

Registration ID : 26858 Sample Collection : 09/11/2024 12:23:49

: MR. SHANTANU GUPTA Sample Received : 09/11/2024 12:23:49

Printed : 12/11/2024 14:48:36 Report Released : 09/11/2024 16:20:03 Age/Sex : 35 Yrs. / M

Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

COMPLETE BLOOD COUNT

		G	OWLF IF BLOOD	COUNT
Test		Result	Unit	Biological Ref Range
Hemoglobin	:	16.1	g/dL	13-18 g/dL
(SLS) Photometric				
Total RBC	:	5.28	10^6/μL	3.0-6.0 10^6/μL
(Electrical Impedence) Hematocrit (PCV)	:	50.6	%	36-54 %
(Calculated)	•	50.0	70	00 04 70
Mean Corpuscular Volume (MCV) (calulated)	:	95.8	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH)	:	30.5	pg	27-32 pg
(Calculated)				
Mean Corpuscular Hemoglobin	:	31.8	g/dL	31.5-34.5 g/dL
Concentration (MCHC)				
(Calculated)				
Red Cell Distribution Width (RDW-	·:	14.10	%	12-15 %
CV)				
(Electrical Impedence)		7000	,	1000 11000 /
Total Leucocytes Count (Light Scattering)	:	7300	/cumm	4000-11000 /cumm
Neutrophils	:	67	%	40-75 %
•				
(Calculated)	:	04	%	1-6 %
Eosinophils Percentage	•	04	70	1-0 /6
(Calculated)		0.4	0/	00.45.0/
Lymphocyte Percentage	:	24	%	20-45 %
(Calculated)				
Basophils Percentage	:	0	%	0-1 %
(Calculated)				
Monocytes Percentage	:	05	%	1-10 %
(Calculated)				
RBC Morphology	:	-	Normochromic	
WBC Morphology	:	Normal Morp		
Platelet Count (Electrical Impedence)	:	120000	/ul	150000-450000 /ul

Platelets on Smear Reduced on smear Adequate

mm at 1hr E.S.R 0-20 mm at 1hr 05

Sample Type:EDTA whole blood(Westergren)

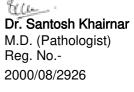
Sample Type : EDTA Whole Blood

Test done with THREE PART CELL COUNTER (Sysmex KX-21)

(Collected At: 09/11/2024 12:23:49, Received At: 09/11/2024 12:23:49, Reported At: 09/11/2024 16:20:03)









^{*}All Samples Processed At Excellas Clinics Mulund Centre .

^{*}ESR NOT IN NABL scope.



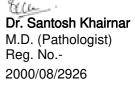
Name : MR. SHANTANU GUPTA Sample Received : 09/11/2024 12:23:49

Age/Sex : 35 Yrs. / M Printed : 12/11/2024 14:48:36 Report Released : 09/11/2024 16:20:03

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Name : MR. SHANTANU GUPTA Sample Received : 09/11/2024 12:23:49

Age/Sex : 35 Yrs. / M Printed : 12/11/2024 14:48:36 Report Released : 11/11/2024 16:28:09

Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

Test Result Unit Biological Ref. Range
GLUCOSE (SUGAR) FASTING, : 77 mg/dL Non-Diabetic: < 100 mg/dl
(Fluoride Plasma Used) Impaired Fasting Glucose: 100-

125 mg/dl Diabetic: >/= 126 mg/dl

Method: GOD-POD

GLUCOSE (SUGAR) PP, (Fluoride : 78 mg/dl Non-Diabetic: < 140 mg/dl

Plasma Used) Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

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(Collected At: 09/11/2024 12:23:49, Received At: 09/11/2024 12:23:49, Reported At: 11/11/2024 16:28:09)

HbA1c (Whole Blood)

Test Result Unit Reference Range

HbA1C-Glycosylated Haemoglobin : 4.90 % Non-diabetic: 4-6

Excellent Control: 6-7

Fair to good control: 7-8

Unsatisfactory control: 8-10

Poor Control: >10

Estimated Average Glucose (eAG) : 93.93 mg/dl 65.1-136.3 mg/dL mg/dl

EDTA Whole Blood, Method: Calculated

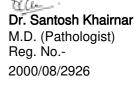
Interpretation:

- 1.The term HbA1c refers to Glycated Haemoglobin. Measuring HbA1c gives an overall picture of what the average blood sugar levels have been over a period of weeks/month. Higher the HbA1c, the greater the risk of developing diabetes-related complications.
- 2.HbA1c has been endorsed by clinical groups and ADA (American Diabetes Assocation) guidelines 2012, for the diagnosis of diabetes using a cut-off point of 6.5%. ADA defined biological reference range for HbA1c is between 4-6%. Patients with HBA1c value between 6.0-6.5% are considered at risk for developing diabetes in the future. Trends in HbA1c area a better indicator of glucose control than standalone test.
- 3.To estimate the eAG from the HbA1c value, the following equation is used: eAG(mg/dl) =28.7*A1c-46.7.
- 4. Diabetic must aspire to keep values under 7% to avoid the various complications resulting from diabetes.

(Collected At: 09/11/2024 12:23:49, Received At: 09/11/2024 12:23:49, Reported At: 11/11/2024 10:16:08)









^{*}Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.



