



26424 261024

Registration ID : 26424

Sample Collection : 26/10/2024 15:28:23

Name : MR. KRUSHNAKUMAR HIVRE

Sample Received : 26/10/2024 15:28:23

Age/Sex : 40 Yrs. / M

Printed : 28/10/2024 16:19:13

Report Released : 28/10/2024 10:49:30

Ref. By : Mediwheel

Sent By : Arcofemi Healthcare Pvt Ltd

**COMPLETE BLOOD COUNT**

Test	Result	Unit	Biological Ref Range
Hemoglobin (SLS) Photometric	: 14.4	g/dL	13-18 g/dL
Total RBC (Electrical Impedence)	: 4.85	10 <sup>6</sup> /μL	3.0-6.0 10 <sup>6</sup> /μL
Hematocrit (PCV) (Calculated)	: 42.6	%	36-54 %
Mean Corpuscular Volume (MCV) (calculated)	: 87.8	fL	78-101 fL
Mean Corpuscular Hemoglobin (MCH) (Calculated)	: 29.7	pg	27-32 pg
Mean Corpuscular Hemoglobin Concentration (MCHC) (Calculated)	: 33.8	g/dL	31.5-34.5 g/dL
Red Cell Distribution Width (RDW- CV) (Electrical Impedence)	: 13.10	%	12-15 %
Total Leucocytes Count (Light Scattering)	: 6180	/cumm	4000-11000 /cumm
<b>Neutrophils</b> (Calculated)	: 49	%	40-75 %
<b>Eosinophils Percentage</b> (Calculated)	: 04	%	1-6 %
Lymphocyte Percentage (Calculated)	: 40	%	20-45 %
Basophils Percentage (Calculated)	: 0	%	0-1 %
Monocytes Percentage (Calculated)	: 07	%	1-10 %
RBC Morphology	: Normocytic, Normochromic		
WBC Morphology	: Normal Morphology		
Platelet Count (Electrical Impedence)	: 309000	/ul	150000-450000 /ul
Platelets on Smear	: Adequate		Adequate
E.S.R	: 11	mm at 1hr	0-20 mm at 1hr

Sample Type: EDTA whole blood (Westergren)

Sample Type : EDTA Whole Blood

Test done with THREE PART CELL COUNTER (Sysmex KX-21)

\*All Samples Processed At Excellas Clinics Mulund Centre .

\*ESR NOT IN NABL scope.

(Collected At: 26/10/2024 15:28:23, Received At: 26/10/2024 15:28:23, Reported At: 28/10/2024 10:49:30)



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





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*Santosh*  
**Dr. Santosh Khairnar**  
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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)	: 89	mg/dL	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: $\geq$ 126 mg/dl
<i>Method: GOD-POD</i>			
GLUCOSE (SUGAR) PP, ( Fluoride Plasma Used )	: 90	mg/dl	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: $\geq$ 200 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

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### HbA1c (Whole Blood)

Test	Result	Unit	Reference Range
HbA1C-Glycosylated Haemoglobin	: 5.20	%	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)	: 102.54	mg/dl	65.1-136.3 mg/dL mg/dl
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EDTA Whole Blood, Method: Calculated

#### Interpretation:

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

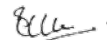
Test	Result	Unit	Biological Ref. Range
Blood Group	: 'O' Rh POSITIVE		

Slide and Tube Agglutination Test

(Collected At: 26/10/2024 15:28:23, Received At: 26/10/2024 15:28:23, Reported At: 28/10/2024 10:50:23)

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Ref. By : Mediwheel	Report Released : 28/10/2024 10:52:20
Sent By : Arcofemi Healthcare Pvt Ltd	

**LIPID PROFILE**

Test	Result	Unit	Biological Ref. Range
Total Cholesterol	: 184	mg/dl	Desirable: <200 Borderline high = 200-239 High: > 239
<i>Serum, Method: CHOD-PAP</i>			
S. Triglyceride	: 125	mg/dl	Desirable: <161 Borderline High: 161 - 199 High: > 200 - 499/ Very High:>499
<i>Serum, Method: GPO-Trinder</i>			
HDL Cholesterol	: 39	mg/dl	35.3-79.5 mg/dl
<i>serum,Direct method</i>			
LDL Cholesterol	: 120.00	mg/dl	Optimal: <100; Near Optimal: 100-129; Borderline High: 130-159; High: 160-189; Very high: >190
<i>Serum, (Calculated)</i>			
VLDL Cholesterol	: 25.0	mg/dl	5-30 mg/dl
<i>Serum, Method: Calculated</i>			
LDL/HDL Ratio	: 3.1		Optimal: <2.5 Near Optimal: 2.5-3.5 High >3.5
<i>Serum, Method: Calculated</i>			
TC/HDL Ratio	: 4.7		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>	: 0.63	mg/dl	0-2.0 mg/dl
S. Bilirubin (Direct) <i>Serum, Method: Diazo (walter &amp; Gerarde)</i>	: 0.11	mg/dl	0-0.4 mg/dl
S. Bilirubin (Indirect) <i>Serum, Method: Calculated</i>	: 0.52	mg/dl	0.10-1.0 mg/dl
Aspartate Transaminase (AST/SGOT) <i>Serum, Method: UV Kinetic with P5P</i>	: 20.7	IU/L	0-35 IU/L
Alanine Transaminase (ALT/SGPT) <i>Serum, Method: UV Kinetic with P5P</i>	: 21.0	IU/L	0-45 IU/L
S. Alkaline Phosphatase <i>Serum, Method: IFCC with AMP buffer</i>	: 64	IU/L	53-128 IU/L
Total Proteins <i>Serum, Method: Biuret</i>	: 8.0	gm/dl	6.4-8.3 gm/dl
S. Albumin <i>Serum, Method: BCG</i>	: 4.5	gm/dl	3.5-5.2 gm/dl
S. Globulin <i>Serum, Method: Calculated</i>	: 3.5	gm/dl	2.3-3.5 gm/dl
A/G Ratio <i>Serum, Method: Calculated</i>	: 1.29		0.90-2.00
Gamma GT <i>Serum, Method: G glutamyl carboxy nitroanilide</i> <i>Test Done on - Automated Biochemistry Analyzer (EM 200).</i>	: 29	U/L	0-55 U/L

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**BLOOD UREA NITROGEN (BUN)**

Test	Result	Unit	Biological Ref. Range
Urea	: 16.93	mg/dl	19-45 mg/dl

Serum, Method: Urease - GLDH

Blood Urea Nitrogen : 7.91 mg/dl      5-18 mg/dl

Test Done on - Automated Biochemistry Analyzer (EM 200)

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**SERUM CREATININE**

Test	Result	Unit	Biological Ref. Range
S. Creatinine	: 0.97	mg/dl	0.7-1.3 mg/dl

Serum, Method: Enzymatic

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

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**SERUM URIC ACID**

Test	Result	Unit	Biological Ref. Range
S. Uric Acid	: 5.94	mg/dl	3.5-7.2 mg/dl

Serum, Method: Uricase - POD

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

(Collected At: 26/10/2024 15:28:23, Received At: 26/10/2024 15:28:23, Reported At: 28/10/2024 10:52:56)



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**BUN GREAT RATIO (BCR)**

Test	Result	Unit	Biological Ref. Range
BUN/Creatinine ratio	: 8.15		5-20

*Serum, Method: Calculated*

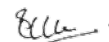
**NOTE:**

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

*(Collected At: 26/10/2024 15:28:23, Received At: 26/10/2024 15:28:23, Reported At: 28/10/2024 10:54:33)*

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Sent By : Arcofemi Healthcare Pvt Ltd	

**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	: 8.66	µg/dl	5.1-14.1 µg/dl
<i>Serum, Method: CLIA</i>			
TSH (Thyroid Stimulating Hormone)	: 0.62	µIU/ml	0.27-5.3 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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**PROSTATE SPECIFIC ANTIGEN**

Test	Result	Unit	Biological Ref. Range
PSA - TOTAL	: 0.33	ng/ml	0- 4 ng/ml
Serum, Method: CLIA			

**NOTE :**

Prostate specific antigen is a seminal fluid protein produced by normal and malignant epithelial cells of prostate gland and is recognized as a tumour marker for evaluation of prostate cancer activity.

