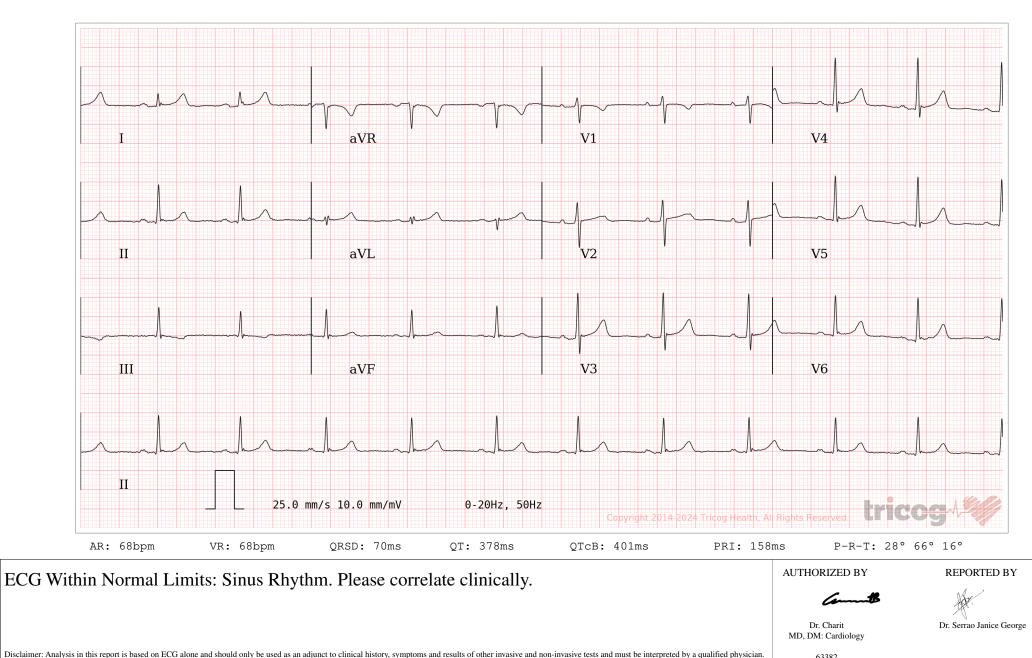
### **Chandan Diagnostic**



Age / Gender: 55/Female Date and Time: 16th Nov 24 9:41 AM CVAR0087792425 Patient ID: Patient Name: Mrs.MANJU DEVI- 22S38899



63382



Near vision: $M/\varphi$
Far vision : 6 / 6
Dental check up : Man
ENT Check up : New
Eye Checkup:

### Final impression

Certified	that	I	examined		anji	1	Du	~		S/o	or	D/o
				is	presently	in	good	health	and	free	from	any
cardio-res	pirato	ry/c	communicable	ailment,	he/she	is	fit	1 - Ur	nfit	-to	join	any
organizat	ion.											

.nandan Diagnostic Center 99,Shivaji Nagar,Mahmoorganj Varanasi-221010 (U.P.) Phone No.:0542-2223232

Dr. R.C. ROY MBBS., MD. (Radio Diagnosis) Reg. No.-26918

Signature of Medical Examiner

Name & Qualification - Dr. R. C. Roy (MBBS,MD)

Place - VARANASI





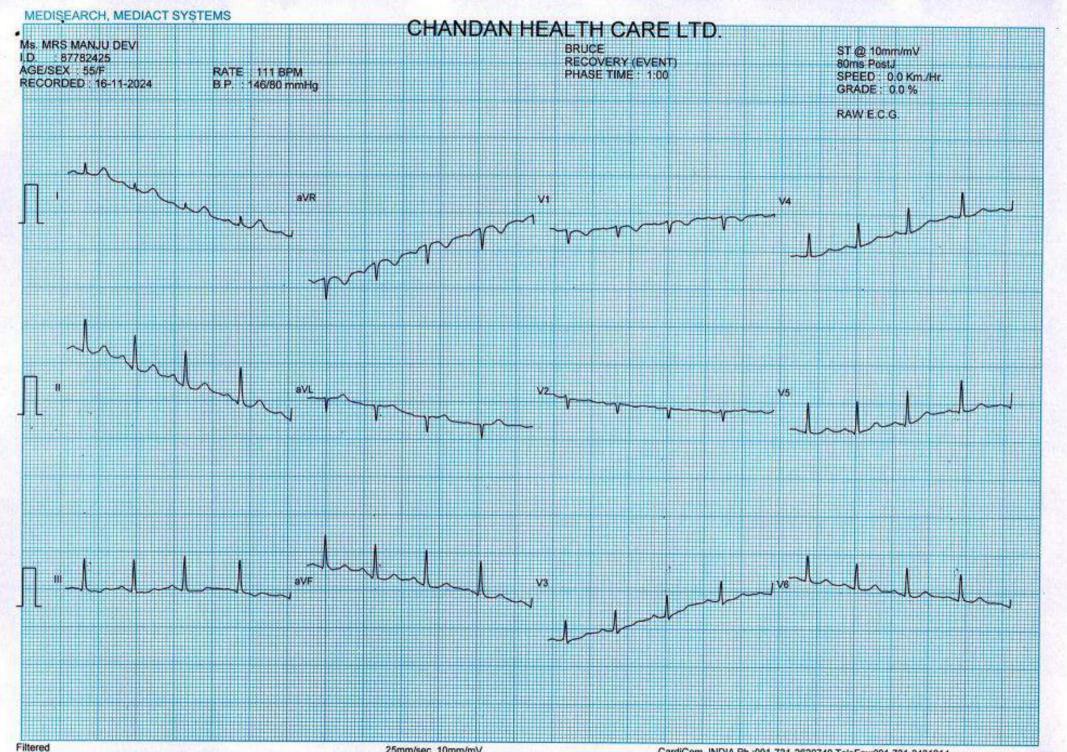


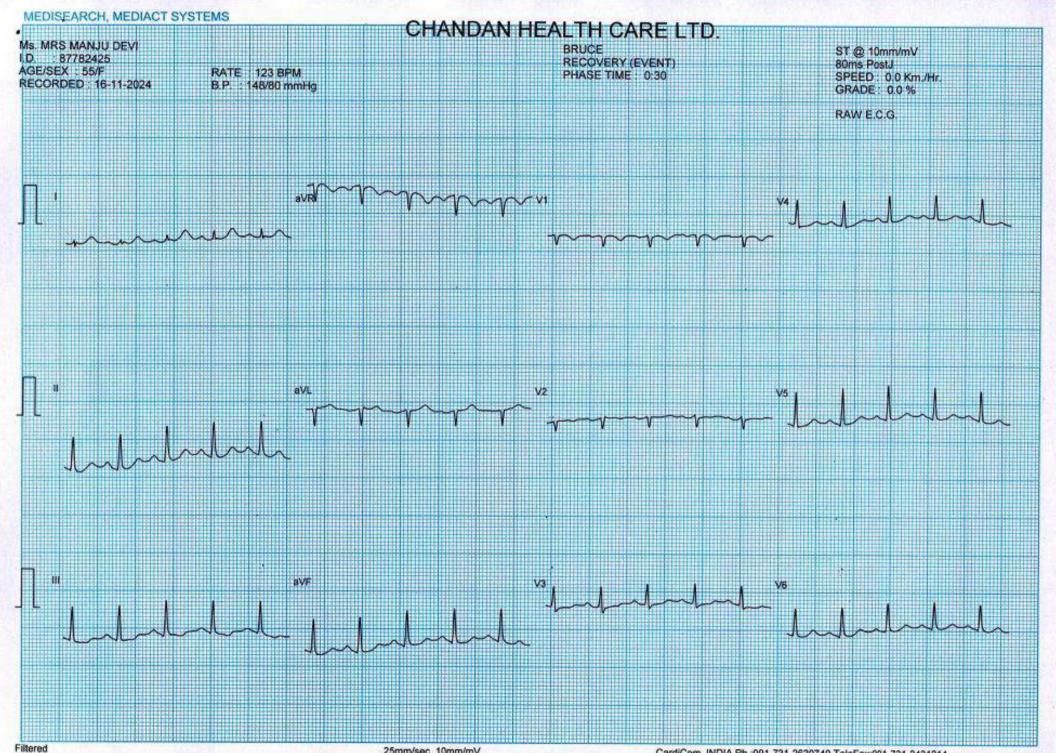


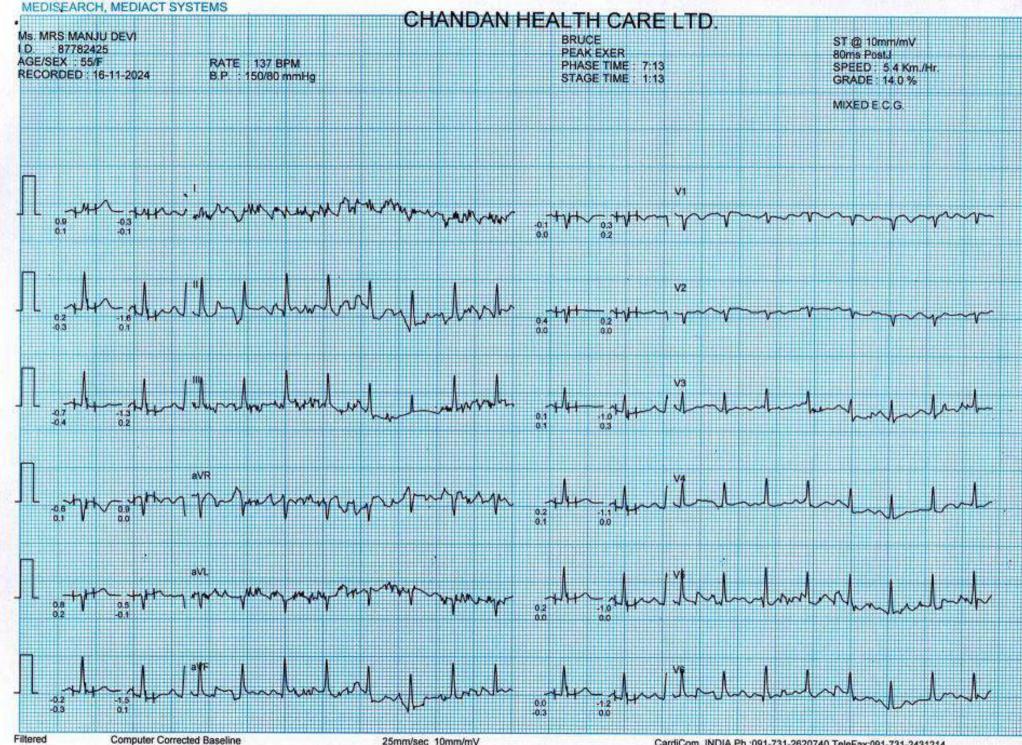
#### MEDISEARCH, MEDIACT SYSTEMS

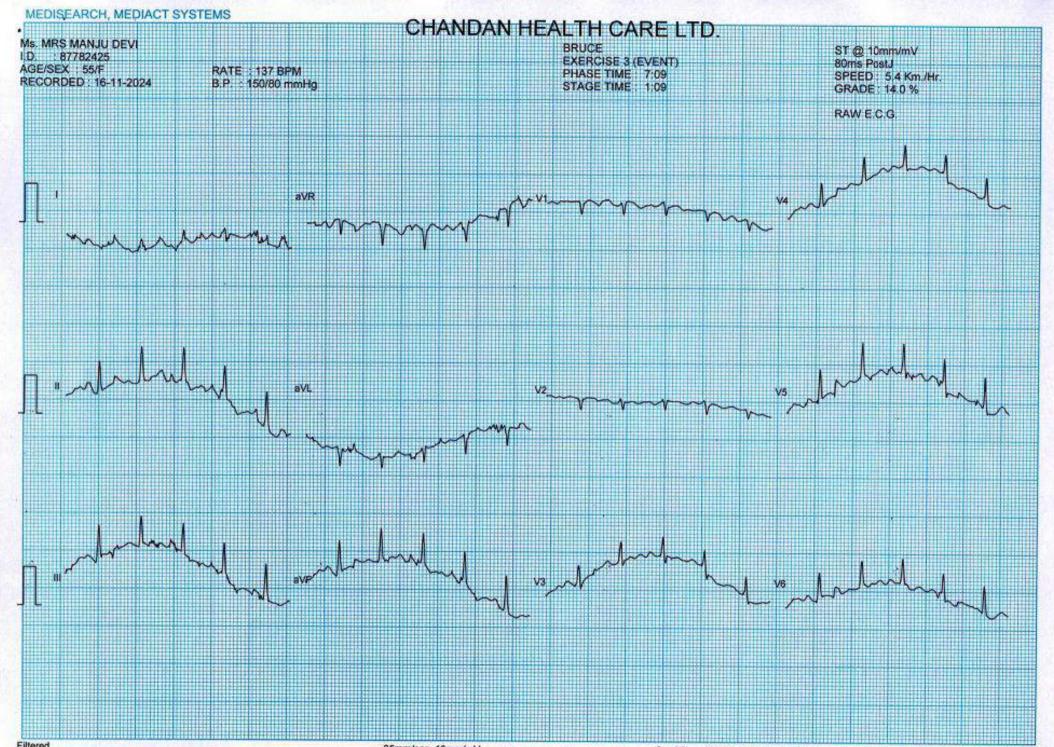
# CHANDAN HEALTH CARE LTD. 99-SHIVAJI NAGAR MAHMOORGANJ VARANASI-9839703068

Ms. MRS MANUU DEV Age : 55/F Ref. by : MEDIWHEEL Indication1 : Indication2 : Indication3 :			ID : 87782425 Ht/Wt : 146/69 Recorded : 16-11	-2024		TREADMILL TE Protocol: BRUC History: Medication1 : Medication2 : Medication3 :	ST SUMMARY	REPORT			
PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100	11	ST LEVEL (mm) V2	V5	METS
SUPINE HYPERVENT VALSALVA STANDING	0:02	0.02			88 87 86 86	120/78 120/78 120/78 120/78 120/78	105 104 103 103	0.1 0.1 0.1 0.1	0.6 0.6 0.6 0.6 0.6	02 02 02 02	
STAGE 1 STAGE 2 EVENT	2:59 5:59 7:09	2:59 2:59 1:09	2.70 4.00 5.40	10.00 12.00 14.00	113 122 137	130/80 140/80 150/80	146 170 205	-1.0 -1.4 -1.8	0.3 0.2 0.3	-0.3 -1.0 -1.1	4.80 7.10 8.22
PEAK EXER	7;13	1:13			137	160/80	205	-1.6	0,2	-1.0	8.28
EVENT EVENT EVENT RECOVERY	0:30 1:00 2:00 2:59	0.30 1.00 2:00 2:59	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00 0.00	123 111 - 90 97	148/80 146/80 144/80 142/80	182 162 129 137	-13 -08 -0.7 -0.7	0.3 0.2 0.2 0.0	-0.7 -0.3 -0.6 -0.5	
RESULTS Exercise Duration Max Heart Rate Max Blood Pressure Max Work Load Reason of Termination		7 13 Minutes 137 bpm 83 % of t 150/80 mmHg 8.28 METS KNEE PAIN	arget heart rate 16	15 bpm							
IMPRESSIONS		· TMT	is nee	al. a	v nes	reible	moca	al 537	is charens		
			Con el i		pault	T.Balaji Lo	Y	~~~			
		2000			42 111.1	DM-(CAR	MED)				
		NO 0	(~~ Urmi	a		MCI-11	4859	,	2		
		thre	afectory.c	es vbern	$\odot$	Cardiologist	.1 3	andry	Zan		
		Corre	and d	- لغرف		Jale		mil Cano	Hror		



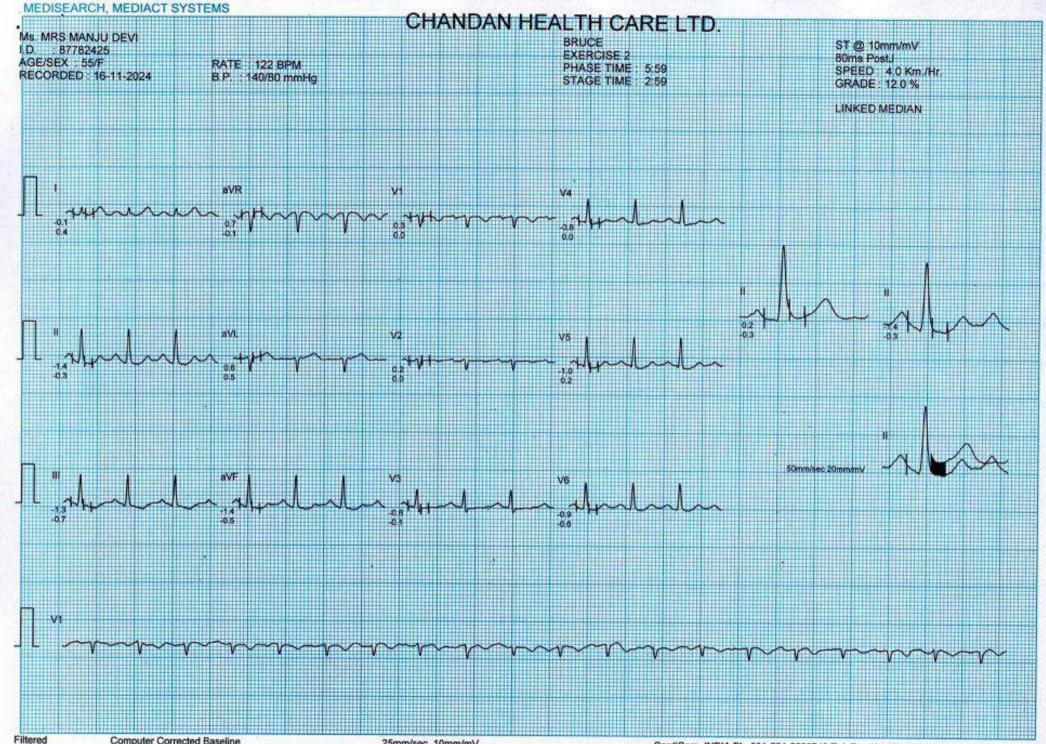




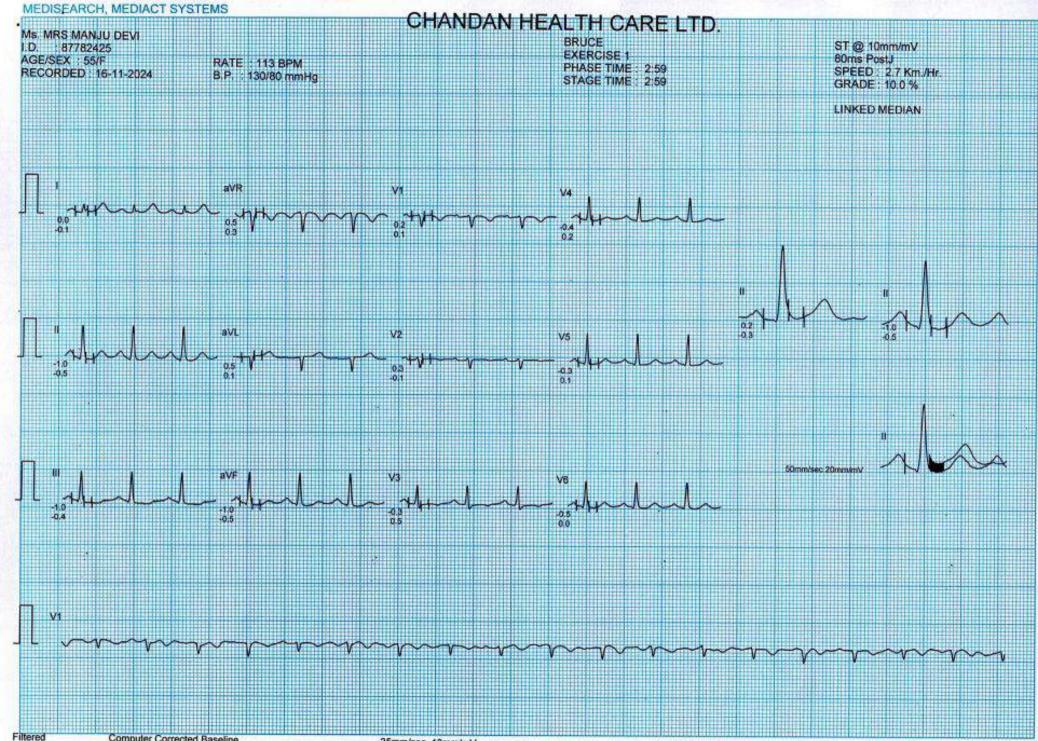


<sup>25</sup>mm/sec 10mm/mV

Filtered

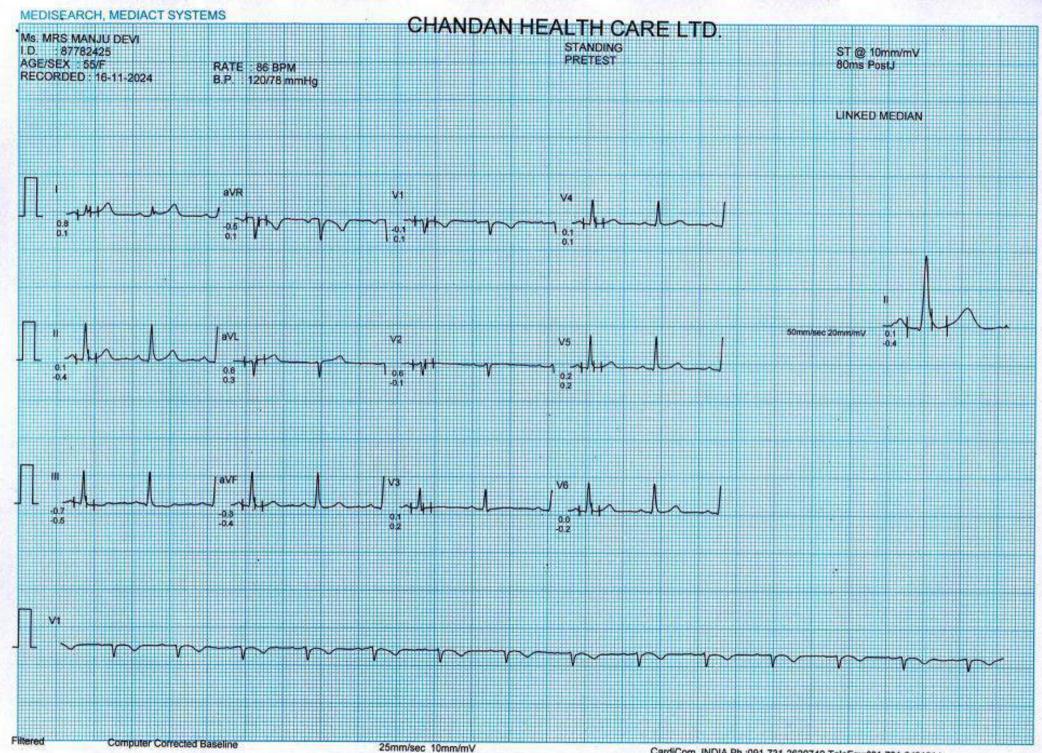


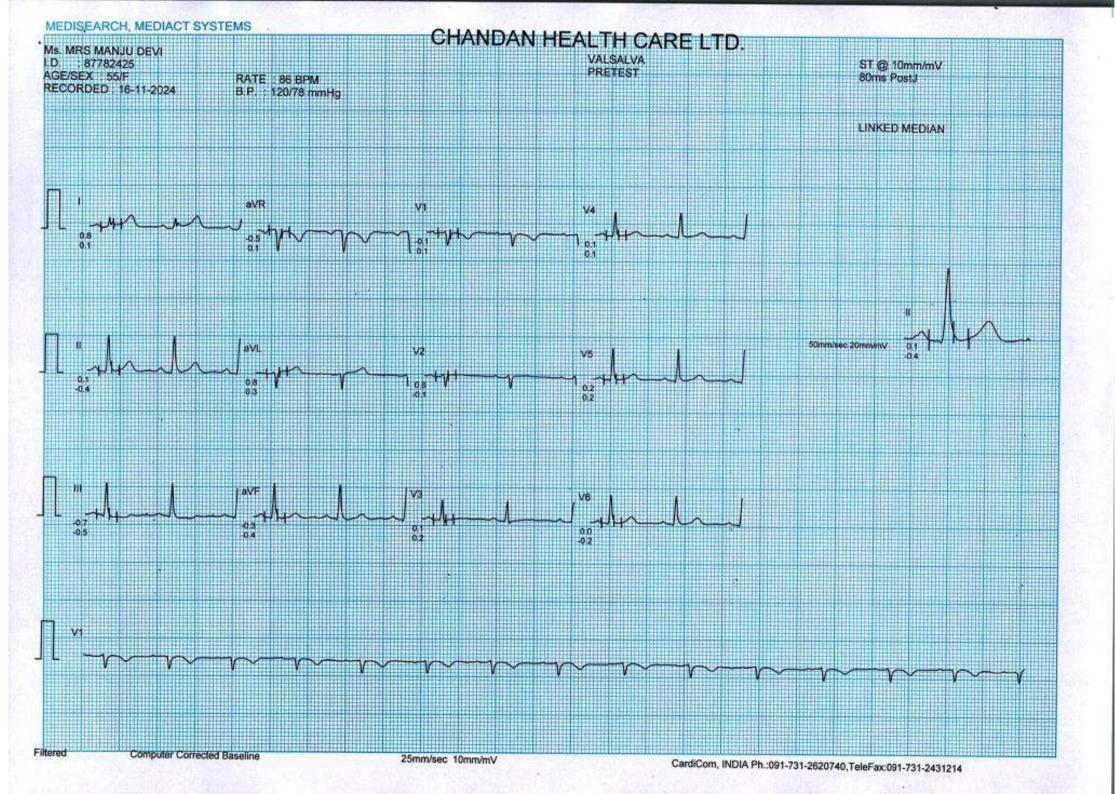
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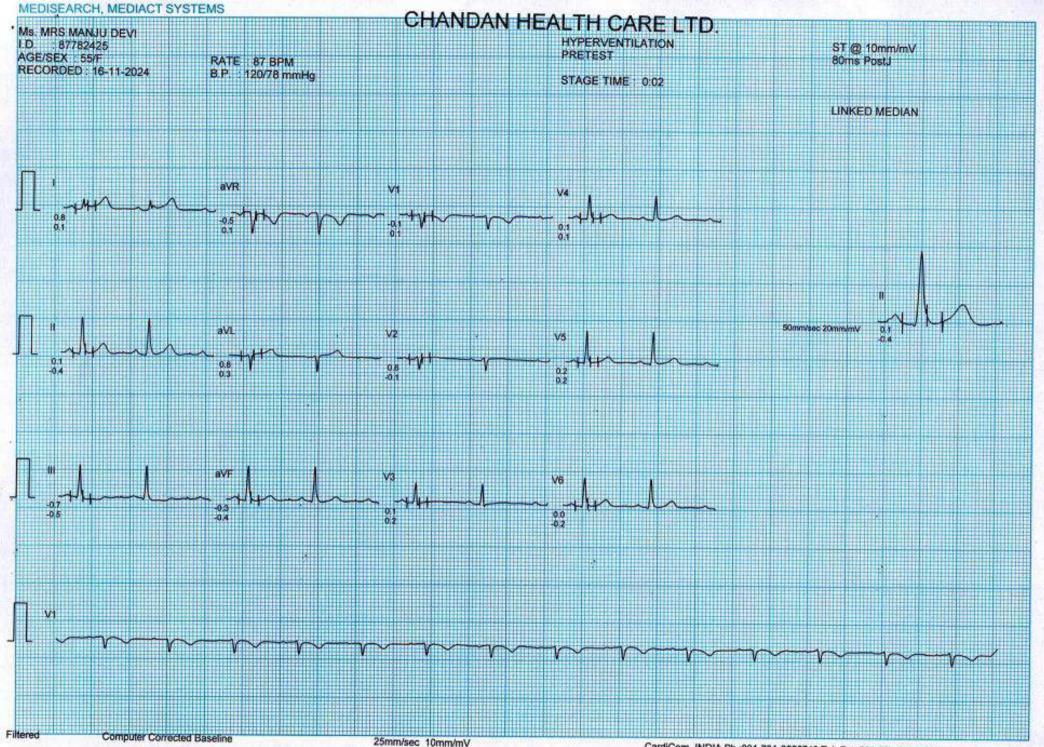


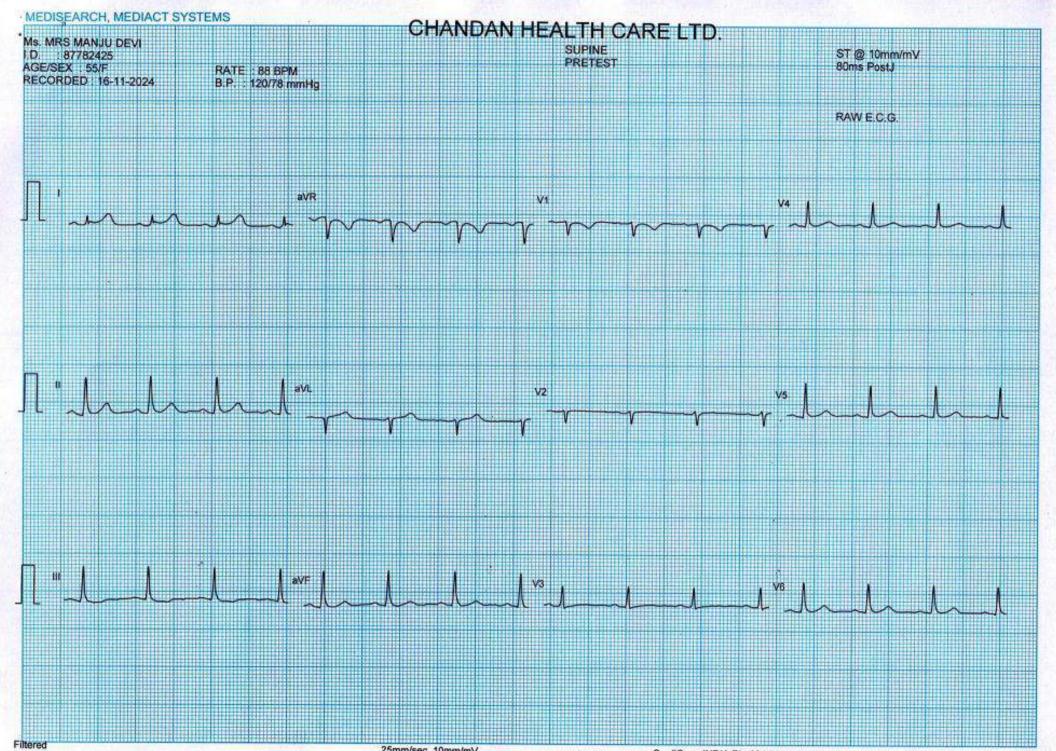
Computer Corrected Baseline

25mm/sec 10mm/mV



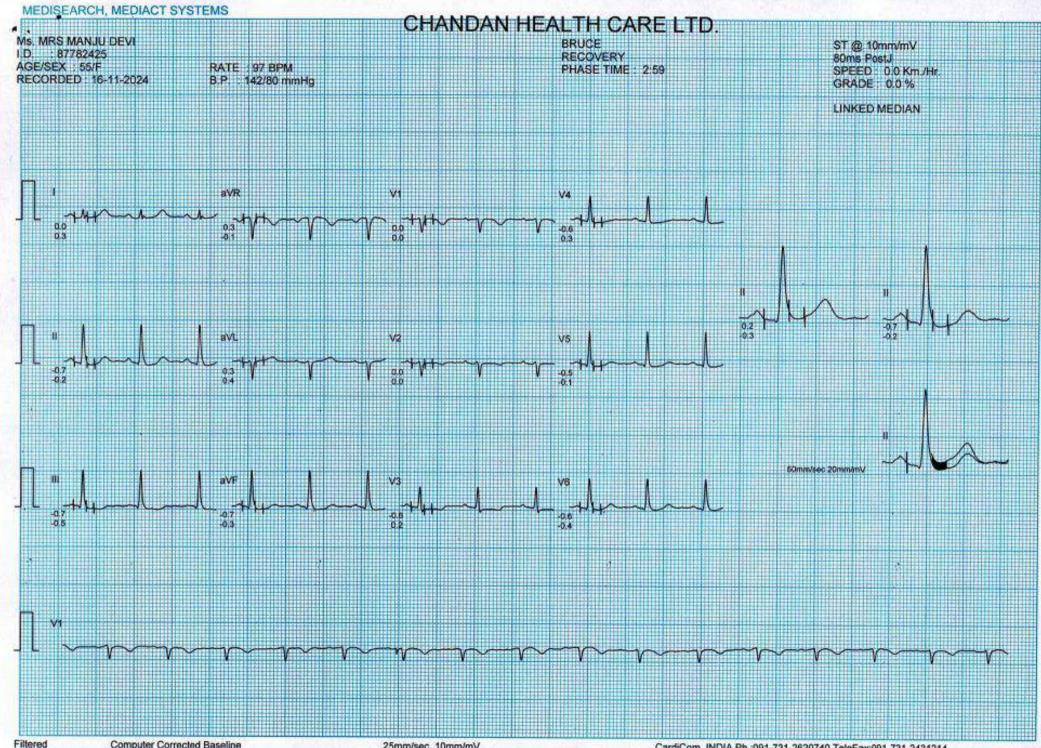






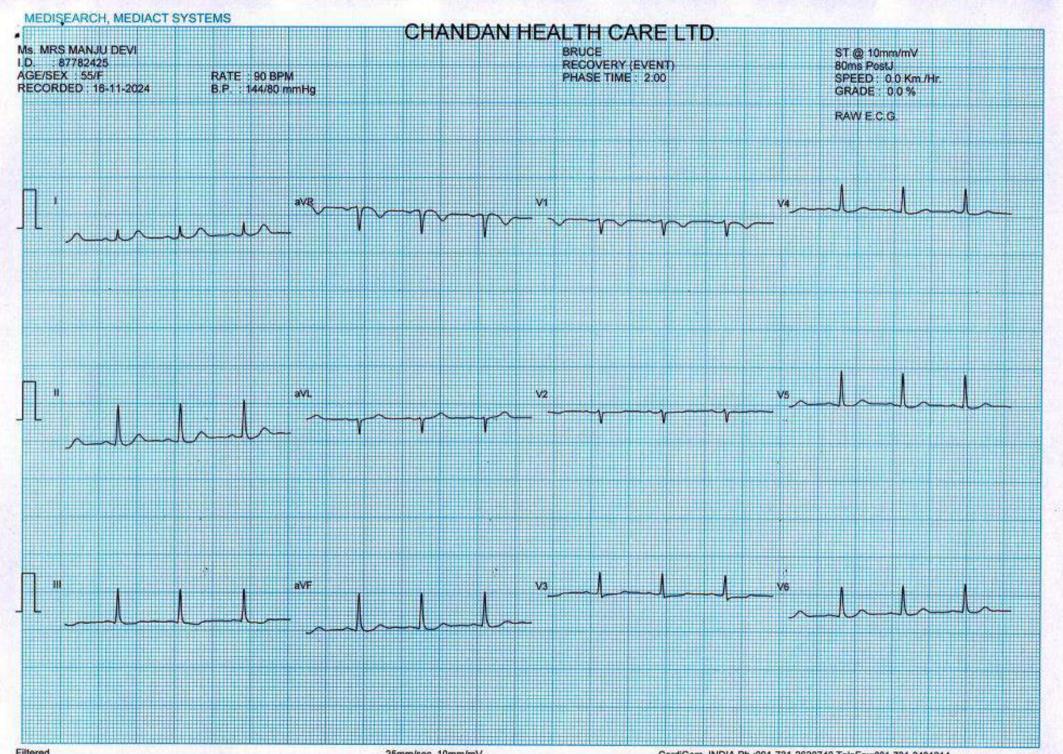
CardiCom, INDIA Ph.:091-731-2620740, TeleFax:091-731-2431214

1



Computer Corrected Baseline

25mm/sec 10mm/mV





Name of Company: Mediuheel	
Name of Executive: Manju Deri	
Date of Birth:0.7	
Sex: Mate / Female	
Height:	
Weight:69KGs	
BMI (Body Mass Index) : 32.4	
Chest (Expiration / Inspiration)	
Abdomen: ./CMs	
Blood Pressure:	
Pulse:BPM - Regular Hrregular	
Ident Mark: Cut Markan Acteyetus	
Any Allergies:	
Vertigo: reo	
Any Medications: No	
Any Surgical History: No	
Habits of alcoholism/smoking/tobacco:	
Chief Complaints if any:	
Lab Investigation Reports: No	
Eye Check up vision & Color vision: March E Pour glass 10 yo	enp
Left eye: 0.75	
Right eye: 0-75	









Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-4501413 CIN: U85110UP2003PLC193493

Patient Name	: Mrs.MANJU DEVI- 22S38899	Registered On	: 16/Nov/2024 09:29:49
Age/Gender	: 55 Y 0 M 0 D /F	Collected	: 16/Nov/2024 11:50:15
UHID/MR NO	: CVAR.0000057858	Received	: 16/Nov/2024 12:02:22
Visit ID	: CVAR0087792425	Reported	: 16/Nov/2024 13:51:39
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

### DEPARTMENT OF HAEMATOLOGY

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Group (ABO & Rh typing) **	* , Blood			
Blood Group	АВ			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
Rh ( Anti-D)	POSITIVE			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
Complete Blood Count (CBC) ** , u	Whole Blood			
Haemoglobin	12.40	g/dl	1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl 1 Mo- 10.0-18.0 g/dl 3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl	COLORIMETRIC METHOD (CYANIDE-FREE REAGENT)
TLC (WBC) <u>DLC</u>	6,400.00	/Cu mm	4000-10000	IMPEDANCE METHOD
Polymorphs (Neutrophils )	60.00	%	40-80	FLOW CYTOMETRY
Lymphocytes	35.00	%	20-40	FLOW CYTOMETRY
Monocytes	2.00	%	2-10	FLOW CYTOMETRY
Eosinophils	3.00	%	1-6	FLOW CYTOMETRY
Basophils <b>ESR</b>	0.00	%	< 1-2	FLOW CYTOMETRY
Observed	10.00	MM/1H	10-19 Yr 8.0 20-29 Yr 10.8 30-39 Yr 10.4 40-49 Yr 13.6 50-59 Yr 14.2 60-69 Yr 16.0 70-79 Yr 16.5 80-91 Yr 15.8	









Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-4501413 CIN: U85110UP2003PLC193493

Patient Name Age/Gender UHID/MR NO	: Mrs.MANJU DEVI- 22S38899 : 55 Y 0 M 0 D /F : CVAR.0000057858	Registered On Collected Received	: 16/Nov/2024 09:29:49 : 16/Nov/2024 11:50:15 : 16/Nov/2024 12:02:22
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Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

#### DEPARTMENT OF HAEMATOLOGY

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
			Pregnancy Early gestation - 48 (62 if anaemic) Leter gestation - 70 (95 if anaemic)	
Corrected	6.00	Mm for 1st hr.	•	
PCV (HCT)	40.40	%	40-54	
Platelet count				
Platelet Count	192	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	18.10	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	40.20	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.20	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	11.80	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	4.40	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	91.90	fl	80-100	CALCULATED PARAMETER
MCH	28.10	pg	27-32	CALCULATED PARAMETER
MCHC	30.50	%	30-38	CALCULATED PARAMETER
RDW-CV	16.20	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	53.10	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,840.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	192.00	/cu mm	40-440	

S.N. Sinton Dr.S.N. Sinha (MD Path)

Page 2 of 12











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UHID/MR NO	: CVAR.0000057858	Received	: 16/Nov/2024 12:02:23
Visit ID	: CVAR0087792425	Reported	: 16/Nov/2024 13:17:04
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

#### DEPARTMENT OF BIOCHEMISTRY

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interva	ıl	Method
GLUCOSE FASTING ** , Plasma					
·					
Glucose Fasting 105.	.80 mg/dl	100-1	Normal 25 Pre-diabetes Diabetes	GOD PO	D

#### Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.c) I.G.T = Impaired Glucose Tolerance.

**CLINICAL SIGNIFICANCE:** Glucose is the major source of energy in the body. Lack of insulin or resistance to it section at the cellular level causes diabetes. Therefore, the blood glucose levels are very high. Elevated serum glucose levels are observed in diabetes mellitus and may be associated with pancreatitis, pituitary or thyroid dysfunction and liver disease. Hypoglycaemia occurs most frequently due to over dosage of insulin.

Glucose PP **	133.90	mg/dl	<140 Normal	GOD POD
Sample:Plasma After Meal			140-199 Pre-diabetes	
			>200 Diabetes	

#### Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.c) I.G.T = Impaired Glucose Tolerance.

#### GLYCOSYLATED HAEMOGLOBIN (HBA1C) \*\* , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	6.50	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	48.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	140	mg/dl	

#### Interpretation:

#### NOTE:-

• eAG is directly related to A1c.



Chandan 24x7 App

Page 3 of 12







Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-4501413 CIN: U85110UP2003PLC193493

Patient Name	: Mrs.MANJU DEVI- 22S38899	Registered On	: 16/Nov/2024 09:29:50
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#### DEPARTMENT OF BIOCHEMISTRY

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes mnagement.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	<b>Degree of Glucose Control Unit</b>
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

\*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc. \*\*Some danger of hypoglycemic reaction in Type 1 diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B.: Test carried out on Automated VARIANT II TURBO HPLC Analyser.

#### **<u>Clinical Implications:</u>**

\*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

\*With optimal control, the HbA 1c moves toward normal levels.

\*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated \*Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy

c. Alcohol toxicity d. Lead toxicity

\*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

\*Pregnancy d. chronic renal failure. Interfering Factors:

\*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

BUN (Blood Urea Nitrogen) **	11.00
Sample:Serum	

mg/dL

7.0-23.0

CALCULATED



Page 4 of 12

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Chandan 24x7 App







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#### DEPARTMENT OF BIOCHEMISTRY

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

#### Interpretation: Note: Elevated BUN levels can be seen in the following:

High-protein diet, Dehydration, Aging, Certain medications, Burns, Gastrointestimal (GI) bleeding.

#### Low BUN levels can be seen in the following:

Low-protein diet, overhydration, Liver disease.

Creatinine ** Sample:Serum	0.90	mg/dl	Female 0.6-1.1 Newborn 0.3-1.0 Infent 0.2-0.4 Child 0.3-0.7 Adolescent 0.5- 1.0	MODIFIED JAFFES
			Adolescent 0.5- 1.0	

#### Interpretation:

The significance of single creatinine value must be interpreted in light of the patients muscle mass. A patient with a greater muscle mass will have a higher creatinine concentration. The trend of serum creatinine concentrations over time is more important than absolute creatinine concentration. Serum creatinine concentrations may increase when an ACE inhibitor (ACE) is taken. The assay could be affected mildly and may result in anomalous values if serum samples have heterophilic antibodies, hemolyzed, icteric or lipemic.

Uric Acid ** Sample:Serum	6.20	mg/dl	2.6-6.0	URICASE
Interpretation: Note:- Elevated uric acid levels can be seen in the	following:			
Drugs, Diet (high-protein diet, alcohol), Chronic	kidney disease,	Hypertension, C	besity.	
LFT (WITH GAMMA GT) ** , Serum	26 50	11/1	< 31	

SGOT / Aspartate Aminotransferase (AST)	26.50	U/L	< 31	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	23.60	U/L	< 34	IFCC WITHOUT P5P
Gamma GT (GGT)	31.60	U/L	0-38	IFCC, KINETIC
Protein	6.70	gm/dl	6.2-8.0	BIURET



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Page 5 of 12







Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-4501413 CIN: U85110UP2003PLC193493

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#### **DEPARTMENT OF BIOCHEMISTRY**

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	U	Jnit	Bio. Ref. Interva	l Method
Albumin	4.20	gm/dl	3.4-5.4	4	B.C.G.
Globulin	2.50	gm/dl	1.8-3.	6	CALCULATED
A:G Ratio	1.68		1.1-2.0	0	CALCULATED
Alkaline Phosphatase (Total)	99.30	U/L	42-98		IFCC AMP KINETIC
Bilirubin (Total)	0.40	mg/dl	Adult 0-2.0		DIAZO
Bilirubin (Direct)	0.10	mg/dl	< 0.20		DIAZO
Bilirubin (Indirect)	0.30	mg/dl	< 1.8		CALCULATED
LIPID PROFILE ( MINI ) ** , Serum					
Cholesterol (Total)	137.00	mg/dl		Desirable 39 Borderline High High	СНОД-РАР
HDL Cholesterol (Good Cholesterol)	45.00	mg/dl	42-88		DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	71	mg/dl	100-12 Optim 130-1 160-18	Optimal 29 Nr. nal/Above Optimal 59 Borderline High 39 High Very High	CALCULATED
VLDL	21.20	mg/dl	10-33		CALCULATED
Triglycerides	106.00	mg/dl	150-19 200-49	Normal 99 Borderline High 99 High Very High	GPO-PAP

S.h. Sinba

Page 6 of 12

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Dr.S.N. Sinha (MD Path)









Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-4501413 CIN: U85110UP2003PLC193493

Patient Name	: Mrs.MANJU DEVI- 22S38899	Registered On	: 16/Nov/2024 09:29:50
Age/Gender	: 55 Y 0 M 0 D /F	Collected	: 16/Nov/2024 17:37:51
UHID/MR NO	: CVAR.0000057858	Received	: 16/Nov/2024 17:40:04
Visit ID	: CVAR0087792425	Reported	: 16/Nov/2024 17:40:36
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

#### DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
JRINE EXAMINATION, ROUTINE ** , u	Irine			
Color	PALE YELLOW			
Specific Gravity	1.020			
Reaction PH	Acidic ( 6.0 )			DIPSTICK
Appearance	CLEAR			
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	Serum-0.1-3.0 Urine-0.0-14.0	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Bilirubin	ABSENT			DIPSTICK
Leucocyte Esterase	ABSENT			DIPSTICK
Urobilinogen(1:20 dilution)	ABSENT			
Nitrite	ABSENT			DIPSTICK
Blood	ABSENT			DIPSTICK
Microscopic Examination:				
Epithelial cells	0-1/h.p.f			MICROSCOPIC
				EXAMINATION
Pus cells	1-2/h.p.f			
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			
SUGAR, FASTING STAGE ** , Urine				
Sugar, Fasting stage	ABSENT	gms%		



Chandan 24x7 App







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### DEPARTMENT OF CLINICAL PATHOLOGY

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

#### Interpretation:

 $\begin{array}{ll} (+) & < 0.5 \\ (++) & 0.5 \\ (++) & 1 \\ (+++) & 1 \\ (++++) & > 2 \end{array}$ 

#### SUGAR, PP STAGE \*\* , Urine

Sugar, PP Stage

ABSENT

#### Interpretation:

(+) < 0.5 gms% (++) 0.5-1.0 gms% (+++) 1-2 gms% (++++) > 2 gms%

> S.N. Sinta Dr.S.N. Sinha (MD Path)

Page 8 of 12

View Reports on

Chandan 24x7 App









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Visit ID	: CVAR0087792425	Reported	: 16/Nov/2024 14:36:16
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

#### DEPARTMENT OF IMMUNOLOGY

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Int	erval Method
THYROID PROFILE - TOTAL ** , Serum				
T3, Total (tri-iodothyronine)	161.00	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	8.07	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	4.160	μlU/mL	0.27 - 5.5	CLIA
Interpretation:				
-		0.3-4.5 μIU	U/mL First T	rimester
		0.5-4.6 μI	U/mL Second	l Trimester
		0.8-5.2 μIU	J/mL Third T	Frimester
		•	U/mL Adults	55-87 Years
		0.7-27 μIU	U/mL Premat	ure 28-36 Week
		2.3-13.2 μIU		lood > 37Week
		•	,	21 wk - 20 Yrs.)
		•	IU/mL Child	0-4 Days
		1.7 <b>-</b> 9.1 μΙΙ	U/mL Child	2-20 Week

1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.

2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.

**3**) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.

**4**) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.

**5**) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.

**6)** In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.

7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.

**8**) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

S.n. Sinta

Page 9 of 12

Dr.S.N. Sinha (MD Path)











Add: 99, Shivaji Nagar Mahmoorganj, Varanasi Ph: 9235447795,0542-4501413 CIN: U85110UP2003PLC193493

Patient Name	: Mrs.MANJU DEVI- 22S38899	Registered On	: 16/Nov/2024 09:29:51
Age/Gender	: 55 Y 0 M 0 D /F	Collected	: 2024-11-16 12:09:31
UHID/MR NO	: CVAR.0000057858	Received	: 2024-11-16 12:09:31
Visit ID	: CVAR0087792425	Reported	: 16/Nov/2024 12:11:27
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

### **DEPARTMENT OF X-RAY**

### **MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS**

### **X-RAY DIGITAL CHEST PA**

### X- Ray Digital Chest P.A. View

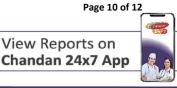
- Lung fields are clear.
- Pleural spaces are clear.
- Both hilar shadows appear normal.
- Trachea and carina appear normal.
- Heart size within normal limits.
- Both the diaphragms appear normal.
- Soft tissues and Bony cage appear normal.

# **IMPRESSION**

# **\* NO OBVIOUS DETECTABLE ABNORMALITY SEEN**



Dr Raveesh Chandra Roy (MD-Radio)





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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-4501413 CIN: U85110UP2003PLC193493

Patient Name	: Mrs.MANJU DEVI- 22S38899	Registered On	: 16/Nov/2024 09:29:51
Age/Gender	: 55 Y 0 M 0 D /F	Collected	: 2024-11-16 10:17:20
UHID/MR NO	: CVAR.0000057858	Received	: 2024-11-16 10:17:20
Visit ID	: CVAR0087792425	Reported	: 16/Nov/2024 10:23:37
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

### DEPARTMENT OF ULTRASOUND

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

### **ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER)**

# WHOLE ABDOMEN ULTRASONOGRAPHY REPORT

# LIVER

• The liver is normal in size (**14.1 cm in midclavicular line**) and has a normal homogenous echo texture. No focal lesion is seen.

# PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein is (9.9 mm in caliber) not dilated.
- Porta hepatis is normal.

# **BILIARY SYSTEM**

- The intra-hepatic biliary radicles are normal.
- Common bile duct is ( **4.3 mm in caliber**) not dilated.
- The gall bladder is **normal** in size and has regular walls. Lumen of the gall bladder is anechoic.

# PANCREAS

• The pancreas is **normal** in size and shape and has a normal homogenous echotexture. Pancreatic duct is not dilated.

# KIDNEYS

# • <u>Right kidney:-</u>

- Right kidney is normal in size, measuring ~ 10.0 x 3.6 cms.
- Cortical echogenicity is normal. Pelvicalyceal system is not dilated.
- Cortico-medullary demarcation is maintained. Parenchymal thickness appear normal.

# • Left kidney:-

- Left kidney is normal in size, measuring ~ 9.5 x 4.4 cms.
- Cortical echogenicity is normal. Pelvicalyceal system is not dilated.
- Cortico-medullary demarcation is maintained. Parenchymal thickness appear normal.

# SPLEEN









Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-4501413 CIN: U85110UP2003PLC193493

Patient Name	: Mrs.MANJU DEVI- 22S38899	Registered On	: 16/Nov/2024 09:29:51
Age/Gender	: 55 Y 0 M 0 D /F	Collected	: 2024-11-16 10:17:20
UHID/MR NO	: CVAR.0000057858	Received	: 2024-11-16 10:17:20
Visit ID	: CVAR0087792425	Reported	: 16/Nov/2024 10:23:37
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

#### DEPARTMENT OF ULTRASOUND

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

• The spleen is normal in size (~ 8.9 cm in its long axis) and has a normal homogenous echotexture.

### ILIAC FOSSAE & PERITONEUM

• Scan over the iliac fossae does not reveal any fluid collection or large mass.

### URINARY BLADDER

- The urinary bladder is partially filled. Bladder wall is normal in thickness and regular.
- Pre-void urine volume is ~ 42 cc.

# UTERUS & CERVIX

- The uterus is indistinct in outline, normal to the extent visualized. Approximate size ~ 63 x 35 x 29 mm / 34 cc.
- The endometrial echo is seen in mid line (endometrial thickness ~ 4.0 mm).
- Cervix is normal.

# **ADNEXA & OVARIES**

• No adnexal mass seen.

# FINAL IMPRESSION:-

• No significant sonological abnormality noted.

### Adv : Clinico-pathological-correlation /further evaluation & Follow up

\*\*\* End Of Report \*\*\*

(\*\*) Test Performed at CHANDAN DIAGNOSTIC CENTRE, VARANASI, MAHMOORGANJ

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG, Tread Mill Test (TMT)





Dr Raveesh Chandra Roy (MD-Radio)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: MRI, CT scan, DR X-ray, Ultrasound, Sonomammography, Digital Mammography, ECG (Bedside also), 2D Echo, TMT, Holter, OPG, EEG, NCV, EMG & BERA, Audiometry, BMD, PFT, Fibroscan, Bronchoscopy, Colonoscopy and Endoscopy, Allergy Testing,Biochemistry & Immunoassay, Hematology, Microbiology & Serology, Histopathology & Immunohistochemistry, Cytogenetics and Molecular Diagnostics and Health Checkups \* 365 Days Open \*Facilities Available at Select Location

Facilities Available at Select Location Page 12 of 12



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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-4501413 CIN : U85110DL2003PLC308206

Patient Name	: Mrs.MANJU DEVI- 22S38899	Registered On	: 16/Nov/2024 09:29AM
Age/Gender	: 55 Y 0 M 0 D /F	Collected	: 16/Nov/2024 11:50AM
UHID/MR NO	: CVAR.0000057858	Received	: 16/Nov/2024 12:02PM
Visit ID	: CVAR0087792425	Reported	: 16/Nov/2024 05:26PM
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report
		Contract By	: MEDIWHEEL - ARCOFEMI HEALTH CARE LTD.[52610]CREDIT

#### DEPARTMENT OF CYTOLOGY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

**CYTOLOGY NO:** 96/24-25

GROSS:	Received one slide unstained conventional PAP smear. Received one slide unstained
	conventional PAP smear.

<b>MICROSCOPIC:</b>	Satisfactory for evolution endoc-ervical cell seen. Cervical smear show predominantly benign	
	superficial / parabasal cells, and intermediate squamous cells /epithelial cells with	
	maintained neucleocytoplasmic ratio.	
	Background show dense / mild infiltrates of neutrophils.	

IMPRESSION:	[ N. I. L. M ] :-Negative for Interaepithelial lesion or Malignancy.

#### \*\*\* End Of Report \*\*\*

(\*) Test not done under NABL accredited Scope, (\*\*) Test Performed at CHANDAN DIAGNOSTIC CENTRE, VARANASI, MAHMOORGANJ Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG, Tread Mill Test (TMT)

S.n. Sinta

Dr.S.N. Sinha (MD Path)

This report is not for medico legal purpose. If clinical correlation is not established kindly repeate the test at no additional cost within seven days. Facilities: MRI, CT scan, DR X-ray, Ultrasound, Sonomammography, Digital Mammography, ECG (Bedside also), 2D Echo, TMT, Holter, OPG, EEG, NCV, EMG & BERA, Audiometry, BMD, PFT, Fibroscan, Bronchoscopy, Colonoscopy and Endoscopy, Allergy Testing,Biochemistry & Immunoassay, Hematology, Microbiology & Serology, Histopathology & Immunohistochemistry, Cytogenetics and Molecular Diagnostics and Health Checkups \* **365 Days Open** \*Facilities Available at Selected Location

 $\odot$ 



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Page 1 of 1





D63/6B-99, Shivaji Nagar Colony, Mahmoorganj, Varanasi, Uttar Pradesh 221010, India

Latitude 25.3053682°

Local 12:04:36 PM GMT 06:34:36 AM Longitude 82.9790343°

Altitude 84 meters Saturday, 16.11.2024