



26139 211024

Registration ID : 26139

Sample Collection : 21/10/2024 09:18:32

Name : MRS. SINDHU SONAWANE

Sample Received : 21/10/2024 09:18:32

Age/Sex : 61 Yrs. / F

Printed : 22/10/2024 17:42:53

Report Released : 21/10/2024 18:42:09

Ref. By : BANK OF BARODA

Sent By : Arcofemi Healthcare Pvt Ltd

**COMPLETE BLOOD COUNT**

Test	Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	: 11.9	g/dL	12-14 g/dL
Total RBC (Electrical Impedence)	: 3.68	10 <sup>6</sup> /μL	3.0-6.0 10 <sup>6</sup> /μL
Hematocrit (PCV) (Calculated)	: 35.0	%	36-54 %
Mean Corpuscular Volume (MCV) (calculated)	: 95.1	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	: 32.3	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated)	: 34.0	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	: 13.20	%	12-15 %
Total Leucocytes Count (Light Scattering)	: 5900	/cumm	4000-11000 /cumm
<b>Neutrophils</b> (Calculated)	: 72	%	40-75 %
<b>Eosinophils Percentage</b> (Calculated)	: 02	%	1-6 %
Lymphocyte Percentage (Calculated)	: 20	%	20-45 %
Basophils Percentage (Calculated)	: 0	%	0-1 %
Monocytes Percentage (Calculated)	: 06	%	1-10 %
RBC Morphology	: Normocytic, Normochromic		
WBC Morphology	: Normal Morphology		
Platelet Count (Electrical Impedence)	: 214000	/ul	150000-450000 /ul
Platelets on Smear	: Adequate		Adequate
E.S.R	: 12	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: 21/10/2024 09:18:32, Received At: 21/10/2024 09:18:32, Reported At: 21/10/2024 18:42:09)



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





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2000/08/2926





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	Sent By	: Arcofemi Healthcare Pvt Ltd	

### Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)

Test	Result	Unit	Biological Ref. Range
GLUCOSE (SUGAR) FASTING, (Fluoride Plasma Used)	: 100	mg/dL	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: $\geq$ 126 mg/dl
<i>Method: GOD-POD</i>			
Fasting Urine Glucose	: Absent		Absent
GLUCOSE (SUGAR) PP, ( Fluoride Plasma Used )	: 131	mg/dl	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: $\geq$ 200 mg/dl
PP Urine Glucose	: Absent		Absent

Test Done on - Automated Biochemistry Analyzer (EM 200)

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### HbA1c (Whole Blood)

Test	Result	Unit	Reference Range
HbA1c-Glycosylated Haemoglobin	: 5.50	%	Non-diabetic: 4-6 Excellent Control: 6-7 Fair to good control: 7-8 Unsatisfactory control: 8-10 Poor Control: >10

EDTA Whole Blood, Method: HPLC

Estimated Average Glucose (eAG)	: 111.15	mg/dl	65.1-136.3 mg/dL mg/dl
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EDTA Whole Blood, Method: Calculated

#### 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 Association) 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.

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**BLOOD GROUP**


Test	Result	Unit	Biological Ref. Range
Blood Group	: 'O' Rh POSITIVE		

Slide and Tube Agglutination Test

(Collected At: 21/10/2024 09:18:32, Received At: 21/10/2024 09:18:32, Reported At: 22/10/2024 14:22:47)

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**LIPID PROFILE**

Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: 154	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
<i>Serum, Method: CHOD-PAP</i>			
S. Triglyceride	: 69	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
<i>Serum, Method: GPO-Trinder</i>			
HDL Cholesterol	: 46	mg/dl	42.0-88.0 mg/dl
<i>serum,Direct method</i>			
LDL Cholesterol	: 94.20	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
<i>Serum, (Calculated)</i>			
VLDL Cholesterol	: 13.8	mg/dl	5-30 mg/dl
<i>Serum, Method: Calculated</i>			
LDL/HDL Ratio	: 2.0		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
<i>Serum, Method: Calculated</i>			
TC/HDL Ratio	: 3.3		Optimal: <3.5 Near Optimal: 3.5 - 5.0 High >5.0
<i>Serum, Method: Calculated</i>			

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.

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**LIVER FUNCTION TEST**


Test	Result	Unit	Biological Ref. Range
S. Bilirubin (Total) <i>Serum, Method: Diazo (walter &amp; Gerarde)</i>	: 0.64	mg/dl	0-2.0 mg/dl
S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter &amp; Gerarde)</i>	: 0.14	mg/dl	0-0.4 mg/dl
S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i>	: 0.50	mg/dl	0.10-1.0 mg/dl
Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i>	: <b>34.0</b>	IU/L	0-31 IU/L
Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i>	: 32.0	IU/L	0-34 IU/L
S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i>	: 62	IU/L	53-141 IU/L
Total Proteins <i>Serum, Method: Biuret</i>	: <b>5.8</b>	gm/dl	6.4-8.3 gm/dl
S. Albumin <i>Serum, Method: BCG</i>	: 3.9	gm/dl	3.2-4.6 gm/dl
S. Globulin <i>Serum, Method: Calculated</i>	: <b>1.9</b>	gm/dl	2.3-3.5 gm/dl
A/G Ratio <i>Serum, Method: Calculated</i>	: <b>2.07</b>		0.90-2.00

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

\*All Samples Processed At Excellas Clinics Mulund Centre .

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**SERUM CREATININE**

Test	Result	Unit	Biological Ref. Range
S. Creatinine	: 0.64	mg/dl	0.60-1.1 mg/dl

Serum, Method: Enzymatic

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

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**BLOOD UREA NITROGEN (BUN)**

Test	Result	Unit	Biological Ref. Range
Urea	: 28.24	mg/dl	21-43 mg/dl

Serum, Method: Urease - GLDH

Blood Urea Nitrogen : 13.20 mg/dl 5-18 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

\*All Samples Processed At Excellas Clinics Mulund Centre

(Collected At: 21/10/2024 09:18:32, Received At: 21/10/2024 09:18:32, Reported At: 21/10/2024 18:40:54)

**SERUM URIC ACID**

Test	Result	Unit	Biological Ref. Range
S. Uric Acid	: 2.90	mg/dl	2.6-6.0 mg/dl

Serum, Method: Uricase - POD

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

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**BUN CREAT RATIO (BCR)**

Test	Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	: 20.63		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)

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**THYROID FUNCTION TEST**

Test	Result	Unit	Biological Ref. Range
Total T3	: 1.1	ng/dl	0.70-2.04 ng/dl
<i>Serum, Method: CLIA</i>			
Total T4	: 12.78	µg/dl	5.1-14.1 µg/dl
<i>Serum, Method: CLIA</i>			
TSH (Thyroid Stimulating Hormone)	: 0.76	µIU/ml	0.5-8.9 µIU/ml
<i>Serum, Method: CLIA</i>			


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.

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**Dr. Santosh Khairnar**  
M.D. (Pathologist)  
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2000/08/2926





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**EXAMINATION OF URINE**

Test	Result	Unit	Biological Ref. Range
<b><u>PHYSICAL EXAMINATION</u></b>			
Quantity :	20	ml	
Colour :	Pale yellow		
Appearance :	Clear		
Reaction (pH) :	6.5		4.5 - 8.0
Specific Gravity :	1.015		1.010 - 1.030
<b><u>CHEMICAL EXAMINATION</u></b>			
Protein :	Absent		Absent
Glucose :	Absent		Absent
Ketones Bodies :	Absent		Absent
Occult Blood :	Absent		Absent
Bilirubin :	Absent		Absent
Urobilinogen :	Absent		Normal
<b><u>MICROSCOPIC EXAMINATION</u></b>			
Epithelial Cells :	1 - 2	/ hpf	
Pus cells :	2 - 3	/ hpf	
Red Blood Cells :	Absent	/ hpf	
Casts :	Absent	/ lpf	Absent / lpf
Crystals :	Absent		Absent
<b><u>OTHER FINDINGS</u></b>			
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

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**X RAY CHEST PA VIEW**

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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.**



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





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Ref. By : BANK OF BARODA

Sent By : Arcofemi Healthcare Pvt Ltd



MRS. SINDHU SONAWANE. AGE:-62YRS/FEMALE. R25 CHEST PA 21-Oct-24 11:06 AM  
EXCELLAS CLINICS PVT LTD TEL:-022-25695661/71

(Collected At: 21/10/2024 09:18:32, Received At: 21/10/2024 09:18:32, Reported At: 22/10/2024 17:28:19)

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





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**USG ABDOMEN & PELVIS - FEMALE****Sub optimal evaluation due to Bowel gases.**

**Liver:-** is normal in size (10.7 cms), shape **and raised echotexture**. No focal or diffuse lesion is seen. The portal and hepatic veins are normal. There is no IHBR dilatation seen.

**Gall Bladder:-** is normally distended **and shows multiple calculi gross measuring 18.9 mm**. No GB wall thickening or pericholecystic fluid is seen.

CBD is normal.

**Pancreas:-**is normal in size, shape and echotexture. There is no focal lesion seen.

**Spleen:-** is normal in size (7.8 cms) and echotexture. 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 – 9.6 x 4.7 cms.

Left kidney – 9.7 x 4.7 cms.

**Urinary Bladder:-** is well distended and shows normal wall thickness.

There is no intraluminal lesion within.

**Uterus:- is retroverted, bulky in size and measures 8.4 x 4.5 x 5.0 cms**

Myometrium shows homogenous echo pattern. No focal lesion is seen.

**ET : 12.5 mm Thickened.**

**Ovaries:-**appear normal in size, shape & show normal follicular pattern.

Right ovary measures – 2.3 x 1.5 cms.

Left ovary measures – 2.7 x 1.9 cms.

Both adnexae appear normal. No e/o of free fluid noted in POD.

No ascites is seen. No significant lymphadenopathy is seen.

**Suspicious umbilical Hernia noted with omentum as its content measures 22.8 mm.**

**IMPRESSION:**

- Grade I fatty liver.

**Dr. Deepak Mishra**

D.N.B. (Radio-

Diagnosis)

Reg. No:

2021/09/7488





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- **Cholelithiasis.**
- **Reducible fat containing umbilical hernia.**
- **Bulky uterus with Thickened endometrium.**

**Advice: MRI Pelvis.**

*Thanks for the Referral*

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**Dr. Deepak Mishra**

D.N.B. (Radio-

Diagnosis)

Reg. No:

2021/09/7488





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### USG BOTH BREAST

Both breasts show normal fibroglandular & fibro fatty parenchyma.

There is no solid, cystic lesion or abnormal dilatation of ducts noted on right side.

**There is well defined well circumscribed lesion measuring 6.9 x 3.3 mm at 12 O' clock position and another lesion measuring 3.1 x 1.8 mm at 9 O' clock position of left breast.**

No significant axillary lymphadenopathy is seen.

### IMPRESSION :

- **Left breast benign cysts...BIRADS II**


**Advice: Follow up imaging and review with clinical detail.s**

*Thanks for referral*

BIRADS CATEGORY : (0 = requires additional evaluation , 1 = Negative , 2 = benign findings , 3 = probably benign findings, 4 = suspicious abnormality , 5 = highly suggestive of malignancy).

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**Dr. Deepak Mishra**  
D.N.B. (Radio-  
Diagnosis)  
Reg. No:  
2021/09/7488





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**OPHTHALMIC EVALUATION**

<b>Examination</b>	<b>Right Eye</b>	<b>Left Eye</b>
Distance Vision With Glass	6/6	6/6
Near Vision With Glass	N/6	N/6
Color Vision	Normal	
Remarks	Normal	

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## CERVICAL CYTOLOGY REPORT

### PAPANICOLAOU SMEAR (CONVENTIONAL)

Specimen :- 1 unstained air dried smear received

Stained with papanicolaou method and examined.

Smear shows :

Many superficial squamous, intermediate squamous and few squamous metaplastic cells.

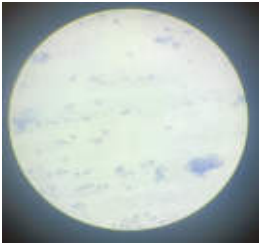
Background shows moderate inflammation.

No cellular atypia or malignancy noted.

IMP : No intraepithelial lesion or malignancy

The smears are reported using bethesda system for cervical cytology(2 014)

(Interpretation(s))



(Collected At: 21/10/2024 09:18:32, Received At: 21/10/2024 09:18:32, Reported At: 21/10/2024 14:41:03)

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



**MEDICAL EXAMINATION REPORT**

Name : Mr./Mrs./Miss SINDHU SUNAWANE

Date 21/10/2024

Sex : Male/Female

Age (yrs): 62

Marital status: Married/Unmarried

Present complaints: No

K/C/O - DM/HTN/IHD/T. B./Hypothyroidism TB in 1979. Uterine Fibroidectomy

Past history: - Medical illness No

Surgical illness Hernioplasty

Family history: Father - HTN/DM/IHD

Mother - HTN/DM/IHD

History of Allergies: No

History of Medication: Hypothyroid medication

On examination (O/E): (General Physical Examination)

General conditions. Good

Height (in cm): 157.

Weight (in Kg): 77.7.

BMI: 31.5

Temp - Afebrile

Pulse (per min) - 76/min

Respiration Rate (per min) - 17/min

BP- 110/70

Conjunctiva -

Sclera-

Tongue-

Skin-

Nasal cavity-

Normal

Lymph nodes-

NAD

Neck veins-

No

Oedema-

NAD

Cyanosis-

Clubbing-

Varicose veins-

Joints

Systemic Examination:

- PA

- CVS

- RS

- CNS

NAD.

Swelling over legs

**Excellas Clinics Pvt Ltd**

B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai  
 3454/SINDHU SONAWANE 62 Yrs/Female 77 Kg/157 Cms

Date: 21-Oct-2024 11:49:27 AM

Ref.By : MEDIWHEEL

Medication :

Objective :

**Summary**

Protocol : BRUCE

History :



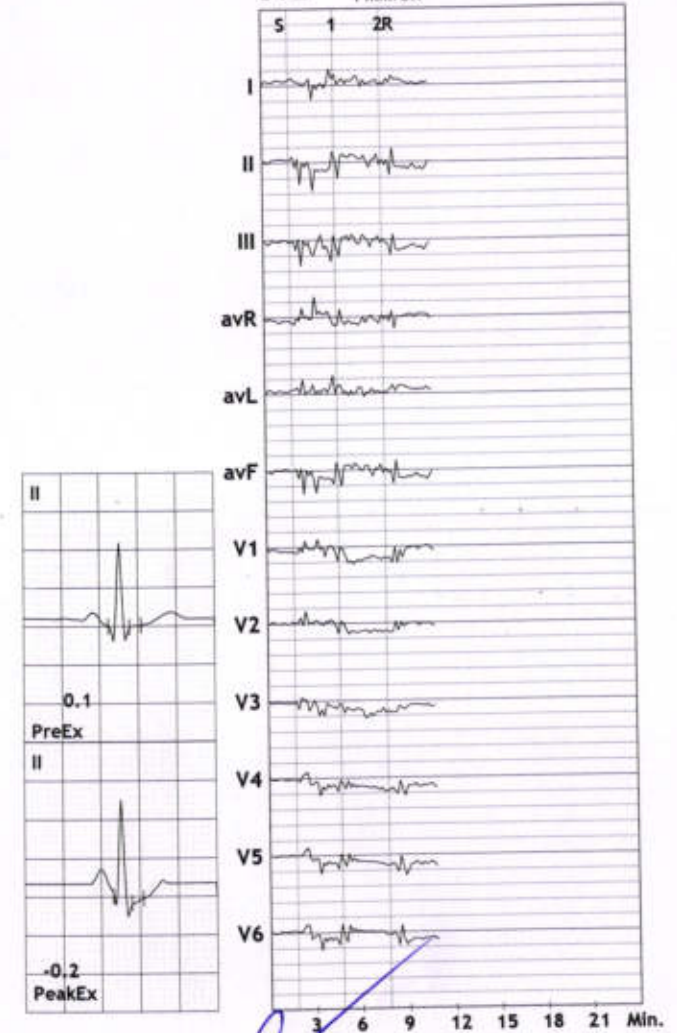
Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (mph)	Grade (%)	METs	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine					1.0	84	110/70	92	-	
Standing					1.0	85	110/70	93	-	
HV					1.0	86	110/70	94	-	
ExStart					1.0	86	110/70	94	-	
Stage 1	3:00	3:01	1.7	10.0	4.7	120	120/80	144	-	
Stage 2	3:00	6:01	2.5	12.0	7.1	147	130/80	191	-	
PeakEx	3:00	6:01	2.5	12.0	7.1	147	130/80	191	-	
Recovery	1:00		0.0	0.0	1.2	129	140/80	180	-	
Recovery	2:00		0.0	0.0	1.0	101	130/80	131	-	
Recovery	3:00		0.0	0.0	1.0	96	120/80	115	-	
Recovery	3:03		0.0	0.0	1.0	94	120/70	112	-	
Recovery					0.0	0	---/---	0	-	

**Findings :**

Exercise Time : 6:01 minutes  
 Max HR attained : 147 bpm 93% of Max Predictable HR 158  
 Max BP : 140/80(mmHg)  
 WorkLoad attained : 7.1 (Good Effort Tolerance)  
 No Significant ST segment changes seen during exercise or recovery  
 No Angina/Arrhythmia/S3/murmur  
 Final Impression : Test is negative for inducible ischaemia.  
 Maxmum Depression: 1:36  
 Disclaimer : Negative stress test does not rule out coronary artery disease  
 Advice/Positive: stress test is suggestive but not confirmatory of coronary artery disease.

