

CHANDAN DIAGNOSTIC CENTRE

Name of Company: - Mediawheel

Name of Executive: Sushil Kumar

Date of Birth: 15/07/1977

Sex: Male / Female

Height: 172 CMs

Weight: 83 KGs

BMI (Body Mass Index): 20.1

Chest (Expiration / Inspiration) 98 / 104 CMs

Abdomen: 100 CMs

Blood Pressure: 124 / 80 mm/Hg

Pulse: 82 BPM - Regular / Irregular

RR: 17 Resp/Min

Ident Mark: Male on Lt Shoulder

Any Allergies: NO

Vertigo: NO

Any Medications: NO

Any Surgical History: NO

Habits of alcoholism/smoking/tobacco: NO

Chief Complaints if any: None

Lab Investigation Reports: None

Eye Check up vision & Color vision: Normal in glass - 2 eyes

Left eye: +1.00

Right eye: +0.75D

Near vision: Normal in glass

Far vision: Normal

Dental check up: Normal

CHANDAN DIAGNOSTIC CENTRE

ENT Check up: *MC*

Eye Checkup: *MC*

Final impression

Certified that I examined *Sushil kumar* S/o or D/o
is presently in good health and free from any cardio-respiratory/communicable
ailment, he/she is *fit / Unfit* to join any organization.

[Signature]
Client Signature :-

[Signature]
.....
Signature of Medical Examiner

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

Date.. *25.1.22* /2023, Place - VARANASI

Dr. R.C. ROY
MBBS, MD. (Radio Diagnostics)
Reg. No.-26913

Chandan Diagnostic Ce
#3, Shivaji Nagar, Mahmoorganj
Varanasi-221010 (U.P.)
Phone No.: 0542-2223232

Mr. SUSHIL KUMAR SINGH
Age/Sex: 45/M
Ref by:
Indication1:
Indication2:
Indication3:

ID : 87452223
Ht/Wt : 172/83
Recorded : 25/02/2023

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	II	ST LEVEL (mm) V2	V5	METS
SUPINE					84	124/80	104	0.0	0.8	1.2	
HYPERVENT	0:03	0:03			89	124/80	110	0.0	0.9	1.1	
VALSALVA					90	124/80	111	0.0	0.8	1.2	
STANDING					89	124/80	110	0.0	0.8	1.2	
STAGE 1	2:59	2:59	2.70	10.00	112	124/80	138	-0.7	0.7	0.6	4.80
STAGE 2	5:59	2:59	4.00	12.00	121	140/80	169	-1.1	0.5	0.1	7.10
STAGE 3	9:00	2:59	5.40	14.00	135	150/80	202	-1.8	0.4	-0.5	10.00
EVENT	10:19	1:18	6.70	16.00	151	150/80	226	-1.7	0.3	-1.0	11.74
STAGE 4	10:30	1:29	6.70	16.00	149	150/80	223	-1.8	0.2	-1.2	11.99
PEAK EXER	10:31	1:30			149	150/80	223	-1.9	0.2	-1.2	12.01
EVENT	0:31	0:31	0.00	0.00	141	150/80	211	-1.7	0.6	-0.7	
EVENT	1:01	1:01	0.00	0.00	124	150/80	186	-1.2	0.6	0.0	
RECOVERY	2:59	2:59	0.00	0.00	105	150/80	157	-0.9	0.2	-0.5	

RESULTS

Exercise Duration : 10:31 Minutes
Max Heart Rate : 151 bpm 86 % of target heart rate 175 bpm
Max Blood Pressure : 150/80 mmHg
Max Work Load : 12.01 METS
Reason of Termination :

IMPRESSIONS

TMT is negative for RMI

Dr. Ankit Krishna Agarwal
M.B.B.S., MD, DM
Cardiologist
Reg. No.-39794
Cardiologist

→ Baseline ECG is normal
→ No significant ST-T changes seen at peak Exercise and recovery
→ TMT is negative for RMI

