



24633 140924

Name	: MR. MADHUR CHOPRA	Registration ID	: 24633	Sample Collection	: 14/09/2024 11:18:29
Age/Sex	: 39 Yrs. / M	Printed	: 16/09/2024 17:45:22	Sample Received	: 14/09/2024 11:18:29
Ref. By	: Mediwheel	Sent By	: Arcofemi Healthcare Pvt Ltd	Report Released	: 16/09/2024 12:18:01

COMPLETE BLOOD COUNT

Test	Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	: 16.2	g/dL	13-18 g/dL
Total RBC (Electrical Impedence)	: 5.67	10 ⁶ /μL	3.0-6.0 10 ⁶ /μL
Hematocrit (PCV) (Calculated)	: 49.5	%	36-54 %
Mean Corpuscular Volume (MCV) (calculated)	: 87.3	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	: 28.6	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated)	: 32.7	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	: 15.30	%	12-15 %
Total Leucocytes Count (Light Scattering)	: 7300	/cumm	4000-11000 /cumm
Neutrophils (Calculated)	: 52	%	40-75 %
Eosinophils Percentage (Calculated)	: 09	%	1-6 %
Lymphocyte Percentage (Calculated)	: 30	%	20-45 %
Basophils Percentage (Calculated)	: 0	%	0-1 %
Monocytes Percentage (Calculated)	: 09	%	1-10 %
RBC Morphology	: Normocytic, Normochromic		
WBC Morphology	: Eosinophillia		
Platelet Count (Electrical Impedence)	: 244000	/ul	150000-450000 /ul
Platelets on Smear	: Adequate		Adequate
E.S.R	: 18	mm at 1hr	0-20 mm at 1hr

Sample Type: EDTA whole blood (Westergren)

Sample Type : EDTA Whole Blood

Test done with THREE PART CELL COUNTER (Sysmex KX-21)

*All Samples Processed At Excellas Clinics Mulund Centre .

*ESR NOT IN NABL scope.

(Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 12:18:01)


Dr. Santosh Khairnar
 M.D. (Pathologist)
 Reg. No.-2000/08/2926




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Report Released : 16/09/2024 12:18:01

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



Santosh Khairnar

Dr. Santosh Khairnar
M.D. (Pathologist)
Reg. No.-2000/08/2926





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Sent By : Arcofemi Healthcare Pvt Ltd	

Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

Test	Result	Unit	Biological Ref. Range
GLUCOSE (SUGAR) FASTING, (Fluoride Plasma Used)	: 92	mg/dL	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >= 126 mg/dl
<i>Method: GOD-POD</i>			
Fasting Urine Glucose	: Absent		Absent
GLUCOSE (SUGAR) PP, (Fluoride Plasma Used)	: 96	mg/dl	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >= 200 mg/dl
PP Urine Glucose	: Absent		Absent

Test Done on - Automated Biochemistry Analyzer (EM 200)

*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 12:18:18)

HbA1c (Whole Blood)

Test	Result	Unit	Reference Range
HbA1c-Glycosylated Haemoglobin	: 4.80	%	Non-diabetic: 4-6 Excellent Control: 6-7 Fair to good control: 7-8 Unsatisfactory control: 8-10 Poor Control: >10
<i>EDTA Whole Blood, Method: HPLC</i>			
Estimated Average Glucose (eAG)	: 91.06	mg/dl	65.1-136.3 mg/dL mg/dl
<i>EDTA Whole Blood, Method: Calculated</i>			

Interpretation:

- The term HbA1c refers to Glycated Haemoglobin. Measuring HbA1c gives an overall picture of what the average blood sugar levels have been over a period of weeks/month. Higher the HbA1c, the greater the risk of developing diabetes-related complications.
- HbA1c has been endorsed by clinical groups and ADA (American Diabetes Association) guidelines 2012, for the diagnosis of diabetes using a cut-off point of 6.5%. ADA defined biological reference range for HbA1c is between 4-6%. Patients with HbA1c value between 6.0-6.5% are considered at risk for developing diabetes in the future. Trends in HbA1c area a better indicator of glucose control than standalone test.
- To estimate the eAG from the HbA1c value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$.
- Diabetic must aspire to keep values under 7% to avoid the various complications resulting from diabetes.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 12:18:30)



Santosh Khairnar
Dr. Santosh Khairnar
 M.D. (Pathologist)
 Reg. No.-2000/08/2926





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Registration ID : 24633

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Report Released : 16/09/2024 12:18:18

Ref. By : Mediwheel

Sent By : Arcofemi Healthcare Pvt Ltd

BLOOD GROUP

Test	Result	Unit	Biological Ref. Range
Blood Group	: 'B' Rh POSITIVE		

Slide and Tube Agglutination Test

(Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 12:18:50)

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



Dr. Santosh Khairnar
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Age/Sex : 39 Yrs. / M	Printed : 16/09/2024 17:45:22
Ref. By : Mediwheel	Report Released : 16/09/2024 12:19:37
Sent By : Arcofemi Healthcare Pvt Ltd	

LIPID PROFILE

Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: 199	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
<i>Serum, Method: CHOD-PAP</i>			
S. Triglyceride	: 166	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
<i>Serum, Method: GPO-Trinder</i>			
HDL Cholesterol	: 40	mg/dl	35.3-79.5 mg/dl
<i>serum,Direct method</i>			
LDL Cholesterol	: 125.80	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
<i>Serum, (Calculated)</i>			
VLDL Cholesterol	: 33.2	mg/dl	5-30 mg/dl
<i>Serum, Method: Calculated</i>			
LDL/HDL Ratio	: 3.1		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
<i>Serum, Method: Calculated</i>			
TC/HDL Ratio	: 5.0		Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0
<i>Serum, Method: Calculated</i>			

Test Done on - Automated Biochemistry Analyzer (EM 200).

Interpretation

1. Triglycerides: When triglycerides are very high greater than 1000 mg/dL, there is a risk of developing pancreatitis in children and adults. Triglycerides change dramatically in response to meals, increasing as much as 5 to 10 times higher than fasting levels just a few hours after eating. Even fasting levels vary considerably day to day. Therefore, modest changes in fasting triglycerides measured on different days are not considered to be abnormal.
2. HDL-Cholesterol: HDL- C is considered to be beneficial, the so-called "good" cholesterol, because it removes excess cholesterol from tissues and carries it to the liver for disposal.
3. LDL-Cholesterol: Desired goals for LDL-C levels change based on individual risk factors.

**All Samples Processed At Excellas Clinics Mulund Centre*

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Ref. By : Mediwheel

Sent By : Arcofemi Healthcare Pvt Ltd

LIVER FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total) <i>Serum, Method: Diazo (walter & Gerarde)</i>	: 0.97	mg/dl	0-2.0 mg/dl
S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter & Gerarde)</i>	: 0.18	mg/dl	0-0.4 mg/dl
S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i>	: 0.79	mg/dl	0.10-1.0 mg/dl
Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i>	: 46.6	IU/L	0-35 IU/L
Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i>	: 67	IU/L	0-45 IU/L
S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i>	: 89	IU/L	53-128 IU/L
Total Proteins <i>Serum, Method: Biuret</i>	: 7.4	gm/dl	6.4-8.3 gm/dl
S. Albumin <i>Serum, Method: BCG</i>	: 4.5	gm/dl	3.5-5.2 gm/dl
S. Globulin <i>Serum, Method: Calculated</i>	: 2.9	gm/dl	2.3-3.5 gm/dl
A/G Ratio <i>Serum, Method: Calculated</i>	: 1.55		0.90-2.00
Gamma GT <i>Serum, Method: G glutamyl carboxy nitroanilide</i> <i>Test Done on - Automated Biochemistry Analyzer (EM 200).</i>	: 42	U/L	0-55 U/L

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(Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 12:20:24)

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Age/Sex : 39 Yrs. / M Printed : 16/09/2024 17:45:22 Report Released : 16/09/2024 17:42:33
Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

SERUM CREATININE

Test	Result	Unit	Biological Ref. Range
S. Creatinine	: 0.98	mg/dl	0.7-1.3 mg/dl

Serum, Method: Enzymatic

Test Done on - Automated Biochemistry Analyzer (EM 200).

