


Patient Name : Mr. RAVI PRAKASH BHUSHAN	Reg No. : 5816/UHID22DL	Lab ID. : 6304/OPDPB22DL
Age / Gender : 31Y / Male	Date : 14-Jan-2023	
Mobile No. : 7250102700	Manual No.	Collected : 14-Jan-2023 13.25
Refd. By : Dr. INSURANCE	Sample ID : 23128	Received : 14-Jan-2023 13.28
Sample Type : EDTA whole blood		Report : 14-Jan-2023 14.49

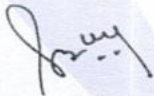
TEST NAME	RESULT	UNIT	RANGE	METHOD
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HEAMOTOLOGY

COMPLETE BLOOD COUNT

HEMOGLOBIN	14.3	g/dl	12.5-16.5	Colorimetric
TOTAL LEUCOCYTE COUNT	5.9	10 ³ /uL	4.0-11.0	Electrical impedance
DIFFERENTIAL LEUCOCYTE COUNT(DLC)				
Neutrophil	64	%	40-75	Electrical impedance
Lymphocyte	29	%	20-45	Electrical impedance
Eosinophil	04	%	01-06	Microscopy
Monocyte	03	%	2-10	Microscopy
Basophil	00	%	0-2	Microscopy
ESR	10	mm/1sthr	0-20	Westergren's
RBC COUNT	5.30	mili/cmm	3.8-5.5	Electrical impedance
PCV	44	%	35-45	Calculated
MCV	83.80	Fl	80-100	Calculated
MCH	27.1	Picogram	27.5-33.2	Calculated
MCHC	32.30	gm/dl	32-36	Calculated
PLATELET COUNT	150	10 ³ /uL	150-450	Electrical impedance

-----End of Report-----



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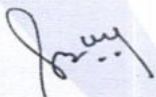
HEAMOTOLOGY

BLOOD GROUPING(A,B,O)&Rh
FACTOR
BLOOD GROUP ABO
RH TYPING

"O"
"POSITIVE"

Manual
Manual

-----End of Report-----



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Refd. By : Dr. INSURANCE	Sample ID : 23128	Received : 14-Jan-2023 13.28
Sample Type : Plasma(Sodium fluoride)		Report : 14-Jan-2023 14.49

TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

BLOOD SUGAR FASTING	97.2	mg/dl	74-100	GOD-POD
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INTERPRETATION:

2018 American Diabetes Association (ADA) Diabetes Guidelines

Criteria for Diabetes Diagnosis:

FPG > 126.0 mg/dl (Fasting is defined as no caloric intake for >8 hours)

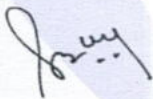
2-hr PG > 200 mg/dl during OGTT(75-G)*

Using a glucose load containing the equivalent of 75g anhydrous glucose dissolved in water

Random PG < 200 mg/dl

in individuals with symptoms of hyperglycemia or hyperglycemic crisis

-----End of Report-----



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Mobile No. : 7250102700	Manual No.	Collected : 14-Jan-2023 16.54
Refd. By : Dr. INSURANCE	Sample ID : 23128	Received : 14-Jan-2023 16.55
Sample Type : Plasma(Sodium fluoride)		Report : 14-Jan-2023 18.36

TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

Blood Sugar PP	126.0	mg/dl	70-150	GOD-POD
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INTERPRETATION:

2018 American Diabetes Association (ADA) Diabetes Guidelines

Criteria for Diabetes Diagnosis:

FPG > 126.0 mg/dl (Fasting is defined as no caloric intake for >8 hours)

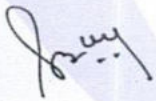
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Using a glucose load containing the equivalent of 75g anhydrous glucose dissolved in water

Random PG < 200 mg/dl

in individuals with symptoms of hyperglycemia or hyperglycemic crisis

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HEAMATOLOGY

HBA1C (GLYCOSYLATED HB)	5.2	%	4-6	PEIT
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Metabolically healthy patients 4.5 - 6.0 %
6.1 - 6.5 %

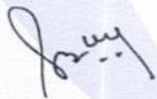
Good control :

Fair control : 6.6 - 7.0 %

Poor control : Above - >7.0 %

COMMENTS: HbA1c is an indicator of glycemic control. HbA1c represents average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but with in this 120 days.Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four. Estimated Average Glucose mg/dl = (HbA1c x 35.6) - 77.3) Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only this means that to predict or estimate average glucose from Hb-A1c or vice-versa is not "perfect" but gives a good working ballpark estimate. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime glucose levels, which are easier to predict and control. As per IFCC recommendations 2007, HbA1c being reported as above maintaining traceability to both IFCC (mmol/mol) & NGSP (%) units.

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Sample Type : Serum	Sample ID : 23128	Report : 14-Jan-2023 14.49

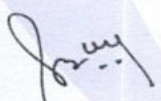
TEST NAME	RESULT	UNIT	RANGE	METHOD
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HbsAg	NEGATIVE			<u>Serology</u> Immunochromatography
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Interpretation:-

Clinical Significance:- Hepatitis B surface antigen (HBsAg) is a test to determine if some one is infected with hepatitis B virus .A' Positive or reactive HBsAg test result means that the person is infected and further testing is needed to determine . if this is a new " acute " infection or "chronic" infection.
 HBsAg usually appearance 4 weeks after exposure but can be detected any time after 1st week .

-----End of Report-----



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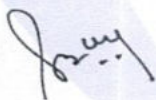
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TEST NAME	RESULT	UNIT	RANGE	METHOD
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HIV 1 & II	NEGATIVE	<u>Serology</u>		Immunochromatography
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Clinical Significance : HIV tests look for antibodies to HIV (Immunodeficient virus) in blood or all fluid approx 97% people develop detectable antibodies within 3-12 weeks(21 -84 days) of infection immunoassay are rapid tests used for screening positive rapid tests need a follow up confirm and includes western blot test.Rapid test performed during window period may give and thus detect HIV at about 10 days after infection even before antibodies develop but these are not used as a screening test.

-----End of Report-----


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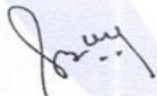
TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

KIDNEY FUNCTION TEST

Blood Urea	18.0	mg/dl	15.0-45.0	urease
Serum Creatinine	0.7	mg/dl	0.7-1.3	Jaffes Kinetic
Serum Uric Acid	5.10	mg/dl	2.5-7.2	Uricase
Total Protein				
PROTEN	7.89	g/dl	6.4-8.3	Biuret
ALBUMIN	5.0	g/dl	3.4-4.8	Bcg
GLOBULIN	2.89	g/dl	2.3-3.5	
A/G RATIO	1.73	g/dl		
Calcium	10.1	mg/dl	8.6-10.2	Arsenazo
Sodium	142.5	mmol/L	136.0-149.0	ISE Indirect
Potasium	4.1	mmol/L	3.5-5.5	ISE Indirect
Chloride	109.0	mmol/L	98.0-109.0	ISE Indirect

-----End of Report-----



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BIOCHEMISTRY

LIPID PROFILE

Total Cholesterol	145.00	mg/dl	123-199	CHOD-PAP
Triglycerides	158.9	mg/dl	40-160	Gpo
HDL Cholesterol Direct	41.8	mg/dl	35.3-79.5	Direct
Vldl	32	mg/dl	4.7-22.1	
LDL Cholesterol Direct	71.4	mg/dl	63-129	
Total Cholesterol/HDL Ratio	3.5		0.0-4.97	
LDL/HDL Ratio	1.7		0.0-3.55	

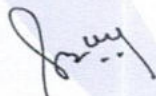
INTERPRETATION:-

Acceptable/Low Risk	: < 200 mg/dL	: <130 mg/dL	: < 4.5
Borderline High Risk	: 200-239 mg/dL	: 130-159 mg/dl	: 4.5 - 6.0
High Risk	: > 240 mg /dL	: > 160 mg/dL	: > 6.0

APO A1 & APO B: Recent studies have shown that Apolipoproteins A1 & B might be the best indicators of Coronary Artery.

COMMENTS:-

TRIGLYCERIDE level > 250mg/dL is associated with an approximately 2-fold greater risk of coronary vascular disease. Elevation of triglycerides can be seen with obesity, medication, fast less than 12 hrs., alcohol intake, diabetes melitus, and



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pancreatitis.

