



APEX SUPERSPECIALITY HOSPITALS

A Superspeciality Hospital



CASHLESS FACILITY

L. T. Road, Besides Punjab & Sind Bank, Babhai Naka, Borivali (W), Mumbai 400091.

email: info@apexhospitals.in | www.apexgroupofhospitals.com

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Tele.: 022 - 2898 6677 / 46 / 47

INTERVENTIONAL CARDIOLOGIST

Dr. Hemant Khemani
Mon to Fri: 10.00 am to 11.00 am
Dr. Rajiv Sharma
Mon to Fri: on appointment

CARDIAC SURGEON

Dr. Shridhar Padagati
Mon to Sat: 08.00 pm to 09.00 pm
Dr. Sagar Kedare
Mon to Sat: 08.00 pm to 09.00 pm

GENERAL PHYSICIAN

Dr. Chirag Shah
Mon to Sat: 11.30 am to 01.00 pm
Dr. Shreya Mehta
Mon to Sat: 01.00 pm to 03.00 pm
Dr. Priyank Jain
Mon to Sat: 01.00 pm to 03.00 pm

CHEST PHYSICIAN

Dr. Parthiv Shah
Wed to Sat: 09.00 am to 10.30 am
Dr. Ajal Modi
Mon to Thurs: 01.00 pm to 03.00 pm

JOINT REPLACEMENT SURGEON AND SPORT INJURIES

Dr. Amit Munde
Mon to Sun: 05.00 pm to 07.00 pm
Dr. Vividh Makwana
Mon to Sat: 11.00 am to 12.00 pm
Dr. Bhavin Doshi
Mon to Sat: 09.00 am to 10.00 pm
Dr. Arpit Dave
Mon to Sat: 05.00 pm to 07.00 pm
Dr. Deepak Bhaskar
Mon to Sat: on appointment
Dr. Raunak Shah
Mon to Sat: on appointment
Dr. Sandip Vyas
Mon to Fri: on appointment

MEDICAL GASTROENTEROLOGIST, HEPATOLOGIST, ENDOSCOPIST

Dr. Darshil Shah
Mon to Fri: 09.00 am to 10.00 am
06.00 pm to 07.00 pm
Dr. Siddhesh Rane
Mon to Sat: on appointment

LAPROSCOPIC SURGEON

Dr. Aditi Agarwal
Mon to Sat: 05.00 pm to 07.00 am
Dr. Anil Patil
Mon to Sat: 06.00 pm to 07.00 pm
Dr. Geeta Ghag
Mon to Sat: 06.00 pm to 07.00 pm

DIABETIC FOOT SURGEON

Dr. Shrikant Bhojar
Mon to Sat: 02.00 pm to 04.00 am

LAPROSCOPIC GYNAECOLOGIST

Dr. Hemashree Patel
Mon to Sat: 05.00 pm to 07.00 am

NEPHROLOGIST

Dr. Amit Jain
Mon to Sat: 10.00 am to 11.00 am
Dr. Ankit Mody
Mon, Wed & Fri: 05.00 pm to 07.00 pm
Dr. Umesh Khanna
Mon to Sat: 08.00 pm to 09.00 pm
Dr. Akash Shingada
Mon to Sat: 08.00 pm to 09.00 pm
Dr. Paras Dedhiya
Mon to Sat: on appointment

URO SURGEON

Dr. Saket Sathe
Mon to Sat: on appointment
Dr. Rushab Daga
Mon to Sat: on appointment
Dr. Aniket Shirke
Mon to Sat: on appointment

NEUROLOGIST

Dr. Dinesh Singh
Thurs to Sat: 09.30 am to 09.30 pm
Dr. Gaurav Kasundra
Mon to Wed: 08.30 am to 09.30 pm

NEURO SURGE

Dr. Darpan Thakur
Tues & Thurs: 03.00 pm to 04.00 pm
Dr. Sameer Parikh
Tues & Thurs: 03.00 pm to 04.00 pm

HAEMATOLOGIST

Dr. Shradha Thakur
Tue, Wed & Fri: 03.00 pm to 04.00 pm

GENERAL SURGEON

Dr. Ashish Joshi
Thurs: 09.00 am to 10.00 am
Dr. Pradeep Konde
Tues: 08.00 am to 10.00 am

ONCO SURGEON

Dr. Praveen Kamru
Tues & Thurs: 04.00 pm to 06.00 pm
Dr. Yogen Chhadani
Mon, Wed & Sat: 05.00 pm to 07.00 pm

OPHTHALMOLOGIST

Dr. Anurag Agarwal
Mon to Sat: 09.00 am to 10.00 am
Dr. Kishor Khadke
Mon to Sat: on appointment
Dr. Prashan Mahajari
Mon to Sat: on appointment

PAEDIATRICIAN

Dr. Sunila Nagvekar
Fri: 02.00 pm to 03.00 pm

PAEDIATRICIAN SURGEON

Dr. Yogendra Sanghavi
Mon to Sat: 11.00 am to 12.00 pm

INTERVENTIONAL VASCULAR SURGEON

Dr. Simit Vora
Tues, Thurs & Sat: 06.00 pm to 08.00 pm
Dr. Virendra Yadav
Mon to Sat: 09.00 pm to 10.00 pm
Dr. Maunil Bhutta
Wed to Fri: 05.00 pm to 07.00 pm

