

LETTER OF APPROVAL / RECOMMENDATION

To,

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

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.

PARTICULARS	EMPLOYEE DETAILS
NAME	MS. DUGGARAJU ANUSHA
EC NO.	168508
DESIGNATION	JOINT MANAGER
PLACE OF WORK	HYDERABAD,AMEERPET
BIRTHDATE	27-04-1987
PROPOSED DATE OF HEALTH CHECKUP	26-03-2023
BOOKING REFERENCE NO.	22M168508100052690E

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 24-03-2023 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 letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))

SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
Lipid Profile	Lipid Profile
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
Liver Profile	Liver Profile
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
Kidney Profile	Kidney Profile
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG 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, TSH)
PSA Male (above 40 years)	Mammography (above 40 years) and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	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	Gynaec Consultation



భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ

భారత ప్రభుత్వం
Unique Identification Authority of India
Government of India

నమోదు సంఖ్య / Enrollment No.: 0619/41410/01380

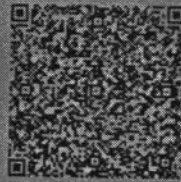
To
దుగ్గరాజు అనుషా
Duggaraju Anusha
W/O Susheel Kumar R S
8-3-231/B/172 SRI KRISHNA NAGAR
Khairatabad
Yousufguda
Khairatabad Hyderabad
Telangana 500045
9505957090

28/07/2011

124731705



ME247317057FH



మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

4310 1899 5471

నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం
Government of India

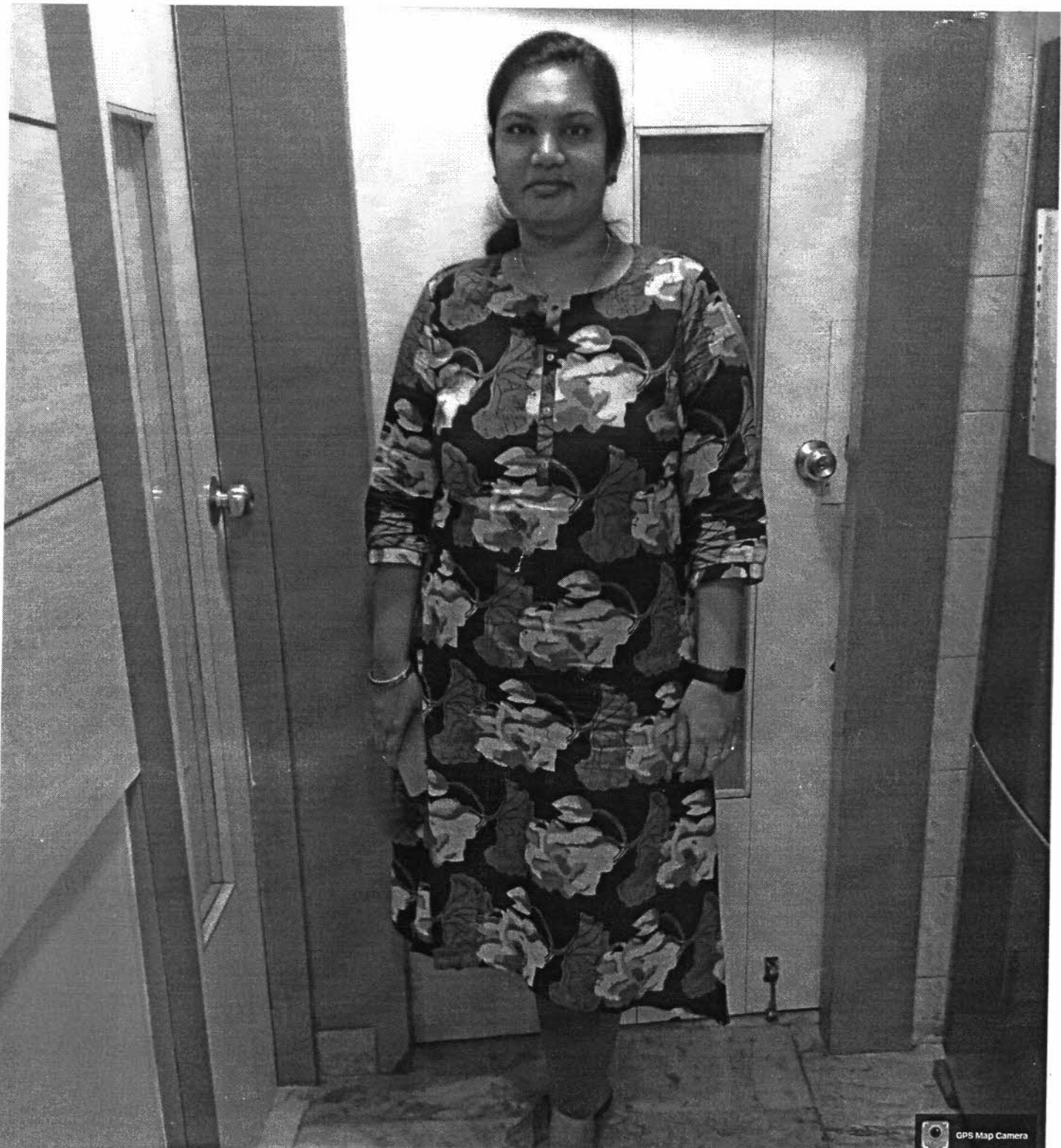


దుగ్గరాజు అనుషా
Duggaraju Anusha
పుట్టిన తేదీ / DOB : 27/04/1987
స్త్రీ / Female



4310 1899 5471

నా ఆధార్, నా గుర్తింపు



GPS Map Camera



Hyderabad, Telangana, India
LIG-384, K P H B Phase 1, Kukatpally, Hyderabad, Telangana
500072, India
Lat 17.492776°
Long 78.398069°
26/03/23 09:44 AM GMT +05:30



Name : MRS. DUGGARAJU ANUSHA
Age /Sex : 35 Y / F
Ref. By : BANK OF BARODA (MW)

Reg. No : O23-3721
Registration Date : 26-03-2023
Alt ID :

X-RAY CHEST PA VIEW

- Hilar regions are normal.
- Both C P angles are free.
- Domes of diaphragms are normal.
- Bony cage is normal
- Cardio thoracic ratio is normal.
- Lung - clear. No Evidence of any Signs of active Tuberculosis

IMPRESSION :

**** NORMAL STUDY**

Dr Ravi Krishna
Consultant Radiologist



Name : MRS. DUGGARAJU ANUSHA
Age /Sex : 35 Y / F
Ref. By : BANK OF BARODA (MW)

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Investigation

Result

Normal Ranges

HAEMOGRAM

Investigation

Result

Normal Range

Haemoglobin	10.9 gm%	Male : 14.0 - 18.0 gm % Female : 11.5 - 16.0 gm % Children : 12 - 14 gm %
R B C mil/cmm	4.0 mil/cmm	Male : 4.5 - 6.5 mil/cmm Female : 4.0 - 5.5 mil/cmm
Packed Cell volume (PCV)	39 %	Male : 40 - 54 % Female : 36 - 49 %
MCV	90 Cubic microns	76 - 96 Cubic microns
MCH	30 Picograms	27- 32 Picograms
MCHC	32 gm%	30 - 36 gm%
WBC (Total)	8,600 cells/cmm	4,000 - 11,000 cells/cmm

DIFFERENTIAL COUNT

Neutrophils (Polymorphs)	66 %	Adults : 40 - 75 % Children : 36- 50 %
Lymphocytes	30 %	Adults : 20 - 40 % Children : 36- 50 %
Eosinophils	02 %	1 - 6 %
Monocytes	02 %	2 - 10 %
Basophils	00 %	00 - 01 %
Platelet count	2,10,000 cells/cmm	1,50,000 - 4,00,000 cells/cmm
ESR 1st Hour	08 mm/hour	Male : 0 - 10 mm / hour Female : 0 - 14 mm / hour
Reticulocyte count	0.5 %	0.5 - 1.0 %

PERIPHERAL SMEAR EXAMINATION

RBC's Morphology	Normocytic / Mild Hypochromic
WBC	With in normal limits
Plateletes	Adequate
Abnormal Cells	* Nil

Method : Automated Cellcounter&Microscopy

Dr Rajani Gutha, PhD
Chief Biochemist

* End of Report *

Verified by

Dr S Ramadevi, MD
Consultant Pathologist



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Investigation

Result

Normal Ranges

Investigation

Result

Blood Group

"O"

Rh Typing (Anti-D)

POSITIVE

Dr Rajani Gutha, PhD
Chief Biochemist

*** End of Report ***

Verified by

Dr S Ramadevi, MD
Consultant Pathologist



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Investigation

Result

Reference Range

Fasting Plasma Glucose *
Blood Sugar
Method GOD-POD

86 mg/dl

70 - 110 mg/dl

Post Prandial Glucose *
(Blood Sugar)
Method GOD-POD

94 mg/dl

70 - 160 mg/dl

* End of Report *

Dr Rajini G, PhD
Chief Biochemist

Verified by

Dr S Ramadevi MD
Consultant Pathologist



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Investigation

Result

Reference Range

Lipid Profile

Total Cholesterol * Method CHOD-POD	209 mg/dL	Normal : < 200 mg/dL Borderline High : 200 - 239 mg/dL High : > 240 mg/dL
Serum Triglycerides * Method GPO - POD	157 mg/dL	Normal : < 150 mg/dL Borderline High : 150 - 199 mg/dL High : 200 - 499 mg/dL Very High : =/> 500 mg/dL
H D L Cholesterol * Method Direct CHOD-PAD	35 mg/dL	Low : < 40 High : > 60
L D L Cholesterol * Method Calculated	142.6 mg/dL	Optimal : < 100 Borderline High : 130 - 159 High : 160 - 189 Very High : =/> 190
V L D L Cholesterol * Method Calculated	31.4 mg/dL	10 - 30 mg/dL
TC / HDL Cholesterol Ratio * Method Calculated	5.97 Ratio	3.0 - 5.0 Ratio
LDL / HDL Ratio * Method Calculated	4.07 Ratio	1.5 - 3.5 Ratio

* End of Report *

Dr Rajini G, PhD
Chief Biochemist

Verified by

Dr S Ramadevi MD
Consultant Pathologist



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Investigation

Result

Normal Ranges

Liver Function Tests

Total Bilirubin * <i>Method: Diazo</i>	0.50 mg/dL	0.3 - 1.2 mg/dL
Direct Bilirubin (Conjugated) * <i>Method: Diazo</i>	0.18 mg/dL	0.0 - 0.2 mg/dL
Indirect Bilirubin (Unconjugated) *	0.22 mg/dL	
Alkaline Phosphatase * <i>Method: AMP Optimised IFCC Kinetic</i>	75 U/L	Male : 53 - 128 U/L Female : 42 - 98 U/L Children : 54 - 369 U/L
ALT (SGPT) * <i>Method: IFCC Without PDP</i>	21 IU/L	UP TO 55 IU/L
AST (SGOT) * <i>Method: IFCC Without PDP</i>	19 IU/L	UP TO 55 IU/L
Total Proteins * <i>(Method: Biuret)</i>	7.1 gm/dL	6.0 - 8.3 gm/dL
Albumin * <i>(Method: BCG)</i>	4.0 gm/dL	3.5 - 5.2 gm/dL
Globulin * <i>(Method: Calculated)</i>	3.1 gm/dL	
A/G Ratio * <i>(Method: Calculated)</i>	1.2	

Dr Rajani Gutha, PhD
Chief Biochemist



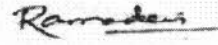
* End of Report *
Verified by

Dr S Ramadevi, MD
Consultant Pathologist



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Age /Sex : 35 Y / F
Ref. By : BANK OF BARODA (MW)

Reg. No : 023-3721
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Investigation	Result	Reference Range
Serum Creatinine * Method Enzymatic	0.8 mg/dl	Male : 0.7 - 1.3 mg/dl Female : 0.6 - 1.1 mg/dl New Born 1 - 4 days : 0.3 - 1.0 mg/dl Infant (upto 1year) : 0.2 - 0.4 mg/dl Children : 0.3 - 0.7 mg/dl
Blood Urea * Method GLDH	24 mg/dl	10 - 50 mg/dl
Blood Urea Nitrogen * Calculated	11.2 mg/dl	6 - 25.5 mg/dl
Serum Uric Acid * Method:Uricase POD	4.0 mg/dl	Male : 3.5 - 7.2 mg/dl Female : 2.6 - 6.0 mg/dl
* End of Report *		
 Dr Rajini G, PhD Chief Biochemist	 Verified by	 Dr S Ramadevi MD Consultant Pathologist



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Investigation	Result	Reference Range
% HbA1c (Glycosylated Haemoglobin) <i>(Method: HPLC-NGSP Certified)</i>	5.1 %	< 6.0 : Pre Diabetic 6-7 : Good Control 7-8 : Weak Control > 8.0 : Poor Control

Intrepretation :

HbA1c is an indicator of glycemic control. HbA1c represents average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but within this 120 days. Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four.