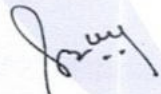
CHOLESTEROL, its fractions and triglycerides are the important plasma lipids indefining cardiovascular risk factors and in the managment of cardiovascular disease.Highest acceptable and optimum values of cholesterol values of cholesterol vary with age. Values above 220 mgm/dl are associated with increased risk of CHD regardless of HDL & LDL values.

HDL-CHOLESTEROL level <35 mg/dL is associated with an increased risk of coronary vascular disease even in the face of desirable levels of cholesterol and LDL - cholesterol.

LDL - CHOLESTEROL& TOTAL CHOLESTEROL levels can be strikingly altered by thyroid, renal and liver disease as well as hereditary factors.Based on total cholesterol, LDL- cholesterol, and total cholesterol/HDL - cholesterol ratio, patients may be divided into the three risk categories :- CHOLESTEROL LDL-CHOLESTEROL CHO/HDL RATIO

Artery Disease risk in an individual.Patients who have normal lipid profile may have abnormal Apo A1 & Apo B values. Ratio of Apo B : Apo A1 is >1 in cases of increased CHD risk.

-----End of Report-----



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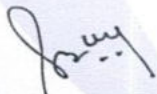
TEST NAME	RESULT	UNIT	RANGE	METHOD
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BIOCHEMISTRY

LIVER FUNCTION TEST

Serum Bilirubin				
Total Bilirubin	0.63	mg/dl	0.0-2.0	Diazo
Direct Bilirubin	0.33	mg/dl	0-0.4	Diazo
Indirect Bilirubin	0.30	mg/dl	0-0.8	Calculated
Total Protein				
PROTEN	7.89	g/dl	6.4-8.3	Biuret
ALBUMIN	5.0	g/dl	3.4-4.8	Bcg
GLOBULIN	2.89	g/dl	2.3-3.5	
A/G RATIO	1.73	g/dl		
SGOT	44	U/L	0-35	IFCC
SGPT	36	U/L	0.0-45	IFCC
Gamma GT	16.9	U/L	0-55	Glupa-c
Alkaline Phosphatase	111	U/L	53-128	Amp

-----End of Report-----



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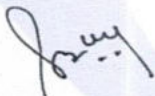
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Sample Type : STOOL		Report : 14-Jan-2023 14.49

TEST NAME	RESULT	UNIT	RANGE	METHOD
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CLINICAL PATHOLOGY

TEST NAME	RESULT	UNIT	RANGE	METHOD
STOOL R/M				
PHYSICAL EXAMINATION				
COLOUR/ APPEARANCE	BROWNISH			
CONSISTENCY	SEMI-FORMED			
PUS	NIL			
MUCUS	NIL			
BLOOD	NIL			
CHEMICAL REACTION				
REACTION	ACIDIC			
MICROSCOPY EXAMINATION				
PUS CELLS	1-2			
RBC'S	NIL			
OVA	NIL			
CYST	NIL			
BACTERIA	NIL			
OTHERS	NIL			

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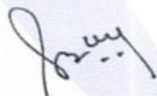
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<u>HORMONES</u>				
TSH	0.56	μIU/ml		CLIA
Adults				
21-100 yrs	0.42 - 5.45			
Pediatric				
0-12 Months	0.98-5.63			
1-5 years	0.64-5.76			
6-10 Years	0.51-4.82			
11-14 Years	0.53-5.27			
15-20 years	0.43-4.20			
Pregnancy				
First trimester	0.1 - 2.5*			
Second trimester	0.2 - 3*			
Third trimester	0.3 - 3*			

COMMENTS: Assay results should be interpreted in context to the clinical condition and associated results of other investigations. Previous treatment with corticosteroid therapy may result in lower TSH levels while thyroid hormone levels are normal. Results are invalidated if the client has undergone a radionuclide scan within 7-14 days before the test. Abnormal thyroid test findings often found in critically ill clients should be repeated after the critical nature of the condition is resolved. The production, circulation, and disintegration of thyroid hormones are altered throughout the stages of pregnancy

-----End of Report-----



Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252
Lab Technician : chand



Delhi Centre:
IPSC Delhi : Plot No 453, Sector 19
Dwarka, New Delhi - 110075


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info@ipscindia.com



BOOK DIAGNOSTICS

Bengaluru Centre:
IPSC Bangalore: 11,12 Sahakara Nagar,
Bellary Road, Bengaluru - 560092

Contact Us : +91-7028207222
bengaluru@ipscindia.com

Patient Name : Mr. RAVI PRAKASH BHUSHAN	Reg No. : 5816/UHID22DL	Lab ID. : 6304/OPDPB22DL
Age / Gender : 31Y / Male	Date : 14-Jan-2023	
Mobile No. : 7250102700	Manual No.	Collected : 14-Jan-2023 13.25
Refd. By : Dr. INSURANCE		Received : 14-Jan-2023 13.28
Sample Type : URINE	Sample ID : 23128	Report : 14-Jan-2023 14.49

TEST NAME	RESULT	UNIT	RANGE	METHOD
-----------	--------	------	-------	--------

CLINICAL PATHOLOGY

URINE ROUTINE

MICROSCOPY

PHYSICAL EXAMINATION

QUANTITY

30.00 ml 10-30

COLOUR

PALE YELLOW

TRANSPARENCY

CLEAR

SPECIFIC GRAVITY

1.020 1.015-1.025

PH

6.5 5.5 - 7

CHEMICAL EXAMINATION

ALBUMIN

NIL

SUGAR

NIL

MICROSCOPIC EXAMINATION

PUS CELLS

1-2 /hpf

MICROSCOPIC

RBC'S

NIL NIL

CASTS

NIL

CRYSTALS

NIL

EPITHELIAL CELLS

0-1

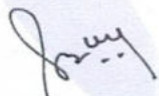
BACTERIA

NIL

OTHERS

NIL

-----End of Report-----



Dr. Sangeeta B
DCP, DNB, PATHOLOGY,
DMC/25252

Lab Technician : ramshankar



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bengaluru@ipscindia.com

IPSC PAIN AND SPINE HOSPITAL
 PLOT-453 NEAR SBI BANK SECTOR-19
 DWARKA NEW DELHI-110075, PH: 9555437357

RAVI PRAKASH BHUSHAN

TREADMILL TEST REPORT

ID : 3615
 DATE : 14-01-2023
 AGE/SEX : 31 / M
 HT/WT : 0 / 0
 REF. BY :

PROTOCOL : Bruce
 HISTORY :
 INDICATION : Checkup/Physical fitness,
 MEDICATION :

PHASE	TOTAL TIME	STAGE TIME	SPEED Km/Hr	GRADE %	H.R. bpm	B.P. mmHg	RPP x100	ST LEVEL (MM)			METS
								II	V1	V5	
SUPINE					65	120 / 80	78	1.6	-0.3	1.2	
STANDING					77	120 / 80	92	1.5	-0.3	1.3	
HYPERVENT					79	120 / 80	94	1.7	-0.4	1.4	
Stage 1	2:55	2:55	2.7	10	109	130 / 80	141	1.9	0	1.2	4.67
Stage 2	5:55	2:55	4	12	116	140 / 80	162	1	0	1.2	7.04
Stage 3	8:55	2:55	5.4	14	128	150 / 80	192	1.6	-0.3	1.9	9.92
Stage 4	11:55	2:55	6.7	16	141	160 / 80	225	1.1	0.3	1.6	13.89
Stage 5	14:39	2:39	8	18	165	170 / 80	280	1.8	0.1	1.7	19.30
PK-EXERCISE	14:46	2:46	8	18	169	170 / 80	287	1.9	-0.1	1.2	19.53
RECOVERY	16:5	0:55			106	160 / 80	169	1.8	0.4	1.3	
RECOVERY	17:5	1:55			101	150 / 80	151	0.9	0.5	0.5	
RECOVERY	18:5	2:55			91	140 / 80	127	0.7	0.3	0.4	
RECOVERY	18:46	3:36			99	130 / 80	128	0.8	0.2	0.4	

RESULTS

EXERCISE DURATION : 14:46
 MAX HEART RATE : 169 bpm
 MAX BLOOD PRESSURE : 170 / 80 mm Hg
 REASON OF TERMINATION : Achieved THR,
 BP RESPONSE : Normal,
 ARRHYTHMIA : None,
 H.R. RESPONSE : Normal Chronotropic Response,
 IMPRESSIONS :
 Negative for Provocable myocardial ischemia,

MAX WORK LOAD : 19.53 METS

Technician :

IPSC PAIN AND SPINE HOSPITAL

RAVI PRAKASH BHUSHAN

I.D. 3615

Age 31/M

Date 14-01-2023

RATE 65bpm

B.P. 120/80

PRETEST

SUPINE

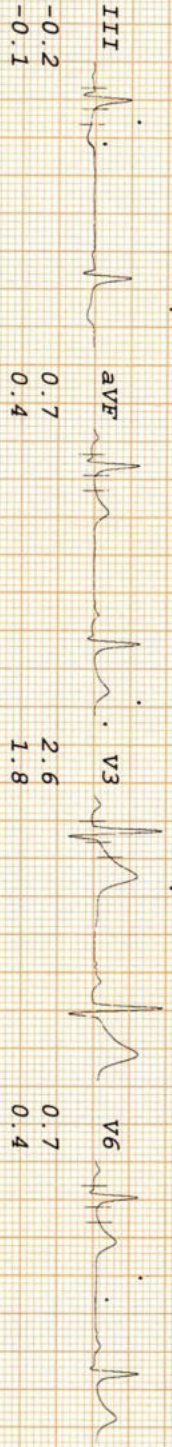
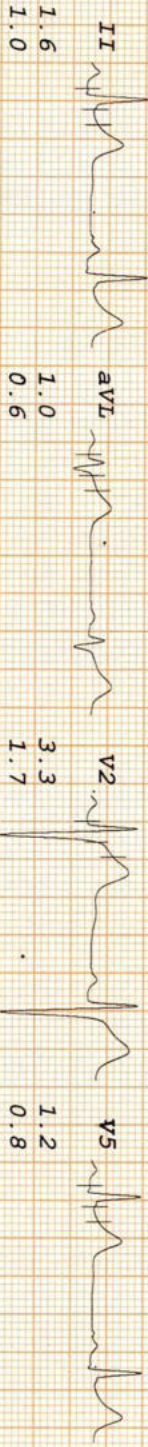
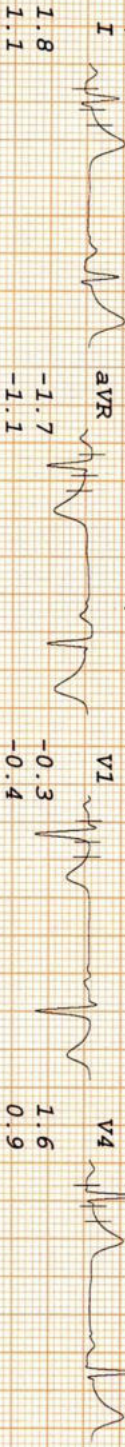
ST @ 10mm/mV

80ms PostJ

LINKED MEDIAN

Mag. X 2

V1



-0.3
-0.4

R. Prakash

IPSC PAIN AND SPINE HOSPITAL

RAVI PRAKASH BHUSHAN
 I.D. 3615
 Age- 31/M
 Date 14-01-2023

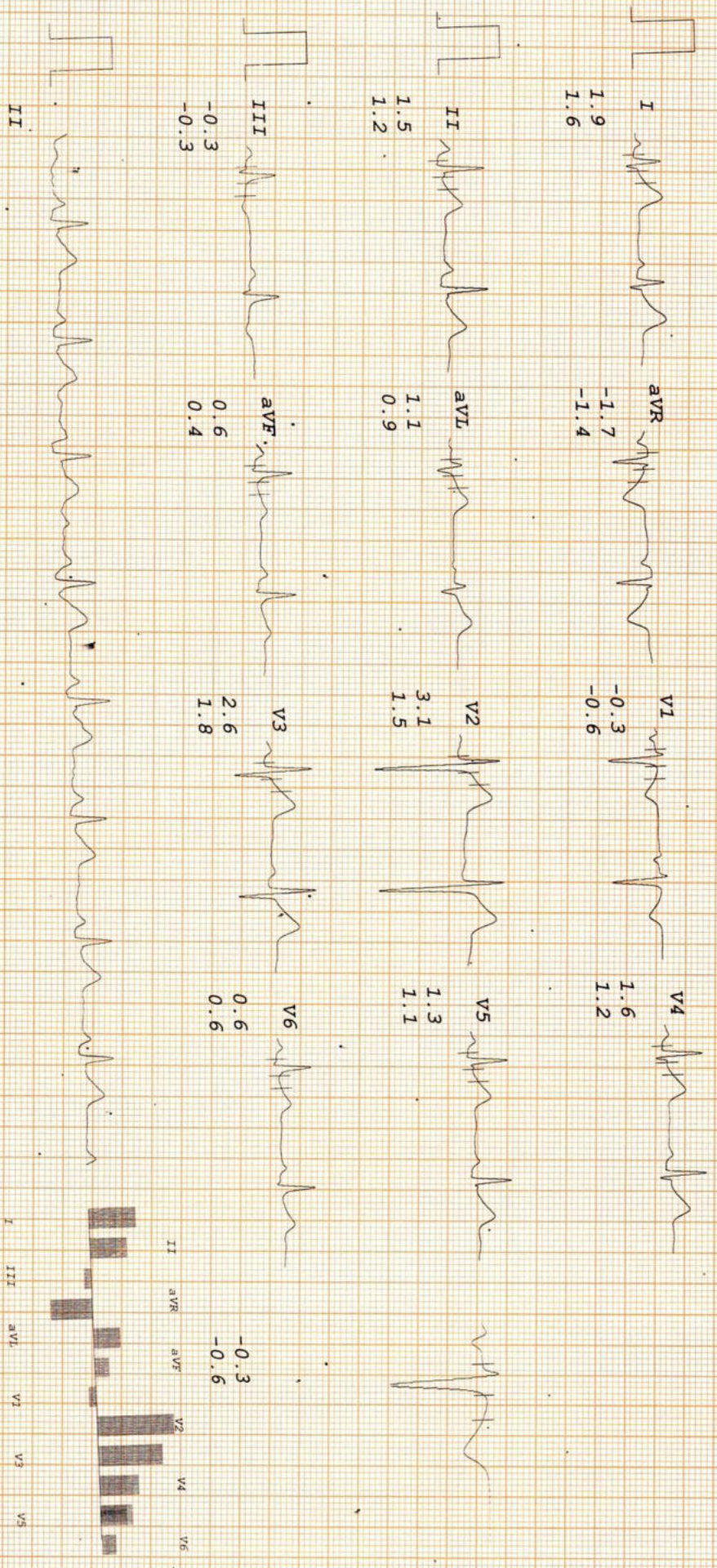
RATE 77bpm
 B.P. 120/80

PRETEST
 STANDING
 ST @ 10mm/mV
 80ms PostJ

LINKED MEDIAN

Mag. X 2

V1



IPSC PAIN AND SPINE HOSPITAL

RAVI PRAKASH BHUSHAN
 I.D. 3615
 Age 31/M
 Date 14-01-2023

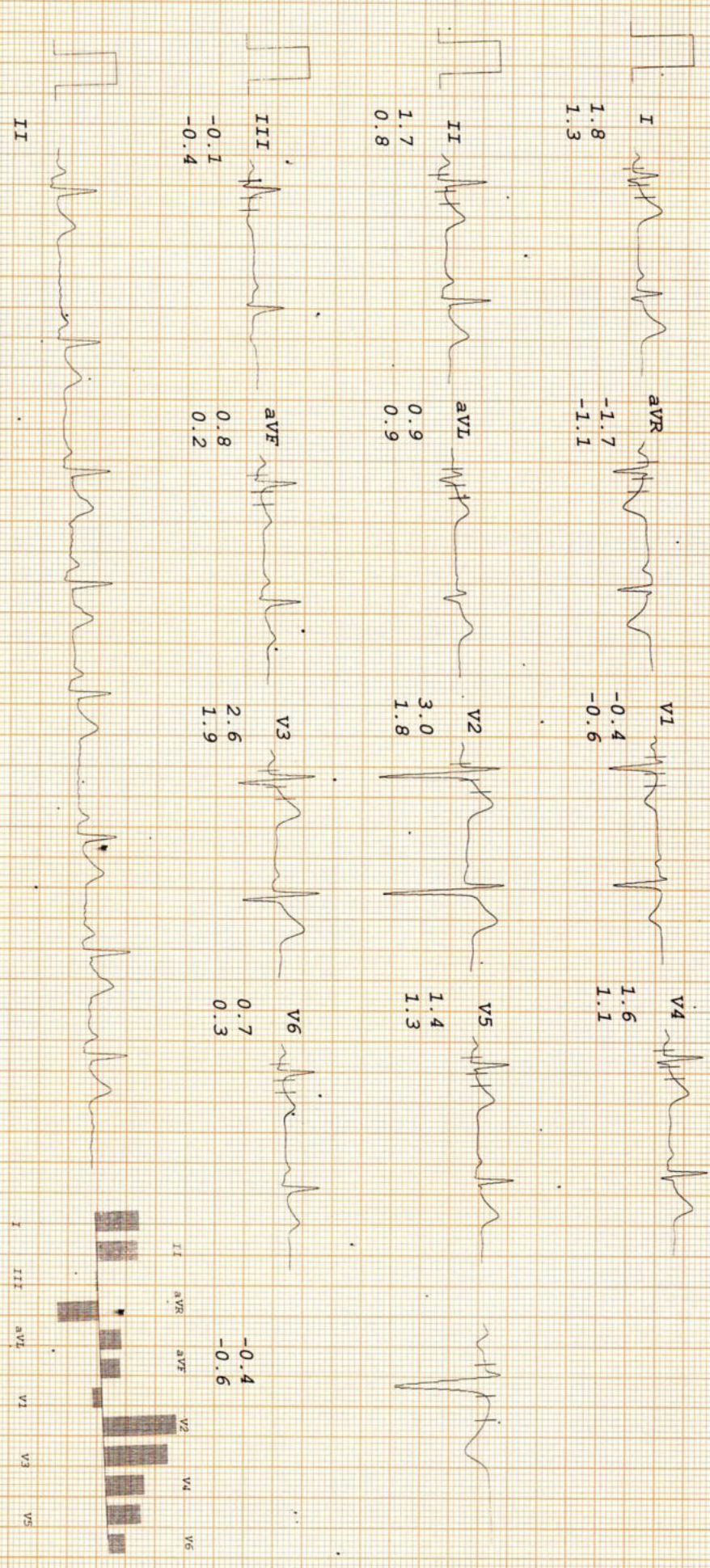
RATE 79bpm
 B.P. 120/80

PRETEST
 HYPERVENT
 PHASE TIME 0:16

ST @ 10mm/mV
 80ms PostJ

LINKED MEDIAN

Mag. X 2



IPSC PAIN AND SPINE HOSPITAL

RAVI PRAKASH BHUSHAN
 I.D. 3615
 Age 31/M
 Date 14-01-2023

RATE 109bpm
 B.P. 130/80

Bruce
 Stage 1
 TOTAL TIME 2:55
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ
 Speed 2.7 km/hr
 SLOPE 10 %

LINKED MEDIAN

Mag. X 2

V1

I 1.4
 1.8
 aVR -1.7
 -1.7

V1 0.0
 -0.5

V4 2.3
 2.3

II 1.9
 1.6
 aVL 0.5
 1.0

V2 3.5
 2.0

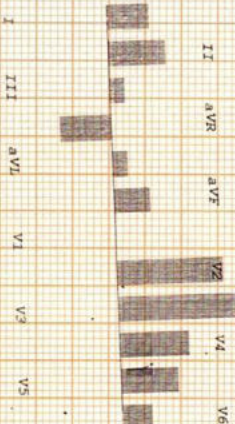
V5 1.9
 2.3

III 0.5
 -0.2
 aVF 1.2
 0.8

V3 3.9
 3.5

V6 1.0
 0.6

II



IPSC PAIN AND SPINE HOSPITAL

RAVI PRAKASH BHUSHAN
 I.D. 3615
 Age 31/M
 Date 14-01-2023

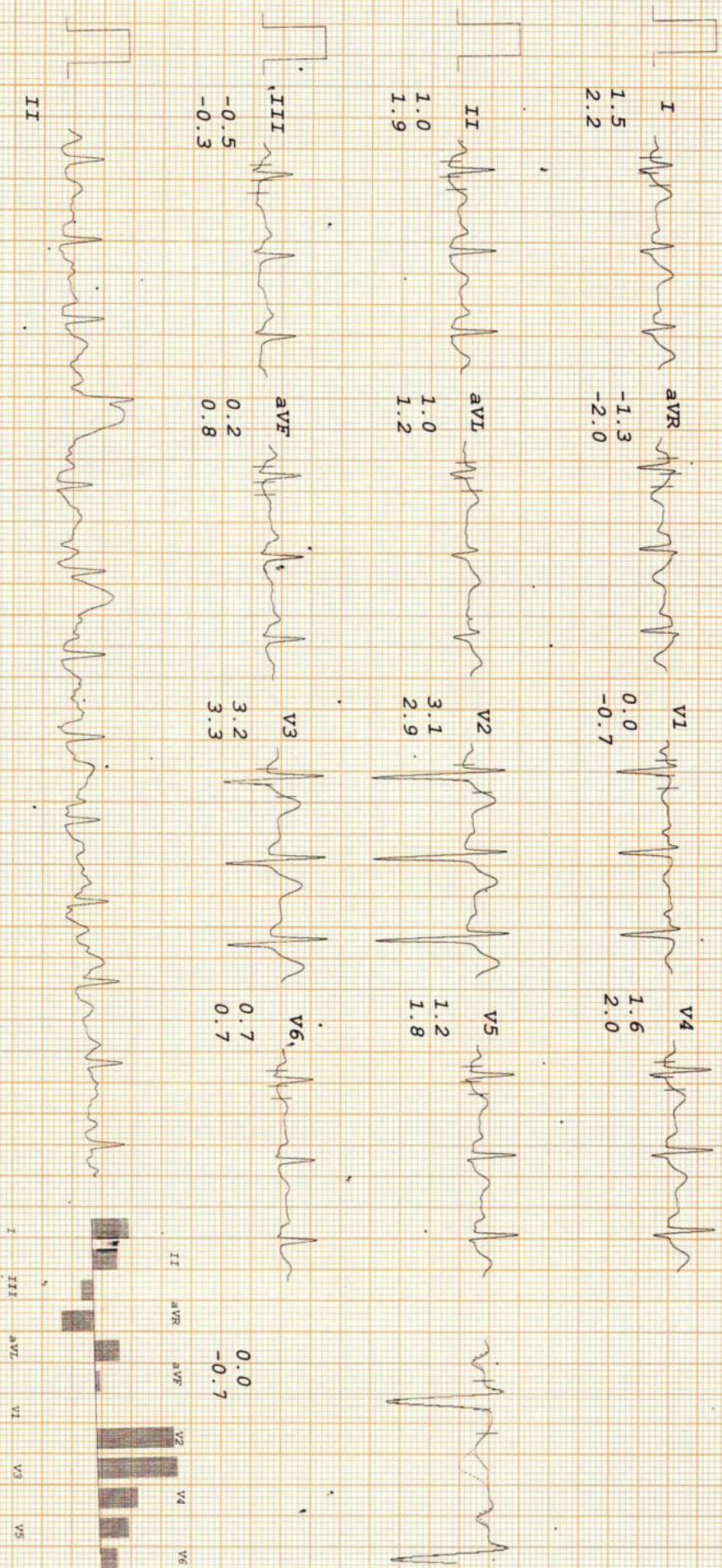
RATE 116bpm
 B.P. 140/80

Bruce
 Stage 2
 TOTAL TIME 5:55
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ
 Speed 4 km/hr
 SLOPE 12 %

