

#### Health Check up Booking Re Schedule Request(bobS21742), Package Code-PKG10000239, Beneficiary Code-42960 1 message

Mediwheel <wellness@mediwheel.in> To: anurag.idc@gmail.com Cc: mediwheelwellness@gmail.com

Sat, Dec 24, 2022 at 12:13 PM

Mediwheel Your wellness partn

011-41195959. Email:wellness@mediwheel.in

#### Dear Chandan Healthcare Limited.

#### Diagnostic/Hospital Location :Indradeep Comlex, Sanjay Gandhi Puram, City:Lucknow

We regret to state that following request for Health check up appointment has been Re Scheduled by you. Please let us know if request had not been Re Schedule from your end. We will ask the user to make a fresh request for the same.

Booking Code	:	bobS21742
Appointment Date	:	08-01-2023
Appointment Time	:	8:00am-12:00pm
<b>Beneficiary Name</b>	:	Manju
Package Name	:	Full Body Health Checkup Female Below 40
Member Age		31
Member Relation	:	Spouse
Member Gender	:	Female
Address of Diagnostic/Hospita	ŕ	Indradeep Comlex, Sanjay Gandhi Puram
City	:	Lucknow
State	•••	Uttar Pradesh
Pincode	:	226016 ·
Contact Details	:	9918101664
Email	:	anurag.idc@gmail.com
Please login to your a	ac	count to confirm the same. Also you mail us for cont
	Appointment Date Appointment Time Beneficiary Name Package Name Member Age Member Relation Member Gender Address of Diagnostic/Hospita City State Pincode Contact Details Email	Member Age:Member Relation:Member Gender:Address of Diagnostic/HospitalCity:State:Pincode:Contact Details:

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Date - 8/1/23 Det By - nediwheelsen Red By - 2613 Code - 2613

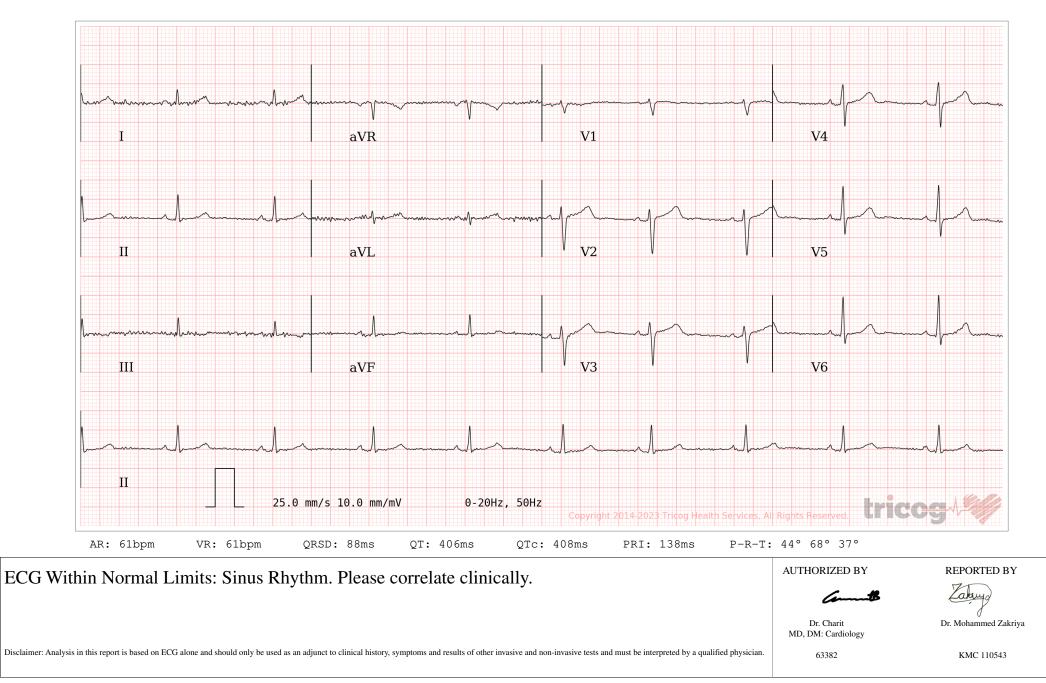


## **Chandan Diagnostic**



Age / Gender:31/FemalePatient ID:IDCD0358862223Patient Name:Mrs.MANJU

Date and Time: 8th Jan 23 9:18 AM





Add: Indra Deep Complex, Sanjay Gandhi Puram, Faizabad Road, Indira Nagar Ph: 7706041643,7706041644 CIN : U85196UP1992PLC014075



Patient Name	: Mrs.MANJU	Registered On	: 08/Jan/2023 09:49:42
Age/Gender	: 31 Y 10 M 18 D /F	Collected	: 08/Jan/2023 10:04:34
UHID/MR NO	: IDCD.0000130974	Received	: 08/Jan/2023 10:15:57
Visit ID	: IDCD0358862223	Reported	: 08/Jan/2023 12:03:44
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF HAEMATOLOGY

## MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

|--|

## Blood Group (ABO & Rh typing) \* , Blood

Blood Group		
Rh ( Anti-D)		

