

Name: Vivek Choudhary -
Patient ID

09.03.2024 12:03:14
Standard 12-Lead

Eastham Diagnostic & MRI Centre
110, Subhash Marg, Indira Nagar, Mandwa, Mumbai
(Maharashtra (Pun))

Name: Patient

Date of birth: 23.12.1983
Gender: Male
Height:
Weight:
Ethnicity:
Patient status:
Indication:
Remarks:

Visit ID:
Room:
Medication:
Order ID:
Ord. prov:
Ord. prot.:

Center:

HR: 77 bpm
P axis: 20
QRS axis: 65
T axis: 50

RR: 78
PR: 124 ms
QRS: 86 ms
QT: 351 ms
QTcB: 307 ms

Sinus rhythm
Normal electrical axis
Normal ECG
Unshortened report

Date of
Center:
Height:
Weight:
Ethnic:
Patient:
Indication:
Remarks:



25 mm/s 10 mm/mV
AT-102 CG 1.2.0 (1000-000831)

Printed on: 09.03.2024 12:03:49

LP25HE AC 50 25
LP25HE AC 50 25
Page 1/10



RAJSTHANI DIAGNOSTIC & MR CENTRE

FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI

CT SCAN

TMT

SONOGRAPHY

X-RAY

ECG

MAMOGRAPHY

NAME	VIVEK CHOUDHARY	AGE-	SEX: M
REF/BY:	UNION BANK OF INDIA HEALTH CHECKUP	DATE	9-Mar-24

ULTRASONOGRAPHY WHOLE ABDOMEN

Liver: is normal in size, shape and echotexture. No IHBR dilatation is seen. No focal mass seen. Portal vein and hepatic veins are normal in diameter. Common bile duct is normal in diameter and lumen is clear.

Gall bladder: is normal in size shape, location with echo free lumen. Wall thickness is normal. No echogenic shadow suggestive of calculus is seen. No focal mass or lesion is seen.

Pancreas: is normal in size, shape and echotexture. No focal mass or lesion is detected. Pancreatic duct is not dilated.

Rt. Kidney: is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

Lt. Kidney: is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

Spleen: is normal in size, regular in shape and echo texture. No focal lesion is seen. Splenic vessels are normal.

Urinary Bladder: is well distended. Outline of bladder is regular. Wall thickness is normal. No focal mass is seen. No echogenic shadow suggestive of calculus is seen.

Prostate: is normal in size, regular in shape and outline. Capsule is intact.

No evidence of ascites is seen. No significant Lymphadenopathy is seen. No obvious bowel pathology is seen. Retroperitoneum including aorta, IVC are unremarkable.

IMPRESSION:

❖ NORMAL SONOGRAPHY STUDY.

Advised: clinicopathological correlation

DR. ANUSHA MAHALAWAT
MD RADIODIAGNOSIS
 Dr. Anusha Mahalawat
 MD (Radiodiagnosis)
 (RMC. 38742/25457)



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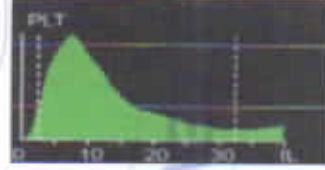
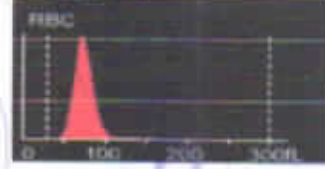


**Hematology Analysis Report**

First Name: VIVEK CHOUDHARY
 Last Name: Sample Type:
 Gender: Male Department:
 Age: 40 Year Med Rec. No.:

Sample ID: 2
 Test Time: 09/03/2024 08:46
 Diagnosis:

Parameter	Result	Ref. Range	Unit
1 WBC	5.02	4.00-10.00	10 ³ /uL
2 Neu%	35.6 L	50.0-70.0	%
3 Lym%	56.7 H	20.0-40.0	%
4 Mon%	4.9	3.0-12.0	%
5 Eos%	2.6	0.5-5.0	%
6 Bas%	0.2	0.0-1.0	%
7 Neu#	1.79 L	2.00-7.00	10 ³ /uL
8 Lym#	2.84	0.80-4.00	10 ³ /uL
9 Mon#	0.25	0.12-1.20	10 ³ /uL
10 Eos#	0.13	0.02-0.50	10 ³ /uL
11 Bas#	0.01	0.00-0.10	10 ³ /uL
12 RBC	4.79	3.50-5.50	10 ⁶ /uL
13 HGB	10.6 L	11.0-16.0	g/dL
14 HCT	37.8	37.0-54.0	%
15 MCV	79.0 L	80.0-100.0	fL
16 MCH	22.1 L	27.0-34.0	pg
17 MCHC	28.0 L	32.0-36.0	g/dL
18 RDW-CV	12.6	11.0-16.0	%
19 RDW-SD	40.8	35.0-56.0	fL
20 PLT	185	100-300	10 ³ /uL
21 MPV	8.9	6.5-12.0	fL
22 PDW	10.1	9.0-17.0	%
23 PCT	0.164	0.108-0.282	%
24 P-LCR	29.0	11.0-45.0	%
25 P-LCC	53	30-90	10 ³ /uL



Dr. Mamta Khuteta
 M.D. (Path.)
 RMC No : 4720/16260

Submitter: Operator: admin Approver:
 Draw Time: 09/03/2024 08:45 Received Time: 09/03/2024 08:45 Validated Time:
 Report Time: 09/03/2024 12:31 Remarks:

*The Report is responsible for this sample only. If you have any questions, please contact us in 24 hours



24/7 SERVICE

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RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

Fully Computerised Pathology Laboratory



MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MEMOGRAPHY

Patient Name: VIVEK CHOUDHARY Sr. No. : 3227 Patient ID No.: 3038 Age : 40 Gender : MALE Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP		Registered on : 09-03-2024 09:11 AM Collected On : 09-03-2024 09:11 AM Received On : 09-03-2024 09:11 AM Reported On : 09-03-2024 12:31 PM Bar Code  LIS Number 2 9 5 6
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HAEMATOLOGY

Test Name	Observed Values	Units	Reference Intervals
ESR (Erythrocyte Sedimentation Rate)	10	mm/hr	20
BLOOD GROUPING (ABO & Rh)	O+ Positive		



Aashish Sethi
 Dr. Aashish Sethi
 24 Specialist Biochemist
 TECHNOLOGIST

Namita Khandelwal
 Dr. Namita Khandelwal
 M.D. (Path.)
 PATHOLOGIST

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MRI

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Patient Name: **VIVEK CHOUDHARY**
 Sr. No. : **3227**
 Patient ID No.: **3038**
 Age : **40** Gender : **MALE**
 Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



Registered on : **09-03-2024 09:11 AM**
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HAEMATOLOGY**HbA1c(Glycosylated hemoglobin)**

Test Name	Observed Values	Units	Reference Intervals
HbA1c(Glycosylated hemoglobin)	4.60	%	< 6.50 Non-Diabetic 6.50 - 7.00 Very Good Control 7.10 - 8.00 Adequate Control 8.10 - 9.00 Suboptimal Control 9.10 - 10.00 Diabetic Poor Control > 10.00 Very Poor Control
eAG (Estimated Average Glucose)	85.32	mg/dL	
eAG (Estimated Average Glucose)	4.74	mmol/L	

Method : Fluorescence Immunoassay Technology**Sample Type : EDTA Blood****Test Performed by:-**
Fully Automated (EM 200) ERBA MANNHEIM.**Remarks :**

Glycosylated Hemoglobin Testing is Recommended for both (a) Checking Blood Sugar Control in People who might be Pre-Diabetic. (b) Monitoring Blood Sugar Control in patients in more elevated levels, termed Diabetes Mellitus. The American Diabetic Association suggests that the Glycosylated Hemoglobin Test be Performed atleast Two Times in Year in Patients with Diabetes that are meeting Treatment Goals (and That have stable glycemic Control) and Quarterly in Patients with Diabetes whos therapy has changed or that are not meeting Glycemic Goals.

Glycosylated Hemoglobin measurement is not appropriate where there has been change in diet or Treatment within 6 Weeks. Hence people with recent Blood Loss, Hemolytic Aneamia, or Genetic Differences in the Hemoglobin Molecule (Hemoglobinopathy) such as Sickle-cell Disease and other Conditions, as well as those that have donated Blood recently, are not suitable for this Test.