ENT SPECIALIST

Dr. Binhi Desai
Mon to Fri: on appointment
Dr. Rachana Mehta Shroff
Mon to Sat: 03.00 pm to 04.00 pm (on appointment)
Dr. Sonal Devang
Mon to Fri: on appointment

PSYCHIATRIST

Dr. Pratik Surandashve
Mon to Sat: 06.00 pm to 07.00 pm
Dr. Payal Sharma Kamat
Tue, Thurs & Fri: 09.00 am to 11.00 am

CLINICAL PSYCHOLOGIST

Dr. Hemangi Mhapolkar
Sun: 01.00 pm to 04.00 pm

COSMETOLOGIST

Dr. Vikas Verma
Mon to Sat: 06.00 pm to 08.00 pm
Dr. Leena Jain
Tues: 05.00 pm to 06.00 pm
Dr. Sushil Nehete
Wed: 06.00 pm to 08.00 pm
Dr. Pratap Nadar
Thurs: 05.00 pm to 06.00 pm

RADIOLOGIST

Dr. Saumil Pandya
Mon to Sat: 05.00 pm to 08.00 pm
Dr. Forum Kothari
Mon to Sat: 06.00 pm to 08.00 pm
Dr. Deep Vora
Mon to Sat: 09.00 pm to 09.30 pm

DIETICIAN

Ms. Mrinali Diwvedi
Mon to Sat: 08.00 am to 04.00 pm

PHYSIOTHERAPIST

Dr. Disha Lamba
Mon to Sat: 09.00 am to 04.00 pm

17/12/24

Mr. Prasant Rangan

Age - 42 yrs / male

No H/O -

No any Sx history

O/E - vit - mod

Temp - Afebr

BP - 130/80 mm Hg

P - 90/min

SpO2 - 98% on RA

StE -
CVS }
CNS }
RS } NAD

PIA - soft

Skin profile - (N)

Dental care - (N)

eyes aspects status - (2015)

Handwritten signature



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APEX SUPERSPECIALITY HOSPITALS DIAGNOSTICS



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Tele.:
022 - 2898 6677 / 46 / 47 / 48

Patient	: Rajnan Prashant	UHID	: ASH232404241
Age/Sex	: 42/Male	ID	: OP232405001
Consultant Dr	: SHAH CHIRAG	Registered On	: 17-Feb-2024
Referring Dr	:	Reported On	: 17-Feb-2024
Collection Centre	: Apex Hospital		

COMPLETE BLOOD COUNT

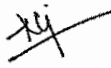
Test	Result	Normal Value
HAEMOGLOBIN	14.1 Gm%	13.5-18.0 Gm%
RBC Count	5.06 Millions/cumm	4.0-6.0 Millions/cumm
PCV	40.4 %	37-47 %
MCV	79.84 Fl	78-100 Fl
MCH	27.87 Pg	27-31 Pg
MCHC	34.90 %	32-35 %
RDW	14.6 %	11-15 %
Total WBC Count	6900 /C.MM	4000-11000 /C.MM
Differential Count		
Neutrophils	66 %	40-75 %
Eosinophils	02 %	01-06 %
Basophils	00 %	00-01 %
Lymphocytes	30 %	20-45 %
Monocytes	02 %	01-10 %
BANDCELLS	00 %	00-03 %
Abnormalities Of WBC	NORMAL	
Abnormalities Of RBC	NORMOCYTIC NORMOCHROMIC	
PLATELET COUNT	204 X 10 ³ /cumm	150-450 X 10 ³ /cumm
PLATELET ON SMEAR	ADEQUATE ON SMEAR	
MPV	H 12.1 Fl	7.0-11.0 Fl

Remarks : *

Note:- The test result are subject to variations due to technical limitations hence co-relation with clinical findings & other investigations should be done.

Run By
Lab Technician

Checked By
Biochemist


Pathologist
DR.GUJAR NEERAJ VILAS
MD PATHOLOGY



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HEMATOLOGY

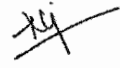
Test	Result	Normal Value
ESR	H <u>17 mm/hr</u>	0 - 10 mm/hr
BLOOD GROUP	"O"	
Rh FACTOR	POSITIVE	

Remarks : *

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FASTING BLOOD SUGAR

Test	Result	Normal Value
FBS	76.4 Mg/dl	70-110 Mg/dl
URINE SUGAR	ABSENT	
URINE KETONES	ABSENT	

POST LUNCH BLOOD SUGAR


Test	Result	Normal Value
PLBL (2 HOUR AFTER FOOD)	92.31 Mg/dl	70-140 Mg/dl
URINE SUGAR (PP)	SNR	-
URINE KETONE (PP)	SNR	

Remarks : **

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LIPID PROFILE

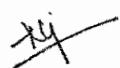
Test	Result	Normal Value
TOTAL CHOLESTEROL	197.5 Mg%	150-250 Mg%
TRIGLYCERIDES	103.1 Mg%	35-160 Mg%
HDL CHOLESTEROL	42.5 Mg%	30-70 Mg%
VLDL CHOLESTEROL	20.62	7-35
LDL CHOLESTEROL	134.38 Mg%	108-145 Mg%
TC/HDL CHOL RATIO	4.65	3.5-5.0
LDL/HDL RATIO	3.16	1.1-3.9

