



OPD ASSESSMENT FORM



Name Mr. Kounel Kumar Keshari Age.Sex 35/M MR.No. 5115809
 Doctor Shailaja Desai Date 11/11/23
 Ht : _____ Wt. : _____ Temp : _____ Pulse : _____ BP : _____
 SPO2 : _____ Post of walk SPO2 : _____

Chief Complaints :

Routine Dental check up

Drug / Food Allergy :

Prior Medication Reviewed : Yes No

On examination :

ts fair
Referred to

Past History :

Provisional Diagnosis :

Nutritional Assessment :

- Obese
- Well nourished
- Mild- moderate nourished
- Severely mal-nourished

**Treatment and further Advices :
(Write in Capital Letters)**

Investigation advised :

Rx

1) scaling
2) x-ray & review e to

U.S. Desai

Dr. Shailaja Desai
B.D.S. (Dental Surgeon)
A-9793

Dental Surgeon
Sunshine Global Hospitals
Signature

Follow Up : _____ Date : _____



OPD ASSESSMENT FORM



Name Mr. Kunal Kumar Keshari Age.Sex 35/m MR.No. 5145804
 Doctor Dr Hardik Shroff Date 11/11/23
 Ht : _____ Wt. : _____ Temp : _____ Pulse : _____ BP : _____
 SPO2 : _____ Post of walk SPO2 : _____

Chief Complaints :

No complaint

Drug / Food Allergy :

Prior Medication Reviewed : Yes No

On examination :

BE Ant-seg

Past History :

MAD

An eye (L & R) Nil.

Fundus (central)

Provisional Diagnosis :

BE Ref. error

Nutritional Assessment :

BE MAD

- Obese
- Well nourished
- Mild- moderate nourished
- Severely mal-nourished

Treatment and further Advices :
(Write in Capital Letters)

Rx

Investigation advised :