*S.S. Suman*

STL 1 mm/Div



**DR. JOGESH VINODBHAI SOLANKI**  
 MBBS (MUM) MD GENERAL MEDICINE  
 DrNB INTERVENTIONAL CARDIOLOGY  
 MMC REG. NO. 2015053063

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B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai

3454/SINDHU SONAWANE

62 Yrs/Female

77 Kg/157 Cms

Date: 21-Oct-2024 11:49:27 AM

HR: 85 bpm

METS: 1.0

BP: 110/70

**12 Lead + Comparison**

MHR: 53% of 158

Speed: 0.0 mph

Grade: 0.0%

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 00:43

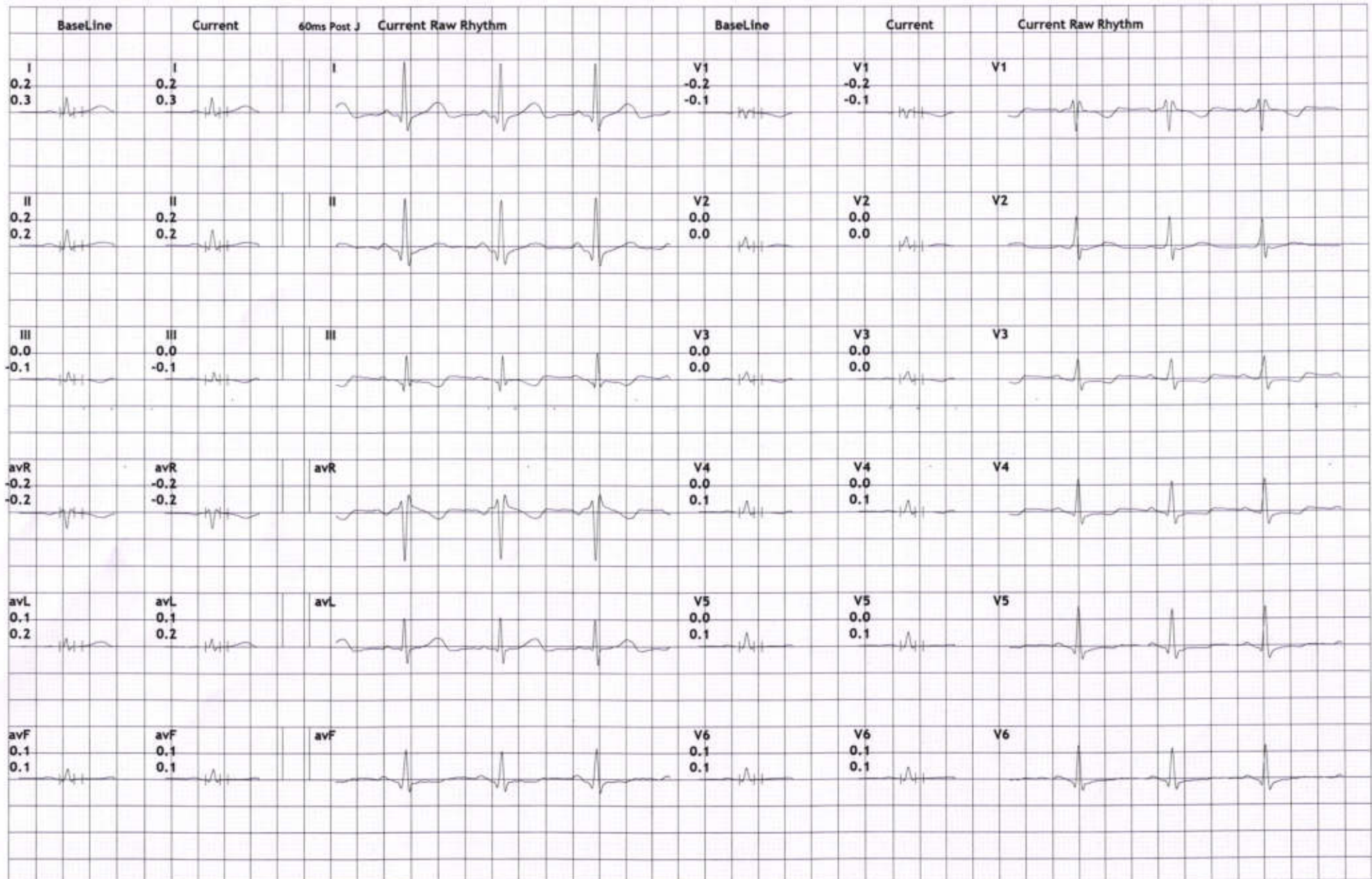
BLC :On

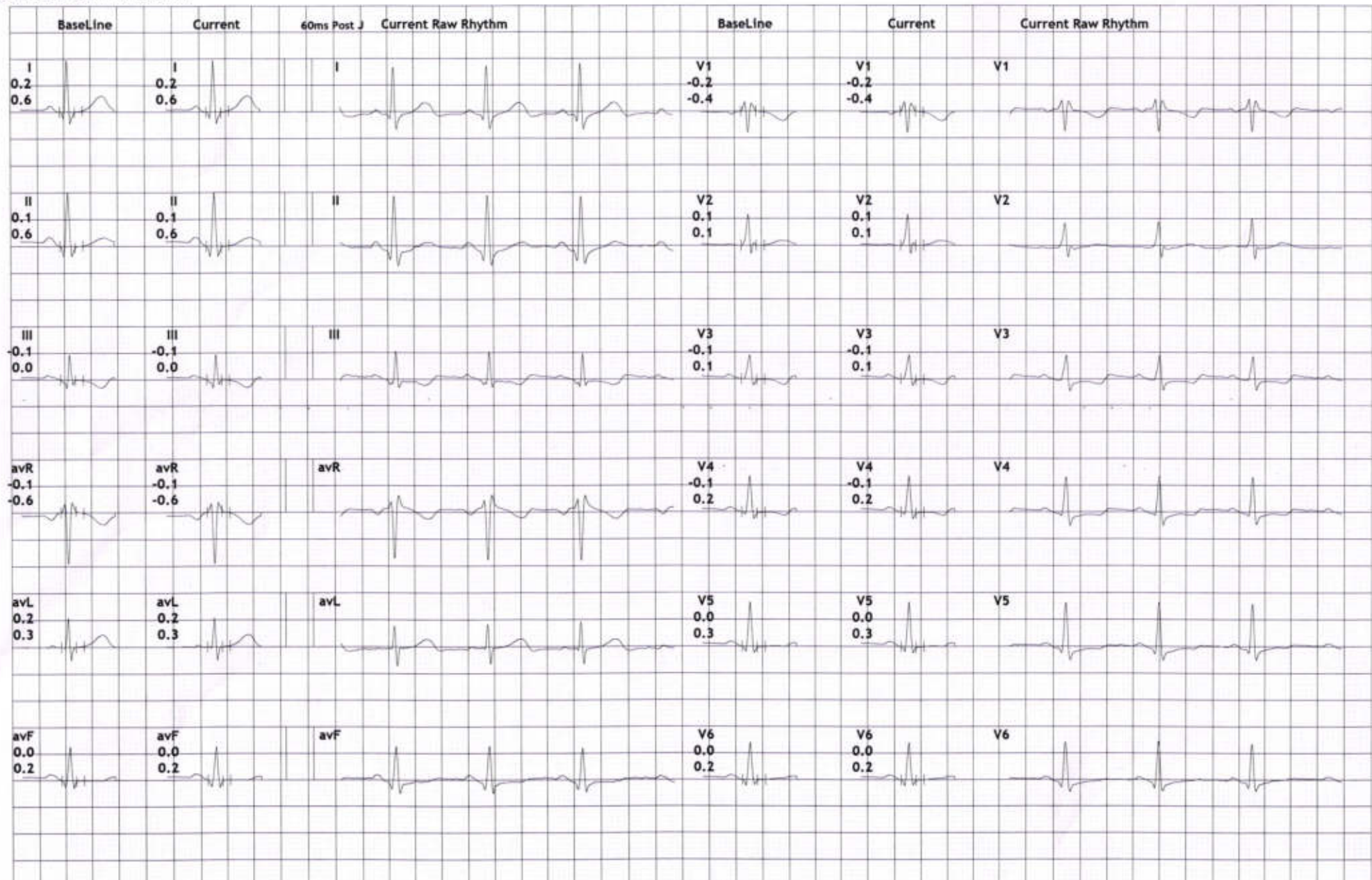
Notch :On

STANDING

10.0 mm/mV

25 mm/Sec.





