

Weight - 89 kg

H. - 166 cm

B.P - 120/80

Pulse - 100 %

**Transport Department Government of NCT of Delhi**  
**Licence to Drive Vehicles Throughout India**


Licence No. : DL03 20089222942 (P) R  
Name : MANOJ KUMAR  
S/W/D : SH RAJ KUMAR  
DOB : 26/07/1979 BG : U  
Address :  
FLAT H-5 SECOND FLOOR POCKET-9A  
DDA FLATS JASOLA NEW DELHI  
110025

Auth to Drive : LMV, MCWG  
Date of Issue : 26/04/2008, 08/09/1998

Issue Date : 18/08/2018  
Validity(NT) : 25/07/2029  
Validity(T) : NA  
Inv Carr No : NA

Issuing Authority : SZ. SHEIKH SARAI

*only for*  
*24/08/2022*  
*9911002330*



**SJM SUPER SPECIALITY HOSPITAL**  
Dr. Vinod Kumar Bhat  
M.B.B.S, M.D (Medicine)  
Sr. Consultant Physician  
Reg. No. 30309 (DMC)





# SJM SUPER SPECIALITY HOSPITAL, & IVF CENTRE



100 Bedded Super Speciality Hospital

Sector-63, Noida, NH-9, Near Hindon Bridge

Ph.: 0120-6530900 / 10, Mob.: +91 9599259072

E-mail: sjmhospital@yahoo.com / Website: sjmhospital.com

(24 Hours Emergency, NICU/ICU, Pharmacy & Ambulance Available)

C/O BOTO

24.09.2022

## IVF SPECIALIST

Dr. Pushpa Kaul (IVF)  
M.B.B.S, MD(Obst. & Gynae)  
Dr. Neha Zutshi (Embryologist)

## OTHER SPECIALIST

Dr. Pushpa Kaul (IVF)  
M.B.B.S, MD(Obst. & Gynae)  
Dr. Smritee Virmani (Endoscopy)  
MBBS, DGO, DNB, ICOG (Obst. & Gynae)  
Dr. Vinod Bhat  
M.B.B.S, MD (General Medicine)  
Dr. Vineet Gupta, MS (ENT)  
Dr. Naveen Gupta, MS (EYE)  
Dr. Ashutosh Singh, MS (Urology)  
Dr. Rahul Kaul (Spine Surgeon)  
MBBS, MS, (Orthopaedic)  
Dr Raj Ganjoo MD (Psychiatric)  
Dr. Akash Mishra (Neuro Surgeon)  
Dr. Sanjay Sharma (Cardiologist)  
Dr. S.K. Pandita, MS (Surgeon)  
Dr. B.P. Gupta, MS (Surgeon)  
Dr. Jaisika Rajpal  
MDS), (Periodontist & Implantologist)  
Dr. Akash Arora  
MDS), Maxillofacial Surgeon  
Dr. Deepa Maheshwari  
M.B.B.S., MD, FRM, (IVF Specialist)  
Dr. Vivek Kumar Gupta  
MBBS, MS (General Surgeon)  
M.Ch. (Plastic Surgery)  
Dr. Anand Kumar  
MBBS, MD (Paediatrics)  
Dr. Amit kumar Kothari  
MBBS, MD (Medicine)  
Dr. Amit Aggarwal  
M.B.B.S., M.S. Ortho.

## Facilities:

100 Beds. Private & Public wards  
Inpatient & Outpatient - (OPD)Facilities  
24-Hour ambulance and emergency  
Operation theatres  
Laparoscopic & Conventional Surgery  
In vitro fertilization centre (IVF)  
Intensive Care Unit. (ICU)  
Neonatal ICUs (NICU)  
Dental Clinic  
Computerized pathology lab  
Digital X-ray and ultrasound  
Physiotherapy facilities  
24-Hour Pharmacy  
Cafeteria & Kitchen

Mrs Manoj Kumar s/o Mrs Raj Kumar

Physically and mentally fit

V Bhat  
Vinod Kumar Bhat  
M.B.B.S, M.D. (Medicine)  
Sr. Consultant Physician  
Reg. No. 12345  
DMCI

## CGHS & AYUSHMAN BHARAT

+ Not for medico legal purpose + No substitution of drugs allowed

**Panels:** Raksha TPA Pvt Ltd., Vipul Med Corp TPA Pvt Ltd., E-Meditek (TPA) Services Ltd., Medi-Assit India TPA Pvt Ltd., Park Mediclaim, Genins India TPA Pvt Ltd., Family Healthcare TPA Pvt Ltd., Medsave Healthcare TPA Pvt Ltd., Vidal Health Care TPA Pvt Ltd., MD India Healthcare, DHS TPA (India) Private Ltd., Medicate TPA Service (I) Pvt. Ltd., East West Assist TPA Pvt Ltd., United Healthcare Parekh TPA Pvt Ltd., Good Health TPA Services Ltd., Bajaj Allianz General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., Universal Insurance General Co. Ltd., TATA AIG General Insurance Co. Ltd., Cholamandalam General Insurance Co. Ltd., Liberty Videcon General Insurance Ltd., SBI General Insurance Co. Ltd., Kotak Mahindra General Insurance Co. Ltd., HDFC Standard Life Insurance Co. Ltd., The Oriental Insurance Co. Ltd.(Corporate), National Insurance Co. Ltd.(Corporate), The New India Insurance Co. Ltd. (Corporate), United India Insurance Co Ltd. (Corporate)

## Laboratory Report

Lab Serial no. : LSHHI230346	Mr. No : 95176
Patient Name : Mr. MANOJ KUMAR	Reg. Date & Time : 24-Sep-2022 10:44 AM
Age / Sex : 43 Yrs / M	Sample Receive Date : 24-Sep-2022 10:50 AM
Referred by : Dr. SELF	Result Entry Date : 24-Sep-2022 02:43PM
Doctor Name : Dr. Vinod Bhat	Reporting Time : 24-Sep-2022 02:43 PM
OPD : OPD	

### HAEMATOLOGY

	results	unit	reference
<b>CBC / COMPLETE BLOOD COUNT</b>			
HB (Haemoglobin)	14.2	gm/dl	12.5 - 16.0
TLC	6.4	Thousand/mm	4.0 - 11.0
DLC			
Neutrophil	45	%	40 - 70
Lymphocyte	<b>46</b>	%	20 - 40
Eosinophil	<b>07</b>	%	01 - 06
Monocyte	02	%	02 - 08
Basophil	00	%	00 - 01
R.B.C.	<b>5.30</b>	Thousand / UI	3.8 - 5.10
P.C.V	<b>41.2</b>	million/UI	00 - 40
M.C.V.	<b>77.7</b>	fL	78 - 100
M.C.H.	<b>26.8</b>	pg	27 - 31
M.C.H.C.	34.5	g/dl	32 - 36
Platelet Count	2.56	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

technician :

Typed By : Mr. BIRJESH

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 Sr. Consultant Physician  
 Reg. No. 30989 (DMC)

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

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



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## Laboratory Report

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### HAEMATOLOGY

	results	unit	reference
<b>ESR / ERYTHROCYTE SEDIMENTATION RATE</b>			
ESR (Erythrocyte Sedimentation Rate)	26	mm/1hr	00 - 22

#### 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
<b>BLOOD SUGAR F, Sodium Fluoride Pla</b>			
Blood Sugar (F)	94.8	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.

technician :

Typed By : Mr. BIRJESH

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### BIOCHEMISTRY

	results	unit	reference
<b>LIPID PROFILE, Serum</b>			
S. Cholesterol	<b>236.0</b>	mg/dl	< - 200
HDL Cholesterol	45.8	mg/dl	35.3 - 79.5
LDL Cholesterol	137.0	mg/dl	50 - 150
VLDL Cholesterol	<b>53.2</b>	mg/dl	00 - 40
Triglyceride	<b>265.9</b>	mg/dl	00 - 170
Chloestrol/HDL RATIO	5.2	%	

#### INTERPRETATION:

Lipid profile Of 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	102.1	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

technician :

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## Laboratory Report

Lab Serial no. : LSHHI230346  
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Referred by : Dr. SELF  
Doctor Name : Dr. Vinod Bhat  
OPD : OPD

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### BIOCHEMISTRY

	results	unit	reference
<b>KFT,Serum</b>			
Blood Urea	24.0	mg/dL	18 - 55
Serum Creatinine	0.72	mg/dl	0.7 - 1.3
Uric Acid	<b>7.4</b>	mg/dl	3.5 - 7.2
Calcium	9.5	mg/dL	8.8 - 10.2
Sodium (Na+)	140.5	mEq/L	135 - 150
Potassium (K+)	4.13	mEq/L	3.5 - 5.0
Chloride (Cl)	106.7	mmol/L	94 - 110
BUN/ Blood Urea Nitrogen	11.21	mg/dL	7 - 18
PHOSPHORUS-Serum	2.59	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.

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Page 1

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**Dr. Bupinder Zutshi**  
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Pathologist & Microbiologist

## Laboratory Report

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### BIOCHEMISTRY

	results	unit	reference
<b>LIVER FUNCTION TEST, Serum</b>			
Bilirubin- Total	1.02	mg/dL	0.1 - 2.0
Bilirubin- Direct	<b>0.34</b>	mg/dL	0.0 - 0.20
Bilirubin- Indirect	0.68	mg/dL	0.2 - 1.2
SGOT/AST	<b>52.5</b>	IU/L	00 - 35
SGPT/ALT	45.0	IU/L	00 - 45
Alkaline Phosphate	94.0	U/L	53 - 128
Total Protein	7.04	g/dL	6.4 - 8.3
Serum Albumin	4.35	gm%	3.50 - 5.20
Globulin	2.69	gm/dl	1.8 - 3.6
Albumin/Globulin Ratio	1.62	%	

#### 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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Page 1

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MR. MANOJ KUMAR

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**TEST NAME****VALUE**

ABO

"B"

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 and RH negative.

