



A Unit of Diagnostic Care with Trust

श्री साईं एडवांस इमेजिंग एंड डायग्नोस्टिक सेंटर

हर जीवन अमूल्य है



पुराना धमतरी रोड, सब्जी बाजार के सामने,
संतोषी नगर, रायपुर (छ.ग.) ☎ 0771-4023900

MRI | CT Scan | 4D Color USG | Digital X-Ray | Advance Pathology | 2D Echo/E.C.G./TMT | E.E.G/OPG/SPIRO

PT. NAME	:- MR. SANTOSH KUMAR PANDA	Sample Collected On	:- 26/10/2024
PT. AGE/SEX	:- 49 Y / M	Report Released On	:- 26/10/2024
MOBILE NO	:-	Accession On	:- 10
Ref. By.	:- SELF	Patient Unique ID No.	:- 10524
Company	:- ARCOFEMI HEALTH CARE LTD.	TPA	:- -

BIO CHEMISTRY

Description	Result	Unit	Biological Ref. Range
FASTING BLOOD SUGAR	79.30	mg/dL	70 - 110
POST PRANDIAL BLOOD SUGAR	94.6	mg/dl	70 - 140
Urea	27.4	mg/dL	15 - 45
Serum Creatinine	0.89	mg/dl	0.66 - 1.25
Uric Acid	4.2	mg/dL	3.5 - 8.5
Serum Sodium	140.2	mmol/L	135 - 155
Serum Potassium	4.5	mmol/L	3.5 - 5.3
Cholesterol	140.5	mg/dl	Desirable : <200 Borderline :200 - 239 High : >=240
Triglycerides	115.6	mg/dl	<150 : Normal 150-199 : Borderline - High 200-499 : High >500 : Very High
HDL	46.1	mg/dl	<40 : Low 40-60 :Optimal >60 : Desirable
LDL	71.28	mg/dl	<100 : Normal 100-129 : Desirable 130-159 : Borderling-High 160-189 : High >190 : Very High
VLDL	23.12	mg/dl	7 - 40
Cholesterol/HDL Ratio	3.05		0 - 5.0
LDL/HDL Ratio	1.54	ratio	0 - 3.5

Clinical Significance :

Total Cholesterol

Serum cholesterol is elevated in hereditary hyperlipoproteinemias and in other metabolic diseases. Moderate-to-markedly elevated values are also seen in cholestatic liver disease, risk factor for cardiovascular disease. Low levels of cholesterol may be seen in disorders like hyperthyroidism, malabsorption, and deficiencies of apolipoproteins.

Triglycerides

Increased serum triglyceride levels are a risk factor for atherosclerosis. Hyperlipidemia may be inherited or may be due to conditions like biliary obstruction, diabetes mellitus, nephrotic syndrome, renal failure, certain metabolic disorders or drug induced.

LDL Cholesterol (Direct) - LDL Cholesterol is directly associated with increased incidence of coronary heart disease, familial hyperlipidemias, fat rich diet intake, hypothyroidism, Diabetes mellitus, multiple myeloma and porphyrias. Decreased LDL levels are seen in hypolipoproteinemias, hyperthyroidism, chronic anaemia, and Reye's syndrome.

Undetectable LDL levels indicate abetalipoproteinemia

HDL Cholesterol - High-density lipoprotein (HDL) is an important tool used to assess risk of developing coronary heart disease. Increased levels are seen in persons with more physical activity. Very high levels are seen in case of metabolic response to medications like hormone replacement therapy. Low HDL cholesterol correlates with increased risk for coronary heart disease (CHD). Very low levels are seen in Tangier disease, cholestatic liver disease and in association with decreased hepatocyte function.

DR. MAIKAL KUJUR MBBS, MD
PATHOLOGY (AIIMS, NEW DELHI)
REG. NO. : CG MCI-2996/2010

CHECKED BY

सही जाँच ही सही इलाज का आधार है...



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Bilirubin - Total	0.60	mg/dl	0.2 - 1.3
Bilirubin - Direct	0.12	mg/dl	0 - 0.3
Bilirubin (Indirect)	0.48	mg/dl	0 - 1.1
SGOT (AST)	30.7	U/L	17 - 59
SGPT (ALT)	32.9	U/L	21 - 72
Alkaline phosphatase (ALP)	90.4	U/L	38 - 126
Total Proteins	7.4	g/dl	6.3 - 8.2
Albumin	4.3	g/dl	3.5 - 5.0
Globulin	3.10	g/dl	2.3 - 3.6
A/G Ratio	1.39		1.1 - 2.0
Gamma GT	35.4	U/L	<55

Clinical Significance :

Alanine transaminase (ALT)

ALT is an enzyme found in the liver that helps your body metabolize protein . When the liver is damaged, ALT is released into the bloodstream and levels increase .

Aspartate transaminase (AST)

AST is an enzyme that helps metabolize alanine, an amino acid. Like ALT, AST is normally present in blood at low levels. An increase in AST levels may indicate liver damage or disease or muscle damage.

Alkaline phosphatase (ALP)

ALP is an enzyme in the liver, bile ducts and bone. Higher-than-normal levels of ALP may indicate liver damage or disease , such as a blocked bile duct, or certain bone diseases.

Albumin and total protein

Albumin is one of several proteins made in the liver. Your body needs these proteins to fight infections and to perform other functions . Lower-than-normal levels of albumin and total protein might indicate liver damage or disease.

Bilirubin.

Bilirubin is a substance produced during the normal breakdown of red blood cells. Bilirubin passes through the liver and is excreted in stool. Elevated levels of bilirubin (jaundice) might indicate liver damage or disease or certain types of anemia.

T4 (Thyroxine)		ug/dl	4.6 - 12.5
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CLINICAL PATHOLOGY

Description	Result	Unit	Biological Ref. Range
STOOL EXAMINATION			
<u>Physical Examination</u>			
Consistency	Solid		
Colour	Pale Yellow		Pale Yellow
Reaction.	ALKALINE		
Blood	Absent		
Mucus	Absent		
Worms	Absent		
<u>Microscopic Examination</u>			
Ova	Nil		
Cyst	Nil		
Epithelial cell	1-2	/HPF	0 - 1
PUS CELLS	1-2	/HPF	0 - 5
Trophozoite	Nil		
Vegetable Material	Absent		
Other Findings	Absent		
Appearance	Clear		Clear
Specific Gravity	1.010		1.003 - 1.030
Urine Glucose(Sugar)	Nil		Not Detected
<u>Microscopic Examination</u>			
Epithelial cells	1-2	/HPF	0 - 5
PUS CELLS	1-2	/HPF	0 - 5
RBC (Urine)	Absent	/HPF	0 - 3
Casts	Absent		Not Detected
Crystals	Absent		Not Detected
Bacteria	Absent		Not Detected
Reaction (pH)	Acidic		
<u>Chemical Examination</u>			
<u>Physical Examination</u>			
Colour	Pale Yellow		Pale Yellow
Urine Protein(Albumin)	Nil		Not Detected

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HAEMATOLOGY

Description	Result	Unit	Biological Ref. Range
BLOOD GROUP			
BLOOD GROUP	" O "		
Rh	Positive		

NOTE :- This technique is used for preliminary ABO grouping specimen should Be Further Tested by Tube Method For Confirmation.

W.B.C. Indices

TOTAL WBC COUNT	11900	/cumm	4000 - 11000
NEUTROPHILS	65	%	40 - 70
LYMPHOCYTES	29	%	20 - 52
MONOCYTES	04	%	4 - 12
EOSINOPHILS	02	%	1 - 6
BASOPHILS	00	%	0 - 1

R.B.C. Indices

HAEMOGLOBIN	15.9	gm/dL	12.5 - 16.5
RBC COUNT	4.99	Mill/cumm	4.2 - 5.5
HEMATOCRIT (PCV)	45.1	%	37.5 - 49.5
MCV	90.5	fL	80 - 95
MCH	32.0	pg	26 - 32
MCHC	35.25	g/dl	32 - 36
RDW-CV	13.9	%	11.5 - 16.5

Platelet Indices

PLATELET COUNT	228000	/ μ L	150000-400000
MPV	10.8	fl	7.0 - 11.0
PDW	16.2	%	12 - 18
P-LCR	32.3	%	13 - 43
ESR	14	after 1 hr	0 - 15
Advice			Correlate Clinically

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Company	:- ARCOFEMI HEALTH CARE LTD.	TPA	:- -
HbA1C-Glycosylated Haemoglobin	5.2	%	Normal Range : <6% Good Control : 6 - 7% Fair Control : 7 - 8% Unsatisfactory Control : 8 -10% Poor Control : >10%

Clinical Significance :

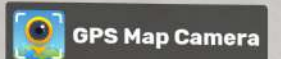
Hemoglobin A1c (HbA1c) level reflects the mean glucose concentration over the previous period (approximately 8-12 weeks) and provides a much better indication of long-term glycemic control than blood and urinary glucose determinations. American Diabetes Association (ADA) include the use of HbA1c to diagnose diabetes, using a cutpoint of 6.5%. The ADA recommends measurement of HbA1c 3-4 times per year for type 1 and poorly controlled type 2 diabetic patients, and 2 times per year for well-controlled type 2 diabetic patients) to assess whether a patient's metabolic control has remained continuously within the target range. Falsely low HbA1c results may be seen in conditions that shorten erythrocyte life span, and may not reflect glycemic control in these cases accurately.