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3454/SINDHU SONAWANE  
62 Yrs/Female  
77 Kg/157 Cms  
Date: 21-Oct-2024 11:49:27 AM

**12 Lead + Comparison**

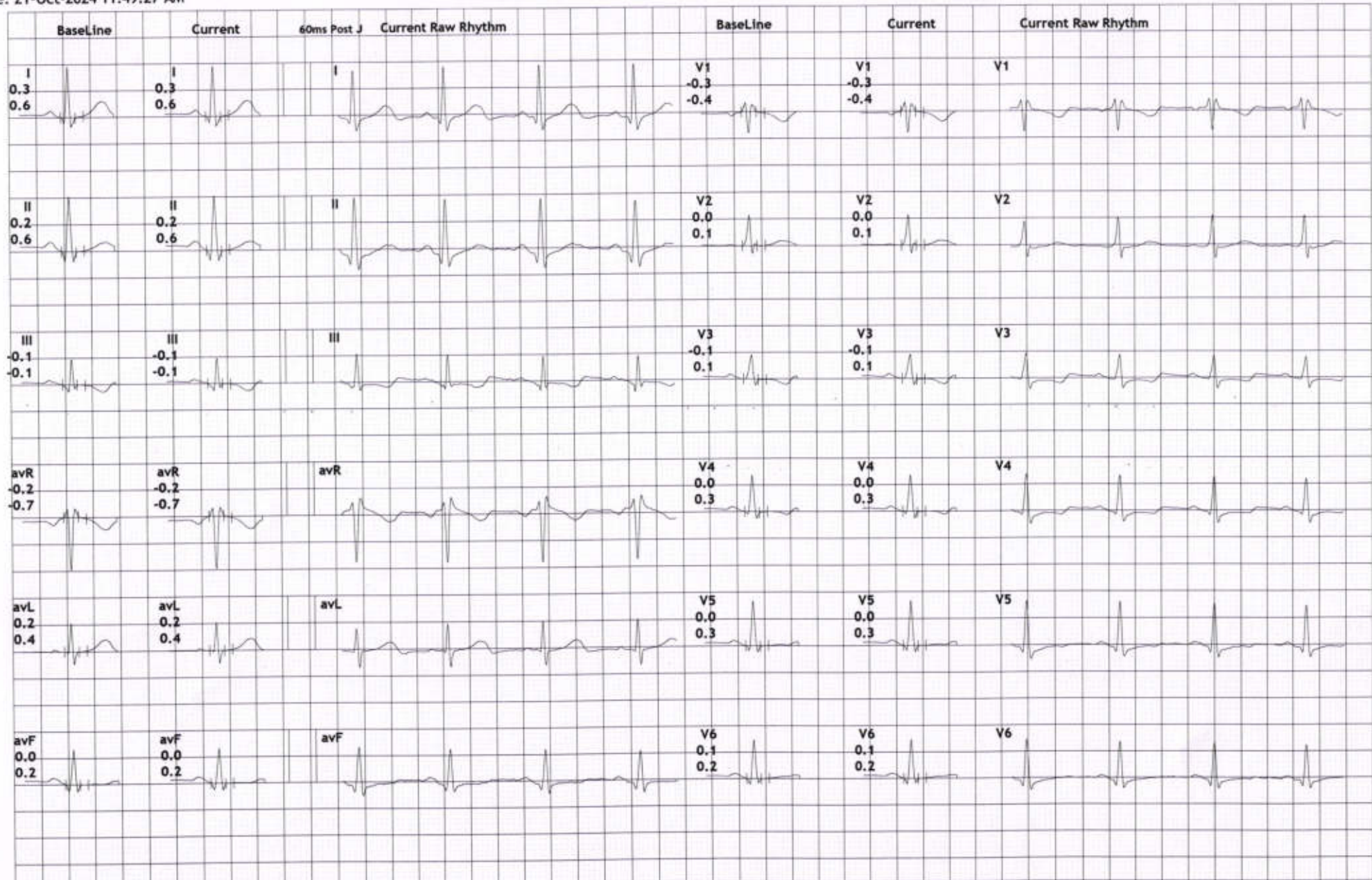
HR: 86 bpm  
METS: 1.0  
BP: 110/70

MpHR: 54% of 158  
Speed: 0.0 mph  
Grade: 0.0%

Raw ECG  
BRUCE  
(1.0-100)Hz

Ex Time 00:53  
BLC :On  
Notch :On

HV  
10.0 mm/mV  
25 mm/Sec.



**Excellas Clinics Pvt Ltd**

B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai  
3454/SINDHU SONAWANE  
62 Yrs/Female  
77 Kg/157 Cms  
Date: 21-Oct-2024 11:49:27 AM

**12 Lead + Comparison**

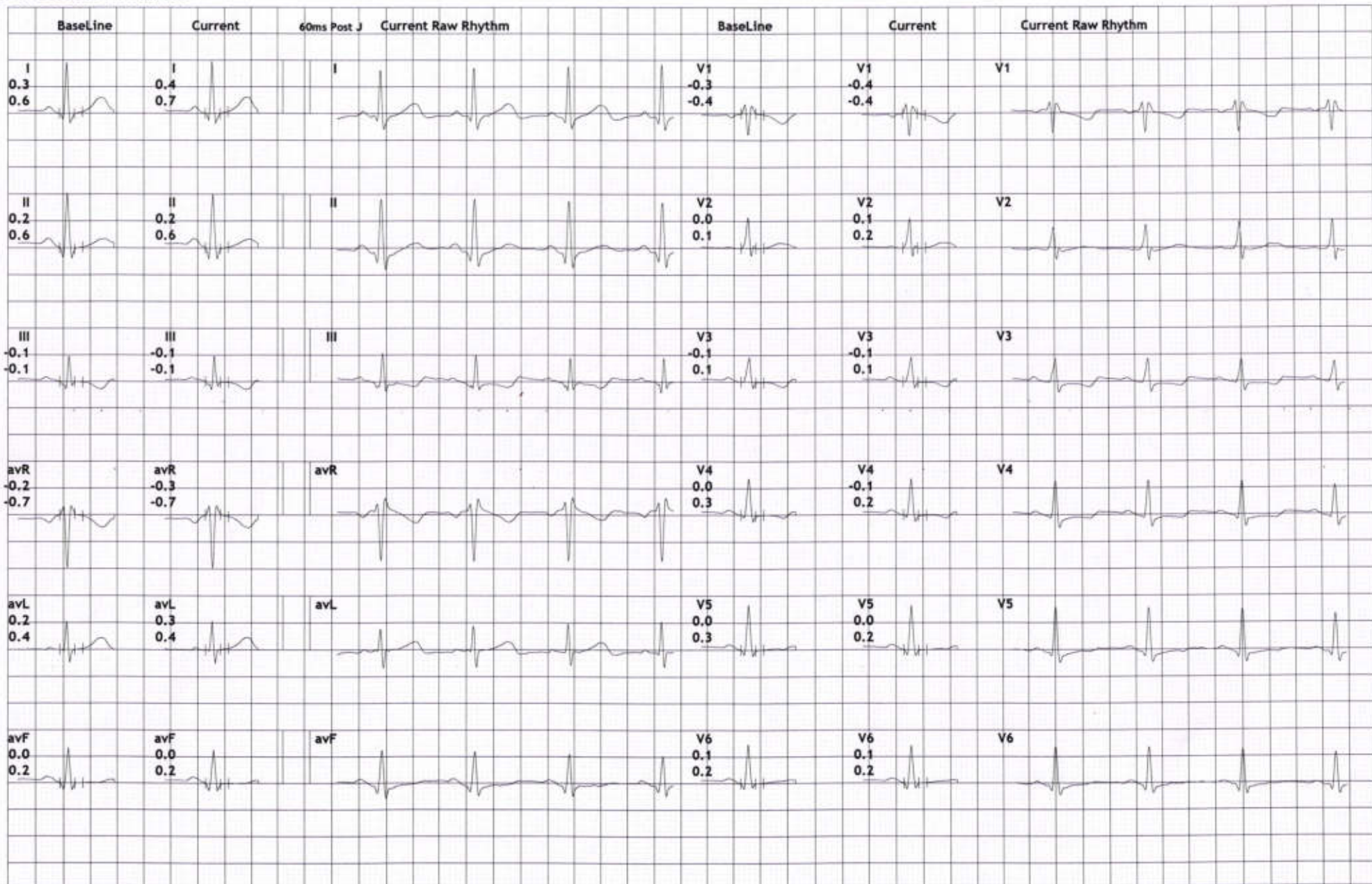
HR: 88 bpm  
METS: 1.0  
BP: 110/70

MPHR:55% of 158  
Speed: 0.0 mph  
Grade: 0.0%

Raw ECG  
BRUCE  
(1.0-100)Hz

Ex Time 00:00  
BLC :On  
Notch :On

ExStrt  
10.0 mm/mV  
25 mm/Sec.