**URINE SUGAR (Fasting)****CHEMICAL EXAMINATION**

Glucose : Nil

**URINE SUGAR (PP)****CHEMICAL EXAMINATION**

Glucose : Nil

Mr. BIRJESH

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

**Dr. Swati Chandel**  
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24-09-2022

**Dr. Bupinder Zutshi**  
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MR. MANOJ KUMAR

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**STOOL EXAMINATION TEST****PHYSICAL EXAMINATION**

Color	Brownish
Consistency	Semi-Tight
Blood	Nil
Mucus	Absent
Reaction	Acidic

**MICROSCOPIC EXAMINATION**

Pus Cells	2-3	0-4/HPF
RBC's	Nil	Nil
Epithelial cells	1-2	0-2/HPF
Ova	Nil	Nil
Cyst	Nil	Nil

Note:-

A stool analysis is a series of tests done on a stool (feces) sample to help diagnose certain conditions

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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: 1-2 /HPF  
 RBC's: nil  
 Crystals: nil  
 Epithelial cells: 0-1 /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.

Mr. BIRJESH

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24-09-2022

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<b>Patient Name</b> : Mr. MANOJ KUMAR	Registration No
Age/Sex	Registered
Patient ID	Collection
Barcode	Received
Ref. By	Reported
SRF No.	Panel
Aadhar-Nation	Passport No.

Test Name	Value	Unit	Bio Ref.Interval
<b>HbA1C(Glycosylated Hemoglobin ):EDTA</b>			
Hb A1C, GLYCOSYLATED Hb ,EDTA HPLC	6.30	%	
Average Glucose Calculated	134.11	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.

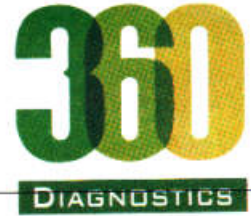
*J. Bhatia*  
**Dr. Jatinder Bhatia**  
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Director

*Madhusmita Das*  
**Dr. Madhusmita Das**  
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*Priyanka*  
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Reg. No. 30989 (DMC)





**Patient Name** : Mr. MANOJ KUMAR  
**Age/Sex** : 43 Y/Male  
**Patient ID** : 012209240021  
**Barcode** : 10116523  
**Ref. By** : DR VINOD BHATT  
**SRF No.** :  
**Aadhar-Nation** : - Indian

**Registration No** : 110197  
**Registered** : 24/Sep/2022  
**Collection** : 24/Sep/2022 02:54PM  
**Received** : 24/Sep/2022 03:24PM  
**Reported** : 24/Sep/2022 05:24PM  
**Panel** : SJM Hospital  
**Passport No.** :

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, targeting 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 \*\*\*

*Jhatia*  
**Dr. Jatinder Bhatia**  
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Director

*Madhusmita Das*  
**Dr. Madhusmita Das**  
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NABL ACCREDITED & ICMR APPROVED FOR COVID-19

**360 Diagnostics & Health Services Pvt. Ltd.**

C-1/2 Sector-31, Noida - 201 301 (U.P.) Tel.: 0120-4224797, 7042922881

E-mail: admin@360healthservices.com | Website : www.360healthservice.com



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Test Name	Value	Unit	Bio Ref.Interval
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**THYROID PROFILE,(TFT)SERUM\***

T3 ,Serum	118.00	ng/dl	69-215
T4 ,Serum ECLIA	8.60	ug/dL	5.2-12.7
TSH(ultrasensitive) ECLIA	2.9	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

*Madhusmita Das*  
**Dr. Madhusmita Das**  
 MD MICROBIOLOGY

**SJM SUPER SPECIALITY HOSPITAL**  
**Dr. Vinod Kumar Ehat**  
 M.B.B.S. M.D. (Medicine)  
 Sr. Consultant Physician  
 Reg. No. 30989 (DMO)

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



**Patient Name** : Mr. MANOJ KUMAR  
**Age/Sex** : 43 Y/Male  
**Patient ID** : 012209240021  
**Barcode** : 10116523  
**Ref. By** : DR VINOD BHATT  
**SRF No.** :  
**Aadhar-Nation** : - Indian

**Registration No** : 110197  
**Registered** : 24/Sep/2022  
**Collection** : 24/Sep/2022 02:54PM  
**Received** : 24/Sep/2022 03:24PM  
**Reported** : 24/Sep/2022 05:20PM  
**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 \*\*\*

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

*Madhusmita Das*  
**Dr. Madhusmita Das**  
 MD MICROBIOLOGY

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

**SJM SUPER SPECIALITY HOSPITAL**  
 Dr. Vinod Kumar  
 M.D. B.S. M.D. Pathology  
 St. Convent Road, Noida  
 Reg. No. 20125/2012



**Patient Name** : Mr. MANOJ KUMAR  
**Age/Sex** : 43 Y/Male  
**Patient ID** : 012209240021  
**Barcode** : 10116523  
**Ref. By** : DR VINOD BHATT  
**SRF No.** :  
**Aadhar-Nation** : - Indian

**Registration No** : 110197  
**Registered** : 24/Sep/2022  
**Collection** : 24/Sep/2022 02:54PM  
**Received** : 24/Sep/2022 03:24PM  
**Reported** : 24/Sep/2022 05:20PM  
**Panel** : SJM Hospital  
**Passport No.** :

Test Name	Value	Unit	Bio Ref.Interval
PSA TOTAL ,Serum ECLIA	0.30	ng/mL	0.0 - 5.5

**Interpretation:**

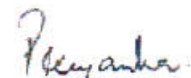
The major site of PSA production is the glandular epithelium of the prostate. Low levels of PSA are found in the blood as a result of leakage of PSA from the prostate gland. Increasing levels of serum PSA are associated with prostatic pathology, including prostatitis, benign prostatic hyperplasia (BPH), and cancer of the prostate. Early diagnosis of carcinoma of the prostate is hindered by the lack of symptoms in man with localized tumors therefore, early detection requires a simple, safe and inexpensive test for the disease in asymptomatic men. Several studies have shown that the measurement of serum PSA concentration offers several advantages in the early detection of prostate cancer.

Serum PSA concentrations should not be interpreted as absolute evidence for the presence or absence of prostate cancer. Elevated concentration of PSA may be observed in the serum of patients with benign prostatic hyperplasia or other nonmalignant disorders as well as in prostate cancer. The PSA value should be used in conjunction with information available from clinical evaluation and other diagnostic procedures such as DRE. Some early cases of prostate cancer will not be detected by PSA testing ;the same is true for DRE. Prostatic biopsy is required for the diagnosis of cancer

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

  
**Dr. Jatinder Bhatia**  
MD Pathology  
Director

  
**Dr. Madhusmita Das**  
MD MICROBIOLOGY

  
**Dr. Priyanka Rana**  
MD Pathology





# SJM SUPER SPECIALITY HOSPITAL

(100 Bedded Fully Equipped with Modern Facilities)

Sector-63, Noida, NH-9, Near Hindon Bridge  
Tel.: 0120-6530900 / 10 Mob.: +91 9599259072

## X-Ray Report

Patient ID.	19823 OPD	Name	MR MANOJ KUMAR	Sex/Age	M/43YY
Date	24-09-2022 10:29 AM	Ref. Physician	SELF	CHEST, CHEST	

### X- RAY CHEST PA VIEW

Both lung fields are clear. No obvious lung parenchymal lesion or infiltration is seen.

Bilateral cp angles are clear and show acute angle

Both hilar shadow appears normal

Bony thoracic cage and soft tissues appears normal

Cardiac silhouette appears normal.

