

LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,  
Mediwheel (Arcofemi Healthcare Limited)  
Helpline number: 011- 41195959

Dear Sir / Madam,

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MS. KUMARI NIKKY
EC NO.	177631
DESIGNATION	BRANCH OPERATIONS
PLACE OF WORK	NEW DELHI, PARLIAMENT STREET
BIRTHDATE	05-02-1990
PROPOSED DATE OF HEALTH CHECKUP	29-03-2024
BOOKING REFERENCE NO.	23M177631100100140E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **14-03-2024** till **31-03-2024**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager**  
**HRM Department**  
**Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



Mediwheel <wellness@mediwheel.in>

Thu 3/14/2024 11:56 AM

To:PHC [MH-Ghaziabad] <phc.ghaziabad@manipalhospitals.com>  
Cc:customercare@mediwheel.in <customercare@mediwheel.in>



011-41195959

Dear **Manipal Hospital**

We have received a booking request with the following details. Provide your confirmation by clicking on the Yes button.

**You confirm this booking?**

Name : MS. KUMARI NIKKY  
Contact Details : 8010821098  
Hospital Package Name : Mediwheel Full Body Health Checkup Female Below 40  
Location : NH-24,Hapur Road,Oppo. Bahmeta Village,Near Lancraft Golf Links Aparment  
Appointment Date : 29-03-2024

Member Information		
Booked Member Name	Age	Gender
MS. KUMARI NIKKY	34 year	Female

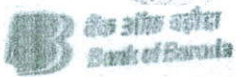
**Tests included in this Package -**

- Pap Smear
- Stool Test
- Gynae Consultation
- Thyroid Profile
- ESR
- Blood Glucose (Fasting)
- General Physician Consultation
- TMT OR 2D ECHO
- Blood Group
- Blood Glucose (Post Prandial)
- Chest X-ray
- ECG
- USG Whole Abdomen
- Eye Check-up consultation
- Urine Sugar Fasting
- Urine Sugar PP
- Dental Consultation
- Urine analysis
- CBC
- HbA1c
- Lipid Profile
- Kidney Profile
- Liver profile

Thanks,  
Mediwheel Team  
Please Download Mediwheel App



You have received this mail because your e-mail ID is registered with Arcofemi Healthcare Limited This is a system-generated e-mail please don't reply to this



बैंक ऑफ बरोडा  
Bank of Baroda

नाम: Nikey Kumari  
Name:

कर्मचारी कुट क्र. 177631  
E. C. No.



Nikey Kumari

धारक की हस्ताक्षर  
Signature of Holder



जारीकर्ता प्राधिकारी सु. प. (स) अ. व. न. प्रि.  
Issuing Authority CM (S), ZC, ND

*Pin*  
*8010821098*



सत्यमेव जयते  
भारत सरकार



आधार

भारत सरकार

Unique Identification Authority of India

Government of India

नामांकन क्रम / Enrollment No 1007/12248/07292

To,  
निकी कुमारी  
Nikky Kumari  
D/O Vigyana Nand Jha  
A-517  
GALI NO 11, PUSTA 1, PART 2  
SONIA VIHAR  
Sabhapur North East  
Delhi 110094  
9312376825

25/03/2012

Ref: 99 / 17D / 109176 / 109382 / P



UE318036479IN



आपका आधार क्रमांक / Your Aadhaar No. :

**2019 0629 1492**

आधार — आम आदमी का अधिकार

801082-10998



भारत सरकार  
GOVERNMENT OF INDIA



निकी कुमारी  
Nikky Kumari  
जन्म वर्ष / Year of Birth : 1990  
महिला / Female



**2019 0629 1492**

आधार — आम आदमी का अधिकार

**RADIOLOGY REPORT**

NAME	MRS Nikky KUMARI	STUDY DATE	29/03/2024 12:22PM
AGE / SEX	34 y / F	HOSPITAL NO.	MH010871683
ACCESSION NO.	R7143415	MODALITY	US
REPORTED ON	29/03/2024 12:40PM	REFERRED BY	HEALTH CHECK MGD

**USG ABDOMEN & PELVIS****FINDINGS**

LIVER: Liver is normal in size (measures 144 mm), shape and echotexture. Rest normal.  
 SPLEEN: Spleen is normal in size (measures 90 mm), shape and echotexture. Rest normal.  
 PORTAL VEIN: Appears normal in size and measures 9.8 mm.  
 COMMON BILE DUCT: Appears normal in size and measures 2.9 mm.  
 IVC, HEPATIC VEINS: Normal.  
 BILIARY SYSTEM: Normal.  
 GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.  
 PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.  
 KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.  
 Right Kidney: measures 95 x 41 mm.  
 Left Kidney: measures 94 x 51 mm.  
 PELVI-CALYCEAL SYSTEMS: Compact.  
 NODES: Not enlarged.  
 FLUID: Nil significant.  
 URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.  
 UTERUS: Uterus is anteverted, normal in size (measures 71 x 38 x 34 mm), shape and echotexture.  
 Endometrial thickness measures 4.8 mm. Cervix appears normal.  
 OVARIES: Both ovaries are normal in size, shape and echotexture. Rest normal.  
 Right ovary measures 31 x 26 x 13 mm with volume 5.4 cc.  
 Left ovary measures 28 x 26 x 10 mm with volume 3.8 cc.  
 BOWEL: Visualized bowel loops appear normal.

**IMPRESSION**

**-No significant abnormality noted.**

Recommend clinical correlation.

*Monica*

**Dr. Monica Shekhawat MBBS, DNB  
CONSULTANT RADIOLOGIST**

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



**RADIOLOGY REPORT**

NAME	MRS Nikky KUMARI	STUDY DATE	29/03/2024 10:48AM
AGE / SEX	34 y / F	HOSPITAL NO.	MH010871683
ACCESSION NO.	R7143414	MODALITY	CR
REPORTED ON	29/03/2024 12:40PM	REFERRED BY	HEALTH CHECK MGD

**XR- CHEST PA VIEW**

**FINDINGS:**

LUNGS: Normal.  
TRACHEA: Normal.  
CARINA: Normal.  
RIGHT AND LEFT MAIN BRONCHI: Normal.  
PLEURA: Normal.  
HEART: Normal.  
RIGHT HEART BORDER: Normal.  
LEFT HEART BORDER: Normal.  
PULMONARY BAY: Normal.  
PULMONARY HILA: Normal.  
AORTA: Normal.  
THORACIC SPINE: Normal.  
OTHER VISUALIZED BONES: Normal.  
VISUALIZED SOFT TISSUES: Normal.  
DIAPHRAGM: Normal.  
VISUALIZED ABDOMEN: Normal.  
VISUALIZED NECK: Normal.

**IMPRESSION:**

**No significant abnormality noted.**  
Recommend clinical correlation.

**Dr. Monica Shekhawat MBBS, DNB**  
**CONSULTANT RADIOLOGIST**

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



**LABORATORY REPORT**

Name : MRS NIKKY KUMARI  
Registration No : MH010871683  
Patient Episode : H18000002012  
Referred By : HEALTH CHECK MGD  
Receiving Date : 29 Mar 2024 10:32

Age : 34 Yr(s) Sex :Female  
Lab No : 202403004262  
Collection Date : 29 Mar 2024 10:32  
Reporting Date : 29 Mar 2024 16:22

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>Specimen Type : Serum</b>			
<b>THYROID PROFILE, Serum</b>			
T3 - Triiodothyronine (ELFA)	1.110	ng/ml	[0.610-1.630]
T4 - Thyroxine (ELFA)	7.830	ug/ dl	[4.680-9.360]
Thyroid Stimulating Hormone	3.160	µIU/mL	[0.250-5.000]

**NOTE:**

TSH stimulates the thyroid gland to produce the main thyroid hormones T3 and T4. In cases of hyperthyroidism TSH level is severely inhibited and may even be undetectable. In rare forms of high-origin hyperthyroidism, the TSH level is not reduced, since the negative-feedback control of the thyroid hormones has no effect. In cases of primary hypothyroidism, TSH levels are always much higher than normal and thyroid hormone levels are low. The TSH assay aids in diagnosing thyroid or hypophysial disorders. The T4 assay aids in assessing thyroid function, which is characterized by a decrease in thyroxine levels in patients with hypothyroidism and an increase in patients with hyperthyroidism.

The test has been carried out in Fully Automated Immunoassay System VIDAS using ELFA (Enzyme Linked Fluorescence Assay) technology.



**LABORATORY REPORT**

Name : MRS NIKKY KUMARI Age : 34 Yr(s) Sex :Female  
Registration No : MH010871683 Lab No : 202403004262  
Patient Episode : H18000002012 Collection Date : 29 Mar 2024 10:32  
Referred By : HEALTH CHECK MGD Reporting Date : 29 Mar 2024 16:35  
Receiving Date : 29 Mar 2024 10:32

**BLOOD BANK**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Blood Group & Rh Typing (Agglutination by gel/tube technique) Specimen-Blood

Blood Group & Rh typing B Rh(D) Positive

**Technical note:**

*ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.*

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**NOTE:**

# - Abnormal Values

-----END OF REPORT-----

Dr. Alka Dixit Vats  
Consultant Pathologist





## LABORATORY REPORT

Name : MRS NIKKY KUMARI  
 Registration No : MH010871683  
 Patient Episode : H18000002012  
 Referred By : HEALTH CHECK MGD  
 Receiving Date : 29 Mar 2024 10:32

Age : 34 Yr(s) Sex :Female  
 Lab No : 202403004262  
 Collection Date : 29 Mar 2024 10:32  
 Reporting Date : 29 Mar 2024 14:29

### HAEMATOTOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>COMPLETE BLOOD COUNT (AUTOMATED)</b>		<b>SPECIMEN-EDTA Whole Blood</b>	
RBC COUNT (IMPEDEANCE)	4.41	millions/cumm	[3.80-4.80]
<b>HEMOGLOBIN</b>	<b>10.4 #</b>	<b>g/dl</b>	<b>[12.0-15.0]</b>
Method:cyanide free SLS-colorimetry			
<b>HEMATOCRIT (CALCULATED)</b>	<b>35.4 #</b>	<b>%</b>	<b>[36.0-46.0]</b>
<b>MCV (DERIVED)</b>	<b>80.3 #</b>	<b>fL</b>	<b>[83.0-101.0]</b>
<b>MCH (CALCULATED)</b>	<b>23.6 #</b>	<b>pg</b>	<b>[25.0-32.0]</b>
<b>MCHC (CALCULATED)</b>	<b>29.4 #</b>	<b>g/dl</b>	<b>[31.5-34.5]</b>
<b>RDW CV% (DERIVED)</b>	<b>15.9 #</b>	<b>%</b>	<b>[11.6-14.0]</b>
Platelet count	321	x 10 <sup>3</sup> cells/cumm	[150-410]
Method: Electrical Impedance			
MPV (DERIVED)	12.70	fL	
WBC COUNT (TC) (IMPEDEANCE)	5.52	x 10 <sup>3</sup> cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	70.0	%	[40.0-80.0]
Lymphocytes	24.0	%	[20.0-40.0]
Monocytes	4.0	%	[2.0-10.0]
Eosinophils	1.0	%	[1.0-6.0]
Basophils	0.0	%	[0.0-2.0]
<b>ESR</b>	<b>48.0 #</b>	<b>mm/1sthour</b>	<b>[0.0-</b>



**LABORATORY REPORT**

**Name** : MRS NIKKY KUMARI  
**Registration No** : MH010871683  
**Patient Episode** : H18000002012  
**Referred By** : HEALTH CHECK MGD  
**Receiving Date** : 29 Mar 2024 10:32

**Age** : 34 Yr(s) Sex :Female  
**Lab No** : 202403004262  
**Collection Date** : 29 Mar 2024 10:32  
**Reporting Date** : 29 Mar 2024 16:29

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>Glycosylated Hemoglobin</b> Specimen: EDTA HbA1c (Glycosylated Hemoglobin) Method: HPLC	5.2	%	[0.0-5.6]
<p>As per American Diabetes Association(ADA) HbA1c in % Non diabetic adults &gt;= 18years &lt;5.7 Prediabetes (At Risk )5.7-6.4 Diagnosing Diabetes &gt;= 6.5</p>			
Estimated Average Glucose (eAG)	103	mg/dl	

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 glycemc control.

**ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine**

**MACROSCOPIC DESCRIPTION**

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	SLIGHTLY TURBID	
Reaction[pH]	5.0	(4.6-8.0)
Specific Gravity	1.015	(1.003-1.035)

**CHEMICAL EXAMINATION**

Protein/Albumin	+	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	Negative	(NEGATIVE)
Urobilinogen	Normal	(NORMAL)



## LABORATORY REPORT

Name : MRS NIKKY KUMARI  
Registration No : MH010871683  
Patient Episode : H18000002012  
Referred By : HEALTH CHECK MGD  
Receiving Date : 29 Mar 2024 12:38

Age : 34 Yr(s) Sex :Female  
Lab No : 202403004262  
Collection Date : 29 Mar 2024 12:38  
Reporting Date : 29 Mar 2024 16:50

### CLINICAL PATHOLOGY

#### MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells	2-3/hpf	(0-5/hpf)
RBC	20-25	(0-2/hpf)
Epithelial Cells	0-1 /hpf	
CASTS	NIL	
Crystals	NIL	
Bacteria	NIL	
OTHERS	NIL	

#### Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	162	mg/dl	[<200]
Method:Oxidase,esterase, peroxide			Moderate risk:200-239
			High risk:>240
TRIGLYCERIDES (GPO/POD)	87	mg/dl	[<150]
			Borderline high:151-199
			High: 200 - 499
			Very high:>500
HDL- CHOLESTEROL	52	mg/dl	[35-65]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	17	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	93.0	mg/dl	[<120.0]
			Near/
Above optimal-100-129			
			Borderline High:130-159
			High Risk:160-189
T.Chol/HDL.Chol ratio(Calculated)	3.1		<4.0 Optimal
			4.0-5.0 Borderline
			>6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	1.8		<3 Optimal
			3-4 Borderline
			>6 High Risk



## LABORATORY REPORT

Name : MRS NIKKY KUMARI  
Registration No : MH010871683  
Patient Episode : H18000002012  
Referred By : HEALTH CHECK MGD  
Receiving Date : 29 Mar 2024 10:32

Age : 34 Yr(s) Sex :Female  
Lab No : 202403004262  
Collection Date : 29 Mar 2024 10:32  
Reporting Date : 29 Mar 2024 13:59

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Note:

Reference ranges based on ATP III Classifications.

Lipid profile is a panel of blood tests that serves as initial broad medical screening tool for abnormalities in lipids, the results of this tests can identify certain genetic diseases and determine approximate risks for cardiovascular disease, certain forms of pancreatitis and other diseases

#### KIDNEY PROFILE

Specimen: Serum

UREA	16.1	mg/dl	[15.0-40.0]
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Method: GLDH, Kinatic assay

<b>BUN, BLOOD UREA NITROGEN</b>	<b>7.5 #</b>	<b>mg/dl</b>	<b>[8.0-20.0]</b>
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Method: Calculated

CREATININE, SERUM	0.70	mg/dl	[0.70-1.20]
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Method: Jaffe rate-IDMS Standardization

<b>URIC ACID</b>	<b>3.3 #</b>	<b>mg/dl</b>	<b>[4.0-8.5]</b>
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Method:uricase PAP

SODIUM, SERUM	137.60	mmol/L	[136.00-144.00]
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POTASSIUM, SERUM	4.31	mmol/L	[3.60-5.10]
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SERUM CHLORIDE	105.5	mmol/L	[101.0-111.0]
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Method: ISE Indirect

eGFR (calculated)	113.4	ml/min/1.73sq.m	[>60.0]
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Technical Note

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years. eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.



## LABORATORY REPORT



Name : MRS NIKKY KUMARI  
Registration No : MH010871683  
Patient Episode : H18000002012  
Referred By : HEALTH CHECK MGD  
Receiving Date : 29 Mar 2024 10:32

Age : 34 Yr(s) Sex :Female  
Lab No : 202403004262  
Collection Date : 29 Mar 2024 10:32  
Reporting Date : 29 Mar 2024 13:59

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>LIVER FUNCTION TEST</b>			
BILIRUBIN - TOTAL <i>Method: D P D</i>	0.66	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT <i>Method: DPD</i>	0.12	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) <i>Method: Calculation</i>	0.54	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) <i>Method: BIURET</i>	7.90	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) <i>Method: BCG</i>	4.96	g/dl	[3.50-5.20]
GLOBULINS (SERUM) <i>Method: Calculation</i>	2.90	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO <i>Method: Calculation</i>	1.69		[1.00-2.50]
AST (SGOT) (SERUM) <i>Method: IFCC W/O P5P</i>	31.00	U/L	[0.00-40.00]
ALT (SGPT) (SERUM) <i>Method: IFCC W/O P5P</i>	24.40	U/L	[14.00-54.00]
Serum Alkaline Phosphatase <i>Method: AMP BUFFER IFCC</i>	66.0	IU/L	[32.0-91.0]
GGT	15.0	U/L	[7.0-50.0]



**LABORATORY REPORT**

Name : MRS NIKKY KUMARI  
Registration No : MH010871683  
Patient Episode : H18000002012  
Referred By : HEALTH CHECK MGD  
Receiving Date : 29 Mar 2024 10:32

Age : 34 Yr(s) Sex :Female  
Lab No : 202403004262  
Collection Date : 29 Mar 2024 10:32  
Reporting Date : 29 Mar 2024 13:59

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Liver function test aids in diagnosis of various pre hepatic, hepatic and post hepatic causes of dysfunction like hemolytic anemia's, viral and alcoholic hepatitis and cholestasis of obstructive causes.

The test encompasses hepatic excretory, synthetic function and also hepatic parenchymal cell damage. LFT helps in evaluating severity, monitoring therapy and assessing prognosis of liver disease and dysfunction.

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-----END OF REPORT-----

**Dr. Charu Agarwal**  
Consultant Pathologist



## LABORATORY REPORT

<b>Name</b>	: MRS NIKKY KUMARI	<b>Age</b>	: 34 Yr(s) Sex :Female
<b>Registration No</b>	: MH010871683	<b>Lab No</b>	: 202403004263
<b>Patient Episode</b>	: H18000002012	<b>Collection Date</b>	: 29 Mar 2024 10:32
<b>Referred By</b>	: HEALTH CHECK MGD	<b>Reporting Date</b>	: 29 Mar 2024 13:59
<b>Receiving Date</b>	: 29 Mar 2024 10:32		

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>GLUCOSE-Fasting</b> Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	87.0	mg/dl	[70.0-110.0]

Normally, the glucose concentration in extracellular fluid is closely regulated so that a source of energy is readily available to tissues and so that no glucose is excreted in the urine.

Increased in Diabetes mellitus, Cushing's syndrome (10-15%), chronic pancreatitis (30%).  
Drugs corticosteroids, phenytoin, estrogen, thiazides

Decreased in Pancreatic islet cell disease with increased insulin, insulinoma, adrenocortical insufficiency, hypopituitarism, diffuse liver disease, malignancy(adrenocortical, stomach, fibro sarcoma), infant of a diabetic mother enzyme deficiency diseases(e.g.galactosemia),  
Drugs-  
insulin, ethanol, propranolol, sulfonylureas, tobutamide, and other oral hypoglycemic agents.

-----END OF REPORT-----

**Dr. Charu Agarwal**  
Consultant Pathologist



## LABORATORY REPORT

Name : MRS NIKKY KUMARI  
Registration No : MH010871683  
Patient Episode : H18000002012  
Referred By : HEALTH CHECK MGD  
Receiving Date : 29 Mar 2024 15:42

Age : 34 Yr(s) Sex :Female  
Lab No : 202403004264  
Collection Date : 29 Mar 2024 15:42  
Reporting Date : 29 Mar 2024 16:40

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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#### PLASMA GLUCOSE

Specimen:Plasma

GLUCOSE, POST PRANDIAL (PP), 2 HOURS	102.0	mg/dl	[80.0-140.0]
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Method: Hexokinase

Note:

Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption , post exercise

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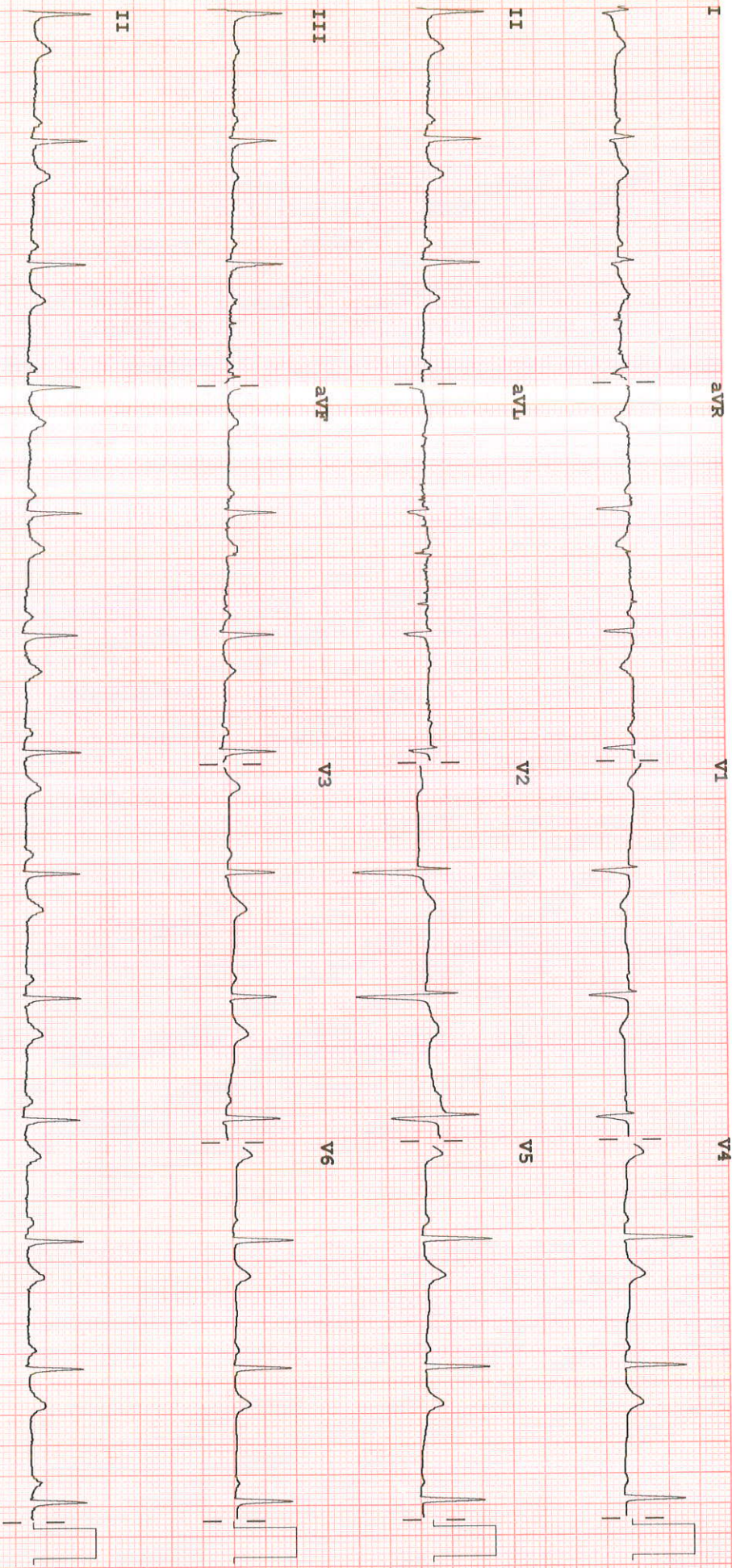
-----END OF REPORT-----

Dr. Alka Dixit Vats  
Consultant Pathologist



- NORMAL ECG -

Unconfirmed Diagnosis



Dev:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz

PH100B CL P?

