



Akurli Road, Next to Lodha Woods, Lokhandwala Township,
Near Mahindra Gate No. 4, Kandivali (E), Mumbai 400101.
email: info@apexhospitals.in | www.apexgroupofhospitals.com



Tele.:
022-62747000 (100 Lines)

DEPARTMENT OF LABORATORY SCIENCES

Patient Name	Mr. SUNIL M JADHAV	LabNo	14458
UHID/IP No	150009517 / 11006	Sample Date	24/02/2024 11:16AM
Age/Gender	59 Yrs/Male	Receiving Date	24/02/2024 12:35PM
Bed No/Ward	OPD	Report Date	24/02/2024 1:20PM
Prescribed By	Dr. Ramesh Hari Pawar	Report Status	Final



HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
COMPLETE BLOOD COUNT(CBC) EDTA WHOLE BLOOD				
Sample: W. B. EDTA				
Haemoglobin Estimation (Hb)	15.7	gm/dl	13.5 - 18.0	SLS- Hb Method
RBC Count (Red Blood Cell)	5.18	10 ⁶ /uL	4.70 - 6.00	
PCV (Haematocrit)	44.92	%	40.0 - 50.0	
MCV	86.72	fl	78 - 100	Calculated
MCH	30.31	pg	27 - 31	Calculated
MCHC	34.95	gm/dl	30 - 36	Calculated
RDW	16.4 H	%	11.0 - 16.0	Calculated
Total Leukocyte Count (TLC)	4630	cells/cu.mm	4000.0 - 10500.0	
Neutrophil %	66	%	40 - 80	
Lymphocyte %	32	%	20 - 40	
Eosinophil %	01	%	0 - 6	
Monocytes %	01	%	1 - 12	
Basophil %	00	%	0 - 2	
Band Cells	00	%		
Absolute Neutrophil Count (ANC)	3055.8	/cu.mm	2000 - 7000	Calculated
Absolute Lymphocyte Count	1481.6	/cu.mm	1000 - 3000	Calculated
Absolute Eosinophil Count (AEC)	46.3	/cu.mm	20 - 500	Calculated
Absolute Monocyte Count	46.3 L	/cu.mm	200 - 1000	Calculated
Absolute Basophil Count	0.00	/cu.mm		CALCULATED
WBCs Morphology	Within normal limits.			
RBCs Morphology	Anisocytosis			
Platelet Count	175	10 ³ /uL	150 - 400	DC Detection
Platelets Morphology	Adequate on smear			
MPV	9.7	fl	7 - 12	

--End Of Report--

Dr. SANDEEP B PORWAL
MBBS MD (Path) Mumbai



APEX HOSPITALS KANDIVALI DIAGNOSTIC

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HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
ERYTHROCYTE SEDIMENTATION RATE (ESR)				
Sample: W. B. EDTA				
ESR (Erythrocyte Sed.Rate)	5	mm/hr	< 15	Westergren

--End Of Report--

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IMMUNO-HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
BLOOD GROUPING Sample: W. B. EDTA				
Blood Group (ABO and Rh)	"A" Rh Positive			SLIDE METHOD

--End Of Report--

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BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
GLUCOSE (PP) Sample: Fl. Plasma				
Blood Sugar(2 Hours PP)	122.0	mg/dl	70 - 140	Glucose Oxidase,Hydrogen Peroxide

Note: An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons :
The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity, Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.

GLUCOSE (FASTING)

Sample: Fl. Plasma

Glucose (Fasting Blood Sugar / FBS)	119.0 H	mg/dl	70 - 110	Glucose Oxidase,Hydrogen Peroxide
Urine Fasting Sugar	Absent		Absent	
Urine Fasting Ketone	Absent		Absent	

--End Of Report--

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BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
LIPID PROFILE SERUM				
Sample: Serum				
Cholesterol-Total	131	mg/dl	< 200.00	Cholesterol Oxidase,Esterase,Peroxidase
Triglycerides	90	mg/dl	< 150	Enzymatic End point
HDL Cholesterol	43	mg/dl	40.00 - 60.00	Phosphotungstat
VLDL Cholesterol	18.00	mg/dl	6.00 - 38.00	Calculated Value
LDL Cholesterol	70.00	mg/dl	< 100.00	Calculated Value
Cholesterol Total : HDL Cholesterol Ratio	3.05 L		3.50 - 5.00	Calculated Value
LDL Cholesterol : HDL Cholesterol Ratio	1.63 L		2.50 - 3.50	Calculated Value

--End Of Report--

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BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
LIVER FUNCTION TEST (LFT) SERUM				
Sample: Serum				
Bilirubin Total (TBil)	0.73	mg/dl	0.30 - 1.30	Diphyline Diazonium Salt
Bilirubin Direct (Dbil)	0.45	mg/dl	0.00 - 0.50	
Bilirubin indirect	0.28	mg/dl	0 - 1	
SGPT (ALT)	19.20	U/L	5 - 40	IFCC modified
SGOT (AST)	20.94	U/L	5 - 40	IFCC modified
Protein Total	6.1	gm/dl	6.00 - 8.00	Biuret
Albumin	4.2	gm/dl	3.20 - 5.00	Bromocresol Green (BCG)
Globulin	1.90	gm/dl	1.80 - 3.50	Calculated Value
A/G Ratio (Albumin/Globulin Ratio)	2.21		1.00 - 2.50	Calculated Value
Alkaline Phosphatase	84.03	IU/L	42 - 140	
GGTP (GAMMA GT)	27.10	IU/L	15.0 - 72.0	UV Kinetic IFCC

--End Of Report--

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BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
RFT (RENAL FUNCTION TEST)				
Sample: Serum				
Creatinine	1.1	mg/dl	0.70 - 1.50	Jaffes
UREA	19.25	mg/dl	15 - 50	CDC Urease,Colorimetric
BUN - Blood Urea Nitrogen	9	mg/dl	7 - 20	
Calcium	8.8	mg/dl	8.6 - 10.5	Arsenazo III
Uric Acid	5.7	mm/hr	3.5 - 8.5	URICASE- PEROXIDASE
Phosphorus	4.1	mg/dl	2.5 - 5.0	Phosphomolybdate Reduction
Sodium	140.0	mEq/L	135 - 146	ISE Direct
Potassium	4.1	mEq/L	3.5 - 5.5	ISE Direct
Chloride	106.0	mEq/L	98 - 108	ISE Direct
Protein Total	6.1	gm/dl	6.00 - 8.00	Biuret
Albumin	4.2	gm/dl	3.20 - 5.00	Bromocresol Green (BCG)
Globulin	1.90	gm/dl	1.80 - 3.50	Calculated Value
A/G Ratio (Albumin/Globulin Ratio)	2.21		1.00 - 2.50	Calculated Value

--End Of Report--

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Bed No/Ward	OPD	Report Date	24/02/2024 1:53PM	
Prescribed By	Dr. Ramesh Hari Pawar	Report Status	Final	

CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
URINE ROUTINE				
Sample: Urine				
PHYSICAL EXAMINATION				
Quantity	20	ml		
Color	Pale Yellow			
Appearance	Clear		Clear	Clear
Specific Gravity	1.015		1.010 - 1.025	
CHEMICAL EXAMINATION				
pH	6.0		4.5 - 8.5	
Protein	Absent			
Glucose	Absent			
Ketone	Absent			
Occult Blood	Absent			Absent
Bile Salt	Absent			Absent
Bile Pigment	Absent			
MICROSCOPIC EXAMINATION				
Pus Cells	2-3/hpf			
RBCs	Absent			
Epithelial Cells	1-2/hpf			Absent
Crystals	Absent			Absent
Casts	Absent			Absent
Bacteria	Absent			
Yeast Cells	Normal		Normal	
Amorphous Deposit	Absent			
Others	Absent			

--End Of Report--

Dr. SANDEEP B PORWAL
MBBS MD (Path) Mumbai

Patient Id : PVD18323-24/68234
 Patient : MR SUNIL JADHAV
 Age/sex : 59 Yrs/ Male
 Center : APEX HOSPITALS KANDIVALI
 Ref. By : Self

Sample ID : 24026560
 Reg. Date : 24/02/2024
 Report Date : 24/02/2024
 Case No. :



HBA1C-GLYCOSYLATED HAEMOGLOBIN

Test Description	Result	Unit	Biological Reference Range
HbA1c- (EDTA WB)	5.6	%	< 5.6 Non-diabetic 5.7-6.4 Pre-diabetic > 6.5 Diabetic
Estimated Average Glucose (eAG)	114.02	mg/dL	
Method : HPLC-Biorad D10-USA			

INTERPRETATION

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
- 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%.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low glycosylated 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.
- To estimate the eAG from the HbA1C value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$
- Interference of Haemoglobinopathies in HbA1c estimation.
 - For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
 - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
 - Heterozygous state detected (D10/ Tosho G8 is corrected for HbS and HbC trait).
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control.
 - Excellent Control - 6 to 7 %
 - Fair to Good Control - 7 to 8 %
 - Unsatisfactory Control - 8 to 10 %
 - and Poor Control - More than 10 %

Note : Haemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy

PROSTATE SPECIFIC ANTIGEN


Test Description	Result	Unit	Biological Reference Range
PSA (Prostate Specific Antigen)-Serum Total	0.45	ng/ml	Conventional for all ages: 0 - 4 69- 80 Years : 0 - 6.5 Above 80 yrs: 0 - 7.2
Method : ECLIA			

INTERPRETATION :

Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. PSA exists in serum mainly in two forms, complexed to alpha-1-anti chymotrypsin (PSA-ACT complex) and unbound (free PSA). Increases in prostatic glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels. Transient increase in PSA can also be seen following per rectal digital or sonological examinations.

-----End Of Report-----

Term & Conditions* Test processed at Pathvision Central Processing Laboratory- Dahisar west Mumbai-68 Individual laboratory investigations are never conclusive & should be used along with other relevant clinical examinations to achieve final diagnosis. Any discrepancy with clinical condition the referring doctor or patient must report in 24hr of sample collection and get test redone. Partial reproduction of this report is not permitted The test report is not valid for Medico-legal purpose.


 DR. SANDEEP B. PORWANI
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 MMC Reg no 200103164

CENTRAL PROCESSING LABORATORY

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Patient Id : PVD18323-24/68234
Patient : MR SUNIL JADHAV
Age/sex : 59 Yrs/ Male
Center : APEX HOSPITALS KANDIVALI
Ref. By : Self

Sample ID : 24026560
Reg. Date : 24/02/2024
Report Date : 24/02/2024
Case No. :



IMMUNOASSAY

Test Description	Result	Unit	Biological Reference Range
TOTAL T3 T4 TSH (TFT)			
T3 (Triiodothyronine)	142.52	ng/dl	83-200 For Pregnant females: First Trim: 104.8 - 229.8 2nd Trim: 128.9 - 262.3 Third trim : 135.4 - 261.7
T4 (Thyroxine)	9.36	ug/dL	5.13 - 14.10 For Pregnant females: First Trim : 7.33 - 14.8 Second Trim : 7.93 - 16.1 Third Trim : 6.95 - 15.7
TSH(Thyroid Stimulating Hormone)	1.83	uIU/ml	0.27 - 4.20
Method : ECLIA			

INTERPRETATION

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	- Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within Range	Within Range	-Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. -Subclinical Autoimmune Hypothyroidism -Intermittent T4 therapy for hypothyroidism -Recovery phase after Non-Thyroidal illness*
Raised	Decreased	Decreased	-Chronic Autoimmune Thyroiditis -Post thyroidectomy, Post radioiodine -Hypothyroid phase of transient thyroiditis*
Raised or within Range	Raised	Raised or within Range	-Interfering antibodies to thyroid hormones (anti-TPO antibodies) -Intermittent T4 therapy or T4 overdose -Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics*
Decreased	Raised or within Range	Raised or within Range	-Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness -Subclinical Hyperthyroidism -Thyroxine ingestion*
Decreased	Decreased	Decreased	-Central Hypothyroidism -Non-Thyroidal illness -Recent treatment for Hyperthyroidism (TSH remains suppressed)*
Decreased	Raised	Raised	-Primary Hyperthyroidism (Graves' disease), Multinodular goitre, Toxic nodule -Transient thyroiditis: Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain's), Gestational thyrotoxicosis with hyperemesis gravidarum*
Decreased or within Range	Raised	Within Range	-T3 toxicosis -Non-Thyroidal illness

-----End Of Report-----

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DEPARTMENT OF RADIOLOGY

Patient Name	Mr. SUNIL M JADHAV	LabNo	14458	
UHID/IP No	150009517 / 11006	Order Date	24/02/2024 11:16AM	
Age/Gender	59 Yrs/Male	Receiving Date	24/02/2024 11:50AM	
Bed No/Ward	OPD	Report Date	24/02/2024 6:46PM	
Prescribed By	Dr. Ramesh Hari Pawar	Report Status	Final	

XRAY CHEST PA VIEW

The lung on either side shows adequate translucency and exhibit normal vasculature.

Both hila are symmetrical in outline size and shape.

Trachea is central in position and no mediastinal abnormality is visible.

The costophrenic angles appear clear.

Cardiac shadow is unremarkable.

Bone thorax appears unremarkable.