**Impression ~ No obvious significant abnormality is seen**

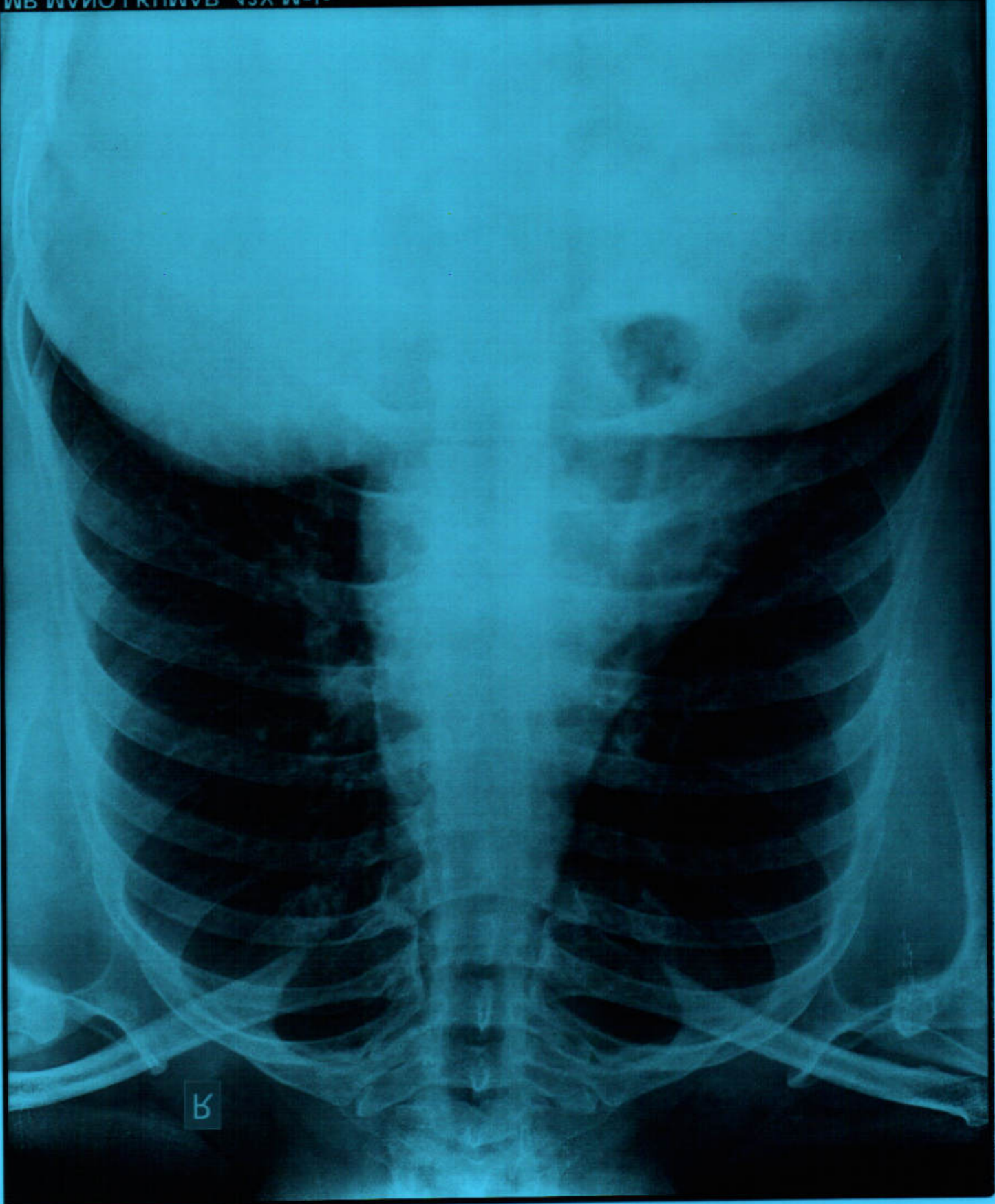
**Please correlate clinically**

DR DEEPAK K SOLANKI  
MBBS, DNB  
CONSULTANT RADIOLOGIST

SJM SUPER SPECIALITY HOSPITAL  
Dr. Manoj Kumar  
MBBS, DNB (Radiology)  
Sector-63, Noida, NH-9, Near Hindon Bridge  
Tel.: 0120-6530900 / 10 Mob.: +91 9599259072



S. J. MEMORIAL SUPER SPECIALITY HOSPITAL SEC 83 CHHILABSI NOIDA  
CHEST PA 18823 060 240912022 10 10 22 AM  
MR MANOJ KUMAR 43Y Male SETE



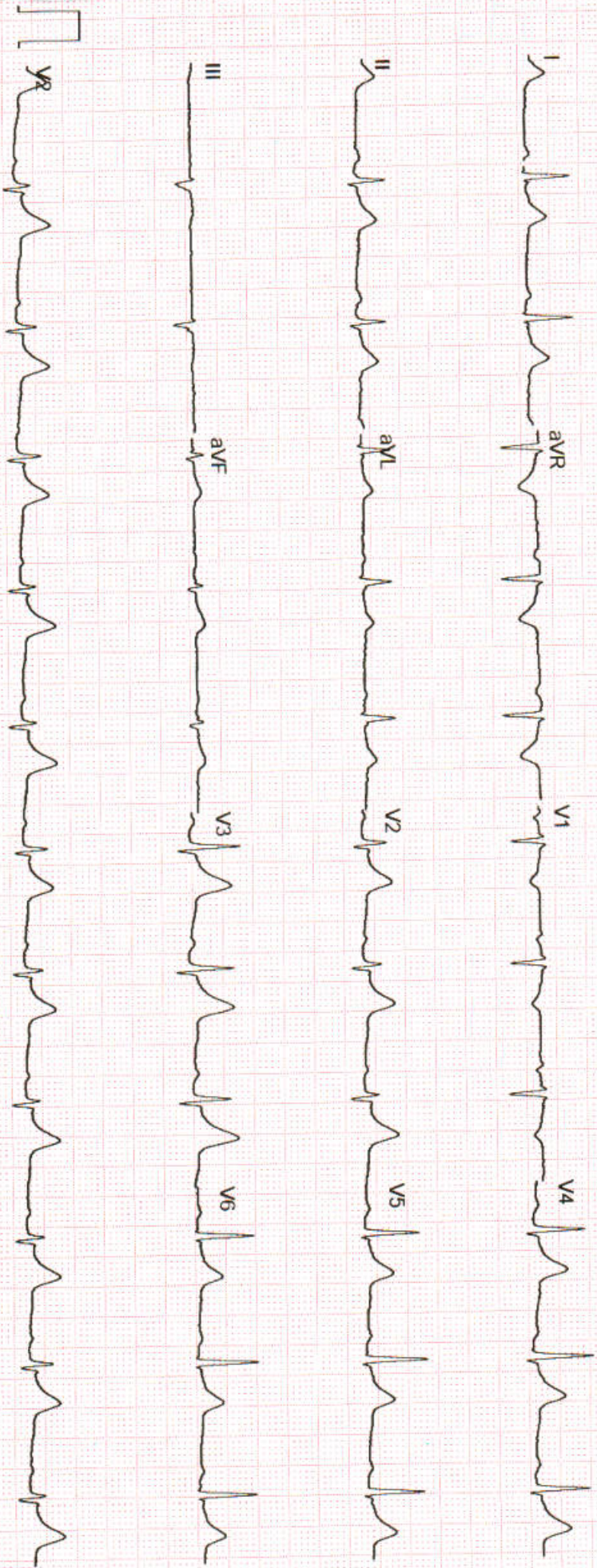
B

QRS : 78 ms  
QT / QTcBaz : 400 / 428 ms  
PR : 176 ms  
P : 104 ms  
RR / PP : 874 / 869 ms  
P / QRS / T : 45 / 12 / 29 degrees

\*\*\* Poor data quality, interpretation may be adversely affected  
Normal sinus rhythm  
Normal ECG

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

*kmw*  
**SJM SUPER SPECIALITY HOSPITAL**  
Dr. Vinod Kumar Bhat  
M.B.B.S, M.D. (Medicine)  
Sr. Consultant Physician  
Reg. No. 5 **NMCV**



ID : 135  
NAME : MANOJ  
AGE / SEX : 43 / MALE

HEIGHT (cm) : 166  
WEIGHT (kg) : 89  
PROTOCOL : BRUCE

REF BY : DR VIJOND BHAT  
DONE BY :  
TECHNICIAN : HARI

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)

Hypertensive

Negative

Stress Test is Negative for Inducible Ischemia

NAL  
pen

SJM SUPER SPECIALITY HOSPITAL  
Dr. Vinod Kumar Bhat  
M.B.B.S., M.D. (Medicine)  
Sr. Consultant Physician  
Reg. No. 30989 (DMC)

Confirmed By: \_\_\_\_\_

Signature

PATIENT ID 135  
 PATIENT NAME MANOJ  
 PROTOCOL BRUCE

DR VIJOND BHAT  
 Tested On 24-09-2022 11:06:56  
 BP, DYNATRAC

Stage Name	Time (min:sec)	Speed (kmph)	Grade (%)	HR (bpm)	BP (mmHg)	R P P	MEIS	STLevel (l)	Stage Comments
Pre-Test	05:27	0.00	0.00	74	120 / 80	8880	0.00	1.71	
Supine	00:03	0.00	0.00	77	120 / 80	9240	0.00	1.66	
Hyper Ventilation	00:34	0.00	0.00	83	120 / 80	9960	0.00	1.41	
Wait For Exercise	00:50	0.00	0.00	76	120 / 80	9120	0.00	1.61	
Exercise 1	02:54	2.70	10.00	107	130 / 90	13910	5.10	1.11	
Exercise 2	02:57	4.00	12.00	129	140 / 100	18060	7.10	0.55	
Exercise 3	02:52	5.50	14.00	144	150 / 100	21600	10.00	1.96	
Peak Exercise	01:07	6.80	16.00	151	150 / 100	22650	13.00	1.81	
Recovery 1	00:51	0.00	0.00	150	120 / 80	19200	0.00	-2.97	
Recovery 2	01:58	0.00	0.00	111	120 / 80	13320	0.00	2.82	
Recovery 3	02:56	0.00	0.00	89	120 / 80	10680	0.00	1.66	
Recovery 4	03:05	0.00	0.00	101	120 / 80	12120	0.00	1.51	

Total MEIS achieved 13.00  
 Maximum HR achieved 150 bpm, 90 % of 177 bpm

Maximum ST depression (l) 2.97 mm  
 Total Exercise time 10:15 (min:sec)