LINKED MEDIAN

Mag. X 2



IPSC PAIN AND SPINE HOSPITAL

RAVI PRAKASH BHUSHAN
 I.D. 3615
 Age 31/M
 Date 14-01-2023

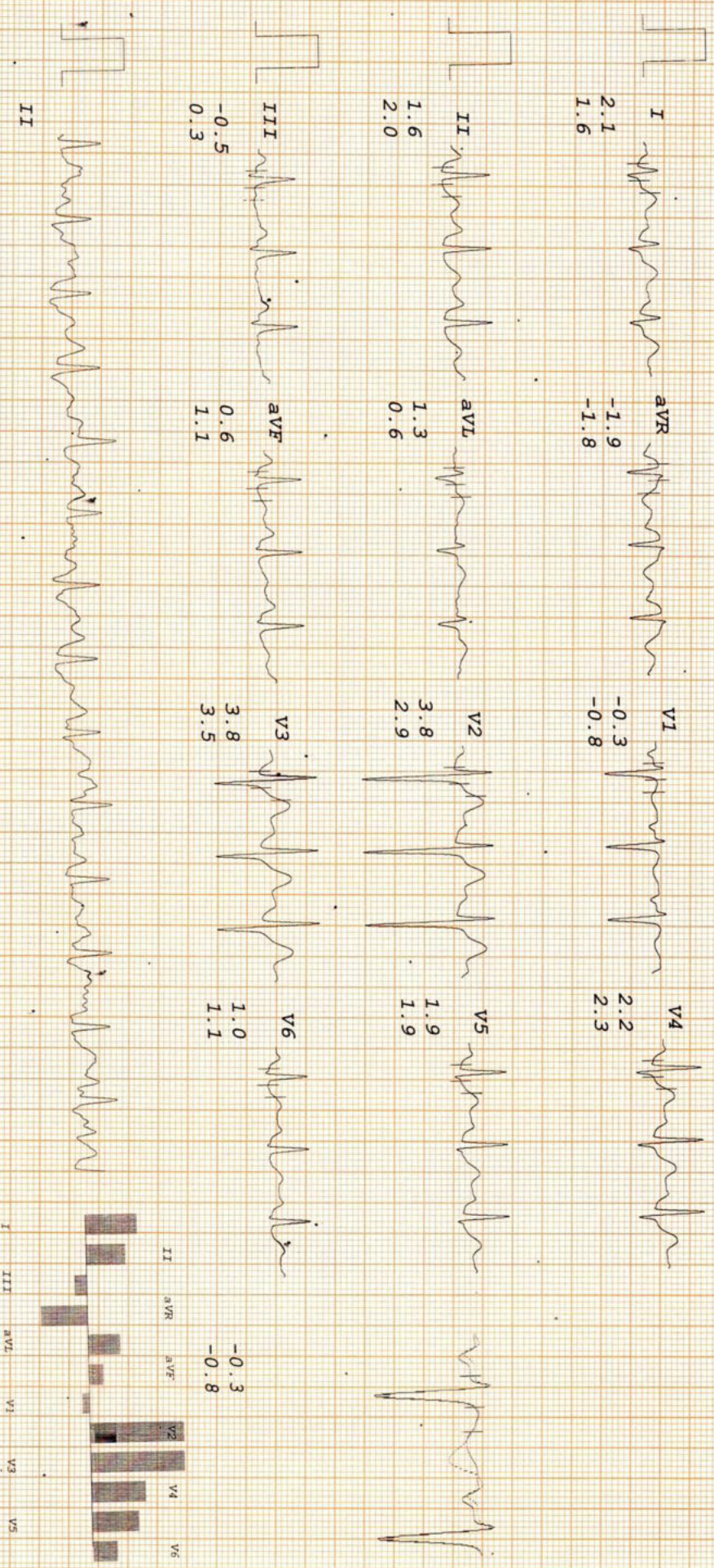
RATE 128bpm
 B.P. 150/80

Bruce
 Stage 3
 TOTAL TIME 8:55
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ
 Speed 5.4 km/hr
 SLOPE 14 %

LINKED MEDIAN

Mag. X 2



IPSC PAIN AND SPINE HOSPITAL

RAVI PRAKASH BHUSHAN
 I.D. 3615
 Age 31/M
 Date 14-01-2023

RATE 141bpm
 B.P. 160/80

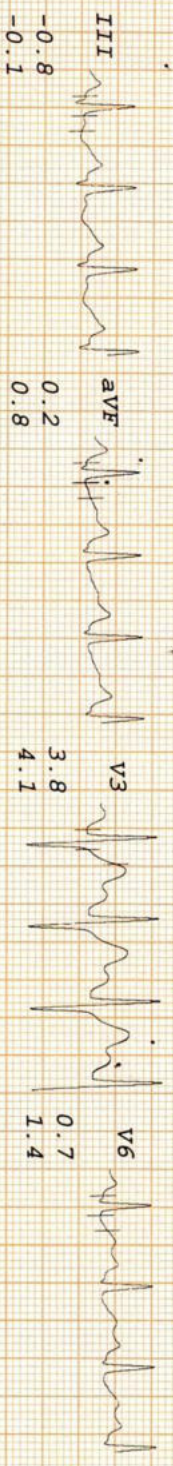
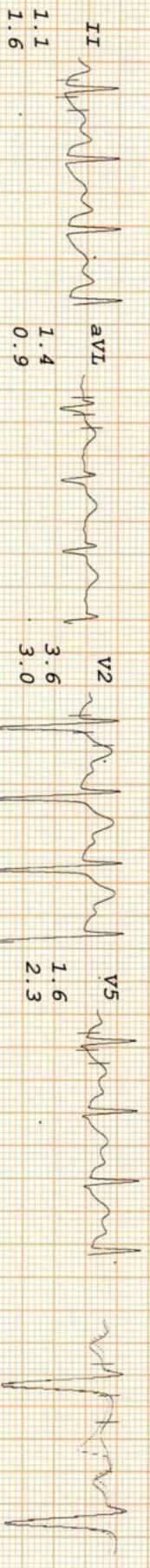
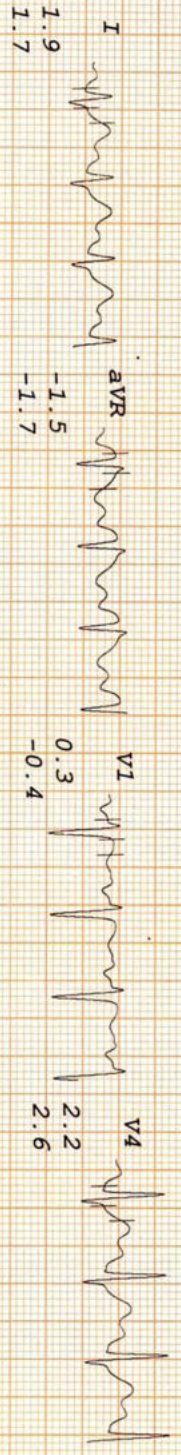
Bruce
 Stage 4
 TOTAL TIME 11:55
 PHASE TIME 2:55

