

MEDALL HEALTH CARE PVT. LTD 20/384, Gopalakrishnan Street, T.Nagar, Chennai - 600017. Ph: 044-42121883



Name	MRS.THILAGAVATHI R	ID	MED121519730
Age & Gender	41Y/FEMALE	Visit Date	03/12/2022
Ref Doctor	MediWheel	THE RESERVE OF THE PROPERTY OF	

# **MASTER HEALTH CHECK UP SUMMARY**

Height:	150 cm	Weight:	55 kg
BMI:	24.4	a all had solven I frame strong state	or 10 10 10 10 10 10 10 10 10 10 10 10 10

# **PRESENT HISTORY:**

Nil.

# <u>GENERAL EXAMINATION</u> $\rightarrow$ <u>P.I.C.C.L.E</u>: Nil.

Pulse: 60/min

BP: 120/80 mmHg

Respiratory Rate: 15/min

Temp: Normal

Others: Nil

# **SYSTEMIC EXAMINATION:**

CVS: S1S2+

RS: B/L NVBS

CNS: NFND

P/A:

Soft, No palpable mass, No tenderness BS +.

# **INVESTIGATIONS:**

## ECG:

Normal ECG.

### X-RAY:

Chest x-ray shows no significant abnormality.

## **ULTRASOUND ABDOMEN:**

- Grade I fatty liver.
- Bilateral renal calculi.
  - For clinical correlation.





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## TMT:

Negative.

## **MAMMOGRAPHY:**

Not enclosed.

## PAP SMEAR:

• Negative for intraepithelial lesion / malignancy.

## LAB REPORTS:

• Blood parameters are within normal limits.

# **EYE SCREENING:**

Vision	R/E	L/E
<b>Distant Vision</b>	Myopia -1	Myopia -1
Near Vision	N6	N6
Colour Vision	Normal	Normal

> Distant vision - Corrected.

# **ADVISED:**

Nephrologist opinion – for Bilateral renal calculi.

DR.GOMATHY.S M.B.B.S, D.M.C.H Consultant General Physician



: MED121519730 PID No.

SID No. : 602211374

Age / Sex : 41 Year(s)/ Female

MediWheel Ref. Dr

03/12/2022 10:07 AM Register On

03/12/2022 12:05 PM Collection On

OP

Report On

03/12/2022 7:27 PM

**Printed On** 

05/12/2022 9:31 AM

**Type** 

125-160



Investigation

**Observed Value** 

Unit

Biological Reference Interval

# <u>IMMUNOHAEMATOLOGY</u>

'B' 'Positive' **BLOOD GROUPING AND Rh TYPING (Blood** 

/Agglutination)

INTERPRETATION: Reconfirm the Blood group and Typing before blood transfusion

When Reciepient, Consider patient as Rh negative when Donor, Consider patient as Rh positive.

# **HAEMATOLOGY**

Complete	Blood	Count	With -	<b>FSR</b>
Complete	DIOUU	Count	AAILII -	LON

Haemoglobin (Blood/Spectrophotometry)	11.9	g/dL	12.5 - 16.0
Packed Cell Volume(PCV)/Haematocrit (Blood/Derived from Impedance)	37.9	%	37 - 47
RBC Count (Blood/Impedance Variation)	4.33	mill/cu.mm	4.2 - 5.4
Mean Corpuscular Volume(MCV) (Blood/ Derived from Impedance)	87.6	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (Blood/Derived from Impedance)	27.5	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (Blood/Derived from Impedance)	31.3	g/dL	32 - 36
RDW-CV (Blood/Derived from Impedance)	13.7	%	11.5 - 16.0
RDW-SD (Blood/Derived from Impedance)	42.00	fL	39 - 46
Total Leukocyte Count (TC) (Blood/ Impedance Variation)	6890	cells/cu.mm	4000 - 11000
Neutrophils (Blood/Impedance Variation & Flow Cytometry)	51.5	%	40 - 75
Lymphocytes (Blood/Impedance Variation & Flow Cytometry)	35.9	%	20 - 45
Eosinophils (Blood/Impedance Variation & Flow Cytometry)	7.0	%	01 - 06
Monocytes (Blood/Impedance Variation & Flow Cytometry)	5.0	%	01 - 10
Basophils (Blood/Impedance Variation & Flow	0.6	%	00 - 02

INTERPRETATION: Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.

