

: 18/09/2024 08:26:05

: 18/09/2024 08:26:05

: 19/09/2024 15:21:21

ParticipationRegistration ID: 24726Sample CollectionName: MR. NANDKISHOR SAWANTSample ReceivedAge/Sex: 57 Yrs. / MPrinted: 19/09/2024 17:05:39Report ReleasedRef. By: BANK OF BARODASent By: Arcofemi Healthcare Pvt Ltd

		C	OMPLETE BLOOD	COUNT
Test		Result	Unit	Biological Ref Range
Hemoglobin	:	13.3	g/dL	13-18 g/dL
(SLS) Photometric				
Total RBC	:	4.38	10^6/µL	3.0-6.0 10^6/μL
(Electrical Impedence)		20.0	0/	
Hematocrit (PCV) (Calculated)	:	39.8	%	36-54 %
Mean Corpuscular Volume (MCV) (calulated)	:	90.9	fL	78-101 fL
Mean Corpuscular Hemoglobin	:	30.4	pg	27-32 pg
(MCH)				
(Calculated)		<u></u>	<i>.</i>	
Mean Corpuscular Hemoglobin	:	33.4	g/dL	31.5-34.5 g/dL
Concentration (MCHC)				
(Calculated)				
Red Cell Distribution Width (RDW-		14.10	%	12-15 %
CV)				
(Electrical Impedence) Total Leucocytes Count		5400	/cumm	4000-11000 /cumm
(Light Scattering)	:	5400	/cumm	4000-110007cumm
Neutrophils	:	65	%	40-75 %
(Calculated)				
Eosinophils Percentage	:	03	%	1-6 %
(Calculated)				
Lymphocyte Percentage	:	23	%	20-45 %
(Calculated)				
Basophils Percentage	:	0	%	0-1 %
(Calculated)		-		
Monocytes Percentage	:	08	%	1-10 %
(Calculated)	-		,0	
RBC Morphology	:	Normocytic	Normochromic	
WBC Morphology	÷	Normal Morp		
Platelet Count	:	248000	/ul	150000-450000 /ul
(Electrical Impedence)	·	240000	/ 01	130000-430000 /ul
Platelets on Smear	:	Adequate		Adequate
E.S.R	:	11	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)

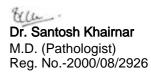
*All Samples Processed At Excellas Clinics Mulund Centre .

*ESR NOT IN NABL scope.

(Collected At: 18/09/2024 08:26:05, Received At: 18/09/2024 08:26:05, Reported At: 19/09/2024 15:21:21)











Name : MR. NANDKISHOR SAWANT

Age/Sex

: 57 Yrs. / M

Ref. By : BANK OF BARODA

Printed

Sent By

: 19/09/2024 17:05:39

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

Registration ID : 24726

: Arcofemi Healthcare Pvt Ltd

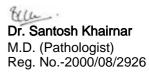
Sample Received Report Released

Sample Collection

: 18/09/2024 08:26:05

- : 18/09/2024 08:26:05
- : 19/09/2024 15:21:21









1101111 10011111110010111111111111111	Registration ID	: 24726	Sample Collection	: 18/09/2024 08:26:05			
Name : MR. NANDKISHOR SA	WANT		Sample Received	: 18/09/2024 08:26:05			
Age/Sex : 57 Yrs. / M	Printed	: 19/09/2024 17:05:39	Report Released	: 19/09/2024 15:21:59			
Ref. By : BANK OF BARODA	Sent By	: Arcofemi Healthcare Pvt	Ltd				
Plood Sugar Easting (ERS) & Post Brandial Blood Sugar (PBRS)							

Blood S	Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)				
Test		Result	Unit	Biological Ref. Range	
GLUCOSE (SUGAR) FASTING,	:	121.00	mg/dL	Non-Diabetic: < 100 mg/dl	
(Fluoride Plasma Used)				Impaired Fasting Glucose: 100-	
				125 mg/dl Diabetic: >/= 126 mg/dl	
Method: GOD-POD					
GLUCOSE (SUGAR) PP, (Fluoride	:	193.30	mg/dl	Non-Diabetic: < 140 mg/dl	
Plasma Used)				Impaired Glucose Tolerance: 140-	
				199 mg/dl Diabetic: >/= 200 mg/dl	

Test Done on - Automated Biochemistry Analyzer (EM 200)

*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 18/09/2024 08:26:05, Received At: 18/09/2024 08:26:05, Reported At: 19/09/2024 15:21:59)

HbA1c (Whole Blood)					
Test	Resu	lt Unit	Reference Range		
HbA1C-Glycosylated Haemoglobin :		%	Non-diabetic: 4-6 Excellent Control: 6-7 Fair to good control: 7-8 Unsatisfactory control: 8-10		
EDTA Whole Blood, Method: HPLC			Poor Control: >10		
Estimated Average Glucose (eAG) EDTA Whole Blood, Method: Calculated	: 148.4	6 mg/dl	65.1-136.3 mg/dL mg/dl		

Interpretation:

1. 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.

