


B.P - 140/90

Wife - 71 Kg

Pelvis - 86

S.Po2 - 99%

 भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India

पता:  
अर्धांगिनी: नरेश चंद, ई-124 ए  
आरएडीएच कुंज, ब्रिज विहार, चंदर  
नगर, गाजियाबाद, चंदर नगर, उत्तर  
प्रदेश, 201011

Address:  
W/O: Naresh Chand, E-124 A  
RADHA kunj, Brij Vihar, Chander  
Nagar, Ghaziabad, Chander  
Nagar, Uttar Pradesh, 201011

2585 6630 4646

1947  
1800 300 1947

help@uidai.gov.in

www.uidai.gov.in

Babita

24/12/23

9873470071

 भारत सरकार  
Government of India

 बबिता  
Babita  
जन्म तिथि / DOB : 25/06/1972  
महिला / Female

2585 6630 4646

आधार - आम आदमी का अधिकार



**SJM SUPER SPECIALITY HOSPITAL**  
Dr. Vinod Kumar Bhat  
M.B.B.S, M.D (Medicine)  
Sr. Consultant Physician  
Reg. No. 30969 (DMC)



# SJM SUPER SPECIALITY HOSPITAL

Sector-63, Noida, NH-9, Near Hindon Bridge  
Tel.: 0120-6530900 / 10 Mob.: +91 9599259072  
E-mail.: email@sjmhospital.com  
Web.: www.sjmhospital.com

## Laboratory Report

Lab Serial no.	: LSHHI237384	Mr. No	: 97762
Patient Name	: Mrs. BABITA	Reg. Date & Time	: 24-Dec-2022 10:13 AM
Age / Sex	: 50 Yrs / F	Sample Receive Date	: 24-Dec-2022 10:25 AM
Referred by	: Dr. SELF	Result Entry Date	: 24-Dec-2022 04:03PM
Doctor Name	: Dr. Vinod Bhat	Reporting Time	: 24-Dec-2022 04:04 PM
OPD	: OPD		

### HAEMATOLOGY

	results	unit	reference
<b>CBC / COMPLETE BLOOD COUNT</b>			
HB (Haemoglobin)	<b>9.9</b>	gm/dl	12.0 - 16.0
TLC	6.5	Thousand/mm	4.0 - 11.0
DLC			
Neutrophil	65	%	40 - 70
Lymphocyte	29	%	20 - 40
Eosinophil	04	%	02 - 06
Monocyte	02	%	02 - 08
Basophil	00	%	00 - 01
R.B.C.	4.91	Thousand / UI	3.8 - 5.10
P.C.V	34.8	million/UI	0 - 40
M.C.V.	<b>70.9</b>	fL	78 - 100
M.C.H.	<b>20.2</b>	pg	27 - 32
M.C.H.C.	<b>28.4</b>	g/dl	32 - 36
Platelet Count	<b>1.03</b>	Lacs/cumm	1.5 - 4.5

#### INTERPRETATION:

To determine your general health status; to screen for, diagnose, or monitor any one of a variety of diseases and conditions that affect blood cells, such as anemia, infection, inflammation, bleeding disorder or cancer

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technician :

Typed By : Mr. BIRJESH

Page 1

  
**Dr. Swati Chandel**  
Consultant Pathologist  
39292 (MCI)

**Dr. Bupinder Zutshi**  
(M.B.B.S., MD)  
Pathologist & Microbiologist

## Laboratory Report

Lab Serial no. : LSHH1237384	Mr. No : 97762
Patient Name : Mrs. BABITA	Reg. Date & Time : 24-Dec-2022 10:13 AM
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### HAEMATOLOGY

	results	unit	reference
--	---------	------	-----------

#### ESR / ERYTHROCYTE SEDIMENTATION RATE

ESR (Erythrocyte Sedimentation Rate)	<b>38</b>	mm/1hr	00 - 20
--------------------------------------	-----------	--------	---------

**Comments**

The ESR is a simple non-specific screening test that indirectly measures the presence of inflammation in the body. It reflects the tendency of red blood cells to settle more rapidly in the face of some disease states, usually because of increases in plasma fibrinogen, immunoglobulins, and other acute-phase reaction proteins. Changes in red cell shape or numbers may also affect the ESR.

### BIOCHEMISTRY

	results	unit	reference
--	---------	------	-----------

#### BLOOD SUGAR F, Sodium Fluoride Pla

Blood Sugar (F)	<b>125.8</b>	mg/dl	70 - 110
-----------------	--------------	-------	----------

**Comments:**

Accurate measurement of glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions.

High levels of serum glucose may be seen in case of Diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents.

Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.

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### BIOCHEMISTRY

	results	unit	reference
<b>LIPID PROFILE, Serum</b>			
S. Cholesterol	168.3	mg/dl	< - 200
HDL Cholesterol	42.3	mg/dl	42.0 - 88.0
LDL Cholesterol	105.5	mg/dl	50 - 150
VLDL Cholesterol	20.5	mg/dl	00 - 40
Triglyceride	102.4	mg/dl	00 - 170
Cholestrol/HDL RATIO	4.0	%	3.30 - 4.40

#### INTERPRETATION:

Lipid profile OR lipid panel IS a panel of blood tests that serves as an initial screening tool for abnormalities in lipids, such as cholesterol and triglycerides. The results of this test can identify certain genetic diseases and can determine approximate risks for cardiovascular disease, certain forms of pancreatitis, and other diseases.

### BLOOD SUGAR (PP), Serum

SUGAR PP	<b>177.2</b>	mg/dl	80 - 140
----------	--------------	-------	----------

#### Comments:

Accurate measurement of glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions. High levels of serum glucose may be seen in case of diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents. Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.

METHOD:- GOD-POD METHOD, END POINT

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### BIOCHEMISTRY

	results	unit	reference
<b>KFT,Serum</b>			
Blood Urea	16.6	mg/dL	13 - 40
Serum Creatinine	<b>0.59</b>	mg/dl	0.6 - 1.1
Uric Acid	6.0	mg/dl	2.6 - 6.0
Calcium	9.8	mg/dL	8.8 - 10.2
Sodium (Na+)	142.2	mEq/L	135 - 150
Potassium (K+)	4.22	mEq/L	3.5 - 5.0
Chloride (Cl)	103.0	mmol/L	94 - 110
BUN/ Blood Urea Nitrogen	7.76	mg/dL	7 - 18
PHOSPHORUS-Serum	3.68	mg/dl	2.5 - 4.5

**Comment:-**

Kidneys play an important role in the removal of waste products and maintenance of water and electrolyte balance in the body. Kidney Function Test (KFT) includes a group of blood tests to determine how well the kidneys are working.

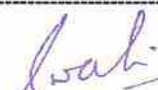
Centre for Excellent Patient Care

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technician :

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Page 1

  
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### BIOCHEMISTRY

	results	unit	reference
<b>LIVER FUNCTION TEST,Serum</b>			
Bilirubin- Total	0.50	mg/dL	0.1 - 2.0
Bilirubin- Direct	<b>0.33</b>	mg/dL	0.00 - 0.20
Bilirubin- Indirect	<b>0.17</b>	mg/dL	0.2 - 1.2
SGOT/AST	25.5	IU/L	00 - 31
SGPT/ALT	<b>34.8</b>	IU/L	00 - 34
Alkaline Phosphate	95.3	U/L	42.0 - 98.0
Total Protein	6.72	g/dL	6.4 - 8.3
Serum Albumin	4.33	gm%	3.50 - 5.20
Globulin	2.39	gm/dl	2.0 - 4.0
Albumin/Globulin Ratio	1.81	%	

#### INTERPRETATION

A Liver Function test or one or more of its component tests may be used to help diagnose liver disease if a person has symptoms that indicate possible liver dysfunction. If a person has a known condition or liver disease, testing may be performed at intervals to monitor liver status and to evaluate the effectiveness of any treatments.

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Doctor Name	: Dr. Vinod Bhat	ReportingTime	: 24-Dec-2022 04:04 PM
OPD/IPD	: OPD		:

### TEST NAME

### VALUE

ABO

"O"

Rh

POSITIVE

#### Comments:

Human red blood cell antigens can be divided into four groups A, B, AB AND O depending on the presence or absence of the corresponding antigens on the red blood cells. There are two glycoprotein A and B on the cell s surface that are responsible for the ABO types. Blood group is further classified as RH positive an RH negative.

