

Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707, CIN : U85110DL2003PLC308206



Patient Name	: Mr.VIVEK		Registered O		
Age/Gender	: 31 Y O M O D /M		Collected	: 25/Mar/2023 0	
UHID/MR NO Visit ID	: CDCA.0000104302 : CDCA0331932223		Received Reported	: 25/Mar/2023 1(: 25/Mar/2023 1;	
Ref Doctor	: Dr.Mediwheel - Arcofer	mi Health Care I to	-	: Final Report	2.37.10
	MEDIWHEEL B	DEPARTMENT BANK OF BAROI		LOGY MALE BELOW 40 YRS	
Test Name		Result	Unit	Bio. Ref. Interval	Method
Blood Group (Al	BO & Rh typing) * , Blood	,			
-		В			
Blood Group Rh (Anti-D)		ь NEGATIVE			
KII (AIIII-D)		NEGATIVE			
Complete Blood	I Count (CBC) * , Whole Bl	ood			
Haemoglobin		15.20	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	
				2-6 Yr- 11.5-15.5 g/dl	
				6-12 Yr- 11.5-15.5 g/d	Charles and the second
			Start Start	12-18 Yr 13.0-16.0	
				g/dl	
				Male- 13.5-17.5 g/dl	
				Female- 12.0-15.5 g/d	
TLC (WBC)		5,000.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC					
Polymorphs (Neu	utrophils)	43.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes		44.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes		5.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils		8.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils		0.00	%	<1	ELECTRONIC IMPEDANCE
ESR					
Observed		10.00	Mm for 1st hr.		
Corrected		8.00	Mm for 1st hr.	< 9	
PCV (HCT)		46.00	%	40-54	
Platelet count					
Platelet Count		1.3	LACS/cu mm	15-40	ELECTRONIC
		1.3		1.5-4.0	IMPEDANCE/MICROSCOPI
PDW (Platelet Dis	stribution width)	16.40	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet La	-	Nr	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hen	•	0.18	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Plate	-	13.40	۶۵ fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count		13.40	IL.	0.0-12.0	
		F 00	N 4111 /	4055	
RBC Count		5.00	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE





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Age/Gender	: 31 Y O M O D /M	Collected	: 25/Mar/2023 09:08:49
UHID/MR NO	: CDCA.0000104302	Received	: 25/Mar/2023 10:15:16
Visit ID	: CDCA0331932223	Reported	: 25/Mar/2023 12:37:18
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 Indices (MCV, MCH, MCHC)				
MCV	92.00	fl	80-100	CALCULATED PARAMETER
MCH	30.40	pg	28-35	CALCULATED PARAMETER
MCHC	33.04	%	30-38	CALCULATED PARAMETER
RDW-CV	12.90	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	45.40	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	2,150.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	400.00	/cu mm	40-440	

Dr. R.K. Khanna (MBBS,DCP)

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Age/Gender	: 31 Y O M O D /M	Collected	: 25/Mar/2023 09:08:49
UHID/MR NO	: CDCA.0000104302	Received	: 25/Mar/2023 10:20:44
Visit ID	: CDCA0331932223	Reported	: 25/Mar/2023 11:16:41
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	
GLUCOSE FASTING * , Plasma					
Glucose Fasting	116.12	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.





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UHID/MR NO	: CDCA.0000104302	Received	: 25/Mar/2023 15:19:17
Visit ID	: CDCA0331932223	Reported	: 25/Mar/2023 17:10:18
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) Glycosylated Haemoglobin (HbA1c)	5.30 34.00	% NGSP mmol/mol/IFCC		HPLC (NGSP)

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)	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.

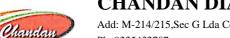
*With optimal control, the HbA 1c moves toward normal levels.

*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 non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy

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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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			OF BIOCHEMIST	RY	
-	MEDIWHEEL BA			ALE BELOW 40 YRS	
Test Name		Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Ni Sample:Serum	itrogen) *	14.02	mg/dL	7.0-23.0	CALCULATED
Creatinine * Sample:Serum		1.16	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20- 275 Female-20-320	MODIFIED JAFFES
Uric Acid * Sample:Serum		5.00	mg/dl	3.4-7.0	URICASE
LFT (WITH GAMM	IAGT) * , Serum				
SGOT / Aspartate / SGPT / Alanine Am Gamm <mark>a</mark> GT (GGT)	Aminotransferase (AST) hinotransferase (ALT)	36.45 38.17 26.85	U/L U/L IU/L	< 35 < 40 11-50	IFCC WITHOUT P5P IFCC WITHOUT P5P OPTIMIZED SZAZING
Protein Albumin Globulin		6.62 4.25 2.37	gm/dl gm/dl gm/dl	6.2-8.0 3.8-5.4 1.8-3.6	BIRUET B.C.G. CALCULATED
A:G Ratio Alkaline Phosphata	ase (Total)	2.37 1.79 76.13	U/L	1.8-3.6 1.1-2.0 42.0-165.0	CALCULATED CALCULATED IFCC METHOD
Bilirubin (Total) Bilirubin (Direct)		0.57 0.20	mg/dl mg/dl	0.3-1.2 < 0.30	JENDRASSIK & GROF JENDRASSIK & GROF
Bilirubin (Indirect)		0.37	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (M	/INI)*, Serum				
Cholesterol (Total)	•	217.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (G LDL Cholesterol (Ba	-	72.45 128	mg/dl mg/dl	30-70 < 100 Optimal 100-129 Nr.	DIRECT ENZYMATIC CALCULATED
				Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High)
VLDL Triglycerides		16.86 84.30	mg/dl mg/dl	10-33 < 150 Normal 150-199 Borderline High	CALCULATED GPO-PAP