--- End Of Report ---

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सही जाँच ही सही ईलाज का आधार है...



रायपुर, छत्तीसगढ़, भारत

6J6W+C64, कृष्णा नगर, संतोषी नगर, रायपुर, मथुरेना, छत्तीसगढ़ 492001, भारत

Lat 21.21108°

Long 81.645663°

26/10/24 09:16 AM GMT +05:30



भारत सरकार

Government of India



संतोष कुमार पांडा

SANTOSH KUMAR PANDA

पिता : स्व० रामकृष्ण पांडा

Father : LATE RAMAKRISHNA PANDA

जन्म तिथि / DOB : 08/07/1975

पुरुष / Male



6170 8472 5686

आधार - आम आदमी का अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

पता:

२९ एम् एम् पि यू, ३३ विंग, एयर
फोर्स स्टेशन जामनगर, जामनगर,
अएरोदरोम्मे, गुजरात, 361003

Address:

29 MMPU, 33 WING, AIR FORCE
STATION JAMNAGAR,
Balambha, Aerodrome,
Jamnagar, Gujarat, 361003

6170 8472 5686



1947

1800 300 1947



help@uidai.gov.in

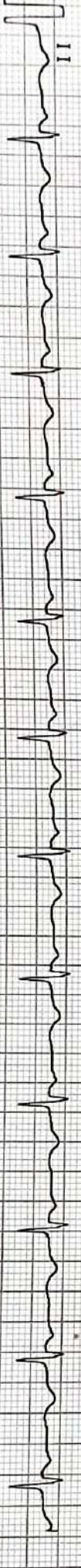
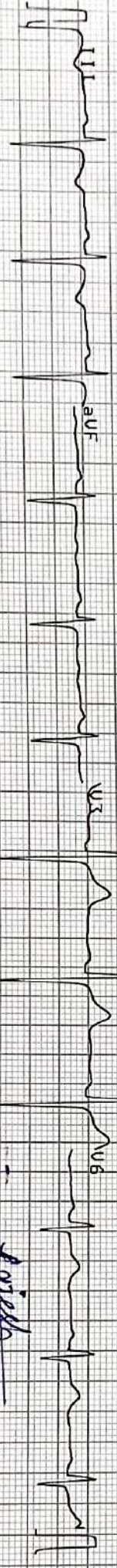
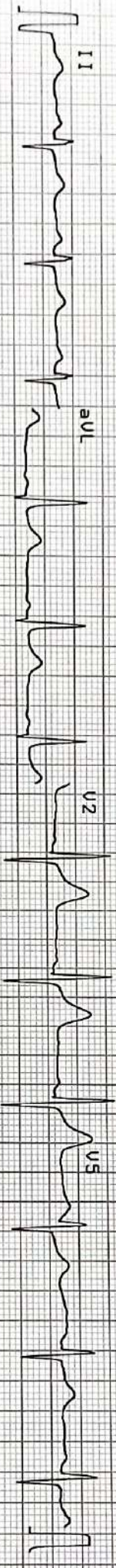
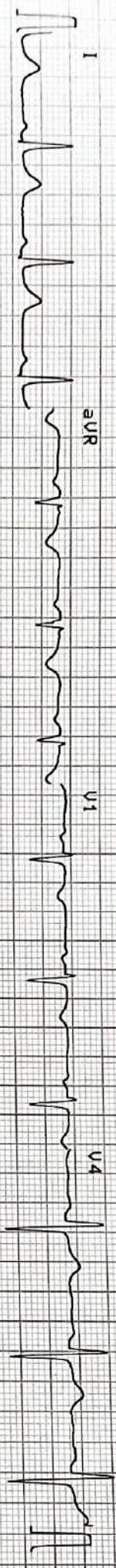
WWW

www.uidai.gov.in

Patient: **MR SANTOSH KUMAR**
HR 74/min
P axis: -27°
ABNORMAL LEFT AXIS DEVIATION

Intervals: RR 810 ms, P 84 ms, PR 126 ms, QRS -33°, T 2°, R-S TRANSITION ZONE IN V LEADS DISPLACED TO THE LEFT
QT 390 ms, QRS 84 ms, P (II) -0.09 mV, S (V1) -0.64 mV, LEFT ANTERIOR FASCICULAR BLOCK
QTc 433 ms, R (V5) 0.58 mV, Sokol. 1.66 mV, UNCONFIRMED REPORT

48 year / M
..... cm / kg
10 mm/mV



Rajesh
DR. RAJESH SHARMA
MD, PGDCG (Cardiologist)
CGMC-686/2007

SR



A Unit of Diagnostic Care with Trust

श्री साई एडवांस इमेजिंग एण्ड डायग्नोस्टिक सेंटर PVT. LTD.

हर जीवन  अमूल्य है

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संतोषी नगर, रायपुर (छ.ग.) ☎ 0771-402390

MRI | C.T. Scan | 4-D Colour USG | Digital X-Ray | Advanced Pathology | 2D Echo / E.C.G. / TMT / E.E.G / OPG / SPI

DATE 26-10-2024

PATIENT NAME MR. SATOSH KUMAR PANDA
AGE/SEX 48 YRS / MALE
REF. BY BANK OF BARODA

X-RAY CHEST PA VIEW **OBSERVATION & IMPRESSION**

- Bilateral lung fields are clear.
- Both costophrenic angles are normal.
- Bilateral hila are normal.
- The cardiac shadow is normal.
- The bony thorax is normal.

IMPRESSION

No significant abnormality detected.

Needs clinical correlation & other investigations.



Dr. Alsaba Khan ML
Consultant Radiologist.

Investigations have their limitation, solitary radiological / pathological and other investigations never confirm the final diagnosis of disease. They only help in diagnosing the disease in correlation to symptom and other related test please interpret accordingly.

Note-

1. The report & film are not valid for medico-legal purpose.
2. Please intimate us if any typing mistakes & send the report for correlation within 7 days

सही जाँच ही सही इलाज का आधार है...

mail : shrisaiimaging@gmail.com, Website : www.shrisaidiagnostic.com



DATE 26-10-2024

PATIENT NAME MR. SATOSH KUMAR PANDA
AGE/SEX 48 YRS / MALE
REF. BY BANK OF BARODA

SONOGRAPHY OF THE ABDOMEN

PROCEDURE DONE BY ULTRASOUND MACHINE TOSHIBA XARIO-200 (4D COLOR DOPPLER)

LIVER : The liver is normal in size, shape & contour with normal echotexture.
Hemangioma seen in right lobe of liver, size ~ 3.3 x 2.0 cm. The intrahepatic biliary ducts are normal. The CBD is normal in course, caliber & contour. Hepatic & portal vein appear normal in morphology.

GALL BLADDER : Partially distended (Post prandial status) shows normal wall thickness.

PANCREAS : It is normal echogenicities and size, shape. Pancreatic duct is normal.

SPLEEN : Spleen is normal size, shape and position. No focal lesion seen.

KIDNEY : Right kidney measures ~ 9.5 x 3.8cm.
Left kidney measures~ 9.5 x 4.6 cm.
Both Kidneys are normal size, shape and position.
Renal parenchymal echogenicities are normal.
No evidence of any calculus or pelvicalyceal dilation.

URINARY BLADDER: UB is well distended with normal wall thickness. No evidence of mass /calculus.

PROSTATE : It is normal in size, shape & smooth outlines.

RETRO PERITONEUM : No evidence of lymphadenopathy / mass.

FREE FLUID : No free fluid seen in abdomen & peritoneal cavity.

IMPRESSION:-

- Hemangioma seen in right lobe of liver.

Needs clinical correlation & other investigations.