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Patient Name: **VIVEK CHOUDHARY**
 Sr. No. : **3227**
 Patient ID No.: **3038**
 Age : **40** Gender : **MALE**
 Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



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eAG (Estimated Average Glucose)	4.74	mmol/L	

Method : Fluorescence Immunoassay Technology

Sample Type : EDTA Blood

Test Performed by:-
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MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MEMOGRAPHY



Patient Name: **VIVEK CHOUDHARY**
Sr. No. : **3227**
Patient ID No.: **3038**
Age : **40** Gender : **MALE**
Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



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BIO-CHEMISTRY

Test Name	Observed Values	Units	Reference Intervals
Glucose Fasting (Method: GOD-POD)	96.00	mg/dL	Glucose Fasting Cord: 45-96 New born, 1d: 40 -60 New born, >1d: 50-80 Child: 60-100 Adult: 74-100 >60 Y: 82-115 >90 Y: 75-121
Blood Sugar PP (Method: GOD-POD)	104.00	mg/dL	Glucose 2 h Postprandial: <120



Ashish Sethi
Dr. Ashish Sethi
MBBS, MD (Path)
Senior Biochemist

Kamini Bhatia
Dr. Kamini Bhatia
MBBS, MD (Path)
Senior Biochemist

TECHNOLOGIST

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Patient Name: **VIVEK CHOUDHARY**
 Sr. No. : **3227**
 Patient ID No.: **3038**
 Age : **40** Gender : **MALE**
 Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



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BIO-CHEMISTRY
KIDNEY FUNCTION TEST

Test Name	Observed Values	Units	Reference Intervals
Blood Urea (Method : Urinary-GLDH)	22.00	mg/dL	Adults Women < 50 years : 13-40 Women > 50 years : 21-43 Men < 50 years : 19-45 Men > 50 years : 18-55 Children 1-3 years : 11-36 4-13 years : 15-36 13-19 years : 18-45
Creatinine (Method : Enzymatic Creatinase)	0.98	mg/dL	0.6-1.30
Calcium	10.24	mg/dL	8.5-11
Uric Acid (Method : Uricase-POD)	5.62	mg/dL	2.4-7.2

Test Name	Observed Values	Units	Reference Intervals
Gamma glutamyl transferase (GGT)	31.20	IU/L	15.0-85.0

Ashish Sethi
 Ashish Sethi
 23 years Biochemist

TECHNOLOGIST

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Manish Chahal
 Dr. Manish Chahal
 M.D. (Path.)
 DMC No. : 4733/25



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MRI

CT SCAN

TMT

SONOGRAPHY


X-RAY

ECG

MEMOGRAPHY

Patient Name: **VIVEK CHOUDHARY**
 Sr. No. : **3227**
 Patient ID No.: **3038**
 Age : **40** Gender : **MALE**
 Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



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BIO-CHEMISTRY

Liver Function Test

Test Name	Observed Values	Units	Reference Intervals
SGOT/AST(Tech.: -UV Kinetic)	20.00	U/L	5-40
SGPT/ALT(Tech.: -UV Kinetic)	31.00	U/L	5-40
Bilirubin(Total) (Method: Diazo)	0.95	mg/dL	Adults: 0-2, Cord < 2 Newborns, premature 0-1 day :1-8, 1-2 days : 6-12, 3-5 days : 10-14 Newborns, full term 0-1 day: 2-6, 1-2 days : 6-10, 3-5 days : 4-8
Bilirubin(Direct)	0.22	mg/dL	0-0.3
Bilirubin(Indirect)	0.73	mg/dL	0.1-1.0
Total Protein (Method: BIURET Method)	7.01	g/dL	Adults : 6.4 - 8.3 Premature : 3.6 - 6.0 Newborn : 4.5 - 7.0 1 Week : 4.4 - 7.6 7-12 months : 5.1 - 7.3 1-2 Years : 5.6 - 7.5 > 2 Years : 6.0 - 8.0
Albumin(Tech.: -BCG) (Method: BCG)	3.96	gm/dL	0-4 days: 2.8-4.4 4d-14 yrs: 3.8-5.4 14y-18y : 3.2-4.5 Adults 20-60 yrs: 3.5-5.2 60-90 yrs: 3.2-4.6
Globulin(CALCULATION)	3.05	gm/dL	2.5-4.5
A/G Ratio(Tech.: -Calculated)	1.30		1.2 - 2.5
Alkaline Phosphatase(Tech.: -Pnp Amp Kinetic)	176.00	U/L	108-306



Dr. Anshu Sethi
 Consultant Biochemist

Dr. Manita Shukla
 M.D. (Path.)

Reg. No. : 47307



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MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MEMOGRAPHY


MC - 5348

Patient Name: **VIVEK CHOUDHARY**
 Sr. No. : **3227**
 Patient ID No.: **3038**
 Age : **40** Gender : **MALE**
 Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



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BIO-CHEMISTRY LIPID PROFILE

Test Name	Observed Values	Units	Reference Intervals
Cholesterol (Method : CHOD-PAP)	H 204.00	mg/dL	Adults- Desirable: <200 Borderline: 200-239 High: >239 Children- Desirable: <170 Borderline: 170-199 High: >199
HDL Cholesterol	49.62	mg/dL	35-65
Triglycerides (Method : GPO)	H 181.00	mg/dL	Recommended triglycerides levels for adults: Normal: <161 High: 161-199 Hypertriglycerdemic: 200-499 Very high: >499
LDL Cholesterol	118.18	mg/dL	10-150
VLDL Cholesterol	36.20	mg/dL	0-40



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MRI

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MC - 5348

Patient Name: **VIVEK CHOUDHARY**
 Sr. No. : **3227**
 Patient ID No.: **3038**
 Age : **40** Gender : **MALE**
 Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



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THYROID HORMONES T3,T4,TSH (THYROID PROFILE)

Test Name	Observed Values	Units	Reference Intervals
T3 (Total Triiodothyronine)	0.92	ng/ML	0.5 - 1.5 ng/ML
T4 (TotalThyroxine)	8.52	µg/dL	4.60-12.50 µg/dL
TSH (Thyroid Stimulating Hormone)	1.44	µIU/mL	0.35 -- 5.50 µIU/mL

Sample Type : **Serum**

Test Performed by:-

Fully Automated Chemi Luminescent Immuno Assay (**ARCHITECT- I1000 PLUS**) Abbott USA**Remarks :**

Primary malfunction of the Thyroid gland may result in excessive (hyper) or Low (hypo) release of T3 or T4. In addition, as TSH directly affect thyroid function, malfunction of the pituitary or the hypothalamus influences the thyroid gland activity.

Disease in any portion of the thyroid-pituitary-hypothalamus system may influence the level of T3 and T4 in the blood, in Primary Hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels may be low. In addition, in Euthyroid sick syndrome, multiple alterations in serum thyroid function test findings have been recognized.

JHUNJHUNU (RAJ.)



Ashish Sethi
 M.D. (Path.)
 23
 Biochemist

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Wanda Bhatia
 Dr. Wanda Bhatia
 M.D. (Path.)
 47391



Wanda Bhatia
 M.D. (Path.)
 47391
 PATHOLOGIST

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Patient Name: **VIVEK CHOUDHARY**
 Sr. No. : 3227
 Patient ID No.: 3038
 Age : 40 Gender : MALE
 Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



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IMMUNOLOGY

Test Name	Observed Values	Units	Reference Intervals
PSA (Prostate-Specific Antigen)	0.80	ng/mL	NORMAL 0 - 4.00 Borderline 4 - 10 High More than 10.00

Method : **Fluorescence Immunoassay Technology**Sample Type : **Serum / Plasma / Whole Blood****Test Performed by:-****Fully Automated Chemi Luminescent Immuno Assay (ARCHITECT- i1000 PLUS) Abbott USA****SUMMARY:-**

PSA is localized in the cytoplasm of prostatic ductal epithelium and in secretions of the ductal lumina. Because PSA is a secretory protein of the prostate, it can be recovered and purified both from prostatic tissue and from seminal plasma. PSA has been found to be primarily associated with prostate tissue, and elevated serum PSA has been found in patients with prostate cancer, benign prostatic hypertrophy, and inflammatory conditions. Serum PSA alone is not suitable as a screen for prostate cancer because elevated PSA concentrations are also observed in patients with benign prostatic hypertrophy (BPH), nor is it recommended as a guide in disease staging. The combination of PSA measurement and rectal examination with ultrasonography in the event of abnormal findings may provide a better method of detecting prostate cancer than rectal examination alone. PSA determinations can be useful in detecting metastatic or persistent disease in patients following surgical or medical treatment of prostate cancer.