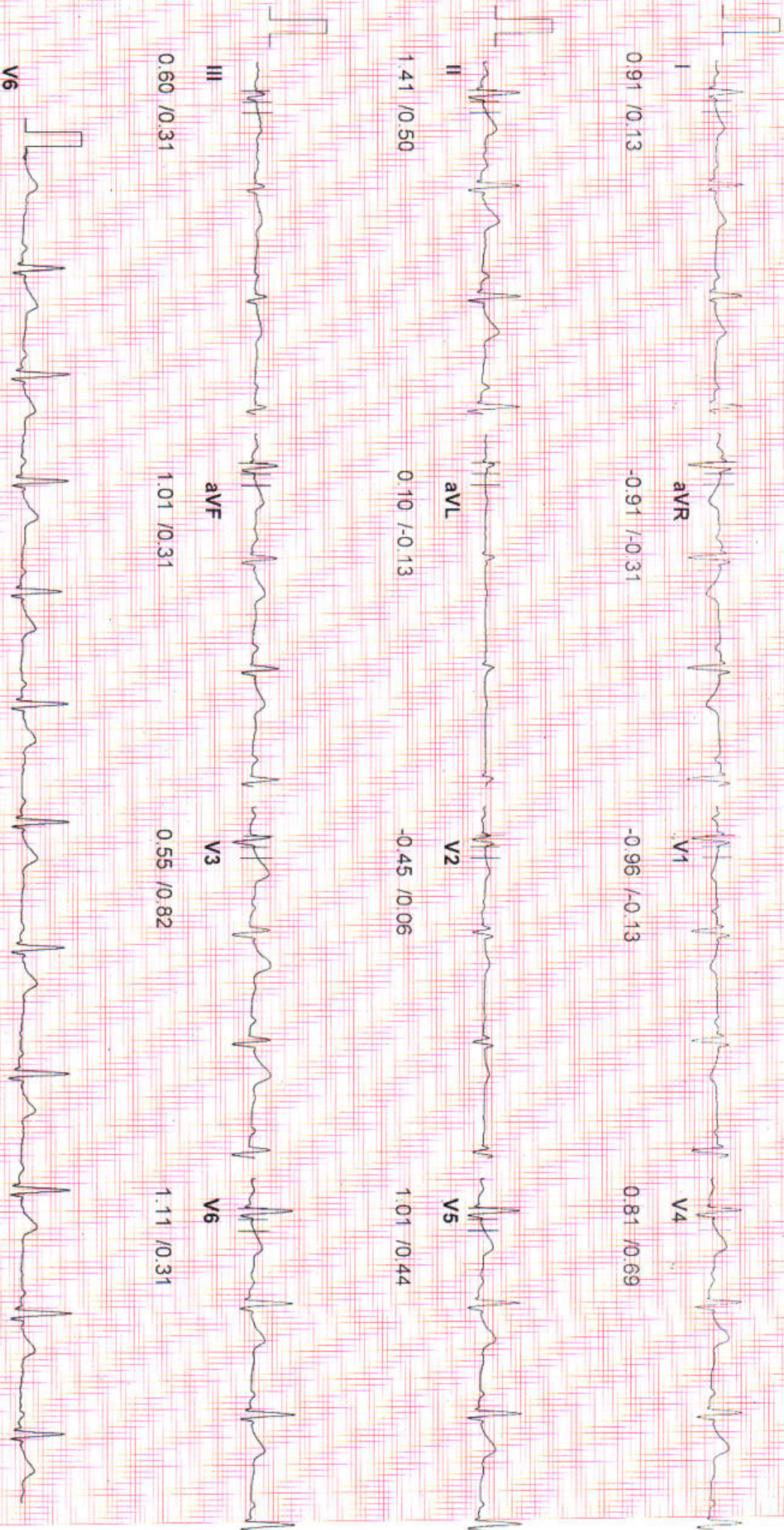
ID : 135  
 NAME : MANOJ  
 Age : 43  
 BP : 120/80 mmHg  
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE :  
 RECORDED TIME :  
 STAGE DURATION :  
 HR :

Pre-Test  
 05:00 (min sec)  
 05:00 (min sec)  
 75 bpm (42%)

PROTOCOL : BRUCE  
 SPEED : 0.0 kmph  
 GRADE : 0.00 %  
 METS : 0.00

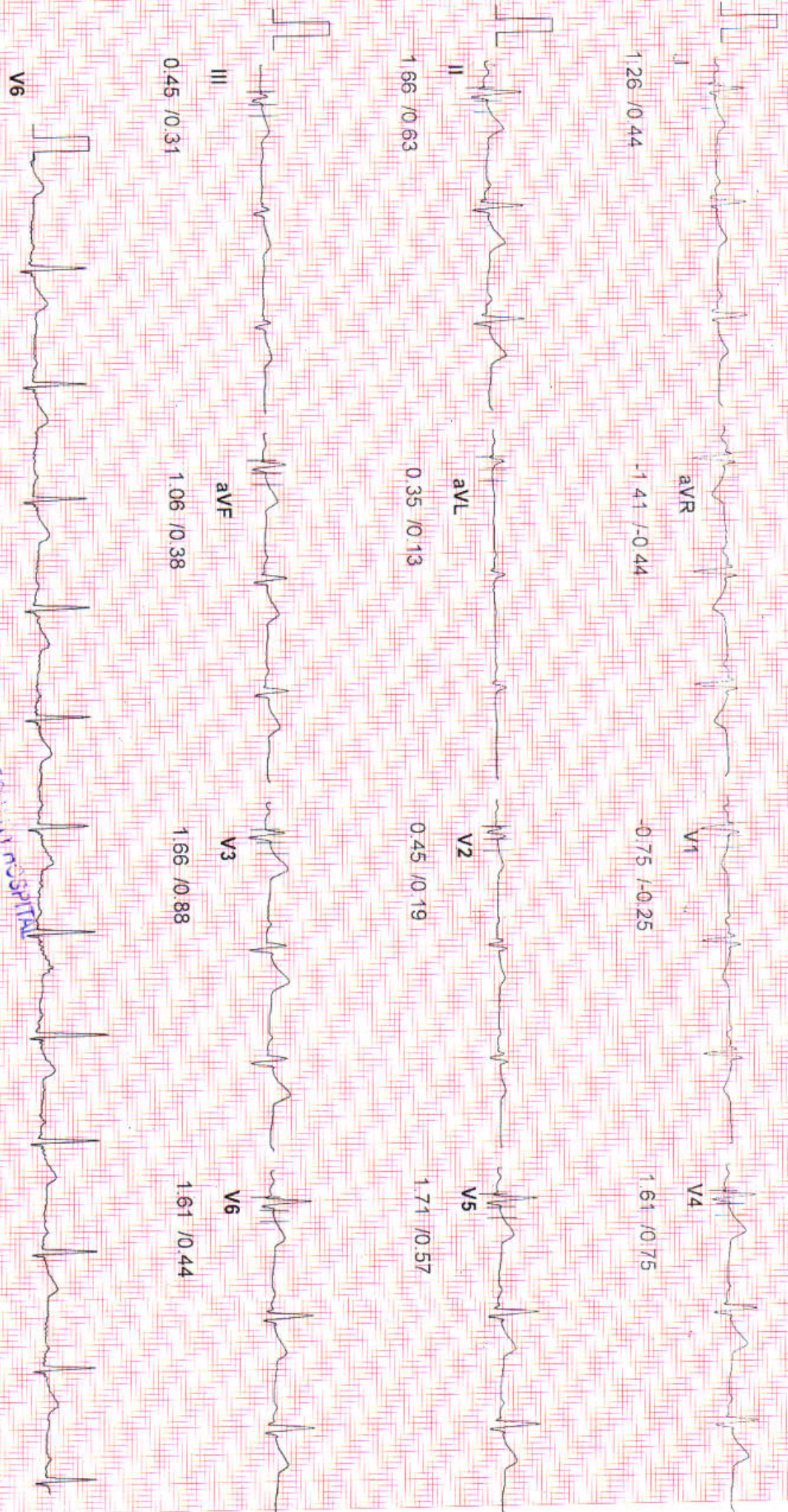
DR. VIJOND BHAT  
 Tested On : 24-09-2022, 11  
 BPL DYNATRAC



D - 35  
NAME MANOJ  
AGE 43  
BP 120/80 mmHg  
ST Levels (mm)/ST Slope (mV/s) measured at 80 ms Post J

STAGE Pre-Test  
RECORDED TIME : 05:33 (min:sec)  
STAGE DURATION : 05:33 (min:sec)  
HR 76 bpm (42%)  
METs 0.00

DR. VIJEND BHAT  
Tested On 24-05-2022, 11  
BPL DYNATRAC



# 135

SJM SLIPPER STREET SJM HOSPITAL  
Dr. Manoj Kumar (Cardiologist)  
M.D. S.S. M.D. (Medicine)  
Sr. Consultant Physician  
Reg. No. 309889 (DMCI)

20 HZ Filter

10mm/mV, 25mm/Sec

ID 135  
NAME MANOJ  
AGE 43  
BP 120/80 mmHg  
ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE Score  
RECORDED TIME 05:43 (min sec)  
STAGE DURATION 00:10 (min sec)  
HR 83 bpm (46%)

