

Name : Mr. SHATRUGHAN PAL
PID No. : MED210014650
SID No. : 522406644
Age / Sex : 43 Year(s) / Male
Type : OP
Ref. Dr : MediWheel

Register On : 27/04/2024 8:52 AM
Collection On : 27/04/2024 9:07 AM
Report On : 28/04/2024 10:28 AM
Printed On : 29/04/2024 12:26 PM

BLOOD GROUPING AND Rh
TYPING

'A' 'Positive'

(EDTA Blood/Agglutination)

INTERPRETATION:Note: Slide method is screening method. Kindly confirm with Tube method for transfusion.

Complete Blood Count With - ESR

Haemoglobin (EDTA Blood/Spectrophotometry)	15.1	g/dL	13.5 - 18.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood)	45.9	%	42 - 52
RBC Count (EDTA Blood)	5.28	mill/cu.mm	4.7 - 6.0
Mean Corpuscular Volume(MCV) (EDTA Blood)	86.9	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood)	28.6	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood)	32.9	g/dL	32 - 36
RDW-CV	15.0	%	11.5 - 16.0
RDW-SD	46.8	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood)	6200	cells/cu.mm	4000 - 11000
Neutrophils (Blood)	51.0	%	40 - 75
Lymphocytes (Blood)	36.0	%	20 - 45
Eosinophils (Blood)	2.7	%	01 - 06
Monocytes (Blood)	9.2	%	01 - 10



APPROVED BY

The results pertain to sample tested.

Page 1 of 10

Lab Address: BANGALORE REFERENCE LABORATORY-CLUMAX DIAGNOSTIC AND RESEARCH CENTRE
PVT LTD. (A UNIT OF MEDALL HEALTHCARE PVT. LTD.).Old No66 & New No 1. 2nd Main Road. Bashvam Circle

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Basophils (Blood)	1.1	%	00 - 02
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INTERPRETATION: Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.

Absolute Neutrophil count (EDTA Blood)	3.1	$10^3 / \mu\text{l}$	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood)	2.2	$10^3 / \mu\text{l}$	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood)	0.2	$10^3 / \mu\text{l}$	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood)	0.6	$10^3 / \mu\text{l}$	< 1.0
Absolute Basophil count (EDTA Blood)	0.1	$10^3 / \mu\text{l}$	< 0.2
Platelet Count (EDTA Blood)	108	$10^3 / \mu\text{l}$	150 - 450

Remark: Verified on smear.

MPV (Blood)	13.0	fL	7.9 - 13.7
PCT (Automated Blood cell Counter)	0.141	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citratd Blood)	11	mm/hr	< 15
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	86.62	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: \geq 126

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose, Fasting (Urine) (Urine - F/GOD - POD)	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP)	117.17	mg/dL	70 - 140



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INTERPRETATION:

Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti-diabetic medication during treatment for Diabetes.

Urine Glucose(PP-2 hours) (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	11.2	mg/dL	7.0 - 21
Creatinine (Serum/Modified Jaffe)	1.27	mg/dL	0.9 - 1.3

INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin ,cefazolin, ACE inhibitors ,angiotensin II receptor antagonists,N-acetylcyteine , chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Enzymatic)	7.51	mg/dL	3.5 - 7.2
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Liver Function Test

Bilirubin(Total) (Serum/DCA with ATCS)	0.42	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.12	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.30	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	39.45	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	103.83	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	38.26	U/L	< 55
Alkaline Phosphatase (SAP) (Serum/Modified IFCC)	62.6	U/L	53 - 128



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Total Protein (Serum/Biuret)	7.13	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.55	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.58	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.76		1.1 - 2.2

Lipid Profile

Cholesterol Total (Serum/CHOD-PAP with ATCS)	247.90	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	204.86	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

INTERPRETATION: The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the "usual" circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immunoinhibition)	41.26	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	165.6	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	41	mg/dL	< 30



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Non HDL Cholesterol (Serum/Calculated)	206.6	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220
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INTERPRETATION: 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.
 2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	6		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
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Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	5		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
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LDL/HDL Cholesterol Ratio (Serum/Calculated)	4		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
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Glycosylated Haemoglobin (HbA1c)

HbA1C (Whole Blood/HPLC)	5.2	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5
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INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

Estimated Average Glucose (Whole Blood)	102.54	mg/dL	
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INTERPRETATION: Comments

HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glyceemic control as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.

Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

Prostate specific antigen - Total(PSA) (Serum/Manometric method)	0.863	ng/ml	Normal: 0.0 - 4.0 Inflammatory & Non Malignant conditions of Prostate & genitourinary system: 4.01 - 10.0 Suspicious of Malignant disease of Prostate: > 10.0
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THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/ECLIA)	0.804	ng/ml	0.7 - 2.04
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INTERPRETATION:

Comment :

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Tyroxine) - Total (Serum/ECLIA)	4.37	µg/dl	4.2 - 12.0
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INTERPRETATION:

Comment :

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

TSH (Thyroid Stimulating Hormone) (Serum/ECLIA)	2.35	µIU/mL	0.35 - 5.50
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INTERPRETATION:

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5

2 nd trimester 0.2-3.0

3 rd trimester : 0.3-3.0

(Indian Thyroid Society Guidelines)

Comment :

1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.

2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.