--End Of Report--

Dr. SAUMIL PANDYA
MD, D.N.B

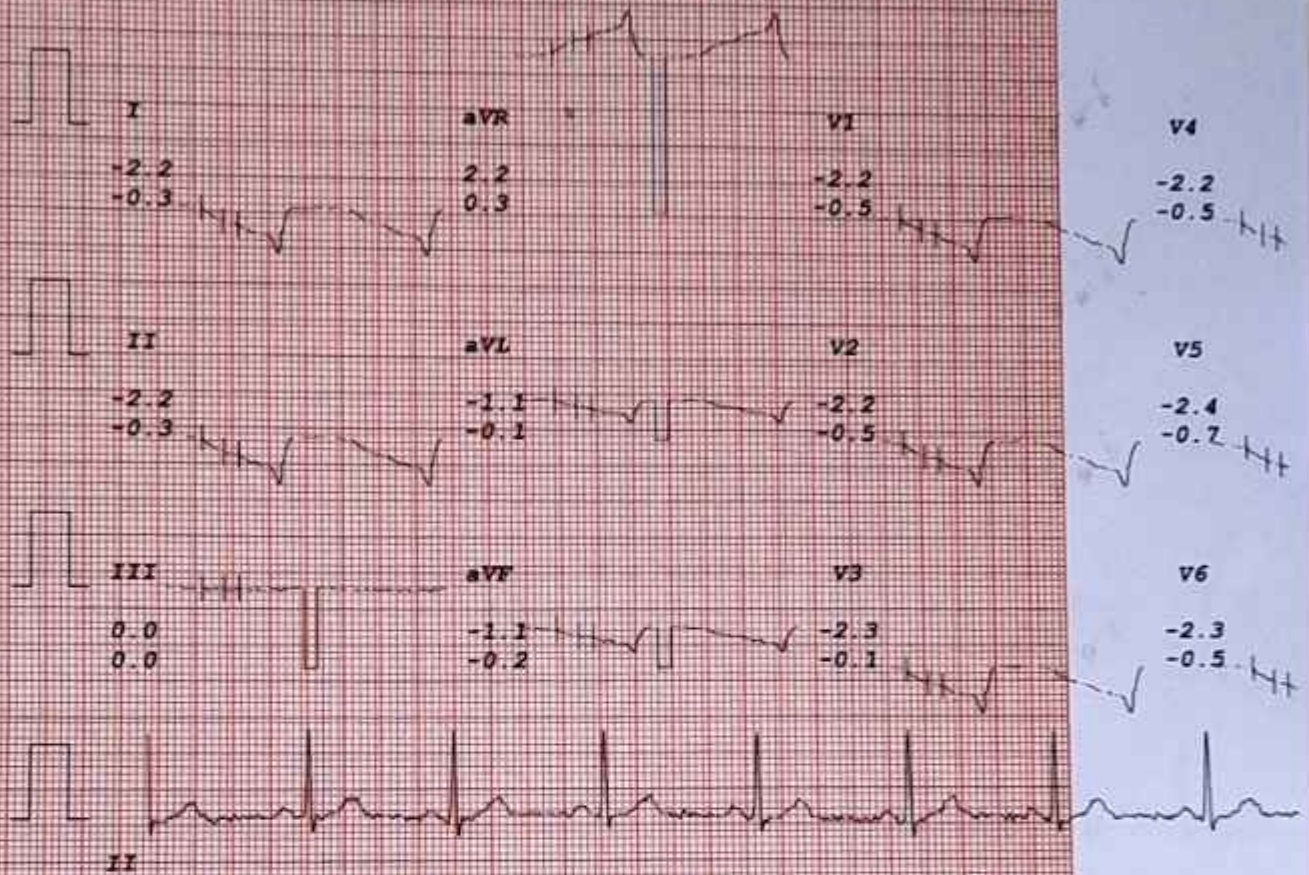
APEX HOSPITAL

MR. SUNIL JADHAV
I.D. 8902
Age 59/M
Date 24-02-2024

RATE 74bpm
B.P. 130/80

PRETEST
SUPINE

ST @ 10mm/m
80ms PostJ



Base corrected

090-00, Indore, Tel: 91-731-600035, Fax: 91-

Apex Hospital - Gandivali
Akuri Road, Next To Ganga Wadi,
Lokhandwala Compound, Gandivali,
Gata No. 4, Pune - 411 004

APEX HOSPITAL

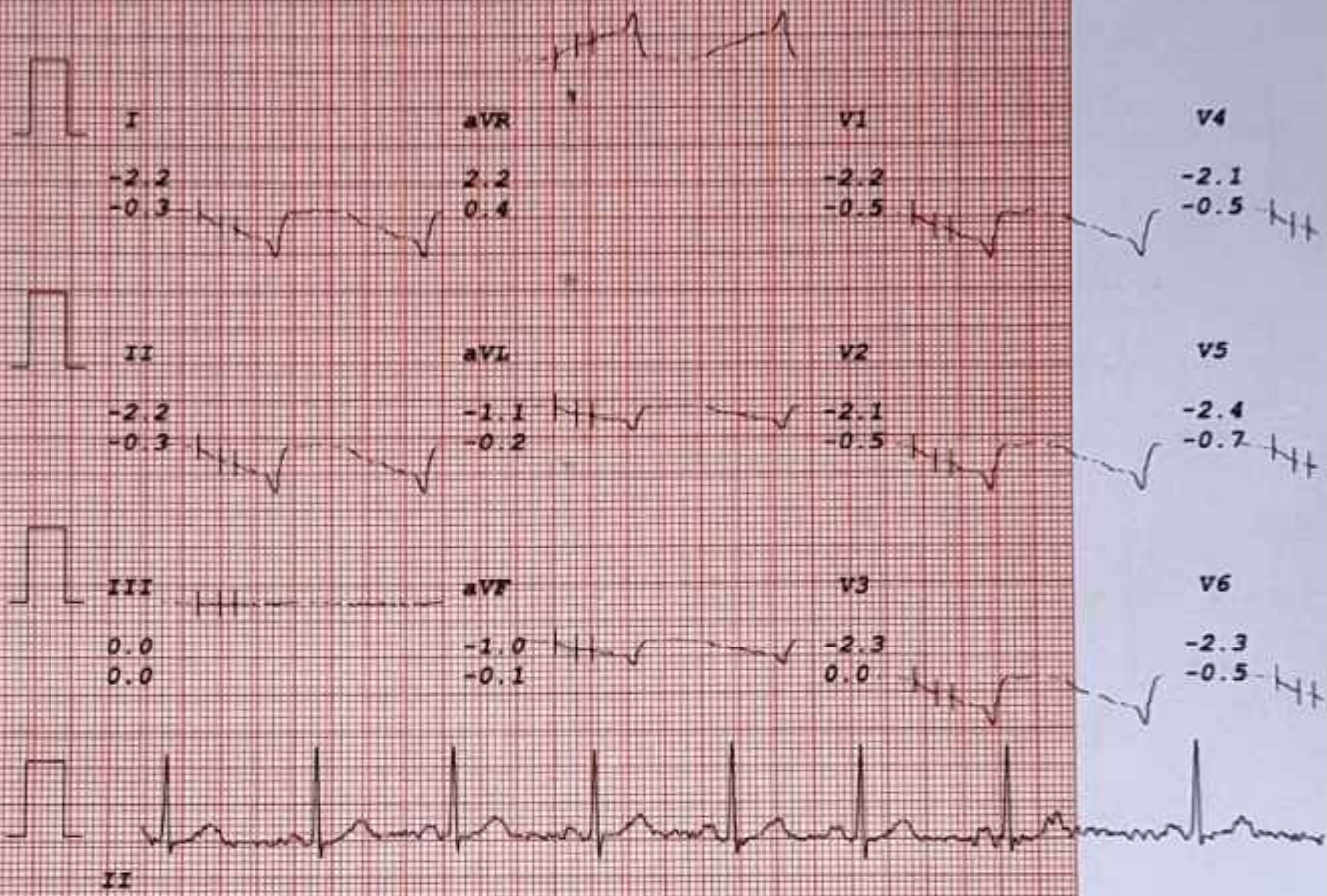
MR. SUNIL JADHAV
I.D. 8902
Age 59/M
Date 24-02-2024

