



Mediwheel
...Your wellness partner

Arcofemi Healthcare Pvt Ltd

(Formerly known as Arcofemi Healthcare Ltd)

F-701A, Lado Sarai, Mehrauli, New Delhi - 110030

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CIN: U24240DL2011PTC216307

MEDICAL FITNESS CERTIFICATE

(To be signed by a registered medical practitioner holding a Medical degree)

This is to certify that **Mr. Hem Chandra** aged, **26yr**. Based on the examination, I certify that he is in good dental and physical health and it is free from any physical defects such as deafness, color blindness, and any chronic or contagious diseases.

Place: Haldwani

Date: 11/10/2024

Dr. Nitesh Kumar
BCMR 47093
Name & Signature of

Medical officer

OPD PRESCRIPTION			
MR NO	: 179109	Token No	: 4
UHID NO.	: 84401	Location	: Haldwani
Patient Name	: Mr. HEM CHANDRA BHATT	Issue Date	: 09-13-27 am 11/10/2024
Age Sex	: 57 Years Male	Mobile No.	: 9634744584
Relative name	: S/O MR BHUWAN CHANDRA BHATT	Org. Name	: Hospital
Address	: CHIT COLONY HALDWANI	Doctor Name	: DR (MAJ) SAURABH MAYANK
		Speciality	: INTERNAL MEDICINE

BP - 110/80 mmHg

SPO₂ 97%

PR 86/min T(N)

Routine Health check

All investigations within normal range.





Company

OUT PATIENT PRESCRIPTION	
LOC SV NO. : 112630	Location : Haldwani
UHID NO. : 84401	Date : 11/10/2024 09:16:12 am
Patient Name : Mr. HEM CHANDRA BHATT	Mobile : 9634744584
Age : 26 Years	Org. name : Hospital
Sex : Male	Consultant : DR MAANSI SETHI ARORA
Relative name : S OMR BHUWAN CHANDRA BHATT	Speciality : OPHTHALMOLOGIST
Address : CMT COLONY HALDWANI	Token No. : 1

109

BP - 110/80 mmHg

SpO2 97%

PR 86/min

Ⓢ

V_A < 6/6
6/6

AR < +0.25 DS / -0.75 DC X 4°
+0.25 DS / -0.75 DC X 3°

No acceptance as per Pl.

no need glasses as per patient

Co - Routine eye test
glasses - nil

P.C. use 5.2 hrs [Nil systemic day]

By

Final vision NWC
Routine eye test 6 months

Dr. MAANSI SETHI
MBBS, MS Ophth (I) HMC New Delhi
Ex. Consultant St. Stephen's Hospital
New Delhi Cont. Ophthalmology
E-DHMC Regd. No. 12890
Ujala Cygnus Central Hospital Haldwani
Ujala Cygnus Healthcare Services

Date	11/10/2024 09:48:52 AM	Srl No.	1014	UHID No.	OPD-84401
Name	Mr. HEM CHANDRA BHATT	Age	25 Yrs.	Printed on 11/10/2024 12:33 PM	
Ref. By	Dr. SAURABH MAYANK	Sex	M		

Test Name	Value	Unit	Normal Value
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COMPLETE HAEMOGRAM

Erba Mannheim Elite 580

HAEMOGLOBIN (Hb)	15.4	gm / dL	13.5 - 18.0
TOTAL LEUCOCYTE COUNT (TLC)	6,190	cells / cu mm	4000 - 11000

DIFFERENTIAL LEUCOCYTE COUNT (DLC)

NEUTROPHIL	47	%	40 - 75
LYMPHOCYTE	44	%	20 - 40
EOSINOPHIL	01	%	01 - 06
MONOCYTE	08	%	02 - 10
BASOPHIL	00	%	0 - 0
RBC COUNT	5.30	million / cu mm	4.5 - 5.5
P.C.V / HAEMATOCRIT	46.2	%	40 - 54
M C V	87.17	fl.	80 - 100
M C H	29.057	Picogram	27.0 - 31.0
M C H C	33.33	gm / dL	32 - 36
PLATELET COUNT	2,19,000	Lakh / cu mm	150000 - 400000
ESR	15	mm / 1st hr	0 - 15

VESMATIC EASY - AUTOMATED

**** End Of Report ****

LAB TECHNICIAN

Hospital Address : Gas Godam Tiraha, Kusumkhara, Kaladhungi Road, Haldwani (Nainital), U.K. | **Tel No. :** 05946-260242 | **www.ujalacygnus.com**
A unit of Cygnus Medicare Private Limited | Regd. Office : Unit No.- 306, Third Floor, DLF Star Tower Sector-30, Gurgaon, Haryana - 122001 | **MBBS DNB PATHOLOGY**
Corp. Office : "Ujala Cygnus Healthcare Services" A-9A, Green Park Main, New Delhi-110016 | **Tel No. :** 011-41750891 | **Website :** ujalacygnus.com | **Email :** info@ujalacygnus.com
Ujala Cygnus Hospitals : Haryana : Sonpat | Panipat | Karnal | Kurukshetra | Kaithal | Bahadurgarh | Rewari | Delhi : Nangla | Rama Vihar | Uttar Pradesh : Varanasi | Kanpur | Agra | Moradabad | Uttaranchal : Kashipur | Haldwani | Stargarh | Jammu & Kashmir : Srinagar
CIN : U85190DL2011PTC391657



Date 11/10/2024 09:48:52 AM
Name Mr. HEM CHANDRA BHATT
Ref. By Dr. SAURABH MAYANK

Srl No. 1014
Age 25 Yrs.
Sex M

UHID No. OPD-84401
Printed on 11/10/2024 12:33 PM

Test Name	Value	Unit	Normal Value
-----------	-------	------	--------------

HAEMATOLOGY

Hb A1c	5.3	%	
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EXPECTED VALUES :-

Metabolically healthy patients	=	4.8 - 5.5 % HbA1c
Good Control	=	5.5 - 6.8 % HbA1c
Fair Control	=	6.8 - 8.2 % HbA1c
Poor Control	=	>8.2 % HbA1c

REMARKS:-

In vitro quantitative determination of **HbA1c** in whole blood is utilized in long term monitoring of glycaemia . The **HbA1c** level correlates with the mean glucose concentration prevailing in the course of the patient's recent history (approx - 6-8 weeks) and therefore provides much more reliable information for glycaemia monitoring than do determinations of blood glucose or urinary glucose. It is recommended that the determination of **HbA1c** be performed at intervals of 4-6 weeks during Diabetes Mellitus therapy.

Results of **HbA1c** should be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

**** End Of Report ****

LAB TECHNICIAN

Signature



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Ref. By Dr. SAURABH MAYANK

Srl No. 1014
Age 25 Yrs.
Sex M

UHID No. OPD-84401
Printed on 11/10/2024 12:33 PM

Test Name	Value	Unit	Normal Value
KIDNEY FUNCTION TEST (KFT)			
Roche cobas c 311			
BLOOD UREA Urease / GLDH	18.5	mg / dL	15.0 - 40.0
SERUM CREATININE Jaffe	0.69	mg / dL	0.7 - 1.4
SERUM URIC ACID Enzymatic	5.9	mg / dL	3.4 - 7.0
SODIUM ISE	144.4	mmol/L	136.0 - 145.0
POTASSIUM ISE	4.20	mmol/L	3.5 - 5.10
CALCIUM o-cresolphthaleine complexone	8.5	mg / dL	8.6 - 10.0
INORGANIC PHOSPHORUS molybdate UV	2.5	mg / dL	2.5 - 5.0
TOTAL PROTEIN Biuret	6.3	gm / dL	6.6 - 8.3
ALBUMIN BCP	3.8	gm / dL	3.5 - 5.5
TOTAL CHOLESTEROL CHOD-PAP	129.0	mg / dL	0.0 - 200.0

**** End Of Report ****

[Signature]
LAB TECHNICIAN

[Signature]



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Srl No. 1014
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Sex M