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MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MEMOGRAPHY


Patient Name: **VIVEK CHOUDHARY**
 Sr. No. : **3227**
 Patient ID No.: **3038**
 Age : **40** Gender : **MALE**
 Ref. By Dr : **MEDI-WHEEL HEALTH CHECKUP**



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URINE EXAMINATION URINE COMPLETE

Test Name	Observed Values	Units	Reference Intervals
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PHYSICAL

Quantity		ml	
Colour	Yellow		
Appearance / Transparency	Clear		
Specific Gravity	1.025		
PH	5.5		4.5-6.5

CHEMICAL

Reaction	Acidic		
Albumin	TRACE		
Urine Sugar	Nil		

MICROSCOPIC

Red Blood Cells	Nil	/h.p.f.	
Pus Cells	3-5	/h.p.f.	
Epithelial Cells	1-2	/h.p.f.	
Crystals	Nil	/h.p.f.	
Casts	Nil	/h.p.f.	
Bactria	Nil	/h.p.f.	
Others	Nil	/h.p.f.	

Test Name	Observed Values	Units	Reference Intervals
URINE SUGAR FASTING	Nil		
URINE SUGAR PP	Nil		

<<< END OF REPORT >>>

>>> Results relate only to the sample as received. Kindly correlate with clinical condition. <<<

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NAME : VIVEK CHOUDHARY	AGE 40 /SEX M
REF.BY :BOB HEALTH CHECK UP	DATE: 09.03.2024

X-RAY CHEST PA

- Both lung fields appear normal in under view
- No e/o consolidation or cavitations is seen.
- Both costo-phrenic angles appear clear.
- Cardiac size is within normal limits.
- Both domes of diaphragm appear normal.
- Bony thoracic cage & soft tissue shadow appear normal.

IMPRESSION :- NORMAL X-RAY CHEST (PA)

DR. ANUSHA MAHALAWAT

MD (RADIOLOGIST)

RMC -38742/25457

Dr. Anusha Mahalawat
MD (Radiodiagnosis)
(RMC. 38742/25457)



असततकालीन सेवाएं

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B-110, Subhash Marg, Indira Nagar, Jhunjhunu (Raj.) Ph. No. : 1592-294977

Email:

VIVEK CHOUDHARY / 40 Yrs / M / 179 Cms / 70 Kg
 Date: 09 - 03 - 2024 Technician : MANOJ KUMAR Examined By:

Stage	Time	Duration	Speed(mph)	Elevation	METS	Rate	% THR	BP	RPP	PVC	Comments
Supine	00:21	0:21	00.0	00.0	01.0	084	47 %	122/80	102	00	
Standing	01:25	1:04	00.0	00.0	01.0	080	44 %	122/80	097	00	
HV	02:30	1:05	00.0	00.0	01.0	083	46 %	122/80	101	00	
Warm Up	03:34	1:04	00.0	00.0	01.0	089	49 %	122/80	108	00	
ExStart	04:38	1:04	01.0	00.0	01.0	102	57 %	124/82	126	00	
BRUCE Stage 1	07:38	3:00	01.7	10.0	04.7	126	70 %	128/84	161	00	
BRUCE Stage 2	10:38	3:00	02.5	12.0	07.1	152	84 %	134/86	203	00	
PeakEx	10:41	0:03	02.5	12.0	07.2	152	84 %	134/86	203	00	
Recovery	11:11	0:30	01.1	00.0	04.2	149	83 %	134/86	199	00	
Recovery	11:41	1:00	01.1	00.0	01.2	144	80 %	132/84	190	00	
Recovery	12:41	2:00	00.0	00.0	01.0	127	71 %	130/82	165	00	
Recovery	13:41	3:00	00.0	00.0	01.0	115	64 %	128/82	147	00	
Recovery	14:21	3:40	00.0	00.0	01.0	115	64 %	122/80	140	00	

REPORT :

Sample Name: Stress Test Graded Exercise Treadmill

Description: Chest pain, Chest wall tenderness occurred with exercise.

INDICATIONS: Chest pain.

PROCEDURE DONE: Graded exercise treadmill stress test.

STRESS ECG RESULTS: The initial HR was recorded as 80.0 bpm, and the maximum predicted Target Heart Rate 180.0. The BP increased at the time of generating report as 134/0/86.0 mmHg. The Max Dep went upto 0.3. 0.0 Ectopic Beats were observed during the Test.

The Test was completed because of Test Complete, Heart Rate Achieved.

CONCLUSIONS:

1. Stress test is negative for Ischemia.
2. Chest wall tenderness occurred with exercise.
3. Blood pressure response to exercise is normal.

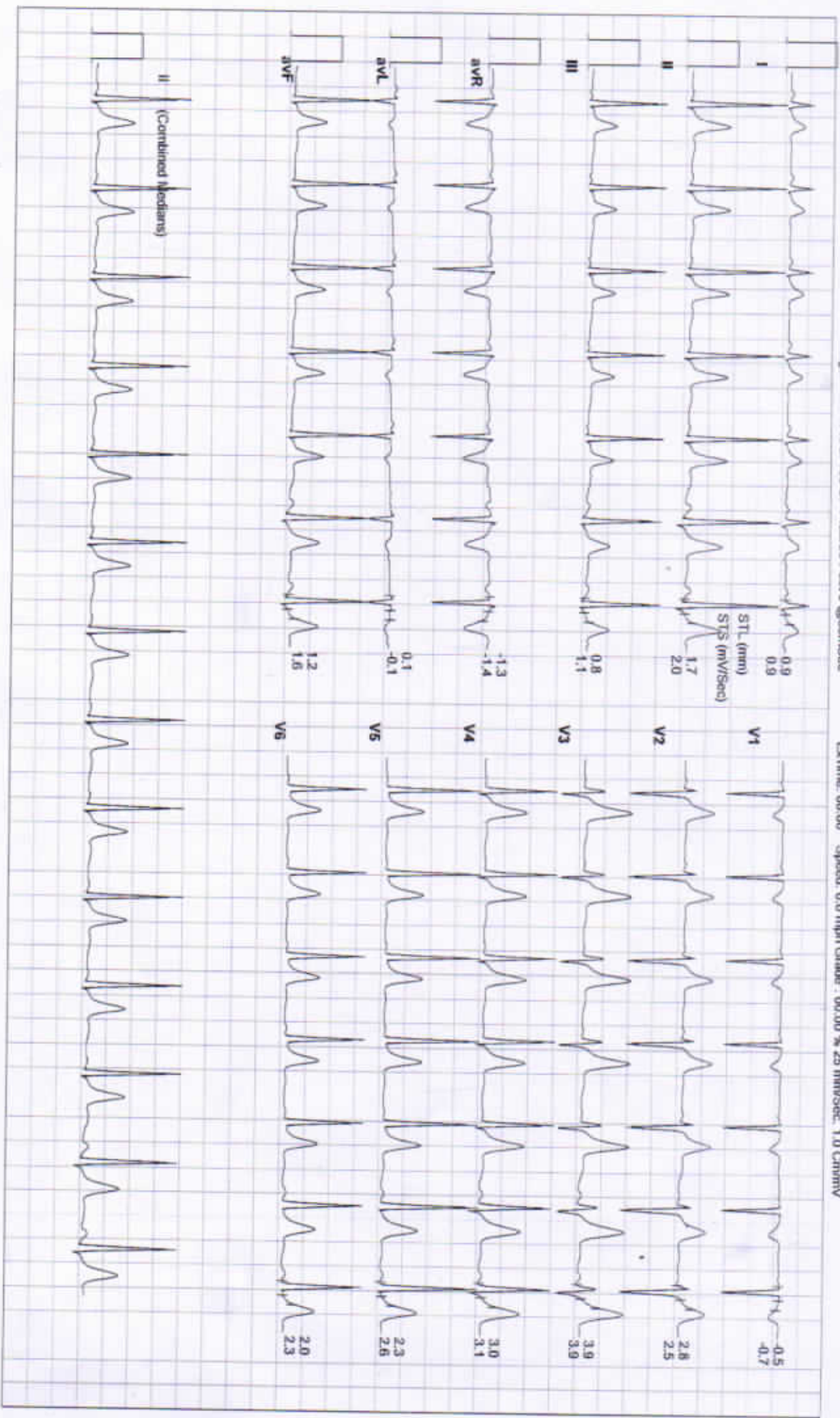
VIVEK CHOUDHARY / 40 Yrs / Male / 179 Cm / 70 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE:Supine(0:21)



Date: 09 - 03 - 2024 METs : 1.0 HR : 84 Target HR : 47% of 180 BP : 122/80 Post J @60mSec

ExTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec: 1.0 Cm/mV



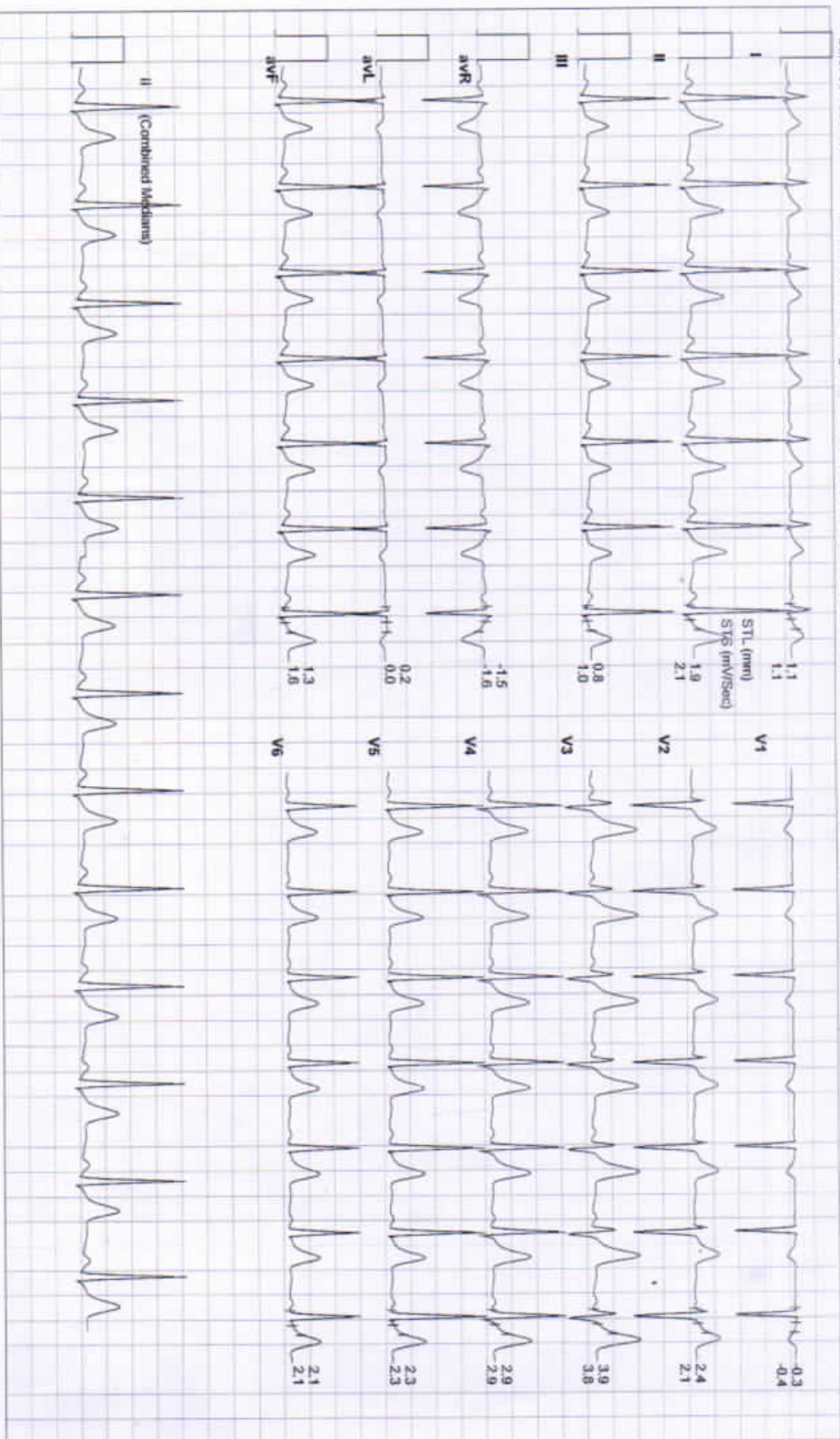
VIVEK CHOUDHARY / 40 Yrs / Male / 179 Cm / 70 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE: Standing(1:04)



Date: 09 - 03 - 2024 METs : 1.0 HR : 80 Target HR : 44% of 180 BP : 122/60 Post J @90mSec

ExTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec: 1.0 Cm/mV



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6X2 Combine Medians + 1 Rhythm

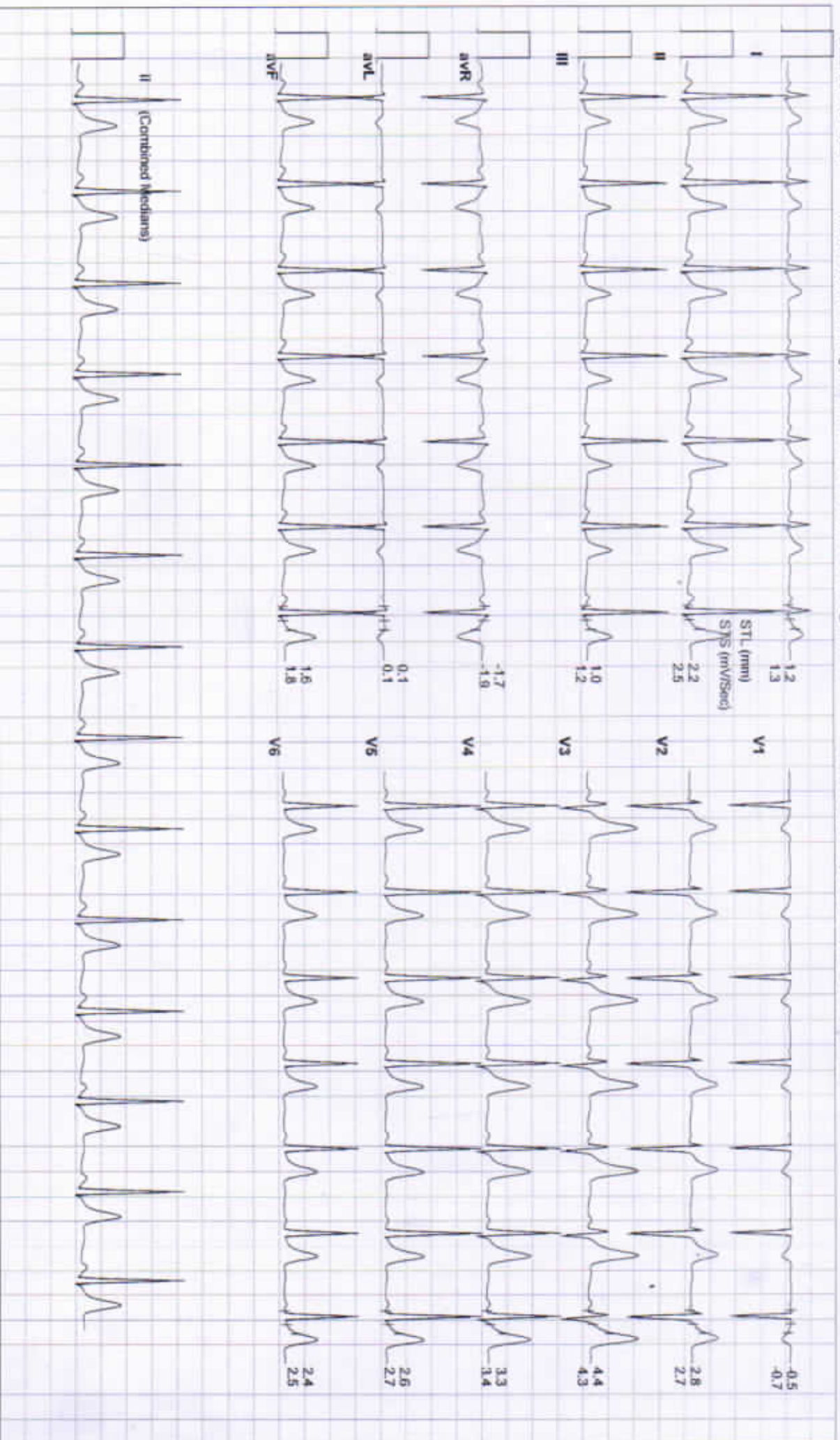
BRUCE:HV(1:05)



