

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



Patient Name	: Mr.MD HADISH - BOBE166944	Registered On	: 04/Dec/2022 10:43:57
Age/Gender	: 40 Y 0 M 0 D /M	Collected	: 04/Dec/2022 11:31:03
UHID/MR NO	: CVAR.0000033929	Received	: 04/Dec/2022 11:33:31
Visit ID	: CVAR0067272223	Reported	: 04/Dec/2022 12:29:09
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. Interv	al Method
Complete Blood Count (CBC) * , Who	le Blood			
Haemoglobin	14.80	g/dl	1 Day- 14.5-22.5 g, 1 Wk- 13.5-19.5 g/ 1 Mo- 10.0-18.0 g/ 3-6 Mo- 9.5-13.5 g 0.5-2 Yr- 10.5-13.5 g/dl	′dl /dl ;/dl
			2-6 Yr- 11.5-15.5 g	///
			6-12 Yr- 11.5-15.5 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/ Female- 12.0-15.5	g/dl /dl
TLC (WBC)	5,600.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils )	60.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	35.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	3.00	%	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) <b>Platelet count</b>	42.90	%	40-54	
Platelet Count	2.5	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 Blood Indices (MCV, MCH, MCHC)	4.89	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
MCV	87.80	fl	80-100	CALCULATED PARAMETER
МСН	30.20	pg	28-35	CALCULATED PARAMETER
МСНС	34.40	%	30-38	CALCULATED PARAMETER



Customer Care No.: +91-9918300637 E-mail: customercare.diagnostic@chandan.co.in Web.: www.chandan.co.in





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# **DEPARTMENT OF HAEMATOLOGY**

# MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
RDW-CV	12.50	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	41.50	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,360.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	112.00	/cu mm	40-440	





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UHID/MR NO	: CVAR.0000033929	Received	: 04/Dec/2022 15:10:11
Visit ID	: CVAR0067272223	Reported	: 04/Dec/2022 15:10:55
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
GLUCOSE FASTING , Plasma				
Glucose Fasting	93.20	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 = Impared Glucose Tolerance.

Glucose PP	119.20	mg/dl	<140 Normal	GOD POD
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. Sinda Dr.S.N. Sinha (MD Path)





SIN No:53272835

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#### **DEPARTMENT OF BIOCHEMISTRY**

#### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLYCOSYLATED HAEMOGLOBIN (HBA1C)	** . EDTA BLOOD			
Glycosylated Haemoglobin (HbA1c)	5.30	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	34.00	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.

105

• 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 G8 90 SL TOSOH 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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#### **DEPARTMENT OF BIOCHEMISTRY**

# MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

rest Name Result Onit Bio. Ref. Interval Miethod	Test Name Re	Result L	Unit E	Bio. Ref. Interval	Method
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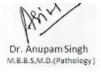
c. Alcohol toxicity d. Lead toxicity

\*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.









SIN No:53272835







Patient Name

Age/Gender

CHANDAN DIAGNOSTIC CENTRE

Registered On

Collected

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: Mr.MD HADISH - BOBE166944

:40Y0M0D/M



: 04/Dec/2022 10:43:58

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Age/dender: 40 F0 H 0 D /HUHID/MR NO: CVAR.0000033929Visit ID: CVAR0067272223Ref Doctor: Dr.Mediwheel - Arcofem	ni Health Care Ltd.	Received Reported Status	: 04/Dec/2022 11:3 : 04/Dec/2022 11:3 : 04/Dec/2022 12:2 : Final Report	33:31
	DEPARTMENT C			
Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) Sample:Serum	7.90	mg/dL	7.0-23.0	CALCULATED
<b>Creatinine</b> Sample:Serum	1.00	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20- 275 Female-20-320	MODIFIED JAFFES
Uric Acid	6.90	mg/dl	3.4-7.0	URICASE
Sample:Serum				
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	28.20	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	29.40	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	27.20	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.80	gm/dl	6.2-8.0	BIRUET
Albumin	3.90	gm/dl	3.8-5.4	B.C.G.
Globulin	2.90	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.34		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	70.90	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.80	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.20	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.60	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE ( MINI ) , Serum				
Cholesterol (Total)	192.00	mg/dl	<200 Desirable 200-239 Borderline Hi > 240 High	CHOD-PAP gh
HDL Cholesterol (Good Cholesterol)	45.20	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	96	mg/dl	< 100 Optimal 100-129 Nr.	CALCULATED
		ж , т , т	Optimal/Above Optim 130-159 Borderline Hi 160-189 High > 190 Very High	
VLDL	50.46	mg/dl	10-33	CALCULATED
Triglycerides	252.30	mg/dl	< 150 Normal	GPO-PAP