UHID No. OPD-84401
Printed on 11/10/2024 12:33 PM

Test Name	Value	Unit	Normal Value
<u>LIVER FUNCTION TEST (LFT)</u>			
Roche cobas c 311			
BILIRUBIN TOTAL DPD	0.65	mg / dL	0 - 1.2
CONJUGATED (D. Bilirubin) Jendrassik-Grof	0.21	mg / dL	0.00 - 0.30
UNCONJUGATED (I.D.Bilirubin)	0.44	mg / dL	0.00 - 0.70
TOTAL PROTEIN Biuret	6.3	gm / dL	6.6 - 8.3
ALBUMIN BCP	3.8	gm / dL	3.5 - 5.5
GLOBULIN	3.5	gm / dL	2.5 - 4.0
A/G RATIO	0.8	%	0.8 - 2.0
SGOT IFCC	17.4	IU / L	5.0 - 45.0
SGPT IFCC	18.9	IU / L	5.0 - 49.0
ALKALINE PHOSPHATASE IFCC	77.0	U / L	60.0 - 170.0
GAMMA GT IFCC	14.3	IU / L	8.0 - 71.0

**** End Of Report ****

K. S. S.
LAB TECHNICIAN

Anamika Yadav

Date 11/10/2024 09:48:52 AM
 Name Mr. HEM CHANDRA BHATT
 Ref. By Dr. SAURABH MAYANK

Srl No. 1014
 Age 25 Yrs.
 Sex M

UHID No. OPD-84401
 Printed on 11/10/2024 12:33 PM

Test Name	Value	Unit	Normal Value
<u>LIPID PROFILE</u>			
Roche cobas c 311			
TRIGLYCERIDES GPO-PAP	75.4	mg / dL	40.0 - 165.0
HDL CHOLESTEROL DIRECT	60.4	mg / dL	40.0 - 79.4
V L D L	15.08	mg / dL	4.7 - 22.1
LDL CHOLESTEROL DIRECT	53.52	mg / dL	63.0 - 129.0
TOTAL CHOLESTEROL / HDL RATIO	2.136		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	0.886		0.00 - 3.55

**** End Of Report ****

Kaffey
LAB TECHNICIAN

Anika

Date	11/10/2024 09:48:52 AM	Srl No.	1014	UHID No.	OPD-84401
Name	Mr. HEM CHANDRA BHATT	Age	25 Yrs.	Printed on 11/10/2024 12:33 PM	
Ref. By	Dr. SAURABH MAYANK	Sex	M		

Test Name	Value	Unit	Normal Value
THYROID PROFILE			
MINI VIDAS : BIOMERIEUX			
T3 ELFA Method	1.41	ng / mL	0.60 - 1.81
T4 ELFA Method	7.53	ug / dL	4.5 - 10.9
TSH ELFA Method	0.96	uIU / mL	0.35 - 5.50

REFERENCE RANGE

PAEDIATRIC AGE GROUP

0-3 DAYS	1.0 - 20	uIU / mL
3-30 DAYS	0.5 - 6.5	uIU / mL
1 MONTH -5 MONTHS	0.5 - 6.0	uIU / mL
6 MONTHS- 18 YEARS	0.5 - 4.5	uIU / mL

ADULTS	0.35 - 5.50	uIU / mL
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Note: TSH levels are subject to circadian variation, rising several hours before the onset of sleep, reaching peak levels between 11 pm to 6 am. Nadir concentrations are observed during the afternoon. Diurnal variation in TSH level approximates $\pm 50\%$, hence time of the day has influence on the measured serum TSH concentration.

Assay performed on enhanced chemi luminescence system (Centaur-Siemens)

Serum T3,T4 & TSH measurements form the three components of Thyroid screening panel, useful in diagnosing various disorders of Thyroid gland function.

1. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH level.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 levels along with depressed TSH values.

LAB TECHNICIAN

Contd...7



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Test Name	Value	Unit	Normal Value
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3. Normal T4 levels are accompanied by increased T3 in patients with T3 thyrotoxicosis.
4. Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, renal failure and during therapy with drugs like propranolol and propyl thiouracil.
5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, and may be seen in secondary thyrotoxicosis.

**** End Of Report ****

LAB TECHNICIAN



Ujala Cygnus

HEALTHCARE SERVICES

Ujala Cygnus Central Hospital Haldwani



www.ujalacygnus.com

Date 11/10/2024 09:48:52 AM

Srl No. 1014

UHID No. OPD-84401

Name Mr. HEM CHANDRA BHATT

Age 25 Yrs.

Printed on 11/10/2024 12:33 PM

Ref. By Dr. SAURABH MAYANK

Sex M

Test Name	Value	Unit	Normal Value
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BIOCHEMISTRY

BLOOD SUGAR FASTING
HEXOKINASE

107.5 mg / dL

60.0 - 110.0

**** End Of Report ****

Xafsal
LAB TECHNICIAN

Anika

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 PIN : 118519 DL2011PTC391857



Date 11/10/2024 09:48:52 AM
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Ref. By Dr. SAURABH MAYANK

Srl No. 1014
Age 25 Yrs.
Sex M

UHID No. OPD-84401
Printed on 11/10/2024 12:33 PM

Test Name Value Unit Normal Value

SEROLOGY

TOTAL PSA 0.34 ng / mL
ELFA

INTERPRETATION :
Expected Values :

Age (years)	PSA concentrations (ng / mL)	
	Low Limit	High Limit
< 40	0.21	1.72
40 - 49	0.27	2.19
50 - 59	0.27	3.42
60 - 69	0.22	6.16
> 69	0.21	6.77

PSA is reliable tumour marker for already diagnosed prostatic carcinomas. It is uniquely associated only with prostatic tissue, and therefore is specific for it. Baseline levels measured prior to therapeutic intervention and followed later by serial periodical measurements will predict the outcome of therapy. It also helps in early discovery of recurrences, relapses and metastases.

In general, tumor marker levels are directly proportional to the tumour mass and the stage of the cancer. However, it is the rate of change of the tumor marker level which is more important, rather than its absolute value.

A 50% change may be considered clinically significant. It must be emphasised that PSA may also be elevated in benign prostatic hypertrophy and inflammatory conditions of the surrounding genitourinary tract. Therefore, this parameter should never be used as a screening test for diagnosing prostatic carcinomas but only as an aid in follow up studies.

**** End Of Report ****

LAB TECHNICIAN



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Srl No. 1014
Age 25 Yrs.
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UHID No. OPD-84401
Printed on 11/10/2024 12:33 PM

Test Name	Value	Unit	Normal Value
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URINE EXAMINATION TEST

PHYSICAL EXAMINATION

QUANTITY	20	mL	
COLOUR	YELLOW		
TRANSPARENCY	SLIGHTLY TURBID		
SPECIFIC GRAVITY	Q.N.S.		Q.N.S.
PH	6.5		6.0

CHEMICAL EXAMINATION

ALBUMIN	NIL		
SUGAR	NIL		

MICROSCOPIC EXAMINATION

PUS CELLS	1 - 2	/ HPF	
RBCs	NIL	/ HPF	NIL
CASTS	NIL	/ HPF	NIL
CRYSTALS	NIL		NIL
EPITHELIAL CELLS	0 - 1	/ HPF	
BACTERIA	NIL		NIL
OTHERS	NIL		NIL

**** End Of Report ****

LAB TECHNICIAN

CARDIOLOGY

ECHOCARDIOGRAM REPORT

NAME: MR. HEM CHANDRA BHATT **AGE/SEX:** 25/M **DATE:** 11/10/2024

REFERRING DIAGNOSIS: To rule out structural heart disease

ECHOGENECITY : Normal

DIMENSIONS		NORMAL			NORMAL
AO (ed)	3.1cm	(2.1 - 3.7cm)	IVSs	0.7cm	(0.6 - 1.2 cm)
LA (es)	3.0cm	(2.1 - 3.7 cm)	LVIDs	1.0cm	(0.6 - 1.2 cm)
IVSd	1.1cm	(1.5 - 3.0 cm)	LVPWs	1.8 CM	(0.6 - 1.2 cm)
LVIDd	4.0cm	(3.6 - 5.2 cm)	EF	60%	(60% - 85%)
LVPWd	2.8cm	(2.3 - 3.9 cm)	FS	18%	(30% - 42%)

MORPHOLOGICAL DATA

Mitral Valve: Normal

AML : Normal

Interatrial septum

: Intact

PML : Normal

Interventricular Septum

: Intact

Aortic Valve

: Normal

Pulmonary Artery

: Normal

Tricuspid Valve

: Normal

Aorta

: Normal

Pulmonary Valve

: Normal

Right Atrium

: Normal

Right Ventricle

: Normal

Left Atrium

: Normal

Left Ventricle

: Normal

----P.T.O



2-D ECHOCARDIOGRAPHY FINDINGS :

LV normal in size with normal contractions. No LV regional wall motion abnormality in basal state. RV normal in size with adequate contractions. LA and RA normal. No intracardiac mass seen on transthoracic echocardiography. Estimated LV ejection fraction is 60%.

