

प्रति,

समन्वयक,
Mediwheel (Arcofemi Healthcare Limited)
हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिनका विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

नाम	कर्मचारी विवरण
क.कू.संख्या	MRS. ADHIKARI AARTI SANJAY
पदनाम	105531
कार्य का स्थान	HEAD CASHIER "E" II
जन्म की तारीख	SARAVALI
स्वास्थ्य जांच की प्रस्तावित तारीख	20-04-1989
बुकिंग संदर्भ सं.	09-03-2024
	23M105531100091686E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 17-02-2024 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)



LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MRS. ADHIKARI AARTI SANJAY
EC NO.	105531
DESIGNATION	HEAD CASHIER "E" _II
PLACE OF WORK	SARAVALI
BIRTHDATE	20-04-1989
PROPOSED DATE OF HEALTH CHECKUP	09-03-2024
BOOKING REFERENCE NO.	23M105531100091686E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **17-02-2024** till **31-03-2024** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager
HRM Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))

SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
Lipid Profile	Lipid Profile
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
Liver Profile	Liver Profile
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
Kidney Profile	Kidney Profile
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG Whole Abdomen
General Tests	General Tests
X Ray Chest	X Ray Chest
ECG	ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, TSH)
PSA Male (above 40 years)	Mammography (above 40 years) and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation
Dental Check-up consultation	Physician Consultation
Physician Consultation	Eye Check-up consultation
Eye Check-up consultation	Skin/ENT consultation
Skin/ENT consultation	Gynaec Consultation



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APEX SUPERSPECIALITY HOSPITALS



CASHLESS FACILITY

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L. T. Road, Besides Punjab & Sind Bank, Babhai Naka,
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email: info@apexhospitals.in | www.apexgroupofhospitals.com

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Tele.: 022 - 2898 6677 / 46 / 47 /

PHYSICIAN CONSULTATION

wt - 65 Kg

Hight - 173

PRESENT COMPLAINT: No any present
complaint.

PAST MEDICAL / SURGICAL HISTORY:

No any medical history

Sx - RT side neck lymph node statu
(2019).

GENERAL EXAMINATION:

PULSE - 114/min
BP: - 130/80 mmHg
BMI
APETITE: - Normal
THIRST: - Normal
STOOL: - Normal
URINE: - Normal
SLEEP: - Normal
SKIN: - Normal
NAILS: - Normal
HABITAT: - NO

SYSTEMIC EXAMINATION: -

RESPIRATORY EXAMINATION: - AEBE clear.

CARDIOVASCULAR EXAMINATION: - S1S2 + / CVS - conscious &
oriente.

ABDOMINAL EXAMINATION: - SOFT.

GYNACOLOGY / OBST HISTORY (FOR FEMALE): -

OPHTHAL EXAMINATION:

FAR VISION: - Normal
NEAR VISION: - Normal
COLOUR VISION: - Normal.

ENT EXAMINATION:

EAR: MASTOID TUNNIG FORK TEST: - Both ear clear / no wax
NOSE: EXT NOSE/ POST NASAL SPACE: - No any history
THROAT: TOUNGE/ PALATE/ TEETH: - during brush bleeding
NECK: NODES/ THYROID/TEETH: - discharge on tooth.

DENTAL EXAMINATION:

DECAY/ CARIES IF ANY: - cavity 5x status (2021)
PLAQUE IF ANY: - W
GUMS: - Bleeding, gums \therefore 3-4 days.

Dr. priyanka

PHYSICIAN NAME

PHYSICIAN SIGNATURE

CAMP.



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Apex Super Speciality Hospitals
Shriamurgu Mangesh Chhatry Trust Medical Centre 194-A, 1-E, Road,
Beside Postbox & Sand Bank, Palghar, Borivali (W), Mumbai-400091
Tel: 022-25466277, 25464948. Email: apex@apexhospitals.com
Email: medical@apexhospitals.com

Diet Chart

UHID : ASH232404548
Patient : Adhikari Sanjay
Address : R/no 1009 Velgao Road Manor Velgaon Palghar
Date : 09-Mar-2024
Dietician : GUPTA SAKSHI SATISH

ID : HC232400016
Age/Sex : 39/Male
Department : Rmo
Diet Chart : High protein diet

BMI and IBW calculation

Height	: 172 Cms	Weight	: 69 Kgs	BMI	: 23.32
BMI Category	: Normal Weight	IBW	: 72	Diagnosis	: c/o- Weight management
MNT	: PRE- DIABETIC DIET, HIGH PROTEIN				

- Early Morning:** 1 cup tea/ coffee/ toned milk/ 4Almonds + 1half Almonds (soaked)
- Breakfast:** 1 bowl upma/ poha/ daliya upma **OR** 2 small idli/ 1 dosa with vegetable sambar **OR** 1 bowl Muesli / oats in milk (1 boiled egg white)
- Mid-morning:** 1 fruit/ Truhanz **DM- 1 scoop in 100ml water**
(Avoid fruit juices and fruits like banana, chickoo, custard apple, jackfruit, mango, coconut water and sugarcane juice)
- Lunch:** 1 bowl raw vegetable salad
2 small roti/ 1 bhakri (jowar/bajra/ragi)
1 bowl bhaji(Avoid Potato, Sweet potato, Yam, Beetroot, Arbi, Raw banana)
1 bowl thick dal/ 1 medium piece of chicken or fish or egg preparation in curry
1 bowl brown rice
OR 1 bowl vegetable dailya khichdi with vegetables
1 bowl curd
- Evening snack:** 1 cup tea/ coffee/ toned milk
1 besan chilla **OR** 1 bowl boiled sprouts **OR** 1 vegetable egg omelette with chapatti **OR** 1 rava chilla with curd
- Mid-evening:** 1 bowl dal and vegetable soup
- Dinner:** 1 bowl raw vegetable salad
2 small roti/ 1 bhakri (jowar/bajra/ragi)
1 bowl bhaji (Avoid Potato, Sweet potato, Yam, Beetroot, Arbi, Raw banana)
1 bowl thick dal
OR 1 bowl vegetable dailya khichdi with vegetables
- Bed time:** 200ml toned milk/ 1tsp sesame seed

Remarks: Supplement should be taken once a day.

Have ample of fluids, upto 2L of water daily.

Follow small frequent and regular meal pattern. Do not miss meals.

Oil usage ½ litre per month, i.e. 3 teaspoon a day. Preferably mustard oil, sesame oil or rice bran oil.

Salt usage to 3gm. i.e. ½ teaspoon a day. Avoid red meats like mutton, pork and beef.

Include more green leafy vegetables, fruits and pulses in the diet.

Include **calcium** rich foods like milk and milk product, nuts, seeds, etc.

Make sure you get ample of exposure to sunlight for **Vitamin D**.

Avoid processed foods, refined flour products and fried food. Restrict bakery products.

Avoid all sources of extra salt like sauces, pickles, papads, chutneys, chips, etc.