PROTOCOL BRUCE  
SPEED 0.0 kmph  
GRADE 0.00 %  
METES 0.00  
DR. VICOND BHAT  
Tested On 24-09-2022, 11  
BPL DYNATRAC



0.60 /0.57

-0.60 /+0.63

-0.75 /-0.38

0.55 /0.94

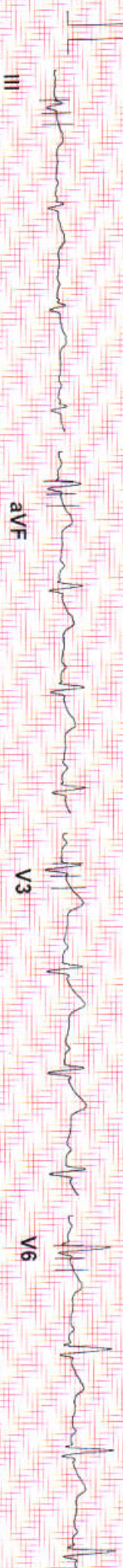


1.16 /1.01

-0.05 /0.00

-0.50 /0.25

0.65 /0.88



0.65 /0.38

0.86 /0.63

0.45 /1.13

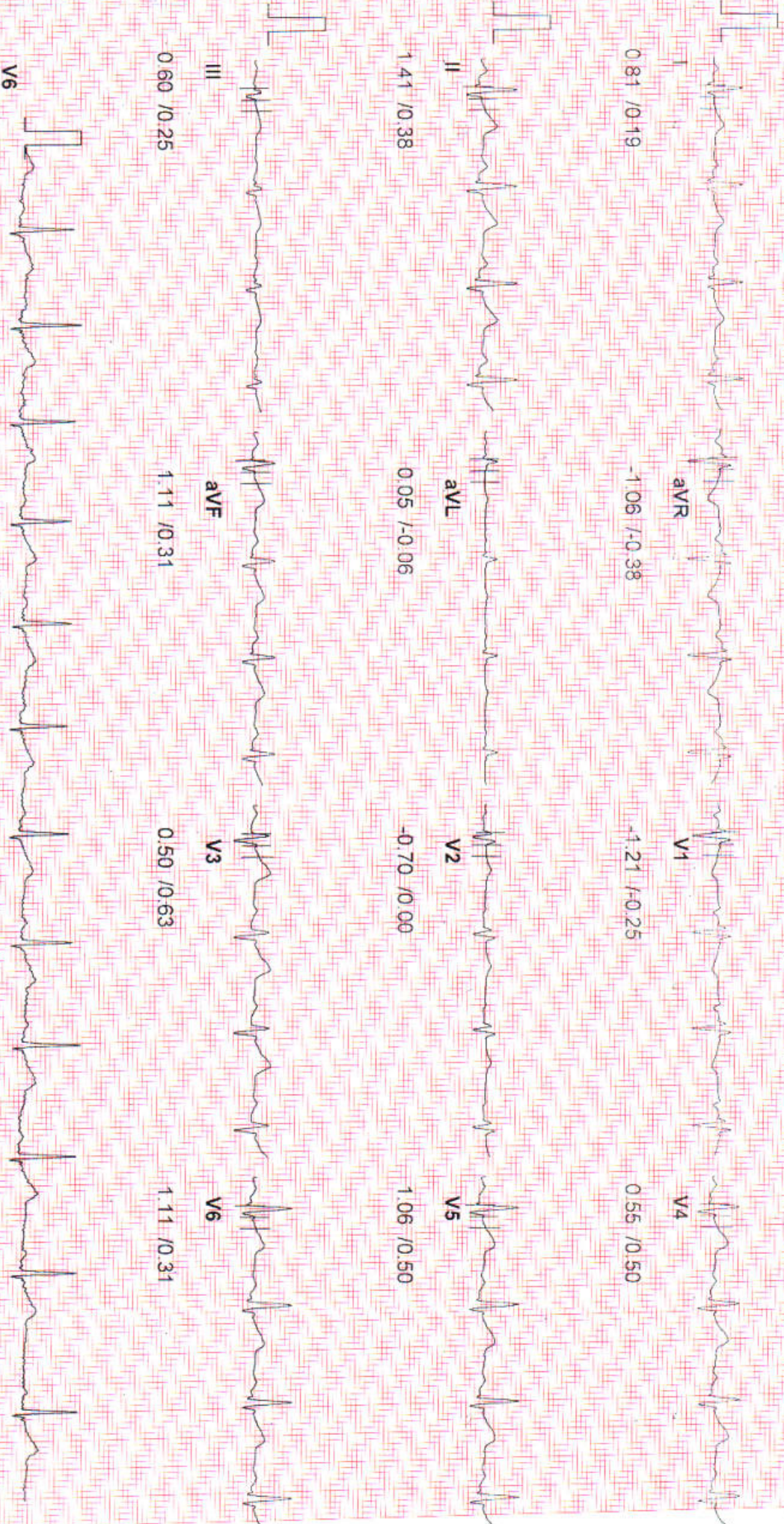
0.86 /0.75



ID 135  
 NAME MANOU  
 AGE 43  
 BP 120/80 mmHg  
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE Hyper Ventilation  
 RECORDED TIME 06:17 (min:sec)  
 STAGE DURATION 00:34 (min:sec)  
 HR 83 bpm (46%)  
 PROTOCOL BRUCE  
 SPEED 0.0 kmph  
 GRADE 0.00%  
 METS 0.00

DR. VIJOND BHAT  
 Tested On 24-09-2022, 11  
 SPL DYNATRAC



**SJM SUPER SPECIALITY HOSPITAL**

Dr. Vinod Kumar Bhat  
 M.B.B.S., M.D. (Medicine)  
 Sr. Consultant Physician  
 Reg. No. 30699 (DMCA)



ID : 135  
NAME : MANOJ  
AGE : 43  
BP : 120/80 mmHg  
ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Wait For Exerc se  
RECORDED TIME : 07:09 (min:sec)  
STAGE DURATION : 00:52 (min:sec)  
HR : 84 bpm (47%)  
PROTOCOL : SPEED : 0.0 kmph  
GRADE : 0.00 %  
METs : 0.00

DR VIGND BHAT  
Tested On : 24-09-2022, 11  
BPL DYNATRAC



#135

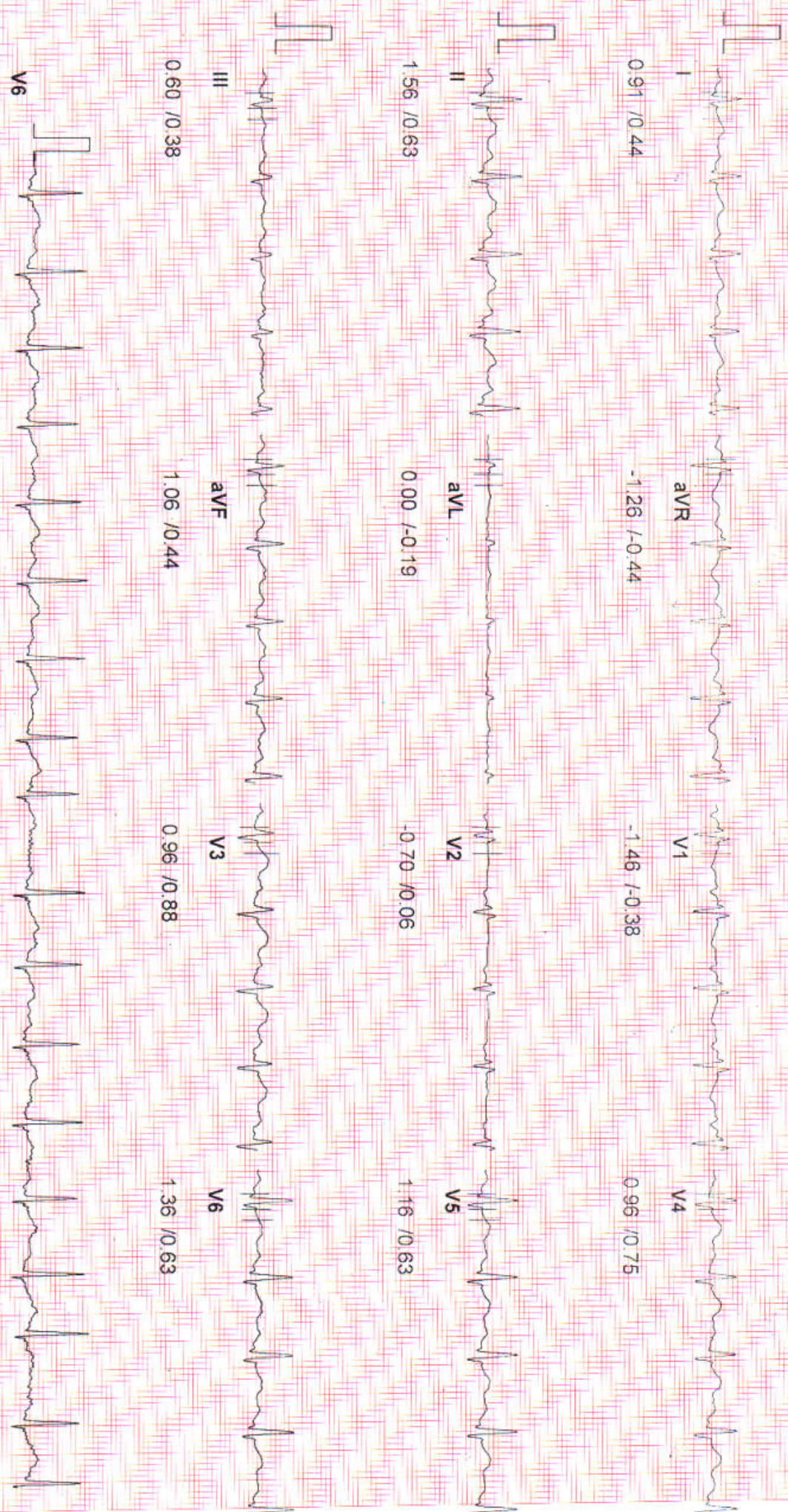
SJM SUPER SPECIALITY HOSPITAL  
Dr. Vignid Bhat  
M.B.B.S. (M.D. (Psychiatry))  
Sr. Consultant Physician  
Reg. No. 30089 (DMC)

20 Hz Filter

10mm/mV, 25mm/Sec

ID : 135  
 NAME : MANOJ  
 AGE : 43  
 BP : 130/90 mmHg  
 ST Levels (mm) / ST Slope (mV/s) measured at 80 ms Post J