RATE 75bpm
B.P. 130/80

PRETEST
HYPERVENT

ST @ 10mm/m
80ms PostJ

PHASE TIME 0:02



None corrected

UNIT-80, JADAVJI, TEL: +91-731-6280035, Fax: +91-

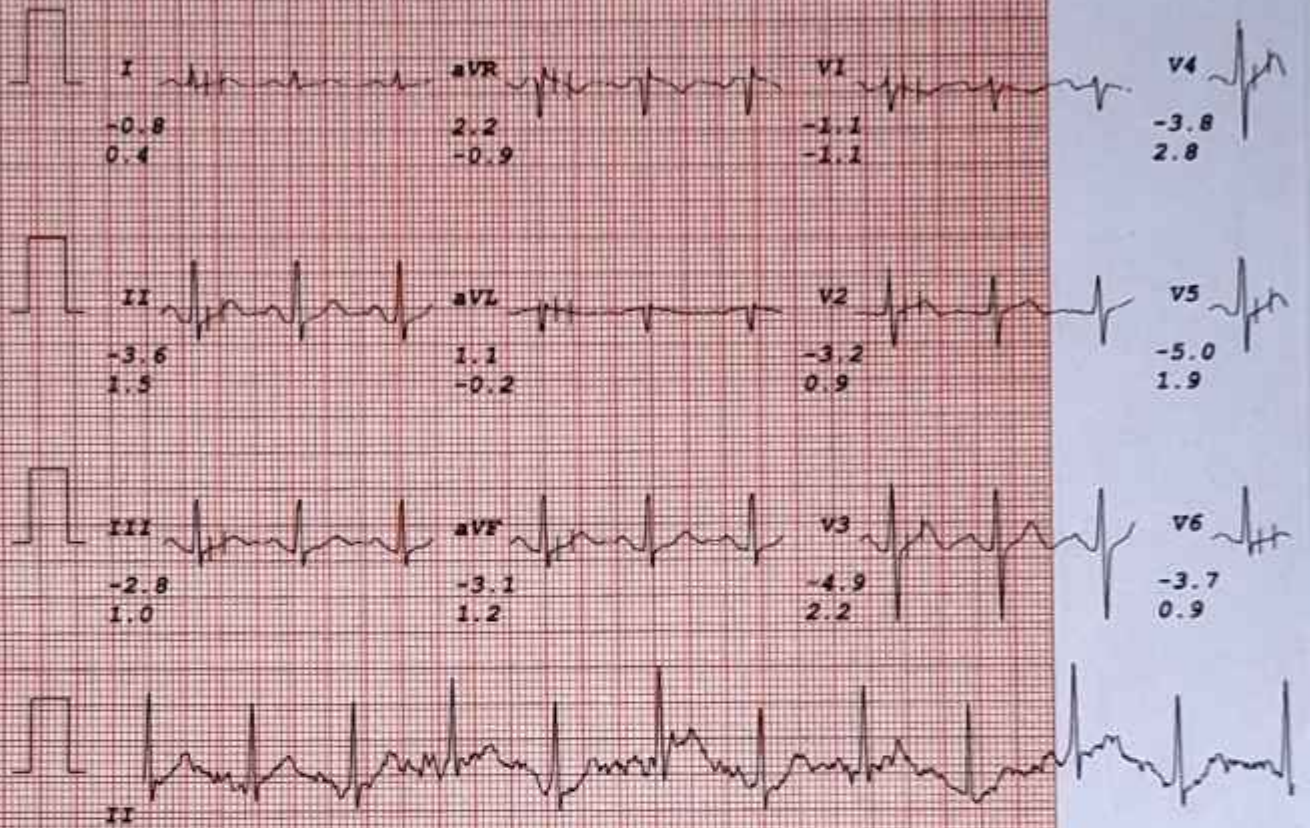
APEX HOSPITAL

MR. SUNIL JADHAV
I.D. 8902
Age 59/M
Date 24-02-2024

RATE 105bpm
B.P. 140/80

Bruce
Stage 1
TOTAL TIME 2:55
PHASE TIME 2:55

ST # 10mm/m
80ms PostJ
Speed 2.7 k
SLOPE 10 %



Base Corrected

UNIT - 80, Lohokar, P.O. - 41-731-4030033, Fax: +91-

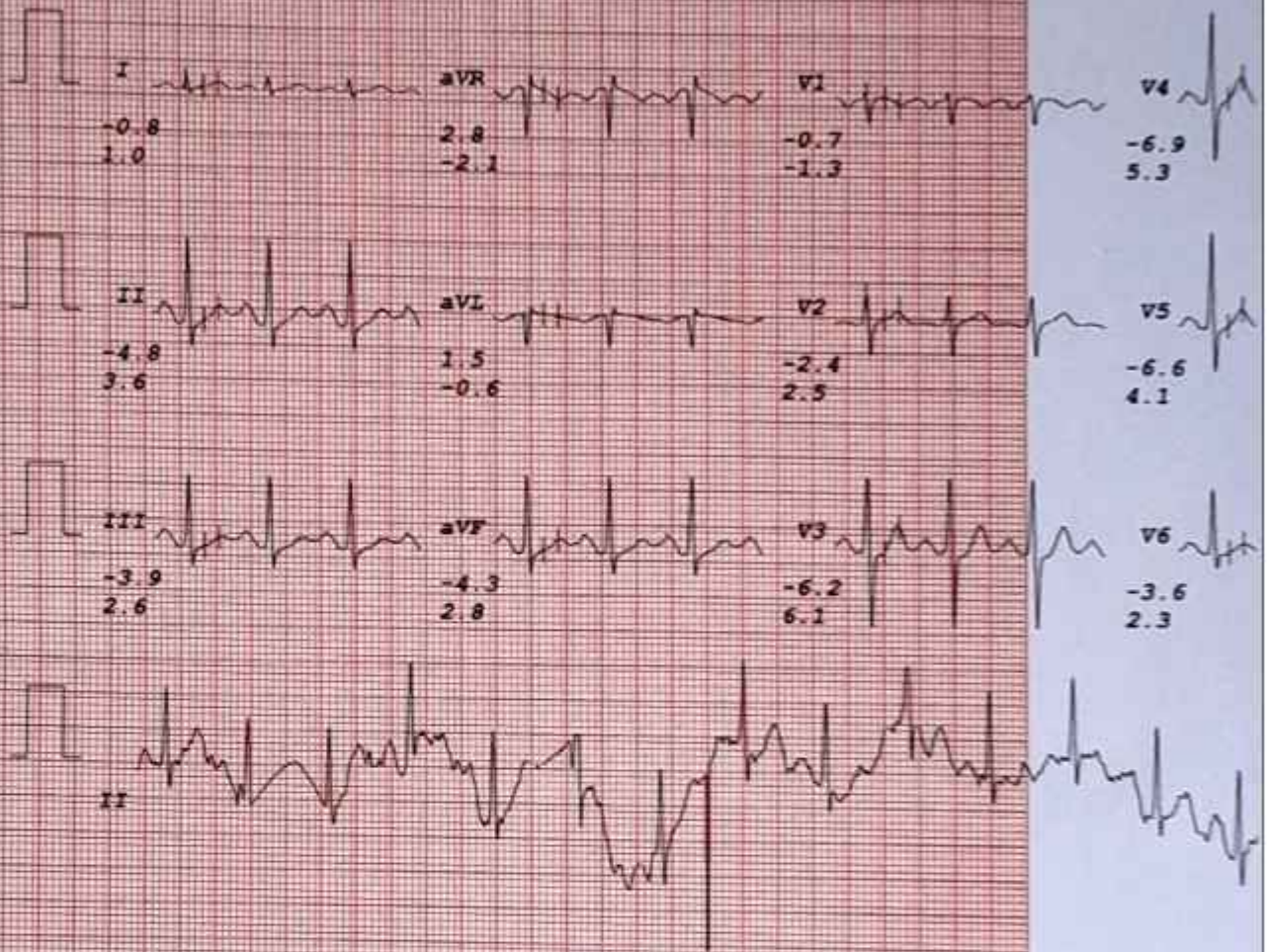
APEX HOSPITAL

MR. SUNIL JADNAV
I.D. 8902
Age 59/M
Date 24-02-2024

RATE 130bpm
B.P. 140/90

Bruce
Stage 2
TOTAL TIME 5:55
PHASE TIME 2:55

ST # 10mm/m
80ms PostJ
Speed 4 km/
SLOPE 12 *



