

NE

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. <u>Narisha K.N</u>
2. Mark of Identification	:	(Mole/Scar/any other (specify location)):
3. Age/Date of Birth	:	<u>31/07/1992</u> Gender: <u>F/M</u>
4. Photo ID Checked	:	(Passport/Election Card/PAN Card/Driving Licence/Company ID)

**PHYSICAL DETAILS:**

a. Height <u>167</u> (cms)	b. Weight <u>65</u> (Kgs)	c. Girth of Abdomen <u>90</u> (cms)
d. Pulse Rate <u>70</u> (/Min)	e. Blood Pressure:	Systolic <u>120</u> Diastolic <u>80</u>
		1 <sup>st</sup> Reading
		2 <sup>nd</sup> Reading

**FAMILY HISTORY:**

Relation	Age if Living	Health Status	If deceased, age at the time and cause
Father		/	
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
- b. Have you undergone/been advised any surgical procedure? 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
- 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 disorders of Respiratory system? Y/N
- Any Cardiac or Circulatory Disorders? Y/N
- Enlarged glands or any form of Cancer/Tumour? Y/N
- Any Musculoskeletal disorder? Y/N
- Any disorder of Gastrointestinal System? Y/N
- Unexplained recurrent or persistent fever, and/or weight loss Y/N
- Have you been tested for HIV/HBsAg / HCV before? If yes attach reports Y/N
- Are you presently taking medication of any kind? 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

Seal of Medical Examiner

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

Name & Seal of DDRC SRL Branch

Date & Time

*12/02/24*



**DDRC agilus Pathlabs Limited.**

Corp. Office : Express House, Second Floor, Opp. Pothys Silks, Banerjee Road, Kaloor -682017

Contact :- 93334 93334, Web :- www.ddrcagilus.com Email :- info.ddrc@agilus.in





नाम नविता के. एन.

Name NAVITHA K. N.

कर्मचारी कूट क.

E.C. No. 125103

जारीकर्ता अधिकारी

Issuing Authority



धारक के हस्ताक्षर

Signature of Holder



PATIENT NAME : MRS. NAVITHA K N

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 : **4126XB003311**  
PATIENT ID : NAVIF270519920  
CLIENT PATIENT ID:  
ABHA NO

AGE/SEX : 31 Years Female  
DRAWN  
RECEIVED : 10/02/2024 09:44:38  
REPORTED : 10/02/2024 15:43:08

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

TREADMILL TEST

TREADMILL TEST




COMPLETED

OPHTHAL

OPHTHAL

Test Completed



**DR. JOPHY VARGHESE, MD(PATH)**  
 (Reg No - TCMC:32627)  
 CONSULTANT PATHOLOGIST

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

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



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 ERNAKULAM, 682036  
 KERALA, INDIA  
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Patient Ref. No. 666000007811585



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**MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT**

ECG WITH REPORT  
REPORT  
COMPLETED

USG ABDOMEN AND PELVIS  
REPORT  
COMPLETED

CHEST X-RAY WITH REPORT  
REPORT  
COMPLETED

**HAEMATOLOGY**

**MEDIWHEEL HEALTH CHECKUP BELOW 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  
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 mg/dL

MEAN PLASMA GLUCOSE

105.4

  
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**BLOOD COUNTS, EDTA WHOLE BLOOD**

HEMOGLOBIN	12.6	12.0 - 15.0	g/dL
RED BLOOD CELL COUNT	4.21	3.80 - 4.80	mil/ $\mu$ L
WHITE BLOOD CELL COUNT	8.82	4.0 - 10.0	thou/ $\mu$ L
PLATELET COUNT	276	150 - 410	thou/ $\mu$ L

**RBC AND PLATELET INDICES**

HEMATOCRIT	38.8	36.0 - 46.0	%
MEAN CORPUSCULAR VOL	92.2	83.0 - 101	fL
MEAN CORPUSCULAR HGB.	29.9	27.0 - 32.0	pg
MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION	32.5	31.50 - 34.50	g/dL
RED CELL DISTRIBUTION WIDTH	12.5	11.60 - 14.0	%
MENTZER INDEX	21.9		
MEAN PLATELET VOLUME	9.4	6.80 - 10.90	fL

**WBC DIFFERENTIAL COUNT**

SEGMENTED NEUTROPHILS	71	40.0 - 80.0	%
LYMPHOCYTES	24	20.0 - 40.0	%
MONOCYTES	3	2.0 - 10.0	%
EOSINOPHILS	2	1.0 - 6.0	%
BASOPHILS	0	0.0 - 1.0	%
ABSOLUTE NEUTROPHIL COUNT	6.26	2.0 - 7.0	thou/ $\mu$ L
ABSOLUTE LYMPHOCYTE COUNT	2.10	1.0 - 3.0	thou/ $\mu$ L
ABSOLUTE MONOCYTE COUNT	0.29	0.20 - 1.0	thou/ $\mu$ L
ABSOLUTE EOSINOPHIL COUNT	0.20	0.02 - 0.50	thou/ $\mu$ L
ABSOLUTE BASOPHIL COUNT	0.00	0.00 - 0.10	thou/ $\mu$ L

DR. HARI SHANKAR, MBBS MD  
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HEAD - Biochemistry &  
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NEUTROPHIL LYMPHOCYTE RATIO (NLR) 3.0

**ERYTHROCYTE SEDIMENTATION RATE (ESR), EDTA BLOOD**

SEDIMENTATION RATE (ESR) 19 0 - 20 mm at 1 hr  
METHOD : WESTERGRENN METHOD

**MEDIWHEEL HEALTH CHECKUP BELOW 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 BELOW 40(F)TMT**

**ABO GROUP & RH TYPE, EDTA WHOLE BLOOD**

ABO GROUP TYPE A  
RH TYPE POSITIVE

<b>Interpretation(s)</b>

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."



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MC-5897

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The test is performed by both forward as well as reverse grouping methods.

**BIO CHEMISTRY****MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT****BLOOD UREA NITROGEN (BUN), SERUM**


BLOOD UREA NITROGEN 6 Adult(&lt;60 yrs) : 6 to 20 mg/dL


**BUN/CREAT RATIO**

BUN/CREAT RATIO 8.4

**CREATININE, SERUM**

CREATININE 0.66 18 - 60 yrs : 0.6 - 1.1 mg/dL

**GLUCOSE, POST-PRANDIAL, PLASMA**
 GLUCOSE, POST-PRANDIAL, PLASMA 96  
 Diabetes Mellitus : > or = 200. mg/dL  
 Impaired Glucose tolerance/  
 Prediabetes : 140 - 199.  
 Hypoglycemia : < 55.
**GLUCOSE FASTING, FLUORIDE PLASMA**
 FBS (FASTING BLOOD SUGAR) 98  
 Diabetes Mellitus : > or = 126. mg/dL  
 Impaired fasting Glucose/  
 Prediabetes : 101 - 125.  
 Hypoglycemia : < 55.
**LIVER FUNCTION TEST WITH GGT**
  
 DR. SMITHA PAULSON, MD  
 (PATH), DPB  
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BILIRUBIN, TOTAL		0.36	General Range : < 1.1 mg/dL
BILIRUBIN, DIRECT		0.21	General Range : < 0.3 mg/dL
BILIRUBIN, INDIRECT		0.15	General Range : < 0.85 mg/dL
TOTAL PROTEIN		6.6	Ambulatory : 6.4 - 8.3 g/dL Recumbant : 6 - 7.8
ALBUMIN		4.2	20-60yrs : 3.5 - 5.2 g/dL
GLOBULIN		2.4	General Range : 2 - 3.5 g/dL Premature Neonates : 0.29 - 1.04
ALBUMIN/GLOBULIN RATIO		1.8	General Range : 1.1 - 2.5 RATIO
ASPARTATE AMINOTRANSFERASE (AST/SGOT)		14	Adults : < 33 U/L
ALANINE AMINOTRANSFERASE (ALT/SGPT)		12	Adults : < 34 U/L
ALKALINE PHOSPHATASE		55	Adult (<60yrs) : 35 - 105 U/L
GAMMA GLUTAMYL TRANSFERASE (GGT)		10	Adult (female) : < 40 U/L
<b>TOTAL PROTEIN, SERUM</b>			
TOTAL PROTEIN		6.6	Ambulatory : 6.4 - 8.3 g/dL Recumbant : 6 - 7.8
<b>URIC ACID, SERUM</b>			
URIC ACID		4.1	Adults : 2.4-5.7 mg/dL


