

RTI REQUEST DETAILS	
Registration No. : PGCIL/R/2018/50396	Date of Receipt : 09/06/2018
Type of Receipt : Online Receipt	Language of Request : English
Name : AMANDEEP SINGH BEDI	Gender : Male
Address : HOUSE NO 121, R K RESIDENCY YADUNANDAN NAGAR, TIFRA BILASPUR, Pin:495001	
State : Chattisgarh	Country : India
Phone No. : Details not provided	Mobile No. : +91-7263007064
Email : amandeepsb19@gmail.com	
Status(Rural/Urban) : Urban	Education Status : Above Graduate
Is Requester Below Poverty Line ? : No	Citizenship Status : Indian
Amount Paid : 10)	Mode of Payment : Payment Gateway
Request Pertains to :	
<p>Information Sought : I have a BE degree in Electrical Engineering and an MTech degree in Power Systems and I am 25 years old. As per my medical reports I have 2:1 AV dissociation (CHB). I want to know whether I am medically eligible for recruitment in your organization for advertisements recruiting through <u>GATE</u> or any other exam. Please provide a list of posts I am eligible for recruitment. My Medical reports are attached in the supporting document.</p>	
<input type="button" value="Print"/> <input type="button" value="Save"/> <input type="button" value="Close"/>	

cc

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→ EB-ym
11/6



NON INVASIVE CARDIAC LAB ECHOCARDIOGRAM

PATIENT NAME: AMANDEEP SINGH

AGE/ SEX:25/M

REPORT DATE :19/02/2018

CATEGORY-Pvt

MEASUREMENT	NORMAL	MEASUREMENT	NORMAL
AORTA	:26 (28-38mm)	LV PW (ed)	:09 (6-11mm)
LA	:38 (28-38mm)	LV PW (es)	:
RA		E.F.	:60% (55-75%)
RVID		ESV	: cm3/m3
LVID (ed)	:50 (35-50mm)	EDV	: cm3/m3
LVID (es)	:31 (20-35mm)		
IVS (ed)	:09 (6-11mm)		
IVS (es)	:		

MITRAL VALVE:

Trace MR

AORTIC VALVE:

Normal

TRICUSPID VALVE:

Trace TR, PASP=21mmHg

PULMONARY VALVE:

Normal

PERICARDIUM :

Normal



Sir Ganga Ram City Hospital

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PATIENT NAME: AMANDEEP SINGH

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2D DATA INCLUDING WALL ANALYSIS

Sinus bradycardia seen during study
No RWMA at rest
Normal LV size
Normal LV contractility
Left Ventricular Ejection Fraction=60%
RA/RV normal size

DOPPLER STUDIES

COLOR

Trace MR

Trace TR

No PAH(PASP=11+10=21mmHg)

No -AR

E- 1.47 m/s, A- 0.69 m/s, E/A ratio -2.13

DT-218 ms

IMPRESSION:

No RWMA at rest

Normal LV systolic function (LVEF= 60%)

Normal LV size

Normal LV diastolic function

Trace MR

Trace TR

No PAH(PASP=11+10=21mmHg)

No intra-cardiac clot/ vegetation/ pericardial effusion

Dr.Aman Makhija
Consultant Cardiologist (MD,DM)

Dr.Satish Agrawal
Senior Resident Cardiology



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PATIENT NAME: AMANDEEP SINGH

AGE/ SEX:25/M

TREADMILL STRESS TEST (TMT)

	HR	BP	SYMP	ECG CHANGES
Supine	46	120/80	Nil	AVdissociation with 2:1 AV block
Standing & hyperventilation	54	120/80	Nil	do
Exercise : Bruce Protocol				
Time	KM/H Grade			
3min	2.7	10	62	130/80 Nil do
6min	4.0	12	80	130/80 Nil do
9min	5.4	14	89	140/80 Nil do
12min	6.4	16	91	140/80 Nil do
15min	8.2	18	93	140/80 Nil do
Recovery	59	120/80	Nil	AVdissociation with 2:1 AV block

Peak / Target / Heart Rate 93/195 Predicted Heart Rate -47%

Estimated Work Load 17.2/METS PVC count -Nil

Total Exercise time : 15 min

Reason for test termination : Fatigue

Observation: - No angina . No significant ST changes.

IMPRESSION: This treadmill stress test is inconclusive(poor chronotropic effect due to underline AV dissociation).
Good exercise tolerance

Dr.Aman Makhija
Consultant Cardiologist (MD,DM)

Dr.Satish Agrawal
Senior Resident Cardiology

NOTE: TMT has a predictive accuracy of approx 70-80% for detection of myocardial ischemia.