Date: 09 - 03 - 2024

METS : 1.0 HR : 83 Target HR : 46% of 180 BP : 122/80 Post J @80mSec

ExTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



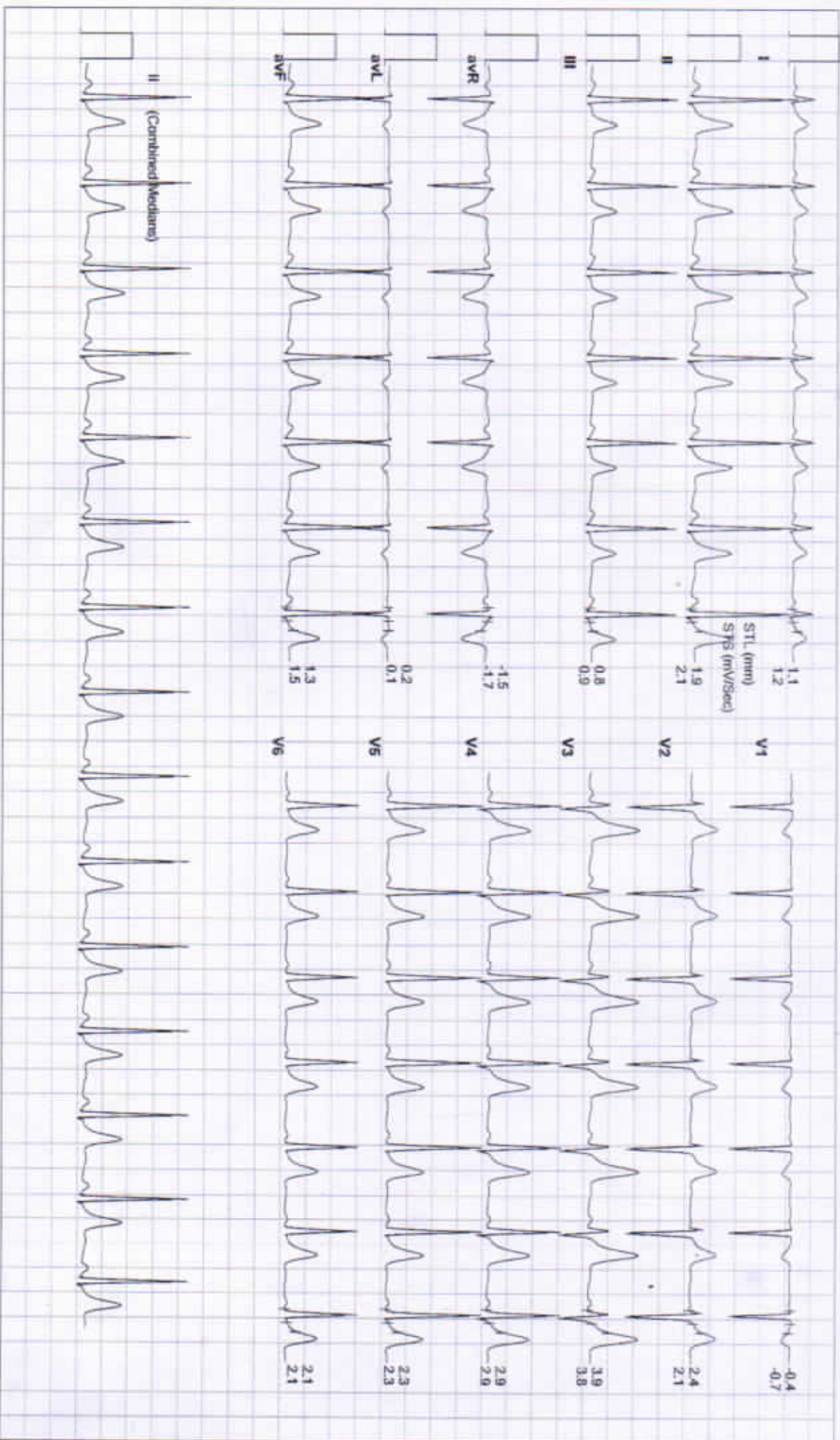
VIVEK CHOUDHARY / 40 Yrs / Male / 179 Cm / 70 Kg

6X2 Combine Medians + 1 Rhythm
BRUCE: Warm Up(1:04)



Date: 09 - 03 - 2024 METs : 1.0 HR : 88 Target HR : 49% of 160 BP : 122/80 Post J @80mSec

ExTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



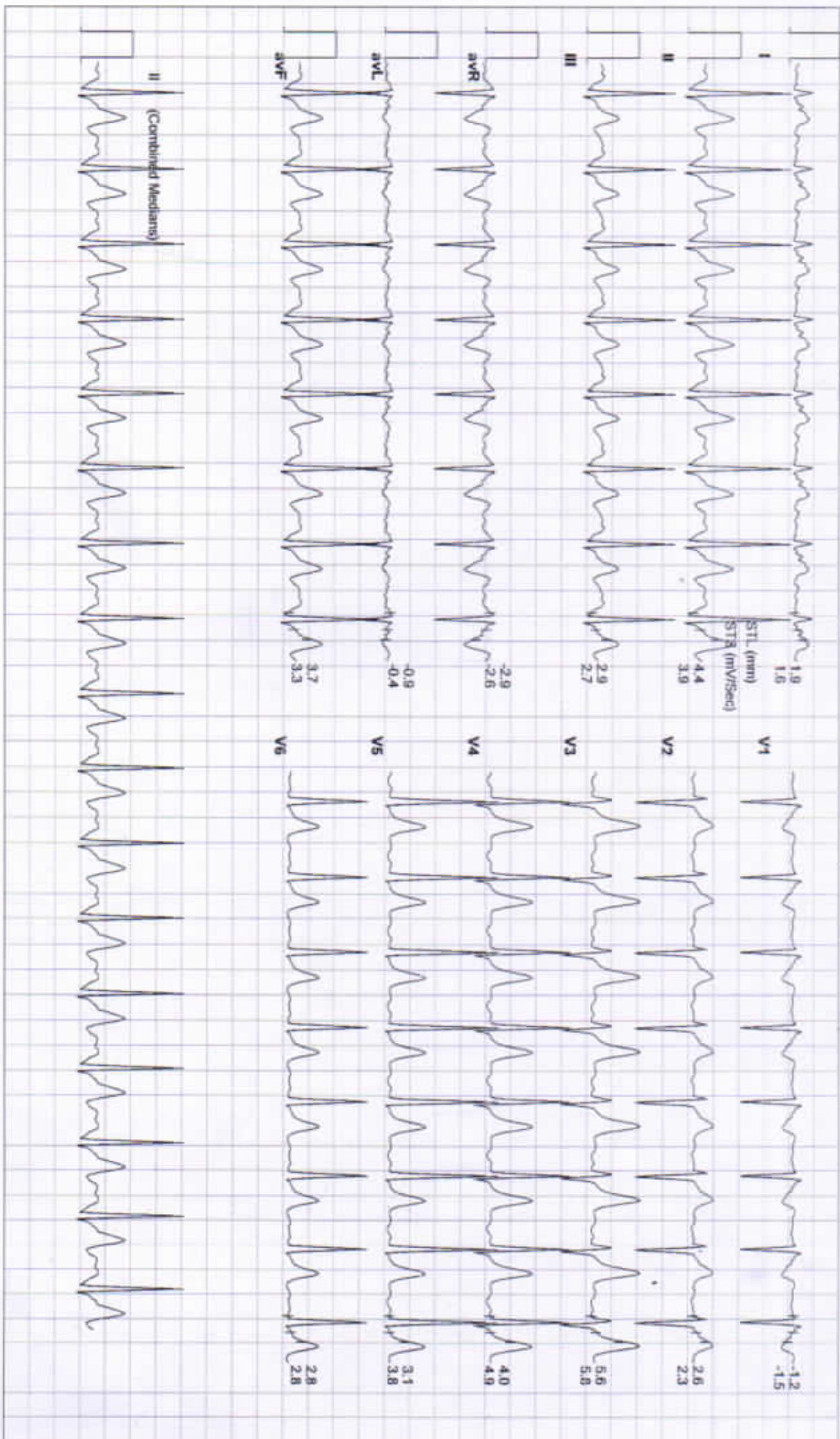
VIVEK CHOUDHARY / 40 Yrs / Male / 179 Cm / 70 Kg

6X2 Combine Medians + 1 Rhythm ExStart



Date: 09 - 03 - 2024 METs : 1.0 HR : 102 Target HR : 57% of 180 BP : 124/62 Post J @80ms/Sec