Mean Plasma Glucose mg/dl = (HbA1c x 35.6) - 77.3)

Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only .81 (1.0 would be a straight line, which has "perfect" correlation...) This means that to predict or estimate average glucose from Hb-A1c or vice-versa is not "perfect" but gives a good working ballpark estimate. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime glucose levels, which are easier to predict and control.

* End of Report *

Dr Rajini G, PhD
Chief Biochemist

6
Verified by

Dr S Ramadevi MD
Consultant Pathologist



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Investigation

Result

Normal Ranges

Trilodothyronine Total (TT3)	103 ng/mL	60-200 ng/mL
Thyroxine - Total (TT4)	10.3 mg/dL	4.5-12 mg/dL
Thyroid Stimulating Hormone(TSH) <i>Method: C.L.I.A</i>	2.00 μ IU/ml	0.3-5.5 μ IU/ml

Interpretation

Primary malfunction of the thyroid gland may result in excessive (hyper) or below normal (hypo) release of T3 or T4. In addition, as thyroid function is directly affected by TSH. Diagnostically, T3 concentration is more sensitive to certain thyroid conditions than T4. While T4 levels are a sensitive (and superior) indicator of hypothyroidism, T3 blood levels better define hyperthyroidism. Because T3 concentration in serum changes faster and more markedly than T4, the T3 level is also an excellent indicator of the ability of the thyroid to respond to both stimulatory and suppressive tests. Under conditions of strong thyroid stimulation, the T3 level offers a good.

It is especially useful in the differential diagnosis of 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.

Dr Rajani Gutha, PhD
Chief Biochemist

*** End of Report ***

Verified by

Dr S Ramadevi, MD
Consultant Pathologist



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 Age /Sex : 35 Y / F
 Ref. By : BANK OF BARODA (MW)

Reg. No : O23-3721
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 Alt ID :

Investigation

Result

Complete Urine Examination

Investigation

Result

PHYSICAL EXAMINATION

Colour : Pale Yellow
 Apperance : Clear
 Reaction : Acidic
 Specific Gravity : 1.025

CHEMICAL EXAMINATION

Albumin : Nil
 Glucose : Nil

MICROSCOPIC EXAMINATION

Pus Cells : 1 - 2 /HPF
 Epithelial Cells : 2 - 3 /HPF
 RBC : Nil /HPF
 Crystals : Nil
 Casts : Nil
 Bacteria : Nil
 Others : Nil

** End of report **

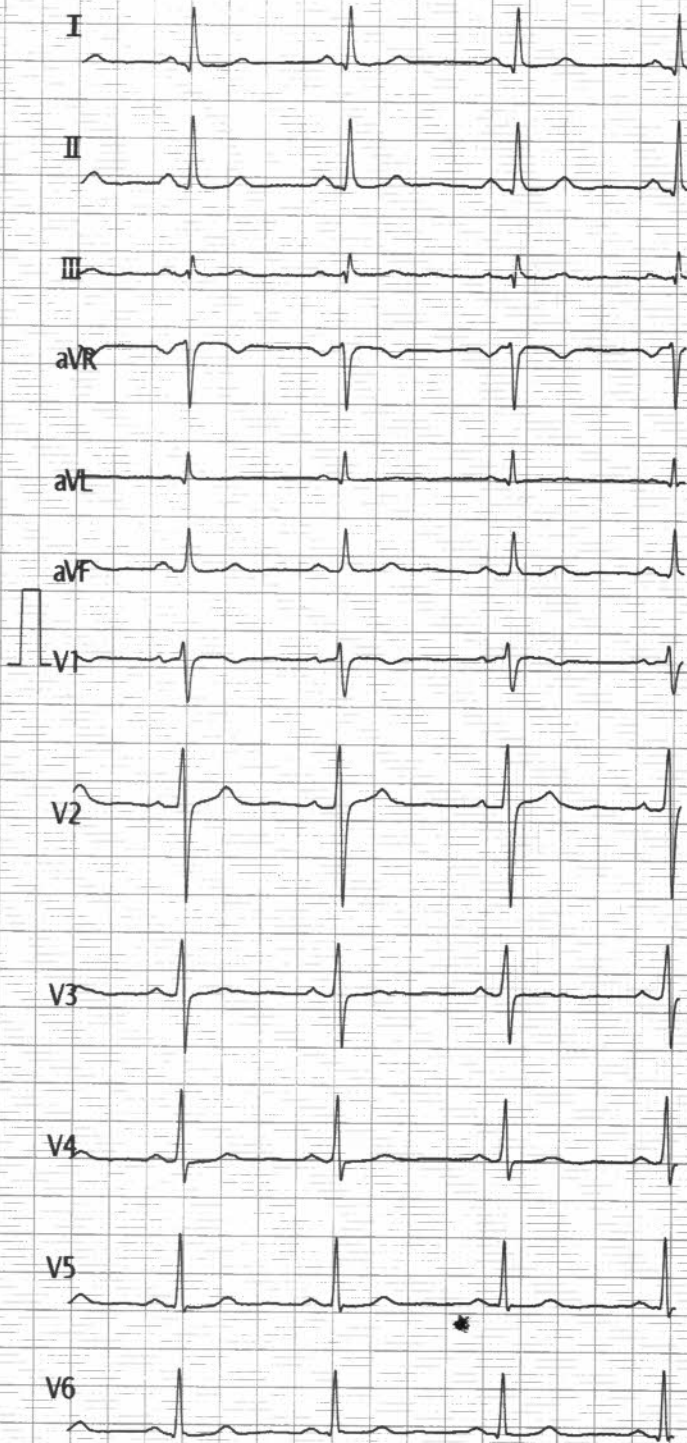
Dr Rajani Gutha
 Chief Biochemist

Verified by

D RS Ramadevi, MD
 Consultant Pathologist

10mm/mV

TO BE CORRELATED CLINICALLY



Vent. Rate(BPM) : 72

<ECG Analysis Result>

PR Int.(ms) : 144

800 Normal Sinus Rhythm

P/QRS/T Int.(ms) : 106 90 173

611 T Abnormality(Flat T)

QT/QTc Int.(ms) : 377 418

*** Borderline Abnormal ECG

P/QRS/T Axis(Deg.) : 64 47 48

RV1/SV5 Amp.(mV) : 0.21 0.08


RV5/SV1 Amp.(mV) : 0.89 0.47

V2.33 Technician:

N7R
Dr. V. HARIRAM
 MD, DM (Card)
HARI'S HEART CLINIC
 1st Floor, MIG-321, 4th Road,
 KPHB, Hyderabad-72. Ph: 833025338
 Note: Unconfirmed Report Need

ST LEVEL(mV)

I	II	III	aVR	aVL	aVF
+0.00	+0.01	+0.01	+0.00	-0.00	+0.01
V1	V2	V3	V4	V5	V6
+0.00	+0.05	+0.00	+0.00	-0.00	+0.00

023-3721 F / 35 Y
 MRS. DUGGARAJU ANUSHA

 Aditya Diagnostics 26-03-2023

> 000000000000 F 9Y / cm/Kg

35 Yrs / Male
90 Kg / 167 Cms

26-Mar-2023 12:45:40 PM

Protocol : BRUCE

Medication : NO
Ref By : BANK OF BARODA

Objective :
History : NO

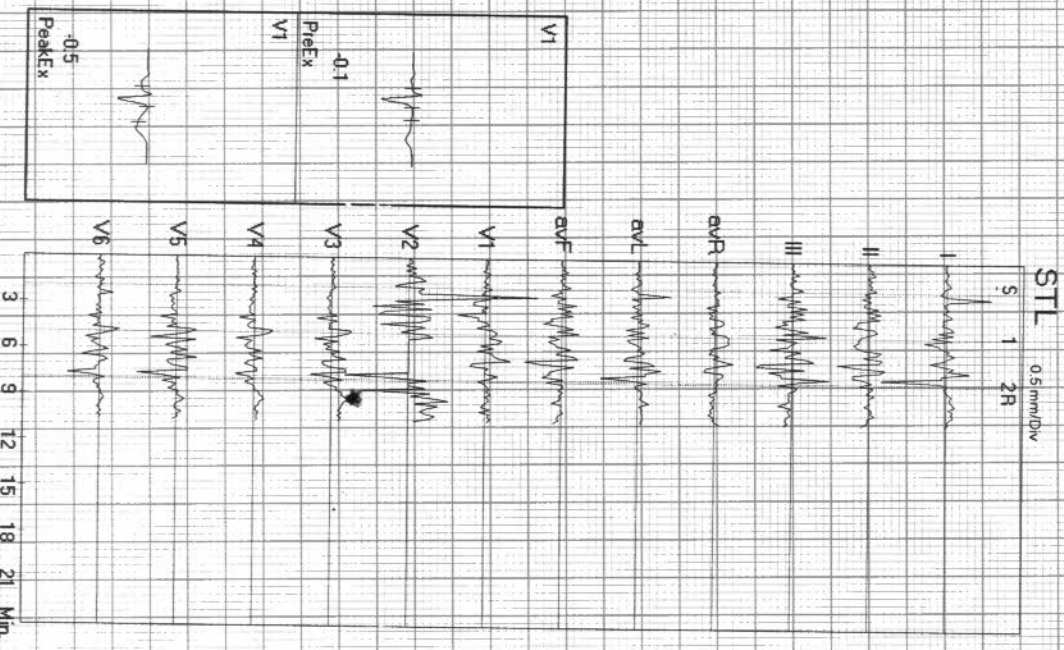
Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (mph)	Grade (%)	METS	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine					1.0	90	120/70	108	-	
Standing					1.0	106	120/70	127	-	
HV					1.0	89	120/70	106	-	
ExStart					1.0	90	120/70	108	-	
Stage 1	3:00	3:01	1.7	10.0	4.7	161	130/80	209	-	
Stage 2	3:00	6:01	2.5	12.0	7.1	155	140/90	217	-	
PeakEx	0:06	6:07	3.4	14.0	7.2	153	140/90	214	-	
LegPain	0:10	6:08	1.1	0.0	6.1	158	140/90	221	-	
Dizziness	0:16	6:08	1.1	0.0	5.5	154	140/90	215	-	
Recovery	1:00		1.1	0.0	1.2	128	140/90	179	-	
Recovery	2:00		1.1	0.0	1.0	114	130/80	148	-	
Recovery	2:33		0.0	0.0	1.0	102	120/70	122	-	

Findings :

Exercise Time : 06:07
Max HR Attained : 161 bpm 87% of Target 185
Max BP : 140/90(mmHg)
Max Workload attained : 7.2(Fair Effort Tolerance)

Dr. V. HARRISAN
MD, DMCCARD
HARRISAN HARRISAN CLINIC
KRRB, HYDRAABAD, TS, INDIA

TMTIS Negative FOR
INDUCIBLE ISCHEMIA



Advice/Comments:



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES

Linked Medians Report

Ex Time 00:52
BLC: Off
Notch: On

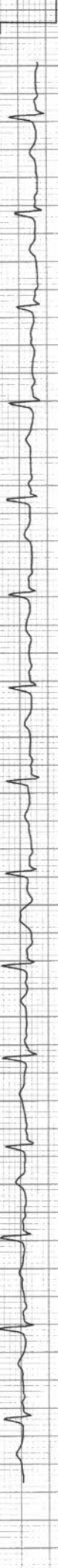
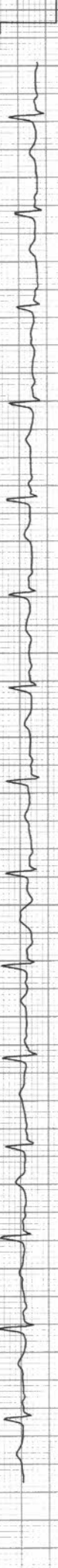
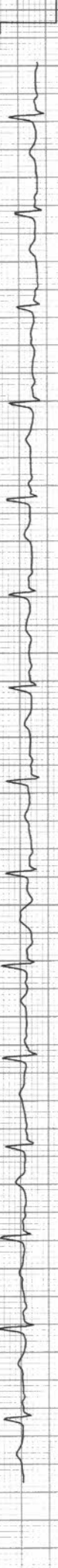
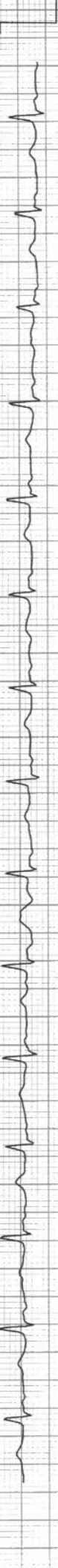
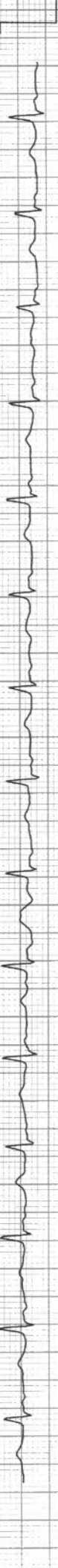
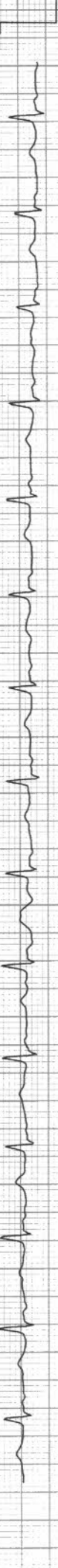
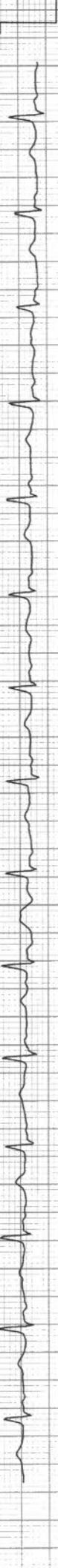
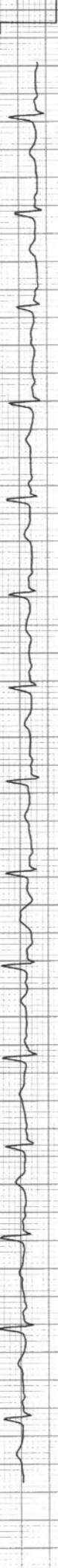
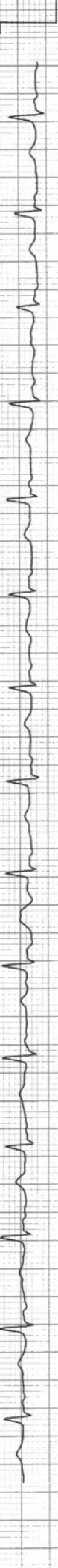
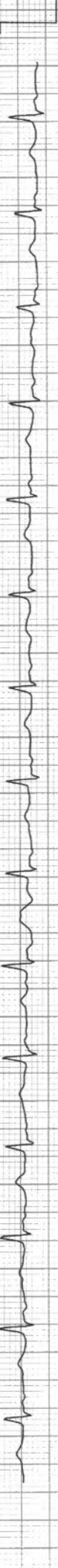
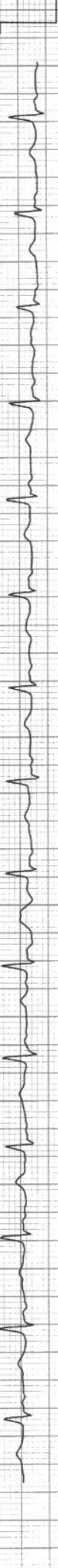
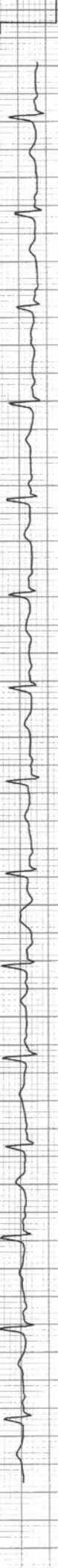
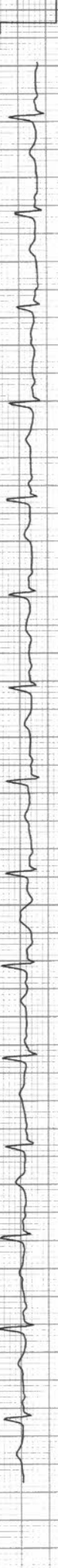
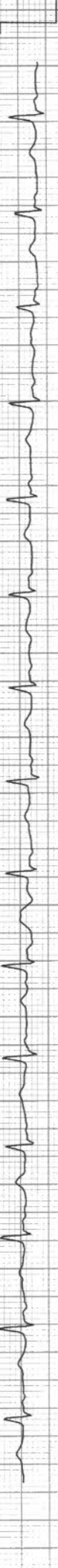
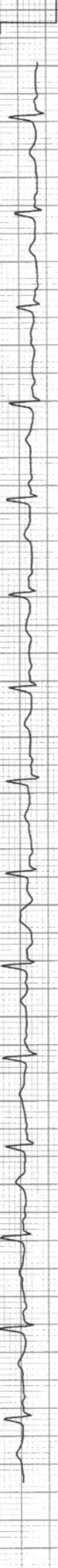
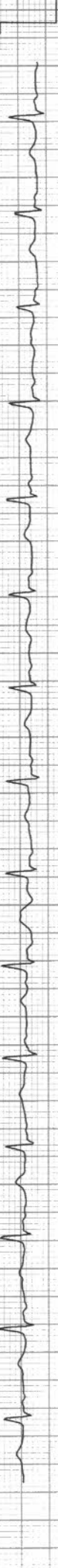
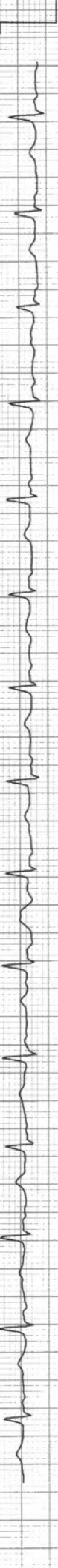
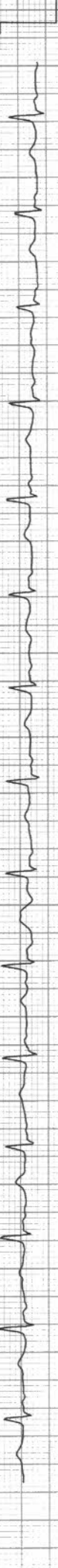
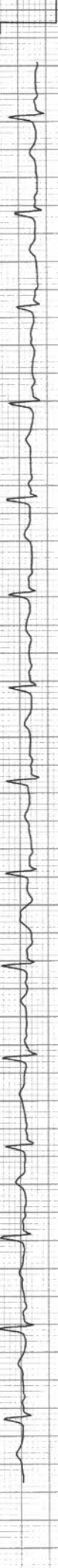
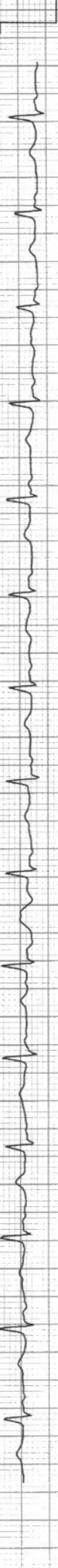
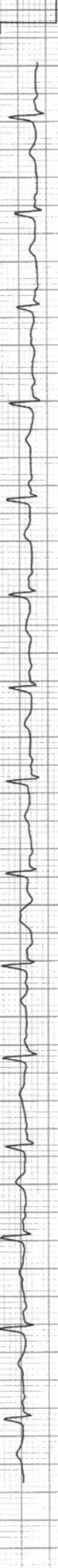
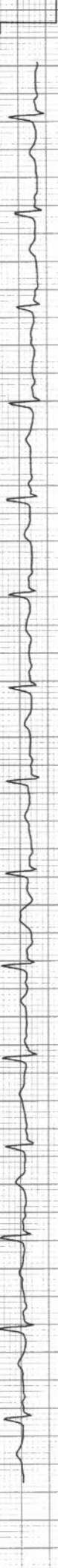
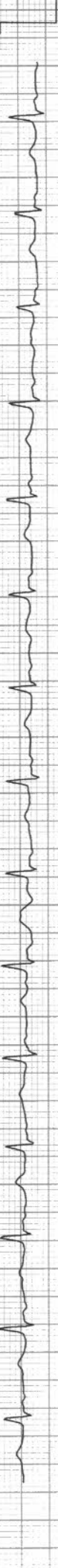
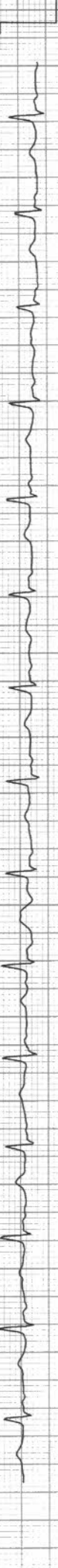
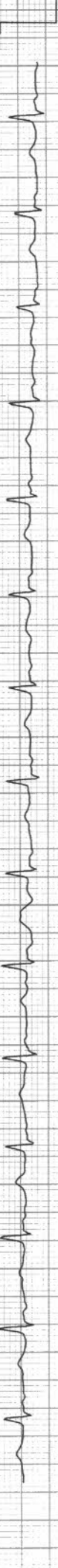
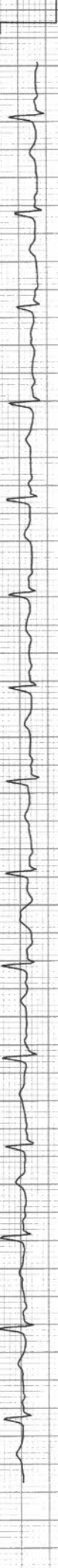
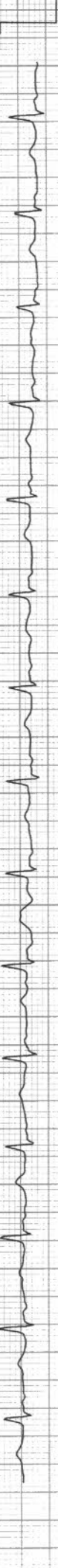
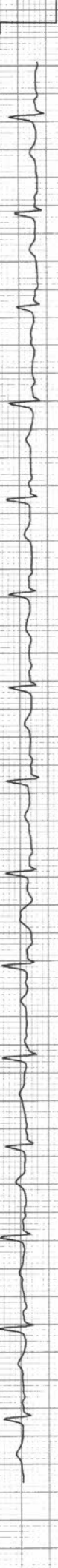
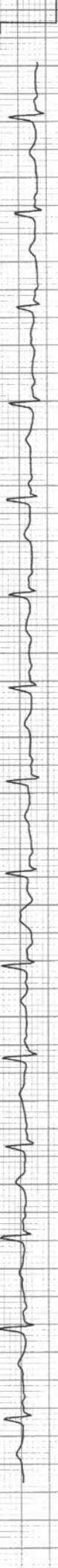
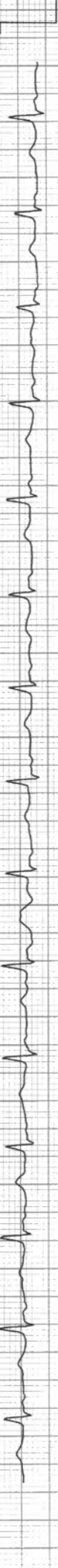
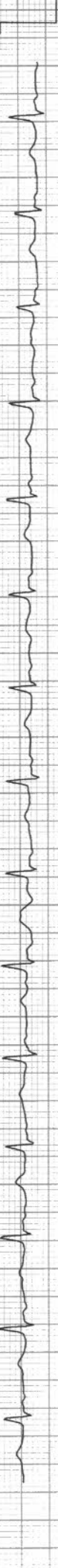
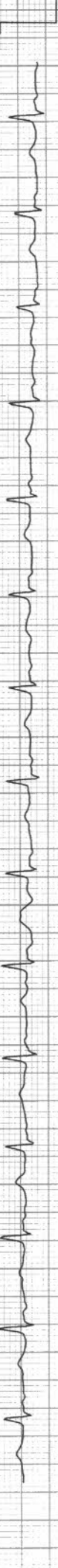
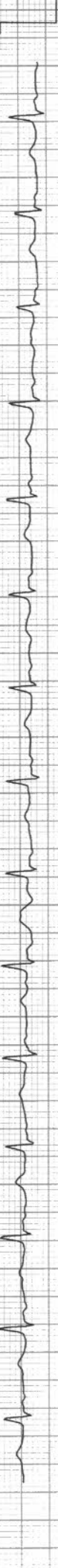
