



### GENERAL PHYSICAL EXAMINATION

NAME OF COMPANY.....Bank of Baroda ..... DATE 09-10-2021  
 CLIENT NAME.....Ayush Tashi ..... s/o, d/o Chandor Mahan Joshi  
 DATE OF BIRTH 22-02-1993 AGE 23 YEARS.....  
 ADDRESS...BHAWNA NAI COTTAGE SHIMLA HIMACHAL PARDESH  
 PHONE NO. 8699620993 .. OCCUPATION Banker.....  
 PHOTO ID....ADHAR CARD NO. 7638 0012 7808.....  
 MARITAL STATUS...m. married  
 MARK OF IDENTIFICATION....Male on face head left side  
 HEIGHT.....67 cm WEIGHT.....61 kg BMI.....21.9.....  
 CHEST EXP.....90 cm CHEST INS.....91 cm ABDOMEN.....78 cm  
 WAIST.....86 cm HIP.....90 cm  
 BLOOD PRESSURE.....100/110/74 PULSE RATE.....76/min Regardz.  
 RESPIRATION RATE.....16/m

FAILMY HISORY	AGE OF LIVING	AGE AT DEATH	STATUS	YEAR
FATHER	64		Good	
MOTHER	61		Good	
BROTHER	24		Good	
SISTER				
WIFE/HUSBAND		NA		
DEFORMITIES		NO		
POLIO	YES/NO	✓	IF YES GIVE DETAILS	
PARALYSIS	YES/NO	✓	IF YES GIVE DETAILS	





## HISTORY OF CLIENT

Since 1991 TAKING MEDICINE

EYE VISION

DENTAL CHECKUP

BLOOD PRESSURE

DIABETES

THYROID

### SURGERY

GALL BLADDER

APPENDIX

HARNIA

HYDROCLE

CATRACT

OPEN HEART SURGERY

BY PASS SURGERY

ANGIOGRAPHY

PILES

FISTULA

ACCIDENT

UTERUS

## IF YES , GIVE DETAILS

YES/NO ✓ R-0.75, L-0.25

YES/NO ✓

## HABITS

## IF YES, GIVE DETAILS

SMOKING

YES/NO ✓

ALCOHOL

YES/NO ✓

PAN MASALA

YES/NO ✓

NUMBER OF CHILD.....

*N/A*

DATE OF BIRTH OF LAST BABY.....

I am giving my blood sample empty stomach

YES/NO ✓

URINE sample

YES/NO ✓

ECG

YES/NO ✓

## FINAL IMPRESSION:

Certified that I examined that AYUSHI JOSHI.....s/o...MONALI JOSHI.....is presently in good health and free from any cardio-respiratory/ communicable ailment and in my opinion, he is **fit** / **unfit** to join any organization.

*Navneet*  
Dr. NAVNEET KUMAR  
M.B.B.S.  
Reg.- UMC-7523

Signature of Medical Examiner  
Name & Qualification of the medical examiner



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**1800-419-0002**

# CHANDAN DIAGNOSTIC CENTRE



Add: Opp. Vishal Megamart, Nainital Road, Haldwani  
Ph: 9235400975  
CIN : U85110DL2003PLC308206



Patient Name	: Miss.AYUSHI JOSHI 128118	Registered On	: 09/Oct/2021 11:18:48
Age/Gender	: 28 Y 7 M 16 D /F	Collected	: 09/Oct/2021 11:27:43
UHID/MR NO	: CHLD.0000071658	Received	: 09/Oct/2021 12:08:11
Visit ID	: CHLD0072522122	Reported	: 09/Oct/2021 16:35:19
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) \* , Blood

Blood Group	AB
Rh ( Anti-D)	POSITIVE

#### COMPLETE BLOOD COUNT (CBC) \* , Blood

Haemoglobin	11.40	g/dl	13.5-17.5	PHOTOMETRIC
TLC (WBC)	6,810.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE

#### DLC

Polymorphs (Neutrophils )	64.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	34.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	1.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	1.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE

#### ESR

Observed	30.00	Mm for 1st hr.
Corrected	18.00	Mm for 1st hr. < 20
PCV (HCT)	36.00	cc % 40-54