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B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai  
3454/SINDHU SONAWANE  
62 Yrs/Female  
77 Kg/157 Cms  
Date: 21-Oct-2024 11:49:27 AM

**12 Lead + Comparison**

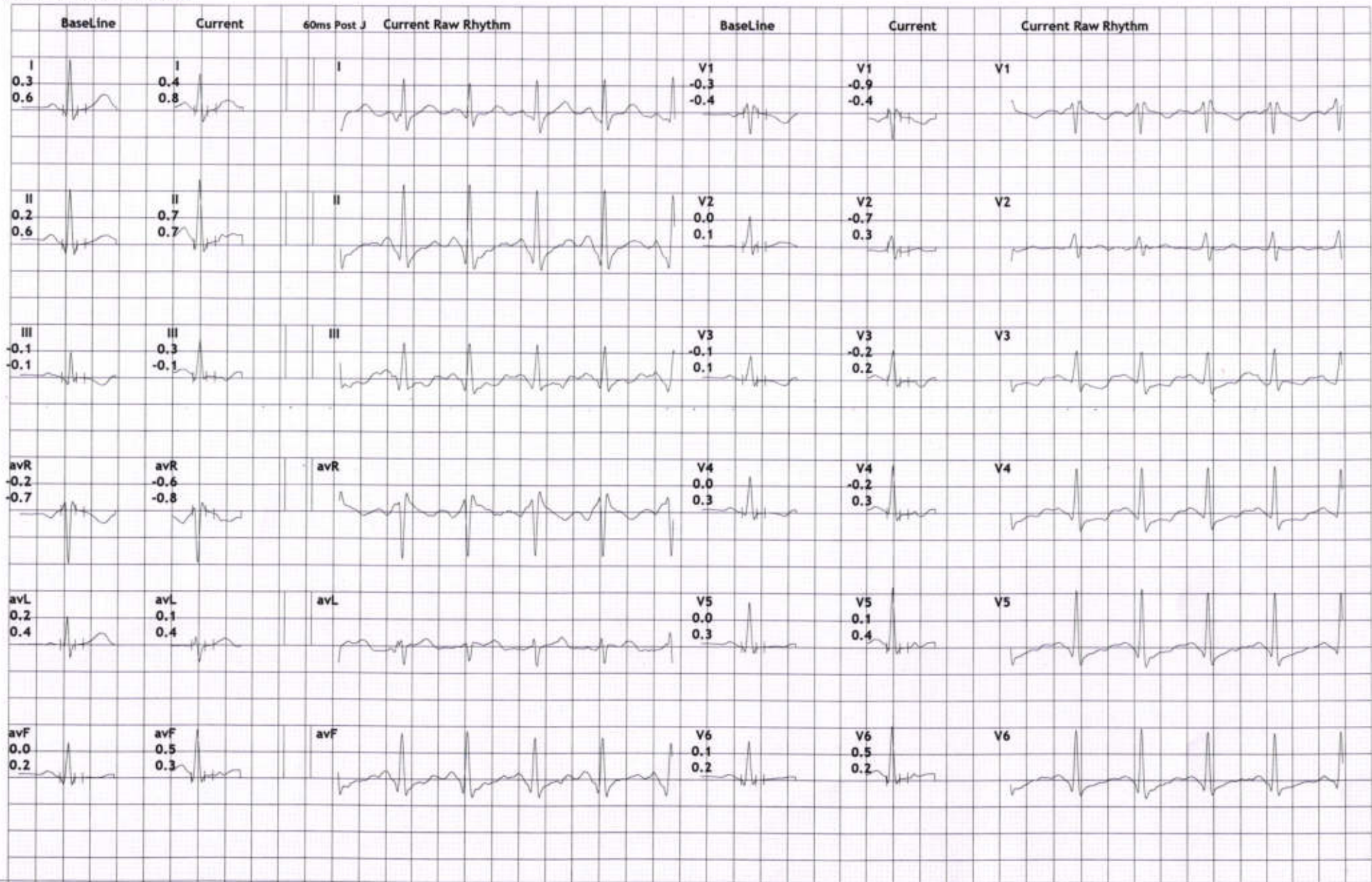
HR: 120 bpm  
METS: 4.7  
BP: 120/80

MpHR: 75% of 158  
Speed: 1.7 mph  
Grade: 10.0%

Raw ECG  
BRUCE  
(1.0-100)Hz

Ex Time 03:00  
BLC :On  
Notch :On

Stage 1 ( 03:00 )  
10.0 mm/mV  
25 mm/Sec.





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B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai  
3454/SINDHU SONAWANE  
62 Yrs/Female  
77 Kg/157 Cms  
Date: 21-Oct-2024 11:49:27 AM

HR: 147 bpm  
METS: 7.1  
BP: 130/80

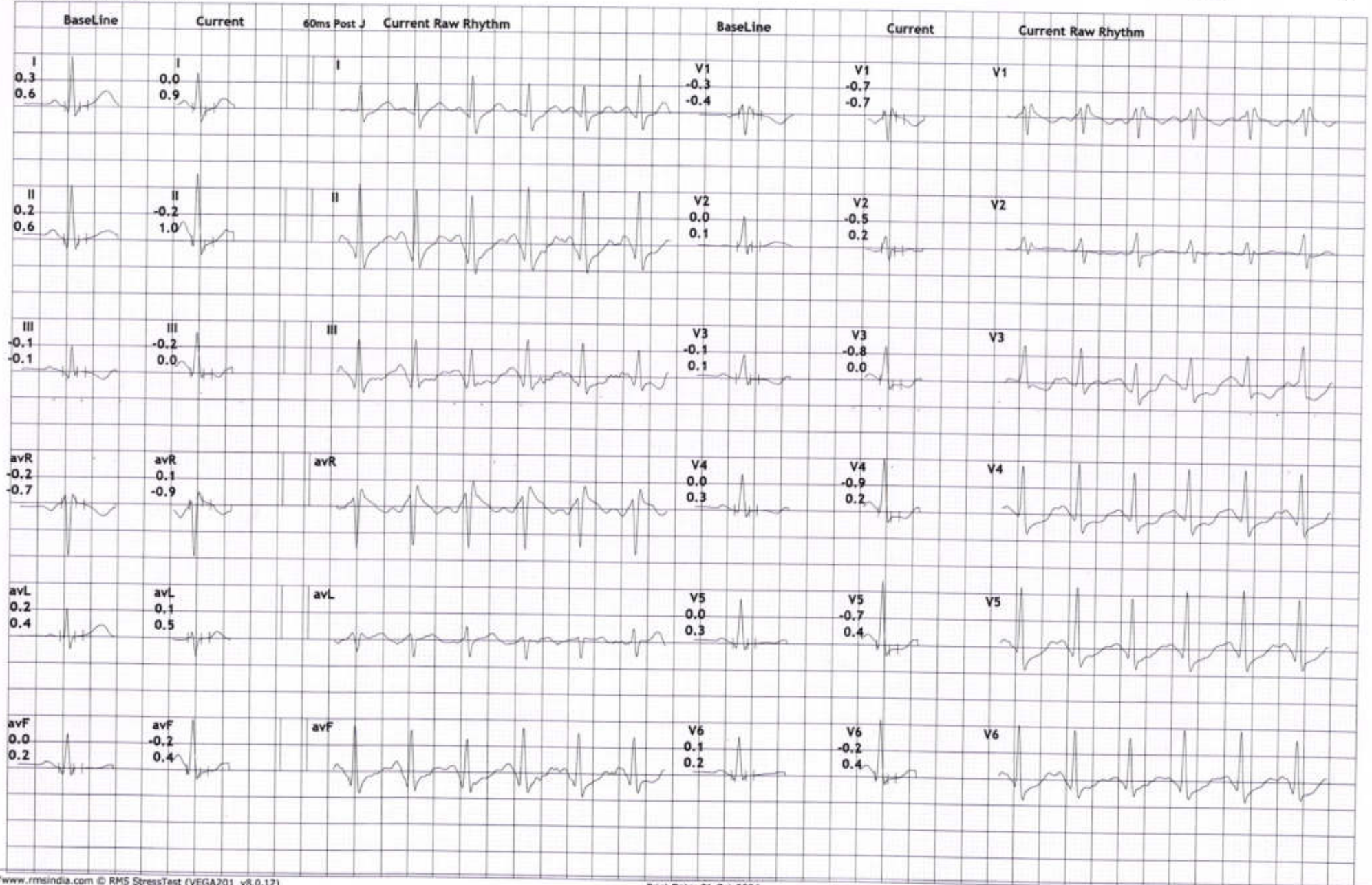
MPHR: 93% of 158  
Speed: 2.5 mph  
Grade: 12.0%

## 12 Lead + Comparison

Raw ECG  
BRUCE  
(1.0-100)Hz

Ex Time 06:00  
BLC :On  
Notch :On

Stage 2 ( 03:00 )  
10.0 mm/mV  
25 mm/Sec.