### URINE SUGAR (FBS)

#### CHEMICAL EXAMINATION

Glucose : Nil

### URINE SUGAR (PPBS)

#### CHEMICAL EXAMINATION

Glucose : Nil

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Mr. BIRJESH

<http://rgcipac3/SJM/Design/Finanace/LabTextReport.aspx>

*Swati*  
**Dr. Swati Chandel**  
Consultant Pathologist  
39292 (MCI)

24-12-2022  
**Dr. Bupinder Zutshi**  
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### URINE EXAMINATION TEST

#### PHYSICAL EXAMINATION

Quantity: 20 ml  
 Color: Straw  
 Transparency: clear

#### CHEMICAL EXAMINATION

Albumin: nil  
 Glucose: nil  
 PH: Acidic

#### MICROSCOPIC EXAMINATION

Pus cells: 2-3 /HPF  
 RBC's: nil  
 Crystals: nil  
 Epithelial cells: 6-7 /HPF  
 Others: nil

#### Note:-

A urinalysis is a test of your urine. It's used to detect and manage a wide range of disorders, such as urinary tract infections, kidney disease and diabetes. A urinalysis involves checking the appearance, concentration and content of urine.

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<http://rgcipac3/SJM/Design/Finanace/LabTextReport.aspx>

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24-12-2022  
**Dr. Bupinder Zutshi**  
 (M.B.B.S., MD)  
 Pathologist & Microbiologist





<b>Patient Name</b> : Mrs. BABITA	Registration No
Age/Sex : 50 Y/Female	Registered : 24/Dec/2022
Patient ID : 012212240025	Collection : 24/Dec/2022 02:54PM
Barcode : 10129717	Received : 24/Dec/2022 02:59PM
Ref. By : DR VINOD BHATT	Reported : 24/Dec/2022 04:14PM
SRF No. :	Panel : SJM Hospital
Aadhar-Nation :- Indian	Passport No. :

Test Name	Value	Unit	Bio Ref.Interval
<b>THYROID PROFILE.(TFT)SERUM*</b>			
T3 ,Serum	119.00	ng/dl	69-215
T4 ,Serum ECLIA	8.50	ug/dL	5.2-12.7
TSH(ultrasensitive) ECLIA	1.8	uIU/mL	0.3-4.5

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" Interfering antibodies to thyroid hormones (anti-TPO antibodies)
Raised or within range	Raised	Raised / Normal	Intermittent T4 therapy or T4 overdose Drug interference- Amiodarone, Heparin,Beta blockers,steroids, anti-epileptics

*Jhatia*  
**Dr. Jatinder Bhatia**  
MD Pathology  
Director

**SJM SUPER SPECIALITY HOSPITAL**  
Dr. Vinod Kumar Bhat  
MBBS, M.D (Medicine)  
Consultant Physician  
Reg. No. 30663 (DMC)  
**Dr. Madhusmita Das**  
MD MICROBIOLOGY

*Priyanka*  
**Dr. Priyanka Rana**  
MD Pathology



mc - 3486



DIAGNOSTICS

Patient Name : Mrs. BABITA

Age/Sex : 50 Y/Female

Patient ID : 012212240025

Barcode : 10129717

Ref. By : DR VINOD BHATT

SRF No. :

Aadhar-Nation : - Indian

Registration No : 121813

Registered : 24/Dec/2022

Collection : 24/Dec/2022 02:54PM

Received : 24/Dec/2022 02:59PM

Reported : 24/Dec/2022 04:14PM

Panel : SJM Hospital

Passport No. :

Test Name	Value	Unit	Bio Ref.Interval
Decreased	Raised / Normal	Raised / Normal	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	Raised	Within range	T3 toxicosis
Within range			Non-Thyroidal illness

**TSH( $\mu$ IU/ml) for pregnant females (As per American Thyroid Association)**

First Trimester	0.10-2.5
Second Trimester	0.20-3.00
Third Trimester	0.30-3.00

\*\*\* End Of Report \*\*\*

Tests Requested:THYROID PROFILE,(TFT)SERUM,HbA1C(Glycosylated Hemoglobin );EDTA

*Jhatia*

Dr. Jatinder Bhatia  
MD Pathology  
Director

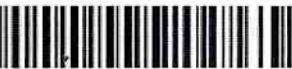
*Madhusmita Das*

Dr. Madhusmita Das  
MD MICROBIOLOGY

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Reg. No. 30060 (DMC)

*Priyanka*

Dr. Priyanka Rana  
MD Pathology



Patient Name : Mrs. BABITA

Age/Sex : 50 Y/Female

Patient ID : 012212240025

Barcode : 10129717

Ref. By : DR VINOD BHATT

SRF No. :

Aadhar-Nation : - Indian

Registration No : 121813

Registered : 24/Dec/2022

Collection : 24/Dec/2022 02:54PM

Received : 24/Dec/2022 02:59PM

Reported : 24/Dec/2022 05:42PM

Panel : SJM Hospital

Passport No. :

Test Name	Value	Unit	Bio Ref.Interval
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**HbA1c(Glycosylated Hemoglobin ):EDTA**

Hb A1c, GLYCOSYLATED Hb ,EDTA HPLC	7.20	%	
Average Glucose Calculated	159.94	mg/dL	<125.0

**Interpretation:**

AS PER AMERICAN DIABETES ASSOCIATION (ADA)

REFERENCE GROUP	HbA1c IN %
NON DIABETIC	< 6.0 %
GOOD CONTROL	6 – 7 %
FAIR CONTROL	7 – 8 %
ACTION SUGGESTED	FOR MORE THAN 8 %

**Result done on : Tosoh Automated Glycohemoglobin Analyzer.****Comment :**

Glycosylated Hb is a normal adult Hb which is covalently bounded to a glucose molecule. Glycosylated Hb concentration is dependent on the average blood glucose concentration and is stable for the life of the RBC (120 days). Glycohaemoglobin serves as suitable marker of metabolic control of diabetics. Its estimation is unaffected by diet, insulin, exercise on day of testing and thus reflects average blood glucose levels over a period of last several weeks /months. There is a 3 - 4 week time before percent Glycohaemoglobin reflects changes in blood glucose levels.

ADA criteria for correlation between HbA1c & Mean plasma glucose levels.

1. Glycosylated hemoglobin (HbA1c) test is three monthly monitoring done to assess compliance with therapeutic regimen in diabetic patients.
2. Since Hb1c reflects long term fluctuations in blood glucose concentration, a diabetic patient who has recently under good control may still have high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled.

**Dr. Jatinder Bhatia**  
MD Pathology  
Director

**Dr. Madhusmita Das**  
MD MICROBIOLOGY

**Dr. Priyanka Rana**  
MD Pathology

360 SPECIALITY HOSPITAL  
Dr. Vinod Kumer Bhat  
M.B.B.S., M.D (Medicine)  
Sr. Consultant, Physician  
Reg. No. 30083 (DMIG)



Patient Name : Mrs. BABITA

Registration No : 121813

Age/Sex : 50 Y/Female

Registered : 24/Dec/2022

Patient ID : 012212240025

Collection : 24/Dec/2022 02:54PM

Barcode : 10129717

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Test Name	Value	Unit	Bio Ref.Interval
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3.Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In

patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targetting a goal of < 7.0% may not be appropriate.

4.High HbA1c (>9.0 -9.5 %) is strongly associated with risk of development and rapid progression of microvascular and nerve complications

5.Any condition that shorten RBC life span like acute blood loss, hemolytic anemia falsely lower HbA1c results.

6.HbA1c results from patients with HbSS,HbSC and HbD must be interpreted with caution , given the pathological processes including anemia,increased

red cell turnover, and transfusion requirement that adversely impact HbA1c as a marker of long-term glycemic control.

7.Specimens from patients with polycythemia or post-splenectomy may exhibit increase in HbA1c values due to a somewhat longer life span of the red cells.

\*\*\* End Of Report \*\*\*

Tests Requested:THYROID PROFILE,(TFT)SERUM,HbA1C(Glycosylated Hemoglobin );EDTA

Dr. Jatinder Bhatia  
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Director

Dr. Madhusmita Das  
MD MICROBIOLOGY

Dr. Priyanka Rana  
MD Pathology

Mrs. babita  
ID: 97762

Visit: cooperate  
25.06.1972 161 cm Female  
50 Years 71.0 kg  
Phone Number: 8874830317

24.12.2022 11:06:45  
SJM Super Speciality Hospital  
Sector-63, Chhijarsi, Noida  
Gautam Budhna Nagar, UP-201307

Location:  
Room:  
Order Number:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