STAGE : Exercise 1  
 RECORDED TIME : 03:00 (min:sec)  
 STAGE DURATION : 03:00 (min:sec)  
 HR : 109 bpm (61%)  
 PROTOCOL : BRUCE  
 SPEED : 2.7 kmph  
 GRADE : 10.00 %  
 METS : 5.10  
 DR. VIOND BHAT  
 Tested On : 24-09-2022 11  
 BPL DYNATRAC



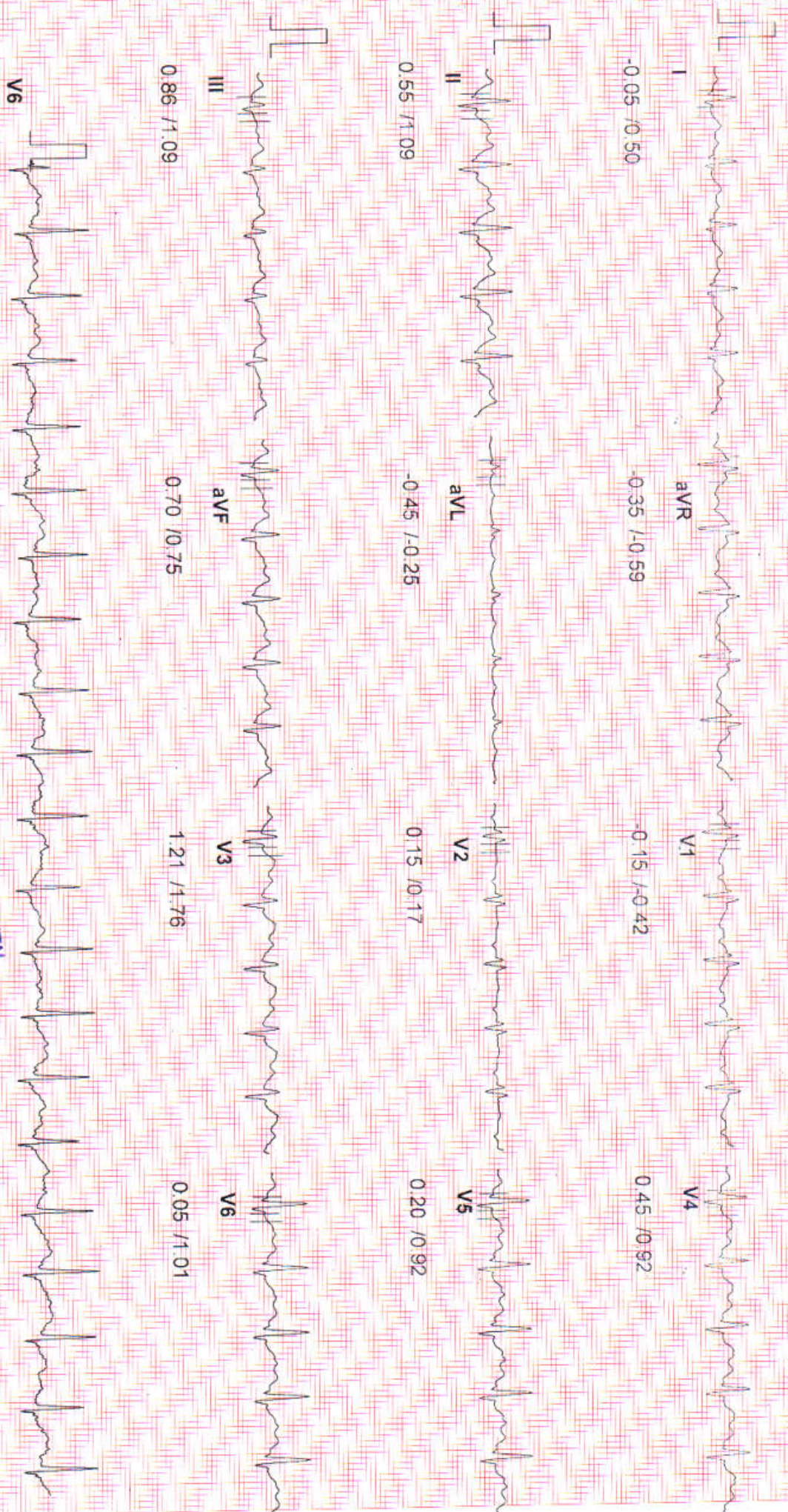
SJM HOSPITAL AND IVF CENTRE

ID : 135  
 NAME : MANOJ  
 AGE : 43  
 BP : 140/100 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 : 129 bpm (72%)  
 METS : 7.10

PROTOCOL : BRUCE  
 SPEED : 4.0 kmph  
 GRADE : 12.00 %

DR. VIOND BHAT  
 Tested On : 24-09-2022, 11  
 BPL DYNATRAC



#135

SJM SUPTRA SPECIALITY HOSPITAL  
 Dr. Viond Bhat (Physiologist)  
 M.B.B.S. (M.D. in Cardiology)  
 Sr. Consultant, PT/SICIAN  
 Reg. No. 39989 (DMCA)

20 Hz Filter

10mm/mV, 25mm/Sec

ID : 135  
NAME : MANOJ  
AGE : 43  
BP : 150/100 mmHg  
ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : Exercises  
RECORDED TIME : 09:00 (min:sec)  
STAGE DURATION : 03:00 (min:sec)  
HR : 144 bpm (81%)  
METs : 10.00  
PROTOCOL : BRUCE  
SPEED : 5.5 kmph  
GRADE : 14.00 %  
DR. VIOND BHAT  
Tested On : 24-09-2022  
BPL DYNATRAC



0.25 /1.09

-0.35 /-1.68

-0.10 /-1.68

0.96 /2.52

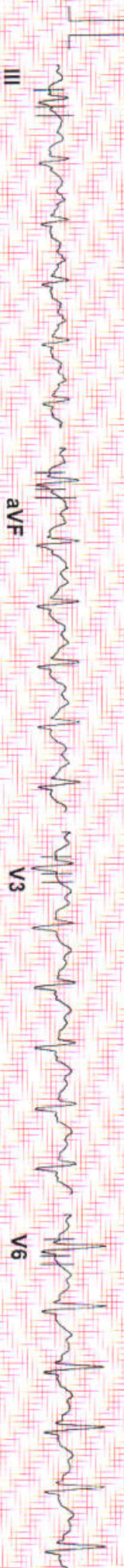


0.45 /2.52

0.25 /0.25

0.70 /0.17

0.50 /2.35



-0.05 /1.17

0.20 /1.84

0.86 /2.35

-0.05 /1.43

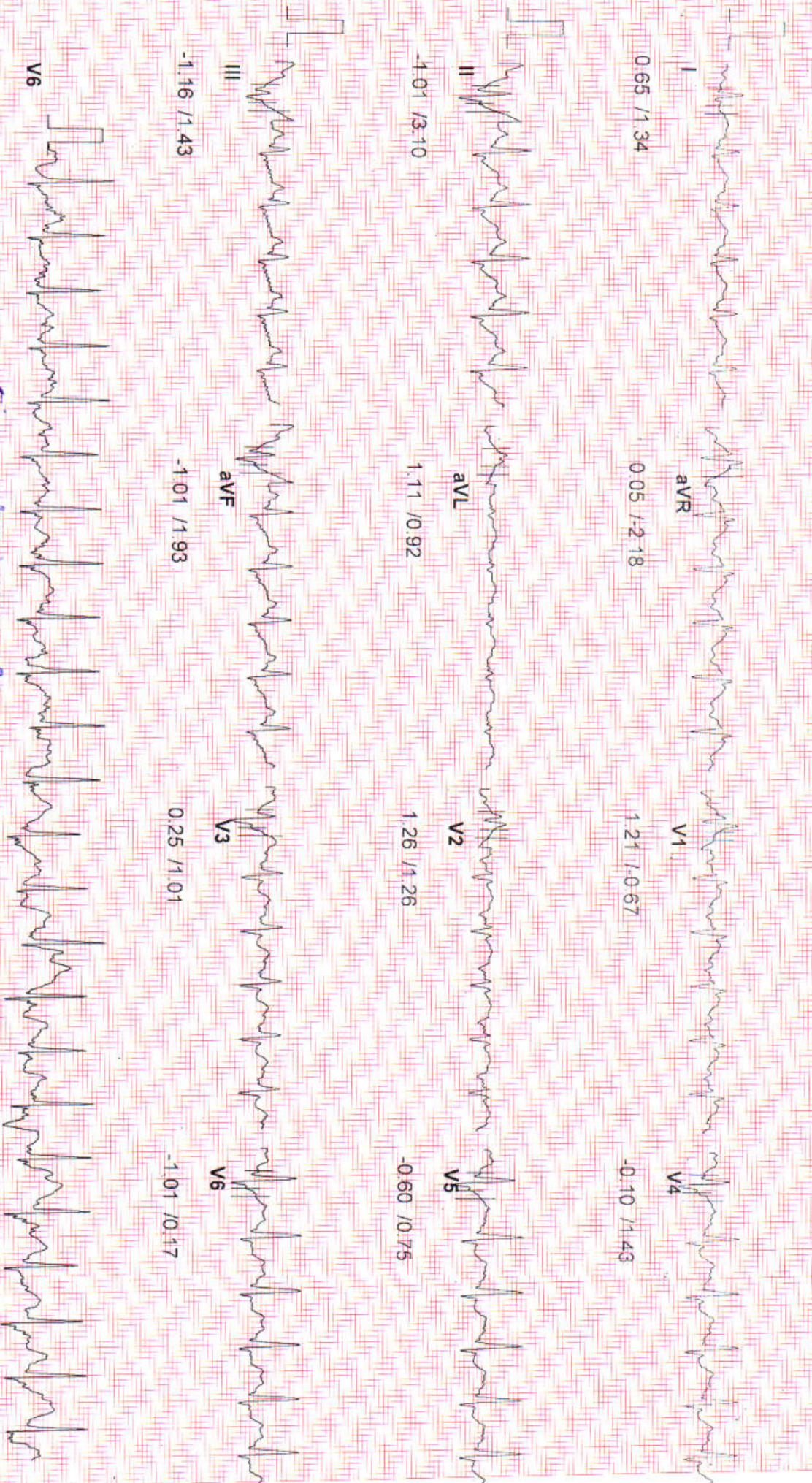


ID : 135  
 NAME : MANOJ  
 AGE : 43  
 BP : 150/100 mmHg  
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE : EXERCISED  
 RECORDED TIME : 10:15 (min:sec)  
 STAGE DURATION : 01:15 (min:sec)  
 HR : 153 bpm (86%)