Remarks : *

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RENAL FUNCTION TEST


Test	Result	Normal Value
SERUM CREATININE	0.93 Mg/dl	0.6-1.6 Mg/dl
URIC ACID	5.38 Mg/dl	2.5-7.7 Mg/dl
BLOOD UREA NITROGEN / BUN	13.4 Mg/dl	0-23 Mg/dl

Remarks : *

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LIVER FUNCTION TEST

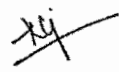
Test	Result	Normal Value
TOTAL BILIRUBIN	0.71 Mg/dl	0.1-1.2 Mg/dl
DIRECT BILIRUBIN	0.19 Mg/dl	0.0-0.3 Mg/dl
INDIRECT BILIRUBIN	0.52 Mg/dl	0.1-1.0 Mg/dl
SGOT	31.5 Iu/l	5-40 Iu/l
SGPT	20.4 Iu/l	5-40 Iu/l
SERUM ALKALINE PHOSPHATES	81.60 U/l	25-147 U/l
SERUM PROTEINS TOTAL	6.43 Gm%	6.0-8.2 Gm%
SERUM ALBUMIN	3.59 Gm%	3.0-5.0 Gm%
SERUM GLOBULIN	2.84 Gm%	1.9-3.5 Gm%
ALBUMIN : GLOBULIN RATIO	1.26 Mg/dl	0.9-2.0 Mg/dl
GAMMA GT	25.13 Iu/l	5-45 Iu/l

Remarks : *

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Consultant Dr	: SHAH CHIRAG	Registered On	: 17-Feb-2024
Referring Dr	:	Reported On	: 17-Feb-2024
Collection Centre	: Apex Hospital		

URINE ROUTINE

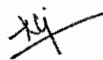
Test	Result	Normal Value
PHYSICAL EXAMINATION		
QUANTITY	25 Ml	Ml
COLOUR	PEAL YELLOW	
APPEARANCE	SLIGHTLY HAZY	
DEPOSIT	ABSENT	
REACTION [PH]	ACIDIC	
SPECIFIC GRAVITY	1.015	
CHEMICAL EXAMINATION		
URINE ALBUMIN	ABSENT	
SUGAR	ABSENT	
KETONE BODIES	ABSENT	
OCCULT BLOOD	ABSENT	
BILE PIGMENT	ABSENT	
BILE SALT	ABSENT	
MICROSCOPIC EXAMINATION OF CENTRE		
RED BLOOD CELLS	ABSENT /hpf	/hpf
PUS CELLS	1-2 /hpf	/hpf
EPITHELIAL CELLS	2-3 /hpf	/hpf
CASTS	ABSENT	
CRYSTALS	ABSENT	
SPERMATOOA	ABSENT	
TRICHOMONAS VAGINALIS	ABSENT	
YEAST CELLS	ABSENT	
AMORPHOS DEPOSITS	ABSENT	
BACTERIA	ABSENT	

Remarks : *

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MD PATHOLOGY

Patient Id : PVD04223-24/66582 Sample ID : 24024534
 Patient : MR PRASHANT RAJNAN Reg. Date : 17/02/2024
 Age/sex : 42 Yrs/ Male Report Date : 17/02/2024
 Center : APEX SUPERSPECIALITY HOSPITALS Case No. :
 Ref. By : Self



PROSTATE SPECIFIC ANTIGEN

Test Description	Result	Unit	Biological Reference Range
PSA (Prostate Specific Antigen)-Serum Total	0.79	ng/ml	Conventional for all ages: 0 - 4 69- 80 Years : 0 - 6.5 Above 80 yrs: 0 - 7.2

Method : ECLIA

INTERPRETATION :

Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. PSA exists in serum mainly in two forms, complexed to alpha-1-anti chymotrypsin (PSA-ACT complex) and unbound (free PSA). Increases in prostatic glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels. Transient increase in PSA can also be seen following per rectal digital or sonological examinations.

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

Term & Conditions* Test processed at Pathvision Central Processing Laboratory- Dahisar west Mumbai-68 Individual laboratory investigations are never conclusive but should be used along with other relevant clinical examinations to achieve final diagnosis. Any discrepancy with clinical condition the referring doctor or patient must report in 24hr of sample collection and get test redone. Partial reproduction of this report is not permitted The test report is not valid for Medico-legal purpose.



DR. SANDEEP B. PORWAL
MBBS MD (Path) Mumbai
MMC Reg no 2001031640

Patient Id : **PVD04223-24/66582** Sample ID : 24024534
 Patient : MR PRASHANT RAJNAN Reg. Date : 17/02/2024
 Age/sex : 42 Yrs/ Male Report Date : 17/02/2024
 Center : APEX SUPERSPECIALITY HOSPITALS Case No. :
 Ref. By : Self



IMMUNOASSAY


Test Description	Result	Unit	Biological Reference Range
TOTAL T3 T4 TSH (TFT)			
T3 (Triiodothyronine)	126.41	ng/dl	83-200 For Pregnant females: First Trim: 104.8 - 229.8 2nd Trim: 128.9 - 262.3 Third trim : 135.4 - 261.7
T4 (Thyroxine)	7.15	ug/dL	5.13 - 14.10 For Pregnant females: First Trim : 7.33 - 14.8 Second Trim : 7.93 - 16.1 Third Trim : 6.95 - 15.7
TSH(Thyroid Stimulating Hormone)	2.79	uIU/ml	0.27 - 4.20
Method	: ECLIA		

