

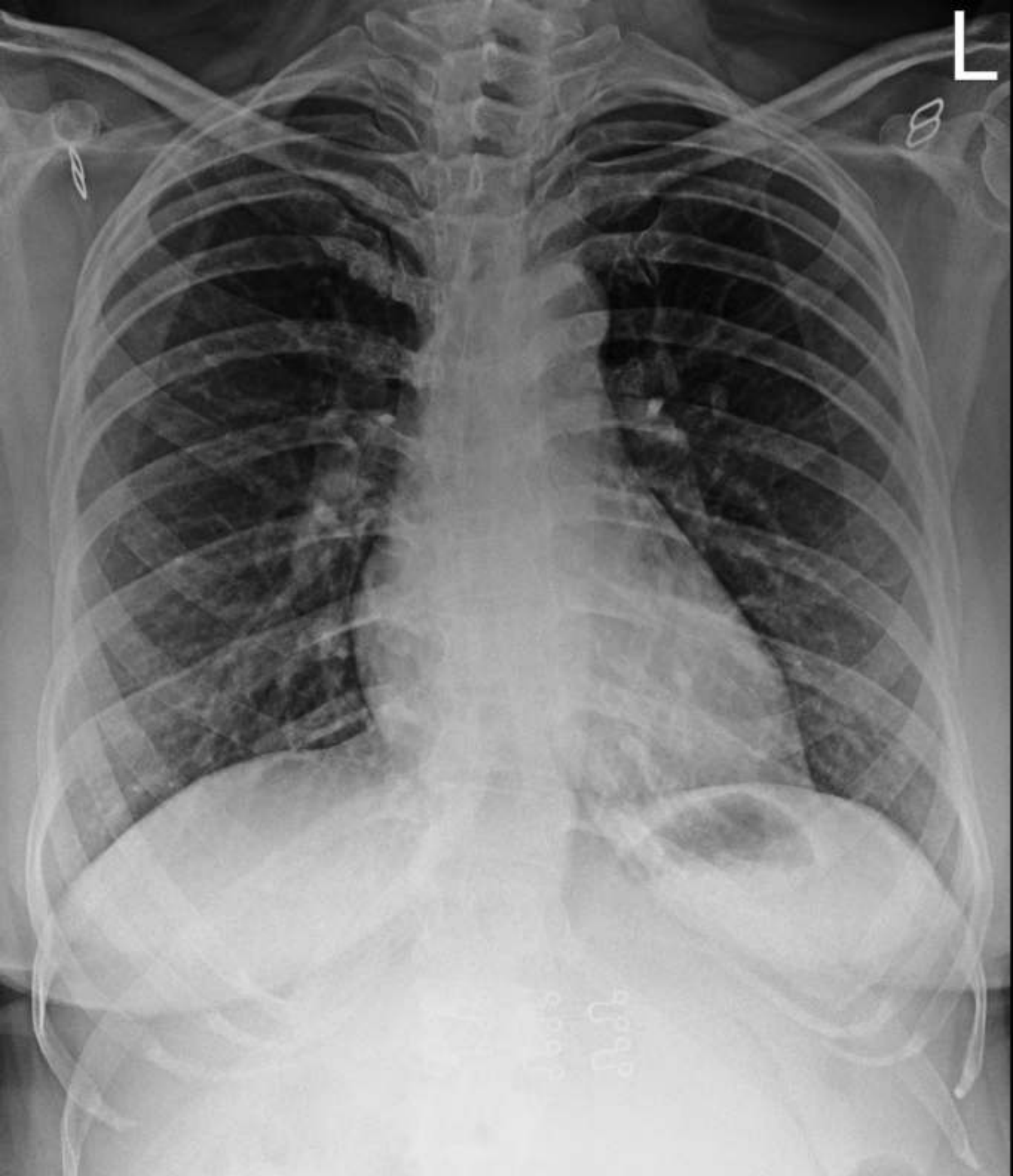
DATE: 11-01-20NAME: Merugu Naga ManiAGE: 41/A ADDRESS: _____TYPE OF LENS: GLASS CONTACTS CR POLYCARBONATE COATINGS : ARC HARD COAT TINT : White SP2 PHOTO GREY BIFOCALS : KRYPTOK EXECUTIVE "D" PROGRESSIVE

	R			L		
	SPH	CYL	AXIS	SPH	CYL	AXIS
DV	<u>0L</u>	<u>+0.50</u>	<u>160</u>	<u>0L</u>		
ADD		<u>+1.50</u>		<u>Note eyes</u>		