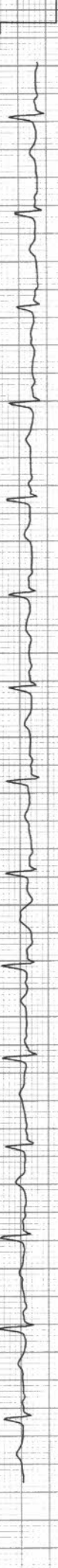
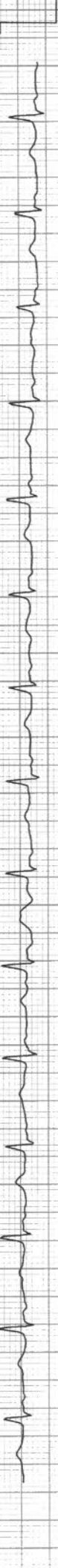
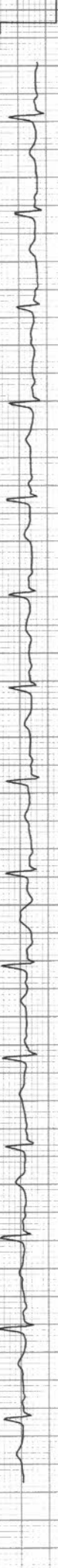
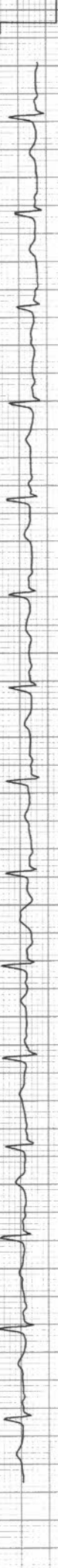
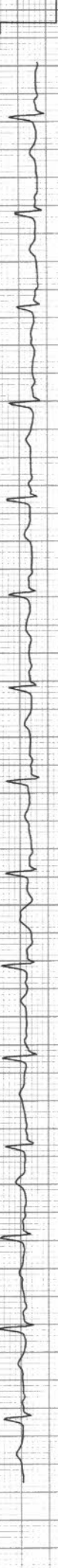
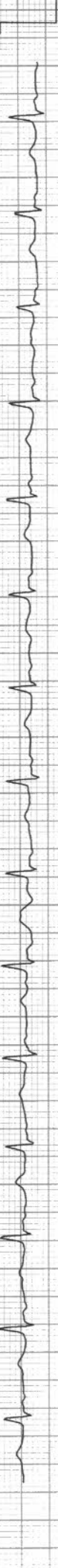
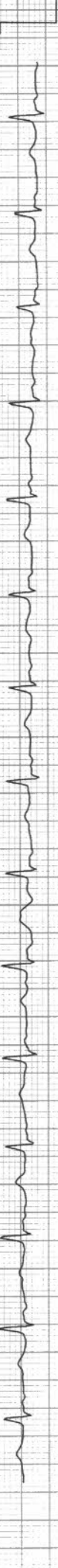
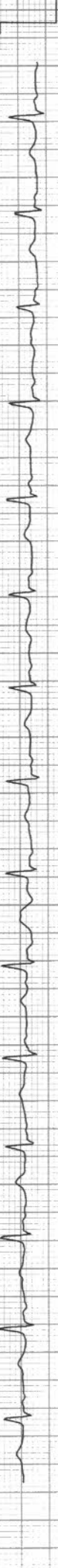
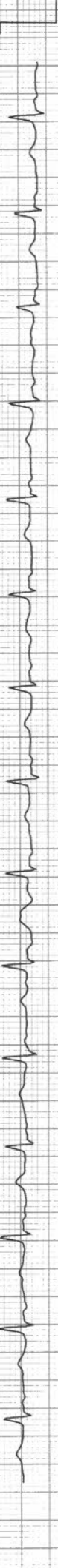
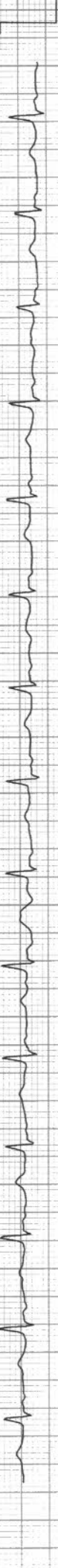
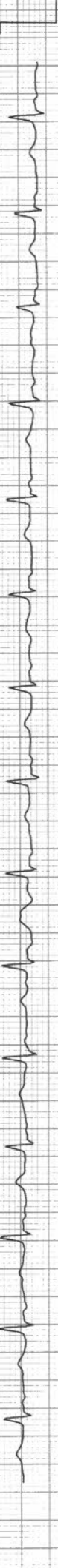
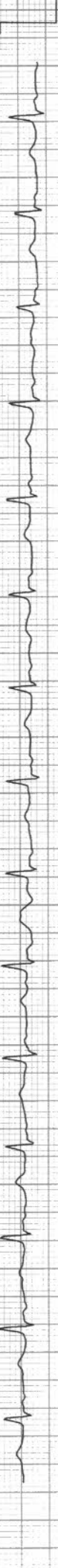
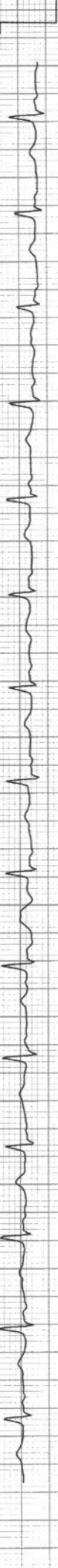
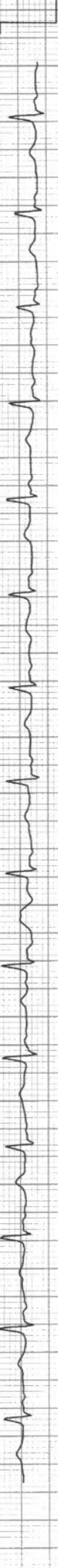
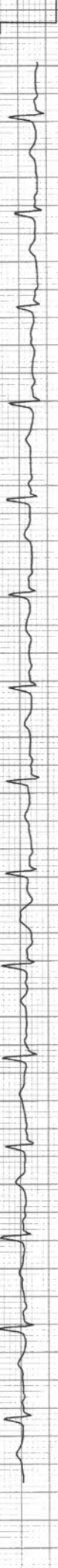
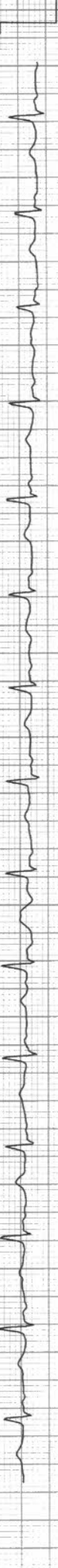
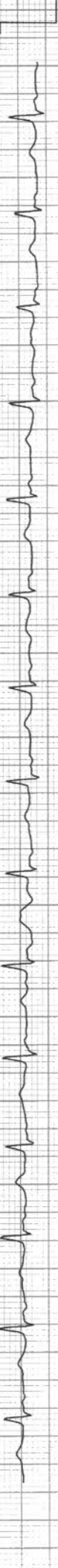
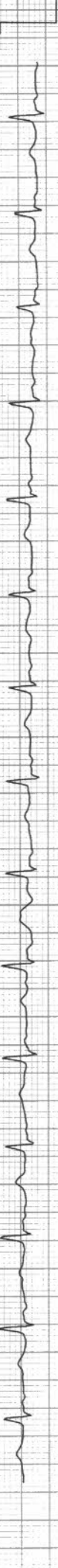
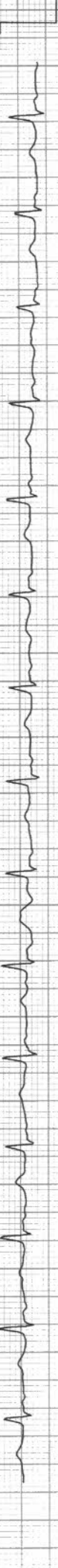
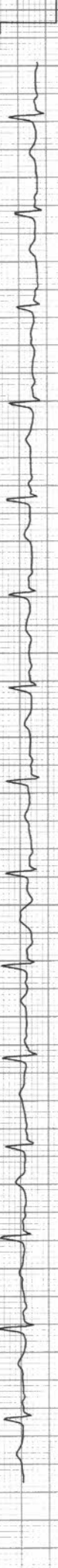
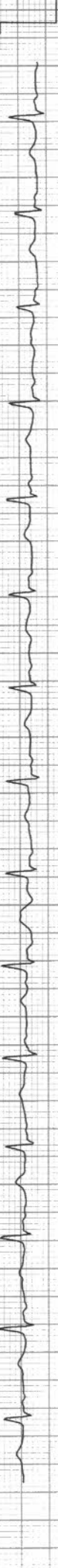
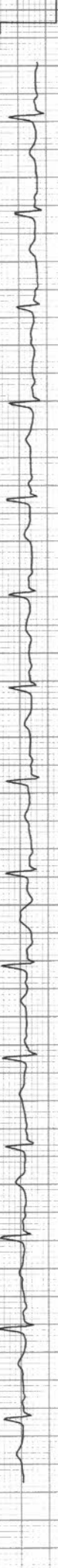
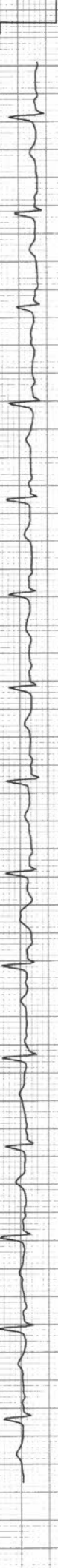
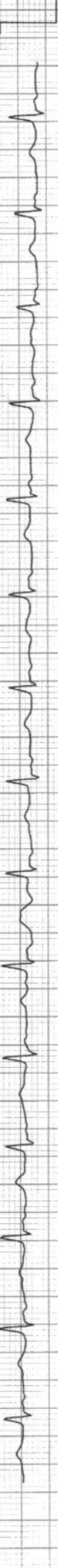
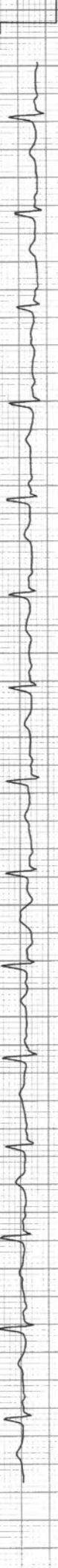
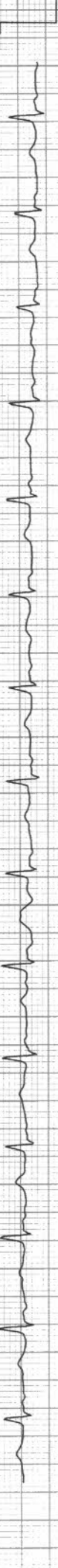
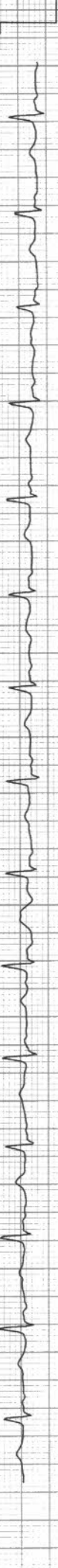
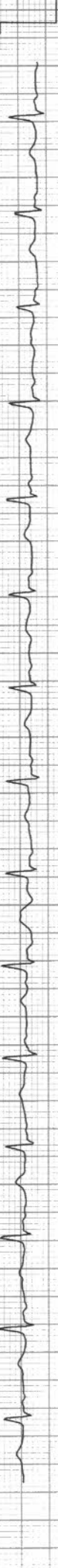
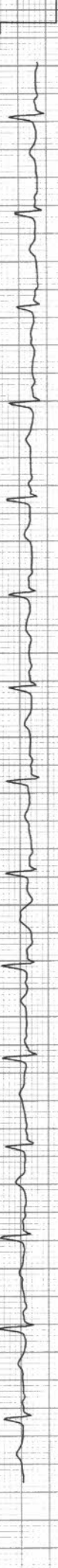
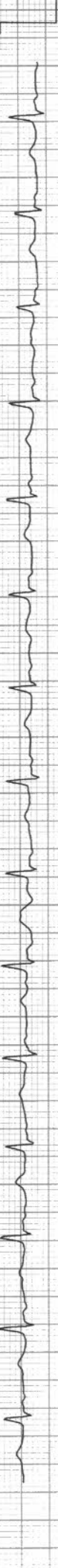
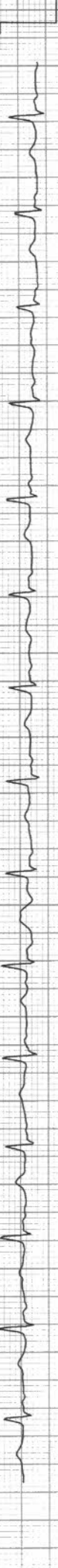
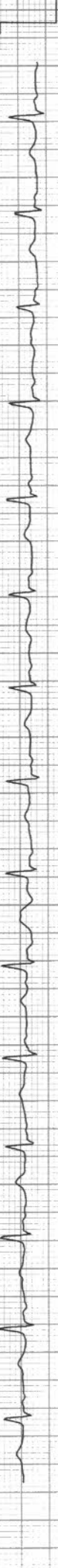
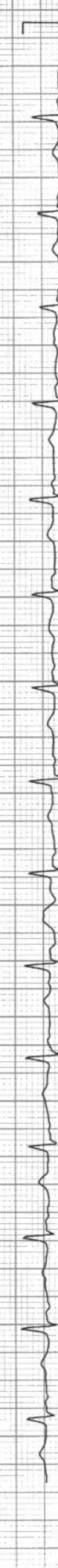
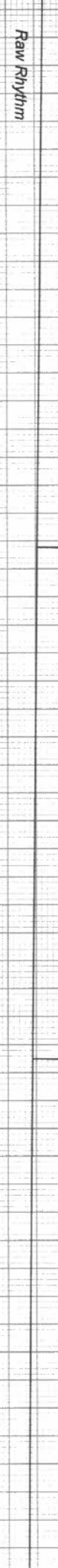
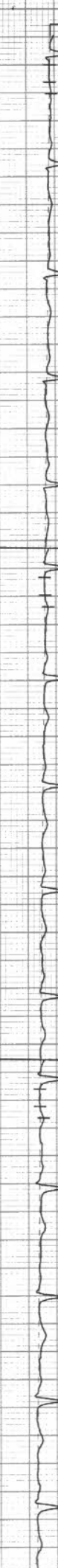
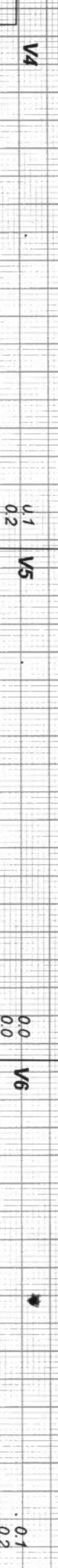


MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.
35 Yrs / Male
90 Kg / 167 Cm/
Date: 26-Mar-2023 12:45:40 PM

Tgt HR: 49% of 185
Speed: 11.0 mph,
Grade: 0.0%

(0.05-100)Hz

SUPINE
1.0 Cm/mV
25 mm/Sec.



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

Linked Medians Report

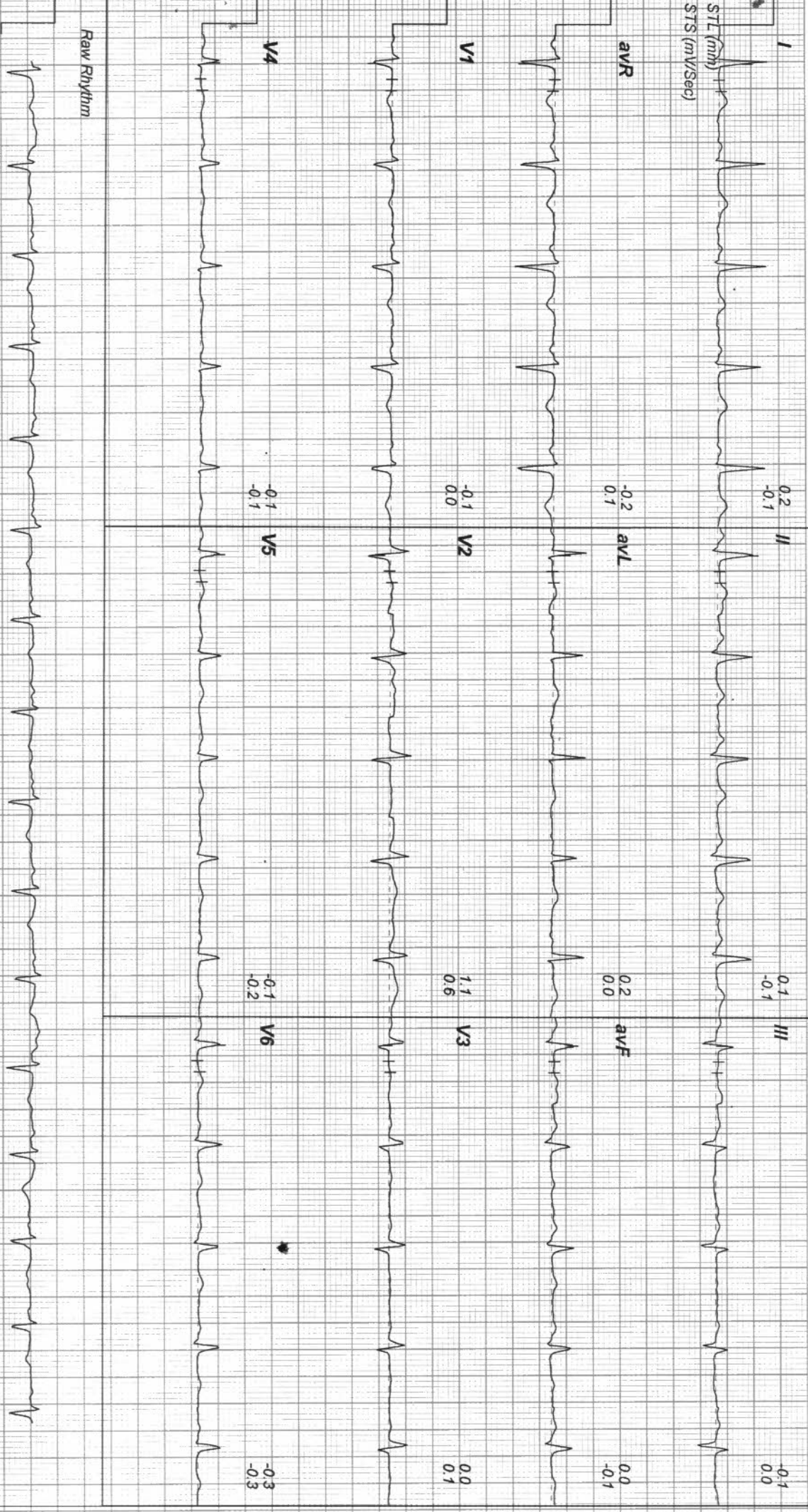
233722 / MRS DUGGARAJU ANUSHAHAR: 102 bpm
35 Yrs / Male METS: 1.0
90 Kg / 167 Cm/ BP: 120/70
Date: 26-Mar-2023 12:45:40 PM

Trgt HR: 55% of 185
Speed: 11.0 mph,
Grade: 0.0%

(0.05-100)Hz

Ex Time 01:24
BLC : Off
Notch : On

STANDING
1.0 Cm/mV
25 mm/Sec.



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
 MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