BE Refresh tears etc

~~~~~

Dr. Hardik Shroff  
 DOMS, DNB (Ophthalmology)  
 Reg. No. G-28902

SUNSHINE GLOBAL HOSPITAL  
 Piprod, SURAT  
 Signature

Follow Up : swl Date : \_\_\_\_\_

In case of emergency Please report to Emergency Department of Hospital OR  
Call : 75748 49465, 0261-4111000



|                                       |                          |
|---------------------------------------|--------------------------|
| <b>PAT. NAME :</b> Kunal Kumar Keshri | <b>Date :</b> 11/11/2023 |
| <b>REF. DOCTOR :</b> Hosp. Dr.        | <b>AGE :</b> 35 Yrs / M  |
| <b>INV. :</b> Radiograph of Chest PA  | <b>MR NO. :</b> S145804  |

DOC. No. | SGHS/FMT/IPD041 | DOI | 14/06/2014 | Rev. No. | 0.0

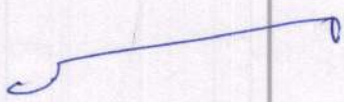


- Clinical Details: HC
- > Both the lung fields appears normal.
  - > Both costophrenic angles appear clear.
  - > Both the hila appears normal.
  - > Trachea appears in midline.
  - > Cardiac size and other mediastinal shadows appears normal.
  - > Both domes of diaphragm appear normal.
  - > Any thorax appears normal.

11/11/23

Ry

Refresh tears eye drops @ 3



**Dr. Sneha Dumaswala**  
MBBS, DNB-Radiodiagnosis  
Consultant Radiologist  
G-21796

A

Transcribed By: Asha

Date & Time of report: 11/11/2023 - 01:27 PM

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Emergency No. : 7574849465



|                                       |                          |
|---------------------------------------|--------------------------|
| <b>PAT. NAME :</b> Kunal Kumar Keshri | <b>Date :</b> 11/11/2023 |
| <b>REF. DOCTOR :</b> Hosp. Dr.        | <b>AGE :</b> 35 Yrs / M  |
| <b>INV. :</b> USG Abdomen & Pelvis    | <b>MR NO. :</b> S145804  |

**Findings:**

Liver is enlarge in size (17.4 cm), shape and shows moderate increase in parenchymal echopattern. No e/o any focal or diffuse lesion noted. Intrahepatic biliary radicals are normal.

Gall bladder is distended and appears normal. No e/o calculus, sludge or mass lesion is seen. CBD and Portal Vein appears normal is size and calibre.

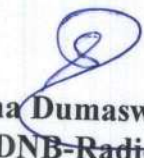
Pancreas appears normal in size and shows normal echopattern to the extent assessed. Spleen appears enlarge in size (12.3 cm), shape and homogenous echopattern.

Both kidneys appear normal in size, shape and echopattern. The corticomedullary differentiation is well maintained. No e/o any calculus or hydronephrosis is seen.

Aorta and para-aortic regions could not be assessed, due to poor window. Urinary bladder appears well distended and normal. Prostate appears normal in size, shape and echopattern. No e/o free fluid in abdomen / pelvis.

**IMPRESSION:**

- Hepatosplenomegaly with grade II fatty liver.

  
**Dr. Sneha Dumaswala**  
MBBS, DNB-Radiodiagnosis  
Consultant Radiologist  
G-21796

Transcribed By: Asha

Page: 1 out of 1

Date & Time of report: 11/11/2023 - 12:52 PM

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**MR No.** : S145804  
**Patient Name** : Mr. Kunal Kumar Keshari  
**Ref By** : Dr. Hospital A Doctor  
**Collection Date** : 11/11/2023 10:21AM  
**Age** : 35 Y **Sex** : Male  
**Report Date** : 11/11/2023 12:22 PM

**HAEMATOLOGY**

| <b>Parameter</b>              | <b>Result</b>       | <b>Units</b> | <b>Normal Range</b> |
|-------------------------------|---------------------|--------------|---------------------|
| <b>CBC with ESR</b>           |                     |              |                     |
| HAEMOGLOBIN                   | 12.9                | gm/dl        | 13.0 - 17.0         |
| PCV                           | 43.6                | %            | 40 - 50             |
| RBC COUNT                     | 4.87                | mill/cmm     | 4.5 - 5.5           |
| MCV                           | 89.5                | fl           | 76 - 96             |
| MCH                           | 26.5                | pg           | 26 - 32             |
