



696405

MR Pushpendra Singh  
29y/M

Routine eye checkup

**Vitals :**

BP - 130/70 mm Hg  
SpO2 - 98  
HR - 81b/m.  
Weight - 79.2  
Height - 178 cm.

**Chief Complaints :**

**H/O Present illness :**

**Past History :**

VU } 6/6  
   } unaided  
   } 6/6  
  
 MR } MG  
   } MG

MET } 20.7  
   } 20.5

**Investigation :**

**Drug Allergies : (if any)**

**Treatment :**

Colour vision - Normal (I)

Reflexes - Normal





ENT

Ear - B/L NAD  
Nose - DNS to (R)  
Throat - NAD.

Vitals :

Chief Complaints :


H/O Present Illness :

Past History :

Investigation :

Drug Allergies : (if any)

Treatment :

  
08 | 03 | 24



Gurgaon

Q Block South City 11, Sohna Road, Main Sector-47, Gurgaon, Haryana Ph.: 0124-49000000 Fax : 0124-2218733  
E-mail : parkmedcenters@gmail.com

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# Park Hospital

GROUP SUPER SPECIALITY HOSPITAL

*Dental*



*Routine health checkup.*

Vitals :

Chief Complaints :

*O/E:- Dislodged crown unit 36  
Plaque ++*

H/O Present Illness :

*Adv. Scaling and Polishing.  
Restoration unit 36*

Past History :

Investigation :

Drug Allergies : (if any)

*l*

Treatment :



Gurgaon

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the **health** care providers

the **health** care providers



# Park Hospital

GROUP SUPER SPECIALITY HOSPITAL

## Dermatology



Name - Pushpendro Singh

Age - 24 y / M

?xerosis

Vitals :

Chief Complaints :

Adv:-

EXCELA MAX

H/O Present Illness :

LOTION

Past History :

Rx: 103

Investigation :

Drug Allergies : (if any)

Treatment :



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**DEPARTMENT OF IMMUNOLOGY**

<b>Patient Name</b> :	Mr. PUSHAPENDRA SINGH	<b>Bill Date</b> :	08/03/2024
<b>MR No</b> :	696405	<b>Reporting Date</b> :	09/03/2024
<b>Age/Sex</b> :	29 Years / Male	<b>Sample ID</b> :	257789
<b>Type</b> :	OPD	<b>Bill/Req. No.</b> :	25261328
<b>TPA/Corporate</b> :	MEDIWHEEL PVT LTD	<b>Ref Doctor</b> :	Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>PSA TOTAL</b>				
PROSTATE SPECIFIC ANTIGEN(PSA)	1.28	0.57 - 4.0	ng/ml	Chemiluminescence
SPECIMEN TYPE	SERUM			
<b>Method :</b> chemiluminescent immunoassay				

**Note :** Clinical Use: -

An aid in the early detection of Prostate cancer in Male. Follow up and management of Prostate cancer patients. Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer

**Note: -**

False negative / positive results are observed in patients receiving monoclonal antibodies for diagnosis or therapy. PSA level may appear consistently elevated / depressed due to the interference by heterophilic antibodies & nonspecific protein binding. PSA values regardless of levels should not be interpreted as absolute evidence of the presence or absence of disease. All values should be related with clinical findings and results of other investigations.

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



Sample no.

Dr. JAY PRAKASH SINGH  
MBBS, MD (PATHOLOGY)

Dr. ISHA RASTOGI  
MD, MBBS MICROBIOLOGY  
CONSULTANT CLINICAL MICROBIOLOGIST



USER NAME: DINESH



MC - 4839

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## DEPARTMENT OF BIOCHEMISTRY

**Patient Name** : Mr. PUSHAPENDRA SINGH  
**MR No** : 696405  
**Age/Sex** : 29 Years / Male  
**Type** : OPD  
**TPA/Corporate** : MEDIWHEEL PVT LTD  
**Bill Date** : 08/03/2024  
**Reporting Date** : 08/03/2024  
**Sample ID** : 257789  
**Bill/Req. No.** : 25261328  
**Ref Doctor** : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>LIPID PROFILE</b>				
<b>LIPID PROFILE</b>				
TOTAL CHOLESTEROL	227.5	0 - 250	mg/dL	CHOD -Trinder
SERUM TRIGLYCERIDES	<b>326.5</b>	<i>H</i> 60 - 165	mg/dl	GPO-TRINDER
HDL-CHOLESTEROL	58.2	30 - 70	mg/dl	DIRECT
VLDL CHOLESTEROL	<b>65.3</b>	<i>H</i> 6 - 32	mg/dL	calculated
LDL	104	50 - 135	mg/dl	calculated
LDL CHOLESTEROL/HDL RATIO	1.79	1.0 - 3.0	mg/dL	calculated
TOTAL CHOLESTEROL/HDL RATIO	3.91	2.0 - 5.0	mg/dl	calculated

