

Complete Blood Count (CBC)



DR. CHARU KOHLI'S CLINIC

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Registration No.	102222009	Mobile No.	8697542436
Patient Name	Ms. PRIYA ELIZABETH JITHIN	Registration Date/Time	14/03/2023 08:21:54
Age / Sex	32 Yrs Female	Sample Collected Date/Time	14/03/2023 12:23:33
Ref By / Hospital	Others BANK OF BARODA	Report Date/Time	14/03/2023 15:55:36
Collected At	DCKC	Printed Date/Time	14/03/2023 17:59:19

HAEMATOLOGY

complete Blood count (CBC)			
Haemoglobin (Hb) ,EDTA Method: Colorimetric	12.7	g/dL	12.0 - 15.0
Total Leucocyte Count (TLC) ,EDTA Method : Electric impedence	07.7	10^9 /L	04.0 - 11.0
Red Blood Cell (RBC) ,EDTA Method: Electric impedence	4.84	10^6 /uL	3.80 - 4.80
Hematocrit (HCT /PCV) ,EDTA Method: Pulse height detection	40.3	%	36.0 - 46.0
Mean Corp Volume (MCV) ,EDTA Method : Calculated	83.3	fL	83.0 - 101.0
Mean Corp Hb (MCH) ,EDTA Method: Calculated	26.3	pg	27.0 - 32.0
Mean Corp Hb Conc (MCHC) ,EDTA Method : Calculated	31.6	g/dL	31.5 - 34.5
Platelet Count(PLT) ,EDTA Method: Electric impedence/Microscopy	281.00	10^3 /uL	150.00 - 410.00
RDW- CV% ,EDTA	13.5	%	11.6 - 14.0
Differential Leucocyte Count Method: Microscopy			
Neutrophil ,EDTA	67.0	%	40.0 - 80.0
Lymphocyte ,EDTA	25.0	%	20.0 - 45.0
Eosinophil ,EDTA	2.0	%	1.0 - 6.0
Monocyte ,EDTA	6.0	%	2.0 - 10.0
Basophil ,EDTA	0.0	%	0.0 - 2.0

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ESR , EDTA

Method: Westergreen

Checked By :- POOJA

DR.NEELU CHHABRA MD. PATHOLOGIST

00 - 20

18

mm/Ist hr.





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Test Name Value Unit Biological Ref Interval

Blood Group ABO ,EDTA "A"

Method: Forward Grouping

Rh Typing ,EDTA POSITIVE

HbA1c ,EDTA 5.2 %

Method: Photometric method

Method : Forward Grouping

INTERPRETATIONS:-

NORMAL RANGE 4.00 - 5.60 %

Pre Diabetic/ Higher chance of getting diabetes	5.70	- 6.20	%
		6.20	,,,
Good Diabetic Control	6.20 -	6.80	%
Fair Diabetic Control	6.80 -	7.60	%
Uncontrolled Diabetes -action suggested	>7.6		%

Note:-

Glycosylated Haemoglobin is a specific component of HBA1C and is the blood glucose bound to it. This test is an index of carbohydrate in balance during the preceding two months. The estimation is of greater importance for specific group of patient. This result are not affected by time, meal intake exercise, diabetic drugs, emotional Stress etc. HbA1c should be routinely monitored ideally at least every 3 months.

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Test Name Value Unit **Biological Ref Interval**

BIOCHEMISTRY

LIPID PROFILE

Total Lipids ,Serum Plain	463	mg/dl	400 - 700
Serum Cholesterol ,Serum Plain Method : CHOD-POD	173	mg/dl	0 - 200
Serum Triglycerides ,Serum Plain Method : GOD-POD	117	mg/dl	40 - 140
Serum HDL Cholesterol ,Serum Plain Method : Direct Method	60.0	mg/dl	40.0 - 70.0
Serum LDL Cholesterol ,Serum Plain Method : Calculated	90.0	mg/dl	30.0 - 100.0
Serum VLDL Cholesterol ,Serum Plain Method : Calculated	23.0	mg/dl	24.0 - 45.0
Total CHO/HDLCholesterol Ratio ,Serum Plain Method : Calculated	2.88		
LDL/HDL Cholesterol Ratio ,Serum Plain Method : Calculated	1.50		

Guidelines for Total Blood Cholestrol Levels on 11 to 12 hour fasting samples.

Desirable: Less than 200 mg/dl

Borderline High Risk: 200 to 239 mg/dl

High Risk : 240 mg/dl and over, on repeated values

Optimal Level for Cardiac Patients : Less than 200 mg/dl

HDL-C: High HDL has generally been found to be protective, decreasing the risk of coronary Artery disease (CAD) in most people. However, some recent studies have shown that in some people with high HDL, the HDL is not protective and may, in fact result in higher risk for CAD than in people with normal HDL levels. In one study it was shown that people with CAD and high HDL had underlying genetic anomalies in enzymes important in lipid turnover. Another study showed that high levels of abnormally large HDL particles were associated with increased risk of CAD. Factors that elevate HDL concentrations include chronic alcoholism, treatment with oral estrogen replacement therapy, extensive aerobic exercise, and treatment with niacin, statins, or fibrates. Smoking reduces levels of HDL cholesterol, while quitting smoking leads to a rise in the plasma HDL level.

Triglycerides

Female 40 - 140 Male 60 - 165

Adult levels:

Optimal Near Optimal/ above optimal <100 mg/dL 100 -129 mg/dL

Borderline high

130 - 159 mg/dL

High

Very High

160 - 189 mg/dL >=190 mg/dL

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DR.NEELU CHHABRA MD. PATHOLOGIST

At Your Home: Collection of Blood Samples, ECG, Digital X-Ray





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Ref By / Hospital	Others BANK OF BARODA	Report Date/Time	14/03/2023 15:55:36
Collected At	DCKC	Printed Date/Time	14/03/2023 17:59:19

Test Name	Value	Unit	Biological Ref Interval
LIVER PROFILE / LFT			
Serum Bilirubin (Total) ,Serum Plain Method : DSA Method	0.42	mg/dl	0.00 - 1.20
Serum Bilirubin (Direct) ,Serum Plain Method : DSA Method	0.16	mg/dl	0.00 - 0.30
Serum Bilirubin (Indirect) ,Serum Plain Method : Calculated Parameter	0.26	mg/dl	0.00 - 0.60
SGOT ,Serum Plain Method : IFCC/KINETIC	16.7	IU/l	Males : Upto 46 IU/l Females : Upto 40 IU/l
SGPT ,Serum Plain Method : IFCC/KINETIC	14.6	IU/l	Upto 49 IU/l
Serum Alkaline Phosphatase ,Serum Plain Method : DEA Method	61.0	IU/l	30.0 - 120.0
SerumTotal Protein ,Serum Plain Method : Biuret Method	7.16	gm/dl	6.00 - 8.50
Serum Albumin ,Serum Plain Method: BCG Method	4.03	gm/dl	3.20 - 5.50
Globulin ,Serum Plain Method : Calculated	3.10	gm/dl	2.00 - 4.10
A/G Ratio ,Serum Plain Method : Calculated	1.30		1.00 - 2.10
Serum GGTP ,Serum Plain Method: G-Glutamyl Transferase	22.0	U/L	0.0 - 50.0

