



Submitted Test results, & Motion Test & Eye test

Sheela T-S

LS





PATIENT NAME : MRS. SHEELA.T.S

REF. DOCTOR : DR. MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED

CODE/NAME & ADDRESS : CA00010147 -
MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED
F701A, LADO SARAI, NEW DELHI,SOUTH DELHI,
DELHI,
SOUTH DELHI 110030
8800465156

ACCESSION NO : 4126XC002881
PATIENT ID : SHEEF2004664126
CLIENT PATIENT ID:
ADHA NO

AGE/SEX : 57 Years Female
DRAWN :
RECEIVED : 09/03/2024 09:13:44
REPORTED : 11/03/2024 16:45:59

Test Report Status	Final	Results	Biological Reference Interval	Units
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MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)TMT

DENTAL CHECK UP

DENTAL CHECK UP

TEST COMPLETED

Signature
DR.SMITHA PAULSON,MD
(PATH),DPB
(Reg No - TCMC:35960)
LAB DIRECTOR & HEAD-
HISTOPATHOLOGY & CYTOLOGY

Signature
DR.NILA THERESA DAVIS,MBBS
MD(PATH)
(Reg No - TCMC:47450)
CONSULTANT PATHOLOGIST

Signature
DR.TEJAS PRASAD
VIDWANS ,MBBS MD(PATH)(Reg
No -MMC 2017/08/3919)
CONSULTANT PATHOLOGIST



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MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)TMT


TREADMILL TEST


TREADMILL TEST TEST COMPLETED

OPHTHAL

OPHTHAL TEST COMPLETED


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MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)TMT

**ECG WITH REPORT
REPORT
TEST COMPLETED**

**MAMMOGRAPHY -BOTH
REPORT
COMPLETED**

**USG ABDOMEN AND PELVIS
REPORT
COMPLETED**

**CHEST X-RAY WITH REPORT
REPORT
COMPLETED**

HAEMATOLOGY

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)TMT

GLYCOSYLATED HEMOGLOBIN(HBA1C), EDTA WHOLE BLOOD

HBA1C	5.3	Normal	: 4.0 -	%
			5.6%.	
		Non-diabetic level	: < 5.7%.	
		Diabetic	: >6.5%	

Glycemic control goal



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MEAN PLASMA GLUCOSE 105.4 mg/dL

More stringent goal : < 6.5 %
General goal : < 7%
Less stringent goal : < 8%.

Glycemic targets in CKD :-
If eGFR > 60 : < 7%
If eGFR < 60 : 7 - 8.5%
< 116.0

BLOOD COUNTS,EDTA WHOLE BLOOD

HEMOGLOBIN	12.7	12.0 - 15.0	g/dL
RED BLOOD CELL COUNT	4.27	3.80 - 4.80	mil/ μ L
WHITE BLOOD CELL COUNT	7.36	4.0 - 10.0	thou/ μ L
PLATELET COUNT	255	150 - 410	thou/ μ L

RBC AND PLATELET INDICES

HEMATOCRIT	38.8	36.0 - 46.0	%
MEAN CORPUSCULAR VOL	90.9	83.0 - 101	fL
MEAN CORPUSCULAR HGB.	29.7	27.0 - 32.0	pg
MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION	32.7	31.50 - 34.50	g/dL
RED CELL DISTRIBUTION WIDTH	12.9	11.60 - 14.0	%
MENTZER INDEX	21.3		
MEAN PLATELET VOLUME	9.6	6.80 - 10.90	fL

WBC DIFFERENTIAL COUNT

SEGMENTED NEUTROPHILS	56	40.0 - 80.0	%
LYMPHOCYTES	39	20.0 - 40.0	%
MONOCYTES	3	2.0 - 10.0	%

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EOSINOPHILS		2	1.0 - 6.0 %
BASOPHILS		0	0.0 - 1.0 %
ABSOLUTE NEUTROPHIL COUNT		4.11	2.0 - 7.0 thou/ μ L
ABSOLUTE LYMPHOCYTE COUNT		2.85	1.0 - 3.0 thou/ μ L
ABSOLUTE MONOCYTE COUNT		0.20	0.20 - 1.0 thou/ μ L
ABSOLUTE EOSINOPHIL COUNT		0.17	0.02 - 0.50 thou/ μ L
ABSOLUTE BASOPHIL COUNT		0.00	0.00 - 0.10 thou/ μ L
NEUTROPHIL LYMPHOCYTE RATIO (NLR)		1.4	

ERYTHROCYTE SEDIMENTATION RATE (ESR), EDTA BLOOD

SEDIMENTATION RATE (ESR) **40 High** 0 - 20 mm at 1 hr
METHOD : WESTERGREN METHOD

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)TMT

SUGAR URINE - POST PRANDIAL

SUGAR URINE - POST PRANDIAL NOT DETECTED NOT DETECTED

SUGAR URINE - FASTING


SUGAR URINE - FASTING NOT DETECTED NOT DETECTED


IMMUNOHAEMATOLOGY

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)TMT

ABO GROUP & RH TYPE, EDTA WHOLE BLOOD

ABO GROUP TYPE O
RH TYPE POSITIVE


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Test Report Status	Results	Units
Final		

Interpretation(s)
ABO GROUP & RH TYPE, EDTA WHOLE BLOOD-Blood group is identified by antigens and antibodies present in the blood. Antigens are protein molecules found on the surface of red blood cells. Antibodies are found in plasma. To determine blood group, red cells are mixed with different antibody solutions to give A,B,O or AB.
 Disclaimer: "Please note, as the results of previous ABO and Rh group (Blood Group) for pregnant women are not available, please check with the patient records for availability of the same."
 The test is performed by both forward as well as reverse grouping methods.

BIO CHEMISTRY

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)TMT

BLOOD UREA NITROGEN (BUN), SERUM			
BLOOD UREA NITROGEN	12	Adult(<60 yrs) : 6 to 20	mg/dL
BUN/CREAT RATIO			
BUN/CREAT RATIO	12.8		
CREATININE, SERUM			
CREATININE	0.92	18 - 60 yrs : 0.6 - 1.1	mg/dL
GLUCOSE, POST-PRANDIAL, PLASMA			
GLUCOSE, POST-PRANDIAL, PLASMA	81	Diabetes Mellitus : > or = 200. Impaired Glucose tolerance/ Prediabetes : 140 - 199. Hypoglycemia : < 55.	mg/dL

LIVER FUNCTION TEST WITH GGT

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BILIRUBIN, TOTAL	0.45	General Range : < 1.1	mg/dL
BILIRUBIN, DIRECT	0.21	General Range : < 0.3	mg/dL
BILIRUBIN, INDIRECT	0.24	General Range : <0.85	mg/dL
TOTAL PROTEIN	7.7	Ambulatory : 6.4 - 8.3	g/dL
		Recumbant : 6 - 7.8	
ALBUMIN	4.3	20-60yrs : 3.5 - 5.2	g/dL
GLOBULIN	3.4	General Range : 2 - 3.5	g/dL
		Premature Neonates : 0.29 - 1.04	
ALBUMIN/GLOBULIN RATIO	1.3	General Range : 1.1 - 2.5	RATIO
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	21	Adults : < 33	U/L
ALANINE AMINOTRANSFERASE (ALT/SGPT)	19	Adults : < 34	U/L
ALKALINE PHOSPHATASE	75	Adult (<60yrs) : 35 - 105	U/L
GAMMA GLUTAMYL TRANSFERASE (GGT)	11	Adult (female) : < 40	U/L
TOTAL PROTEIN, SERUM			
TOTAL PROTEIN	7.7	Ambulatory : 6.4 - 8.3	g/dL
		Recumbant : 6 - 7.8	
URIC ACID, SERUM			
URIC ACID	6.4	Adults : 2.4-5.7	mg/dL
GLUCOSE FASTING, FLUORIDE PLASMA			
FBS (FASTING BLOOD SUGAR)	90	Diabetes Mellitus : > or = 126.	mg/dL
		Impaired fasting Glucose/	
		Prediabetes : 101 - 125.	
		Hypoglycemia : < 55.	