2.HbA1c has been endorsed by clinical groups and ADA (American Diabetes Assocation) 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.

3.To estimate the eAG from the HbA1c value, the following equation is used: eAG(mg/dl) =28.7*A1c-46.7.

4.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: 18/09/2024 08:26:05, Received At: 18/09/2024 08:26:05, Reported At: 19/09/2024 15:22:20)











 	Registration ID	: 24726	Sample Collection	: 18/09/2024 08:26:05			
Name : MR. NANDKISHOR SA	AWANT		Sample Received	: 18/09/2024 08:26:05			
Age/Sex : 57 Yrs. / M	Printed	: 19/09/2024 17:05:39	Report Released	: 19/09/2024 15:21:59			
Ref. By : BANK OF BARODA	Sent By	: Arcofemi Healthcare Pv	t Ltd				
BLOOD GROUP							
Test	Result	Unit	Biolog	ical Ref. Range			
Blood Group	: 'B' Rh P	OSITIVE					
Slide and Tube Aggllutination Test							
(Collected At: 18/09/2024 08:26:05, R	eceived At: 18/09/20.	24 08:26:05, Reported At: 19/	09/2024 15:22:47)				

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









Registration ID : 24726

: MR. NANDKISHOR SAWANT Name Age/Sex : 57 Yrs. / M

Printed

: 19/09/2024 17:05:39

Sample Collection Sample Received **Report Released**

: 18/09/2024 08:26:05 : 18/09/2024 08:26:05

: 19/09/2024 15:23:41

Ref. By : BANK OF BARODA

Sent By

: Arcofemi Healthcare Pvt Ltd

		LIPI	D PROFILE	
Test		Result	Unit	Biological Ref. Range
Total Cholesterol	:	207	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
Serum, Method: CHOD-PAP				
S. Triglyceride	:	193	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
Serum, Method: GPO-Trinder				
HDL Cholesterol serum,Direct method	:	52	mg/dl	35.3-79.5 mg/dl
LDL Cholesterol	:	116.40	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
Serum, (Calculated)				
VLDL Cholesterol Serum, Method: Calculated	:	38.6	mg/dl	5-30 mg/dl
LDL/HDL Ratio	:	2.2		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
Serum, Method: Calculated				
TC/HDL Ratio	:	4.0		Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0

Serum. Method: Calculated

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

(Collected At: 18/09/2024 08:26:05, Received At: 18/09/2024 08:26:05, Reported At: 19/09/2024 15:23:41)

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





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





24726 180924		Registration ID	: 24726	Sample Collection	: 18/09/2024 08:26:05
Name	: MR. NANDKISHOR SAW	/ANT		Sample Received	: 18/09/2024 08:26:05
Age/Sex	: 57 Yrs. / M	Printed	: 19/09/2024 17:05:39	Report Released	: 19/09/2024 15:25:05
Ref. By	: BANK OF BARODA	Sent By	: Arcofemi Healthcare Pvt	Ltd	

	LIVER FUNCTION TEST						
Test		Result	Unit	Biological Ref. Range			
S. Bilirubin (Total)	:	0.59	mg/dl	0-2.0 mg/dl			
Serum, Method: Diazo (walter & Gerarde) S. Bilirubin (Direct) Serum, Method: Diazo (walter & Gerarde)	:	0.11	mg/dl	0-0.4 mg/dl			
Serum, Method: Diazo (Walter & Gerarae) S. Bilirubin (Indirect) Serum, Method: Calculated	:	0.48	mg/dl	0.10-1.0 mg/dl			
Aspartate Transaminase (AST/SGOT) Serum, Method: UV Kinetic with P5P	:	22.9	IU/L	0-35 IU/L			
Alanine Transaminase (ALT/SGPT) Serum, Method: UV Kinetic with P5P	:	28.0	IU/L	0-45 IU/L			
S. Alkaline Phosphatase Serum, Method: IFCC with AMP buffer	:	80.8	IU/L	53-128 IU/L			
Total Proteins Serum, Method: Biuret	:	7.0	gm/dl	6.4-8.3 gm/dl			
S. Albumin Serum, Method: BCG	:	4.1	gm/dl	3.5-5.2 gm/dl			
S. Globulin	:	2.9	gm/dl	2.3-3.5 gm/dl			
Serum, Method: Calculated A/G Ratio	:	1.41		0.90-2.00			
Serum, Method: Calculated Gamma GT Serum, Method: G glutamyl carboxy nitroanilide	:	25	U/L	0-55 U/L			

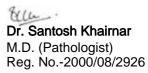
Test Done on - Automated Biochemistry Analyzer (EM 200).

*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 18/09/2024 08:26:05, Received At: 18/09/2024 08:26:05, Reported At: 19/09/2024 15:25:05)

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









5-18 mg/dl

24726 180924	Registration ID	: 24726	Sample Collection	: 18/09/2024 08:26:05				
Name : MR. NANDKISHOR SA	WANT		Sample Received	: 18/09/2024 08:26:05				
Age/Sex : 57 Yrs. / M	Printed	: 19/09/2024 17:05:39	Report Released	: 19/09/2024 15:28:38				
Ref. By : BANK OF BARODA	Sent By	: Arcofemi Healthcare P	vt Ltd					
BLOOD UREA NITROGEN (BUN)								
Test	Result	Unit	Biolog	ical Ref. Range				
Urea	: 24.68	mg/dl	18-55	mg/dl				

mg/dl

Serum, Method: Urease - GLDH

Blood Urea Nitrogen : 11.53

Test Done on - Automated Biochemistry Analyzer (EM 200)

*All Samples Processed At Excellas Clinics Mulund Centre

(Collected At: 18/09/2024 08:26:05, Received At: 18/09/2024 08:26:05, Reported At: 19/09/2024 15:28:38)

SERUM CREATININE					
Test	Result	Unit	Biological Ref. Range		
S. Creatinine	: 0.80	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: 18/09/2024 08:26:05, Received At: 18/09/2024 08:26:05, Reported At: 19/09/2024 15:27:37)

SERUM URIC ACID					
Test	R	esult	Unit	Biological Ref. Range	
S. Uric Acid	: 5.	.75	mg/dl	3.5-7.2 mg/dl	
Serum, Method: Uricase - POD					

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

(Collected At: 18/09/2024 08:26:05, Received At: 18/09/2024 08:26:05, Reported At: 19/09/2024 15:28:53)











. .			11.5	<u> </u>			
BUN CREAT RATIO (BCR)							
Ref. By	: BANK OF BARODA	Sent By	: Arcofemi Healthcare P	/t Ltd			
Age/Sex	: 57 Yrs. / M	Printed	: 19/09/2024 17:05:39	Report Released	: 19/09/2024 15:28:38		
Name	: MR. NANDKISHOR SA	WANT		Sample Received	: 18/09/2024 08:26:05		
24726 180924	u i i i i i i i i i i i i i i i i i i i	Registration ID	: 24726	Sample Collection	: 18/09/2024 08:26:05		

Test		Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	:	14.41		5-20
Serum, Method: Calculated				

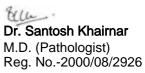
NOTE:

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

(Collected At: 18/09/2024 08:26:05, Received At: 18/09/2024 08:26:05, Reported At: 19/09/2024 15:29:48)

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









Registration ID : 24726 : 18/09/2024 08:26:05 Sample Collection : MR. NANDKISHOR SAWANT Sample Received : 18/09/2024 08:26:05 Name Printed : 19/09/2024 17:05:39 Report Released : 19/09/2024 15:30:40 Age/Sex : 57 Yrs. / M : BANK OF BARODA Sent By : Arcofemi Healthcare Pvt Ltd Ref. By

		THYROID F	FUNCTION TEST	
Test		Result	Unit	Biological Ref. Range
Total T3	:	0.8	ng/dl	0.70-2.04 ng/dl
Serum, Method: CLIA				
Total T4	:	11.97	µg/dl	5.1-14.1 µg/dl
Serum, Method: CLIA				
TSH (Thyroid Stimulating Hormone)	:	2.24	µIU/mI	0.5-8.9 µIU/mI

Serum, Method: CLIA

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: 18/09/2024 08:26:05, Received At: 18/09/2024 08:26:05, Reported At: 19/09/2024 15:30:40)

		PROSTATE S	PECIFIC ANTIGEN	
Test		Result	Unit	Biological Ref. Range
PSA - TOTAL	:	0.90	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.

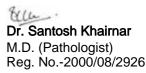
In normal individuals, S.PSA levels do not exceed 4.0 ng/ml.

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: 18/09/2024 08:26:05, Received At: 18/09/2024 08:26:05, Reported At: 19/09/2024 15:30:50)

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









24726 180924		Registration ID	:	24726	Sample Collection	:	18/09/2024 08:26:05
Name	: MR. NANDKISHOR SAW	ANT			Sample Received	:	18/09/2024 08:26:05
Age/Sex	: 57 Yrs. / M	Printed	:	19/09/2024 17:05:39	Report Released	:	19/09/2024 15:32:46
Ref. By	: BANK OF BARODA	Sent By	:	Arcofemi Healthcare Pvt	Ltd		

		EXAMINATION OF	URINE	
Test		Result	Unit	Biological Ref. Range
PHYSICAL EXAMINA	TION			
Quantity	:	20	ml	
Colour	:	Pale yellow		
Appearance	:	Clear		
Reaction (pH)	:	5.0		4.5 - 8.0
Specific Gravity	:	1.010		1.010 - 1.030
CHEMICAL EXAMINA	TION			
Protein	:	Absent		Absent
Glucose	:	Absent		Abesnt
Ketones Bodies	:	Absent		Abesnt
Occult Blood	:	Absent		Absent
Bilirubin	:	Absent		Absent
Urobilinogen	:	Absent		Normal
MICROSCOPIC EXAM	<u>IINATION</u>			
Epithelial Cells	:	0 - 2	/ hpf	
Pus cells	:	0 - 1	/ hpf	
Red Blood Cells	:	Absent	/ hpf	
Casts	:	Absent	/ lpf	Absent / lpf
Crystals	:	Absent		Absent
OTHER FINDINGS				
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: 18/09/2024 08:26:05, Received At: 18/09/2024 08:26:05, Reported At: 19/09/2024 15:32:46)

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











Registration ID : 24726

: MR. NANDKISHOR SAWANT Name Printed Age/Sex : 57 Yrs. / M Ref. By Sent By

: 19/09/2024 17:05:39 Report Released

Sample Collection : 18/09/2024 08:26:05 Sample Received

: 18/09/2024 08:26:05

: 18/09/2024 16:23:32

: BANK OF BARODA

: Arcofemi Healthcare Pvt Ltd

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.

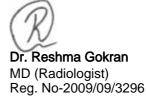
Bony thorax appears normal.

Soft tissues appear normal.

IMPRESSION:

No significant abnormality detected.









 Name
 :
 MR. NANDKISHOR SAWANT

 Age/Sex
 :
 57 Yrs. / M
 Printed

 Ref. By
 :
 BANK OF BARODA
 Sent By

Registration ID : 24726 WANT

24726

: 19/09/2024 17:05:39

: Arcofemi Healthcare Pvt Ltd

- Sample Collection Sample Received Report Released
- : 18/09/2024 08:26:05
- : 18/09/2024 08:26:05
- : 18/09/2024 16:23:32





: MR. NANDKISHOR SAWANT Name

Age/Sex : 57 Yrs. / M

Sent By

: BANK OF BARODA Ref. By

Printed

: 19/09/2024 17:05:39

Registration ID : 24726

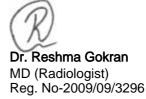
: Arcofemi Healthcare Pvt Ltd

Sample Collection Sample Received Report Released

- : 18/09/2024 08:26:05
- : 18/09/2024 08:26:05
- : 18/09/2024 16:23:32

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









Registration ID : 24726 : 18/09/2024 08:26:05 Sample Collection : MR. NANDKISHOR SAWANT Sample Received : 18/09/2024 08:26:05 Name Age/Sex Printed : 19/09/2024 17:05:39 Report Released : 18/09/2024 09:56:10 : 57 Yrs. / M : BANK OF BARODA Sent By Ref. By : Arcofemi Healthcare Pvt Ltd

USG ABDOMEN & PELVIS - MALE

Liver:- is normal in size and shows normal parenchymal echogenicity. No focal or diffuse lesion is seen. The portal and hepatic veins are normal. No IHBR dilatation seen.

Gall Bladder:- is well distended. No calculus or mass lesion is seen. No GB wall thickening or pericholecystic fluid is seen.

CBD :- is normal.

Pancreas:-is normal in size and reflectivity. No focal lesion seen.

Spleen:- is normal in size (8.4 cms) and reflectivity. No focal lesion is seen.

Kidneys:- Both Kidneys are normal in size, shape, position. They show normal reflectivity. CMD is maintained. No calculi or hydronephrosis seen on either side.

Right kidney - 9.4 x 4.0 cms Left kidney - 10.0 x 4.3 cms

Urinary Bladder:- is well distended and shows normal wall thickness. No intraluminal lesion seen.

Prostate:- is normal in size, reflectivity and measures 2.7 x 2.8 x 2.9 cms (Volume – 12 cc). No focal lesions.

No ascites is seen. No significant lymphadenopathy is seen.

IMPRESSION:

• No significant abnormality is seen.

Thanks for the Referral

(Collected At: 18/09/2024 08:26:05, Received At: 18/09/2024 08:26:05, Reported At: 18/09/2024 09:56:10)

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



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





Registration ID : 24726

Sample Collection : 18/09/2024 08:26:05 Sample Received

Age/Sex Ref. By

Name

: MR. NANDKISHOR SAWANT Printed Sent By

: 19/09/2024 17:05:39

Report Released

: 18/09/2024 08:26:05

: 19/09/2024 16:40:38

: 57 Yrs. / M : BANK OF BARODA

: Arcofemi Healthcare Pvt Ltd

OPTHALMIC EVALUATION

Examination	Right Eye	Left Eye
Distance Vision (With Glass)	6/6	6/6
Near Vision (With Glass)	N/6	N/6
Color Vision	No	rmal
Remarks	No	rmal

(Collected At: 18/09/2024 08:26:05, Received At: 18/09/2024 08:26:05, Reported At: 19/09/2024 16:40:38)

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





ellas Clinics MEDICAL EXAMINATION REPORT Name Mr./Mrs./ Miss Nondkishor ٩, Sex Male/ Female Age (yrs.) UHID : Date 18/09/2024 Bill No. : Marital Status Married/ No. of Children / Unmarried/ Widow : to complainty **Present Complaints** Klelo DM-I since 15 year (I MTF(500) Klelo). Hypothyssidism & 3 year (I Thyrox CAS may) Past Medical : History Surgical : -> No operative History Personal History Diet : Veg 🛛 / Mixed IL:/ Addiction : Smoking_ / Tobacco Chewing / Alcohol / Any Other HT/DM/IHD/Stroke/Any Other - Pused away Family History Father = Mother = HT / DM / IHD / Stroke / Any Other - Past and a Mother = Siblings = HT / DM / IHD / Stroke / Any Other - Jister DM Siblings = Drug Allergy History of Allergies + Hypoth you Any Other History of Medication For HT / DM / IHD / Hypothyroidism (yme Any Other a above G.E.: MAD On Examination (O/E) R.S.: deer C.V.S.: 5112 C.N.S.: unscious oler P/A: roft NT Any Other Positive Findings : NAO

Height LS cms	Weight 62 Kgs
BMI	22.0
Pulse (per min.) 74 min	Blood Pressure (mm of Hg) 110 70 mm of Hg
, POD-GEY on RA	Gynaecology
Examined by	Dr.
Complaint & Duration	
Other symptoms (Mict, bowels etc)	
Menstrual History	MenarcheCycleLoss
	Pain I.M.B P.C.B
	L.M.PVaginal Discharge
	Cx. Smear Contraception
Obstetric History	
Examination :	
Breast	
Abdomen	
P.S.	
P.V.	
Gynaecology Impression & Recommendation	
Recommendation	EXCELLAS CLINICS PVT. LTD B-1, Vikes Paradise Commercial, Below Axis Bank, LBS Marg, Near Santoshi Mata Mandir, Mulund (West), Mumbai - 400080
Physician Impression	
Examined by :	 Overweight = To Reduce Weight Underweight = To Increase Weight

Excellas Clinics Pvt Ltd

Summary

B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai 3257/NANDKISHOR SAWANT 57 Yrs/Male 62 Kg/168 Cms Date: 18-Sep-2024 10:27:22 AM

2

Ref.By : MEDIWHEEL Medication : DM Objective :

Protocol : BRUCE History : DM

Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (mph)	Grade	METs	H.R. (bpm)	B.P. (mmHg)	R.P.P.	PVC	Comments
Supine				ē.	1.0	85	110/70	93	-	
Standing		9			1.0	87	110/70	95	-	
HV					1.0	91	110/70	100		
ExStart	20				1.0	86	110/70	94	э.	
Stage 1	3:00	3:01	1.7	10.0	4.7	123	120/80	147		
Stage 2	3:00	6:01	2.5	12.0	7.1	135	130/80	175	-	
PeakEx	0:30	6:31	3.4	14.0	7.6	144	130/80	187	-	
Recovery	1:00		0.0	0.0	1.2	114	160/80	182	÷.	
Recovery	2:00		0.0	0.0	1.0	97	150/80	145		
Recovery	3:00		0.0	0.0	1.0	94	140/80	131	-	
Recovery	3:04		0.0	0.0	1.0	95	130/80	123	-	

Findings:

Exercise Time : 6:31 minutes

Max HR attained : 144 bpm 88% of Max Predictable HR 163

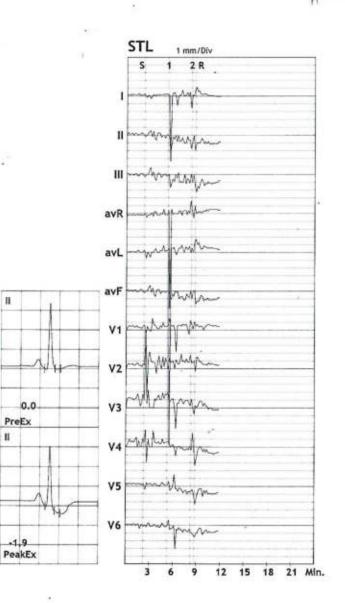
Max BP : 160/80(mmHg)

WorkLoad attained : 7.6 (Good Effort Tolerance)

ST depression in inferolateral leads during recovery phase

No Angina/Arrhythmia/S3/murmur

Final Impression : Test is Positive for inducible ischaemia. Maxmum Depression: 3:16 DR. MANSI SOLANKI MBBS MD GENERAL MEDICINE REG. NO. MMC 2024042065 Mouj



Advice/Comments:

Print Date: 18-Sep-2024

(rs/Mal (g/168	s Par DKIS le Cms	radise C SHOR SAV s	omm. B	elow	Axis Ban	ik, LBS	Marg,)	Mulund Hi Mi	W, Mur R: 86 b ETS: 1.(2: 110/)	pm D		Spe	HR:52% ed: 0.0 de: 0.0%	mph		Raw BRUC		ompa	arision	Ex Tim BLC :0 Notch	n	2		SUPIN 10.0 m 25 mm	nm/mV			I Excelos
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Vikas 7/NAN rs/Mal	DRISHOR SA	Comm, Be AWANT	elow Axis Bar	nk, LBS Marg, i	Mulund W, Mum HR: 89 bp METS: 1.0 BP: 110/70	m	MPHR:54 Speed: 0 Grade: 0	.0 mph	Ra	Lead + C w ECG UCE 0-100)Hz	ompar			4	STANDING 10.0 mm/mV 25 mm/Sec.	/	1) Excellar Tracina v
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, Vika 7/NAN Yrs/Ma Kg/168	ale	e Comm, SAWANT	Belo	ow Axis Bar	nk, Li	BS Mai	rg, Mi	HR ME	W, Mum 1: 90 bp TS: 1.0 : 110/7	om)		5	MPHR:5! Speed: (Grade: (0.0 m	nph		Raw I BRUC	ECG		nparisio					10	iV 0.0 m 5 mm/	m/mV /Sec.	1) (k 1) (k)
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ikas	s Clinics Pv s Paradise Co	omm, Be		k, LBS Marg, M	Mulund W, Mumbai					12 Le	ead + Co	omparisio	n				I.F.
NANI /Mai /168	DKISHOR SAW	VANT			HR: 86 bpm METS: 1.0 BP: 110/70		Spee	R:52% of 16 ed: 0.0 mph de: 0.0%		BRUG	ECG CE -100)Hz		Ex Time BLC :On Notch :O		ExStri 10.0 m 25 mm	m/mV	Traces
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Vikas /NANI s/Mal s/168	DKISHOR SA	Comm, B WANT	elow Axis I	Bank, L	.BS Mai	rg, À	H	W, N R: 12 ETS: P: 120	23 bpi 4.7	ai n		Sp	PHR:7 beed: rade:	1.7 п	nph		2 Lead Raw ECG BRUCE (1.0-100)		mparis	Ex BLC	Time : On tch : (10.0	e 1 (mm/m m/Sec	١V))		l Enel Paciac
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ikas NAN /Mal /168	Clinics Pv Paradise Co DKISHOR SAW le Cms ep-2024 10:2	mm, Be ANT		nk, LBS	Marg, N	1	HR: 1. METS:	35 DP	m		\$	MPHR: Speed Grade	: 2.5	mph	3	BRU	v ECG JCE 0-100)Hz	:		Ex Time BLC :Or Notch :	1	00		10	age 2 .0 mm mm/9		00)		All Excell 17 Boulse
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Vikas //NAND rs/Male g/168 (KISHOR SAV	omm, Be VANT	plow Axis Bar	nk, LBS	Marg,	6	d W, <i>N</i> HR: 14 METS: BP: 130	4 bpm 7.6			Spe	HR:88% ed: 3.4 de: 14	4 mp		Rav	v ECG	omparisio	Ex Ti BLC : Notch	On)			kEx mm/m m/Sec) Frank
	BaseLine		Current	60n	ns Post J	Curr	ent Rav	v Rhythi	m		-			В	aseLine		Current		¢	urren	nt Raw F	Rhythm						
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			1	+				++	-	1		-	+	-	1			-	-	-	-	-	-	1			-	
II 0.2		-1.9			11									V2		V2		v	2		-		-		-		-	-
0.0	Mary .	-1.1/	Lp-		1	w	1		AL.	m	1	VII.	1	0.5	min	0.9	and		1	N	im	100	1	.h	n	2	A	
			PPP 1		1		~	w	V	46	N	W	-	-	-V		1		1	V		- VII	~	1	w	M		
ш.					nı				1				1	-														
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	H.81-0-0-		MLP -			1º	w	h	Y.	VU	N	VV				-0.4	(here)		9	N	AN		1	W	MZ	N	m	
IVR		avR		a	vR									V4					1	Ì	-				Í	1		
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.1		1.4		a	-	0				A.	-		- 0	V5		-1.1	4	V5										
	V		ma -		4	M		T	M	Ar	~	1/V		0.2	NH HOR	0.2-	VIII-		V	N	N/		A	V	Yh	A	r	
vF		avF		a	F	1			1	-		,		Vő	1				1		1	1			1	1		
.1		0.1	1		0		-			2	-		0	.2	-	-1.2	1 + 1	¥6	1	-	11	-						
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rmsine	lia.com @ RMC 1	BraceTask (VEGA201_v8.0.12	_			_		-	-		-		-	np-2024											1		

Vikas NANI s/Mal /168		omm, B VANT	elow	Axis Ban	k, LBS	Marg,		HR: 1 METS: BP: 10	14 bp : 1.1	m		Sp	PHR:69% eed: 0.0 ade: 0.0	mph		Raw BRU	ead + Co ECG CE -100)Hz	, nips)		Recov 10.0 m 25 mm	m/mV	(01:0	0)	T and
	BaseLine		Çu	rent	60m	is Post J	Cur	rent Ra	w Rhy	thm					Base	Line		Curr	rent		Currer	nt Raw F	Rhyth	m	T			
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.2		-0.6					-		×			-		0.5	+		0.7					-		-	-	2		
-	44-		44			VL	1	YL		1	-14	5-	WV		-1	V		T		T,	17	W	~	~	-1	1	1	-
ш	1		1				-	1	-	1	1		1	V3			V3	+		V3								
.0		-0.8					-			1 +	-	-		1.0			0.8	1			1	1		1	++	-	1	
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/R		avR	-		a	VR	-							V4	1		V4	1		V4	1	1		1	1		1	
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-		~	1	**		1						-						+++~				N	~	Y/r	N			
nL	1	avL	1			vL			+		,	-	1	V5	1			1		V5		1		1	-		1	
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1	1	-0.7	-				-		+		1	-		0.2			-0.5	1		10	-	-	-			-	-	
2	44+		44+		1.1.	VL	1	UL)	-1	T	N	1	V	0.0	-11	++	0.3	Het.	-	3	1		-	2	N	1-1	J.	
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+			-				-		-		+ +	-			-			-			-	-				-	n -	

ikas NAND /Male 168 (KISHOR SAW	mm, Be ANT		k, LBS Marg,	Mulun	d W, Mu HR: 97 METS: 1 BP: 150	.0		Spe	IR:59% ed: 0.0 de: 0.09	mph	Ra	Lead + Co w ECG UCE 0-100)Hz	omparisio			10.	covery: 0 mm/mV mm/Sec.	(02:00)	V Excelle 17 eccade
+	BaseLine		Current	60ms Post J	Curr	ent Raw	Rhythm			_	В	aseLine		Current		Current Raw	Rhythm				
1	+++	1			-	++					VI		VI		¥1	T. I.		-			
.2	1 +	0.1	1		+						0.4	+ + + +	0.6								
	-AHH	0.4	Allt-		4		4-	-		-	0.5	4HA	0.2	1th		-m		ton		m	
-	+ + +		+ + +				-				+ +	++++		11				+++-		1	
	+ + +		111		-		1	1		-1		1		1				1		1	
11		11	+++++		+						V2		V2		V2	+ + +				-	
.2	1	-1.1			+					-	0.5		0.5	1				+ +			
.0	YHAN	-0.2	Masa		1	m	1 r		popel	WHY	0.8	-nythe	0.7	JAM-		-nr	- m		\sim	1	
+	+ + +	+ +-			-		17	14		14	+++	V.		11		¥.		++++		1	<i>w</i> .
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m	1 + +	- W	-		+	+ + -				+++	V3		V3	1	¥3			+ + +			
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4	44++	-0.6	Nur		1	1-1	Ar	NU	1-	VII	0.6	ANK >	0.7	Notion		-	-all-	hal		A	<u> </u>
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-	1						1	1		1		-		1							
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1		avL 0.6		avL							V5 0.4		-0.9		V5						
4		0.5	ht.		-		m	m	1	m	0.2	Num	-0.1	1.0		-	all a	-	-		
	V		IV.		1			V		V		+		142			TH2	P	-	-	
-		-			-		-														
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F 1		avF -1.1		avF	1						0.2		-0,8		٧6						
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-					5		4	14		4						4	4	4		4	
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Vikas /NANE rs/Mal g/168		omm, B WANT	elow Ax	is Bank,		H	W, Mur R: 94 b ETS: 1.0 P: 140/8	pm)		Spee	IR:57% ed: 0.0 de: 0.0%	mph	Ra BR	Lead + Co w ECG UCE .0-100)Hz	ompar	E	Ex Time 06:3 BLC :On Notch :On	0	10	ecovery).0 mm/m 5 mm/Sec)	U Excelos(17 ezasz xe
	BaseLine		Curren	t	60ms Post J	Currer	nt Raw R	hythm	-			E	laseLine		Curren	nt	Curre	nt Raw Rhy	thm				
1	+++	1	++	-	1				++	-	+ +-	VI	+ + + +	Vi		-	¥1 .		+ +			-	
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0.2	4	-0.8	1		"	_			-			V2 0.5		V2 0.4			V2						
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_	4 14-21		14	1-	14		47	100	1	4	<u> </u>				14	-				1			
avR		avR		1	avR							V4			1		¥4	1		1			
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vF		avF			avF			1	-	1		V6	1	Vő			V6	1		1	-		
0.1		-0.8	Alt									0.2		-0.7								++	-
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Excellas Clinics AGE/SEX: 57 YRS/MALE NAME : MR. NANDKISHOR SAWANT -DATE: 18/09/2024 REF BY : BOB AUDIOGRAM Left Ear Right Ear Audiogram Key 8000 12000 1000 4000 125 250 500 2000 -20 Right Left -10 AC 0 0 Unmasked Х 10 \triangle U Masked 20 Unmasked No Response X 30 Masked No Response 40 Ц 50 BC 60 Unmasked < > 70 Masked 80 Unmasked No Response 5 3 90 100 Masked No Response 110 120 10000 750 1500 3000 6000 Frequency in (Hz) Speech Audiometry Responses : Reliable / Fairly Reliable / Not Reliable Test Conduction : Satisfactory / Not Satisfactory If any other specify Procedure : Standard / Play P.T.A. Test Ear dBHL Audiological Interpretations : 25 Right 25 Left EXCELLAS CLINICS PVT. TD BILATERAL HEARING CONDUCTION SENSITIVITY WITHIN NORMAL LIMITS

S B-1, Vikas Partone Commence Below Aus Near Sand Mata Manut, Mulund AUDIOLOGIST



