

26-10-2024 11:43:45 AM

ID: 29

Himangi Singh
Female 32 Years
Req. No. :

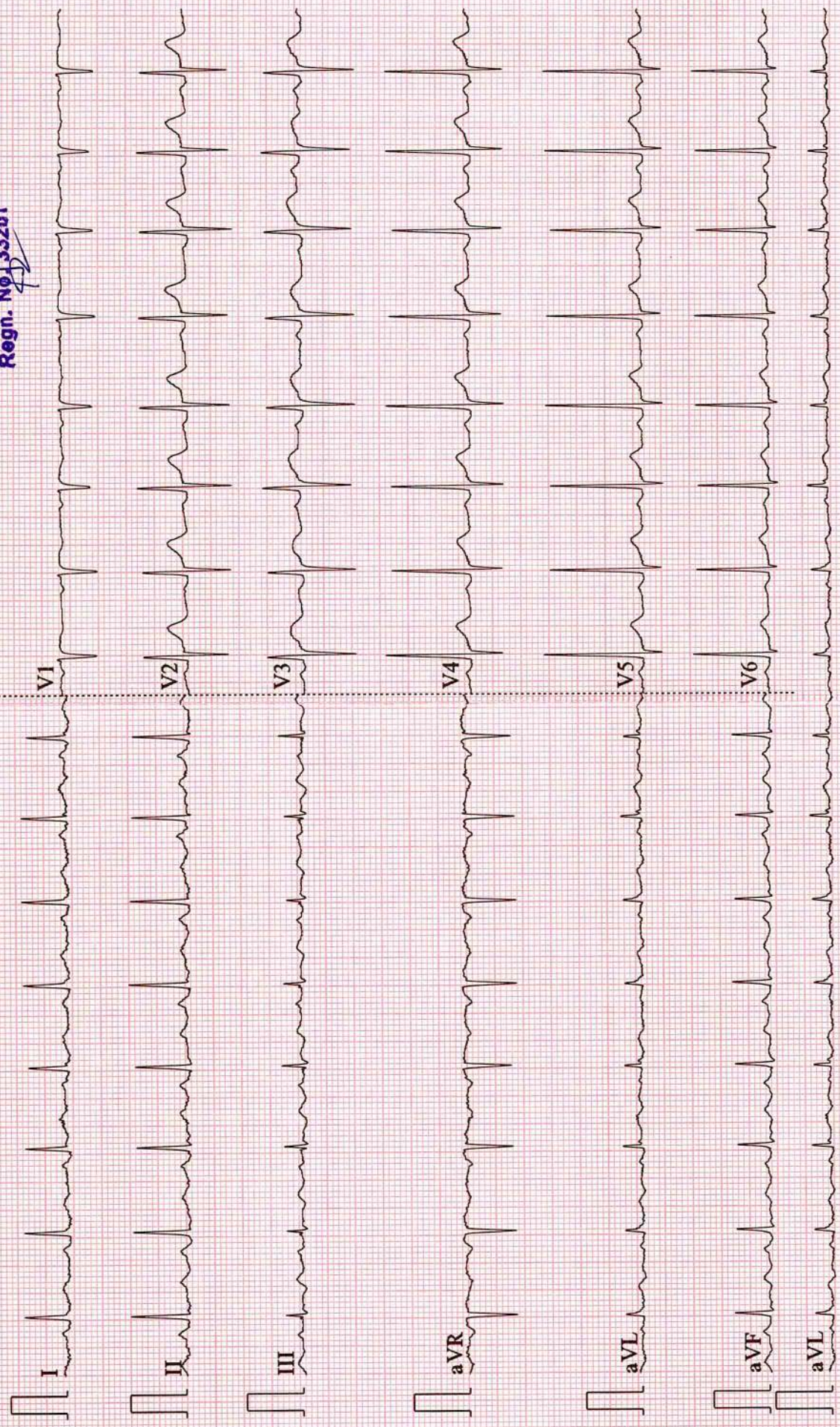
Diagnosis Information:
Sinus rhythm
Normal ECG

Prof

Dr. ANIL SAHOO
MD, PGDCC
Regn. No. 33201

Report Confirmed by:

HR : 98 bpm
P : 108 ms
PR : 148 ms
QRS : 80 ms
QT/QTcBz : 342/437 ms
P/QRS/T : 47/42/33 °
RV5/SV1 : 1.650/0.580 mV



IPSC P IN AND SPII L HOSPITAL

PLOT-453 NEAR SBI BANK SECTOR-19
 DWARKA NEW DELHI-110075, PH: 9555437357

TREADMILL TEST REPORT

HIMANGI SINGH
 ID : 67563
 DATE : 26-10-2024
 AGE/SEX : 32 / F
 HT/WT : 0 / 0
 REF.BY :

PROTOCOL : Bruce
 HISTORY : Checkup/Physical fitness,
 INDICATION :
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	B.P. mmHg	RPP x100	ST LEVEL(MM)			METS
								II	V1	V5	
SUPINE					91	120 / 80	109	0.5	0.2	0.7	0.7
STANDING					88	120 / 80	105	0.6	0.5	1.1	1.1
HYPERTENT					89	120 / 80	106	0.3	0.7	0.3	0.3
Stage 1	0:18		2.7	10	178	140 / 80	249	-1.6	0.1	-1.5	4.67
PK-EXERCISE	2:55		4	12	185	140 / 80	259	-1.1	0.8	-0.4	5.08
RECOVERY	3:22				125	130 / 80	162	-0.3	1.1	0.4	
RECOVERY	4:28				113	120 / 80	135	-0.6	0.8	-0.6	
RECOVERY	5:28				113	120 / 80	135	-1	0.6	-0.8	
RECOVERY	6:28										

RESULTS

EXERCISE DURATION : 3:22
 MAX HEART RATE : 185 bpm 98 % of target heart rate 188 bpm
 MAX BLOOD PRESSURE : 140 / 80 mm Hg
 REASON OF TERMINATION : Achieved THR,
 BP RESPONSE :
 ARRHYTHMIA : None,
 H.R. RESPONSE : Normal Chronotropic Response,
IMPRESSIONS :
 MILD POSITIVE FOR RMI

MAX WORK LOAD : 5.08 METS

Dr. ANIL SAHOO
 MD, PGDCC
 Regn. No. 33201

Technician :

