

Demo Diabetes

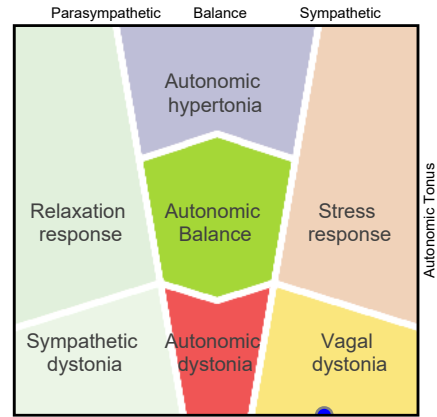
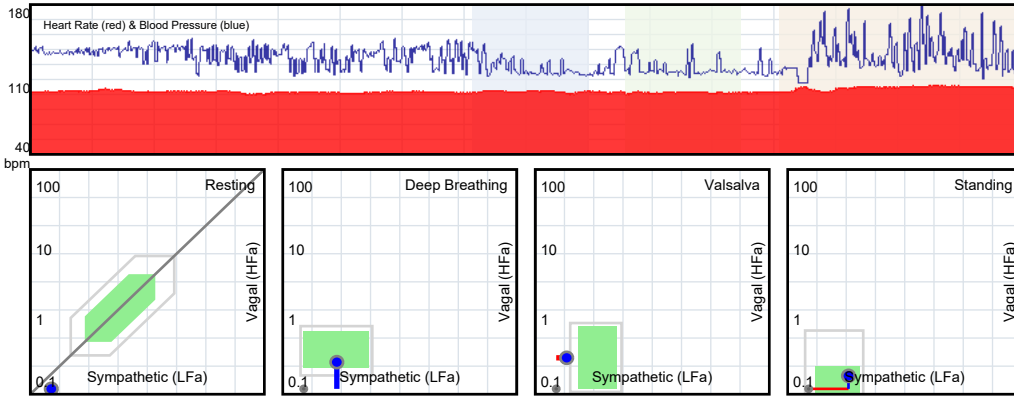
Gender: Female
Age: 83 (DOB: Dec 18 1937)

Weight: 170 lbs
BMI: 34.3

Height: 4 ft 11 in

Exam Date: Mar 2 2021 09:21

Autonomic Nervous System Function



	HR	BP	LFa	HFa	SpO2	Comment
Resting	98	147/77	0.19	0.12	91	Possible severe chronic autonomic dysfunction – possible Cardiac Autonomic Neuropathy (CAN) [According to Framingham Heart Study]; Clinical protection of the heart is recommended. [Example Beta Blockers, ACE Inhibitors, Angiotensin II Receptor Blockers or Calcium Channel Blockers and additionally cardiovascular workouts]; Possible acute autonomic nervous system dysfunction of the patient such as orthostatic hypotension, heat intolerance, loss of bladder or bowel control - if patient is on Beta-blockers, titration of medication is suggested to increase LFa response and cardiovascular workouts; Possible mild, acute dysautonomia; Symptoms such as orthostatic hypotension, heat intolerance, loss of bladder and bowel control; Suggests Hypertension; Vagal dystonia. This may be a sign of physical or mental fatigue, chronic stress, possibly the presence of a chronic health condition causing a decrease in the regulatory function of the parasympathetic nervous system. If similar results appear 3 or more times in a row, it is recommended that one should have a thorough health checkup. Maintaining a healthy lifestyle may help improve the functioning
Deep Breathing	99/96	127/74	0.49	0.27	93	Normal Parasympathetic response to stimulation;
Valsalva	99/97	120/79	0.25	0.31	93	Hypoactive sympathetic response to stimulation; Possible Maneuver Induced Tachycardia;
Standing	102	151/96	0.6	0.18	89	Normal ANS response to stimulation; Indicates Sympathetic Factor to Arrhythmia; Heart rate upon standing is considered 'low';

	Score	Units	Norms		Score	Units	Norms		Score	Units	Norms
Autonomic Activity	0	ms ²	45-80	Autonomic Balance	-4.8	ratio	-3 - 3	E/I Ratio	1.03	ratio	>1.1
Valsalva Ratio	1.02	ratio	>1.15	30:15 Ratio	1.05	ratio	>1.1	Functional Age	90	years	< 85

	Score	Norms	Description	Comments
MSI	1.24	< 1.0	MSI is an indicator of accumulative mental stress. Mental stress can be caused by situations one has to cope with daily and the emotional states that result. The way in which a person copes with stressful events is a	The score is clearly above average. It indicates high mental stress. Stress in the recent past has had a major impact on your mental health. The negative effects of mental stress are clearly visible. You are likely to experience concentration problems, forgetfulness and reduced energy levels.
PSI	27.82	< 1.0	PSI is an indicator of accumulative chronic physical stress. Physical stress can be caused by long-term exposure to negative factors in one's life or physical illness. The way in which a person copes with physical stressors	The score is clearly above average. It indicates high physical stress. Stress in the recent past has had a major impact on your physical balance. The negative effects of physical stress are clearly visible. This situation necessitates immediate attention.

Cardiovascular Function

	Score	Norms	Description	Comments
EEl	0.4	0.3 - 0.7	EEl is an indicator for left ventricle ejection power and elasticity of large arteries.	Normal Blood Circulation
DDI	0.56	0.3 - 0.7	DDI indicates the contractility, tension and stiffness in the small arteries.	Normal Blood Circulation
DEI	0.25	0.3 - 0.7	DEI represents the reflection of arterial elasticity and blood flow in the venous system.	Venous congestion. Possible loss of vessel elasticity or the presence of arteriosclerosis in the peripheral arteries. This may be due to extreme sensitivity to environmental conditions.
AI	0.05	< -0.7	Augmentation Index (AI) is a useful marker for cardiac risk. AI increases with age and a sedentary lifestyle.	AI is a measure of arterial stiffness and it provides general information about the arteries. AI is positively correlated with pulsewave velocity, blood pressure and hypertension.
ABI	1	1 - 1.4	Ankle/Brachial Index	Acceptable, Borderline
TBI	1.27	> 0.75	Toe/Brachial Index	Normal range

	Score	Units	Norms		Score	Units	Norms		Score	Units	Norms
Reflection Index	0.5		.65-.85	Stiffness Index	12.07	m/s	< 8.0	Stroke Volume	59.3	ml	55-100
Cardiac Output	5.81	l/min	4.0-8.0	Mean Arterial Pressure	87	mmHg	70-110	Blood Volume	3.93	l	3-5
C1	9.47	ml/mmHg	> 10.0	C2	4.73	ml/mmHg	> 6.0	DPTI/SPTI	0.26	ratio	
Ventricular Extrasystole	0		< 1	Atrial Extrasystole	0		< 1	Artifacts	0		< 1
QRS	70	ms	60-120	QTc	409	ms	350-460	ST seg	102	ms	80-120
PR int	67	ms	120-200	Body Mass Index	34.3		19-25				

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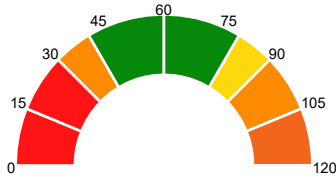
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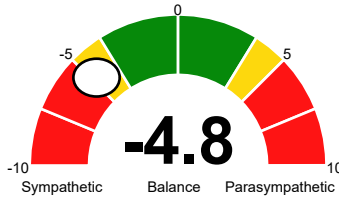
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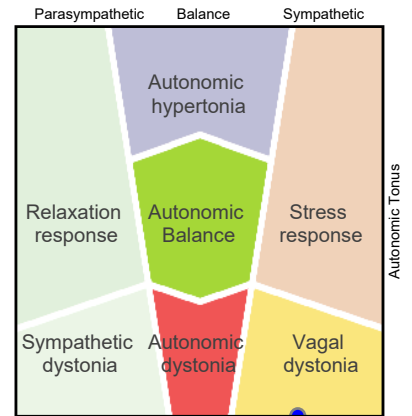
AUTONOMIC ACTIVITY



AUTONOMIC BALANCE



The sympathetic nervous system activates the "fight-or-flight" responses. It activates the glands and organs that defend the body against attack. The sympathetic nervous system uses up energy and depletes the body. The parasympathetic nervous system controls the "rest and digest" responses. The parasympathetic nervous system, when activated by rest, relaxation and happy thoughts, is essential for balanced living and for all healing.



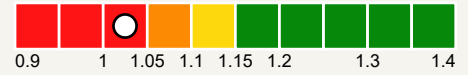
E/I RATIO: 1.03

Expiration/Inspiration Ratio is a marker of cardiovagal response.



