


 शासक संस्थान  
 Government of India


 शंकर लाल  
 Shanker Lal  
 जन्म तिथि/DOB: 10/12/1977  
 लिंग/ GENDER: MALE

3541 2187 3036  
 VID: 9152 4999 7278 3102

मेरा आधार, मेरी पहचान

*Shankar Lal*

9785713379

शासक संस्थान  
 Government of India

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 VID: 9152 4999 7278 3102

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शासक संस्थान  
 Government of India

*Shankar Lal*

Rajasthani Diagnostic &  
 Medical Research Centre  
 Jhunjhunu





# RAJASTHANI DIAGNOSTIC & MR CENTRE

FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI

CT SCAN

TMT

SONOGRAPHY

X-RAY

ECG

MAMOGRAPHY

NAME	SHANKER LAL	AGE-	SEX: M
REF/BY:	BOB HEALTH CHECKUP	DATE	15-Nov-24

## ULTRASONOGRAPHY WHOLE ABDOMEN

**Liver:** is normal in size, shape and mild bright echotexture. No IHBR dilatation is seen. No focal mass seen. Portal vein and hepatic veins are normal in diameter. Common bile duct is normal in diameter and lumen is clear.

**Gall bladder:** is normal in size, shape, location with echo free lumen. Wall thickness is normal. No echogenic shadow suggestive of calculus is seen. No focal mass or lesion is seen.

**Pancreas:** is normal in size, shape and echotexture. No focal mass or lesion is detected. Pancreatic duct is not dilated.

**Rt. Kidney:** is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

**Lt. Kidney:** is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

**Spleen:** is normal in size, regular in shape and echo texture. No focal lesion is seen. Splenic vessels are normal.

**Urinary Bladder:** is well distended. Outline of bladder is regular. Wall thickness is normal. No focal mass is seen. No echogenic shadow suggestive of calculus is seen.

**Prostate:** is normal in size 23 gm, regular in shape and outline. Capsule is intact.

No evidence of ascites is seen. No significant Lymphadenopathy is seen. No obvious bowel pathology is seen. Retroperitoneum including aorta, IVC are unremarkable.

### IMPRESSION:

- ❖ Grade I fatty liver.

Advised: clinicopathological correlation

*Dr. Nirmala Royal*  
DR. NIRMALA ROYAL  
MD RADIODIAGNOSIS

Dr. Nirmala Royal  
MD (Radiodiagnosis)  
RMC 32422/24686



THIS REPORT IS NOT VALID FOR MEDICO LEGAL PURPOSE





# RAJASTHANI DIAGNOSTIC & MR CENTRE

FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI

CT SCAN

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ECG

MAMOGRAPHY

Patient Name	SHANKAR LAL	Patient ID	
Age	47 YRS	Date	15-Nov-24
Gender	M	Ref.Doctor	SELF

## X RAY CHEST (PA VIEW)

### FINDINGS:

Prominent bronchovascular markings bilaterally.

The lungs are well-expanded with no pulmonary infiltrate or pleural effusion.

The cardiomeastinal silhouette is within normal limits.

No acute osseous abnormality.

### IMPRESSION:

- Prominent bronchovascular markings bilaterally- seen in bronchitis.
- No active infective aetiology.

*Nirma*  
Dr. Nirmala Royal  
MD (Radiodiagnosis)  
RMC - 32422/24686

*Note - Please correlate the measurements on the typed report with the image and in case of any discrepancy/doubt, please contact us immediately. There is only a professional opinion and should be correlated clinically. No valid for medico-legal purpose.*

Dr. Nirmala Royal  
MD (Radiodiagnosis)  
RMC 32422/24686



24/7  
EMERGENCY SERVICE

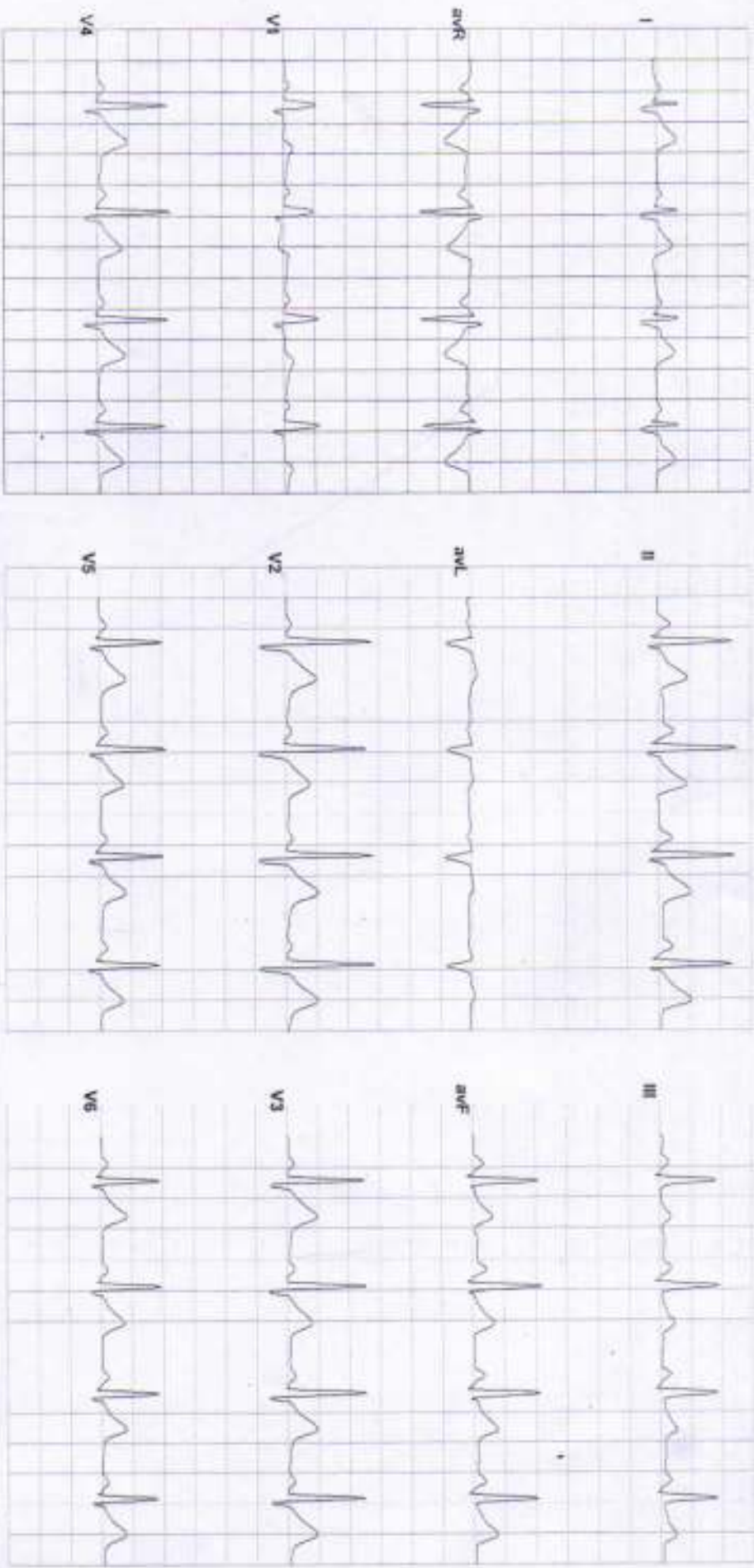
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# RAJASTHANI DIAG. & MR CENTRE, JHUNJHUNU

ECG

41 / SHANKER LAL / 47 Yrs / M / 166Cms. / 51Kgs. / Non Smoker  
Heart Rate : 84 bpm / Tested On : 15-Nov-24 11:17:50 / HF 0.05 Hz - LF 35 Hz / Notch 50 Hz / Sn 1.00 Cm/mV / Sw 25 mm/s  
/ Ref'd By: BOB HEALTH CHECK UP



Heart Rate : 84 bpm  
PR Interval : 124 ms  
QRS Duration: 92 ms  
QT/QTc Int : 364/406 ms  
P-QRS-T axis: 72.00° 85.00° 58.00°



Axis  
R 85.00° T 58.00° P 72.00°

*[Handwritten Signature]*



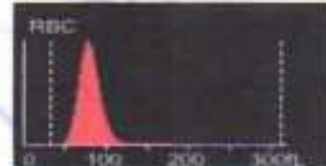
### Hematology Analysis Report

First Name: SHANKER LAL  
Last Name:  
Gender: Male  
Age: 46 Year

Sample Type:  
Department:  
Med Rec. No.:

Sample ID: 6  
Test Time: 15/11/2024 10:07  
Diagnosis:

Parameter	Result	Ref. Range	Unit
1 WBC	6.96	4.00-10.00	10 <sup>3</sup> /uL
2 Neu%	44.5 L	50.0-70.0	%
3 Lym%	45.9 H	20.0-40.0	%
4 Mon%	8.0	3.0-12.0	%
5 Eos%	1.1	0.5-5.0	%
6 Bas%	0.5	0.0-1.0	%
7 Neu#	3.10	2.00-7.00	10 <sup>3</sup> /uL
8 Lym#	3.19	0.80-4.00	10 <sup>3</sup> /uL
9 Mon#	0.56	0.12-1.20	10 <sup>3</sup> /uL
10 Eos#	0.08	0.02-0.50	10 <sup>3</sup> /uL
11 Bas#	0.03	0.00-0.10	10 <sup>3</sup> /uL
12 RBC	4.77	3.50-5.50	10 <sup>6</sup> /uL
13 HGB	11.6	11.0-16.0	g/dL
14 HCT	40.6	37.0-54.0	%
15 MCV	85.1	80.0-100.0	fL
16 MCH	24.3 L	27.0-34.0	pg
17 MCHC	28.6 L	32.0-36.0	g/dL
18 RDW-CV	13.0	11.0-16.0	%
19 RDW-SD	45.4	35.0-56.0	fL
20 PLT	114	100-300	10 <sup>3</sup> /uL
21 MPV	12.3 H	6.5-12.0	fL
22 PDW	24.9 H	9.0-17.0	%
23 PCT	0.141	0.108-0.282	%
24 P-LCR	52.6 H	11.0-45.0	%
25 P-LCC	60	30-90	10 <sup>3</sup> /uL



