Chandan Diagnostic



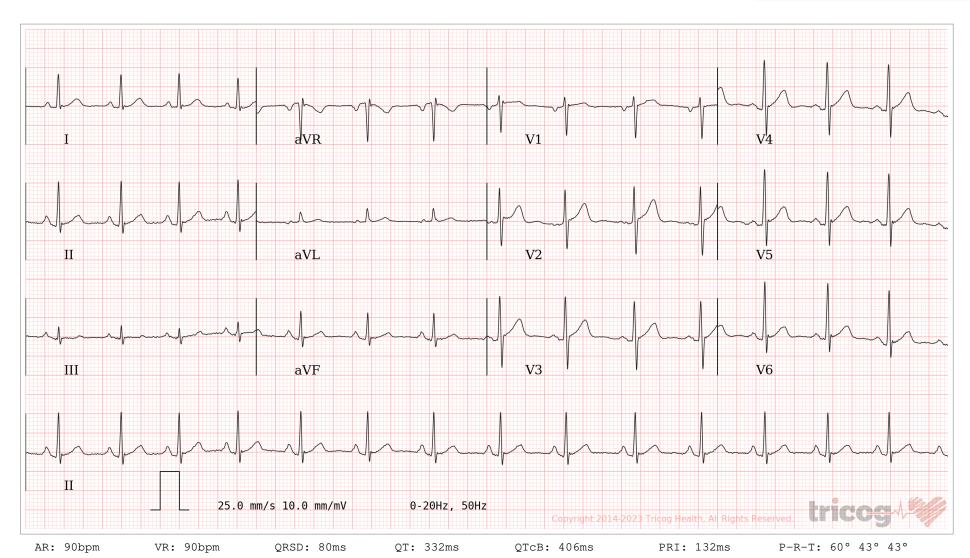
Age / Gender: 34/Male Date and Time: 25th Nov 23 9:01 AM

Patient ID:

CVAR0081162324

Patient Name:

Mr.RAKESH KUMAR - 39402



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

AUTHORIZED BY

REPORTED BY

Dr. Charit MD, DM: Cardiology

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 must be interpreted by a qualified physician.

72470





Name - Rakeph Kimay Age - 344/m Date - 25/11/23 Stool & Sugan PP Sample not Crisan by Client

Dr. R.C. ROY Chandan Diagnostic Center Reg. No.-26918

MBBS., MD. (Radio Diagnosis) 99, Shivaji Nagar, Mahmoorganj Varanasi-221010 (U.P.) Phone No.:0542-2223232







CIN: U85110DL2003PLC308206



: 25/Nov/2023 08:28:04 Patient Name : Mr.RAKESH KUMAR - 39402 Registered On Age/Gender : 34 Y 0 M 0 D /M Collected : 25/Nov/2023 10:40:01 UHID/MR NO : CVAR.0000044260 Received : 25/Nov/2023 10:45:40 Visit ID : CVAR0081162324 Reported : 25/Nov/2023 13:01:49

Ref Doctor : Dr.MEDIWHEEL VNS - 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) *	, Blood			
Blood Group	0			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
Rh (Anti-D)	POSITIVE			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
Complete Blood Count (CBC) * , w	hole Blood			
TLC (WBC)	7,300.00	g/dl /Cu mm	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 4000-10000	
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 ESR	0.00	%	<1	ELECTRONIC IMPEDANCE
Observed	10.00	Mm for 1st hr.		
Corrected	6.00	Mm for 1st hr.	<9	
PCV (HCT) Platelet count	46.20	%	40-54	
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









CIN: U85110DL2003PLC308206



: 25/Nov/2023 08:28:04 Patient Name : Mr.RAKESH KUMAR - 39402 Registered On Age/Gender : 34 Y 0 M 0 D /M Collected : 25/Nov/2023 10:40:01 UHID/MR NO : CVAR.0000044260 Received : 25/Nov/2023 10:45:40 Visit ID : CVAR0081162324 Reported : 25/Nov/2023 13:01:49 Ref Doctor : Dr.MEDIWHEEL VNS -Status : Final Report