INTERPRETATION

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	• Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within Range	Within Range	•Isolated High TSHespecially in the range of 4.7 to 15 mIU/ml is commonly associated with Physiological & Biological TSH Variability. •Subclinical Autoimmune Hypothyroidism •Intermittent T4 therapy for hypothyroidism •Recovery phase after Non-Thyroidal illness"
Raised	Decreased	Decreased	•Chronic Autoimmune Thyroiditis •Post thyroidectomy,Post radioiodine •Hypothyroid phase of transient thyroiditis"
Raised or within Range	Raised	Raised or within Range	•Interfering antibodies to thyroid hormones (anti-TPO antibodies) •Intermittent T4 therapy or T4 overdose •Drug interference- Amiodarone, Heparin,Beta blockers,steroids,anti-epileptics"
Decreased	Raised or within Range	Raised or within Range	•Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness •Subclinical Hyperthyroidism •Thyroxine ingestion"
Decreased	Decreased	Decreased	•Central Hypothyroidism •Non-Thyroidal illness •Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	•Primary Hyperthyroidism (Graves' disease),Multinodular goitre, Toxic nodule •Transient thyroiditis:Postpartum, Silent (lymphocytic), Postviral (granulomatous,subacute, DeQuervain's),Gestational thyrotoxicosis with hyperemesis gravidarum"
Decreased or within Range	Raised	Within Range	•T3 toxicosis •Non-Thyroidal illness

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

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 MBBS MD (Path) Mumbai
 MMC Reg no 2001031640

CENTRAL PROCESSING LABORATORY

Grandeur 208/209/210, S.V. Road, Dahisar (East), Mumbai - 400 068.

Tel: 2562 7645 • Mob: 86910 17023 / 81042 45961 • www.pathvisiondiagnostics.com

Patient Id : **PVD04223-24/66582** Sample ID : 24024534
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HBA1C-GLYCOSYLATED HAEMOGLOBIN

Test Description	Result	Unit	Biological Reference Range
HbA1c- (EDTA WB)	6.0	%	< 5.6 Non-diabetic 5.7-6.4 Pre-diabetic > 6.5 Diabetic
Estimated Average Glucose (eAG)	125.50	mg/dL	
Method : HPLC-Biorad D10-USA			


INTERPRETATION

1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
2. HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low glyated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
5. To estimate the eAG from the HbA1C value, the following equation is used: $eAG(mg/dl) = 28.7 * A1c - 46.7$
6. Interference of Haemoglobinopathies in HbA1c estimation.
 - A. For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
 - B. Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
 - C. Heterozygous state detected (D10/ Tosho G8 is corrected for HbS and HbC trait).
7. In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control.
 - Excellent Control - 6 to 7 %,
 - Fair to Good Control - 7 to 8 %,
 - Unsatisfactory Control - 8 to 10 %
 - and Poor Control - More than 10 %.

Note : Haemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy

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UHID : ASH232404241 ID : OP232405077 Date : 17-Feb-2024
Patient : Rajnan Age/Sex : 42/Male Referred By : MEDIWHEEL
Prashant
Company : SELF

DIGITAL X-RAY CHEST <PA> VIEW

The lung on either side shows equal translucency and exhibit normal vasculature

The pleural spaces are normal.

Both hila are normal in size, have equal density and bear normal relationship.

The cardiac size is normal.

Trachea is central in position and no mediastinal abnormality is visible.

Bony thorax is normal.

IMPRESSION:

- o No significant abnormality.

DR. PANDYA SAUMIL
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RADIOLOGIST



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Tele.:
022 - 2898 6677 / 46 / 47 / 48

UHID : ASH232404241 ID : OP232405001 Date : 19-Feb-2024
Patient : Rajnan Prashant Age/Sex : 42/Male Referred By :
Company : SELF

SONOGRAPHY OF ABDOMEN AND PELVIS

TECHNIQUE: Real time, B mode, gray scale sonography of the abdominal and pelvic organs was performed with convex transducer.

LIVER: The liver is normal in size, shape and has smooth margins. The hepatic parenchyma shows homogeneous normal echotexture without solid or cystic mass lesion or calcification. No evidence of intrahepatic biliary radical dilatation.

PORTAL VEIN: It is normal in transverse diameter.

GALL BLADDER: The gall bladder is well distended. There is no evidence of calculus, wall thickening or pericholecystic collection.

COMMON BILE DUCT: The visualised common bile duct is normal in caliber. No evidence of calculus is seen in the common bile duct. Terminal common bile duct is obscured due to bowel gas artifacts.

PANCREAS: The head and body of pancreas is normal in size, shape, contours and echo texture. Rest of the pancreas is obscured due to bowel gas artifacts.

SPLEEN: The spleen measures 11 cm normal in size and shape. Its echotexture is homogeneous.

KIDNEYS:

Right kidney	Left kidney
10.2 x 3.7 cm	9.9 x 4.8 cm

The kidneys are normal in size and have smooth renal margins. Cortical echotexture is normal. The central echo complex does not show evidence of hydronephrosis. No evidence of hydroureter or calculi, bilaterally.

URINARY BLADDER: The urinary bladder is well distended. It shows uniformly thin walls and sharp mucosa. No evidence of calculus is seen. No evidence of mass or diverticulum is noted.