ExTime: 00:00 Speed: 1.0 mph Grade : 00.00 % 25 mm/Sec: 1.0 Cm/mV



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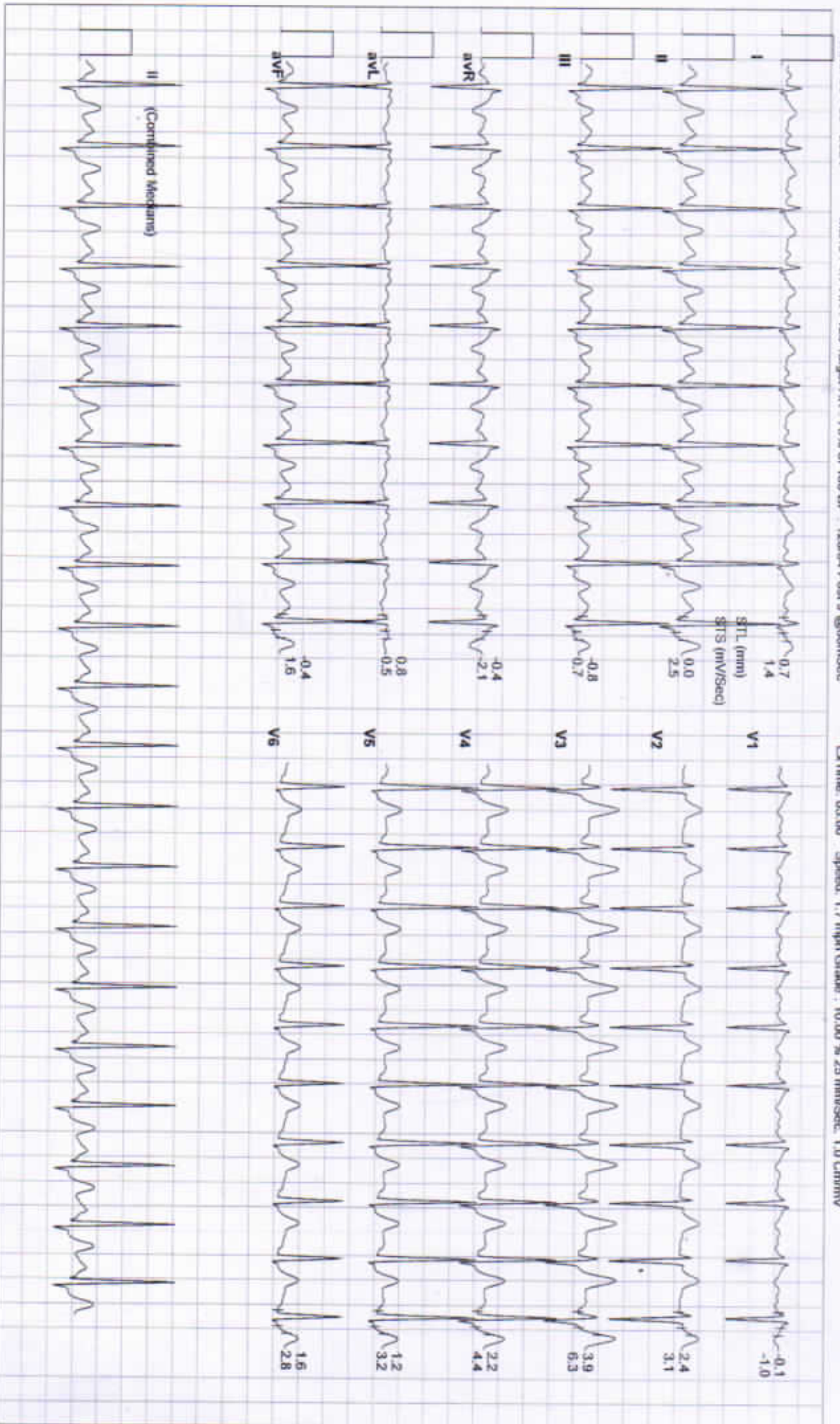
6X2 Combine Medians + 1 Rhythm
BRUCE:Stage 1(3:00)



Date: 08 - 03 - 2024

MEFs : 4.7 HR : 126 Target HR : 70% of 180 BP : 128/84 Post J @60mSec

E-Time: 03:00 Speed: 1.7 mph Grade : 10.00 % 25 mm/Sec. 1.0 Cm/mV



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6X2 Combine Medians + 1 Rhythm
BRUCE: Stage 2(3:00)