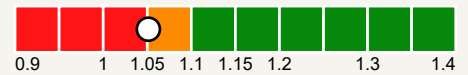
VALSALVA RATIO: 1.02

Marker of baroreceptor sensitivity response.



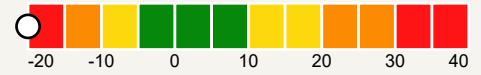
30/15 RATIO: 1.05

Heart rate change during standing or tilt at 30 and 15 second.



Systolic Pressure Response to Standing: 27 mmHg

Marker of sympathetic adrenergic function.



Autonomic Nervous System

Possible severe chronic autonomic dysfunction – possible Cardiac Autonomic Neuropathy (CAN) [According to Framingham Heart Study]; Clinical protection of the heart is recommended. [Example Beta Blockers, Ace Inhibitors, Angiotensin II Receptor Blockers or Calcium Channel Blockers and additionally cardiovascular workouts]; Possible acute autonomic nervous system dysfunction of the patient such as orthostatic hypotension, heat intolerance, loss of bladder or bowel control - if patient is on Beta-blockers, titration of medication is suggested to increase LFa response and cardiovascular workouts; Possible mild, acute dysautonomia; Symptoms such as orthostatic hypotension, heat intolerance, loss of bladder and bowel control; Suggests Hypertension; Vagal dystonia. This may be a sign of physical or mental fatigue, chronic stress, possibly the presence of a chronic health condition causing a decrease in the regulatory function of the parasympathetic nervous system. If similar results appear 3 or more times in a row, it is recommended that one should have a thorough health checkup. Maintaining a healthy lifestyle may help improve the functioning of the autonomic nervous system;

Parasympathetic Response to Deep Breathing

Normal Parasympathetic response to stimulation;

Sympathetic Response to Valsalva Maneuver

Hypoactive sympathetic response to stimulation; Possible Maneuver Induced Tachycardia;

Active Standing

Normal ANS response to stimulation; Indicates Sympathetic Factor to Arrhythmia; Heart rate upon standing is considered 'low';

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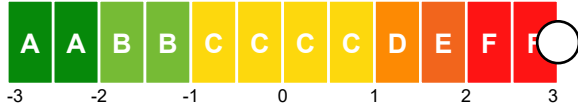
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AUTONOMIC PHYSICAL DYSREGULATION (PSI) = 27.82

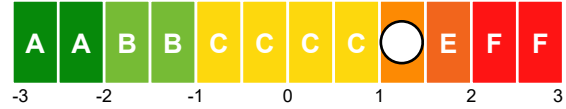
PSI is an indicator of accumulative chronic physical stress. Physical stress can be caused by long-term exposure to negative factors in one's life or physical illness. The way in which a person copes with physical stressors is a significant contributing factor to this process. When the stress becomes too great, the body will show signs of distress.



The score is clearly above average. It indicates high physical stress. Stress in the recent past has had a major impact on your physical balance. The negative effects of physical stress are clearly visible. This situation necessitates immediate attention.

ACCUMULATIVE MENTAL STRESS (MSI) = 1.24

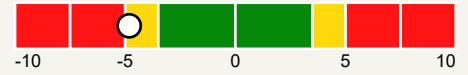
MSI is an indicator of accumulative mental stress. Mental stress can be caused by situations one has to cope with daily and the emotional states that result. The way in which a person copes with stressful events is a significant contributing factor to this process. When the stress becomes too great, the body will show signs of distress.



The score is clearly above average. It indicates high mental stress. Stress in the recent past has had a major impact on your mental health. The negative effects of mental stress are clearly visible. You are likely to experience concentration problems, forgetfulness and reduced energy levels.

Autonomic Balance: -4.8

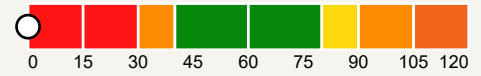
Possible severe chronic autonomic dysfunction – possible Cardiac Autonomic Neuropathy (CAN) [According to Framingham Heart Study]; Clinical protection of the heart is recommended. [Example Beta Blockers, Ace Inhibitors, Angiotensin II Receptor Blockers or Calcium Channel Blockers and additionally cardiovascular workouts]; Possible acute autonomic nervous system dysfunction of the patient such as orthostatic hypotension, heat intolerance, loss of bladder or bowel control - if patient is on Beta-blockers, titration of medication is suggested to increase LFa response and cardiovascular workouts; Possible mild, acute dysautonomia; Symptoms such as orthostatic hypotension, heat intolerance, loss of bladder and bowel control; Suggests Hypertension;



The sympathetic nervous system activates the "fight-or-flight" responses. The parasympathetic nervous system controls the "rest and digest" responses.

Total Autonomic Activity: 0

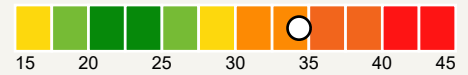
Vagal dystonia. This may be a sign of physical or mental fatigue, chronic stress, possibly the presence of a chronic health condition causing a decrease in the regulatory function of the parasympathetic nervous system. If similar results appear 3 or more times in a row, it is recommended that one should have a thorough health checkup. Maintaining a healthy lifestyle may help improve the functioning of the autonomic nervous system;



Marker of the overall ANS activity at rest.

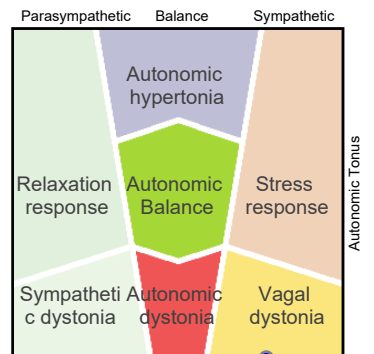
Body Mass Index (BMI): 34.3

Overweight to Obese - high risk of associated diseases

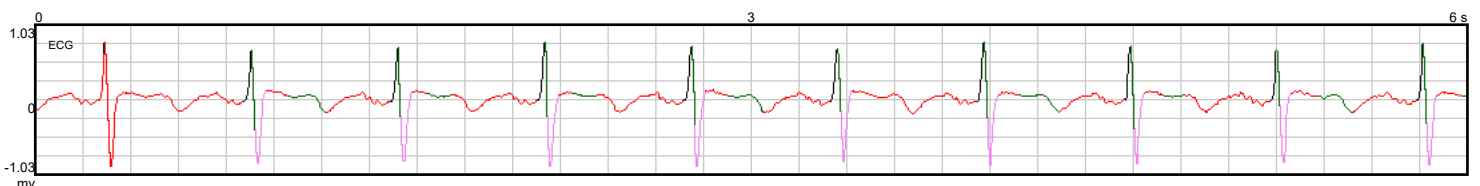


Body mass index is defined as the individual's body weight divided by the square of his or her height. The body mass index can be used to identify if you are overweight.

	Score	Units	Norms		Score	Units	Norms
LFa	0.19	bpm ²	0.5-4	HFa	0.12	bpm ²	0.5-4
Blood Pressure	147/77	mmHg	<120	SpO2	91	%	>94
BPSys Response to Standing	-27	mmHg	<10	Functional Age	90	years	< 85
Health Risk Factor	76	%	< 50	SDNN	7	ms	> 40
HeartRate	98	bpm	< 90	Ventricular Extrasystole	0		< 1
Atrial Extrasystole	0		< 1	Artifacts	0		< 1



A - Normal **B** - Borderline Normal **C** - Moderate **D** - Borderline Abnormal **E** - Abnormal **F** - Severe



Physician's Notes:

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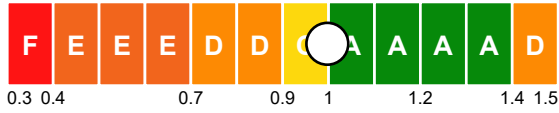
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ANKLE/BRACHIAL INDEX (ABI) = 1

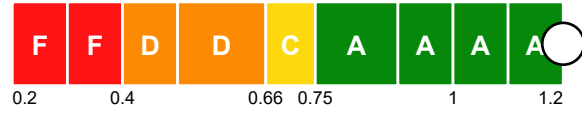
ABI test is a quick, noninvasive way to check your risk of peripheral artery disease (PAD). Peripheral artery disease is a condition in which the arteries in your legs or arms are narrowed or blocked.



Acceptable, Borderline

TOE/BRACHIAL INDEX (TBI) = 1.27

Determine the severity of peripheral arterial disease present in a lower extremity.



Normal range

Ejection Elasticity Index (EEI):0.4

EEI is an indicator for left ventricle ejection power and elasticity of large arteries.

Normal Blood Circulation



Dicrotic Dilation Index (DDI):0.56

DDI indicates the contractility, tension and stiffness in the small arteries.

Normal Blood Circulation



Dicrotic Elasticity Index (DEI):0.26

DEI represents the reflection of arterial elasticity and blood flow in the venous system.