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2000-1-100-1-			
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Age / Sex	32 Yrs Female	Sample Collected Date/Time	14/03/2023 12:23:33
Ref By / Hospital	Others BANK OF BARODA	Report Date/Time	14/03/2023 17:57:41
Collected At	DCKC	Printed Date/Time	14/03/2023 17:59:19

Test Name	Value	Unit	Biological Ref Interval
Blood Sugar (Fasting) ,Plasma F Method : GOD POD	93.8	mg/dl	70.0 - 110.0
Blood Sugar (PP) ,Plasma PP Method : GOD POD	102.9	mg/dl	70.0 - 140.0
Serum Creatinine ,Serum Plain Method: Mosified Jaffe's	0.67	mg/dl	0.50 - 1.50
Serum Uric Acid ,Serum Plain Method: Uricase- POD	4.40	mg/dl	2.40 - 5.70
Blood Urea Nitrogen ,Serum Plain Method : Calculated	7.62	mg/dl	0.00 - 20.00
BUN/CREATININE RATIO ,Serum Plain	11.37		

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Test Name Value Unit Biological Ref Interval

IMMUNOASSAY

TOTAL THYROID PROFILE

Total T3 ,Serum Plain	1.10	ng/mL	0.69 - 2.15
Total T4 ,Serum Plain	6.90	ug/dl	5.20 - 12.70
TSH	2.36	uIU/ml	0.30 - 4.50

Comment : Age Group	Biological Reference Rang	ge
1-2 Days	3.2-3.43 uIU/ml	
3-4 Days	0.7-15.4 uIU/ml	
15 Days - 5 Months	1.7-9.1 uIU/ml	
5 Months - 2 Years	0.7-6.4 uIU/ml	
2 Years - 12 Years	0.64-6.27 uIU/ml	

12 Years - 18 Years 0.51-4.94 ulU/ml > 18 Years 0.35-5.50 ulU/ml

Adults

Note: TSH levels are subject to circadian variation, rising several hoursbefore the onset of sleep,reaching peak levels between 11 pm to 6 am.Nadir concentrations are observed during the afternoon.Diurnal variation in TSH level approximates + 50 %, hence time of the dayhas influence on the measured serum TSH concentration Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.

Newborn

In a very low birth weight baby (particularly premature neonates) immaturity of the hypothalamic-pituitary - thyroid axis may mask primary congenital hypothyroidism. It is recommended that the test be repeated two weeks after birth in babies 1000-1500 gm and at four weeks in those <1000 gm. Specimen collection prior to 24 hours of age, after blood transfusion and prematurity can affect this.

Nearly 90% of CH cases are detected by newborn screening. A small number of children may test normal on the newborn screen but later develop hypothyroidism.

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Collected At



Printed Date/Time

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14/03/2023 17:59:19

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Ref By / Hospital	Others BANK OF BARODA	Report Date/Time	14/03/2023 15:56:08

Test Name Value Unit Biological Ref Interval

CLINICAL PATHOLOGY

URINE ROUTINE EXAMINATION

DCKC

URE PHYSICAL EXAMINATION

Colour ,URINE	Pale Yellow	/	Pale Yellow	
Volume ,URINE	15	mL		
Appearance ,URINE	Clear		Clear	
URE CHEMICAL EXAMINATION				
Reaction ,URINE	Acidic		Acidic	
Ph (Strip Method) ,URINE	6.0		5.0 - 8.0	
Specific Gravity ,URINE	1.020		1.001 - 1.035	
Protein (Strip Method) ,URINE	Nil		Not-Detected	
Glucose (Strip Method) ,URINE	Nil		Nil	
URE MICROSCOPY EXAMINATION				
Pus Cells ,URINE	1 - 2	/HPF	0 - 2	
Epithelial Cells ,URINE	2 - 3	/HPF	0 - 2	
RBC's ,URINE	NIL	/HPF	0 - 2	
Casts ,URINE	Nil			
Crystals ,URINE	Nil			
Bacteria ,URINE	Absent		Absent	
Mucus Thread ,URINE	Nil		Nil	
Other ,URINE	Nil			

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Registration No.	102222009	Mobile No.	8697542436
	3.6 3333474 334 475 4 33437944 447944437	D	1.4/0.2/2.02.2.00

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Test Name Value Unit Biological Ref Interval

STOOL ANALYSIS

STOOL MICROSCOPIC EXAMINATION

OTHERS ,STOOL SNR Nil

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Collected At DCKC Printed Date/Time 14/03/2023 17:59:19

Test Name Value Unit Biological Ref Interval

NIL

URE SUGAR (FASTING) ,URINE

URE SUGAR PP ,URINE NIL

*** End of Report ***

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8697

8697542436

LETTER OF APPROVAL / RECOMMENDATION

To.

The Coordinator, Mediwheel (Arcofemi Healthcare Limited) Helpline number: 011-41195959 32

priya elizabeth philips @ yakoo. com

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

	TO THE PROPERTY OF THE PARTY OF
PARTICULARS	EMBI OVE
NAME	EMPLOYEE DETAILS
EC NO.	MS. STATIN PRIYA ELIZABETH
DESIGNATION	92192
PLACE OF WORK	JOINT MANAGER
BIRTHDATE	NEW DELHI, SAKET
	20-04-1990
ROPOSED DATE OF HEALTH	14-03-2023
OOKING REFERENCE NO.	
STATE REIGE NO.	22M92192100048258E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from 13-03-2023 till 31-03-2023 The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a cashless facility as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager HRM Department Bank of Baroda

(Note: This is a computer generated lotter. No Signature required. For any clarification, please contact Mediwheel (Arcoferni Ficalthicare Limited)).



PAP

SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
CBC	CBC
ESR	The state of the s
Blood Group & RH Factor	ESR
Blood and Urine Sugar Fasting	Blood Group & RH Factor
Blood and Urine Sugar PP	Blood and Urine Sugar Fasting
Stool Routine	Blood and Urine Sugar PP
Lipid Profile	Stool Routine
Total Cholesterol	Lipid Profile
HDL	Total Cholesterol
LDL	MDL
VLDL	101
Triglycerides	YEDL
HDL / LDL ratio	Friglycerides
Liver Profile	HDL / LDL ratio
AST	Liver Profile
ALT	AST
GGT	ALT
Billirubin (total, direct, indirect)	ØGT
ALP	Bilirubin (total, direct, indirect)
	ALP
Proteins (T. Albumin, Globulin)	Proteins (T, Albumin, Globulin)
Kidney Profile	Kidney Profile
Serum creatinine	Serum creatinine
Blood Urea Nitrogen Uric Acid	Blood Urea Nitrogen
HBA1C	Uric Acid
	HBA1C
Routine urine analysis	Boutine urine analysis
USG Whole Abdomen	U8G Whole Abdomen
General Tests	General Tests
X Ray Chest	X Ray Chest
ECG	/ ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, T\$H)
PSA Male (above 40 years)	Mammography (above 40 years)
Thyroid Profile (T3, T4, TSH)	and Pap Smear (above 30 years).
Dental Check-up consultation	Dental Check-up consultation
Physician Consultation	Physician Consultation
Eye Check-up consultation	Eye Check-up consultation
Skin/ENT consultation	Skin/ENT consultation
- Situatori	Gynaec Consultation



Dr.Charu Kohli s Clinic

C-234 Defence Colony, New Delhi-110024 Ph 41550792 ,24336960, 24332759 E- mail: drcharukohli@yahoo.com

NAME

PRIYA ELIZABETH

AGE/SEX

32Y/F

DATE

14.03.2023

Height	41.		
g.i.e	Weight	BMI	
162 cm	59 kg		BP
	CMOVIII CMOVI	22.5	110/70 mmHg
ABITS	ALCOHAL: NO		
mily History:	DRUGS : NO		

Asthma

: NO

Diabetes

: PARENTS HAS DM

TR

: NO

THYROID

: MOTHER HAS THYROID

Heart Disease

: NO

BP

: MOTHER HAS BP

CANCER

: NO

Personal History:

TB : NO Rheumatic : NO Acquired deformity : NO

Operated for : Diskectomy since 2017

Psychosomatic history: NO Diabetes : NO THYROID : NO BP : NO SKIN ; NO

		CE VISION	NEAR	VISION		
Eye / RT EYE LT EYE		RT EYE	10000			
VISION	6/24	6/6		LT EYE	COLOUR VISION	GLASSES
			N/6	N/6	NORMAL	NO

hul

Signature of Medical Examiner: --

DR. CHARU KOHLI CONSULTANT MBBS DMC-8388



Dr.Charu Kohli s Clinic

C-234 Defence Colony, New Delhi-110024 Ph 41550792 ,24336960, 24332759 E- mail: <u>drcharukohli@yahoo.com</u>

NAME

: PRIYA ELIZABETH

AGE/SEX

: 32Y/F

DATE

: 14.03.2023

X - RAY CHEST PA VIEW:

Cardiac shadow is normal.

Aorta is normal.

Bilateral lung fields are clear.

Both costophrenic angles are clear.

Bilateral domes of diaphragm are normal.

No bony injury noted.

IMPRESSION: Normal chest skiagram.

He

DR. CHARU KOHLI MBBS, DMRD Consultant Radiologist

DR. CHARU KOHLI
CONSULTANT RADIOLOGIST
DMC - 8388
GREENCE COLCNY, NEW DELHI-110024

IMPORTANT: Owing to technical limitations in case of any error in the study, the Doctor cannot be held responsible for claim of damages of any nature and this report is not valid for any Medico-legal aspect.

TO COHOM IT MAY CONCERN

CHAC by my own fee voil. at CA D. Charu Kohi any sample for stool test or Pap smean test Thanking you, This is to inform that I have not given

Riya E. Jithin

ELMO, 92192

Bank of Baroda

(Through Mudiushiel)



C-234, Defence Colony, New Delhi - 110024 Phone: 011-41550792, 24332759, 24336960

E-mail: drcharukohli@yahoo.com Facebook.com/Dr.Charukohli

Name: JITHIN PRIYA ELIZABETH

Date: March 14, 2023

WHOLE ABDOMEN SCAN

Liver is normal in size and echotexture is maintained . Normal intrahepatic biliary radicles and normal appearing venous channels. No focal lesion in either lobes. Portal vein is normal. No sub-diaphragmatic collection or pleural effusion.

Gall bladder is normal distended and shows echofree lumen. CBD: not dilated; apparently echofree.

Both the kidneys are normal in size, position and echopattern with normal pelvicalyceal systems and

LK: 9.18 x 4.55 cm, and shows a calculus of 3.8 mm

RK: 9.38 x 4.46 cm

Pancreas is of normal size & echopattern. No focal lesion or peri-pancreatic collection.

Spleen is of normal size and echopattern. No focal lesion or calcification. Splenic vein is not dilated.

Aorta and IVC are normal. No retroperitoneal lymphadenopathy.

Urinary bladder shows normal distension and wall-thickness. No calculus or mass.

Uterus measures 7.67 x 4.26 cm in a.p. and transverse diameters and is 8.41cm in fundo-cervical length. Endometrial lining is regular and maintained and is 10.3 mm thick. Myometrial echoes are maintained with

Cervix is normal in length and mucosal pattern. Echopattern is homogenous.

Rt. Ovary measures 3.39 x 2.73 cm. Lt. ovary measures 1.93 x 1.46 cm.

No free fluid is seen in cul de sac.

IMPRESSION: Left renal calculus, otherwise sonological study is within normal limits.

DR CHARU KOHLI MBBS ,DMRD DMC 8388

DR. CHARU KOHLI CONSULTANT RADIOLOGIST DMC - 8388 DR. CHARU KOHLI'S CLINIC 0-234 DEFENCE COLONY, NEW DELHI-110024

IMPORTANT: Owing to technical limitations, in case of any error in the study, the Doctor cannot be held responsible for claim of damages of any nature, and this report is not valid for any Medicolegal aspect. Every modern technology has its own limitations, in case of discrepancy/difference in opinion advised-repeat scan/ second

At Your Home: Digital X-Ray, Blood Samples, ECG, PFT, HOLTER, EEG, ABG

Occupational Health Services

Diagnostic & Preventive Health Assessment

Periodic Preventive Health Camps

Corporate Health Checks Test marked with * are not in NABL Scope. / Tests marked with # are performed at outsourced laboratory.





SUPINE

ST @ 10mm/mV 80ms PostJ

RATE: 91 BPM B.P. : 110/70 mmHg

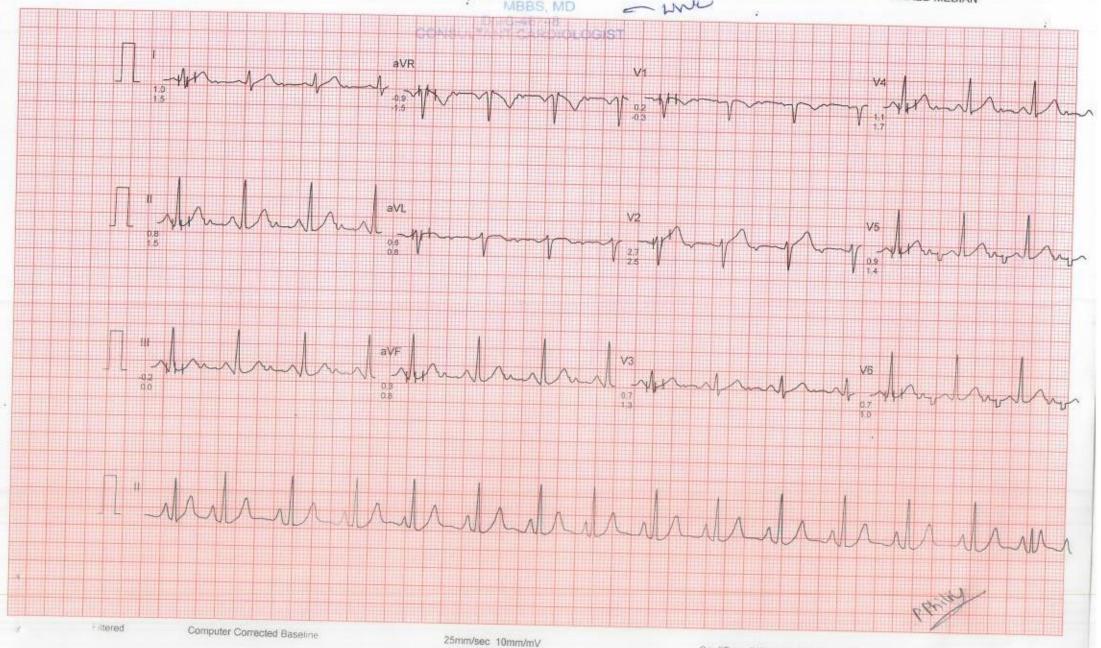
Ms. PRIYA ELIZABETH

RECORDED: 14-3-2023 11:36

I.D. : 177

AGE/SEX: 32/F

PRETEST



C-234, DEFENCE COLONY, NEW DELHI

Ms. PRIYA ELIZABETH

Age: 32/F

Recorded: 14-3-2023 11:36

Ref. by : Indication : ,.. ID: 177 Ht/Wt:/

TREADMILL TEST SUMMARY REPORT

Protocol: BRUCE History: Medication : ...

PHASE	PHASE	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100	ı	ST LEVEL (mm)	V5	MET:
SUPINE HYPERVENT VALSALVA STANDING	0:03	0:03			91 88 98 111	110/70 110/70 110/70 110/70	100 96 107 122	0.8 0.8 1.1 0.6	2.7 2.5 2.5 3.2	0.9 1.0 1.1	
STAGE 1 STAGE 2 STAGE 3 STAGE 4 STAGE 5	2:59 5:59 8:59 11:59 12:29	2.59 2.59 2.59 2.59 2.59 0.29	2.70 4.00 5.40 6.70 8.00	10.00 12.00 14.00 16.00 18.00	109 117 127 154 172	110/70 118/70 130/70 142/70 156/70	119 138 165 218 268	0.3 0.0 -0.2 0.0 0.4	3.2 2.9 3.0 3.9 4.1	0.9 0.9 0.5 0.4 0.8 1.2	4.80 7.10 10.00 14.00 14.97
ECOVERY ECOVERY	12:38 2:59 5:59	0:38 2:59 5:59	0.00	0.00	174 96 112	156/70 146/70 116/70	271 140 129	0.4 -0.1 0.6	4.2 2.2 2.7	1.2	15.27
RESULTS Exercise Duration Max Heart Rate Max Blood Press Max Work Load Reason of Term	sure	12:38 Minute 174 bpm 92 156/70 mmHg 15.27 METS	% of target heart			1,007.0	DR. D	R. RAJIV	2,7	0.8	
IMPRESSIONS	5					С	1046	CARDIOL	DEIST		

Cardiologist

SUPINE

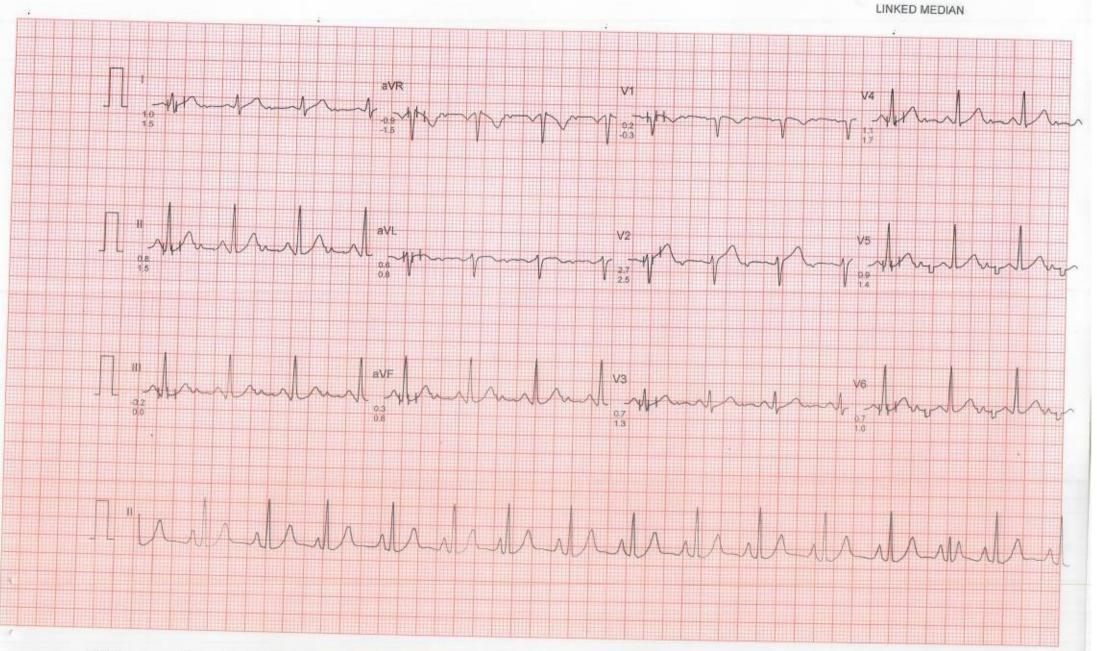
Ms. PRIYA ELIZABETH

I.D. : 177 AGE/SEX: 32/F

RECORDED: 14-3-2023 11:36

RATE: 91 BPM B.P. : 110/70 mmHg PRETEST

ST @ 10mm/mV 80ms PostJ



Ms. PRIYA ELIZABETH

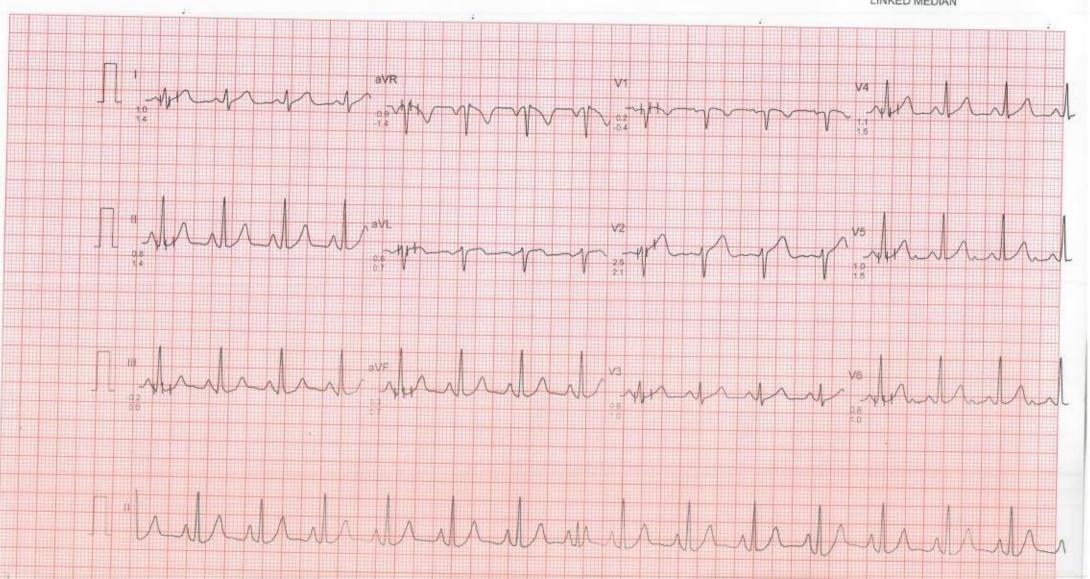
I.D. : 177 AGE/SEX : 32/F

RECORDED: 14- 3-2023 11:36

RATE: 88 BPM B.P.: 110/70 mmHg HYPERVENTILATION PRETEST

STAGE TIME: 0:03

ST @ 10mm/mV 80ms PostJ



VALSALVA PRETEST

DR. CHARU KOHLI

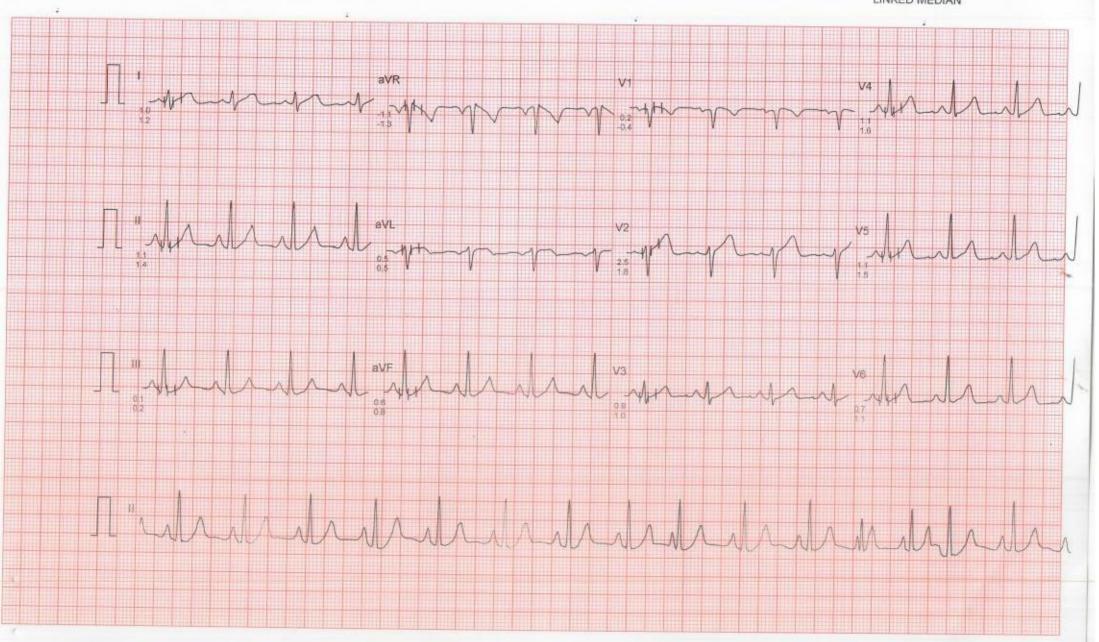
ST @ 10mm/mV 80ms PostJ

Ms. PRIYA ELIZABETH

I.D. : 177

AGE/SEX: 32/F RECORDED: 14-3-2023 11:36

RATE: 98 BPM B.P. : 110/70 mmHg



Ms. PRIYA ELIZABETH I.D. : 177

AGE/SEX: 32/F

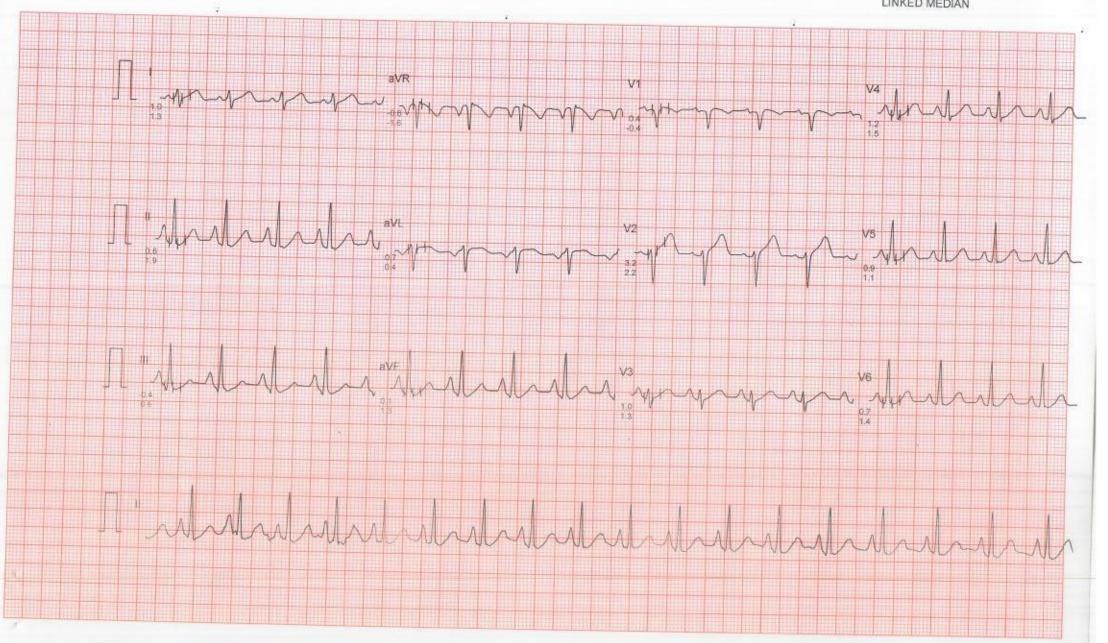
RECORDED: 14-3-2023 11:36

RATE : 111 BPM B.P. : 110/70 mmHg

STANDING PRETEST

ST @ 10mm/mV 80ms PostJ





Ms. PRIYA ELIZABETH

I.D. : 177 AGE/SEX: 32/F

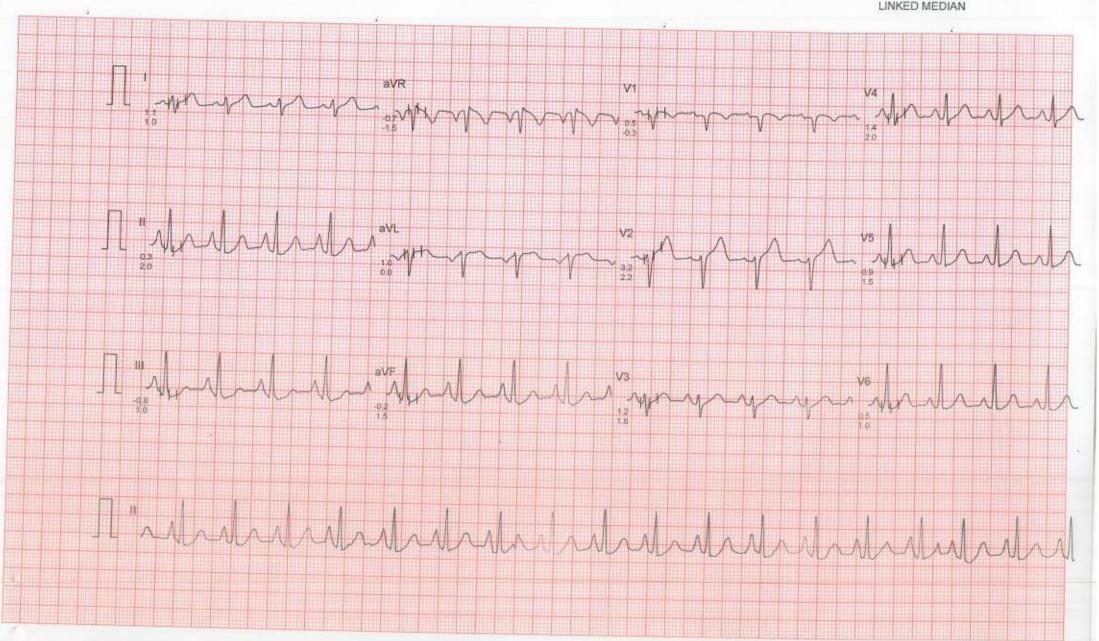
RECORDED: 14-3-2023 11:36

RATE: 109 BPM B.P. : 110/70 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 %



Ms. PRIYA ELIZABETH

I.D. : 177

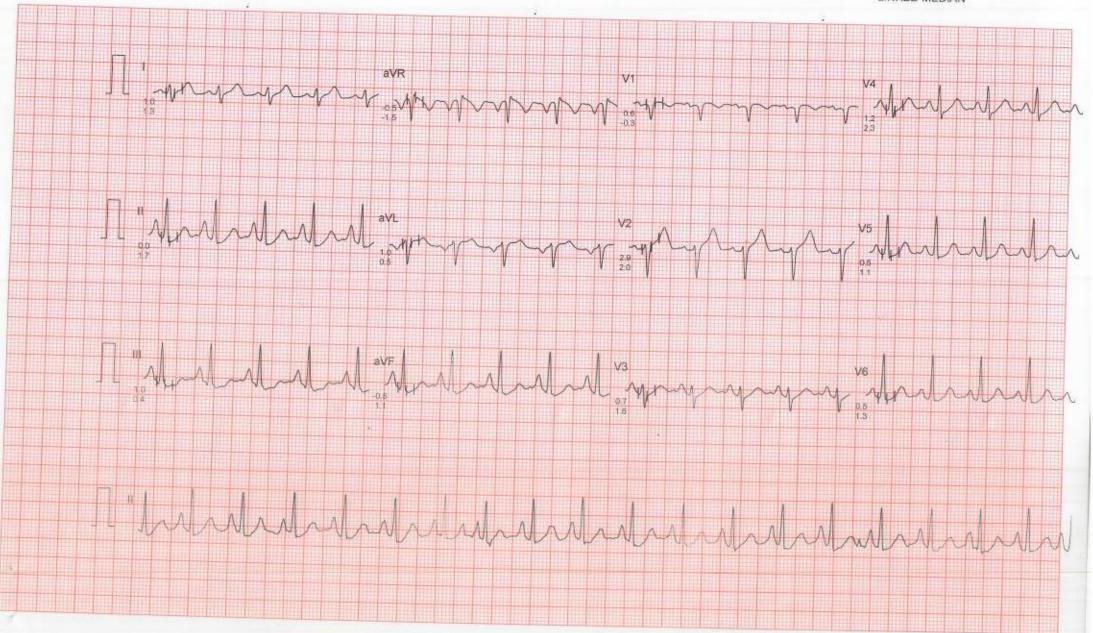
AGE/SEX : 32/F RECORDED : 14- 3-2023 11:36

RATE : 117 BPM B.P. : 118/70 mmHg BRUCE EXERCISE 2

PHASE TIME: 5:59 STAGE TIME: 2:59 80ms PostJ SPEED: 4.0 Km./Hr. GRADE: 12.0 %

LINKED MEDIAN

ST @ 10mm/mV



Ms. PRIYA ELIZABETH

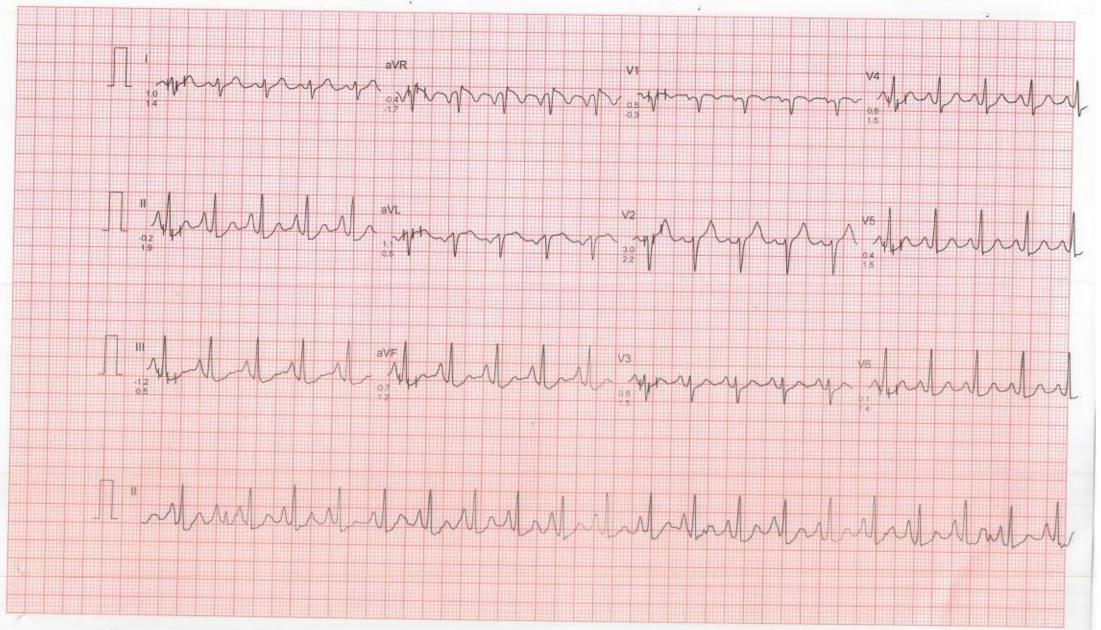
LD. : 177

AGE/SEX : 32/F RECORDED : 14- 3-2023 11:36

RATE: 127 BPM B.P.: 130/70 mmHg BRUCE EXERCISE 3 PHASE TIME: 8:59

STAGE TIME: 2:59

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



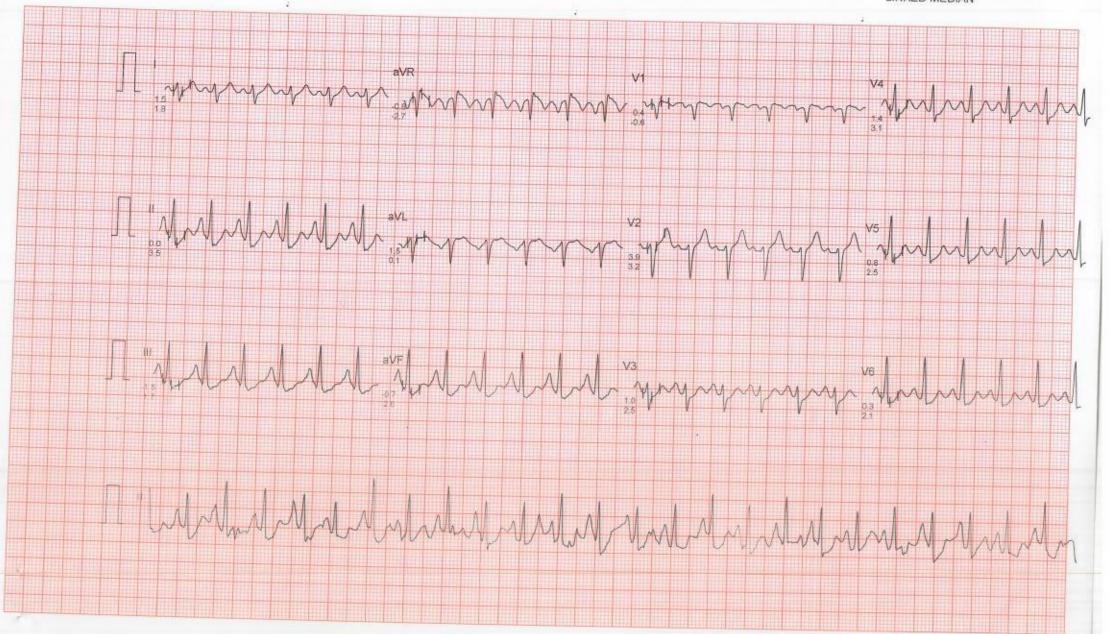
Ms. PRIYA ELIZABETH

AGE/SEX: 32/F

RECORDED: 14-3-2023 11:36

RATE: 154 BPM B.P.: 142/70 mmHg BRUCE EXERCISE 4 PHASE TIME: 11:59 STAGE TIME: 2:59

ST @ 10mm/mV 80ms PostJ SPEED: 6.7 Km./Hr. GRADE: 16.0 %

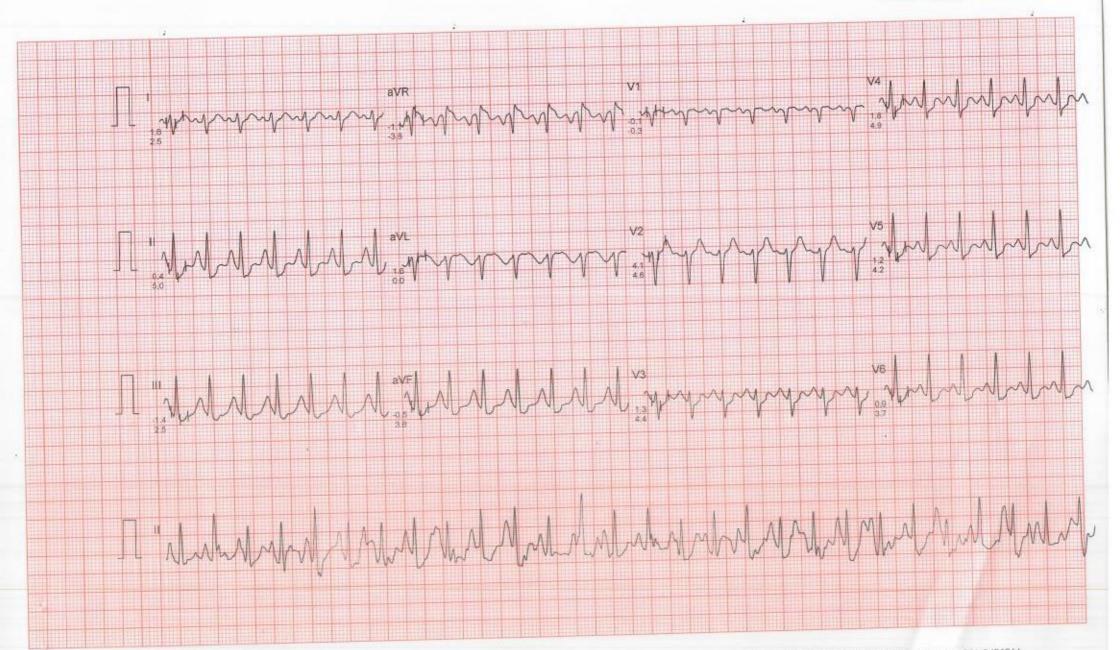


Ms. PRIYA ELIZABETH

I.D. : 177

AGE/SEX: 32/F RECORDED: 14-3-2023 11:36 RATE: 172 BPM B.P.: 156/70 mmHg BRUCE EXERCISE 5 PHASE TIME: 12:29

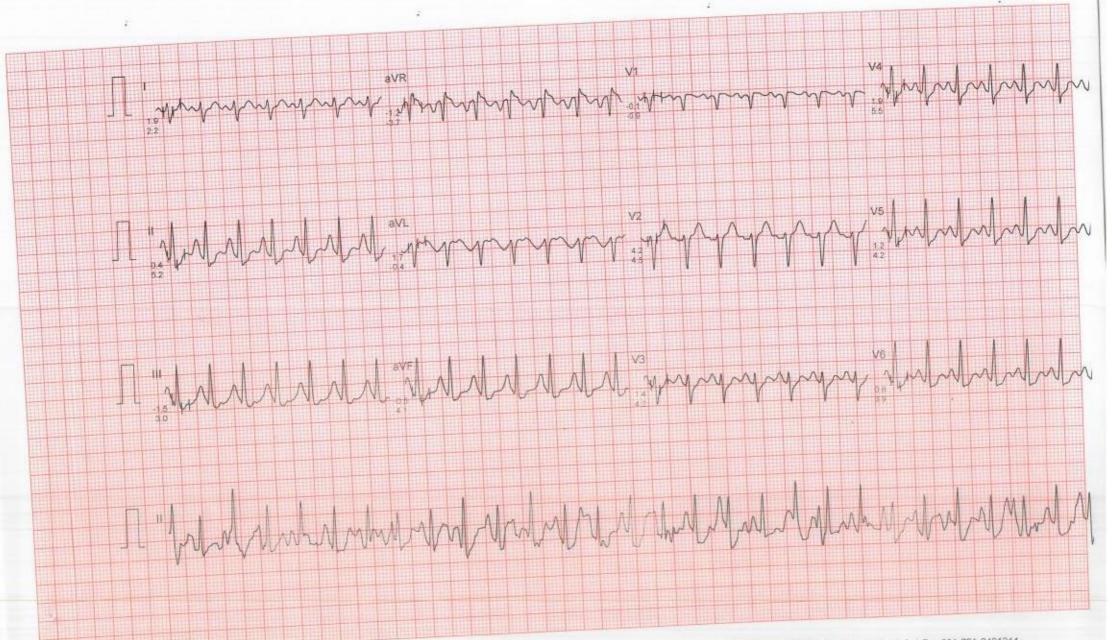
STAGE TIME: 12:29 STAGE TIME: 0:29 ST @ 10mm/mV 80ms PostJ SPEED: 8.0 Km./Hr. GRADE: 18.0 %



