

Sovernment of Inc

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

Latitude 25.305345°

LOCAL 09:01:08 GMT 03:31:08 Longitude 82.979028°

0

(0)

SATURDAY 09.09.2023 ALTITUDE 37 METER

## **Chandan Diagnostic**

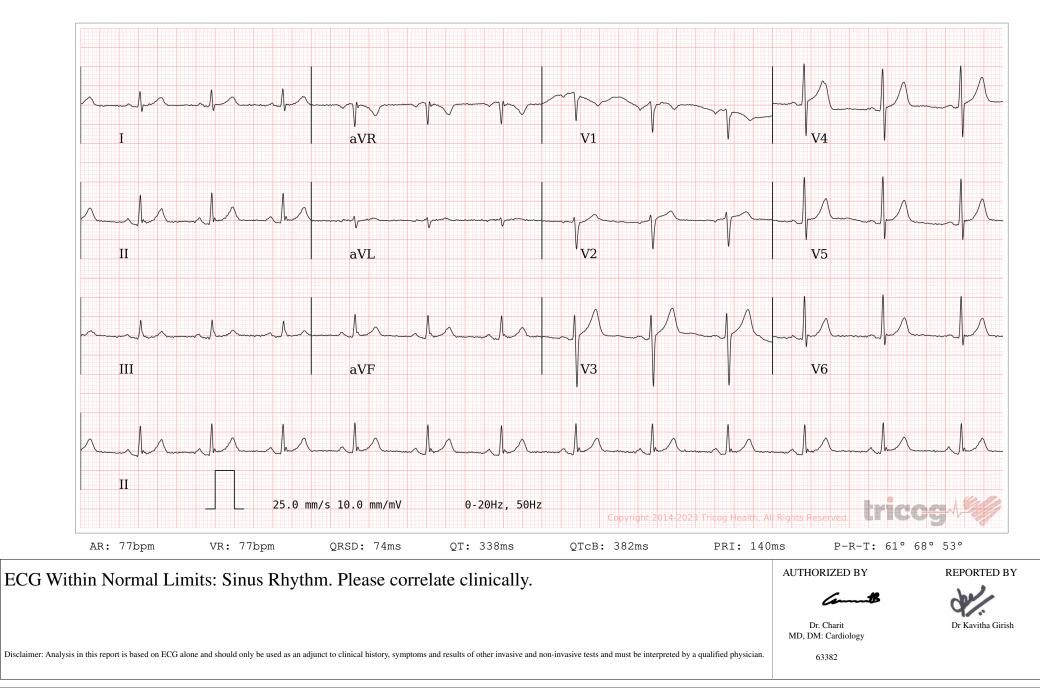


Age / Gender: 36/Male Patient ID:

Date and Time: 9th Sep 23 9:48 AM

CVAR0046722324

Patient Name: Mr.ASHUTOSH PANDEY -PKG10000238



	CHANDAN	N DIAGNOS	TIC CENT	ΓRE	
Chandan	<i>•</i>	r Mahmoorganj,Varanasi			30
	Ph: 9235447795,0542 CIN : U85110DL2002				YEARS
Since 1991	CIN : 085110DL200.	SPLC308200			Charlier
Patient Name	: Mr.ASHUTOSH PANDE	Y -PKG10000238	Registered (	On : 09/Sep/2023 0	8:04:19
-	: 36 Y 0 M 0 D /M		Collected	: 09/Sep/2023 1	
,	: CVAR.0000041043		Received	: 09/Sep/2023 1	
	: CVAR0046722324 : Dr.MEDIWHEEL VNS -		Reported	: 09/Sep/2023 1 : Final Report	3:07:57
Rel Doctor	: Dr.MEDIWHEEL VINS -		Status	-	
	MEDIWHEE	DEPARTMENT BANK OF BABOI		MALE BELOW 40 YRS	S .
Test Name		Result	Unit	Bio. Ref. Interval	Method
1 (	D& Rhtyping)*, Bloc				
Blood Group		В			ERYTHROCYTE MAGNETIZED
					TECHNOLOGY / TUBE
					AGGLUTINA
Rh ( Anti-D)		POSITIVE	,		ERYTHROCYTE
,					MAGNETIZED
					TECHNOLOGY / TUBE
					AGGLUTINA
Complete Blood C	ount (CBC) * , Whole	Blood			
Haemoglobin		12.70	g/dl	1 Day- 14.5-22.5 g/dl	
nacinogiosin		12.70	g/ ui	1 Wk- 13.5-19.5 g/dl	
			Start Start	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	
TLC (WBC)		7,600.00	/Cu mm	Female- 12.0-15.5 g/dl 4000-10000	ELECTRONIC IMPEDANCE
DLC		7,000.00	/cu mm	4000-10000	ELECTRONIC IMPEDANCE
Polymorphs (Neut	rophils )	65.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes		30.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes		3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils		2.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils		0.00	%	<1	ELECTRONIC IMPEDANCE
ESR					
Observed		20.00	Mm for 1st hr.		
Corrected		10.00	Mm for 1st hr.	<9	
PCV (HCT)		38.00	%	40-54	
Platelet count					
Platelet Count		1.50	LACS/cu mm	1.5-4.0	ELECTRONIC
					IMPEDANCE/MICROSCOPIC
PDW (Platelet Dist	ribution width)	nr	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Lar	ge Cell Ratio)	nr	%	35-60	ELECTRONIC IMPEDANCE