Avoid all sources of simple sugars like white sugar, brown sugar honey, jaggery.

For detailed diet counselling: Consult Dietician Sakshi Gupta in OPD with prior appointment.



APEX SUPERSPECIALITY HOSPITALS DIAGNOSTICS



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Tele.:
022 - 2898 6677 / 46 / 47 / 48

Patient	: Adhikari Sanjay	UHID	: ASH232404548
Age/Sex	: 39/Male	ID	: HC232400016
Consultant Dr	: GUJAR NEERAJ	Registered On	:
Referring Dr	:	Reported On	: 09-Mar-2024
Collection Centre	: Apex Hospital		

COMPLETE BLOOD COUNT

Test	Result	Normal Value
HAEMOGLOBIN	15.0 Gm%	13.5-18.0 Gm%
RBC Count	5.42 Millions/cumm	4.0-6.0 Millions/cumm
PCV	43.9 %	37-47 %
MCV	81.00 Fl	78-100 Fl
MCH	27.68 Pg	27-31 Pg
MCHC	34.17 %	32-35 %
RDW	11.3 %	11-15 %
Total WBC Count	5700 /C.MM	4000-11000 /C.MM
Differential Count		
Neutrophils	58 %	40-75 %
Eosinophils	03 %	01-06 %
Basophils	00 %	00-01 %
Lymphocytes	35 %	20-45 %
Monocytes	04 %	01-10 %
BANDCELLS	00 %	00-03 %
Abnormalities Of WBC	NORMAL	
Abnormalities Of RBC	NORMOCYTIC NORMOCROMIC	
PLATELET COUNT	228 X 10 ³ /cumm	150-450 X 10 ³ /cumm
PLATELET ON SMEAR	ADEQUATE ON SMEAR	
MPV	H 11.3 Fl	7.0-11.0 Fl

HEMATOLOGY

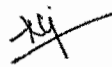
Test	Result	Normal Value
ESR	H 12 mm/hr	0 - 10 mm/hr

Remarks : **

Note:- The test result are subject to variations due to technical limitations hence co-relation with clinical findings & other investigations should be done.

Run By
Lab Technician

Checked By
Biochemist


Pathologist
DR.GUJAR NEERAJ VILAS
MD PATHOLOGY

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HEMATOLOGY

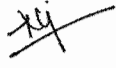
Test	Result	Normal Value
BLOOD GROUP	'A'	
Rh FACTOR	POSITIVE	

Remarks : *

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Consultant Dr	: GUJAR NEERAJ	Registered On	:
Referring Dr	:	Reported On	: 09-Mar-2024
Collection Centre	: Apex Hospital		

FASTING BLOOD SUGAR

Test	Result	Normal Value
FBS	H <u>125.3 Mg/dl</u>	70-110 Mg/dl
URINE SUGAR	ABSENT	
URINE KETONES	ABSENT	

POST LUNCH BLOOD SUGAR

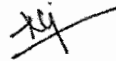
Test	Result	Normal Value
PLBL (2 HOUR AFTER FOOD)	H <u>168.7 Mg/dl</u>	70-140 Mg/dl
URINE SUGAR (PP)	SNR	-
URINE KETONE (PP)	SNR	

Remarks : **

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Consultant Dr	: GUJAR NEERAJ	Registered On	:
Referring Dr	:	Reported On	: 09-Mar-2024
Collection Centre	: Apex Hospital		

RENAL FUNCTION TEST

Test	Result	Normal Value
SERUM CREATININE	0.98 Mg/dl	0.6-1.6 Mg/dl
URIC ACID	4.06 Mg/dl	2.5-7.7 Mg/dl
BLOOD UREA NITROGEN / BUN	14.1 Mg/dl	0-23 Mg/dl

Remarks : *

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Consultant Dr	: GUJAR NEERAJ	Registered On	:
Referring Dr	:	Reported On	: 09-Mar-2024
Collection Centre	: Apex Hospital		

LIPID PROFILE

Test	Result	Normal Value
TOTAL CHOLESTEROL	164.7 Mg%	150-250 Mg%
TRIGLYCERIDES	H <u>196.9 Mg%</u>	35-160 Mg%
HDL CHOLESTEROL	35.41 Mg%	30-70 Mg%
VLDL CHOLESTEROL	H <u>39.38</u>	7-35
LDL CHOLESTEROL	L <u>89.91 Mg%</u>	108-145 Mg%
TC/HDL CHOL RATIO	4.65	3.5-5.0
LDL/HDL RATIO	2.54	1.1-3.9

Remarks : *

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Consultant Dr	: GUJAR NEERAJ	Registered On	:
Referring Dr	:	Reported On	: 09-Mar-2024
Collection Centre	: Apex Hospital		


LIVER FUNCTION TEST

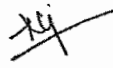
Test	Result	Normal Value
TOTAL BILIRUBIN	0.93 Mg/dl	0.1-1.2 Mg/dl
DIRECT BILIRUBIN	0.21 Mg/dl	0.0-0.3 Mg/dl
INDIRECT BILIRUBIN	0.72 Mg/dl	0.1-1.0 Mg/dl
SGOT	H <u>52.35 Iu/l</u>	5-40 Iu/l
SGPT	H <u>48.73 Iu/l</u>	5-40 Iu/l
SERUM ALKALINE PHOSPHATES	70.45 U/l	25-147 U/l
SERUM PROTEINS TOTAL	7.16 Gm%	6.0-8.2 Gm%
SERUM ALBUMIN	4.23 Gm%	3.0-5.0 Gm%
SERUM GLOBULIN	2.93 Gm%	1.9-3.5 Gm%
ALBUMIN : GLOBULIN RATIO	1.44 Mg/dl	0.9-2.0 Mg/dl
GAMMA GT	34.51 Iu/l	5-45 Iu/l

Remarks : *

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Consultant Dr	: GUJAR NEERAJ	Registered On	:
Referring Dr	:	Reported On	: 09-Mar-2024
Collection Centre	: Apex Hospital		

URINE ROUTINE


Test	Result	Normal Value
PHYSICAL EXAMINATION		
QUANTITY	25 MI	MI
COLOUR	PALE YELLOW	
APPEARANCE	SLIDLIY HAZY	
DEPOSIT	ABSENT	
REACTION [PH]	ACIDIC	
SPECIFIC GRAVITY	1.010	
CHEMICAL EXAMINATION		
URINE ALBUMIN	ABSENT	
SUGAR	ABSENT	
KETONE BODIES	ABSENT	
OCCULT BLOOD	ABSENT	
BILE PIGMENT	ABSENT	
BILE SALT	ABSENT	
MICROSCOPIC EXAMINATION OF CENTRE		
RED BLOOD CELLS	ABSENT /hpf	/hpf
PUS CELLS	1-2 /hpf	/hpf
EPITHELIAL CELLS	3-4 /hpf	/hpf
CASTS	ABSENT	
CRYSTALS	ABSENT	
SPERMATOZOA	ABSENT	
TRICHOMONAS VAGINALIS	ABSENT	
YEAST CELLS	ABSENT	
AMORPHOS DEPOSITS	ABSENT	
BACTERIA	ABSENT	