SAMPLE TYPE: SERUM

**Note** : ATP III Guidelines At-A-Glance Quick Desk Reference

Step 1 - Determine lipoprotein levels obtain complete lipoprotein profile after 9- to 12-hour fast.

ATP III Classification of LDL, Total, and HDL Cholesterol (mg/dL):-

LDL Cholesterol - Primary Target of Therapy

<100	Optimal
130-159	Borderline high
>190	Very high.

Total Cholesterol

<200	Desirable
200-239	Borderline high
>240	High

HDL Cholesterol

<40	Low
>60	High

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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## DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. PUSHAPENDRA SINGH

MR No : 896405

Age/Sex : 29 Years / Male

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 08/03/2024

Reporting Date : 08/03/2024

Sample ID : 257789

Bill/Req. No. : 25261328

Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>LFT (LIVER FUNCTION TEST)</b>				
<b>LFT</b>				
TOTAL BILIRUBIN	1.15	0 - 1.2	mg/dL	DIAZO
DIRECT BILIRUBIN	0.38	0 - 0.4	mg/dL	DIAZO
INDIRECT BILIRUBIN	<b>0.77</b>	<i>H</i> 0.10 - 0.6	mg/dL	CALCULATED
SGOT (AST)	14.6	0 - 45	U/L	IFCC WITHOUT
SGPT (ALT)	26.3	0 - 45	U/L	IFCC WITHOUT
ALKALINE PHOSPHATASE	<b>181.9</b>	<i>H</i> 30 - 170	IU/L	MODIFIED IFCC
TOTAL PROTEINS	7.2	6.4 - 8.0	g/dL	BIURET
ALBUMIN	4.6	3.3 - 5.5	g/dL	BCG DYE
GLOBULIN	2.6	2.3 - 4.5	g/dL	CALCULATED
A/G RATIO	1.77	1.1 - 2.2		CALCULATED
SAMPLE TYPE:	SERUM			

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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**DEPARTMENT OF BIOCHEMISTRY**

Patient Name : Mr. PUSHPENDRA SINGH  
MR No : 696405  
Age/Sex : 29 Years / Male  
Type : OPD  
TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 08/03/2024  
Reporting Date : 08/03/2024  
Sample ID : 257789  
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Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>KFT (RENAL PROFILE)</b>				
<b>KFT</b>				
SERUM UREA	30.3	10 - 45	mg/dL	
SERUM CREATININE	1.0	0.4 - 1.4	mg/dL	MODIFIED JAFFES
SERUM URIC ACID	6.2	2.5 - 7.0	mg/dL	URICASE
SERUM SODIUM	141	135 - 150	mmol/L	ISE
SERUM POTASSIUM	4.0	3.5 - 5.5	mmol/L	ISE
SERUM CALCIUM	8.5	8.5 - 10.5	mg/dL	ARSENazo III
SERUM PHOSPHORUS	3.7	2.5 - 4.5	mg/dL	AMMONIUM
SAMPLE TYPE:	SERUM			

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**DEPARTMENT OF HAEMATOLOGY**

Patient Name : Mr. PUSHAPENDRA SINGH  
 MR No : 696405 Bill Date : 08/03/2024  
 Age/Sex : 29 Years / Male Reporting Date : 11/03/2024  
 Type : OPD Sample ID : 257789  
 TPA/Corporate : MEDIWHEEL PVT LTD Bill/Req. No. : 25261328  
 Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
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**ESR (WESTERGREN)**

E.S.R .1ST HRS.	18	0 - 20	mm/Hr.	Westergren
SPECIMEN TYPE	WHOLE BLOOD-EDTA			

Method : (Capillary photometry)

- Note :**
1. C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.
  2. Test conducted on EDTA whole blood at 37C.
  3. ESR readings are auto- corrected with respect to Hematocrit (PCV) values.