PROTOCOL : BRUCE  
 SPEED : 6.8 kmph  
 GRADE : 16.00 %  
 METS : 13.00

DR. VIJOND BHAT  
 Tested On : 24-09-2022  
 BPL DYNATRAC



# 135

Dr. Manoj K. S. Sr. Consultant, P. Cardiology  
 Reg. No. 38960 (M.M.C.)  
 Dr. Manoj K. S.  
 Sr. Consultant, P. Cardiology  
 Reg. No. 38960 (M.M.C.)

20 Hz Filter

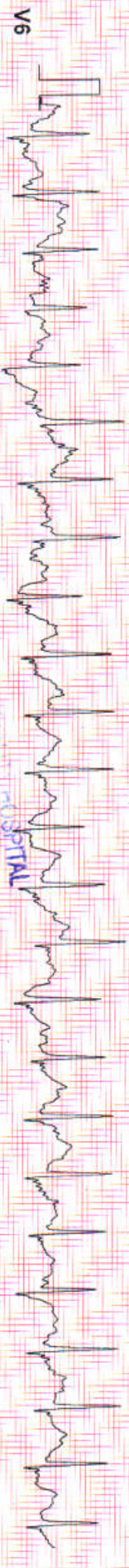
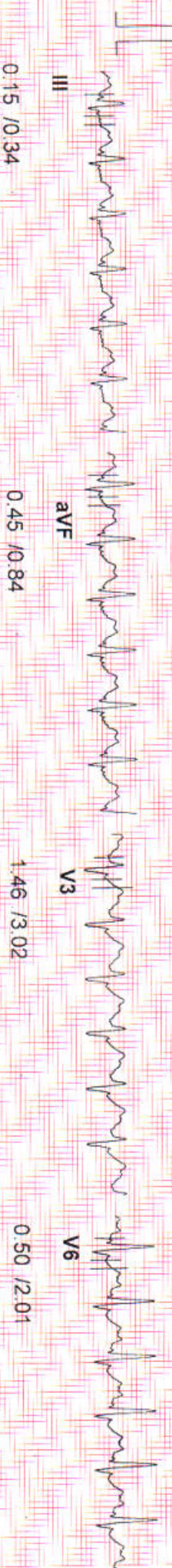
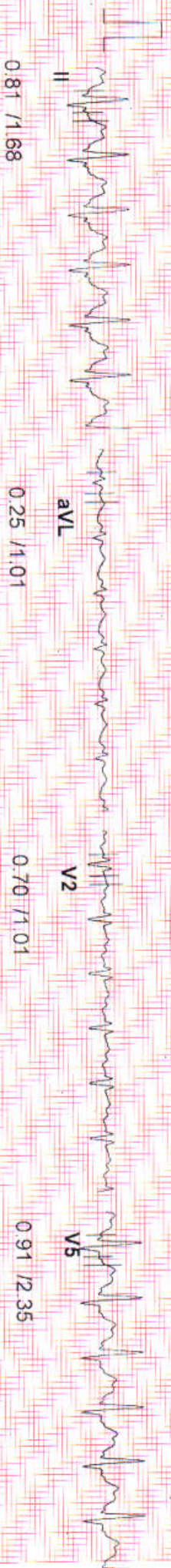
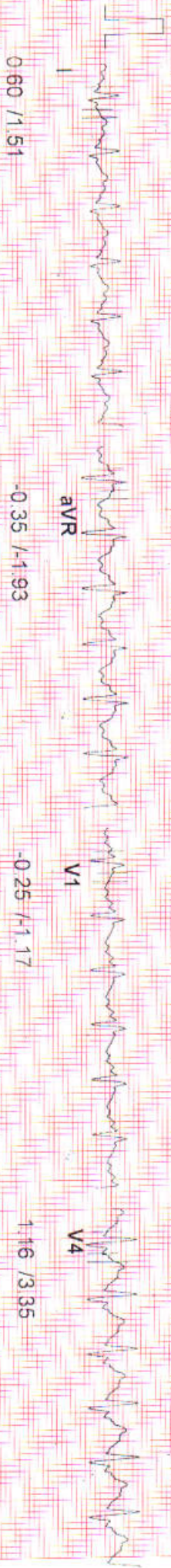
10mm/mV, 25mm/Sec

SJM HOSPITAL AND INF CENTRE

ID 135  
 NAME MANOJ  
 AGE 43  
 BP 120/80 mmHg  
 HR 160 bpm (90%)  
 ST Levels (mm) / ST Slope (mV/s) measured at 60 ms Post J

STAGE RECORDED TIME RECOVERY 1  
 STAGE DURATION 00:59 (min:sec)  
 00:59 (min:sec)  
 SPEED 0.0 kmph  
 GRADE 0.00 %  
 METS 0.00

PROTOCOL BRUCE  
 DR. VIOND BHAT  
 Tested On 24-09-2022 11  
 BPL DYNATRAC



# 135

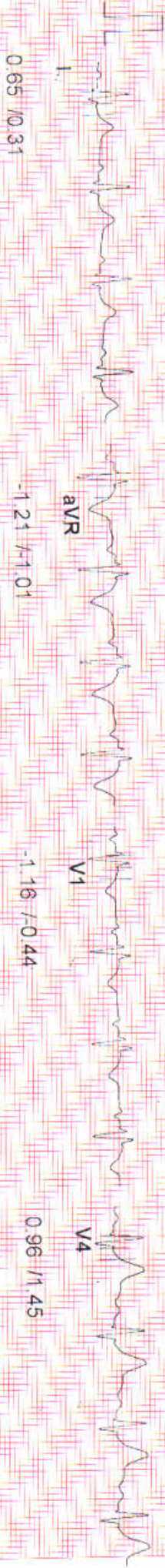
SJM SUPERVISOR  
 Dr. V. (line)  
 M.S. (line)  
 Sr. Consultant Physician  
 Reg. No. 30989 (DMC)

20 Hz Filter

10mm/mV, 25mm/Sec

ID : 135  
NAME : MANOJ  
AGE : 43  
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 : 95 bpm (53%)  
PROTOCOL : BRUCE  
SPEED : 0.0 kmph  
GRADE : 0.00 %  
METs : 0.00  
DR VIOND BHAT  
Tested On : 24-09-2022, 11  
BPL DYNATRAC

