Chandan Diagnostic

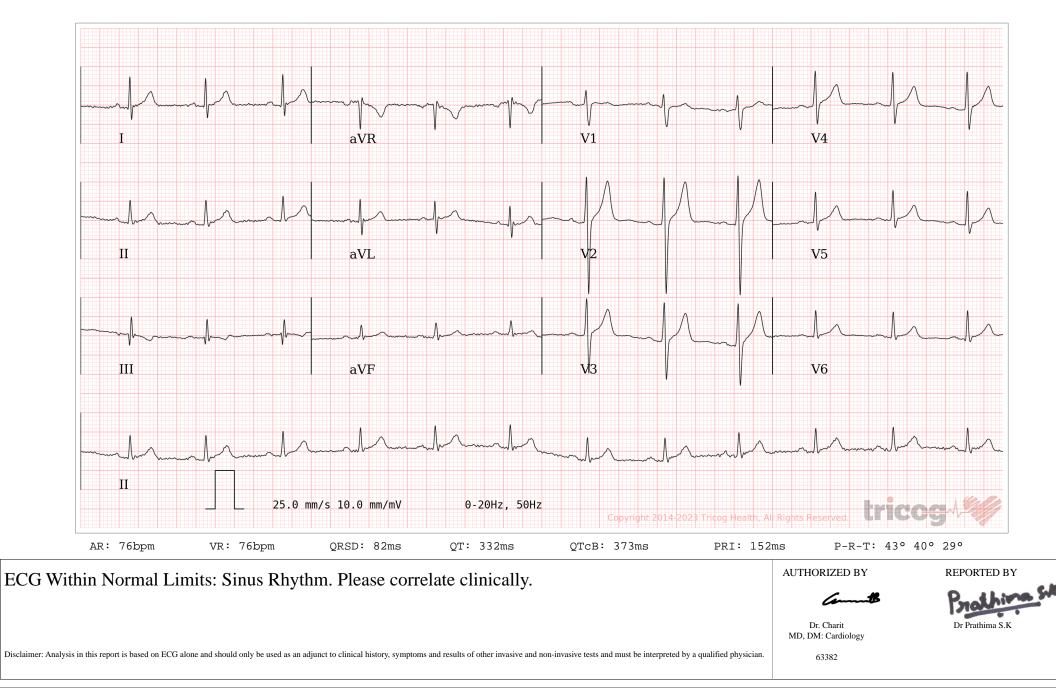


Age / Gender: 29/Male ALDP0087212324

Date and Time: 25th Jun 23 9:43 AM

Patient ID:

Patient Name: Mr.SATYA PRAKASH PANDEY - 182910





Registered On

: 25/Jun/2023 09:17:48

Since 1991

Patient Name

Add: 49/19-B, Kamla Nehru Road, Katra, Prayag Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206

: Mr.SATYA PRAKASH PANDEY - 182910



Age/Gender UHID/MR NO Visit ID Ref Doctor	: Mr.SATYA PRAKASH : 29 Y 4 M 8 D /M : ALDP.0000120787 : ALDP0087212324 : Dr.Mediwheel - Arco		Collected Collected Received Reported	5n : 25/Jun/2023 : 25/Jun/2023 : 25/Jun/2023 : 25/Jun/2023 : Final Report	09: 32: 01 09: 42: 17
				DLOGY MALE BELOW 40 YR	
Test Name		Result	Unit	Bio. Ref. Interval	Method
Blood Group (A	.BO & Rh typing) * , BI	ood			
Blood Group		0			
Rh (Anti-D)		POSITIVE			
Complete Blood	d Count (CBC) * , Whole	e Blood			
Haemoglobin		14.90	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 6-12 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0 g/cl Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl	
TLC (WBC) <u>DLC</u>		5,600.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
Polymorphs (Ne	eutrophils)	51.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	and the second second	42.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes		4.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	4	3.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils ESR		0.00	%	<1	ELECTRONIC IMPEDANCE
Observed		8.00	Mm for 1st hr.		
Corrected		-	Mm for 1st hr.	< 9	
PCV (HCT) Platelet count		39.00	%	40-54	
Platelet Count		1.35	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet D	Distribution width)	16.30	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet I	Large Cell Ratio)	60.40	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet He	ematocrit)	0.19	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Plat RBC Count	telet Volume)	15.30	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count Blood Indices (N	ЛСV, МСН, МСНС)	5.17	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE





Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206



Patient Name	: Mr.SATYA PRAKASH PANDEY - 182910	Registered On	: 25/Jun/2023 09:17:48
Age/Gender	: 29 Y 4 M 8 D /M	Collected	: 25/Jun/2023 09:32:01
UHID/MR NO	: ALDP.0000120787	Received	: 25/Jun/2023 09:42:17
Visit ID	: ALDP0087212324	Reported	: 25/Jun/2023 12:45:11
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
MCV	76.10	fl	80-100	CALCULATED PARAMETER
MCH	28.80	pg	28-35	CALCULATED PARAMETER
MCHC	37.80	%	30-38	CALCULATED PARAMETER
RDW-CV	12.40	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	44.40	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	2,856.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	168.00	/cu mm	40-440	

AS

Dr.Akanksha Singh (MD Pathology)

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Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206



Patient Name	: Mr.SATYA PRAKASH PANDEY - 182910	Registered On	: 25/Jun/2023 09:17:51
Age/Gender	: 29 Y 4 M 8 D /M	Collected	: 25/Jun/2023 14:58:44
UHID/MR NO	: ALDP.0000120787	Received	: 25/Jun/2023 15:27:55
Visit ID	: ALDP0087212324	Reported	: 25/Jun/2023 17:42:31
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	- 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 Glucose Fasting	91.70	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 * Sample:Plasma After Meal	148.30	mg/dl	<140 Normal 140-199 Pre-diabetes >200 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.

Dr.Akanksha Singh (MD Pathology)





Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206



Patient Name	: Mr.SATYA PRAKASH PANDEY - 182910	Registered On	: 25/Jun/2023 09:17:52
Age/Gender	: 29 Y 4 M 8 D /M	Collected	: 25/Jun/2023 09:32:01
UHID/MR NO	: ALDP.0000120787	Received	: 26/Jun/2023 11:14:00
Visit ID	: ALDP0087212324	Reported	: 26/Jun/2023 12:18:41
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	- Status	: Final Report

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)	5.40	% NGSP		HPLC (NGSP)	

mmol/mol/IFCC

mg/dl

Interpretation:

NOTE:-

Glycosylated Haemoglobin (HbA1c)

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.

36.00

108

 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. **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 nondiabetic conditions: a. Iron-deficiency anemia b. Splenectomy

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Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206



Patient Name	: Mr.SATYA PRAKASH PANDEY - 182910	Registered On	: 25/Jun/2023 09:17:52
Age/Gender	: 29 Y 4 M 8 D /M	Collected	: 25/Jun/2023 09:32:01
UHID/MR NO	: ALDP.0000120787	Received	: 26/Jun/2023 11:14:00
Visit ID	: ALDP0087212324	Reported	: 26/Jun/2023 12:18:41
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test NameResultUnitBio. Ref. IntervalMethod	
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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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Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206



Patient Name : Mr.SATYA PRAKASH PA	NDEY - 182910	Registered On	: 25/Jun/2023 09:17:	
Age/Gender : 29 Y 4 M 8 D /M UHID/MR NO : ALDP.0000120787		Collected Received	: 25/Jun/2023 09:32:	
UHID/MR NO : ALDP.0000120787 Visit ID : ALDP0087212324		Reported	: 25/Jun/2023 09:42: : 25/Jun/2023 11:58:	
Ref Doctor : Dr.Mediwheel - Arcofer	ni Health Care Ltd		: Final Report	
	DEPARTMENT	OF BIOCHEMIST	-	
MEDIWHEEL E			ALE BELOW 40 YRS	
Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) * Sample:Serum	8.64	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 * Sample:Serum	8.09	mg/dl	3.4-7.0	URICASE
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	56.70	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	129.10	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	37.90	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.40	gm/dl	6.2-8.0	BIRUET
Albumin	4.00	gm/dl	3.8-5.4	B.C.G.
Globulin	2.40	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.67		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	101.50	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.80	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.30	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.50	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) * , Serum				
Cholesterol (Total)	163.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	48.00	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	82	mg/dl	< 100 Optimal	CALCULATED
		C C	100-129 Nr.	
			Optimal/Above Optima	
			130-159 Borderline High	
			160-189 High > 190 Very High	
VLDL	33.26	mg/dl	10-33	CALCULATED
Triglycerides	166.30	mg/dl	< 150 Normal	GPO-PAP
maryoundes	100.50	ing/ u	150-199 Borderline High 200-499 High >500 Very High	





Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206



Patient Name	: Mr.SATYA PRAKASH PANDEY - 182910	Registered On	: 25/Jun/2023 09:17:52
Age/Gender	: 29 Y 4 M 8 D /M	Collected	: 25/Jun/2023 09:32:01
UHID/MR NO	: ALDP.0000120787	Received	: 25/Jun/2023 09:42:17
Visit ID	: ALDP0087212324	Reported	: 25/Jun/2023 11:58:39
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	- Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

AS

Dr.Akanksha Singh (MD Pathology)

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Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206



Patient Name	: Mr.SATYA PRAKASH PANDEY - 182910	Registered On	: 25/Jun/2023 09:17:52
Age/Gender	: 29 Y 4 M 8 D /M	Collected	: 25/Jun/2023 15:02:28
UHID/MR NO	: ALDP.0000120787	Received	: 25/Jun/2023 15:27:55
Visit ID	: ALDP0087212324	Reported	: 25/Jun/2023 17:44:27
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
IRINE EXAMINATION, ROUTINE * , Ur	ine			
Color	LIGHT YELLOW			
Specific Gravity	1.010			
Reaction PH	Acidic (5.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent	DIPSTICK
		, 3	10-40 (+)	
			40-200 (++)	
			200-500 (+++)	
			> 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+)	DIPSTICK
			0.5-1.0 (++)	
			1-2 (+++)	
Vatana	ADCENT	in a fall	> 2 (++++)	
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT		1.1.1	
Microscopic Examination:				
Epithelial cells	1-2/h.p.f			MICROSCOPIC
				EXAMINATION
Pus cells	1-2/h.p.f			
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			

Urine Microscopy is done on centrifuged urine sediment.

SUGAR, FASTING STAGE * , Urine

Sugar, Fasting stage	ABSENT	gms%
Interpretation:		

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

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Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206



Patient Name	: Mr.SATYA PRAKASH PANDEY - 182910	Registered On	: 25/Jun/2023 09:17:52
Age/Gender	: 29 Y 4 M 8 D /M	Collected	: 25/Jun/2023 15:02:28
UHID/MR NO	: ALDP.0000120787	Received	: 25/Jun/2023 15:27:55
Visit ID	: ALDP0087212324	Reported	: 25/Jun/2023 17:44:27
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	- Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

(++++) > 2

SUGAR, PP STAGE * , Urine

Sugar, PP Stage

ABSENT

Interpretation:

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

AS

Dr.Akanksha Singh (MD Pathology)

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Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206



Patient Name	: Mr.SATYA PRAKASH PANDEY - 182910	Registered On	: 25/Jun/2023 09:17:52
Age/Gender	: 29 Y 4 M 8 D /M	Collected	: 25/Jun/2023 09:32:01
UHID/MR NO	: ALDP.0000120787	Received	: 25/Jun/2023 09:42:17
Visit ID	: ALDP0087212324	Reported	: 25/Jun/2023 14:20:56
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	- Status	: Final Report

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)	150.00	ng/dl	84.61–201.7	CLIA		
T4, Total (Thyroxine)	7.00	ug/dl	3.2-12.6	CLIA		
TSH (Thyroid Stimulating Hormone)	0.90	μlU/mL	0.27 - 5.5	CLIA		
Interpretation:		0 3-4 5 uIU/	mI First Trimester			

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.

Dr.Akanksha Singh (MD Pathology)







Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206



Patient Name	: Mr.SATYA PRAKASH PANDEY - 182910	Registered On	: 25/Jun/2023 09:17:53
Age/Gender	: 29 Y 4 M 8 D /M	Collected	: N/A
UHID/MR NO	: ALDP.0000120787	Received	: N/A
Visit ID	: ALDP0087212324	Reported	: 25/Jun/2023 13:19:38
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 *

X-RAY REPORT (300 mA COMPUTERISED UNIT SPOT FILM DEVICE) CHEST P-A VIEW

- Both lung field did not reveal any significant lesion.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Soft tissue shadow appears normal.
- Bony cage is normal.

Please correlare clinically.

Nidhikant.

Dr Nidhikant (MBBS, DMRD, DNB)

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Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206



Patient Name	: Mr.SATYA PRAKASH PANDEY - 182910	Registered On	: 25/Jun/2023 09:17:54
Age/Gender	: 29 Y 4 M 8 D /M	Collected	: N/A
UHID/MR NO	: ALDP.0000120787	Received	: N/A
Visit ID	: ALDP0087212324	Reported	: 25/Jun/2023 11:33:51
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	- Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

LIVER: - Normal in size (13.0 cm), shape and **shows diffuse increase in the liver parenchymal echogenicity suggestive of grade I fatty changes**. No focal lesion is seen. No intra hepatic biliary radicle dilation seen.

GALL BLADDER :- Well distended, walls are normal. No e/o calculus / focal mass lesion/ pericholecystic fluid.

CBD :- Normal in calibre at porta.

PORTAL VEIN: - Normal in calibre and colour uptake at porta.

PANCREAS: - Head is visualised, normal in size & echopattern. No e/o ductal dilatation or calcification. Rest of pancreas is obscured by bowel gas.

SPLEEN: - Normal in size, shape and echogenicity.

RIGHT KIDNEY: - Normal in size, shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.

LEFT KIDNEY: - Normal in size, shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.

URINARY BLADDER :- Normal in shape, outline and distension. No e/o wall thickening / calculus.

PROSTATE :- Normal in size, shape and echo pattern.

Visualized bowel loops are normal in caliber. No para-aortic lymphadenopathy

No free fluid is seen in the abdomen/pelvis.

IMPRESSION : Grade I fatty liver.

Please correlate clinically

**	* End Of Report ***			
(**) Test Performed at Chandan Speciality Lab.				
Result/s to Follow: ST ST States EXAMINATION, ECG / EKG		Widhikant (MBBS, DMRD, DNB)		
This report is not for medico legal purpose. If clinical corr	relation is not established, kindly repeat the test at no ad	lditional cost within seven days.		
Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), C 365 Days Open	Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mar	mmography, Electromyography (EMG), Nerve Condition		
		Page 12 of 12		







LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator, Mediwheel (Arcofemi Healthcare Limited) Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS	
NAME	MR. PANDEY SATYA PRAKASH	
EC NO.	182910	
DESIGNATION	BRANCH OPERATIONS	
PLACE OF WORK	DADAULI	
BIRTHDATE	15-02-1994	
PROPOSED DATE OF HEALTH CHECKUP	25-06-2023	
BOOKING REFERENCE NO.	23J182910100062718E	

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from 24-06-2023 till 31-03-2024 The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a cashless facility as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager HRM Department Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



Government of India Satya Prakash Pandey जन्म तिथि / DOB : 15/02/1994



9412 3298 4165 आधार - आम आदमी का अधिकार



आरतीय विशिष्ट पहचान प्राधिकरण Unique Identification Authority of India

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