Venous congestion. Possible loss of vessel elasticity or the presence of arteriosclerosis in the peripheral arteries. This may be due to extreme sensitivity to environmental conditions such as weather and/or emotions (sympathetic). Possible causes are caffeine, nicotine, dehydration and pain.



Coronary Respiratory Response:46.3

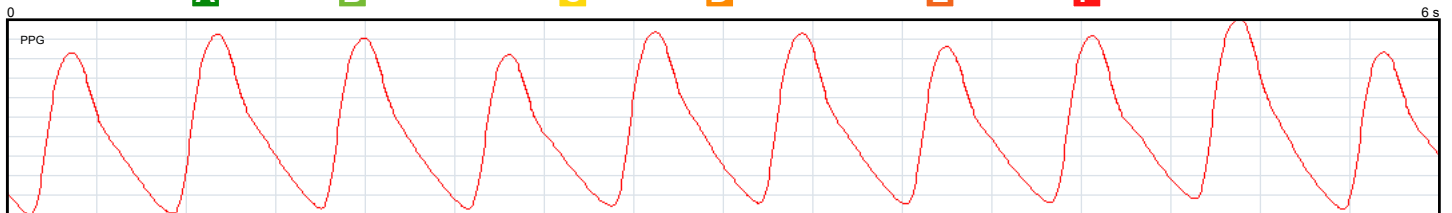
CAD occurs when the blood vessels that transport blood to the heart are narrowed and hardened due to plaque buildup (atherosclerosis).

Normal range



	Score	Units	Norms		Score	Units	Norms		Score	Units	Norms
Augmentation Index	0.04		< -0.7	Reflection Index	0.5		.65-.85	Stiffness Index	12.07	m/s	< 8.0
Stroke Volume	59.3	ml	55-100	Cardiac Output	5.75	l/min	4.0-8.0	Mean Arterial Pressure	87	mmHg	70-110
Blood Volume	3.93	l	3-5	C1	9.63	ml/mmHg	> 10.0	C2	4.78	ml/mmHg	> 6.0
DPTI/SPTI	0.26	ratio		Systemic Vascular Resistance	1202		700-1800	Pulse Oximetry	90.2		> 95
Blood Pressure	147/77	mmHg	< 120	Central Systolic Pressure	140	mmHg	114-136				

A - Normal **B** - Borderline Normal **C** - Moderate **D** - Borderline Abnormal **E** - Abnormal **F** - Severe



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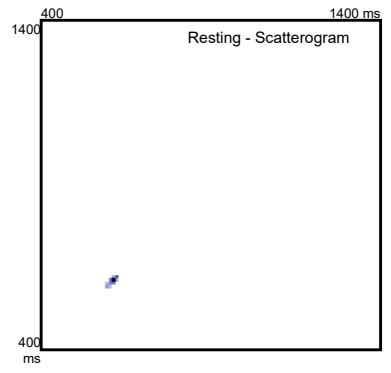
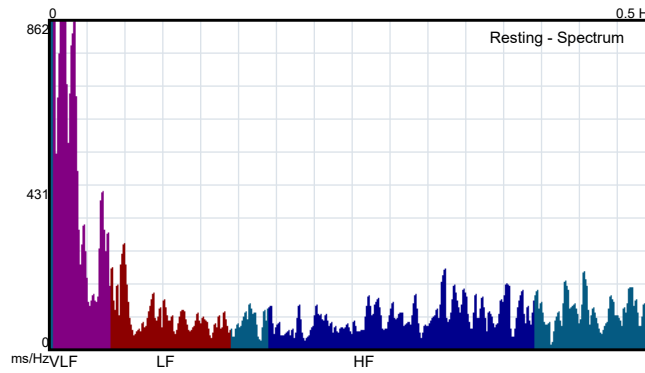
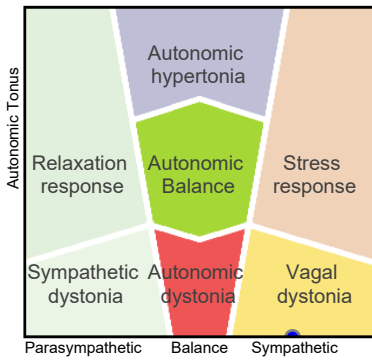
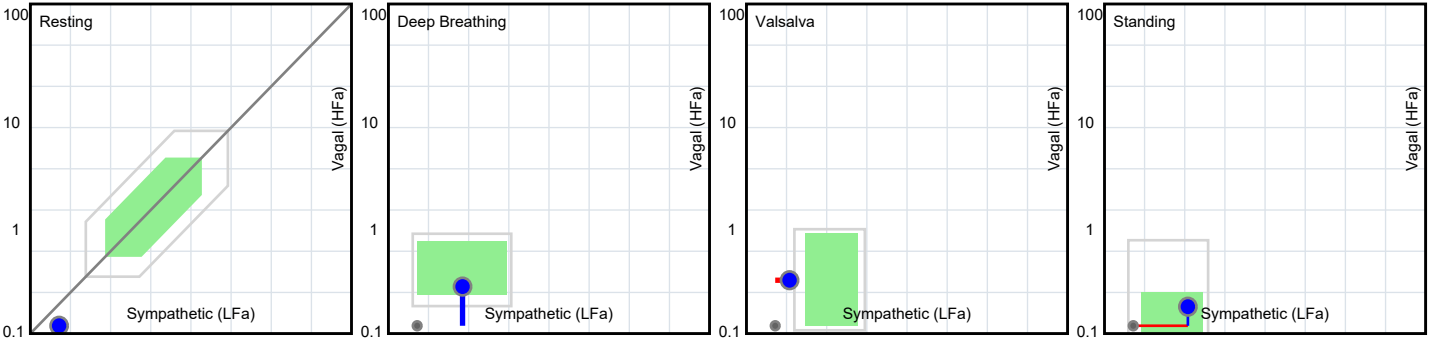
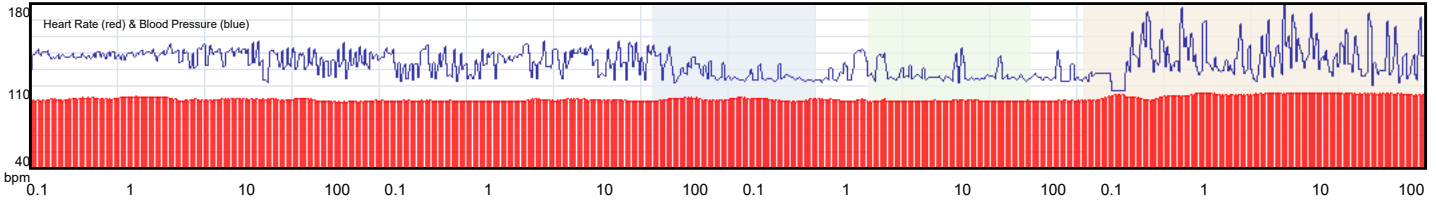
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Resting	98 H	147/77 H	0.15	0.19 L	0.12 L	1.58 H	3.51	50	7	4	91
Deep Breathing	99/96	127/74	0.12	0.49	0.27 N	1.84	23.69	35	6	4	93
Valsalva	99/97	120/79	0.17	0.25 L	0.31	0.83	2.28	13	4	3	93
Standing	102 L	151/96 H	0.17	0.6 N	0.18 N	3.42	18.39	100	10	4	89

Signal Quality = Resting: Good Deep Breathing: Good Valsalva: Good Standing: Good

Autonomic Tonus = 0 L E/I Ratio = 1.03 L Valsalva Ratio = 1.02 L 30:15 Ratio = 1.05 L

Resting: Possible severe chronic autonomic dysfunction – possible Cardiac Autonomic Neuropathy (CAN) [According to Framingham Heart Study]; Clinical protection of the heart is recommended. [Example Beta Blockers, Ace Inhibitors, Angiotensin II Receptor Blockers or Calcium Channel Blockers and additionally cardiovascular workouts]; Possible acute autonomic nervous system dysfunction of the patient such as orthostatic hypotension, heat intolerance, loss of bladder or bowel control - if patient is on Beta-blockers, titration of medication is suggested to increase LFa response and cardiovascular workouts; Possible mild, acute dysautonomia; Symptoms such as orthostatic hypotension, heat intolerance, loss of bladder and bowel control; Suggests Hypertension; Vagal dystonia. This may be a sign of physical or mental fatigue, chronic stress, possibly the presence of a chronic health condition causing a decrease in the regulatory function of the parasympathetic nervous system. If similar results appear 3 or more times in a row, it is recommended that one should have a thorough health checkup. Maintaining a healthy lifestyle may help improve the functioning of the autonomic nervous system;