Dr. Alsaba Khan MD
Consultant Radiologist

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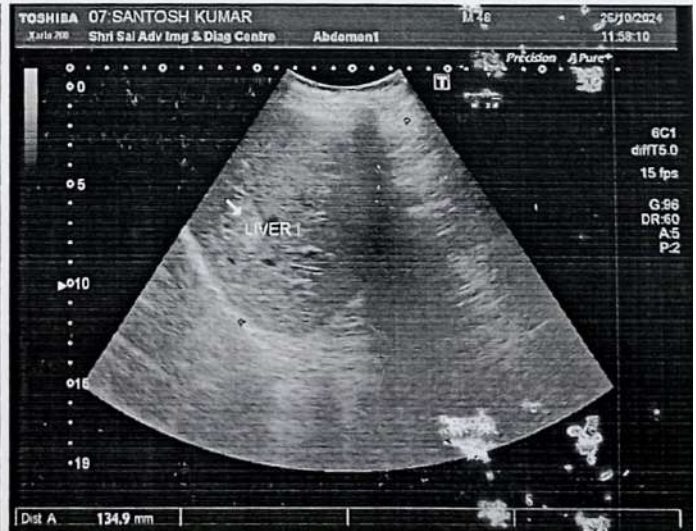
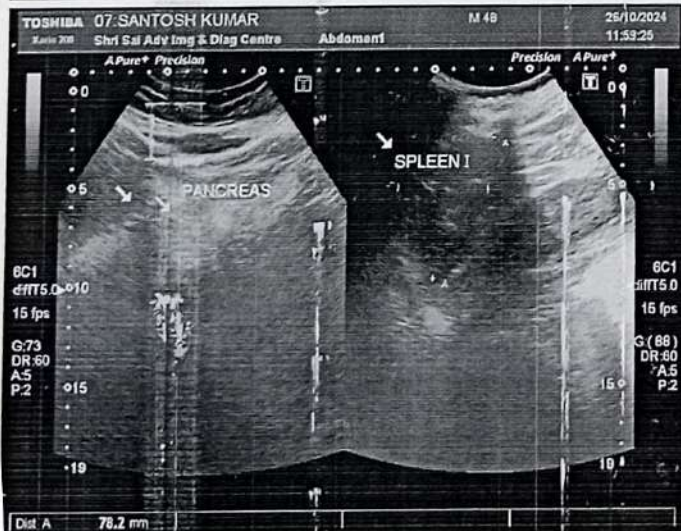
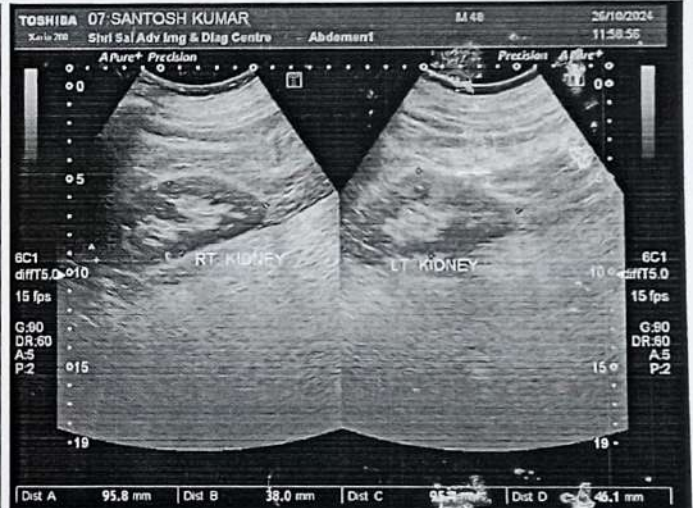
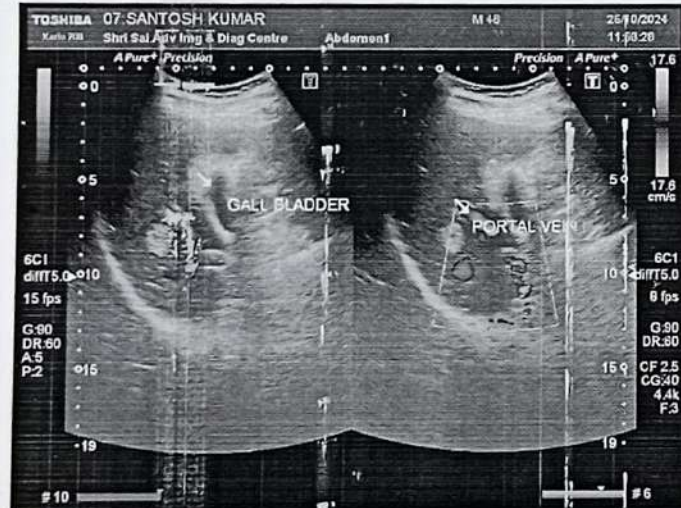
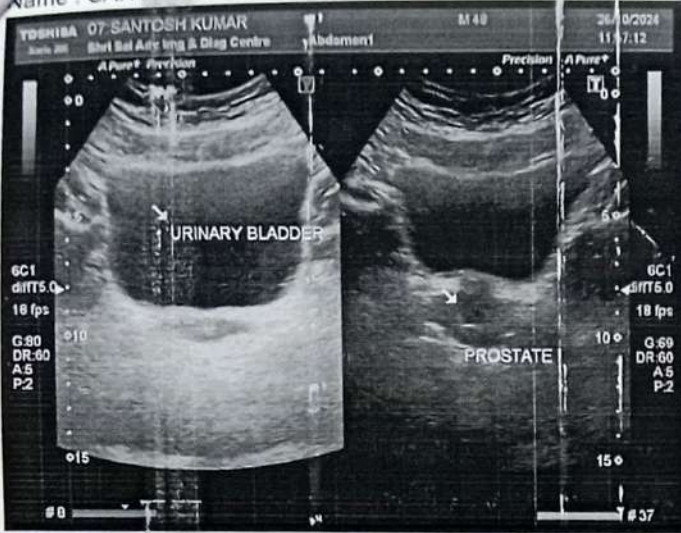
Note-

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- 2) Please intimate us if any typing mistakes & send the report for correlation within 7 days.
- 3) कृपया अगली बार जांच के लिए आने पर पुराना रिपोर्ट साथ में लावे

सही जाँच ही सही ईलाज का आधार है...

SAI DIAGNOSTIC CENTER RAIPUR

Oct 2024 Study : Abdomen
Name : SANTOSH KUMAR



SHRI SAI ADVANCE IMAGING AND DIAGNOSTIC CENTER
 RADHAKRISHNA VIHAR SANTOSHI NAGAR Email:

Report



483 / MR. SANTOSH KUMAR PANDA / 48 Yrs / M / 167 Cms / 67 Kg / NonSmoker
 Date: 26 - 10 - 2024 Refd By : MEDIWHEEL Examined By:

Stage	Time	Duration	Speed(mph)	Elevation	METS	Rate	%THR	BP	RPP	PVC	Comments
Supine	00:09	0:09	00.0	00.0	01.0	077	45 %	---/---	000	00	
Standing	00:24	0:15	00.0	00.0	01.0	075	44 %	---/---	000	00	
ExStart	01:32	1:08	00.0	00.0	01.0	081	47 %	---/---	000	00	
BRUCE Stage 1	04:32	3:00	01.7	10.0	04.7	113	66 %	125/85	141	00	
BRUCE Stage 2	07:32	3:00	02.5	12.0	07.1	130	76 %	130/90	169	00	
BRUCE Stage 3	10:32	3:00	03.4	14.0	10.2	153	89 %	130/95	198	00	
PeakEx	10:36	0:04	01.1	00.0	10.3	149	87 %	130/95	193	00	
Recovery	11:36	1:00	01.1	00.0	04.3	135	78 %	130/90	175	00	
Recovery	12:10	1:34	01.1	00.0	01.0	116	67 %	120/85	139	00	

FINDINGS :

Exercise Time : 09:04
 Max HR Attained : 153 bpm 89% of Target 172
 Max BP Attained : 130/95 (mm/Hg)
 Max Workload Attained : 10.3 Good response to induced stress
 Test End Reasons : Test Complete, Heart Rate Achieved

REPORT : TMT Report is Negative

[Handwritten Signature]

Rajish
 DR. RAJESH SHARMA
 MD, PGDCC (Cardiologist)
 CGMC- 686/2007

483 / MR. SANTOSH KUMAR PANDA / 48 Yrs / M / 167 Cms / 67 Kg / HR : 77

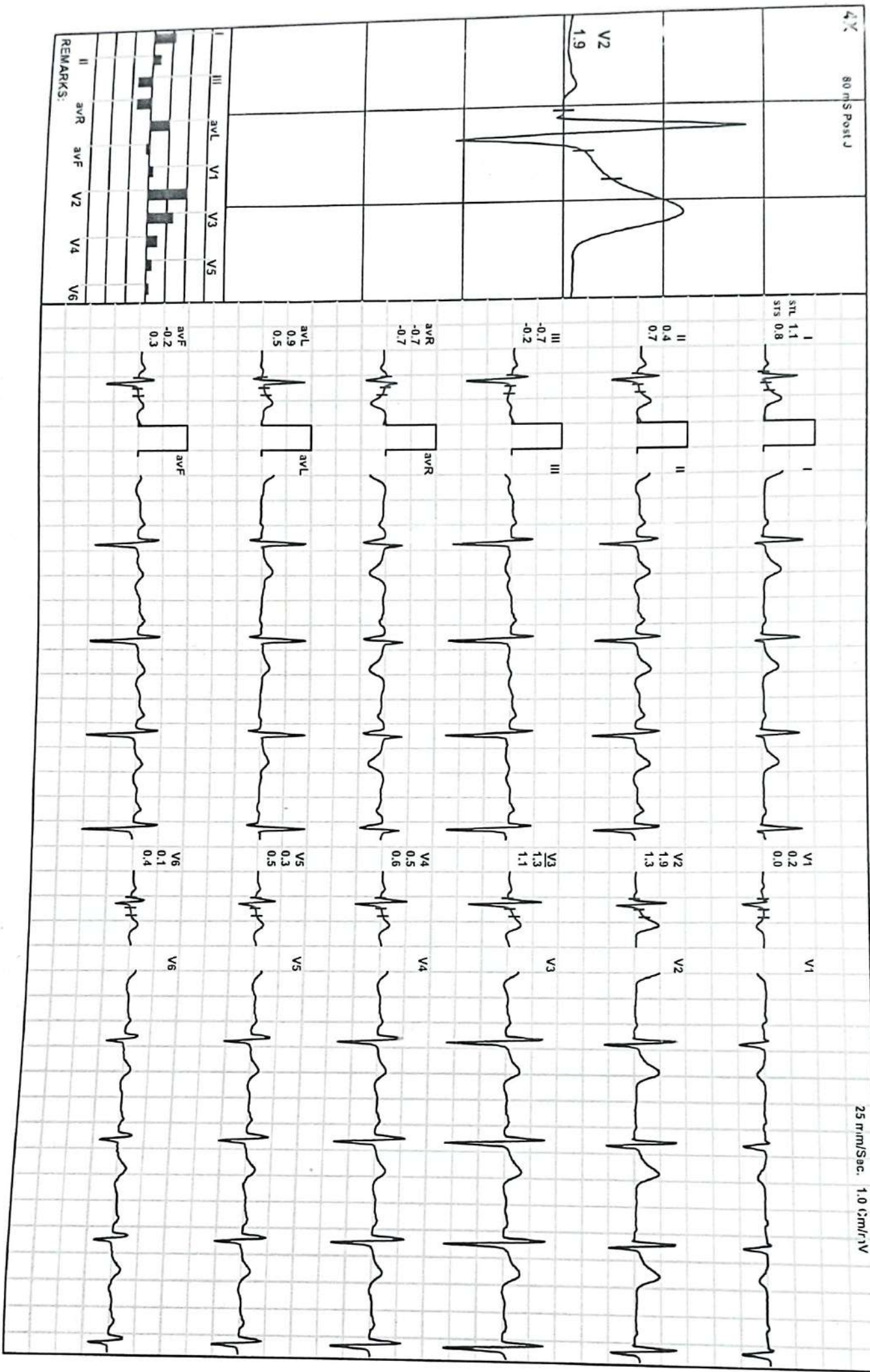
Date: 26 - 10 - 2024

METS: 1.0/ 77 bpm 45% of THR BP: ---/--- mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/ LF 100 Hz