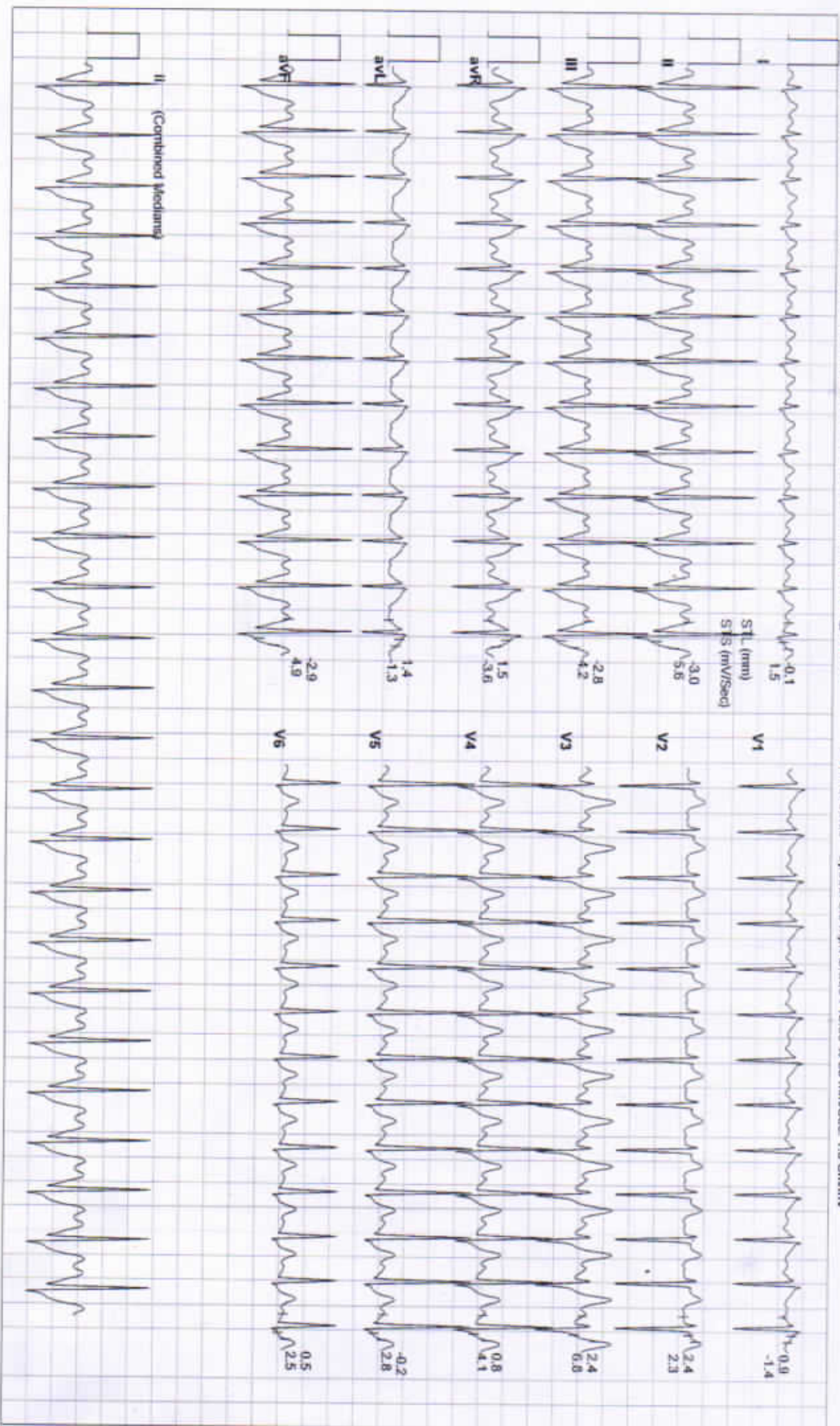


Date: 09 - 03 - 2024

MEts : 7.1 HR : 152 Target HR : 84% of 180 BP : 134/86 Post J @60mSec

ExTime: 05:00

Speed: 2.5 mph Grade : 12.00 % 25 mmVSec 1.0 Cm/mV



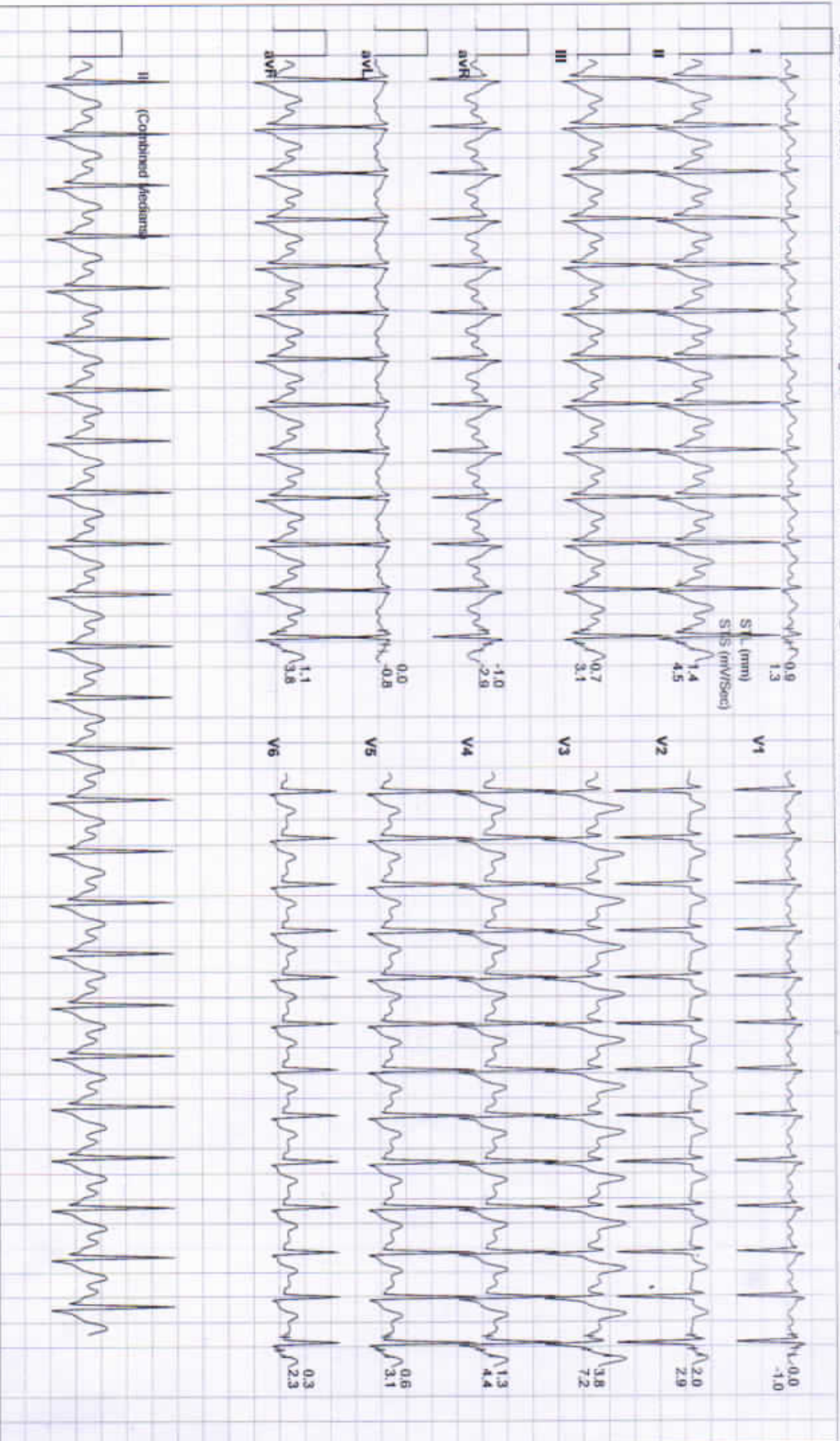
VIVEK CHOUDHARY / 40 Yrs / Male / 179 Cm / 70 Kg

6X2 Combine Medians + 1 Rhythm PeakEx



Date: 09 - 03 - 2024 METS : 7.2 HR : 152 Target HR : 84% of 160 BP : 134/66 Post J @GomSec

ExTime: 06:00 Speed: 2.5 mph Grade : 12.00 % 25 mm²Sec: 1.0 Cm/mV



VIVEK CHOUDHARY / 40 Yrs / Male / 179 Cm / 70 Kg

6X2 Combine Medians + 1 Rhythm
Recovery(0:30)



Date: 09 - 03 - 2024 METs : 4.2 HR : 149 Target HR : 63% of 180 BP : 134/80 Post J @60ms/Sec

ExTime: 06:03 Speed: 1.1 mph Grade : 00.00 % 25 mm/Sec: 1.0 Cm/mV



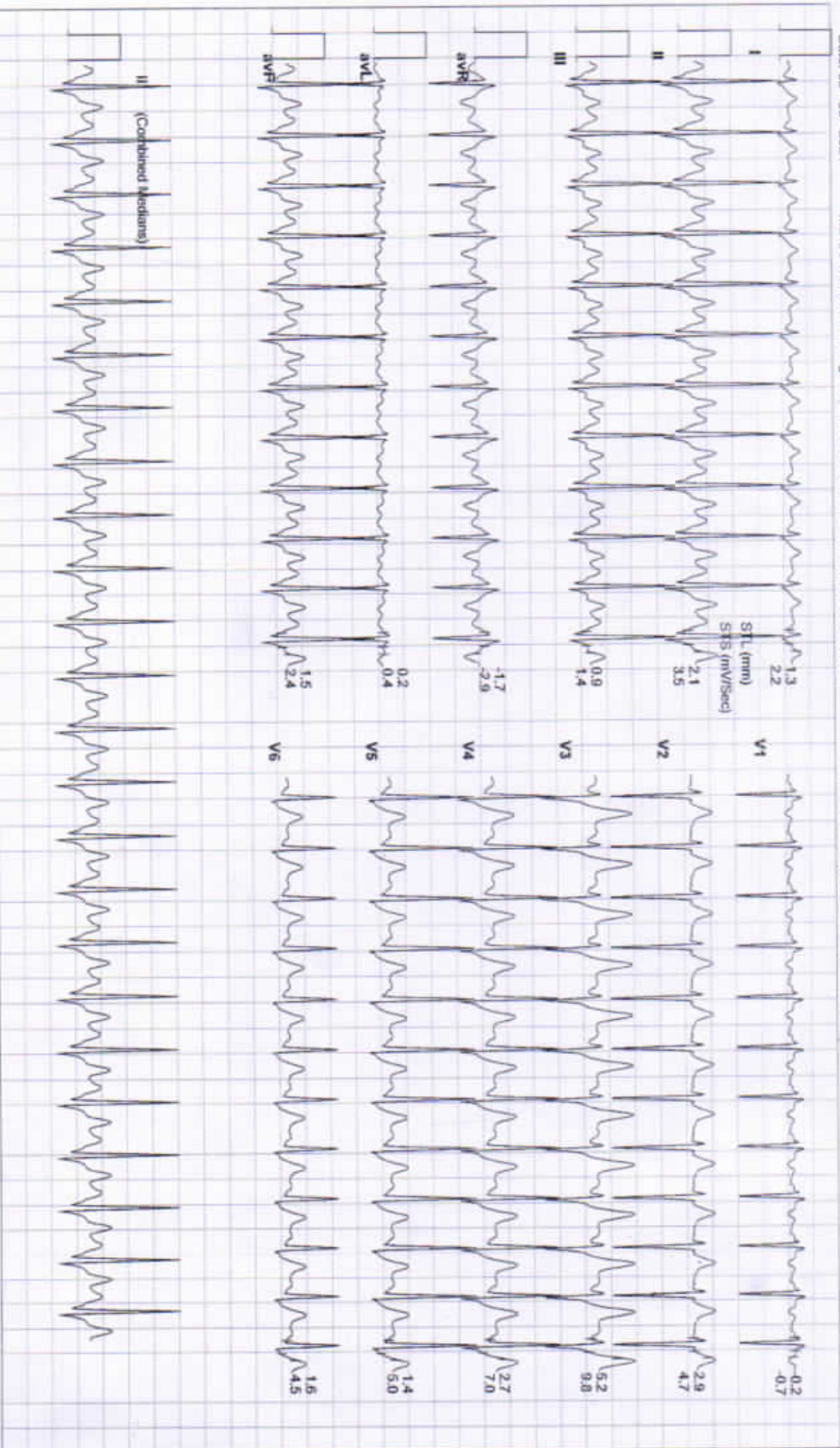
VIVEK CHOUDHARY / 40 Yrs / Male / 179 Cm / 70 Kg

6X2 Combine Medians + 1 Rhythm Recovery(1:00)



Date: 09 - 03 - 2024 METs : 1.2 HR : 144 Target HR : 80% of 180 BP : 132/84 Post J @00h56c

ExTime: 06:03 Speed: 1.1 mph Grade : 00.00 % 25 run/Sec: 1.0 Cm/mV



VIVEK CHOUDHARY / 40 Yrs / Male / 179 Cm / 70 Kg

6X2 Combine Medians + 1 Rhythm Recovery(2:00)