COLOR FLOW MAPPING :

NO MR. NO TR.

IMPRESSION :

- 1. LV Normal in size with normal LV systolic function. (LVEF = 60%).*
- 2. No LV regional wall motion abnormality in basal state.*
- 3. Normal color flow.*
- 4. Normal Cardiac Chamber Dimension.*
- 5. RV normal in size with adequate systolic function.*
- 6. Normal mitral inflow pattern.*
- 7. No I/C Clot/Veg/PE.*

DR. YOGESH NAGENDRA
MBBS, MD, DM (CARDIOLOGY)

NOTE : *Echocardiography report given is that of the procedure done on that day and needs to be assessed in conjunction with the clinical findings. This is not for medicolegal purposes. No record of this report is kept in the hospital.*

DEPARTMENT OF RADIOLOGY & IMAGING

PT.NAME: MR. HEM CHANDRA BHATT

AGE/SEX-26Y/M

UHID NO- 84401

DATE: 11/OCT/2024

REF.BY- DR. (MAJ) SAURABH MAYANK

USG WHOLE ABDOMEN

LIVER: is normal in size, measures approx 12.9 cms and has a normal homogeneous echotexture.

PORTAL VEIN: is not dilated. Intrahepatic biliary radicals are not dilated.

GALL BLADDER: is partially distended with normal wall thickness.

CBD: is not dilated with clear lumen. No calculus is seen.

PANCREAS: Visualized part of pancreas is normal in size, shape with normal homogeneous echotexture. **MPD:** is not dilated.

SPLEEN: is normal in size (~9.2 cms) with normal homogeneous echotexture.

RIGHT KIDNEY: is normal in size and echotexture.

- o Cortical echogenicity is normal.
- o Cortico-medullary demarcation is maintained.
- o Parenchymal thickness appears normal.
- o Pelvicalyceal system is not dilated.

LEFT KIDNEY: is normal in size and echotexture.

- o Cortical echogenicity is normal.
- o Cortico-medullary demarcation is maintained.
- o Parenchymal thickness appears normal.
- o Pelvicalyceal system is not dilated.



-----PTO

URETERS:

- o The upper parts of both the ureters are not dilated.
- o Bilateral vesico-ureteric junctions are not dilated.

URINARY BLADDER: is partially distended.

PROSTATE: is normal in size with normal homogeneous echotexture.

No free fluid is seen in the Morrison's pouch, perihepatic space, perisplenic space, para colic gutter and pelvic cavity.

IMPRESSION: USG appearances are suggestive of -

➤ **No significant abnormality is seen.**

(Adv- Clinico-pathological correlation)



DR. (MAJ) RAVINDER SINGH
MBBS, MD.
CONSULTANT RADIOLOGIST

Number of images-05

This is a professional report based on imaging only and should always be related clinically and with other relevant investigations. This report not for medico-legal purpose. In case of any discrepancy due to machine error or typing error get it rectified immediately.

EMa E:

Report



13851 61860/MR. HEM CHANDRA BHATT / 25 Yrs / M / 0 Cms / 0 Kg
Date: 11/10/2024 03:14:14 PM Refd By : DR YOGESH NAGENDRA Examined By:

Stage	Time	Duration	Speed(mph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Standring	00:06	0:06	00.0	00.0	01.0	079	41%	—/—	000	00	
ExStart	00:19	0:13	00.0	00.0	01.0	079	41%	110/70	086	00	
BRUC Stage 1	03:19	3:00	01.7	10.0	04.7	111	57%	120/80	133	00	
BRUC Stage 2	06:19	3:00	02.5	12.0	07.1	129	66%	130/80	167	00	
BRUC Stage 3	09:19	3:00	03.4	14.0	10.2	161	83%	130/80	209	00	
Peake X	09:57	0:38	04.2	16.0	10.9	163	84%	130/80	211	00	
Recov	10:27	0:30	00.0	00.0	07.3	155	79%	130/80	201	00	
Recov	10:57	1:00	00.0	00.0	04.3	140	72%	140/80	196	00	
Recov	11:57	2:00	00.0	00.0	01.0	108	55%	140/80	151	00	
Recov	12:24	2:27	00.0	00.0	01.0	107	55%	140/80	149	00	

FINDINGS:

- Exercise Time : 09:38
- Initial HR (ExStrt) : 79 bpm 41% of Target 195
- Initial BP (ExStrt) : 110/70 (mm/Hg)
- Max Workload Attained : 10.9 Good response to induced stress
- Max ST Dep Lead & Avg ST Value : III & -0.7 mm in Stage 3
- Duke Treadmill Score : 08.1
- Test End Reasons : Test Complete

Max HR Attained 163 bpm 84% of Target 195
 Max BP Attained 140/80 (mm/Hg)
 VO2Max : 36.2 ml/Kg/min (Fair)

REPORT:

- CONCLUSIONS:
- Stress test is negative for ischemia
 - Blood pressure response to exercise is normal.

Doctor : DR YOGESH NAGENDRA

BRUCE: Standing(0:07)



7385161880 / MR. HEM CHANDRA BHATT / 25 Yrs / M / 0 Cms / 0 Kg / HR : 79

Date: 11 / 10 / 2024 03:14:14 PM

METS: 1.0 / 79 bpm 41% of THR BP: — / — mmHg Combined Medications/BL.C On/Noch On/HF 0.05 Hz/A.F 35 Hz