## BIOCHEMISTRY - LIPID

## MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT

## LIPID PROFILE, SERUM

CHOLESTEROL	181	Desirable : < 200 Borderline : 200-239	mg/dL
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TRIGLYCERIDES	117	High : >or= 240 Normal : < 150 High : 150-199 Hypertriglyceridemia : 200-499 Very High : > 499	mg/dL
HDL CHOLESTEROL	43	General range : 40-60 Optimum : < 100 Above Optimum : 100-129	mg/dL
LDL CHOLESTEROL, DIRECT	127	Borderline High : 130-159 High : 160-189 Very High : >or= 190	mg/dL
NON HDL CHOLESTEROL	138	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	23.4 4.2	</= 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	3.0	Desirable/Low Risk - 0.5-3 Borderline/Moderate Risk- 3.1-6 High Risk- >6.0	

**SPECIALISED CHEMISTRY - HORMONE**

**MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT**

**THYROID PANEL, SERUM**

T3	114.00	Non-Pregnant : 80-200 Pregnant Trimester-wise 1st : 81-190	ng/dL
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T4  
TSH 3RD GENERATION

8.27  
2.070

2nd : 100-260  
3rd : 100-260  
Adults : 4.5-12.1      µg/dl  
Non-Pregnant : 0.4-4.2      µIU/mL

Pregnant Trimester-wise :  
1st : 0.1 - 2.5  
2nd : 0.2 - 3  
3rd : 0.3 - 3

**CLINICAL PATH - URINALYSIS**

**MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT**

**PHYSICAL EXAMINATION, URINE**

COLOR : PALE YELLOW  
APPEARANCE : CLEAR

**CHEMICAL EXAMINATION, URINE**

PH	<b>8.0 High</b>	4.8 - 7.4
SPECIFIC GRAVITY	<b>1.010 Low</b>	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	NOT DETECTED	NOT DETECTED
NITRITE	NORMAL	NORMAL
LEUKOCYTE ESTERASE	NOT DETECTED	NOT DETECTED
	NOT DETECTED	NOT DETECTED

*Emilia*  
DR. SMITHA PAULSON, MD  
(PATH), DPB  
(Reg No - TCMC:35960)  
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*[Signature]*  
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REPORTED : 10/02/2024 15:43:08

Test Report Status	Final	Results	Units
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**MICROSCOPIC EXAMINATION, URINE**

RED BLOOD CELLS	NOT DETECTED	NOT DETECTED	/HPF
WBC	1-2	0-5	/HPF
EPITHELIAL CELLS	3-5	0-5	/HPF
CASTS	NOT DETECTED		
CRYSTALS	NOT DETECTED		
BACTERIA	NOT DETECTED	NOT DETECTED	
YEAST	NOT DETECTED	NOT DETECTED	



To Book A Home Visit  
93334 93334

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DR. NISHA G, MBBS MD(PATH),  
(Reg No - TCMC:45399)  
CONSULTANT PATHOLOGIST

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View Details



View Report

**PERFORMED AT :**

DDRC AGILUS PATHLABS LIMITED  
DDRC agilus TOWER, G-131, PANAMPILLY NAGAR,  
ERNAKULAM, 682036  
KERALA, INDIA  
Tel : 93334 93334  
Email : customercare.ddrc@agilus.in



Patient Ref. No. 666000007811585



Stool test not required

Navitha.K.d



**DDRC** **agilus** >>>  
diagnostics

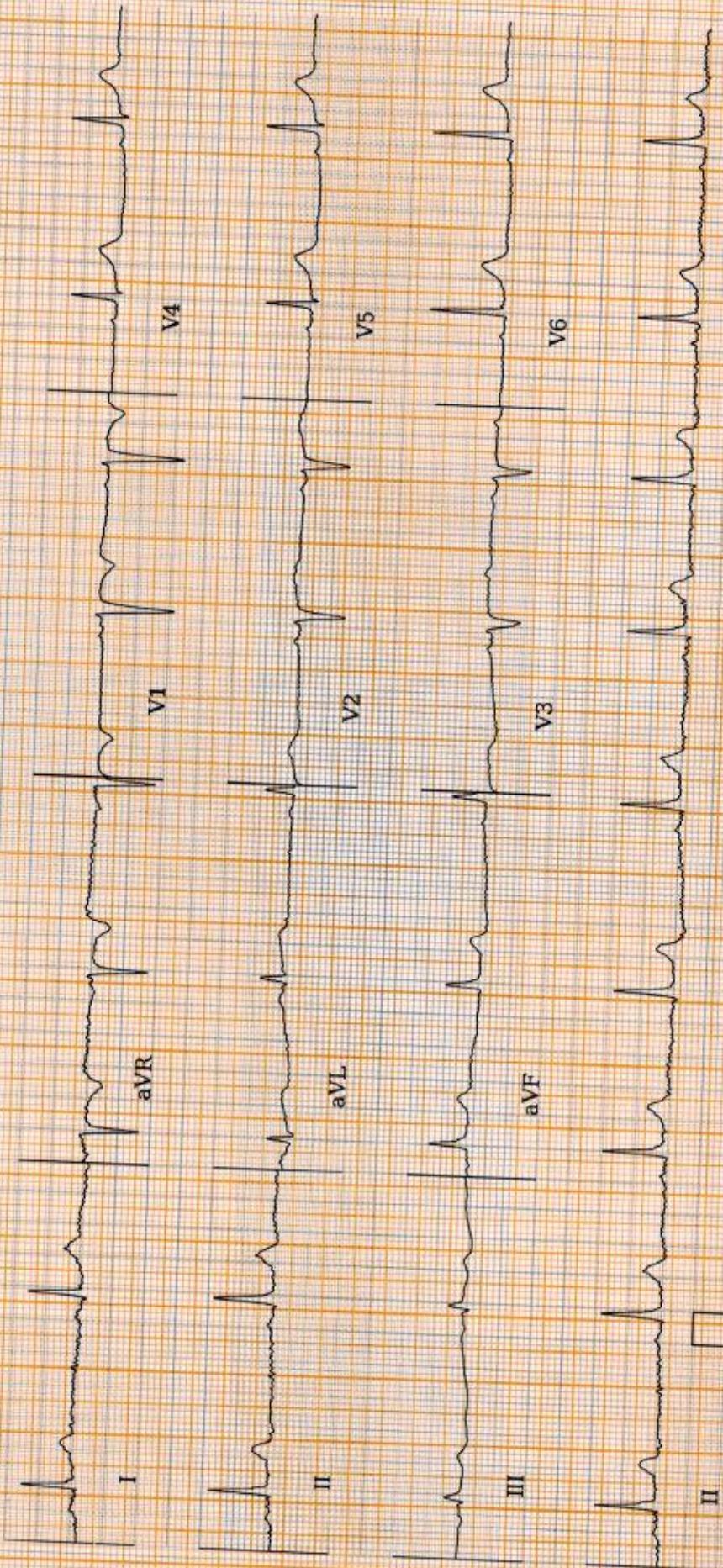
<p>10</p> <p>TEST NAME</p> <p>TEST RESULT</p>	<p>20</p> <p>TEST NAME</p> <p>TEST RESULT</p>	<p>30</p> <p>TEST NAME</p> <p>TEST RESULT</p>	<p>40</p> <p>TEST NAME</p> <p>TEST RESULT</p>	<p>50</p> <p>TEST NAME</p> <p>TEST RESULT</p>	<p>60</p> <p>TEST NAME</p> <p>TEST RESULT</p>
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Age / Gender: 31/Female  
Patient ID: 3311  
Patient Name: Navitha k n

Date and Time: 10th Feb 24 10:47 AM



25.0 mm/s 10.0 mm/mV 0-20Hz, 50Hz

AR: 58bpm VR: 57bpm QRSD: 98ms

QTcB: 391.82ms PRI: 146ms

P-R-T: 18° 38° 44°



Sinus Bradycardia, Sinus Arrhythmia Seen. Poor "R" wave progression in anterior leads. Please correlate clinically.

