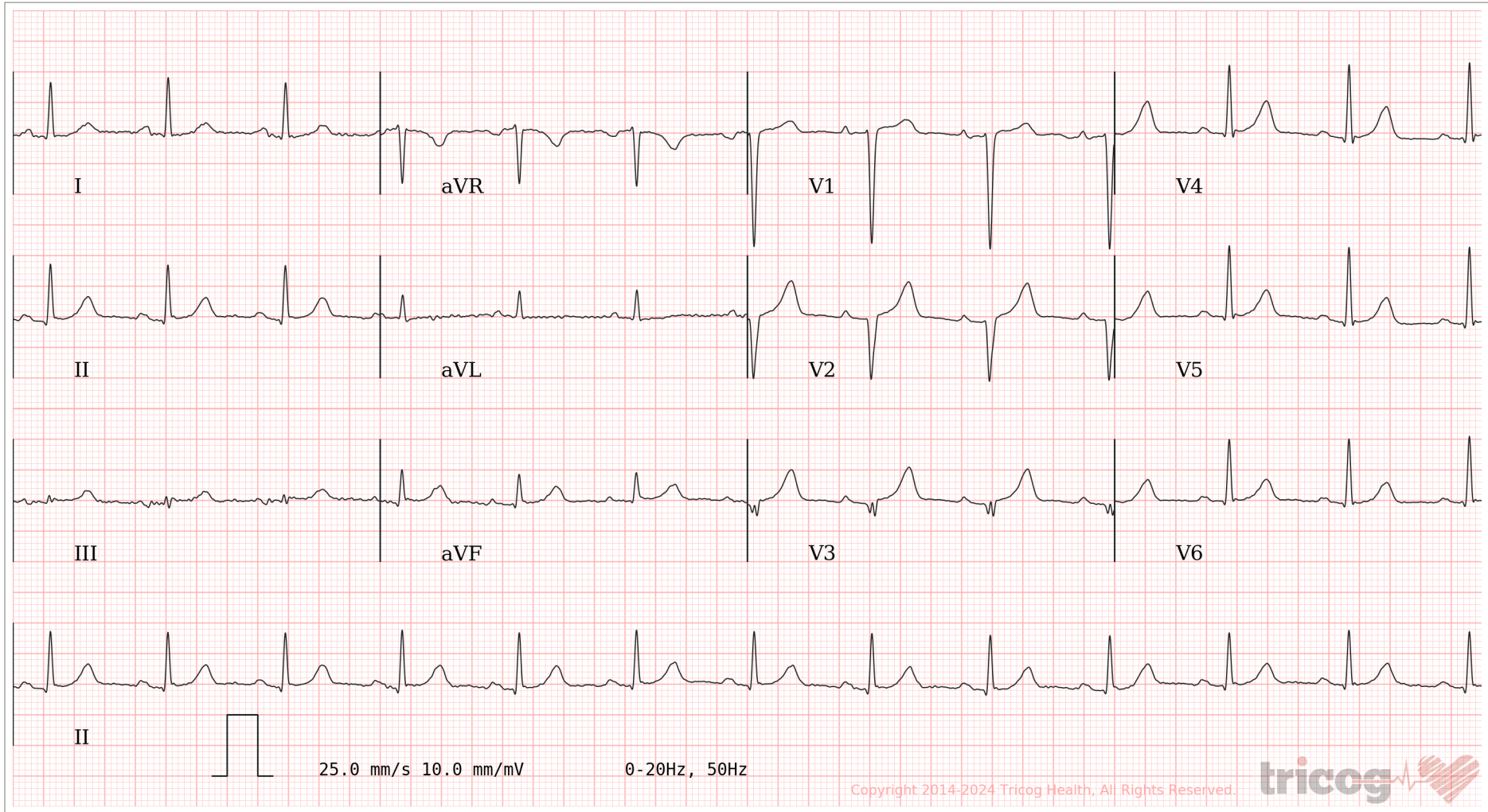
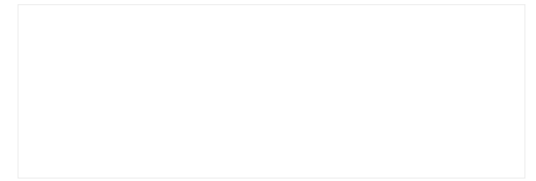


Age / Gender: 92/Female
Patient ID: 1300163
Patient Name: Kushal K Kakar

Date and Time: 27th Dec 24 11:25 AM



AR: NA VR: 77bpm QRSD: 84ms QT: 356ms QTcB: 402ms PRI: 164ms P-R-T: 14° NA 63°

Footer Text: ECG Report Summary

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.

Patient ID: 1300163

Patient Name: Kushal K Kakar

Age / Gender: 92/Female

Date: 27th Dec 24 11:25 AM

Summary of ECG Report

Based on the ECG report for Kushal K Kakar, here are the key findings and what they might indicate:

Heart Rate (VR): 77 bpm

This is within the normal resting heart rate range for adults (60-100 bpm).

QRS Duration (QRSD): 84 ms

This is within the normal range (less than 120 ms), indicating normal ventricular depolarization.

QT Interval (QT): 356 ms

This is within the normal range for women (generally considered less than 440ms, although this varies with age and other factors. Further context is needed to confirm if this is outside of normal range for this specific patient). It indicates normal ventricular repolarization.

Corrected QT Interval (QTcB): 402 ms

This is likely within the normal range, although the exact upper limit depends on several factors including age and sex. The corrected QT interval helps account for heart rate variations. Its value is important for assessing the risk of arrhythmias.

PR Interval (PRI): 164 ms

This is within the normal range (120-200 ms), indicating normal atrioventricular conduction.

P-R-T Angles: 14° NA 63°

These angles provide information about the electrical axis of the heart. The values here may suggest a slightly leftward axis deviation. Further interpretation requires more clinical context.

Summary:

The ECG report shows predominantly normal findings for Kushal K Kakar. All measured intervals fall within or close to typical ranges. While the P-R-T angles suggest a possible left axis deviation, further clinical evaluation is required to determine the clinical significance of this finding. A qualified physician should interpret this report in conjunction with the patient's medical history and other diagnostic tests.