10^3 / µl 1.5 - 6.6Absolute Neutrophil count (Blood/ 3.55 Impedance Variation & Flow Cytometry) 1.5 - 3.510^3 / µl 2.47 Absolute Lymphocyte Count (Blood/ Impedance Variation & Flow Cytometry) 0.04 - 0.4410^3 / µl Absolute Eosinophil Count (AEC) (Blood/ 0.48 Impedance Variation & Flow Cytometry)

Dr S.Sridevi.,MD Consultant BioChemist Reg No: 71747

The results pertain to sample tested.

Reg No: 13-48036

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Investigation	Observed Value	<u>Unit</u>	Biological Reference Interval
Absolute Monocyte Count (Blood/ Impedance Variation & Flow Cytometry)	0.34	10^3 / µl	< 1.0
Absolute Basophil count (Blood/Impedance Variation & Flow Cytometry)	0.04	10^3 / µl	< 0.2
Platelet Count (Blood/Impedance Variation)	344	10^3 / µl	150 - 450
MPV (Blood/Derived from Impedance)	8.7	fL	8.0 - 13.3
PCT (Blood/Automated Blood cell Counter)	0.30	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Blood/Automated - Westergren method)	12	mm/hr	< 20
BIOCHEMISTRY			
BUN / Creatinine Ratio	18.23		6.0 - 22.0
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	81.9	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

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

Glucose, Fasting (Urine) (Urine - F/GOD -

Negative

Negative

Glucose Postprandial (PPBS) (Plasma - PP/

122.6

mg/dL

70 - 140

INTERPRETATION:

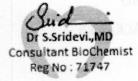
GOD-PAP)

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

Urine Glucose(PP-2 hours) (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	12.4	mg/dL	7.0 - 21
Creatinine (Serum/Modified Jaffe)	0.68	mg/dL	0.6 - 1.1

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

Uric Acid (Serum/Enzymatic)	3.6	mg/dL	2.6 - 6.0
Liver Function Test			
Bilirubin(Total) (Serum/DCA with ATCS)	0.56	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.18	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.38	mg/dL	0.1 - 1.0



The results pertain to sample tested.

Reg No: 13-48036

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<u>Investigation</u>	Observed Value	<u>Unit</u>	<b>Biological Reference Interval</b>
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	12.7	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	18.5	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	25.7	U/L	< 38
Alkaline Phosphatase (SAP) (Serum/ Modified IFCC)	72.0	U/L	42 - 98
Total Protein (Serum/Biuret)	7.08	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.03	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	3.05	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.32		1.1 - 2.2
Lipid Profile			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	144.6	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	85.6	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

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

HDL Cholesterol (Serum/Immunoinhibition)	47.9	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 50 - 59 High Risk: < 50
LDL Cholesterol (Serum/Calculated)	79.6	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190

VLDL Cholesterol (Serum/Calculated)	17.1	mg/aL	< 30
Non HDL Cholesterol (Serum/Calculated)	96.7	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219

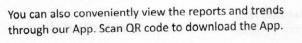
Dr S.Sridevi.,MD Consultant BioChemist Reg No : 71747

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DR GURUPRIVA J PATHOLOGIST Reg No : 13-48036

Very High: >= 220

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INTERPRETATION: 1. Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol. 2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio

(Serum/Calculated)

Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0

Triglyceride/HDL Cholesterol Ratio

(TG/HDL) (Serum/Calculated)

Optimal: < 2.5

Mild to moderate risk: 2.5 - 5.0

High Risk: > 5.0

LDL/HDL Cholesterol Ratio (Serum/

Calculated)

1.7

1.8

Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0

High Risk: > 6.0

Glycosylated Haemoglobin (HbA1c)

HbA1C (Whole Blood/HPLC)

5.6

%

Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4

Diabetic: >= 6.5

INTERPRETATION: If Diabetes - Good control: 6.1 - 7.0 %, Fair control: 7.1 - 8.0 %, Poor control >= 8.1 %

Estimated Average Glucose (Whole Blood)

114.02

**INTERPRETATION: Comments** 

HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency,

hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values. Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies,

Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

# <u>IMMUNOASSAY</u>

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/ Chemiluminescent Immunometric Assay 0.91

ng/ml

0.7 - 2.04

INTERPRETATION:

Comment:

(CLIA))

(CLIA))

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Tyroxine) - Total (Serum/

Chemiluminescent Immunometric Assay

6.83

µg/dl

42-12.0

Dr S.Sridevi.,MD Consultant BioChemist

Reg No: 71747

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DR GURUPRIYA J Reg No : 13-48036

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Unit

Biological Reference Interval

INTERPRETATION:

Comment:

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

TSH (Thyroid Stimulating Hormone) (Serum

µIU/mL

0.35 - 5.50

(CLIA))

INTERPRETATION: Reference range for cord blood - upto 20

/Chemiluminescent Immunometric Assay

1 st trimester: 0.1-2.5 2 nd trimester 0.2-3.0 3 rd trimester: 0.3-3.0

(Indian Thyroid Society Guidelines)

Comment:

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

2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The

variation can be of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations. 3. Values&amplt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

# CLINICAL PATHOLOGY

Urine Analysis - Routine

COLOUR (Urine)

Pale yellow

Yellow to Amber

APPEARANCE (Urine)

Clear

Clear

Protein (Urine/Protein error of indicator)

Glucose (Urine/GOD - POD)

Negative

Negative

Negative

Negative

Pus Cells (Urine/Automated - Flow cytometry

Occasional

Occasional

/hpf

NIL NIL

Epithelial Cells (Urine/Automated - Flow cytometry)

NIL

/hpf /hpf

NIL

Casts (Urine/Automated - Flow cytometry )

RBCs (Urine/Automated - Flow cytometry )

/hpf

NIL

Crystals (Urine/Automated - Flow cytometry )

NIL NIL

/hpf

NIL

Others (Urine)

NIL

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

Stool Analysis - ROUTINE

Colour (Stool)

Brown

Brown

**Blood** (Stool)

Absent

Absent

Consultant BioChemist Reg No: 71747

The results pertain to sample tested.

Reg No: 13-48036

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Age / Sex : 41 Year(s)/ Female

Ref. Dr : MediWheel

: 602211374

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03/12/2022 10:07 AM

03/12/2022 12:05 PM

Report On

Register On

**Collection On** 

: 03/12/2022 7:27 PM 05/12/2022 9:31 AM

Type

OP

Investigation	Observed Value	Unit	<b>Biological Reference Interval</b>
Mucus (Stool)	Absent		Absent
Reaction (Stool)	Acidic		Acidic
Consistency (Stool)	Semi Solid		Semi Solid
Ova (Stool)	NIL		NIL With Daniel and art wedst out
Others (Stool)	NIL		NIL
Cysts (Stool)	NIL		NIL
Trophozoites (Stool)	NIL		NIL
RBCs (Stool)	NIL	/hpf	Nil
Pus Cells (Stool)	1 - 2	/hpf	NIL
Macrophages (Stool)	NIL		NIL
Epithelial Cells (Stool)	NIL	/hpf	NIL

-- End of Report --



The results pertain to sample tested.



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Name : Mrs. THILAGAVATHI R

Register On

: 03/12/2022 10:07 AM

PID No.

: MED121519730

Collection On

: 03/12/2022 12:05 PM

SID No.

: 602211374

Report On

: 05/12/2022 6:02 PM

Age / Sex : 41 Year(s) / Female

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Ref. Dr

: MediWheel

y va Columna A

: 06/12/2022 1:45 PM

OP / IP

: OP

PAP Smear by LBC( Liquid based Cytology )

**SPECIMEN NO: Cy 2663//2022** 

MICROSCOPIC FINDINGS:

ADEQUACY: Satisfactory.

PREDOMINANT CELLS: Superficial, intermediate and endocervical cells.

BACKGROUND: Clean.

ORGANISMS: No specific organisms.

**IMPRESSION:** 

Negative for intraepithelial lesion / malignancy.

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

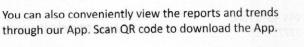
APPROVED BY

-- End of Report --

The results pertain to sample tested.