Deep Breathing: Normal Parasympathetic response to stimulation;

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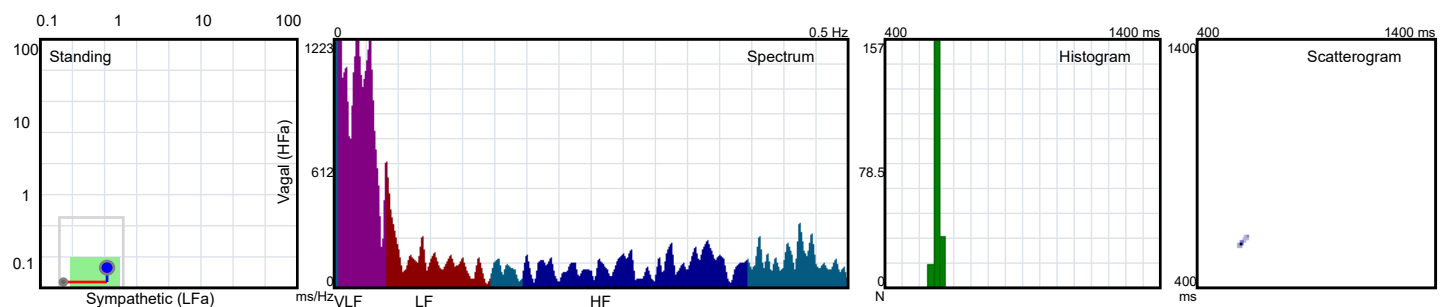
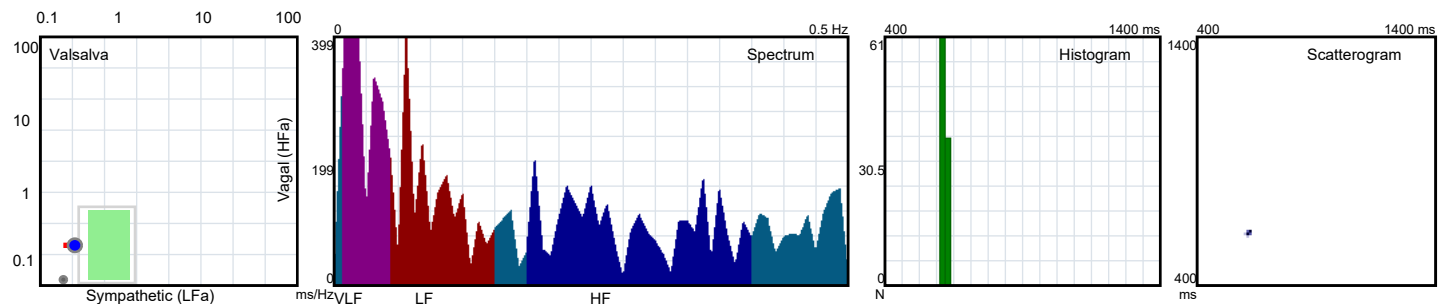
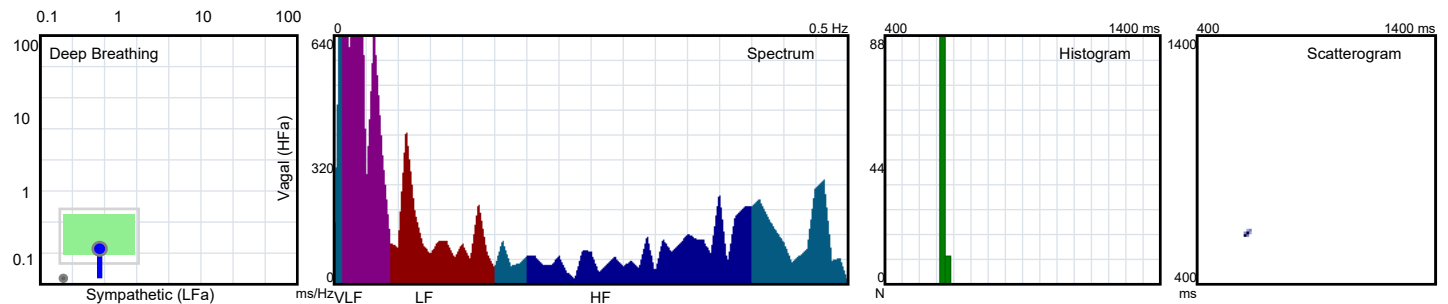
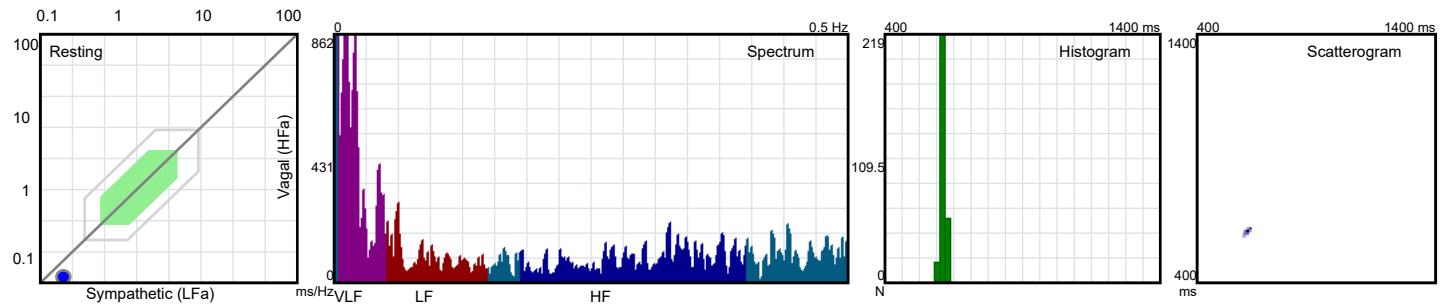
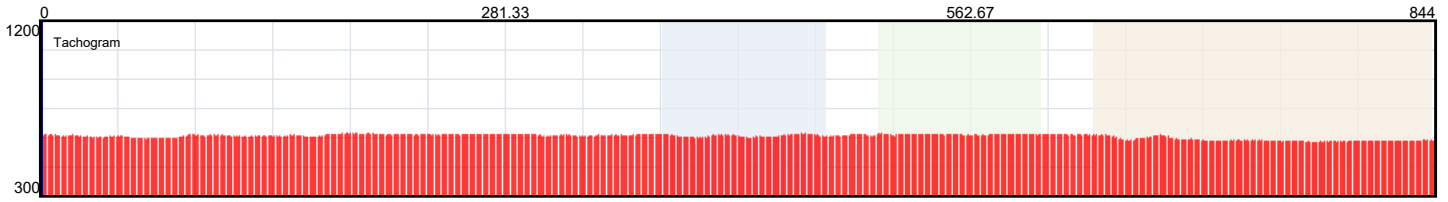
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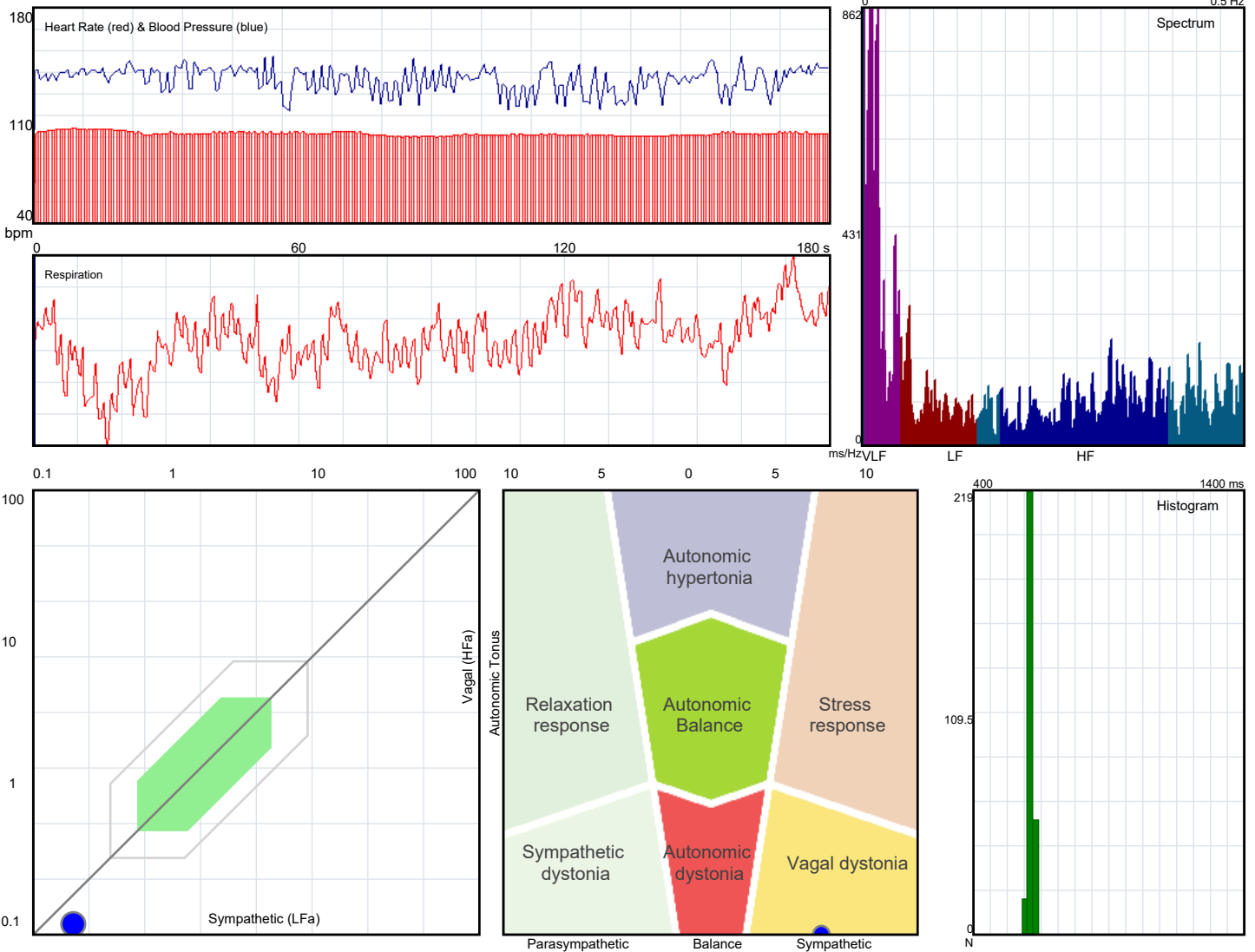
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HeartBeats = 294 Artifacts = 1 (0.3%) Signal Quality = Good