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PERFORMED AT :
DDRC AGILUS PATHLABS LIMITED
DDRC agilus TOWER, G-131, PANAMPILLY NAGAR,
ERNAKULAM, 682036



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BIOCHEMISTRY - LIPID

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)TMT

LIPID PROFILE, SERUM

CHOLESTEROL	277 High	Desirable : < 200 Borderline : 200-239 High : >or= 240	mg/dL
TRIGLYCERIDES	157 High	Normal : < 150 High : 150-199 Hypertriglyceridemia : 200-499 Very High : > 499	mg/dL
HDL CHOLESTEROL	59	General range : 40-60	mg/dL
LDL CHOLESTEROL, DIRECT	211 High	Optimum : < 100 Above Optimum : 100-129 Borderline High : 130-159 High : 160-189 Very High : >or= 190	mg/dL
NON HDL CHOLESTEROL	218 High	Desirable : < 130 Above Desirable : 130 -159 Borderline High : 160 - 189 High : 190 - 219 Very high : > / = 220	mg/dL
VERY LOW DENSITY LIPOPROTEIN CHOL/HDL RATIO	31.4 4.7	</= 30.0 Low Risk : 3.3 - 4.4 Average Risk : 4.5 - 7.0 Moderate Risk : 7.1 - 11.0 High Risk : > 11.0	mg/dL
LDL/HDL RATIO	3.6	Desirable/Low Risk - 0.5-3 Borderline/Moderate Risk- 3.1-6 High Risk- >6.0	

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SPECIALISED CHEMISTRY - HORMONE

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)TMT

THYROID PANEL, SERUM

Parameter	Result	Reference Range	Units
T3	116.00	Adult : 80-200	ng/dL
T4	9.08	Adults : 4.5-12.1	µg/dl
TSH 3RD GENERATION	2.020	55-80 yrs : 0.35 - 4.5	µIU/mL

CLINICAL PATH - URINALYSIS

MEDIWHEEL HEALTH CHECKUP ABOVE 40(F)TMT

PHYSICAL EXAMINATION, URINE

COLOR	AMBER
APPEARANCE	CLEAR

CHEMICAL EXAMINATION, URINE

PH	5.0	4.8 - 7.4
SPECIFIC GRAVITY	1.025	1.015 - 1.030
PROTEIN	NOT DETECTED	NOT DETECTED
GLUCOSE	NOT DETECTED	NOT DETECTED
KETONES	NOT DETECTED	NOT DETECTED
BLOOD	NOT DETECTED	NOT DETECTED
BILIRUBIN	NOT DETECTED	NOT DETECTED
UROBILINOGEN	NORMAL	NORMAL
NITRITE	NOT DETECTED	NOT DETECTED
LEUKOCYTE ESTERASE	NOT DETECTED	NOT DETECTED

[Signature]
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MICROSCOPIC EXAMINATION, URINE

RED BLOOD CELLS
WBC
EPITHELIAL CELLS
CASTS
CRYSTALS
BACTERIA
YEAST

0 - 1

3-5

1-2

NOT DETECTED

NOT DETECTED

NOT DETECTED

NOT DETECTED

NOT DETECTED

0-5

0-5


NOT DETECTED

NOT DETECTED

/HPF

/HPF

/HPF


DR. NISHA G, MBBS MD(PATH),
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CONSULTANT PATHOLOGIST



View Details



View Report

This is to certify that I have examined

MR / MS Sheela P.Saged 57 and

his / her oral findings are as follows

D - Decay

M - Missing

F - Filling

		F										M			
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
		M											F	M	

Oral hygiene status : Good / Fair / Poor

Calculus / Stains :

Any other findings : +6 fractured filling

Date :

9/3/24

Replacement of missing teeth
6/5
6/7

Refilling

+6



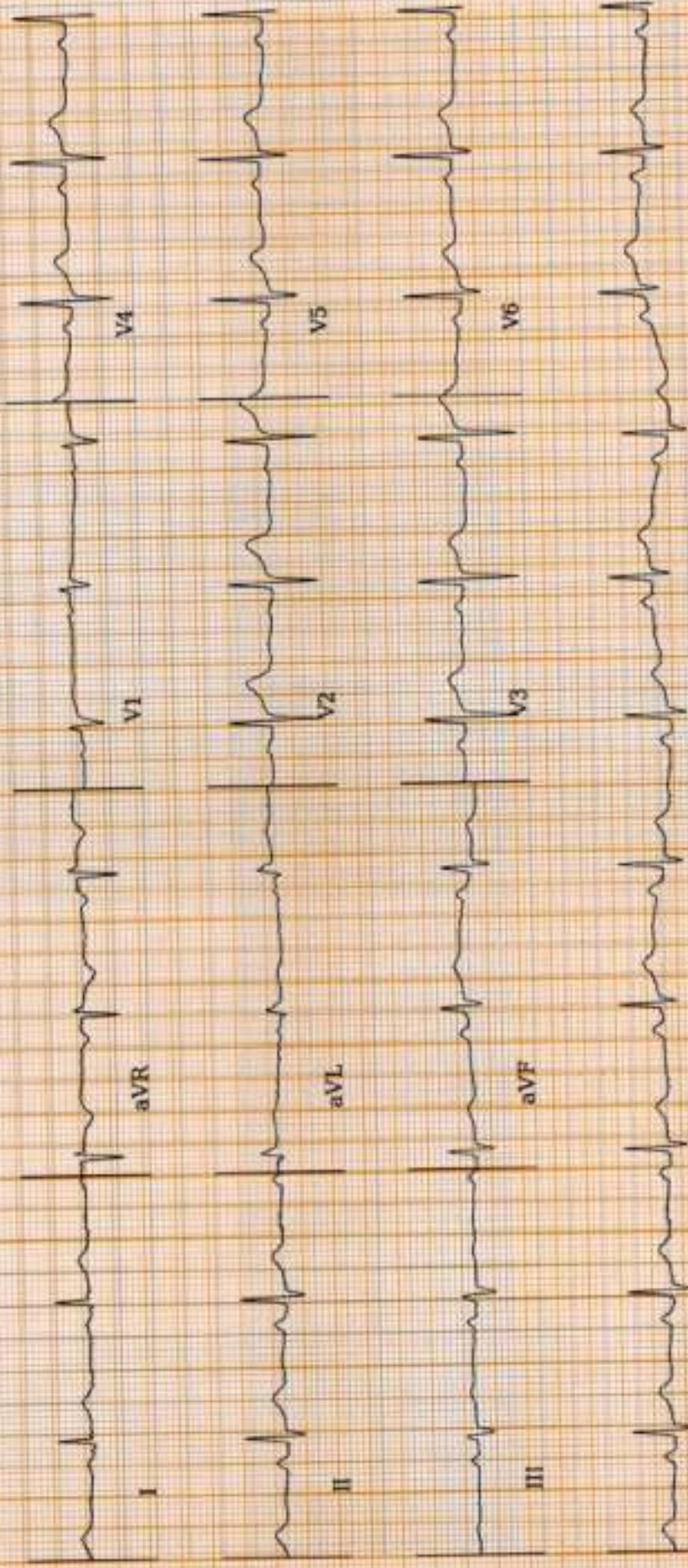
Dr. K C Jose

Dr. Scrin Perera



DDRC Agilus Panampilly Nagar

Age / Gender: 57/Female
 Date and Time: 9th Mar 24 1:31 PM
 Patient ID: 2881
 Patient Name: Sheela T S



AF: 68bpm
 VRI: 68bpm
 QRSD: 88ms
 QT: 376ms
 QRSB: 400.28ms
 PRS: 178ms
 P-R-T: 63°-18°-34°



Within Normal Limits: Sinus Rhythm. Please correlate clinically.

Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and may be interpreted by a qualified physician.

NAME	MRS SHEELA T S	AGE	57 YRS
SEX	FEMALE	DATE	March 9, 2024
REFERRAL	MEDIWHEEL	ACC NO	4126XC002881

MAMMOGRAPHY

Technique: Bilateral MLO and CC views

Clinical details: Screening mammography.

Findings:

- Both breasts show ACR type - B composition.
- Few smooth high density lesions noted in left breast, largest in outer upper quadrant.
- Smooth high density lesion noted in right areolar region.
- Small smooth high density focus seen in posterior depth of right breast upper quadrant.
- Calcification of benign morphology in right breast.
- The skin, nipple-areola complex and retro-areolar zone are normal.
- The retro-mammary clear zone and underlying pectoralis muscle appear normal

ULTRASOUND SCREENING:

RIGHT BREAST

- Normal stromal echogenicity.
- Ovoid hypoechoic lesion of size ~ 12 x 9 mm noted in areolar region with no vascularity /calcifications.
- No evidence of axillary lymphadenopathy

LEFT BREAST

- Normal stromal echogenicity.
- Large mild lobulated avascular lesion of size ~ 4.1 x 2.0 cm noted at 3 O' clock position .
- Ovoid hypoechoic avascular lesion of size ~ 11 x 6 mm outer aspect of 2 O' clock position.
- Ovoid hypoechoic avascular lesion of size ~ 11 x 7 mm of 1 O' clock perioarolar region.
- Ovoid hypoechoic avascular lesion of size ~ 18 x 9 mm of 10 O' clock position.
- Ovoid hypoechoic avascular lesion of size ~ 14 x 9 mm of 9 O' clock position.
- Ovoid hypoechoic avascular lesion of size ~ 11 x 5 mm at outer aspect of 10-11 O' clock position.
- No evidence of axillary lymphadenopathy

IMPRESSION:

- ⚡ **Multiple bilateral ovoid hypoechoic avascular lesions - BIRADS III [likely fibroadenomas]**
- ⚡ **Mild lobulated hypoechoic lesion in left breast - BIRDAS IVa.**
- ⚡ **Suggested FNAC correlation from BIRDAS IV lesion.**

Dr. HRISHIKESH C MBBS DMRD
 Consultant Radiologist

ACR BIRADS Category

0	More information is needed to give a final mammogram report
I	Your mammogram is normal.
II	Your mammogram shows only minor abnormalities that are not suspicious for cancer. No additional testing is needed.
III	Your mammogram shows minor abnormalities that are probably benign. The radiologist may recommend follow-up testing to make sure the suspicious area has not changed.
IV	Your mammogram shows a suspicious change, and a biopsy should probably be performed.
V	Your mammogram shows a worrisome change. A biopsy is strongly recommended.
VI	Known biopsy - proven malignancy; Surgical excision when clinically appropriate.