Page 1 of 1

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







Name	MRS.THILAGAVATHI R	ID	MED121519730
Age & Gender	41Y/FEMALE	Visit Date	03/12/2022
Ref Doctor	MediWheel		ionisonauto el troscor la

# SONOGRAM REPORT

### WHOLE ABDOMEN

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

The gall bladder is normal sized and smooth walled and contains no calculus.

There is no intra or extra hepatic biliary ductal dilatation.

The pancreas shows a normal configuration and echotexture.

The pancreatic duct is normal.

The portal vein and the IVC are normal.

The spleen is normal.

There is no free or loculated peritoneal fluid.

The right kidney measures  $9.6 \times 3.9$  cm and shows calculus measuring 0.35 cm in the upper pole calyx.

The left kidney measures  $11.2 \times 4.3$  cm and shows calculus measuring 0.54 cm in the lower pole calyx.

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





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Age & Gender	41Y/FEMALE	Visit Date	03/12/2022
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There is no calyceal dilatation.

The ureters are not dilated.

The bladder is smooth walled and uniformly transonic.

There is no intravesical mass or calculus.

The uterus is anteverted, and measures 7.3 x 4.1 x 4.5 cm.

The endometrial thickness is 9.8 mm.

The right ovary measures 2.7 x 1.6 cm.

The left ovary measures 2.9 x 2.1 cm.

No significant mass or cyst is seen in the ovaries.

Parametria are free.

Iliac fossae are normal.

## **IMPRESSION:**

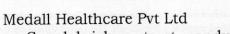
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Dr. Catherine

De Catherene

Consultant Sonologist.





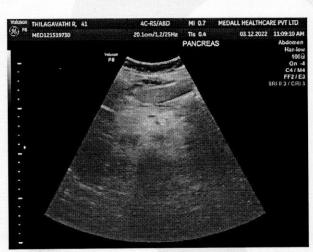
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DIAGNOSTICS
experts who care

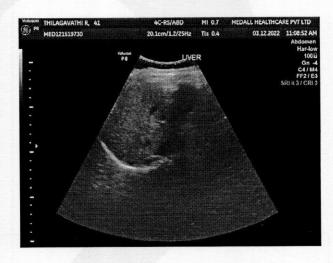
No; 26/15, Ground floor Gopalakrishna street pondy Bazaar, T.Nagar

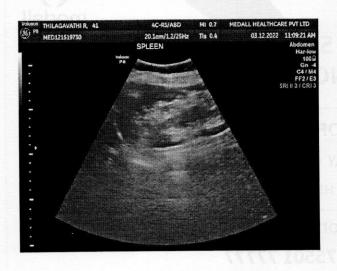
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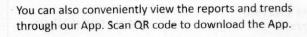




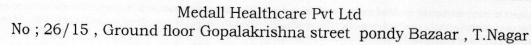






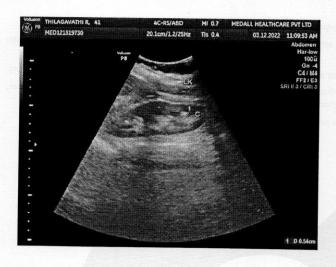


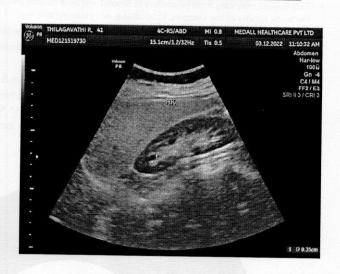




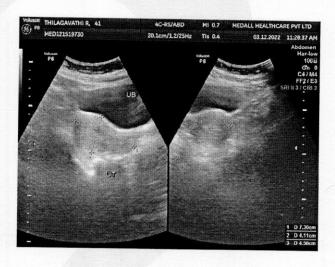


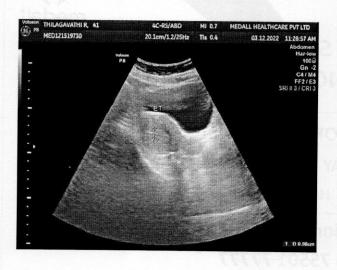
Name	MRS.THILAGAVATHI R	ID	WED101510500
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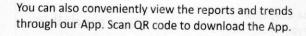




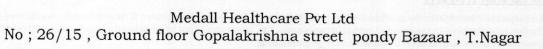






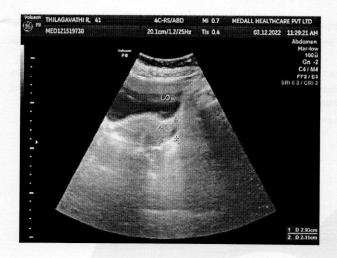








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Ref Doctor	MediWheel		00,11,101







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Age & Gender	41Y/F	Visit Date	Dec 3 2022 10:06AM
Ref Doctor	MediWheel	t was to grant or the backet	ili siti katilos ai pateigajaj el ajuora .