Autonomic Tonus = 0 L

	value	normal	borderline	high	low
LFa	0.19	0.5-4	0.3-0.5	>7	<0.3
HFa	0.12	0.5-4	0.3-0.5	>7	<0.3
LFa/HFa	1.58	0.4 to 3		> 3	< 0.4
HR	98				
BP	147/77				
RMF	0.15				
VLF	42.81				
LF	2.68				
HF	0.77				
SDNN	7				
rmsSD	4				
pNN50	0				
TSP	50				
LF/HF	3.51				
SpO2	91				

HR,PD - bpm; RMF - Hz; VLF,LF,HF,TSP - ms²; HFa,LFa - bpm²

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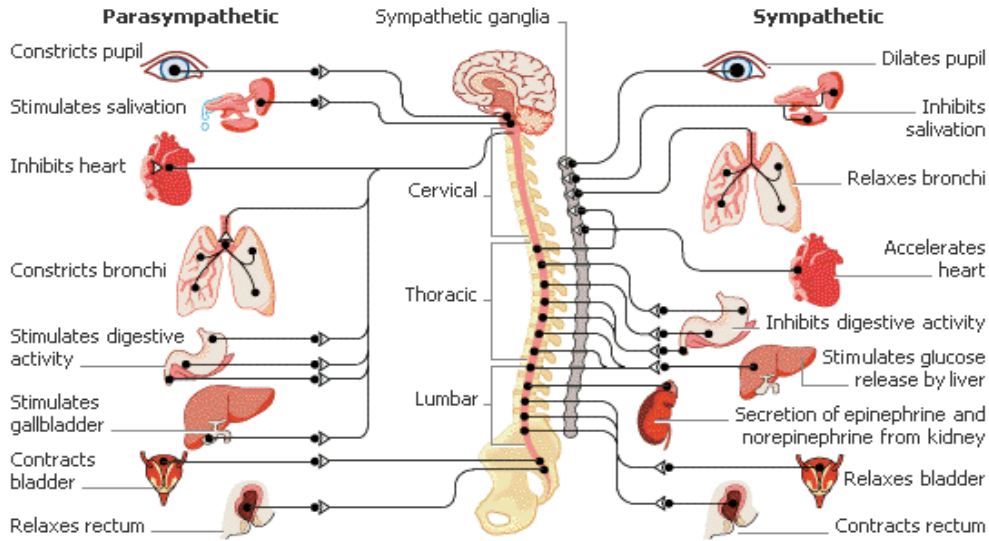
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Non-Invasive Autonomic Nervous System Monitoring

Your nervous system is comprised of three parts:

- 1) Somatic (or sensory) nervous system
- 2) Motoric Nervous System
- 3) Autonomic Nervous System (ANS)

Your ANS is that part of your nervous system which functions to sustain your life by helping to control your heart, lungs, digestive system, blood pressure, immune system, certain reflexes, such as coughing and gagging, fluid balance, pupil diameter, sweating and sexual function.

Your ANS Consists of Two Parts (branches). There are two parts, or branches to your ANS

- 1) Sympathetic branch
- 2) Parasympathetic branch

Generally, the sympathetic branch is more in control when you are stressed, nervous, or excited, while the parasympathetic branch is more in control when you are relaxing, sleeping, or recovering from an illness or injury.

A balance between the two branches of your ANS is essential for good health. In fact, most illnesses and injuries cause or result from an imbalance between these two branches. An imbalance in your ANS can tell your doctor many things about how healthy you are as well as what can be done to keep you as healthy as possible.

ANS monitoring records your heart rate variability and respiratory activity. Your heart rate variability and respiratory activity are analyzed by a computer to determine how your ANS is controlling your heart and your lungs and other parts of your body. Your physician then interprets your results produced by the computer.

What is Heart Rate Variability (HRV)?

Heart rate variability (HRV) is a measure of your heart's ability to quickly respond to changes in your level of activity. Moderate variability is healthy. Too much or too little is unhealthy. ANS monitoring using HRV can provide your doctor with information that cannot be seen using other measures, for example on an EKG recording.

Why is including respiratory activity important?

Analyzing your respiratory activity along with your HRV is key to monitoring the balance between the two branches of your autonomic nervous system.

Why is ANS monitoring important?

Everyone is different, and so is their autonomic nervous system. How an individual responds to disease, injury, medicines and medical treatments largely depends on her or his ANS. By monitoring your ANS, your doctor can determine whether she or he is doing enough to keep you healthy. In this way, your doctor can better care for you and better maintain your well-being.

Who should be monitored?

Everyone from children to older adults can and should have their ANS monitored. Frequent monitoring, when indicated, helps your doctor better maintain your health and well-being and tailor treatments, including medications, especially for you.

Physician's Notes:

All results and analysis should be considered in the context of persons/candidate's case history, symptoms, diagnosis, current medications, treatment plans and therapies. Final diagnosis is the sole responsibility of the licensed medical practitioner after persons examination, lab tests and/or other clinical findings as necessary.

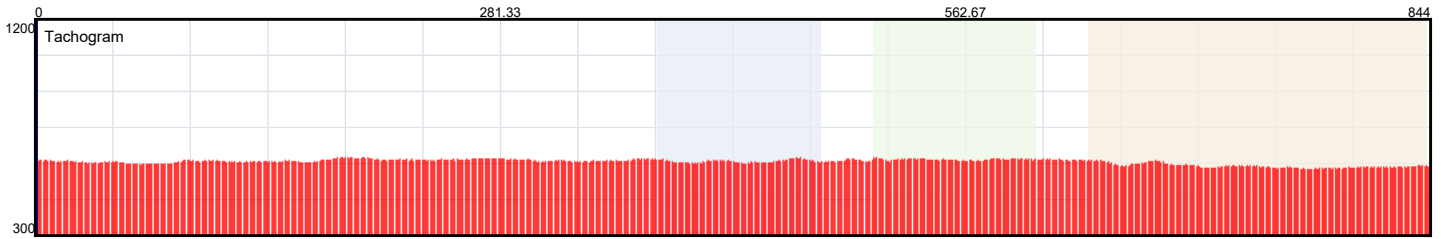
Demo Diabetes

Gender: Female
Age: 83 (DOB: Dec 18 1937)

Weight: 170 lbs
BMI: 34.3

Height: 4 ft 11 in

Exam Date: Mar 2 2021 09:21



	HR	BP	RMF	LFa	HFa	LFa/HFa	LF/HF	TSP	SDNN	rmsSD	SpO2
Resting	98 H	147/77 H	0.15	0.19 L	0.12 L	1.58 H	3.51	50	7	4	91
Deep Breathing	99/96	127/74	0.12	0.49	0.27 N	1.84	23.69	35	6	4	93
Valsalva	99/97	120/79	0.17	0.25 L	0.31	0.83	2.28	13	4	3	93
Standing	102 L	151/96 H	0.17	0.6 N	0.18 N	3.42	18.39	100	10	4	89

