
Investigation	Observed Value	Unit	Biological Reference Interval
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	23.8	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	19.7	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	22.0	U/L	< 38
Alkaline Phosphatase (SAP) (Serum/ Modified IFCC)	72.3	U/L	42 - 98
Total Protein (Serum/Biuret)	7.26	gm/dL	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.03	gm/dL	3.5 - 5.2
Globulin (Serum/Derived)	3.23	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.25		1.1 - 2.2
<b>Lipid Profile</b>			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	187.1	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	201.0	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

**INTERPRETATION:** The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the "usual" circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immunoinhibition)	49.4	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 50 - 59 High Risk: < 50
LDL Cholesterol (Serum/Calculated)	97.5	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	40.2	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	137.7	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220



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PATHOLOGIST  
Reg No : 13-48036



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Investigation	Observed Value	Unit	Biological Reference Interval
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**INTERPRETATION:**

**Comment :**  
Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

<b>TSH (Thyroid Stimulating Hormone) (Serum)</b> /Chemiluminescent Immunometric Assay (CLIA))	1.43	µIU/mL	0.35 - 5.50
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**INTERPRETATION:**

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5

2 nd trimester 0.2-3.0

3 rd trimester : 0.3-3.0

(Indian Thyroid Society Guidelines)

**Comment :**

1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.

2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.

3.Values&amplt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

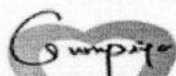
**CLINICAL PATHOLOGY**

Urine Analysis - Routine


COLOUR (Urine)	Pale yellow		Yellow to Amber
APPEARANCE (Urine)	Clear		Clear
Protein (Urine/Protein error of indicator)	Negative		Negative
Glucose (Urine/GOD - POD)	Negative		Negative
Pus Cells (Urine/Automated – Flow cytometry )	Occasional	/hpf	NIL
Epithelial Cells (Urine/Automated – Flow cytometry )	Occasional	/hpf	NIL
RBCs (Urine/Automated – Flow cytometry )	NIL	/hpf	NIL
Casts (Urine/Automated – Flow cytometry )	NIL	/hpf	NIL
Crystals (Urine/Automated – Flow cytometry )	NIL	/hpf	NIL
Others (Urine)	NIL		

**INTERPRETATION:** Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.

-- End of Report --



DR.GURUPRIYA J  
PATHOLOGIST  
Reg No : 13-48036



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## MEDALL DIAGNOSTICS T NAGAR CHENNAI.

**Patient Details**

Date: 25-Nov-22

Time: 1:04:23 PM

Name: MRS RADHA J ID: MED121503127

Age: 40 y

Sex: F

Height: 148 cms

Weight: 77 Kgs

Clinical History:

Medications:

**Test Details**

Protocol: Bruce

Pr.MHR: 180 bpm

THR: 162 (90 % of Pr.MHR) bpm

Total Exec. Time: 7 m 59 s

Max. HR: 172 (96% of Pr.MHR) bpm

Max. Mets: 10.20

Max. BP: 170 / 100 mmHg

Max. BP x HR: 29240 mmHg/min

Min. BP x HR: 6840 mmHg/min

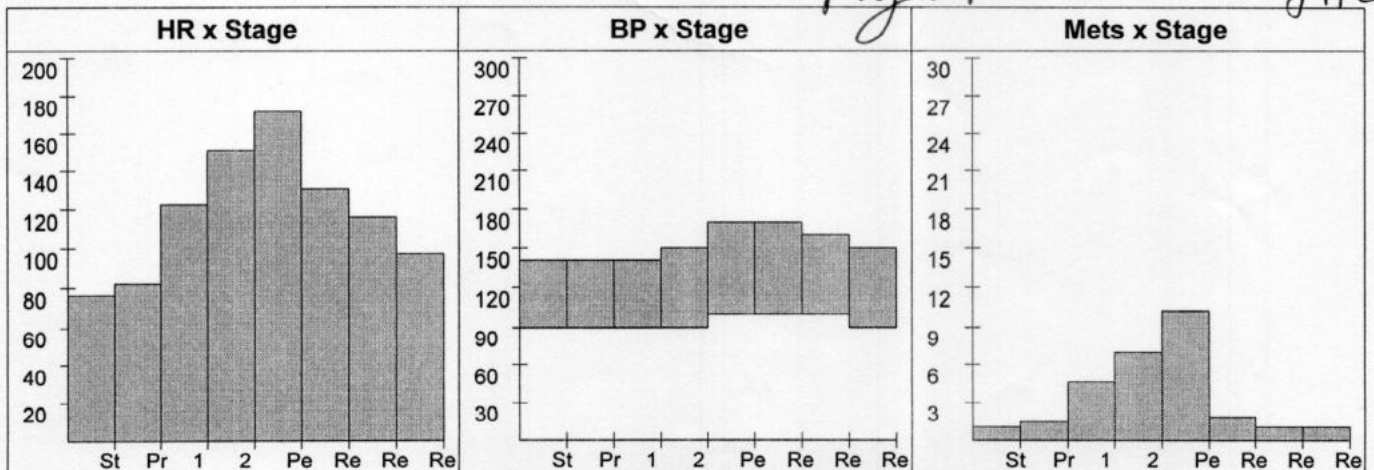
Test Termination Criteria: ACHIEVED THR

**Protocol Details**

Stage Name	Stage Time (min : sec)	Mets	Speed (mph)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
Standing	0 : 23	1.0	0	0	76	140 / 90	-0.21 aVR	0.71 II
1	3 : 0	4.6	1.7	10	123	140 / 90	-0.64 V4	1.42 II
2	3 : 0	7.0	2.5	12	151	150 / 90	-0.64 I	1.77 I
Peak Ex	1 : 59	10.2	3.4	14	172	170 / 100	-0.64 aVR	2.83 II
Recovery(1)	1 : 0	1.8	1	0	131	170 / 100	-1.27 aVR	3.54 II
Recovery(2)	1 : 10	1.0	0	0	116	160 / 100	-1.06 aVR	3.18 II
Recovery(3)	1 : 2	1.0	0	0	97	150 / 90	-0.64 aVR	1.77 II

Work done 10.2 Mets  
 Negative for Inducible Ischaemia  
 and autonomic. Hypertensive Response

Dr. N. S. MD JACC  
 JACC



MRS RADHA J (40 F)

MEDALL DIAGNOSTICS T NAGAR CHENNAI.

Test Report

Protocol: Bruce

ID: MED121503127

Date: 25-Nov-22

Exec Time : 0 m 0 s

Stage Time : 0 m 17 s HR: 69 bpm

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 162 bpm)