58 bpm  
-- / -- mmHg

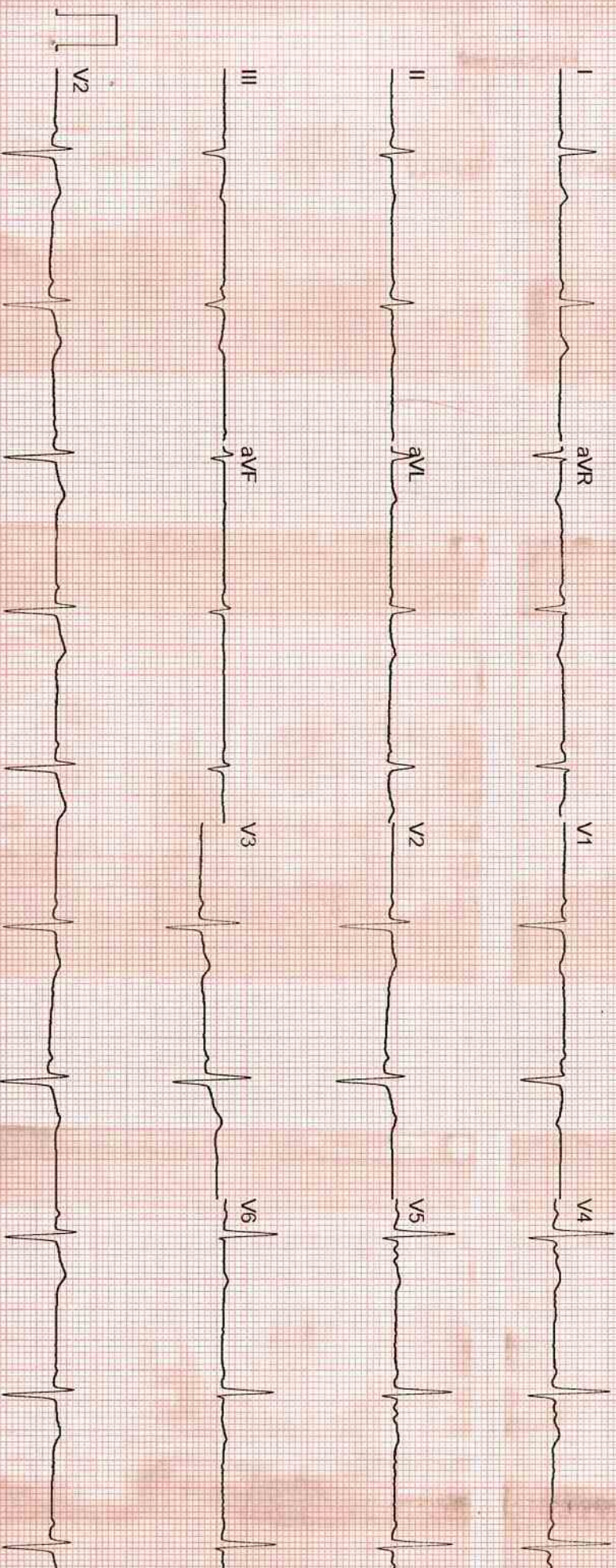
QRS: 76 ms  
QT / QTcBaz: 424 / 416 ms  
PR: 134 ms  
P: 98 ms  
RR / PP: 1030 / 1034 ms  
P / QRS / T: 25 / -14 / 6 degrees

Sinus bradycardia  
Otherwise normal ECG

NML

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Reg. No. 30886 (DMC)

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:



GE MAC2000 1 1 12SL™ V241

25 mm/s 10 mm/mV

0.04 20 Hz 50 Hz

4x2 5x3 25 R1

Unconfirmed

1/1

SJM HOSPITAL AND IVF CENTRE

PATIENT SUMMARY REPORT

ID : 148  
NAME : MRS. BABITA  
AGE / SEX : 50 FEMALE

HEIGHT (cm) : 161  
WEIGHT (kg) : 71  
PROTOCOL : BRUCE

REF. BY : DR. VIOND BHAT  
DONE BY :  
TECHNICIAN :

CASE HISTORY

MEDICATION

OBJECT OF TEST

RISK FACTOR

ACTIVITY

OTHER INVESTIGATION

REASON FOR TERMINATION

EXERCISE TOLERANCE

EXERCISE INDUCED ARRHYTHMIAS

HAEMO RESPONSE

CHRONO RESPONSE

FINAL IMPRESSION

EXTRA COMMENTS

: Routine Check Up.

: Hypertension.

: Moderate Active.

: X - Ray.

: Max HR.

: Good (> 10 METS).

: Normal.

: Negative.

: Stress Test is Negative for Inducible Ischemia.

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Reg. No. 30969 (DMCI)

# 148

Tested On

24-12-2022, 12:02:22

BPL DYNATRAC

Confirmed By :

Signature

Page No.: 1

SJM HOSPITAL AND IVE CENTRE

PATIENT ID : 148  
 PATIENT NAME : MRS. BABITA  
 PROTOCOL : BRUCE

DR. VIIOND BHAT  
 Tested On 24-12-2022, 12:02:22  
 BPL DYNATRAC

Stage Name	Time (min:sec)	Speed (kmph)	Grade (%)	HR (bpm)	BP (mmHg)	R.P.P	METS	STLevel (l)	Stage Comments
Pre-Test	02:42	0.00	0.00	61	130 / 80	7930	0.00	0.15	
Supine	00:13	0.00	0.00	62	120 / 80	7440	0.00	-0.10	
Hyper Ventilation	00:18	0.00	0.00	61	120 / 80	7320	0.00	-0.20	
Wait For Exercise	03:45	0.00	0.00	59	120 / 80	7080	0.00	0.00	
Exercise 1	02:57	2.70	10.00	109	130 / 90	14170	5.10	-0.30	
Exercise 2	02:54	4.00	12.00	134	130 / 100	17420	7.10	-1.36	
Peak Exercise	01:35	5.50	14.00	150	145 / 100	21750	9.10	0.50	
Recovery 1	00:55	0.00	0.00	160	120 / 80	19200	0.00	1.46	
Recovery 2	01:54	0.00	0.00	136	120 / 80	16320	0.00	-0.40	
Recovery 3	02:53	0.00	0.00	105	120 / 80	12600	0.00	0.45	
Recovery 4	03:09	0.00	0.00	104	120 / 80	12480	0.00	0.40	

Total METS achieved : 9.10  
 Maximum HR achieved : 160 bpm, 94 % of 170 bpm  
 Maximum ST depression (l) : -1.36 mm  
 Total Exercise time : 07:39 (min:sec)

**SJM SUPER SPECIALITY HOSPITAL**  
 Dr. Viiond Kumar Bhat  
 M.B.B.S., M.D. (Medicine)  
 Sr. Consultant Physician  
 Reg. No. 30689 (DMC)

NAME : MRS SUNITA  
 AGE : 60  
 BP : 120/80 mmHg

GRADE :  
 RECORDED BY :  
 STAGE DURA :  
 HR : 65 bpm (38%)

