

Name Mr Ram Parvesh
 UHID : 7357724 Date : 11/03/23
 Age : 34 Gender : M
Nursing Assessment

Profile	
Height (cm) : <u>166cm</u>	Waist Circumference (cm) : <u>32 Inch</u>
Weight (Kg.) : <u>70 Kg</u>	Body Mass Index :
Occupation : <u>Grant Job</u>	Marital Status <input type="checkbox"/> Single <input checked="" type="checkbox"/> Married


Vital Signs	
Pulse Rate (/min) : <u>93b/m / SpO₂ 98%</u>	Respiratory Rate (/min) : <u>23b/m</u>
Blood Pressure (mmHg) : <u>110/80 mmHg</u>	Temperature (if febrile) : <u>Afebrile</u>

Past History	
<input checked="" type="checkbox"/> Hypertension :	<input checked="" type="checkbox"/> Diabetes :
<input checked="" type="checkbox"/> Heart disease :	<input checked="" type="checkbox"/> Dyslipidemia :
<input checked="" type="checkbox"/> Asthma :	<input checked="" type="checkbox"/> Tuberculosis :
<input checked="" type="checkbox"/> Allergies :	
<input checked="" type="checkbox"/> Others :	

For Women	
LMP:	Last Pap smear done in
Menopause <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Last Mammography done in
Consent for X-ray & Mammography	

Current Medications

Signature, Name and Emp. ID of the Nurse : _____

 **Fortis MEDCENTRE**

CHANDIGARH

(A unit of Fortis Hospital Mohali)

SCO 11, Sector 11-D, Chandigarh - 160011

Name Mr. Ram Parvesh

UHID : 7357724 Date : 11/03/23

Age : 34 Gender : M

Internal Medicine Consultation

Relevant History:

Diagnosis:

Examination Findings:

Advice / Treatment Plan:

Investigations:

Signature and stamp of the Consultant : _____

Name: Mr. Ravi Parvesh
 UHID: 7357724 Date: 11/03/23
 Age: 34 Gender: M

Ophthalmology Consultation

History: DM for eyes on Rx.

Examination findings:

Visual acuity $\left\{ \begin{array}{l} R \ 6/6 \\ L \ 6/6 \end{array} \right.$ Visual acuity with glasses $\left\{ \begin{array}{l} R \\ L \end{array} \right.$ Colour Vision $\left\{ \begin{array}{l} R \ \text{WNL} \\ L \ \text{WNL} \end{array} \right.$

Slit Lamp Examination

RE

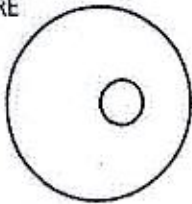


LE

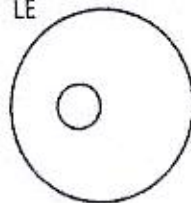


Fundus Examination

RE



LE



Diagnosis: NADBE

Treatment*

Spectacle prescription:

Right eye

	SPH	CYL	AXIS	VA
Distance	<u>Plano</u>	<u>/</u>	<u>/</u>	<u>6/6</u>
Near	<u>Plano</u>	<u>/</u>	<u>/</u>	<u>N/6</u>

Left eye

	SPH	CYL	AXIS	VA
Distance	<u>Plano</u>	<u>/</u>	<u>/</u>	<u>6/6</u>
Near	<u>Plano</u>	<u>/</u>	<u>/</u>	<u>N/6</u>

Signature and stamp of the Ophthalmologist: [Signature]

Ram parvesh
ID: 7357724

Male

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 78 ms
QT / QTcBaz : 348 / 421 ms
PR : 134 ms
P : 110 ms
RR / PP : 678 / 681 ms
P / QRS / T : 80 / 60 / 30 degrees

