Indra Diagnostic Centre, Prayagraj, UP

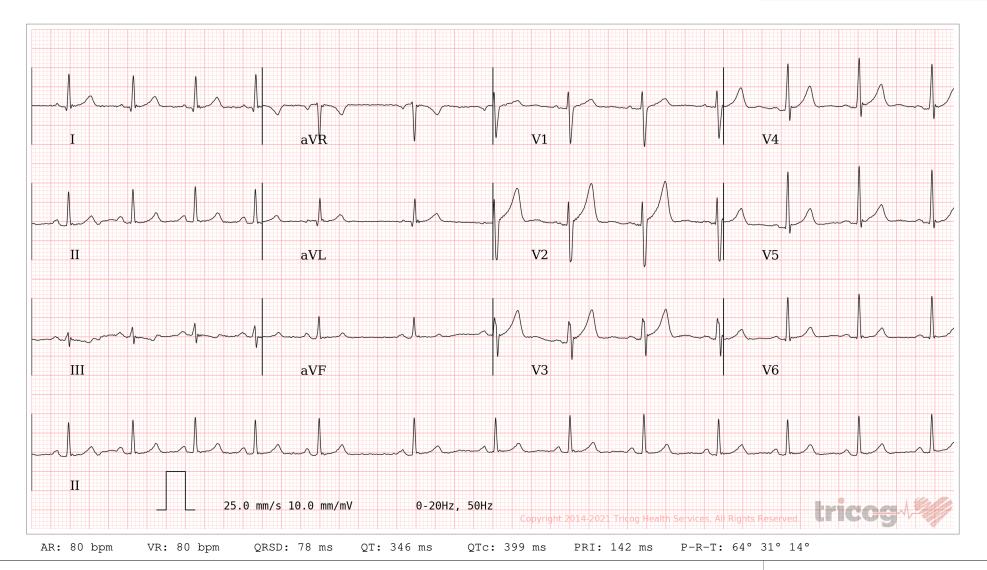


Age / Gender: 27/Male

Date and Time: 14th Jul 21 11:12 AM

Patient ID: ALDP0112532122

Patient Name: Mr.PRASHANT GANGWAR - 126424



ECG Within Normal Limits: Sinus Rhythm, Normal Axis, with Marked Sinus Arrhythmia.Please correlate clinically.

AUTHORIZED BY

annt B

Dr. Charit MD, DM: Cardiology Du Sodoth)

Dr Sadath Uzma

63382

72392

REPORTED BY

Add: Kamla Nehru Road, Old Katra, Prayagraj

Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206





Patient Name : 14/Jul/2021 11:00:29 : Mr.PRASHANT GANGWAR - 126424 Registered On Collected Age/Gender : 14/Jul/2021 11:08:53 : 27 Y 11 M 14 D /M UHID/MR NO : ALDP.0000076133 Received : 14/Jul/2021 11:23:02 Visit ID : ALDP0112532122 Reported : 14/Jul/2021 12:52:13 Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status

: Final Report

DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Group (ABO & Rh typing) * , Bloo	od			
Blood Group	AB			
Rh (Anti-D)	POSITIVE			
COMPLETE BLOOD COUNT (CBC) *, Blo	ood			
Haemoglobin	12.30	g/dl	13.5-17.5	PHOTOMETRIC
TLC (WBC)	6,000.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils)	51.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	43.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	4.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	2.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE
ESR				
Observed	22.00	Mm for 1st hr		
Corrected	-	Mm for 1st hr	. <9	
PCV (HCT)	35.00	cc %	40-54	
Platelet count				
Platelet Count	2.43	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE
PDW (Platelet Distribution width)	16.20	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	46.60	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.31	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	12.70	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				22
RBC Count	5.18	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE

Add: Kamla Nehru Road, Old Katra,Prayagraj Ph: 9235447965,0532-2548257

CIN: U85110DL2003PLC308206





Patient Name : 14/Jul/2021 11:00:29 : Mr.PRASHANT GANGWAR - 126424 Registered On Age/Gender : 14/Jul/2021 11:08:53 : 27 Y 11 M 14 D /M Collected UHID/MR NO : ALDP.0000076133 Received : 14/Jul/2021 11:23:02 Visit ID : ALDP0112532122 Reported : 14/Jul/2021 12:52:13 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	67.70	fl	80-100	CALCULATED PARAMETER
MCH	23.80	pg	28-35	CALCULATED PARAMETER
MCHC	35.10	%	30-38	CALCULATED PARAMETER
RDW-CV	13.40	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	41.50	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count Absolute Eosinophils Count (AEC)	3,060.00 120.00	/cu mm /cu mm	3000-7000 40-440	

Add: Kamla Nehru Road, Old Katra, Prayagraj Ph: 9235447965,0532-2548257

CIN: U85110DL2003PLC308206





Patient Name : Mr.PRASHANT GANGWAR - 126424 Registered On : 14/Jul/2021 11:00:29 Age/Gender Collected : 14/Jul/2021 14:56:57 : 27 Y 11 M 14 D /M UHID/MR NO : ALDP.0000076133 Received : 14/Jul/2021 15:02:41 Visit ID Reported : 14/Jul/2021 15:18:00 : ALDP0112532122 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 Sample:Plasma	91.30	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 **GOD POD** 160.30 mg/dl <140 Normal 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.

Add: Kamla Nehru Road, Old Katra, Prayagraj

Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206





Patient Name : Mr.PRASHANT GANGWAR - 126424 Registered On : 14/Jul/2021 11:00:30 Age/Gender Collected : 14/Jul/2021 11:08:53 : 27 Y 11 M 14 D /M UHID/MR NO : ALDP.0000076133 Received : 15/Jul/2021 10:48:52 Visit ID : ALDP0112532122 Reported : 15/Jul/2021 11:40:41 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)	5.30	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	34.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	105	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 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.

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

^{**}Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

Add: Kamla Nehru Road, Old Katra,Prayagraj Ph: 9235447965,0532-2548257

CIN: U85110DL2003PLC308206





Patient Name : Mr.PRASHANT GANGWAR - 126424 Registered On : 14/Jul/2021 11:00:30 Age/Gender : 14/Jul/2021 11:08:53 : 27 Y 11 M 14 D /M Collected UHID/MR NO : ALDP.0000076133 Received : 15/Jul/2021 10:48:52 Visit ID Reported : 15/Jul/2021 11:40:41 : ALDP0112532122

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

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.

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

Add: Kamla Nehru Road, Old Katra,Prayagraj

Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206





: 14/Jul/2021 11:00:30 Patient Name : Mr.PRASHANT GANGWAR - 126424 Registered On Collected : 14/Jul/2021 11:08:53 Age/Gender : 27 Y 11 M 14 D /M UHID/MR NO : ALDP.0000076133 Received : 14/Jul/2021 11:23:02 Visit ID : ALDP0112532122 Reported : 14/Jul/2021 13:56:31 Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) * Sample:Serum	11.40	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	1.20	mg/dl	0.7-1.3	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) Sample:Serum	77.00	ml/min/1.73m2	2 - 90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid Sample:Serum	7.16	mg/dl	3.4-7.0	URICASE
L.F.T.(WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST) SGPT / Alanine Aminotransferase (ALT) Gamma GT (GGT) Protein Albumin Globulin A:G Ratio Alkaline Phosphatase (Total) Bilirubin (Total) Bilirubin (Direct) Bilirubin (Indirect)	47.10 65.90 90.80 7.60 4.20 3.40 1.24 85.50 0.40 0.20	U/L U/L IU/L gm/dl gm/dl gm/dl U/L mg/dl mg/dl mg/dl	< 35 < 40 11-50 6.2-8.0 3.8-5.4 1.8-3.6 1.1-2.0 42.0-165.0 0.3-1.2 < 0.30 < 0.8	IFCC WITHOUT P5P IFCC WITHOUT P5P OPTIMIZED SZAZING BIRUET B.C.G. CALCULATED CALCULATED IFCC METHOD JENDRASSIK & GROF JENDRASSIK & GROF JENDRASSIK & GROF
LIPID PROFILE (MINI) * , Serum Cholesterol (Total)	185.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol) LDL Cholesterol (Bad Cholesterol)	35.60 117	mg/dl mg/dl	30-70 < 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	
VLDL Triglycerides	32.64 163.20	mg/dl mg/dl	10-33 < 150 Normal 150-199 Borderline High	CALCULATED GPO-PAP

Add: Kamla Nehru Road, Old Katra,Prayagraj Ph: 9235447965,0532-2548257

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Patient Name : 14/Jul/2021 11:00:30 : Mr.PRASHANT GANGWAR - 126424 Registered On Age/Gender : 27 Y 11 M 14 D /M Collected : 14/Jul/2021 11:08:53 UHID/MR NO : ALDP.0000076133 Received : 14/Jul/2021 11:23:02 Visit ID : ALDP0112532122 Reported : 14/Jul/2021 13:56:31 Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. : Final Report Status

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

Result Rechecked

Add: Kamla Nehru Road, Old Katra, Prayagraj

Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206





Patient Name : 14/Jul/2021 11:00:30 : Mr.PRASHANT GANGWAR - 126424 Registered On Age/Gender : 14/Jul/2021 14:03:46 : 27 Y 11 M 14 D /M Collected UHID/MR NO : ALDP.0000076133 Received : 14/Jul/2021 14:47:48 Visit ID : ALDP0112532122 Reported : 14/Jul/2021 15:43:02

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINATION, ROUTINE *	, Urine			
Color	LIGHT YELLOW			
Specific Gravity	1.005			
Reaction PH	Acidic (6.0)			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) Microscopic Examination:	ABSENT			
Epithelial cells	1-3/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	1-3/h.p.f			MICROSCOPIC EXAMINATION
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			
STOOL, ROUTINE EXAMINATION *	, Stool			
Color	BROWNISH			
Consistency	SEMI SOLID			
Reaction (PH)	Neutral (7.0)			
Mucus	ABSENT			
Blood	ABSENT			
Worm	ABSENT			
Pus cells	ABSENT			

Add: Kamla Nehru Road, Old Katra,Prayagraj Ph: 9235447965,0532-2548257

CIN: U85110DL2003PLC308206





Patient Name : 14/Jul/2021 11:00:30 : Mr.PRASHANT GANGWAR - 126424 Registered On : 27 Y 11 M 14 D /M Age/Gender Collected : 14/Jul/2021 14:03:46 UHID/MR NO : ALDP.0000076133 Received : 14/Jul/2021 14:47:48 Visit ID : ALDP0112532122 Reported : 14/Jul/2021 15:43:02

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
RBCs	ABSENT			
Ova	ABSENT			
Cysts	ABSENT			
Others	ABSENT			
SUGAR, FASTING STAGE * , Urine				
Sugar, Fasting stage	ABSENT	gms%		

Interpretation:

(+) < 0.5

(++) 0.5-1.0

(+++) 1-2

(++++) > 2

SUGAR, PP STAGE * , Urine

Sugar, PP Stage ABSENT

Interpretation:

(+) < 0.5 gms%

(++) 0.5-1.0 gms%

(+++) 1-2 gms%

(++++) > 2 gms%

Add: Kamla Nehru Road, Old Katra, Prayagraj Ph: 9235447965,0532-2548257

CIN: U85110DL2003PLC308206



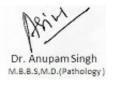


Patient Name : Mr.PRASHANT GANGWAR - 126424 Registered On : 14/Jul/2021 11:00:30 : 14/Jul/2021 11:08:53 Age/Gender Collected : 27 Y 11 M 14 D /M UHID/MR NO : ALDP.0000076133 Received : 15/Jul/2021 10:21:15 Visit ID Reported : 15/Jul/2021 11:48:18 : ALDP0112532122 : Dr.Mediwheel - Arcofemi Health Care Ltd. Ref Doctor Status : Final Report

DEPARTMENT OF IMMUNOLOGY

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE - TOTAL **, Serum				
T3, Total (tri-iodothyronine)	125.62	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	8.26	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	2.43	μIU/mL	0.27 - 5.5	CLIA
Interpretation:				
•		0.3-4.5 μΙ	J/mL First Trimest	er
		0.4-4.2 μΙ	J/mL Adults	21-54 Years
		0.5-4.6 μΙ	J/mL Second Trim	ester
		•	J/mL Adults	55-87 Years
		0.7-64 μΙΙ	J/mL Child(21 wk	- 20 Yrs.)
		0.7-27 μΙ	J/mL Premature	28-36 Week
		0.8-5.2 μΙ	J/mL Third Trimes	ster
		1-39 μΙΙ	J/mL Child	0-4 Days
		1.7-9.1 μIU	J/mL Child	2-20 Week
		2.3-13.2 μΙ	J/mL Cord Blood	> 37Week

- 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.



Add: Kamla Nehru Road, Old Katra,Prayagraj Ph: 9235447965,0532-2548257

CIN: U85110DL2003PLC308206





Patient Name : Mr.PRASHANT GANGWAR - 126424 Registered On : 14/Jul/2021 11:00:31

 Age/Gender
 : 27 Y 11 M 14 D /M
 Collected
 : N/A

 UHID/MR NO
 : ALDP.0000076133
 Received
 : N/A

Visit ID : ALDP0112532122 Reported : 14/Jul/2021 11:48:19

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

- 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.

• NO SIGNIFICANT RADIOLOGICAL ABNORMALITY SEEN ON PRESENT STUDY.

DR. ANIL KUMAR MD (Radiology)

Add: Kamla Nehru Road, Old Katra, Prayagraj

Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206





Patient Name : Mr.PRASHANT GANGWAR - 126424 Registered On : 14/Jul/2021 11:00:31

 Age/Gender
 : 27 Y 11 M 14 D /M
 Collected
 : N/A

 UHID/MR NO
 : ALDP.0000076133
 Received
 : N/A

Visit ID : ALDP0112532122 Reported : 14/Jul/2021 11:35:14

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) *

The liver is normal in size (14.5 cm), shape and echogenecity. No focal lesion is seen. No intra hepatic biliary radicle dilation seen.

Gall bladder is well distended and is normal.

Portal vein and CBD are not dilated.

Pancreas is normal in size, shape and echogenecity.

Spleen is normal in size (9.6 cm), shape and echogenecity.

Right kidney is normal in size, shape and echogenecity. **Few small calculi, largest of size 4.8 mm are seen at middle calvx**. Right pelvicalyceal system is not dilated.

Right kidney measures: 9.1 x 4.5 cm

Left kidney is normal in size, shape and echogenecity. No focal lesion or calculus seen. Left pelvicalyceal system is not dilated.

Left kidney measures: 9.5 x 5.4 cm

Urinary bladder is normal in shape, outline and distension. Lumen is anechoic and no wall thickening seen.

The prostate is normal in size (vol- 10.9 cc), shape and echopattern.

No free fluid is seen in the abdomen/pelvis.

High Resolution USG - No abnormal bowel wall thickening or bowel loop dilatation is seen. Ileocecal junction and cecum is seen normally. Appendix is not visualized. No mesenteric lymphadenopathy is seen.

IMPRESSION :-- Right renal calculi.

Please correlate clinically

<u>Note</u>:- Impression is a professional opinion & not a diagnosis (Not for medico legal purpose). All modern machine / procedures have their limitations. If there is variance clinically this examination may be repeated or re-evaluated by other investigations. Discrepancies due to technical or typing errors should be reported for correction within seven days. No compensation liability stands.

*** End Of Report ***

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

DR. ANIL KUMAR 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 *

*Facilities Available at Select Location



20, Kamla Nehru Rd, Police Line, Prayagraj, Uttar Pradesh 211004, India

Latitude

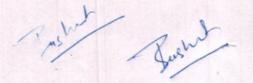
25.460929°

Longitude 8 1.849543°

LOCAL 10:51:39 GMT 05:21:39 WEDNESDAY 07.14.2021 ALTITUDE 56 METER

9457666\$ 758







Dr. R.K. Verma M.B.B.9.

INDRA DIAGNOSTIC CENTRE 49/19-B, Kamia Nehru Road Katra, Prayagraj