

Re: Health Check up Booking Confirmed Request(bobE27331),Package Code-PKG10000238, Beneficiary Code-69327

1 message

anurag sri <anurag.idc@gmail.com> To: Mediwheel <wellness@mediwheel.in>, "idc. ashiyana" <idcashiyana@gmail.com> Cc: mediwheelwellness@gmail.com Mon, Jan 30, 2023 at 5:21 PM

Confirmed

Pack Code 2613

On Mon, Jan 30, 2023 at 4:01 PM Mediwheel <wellness@mediwheel.in> wrote:



Vediwheel

CONTRACTOR CONTRACTOR

Diagnostic

48,

DD

Hi Indra Diagnostic Centre,

Diagnostic/Hospital Location :M-214/215 Sec G LDA Colony Near Power House Chauraha Kanpur road, City:Lucknow

We have received the confirmation for the following booking .

Benefici	ary N	lame	:	PKG10000238	

Beneficiary Name : MR. RANJAN PRABHAT

Member Age : 33

Member Gender : Male

Member Relation : Employee

Package Name : Full Body Health Checkup Male Below 40

Location : UNCHAHAR, Uttar Pradesh-229404

Contact Details : 8840370730

Booking Date : 30-01-2023

Appointment Date: 05-02-2023

Instructions to undergo Health Check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.

2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.

3. Bring urine sample in a container if possible (containers are available at the Health Check centre).

4. Please bring all your medical prescriptions and previous health medical records with you.

5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.

2. It is advisable not to undergo any Health Check during menstrual cycle.

We request you to facilitate the employee on priority.



Issue Date: 18/10/2019

ह्यं क्रम्भेड पंरद्धर्त Prabhat Ranjan जन्म तिथि/DOB: 27/08/1987 पुरुष MALE





14 Harris



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आरत सरकार

Download Date: 01/03/2021

पहचान VID: 9125 3720 4032 4387 आधार, मेरी モル

5992 2817 3861



GPS Map Camera

agnos

naby

Lucknow, Uttar Pradesh, India M/218, Parag Rd, Sector G, LDA Colony, Lucknow, Uttar Pradesh 226012, India Lat 26.787498° Long 80.908448° 05/02/23 11:43 AM GMT +05:30

Google



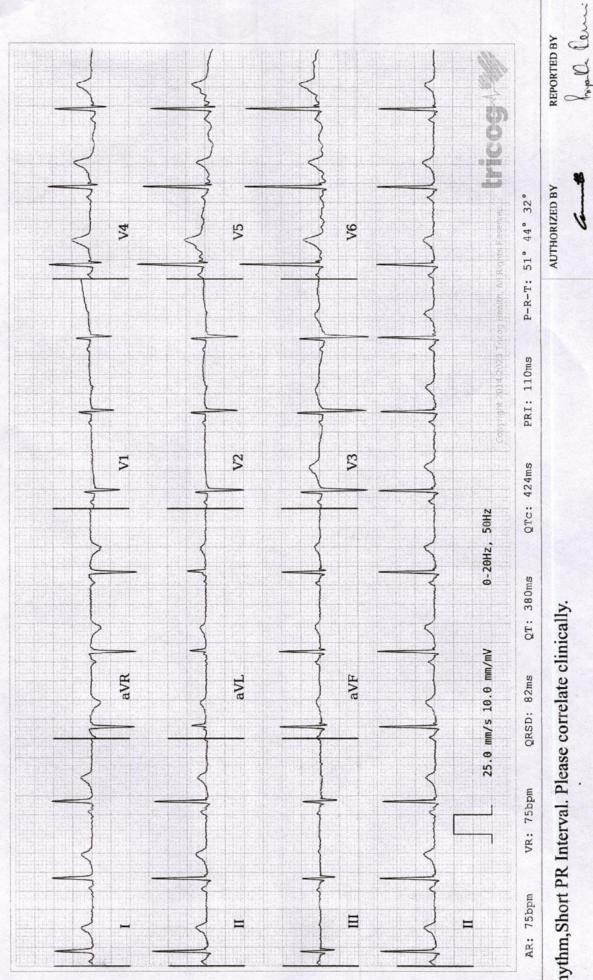


cdca0279082223 33/Male Age / Gender: Patient Name: Patient ID:

Date and Time: 5th Feb 23 2:20 PM

p.

Mr.RANJAN PRABHAT



Sinus Rhythm, Short PR Interval. Please correlate clinically.

63382

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 nuet be interpreted by a qualified physician.