Ex Time: 00:00 0.0 mph 0.0%

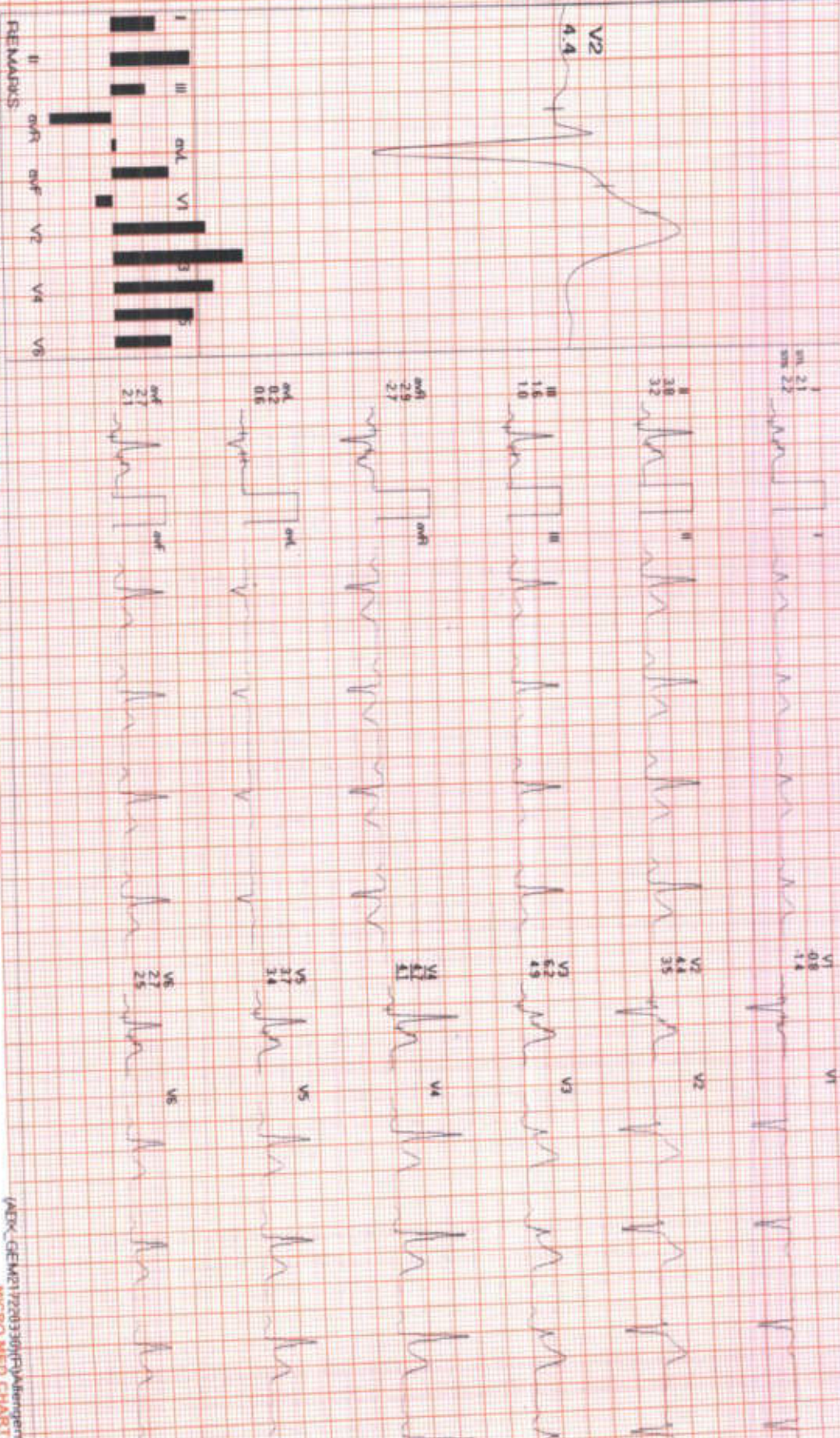
AX 60.16 Post J



1385 161860 / MR. HEM CHANDRA BHATT / 25 Yrs / M / 0 Cms / 0 Kg / HR : 79

Date: 11 / 10 / 2024 03:14:14 PM METS: 1 0/79 bpm 41% of THR EP: 110/70 mmHg Combined Medication/ELC On/Noth On/HF 0.05 H/L/F 35 Hz

4X 50 ms Post J



ExStart



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

BRUCE: Stage 1(3:00)



1385161960 / MR HEM CHANDRA BHATT / 25 YRS / M / 0 Cms / 0 Kg / HR : 111

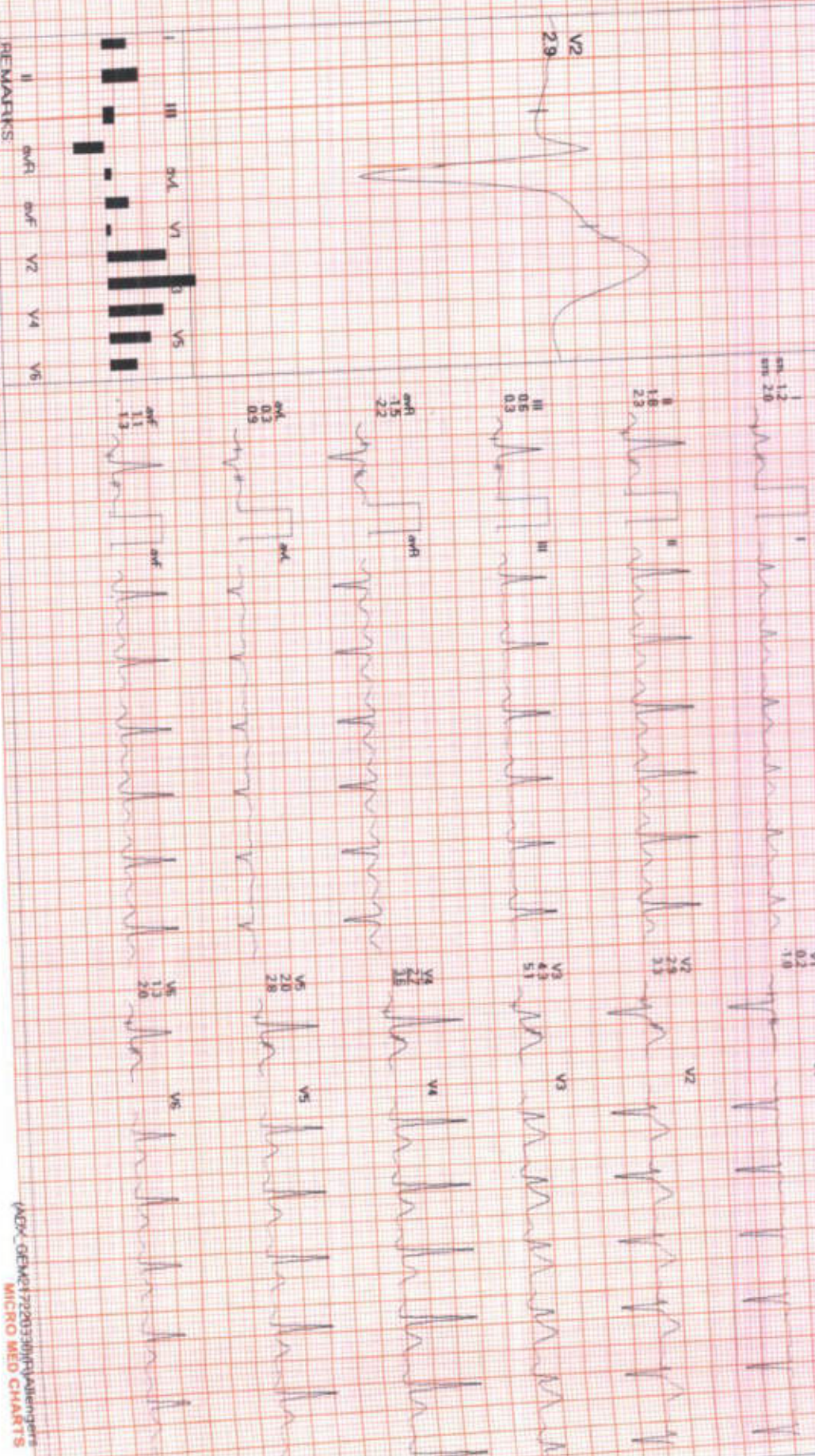
Date 11 / 10 / 2024 03:14:14 PM

NETS 47/111 bpm 57% of THR BP 120/80 mmHg

Combined Medication/BLC On/Noch On/HF 0.05 Hz/LF 35 Hz

EXTIME 03:00 1.7 mph 10.0%
25 mm/Sec 1.8 Cm/mV

AX 20 sec Print



ADSK_GEM7220330101/Allentown
MICRO MED CHARTS

BRUCE: Stage 2(3:00)