NAME	MRS SHEELA T S	AGE	57 YRS
SEX	FEMALE	DATE	March 9, 2024
REFERRAL	MEDIWHEEL	ACC NO	4126XC002881

USG ABDOMEN AND PELVIS

Excessive bowel shadows and poor penetration limiting optimal assessment.

LIVER

Measures ~ 11.3 cm, shows increased echoes.
Smooth margins and no obvious focal lesion within.
No IHBR dilatation. Portal vein normal in caliber.

GB

No calculus within gall bladder. Normal GB wall caliber.

SPLEEN

Measures ~ 6.4 cm, normal to visualized extent. Splenic vein normal.

PANCREAS

Normal to visualized extent. PD is not dilated.

KIDNEYS

RK: 8.6 x 4.3 cm, appears normal in size and echotexture.
LK: 9.3 x 4.2 cm, appears normal in size and echotexture.
No focal lesion / calculus within.
Maintained corticomedullary differentiation and normal parenchymal thickness.
No hydroureteronephrosis.

BLADDER

Partially distended, no internal echoes/calculus within.

UTERUS

Normal in size.
Poor endomyometrial echoes.
ET - 5 mm.

OVARIES

Obscured.

FLUID

Nil to visualized extent.


BOWEL

Visualized bowel loops appear normal.

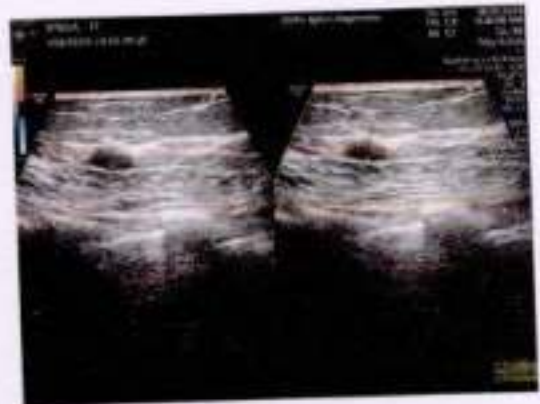
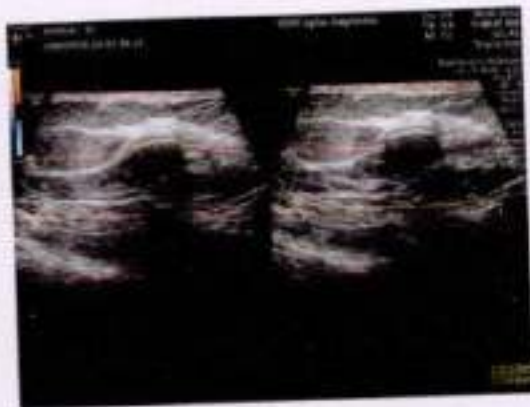
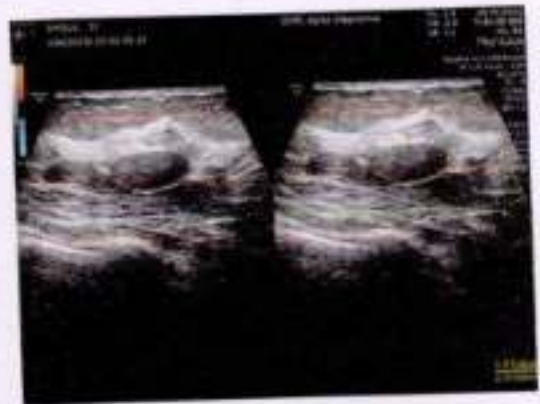
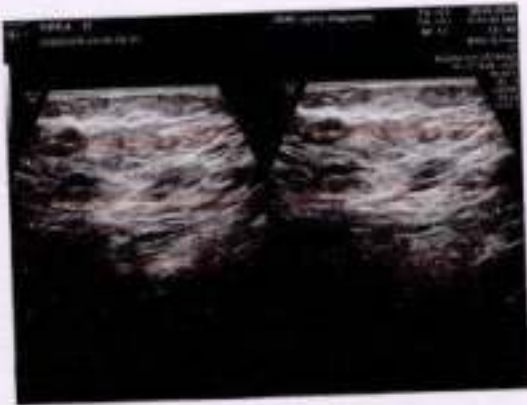
IMPRESSION

⚡ **Grade I/II Fatty liver.**

Kindly correlate clinically.


Dr. HRISHIKESH C MBBS DMRD
Consultant Radiologist

Thank you for referral. Your feedback will be appreciated.





NAME: MRS SHEELA T S	STUDY DATE: 09.03.2024
AGE / SEX: 57 YRS / F	REPORTING DATE : 09.03.2024
REFERRED BY: MEDIWHEEL	ACC NO:4126XC002881

X - RAY - CHEST PA VIEW

- Both the lung fields are clear.
- B/L hila and mediastinal shadows are normal.
- Cardiac silhouette appears normal.
- Cardio - thoracic ratio is normal.
- Bilateral CP angles and domes of diaphragm appear normal.

IMPRESSION - NORMAL STUDY.

Kindly correlate clinically


Dr. HRISHIKESH C MBBS DMRD
Consultant Radiologist



SHEELA T S (57 F)

Protocol: Bruce

DDRC agilus DIAGNOSTICS P NAGAR

Test Report

ID: XC002861 Date: 09-Mar-24 Exec Time : 0 m 0 s Stage Time : 0 m 24 s HR: 68 bpm
Stage: Supine Speed: 0 mph Grade: 0 % (THR: 138 bpm) B.P.: 130 / 80

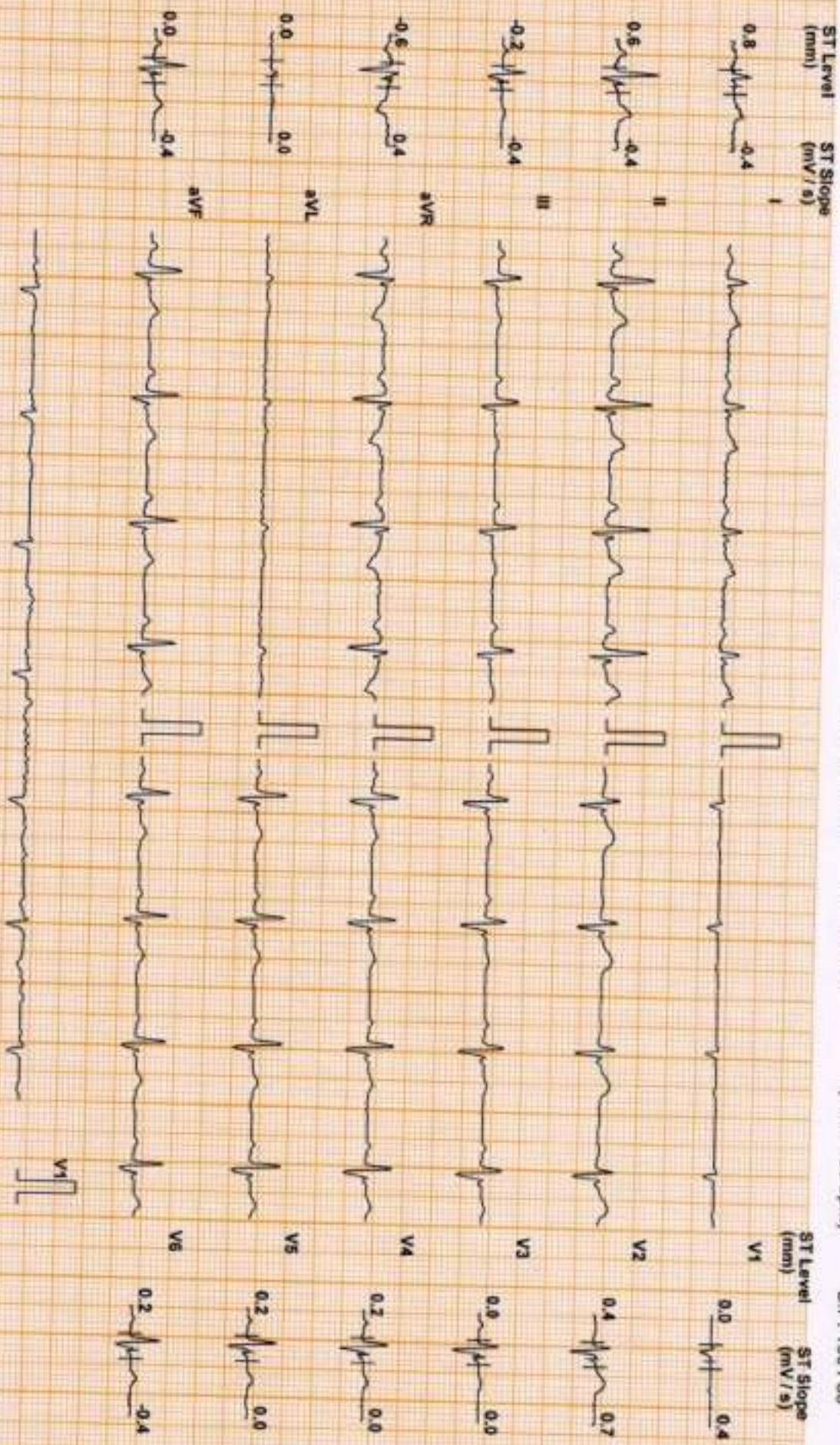


Chart Speed 25 mm/sec
Schw. Standard V & F

Filter: 35 Hz

Main Filter ON

Amp: 10 mm

Imp * R - 50 mm

J = R + 50 mm

Post J = J + 50 mm

Linked Median

SHEELA T S (57 F)