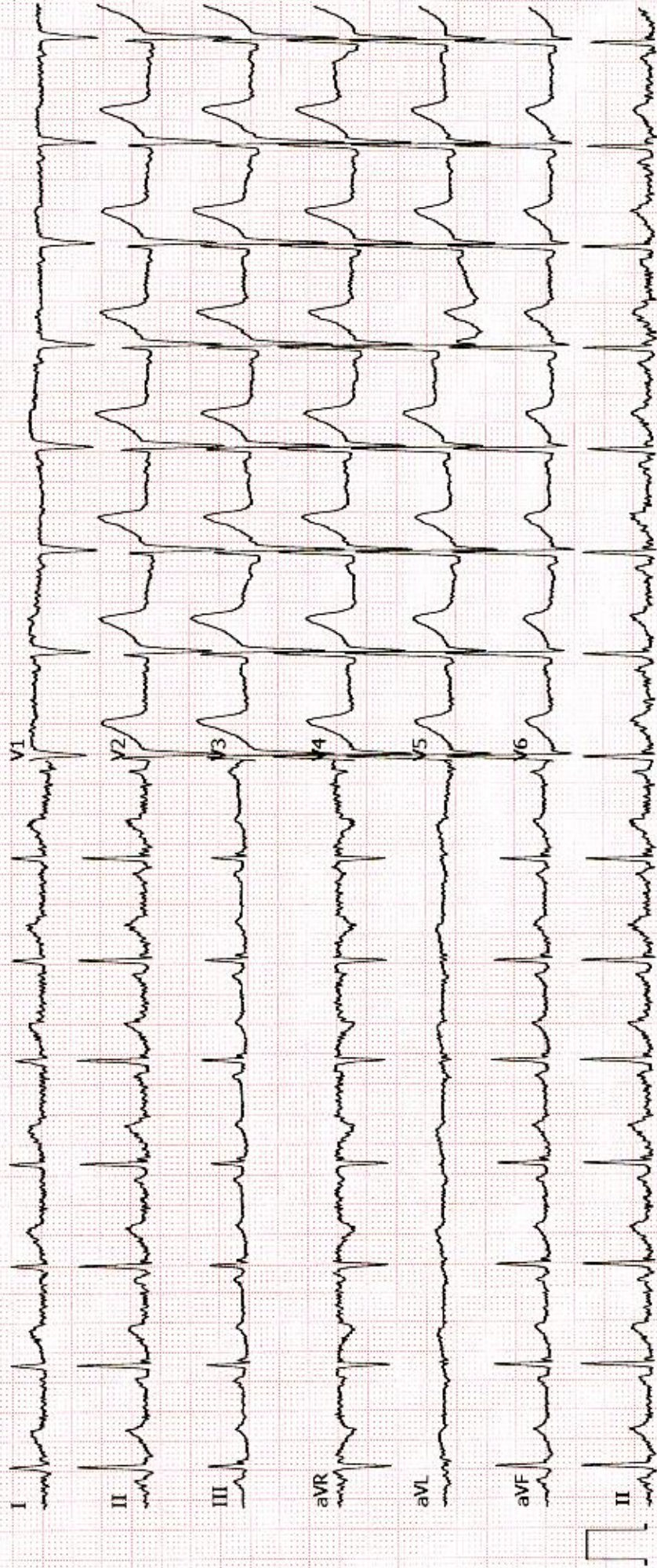
Normal sinus rhythm
Normal ECG

11.03.2023 9:59:00
Fortis Med Centre
sector 11
Chandigarh

Location:
Order Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:

Room:

88 bpm
-- / -- mmHg



DEPARTMENT OF FMC-RADIOLOGY LAB

Date: 13/Mar/2023

Name: Mr. Ram Parvesh

UHID | Episode No : 7357724 | 2630/23/10021

Age | Sex: 34 YEAR(S) | Male

Order No | Order Date: 10021/PN/OP/2303/6873 | 11-Mar-2023

Order Station : FRONTOFFICE-FMC

Admitted On | Reporting Date : 13-Mar-2023 11:25:12

Bed Name :

Order Doctor Name : Dr.SELF.

CHEST X-RAY (PA VIEW)

Both the domes of diaphragm are normal.

Both costophrenic angles are normal.

Both lung fields are clear.

Cardiac size and silhouette are normal.

Both hila and mediastinum are normal.

Bony cage and soft tissues are normal.

IMPRESSION: NORMAL STUDY.**Please correlate clinically and with other relevant investigations.**


DR NEHA CHHABRA

CONSULTANT RADIOLOGIST

SCO 11, Sector 11 D
Chandigarh

Station
Telephone:

EXERCISE STRESS TEST REPORT

Patient Name: RAM, PARVESH
Patient ID: 7357724
Height: 166 cm
Weight: 70 kg

DOB: 15.11.1988
Age: 34yrs
Gender: Male
Race: Indian

Study Date: 11.03.2023
Test Type: --
Protocol: BRUCE

Referring Physician: --
Attending Physician: --
Technician: --

Medications:

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Medical History:

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Reason for Exercise Test:

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Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:13	0.00	0.00	108	110/80	
	STANDING	01:00	0.00	0.00	104		
EXERCISE	STAGE 1	03:00	2.70	10.00	129	110/80	
	STAGE 2	03:00	4.00	12.00	150	120/80	
	STAGE 3	03:00	5.50	14.00	173	130/80	
	STAGE 4	00:59	6.80	16.00	187		
RECOVERY		02:20	0.00	1.60	139	130/90	

The patient exercised according to the BRUCE for 9:59 min:s, achieving a work level of Max. METS: 13.30. The resting heart rate of 106 bpm rose to a maximal heart rate of 187 bpm. This value represents 100 % of the maximal, age-predicted heart rate. The resting blood pressure of 110/80 mmHg, rose to a maximum blood pressure of 130/90 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.

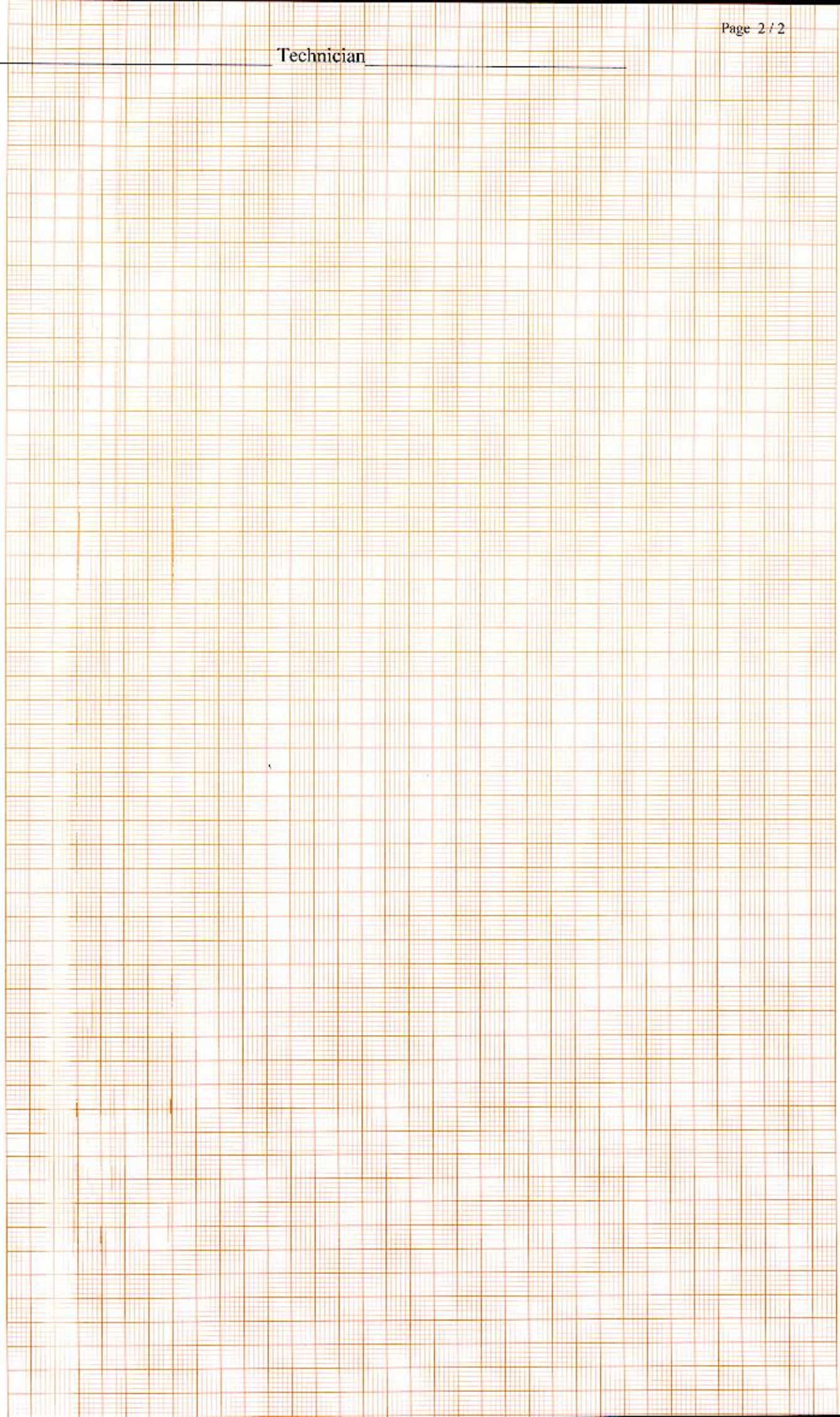
Overall impression: Normal stress test.