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

S.PSA level is useful in detection of cancer of prostate gland and in detection of recurrence of prostate cancer after radical prostatectomy. Serum PSA levels may also be elevated in conditions like BPH, UTI, Digital rectal examination, Transurethral ultrasonography. Confirmation of prostate cancer can be done by transrectal ultrasonography and prostate biopsy.

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Ref. By	: Mediwheel	Sent By	: Arcofemi Healthcare Pvt Ltd	Report Released	: 26/10/2024 16:44:59

**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)	: 5.0		4.5 - 8.0
Specific Gravity	: 1.005		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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**CLINICAL PROFILE : NO COMPLAINTS.**

**Mild rotation present.**

**Mild S shape upper thoracic spine seen, ? positional ? mild scoliosis.**

Both the lung fields appear normal.

Cardiac silhouette is within normal limits.

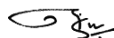
Bilateral hilar shadows appear normal.

Bilateral costophrenic angles appear normal.

Soft tissues appear normal.

**IMPRESSION:**

**Mild S shape upper thoracic spine seen, ? positional ? mild scoliosis.**



**Dr. Raj Shah**  
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2019/05/3609





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MR KRUSHNAKUMAR HIVRE AGE 40 YRS MALE R32 CHEST,PA 10/26/2024 11:36 AM

EXCELLAS CLINICS, DOMBIVILI (E)

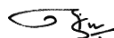
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**USG ABDOMEN & PELVIS - MALE**

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**Liver:-** is normal in size(13.8 cm) and shows normal parenchymal echogenicity. No focal or diffuse lesion is seen. The portal and hepatic veins are normal. No IHBR dilatation seen.

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

Visualised **CBD** is normal.

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

**Spleen:-** is normal in size (9.9 cm) and reflectivity. No focal lesion is seen.

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

Right kidney – 10.1 x 3.9 cms

Left kidney – 10.3 x 4.3 cms

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

**Prostate:-** is normal in size, shape and echotexture.  
No focal lesions.

No ascites is seen. No significant lymphadenopathy is seen.  
Excessive bowel gases.

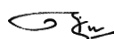
**IMPRESSION:**

- **No significant abnormality is seen.**

*Thanks for the Referral*

(Collected At: 26/10/2024 15:28:23, Received At: 26/10/2024 15:28:23, Reported At: 28/10/2024 11:36:43)

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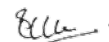
Sent By : Arcofemi Healthcare Pvt Ltd

**OPHTHALMIC EVALUATION**

<b>Examination</b>	<b>Right Eye</b>	<b>Left Eye</b>
Distance Vision	6/9	6/9
Near Vision	N/6	N/6
Color Vision	Normal	
Remarks	Normal	

(Collected At: 26/10/2024 15:28:23, Received At: 26/10/2024 15:28:23, Reported At: 28/10/2024 11:31:36)

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2000/08/2926

## MEDICAL EXAMINATION REPORT

Name <input checked="" type="checkbox"/> Mr./Mrs./ Miss	Krushnakumar Hirve	
Sex	<input checked="" type="checkbox"/> Male/ Female	
Age (yrs.) 40	UHID :	
Date	26 / 10 / 2024	Bill No. :
Marital Status	<input checked="" type="checkbox"/> Married/ No. of Children / Unmarried/ Widow :	
Present Complaints	No	
Past Medical : History Surgical :	No .	
Personal History	Diet : Veg <input type="checkbox"/> / Mixed <input checked="" type="checkbox"/> : Addiction : Smoking <input type="checkbox"/> / Tobacco Chewing <input type="checkbox"/> / Alcohol <input type="checkbox"/> / Any Other No .	
Family History	Father = Mother = Siblings =	HT / DM / IHD / Stroke / Any Other / Mother = HT / DM / IHD / Stroke / Any Other / Siblings = HT / DM / IHD / Stroke / Any Other / No .
History of Allergies	Drug Allergy No Any Other	
History of Medication	For HT / DM / IHD / Hypothyroidism Any Other No	
On Examination (O/E)	G. E. : fair R. S. : A&B&E C. V. S. : 5/5 (N) C. N. S. : Conscious P/A : soft non-tender Any Other Positive Findings :	



Height	165.5 cms	Weight	64.6 Kgs
BMI	23.4		
Pulse (per min.)	72mm	Blood Pressure ( mm of Hg)	120/80 mm of Hg
<b>Gynaecology</b>			
Examined by	Dr.		
Complaint & Duration			
Other symptoms (Mict, bowels etc)			
Menstrual History	Menarche _____ Cycle _____ Loss _____ Pain _____ I.M.B. _____ P.C.B. _____ L.M.P. _____ Vaginal Discharge _____ Cx. Smear _____ Contraception _____		
Obstetric History			
Examination :			
Breast			
Abdomen			
P.S.			
P.V.			
<b>Gynaecology Impression &amp; Recommendation</b>			
<b>Recommendation</b>			
<b>Physician Impression</b>			
<b>Examined by :</b>	- Overweight = To Reduce Weight - Underweight = To Increase Weight		

DAWADI, SONAR PADA DOMBIVLI.

Mr. KRUSHNAKUMAR HIVRE  
 Age/Sex : 40/M  
 Ref. by : MEDIWHEEL  
 Indication1 :  
 Indication2 :  
 Indication3 :

ID : 29  
 Ht/Wt : 165/64  
 Recorded : 26-10-2024 13:30

TREADMILL TEST SUMMARY REPORT  
 Protocol: BRUCE  
 History: NIL  
 Medication1 :  
 Medication2 :  
 Medication3 :

PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100	II	ST LEVEL (mm) V2	V5	METS
SUPINE					80	120/80	96	0.0	0.7	0.4	
HYPERVENT	0:01	0:01			79	120/80	94	0.3	0.7	0.4	
STANDING					69	120/80	82	0.4	0.9	0.4	
STAGE 1	2:59	2:59	2.70	10.00	115	130/80	149	0.1	0.3	0.2	4.80
Angina	5:00	2:00	4.00	12.00	127	140/80	177	-0.2	0.3	0.0	6.34
Angina	7:15	2:09	5.40	14.00	146	150/80	219	0.0	0.5	-0.4	9.19
STAGE 3	7:20	2:14	5.40	14.00	149	150/80	223	0.1	0.4	-0.2	9.27
PEAK EXER	7:38	0:08			158	150/80	237	-0.4	0.3	0.0	10.18

**RESULTS**

Exercise Duration : 7:38 Minutes  
 Max Heart Rate : 158 bpm 87 % of target heart rate 180 bpm  
 Max Blood Pressure : 150/80 mmHg  
 Max Work Load : 10.18 METS  
 Reason of Termination : Achieved THR

**IMPRESSIONS**

GOOD EFFORT TOLERANCE, NORMAL IONOTROPIC AND CHRONOTROPIC RESPONSE.  
 NO ANGINA/ARRHYTHMIA'S/LV DYSFUNCTION. NO SIGNIFICANT ST CHANGES AT PEAK OF TEST.  
 TEST IS NEGATIVE FOR EXERCISE INDUCED REVERSABLE ISCHEMIA.