EXTime: 00:00 0.0 mph, 0.0%

4% 80 m/s Post J

25 mm/Sec. 1.0 (mV/rV)



REMARKS:

SHRI SAI ADVANCE IMAGING AND DIAGNOSTIC CENTER

483 / MR. SANTOSH KUMAR PANDA / 48 Yrs / M / 167 Cms / 67 Kg / HR : 75

BRUCE: Standing(0:15)

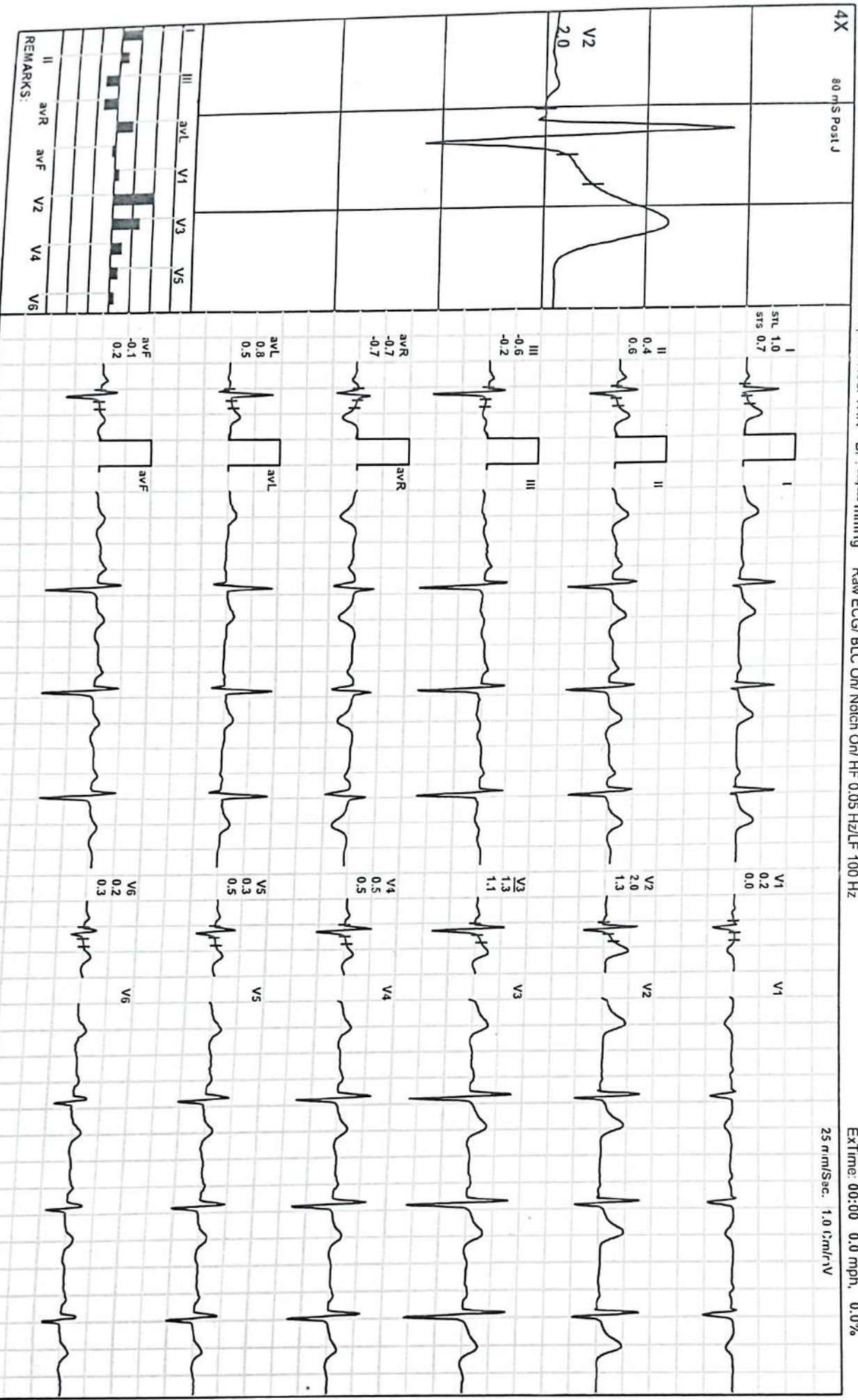


Date: 26 - 10 - 2024

METS: 1.0/ 75 bpm 44% of THR BP: ---/--- mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 00:00 0.0 mph, 0.0%

25 mm/Sec. 1.0 cm/rV



REMARKS:

483 / MR. SANTOSH KUMAR PANDA / 48 Yrs / M / 167 Cms / 67 Kg / HR : 81

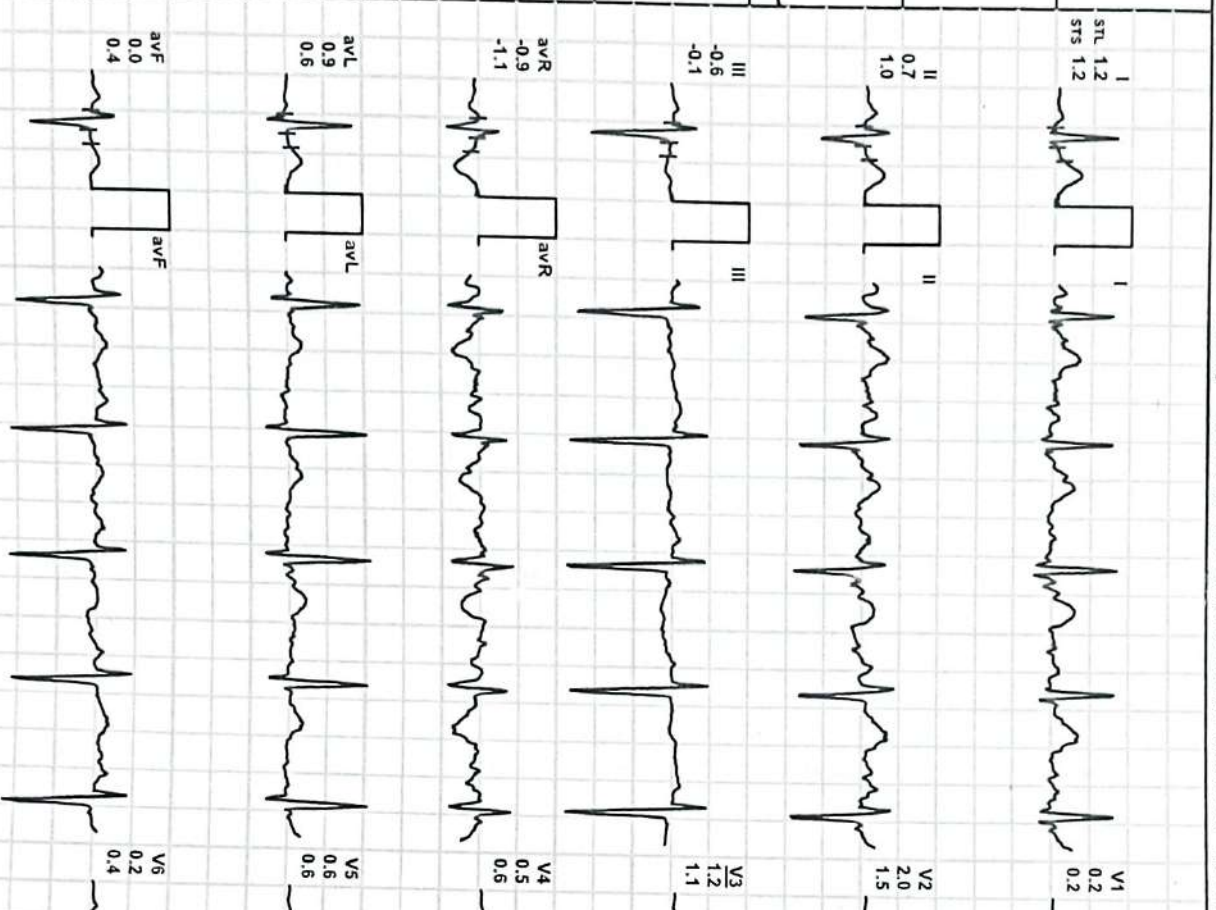
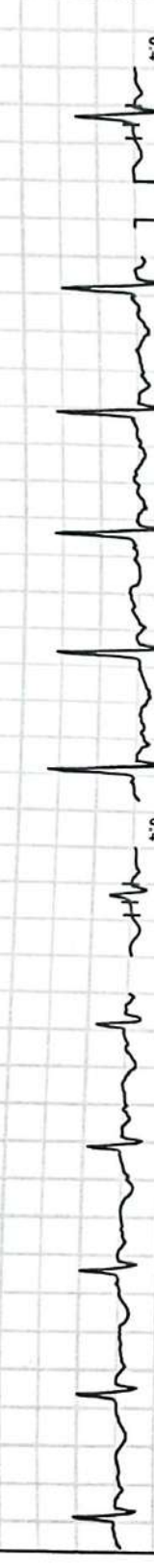
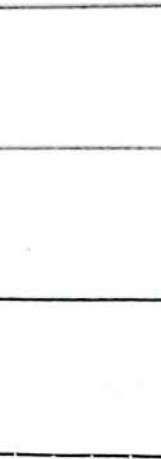
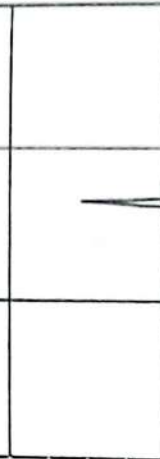
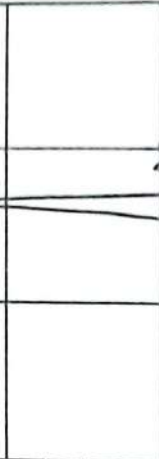
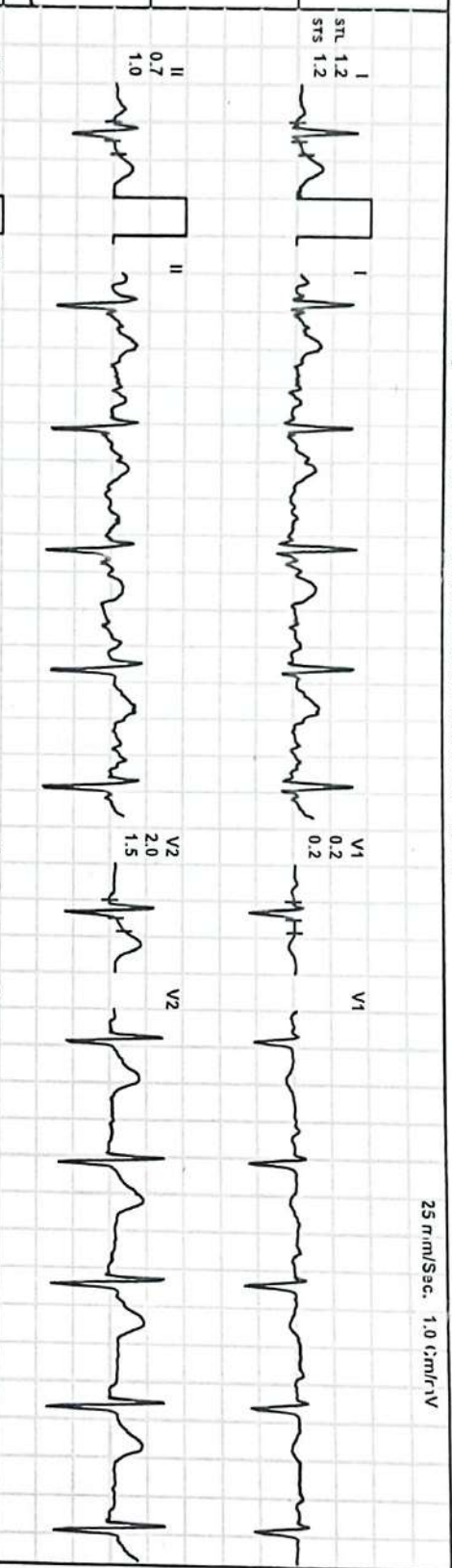
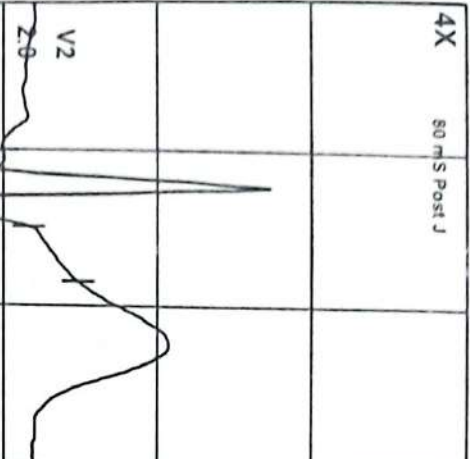
Date: 25 - 10 - 2024

METS: 1.0/ 81 bpm 47% of THR BP: ---/--- mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

EXTime: 00:00 0.0 mph, 0.0%

4X 80 ms Post J

25 mm/Sec. 1.0 cm/rV



REMARKS:

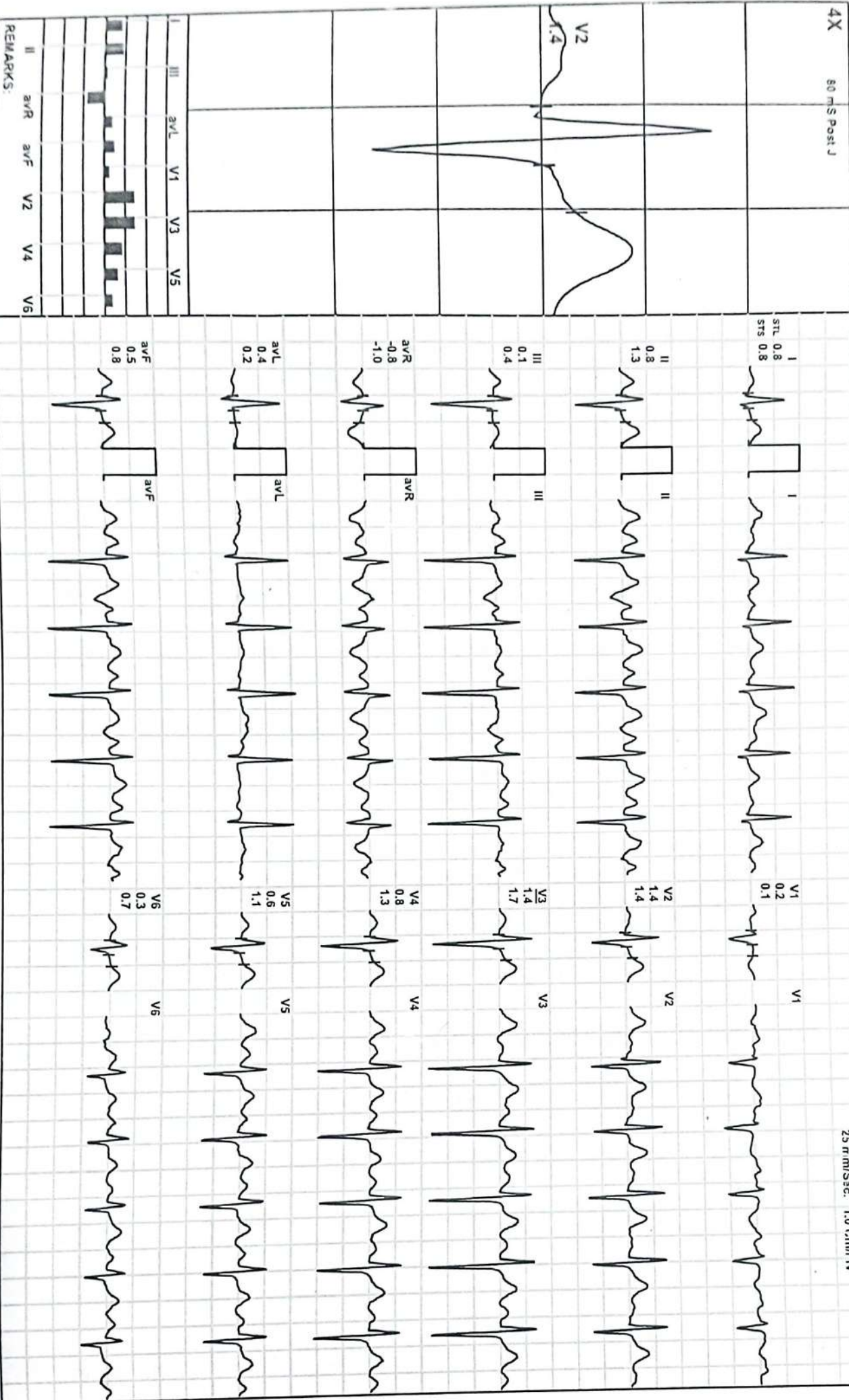
483 / MR. SANTOSH KUMAR PANDA / 48 Yrs / M / 167 Cms / 67 Kg / HR : 113

Date 26 - 10 - 2024

METS: 4.7 / 113 bpm 65% of THR BP: 125/85 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/ LF 100 Hz

ExTime: 03:00 1.7 mph, 10.0%

25 mm/Sec. 1.0 cm/mV



REMARKS:

SHRI SAI ADVANCE IMAGING AND DIAGNOSTIC CENTER

483 / MR. SANTOSH KUMAR PANDA / 48 Yrs / M / 167 Cms / 67 Kg / HR : 130

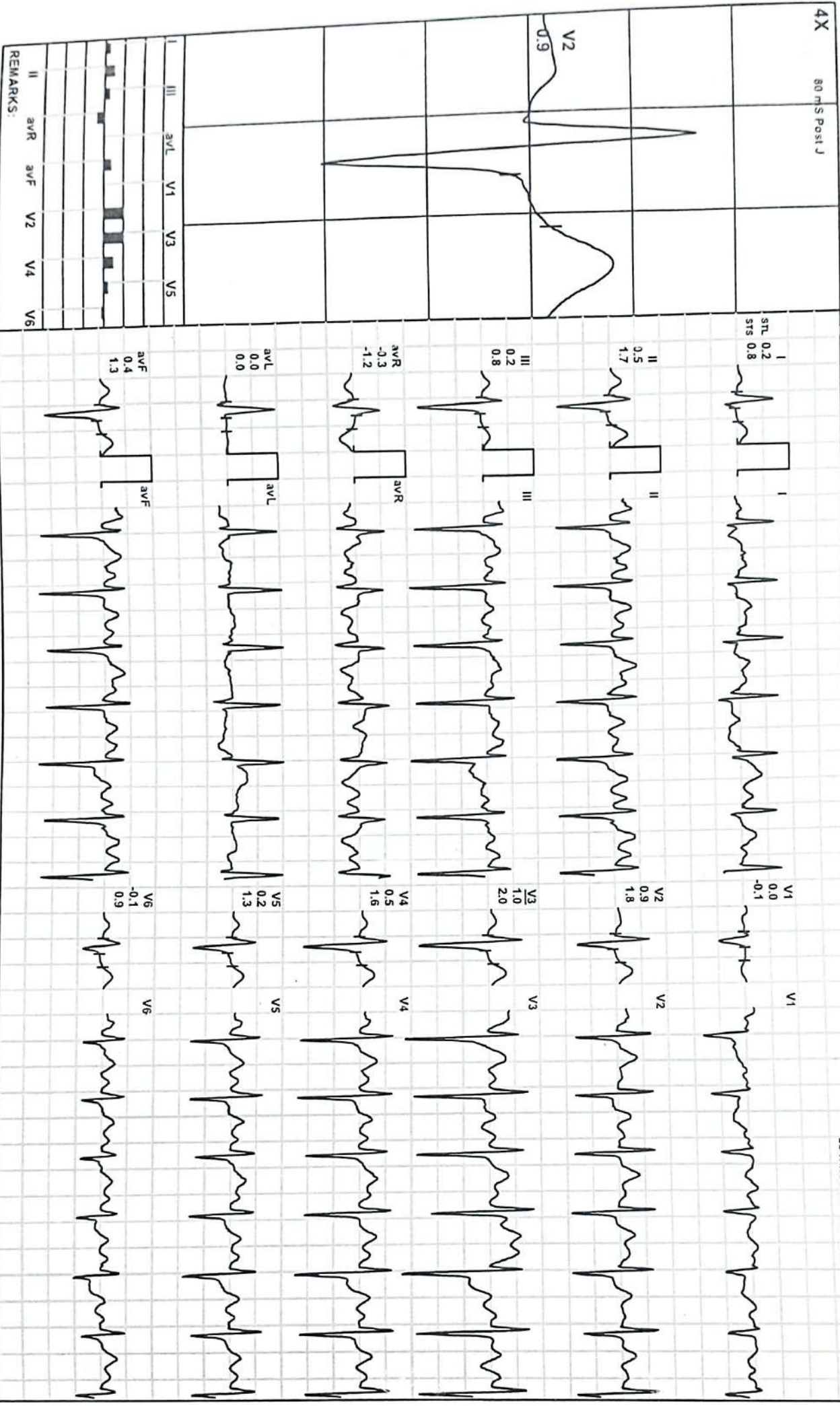
BRUCE: Stage 2 (3:00)

AGHPL

Date: 26 - 10 - 2024

METS: 7.1 / 130 bpm 76% of THR BP: 130/90 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

EXTime: 06:00 2.5 mph, 12.0%
25 mm/Sec. 1.0 (cm/rV)



REMARKS:



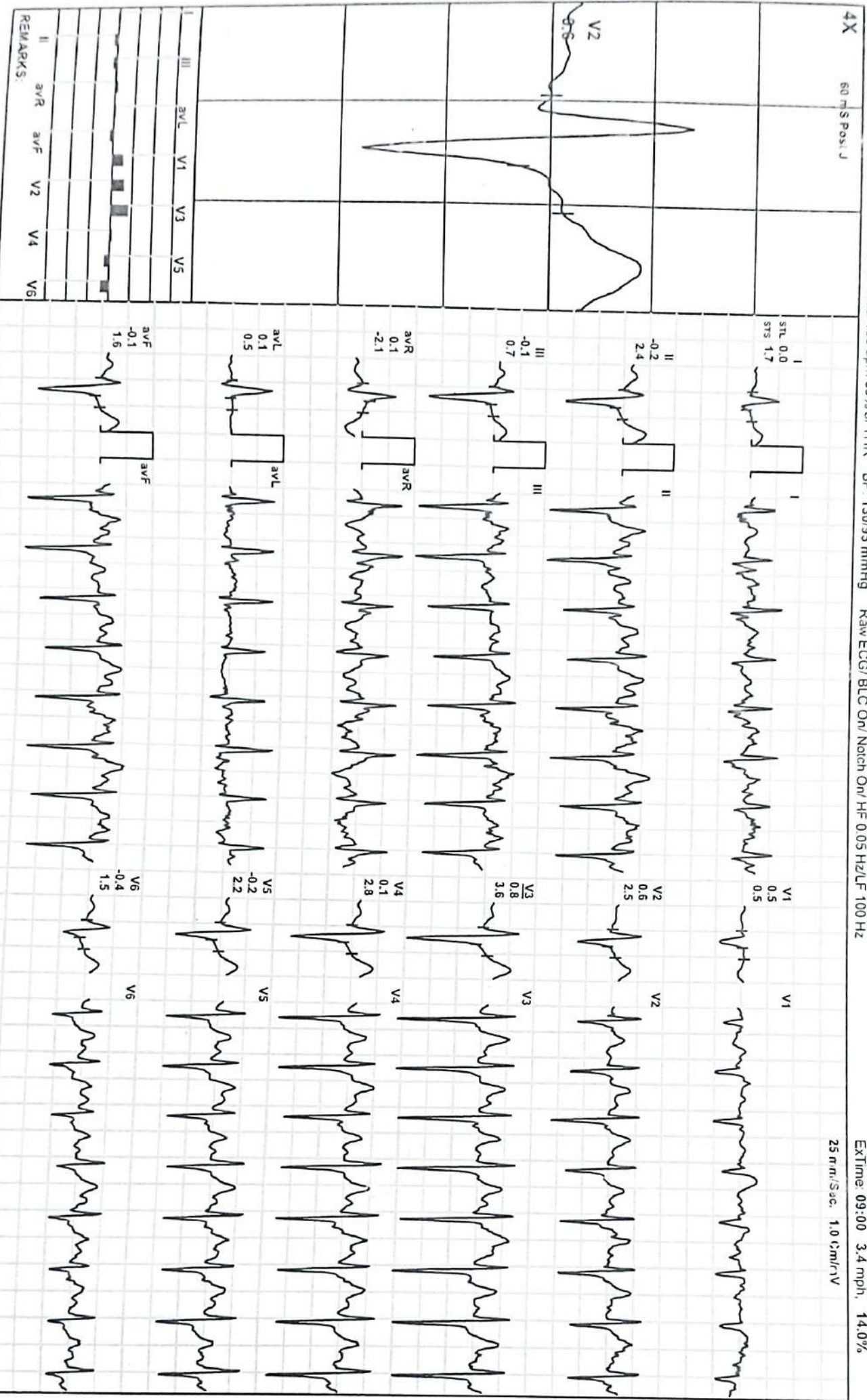
483 / MR. SANTOSH KUMAR PANDA / 48 Yrs / M / 167 Cms / 67 Kg / HR : 153

Date: 25 - 10 - 2024

METS: 10.2/153 bpm 89% of THR BP: 130/95 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/ LF 100 Hz

EXTime: 09:00 3.4 mph, 14.0%

25 mm/Sec. 1.0 cm/mV



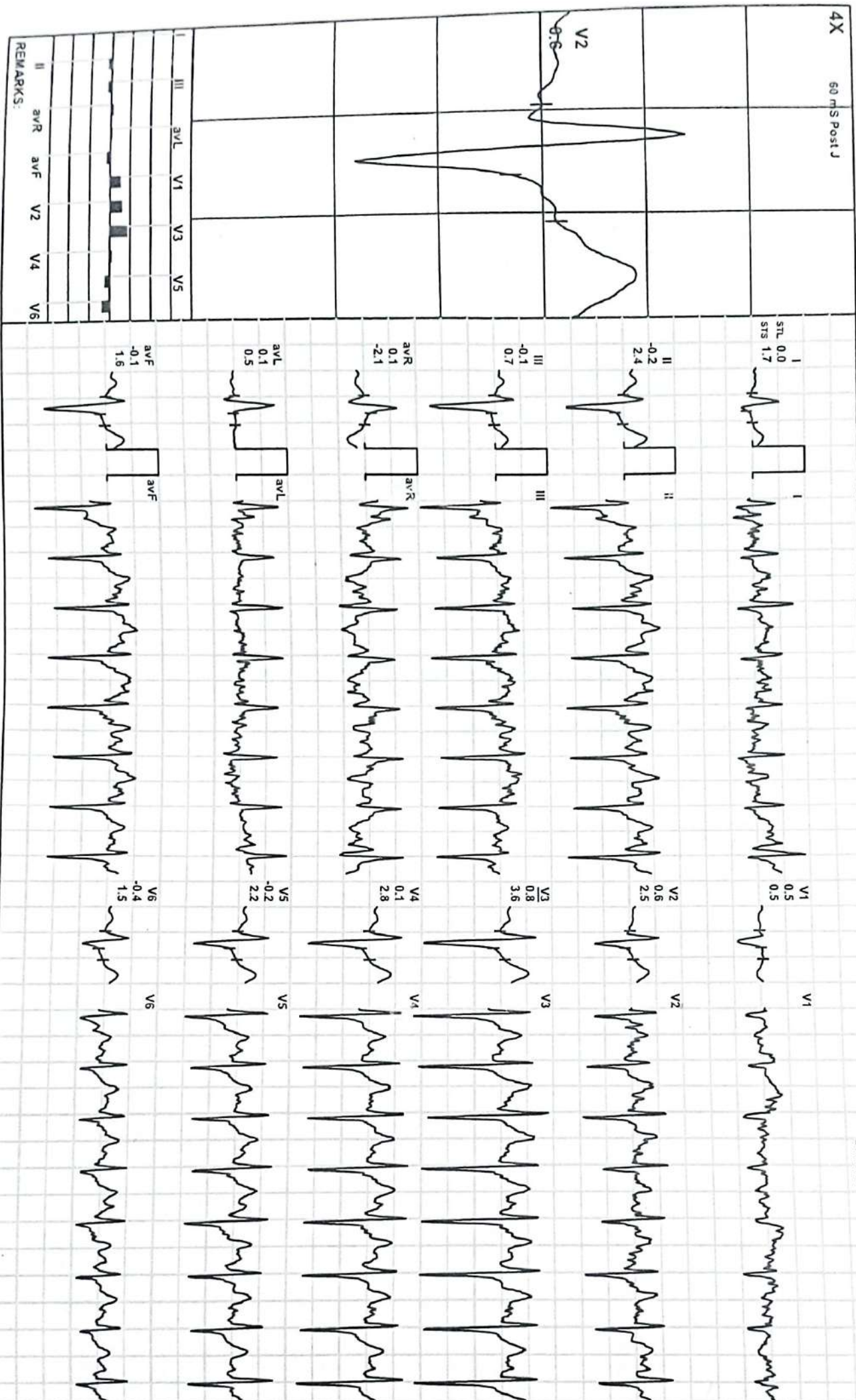
REMARKS:

Date: 26 - 10 - 2024

METS: 10.3 / 149 bpm 87% of THR BP: 130/95 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/LF 100 Hz

ExTime: 09:05 1.1 mph, 0.0%

25 r/m/Sec. 1.0 i/m/r/V



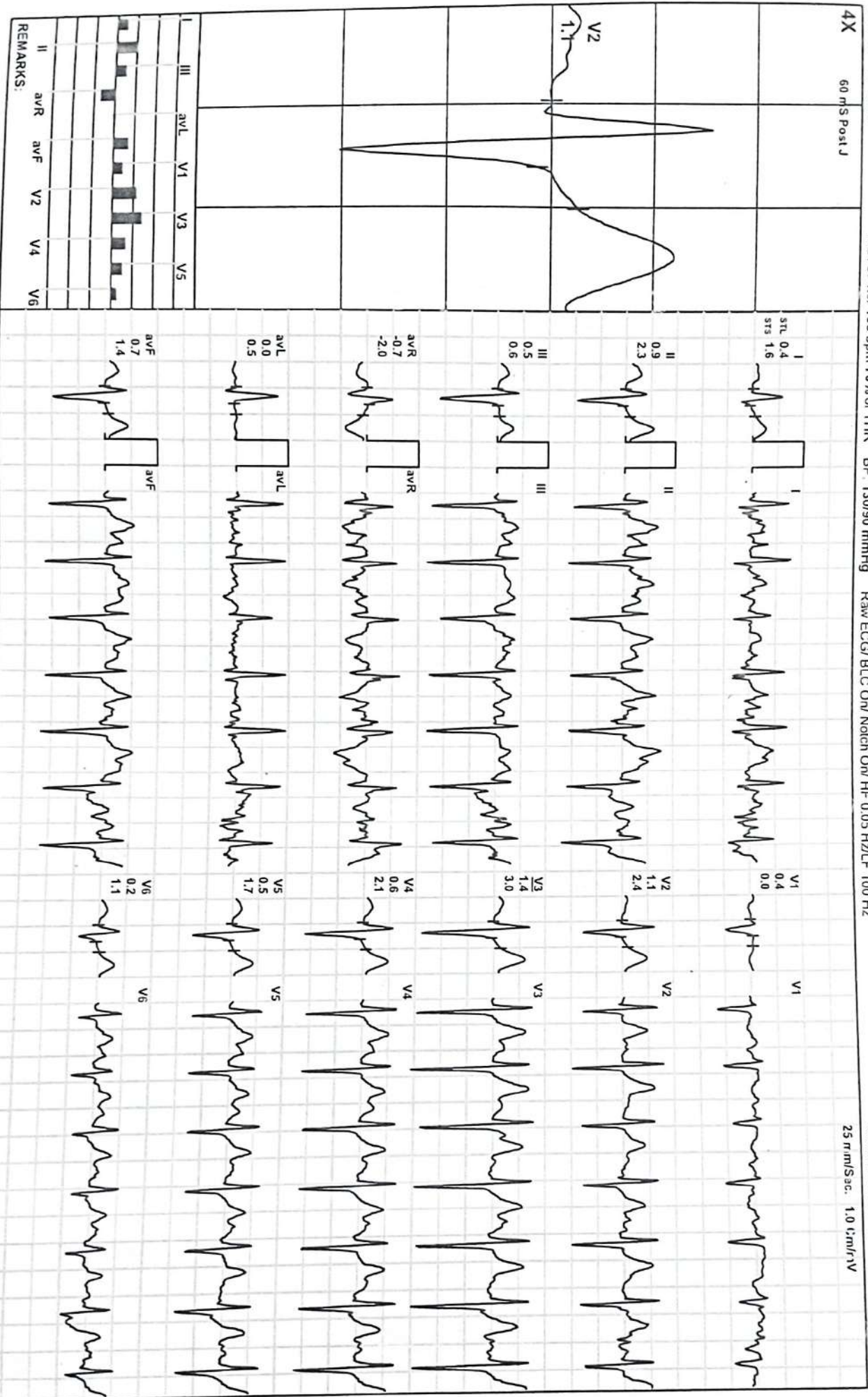
REMARKS:
II aVR aVF V2 V4 V6

Date: 26 - 10 - 2024

METS: 4.3/135 bpm 78% of THR BP: 130/90 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 HZ/LF 100 HZ