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B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai

3454/SINDHU SONAWANE

62 Yrs/Female

77 Kg/157 Cms

Date: 21-Oct-2024 11:49:27 AM

HR: 151 bpm

METS: 7.1

BP: 130/80

## 12 Lead + Comparison

MpHR: 95% of 158

Speed: 2.5 mph

Grade: 12.0%

Raw ECG

BRUCE

(1.0-100)Hz

Ex Time 06:00

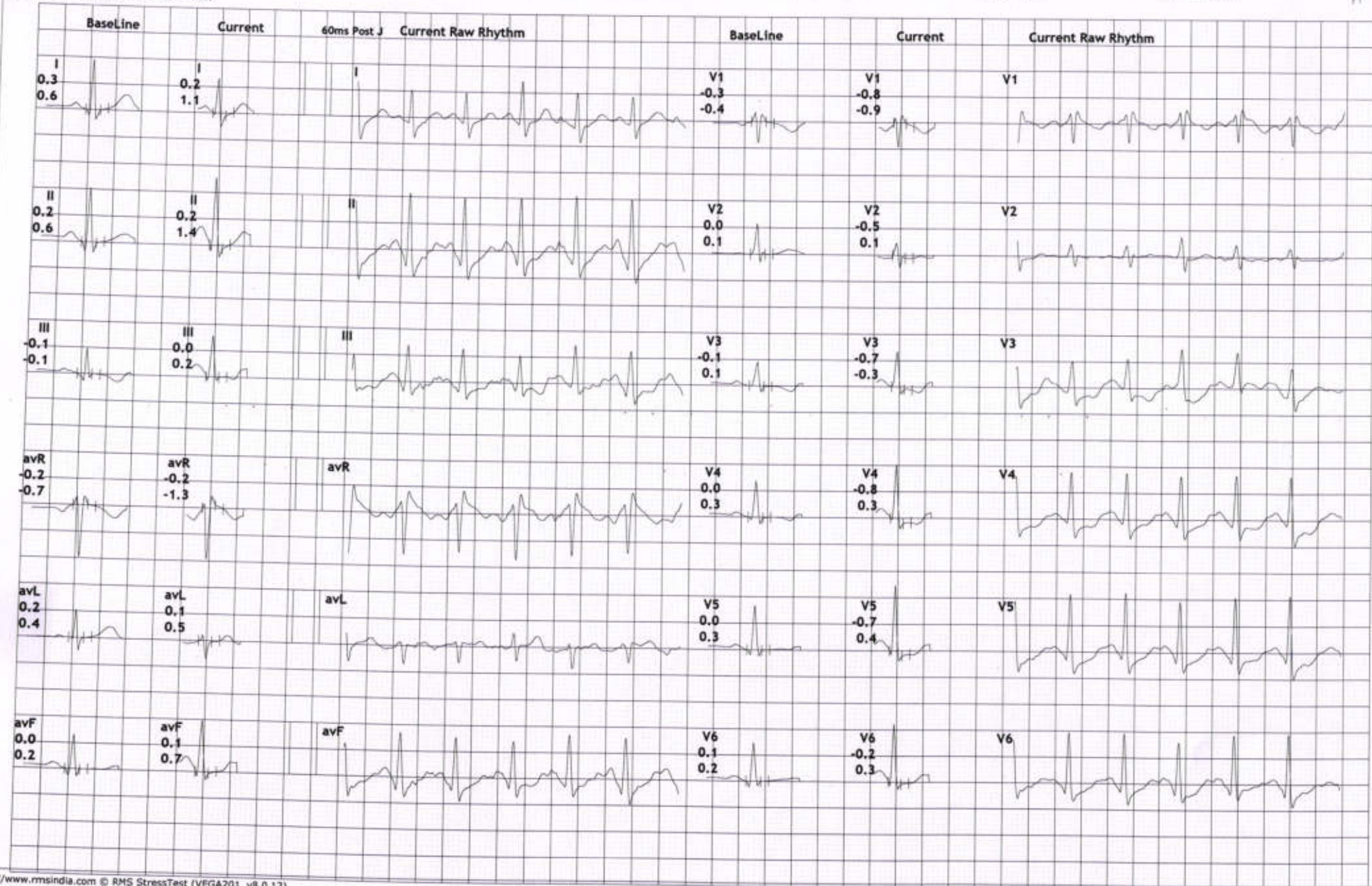
BLC :On

Notch :On

PeakEx

10.0 mm/mV

25 mm/Sec.



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B-1, Vikas Paradise Comm, Below Axis Bank, LBS Marg, Mulund W, Mumbai  
3454/SINDHU SONAWANE  
62 Yrs/Female  
77 Kg/157 Cms  
Date: 21-Oct-2024 11:49:27 AM

HR: 129 bpm  
METS: 1.1  
BP: 140/80

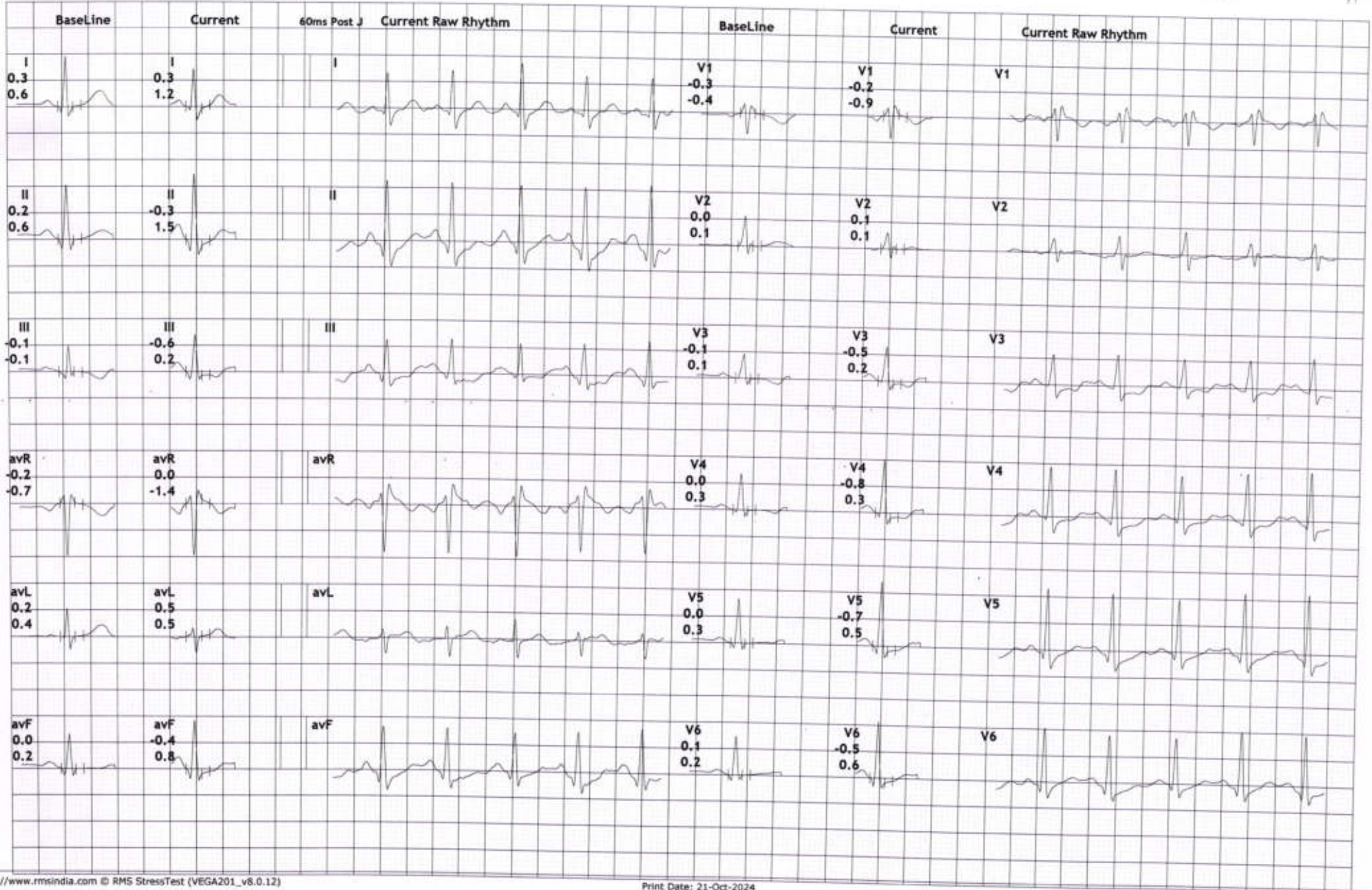
**12 Lead + Comparison**

MpHR: 81% of 158  
Speed: 0.0 mph  
Grade: 0.0%

Raw ECG  
BRUCE  
(1.0-100)Hz

Ex Time 06:00  
BLC :On  
Notch :On

Recovery : ( 01:00 )  
10.0 mm/mV  
25 mm/Sec.



