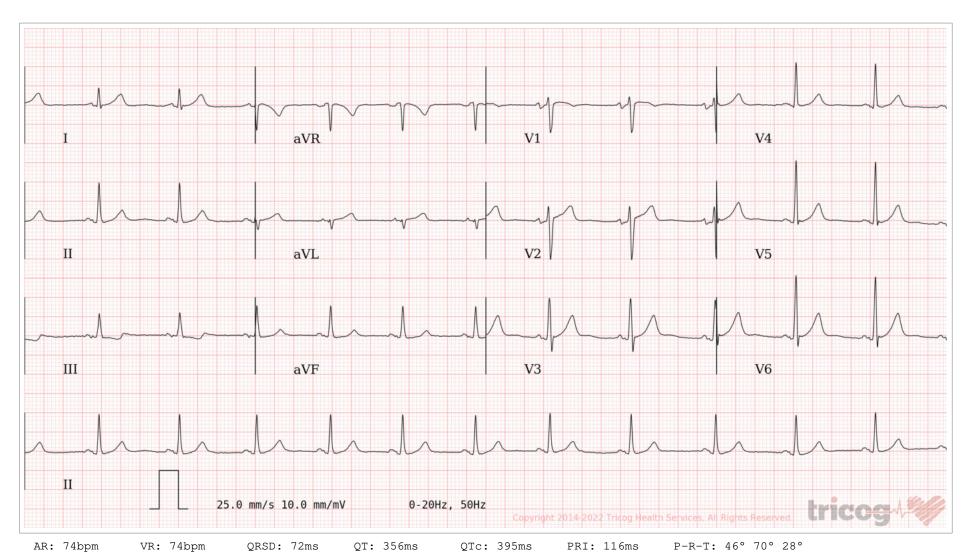
Chandan Diagnostic



Age / Gender: 34/Male Date and Time: 27th Oct 22 11:55 AM

Patient ID: CVAR0058152223

Patient Name: Mr.ABHISHEK KUMAR - BOBE18734



ECG Within Normal Limits: Sinus Rhythm, Normal Axis. Please correlate clinically.

AUTHORIZED BY



Dr. Charit MD, DM: Cardiology

63382

REPORTED BY



Dr. Bharati R

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.

72470

CHANDAN DIAGNOSTIC CENTRE



Name of Company: mediwheel

Name of Executive: ABKISHEK KUNIAR

Date of Birth: . Q.8 ... / ...

Sex: Male / Female

Height: 1.70....CMs

Weight: .. 62 ... KGs

BMI (Body Mass Index): 21. C

Chest (Expiration / Inspiration) . 8.6..../ . 9.0...CMs

Pulse:76. BPM - Regular / Irregular

RR: 18. Resp/Min

Ident Mark: Cut Mark for Right Head

Any Allergies: No

Vertigo: NO

Any Medications: No

Any Surgical History: NO

Habits of alcoholism/smoking/tobacco: No

Chief Complaints if any:

Lab Investigation Reports: Pepul Alteren

Eye Check up vision & Color vision: Normel

Left eye:

Norquel

Right eye:

Near vision: No saw

Dental check up : Normal



CHANDAN DIAGNOSTIC CENTRE



ENT Check up: Novamil

Eye Checkup: Novamil

Final impression

he/she is fit / Unfit to join any organization.

Client Signature :-

Dr. R.C. ROY MBB5, MD. (Radio Di MBB5, MD. Radio Di Reg. No. -26

Signature of Medical Examiner

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

Date 27 / 1. 1. 2022, Place - VARANASIS

handan Diagnostic Center 39, Shivaji Nagar, Mahmoorgsaj Varanasi-22101d (U.P.) Phone No.:0542-2223232



आयकर विभाग

INCOME TAX DEPARTMENT

ABHISHEK KUMAR

CHANDRA BHAN PRASAD

28/01/1988

Permanent Account Number

AVNPK8907A

Rkema

Signature



GOVT. CFINDIA









CIN: U85110DL2003PLC308206



: 27/Oct/2022 11:32:15 Patient Name : Mr.ABHISHEK KUMAR - BOBE18734 Registered On Age/Gender : 34 Y 0 M 0 D /M Collected : 27/Oct/2022 11:52:10 UHID/MR NO : CVAR.0000033085 Received : 27/Oct/2022 12:03:20 Visit ID : CVAR0058152223 Reported : 27/Oct/2022 13:34:45

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 Group (ABO & Rh typing) *, Blood

Blood Group A
Rh (Anti-D) POSITIVE

Complete Blood Count (CBC) *, Whole Blood

Haemoglobin

16.10

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

TLC (WBC) 5,400.00 /Cu mm 4000-10000 **ELECTRONIC IMPEDANCE** <u>DLC</u> Polymorphs (Neutrophils) 60.00 % 55-70 **ELECTRONIC IMPEDANCE** Lymphocytes 36.00 % 25-40 **ELECTRONIC IMPEDANCE** Monocytes 2.00 % 3-5 **ELECTRONIC IMPEDANCE** Eosinophils 2.00 % 1-6 **ELECTRONIC IMPEDANCE Basophils** 0.00 % < 1 **ELECTRONIC IMPEDANCE ESR** Observed 10.00 Mm for 1st hr. Corrected 6.00 Mm for 1st hr. < 9 PCV (HCT) 46.00 % 40-54 **Platelet count** 0.90 **Platelet Count** LACS/cu mm 1.5-4.0 **ELECTRONIC** IMPEDANCE/MICROSCOPIC PDW (Platelet Distribution width) fL nr 9-17 **ELECTRONIC IMPEDANCE** % P-LCR (Platelet Large Cell Ratio) nr 35-60 **ELECTRONIC IMPEDANCE** PCT (Platelet Hematocrit) % 0.108-0.282 **ELECTRONIC IMPEDANCE** nr MPV (Mean Platelet Volume) fΙ 6.5-12.0 **ELECTRONIC IMPEDANCE** nr **RBC Count RBC Count** 5.38 Mill./cu mm 4.2-5.5 **ELECTRONIC IMPEDANCE**

Female- 12.0-15.5 g/dl









CIN: U85110DL2003PLC308206



Patient Name : Mr.ABHISHEK KUMAR - BOBE18734 : 27/Oct/2022 11:32:15 Registered On Age/Gender : 34 Y 0 M 0 D /M Collected : 27/Oct/2022 11:52:10 UHID/MR NO : CVAR.0000033085 Received : 27/Oct/2022 12:03:20 Visit ID : CVAR0058152223 Reported : 27/Oct/2022 13:34:45 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	85.40	fl	80-100	CALCULATED PARAMETER
MCH	29.90	pg	28-35	CALCULATED PARAMETER
MCHC	34.90	%	30-38	CALCULATED PARAMETER
RDW-CV	13.90	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	46.30	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,240.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	108.00	/cu mm	40-440	



S.N. Sinha (MD Path)









CIN: U85110DL2003PLC308206



: 27/Oct/2022 11:32:16 Patient Name : Mr.ABHISHEK KUMAR - BOBE18734 Registered On Age/Gender : 34 Y 0 M 0 D /M Collected : 27/Oct/2022 11:52:10 UHID/MR NO : CVAR.0000033085 Received : 27/Oct/2022 12:03:20 Visit ID : CVAR0058152223 Reported : 27/Oct/2022 13:44:54

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. Interval Method

GLUCOSE FASTING, Plasma

Glucose Fasting 93.60 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 134.00 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) 5.00 % NGSP HPLC (NGSP)
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.









CIN: U85110DL2003PLC308206



Patient Name : Mr.ABHISHEK KUMAR - BOBE18734 : 27/Oct/2022 11:32:16 Registered On Age/Gender : 34 Y 0 M 0 D /M Collected : 27/Oct/2022 11:52:10 UHID/MR NO : CVAR.0000033085 Received : 27/Oct/2022 12:03:20 Visit ID : CVAR0058152223 Reported : 27/Oct/2022 13:44:54 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. 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	9.00	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	0.80	mg/dl	0.7-1.3	MODIFIED JAFFES
Uric Acid Sample:Serum	7.40	mg/dl	3.4-7.0	URICASE

LFT (WITH GAMMA GT) *, Serum





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





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Patient Name : Mr.ABHISHEK KUMAR - BOBE18734 Registered On : 27/Oct/2022 11:32:16 Age/Gender : 34 Y 0 M 0 D /M Collected : 27/Oct/2022 11:52:10 UHID/MR NO : CVAR.0000033085 : 27/Oct/2022 12:03:20 Received Visit ID : CVAR0058152223 Reported : 27/Oct/2022 13:44:54

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	Init Bio. Ref. Inter	val Method
SGOT / Aspartate Aminotransferase (AST)	44.60	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	65.80	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	36.00	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.80	gm/dl	6.2-8.0	BIRUET
Albumin	4.00	gm/dl	3.8-5.4	B.C.G.
Globulin	2.80	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.43		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	65.70	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.90	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.40	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.50	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) , Serum				
Cholesterol (Total)	125.00	mg/dl	<200 Desirable 200-239 Borderline Hig > 240 High	CHOD-PAP gh
HDL Cholesterol (Good Cholesterol)	36.00	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	76	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optima 130-159 Borderline Hig 160-189 High > 190 Very High	
VLDL	13.22	mg/dl	10-33	CALCULATED
Triglycerides	66.10	mg/dl	< 150 Normal 150-199 Borderline Hig 200-499 High >500 Very High	GPO-PAP gh



S.N. Sinha (MD Path)









CIN: U85110DL2003PLC308206



Patient Name : Mr.ABHISHEK KUMAR - BOBE18734 Registered On : 27/Oct/2022 11:32:16 Age/Gender : 34 Y 0 M 0 D /M Collected : 27/Oct/2022 14:56:22 UHID/MR NO : CVAR.0000033085 Received : 27/Oct/2022 14:57:00 Visit ID : CVAR0058152223 Reported : 27/Oct/2022 14:59:02 Ref Doctor

: Dr.Mediwheel - Arcofemi Health Care Ltd. : Final Report Status

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINATION, ROUTINE * , Urin	ne			
Color	PALE YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic (6.5)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+)	DIPSTICK
			40-200 (++)	
			200-500 (+++) > 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++)	DIPSTICK
			1-2 (+++) > 2 (++++)	
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT	,	the state of the state of	
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	2-3/h.p.f			MICROSCOPIC
Pus cells	0-2/h.p.f			EXAMINATION
RBCs	ABSENT			MICROSCOPIC
No Co	ABSENT			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









CIN: U85110DL2003PLC308206



Patient Name : Mr.ABHISHEK KUMAR - BOBE18734 Registered On Collected

: 27/Oct/2022 11:32:16 : 27/Oct/2022 14:56:22

Age/Gender UHID/MR NO : 34 Y 0 M 0 D /M : CVAR.0000033085

Received

: 27/Oct/2022 14:57:00

Visit ID

: CVAR0058152223

Reported

: 27/Oct/2022 14:59:02

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

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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CIN: U85110DL2003PLC308206



Patient Name : Mr.ABHISHEK KUMAR - BOBE18734 : 27/Oct/2022 11:32:16 Registered On Age/Gender Collected : 34 Y 0 M 0 D /M : 27/Oct/2022 11:52:10 UHID/MR NO : CVAR.0000033085 Received : 27/Oct/2022 17:44:37 Visit ID : CVAR0058152223 Reported : 27/Oct/2022 17:57:27

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)	98.00	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	5.26	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	3.66	μIU/mL	0.27 - 5.5	CLIA
Interpretation:		1		
•		0.3-4.5 μIU/ı	nL First Trimest	ter
		0.5-4.6 μIU/ı	mL Second Trim	nester
		0.8-5.2 μIU/1	nL Third Trimes	ster
		0.5-8.9 μIU/1	nL Adults	55-87 Years
		0.7-27 μIU/1	nL Premature	28-36 Week
		2.3-13.2 μIU/1	nL Cord Blood	> 37Week
		0.7-64 μIU/ı		- 20 Yrs.)
			/mL Child	0-4 Days
		1.7-9.1 μIU/ı		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.



C.M. Sinta

Dr.S.N. Sinha (MD Path)









CIN: U85110DL2003PLC308206



Patient Name : Mr.ABHISHEK KUMAR - BOBE18734 Registered On : 27/Oct/2022 11:32:17

Collected Age/Gender : 34 Y 0 M 0 D /M : N/A UHID/MR NO : CVAR.0000033085 Received : N/A

Visit ID : CVAR0058152223 Reported : 27/Oct/2022 12:34:35

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 *

X- Ray Digital Chest P.A. View

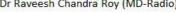
- Lung fields are clear.
- Pleural spaces are clear.
- Both hilar shadows appear normal.
- Trachea and carina appear normal.
- Heart size within normal limits.
- Both the diaphragms appear normal.
- Soft tissues and Bony cage appear normal.

IMPRESSION

* NO OBVIOUS DETECTABLE ABNORMALITY SEEN



Dr Raveesh Chandra Roy (MD-Radio)







CHANDAN DIAGNOSTIC CENTRE



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



Patient Name : Mr.ABHISHEK KUMAR - BOBE18734 Registered On : 27/Oct/2022 11:32:17

 Age/Gender
 : 34 Y 0 M 0 D /M
 Collected
 : N/A

 UHID/MR NO
 : CVAR.0000033085
 Received
 : N/A

Visit ID : CVAR0058152223 Reported : 27/Oct/2022 12:13:38

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

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 **10.5 cm** in longitudinal span and has a normal homogenous echotexture. No focal lesion is seen.

PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein measures **9.1 mm** in caliber.
- Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- CBD measures 3.5 mm in caliber.
- 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 9.6 x 3.2 cm position and cortical echotexture.
- Left kidney size 9.9 x 4.7 cm . Hyperechoic focus 7.5 mm in diameter is noted in middle collecting system of left kidney. No hydronephrosis.

SPLEEN

• The spleen is normal in size **8.6 cm** and has a normal homogenous echo-texture.

URINARY BLADDER

• Urinary bladder is partially filled. Prevoid urine volume 47 cc.

PROSTATE

• The prostate gland is normal in size 31 x 30 x 27 mm / 14 gms with smooth









CIN: U85110DL2003PLC308206



Patient Name : Mr.ABHISHEK KUMAR - BOBE18734 : 27/Oct/2022 11:32:17 Registered On

Age/Gender : 34 Y 0 M 0 D /M Collected : N/A UHID/MR NO : CVAR.0000033085 Received : N/A

Visit ID : 27/Oct/2022 12:13:38 : CVAR0058152223 Reported

: Dr.Mediwheel - Arcofemi Health Care Ltd. Ref Doctor : Final Report Status

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

outline.

FINAL IMPRESSION

- Left renal calculus
- Rest of the abdominal organs are normal

Adv: Clinico-pathological correlation and follow-up.

*** 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 *

*Facilities Available at Select Location