DEPARTM ENT OF HAEM ATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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	4.95	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	93.40	fΙ	80-100	CALCULATED PARAMETER
MCH	30.80	pg	28-35	CALCULATED PARAMETER
MCHC	33.00	%	30-38	CALCULATED PARAMETER
RDW-CV	14.30	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	51.50	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	4,964.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	146.00	/cu mm	40-440	

S.N. Sinta Dr.S.N. Sinha (MD Path)











CIN: U85110DL2003PLC308206



Patient Name : Mr.RAKESH KUMAR - 39402 Registered On : 25/Nov/2023 08:28:05 Age/Gender : 34 Y 0 M 0 D /M Collected : 25/Nov/2023 13:53:18 UHID/MR NO : CVAR.0000044260 Received : 25/Nov/2023 14:07:55 Visit ID : CVAR0081162324 Reported : 25/Nov/2023 16:26:39 Ref Doctor : Dr.MEDIWHEEL VNS -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 95.00 **GOD POD** Glucose Fasting mg/dl < 100 Normal 100-125 Pre-diabetes ≥ 126 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.

Glucose PP <140 Normal **GOD POD** 121.20 mg/dl 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. Sinta Dr.S.N. Sinha (MD Path)









CIN: U85110DL2003PLC308206



Patient Name : Mr.RAKESH KUMAR - 39402 : 25/Nov/2023 08:28:06 Registered On Age/Gender : 34 Y 0 M 0 D /M Collected : 25/Nov/2023 10:40:01 UHID/MR NO : CVAR.0000044260 Received : 26/Nov/2023 13:03:54 Visit ID : CVAR0081162324 Reported : 26/Nov/2023 14:32:20 Ref Doctor : Dr.MEDIWHEEL VNS -Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

GLYCOSYLATED HABMOGLOBIN (HBA1C) **, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.10	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	32.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	99	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 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





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





UHID/MR NO

Visit ID

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



Patient Name : Mr.RAKESH KUMAR - 39402 Age/Gender : 34 Y 0 M 0 D /M

: 34 Y 0 M 0 D /M : CVAR.0000044260

: CVAR0081162324

Collected Received

: 25/Nov/2023 10:40:01 : 26/Nov/2023 13:03:54

Reported

Registered On

: 26/Nov/2023 14:32:20

: 25/Nov/2023 08:28:06

Ref Doctor : Dr.MEDIWHEEL VNS -

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)





^{*}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.





Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



Patient Name : Mr.RAKESH KUMAR - 39402 Registered On : 25/Nov/2023 08:28:06 Age/Gender : 34 Y 0 M 0 D /M Collected : 25/Nov/2023 10:40:01 UHID/MR NO : CVAR.0000044260 Received : 25/Nov/2023 10:45:40 Visit ID : CVAR0081162324 Reported : 25/Nov/2023 12:53:54 : Final Report Ref Doctor : Dr.MEDIWHEEL VNS -Status

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen)	18.60	mg/dL	7.0-23.0	CALCULATED
Sample:Serum		Si ·		
Creatinine Sample:Serum	0.80	mg/dl	0.6-1.30	MODIFIED JAFFES
Uric Acid Sample:Serum	6.30	mg/dl	3.4-7.0	URICASE
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	72.10	U/L	<35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	168.90	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	69.70	IU/L	11-50	OPTIMIZED SZAZING
Protein	8.60	gm/dl	6.2-8.0	BIURET
Albumin	4.80	gm/dl	3.4-5.4	B.C.G.
Globulin	3.80	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.26		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	116.70	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.40	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.20	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.20	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI), Serum				
Cholesterol (Total)	192.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	65.60	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	82	mg/dl	< 100 Optimal 100-129 Nr.	CALCULATED
			Optimal/Above Optima 130-159 Borderline High 160-189 High	
WDI	44.08	mc = / all	> 190 Very High	CALCIUATED
VLDL		mg/dl	10-33	CALCU' ^TED
Triglycerides	220.40	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-P S.N. Sinha (MD Path)









Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



: 25/Nov/2023 08:28:05 Patient Name : Mr.RAKESH KUMAR - 39402 Registered On Age/Gender : 34 Y 0 M 0 D /M Collected : 25/Nov/2023 10:40:01 UHID/MR NO : CVAR.0000044260 Received : 25/Nov/2023 10:45:41 Visit ID : CVAR0081162324 Reported : 25/Nov/2023 17:28:13