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3454/SINDHU SONAWANE  
62 Yrs/Female  
77 Kg/157 Cms  
Date: 21-Oct-2024 11:49:27 AM

HR: 101 bpm  
METS: 1.0  
BP: 130/80

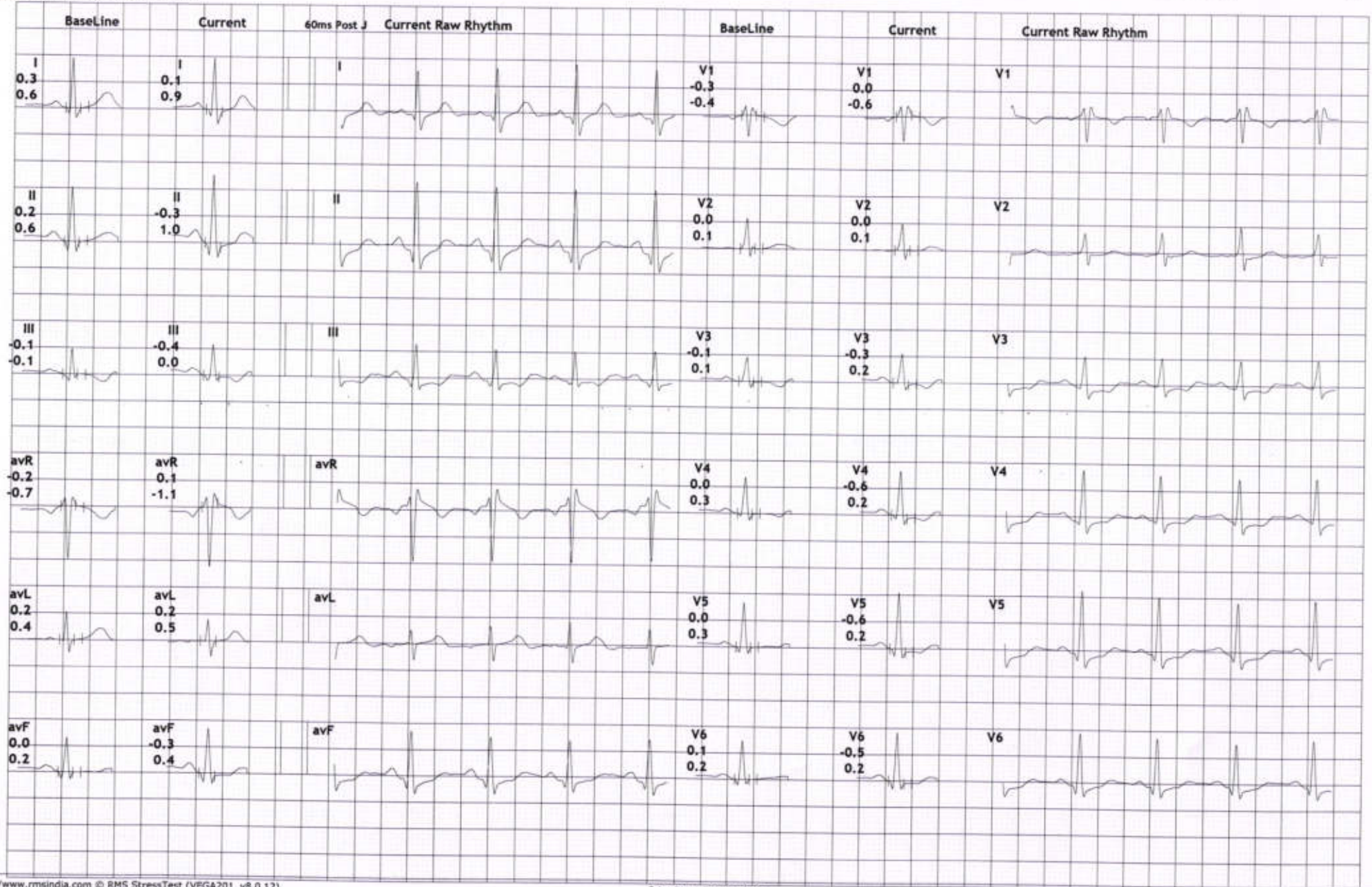
**12 Lead + Comparison**

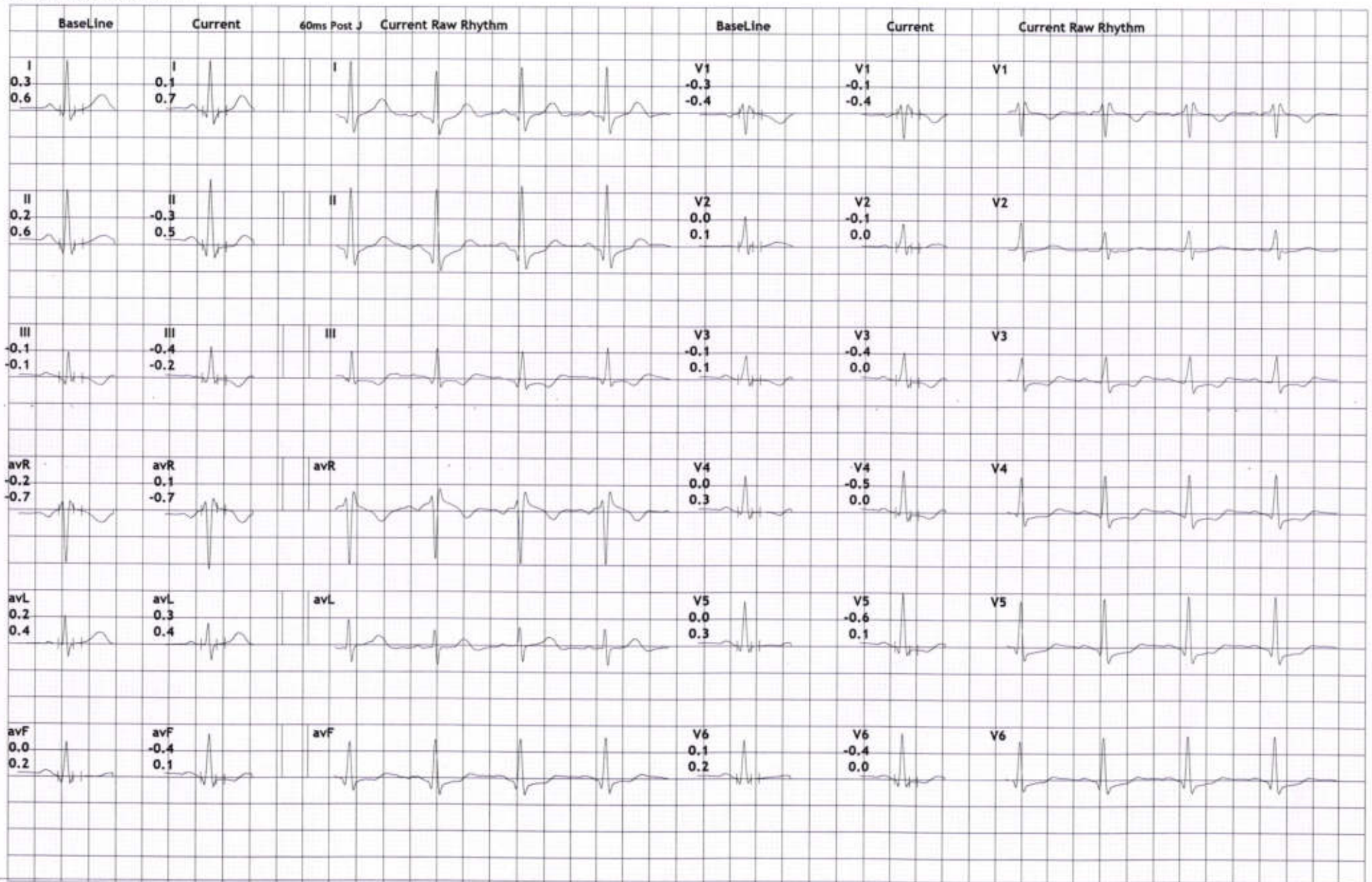
MPHR:63% of 158  
Speed: 0.0 mph  
Grade: 0.0%

Raw ECG  
BRUCE  
(1.0-100)Hz

Ex Time 06:00  
BLC :On  
Notch :On

Recovery : ( 02:00 )  
10.0 mm/mV  
25 mm/Sec.