(N) TMT

**Dr. VINAY HIRAY**  
 DNB MED  
 Reg. No. 2012/09/2681



# EXCELLAS CLINICS-DOMBIVLI

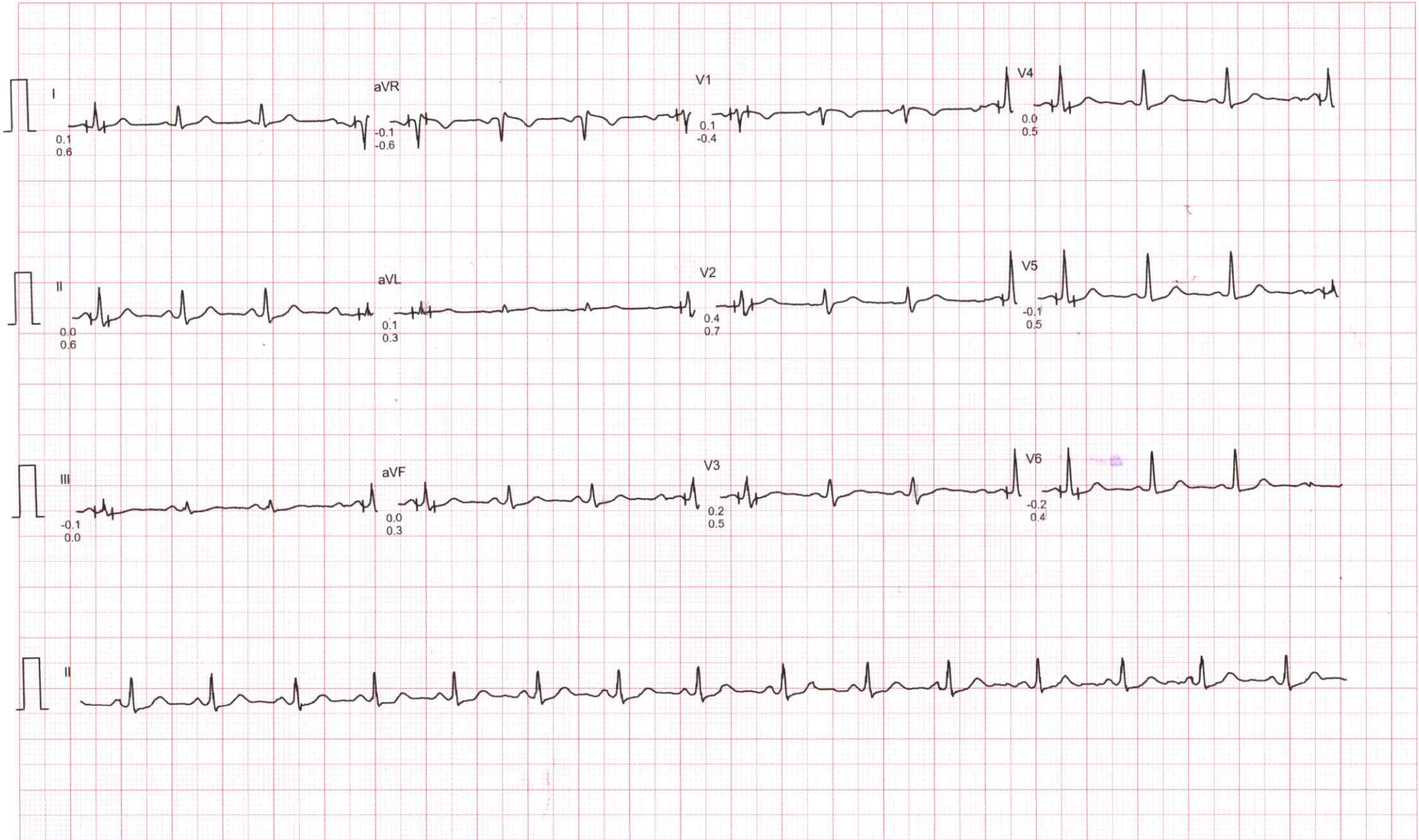
Mr. KRUSHNAKUMAR HIVRE  
I.D. : 29  
AGE/SEX : 40/M  
RECORDED : 26-10-2024 13:30

RATE : 92 BPM  
B.P. : 130/80 mmHg

BRUCE  
RECOVERY  
PHASE TIME : 2:59

ST @ 10mm/mV  
80ms PostJ  
SPEED : 0.0 Km./Hr.  
GRADE : 0.0 %

LINKED MEDIAN





# EXCELLAS CLINICS-DOMBIVLI

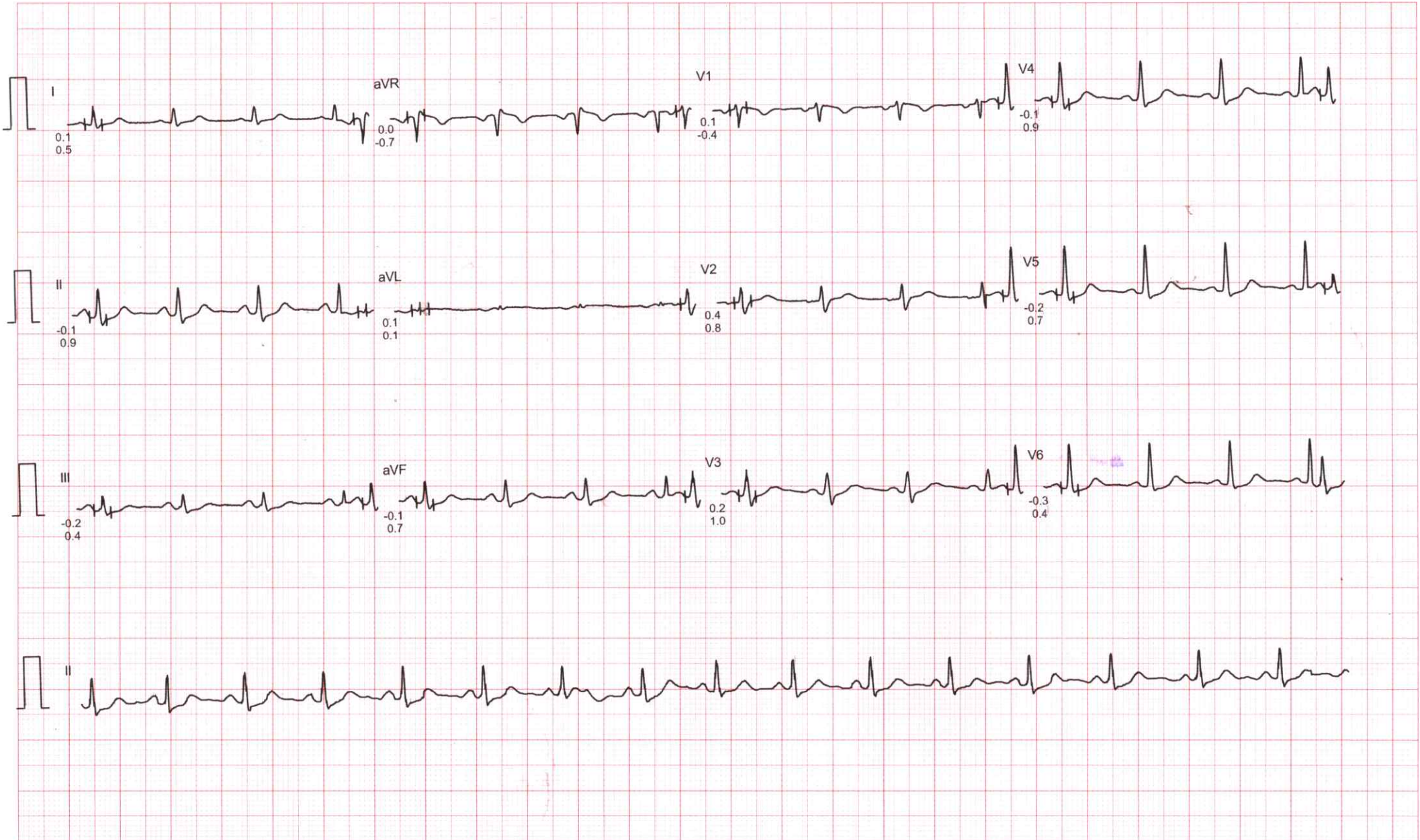
Mr. KRUSHNAKUMAR HIVRE  
I.D. : 29  
AGE/SEX : 40/M  
RECORDED : 26-10-2024 13:30