All Samples Processed At Excellas Clinics Mulund Centre(Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 17:42:33)***BLOOD UREA NITROGEN (BUN)**

Test	Result	Unit	Biological Ref. Range
Urea	: 23.54	mg/dl	19-45 mg/dl

Serum, Method: Urease - GLDH

Blood Urea Nitrogen : 11.00 mg/dl 5-18 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

All Samples Processed At Excellas Clinics Mulund Centre(Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 12:25:53)***SERUM URIC ACID**

Test	Result	Unit	Biological Ref. Range
S. Uric Acid	: 7.70	mg/dl	3.5-7.2 mg/dl

Serum, Method: Uricase - POD

Test Done on - Automated Biochemistry Analyzer (EM 200).

(Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 12:23:51)

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BUN CREAT RATIO (BCR)

Test	Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	: 11.22		5-20

Serum, Method: Calculated

NOTE:

A blood urea nitrogen (BUN)/creatinine ratio (BCR) >20 is used to distinguish pre-renal azotemia (PRA) and acute tubular necrosis (ATN)

(Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 17:42:51)

SERUM ALKALINE PHOSPHATASE

Test	Result	Unit	Biological Ref. Range
S. Alkaline Phosphatase	: 89	IU/L	53-128 IU/L

Serum, Method: IFCC with AMP buffer

Test Done on - Automated Biochemistry Analyzer (EM 200)

*All Samples Processed At Excellas Clinics Mulund Centre

(Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 12:25:25)

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



Dr. Santosh Khairnar
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Sent By : Arcofemi Healthcare Pvt Ltd	

THYROID FUNCTION TEST

Test	Result	Unit	Biological Ref. Range
Total T3	: 1.3	ng/dl	0.70-2.04 ng/dl
<i>Serum, Method: CLIA</i>			
Total T4	: 11.05	µg/dl	5.1-14.1 µg/dl
<i>Serum, Method: CLIA</i>			
TSH (Thyroid Stimulating Hormone)	: 2.72	µIU/ml	0.27-5.3 µIU/ml
<i>Serum, Method: CLIA</i>			

Interpretation Decreased TSH with raised or within range T3 and T4 is seen in primary hyperthyroidism, toxic thyroid nodule, sub-clinical hyperthyroidism, on thyroxine ingestion, post-partum and gestational thyrotoxicosis Raised TSH with decreased T3 and T4 is seen in hypothyroidism and with intermittent T4 therapy. Alterations in TSH are also seen in non-thyroidal illnesses like HIV infection, chronic active hepatitis, estrogen producing tumors, pregnancy, new-born, steroids, glucocorticoids and may cause false thyroid levels for thyroid function tests as with increased age, marked variations in thyroid hormones are seen. In pregnancy T3 and T4 levels are raised, hence FT3 and Ft4 is to be done to determine hyper or hypothyroidism.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.

(Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 12:23:27)

PROSTATE SPECIFIC ANTIGEN

Test	Result	Unit	Biological Ref. Range
PSA - TOTAL	: 1.13	ng/ml	0- 4 ng/ml
Serum, Method: CLIA			

NOTE :

Prostate specific antigen is a seminal fluid protein produced by normal and malignant epithelial cells of prostate gland and is recognized as a tumour marker for evaluation of prostate cancer activity.

In normal individuals, S.PSA levels do not exceed 4.0 ng/ml.

S.PSA level is useful in detection of cancer of prostate gland and in detection of recurrence of prostate cancer after radical prostatectomy. Serum PSA levels may also be elevated in conditions like BPH, UTI, Digital rectal examination, Transurethral ultrasonography. Confirmation of prostate cancer can be done by transrectal ultrasonography and prostate biopsy.

(Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 12:22:16)

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



Dr. Santosh Khairnar
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Age/Sex : 39 Yrs. / M	Printed : 16/09/2024 17:45:22
Ref. By : Mediwheel	Report Released : 16/09/2024 12:22:47
Sent By : Arcofemi Healthcare Pvt Ltd	

VITAMIN D3

Test	Result	Unit	Biological Ref. Range
25 (OH) VIT D	: 3.7	ng/ml	Deficient : Less than or equal to 20, Insufficient : 21 - 29, Sufficient : More than or equal to 30

Note:
 Vitamin D deficiency can be associated with rickets in children; osteoporosis and secondary hyper-parathyroidism in adults. Recent studies have established a link between low circulating vitamin D levels and an increasing risk of Diabetes, cardiovascular or autoimmune diseases as well as various forms of cancer. Vitamin D testing has become an assay of general health status.
 Vitamin D is found mainly in two forms; vitamin D2 (ERGOCALCIFEROL) and vitamin D3 (CHOLECALCIFEROL).
 Vitamin D3 is synthesized by action of solar ultraviolet radiation on the skin. It is also present in food (mostly in fatty fish) . Vitamin D2 is from exogenous origin only. Small amounts of vitamin D2 are present in food (mushrooms and vegetables). Both vitamin D2 and D3 are used for medical supplementation and are identically metabolized by the body.
 The active form of the molecule is the 1,25-(OH)₂ vitamin D (Calcitriol) which is obtained from vitamin D through two successive hydroxylation reactions. The first hydroxylation occurs in the liver to yield 25(OH)vitamin D (calcidiol) The second hydroxylation occurs in the kidney and other tissues as well to yield biologically active 1,25 -(OH)₂ Vitamin D. The 25-(OH) Vitamin D is the main storage form of vitamin D in the human body. It is found in high concentrations in serum or plasma which makes 25 - (OH) Vitamin D the preferred analyte for the determination of vitamin D nutritional status.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.
 (Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 12:22:47)

VITAMIN - B12

Test	Result	Unit	Biological Ref. Range
Vitamin B12	: 110.0	pg/ml	183 - 822 pg/ml

Method: ECLIA
 Vitamin B12 deficiency impacts red blood cell synthesis, resulting in megaloblastic anemia due to abnormal DNA synthesis. In addition it impairs neurological function, in particular de-myelination of nerves in part due to abnormal methylation, leading to peripheral neuropathy, dementia, poor cognitive performance and depression. Other effects of Vitamin B12 deficiency or depletion are increased risk of neural tubular defects , osteoporosis, cerebro-vascular and cardiovascular diseases. Vit B12 levels are decreased in megalobstic anemia, partial/total gastrectomy, pernicious anemia, peripheral neuropathies, chronic alcoholism, senile dementia and treated epilepsy. An associated increase in homocysteine levels is an independent risk marker for cardiovascular disease and deep vein thrombosis. Holo Transcobalamin II levels are more accurate marker of active Vitamin B12 component. High levels of Vitamin B12 may be due to exogenous supplementation.

*Note - This test is outsourced and processed at Millenium Special Labs Pvt Ltd.
 (Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 12:24:16)

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



[Signature]
Dr. Santosh Khairnar
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Ref. By : Mediwheel	Sent By : Arcofemi Healthcare Pvt Ltd	Report Released : 16/09/2024 12:24:52

EXAMINATION OF URINE

Test	Result	Unit	Biological Ref. Range
<u>PHYSICAL EXAMINATION</u>			
Quantity :	20	ml	
Colour :	Pale yellow		
Appearance :	Clear		
Reaction (pH) :	5.0		4.5 - 8.0
Specific Gravity :	1.010		1.010 - 1.030
<u>CHEMICAL EXAMINATION</u>			
Protein :	Absent		Absent
Glucose :	Absent		Absent
Ketones Bodies :	Absent		Absent
Occult Blood :	Absent		Absent
Bilirubin :	Absent		Absent
Urobilinogen :	Absent		Normal
<u>MICROSCOPIC EXAMINATION</u>			
Epithelial Cells :	2-4	/ hpf	
Pus cells :	2-3	/ hpf	
Red Blood Cells :	Absent	/ hpf	
Casts :	Absent	/ lpf	Absent / lpf
Crystals :	Absent		Absent
<u>OTHER FINDINGS</u>			
Yeast Cells :	Absent		Absent
Bacteria :	Absent		Absent
Mucus Threads :	Absent		
Spermatozoa :	Absent		
Deposit :	Absent		Absent
Amorphous Deposits :	Absent		Absent

sample type:Urine

Method:Visual and Microscopic

(Collected At: 14/09/2024 11:18:29, Received At: 14/09/2024 11:18:29, Reported At: 16/09/2024 12:24:52)

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


Dr. Santosh Khairnar
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X RAY CHEST PA VIEW

Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

Bony thorax appears normal.

Soft tissues appear normal.

IMPRESSION:

No significant abnormality detected.