INSTRUCTIONS _____

I.P.D. _____ D.V. _____

N.V. _____ CONSTANT USE



MERUGU NAGA MANI 38Y FEMALE YGT39324 CHEST PA 11-Nov-23

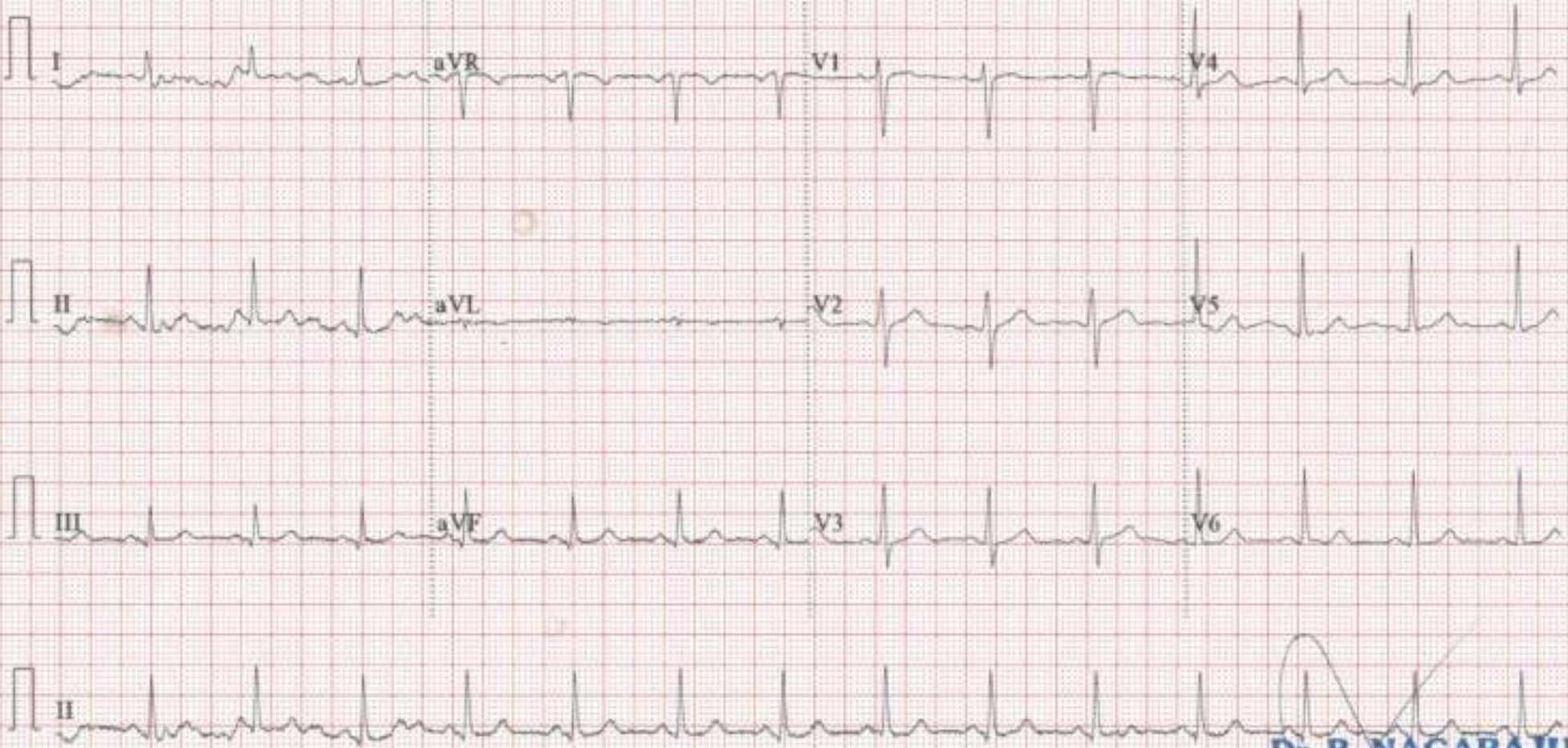
YODA DIAGNOSTICS

ID: 39324
Merugu Nagamani
Female 38Years
Req. No. :

11-11-2023 11:05:57
HR : 85 bpm
P : 97 ms
PR : 131 ms
QRS : 84 ms
QT/QTcBz : 356/425 ms
P/QRS/T : 63/61/72 °
RV5/SV1 : 1.349/0.952 mV

Diagnosis Information:
Sinus Rhythm
Normal ECG

Report Confirmed by:



Dr. B. NAGARAJU
Regd. No: 70760 MBBS, M.D, DM
CONSULTANT CARDIOLOGIST
YODA DIAGNOSTICS-GUNTUR

Reset



भारतीय विधिक न्याय प्रणाली

भारत सरकार

Unique Identification Authority of India

Government of India



E-Aadhaar Letter

Signature No: 201162751840

PRINTED COPY

Neeta Mani Menaga (an adult female)

330 Menaga Venkateswara, T1 20A, NEHRU NAGAR,
GODOWN CENTRE, Nellore District, Andhra Pradesh,
Andhra Pradesh - 521104

To view copy Your Aadhaar No:

2644 5611 4624



एअर-आम अदमी का अधीकार



- Aadhaar is valid throughout the country.
- You need to enter only once the Aadhaar.
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- You need to enter only once the Aadhaar.
- Please update your mobile number and e-mail address. The address you found when you came to India.



भारत सरकार

Unique Identification Authority of India



एअर-आम अदमी

Neeta Mani Menaga
एअर-आम अदमी का अधीकार
201162751840



2644 5611 4624

एअर-आम अदमी का अधीकार



भारतीय विधिक न्याय प्रणाली

भारत सरकार

आधार

330 Menaga Venkateswara, T1
20A, NEHRU NAGAR,
GODOWN CENTRE, Nellore District,
Andhra Pradesh - 521104

आधार
330 Menaga Venkateswara, T1
20A, NEHRU NAGAR,
GODOWN CENTRE, Nellore District,
Andhra Pradesh - 521104

2644 5611 4624

Aadhaar-Aam Admi ka Adhikar



Edit

Annotate

Fill & Sign

Convert

All



Name: Mrs. Merugu Nagamani
Date: 11/11/2023 Age: 38 years Sex: Female
Address: Guntur



Routine Health checkup

NO COMPLAINTS

NO H/O HTN / DM / CAD / PTB

TEMP: 98
B.P: 110/70 mmHg
PULSE: 87/min
WEIGHT: 71 kg
HEIGHT: 151 cm

USG - Abdomen
cholelithiasis

LDL - 132 mg/dl

HbA1c - 5.2%

1) Low Fat Diet

2) Daily Exercise

3) Tab. JAKROSE 10mg

O-T - (30)

4) Cap. PPBLOCK-DER

TO CONSULT
General Surgeon

Dr. KEERTHI KISHORE NAGALLA
Regd.No: 64905 MBBS, M.D. General Medicine
CONSULTANT GENERAL PHYSICIAN
YODA DIAGNOSTICS-GUNTUR

Name: Mrs. Manjula Madamani
 Date: 11/11/2023 Age: 38 years Sex: Female
 Address: Coastal



LMP - 20 days back

MFA 13y 25

Pelvic $\left\{ \begin{array}{l} 0-10yr \\ 0-7yr \end{array} \right\}$ USG

BIC breast thyroid

MHU

3 days $\left\{ \begin{array}{l} \text{Noon flow} \\ \text{no clots} \oplus \\ \text{no dysmenorrhea} \end{array} \right.$

28 days

TEMP: 37.2
 B.P: 110/70 mm/Hg
 PULSE: 87 b/min
 WEIGHT: 71 kgs
 HEIGHT: 157 cms

DPV (+)

PA - soft, not tender.

PLS - Cervix healthy
 thick DPV (+)

PLV - Cervix os downward
 ut Atv, Nostru site
 Nostru - No Adnex free
 No tenderness

Ad

- Tab. Cervsoft-CL x vaginally
x 3 nights

Surgeon opinion

Bharathi

Dr. B. BHARATHI
M.S OBG
Obstetrics and Gynecology
REGD. No: APMC 96195



YODA
DIAGNOSTICS



 GPS Map Camera



Guntur, Andhra Pradesh, India

3-1-219/2, Old Club Rd, Gunturi Vari Thota, Kothapeta, Guntur,
Andhra Pradesh 522001, India

Lat 16.299205°

Long 80.451571°

11/11/23 08:47 AM GMT +05:30

Google

Visit ID	: YGT39324	UHID/MR No	: YGT.0000039176
Patient Name	: Mrs. MERUGU NAGA MANI	Client Code	: 1409
Age/Gender	: 41 Y 0 M 0 D /F	Barcode No	: 10797420
DOB	:	Registration	: 11/Nov/2023 08:45AM
Ref Doctor	: SELF	Collected	: 11/Nov/2023 08:45AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 11/Nov/2023 10:56AM
Hospital Name	:		

DEPARTMENT OF RADIOLOGY**ULTRASOUND WHOLE ABDOMEN & PELVIS**

Clinical Details : General check-up.

LIVER : Normal in size (14.1 cm) and echo-texture. No focal lesion is seen. Intra hepatic biliary channels are not dilated. Visualised common bile duct & portal vein appears normal.

GALL BLADDER : Well distended. No evidence of wall thickening. *Two calculi noted in the lumen of gall bladder measuring 2.3 cm & 1.8 cm. CBD measures 3.6 mm.*

PANCREAS : Normal in size and outlines. Parenchymal texture normal. No ductal dilatation. No calcifications / calculi.

SPLEEN : Normal in size (10.2 cm) and echotexture. No focal lesion is seen.

RIGHT KIDNEY : measures 10.4 x 2.6 cm. Normal in size with smooth contours. Parenchymal texture normal. No focal lesion is seen. Cortico-medullary differentiation well maintained. Collecting system does not show any dilatation or calculus.

LEFT KIDNEY : measures 10.9 x 5.2 cm. Normal in size with smooth contours. Parenchymal texture normal. No focal lesion is seen. Cortico-medullary differentiation well maintained. Collecting system does not show any dilatation or calculus.

URINARY BLADDER : Well distended. No evidence of calculi or wall thickening.

UTERUS : Anteverted, measures 7.2 x 4.4 x 6.1 cm, normal in size. Myometrium shows normal echo-texture. No focal lesion is seen. Endometrial thickness is 9 mm.

Right ovary measures 3.6 x 2.9 cm and left ovary measures 3.1 X 2.0 cm. Both ovaries are normal in size & echotexture. No adnexal lesion seen.

No enlarged nodes are visualised. No retro-peritoneal lesion is identified. Great vessels appear normal.

Minimal free fluid is seen in POD.

IMPRESSION:

- CHOLELITHIASIS.

Verified By :

GOPI



Approved By :


Dr. SUSHMA VUYYURU
MBBS, MD(Radio-Diagnosis)
CONSULTANT RADIOLOGIST

Visit ID	: YGT39324	UHID/MR No	: YGT.0000039176
Patient Name	: Mrs. MERUGU NAGA MANI	Client Code	: 1409
Age/Gender	: 41 Y 0 M 0 D /F	Barcode No	: 10797420
DOB	:	Registration	: 11/Nov/2023 08:45AM
Ref Doctor	: SELF	Collected	: 11/Nov/2023 08:45AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 11/Nov/2023 10:56AM
Hospital Name	:		

DEPARTMENT OF RADIOLOGY



Verified By :
GOPI



Approved By :


Dr. SUSHMA VUYYURU
MBBS, MD(Radio-Diagnosis)
CONSULTANT RADIOLOGIST

Visit ID	: YGT39324	UHID/MR No	: YGT.0000039176
Patient Name	: Mrs. MERUGU NAGA MANI	Client Code	: 1409
Age/Gender	: 41 Y 0 M 0 D /F	Barcode No	: 10797420
DOB	:	Registration	: 11/Nov/2023 08:45AM
Ref Doctor	: SELF	Collected	: 11/Nov/2023 08:45AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 11/Nov/2023 12:32PM
Hospital Name	:		

DEPARTMENT OF RADIOLOGYX-RAY CHEST PA VIEWFindings:

Rotated film.

Soft tissues/ bony cage normal.

Trachea and Mediastinal structures are normal.

Heart size and configuration are normal.

Aorta and pulmonary vascularity are normal.

Lung parenchyma and CP angles are clear.

Bilateral hilae and diaphragmatic contours are normal.

IMPRESSION :

- No Significant Abnormality Detected.

Suggested Clinical Correlation & Follow up.

Verified By :

GOPI



Approved By :


Dr. SUSHMA VUYYURU
MBBS, MD(Radio-Diagnosis)
CONSULTANT RADIOLOGIST

Visit ID	: YGT39324	UHID/MR No	: YGT.0000039176
Patient Name	: Mrs. MERUGU NAGA MANI	Client Code	: 1409
Age/Gender	: 41 Y 0 M 0 D /F	Barcode No	: 10797420
DOB	:	Registration	: 11/Nov/2023 08:45AM
Ref Doctor	: SELF	Collected	: 11/Nov/2023 08:45AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 11/Nov/2023 10:53AM
Hospital Name	:		

DEPARTMENT OF RADIOLOGY**ULTRASOUND OF BOTH BREASTS****RIGHT BREAST:**

Glandular parenchyma appears normal.
No evidence of focal mass lesions.
No evidence of ductal dilatation.
Nipple and areolar region appears normal.
Skin thickness is normal.

LEFT BREAST:

Glandular parenchyma appears normal.
No evidence of focal mass lesions.
No evidence of ductal dilatation.
Nipple and areolar region appears normal.
Skin thickness is normal.

IMPRESSION:

- NO SIGNIFICANT ABNORMALITY DETECTED.

BIRADS 0 - Needs additional imaging
BIRADS I - Normal
BIRADS II - Benign
BIRADS III - Probably benign
BIRADS IV - Suspicious
BIRADS V - Highly suspicious
BIRADS VI - Known breast malignancy

Verified By :
GOPI



Approved By :

Sushma
Dr. SUSHMA VUYYURU
MBBS, MD (Radio-Diagnosis)
CONSULTANT RADIOLOGIST

Visit ID : YGT39324	UHID/MR No : YGT.0000039176
Patient Name : Mrs. MERUGU NAGA MANI	Client Code : 1409
Age/Gender : 41 Y 0 M 0 D /F	Barcode No : 10797420
DOB :	Registration : 11/Nov/2023 08:45AM
Ref Doctor : SELF	Collected : 11/Nov/2023 08:45AM
Client Name : MEDI WHEELS	Received : 11/Nov/2023 09:10AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 11/Nov/2023 10:07AM
Hospital Name :	

DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
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ESR (ERYTHROCYTE SEDIMENTATION RATE)

Sample Type : WHOLE BLOOD EDTA

ERYTHROCYTE SEDIMENTATION RATE	50	mm/1st hr	0 - 15	Capillary Photometry
--------------------------------	-----------	-----------	--------	----------------------

COMMENTS:

ESR is an acute phase reactant which indicates presence and intensity of an inflammatory process. It is never diagnostic of a specific disease. It is used to monitor the course or response to treatment of certain diseases. Extremely high levels are found in cases of malignancy, hematologic diseases, collagen disorders and renal diseases.


Increased levels may indicate: Chronic renal failure (e.g., nephritis, nephrosis), malignant diseases (e.g., multiple myeloma, Hodgkin disease, advanced Carcinomas), bacterial infections (e.g., abdominal infections, acute pelvic inflammatory disease, syphilis, pneumonia), inflammatory diseases (e.g. temporal arteritis, polymyalgia rheumatic, rheumatoid arthritis, rheumatic fever, systemic lupus erythematosus [SLE]), necrotic diseases (e.g., acute myocardial infarction, necrotic tumor, gangrene of an extremity), diseases associated with increased proteins (e.g., hyperfibrinogenemia, macroglobulinemia), and severe anemias (e.g., iron deficiency or B12 deficiency).

Falsely decreased levels may indicate: Sick cell anemia, spherocytosis, hypofibrinogenemia, or polycythemia vera.

Verified By :
GOPI



Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID : YGT39324	UHID/MR No : YGT.0000039176
Patient Name : Mrs. MERUGU NAGA MANI	Client Code : 1409
Age/Gender : 41 Y 0 M 0 D /F	Barcode No : 10797420
DOB :	Registration : 11/Nov/2023 08:45AM
Ref Doctor : SELF	Collected : 11/Nov/2023 08:45AM
Client Name : MEDI WHEELS	Received : 11/Nov/2023 09:20AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 11/Nov/2023 09:38AM
Hospital Name :	

DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
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BLOOD GROUP ABO & RH Typing

Sample Type : WHOLE BLOOD EDTA

ABO	O			
Rh Typing	POSITIVE			

Method : Hemagglutination Tube method by forward and reverse grouping

COMMENTS:


The test will detect common blood grouping system A, B, O, AB and Rhesus (RhD). Unusual blood groups or rare subtypes will not be detected by this method. Further investigation by a blood transfusion laboratory, will be necessary to identify such groups.

Disclaimer: There is no trackable record of previous ABO & RH test for this patient in this lab. Please correlate with previous blood group findings. Advsiied cross matching before transfusion

Verified By :
GOPI



Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID : YGT39324	UHID/MR No : YGT.0000039176
Patient Name : Mrs. MERUGU NAGA MANI	Client Code : 1409
Age/Gender : 41 Y 0 M 0 D /F	Barcode No : 10797420
DOB :	Registration : 11/Nov/2023 08:45AM
Ref Doctor : SELF	Collected : 11/Nov/2023 08:45AM
Client Name : MEDI WHEELS	Received : 11/Nov/2023 09:20AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 11/Nov/2023 09:25AM
Hospital Name :	

DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
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CBC (COMPLETE BLOOD COUNT)
Sample Type : WHOLE BLOOD EDTA

HAEMOGLOBIN (HB)	9.9	g/dl	12.0 - 15.0	Cyanide-free SLS method
RBC COUNT (RED BLOOD CELL COUNT)	4.46	million/cmm	3.80 - 4.80	Impedance
PCV/HAEMATOCRIT	30.9	%	36.0 - 46.0	RBC pulse height detection
MCV	69.3	fL	83 - 101	Automated/Calculated
MCH	22.2	pg	27 - 32	Automated/Calculated
MCHC	32.0	g/dl	31.5 - 34.5	Automated/Calculated
RDW - CV	17.5	%	11.0-16.0	Automated Calculated
RDW - SD	45.5	fl	35.0-56.0	Calculated
MPV	9.0	fL	6.5 - 10.0	Calculated
PDW	15.7	fL	8.30-25.00	Calculated
PCT	0.28	%	0.15-0.62	Calculated
TOTAL LEUCOCYTE COUNT	8,330	cells/ml	4000 - 11000	Flow Cytometry
DLC (by Flow cytometry/Microscopy)				
NEUTROPHIL	68	%	40 - 80	Impedance
LYMPHOCYTE	24	%	20 - 40	Impedance
EOSINOPHIL	04	%	01 - 06	Impedance
MONOCYTE	04	%	02 - 10	Impedance
BASOPHIL	0	%	0 - 1	Impedance
PLATELET COUNT	3.12	Lakhs/cumm	1.50 - 4.10	Impedance

 Verified By :
 GOPI


Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID : YGT39324	UHID/MR No : YGT.0000039176
Patient Name : Mrs. MERUGU NAGA MANI	Client Code : 1409
Age/Gender : 41 Y 0 M 0 D /F	Barcode No : 10797420
DOB :	Registration : 11/Nov/2023 08:45AM
Ref Doctor : SELF	Collected : 11/Nov/2023 08:45AM
Client Name : MEDI WHEELS	Received : 11/Nov/2023 09:20AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 11/Nov/2023 10:35AM
Hospital Name :	

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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THYROID PROFILE (T3,T4,TSH)

Sample Type : SERUM

T3	0.96	ng/ml	0.60 - 1.78	CLIA
T4	8.98	ug/dl	4.82-15.65	CLIA
TSH	2.28	uIU/mL	0.30 - 5.60	CLIA

INTERPRETATION:

1. Serum T3, T4 and TSH are the measurements form three components of thyroid screening panel and are useful in diagnosing various disorders of thyroid gland function.
2. Primary hyperthyroidism is accompanied by elevated serum T3 and T4 values along with depressed TSH levels.
3. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH levels.
4. Normal T4 levels accompanied by high T3 levels are seen in patients with T3 thyrotoxicosis. Slightly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol and propylthiouracil.
5. Although elevated TSH levels are nearly always indicative of primary hypothyroidism, rarely they can result from TSH secreting pituitary tumors (secondary hyperthyroidism).
6. Low levels of Thyroid hormones (T3, T4 & FT3, FT4) are seen in cases of primary, secondary and tertiary hypothyroidism and sometimes in non-thyroidal illness also.
7. Increased levels are found in Grave's disease, hyperthyroidism and thyroid hormone resistance.
8. TSH levels are raised in primary hypothyroidism and are low in hyperthyroidism and secondary hypothyroidism.

9. REFERENCE RANGE :

PREGNANCY	TSH in uIU/ mL
1st Trimester	0.60 - 3.40
2nd Trimester	0.37 - 3.60
3rd Trimester	0.38 - 4.04

(Reference range recommended by the American Thyroid Association)

Comments:


1. During pregnancy, Free thyroid profile (FT3, FT4 & TSH) is recommended.
2. TSH levels are subject to circadian variation, reaches peak levels between 2-4 AM and at a minimum between 6-10 PM. The variation of the day has influence on the measured serum TSH concentrations.

Verified By :

GOPI



Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID : YGT39324	UHID/MR No : YGT.0000039176
Patient Name : Mrs. MERUGU NAGA MANI	Client Code : 1409
Age/Gender : 41 Y 0 M 0 D /F	Barcode No : 10797420
DOB :	Registration : 11/Nov/2023 08:45AM
Ref Doctor : SELF	Collected : 11/Nov/2023 08:45AM
Client Name : MEDI WHEELS	Received : 11/Nov/2023 09:20AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 11/Nov/2023 09:58AM
Hospital Name :	

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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LIVER FUNCTION TEST(LFT)

Sample Type : SERUM

TOTAL BILIRUBIN	0.37	mg/dl	0.3 - 1.2	JENDRASSIK & GROFF
CONJUGATED BILIRUBIN	0.11	mg/dl	0 - 0.2	DPD
UNCONJUGATED BILIRUBIN	0.26	mg/dl		Calculated
S.G.O.T	16	U/L	< 35	KINETIC WITHOUT P5P-IFCC
S.G.P.T	11	U/L	< 35	KINETIC WITHOUT P5P-IFCC
ALKALINE PHOSPHATASE	76	U/L	30 - 120	IFCC-AMP BUFFER
TOTAL PROTEINS	7.6	gm/dl	6.6 - 8.3	Biuret
ALBUMIN	3.9	gm/dl	3.5 - 5.2	BCG
GLOBULIN	3.7	gm/dl	2.0 - 3.5	Calculated
A/G RATIO	1.05			Calculated

Verified By :
GOPI



Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID : YGT39324	UHID/MR No : YGT.0000039176
Patient Name : Mrs. MERUGU NAGA MANI	Client Code : 1409
Age/Gender : 41 Y 0 M 0 D /F	Barcode No : 10797420
DOB :	Registration : 11/Nov/2023 08:45AM
Ref Doctor : SELF	Collected : 11/Nov/2023 08:45AM
Client Name : MEDI WHEELS	Received : 11/Nov/2023 09:20AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 11/Nov/2023 09:58AM
Hospital Name :	

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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LIPID PROFILE
Sample Type : SERUM

TOTAL CHOLESTEROL	188	mg/dl	Refere Table Below	Cholesterol oxidase/peroxidase
H D L CHOLESTEROL	34	mg/dl	> 40	Enzymatic/ Immunoinhibiton
L D L CHOLESTEROL	132.4	mg/dl	Refere Table Below	Enzymatic Selective Protein
TRIGLYCERIDES	108	mg/dl	See Table	GPO
VLDL	21.6	mg/dl	15 - 30	Calculated
T. CHOLESTEROL/ HDL RATIO	5.53		Refere Table Below	Calculated
TRIGLYCEIDES/ HDL RATIO	3.18	Ratio	< 2.0	Calculated
NON HDL CHOLESTEROL	154	mg/dl	< 130	Calculated

Interpretation

NATIONAL LIPID ASSOCIATION RECOMMENDATIONS (NLA-2014)	TOTAL CHOLESTEROL	TRI GLYCERIDE	LDL CHOLESTEROL	NON HDL CHOLESTEROL
Optimal	<200	<150	<100	<130
Above Optimal	-	-	100-129	130 - 159
Borderline High	200-239	150-199	130-159	160 - 189
High	>=240	200-499	160-189	190 - 219
Very High	-	>=500	>=190	>=220

REMARKS	Cholesterol : HDL Ratio
Low risk	3.3-4.4
Average risk	4.5-7.1
Moderate risk	7.2-11.0
High risk	>11.0

- Note:
- Measurements in the same patient can show physiological & analytical variations. Three serial samples 1 week apart are recommended for Total Cholesterol, Triglycerides, HDL & LDL Cholesterol
 - NLA-2014 identifies Non HDL Cholesterol (an indicator of all atherogenic lipoproteins such as LDL, VLDL, IDL, Lp(a), Chylomicron remnants) along with LDL-cholesterol as co-primary target for cholesterol lowering therapy. Note that major risk factors can modify treatment goals for LDL & Non HDL.
 - Apolipoprotein B is an optional, secondary lipid target for treatment once LDL & Non HDL goals have been achieved
 - Additional testing for Apolipoprotein B, hsCRP, Lp(a) & LP-PLA2 should be considered among patients with moderate risk for ASCVD for risk refinement

 Verified By :
 GOPI


Approved By :


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 MBBS, DCP
 Consultant Pathologist

Visit ID	: YGT39324	UHID/MR No	: YGT.0000039176
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Client Name	: MEDI WHEELS	Received	: 11/Nov/2023 09:20AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 11/Nov/2023 09:58AM
Hospital Name	:		

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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HBA1C

Sample Type : WHOLE BLOOD EDTA

HBA1c RESULT	5.2	%	Normal Glucose tolerance (non-diabetic): <5.7% Pre-diabetic: 5.7-6.4% Diabetic Mellitus: >6.5%	HPLC
ESTIMATED AVG. GLUCOSE	103	mg/dl		

Note:

1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled .
2. Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0 % may not be appropriate. HbA1c provides an index of average blood glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control .

Verified By :
GOPI



Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID : YGT39324	UHID/MR No : YGT.0000039176
Patient Name : Mrs. MERUGU NAGA MANI	Client Code : 1409
Age/Gender : 41 Y 0 M 0 D /F	Barcode No : 10797420
DOB :	Registration : 11/Nov/2023 08:45AM
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Client Name : MEDI WHEELS	Received : 11/Nov/2023 09:20AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 11/Nov/2023 09:58AM
Hospital Name :	

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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BLOOD UREA NITROGEN (BUN)

Sample Type : Serum

SERUM UREA	13	mg/dL	13 - 43	Urease GLDH
Blood Urea Nitrogen (BUN)	6.1	mg/dl	5 - 25	GLDH-UV

Increased In:

Impaired kidney function, Reduced renal blood flow {CHF, Salt and water depletion, (vomiting, diarrhea, diuresis, sweating), Shock}, Any obstruction of urinary tract, Increased protein catabolism, AMI, Stress

Decreased In:

Diuresis (e.g. with over hydration), Severe liver damage, Late pregnancy, Infancy, Malnutrition, Diet (e.g., low-protein and high-carbohydrate, IV feedings only), Inherited hyperammonemias (urea is virtually absent in blood)

Limitations:

Urea levels increase with age and protein content of the diet.

Verified By :

GOPI



Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID : YGT39324	UHID/MR No : YGT.0000039176
Patient Name : Mrs. MERUGU NAGA MANI	Client Code : 1409
Age/Gender : 41 Y 0 M 0 D /F	Barcode No : 10797420
DOB :	Registration : 11/Nov/2023 08:45AM
Ref Doctor : SELF	Collected : 11/Nov/2023 08:45AM
Client Name : MEDI WHEELS	Received : 11/Nov/2023 09:20AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 11/Nov/2023 09:38AM
Hospital Name :	

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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FBS (GLUCOSE FASTING)

Sample Type : FLOURIDE PLASMA

FASTING PLASMA GLUCOSE	100	mg/dl	70 - 100	HEXOKINASE
------------------------	-----	-------	----------	------------

INTERPRETATION:

Increased In

- Diabetes Mellitus
- Stress (e.g., emotion, burns, shock, anesthesia)
- Acute pancreatitis
- Chronic pancreatitis
- Wernicke encephalopathy (vitamin B1 deficiency)
- Effect of drugs (e.g. corticosteroids, estrogens, alcohol, phenytoin, thiazides)

Decreased In

- Pancreatic disorders
- Extrapancreatic tumors
- Endocrine disorders
- Malnutrition
- Hypothalamic lesions
- Alcoholism
- Endocrine disorders

Verified By :
GOPI



Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID : YGT39324	UHID/MR No : YGT.0000039176
Patient Name : Mrs. MERUGU NAGA MANI	Client Code : 1409
Age/Gender : 41 Y 0 M 0 D /F	Barcode No : 10797420
DOB :	Registration : 11/Nov/2023 08:45AM
Ref Doctor : SELF	Collected : 11/Nov/2023 11:05AM
Client Name : MEDI WHEELS	Received : 11/Nov/2023 11:13AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 11/Nov/2023 11:38AM
Hospital Name :	

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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PPBS (POST PRANDIAL GLUCOSE)

Sample Type : FLOURIDE PLASMA

POST PRANDIAL PLASMA GLUCOSE	103	mg/dl	<140	HEXOKINASE
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INTERPRETATION:

Increased In

- Diabetes Mellitus
- Stress (e.g., emotion, burns, shock, anesthesia)
- Acute pancreatitis
- Chronic pancreatitis
- Wernicke encephalopathy (vitamin B1 deficiency)
- Effect of drugs (e.g. corticosteroids, estrogens, alcohol, phenytoin, thiazides)


Decreased In

- Pancreatic disorders
- Extrapancreatic tumors
- Endocrine disorders
- Malnutrition
- Hypothalamic lesions
- Alcoholism
- Endocrine disorders

Verified By :
GOPI



Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID	: YGT39324	UHID/MR No	: YGT.0000039176
Patient Name	: Mrs. MERUGU NAGA MANI	Client Code	: 1409
Age/Gender	: 41 Y 0 M 0 D /F	Barcode No	: 10797420
DOB	:	Registration	: 11/Nov/2023 08:45AM
Ref Doctor	: SELF	Collected	: 11/Nov/2023 08:45AM
Client Name	: MEDI WHEELS	Received	: 11/Nov/2023 09:20AM
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 11/Nov/2023 09:58AM
Hospital Name	:		

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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SERUM CREATININE

Sample Type : SERUM

SERUM CREATININE	0.52	mg/dl	0.51 - 0.95	KINETIC-JAFFE
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Increased In:

- Diet: ingestion of creatinine (roast meat), Muscle disease: gigantism, acromegaly,
- Impaired kidney function.

Decreased In:

- Pregnancy: Normal value is 0.4-0.6 mg/dL. A value >0.8 mg/dL is abnormal and should alert the clinician to further diagnostic evaluation.
- Creatinine secretion is inhibited by certain drugs (e.g., cimetidine, trimethoprim).

Verified By :
GOPI



Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID	: YGT39324	UHID/MR No	: YGT.0000039176
Patient Name	: Mrs. MERUGU NAGA MANI	Client Code	: 1409
Age/Gender	: 41 Y 0 M 0 D /F	Barcode No	: 10797420
DOB	:	Registration	: 11/Nov/2023 08:45AM
Ref Doctor	: SELF	Collected	: 11/Nov/2023 08:45AM
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Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 11/Nov/2023 09:58AM
Hospital Name	:		

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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GGT (GAMMA GLUTAMYL TRANSPEPTIDASE)

Sample Type : SERUM

GGT	17	U/L	0 - 55.0	KINETIC-IFCC
-----	----	-----	----------	--------------

INTERPRETATION:

GGT functions in the body as a transport molecule, helping to move other molecules around the body. It plays a significant role in helping the liver metabolize drugs and other toxins. Increased GGT include overuse of alcohol, chronic viral hepatitis, lack of blood flow to the liver, liver tumor, cirrhosis, or scarred liver, overuse of certain drugs or other toxins, heart failure, diabetes, pancreatitis, fatty liver disease.

Verified By :
GOPI



Approved By :

Dr. Sumalatha
 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID	: YGT39324	UHID/MR No	: YGT.0000039176
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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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URIC ACID -SERUM

Sample Type : SERUM

SERUM URIC ACID	4.1	mg/dl	2.6 - 6.0	URICASE - PAP
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Uric acid is the final product of purine metabolism in the human organism. Uric acid measurements are used in the diagnosis and treatment of numerous renal and metabolic disorders, including renal failure, gout, leukemia, psoriasis, starvation or other wasting conditions, and of patients receiving cytotoxic drugs.

Verified By :

GOPI



Approved By :

Dr. Sumalatha
 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID	: YGT39324	UHID/MR No	: YGT.0000039176
Patient Name	: Mrs. MERUGU NAGA MANI	Client Code	: 1409
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Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 11/Nov/2023 09:58AM
Hospital Name	:		

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Biological Ref. Range	Method
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BUN/CREATININE RATIO

Sample Type : SERUM				
Blood Urea Nitrogen (BUN)	6.1	mg/dl	5 - 25	GLDH-UV
SERUM CREATININE	0.52	mg/dl	0.51 - 0.95	KINETIC-JAFFE
BUN/CREATININE RATIO	11.60	Ratio	6 - 25	Calculated

Verified By :
GOPI



Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist


Visit ID	: YGT39324	UHID/MR No	: YGT.0000039176
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Ref Doctor	: SELF	Collected	: 11/Nov/2023 08:45AM
Client Name	: MEDI WHEELS	Received	:
Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 11/Nov/2023 12:35PM
Hospital Name	:		

DEPARTMENT OF RADIOLOGY**2D ECHO DOPPLER STUDY**

MITRAL VALVE : Normal
AORTIC VALVE : Normal
TRICUSPID VALVE : Normal
PULMONARY VALVE : Normal
RIGHT ATRIUM : Normal
RIGHT VENTRICLE : Normal
LEFT ATRIUM : 2.8 cms
LEFT VENTRICLE : EDD : 5.4 cm IVS(d) : 0.6 cm LVEF : 70 %
ESD : 3.2 cm PW (d) : 0.6 cm FS : 40 %
No RWMA
IAS : Intact
IVS : Intact
AORTA : 2.8 cms
PULMONARY ARTERY : Normal
PERICARDIUM : Normal
IVS/ SVC/ CS : Normal
PULMONARY VEINS : Normal
INTRA CARDIAC MASSES : No

Verified By :
GOPI

Approved By :


Dr. B. Nagaraju
MD (Internal Medicine)
DN (CARDIOLOGY)
APNC Reg. No 70760

Visit ID	: YGT39324	UHID/MR No	: YGT.0000039176
Patient Name	: Mrs. MERUGU NAGA MANI	Client Code	: 1409
Age/Gender	: 41 Y 0 M 0 D /F	Barcode No	: 10797420
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Client Add	: F-701, Lado Sarai, Mehravli, N	Reported	: 11/Nov/2023 12:35PM
Hospital Name	:		

DEPARTMENT OF RADIOLOGY**DOPPLER STUDY :**

MITRAL FLOW : E - 3.3 m/sec, A - 0.8 m/sec.
AORTIC FLOW : 1.3 m/sec
PULMONARY FLOW : 0.9 m/sec
TRICUSPID FLOW : TRJV : 2.5 m/sec, RVSP - 35 mmHg

COLOUR FLOW MAPPING: Normal


IMPRESSION :

- * NORMAL SIZED CARDIAC CHAMBERS
- * NO RWMA OF LV
- * GOOD LV FUNCTION
- * NORMAL LV FILLING PATTERN
- * NO MR / AR / PR
- * NO TR / PAH
- * NO PE / CLOT / VEGETATION

Verified By :
GOPI



Approved By :


Dr. B. Nagaraju
MD (Internal Medicine)
DN (CARDIOLOGY)
APNC Reg. No 70760

Visit ID : YGT39324	UHID/MR No : YGT.0000039176
Patient Name : Mrs. MERUGU NAGA MANI	Client Code : 1409
Age/Gender : 41 Y 0 M 0 D /F	Barcode No : 10797420
DOB :	Registration : 11/Nov/2023 08:45AM
Ref Doctor : SELF	Collected : 11/Nov/2023 08:45AM
Client Name : MEDI WHEELS	Received : 11/Nov/2023 09:12AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 11/Nov/2023 09:38AM
Hospital Name :	

DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Biological Ref. Range	Method
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CUE (COMPLETE URINE EXAMINATION)
Sample Type : SPOT URINE
PHYSICAL EXAMINATION

TOTAL VOLUME	15 ML	ml		
COLOUR	PALE YELLOW			
APPEARANCE	CLEAR			
SPECIFIC GRAVITY	1.010		1.003 - 1.035	Bromothymol Blue

CHEMICAL EXAMINATION


pH	5.0		4.6 - 8.0	Double Indicator
PROTEIN	NEGATIVE		NEGATIVE	Protein - error of Indicators
GLUCOSE(U)	NEGATIVE		NEGATIVE	Glucose Oxidase
UROBILINOGEN	NEGATIVE	mg/dl	< 1.0	Ehrlichs Reaction
KETONE BODIES	NEGATIVE		NEGATIVE	Nitroprasside
BILIRUBIN - TOTAL	NEGATIVE		Negative	Azocoupling Reaction
BLOOD	NEGATIVE		NEGATIVE	Tetramethylbenzidine
LEUCOCYTE	NEGATIVE		Negative	Azocoupling reaction
NITRITE	NEGATIVE		NEGATIVE	Diazotization Reaction

MICROSCOPIC EXAMINATION

PUS CELLS	1-2	cells/HPF	0-5	
EPITHELIAL CELLS	3-4	/hpf	0 - 15	
RBCs	NIL	Cells/HPF	Nil	
CRYSTALS	NIL	Nil	Nil	
CASTS	NIL	/HPF	Nil	
BUDDING YEAST	NIL		Nil	
BACTERIA	NIL		Nil	
OTHER	NIL			

 Verified By :
 GOPI


Approved By :


 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID : YGT39324	UHID/MR No : YGT.0000039176
Patient Name : Mrs. MERUGU NAGA MANI	Client Code : 1409
Age/Gender : 41 Y 0 M 0 D /F	Barcode No : 10797420
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Ref Doctor : SELF	Collected : 11/Nov/2023 08:45AM
Client Name : MEDI WHEELS	Received : 11/Nov/2023 09:12AM
Client Add : F-701, Lado Sarai, Mehravli, N	Reported : 11/Nov/2023 11:29AM
Hospital Name :	

DEPARTMENT OF CYTOPATHOLOGY

PAP SMEAR - CONVENTIONAL

PAP SMEAR

Lab Ref. No.: YLLD/ PAP-148 / 23

Date of Receiving: 11-11-2023

SYSTEM: BETHESDA 2014

SPECIMEN: TWO CERVICAL SMEARS. FIXED IN ALCOHOL

ADEQUACY: SATISFACTORY FOR EVALUATION.

MI CROSCOPY: Smears show predominantly superficial and intermediate squamous epithelial cells. Epithelial cells show normal nuclear-cytoplasmic ratio. No koilocytosis seen. No evidence of dysplasia/malignancy is seen in the smears examined.

IMPRESSION: NILM (Negative for intraepithelial lesion and malignancy).

ASCO/ CAP GUIDELINES :

	HPV Unknown	HPV Positive	HPV Negative
Unsatisfactory	Repeat cytology after 2-4 mths	Colposcopy	Repeat cytology after 2-4 mths
NILM with EC/TZ	Routine screening	HPV genotyping/ repeat co-testing @ 1 Year	Routine Screening
NILM without EC/TZ	HPV teting	Repeat co-testing @ 1 Year	Routine Screening
ASCUS	HPV teting	Colposcopy	Routine Screening
LSIL	Colposcopy	Colposcopy	Repeat cotesting @ 3 year
ASC - H	Colposcopy	Colposcopy	Colposcopy
HSIL	Immediate LEEP	Immediate LEEP	Immediate LEEP
AGC	EB & Endocervical Bx	EB & Endocervical Bx	EB & Endocervical Bx

SCREENING GUIDELINE : 21-29 Years - Cytology only every 3 years ; <21 & 65 yrs - Screening not recommended

Comments- Pap Test is a screening test for cervical cancer.
False negativity may be due to inherent limitation of this technique.

Verified By :
GOPI



Approved By :

(Signature)
 Dr. Sumalatha
 MBBS, DCP
 Consultant Pathologist

Visit ID	: YGT39324	UHID/MR No	: YGT.0000039176
Patient Name	: Mrs. MERUGU NAGA MANI	Client Code	: 1409
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DEPARTMENT OF CYTOPATHOLOGY

***** End Of Report *****

Verified By :
GOPI



Approved By :


Dr. Sumalatha
MBBS, DCP
Consultant Pathologist

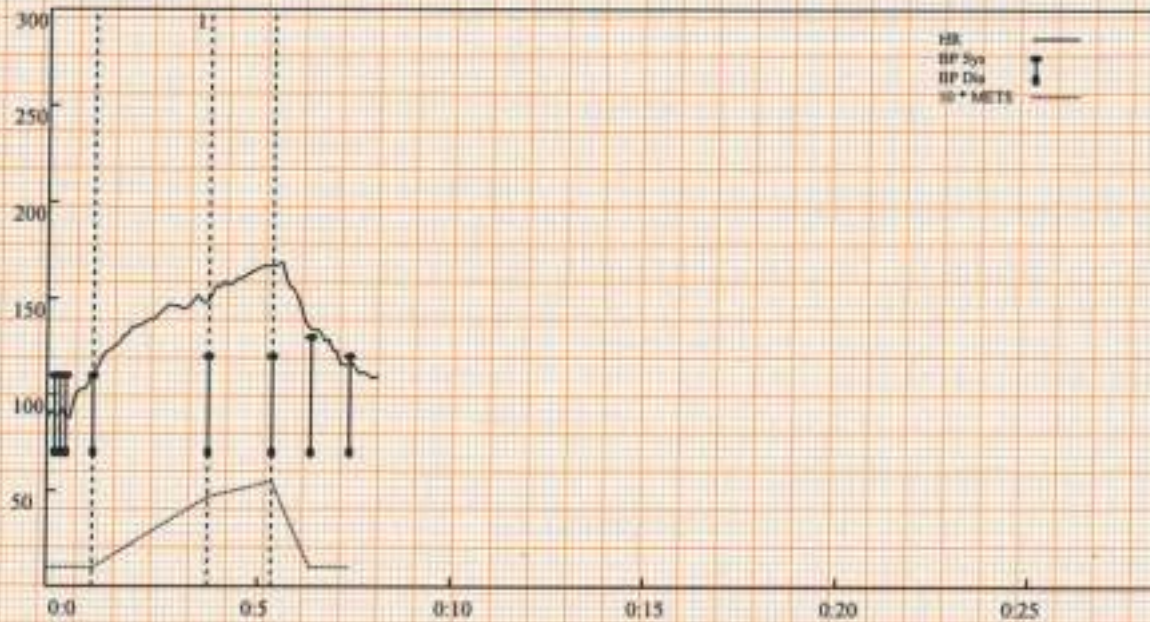
Yoda Diagnostic Guntur

Name: NAGAMANI MERUGU

Date: 11-11-2023

Time: 12:38

Exercise Trend



Interpretation

- The Patient Exercised according to Bruce Protocol for 0:04:40 achieving a work level of 5.5 METS.
Resting Heart Rate, initially 92 bpm rose to a max. heart rate of 167bpm (93% of Predicted Maximum Heart Rate).
Resting Blood Pressure of 110/70 mmHg, rose to a maximum Blood Pressure of 130/70 mmHg
- * No Significant ST-T Changes During Exercise & Recovery
 - * Fair Exercise Tolerance
 - * Stress Test is Negative for Exercise induced Ischemia