Disclaimer: 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 must be interpreted by a qualified physician



Date: 10/2/24

OPHTHALMOLOGY REPORT

This is to certify that I have examined

Mr / Ms : Navitha K N Aged 31 and his / her

visual standards is as follows :

Visual Acuity:

For far vision

R: 6/6

L: 6/6

For near vision

R: Ng

L: Nb

Color Vision : Normal



DDRC AGILUS PATHLABS LIMITED  
PANAMPILLY NAGAR  
NANDAN.N  
(Optometrist)

NAME: MRS NAVITHA K N	STUDY DATE : 10.02.2024
AGE / SEX : 31 YRS / F	REPORTING DATE : 10.02.2024
REFERRED BY : MEDIWHEEL	ACC NO: 4126XB003311

### 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*  
**Dr. HRISHIKESH C MBBS, DMRD**  
**Consultant Radiologist.**



NAME	MRS NAVITHA K N	AGE	31 YRS
SEX	FEMALE	DATE	February 10, 2024
REFERRAL	MEDIWHEEL	ACC NO	4126XB003311

### USG ABDOMEN AND PELVIS

<b>LIVER</b>	Measures ~ 11.6 cm. Normal echotexture. Smooth margins and no obvious focal lesion within. No IHBR dilatation. Portal vein normal in caliber.
<b>GB</b>	No calculus within gall bladder. Normal GB wall caliber.
<b>SPLEEN</b>	Measures ~ 9.7 cm. Normal to visualized extent. Splenic vein normal.
<b>PANCREAS</b>	Normal to visualized extent. PD is not dilated.
<b>KIDNEYS</b>	RK : 11.6 x 4.1 cm , normal in size and echotexture. LK : 10.5 x 5.0 cm , normal in size and echotexture No focal lesion / calculus within. Maintained corticomedullary differentiation and normal parenchymal thickness. No hydroureteronephrosis.
<b>BLADDER</b>	Normal wall caliber, no internal echoes/calculus within.
<b>UTERUS</b>	Anteverted, normal size and echotexture. Two fundal anterior wall subserosal fibroids of size ~ 15 x 12 mm & 17 x 14 mm noted. ET - 6 mm.
<b>OVARIES</b>	Bilateral ovaries show few small peripheral follicles. RO: 3.5 x 1.9 x 3.1 cm [volume ~ 11 cc] LO: 3.1 x 3.3 x 1.7 cm [volume ~ 9 cc]
<b>FLUID</b>	Nil to visualized extent.
<b>BOWEL</b>	Visualized bowel loops appear normal.
<b>IMPRESSION</b>	<ul style="list-style-type: none"> <li>⚡ Bilateral polycystic ovaries.</li> <li>⚡ Small uterine fibroids.</li> <li>⚡ Kindly correlate clinically.</li> </ul>

  
 Dr. HRISHIKESH C MBBS DMRD  
 Consultant Radiologist

**Thank you for referral. Your feedback will be appreciated.**





NAVITHA K N (31 M)

DDRC agilus DIAGNOSTICS P NAGAR

ID: XB003311

Date: 10-Feb-24

Exec Time : 0 m 0 s

Stage Time : 0 m 24 s

HR: 65 bpm

Protocol: Bruce

Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 160 bpm)

B.P: 110 / 80

Test Report

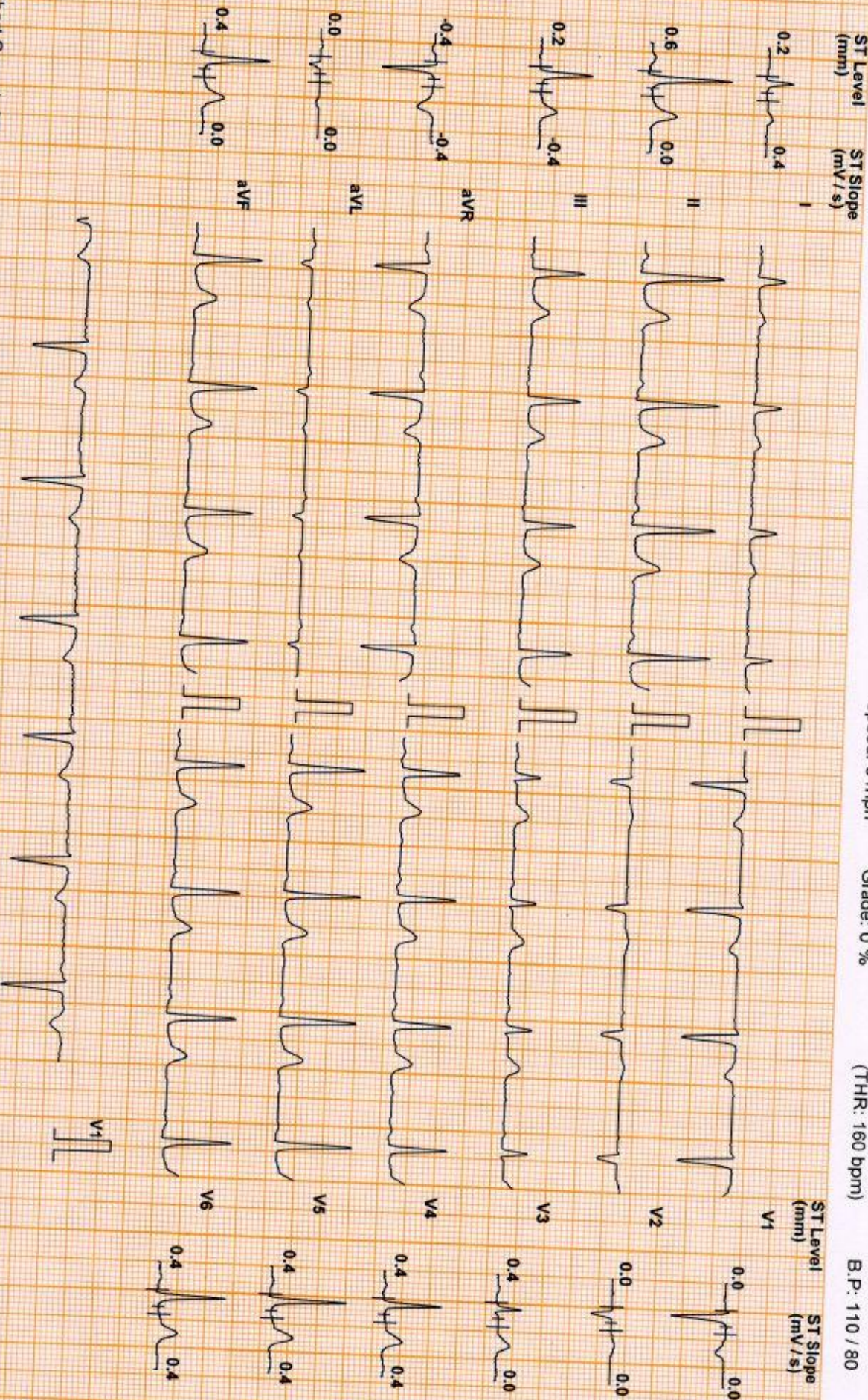


Chart Speed: 25 mm/sec  
Schluter Spandern V 4.7

Filter: 35 Hz

Mains Filtr. ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

DDRC Agilus



NAVITHA K N (31 M)

