

26405 261024		Registration ID	: 26405	Sample Collection	: 26/10/2024 13:40:19	
Na	ame	: MR. KUMAR RAHUL			Sample Received	: 26/10/2024 13:40:19
Ag	ge/Sex	: 36 Yrs. / M	Printed	: 28/10/2024 15:50:10	Report Released	: 28/10/2024 11:11:06
Re	ef. By	: Mediwheel	Sent By	: Arcofemi Healthcare Pvt	Ltd	

COMPLETE BLOOD COUNT					
Test		Result	Unit	Biological Ref Range	
Hemoglobin	:	14.9	g/dL	13-18 g/dL	
(SLS) Photometric					
Total RBC	:	5.25	10^6/μL	3.0-6.0 10^6/μL	
(Electrical Impedence)		10.0	<b>0</b> /	22.54.67	
Hematocrit (PCV) (Calculated)	:	46.3	%	36-54 %	
Mean Corpuscular Volume (MCV) (calulated)	:	88.2	fL	78-101 fL	
Mean Corpuscular Hemoglobin (MCH) (Calculated)	:	28.4	pg	27-32 pg	
Mean Corpuscular Hemoglobin Concentration (MCHC)	:	32.2	g/dL	31.5-34.5 g/dL	
Red Cell Distribution Width (RDW- CV)	- :	14.50	%	12-15 %	
(Electrical Impedence) Total Leucocytes Count	:	7420	/cumm	4000-11000 /cumm	
(Light Scattering)			- /		
Neutrophils	:	54	%	40-75 %	
(Calculated)					
Eosinophils Percentage	:	04	%	1-6 %	
(Calculated)					
Lymphocyte Percentage	:	35	%	20-45 %	
(Calculated)					
Basophils Percentage	:	0	%	0-1 %	
(Calculated)					
Monocytes Percentage	:	07	%	1-10 %	
(Calculated)					
RBC Morphology	:	Normocytic,	Normochromic		
WBC Morphology	:	Normal Mor			
Platelet Count (Electrical Impedence)	:	159000	/ul	150000-450000 /ul	
Platelets on Smear	:	Adequate		Adequate	
E.S.R	:	07	mm at 1hr	0-20 mm at 1hr	
Sample Type:EDTA whole blood(Westergren)	·	57	at the		
Sample Type : EDTA Whole Blood	Svem	ox KX-21)			

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 13:40:19, Received At: 26/10/2024 13:40:19, Reported At: 28/10/2024 11:11:06)





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





Name: MR. KUMAR RAHULAge/Sex: 36 Yrs. / MRef. By: Mediwheel

Registration ID : 26405

Printed

Sent By

: 28/10/2024 15:50:10

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

: Arcofemi Healthcare Pvt Ltd

Sample Collection Sample Received Report Released

- : 26/10/2024 13:40:19
- : 26/10/2024 13:40:19
- : 28/10/2024 11:11:06



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





Registration ID : 26405 Sample Collection : 26/10/2024 13:40:19 Name : MR. KUMAR RAHUL Sample Received : 26/10/2024 13:40:19 Printed : 28/10/2024 15:50:10 **Report Released** : 28/10/2024 11:18:17 Age/Sex : 36 Yrs. / M Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd \_ . 

Blood Sugar Fasting (FBS) & Post Prandial Blood Sugar (PPBS)					
Test		Result	Unit	Biological Ref. Range	
GLUCOSE (SUGAR) FASTING,	:	86	mg/dL	Non-Diabetic: < 100 mg/dl	
(Fluoride Plasma Used)				Impaired Fasting Glucose: 100-	
				125 mg/dl Diabetic: >/= 126 mg/dl	
Method: GOD-POD					
GLUCOSE (SUGAR) PP, ( Fluoride	:	82	mg/dl	Non-Diabetic: < 140 mg/dl	
Plasma Used)				Impaired Glucose Tolerance: 140-	
				199 mg/dl Diabetic: >/= 200 mg/dl	

Test Done on - Automated Biochemistry Analyzer (EM 200)

### \*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 26/10/2024 13:40:19, Received At: 26/10/2024 13:40:19, Reported At: 28/10/2024 11:18:17)

HbA1c (Whole Blood)					
Test		Result	Unit	Reference Range	
HbA1C-Glycosylated Haemoglobin	:	5.10	%	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)		99.67	mg/dl	65.1-136.3 mg/dL mg/dl	
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 Assocation) 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.

(Collected At: 26/10/2024 13:40:19, Received At: 26/10/2024 13:40:19, Reported At: 28/10/2024 11:34:03)



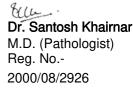








Image: 26405 261024MR. KUMAR RAHUName: MR. KUMAR RAHUAge/Sex: 36 Yrs. / MRef. By: Mediwheel	Registration ID L Printed Sent By	: 26405 : 28/10/2024 15:50:10 : Arcofemi Healthcare Pv	Sample Collection Sample Received Report Released t Ltd	: 26/10/2024 13:40:19 : 26/10/2024 13:40:19 : 28/10/2024 11:18:17				
BLOOD GROUP								
Test	Result	Unit	Biolog	ical Ref. Range				
Blood Group	: 'B' Rh P0	OSITIVE						
Slide and Tube Aggllutination Test (Collected At: 26/10/2024 13:40:19,	Received At: 26/10/202	24 13:40:19, Reported At: 28/	(10/2024 11:33:30)					

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



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





Registration ID : 26405 Sample Collection : 26/10/2024 13:40:19 Name : MR. KUMAR RAHUL Sample Received : 26/10/2024 13:40:19 Printed : 28/10/2024 15:50:10 **Report Released** Age/Sex : 28/10/2024 11:34:20 : 36 Yrs. / M Ref. By : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd

LIPID PROFILE						
Test		Result	Unit	Biological Ref. Range		
Total Cholesterol	:	210	mg/dl	Desirable: <200		
				Borderline high = 200-239		
				High: > 239		
Serum, Method: CHOD-PAP						
S. Triglyceride	:	188	mg/dl	Desirable: <161		
				Borderline High: 161 - 199		
				High: > 200 - 499/ Very High:>499		
Serum, Method: GPO-Trinder						
HDL Cholesterol	:	38	mg/dl	35.3-79.5 mg/dl		
serum,Direct method						
LDL Cholesterol	:	134.40	mg/dl	Optimal: <100;		
				Near Optimal: 100-129;		
				Borderline High: 130-159;		
				High: 160-189;		
				Very high: >190		
Serum, (Calculated)		07.0	an a /all			
VLDL Cholesterol	:	37.6	mg/dl	5-30 mg/dl		
Serum, Method: Calculated						
LDL/HDL Ratio		3.5		Optimal: <2.5		
				Near Optimal: 2.5-3.5		
				High >3.5		
Serum, Method: Calculated						
TC/HDL Ratio		5.5		Optimal: <3.5		
				Near Optimal: 3.5 - 5.0		
				High >5.0		

Serum, Method: Calculated

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.