BASE CORRECTED

GM-96, Dallas, Tex., 41-731-4230225, Fax: 41-

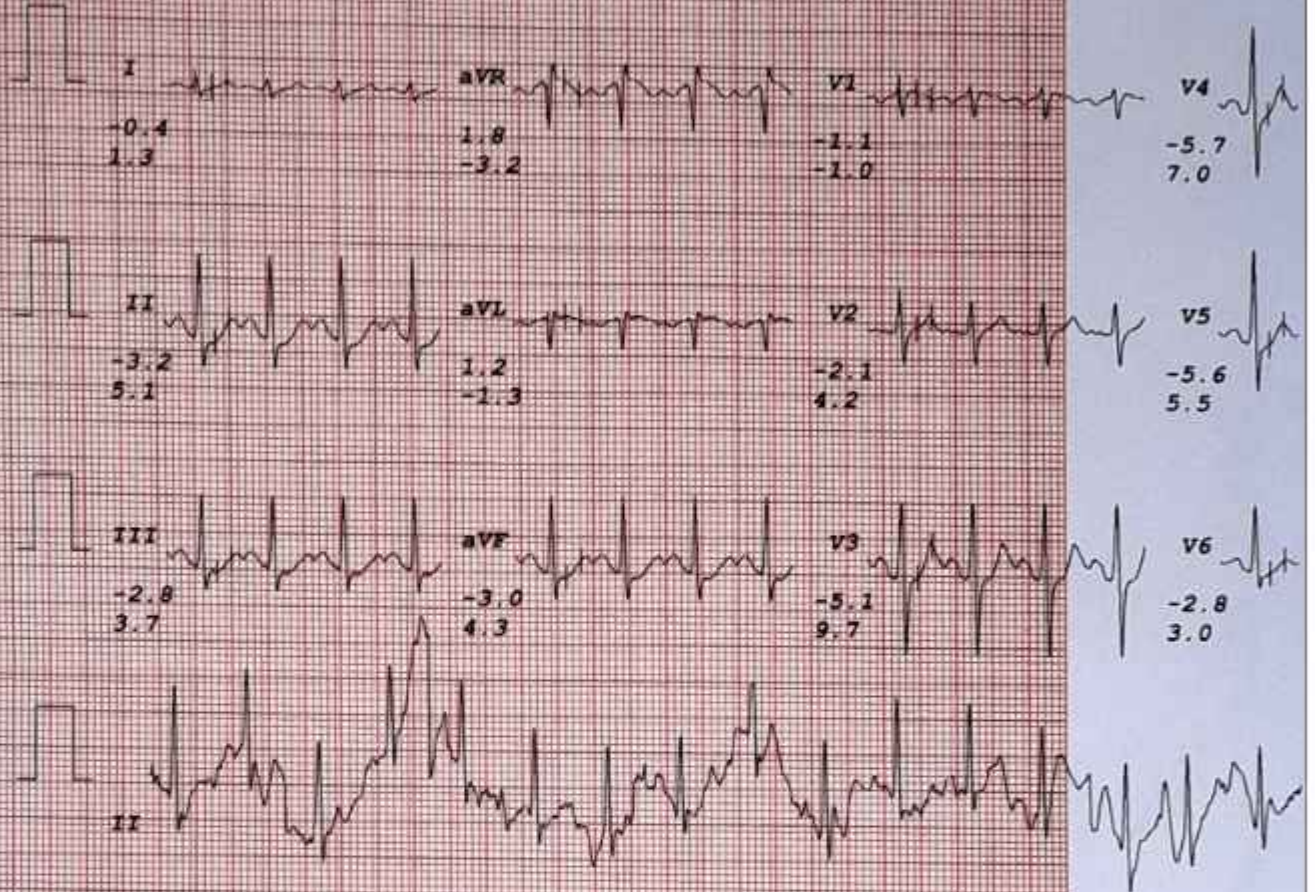
APEX HOSPITAL

MR. SUNIL JADHAV
I.D. 8902
Age 59/M
Date 24-02-2024

RATE 153bpm
B.P. 140/90

Bruce
Stage 3
TOTAL TIME 8:55
PHASE TIME 2:55

ST @ 10mm/m
80ms PostJ
Speed 5.4 k
SLOPE 14 %



BASE CORRECTED

91-731-403035, Fax: +91-

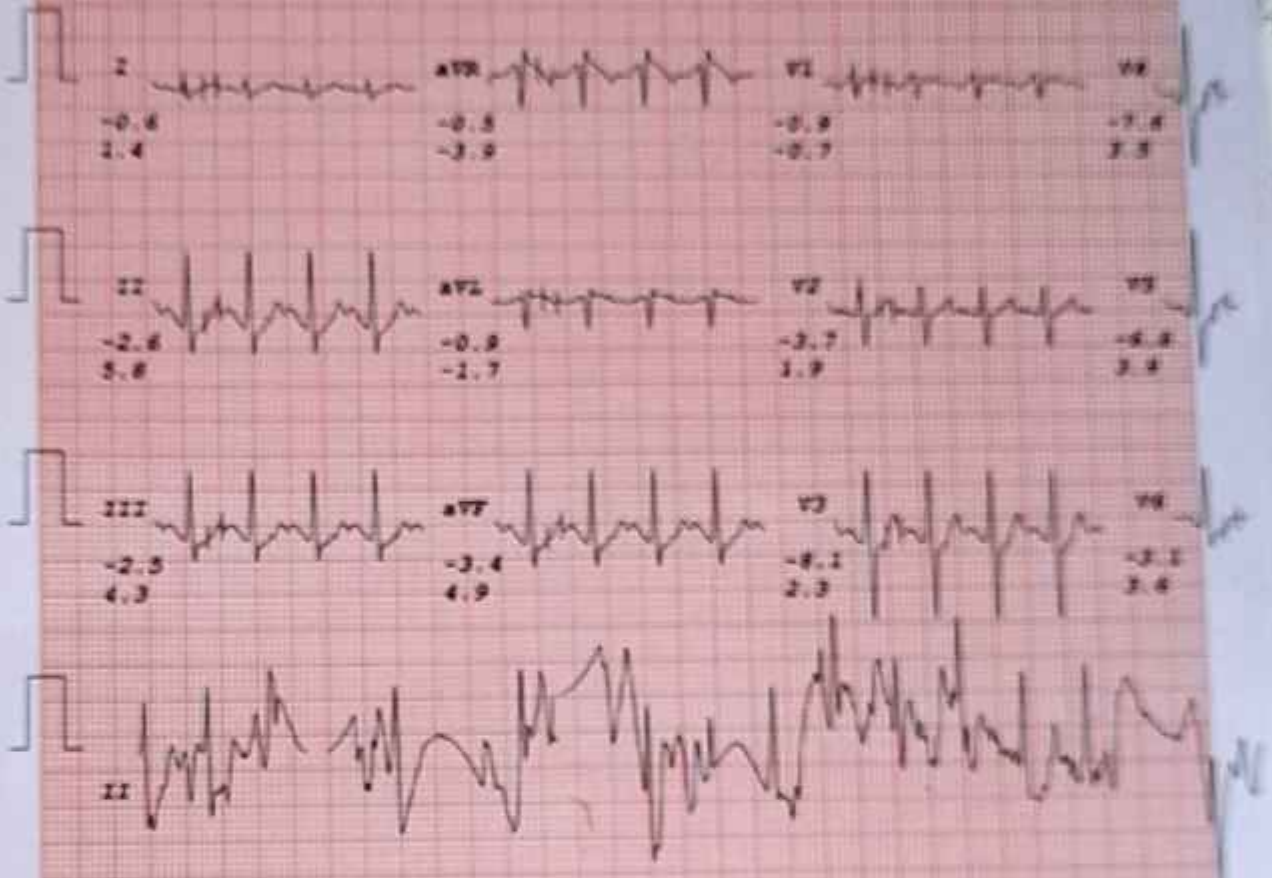
APEX HOSPITAL

MR. JINDU JATHAV
I.D. 8802
Age 58/M
Date 24-02-2024

DATE 1712pm
R.P. 140/90

Route
PR-EXERCISE
TOTAL TIME 9:34
PULSE TIME 0:32

ST 2 10mm/1s
Flow 100%
Speed 4.75
ECG 14 4



Lead Connected

Small text at the bottom right of the grid, likely a copyright or manufacturer notice.