DDRC agilis DIAGNOSTICS P NAGAR

ID: XB003311

Date: 10-Feb-24

Exec Time : 0 m 0 s

Stage Time : 0 m 24 s HR: 69 bpm

Test Report

Protocol: Bruce

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 160 bpm)

B.P: 110 / 80

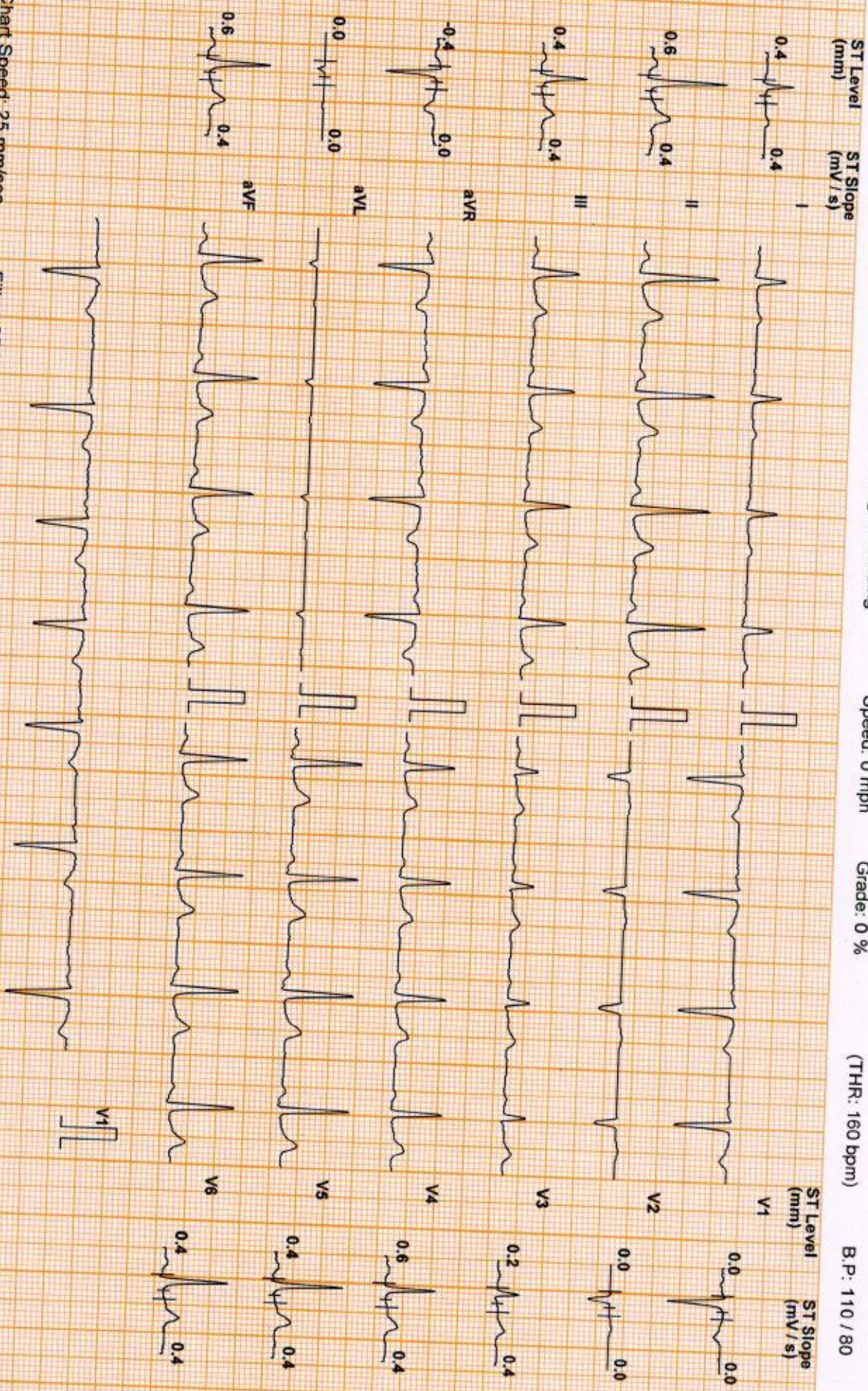


Chart Speed: 25 mm/sec  
Schiller Spandau V4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

150 = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median

DDRC AGILIS DIAGNOSTICS



NAVITHA K N (31 M)

Protocol: Bruce

DDRC agilus DIAGNOSTICS P NAGAR

ID: XB003311

Date: 10-Feb-24

Exec Time : 2 m 54 s Stage Time : 2 m 54 s HR: 115 bpm

Stage: 1

Speed: 1.7 mph

Grade: 10 %

(THR: 160 bpm)

B.P: 110 / 80

Test Report

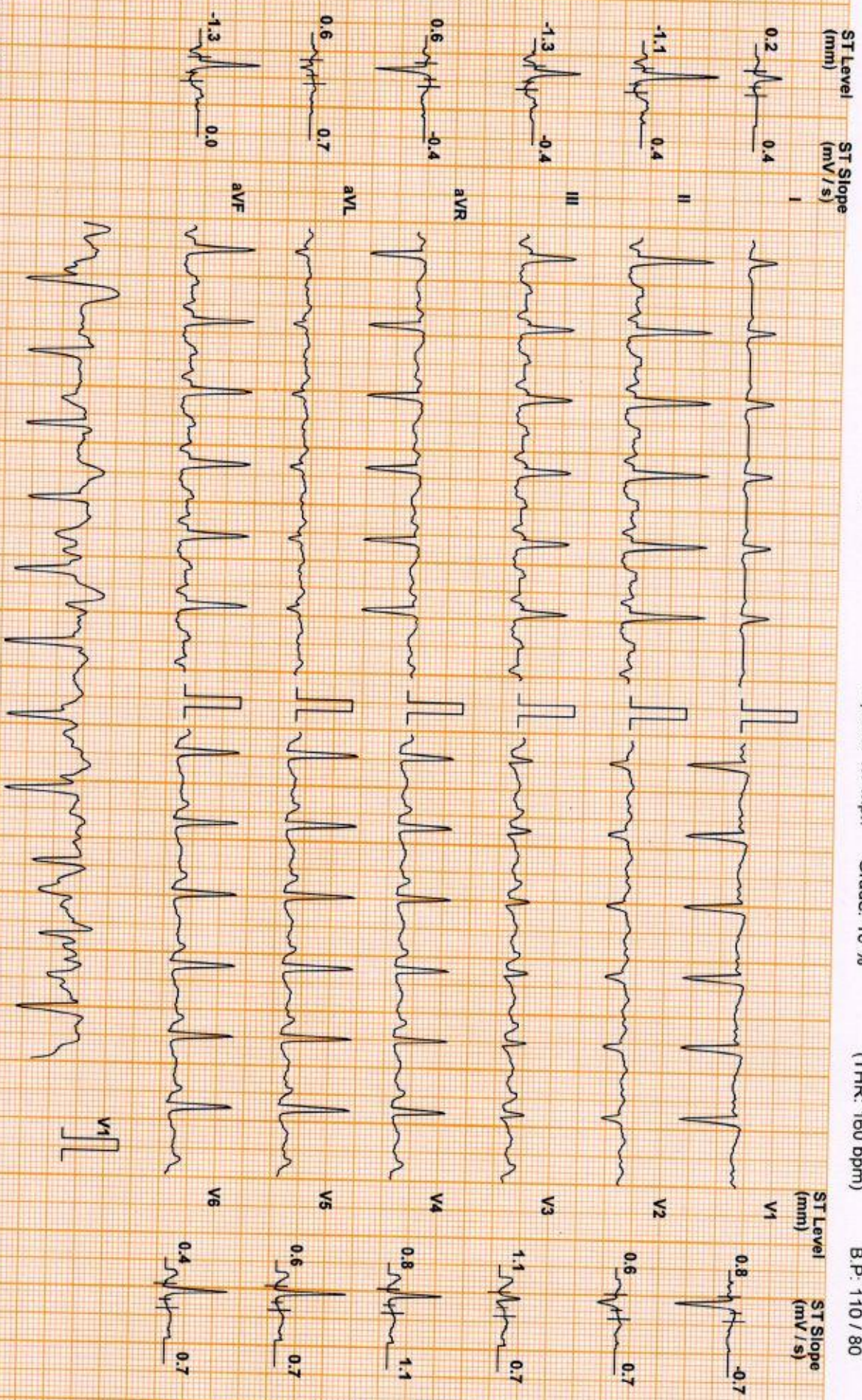


Chart Speed: 25 mm/sec  
Schiller Standard V 4.7

Filter: 35 Hz

Mains Fil. ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



NAVITHA K N (31 M)