Conclusions

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Physician

Technician



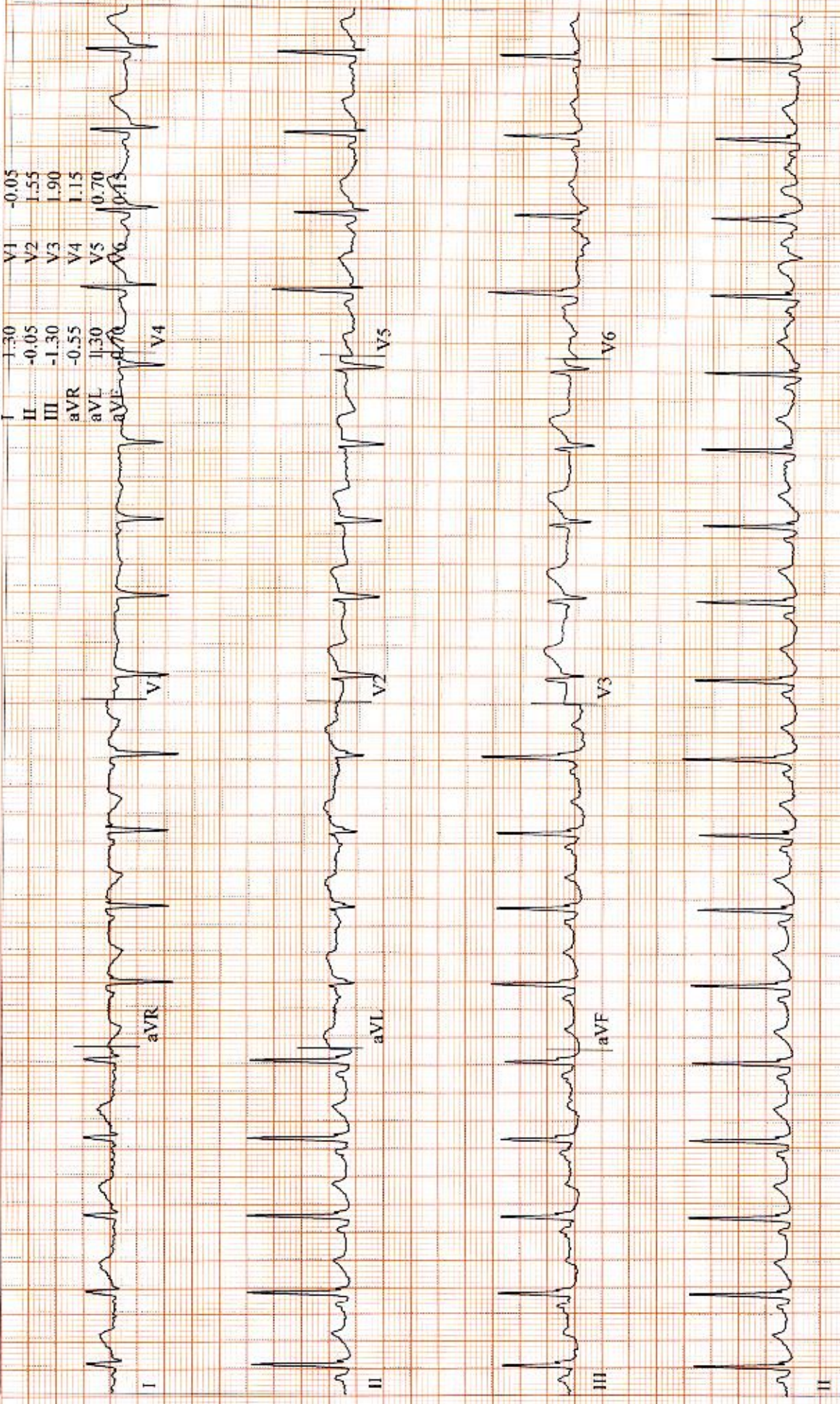
RAM, PARVESH
 Patient ID 7357724
 11.03.2023
 11:05:15am