Ms. PRIYA ELIZABETH

I.D. : 177

AGE/SEX: 32/F RECORDED: 14-3-2023 11:36 RATE: 174 BPM B.P.: 156/70 mmHg BRUCE PEAK EXERCISE PHASE TIME: 12:38 STAGE TIME: 0:38 ST @ 10mm/mV 80ms PostJ SPEED: 8.0 Km./Hr. GRADE: 18.0 %



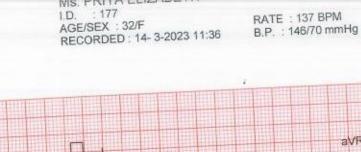
BRUCE RECOVERY

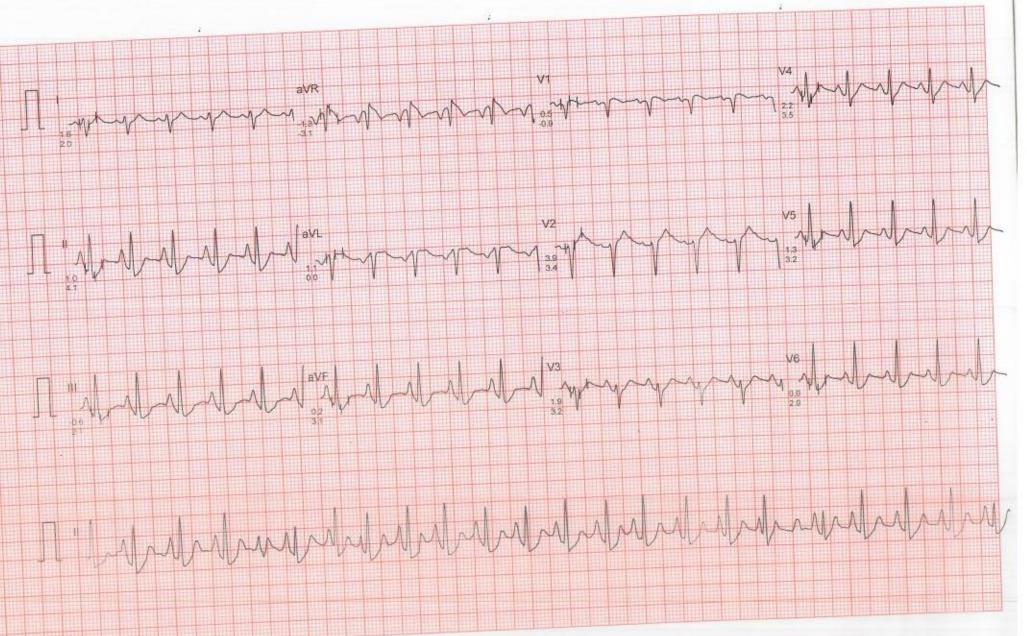
PHASE TIME: 0:59

ST @ 10mm/mV 80ms PostJ

SPEED: 0.0 Km./Hr. GRADE: 0.0 %







BRUCE RECOVERY PHASE TIME: 2:59

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

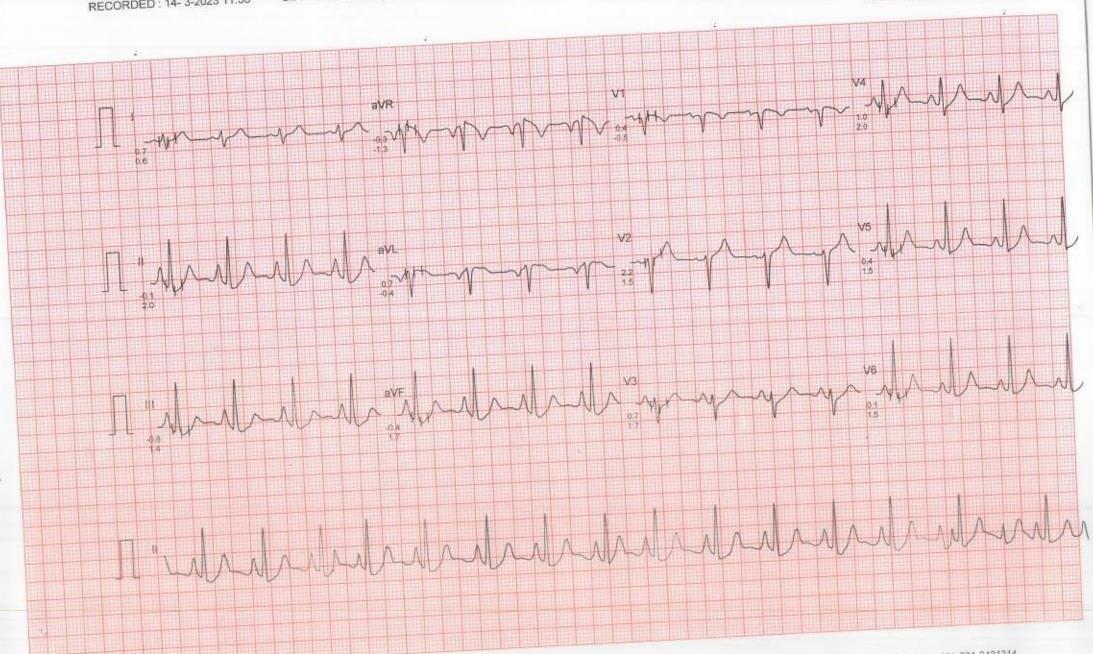
LINKED MEDIAN

Ms. PRIYA ELIZABETH

I.D. : 177 AGE/SEX : 32/F

RECORDED: 14-3-2023 11:36

RATE: 96 BPM B.P.: 146/70 mmHg



Ms. PRIYA ELIZABETH

I.D. : 177

AGE/SEX: 32/F RECORDED: 14-3-2023 11:36 RATE: 112 BPM B.P.: 116/70 mmHg BRUCE RECOVERY

PHASE TIME: 5:59

ST @ 10mm/mV 80ms PostJ

SPEED: 0.0 Km./Hr. GRADE: 0.0 %