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150-199 Borderline High

200-499 High

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# DEPARTMENT OF BIOCHEMISTRY

# MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

**Test Name** 

Result

Unit

Method

>500 Very High

Bio. Ref. Interval





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#### DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

2			
PALE YELLOW			
1.030			
Acidic ( 6.0 )			DIPSTICK
ABSENT	mg %	< 10 Absent	DIPSTICK
		10-40 (+)	
State and			
ABSENT	gms%		DIPSTICK
ABSENT	mg/dl		BIOCHEMISTRY
	ing/u	0.2-2.01	BIOCHEIMISTIKI
ADJENT		and a set of the	
0-1/h.p.f			MICROSCOPIC
			EXAMINATION
ABSENT			MICROSCOPIC
ADCENT			EXAMINATION
			MICROCCODIC
ABSENT			MICROSCOPIC EXAMINATION
ADCENT			EAAIVIINATION
ADJEINI			
ABSENT	gms%		
	PALE YELLOW 1.030 Acidic ( 6.0 ) ABSENT ABSENT ABSENT ABSENT ABSENT ABSENT 0-1/h.p.f 2-3/h.p.f ABSENT ABSENT ABSENT ABSENT ABSENT ABSENT	PALE YELLOW 1.030 Acidic ( 6.0 ) ABSENT mg % ABSENT gms% ABSENT mg/dl ABSENT ABSENT ABSENT 0-1/h.p.f 2-3/h.p.f ABSENT ABSENT ABSENT ABSENT ABSENT ABSENT ABSENT ABSENT ABSENT ABSENT	PALE YELLOW 1.030 Acidic (6.0) ABSENT mg % <10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) 500 (++++) 500 (++++) 1-2 (+++) 2 (++++) 2 (++++) ABSENT

#### Interpretation:

 $\begin{array}{ll} (+) & < 0.5 \\ (++) & 0.5 \\ (+++) & 1 \\ (++++) & 1 \\ (++++) & > 2 \end{array}$ 





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# DEPARTMENT OF CLINICAL PATHOLOGY

## MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

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

Sugar, PP Stage

ABSENT

#### Interpretation:

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









SIN No:53272835







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Patient Name	: Mr.MD HADISH - BOBE166944	Registered On	: 04/Dec/2022 10:43:59
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Visit ID	: CVAR0067272223	Reported	: 05/Dec/2022 10:51:06
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 **	0.450	ng/mL	< 1.3	CLIA	
Sample:Serum	01100			0201	

#### **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<sup>.</sup>
- 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.



Dr. Anupam Singh M.B.B.S,M.D.(Pathology)





SIN No:53272835



Home Sample Collect 1800-419-0002





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Visit ID	: CVAR0067272223	Reported	: 04/Dec/2022 15:23:54
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
THYROID PROFILE - TOTAL * , Serum				
T3, Total (tri-iodothyronine)	99.80	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	4.90	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	2.30	µIU/mL	0.27 - 5.5	CLIA
Interpretation:			and the second second	

0.3-4.5	µIU/mL	First Trimest	er
0.5-4.6	µIU/mL	Second Trim	ester
0.8-5.2	µIU/mL	Third Trimes	ter
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.

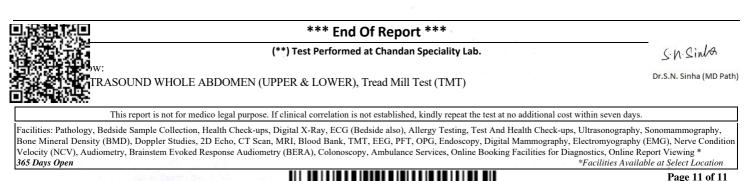
4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.

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.





