

- Consult for : Digital Dentistry • Fixed Teeth • RCT • Dental Implants • Gums Diseases • Dentures • Cosmetic Filling • Tooth Jewellery
- Digital OPG • Braces Treatment • Tooth Removal • Kids Dental Treatment • All Kind of Dental Surgeries

Mrs. Varsha Vaishnav  
39/F

23/12/23

P+ has come for routine dental checkup

O/E → PFM bridge = 2/1/1  
Ceramic crown = 6/1

RCO = 2/1

Occlusal fit carries = 1/6

Calculus +

Adv → dental prophylaxis  
restoration = 1/6

spcl



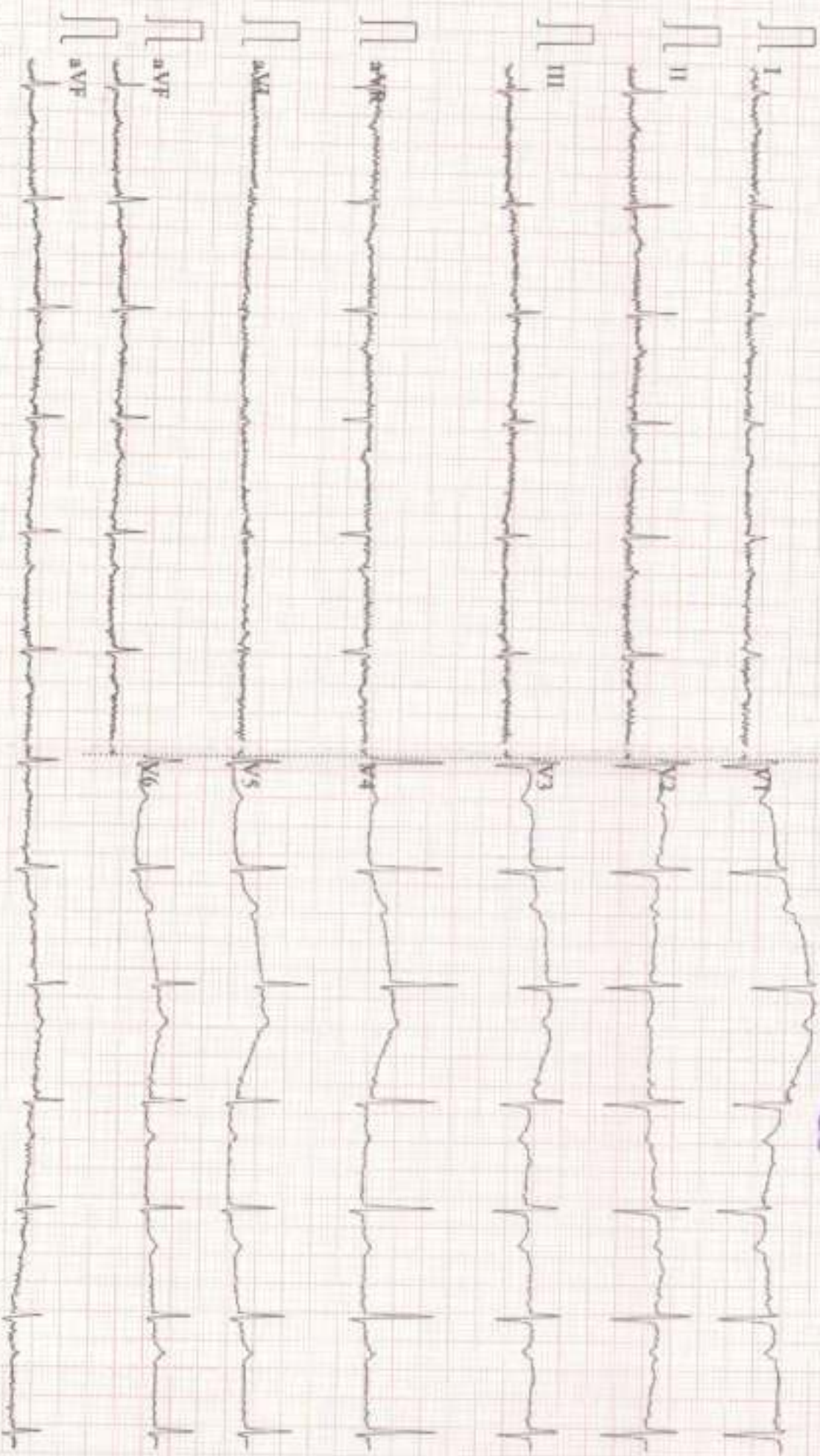
MRS VARSHA VAISHNAV

Female 39 Years

HR	: 74	bpm
P	: 86	ms
PR	: 126	ms
QRS	: 82	ms
QT/QTc	: 380/422	ms
P/QRS/T	: -72/50/15	°
RV5/SV1	: 0.80/0.929	mV