#### Platelet count

Platelet Count	2.70	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE
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PDW (Platelet Distribution width)	16.10	fL	9-17	ELECTRONIC IMPEDANCE
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P-LCR (Platelet Large Cell Ratio)	43.80	%	35-60	ELECTRONIC IMPEDANCE
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PCT (Platelet Hematocrit)	0.28	%	0.108-0.282	ELECTRONIC IMPEDANCE
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MPV (Mean Platelet Volume)	12.00	fL	6.5-12.0	ELECTRONIC IMPEDANCE
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#### RBC Count

RBC Count	4.30	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE
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Page 1 of 13  
1800-419-0002



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## DEPARTMENT OF HAEMATOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>Blood Indices (MCV, MCH, MCHC)</b>				
MCV	89.30	fL	80-100	CALCULATED PARAMETER
MCH	26.40	pg	28-35	CALCULATED PARAMETER
MCHC	30.00	%	30-38	CALCULATED PARAMETER
RDW-CV	13.30	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	43.10	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	4,358.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	68.00	/cu mm	40-440	



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Dr. Sakshi Garg Tewari (MBBS, MD  
Pathology PDCC Oncopathology)



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Home Sample Collection  
Page 2 of 13  
1800-419-0002



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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 Sample:Plasma	93.81	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD

**Interpretation:**

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impaired Glucose Tolerance.

Glucose PP Sample:Plasma After Meal	112.30	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD
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**Interpretation:**

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impaired Glucose Tolerance.



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Dr. Vinod Ojha  
MD Pathologist
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## DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLYCOSYLATED HAEMOGLOBIN (HbA1C) ** , EDTA BLOOD				

#### GLYCOSYLATED HAEMOGLOBIN (HbA1C) \*\* , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.10	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	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 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 1 diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.

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## DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method

#### 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
- 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.



Chandan Diagnostic Centre  
Plot No.-1051, Near Chaudhary Kothi  
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Dr. Anupam Singh  
M.B.B.S, M.D. (Pathology)



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Home Sample Collection  
Page 5 of 13  
1800-419-0002



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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) *	11.29	mg/dL	7.0-23.0	CALCULATED
Sample: Serum				
Creatinine	0.87	mg/dl	0.5-1.2	MODIFIED JAFFES
Sample: Serum				
e-GFR (Estimated Glomerular Filtration Rate)	89.00	ml/min/1.73m <sup>2</sup>	90-120 Normal - 60-89 Near Normal	CALCULATED
Sample: Serum				
Uric Acid	4.05	mg/dl	2.5-6.0	URICASE
Sample: Serum				
L.F.T.(WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	29.64	U/L	< 35	IFCC WITHOUT PSP
SGPT / Alanine Aminotransferase (ALT)	28.96	U/L	< 40	IFCC WITHOUT PSP
Gamma GT (GGT)	15.20	IU/L	11-50	OPTIMIZED SZAZING
Protein	7.84	gm/dl	6.2-8.0	BIRUET
Albumin	4.52	gm/dl	3.8-5.4	B.C.G.
Globulin	3.32	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.36		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	76.10	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.50	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.24	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.26	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE ( MINI ) * , Serum				
Cholesterol (Total)	201.23	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	48.10	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	135	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	17.82	mg/dl	10-33	CALCULATED
Triglycerides	89.10	mg/dl	< 150 Normal 150-199 Borderline High	GPO-PAP

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 Page 6 of 13  
 1800-419-0002