3.Values&lt;0.03 μ IU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

PHYSICAL EXAMINATION (URINE

COMPLETE)

Colour (Urine)	Yellow	Yellow to Amber
Appearance (Urine)	Clear	Clear
Volume(CLU) (Urine)	20	

CHEMICAL EXAMINATION (URINE

COMPLETE)

pH (Urine)	5	4.5 - 8.0
Specific Gravity (Urine)	1.019	1.002 - 1.035
Ketone (Urine)	Negative	Negative
Urobilinogen (Urine)	Normal	Normal
Blood (Urine)	Negative	Negative
Nitrite (Urine)	Negative	Negative



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Bilirubin (Urine)	Negative	Negative
Protein (Urine)	Negative	Negative
Glucose (Urine/GOD - POD)	Negative	Negative
Leukocytes(CP) (Urine)	Negative	

MICROSCOPIC EXAMINATION
(URINE COMPLETE)

Pus Cells (Urine)	0-1	/hpf	NIL
Epithelial Cells (Urine)	0-1	/hpf	NIL
RBCs (Urine)	NIL	/hpf	NIL
Others (Urine)	NIL		

INTERPRETATION:Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.

Casts (Urine)	NIL	/hpf	NIL
Crystals (Urine)	NIL	/hpf	NIL



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BUN / Creatinine Ratio

8.8

6.0 - 22.0



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Ref. Dr : MediWheel

URINE ROUTINE



APPROVED BY

-- End of Report --

Name	MR.SHATRUGHAN PAL	ID	MED210014650
Age & Gender	43Y/MALE	Visit Date	27 Apr 2024
Ref Doctor Name	MediWheel		

ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in shape, size (15.0cms) and has increased echogenicity. No evidence of focal lesion or intrahepatic biliary ductal dilatation. Hepatic and portal vein radicals are normal.

GALL BLADDER is partially distended.
CBD is not dilated.

PANCREAS Head appears normal. Rest of the pancreas is obscured by bowel gas shadows. No evidence of ductal dilatation or calcification.

SPLEEN shows normal shape, size (9.0cms) and echopattern.

BOTH KIDNEYS

Right kidney: Normal in shape, size and echopattern. Cortico-medullary differentiation is well madeout. No evidence of calculus or hydronephrosis.

Left kidney: Normal in shape, size and echopattern. Cortico-medullary differentiation is well madeout. No evidence of calculus or hydronephrosis.

The kidney measures as follows:

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	9.7	1.5
Left Kidney	9.2	1.5

URINARY BLADDER shows normal shape and wall thickness. It has clear contents. No evidence of diverticula.

PROSTATE shows normal shape, size and echopattern. It measures 2.4 x 3.0 x 2.9cms, volume: 11cc.

No evidence of ascites.

IMPRESSION:

- **Grade I fatty infiltration of liver.**
- **No other significant abnormality detected.**

DR. VANDANA S
CONSULTANT RADIOLOGIST
Vs/Lr

Name	MR.SHATRUGHAN PAL	ID	MED210014650
Age & Gender	43Y/MALE	Visit Date	27 Apr 2024
Ref Doctor Name	MediWheel		

Name	Mr. SHATRUGHAN PAL	Customer ID	MED210014650
Age & Gender	43Y/M	Visit Date	Apr 27 2024 8:52AM
Ref Doctor	MediWheel		

X - RAY CHEST PA VIEW

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

Impression: No significant abnormality detected.


DR.S.SHWETHA.,MDRD,
CONSULTANT RADIOLOGIST



OPTICAL STORE
THE VISION WORLD

OPTICAL STORE

#12 LAKSHMI NILAYA, GROUND FLOOR,
2ND MAIN ROAD, VYALIKAVAL,
BENGALURU-560003
PH. 9611444957

Name Shoban Vishan Pal

Ph. 7762850842

Age 43 M

Chief Complaints

RE / LE / DOV / Blurring / Burning / Itching / Pricking
Redness / Headache - Nil

Past History

DM -ve
HTN -ve

Asthama -ve
Others - Nil

Visual Acuity

	RE	LE
Distance / Near	6/6	6/6
With PH		
With Glasses	+	

Colour Vision BE = Normal

	RE			LE		
	SPH	CYL	AXIS	SPH	CYL	AXIS
Distance	<u>Plano 6/6</u>			<u>Plano 6/6</u>		
Near			<u>ADD</u>	<u>+1.25</u>		

NG (R/S)

Advise

RAVILKUMAR H. L.
Registered Optician
(Comp. Reg. No. 000619)

Patient Name	Shatrughan.	Date	27/04/24.
Age	43.	Visit Number	
Sex	Male.	Corporate	

GENERAL PHYSICAL EXAMINATION

Identification Mark :

Height : 166 cms
 Weight : 76.6 kgs
 Pulse : 74 /minute
 Blood Pressure : 120/70 mm of Hg

BMI :

BMI INTERPRETATION

Underweight = <18.5
Normal weight = 18.5-24.9
Overweight = 25-29.9

Chest :

Expiration : 97 cms

Inspiration : 100 cms

Abdomen Measurement : 99 cms

Eyes : Normal. Ears : Normal.

Throat : Normal Neck nodes : Not palpable.

RS: N V B C ⊕ CVS: S1 S2 ⊕. No added sounds

PA : soft, NAD CNS: conscious, Oriented.

No abnormality is detected. His / her general physical examination is within normal limits.