\*All Samples Processed At Excellas Clinics Mulund Centre

(Collected At: 26/10/2024 13:40:19, Received At: 26/10/2024 13:40:19, Reported At: 28/10/2024 11:34:20)

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





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





Registration ID : 26405 Sample Collection : 26/10/2024 13:40:19 Name : MR. KUMAR RAHUL Sample Received : 26/10/2024 13:40:19 Printed : 28/10/2024 15:50:10 **Report Released** : 36 Yrs. / M : 28/10/2024 11:35:39 Age/Sex : Mediwheel Sent By : Arcofemi Healthcare Pvt Ltd Ref. By

#### LIVER FUNCTION TEST Test **Biological Ref. Range** Result Unit S. Bilirubin (Total) 0.43 mg/dl 0-2.0 mg/dl Serum, Method: Diazo (walter & Gerarde) S. Bilirubin (Direct) 0.06 mg/dl 0-0.4 mg/dl Serum, Method: Diazo (walter & Gerarde) S. Bilirubin (Indirect) 0.37 mg/dl 0.10-1.0 mg/dl • Serum, Method: Calculated 22.8 IU/L 0-35 IU/L Aspartate Transaminase (AST/SGOT) : Serum, Method: UV Kinetic with P5P IU/L 0-45 IU/L Alanine Transaminase (ALT/SGPT) : 40.0 Serum, Method: UV Kinetic with P5P 62 IU/L 53-128 IU/L S. Alkaline Phosphatase : Serum, Method: IFCC with AMP buffer **Total Proteins** 7.0 gm/dl 6.4-8.3 gm/dl Serum, Method: Biuret S. Albumin 4.2 gm/dl 3.5-5.2 gm/dl Serum, Method: BCG S. Globulin 2.8 gm/dl 2.3-3.5 gm/dl Serum, Method: Calculated 1.50 0.90-2.00 A/G Ratio Serum, Method: Calculated Gamma GT 32 U/L 0-55 U/L Serum, Method: G glutamyl carboxy nitroanilide

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

\*All Samples Processed At Excellas Clinics Mulund Centre .

(Collected At: 26/10/2024 13:40:19, Received At: 26/10/2024 13:40:19, Reported At: 28/10/2024 11:35:39)

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





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





Ref. By	: Mediwheel	Sent By	: Arcofemi Healthcare Pvt Ltd				
Age/Se	x :36 Yrs. / M	Printed	: 28/10/2024 15:50:10	Report Released	: 28/10/2024 11:17:48		
Name	: MR. KUMAR RAHUL			Sample Received	: 26/10/2024 13:40:19		
26405 2610	24	Registration ID	: 26405	Sample Collection	: 26/10/2024 13:40:19		

SEROM CREATININE							
Test	Result	Unit	Biological Ref. Range				
S. Creatinine	: 1.15	mg/dl	0.7-1.3 mg/dl				

Serum, Method: Enzymatic

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

\*All Samples Processed At Excellas Clinics Mulund Centre

(Collected At: 26/10/2024 13:40:19, Received At: 26/10/2024 13:40:19, Reported At: 28/10/2024 11:17:48)

		BLOOD UREA	EA NITROGEN (BUN)		
Test	F	Result	Unit	Biological Ref. Range	
Urea	: 3	31.30	mg/dl	19-45 mg/dl	
Serum, Method: Urease - GLDH					
Blood Urea Nitrogen	: 1	4.63	mg/dl	5-18 mg/dl	
Test Done on - Automated Biochemis	try Analyzer (EM 20	))			
*All Samples Processed At Excellas Clinics	Vulund Centre				

(Collected At: 26/10/2024 13:40:19, Received At: 26/10/2024 13:40:19, Reported At: 28/10/2024 11:17:10)

SERUM URIC ACID						
Test	Result	Unit	Biological Ref. Range			
S. Uric Acid	: <b>7.94</b>	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 13:40:19, Received At: 26/10/2024 13:40:19, Reported At: 28/10/2024 11:17:17)





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





<b>1   1   1   1   1   1   1   1   1   1  </b>	Registration ID	: 26405	Sample Collection	: 26/10/2024 13:40:19
Name : MR. KUMAR RAHUL			Sample Received	: 26/10/2024 13:40:19
Age/Sex : 36 Yrs. / M	Printed	: 28/10/2024 15:50:10	Report Released	: 28/10/2024 11:17:48
Ref. By : Mediwheel	Sent By	: Arcofemi Healthcare Pvt	Ltd	
	BUI	N CREAT RATIO (BCR)		
Test	Result	Unit	Biolog	ical Ref. Range
BUN/Creatinine ratio	: 12.60		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 13:40:19, Received At: 26/10/2024 13:40:19, Reported At: 28/10/2024 11:17:36)

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



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





26405 261024		Registration ID	: 26405	Sample Collection	: 26/10/2024 13:40:19
Name	: MR. KUMAR RAHUL			Sample Received	: 26/10/2024 13:40:19
Age/Sex	: 36 Yrs. / M	Printed	: 28/10/2024 15:50:10	Report Released	: 28/10/2024 11:33:17
Ref. By	: Mediwheel	Sent By	: Arcofemi Healthcare Pvt	Ltd	

THYROID FUNCTION TEST				
Test Result Unit Biological Ref. Range				
Total T3	:	1.2	ng/dl	0.70-2.04 ng/dl
Serum, Method: CLIA				
Total T4	:	8.11	µg/dl	5.1-14.1 μg/dl
Serum, Method: CLIA				
TSH (Thyroid Stimulating Hormone)	:	3.03	μIU/ml	0.27-5.3 μIU/ml

Serum, Method: CLIA

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.

(Collected At: 26/10/2024 13:40:19, Received At: 26/10/2024 13:40:19, Reported At: 28/10/2024 11:33:17)

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



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





26405 261024		Registration ID	: 26405	Sample Collection	: 26/10/2024 13:40:19
Name	: MR. KUMAR RAHUL			Sample Received	: 26/10/2024 13:40:19
Age/Sex	: 36 Yrs. / M	Printed	: 28/10/2024 15:50:10	Report Released	: 26/10/2024 16:50:55
Ref. By	: Mediwheel	Sent By	: Arcofemi Healthcare Pvt L	_td	

		EXAMINATION OF	URINE	
Test		Result	Unit	Biological Ref. Range
PHYSICAL EXAMINATI	<u>ON</u>			
Quantity	:	30	ml	
Colour	:	Pale yellow		
Appearance	:	Clear		
Reaction (pH)	:	6.5		4.5 - 8.0
Specific Gravity	:	1.015		1.010 - 1.030
CHEMICAL EXAMINAT	<u>ION</u>			
Protein	:	Absent		Absent
Glucose	:	Absent		Abesnt
Ketones Bodies	:	Absent		Abesnt
Occult Blood	:	Absent		Absent
Bilirubin	:	Absent		Absent
Urobilinogen	:	Absent		Normal
MICROSCOPIC EXAMI	NATION			
Epithelial Cells	:	1 - 2	/ hpf	
Pus cells	:	1 - 2	/ hpf	
Red Blood Cells	:	Absent	/ hpf	
Casts	:	Absent	/ lpf	Absent / lpf
Crystals	:	Absent		Absent
OTHER FINDINGS				
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

(Collected At: 26/10/2024 13:40:19, Received At: 26/10/2024 13:40:19, Reported At: 26/10/2024 16:50:55)

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





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





Name:MR. KUMAR RAHULAge/Sex:36 Yrs. / MRef. By:Mediwheel

Registration ID : 26405

Printed : 2

Sent By

: 28/10/2024 15:50:10

: Arcofemi Healthcare Pvt Ltd

Sample Collection Sample Received Report Released : 26/10/2024 13:40:19

- : 26/10/2024 13:40:19
- : 28/10/2024 12:41:05

### **X RAY CHEST PA VIEW**

### **CLINICAL PROFILE : NO COMPLAINTS.**

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. Raj Shah DMRE , M.B.B.S REG. NO. 2019/05/3609



20400 201024	
Name	: MR. KUMAR RAHUL
Age/Sex	: 36 Yrs. / M
Ref. By	: Mediwheel

Printed Sent By

Registration ID : 26405

: 28/10/2024 15:50:10 : Arcofemi Healthcare Pvt Ltd

Sample Collection Sample Received Report Released

- : 26/10/2024 13:40:19
- : 26/10/2024 13:40:19
- : 28/10/2024 12:41:05



(Collected At: 26/10/2024 13:40:19, Received At: 26/10/2024 13:40:19, Reported At: 28/10/2024 12:41:05)

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



- Ju Dr. Raj Shah DMRE, M.B.B.S REG. NO. 2019/05/3609





26405 261024		Registration ID	: 26405	Sample Collection	: 26/10/2024 13:40:19
Name	: MR. KUMAR RAHUL			Sample Received	: 26/10/2024 13:40:19
Age/Sex	: 36 Yrs. / M	Printed	: 28/10/2024 15:50:10	Report Released	: 28/10/2024 11:57:29
Ref. By	: Mediwheel	Sent By	: Arcofemi Healthcare Pvt Ltd		

### **USG ABDOMEN & PELVIS - FEMALE**

Liver:- is enlarged in size(16.4 cm) and shows raised echotexture.

**Gall Bladder:-** is partially 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 (10.8 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 – 10.4 x 4.1 cms Left kidney – 10.7 x 5.2 cms

**Urinary Bladder:-** is partially 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:**

### - Hepatomegaly with grade I fatty liver.

Thanks for the Referral

(Collected At: 26/10/2024 13:40:19, Received At: 26/10/2024 13:40:19, Reported At: 28/10/2024 11:57:29)

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



**Dr. Raj Shah** DMRE , M.B.B.S REG. NO. 2019/05/3609





Name:MR. KUMAR RAHULAge/Sex:36 Yrs. / MRef. By:Mediwheel

HUL Printed Sent By

Registration ID : 26405

: 26405 Sample Collection Sample Received : 28/10/2024 15:50:10 Report Released : 26/10/2024 13:40:19

: 26/10/2024 13:40:19

: 28/10/2024 11:38:33

### **OPTHALMIC EVALUATION**

: Arcofemi Healthcare Pvt Ltd

Examination	Right Eye	Left Eye		
Distance Vision	6/9	6/9		
Near Vision	N/6	N/6		
Color Vision	Noi	Normal		
Remarks	Νοι	Normal		

(Collected At: 26/10/2024 13:40:19, Received At: 26/10/2024 13:40:19, Reported At: 28/10/2024 11:38:33)

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





# Excellas Clinics

MEDICAL EXAMINATION REPORT					
Name Mr./Mrs./ Miss	KUMAR Rahul -	KUMAR Rahul.			
Sex	Male/ Female				
Age (yrs.) 35	UHID :				
Date	2611012024	Bill No. :			
Marital Status	Married/ No. of Children / Unmar	ried/Widow :			
Present Complaints	No-				
Past Medical : History Surgical :	No				
Personal History	Diet : Veg 🗆 / Mixed 🗁 :				
	Addiction : Smoking $\Box$ / Tobac Any Other $\sqrt{2}$ -	co Chewing 🗆 / Alcohol 🗊/			
Family History Father =	HT / DM / IHD / Stroke / Any C	Other			
Mother =	Mother = HT / DM / IHD / Stro	•			
Siblings =	Siblings = HT / DM / IHD / Stro	oke / Any Other			
History of Allergies	Drug Allergy N₀				
	Any Other				
History of Medication	For HT / DM / IHD / Hypothyro	idism			
	Any Other No				
On Examination (O/E)	G.E.: fair R.S.: Arebe C.V.S.: 575(7) C.N.S.: Cone orient P/A: SOFF nontender				
	Any Other Positive Findings :				

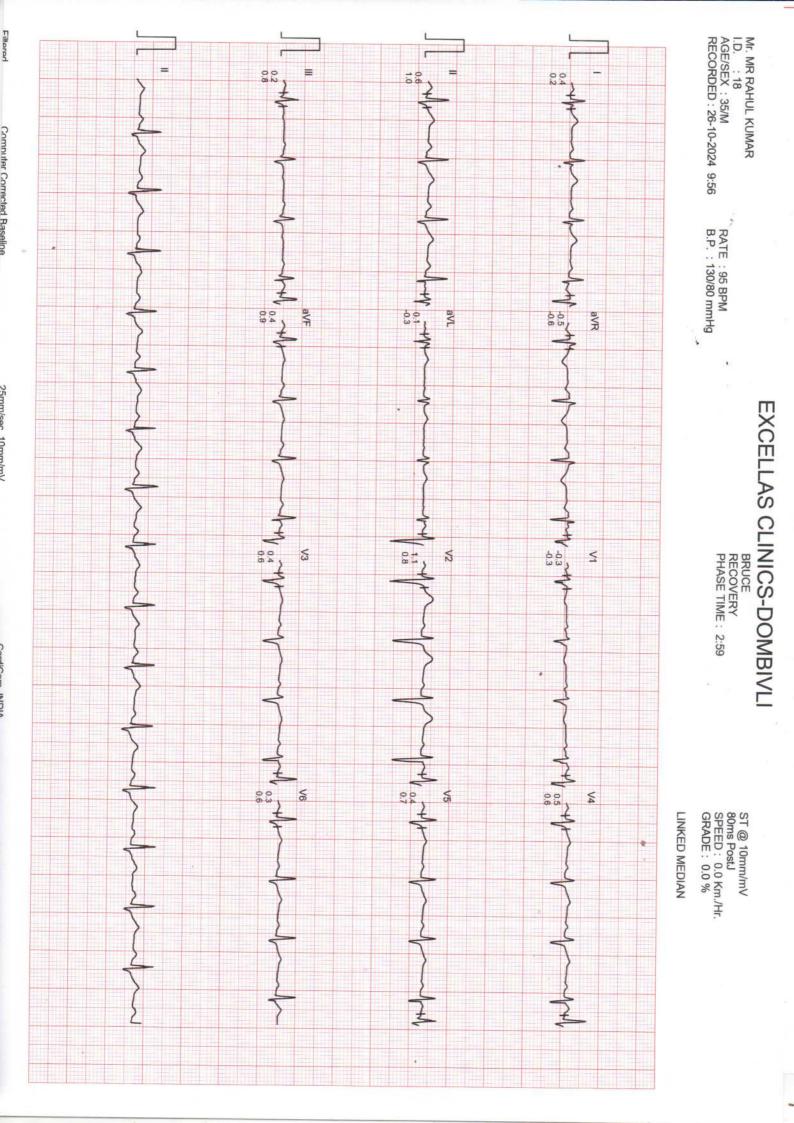
Height 176.5 cms	Weight	91.9 Kgs	
BMI 29.5		ANAXA CANES	(R.A
Pulse (per min.) 70 m	THE STREET	Pressure ( mm of Hg)	130/80
	Gynaeco	blogy	x92
Examined by	Dr.	. <u>a</u> llei 7	ann AgA
Complaint & Duration	14	1. š *	ginO
Other symptoms (Mict, bowels etc)	ibean ing main		Marital Status
Menstrual History	Menarche	Cycle	Present Compisints exed
	Pain	I.M.B	P.C.B
	L.M.P.	Vaginal Discharge	History Eurgen
	Cx. Smear	Contraception	Personal History
Obstetric History	g a na internetion	Asamija nolianstA	
Examination :		Any Other In	
Breast		2 YOHL' MOLTH	Renning Bristony Filmen
Abdomen	My IHQ + Stroke	Id ITH - spridde -	Sterner.
P.S.		yy'. Alaole tru, -	listory // / lengles
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Gynaecology Impression & Recommendation	uaino ny fito ay m	For HTTON THE	History of Medication
Recommendation	· · · · · · · · · · · · · · · · · · ·		
	In such as the second s	≽å <sub>rte</sub> r er is	
Physician Impression	e esta		
Examined by :	- Overweight	= To Reduce Weight t = To Increase Weight	