## X- RAY CHEST PA VIEW

Trachea appears normal.
Cardiothoracic ratio is within normal limits.
Bilateral lung fields appear normal.
Costo and cardiophrenic angles appear normal.
Visualised bony structures appear normal.
Extra thoracic soft tissues shadow grossly appears normal.

## **IMPRESSION:**

• Chest x-ray shows no significant abnormality.

DR. Anith Alfred J MBBS., MDRD., Consultant Radiologist



Female, 41 Years (01 01 1981)	1. 1981)					TAG HOUSE
surement Results OTcB 420 /	142 88 172 2 5 111 11		aUL AAA	Interpretation  R/S inversion area between UI and UZ probably normal ECG	. U1 and U2	No.2013&4, Gopalakrishnan Street. No.2013&4, Gopalakrishnan Street. No.2013&4, Gopalakrishnan Street.
PR PP PP 992 / 9 RR/PP 60/ 35/ QTD/QTCBD: 24 / Sokolow NK		111 +90 11 aur	II 0			Namal ECG
		) KR /		5 J	\$\\	
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111		AVE.		3.) 3.)	***	
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**Patient Details** 

Date: 03-Dec-22

Time:

1:01:19 PM

Name: MRS THILAGAVATHI R ID: MED121519730 Age: 41 y

Sex: F

Height: 150 cms.

Weight: 55 Kg.

Interpretation

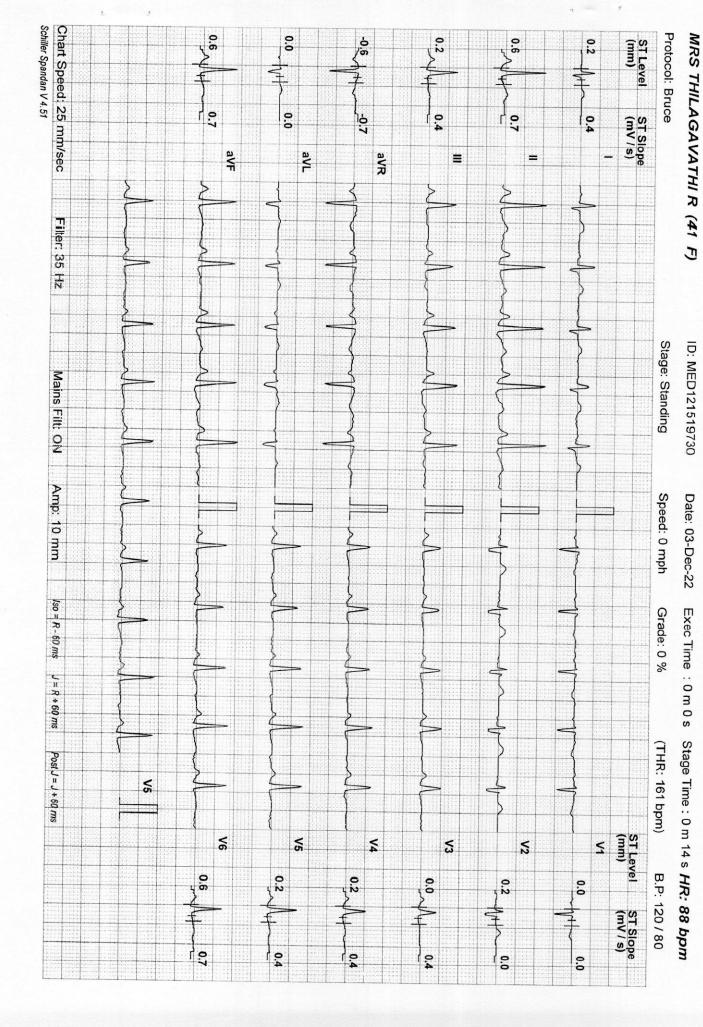
Negative for Induable Ischaemis and are Shirs

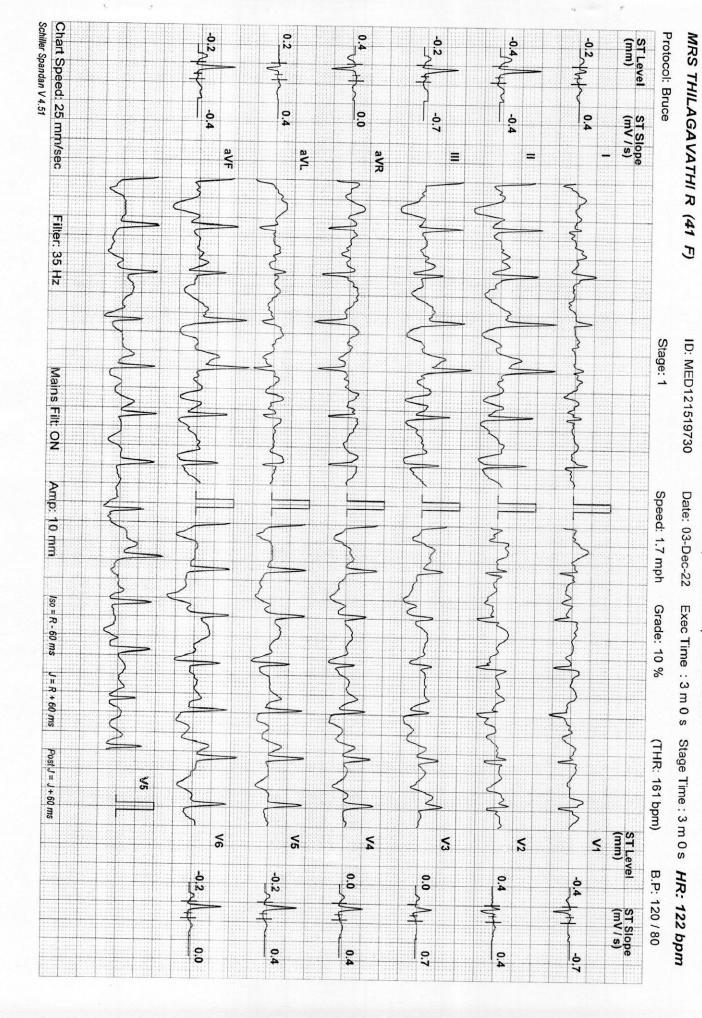
Prof. Dr. N. Subramanian Br. Consultant Cardiologist Rsq. No. 14878

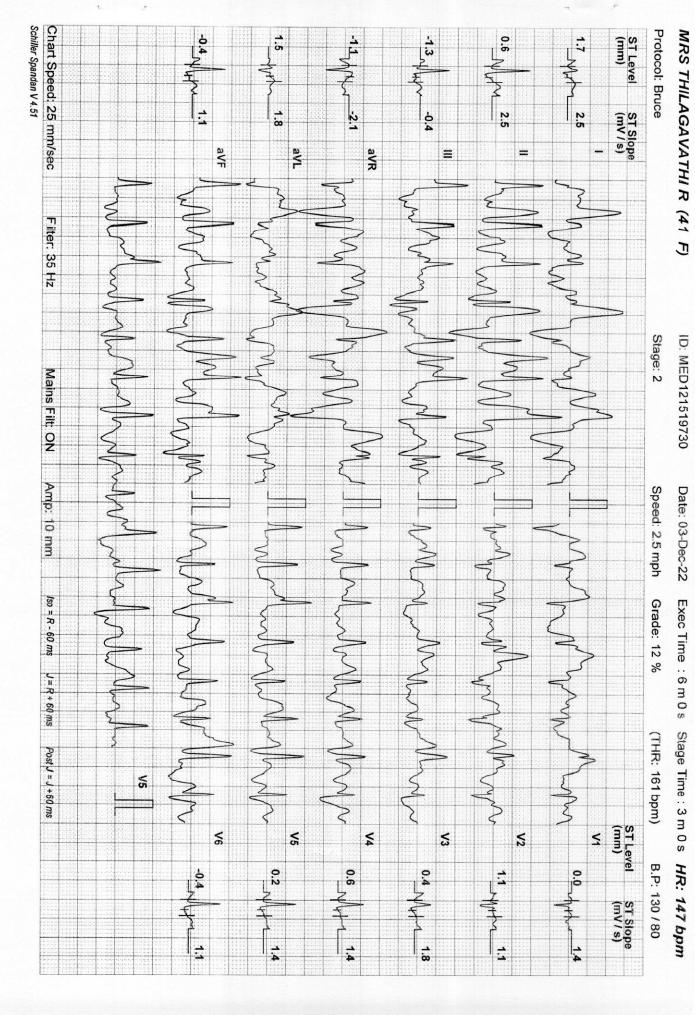
Ref. Doctor: MEDIWHEEL

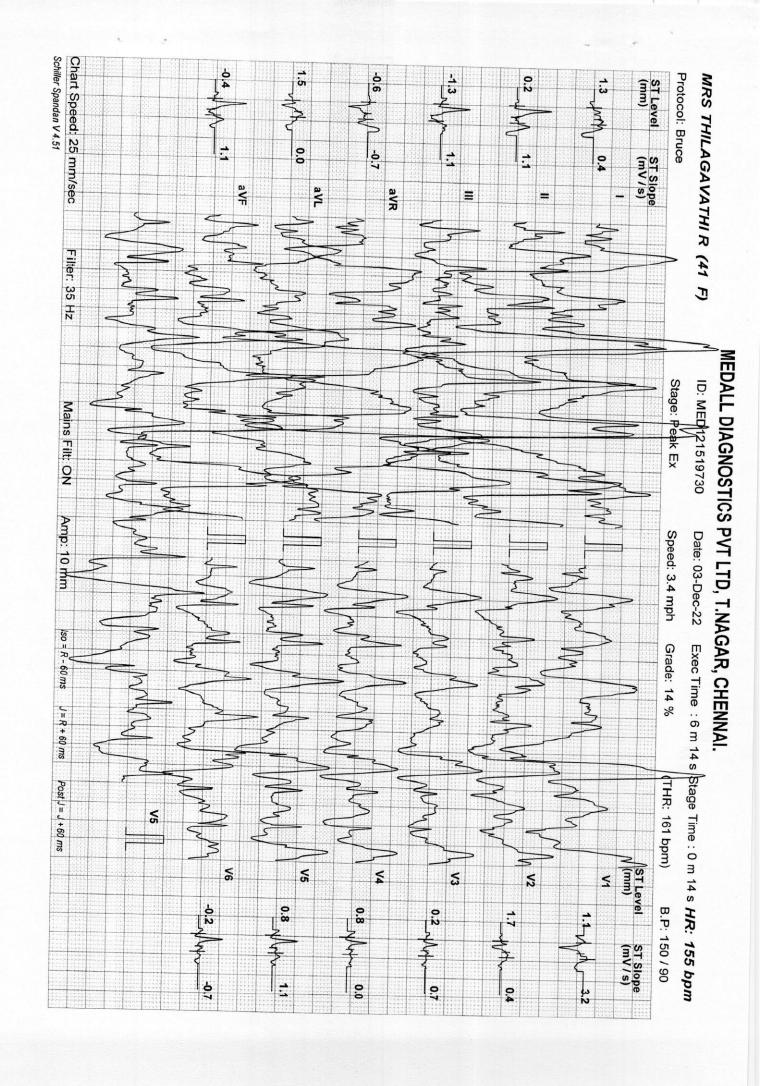
**Doctor: DR SUBRAMANIAN** 

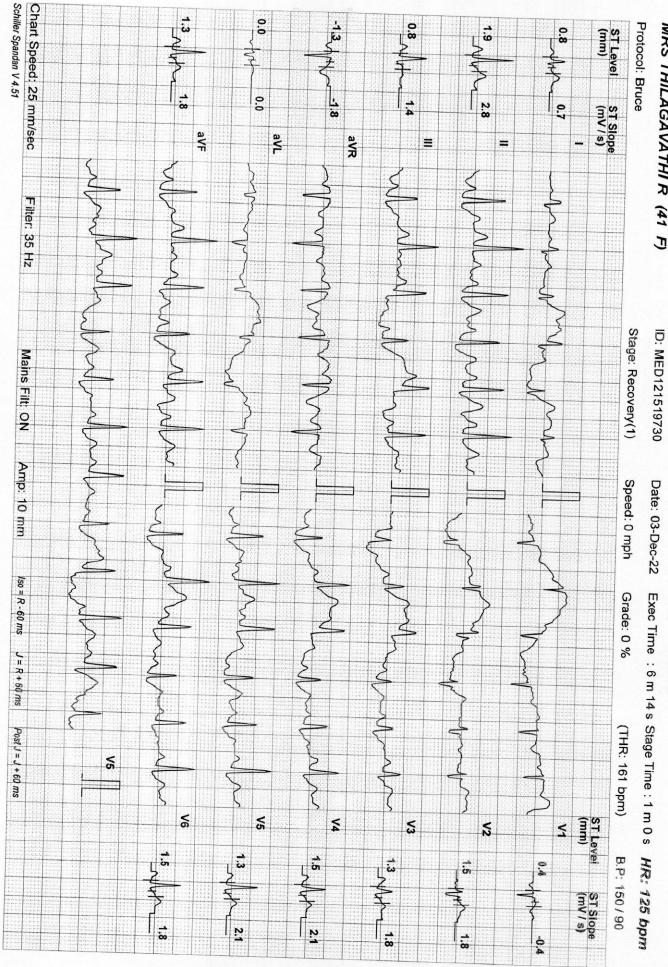
(Summary Report edited by user)

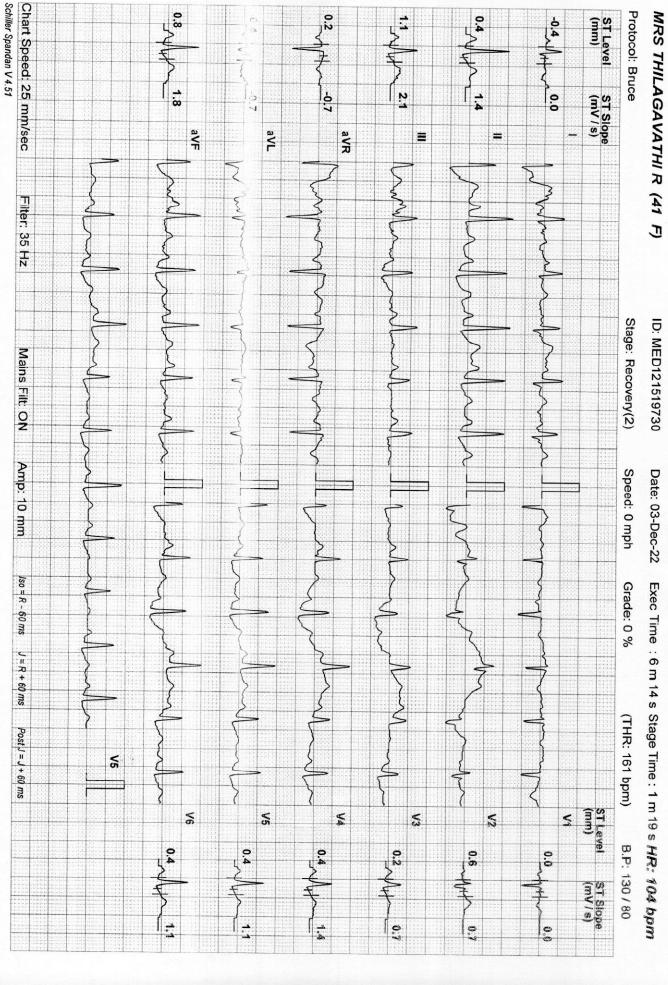












MRS THILAGAVATHIR (41 F) Stage: Recovery(3) ID: MED121519730 Date: 03-Dec-22 Exec Time: 6 m 14 s Stage Time: 0 m 59 s HR: 106 bpm Speed: 0 mph Grade: 0 % (THR: 161 bpm) ST Level B.P: 130 / 80 Test Report