RATE : 96 BPM  
B.P. : 140/80 mmHg

BRUCE  
RECOVERY  
PHASE TIME : 1:59

ST @ 10mm/mV  
80ms PostJ  
SPEED : 0.0 Km./Hr.  
GRADE : 0.0 %

LINKED MEDIAN





# EXCELLAS CLINICS-DOMBIVLI

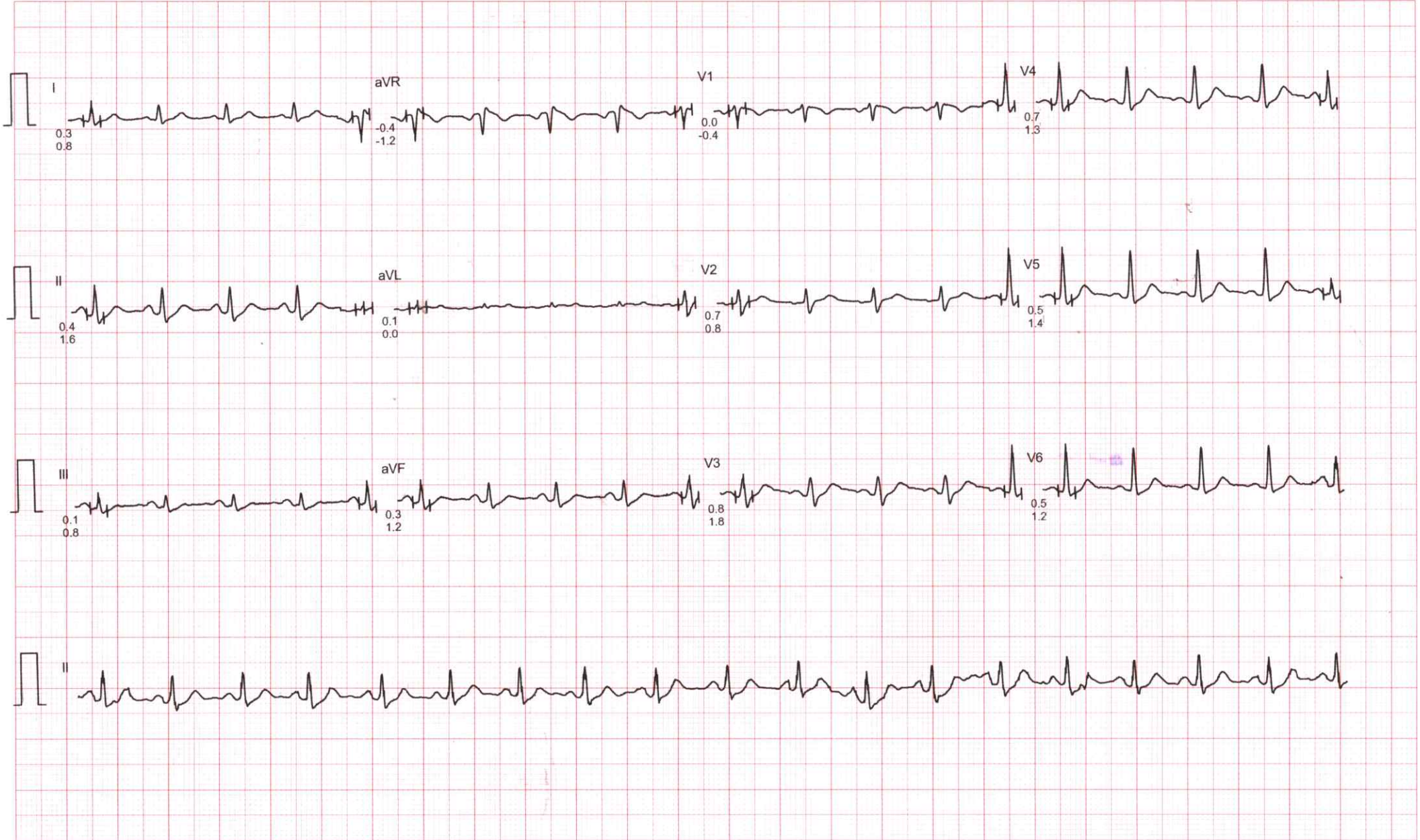
Mr. KRUSHNAKUMAR HIVRE  
I.D. : 29  
AGE/SEX : 40/M  
RECORDED : 26-10-2024 13:30

RATE : 113 BPM  
B.P. : 150/80 mmHg

BRUCE  
RECOVERY  
PHASE TIME : 0:59

ST @ 10mm/mV  
80ms PostJ  
SPEED : 0.0 Km./Hr.  
GRADE : 0.0 %

LINKED MEDIAN





# EXCELLAS CLINICS-DOMBIVLI

Mr. KRUSHNAKUMAR HIVRE  
I.D. : 29  
AGE/SEX : 40/M  
RECORDED : 26-10-2024 13:30

RATE : 158 BPM  
B.P. : 150/80 mmHg

BRUCE  
PEAK EXER  
PHASE TIME : 7:38  
STAGE TIME : 0:08

ST @ 10mm/mV  
80ms PostJ  
SPEED : 6.7 Km./Hr.  
GRADE : 16.0 %

LINKED MEDIAN





# EXCELLAS CLINICS-DOMBIVLI

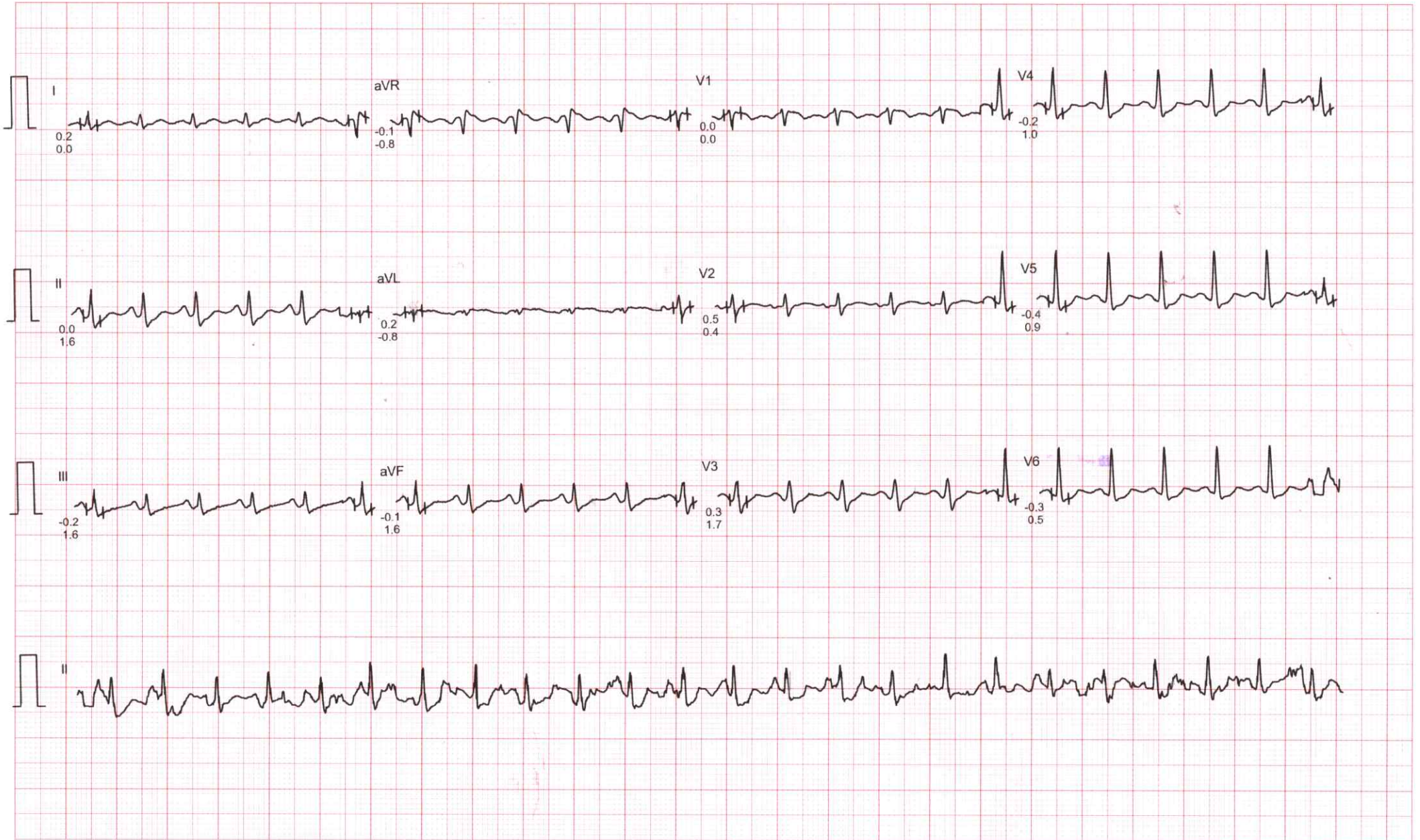
Mr. KRUSHNAKUMAR HIVRE  
I.D. : 29  
AGE/SEX : 40/M  
RECORDED : 26-10-2024 13:30