NOTE : MEDICAL FIT FOR EMPLOYMENT YES / NO

Signature

Dr. RITESH RAJ, MBBS
 General Physician & Diabetologies
 KMC Reg. No: 85875
 CI UMAX DIAGNOSTICS

Shatrughan pat
ID: 210014650

Male

43 Years

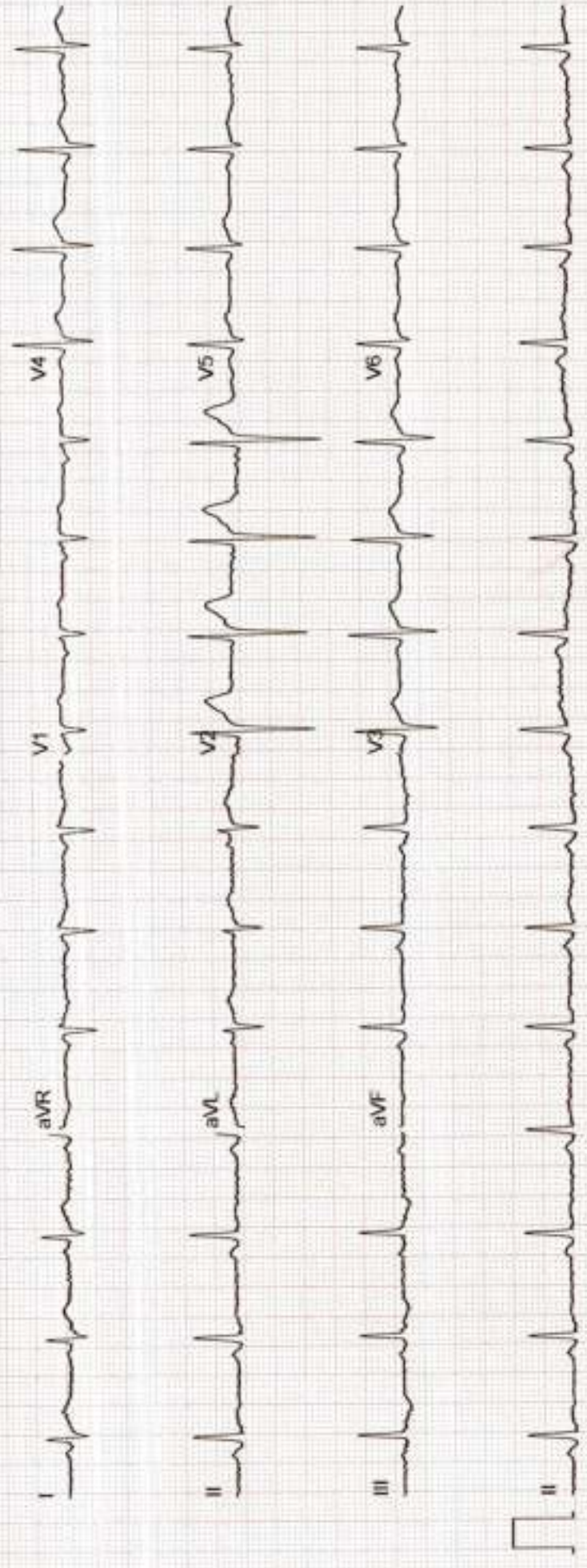
27.04.2024 9:55:43
CLUMAX DIAGNOSTICS
VYALIKAVAL
BANGALORE

90 bpm
- / - mmHg

Sinus rhythm with short PR
Nonspecific T wave abnormality
Abnormal ECG

QRS : 82 ms
QT / QTcBaz : 338 / 413 ms
PR : 100 ms
P : 72 ms
RR / PP : 664 / 666 ms
P / QRS / T : 52 / 87 / 25 degrees

MR



MEDALL CLUMAX DIAGNOSTICS
VYALIKAVAL
BANGALORE

EXERCISE STRESS TEST REPORT

Patient Name: MR SHATRUGHAN PAL, MEDIWHEEL DOB: 08.08.1980
Patient ID: MED210014650 Age: 43yrs
Height: Gender: Male
Weight: Race:

Study Date: 28.04.2024 Referring Physician: --
Test Type: -- Attending Physician: --
Protocol: BRUCE Technician: --

Medications:

--

Medical History:

--

Reason for Exercise Test:

--

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:17	0.00	0.00	89	120/80	
EXERCISE	STAGE 1	03:00	1.70	10.00	136	130/80	
	STAGE 2	03:00	2.50	12.00	157	150/90	
	STAGE 3	00:19	3.40	14.00	164	160/90	
	RECOVERY		04:03	0.00	0.00	103	130/80

The patient exercised according to the BRUCE for 6:18 min:s, achieving a work level of Max. METS: 7.90. The resting heart rate of 101 bpm rose to a maximal heart rate of 164 bpm. This value represents 92 % of the maximal, age-predicted heart rate. The resting blood pressure of 120/80 mmHg, rose to a maximum blood pressure of 160/90 mmHg. The exercise test was stopped due to Target heart rate achieved.

Interpretation

Summary: Resting ECG: normal.
Functional Capacity: normal.
HR Response to Exercise: appropriate.
BP Response to Exercise: normal resting BP - appropriate response.
Chest Pain: none.
Arrhythmias: none.
ST Changes: none.
Overall impression: Normal stress test.

Conclusions

IMPRESSION: STRESS TEST IS NEGATIVE FOR INDUCIBLE ISCHEAMIA

DR. YASHODHA RAVI
CONSULTANT CARDIOLOGIST

Physician

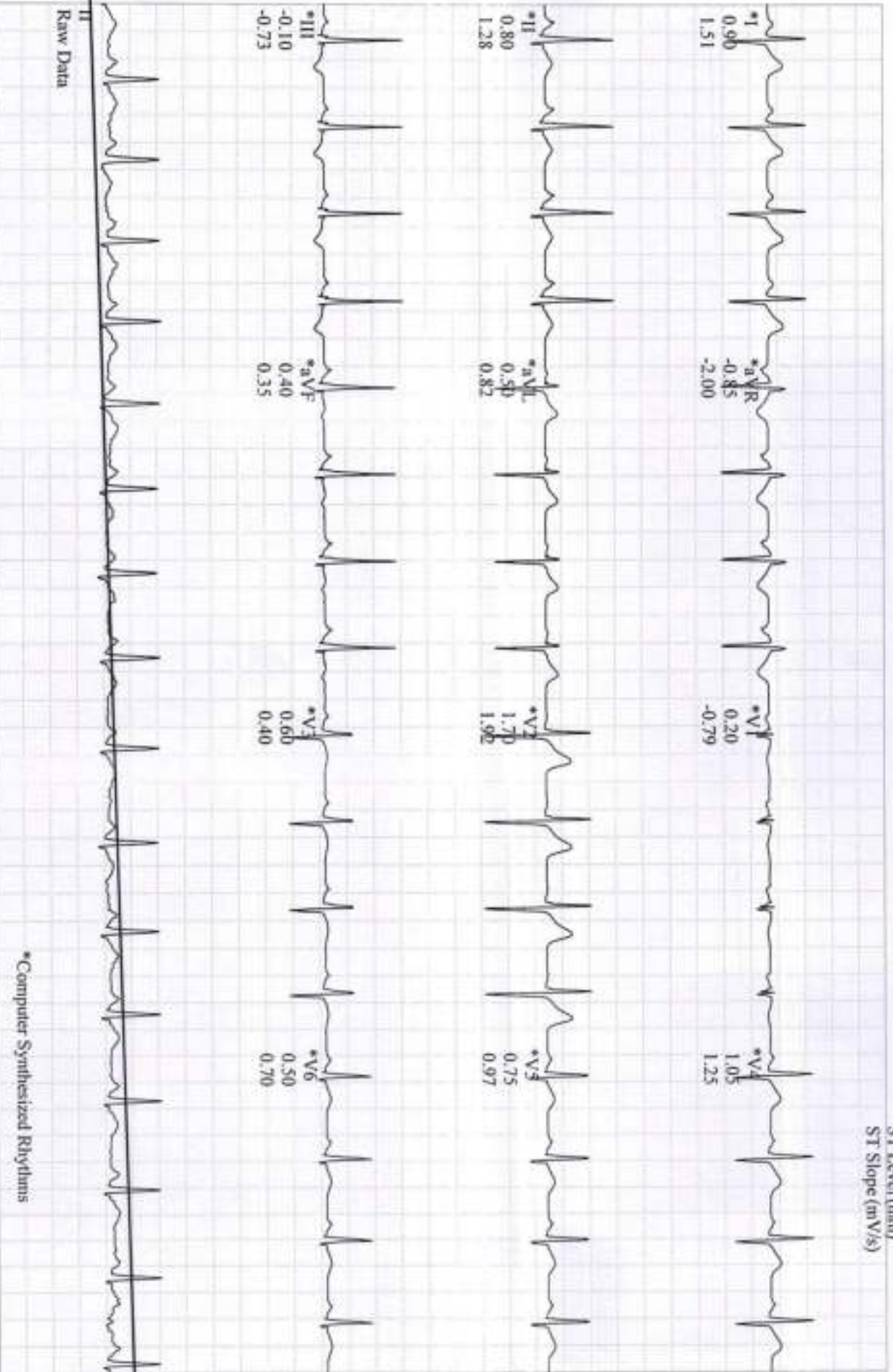
Technician

BASELINE EXERCISE	MAX. ST EXERCISE	PEAK EXERCISE	TEST END RECOVERY	BASELINE EXERCISE	MAX. ST EXERCISE	PEAK EXERCISE	TEST END RECOVERY
89 bpm 120/80 mmHg	164 bpm 160/90 mmHg	164 bpm 160/90 mmHg	102 bpm	89 bpm 120/80 mmHg	164 bpm 160/90 mmHg	164 bpm 160/90 mmHg	102 bpm
I 0.85 mm 1.66 mV/s	I 0.65 1.92	I 0.65 1.92	I 0.20 1.13	V1 0.25 -0.69	V1 0.00 -0.73	V1 0.00 -0.73	V1 0.40 -0.45
II 0.80 1.22	II -0.80 1.56	II -0.80 1.56	II -0.25 0.55	V2 1.70 1.89	V2 0.85 2.07	V2 0.85 2.07	V2 0.90 1.33
III -0.05 -0.77	III -1.50 -0.53	III -1.50 -0.53	III -0.45 -0.69	V3 0.60 0.35	V3 -0.35 0.69	V3 -0.35 0.69	V3 0.40 0.44
aVR -0.80 -1.87	aVR 0.15 -1.70	aVR 0.15 -1.70	aVR 0.00 -1.15	V4 1.05 1.25	V4 -0.15 1.67	V4 -0.15 1.67	V4 0.50 0.89
aVL 0.40 0.81	aVL 1.10 1.14	aVL 1.10 1.14	aVL 0.30 0.67	V5 0.75 0.94	V5 -0.35 1.56	V5 -0.35 1.56	V5 0.10 0.54
aVF 0.35 0.31	aVF -1.15 0.50	aVF -1.15 0.50	aVF -0.35 -0.08	V6 0.45 0.75	V6 -0.55 0.95	V6 -0.55 0.95	V6 -0.15 0.25

GE CardioSoft V6.73 (2)
10mm/mV 50Hz 0.01-20Hz S+ HEART V5.4

Unconfirmed

Attending MD:



Raw Data

Lead
ST Level (mm)
ST Slope (mV/s)

*Computer Synthesized Rhythms

MR SHATRUGHAN PAL, MEDIWHEEL

Patient ID MED210014650

28.04.2024

12:20:25pm

Linked Medians

EXERCISE

STAGE 2

05:50

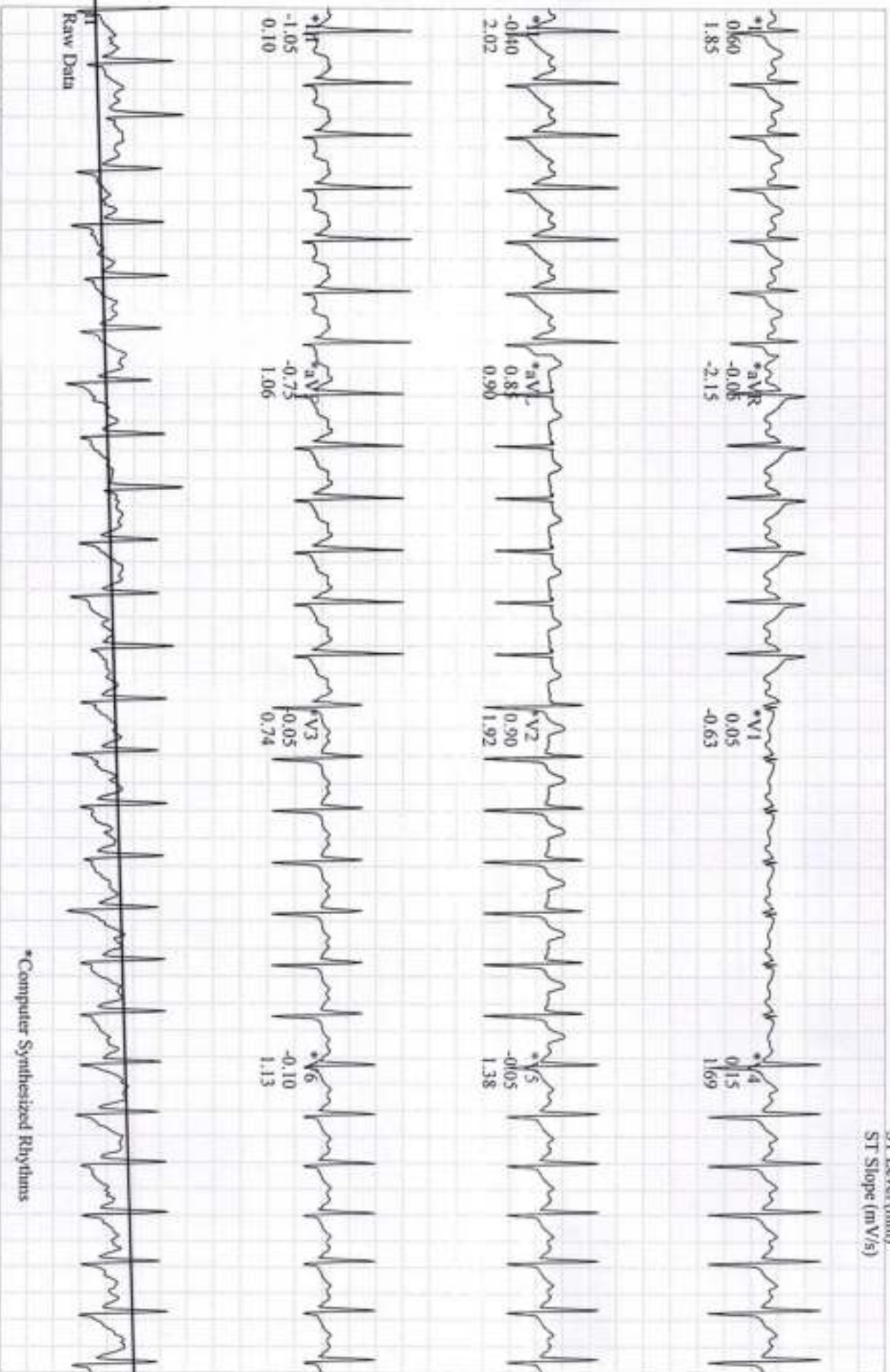
MEDALL CLUMAX DIAGNOSTICS

BRUCE

2.5 mph

12.0 %

Lead
ST Level (mm)
ST Slope (mV/s)



Raw Data

*Computer Synthesized Rhythms

MR SHATRUGHAN PAL, MEDIWHEEL

Patient ID MED210014650

28.04.2024

12:20:54pm

Linked Medians (PEAK EXERCISE)