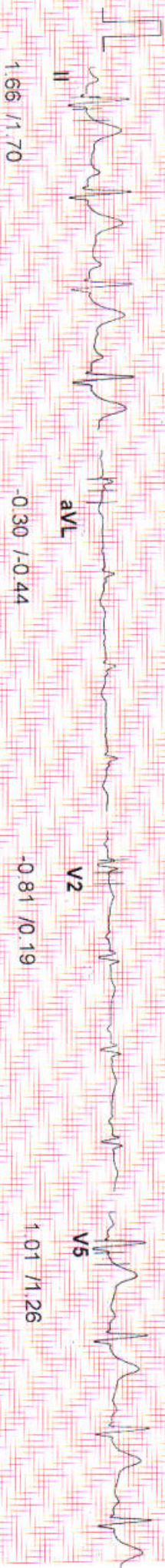


0.65 / 0.31

-1.21 / -1.01

-1.16 / -0.44

0.96 / 1.45

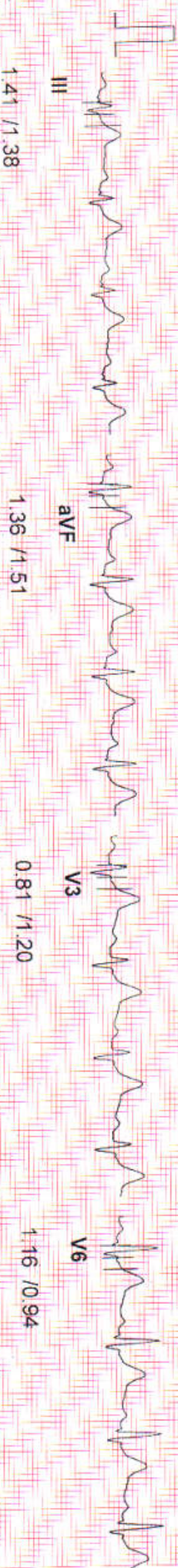


1.66 / 1.70

-0.30 / -0.44

-0.81 / 0.19

1.01 / 1.26

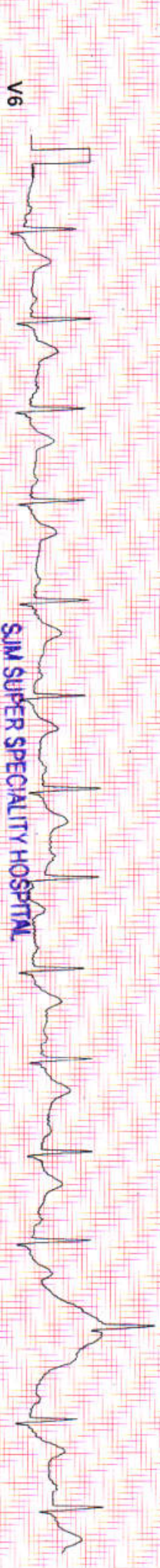


1.41 / 1.38

1.36 / 1.51

0.81 / 1.20

1.16 / 0.94



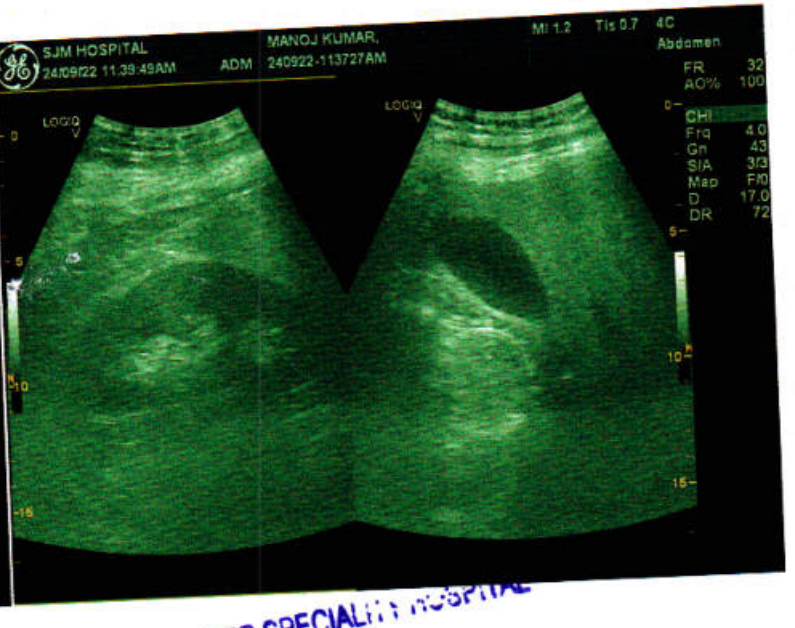
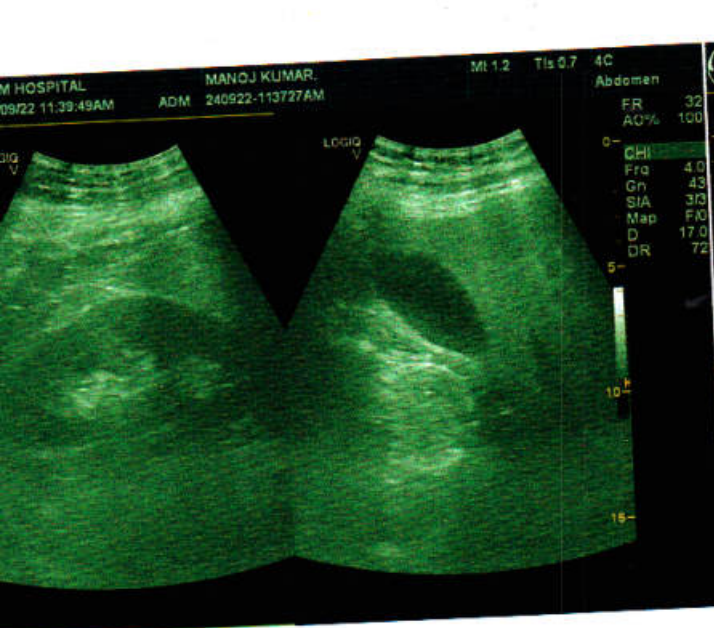
1.41 / 1.38

1.36 / 1.51

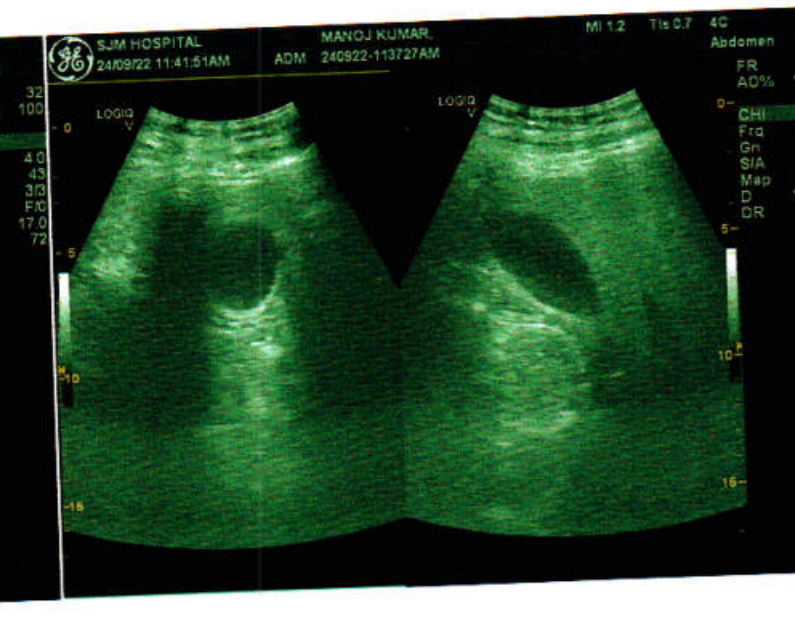
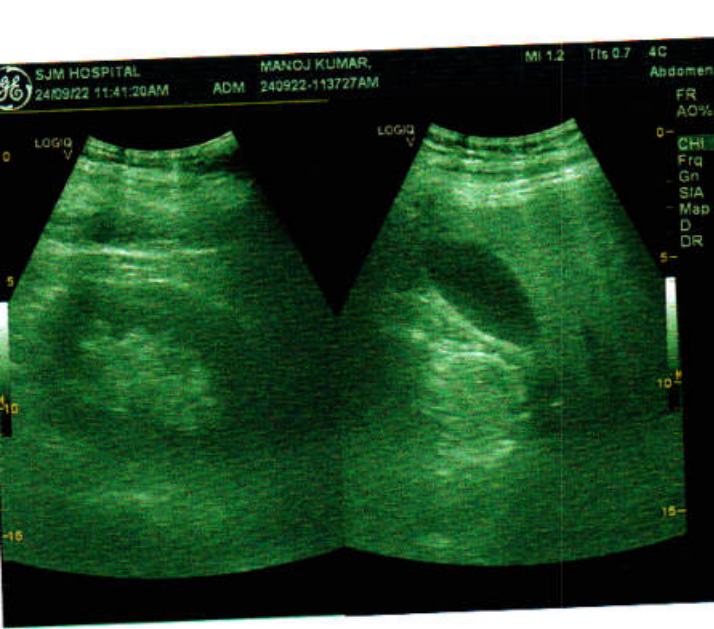
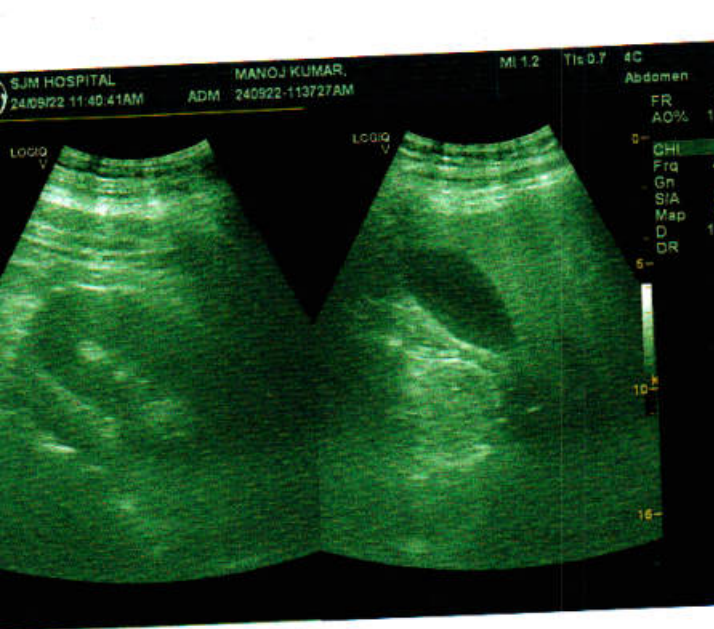
0.81 / 1.20

1.16 / 0.94

**SJM SUPER SPECIALITY HOSPITAL**  
Dr. Vinod Kumar Bhat  
M.B.S., M.D. (Medicine)  
Sr. Consultant Physician  
Reg. No. 30989 (DMC)



**SJM SUPER SPECIALITY HOSPITAL**  
**Dr. Vinod Kumar Bhat**  
**M.B.B.S, M.D (Medicine)**  
**Sr. Consultant Physician**  
**100289 (DMC)**





## Ultrasound Report

Name: Mr. Manoj Kumar

Age:43yrs/Male

Date: 24/09/2022

### Ultrasound - Male Abdomen

**Liver:** Liver appears normal in size. 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, shape and echo pattern. No focal mass lesion seen. Pancreatic duct is not dilated.

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

**KIDNEYS:-**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 both sides.

**PARAAORTIC REGIONS:** Any mass/ lymph nodes: -- no mass or lymph nodes seen.

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

**PROSTATE:** - Normal in shape and position. Parenchymal echotexture is normal. No free ascetic fluid or pleural effusion seen.

**IMPRESSION: - Normal Scan.**

DR. PUSHPA KAUL

For SJM Super Specialty Hospital

DR. P.K GUPTA

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