DDRC agilus DIAGNOSTICS P NAGAR

Test Report

Protocol: Bruce

ID: XB003311

Date: 10-Feb-24

Exec Time : 5 m 54 s Stage Time : 2 m 54 s HR: 153 bpm

Stage: 2

Speed: 2.5 mph

Grade: 12 %

(THR: 160 bpm)

B.P: 120 / 80

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

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

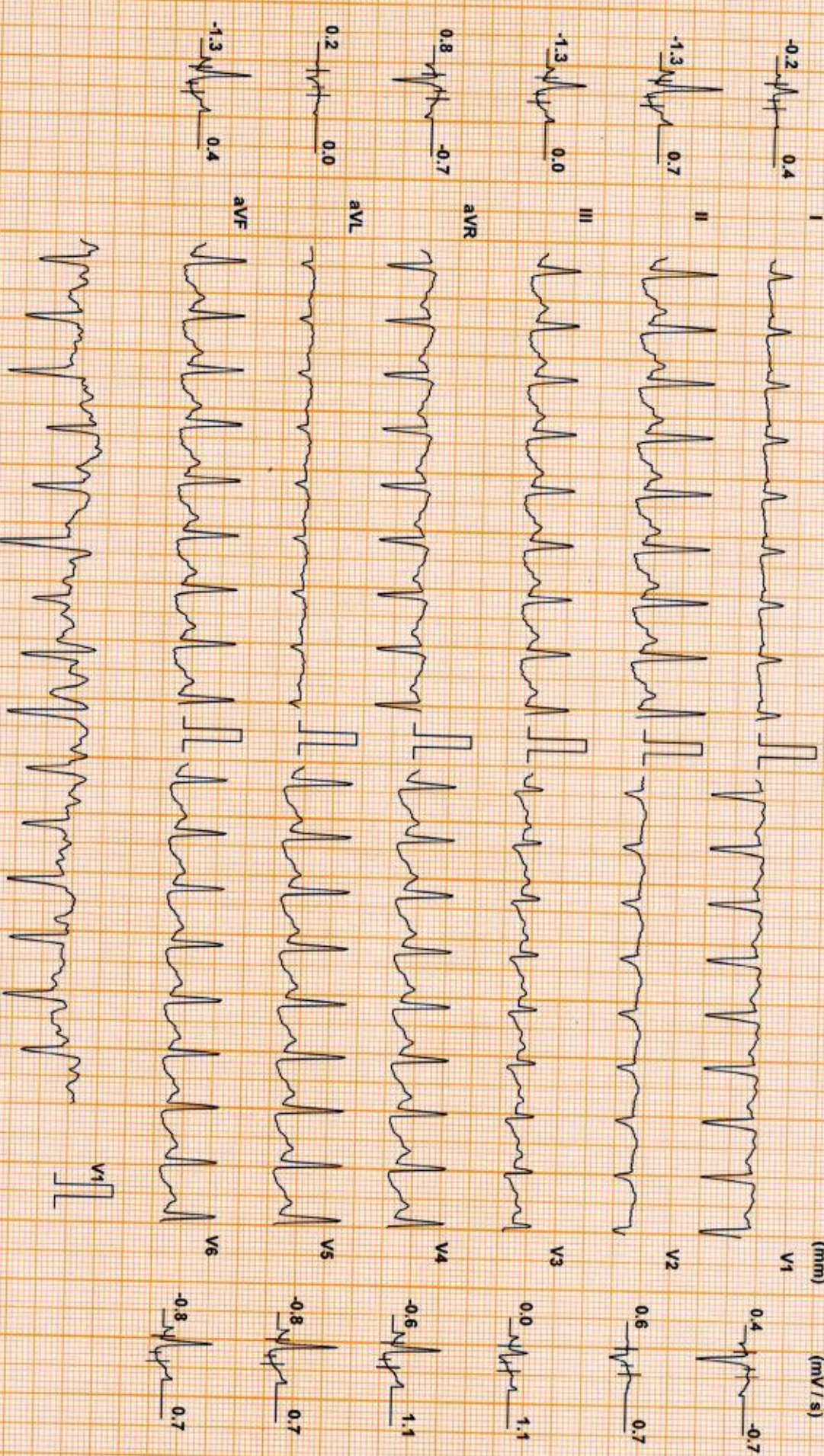


Chart Speed: 25 mm/sec  
Schlier Spanden V 47

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



NAVITHA K N (31 M)

Protocol: Bruce

DDRC agilus DIAGNOSTICS P NAGAR

ID: XB003311

Date: 10-Feb-24

Exec Time : 7 m 8 s

Stage Time : 1 m 8 s

Test Report

Stage: Peak Ex

Speed: 3.4 mph

Grade: 14 %

(THR: 160 bpm)

