

Add: Indra Deep Complex, Sanjay Gandhi Puram, Faizabad Road, Indira Nagar Ph: 7706041643,7706041644

CIN: U85196UP1992PLC014075



Patient Name : Mrs.KHUSHBU SINGH Registered On : 03/Dec/2023 09:49:25 : 30 Y 4 M 26 D /F Age/Gender Collected : 03/Dec/2023 10:21:26 UHID/MR NO : IDCD.0000197308 Received : 03/Dec/2023 10:29:02 Visit ID Reported : 03/Dec/2023 13:32:10 : IDCD0437852324

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

# DEPARTMENT OF HAEMATOLOGY MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name                             | Result   | Unit           | Bio. Ref. Interval  | Method  |
|---------------------------------------|----------|----------------|---|---|
|                                       |          |                |   |   |
| Blood Group (ABO & Rh typing) * , Blo | ood      |                |   |   |
| Blood Group                           | В        |                |   | ERYTHROCYTE<br>MAGNETIZED<br>TECHNOLOGY / TUBE<br>AGGLUTINA |
| Rh ( Anti-D)                          | POSITIVE | - control      |   | ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA          |
| Complete Blood Count (CBC) * , Whole  | e Blood  |                |   |   |
| Haemoglobin                           | 12.40    | g/dl           | 1 Day- 14.5-22.5 g/dl<br>1 Wk- 13.5-19.5 g/dl<br>1 Mo- 10.0-18.0 g/dl     |   |
|                                       |          |                | 3-6 Mo- 9.5-13.5 g/dl<br>0.5-2 Yr- 10.5-13.5 g/dl                         |   |
|                                       |          |                | 2-6 Yr- 11.5-15.5 g/dl<br>6-12 Yr- 11.5-15.5 g/dl                         |   |
|                                       |          |                | 12-18 Yr 13.0-16.0 g/dl<br>Male- 13.5-17.5 g/dl<br>Female- 12.0-15.5 g/dl |   |
| TLC (WBC) <u>DLC</u>                  | 9,900.00 | /Cu mm         | 4000-10000  | ELECTRONIC IMPEDANCE  |
| Polymorphs (Neutrophils )             | 68.00    | %              | 55-70   | ELECTRONIC IMPEDANCE  |
| Lymphocytes                           | 25.00    | %              | 25-40   | ELECTRONIC IMPEDANCE  |
| Monocytes                             | 5.00     | %              | 3-5   | ELECTRONIC IMPEDANCE  |
| Eosinophils                           | 2.00     | %              | 1-6   | ELECTRONIC IMPEDANCE  |
| Basophils<br>ESR                      | 0.00     | %              | <1  | ELECTRONIC IMPEDANCE  |
| Observed                              | 24.00    | Mm for 1st hr. |   |   |
| Corrected                             | 12.00    | Mm for 1st hr. | < 20  |   |
| PCV (HCT)  Platelet count             | 38.00    | %              | 40-54   |   |
| Platelet Count                        | 3.20     | LACS/cu mm     | 1.5-4.0   | ELECTRONIC<br>IMPEDANCE/MICROSCOPIC                         |
| PDW (Platelet Distribution width)     | 16.20    | fL             | 9-17  | ELECTRONIC IMPEDANCE  |
| P-LCR (Platelet Large Cell Ratio)     | 36.40    | %              | 35-60   | ELECTRONIC IMPEDANCE  |







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# DEPARTMENT OF HAEMATOLOGY

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name                        | Result   | Unit        | Bio. Ref. Interval | Method               |
|----------------------------------|----------|-------------|--------------------|----------------------|
|                                  |          |             |                    |                      |
| PCT (Platelet Hematocrit)        | 0.33     | %           | 0.108-0.282        | ELECTRONIC IMPEDANCE |
| MPV (Mean Platelet Volume)       | 11.50    | fL          | 6.5-12.0           | ELECTRONIC IMPEDANCE |
| RBC Count                        |          |             |                    |                      |
| RBC Count                        | 4.38     | Mill./cu mm | 3.7-5.0            | ELECTRONIC IMPEDANCE |
| Blood Indices (MCV, MCH, MCHC)   |          |             |                    |                      |
| MCV                              | 86.90    | fl          | 80-100             | CALCULATED PARAMETER |
| MCH                              | 28.30    | pg          | 28-35              | CALCULATED PARAMETER |
| MCHC                             | 32.60    | %           | 30-38              | CALCULATED PARAMETER |
| RDW-CV                           | 11.70    | %           | 11-16              | ELECTRONIC IMPEDANCE |
| RDW-SD                           | 39.00    | fL          | 35-60              | ELECTRONIC IMPEDANCE |
| Absolute Neutrophils Count       | 6,732.00 | /cu mm      | 3000-7000          |                      |
| Absolute Eosinophils Count (AEC) | 198.00   | /cu mm      | 40-440             |                      |

Dr. Shoaib Irfan (MBBS, MD, PDCC)