Dr. Mamta Khuteta  
M.D. (Path.)  
RMC No. : 4720/16260

Submitter: Operator: admin Approver:  
Draw Time: 15/11/2024 10:06 Received Time: 15/11/2024 10:06 Validated Time:  
Report Time: 15/11/2024 16:44 Remarks:

\*The Report is responsible for this sample only. If you have any questions, please contact us in 24 hours



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# RAJASTHANI DIAGNOSTIC & MRI CENTRE



FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO.  
MC-5346

Patient Name: <b>SHANKER LAL</b> Sr. No. : 15701 Patient ID No.: 11792 Age : 46 Gender : <b>MALE</b> Ref. By Dr : <b>MEDI-WHEEL HEALTH CHECKUP</b>		Registered on : 15-11-2024 11:04 AM Collected On : 15-11-2024 11:04 AM Received On : 15-11-2024 11:04 AM Reported On : 15-11-2024 04:55 PM Bar Code  LIS Number 7 0 0 0 0
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## LIPID PROFILE COMPLETE

Test Name	Observed Values	Units	Reference Intervals
Cholesterol <small>(Method: CHOD-PAP)</small>	164.00	mg/dL	Adults- Desirable: <200 Borderline: 200-239 High: >239 Children- Desirable: <170 Borderline: 170-199 High: >199
HDL Cholesterol	48.00	mg/dL	35-88
Triglycerides <small>(Method: GPO)</small>	104.00	mg/dL	Recommended triglycerides levels for adults: Normal: <161 High: 161-199 Hypertriglyceridemic: 200-499 Very high: >499
LDL Cholesterol	95.20	mg/dL	0-150
VLDL Cholesterol	20.80	mg/dL	0-35
TC/HDL Cholesterol Ratio	3.42	Ratio	2.5-5
LDL/HDL Ratio	1.98	Ratio	1.5-3.5

## HAEMATOLOGY

Test Name	Observed Values	Units	Reference Intervals
ESR (Erythrocyte Sedimentation Rate)	15	mm/hr	20
BLOOD GROUPING (ABO & Rh )	B+ Positive		

*Ashish Sethi*

Dr. Ashish Sethi  
Consultant Biochemist

*Medi Wheel*  
Health Checkup



PATHOLOGIST



PATHOLOGIST

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**B-110, Indra Nagar, Jhunjhunu (Raj.) Ph. No. 01592-294977**



# RAJASTHANI DIAGNOSTIC & MRI CENTRE



FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO. MC-5346

Patient Name: SHANKER LAL  
Sr. No. : 15701  
Patient ID No.: 11792  
Age : 46 Gender : MALE  
Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP



Registered on : 15-11-2024 11:04 AM  
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Bar Code  
LIS Number 7 6 0 0

## HAEMATOLOGY

### HbA1c(Glycosylated hemoglobin)

Test Name	Observed Values	Units	Reference Intervals
HbA1c(Glycosylated hemoglobin)	5.20	%	< 6.50 Non-Diabetic 6.50 - 7.00 Very Good Control 7.10 - 8.00 Adequate Control 8.10 - 9.00 Suboptimal Control 9.30 - 10.00 Diabetic Poor Control > 10.00 Very Poor Control
eAG (Estimated Average Glucose)	102.54	mg/dL	
eAG (Estimated Average Glucose)	5.69	mmol/L	

Method : Fluorescence Immunoassay Technology

Sample Type : EDTA Blood

Test Performed by:-

Fully Automated (EM 200 ) ERBA MANNHEIM.

#### Remarks :

Glycosylated Hemoglobin Testing is Recommended for both (a) Checking Blood Sugar Control in People who might be Pre-Diabetic, (b) Monitoring Blood Sugar Control in patients in more elevated levels, termed Diabetes Mellitus. The American Diabetic Association suggests that the Glycosylated Hemoglobin Test be Performed atleast Two Times in Year in Patients with Diabetes that are meeting Treatment Goals (and That have stable glycemic Control) and Quarterly in Patients with Diabetes whos therapy has changed or that are not meeting Glycemic Goals.

Glycosylated Hemoglobin measurement is not appropriate where there has been change in diet or Treatment within 6 Weeks. Hence people with recent Blood Loss, Hemolytic Anemia, or Genetic Differences in the Hemoglobin Molecule (Hemoglobinopathy) such as Sickle-cell Disease and other Conditions, as well as those that have donated Blood recently, are not suitable for this Test.

*Aashish Setti*

Dr. Aashish Setti  
Consultant Biochemist

*Harshita Khule*

Dr. Harshita Khule  
M.D. Pathology  
M.B.B.S. (General)



PATHOLOGIST



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# RAJASTHANI DIAGNOSTIC & MRI CENTRE



FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO. MC-5346

Patient Name: **SHANKER LAL**  
Sr. No. : 15701  
Patient ID No. : 11792  
Age : 46 Gender : MALE  
Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP



Registered on : 15-11-2024 11:04 AM  
Collected On : 15-11-2024 11:04 AM  
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Reported On : 15-11-2024 04:55 PM  
Bar Code   
LIS Number 7 6 0 7

## BIO-CHEMISTRY

Test Name	Observed Values	Units	Reference Intervals
Glucose Fasting (Method: GOD-POD)	82.00	mg/dL	Glucose Fasting Cord: 45-95 New born, 1d: 40-60 New born, >1d: 50-80 Child: 60-100 Adult: 74-100 >60 Y: 82-115 >90 Y: 75-121
Blood Sugar PP (Method: GOD-POD)	106.00	mg/dL	Glucose 2 h Postprandial: <120

## KIDNEY FUNCTION TEST

Test Name	Observed Values	Units	Reference Intervals
Blood Urea (Method: Urease-GDH)	26.00	mg/dL	Adults Women < 50 years : 13-40 Women > 50 years : 21-43 Men < 50 years : 18-45 Men > 50 years : 18-55 Children 1-3 years : 11-36 4-13 years : 15-36 13-19 years : 18-45
Creatinine (Method: Enzymatic Creatinine)	0.80	mg/dL	0.4-1.40
Calcium	10.64	mg/dL	8.5-11
Uric Acid (Method: Uricase-POD)	4.32	mg/dL	2.4-7.2

*Ashish Sethi*  
Dr. Ashish Sethi  
Consultant Biochemist

**24/7**  
EMERGENCY SERVICES  
LOGIST

*Dr. Manish Doshi*  
Dr. Manish Doshi  
MD Path  
DRC No. 4275/2018

PATHOLOGIST



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# RAJASTHANI DIAGNOSTIC & MRI CENTRE



FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO. MC-5346

Patient Name: **SHANKER LAL**  
Sr. No. : **15701**  
Patient ID No. : **11792**  
Age : **46** Gender : **MALE**  
Ref. By Dr. : **MEDI-WHEEL HEALTH CHECKUP**



Registered on : **15-11-2024 11:04 AM**  
Collected On : **15-11-2024 11:04 AM**  
Received On : **15-11-2024 11:04 AM**  
Reported On : **15-11-2024 04:55 PM**  
Bar Code   
LIS Number **7 0 0 0**

## BIO-CHEMISTRY Liver Function Test

Test Name	Observed Values	Units	Reference Intervals
SGOT/AST(Tech.: -UV Kinetic)	25.00	U/L	5-40
SGPT/ALT(Tech.: -UV Kinetic)	31.00	U/L	5-40
Bilirubin(Total) (Merop. Dist.)	0.86	mg/dL	Adults: 0-2, Child < 2 Newborns, premature 0-1 day 1-8, 1-2 days: 5-12, 3-5 days 10-14 Newborns, full term 0-1 day: 2-6, 1-2 days: 5-10, 3-5 days: 4-8
Bilirubin(Direct)	0.15	mg/dL	0-0.3
Bilirubin(Indirect)	0.71	mg/dL	0.1-1.0
Total Protein (Auto. BIPROCT Method)	6.99	g/dL	Adults: 6.4 - 8.3 Premature: 3.6-6.0 Newborn: 4.0 - 7.0 1 Week: 4.4 - 7.6 7-12 months: 5.1 - 7.3 1-2 Years: 5.0 - 7.5 > 2 Years: 6.0 - 8.0
Albumin(Tech.: -BCG) (Albumin) (g/dL)	3.87	gm/dL	0-4 days: 2.8-4.4 4d-14 yrs: 3.8-5.4 14y-18y: 3.2-4.5 Adults 20-60 yrs: 3.5-5.2 60-90 yrs: 3.2-4.3
Globulin(CALCULATION)	3.12	gm/dL	2.5-4.5
A/G Ratio(Tech.: -Calculated)	1.24		1.2 - 2.5
Alkaline Phosphatase(Tech.: -Pnp Amp Kinetic)	214.00	U/L	108-306