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Age/Sex : 35 Yrs. / M Printed : 12/11/2024 14:48:36 Report Released : 11/11/2024 16:28:09

Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

BLOOD GROUP

Test Result Unit Biological Ref. Range

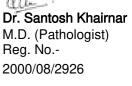
Blood Group : 'B' Rh POSITIVE

Slide and Tube Aggllutination Test

(Collected At: 09/11/2024 12:23:49, Received At: 09/11/2024 12:23:49, Reported At: 10/11/2024 13:38:09)









Name : MR. SHANTANU GUPTA Sample Received : 09/11/2024 12:23:49

Age/Sex : 35 Yrs. / M Printed : 12/11/2024 14:48:36 Report Released : 11/11/2024 16:28:18

Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

LIPID PROFILE

Test Result Unit Biological Ref. Range

Total Cholesterol : 179 mg/dl Desirable: <200

Borderline high = 200-239

High: > 239

Serum, Method: CHOD-PAP

S. Triglyceride : 163 mg/dl Desirable: <161

Borderline High: 161 - 199

High: > 200 - 499/ Very High:>499

Serum, Method: GPO-Trinder

HDL Cholesterol : 40 mg/dl 35.3-79.5 mg/dl

serum,Direct method

LDL Cholesterol : 106.40 mg/dl Optimal: <100;

Near Optimal: 100-129; Borderline High: 130-159;

High: 160-189;

Very high: >190

Serum, (Calculated)

VLDL Cholesterol : **32.6** mg/dl 5-30 mg/dl

Serum, Method: Calculated

LDL/HDL Ratio : 2.7 Optimal: <2.5

Near Optimal: 2.5-3.5

High >3.5

Serum, Method: Calculated

TC/HDL Ratio : 4.5 Optimal: <3.5

Near Optimal: 3.5 - 5.0

High >5.0

Serum, Method: Calculated

Test Done on - Automated Biochemistry Analyzer (EM 200).

Interpretation

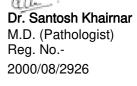
- 1.Triglycerides: When triglycerides are very high greater than 1000 mg/dL, there is a risk of developing pancreatitis in children and adults. Triglycerides change dramatically in response to meals, increasing as much as 5 to 10 times higher than fasting levels just a few hours after eating. Even fasting levels vary considerably day to day. Therefore, modest changes in fasting triglycerides measured on different days are not considered to be abnormal.
- 2. HDL-Cholesterol: HDL- C is considered to be beneficial, the so-called "good" cholesterol, because it removes excess cholesterol from tissues and carries it to the liver for disposal.
- 3. LDL-Cholesterol: Desired goals for LDL-C levels change based on individual risk factors.

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: MR. SHANTANU GUPTA Sample Received : 09/11/2024 12:23:49

Printed : 12/11/2024 14:48:36 Report Released : 11/11/2024 16:28:28 Age/Sex : 35 Yrs. / M

Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

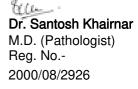
LIVER FUNCTION TEST						
Test		Result	Unit	Biological Ref. Range		
S. Bilirubin (Total)	:	0.88	mg/dl	0-2.0 mg/dl		
Serum, Method: Diazo (walter & Gerarde)						
S. Bilirubin (Direct)	:	0.38	mg/dl	0-0.4 mg/dl		
Serum, Method: Diazo (walter & Gerarde)						
S. Bilirubin (Indirect)	:	0.50	mg/dl	0.10-1.0 mg/dl		
Serum, Method: Calculated		00.0	11.17	0.25 114		
Aspartate Transaminase (AST/SGOT) Serum, Method: UV Kinetic with P5P	:	20.8	IU/L	0-35 IU/L		
Alanine Transaminase (ALT/SGPT)		21.8	IU/L	0-45 IU/L		
Serum, Method: UV Kinetic with P5P	•	21.0	10/2	0 40 10/2		
S. Alkaline Phosphatase	:	79.0	IU/L	53-128 IU/L		
Serum, Method: IFCC with AMP buffer						
Total Proteins	:	5.9	gm/dl	6.4-8.3 gm/dl		
Serum, Method: Biuret						
S. Albumin	:	4.3	gm/dl	3.5-5.2 gm/dl		
Serum, Method: BCG S. Globulin		1.6	gm/dl	2.3-3.5 gm/dl		
Serum, Method: Calculated	•	1.0	gili/di	2.5-5.5 gm/di		
A/G Ratio		2.69		0.90-2.00		
Serum, Method: Calculated	•	50		2.00 2.00		
Gamma GT	:	52	U/L	0-55 U/L		
Serum, Method: G glutamyl carboxy nitroanilide						

Test Done on - Automated Biochemistry Analyzer (EM 200).

(Collected At: 09/11/2024 12:23:49, Received At: 09/11/2024 12:23:49, Reported At: 11/11/2024 16:28:28)









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Age/Sex : 35 Yrs. / M Printed : 12/11/2024 14:48:36 Report Released : 11/11/2024 16:28:38

Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

BLOOD UREA NITROGEN (BUN)

Test Result Unit Biological Ref. Range

Urea : **16.90** mg/dl 19-45 mg/dl

Serum, Method: Urease - GLDH

Blood Urea Nitrogen : 7.90 mg/dl 5-18 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

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(Collected At: 09/11/2024 12:23:49, Received At: 09/11/2024 12:23:49, Reported At: 11/11/2024 16:28:38)

SERUM CREATININE

Test Result Unit Biological Ref. Range

S. Creatinine : 0.83 mg/dl 0.7-1.3 mg/dl

Serum, Method: Enzymatic

Test Done on - Automated Biochemistry Analyzer (EM 200).

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(Collected At: 09/11/2024 12:23:49, Received At: 09/11/2024 12:23:49, Reported At: 11/11/2024 16:28:34)

SERUM URIC ACID

Test Result Unit Biological Ref. Range

S. Uric Acid : 5.90 mg/dl 3.5-7.2 mg/dl

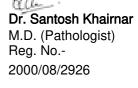
Serum, Method: Uricase - POD

Test Done on - Automated Biochemistry Analyzer (EM 200).

