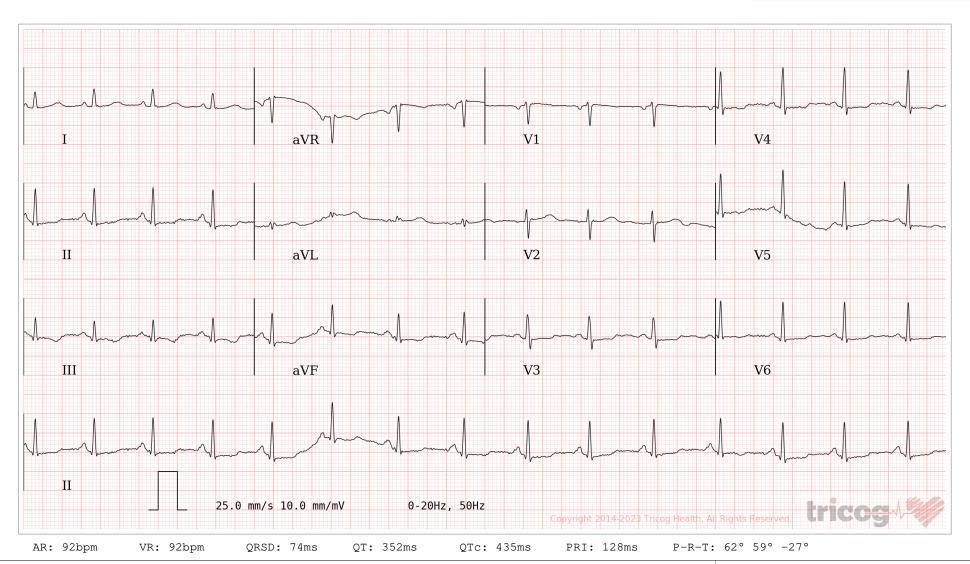
Chandan Diagnostic



Age / Gender: 30/Female Date and Time: 19th Mar 23 9:36 AM

Patient ID: CVAR0093722223

Patient Name: Mrs.SANGEETA - BOBE33842



Sinus Rhythm, Inferior Ischemia suspected. Baseline artefacts. Baseline wandering. Please correlate clinically.

Dr. Arundhati Muragoji

63382

AUTHORIZED BY

REPORTED BY

Dr. Charit MD, DM: Cardiology

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.



पारत सरकार GOVERNMENT OF INDIA



संगीता Sangeeta जन्म वर्ष / Year of Birth : 1992 महिला / Female

8938 3300 3246



आधार — आम आदमी का अधिकार





CHANDAN DIAGNOSTIC CENTRE

BOB Name of Company:

Name of Executive: MR / MRS. Sangeeta

Date of Birth: 01 / 01 / 1999

Sex: Male / Female

Height: 14.3...CMs

Weight: 68.KGs

BMI (Body Mass Index): 25-6

Chest (Expiration / Inspiration) 9.3..../.95....CMs

Blood Pressure: 420 / ... 80 ... mm/Hg

Pulse: 36 BPM - Regular / Irregular

Ident. Mark: - Molo au Mose

Any Allergies: Mo

Vertigo: Mormal

Any Medications: (I) Nornal

Any Surgical History: (I)

Habits of alcoholism/smoking/tobacco: (I) No

Chief Complaints if any: ~ No

Lab Investigation Reports: , NO

Eye Check up - vision & Color vision: Normal

Left eye: ~ Nonw

Right eye: - Novin





CHANDAN DIAGNOSTIC CENTRE



Near vision: - N16

Far vision : 616

Dental check up : - Normal

ENT Check up : - Mornu

Eye Checkup: - Morning

Final impression

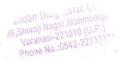
Certified that I examined Banyocka 5/0 D/0 W/0 is presently in good health and free from any cardio-respiratory / communicable ailment, he/she is fit / Unfit to join any organization.