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



Patient Name	: Mr.ASHUTOSH PANDEY -PKG10000238	Registered On	: 09/Sep/2023 08:04:19
Age/Gender	: 36 Y 0 M 0 D /M	Collected	: 09/Sep/2023 11:03:55
UHID/MR NO	: CVAR.0000041043	Received	: 09/Sep/2023 11:11:17
Visit ID	: CVAR0046722324	Reported	: 09/Sep/2023 13:07:57
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

## DEPARTMENT 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) RBCCount	nr	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count Blood Indices (MCV, MCH, MCHC)	4.49	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
MCV	84.50	۶I	80-100	CALCULATED PARAMETER
MCH	28.20	pg	28-35	CALCULATED PARAMETER
MCHC	33.40	%	30-38	CALCULATED PARAMETER
RDW-CV	12.30	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	40.20	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	4,940.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	152.00	/cu mm	40-440	

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



Chaudan Since 1991	Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206				SINCE 1991
Patient Name	: Mr.ASHUTOSH PANDEY -PKG10000238	Registered On	: 09/Sep/2023 08	:04:19	
Age/Gender	: 36 Y 0 M 0 D /M	Collected	: 09/Sep/2023 13	:32:58	
UHID/MR NO	: CVAR.0000041043	Received	: 09/Sep/2023 13	:37:27	
Visit ID	: CVAR0046722324	Reported	: 09/Sep/2023 15	:27:03	
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report		
	DEPARTMENT	OF BIOCHEM IST	RY		
	MEDIWHEEL BANK OF BAROD	AMALE& FEMA	LE BELOW 40 YRS		
Test Name	Result	Unit	Bio. Ref. Interval	Method	

#### GLUCOSE FASTING, Plasma

Glucose Fasting	84.80	mg/dl	< 100 Normal	GOD POD
		0, -	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 Sample:Plasma After Meal	124.00	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD
			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.

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UHID/MR NO	: CVAR.0000041043	Received	: 10/Sep/2023 11:20:49
Visit ID	: CVAR0046722324	Reported	: 10/Sep/2023 12:04:05
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 HAEM OGLOBIN (HBA1C)	** , EDTA BLOOD			
Glycosylated Haemoglobin (HbA1c)	4.90	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	30.00	mmol/mol/IFCC		

mg/dl

#### Interpretation:

#### NOTE:-

Estimated Average Glucose (eAG)

- 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.