IPSC PAIN AND SPINE HOSPITAL

HIMANGI SINGH

I.D. 67563

Age 32/F

Date 26-10-2024

PRETEST

SUPINE

RATE 91bpm

B.P. 120/80

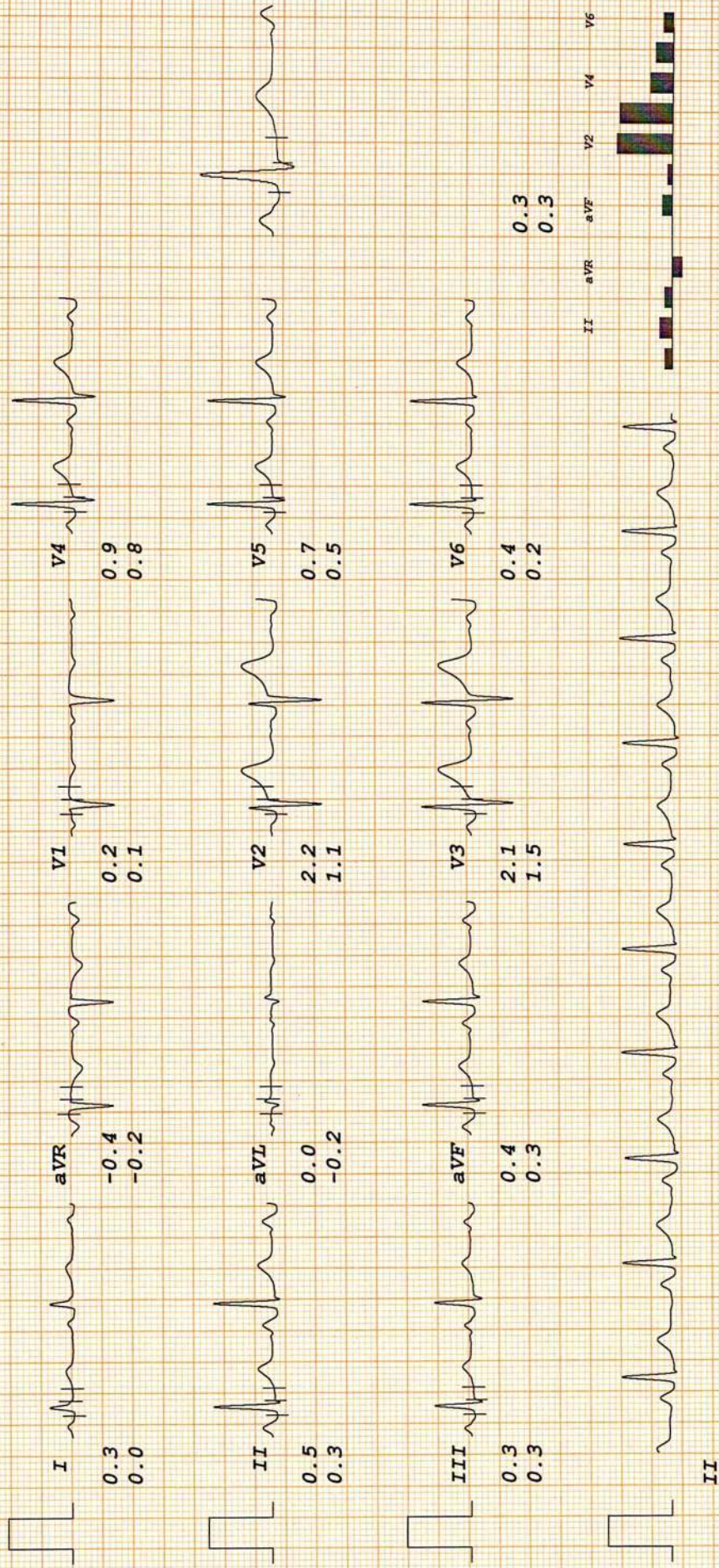
ST @ 10mm/mV

80ms PostJ

LINKED MEDIAN

Mag. X 2

III



Dr. ANIL SAHOO
 MD, PGDCC
 Regn. No. 12201

AS

IPSC PAIN AND SPINE HOSPITAL

HIMANGI SINGH

I.D. 67563

Age 32/F

Date 26-10-2024

RATE 88bpm

B.P. 120/80

PRETEST

STANDING

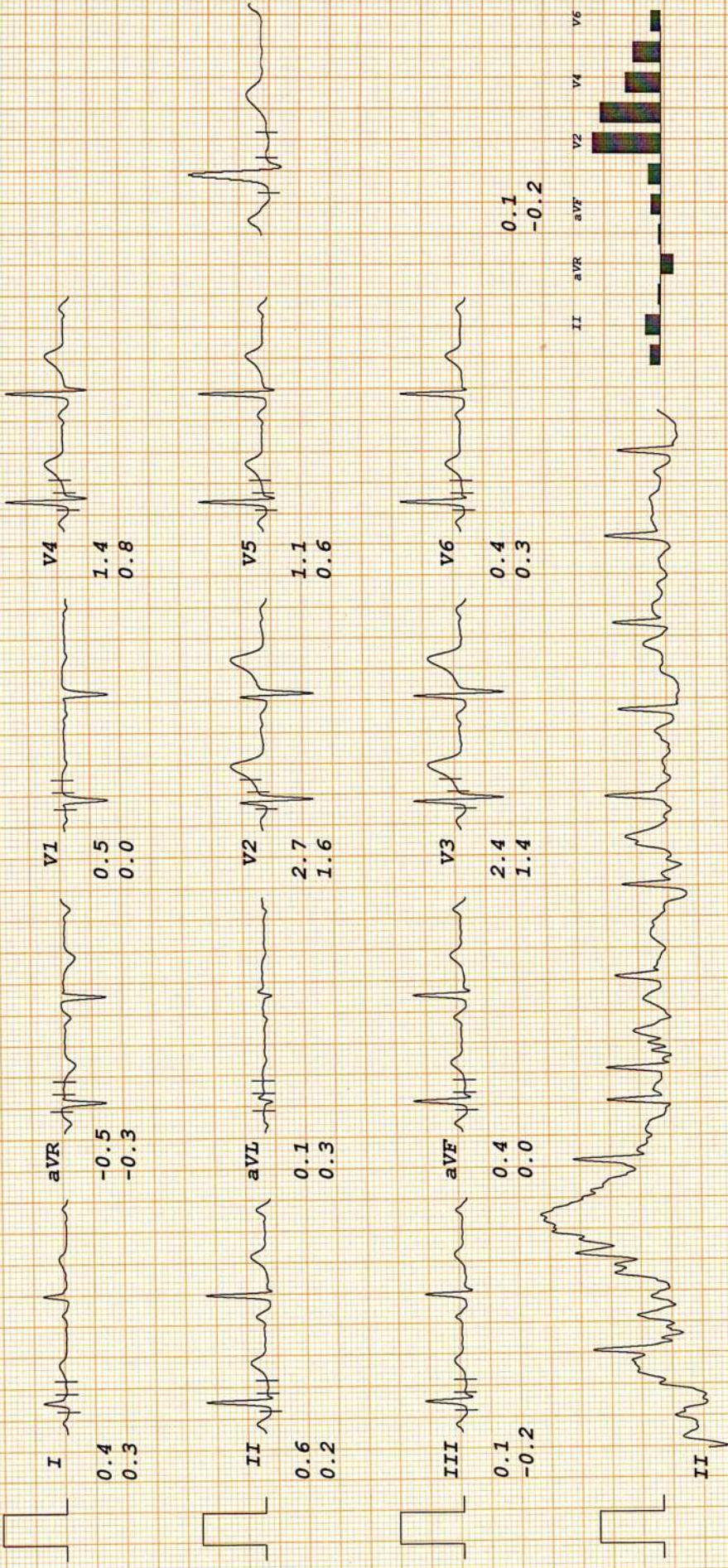
ST @ 10mm/mV

80ms PostJ

LINKED MEDIAN

Mag. X 2

III



I III aVL aVF V1 V2 V3 V4 V5 V6

IPSC PAIN AND SPINE HOSPITAL

HIMANGI SINGH

I.D. 67563

Age 32/F

Date 26-10-2024

RATE 89bpm

B.P. 120/80

PRETEST

HYPERTENT

PHASE TIME 0:18

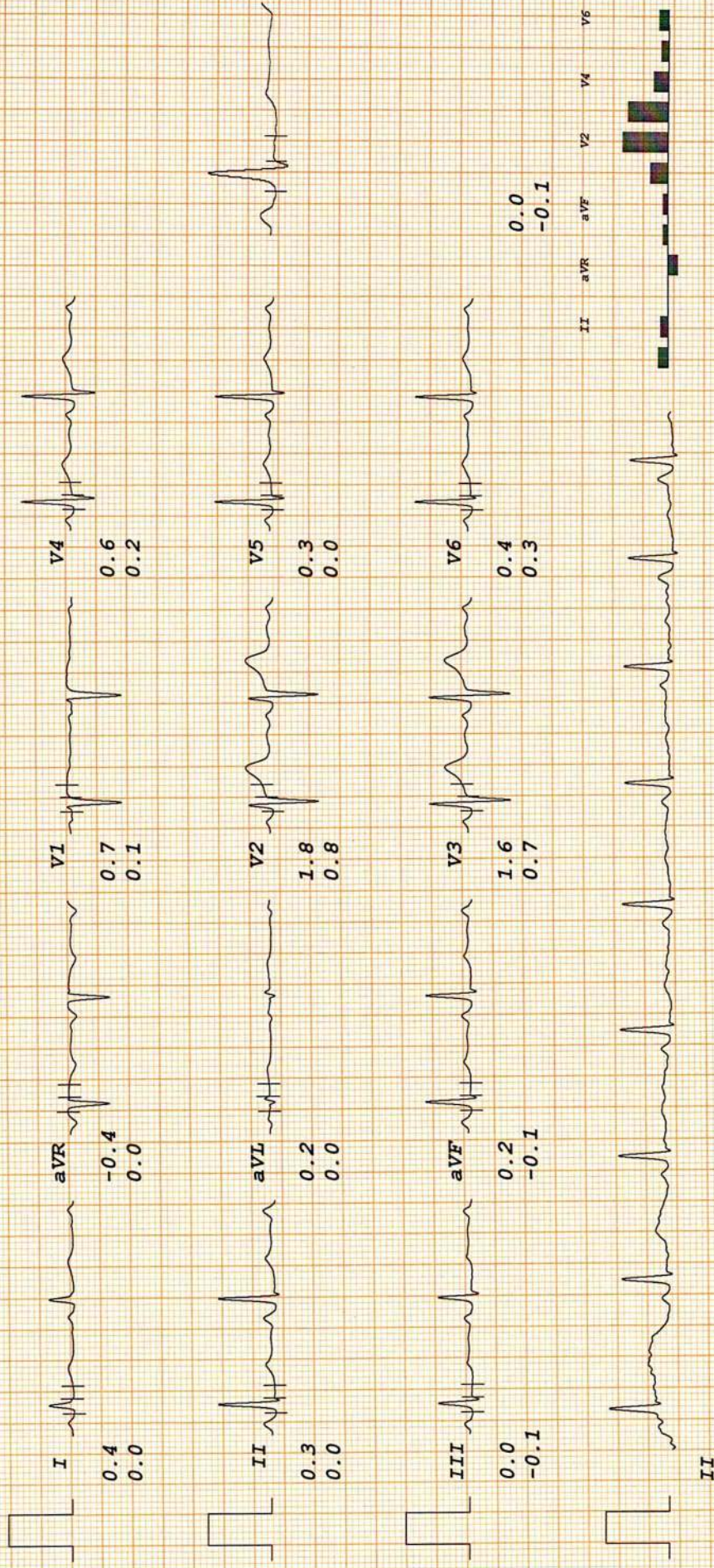
ST @ 10mm/mV

80ms PostJ

LINKED MEDIAN

Mag. X 2

III



I III aVL aVF V1 V2 V3 V4 V5 V6

IPSC PAIN AND SPINE HOSPITAL

HIMANGI SINGH

I.D. 67563

Age 32/F

Date 26-10-2024

Bruce

Stage 1

TOTAL TIME 2:55

PHASE TIME 2:55

ST @ 10mm/mV

80ms PostJ

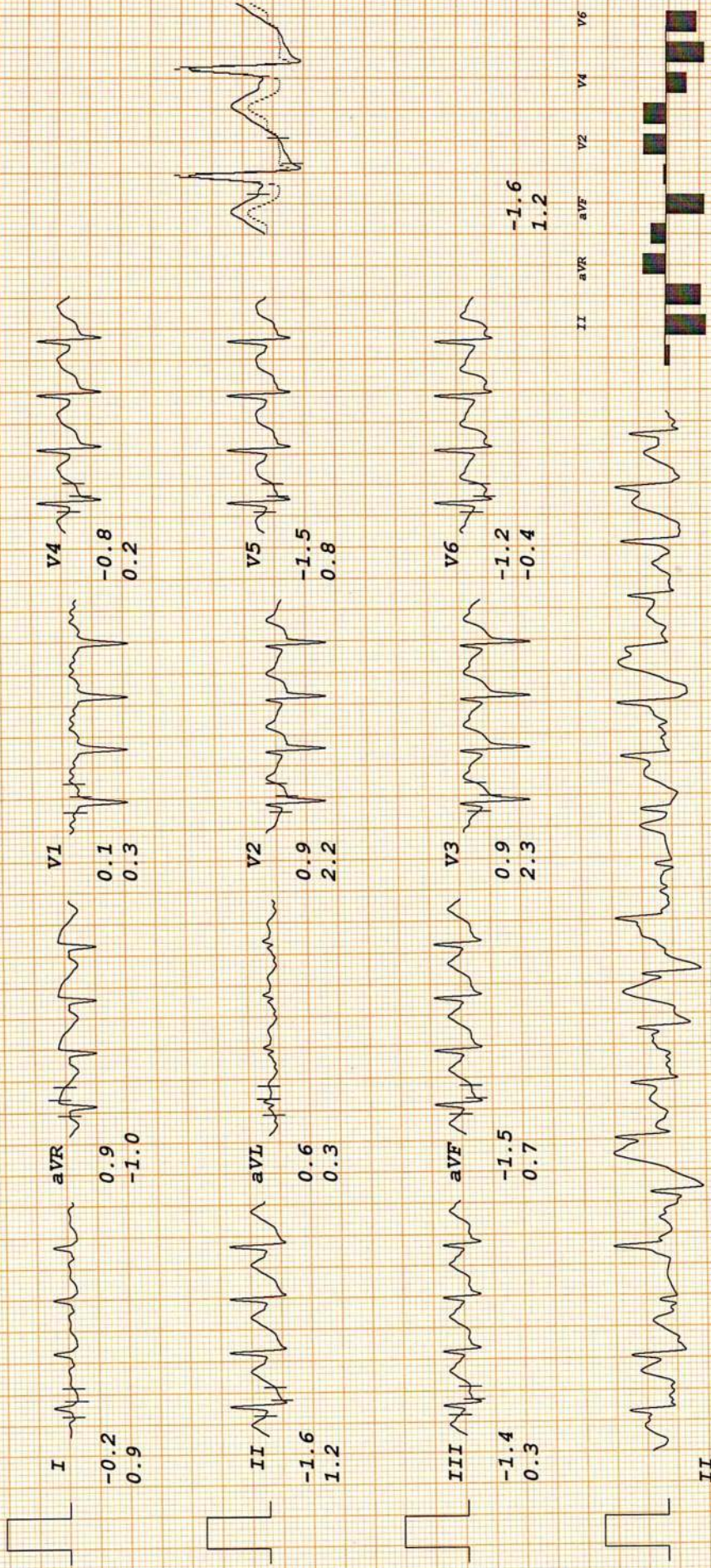
Speed 2.7 km/hr

SLOPE 10 %

LINKED MEDIAN

Mag. X 2

II



I III aVL aVF V1 V2 V3 V4 V5 V6

IPSC PAIN AND SPINE HOSPITAL

HIMANGI SINGH

I.D. 67563

Age 32/F

Date 26-10-2024

RATE 185bpm

B.P. 140/80

Bruce

PK-EXERCISE

TOTAL TIME 3:22

PHASE TIME 0:22

ST @ 10mm/mV

80ms PostJ

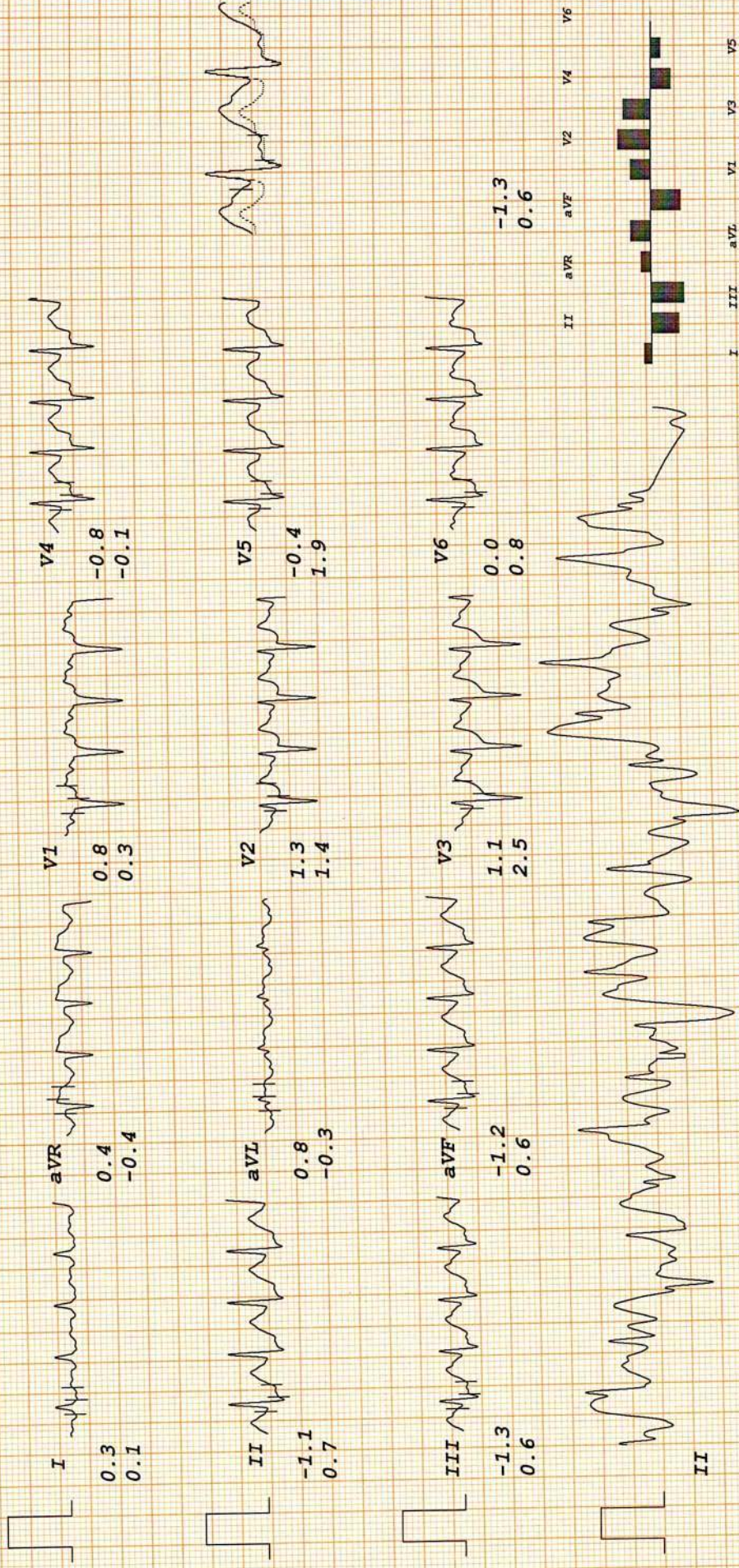
Speed 4 km/hr

SLOPE 12 %

LINKED MEDIAN

Mag. X 2

III



IPSC PAIN AND SPINE HOSPITAL