RATE : 146 BPM  
B.P. : 150/80 mmHg

BRUCE  
EXERCISE 3 (Angina)  
PHASE TIME : 7:15  
STAGE TIME : 2:09

ST @ 10mm/mV  
80ms PostJ  
SPEED : 5.4 Km./Hr.  
GRADE : 14.0 %

LINKED MEDIAN





# EXCELLAS CLINICS-DOMBIVLI

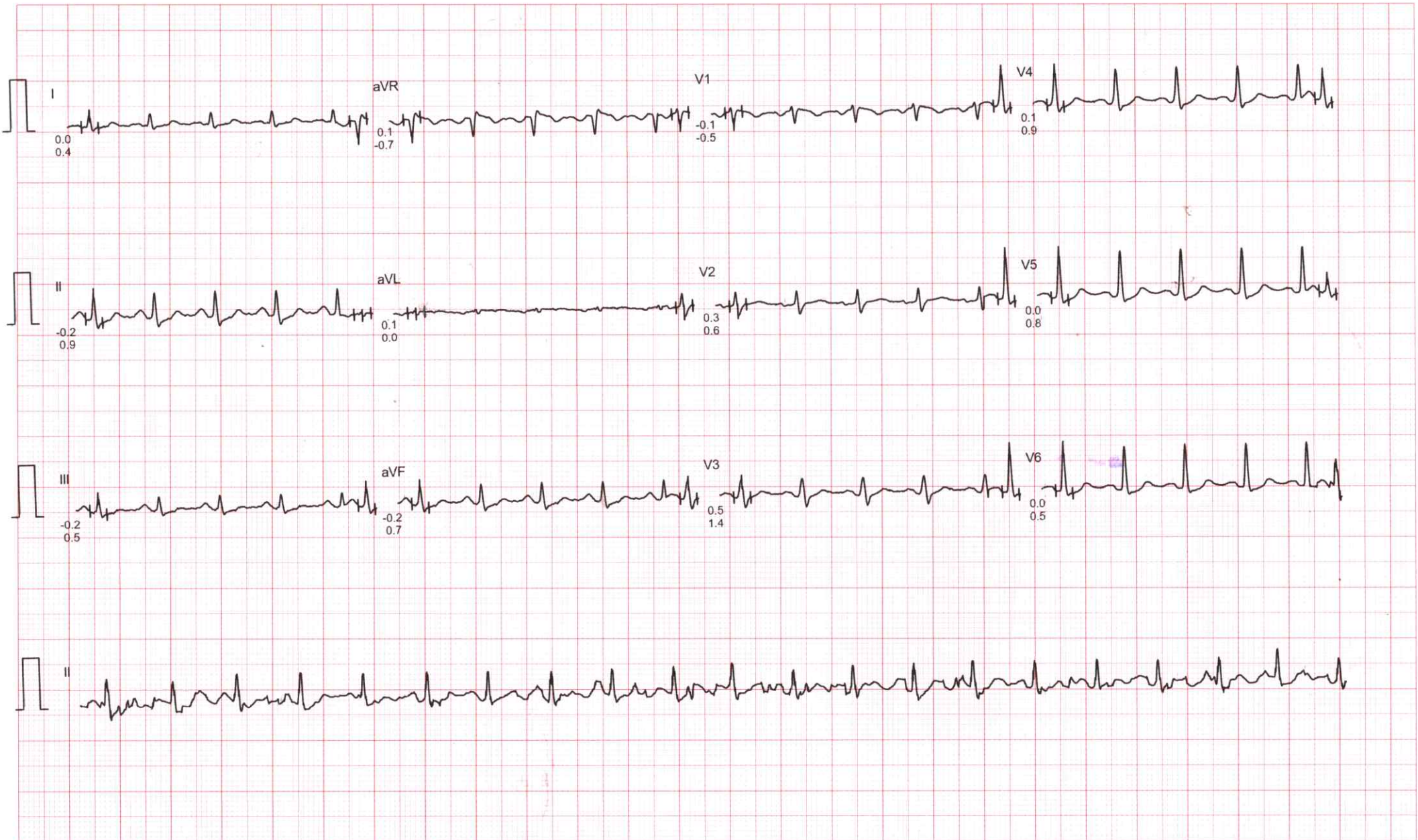
Mr. KRUSHNAKUMAR HIVRE  
I.D. : 29  
AGE/SEX : 40/M  
RECORDED : 26-10-2024 13:30