SPEED :  
 GRADE :  
 METS : 6.00

DR. WOND BHATI  
 Tested On : 24/12/2022  
 BPL DYNATRAC

ST Levels (mm) / ST Slope (mV/s) measured at 80 mins Post



# 148

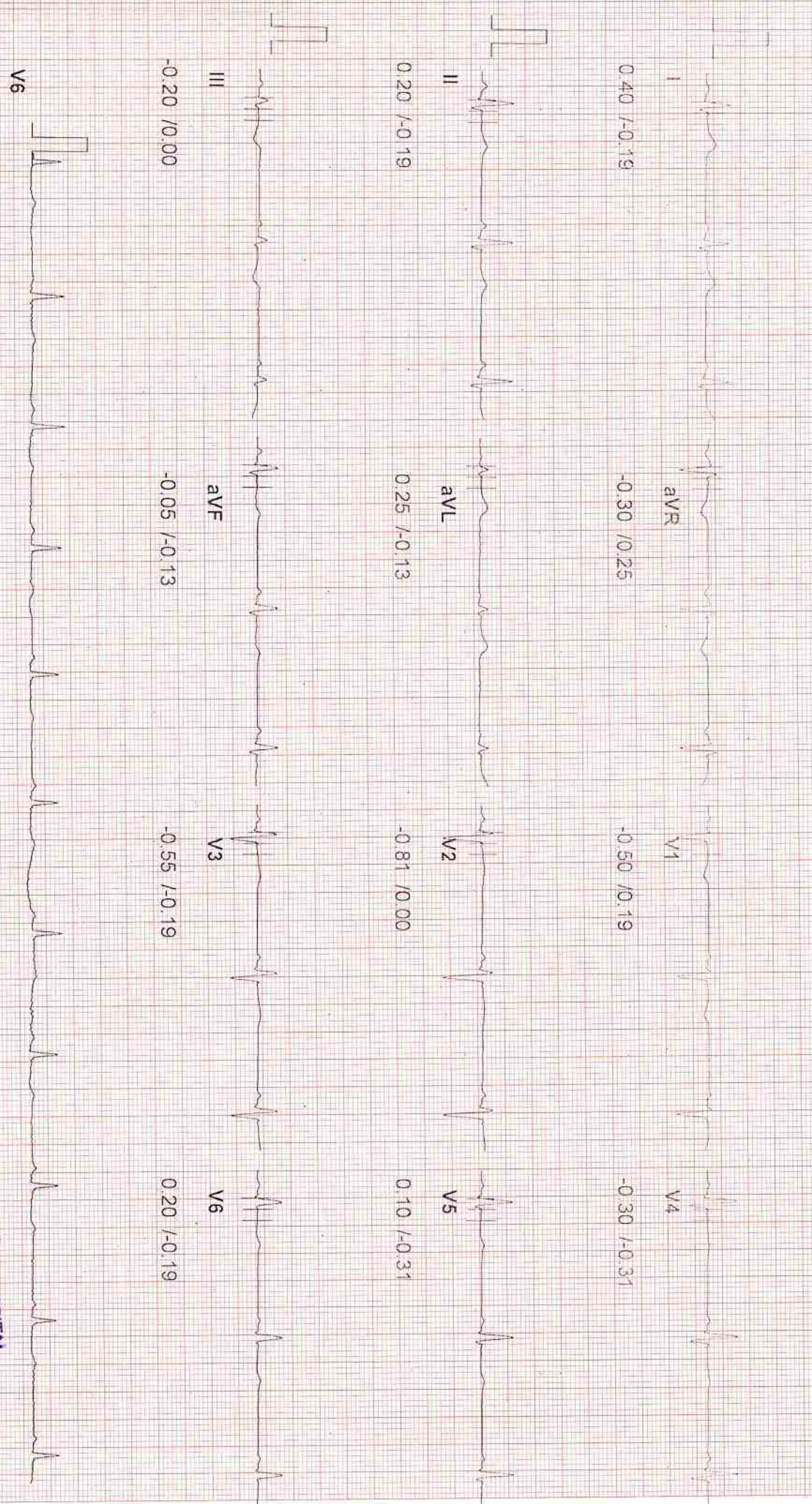
20 Hz Filter

10mm/mV, 25mm/Sec

**SUM SUPER SPECIALITY HOSPITAL**  
 Dr. Vinod Kumar Bhatia  
 M.B. B.S., M.D. (Nephrology)  
 Sr. Consultant Physician  
 Reg. No. 30089 (DMC)



NAME: ...  
 AGE: 50  
 BP: 140/80 mmHg  
 HR: 86 bpm  
 ST Level(s) (mm) / ST Slope (mV/s) measured at 80 ms Post



# 148

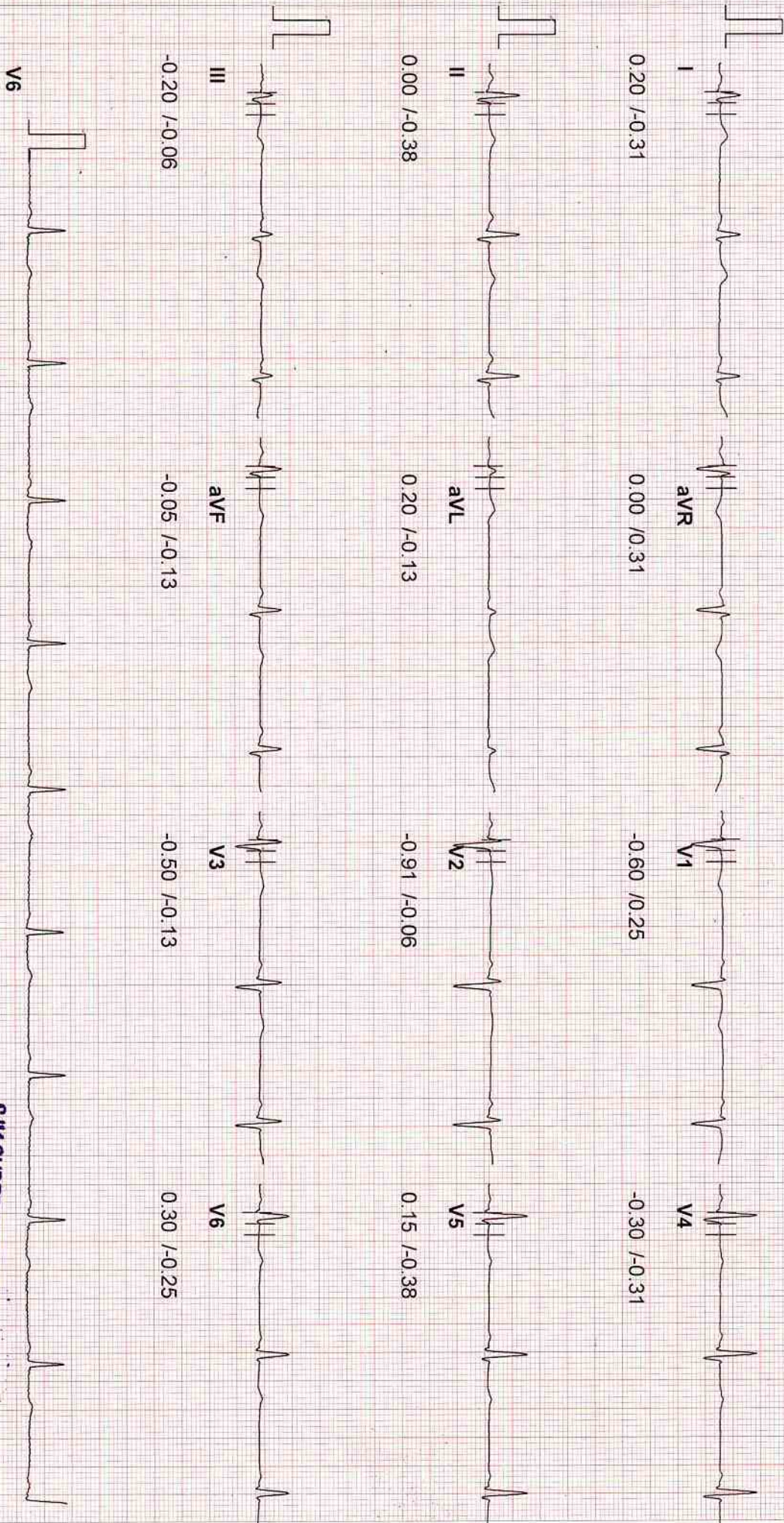
**SJM SUPER SPECIALITY HOSPITAL**  
 Dr. Vikas Kumar Bhat  
 M.B.B.S. M.D. (Medicine)  
 Sr. Consultant Physician  
 Reg. No. 306630MhV; 25mm/Sec  
 20 Hz Filter



ID : 148  
 NAME : MRS. BABITA  
 AGE : 50  
 BP : 120/80 mmHg  
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Wait For Exercise  
 RECORDED TIME : 07:12 (min:sec)  
 STAGE DURATION : 03:46 (min:sec)  
 HR : 59 bpm ( 34 % )  
 PROTOCOL : BRUCE  
 SPEED : 0.0 Km/h  
 GRADE : 0.00 %  
 METS : 0.00