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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**DEPARTMENT OF MICROBIOLOGY**

<b>Patient Name</b> :	Mr. PUSHAPENDRA SINGH	<b>Bill Date</b> :	08/03/2024
<b>MR No</b> :	696405	<b>Reporting Date</b> :	10/03/2024
<b>Age/Sex</b> :	29 Years / Male	<b>Sample ID</b> :	257789
<b>Type</b> :	OPD	<b>Bill/Req. No.</b> :	25261328
<b>TPA/Corporate</b> :	MEDIWHEEL PVT LTD	<b>Ref Doctor</b> :	Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
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**URINE C/S**

<b>NAME OF SPECIMEN</b>	Urine (Uncentrifuged )	
<b>ORGANISM IDENTIFIED</b>	NO ORGANISM GROWN IN CULTURE AFTER 48HRS OF INCUBATION AT 37 C DEGREE.	Aerobic culture

Method :

**Note : URINE CULTURE :**

Presence of >105 cfu/ml (100000) in midstream urine sample is considered clinically significant. However in symptomatic, immune-compromised or diabetic patients & patients with indwelling catheters, even a smaller count of bacteria may signify infection (100-10000cfu/ml). Kindly correlate clinically.

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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**DEPARTMENT OF IMMUNOLOGY**

**Patient Name** : Mr. PUSHAPENDRA SINGH  
**MR No** : 696405  
**Age/Sex** : 29 Years / Male  
**Type** : OPD  
**TPA/Corporate** : MEDIWHEEL PVT LTD

**Bill Date** : 08/03/2024  
**Reporting Date** : 09/03/2024  
**Sample ID** : 257789  
**Bill/Req. No.** : 25261328  
**Ref Doctor** : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>THYROID PROFILE</b>				
TRI-IODOTHYRONINE (T3)	1.06	0.60 - 1.81	ng/ml	Chemiluminescence
THYROXINE (T4)	8.1	5.01 - 12.45	µg/dL	Chemiluminescence
THYROID STIMULATING HORMONE	1.60	0.5-5.50 ,	µIU/ml	
SPECIMEN TYPE	SERUM			
<b>Method</b> : chemiluminescent immunoassay				

**Note** : Clinical Significance:

Thyroid function tests (TFTs) is a collective term for blood tests used to check the function of the thyroid. TFTs may be requested if a patient is thought to suffer from hyperthyroidism (overactive thyroid) or hypothyroidism (underactive thyroid), or to monitor the effectiveness of either thyroid-suppression or hormone replacement therapy. It is also requested routinely in conditions linked to thyroid disease, such as atrial fibrillation and anxiety disorder. A TFT panel typically includes thyroid hormones such as thyroid-stimulating hormone (TSH, thyrotropin) and thyroxine (T4), and triiodothyronine (T3) depending on local laboratory policy.

Note: Please correlate with clinical condition

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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**DEPARTMENT OF HAEMATOLOGY**

<b>Patient Name</b> :	Mr. PUSHAPENDRA SINGH	<b>Bill Date</b> :	08/03/2024
<b>MR No</b> :	696405	<b>Reporting Date</b> :	08/03/2024
<b>Age/Sex</b> :	29 Years / Male	<b>Sample ID</b> :	257789
<b>Type</b> :	OPD	<b>Bill/Req. No.</b> :	25261328
<b>TPA/Corporate</b> :	MEDIWHEEL PVT LTD	<b>Ref Doctor</b> :	Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>BLOOD GROUPING AND RH FACTOR</b>				
BLOOD GROUP	"AB" RH POSITIVE			ABO/Rh (D) SLIDE

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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## DEPARTMENT OF HAEMATOLOGY