PROSTATE: It measures about 3.4 x 3.6 x 3.4 cms; volume is 22.5 gm. The prostate gland shows well defined and smooth margins. The prostatic echotexture is normal and homogeneous.

There is no ascites. There is no obvious evidence of significant lymphadenopathy.

IMPRESSION:

Ø No significant abnormality noted.

DR. PANDYA SAUMIL
MD,D.N.B
RADIOLOGIST

ASH/QA/FORM/NUR/04/MAR22/V1



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CASHLESS FACILITY

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ई. सी. जी.

Name Prashant Ranjan Date 17/2/24

Age 42 Gender: M F UHID NO _____ B.P _____

ELECTROCARDIOGRAPHIC OBSERVATIONS

Rate _____ Axis _____ Q.R.S. Complex _____

Rhythm _____ P. Wave _____ S.T. Segment _____

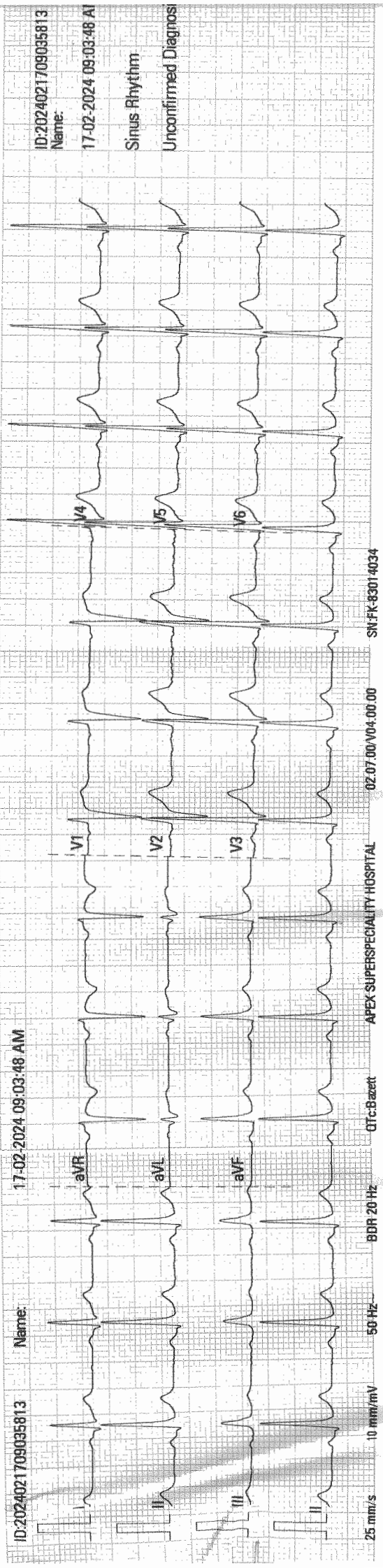
Standardisation : _____ P.R. Interval _____ T. Wave _____

Voltage : _____ Q. Wave : _____ Q. T. Interval _____

Impression : _____
with delay

सुरस्पेशलिटी हॉस्पिटलस Name Prashant Ransari

Date 17/2/24 Time _____



UNI-EM

ELECTRONICS COMPLEX

INDORE

TREADMILL TEST REPORT

prashant Ranjan
 ID : 22230
 DATE : 05/04/2005
 AGE/SEX : 42 /M
 HT/WT : 186 / 78
 REF.BY :

PROTOCOL : Bruce
 HISTORY :
 INDICATION :
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	B.P. mmHg	RPP x10 ³	ST LEVEL (MM)			METS
								II	V1	V5	
Stage 1	2:55	2:55	2.7	10	113	130 / 80	146	0.2	0.9	-0.1	4.67
Stage 2	5:55	2:55	4	12	139	140 / 90	194	1.2	1.1	1.4	7.04
PK-EXERCISE	7:26	1:26	5.4	14	173	140 / 90	242	1	0.7	-0.1	8.49
RECOVERY	10:29	2:55			111	140 / 90	155	0.3	1.5	0.7	
RECOVERY	13:29	5:55			102	130 / 80	132	-1.4	1	-1.1	

RESULTS

EXERCISE DURATION : 7:26
 MAX HEART RATE : 173 bpm
 MAX BLOOD PRESSURE : 140 / 90 mm Hg
 REASON OF TERMINATION :
 BP RESPONSE :
 ARRHYTHMIA :
 H.R. RESPONSE :
 IMPRESSIONS :
 MAX WORK LOAD : 8.49 METS
 % of target heart rate 178 bpm

Technician :