B POSITIVE

Dr. Anupam Singh (MBBS MD Pathology)

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Visit ID	: IDCD0358862223	Reported	: 08/Jan/2023 15:34:40
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## **DEPARTMENT OF HAEMATOLOGY**

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interva	al Method
Complete Blood Count (CBC) ** , Who	ole Blood			
Haemoglobin	11.50	g/dl	1 Day- 14.5-22.5 g/	
			1 Wk- 13.5-19.5 g/g	
			1 Mo- 10.0-18.0 g/	
			3-6 Mo- 9.5-13.5 g, 0.5-2 Yr- 10.5-13.5	
			g/dl	
			2-6 Yr- 11.5-15.5 g/	(d)
			6-12 Yr- 11.5-15.5 g	
			12-18 Yr 13.0-16.0	
			g/dl	
			Male- 13.5-17.5 g/c	
			Female- 12.0-15.5 g	g/dl
TLC (WBC)	4,600.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils )	63.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	31.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	5.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	1.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	< 1	ELECTRONIC IMPEDANCE
ESR				
Observed	22.00	Mm for 1st hr.		
Corrected	10.00	Mm for 1st hr.	< 20	
PCV (HCT)	35.00	%	40-54	
Platelet count				
Platelet Count	1.50	LACS/cu mm	1.5-4.0	ELECTRONIC
		,		IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	15.70	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	65.40	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.16	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	15.60	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	3.91	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)	4	2		-
MCV	90.90	fl	80-100	CALCULATED PARAMETER
МСН	29.40	pg	28-35	CALCULATED PARAMETER
МСНС	32.40	РБ %	30-38	CALCULATED PARAMETER
	52.40	<i>,</i> ,,		







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## DEPARTMENT OF HAEMATOLOGY

## MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
RDW-CV	15.40	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	50.10	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	2,898.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	46.00	/cu mm	40-440	

## Dr. Anupam Singh (MBBS MD Pathology)

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### **DEPARTMENT OF BIOCHEMISTRY**

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	ι	Jnit	Bio. Ref. Interva	al	Method
GLUCOSE FASTING ** , Plasma						
Glucose Fasting	109.30	mg/dl	100-12	Normal 25 Pre-diabetes Diabetes	GOD PO	D
<b>Interpretation:</b> a) Kindly correlate clinically with intake of hypog b) A negative test result only shows that the perso will never get diabetics in future, which is why an	on does not have dial	petes at the	e time of t	U		at the person

c) I.G.T = Impared Glucose Tolerance.

Glucose PP **	100.00	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)	5.10	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	32.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	99	mg/dl	

### Interpretation:

### <u>NOTE</u>:-

- 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.





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### 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)	<b>Degree of Glucose Control Unit</b>
> 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.

#### **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	8.36	mg/dL	7.0-23.0	CALCULATED
<b>Creatinine **</b> Sample:Serum	0.77	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20- 275 Female-20-320	MODIFIED JAFFES
Uric Acid ** Sample:Serum	4.26	mg/dl	2.5-6.0	URICASE





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### **DEPARTMENT OF BIOCHEMISTRY**

## MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	ι	Jnit	Bio. Ref. Interva	al Method
LFT (WITH GAMMA GT) ** , Serum					
SGOT / Aspartate Aminotransferase (AST)	29.50	U/L	< 35		IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	19.30	U/L	< 40		IFCC WITHOUT P5P
Gamma GT (GGT)	16.30	IU/L	11-50	)	OPTIMIZED SZAZING
Protein	7.30	gm/dl	6.2-8	0	BIRUET
Albumin	4.43	gm/dl	3.8-5	.4	B.C.G.
Globulin	2.87	gm/dl	1.8-3	.6	CALCULATED
A:G Ratio	1.54		1.1-2	0	CALCULATED
Alkaline Phosphatase (Total)	130.00	U/L	42.0-	165.0	IFCC METHOD
Bilirubin (Total)	0.72	mg/dl	0.3-1	2	JENDRASSIK & GROF
Bilirubin (Direct)	0.21	mg/dl	< 0.30	)	JENDRASSIK & GROF
Bilirubin (Indirect)	0.51	mg/dl	< 0.8		JENDRASSIK & GROF
LIPID PROFILE ( MINI ) ** , Serum					
Cholesterol (Total)	160.00	mg/dl		Desirab <mark>le</mark> 39 Borderline High High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	53.60	mg/dl	30-70		DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	89	mg/dl	< 100	Optimal	CALCULATED
the state of the s		0,		29 Nr.	
			130-1 160-1	al/Above Optimal 59 Borderline High 89 High Very High	
VLDL	17.82	mg/dl	10-33		CALCULATED
Triglycerides	89.10	mg/dl	150-1 200-4	Normal 99 Borderline High 99 High /ery High	GPO-PAP

Dr. Shoaib Irfan (MBBS, MD, PDCC)