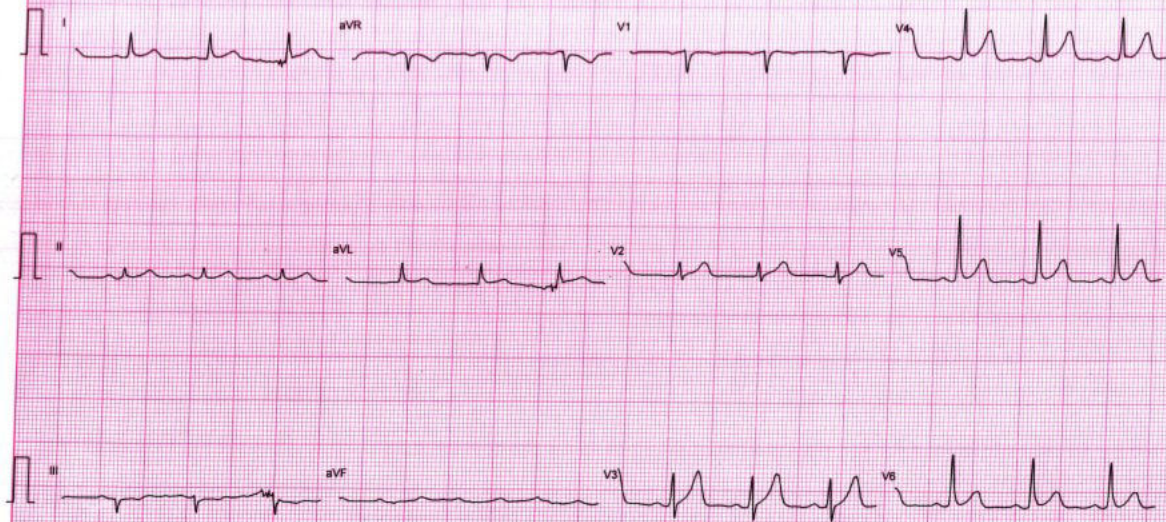
Mr. SUSHIL KUMAR SINGH
I.D. : 87452223
AGE/SEX : 45/M
RECORDED : 25/02/2023

RATE : 84 BPM
B.P. : 124/80 mmHg

SUPINE
PRETEST

ST @ 10mm/mV
80ms PostJ

RAW ECG



CHANDAN HEALTH CARE LTD.

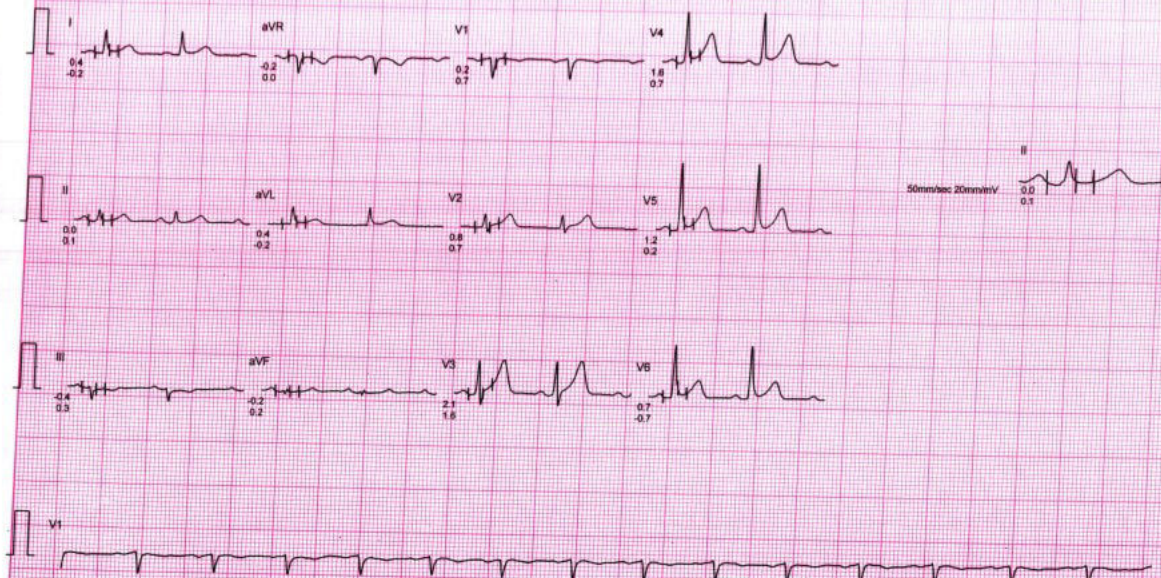
Mr. SUSHIL KUMAR SINGH
I.D. : 87452223
AGE/SEX : 45/M
RECORDED : 25/02/2023