Remarks : *

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MD PATHOLOGY

Patient Id : **PVD04223-24/71370** Sample ID : 24032445
 Patient : MR SANJAY ADHIKARI Reg. Date : 09/03/2024
 Age/sex : 39 Yrs/ Male Report Date : 09/03/2024
 Center : APEX SUPERSPECIALITY HOSPITALS Case No. :
 Ref. By : Self



IMMUNOASSAY

Test Description	Result	Unit	Biological Reference Range
TOTAL T3 T4 TSH (TFT)			
T3 (Triiodothyronine)	135.11	ng/dl	83-200 For Pregnant females: First Trim: 104.8 - 229.8 2nd Trim: 128.9 - 262.3 Third trim : 135.4 - 261.7
T4 (Thyroxine)	8.14	ug/dL	5.13 - 14.10 For Pregnant females: First Trim : 7.33 - 14.8 Second Trim : 7.93 - 16.1 Third Trim : 6.95 - 15.7
TSH(Thyroid Stimulating Hormone)	2.91	uIU/ml	0.27 - 4.20

Method : ECLIA

INTERPRETATION

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"
Raised or within Range	Raised	Raised or within Range	•Interfering antibodies to thyroid hormones (anti-TPO antibodies) •Intermittent T4 therapy or T4 overdose •Drug interference- Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics"
Decreased	Raised or within Range	Raised or within Range	•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 within Range	Raised	Within Range	•T3 toxicosis •Non-Thyroidal illness

-----End Of Report-----

Term & Conditions* Test processed at Pathvision Central Processing Laboratory- Dahisar west Mumbai-68 Individual laboratory investigations are never conclusive but should be used along with other relevant clinical examinations to achieve final diagnosis. Any discrepancy with clinical condition the referring doctor or patient must report in 24hr of sample collection and get test redone. Partial reproduction of this report is not permitted The test report is not valid for Medico-legal purpose.

DR. SANDEEP B. PORWAL
MBBS MD (Path) Mumbai
MMC Reg no 2001031640



Patient Id : **PVD04223-24/71370** Sample ID : 24032445
Patient : MR SANJAY ADHIKARI Reg. Date : 09/03/2024
Age/sex : 39 Yrs/ Male Report Date : 09/03/2024
Center : APEX SUPERSPECIALITY HOSPITALS Case No. :
Ref. By : Self 



HBA1C-GLYCOSYLATED HAEMOGLOBIN

Test Description	Result	Unit	Biological Reference Range
HbA1c- (EDTA WB)	5.6	%	< 5.6 Non-diabetic 5.7-6.4 Pre-diabetic > 6.5 Diabetic
Estimated Average Glucose (eAG)	114.02	mg/dL	
Method : HPLC-Biorad D10-USA			

INTERPRETATION

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
- HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low glycosylated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- To estimate the eAG from the HbA1C value, the following equation is used: $eAG(mg/dl) = 28.7 \times A1c - 46.7$
- Interference of Haemoglobinopathies in HbA1c estimation.
 - For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
 - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
 - Heterozygous state detected (D10/ Tosho G8 is corrected for HbS and HbC trait).
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control.
Excellent Control - 6 to 7 %,
Fair to Good Control - 7 to 8 %,
Unsatisfactory Control - 8 to 10 %
and Poor Control - More than 10 %.

Note : Haemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy

-----End Of Report-----

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DR. SANDEEP B. PORWAL
MBBS MD (Path) Mumbai
MMC Reg no 2001031640



ASH/MRD/35

APEX SUPERSPECIALITY HOSPITALS

Where Healing & Care Comes Naturally

2898 6677

2898 6646

CASHLESS FACILITY

L. T. Road, Besides Punjab & Sind Bank, Babhai Naka, Borivali (W), Mumbai - 400 091

ई. सी. जी.

Name Sanjay Abhikari Date 9/3/24

Age 38 Sex M. B.P. _____

ELECTROCARDIOGRAPHIC OBSERVATIONS

Rate _____ Axis _____ O.R.S. Complex _____

Rhythm _____ P. Wave _____ S.T. Segment _____

Standardisation : _____ P.R. Interval _____ T. Wave _____

Voltage : _____ Q. Wave : Pr **Dr. CHIRAG V. SHAH**

Impression : WNL **D.N.B. (M.D.)**
CONSULTING PHYSICIAN CARDIOLOGIST
Reg. No. 2003 / 04 / 1649

पेक्स सुपरस्पेशलिटी हॉस्पिटल्स Name Sanjay Ablikari

Date 01/02/24 Time _____

ID:2024030910493036

Name:

09-03-2024 11:05:50 AM

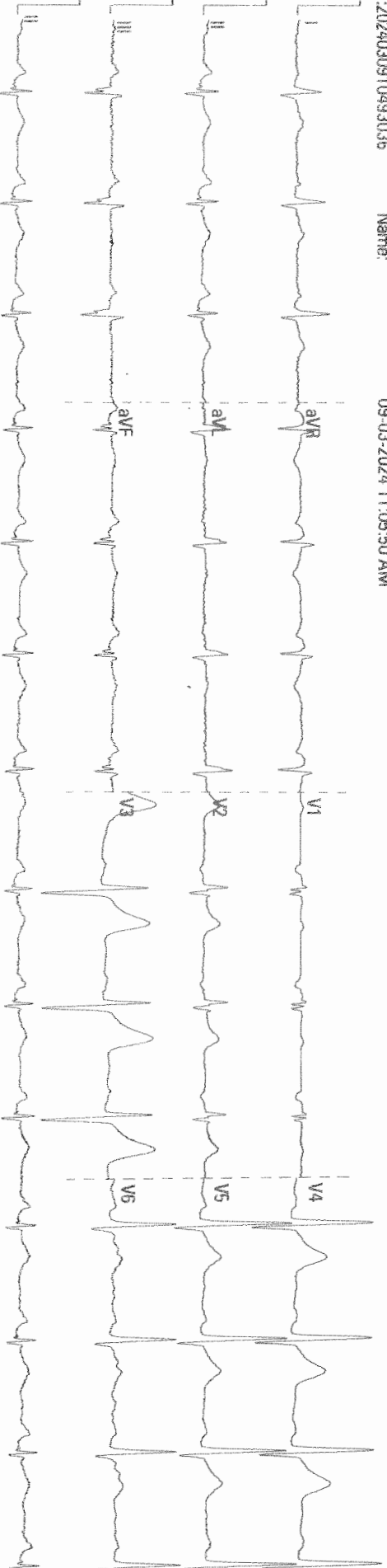
ID:2024030910493036

Name:

09-03-2024 11:05:50 AM

Sinus Rhythm

Unconfirmed Diagnosis:



5

UNI-EM

ELECTRONICS COMPLEX

INDORE

TREADMILL TEST REPORT

sanjay adhikari
 ID : 22322
 DATE : 05/03/2024
 AGE/SEX : 38 / M
 HT/WT : 173 / 65
 REF.BY :

PROTOCOL : Bruce
 H. STORY :
 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					125	140 / 90	175	1.3	1.1	2	
STANDING					126	140 / 90	176	1	1.1	1.7	
HYPERTENT		0:9			120	140 / 90	168	1.3	-0.2	1.9	
VALSALVA					119	140 / 90	166	0.9	0.1	2.1	
Stage 1	2:55		2.7	10	141	140 / 90	197	1.2	0.6	1.7	4.67
Stage 2	5:55		4	12	171	140 / 80	239	2.6	1.2	3.2	7.04
PK-EXERCISE	8:29		5.4	14	191	140 / 80	267	2.6	-0.1	3	9.50
RECOVERY	11:32				146	140 / 80	204	3.1	0	3.3	

RESULTS

EXERCISE DURATION : 8:29
 MAX HEART RATE : 191 bpm
 MAX BLOOD PRESSURE : 140 / 90 mm. Hg
 REASON OF TERMINATION : *Achard 7th*
 BP RESPONSE : *Normal*
 ARRHYTHMIA : *None*
 H.R. RESPONSE : *None*
 IMPRESSIONS : *None*

MAX WORK LOAD : 9.50 METS

104 % of target heart rate 182 bpm

Sanjay Adhikari for Mehru

Dr. CHIRAG V. SHAH

D.N.B.(M.)

CONSULTING PHYSICIAN CARDIO.

Reg.No. 2003/04/16

Technician :

UNI-EM

sanjay adhikari
 I.D. 22322
 Age 38/M
 Date 09/03/2024

RATE 146bpm
 B.P. 140/80

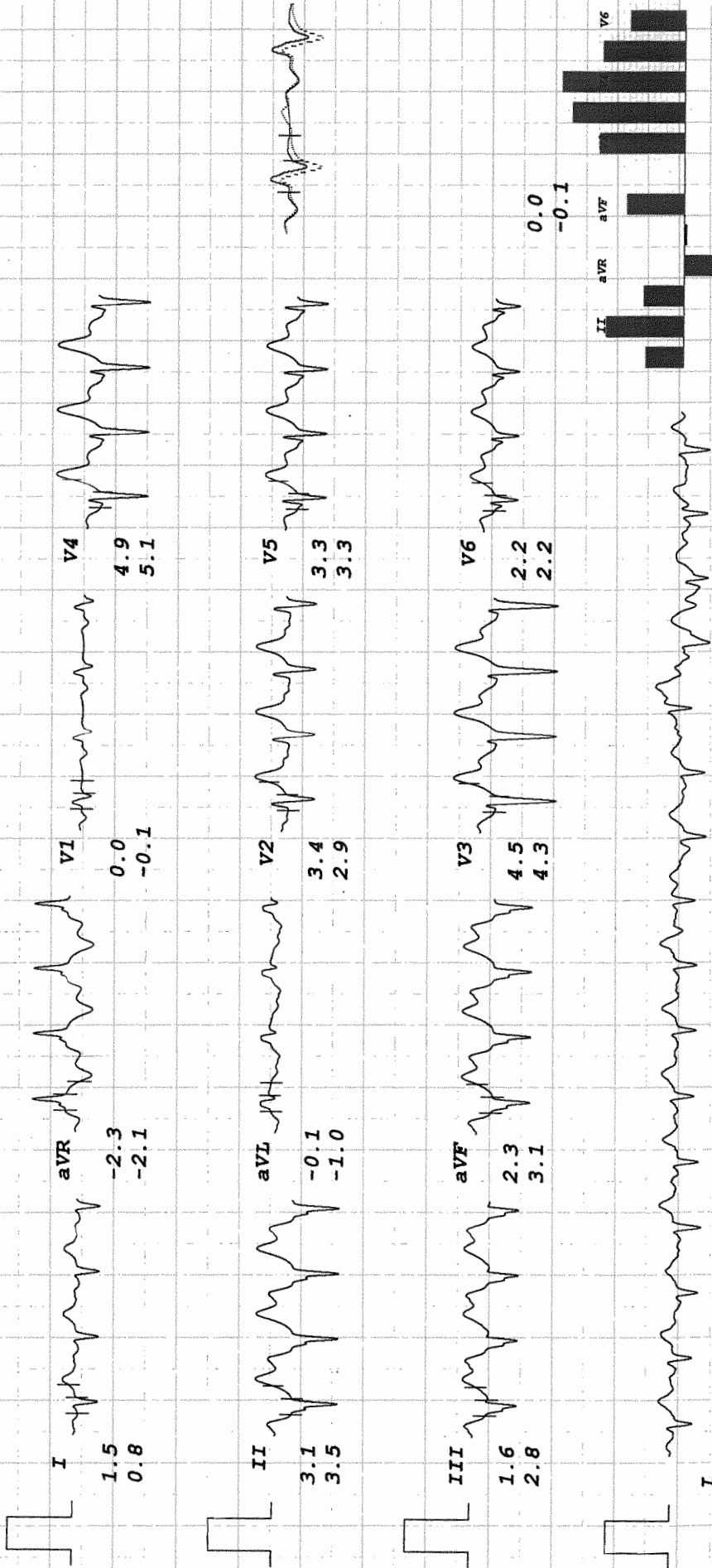
Bruce
 RECOVERY
 TOTAL TIME 11:32
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ

LINKED MEDIAN

Mag. X 2

V1



UNI-EM

sanjay adhikari
I.D. 22322
Age 38/M
Date 09/03/2024

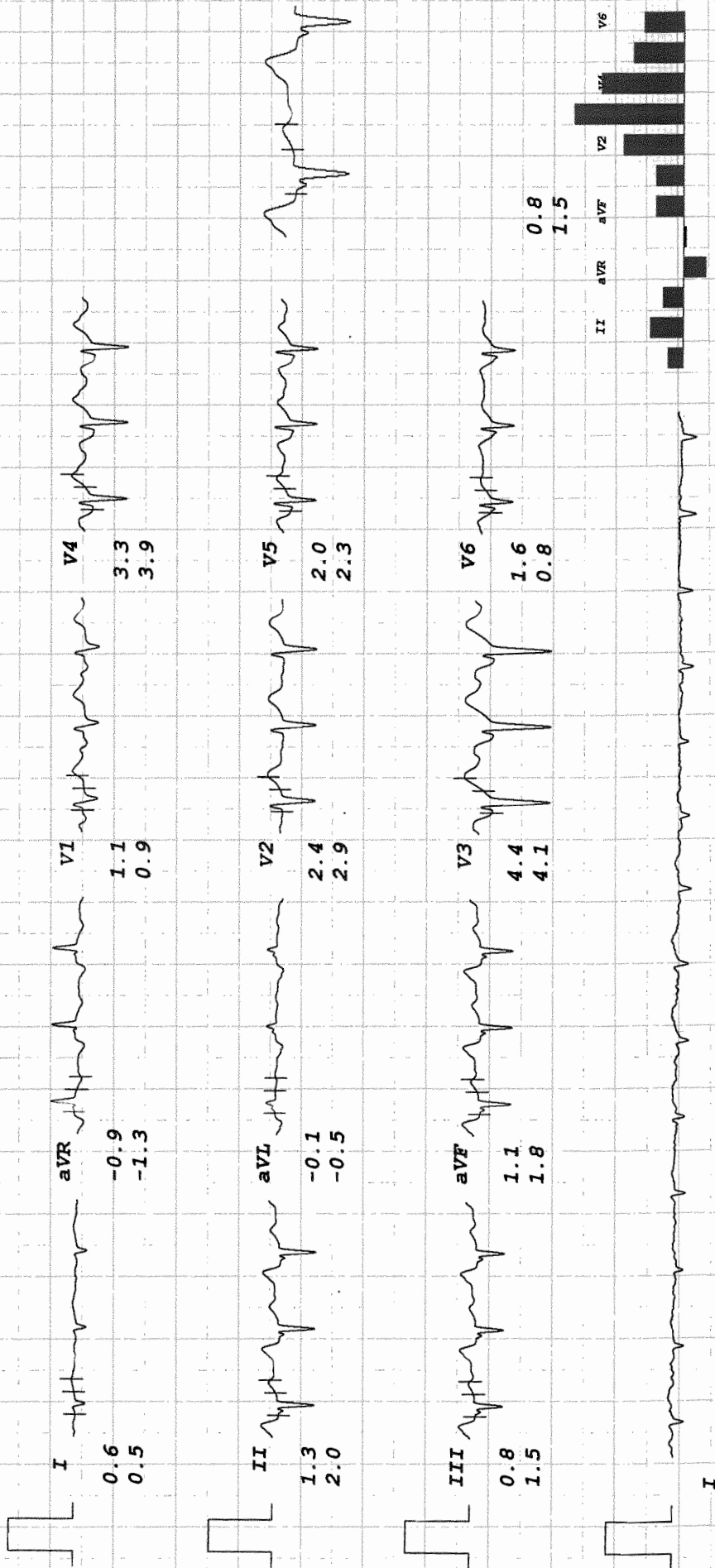
PRETEST
SUPINE
RATE 125bpm
B.P. 140/90

ST @ 10mm/mV
80ms PostJ

LINKED MEDIAN

Mag. X 2

III



UNI-EM

sanjay adhikari
I.D. 22322
Age 38/M
Date 09/03/2024

RATE 126bpm
B.P. 140/90

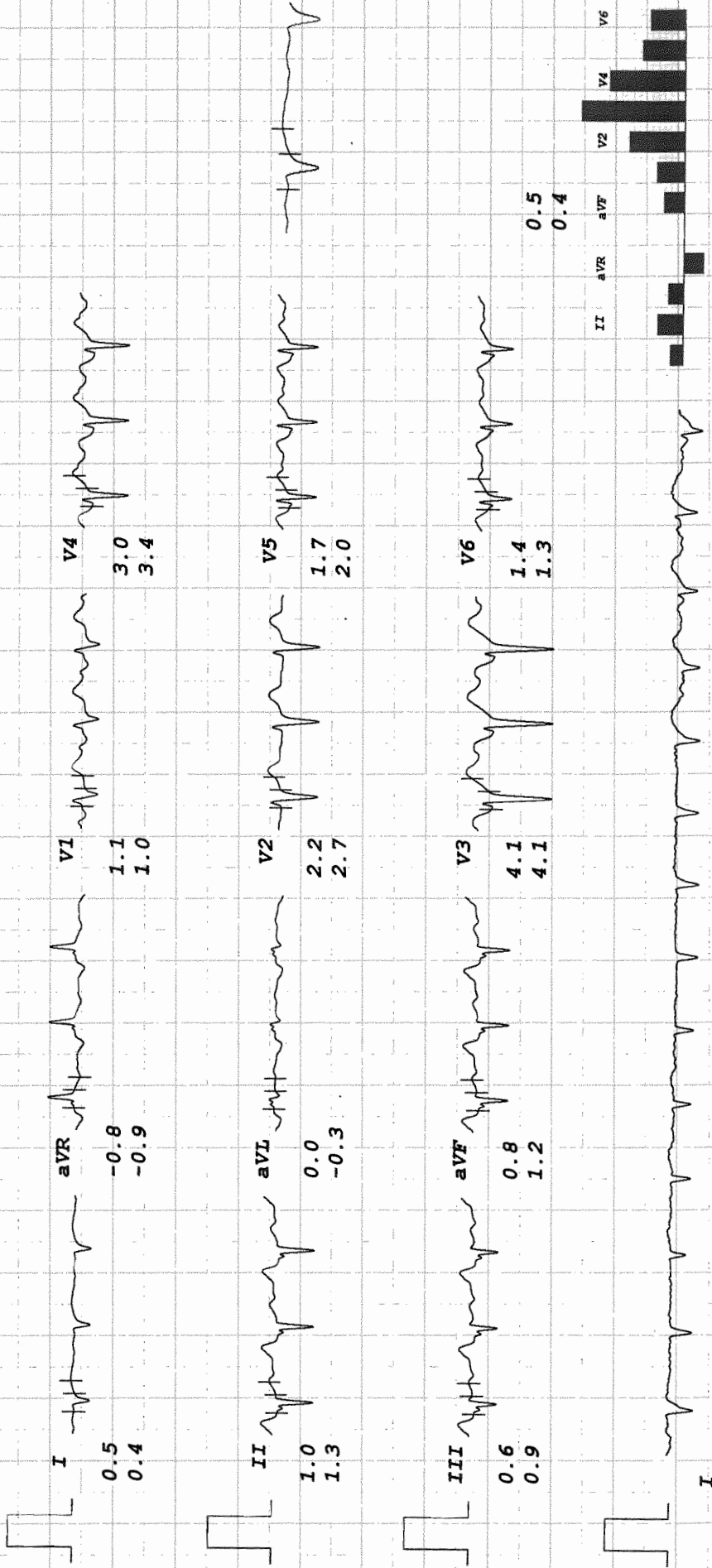
PRETEST
STANDING

ST @ 10mm/mV
80ms PostJ