| MCHC                          | 29.6                | %            | 32 - 36             |
| RDW                           | 14.7                | %            | 11 - 15             |
| PLATELET COUNT                | 2.00                | lacs/cmm     | 1.5 - 4.5           |
| WBC COUNT                     | 9380                | /cmm         | 4000 - 11000        |
| <b>DIFFERENTIAL WBC COUNT</b> |                     |              |                     |
| NEUTROPHIL                    | 52                  | %            | 40 - 70             |
| LYMPHOCYTES                   | 37                  | %            | 20 - 40             |
| EOSINOPHILS                   | 04                  | %            | 1 - 6               |
| MONOCYTES                     | 07                  | %            | 2 - 11              |
| BASOPHILS                     | 00                  | %            | 0 - 2               |
| <b>PERIPHERAL SMEAR</b>       |                     |              |                     |
| RBC MORPHOLOGY                | Normochromic        |              |                     |
| WBC MORPHOLOGY                | Normocytic          |              |                     |
| PLATELET ON SMEAR             | Within Normal Range |              |                     |
| HEMOPARASITES                 | Adequate            |              |                     |
|                               | Not Seen            |              |                     |

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

**Dr. Shobha Choksi**  
MD, DCP (Pathology)

Reg. No.: G-9074

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|                                               |                                             |
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| <b>Patient Name</b> : Mr. Kunal Kumar Keshari | <b>Age</b> : 35 Y <b>Sex</b> : Male         |
| <b>Ref By</b> : Dr. Hospital A Doctor         | <b>Report Date</b> : 11/11/2023 12:23 PM    |

**HAEMATOLOGY**

| Parameter                          | Result   | Normal Range |
|------------------------------------|----------|--------------|
| <b>BLOOD GROUP &amp; RH FACTOR</b> |          |              |
| BLOOD GROUP                        | "O"      |              |
| RH FACTOR                          | POSITIVE |              |

**BIOCHEMISTRY**

| Parameter                          | Result         | Unit  | Normal Range |
|------------------------------------|----------------|-------|--------------|
| <b>FASTING BLOOD SUGAR (FBS)</b>   |                |       |              |
| FASTING BLOOD GLUCOSE (Hexokinase) | 128            | mg/dl | 74 - 110     |
| FASTING URINE GLUCOSE              | Present (++++) |       |              |
| FASTING URINE KETONE               | Absent         |       |              |

**CLINICAL CHEMISTRY**

| Parameter                          | Result | Unit   | Normal Range |
|------------------------------------|--------|--------|--------------|
| <b>THYROID FUNCTION TEST [TFT]</b> |        |        |              |
| TOTAL T3 (CLIA)                    | 0.883  | ng/ml  | 0.846 - 2.02 |
| TOTAL T4 (CLIA)                    | 8.31   | ug/dl  | 5.1 - 14.0   |
| TSH (CLIA)                         | 31.63  | uIU/ml | 0.2 - 4.5    |

Note:-  
Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (freeT4). Additionally the hypothalamic tripeptide, thyrotropin releasing hormone (TSH) directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy also stimulate the thyroid gland to synthesize and secrete T3 and T4.  
Quantification of TSH significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated while in secondary and tertiary hypothyroidism, TSH levels are low.

*SC*

**Dr. Shobha Choksi**  
**MD, DCP (Pathology)**  
**Reg. No.: G-9074**

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|                                               |                                             |