Signal Quality = Resting: Good Deep Breathing: Good Valsalva: Good Standing: Good

Autonomic Tonus = 0 L E/I Ratio = 1.03 L Valsalva Ratio = 1.02 L 30:15 Ratio = 1.05 L

RESTING:

Possible severe chronic autonomic dysfunction – possible Cardiac Autonomic Neuropathy (CAN) [According to Framingham Heart Study]; Clinical protection of the heart is recommended. [Example Beta Blockers, Ace Inhibitors, Angiotensin II Receptor Blockers or Calcium Channel Blockers and additionally cardiovascular workouts]; Possible acute autonomic nervous system dysfunction of the patient such as orthostatic hypotension, heat intolerance, loss of bladder or bowel control - if patient is on Beta-blockers, titration of medication is suggested to increase LFa response and cardiovascular workouts; Possible mild, acute dysautonomia; Symptoms such as orthostatic hypotension, heat intolerance, loss of bladder and bowel control; Suggests Hypertension; Vagal dystonia. This may be a sign of physical or mental fatigue, chronic stress, possibly the presence of a chronic health condition causing a decrease in the regulatory function of the parasympathetic nervous system. If similar results appear 3 or more times in a row, it is recommended that one should have a thorough health checkup. Maintaining a healthy lifestyle may help improve the functioning of the autonomic nervous system;

DEEP BREATHING:

Normal Parasympathetic response to stimulation;

VALSALVA:

Hypoactive sympathetic response to stimulation; Possible Maneuver Induced Tachycardia;

STANDING:

Normal ANS response to stimulation; Indicates Sympathetic Factor to Arrhythmia; Heart rate upon standing is considered 'low';

Physician's Notes:

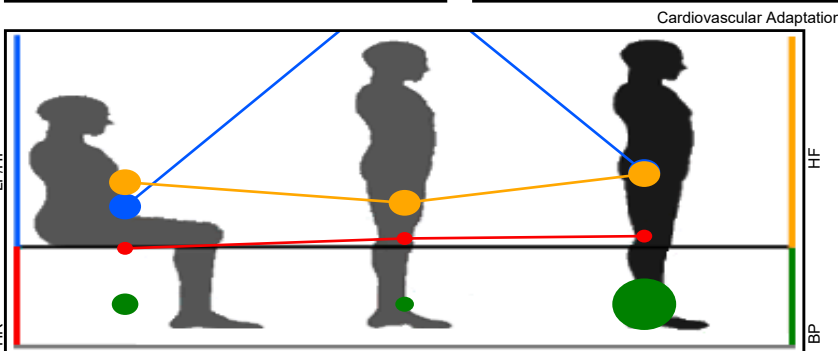
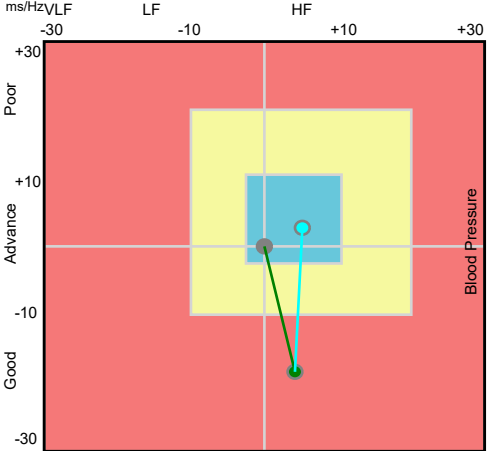
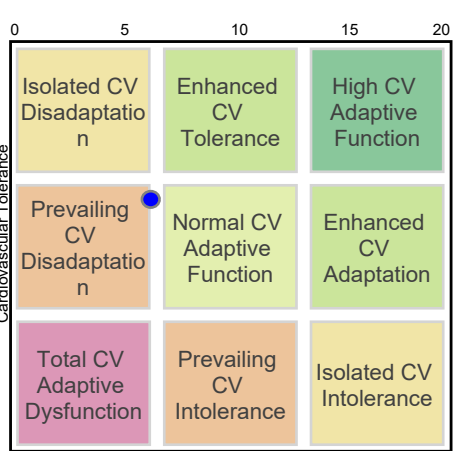
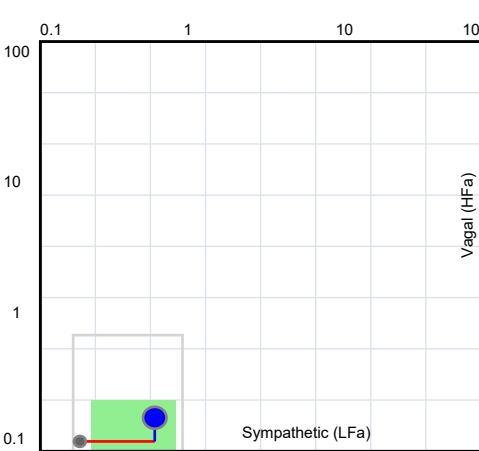
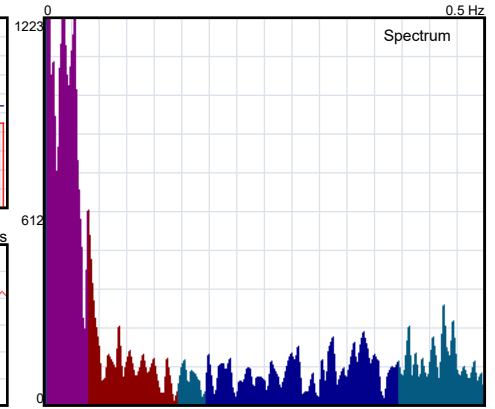
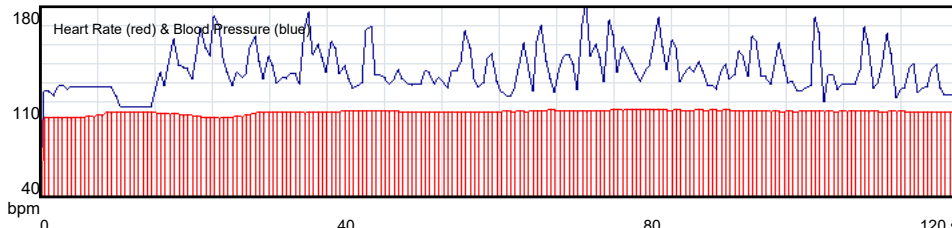
Demo Diabetes

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Age: 83 (DOB: Dec 18 1937)

Weight: 170 lbs
BMI: 34.3

Height: 4 ft 11 in

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	Resting	Standing 1	Standing 2
HR	98	102	103
LF%	5.32	30.8	21.7
HF%	1.52	0.83	4.14
SDNN	7.09	22.82	3.83
BP	147	120	151
LF/HF	3.51	37.26	5.25

Total HeartBeats = 204 Artifacts = 1 (0.5%) Signal Quality = Good

	value(re->st)	ratio(st/re)	normal	borderline	high	low
HFa	0.12->0.18	1.49	<2	2-6	>6	
LFa	0.19->0.6	3.24	1.2-4.5	4.5-5	>5	<0.9
LFa/HFa	1.58->3.42	2.17	1.2-5	0.9-1.2	>5	<0.9
HR	98->102	1.04	>1.1	1-1.1	>30	<1
30:15 Ratio	1.05		>1.1			<1.1
TSP	100	LF/HF	18.39	RMF	0.17	
SDNN	10	rmsSD	4	pNN50	0	
SDSD	4.06	PH	55	SpO2	89	

HR,PD - bpm; RMF - Hz; VLF,LF,HF,TSP - ms²; HFa,LFa - bpm²

Normal ANS response to stimulation; Indicates Sympathetic Factor to Arrhythmia; Heart rate upon standing is considered 'low';

Physician's Notes:

Demo Diabetes

Gender: Female
Age: 83 (DOB: Dec 18 1937)

Weight: 170 lbs
BMI: 34.3

Height: 4 ft 11 in

Exam Date: Mar 2 2021 09:21

Recorded time	
Start Date	2021-03-02 09:21:43
Duration	8 min 31 sec (844 beats)
High Pass Filters	3.4 Hz

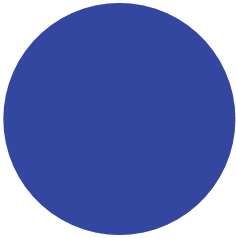
Heart Rate	
Average Heart Rate	99 bpm
Fastest rate	104 bpm
Slowest rate	96 bpm

Ventricular Details	
PVC - Ventricular Ectopy	0 beats (0%)
Ventricular Couplet	0 episodes

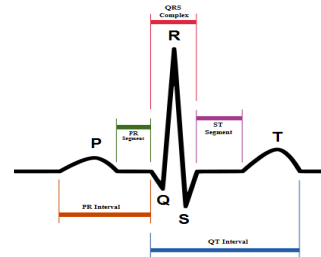
Supraventricular Details	
PAC - Supraventricular Ectopy	0 beats (0%)
Supraventricular Couplet	0 episodes

HRV Analysis	
SDNN	4 ms

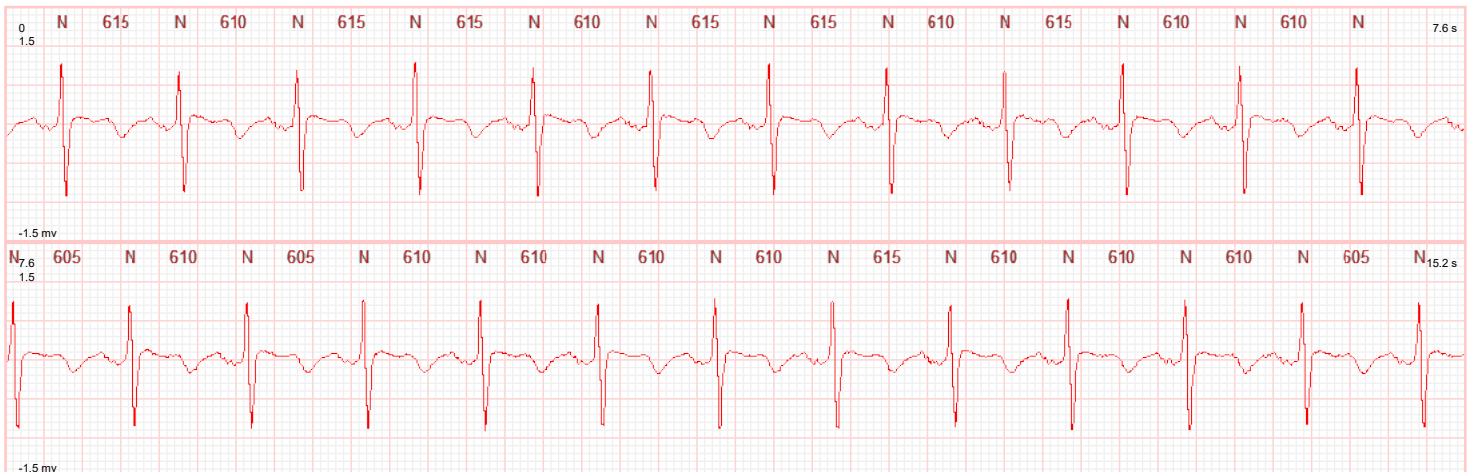
QRS Analysis	
QRS	71 ms
QT / QTc	313 ms / 403 ms
PR int / seg	69 ms / 34 ms
ST int / seg	226 ms / 100 ms



■ PAC - Atrial Extrasystole: 0%
■ PVC - Ventricular Extrasystole: 0%
■ Normal: 100%



Interpretations:



Physician's Notes:

All results and analysis should be considered in the context of persons/candidate's case history, symptoms, diagnosis, current medications, treatment plans and therapies. Final diagnosis is the sole responsibility of the licensed medical practitioner after persons examination, lab tests and/or other clinical findings as necessary.

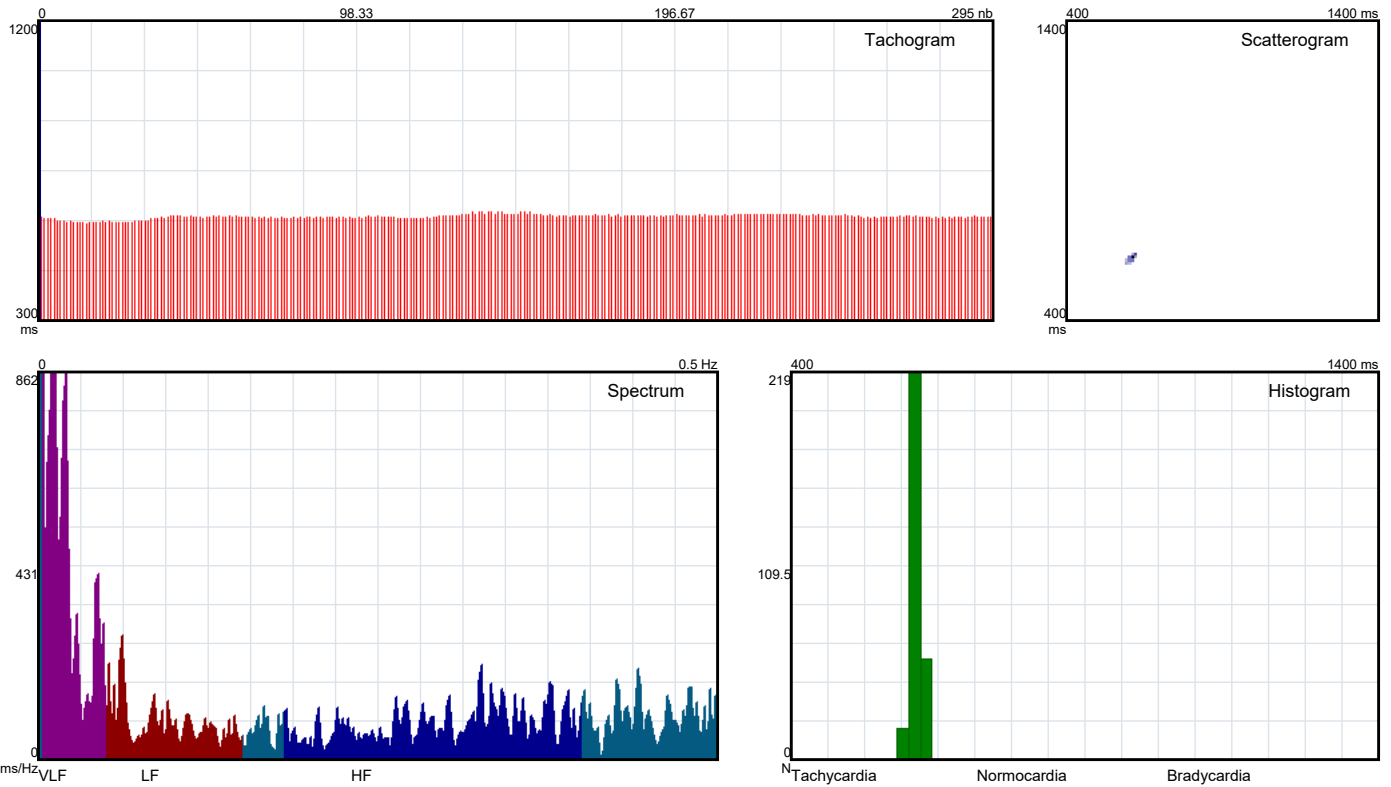
Demo Diabetes

Gender: Female
Age: 83 (DOB: Dec 18 1937)

Weight: 170 lbs
BMI: 34.3

Height: 4 ft 11 in

Exam Date: Mar 2 2021 09:21



Total HeartBeats = 294 Artifacts = 1 (0.3%) Signal Quality = Good
HeartRate = 98.13 (bpm) TDI = 6.31 FDI = 170.87 SDNN = 7.09

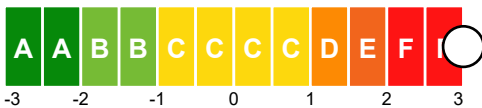
FUNCTIONAL AGE (in years) = 90

HEALTH RISK Factor Based on Stress Assessment = 75.66 %

Physical Stress Coefficient = 30.82 (Normal value: 3 Range from 0 to 4 Unfavorable values: higher than 3.5)

PHYSICAL STRESS INDEX = 27.82

(Normal value: 0 Range from -3 to 3 Unfavorable values: higher than 1)

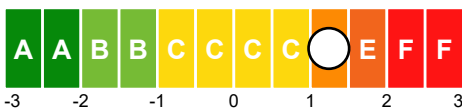


The score is clearly above average. It indicates high physical stress. Stress in the recent past has had a major impact on your physical balance. The negative effects of physical stress are clearly visible. This situation necessitates immediate attention.

Mental Stress Coefficient = 3.84 (Normal value: 2.6 Range from 0 to 4 Unfavorable values: higher than 3.1)

MENTAL STRESS INDEX = 1.24

(Normal value: 0 Range from -3 to 3 Unfavorable values: higher than 1)



The score is clearly above average. It indicates high mental stress. Stress in the recent past has had a major impact on your mental health. The negative effects of mental stress are clearly visible. You are likely to experience concentration problems, forgetfulness and reduced energy levels.