LINKED MEDIAN

Mag. X 2

I



UNI-EM

sanjay adhikari
 I.D. 22322
 Age 38/M
 Date 09/03/2024

RATE 120bpm
 B.P. 140/90

PRETEST
 HYPERVENT

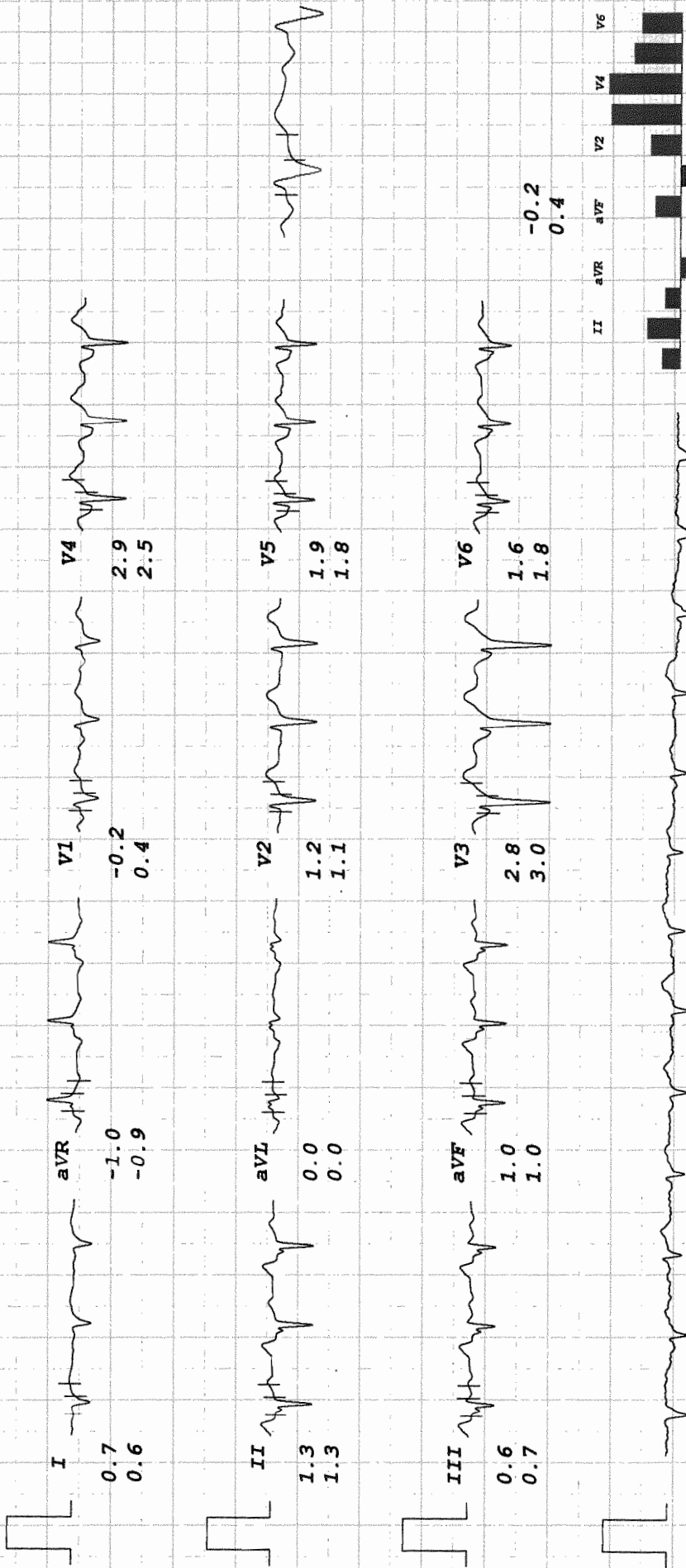
PHASE TIME 0:09

ST @ 10mm/mV
 80ms PostJ

LINKED MEDIAN

Mag. X 2

V1



UNI-EM

sanjay adhikari
I.D. 22322
Age 38/M
Date 09/03/2024

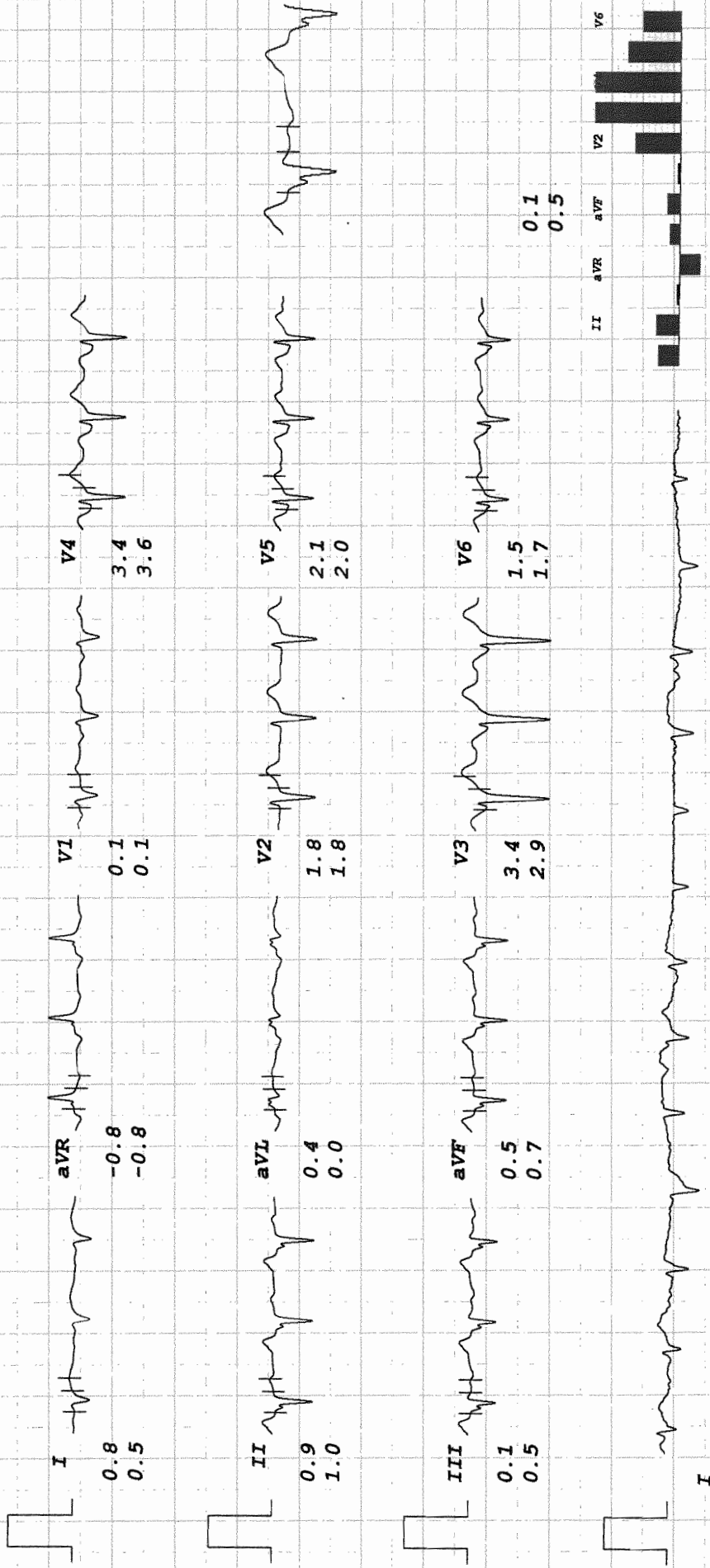
PRETEST
VALSALVA
RATE 119bpm
B.P. 140/90