Diagnosis Information:  
 Possible ectopic atrial rhythm  
 Widespread T wave abnormality is borderline for age and gender  
 Borderline ECG

Report Confirmed by:



**EXAMINATION OF EYES :- ( BY OPHTHALMOLOGIST )**

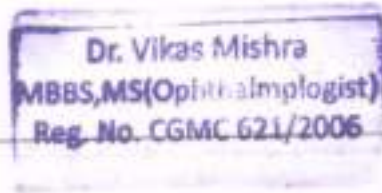
Patient Name Mrs. Vaasha Vaishnav

Date 23/11/23

Sex/Age f/39y MR No .....

Employee Id .....

<b>EXTERNAL EXAMINATION</b>				
SQUINT	NO			
NYSTAGMUS				
COLOUR VISION	NORMAL			
FUNDUS:(RE):-	wml	(LE):-	wml	
INDIVIDUAL COLOUR IDENTIFICATION	cloud			
DISTANT VISION:(RE):-	RC-5Mm 2/606		(LE):-	RC-5Mm 2/606
NEAR VISION:(RE):-	NG		(LE):-	NG
NIGHT BLINDNESS	NAD			
	SPH	CYL	AXIS	ADD
RIGHT	-4.0			
LEFT	-3.75			
REMARKS :-				



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 **+91 96918 26363**

 **0771 4033341/42**



PATIENT NAME: MRS. VARSHA VAISHNAV  
REF BY: BOB

AGE / SEX: 39YRS/F  
DATE: 23.12.2023

**USG ABDOMEN**

**Liver:** Liver is normal in size smooth in outline & echotexture. IHBR's are not dilated. CBD is not dilated. Portal vein and hepatic veins are normal.

**Gall bladder:** - Distended & normal.

**Pancreas & Paraaortic Region:** Normal.

**Spleen:** Is normal in size measures cm, and echotexture.

Kidneys	RIGHT	LEFT
SIZE	7.48X3.26Cm	8.41x3.65Cm
CORTICAL ECHOGENICITY	Normal	Normal
CORTICOMEDULLARY DIFFERENTIATION	Maintained	Maintained
PCS	Not Dilated	Not Dilated
Any other remarks	Nil	Nil

**Urinary bladder:** Distended & normal.

**Uterus** is normal in size ( 8.02 x 3.71 x 4.06 cm.) and echotexture. Endometrial thickness 4.5 mm.

**Right Ovary:** Normal in size ( 3.26 x 2.18 cm), shape and echotexture.

**Left Ovary:** Normal in size ( 1.99 x 2.58 cm), shape and echotexture.

No evidence of free fluid in abdomen or pelvis.

**IMPRESSION:**

**IMPRESSION:**

- USG abomen within normal limit.

Advised clinical correlation/further evaluation if clinically indicated.




DR. ANIL WASTI  
SONOLOGIST REG.NO. CGMC-1471

**NAME OF PATIENT: MRS. VARSHA VAISHNAV**

**AGE: 39YRS/FEMALE**

**REFERRED BY: BOB**

**DATE: 23/12/2023.**

**CHEST X - RAY PA VIEW**

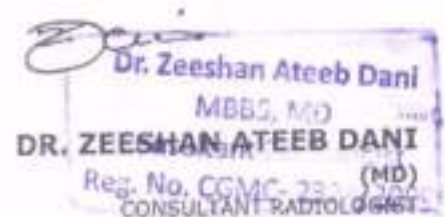
**FINDINGS:**

- Both the domes of diaphragm and CP angles are normal.
- Both the hila and mediastinum are normal.
- Both the lung fields are clear. No e/o focal parenchymal lesion.
- Cardio-thoracic ratio is normal.
- Soft tissues and bony cage are unremarkable.

**IMPRESSION:**

- **NO SIGNIFICANT ABNORMALITY SEEN.**

**Advised: Clinical correlation and further evaluation if clinically indicated.**



This report is for perusal of the doctor only not the doctor's responsibility. Findings have to be clinically correlated. This report is not for medico-legal purpose.