12-Lead Report

109 bpm

Measured at 60ms Post J (10mm/mV)
 Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	1.30	V1	-0.05
II	-0.05	V2	1.55
III	-1.30	V3	1.90
aVR	-0.55	V4	1.15
aVL	1.30	V5	0.70
aVF	0.70	V6	0.15



RAM, PARVESH
Patient ID 7357724
11.03.2023
11:05:27am

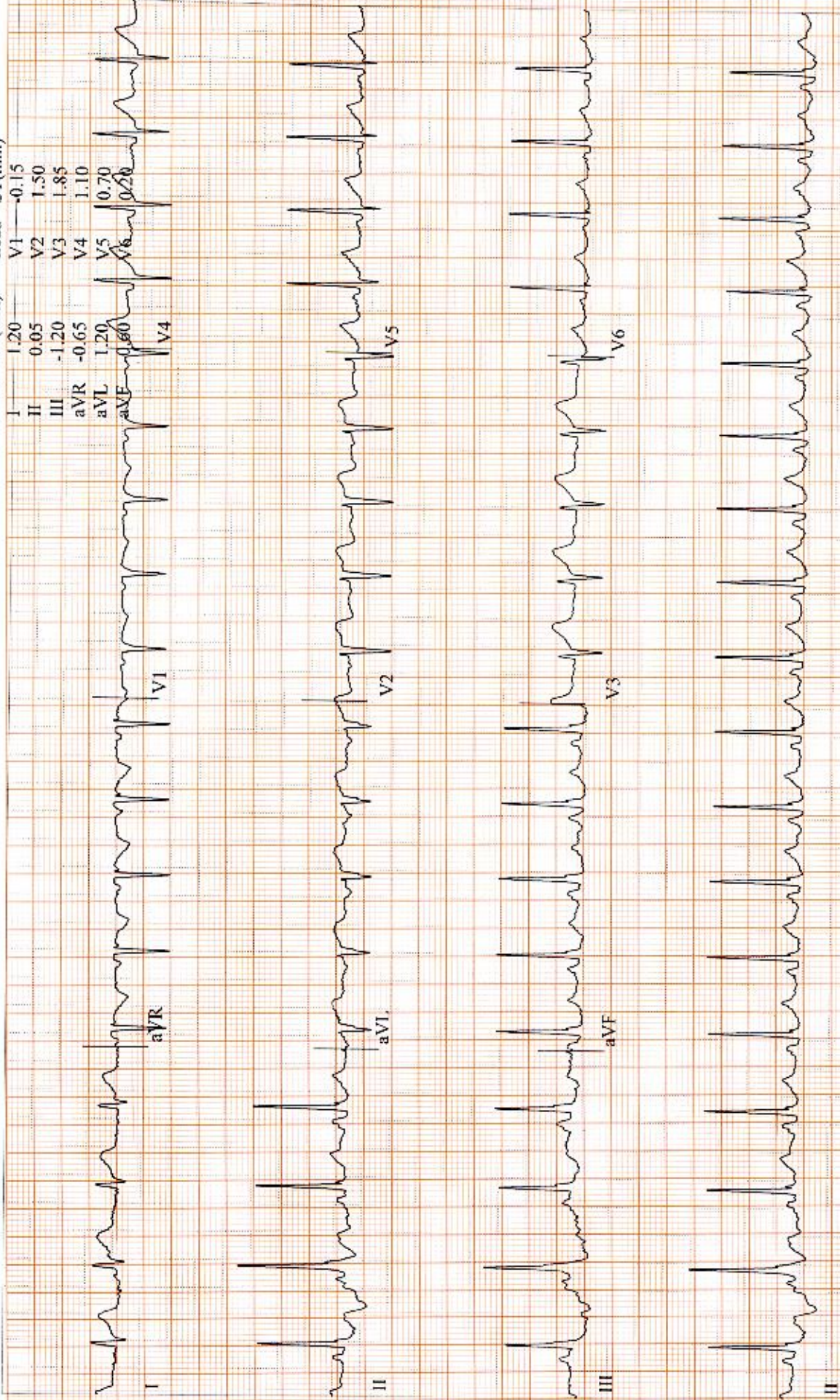
12-Lead Report
PRETEST
SUPINE
00:11

106 bpm
110/80 mmHg

BRUCE
0.0 km/h
0.0 %

Measured at 60ms Post J (10mm/mV)
Auto Points

Lead	ST(mm)	Lead	ST(mm)
I	1.20	V1	-0.15
II	0.05	V2	1.50
III	-1.20	V3	1.85
aVR	-0.65	V4	1.10
aVL	1.20	V5	0.70
aVF	0.60	V6	0.20