SIN No:53272835



Since 1991

Name of Company: Mediculeal Name of Executive: Md Hadish Date of Birth: 05,05,1982 Sex: Male / Female Height: 163 CMs Weight: G7 KGs BMI (Body Mass Index): 25.2 Abdomen: ......CMs Blood Pressure: 14.6.1.94 mm/Hg 146194 11 146194 Pulse: ......BPM - Regular / Irregular RR: 1.2. Resp/Min Ident. Mark: Cut Mark on Rf Middle Finger Any Allergies: No Vertigo: Non-P Any Medications: No Any Surgical History: No Habits of alcoholism/smoking/tobacco: O Chewing Pagen Mosala - 2 Pouch/pay Chief Complaints if any: D's Hyper teston. Lab Investigation Reports: Eye Check up - vision & Color vision: Left eye: Nal Right eye: Rul Near vision: Far vision: Kreek Home Sample Collection
1800-419-0002 22-6666600 E-mail: customercare diagno

Dental check up : Norf ENT Check up : Norf Eye Checkup: Norf

#### Final impression

Since 1991

Certified that I examined Md Haden Sto or Dio

Client Signature :-

sl.Had

but.

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

Signature of Medical Examiner

Name & Qualification - Dr. R. C. Roy (MBBS,MD) Date...D.(1.1.2-12022, Place - VARANASI

Chandan Diagnostic Cent 99. Shivat Nagar, Mahmoorgan, Varanasi-221010 (U.P.) Phone No.:0542-2223232

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



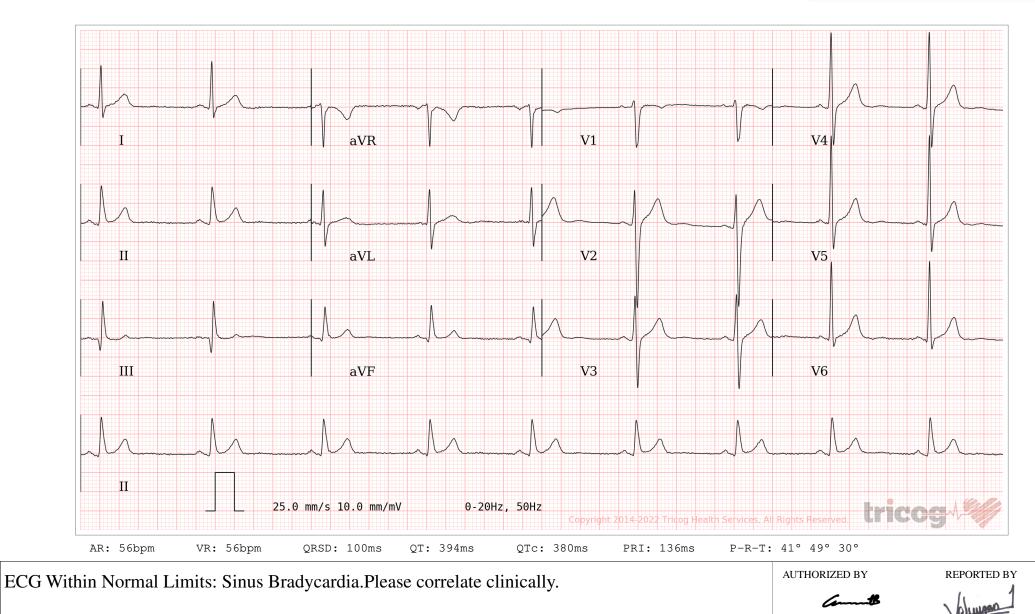
Home Sample Collection 1800-419-0002

# **Chandan Diagnostic**

Date and Time: 4th Dec 22 11:44 AM



Age / Gender:40/MalePatient ID:CVAR0067272223Patient Name:Mr.MD HADISH - BOBE166944



63382

Dr Velmurugan.

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.



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# DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

# Blood Group (ABO & Rh typing) \* , Blood

Blood Group	
Rh ( Anti-D)	

B POSITIVE



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

ISO 9001:2015

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UHID/MR NO	: CVAR.0000033929	Received	: 04/Dec/2022 15:10:11
Visit ID	: CVAR0067272223	Reported	: 04/Dec/2022 15:14:26
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	
---	--

# STOOL, ROUTINE EXAMINATION \* , Stool

Color	BROWNISH
Consistency	SEMI SOLID
Reaction (PH)	Basic ( 8.0 )
Mucus	ABSENT
Blood	ABSENT
Worm	ABSENT
Pus cells	ABSENT
RBCs	ABSENT
Ova	ABSENT
Cysts	ABSENT
Others	ABSENT