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Patient Name : Mrs.KHUSHBU SINGH : 03/Dec/2023 09:49:25 Registered On Age/Gender : 30 Y 4 M 26 D /F Collected : 03/Dec/2023 14:30:46 UHID/MR NO : IDCD.0000197308 Received : 03/Dec/2023 16:04:48 Visit ID : IDCD0437852324 Reported : 03/Dec/2023 16:57:25

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#### **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          | 98.90  | mg/dl | < 100 Normal<br>100-125 Pre-diabetes<br>≥ 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               | 128.90 | mg/dl | <140 Normal          | <b>GOD POD</b> |
|--------------------------|--------|-------|----------------------|----------------|
| Sample:Plasma After Meal |        |       | 140-199 Pre-diabetes |                |
|                          |        |       | >200 Diabetes        |                |

#### **Interpretation:**

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#### **DEPARTMENT OF BIOCHEMISTRY**

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name                          | Result         | Unit E        | Bio. Ref. Interval | Method      |  |
|------------------------------------|----------------|---------------|--------------------|-------------|--|
|                                    |                |               |                    |             |  |
| GLYCOSYLATED HAEMOGLOBIN (HBA1C) * | * , EDTA BLOOD |               |                    |             |  |
| Glycosylated Haemoglobin (HbA1c)   | 5.40           | % NGSP        |                    | HPLC (NGSP) |  |
| Glycosylated Haemoglobin (HbA1c)   | 36.00          | mmol/mol/IFCC |                    |             |  |
| Estimated Average Glucose (eAG)    | 108            | 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) | <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                    |

<sup>\*</sup>High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

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





<sup>\*\*</sup>Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.



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: 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

c. Alcohol toxicity d. Lead toxicity



Dr. Anupam Singh (MBBS MD Pathology)





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

<sup>\*</sup>Pregnancy d. chronic renal failure. Interfering Factors:

<sup>\*</sup>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.



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# DEPARTMENT OF BIOCHEMISTRY MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name  | Result  | Unit  | Bio. Ref. Interval   | Method  |
|--|---|---|--|---|
|  |   |   |  |   |
| BUN (Blood Urea Nitrogen)<br>Sample:Serum  | 7.05  | mg/dL   | 7.0-23.0   | CALCULATED  |
| Creatinine<br>Sample:Serum   | 0.82  | mg/dl   | 0.5-1.20   | MODIFIED JAFFES   |
| Uric Acid<br>Sample:Serum  | 4.21  | 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) | 23.60<br>17.50<br>19.10<br>6.69<br>3.75<br>2.94<br>1.28<br>114.09<br>0.30<br>0.11<br>0.19 | U/L U/L gm/dl gm/dl gm/dl U/L mg/dl mg/dl mg/dl | < 35<br>< 40<br>11-50<br>6.2-8.0<br>3.4-5.4<br>1.8-3.6<br>1.1-2.0<br>42.0-165.0<br>0.3-1.2<br>< 0.30<br>< 0.8  | IFCC WITHOUT P5P IFCC WITHOUT P5P OPTIMIZED SZAZING BIURET B.C.G. CALCULATED CALCULATED IFCC METHOD JENDRASSIK & GROF JENDRASSIK & GROF JENDRASSIK & GROF JENDRASSIK & GROF |
| HDL Cholesterol (Good Cholesterol) LDL Cholesterol (Bad Cholesterol)  VLDL Triglycerides   | 36.80<br>81<br>13.76<br>68.80   | mg/dl<br>mg/dl<br>mg/dl<br>mg/dl                | > 240 High<br>30-70<br>< 100 Optimal<br>100-129 Nr.<br>Optimal/Above Opt<br>130-159 Borderline<br>160-189 High<br>> 190 Very High<br>10-33<br>< 150 Normal<br>150-199 Border<br>200-499 High |   |