Patient Name : Mr. PUSHAPENDRA SINGH  
 MR No : 696405  
 Age/Sex : 29 Years / Male  
 Type : OPD  
 TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 08/03/2024  
 Reporting Date : 08/03/2024  
 Sample ID : 257789  
 Bill/Req. No. : 25261328  
 Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>CBC</b>				
HAEMOGLOBIN	13.3	12 - 16	gm/dL	COLORIMETRY
TOTAL LEUCOCYTE COUNT	5800	4000-11000	/ $\mu$ L	LASER FLOW
<b>DIFFERENTIAL COUNT</b>				
NEUTROPHILS	50	40.0 - 70.0	%	FLOW CYTOMETRY
LYMPHOCYTES	40	20.0 - 40.0	%	FLOW CYTOMETRY
MONOCYTES	06	3.0 - 8.0	%	FLOW CYTOMETRY
EOSINOPHILS	04	0.5 - 5.0	%	FLOW CYTOMETRY
BASOPHILS	00	0.0 - 2.0	%	FLOW CYTOMETRY
RED BLOOD CELL COUNT	4.97	3.5 - 5.5	millions/ $\mu$ L	ELECTRICAL
PACKED CELL VOLUME	39.6	35.0 - 50.0	%	ELECTRICAL
MEAN CORPUSCULAR VOLUME	<b>79.7</b>	L 83 - 101	fL	ELECTRICAL
MEAN CORPUSCULAR HAEMOGLOBIN	<b>26.8</b>	L 27 - 31	Picogrammes	CALCULATED
MEAN CORPUSCULAR HB CONC	33.6	33 - 37	g/dl	CALCULATED
PLATELET COUNT	226	150 - 450	thou/ $\mu$ L	ELECTRICAL
RDW	14.3	11.6 - 14.5	%	CALCULATED
SAMPLE TYPE FOR C.B.C	Whole Blood EDTA			

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## DEPARTMENT OF PATHOLOGY

Patient Name : Mr. PUSHAPENDRA SINGH  
 MR No : 696405  
 Age/Sex : 29 Years / Male  
 Type : OPD  
 TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 08/03/2024  
 Reporting Date : 08/03/2024  
 Sample ID : 257789  
 Bill/Req. No. : 25261328  
 Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>URINE ROUTINE AND MICROSCOPY</b>				
<b>PHYSICAL CHARACTERSTICS</b>				
QUANTITY	40ml	5 - 100	ml	
COLOUR	Pale Yellow	Pale Yellow		Manual Method
TURBIDITY	Clear	clear		
SPECIFIC GRAVITY	1.025	1.000-1.030		urinometer
PH - URINE	6.0	5.0 - 9.0		PH PAPER
<b>CHEMICAL EXAMINATION-1</b>				
UROBILINOGEN	Negative	NIL		Ehrlich
URINE PROTEIN	Absent	NIL	mg/dl	Protein error indicator
BLOOD	NIL	NIL		
URINE BILIRUBIN	NIL	NIL		
GLUCOSE	NIL	NIL	mg/dL	GOD-POD/Benedicts SOD.
URINE KETONE	NIL	NIL		
<b>MICRO.EXAMINATION</b>				
PUS CELL	2-4	0-5	cells/hpf	Microscopic
RED BLOOD CELLS	Nil	0-2	cells/hpf	
EPITHELIAL CELLS	1-2	0-5	cells/hpf	
CASTS	NIL	NIL	/lpf	
CRYSTALS	NIL	NIL	/Lpf	
OTHER	NIL			
AMORPHOUS URINE	Absent			MicroScopy

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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MR No : 696405  
Age/Sex : 29 Years / Male  
Type : OPD  
TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 08/03/2024  
Reporting Date : 08/03/2024  
Sample ID : 257789  
Bill/Req. No. : 25281328  
Ref Doctor : Dr.RMD

Test	Result	Bio. Ref. Interval	Units	Method
<b>BLOOD SUGAR FASTING</b>				
PLASMA GLUCOSE FASTING	83.2	60 - 110	mg/dl	GOD TRINDERS

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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MR No : 696405  
Age/Sex : 29 Years / Male  
Type : OPD  
TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 06/03/2024  
Reporting Date : 06/03/2024  
Sample ID : 257789  
Bill/Req. No. : 25261328  
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>BLOOD SUGAR 2 HR. PP</b>				
BLOOD SUGAR P.P.	97.0	80 - 150	mg/dl	

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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**PARK GROUP OF HOSPITALS** : West Delhi - Gurugram - Faridabad - Sonapat - Panipat - Karnal - Ambala - Patiala - Behror - Jaipur





## DEPARTMENT OF RADIOLOGY

Patient Name	Mr PUSHAPENDRA SINGH	Billed Date	: 08/03/2024
Reg No	696405	Reported Date	: 08/03/2024
Age/Sex	29 Years / Male	Req. No.	: 25261328
Type	OPD	Consultant Doctor	: Dr. RMO

### X-RAY CHEST AP/PA

Bilateral lungs appears normal.