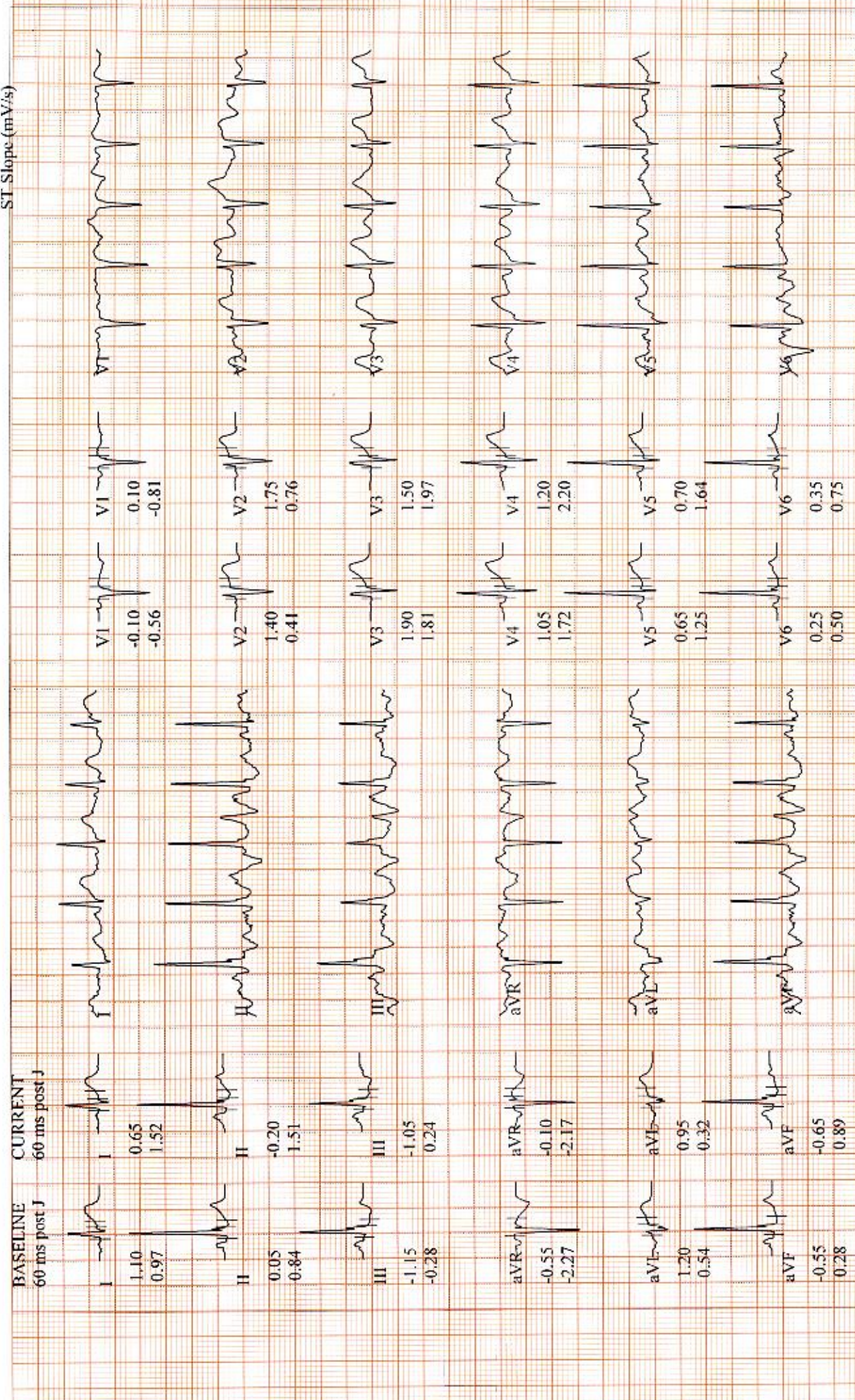
RAM, PARVESH
 Patient ID 7357724
 11.03.2023
 11:09:13am

130 bpm
 110/80 mmHg

Comparative Medians Report

EXERCISE STAGE 1
 02:50
BRUCE
 2.7 km/h
 10.0 %

Lead
 ST Level (mm)
 ST Slope (mV/s)



GE CardioSoft V6.73(2)
 25 mm/s 10 mm/mV 50Hz 0.01 -40Hz S+ HR(V5,II)

Start of Test: 11:05:10am

BRUCE
4.0 km/h
12.0 %

150 bpm
120/80 mmHg

Lead
ST Level (mm)
ST-Slope (mV/s)

BASELINE
60 ms post J

CURRENT
60 ms post J

I

II

III

aVR

aVL

aVF

V1

V2

V3

V4

V5

V6

V1

V2

V3

V4

V5

V6

V1

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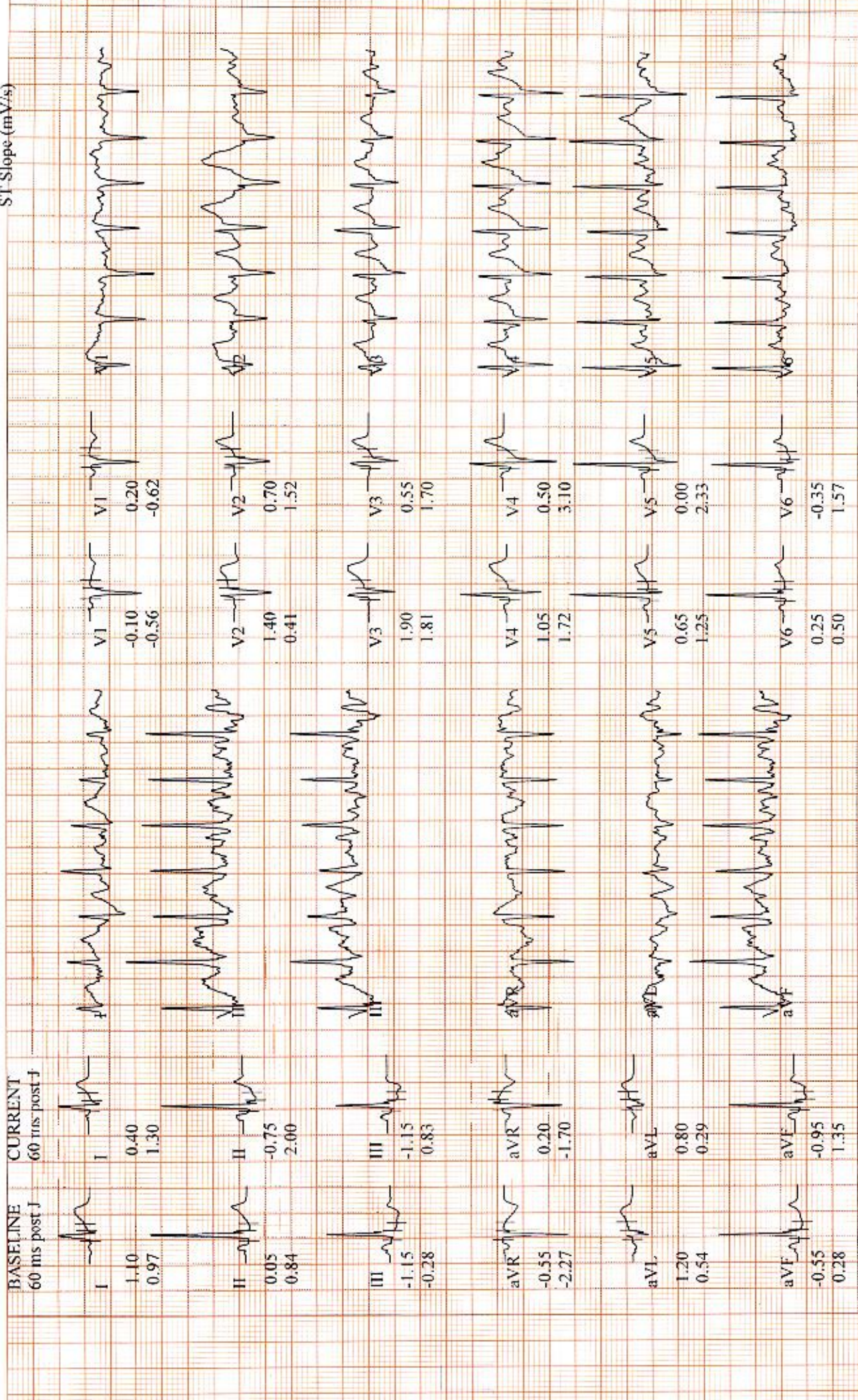
RAM, PARVESH
 Patient ID 7357724
 11.03.2023
 11:15:13am