RATE : 127 BPM  
B.P. : 140/80 mmHg

BRUCE  
EXERCISE 2 (Angina)  
PHASE TIME : 5:00  
STAGE TIME : 2:00

ST @ 10mm/mV  
80ms PostJ  
SPEED : 4.0 Km./Hr.  
GRADE : 12.0 %

LINKED MEDIAN





# EXCELLAS CLINICS-DOMBIVLI

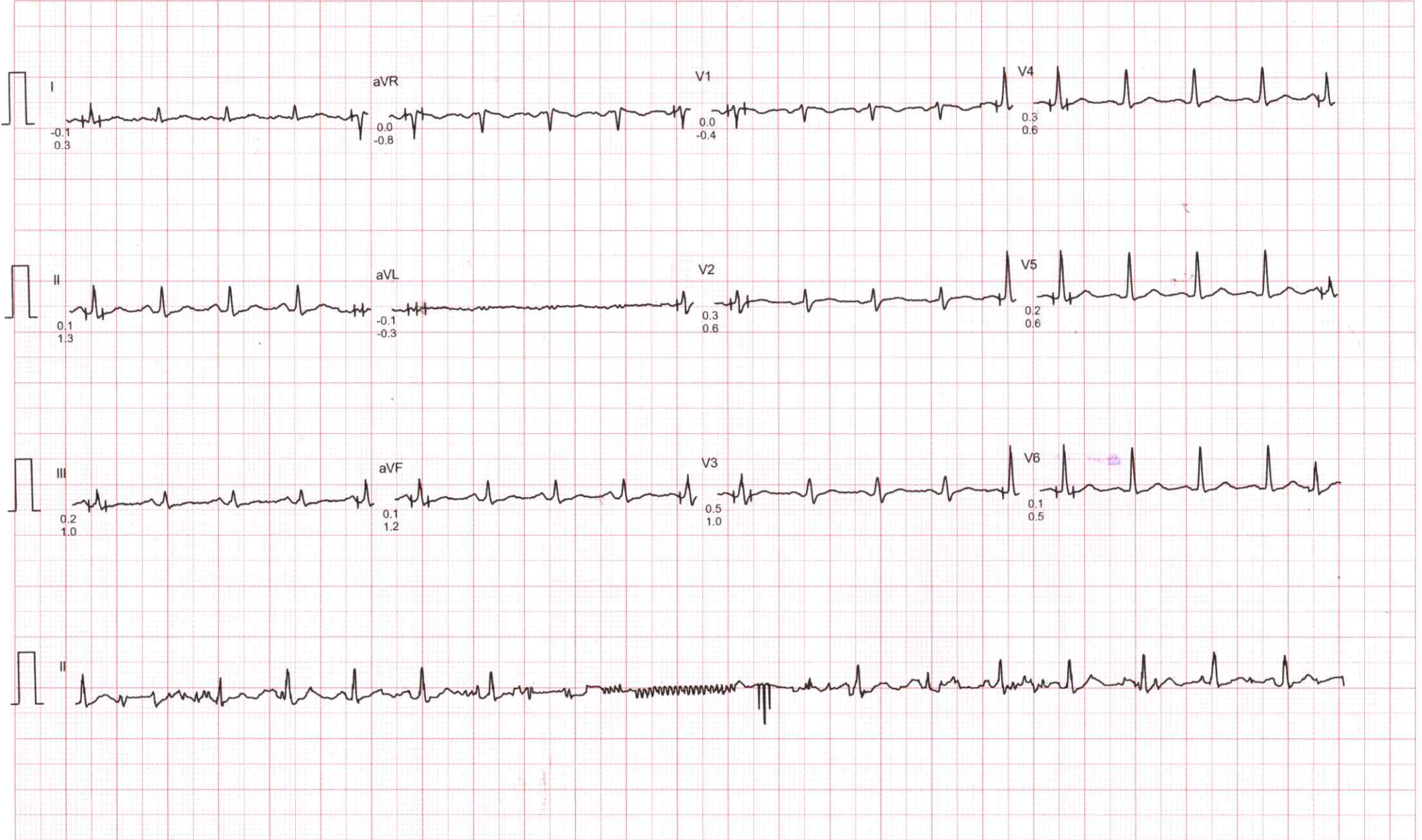
Mr. KRUSHNAKUMAR HIVRE  
I.D. : 29  
AGE/SEX : 40/M  
RECORDED : 26-10-2024 13:30