*Ashish Sethi*

Dr. Ashish Sethi  
Consultant Biochemist

**24/7**  
EMERGENCY SERVICE  
PATHOLOGIST

*Dr. Ashish Sethi*

Dr. Ashish Sethi  
Consultant Biochemist

**24/7**  
EMERGENCY SERVICE  
PATHOLOGIST

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# RAJASTHANI DIAGNOSTIC & MRI CENTRE



FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO.  
MC-5346

Patient Name: **SHANKER LAL**  
Sr. No. : 15701  
Patient ID No.: 11792  
Age : 46 Gender : **MALE**  
Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



Registered on : 15-11-2024 11:04 AM  
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LIS Number 7 6 0 8

## THYROID HORMONES T3, T4, TSH (THYROID PROFILE)

Test Name	Observed Values	Units	Reference Intervals
T3 (Total Triiodothyronine)	0.90	ng/mL	0.6 - 1.8 ng/mL
T4 (Total Thyroxine)	8.55	µg/dL	4.60-12.50 µg/dL
TSH (Thyroid Stimulating Hormone)	3.13	µIU/mL	0.35-5.50

Sample Type : **Serum**

Test Performed by:-

Fully Automated Chemi Luminescent Immuno Assay (**ARCHITECT- i1000 PLUS**) Abbott USA

### Remarks :

Primary malfunction of the Thyroid gland may result in excessive (hyper) or Low (hypo) release of T3 or T4. In addition, as TSH directly affect thyroid function, malfunction of the pituitary or the hypothalamus influences the thyroid gland activity.

Disease in any portion of the thyroid-pituitary-hypothalamus system may influence the level of T3 and T4 in the blood, in Primary Hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels may be low. In addition, in Euthyroid sick syndrome, multiple alterations in serum thyroid function test findings have been recognized.

*Aashish Seethi*

Dr. Aashish Seethi  
Consultant Biochemist

*Usha Khaitan*  
Dr. Usha Khaitan

Dr. Usha Khaitan

Dr. Usha Khaitan



PATHOLOGY

**24/7**  
EMERGENCY SERVICE LOGIST

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# RAJASTHANI DIAGNOSTIC & MRI CENTRE

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MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO. MC-5346

Patient Name: <b>SHANKER LAL</b>			Registered on : 15-11-2024 11:04 AM
Sr. No. : 15701			Collected On : 15-11-2024 11:04 AM
Patient ID No. : 11792			Received On : 15-11-2024 11:04 AM
Age : 46 Gender : MALE			Reported On : 15-11-2024 04:55 PM
Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP			Bar Code 
			LIS Number 7 8 0 5

## IMMUNOLOGY

Test Name	Observed Values	Units	Reference Intervals
PSA (Prostate-Specific Antigen)	0.84	ng/mL	NORMAL 0 - 4.00 Borderline 4 - 10 High More than 10.00

Method : Fluorescence Immunoassay Technology

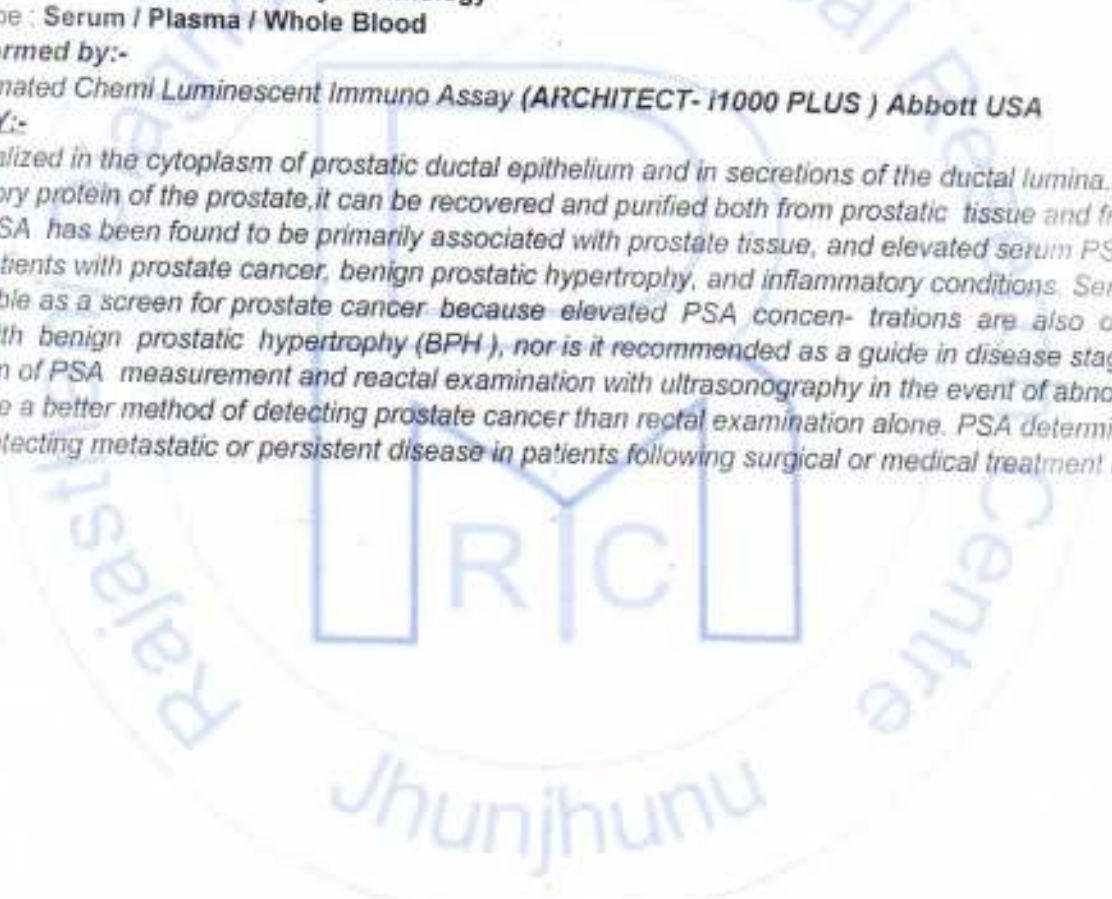
Sample Type : Serum / Plasma / Whole Blood

Test Performed by:-

Fully Automated Chemi Luminescent Immuno Assay (ARCHITECT-11000 PLUS) Abbott USA

### SUMMARY:-

PSA is localized in the cytoplasm of prostatic ductal epithelium and in secretions of the ductal lumina. Because PSA is a secretory protein of the prostate, it can be recovered and purified both from prostatic tissue and from seminal plasma. PSA has been found to be primarily associated with prostate tissue, and elevated serum PSA has been found in patients with prostate cancer, benign prostatic hypertrophy, and inflammatory conditions. Serum PSA alone is not suitable as a screen for prostate cancer because elevated PSA concentrations are also observed in patients with benign prostatic hypertrophy (BPH), nor is it recommended as a guide in disease staging. The combination of PSA measurement and rectal examination with ultrasonography in the event of abnormal findings may provide a better method of detecting prostate cancer than rectal examination alone. PSA determinations can be useful in detecting metastatic or persistent disease in patients following surgical or medical treatment of prostate cancer.



*Dr. Anish Sethi*  
Dr. Anish Sethi  
Consultant Biochemist

*Harsh Bhatt*  
Dr. Harsh Bhatt  
Pathologist



PATHOLOGIST



PATHOLOGIST

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MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO. MC-5346

Patient Name: <b>SHANKER LAL</b>		Registered on : 15-11-2024 11:04 AM
Sr. No. : 15701		Collected On : 15-11-2024 11:04 AM
Patient ID No.: 11792		Received On : 15-11-2024 11:04 AM
Age : 46 Gender : <b>MALE</b>		Reported On : 15-11-2024 04:55 PM
Ref. By Dr : <b>MEDI-WHEEL HEALTH CHECKUP</b>		Bar Code
		LIS Number 7 8 0 0

## URINE EXAMINATION URINE COMPLETE

Test Name	Observed Values	Units	Reference Intervals
<b>PHYSICAL</b>			
Quantity	20	ml	
Colour	Yellow		
Appearance / Transparency	Clear		
Specific Gravity	1.030		
PH	6.0		4.5-8.5
<b>CHEMICAL</b>			
Reaction	Acidic		
Albumin	TRACE		
Urine Sugar	Nil		
<b>MICROSCOPIC</b>			
Red Blood Cells	Nil	/h.p.f.	
Pus Cells	4-6	/h.p.f.	
Epithelial Cells	1-2	/h.p.f.	
Crystals	Nil	/h.p.f.	
Casts	Nil	/h.p.f.	
Bacteria	Nil	/h.p.f.	
Others	Nil	/h.p.f.	
Test Name	Observed Values	Units	Reference Intervals
URINE SUGAR FASTING	Nil		
URINE SUGAR PP	Nil		

<<< END OF REPORT >>>

>>> Results relate only to the sample as received. Kindly correlate with clinical condition. <<<

Note: This report is not valid for medico legal purposes.