RATE : 90 BPM
B.P. : 124/80 mmHg

VALSALVA
PRETEST

ST @ 10mm/mV
80ms PostJ

LINKED MEDIAN



Mr. SUSHIL KUMAR SINGH
I.D. : 87452223
AGE/SEX : 45/M
RECORDED : 25/02/2023

RATE : 89 BPM
B.P. : 124/80 mmHg

STANDING
PRETEST

ST @ 10mm/mV
80ms PostJ

LINKED MEDIAN



Mr. SUSHIL KUMAR SINGH
 I.D. : 87452223
 AGE/SEX : 45/M
 RECORDED : 25/02/2023

RATE : 112 BPM
 B.P. : 124/80 mmHg

BRUCE
 EXERCISE 1
 PHASE TIME : 2:59
 STAGE TIME : 2:59

ST @ 10mm/mV
 80ms PostJ
 SPEED : 2.7 Km./Hr
 GRADE : 10.0 %

LINKED MEDIAN



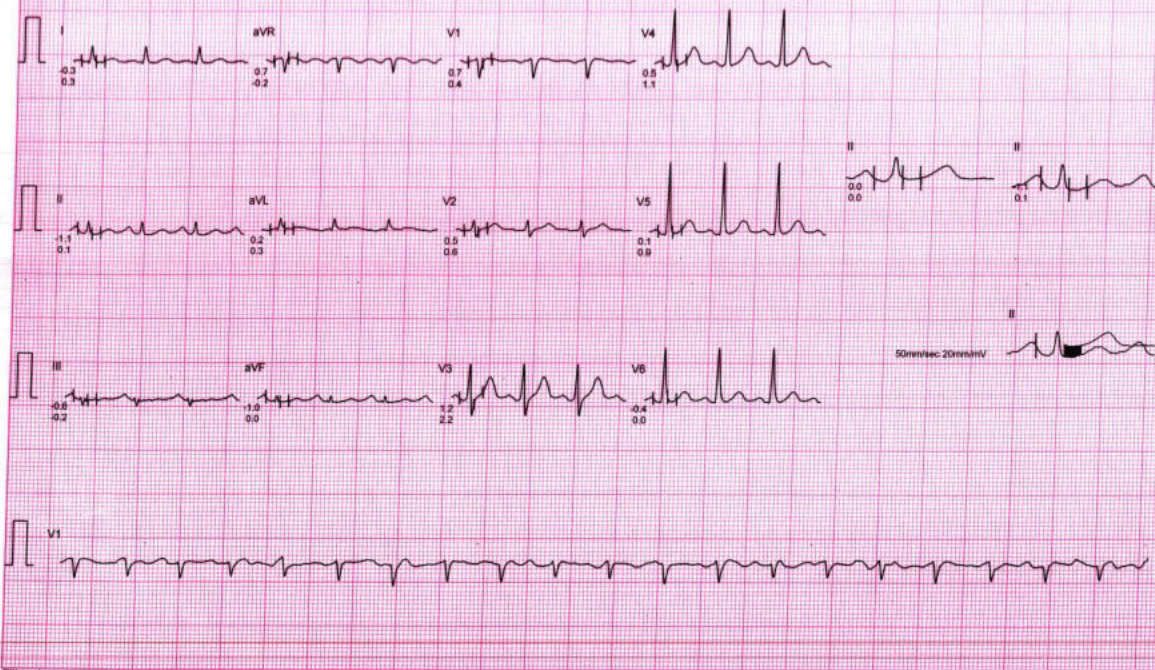
Mr. SUSHIL KUMAR SINGH
 I.D : 87452223
 AGE/SEX : 45/M
 RECORDED : 25/02/2023

RATE : 121 BPM
 B.P. : 140/80 mmHg

BRUCE
 EXERCISE 2
 PHASE TIME : 5.59
 STAGE TIME : 2.59

ST @ 10mm/mV
 80ms PostJ
 SPEED : 4.0 Km./Hr.
 GRADE : 12.0 %

LINKED MEDIAN





CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi
Ph: 9235447795, 0542-3500227
CIN : U85110DL2003PLC308206



Patient Name	: Mr. SUSHIL KUMAR SINGH -BOBE30116	Registered On	: 25/Feb/2023 08:41:38
Age/Gender	: 45 Y 0 M 0 D /M	Collected	: 25/Feb/2023 09:38:32
UHID/MR NO	: CVAR.0000035795	Received	: 25/Feb/2023 09:40:36
Visit ID	: CVAR0087452223	Reported	: 25/Feb/2023 13:15:40
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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Blood Group (ABO & Rh typing) * , Blood

Blood Group	A
Rh (Anti-D)	POSITIVE

Complete Blood Count (CBC) * , Whole Blood

Haemoglobin	12.80	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)	7,700	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils)	68.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	28.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	2.00	%	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.	<9	
PCV (HCT)	38.70	%	40-54	
Platelet count				
Platelet Count	1.50	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	4.43	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE





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Blood Indices (MCV, MCH, MCHC)				
MCV	87.30	fl	80-100	CALCULATED PARAMETER
MCH	28.80	pg	28-35	CALCULATED PARAMETER
MCHC	33.00	%	30-38	CALCULATED PARAMETER
RDW-CV	13.30	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	44.60	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	5,236.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	154.00	/cu mm	40-440	



S.N. Sinha

Dr.S.N. Sinha (MD Path)