Protocol: Bruce

DDRC agilus DIAGNOSTICS P NAGAR

ID: XC002881

Date: 09-Mar-24

Exec Time : 0 m 0 s

Stage Time : 0 m 34 s HR: 73 bpm

Test Report

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 138 bpm)

B.P: 130 / 80

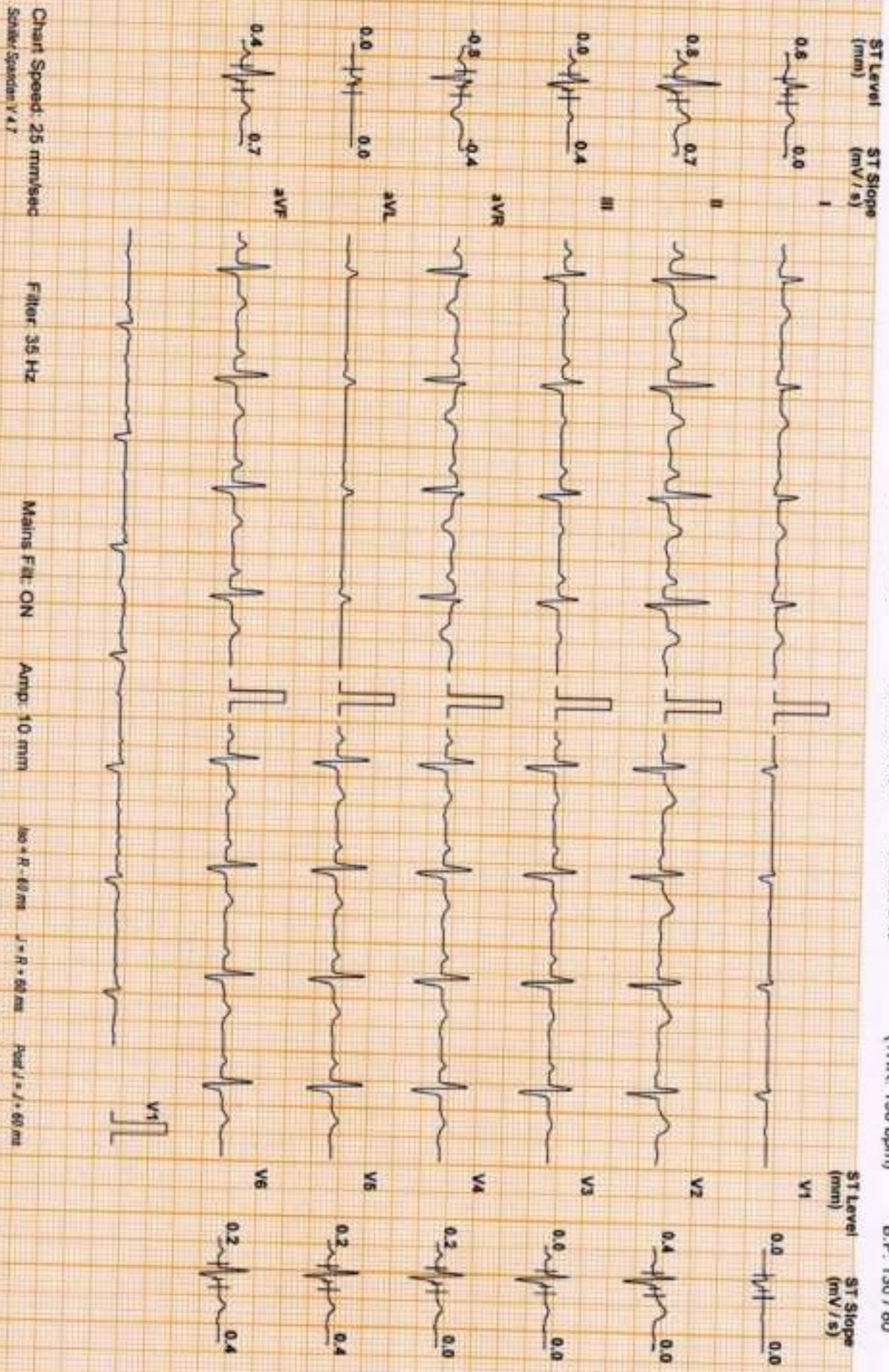


Chart Speed: 25 mm/sec
Scale: Standard V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Lead I = R + 60 mm
Lead II = R + 60 mm

Linked Median

SHELLA T S (57 F)

Protocol: Bruce

DDRC agilus DIAGNOSTICS P NAGAR

ID: XC002861

Test Report

Stage: 1

Date: 09-Mar-24 Exec Time : 2 m 54 s Stage Time : 2 m 54 s HR: 111 bpm

Speed: 1.7 mph Grade: 10 %

(THR: 138 bpm)

R.P: 130/80

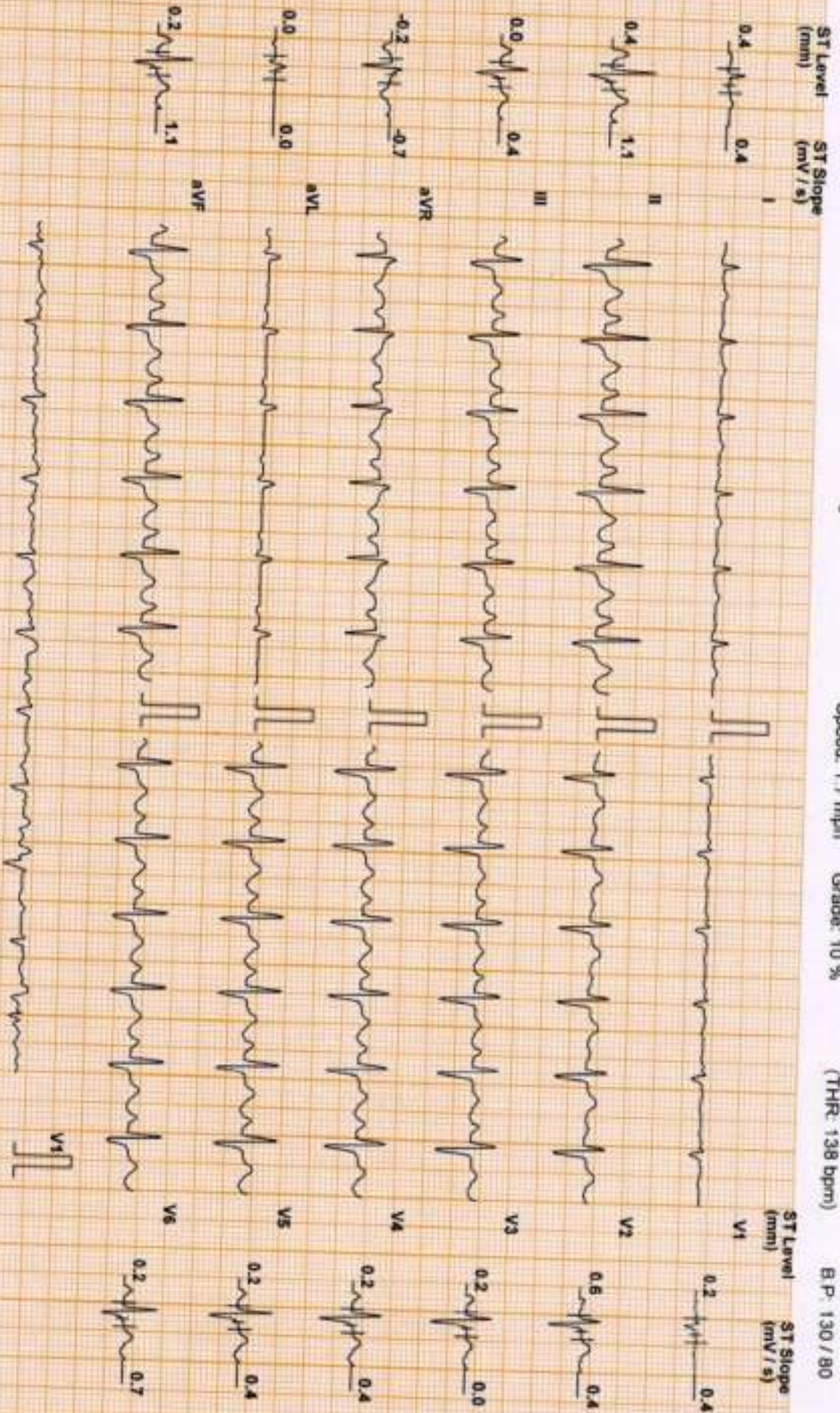


Chart Speed: 25 mm/sec
Scale: Standard V4.7

Filter: 35 Hz

Main: ECG ON

Ampl: 10 mm

60 = R - 60 ms

J = R * 60 ms

Post J = J * 60 ms

Linked Median

SHEELA T S (57 F)