Dr. Reshma Gokran
MD (Radiologist)
Reg. No-2009/09/3296





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Printed : 16/09/2024 17:45:22

Report Released : 14/09/2024 17:21:10

Ref. By : Mediwheel

Sent By : Arcofemi Healthcare Pvt Ltd



MR. MADHUR CHOPRA. AGE:-39YRS/MALE. R23 CHEST PA 14-Sep-24 11:49 AM

EXCELLAS CLINICS PVT LTD TEL:-022-25695661/71



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Report Released : 14/09/2024 17:21:10

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



Dr. Reshma Gokran
MD (Radiologist)
Reg. No-2009/09/3296



EXERCISE TEST REPORT
 B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai
 141/MADHUR CHOPRA 39 Yrs/Male 86 Kg/181 Cms
 Date: 14-Sep-2024 12:06:11 PM

Summary

Ref. By : MEDIWHEEL

Protocol : BRUCE

Medication : NIL

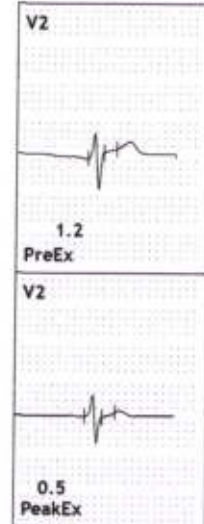
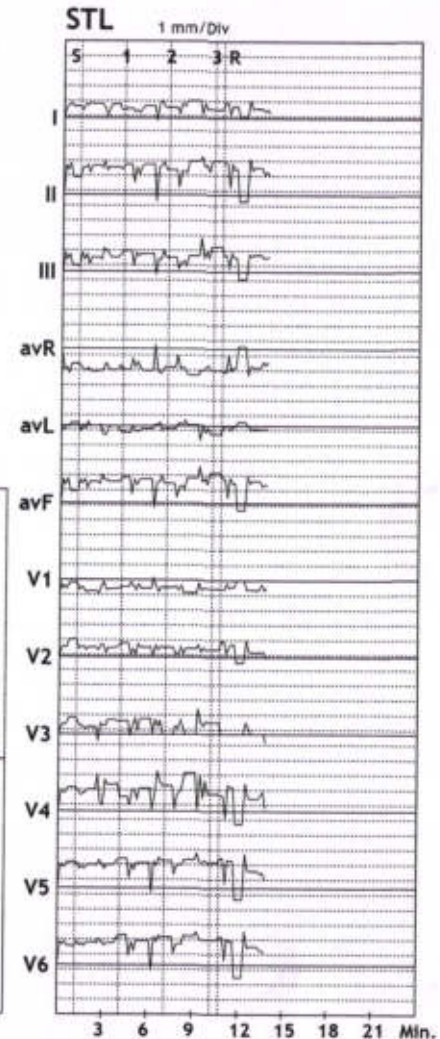
History : NIL

Stage	Stage Time (Min:Sec)	Phase Time (Min:Sec)	Speed (kmph)	Grade (%)	METs	H.R. (bpm)	B.P. (mmHg)	R.P.P. (x100)	PVC	Comments
Supine					1.0	94	120/80	112	-	
Standing					1.0	72	120/80	86	-	
HV					1.0	85	120/80	102	-	
ExStart					1.0	89	120/80	106	-	
Stage 1	3:00	3:01	2.7	10.0	4.6	102	120/80	122	-	
Stage 2	3:00	6:01	4.0	12.0	7.0	116	130/80	150	-	
Stage 3	3:00	9:01	5.5	14.0	10.2	141	140/90	197	-	
PeakEx	0:35	9:36	6.8	16.0	10.9	154	140/90	215	-	
Recovery	1:00		0.0	0.0	4.3	128	140/90	179	-	
Recovery	2:00		0.0	0.0	1.0	112	140/90	156	-	
Recovery	3:00		0.0	0.0	1.0	106	130/80	137	-	
Recovery	3:09		0.0	0.0	1.0	95	130/80	123	-	

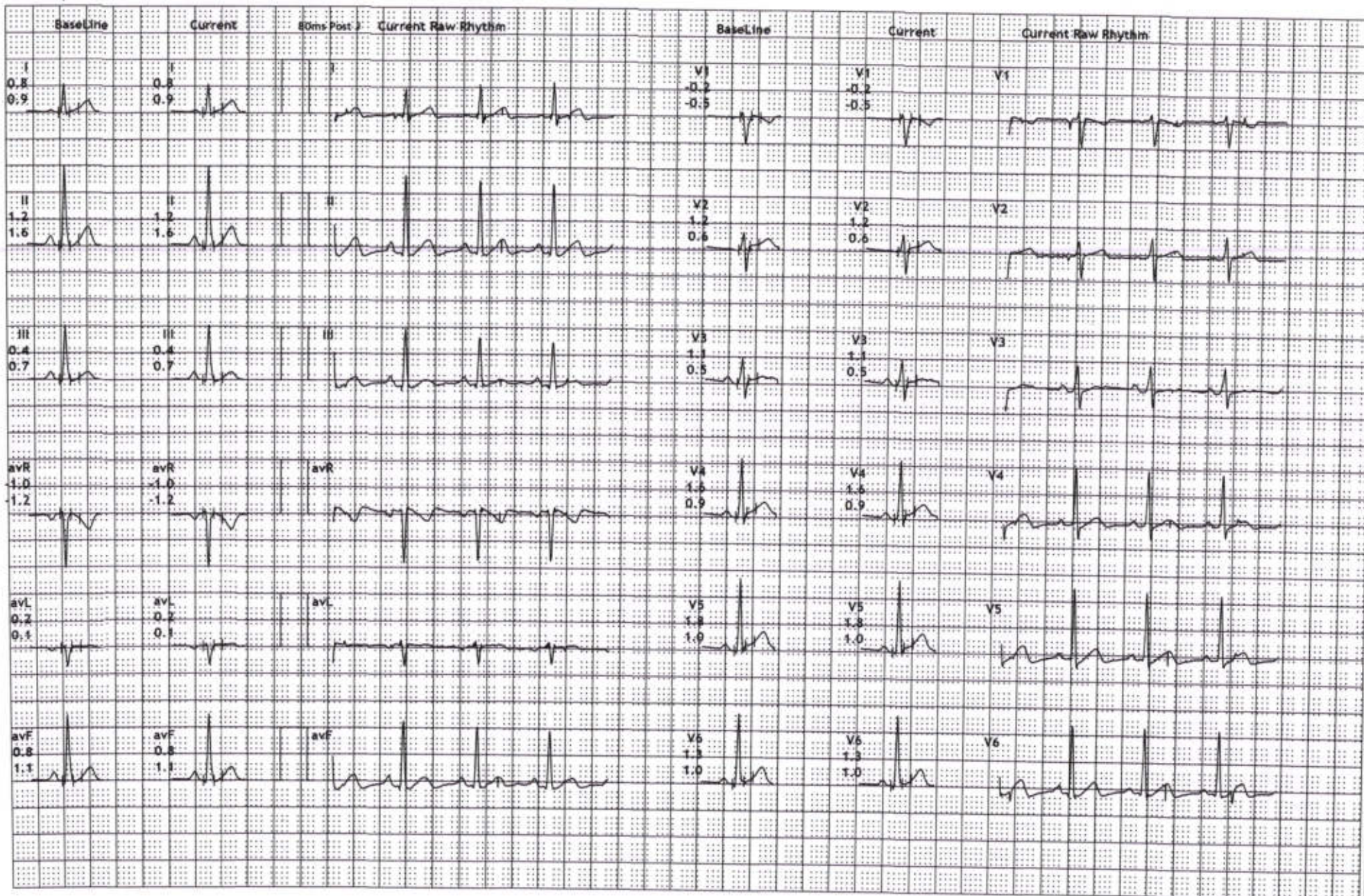
Findings :

Exercise Time : 9:36 minutes
 Max HR attained : 154 bpm 85% of Max Predictable HR 181
 Max BP : 140/90(mmHg)
 WorkLoad attained : 10.9 (Good Effort Tolerance)
 No significant ST segment changes noted during exercise or recovery.
 No Angina/Arrhythmia/S3/murmur
 Final Impression : Test is negative for inducible ischaemia.
 Maximum Depression: 9:36

Advice/Comments:



Mansi
DR. MANSI SOLANKI
 MBBS MD GENERAL MEDICINE
 REG. NO. MMC 2024042065



B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai

141/MADHUR CHOPRA

39 Yrs/Male

86 Kg/181 Cms

Date: 14-Sep-2024 12:06:11 PM

HR: 86 bpm

METS: 1.0

BP: 120/80

MPHR: 47% of 181

Speed: 0.0 kmph

Grade: 0.0%

12 Lead Comparison

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 00:48

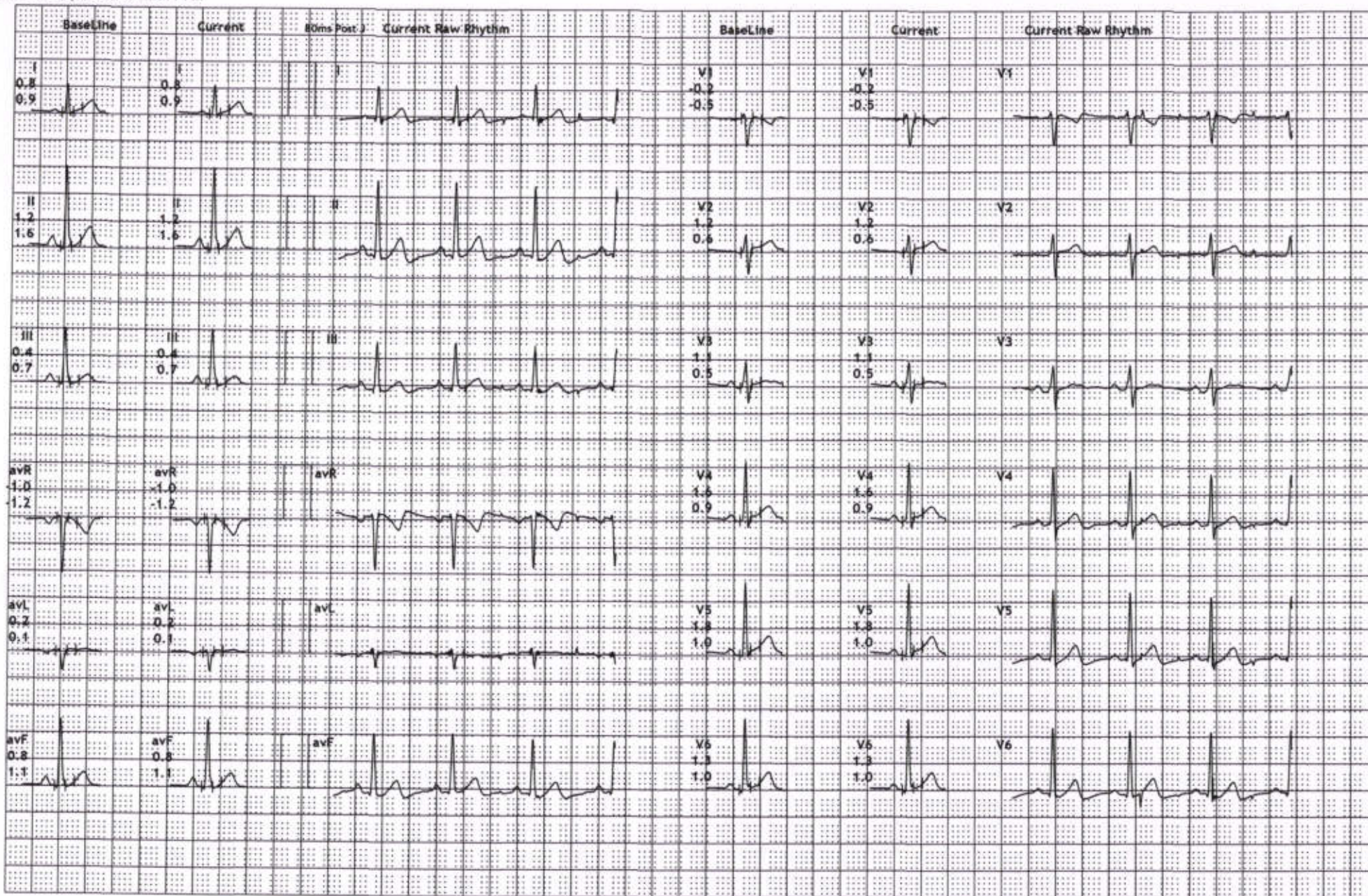
BLC :On

Notch :On

STANDING

10.0 mm/mV

25 mm/Sec.



B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai

141/MADHUR CHOPRA

39 Yrs/Male

86 Kg/181 Cms

Date: 14-Sep-2024 12:06:11 PM

HR: 87 bpm

METS: 1.0

BP: 120/80

MPHR: 48% of 181

Speed: 0.0 kmph

Grade: 0.0%

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 01:00

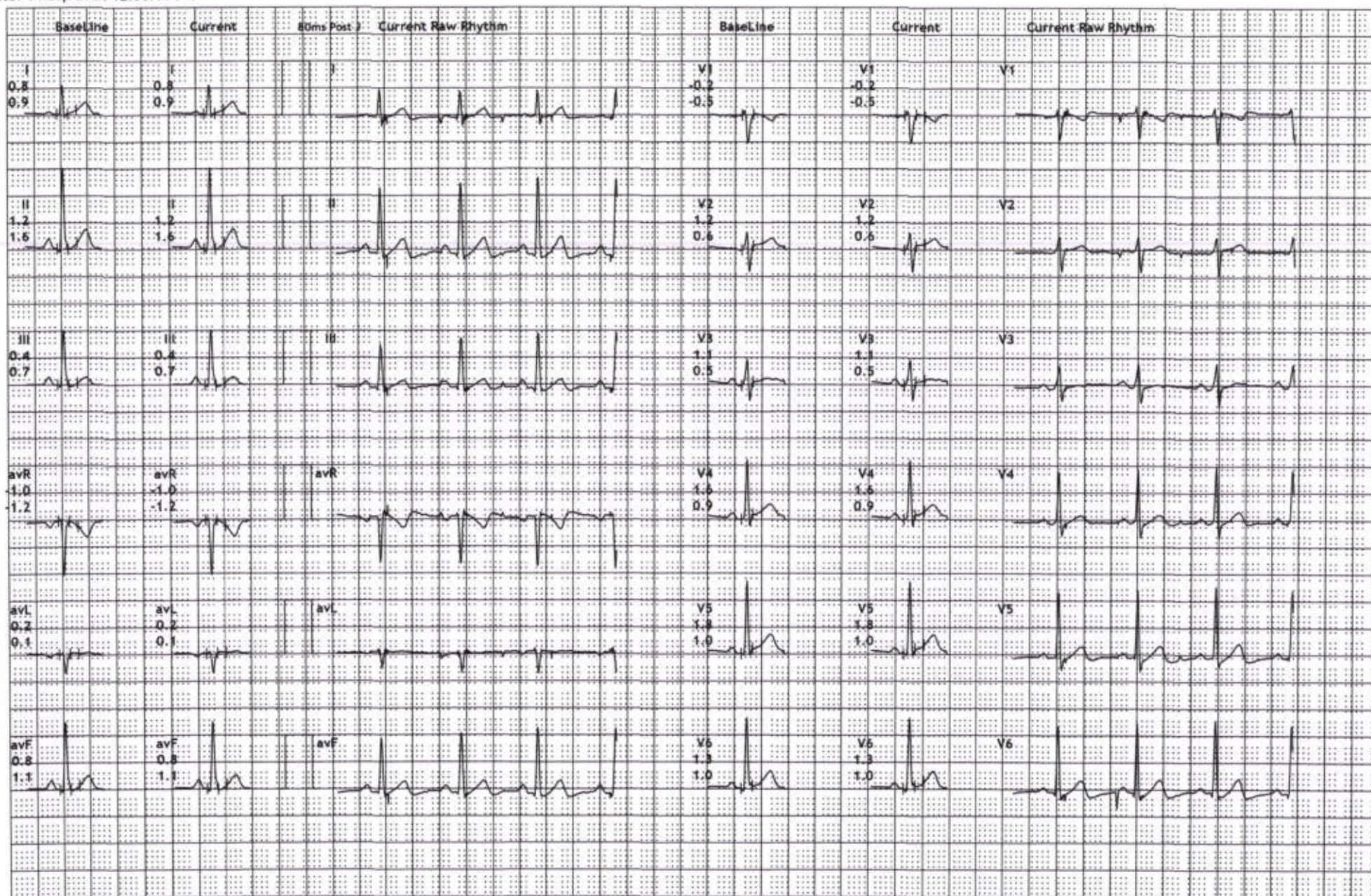
BLC :On

Notch :On

HV

10.0 mm/mV

25 mm/Sec.



B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai

141/MADHUR CHOPRA

39 Yrs/Male

86 Kg/181 Cms

Date: 14-Sep-2024 12:06:11 PM

HR: 89 bpm

METS: 1.0

BP: 120/80

MPHR: 49% of 181

Speed: 0.0 kmph

Grade: 0.0%

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 00:00

BLC :On

Notch :On

ExStrt

10.0 mm/mV

25 mm/Sec.



B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai

141/MADHUR CHOPRA

39 Yrs/Male

86 Kg/181 Cms

Date: 14-Sep-2024 12:06:11 PM

HR: 102 bpm

METS: 4.6

BP: 120/80

MPCR: 56% of 181

Speed: 2.7 kmph

Grade: 10.0%

12 Lead Comparison

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 03:00

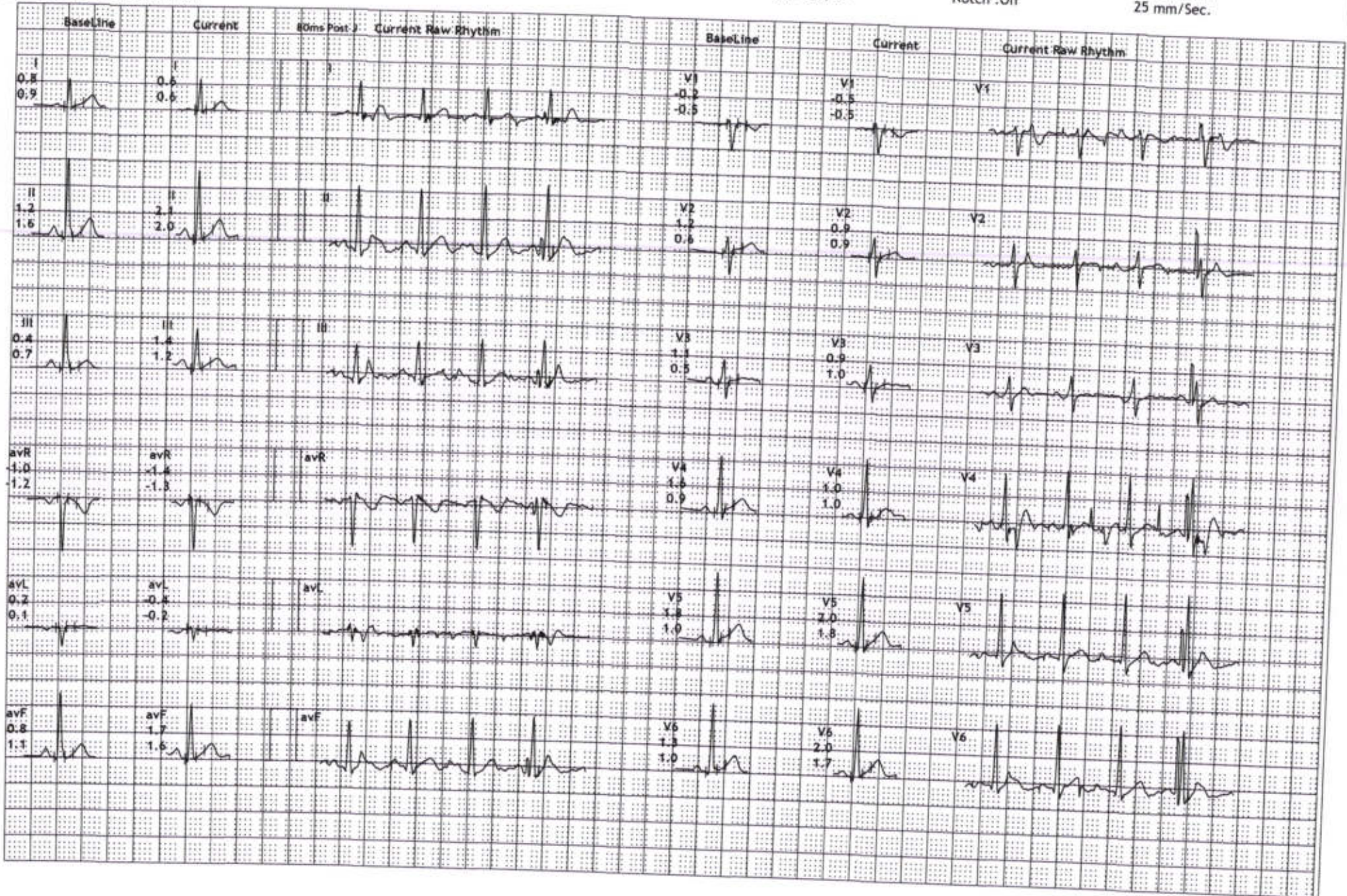
BLC :On

Notch :On

Stage 1 (03:00)

10.0 mm/mV

25 mm/Sec.



B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai

141/MADHUR CHOPRA

39 Yrs/Male

86 Kg/181 Cms

Date: 14-Sep-2024 12:06:11 PM

HR: 116 bpm

METS: 7.0

BP: 130/80

MPCR: 64% of 181

Speed: 4.0 kmph

Grade: 12.0%

12 Lead Comparison

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 06:00

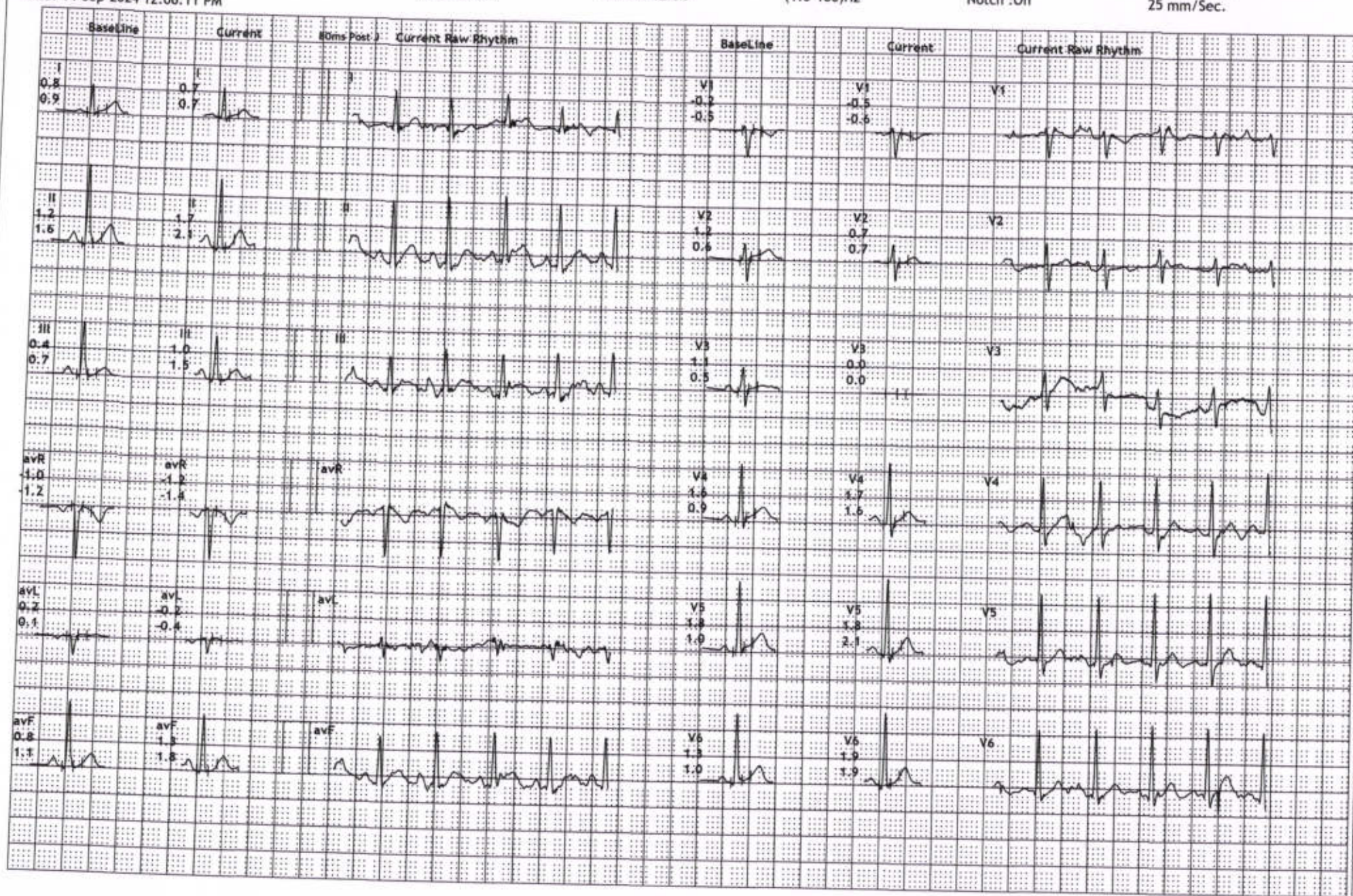
BLC :On

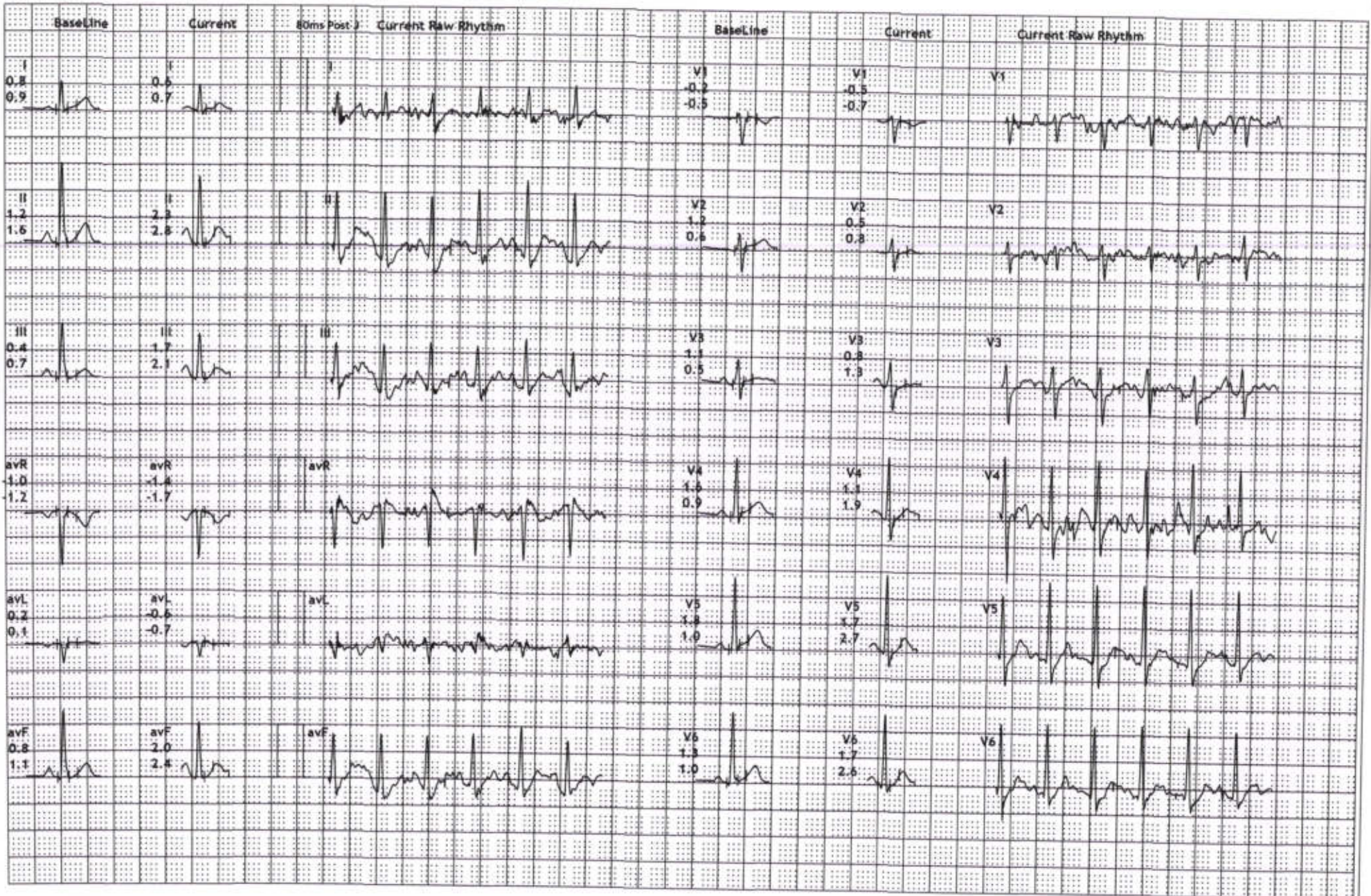
Notch :On

Stage 2 (03:00)

10.0 mm/mV

25 mm/Sec.





B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai
 141/MADHUR CHOPRA
 39 Yrs/Male
 86 Kg/181 Cms
 Date: 14-Sep-2024 12:06:11 PM

HR: 154 bpm
 METS: 10.9
 BP: 140/90

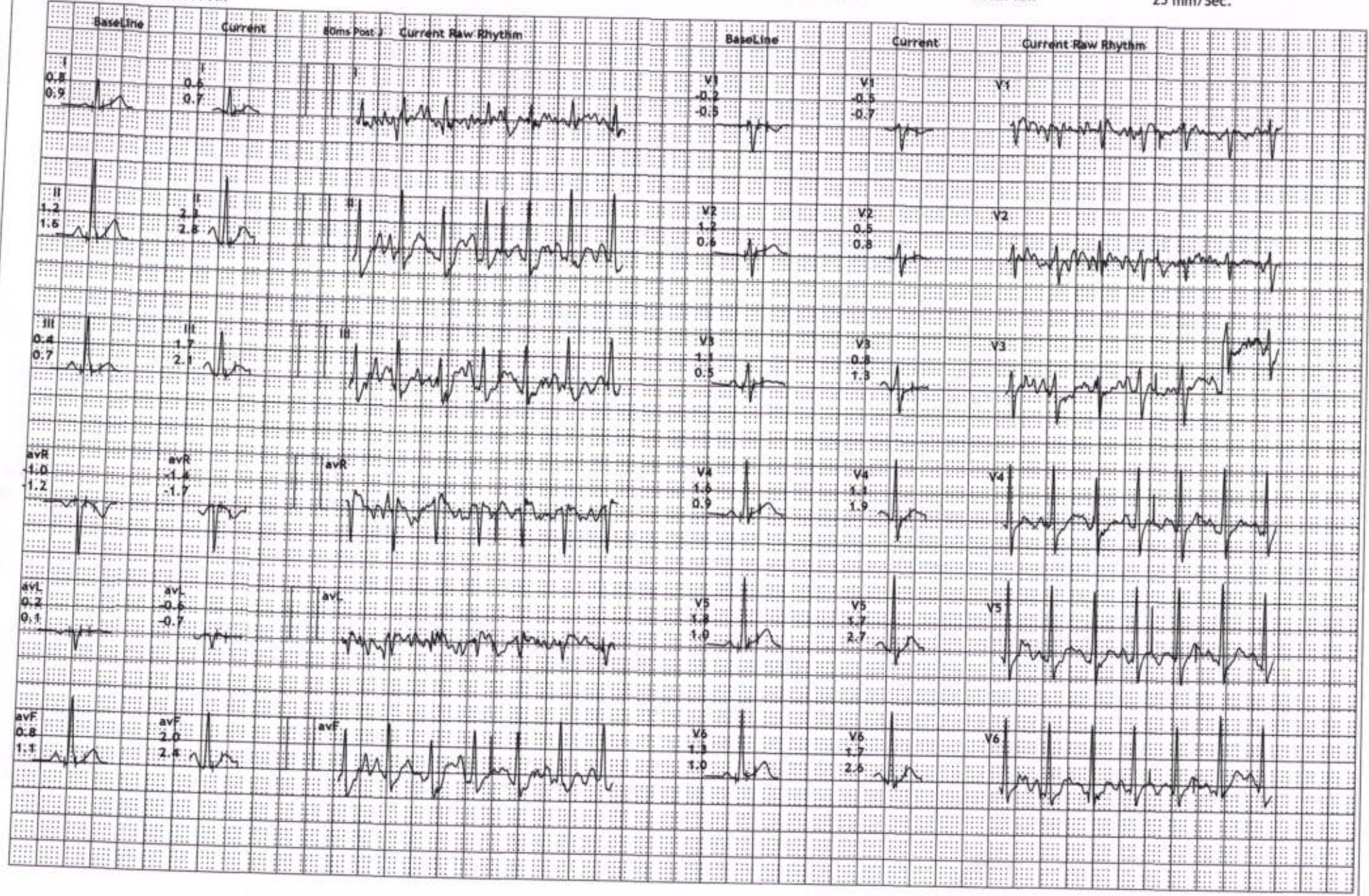
MPH: 85% of 181
 Speed: 6.8 kmph
 Grade: 16.0%

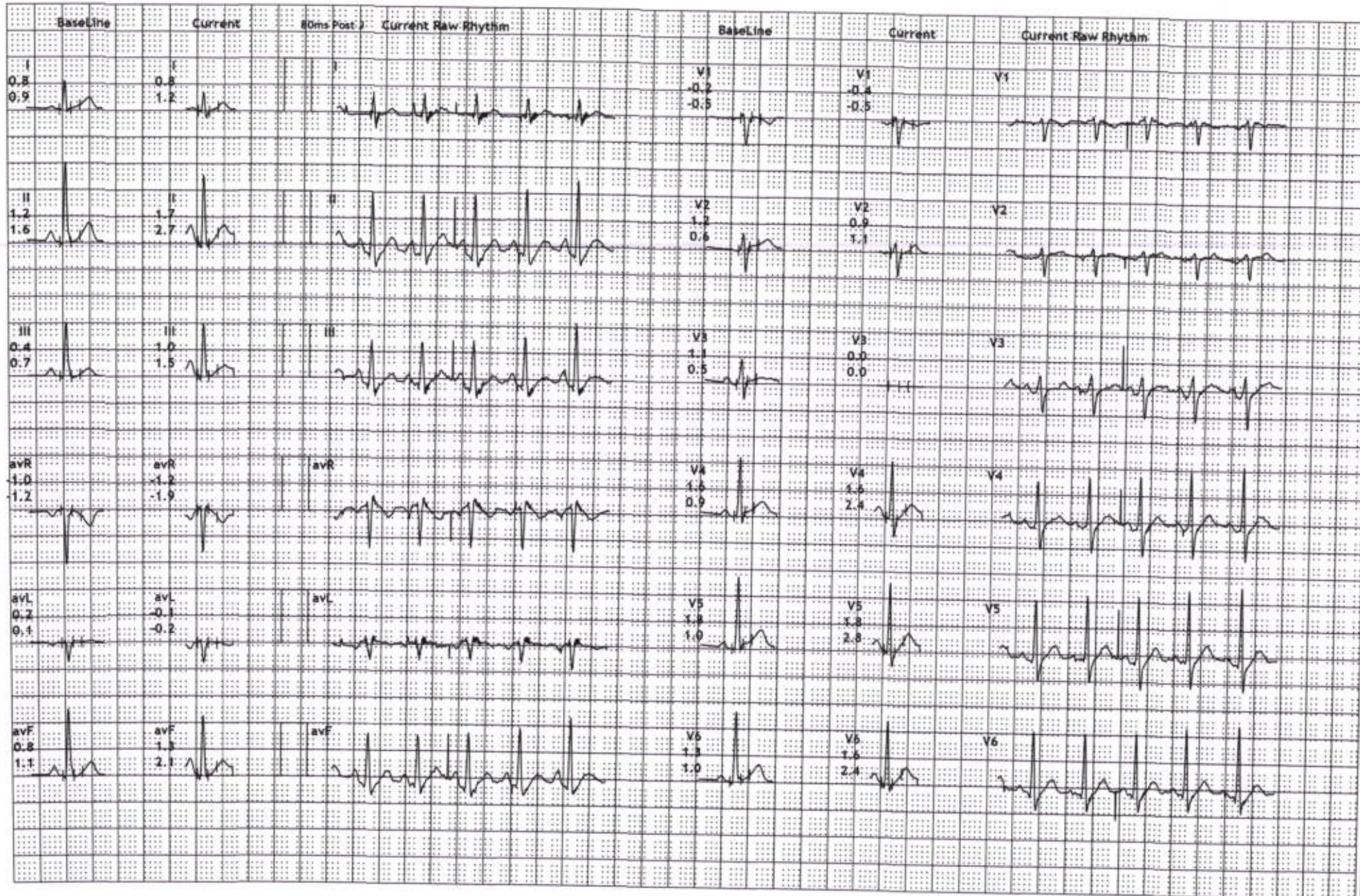
12 Lead Comparison

Raw ECG
 BRUCE
 (1.0-100)Hz

Ex Time 09:35
 BLC :On
 Notch :On

PeakEx
 10.0 mm/mV
 25 mm/Sec.





B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai

141/MADHUR CHOPRA

39 Yrs/Male

86 Kg/181 Cms

Date: 14-Sep-2024 12:06:11 PM

HR: 130 bpm

METS: 2.8

BP: 140/90

MPHR: 71% of 181

Speed: 0.0 kmph

Grade: 0.0%

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 09:35

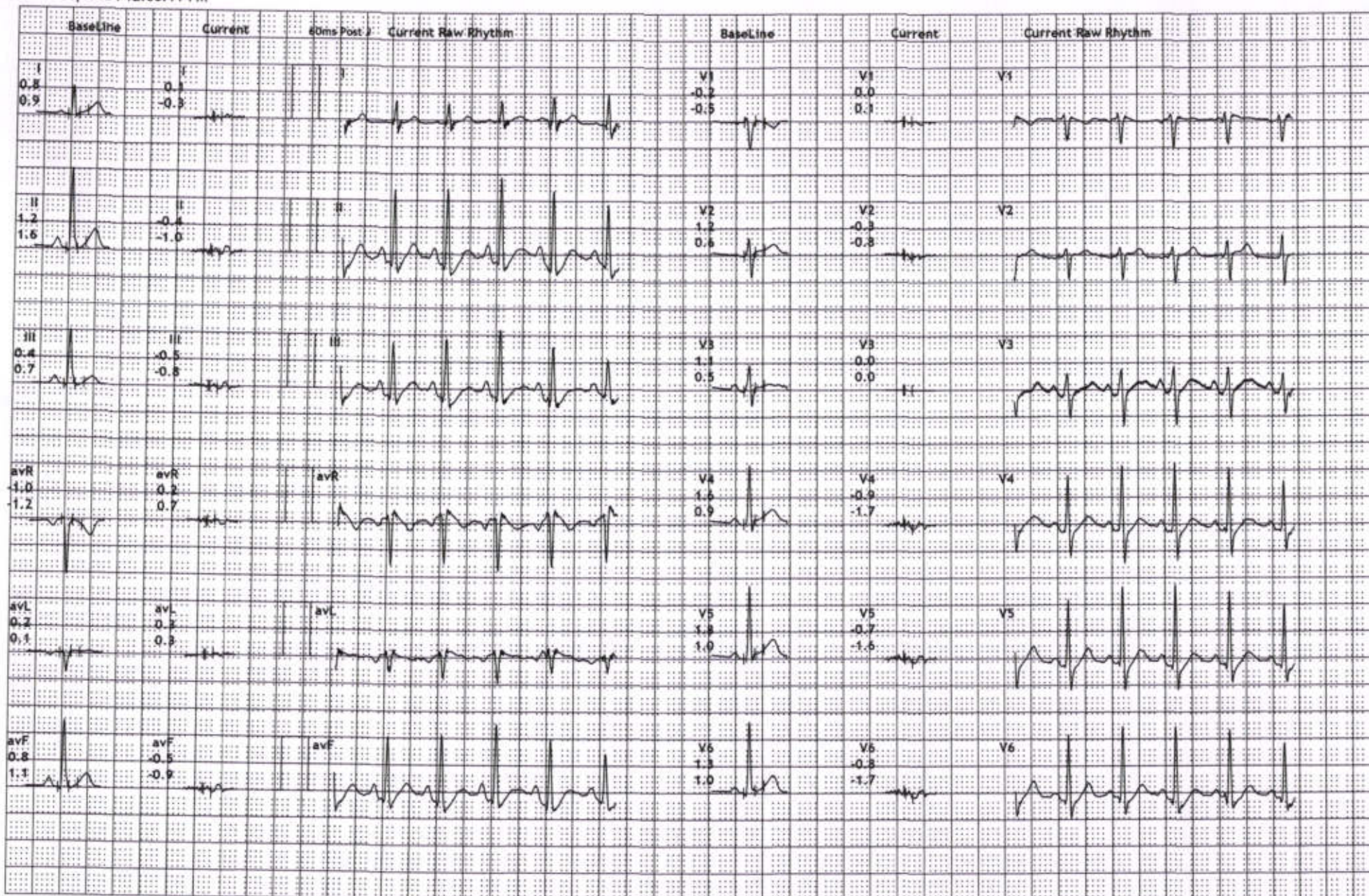
BLC :On

Notch :On

Recovery : (01:13)

10.0 mm/mV

25 mm/Sec.



B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai

141/MADHUR CHOPRA

39 Yrs/Male

86 Kg/181 Cms

Date: 14-Sep-2024 12:06:11 PM

HR: 106 bpm

METS: 1.0

BP: 130/80

MpHR: 58% of 181

Speed: 0.0 kmph

Grade: 0.0%

12 Lead - Comparison

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 09:35

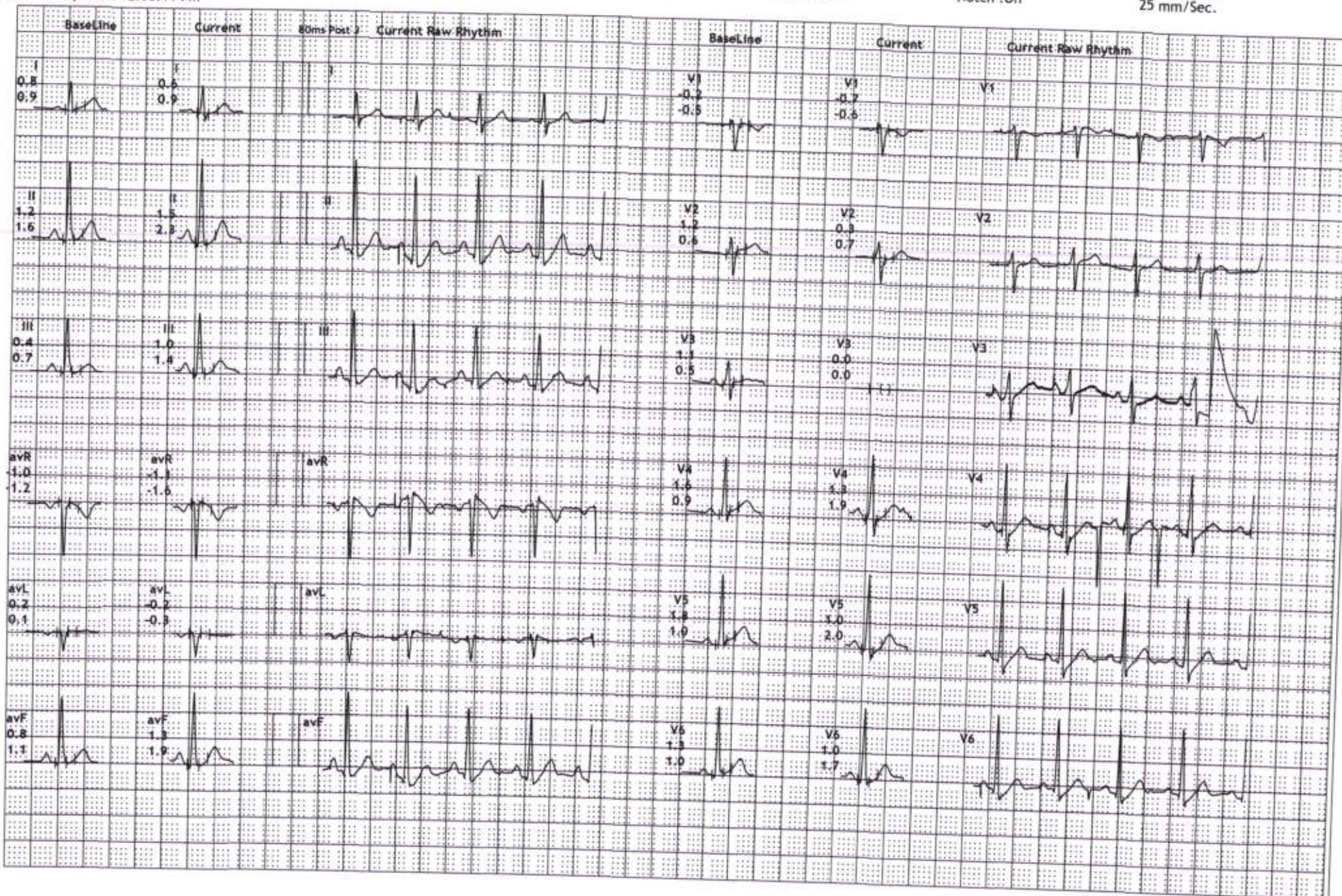
BLC :On

Notch :On

Recovery : (03:00)

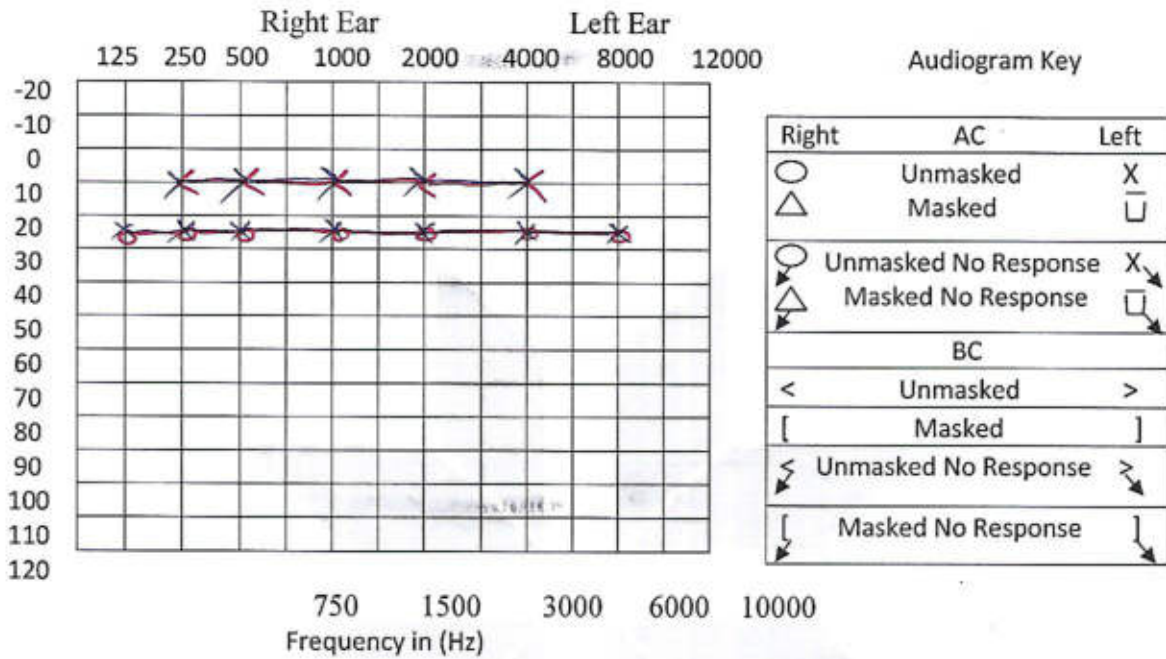
10.0 mm/mV

25 mm/Sec.



NAME : MR. MADHUR CHOPRA	AGE/SEX: 39 YRS/MALE
REF BY : MEDIWHEEL	DATE: 14/09/2024

AUDIOGRAM



Responses : Reliable / Fairly Reliable / Not Reliable

Speech Audiometry

Test Conduction : Satisfactory / Not Satisfactory

If any other specify

Procedure : Standard / Play

Audiological Interpretations :

Test Ear	P.T.A. dBHL
Right	25
Left	25

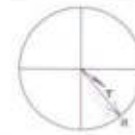
BILATERAL HEARING CONDUCTION SENSITIVITY WITHIN NORMAL LIMITS

EXCELLAS CLINICS PVT. LTD
B-1, Vikas Paradise Commercial,
Below Axis Bank, LBS Marg,
Near Sandeshi Mata Mandir,
Mulund (West), Mumbai - 400080
AUDIOLOGIST

Excellas Clinics Private Ltd

B1, Vikas Paradise Commercial, Below Axis Bank, LBS Marg, Mulund (W),
9438/Madhur Chopra 39Yrs/Male Kgs/ Cms BP: ___/___ mmHg
Ref.: Test Date: 14-Sep-2024(09:32:28) Notch: 50Hz 0.05Hz - 100Hz 10mm/mV 25mm/Sec

HR: 65 bpm



PR Interval: 144 ms
QRS Duration: 84 ms
QT/QTc: 360/377ms
P-QRS-T Axis: 61 - 50 - 36 (Deg)



DR. MANSI SOLANKI
MBBS MD GENERAL MEDICINE
REG NO. MHC 2024042065

*NS RW 106 Manu
correlate clinically*