

Health Check up Booking Request(22E37875)

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To PHC [MH-Ghaziabad] <phc.ghaziabad@manipalhospitals.com>

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Mediwheel
...Your wellness partner

011-41195959

Dear **Manipal Hospital**

We have received a booking request with the following details. Provide your confirmation by clicking on the Yes button.

You confirm this booking? Yes No

Name : Sachin kumar Bharti

Contact Details : 9716615441

Hospital Package Name : Mediwheel Full Body Health Checkup Male Below 40

Location : NH-24,Hapur Road,Oppo. Bahmeta Village,Near Lancraft Golf Links Aparment

Appointment Date : 09-11-2024

Member Information		
Booked Member Name	Age	Gender
MR. BHARTI SACHIN KUMAR	35 year	Male

Thanks,
Mediwheel Team
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भारत सरकार



Issue Date: 20/04/2014



सचिन कुमार भारती
Sachin Kumar Bharti
जन्म तिथि / DOB : 26/09/1989
पुरुष / MALE



8190 7160 8307



8190 7160 8307

मेरा आधार, मेरी पहचान

Sachin



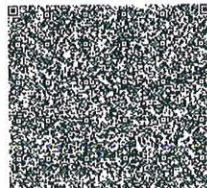
भारतीय विशिष्ट पहचान प्राधिकरण

भारत सरकार



पता: S/O प्रेम चंद भारती, 251ए/5सी श्री राम
नगर, शाहदरा, पूर्वी दिल्ली, दिल्ली, 110032
Address: S/O, Prem Chand Bharti, 251a/5c
Shri Ram Nagar, Shahdara, East Delhi,
Delhi, 110032

Print Date: 29/05/2021





Manipal Hospital Ghaziabad

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad 201 002
0120 3535 353 / +91 88609 45566

URN : MH008785288

OUTPATIENT RECORD

Hospital No: MH008785288	Visit No: H18000003193
Name: SACHIN KUMAR BHARTI	Age/Sex: 35 Yrs/Male
Doctor Name: HEALTH CHECK MGD	Specialty: HC SERVICE MGD
Date: 09/11/2024 08:33AM	

OPD Notes :

PRESENT OPHTHALMIC COMPLAINS - ROUTINE EYE CHECK UP
SYSTEMIC/ OPHTHALMIC HISTORY - PT HAS GLAUCOMA
 NO FAMILY H/O GLAUCOMA

EXAMINATION DETAILS	RIGHT EYE	LEFT EYE
VISION	6/6	6/6
CONJ	NORMAL	NORMAL
CORNEA	CLEAR	CLEAR
ANTERIOR CHAMBER/ IRIS	N	N
LENS		
OCULAR MOVEMENTS	FULL	FULL
NCT	16	18
FUNDUS EXAMINATION		
A) VITREOUS		
B) OPTIC DISC	C:D 0.4	C:D 0.6
C) MACULAR AREA	FOVEAL REFLEX PRESENT	FOVEAL REFLEX PRESENT