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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       |
|---|--------------|-------------------|---------------------------|--------------|
|   |              |                   |                           |              |
| URINE EXAMINATION, ROUTINE * , $\upsilon$ | rine         |                   |                           |              |
| Color                                     | LIGHT YELLOW |                   |                           |              |
| Specific Gravity                          | 1.020        |                   |                           |              |
| Reaction PH                               | Acidic (6.0) |                   |                           | DIPSTICK     |
| Appearance                                | Turbid       |                   |                           |              |
| Protein                                   | ABSENT       | <sup>*</sup> mg % | < 10 Absent               | DIPSTICK     |
|   |              |                   | 10-40 (+)                 |              |
|   |              |                   | 40-200 (++)               |              |
|   |              |                   | 200-500 (+++)             |              |
| Curan                                     | ADCENIT      | auna a 0/         | > 500 (++++)              | DIDCTICK     |
| Sugar                                     | ABSENT       | gms%              | < 0.5 (+)<br>0.5-1.0 (++) | DIPSTICK     |
|   |              |                   | 1-2 (+++)                 |              |
|   |              |                   | > 2 (++++)                |              |
| Ketone                                    | ABSENT       | mg/dl             | 0.1-3.0                   | BIOCHEMISTRY |
| Bile Salts                                | ABSENT       |                   |                           |              |
| Bile Pigments                             | ABSENT       |                   |                           |              |
| Bilirubin                                 | ABSENT       |                   | 1                         | DIPSTICK     |
| Leucocyte Esterase                        | ABSENT       |                   |                           | DIPSTICK     |
| Urobilinogen(1:20 dilution)               | ABSENT       |                   |                           |              |
| Nitrite                                   | ABSENT       |                   |                           | DIPSTICK     |
| Blood                                     | ABSENT       |                   |                           | DIPSTICK     |
| Microscopic Examination:                  |              |                   |                           |              |
| Epithelial cells                          | 2-3/h.p.f    |                   |                           | MICROSCOPIC  |
| •   | ,            |                   |                           | EXAMINATION  |
| Pus cells                                 | 30-40/h.p.f  |                   |                           |              |
| RBCs                                      | ABSENT       |                   |                           | MICROSCOPIC  |
|   |              |                   |                           | EXAMINATION  |
| Cast                                      | ABSENT       |                   |                           |              |
| Crystals                                  | ABSENT       |                   |                           | MICROSCOPIC  |
|   | , size       |                   |                           | EXAMINATION  |
| Others                                    | ABSENT       |                   |                           |              |
| SUGAR, FASTING STAGE * , Urine            |              |                   |                           |              |
| Sugar, Fasting stage                      | ABSENT       | gms%              |                           |              |
| ADV:- Urine culture                       |              |                   |                           |              |







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

# **DEPARTMENT OF CLINICAL PATHOLOGY**

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

**Test Name** Result Unit Bio. Ref. Interval Method

**Interpretation:** 

(+)< 0.5

(++)0.5 - 1.0

(+++) 1-2

(++++) > 2

SUGAR, PP STAGE \* , Urine

Sugar, PP Stage

**ABSENT** 

**Interpretation:** 

(+)< 0.5 gms%

(++)0.5-1.0 gms%

(+++) 1-2 gms%

(++++) > 2 gms%

Dr. Shoaib Irfan (MBBS, MD, PDCC)







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#### DEPARTMENT OF IMMUNOLOGY

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name                         | Result | Unit           | Bio. Ref. Interva | l Method     |
|-----------------------------------|--------|----------------|-------------------|--------------|
| THYROID PROFILE - TOTAL **, Serum |        |                |                   |              |
| T3, Total (tri-iodothyronine)     | 132.52 | ng/dl          | 84.61–201.7       | CLIA         |
| T4, Total (Thyroxine)             | 8.60   | ug/dl          | 3.2-12.6          | CLIA         |
| TSH (Thyroid Stimulating Hormone) | 1.560  | μIU/mL         | 0.27 - 5.5        | CLIA         |
|                                   |        | ,              |                   |              |
| Interpretation:                   |        |                |                   |              |
|                                   |        | 0.3-4.5 µIU/r  | nL First Trimes   | ster         |
|                                   |        | 0.5-4.6 μIU/r  | nL Second Trin    | nester       |
|                                   |        | 0.8-5.2 μIU/n  | nL Third Trime    | ster         |
|                                   |        | 0.5-8.9 µIU/r  | nL Adults         | 55-87 Years  |
|                                   |        | 0.7-27 μIU/r   | nL Premature      | 28-36 Week   |
|                                   |        | 2.3-13.2 μIU/n |                   | > 37Week     |
|                                   |        | 0.7-64 μIU/n   |                   | ( - 20 Yrs.) |
|                                   |        |                | /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.

Bring

Dr. Anupam Singh (MBBS MD Pathology)







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#### DEPARTMENT OF X-RAY

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA \*

(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

#### **DIGITAL CHEST P-A VIEW**

- Soft tissue shadow appears normal.
- Bony cage is normal.
- 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: NORMAL SKIAGRAM









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# DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

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

#### **LIVER**

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

#### **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 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 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 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**



Home Sample Collection 1800-419-0002



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 Received
 : N/A

Visit ID : IDCD0437852324 Reported : 03/Dec/2023 13:01:12

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

### DEPARTMENT OF ULTRASOUND

#### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

• The spleen is normal in size and has a homogenous echotexture. No focal lesion is seen.

#### **ILIAC FOSSA**

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

#### **URINARY BLADDER**

• The urinary bladder is normal. Bladder wall is normal in thickness and regular.

#### **UTERUS**

- The uterus is anteverted and anteflexed position.
- It has a homogenous myometrial echotexture.
- The endometrium is seen in midline.
- · Cervix is normal.

#### **ADNEXA & OVARIES**

- Adnexa on both sides are normal.
- Both the ovaries are normal in size, shape & has a normal echotexture.

#### **CUL-DE-SAC**

Pouch of Douglas is clear.

#### **IMPRESSION**

• No significant sonological abnormality is seen on this study.

Typed by- anoop

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

(\*\*) Test Performed at Chandan Speciality Lab.

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG



Dr. Anoop Agarwal MBBS,MD(Radiology)

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