Comparative Medians Report
 EXERCISE
 STAGE 3
 08:50

BRUCE
 5.5 km/h
 14.0 %

173 bpm
 130/80 mmHg

Lead
 ST Level (mm)
 ST Slope (mV/s)



GE CardioSoft V6.73 (2)
 25 mm/s 10 mm/mV 50Hz 0.01 - 40Hz S+ HR(II, V5)

Start of Test: 11:05:10am

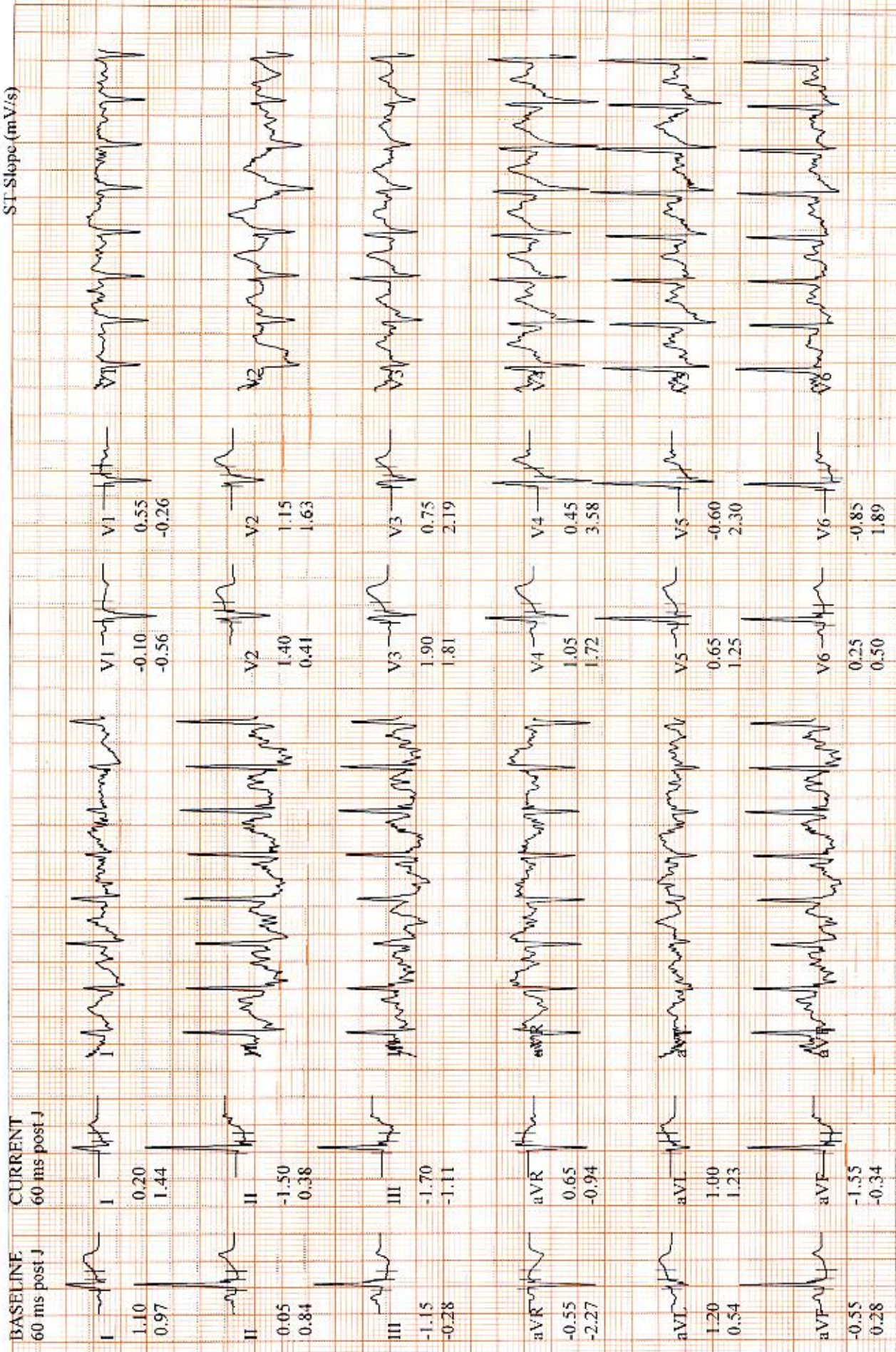
Comparative Medians Report (PEAK EXERCISE)