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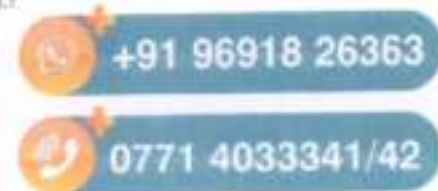
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Online appointments : www.askapollo.com | Online reports : http://pfr.apolloclinic.com



Patient Name : Mrs. VARSHA VAISHNAV	Collected : 23/Dec/2023 05:59PM
Age/Gender : 39 Y 0 M 0 D / F	Received : 23/Dec/2023 06:22PM
UHID/MR No : DSUS.0000005907	Reported : 23/Dec/2023 07:52PM
Visit ID : DSUSCPV6870	Status : Final Report
Ref Doctor : APOLLO CLINIC	Client Name : PUP APOLLO CLINIC SAMRIDHI AR
IP/OP NO :	Patient location : Raipur,Raipur

**DEPARTMENT OF IMMUNOLOGY**

Test Name	Result	Unit	Bio. Ref. Range	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOETHYRONINE (T3, TOTAL)	0.87	ng/mL	0.6-1.81	CLIA
THYROXINE (T4, TOTAL)	8.30	µg/dL	3.2-12.6	CLIA
THYROID STIMULATING HORMONE (TSH)	3.280	µIU/mL	0.35-5.5	CLIA

**Comment:**

For pregnant females	Bin Ref Range for TSH in µIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.1 - 3.0

1. TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
2. TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
3. Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
4. Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Replacement Therapy
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goiter, Thyrotoxicosis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes
High	High	High	High	Pituitary Adenoma, TSHoma/Thyrotropinoma

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

*Sandhya Verma*  
Dr. SANDHYA VERMA  
MBBS, MD (Pathology)

Consultant Pathologist

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**0771 4033341/42**



Patient Name	: Mrs. VARSHA VAISHNAV	Collected	: 23/Dec/2023 05:59PM
Age/Gender	: 39 Y 0 M 0 D F	Received	: 23/Dec/2023 06:22PM
UHID/MR No	: DSUS.0000005907	Reported	: 23/Dec/2023 07:52PM
Visit ID	: DSUSOPV6870	Status	: Final Report
Ref Doctor	: APOLLO CLINIC	Client Name	: PUP APOLLO CLINIC SAMRIDDI AR
IPIOP NO	:	Patient location	: Raipur, Raipur

**DEPARTMENT OF IMMUNOLOGY**

Test Name	Result	Unit	Bio. Ref. Range	Method
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+91 90057 25363  
0771 04354142

Patient Name : MRS VARSHA VAISHNAV  
 UHID/ MR No : 8207  
 Visit Date : 23/12/2023  
 Sample Collected On : 23/12/2023 03:48PM  
 Ref. Doctor : SELF  
 Sponsor Name :

Age/Gender : 39 Y Female  
 OP Visit No : OPD-UNIT-II-2  
 Reported On : 23/12/2023 05:47PM

### HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
<b>HEMOGRAM</b>			
Haemoglobin(HB) Method: CELL COUNTER	11.8	gm/dl	12 - 16
Erythrocyte (RBC) Count Method: CELL COUNTER	4.18	mill/cu.mm.	4.20 - 6.00
PCV (Packed Cell Volume) Method: CELL COUNTER	35.40	%	39 - 52
MCV (Mean Corpuscular Volume) Method: CELL COUNTER	84.7	fL	75.00 - 100
MCH (Mean Corpuscular Haemoglobin) Method: CELL COUNTER	28.2	pg	26 - 34
MCHC (Mean Corpuscular Hb Concn.) Method: CELL COUNTER	33.3	g/dl	32 - 35
RDW (Red Cell Distribution Width) Method: CELL COUNTER	13.3	%	11- 16
Total Leucocytes (WBC) Count Method: CELL COUNTER	4.46	cells/cumm	3.50 - 11.00
Neutrophils Method: CELL COUNTER	63	%	40.0 - 73.0
Lymphocytes Method: CELL COUNTER	28	%	15.0 - 45.0
Eosinophils Method: CELL COUNTER	01	%	1-6%
Monocytes Method: CELL COUNTER	08	%	4.0 - 12.0
Basophils Method: CELL COUNTER	00	%	0.0 - 2.0

**End of Report**  
 Results are to be correlated clinically

Lab Technician / Technologist  
 path

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 DR DHANANJAY RAMCHANDRA PRASAD  
 M.D. PATHOLOGY



Patient Name : MRS VARSHA VAISHNAV  
 UHID/ MR No : 8207  
 Visit Date : 23/12/2023  
 Sample Collected On : 23/12/2023 03:48PM  
 Ref. Doctor : SELF  
 Sponsor Name :

Age/Gender : 39 Y. Female  
 OP Visit No : OPD-UNIT-II-  
 Reported On : 23/12/2023 05:47PM

### HAEMATOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
Platelet Count Method: CELL COUNTER	205	lacs/cu.mm	150-400
ESR- Erythrocyte Sedimentation Rate Method: Westergren's Method	20	mm /HR	0 - 20
<b>Blood Group (ABO Typing)</b>			
Blood Group (ABO Typing)	O		
RhD factor (Rh Typing)	POSITIVE		