B.P: 130 / 80

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

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

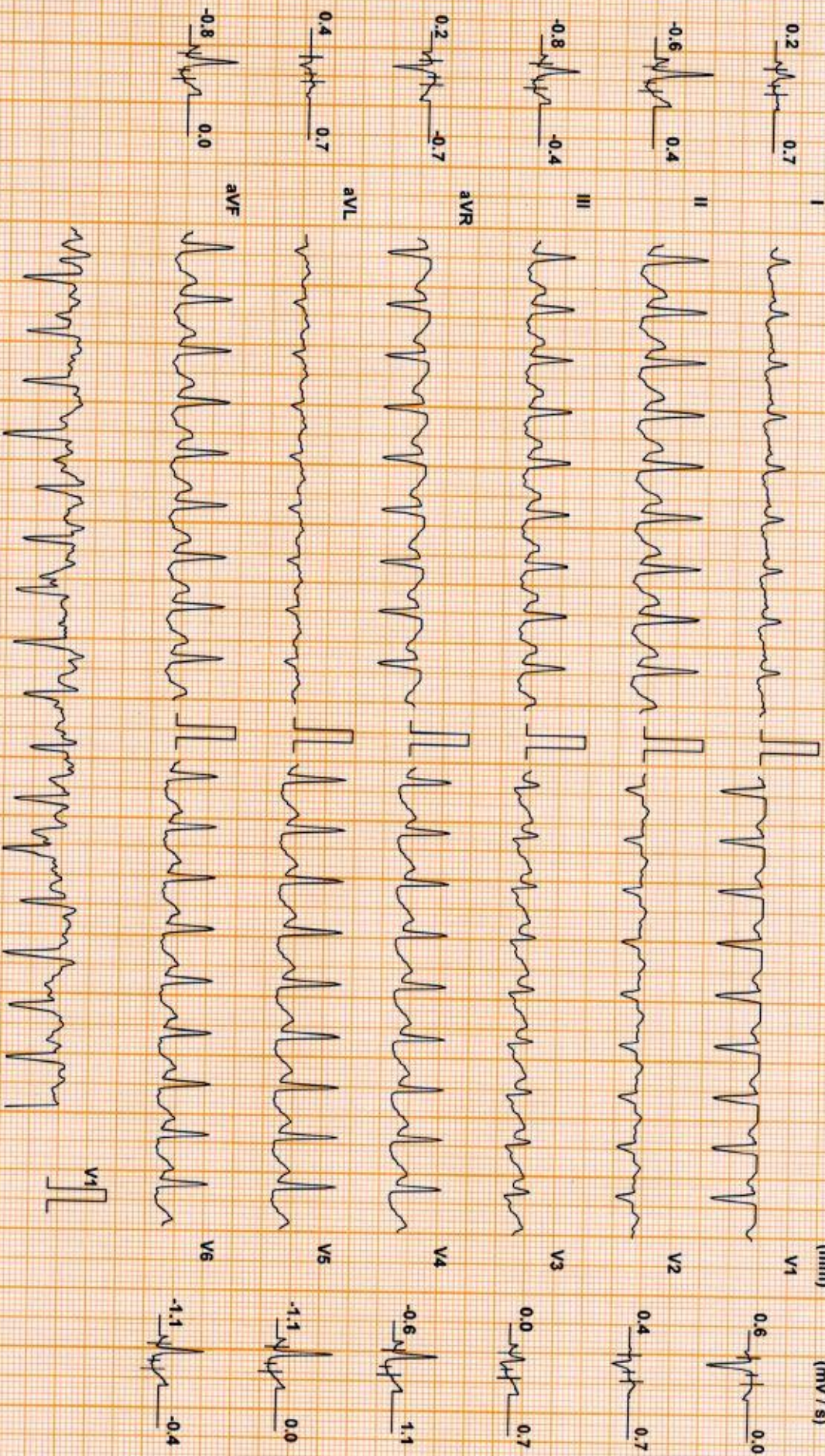


Chart Speed: 25 mm/sec  
Schluter Spandau V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

ISO = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



NAVITHA K N (31 M)

DDRC agilius DIAGNOSTICS P NAGAR

Test Report

Protocol: Bruce

ID: XB003311

Date: 10-Feb-24

Exec Time : 7 m 14 s Stage Time : 0 m 54 s HR: 134 bpm

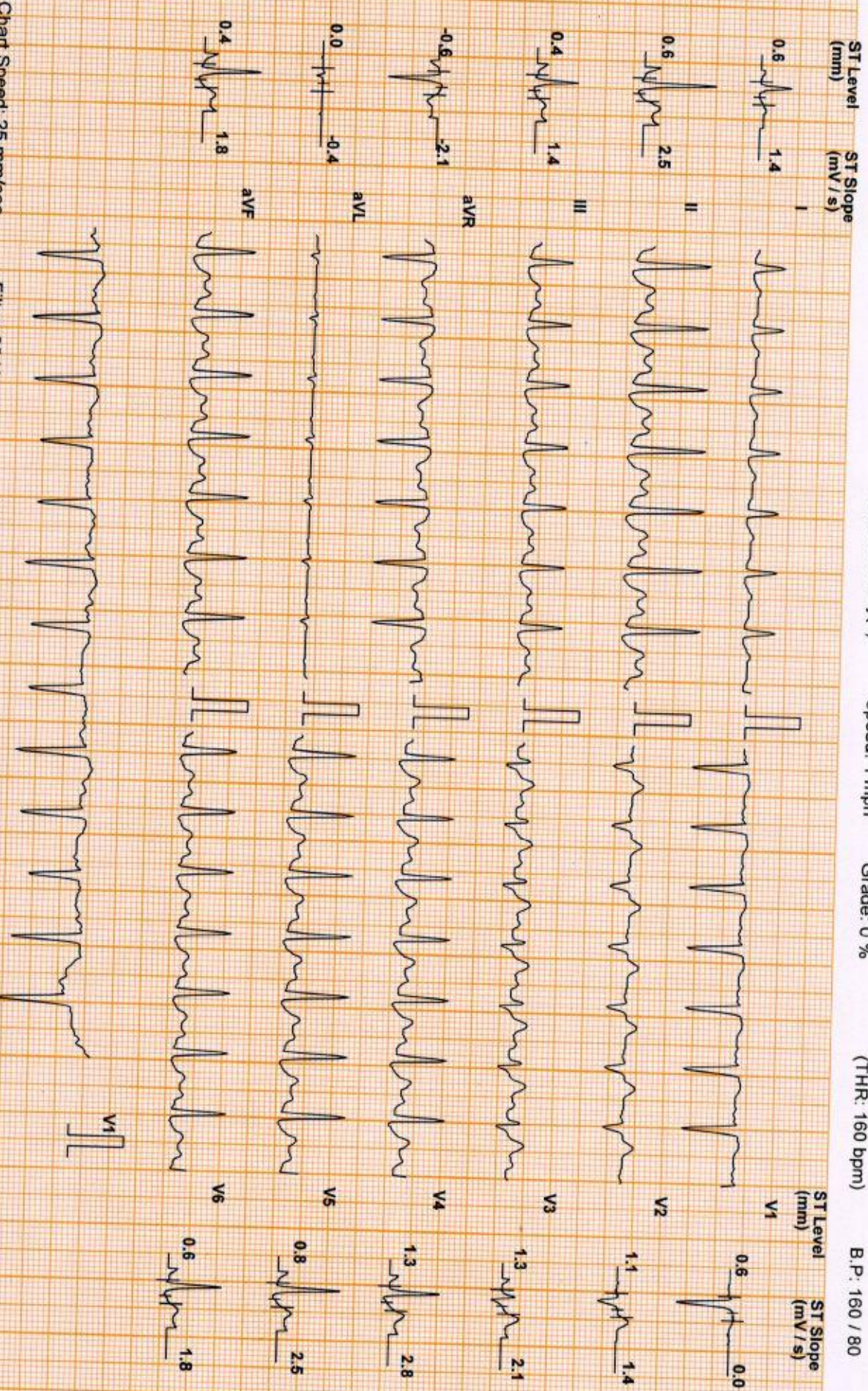
Stage: Recovery(1)

Speed: 1 mph

Grade: 0 %

(THR: 160 bpm)

B.P: 160 / 80





# DDRC agilus DIAGNOSTICS P NAGAR

# Test Report

NAVITHA K N (31 M)

ID: XB003311

Date: 10-Feb-24

Exec Time : 7 m 14 s Stage Time : 0 m 54 s HR: 111 bpm

Protocol: Bruce

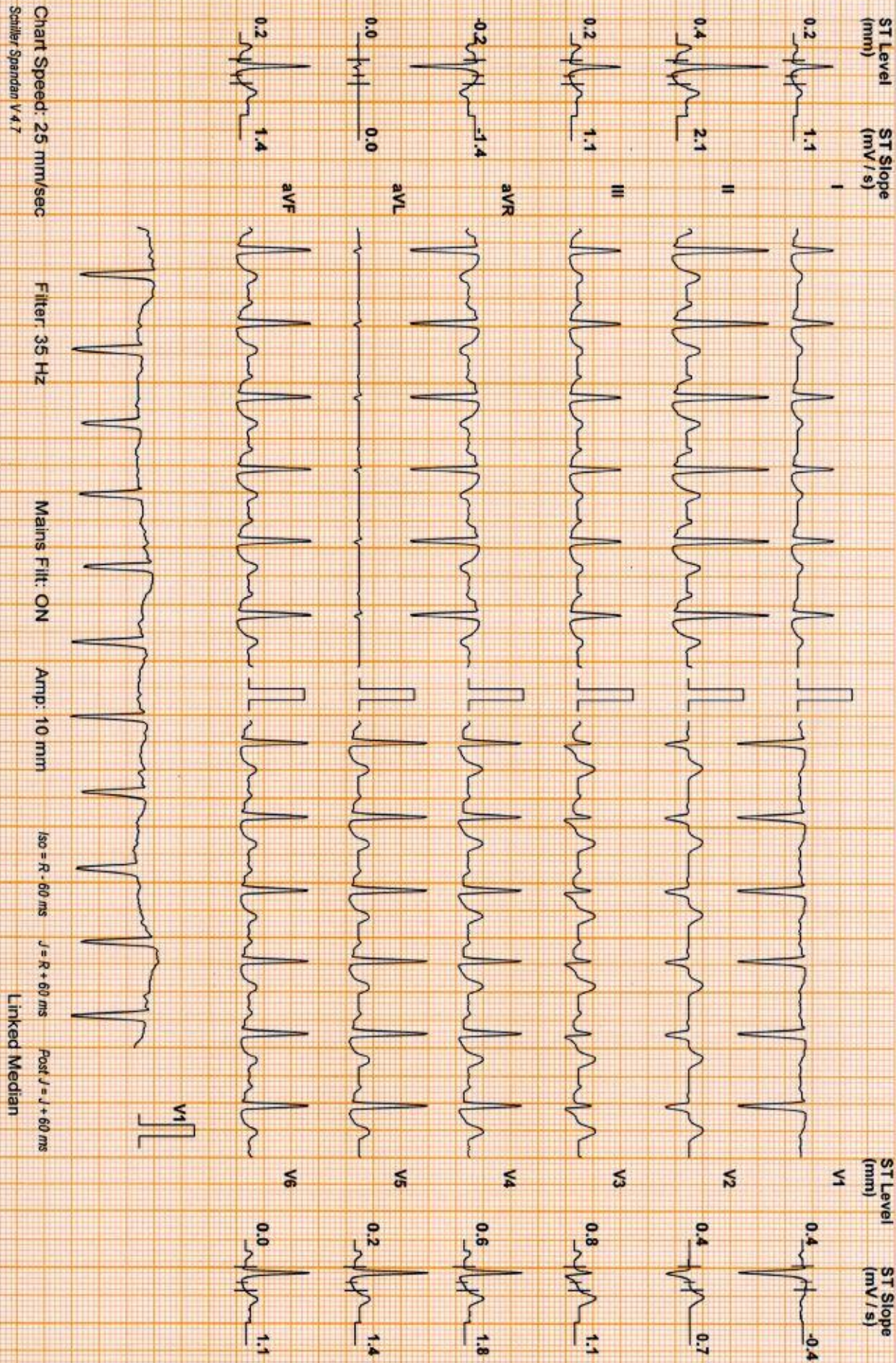
Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 160 bpm)

B.P: 150 / 80





NAVITHA K N (31 M)

Protocol: Bruce

**DDRC agilus DIAGNOSTICS P NAGAR**

**Test Report**

ID: XB003311

Date: 10-Feb-24

Exec Time : 7 m 14 s Stage Time : 0 m 54 s HR: 100 bpm

Stage: Recovery(3)

Speed: 0 mph

Grade: 0 %

(THR: 160 bpm)

B.P: 130 / 80

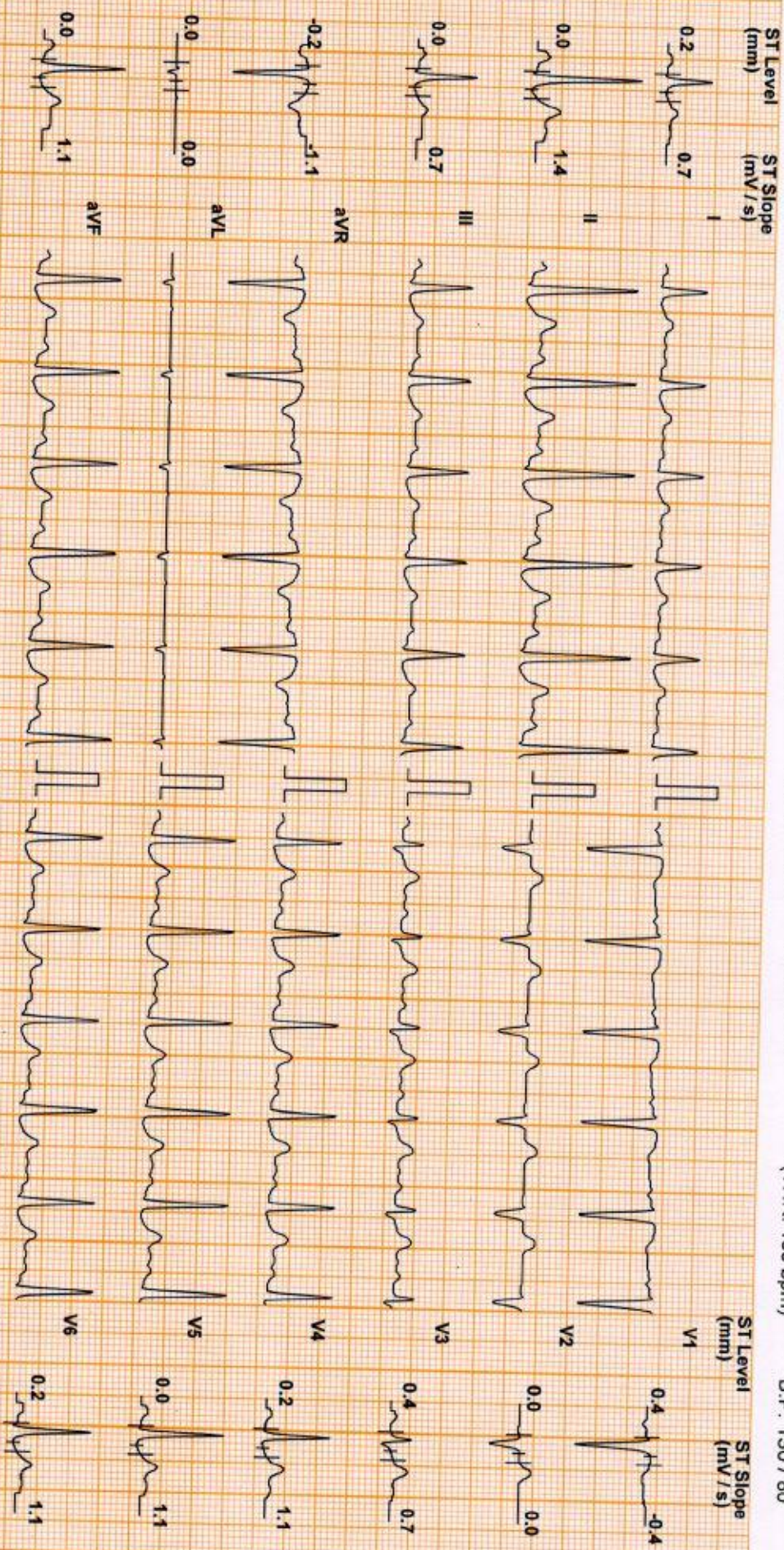


Chart Speed: 25 mm/sec  
Schlier-Spenden V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



NAVITHA K N (31 M)

DDRC agilus DIAGNOSTICS P NAGAR

Test Report

Protocol: Bruce

ID: XB003311

Date: 10-Feb-24

Exec Time : 7 m 14 s Stage Time : 0 m 54 s HR: 100 bpm

Stage: Recovery(4)

Speed: 0 mph

Grade: 0 %

(THR: 160 bpm)