UNI-EM

Prashant Ranjan
 I.D. 22230
 Age 42/M
 Date 05/04/2005

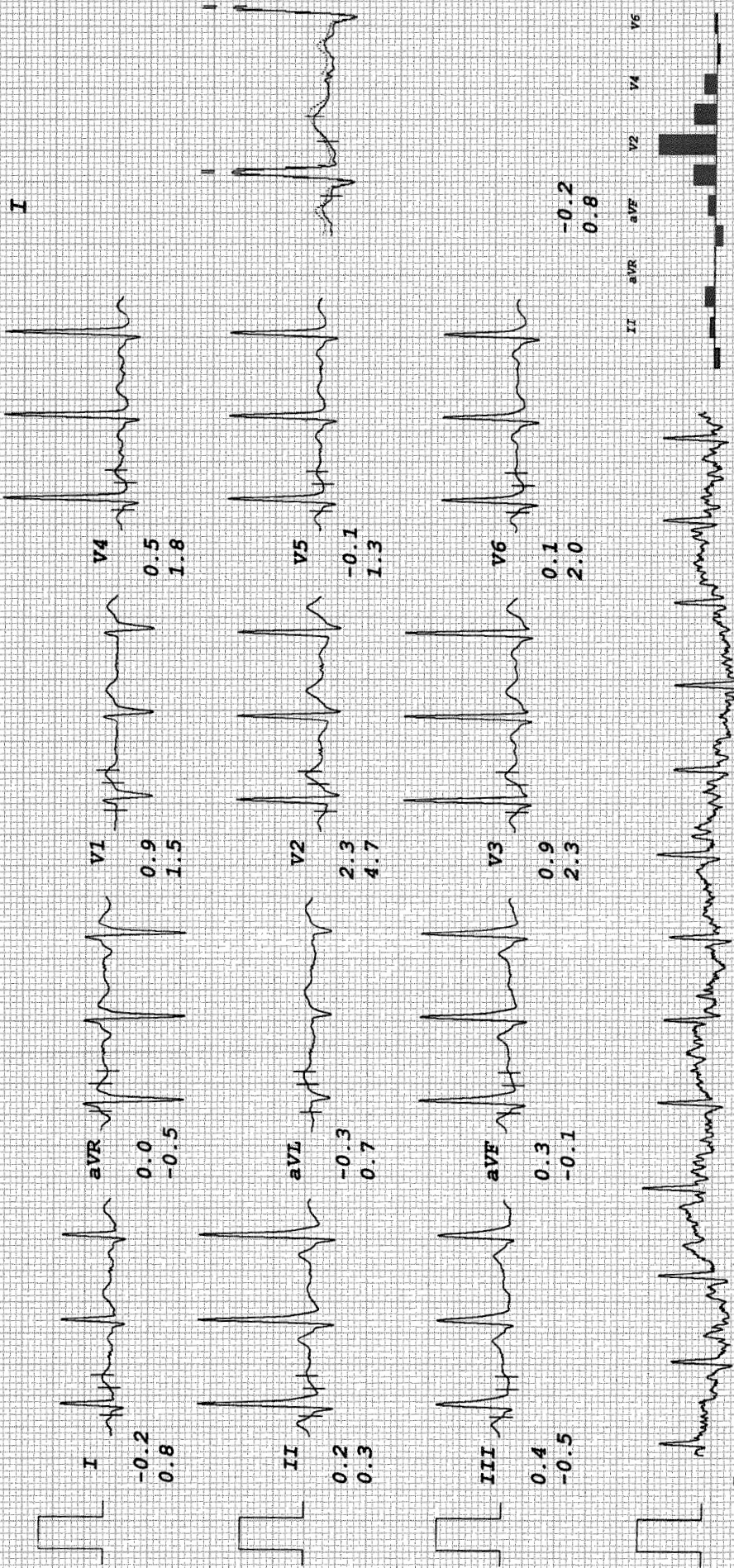
RATE 113bpm
 B.P. 130/80

Bruce
 Stage 1
 TOTAL TIME 2:55
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ
 Speed 2.7 km/hr
 SLOPE 10 #

LINKED MEDIAN

Mag. X 2



UNI-EM

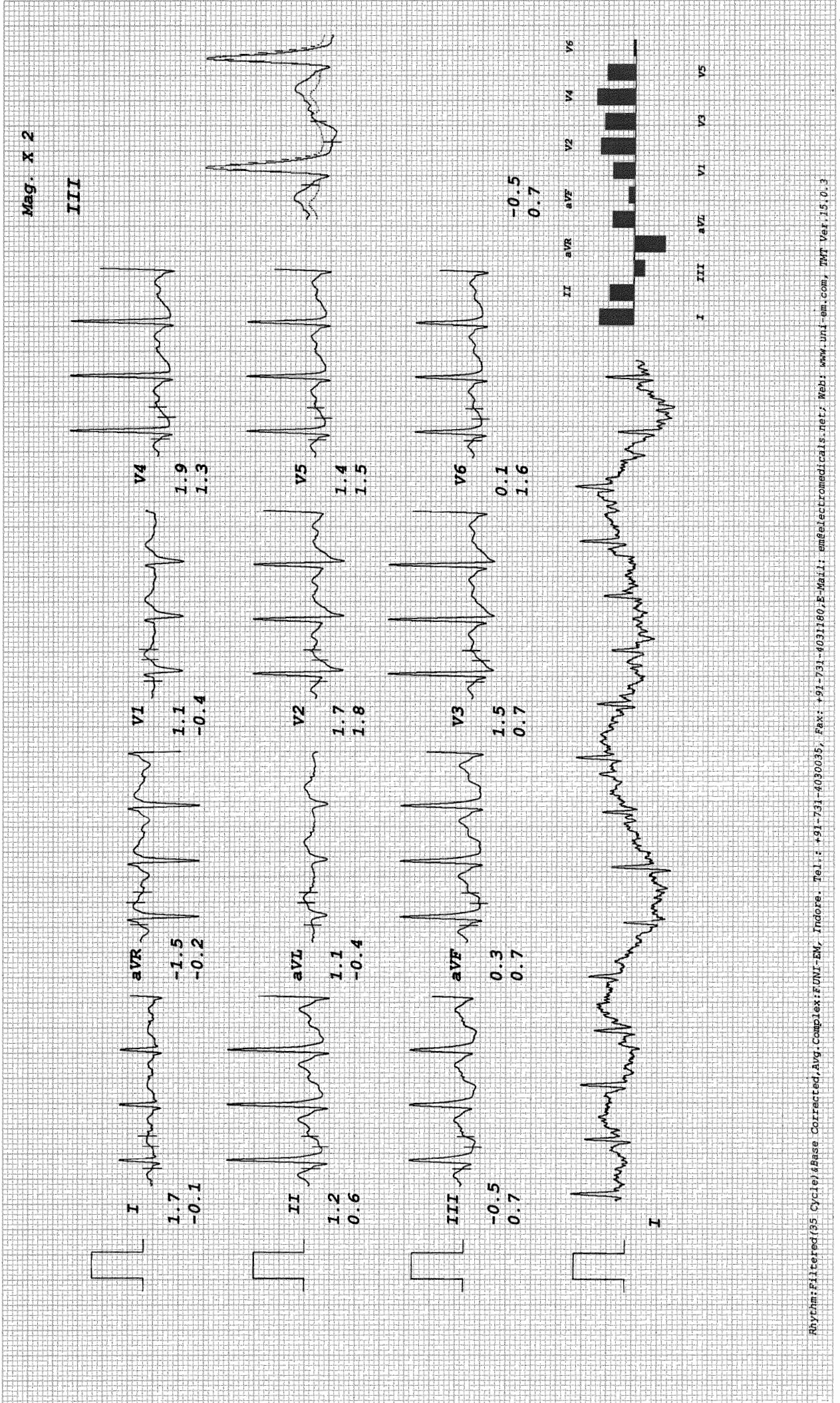
prashant Ranjan
 I.D. 22230
 Age 42/M
 Date 05/04/2005