Protocol: Bruce

DDRC agilus DIAGNOSTICS P NAGAR

ID: XC002881

Date: 09-Mar-24

Exec Time : 5 m 54 s Stage Time : 2 m 54 s HR: 138 bpm

Test Report

Stage: 2

Speed: 2.5 mph

Grade: 12 %

(THR: 138 bpm)

B.P: 140 / 90

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

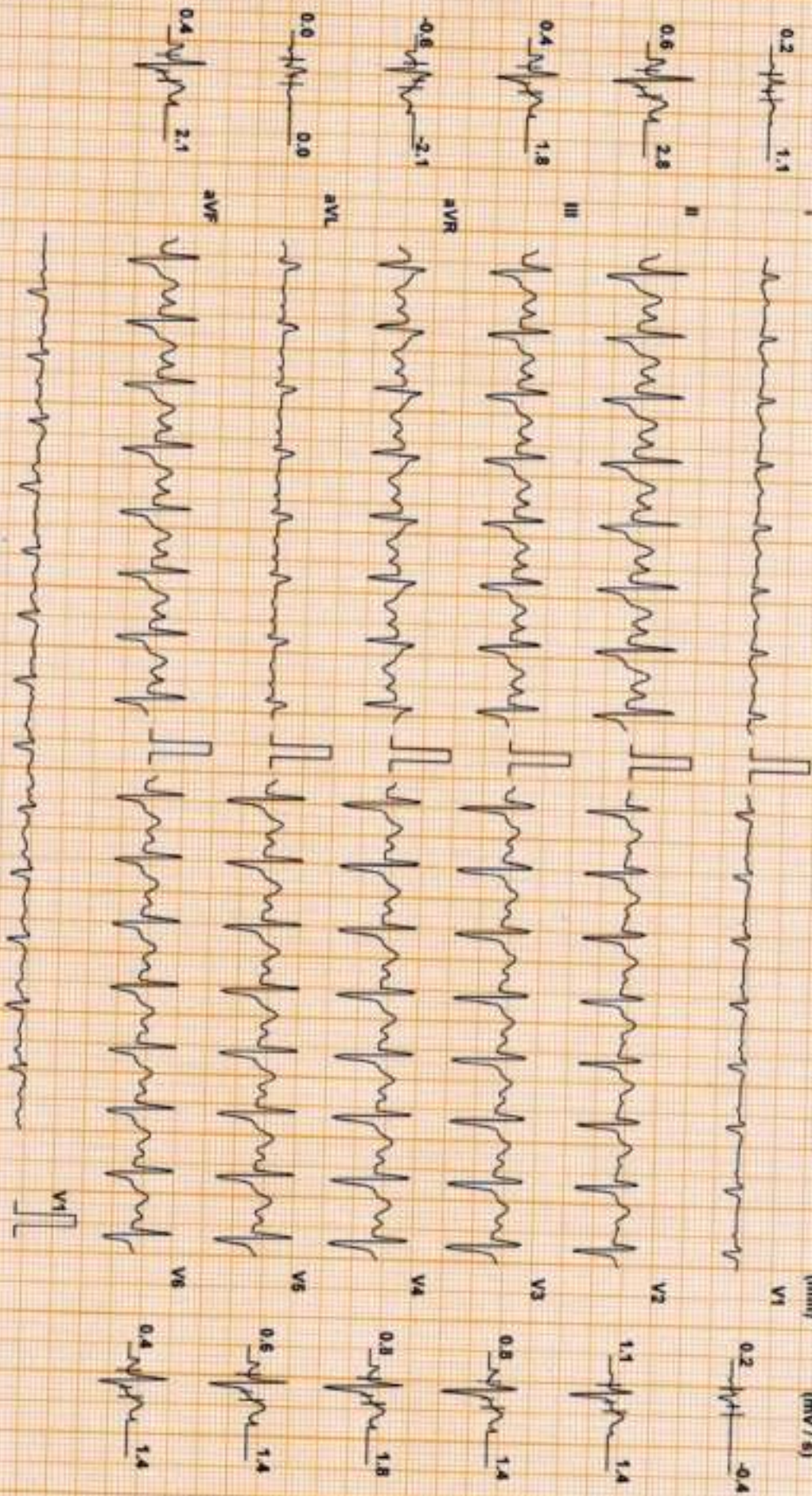


Chart Speed: 25 mm/sec
Sensit: Standard V 4.7

Filter: 35 Hz

Mains Filter ON

Amp: 10 mm

300 ± R - 60 ms

J - R - 60 ms

Post J - J - 60 ms

Linked Median

SHEELA T S (57 F)

Protocol: Bruce

DDRC agilus DIAGNOSTICS P NAGAR

Test Report

ID: XC0002881

Date: 09-Mar-24

Exec Time : 6 m 24 s Stage Time : 0 m 24 s HR: 145 bpm

Stage: Peak Ex

Speed: 3.4 mph

Grade: 14 %

(THR: 138 bpm)

B.P: 150 / 80

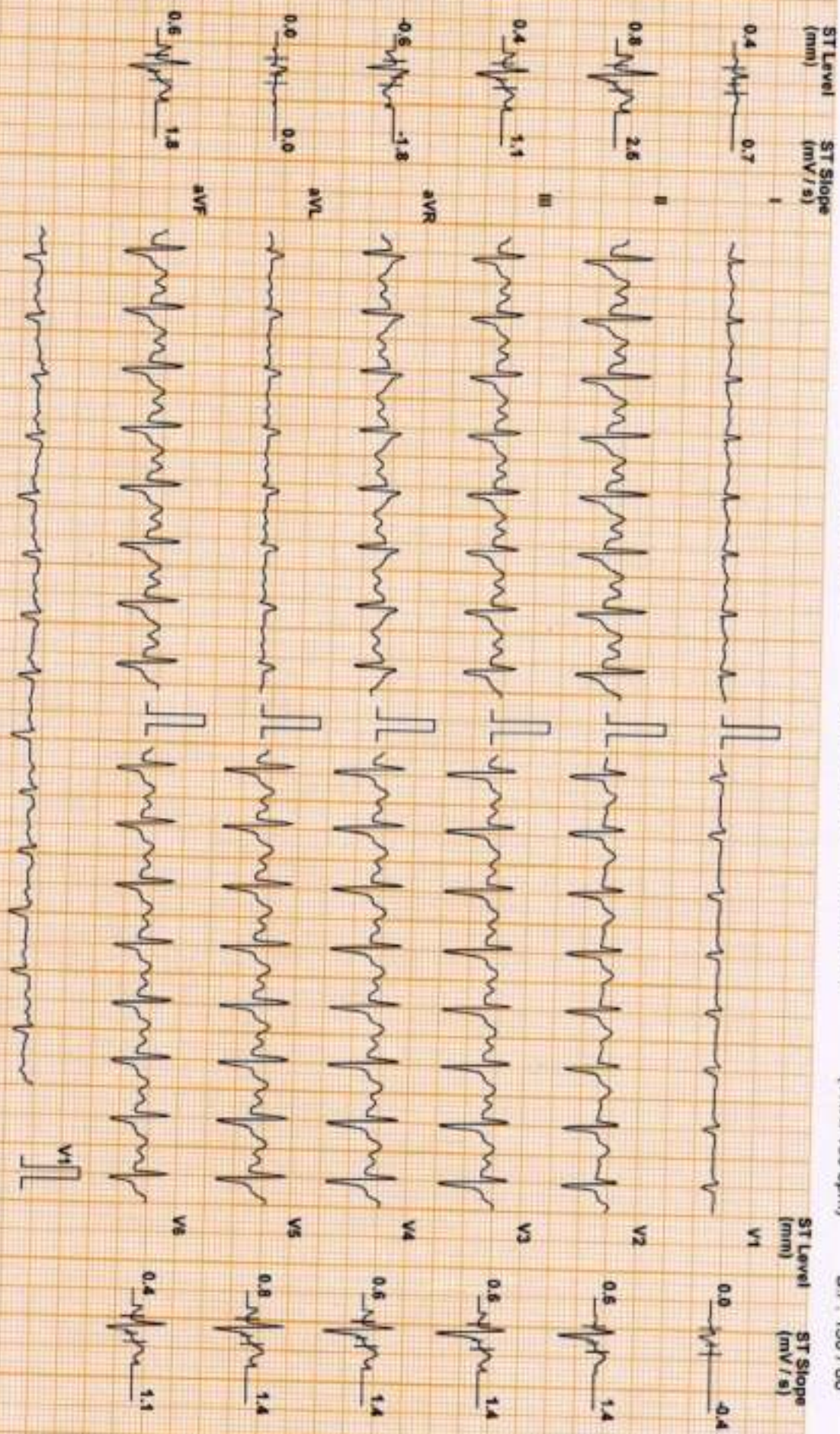


Chart Speed: 25 mm/sec
Scale Standard V x 7

Filter: 35 Hz

Main: Filtr ON

Arrip: 10 mm

iso = R - 60 ms

J = R + 80 ms

Post J = J + 80 ms

Linked Median

SHEELA T S (57 F)