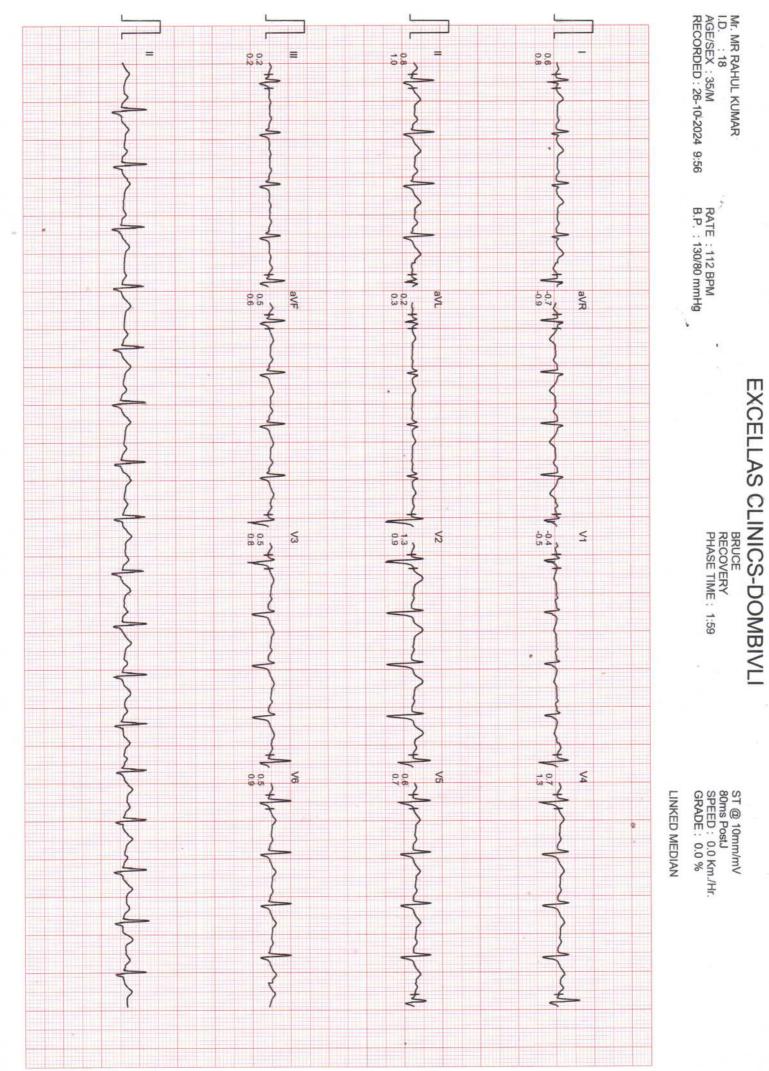
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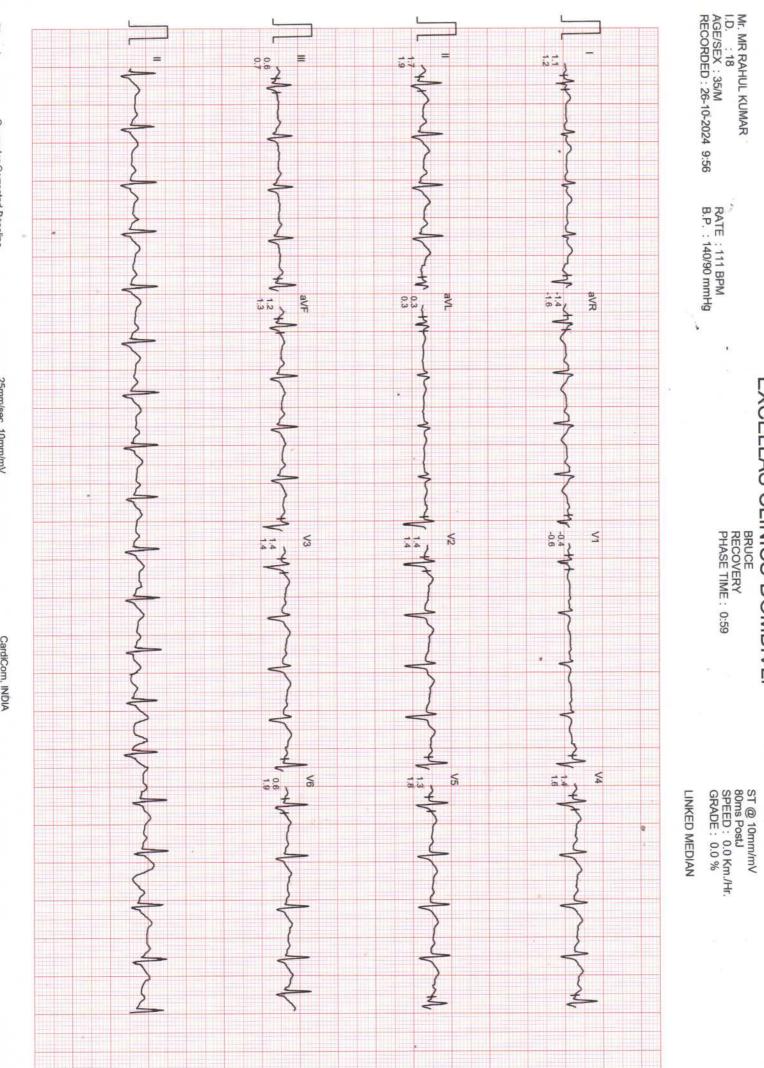
4

	GOOD EFFORT TOLERANCE, NORMAL IONOTROPIC AND CHRONO I ROPIC RESPONCE. NO ANGINAARRYTHMIA'S/LV DYSFUNCTION. NO SIGNIFICANT ST CHANGES AT PEAK OF TEST. TEST IS NEGATIVE FOR EXERCISE INDUCED REVERSABLE ISCHEMIA.	RESULTS Exercise Duration Max Heart Rate Max Blood Pressure Max Work Load Reason of Termination	SUPINE HYPERVENT STANDING STAGE 1 STAGE 2 STAGE 3 PEAK EXER	PHASE	Mr. MR RAHUL KUMAR Age/Sex : 35/M Ref. by : MEDIWHEEL Indication?
	E FOR EXER		0:02 5:59 6:14	PHASE	ËR
	CISE INDUCED	6:20 Minutes 163 bpm 88 % 140/90 mmHg 7.42 METS Achieved THR	0:02 2:59 0:14 0:20	STAGE	;
	, NO SIGNIFICAN REVERSABLE IS	6:20 Minutes 163 bpm 88 % of target heart rate 185 bpm 140/90 mmHg 7.42 METS Achieved THR	5.40	SPEED (Km./Hr.)	ID : 18 HtWt : 176/91 Recorded : 26-10-2024 9:56
	T ST CHANGES / CHEMIA.	e 185 bp ,	10.00 12.00 14.00	GRADE (%)	
	AT PEAK OF T		163 163	(BPM)	
Cardiologist	EST.		120/70 120/70 120/70 120/70 130/80 140/90 140/90	B,P. (mmHg)	TREADMILL TEST SUMMARY REPORT Protocol: BRUCE History: NIL Medication1 : Medication2 : Medication3 :
St			94 146 222 228	X100	E SUMMARY
	3 <b>2 1</b>		1.9 0.0 0.9 0.0 0.9	=	REPORT
	Reg. No. 2012/09/2681		1.8 1.6 0.6 0.5 0.5	ST LEVEL (mm) V2	
	HIRAY DNB MED 2/09/2681		0.8 0.8 0.8	5	
			4.80 7.10 7.42	METS	