*Aash Sethi*  
Dr. Aash Sethi  
Consultant Biochemist

*Dr. Anshu Choudhary*  
Dr. Anshu Choudhary  
Consultant Pathologist



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# RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

Report



B-110, JINDIRA NAGAR, SUBHASH MARG, MANDAWA MOD, JHUNJHUNU Email:

SHANKER LAL / 46 Yrs / M / 174 Cms / 75 Kg  
 Date: 15 - 11 - 2024 Technician : MANOJ Examined By:

Stage	Time	Duration	Speed(mph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:08	0:08	00.0	00.0	01.0	088	51 %	122/82	000	00	
Standing	01:11	1:03	00.0	00.0	01.0	091	52 %	122/82	111	00	
HV	02:11	1:00	00.0	00.0	01.0	087	50 %	122/82	106	00	
Warm Up	03:12	1:01	00.0	00.0	01.0	091	52 %	122/82	111	00	
ExStart	04:12	1:00	01.0	00.0	01.0	095	55 %	124/82	117	00	
BRUCE Stage 1	07:12	3:00	01.7	10.0	04.7	110	63 %	126/84	138	00	
BRUCE Stage 2	10:12	3:00	02.5	12.0	07.1	125	72 %	130/88	162	00	
PeakEx	12:43	2:31	03.4	14.0	09.7	150	86 %	134/92	201	00	
Recovery	13:13	0:30	01.1	00.0	04.2	144	83 %	134/92	192	00	
Recovery	13:43	1:00	01.1	00.0	01.2	128	74 %	136/94	174	00	
Recovery	14:43	2:00	00.0	00.0	01.0	108	62 %	132/90	142	00	
Recovery	15:43	3:00	00.0	00.0	01.0	104	60 %	128/84	133	00	
Recovery	16:43	4:00	00.0	00.0	01.0	089	57 %	124/82	122	00	
Recovery	16:43	4:00	00.0	00.0	01.0	099	57 %	124/82	122	00	

## FINDINGS :

Exercise Time : 08:31  
 Initial HR (ExStrt) : 95 bpm 55% of Target 174  
 Initial BP (ExStrt) : 124/82 (mm/Hg)  
 Max Workload Attained : 9.7 Good response to induced stress  
 Max ST Dep Lead & Avg ST Value : V3 & -2.1 mm in PeakEx  
 Test Objective : BOB HEALTH CHECK UP  
 Test End Reasons : Test Complete, Heart Rate Achieved

Max HR Attained 150 bpm 86% of Target 174  
 Max BP Attained 136/94 (mm/Hg)

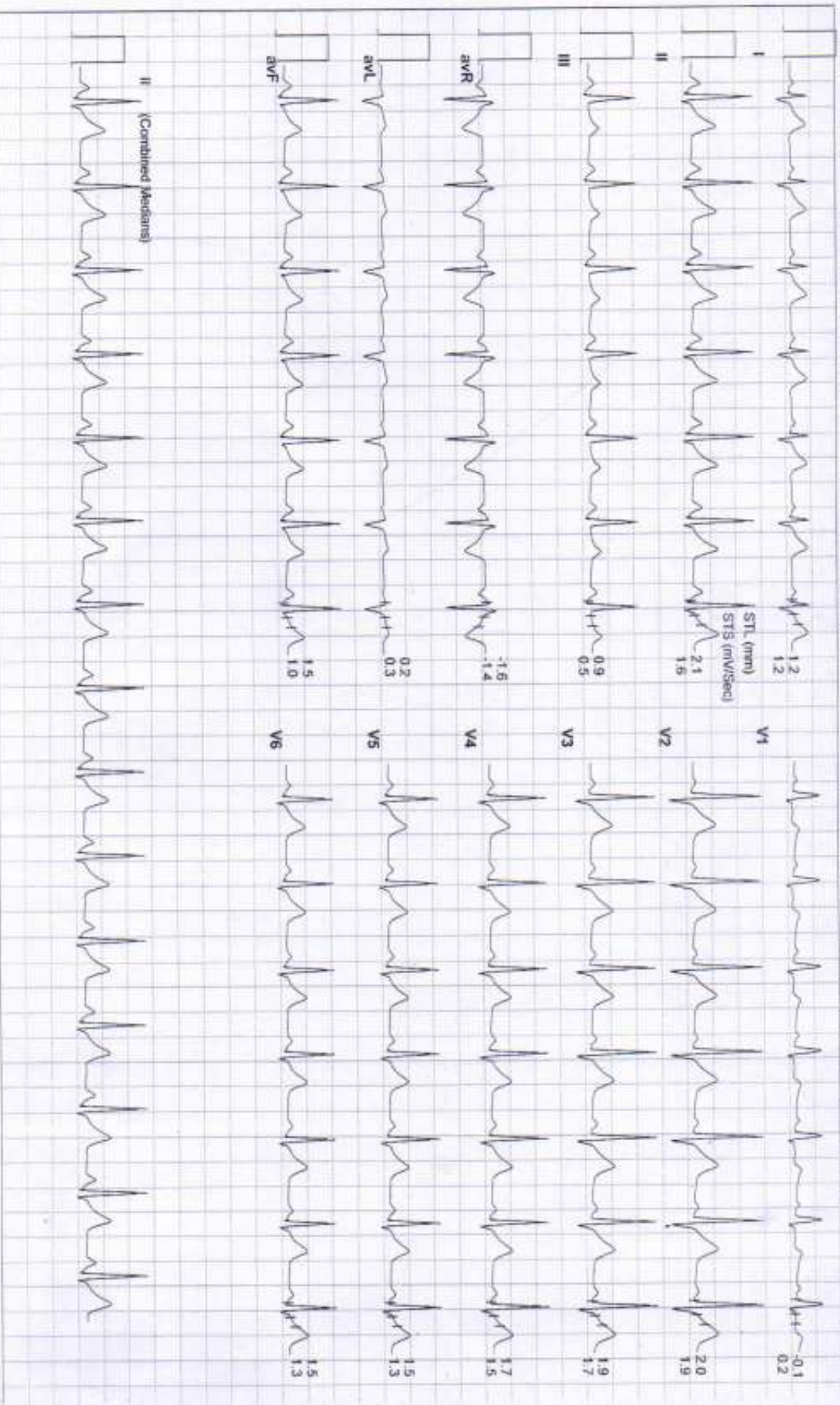
## REPORT :

Rajasthan Diagnostic & Medical Research Centre  
 Jhunjhuru  
 Doctor : RDMRC



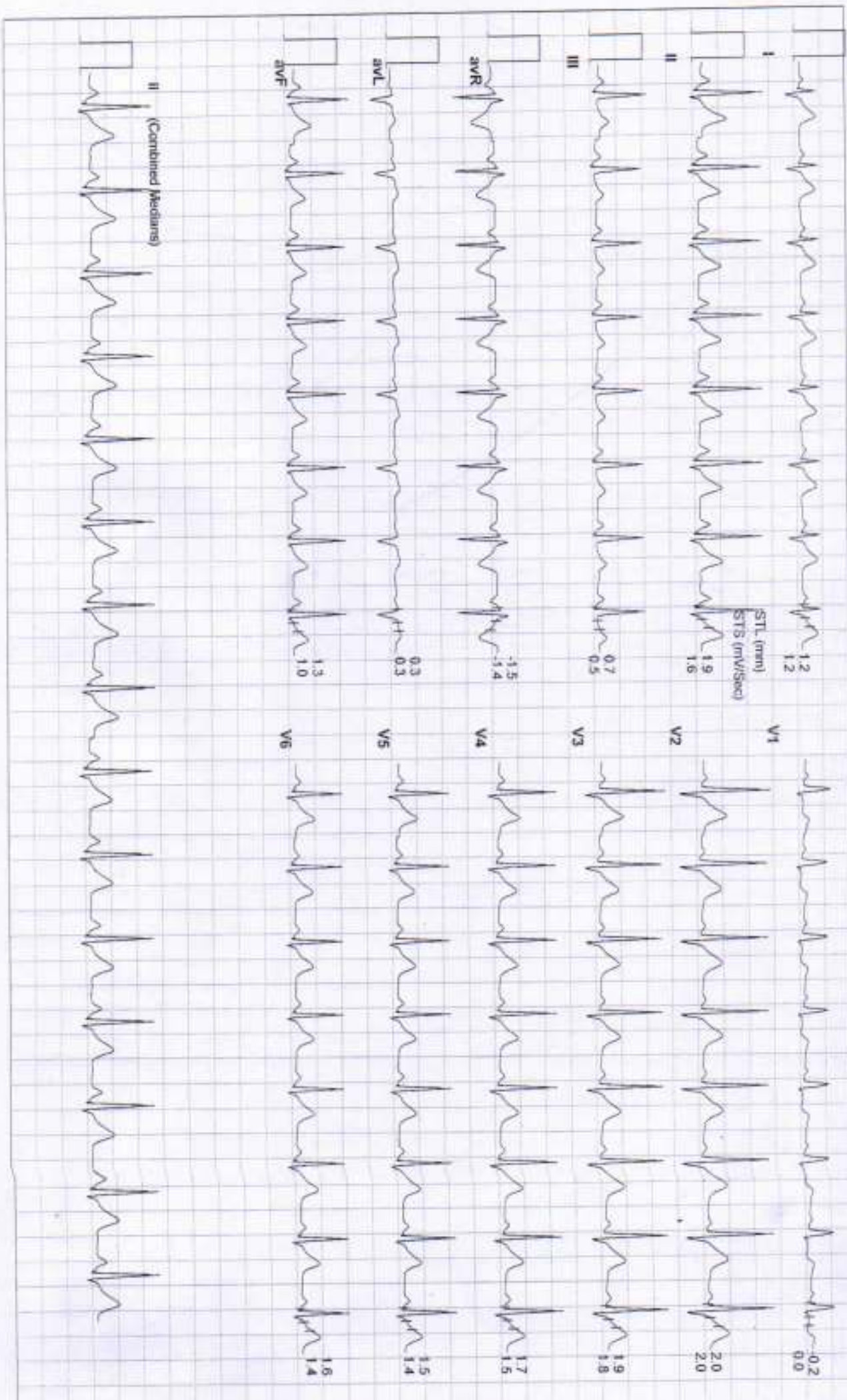
Date: 15 - 11 - 2024 METs - 1.0 HR - 88 Target HR - 51% of 174 BP - 0/0 Post J @BismSec