Protocol: Bruce

DDRC agilus DIAGNOSTICS P NAGAR

Test Report

ID: XC002881

Date: 09-Mar-24

Exec Time : 6 m 30 s Stage Time : 0 m 54 s HR: 103 bpm

Stage: Recovery(1)

Speed: 1 mph

Grade: 0 %

(THR: 138 bpm)

B.P: 180 / 80

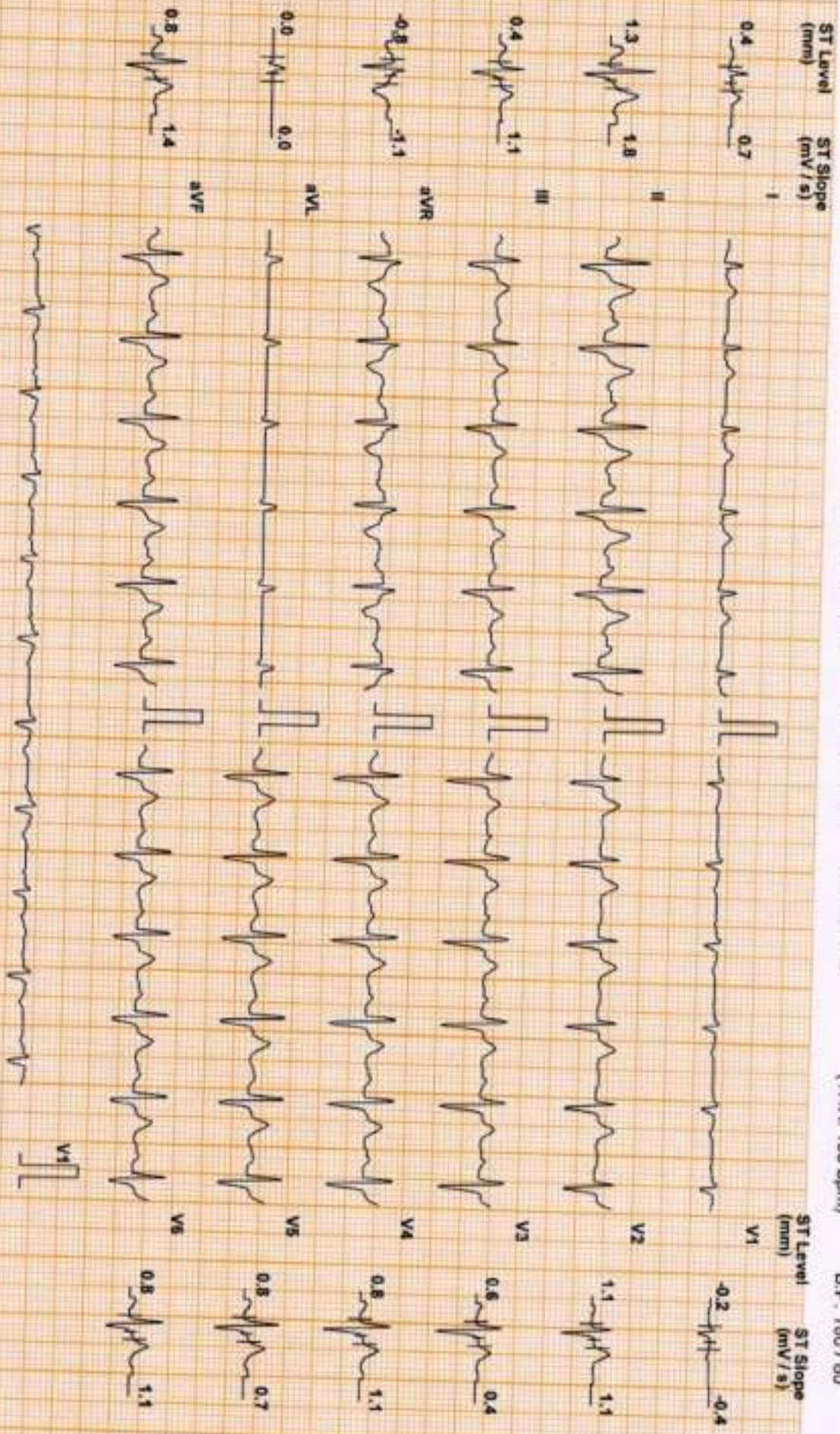


Chart Speed: 25 mm/sec
Scale: Standard V4 F

Filter: 35 Hz

Main Filter ON

Amp: 10 mm

200 = R - 50 ms

J = R + 50 ms

Post J = J + 65 ms

Linked Median

SHEELA T S (57 F)

Protocol: Bruce

DDRC agilus DIAGNOSTICS P NAGAR

ID: XC002881

Date: 09-Mar-24

Exec Time : 6 m 30 s Stage Time : 0 m 54 s HR: 86 bpm

Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 138 bpm)

B.P: 170 / 80

Test Report

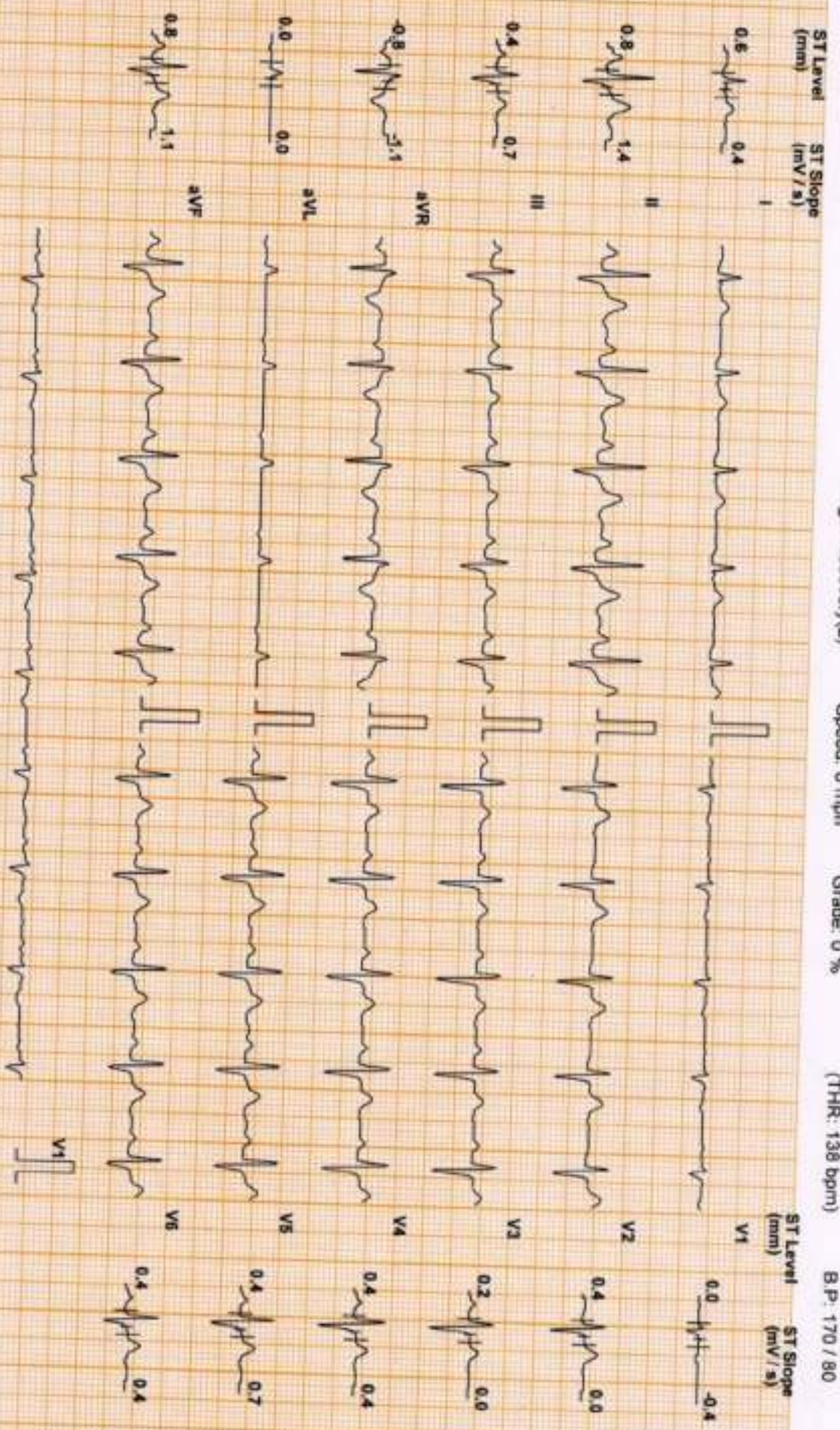


Chart Speed: 25 mm/sec
Scale: Standard V4.7

Filter: 35 Hz

Main Filter: ON

Amp: 10 mm

Sec R: 50 mm

J R: 50 mm

Post J: J + 60 mm

Linked Median

SHEELA T S (57 F)