Physician's Notes:

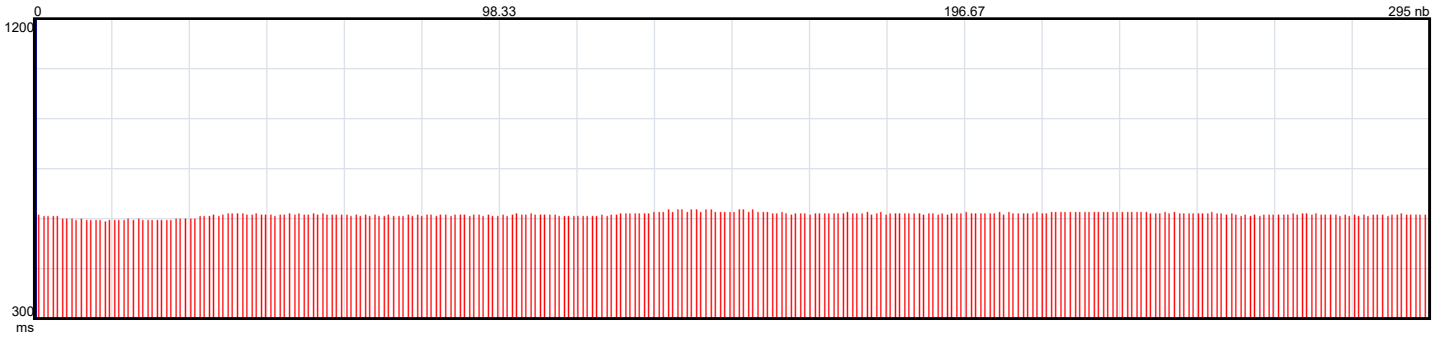
Demo Diabetes

Gender: Female
Age: 83 (DOB: Dec 18 1937)

Weight: 170 lbs
BMI: 34.3

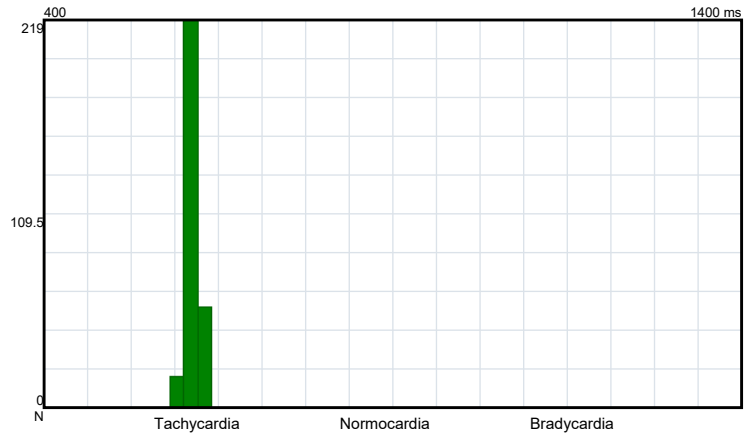
Height: 4 ft 11 in

Exam Date: Mar 2 2021 09:21

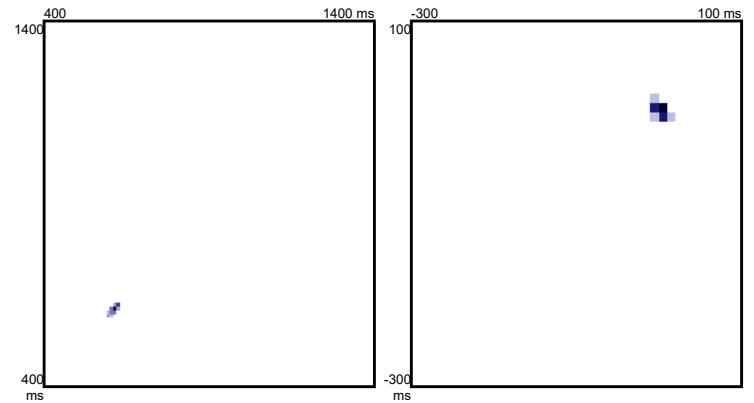


Total HeartBeats = 294 Artifacts = 1 (0.3%) Signal Quality = Good

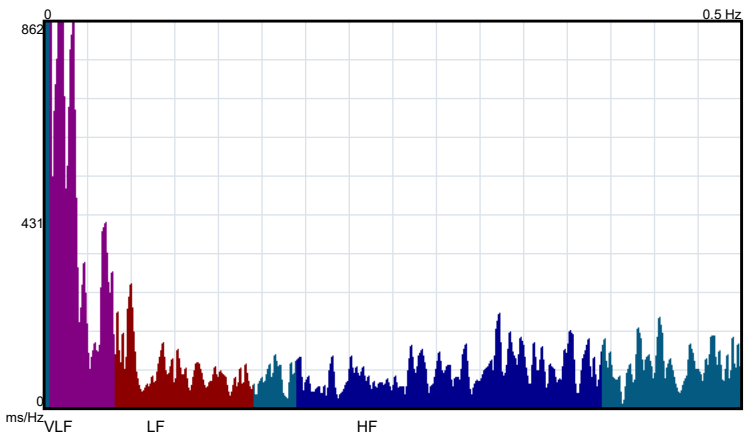
Parameters	Value	Units
HeartRate	98.13	bpm
AMo	219	number
Mo	600	ms
SDNN	7.09	ms
SDNN5	6.85	ms
pNN50	0	%
rmsSD	3.62	ms
SDSD	3.62	ms



Parameters	Value	Units
SD1	2.56	ms
SD2	9.7	ms
SD1/SD2	0.26	



Parameters	Peak(Hz)	Power(ms ²)	Power(%)	Power(n.u.)
VLF	0.02	42.81	84.88	
LF	0.07	2.68	5.32	35.19
HF	0.27	0.77	1.52	10.03
TP		50.43		
LF/HF		3.508		



Physician's Notes:

Demo Diabetes

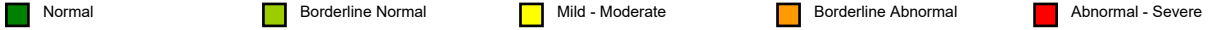
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Age: 83 (DOB: Dec 18 1937)

Weight: 170 lbs
BMI: 34.3

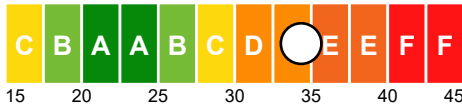
Height: 4 ft 11 in

Exam Date: Mar 2 2021 09:21

Ideal Body Weight = 98 Lbs
Real Body Weight = 170 Lbs
Basal Metabolic Rate (BMR) = 1284 cal
Total Daily Energy Expenditure = 1670 cal



Body Mass Index (BMI) = 34.3
(Normal value range: 19 - 25)



Body mass index, or BMI, is a new term to many people. However, it is the measurement of choice for many physicians and researchers and it is used to estimate a healthy body weight based on a person's height, assuming an average body composition.

It is the most widely used diagnostic tool to identify weight problems within a population. Body mass index is defined as the individual's body weight divided by the square of his or her height.

The body mass index can be used to identify if you are overweight. A drawback of the calculation is that if you are muscular it can suggest you are overweight due to muscle density.

An elevated BMI is associated with Metabolic Syndrome and is tied to an elevated risk of type 2 diabetes, hypertension, and cardiovascular disease.

Risk of Associated Disease According to BMI and Waist Size

- 18.5 or less: Underweight - N/A
- 19 - 25: Normal - very low risk of associated diseases
- 26 - 29: Overweight - prone to health risks
- 30 - 40: Overweight to Obese - high risk of associated diseases
- 40 or greater: Extremely Obese - very high risk of associated diseases

The Basal Metabolic Rate (BMR) shows the calories (energy) your body uses per day while at rest. The Total Daily Energy Expenditure shows the calories needed to maintain your current weight.

For healthy weight management increase your caloric usage (exercise) and decrease you caloric intake below the Total Daily Energy Expenditure towards the Basal Metabolic Rate (BMR).

Eating a high quality, nutrient dense diet (fresh vegetables (cooked and raw), chicken, fish, eggs, and yogurt) and staying away from carbohydrates and poor quality fats helps to prevent cravings and aids in weight loss. If you go too far below the Basal Metabolic Rate (BMR) your metabolism may slow down making weight management more difficult.

Physician's Notes:

Demo Diabetes

Gender: Female

Age: 83 (DOB: Dec 18 1937)

Weight: 170 lbs

BMI: 34.3

Height: 4 ft 11 in

Exam Date: Mar 2 2021 09:21

Are you taking medication for: High Blood Pressure (hypertension)

Have you ever been diagnosed with any of the following: Diabetes Type 2

Physician's Notes: