



Stool sample not given by client.

Chandan Diagnostic Center 99, Shivaji Nagar, Mahmoorganj Varanasi-221010 (U.P.) Phone No.:0542-2223232

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

Chanter and





Name of Company: Muliwheet - BOB Name of Executive: Dong Morrayan Singh Date of Birth: 30/0571984 Sex: Male Height: 166 Weight: 68 BMI (Body Mass Index) : 2 4. 7 Chest (Expiration / Inspiration) 95 98 86 Abdomen: Blood Pressure: 124 82 Pulse: 803n regular RR: 16 Ident Mark: Male on Pett Engury Vertigo : NO Any Medications: NO Any Surgical History: NO Habits of alcoholism/smoking/tobacco: NO Chief Complaints if any: NO Lab Investigation Reports: Report AH. Eye Check up vision & Color vision: Normal Left eye: 0.1 Right eye: 0.1 Normal







Farvision: Normal

Dental check up : Norma

ENT Check up : premal

Final impression

Certified that I examined Jay Nevergan & Wyh is presently in good health and free from any cardio respiratory/communicable ailment, he/she is fit to join any organization.

Client Signature :-

Dr. R.C. ROY

MBBS. MD. (Radie Diagnosis) Signature of Medical PREmMer 26918 Name & Qualification Ar. A. May 19303 MM. Date. 19 59 1. Place



: March

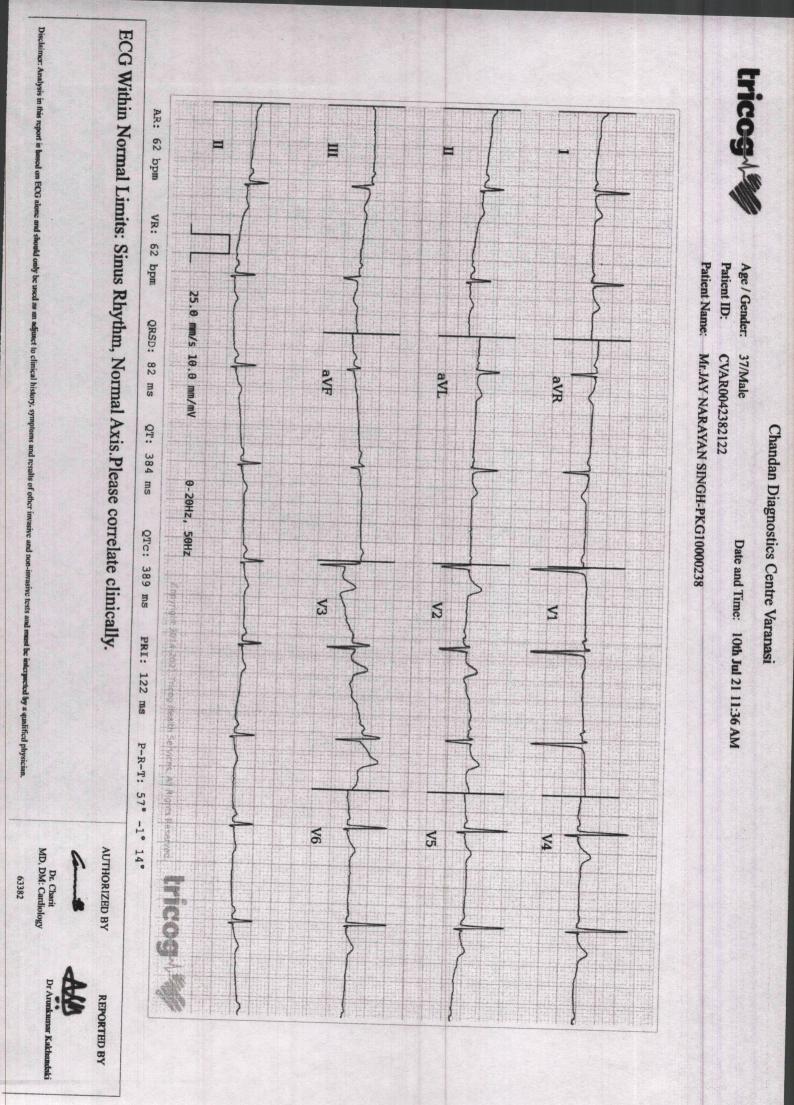
जय नारायण सिंह
JAY NARAYAN SINGH
जन्म तिथि/ DOB: 30/05/1984
yaran
phoneChandan
by
yaran
phoneपुरुष / MALE

मरा आधार, मरा पहचान

3211 2906 5598

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Chandan Diagnostic Center 99,Shivaji Nagar, Mahmeerganj Varanasi-221010 (U.P.) Phone No.:0542-2223232 Government of India





Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-2223232 CIN : U85110DL2003PLC308206



Test Name	Result	Unit	Bio. Ref. Interval	Method	
	MEDIWHEEL BANK OF BARODA	MALE & FEMA	LE BELOW 40 YRS		
DEPARTMENT OF HAEMATOLOGY					
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report		
Visit ID	: CVAR0042382122	Reported	: 10/Jul/2021 14:05	5:43	
UHID/MR NO	: CVAR.0000020235	Received	: 10/Jul/2021 12:03	3:33	
Age/Gender	: 37 Y 0 M 0 D /M	Collected	: 10/Jul/2021 11:45	5:30	
Patient Name	: Mr.JAY NARAYAN SINGH-PKG10000238	Registered On	: 10/Jul/2021 11:14	1:04	

Blood Group (ABO & Rh typing) * , Blood

	Blood Group (ABO & Rh typing) * , Blood				
	Blood Group Rh (Anti-D)	B POSITIVE			
(COMPLETE BLOOD COUNT (CBC) * , Blood				
	Haemoglobin	14.00	g/dl	13.5-17.5	PHOTOMETRIC
	TLC (WBC)	6,500	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
	DLC				
	Polymorphs (Neutrophils)	50.00	%	55-70	ELECTRONIC IMPEDANCE
	Lymphocytes	40.00	%	25-40	ELECTRONIC IMPEDANCE
	Monocytes	2.00	%	3-5	ELECTRONIC IMPEDANCE
	Eosinophils	8.00	%	1-6	ELECTRONIC
	Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE
	ESR				
	Observed	10.00	Mm for 1st hr.		
	Corrected	6.00	Mm for 1st hr.	< 9	
	PCV (HCT)	42.60	cc %	40-54	
	Platelet count				
	Platelet Count	1.60	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE
	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)	12.30	fL	6.5-12.0	ELECTRONIC IMPEDANCE
	RBC Count				
	RBC Count	4.97	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE





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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	85.70	fl	80-100	CALCULATED PARAMETER
МСН	28.20	pg	28-35	CALCULATED PARAMETER
МСНС	32.90	%	30-38	CALCULATED PARAMETER
RDW-CV	15.00	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	47.30	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,000.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	480.00	/cu mm	40-440	

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





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UHID/MR NO	: CVAR.0000020235	Received	: 10/Jul/2021 12:03:33
Visit ID	: CVAR0042382122	Reported	: 10/Jul/2021 14:36:28
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. Interva	al Method
Glucose Fasting Sample:Plasma	95.00		< 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	145.00	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.

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)	106	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.





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Name

Result

Unit

Bio. Ref. Interval Method

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

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.

BUN (Blood Urea Nitrogen) *

7.30

mg/dL 7.0-23.0

CALCULATED





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	ı	Unit Bio. Ref. Inte	erval Method
Sample:Serum				
Creatinine Sample:Serum	1.10	mg/dl	0.7-1.3	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) Sample:Serum	101.00	ml/min/1.73	m2 - 90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid Sample:Serum	7.50	mg/dl	3.4-7.0	URICASE
L.F.T.(WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST) SGPT / Alanine Aminotransferase (ALT)	30.00 32.00	U/L U/L	< 35 < 40	IFCC WITHOUT P5P
Gamma GT (GGT)	18.00 6.70	IU/L gm/dl	11-50 6.2-8.0	OPTIMIZED SZAZING BIRUET
Albumin Globulin	4.40	gm/dl gm/dl	3.8-5.4 1.8-3.6	B.C.G. CALCULATED
A:G Ratio	1.91		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total) Bilirubin (Total)	93.80 0.80	U/L mg/dl	42.0-165.0 0.3-1.2	IFCC METHOD JENDRASSIK & GROF
Bilirubin (Direct) Bilirubin (Indirect)	0.30 0.50	mg/dl mg/dl	< 0.30 < 0.8	JENDRASSIK & GROF JENDRASSIK & GROF
LIPID PROFILE (MINI) * , Serum				
Cholesterol (Total)	145.00	mg/dl	<200 Desirable 200-239 Borderline H > 240 High	CHOD-PAP High
HDL Cholesterol (Good Cholesterol) LDL Cholesterol (Bad Cholesterol)	40.00 80	mg/dl mg/dl	30-70 < 100 Optimal 100-129 Nr. Optimal/Above Optir 130-159 Borderline H 160-189 High > 190 Very High	
VLDL Triglycerides	25.22 126.10	mg/dl mg/dl	10-33 < 150 Normal 150-199 Borderline H 200-499 High >500 Very High	CALCULATED GPO-PAP High S. N. Simba Dr.S.N. Sinha (MD Path



CHANDAN DIAGNOSTIC CENTRE Add: 99, Shivaji Nagar Mahmoorganj, Varanasi Chandan

Since 1991

Ph: 9235447795,0542-2223232 CIN: U85110DL2003PLC308206



: Mr.JAY NARAYAN SINGH-PKG10000238	Registered On	: 10/Jul/2021 11:14:05
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: CVAR.0000020235	Received	: 10/Jul/2021 15:59:26
: CVAR0042382122	Reported	: 10/Jul/2021 16:02:18
: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report
	: 37 Y 0 M 0 D /M : CVAR.0000020235 : CVAR0042382122	: 37 Y 0 M 0 D /M Collected : CVAR.000020235 Received : CVAR0042382122 Reported

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINATION, ROUTINE * , υ	rine			
Color	LIGHT YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic (6.5)			DIPSTICK
Protein	ACIAIC (0.5)	mg %	< 10 Absent	DIPSTICK
Protein	ABSEINT	ing %	< 10 Absent 10-40 (+)	DIPSTICK
			40-200 (++)	
			200-500 (+++)	
			> 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+)	DIPSTICK
			0.5-1.0 (++)	
			1-2 (+++)	
			> 2 (++++)	
Ketone	ABSENT	, 11 × 2		DIPSTICK
Bile Salts	ABSENT			
Bile P <mark>igment</mark> s	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT		and the second second	
Microscopic Examination:				
Epithelial cells	1-2/h.p.f			MICROSCOPIC
				EXAMINATION
Pus cells	ABSENT			MICROSCOPIC
				EXAMINATION
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			
SUGAR, FASTING STAGE * , Urine				
Sugar, Fasting stage	ABSENT	gms%		

Interpretation:

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

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DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

|--|

SUGAR, PP STAGE * , Urine

Sugar, PP Stage

ABSENT

Interpretation:

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

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





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UHID/MR NO	: CVAR.0000020235	Received	: 10/Jul/2021 16:19:37
Visit ID	: CVAR0042382122	Reported	: 10/Jul/2021 16:22:17
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)	103.00	ng/dl	84.61-201.7	CLIA	
T4, Total (Thyroxine)	4.40	ug/dl	3.2-12.6	CLIA	
TSH (Thyroid Stimulating Hormone)	2.11	µIU/mL	0.27 - 5.5	CLIA	
		,			

Interpretation:

0.3-4.5	µIU/mL	First Trimest	er
0.4-4.2	µIU/mL	Adults	21-54 Years
0.5-4.6	µIU/mL	Second Trim	ester
0.5-8.9	µIU/mL	Adults	55-87 Years
0.7-64	µIU/mL	Child(21 wk	- 20 Yrs.)
0.7-27	µIU/mL	Premature	28-36 Week
0.8-5.2	µIU/mL	Third Trimes	ter
1-39	µIU/mL	Child	0-4 Days
1.7-9.1	µIU/mL	Child	2-20 Week
2.3-13.2	µIU/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.

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





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DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA * (500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

DIGITAL 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: NORMAL SKIAGRAM

Dr. Raveesh Chandra Roy (MD-Radio)

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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

The liver measures 11.8 cm in mid clavicular line. It is normal in 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 measures 9.2 mm in caliber. CBD measures 3.8 mm in caliber.

Pancreas is normal in size, shape and echogenecity.

Spleen is normal in size (9.3 cm in its long axis), shape and echogenecity.

Right kidney is normal in size, shape and echogenecity. No focal lesion or calculus seen. Right pelvicalyceal system is not dilated.Right kidney measures : 9.2 x 3.8cm.

Left kidney is normal in size, shape and echogenecity. No focal lesion or calculus seen. Left

pelvicalyceal system is not dilated. Left kidney measures : 9.7 x 4.6 cm.

Urinary bladder is almost empty. Prevoid urine volume 15 cc.

The prostate is normal in size $(36 \times 30 \times 25 \text{ mm} / 14 \text{gms})$, shape and echopattern.

No free fluid is seen in the abdomen/pelvis.

IMPRESSION : No significant abnormality seen.

Please correlate clinically

*** End Of Report ***

Result/s to Follow: STOOL, ROUTINE EXAMINATION, ECG / EKG

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*

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P- 93, Shivaji Nagar Colony, Mahmoorganj, Varanasi, Uttar Pradesh 221010, India Latitude Longitude 25.305430° 82.979113° LOCAL 11:38:48 SATURDAY 07.10.2021 GMT 06:08:48 ALTITUDE 18 METER