B.P: 140 / 90

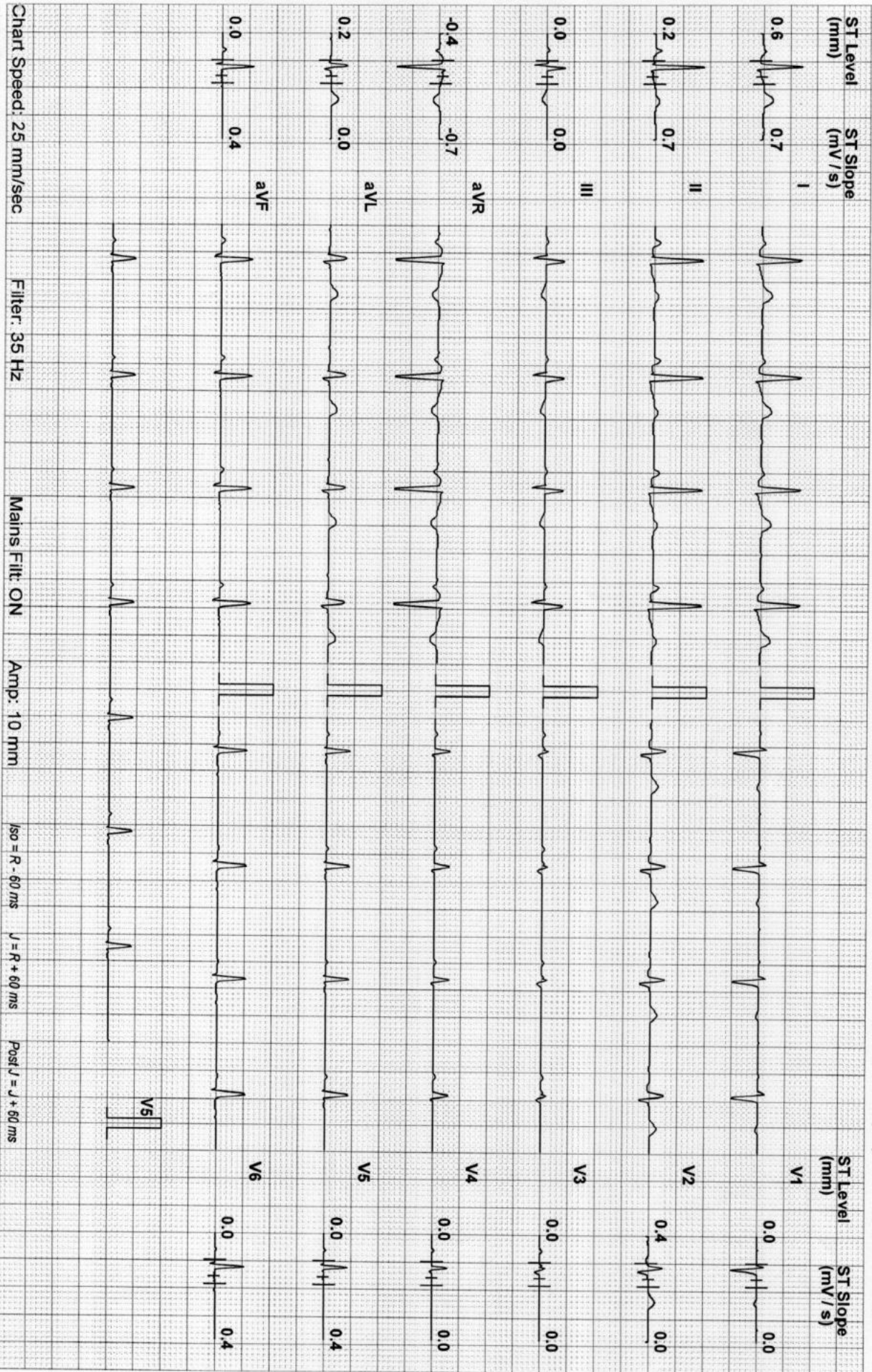


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post V = J + 60 ms

Linked Median

MRS RADHA J (40 F)

ID: MED121503127

Date: 25-Nov-22

Exec Time : 2 m 54 s

Stage Time : 2 m 54 s HR: 120 bpm

# MEDALL DIAGNOSTICS T NAGAR CHENNAI.

# Test Report

Protocol: Bruce

Stage: 1

Speed: 1.7 mph

Grade: 10 %

(THR: 162 bpm)

B.P: 140 / 90

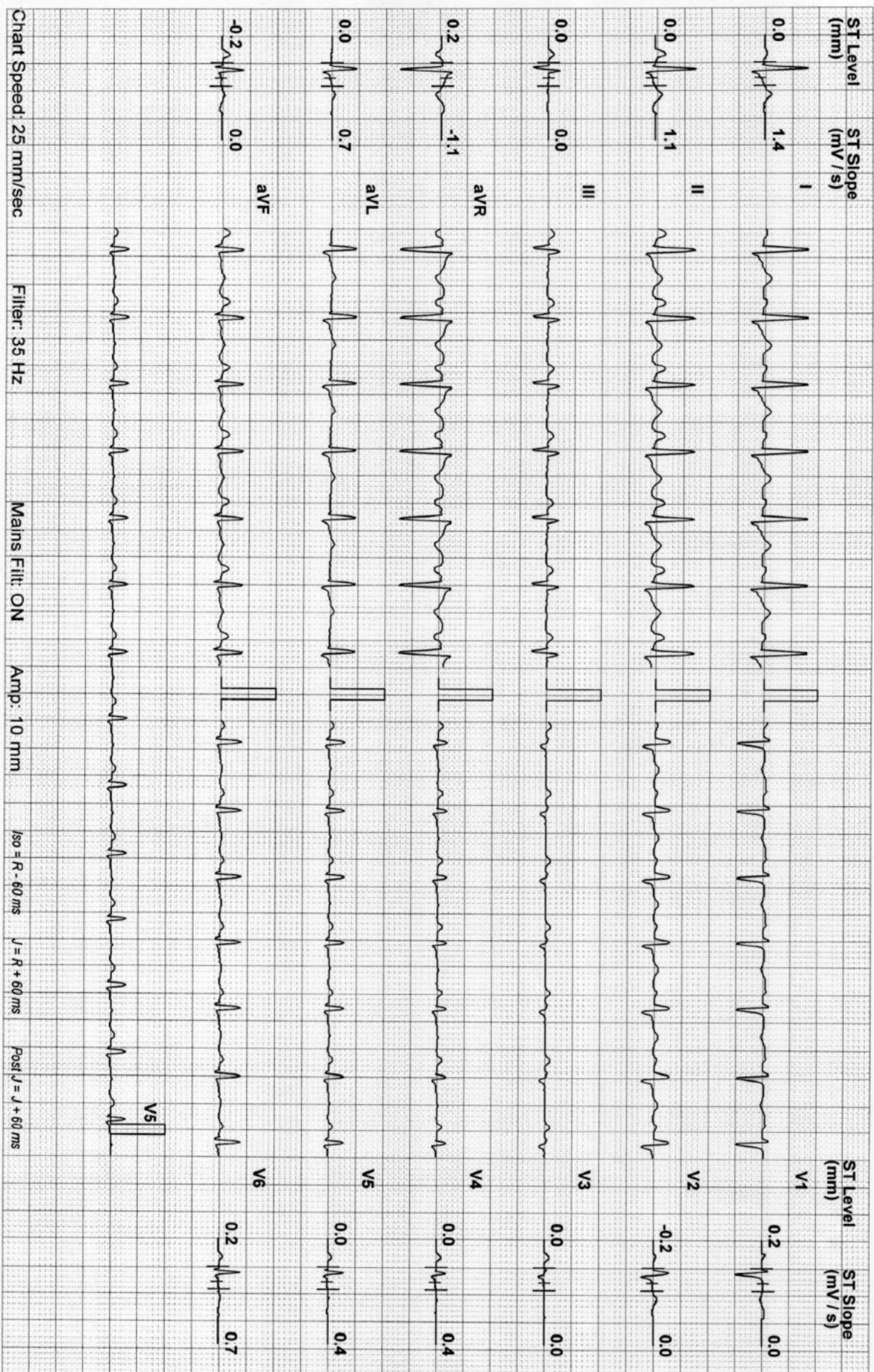


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

MRS RADHA J (40 F)