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CIN : U85110DL2003PLC308206



Patient Name	: Mr. SUSHIL KUMAR SINGH -BOBE30116	Registered On	: 25/Feb/2023 08:41:39
Age/Gender	: 45 Y 0 M 0 D /M	Collected	: 25/Feb/2023 14:46:16
UHID/MR NO	: CVAR.0000035795	Received	: 25/Feb/2023 14:51:56
Visit ID	: CVAR0087452223	Reported	: 25/Feb/2023 15:22:54
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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GLUCOSE FASTING , Plasma

Glucose Fasting	112.60	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD
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Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- 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 diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

Glucose PP

Sample: Plasma After Meal

138.00	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD
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Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- 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 diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

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UHID/MR NO	: CVAR.0000035795	Received	: 26/Feb/2023 11:36:56
Visit ID	: CVAR0087452223	Reported	: 26/Feb/2023 13:39:48
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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GLYCOSYLATED HAEMOGLOBIN (HBA1C) **, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	6.00	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	42.00	mmol/mol/IFCC		
Estimated Average Glucose (eAG)	125	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 management.

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 1diabetics. 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.

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





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MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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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

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) Sample:Serum	9.00	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	0.90	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20-275 Female-20-320	MODIFIED JAFFES
Uric Acid Sample:Serum	9.20	mg/dl	3.4-7.0	URICASE
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	31.30	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	46.70	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	14.30	IU/L	11-50	OPTIMIZED SZAZING
Protein	7.30	gm/dl	6.2-8.0	BIRUET
Albumin	4.00	gm/dl	3.8-5.4	B.C.G.
Globulin	3.30	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.21		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	102.30	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	1.00	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.40	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.60	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) , Serum				
Cholesterol (Total)	242.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	48.90	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	112	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	81.54	mg/dl	10-33	CALCULATED
Triglycerides	407.70	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High	GPO-PAP





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

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



S.N. Sinha

Dr.S.N. Sinha (MD Path)





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

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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URINE EXAMINATION, ROUTINE * , Urine

Color	PALE YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic (6.5)			DIPSTICK
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	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	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%
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Interpretation:

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

S.N. Sinha
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UHID/MR NO	: CVAR.0000035795	Received	: 26/Feb/2023 10:25:23
Visit ID	: CVAR0087452223	Reported	: 26/Feb/2023 11:54:21
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
PSA (Prostate Specific Antigen), Total ** <i>Sample:Serum</i>	0.530	ng/mL	< 2.0	CLIA

Interpretation:

1. PSA is detected in the serum of males with normal, benign hypertrophic, and malignant prostate tissue.
2. Measurement of serum PSA levels is not recommended as a screening procedure for the diagnosis of cancer because elevated PSA levels also are observed in patients with benign prostatic hypertrophy. However, studies suggest that the measurement of PSA in conjunction with digital rectal examination (DRE) and ultrasound provide a better method of detecting prostate cancer than DRE alone.
3. PSA levels increase in men with cancer of the prostate, and after radical prostatectomy PSA levels routinely fall to the undetectable range.
4. If prostatic tissue remains after surgery or metastasis has occurred, PSA appears to be useful in detecting residual and early recurrence of tumor.
5. Therefore, serial PSA levels can help determine the success of prostatectomy, and the need for further treatment, such as radiation, endocrine or chemotherapy, and in the monitoring of the effectiveness of therapy.

THYROID PROFILE - TOTAL **, Serum

T3, Total (tri-iodothyronine)	110.32	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	8.50	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	2.40	μIU/mL	0.27 - 5.5	CLIA

Interpretation:

0.3-4.5	μIU/mL	First Trimester
0.5-4.6	μIU/mL	Second Trimester
0.8-5.2	μIU/mL	Third Trimester
0.5-8.9	μIU/mL	Adults 55-87 Years
0.7-27	μIU/mL	Premature 28-36 Week
2.3-13.2	μIU/mL	Cord Blood > 37Week
0.7-64	μIU/mL	Child(21 wk - 20 Yrs.)
1-39	μIU/mL	Child 0-4 Days
1.7-9.1	μIU/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.





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CIN : U85110DL2003PLC308206



Patient Name	: Mr. SUSHIL KUMAR SINGH -BOBE30116	Registered On	: 25/Feb/2023 08:41:40
Age/Gender	: 45 Y 0 M 0 D /M	Collected	: 25/Feb/2023 09:38:32
UHID/MR NO	: CVAR.0000035795	Received	: 26/Feb/2023 10:25:23
Visit ID	: CVAR0087452223	Reported	: 26/Feb/2023 11:54:21
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

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

Dr. Anupam Singh (MBBS MD Pathology)





CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi
Ph: 9235447795, 0542-3500227
CIN : U85110DL2003PLC308206



Patient Name	: Mr. SUSHIL KUMAR SINGH -BOBE30116	Registered On	: 25/Feb/2023 08:41:41
Age/Gender	: 45 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000035795	Received	: N/A
Visit ID	: CVAR0087452223	Reported	: 25/Feb/2023 12:15:09
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE 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)





CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi
Ph: 9235447795, 0542-3500227
CIN : U85110DL2003PLC308206



Patient Name	: Mr. SUSHIL KUMAR SINGH -BOBE30116	Registered On	: 25/Feb/2023 08:41:42
Age/Gender	: 45 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000035795	Received	: N/A
Visit ID	: CVAR0087452223	Reported	: 25/Feb/2023 09:58:57
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER)

LIVER

- The liver is normal in size **14.9 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 (**10.8 mm**) at the porta.
- Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common duct are normal (**3.1 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 (**10.6 x 3.9 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 (**11.6 x 4.8 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





CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi
Ph: 9235447795, 0542-3500227
CIN : U85110DL2003PLC308206



Patient Name	: Mr. SUSHIL KUMAR SINGH -BOBE30116	Registered On	: 25/Feb/2023 08:41:42
Age/Gender	: 45 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000035795	Received	: N/A
Visit ID	: CVAR0087452223	Reported	: 25/Feb/2023 09:58:57
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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

- The spleen is normal in size (**10.4 cm**), and has a homogenous echotexture.

ILIAC FOSSA

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

URINARY BLADDER

- Urinary bladder is partially filled. Bladder wall is normal in thickness and regular.
- **Pre-void urine volume is -449 cc.**

PROSTATE

- The prostate gland is normal in texture and size (**38 x 29 x 27 mm / 16 grams**).

IMPRESSION

- **No significant sonological abnormality is seen on this study.**

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

Result/s to Follow:

STOOL, ROUTINE 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 *
365 Days Open *Facilities Available at Select Location



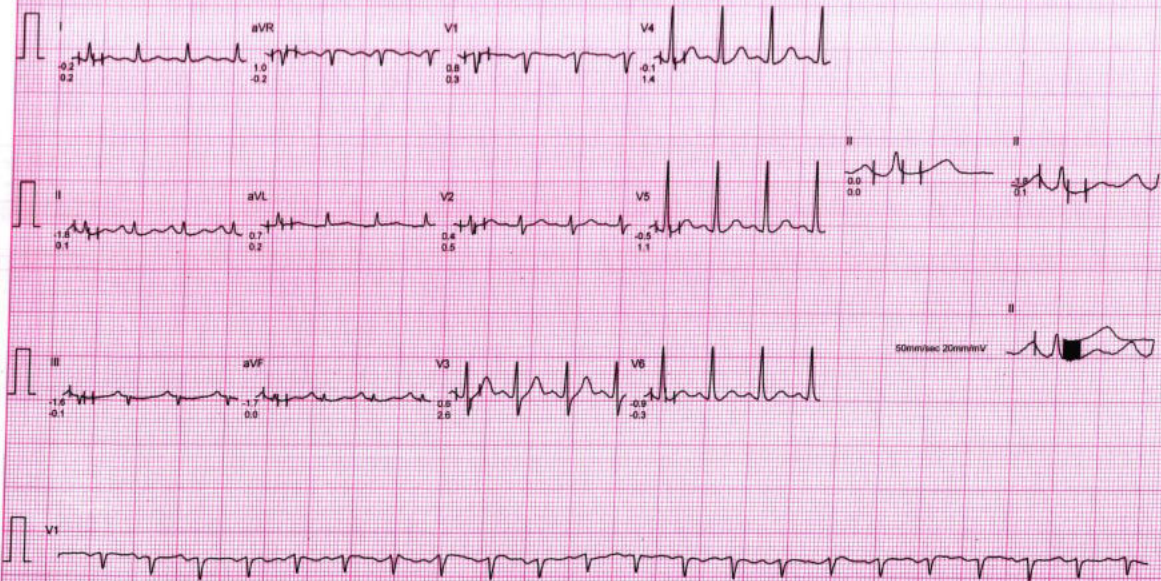
Mr. SUSHIL KUMAR SINGH
 I.D. : 87452223
 AGE/SEX : 45/M
 RECORDED : 25/02/2023

