Chandan Diagnostic

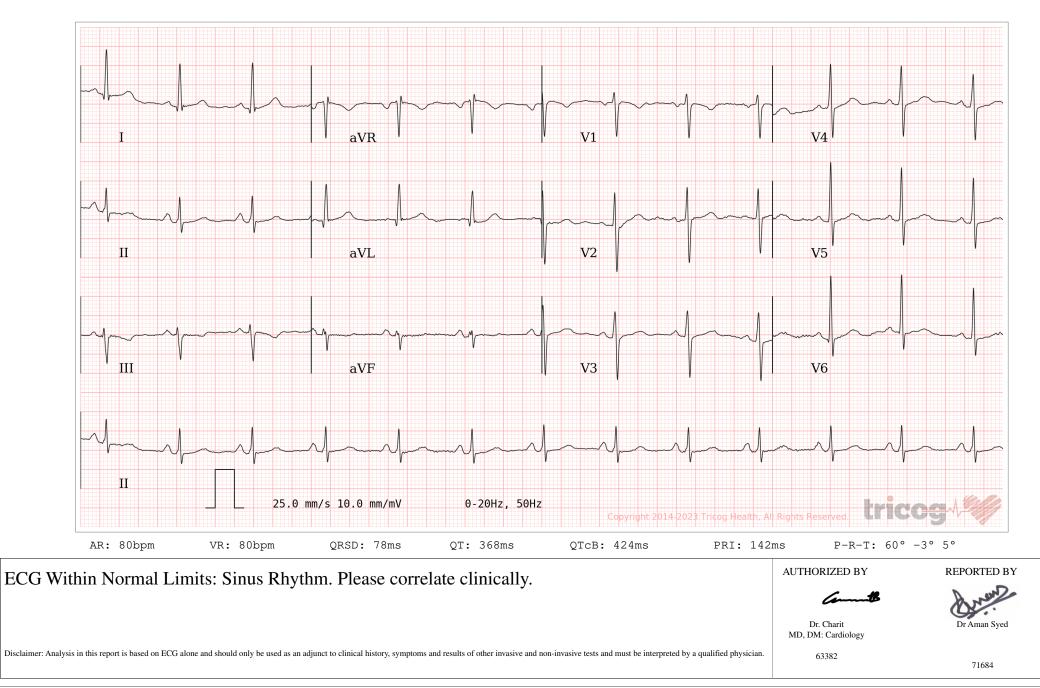


Age / Gender: 42/Male Date and

Date and Time: 27th May 23 9:55 AM

Patient ID: CVAR0015972324

Patient Name: Mr.RAMESH KUMAR PATEL -PKG10000236



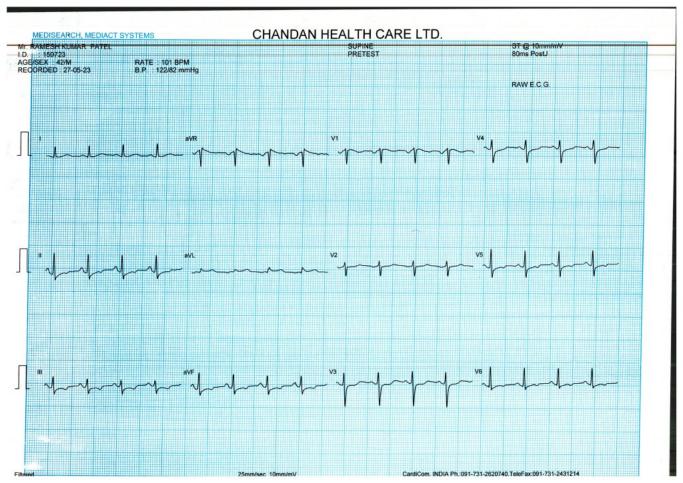


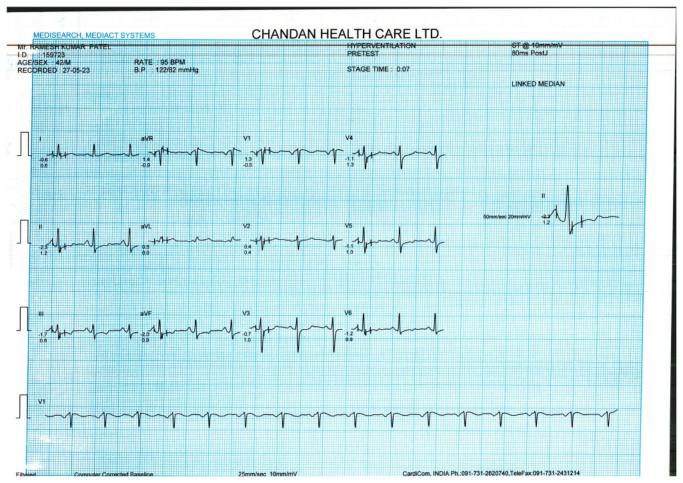
MEDISEARCH, MEDIACT SYSTEMS

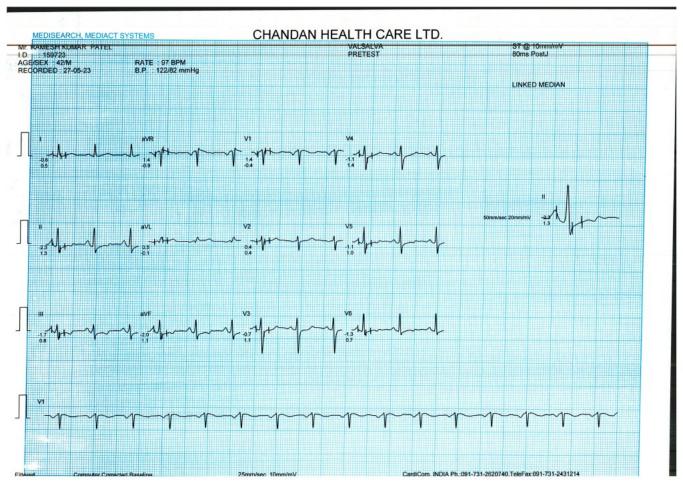
CHANDAN HEALTH CARE LTD.

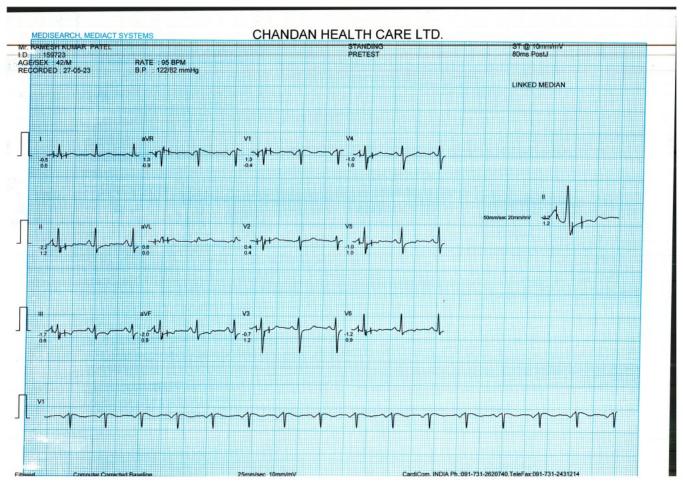
99-SHIVAJI NAGAR MAHMOORGANJ VARANASI-9839703068

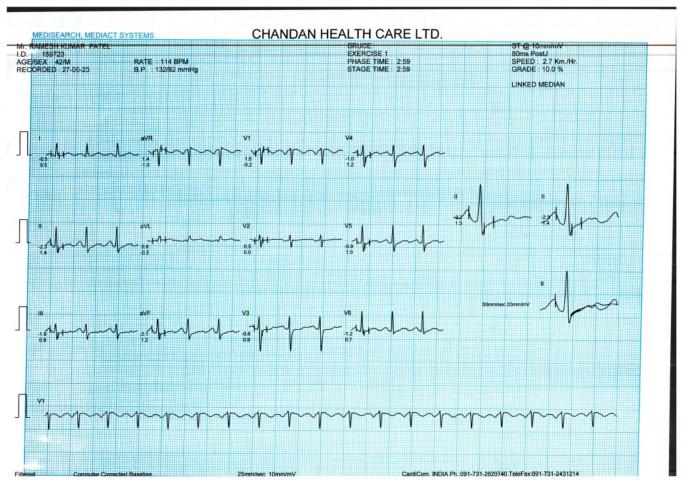
Sex: 42/M by MEDIWHEI ation1 : ation2 : ation3 :	EL		Ht/Wt : 161/72 Recorded : 27-0	5-23		Protocol: BRUC History: Medication1 : Medication2 : Medication3 :	E				
PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100	H	ST LEVEL (mm) V2	V5	METS
JPINE					101	122/82	123	-2.2	0.3	-1.2	
PERVENT	0:07	0:07			95	122/82	115	-2.3	0.4	-1.1	
LSALVA ANDING					97 95	122/82 122/82	118 115	-2.3 -2.2	0.4 0.4	-1.1 -1.0	
NGE 1	2:59	2:59	2.70	10.00	114	132/82	150	-2.3	0.5	-0.9	4.80
AGE 2	5:59	2:59	4.00	12.00	129	142/82	183	-2.2	0.5	-1.1	7.10
AGE 3	8:59	2.59	5.40	14.00	151	152/82	229	-2.7	0.3	-1.5	10.00
ENT AGE 4	9:27 9:29	0:27 0:29	6.70 6.70	16.00 16.00	154 154	152/82 152/82	234 234	-2.6 -2.7	0.3 0.1	-1.5 -1.6	10.60 10.65
K EXER	9:30	0:30			155	152/82	235	-2.7	0.1	-1.6	10.67
INT	0:32	0:32	0.00	0.00	145	152/82	220	-2.4	0.7	-1.1	
ENT ENT	1:02 2:02	1:02	0.00	0.00	128 115	152/82 152/82	194 174	-1.8 -2.0	0.9	-0.4	
ULTS ise Duration leart Rate		0 Minutes	arget heart rate 17	0 haar			- B	axeline	ECGIA no	mal	
llood Pressure Vork Load	: 152 10.0	97 METS	arget neart rate 17	o opm			- NO	Rignit	+ 57-1 cha	ye Ree	nat
n of Terminatio	n :						þe	zeric on	onence dud	o recou	っ
23310143					TUAL		- Tim	t is n	+ ST-I Char onense diel zgahre fer	RMI	
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		nguna ,	1.	Alt Aris	MU 151 94	Cardiologist				mft	
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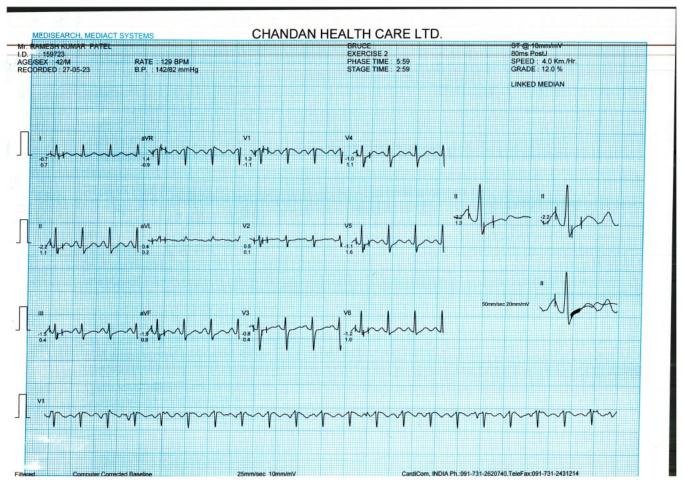


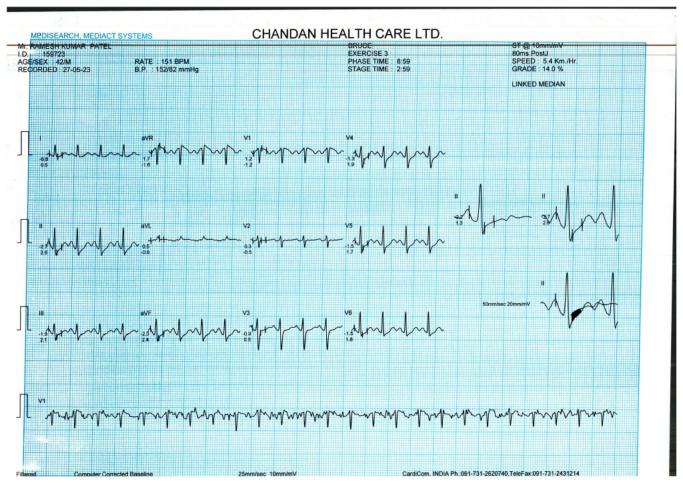


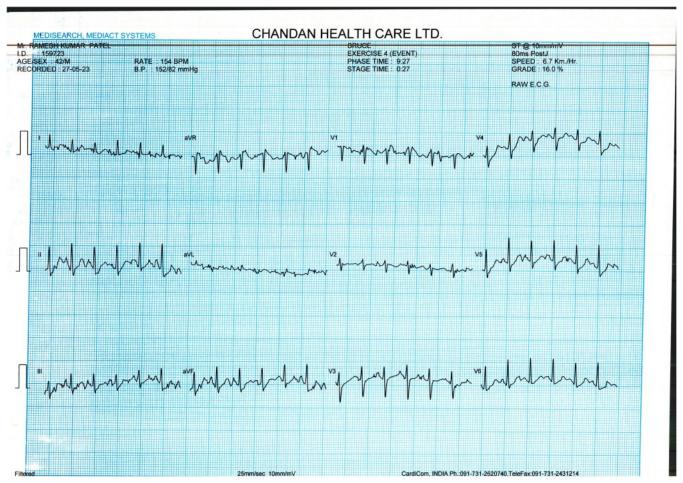


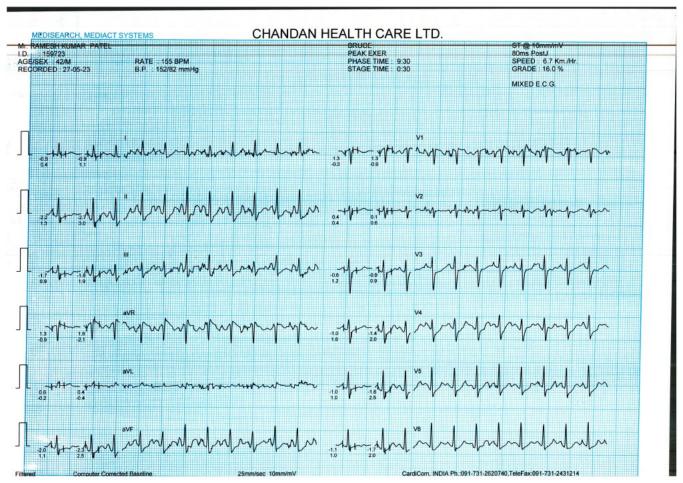


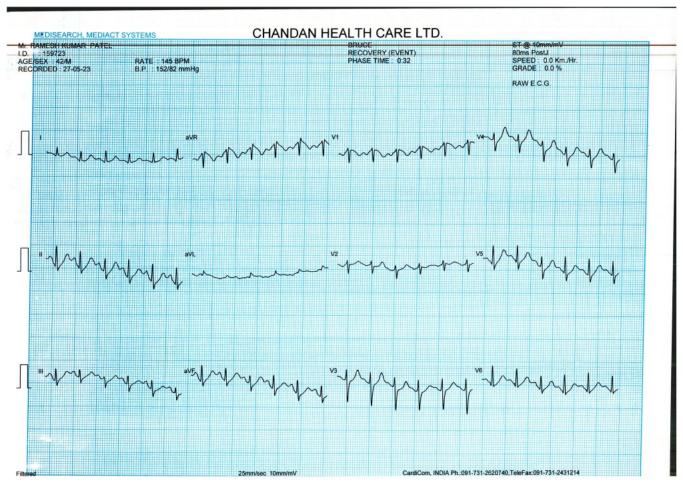


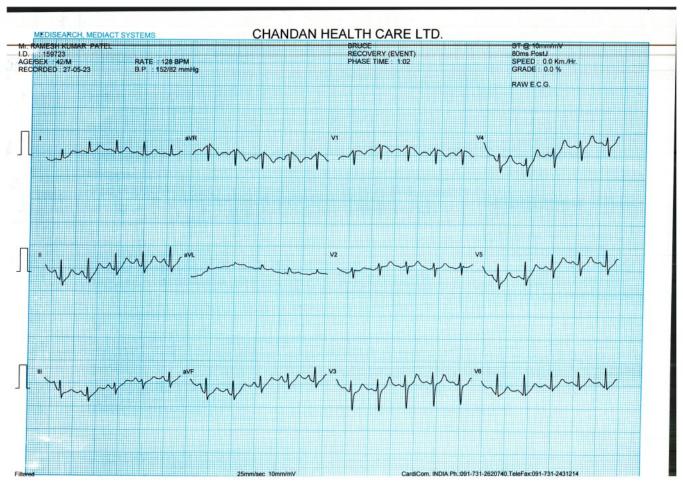


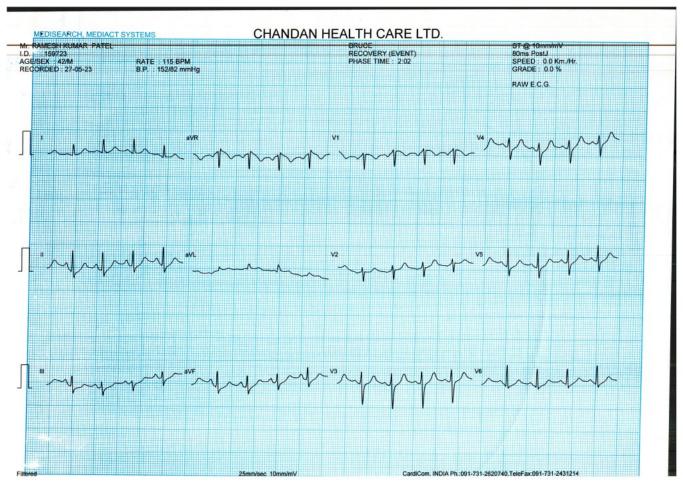












Name of Company: Boh Name of Executive: Ramesh Kumar Patel. Sex: Male / Female BMI (Body Mass Index): 27.8 Abdomen: .9.3 CMs RR: (8) Resp/Min Ident Mark: Cart Mark on Left Land Any Allergies: Vertigo : N Any Medications: Note Any Surgical History: Habits of alcoholism/smoking/tobacco: Chief Complaints if any: Lab Investigation Reports: 100 Att Eye Check up vision & Color vision: Left eye: in Right eye:



CHANDAN DIA	AGNOSTIC CENTRE
Near vision:	
Far vision : V	
Dental check up :	
ENT Check up :	
Eye Checkup:	

Final impression

Certified that I examined									
	is	presently	in	good	hea	Ith and	free	from	any
cardio-respiratory/communicable	ailment,	he/she	is	fit	11	Unfit	to	join	any
organization.						/		-	

Client Signature :-

12-1

Signature of Medical Examiner

Dr. RC. ROY MBS. MD. (Radio Diagnosis) NBSS. MO. Reg. No. 26918 Reg. No. 26918

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



Patient Name Age/Gender UHID/MR NO Visit ID Ref Doctor	Add: 99, Shivaji Nagar M Ph: 9235447795,0542-35 CIN : U85110DL2003PL : Mr.RAMESH KUMAR PATE : 42 Y 0 M 0 D /M : CVAR.0000038189 : CVAR0015972324 : Dr.MEDIWHEEL VNS -	00227 C308206	Registered Collected Received Reported Status	: 27/May/2023 1 : 27/May/2023 1 : 27/May/2023 1 : Final Report	1:16:11 1:29:09
	MEDIWH	EEL BANK OF BA		EABOVE 40 YRS	
Test Name		Result	Unit	Bio. Ref. Interval	Method
Blood Group	BO&Rhtyping) * , <i>Blood</i>				
Rh (Anti-D)		POSITIVE			
Complete Blood Haemoglobin TLC (WBC) DLC Polymorphs (Neu	Count (CBC) * , Whole Blow	od 13.30 7,100.00 50.00	g/dl /Cu mm	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/dl 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl 4000-10000	
Lymphocytes		40.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes		3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils Basophils ESR		7.00 0.00	% %	1-6 <1	ELECTRONIC IMPEDANCE ELECTRONIC IMPEDANCE
Observed		10.00	Mm for 1st hr.		
Corrected			Mm for 1st hr.		
PCV (HCT) Platelet count		41.00	%	40-54	
Platelet Count		1.50	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Dis	stribution width)	nr	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet La	-	nr	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hen		nr	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Plate RBC Count	elet Volume)	nr	fL	6.5-12.0	ELECTRONIC IMPEDANCE
			/		

ELECTRONIC IMPEDANCE



RBC Count

Mill./cu mm 4.2-5.5

4.31



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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAMESH KUMAR PATEL -PKG10000236	Registered On	: 27/May/2023 08:32:50
Age/Gender	: 42 Y 0 M 0 D /M	Collected	: 27/May/2023 11:16:11
UHID/MR NO	: CVAR.0000038189	Received	: 27/May/2023 11:29:09
Visit ID	: CVAR0015972324	Reported	: 27/May/2023 15:03:02
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF HAEM ATOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Indices (MCV, MCH, MCHC)				
MCV	95.10	fl	80-100	CALCULATED PARAMETER
MCH	30.90	pg	28-35	CALCULATED PARAMETER
MCHC	32.50	%	30-38	CALCULATED PARAMETER
RDW-CV	12.20	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	44.00	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,550.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	497.00	/cu mm	40-440	

S.N. Sinto

Dr.S.N. Sinha (MD Path)



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

Chandan Since 1991 Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAMESH KUMAR PATEL -PKG10000236	Registered On	: 27/May/2023 08:32:51
Age/Gender	: 42 Y 0 M 0 D /M	Collected	: 27/May/2023 13:34:06
UHID/MR NO	: CVAR.0000038189	Received	: 27/May/2023 13:37:35
Visit ID	: CVAR0015972324	Reported	: 27/May/2023 14:39:29
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE FASTING , Plasma				
Glucose Fasting	99.10	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	113.80	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.

S.N. Sinto, Dr.S.N. Sinha (MD Path)





Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAMESH KUMAR PATEL -PKG10000236	Registered On	: 27/May/2023 08:32:51
Age/Gender	: 42 Y 0 M 0 D /M	Collected	: 27/May/2023 11:16:11
UHID/MR NO	: CVAR.0000038189	Received	: 28/May/2023 11:40:31
Visit ID	: CVAR0015972324	Reported	: 28/May/2023 12:25:43
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLYCOSYLATED HAEM OGLOBIN (HBA1C) **	, EDTA BLOOD			
Glycosylated Haemoglobin (HbA1c)	5.70	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	39.00	mmol/mol/IFCC		

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.

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• 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

ISO 9001:2015

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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAMESH KUMAR PATEL -PKG10000236	Registered On	: 27/May/2023 08:32:51	
Age/Gender	: 42 Y 0 M 0 D /M	Collected	: 27/May/2023 11:16:11	
UHID/MR NO	: CVAR.0000038189	Received	: 28/May/2023 11:40:31	
Visit ID	: CVAR0015972324	Reported	: 28/May/2023 12:25:43	
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report	

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method	
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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: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name: Mr.RAMESH KUMAR PAAge/Gender: 42 Y 0 M 0 D /MUHID/MR NO: CVAR.0000038189Visit ID: CVAR0015972324Ref Doctor: Dr.MEDIWHEEL VNS -	ATEL -PKG10000236	Registered On Collected Received Reported Status	: 27/May/2023 08:32 : 27/May/2023 11:16 : 27/May/2023 11:29 : 27/May/2023 13:49 : Final Report	5:11 9:09
	DEPARTMENT C	F BIOCHEM IST	RY	
MEDIW	/HEEL BANK OF BA	RODA MALE AB	BOVE 40 YRS	
Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) Sample:Serum	8.30	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	7.10	mg/dl	3.4-7.0	URICASE
LFT (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) UPID PROFILE (MINI) , <i>Serum</i> Cholesterol (Total)	34.20 65.80 36.90 6.80 4.20 2.60 1.62 115.50 0.50 0.30 0.20 214.00 53.90	U/L U/L IU/L gm/dl gm/dl U/L mg/dl 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 <200 Desirable 200-239 Borderline High 30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol) VLDL Triglycerides	127 32.82 164.10	mg/dl mg/dl mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High 10-33 < 150 Normal 150-199 Borderline High 200-499 High	CALCULATED GPO-PAP



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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAMESH KUMAR PATEL -PKG10000236	Registered On	: 27/May/2023 08:32:52
Age/Gender	: 42 Y 0 M 0 D /M	Collected	: 27/May/2023 11:16:11
UHID/MR NO	: CVAR.0000038189	Received	: 27/May/2023 11:29:09
Visit ID	: CVAR0015972324	Reported	: 27/May/2023 13:49:10
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name

Result

Unit

Bio. Ref. Interval

Method

>500 Very High



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

Chaudan Since 1991	CHANDAN DIAGNOS Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206		E	SOUTH AND A SUCCE 1950
Age/Gender: 42UHID/MR NO: CVVisit ID: CV	RAMESH KUMAR PATEL -PKG1000023(Y 0 M 0 D /M AR.0000038189 AR0015972324 MEDIWHEEL VNS -	6 Registered On Collected Received Reported Status	: 27/May/2023 0 : 27/May/2023 1 : 27/May/2023 1 : 27/May/2023 1 : Final Report	8:33:43 8:34:23
	DEPARTMENT OF	CLINICAL PATHO)LOGY	
	MEDIWHEEL BANK OF E	BARODA MALE A	BOVE 40 YRS	
Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINATION Color Specific Gravity Reaction PH Protein Sugar	, ROUTINE [*] , <i>Urine</i> PALE YELLOW 1.030 Acidic (6.5) ABSENT ABSENT	mg % gms%	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++) < 0.5 (+)	DIPSTICK DIPSTICK DIPSTICK
			0.5-1.0 (++) 1-2 (+++) > 2 (++++)	
Ketone Bile Salts Bile Pigments Urobilinogen(1:20 dilut Microscopic Examinatic		mg/dl	0.2-2.81	BIOCHEMISTRY
Epithelial cells	1-2/h.p.f			MICROSCOPIC
Pus cells RBCs	0-2/h.p.f ABSENT			EXAMINATION MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			
SUGAR, FASTING STA	GE* , Urine			
Sugar, Fasting stage	ABSENT	gms%		

Interpretation:

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

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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAMESH KUMAR PATEL -PKG10000236	Registered On	: 27/May/2023 08:32:51
Age/Gender	: 42 Y 0 M 0 D /M	Collected	: 27/May/2023 18:33:43
UHID/MR NO	: CVAR.0000038189	Received	: 27/May/2023 18:34:23
Visit ID	: CVAR0015972324	Reported	: 27/May/2023 18:34:57
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name

Result

Unit

Bio. Ref. Interval

Method

SUGAR, PP STAGE* , Urine

Sugar, PP Stage

ABSENT

Interpretation:

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

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

ISO 9001:2015



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



Add: 99, Shivaji Nagar Mahmoorganj,Varana Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAMESH KUMAR PATEL -PKG10000236	Registered On	: 27/May/2023 08:32:52		
Age/Gender	: 42 Y 0 M 0 D /M	Collected	: 27/May/2023 11:16:11		
UHID/MR NO	: CVAR.0000038189	Received	: 28/May/2023 11:09:31		
Visit ID	: CVAR0015972324	Reported	: 28/May/2023 12:42:11		
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report		
	DEPARTMENT OF IMMUNOLOGY MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS				

Test Name	Result	Unit	Bio. Ref. Interval	Method	
PSA (Prostate Specific Antigen), Total ** Sample:Serum	0.140	ng/mL	< 2.0	CLIA	

Interpretation:

- 1. PSA is detected in the serum of males with normal, benign hypertrophic, and malignant prostate tissue.
- 2. Measurement of serum PSA levels is not recommended as a screening procedure for the diagnosis of cancer because elevated PSA levels also are observed in patients with benign prostatic hypertrophy. However, studies suggest that the measurement of PSA in conjunction with digital rectal examination (DRE) and ultrasound provide a better method of detecting prostate cancer than DRE alone⁻
- 3. PSA levels increase in men with cancer of the prostate, and after radical prostatectomy PSA levels routinely fall to the undetectable range.
- 4. If prostatic tissue remains after surgery or metastasis has occurred, PSA appears to be useful in detecting residual and early recurrence of tumor.
- 5. Therefore, serial PSA levels can help determine the success of prostatectomy, and the need for further treatment, such as radiation, endocrine or chemotherapy, and in the monitoring of the effectiveness of therapy.

THYROID PROFILE - TOTAL ** , Serum

T3, Total (tri-iodothyronine)	117.96	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	8.50	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	4.33	μIU/mL	0.27 - 5.5	CLIA

Interpretation:

0.3-4.5	µIU/mL	First Trimes	ter
0.5-4.6	µIU/mL	Second Trim	lester
0.8-5.2	µIU/mL	Third Trimes	ster
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.





Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAMESH KUMAR PATEL -PKG10000236	Registered On	: 27/May/2023 08:32:52
Age/Gender	: 42 Y 0 M 0 D /M	Collected	: 27/May/2023 11:16:11
UHID/MR NO	: CVAR.0000038189	Received	: 28/May/2023 11:09:31
Visit ID	: CVAR0015972324	Reported	: 28/May/2023 12:42:11
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name

Result

Unit

Bio. Ref. Interval Method

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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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAMESH KUMAR PATEL -PKG10000236	Registered On	: 27/May/2023 08:32:53
Age/Gender	: 42 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000038189	Received	: N/A
Visit ID	: CVAR0015972324	Reported	: 27/May/2023 11:12:39
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

X-RAY DIGITAL CHEST PA *

X- Ray Digital Chest P.A. View

- Lung fields are clear.
- Pleural spaces are clear.
- Both hilar shadows appear normal.
- Trachea and carina appear normal.
- Heart size within normal limits.
- Both the diaphragms appear normal.
- Soft tissues and Bony cage appear normal.

IMPRESSION

*** NO OBVIOUS DETECTABLE ABNORMALITY SEEN**

Dr Raveesh Chandra Roy (MD-Radio)

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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAMESH KUMAR PATEL -PKG10000236	Registered On	: 27/May/2023 08:32:53
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UHID/MR NO	: CVAR.0000038189	Received	: N/A
Visit ID	: CVAR0015972324	Reported	: 27/May/2023 09:48:59
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report
		•	

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

ULTRASOUND WHOLE ABDOM EN (UPPER & LOWER) *

WHOLE ABDOM EN ULTRASONOGRAPHY REPORT

LIVER

 The liver measures ~ 14.1 cm in midclavicular line. Mild diffuse increase in liver echogenicity noted.

PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein is (9.1 mm in caliber) not dilated.
- Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common bile duct is (3.3 mm in caliber) not dilated.
- The gall bladder is normal in size and has regular walls. Lumen of the gall bladder is anechoic.

PANCREAS

• The pancreas is normal in size and shape and has a normal homogenous echotexture. Pancreatic duct is not dilated.

KIDNEYS

- Right kidney:-
 - Right kidney is normal in size, measuring ~ 9.9 x 4.5 cms.
 - Cortical echogenicity is normal. Pelvicalyceal system is not dilated.
 - Cortico-medullary demarcation is maintained. Parenchymal thickness appear normal.
- Left kidney:-
 - Left kidney is normal in size, measuring ~ 9.2 x 4.9 cms.
 - Cortical echogenicity is normal. Pelvicalyceal system is not dilated.
 - Cortico-medullary demarcation is maintained. Parenchymal thickness appear normal.

SPLEEN







Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAMESH KUMAR PATEL -PKG10000236	Registered On	: 27/May/2023 08:32:53
Age/Gender	: 42 Y 0 M 0 D /M	Collected	: N/A
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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

 The spleen is normal in size (~ 7.1 cm in its long axis) and has a normal homogenous echo-texture.

ILIAC FOSSAE & PERITONEUM

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

URETERS

- The upper parts of both the ureters are normal.
- Bilateral vesicoureteric junctions are normal.

URINARY BLADDER

- The urinary bladder is well filled. Bladder wall is normal in thickness and is regular.
- Pre-void urine volume is ~ 154 cc.

PROSTATE

• The prostate gland is normal in size (~ 26 x 22 x 22 mm / 7 gms) and normal in echotexture with smooth outline. No median lobe indentation is seen.

FINAL IM PRESSION:-

- Mild grade fatty liver
- Rest of the abdominal organs are normal

Adv : Clinico-pathological-correlation / further evaluation & Follow up

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG, Tread Mill Test (TMT)



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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D63/6B-4, Mahmoorganj, Varanasi, Uttar Pradesh 221010, India

Latitude 25.305409°

Local 12:51:23 PM GMT 07:21:23 AM Longitude 82.9790421°

Altitude 84 meters Saturday, 27.05.2023