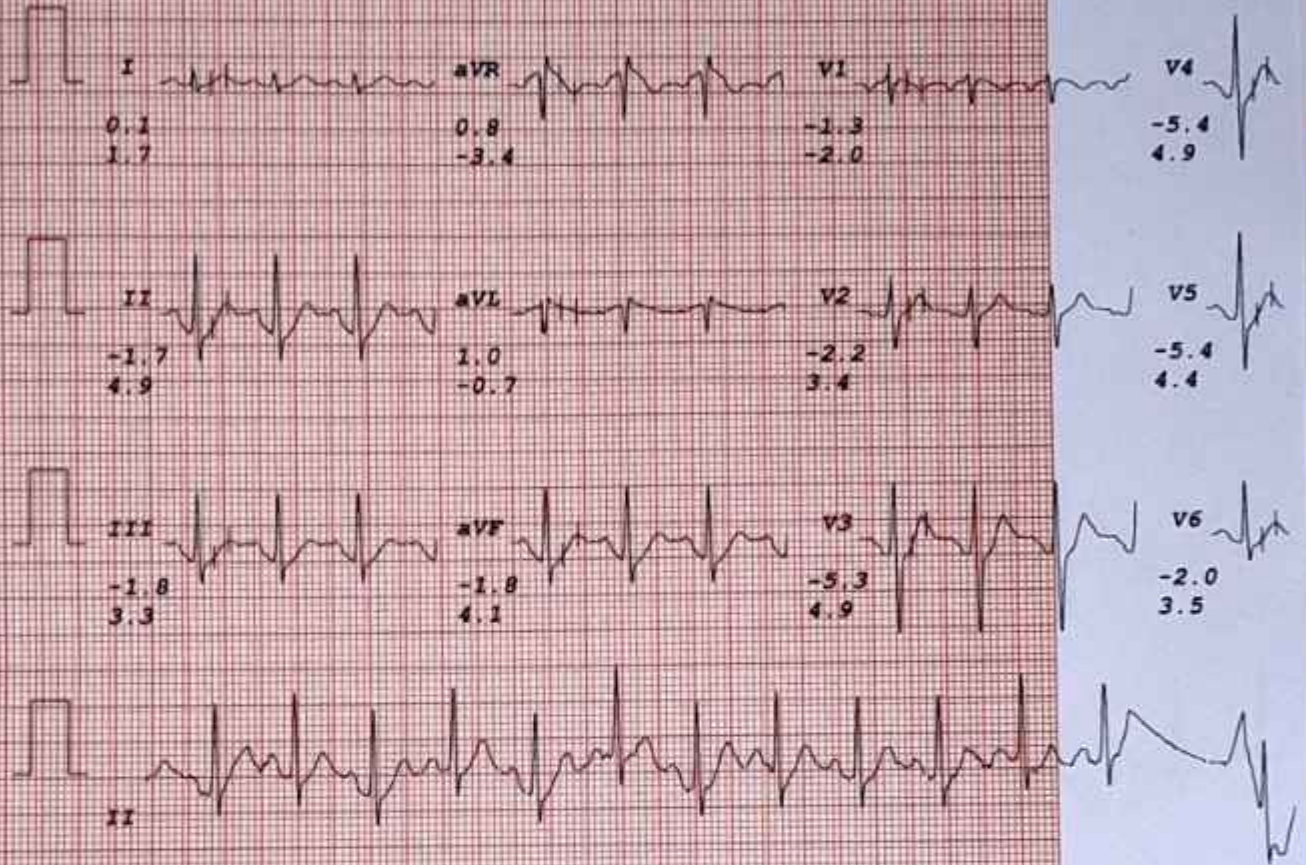
APEX HOSPITAL

MR. SUNIL JADHAV
I.D. 8902
Age 59/M
Date 24-02-2024

RATE 135bpm
B.P. 140/90

Bruce
RECOVERY
TOTAL TIME 10:37
PHASE TIME 0:29

ST @ 10mm/m
80ms PostJ



Basic Corrected

Unit - 04, Indira 2nd Flr, +91-731-4030035, Fax: +91-

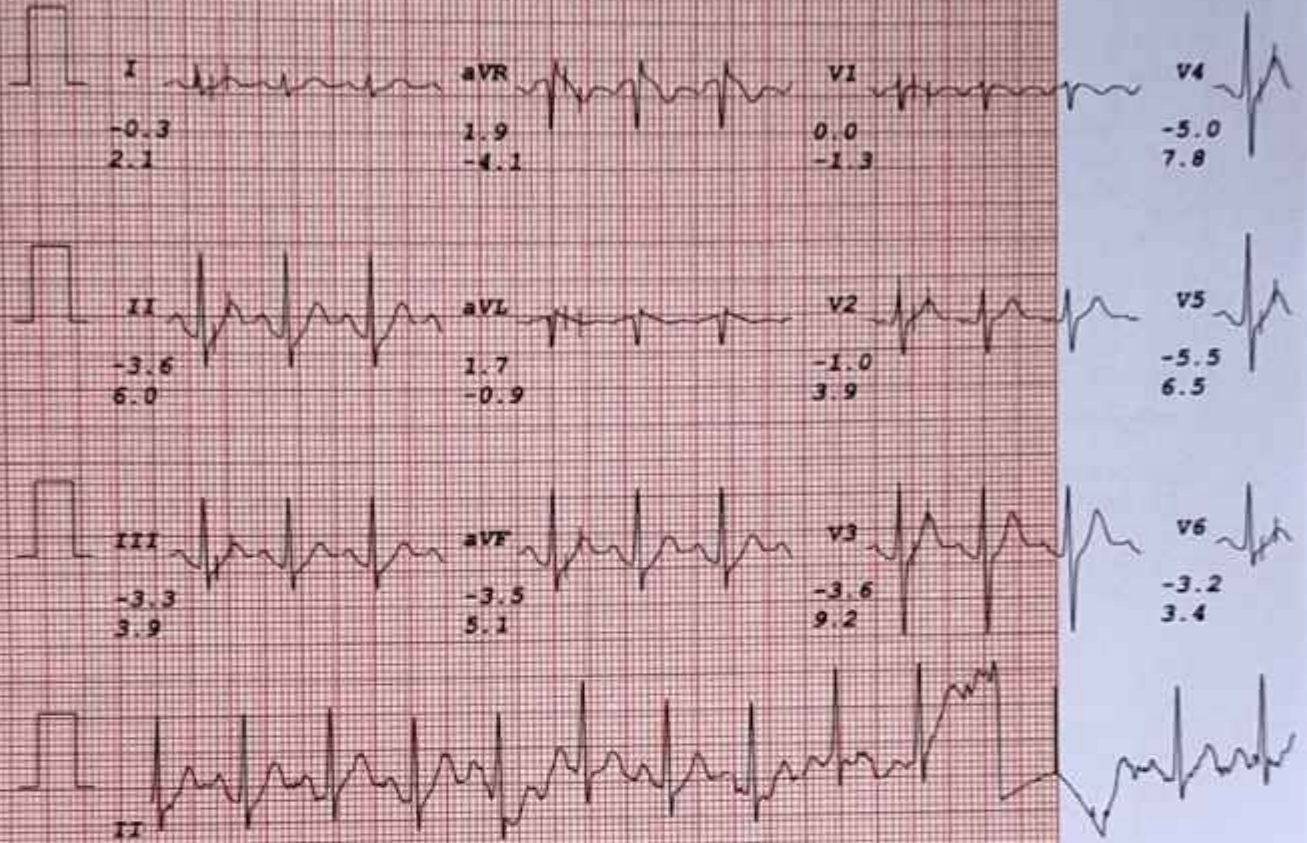
APEX HOSPITAL

MR. SUNIL JADHAV
I.D. 8902
Age 59/M
Date 24-02-2024

RATE 129bpm
B.P. 140/90

Bruce
RECOVERY
TOTAL TIME 11:06
PHASE TIME 0:58

ST @ 10mm/m
80ms PostJ



PRINCE ELECTRONICS

101-DK, Dabra, Tel. +91-732-4030035, Fax: +91-

APEX HOSPITAL KANDIVALI

MR. SUNIL JADHAV

ID : 8902
 DATE : 26-02-2024
 AGE/SEX : 59 / M
 HT/WT : 166 / 57
 REF. BY : APEX HOSPITAL

TREADMILL TEST REPORT

PROTOCOL : Bruce
 HISTORY :
 INDICATION :
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	B.P. mmHg	RPP x100
EUPINE					74	130 / 80	96
HYPERVENT		0:2			75	130 / 80	97
Stage 1	2:55	2:55	2.7	10	105	140 / 80	147
Stage 2	5:55	2:55	4	12	130	140 / 90	182
Stage 3	8:55	2:55	5.4	14	155	140 / 90	217
PK-EXERCISE	9:56	0:56	6.7	16	173	140 / 90	239
RECOVERY	10:37	0:29			135	140 / 90	189
RECOVERY	11:6	0:58			128	140 / 90	180
RECOVERY	11:14	1:6			121	140 / 90	169

RESULTS

EXERCISE DURATION : 9:56 MAX WORK LOAD
 MAX HEART RATE : 173 bpm 107 % of target heart rate 161 bpm
 MAX BLOOD PRESSURE : 140 / 80 mm Hg
 REASON OF TERMINATION :

BP RESPONSE :
 ARRYTHMIA :
 H.R. RESPONSE :

IMPRESSIONS :

Technician : 44

UNIT-26, Indore. Tel : +91-731-6030035, Fax : +91-731-6030090, E-Mail : apex@apexhospitals.com

APEX HOSPITAL KANDIVALI

MR. SUNIL JADHAV