RATE : 135 BPM
 B.P. : 150/80 mmHg

BRUCE
 EXERCISE 3
 PHASE TIME : 9:00
 STAGE TIME : 2:59

ST @ 10mm/mV
 80ms PostJ
 SPEED : 5.4 Km./Hr.
 GRADE : 14.0 %

LINKED MEDIAN



Chandan Diagnostic

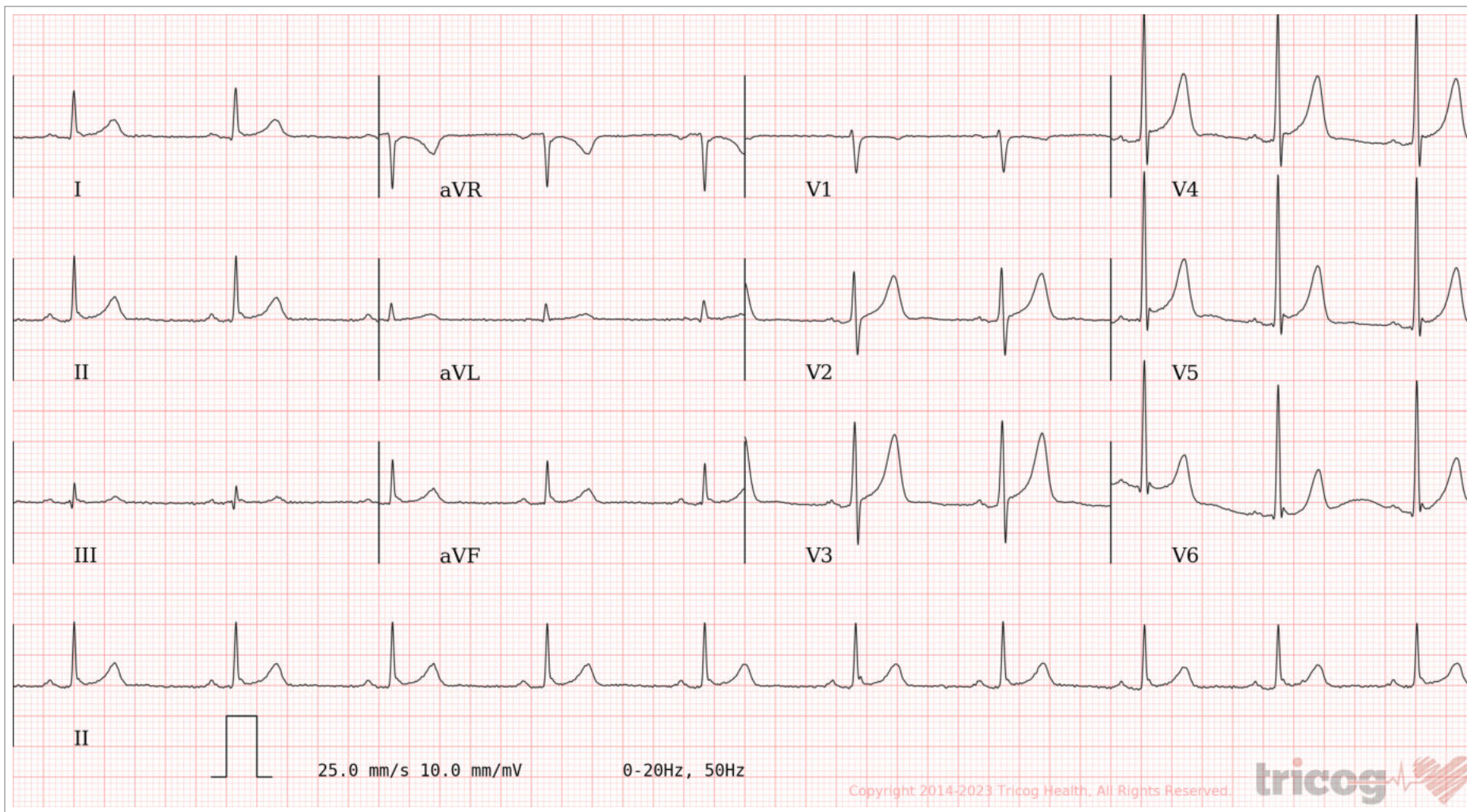
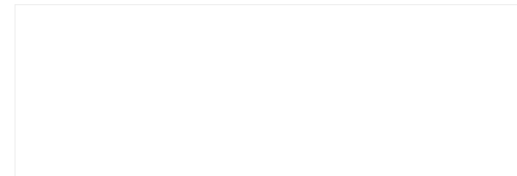


Age / Gender: 45/Male

Date and Time: 25th Feb 23 9:50 AM

Patient ID: CVAR0087452223

Patient Name: Mr. SUSHIL KUMAR SINGH -BOBE30116



AR: 61bpm VR: 61bpm QRSD: 80ms QT: 392ms QTc: 394ms PRI: 166ms P-R-T: 48° 47° 42°

ECG Within Normal Limits: Sinus Rhythm. Please correlate clinically.

AUTHORIZED BY

Dr. Charit
MD, DM: Cardiology

63382

REPORTED BY

Dr. Dinesh Gupta

2010041150

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.

Mr. SUSHIL KUMAR SINGH
I.D. : 87452223
AGE/SEX : 45/M
RECORDED : 25/02/2023

RATE : 151 BPM
B.P. : 150/80 mmHg

BRUCE
EXERCISE 4 (EVENT)
PHASE TIME : 10.19
STAGE TIME : 1.18

ST @ 10mm/mV
80ms PostJ
SPEED : 6.7 Km /Hr.
GRADE : 16.0 %

RAW ECG



CHANDAN HEALTH CARE LTD.