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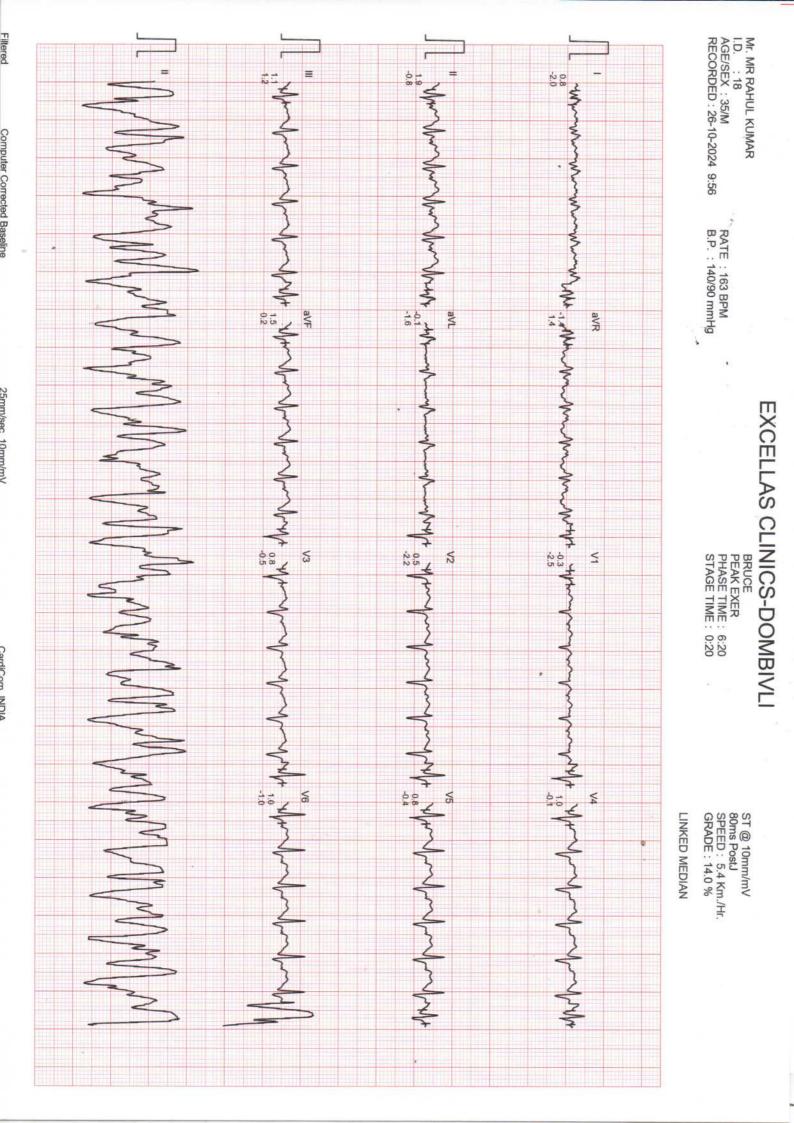