RATE : 115 BPM  
B.P. : 130/80 mmHg

BRUCE  
EXERCISE 1  
PHASE TIME : 2:59  
STAGE TIME : 2:59

ST @ 10mm/mV  
80ms PostJ  
SPEED : 2.7 Km./Hr.  
GRADE : 10.0 %

LINKED MEDIAN





# EXCELLAS CLINICS-DOMBIVLI

STANDING  
PRETEST

ST @ 10mm/mV  
80ms PostJ

Mr. KRUSHNAKUMAR HIVRE

I.D. : 29

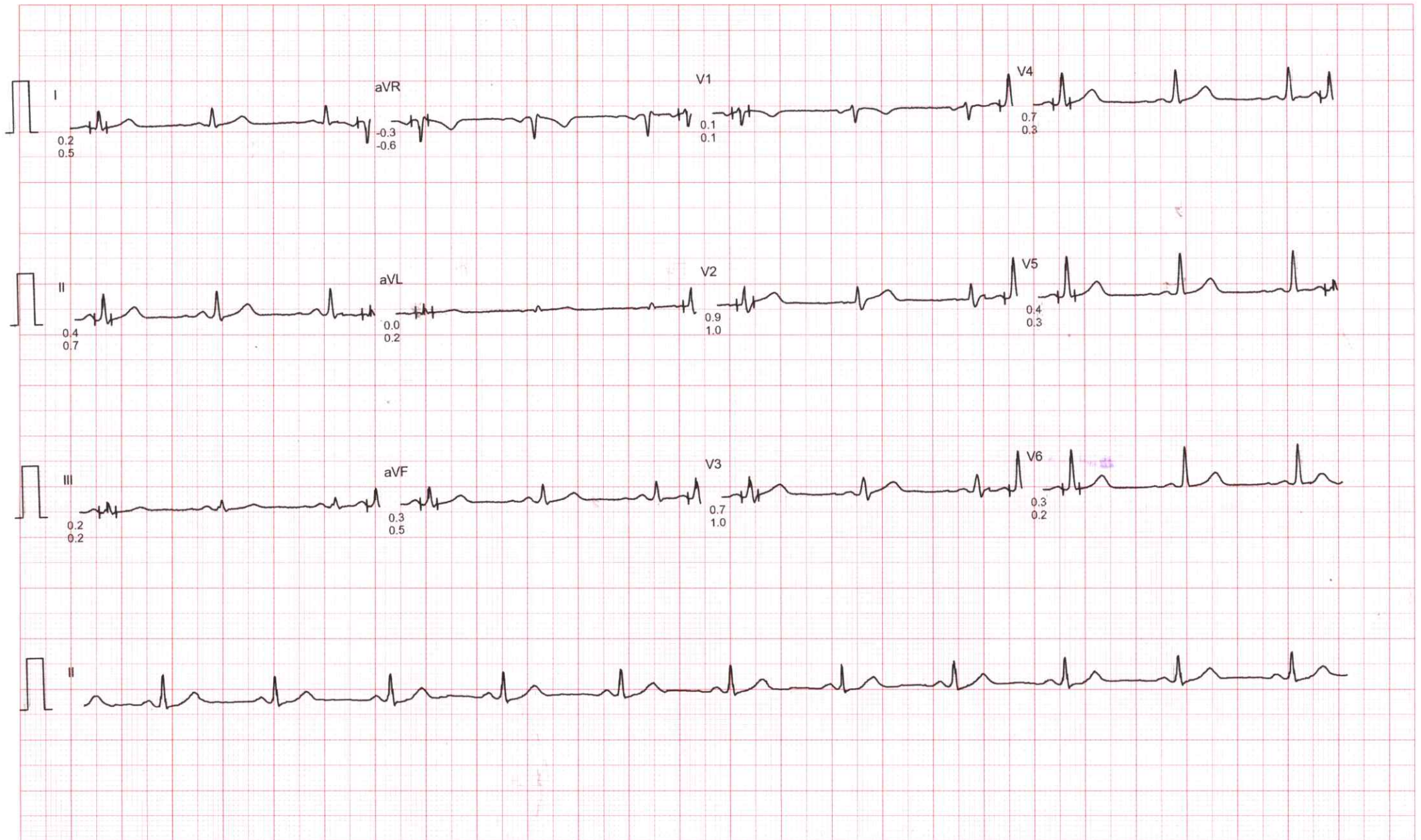
AGE/SEX : 40/M

RECORDED : 26-10-2024 13:30

RATE : 69 BPM

B.P. : 120/80 mmHg

LINKED MEDIAN





# EXCELLAS CLINICS-DOMBIVLI

HYPERVENTILATION  
PRETEST

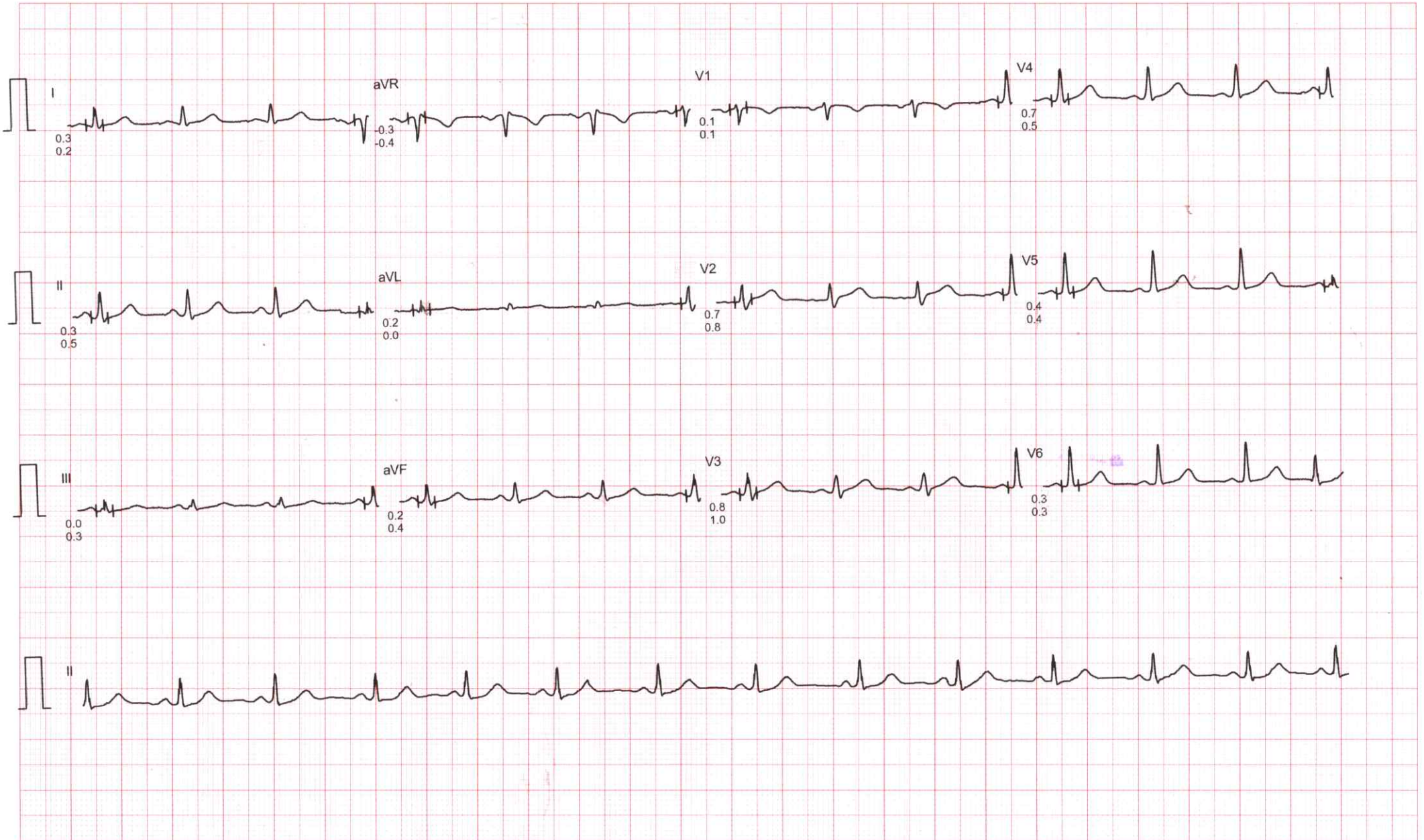
ST @ 10mm/mV  
80ms PostJ

Mr. KRUSHNAKUMAR HIVRE  
I.D. : 29  
AGE/SEX : 40/M  
RECORDED : 26-10-2024 13:30

RATE : 79 BPM  
B.P. : 120/80 mmHg

STAGE TIME : 0:01

LINKED MEDIAN





# EXCELLAS CLINICS-DOMBIVLI

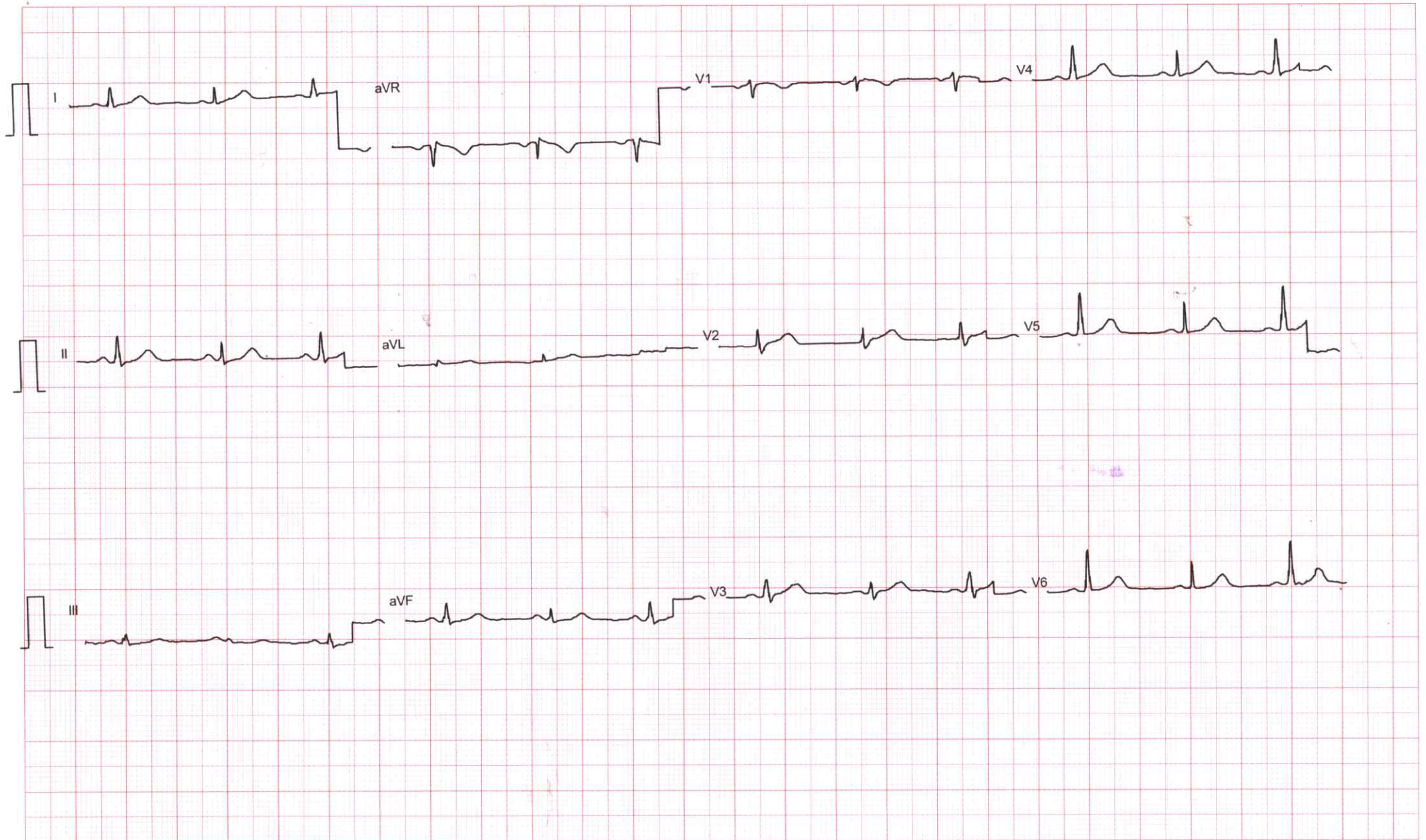
SUPINE  
PRETEST

ST @ 10mm/mV  
80ms PostJ

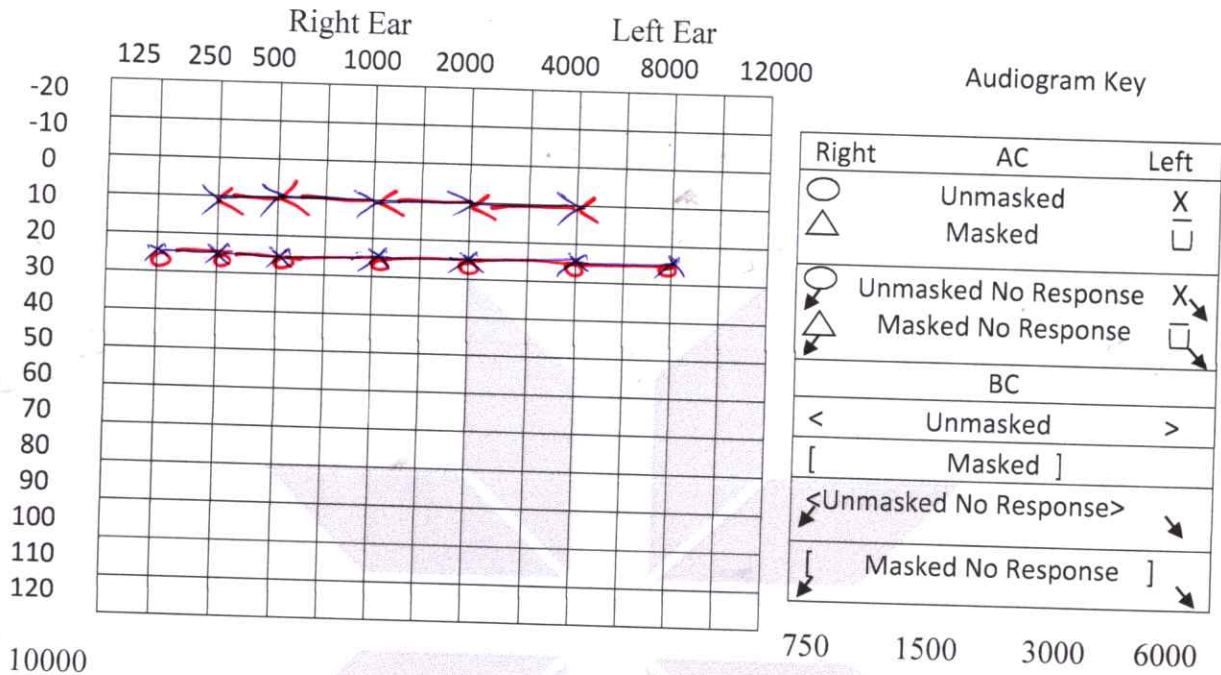
Mr. KRUSHNAKUMAR HIVRE  
I.D. : 29  
AGE/SEX : 40/M  
RECORDED : 26-10-2024 13:30

RATE : 80 BPM  
B.P. : 120/80 mmHg