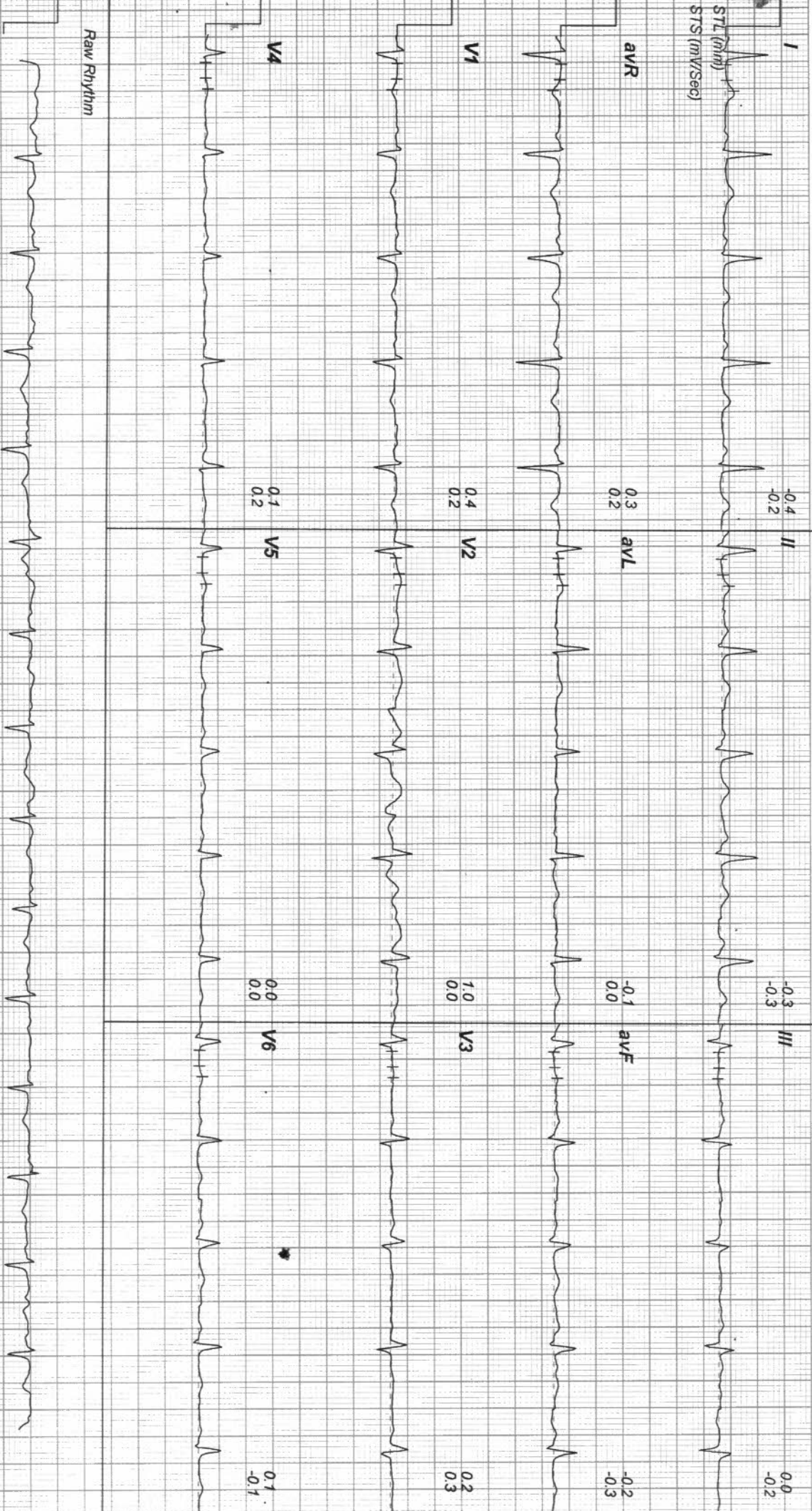
Linked Medians Report

233722 / MRS DUGGARAJU ANUSHAR: 92 bpm
 35 Yrs / Male
 METS: 1.0
 BP: 120/70
 Date: 26-Mar-2023 12:45:40 PM

Tgt HR: 49% of 185
 Speed: 11.0 mph,
 Grade: 0.0%

Ex Time 01:52
 BLC: Off
 Notch: On
 (0.05-100)Hz

HV
 1.0 Cm/mV
 25 mm/Sec.



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
 MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

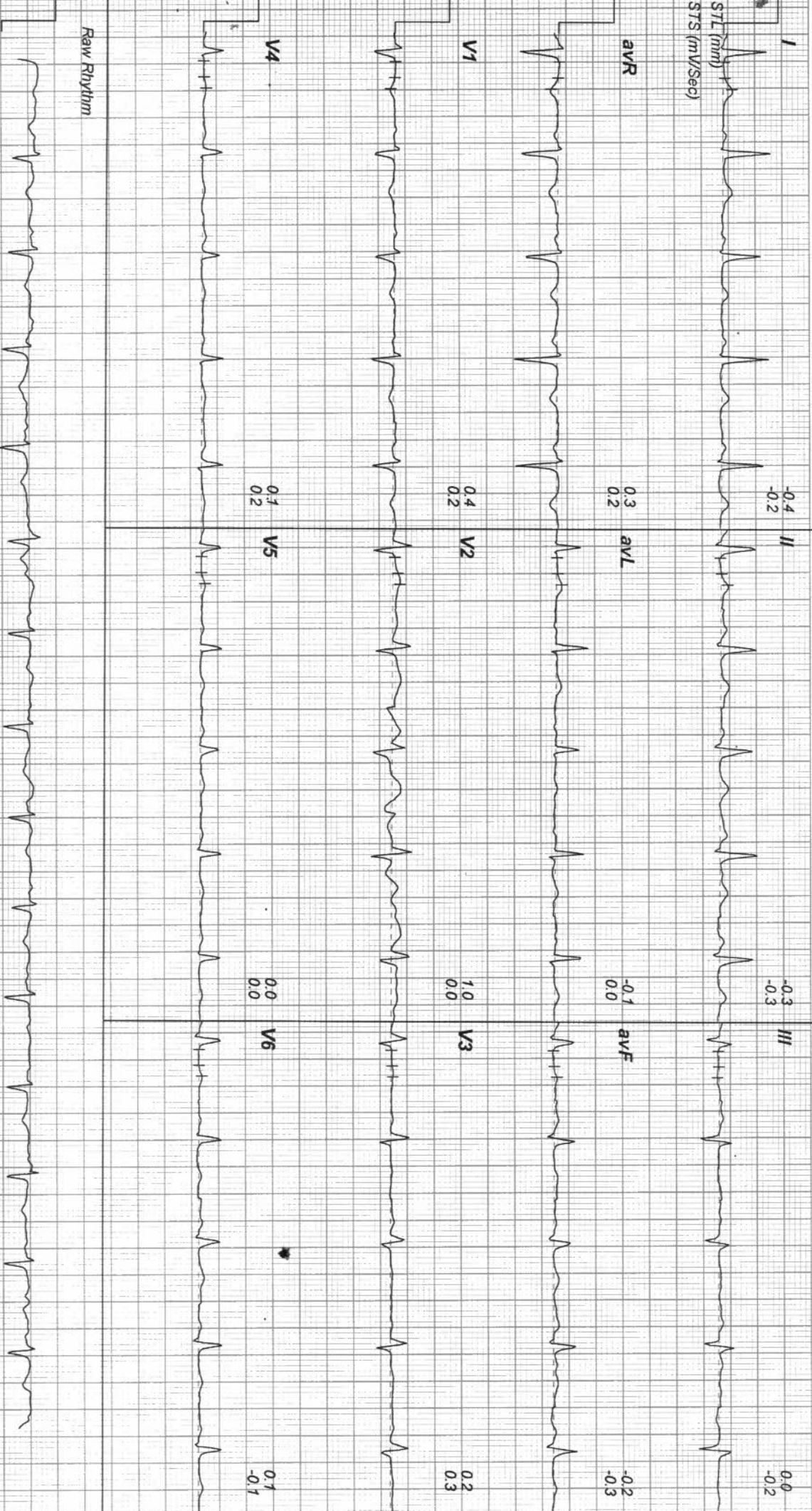
Linked Medians Report

233722 / MRS DUGGARAJU ANUSHAHAR: 89 bpm
 35 Yrs / Male
 90 Kg / 167 Cm/
 Date: 26-Mar-2023 12:45:40 PM

METS: 1.0
 BP: 120/70
 Tgt HR: 48% of 185
 Speed: 11.0 mph,
 Grade: 10.0%

Ex Time 00:00
 BLC: Off
 Notch: On
 (0.05-100)Hz

ExStk
 1.0 Cm/mV
 25 mm/Sec.



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
 MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

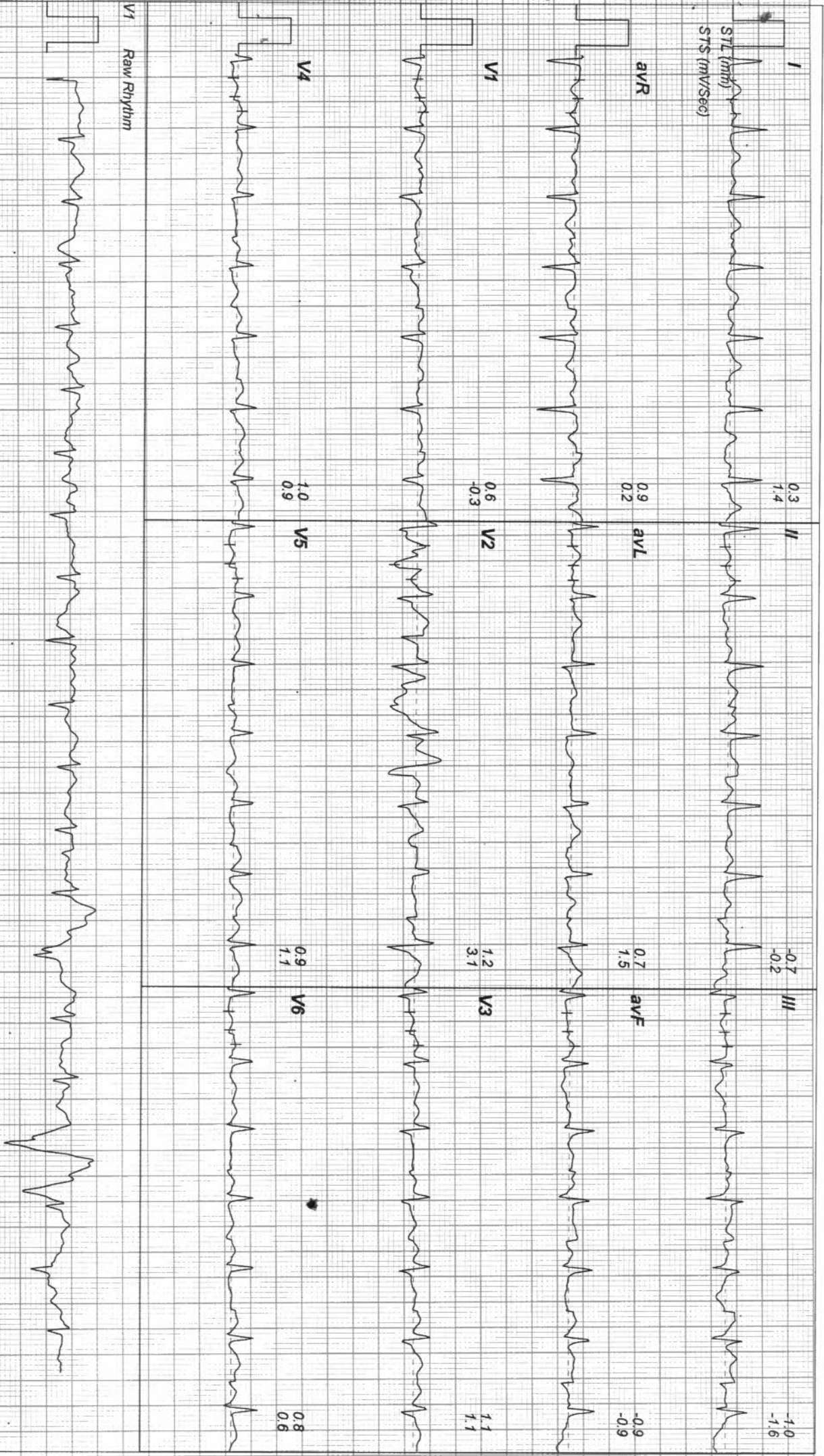
Linked Medians Report

233722 / MRS DUGGARAJU ANUSH/HR: 161 bpm
 35 Yrs / Male
 METS: 4.7
 90 Kg / 167 Cm/
 Date: 26-Mar-2023 12:45:40 PM

Tgt HR: 87% of 185
 Speed: 17.0 mph,
 Grade: 10.0%

Ex Time 03:00
 BLC: Off
 Notch: On

Stage 1 (03:00)
 1.0 Cm/mV
 25 mm/Sec.