DR. VIOND BHAT  
 Tested On 24-12-2022, 12  
 BPL DYNATRAC



# 148

20 Hz Filter

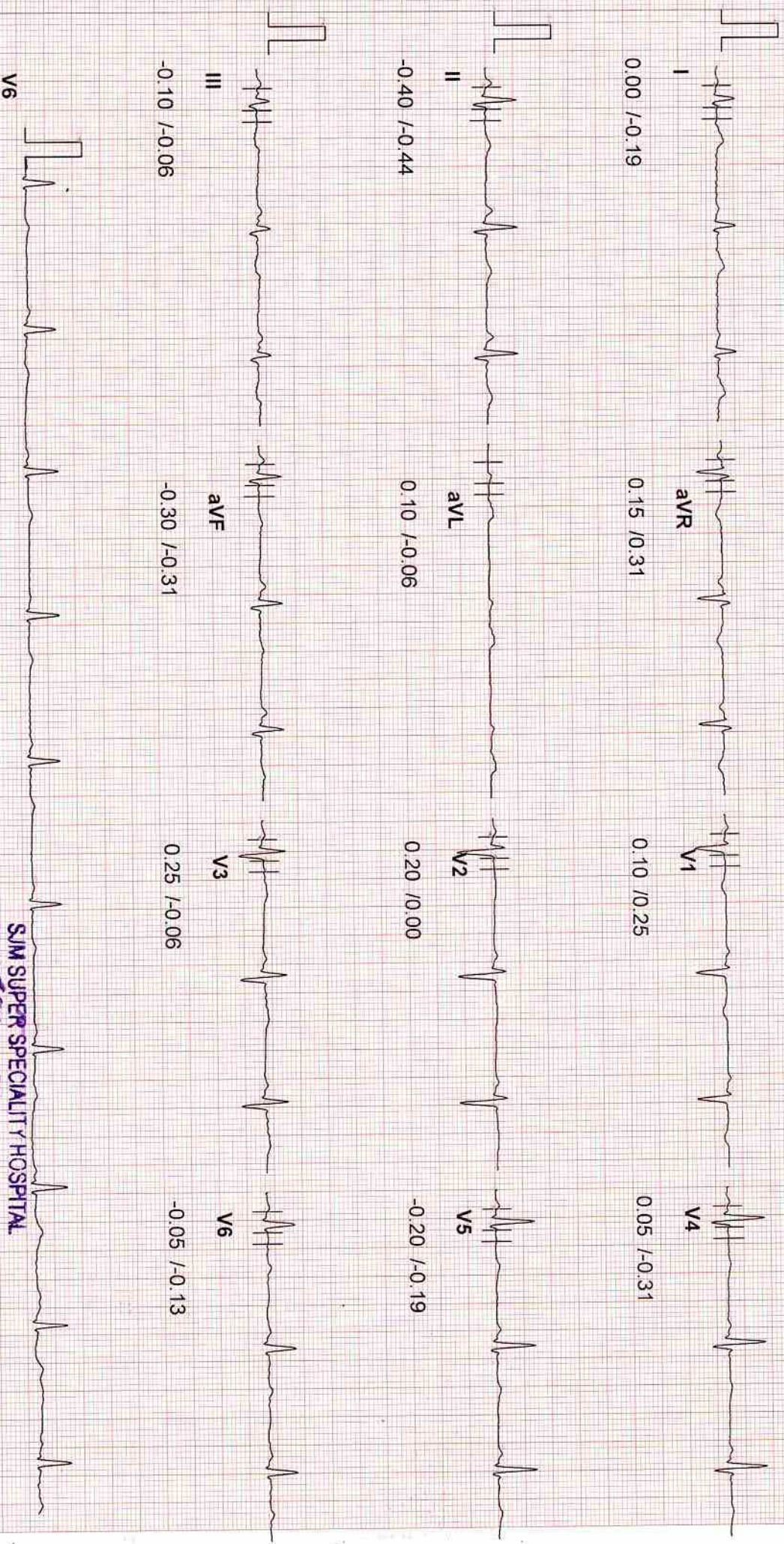
**SJM SUPER SPECIALITY HOSPITAL**

Dr. Viond Kumar Bhat  
 M.B.B.S., M.D. (Medicine)  
 Sr. Consultant Physician  
 Reg. No. 30985 (DMC)  
 10mm/mV, 25mm/Sec

ID : 148  
 NAME : MRS. BABITA  
 Age : 50  
 BP : 120/80 mmHg  
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Exercise1  
 RECORDED TIME : 00:25 (min:sec)  
 STAGE DURATION : 00:25 (min:sec)  
 HR : 68 bpm (40%)  
 PROTOCOL : BRUCE  
 SPEED : 2.7 kmph  
 GRADE : 10.00 %  
 METS : 3.40

DR. VIOND BHAT  
 Tested On 24-12-2022, 12  
 BPL DYNATRAC



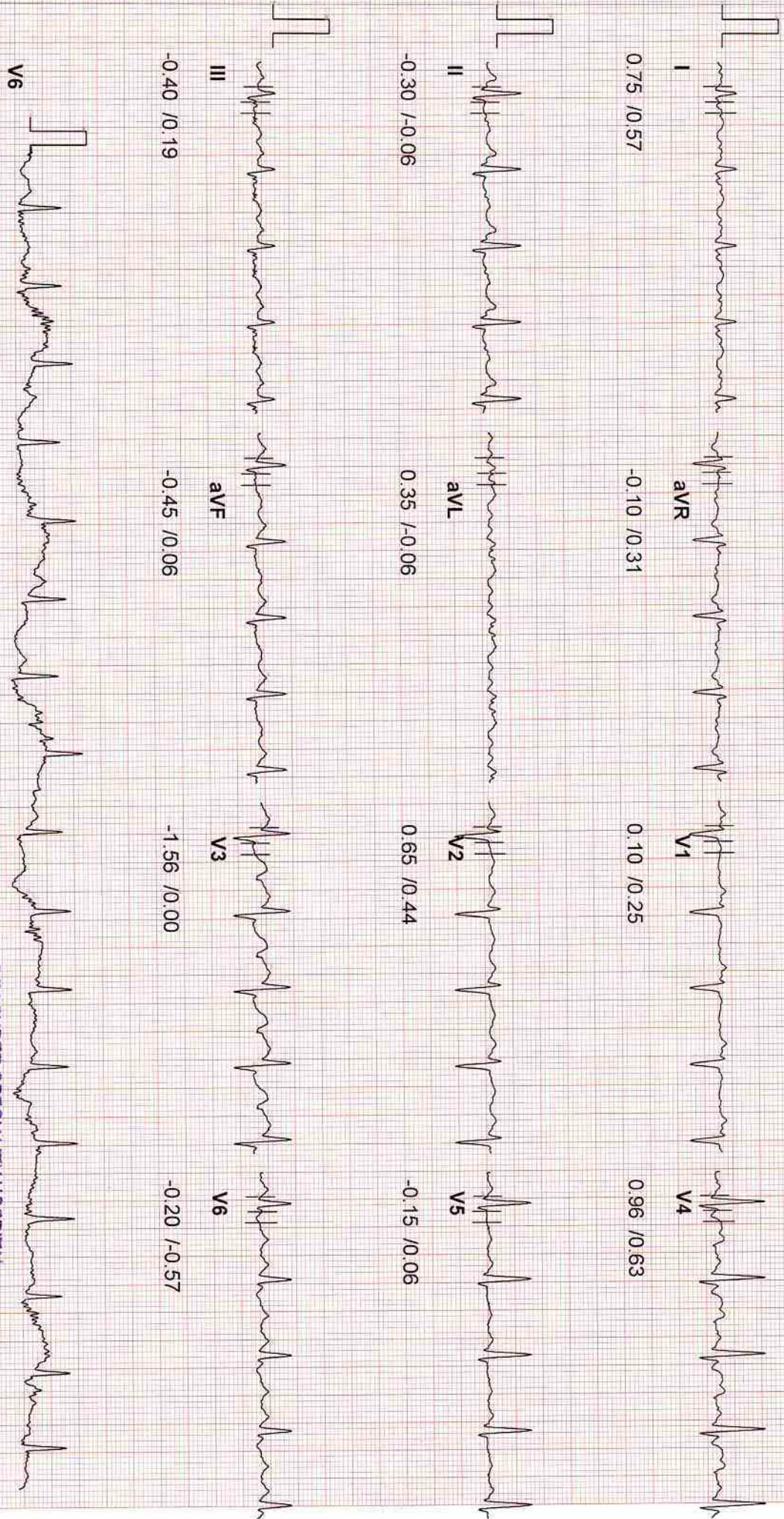
SJM SUPER SPECIALTY HOSPITAL  
 Dr. Viond Kumar Bhat  
 M.B.B.S., M.D (Medicine)  
 Sr. Consultant Physician  
 Reg. No. 30969 (DMC)

ID : 148  
 NAME : MRS. BABITA  
 AGE : 50  
 BP : 130/90 mmHg  
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Exercise1  
 RECORDED TIME : 03:00 (min:sec)  
 STAGE DURATION : 03:00 (min:sec)  
 HR : 109 bpm ( 64 % )

PROTOCOL : BRUCE  
 SPEED : 2.7 kmph  
 GRADE : 10.00 %  
 METS : 5.10

DR. VIOND BHAT  
 Tested On 24-12-2022, 12  
 BPL DYNATRAC



# 148

SHREE SUPPER SPECIALITY HOSPITAL

Dr. KUMAR BHAT

Dr. M.D. (MBA) (M)