No focal lung lesion seen.

No evidence of free fluid is seen.

Both hila are normal in size, have equal density and bear normal relationship.

The heart and trachea are central in position and no mediastinal abnormality is visible.

The cardiac size is normal for patient age and view.

The domes of the diaphragms are normal in position, and show smooth outline.

To be correlated clinically



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CONSULTANT RADIOLOGIST

Dr. MANJEET SEHRAWAT  
MBBS, MD, PDCC  
CONSULTANT RADIOLOGIST

ALISHA KHAN  
MEDICAL TRANSCRIPTIONIST

Dr. NEENA SIKKA  
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RAJNISH SHARMA  
MEDICAL  
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**USG WHOLE ABDOMEN**

The Real time, B mode, gray scale sonography of the abdominal organs was performed.

**LIVER** : The liver is normal in size 13.3cm shape and echotexture. No evidence of any focal lesion. IHBR is not dilated.

**GALL BLADDER** :The gall bladder is well distended. No evidence any calculus or mass seen.No evidence of pericholecystic fluid is seen.

**BILE DUCT** :The common bile duct is normal in caliber. No evidence of calculus is noted in common bile duct.

**SPLEEN** :The spleen is normal in size10.5cm and shape.Its echotexture is homogeneous.No evidence of focal lesion is noted.

**PANCREAS** :The pancreas is normal in size, shape, contours and echotexture.No evidence of solid or cystic mass lesion is noted.MPD is not dilated. No evidence of peripancreatic collection.

**KIDNEYS** :RK: 9.4x4.1 cm. LK:9.9x4.2 cm.

**A cortical cyst of size 8x7mm seen at lower pole of right kidney.**

The bilateral kidneys are normal in size and echotexture. Cortico-medullary differentiation is maintained.There is no evidence of obvious calculus or hydronephrosis.

**URINARY BLADDER** :The urinary bladder is well distended.Wall thickness within normal limits.No evidence of calculus is seen.No evidence of mass or diverticulum is noted.

**PROSTATE**: Prostate appears normal in size, shape and echotexture.

No evidence of ascites or interbowel free fluid is seen.

No evidence of obvious retroperitoneal or mesentric lymphadenopathy is seen.

**Bowel loop distended with gas.**

**IMPRESSION- Right renal cortical cyst**

To be correlated clinically

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NAME	: MR. PUSHPENDER SINGH	DATE	: 8 / 3 / 2024
Age Sex	: 29 Years / Male	Inpatient No	:
PERFORMED BY	: Dr. JOGINDER S. DUHAN	BILL NO.	: 25261328

## TRANS THORACIC ECHO CARDIOGRAPHY REPORT

### MITRAL VALVE

**Morphology** AML: Normal / Thickening / Calcification / Flutter / Vegetation / Non significant Prolapse / SAM  
PML: Normal / Thickening / Calcification / Prolapse / Paradoxical Motion / Fixed.  
Subvalvular deformity: Present / Absent

**Doppler** Normal / Abnormal  
Mitral Stenosis Present / Absent  
Mitral Regurgitation: Absent / Normal / Mild / Trace / Moderate / Severe.

### TRICUSPID VALVE

**Morphology** Normal / Atresia / Thickening / Calcification / Prolapse / Vegetation / Doming.

**Doppler** Normal / Abnormal  
Tricuspid Stenosis: Present / Absent.  
Tricuspid Regurgitation: Absent / Mild / Trace / Moderate

### PULMONARY VALVE

**Morphology** Normal / Atresia / Thickening / Calcified / Doming / Vegetation.

**Doppler** Normal / Abnormal.  
Pulmonary Stenosis: Present / Absent  
Pulmonary regurgitation: Present / Absent

### AORTIC VALVE

**Morphology** Normal / Thickened / Mildly / Calcified / Flutter / Vegetation / Restricted / Opening  
No. of Cusps 1 / 2 / 3 / 4

**Doppler** Normal / Abnormal  
Aortic Stenosis : Present / Absent  
Aortic regurgitation : Present / Absent / Mild / Trace