ST @ 10mm/mV
 80ms PostJ
 Speed 6.7 km/hr
 SLOPE 16 %

LINKED MEDIAN

Mag. X 2

V1



IPSC PAIN AND SPINE HOSPITAL

RAVI PRAKASH BHUSHAN
 I.D: 3615
 Age 31/M
 Date 14-01-2023

RATE 165bpm
 B.P. 170/80

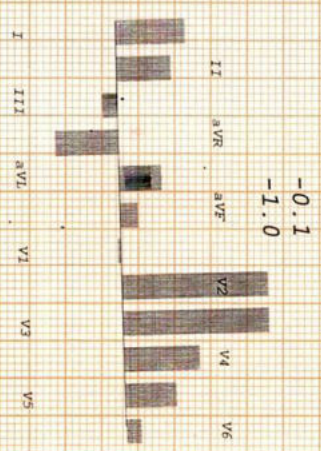
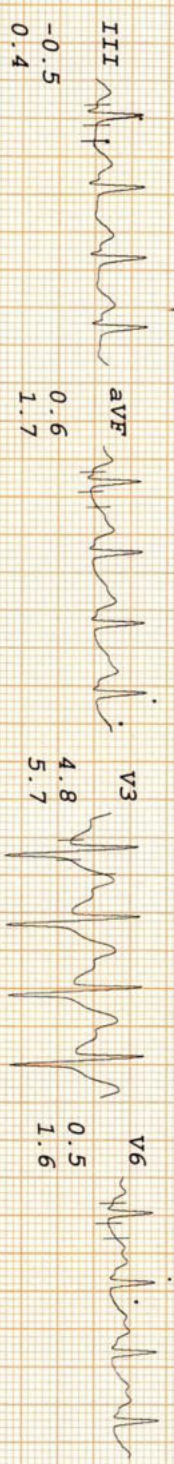
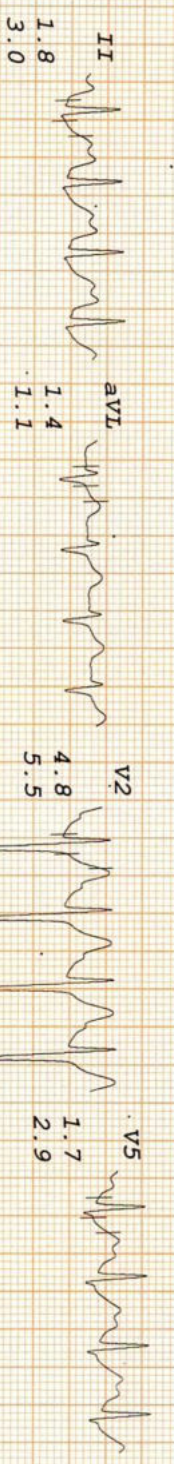
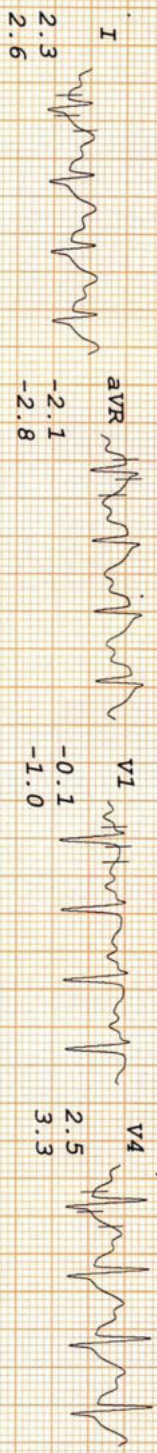
Bruce
 Stage 5
 TOTAL TIME 14:39'
 PHASE TIME 2:39

ST @ 10mm/mV
 80ms PostJ
 Speed 8 km/hr
 SLOPE 18 %

LINKED MEDIAN

Mag. X 2

V1



IPSC PAIN AND SPINE HOSPITAL

PATI PRAKASH BHUSHAN
 I.D: 3615
 Age 31/M
 Date 14-01-2023

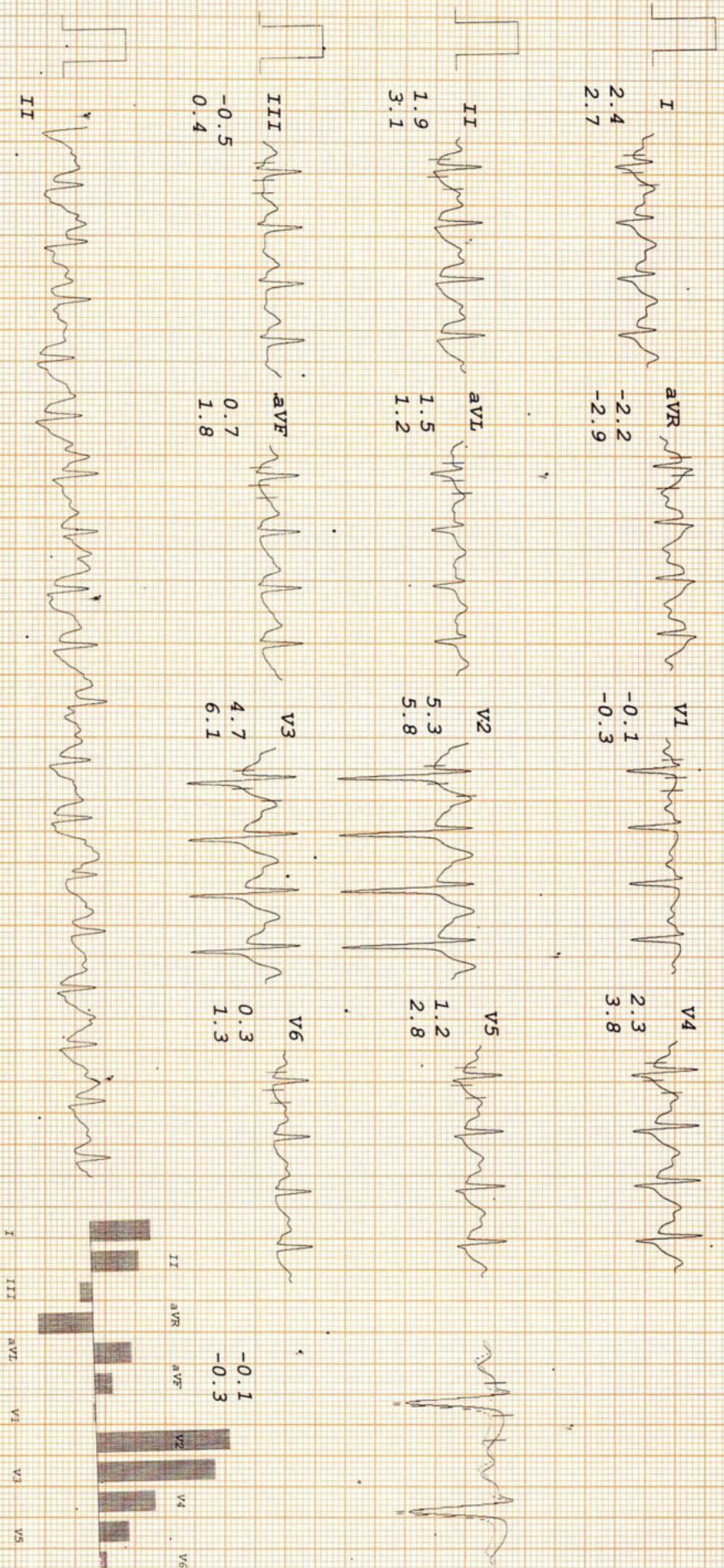
RATE 169bpm
B.P. 170/80

ST @ 10mm/mV
 Bruce
PK-EXERCISE
TOTAL TIME 14:46
PHASE TIME 2:46

80ms PostJ
Speed 8 km/hr
SLOPE 18 %

LINKED MEDIAN

Mag. X 2



IPSC PAIN AND SPINE HOSPITAL

RAVI PRAKASH BHUSHAN
 I.D. 3615
 Age 31/M
 Date: 14-01-2023

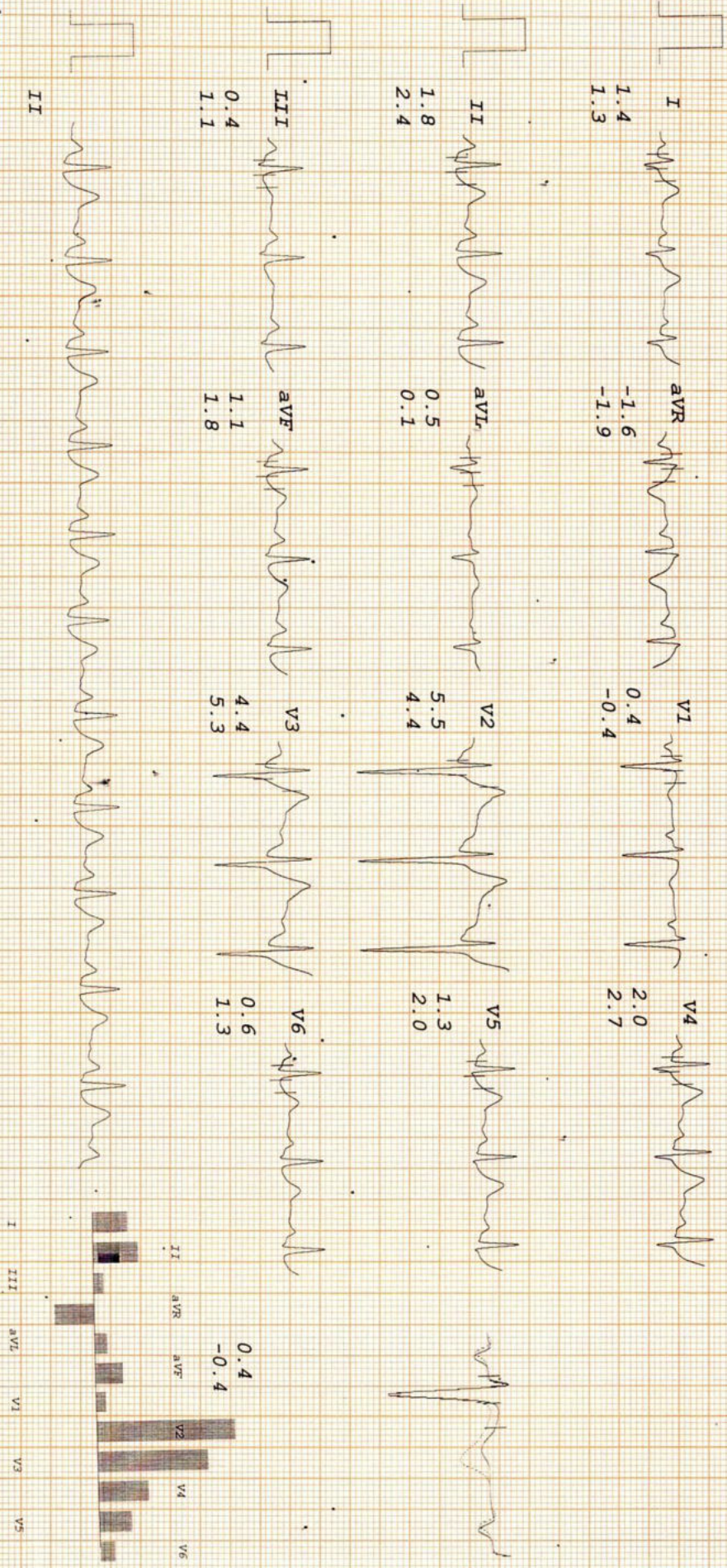
RATE: 106bpm
 B.P. 160/80

BRUCE
 RECOVERY
 TOTAL TIME 16:05
 PHASE TIME 0:55

ST @ 10mm/mV
 80ms Post J

LINKED MEDIAN

Mag. X 2



IPSC PAIN AND SPINE HOSPITAL.

RAVI PRAKASH BHUSHAN
 I.D. 3615
 Age 31/M
 Date 14-01-2023

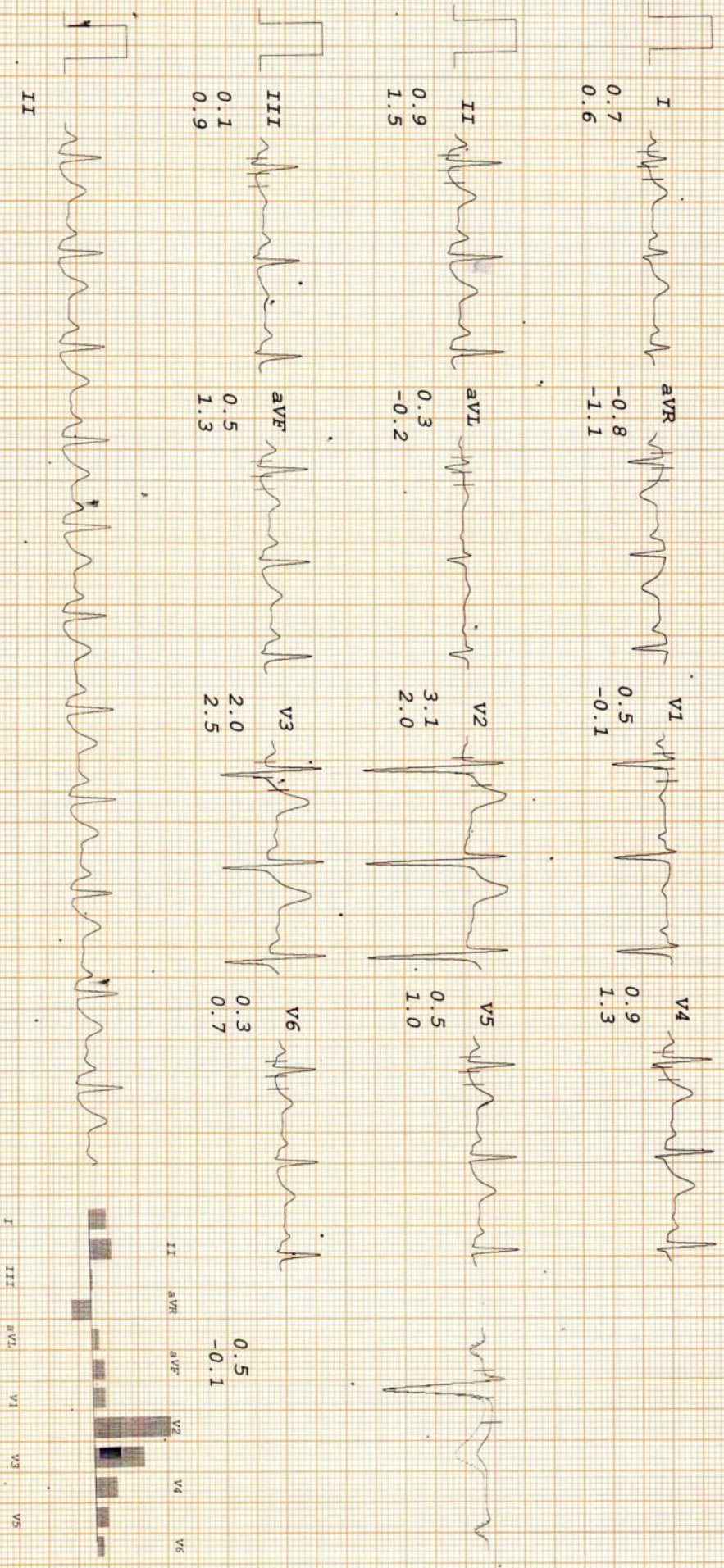
RATE 101bpm
 B.P. 150/80

Bruce
 RECOVERY
 TOTAL TIME 17:05
 PHASE TIME 1:55

ST @ 10mm/mV
 80ms PostT

LINKED MEDIAN

Mag. X 2



IPSC PAIN AND SPINE HOSPITAL

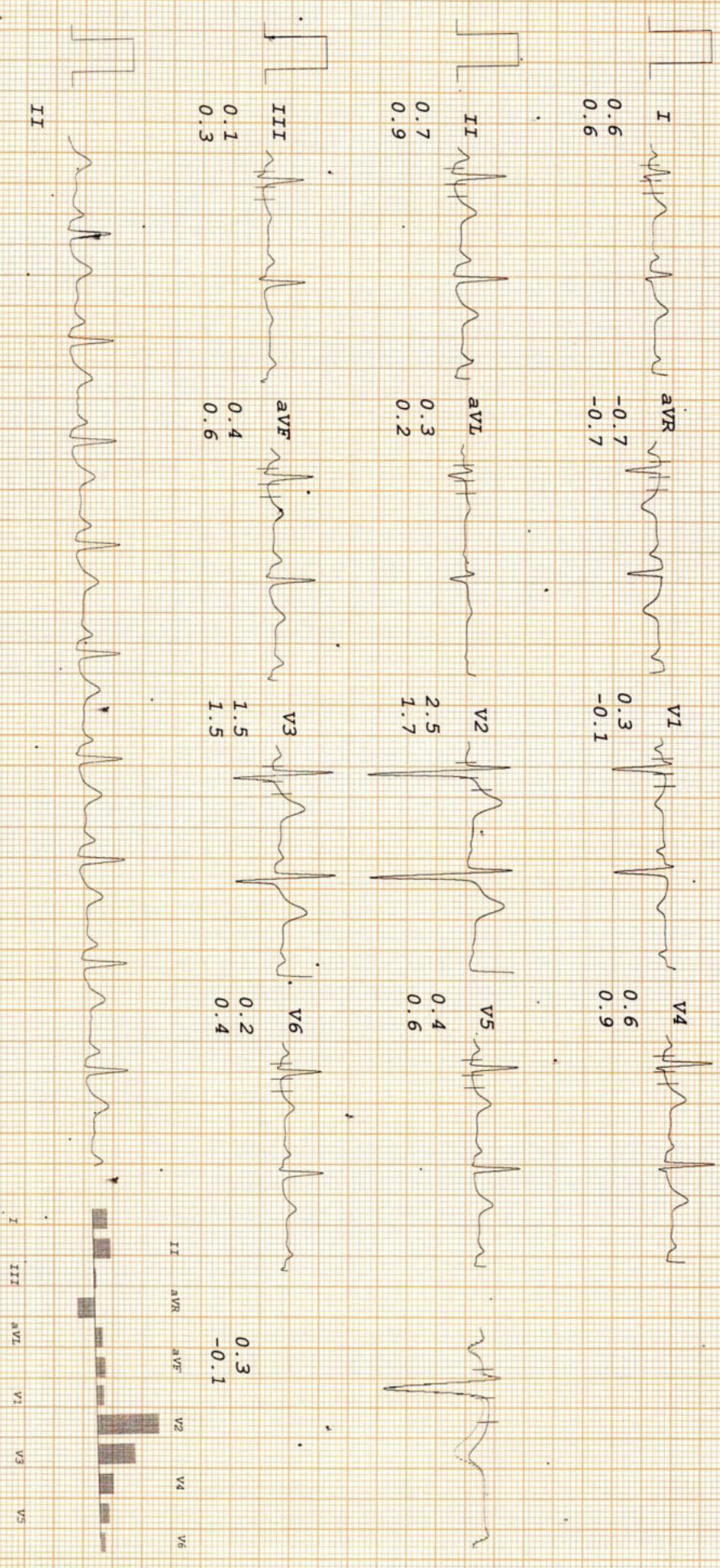
ST @ 10mm/mV
80ms PostJ

RAVI PRAKASH BHUSHAN
I.D. 3615
Age 31/M
Date 14-01-2023

Rate 91bpm
B.P. 140/80
Bruce
RECOVERY
TOTAL TIME 18:05
PHASE TIME 2:55

LINKED MEDIAN

Mag. X 2



IPSC PAIN AND SPINE HOSPITAL

RAVI PRAKASH BHUSHAN
 I.D. 3615
 Age. 31/M
 Date 14-01-2023

RATE 99bpm
 B.P. 130/80

Bruce
 RECOVERY
 TOTAL TIME 18:46
 PHASE TIME 3:36

ST @ 10mm/mV
 80ms PostJ

LINKED MEDIAN

Mag. X 2

V1

I 0.8
 aVR -0.8
 -0.5

V1 0.2
 -0.1

V4 0.6
 0.7

II 0.8
 0.5

aVL 0.4
 0.3

V2 2.5
 1.7

V5 0.4
 0.3

III 0.0
 0.0

aVF 0.4
 0.3

V3 1.4
 1.4

V6 0.2
 0.4

0.2
 -0.1

II

I

III

aVL

V1

V3

V5

II

aVR

aVF

V2

V4

V6

ID: 8

ravi prakash bhushan
Male 31Y ears
Req. No. :

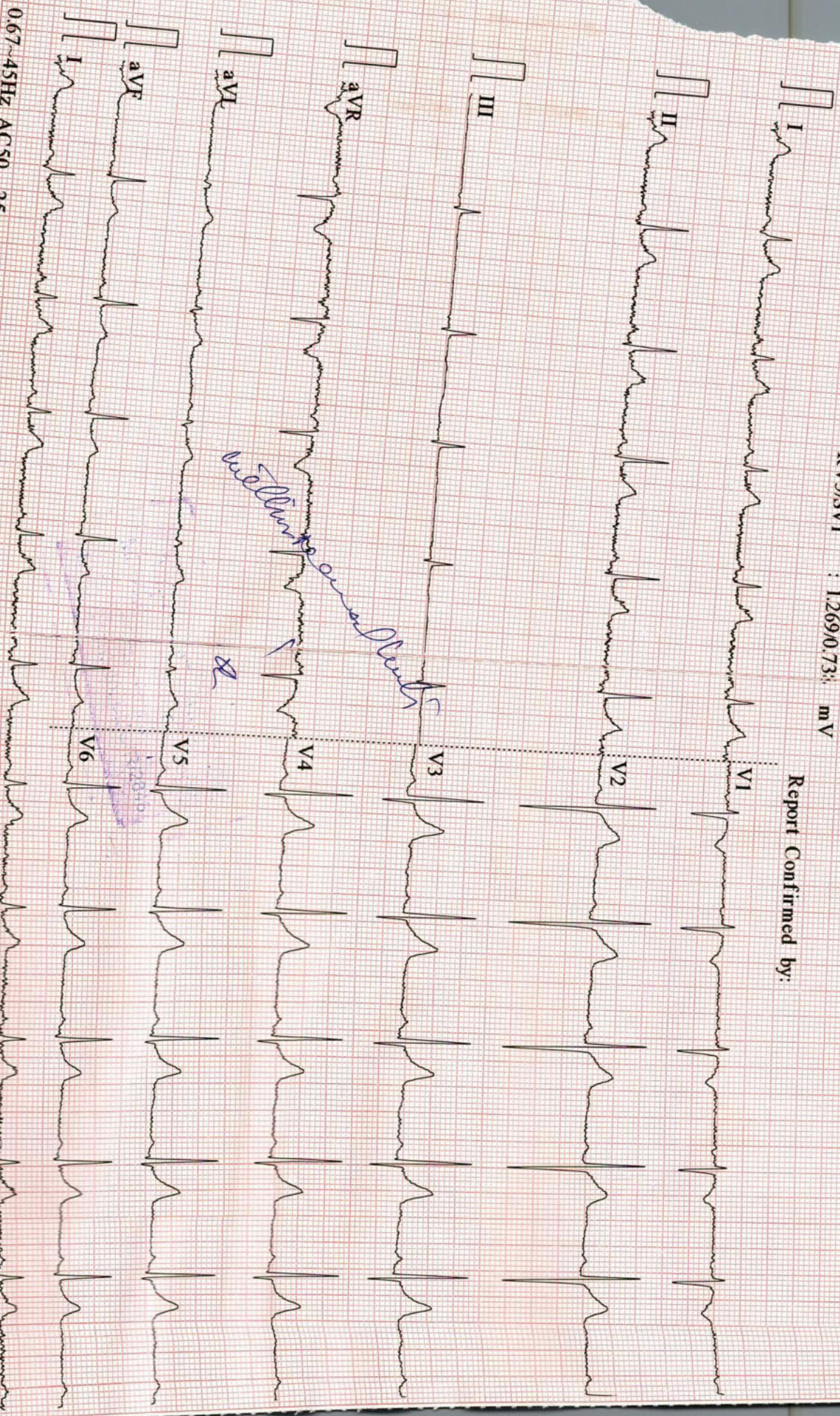
14-01-2023 01:35:59 PM

HR	: 66	bpm
P	: 106	ms
PR	: 160	ms
QRS	: 72	ms
QT/QTcBz	: 370/388	ms
P/QRS/T	: 24/54/31	°
RV5/SV1	: 1.269/0.73	mV

Diagnosis Information:
Sinus rhythm
Normal ECG

LRB10R93

Report Confirmed by:



0.67-45Hz AC50 25mm/s 10mm/mV 2*5.0s+1r CARDIAR 9108 D V1M 01

भारत सरकार
GOVERNMENT OF INDIA




रवि प्रकाश भूषण
Ravi Prakash Bhushan
जन्म तिथि / DOB : 30/01/1992
पुरुष / MALE



2725 3467 5766

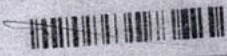
आधार - आम नादमी का अधिकार

भारतीय विशिष्ट पहचान प्राधिकरण
INDIAN IDENTIFICATION AUTHORITY OF INDIA



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845420

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P.O. Box No. 1947,
Bengaluru-560 001

Radiology No. :	6304/OPDPB22DL	Date :	14-Jan-2023
Patient Name :	Mr. RAVI PRAKASH BHUSHAN	Age/Sex :	31Y
Guardian Name :		UHID No. :	5816/UHID22DL
Consultant :	Dr. INSURANCE	Mobile No. :	7250102700

X-RAY CHEST

Indication: Routine checkup.

Image quality:-

No evidence of rotation.

PA view. Normal penetration.

Airway:- Trachea central.

Carina & bronchi are normal.

No hilar abnormality.

Lung fields:- Clear.

Cardiac:- Cardiac borders are visible.

Normal heart size.

Diaphragm:- Costophrenic angles on right & left are normal.

Cardiophrenic angles on right & left are normal.

Diaphragm portion are normal.

Bony cage:- No evidence of bony lesion/fracture seen.

No evidence of cervical ribs seen.

Impression: No significant abnormality detected.



Dr. Harshita Surange
MBBS, DMRD (RADIODIAGNOSIS)
DIPLOMA IN MSK, UCAM (Spain)
Reg. No. MCI/16522, DMC/18402



BOOK APPOINTMENT



Q