



CHANDAN DIAGNOSTIC CENTRE

Name of Company: - Medi wheel

Name of Executive: Seema Singh

Date of Birth: 10 107 11980

Sex: Male / Remale

Height: ...IS.8.....CMs

Weight: .6.9..... KGs

BMI (Body Mass Index): 27.6

Chest (Expiration / Inspiration) ...97.../...9.9....CMs

Abdomen: 9 . CMs

Blood Pressure: -- 138./... 34 mm/Hg

Pulse: ... BPM - Regular / Irregular

RR:Resp/Min

Ident Mark: Mole on C+ Check.

Any Allergies: No

Vertigo: Noonal

Any Medications: No

Any Surgical History: O C/B Removed / Cholecy steeting - Jan 2022

Habits of alcoholism/smoking/tobacco: No

Chief Complaints if any:

Lab Investigation Reports: Yes AM.

Eye Check up vision & Color vision: Normal & Roading flam . Strand

Lefteye: No-

Right eve: Mul

Near vision: Kul

Far vision :

Dental check up :







CHANDAN DIAGNOSTIC CENTRE

Eye Checkup: Now

Final impression

Segnerature:

Dr. R.

Signature of Medical Examiner

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

Date 217 2 /2023, Place VARANASIS

Standan Diagnostic Ceri-39, Shivail Nagar, Mahmoorga Varanasi-221010 (U.P.) Phone No.:0542-2223232



CHANDAN HEALTH CARE LTD.

99-SHIVAJI NAGAR MAHMOORGANJ VARANASI-9839703068

Ma SEEMA SINGH Age: 42/F Ref. by Indication1 Indication2

Indication3

MEDISH ARCH, MEDIACT SYSTEMS

ID: 87442223 HI/Wt 158/69 Recorded : 25- 2-2023 11:42 TREADMILL TEST SUMMARY REPORT Protocol BRUCE History: Medication1 Medication2 Medication3

PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100	u	ST LEVEL (mm) V2	V5	METS
					70	140/80	110	0.5 0.3 0.4 0.5	0.4 0.5 0.5 0.4	0.4 0.4 0.4 0.6	
					79 76 73 77	140/80	106	0.3	0.5	0.4	
SUPINE	0.40	0:12			76		102	0.4	0.5	0.4	
HYPERVENT	0:12	0.12			73	140/80	107	0.5	0.4	0.6	
VALSALVA					77	140/80	107	0.0			
STANDING									0.1	0.3	4.80
				10.00	134	140/80	187	0.3	0.1 0.5	0.8	7.10
STAGE 1	2:59	2.59	2.70		134 147 137	150/80	220	-0.2	0.5		7 33
STAGE 2	5:59	2.59	4.00	12.00	197	150/80	205	0.7	-0.2	0.5	7.30
	6:14	0.14	5.40	14.00	13/	100.00	To be a second				
STAGE 3	0.14					150/80	178	0.1	-0.1	-0.4	7.55
	0.00	0:28			119 119		178	0.1	-0.1	-0.4	7.57
PEAK EXER	6:28	0:29			119	150/80	170	y .			
PEAK EXER	6:29	0.29						0.4	0.5	1.1	
			* **	0.00	138	150/80	207	0.4	0.5	1.3	
EVENT	0:31	0:31	0.00	0.00	115	150/80	172	1.3	0.1	0.0	
EVENT	1:01	1:01	0.00		104	150/80	156	0.1	9.1	4.0	
RECOVERY	2:59	2:59	0.00	0.00	.04						

RESULTS

Exercise Duration Max Heart Rate Max Blood Pressure Max Work Load Reason of Termination

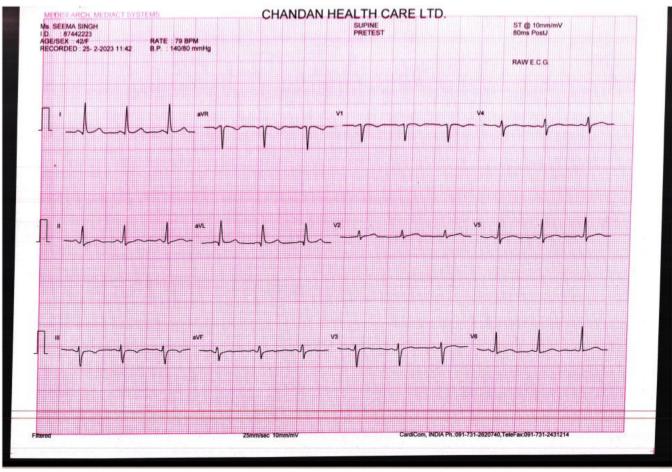
6:29 Minutes 147 bpm 82 % of target heart rate 178 bpm 150/80 mmHg

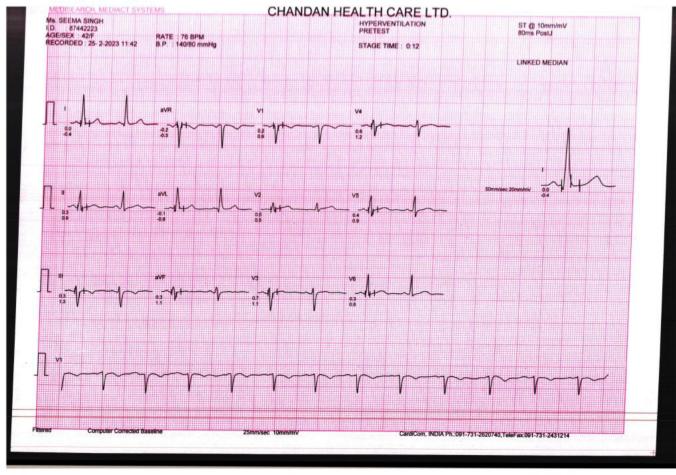
MPRESSIONS

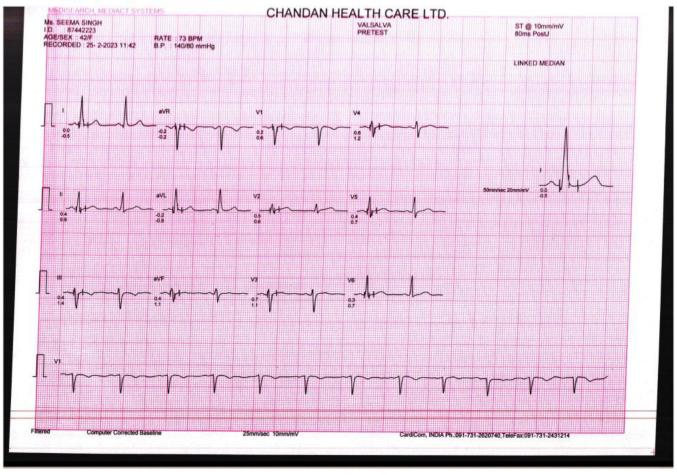
TMI is negative for RMS

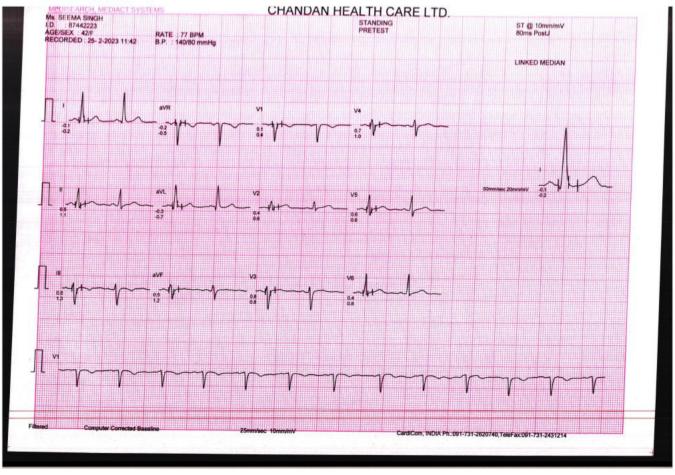
7 57 METS

CardiCom, INDIA Ph. 091-731-2620740, TeleFax:091-731-243121













CIN: U85110DL2003PLC308206



Patient Name : Mrs.SEEMA SINGH-BOBS30117 Registered On : 25/Feb/2023 08:39:59 Age/Gender Collected : 42 Y 0 M 0 D /F : 25/Feb/2023 09:36:35 UHID/MR NO : CVAR.0000035794 Received : 25/Feb/2023 09:40:36 Visit ID : CVAR0087442223 Reported : 25/Feb/2023 13:14:05

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. 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 O
Rh (Anti-D) POSITIVE

Complete Blood Count (CBC) *, Whole Blood

Haemoglobin

11.10

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

			remaie- 12.0-15.3	o g/ui
TLC (WBC)	6,400	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils)	65.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	30.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	2.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	< 1	ELECTRONIC IMPEDANCE
ESR				
Observed	20.00	Mm for 1st hr.		
Corrected	10.00	Mm for 1st hr.	. < 20	
PCV (HCT)	32.80	%	40-54	
Platelet count				
Platelet Count	1.72	LACS/cu mm	1.5-4.0	ELECTRONIC
				IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	NR	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	NR	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	NR	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	NR	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	3.74	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE









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DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Indices (MCV, MCH, MCHC)				
MCV	87.70	fl	80-100	CALCULATED PARAMETER
MCH	29.70	pg	28-35	CALCULATED PARAMETER
MCHC	33.80	%	30-38	CALCULATED PARAMETER
RDW-CV	13.00	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	43.30	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	4,160.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	128.00	/cu mm	40-440	

S. N. Sinha (MD Path)









CIN: U85110DL2003PLC308206



Patient Name : Mrs.SEEMA SINGH-BOBS30117 : 25/Feb/2023 08:40:00 Registered On Age/Gender : 42 Y 0 M 0 D /F Collected : 25/Feb/2023 14:51:03 UHID/MR NO : CVAR.0000035794 Received : 25/Feb/2023 14:51:56 Visit ID : CVAR0087442223 Reported : 25/Feb/2023 15:22:37

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE FASTING , Plasma				
Glucose Fasting	97.40	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD

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 = Impared Glucose Tolerance.

Glucose PP	140.00	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 = Impared Glucose Tolerance.

S.N. Sinha (MD Path)









CIN: U85110DL2003PLC308206



Patient Name : 25/Feb/2023 08:40:00 : Mrs.SEEMA SINGH-BOBS30117 Registered On Collected Age/Gender : 42 Y 0 M 0 D /F : 25/Feb/2023 09:36:35 UHID/MR NO : CVAR.0000035794 Received : 26/Feb/2023 11:37:16 Visit ID : CVAR0087442223 Reported : 26/Feb/2023 13:54:08 : Dr.Mediwheel - Arcofemi Health Care Ltd. Ref Doctor Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method	

GLYCOSYLATED HAEMOGLOBIN (HBA1C) ** , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.50	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	37.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	111	mg/dl	

Interpretation:

NOTE:-

- eAG is directly related to A1c.
- 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)	Degree of Glucose Control Unit
> 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.

N.B.: Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.

Clinical Implications:

- *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





^{**}Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.





Visit ID

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi Ph: 9235447795,0542-3500227

CIN: U85110DL2003PLC308206



 Patient Name
 : Mrs.SEEMA SINGH-BOBS30117
 Registered On
 : 25/Feb/2023 08:40:00

 Age/Gender
 : 42 Y 0 M 0 D /F
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: CVAR0087442223 Reported : 26/Feb/2023 13:54:08

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

c. Alcohol toxicity d. Lead toxicity



Dr. Anupam Singh (MBBS MD Pathology)





^{*}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.





CIN: U85110DL2003PLC308206



Patient Name : Mrs.SEEMA SINGH-BOBS30117 Registered On : 25/Feb/2023 08:40:01 Age/Gender : 42 Y 0 M 0 D /F Collected : 25/Feb/2023 09:36:35 UHID/MR NO : CVAR.0000035794 Received : 25/Feb/2023 09:40:36 Visit ID : CVAR0087442223 Reported : 25/Feb/2023 12:40:59 Ref Doctor

: Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
		-		
BUN (Blood Urea Nitrogen) Sample:Serum	10.30	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	0.80	mg/dl	Serum 0.5-1.5 Spot Urine-Male- 20- 275 Female-20-320	MODIFIED JAFFES
Uric Acid Sample:Serum	4.40	mg/dl	2.5-6.0	URICASE
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST) SGPT / Alanine Aminotransferase (ALT) Gamma GT (GGT) Protein Albumin Globulin A:G Ratio Alkaline Phosphatase (Total) Bilirubin (Total) Bilirubin (Direct) Bilirubin (Indirect) LIPID PROFILE (MINI) , Serum Cholesterol (Total)	25.00 32.80 36.00 7.00 4.20 2.80 1.50 98.80 0.70 0.20 0.50	U/L U/L gm/dl gm/dl gm/dl U/L mg/dl mg/dl mg/dl	< 35 < 40 11-50 6.2-8.0 3.8-5.4 1.8-3.6 1.1-2.0 42.0-165.0 0.3-1.2 < 0.30 < 0.8	IFCC WITHOUT P5P IFCC WITHOUT P5P OPTIMIZED SZAZING BIRUET B.C.G. CALCULATED CALCULATED IFCC METHOD JENDRASSIK & GROF JENDRASSIK & GROF JENDRASSIK & GROF
HDL Cholesterol (Good Cholesterol) LDL Cholesterol (Bad Cholesterol) VLDL Triglycerides	48.80 133 24.46 122.30	mg/dl mg/dl mg/dl mg/dl	200-239 Borderline High > 240 High 30-70 < 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High 10-33 < 150 Normal 150-199 Borderline High 200-499 High	DIRECT ENZYMATIC CALCULATED CALCULATED GPO-PAP









CIN: U85110DL2003PLC308206



Patient Name : Mrs.SEEMA SINGH-BOBS30117

Registered On

: 25/Feb/2023 08:40:01

Age/Gender

: 42 Y 0 M 0 D /F

Collected Received : 25/Feb/2023 09:36:35 : 25/Feb/2023 09:40:36

UHID/MR NO Visit ID : CVAR.0000035794 : CVAR0087442223

Reported

: 25/Feb/2023 12:40:59

Ref Doctor

: Dr.Mediwheel - Arcofemi Health Care Ltd. Status

Status

: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

>500 Very High



Dr.S.N. Sinha (MD Path)





CHANDAN DIAGNOSTIC CENTRE



Add: 99, Shivaji Nagar Mahmoorganj, Varanasi Ph: 9235447795,0542-3500227

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SEEMA SINGH-BOBS30117 Registered On : 25/Feb/2023 08:40:00 Age/Gender : 42 Y 0 M 0 D /F Collected : 25/Feb/2023 09:36:35 UHID/MR NO : CVAR.0000035794 : 25/Feb/2023 09:40:36 Received Visit ID : CVAR0087442223 Reported : 25/Feb/2023 12:54:15

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
RINE EXAMINATION, ROUTINE *	, Urine			
Color	PALE YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic (6.5)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent	DIPSTICK
			10-40 (+)	
			40-200 (++)	
			200-500 (+++)	
			> 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+)	DIPSTICK
			0.5-1.0 (++)	
			1-2 (+++)	
(about	ADCENIT		> 2 (++++)	DIOCHEMICTRY
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	2-3/h.p.f			MICROSCOPIC
				EXAMINATION
Pus cells	0-1/h.p.f			
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			
JGAR, FASTING STAGE *, Urine				
Sugar, Fasting stage	ABSENT	gms%		
nterpretation:				
(+) < 0.5				

(+) < 0.5 (++) 0.5-1.0 (+++) 1-2

(++++) > 2

S.N. Sinla

Dr.S.N. Sinha (MD Path)









CIN: U85110DL2003PLC308206



Patient Name : Mrs.SEEMA SINGH-BOBS30117 : 25/Feb/2023 08:40:00 Registered On Age/Gender : 42 Y 0 M 0 D /F Collected : 25/Feb/2023 09:36:35 UHID/MR NO : CVAR.0000035794 Received : 26/Feb/2023 11:00:32 Visit ID : CVAR0087442223 Reported : 26/Feb/2023 12:12:41 Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interva	l Method
THYROID PROFILE - TOTAL **, Serum				
T3, Total (tri-iodothyronine)	125.62	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	9.60	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	3.51	μIU/mL	0.27 - 5.5	CLIA
Interpretation:				
		0.3-4.5 μIU/1	mL First Trimes	ster
		0.5-4.6 μIU/1	mL Second Trin	nester
		0.8-5.2 μIU/1	mL Third Trime	ester
		0.5-8.9 μIU/1	mL Adults	55-87 Years
		0.7-27 μIU/1	mL Premature	28-36 Week
		2.3-13.2 μIU/r	mL Cord Blood	> 37Week
		0.7-64 μIU/ı	mL Child(21 wk	c - 20 Yrs.)
		1-39 μIU	J/mL Child	0-4 Days
		1.7-9.1 μIU/r		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.

Brin

Dr. Anupam Singh (MBBS MD Pathology)









CIN: U85110DL2003PLC308206



Patient Name : Mrs.SEEMA SINGH-BOBS30117 Registered On : 25/Feb/2023 08:40:01

 Age/Gender
 : 42 Y 0 M 0 D /F
 Collected
 : N/A

 UHID/MR NO
 : CVAR.0000035794
 Received
 : N/A

Visit ID : CVAR0087442223 Reported : 25/Feb/2023 12:15:07

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. 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)









CIN: U85110DL2003PLC308206



Patient Name : Mrs.SEEMA SINGH-BOBS30117 Registered On : 25/Feb/2023 08:40:02

 Age/Gender
 : 42 Y 0 M 0 D /F
 Collected
 : N/A

 UHID/MR NO
 : CVAR.0000035794
 Received
 : N/A

Visit ID : CVAR0087442223 Reported : 25/Feb/2023 09:51:06

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

<u>ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER)</u>

LIVER

• The liver is normal in size 12.3 cm in longitudinal span and has a normal homogenous echotexture. No focal lesion is seen.

PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein is normal (9.4 mm) at the porta.
- Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common duct are normal (4.2 mm) at the porta.
- Gall bladder is absent (post cholecystectomy status)

PANCREAS

• The pancreas is normal in size and shape and has a normal homogenous echotexture.

RIGHT KIDNEY

- Right kidney is normal in size (9.9 x 3.7 cm), and shape and cortical echotexture.
- The collecting system is not dilated.
- The upper part of right ureter is normal. The vesicoureteric junction is normal.
- Corticomedullary demarcation is clear. Renal respiratory excursions are normal.

LEFT KIDNEY

- Left kidney is normal in size (11.1 x 4.6 cm), and shape and cortical echotexture.
- The collecting system is not dilated.
- The upper part of left ureter is normal. The vesicoureteric junction is normal.
- Corticomedullary demarcation is clear. Renal respiratory excursions are normal.

SPLEEN









CIN: U85110DL2003PLC308206



Patient Name : 25/Feb/2023 08:40:02 : Mrs.SEEMA SINGH-BOBS30117 Registered On

Collected Age/Gender : 42 Y 0 M 0 D /F : N/A UHID/MR NO : CVAR.0000035794 Received : N/A

Visit ID : CVAR0087442223 Reported : 25/Feb/2023 09:51:06

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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

• The spleen is normal in size (8.8 cm), and has a homogenous echotexture.

ILIAC FOSSA

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

URINARY BLADDER

- The urinary bladder is normal. Bladder wall is normal in thickness and regular.
- Pre-void urine volume is 202 cc.

UTERUS

- The uterus is anteverted and anteflexed position and is normal in size measures (67 x 43 x 25 mm/ 40 cc).
- It has a homogenous myometrial echotexture.
- The endometrium is seen in midline (thickness 4 mm)
- Cervix is normal.

UTERINE ADNEXA

Bilaeral ovaries normal

CUL-DE-SAC

• Pouch of Douglas is clear.

IMPRESSION

- Post cholecystectomy status
- Rest of the abdominal organs are normal

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

E EXAMINATION, SUGAR, PP STAGE, ECG / EKG, Tread Mill Test (TMT)

Dr Raveesh Chandra Roy (MD-Radio)

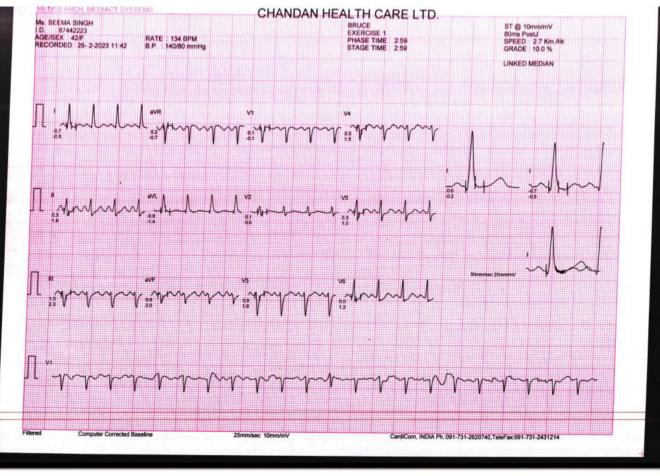
This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing * *Facilities Available at Select Location 365 Days Open