DIAGNOSIS: DRY EYES

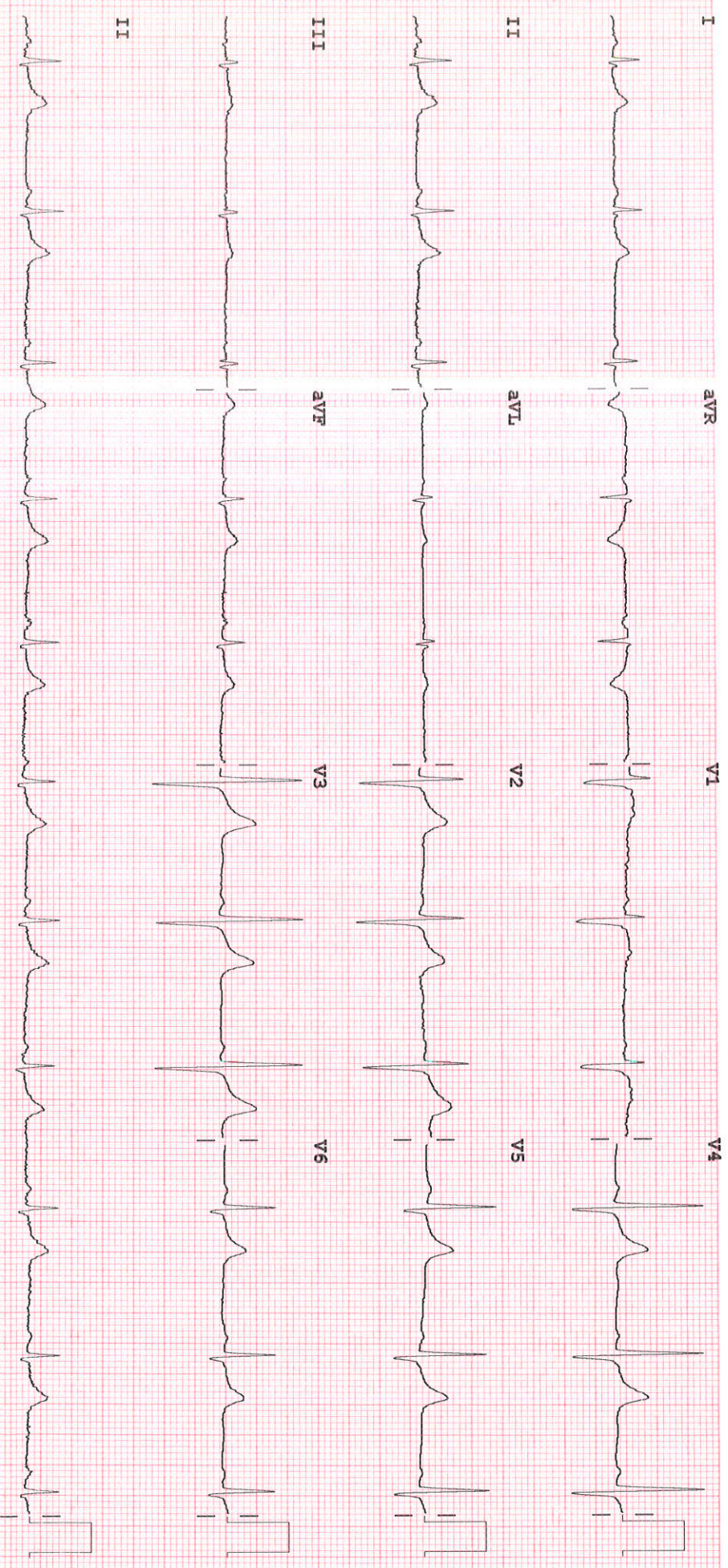
ADVISE / TREATMENT
 STARTED ON TIMOLET OD IN BOTH EYES
 AVOID WATER EXCESS ESP ON WAKING UP
E/D NST 4 TIMES DAILY BE
E/D TIMOLET OD ONCE DAILY IN BOTH EYES
ADV GLAUCOMA WORK UP INCLUDING FIELDS AND OCT
 REVIEW AFTER 6 MONTHS OR SOS

HEALTH CHECK MGD

MLC

- NORMAL ECG -

Unconfirmed Diagnosis



Dev: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz

PH100B CL P?



TMT INVESTIGATION REPORT

Patient Name	MR SACHIN KUMAR BHARTI	Location	: Ghaziabad
Age/Sex	: 35 Year(s)/male	Visit No	: V0000000001-GHZZB
MRN No	MH008785288	Order Date	: 09/11/2024
Ref. Doctor	: H/C	Report Date	: 09/11/2024

Protocol	: Bruce	MPHR	: 185BPM
Duration of exercise	: 09min 16sec	85% of MPHR	: 157BPM
Reason for termination	: THR achieved	Peak HR Achieved	: 168BPM
Blood Pressure (mmHg)	: Baseline BP : 120/80mmHg Peak BP : 140/90mmHg	% Target HR	: 90%
		METS	: 10.5METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	68	120/90	Nil	No ST changes seen	Nil
STAGE 1	3:00	117	130/90	Nil	No ST changes seen	Nil
STAGE 2	3:00	137	140/90	Nil	No ST changes seen	Nil
STAGE 3	3:00	163	150/90	Nil	No ST changes seen	Nil
STAGE 4	0:16	168	150/90	Nil	No ST changes seen	Nil
RECOVERY	5:13	88	130/90	Nil	No ST changes seen	Nil

COMMENTS:

- No ST changes in base line ECG.
- No ST changes at peak stage.
- No ST changes in recovery.
- Normal chronotropic response.
- Normal blood pressure response.

IMPRESSION:

Treadmill test is **negative** for exercise induced reversible myocardial ischemia.

Dr. Bhupendra Singh
MD, DM (CARDIOLOGY), FACC
Sr. Consultant Cardiology

Dr. Abhishek Singh
MD, DNB (CARDIOLOGY), MNAMS
Sr. Consultant Cardiology

Dr. Sudhanshu Mishra
Cardiology Registrar, Ghaziabad


Dr. Geetesh Govil
MD, D. Card, PGDCC, MAAC, M. Med, MIMA, FAGE
Jr. Consultant Cardiology

NH - 24, Hapur Road, Ghaziabad, Uttar Pradesh - 201 002
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Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

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LABORATORY REPORT

Name : SACHIN KUMAR BHARTI
Registration No : MH008785288
Patient Episode : H18000003193
Referred By : HEALTH CHECK MGD
Receiving Date : 09 Nov 2024 09:00

Age : 35 Yr(s) Sex :Male
Lab No : 202411001712
Collection Date : 09 Nov 2024 09:00
Reporting Date : 09 Nov 2024 13:54

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Specimen Type : Serum			
THYROID PROFILE, Serum			
T3 - Triiodothyronine (ELFA)	1.000	ng/ml	[0.610-1.630]
T4 - Thyroxine (ELFA)	6.180	ug/ dl	[4.680-9.360]
Thyroid Stimulating Hormone	1.410	µIU/mL	[0.250-5.000]

NOTE:

TSH stimulates the thyroid gland to produce the main thyroid hormones T3 and T4. In cases of hyperthyroidism TSH level is severely inhibited and may even be undetectable. In rare forms of high-origin hyperthyroidism, the TSH level is not reduced, since the negative-feedback control of the thyroid hormones has no effect. In cases of primary hypothyroidism, TSH levels are always much higher than normal and thyroid hormone levels are low. The TSH assay aids in diagnosing thyroid or hypophysial disorders. The T4 assay aids in assessing thyroid function, which is characterized by a decrease in thyroxine levels in patients with hypothyroidism and an increase in patients with hyperthyroidism.

The test has been carried out in Fully Automated Immunoassay System VIDAS using ELFA (Enzyme Linked Fluorescence Assay) technology.



LABORATORY REPORT

Name : SACHIN KUMAR BHARTI
Registration No : MH008785288
Patient Episode : H18000003193
Referred By : HEALTH CHECK MGD
Receiving Date : 09 Nov 2024 09:00

Age : 35 Yr(s) Sex : Male
Lab No : 202411001712
Collection Date : 09 Nov 2024 09:00
Reporting Date : 09 Nov 2024 16:18

BLOOD BANK

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Blood Group & Rh Typing (Agglutination by gel/tube technique)	Specimen-Blood		
Blood Group & Rh typing	B Rh(D) Positive		

Technical note:

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

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NOTE:

- Abnormal Values

-----END OF REPORT-----



Dr. Alka Dixit Vats
Consultant Pathologist



LABORATORY REPORT

Name : SACHIN KUMAR BHARTI
Registration No : MH008785288
Patient Episode : H18000003193
Referred By : HEALTH CHECK MGD
Receiving Date : 09 Nov 2024 09:00

Age : 35 Yr(s) Sex :Male
Lab No : 202411001712
Collection Date : 09 Nov 2024 09:00
Reporting Date : 09 Nov 2024 13:31

HAEMATOLOGY

BIOLOGICAL REFERENCE INTERVAL

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)			
RBC COUNT (IMPEDENCE)	5.22	millions/cumm	[4.50-5.50]
HEMOGLOBIN	15.4	g/dl	[13.0-17.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	46.2	%	[40.0-50.0]
MCV (DERIVED)	88.5	fL	[83.0-101.0]
MCH (CALCULATED)	29.5	pg	[25.0-32.0]
MCHC (CALCULATED)	33.3	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	13.9	%	[11.6-14.0]
Platelet count	182	x 10 ³ cells/cumm	[150-410]
Method: Electrical Impedance			
MPV (DERIVED)	11.80	fL	
WBC COUNT (TC) (IMPEDENCE)	4.61	x 10 ³ cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	50.0	%	[40.0-80.0]
Lymphocytes	40.0	%	[20.0-40.0]
Monocytes	8.0	%	[2.0-10.0]
Eosinophils	2.0	%	[1.0-6.0]
Basophils	0.0	%	[0.0-2.0]
ESR	7.0	mm/1sthour	[0.0-10.0]



LABORATORY REPORT

Name : SACHIN KUMAR BHARTI
Registration No : MH008785288
Patient Episode : H18000003193
Referred By : HEALTH CHECK MGD
Receiving Date : 09 Nov 2024 09:00

Age : 35 Yr(s) Sex :Male
Lab No : 202411001712
Collection Date : 09 Nov 2024 09:00
Reporting Date : 09 Nov 2024 14:35

BIOCHEMISTRY

BIOLOGICAL REFERENCE INTERVAL

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Glycosylated Hemoglobin Specimen: EDTA HbA1c (Glycosylated Hemoglobin) Method: HPLC	5.1	%	[0.0-5.6] As per American Diabetes Association(ADA) HbA1c in % Non diabetic adults >= 18years <5.7 Prediabetes (At Risk)5.7-6.4 Diagnosing Diabetes >= 6.5
Estimated Average Glucose (eAG)	100	mg/dl	

Comments : HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control.

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	(4.6-8.0)
Reaction[pH]	5.0	(1.003-1.035)
Specific Gravity	1.005	

CHEMICAL EXAMINATION

Protein/Albumin	NEGATIVE	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	Negative	(NEGATIVE)
Urobilinogen	Normal	(NORMAL)



LABORATORY REPORT

Name : SACHIN KUMAR BHARTI
Registration No : MH008785288
Patient Episode : H18000003193
Referred By : HEALTH CHECK MGD
Receiving Date : 09 Nov 2024 10:20

Age : 35 Yr(s) Sex : Male
Lab No : 202411001712
Collection Date : 09 Nov 2024 10:20
Reporting Date : 09 Nov 2024 16:09

CLINICAL PATHOLOGY

MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells	2-3/hpf	(0-5/hpf)
RBC	NIL	(0-2/hpf)
Epithelial Cells	NIL /hpf	
CASTS	NIL	
Crystals	NIL	
Bacteria	NIL	
OTHERS	NIL	

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	155	mg/dl	[<200] Moderate risk:200-239 High risk:>240
Method:Oxidase,esterase, peroxide			
TRIGLYCERIDES (GPO/POD)	61	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL	57	mg/dl	[35-65]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	12	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	86.0	mg/dl	[<120.0] Near/ Borderline High:130-159 High Risk:160-189 <4.0 Optimal 4.0-5.0 Borderline >6 High Risk
Above optimal-100-129			
T.Chol/HDL.Chol ratio(Calculated)	2.7		
LDL.CHOL/HDL.CHOL Ratio(Calculated)	1.5		<3 Optimal 3-4 Borderline >6 High Risk



LABORATORY REPORT

Name : SACHIN KUMAR BHARTI
Registration No : MH008785288
Patient Episode : H18000003193
Referred By : HEALTH CHECK MGD
Receiving Date : 09 Nov 2024 09:00

Age : 35 Yr(s) Sex :Male
Lab No : 202411001712
Collection Date : 09 Nov 2024 09:00
Reporting Date : 09 Nov 2024 13:54

BIOCHEMISTRY

BIOLOGICAL REFERENCE INTERVAL

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Note:
Reference ranges based on ATP III Classifications.