H-2016-4309

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<u>Measurements</u>	<u>Normal Values</u>	<u>Measurements</u>	<u>Normal Value</u>
IVSD : 1.1cm	(0.6-1.1cm)	LA : 2.4cm	(1.9-4.0cm)
LVIDd : 4.4cm	(3.7-5.6cm)	LVIDs : 2.8m	
LVPW : 1.0cm	(0.6-1.1cm)	AORTA : 2.1cm	(2.0-3.7cm)
EF : 60-65%	(55% - 80%)	IVSmotion :	<b>Normal / Flat / Paradoxical</b>
Any Other			

**CHAMBERS:-**

- LV** Normal / Enlarged / Clear / Thrombus /  
Contraction Normal LV shows concentric LVH, no gradient across LVOT /Inetic / Intra capillary  
Regional wall motion abnormality: Absent/ Present
- LA** Normal /Enlarged / Clear /Thrombus / Myxoma; LAA: Clear / Thrombus
- RA** Normal / Clear / Thrombus, Dilated.
- RV** Normal / Mildly Dilated / Enlarged / Clear / Thrombus / Hypertrophied/

**PERICARDIUM** Normal / Thickening / Calcification / Effusion.

**SUMMARY:-**

- All Cardiac Chamber Dimensions are within normal limits.
- Global LVEF 60-65%
- No RWMA
- NORMAL LV FUNCTION
- NO LVDD
- NO MR / NO AR / NO TR
- GOOD RV FUNCTION
- IAS/IVS. No Flow seen across IAS/IVS.
- No Thrombus/Mass in any chamber.
- No Pericardial Effusion.