EXTime: 09:04 1.1 mph, 0.0%

25 mm/Sec. 1.0 cm/rV



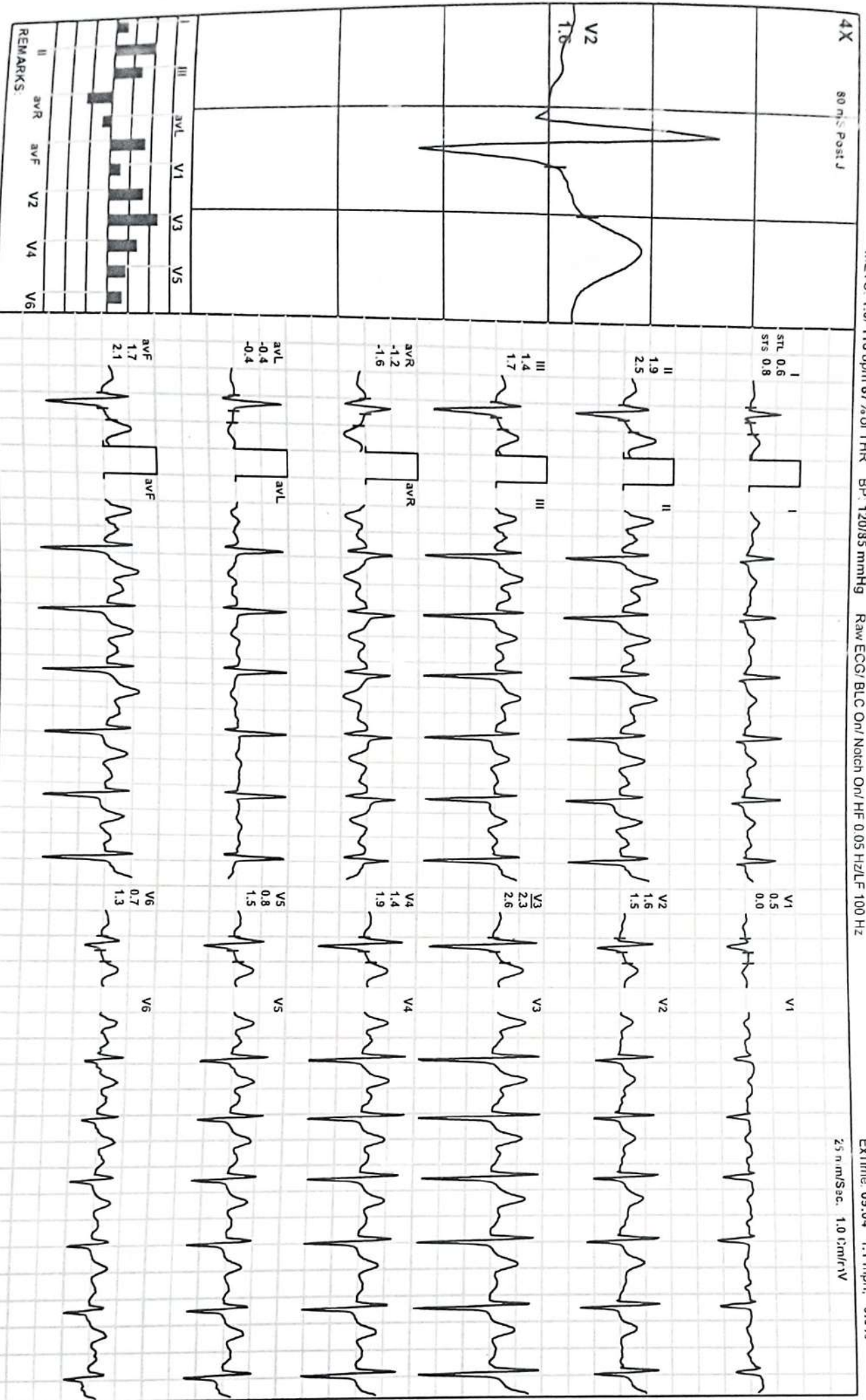


Date: 26 - 10 - 2024

METS: 1.0/ 116 bpm 67% of THR BP: 120/85 mmHg Raw ECG/ BLC On/ Notch On/ HF 0.05 Hz/ LE 100 Hz

ExTime: 09:04 1.1 mph, 0.0%

2.5 mm/Sec. 1.0 cm/rV



REMARKS:
II aVR aVF V2 V4 V6

483 / MR. SANTOSH KUMAR PANDA / 48 Yrs / M / 167 Cms / 67 Kg / HR : 82

Date: 26 - 10 - 2024

Protocol : BRUCE

STL(mm) Supine 80 @ms	I						II						III						STL(mv/sec)					
	avR	avL	avF	V1	V2	V3	avR	avL	avF	V1	V2	V3	avR	avL	avF	V1	V2	V3		V4	V5	V6		
Supine	1.1	0.4	-0.7	-0.7	0.9	-0.2	0.2	1.9	1.3	0.5	0.3	0.1	0.8	0.7	-0.2	-0.7	0.5	0.3	0.0	1.3	1.1	0.6	0.5	0.4
Standing	1.0	0.4	-0.6	-0.7	0.8	-0.1	0.2	2.0	1.3	0.5	0.3	0.2	0.7	0.6	-0.2	-0.7	0.5	0.2	0.0	1.3	1.1	0.5	0.5	0.3
ExStart	1.2	0.7	-0.6	-0.9	0.9	0.0	0.2	2.0	1.2	0.5	0.6	0.2	1.2	1.0	-0.1	-1.1	0.6	0.4	0.2	1.5	1.1	0.6	0.6	0.4
Stage 1	0.8	0.8	0.1	-0.8	0.4	0.5	0.2	1.4	1.4	0.8	0.6	0.3	0.8	1.3	0.4	-1.0	0.2	0.8	0.1	1.4	1.7	1.3	1.1	0.7
Stage 2	0.2	0.5	0.2	-0.3	0.0	0.4	0.0	0.9	1.0	0.5	0.2	-0.1	0.8	1.7	0.8	-1.2	0.0	1.3	-0.1	1.8	2.0	1.6	1.3	0.9
Stage 3	0.0	-0.2	-0.1	0.1	0.1	-0.1	0.5	0.6	0.8	0.1	-0.2	-0.4	1.7	2.4	0.7	-2.1	0.5	1.6	0.5	2.5	3.6	2.8	2.2	1.5
PeakEx	0.0	-0.2	-0.1	0.1	0.1	-0.1	0.5	0.6	0.8	0.1	-0.2	-0.4	1.7	2.4	0.7	-2.1	0.5	1.6	0.5	2.5	3.6	2.8	2.2	1.5
Recovery	0.4	0.9	0.5	-0.7	0.0	0.7	0.4	1.1	1.4	0.6	0.5	0.2	1.6	2.3	0.6	-2.0	0.5	1.4	0.0	2.4	3.0	2.1	1.7	1.1
Recovery	0.6	1.9	1.4	-1.2	-0.4	1.7	0.5	1.6	2.3	1.4	0.8	0.7	0.8	2.5	1.7	-1.6	-0.4	2.1	0.0	1.5	2.6	1.9	1.5	1.3

STL(μ Vs)

	I	II	III	avR	avL	avF	V1	V2	V3	V4	V5	V6
Supine	12.9	7.7	-5.2	-10.2	9.1	1.3	-2.0	20.7	12.3	6.0	4.3	3.6
Standing	11.7	6.3	-5.4	-9.0	8.5	0.5	-0.6	20.2	12.0	5.6	4.4	3.3
ExStart	10.6	6.5	-4.1	-8.5	7.3	1.2	0.3	17.3	10.2	4.7	5.4	2.7
Stage 1	5.2	5.4	0.1	-5.2	2.6	2.8	1.5	9.5	9.2	5.1	3.5	1.7
Stage 2	0.3	0.0	-0.2	0.0	0.3	0.0	0.6	2.9	3.1	0.0	-1.2	-2.6
Stage 3	-1.6	-4.1	-2.6	2.8	0.6	-3.4	2.6	0.9	-0.1	-3.4	-4.6	-4.8
PeakEx	1.7	1.6	-0.5	-1.8	1.2	0.5	1.9	2.3	1.0	-0.3	-2.1	-2.1
Recovery	4.6	6.8	3.5	-5.1	0.0	5.2	1.6	9.6	9.8	5.8	4.6	1.3
Recovery	3.4	13.2	9.7	-8.2	-3.1	11.5	3.7	11.2	15.8	9.4	5.5	4.2

SHRI SAI ADVANCE IMAGING AND DIAGNOSTIC CENTER Median Measurement Summary

RADHAKRISHNA VIHAR SANTOSHI NAGAR

433 / MR. SANTOSH KUMAR PANDA / 48 Yrs / Male / 167 Cm / 67 Kg / Non Smoker



Time	HR	PR Int	QRS Wld	QRS Axis	QTC	P(μV)	R(μV)	S(μV)	T(μV)	Min. J	Leads for	Min. Post JRR	Var	VEB	Missed Beats
(Min.)	(bpm)	(ms)	(m°)	(Deg.)	(ms)	(Max)	(Max)	(Min)	(Max)	(μV)	(J & PJ)	(μV)	(%)	(Counts)	(Counts)
00:30	70	178	76	-43	452	-711	831	-1179	-506	-115	II	-226	0.00	0	0
01:00	94	132	52	-44	481	200	1087	-1505	389	-80	III	-69	0.00	0	0
01:30	81	122	76	-40	453	166	996	-1365	418	-61	III	-54	0.00	0	0
02:00	98	214	74	-39	472	194	1103	-1405	464	-62	III	-62	0.00	0	0
02:30	104	196	74	-40	481	213	1080	-1382	333	-277	III	-37	0.00	0	0
03:00	110	172	54	-42	483	228	1059	-1374	305	-43	III	-38	0.00	0	0
03:30	112	182	52	-44	473	226	1038	-1365	349	-414	III	-18	0.00	0	0
04:00	113	180	54	-45	477	233	1027	-1349	364	-307	III	-2	0.00	0	0
04:30	113	166	54	-49	477	253	963	-1349	353	-295	III	-10	0.00	0	0
05:00	120	170	76	-50	466	243	971	-1337	355	-11	avL	1	0.00	0	0
05:30	125	166	76	-54	337	233	894	-1365	348	-15	avL	1	0.00	0	0
06:00	125	154	76	-55	332	252	912	-1392	363	-26	avL	5	0.00	0	0
06:30	128	158	76	-56	337	270	927	-1428	368	-18	avL	-12	0.00	0	0
07:00	130	154	76	-52	330	267	962	-1438	371	-38	avL	-30	0.00	0	0
07:30	130	154	78	-58	343	262	969	-1449	413	-58	avL	-52	0.00	0	0
08:00	140	152	76	-60	332	238	864	-1445	359	-103	V5	-43	0.00	0	0
08:30	145	138	76	-67	344	248	836	-1503	379	-131	V5	-49	0.00	0	0
09:00	148	108	76	-68	349	238	822	-1505	409	-125	V6	-66	0.00	0	0
09:30	153	128	76	-71	345	233	782	-1548	491	-132	V6	-44	0.00	0	0
10:00	155	122	78	-70	335	231	771	-1568	515	-141	V6	-62	0.00	0	0
10:30	153	112	80	-73	341	269	787	-1564	544	-415	II	-93	0.00	0	0
11:00	144	130	78	-68	350	320	724	-1489	603	-75	V6	-3	0.00	0	0
11:30	135	144	58	-59	435	325	808	-1460	637	-27	avL	-12	0.00	0	0
12:00	116	156	60	-54	441	355	905	-1467	670	-33	avL	-36	0.00	0	0