Lipid profile is a panel of blood tests that serves as initial broad medical screening tool for abnormalities in lipids, the results of this tests can identify certain genetic diseases and determine approximate risks for cardiovascular disease, certain forms of pancreatitis and other diseases

KIDNEY PROFILE

Specimen: Serum			
UREA	24.3	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay			
BUN, BLOOD UREA NITROGEN	11.4	mg/dl	[8.0-20.0]
Method: Calculated			
CREATININE, SERUM	1.21 #	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardization			
URIC ACID	6.4	mg/dl	[4.0-8.5]
Method:uricase PAP			
SODIUM, SERUM	137.90	mmol/L	[136.00-144.00]
POTASSIUM, SERUM	4.83	mmol/L	[3.60-5.10]
SERUM CHLORIDE	105.3	mmol/L	[101.0-111.0]
Method: ISE Indirect			
eGFR (calculated)	77.1	ml/min/1.73sq.m	[>60.0]

Technical Note
eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years. eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.



LABORATORY REPORT

Name : SACHIN KUMAR BHARTI
Registration No : MH008785288
Patient Episode : H18000003193
Referred By : HEALTH CHECK MGD
Receiving Date : 09 Nov 2024 09:00

Age : 35 Yr(s) Sex : Male
Lab No : 202411001712
Collection Date : 09 Nov 2024 09:00
Reporting Date : 09 Nov 2024 13:54

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
LIVER FUNCTION TEST			
BILIRUBIN - TOTAL Method: D P D	0.75	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.17	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.58	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) Method: BIURET	7.70	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	5.10	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	2.60	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.96		[1.00-2.50]
AST (SGOT) (SERUM) Method: IFCC W/O P5P	30.00	U/L	[0.00-40.00]
ALT (SGPT) (SERUM) Method: IFCC W/O P5P	29.90	U/L	[17.00-63.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	109.0 #	IU/L	[32.0-91.0]
GGT	21.0	U/L	[7.0-50.0]



LABORATORY REPORT

Name : SACHIN KUMAR BHARTI Age : 35 Yr(s) Sex : Male
Registration No : MH008785288 Lab No : 202411001712
Patient Episode : H18000003193 Collection Date : 09 Nov 2024 09:00
Referred By : HEALTH CHECK MGD Reporting Date : 09 Nov 2024 13:54
Receiving Date : 09 Nov 2024 09:00

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Liver function test aids in diagnosis of various pre hepatic, hepatic and post hepatic causes of dysfunction like hemolytic anemia's, viral and alcoholic hepatitis and cholestasis of obstructive causes.

The test encompasses hepatic excretory, synthetic function and also hepatic parenchymal cell damage. LFT helps in evaluating severity, monitoring therapy and assessing prognosis of liver disease and dysfunction.

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-----END OF REPORT-----

Dr. Alka Dixit Vats
Consultant Pathologist



LABORATORY REPORT

Name : SACHIN KUMAR BHARTI
Registration No : MH008785288
Patient Episode : H18000003193
Referred By : HEALTH CHECK MGD
Receiving Date : 09 Nov 2024 09:00

Age : 35 Yr(s) Sex : Male
Lab No : 202411001713
Collection Date : 09 Nov 2024 09:00
Reporting Date : 09 Nov 2024 13:54

BIOCHEMISTRY

BIOLOGICAL REFERENCE INTERVAL

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GLUCOSE-Fasting Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	88.0	mg/dl	[70.0-110.0]

Normally, the glucose concentration in extracellular fluid is closely regulated so that a source of energy is readily available to tissues and so that no glucose is excreted in the urine.