Protocol: Bruce

DDRC agilus DIAGNOSTICS P NAGAR

ID: XC002881

Date: 09-Mar-24

Exec Time : 6 m 30 s Stage Time : 0 m 54 s HR: 82 bpm

Test Report

Stage: Recovery(3)

Speed: 0 mph

Grade: 0 %

(THR: 138 bpm)

B.P.: 160 / 90

ST Level (mm) ST Slope (mV/s)

ST Level (mm) ST Slope (mV/s)

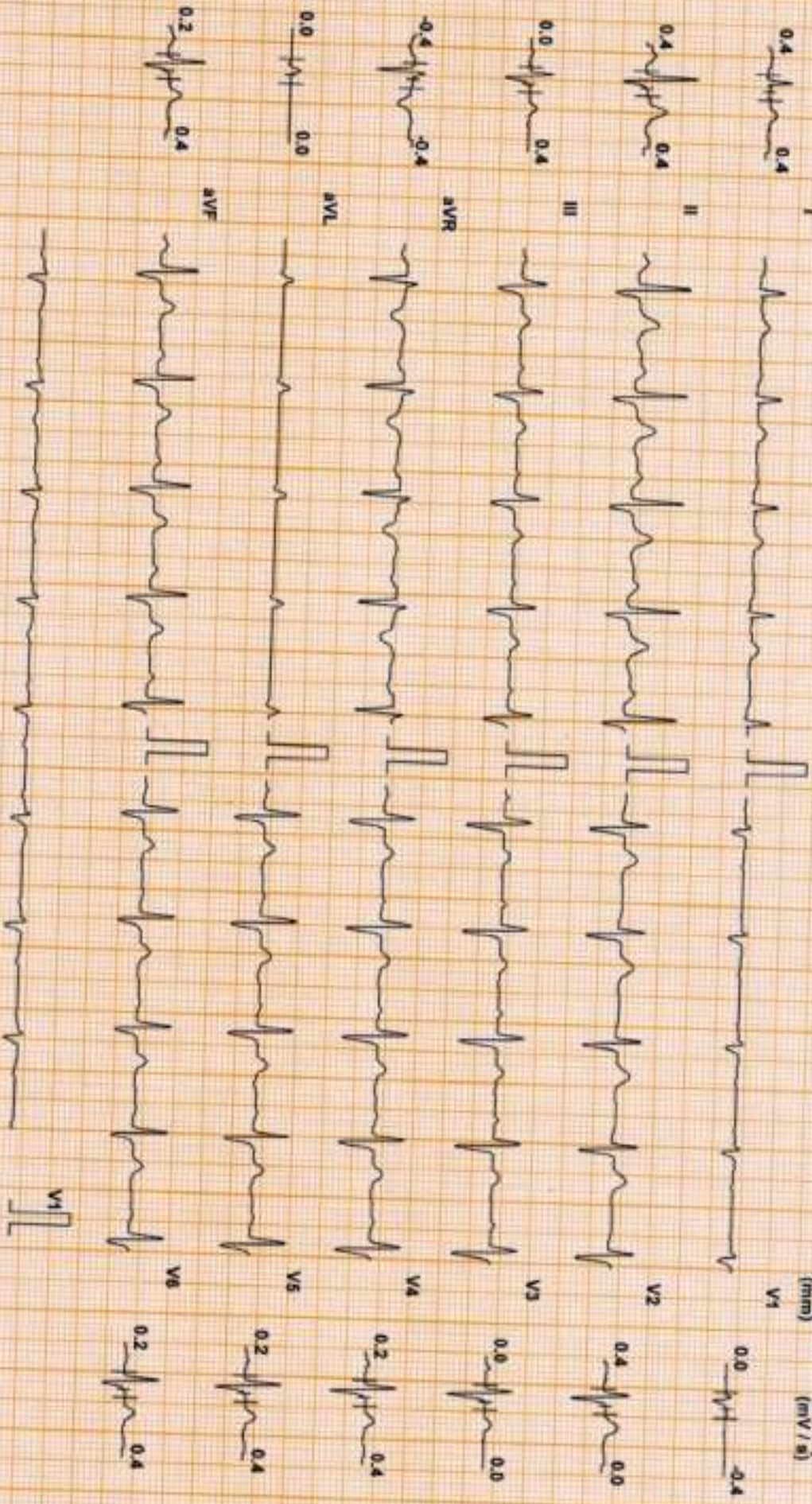


Chart Speed: 25 mm/sec
Scale: Standard V4.7

Filter: 35 Hz

Main Filter: ON

Amp: 10 mm

50 = R - 60 ms

J = R + 80 ms

Post J = J + 80 ms

Linked Median

SHEELA T S (57 F)

Protocol: Bruce

DDRC agilus DIAGNOSTICS P NAGAR

ID: XC002981

Date: 09-Mar-24

Exec Time : 6 m 30 s Stage Time : 0 m 54 s HR: 82 bpm

Test Report

Stage: Recovery(4)

Speed: 0 mph

Grade: 0 %

(THR: 138 bpm)