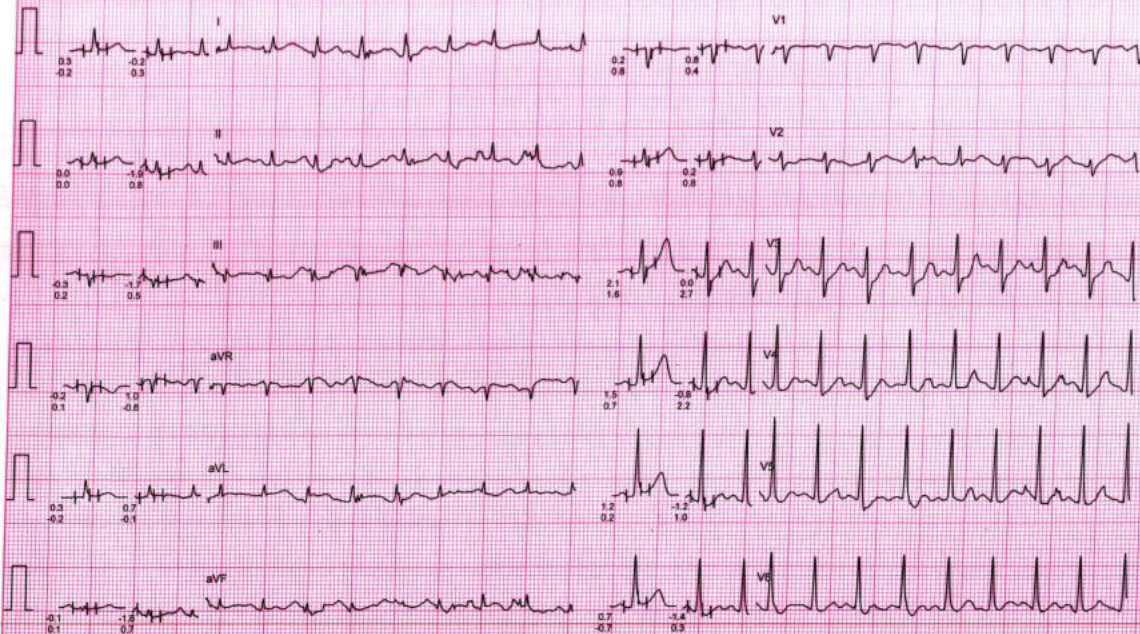
Mr. SUSHIL KUMAR SINGH
I.D. : 87452223
AGE/SEX : 45/M
RECORDED - 25/02/2023

RATE : 140 BPM
B.P. : 150/80 mmHg

BRUCE
PEAK EXER
PHASE TIME : 10:31
STAGE TIME : 1:30

ST @ 10mm/mV
80ms PostJ
SPEED : 6.7 Km./Hr
GRADE : 16.0 %

MIXED E.C.G.



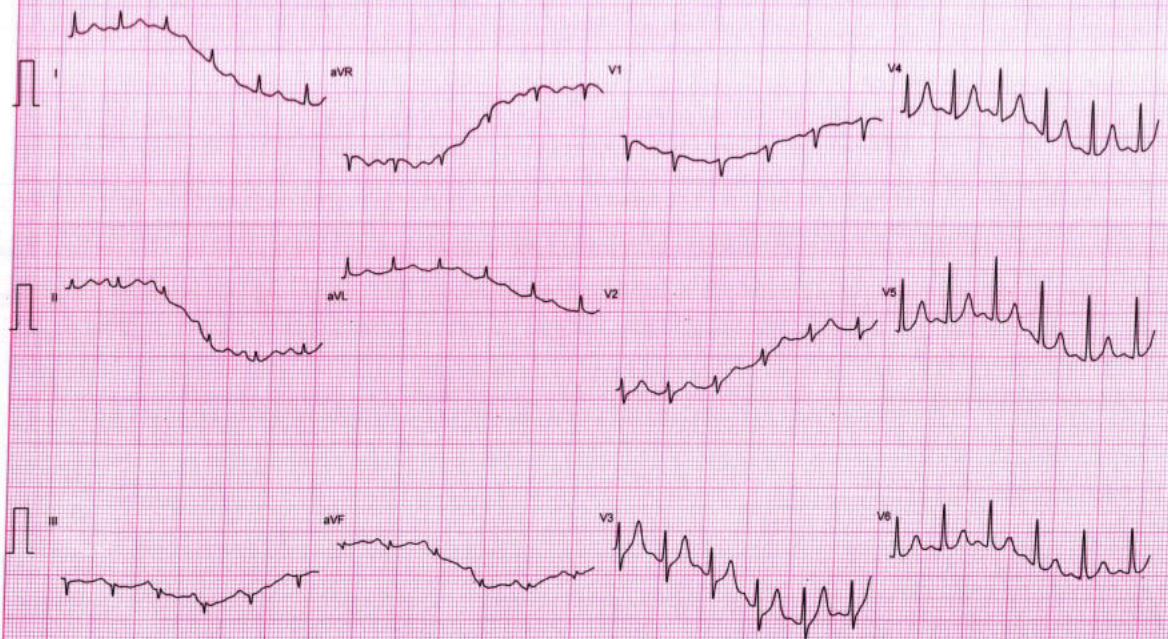
Mr. SUSHIL KUMSR SINGH
 I.D. : 87452223
 AGE/SEX : 45/M
 RECORDED : 25/02/2023