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200-499 High



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Age/Gender	: 31 Y O M O D /M	Collected	: 25/Mar/2023 09:08:49
UHID/MR NO	: CDCA.0000104302	Received	: 25/Mar/2023 11:03:26
Visit ID	: CDCA0331932223	Reported	: 25/Mar/2023 13:39:21
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

>500 Very High



ISO 9001:2015



Home Sample Collectio

1800-419-0002



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Age/Gender UHID/MR NO Visit ID	Gender : 31 Y 0 M 0 D /M /MR NO : CDCA.0000104302 D : CDCA0331932223		Registered On Collected Received Reported Status	: 25/Mar/2023 09: : 25/Mar/2023 11:	25/Mar/2023 08: 59: 31 25/Mar/2023 09: 08: 49 25/Mar/2023 11: 43: 20 25/Mar/2023 13: 59: 21 Final Report	
		PARTMENT OF				
Test Name	MEDIWHEEL B	ANK OF BAROD Result	A MALE & FEM/ Unit	ALE BELOW 40 YRS Bio. Ref. Interval	Method	
URINE EXAMINATI	ON, ROUTINE * , Urine					
Color Specific Gravity Reaction PH Protein		PALE YELLOW 1.020 Acidic (6.0) ABSENT	, mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++)	DIPSTICK DIPSTICK	
Sugar		ABSENT	gms%	> 500 (++++) < 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK	
Ketone Bile Salts Bile Pigments Urobilinogen(1:20 c Microscopic Exami r		ABSENT ABSENT ABSENT ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY	
Epithelial cells		OCCASIONAL			MICROSCOPIC	
Pus cells RBCs	4	OCCASIONAL ABSENT			MICROSCOPIC	
Cast Crystals		ABSENT ABSENT			MICROSCOPIC	
Others		ABSENT				
SUGAR, FASTING S	TAGE * , Urine					
Sugar, Fasting stage	2	ABSENT	gms%			
Interpretation: (+) < 0.5 (++) 0.5-1.0					R Dr. R.K. Khan	

Dr. R.K. Khanna (MBBS,DCP)



(+++) 1-2

(++++) > 2



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UHID/MR NO	: CDCA.0000104302	Received	: 25/Mar/2023 14:49:06
Visit ID	: CDCA0331932223	Reported	: 25/Mar/2023 15:58:16
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)	114.63	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	8.40	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	3.09	μIU/mL	0.27 - 5.5	CLIA
Interpretation:				
	0.3-4.5 µIU/mL 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. Anupam Singh (MBBS MD Pathology)





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Patient Name	: Mr.VIVEK	Registered On	: 25/Mar/2023 08:59:32
Age/Gender	: 31 Y O M O D /M	Collected	: N/A
UHID/MR NO	: CDCA.0000104302	Received	: N/A
Visit ID	: CDCA0331932223	Reported	: 25/Mar/2023 15:45:02
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 *

(300 mA COMPUTERISED UNIT SPOT FILM DEVICE)

CHEST P-A VIEW

- Soft tissue shadow appears normal.
- Bony cage is normal.
- Diaphragmatic shadows are normal on both sides.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Pulmonary parenchyma did not reveal any significant lesion.

IMPRESSION

• NO SIGNIFICANT RADIOLOGICAL ABNORMALITY SEEN ON PRESENT STUDY.

Dr. Anoop Agarwal MBBS,MD(Radiology)

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Visit ID	: CDCA0331932223	Reported	: 25/Mar/2023 13:25:12
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) *

<u>LIVER</u>

• The liver is normal in size and has a normal homogenous echotexture. No focal lesion is seen.

PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein is normal at the porta.
- Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common duct are normal at the porta.
- The gall bladder is normal in size and has regular walls. Wall thickness is normal. Lumen of the gall bladder is anechoic.

PANCREAS

• The pancreas is normal in size and shape and has a normal homogenous echotexture.

RIGHT KIDNEY

- Right kidney is normal in size and shape and cortical echotexture.
- The collecting system is not dilated.
- The upper part of right ureter is normal.
- The vesicoureteric junction is normal.
- Corticomedullary demarcation is clear.
- Renal respiratory excursions are normal.

LEFT KIDNEY

- Left kidney is normal in size and shape and cortical echotexture.
- The collecting system is not dilated.
- The upper part of left ureter is normal.
- The vesicoureteric junction is normal.
- Corticomedullary demarcation is clear.
- Renal respiratory excursions are normal.



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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

SPLEEN

• The spleen is normal in size and has a homogenous echotexture.

ILIAC FOSSA

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

URINARY BLADDER

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

PROSTATE

• The prostate gland is normal in texture and size.

IMPRESSION

• No significant sonological abnormality is seen on this study.

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

Result/s to Follow: STOOL, ROUTINE EXAMINATION, GLUCOSE PP, SUGAR, PP STAGE, ECG / EKG



Dr. Anoop Agarwal MBBS,MD(Radiology)

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

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