Signature of Medical Examiner

Name & Qualification - Dr. R. C. Roy (MBBS, MD)

Date-/.0.2 / 2023,

Place - VARANASI





CHANDAN DIAGNOSTIC CENTRE



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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SANGEETA - BOBE33842 Registered On : 19/Mar/2023 09:18:27 Age/Gender Collected : 30 Y 0 M 0 D /F : 19/Mar/2023 09:46:35 UHID/MR NO : CVAR.0000036353 Received : 19/Mar/2023 09:49:32 Reported Visit ID : CVAR0093722223 : 19/Mar/2023 10:39:36

Ref Doctor : Dr.MEDIWHEEL VNS Status : Final Report

DEPARTMENT OF HABMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method | |
|-----------|--------|------|--------------------|--------|--|
|-----------|--------|------|--------------------|--------|--|

Blood Group (ABO & Rh typing) *, Blood

Blood Group

0

Rh (Anti-D)

POSITIVE

Complete Blood Count (CBC) *, Whole Blood

Haemoglobin 12.70 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/dl 12-18 Yr 13.0-16.0

g/dl

Male- 13.5-17.5 g/dl

Female- 12.0-15.5 g/dl

| TLC (WBC) | 11,200 | /Cu mm | 4000-10000 | ELECTRONIC IMPEDANCE |
|-----------------------------------|--------|----------------|-------------|-----------------------|
| DLC | | | | |
| Polymorphs (Neutrophils) | 75.00 | % | 55-70 | ELECTRONIC IMPEDANCE |
| Lymphocytes | 20.00 | % | 25-40 | ELECTRONIC IMPEDANCE |
| Monocytes | 3.00 | % | 3-5 | ELECTRONIC IMPEDANCE |
| Eosinophils | 2.00 | % | 1-6 | ELECTRONIC IMPEDANCE |
| Basophils | 0.00 | % | < 1 | ELECTRONIC IMPEDANCE |
| ESR | | | | |
| Observed | 20.00 | Mm for 1st hr. | | |
| Corrected | 10.00 | Mm for 1st hr. | < 20 | |
| PCV (HCT) | 37.40 | % | 40-54 | |
| Platelet count | | | | |
| Platelet Count | 1.97 | LACS/cu mm | 1.5-4.0 | ELECTRONIC |
| | | | | IMPEDANCE/MICROSCOPIC |
| 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) | nr | fL | 6.5-12.0 | ELECTRONIC IMPEDANCE |
| RBCCount | | | | |
| RBC Count | 4.19 | Mill./cu mm | 3.7-5.0 | ELECTRONIC IMPEDANCE |
| | | | | |









CIN: U85110DL2003PLC308206



Patient Name : Mrs.SANGEETA - BOBE33842 Registered On : 19/Mar/2023 09:18:27 Age/Gender : 30 Y 0 M 0 D /F Collected : 19/Mar/2023 09:46:35 UHID/MR NO : CVAR.0000036353 Received : 19/Mar/2023 09:49:32 Visit ID : CVAR0093722223 Reported : 19/Mar/2023 10:39:36 Ref Doctor

: Dr.MEDIWHEEL VNS Status : Final Report

DEPARTMENT OF HABMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|----------------------------------|----------|--------|--------------------|----------------------|
| | | | | |
| Blood Indices (MCV, MCH, MCHC) | | | | |
| MCV | 89.20 | fl | 80-100 | CALCULATED PARAMETER |
| MCH | 30.30 | pg | 28-35 | CALCULATED PARAMETER |
| MCHC | 34.00 | % | 30-38 | CALCULATED PARAMETER |
| RDW-CV | 13.30 | % | 11-16 | ELECTRONIC IMPEDANCE |
| RDW-SD | 45.90 | fL | 35-60 | ELECTRONIC IMPEDANCE |
| Absolute Neutrophils Count | 8,400.00 | /cu mm | 3000-7000 | |
| Absolute Eosinophils Count (AEC) | 224.00 | /cu mm | 40-440 | |

S.N. Sinta









Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SANGEETA - BOBE33842 : 19/Mar/2023 09:18:28 Registered On Age/Gender : 19/Mar/2023 09:46:34 : 30 Y 0 M 0 D /F Collected UHID/MR NO : CVAR.0000036353 Received : 19/Mar/2023 09:49:32 Visit ID : CVAR0093722223 Reported : 19/Mar/2023 10:33:50 Ref Doctor

: Dr.MEDIWHEEL VNS Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Unit Bio. Ref. Interval Method Result

GLUCOSE FASTING, Plasma

Glucose Fasting 100.00 mg/dl < 100 Normal **GOD POD**

100-125 Pre-diabetes ≥ 126 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.

Glucose PP 136.00 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

% NGSP HPLC (NGSP) Glycosylated Haemoglobin (HbA1c) 5.00 Glycosylated Haemoglobin (HbA1c) 31.00 mmol/mol/IFCC Estimated Average Glucose (eAG) 96 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.









Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SANGEETA - BOBE33842 : 19/Mar/2023 09:18:28 Registered On Age/Gender : 30 Y 0 M 0 D /F Collected : 19/Mar/2023 09:46:34 UHID/MR NO : CVAR.0000036353 Received : 19/Mar/2023 09:49:32 Visit ID : CVAR0093722223 Reported : 19/Mar/2023 10:33:50 Ref Doctor : Dr.MEDIWHEEL VNS Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method | |
|-----------|--------|------|--------------------|--------|--|
|-----------|--------|------|--------------------|--------|--|

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.

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.

| BUN (Blood Urea Nitrogen) Sample:Serum | 10.00 | mg/dL | 7.0-23.0 | CALCULATED |
|---|-------|-------|---|-----------------|
| Creatinine Sample:Serum | 0.90 | mg/dl | Serum 0.5-1.5 Spot Urine-Male- 20- 275 Female-20-320 | MODIFIED JAFFES |
| Uric Acid Sample:Serum | 4.28 | mg/dl | 2.5-6.0 | URICASE |





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





CIN: U85110DL2003PLC308206



Patient Name : Mrs.SANGEETA - BOBE33842 Registered On : 19/Mar/2023 09:18:28 Age/Gender : 30 Y 0 M 0 D /F Collected : 19/Mar/2023 09:46:34 UHID/MR NO : CVAR.0000036353 Received : 19/Mar/2023 09:49:32 Visit ID : CVAR0093722223 Reported : 19/Mar/2023 10:33:50 : Final Report Ref Doctor : Dr.MEDIWHEEL VNS Status

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name | Result | l | Jnit Bio. Ref. Inte | erval Method |
|---|--------|-------|--|-------------------|
| | | | | |
| LFT (WITH GAMMA GT) *, Serum | | | | |
| SGOT / Aspartate Aminotransferase (AST) | 26.00 | U/L | < 35 | IFCC WITHOUT P5P |
| SGPT / Alanine Aminotransferase (ALT) | 22.00 | U/L | < 40 | IFCC WITHOUT P5P |
| Gamma GT (GGT) | 32.00 | IU/L | 11-50 | OPTIMIZED SZAZING |
| Protein | 6.90 | gm/dl | 6.2-8.0 | BIRUET |
| Albumin | 4.00 | gm/dl | 3.8-5.4 | B.C.G. |
| Globulin | 2.90 | gm/dl | 1.8-3.6 | CALCULATED |
| A:G Ratio | 1.38 | | 1.1-2.0 | CALCULATED |
| Alkaline Phosphatase (Total) | 94.00 | U/L | 42.0-165.0 | IFCC METHOD |
| Bilirubin (Total) | 0.80 | mg/dl | 0.3-1.2 | JENDRASSIK & GROF |
| Bilirubin (Direct) | 0.40 | mg/dl | < 0.30 | JENDRASSIK & GROF |
| Bilirubin (Indirect) | 0.40 | mg/dl | < 0.8 | JENDRASSIK & GROF |
| LIPID PROFILE (MINI), Serum | | | | |
| Cholesterol (Total) | 131.00 | mg/dl | <200 Desirable 200-239 Borderline H > 240 High | CHOD-PAP ligh |
| HDL Cholesterol (Good Cholesterol) | 36.00 | mg/dl | 30-70 | DIRECT ENZYMATIC |
| LDL Cholesterol (Bad Cholesterol) | 93 | mg/dl | < 100 Optimal 100-129 Nr. | CALCULATED |
| | | | Optimal/Above Optin 130-159 Borderline H 160-189 High > 190 Very High | |
| VLDL | 23.00 | mg/dl | 10-33 | CALCULATED |
| Triglycerides | 115.00 | mg/dl | < 150 Normal 150-199 Borderline H 200-499 High >500 Very High | GPO-PAP ligh |

S.N. Sinla









Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SANGEETA - BOBE33842 Registered On : 19/Mar/2023 09:18:28 Age/Gender : 30 Y 0 M 0 D /F Collected : 19/Mar/2023 12:56:28 UHID/MR NO : CVAR.0000036353 Received : 19/Mar/2023 12:56:46 Visit ID : CVAR0093722223 Reported : 19/Mar/2023 12:57:28 Ref Doctor : Dr.MEDIWHEEL VNS Status : Final Report

DEPARTM ENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-----------------------------|------------------------|--------|--------------------|--------------|
| | | | | |
| JRINE EXAMINATION, ROUTINE* | Urine | | | |
| Color | LIGHT YELLOW | | | |
| Specific Gravity | 1.030 | | | |
| Reaction PH | Acidic (6.0) | | | DIPSTICK |
| Protein | Acidic (6.0) ABSENT | m a 0/ | < 10 Absent | DIPSTICK |
| Protein | ADSENT | mg % | 10-40 (+) | DIPSTICK |
| | | | 40-200 (++) | |
| | | | 200-500 (+++) | |
| | | | > 500 (++++) | |
| Sugar | ABSENT | gms% | < 0.5 (+) | DIPSTICK |
| | | | 0.5-1.0 (++) | |
| | | | 1-2 (+++) | |
| | | | > 2 (++++) | |
| Ketone | ABSENT | mg/dl | 0.2-2.81 | BIOCHEMISTRY |
| Bile Salts | ABSENT | | | |
| Bile Pigments | ABSENT | | | |
| Urobilinogen(1:20 dilution) | ABSENT | | | |
| Microscopic Examination: | | | | |
| Epithelial cells | 1-2/h.p.f | | | MICROSCOPIC |
| | | | | EXAMINATION |
| Pus cells · | 0-1/h.p.f | | | |
| RBCs | ABSENT | | | MICROSCOPIC |
| | | | | EXAMINATION |
| Cast | ABSENT | | | |
| Crystals | ABSENT | | | MICROSCOPIC |
| | ADCENIT | | | EXAMINATION |
| Others | ABSENT | | | |
| UGAR, FASTING STAGE*, Urine | | | | |
| Sugar, Fasting stage | ABSENT | gms% | | |
| | | | | |
| | | | | |

Interpretation:

(+) < 0.5

(++) 0.5-1.0

(+++) 1-2

(++++) > 2









CIN: U85110DL2003PLC308206



: Mrs.SANGEETA - BOBE33842 Patient Name Registered On Age/Gender : 30 Y 0 M 0 D /F Collected UHID/MR NO : CVAR.0000036353

Received

: 19/Mar/2023 12:56:28 : 19/Mar/2023 12:56:46

: 19/Mar/2023 09:18:28

: CVAR0093722223 : Dr.MEDIWHEEL VNS Reported : 19/Mar/2023 12:57:28

Status : Final Report

DEPARTM ENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Unit Bio. Ref. Interval Test Name Result Method

SUGAR, PP STAGE*, Urine

Sugar, PP Stage

Visit ID

Ref Doctor

ABSENT

Interpretation:

(+) < 0.5 gms%

0.5-1.0 gms% (++)

(+++) 1-2 gms%

(++++) > 2 gms%

S.N. Sinta









CIN: U85110DL2003PLC308206



Patient Name : Mrs.SANGEETA - BOBE33842 : 19/Mar/2023 09:18:28 Registered On Age/Gender : 30 Y 0 M 0 D /F Collected : 19/Mar/2023 09:46:34 UHID/MR NO : CVAR.0000036353 Received : 19/Mar/2023 10:35:28 Visit ID : CVAR0093722223 Reported : 19/Mar/2023 10:37:52 Ref Doctor : Dr.MEDIWHEEL VNS Status : Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

| Test Name | Result | Unit | Bio. Ref. Interva | l Method |
|-----------------------------------|--------|---------------------|-------------------|--------------|
| | | | | |
| THYROID PROFILE - TOTAL *, Serum | | | | |
| T3, Total (tri-iodothyronine) | 101.00 | ng/dl | 84.61-201.7 | CLIA |
| T4, Total (Thyroxine) | 6.45 | ug/dl | 3.2-12.6 | CLIA |
| TSH (Thyroid Stimulating Hormone) | 3.66 | μIU/mL | 0.27 - 5.5 | CLIA |
| | | , | | |
| Interpretation: | | | | |
| | | 0.3-4.5 $\mu IU/1$ | | |
| | | 0.5-4.6 µIU/1 | | |
| | | 0.8-5.2 µIU/1 | | |
| | | $0.5-8.9 \mu IU/1$ | mL Adults | 55-87 Years |
| | | 0.7-27 µIU/1 | | 28-36 Week |
| | | 2.3-13.2 μIU/1 | nL Cord Blood | > 37Week |
| | | 0.7-64 μIU/ı | mL Child(21 wk | z - 20 Yrs.) |
| | | 1-39 μIU | /mL Child | 0-4 Days |
| | | 1.7-9.1 μIU/ı | 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.

S.N. Sinta









CIN: U85110DL2003PLC308206



Patient Name : Mrs.SANGEETA - BOBE33842 Registered On : 19/Mar/2023 09:18:29

 Age/Gender
 : 30 Y 0 M 0 D /F
 Collected
 : N/A

 UHID/MR NO
 : CVAR.0000036353
 Received
 : N/A

Visit ID : CVAR0093722223 Reported : 25/Mar/2023 15:32:33

Ref Doctor : Dr.MEDIWHEEL VNS Status : Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 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)









CIN: U85110DL2003PLC308206



Patient Name : Mrs.SANGEETA - BOBE33842 Registered On : 19/Mar/2023 09:18:29

 Age/Gender
 : 30 Y 0 M 0 D /F
 Collected
 : N/A

 UHID/MR NO
 : CVAR.0000036353
 Received
 : N/A

Visit ID : CVAR0093722223 Reported : 25/Mar/2023 10:58:23

Ref Doctor : Dr.MEDIWHEEL VNS Status : Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOM EN (UPPER & LOWER) *

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER)

LIVER

• The liver is normal in size **13.0** cm in longitudinal span and has a normal homogenous echotexture. No focal lesion is seen.

PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein is normal (9.5 mm) at the porta.
- Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common duct are normal (3.7 mm) 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 (9.5 x 3.4 cm), 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 (10.9 x 3.2 cm), 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.

SPLEEN



Home Sample Collection 1800-419-0002





CIN: U85110DL2003PLC308206



Patient Name : Mrs.SANGEETA - BOBE33842 : 19/Mar/2023 09:18:29 Registered On

Age/Gender : 30 Y 0 M 0 D /F Collected : N/A UHID/MR NO : CVAR.0000036353 Received : N/A

Visit ID : CVAR0093722223 Reported : 25/Mar/2023 10:58:23

: Dr.MEDIWHEEL VNS Ref Doctor Status : Final Report

DEPARTM ENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

• The spleen is normal in size (9.1 cm), and has a homogenous echotexture.

ILIAC FOSSA

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

URINARY BLADDER

- Urinary bladder is well filled. Bladder wall is normal in thickness and regular.
- Pre-void urine volume is 114 cc.

UTERUS

- Uterus is anteverted. Size (66 x 36 x 27 mm / 33 cc).
- It has a homogenous myometrial echotexture.
- The endometrium is seen in midline (thickness 3.8 mm)
- Cervix is normal.

UTERINE ADNEXA

- Adnexa on both sides are normal.
- Both the ovaries are normal in size.

CUL-DE-SAC

• Pouch of Douglas is clear.

IMPRESSION

• No significant sonological abnormality is seen on this study.

End Of Report ***

Result/s to Follow:

NE 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 * *Facilities Available at Select Location 365 Days Open









D63/6B-99, Shivaji Nagar Colony, Mahmoorganj, Varanasi, Uttar Pradesh 221010, India

Latitude

25.305371°

LOCAL 09:28:59 GMT 03:58:59 Longitude

82.979028°

SUNDAY 03.19.2023 ALTITUDE 42 METER