Consultant Physician

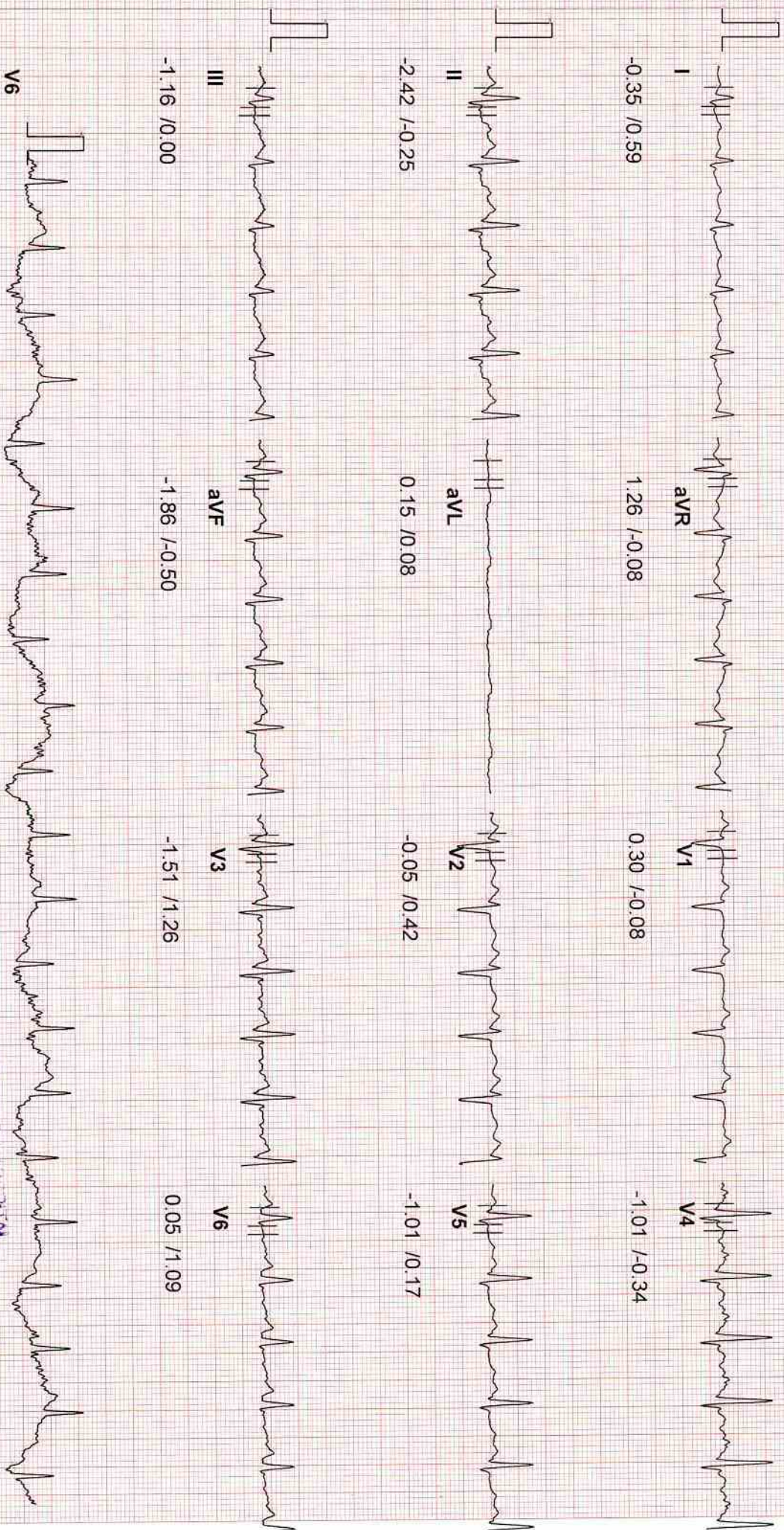
20 Hz Filter

10mm/mV, 25mm/Sec

ID : 148  
 NAME : MRS. BABITA  
 AGE : 50  
 BP : 130/100 mmHg  
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise2  
 RECORDED TIME : 06:00 (min:sec)  
 STAGE DURATION : 03:00 (min:sec)  
 HR : 136 bpm ( 80 % )

PROTOCOL : BRUCE  
 SPEED : 4.0 kmph  
 GRADE : 12.00 %  
 METS : 7.10  
 DR. VIOND BHAT  
 Tested On 24-12-2022, 12  
 BPL DYNATRAC



# 148

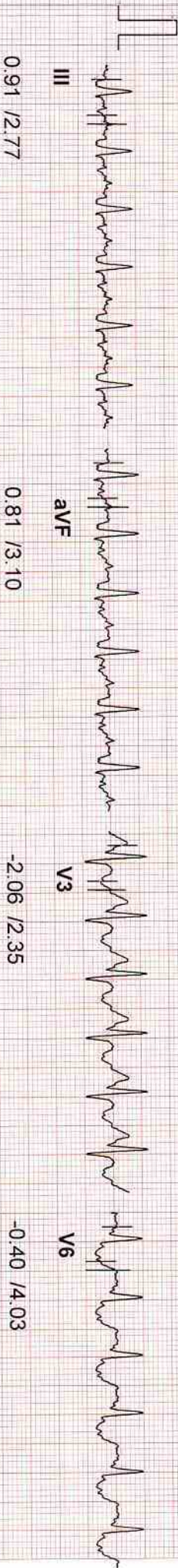
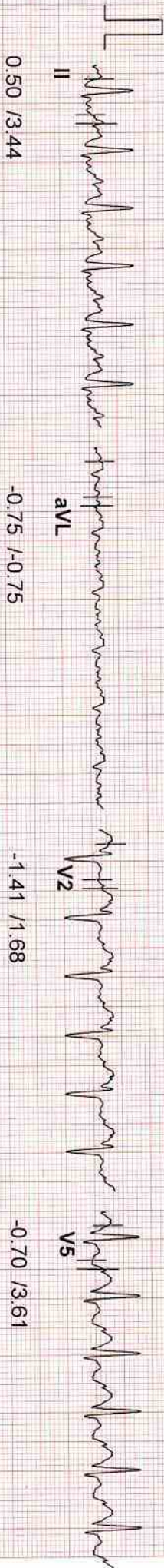
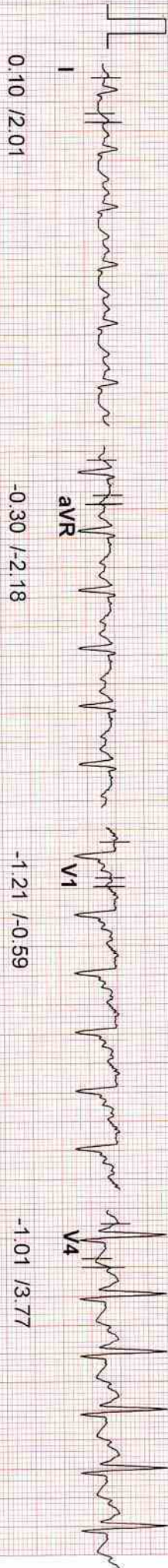
SJM SUPER SPECIALITY HOSPITAL  
 Dr. Viond Kumar Bhat  
 M.B.S.S. M.D. (Medicine)  
 Sr. Consultant Physician  
 PREGNANT CENTER (DMIC)

10mm/mV, 25mm/Sec

ID : 148  
NAME : MRS. BABITA  
AGE : 50  
BP : 145/100 mmHg  
ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercise3(Peak Ex) PROTOCOL : BRUCE  
RECORDED TIME : 07:39 (min:sec) SPEED : 5.5 kmph  
STAGE DURATION : 01:39 (min:sec) GRADE : 14.00 %  
HR : 150 bpm ( 88 % ) METS : 9.10

DR. VIOND BHAT  
Tested On 24-12-2022, 12  
BPL DYNATRAC



# 148

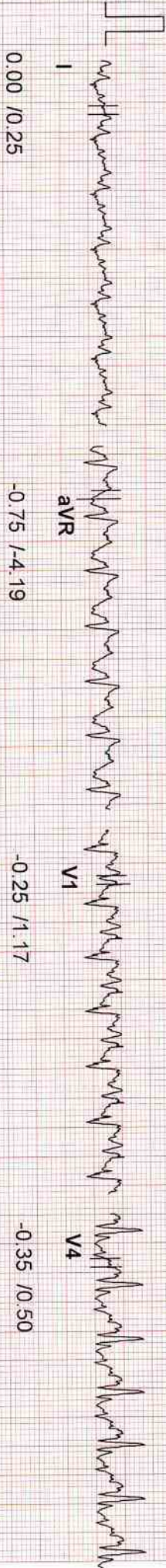
SJM SUPER SPECIALITY HOSPITAL  
Dr. Viond Kumer Bhat  
M.B.B.S., M.D. (Medicine)  
Sr. Consultant Physician  
Reg. No. 30969 (DM/C)  
20 Hz Filter

10mm/mV, 25mm/Sec

ID : 148  
NAME : MRS. BABITA  
AGE : 50  
BP : 120/80 mmHg  
ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Recovery 1  
RECORDED TIME : 00:59 (min:sec)  
STAGE DURATION : 00:59 (min:sec)  
HR : 160 bpm (94%)  
PROTOCOL : BRUCE  
SPEED : 0.0 kmph  
GRADE : 0.00 %  
METS : 0.00

