Patient Name: Mrs PRIYANKA MONDAL MRN: 37530000013307 Gender/Age: FEMALE, 33y (10/02/1990)

Collected On: 08/04/2023 01:03 PM Received On: 08/04/2023 01:31 PM Reported On: 08/04/2023 02:52 PM

Barcode: 802304080595 Specimen: Serum Consultant: EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9339718590

# **CLINICAL CHEMISTRY**

Test	Result	Unit	Biological Reference Interval
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	185	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic Endpoint Colorimetric )	138	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	21 L	mg/dL	40.0-60.0
Non-HDL Cholesterol	164.0	-	-
LDL Cholesterol (Non LDL Selective Elimination, CHOD/POD)	132.19 H	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	27.6	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	8.9	-	-
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric -Diazo Method)	0.82	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.29	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Colorimetric Endpoint)	0.54	-	-
Total Protein (Biuret Method)	7.50	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.10	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.4	g/dL	2.0-3.5

Patient Name: Mrs PRIYANKA MONDAL MRN: 375	30000013307	Gender/Age : FEMALE , 33	y (10/02/1990)
Albumin To Globulin (A/G)Ratio (Calculated)	1.21	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	49 H	U/L	14.0-36.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	57 H	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P- nitro Phenyl Phosphate, AMP Buffer)	123	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide ( Szasz Method))	28	U/L	12.0-43.0



MD, Biochemistry
Clinical Biochemist MBBS, MD

# **CLINICAL CHEMISTRY**

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.75	mg/dL	0.52-1.04
eGFR	89.0	mL/min/1.73m <sup>2</sup>	-
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease)	8.42	-	7.0-17.0
Serum Sodium (Direct ISE - Potentiometric)	140	mmol/L	137.0-145.0
Serum Potassium (Direct ISE - Potentiometric)	5.1	mmol/L	3.5-5.1

--End of Report-

# Patient Name: Mrs PRIYANKA MONDAL MRN: 37530000013307 Gender/Age: FEMALE, 33y (10/02/1990)

Dr. Debasree Biswas MD, Biochemistry Clinical Biochemist MBBS, MD Dr. Sujata Ghosh PhD, Biochemistry Biochemist M.Sc , Ph. D

Syhosh

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.
   (Blood Urea Nitrogen (Bun), -> Auto Authorized)
   (Serum Sodium, -> Auto Authorized)
   (Serum Potassium, -> Auto Authorized)
   (CR -> Auto Authorized)





Patient Name: Mrs PRIYANKA MONDAL MRN: 37530000013307 Gender/Age: FEMALE, 33y (10/02/1990)

Collected On: 08/04/2023 01:03 PM Received On: 08/04/2023 01:31 PM Reported On: 08/04/2023 11:57 PM

Barcode: 802304080595 Specimen: Serum Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9339718590

## **CLINICAL CHEMISTRY**

Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.28	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	8.49	μg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	3.074	uIU/mI	Non Pregnant: 0.4001-4.049 1st Trimester: 0.1298-3.10 2nd Trimester: 0.2749-2.652 3rd Trimester: 0.3127-2.947

# -- End of Report-

Dr. Debasree Biswas MD, Biochemistry

Clinical Biochemist MBBS, MD

Dr. Sujata Ghosh PhD, Biochemistry Biochemist M.Sc , Ph. D

## Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.

( -> Auto Authorized)



Patient Name: Mrs PRIYANKA MONDAL MRN: 37530000013307 Gender/Age: FEMALE, 33y (10/02/1990)

Collected On: 08/04/2023 05:34 PM Received On: 08/04/2023 06:00 PM Reported On: 08/04/2023 06:21 PM

Barcode: 802304080753 Specimen: Plasma Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9339718590

#### **CLINICAL CHEMISTRY**

Test	Result	Unit	<b>Biological Reference Interval</b>
Post Prandial Blood Sugar (PPBS) (Glucose Oxidase, Peroxidase)	99	mg/dL	Normal: 70-139 Pre-diabetes: 140-199 Diabetes: => 200 ADA standards 2019

#### Interpretations:

(ADA Standards Jan 2017)

FBS can be less than PPBS in certain conditions like post prandial reactive hypoglycaemia, exaggerated response to insulin, subclinical hypothyroidism, very lean/anxious individuals. In non-diabetic individuals, such patients can be followed up with GTT.