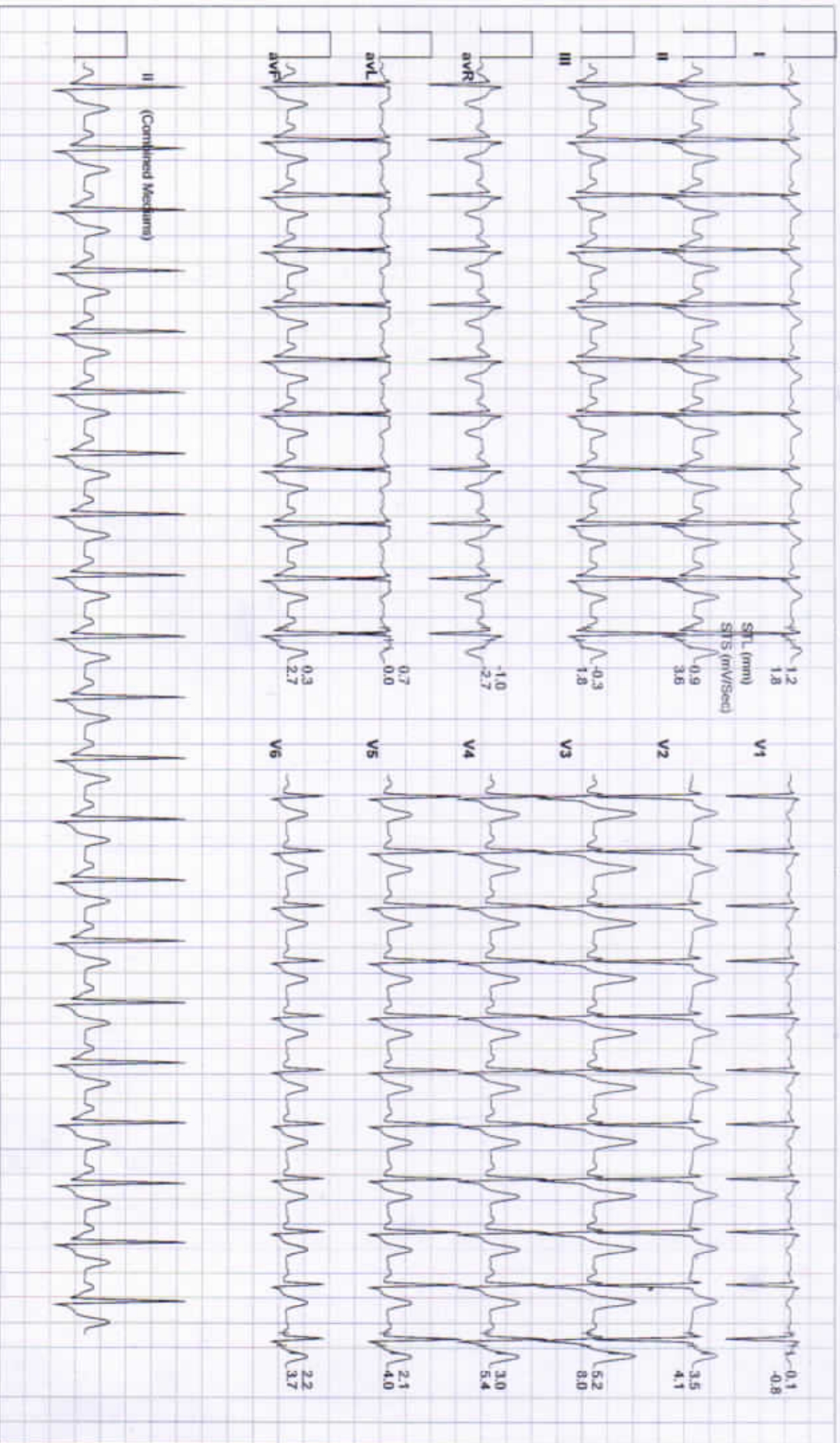


Date: 09 - 03 - 2024

MEts : 1.0 HR : 127 Target HR : 71% of 180 BP : 130/82 Post J @70mSec

ExTime: 06:03

Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec 1.0 Cm/mV



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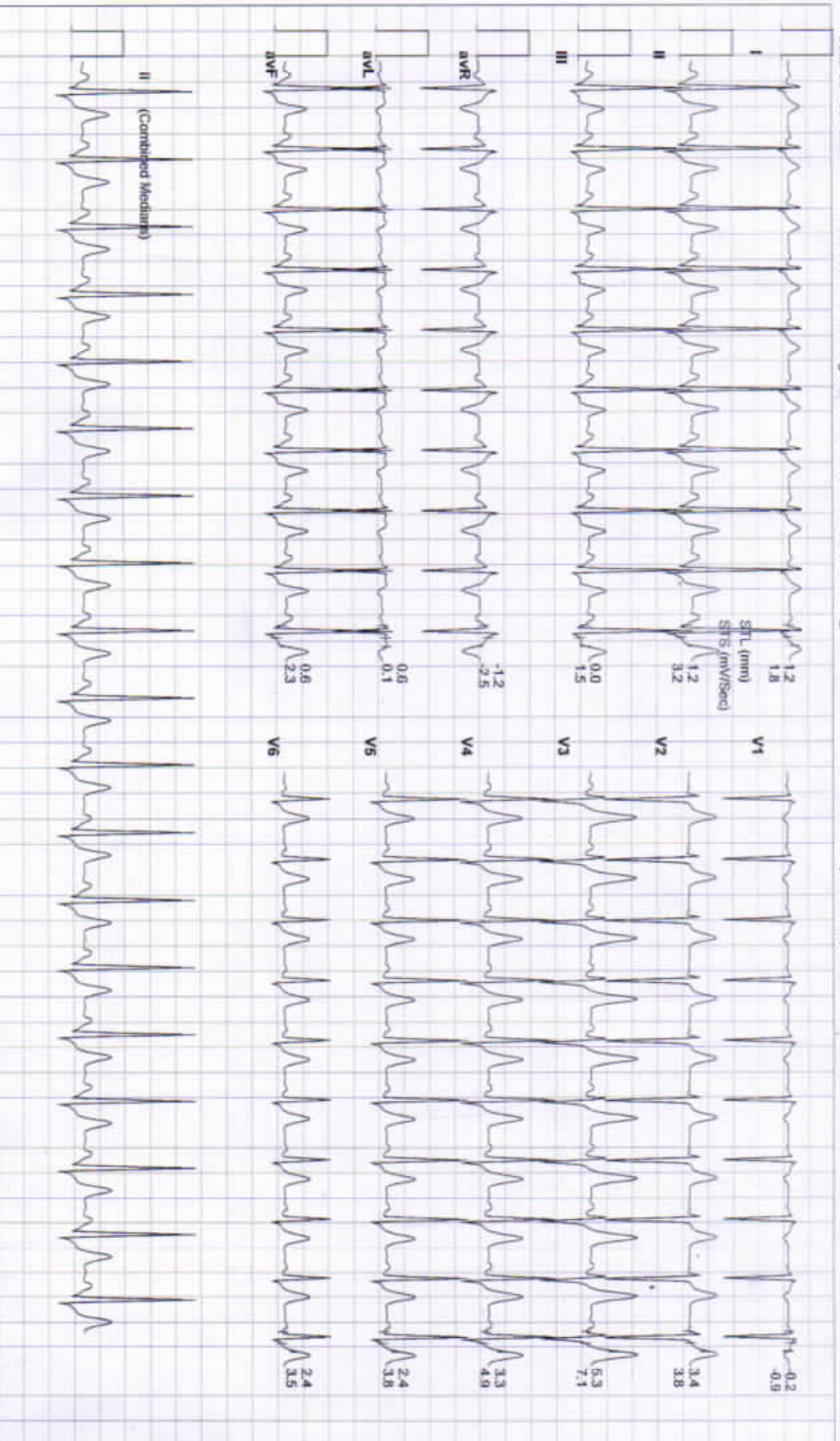
6X2 Combine Medians + 1 Rhythm Recovery(3:00)



Date: 09 - 03 - 2024

METS : 1.0 HR : 115 Target HR : 64% of 180 BP : 128/82 Post J @60mSec

ExTime: 06:03 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec: 1.0 Cm/mV



VIVEK CHOUDHARY / 40 Yrs / Male / 179 Cm / 70 Kg

6X2 Combine Medians + 1 Rhythm Recovery(3:40)



Date: 09 - 03 - 2024

MEFs : 1.0 HR : 115 Target HR : 64% of 180 BP : 122/80 Post J @90mSec

ExtTime: 06:03 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV

