



APEX HOSPITALS MULUND

A Super-speciality Hospital

ALL CASHLESS FACILITY

Veens Nagar Phase II, Tulsi Pipe Line Road.
Near Swapna Negri Road, Mulund (W) Mumbai 400 040
email: info@apexhospitals.in | www.apexgroupofhospitals.com



Tel.: 022-41624000 (100 Lines)

2/3/24

Name - Nikas Khandel

Age - 35 ym 1M

No H/o any major illness

o/p - T - Afebrile
P - 88/min
BP - 130/80 mmHg
RR - 18/min
SpO2 - 98% @ RA

R/P - AUS - 2/2 (+)
RS - RRBE
P/A - Soft
CNS - Conscious & oriented

Height - 176 cm } BMI - 32.3%
Weight - 100 kg }

Dental check up - Normal

Eye check up - do ophthalmologist opinion for spectacles

Skin / ENT - Normal





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Tele:-
022-41624000 (100 Lines)

NAME : MR. VIKAS KHANDEL

35/M

09/03/2024

REF. BY : BOS

USG ABDOMEN AND PELVIS SONOGRAPHY

Liver is of normal size and shows normal echo texture. No evidence of focal lesion in Liver. Portal vein appears normal, No dilated I.H.B.R. No evidence of pleural effusion.

Gall bladder is well distended. No Evidence of cholelithiasis.

C.B.D appears normal, and No evidence of calculi in it.

Pancreas shows normal echogenicity. No signs of acute or chronic Pancreatitis.

Spleen shows normal echogenicity and it is of normal size.
No evidence of Para aortic Lymphadenopathy or Ascites.

Right kidney measures : 9.4 x 4.6 cm.

Left kidney measures : 8.4 x 4.1 cm.

No evidence of renal calculi or Hydronephrosis. No evidence of S.O.L.
Cortical echogenicity on either side appears normal.

No dilated upper or lower ureters are seen.

Bladder shows Smooth margin and there is no evidence of vesicle calculi.

Prostate measures : 2.8 x 3.2 x 3.0 cm(volume =14 cc)

Normal in size and echotexture.No focal lesion.

REMARK :

● **No Abnormality Seen.**

Dr. Kamlesh Jain
DR. KAMLESH JAIN
(Consultant Radiologist)
2002/03/1656



Where Healing & Care Cross Borders

APEX HOSPITALS MULUND DIAGNOSTIC

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Tele.:
022-41624000 (100 Lines)

Patient Name : **MR. VIRAS KHANDEL**
Age/Sex : 35 Years / Male
Ref Doctor : APEX HOSPITAL
Client Name : Apex Hospital

Patient ID : H5003
Sample Collected on : 9-3-24, 12:00 pm
Registration On : 9-3-24, 12:00 pm
Reported On : 9-3-24, 7:04 pm

Test Done	Observed Value	Unit	Ref. Range
Complete Blood Count(CBC)			
HEMOGLOBIN	13.6	gm/dl	12 - 16
Red Blood Corpuscles			
PCV (HCT)	40.0	%	42 - 52
RBC COUNT	5.36	x10 ⁶ /ul	4.70 - 6.50
RBC Indices			
MCV	74.7	fl	78 - 94
MCH	25.3	pg	26 - 34
MCHC	34.0	g/L	33 - 36
RDW-CV	15.8	%	11.5 - 14.5
White Blood Corpuscles			
TOTAL LEUCOCYTE COUNT	9800	/cumm	4000 - 11000
Differential Count			
NEUTROPHILS	70	%	40 - 75
LYMPHOCYTES	25	%	20 - 45
EOSINOPHILS	02	%	0 - 6
MONOCYTES	03	%	1 - 10
BASOPHILS	0	%	0 - 1
Platelets			
PLATELET COUNT	230000	Lakh/cumm	150000 - 450000
MPV	9.	fl	6.5 - 9.5
RBC MORPHOLOGY	Microcytosis		
WBC MORPHOLOGY	No abnormality detected		
PLATELETS ON SMEAR	Adequate on Smear		

Instrument : Mindray BC 3000 Plus

Dr. Hrishikesh Chevle
(MBBS, DCP.)



Wise Healing & Care Comes Next

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Tele.:
022-41624000 (100 Lines)

Patient Name	: MR. VIKAS KHANDEL	Patient ID	: 85198
Age/Sex	: 35 Years / Male	Sample Collected on	: 9-3-24, 12:00 pm
Ref Doctor	: APEX HOSPITAL	Registration On	: 9-3-24, 12:00 pm
Client Name	: Apex Hospital	Reported On	: 9-3-24, 7:14 pm

Test Done	Observed Value	Unit	Ref. Range
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Blood Group & RH Factor

SPECIMEN	WHOLE BLOOD
ABO GROUP	'O'
RH FACTOR	POSITIVE
INTERPRETATION	

The ABO system consists of A, B, AB, and O blood types. People with type AB blood are called universal recipients, because they can receive any of the ABO types. People with type O blood are called universal donors, because their blood can be given to people with any of the ABO types. Mismatches with the ABO and Rh blood types are responsible for the most serious, sometimes life-threatening, transfusion reactions. But these types of reactions are rare.

Rh system
The Rh system classifies blood as Rh-positive or Rh-negative, based on the presence or absence of Rh antibodies in the blood. People with Rh-positive blood can receive Rh-negative blood, but people with Rh-negative blood will have a transfusion reaction if they receive Rh-positive blood. Transfusion reactions caused by mismatched Rh blood types can be serious.

Dr. Hrishikesh Chevle
(MBBS, DCP.)



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Tele.:
022-41624000 (100 Lines)

Patient Name	: MR. VIKAS KHANDEL	Patient ID	: 85098
Age/Sex	: 35 Years / Male	Sample Collected on	: 9-3-24, 12:00 pm
Ref Doctor	: APEX HOSPITAL	Registration On	: 9-3-24, 12:00 pm
Client Name	: Apex Hospital	Reported On	: 9-3-24, 7:04 pm

Test Done	Observed Value	Unit	Ref. Range
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ESR (ERYTHROCYTES SEDIMENTATION RATE)

ESR	17	mm/hr.	0 - 20
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METHOD - WESTERGRÉN

Dr. Hrishikesh Chevie
(MBBS DCP)



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Tele.:
022-41624000 (100 Lines)

Patient Name	: MR. VIKAS KHANDEL	Patient ID	: 85098
Age/Sex	: 35 Years / Male	Sample Collected on	: 9-3-24, 12:30 pm
Ref Doctor	: APEX HOSPITAL	Registration On	: 9-3-24, 12:00 pm
Client Name	: Apex Hospital	Reported On	: 9-3-24 7:04 am

Test Done	Observed Value	Unit	Ref. Range
LIVER FUNCTION TEST			
TOTAL BILIRUBIN	0.76	mg/dL	UP to 1.2
DIRECT BILIRUBIN	0.22	mg/dL	UP to 0.5
INDIRECT BILIRUBIN	0.54	mg/dL	UP to 0.7
SGOT(AST)	33.1	U/L	UP to 40
SGPT(ALT)	26.3	U/L	1.8 to 40
ALKALINE PHOSPHATASE	244.0	U/L	64 to 306
S. PROTEIN	5.03	g/dl	6.0 to 8.3
S. ALBUMIN	3.2	g/dl	3.5 - 5.0
S. GLOBULIN	1.83	g/dl	2.3 to 3.9
A/G RATIO	1.75		0.9 to 2.3

METHOD - EM200 Fully Automatic

Dr. Krishikesh Chevle
(MBBS DCP.)



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Tele.:
022-41624000 (100 Lines)

Patient Name	: MR. VIKAS KHANDEL	Patient ID	: 85045
Age/Sex	: 35 Years / Male	Sample Collected on	: 9-3-24, 12:00 pm
Ref Doctor	: APEX HOSPITAL	Registration On	: 9-3-24, 12:00 pm
Client Name	: Apex Hospital	Reported On	: 9-3-24 7:04 pm

Test Done	Observed Value	Unit	Ref. Range
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LIPID PROFILE

TOTAL CHOLESTEROL	179.1	mg/dl	200 - 240
S. TRIGLYCERIDE	140.2	mg/dL	0 - 200
S.HDL CHOLESTEROL	47.1	mg/dL	30 - 70
VLDL CHOLESTEROL	28	mg/dL	Up to 25
S.LDL CHOLESTEROL	108.96	mg/dL	Up to 160
LDL CHOL/HDL RATIO	2.59		Up to 4.5
CHOL/HDL CHOL RATIO	4.25		Up to 4.5

Transasia-EM200 FULLY AUTOMATIC

INTERPRETATION

Above reference ranges are as per ADULT TREATMENT PANEL III RECOMMENDATION by NCEP (May 2015).

Dr. Prishikesa Chevle
(MBBS, DCF)



Work Hard & Care Come Naturally

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Tele.:
022-41624000 (100 Lines)

Patient Name	: MR. VIKAS KILANDEI.	Patient ID	: 85068
Age/Sex	: 35 Years Male	Sample Collected on	: 9-3-24, 12:00 pm
Ref Doctor	: APEX HOSPITAL	Registration On	: 9-3-24, 12:00 pm
Client Name	: Apex Hospital	Reported On	: 9-3-24, 7:04 pm

Test Done	Observed Value	Unit	Ref. Range
RENAL FUNCTION TEST			
BLOOD UREA	26.1	mg/dL	10 - 50
BLOOD UREA NITROGEN	12.20	mg/dL	0.0 - 23.0
S. CREATININE	0.82	mg/dl	0.7 to 1.4
S. SODIUM	131.6	mEq/L	135 - 155
S. POTASSIUM	4.72	mEq/L	3.5 - 5.5
S. CHLORIDE	103.7	mEq/L	95 - 109
S. URIC ACID	6.6	mg/dL	3.5 - 7.2
S. CALCIUM	8.10	mg/dL	8.4 - 10.4
S. PHOSPHORUS	3.6	mg/dL	2.5 - 4.5
S. PROTEIN	5.03	g/dl	6.0 to 8.3
S. ALBUMIN	3.2	g/dl	3.5 to 5.3
S. GLOBULIN	1.83	g/dl	2.3 to 3.6
A/G RATIO	1.75		1.0 to 2.3

METHOD - EM200 Fully Automatic

INTERPRETATION -



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Tele.:
022-41624000 (100 Lines)

Patient Name : **MR. VIKAS KHANDEL**
Age/Sex : 35 Years / Male
Ref Doctor : APEX HOSPITAL
Client Name : Apex Hospital

Patient ID : 85008
Sample Collected on : 9-3-24, 12:00 pm
Registration On : 9-3-24, 12:00 pm
Reported On : 9-3-24, 3:04 pm

Test Done	Observed Value	Unit	Ref. Range
BLOOD GLUCOSE FASTING & PP			
FASTING BLOOD GLUCOSE	99.7	mg/dL	70 - 110
URINE GLUCOSE	NO SAMPLE		ABSENT
URINE KETONE	NO SAMPLE		ABSENT
POST PRANDIAL BLOOD GLUCOSE	103.7	mg/dL	70 - 140
URINE GLUCOSE	NO SAMPLE		ABSENT
URINE KETONE	NO SAMPLE		ABSENT

Method - GOD-POD



Where Healing & Care Go Hand in Hand

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Tele.:
022-41624000 (100 Lines)

Patient Name	MR. VIKAS KHANDEL	Patient ID	85058
Age Sex	35 Years / Male	Sample Collected on	9-3-21, 12:01 pm
Ref Doctor	APEX HOSPITAL	Registration On	9-3-24, 12:00 pm
Client Name	Apex Hospita	Reported On	9-3-24, 7:04 pm

Test Done	Observed Value	Unit	Ref. Range
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URINE ROUTINE EXAMINATION

Physical Examination

VOLUME	20 ml	-
COLOUR	Pale Yellow	Pale yellow
APPEARANCE	Slightly Hazy	Clear
DEPOSIT	Absent	Absent

Chemical Examination

REACTION (PH)	Acidic	Acidic
SPECIFIC GRAVITY	1.025	1.000 - 1.035
PROTEIN (ALBUMIN)	Absent	Absent
HIDALUT BLOOD	Negative	Negative
SUGAR	Absent	Absent
KETONES	Absent	Absent
BILE SALT & PIGMENT	Absent	Absent
UROBILINOGEN	Normal	Normal

Microscopic Examination

RED BLOOD CELLS	Absent	Absent
PUS CELLS	3-4 /HPF	0 - 5 /HPF
EPITHELIAL CELLS	2-3 /HPF	0 - 3 /HPF
CASTS	Absent	
CRYSTALS	Absent	
BACTERIA	Absent	Absent
YEAST CELLS	Absent	Absent
ANY OTHER FINDINGS	Absent	

Dr. Krishikesh Chevle
(MSBS DCP.)

Star Ankur Building, 1st Floor, Near Fatima Church, Majiwada, Thane (W) - 400601.

Patient ID : 2407043402	 For Authenticity Scan QR Code	Registered On : 09/03/2024, 05:17:11 AM
Patient Name : MR. VIKAS KHANDEL		Collected On : 10/07/2024, 01:05:35 AM
Age : 35 Yrs		Reported Via : 10/07/2024, 01:05:35 AM
Gender : MALS		Sample ID : 
Ref By Doctor : APEX HOSPITAL		
Sample Collected At : CUDDELES W CURE DIAGNOSTIC CENTRE		

Glycosylated Hemoglobin (GHb/HbA1c)

Test Name	Result	Unit	Biological Reference Interval
HbA1c (Glycosylated Haemoglobin)	5.00	%	Below 5.0% - Normal 6.0% - 7.0% - Good Control 7.0% - 8.0% - Fair Control 8.0% - 10% - Unstable Control Above 10% - Poor Control
MEIC-5A Mean Blood Glucose Calculated	96.9	mg/dL	70 - 125

CLINICAL SIGNIFICANCE -

Glycosylated haemoglobin is a accurate and true index of the "Mean Blood Glucose Level" in the body. In the previous 2-3 months HbA1c is an indicator of glycaemic control. HbA1c represents average glycaemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell but within this 120 days, recent glycaemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the most recent sampling 25% in the month before that and the remaining 25% in months two to four.

Please correlate with clinical conditions

Error Report

Results returned only if the sample is received in good condition with correct labeling.

Note: If this test results are standing or unexpected, Client is advised to contact the Physician immediately for possible re-evaluation.



Dr. Roshan Shaikh
MBBS MD Pathology
Consultant Pathologist

This report is system generated and electronically authenticated.

Page 1 of 1



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Tele.:

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Mr. VIKAS KHANDEL	www.apexhospitals.com	www.apexhospitals.com	Lab ID: 0130917321
DOB :	Received 06-03-2024 10:32	Reported 09-03-2024 21:27	Service Category : Adult - Cash
Age : 35 Years	Reported 09-03-2024 21:27	Status Final	Location : MUMBAI
Gender : Male			Ref By : APEX HOSPITAL
CRM :			Client : SAHAY PRAFULLA - DANCER

Parameter	Result	Unit	Biological Ref Interval
-----------	--------	------	-------------------------

THYROID FUNCTION TEST

Tri Iodo Thyronine (T3 Total), Serum 1.29 ng/mL 0.7 - 2.04

Clinical significance-

radioiodine (I¹³¹) values above 0.07 ng/mL in adults or over age related cutoffs in children are consistent with hyperthyroidism. The former is due to protein binding. Abnormal levels (high or low) of thyroid binding proteins (primarily albumin and thyroxine binding globulin) may also lead to abnormal thyroid function tests. Please note that Triiodothyronine (T3) is not a reliable marker for hypothyroidism. The result is an estimate. Low levels of suppressed T3 values.

Thyroxine (T4), Serum 10.00 µg/dL 5.5 -15.5

Clinical significance-

Thyroxine (T4) is synthesized in the thyroid gland. High T4 are seen in hyperthyroidism and in patients with acute thyrotoxicosis. Low T4 are seen in hypothyroidism, cretinism, chronic thyrotoxicosis and occasionally, subacute thyroiditis. Increased total thyroxine (T4) is seen in pregnancy and patients with amiodarone therapy. In pregnancy, total T4 levels are elevated because of increased thyroxine-binding globulin (T4) levels. Decreased total T4 is seen in patients on treatment with amiodarone (which suppresses thyroid T4 levels).

Thyroid Stimulating Hormone (TSH), Serum 3.233 µIU/mL 0.4 - 5.5

Clinical significance-

In primary hypothyroidism, TSH (thyroid stimulating hormone) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. TSH levels may also be elevated in the differential diagnosis of primary thyroid (from secondary (pituitary) and tertiary (hypothalamic) hyperthyroidism) in primary hypothyroidism. TSH levels are elevated and elevated, while in secondary and tertiary hypothyroidism, TSH levels are low or normal. Elevated or low TSH in the context of normal free thyroxine is characteristic of a subclinical type of hyperthyroidism, respectively.

Pregnancy	Adult Female Thyroxine	Amiodarone Contracept	Thyroid secret
1st trimester	< 2.5	< 1.0	< 2.5
2nd trimester	< 3.0	< 3.0	< 3.0
3rd trimester	< 3.5	< 3.0	< 3.3

..... End Of Report
.....

Established by: Dr. PRAFULLA KHANDEL, MD, DNB (Gen. Med.), DCH, DCC and Fellowship in Endocrinology, Diabetology, Lipidology, Nephrology, Geriatrics, Pulmonology, Rheumatology, Allergy & Immunology, Mumbai

Dr. PRAFULLA KHANDEL, MD, DNB (Gen. Med.), DCH, DCC and Fellowship in Endocrinology, Diabetology, Lipidology, Nephrology, Geriatrics, Pulmonology, Rheumatology, Allergy & Immunology, Mumbai

P. Khanel





Healthcare Inspiring & Gaining Quality & Reliability

APEX HOSPITALS MULUND

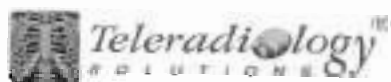
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email: info@apexhospitals.in www.apexgroupofhospitals.com



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022-41624000 (100 Lines)



APEX HOSPITALS MULUND Radiologist Report Sheet

Patient Name:	VIKAS.KHANDEL	Medical Record No:	09/03/2024 2726
Gender:	M	Accession No:	
Type Of Study:	CR Chest PA	Location:	Outpatient
Image Count:	1	Physician:	BANK OF BARODA
Requisition Time:	24/09/03 12:24 PM ET	Exam Time:	24/09/03 11:00 AM ET
Clinical History:	H/O ROUTINE CHECK-UP	Report Time:	24/09/03 01:04 PM ET

RADIOGRAPH OF THE CHEST (SINGLE VIEW) March 09, 2024 1100 hours.

Clinical History: H/O ROUTINE CHECK-UP.

Findings:

The heart, mediastinum and pulmonary hila are unremarkable. The lungs are clear. There is no pleural effusion. The bony thorax is unremarkable.

IMPRESSION:

Normal radiograph of the chest

DR.AVINASH B.RATHOD
M.B.B.S D.M.R.D
Reg No : 2011/05/1616

This report has been electronically signed by: **DMRD.Avinash Rathod**

Quality Assurance: Agree / Disagree

Change in Patient Care: Yes / No

If a significant discrepancy is found between the preliminary and final interpretations of this study, please fax back this form to 877-877-4879 with a copy of the official report so that appropriate action may be taken.

If you would like to discuss the findings with the radiologist, please call us on 8667263435, 8668884112, 8665030726.

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NEUROLOGY | NEPHROLOGY | VASCULAR SURGERY | ENT | OPHTHALMOLOGY | PLASTIC SURGERY | UROLOGY | PEDIATRIC SURGERY