94

• 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

\*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 VARIANT II TURBO 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 non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy

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Since 1991	Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206			YEARS SINCE 1991
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Visit ID	: CVAR0046722324	Reported	: 10/Sep/2023 12:04:05	
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report	
	DEPARTMENT	OF BIOCHEMISTE	37	

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

#### DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 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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Patient Name: Mr.ASHUTOSH PANDEY -PAge/Gender: 36 Y 0 M 0 D /MUHID/MR NO: CVAR.0000041043	KG10000238	Registered On Collected	: 09/Sep/2023 08:04: : 09/Sep/2023 11:03:	
		Conected	: 09/Seb/2023 11:03:	
		Received	: 09/Sep/2023 11:11:	
Visit ID : CVAR0046722324		Reported	: 09/Sep/2023 12:54:	
Ref Doctor : Dr.MEDIWHEEL VNS -		Status	: Final Report	
C	EPARTMENT C	FBIOCHEMIST	RY	
M EDIWHEEL BAI	NK OF BARODA	MALE & FEMA	LE BELOW 40 YRS	
Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) Sample:Serum	9.80	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	1.00	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20-275 Female-20-320	MODIFIED JAFFES
Uric Acid	6.80	mg/dl	3.4-7.0	URICASE
Sample:Serum				
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	18.90	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	12.80	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	16.10	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.40	gm/dl	6.2-8.0	BIURET
Albumin	4.10	gm/dl	3.4-5.4	B.C.G.
Globulin	2.30	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.78		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	66.40	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.90	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.40	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.50	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI), Serum				
Cholesterol (Total)	120.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	33.60	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	74	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal	
		بر ۱	130-159 Borderline High 160-189 High > 190 Very High	
VLDL	12.40	mg/dl	10-33	CALCULATED
Triglycerides	62.00	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP





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Age/Gender	: 36 Y 0 M 0 D /M	Collected	: 09/Sep/2023 11:03:55
UHID/MR NO	: CVAR.0000041043	Received	: 09/Sep/2023 11:11:18
Visit ID	: CVAR0046722324	Reported	: 09/Sep/2023 12:54:19
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report
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## DEPARTMENT OF BIOCHEMISTRY

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

Test Name

Result

Unit

Method

Bio. Ref. Interval

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

ISO 9001:2015

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Chaudan Since 1991	CHANDAN I Add: 99, Shivaji Nagar M Ph: 9235447795,0542-35 CIN : U85110DL2003PL	ahmoorganj,Varanasi 00227	TIC CENTR	Ε	SINCE 1987
Patient Name	: Mr.ASHUTOSH PANDEY -	PKG10000238	Registered On	: 09/Sep/2023 0	
Age/Gender	: 36 Y 0 M 0 D /M		Collected	: 09/Sep/2023 1	
UHID/MR NO	: CVAR.0000041043		Received	: 09/Sep/2023 1 : 09/Sep/2023 1	
Visit ID Ref Doctor	: CVAR0046722324 : Dr.MEDIWHEEL VNS -		Reported Status	: Final Report	0:37:07
	DE	PARTMENT OF C	LINICAL PATHC	LOGY	
	M EDIWHEEL BA	ANK OF BARODA	AMALE & FEMA	LE BELOW 40 YRS	6
Test Name		Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINA Color Specific Gravity Reaction PH Protein	TION, ROUTINE* , Urine	LIGHT YELLOW 1.030 Acidic ( 6.5 ) ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++)	DIPSTICK DIPSTICK
C		ADCENT		> 500 (++++)	DIDCTICK
Sugar		ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone		ABSENT	mg/dl	0.1-3.0	BIOCHEMISTRY
Bile Salts		ABSENT			
Bile Pigments		ABSENT			
Urobilinogen(1:2	0 dilution)	ABSENT			
Microscopic Exan				State States	
Epithelial cells	A CARLE	2-3/h.p.f			MICROSCOPIC
		2-3/11.p.1			EXAMINATION
Pus cells	4	0-1/h.p.f			
RBCs		ABSENT			MICROSCOPIC
					EXAMINATION
Cast		ABSENT			
Crystals		ABSENT			MICROSCOPIC
					EXAMINATION
Others		ABSENT			
SUGAR, FASTING	STAGE*, Urine				
Sugar, Fasting sta		ABSENT	gms%		
	2~	ADJENT	8113/0		
<b>T</b>					
Interpretation:					
(+) < 0.5					S.n. Sinta
(++) 0.5-1.0					
(+++) 1-2					Dr.S.N. Sinha (MD Path)