Ref Doctor : Dr.MEDIWHEEL VNS - 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*, U	rine			
Color	PALE YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic (6.0)			DIPSTICK
Appearance	CLEAR			Dir officia
Protein	ABSENT	mg %	< 10 Absent	DIPSTICK
1 Totali	ABSENT	1116 70	10-40 (+)	Dii STICK
			40-200 (++)	
			200-500 (+++)	
			> 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+)	DIPSTICK
			0.5-1.0 (++)	
			1-2 (+++)	
		1 1 × 1	>2 (++++)	
Ketone	ABSENT	mg/dl	0.1-3.0	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pi <mark>gments</mark>	ABSENT			
Bilirubin	ABSENT			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	2-4/h.p.f			
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			
SUGAR, FASTING STAGE*, Urine				
Sugar, Fasting stage	ABSENT	gms%		

Interpretation:









CIN: U85110DL2003PLC308206



Patient Name : Mr.RAKESH KUMAR - 39402 Age/Gender

: 34 Y 0 M 0 D /M

: CVAR.0000044260

: Dr.MEDIWHEEL VNS -

: CVAR0081162324

Received Reported

Collected

Registered On

: 25/Nov/2023 08:28:05 : 25/Nov/2023 10:40:01 : 25/Nov/2023 10:45:41

: 25/Nov/2023 17:28:13

Status : Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Unit Bio. Ref. Interval Method Result

< 0.5 (+)

UHID/MR NO

Ref Doctor

Visit ID

0.5 - 1.0(++)

(+++)1-2

(++++) > 2



S.N. Sinta

Dr.S.N. Sinha (MD Path)









CIN: U85110DL2003PLC308206



Patient Name : Mr.RAKESH KUMAR - 39402 Registered On : 25/Nov/2023 08:28:06 Age/Gender Collected : 34 Y 0 M 0 D /M : 25/Nov/2023 10:40:00 UHID/MR NO : CVAR.0000044260 Received : 26/Nov/2023 12:54:28 : 26/Nov/2023 14:54:48 Visit ID : CVAR0081162324 Reported Ref Doctor : Dr.MEDIWHEEL VNS -Status : Final Report

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)	136.62	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	8.50	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	1.570	μIU/mL	0.27 - 5.5	CLIA
Interpretation:				
		0.3-4.5 µIU/r 0.5-4.6 µIU/r 0.8-5.2 µIU/r 0.5-8.9 µIU/r 0.7-27 µIU/r 2.3-13.2 µIU/r 1-39 µIU/r 1.7-9.1 µIU/r	nL Second Trin nL Third Trime nL Adults nL Premature nL Cord Blood nL Child(21 wh /mL Child	mester ester 55-87 Years 28-36 Week > 37Week

- 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)









CIN: U85110DL2003PLC308206



Patient Name : Mr.RAKESH KUMAR - 39402 Registered On : 25/Nov/2023 08:28:08

 Age/Gender
 : 34 Y 0 M 0 D /M
 Collected
 : N/A

 UHID/MR NO
 : CVAR.0000044260
 Received
 : N/A

Visit ID : CVAR0081162324 Reported : 25/Nov/2023 16:58:49

Ref Doctor : Dr.MEDIWHEEL VNS - Status : Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 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 : Mr.RAKESH KUMAR - 39402 Registered On : 25/Nov/2023 08:28:08

 Age/Gender
 : 34 Y 0 M 0 D /M
 Collected
 : N/A

 UHID/MR NO
 : CVAR.0000044260
 Received
 : N/A

Visit ID : CVAR0081162324 Reported : 25/Nov/2023 09:54:23

Ref Doctor : Dr.MEDIWHEEL VNS - Status : Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

WHOLE ABDOM EN ULTRASONOGRAPHY REPORT

IIVFR

• The liver measures ~ 15.4 cm in middlavicular line. Mild diffuse increase in liver echogenicity seen. No focal lesion is seen. (Note: - Small isoechoic focal lesion cannot be ruled out).

PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein is (9.7 mm in caliber) not dilated.
- · Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common bile duct is (3.0 mm in caliber) not dilated.
- The gall bladder is contracted. No stone or mass seen.

PANCREAS

• The pancreas is normal in size and shape and has a normal homogenous echotexture. Pancreatic duct is not dilated.