ExTime: 00:00 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec: 1.0 Cm/mV





Date: 15 - 11 - 2024 METs : 1.0 HR : 91 Target HR : 52% of 174 BP : 122/82 Post J @80mSec  
 ExTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec 1.0 Cm/mV



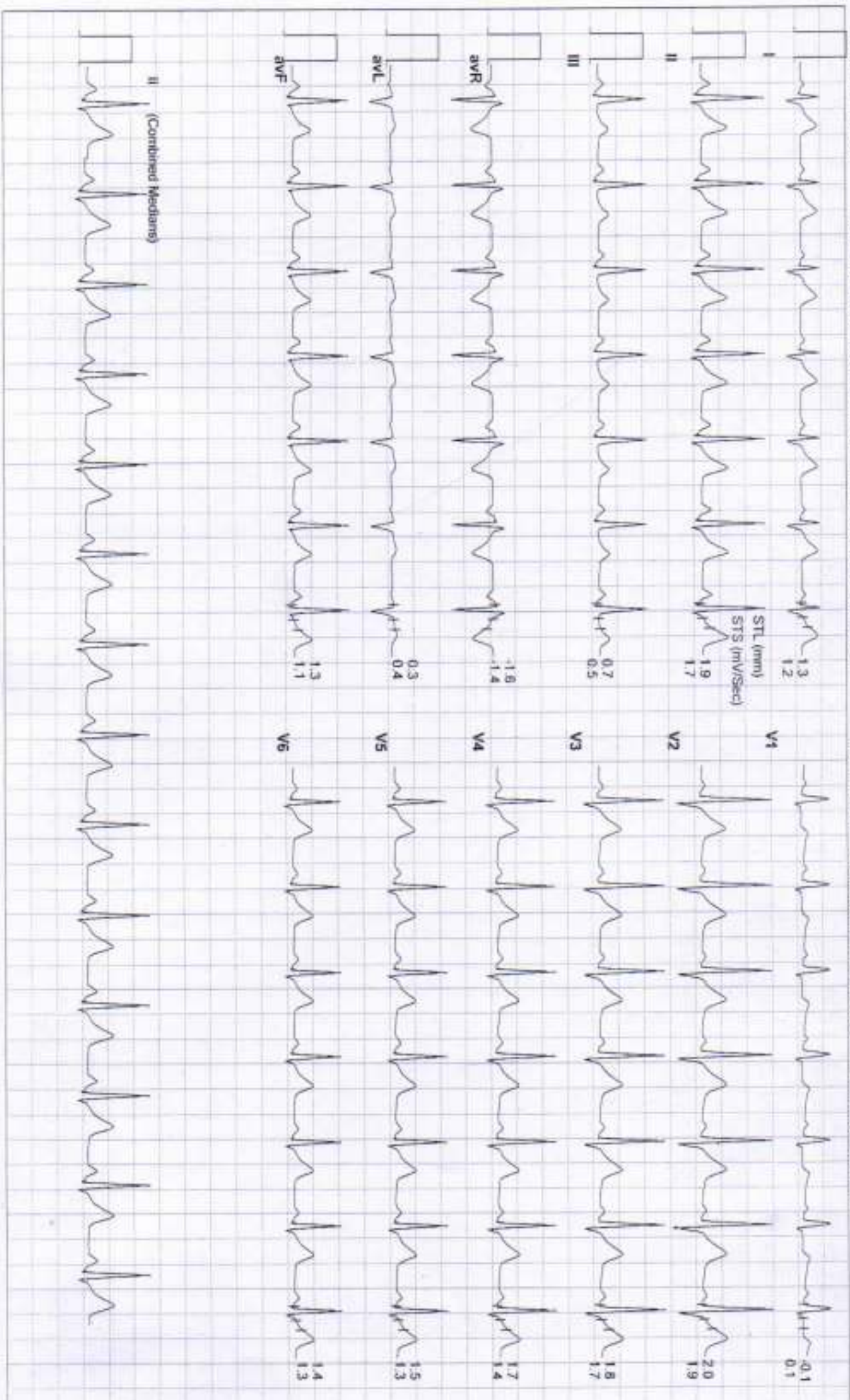




Date: 15 - 11 - 2024

METs : 1.0 HR : 87 Target HR : 50% of 174 BP : 122/82 Post J @60mSec

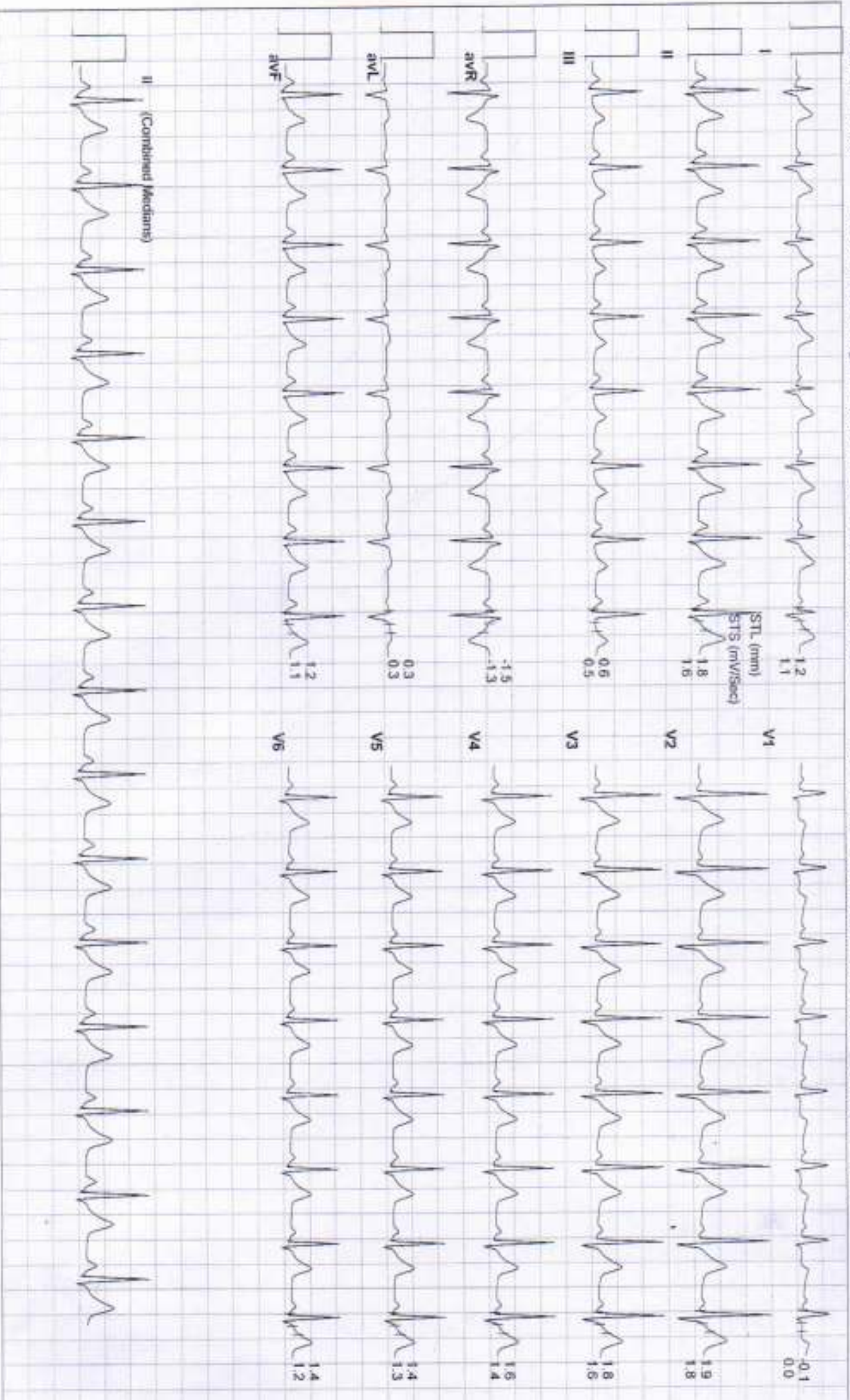
ExTime: 00:00 Speed: 0.0 migh Grade : 00.00 % 25 mm/Sec: 1.0 Cm/IV