ST @ 10mm/mV
80ms PostJ

LINKED MEDIAN

Mag. X 2

III



UNI-EM

sanjay adhikari
 I.D. 22322
 Age 38/M
 Date 09/03/2024

RATE 141bpm
 B.P. 140/90

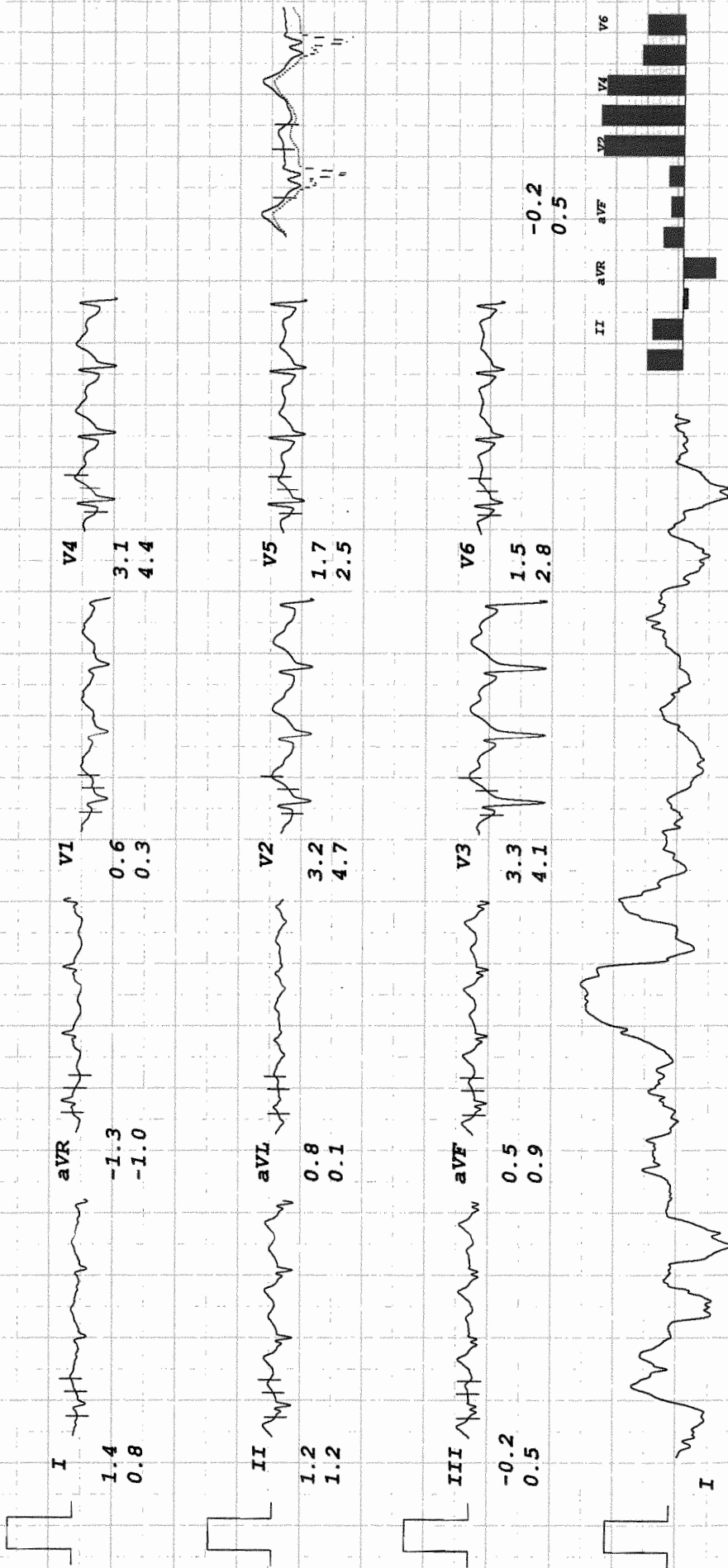
Bruce
 Stage 1
 TOTAL TIME 2:55
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ
 Speed 2.7 km/hr
 SLOPE 10 %