KIDNEYS

- Right kidney:-
 - Right kidney is normal in size, measuring ~ 10.3 x 4.1 cms.
 - Cortical echogenicity is normal. Pelvicalyceal system is not dilated.
 - Cortico-medullary demarcation is maintained. Parenchymal thickness appear normal.
- Left kidney:-
 - Left kidney is normal in size, measuring ~ 10.4 x 4.1cms.
 - Cortical echogenicity is normal. Pelvicalyceal system is not dilated.
 - Cortico-medullary demarcation is maintained. Parenchymal thickness appear normal.

SPLEEN









CIN: U85110DL2003PLC308206



Patient Name : 25/Nov/2023 08:28:08 : Mr.RAKESH KUMAR - 39402 Registered On

Age/Gender : 34 Y 0 M 0 D /M Collected : N/A UHID/MR NO : CVAR.0000044260 Received : N/A

Visit ID : CVAR0081162324 Reported : 25/Nov/2023 09:54:23

Ref Doctor : Dr.MEDIWHEEL VNS -Status : Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

• The spleen is normal in size (~ 11.7 cm in its long axis) and has a normal homogenous echo-texture.

ILIAC FOSSAE & PERITONEUM

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

URINARY BLADDER

- The urinary bladder is partially filled. Bladder wall is normal in thickness and is regular.
- Pre-void urine volume is ~ 35 cc.
- Bilateral vesicoureteric junctions are normal.

PROSTATE

• The prostate gland is normal in size (~ 31 x 28 x 27 mm / 13 gms) and normal in echotexture with smooth outline. No median lobe indentation is seen.

FINAL IMPRESSION:-

- Mild grade fatty liver
- Rest of the abdominal organs are normal

Adv: Clinico-pathological-correlation /further evaluation & Follow up

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, SUGAR, PP STAGE, ECG / EKG



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 8 *Facilities Available at Select Location 365 Days Open





Page 12 of 12





CHANDAN DIAGNOSTIC CENTRE

Name of Company: Hedi wheel

Name of Executive: Raketh Kuman

Date of Birth: .0.9. / 11. / 1989

Sex: Male / Female

Weight:KGs

BMI (Body Mass Index): 26.6

Abdomen: ../0.2__.CMs

Blood Pressure: .13.0 ... / . A.O ... mm/Hg

Pulse: 8.7...... BPM - Regular / Irregular

RR:[.9...Resp/Min

Ident Mark: Cut Mank on NO&C

Any Allergies: No

Vertigo:

Any Medications:

NO

Any Surgical History: Squirt Post denated (Ledt eye) in 2007

Habits of alcoholism/smoking/tobacco:

Chief Complaints if any:

Lab Investigation Reports:

NO

Eye Check up vision & Color vision: Noumal & Power alabs - 2007 Left eye: Noumal & Power Not Confirm by Flient Right eye: Noumal

Right eye:







CHANDAN DIAGNOSTIC CENTRE

Near vision: NIL

616 E Wass Far vision:

Dental check up:

Norm cel

ENT Check up :

Noumal

Eve Checkup:

Normal

Final impression

Rakesh Certified that I examined...is presently in good health and free from any cardio-respiratory/communicable ailment, he/stre is , fit / Unfit to join any organization.

Client Signature :-

Signature of Medical Examiner

Dr. R.C. ROY MBBS.,MD. (Radio Diagnosis) Reg. No.-26918

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

Chandan Diagnostic Center 99, Shivaji Nagar, Mahmoorganj Varanasi-221010 (U.P.) Phone No.:0542-2223232

Place - VARANASI

chandan Dies - ... 99, Shivaji Nagar, Mahmoorganj Varanasi-221010 (U.P.) Phone No.:0542-2223232







राकेश कुमार Rakesh Kumar जन्म तिथि/DOB: 09/11/1989 पुरुष/ MALE

8696 1387 0120

VID: 9151 6281 8571 4697

मेरा आधार, मेरी पहचान

Ssue Date: 20/11/2012



Varanasi, Uttar Pradesh 221010, India

Latitude

25.305345°

LOCAL 09:29:43 GMT 03:59:43

Longitude

82.978991°

SATURDAY 11.25.2023 ALTITUDE 38 METER