RATE 139bpm
 B.P. 140/90

Bruce
 Stage 2
 TOTAL TIME 5:55
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ
 Speed 4 km/hr
 SLOPE 12 %

LINKED MEDIAN



UNI-EM

prashant Ranjan
 I.D. 22230
 Age 42/M
 Date 05/04/2005

Rate 173bpm
 B.P. 140/90

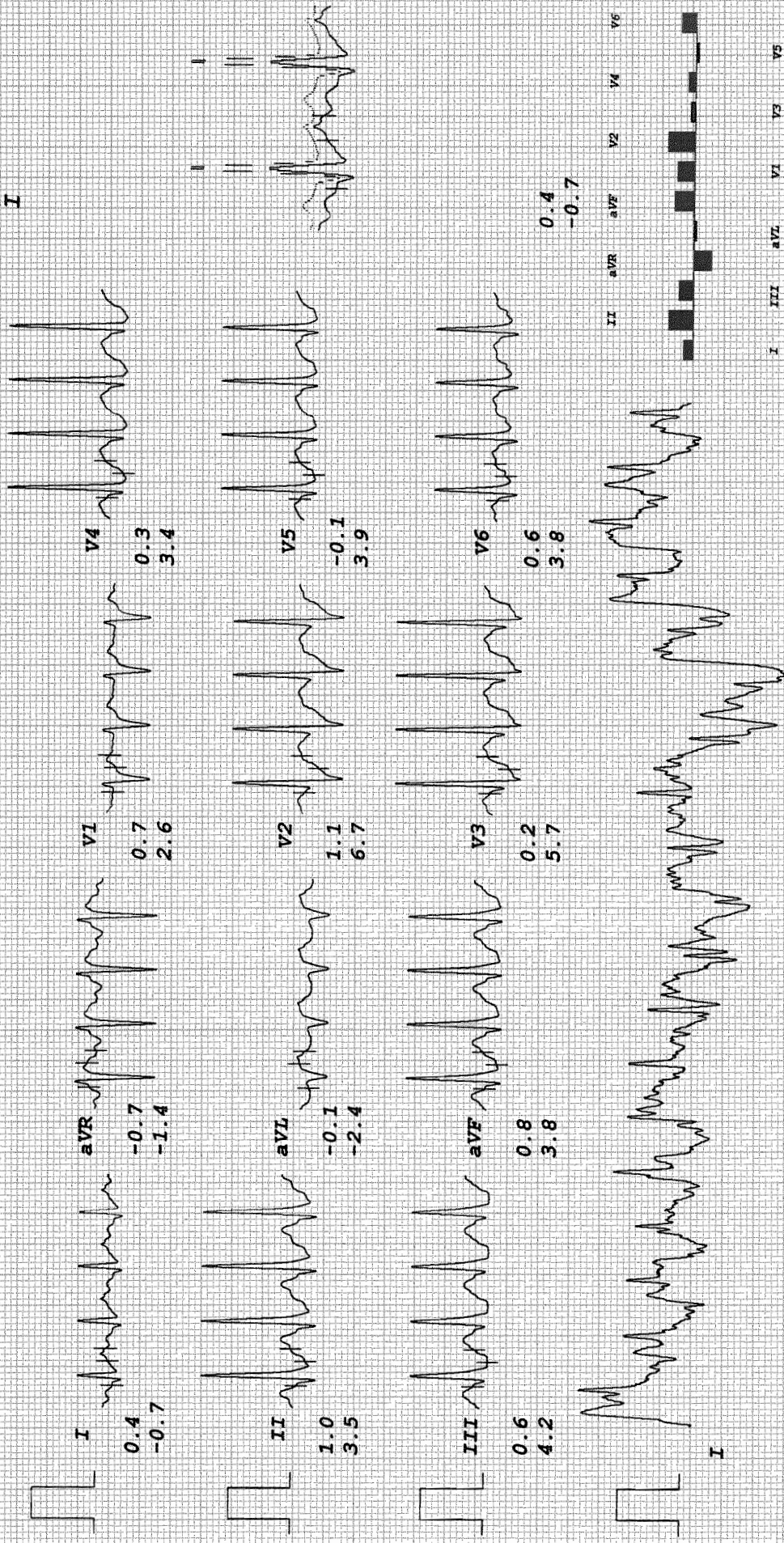
Bruce
 PK-EXERCISE

TOTAL TIME 7:26
 PHASE TIME 1:26

ST @ 10mm/mV
 80ms PostJ
 Speed 5.4 km/hr
 SLOPE 14 %

LINKED MEDIAN