DR. VIOND BHAT  
Tested On 24-12-2022, 12  
BPL DYNATRAC

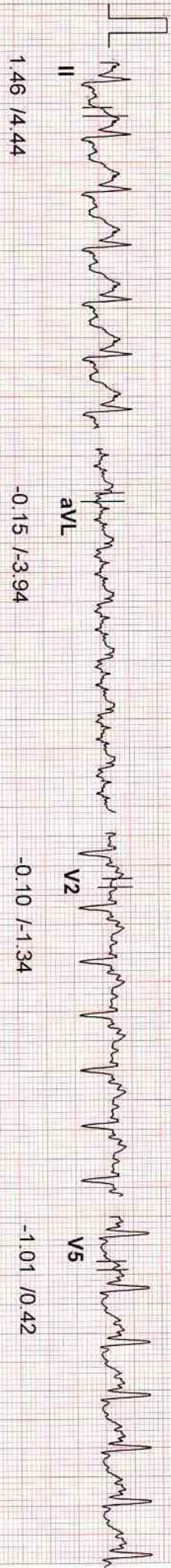


0.00 /0.25

-0.75 /-4.19

-0.25 /1.17

-0.35 /0.50

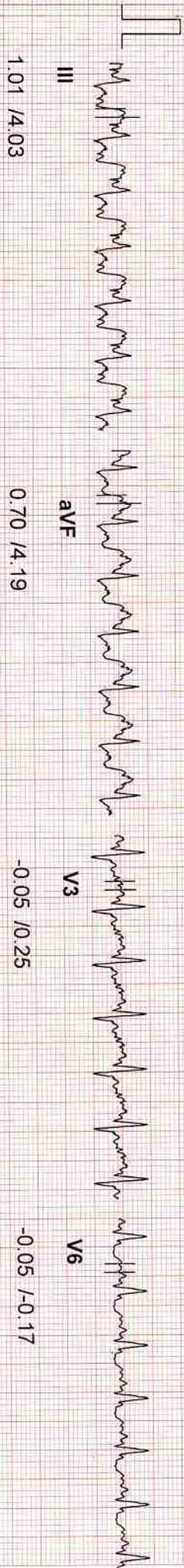


1.46 /4.44

-0.15 /-3.94

-0.10 /-1.34

-1.01 /0.42

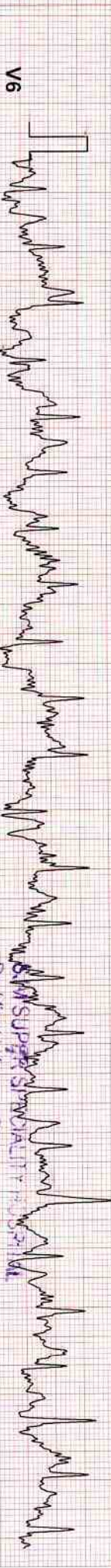


1.01 /4.03

0.70 /4.19

-0.05 /0.25

-0.05 /-0.17



V6

Dr. Vinod Kumar Bhat  
M.B.B.S., M.D. (Medicine)  
Sr. Consultant Physician  
Reg. No. 30963 (D.M.C.)

20 Hz Filter

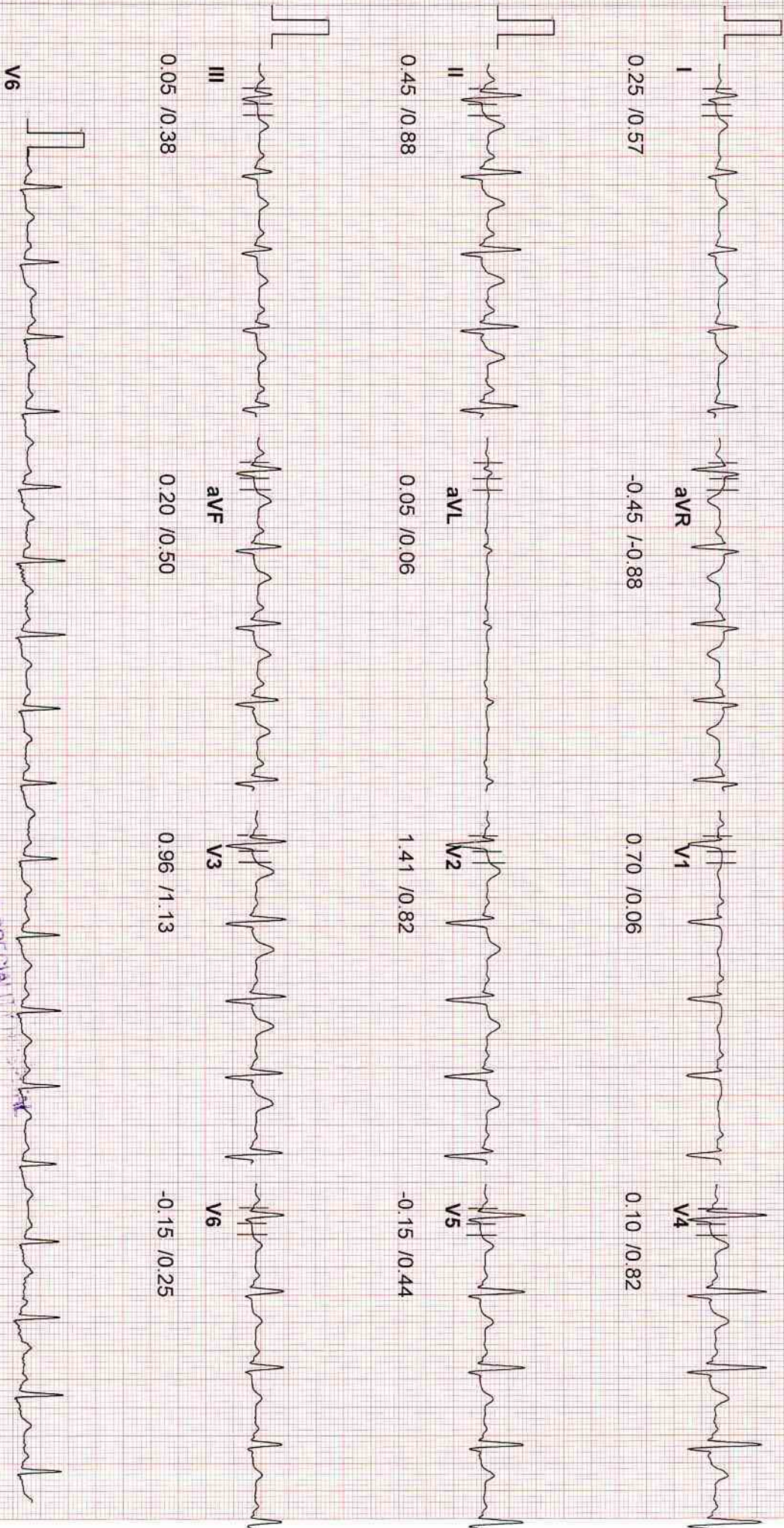
10mm/mV, 25mm/Sec



ID : 148  
 NAME : MRS. BABITA  
 AGE : 50  
 BP : 120/80 mmHg  
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Recovery 3  
 RECORDED TIME : 02:59 (min:sec)  
 STAGE DURATION : 02:59 (min:sec)  
 HR : 109 bpm (64%)  
 METS : 0.00

PROTOCOL : BRUCE  
 SPEED : 0.0 kmph  
 GRADE : 0.00 %  
 DR. VIOND BHAT  
 Tested On : 24-12-2022, 12  
 BPL DYNATRAC



# 148

SJM SUPER SPECIALITY  
 Dr. ViOND KUMAR BHAT  
 M.B.B.S. M.D. (Medicine)  
 Sr. Consultant Physician  
 Ph: No. 30959 (DIN-2)

20 Hz Filter

10mm/mV, 25mm/Sec



Centre for Excellent Patient Care

# SJM SUPER SPECIALITY HOSPITAL

(125 Bedded Fully Equipped With Modern Facilities)

Sector-63, Noida, NH-09, Near Hindon Bridge

Tel.: 0120-6530900 / 10, Mob.:9599259072

## Ultrasound Report

Name	Mrs. Babita	Date	24/12/2022
Age	50/Yrs.	Sex	Female

### ULTRASOUND OF BOTH BREASTS

#### RIGHT BREAST:-

Right breast shows normal parenchymal echotexture on ultrasound.

No abnormal mass noted.

No dilated ducts seen. Ductal caliber measures 2.3mm.

Nipple, areola and retro-areolar structures appear normal.

Skin and subcutaneous tissues appear normal.

#### LEFT BREAST:-

Left breast shows normal parenchymal echotexture on ultrasound.

No abnormal mass noted.

No dilated ducts seen. Ductal caliber measures 1.9mm.

Nipple, areola and retro-areolar structures appear normal.

Skin and subcutaneous tissues appear normal.

**IMPRESSION: NO SIGNIFICANT ABNORMALITY NOTED.**

*Please correlated clinically.*

**DR. PUSHPA KAUL**

**SJM SUPER SPECIALITY HOSPITAL**  
Dr. Vinod Kumar Bhat  
M.B.B.S., M.D (Medicine)  
Sr. Consultant Physician  
Reg. No. 30859 (D.M.C.)

**DR. P.K GUPTA**

## Ultrasound Report

NAME: Mrs. Babita

AGE/SEX:50yrs/F

DATE:24/12/2022

### Real time USG of abdomen and pelvis reveals –

**LIVER-** Liver appears normal in size and shape, contour and echo pattern. There is no evidence of any focal lesion seen in the parenchyma. Intra-hepatic vascular and biliary radicles appear normal. Portal vein and common bile duct are normal.

**GALL BLADDER-** Gall bladder is physiologically distended. The wall thickness is normal. There is no Evidence of any intraluminal mass lesion or calculi seen.

**PANCREAS-** Pancreas is normal in size. No focal mass lesion seen. Pancreatic duct is not dilated.

**SPLEEN-** Spleen is normal in size. No focal mass lesion is seen in parenchyma.

**KIDNEY -** Both the kidneys are normal in size, shape, position and axis. Parenchymal echo pattern is normal bilaterally. No focal solid or cystic lesion is seen. There is no evidence of renal concretions on either side.

**RETROPERITONIUM-** There is non evidence of ascites or Para – aortic adenopathy seen. Retroperitoneal structures appear normal.