CIN: U85110DL2003PLC308206



Patient Name : Mrs.SEEMA SINGH-BOBS30117

: 42 Y 0 M 0 D /F

Collected

: 25/Feb/2023 08:40AM : 25/Feb/2023 02:51PM

Age/Gender UHID/MR NO

: CVAR.0000035794 : CVAR0087442223 Received : 26/Feb/2023 03:33PM Reported : 26/Feb/2023 03:49PM

Visit ID Ref Doctor

: Dr.Mediwheel - Arcofemi Health Care Ltd.

status : Final Report

Status
Contract By

Registered On

: MEDIWHEEL - ARCOFEMI HEALTH CARE

LTD.[52610]CREDIT

DEPARTMENT OF CYTOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

SPECIMEN: PAP SMEAR

CYTOLOGY NO: |2/23-24

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

conventional PAP smear.

MICROSCOPIC: 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 ***

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, SUGAR, PP STAGE, 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.

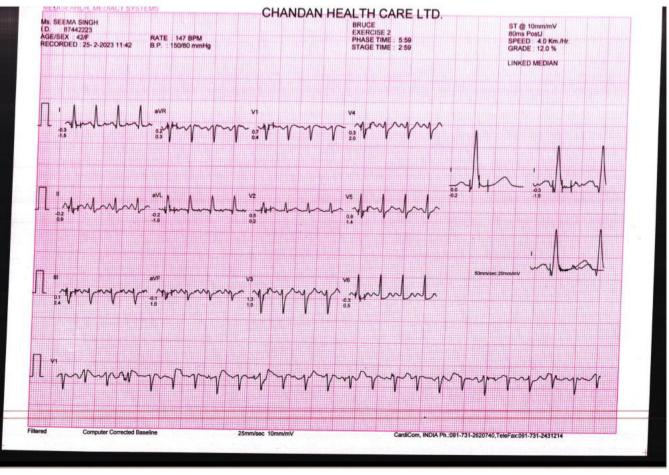
Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Online Booking Facilities for Diagnostics Test And Health Check-ups, Online Report Viewing, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 25 Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services*

*Facilities Available at Selected Location









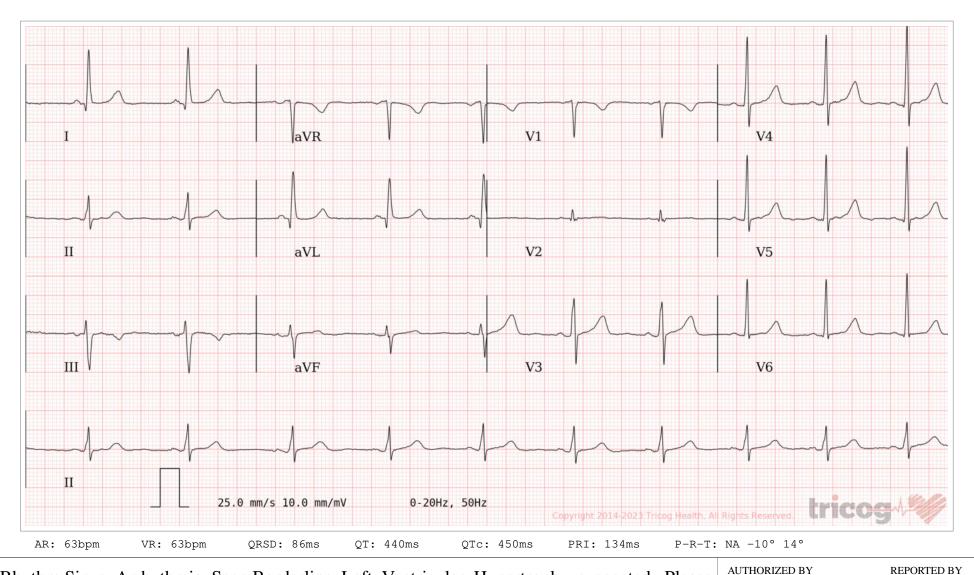
Chandan Diagnostic



Age / Gender: 42/Female Date and Time: 25th Feb 23 10:06 AM

Patient ID: CVAR0087442223

Patient Name: Mrs.SEEMA SINGH-BOBS30117



Sinus Rhythm, Sinus Arrhythmia Seen, Borderline Left Ventricular Hypertrophy suspected. Please correlate clinically.