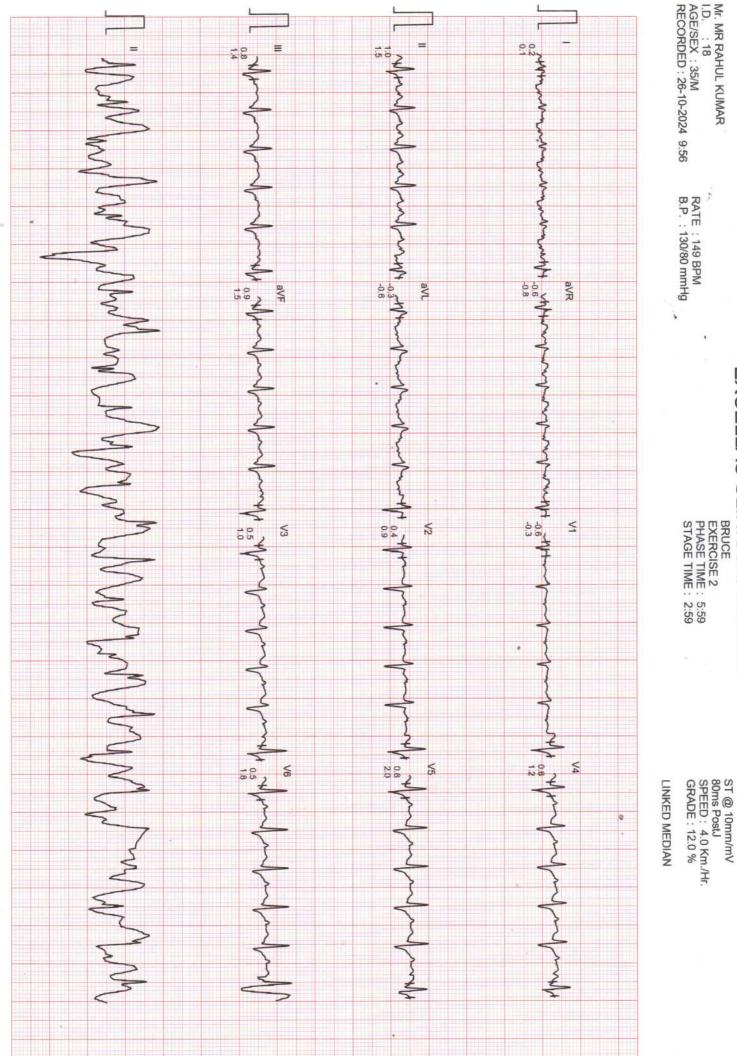




25mm/een 10mm/mV

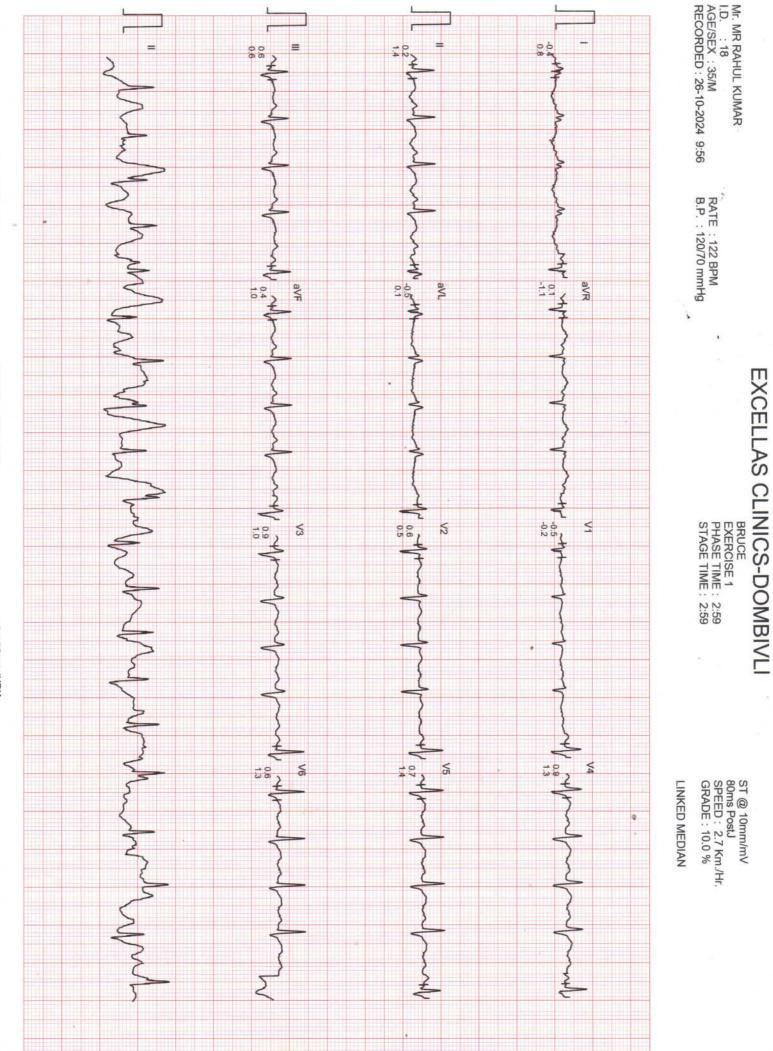
EXCELLAS CLINICS-DOMBIVLI





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EXCELLAS CLINICS-DOMBIVLI

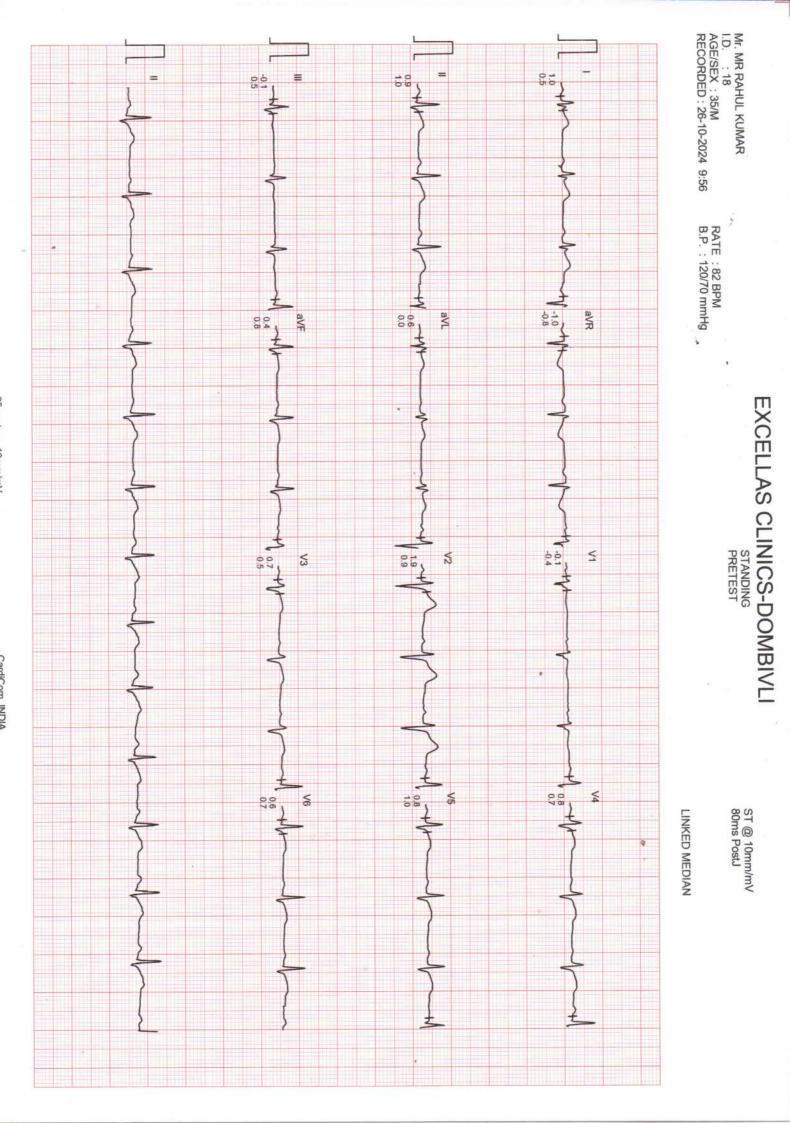


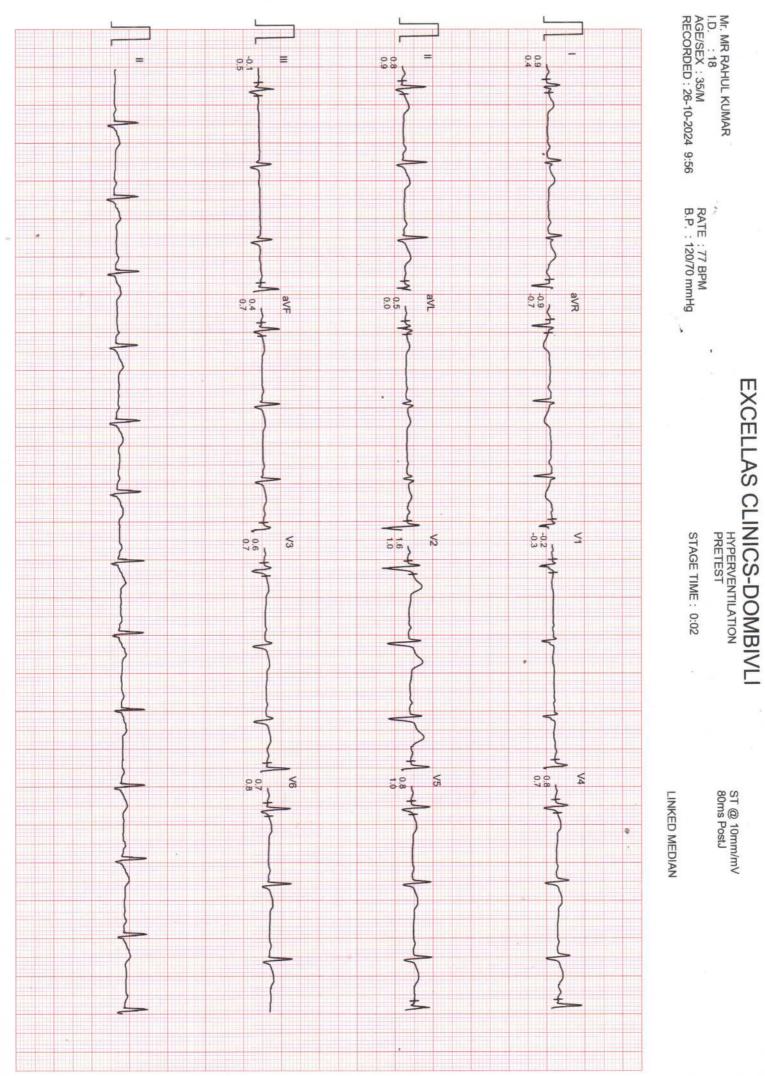
Committee Corrected Recellin

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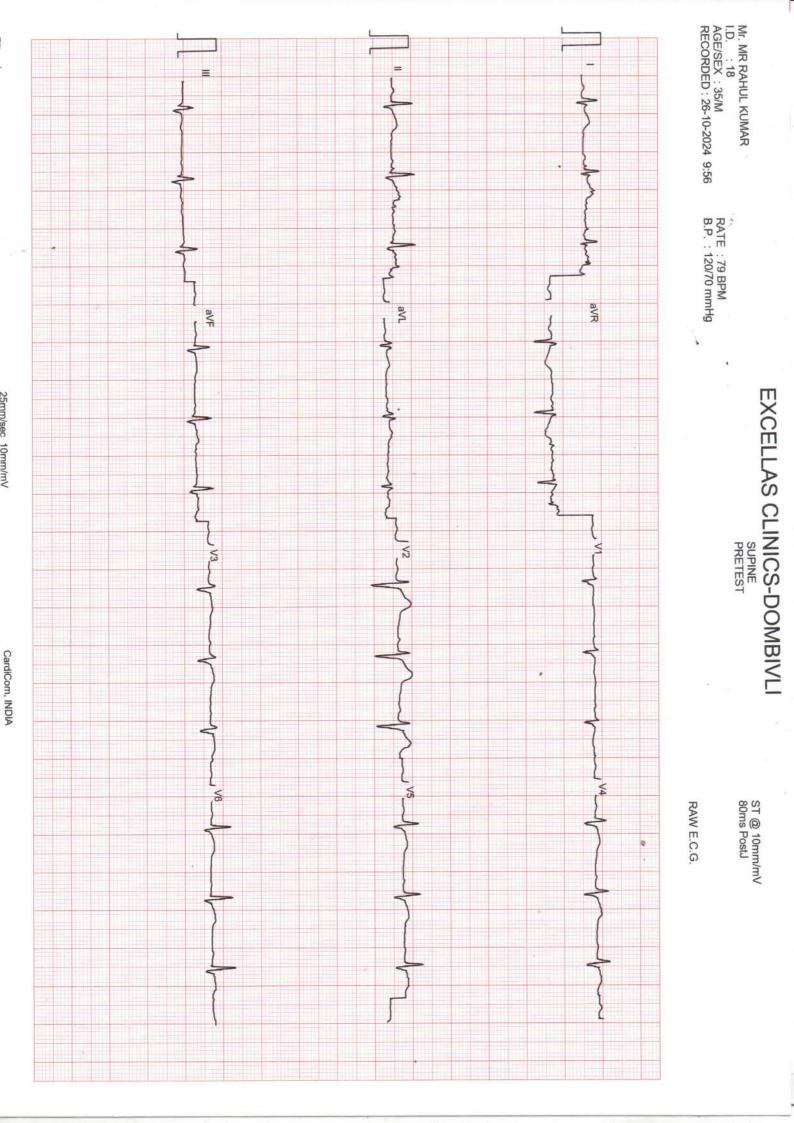