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

BO 9001:2015



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



Patient Name	: Mr.MD HADISH - BOBE166944	Registered On	: 04/Dec/2022 10:43:59
Age/Gender	: 40 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000033929	Received	: N/A
Visit ID	: CVAR0067272223	Reported	: 05/Dec/2022 10:11:44
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**

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

Result/s to Follow: ECG / EKG, ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER), 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

Page 3 of 3







1st Floor Parijat 98 Shivaji Nagar, Shivaji Nagar Colony, Mahmoorganj, Varanasi, Uttar Pradesh 221010, India Latitude Longitude

25.305390° LOCAL 12:04:40

theare Ltd

GMT 06:34:40

Longitude 82.978995°

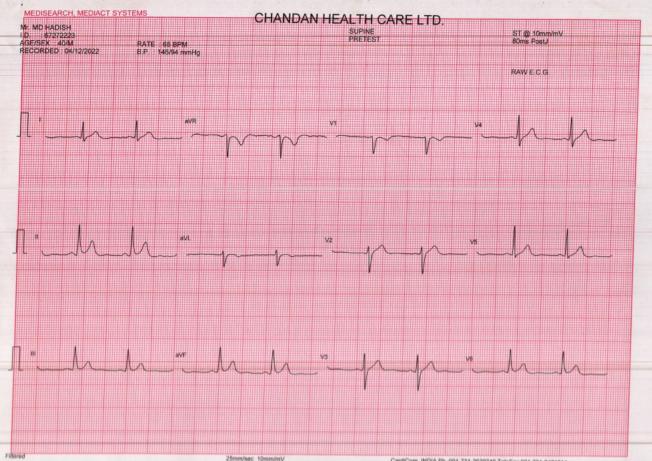
SUNDAY 12.04.2022 ALTITUDE 18 METER MEDISEARCH, MEDIACT SYSTEMS

# CHANDAN HEALTH CARE LTD.

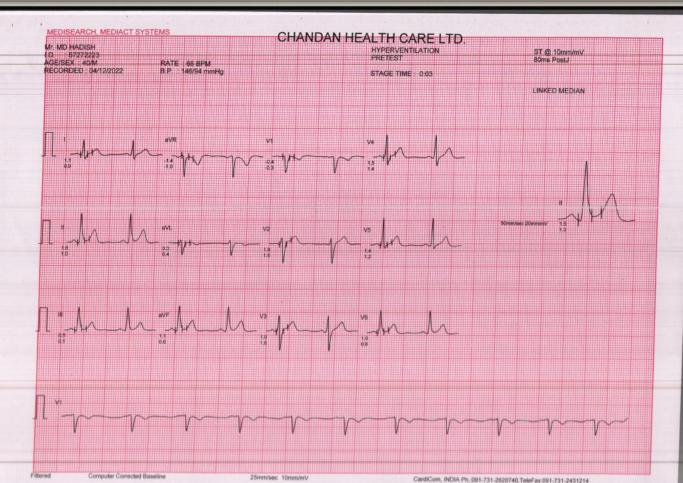
99-SHIVAJI NAGAR MAHMOORGANJ VARANASI-9839703058