RAM, PARVESH
 Patient ID 7357724
 11.03.2023
 11:16:22am

187 bpm

EXERCISE STAGE 4
 09:59
 BRUCE
 6.8 km/h
 16.0 %

Lead
 ST Level (mm)
 ST-Slope (mV/s)



GE CardioSoft V6.73 (2)
 25 mm/s 10 mm/mV 50Hz 0 01 - 40Hz S+ HR(II,V5)

Start of Test: 11:05:10am

RAM, PARVESH
 Patient ID 7357724
 11.03.2023
 11:17:12am

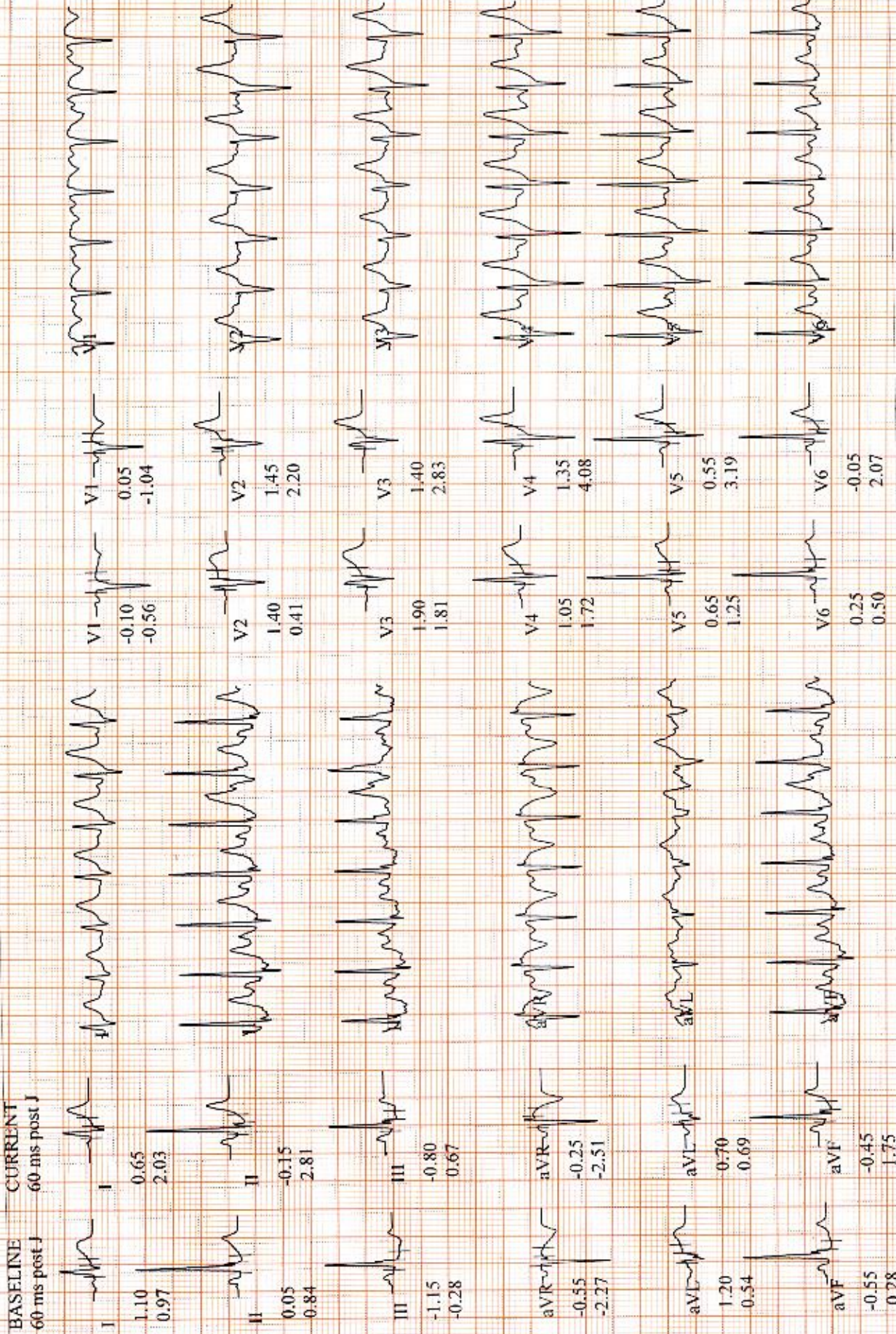
Comparative Medians Report

BRUCE
 2.4 km/h
 1.8 %

RECOVERY
 #1
 00:50

166 bpm

Lead
 ST Level (mm)
 ST-Slope (mV/s)