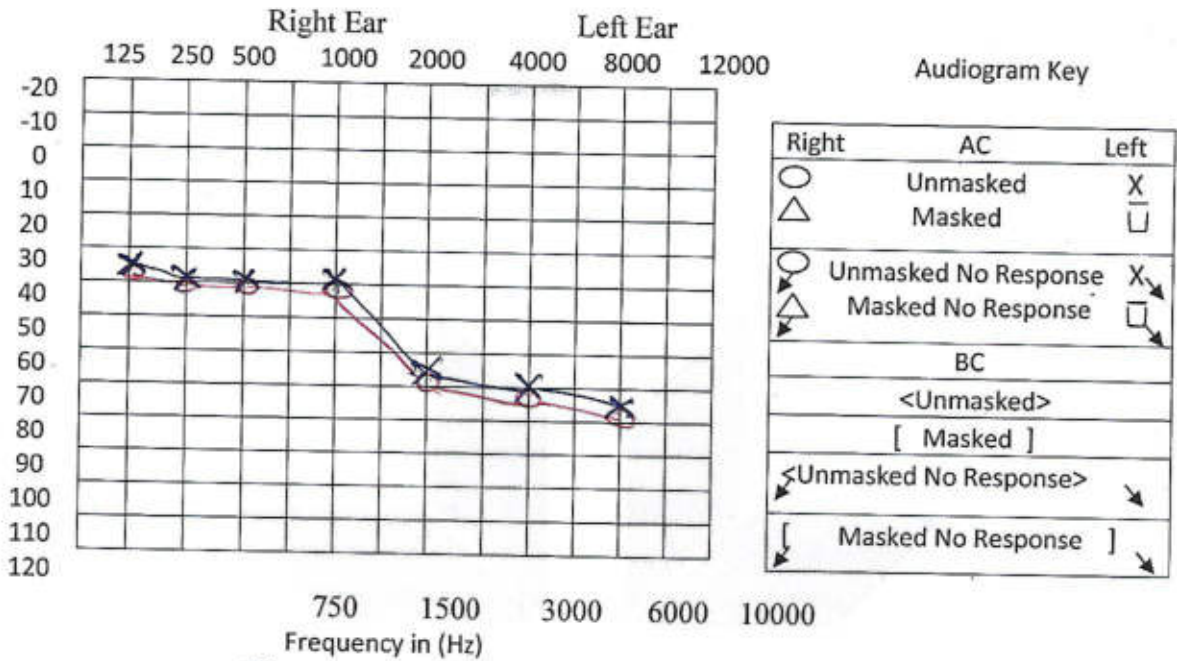






NAME: Mrs. Sindhu Sonawane	AGE/SEX : 62 Yrs Female
REF BY: Mediwheel	DATE: 21/10/2024

**AUDIOGRAM**



Responses: Reliable / Fairly Reliable / Not Reliable      Speech Audiometry

Test Conduction: Satisfactory / Not Satisfactory

If any other specify

Procedure: Standard / Play

Audiological Interpretations:

**MODERATE TO SEVERE HEARING LOSS IN LOW TO HIGH FREQUENCY LEVELS OF BOTH EARS**

**RECOMMENDATION: CARE OF EARS & CONSULT ENT SPECILIST**

EXCELLAS CLINICS PVT. LTD.  
B-1, Vikas Paradise Commercial,  
Below Axis Bank, LBS Marg,  
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Mulund (West), Mumbai - 400080



Excellas Clinics Private Ltd

B1, Vikas Paradise Commercial, Below Axis Bank, LBS Marg, Mulund (W),

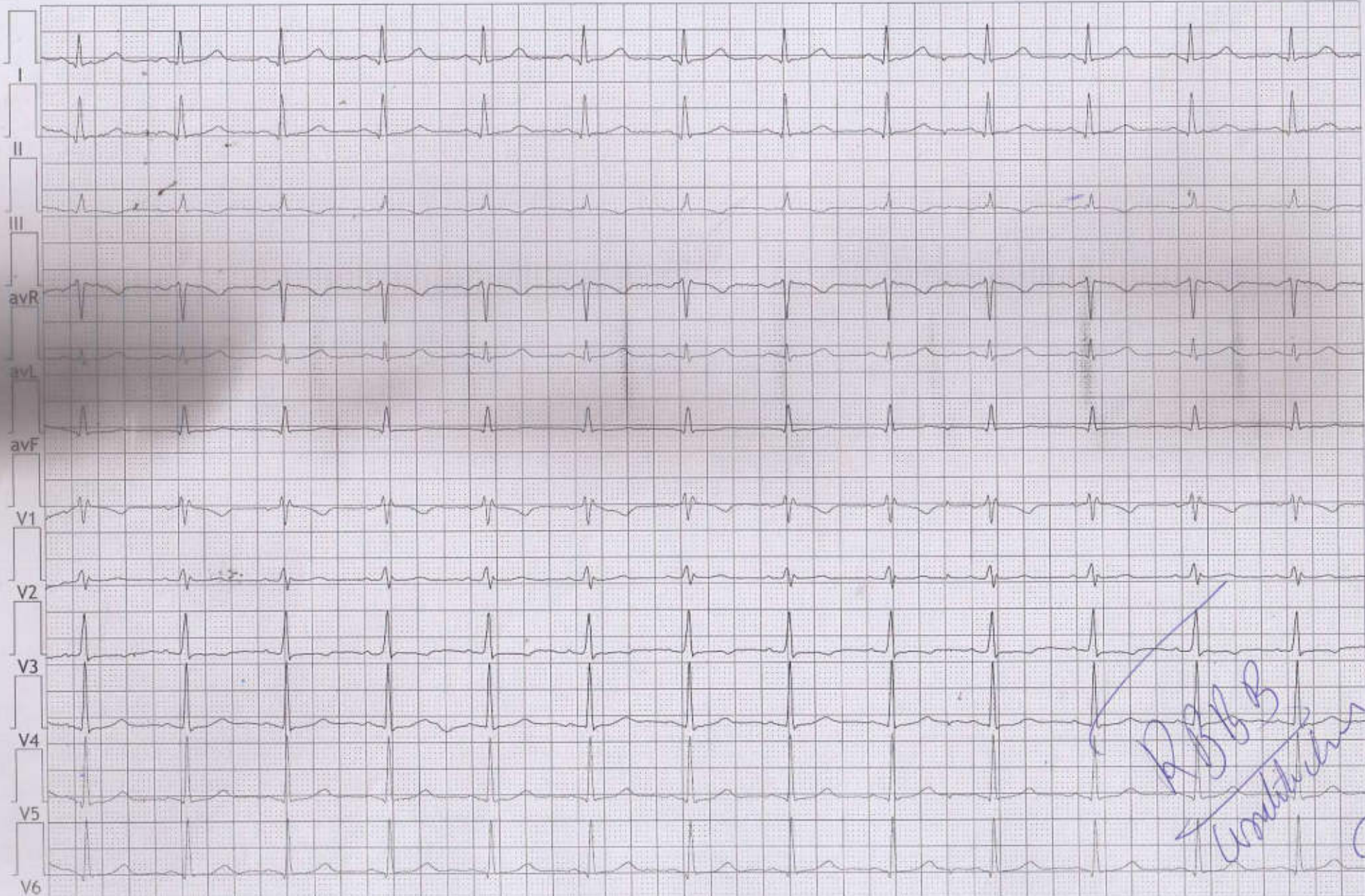
10218/Sindhu Sonawane 62Yrs/Female Kgs/ Cms BP: \_\_\_/\_\_\_ mmHg

Ref.: Test Date: 21-Oct-2024(10:21:14) Notch: 50Hz 0.05Hz - 100Hz 10mm/mV 25mm/Sec

HR: 78 bpm



PR Interval: 136 ms  
QRS Duration: 102 ms  
QT/QTc: 388/443ms  
P-QRS-T Axis: 15 - 43 - 8 (Deg)



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