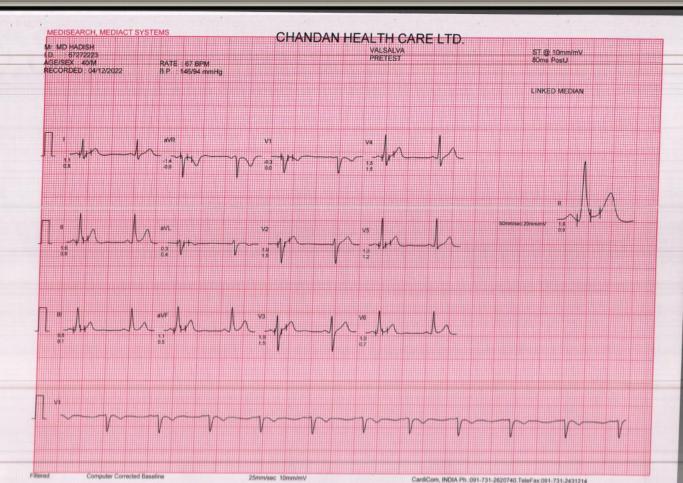
Mr. MD HADISH AgeiSex: 40M Ref by Indication1 Indication2 Indication3			ID: 67272223 HKW1: 163/67 Recorded: 04/12/2022			TREADMILL T Protocol: BRU History: Hyper				handan Diagnostic Center 99, Shivat Nagar, Mahmoorgani Varavasi-221010 (U.P.) Phone No. 10542-2223232		
PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100	i	ST LEVEL (mm) V2	V5	METS	
SUPINE HYPERVENT VALSALVA STANDING	0.03	0:03			65 66 67 68	146/94 146/94 146/94 146/94	94 96 97 99	1.6 1.6 1.6 1.6	1.8 1.8 1.9 2.0	1.4 1.4 1.3 1.3		
STAGE 1 STAGE 2 EVENT	2.59 5:59 7:00	2.59 2:59 1:00	2.70 4.00 5.40	10.00 12.00 14.00	113 147 165	158/94 168/94 168/96	178 246 277	0.6 -0.3 -0.6	0.8 2.4 1.4	1.3 1.3 0.7	4.80 7.10 8.07	
PEAK EXER	7:08 0:31 1:01	1.08 0:31 1.01	0.00	0.00	168 149	168/96 168/96	282	-1.1	1.7	0.4	8.20	
EVENT RESULTS Exercise Duration Max Heart Rate Max Blood Pressure Max Work Load Reason of Termination	1681	2:00 Minutes opm 93 % of tan 34 mmHg METS	0.00 get heart rate 180	0.00 bpm	135				38 35 G is normal F Rate Achi			
MPRESSIONS TMT1	e nepa	he for.	RMI	Dr. Ankie XV M.B.B.	rishna Agari S., MD, DM diologist	ral	-> NO R at p	ignifica. ouk Ex	t ST-T ch muke and r egative for	enses recores		
	U		pace	Dr. And M.B.B. Car Reg.	No-3912	Cardiologist	- MART		U			

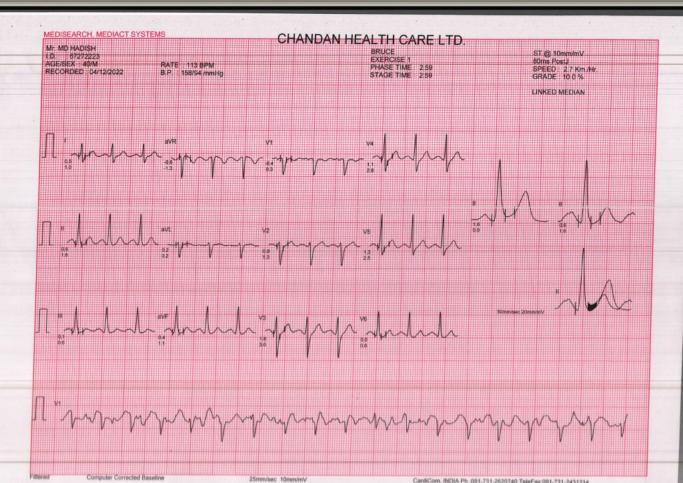
CardiCom, INDIA Ph::091-731-2620740, TeleFax:091-731-2431214