Home Sample Collection 1800-419-0002



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	<u></u>				
Patient Name	: Mrs.MANJU		Registered On	: 08/Jan/2023 09	
Age/Gender	: 31 Y 10 M 18 D /F		Collected	: 08/Jan/2023 11	
UHID/MR NO	: IDCD.0000130974		Received	: 08/Jan/2023 15	
Visit ID	: IDCD0358862223		Reported	: 08/Jan/2023 16	:40:59
Ref Doctor	: Dr.Mediwheel - Arcofemi	Health Care Ltd.	Status	: Final Report	
	DEI	PARTMENT OF C	CLINICAL PATHO	DLOGY	
	MEDIWHEEL BA	ANK OF BAROD	A MALE & FEM/	ALE BELOW 40 YRS	
Test Name		Result	Unit	Bio. Ref. Interval	Method
	ATION, ROUTINE ** , Urine				
Color		LIGHT YELLOW			
Specific Gravity		1.010			
Reaction PH		Acidic ( 5.0 )			DIPSTICK
Protein		ABSENT	mg %	< 10 Absent	DIPSTICK
			,	10-40 (+)	
				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(1:2	0 dilution)	ABSENT			
Microscopic Exar	mination:			and the state of the	
Epithelial cells		0-1/h.p.f			MICROSCOPIC
-6		• <u>-</u> ,p			EXAMINATION
Pus cells		ABSENT			
RBCs		ABSENT			MICROSCOPIC
		, 120LIVI			EXAMINATION
Cast		ABSENT			
Crystals		ABSENT			MICROSCOPIC
ci yotaio		ABOLINI			EXAMINATION
Others		ABSENT			
others		ADJENT			

# SUGAR, FASTING STAGE \*\* , Urine

Sugar, Fasting stage

< 0.5

0.5-1.0

Interpretation:

(+++) 1-2

(++++) > 2

(+)

(++)

gms%

Dr. Anupam Singh (MBBS MD Pathology)



ABSENT





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Age/Gender	: 31 Y 10 M 18 D /F	Collected	: 08/Jan/2023 15:41:43
UHID/MR NO	: IDCD.0000130974	Received	: 08/Jan/2023 16:52:08
Visit ID	: IDCD0358862223	Reported	: 08/Jan/2023 17:01:14
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
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## SUGAR, PP STAGE \* , Urine

Sugar, PP Stage

ABSENT

### Interpretation:

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

Dr. Shoaib Irfan (MBBS, MD, PDCC)

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Visit ID	: IDCD0358862223	Reported	: 08/Jan/2023 14:22:13
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### 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)	124.15	ng/dl	84.61-201.7	CLIA	
T4, Total (Thyroxine)	9.60	ug/dl	3.2-12.6	CLIA	
TSH (Thyroid Stimulating Hormone)	2.37	µlU/mL	0.27 - 5.5	CLIA	
Interpretation:					

0.3-4.5	µIU/mL	First Trimester
0.5-4.6	µIU/mL	Second Trimester
0.8-5.2	µIU/mL	Third Trimester
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.

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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## **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. Anoop Agarwal MBBS,MD(Radiology)







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## DEPARTMENT OF ULTRASOUND

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

## ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) \*

## **LIVER**

• The liver is normal in size (~ 120.9 mms) in cranio caudal extent, shows diffuse bright echoes. No focal lesion is seen.

## PORTAL SYSTEM

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

## **BILIARY SYSTEM**

- The intra-hepatic biliary radicles are normal.
- Common duct are normal 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 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 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.



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## DEPARTMENT OF ULTRASOUND

## MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

• Renal respiratory excursions are normal.

## **SPLEEN**

• Mild splenomegaly is present, measures 120.9 x 50.1 mms and shows homogenous echotexture. No focal lesion is seen.

## **ILIAC FOSSA**

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

## **URINARY BLADDER**

• The urinary bladder is normal. Bladder wall is normal in thickness and regular.

## <u>UTERUS</u>

- The uterus is anteverted and anteflexed position.
- It has a homogenous myometrial echotexture.
- The endometrium is seen in midline.
- Nabothian cyst seen in cervix.

## ADNEXA & OVARIES

- Adnexa on both sides are normal.
- Both the ovaries are normal in size, shape & has a normal echotexture.

## CUL-DE-SAC

• Pouch of Douglas is clear.

## **IMPRESSION**

- Grade I fatty changes in liver.
- Mild splenomegaly.
- Nabothian cyst in cervix.

\*\*\* End Of Report \*\*\*

Typed by- anoop





Add: Indra Deep Complex, Sanjay Gandhi Puram, Faizabad Road, Indira Nagar Ph: 7706041643,7706041644 CIN : U85196UP1992PLC014075



Patient Name	: Mrs.MANJU	Registered On	: 08/Jan/2023 09:49:44
Age/Gender	: 31 Y 10 M 18 D /F	Collected	: N/A
UHID/MR NO	: IDCD.0000130974	Received	: N/A
Visit ID	: IDCD0358862223	Reported	: 08/Jan/2023 11:21:08
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF ULTRASOUND

## MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

(\*\*) Test Performed at Chandan Speciality Lab.

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



Dr. Anoop Agarwal MBBS,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 \* 365 Days Open \*Facilities Available at Select Location

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