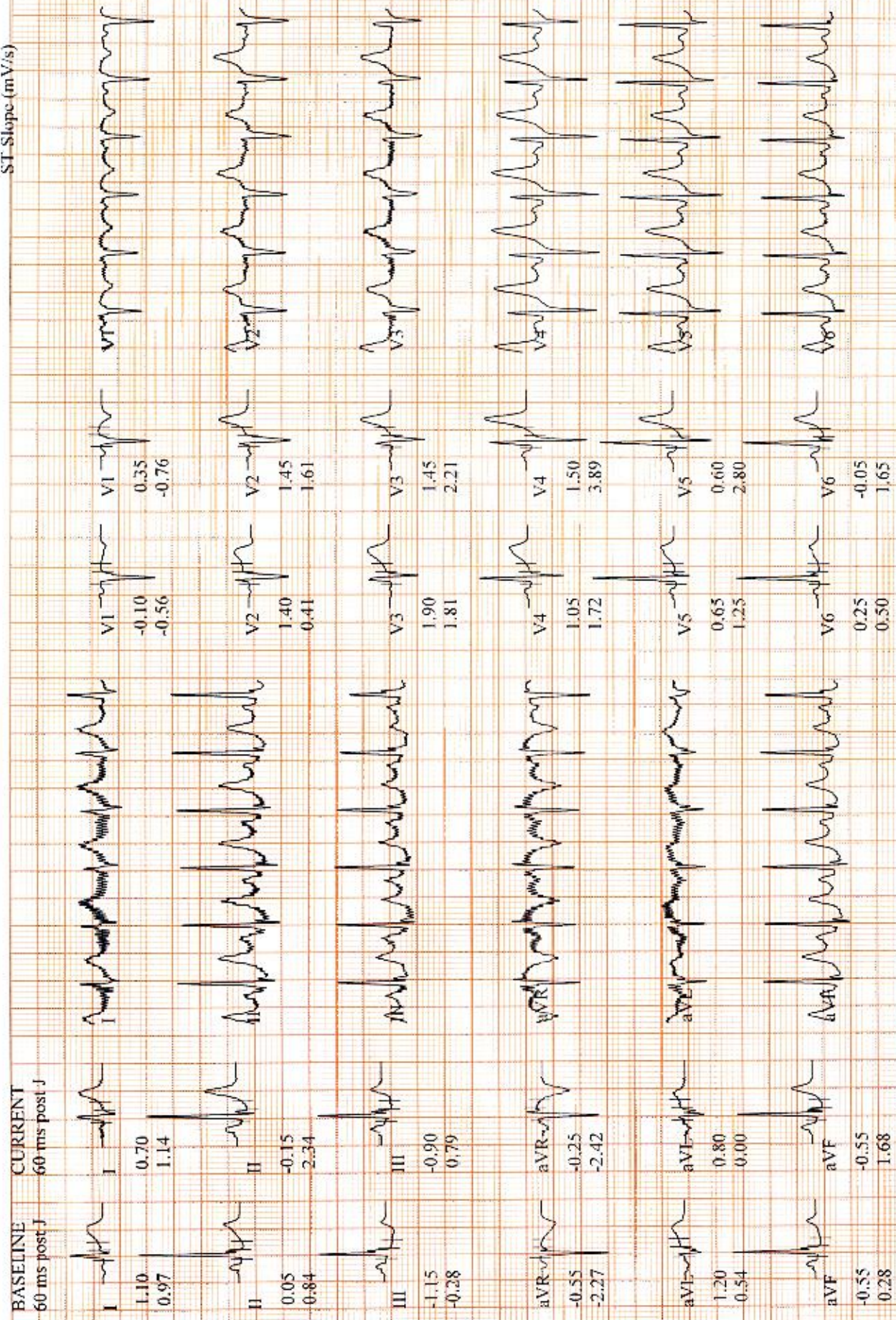
RAM, PARVESH
 Patient ID 7357724
 11.03.2023
 11:18:12am

142 bpm

Comparative Medians Report
 RECOVERY
 #1
 01:50

BRUCE
 0.0 km/h
 1.8 %

Lead
 ST Level (mm)
 ST Slope (mV/s)



GE CardioSoft V6.73 (2)
 25 mm/s 10 mm/mV 50Hz 0.01 - 401Hz S+ HR(II,V5)

Start of Test: 11:05:10am

L

14cm

Acti-Dial 11.545.423
4557, Temes 36 22 Av.
E-0110062, 594

MSU-CPAP-EH-KW-EP-11052014-15-F835251
DOB: 11/28/1974

827

TEST REQUEST FORM



TRF ID : 0080WC003732

TRF Date : 11/03/2023

PATIENT INFORMATION	
Name :	Mr. PARVESH RAM
Address :
Phone No :	9815806554
Email :	
Date Of Birth :	11/03/1989
Age / Sex :	34 / Male
Height / Weight :	/

BILL TO	
Client Code :	C000138383
Client Name :	ACROFEMI HEALTHCARE LTD (MEDIWHEEL)
Address :	NEW DELHI
Phone No. :	8800465156
Email :	

ESSENTIAL CLINICAL INFORMATION	
Provisional Diagnosis :	
H / o Medication :	Yes / No
If Yes, Name :	
Status of Medication :	Ongoing / Terminated
If Ongoing, Duration :	
If Terminated, When :	
LMP (Where Applicable) :	
Fasting Period :	
24 Hour Urine Volume :	
For Histopathology / IHC, Attach Detailed History	
Attach Other Relevant Information :	

REFERRING DOCTOR	
Doctor Name :	SELF
Phone No :	
City :	
Email :	

SPECIMEN INFORMATION	
Patient Id / Hospital Id :	
SRL Id :	PARVM11038980A
Date Drawn :	
Time Drawn(HRS) :	
Specimen Collected at :	

TEMP SENT	TEMP RECD.
<input type="checkbox"/> Frozen(< - 10 Celcius)	<input type="checkbox"/> Frozen(< - 10 Celcius)
<input type="checkbox"/> Cold(2 - 8 Celcius)	<input type="checkbox"/> Cold(2 - 8 Celcius)
<input type="checkbox"/> Ambient	<input type="checkbox"/> Ambient

Rcvd In :SRL CHANDIGARH	
Date :	
Time :	

FOR REPEAT/FOLLOW-UP PATIENTS	
Old Accession No. :	
SRL Care Code No. :	

Product Details

HM:235G	MEDI WHEEL FULL BODY HEALTH CHECK UP BELOW 40 MALE
---------	--

Specimen Details

SERUM	
SMEAR	
STOOL	
URINE	
OTHERS (FX)	
EDTA WHOLE BLOOD	
FASTING PLASMA FL.	

Please Note: After completion of the ordered tests, the remaining sample may be stored and used for research in medical sciences.

I agree

I don't agree

Signature / Thumb impression of patient
Date :

Signature of Requisitioner
Date :

Important : It is mandatory to provide all the requested information to enable accurate and timely reporting.