> Dr. Charit MD, DM: Cardiology

> > 63382

AUTHORIZED BY

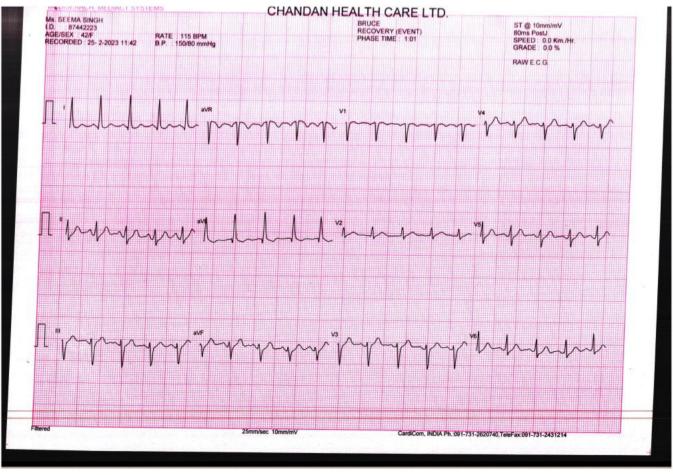


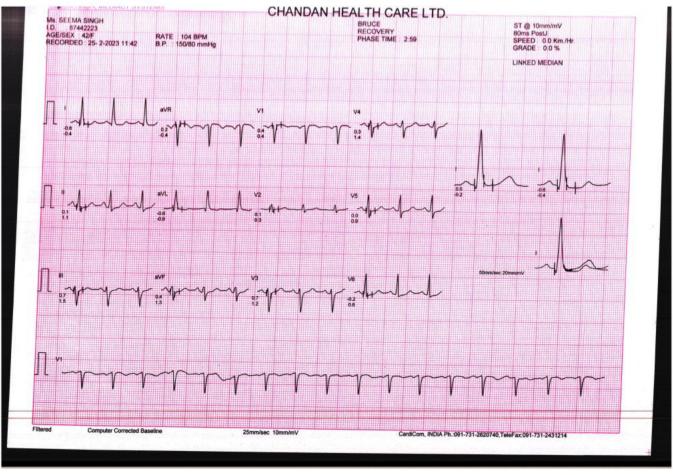
Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.

CHANDAN HEALTH CARE LTD PEAK EXER AGE/SEX : 42/F RATE | 119 BPM RECORDED : 25- 2-2023 11:42 SPEED: 5.4 Km./Hr B.P. : 150/80 mmHc STAGE TIME: 0:28 MIXEDECG I impropriet in the property of the property o I wonder the state of the state Why Madry Missels and market from the formal of the service of the U "hishar hand had "- hishar had hand hand Mohry Marie my marie many marie I

CHANDAN HEALTH CARE LTD. Ma. SEEMA SINGH BRUCE ST @ 10mm/mV I.D. 87442223 RECOVERY (EVENT) 80ms PostJ AGE/SEX 42/F RATE: 138 BPM PHASE TIME: 0:31 SPEED 0.0 Km./Hr. RECORDED: 25- 2-2023 11:42 B.P. 150/80 mmHg GRADE: 0.0 % RAWECG CardiCom, INDIA Ph.:091-731-2620740, TeleFax:091-731-2431214

MEDISEARCH, MEDIACT SYSTEMS







भारत सरकार GOVERNMENT OF INDIA



सीमा सिंह
Seema Singh
जन्म तिथि/ DOB: 10/07/1980
महिला / FEMALE



2983 4189 6661



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

Latitude

25.305419°

LOCAL 10:00:29 GMT 04:30:29 Longitude

82.979036°

SATURDAY 02.25.2023 ALTITUDE 22 METER