RATE : 141 BPM
 B.P. : 150/80 mmHg

BRUCE
 RECOVERY (EVENT)
 PHASE TIME : 0.31

ST @ 10mm/mV
 80ms PostJ
 SPEED : 0.0 Km /Hr
 GRADE : 0.0 %

RAW E.C.G



Mr. SUSHIL KUMAR SINGH
I.D. : 87452223
AGE/SEX : 45/M
RECORDED : 25/02/2023

RATE : 124 BPM
B.P. : 150/80 mmHg

BRUCE
RECOVERY (EVENT)
PHASE TIME : 1.01

ST @ 10mm/mV
80ms PostJ
SPEED : 0.0 Km./Hr.
GRADE : 0.0 %

RAW ECG



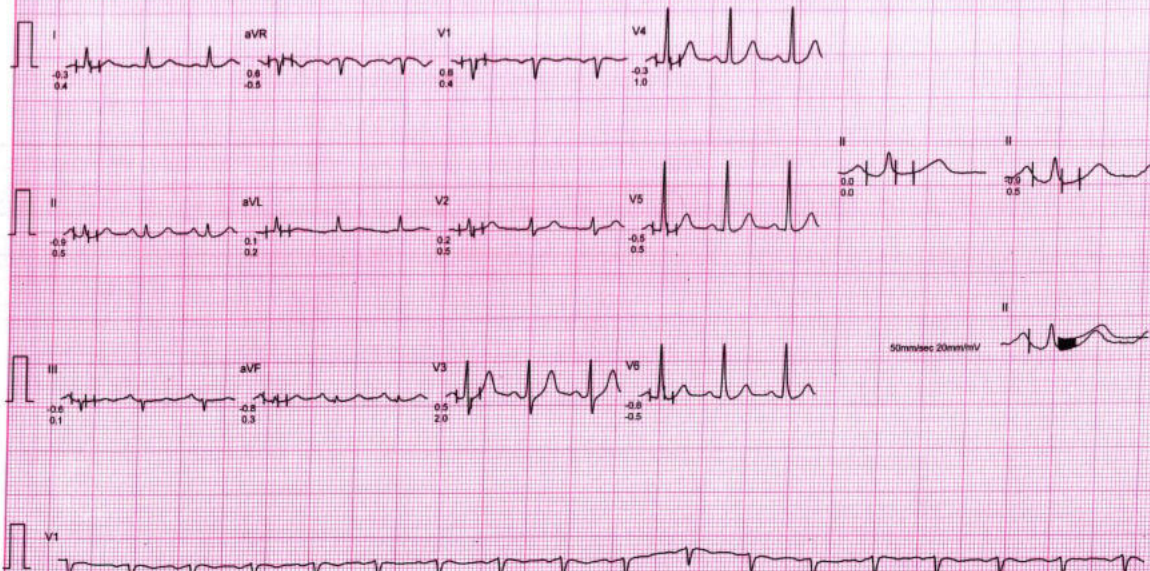
Mr. SUSHIL KUMAR SINGH
 I.D. : 87452223
 AGE/SEX : 45/M
 RECORDED : 25/02/2023

RATE : 105 BPM
 B.P. : 150/80 mmHg

BRUCE
 RECOVERY
 PHASE TIME : 2:59

ST @ 10mm/mV
 80ms Post/J
 SPEED : 0.0 Km./Hr.
 GRADE : 0.0 %

LINKED MEDIAN





भारत सरकार

Government of India



सुशील कुमार सिंह

Sushil Kumar Singh

जन्म तिथि/DOB: 15/07/1977

पुरुष/ MALE

Issue Date: 25/07/2018

9659 5947 3146

VID : 9173 9117 1791 4571

मेरा **आधार**, मेरी पहचान

Download Date: 28/05/2020



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

Latitude

25.305423°

Longitude

82.979025°

LOCAL 10:17:39

GMT 04:47:39

SATURDAY 02.25.2023

ALTITUDE 22 METER