**End of Report**  
*Results are to be correlated clinically*

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 DR DHANANJAY RAMCHANDRA PRASAD  
 M.D. PATHOLOGY

Patient Name : MRS VARSHA VAISHNAV  
UHID/ MR No : 8207  
Visit Date : 23/12/2023  
Sample Collected On : 23/12/2023 03:48PM  
Ref. Doctor : SELF  
Sponsor Name :

Age/Gender : 39 Y Female  
OP Visit No : OPD-UNIT-II-3  
Reported On : 23/12/2023 05:47PM

### BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
HbA1c (Glycosalated Haemoglobin)	5.6	%	Non-diabetic: ≤5.6, Pre-Diabetic 5.7-6.4, Diabetic: ≥6.5

1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
2. HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflam

1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
2. HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
5. To estimate the eAG from the HbA1C value, the following equation is used:  $eAG(mg/dl) = 28.7 * A1c - 46.7$
6. Interference of Haemoglobinopathies in HbA1c estimation.
  - A. For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
  - B. Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
  - C. Heterozygous state defe

**End of Report**  
*Results are to be correlated clinically*

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M.D. PATHOLOGY

Patient Name : MRS VARSHA VAISHNAV  
 UHID/ MR No : 8207  
 Visit Date : 23/12/2023  
 Sample Collected On : 23/12/2023 03:48PM  
 Ref. Doctor : SELF  
 Sponsor Name :

Age/Gender : 39 Y. Female  
 OP Visit No : OPD-UNIT-II-2  
 Reported On : 23/12/2023 05:47PM


### BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
<b>GLUCOSE - (POST PRANDIAL)</b>			
Glucose -Post prandial Method: REAGENT GRADE WATER	109.0	mg/dl	70-140
<b>GLUCOSE (FASTING)</b>			
Glucose- Fasting SUGAR REAGENT GRADE WATER	84.0	mg/dl	70 - 120
<b>KFT - RENAL PROFILE - SERUM</b>			
BUN-Blood Urea Nitrogen METHOD: Spectrophotometric	08	mg/dl	7 - 20
Creatinine METHOD: Spectrophotometric	0.82	mg/dl	0.6-1.4
Uric Acid Method: Spectrophotometric	3.6	mg/dL	2.6 - 7.2

**End of Report**  
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Patient Name : MRS VARSHA VAISHNAV  
UHID/ MR No : 8207  
Visit Date : 23/12/2023  
Sample Collected On : 23/12/2023 03:48PM  
Ref. Doctor : SELF  
Sponsor Name :

Age/Gender : 39 Y Female  
OP Visit No : OPD-UNIT-II-2  
Reported On : 23/12/2023 05:47PM

### BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
<b>LIPID PROFILE TEST (PACKAGE)</b>			
Cholesterol - Total	121.0	mg/dl	Desirable: < 200 Borderline High: 200-239 High: ≥ 240
Triglycerides level	73.0	mg/dl	Normal : < 150 Borderline High : 150-199 Very High : ≥ 500
Method: Spectrophotometric HDL Cholesterol	44.0	mg/dl	Major risk factor for heart disease: < 40 Negative risk factor for heart disease : > 60
Method: Spectrophotometric LDL Cholesterol	62.40	mg/dl	Optimal: < 100      Near Optimal : 100 – 129 Borderline High : 130-159 High : 160-189      Very HiOptimal: < 100      Near Optimal : 100 – 129 Borderline High : 130-159 High : 160-189      Very High >=1
Method: Spectrophotometric VLDL Cholesterol	14.60	mg/dl	6 - 38
Total Cholesterol/HDL Ratio	2.75		3.5 - 5
Method: Spectrophotometric			

**End of Report**

*Results are to be correlated clinically*

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DR DHANANJAY RAMCHANDRA PRASAD  
M.D. PATHOLOGY

Patient Name : MRS VARSHA VAISHNAV  
 UHID/ MR No : 8207  
 Visit Date : 23/12/2023  
 Sample Collected On : 23/12/2023 03:48PM  
 Ref. Doctor : SELF  
 Sponsor Name :

Age/Gender : 39 Y Female  
 OP Visit No : OPD-UNIT-II-5  
 Reported On : 23/12/2023 05:47PM