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STRESS ECHO STUDY REPORT

	Pre Exercise	Post Exercise
LVEF	60%	70%
Wall motion abnormality	Nil	Nil
MR	Trace	Trace
Diastolic dysfunction	Normal	Normal

IMPRESSION:

- This Stress Echo test is negative for inducible myocardial ischemia.
- There was good increase in LVEF in the post exercise study without any wall motion abnormality.

Dr.Aman Makhija
Consultant Cardiologist (MD,DM)

Dr.Satish Agrawal
Senior Resident Cardiology

Recording Start Date
19/2/2018

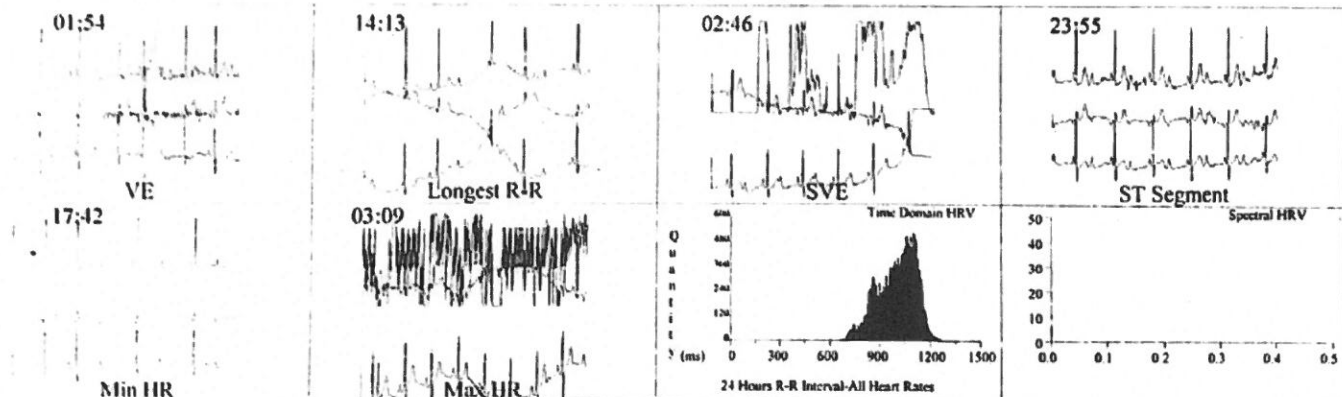
HOLTER ECG REPORT SUMMARY

Recording Start Time
2:20

PatientName: MR.AMANDEEP SINGH	ID#: 7263007064
Address:	Age: 25 DOB: Sex: Male
Pacemaker: None	Weight: Height:
Supervising Physician: DR.R.R.MANTRI (MD DM)	Referring Physician: DR.R.R.MANTRI (MD DM)
Indications:	
Medications:	

HEART RATE		VENTRICULAR ECTOPY		HEART RATE VARIABILITY	
Minimum HR-4 Intervals:	34 bpm at 17:42	VE Total:	1	SDNN-24 Hour:	133
Maximum HR-4 Intervals:	73 bpm at 3:09	V-Pair Total:	0	SDANN Index:	115
Average HR-24 Hours:	49 bpm	V-Run Total:	0	SDNN Index:	71
Minimum HR-Hourly:	43 bpm at 13:00	Longest V-Run:	N/A	rMSSD:	46
Maximum HR-Hourly:	62 bpm at 2:00	Maximum HR V-Run:	N/A	pNN50:	7
Analyzed Beats:	64138	Minimum HR V-Run:	N/A	Spectral Power-24 Hour:	
Analyzed Minutes:	1403	VE's per 1000/per Hour:	1/1	Min Spectral Power Hour:	
		Ventricular R on T:	N/A	Max Spectral Power Hour:	
ST SEGMENT ANALYSIS		SUPRAVENTRICULAR ECTOPY		BRADYCARDIA	
Total ST Minutes CH1:	108	SVE Total:	1078	Pauses in Excess of 3.0 sec:	0
Total ST Minutes CH2:	3	SV-Run Total:	0	Max Pause:	N/A
Total ST Minutes CH3:	6	Longest SV-Run:	N/A		QT
Max Absolute ST Depression:	-2.9 at 23:55	Maximum HR SV-Run:	N/A	Max QT:	442 ms (Ch. 2)
Max Absolute ST Elevation:	+1.2 at 20:58	SVE's per 1000/per hour:	17/45	Max QTc:	402 ms
Max ST Episode:	26 Minutes at 21:44	Total Aberrant Beats:	0	Time of Max QT/QTc:	at 11:54. HR 46 bpm.
Max HR In ST Episode:	81	Atrial Fib/Flutter:	N/A	Bundle Branch Block:	N/A

SIGNIFICANT ECG EVENTS



CONCLUSIONS

The average heart rate was 49. The minimum heart rate was 34 at 17:42. The maximum heart rate was 73 at 03:09. Pauses greater than 3.0 seconds were 0. Ventricular ectopy was 1, with 0 V-Runs and 0 V-Pairs, Ventricular Bigeminy events were 0 and Ventricular Trigeminy events were 0. 0 SV-Runs, Supraventricular Bigeminy events were 0 and Supraventricular Trigeminy events were 0. Total A-Fib(Flu) was 0. ST episode minutes totaled 113. The maximum Absolute ST change was -2.9 and occurred at 23:55.