B.P: 160 / 80

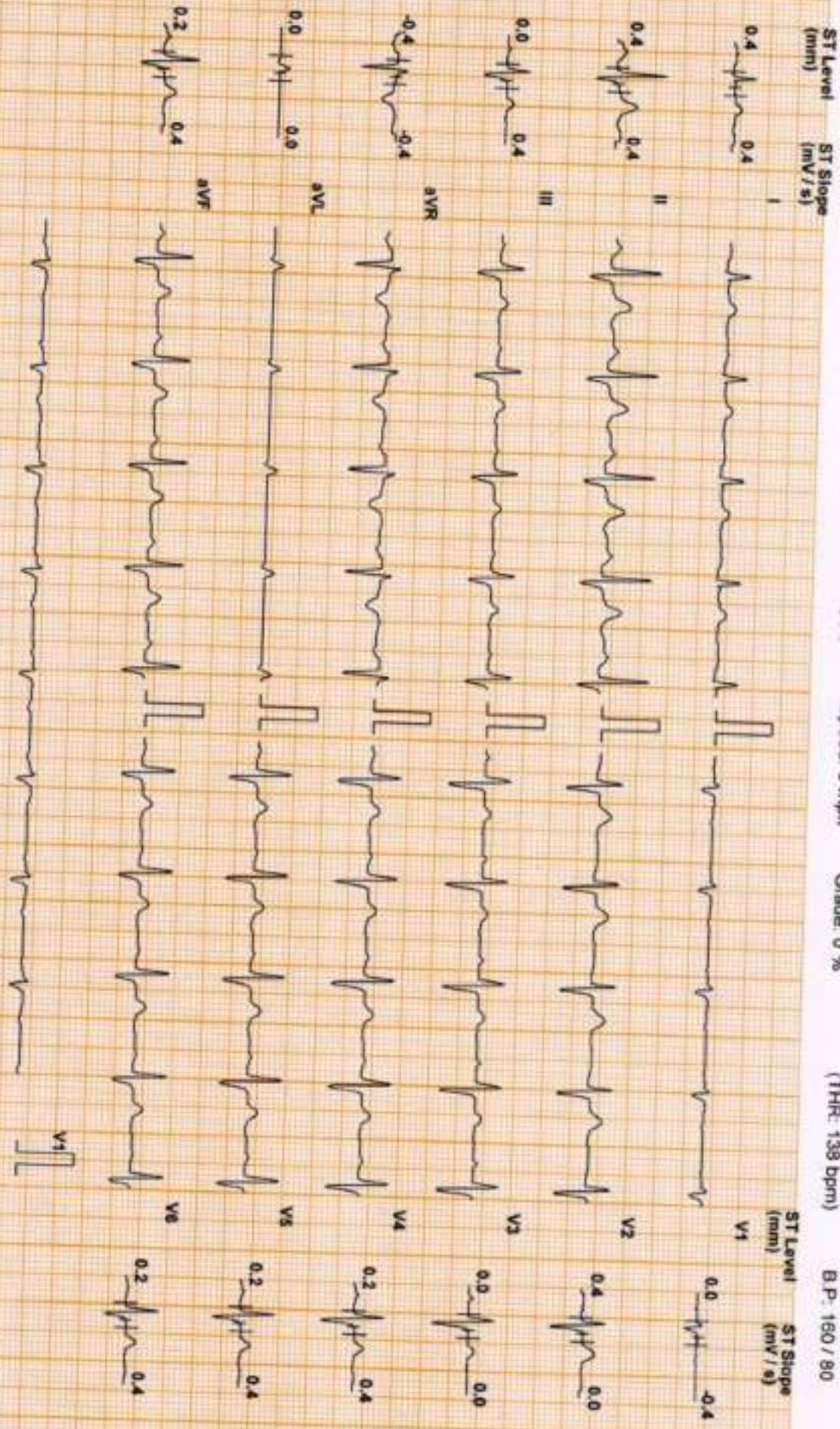


Chart Speed: 25 mm/sec
Schlur: Spawder V 4.7

Filter: 35 Hz

Main: Fil: CN

Amp: 10 mm

Int: R - 50 ms

J: R + 60 ms

Post: L = J + 60 ms

Linked Median

DDRC agilus DIAGNOSTICS P NAGAR

Patient Details

Name: SHEELA T S ID: XC002881

Date: 09-Mar-24

Time: 14:06:57

Age: 57 y

Sex: F

Height: -- cms

Weight: -- Kgs

Clinical History: NIL

Medications:
Test Details

Protocol: Bruce

Pr.MHR: 163 bpm

THR: 138 (85 % of Pr.MHR) bpm

Total Exec. Time: 6 m 30 s

Max. HR: 143 (88% of Pr.MHR)bpm

Max. Mets: 10.20

Max. BP: 180 / 80 mmHg

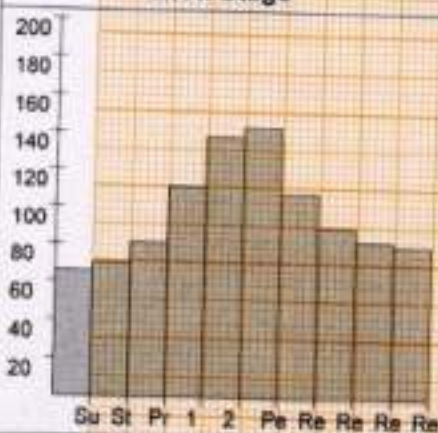
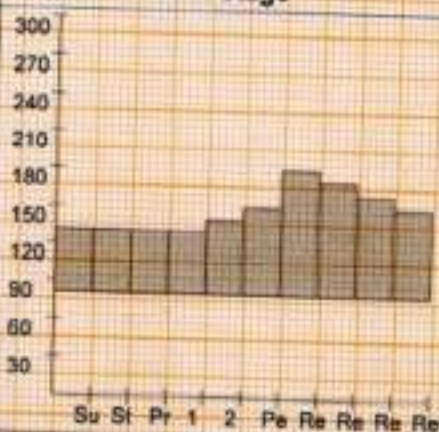
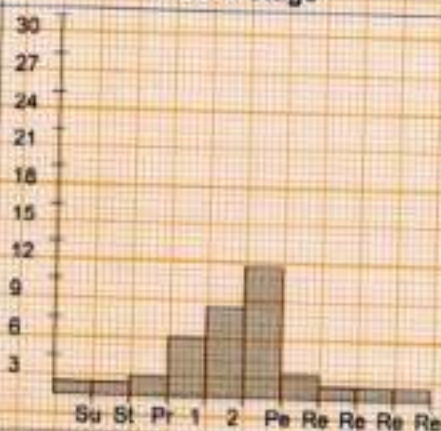
Max. BP x HR: 25740 mmHg/min

Min. BP x HR: 5280 mmHg/min

Test Termination Criteria: Target HR attained

Protocol Details

Stage Name	Stage Time (min : sec)	Mets	Speed (mph)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
Supine	0 : 30	1.0	0	0	66	130 / 80	-0.64 aVR	0.71 II
Standing	0 : 40	1.0	0	0	70	130 / 80	-1.70 V4	1.06 II
1	3 : 0	4.6	1.7	10	111	130 / 80	-0.85 aVR	1.77 V2
2	3 : 0	7.0	2.5	12	138	140 / 80	-4.88 V1	4.95 II
Peak Ex	0 : 30	10.2	3.4	14	143	150 / 80	-0.64 aVR	2.83 II
Recovery(1)	1 : 0	1.8	1	0	107	180 / 80	-1.06 aVR	2.48 II
Recovery(2)	1 : 0	1.0	0	0	90	170 / 80	-1.06 aVR	2.12 II
Recovery(3)	1 : 0	1.0	0	0	82	160 / 80	-0.85 aVR	1.42 II
Recovery(4)	0 : 20	1.0	0	0	80	150 / 80	-0.42 aVR	1.06 II

HR x Stage

BP x Stage

Mets x Stage


DDRC agilus DIAGNOSTICS P NAGAR

Patient Details

Date: 09-Mar-24

Time: 14:06:57

Name: SHEELA T S ID: XC002881

Age: 57 y

Sex: F

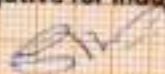
Height: -- cms

Weight: -- Kgs

Interpretation

The patient exercised according to the Bruce protocol for 6 m 30 s achieving a work level of Max. METS : 10.20. Resting heart rate initially 66 bpm, rose to a max. heart rate of 143 (88% of Pr.MHR) bpm. Resting blood Pressure 130 / 80 mmHg, rose to a maximum blood pressure of 180 / 80 mmHg.No Angina, No Arrhythmia

**No significant ST changes
Test negative for inducible ischemia**


Dr. George Thomas MD, FCSI, FIAE
Cardiologist



Ref. Doctor: MEDIWHEEL

Doctor: -----

(Summary Report edited by user)

MEDICAL EXAMINATION REPORT (MER)

If the examinee is suffering from an acute life threatening situation, you may be obliged to disclose the result of the medical examination to the examinee.

1. Name of the examinee	: Mr./Mrs./Ms. SHEELA JS
2. Mark of Identification	: (Mole/Scar/any other (specify location)):
3. Age/Date of Birth	: 20.04.1966 Gender: Female/F/M
4. Photo ID Checked	: (Passport/Election Card/PAN Card/Driving Licence/Company ID)

PHYSICAL DETAILS:

a. Height <u>150</u> (cms)	b. Weight <u>67</u> (Kgs)	c. Girth of Abdomen <u>92</u> (cms)
d. Pulse Rate <u>78</u> (/Min)	e. Blood Pressure:	Systolic Diastolic
	1 st Reading	<u>130</u> <u>90</u>
	2 nd Reading	

FAMILY HISTORY:

Relation	Age if Living	Health Status	If deceased, age at the time and cause
Father		/ NS	
Mother			
Brother(s)			
Sister(s)			

HABITS & ADDICTIONS: Does the examinee consume any of the following?

Tobacco in any form	Sedative	Alcohol
✓	—	—

PERSONAL HISTORY

- | | |
|---|---|
| a. Are you presently in good health and entirely free from any mental or Physical impairment or deformity. If No, please attach details. (Y/N) | c. During the last 5 years have you been medically examined, received any advice or treatment or admitted to any hospital? (Y/N) |
| b. Have you undergone/been advised any surgical procedure? (Y/N) | d. Have you lost or gained weight in past 12 months? (Y/N) |

Have you ever suffered from any of the following?

- | | |
|--|---|
| • Psychological Disorders or any kind of disorders of the Nervous System? (Y/N) | • Any disorder of Gastrointestinal System? (Y/N) |
| • Any disorders of Respiratory system? (Y/N) | • Unexplained recurrent or persistent fever, and/or weight loss (Y/N) |
| • Any Cardiac or Circulatory Disorders? (Y/N) | • Have you been tested for HIV/HBsAg / HCV before? If yes attach reports (Y/N) |
| • Enlarged glands or any form of Cancer/Tumour? (Y/N) | • Are you presently taking medication of any kind? (Y/N) |
| • Any Musculoskeletal disorder? (Y/N) | |

• Any disorders of Urinary System?

Y/N

• Any disorder of the Eyes, Ears, Nose, Throat or Mouth & Skin

Y/N

FOR FEMALE CANDIDATES ONLY

a. Is there any history of diseases of breast/genital organs?

Y/N

d. Do you have any history of miscarriage/abortion or MTP?

Y/N

b. Is there any history of abnormal PAP Smear/Mammogram/USG of Pelvis or any other tests? (If yes attach reports)

Y/N

e. For Parous Women, were there any complication during pregnancy such as gestational diabetes, hypertension etc

Y/N

c. Do you suspect any disease of Uterus, Cervix or Ovaries?

Y/N

f. Are you now pregnant? If yes, how many months?

Y/N

CONFIDENTIAL COMMENTS FROM MEDICAL EXAMINER

➤ Was the examinee co-operative?

Y/N

➤ Is there anything about the examinee's health, lifestyle that might affect him/her in the near future with regard to his/her job?

Y/N

➤ Are there any points on which you suggest further information be obtained?

Y/N

➤ Based on your clinical impression, please provide your suggestions and recommendations below:

Medical consult

➤ Do you think he/she is **MEDICALLY FIT** or **UNFIT** for employment.

FIT

MEDICAL EXAMINER'S DECLARATION

I hereby confirm that I have examined the above individual after verification of his/her identity and the findings stated above are true and correct to the best of my knowledge.

Name & Signature of the Medical Examiner :

Dr. GEORGE THOMAS
MD, FCSI, FIAE
MEDICAL EXAMINER
Reg: 86614

Seal of Medical Examiner :

Name & Seal of DDRC SRL Branch :



Date & Time :