**MEDALL DIAGNOSTICS T NAGAR CHENNAI.**

**Test Report**

ID: MED121503127

Date: 25-Nov-22

Exec Time : 5 m 54 s

Stage Time : 2 m 54 s HR: 153 bpm

Protocol: Bruce

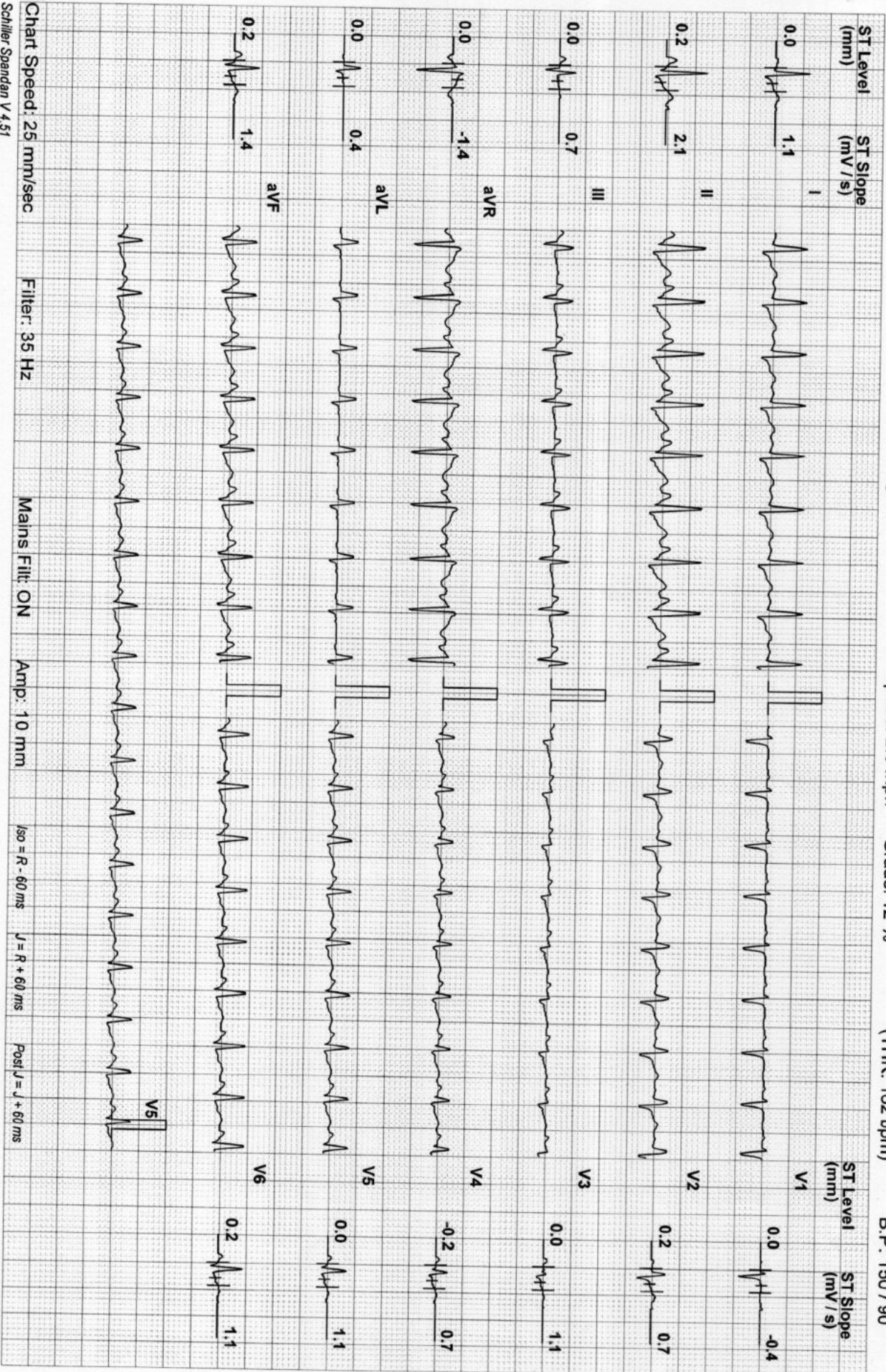
Stage: 2

Speed: 2.5 mph

Grade: 12 %

(THR: 162 bpm)

B.P: 150 / 90



Linked Median

MRS RADHA J (40 F)

MEDALL DIAGNOSTICS T NAGAR CHENNAI.