EXERCISE

STAGE 3

06:19

BRUCE

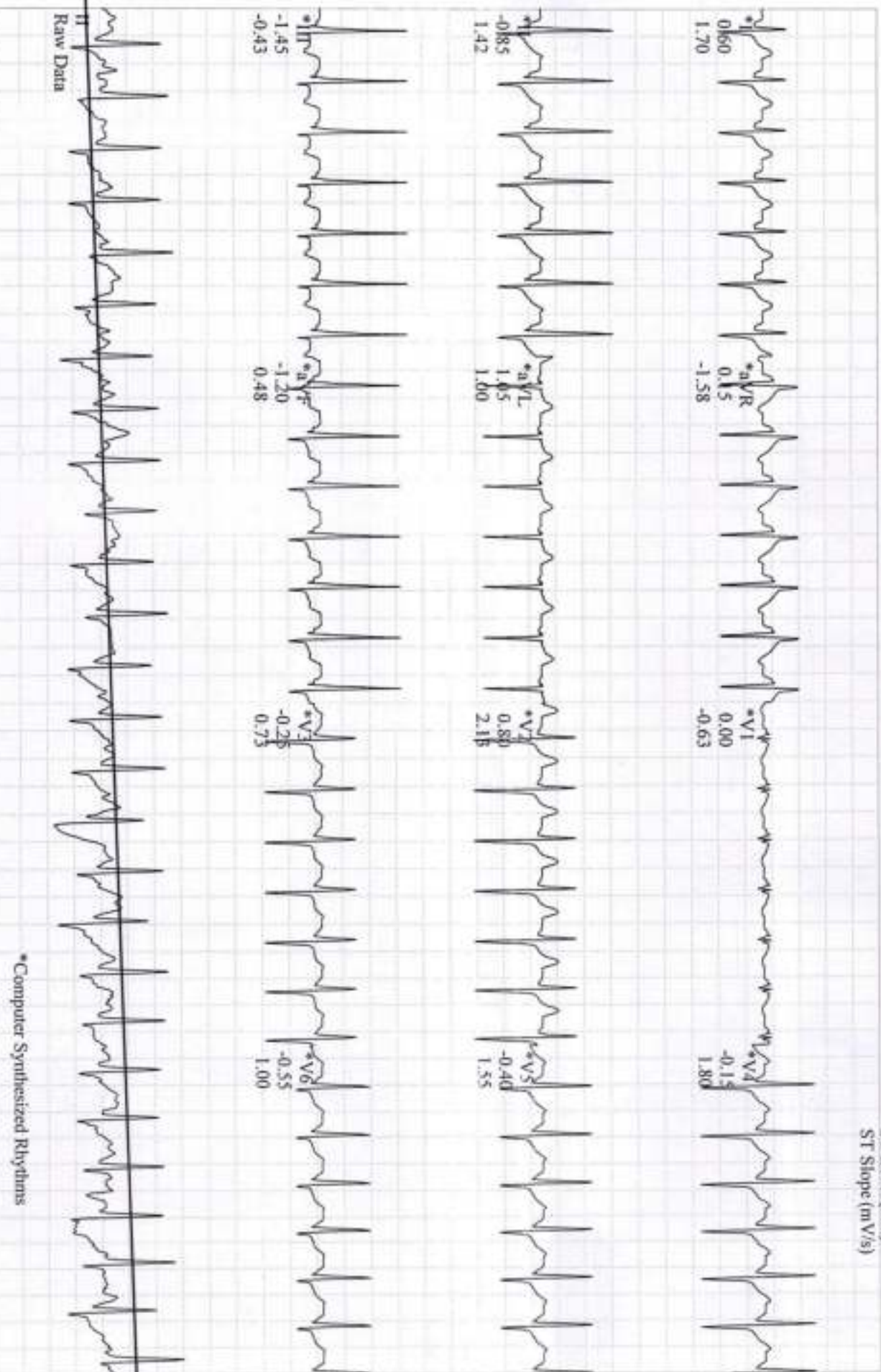
3.4 mph

14.0 %

MEDALL CLUMAX DIAGNOSTICS

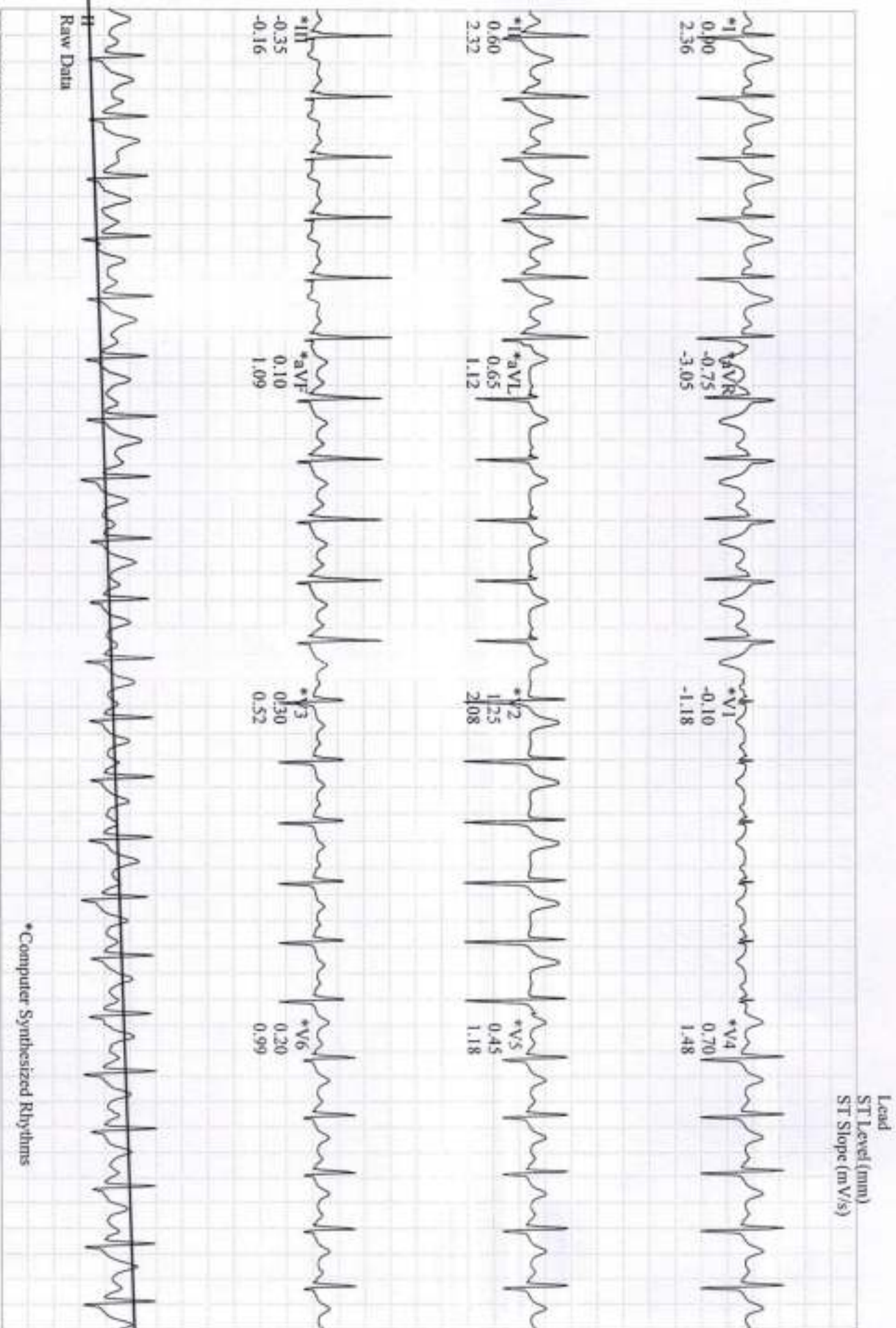
164 bpm
160/90 mmHg

Lead
ST Level (mm)
ST Slope (mV/s)