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| <b>Patient Name</b> : Mr. Kunal Kumar Keshari | <b>Age</b> : 35 Y <b>Sex</b> : Male         |
| <b>Ref By</b> : Dr. Hospital A Doctor         | <b>Report Date</b> : 11/11/2023 12:24 PM    |

**BIOCHEMISTRY**

| Parameter                               | Result | Units | Normal Range                                                                                    |
|-----------------------------------------|--------|-------|-------------------------------------------------------------------------------------------------|
| <b>HBA1C [GLYCOSYLATED HEAMOGLOBIN]</b> |        |       |                                                                                                 |
| HbA1C                                   | 7.0    | %     | Non-Diabetic level:<br><6 Good Control: 6<br>- 7 Poor Control: 7<br>- 8 Action<br>Suggested > 8 |
| MEAN BLOOD GLUCOSE                      | 154.2  | mg/dl |                                                                                                 |

The test is done on Cobas Integra 400plus-Turbidimetric Inhibition ImmunoAssay

Note:- Criteria for the diagnosis of diabetes HbA1c  $\geq 6.5\%$

- HbA1c is important test for the assessment of long term blood glucose control (also called glycemic control).
- HbA1C reflects mean glucose concentration over past 6-8 weeks and provides a much better indication of long term glycemic control than blood glucose determination.
- HbA1C is formed by non-enzymatic reaction between glucose and Hb. This reaction is irreversible and therefore remains unaffected by short term fluctuations in blood glucose levels.
- Long term complications of diabetes such as retinopathy, nephropathy, and neuropathy are potentially serious and can lead to blindness kidney failure etc.
- Genetic Variants (Hb-S trait, Hb-C trait) elevated fetal haemoglobin & chemically modified derivatives of haemoglobin (eg carbamylated Hb in patients with renal failure) can affect the accuracy of HbA1C measurement.

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

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|                                               |                                             |
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| <b>MR No.</b> : S145804                       | <b>Collection Date</b> : 11/11/2023 10:21AM |
| <b>Patient Name</b> : Mr. Kunal Kumar Keshari | <b>Age</b> : 35 Y <b>Sex</b> : Male         |
| <b>Ref By</b> : Dr. Hospital A Doctor         | <b>Report Date</b> : 11/11/2023 12:42 PM    |

**BIOCHEMISTRY**

| <b>Parameter</b>           | <b>Result</b> | <b>Units</b> | <b>Normal Range</b> |
|----------------------------|---------------|--------------|---------------------|
| <b>LIPID PROFILE</b>       |               |              |                     |
| SERUM CHOLESTEROL CHOD PAP | 164           | mg/dl        | 50 - 200            |
| HDL CHOLESTEROL Direct     | 30            | mg/dl        | 40 - 60             |
| LDL CHOLESTEROL Direct     | 93            | mg/dl        | 0 - 100             |
| SERUM TRIGLYCERIDE GPO PAP | 203           | mg/dl        | 50 - 150            |
| VLDL Calc                  | 40.6          | mg/dl        | 0 - 30              |
| CHOLESTEROL / HDL RATIO    | 5.47          |              | 0 - 5               |
| LDL / HDL RATIO            | 3.1           |              | 0 - 3               |

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assessment.
- Risk assessment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Details on test interpretation available from the lab.

| TEST          | NEAR OPTIMAL<br>(Moderate Risk) | BORDER LINE<br>(Risk) | HIGH<br>(Risk) | VERY HIGH |
|---------------|---------------------------------|-----------------------|----------------|-----------|
| CHOLESTROL    | 160-199                         | 200-239               | 240-279        | 280       |
| HDL           | 50-59                           | 40-49                 | < 40           |           |
| LDL           | 100-129                         | 130-159               | 160-190        | >190      |
| TRIGLYCERIDES | 150-169                         | 170-199               | 240-499        | >500      |
| CHO/HDL RATIO | 3.3-4.4                         | 4.4-11.0              | >11.0          |           |
| LDL/HDL RATIO | 0.5-3.0                         | 3.0-6.0               | >6.0           |           |

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

**Dr. Shobha Choksi**  
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|                                               |                                             |
|-----------------------------------------------|---------------------------------------------|
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| <b>Patient Name</b> : Mr. Kunal Kumar Keshari | <b>Age</b> : 35 Y <b>Sex</b> : Male         |
| <b>Ref By</b> : Dr. Hospital A Doctor         | <b>Report Date</b> : 11/11/2023 12:43 PM    |

**BIOCHEMISTRY**

| <u>Parameter</u>                                | <u>Result</u> | <u>Units</u> | <u>Normal Range</u>                                                  |
|-------------------------------------------------|---------------|--------------|----------------------------------------------------------------------|
| <b>LIVER FUNCTION TEST</b>                      |               |              |                                                                      |
| ALKALINE PHOSPHATASE (IFCC)                     | 101           | U/L          | 35 - 130                                                             |
| BILIRUBIN TOTAL Diazo                           | 0.5           | mg/dl        | 0.0 - 1.2                                                            |
| BILIRUBIN DIRECT Diazo                          | 0.2           | mg/dl        | 0.0 - 0.4                                                            |
| BILIRUBIN INDIRECT (Calc)                       | 0.3           | mg/dl        | 0.0 - 0.8                                                            |
| SGPT (IFCC)                                     | 74            | U/L          | 5 - 41                                                               |
| SGOT (IFCC)                                     | 46            | U/L          | 5 - 40                                                               |
| SERUM TOTAL PROTEIN Biuret                      | 7.9           | gm/dl        | 6.6 - 8.7                                                            |
| SERUM ALBUMIN BCG                               | 5.0           | gm/dl        | 3.5 - 5.2                                                            |
| SERUM GLOBULIN Calc                             | 2.9           | gm/dl        | 1.5 - 3.5                                                            |
| SERUM A/G RATIO Calc                            | 1.72          | gm/dl        | 1.5 - 2.5                                                            |
| <b>SERUM CREATININE</b>                         |               |              |                                                                      |
| SERUM CREATININE (JAFPE)                        | 0.9           | mg/dl        | 0.5 - 1.2                                                            |
| <b>SERUM URIC ACID</b>                          |               |              |                                                                      |
| SERUM URIC ACID (Uricase)                       | 5.5           | mg/dl        | 3.4 - 7.0                                                            |
| <b>BUN [BLOOD UREA NITROGEN]</b>                |               |              |                                                                      |
| BUN                                             | 9.9           | mg/dl        | 8 - 23                                                               |
| <b>ALBUMIN-CREATININE RATIO</b>                 |               |              |                                                                      |
| URINE ALBUMIN/MICROALBUMIN (Immunoturbidimetry) | 6.1           | mg/L         |                                                                      |
| URINE CREATININE (JAFPE)                        | 98.4          | mg/dl        |                                                                      |
| ALBUMIN-CREATININE RATIO (Calculated)           | 6.19          | mg/gm        | Normal: <30;<br>Microalbuminuria: 30-299; Clinical Albuminuria: >300 |

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

*[Signature]*  
**Dr. Shobha Choksi**  
**MD, DCP (Pathology)**

**Reg. No.: G-9074**

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| <b>Patient Name</b> : Mr. Kunal Kumar Keshari | <b>Age</b> : 35 Y <b>Sex</b> : Male         |
| <b>Ref By</b> : Dr. Hospital A Doctor         | <b>Report Date</b> : 11/11/2023 12:45 PM    |

**CLINICAL PATHOLOGY**

| <b>Parameter</b>                                   | <b>Result</b>  | <b>Normal Range</b> |
|----------------------------------------------------|----------------|---------------------|
| <b>URINE ROUTINE &amp; MICROSCOPIC EXAMINATION</b> |                |                     |
| TYPE OF SPECIMEN - URINE                           | Random         |                     |
| <b>PHYSICAL EXAMINATION</b>                        |                |                     |
| QUANTITY                                           | 50             | ml                  |
| COLOUR                                             | Pale Yellow    |                     |
| APPEARANCE                                         | Clear          |                     |
| REACTION (pH)                                      | 6.0            |                     |
| SPECIFIC GRAVITY                                   | 1.030          |                     |
| <b>CHEMICAL EXAMINATION</b>                        |                |                     |
| PROTEIN                                            | Absent         |                     |
| GLUCOSE                                            | Present (++++) |                     |
| KETONE                                             | Absent         |                     |
| BILE SALT                                          | Absent         |                     |
| BILE PIGMENT                                       | Absent         |                     |
| OCCULT BLOOD                                       | Absent         |                     |
| NITRITE                                            | Absent         |                     |
| <b>MICROSCOPIC EXAMINATION</b>                     |                |                     |
| PUS CELLS                                          | 2-3            | /hpf                |
| EPITHELIAL CELLS                                   | 1-2            | /hpf                |
| RBC                                                | Absent         | /hpf                |
| CASTS                                              | Absent         |                     |
| CRYSTALS                                           | Absent         |                     |
| BACTERIA                                           | Absent         |                     |
| YEAST CELLS                                        | Absent         |                     |

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

**Dr. Shobha Choksi**  
**MD, DCP (Pathology)**  
**Reg. No.: G-9074**

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**MR No.** : S145804  
**Patient Name** : Mr. Kunal Kumar Keshari  
**Ref By** : Dr. Hospital A Doctor  
**Collection Date** : 11/11/2023 10:21AM  
**Age** : 35 Y **Sex** : Male  
**Report Date** : 11/11/2023 2:26 PM

**BIOCHEMISTRY**

| <b>Parameter</b>                          | <b>Result</b> | <b>Units</b> | <b>Normal Range</b> |