ID: MED121503127

Date: 25-Nov-22

Exec Time : 7 m 53 s Stage Time : 1 m 53 s HR: 172 bpm

Protocol: Bruce

Stage: Peak Ex

Speed: 3.4 mph

Grade: 14 %

(THR: 162 bpm)

B.P: 170 / 100

Test Report

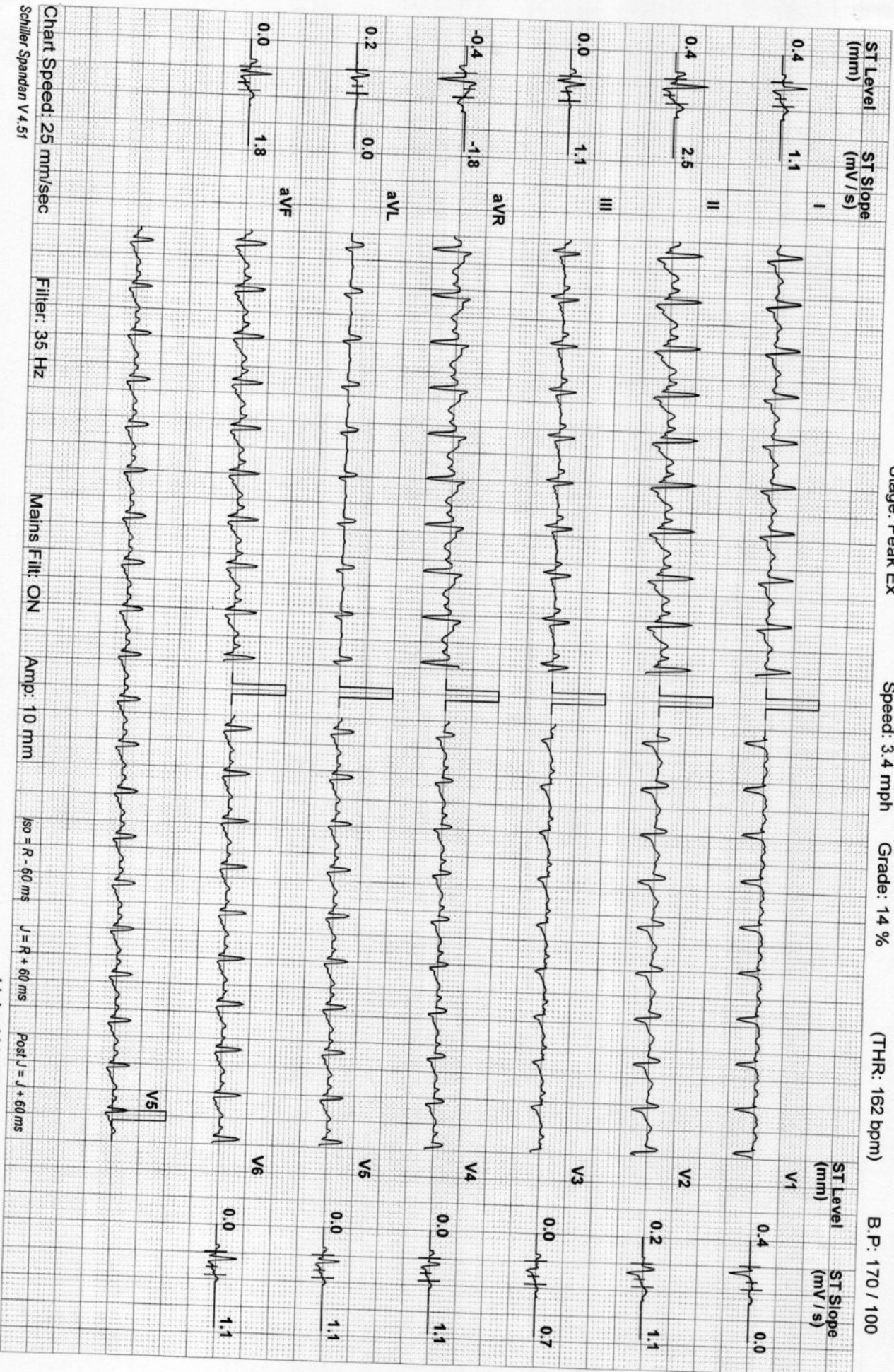


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

MRS RADHA J (40 F)

MEDALL DIAGNOSTICS T NAGAR CHENNAI.

ID: MED121503127

Date: 25-Nov-22

Exec Time : 7 m 59 s Stage Time : 0 m 54 s HR: 131 bpm

Protocol: Bruce

Stage: Recovery(1)

Speed: 1 mph

Grade: 0 %

(THR: 162 bpm)

B.P: 170 / 100

Test Report



Linked Median

MRS RADHA J (40 F)

**MEDALL DIAGNOSTICS T NAGAR CHENNAI.**

ID: MED121503127

Date: 25-Nov-22

Exec Time : 7 m 59 s Stage Time : 1 m 4 s

**Test Report**

Protocol: Bruce

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 162 bpm)

B.P: 160 / 100



Linked Median

MRS RADHA J (40 F)

**MEDALL DIAGNOSTICS T NAGAR CHENNAI.**

**Test Report**

ID: MED121503127

Date: 25-Nov-22

Exec Time : 7 m 59 s Stage Time : 0 m 56 s HR: 100 bpm

Protocol: Bruce

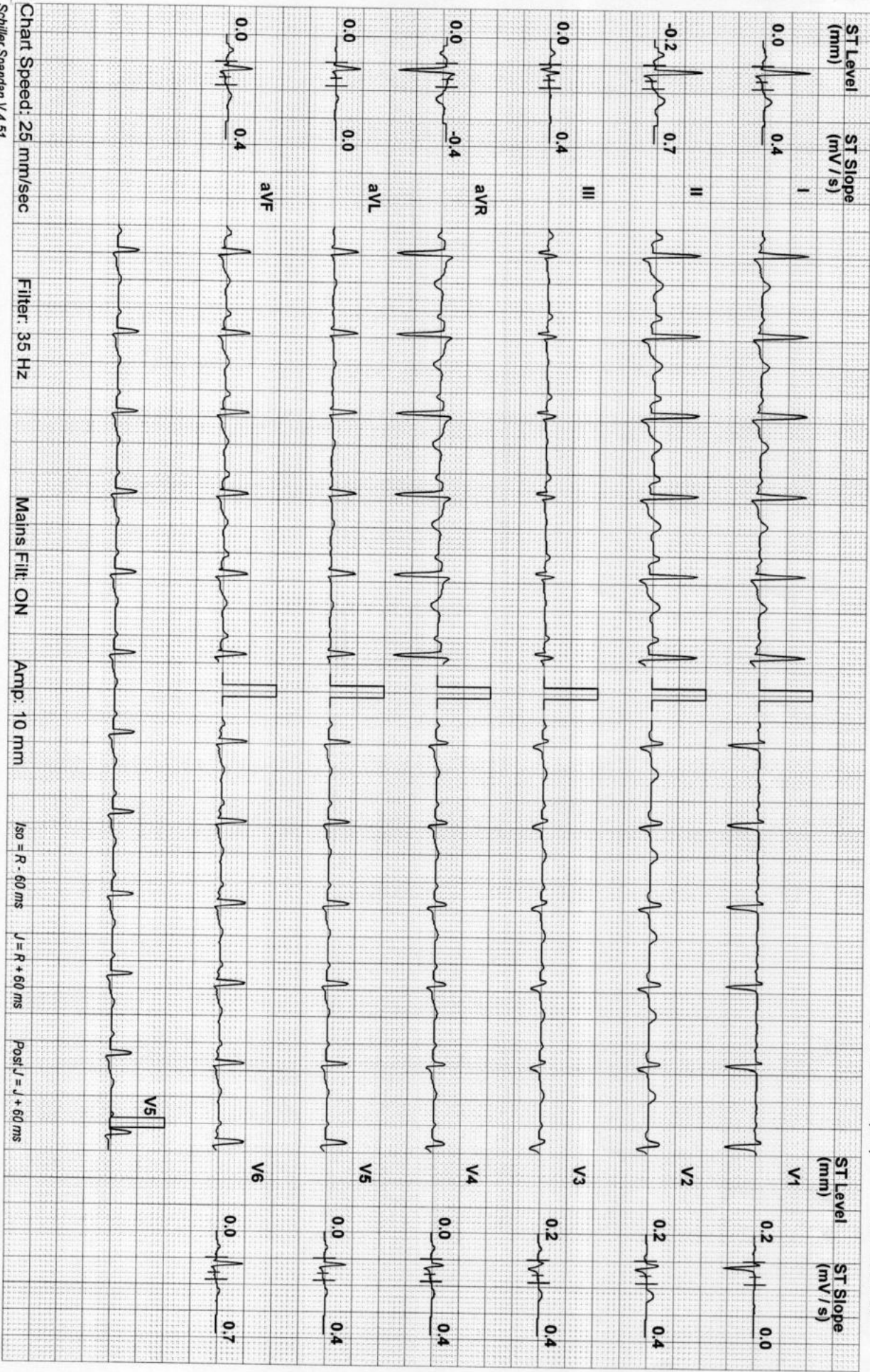
Stage: Recovery(3)

Speed: 0 mph

Grade: 0 %

(THR: 162 bpm)

B.P: 150 / 90



Linked Median



Name	RADHA J	Customer ID	MED121503127
Age & Gender	40Y/F	Visit Date	Nov 25 2022 11:33AM
Ref Doctor	MediWheel		

**X - RAY CHEST PA VIEW**

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

**Impression: Essentially normal study.**



DR. B. C. SRIDHAR, DMRD, DNB  
CONSULTANT RADIOLOGIST



Name	MRS.RADHA J	ID	MED121503127
Age & Gender	40Y/FEMALE	Visit Date	25/11/2022
Ref Doctor	MediWheel		

## SONOGRAM REPORT

### WHOLE ABDOMEN

**The liver is normal in size and shows diffuse fatty changes.**

**The gall bladder is normal sized and shows a lesion measuring 5-6 mm in the lumen – probably polyp. No abnormal wall thickening.**

There is no intra or extra hepatic biliary ductal dilatation.