Raw Data

*Computer Synthesized Rhythms



MR SHATRUGHAN PAL, MEDIWHEEL

Patient ID MED210014650

28.04.2024

12:24:07pm

106 bpm

Linked Medians

RECOVERY

#1

03:14

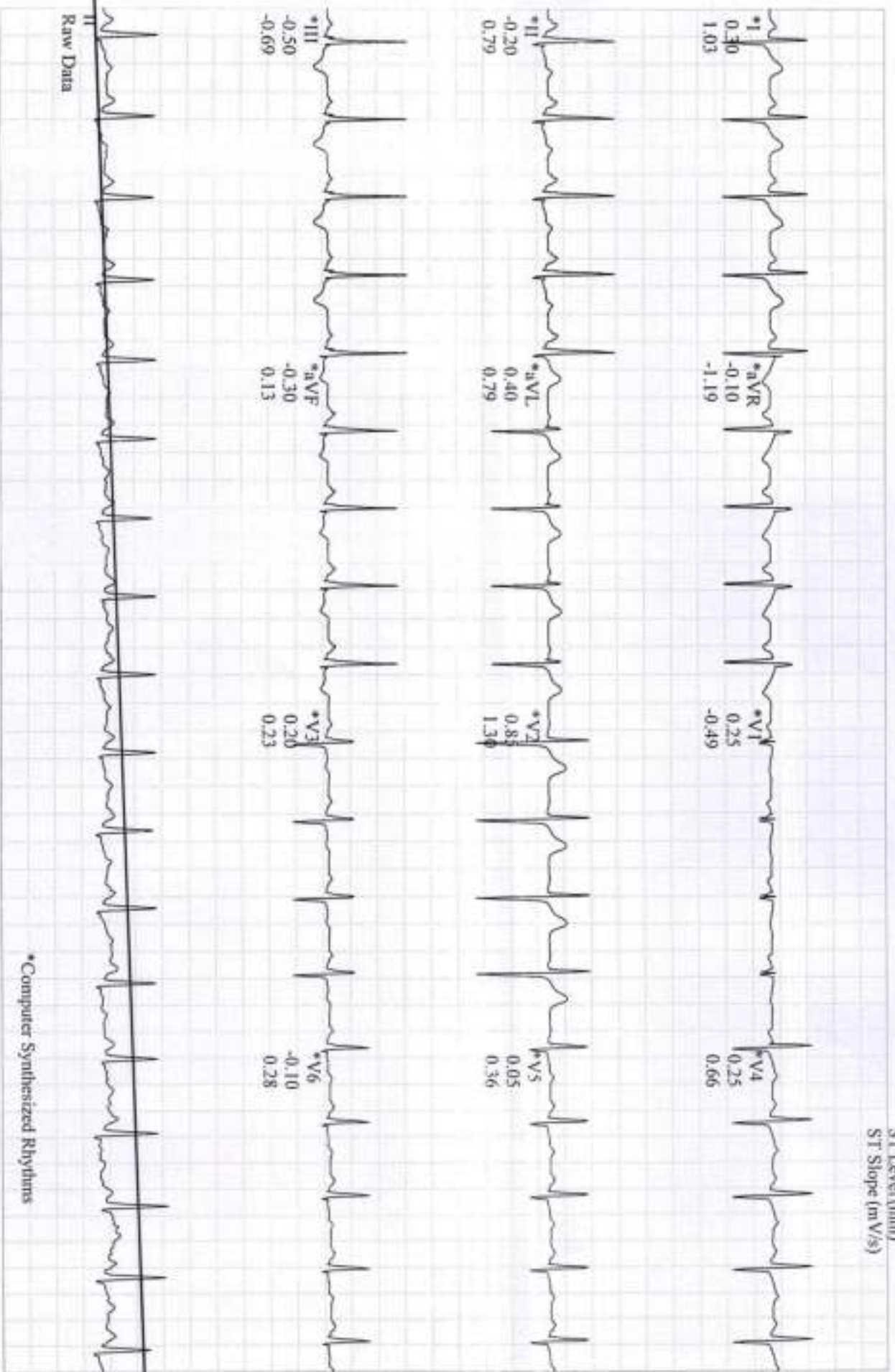
BRUCE

0.0 mph

0.0 %

MEDALL CLUMAX DIAGNOSTICS

Lead
ST Level (mm)
ST Slope (mV/s)



Raw Data