Mag. X 2



UNI-EM

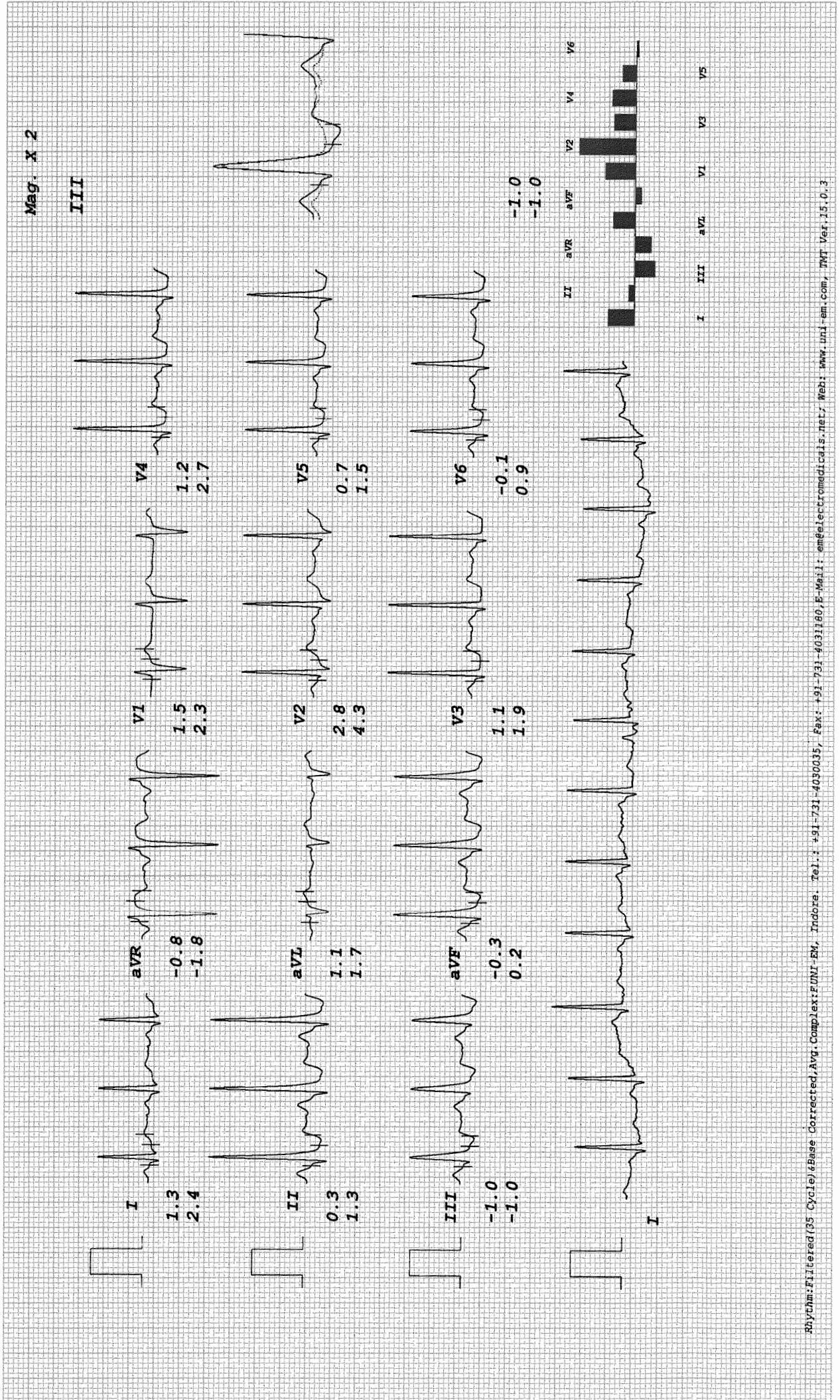
prashant Ranjan
 I.D. 22230
 Age 42/M
 Date 05/04/2005

RATE 111bpm
 B.P. 140/90

Bruce
 RECOVERY
 TOTAL TIME 10:29
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ

LINKED MEDIAN



UNI-EM

Prashant Ranjan
 I.D. 22230
 Age 42/M
 Date 05/04/2005

Bruce
 RECOVERY
 RATE 102bpm
 B.P. 130/80
 TOTAL TIME 13:29
 PHASE TIME 5:55

LINKED MEDIAN