### BIO CHEMISTRY

Investigation	Observed Value	Unit	Biological Reference Interval
<b>LIVER FUNCTION TEST</b>			
<b>Bilirubin - Total</b> Method: Spectrophotometric	0.7	mg/dl	0.1-1.2
<b>Bilirubin - Direct</b> Method: Spectrophotometric	0.2	mg/dl	0.05-0.3
<b>Bilirubin (Indirect)</b> Method: Calculated	0.50	mg/dl	0 - 1
<b>SGOT (AST)</b> Method: Spectrophotometric	22	U/L	0 - 32
<b>SGPT (ALT)</b> Method: Spectrophotometric	26	U/L	0 - 33
<b>ALKALINE PHOSPHATASE</b>	75	U/L	25-147
<b>Total Proteins</b> Method: Spectrophotometric	6.7	g/dl	6 - 8
<b>Albumin</b> Method: Spectrophotometric	4.5	mg/dl	3.4 - 5.0
<b>Globulin</b> Method: Calculated	2.2	g/dl	1.8 - 3.6
<b>A/G Ratio</b> Method: Calculated	2.0	%	1.1 - 2.2

**End of Report**  
*Results are to be correlated clinically*

Lab Technician / Technologist  
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*(Signature)*  
 DR DHANANJAY RAMCHANDRA PRASAD  
 M.D. PATHOLOGY

Patient Name : MRS VARSHA VAISHNAV  
 UHID/ MR No : 8207  
 Visit Date : 23/12/2023  
 Sample Collected On : 23/12/2023 03:48PM  
 Ref. Doctor : SELF  
 Sponsor Name :

Age/Gender : 39 Y. Female  
 OP Visit No : OPD-UNIT-II-2  
 Reported On : 23/12/2023 05:47PM

### CLINICAL PATHOLOGY

Investigation	Observed Value	Unit	Biological Reference Interval
<b>URINE ROUTINE EXAMINATION</b>			
<b>Physical Examination</b>			
Volum of urine	30ML		
Appearance	Clear		Clear
Colour	Pale Yellow		Colourless
Specific Gravity	1.015		1.001 - 1.030
Reaction (pH)	5.0		
<b>Chemical Examination</b>			
Protein(Albumin) Urine	Absent		Absent
Glucose(Sugar) Urine	Absent		Absent
Blood	Absent		Absent
Leukocytes	Absent		Absent
Ketone Urine	Absent		Absent
Bilirubin Urine	Absent		Absent
Urobilinogen	Absent		Absent
Nitrite (Urine)	Absent		Absent
<b>Microscopic Examination</b>			
RBC (Urine)	0-1	/hpf	0 - 2
Pus cells	4-6	/hpf	0 - 5
Epithelial Cell	2-4	/hpf	0 - 5
Crystals	Not Seen	/hpf	Not Seen
Bacteria	Not Seen	/hpf	Not Seen
Budding yeast	Not Seen	/hpf	

**End of Report**  
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 path

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 DR DHANANJAY RAMCHANDRA PRASAD  
 M.D. PATHOLOGY





S / MRS VARSHA VAISHNAV / 39 Yrs / F / 143 Cms / 35 Kg

Date: 23 / 12 / 2023

Stage	Time	Duration	Speed/Weight	Elevation	METS	Rate	% THR	BP	PPV	PVC	Comments
E-Start	00:24	0:24	00.0	00.0	01.0	089	49 %	100/70	089	00	
BRUCE Stage 1	00:24	0:00	02.7	10.0	04.7	111	61 %	110/74	122	00	
BRUCE Stage 2	06:24	3:00	04.0	12.0	07.1	129	71 %	118/78	152	00	
PeakEX	07:00	0:44	05.5	14.0	07.9	145	80 %	118/78	171	00	
Recovery	07:38	0:32	00.8	00.0	04.2	128	71 %	119/78	151	00	
Recovery	08:08	1:00	00.0	00.0	01.2	120	59 %	120/80	144	00	
Recovery	08:29	1:21	00.0	00.0	01.0	105	58 %	120/90	125	00	

**FINDINGS :**

Exercise Time : 06:44  
 Max HR Attained : 145 bpm (80% of Target 181)  
 Max BP Attained : 120/80 (mmHg)  
 Max Workload Attained : 7.9 Fair response to induced stress  
 Test End Reasons : Test Complete, Heart Rate Achieved

**REPORT :**

STRESS TEST IS NEGATIVE FOR REVERSIBLE MYOCARDIAL ISCHEMIA WITH FAIR FUNCTION CAPACITY



Doctor : DR DEEPA DAS MBBS DIP CARDIO



8 / MRS VARSHA VAISHNAV / 39 Yrs / F / 143 Cms / 35 Kg / HR : 89

Date: 23 / 12 / 2023

NETS: 1.0V/100mm 49% of IIR BP: 100/70 mmHg Combined Meds: BL-C-OP/NOCT-OP HR: 0.05 TRULIF 35 - HR