 ID : 8902
 DATE : 24-02-2024
 AGE/SEX : 59 / M
 HT/WT : 166 / 57
 REF. BY : APEX HOSPITAL

TREADMILL TEST REPORT
 PROTOCOL : Bruce
 HISTORY :
 INDICATION :
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	B.P. mmHg	RPP x100
SUPINE					74	140 / 80	96
HYPERVENT		0:2			75	130 / 80	97
Stage 1	2:35	2:55	2.7	10	105	140 / 80	147
Stage 2	5:35	2:55	4	12	130	140 / 90	182
Stage 3	8:35	2:55	5.4	14	155	140 / 90	217
PK-EXERCISE	9:56	0:56	6.7	16	171	140 / 90	255
RECOVERY	10:37	0:29			135	140 / 90	189
RECOVERY	11:16	0:58			123	140 / 90	180
RECOVERY	11:14	1:16			121	140 / 90	169

RESULTS

EXERCISE DURATION : 9:56 MAX WORK LOAD
 MAX HEART RATE : 173 bpm 107 % of target heart rate 161 bpm
 MAX BLOOD PRESSURE : 140 / 80 mm Hg
 REASON OF TERMINATION :

BP RESPONSE :
 ARRHYTHMIA :
 H.R. RESPONSE :

IMPRESSIONS

Technician : 44

(INC) K. Indore Toll : +91-731-8036035, Fax: +91-731-8031100, E-Mail: apex@apexhospitals.com

2024

DEC

APEX HOSPITAL KANDIVALI

MR. SUNIL JADHAV
 ID : 8902
 DATE : 24-02-2024
 AGE/SEX : 53 / M
 H/T/W : 166 / 57
 REF. BY : APEX HOSPITAL

TREADMILL TEST REPORT

PROGNO : Bruce
 HISTORY :
 INDICATION :
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/hr	GRADE %	H.R. bpm	B.P. mmHg	RPP x100
SUPINE					74	130 / 80	96
HYPERVENT		0:2			75	130 / 80	97
Stage 1	2:55	2:55	2.7	10	105	140 / 90	187
Stage 2	5:55	2:55	4	12	130	140 / 90	217
Stage 3	8:55	2:55	5.4	14	155	140 / 90	239
PK-EXERCISE	9:56	0:56	6.7	16	171	140 / 90	189
RECOVERY	10:37	0:29			135	140 / 90	180
RECOVERY	11:6	0:58			129	140 / 90	169
RECOVERY	11:14	1:6			121	140 / 90	169