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
 MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

Linked Medians Report

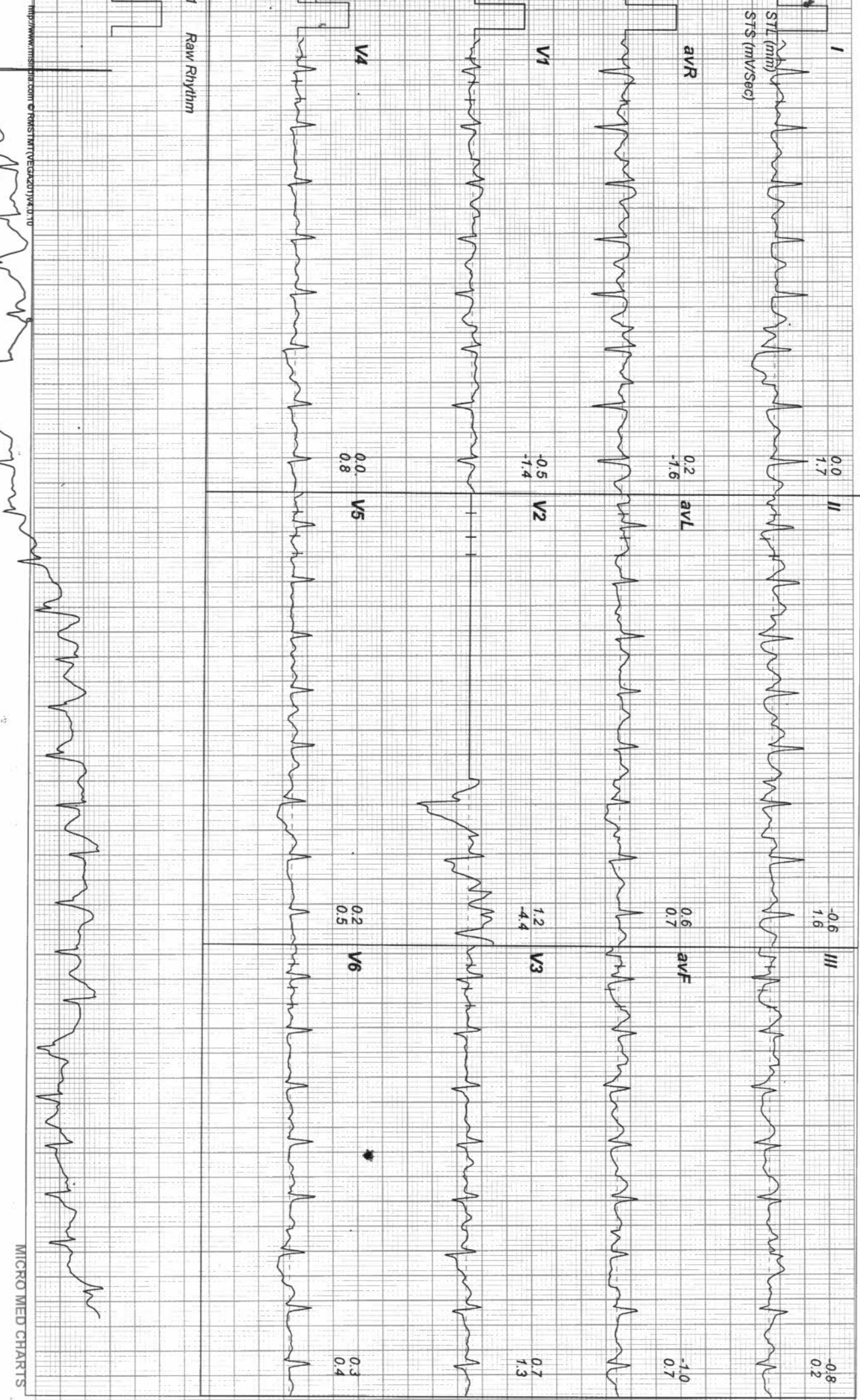
233722 / MRS DUGGARAJU ANUSH/HR: 155 bpm
 35 Yrs / Male
 METS: 7.1
 90 Kg / 167 Cm/
 BP: 140/90
 Date: 26-Mar-2023 12:45:40 PM

Tgt HR: 83% of 185
 Speed: 25.0 mph,
 Grade: 12.0%

(0.05-100)Hz

Ex Time 06:00
 BLC : Off
 Notch : On

Stage 2 (03:00)
 1.0 Cm/mV
 25 mm/Sec.



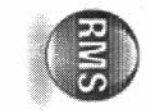
ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

Linked Medians Report

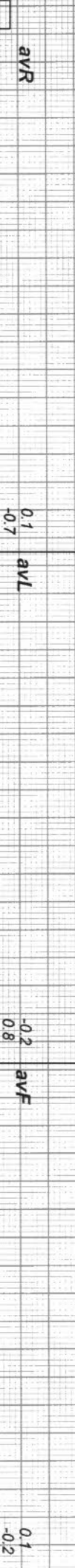
233722 / MRS DUGGARAJU ANUSHAR: 155 bpm
35 Yrs / Male METS: 7.2
90 Kg / 167 Cm/ BP: 140/90
Date: 26-Mar-2023 12:45:40 PM

Tgt HR: 83% of 185
Speed: 34.0 mph,
Grade: 14.0%

Ex Time 06:06
BLC: Off
Notch: On



PeakEx
1.0 Cm/mV
25 mm/Sec.



Raw Rhythm

ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

Linked Medians Report

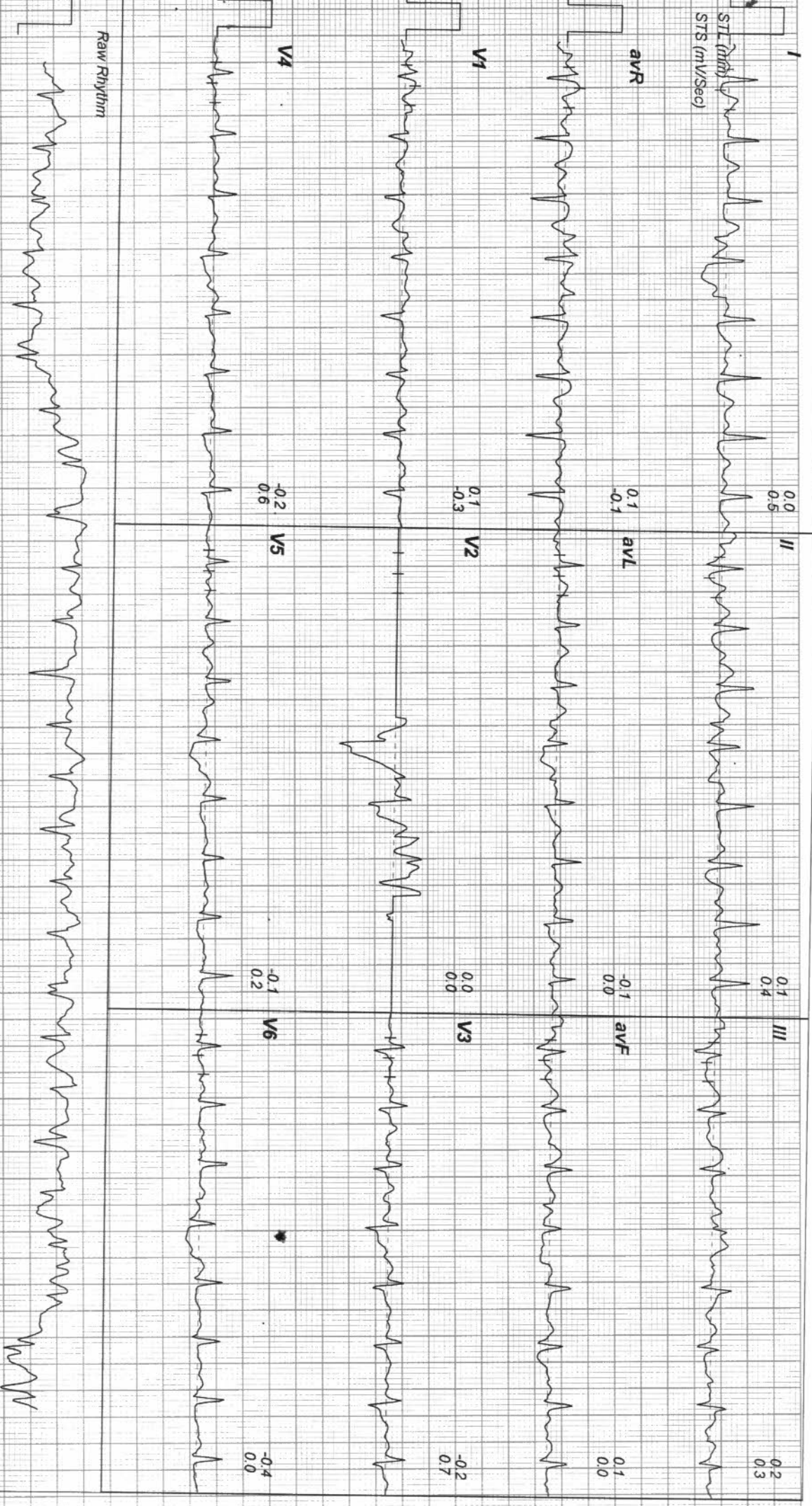
233722 / MRS DUGGARAJU ANUSH/HR: 158 bpm
 35 Yrs / Male
 METS: 6.0
 90 Kg / 167 Cm/
 Date: 26-Mar-2023 12:45:40 PM

Tgt HR: 85% of 185
 Speed: 11.0 mph,
 Grade: 0.0%

(0.05-100)Hz

Ex Time 06:06
 BLC : Off
 Notch : On

Recovery : (00:10)
 1.0 Cm/mV
 25 mm/Sec.



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

Linked Medians Report

233722 / MRS DUGGARAJU ANUSH/HR: 154 bpm
 35 Yrs / Male
 90 Kg / 167 Cm/
 Date: 26-Mar-2023 12:45:40 PM

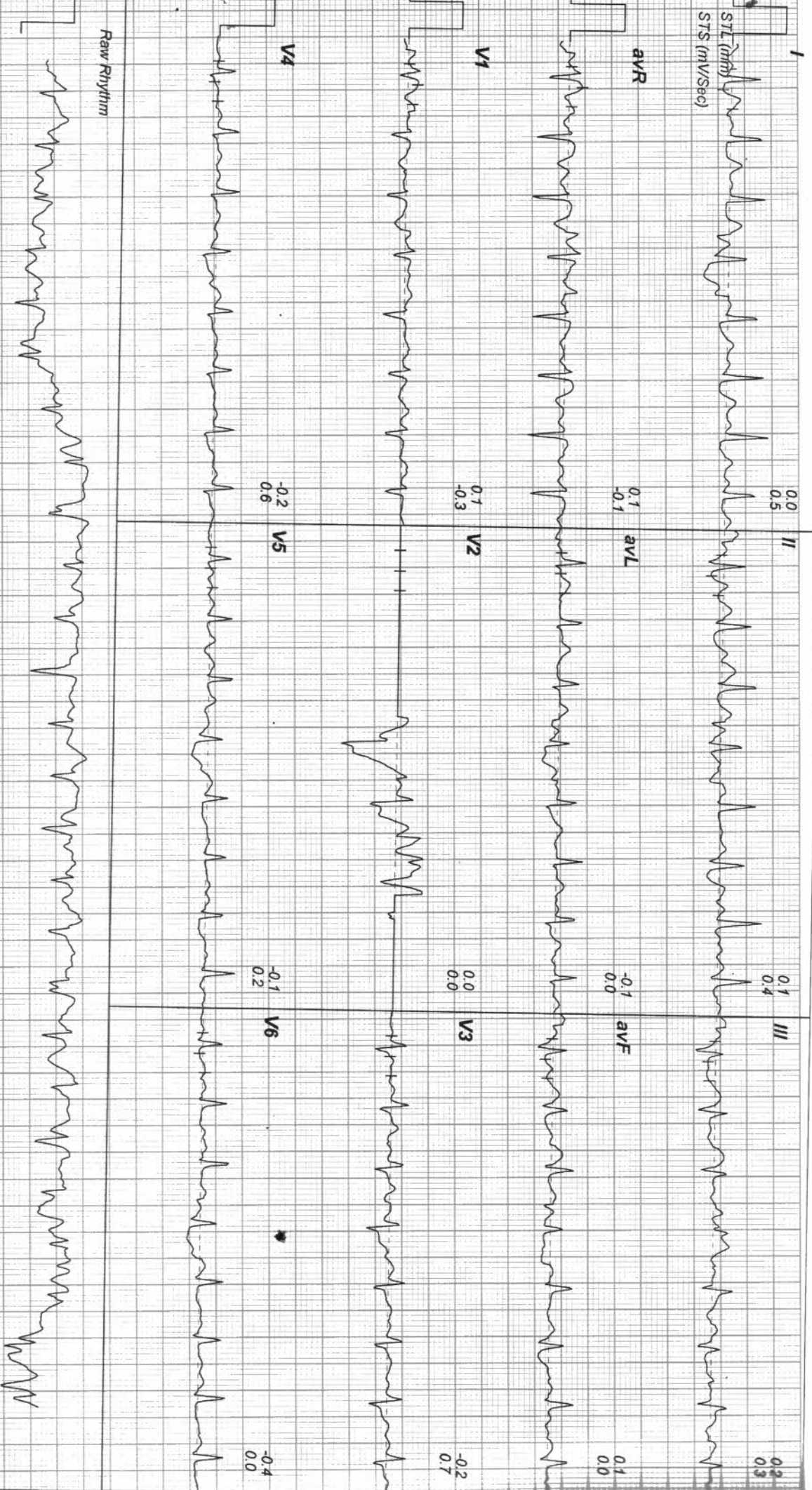
METS: 5.4
 BP: 140/90

Tgt HR: 83% of 185
 Speed: 11.0 mph,
 Grade: 0.0%

(0.05-100)Hz

Ex Time 06:06
 BLC : Off
 Notch : On

Recovery : (00:16)
 1.0 Cm/mV
 25 mm/Sec.