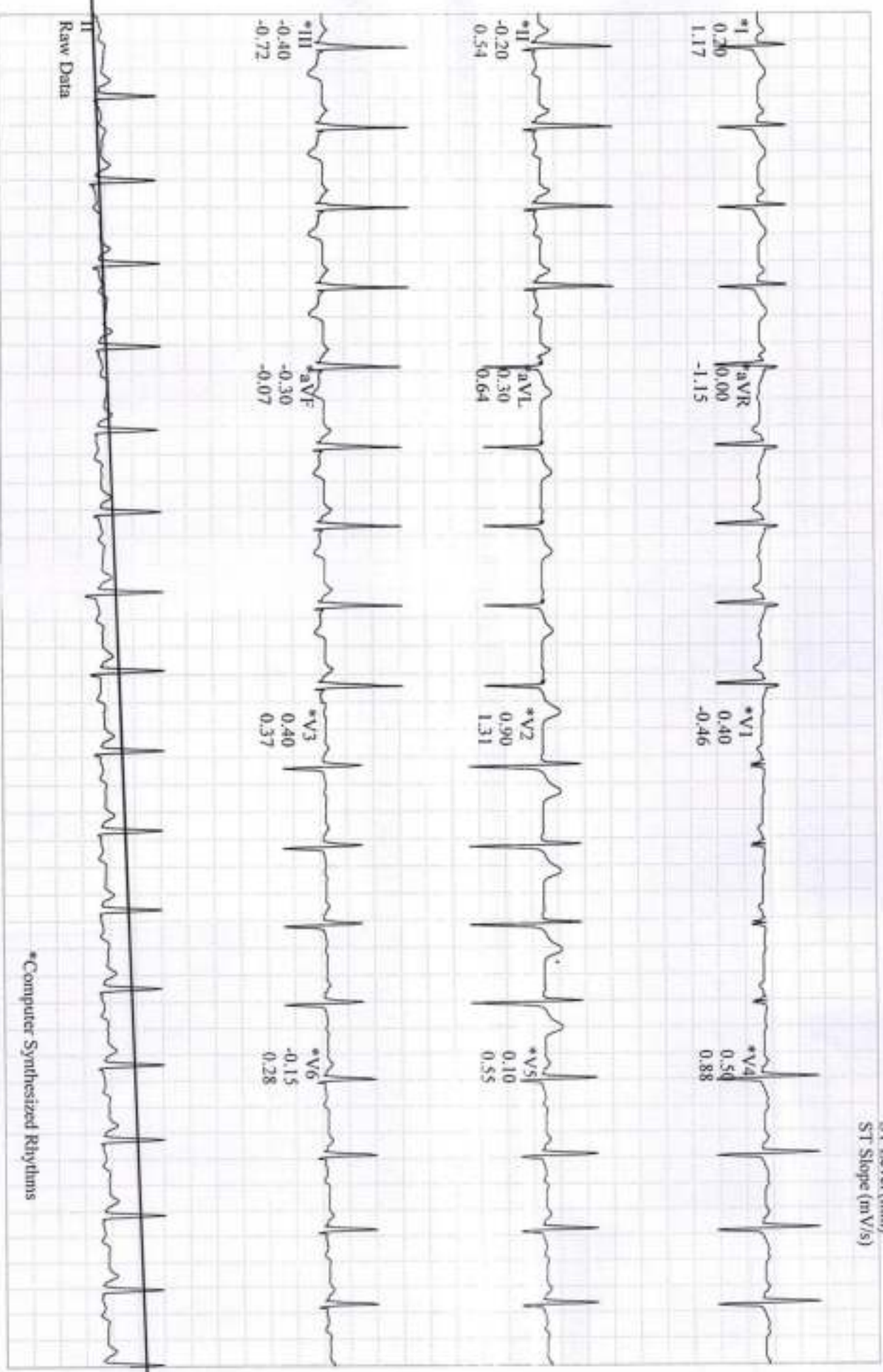
*Computer Synthesized Rhythms

GE CardioSoft V6.73 (2)
25 mm/s 10 mm/mV 50Hz 0.01 - 20Hz S+ HR(V2.I)

Start of Test: 12:14:17pm

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Lead
ST Level (mm)
ST Slope (mV/s)



Raw Data

*Computer Synthesized Rhythms