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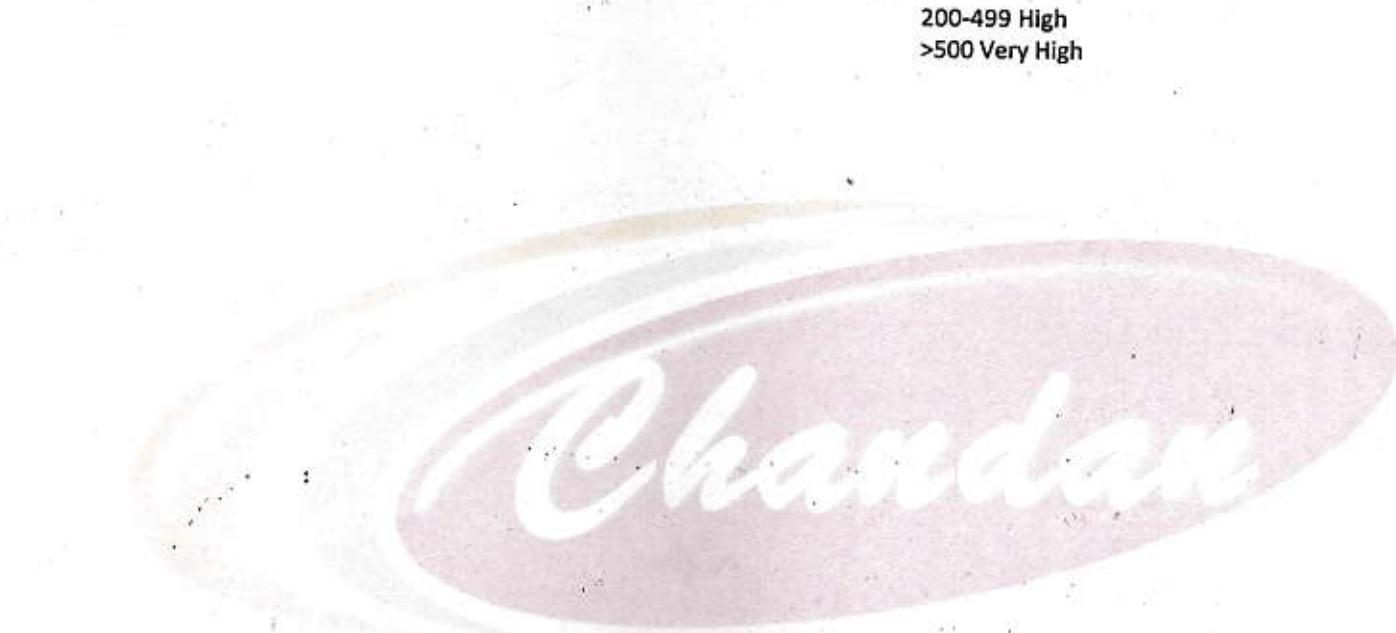


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## DEPARTMENT OF BIOCHEMISTRY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
			200-499 High >500 Very High	



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Home Sample Collection  
Page 7 of 13  
1800-419-0002



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## DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method

#### URINE EXAMINATION, ROUTINE \* , Urine

Color	PALE YELLOW			
Specific Gravity	1.005			
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			DIPSTICK
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
<b>Microscopic Examination:</b>				
Epithelial cells	OCCASIONAL			MICROSCOPIC EXAMINATION
Pus cells	OCCASIONAL			MICROSCOPIC EXAMINATION
RBCs	OCCASIONAL			MICROSCOPIC EXAMINATION
Cast	NIL			
Crystals	NIL			MICROSCOPIC EXAMINATION
Others	NIL			

#### SUGAR, FASTING STAGE \* , Urine

Sugar, Fasting stage	ABSENT	gms%
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#### Interpretation:

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

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Page 8 of 13  
1800-419-0002

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## DEPARTMENT OF CLINICAL PATHOLOGY

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
SUGAR, PP STAGE * , Urine	ABSENT			

#### SUGAR, PP STAGE \* , Urine

Sugar, PP Stage ABSENT

#### Interpretation:

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

**Chandan Diagnostic Centre**Dr Vinod Ojha  
MD PathologistCustomer Care No.: 0522-6666600 E-mail: [customerservice.diagnostic@chandan.co.in](mailto:customerservice.diagnostic@chandan.co.in) Web: [www.chandan.co.in](http://www.chandan.co.in)Home Sample Collection  
Page 9 of 13  
**1800-419-0002**



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## 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)	150.20	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	8.00	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	1.36	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.
- 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.