**COMMENTS :-** Normal Biventricular Function

Please correlate clinically

**DR. JOGINDER S. DUHAN**  
M.D.(Medicine)  
D.M (Cardiology).



H-2018-0308

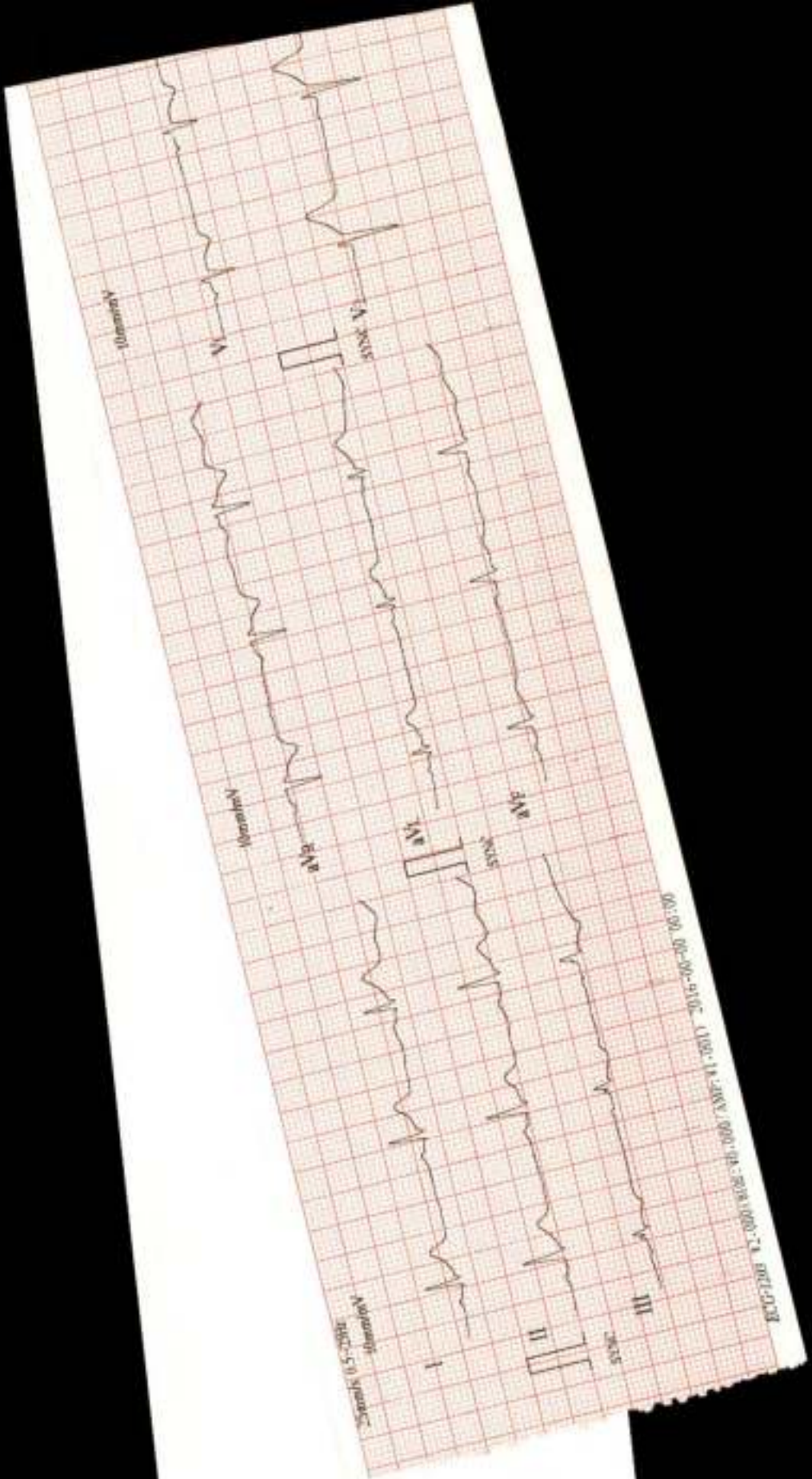
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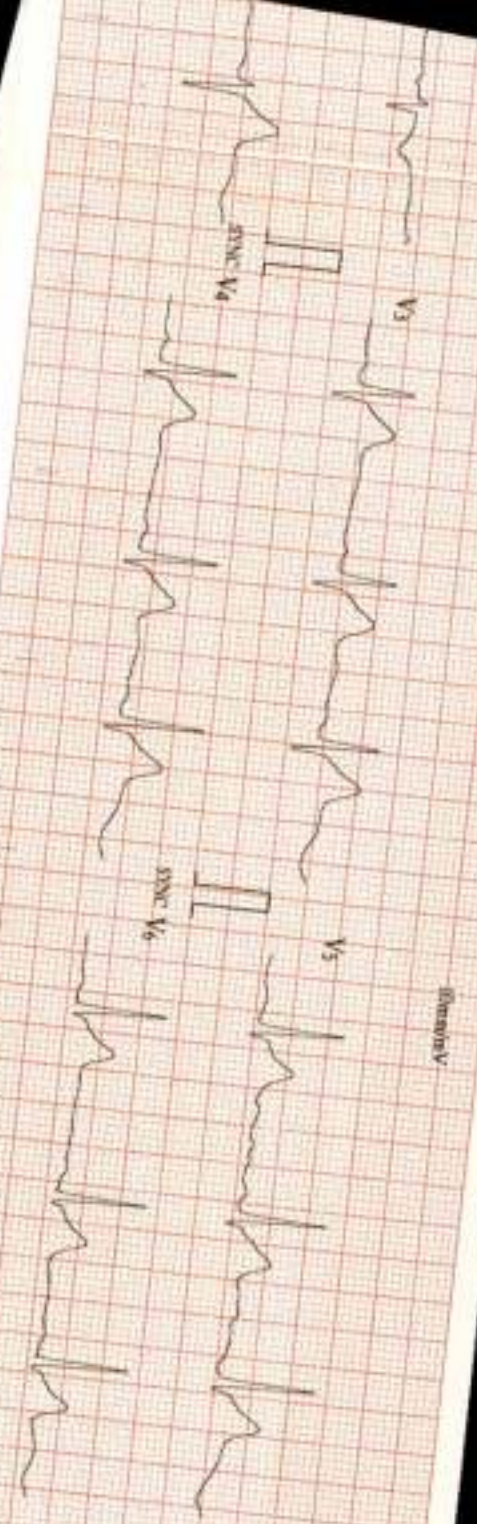
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Standard (0.5-200)  
10mm/mV

ECG-1208 11.0000 1002:40.000 AMF: 41.000 2014-06-06 06:00



ID : 0001

Name: Pushpendra Singh

Sex: Male

Age: 29 Yrs.

08/01/24 01:01:00 AM

HR : 63  
 PR : 144 ms  
 QT : 349 ms  
 QTc : 37.8 ms  
 ST-T : 2.20 (4.70) ms  
 V1-V6 : 1.640

Interpreted Report Verified by:



SRI KANTH HOSPITAL  
 Hospital of SI Advancements