4X 80 mm Post J

ExTime: 00:00 0.0 Kmph, 0.0% 25 mm/Sec, 1.0 Cm/mV

ExStart



V2  
-0.2



I  
0.1  
0.1  
0.2



II  
0.0  
0.1



III  
0.1  
0.1  
0.3



aVR  
0.0  
0.0



aVL  
0.1  
0.2



aVF  
0.0  
0.2



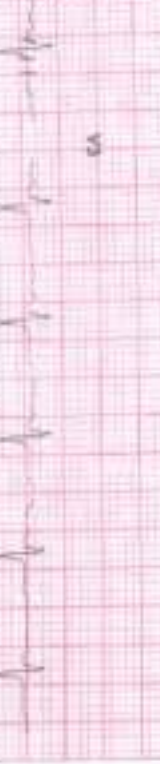
V1  
0.2  
0.0



V2  
0.2  
0.2



V3  
0.1  
0.1  
0.1



V4  
0.2  
0.2  
0.1



V5  
0.1  
0.1  
0.0



V6  
0.3  
0.3  
0.0



REMARKS:

I aVR aVL V1 V3 V5  
II aVF aVF V2 V4 V6



B / MRS VARSHA VAISHNAV / 39 Yrs / F / 143 Cms / 35 Kg / HR : 111

BRUCE: Stage 1(3:00)



Date: 23 / 12 / 2023

MEIS: 4.7 / 111 bpm 81% of THR BP: 110/74 mmHg Combined Mediana/ SLC/Dr Mohan Chandra 0.05 HALF 25 1IC