The pancreas shows a normal configuration and echotexture.

The pancreatic duct is normal.

The portal vein and the IVC are normal.

The spleen is normal.

There is no free or loculated peritoneal fluid.

The right kidney measures 9.0 x 4.8 cm.

The left kidney measures 10.6 x 4.1 cm.

Both kidneys are normal in size, shape and position. Cortical echoes are normal bilaterally.



Name	MRS.RADHA J	ID	MED121503127
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There is no calculus or calyceal dilatation.

The ureters are not dilated.

The bladder is smooth walled and uniformly transonic.

There is no intravesical mass or calculus.

The uterus is anteverted, and measures 8.4 x 3.4 x 3.5 cm.

The endometrial thickness is 11 mm.

The right ovary measures 2.7 x 1.8 cm.

The left ovary measures 2.5 x 2.2 cm.

No significant mass or cyst is seen in the ovaries.

Parametria are free.

Iliac fossae are normal.

**IMPRESSION:**

- Grade I fatty liver.
- Gallbladder shows lesion - probably polyp.

- For clinical correlation.

*Dr Catherine*  
**Dr. Catherine**  
**Consultant Sonologist.**



Medall Healthcare Pvt Ltd  
 No ; 26/15 , Ground floor Gopalakrishna street pondy Bazaar , T.Nagar

Name	MRS.RADHA J	ID	MED121503127
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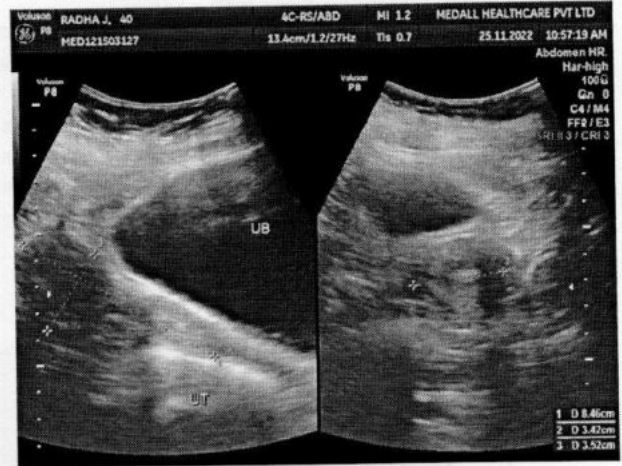
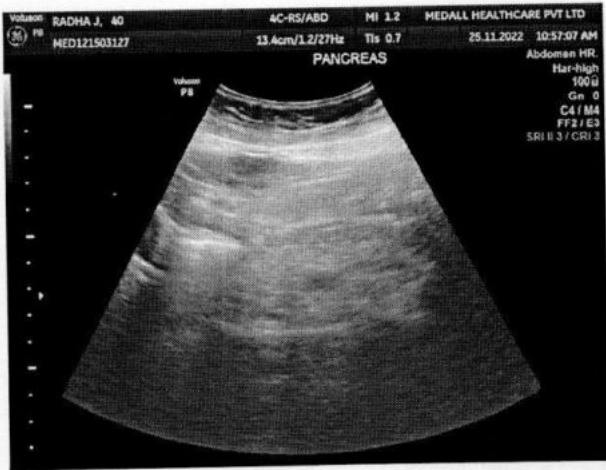


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 No ; 26/15 , Ground floor Gopalakrishna street pondy Bazaar , T.Nagar



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PID No. : MED121503127 Collection On : 25/11/2022 11:57 AM  
SID No. : 602211032 Report On : 26/11/2022 4:39 PM  
Age / Sex : 40 Year(s) / Female Printed On : 28/11/2022 10:26 AM  
Ref. Dr : MediWheel OP / IP : OP

**PAP Smear by LBC( Liquid based Cytology )**

**SPECIMEN NO :** Cy 2584/2022

**MICROSCOPIC FINDINGS:**

**ADEQUACY :** Satisfactory.


**PREDOMINANT CELLS :** Superficial and intermediate cells.

**BACKGROUND :** Clean.

**ORGANISMS :** No specific organisms.

**IMPRESSION :**

**Negative for intraepithelial lesion/ malignancy.**



DR. R. NIRANJANI, MD , Pathologist  
Reg No : C00846

APPROVED BY

-- End of Report --

The results pertain to sample tested.

Page 1 of 1

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17,RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,CHENNAI.