(Collected At: 09/11/2024 12:23:49, Received At: 09/11/2024 12:23:49, Reported At: 11/11/2024 16:28:42)











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Name : MR. SHANTANU GUPTA Sample Received : 09/11/2024 12:23:49

Age/Sex : 35 Yrs. / M Printed : 12/11/2024 14:48:36 Report Released : 11/11/2024 16:28:38

Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

BUN CREAT RATIO (BCR)

Test Result Unit Biological Ref. Range

BUN/Creatinine ratio : 9.51 5-20

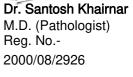
Serum, Method: Calculated

NOTE:

A blood urea nitrogen (BUN)/creatinine ratio (BCR) >20 is used to distinguish pre-renal azotemia (PRA) and acute tubular necrosis (ATN)

(Collected At: 09/11/2024 12:23:49, Received At: 09/11/2024 12:23:49, Reported At: 11/11/2024 16:28:57)









Registration ID : 26858 Sample Collection : 09/11/2024 12:23:49

Name : MR. SHANTANU GUPTA Sample Received : 09/11/2024 12:23:49

Age/Sex : 35 Yrs. / M Printed : 12/11/2024 14:48:36 Report Released : 11/11/2024 10:16:39

Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

THYROID FUNCTION TEST

Test Result Unit Biological Ref. Range

Total T3 : 1.1 ng/dl 0.70-2.04 ng/dl

Serum, Method: CLIA

Total T4 : 7.65 µg/dl 5.1-14.1 µg/dl 5.1-14.1 µg/dl

Serum, Method: CLIA

TSH (Thyroid Stimulating Hormone) : 1.93 μIU/ml 0.27-5.3 μIU/ml

Serum, Method: CLIA

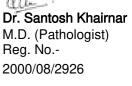
Interpretation Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, sub-clinical hyperthyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis, estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age, marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 09/11/2024 12:23:49, Received At: 09/11/2024 12:23:49, Reported At: 11/11/2024 10:16:39)









Name : MR. SHANTANU GUPTA Sample Received : 09/11/2024 12:23:49

Age/Sex : 35 Yrs. / M Printed : 12/11/2024 14:48:36 Report Released : 09/11/2024 16:42:54

Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

EXAMINATION OF URINE

Test Result Unit Biological Ref. Range

PHYSICAL EXAMINATION

Quantity: 30 ml

Colour : Pale yellow

Appearance : Clear

Reaction (pH) : 6.0 4.5 - 8.0 Specific Gravity : 1.010 1.010 - 1.030

CHEMICAL EXAMINATION

Protein Absent Absent Glucose Absent Abesnt Absent **Ketones Bodies** Abesnt Occult Blood Absent Absent Bilirubin Absent Absent Absent Normal Urobilinogen

MICROSCOPIC EXAMINATION

Epithelial Cells : 0 - 1 / hpf
Pus cells : 1 - 2 / hpf
Red Blood Cells : Absent / hpf

Casts : Absent / lpf Absent / lpf Crystals : Absent Absent

OTHER FINDINGS

Yeast Cells : Absent Absent Bacteria : Absent Absent Absent

Mucus Threads : Absent Spermatozoa : Absent

Deposit : Absent Absent Absent Absent Absent

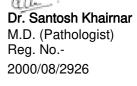
sample type:Urine

Method: Visual and Microscopic

(Collected At: 09/11/2024 12:23:49, Received At: 09/11/2024 12:23:49, Reported At: 09/11/2024 16:42:54)











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Age/Sex : 35 Yrs. / M Printed : 12/11/2024 14:48:36 Report Released : 11/11/2024 12:16:00

Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

X RAY CHEST PA VIEW

CLINICAL PROFILE: NO COMPLAINTS.

Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

Bony thorax appears normal.

Soft tissues appear normal.

IMPRESSION:

No significant abnormality detected.









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Age/Sex : 35 Yrs. / M Printed : 12/11/2024 14:48:36 Report Released : 11/11/2024 12:16:00

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Name : MR. SHANTANU GUPTA Sample Received : 09/11/2024 12:23:49

Age/Sex : 35 Yrs. / M Printed : 12/11/2024 14:48:36 Report Released : 11/11/2024 12:16:00

Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd









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Name : MR. SHANTANU GUPTA Sample Received : 09/11/2024 12:23:49

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Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

USG ABDOMEN & PELVIS - MALE

Liver:- is normal in size(12.8 cm) and shows normal parenchymal echogenicity. No focal or diffuse lesion is seen. The portal and hepatic veins are normal. No IHBR dilatation seen.

Gall Bladder:- is partially distended. No calculus or mass lesion is seen. No GB wall thickening or pericholecystic fluid is seen.

Visualised CBD is normal.

Pancreas:-is normal in size and reflectivity. No focal lesion seen.

Spleen:- is normal in size (8.0 cm) and reflectivity. No focal lesion is seen.

Kidneys:- Both Kidneys are normal in size, shape, position. They show normal reflectivity. CMD is maintained. No calculi or hydronephrosis seen on either side.

Right kidney $-9.5 \times 4.0 \text{ cms}$ Left kidney $-9.9 \times 4.5 \text{ cms}$

Urinary Bladder:- is well distended and shows normal wall thickness.

No intraluminal lesion seen.

Prostate:- is normal in size, shape and echotexture.

No focal lesions.

No ascites is seen. No significant lymphadenopathy is seen.

IMPRESSION:

No significant abnormality is seen.