78253

Dr. Priyanka Kumari

a b

Dr. Charit MD, DM: Cardiology



Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707, CIN : U85110DL2003PLC308206



Patient Name	: Mr.RANJAN PRABHAT	Registered On	: 05/Feb/2023 09:28:50
Age/Gender	: 33 Y 0 M 0 D /M	Collected	: 05/Feb/2023 09:35:47
UHID/MR NO	: CDCA.0000101411	Received	: 05/Feb/2023 09:47:54
Visit ID	: CDCA0279082223	Reported	: 05/Feb/2023 13:49:44
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Group (ABO & Rh typing) * , Bl	lood			
Blood Group	0			
Rh (Anti-D)	POSITIVE			
Complete Blood Count (CBC) * , Whol	le Blood			
Haemoglobin	13.80	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	
TLC (WBC)	6,700.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils)	48.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	47.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	2.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	3.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	< 1	ELECTRONIC IMPEDANCE
ESR				
Observed	10.00	Mm for 1st hr.		
Corrected	6.00	Mm for 1st hr.	< 9	
PCV (HCT)	42.00	%	40-54	
Platelet count				
Platelet Count	2.2	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	17.10	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	NR	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.25	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	11.40	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count	-			
RBC Count	4.30	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE





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DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Indices (MCV, MCH, MCHC)				
MCV	97.67	fl	80-100	CALCULATED PARAMETER
МСН	32.09	pg	28-35	CALCULATED PARAMETER
МСНС	32.85	%	30-38	CALCULATED PARAMETER
RDW-CV	14.40	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	51.90	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,216.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	201.00	/cu mm	40-440	

Dr. R.K. Khanna (MBBS,DCP)



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Age/Gender	: 33 Y 0 M 0 D /M	Collected	: 05/Feb/2023 13:49:20
UHID/MR NO	: CDCA.0000101411	Received	: 05/Feb/2023 15:03:37
Visit ID	: CDCA0279082223	Reported	: 05/Feb/2023 16:46:59
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE FASTING * , Plasma				
Glucose Fasting	124.79	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 * Sample:Plasma After Meal	130.90	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD
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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.

Dr. R.K. Khanna (MBBS, DCP)

Home Sample Collection 1800-419-0002



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UHID/MR NO	: CDCA.0000101411	Received	: 05/Feb/2023 17:04:18
Visit ID	: CDCA0279082223	Reported	: 05/Feb/2023 19:23:59
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit Bio. Ref. In	iterval Method
GLYCOSYLATED HAEMOGLOBIN (HBA1C) **	, EDTA BLOOD		
Glycosylated Haemoglobin (HbA1c)	4.70	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	28.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	88	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. **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 G8 90 SL TOSOH 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 nondiabetic conditions: a. Iron-deficiency anemia b. Splenectomy









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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

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.

Dr. Anupam Singh (MBBS MD Pathology)









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DEPARTMENT OF BIOCHEMISTRY

mg/dL mg/dl mg/dl U/L U/L IU/L gm/dl gm/dl gm/dl gm/dl	Serum 0.7-1.3 Spot Urine-Male- 2 275 Female-20-320 3.4-7.0 < 35 < 40 11-50 6.2-8.0 3.8-5.4	CALCULATED MODIFIED JAFFES 0- URICASE IFCC WITHOUT P5P IFCC WITHOUT P5P OPTIMIZED SZAZING BIRUET B.C.G.
mg/dl mg/dl U/L U/L IU/L gm/dl gm/dl	Serum 0.7-1.3 Spot Urine-Male- 2 275 Female-20-320 3.4-7.0 < 35 < 40 11-50 6.2-8.0 3.8-5.4	MODIFIED JAFFES 0- URICASE IFCC WITHOUT P5P IFCC WITHOUT P5P OPTIMIZED SZAZING BIRUET
mg/dl U/L U/L IU/L gm/dl gm/dl	Spot Urine-Male- 2 275 Female-20-320 3.4-7.0 < 35 < 40 11-50 6.2-8.0 3.8-5.4	O- URICASE IFCC WITHOUT P5P IFCC WITHOUT P5P OPTIMIZED SZAZING BIRUET
U/L U/L IU/L gm/dl gm/dl	< 35 < 40 11-50 6.2-8.0 3.8-5.4	IFCC WITHOUT P5P IFCC WITHOUT P5P OPTIMIZED SZAZING BIRUET
U/L IU/L gm/dl gm/dl	< 40 11-50 6.2-8.0 3.8-5.4	IFCC WITHOUT P5P OPTIMIZED SZAZING BIRUET
U/L IU/L gm/dl gm/dl	< 40 11-50 6.2-8.0 3.8-5.4	IFCC WITHOUT P5P OPTIMIZED SZAZING BIRUET
U/L mg/dl mg/dl mg/dl	1.1-2.0 42.0-165.0 0.3-1.2 < 0.30 < 0.8 <200 Desirable 200-239 Borderline	CALCULATED CALCULATED IFCC METHOD JENDRASSIK & GROF JENDRASSIK & GROF JENDRASSIK & GROF
mg/dl mg/dl mg/dl	 > 240 High 30-70 < 100 Optimal 100-129 Nr. Optimal/Above Op 130-159 Borderline 160-189 High > 190 Very High 10-33 < 150 Normal 	
	mg/dl mg/dl	200-239 Borderline > 240 High mg/dl 30-70 mg/dl < 100 Optimal 100-129 Nr. Optimal/Above Op 130-159 Borderline 160-189 High > 190 Very High mg/dl 10-33





Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707, CIN : U85110DL2003PLC308206



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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Interval	Method
			>500 Very High	





