


**भारत सरकार**  
**GOVERNMENT OF INDIA**


**विक्रम सिंह**  
**Vikram Singh**  
 जन्म तिथि / DOB: 22/05/1983  
 पुरुष / MALE



**8628 5732 3717**

**मेरा आधार, मेरी पहचान**


**भारतीय विशिष्ट पहचान प्राधिकरण**  
**UNIQUE IDENTIFICATION AUTHORITY OF INDIA**

**पता:**  
 S/O जगदीश सिंह राठौर, हॉ  
 गंगानगर, गंगानगर,  
 राजस्थान - 335001

**Address:**  
 S/O Jagdish Singh Ra  
 jawahar nagar, Gang  
 Rajasthan - 335001

**Address**  
 S/O Jagdish Singh Rathore  
 hous no 6 -O 26 jawahar  
 nagar Ganganagar  
 Sriganganagar Ganganagar  
 Rajasthan - 335001


**8628 5732 3717**

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**Rajasthani Diagnostic &  
 Medical Research Centre  
 Jhunjhunu**







# RAJASTHANI DIAGNOSTIC & MR CENTRE

FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI

CT SCAN

TMT

SONOGRAPHY

X-RAY

ECG

MAMOGRAPHY

NAME	VIKRAM SINGH	AGE-	SEX: M
REF/BY:	BOB HEALTH CHECKUP	DATE	26-Oct-24

## ULTRASONOGRAPHY WHOLE ABDOMEN

**Liver:** is normal in size, shape and echotexture. No IHBR dilatation is seen. No focal mass seen. Portal vein and hepatic veins are normal in diameter. Common bile duct is normal in diameter and lumen is clear.

**Gall bladder:** is normal in size shape, location with echo free lumen. Wall thickness is normal. No echogenic shadow suggestive of calculus is seen. No focal mass or lesion is seen.

**Pancreas:** is normal in size, shape and echotexture. No focal mass or lesion is detected. Pancreatic duct is not dilated.

**Rt. Kidney:** is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

**Lt. Kidney:** is normal in size, shape, position and echotexture. Corticomedullary differentiation is well maintained. No evidence of definite calculus/ hydronephrosis is seen.

**Spleen:** is normal in size, regular in shape and echo texture. No focal lesion is seen. Splenic vessels are normal.

**Urinary Bladder:** is well distended. Outline of bladder is regular. Wall thickness is normal. No focal mass is seen. No echogenic shadow suggestive of calculus is seen.

**Prostate:** is normal in size, regular in shape and outline. Capsule is intact. No evidence of ascites is seen. No significant Lymphadenopathy is seen. No obvious bowel pathology is seen. Retroperitoneum including aorta, IVC are unremarkable.

### IMPRESSION:

❖ NO SIGNIFICANT ABNORMALITY.

Advised: clinicopathological correlation

DR. ANUSHA MAHALAWAT  
MD RADIODIAGNOSIS

Dr. Anusha Mah. lawat  
MD (Radiodiagnosis)  
(RMC. 38742/25457)



आपातकालीन सेवाएं

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FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI

CT SCAN

TMT

SONOGRAPHY

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MAMOGRAPHY

Patient ID		Patient Name	VIKRAM SINGH
Age	41YRS	Date	26-Oct-24
Gender	MALE	Ref Doctor	SELF

## X-RAY CHEST (PA)

Both lung fields appear normal in under view  
 No e/o consolidation or cavitations is seen.  
 Both costo-phrenic angles appear clear.  
 Cardiac size is within normal limits.  
 Both domes of diaphragm appear normal.  
 Bony thoracic cage & soft tissue shadow appear normal.

**IMPRESSION :- NORMAL X-RAY CHEST (PA)**

*Nirmala*  
 Dr. Nirmala Royal  
 MD (Radiodiagnosis)  
 RMC - 32422/24686

*Note - Please correlate the measurements on the typed report with the image and in case of any discrepancy/doubt, please contact us immediately. There is only a professional opinion and should be correlated clinically. No valid for medico-legal purpose.*

Dr. Nirmala Royal  
 MD (Radiodiagnosis)  
 RMC 32422/24686

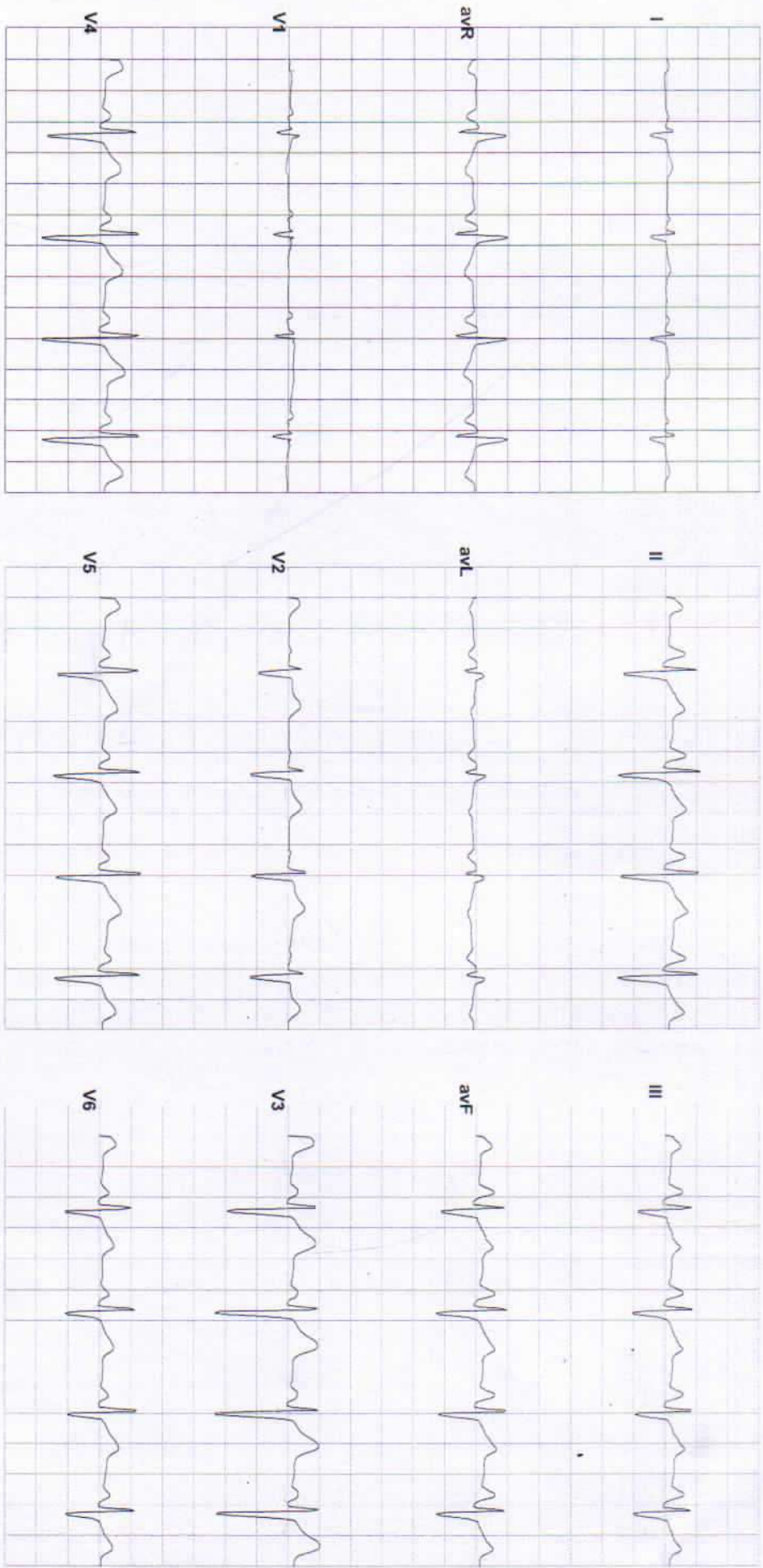


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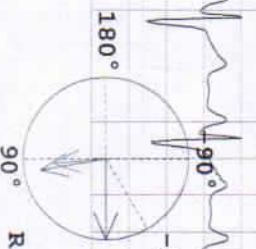


**ECG**

**RAJASTHANI DIAG. & MR CENTRE, JHUNJHUNU**  
34 BOB 26.10. / VIKRAM SINGH / 41 Yrs / M / 181Cms. / 81Kgs. / Non Smoker  
Heart Rate : 92 bpm / Tested On : 26-Oct-24 12:50:30 / HF 0.05 Hz - LF 35 Hz / Notch 50 Hz / Sn 1.00 Cm/mV / Sw 25 mm/s  
/ Refd By: BOB HEALTH CHECK UP



Vent Rate : 92 bpm  
PR Interval : 126 ms  
QRS Duration: 86 ms  
QT/QTc Int : 344/400 ms  
P-QRS-T axis : 85.00° 0.00° 80.00°



Axis  
R 0.00° T 80.00° P 85.00°

Allengers ECG (Piscce)(PISZ18210312)

Reported By: **Rajasthani Diagnostic & Medical Research Centre**  
Jhunjhunu

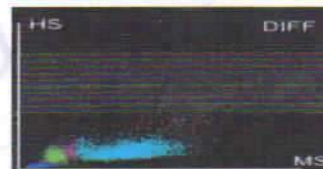
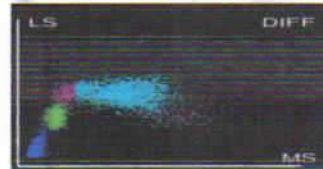
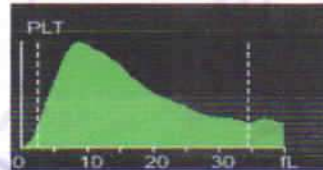
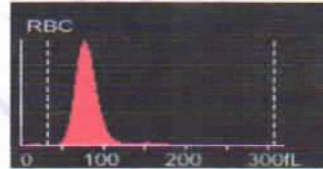
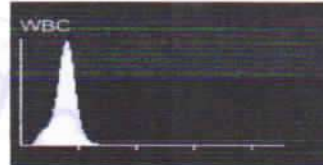




### Hematology Analysis Report

First Name: VIKRAM SINGH Sample Type: Sample ID: 9  
 Last Name: Department: Test Time: 26/10/2024 11:00  
 Gender: Male Med Rec. No.: Diagnosis:  
 Age: 41 Year

Parameter	Result	Ref. Range	Unit
1 WBC	7.08	4.00-10.00	10 <sup>3</sup> /uL
2 Neu%	59.7	50.0-70.0	%
3 Lym%	30.7	20.0-40.0	%
4 Mon%	4.4	3.0-12.0	%
5 Eos%	4.7	0.5-5.0	%
6 Bas%	0.5	0.0-1.0	%
7 Neu#	4.23	2.00-7.00	10 <sup>3</sup> /uL
8 Lym#	2.17	0.80-4.00	10 <sup>3</sup> /uL
9 Mon#	0.31	0.12-1.20	10 <sup>3</sup> /uL
10 Eos#	0.33	0.02-0.50	10 <sup>3</sup> /uL
11 Bas#	0.04	0.00-0.10	10 <sup>3</sup> /uL
12 RBC	4.97	3.50-5.50	10 <sup>6</sup> /uL
13 HGB	12.2	11.0-16.0	g/dL
14 HCT	42.1	37.0-54.0	%
15 MCV	84.8	80.0-100.0	fL
16 MCH	24.6	L 27.0-34.0	pg
17 MCHC	29.1	L 32.0-36.0	g/dL
18 RDW-CV	13.0	11.0-16.0	%
19 RDW-SD	45.4	35.0-56.0	fL
20 PLT	172	100-300	10 <sup>3</sup> /uL
21 MPV	11.2	6.5-12.0	fL
22 PDW	17.4	H 9.0-17.0	%
23 PCT	0.192	0.108-0.282	%
24 P-LCR	46.0	H 11.0-45.0	%
25 P-LCC	79	30-90	10 <sup>3</sup> /uL



Dr. Mamta Khutela  
 M.D. (Path.)  
 RMC No. 4720/16260

Submitter: Operator: admin Approver:  
 Draw Time: 26/10/2024 10:59 Received Time: 26/10/2024 10:59 Validated Time:  
 Report Time: Remarks:

\*The Report is responsible for this sample only. If you have any questions, please contact us in 24 hours



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# RAJASTHANI DIAGNOSTIC & MRI CENTRE



## FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO. MC-5346

Patient Name: <b>VIKRAM SINGH</b>		Registered on : 26-10-2024 11:06 AM
Sr. No. : 10		Collected On : 26-10-2024 11:06 AM
Patient ID No.: 11136		Received On : 26-10-2024 11:06 AM
Age : 41 Gender : MALE		Reported On : 27-10-2024 10:21 AM
Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP		Bar Code
		LIS Number 7 1 5 3

### LIPID PROFILE COMPLETE

Test Name	Observed Values	Units	Reference Intervals
Cholesterol ( Method : CHOD-PAP )	193.00	mg/dL	Adults- Desirable: <200 Borderline: 200-239 High: >239 Children- Desirable: <170 Borderline: 170-199 High: >199
HDL Cholesterol	52.01	mg/dL	35--88
Triglycerides ( Method : GPO )	145.00	mg/dL	Recommended triglycerides levels for adults: Normal: <161 High: 161-199 Hypertriglycerdemic: 200-499 Very high:>499
LDL Cholesterol	111.99	mg/dL	0--150
VLDL Cholesterol	29.00	mg/dL	0--35
TC/HDL Cholesterol Ratio	3.71	Ratio	2.5--5
LDL/HDL Ratio	2.15	Ratio	1.5--3.5

### HAEMATOLOGY

Test Name	Observed Values	Units	Reference Intervals
ESR (Erythrocyte Sedimentation Rate)	15	mm/hr	20
BLOOD GROUPING (ABO & Rh )	O+ Positive		

*Ashish Sethi*  
Dr. Ashish Sethi  
Consultant Biochemist  
**24/7**  
EMERGENCY SERVICE  
PATHOLOGIST

*Manika Khulela*  
Dr. Manika Khulela  
BMC No. 147  
PATHOLOGIST

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**B-110, Indra Nagar, Jhunjhunu (Raj.) Ph. No. 01592-294977**





# RAJASTHANI DIAGNOSTIC & MRI CENTRE



FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO.  
MC-5346

Patient Name: **VIKRAM SINGH**  
Sr. No. : 10  
Patient ID No.: 11136  
Age : 41 Gender : MALE  
Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP



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## HAEMATOLOGY

### HbA1c(Glycosylated hemoglobin)

Test Name	Observed Values	Units	Reference Intervals
HbA1c(Glycosylated hemoglobin)	5.20	%	< 6.50 Non-Diabetic 6.50~7.00 Very Good Control 7.10 - 8.00 Adequate Control 8.10 - 9.00 Suboptimal Control 9.10 - 10.00 Diabetic Poor Control > 10.00 Very Poor Control
eAG (Estimated Average Glucose)	102.54	mg/dL	
eAG (Estimated Average Glucose)	5.69	mmol/L	

Method : Fluorescence Immunoassay Technology

Sample Type : EDTA Blood

Test Performed by:-

Fully Automated (EM 200 ) ERBA MANNHEIM.

#### Remarks :

Glycosylated Hemoglobin Testing is Recommended for both (a) Checking Blood Sugar Control in People who might be Pre-Diabetic. (b) Monitoring Blood Sugar Control in patients in more elevated levels, termed Diabetes Mellitus. The American Diabetic Association suggests that the Glycosylated Hemoglobin Test be Performed atleast Two Times in Year in Patients with Diabetes that are meeting Treatment Goals (and That have stable glycemic Control) and Quarterly in Patients with Diabetes whos therapy has changed or that are not meeting Glycemic Goals.

Glycosylated Hemoglobin measurement is not appropriate where there has been change in diet or Treatment within 6 Weeks. Hence people with recent Blood Loss, Hemolytic Anemia, or Genetic Differences in the Hemoglobin Molecule (Hemoglobinopathy) such as Sickle-cell Disease and other Conditions, as well as those that have donated Blood recently, are not suitable for this Test.

Dr. Ashish Sethi  
Consultant Biochemist



Dr. Manita Khutela  
Pathologist



PATHOLOGIST

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## FULLY COMPUTERISED PATHOLOGY LABORATORY

**MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY**

NABL CERTIFICATE NO.  
MC-5346

Patient Name: **VIKRAM SINGH**  
Sr. No. : 10  
Patient ID No.: 11136  
Age : 41 Gender : MALE  
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### BIO-CHEMISTRY

Test Name	Observed Values	Units	Reference Intervals
Glucose Fasting (Method : GOD-POD)	93.00	mg/dL	Glucose Fasting Cord: 45-96 New born, 1d: 40 -60 New born, >1d: 50-80 Child: - 60-100 Adult: 74-100 >60 Y: 82-115 >90 Y: 75-121

### KIDNEY FUNCTION TEST

Test Name	Observed Values	Units	Reference Intervals
Blood Urea (Method : Urease-GLDH)	25.00	mg/dL	Adults Women < 50 years : 13-40 Women > 50 years : 21-43 Men < 50 years : 19-45 Men > 50 years : 18-55 Children 1-3 years : 11-36 4-13 years : 15-36 13-19 years : 18-45
Creatinine (Method : Enzymatic Creatininase)	0.87	mg/dL	0.4-1.40
Calcium	9.66	mg/dL	8.5-11
Uric Acid (Method : Urease-POD)	4.15	mg/dL	2.4-7.2

*Ashish sethi*

Dr. Ashish Sethi  
Consultant Biochemist



*Namita Khule*

Dr. Namita Khule  
M.D (Path.)  
BNC No. : 4730



PATHOLOGIST

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# RAJSTHANI DIAGNOSTIC & MRI CENTRE



FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO.  
MC-5346

Patient Name: **VIKRAM SINGH**  
Sr. No. : 10  
Patient ID No.: 11136  
Age : 41 Gender : MALE  
Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP



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## BIO-CHEMISTRY Liver Function Test

Test Name	Observed Values	Units	Reference Intervals
SGOT/AST(Tech.: -UV Kinetic)	31.00	U/L	5--40
SGPT/ALT(Tech.: -UV Kinetic)	29.00	U/L	5--40
Bilirubin(Total) (Method : Diazo)	0.88	mg/dL	Adults: 0-2, Cord < 2 Newborns, premature 0-1 day :1-8, 1-2 days : 6-12, 3-5 days : 10-14 Newborns, full term 0-1 day: 2-6, 1-2 days : 6-10, 3-5 days : 4-8
Bilirubin(Direct)	0.15	mg/dL	0--0.3
Bilirubin(Indirect)	0.73	mg/dL	0.1--1.0
Total Protein (Method : BIURET Method)	7.09	g/dL	Adults : 6.4 - 8.3 Premature : 3.6 - 6.0 Newborn : 4.6 - 7.0 1 Week : 4.4 - 7.6 7-12 months : 5.1 - 7.3 1-2 Years : 5.6 - 7.5 > 2 Years : 6.0 - 8.0
Albumin(Tech.: -BCG) (Method : BCG)	3.97	gm/dL	0-4 days: 2.8-4.4 4d-14 yrs: 3.8-5.4 14y-18y : 3.2-4.5 Adults 20-60 yrs: 3.5-5.2 60-90 yrs: 3.2-4.6
Globulin(CALCULATION)	3.12	gm/dL	2.5--4.5
A/G Ratio(Tech.: -Calculated)	1.27		1.2 -- 2.5
Alkaline Phosphatase(Tech.: -Pnp Amp Kinetic)	258.00	U/L	108-306

*Ashish Sethi*  
Dr. Ashish Sethi  
Consultant Biochemist  
**24/7**  
EMERGENCY SERVICE  
TECHNOLOGIST

*Kamta Khulsi*  
Dr. Kamta Khulsi  
M.D. (Path.)  
DNC No. : 47201



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FULLY COMPUTERISED PATHOLOGY LABORATORY

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Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP		Bar Code
	LIS Number 7 1 5 3	

## THYROID HORMONES T3,T4,TSH (THYROID PROFILE)

Test Name	Observed Values	Units	Reference Intervals
T3 (Total Triiodothyronine)	0.69	ng/ML	0.6 - 1.8 ng/ML
T4 (TotalThyroxine)	7.45	µg/dL	4.60-12.50 µg/dL
TSH (Thyroid Stimulating Hormone)	2.19	µIU/mL	0.35--5.50

Sample Type : Serum

Test Performed by:-

Fully Automated Chemi Luminescent Immuno Assay (ARCHITECT- i1000 PLUS ) Abbott USA

Remarks :

Primary malfunction of the Thyroid gland may result in excessive (hyper) or Low (hypo) release of T3 or T4. In additional, as TSH directly affect thyroid function, malfunction of the pituitary or the hypothalamus influences the thyroid gland activity.

Disease in any portion of the thyroid-pituitary-hypothalamus system may influence the level of T3 and T4 in the blood, in Primary Hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels may be low. In addition, in Euthyroid sick syndrome, multiple alterations in serum thyroid function test findings have been recognized.

*Ashish Sethi*

Dr. Ashish Sethi  
Consultant Biochemist



*Mamta Khulbe*

Dr. Mamta Khulbe  
Biochemist

BMC No. 47710



PATHOLOGIST

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# RAJASTHANI DIAGNOSTIC & MRI CENTRE



## FULLY COMPUTERISED PATHOLOGY LABORATORY

MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

NABL CERTIFICATE NO.  
MC-5346

Patient Name: **VIKRAM SINGH**  
Sr. No. : 10  
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### IMMUNOLOGY

Test Name	Observed Values	Units	Reference Intervals
PSA (Prostate-Specific Antigen)	0.98	ng/mL	NORMAL 0 - 4.00 Borderline 4 - 10 High More than 10.00

Method : Fluorescence Immunoassay Technology

Sample Type : Serum / Plasma / Whole Blood

Test Performed by:-

Fully Automated Chemi Luminescent Immuno Assay (ARCHITECT- i1000 PLUS ) Abbott USA

#### SUMMARY:-

PSA is localized in the cytoplasm of prostatic ductal epithelium and in secretions of the ductal lumina. Because PSA is a secretory protein of the prostate, it can be recovered and purified both from prostatic tissue and from seminal plasma. PSA has been found to be primarily associated with prostate tissue, and elevated serum PSA has been found in patients with prostate cancer, benign prostatic hypertrophy, and inflammatory conditions. Serum PSA alone is not suitable as a screen for prostate cancer because elevated PSA concentrations are also observed in patients with benign prostatic hypertrophy (BPH), nor is it recommended as a guide in disease staging. The combination of PSA measurement and rectal examination with ultrasonography in the event of abnormal findings may provide a better method of detecting prostate cancer than rectal examination alone. PSA determinations can be useful in detecting metastatic or persistent disease in patients following surgical or medical treatment of prostate cancer.

*Ashish Sethi*

Dr. Ashish Sethi  
Consultant Biochemist



*Kamla Kishor*

Dr. Kamla Kishor  
Pathologist



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MRI CT SCAN TMT SONOGRAPHY X-RAY ECG MAMOGRAPHY

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Ref. By Dr : MEDI-WHEEL HEALTH CHECKUP		Bar Code
		LIS Number 7 1 5 3

## URINE EXAMINATION URINE COMPLETE

Test Name	Observed Values	Units	Reference Intervals
<b>PHYSICAL</b>			
Quantity	20	ml	
Colour	Pale Yellow		
Appearance / Transparency	Clear		
Specific Gravity	1.020		
PH	5.0		4.5-6.5
<b>CHEMICAL</b>			
Reaction	Acidic		
Albumin	trace		
Urine Sugar	Nil		
<b>MICROSCOPIC</b>			
Red Blood Cells	Nil	/h.p.f.	
Pus Cells	4-6	/h.p.f.	
Epithelial Cells	0-1	/h.p.f.	
Crystals	Nil	/h.p.f.	
Casts	Nil	/h.p.f.	
Bactria	Nil	/h.p.f.	
Others	Nil	/h.p.f.	
Test Name	Observed Values	Units	Reference Intervals
URINE SUGAR FASTING	Nil		

<<< END OF REPORT >>>

>>> Results relate only to the sample as received. Kindly correlate with clinical condition. <<<

Note: This report is not valid for medico legal purposes.

*Ashish Sethi*  
Dr. Ashish Sethi  
Consultant Biochemist  
**24/7**  
EMERGENCY SERVICE  
PHYSICIAN

*Namita Khutela*  
Dr. Namita Khutela  
M.D. (Path.)  
BMC No. : 4720/15



PATHOLOGIST

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**B-110, Indra Nagar, Jhunjhunu (Raj.) Ph. No. 01592-294977**

# RAJASTHANI DIAGNOSTIC & MEDICAL RESEARCH CENTRE

B-110,INDIRA NAGAR,SUBHASH MARG,MANDAWA MOD,JHUNJHUNU Email:

VIKRAM SINGH / 41 Yrs / M / 181 Cms / 81 Kg  
 Date: 26 - 10 - 2024 Technician : MANOJ CHOUDHARY Examined By:

Report



Stage	Time	Duration	Speed(mph)	Elevation	METs	Rate	% THR	BP	RPP	PVC	Comments
Supine	01:03	1:03	00.0	00.0	01.0	081	45 %	130/80	105	00	
Standing	02:04	1:01	00.0	00.0	01.0	076	42 %	130/80	098	00	
HV	03:06	1:02	00.0	00.0	01.0	082	46 %	130/80	106	00	
Warm Up	04:08	1:02	00.0	00.0	01.0	084	47 %	130/80	109	00	
ExStart	05:09	1:01	01.0	00.0	01.0	096	54 %	132/82	126	00	
BRUCE Stage 1	08:09	3:00	01.7	10.0	04.7	115	64 %	134/84	154	00	
BRUCE Stage 2	11:09	3:00	02.5	12.0	07.1	132	74 %	136/86	179	00	
BRUCE Stage 3	14:09	3:00	03.4	14.0	10.2	156	87 %	138/88	215	00	
PeakEx	14:13	0:04	01.1	00.0	10.3	156	87 %	138/88	215	00	
Recovery	14:43	0:30	01.1	00.0	07.3	147	82 %	138/88	202	00	
Recovery	15:13	1:00	01.1	00.0	04.3	138	77 %	140/90	193	00	
Recovery	16:13	2:00	00.0	00.0	01.0	115	64 %	136/86	156	00	
Recovery	17:13	3:00	00.0	00.0	01.0	099	55 %	134/84	132	00	
Recovery	18:13	4:00	00.0	00.0	01.0	100	56 %	232/82	232	00	
Recovery	19:11	5:00	00.0	00.0	01.0	092	51 %	130/80	119	00	

## FINDINGS :

Exercise Time : 09:04  
 Initial HR (ExStrt) : 96 bpm 54% of Target 179  
 Initial BP (ExStrt) : 132/82 (mm/Hg)  
 Max Workload Attained : 10.3 Good response to induced stress  
 Max ST Dep Lead & Avg ST Value : V1 & -1.0 mm in Recovery  
 Test Objective : BOB HEALTH CHECK UP  
 Test End Reasons : Test Complete, Heart Rate Achieved

## REPORT :

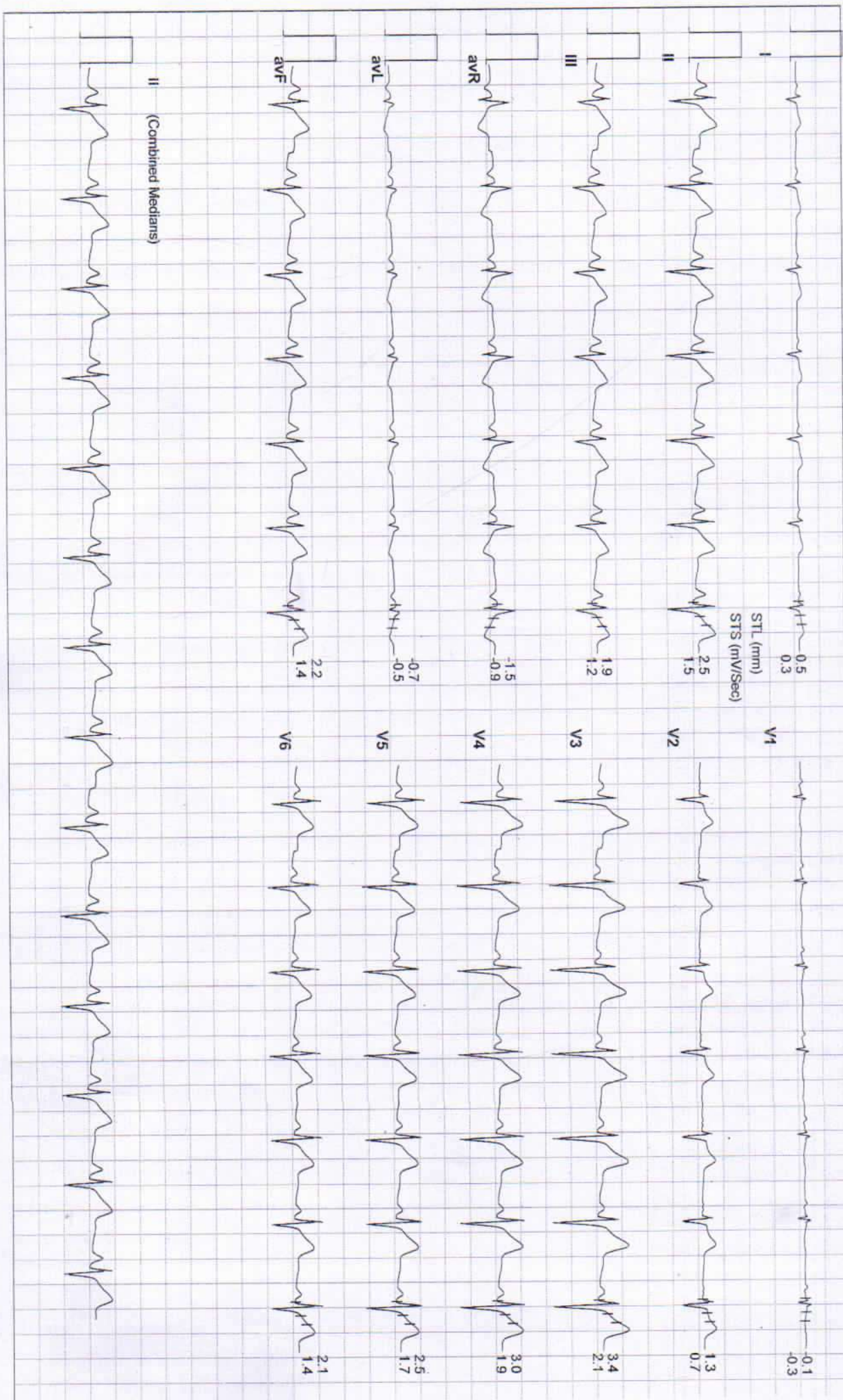
Max HR Attained 156 bpm 87% of Target 179  
 Max BP Attained 232/82 (mm/Hg)

Rajasthani Diagnostic & Medical Research Centre  
 Jhunjhunu  
 Doctor : RDMRC





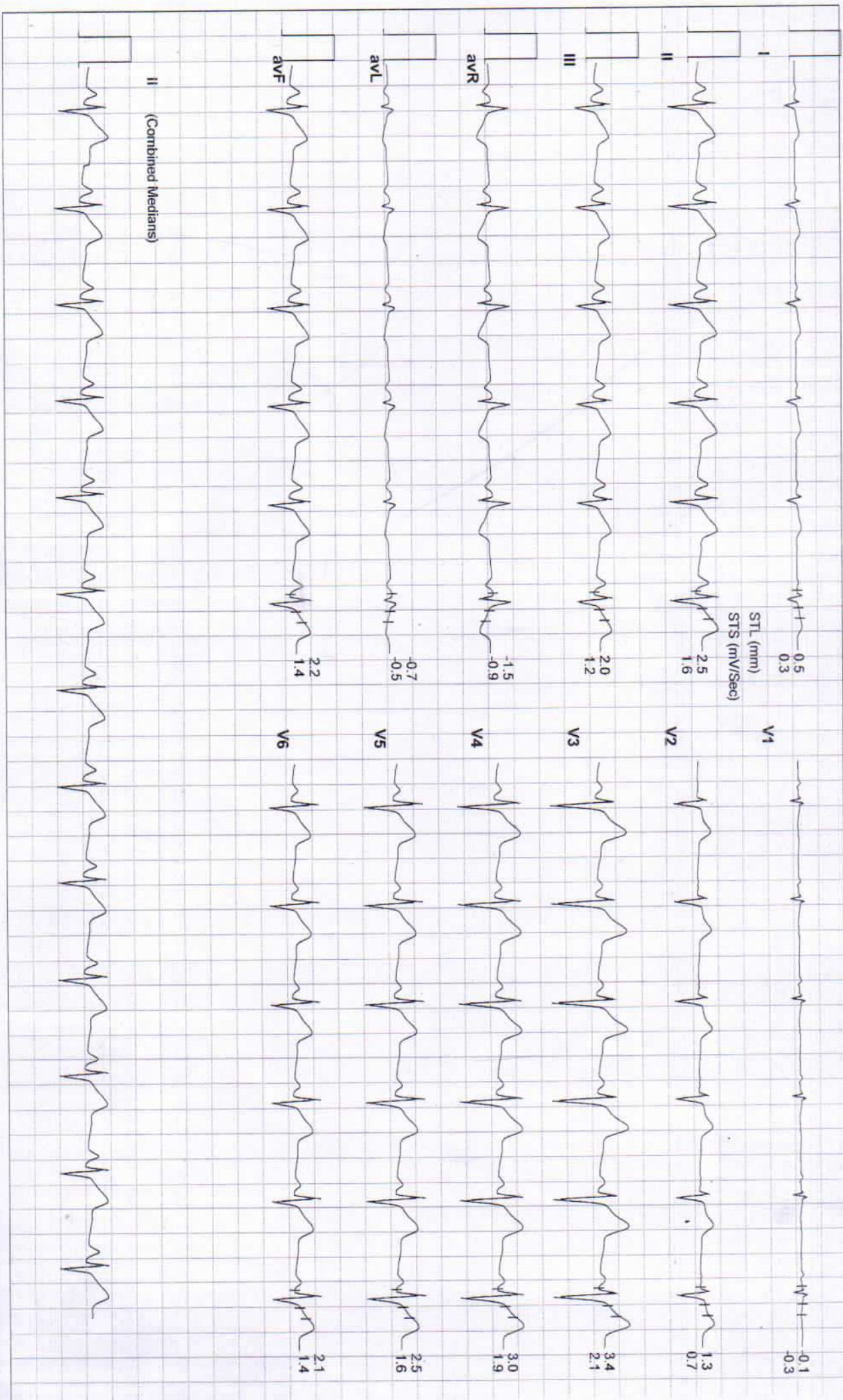
Date: 26 - 10 - 2024      METs : 1.0 HR : 81 Target HR : 45% of 179 BP : 130/80 Post J @80mSec      EXTime: 00:00      Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV







Date: 26 - 10 - 2024 METs : 1.0 HR : 76 Target HR : 42% of 179 BP : 130/80 Post J @80mSec EXTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec 1.0 Cm/mV



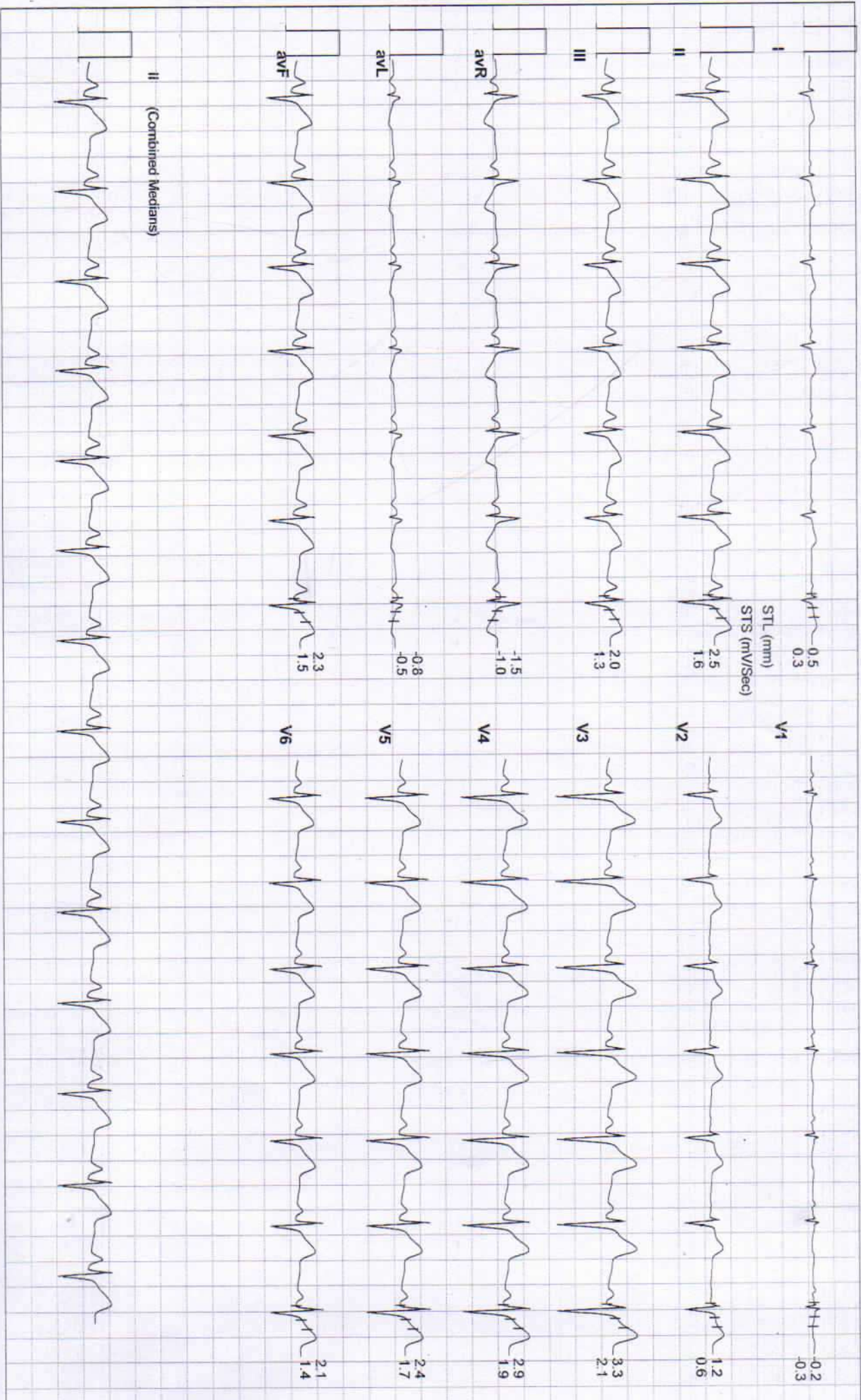




Date: 26 - 10 - 2024

METs : 1.0 HR : 82 Target HR : 46% of 179 BP : 130/80 Post J @80mSec

ExTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



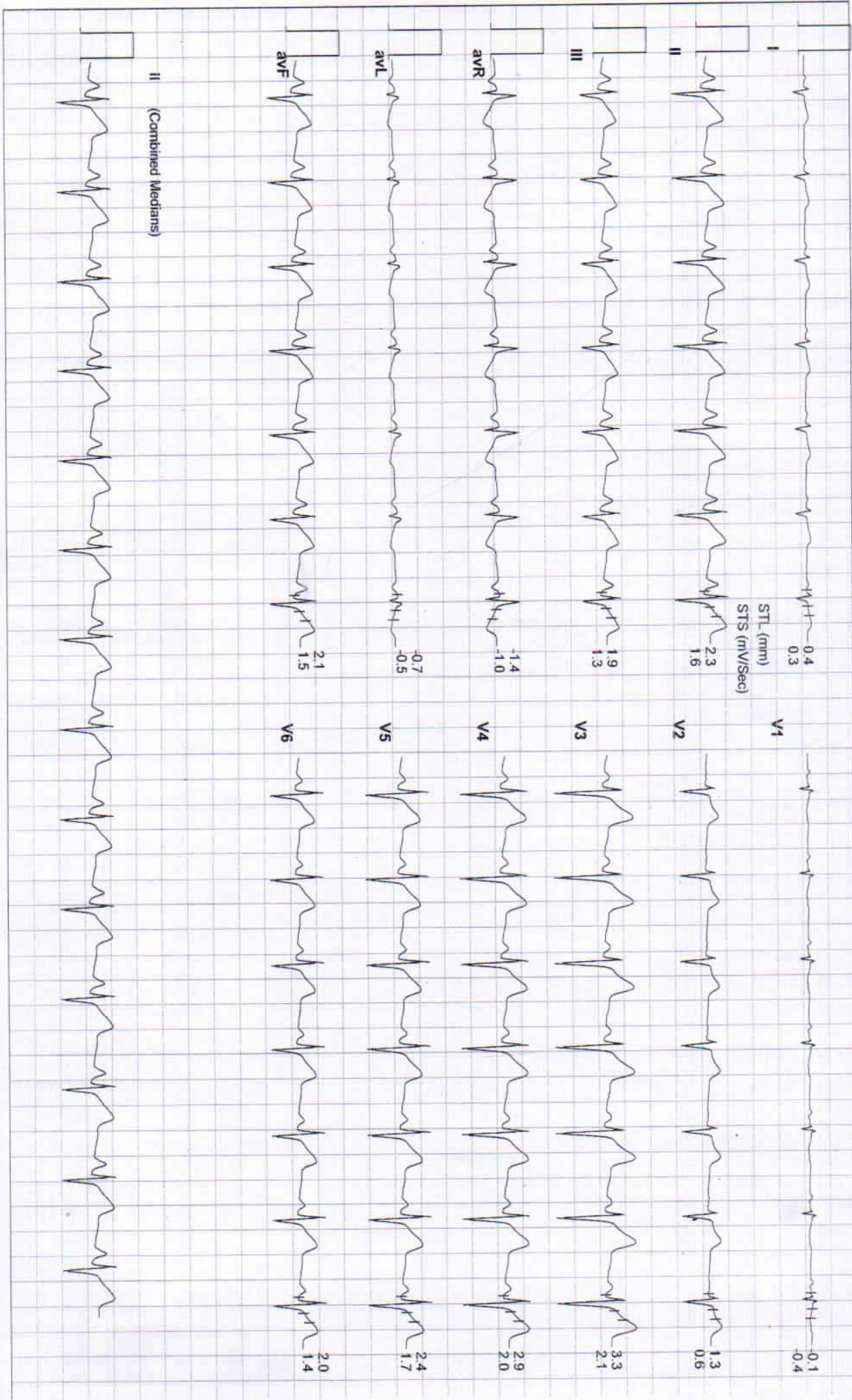




Date: 26 - 10 - 2024

MEts : 1.0 HR : 84 Target HR : 47% of 179 BP : 130/80 Post J @80mSec

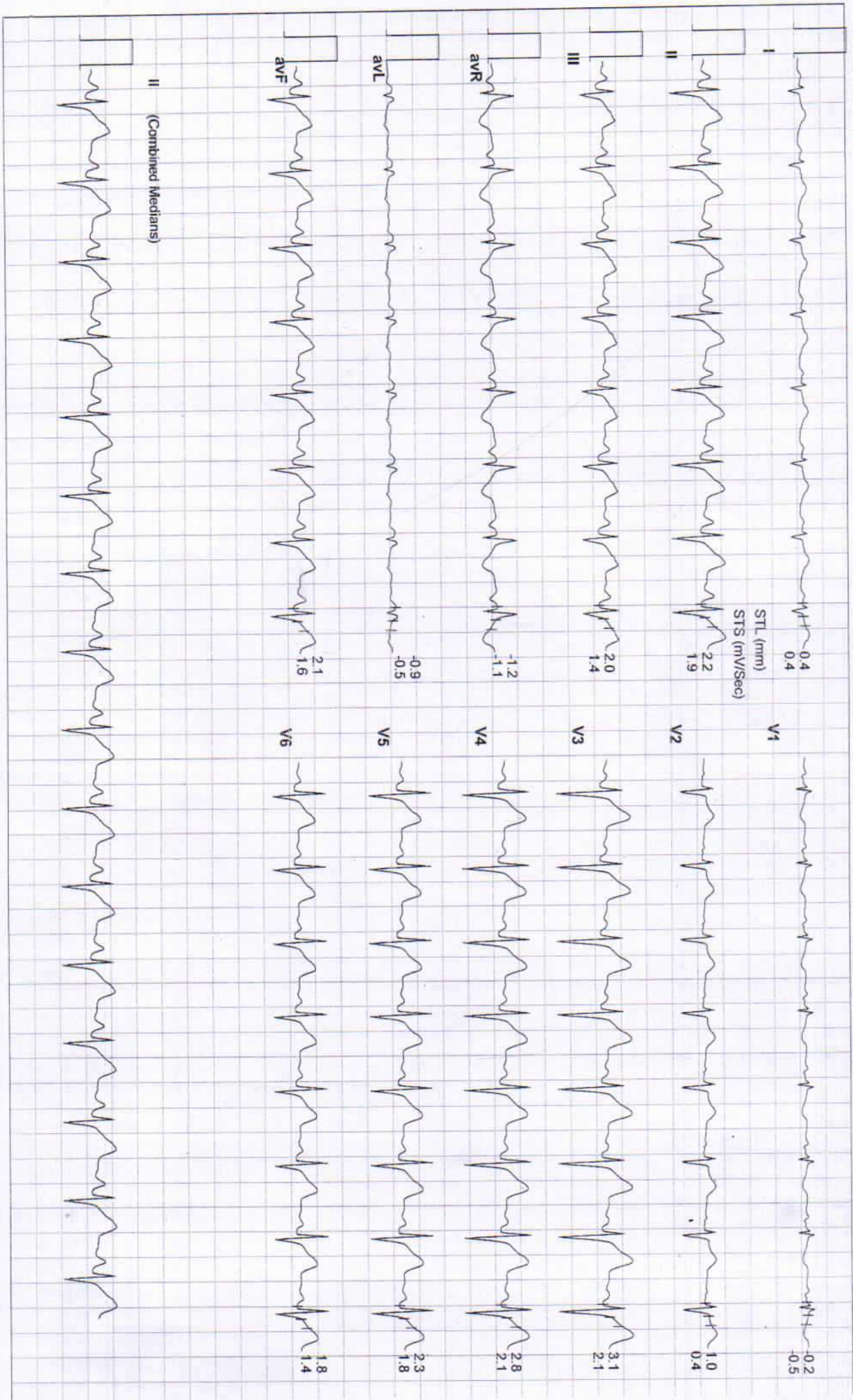
ExTime: 00:00 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV







Date: 26 - 10 - 2024      METs : 1.0 HR : 96 Target HR : 54% of 179 BP : 132/82 Post J @80mSec      ExTime: 00:00      Speed: 1.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV







Date: 26 - 10 - 2024

MEts : 4.7 HR : 115 Target HR : 64% of 179 BP : 134/84 Post J @80mSec

ExTime: 03:00 Speed: 1.7 mph Grade : 10.00 % 25 mm/Sec. 1.0 Cm/mV







Date: 26 - 10 - 2024

METS : 7.1 HR : 132 Target HR : 74% of 179 BP : 136/86 Post J @60mSec

EXTime: 06:00 Speed: 2.5 mph Grade : 12.00 % 25 mm/Sec. 1.0 Cm/mV





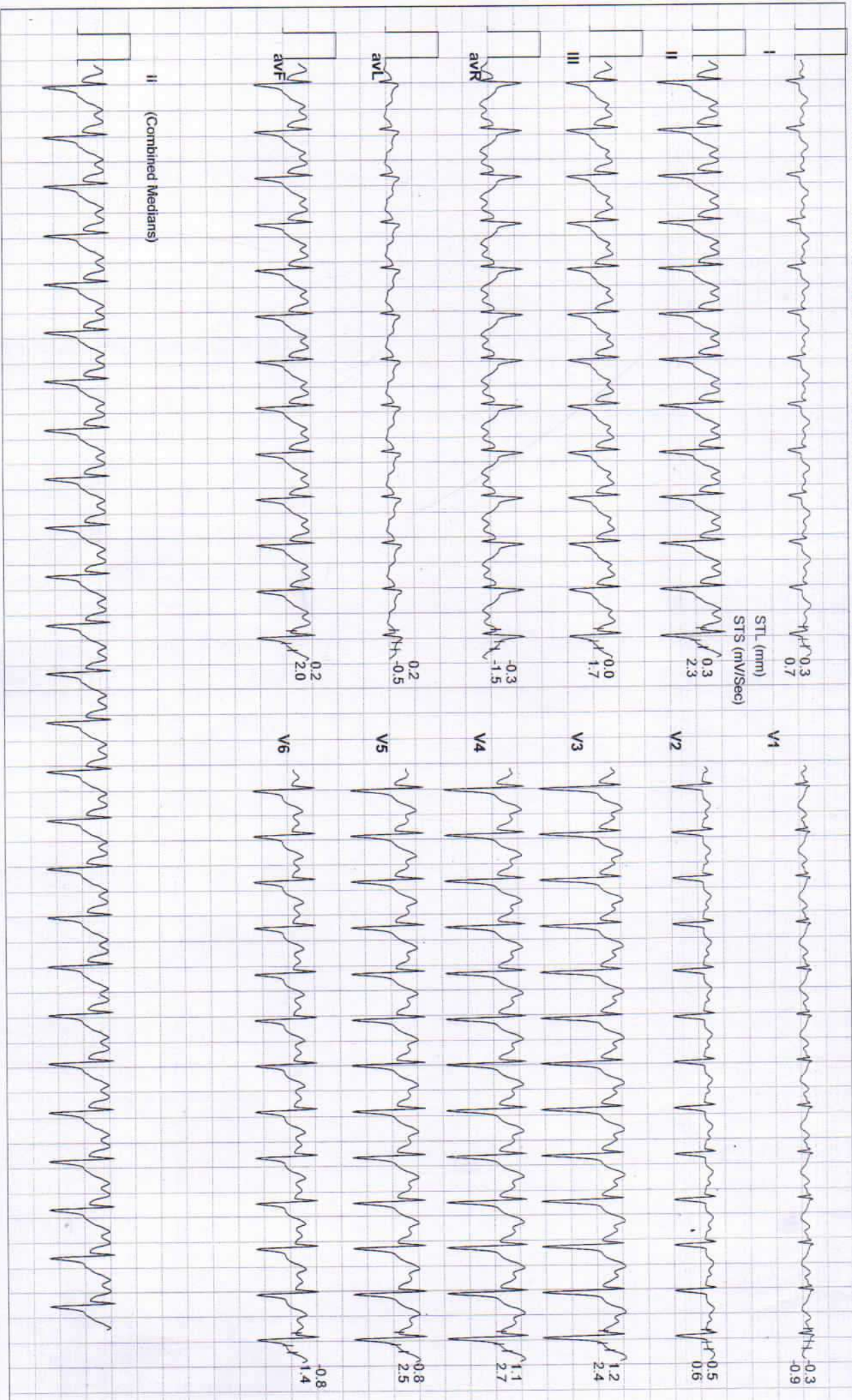


Date: 26 - 10 - 2024

METS : 10.2 HR : 156 Target HR : 87% of 179 BP : 138/88 Post J @60mSec

ExTime: 09:00

Speed: 3.4 mph Grade : 14.00 % 25 mm/Sec. 1.0 Cm/mV







Date: 26 - 10 - 2024

METs : 10.3 HR : 156 Target HR : 87% of 179 BP : 138/88 Post J @60mSec

ExTime: 09:05

Speed: 1.1 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV

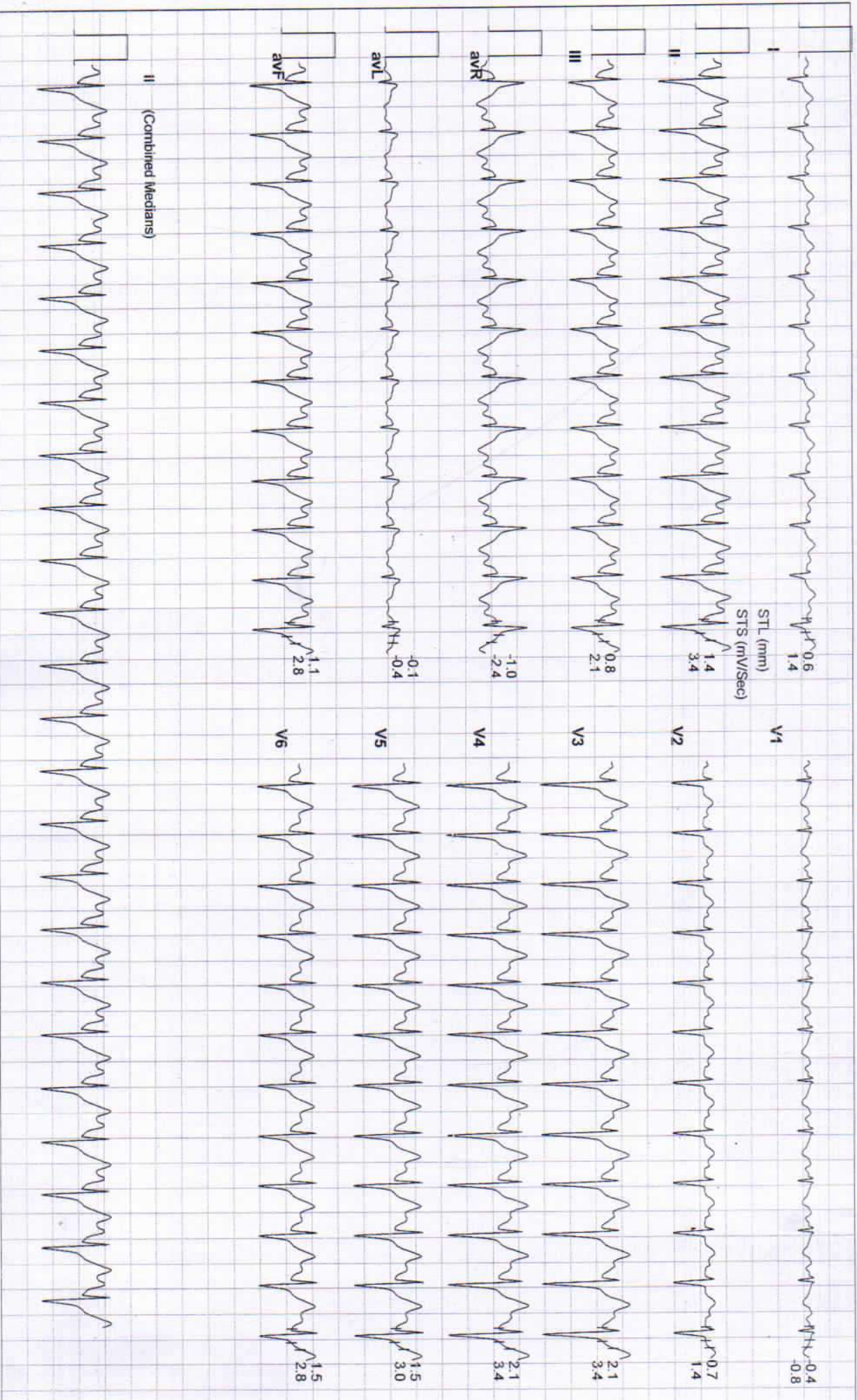






Date: 26 - 10 - 2024 METs : 7.3 HR : 147 Target HR : 82% of 179 BP : 138/88 Post J @60mSec

ExTime: 09:04 Speed: 1.1 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV







Date: 26 - 10 - 2024 METs : 4.3 HR : 138 Target HR : 77% of 179 BP : 140/90 Post J @60mSec

ExTime: 09:04 Speed: 1.1 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV





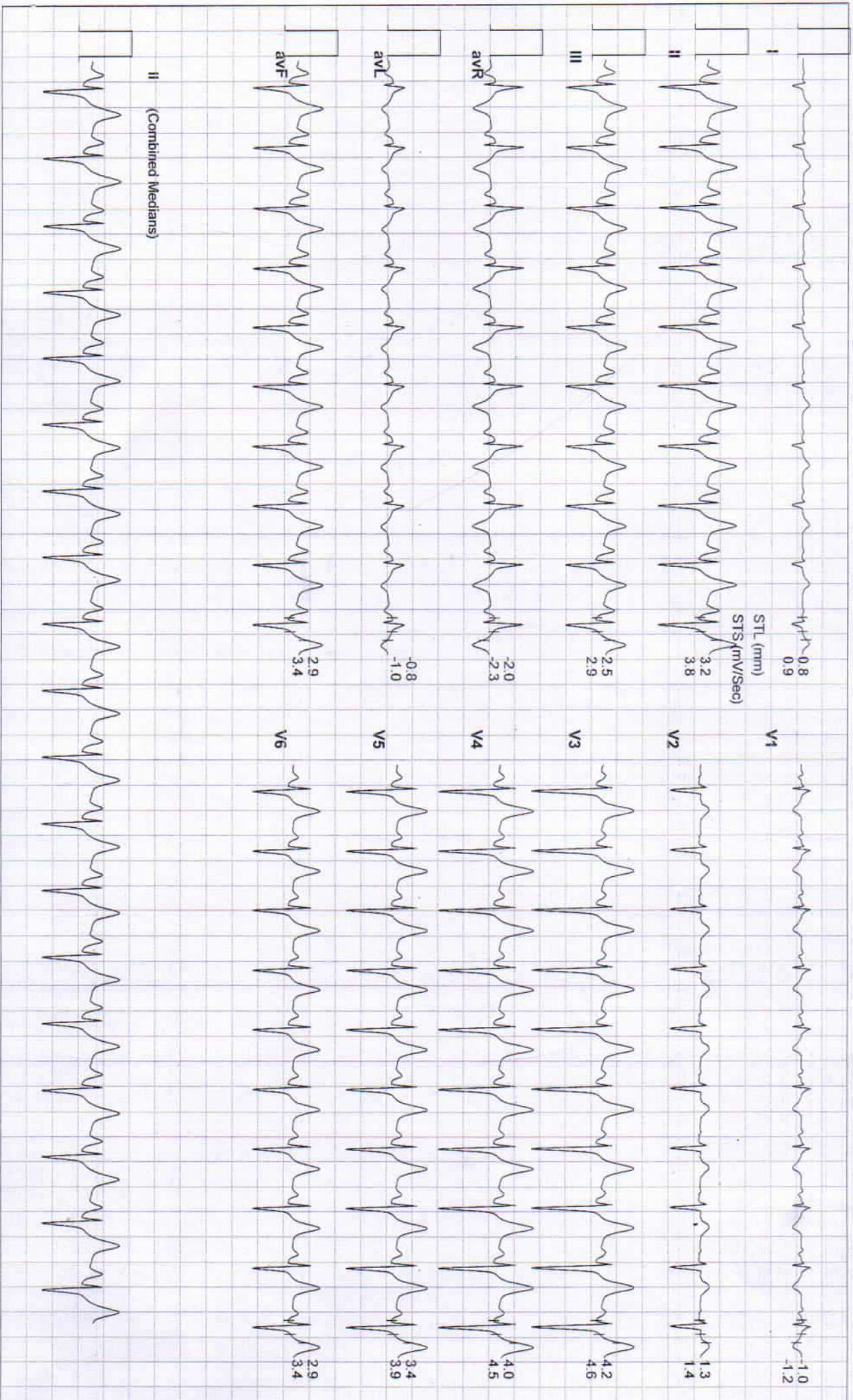


Date: 26 - 10 - 2024

METs : 1.0 HR : 115 Target HR : 64% of 179 BP : 136/86 Post J @80mSec

ExTime: 09:04

Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mv



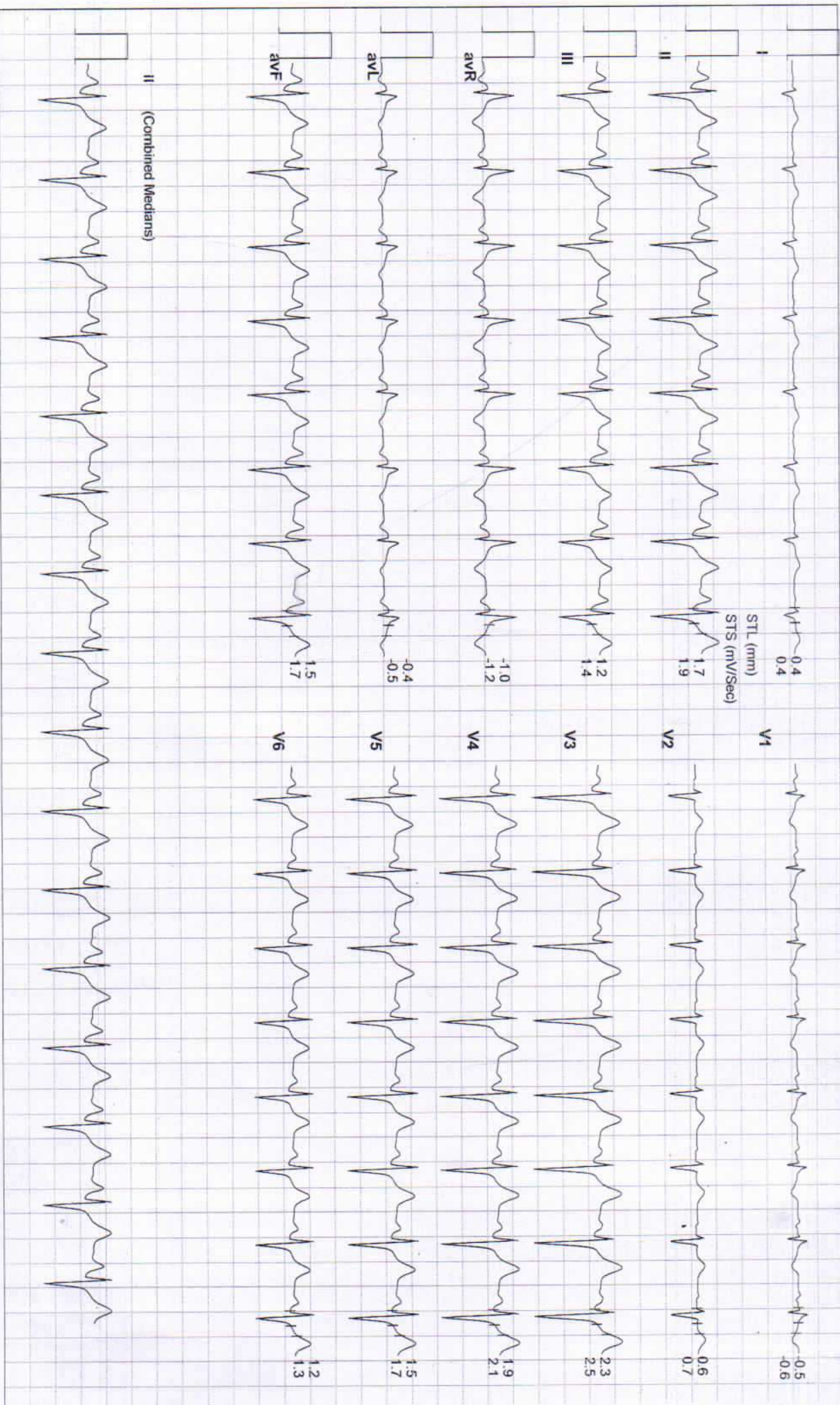




Date: 26 - 10 - 2024

METS : 1.0 HR : 99 Target HR : 55% of 179 BP : 134/84 Post J @80mSec

ExTime: 09:04 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV



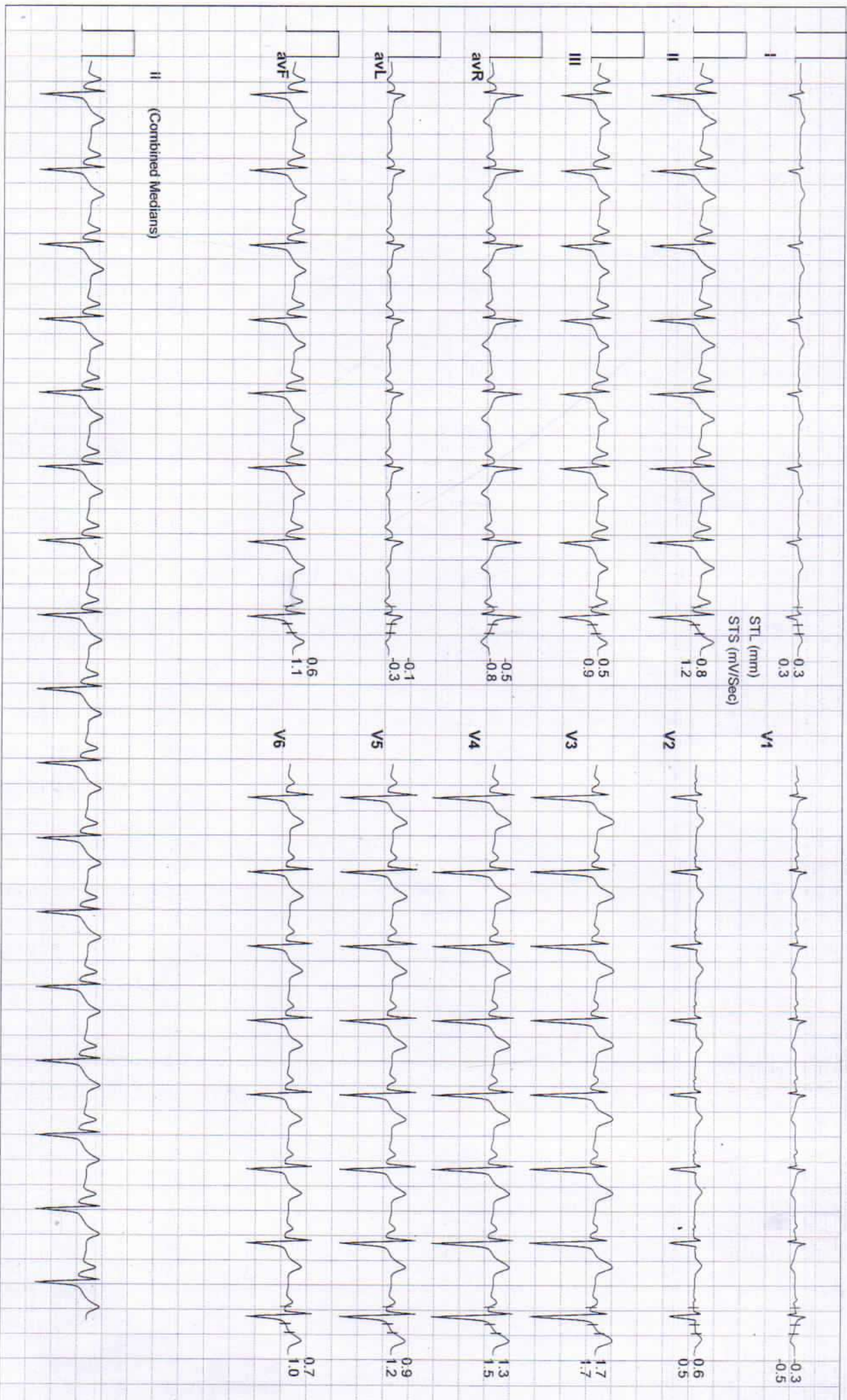




Date: 26 - 10 - 2024

MEts : 1.0 HR : 100 Target HR : 56% of 179 BP : 232/82 Post J @80mSec

ExTime: 09:04 Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV







Date: 26 - 10 - 2024      METs : 1.0 HR : 92 Target HR : 51% of 179 BP : 130/80 Post J @80mSec      EXTime: 09:04      Speed: 0.0 mph Grade : 00.00 % 25 mm/Sec. 1.0 Cm/mV