*AV. dissociation @ 2:1 | CHB
AV block*

Physician Signature: _____

SIR GANGA RAM CITY HOSPITAL

Name : AMANDEEP SINGH 25/M

Patient Id : 39997

Image 1

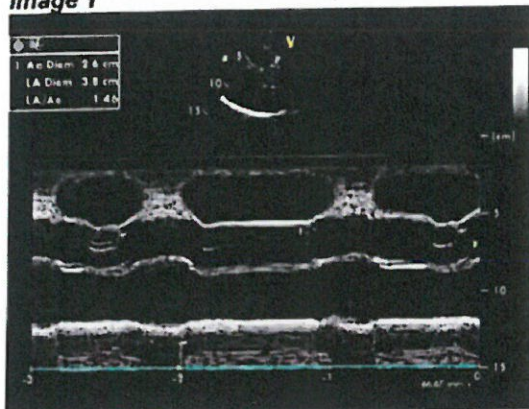


Image 2

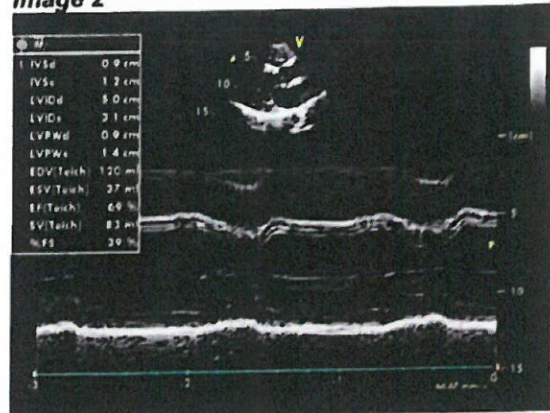


Image 3

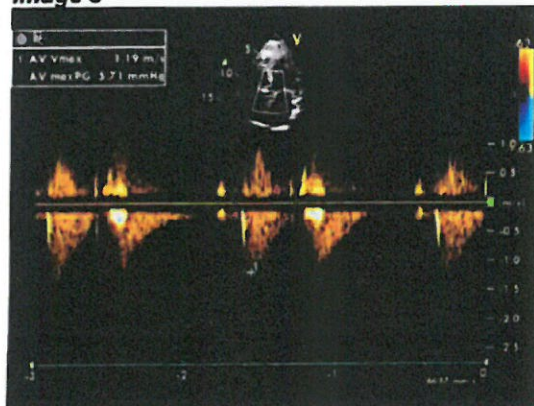


Image 4

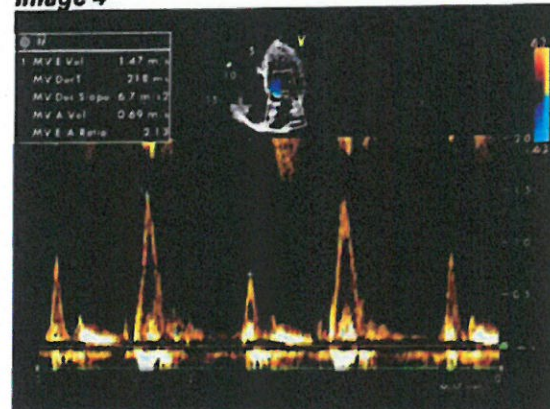
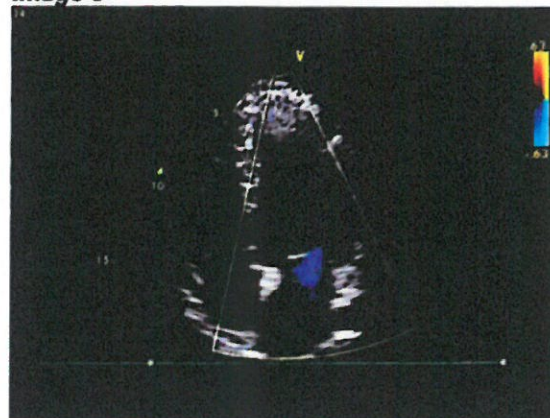


Image 5



Image 6



Print Date: 2/19/2018