## -- End of Report-

Dr. Debasree Biswas MD, Biochemistry

Clinical Biochemist MBBS, MD

Dr. Sujata Ghosh PhD, Biochemistry Biochemist M.Sc , Ph. D

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.
   (Post Prandial Blood Sugar (PPBS) -> Auto Authorized)





Patient Name: Mrs PRIYANKA MONDAL MRN: 37530000013307 Gender/Age: FEMALE, 33y (10/02/1990)

Collected On: 08/04/2023 01:03 PM Received On: 08/04/2023 01:30 PM Reported On: 08/04/2023 02:18 PM

Barcode: 802304080596 Specimen: Plasma Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9339718590

#### **CLINICAL CHEMISTRY**

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase)	91	mg/dL	Normal: 70-99 Pre-diabetes: 100-125 Diabetes: => 126 ADA standards 2019

-- End of Report-

Dr. Debasree Biswas MD, Biochemistry

Clinical Biochemist MBBS, MD

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically. (Fasting Blood Sugar (FBS) -> Auto Authorized)

Dr. Sujata Ghosh PhD, Biochemistry Biochemist M.Sc, Ph. D





Patient Name: Mrs PRIYANKA MONDAL MRN: 37530000013307 Gender/Age: FEMALE, 33y (10/02/1990)

Collected On: 08/04/2023 01:03 PM Received On: 08/04/2023 06:42 PM Reported On: 10/04/2023 12:45 PM

Barcode: 872304080004 Specimen: Fluid & Swab Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9339718590

**CYTOLOGY** 

## **CERVICAL SMEAR FOR CYTOLOGY**

LAB NO	GC- 322/23
SPECIMEN TYPE	Cervical smear
MICROSCOPIC EXAMINATION	The 2014 Bethesda system Smear's studied are satisfactory for evaluation and show mainly superficial squamous cells, intermediate squamous cell and parabasal cells. Few clusters of endocervical cell are also seen. Monilia and T. vaginalis are absent. Dysplastic and malignant cells are absent. Mild infiltrate of inflammatory cells are seen in the smears.
IMPRESSION	Negative for intraepithelial lesion or malignancy

-- End of Report-



Dr. Sanjib Kumar Pattari

MD, Pathology

Consultant Pathology MBBS, MD. Reg No: 53635 (WBMC)

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Patient Name: Mrs PRIYANKA MONDAL MRN: 37530000013307 Gender/Age: FEMALE, 33y (10/02/1990)

Collected On: 08/04/2023 01:03 PM Received On: 08/04/2023 01:29 PM Reported On: 08/04/2023 02:20 PM

Barcode: 802304080597 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9339718590

#### **CLINICAL CHEMISTRY**

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	5.2	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	102.54	-	-

## Interpretation:

- 1. HbA1C above 6.5% can be used to diagnose diabetes provided the patient has symptoms. If the patient does not have symptoms with HbA1C>6.5%, repeat measurement on further sample. If the repeat test result is <6.5%, consider as diabetes high risk and repeat measurement after 6 months.
- 2. HbA1C measurement is not appropriate in diagnosing diabetes in children, suspicion of type 1 diabetes, symptoms of diabetes for less than 2 months, pregnancy, hemoglobinopathies, medications that may result sudden increase in glucose, anemia, renal failure, HIV infection, malignancies, severe chronic hepatic, and renal disease.
- 3. Any sample with >15% should be suspected of having a haemoglobin variant.

-- End of Report-

Dr. Sujata Ghosh PhD, Biochemistry Biochemist M.Sc , Ph. D

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Patient Name: Mrs PRIYANKA MONDAL MRN: 37530000013307 Gender/Age: FEMALE, 33y (10/02/1990)

Collected On: 08/04/2023 01:03 PM Received On: 08/04/2023 01:29 PM Reported On: 08/04/2023 01:54 PM

Barcode: 812304080379 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9339718590

# **HAEMATOLOGY LAB**

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	10.7 L	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.40	millions/ μL	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	34.1 L	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	77.4 L	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	24.4 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	31.5	%	31.5-34.5
Red Cell Distribution Width (RDW) (Calculated)	16.0 H	%	11.6-14.0
Platelet Count (Electrical Impedance)	162	$10^3/\mu$ L	150.0-400.0
Mean Platelet Volume (MPV) (Derived)	12.2 H	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	9.9	$10^3/\mu$ L	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCSn Technology)	64.2	%	40.0-75.0
Lymphocytes (VCSn Technology)	27.1	%	20.0-40.0
Monocytes (VCSn Technology)	5.0	%	2.0-10.0
Eosinophils (VCSn Technology)	3.4	%	1.0-6.0

Patient Name : Mrs PRIYANKA MONDAL	MRN: 37530000013307	Gender/Age : FEMA	ALE , 33y (10/02/1990)	
Basophils (VCSn Technology)	0.3	%	0.0-2.0	
NRBC (VCSn Technology)	0.0	/100 WBC	-	
Absolute Neutrophil Count (Calculated)	6.36	$10^3/\mu$ L	1.8-7.8	
Absolute Lympocyte Count (Calculated)	2.69	$10^3/\mu$ L	1.0-4.8	
Absolute Monocyte Count (Calculated)	0.5	$10^3/\mu$ L	0.0-0.8	
Absolute Eosinophil Count (Calculated)	0.34	$10^3/\mu$ L	0.0-0.45	
Absolute Basophil Count (Calculated)	0.03	$10^3/\mu$ L	0.0-0.2	

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

# -- End of Report-

8

Dr. Rakhi Mandal MD, Pathology Consultant Pathology MBBS, MD

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Final Report

#### **DEPARTMENT OF LABORATORY MEDICINE**

Patient Name: Mrs PRIYANKA MONDAL MRN: 37530000013307 Gender/Age: FEMALE, 33y (10/02/1990)

Collected On: 08/04/2023 01:03 PM Received On: 08/04/2023 02:13 PM Reported On: 08/04/2023 05:06 PM

Barcode: BR2304080073 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9339718590

# **IMMUNOHAEMATOLOGY**

Test Result Unit

BLOOD GROUP & RH TYPING

Blood Group (Column Agglutination Technology) B -

RH Typing (Column Agglutination Technology) Positive

-- End of Report-

Dr. Amal Kumar Saha MBBS, D.PED, ECFMG Blood Bank Officer

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Patient Name: Mrs PRIYANKA MONDAL MRN: 37530000013307 Gender/Age: FEMALE, 33y (10/02/1990)

Collected On: 08/04/2023 01:03 PM Received On: 08/04/2023 01:29 PM Reported On: 08/04/2023 02:44 PM

Barcode: 812304080378 Specimen: Whole Blood - ESR Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9339718590

## **HAEMATOLOGY LAB**

Test Result Unit Biological Reference Interval

Erythrocyte Sedimentation Rate (ESR) 65 H mm/1hr 0.0-12.0

(Modified Westergren Method)

-- End of Report-

8

Dr. Rakhi Mandal MD, Pathology Consultant Pathology MBBS, MD

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Patient Name: Mrs PRIYANKA MONDAL MRN: 37530000013307 Gender/Age: FEMALE, 33y (10/02/1990)

Collected On: 08/04/2023 01:03 PM Received On: 08/04/2023 03:41 PM Reported On: 08/04/2023 06:19 PM

Barcode: 822304080058 Specimen: Urine Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9339718590

# **CLINICAL PATHOLOGY**

Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Volume	40	ml	-
Colour	Straw	-	-
Appearance	Clear	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (Mixed PH Indicator)	6.0	-	4.8-7.5
Sp. Gravity (Dual Wavelength Reflectance )	1.002	-	1.002-1.030
Protein (Protein Error Of PH Indicator)	Negative	-	-
Urine Glucose (Glucose Oxidase, Peroxidase)	Negative	-	Negative
Ketone Bodies (Legal's Method)	Negative	-	Negative
Bile Salts (Dual Wavelength Reflectance/Manual)	Negative	-	Negative
Bile Pigment (Bilirubin) (Coupling Of Bilirubin With Diazonium Salt)	Negative	-	Negative
<b>Urobilinogen</b> (Coupling Reaction Of Urobilinogen With A Stable Diazonium Salt In Buffer)	Normal	-	Normal
Urine Leucocyte Esterase (Enzymatic, Indoxyl Ester And Diazonium Salt)	Negative	-	Negative
Blood Urine (Pseudo - Enzymatic Test, Organic Peroxidase And Chromogen)	Negative	-	Negative
Nitrite (Modified Griess Reaction)	Negative	-	Negative

Patient Name: Mrs PRIYANKA MONDAL	MRN: 37530000013307	Gender/Age : I	FEMALE , 33y (10/02/1990)	
MICROSCOPIC EXAMINATION				
Pus Cells	0-2	/hpf	1-2	
RBC	NIL	/hpf	0 - 3	
Epithelial Cells	1-2	/hpf	2-3	
Crystals	NIL	-	-	
Casts	NIL	-	-	

--End of Report-



Dr. Rakhi Mandal MD, Pathology Consultant Pathology MBBS, MD

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





# **ADULT TRANS-THORACIC ECHO REPORT**

PATIENT NAME : Mrs PRIYANKA MONDAL

**GENDER/AGE**: Female, 33 Years

LOCATION :

PATIENT MRN : 37530000013307 PROCEDURE DATE : 08/04/2023 04:38 PM

**REQUESTED BY**: EXTERNAL

• NO SIGNIFICANT ECHOCARDIOGRAPHIC ABNORMALITY DETECTED.

**FINDINGS** 

**CHAMBERS** 

LEFT ATRIUM : NORMAL SIZED RIGHT ATRIUM : NORMAL SIZED

LEFT VENTRICLE : NORMAL SIZED CAVITY. NO REGIONAL WALL MOTION ABNORMALITY. GOOD SYSTOLIC

FUNCTION WITH EJECTION FRACTION: 65 %. NORMAL DIASTOLIC FLOW PATTERN.

RIGHT VENTRICLE : NORMAL SIZE AND THICKNESS WITH NORMAL FUNCTION

**VALVES** 

MITRAL : NORMAL.
AORTIC : NORMAL.
TRICUSPID : NORMAL.
PULMONARY : NORMAL.

**SEPTAE** 

IAS : INTACT IVS : INTACT

**ARTERIES AND VEINS** 

AORTA : NORMAL, LEFT AORTIC ARCH

PA : NORMAL SIZE

IVC : NORMAL SIZE & COLLAPSIBILITY

SVC & CS : NORMAL PULMONARY VEINS : NORMAL

PERICARDIUM : NORMAL PERICARDIAL THICKNESS. NO EFFUSION

INTRACARDIAC MASS : NO TUMOUR, THROMBUS OR VEGETATION SEEN

OTHERS : NIL.

Joranne Meter

DR. PRASUN HALDER ASSOCIATE CONSULTANT ECHOCARDIOGRAPHY MBBS, PGDCC

MITHU MONDAL TECHNICIAN

08/04/2023 04:38 PM

 PREPARED BY
 : SARMISTHA PRAMANIK(335772)
 PREPARED ON
 : 08/04/2023 05:54 PM

 GENERATED BY
 : MADHUPARNA DASGUPTA(333433)
 GENERATED ON
 : 11/04/2023 12:13 PM

Patient Name	PRIYANKA MONDAL	Requested By	EXTERNAL
MRN	37530000013307	Procedure DateTime	2023-04-08 15:53:36
Age/Sex	33Y 1M/Female	Hospital	NH-RTIICS

# **USG OF WHOLE ABDOMEN (SCREENING)**

## LIVER:

It is enlarged in size and increased in echogenicity. No focal SOL is seen. The intrahepatic biliary radicles are not dilated.

## **PORTAL VEIN:**

The portal vein is normal in calibre at the porta. There is no intraluminal thrombus. No collaterals are seen.

# **GALL BLADDER:**

It is optimally distended. No calculus or sludge is seen within it. The wall is not thickened.

#### CBD:

The common duct is not dilated at porta. No intraluminal calculus is seen.

#### **SPLEEN:**

It is normal in size measuring 9.1 cm and echogenicity. No focal SOL is seen. The splenoportal axis is patent and is normal in dimensions.

#### **PANCREAS:**

It is normal in size and echogenicity. The duct is not dilated. No calcification or focal SOL is seen.

## **KIDNEYS:**

Both kidneys are normal in size, position and echogenicity. The corticomedullary differentiation is maintained. No hydronephrosis, calculus or mass is seen.

Right kidney and left kidney measures 10.7 x 4.1 cm and 11.1 x 5.4 cm respectively.

#### **URINARY BLADDER:**

It is normal in capacity. The wall is not thickened. No intraluminal calculus or mass is seen.

#### **UTERUS:**

It is anteverted, normal in size measuring  $7.5 \times 4.3 \times 4.2$  cm and normal echo pattern. No focal SOL is seen. The endometrial echoline is central in position. Endometrium is not thickened (and measures 0.4 cm). The cervix appears normal.

#### **OVARIES:**

The ovaries are normal in size, shape and echotexture. Dominant follicle in right ovary.

The right and left ovaries measures 2.8 x 1.6 cm and 2.6 x 1.9 cm respectively.

#### IMPRESSION:

• Hepatomegaly with grade-I fatty changes.

#### NOT FOR MEDICO LEGAL PURPOSES

This is only a Radiological Impression and not Diagnosis. Like all diagnostic modalities, USG also has its limitations. Therefore USG report should be interpreted in correlation with clinical and pathological findings.

All typing and topographical error is regretted and if detected at any time is correctable. Please inform us immediately.

Assist By: Sutapa



Dr. Somali Roy

Consultant Sonologist

\* This is a digitally signed valid document. Reported Date/Time: 2023-04-08 16:05:17

Patient Name	PRIYANKA MONDAL	Requested By	EXTERNAL
MRN	37530000013307	Procedure DateTime	2023-04-08 13:48:12
Age/Sex	33Y 1M/Female	Hospital	NH-RTIICS

## **CHEST RADIOGRAPH (PA VIEW)**

## **FINDINGS:**

- Trachea is normal and is central.
- The cardiac shadow is normal in contour.
- Mediastinum and great vessels are within normal limits.
- The hilar shadows are within normal limits.
- The lung fields and bronchovascular markings appear normal.
- The costo-phrenic angles are clear.
- Both the diaphragmatic domes appear normal.
- The visualized bones and soft tissue appear normal.

# **IMPRESSION**:

• No significant radiological abnormality detected.

REPORTED BY DR. ARPAN CHOWDHURY

# NOT FOR MEDICO LEGAL PURPOSES

This is only a Radiological Impression and not Diagnosis. Like all diagnostic modalities, X-RAY also has its limitations. Therefore X-RAY report should be interpreted in correlation with clinical and pathological findings.

All typing and topographical error is regretted and if detected at any time is correctable. Please inform us immediately.

Dr. Gunjan Gupta

MBBS, MD (Radiodiagnosis)