B.P: 130 / 80

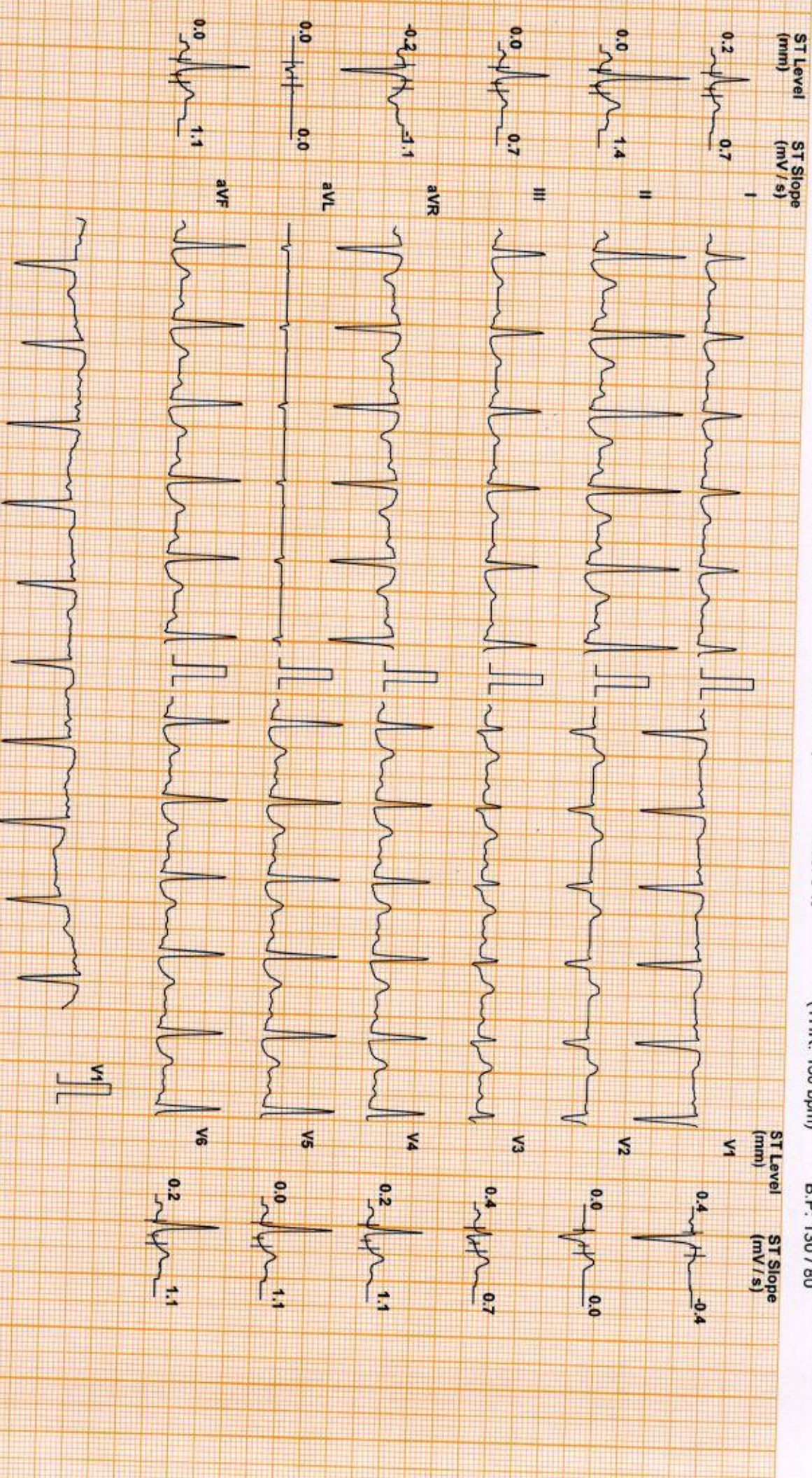


Chart Speed: 25 mm/sec  
Schluter Spandan V 4.7

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

iso = R - 60 ms

J = R + 60 ms

Post J = J + 60 ms

Linked Median



## DDRC agilus DIAGNOSTICS P NAGAR

**Patient Details**                      Date: 10-Feb-24                      Time: 11:17:42  
**Name:** NAVITHA K N    ID: XB003311  
**Age:** 31 y                      Sex: M                      Height: -- cms                      Weight: -- Kgs  
**Clinical History:**    NIL

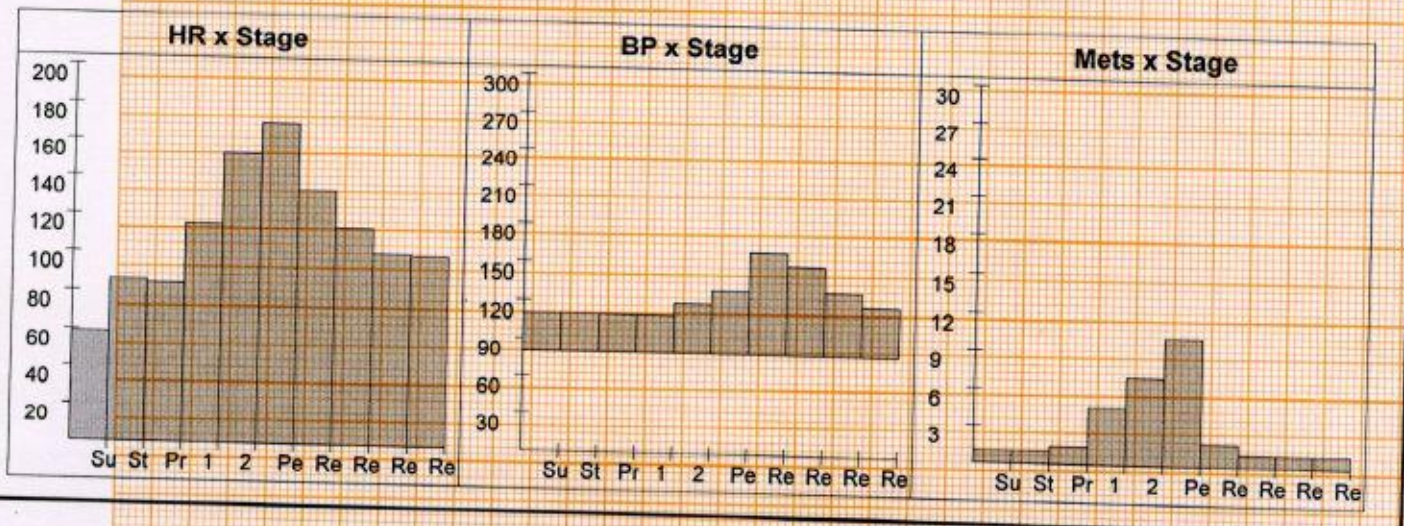
**Medications:**

### Test Details

**Protocol:** Bruce                      Pr.MHR: 189 bpm                      THR: 160 (85 % of Pr.MHR) bpm  
**Total Exec. Time:** 7 m 14 s                      Max. HR: 170 ( 90% of Pr.MHR )bpm                      Max. Mets: 10.20  
**Max. BP:** 160 / 80 mmHg                      Max. BP x HR: 27200 mmHg/min                      Min. BP x HR: 4720 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	59	110 / 80	-0.64 aVR	0.71 V4
Standing	0 : 30	1.0	0	0	86	110 / 80	-0.64 aVR	-1.06 V1
1	3 : 0	4.6	1.7	10	115	110 / 80	-5.94 aVL	4.95 V2
2	3 : 0	7.0	2.5	12	153	120 / 80	-3.61 V6	4.60 I
Peak Ex	1 : 14	10.2	3.4	14	170	130 / 80	-1.27 II	1.77 II
Recovery(1)	1 : 0	1.8	1	0	134	160 / 80	-1.27 II	3.18 II
Recovery(2)	1 : 0	1.0	0	0	114	150 / 80	-0.64 aVR	3.18 II
Recovery(3)	1 : 0	1.0	0	0	101	130 / 80	-0.64 aVR	2.48 II
Recovery(4)	0 : 26	1.0	0	0	100	120 / 80	-0.21 III	1.77 II





# DDRC agilus DIAGNOSTICS P NAGAR

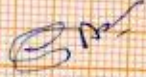
## Patient Details

Date: 10-Feb-24 Time: 11:17:42  
Name: NAVITHA K N ID: XB003311  
Age: 31 y Sex: M Height: -- cms Weight: -- Kgs

## Interpretation

The patient exercised according to the Bruce protocol for 7 m 14 s achieving a work level of Max. METS : 10.20. Resting heart rate initially 59 bpm, rose to a max. heart rate of 170 ( 90% of Pr.MHR ) bpm. Resting blood Pressure 110 / 80 mmHg, rose to a maximum blood pressure of 160 / 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 )