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Patient Name	: Mr.RANJAN PRABHAT	Registered On	: 05/Feb/2023 09:28:51
Age/Gender	: 33 Y 0 M 0 D /M	Collected	: 05/Feb/2023 13:49:20
UHID/MR NO	: CDCA.0000101411	Received	: 05/Feb/2023 13:55:24
Visit ID	: CDCA0279082223	Reported	: 05/Feb/2023 14:25:42
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
JRINE EXAMINATION, ROUTINE *	, Urine			
Color	PALE YELLOW			
Specific Gravity	1.015			
Reaction PH	Acidic (5.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent	DIPSTICK
			10-40 (+)	
			40-200 (++)	
			200-500 (+++)	
Sugar	ABSENT	gms%	> 500 (++++) < 0.5 (+)	DIPSTICK
Sugar	ADJEINT	g111570	< 0.5 (+) 0.5-1.0 (++)	DIPSTICK
			1-2 (+++)	
			> 2 (++++)	
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	ABSENT			MICROSCOPIC
				EXAMINATION
Pus cells	ABSENT			
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
Oth sur				EXAMINATION
Others	ABSENT			
UGAR, FASTING STAGE * , Urine				
Sugar, Fasting stage	ABSENT	gms%		
Intournatations				

Interpretation:

 $\begin{array}{ll} (+) & < 0.5 \\ (++) & 0.5 - 1.0 \\ (+++) & 1 - 2 \\ (++++) & > 2 \end{array}$

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(++++) > 2 gms%

CHANDAN DIAGNOSTIC CENTRE

Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707, CIN: U85110DL2003PLC308206



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DEPARTMENT OF CLINICAL PATHOLOGY

Test Na	me	Result	Unit	Bio. Ref. Interval	Method	
SUGAR	, PP STAGE * , Urine					
Sugar,	PP Stage	ABSENT				
Interp	retation:					
(+)	< 0.5 gms%					
(++)	0.5-1.0 gms%					
(+++)	1-2 gms%					





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UHID/MR NO	: CDCA.0000101411	Received	: 05/Feb/2023 16:53:07
Visit ID	: CDCA0279082223	Reported	: 05/Feb/2023 17:36:24
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE - TOTAL ** , Serum				
T3, Total (tri-iodothyronine)	129.32	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	9.38	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	1.85	μIU/mL	0.27 - 5.5	CLIA
Interpretation:		0.2.4.5	I D' (T)	
		0.3-4.5 μIU/1		
		0.5-4.6 μIU/1		
		0.8-5.2 μIU/r		
		0.5-8.9 μIU/1	nL Adults	55-87 Years
		0.7-27 μIU/ı	nL Premature	28-36 Week
		2.3-13.2 µIU/r	nL Cord Blood	> 37Week
		0.7-64 μIU/r	nL Child(21 wk	- 20 Yrs.)

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

1 - 39

1.7-9.1

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.

Child

Child

µIU/mL

µIU/mL

Dr. Anupam Singh (MBBS MD Pathology)

0-4 Days

2-20 Week







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Patient Name	: Mr.RANJAN PRABHAT	Registered On	: 05/Feb/2023 09:28:52
Age/Gender	: 33 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CDCA.0000101411	Received	: N/A
Visit ID	: CDCA0279082223	Reported	: 05/Feb/2023 11:15:39
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd	Status	: Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA *

(300 mA COMPUTERISED UNIT SPOT FILM DEVICE)

CHEST P-A VIEW

- Soft tissue shadow appears normal.
- There is old fracture of right clavicle at the junction of lateral 1/3rd and medial 2/3rd with angulation of fracture fragments.
- Diaphragmatic shadows are normal on both sides.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Pulmonary parenchyma did not reveal any significant lesion.

IMPRESSION

• Old fracture of right clavicle.



Dr. Vandana Gupta MBBS,DMRD,DNB

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

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

LIVER

 Liver is normal in size measuring 14.2 cm in longitudinal span & shows moderate diffuse increase in parenchymal echogenicity.

PORTAL SYSTEM

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

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common duct are normal (4.4 mm) at the porta.
- The gall bladder is normal in size and has regular walls. Wall thickness is normal. Lumen of the gall bladder is anechoic.

PANCREAS

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

RIGHT KIDNEY

- Right kidney is normal in size (9.7 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 (10.3 x 3.7 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.





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CIN: U85110DL2003PLC308206



Patient Name	: Mr.RANJAN PRABHAT	Registered On	: 05/Feb/2023 09:28:53
Age/Gender	: 33 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CDCA.0000101411	Received	: N/A
Visit ID	: CDCA0279082223	Reported	: 05/Feb/2023 11:44:10
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

SPLEEN

• The spleen is normal in size (10.1 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.

PROSTATE

- The prostate gland is normal in texture and size, measures 3.4 x 2.9 x 2.8 cm (vol-14.8 cc).
- Small simple mid line prostatic cyst is noted posteriorly, measuring 7.7 x 5.5 mm.

IMPRESSION

- Grade-II fatty infiltration of liver.
- Small prostatic cyst.

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

Result/s to Follow: STOOL, ROUTINE EXAMINATION, ECG / EKG



Dr. Vandana Gupta MBBS,DMRD,DNB

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 * 365 Days Open *Facilities Available at Select Location

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