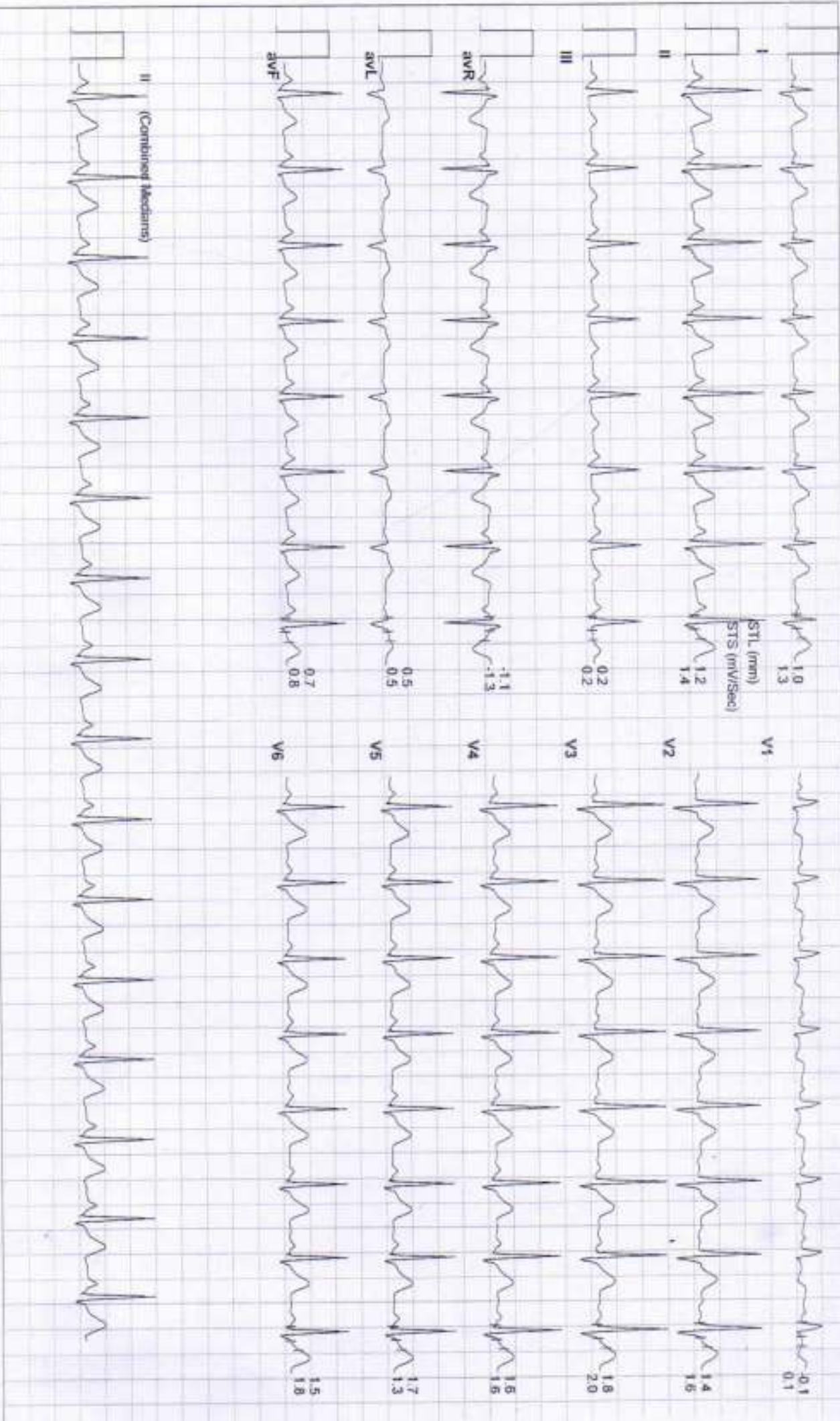
Date: 15-11-2024 METs: 1.0 HR: 91 Target HR: 52% of 174 BP: 122/82 Post J @80mSec

ExTime: 00:00 Speed: 0.0 mph Grade: 00.00 % 25 mm/Sec: 1.0 Cm/mV





Date: 15 - 11 - 2024 METs: 1.0 HR: 95 Target HR: 95% of 174 BP: 124/82 Post J @60mSec  
ExTime: 00:00 Speed: 1.0 mph Grade: 00.00 % 25 mm/Sec: 1.0 Cm/IV



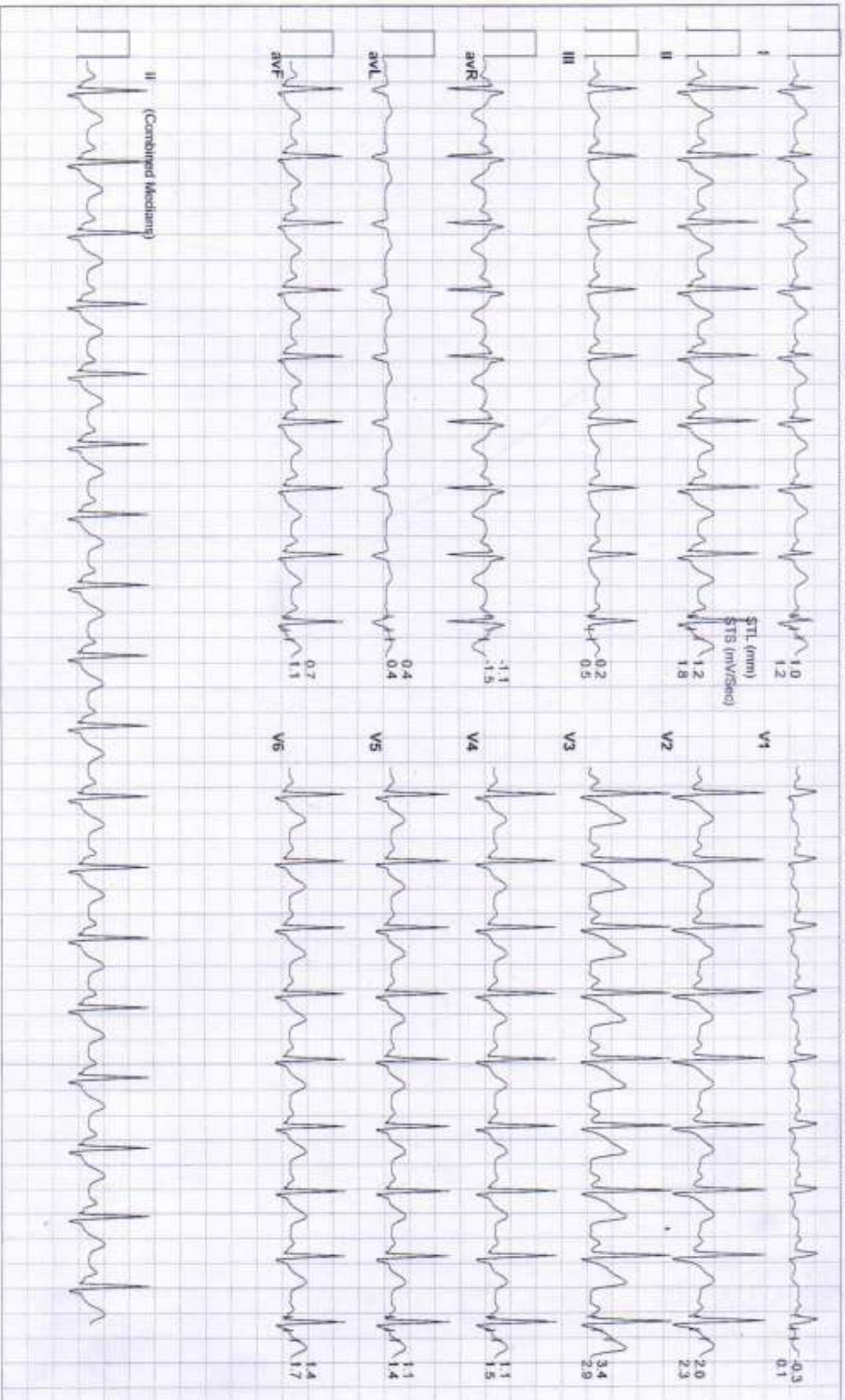


Date: 15 - 11 - 2024

METs : 4.7 HR : 110 Target HR : 63% of 174 BP : 125/84 Post J @80mSec

ExTime: 03:00

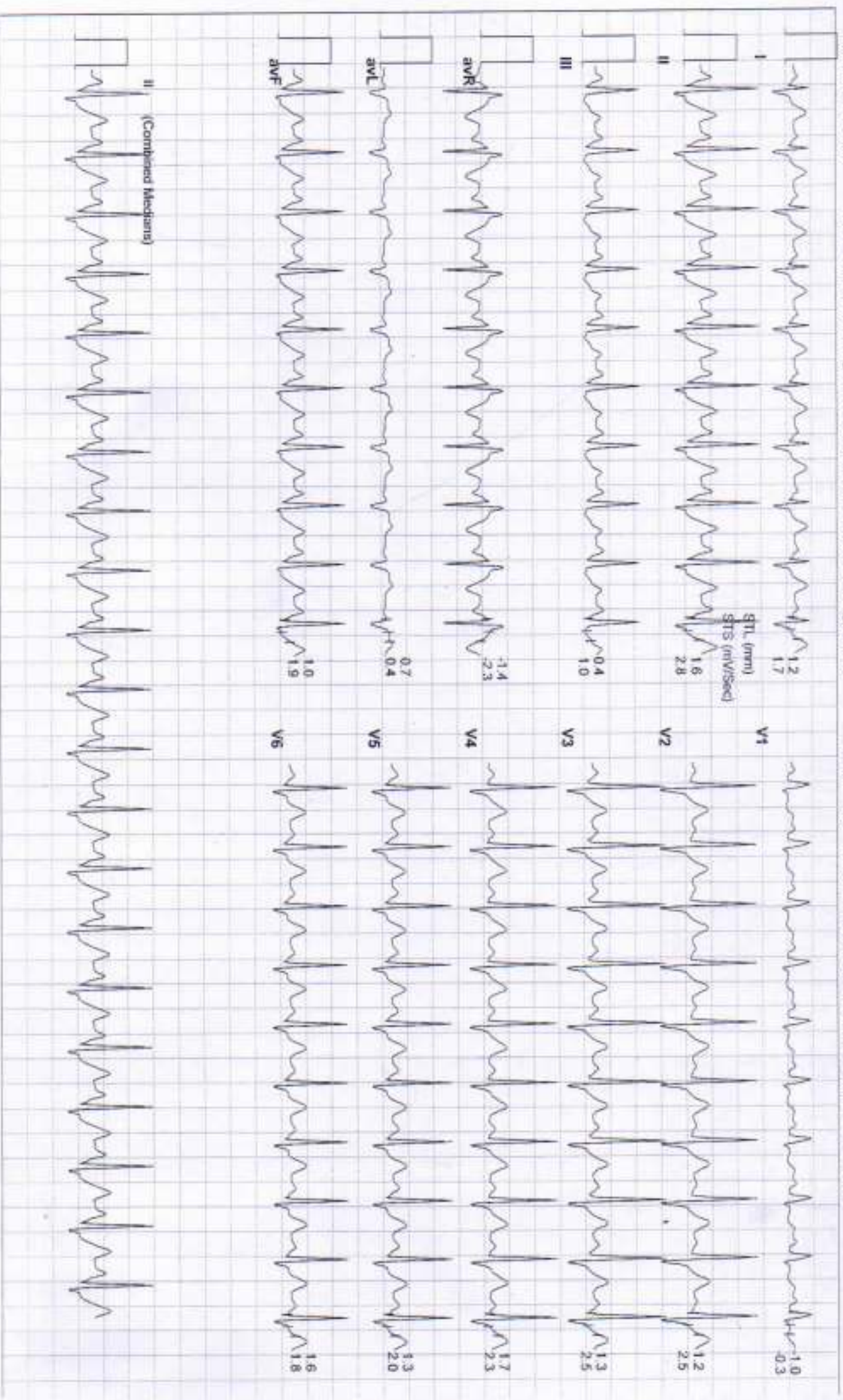
Speed 1.7 mph Grade : 10.00 % 25 mm/Sec 1.0 Cm/mV





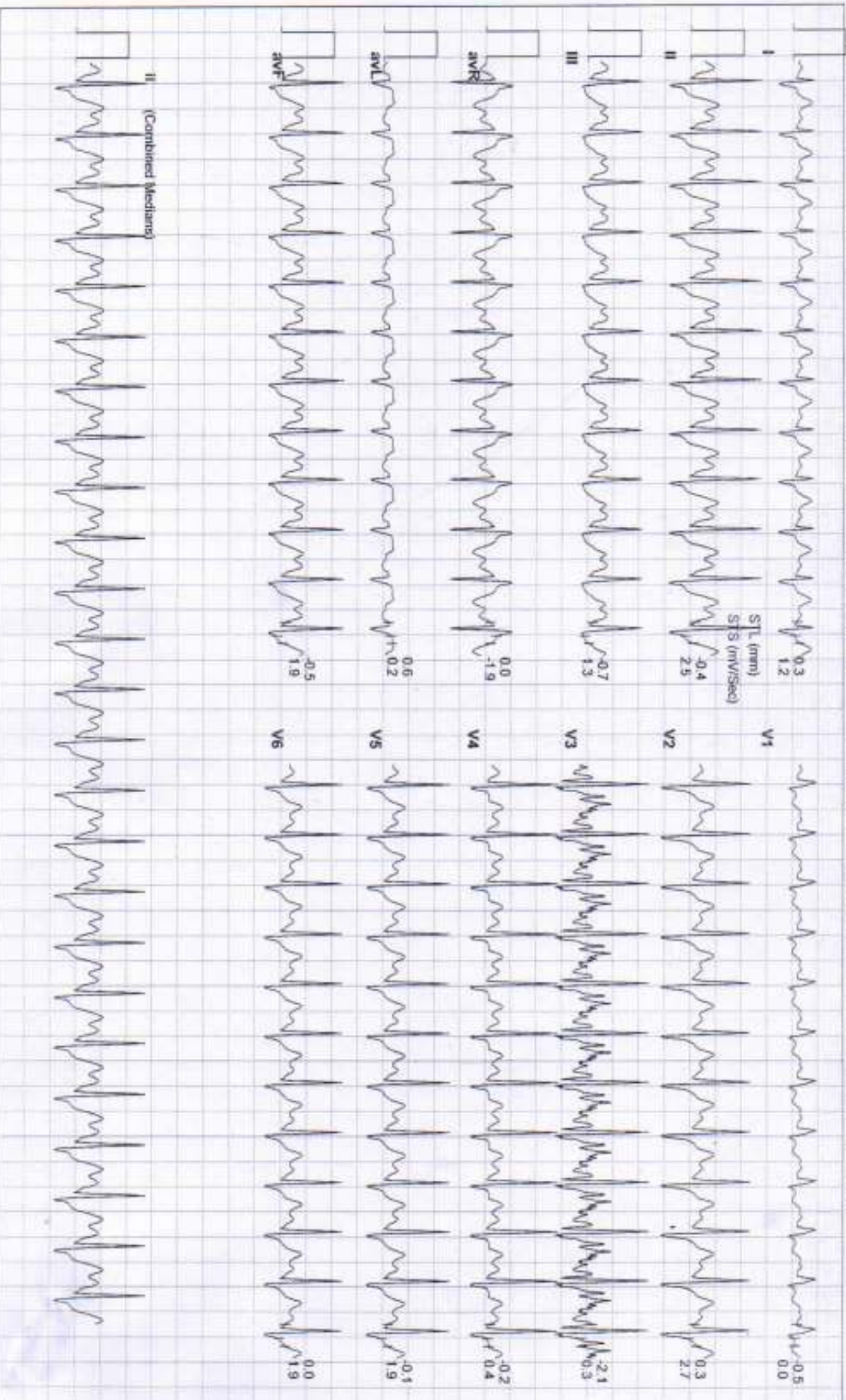
Date: 15 - 11 - 2024 METs : 7.1 HR : 125 Target HR : 72% of 174 BP : 130/88 Post J @8minSec

ExTime: 06:00 Speed: 2.5 mph Grade : 12.00 % 25 mm/Sec: 1.0 Cm/IV





Date: 15 - 11 - 2024 METs : 9.7 HR : 150 Target HR : 86% of 174 BP : 134/92 Post J @60mSec ExtTime: 08:31 Speed: 3.4 mph Grade: 14.00 % 25 mm/Sec 1.0 Cm/mV



