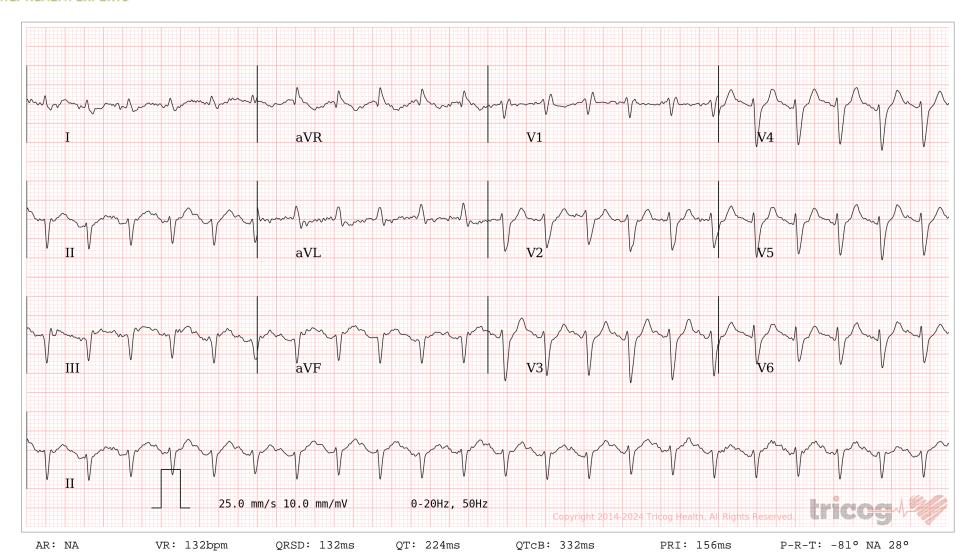
Healthspring Cuffe Parade, Mumbai



Age / Gender: 84/Male Date and Time: 24th Dec 24 11:53 AM

Patient ID: 1300265

Patient Name: Srichand Chatrumal Bathija



The ECG shows a significantly elevated heart rate (tachycardia) and prolonged QRS duration, suggesting potential ventricular conduction problems. A shortened QT interval and borderline prolonged PR interval also warrant further investigation and clinical correlation with the patient's history and other diagnostic tests. The abnormal P-R-T angles point towards further cardiac evaluation.

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: 1300265

Patient Name: Srichand Chatrumal Bathija

Age / Gender: 84/Male

Date: 24th Dec 24 11:53 AM

Summary of ECG Report

Based on the ECG report for Srichand Chatrumal Bathija, here are the key findings and what they might indicate:

Heart Rate (VR): 132 bpm

This is outside the normal resting heart rate range for adults (60-100 bpm), indicating tachycardia (fast heart rate). This could be due to various factors and requires further investigation.

QRS Duration (QRSD): 132 ms

This is outside the normal range (less than 120 ms), indicating possible issues with ventricular depolarization. This prolongation needs further evaluation to determine the underlying cause.

QT Interval (QT): 224 ms

This is significantly shorter than the normal range (generally 350-440ms), which could indicate a potential issue but needs more context from other tests. Short QT intervals are less common than prolonged ones.

Corrected QT Interval (QTcB): 332 ms

While this value is lower than some typical normal ranges, it's still necessary to consider the context and other ECG parameters for a precise interpretation. Further investigation is needed.

PR Interval (PRI): 156 ms

This is slightly prolonged (normal is 120-200 ms), possibly indicating a first-degree atrioventricular block, although this is within the upper range of normal. Further evaluation is warranted.

P-R-T Angles: -81° NA 28°

These angles suggest an abnormality in the heart's electrical axis. The negative angle in one lead may indicate left axis deviation which may be associated with certain cardiovascular conditions but requires further interpretation.

Summary:

The ECG shows a significantly elevated heart rate (tachycardia) and prolonged QRS duration, suggesting potential ventricular conduction problems. A shortened QT interval and borderline prolonged PR interval also warrant further investigation and clinical correlation with the patient's history and other diagnostic tests. The abnormal P-R-T angles point towards further cardiac evaluation.