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
 MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

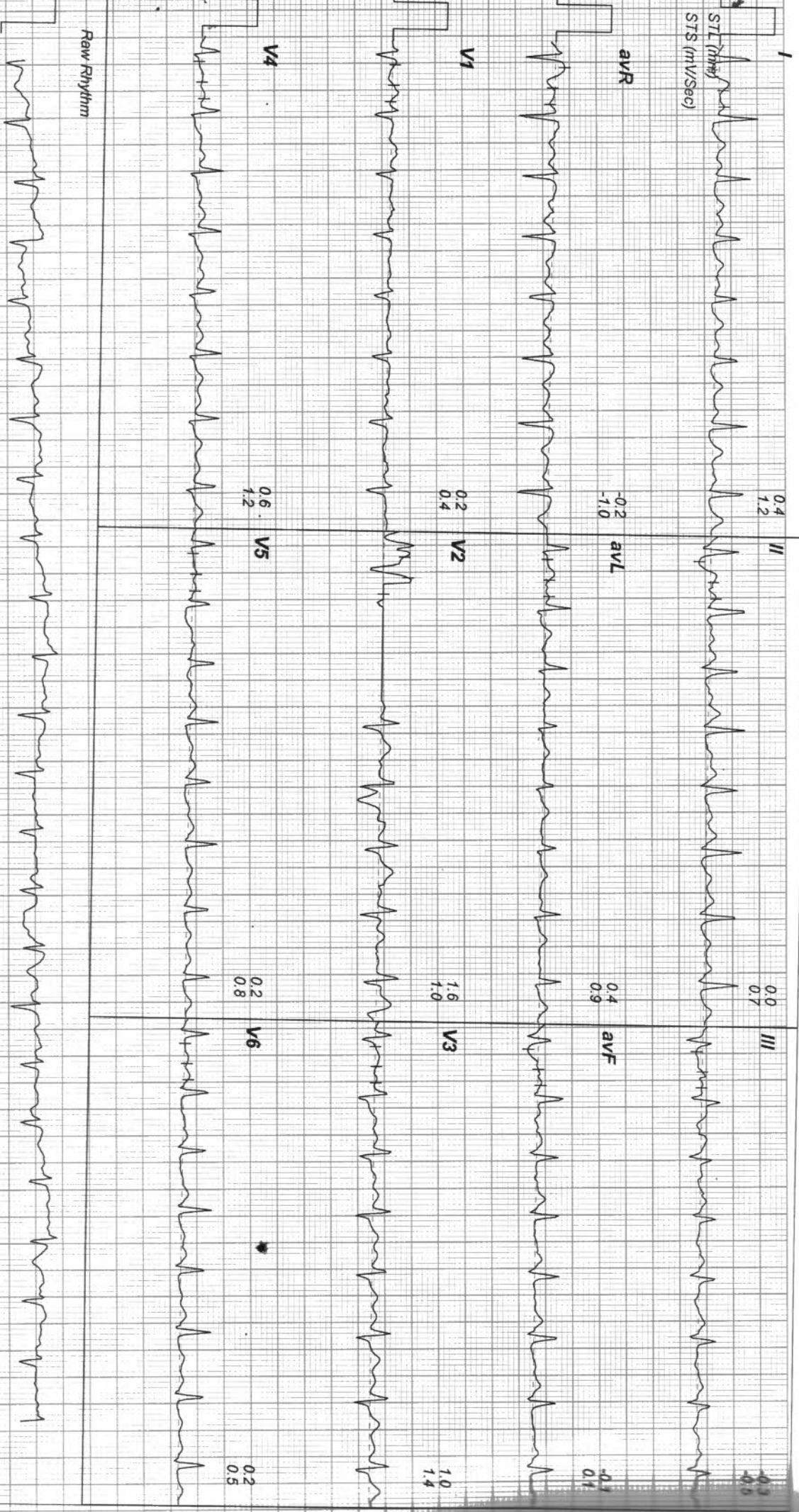
Linked Medians Report

233722 / MRS DUGGARAJU ANUSHAR: 128 bpm
 35 Yrs / Male
 90 Kg / 167 Cm/
 Date: 26-Mar-2023 12:45:40 PM

METS: 1.1
 BP: 140/90
 Trgt HR: 69% of 185
 Speed: 11.0 mph,
 Grade: 0.0%

Ex Time 06:06
 BLC: Off
 Notch: On
 (0.05-100)Hz

Recovery : (00:59)
 1.0 Cm/mV
 25 mm/Sec.



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
 MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

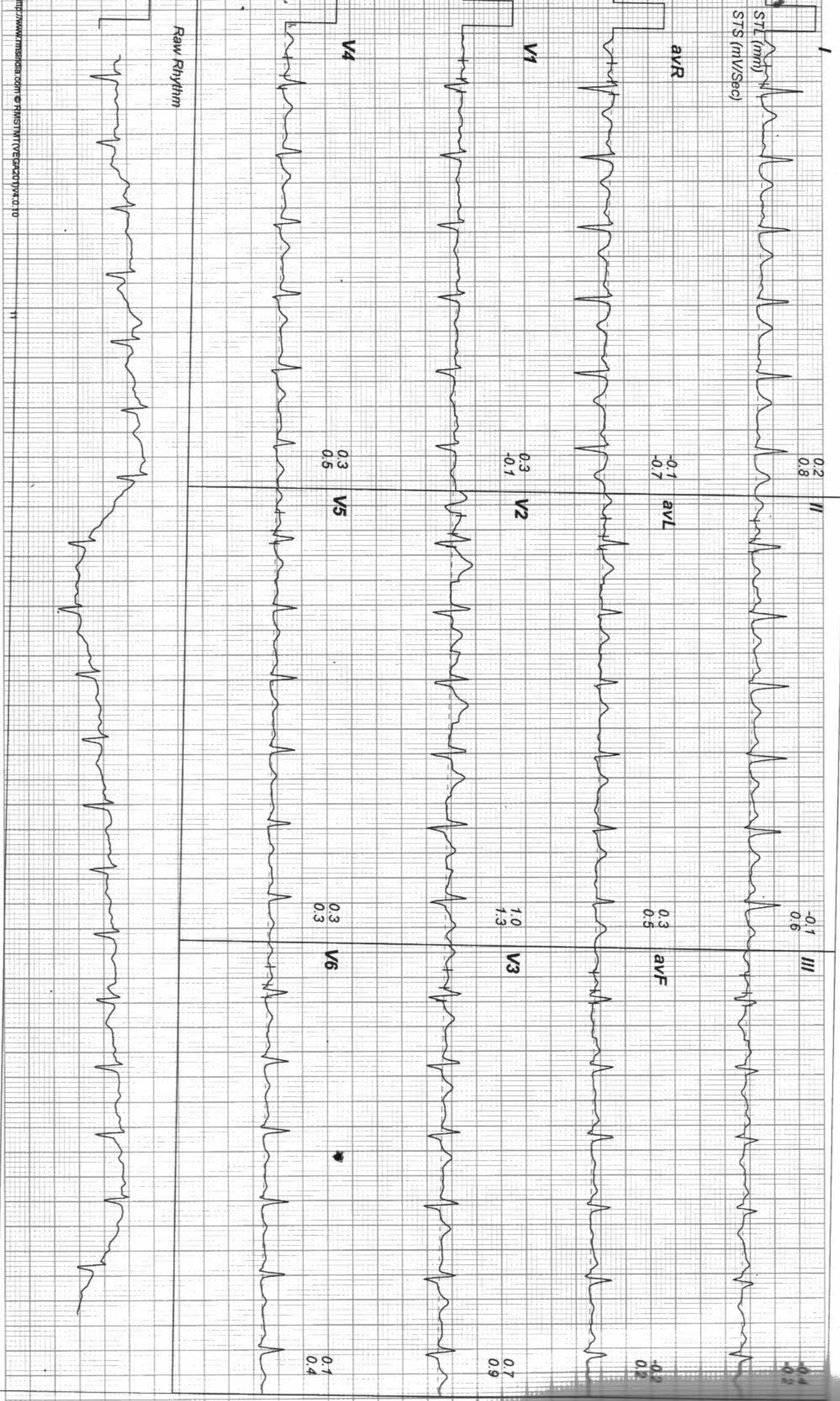
Linked Medians Report

233722 / MRS DUGGARAJU ANUSHAHAR: 114 bpm
 35 Yrs / Male
 90 Kg / 167 Cm/
 Date: 26-Mar-2023 12:45:40 PM

Tgt HR: 61% of 185
 Speed: 11.0 mph,
 Grade: 0.0%

Ex Time 06:06
 BLC: Off
 Notch: On

Recovery : (01:59)
 1.0 Cm/mV
 25 mm/Sec.





Name : MRS. DUGGARAJU ANUSHA
Age /Sex : 35 Y / F
Ref. By : BANK OF BARODA (MW)

Reg. No : O23-3721
Registration Date : 26-03-2023
Alt ID :

Ultrasound Scan Of Abdomen (Female)

Liver Size (129 mm), Shape, contour and echotexture normal. No localized or diffused mass lesions are seen. Intrahepatic vascular system, Portal vein, C.B.D and biliary radicals are normal

Gall Bladder Minimally distended shape and wall thickness are normal.
No calculus or no mass lesions are seen.

Spleen Size : 118 mm, Shape and echotexture normal, No abnormal calcifications seen.

Pancreas Head, body and tail echotexture are normal. Pancreatic duct normal.
No mass or cystic lesions seen. No calcifications are seen.

Kidneys Right kidney Measures : 104 X 42 mm
Left kidney Measures : 108 X 44 mm

Peri renal areas normal, Renal capsule normal, Cortical thickness,
Cortical echopattern and corticomedullary differentiation are normal.
Pelvicalyceal system normal. No calculus or no mass lesions are seen.

Urinary Bladder Well distended, Normal wall thickness. No evidence of calculi. No focal lesions.

Uterus Size : 64 X 31 X 46 mm, Weight - Echotexture normal.
No calcification seen. Endometrium thickness 6.5 mm.

Ovarie *E/O anechoic cyst noted in the right adnexa measuring ~39 X 26 mm,
right ovary could not be visualised separately.*

Left ovary is normal in size, shape and echotexture. Left Ovary : 25 X 16 mm

Others Aorta and IVC are normal. No lymphadenopathy. No ascitis.

Impression: Features suggestive of right ovarian cyst (Simple)

Advice - Clinically Correlation.

Dr Md Azam

Radiologist