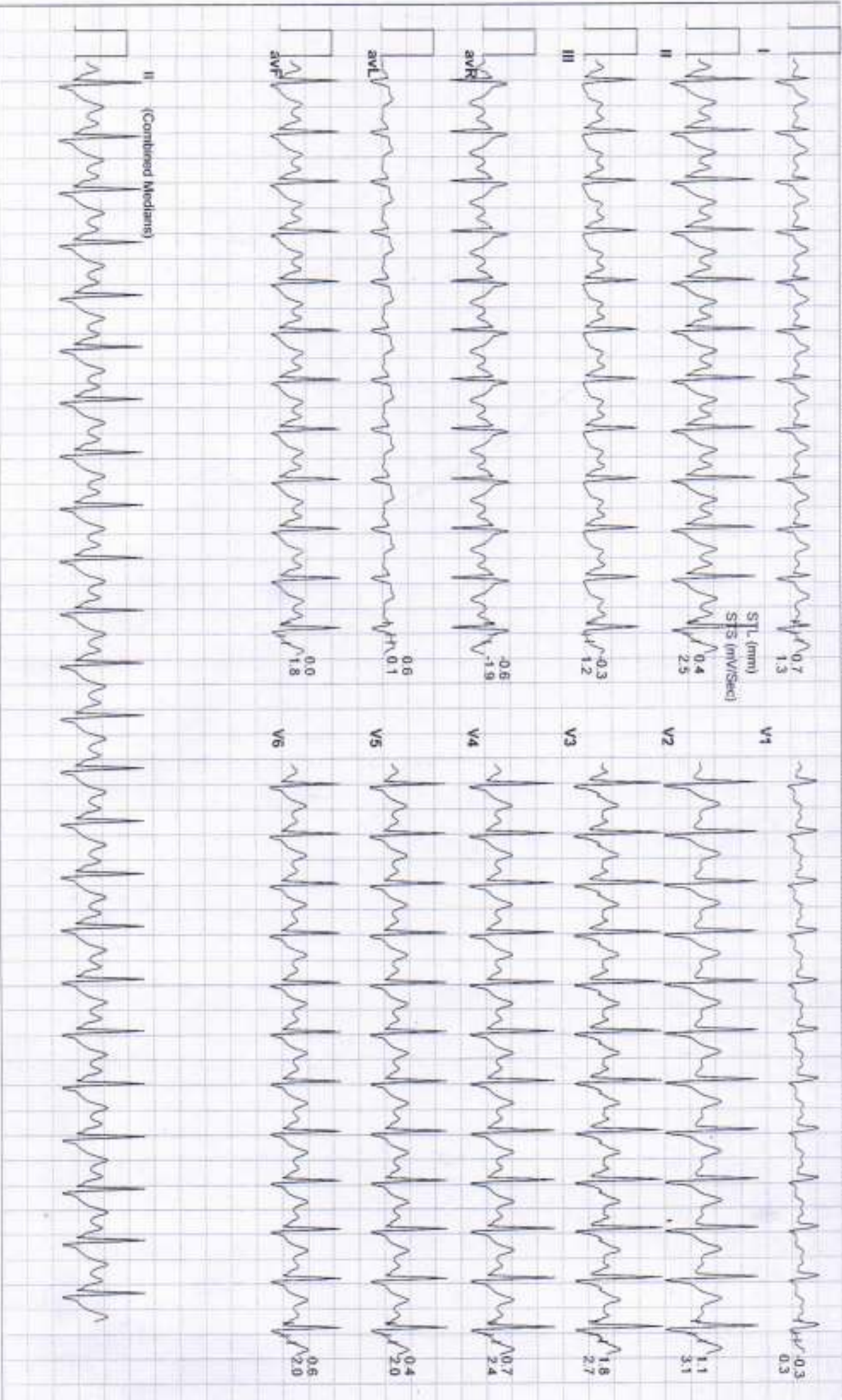


Date: 15 - 11 - 2024

MEts : 4.2 HR : 144 Target HR : 83% of 174 BP : 134/92 Post J @60mSec

ExTime: 08:31

Speed 1.1 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV

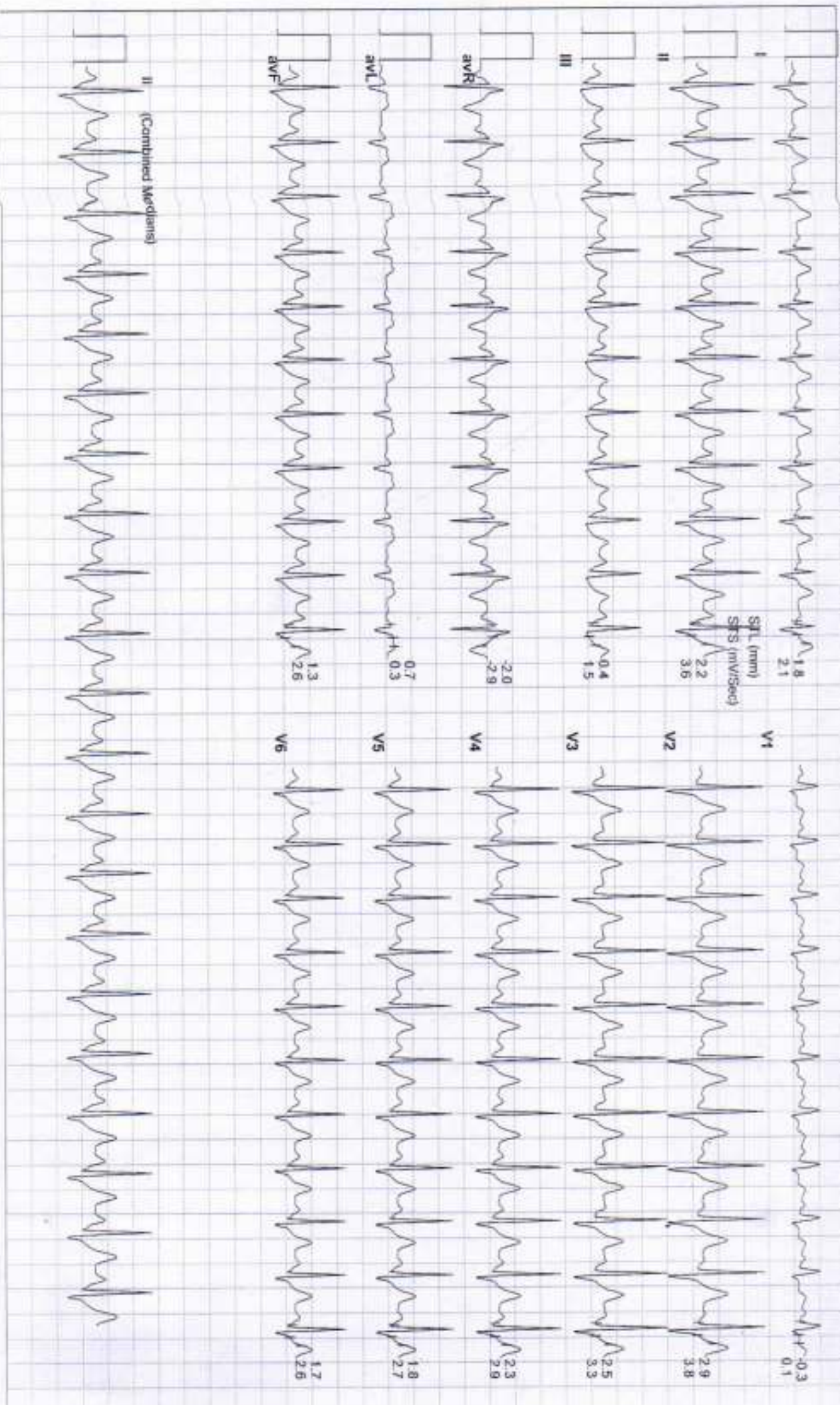




Date: 15 - 11 - 2024

METs : 1.2 HR : 128 Target HR : 74% of 174 BP : 136/94 Post J @80ms/Sec

ExTime: 08:31 Speed: 1.1 mph Grade : 00.00 % 25 mm/Sec: 1.0 Cm/mV







Date: 15 - 11 - 2024

MEtS : 1.0 HR : 108 Target HR : 62% of 174 BP : 132/90 Post J @80mSec

ExTime: 08:31 Speed: 0.0 mph Grate: 00.00 % 25 mm/Sec 1.0 Cm/mV





Date: 15 - 11 - 2024      METs : 1.0 HR : 104 Target HR : 60% of 174 BP : 128/94 Post J @90mSec      ExTime: 08:31      Speed: 0.0 mph Grade : 00.00 % 25 mmV/Sec 1.0 Cm/mV



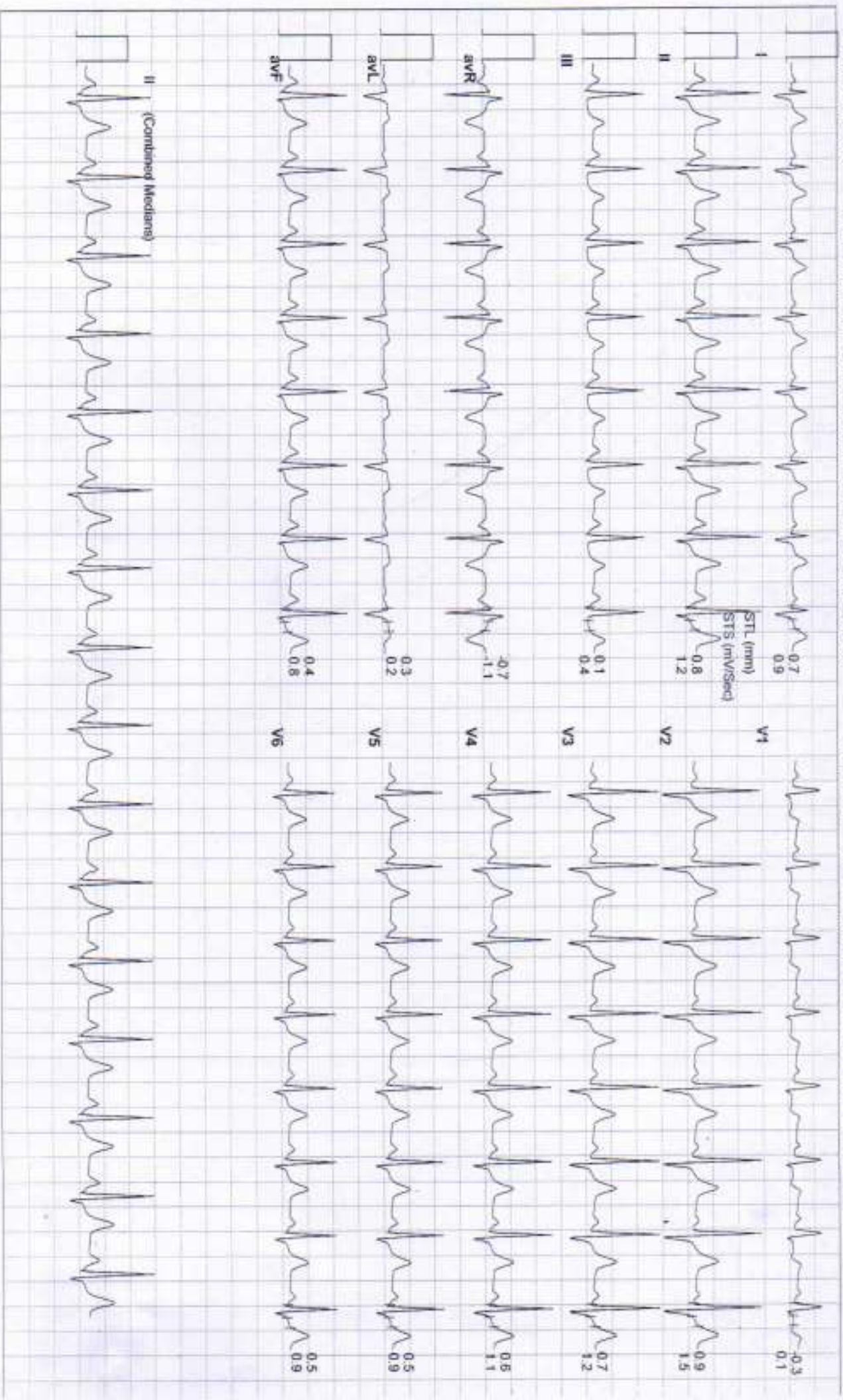


Date: 15 - 11 - 2024

ME: 1.0 HR : 99 Target HR : 57% of 174 BP : 124/82 Post J @ 86mSec

ExTime: 08:31

Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec: 1.0 Cm/mV





Date: 15 - 11 - 2024 METS : 1.0 HR : 99 Target HR : 57% of 174 Bp : 124/82 Post J @80mmSec  
 ExTime: 08:31 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/IV