HIMANGI SINGH

I.D. 67563

Age 32/F

Date 26-10-2024

Bruce

RECOVERY

TOTAL TIME 4:28

PHASE TIME 0:55

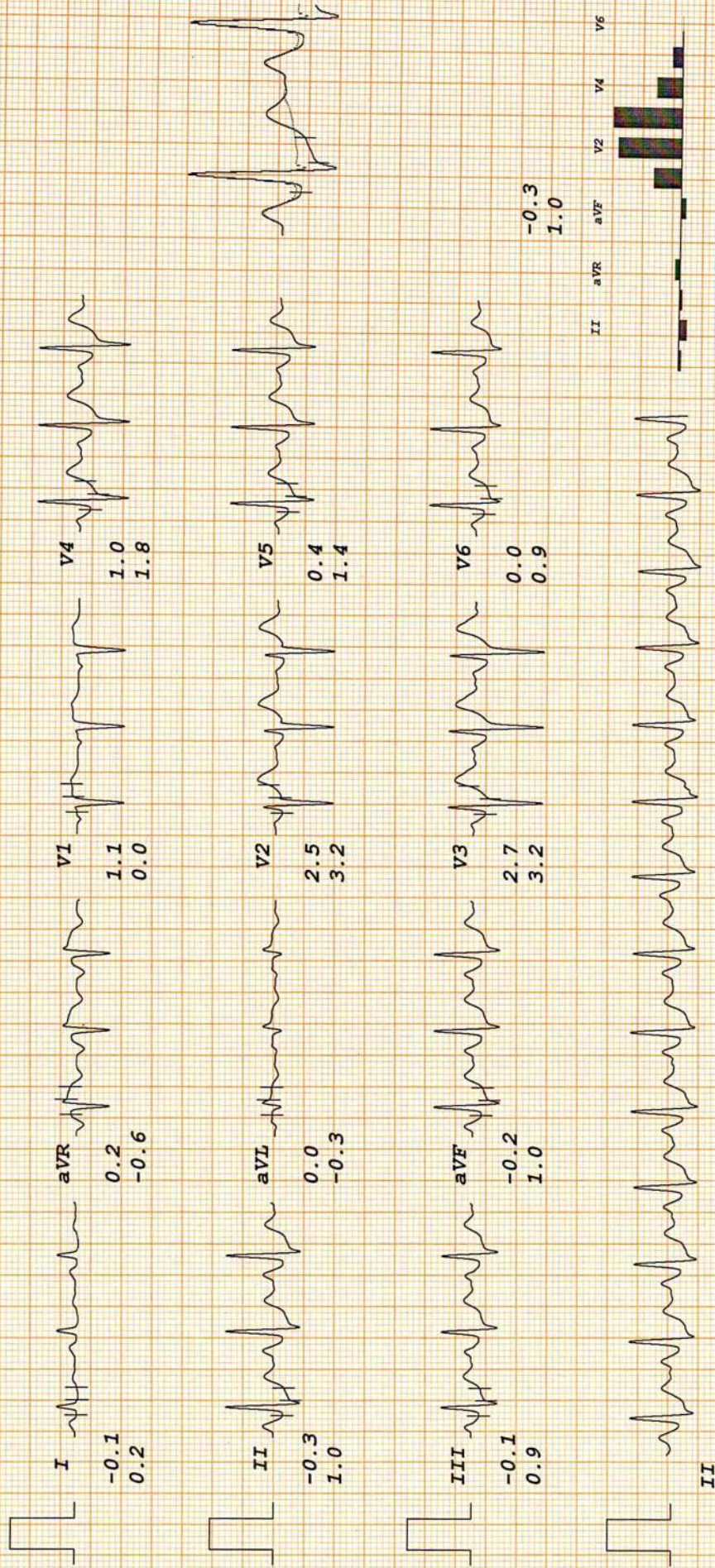
ST @ 10mm/mV

80ms PostJ

LINKED MEDIAN

Mag. X 2

II



I III aVL aVR V1 V2 V3 V4 V5 V6

IPSC PAIN AND SPINE HOSPITAL

HIMANGI SINGH

I.D. 67563

Age 32/F

Date 26-10-2024

RATE 113bpm

B.P. 120/80

Bruce

RECOVERY

TOTAL TIME 5:28

PHASE TIME 1:55

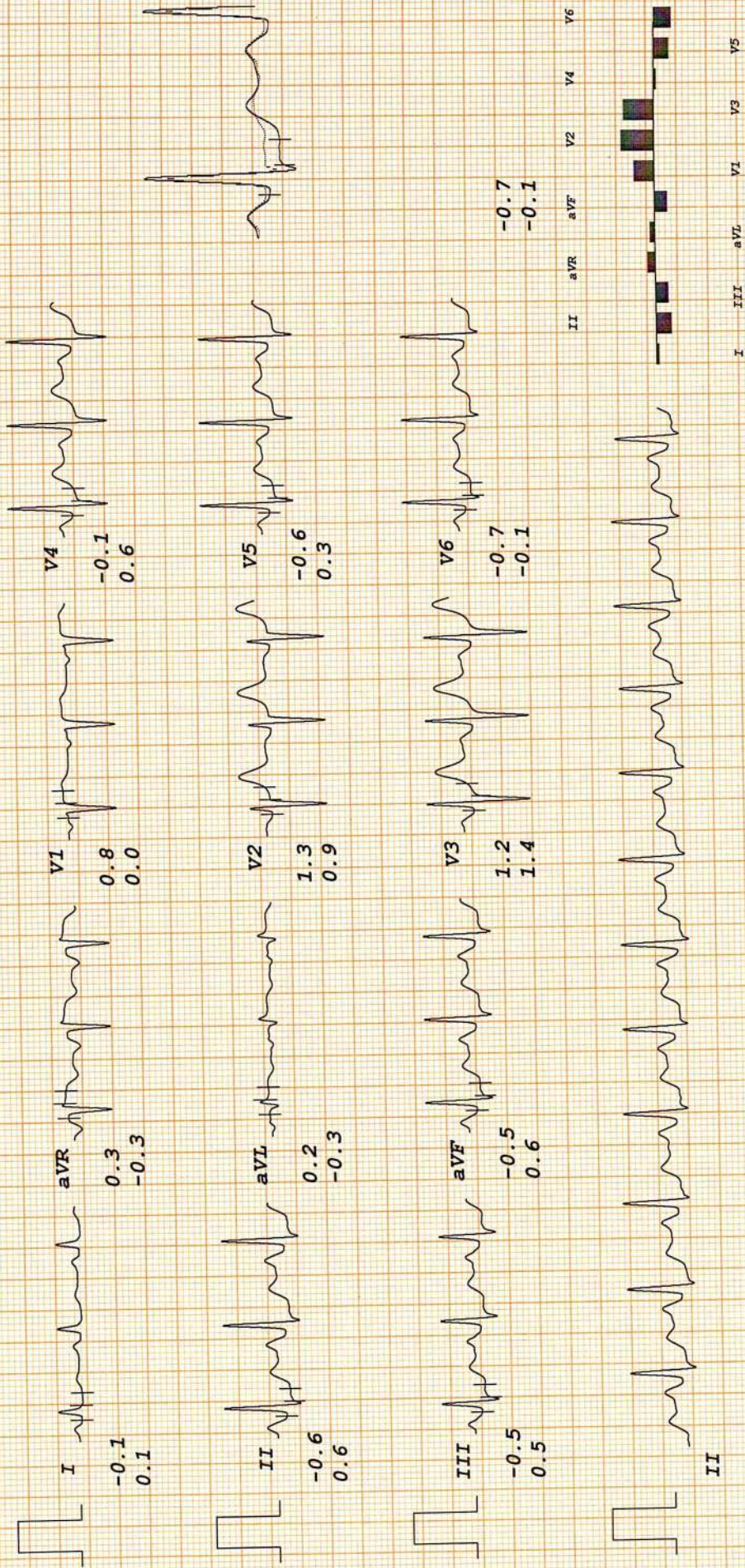
ST @ 10mm/mV

80ms PostJ

LINKED MEDIAN

Mag. X 2

V6



IPSC PAIN AND SPINE HOSPITAL

HIMANGI SINGH

I.D. 67563

Age 32/F

Date 26-10-2024

RATE 113bpm

B.P. 120/80

Bruce

RECOVERY

TOTAL TIME 6:28

PHASE TIME 2:55

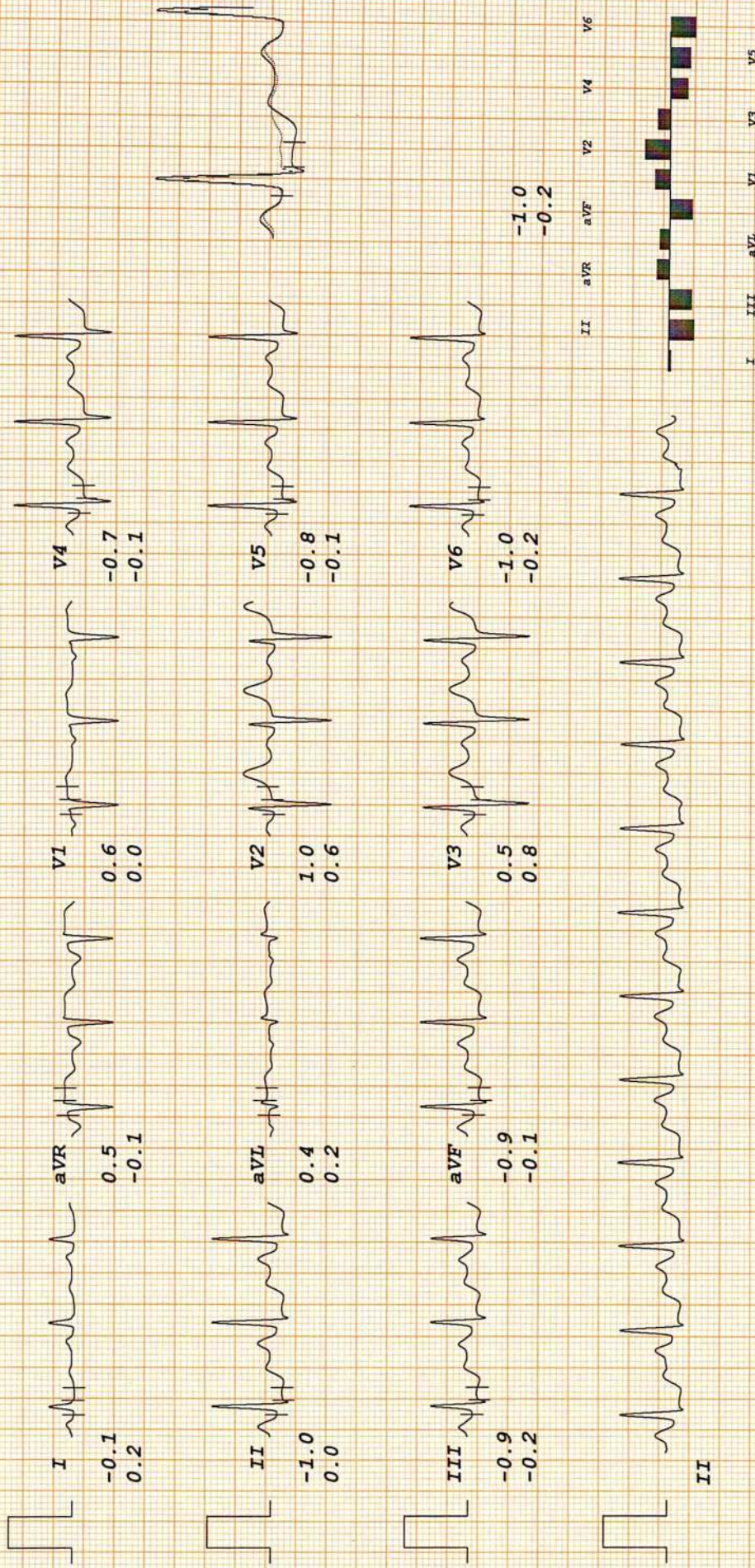
ST @ 10mm/mV

80ms PostJ

LINKED MEDIAN

Mag. X 2

V6



Patient Name :	Mrs. HIMANGI SINGH	Radiology No. :	4993/OPDPB24DL
Referred By :	Dr. INSURANCE	Date :	26-Oct-2024
UHD No. :	4888/UHD24DI	Age/Sex :	32Y Female

ULTRASOUND OF WHOLE ABDOMEN

Convex and linear Probes were used.

The liver is normal in size, contour and echotexture. Intrahepatic bile ducts and CBD are not dilated. Hepatic portal veins and the IVC appear normal in caliber.

Gall bladder is adequately distended with normal intraluminal fluid contents. No evidence of calculus / wall thickness noted.

Pancreas is of normal size and contour with normal echotexture.

Right kidney is normal in size and position .It shows normal movements with respiration. Cortical thickness is normal .

No calculus, mass or hydronephrotic changes seen.

Right kidney measures- 97 x 35mm.

Renal artery pulsation appear normal.

Left kidney is normal in size and position .It shows normal movements with respiration. Cortical thickness is normal .

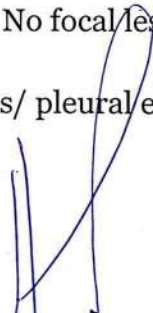
No calculus, mass or hydronephrotic changes seen.

Left kidney measures- 98 x 42mm.

Renal artery pulsation appear normal.

Spleen is of normal size and shape. Ecotexture is normal. No focal lesion is seen.

No evidence of retro-peritoneal lymphadenopathy/ ascites/ pleural effusion noted.



Dr. Harshita Surange
MBBS, DMRD (RADIODIAGNOSIS)
DIPLOMA IN MSK, UCAM (Spain)
Reg. No. MCI/16522, DMC/18402



BOOK APPOINTMENT





Patient Name :	Mrs. HIMANGI SINGH	Radiology No. :	4993/OPDPB24DL
Referred By :	Dr. INSURANCE	Date :	26-Oct-2024
UHID No. :	4888/UHTD24DI	Age/Sex :	32Y Female

Uterus is anteverted and is normal in size. Myometrium shows normal echo-pattern.
No mass or lesion is noted.

Endometrial is normal measuring 8.2mm and is in mid line.

Both ovaries are visualized and are normal with subcentemetric follicles.

No free fluid is seen in the pouch of douglas.

Urinary bladder does not show any calculus or mass lesion.

Impression: Normal Scan.

Dr. Harshita Surange
MBBS, DMRD (RADIODIAGNOSIS)
DIPLOMA IN MSK, UCAM (Spain)
Reg. No. MCI/16522, DMC/18402