Chandan Diagnostic Centre  
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Nainital Road, HALDWANI  
Cont. No.: 9235400975

  
Dr. Vinod Ojha  
MD Pathologist


Customer Care No.: 0522-6666600 E-mail: customercare.diagnostic@chandan.co.in Web: www.chandan.co.in

  
Page 10 of 11  
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# CHANDAN DIAGNOSTIC CENTRE

Add: Opp. Vishal Megamart, Nainital Road, Haldwani  
 Ph.: 9235400975  
 CIN : U85110DL2003PLC308206



Patient Name	: Miss. AYUSHI JOSHI 128118	Registered On	: 09/Oct/2021 11:18:49
Age/Gender	: 28 Y 7 M 16 D /F	Collected	: N/A
UHID/MR NO	: CHLD.0000071658	Received	: N/A
Visit ID	: CHLD0072522122	Reported	: 10/Oct/2021 13:26:18
Ref Doctor	: Dr. Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

### X-RAY DIGITAL CHEST PA \*\*

**(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)**

### DIGITAL CHEST P-A VIEW:-

- Trachea is central in position
- Bilateral hilar shadows are normal
- Bilateral lung fields appear grossly unremarkable.
- Pulmonary vascularity & distribution are normal.
- Cardiac size & contours are normal.
- Costo-phrenic angles are bilaterally clear.
- Diaphragmatic shadows are normal on both sides.
- Bony cage is normal.
- Soft tissue shadow appears normal.

**IMPRESSION:- NORMAL SKIAGRAM IN PRESENT SCAN.**

(Adv: - Clinico-pathological correlation and further evaluation).



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Dr. Mehta Tayal (Md Radiologist)  
 (PGC Interventional Radiologist)  
 Formerly at : AMRI RESidency,  
 AMRI DEHRADUN,  
 21st HALDWAANI



Customer Care No.: 0522-6666600 E-mail: [customerservice@chandan.co.in](mailto:customerservice@chandan.co.in) Web: [www.chandan.co.in](http://www.chandan.co.in)

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 Page 11 of 13  
 1800-419-0002

Page 11 of 13



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Visit ID	: CHLD0072522122	Reported	: 10/Oct/2021 12:36:55
Ref Doctor	: Dr.Mediwheel - Arcoferni Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF ULTRASOUND

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

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

#### WHOLE ABDOMEN ULTRASONOGRAPHY REPORT

##### LIVER

- The liver is normal in size (~15.2 cms in longitudinal span) 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 not dilated.
- Porta hepatis is normal.

##### BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common bile duct is 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 ~9.4x3.2 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 ~9.4x5.6 cms.
  - Cortical echogenicity is normal.
  - Pelvicalyceal system is not dilated.
  - Cortico-medullary demarcation is maintained.
  - Parenchymal thickness appear normal.

##### SPLEEN

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Home Sample Collection  
Page 12 of 13  
1800-419-0002



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## DEPARTMENT OF ULTRASOUND

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

- The spleen is normal in size (~9.2 cms) and has a normal homogenous echo-texture.

#### ILIAC FOSSAE & PERITONEUM

- Scan over the iliac fossae does not reveal any fluid collection or large mass.
- No free fluid is noted in peritoneal cavity.

#### URETERS

- The upper parts of both the ureters are normal.
- Bilateral vesicoureteric junctions are normal.

#### URINARY BLADDER

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

#### UTERUS & CERVIX

- The uterus is normal in size and anteverted, its measuring ~3.3x4.3x9.1 cms.
- It has a homogenous myometrial echotexture.
- The endometrial echo is in midline and measuring ~7.1 mm.

#### ADNEXA & OVARIES

- Adnexa are normal.
- Right ovary is normal in size and echotexture, measuring ~3.2x1.6 cms.
- Left ovary is normal in size and echotexture, measuring ~3.2x1.4 cms.
- No pelvic mass cyst or collection is seen.

#### FINAL IMPRESSION:-

*No significant sonological abnormality is noted*

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

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

(\*) Test not done under NABL accredited Scope, (\*\*) Test Performed at Chandan Speciality Lab.

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG



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Nainital Road, HAL DWANI  
Mobile: +91-98364 0075

Dr. Navneet Kumar (MD Radiodiagnosis)

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 \*  
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\*Facilities Available at Select Location



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