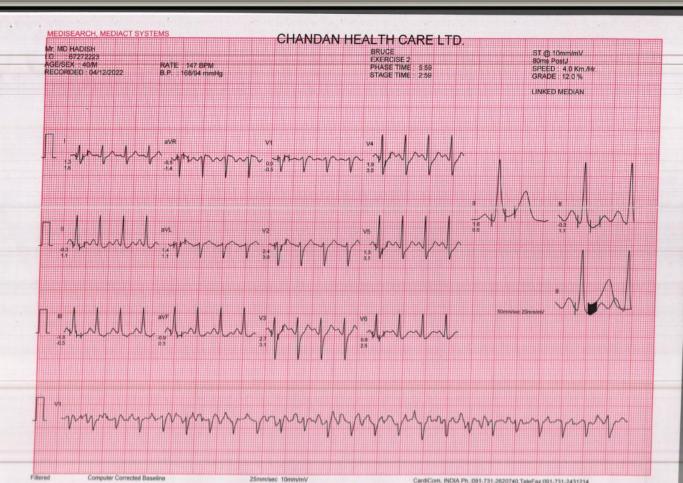


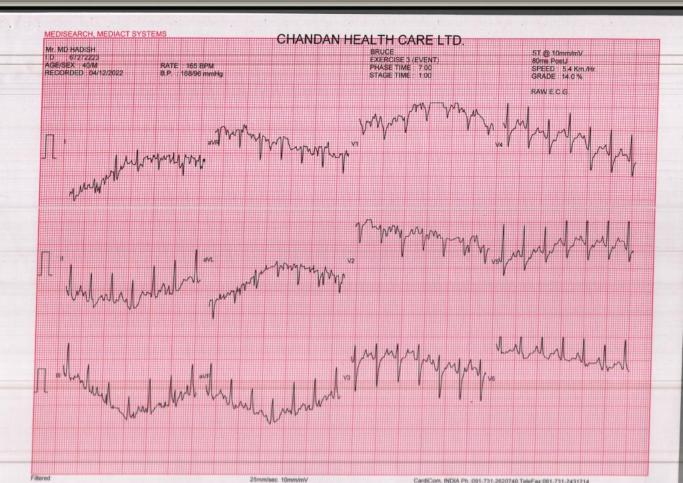
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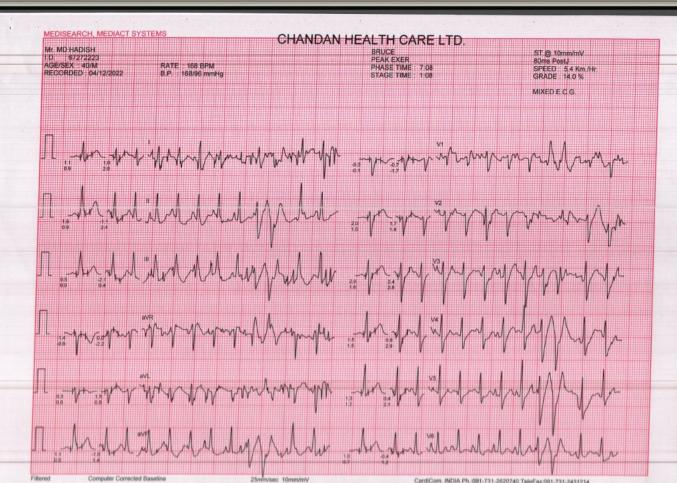


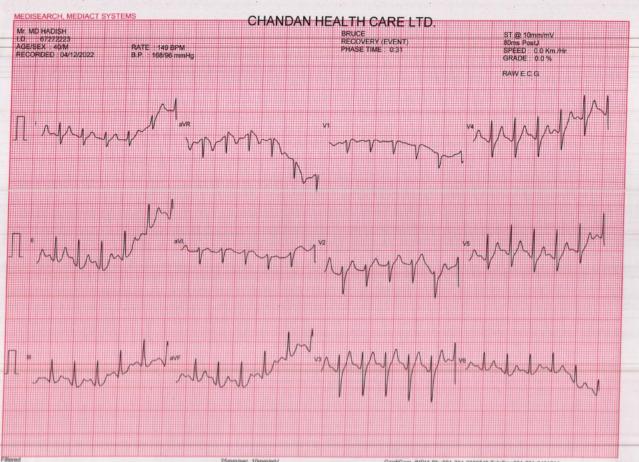






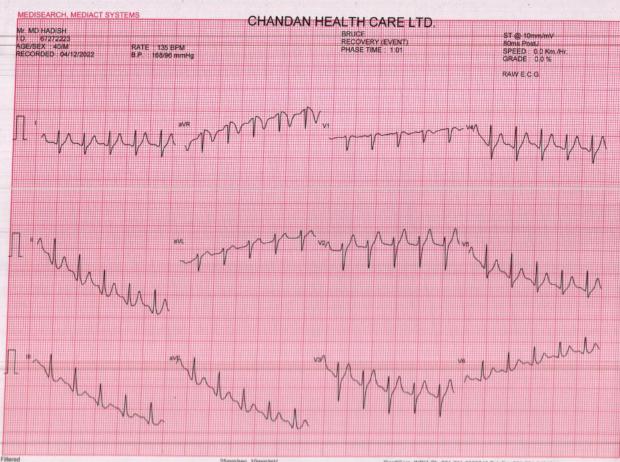






25mm/sec 10mm/mV

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25mm/sec 10mm/mV