RAW E.C.G.



<b>NAME : MR. KRUSHNAKUMAR HIVRE</b>	<b>AGE: 40 YRS / MALE</b>
<b>REF BY: MEDIWHEEL</b>	<b>DATE: 26/10/2024</b>

**AUDIOGRAM**


Responses: Reliable / Fairly Reliable / Not Reliable

Test Conduction: Satisfactory / Not Satisfactory

If any other specify  
 Procedure: Standard / Play

Audiological Interpretations:

Speech Audiometry

Test Ear	P.T.A. dBHL
Right	25
Left	25

BILATERAL HEARING CONDUCTION SENSITIVITY WITHIN NORMAL LIMITS

**Excellas Clinics Private Limited**  
 1st Floor, Kasturi Ashish,  
 Kalyan - Shilphata Rd,  
 Near Venkatesh Petrol Pump,  
 Above Mtji Mithal Sopp, Sonar Pada,  
 Dombivli East, Maharashtra 421201  
 M - 9930058716





ID: krushnakumar

10 mm/mV 25 mm/S

Name: HIRAY

Age: 40 Years

Gender: male

BP: (mmHg)

Weight: Kgs

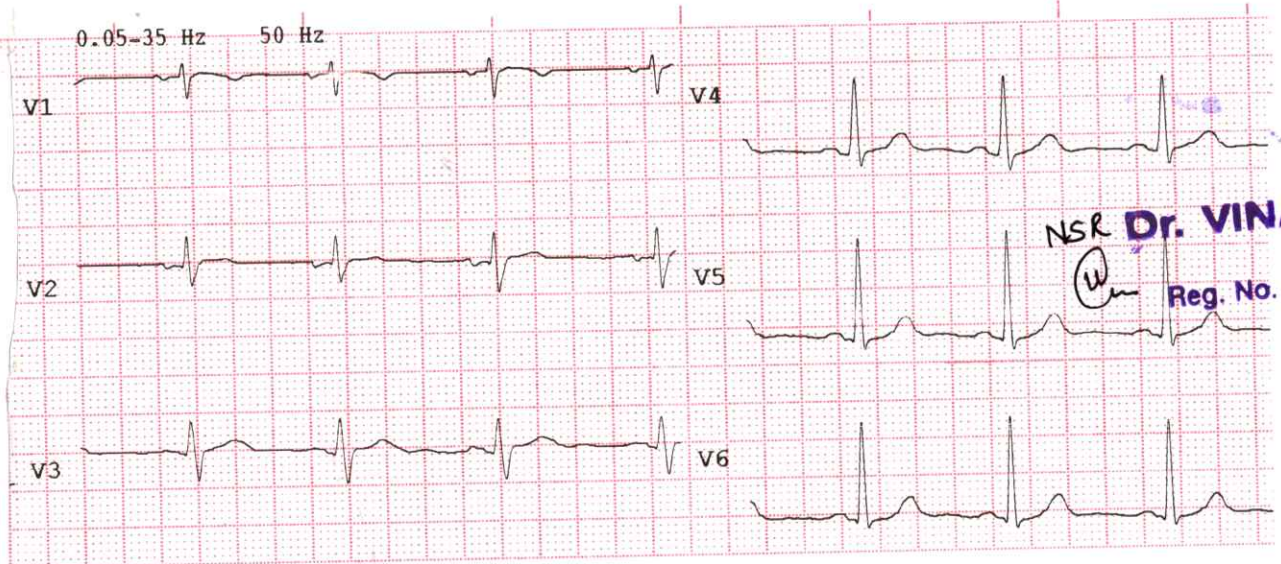
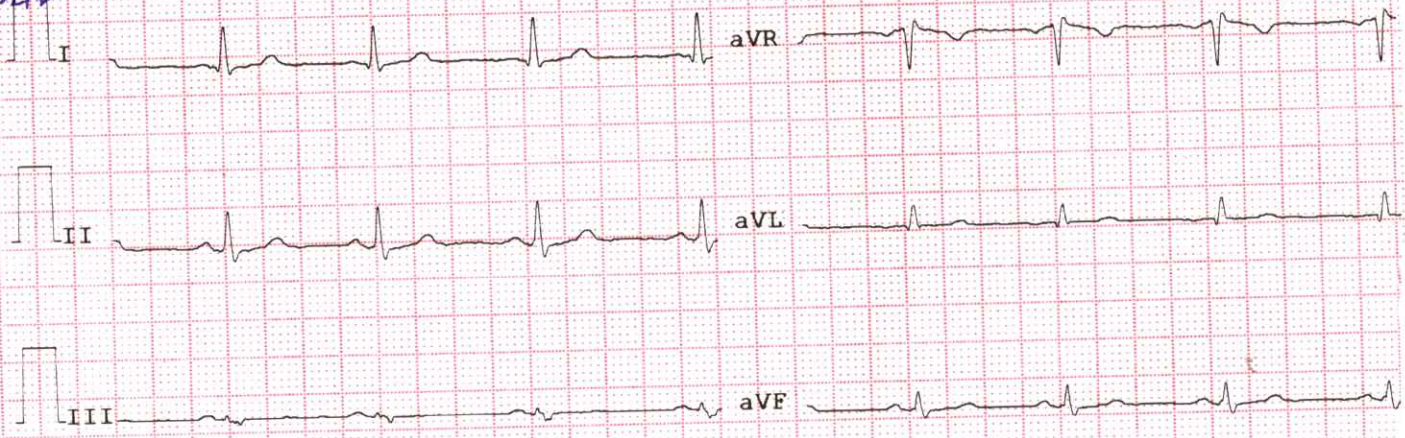
Date: 24/04/08

04:52 PM

Note:

VESTA 3011  
(Ver 3.31.33PC)

www.rmsindia.com



NSR Dr. VINAY HIRAY  
DNB MED  
Reg. No. 2012/09/2681