LINKED MEDIAN

Mag. X 2

III



UNI-EM

sanjay adhikari
 I.D. 22322
 Age 38/M
 Date 09/03/2024

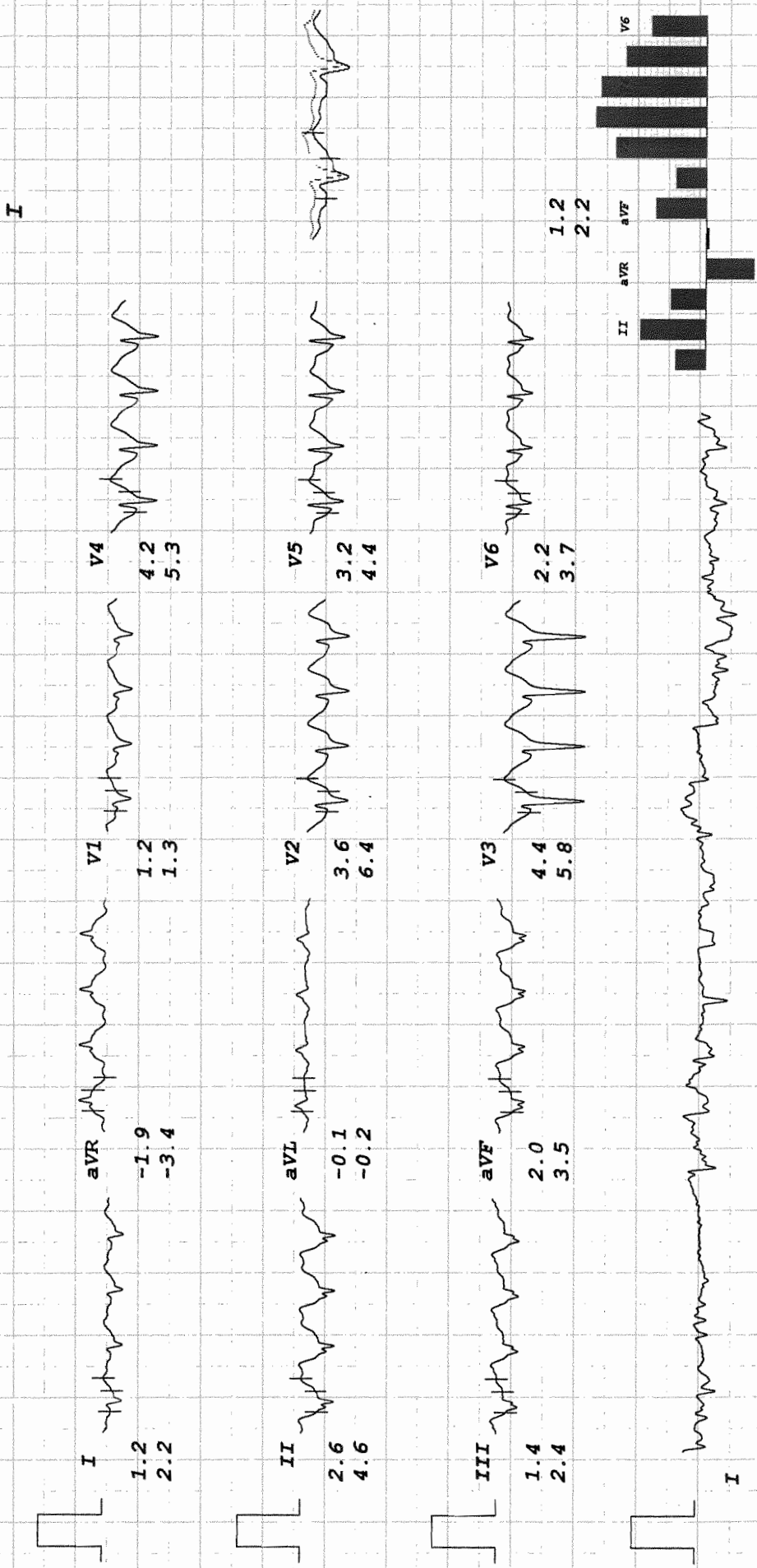
RATE 171bpm
 B.P. 140/80

Bruce
 Stage 2
 TOTAL TIME 5:55
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms Post-J
 Speed 4 km/hr
 SLOPE 12 %

LINKED MEDIAN

Mag. X 2



UNI-EM

sanjay adhikari
I.D. 22322
Age 38/M
Date 09/03/2024

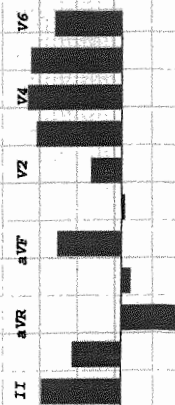
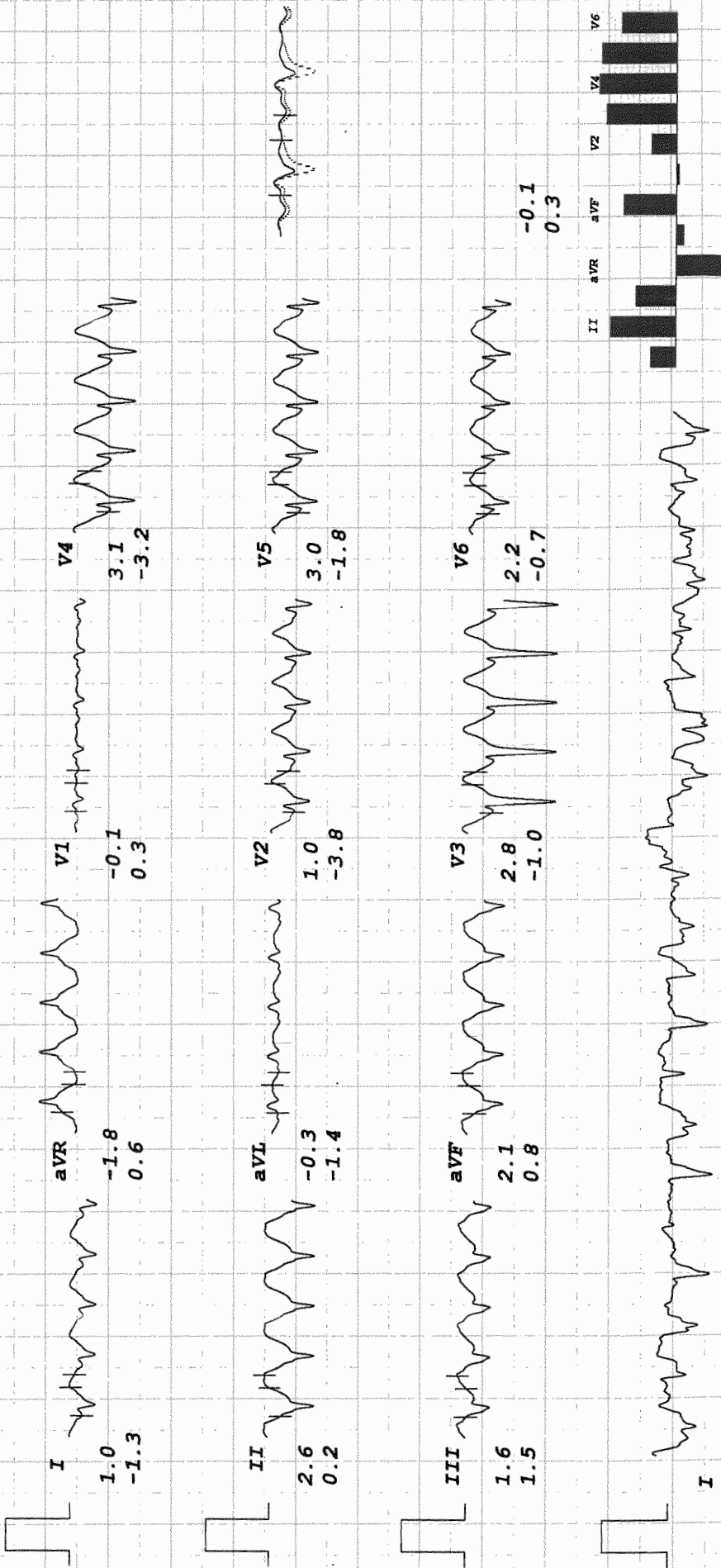
BRUCE
RATE 191bpm
B.P. 140/80

ST @ 10mm/mV
80ms PostJ
Speed 5.4 km/hr
SLOPE 14 %

LINKED MEDIAN

Mag. X 2

V1





Here Healing & Care Comes Naturally

APEX SUPERSPECIALITY HOSPITALS DIAGNOSTICS



CASHLESS
FACILITY

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Borivali (W), Mumbai 400091.
email: info@apexhospitals.in | www.apexgroupofhospitals.com

visit website

googlemap



Tele.:

022 - 2898 6677 / 46 / 47 / 41

UHID : ASH232404548 ID : HC232400016 Date : 09-Mar-2024
Patient : Adhikari Age/Sex : 39/Male Referred By : Rmo
Sanjay
Company :

DIGITAL X-RAY CHEST <PA> VIEW

The lung on either side shows equal translucency and exhibit normal vasculature

The pleural spaces are normal.

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

The cardiac size is normal.

Trachea is central in position and no mediastinal abnormality is visible.

Bony thorax is normal.

IMPRESSION:

- o No significant abnormality.

DR. PANDYA SAUMIL
MD,D.N.B
RADIOLOGIST