**URINARY BLADDER-** Adequately distended. Walls were regular and thin. Contents are Normal. No stone formation seen.

**UTERUS-** Uterus is not seen. ( Surgically Removed)

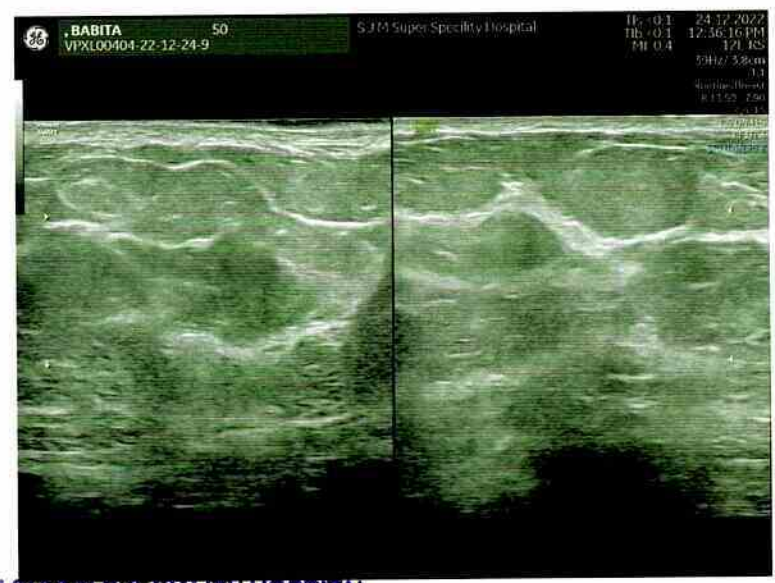
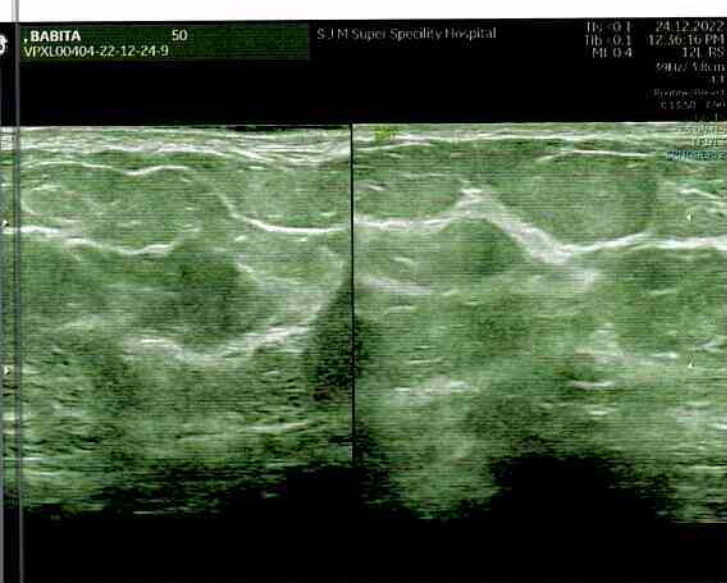
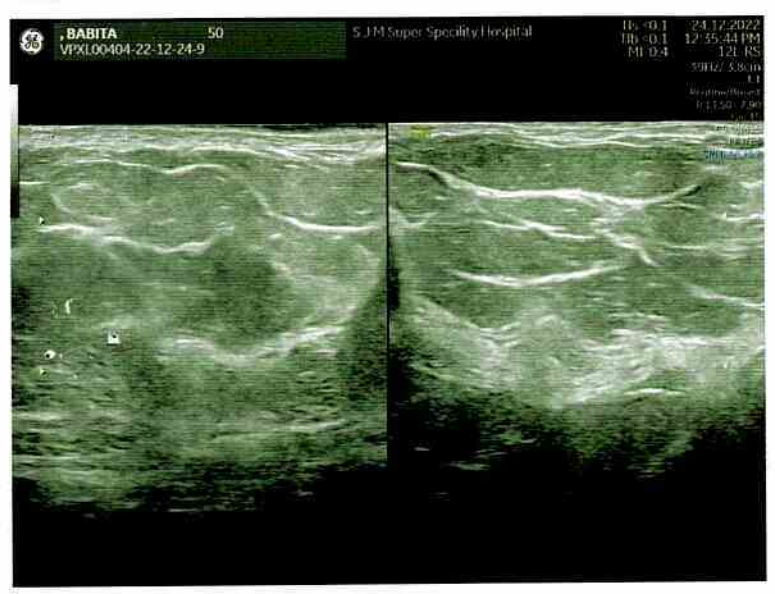
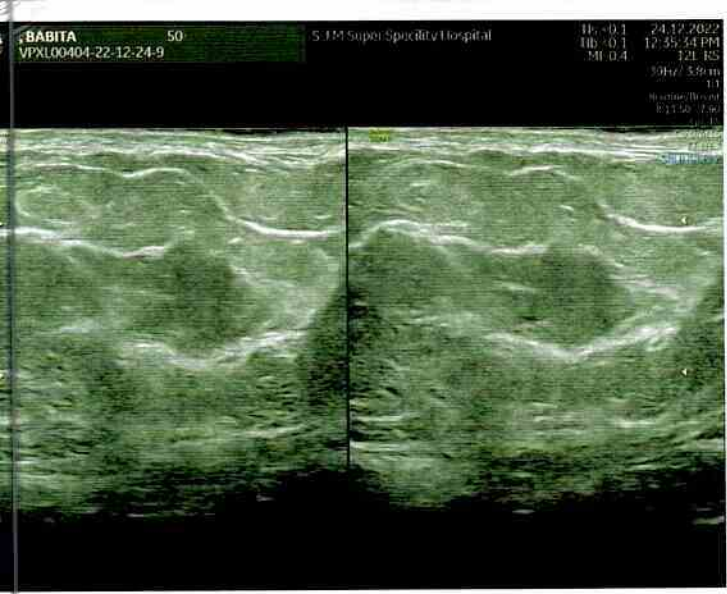
**IMPRESSION :-** Normal Scan.

For SJM Super Speciality Hospital

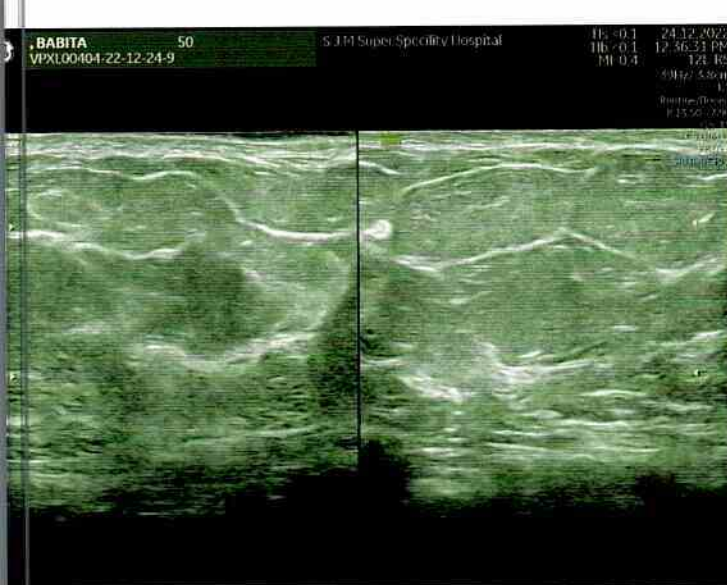
DR.PUSHPA KAUL

DR. P.K GUPTA

SJM SUPER SPECIALITY HOSPITAL  
Dr. Vinod Kumar Bhat  
M.D (Medicine)  
Sr. Consultant Physician  
Reg. No. 30963 (D.M.C)



**SJM SUPER SPECIALITY HOSPITAL**  
**Dr. Vinod Kumar Bhat**  
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**Sr. Consultant Physician**  
**Reg. No. 30669 (DMC)**





**SJM SUPER SPECIALITY HOSPITAL**  
**Dr. Vinod Kumar Bhat**  
**M.B.B.S, M.D (Medicine)**  
**Sr. Consultant Physician**  
**Reg. No. 30669 (DMC)**

## X-Ray Report

<b>Patient ID.</b>	20705 OPD	<b>Name</b>	MRS BABITA	<b>Sex/Age</b>	F/50Y
<b>Date</b>	24-12-2022 11:14 AM	<b>Ref. Physician</b>	SELF	<b>CHEST, CHEST</b>	

### X-RAY CHEST PA VIEW

#### OBSERVATION:

The lung fields are clear.

Both hila are normal.

Cardiophrenic and costophrenic angles are normal.

The trachea is central.

The mediastinal and cardiac silhouette are normal.


Cardiothoracic ratio is normal.

Bones of the thoracic cage are normal.

Soft tissues of the chest wall are normal.

#### IMPRESSION:

- No significant abnormality seen.

  
Dr. DEEPAK K SOLANKI  
MBBS, DNB  
CONSULTANT RADIOLOGIST

**SJM SUPER SPECIALITY HOSPITAL**  
Dr. Vinod Kumar Bhat  
M.B.B.S., M.D (Medicine)  
Sr. Consultant Physician  
Reg. No. 30089 (DMG)