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Name	MRS.RADHA J (40Y/FEMALE)	ID	MED121503127
Age & Gender	40Y/F	Visit Date	25 Nov 2022 14:43:59:700
Ref Doctor Name	MediWheel		

## MAMMOGRAPHY

### REPORT

Cranio-caudal and Medio-lateral oblique views of both breasts were studied.

Both breasts are fatty with fibroglandular densities (ACR Type B parenchyma).

**Few benign, round, microcalcifications noted in the right breast.**

No breast asymmetry noted.

No intramammary ductal dilatation identified.

No obvious spiculation or architectural distortion noted.

There is no evidence of mass lesion in both breasts.

Both nipples are not retracted.

There is no evidence of focal or diffuse thickening of skin or subcutaneous tissue of both breasts.

The retro-mammary spaces appear normal.

**Bilateral axillae show prominent lymph nodes, the largest measuring 1.4 cm in the left and 1.1 cm in the right. Fatty hilum could not be appreciated.**

### IMPRESSION:

- **ACR Type B parenchyma.**
- **Benign microcalcifications- BIRADS - II.**
- **Bilateral Axillary Lymphadenopathy.**

▪ Suggested USG Correlation.

▪ Suggested Annual Review Scans- ACR guidelines.

#### REPORT DISCLAIMER

1.This is only a radiological impression.Like other investigations, radiological investigation also have limitation. Therefore radiological reports should be interpreted in correlation with clinical and pathological findings.  
2.The results reported here in are subject to interpretation by qualified medical professionals only.  
3.Customer identities are accepted provided by the customer or their representative.  
4.information about the customer's condition at the time of sample collection such as fasting, food consumption, medication, etc are accepted as provided by the customer or representative and shall not be investigated for its truthfulness.  
5.If any specimen/sample is received from any others laboratory/hospital,its is presumed that the sample belongs to the patient identified or named.  
6.Test results should be interpreted in context of clinical and other findings if any.In case of any clarification /doubt , the referring doctor/patient can contact the respective section head of the laboratory.

7.Results of the test are influenced by the various factors such as sensitivity, specificity of the procedures of the tests, quality of the samples and drug interactions etc.,  
8.If the test results are found not to be correlating clinically can contact the lab in charge for clarification or retesting where practicable within 24 hours from the time of issue of results.  
9.Liability is limited to the extend of amount billed.  
10.Reports are subject to interpretation in their entirety.partial or selective interpretation may lead to false opinion.  
11.Disputes,if any , with regard to the report findings are subject to the exclusive jurisdiction of the competent courts chennai only.

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Name	MRS.RADHA J (40Y/FEMALE)	ID	MED121503127
Age & Gender	40Y/F	Visit Date	25 Nov 2022 14:43:59:700
Ref Doctor Name	MediWheel		

Dr Sharanya.S MD, DNB  
Radiologist

Category - (BIRADS classification)

Category 0: Assessment incomplete. Category 1: Negative (normal).

Category 2: Benign. Category 3: Probably benign finding.

Category 4: Suspicious abnormality. Category 4a: Low suspicion 4b - Intermediate suspicion.

Category 4c: Moderate suspicion. Category 5: High suggestive of malignancy.

Category 6: Known biopsy proven malignancy.

NOTE: Please bring your old mammogram film for the next visit.

**REPORT DISCLAIMER**

- 1.This is only a radiological impression.Like other investigations, radiological investigation also have limitation. Therefore radiological reports should be interpreted in correlation with clinical and pathological findings.
- 2.The results reported here in are subject to interpretation by qualified medical professionals only.
- 3.Customer identities are accepted provided by the customer or their representative.
- 4.information about the customer's condition at the time of sample collection such as fasting, food consumption, medication, etc are accepted as provided by the customer or representative and shall not be investigated for its truthfulness.
- 5.If any specimen/sample is received from any others laboratory/hospital,its is presumed that the sample belongs to the patient identified or named.
- 6.Test results should be interpreted in context of clinical and other findings if any.In case of any clarification /doubt , the referring doctor/patient can contact the respective section head of the laboratory.

- 7.Results of the test are influenced by the various factors such as sensitivity, specificity of the procedures of the tests, quality of the samples and drug interactions etc.,
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GE MAC1200 ST MRS RADHA J, 0121503127, MEDALL DIAGNOSTICS  
 Female, 40 Years (14.07.1982)

HR 81 bpm

MEDALL HEALTH CARE PVT LTD  
 No.20/3&4, Gopalakrishnan Street,  
 T.Nagar, Chennai - 600017.  
 Ph: 044-42121883

*Normal ECG*

*On*  
 Unconfirmed report.

Interpretation:

normal ECG

Measurement Results.

QRS	384 /	90 ms	< P	
QT/QTcB	447 ms		< T	
PR	130 ms		< QRS	
P	100 ms		aVL	
RR/PP	738 /	730 ms	O I	
P/QRS/T	55 /	0 /	15 degrees	
QTd/QTcBD	62 /	72 ms	III	+90
Sokolow	1.3 mV		aVF	
NK	12			