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(++++) > 2

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Since 1991



Patient Name	: Mr.ASHUTOSH PANDEY -PKG10000238	Registered On	: 09/Sep/2023 08:04:20
Age/Gender	: 36 Y 0 M 0 D /M	Collected	: 09/Sep/2023 11:03:55
UHID/MR NO	: CVAR.0000041043	Received	: 09/Sep/2023 18:23:23
Visit ID	: CVAR0046722324	Reported	: 10/Sep/2023 11:09:46
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

CHANDAN DIAGNOSTIC CENTRE

#### 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)	136.00	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	4.26	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	2.06	µIU/mL	0.27 - 5.5	CLIA
		9		
Interpretation:				
		0.3-4.5 μIU/		
		0.5-4.6 μIU/	mL Second Trimest	er

0.8-5.2

0.5-8.9

0.7-27

0.7 - 64

1-39

1.7-9.1

µIU/mL

µIU/mL

µIU/mL

µIU/mL

µIU/mL

µIU/mL

2.3-13.2 µIU/mL

Third Trimester

Child(21 wk - 20 Yrs.)

55-87 Years

0-4 Days

2-20 Week

28-36 Week

> 37Week

Adults

Child

Child

Premature

Cord Blood

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

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.

S.n. Sinta

Dr.S.N. Sinha (MD Path)





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Patient Name	: Mr.ASHUTOSH PANDEY -PKG10000238	Registered On	: 09/Sep/2023 08:04:21
Age/Gender	: 36 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000041043	Received	: N/A
Visit ID	: CVAR0046722324	Reported	: 09/Sep/2023 15:47:11
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)

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

## DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

## ULTRASOUND WHOLE ABDOM EN (UPPER & LOWER) \*

# WHOLE ABDOM EN ULTRASONOGRAPHY REPORT

# LIVER

• The liver is normal in size (13.0 cm in midclavicular line) and has a normal homogenous echo texture. 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 (11.3 mm in caliber) not dilated.
- Porta hepatis is normal.

# BILLARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common bile duct is (3.4 mm in caliber) not dilated.
- The gall bladder is normal in size and has regular walls. Lumen of the gall bladder is anechoic.

# 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 ~ 11.0 x 3.2 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 ~ 10.1 x 3.6 cms.
  - Cortical echogenicity is normal. Pelvicalyceal system is not dilated.
  - Cortico-medullary demarcation is maintained. Parenchymal thickness appear normal.



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



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## DEPARTMENT OF ULTRASOUND

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

# SPLEEN

• The spleen is normal in size (~ 8.9 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 ~ 62 cc.
- Bilateral vesicoureteric junctions are normal.

## PROSTATE

• The prostate gland is normal in size (~ 27x 22 x 20 mm / 7 gms) and normal in echotexture with smooth outline. No median lobe indentation is seen.

# FINAL IM PRESSION:-

• No significant sonological abnormality noted.

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

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

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

Result/s to Follow:

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 \* *365 Days Open* 

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# Clander HANDAN DIAGNOSTIC CENTRE



Name of Company: Bank of Barody Name of Executive: MM Ashy toph Pandey Sex: Male / Female BMI (Body Mass Index): 22-) Chest (Expiration / Inspiration) Abdomen: ......G. .......CMs RR: .....Resp/Min Ident Mark: (4) Mank on Forchead Any Allergies: No Vertigo : NO Any Medications: NO Any Surgical History: NO Habits of alcoholism/smoking/tobacco: 00 Chief Complaints if any: NO Lab Investigation Reports: NO Eye Check up vision & Color vision: Norma Left eye: Nona Right eye: aloumal





CHANDAN DIAGNOSTIC CENTRE	2
Near vision: A/6	
Far vision : 6/6	
Dental check up : Normal	
ENT Check up : Noumal	
Eye Checkup: Noumal	
Final impression	
Certified that I examined. Athyfolsh landey 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 of Medical Examiner Name & Qualification - Dr. R. C. Roy (MBBS,MD) Place - VARANASI

> Ihandan Diagnostic Cente 99, Shivaji Nagar, Mahmoorgany Varanasi-221010 (U.P.) Phone No.:0542-2223232



Home Sample Collection 08069366666

Dr. R.C. ROY MBBS., MD. (Radio Diagnosis)

Reg. No.-26918