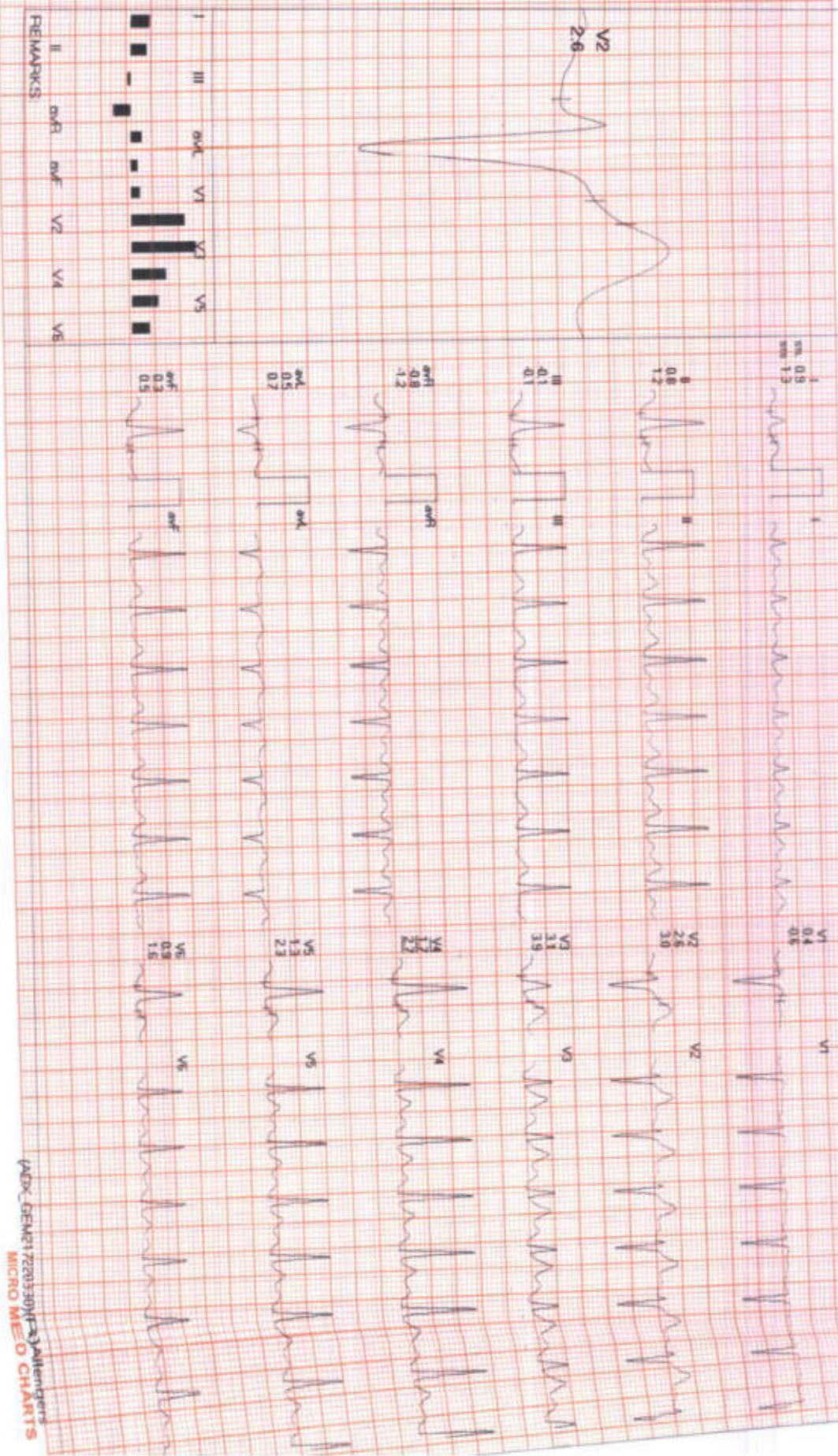


1385161860 / MR. HEM CHANDRA BHATT / 25 Yrs / M / 0 Cms / 0 Kg / HR : 129

Date 11 / 10 / 2024 03:14:14 PM METS: 7.1 / 129 bpm 66% of THR BP: 130/80 mmHg Combined Meds/BLK OW/Naoh OW/HF 0.05 HUNF 35 Hz

ExtTime: 06:00 2.5 mph 12.0%
25 mm/Sec 1.0 Cm/mV

4X 30 ms Post J



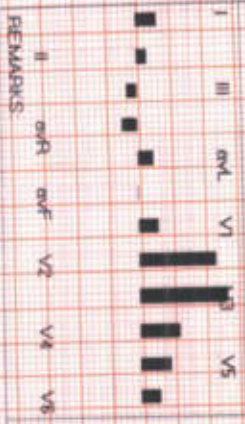
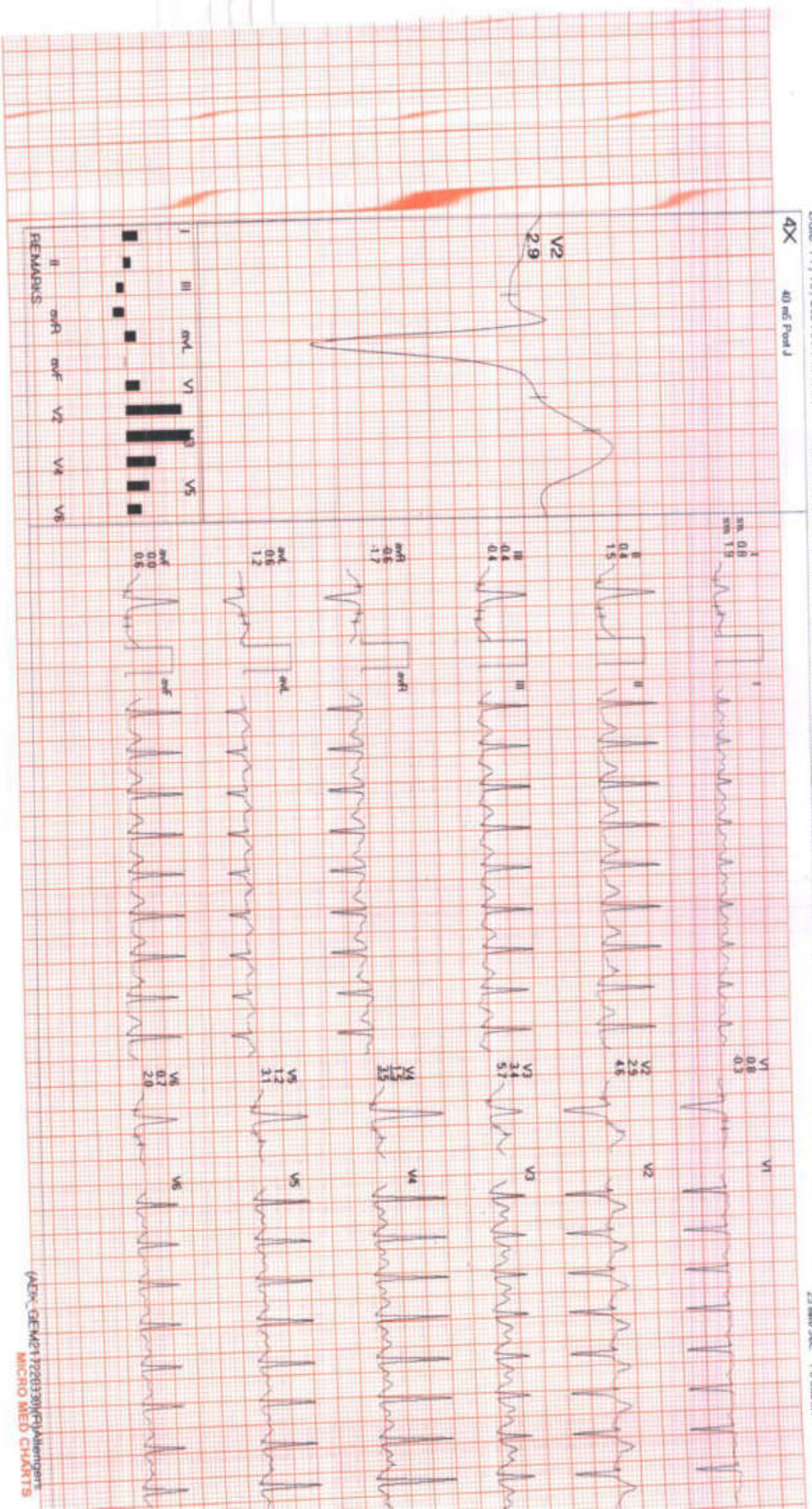
BRUCE: Stage 3(3:00)



1385 161860 / MR HEM CHANDRA BHATT / 25 Yrs / M / 0 Cms / 0 Kg / HR : 161

Date: 11/10/2024 03:14:14 PM METS: 102/161 bpm 83% of THR EPR: 130/98 mmHg Combined Medication/BLC ON/NOCH ON/HR 0.95 HALF 35 Hz

EXTIME 09:00 3.4 mph 14.0%
25 mm/Sec 1.0 Cm/mV



PeaKEX

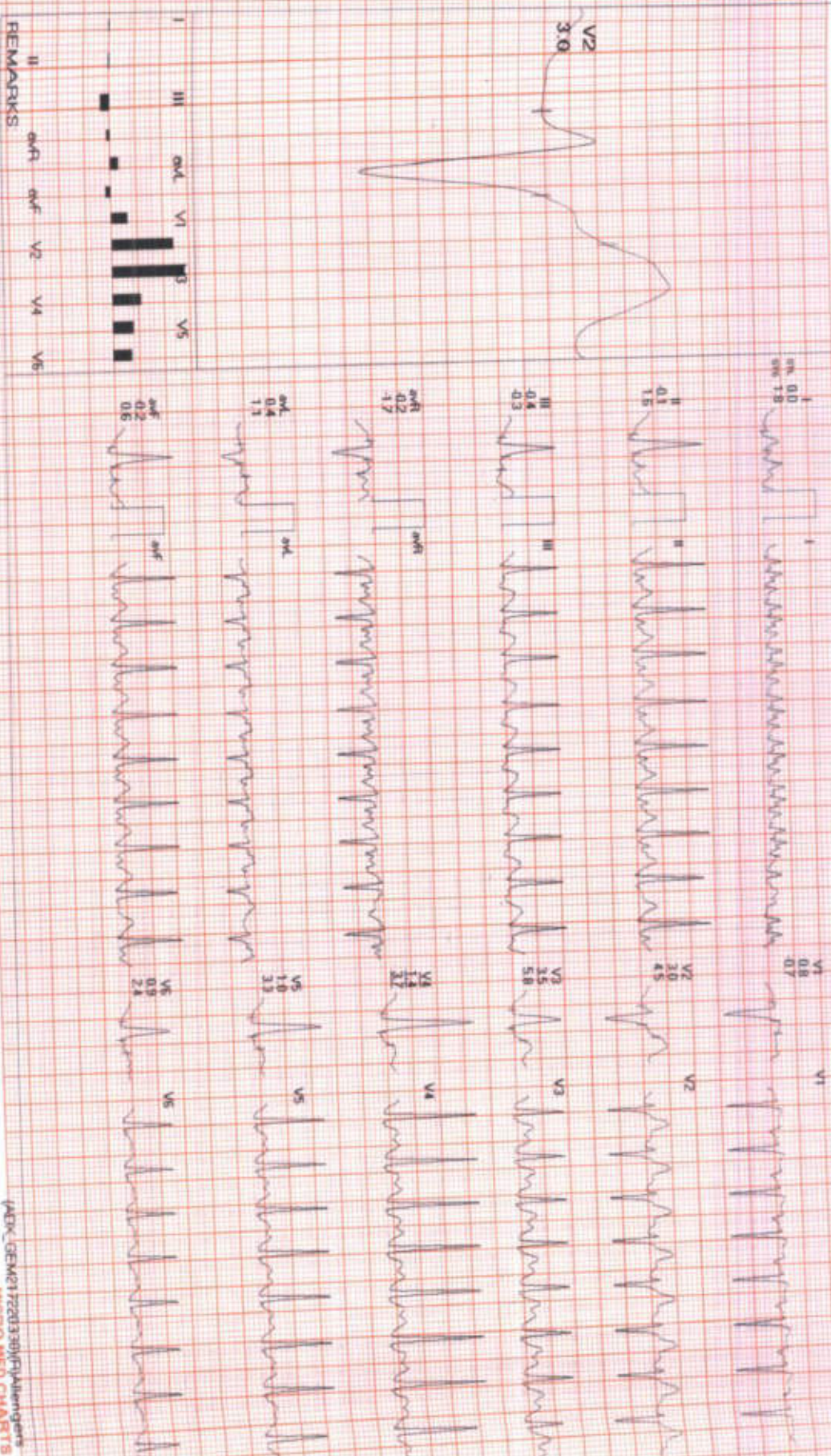


1395161860 / MR. HEM CHANDRA BHATT / 25 Yrs / M / 0 Cms / 0 Kg / HR : 163

Date: 11 / 10 / 2024 03:14:14 PM METS: 10.9/163 bpm 84% of THR BP: 130/80 mmHg Combined Medication/BLG ON/NOCH ON/HR 0.05 HzAEF 35 Hz

ExTme: 09:38 4.2 mph 16.0%
25 mm/Sec 1.0 Cm/Div

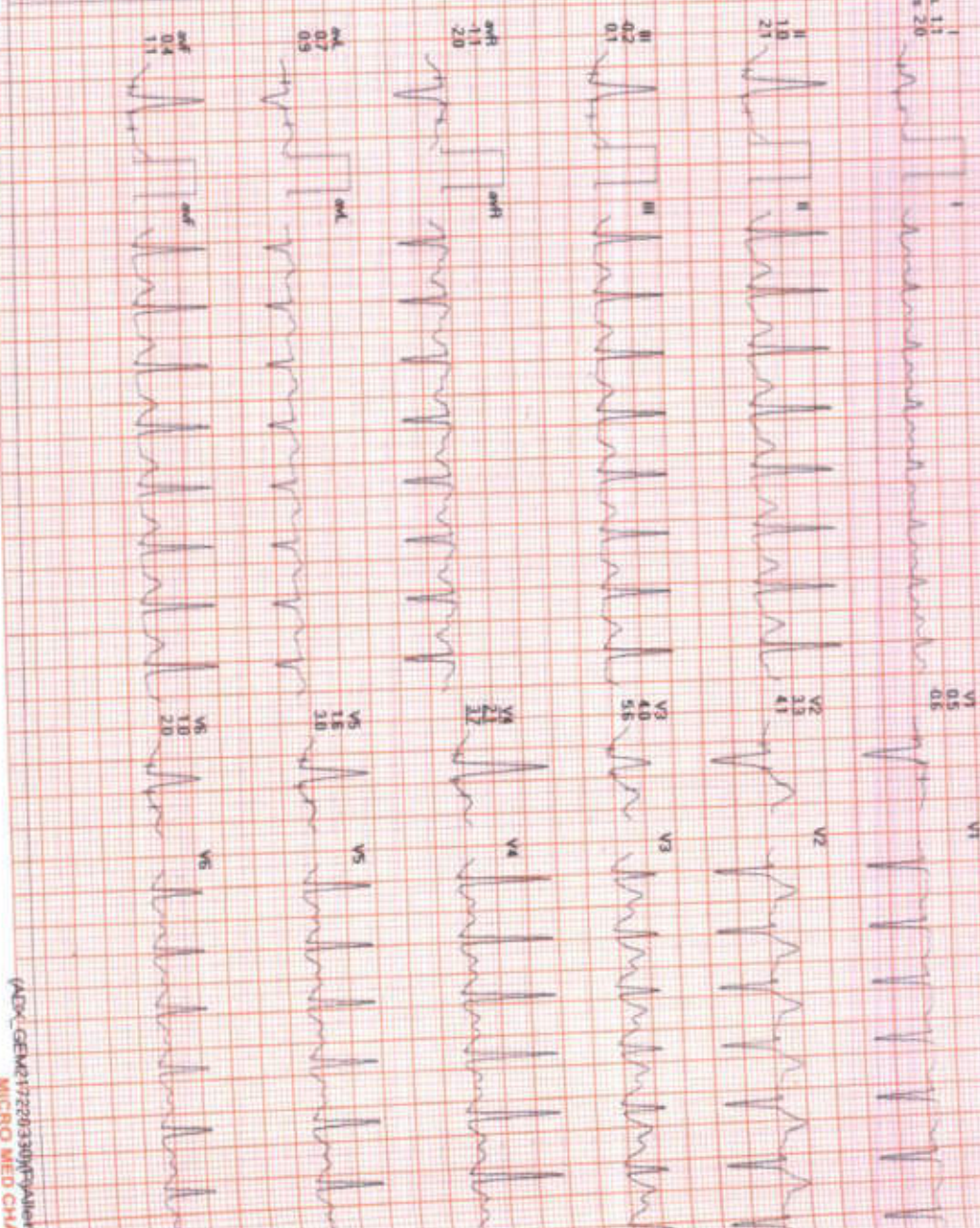
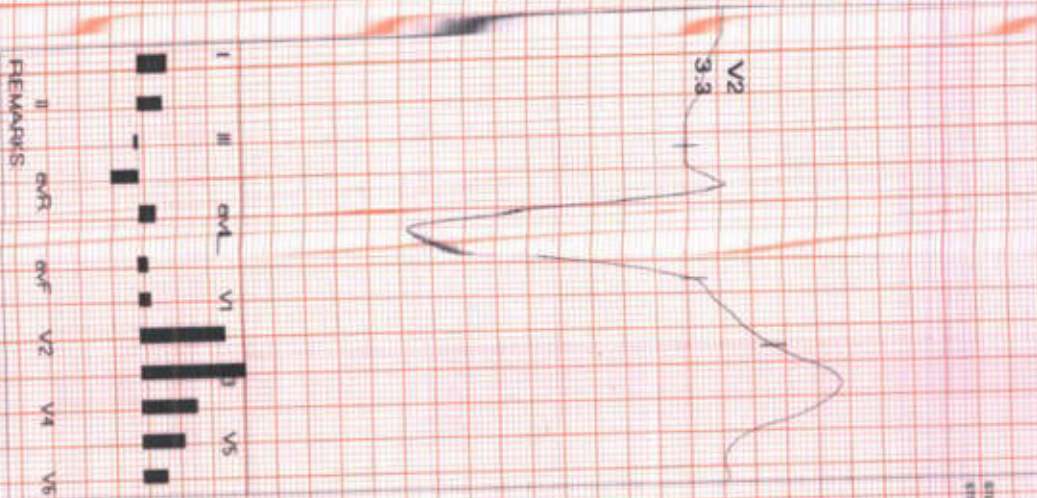
4X 60 ms Post J



385161860/MR. HEM CHANDRA BHATT / 25 Yrs / M / O Cons / 0 Kg / HR : 155

Date: 11 / 10 / 2024 03: 41 PM METS: 7.3/155 bpm 79% of THR BP: 130/80 mmHg Combined Medians/BLG:On/Notch:On/HF:0.05 H/L:LF:35 Hz

60 ms Post



Recovery(0:30)



ADSK GENCO 17250330MVAIEM MICRO MED CHA

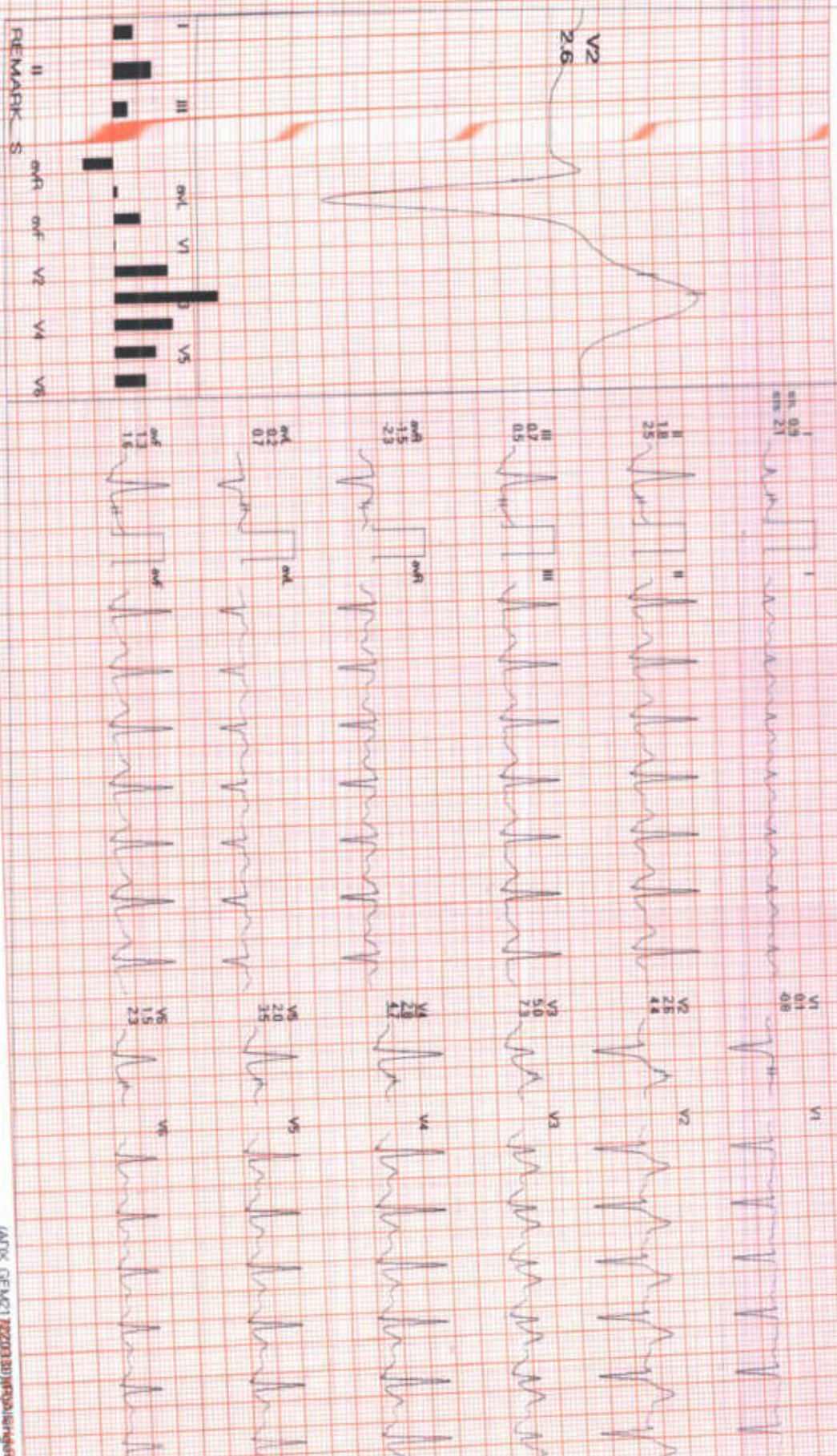
1385161860 / MR. HEM CHANDRA BHATT / 25 Yrs / M / 0 Cms / 0 Kg / HR : 140

Date: 11 / 10 / 2024 03:14:14 PM METS: 4.3 / 1.40 bpm 72% of THR BP: 140/80 mmHg Combined Medicns/BLC ON/NOCH ON/HF 0.05 Hz/LF 35 Hz

4X 3mm0 mc Post 1

Recovery(1:00)

ExTime 09:38 0.0 mph 0.0%



ADDC_GEMC1 20203 30 JEPDOLSRNGR

1385161880 / MR. HEM CHANDRA BHATT / 25 Yrs / M / 0 Cms / 0 Kg / HR : 108

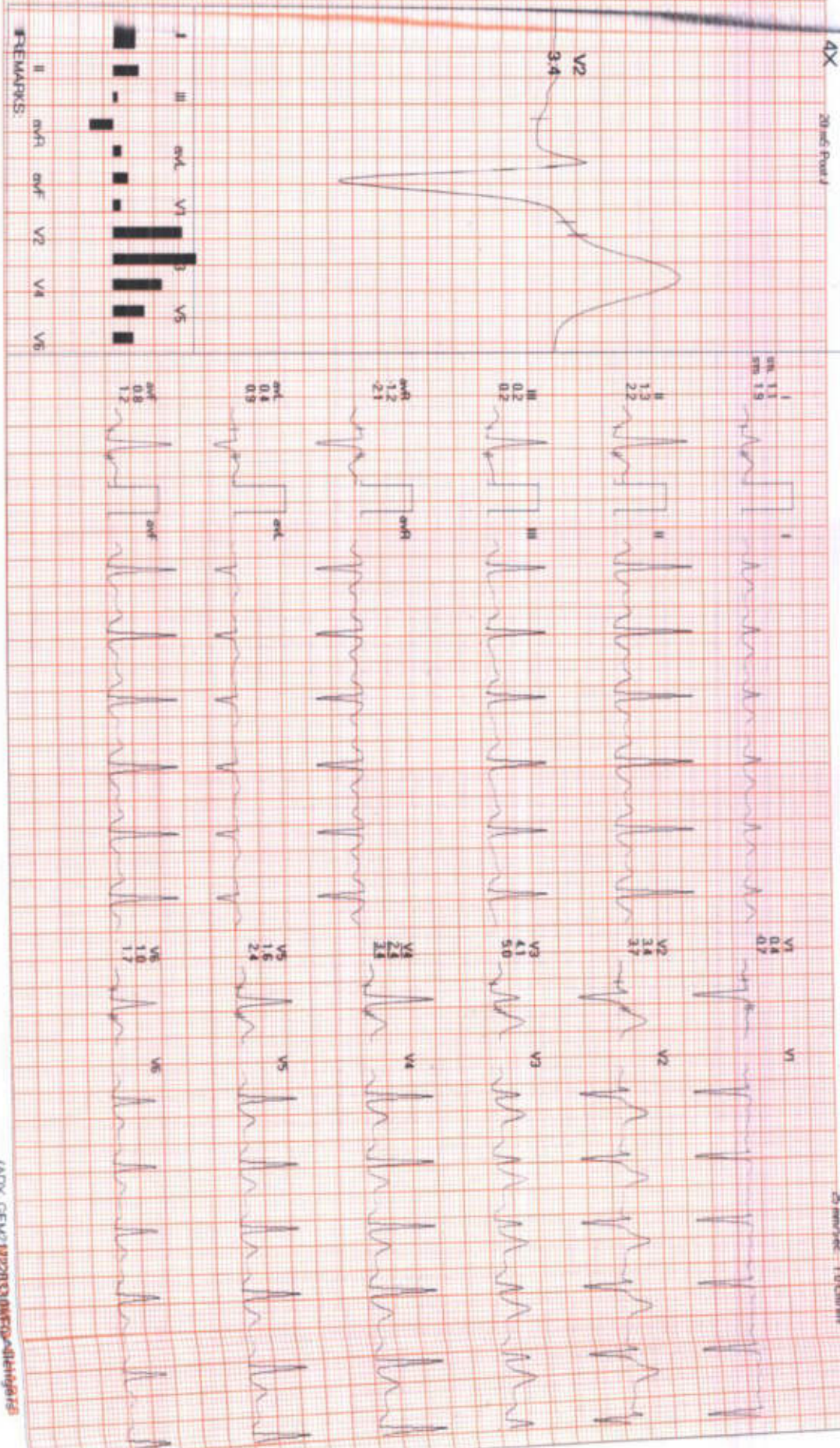
Date: 11 / 10 / 2024 03:14:14 PM METS: 1.0/108 bpm 55% of THR BP: 140/90 mmHg Combined Meds/BLK On/Noth On/HP 0.05 Hz/LF 35 Hz

Recovery(2:00)



4X 20 sec Paced

EXTIME 09:38 0.0 mph 0.0%



REMARKS:

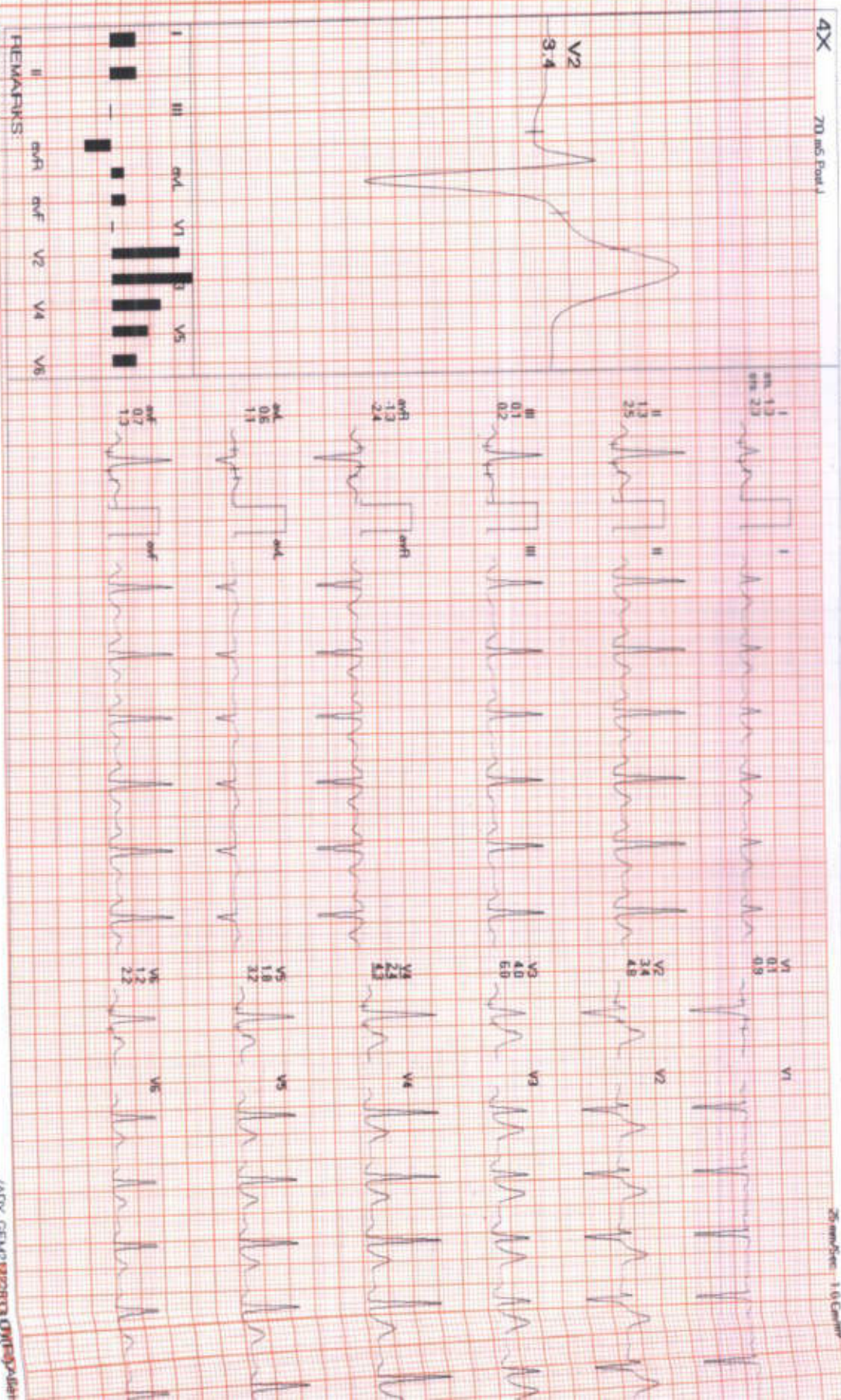
ADX_GEM2712203304700-81676762

1385167860 / MR. HEM CHANDRA BHATT / 25 Yrs / M / 0 Cms / 0 KG / HR : 107

Date: 11 / 10 / 2024 03:14:14 PM METS: 1.0 / 107 bpm 55% of THR BP: 140/80 mmHg Combined Median/BLC On/Noch On/HF 0.05 Hz/LE 35 Hz

ExtTime: 09:38 0.0mch 0.0%

Recovery(2:27)



ADX_GEM21122803 0115-3-User

11/10/24
Hem chandra

Diagnosis Information:
Sinus Rhythm
Slight ST Elevation(V5, V6)

HR : 71 bpm
P : 123 ms
PR : 192 ms
QRS : 97 ms
QT/QTc : 349/381 ms
PQRS/T : 51/61/59 °
RV5/SVI : 1.362/1.145 mV

HR
P
PR
QRS
QT/QTc
PQRS/T
RV5/SVI

Report Confirmed by:

