

Chandan healthcare <chandanhealthcare26@gmail.com>

Fwd: Health Check up Booking Confirmed Request(bobE17845),Package Code-PKG10000238, Beneficiary Code-19616

1 message

anurag sri <anurag.idc@gmail.com> To: Chandan healthcare <chandanhealthcare26@gmail.com>

Fri, Oct 7, 2022 at 6:01 PM

------Forwarded message -------From: Mediwheel <customercare@policywheel.com> Date: Fri, Oct 7, 2022 at 5:57 PM Subject: Health Check up Booking Confirmed Request(bobE17845),Package Code-PKG10000238, Beneficiary Code-19616 To: anurag.idc@gmail.com <anurag.idc@gmail.com> Cc: Mediwheel CC <customercare@mediwheel.in>, Mediwheel CC <mediwheelwellness@gmail.com>



© 011-41195959 Email:wellness@mediwheel.in

Hi Chandan Healthcare Limited,

Diagnostic/Hospital Location :B1/2 Sec-J, Aliganj, Lucknow, City:Lucknow We have received the confirmation for the following booking .

Beneficiary Name : PKG10000238

Beneficiary Name : MR. KUMAR VINEET

Member Age : 32

Member Gender : Male

Member Relation : Employee

Package Name : Full Body Health Checkup Male Below 40

Location : NEEMGAON,Uttar Pradesh-261501

Contact Details : 8765789646

Booking Date : 06-10-2022

Appointment Date: 09-10-2022

Instructions to undergo Health Check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.

2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.

3. Bring urine sample in a container if possible (containers are available at the Health Check centre).

4. Please bring all your medical prescriptions and previous health medical records with you.

5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.

2. It is advisable not to undergo any Health Check during menstrual cycle.

We request you to facilitate the employee on priority.

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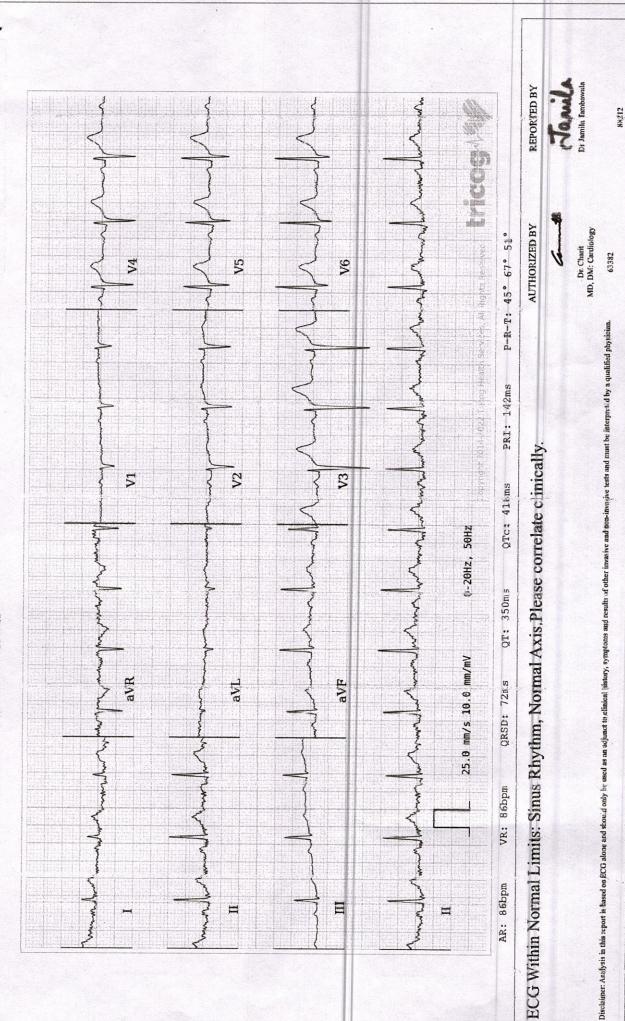
Chandan Diagnostic

tricog

CALI0071172223 32/Male Age / Gender: Patient Name: Patient ID:

Date and Time: 9th Oct 22 10:12 AM

Mr.VINEET KUMAR



	INDRA DIAGNOSTIC CENTRE	
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Add: B 1/2, Sector J, Near Sangam Chauraha, Lda Stadium Road, Aliganj Ph: 9235432681, CIN : U85110DL2003PLC308206

Chandan

Since 1991



Patient Name	: Mr.VINEET KUMAR		Registered C		
Age/Gender	: 32 Y 0 M 0 D /M		Collected	: 09/Oct/2022 0	
UHID/MR NO	: CALI.0000037430		Received	: 09/Oct/2022 1	
Visit ID	: CALI0071172223		Reported	: 09/Oct/2022 1	6:11:09
Ref Doctor	: Dr.Mediwheel - Arcofe	emi Health Care Lt	d. Status	: Final Report	
		DEPARTMENT	OF HAEMATO	LOGY	
	MEDIWHEEL	BANK OF BARO	DA MALE & FE	MALE BELOW 40 YRS	S
Test Name		Result	Unit	Bio. Ref. Interval	Method
Blood Group (Al	BO & Rh typing) ** , Bla	ood			
Blood Group		A			
Rh (Anti-D)		POSITIVE			
Complete Blood	I Count (CBC) ** , Whole	Blood			
Haemoglobin		15.60	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/c	
			100	12-18 Yr 13.0-16.0	Y Mary
				g/dl	
				Male- 13.5-17.5 g/dl	
				Female- 12.0-15.5 g/d	1
TLC (WBC)		6,000.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC					
Polymorphs (Neu	utrophils)	40.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes		51.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes		5.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils		4.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils		0.00	%	< 1	ELECTRONIC IMPEDANCE
ESR					
Observed		4.00	Mm for 1st hr.		
Corrected		0.00	Mm for 1st hr.	< 9	
PCV (HCT)		47.00	%	40-54	
Platelet count					
Platelet Count		2.0	LACS/cu mm	1.5-4.0	ELECTRONIC
					IMPEDANCE/MICROSCOPIC
PDW (Platelet Di	stribution width)	17.20	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet La	arge Cell Ratio)	49.20	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Her	natocrit)	0.22	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Plate	elet Volume)	11.50	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count					
RBC Count		5.62	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
		-	,		



Home Sample Collection 1800-419-0002



Add: B 1/2, Sector J, Near Sangam Chauraha, Lda Stadium Road,Aliganj Ph: 9235432681, CIN : U85110DL2003PLC308206



Patient Name	: Mr.VINEET KUMAR	Registered On	: 09/Oct/2022 09:28:47
Age/Gender	: 32 Y 0 M 0 D /M	Collected	: 09/Oct/2022 09:43:38
UHID/MR NO	: CALI.0000037430	Received	: 09/Oct/2022 13:06:22
Visit ID	: CALI0071172223	Reported	: 09/Oct/2022 16:11:09
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	78.90	fl	80-100	CALCULATED PARAMETER
MCH	27.70	pg	28-35	CALCULATED PARAMETER
MCHC	35.10	%	30-38	CALCULATED PARAMETER
RDW-CV	13.30	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	42.90	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	2,400.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	240.00	/cu mm	40-440	



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



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Patient Name	: Mr.VINEET KUMAR	Registered On	: 09/Oct/2022 09:28:48
Age/Gender	: 32 Y 0 M 0 D /M	Collected	: 09/Oct/2022 09:43:38
UHID/MR NO	: CALI.0000037430	Received	: 09/Oct/2022 13:33:10
Visit ID	: CALI0071172223	Reported	: 09/Oct/2022 15:13:07
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	U	nit Bio	o. Ref. Interval	I 1	Method
GLUCOSE FASTING ** , Plasma						
Glucose Fasting	87.00	mg/dl	< 100 Nor 100-125 P ≥ 126 Diat	Pre-diabetes	GOD POD	
Interpretation: a) Kindly correlate clinically with intake of hypo b) A negative test result only shows that the per	son does not have dia	betes at the	time of testin	0		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 ** Sample:Plasma After Meal		138.70	mg/dl	<140 Normal 140-199 Pre-diabetes	GOD POD
				>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)	5.60	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	38.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	114	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.





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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. **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) ** Sample:Serum	9.05	mg/dL 7.0-	-23.0 CALCULA	ATED
Creatinine ** Sample:Serum	0.89	mg/dl 0.7	-1.3 MODIFIE	D JAFFES
Uric Acid ** Sample:Serum	3.95	mg/dl 3.4-	-7.0 URICASE	E

LFT (WITH GAMMA GT) ** , Serum





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	U	nit Bio. Ref. Inte	rval Method
SGOT / Aspartate Aminotransferase (AST)	28.90	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	48.50	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	44.60	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.65	gm/dl	6.2-8.0	BIRUET
Albumin	4.57	gm/dl	3.8-5.4	B.C.G.
Globulin	2.08	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	2.20	,	1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	104.00	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.97	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.30	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.67	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) ** , Serum				
Cholesterol (Total)	254.00	mg/dl	<200 Desirable 200-239 Borderline H > 240 High	CHOD-PAP igh
HDL Cholesterol (Good Cholesterol)	68.00	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	160	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optim 130-159 Borderline H 160-189 High > 190 Very High	
VLDL	26.48	mg/dl	10-33	CALCULATED
Triglycerides	132.40	mg/dl	< 150 Normal 150-199 Borderline H 200-499 High >500 Very High	GPO-PAP igh



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



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Patient Name	: Mr.VINEET KUMAR	Registered On	: 09/Oct/2022 09:28:47
Age/Gender	: 32 Y 0 M 0 D /M	Collected	: 09/Oct/2022 13:43:06
UHID/MR NO	: CALI.0000037430	Received	: 09/Oct/2022 15:09:36
Visit ID	: CALI0071172223	Reported	: 09/Oct/2022 15:55:05
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
JRINE EXAMINATION, ROUTINE	** , Urine			
Color	PALE YELLOW			
Specific Gravity	1.010			
Reaction PH	Acidic (5.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent	DIPSTICK
		, 0	10-40 (+)	
			40-200 (++)	
			200-500 (+++)	
			> 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+)	DIPSTICK
			0.5-1.0 (++)	
			1-2 (+++)	
Ketone	ABSENT	mg/dl	> 2 (++++) 0.2-2.81	BIOCHEMISTRY
		mg/ai	0.2-2.81	BIOCHEIVIISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution) Microscopic Examination:	ABSENT		and the state of the	
Epithelial cells	0-1/h.p.f			MICROSCOPIC
				EXAMINATION
Pus cells	ABSENT			MICROCCODIC
RBCs	ABSENT			MICROSCOPIC
Cast				EXAMINATION
Cast	ABSENT			MICDOSCODIC
Crystals	CALCIUM OXALATE			MICROSCOPIC EXAMINATION
Others	ABSENT			LANIMATION
others	ADJENT			
TOOL, ROUTINE EXAMINATION	** , Stool			
Color	BROWNISH			
Consistency	SEMI SOLID			
Reaction (PH)	Acidic (6.5)			
Mucus	ABSENT	,		
Blood	ABSENT			
Worm	ABSENT			
Pus cells	ABSENT			
RBCs	ABSENT			





Add: B 1/2, Sector J, Near Sangam Chauraha, Lda Stadium Road,Aliganj Ph: 9235432681, CIN : U85110DL2003PLC308206



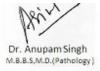
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DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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		1.1		
Sugar, PP Stage	ABSENT			
			and the state	
Interpretation:				
(+) < 0.5 gms%				
(++) 0.5-1.0 gms%				
(+++) 1-2 gms%				
(++++) > 2 gms%				





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Home Sample Collection

1800-419-0002





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Age/Gender	: 32 Y 0 M 0 D /M	Collected	: 09/Oct/2022 09:43:38
UHID/MR NO	: CALI.0000037430	Received	: 09/Oct/2022 13:04:21
Visit ID	: CALI0071172223	Reported	: 09/Oct/2022 14:25:27
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)	114.42	ng/dl	84.61-201.7	CLIA	
T4, Total (Thyroxine)	6.36	ug/dl	3.2-12.6	CLIA	
TSH (Thyroid Stimulating Hormone)	2.59	µIU/mL	0.27 - 5.5	CLIA	
T () ()		,			

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.

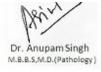
5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.

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.





ISO 9001:2018

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Patient Name	: Mr.VINEET KUMAR	Registered On	: 09/Oct/2022 09:28:49
Age/Gender	: 32 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CALI.0000037430	Received	: N/A
Visit ID	: CALI0071172223	Reported	: 09/Oct/2022 12:50:47
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 * (500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

DIGITAL CHEST P-A VIEW

- 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 : NO SIGNIFICANT DIAGNOSTIC ABNORMALITY SEEN.



Dr. Pankaj Kumar Gupta (M.B.B.S D.M.R.D)

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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

WHOLE ABDOMEN ULTRASONOGRAPHY REPORT

LIVER

• The liver is normal in size (~ 13.5 cm) in longitudinal span and has a normal homogenous echotexture. No focal lesion is seen.

PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- The portal vein is not dilated.
- Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common duct is 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 is normal in size 9.3 x 4.4 cm position and cortical echotexture.Cortico-medullary demarcation is maintained.
- Left kidney is normal in size 10.2 x 4.4 cm position and cortical echotexture. Cortico-medullary demarcation is maintained.
- The collecting system of both the kidneys are not dilated.

SPLEEN

• The spleen is normal in size (~ 9.1 cm) and has a normal homogenous echo-texture.

ILIAC FOSSAE & PERITONEUM

- Scan over the iliac fossae does not reveal any fluid collection or mass.
- No free fluid is noted in peritoneal cavity.

URINARY BLADDER

• The urinary bladder is normal. Bladder wall is normal in thickness and is regular.No calculus is seen.

PROSTATE

• The prostate gland is normal in size with smooth outline. (Volume 16 cc)





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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

FINAL IMPRESSION

• NO SIGNIFICANT ABNORMALITY SEEN IN PRESENT STUDY.

Adv: Clinico-pathological correlation and follow-up.

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

Result/s to Follow: ECG/EKG



Dr. Pankaj Kumar Gupta (M.B.B.S D.M.R.D)

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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