25mm/sec 10mm/mV

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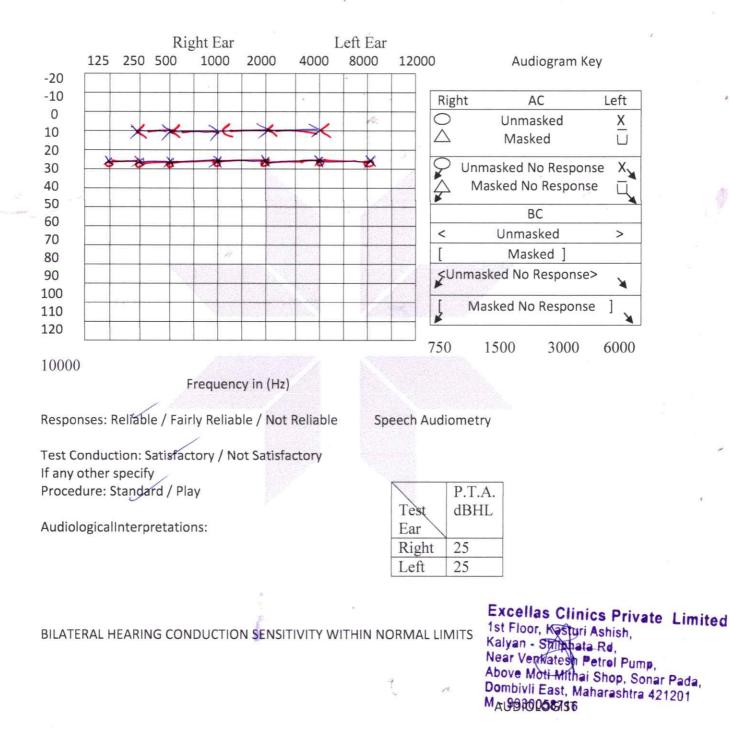
### NAME : MR. KUMAR RAHUL REF BY: MEDIWHEEL

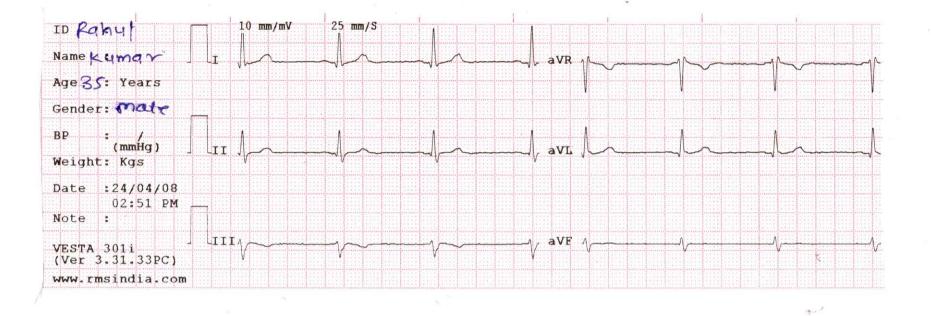
SO 9001 2015

CERTIFIED

### AGE: 36 YRS / MALE DATE: 26/10/2024

#### AUDIOGRAM





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