Thanks for the Referral

(Collected At: 09/11/2024 12:23:49, Received At: 09/11/2024 12:23:49, Reported At: 12/11/2024 11:49:43)









Name : MR. SHANTANU GUPTA Sample Received : 09/11/2024 12:23:49

Age/Sex : 35 Yrs. / M Printed : 12/11/2024 14:48:36 Report Released : 11/11/2024 10:57:06

Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

OPTHALMIC EVALUATION

Examination	Right Eye	Left Eye
Distance Vision	6/6	6/6
Near Vision	N/6	N/6
Color Vision	Nor	mal
Remarks	Nor	mal

(Collected At: 09/11/2024 12:23:49, Received At: 09/11/2024 12:23:49, Reported At: 11/11/2024 10:57:06)







MED	ICAL EXAMINATION R	EPORT	
Name Mr./Mrs./ Miss	Shantanu Gupta,		
Sex	√Male/ Female		
Age (yrs.) 36	UHID:		
Date	9 / 11 /2024	Bill No. :	
Marital Status	Married/ No. of Children / Unmarried/ Widow:		
Present Complaints	No.		
Past Medical: History Surgical:	No .		
Personal History	Diet: Vegч⊒∕7 Mixed □: Addiction: Smoking □ / Tobacco Chewing □ / Alcohol □/ Any Other №0		
Family History Father = Mother = Siblings =	HT / DM / IHD / Stroke / Any O Mother = HT / DM / IHD / Strok Siblings = HT / DM / IHD / Stro	e / Any Other	
History of Allergies	Drug Allergy 🛵 .		
History of Medication	For HT / DM / IHD / Hypothyro	dism	
	Any Other 🎝		
On Examination (O/E)	G.E.: fais R.S.: Areat C.V.S.: Sig(N) C.N.S.: Conc osient P/A: Soft nantender		
		• •	
•	Any Other Positive Findings :		

Height 66 cms	Weight	62.2 Kgs	
BMI 22.6	ATTENDED TO		
Pulse (per min.) 7/1m	Bloc	od Pressure (mm of Hg)	Re∫So mm of Hg
	Gynaed	cology	
Examined by	Dr.		No. of
Complaint & Duration		- * 3 I	70
Other symptoms (Mict, bowels etc)	the second		Let Torrait
Menstrual History	Menarche	Cycle	Loss
- E	Pain	I.M.B.	P.C.B
	L.M.P.	Vaginal Discharge	and the second
	Cx. Smear	Contraception	
Obstetric History			
Examination :		The Letter of	
Breast	omi in in	NO THE WAY OF THE	Ingel Yould allow
Abdomen	71 - 1	4	
P.S.		250 9-1510011	The second of the second
P.V.			
Gynzecology Impression & Recommendation	A. T. III III II II III II II II II II II II	TATE DESIGNATION AND ADDRESS OF THE PERSON ADDRESS O	nonerosti le promi
Recommendation			
	ji.		
Physician Impression			#1 #1
Examined by:		t = To Reduce Weight ht = To Increase Weight	

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TREADMILL TEST SUMMARY REPORT Protocol: BRUCE History: NIL Medication1: Medication2:

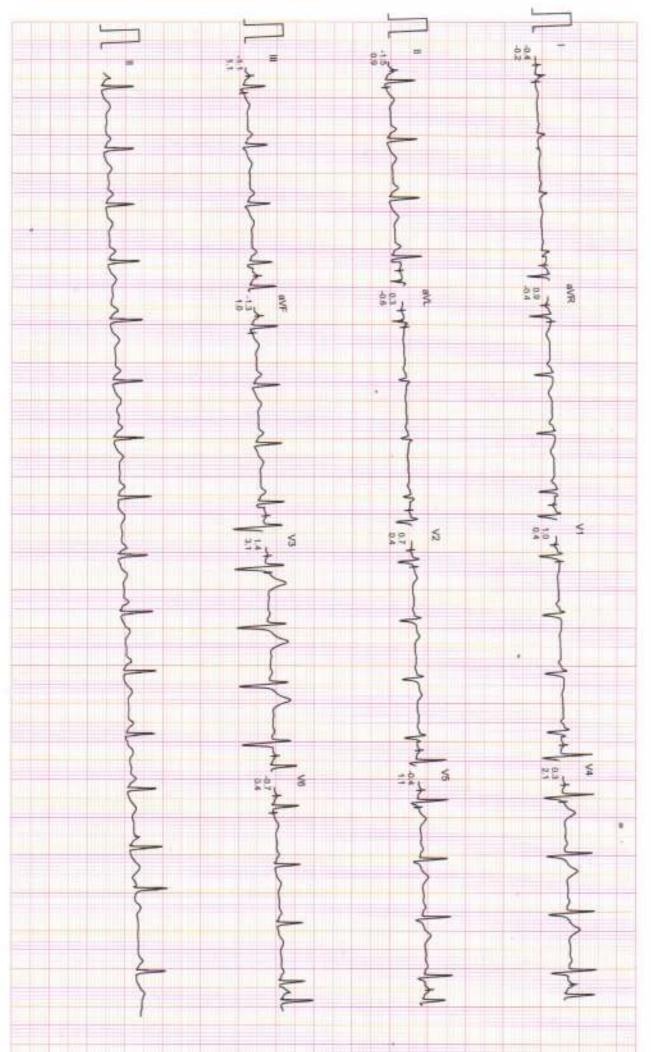
110/70 110/70 110/70 120/70 130/80 140/80 140/80	NT 0:01 0:01 76 11070 3 2:00 2:00 2:70 10:00 111 12070 4:04 2:03 4:00 12:00 12:0 130:00 8:10 2:03 4:00 12:00 145 130:00 8:10 0:14 0:20 157 140:80 Traition 181 bpm 87 % of target heart rate 184 bpm Treesure 140:80 mm/lg semination 181 bpm 87 % of target heart rate 184 bpm Treesure 140:80 mm/lg semination 10:45 METS ORT TOLEBANCE NORMAL IONOTROPIC AND CHRONOTROPIC RESPONCE IONS ATTENDED TO THE TOLEBANCE SAT PEAK OF TEST. ARRETT HAMILY SULV DYSFUNCTION. NO SIGNIFICANT ST CHANGES AT PEAK OF TEST. ARRETT HAMILY SULV DYSFUNCTION. NO SIGNIFICANT ST CHANGES AT PEAK OF TEST.	WHEET A GOLD	PHASE	STAGE TIME	ID: 50 Ht/Wt: 168/62 Recorded: 9-11-2024 12-42 Recorded: 9-11-2024 12-42	024 12-42 GRADE (%)	(BPM)	Protocol: BRUCE History: NIL Medication1: Medication2: Medication3: B.P. (mmHq)	XIOO			ST LEVEL (mm)	
NIT 0:01 0:01 76 110/70 78	NIT 0:01 0:01 1 0:01 78 110/70 73 11	PHASE	PHASE	STAGE	(Km./Hr.)	(%)	(BPM)	(mmHg)	X100		2=		1
2:00 2:00 2:70 10:00 111 120/70 130/80 4:04 2:00 4:00 12:00 12:00 12:00 136 130/80 6:10 2:03 5:40 14:00 145 130/80 6:28 0:14 6:70 16:00 157 140/80 157 140/80 16:00 157 140/80 16:00	2:00 2:00 4.00 111 120/70 10.00 111 120/70 12:00 4:04 4:04 14:00 14:5 130/80 6:10 2:03 5.40 14:00 14:5 130/80 14:5 130/80 6:10 2:03 6.70 16:00 157 40/80 157 40/80 6:28 0:14 0:20 16:00 157 40/80 16:00 157 40/80 6:28 0:14 0:20 16:00 16:00 157 40/80 16:00	SUPINE	0:01	0.01			338	11070 11070 11070	8083		- -0.2 -0.2		022 05
2:00 2:00 4.00 12:00 12:00 12:00 13:080 13:080 6:10 2:03 5:40 14:00 145 130:80 6:28 0:14 6:70 16:00 157 140:80 157 140:80 6:28 0:14 0:29 16:70 16:00 157 140:80 157 140:80 158 159 159 159 159 159 159 159 159 159 159	2:00 2:00 4:04 4:04 4:04 14:00 14:00 14:51 130/80 14:00 14:51 130/80 14:51 130/80 14:51 130/80 14:51 14:51 130/80 14:51 14:51 130/80 14:51 14:50 14:51 14:50 14:51 14:50 14:51 14:50 14:51 14:50 14:51 14:50 14:51 14:50 14:51 14:50 14:51 14:50 14:51 14:50	STANDING			2 1	10.00	11 1	120/70	5 13	ν ω		-0.8	-0.8
ER 6:34 0:20 16:00 19:0 140/80 Feb. 16:34 0:20 16:1 140/80 Feb. 16:34 Minutes 184 bpm 16:1 tpm 87 % of target heart rate 184 bpm 140/80 mmHg 10.45 METS 10.45 METS 10.45 METS	ER 6:34 0:20 16:00	Angina	4.04	2:00	5,40	12.00	145	130/80	218	10 60 4	-1-1		-1.9 0.9 1.0
ER 6:34 0:20 ration 6:34 Minutes are 184 bpm 161 bpm 87 % of target heart rate 184 bpm 140/80 mmHg 10.45 METS and 10.45 METS Achieved THR	ER 6:34 0:20 6:34 Minutes tration 161 bpm. 87 % of target heart rate 164 bpm tate 10.45 METS oad Achieved THR CORT TOLERANCE NORMAL IONOTROPIC AND CHRONOTROPIC RESPONCE. ORT TOLERANCE NORMAL IONOTROPIC AND CHRONOTROPIC RESPONCE. ORT TOLERANCE NORMAL IONOTROPIC AND CHRONOTROPIC RESPONCE. ORT TOLERANCE NORMAL IONOTROPIC AND CHRONOTROPIC RESPONCE. ORT TOLERANCE NORMAL IONOTROPIC AND CHRONOTROPIC RESPONCE.	STAGE 4	628	0:14	6.70	00.00	Ď į	140/80	23	Si.	-1.00	TA .	-1,8
RESULTS 6:34 Minutes Exercise Duration Nax Heart Rate 161 bpm 87 % of target heart rate 184 bpm Max Blood Pressure 140/80 mmHg Max Work Load Nax Work Load Resson of Termination Achieved THR	RESULTS 6:34 Minutes Exercise Duration 161 bpm 87 % of target heart rate 184 bpm Max Heart Rate 140/90 mm/Hg Max Blood Pressure 140/90 mm/Hg Max Work Load 10:45 METS Reason of Termination 10:45 METS 10:45 MET	PEAK EXER	6:34	020									
	IMPRESSIONS GOOD EFFORT TOLERANCE, NORMAL IONOTROPIC AND CHROWOTROPIC RESPONCE NO ANGINA/ARRYTHMIA/SILV DYSFUNCTION, NO SIGNIFICANT ST CHANGES AT PEAK OF TEST TEST IS NEGATIVE FOR EXERCISE INDUCED REVERSABLE ISCHEMIA.	RESULTS Exercise Duration Max Heart Rate Max Blood Pressure Max Work Load Reason of Termination		6:34 Minutes 161 bpm 87 % 140/80 mmHg 10:45 METS Achieved THR	of target heart rab	e 184 bpm							
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TEST IS NEGATIVE FOR EXERCISE INDUCED REVENOVOER FOR FOR												Dr. VII	Dr. VINAY HIRAY
TEST IS NEGATIVE FOR EXERCISE INDUCED REVENDED TO THE TOTAL THE TEST OF THE TE												Reg. No	Reg. No. 2012/09/2681

BRUCE RECOVERY PHASE TIME: 1:59

ST @ 10mm/mV 80ms PostJ SPEED: 0.0 KmJ/Hr. GRADE: 0.0 %

RATE : 98 BPM B.P. : 130/80 mmHg

Mr. SHANTANU GUPTA I.D. :50 AGE/SEX :36/M RECORDED : 9-11-2024 12:42 LINKED MEDIAN



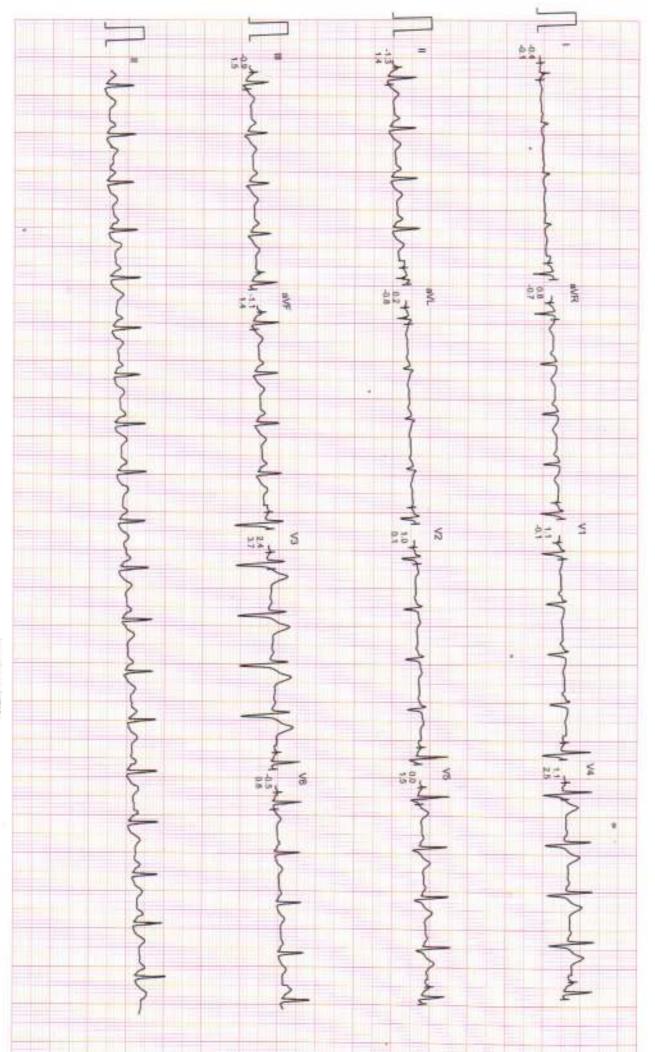
BRUCE RECOVERY PHASE TIME: 0:59

ST @ 10mm/mV 80ms PostJ SPEED: 0.0 Km,/Hr. GRADE: 0.0 %

LINKED MEDIAN

Mr. SHANTANU GUPTA I.D. :50 AGE/SEX :36M RECORDED: 9-11-2024 12:42

B.P.: 140/80 mmHg



BRUCE PEAK EXER PHASE TIME: 8:34 STAGE TIME: 0:20

Mr. SHANTANU GUPTA I.D. :50 AGE/SEX : 36/M RECORDED : 9-11-2024 12-42

RATE: 161 BPM B.P.: 140/80 mmHg

LINKED MEDIAN

ST @ 10mm/mV 80ms PostJ SPEED: 6.7 Km./Hr. GRADE: 16.0 %

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BRUCE EXERCISE 3 (Angina) PHASE TIME: 6:10 STAGE TIME: 2:03

Mr. SHANTANU. GUPTA LD.: 50 AGE/SEX: 36/M RECORDED: 9-11-2024 12:42

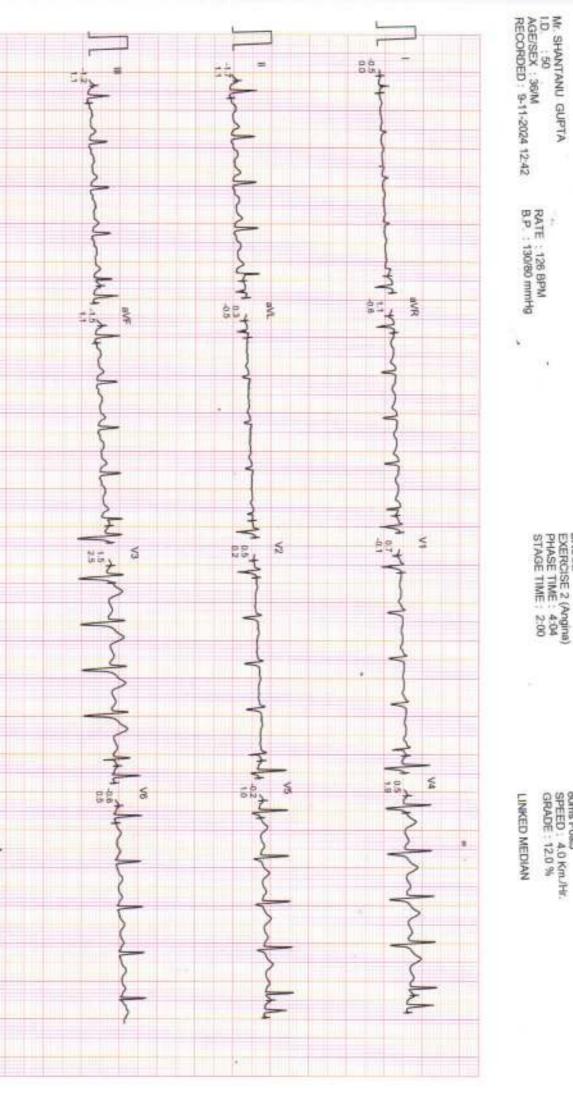
B.P.: 130/80 mmHg

ST @ 10mm/mV 80ms PostJ SPEED: 5.4 Km./Hr. GRADE: 14.0 %



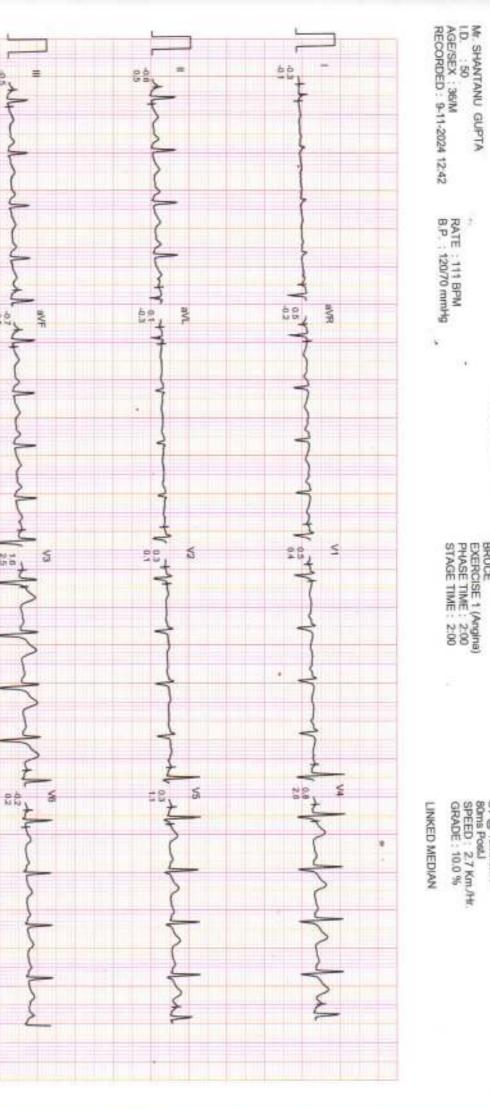
BRUCE EXERCISE 2 (Angina) PHASE TIME: 4:04 STAGE TIME: 2:00

ST @ 10mm/mV 80ms PostJ SPEED: 4.0 KmJHr. GRADE: 12.0 %



BRUCE EXERCISE 1 (Angina) PHASE TIME: 2:00 STAGE TIME: 2:00

ST @ 10mm/mV 80ms PostJ SPEED: 2.7 Km./Hr. GRADE: 10.0 %



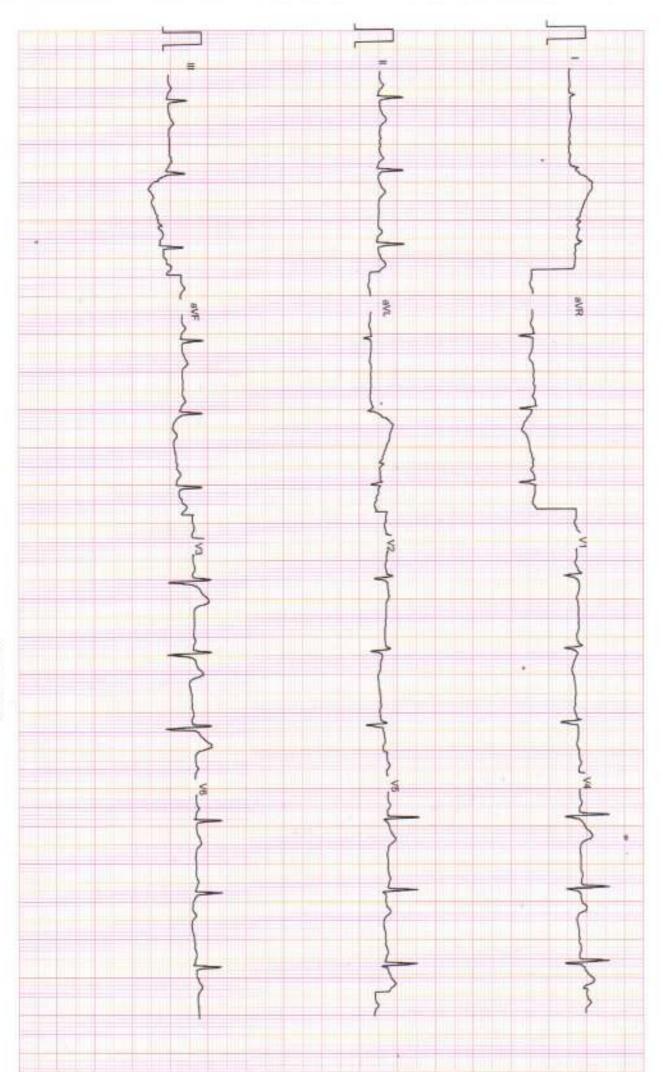
SUPINE

ST @ 10mm/mV 80ms PostJ

RAW E.C.G.

Mr. SHANTANU GUPTA LD. :50 AGE/SEX : 36/M RECORDED: 9-11-2024 12-42

RATE : 76 8PM B.P. : 110/70 mmHg

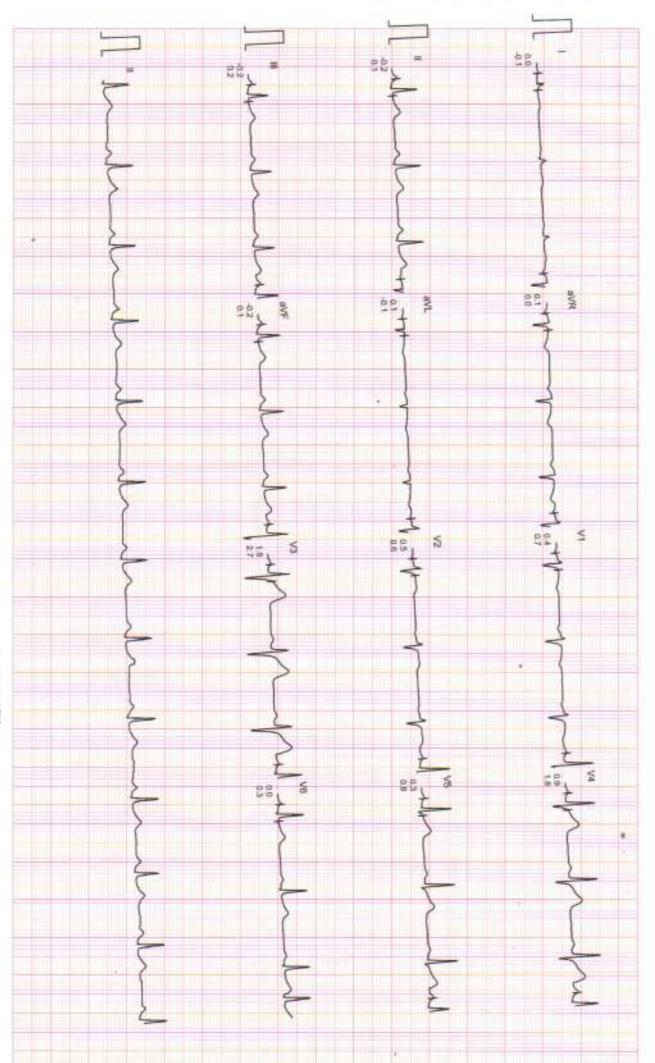


ST @ 10mm/mV 80ms PostJ

LINKED MEDIAN

Mr. SHANTANU GUPTA LD. :50 AGE/SEX : 36/M RECORDED: 9-11-2024 12:42

RATE: 73 BPM B.P.: 110/70 mmHg



HYPERVENTILATION

ST @ 10mm/mV 80ms PostJ

LINKED MEDIAN

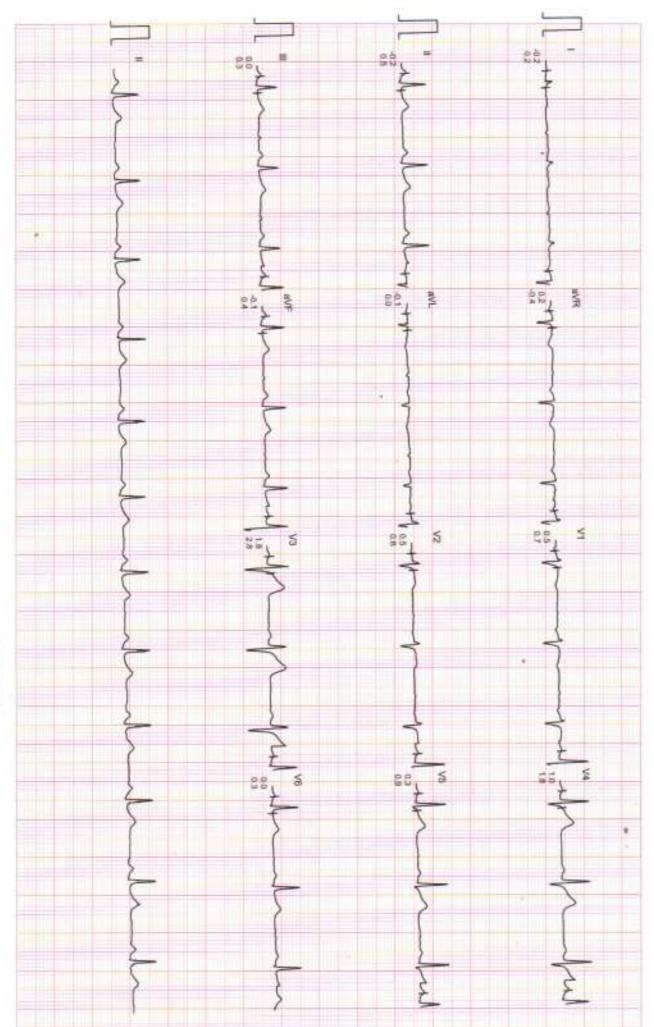
ST @ 1 80ms P

HYPERN

STAGE TIME: 0:01

RATE 73 BPM B.P. : 110/70 mmHg

Nr. SHANTANU GUPTA I.D. :50 AGE/SEX :36/M RECORDED: 9-11-2024 12-42





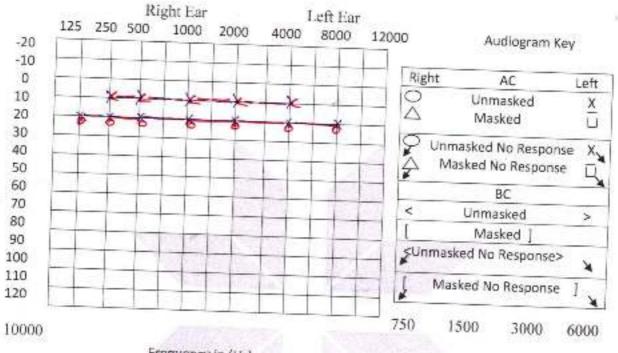
NAME: MR. SHANTANU GUPTA

REF BY: MEDIWHEEL

AGE: 36 YRS / MALE

DATE: 09/11/2024

AUDIOGRAM



Frequency in (Hz)

Responses: Reliable / Fairly Reliable / Not Reliable

Test Conduction: Satisfactory / Not Satisfactory

If any other specify

Procedure: Standard / Play

AudiologicalInterpretations:

Speech Audiometry

Test Ear	P.T.A. dBHL
Right	20
Left	20

BILATERAL HEARING CONDUCTION SENSITIVITY WITHIN NORMAL LIMITE Clinics Private Limited

1st Floor, Kasturi Ashish, Kalyan - Shilphata Rd, Near Venkatesh Petrol Pump, Above Moti Mithai Shop, Sonar Pada, Dembivii East, Manarashtra 421201 M - 9930058716