Estimate: 03:00 2.7 Kmph, 10.0%  
25 mm/Sec, 1.0 Cal/cmV

4X 80 ms Punal J



REMARKS: I II aVR aVL aVF V1 V2 V3 V4 V5 V6



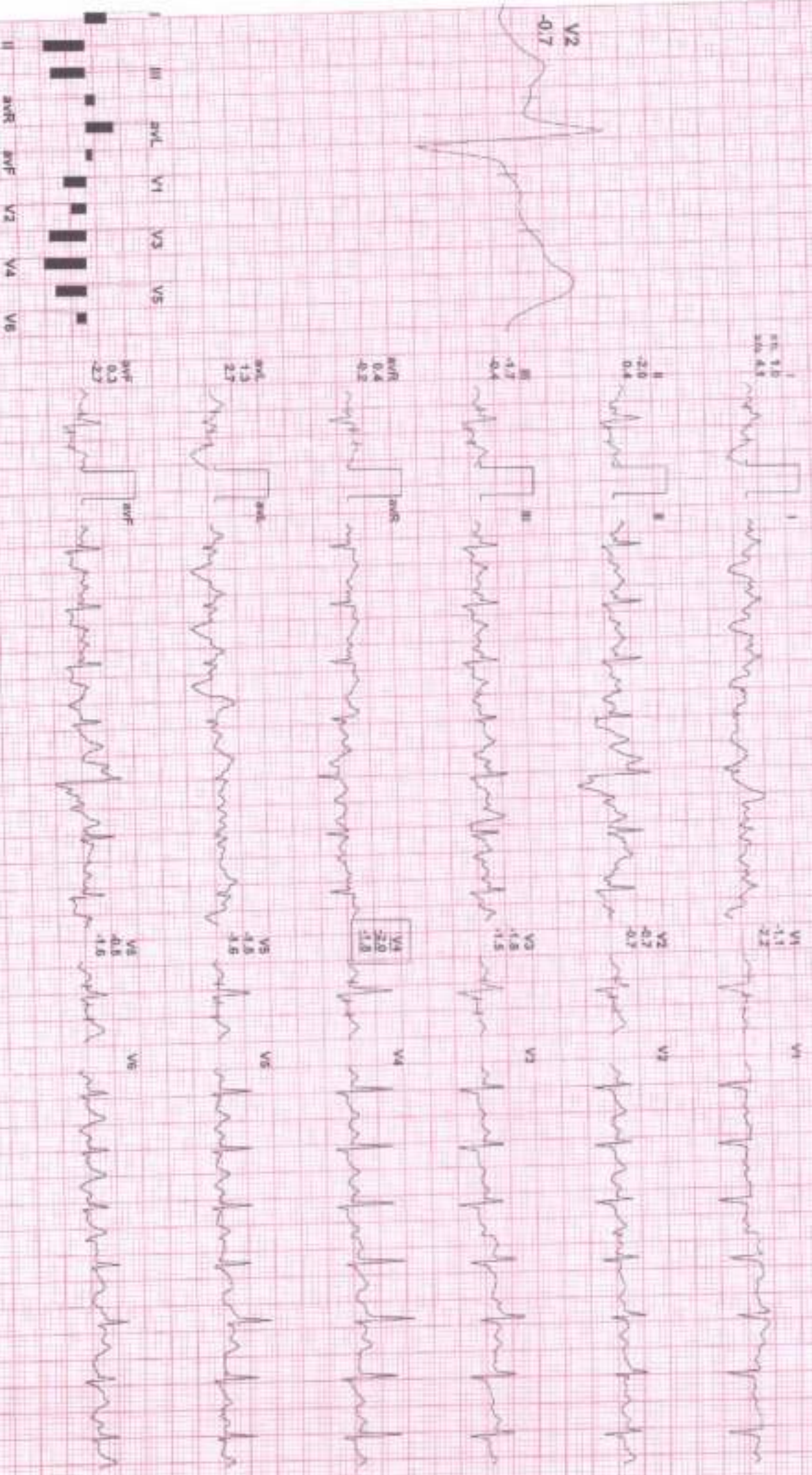


B / MRS VARSHA VAISHNAV / 39 Yrs / F / 143 Cms / 35 Kg / HR : 129

Date: 23 / 12 / 2023 METS: 7.11 120 bpm 11% of THR BP: 118/78 mmHg Combined Meds: BLC DIV NADIV DIV HF: 625 mgL 35 Hz

4X 100 mB Ppm V

ExTime: 06:00 4.0 XmpH, 12.0%  
25 minSec, 1.0 Cal/mV



REMARKS:



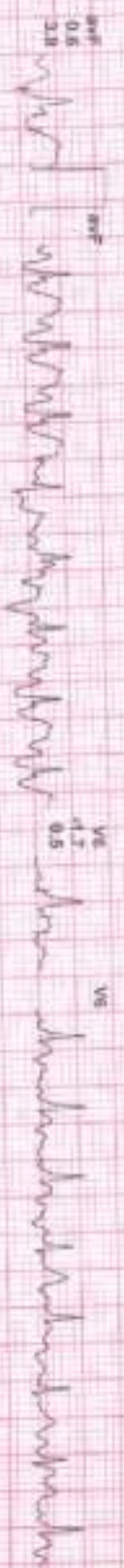
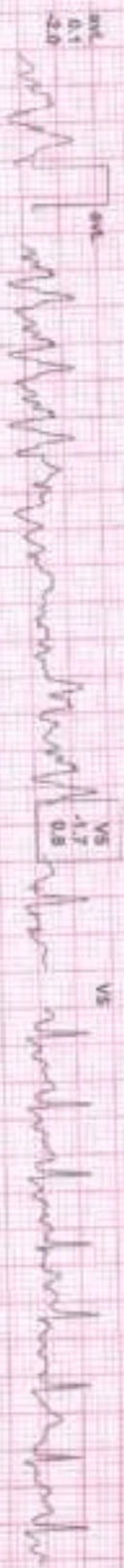
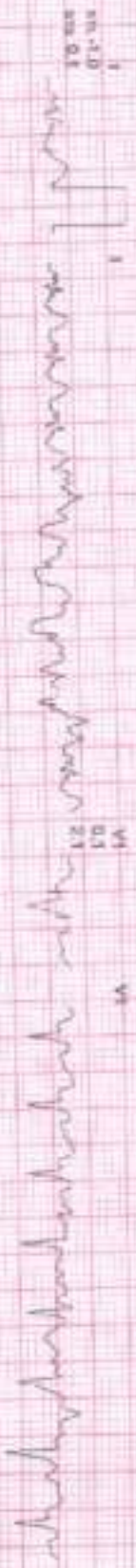
B / MRS VARSHA VAISHNAV / 39 Yrs / F / 143 Cms / 35 Kg / HR : 145

Date: 23 / 12 / 2023

NETS: I w 145 bpm 80% of THR BP-110/78 mmHg Combined Medicines: B/C One Month One HF 0.05 HELLF 35 HC

ExTime: 08:44 5.5 Km/h 14.0%  
25 mm/Sec 1.0 Cm/mV

AX 62 mgb Host J



REMARKS:

PeaKEx





B / MRS VARSHA VAISHNAV / 39 Yrs / F / 143 Cms / 35 Kg / HR : 128

Date: 23 / 12 / 2023 METTS: 4.2/ 128 bpm 74% of THP BP: 115/78 mmHg Combined Medicines/ BLC On/ Noct/ Olig/ HF: 0.05 H2O/L 35 HR

4X 60 mg Phos J

ExTime: 06:44 0.8 Km/h, 0.0%  
25 mm/Sec 1.2 CM/Div

Recovery(0:30)



REMARKS: I II aVR aVL V1 V2 V3 V4 V5 V6



B / MRS VARSHA VAISHNAV / 39 YRS / F / 143 Cms / 35 Kg / HR : 120

Date: 23 / 12 / 2023 METS: 1.2 / 130 bpm 66% of THR BP: 120/80 mmHg Combined Medicines: Dig Cn 1000gm Cnr Hr: 0.05 85xLF 35 Mg