APEX HOSPITALS MULUND

VIKAS KHANDEI

I.D. 257

AGE 35/M

Date 09/03/2024

DATE 9/3/24

R.P. 120/80

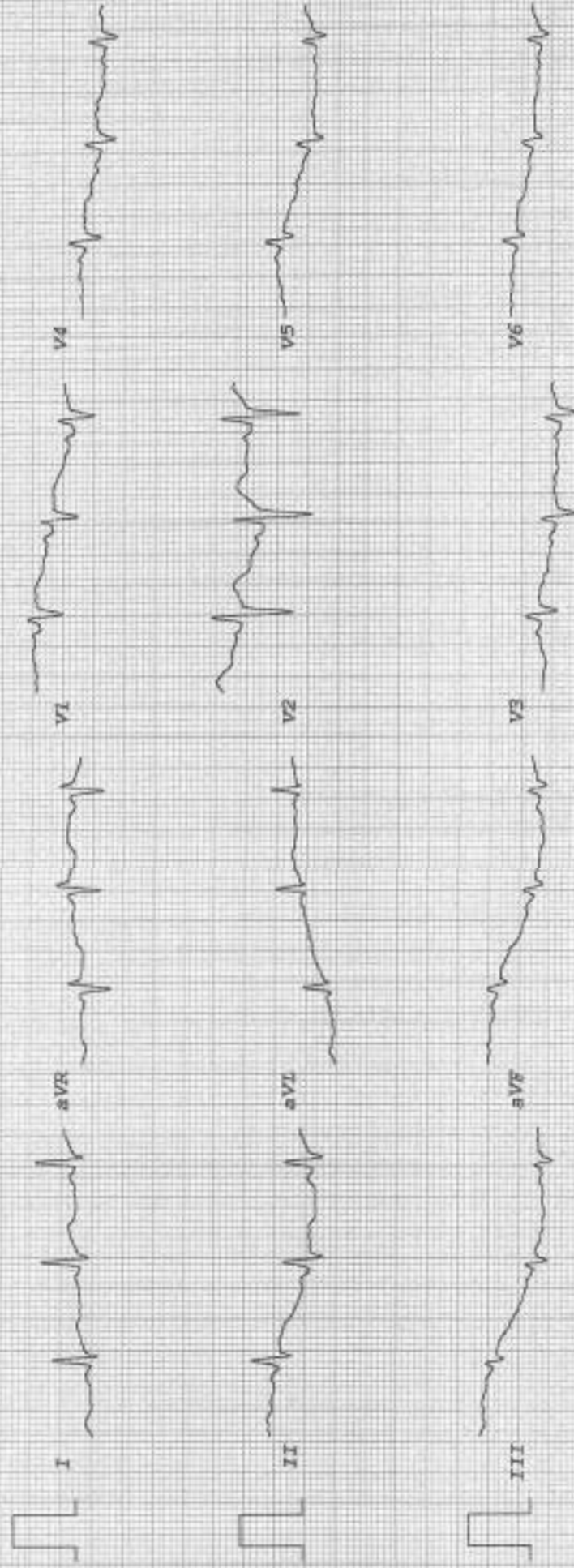
PRETEST

NO PAIN

ST @ 10mm/mV

80ms Post J

RAW ECG



APEX HOSPITALS MULUND

VITALS HANDEI

I.D. 257

Age 55/M

Date 09/03/2024

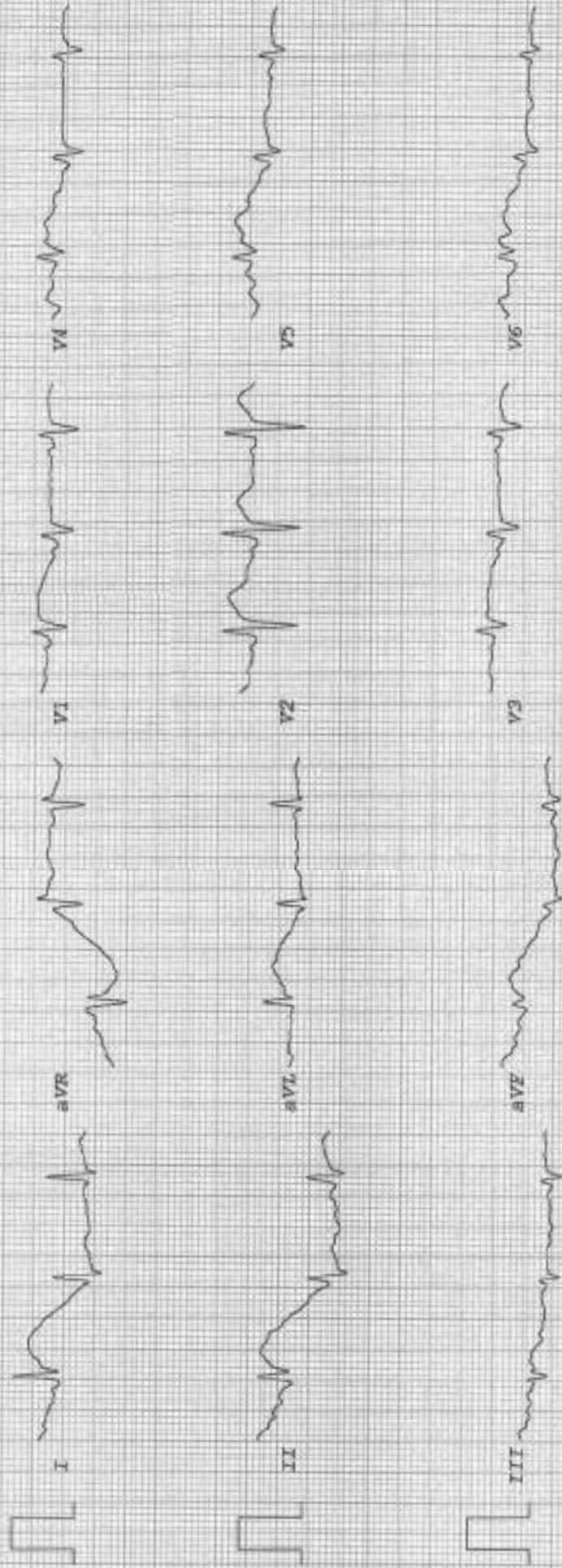
RATE 95bpm

B.P. 120/80

PRETEST
STANDING

ST @ 10mm/mV
50ms PostJ

RAW ECG



APEX HOSPITALS MULUND

VIKAS KHANZAR

I.D. 257

Age 35/M

Date 09/03/2024

SAUTE 96200

B.P. 120/80

PRETEST

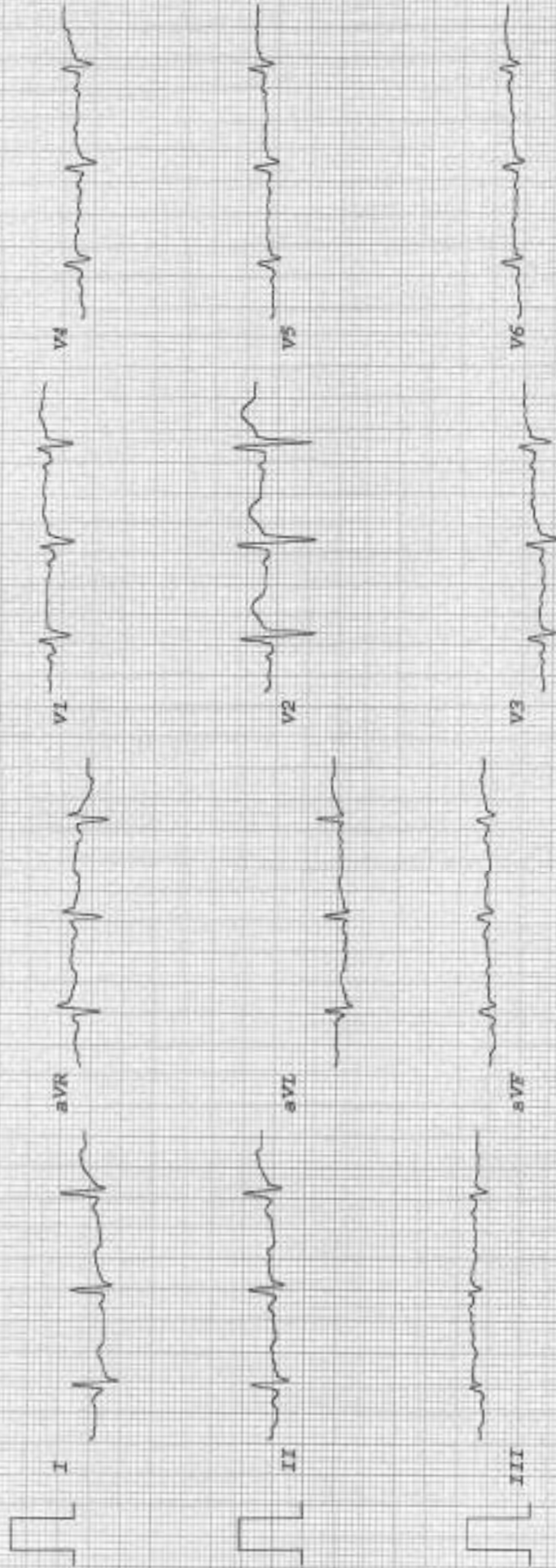
HYPERVENT

PHASE TIME 0:38

ST @ 20mm/mV

80ms PostJ

RAW ECG



CARDIO BEATS

APEX HOSPITALS MULUND

VIKAS KUMARDEL

I.D. 257

Age 95/M

Date 09/03/2024

WARM UP

Rate 102bpm

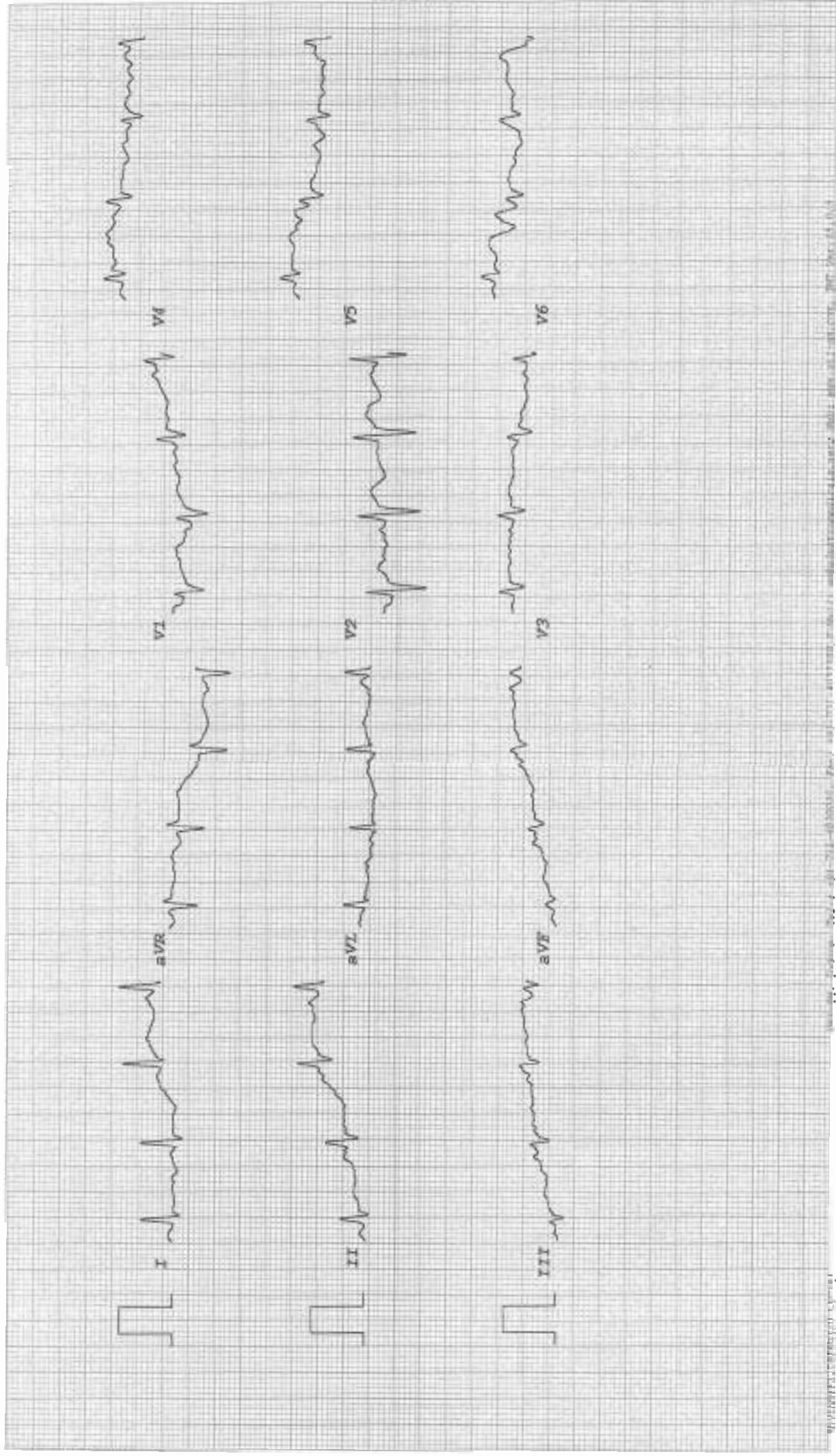
S.P. 130/80

ST ϕ 10mm/mV

80ms PQRST

Speed 1.5 km/hr

RAW ECG



CARDIO BEATS

APEX HOSPITALS MULUND

VIGAS KHANDEL
 I.D. 257
 Age 35/M
 Date 09/09/2024

Rate 123bpm
 B.P. 130/90

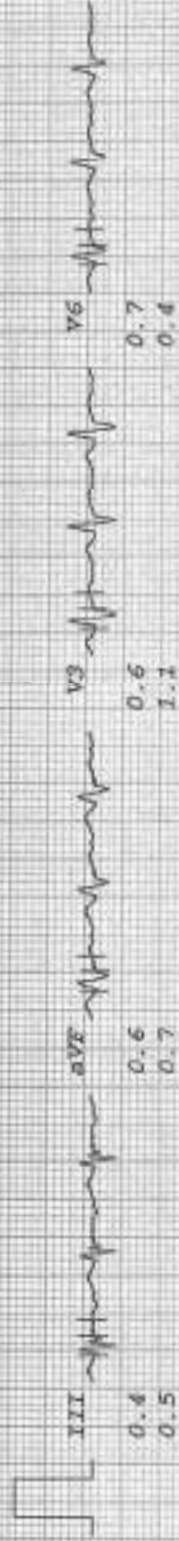
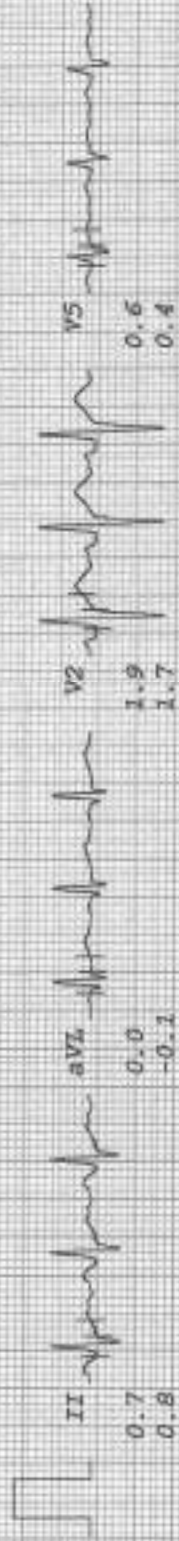
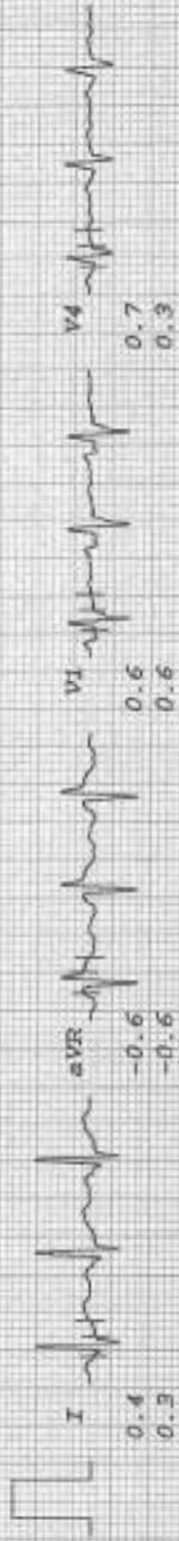
Bruce
 Stage 1
 TOTAL TIME 0:55
 PHASE TIME 0:55

57 @ 10mm/mV
 50ms PostVJ
 Speed 2.7 km/hr
 SLOPE 10 %

LINKED MEDIAN

Mag. X 2

II



0.7
0.8

II aVR aVL V1 V2 V3 V4 V5 V6



II aVR aVL V1 V2 V3 V4 V5 V6

APEX HOSPITALS MULUND

VITAS KHAMRAT,
I.D. 257
Age 35/M
Date 09/03/2024

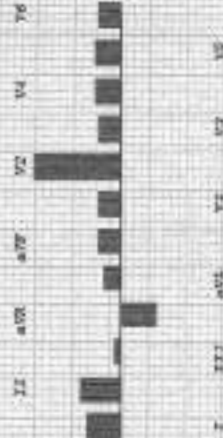
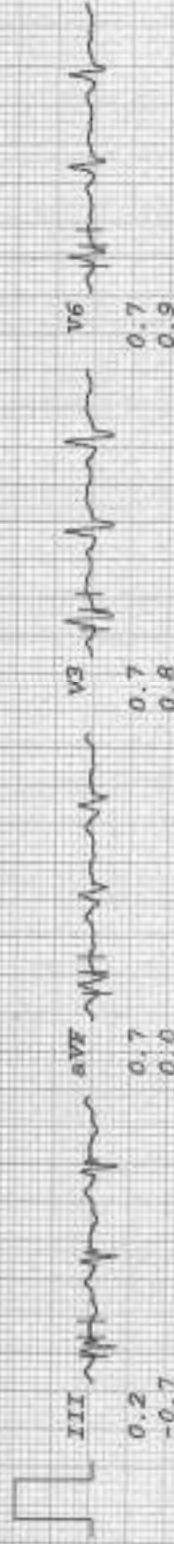
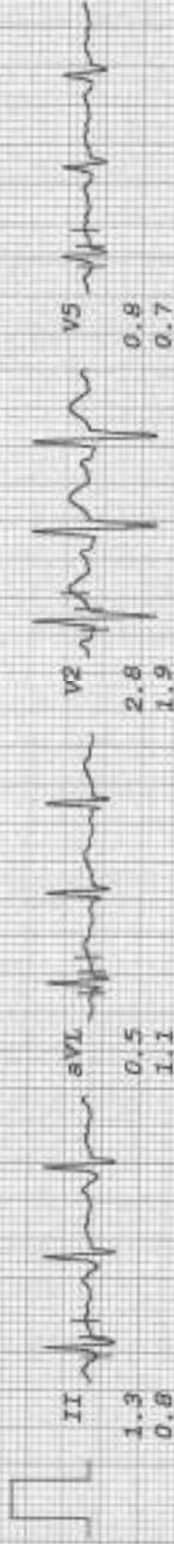
BRUCE
STAGE 1
TOTAL TIME 1:55
FRASE TIME 1:55

ST 8 20mm/mv
80ms Postly
Speed 2.7 km/hr
SLOPE 10 k

LINKED MEDIAN

Mag. X 2

II



APEX HOSPITALS MILWAUKEE

VJKAS KHANIEL

I.D. 257

Age 35/M

Date 09/03/2024

Rate 138bpm

B.P. 150/90

Bruce

Stage 1

TOTAL TIME 2:55

PHASE TIME 2:55

ST # 10mm/mV

30ms PostJ

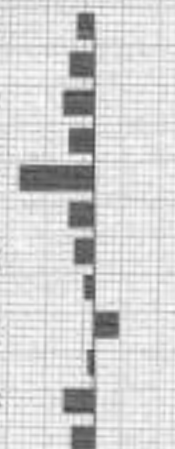
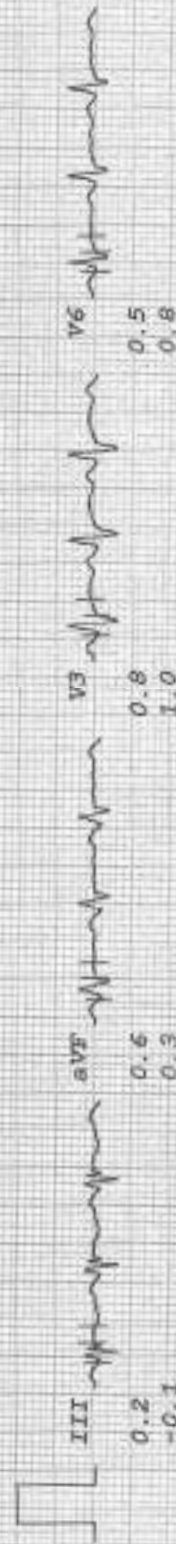
Speed 2.7 km/hr

SLOPE 10 i

LINKED MEDIAN

REG. N 2

II



CARDIO BEATS

APEX HOSPITALS MULUND

VIKAS KHARTEL

T.D. 257

Age 35/M

Date 09/03/2024

RATE 137bpm

S.P. 130/90

Brush

Stage 2

TOTAL TIME 3:55

PHASE TIME 0:55

ST @ 10mm/mV

80ms Post.T

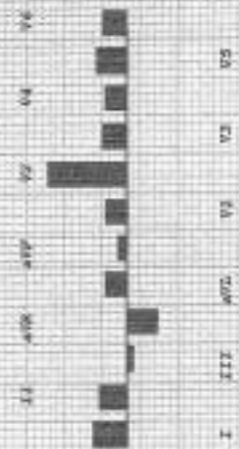
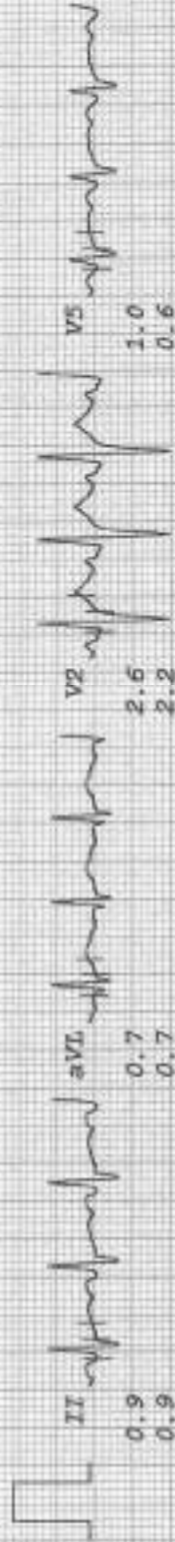
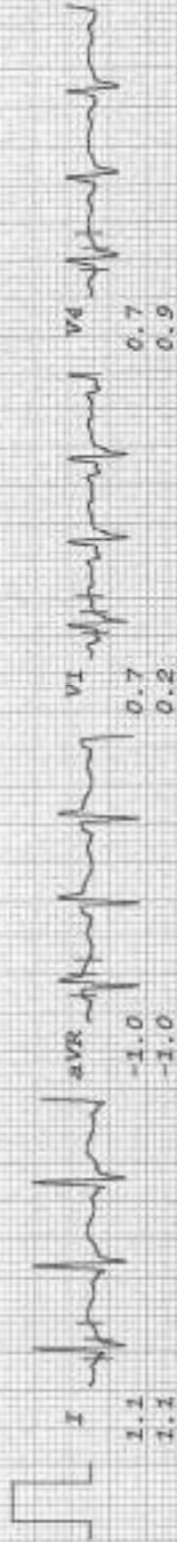
Speed 4 km/hr

SLOPE 12 @

LINKED MEDIAN

Mag. X 2

II



APEX HOSPITALS MULUND

VIKAS KHANDAL

I.D. 257

Age 35/M

Date 09/05/2024

RATE 151bpm

D.P. 130/90

ST @ 10mm/mV

60ms FOSTU

Speed 4 mm/sec

SLOPE 1.2 s

STAGE 2

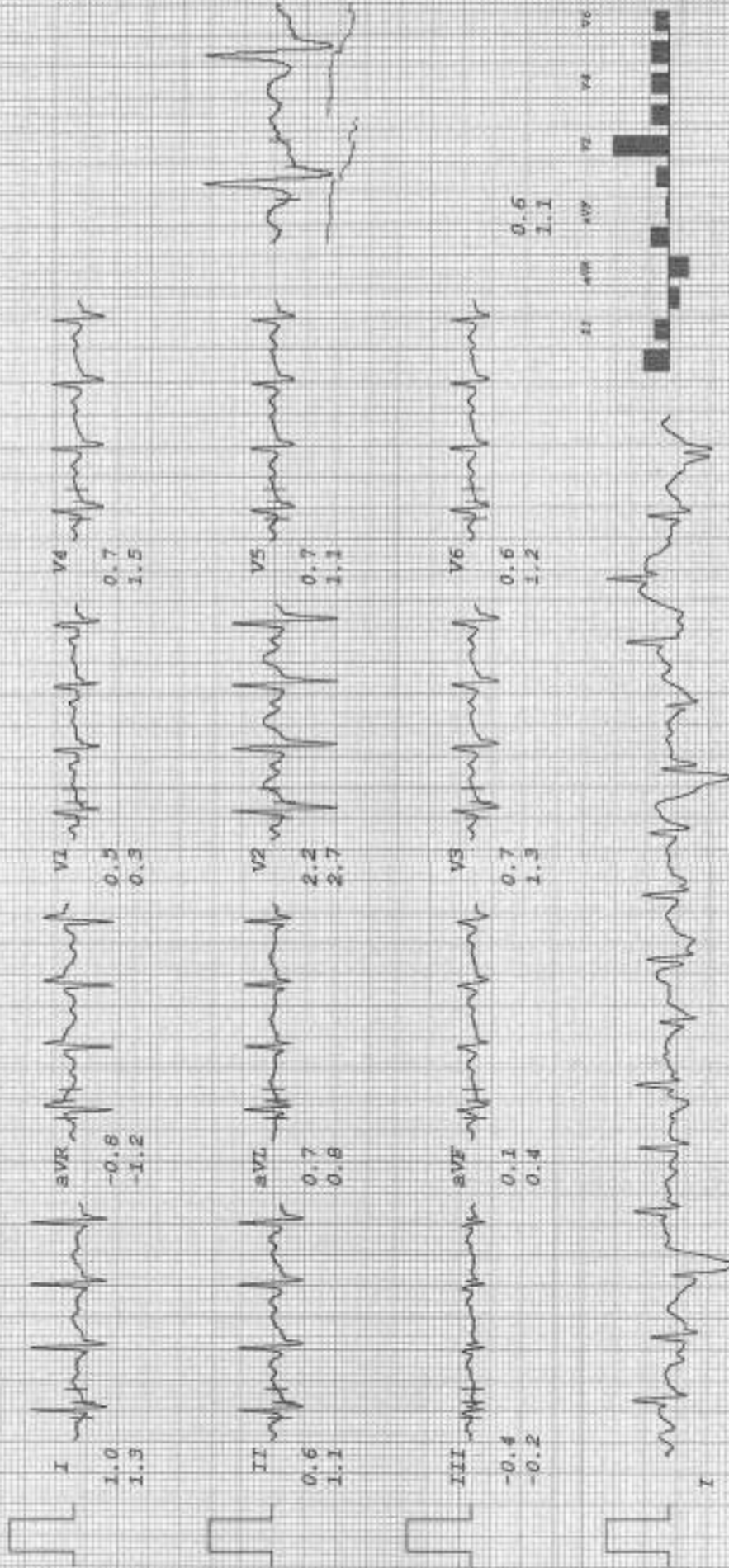
TOTAL TIME 4:53

PHASE TIME 1:55

LINKED MEDIAN

Mag. X 2

II



APEX HOSPITALS MULUND

VIKAS KHANDALE
 I.D. 257
 Age 35/M
 Date 09/03/2024

RATE 133bpm
 B.P. 130/90

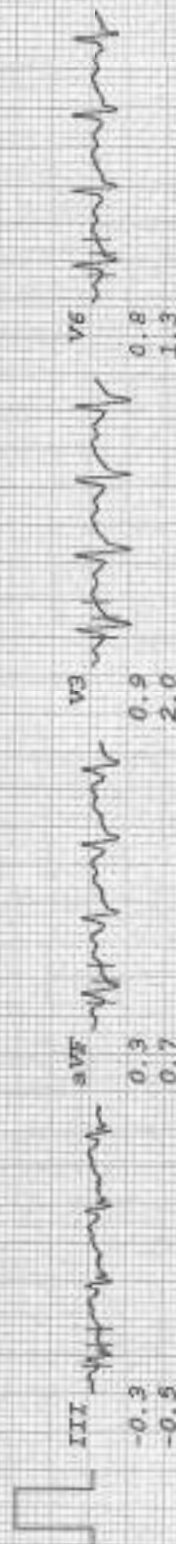
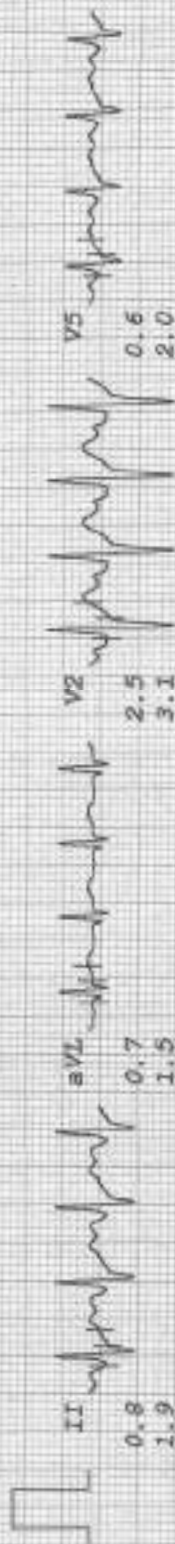
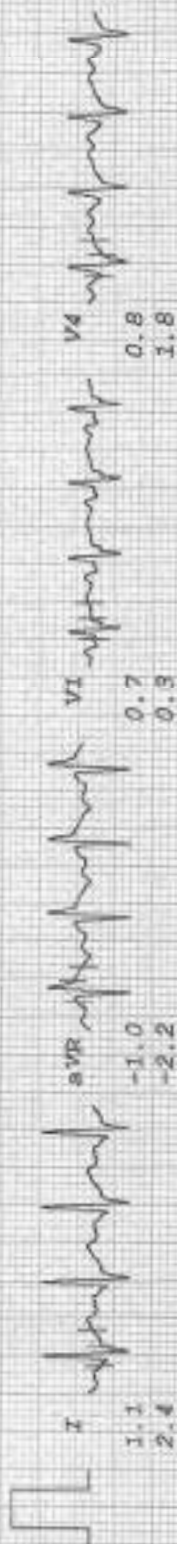
Bruce
 Stage 2
 TOTAL TIME 5:55
 PHASE TIME 2:55

ST @ 10mm/mV
 50ms PostJ
 Speed @ km/hr
 SLOPE 12 ↑

LINKED MEDIAN

Mag. X 2

II



I II III aVR aVF V1 V2 V3 V4 V5 V6

CARDIO BEATS

APEX HOSPITALS MULUND

VIZAS KHANDRIL
 I.D. 257
 Age 35/M
 Date 09/03/2024

Rate 168bpm
 B.P. 130/90

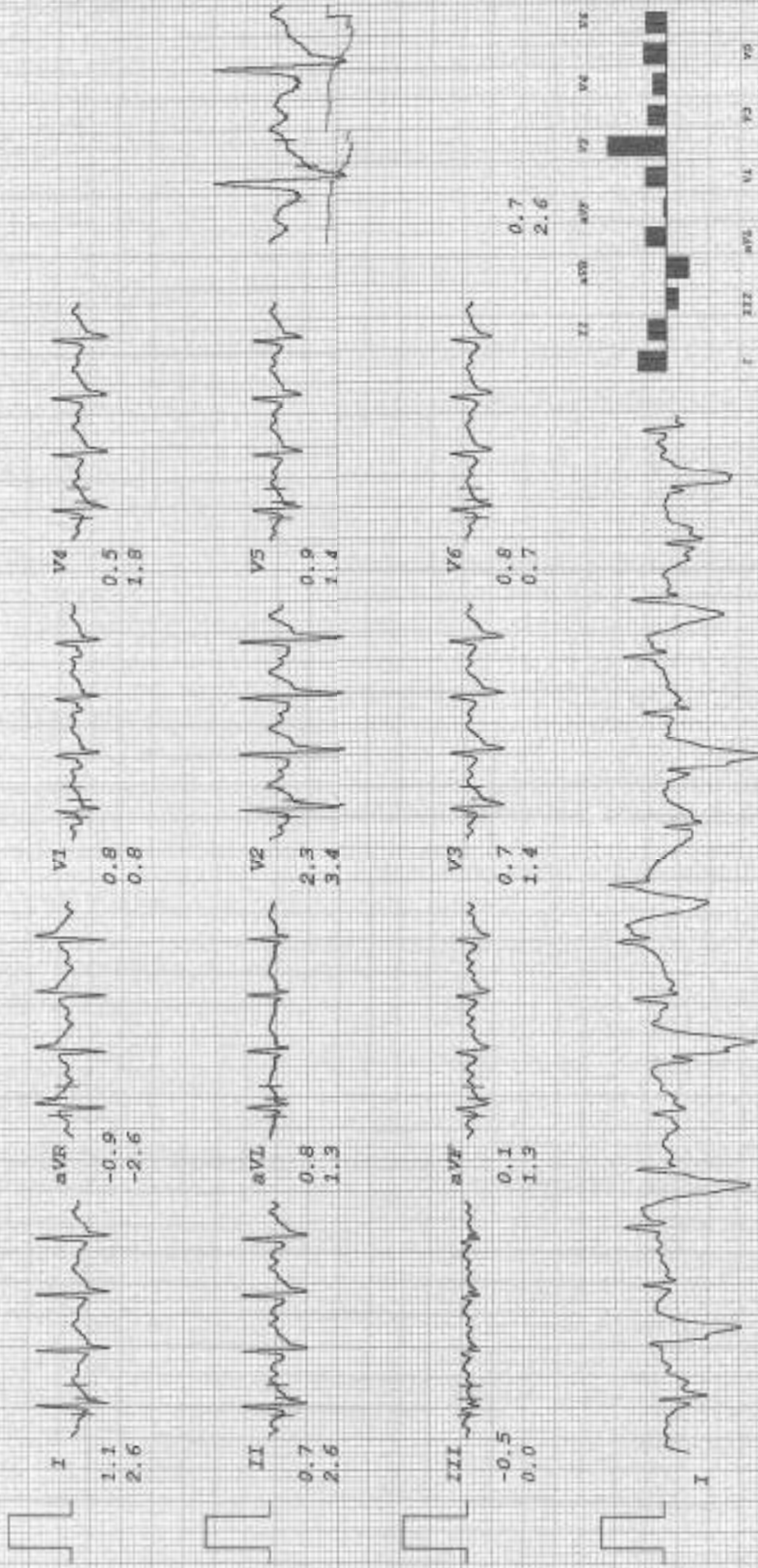
STUCO
 Stage 3
 TOTAL TIME 6:55
 PHASE TIME 0:55

ST 8 10mm/mV
 80ms PostV
 Speed 5.4 km/hr
 SLOPE 14 %

LINKED MEDIAN

Mag. X 2

II



CARDIO BEATS

APEX HOSPITALS MULUND

VIKAS KHANDEL

I.D. 257

Age 35/M

Date 09/03/2024

BRUCE

Stage 3

TOTAL TIME 7:55

PHASE TIME 1:55

SV @ 10mm/mV

60ms Post EJ

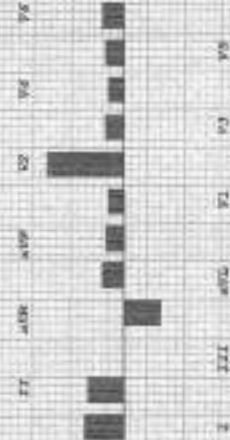
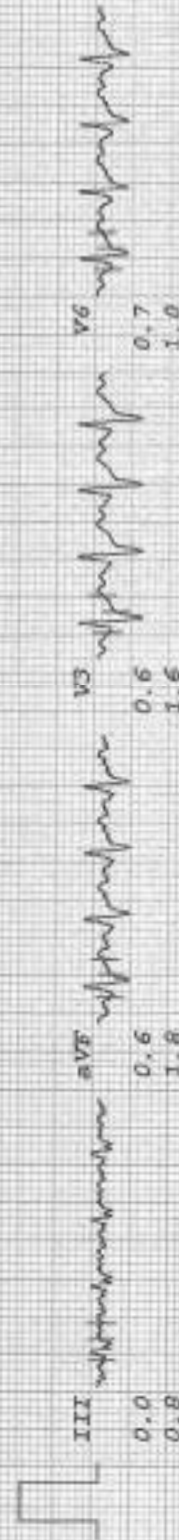
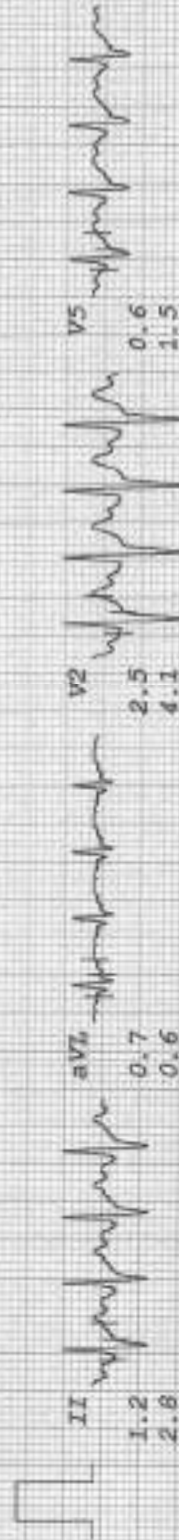
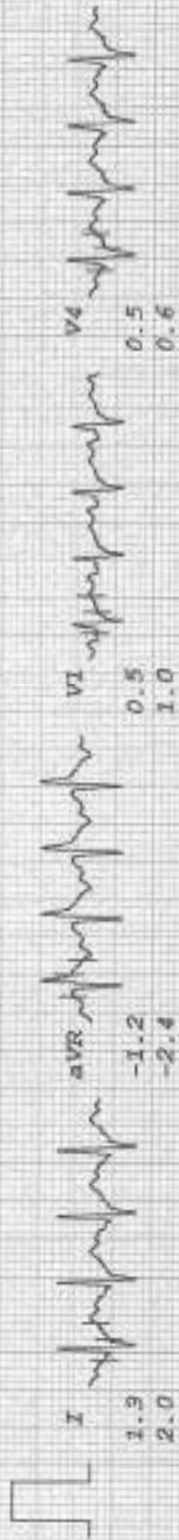
Speed 5.4 km/hr

SLOPE 24 %

LINKED MEDIAN

Mag. X 2

II



APEX HOSPITALS MULUND

VIKAS KHANDEL
 I.D. 257
 Age 35/M
 Date 09/03/2024

RATE 172bpm
 B.P. 130/90

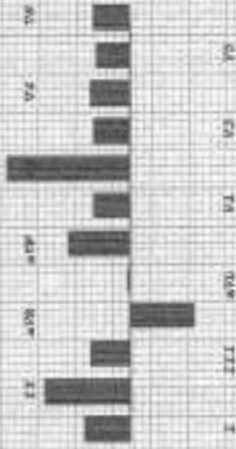
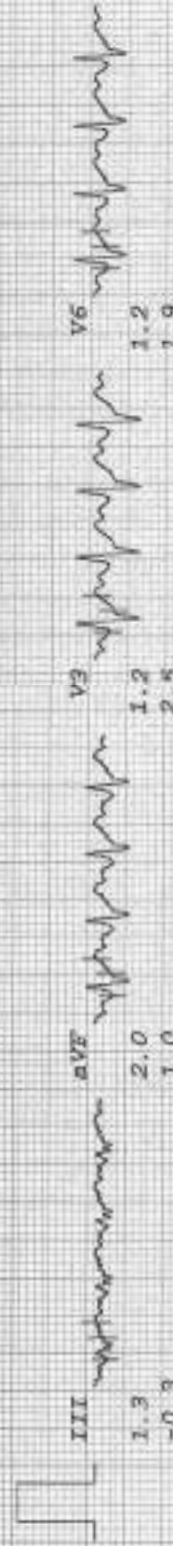
Bruce
 Stage 3
 TOTAL TIME 9:55
 PHASE TIME 2:55

ST @ 200mV/mV
 50ms Post0
 Speed 5.4 km/hr
 SLOPE 1.4 #

LINKED MEDIAN

Mag. X 2

II



CARDIO BEATS

APEX HOSPITALS MULUND

VITALE KHANDEL
 I.D. 257
 Age 35/M
 Date 09/03/2024

RATE 174bpm
 B.P. 150/90

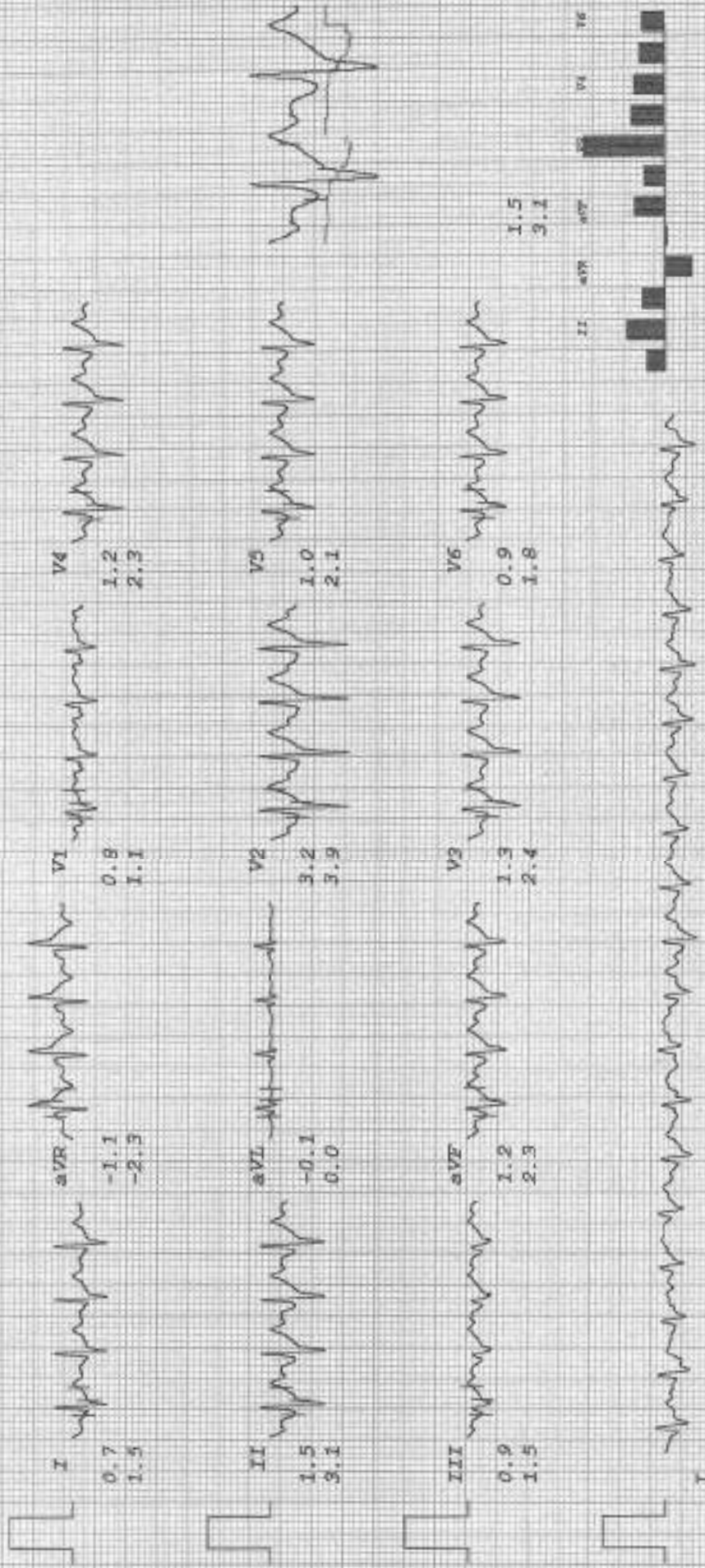
STAGE 4
TOTAL TIME 9:55
PHASE TIME 0:55

ST @ 10mm/mV
80ms PostJ
Speed 6.7 km/hr
SLOPE 16 %

LINKED MEDIAN

Mag. X 2

II



1.5
3.1

II aVR aVF V1 V2 V3 V4 V5 V6

CARDIO BEATS

APEX HOSPITALS MULUND

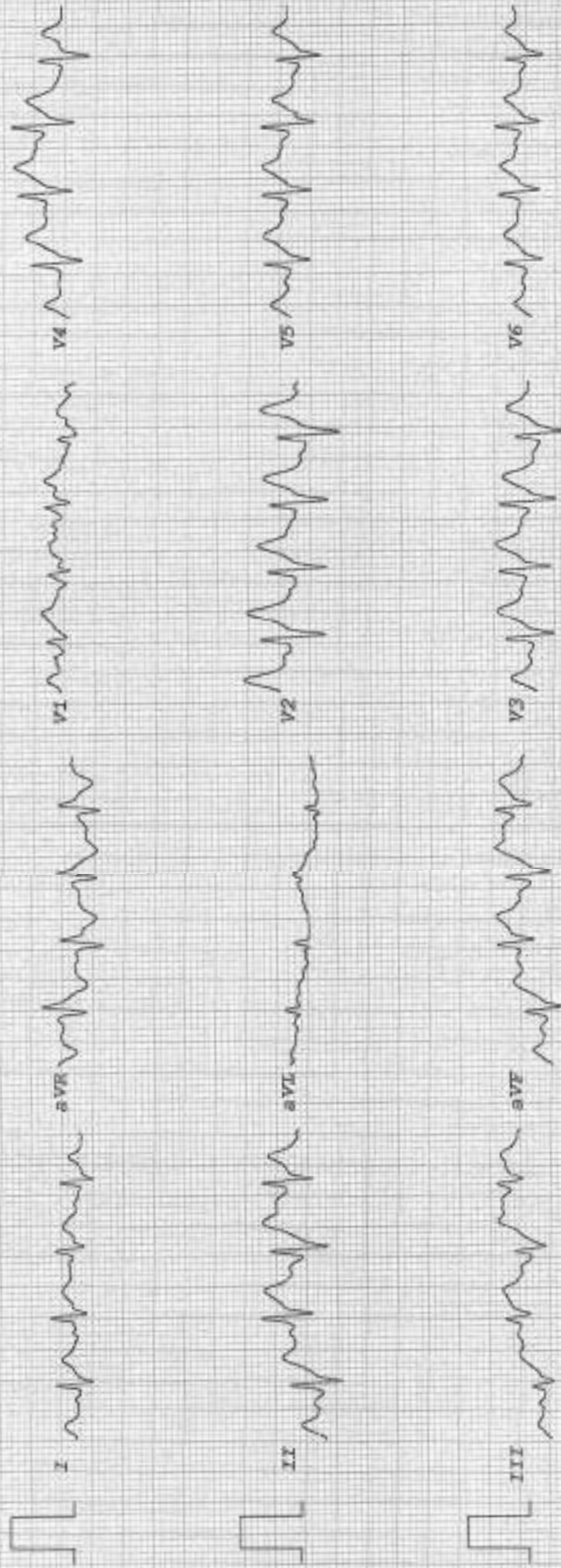
VIKAS KHANDEJI
I.D. 247
Age 35/M
Date 08/03/2024

RATE 132bpm
B.P. 140/80

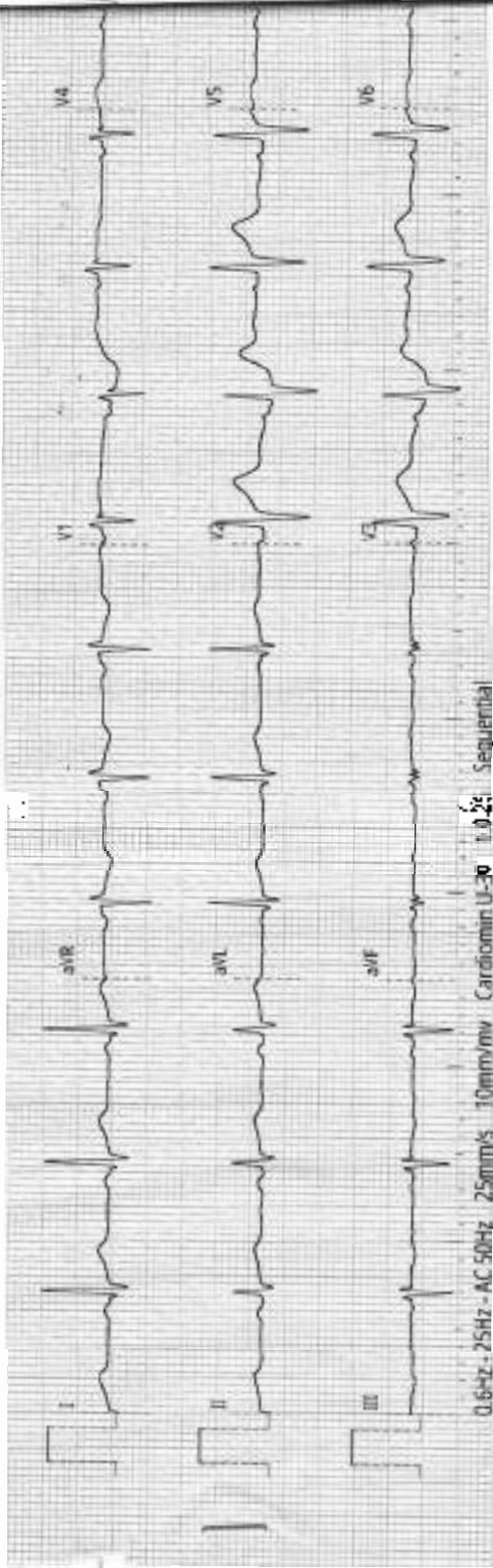
~~STUDY~~
study

ST @ 10mm/mV
80ms Postu
Speed 1.5 km/hr

RAW ECG



12



1

ECG report

ID : 20240309084924
Name :
Gender :
Age :
Dept :
Bed No :

HR : 81 bpm
PR : 122 ms
QRS : 92 ms
QT/QTc : 378/415 ms
p/QRS/T : 24/3/20 °
RV5/SV1 : 0.731/0.458 mv
RV5+SV1 : 1.189 mv

<< Interpretations >>

Confirm and sign:
Examination time: 2024-03-09 08:49:24