BOOK APPOINTMENT





Patient Name :	Mrs. HIMANGI SINGH	Radiology No. :	4993/OPDPB24DL
Referred By :	Dr. INSURANCE	Date :	26-Oct-2024
UHID No. :	4888/UHID24DI	Age/Sex :	32Y Female

X-RAY CHEST**Indication: Routine check-up.****Image quality:-**

No evidence of rotation.

PA view. Normal penetration.

Airway:- Trachea central.

Carina & bronchi are normal.

No hilar abnormality.

Lung fields:- Clear.**Cardiac:-** Cardiac borders are visible.

Normal heart size.

Diaphragm:- Costophrenic angles on right & left are normal.

Cardiophrenic angles on right & left are normal.

Diaphragm portion are normal.

Bony cage:- No evidence of bony lesion/fracture seen.


No evidence of cervical ribs is seen.

Impression: No significant abnormality detected.**Please correlate clinically.**

Dr. Harshita Surange
MBBS, DMRD (RADIODIAGNOSIS)
DIPLOMA IN MSK, UCAM (Spain)
Reg. No. MCI/16522, DMC/18402



BOOK APPOINTMENT

Patient Name : Mrs. HIMANGI SINGH	Reg No. : 4888/UHID24DL	Lab ID. : 4999/OPDPB24DL
Age / Gender : 32Y / Female	Date : 26-Oct-2024	
Mobile No. : 8126120807	Manual No.	Collected : 26-Oct-2024 13.31
Refd. By : Dr. INSURANCE		Received : 26-Oct-2024 13.32
Sample Type : Plasma(Sodium fluoride)	Sample ID : 247007	Report : 26-Oct-2024 15.17

TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

Blood Sugar PP	107.2	mg/dl	70-150	GOD-POD
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INTERPRETATION:

American Diabetes Association (ADA) Diabetes Guidelines

Criteria for Diabetes Mellitus Diagnosis:

Fasting plasma glucose >126.0 mg/dl (Fasting is defined as no caloric intake for >8 hours) or

2-hr plasma glucose >200 mg/dl after glucose load or

HbA1c \geq 6.5% or

Random Plasma glucose >200 mg/dl

Impaired Fasting Glucose

Fasting glucose \geq 100mg/dl but <126 mg/dl

-----End of Report-----



Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252
Lab Technician : chand

Patient Name : Mrs. HIMANGI SINGH	Reg No. : 4888/UHID24DL	Lab ID. : 4993/OPDPB24DL
Age / Gender : 32Y / Female	Date : 26-Oct-2024	
Mobile No. : 8126120807	Manual No.	Collected : 26-Oct-2024 11.41
Refd. By : Dr. INSURANCE		Received : 26-Oct-2024 11.42
Sample Type : EDTA whole blood	Sample ID : 247002	Report : 26-Oct-2024 15.17

TEST NAME	RESULT	UNIT	RANGE	METHOD
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HEAMATOLOGY

COMPLETE BLOOD COUNT

HEMOGLOBIN	10.2	g/dl	12.0 - 15.0	Colorimetric
TOTAL LEUCOCYTE COUNT	8.4	10 ³ /uL	4.0-11.0	Electrical impedance

DIFFERENTIAL LEUCOCYTE COUNT(DLC)

Neutrophil	62	%	40-75	Electrical impedance
Lymphocyte	32	%	20-45	Electrical impedance
Eosinophil	02	%	1-6	Microscopy
Monocyte	04	%	2-10	Microscopy
Basophil	00	%	0-2	Microscopy

ESR	70	mm/1sthr	0-20	Westergren's
RBC COUNT	4.18	mili/cmm	3.80 - 4.80	Electrical impedance
PCV	32	%	36 - 40	Calculated
MCV	75.30	Fl	83.00 - 101.00	Calculated

MCH	24.4	Picogram	27.0 - 32.0	Calculated
MCHC	32.40	gm/dl	31.50 - 34.50	Calculated
PLATELET COUNT	202	10 ³ /uL	150 - 410	Electrical impedance

-----End of Report-----



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Age / Gender : 32Y / Female	Date : 26-Oct-2024	
Mobile No. : 8126120807	Manual No.	Collected : 26-Oct-2024 11.41
Refd. By : Dr. INSURANCE		Received : 26-Oct-2024 11.42
Sample Type : EDTA whole blood	Sample ID : 247002	Report : 26-Oct-2024 15.17

TEST NAME	RESULT	UNIT	RANGE	METHOD
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HEAMOTOLOGY

HBA1C (GLYCOSYLATED HB)	6.3	%	4-6	PEIT
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Metabolically healthy patients 4.5 - 6.0 %
6.1 - 6.5 %

Good control :

Fair control : 6.6 - 7.0 %

Poor control : Above - >7.0 %

COMMENTS: HbA1c is an indicator of glycemic control. HbA1c represents average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but within this 120 days. Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four. Estimated Average Glucose mg/dl = (HbA1c x 35.6) - 77.3) Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only this means that to predict or estimate average glucose from Hb-A1c or vice-versa is not "perfect" but gives a good working ballpark estimate. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime glucose levels, which are easier to predict and control. As per IFCC recommendations 2007, HbA1c being reported as above maintaining traceability to both IFCC (mmol/mol) & NGSP (%) units.

-----End of Report-----



Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252
Lab Technician : chand

Patient Name : Mrs. HIMANGI SINGH	Reg No. : 4888/UHID24DL	Lab ID. : 4993/OPDPB24DL
Age / Gender : 32Y / Female	Date : 26-Oct-2024	
Mobile No. : 8126120807	Manual No.	Collected : 26-Oct-2024 11.41
Refd. By : Dr. INSURANCE		Received : 26-Oct-2024 11.42
Sample Type : Serum	Sample ID : 247002	Report : 26-Oct-2024 15.17

TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

KIDNEY FUNCTION TEST

Blood Urea	17.7	mg/dl	15.0-45.0	urease-GLDH
Serum Creatinine	0.7	mg/dl	0.6 - 1.1	Jaffes Kinetic
Serum Uric Acid	2.70	mg/dl	2.6-6.0	Uricase
Total Protein				
PROTEN	6.72	g/dl	6.4-8.3	Biuret
ALBUMIN	4.2	g/dl	3.4-4.8	Bcg
GLOBULIN	2.52	g/dl	2.3-3.5	
A/G RATIO	1.67			
Calcium	8.5	mg/dl	8.6-10.2	Arsenazo
Sodium	141.0	mmol/L	136.0-149.0	ISE Indirect
Potassium	4.1	mmol/L	3.5-5.5	ISE Indirect
Chloride	102.0	mmol/L	98.0-109.0	ISE Indirect

-----End of Report-----



Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252
Lab Technician : chand

Patient Name : Mrs. HIMANGI SINGH	Reg No. : 4888/UHID24DL	Lab ID. : 4993/OPDPB24DL
Age / Gender : 32Y / Female	Date : 26-Oct-2024	
Mobile No. : 8126120807	Manual No.	Collected : 26-Oct-2024 11.41
Refd. By : Dr. INSURANCE		Received : 26-Oct-2024 11.42
Sample Type : Serum	Sample ID : 247002	Report : 26-Oct-2024 15.17

TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

LIPID PROFILE

Total Cholesterol	192.00	mg/dl	123-199	CHOD-PAP
Triglycerides	63.1	mg/dl	35-135	Gpo
HDL Cholesterol Direct	52.1	mg/dl	42-88	Direct
Vldl	13	mg/dl	4.7-22.1	
LDL Cholesterol Direct	127.3	mg/dl	63-129	
Total Cholesterol/HDL Ratio	3.7		0.0-4.97	
LDL/HDL Ratio	2.4		0.0-3.55	

INTERPRETATION:-

	Total cholesterol	LDL cholesterol	Triglycerides
Acceptable/Low Risk	: < 200 mg/dl	<130 mg/dl	<150 mg/dl
Borderline High Risk	: 200-239 mg/dl	130-159 mg/dl	150-199 mg/dl
High Risk	: > 240 mg /dl	> 160 mg/dl	200-499 mg/dl
Very High			>500 mg/dl

-----End of Report-----



Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252
Lab Technician : chand

Patient Name : Mrs. HIMANGI SINGH	Reg No. : 4888/UHID24DL	Lab ID. : 4993/OPDPB24DL
Age / Gender : 32Y / Female	Date : 26-Oct-2024	
Mobile No. : 8126120807	Manual No.	Collected : 26-Oct-2024 11.41
Refd. By : Dr. INSURANCE		Received : 26-Oct-2024 11.42
Sample Type : Serum	Sample ID : 247002	Report : 26-Oct-2024 15.17

TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

LIVER FUNCTION TEST

Serum Bilirubin

Total Bilirubin	0.30	mg/dl	0.0-2.0	Diazo
Direct Bilirubin	0.07	mg/dl	0-0.4	Diazo
Indirect Bilirubin	0.23	mg/dl	0-0.8	Calculated

Total Protein


PROTEN	6.72	g/dl	6.4-8.3	Biuret
ALBUMIN	4.2	g/dl	3.4-4.8	Bcg
GLOBULIN	2.52	g/dl	2.3-3.5	
A/G RATIO	1.67			
SGOT	13	U/L	0-31	IFCC
SGPT	12	U/L	0.0-34	IFCC

Gamma GT	25.2	U/L	0-38	Glupa-c
Alkaline Phosphatase	114	U/L	42-98	Amp

-----End of Report-----



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DMC/25252
Lab Technician : chand

Patient Name : Mrs. HIMANGI SINGH	Reg No. : 4888/UHID24DL	Lab ID. : 4993/OPDPB24DL
Age / Gender : 32Y / Female	Date : 26-Oct-2024	
Mobile No. : 8126120807	Manual No.	Collected : 26-Oct-2024 11.41
Refd. By : Dr. INSURANCE		Received : 26-Oct-2024 11.42
Sample Type : Serum	Sample ID : 247002	Report : 26-Oct-2024 17.53

TEST NAME	RESULT	UNIT	RANGE	METHOD
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HORMONES

THYROID PROFILE

T3 1.71 ng/dl CLIA

All values

Adults (euthyroid) 0.50-2.00

Newborns 0.73-2.88

6d - 3 mth 0.80-2.75

4 - 12 mth 0.86-2.65

1 - 6 yr 0.92-2.48

7 - 11 yr 0.93-2.31

12- 20 yr 0.91-2.18

Pregnancy

First trimester 0.05 - 3.70

Second trimester 1.7 - 4.3

Third trimester 0.4 - 3.9

T4 10.1 µg/dl CLIA

Adults - M - 4.4-10.8 µg/dl

F- 4.8 - 11.6 µg/dl

1st Trimester 7.3-15.00 µg/dl

2st Trimester 8.92-17.38

3st Trimester 7.98-17.70



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Patient Name : Mrs. HIMANGI SINGH	Reg No. : 4888/UHID24DL	Lab ID. : 4993/OPDPB24DL
Age / Gender : 32Y / Female	Date : 26-Oct-2024	
Mobile No. : 8126120807	Manual No.	Collected : 26-Oct-2024 11.41
Refd. By : Dr. INSURANCE		Received : 26-Oct-2024 11.42
Sample Type : Serum	Sample ID : 247002	Report : 26-Oct-2024 17.53

TSH 1.30 μ U/ml CLIA

Adults

21-100 yrs 0.42 - 5.45

Pediatric

0-12 Months 0.98-5.63

1-5 years 0.64-5.76

6-10 Years 0.51-4.82

11-14 Years 0.53-5.27

15-20 years 0.43-4.20

Pregnancy

First trimester 0.1 - 2.5*

Second trimester 0.2 - 3*

Third trimester 0.3 - 3*

COMMENTS: Assay results should be interpreted in context to the clinical condition and associated results of other investigations. Previous treatment with corticosteroid therapy may result in lower TSH levels while thyroid hormone levels are normal. Results are invalidated if the client has undergone a radionuclide scan within 7-14 days before the test. Abnormal thyroid test findings often found in critically ill clients should be repeated after the critical nature of the condition is resolved. The production, circulation, and disintegration of thyroid hormones are altered throughout the stages of pregnancy

-----End of Report-----



Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252
Lab Technician : chand




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TOLL FREE NUMBER
COMING SOON

Patient Name : Mrs. HIMANGI SINGH	Reg No. : 4888/UHID24DL	Lab ID. : 4993/OPDPB24DL
Age / Gender : 32Y / Female	Date : 26-Oct-2024	
Mobile No. : 8126120807	Manual No.	Collected : 26-Oct-2024 14.22
Refd. By : Dr. INSURANCE		Received : 26-Oct-2024 14.22
Sample Type : URINE	Sample ID : 247002	Report : 26-Oct-2024 15.17

TEST NAME	RESULT	UNIT	RANGE	METHOD
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CLINICAL PATHOLOGY

URINE ROUTINE

MICROSCOPY

PHYSICAL EXAMINATION

QUANTITY	15.00	ml	10-30	
COLOUR	PALE YELLOW			
TRANSPARENCY	CLEAR			
SPECIFIC GRAVITY	1.015		1.015-1.025	
PH	6.0		5.5 - 7	

CHEMICAL EXAMINATION

PROTEIN	NIL
SUGAR	NIL

MICROSCOPIC EXAMINATION

PUS CELLS	2-3	/hpf		MICROSCOPIC
RBC'S	NIL		NIL	
CASTS	NIL			
CRYSTALS	NIL			
EPITHELIAL CELLS	1-2			
BACTERIA	NIL			
OTHERS	NIL			
KETONE	NIL			

-----End of Report-----



Dr. Sangeeta B
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DMC/25252
Lab Technician : chand

Patient Name : Mrs. HIMANGI SINGH	Reg No. : 4888/UHID24DL	Lab ID. : 5002/OPDPB24DL
Age / Gender : 32Y / Female	Date : 26-Oct-2024	
Mobile No. : 8126120807	Manual No.	Collected : 26-Oct-2024 11.46
Refd. By : Dr. INSURANCE		Received : 26-Oct-2024 11.46
Sample Type : Plasma(Sodium fluoride)	Sample ID : 247009	Report : 26-Oct-2024 15.17

TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

BLOOD SUGAR FASTING	94.4	mg/dl	74-100	GOD-POD
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INTERPRETATION:

American Diabetes Association (ADA) Diabetes Guidelines

Criteria for Diabetes Mellitus Diagnosis:

Fasting plasma glucose >126.0 mg/dl (Fasting is defined as no caloric intake for >8 hours) or

2-hr plasma glucose >200 mg/dl after glucose load or

HbA1c \geq 6.5% or

Random Plasma glucose >200 mg/dl

Impaired Fasting Glucose

Fasting glucose \geq 100mg/dl but <126 mg/dl

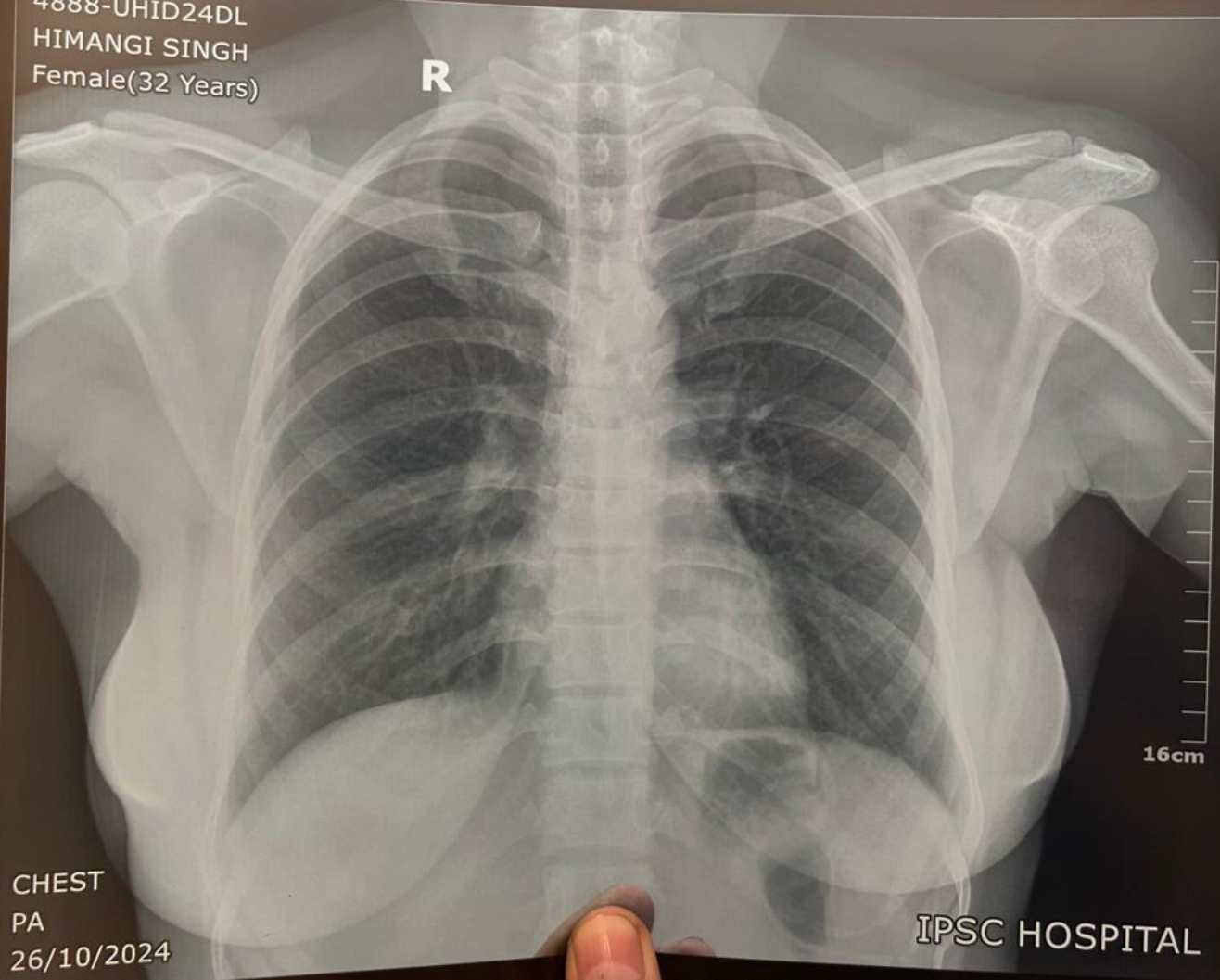
-----End of Report-----



Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252
Lab Technician : chand

4888-UHID24DL
HIMANGI SINGH
Female(32 Years)

R



16cm

CHEST
PA
26/10/2024

IPSC HOSPITAL