|-------------------------------------------|---------------|--------------|---------------------|
| <b>POST PRANDIAL BLOOD GLUCOSE [PPBS]</b> |               |              |                     |
| POST PRANDIAL BLOOD GLUCOSE (Hexokinase)  | 174           | mg/dl        | 100 - 140           |
| POST PRANDIAL URINE GLUCOSE               | SNR           |              |                     |
| POST PRANDIAL URINE KETONE                | SNR           |              |                     |

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

*ESC*  
**Dr. Shobha Choksi**  
**MD, DCP (Pathology)**  
**Reg. No.: G-9074**

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**Vadodara :**  
**Manjalpur**  
Nr. Shreyas Vidyalaya, Nalini House,  
Manjalpur, Vadodara - 390 011.  
**T:** +91 265 3300400, 2633200, 2632044  
**F:** +91 265 2632400

**Vadodara :**  
**Tilak Road**  
Anant Apartment, B/s. Aradhna Cinema,  
Tilak Road, Vadodara - 390 001.  
**T:** +91 265 2429282, 2429262  
**F:** +91 265 434073

ID: S145804

Visit

11-Nov-2023

10:47:14

35years

Caucasian

Male

BRUCE

Max HR: 185bpm 100% of max predicted 185bpm

Max BP: 189/109

Reason for Termination: 10.7METS

Comments:

Tot Exercise time: 9:13

25.0 mm/s

10.0 mm/mV

100hz

Referred by:

Test ind:

| Stage Name | Time in Stage | Speed (mph) | Grade (%) | WorkLoad (METS) | HR (bpm) | BP (mmHg) | RPP (x100) |
|------------|---------------|-------------|-----------|-----------------|----------|-----------|------------|
| PRETEST    | 1:43          | 0.6         | 0.0       | 1.3             | 96       | 137/90    | 132        |
| EXERCISE   | 3:00          | 1.7         | 10.0      | 4.6             | 141      | 137/90    | 195        |
| STAGE 2    | 3:00          | 2.5         | 12.0      | 7.0             | 157      | 150/90    | 236        |
| STAGE 3    | 3:00          | 3.5         | 14.0      | 10.4            | 183      | 160/100   | 298        |
| STAGE 4    | 0:13          | 4.3         | 16.0      | 10.7            | 185      | 160/100   | 296        |
| RECOVERY   | 4:03          | ** *        | ** *      | 1.0             | 122      | 189/109   | 231        |

Test is negative for inducible ischemia

Technician:

Unconfirmed

MAC55 0103

ID: S145804

Visit

11-Nov-2023

10:48:40

96bpm

BP: 137/90

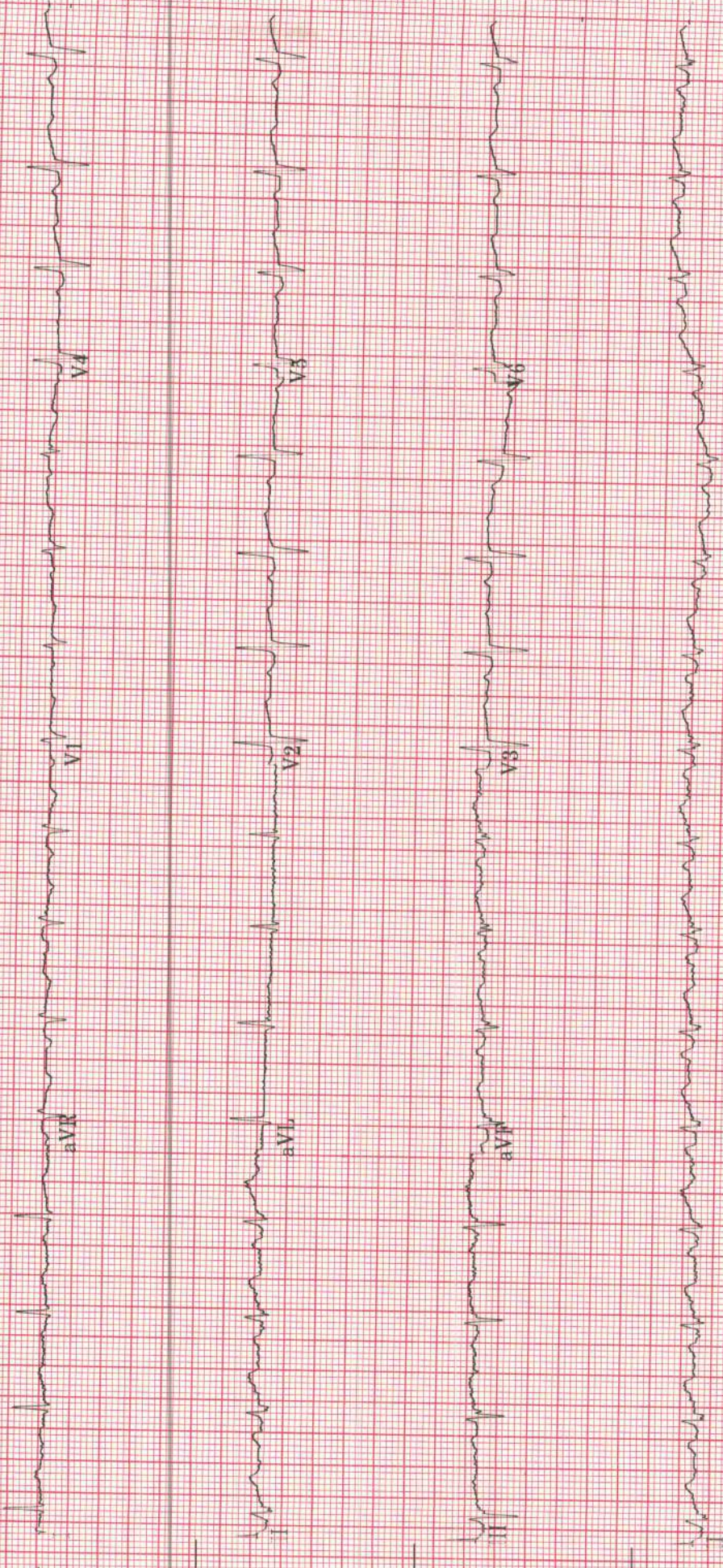
PRETEST  
SUPINE

1:28

RUCE

\*\*\*mph

\*\*\*%



40 Hz 25.0 mm/s 10.0 mm/mV

A. H. S. 50Hz HR 46

4 by 2.5s + 1 rhythm lead

MAC55 010B

0

ID: S145804

11-Nov-2023

10:51:56

141bpm

BP: 137/90

ST @ 10mm/mV

80ms postJ

EXERCISE

STAGE 1

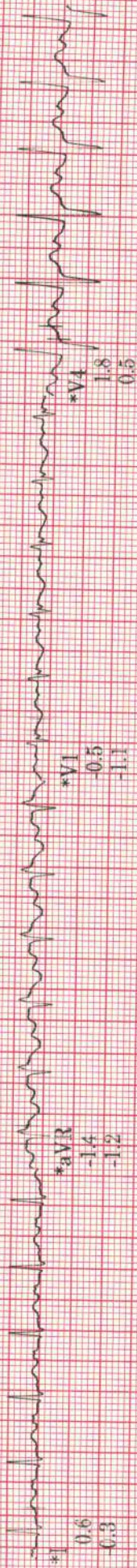
3:00

UCCE

1.7mph

10.0%

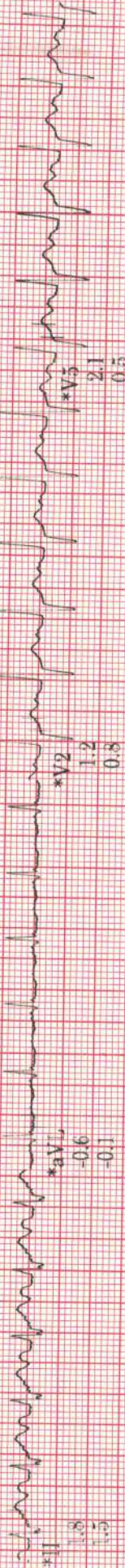
Lead  
ST(mm)  
Slope(mV/s)



\*aVR  
-1.4  
-1.2

\*V1  
-0.5  
-1.1

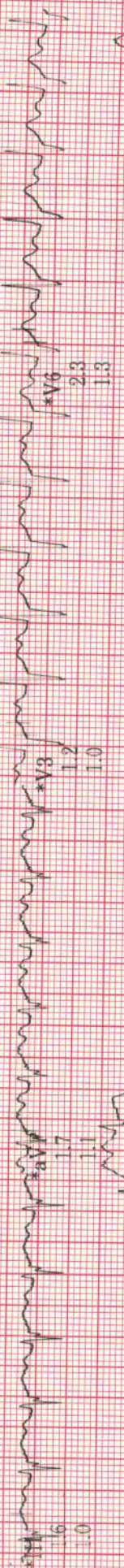
\*V4  
1.8  
0.5



\*aVL  
-0.6  
-0.1

\*V2  
1.2  
0.8

\*V5  
2.1  
0.5



\*aVF  
1.7  
1.1

\*V3  
1.2  
1.0

\*V6  
2.3  
1.3

Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV

A-H-S-50Hz HR 46

\* Computer Synthesized Rhythm

MAC55 010B

II

ID: S145804

Vis: t.

11-Nov-2023  
10:54:56

EXERCISE  
STAGE 2  
6:00

157bpm

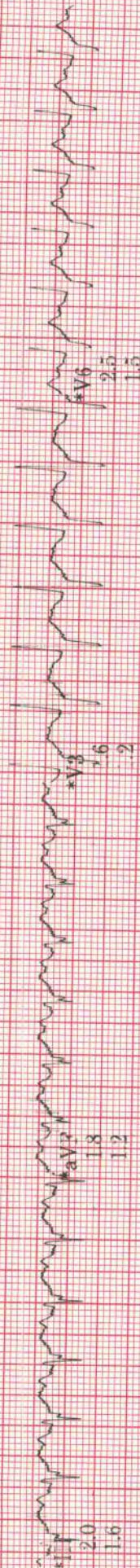
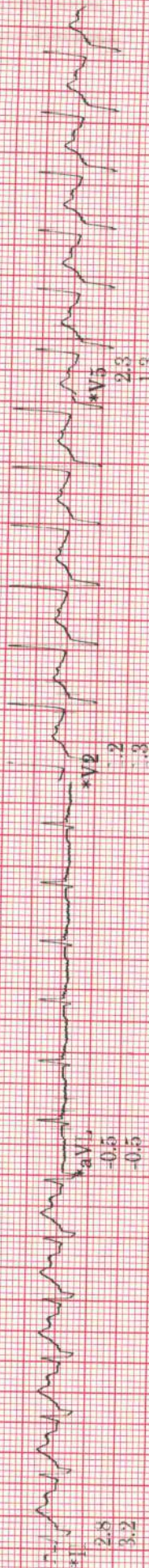
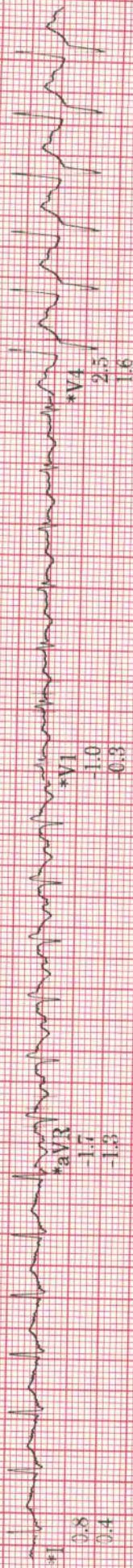
BP: 150/90

ST @ 10mm/mV  
80ms postJ

GRUCE

2.5mph  
12.0%

Lead  
ST(mm)  
Slope(mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV

A-H-S 50Hz HR 46

Computer Synthesized Rhythm

MAC55 010B

9

ID: S145804

Visit

11-Nov-2023

10:57:56

183bpm

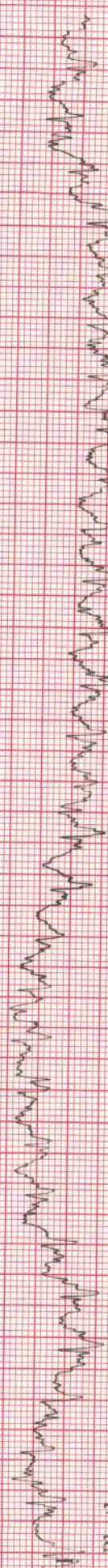
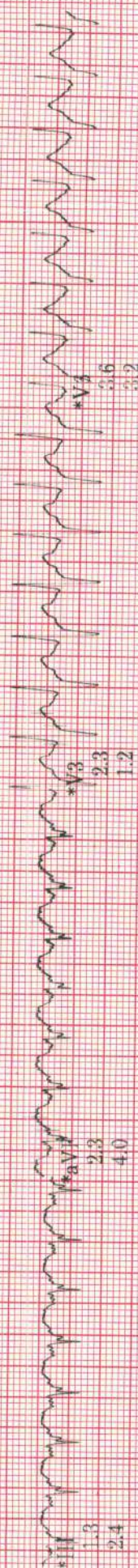
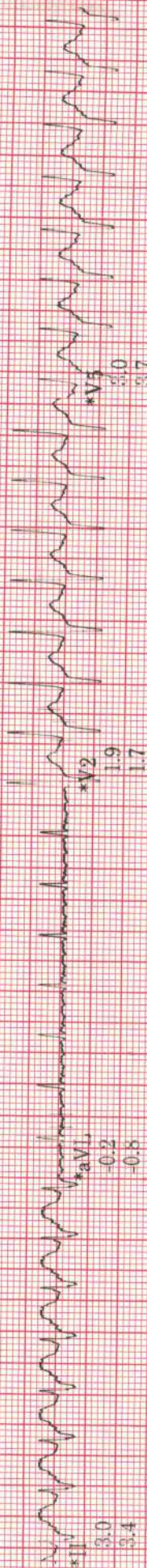
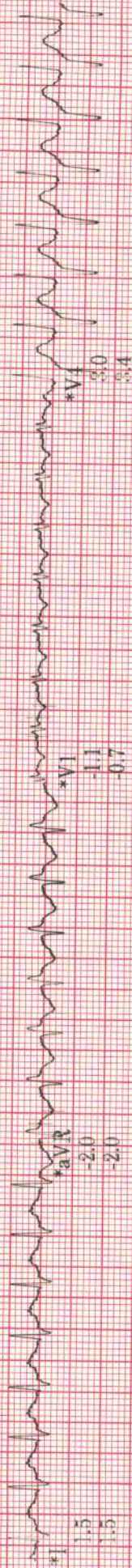
BP: 160/100

ST @ 10mm/mV  
80ms postJ

EXERCISE  
STAGE 3  
9:00

3.4mph  
14.0%

Lead  
ST(mm)  
Slope(mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV

A-H-S-50Hz HR 46

\* Computer Synthesized Rhythm

MAC55 010B

6



ID: S145804

Visit:

11-Nov-2023

10:58:10

186bpm

BP: 160/100

ST @ 10mm/mV

80ms postJ

EXERCISE

STAGE 4

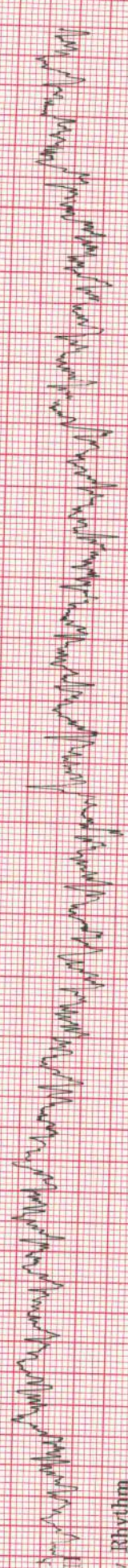
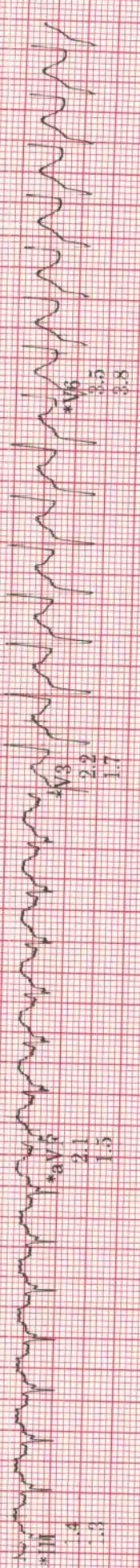
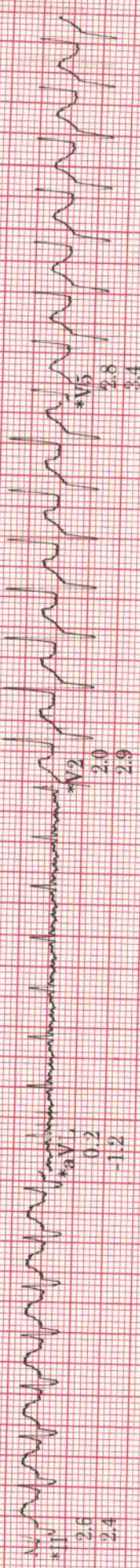
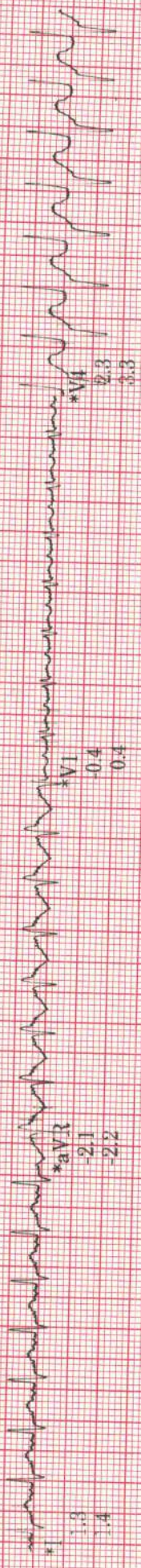
9:13

GRUCE

4.2mph

16.0%

Lead  
ST(mm)  
Slope(mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV

A-H-S 50Hz HR 46

\* Computer Synthesized Rhythm

MAC55 010B

6

ID: S145804

Vis: -

11-Nov-2023

11:00:09

RECOVERY  
RECOVERY

135bpm

BP: 181/100

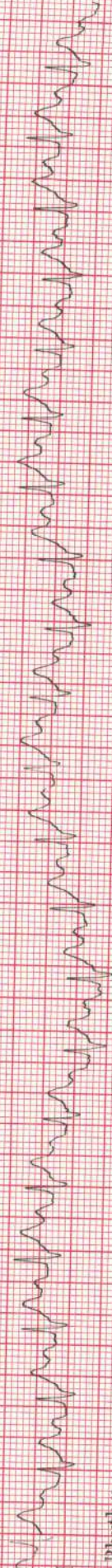
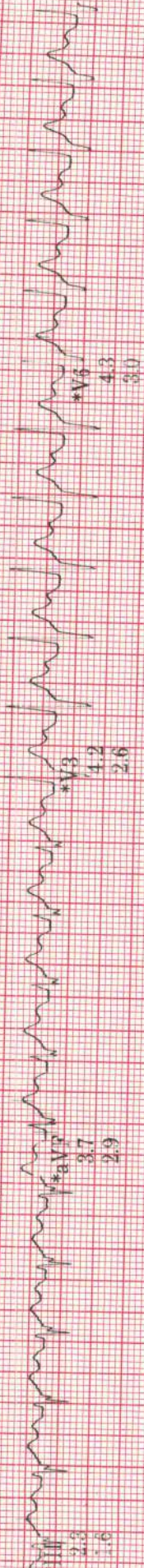
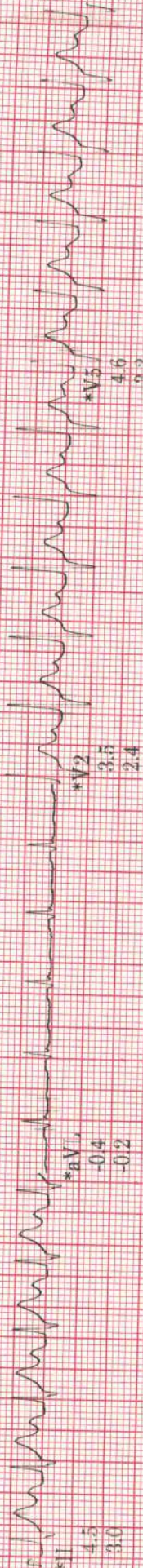
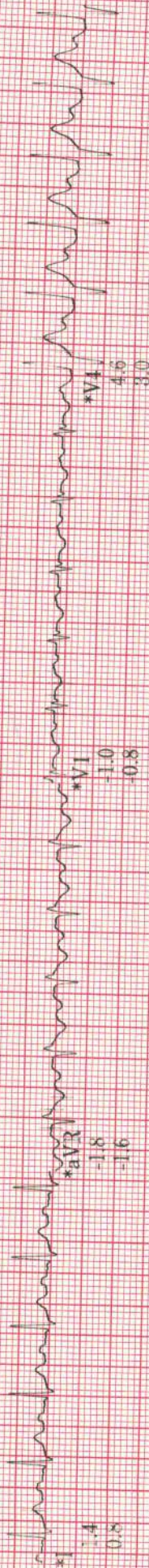
ST @ 10mm/mV  
80ms postJ

UCE

\*\*mph

\*\*\*%

Lead  
ST(mm)  
Slope(mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV

A-H-S-50Hz HR 46

\* Computer Synthesized Rhythm

MAC55 010B

ID: S145804

Visitt:

11-Nov-2023

11:02:09

RECOVERY  
RECOVERY

4:00

122bpm

BP: 189/109

ST @ 10mm/mV

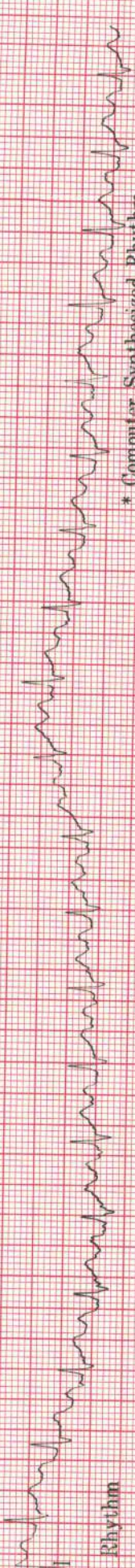
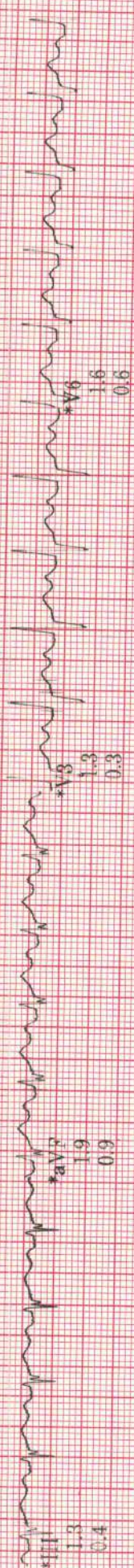
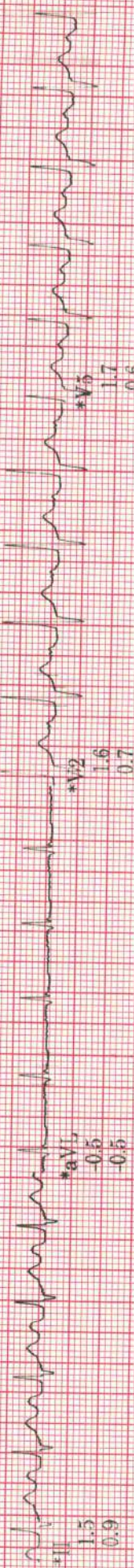
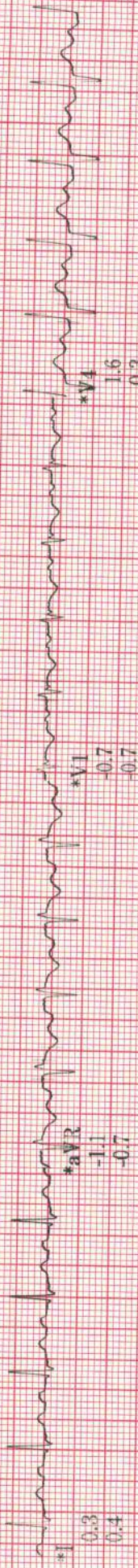
80ms post

BRUCE

\*\*.\*mph

\*\*.\*%

Lead  
ST(mm)  
Slope(mV/s)



Raw Rhythm

40 Hz 25.0 mm/s 10.0 mm/mV

A H S 50Hz HR 46

\* Computer Synthesized Rhythm

MAC55 010B

0

ID: S145804

V: s: b: =

11-Nov-2023

10:47:14

35years

Caucasian

Male

BRUCE

Exercise time: 9:13

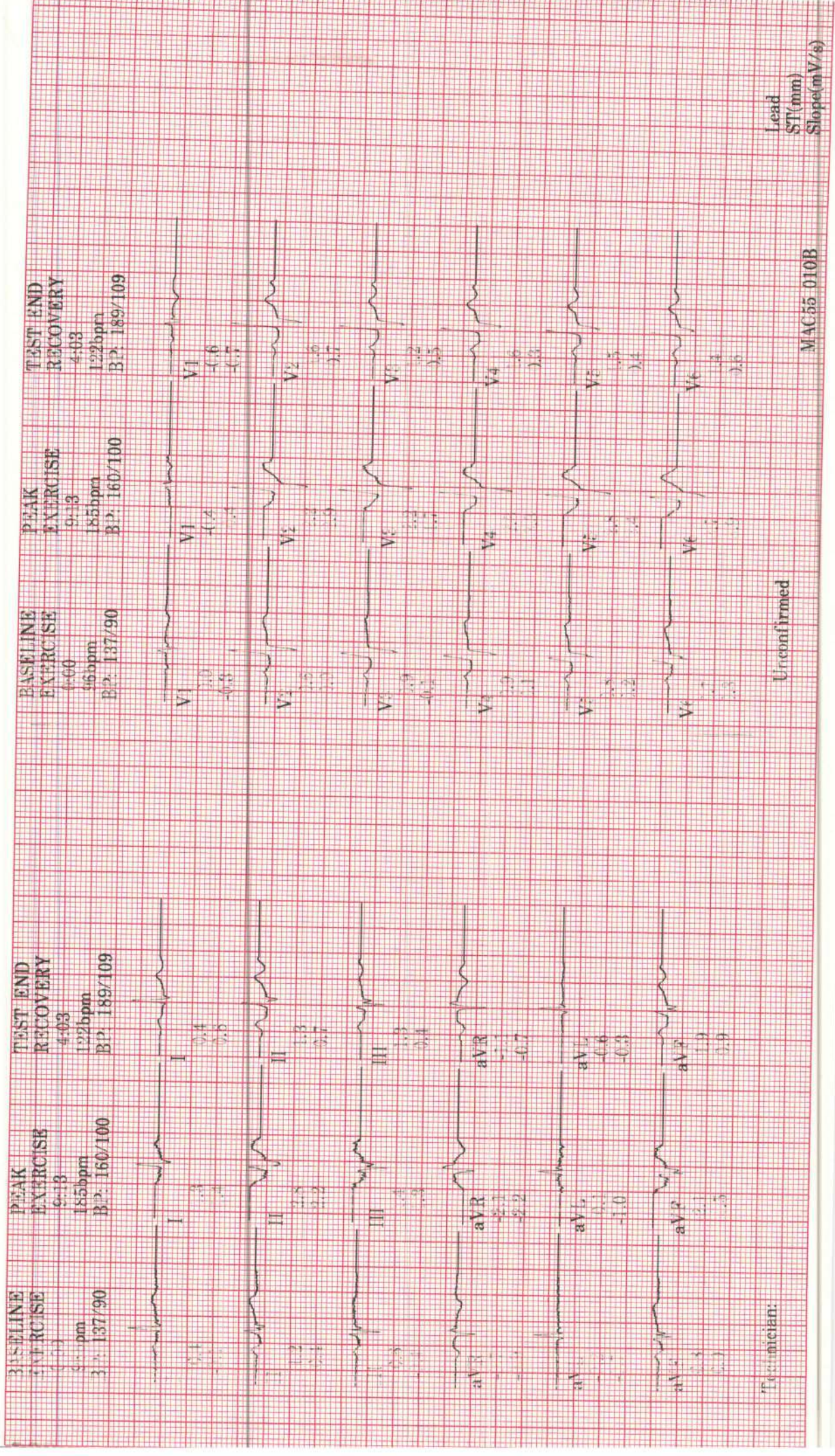
Max HR: 185bpm 100% of max predicted 185bpm

Max EP: 139/109

Reason for Termination: 10.7METS

Comments:

Referred by:  
Test ind:



Technician:

Unconfirmed

MAC55 010B

Lead  
ST(mm)  
Slope(mV/s)

ID: S145804

Visit: -

11-Nov-2023

10:47:14

35years

Caucasian

Male

BRUCE

To Exercise time: 9:13

Max HR: 185bpm 100% of max predicted 185bpm

Max BP: 189/109

Maximum workload: 10.7METS

Reason for Termination:

Comments:

Referred by:

Test ind:

BASELINE

EXERCISE STAGE 1

1.3METS

96bpm

BP: 137/90

ST @ 10mm/mV

80ms postJ

PEAK

EXERCISE STAGE 4

10.7METS

185bpm

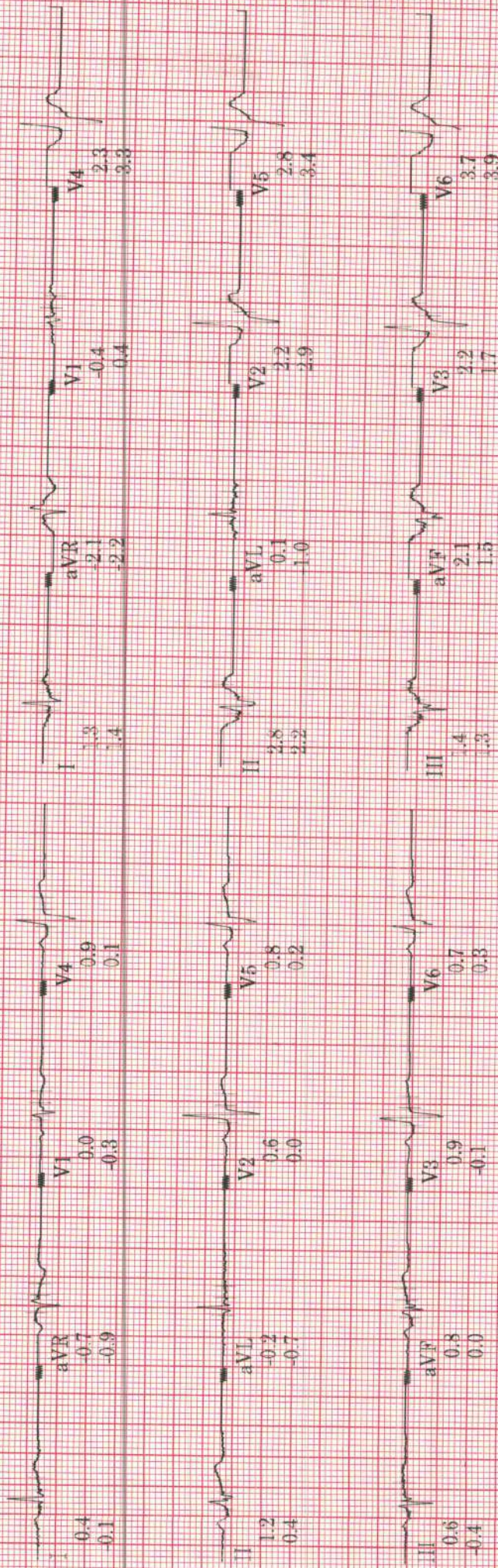
BP: 160/100

ST @ 10mm/mV

80ms postJ

Lead ST(mm)

Slope(mV/s)



Technician:

Unconfirmed

MAC55 010B

LD: 5145604

11-Nov-2023  
10:47:14

PRETEST  
SUPINE  
1:28  
96bpm  
BP: 137/90  
1.0METS

EXERCISE  
STAGE 1  
0:00  
96bpm  
BP: 137/90  
1.3METS

EXERCISE  
STAGE 1  
1:00  
124bpm  
BP: 137/90  
2.9METS

EXERCISE  
STAGE 1  
2:00  
136bpm  
4.6METS

EXERCISE  
STAGE 1  
3:00  
141bpm  
BP: 137/90  
4.6METS

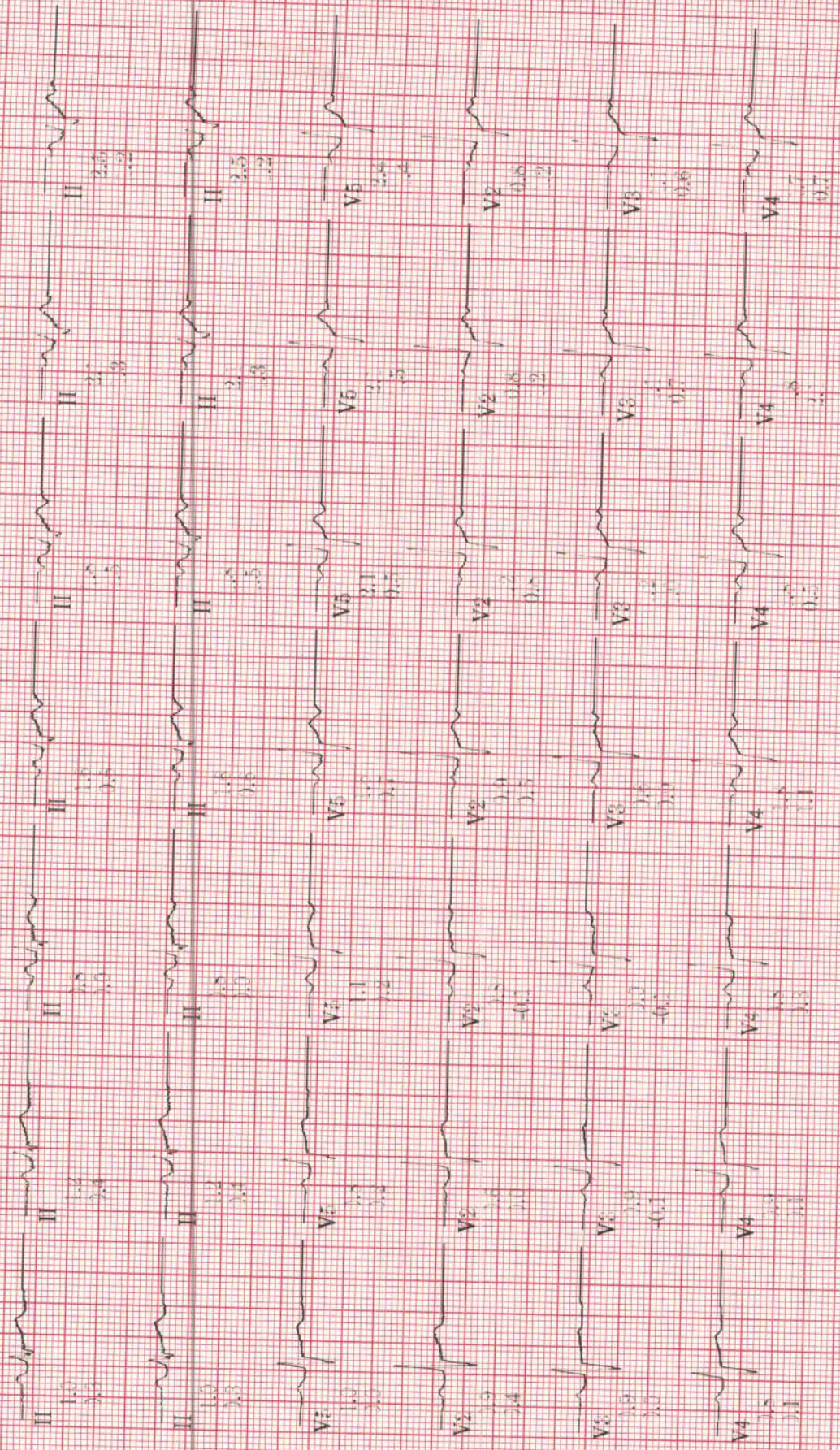
EXERCISE  
STAGE 2  
4:00  
153bpm  
5.8METS

EXERCISE  
STAGE 2  
5:00  
156bpm  
BP: 150/90  
7.0METS

BRUCE

ST @ 10mm/mV  
80ms postJ

25.0 mm/s  
10.0 mm/mV  
100hz



Lead  
ST (mm)  
Slope (mV/s)

MAC55 010B

ID: 3143604

EXERCISE STAGE 2  
6:00  
157bpm  
BP: 150/90  
7.0METS

EXERCISE STAGE 3  
7:00  
168bpm  
BP: 160/100  
8.5METS

EXERCISE STAGE 3  
8:00  
178bpm  
BP: 160/100  
10.1METS

EXERCISE STAGE 3  
9:00  
183bpm  
BP: 160/100  
10.4METS

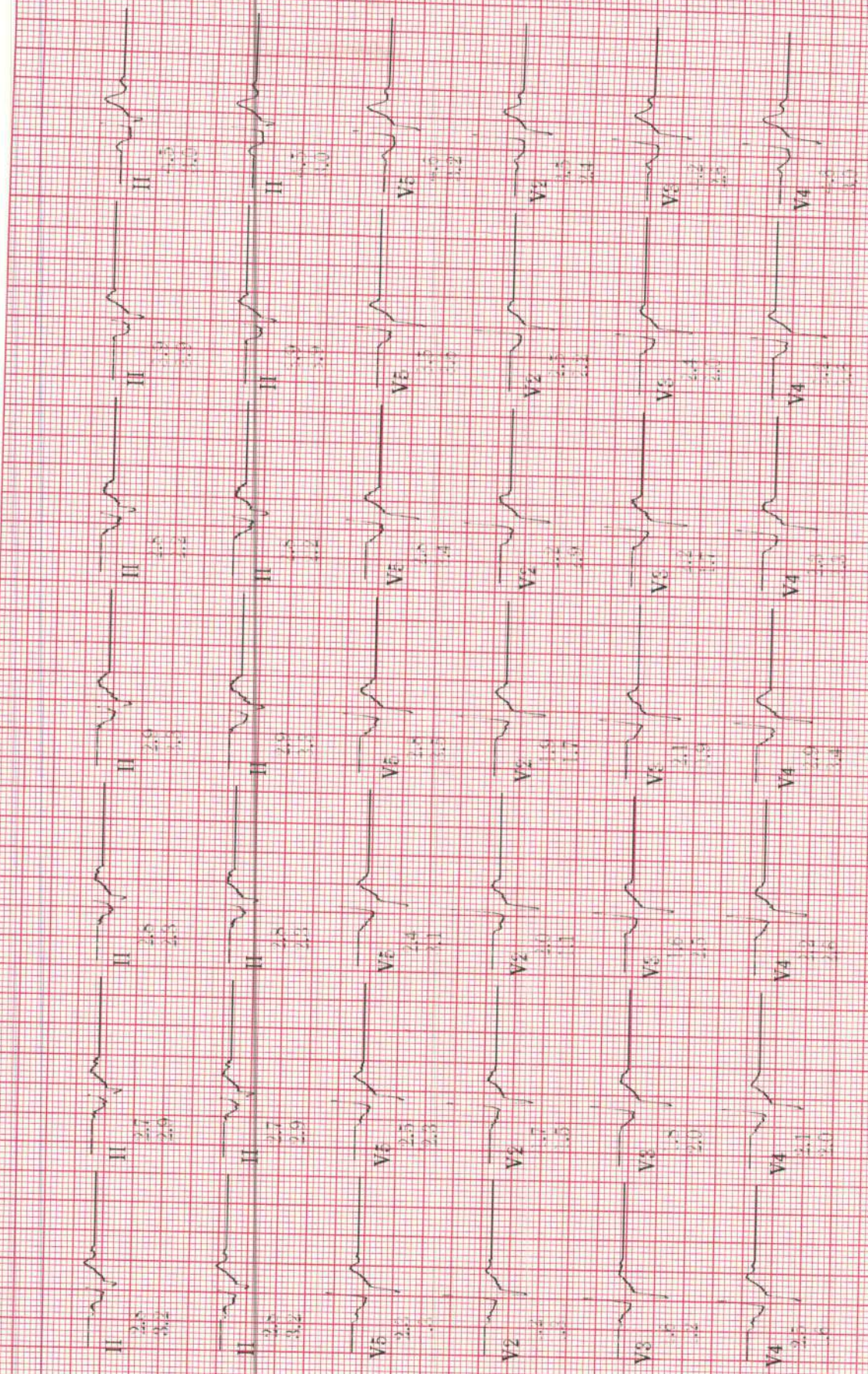
EXERCISE STAGE 4  
9:13  
185bpm  
BP: 160/100  
10.7METS

RECOVERY  
1:00  
117bpm  
5.9METS

RECOVERY  
2:00  
135bpm  
BP: 181/100  
1.0METS

BRUCE

ST @ 10mm/mV  
80ms post J  
25.0 mm/s  
10.0 mm/mV  
100hz



Lead ST (mm) Slope (mV/s)

MAC55-010R

ID: S145804

Visit:

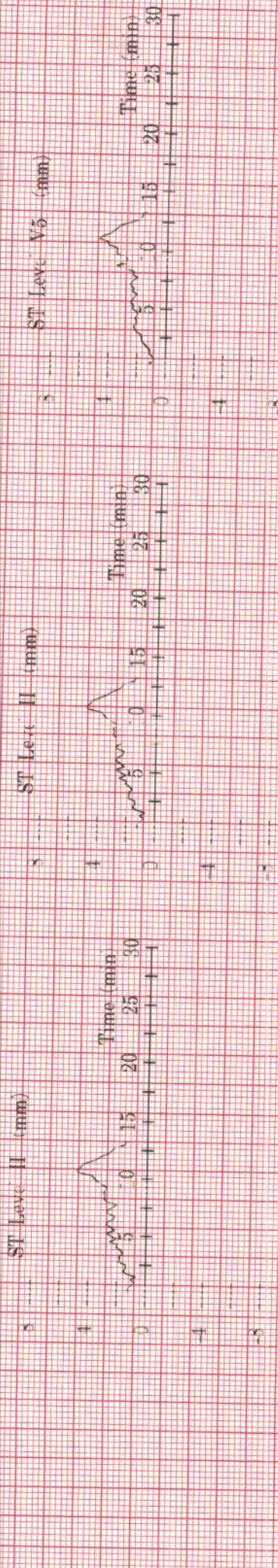
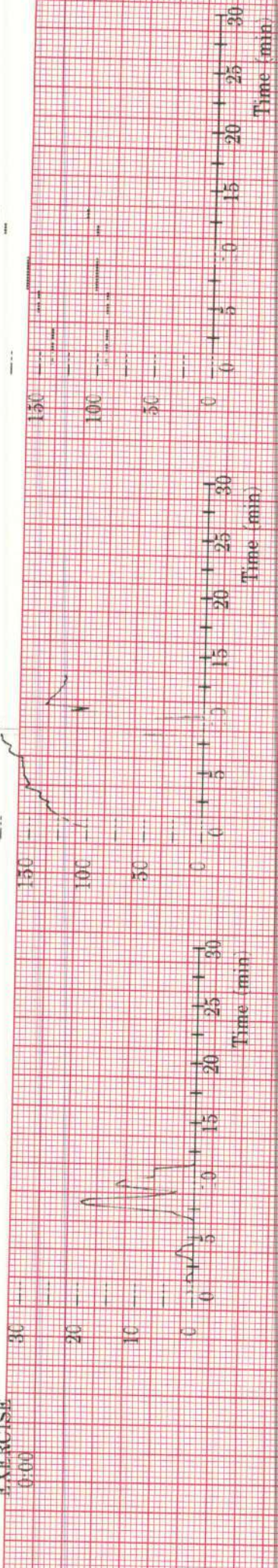
11-Nov-2023  
10:47:14

BRUCE

Heart Rate (bpm)  
250 ---  
200 ---

BP (mm Hg)  
150 ---  
100 ---  
50 ---  
0 ---

PVC's/m  
ST @ 10mm/mV 40 ---  
80ms postJ ---  
EXERCISE ---





DOB: \_\_\_\_\_  
yr, MALE  
Kumar  
Kumar  
Kumar  
Kumar

SINUS RHYTHM  
BORDERLINE LEFT AXIS DEVIATION  
BORDERLINE ECG  
INTERPRETATION BASED ON A DEFAULT AGE OF 40 YEARS  
Reviewed by \_\_\_\_\_

Vent rate: 87 BPM  
PR int: 167 ms  
QRS dur: 110 ms  
QT/QTc: 353/397 ms  
P-R-T axes: 50 -23 24