Dr. B. NAGARAJU
Regd.No: 70760 MBBS, M.D, DM
CONSULTANT CARDIOLOGIST
YODA DIAGNOSTICS-GUNTUR

Ref. Doctor: DR SELF

Doctor: DR NAGARAJU

Yoda Diagnostic Guntur

Date: 11-11-2023

Time: 12:38

Name: NAGAMANI MERUGU

Age: 41

Gender: F

Height: 151 cms

Weight: 71 Kg

ID: 39324

Clinical History: NO

Medications: NO

Test Details:

Protocol: Bruce

Predicted Max HR: 179

Target HR: 152

Exercise Time: 0:04:40

Achieved Max HR: 167 (93% of Predicted MHR)

Max Mets: 5.5

Max BP: 130/70

Max BP x HR: 21710

Test Termination Criteria:

Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	ST Level mm	ST Slope mV/S
Supine	00:12	1	0	0	92	110/70	10120	1.5 aVR	0.6 V2
Standing	00:10	1	0	0	89	110/70	9790	1 V1	0.6 V3
HyperVentilation	00:10	1	0	0	93	110/70	10230	1.6 V2	0.6 V2
PreTest	00:41	1	1.6	0	107	110/70	11770	1.5 V6	0.8 V3
Stage 1	03:00	4.7	2.7	10	148	120/70	17760	-1.6 III	1.5 II
Peak Exercise	01:40	5.5	4	12	167	120/70	20040	-1.1 III	-1.7 aVR
Recovery1	01:00	1	0	0	138	130/70	17940	1.7 V3	2.3 II
Recovery2	01:00	1	0	0	116	120/70	13920	1.9 V1	1.1 V3

Yoda Diagnostic Guntur

NAGAMANI MERUGU

Bruce Protocol

ID: 39324

Date: 11-11-2023

Excc Time : 0:00:00

Stage Time: 00:12

HR: 92 bpm

STLevel(mm) STSlope(mV/s)

Stage: Supine

Speed: 0 km/h

Slope: 0%

THR: 152 bpm

BP: 110/70 mmHg

STLevel(mm) STSlope(mV/s)



Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO - R - 60 ms, J - R + 60 ms, Post J - J + 80 ms

Schiller Spandan CS-10 Version 2.14

Yoda Diagnostic Guntur

NAGAMANI MERUGU

Bruce Protocol

ID: 39324

Date: 11-11-2023

Excc Time : 0:00:00

Stage Time: 00:10

HR: 89 bpm

Stage: Standing

Speed: 0

Slope: 0 %

THR: 152 bpm

BP: 110/70 mmHg

STLevel(mm) STSlope(mV/s)

STLevel(mm) STSlope(mV/s)



Yoda Diagnostic Guntur

NAGAMANI MERUGU

Bruce Protocol

ID: 39324

Date: 11-11-2023

Exec Time: 0:00:00

Stage Time: 00:10

HR: 93 bpm

Stage: Hyper Ventilation

Speed: 0

Slope: 0%

THR: 152 bpm

BP: 110/70 mmHg

STLevel(mm) STSlope(mV/s)

STLevel(mm) STSlope(mV/s)



Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Spandan CS-10 Version 2.14

MICRO MED CHARTS

Yoda Diagnostic Guntur

NAGAMANT MERUGU

Bruce Protocol

ID: 39324

Date: 11-11-2023

Exc Time : 0:03:00

Stage Time: 03:00

HR: 148 bpm

Stage: 1

Speed: 2.7 kmph

Slope: 10 %

THR: 152 bpm

BP: 120/70 mmHg

STLevel(mm) STSlope(mV/s)

STLevel(mm) STSlope(mV/s)

0.1 0.4 I

V1 1 0.1

-1.4 1.5 II

V2 0.3 0.9

-1.4 1 III

V3 0.5 1.1

0.7 -1.2 aVR

V4 0.8 0.9

0.8 -0.4 aVL

V5 0.6 0.7

-1.4 1.2 aVF

V6 0.3 0.6

II

Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Spidan CS-10 Version:2.14

Yoda Diagnostic Guntur

NAGAMANI MERUGU

Bruce Protocol

ID: 39324

Date: 11-11-2023

Exec Time: 0:04:40

Stage Time: 01:40

HR: 167 bpm

Stage: 2 Peak Exercise

Speed: 4 kmph

Slope: 12 %

THR: 152 bpm

BP: 120/70 mmHg

STLevel(mm) STSlope(mV/s)

STLevel(mm) STSlope(mV/s)



Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Spandau CS-10 Version 2.14

Yoda Diagnostic Guntur

NAGAMANI MERUGU

Bruce Protocol

ID: 39324

Date: 11-11-2023

Exec Time: 00:00

Stage Time: 01:00

HR: 138 bpm

BP: 130/70 mmHg

Stage: Recovery I

Speed: 0 kmph

Slope: 0 %

THR: 152 bpm

STLevel(mm) STSlope(mV/s)



Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Spandan CS-10 Version:2.14

MICRO MED CHARTS

Yoda Diagnostic Guntur

NAGAMANI MERUGU

Bruce Protocol

ID: 39324

Date: 11-11-2023

Exer Time : 00:00

Stage Time: 01:00

HR: 116 bpm

STLevel(mm) STSlope(mV/s)

Stage: Recovery2

Speed: 0 kmph

Slope: 0%

THR: 152 bpm

BP: 120/70 mmHg

STLevel(mm) STSlope(mV/s)



Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Spandan CS-10 Version 2.14

Yoda Diagnostic Guntur

NAGAMANI MERUGU

Bruce Protocol

ID: 39324

Date: 11-11-2023

Exec Time : 00:00

Stage Time: 00:51

HR: 110 bpm

Stage: Recovery3

Speed: 0 kmph

Slope: 0%

THR: 152 bpm

BP: 110/70 mmHg

STLevel(mm) STSlope(mV/s)

STLevel(mm) STSlope(mV/s)



Chart Speed: 25 mm/sec

Amplitude: 10mm/mV

Filter: 35 Hz Mains Filter: ON

ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms

Schiller Spandau CS-10 Version 2.14