AX 80 mm Paper 3 ExtTime: 05:44 0.0 Knop: 0.0% 25 mm/Sec: 1.0 Channel



REMARKS:

Recovery(1:00)

ADPR



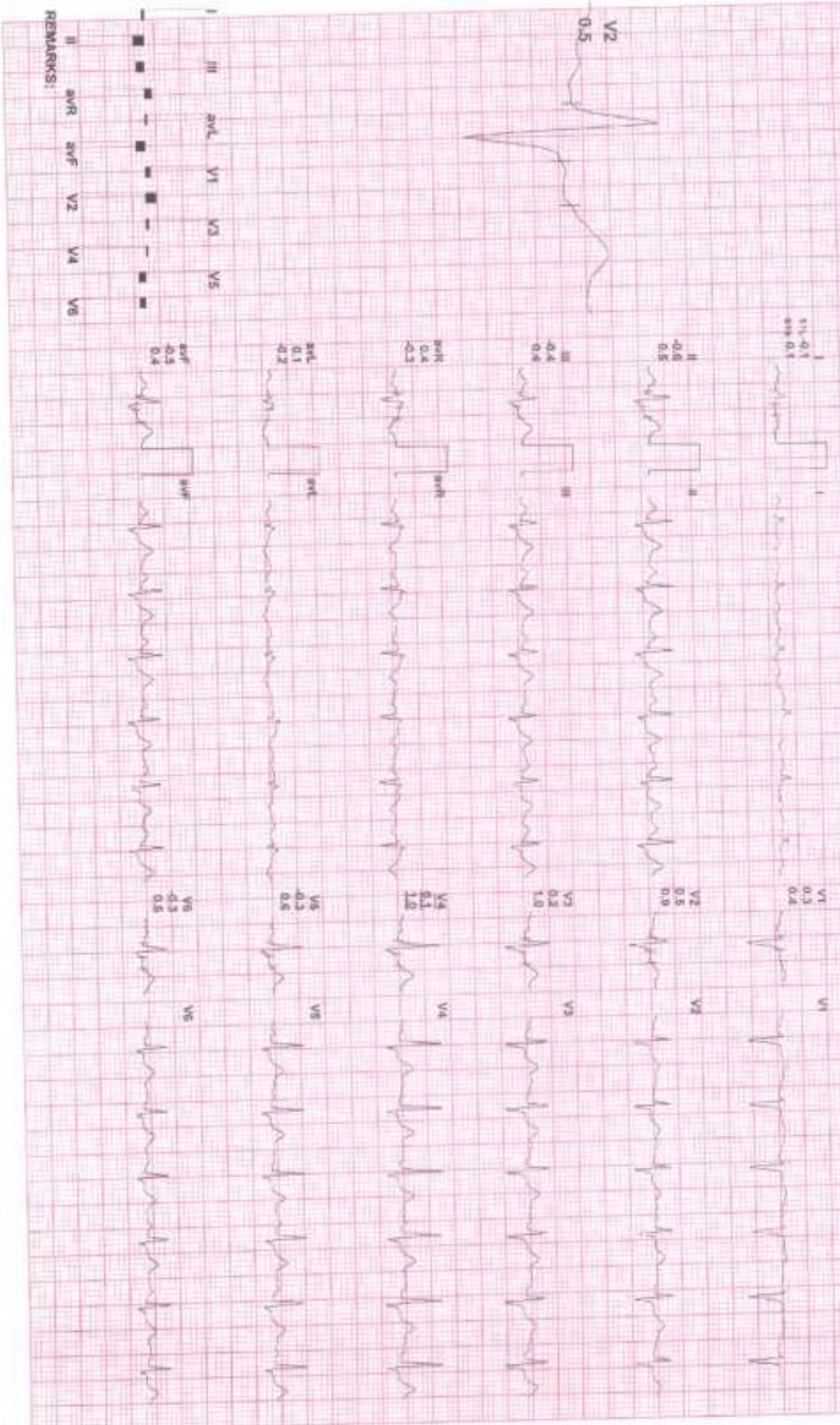
8 / MRS VARSHA VAISHNAV / 39 Yrs / F / 143 Cms / 35 Kg / HR : 105

Date: 23/12/2023 METS: 1.0/ 105 bpm 58% of THR BP: 120/80 mmHg Combined Medication/BLD Clr Notch Qrs HF: 0.03 Hs/LF: 35 Hz

4X 80 m/s Post J

ExTime: 06:44 0.0 Km/ph 0.0%  
25 mm/Sec 1.0 Cm/mV

Recovery(1:21)



REMARKS: I II aVR aVL aVF V1 V2 V3 V4 V5 V6