RESULTS

EXERCISE DURATION : 9:56
 MAX HEART RATE : 173 bpm 107 % of target heart rate 161 bpm
 MAX BLOOD PRESSURE : 140 / 80 mm Hg
 REASON OF TERMINATION :

BP RESPONSE :
 ARRHYTHMIA :
 H.R. RESPONSE :
IMPRESSIONS :

Technician : 44

Unit - 6A, Indore. Tel : +91-731-4200433, Fax : +91-731-4201190, E-Mail : apex@apexhospitals.com

APEX HOSPITAL KANDIVALI

MR. SUNIL JADHAV

ID : 8902
 DATE : 24-02-2024
 AGE/SEX : 59 / M
 HT/WT : 166 / 57
 REF. BY : APEX HOSPITAL

TREADMILL TEST REPORT

PROTOCOL : Bruce
 HISTORY :
 INDICATION :
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	B.P. mmHg	RPP x100
SUPINE					74	130 / 80	98
HYPERVENT		0:2			75	130 / 80	97
Stage 1	2:55	2:55	2.7	10	105	140 / 80	147
Stage 2	5:55	2:55	4	12	130	140 / 90	182
Stage 3	8:55	2:55	5.4	14	155	140 / 90	217
PK-EXERCISE	9:56	0:56	6.7	16	171	140 / 90	239
RECOVERY	10:37	0:29			135	140 / 90	189
RECOVERY	11:6	0:58			129	140 / 90	180
RECOVERY	11:14	1:6			121	140 / 90	169

RESULTS

EXERCISE DURATION : 9:56 MAX WORK LOAD
 MAX HEART RATE : 173 bpm 107 % of target heart rate 161 bpm
 MAX BLOOD PRESSURE : 140 / 80 mm Hg
 REASON OF TERMINATION :

BP RESPONSE :
 ARRHYTHMIA :
 H.R. RESPONSE :

IMPRESSIONS :

Technician : 44

ABC-EM, Thiruvananthapuram, Tel.: 495-135-4330630, Fax: 495-135-4331190, E-MAIL: abc@abc1064850218.com

APEX HOSPITAL KANDIVALI

MR KORAH SINGRAY

ID : 8921
 DATE : 22-02-2024
 AGE/SEX : 45 / M
 HT/WT : 1.65 / 72
 REF. BY :

TREADMILL TEST REPORT

PROTOCOL : Bruce
 HISTORY :
 INDICATION :
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	B.P. mmHg	EPP x100
SUPINE					65	120 / 80	78
Stage 1	2:55	2:55	2.7	10	95	120 / 80	114
Stage 2	5:55	2:55	4	12	120	130 / 90	156
Stage 3	8:55	2:55	5.4	14	150	150 / 90	225
Stage 4	11:55	2:55	6.7	16	169	150 / 90	253
PK-EXERCISE	12:37	0:37	8	18	173	150 / 90	259
RECOVERY	13:21	0:29			157	150 / 90	235
RECOVERY	14:18	1:26			124	160 / 100	199

RESULTS

EXERCISE DURATION : 12:37 MAX WORK LOAD
 MAX HEART RATE : 176 bpm 100 % of target heart rate 175 bpm
 MAX BLOOD PRESSURE : 160 / 100 mm Hg
 REASON OF TERMINATION :

BT RESPONSE :

ARHYTHMIA :

H.R. RESPONSE :

IMPRESSIONS :

Technician : 44

APEX HOSPITALS KANDIVALI

DMS-EM, Mysore. Tel: +91-732-4030025, Fax: +91-732-4001190. E-Mail: apex@apexhospitals.com



APEX HOSPITALS KANDIVALI

A Superspeciality Hospital

CASHLESS
FACILITY

Akurli Road, Next to Lodha Woods, Lokhandwala Township,
Near Mahindra Gate No. 4, Kandivali (E), Mumbai 400101.
email: info@apexhospitals.in | www.apexgroupofhospitals.com



Tele.:
022-62747000 (100 Lines)

Mr. Jadhav Sunil Age-59/m

B.P - 140/90

P - 62

SpO2 - 99

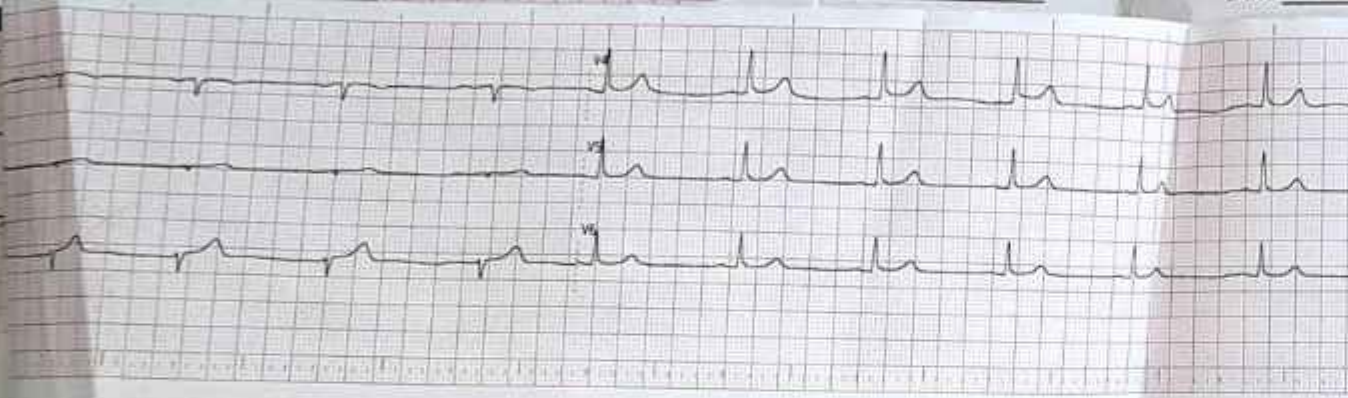
Wt - 75 kg

H.P - 166

ORTHOPEDIC | SPINE | CARDIOLOGY | GENERAL SURGERY | LAPAROSCOPY | CRITICAL CARE | GASTROENTEROLOGY | CANCER | DIABETOLOGY
NEUROLOGY | NEPHROLOGY | VASCULAR SURGERY | ENT | OPHTHALMOLOGY | PLASTIC SURGERY | UROLOGY | PEDIATRIC SURGERY

श्री मेधा कॉलेज ऑफ मेडिसिन

Date _____ Time _____ Age _____ Gender _____



ECG report

ID : 20240224082324
Name _____
Gender _____
Age _____
Dept _____
Bed No _____

HR : 56 bpm
PR : 164 ms
QRS : 80 ms
QT/QTc : 398/391 ms
P/QRS/T : 73/25/50°
RV5/SV1 : 1.524/0.617 mv
RV5+SV1 : 2.141 mv

<<Interpretation>>

Confirm and sign: _____
Examination time: 2024-02-24 08:23:24