Increased in Diabetes mellitus, Cushing's syndrome (10-15%), chronic pancreatitis (30%).
Drugs corticosteroids, phenytoin, estrogen, thiazides

Decreased in Pancreatic islet cell disease with increased insulin, insulinoma, adrenocortical insufficiency, hypopituitarism, diffuse liver disease, malignancy (adrenocortical, stomach, fibro sarcoma), infant of a diabetic mother enzyme deficiency diseases (e.g. galactosemia),
Drugs-
insulin, ethanol, propranolol, sulfonylureas, tobutamide, and other oral hypoglycemic agents.

-----END OF REPORT-----

Alka

Dr. Alka Dixit Vats
Consultant Pathologist



LABORATORY REPORT

Name : SACHIN KUMAR BHARTI
Registration No : MH008785288
Patient Episode : H18000003193
Referred By : HEALTH CHECK MGD
Receiving Date : 09 Nov 2024 14:01

Age : 35 Yr(s) Sex : Male
Lab No : 202411001714
Collection Date : 09 Nov 2024 14:01
Reporting Date : 09 Nov 2024 16:27

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
PLASMA GLUCOSE Specimen: Plasma GLUCOSE, POST PRANDIAL (PP), 2 HOURS Method: Hexokinase	111.0	mg/dl	[80.0-140.0]

Note:
Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption, post exercise

-----END OF REPORT-----

Alka

Dr. Alka Dixit Vats
Consultant Pathologist

**RADIOLOGY REPORT**

NAME	SACHIN KUMAR BHARTI	STUDY DATE	09/11/2024 9:23AM
AGE / SEX	35 y / M	HOSPITAL NO.	MH008785288
ACCESSION NO.	R8547860	MODALITY	CR
REPORTED ON	09/11/2024 10:23AM	REFERRED BY	HEALTH CHECK MGD

X-RAY CHEST – PA VIEW**FINDINGS:**

Lung fields appear normal on both sides.
Cardia appears normal.
Both costophrenic angles appear normal.
Both domes of the diaphragm appear normal.
Bony cage appear normal.

IMPRESSION:

No significant abnormality noted.



Dr. Rahul Suhas Whatkar
MBBS, DMRD, DNB Radiology Reg No. MMC 2009/04/1858
CONSULTANT RADIOLOGIST

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

**RADIOLOGY REPORT**

NAME	SACHIN KUMAR BHARTI	STUDY DATE	09/11/2024 10:09AM
AGE / SEX	35 y / M	HOSPITAL NO.	MH008785288
ACCESSION NO.	R8547861	MODALITY	US
REPORTED ON	09/11/2024 10:44AM	REFERRED BY	HEALTH CHECK MGD

USG ABDOMEN & PELVIS WITH PVR FINDINGS

LIVER: appears normal in size (measures 149 mm) and shape but shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 75 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 10.2 mm.

COMMON BILE DUCT: Appears normal in size and measures 2.8 mm.

IVC, HEPATIC VEINS: Normal.

BILIARY SYSTEM: Normal.

GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.

Right Kidney: measures 104 x 60 mm with parenchymal thickness 10.2 mm.

Left Kidney: measures 99 x 50 mm with parenchymal thickness 10.5 mm. It shows a concretion measuring 3.2 mm at lower calyx.

PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged.

FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is over distended. Wall thickness is normal and lumen is echofree. Rest normal.

Pre-void urine volume 1147 cc.

Post-void residual urine volume 51 cc (Insignificant).

PROSTATE: Prostate is normal in size, shape and echotexture. It measures 41 x 25 x 23 mm with volume 13 cc. Rest normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

- Diffuse grade I fatty infiltration in liver.
- Left renal concretion.

Recommend clinical correlation.



Dr. Monica Shekhawat

MBBS, DNB, CCFRG, ACFRG (Reg No MCI 11-10887)

CONSULTANT RADIOLOGIST

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