

## CHANDAN DIAGNOSTIC CENTRE

Name of Company: *Modicareel.*  
Name of Executive: *- Praveen Gupta*  
Date of Birth: *...30...06...1974*  
Sex: *Male* / Female  
Height: *171*..... CMs  
Weight: *84*..... KGs  
BMI (Body Mass Index) : *26.2*  
Chest (Expiration / Inspiration) *...100...100*..... CMs  
Abdomen: *...100*..... CMs  
Blood Pressure: *...128.../...80*..... mm/Hg  
Pulse: *...82*..... BPM - Regular / Irregular  
RR: *...17*..... Resp/Min  
Ident Mark: *- Mole on right chest (side)*  
Any Allergies: *- No*  
Vertigo: *- No*  
Any Medications: *- Diabetes Medication - Metformin*  
Any Surgical History: *- No*  
Habits of alcoholism/smoking/tobacco: *- No*  
Chief Complaints if any: *- No*  
Lab Investigation Reports: *- No*  
Eye Check up vision & Color vision: *-*  
Left eye: *- Normal*  
Right eye: *- Normal*  
Near vision: *- Normal*  
Far vision: *- Normal*  
Dental check up: *- Normal*

## CHANDAN DIAGNOSTIC CENTRE

ENT Check up: - Normal  
Eye Checkup: - Normal

### Final impression

Certified that I examined Praveen Gupta S/o or D/o \_\_\_\_\_  
is presently in good health and free from any cardio-respiratory/communicable  
ailment, he/she is fit to join any organization.

  
Client Signature :-

.....  
Signature of Medical Examiner

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

Date - 25/12/2023, Place - VARANASIS

Chandan Diagnostic Centre  
39, Shivaji Nagar, Mahmoorganj  
Varanasi-221010 (U.P.)  
Phone No.: 0542-2223232

**Dr. R.C. ROY**  
MBBS, MD (Radio Diagnosis)  
Reg. No. - 26915

# CHANDAN HEALTH CARE LTD.

99-SHIVAJI NAGAR MAHMOORGANJ VARANASI-221008

Mr. PRAVEEN GUPTA  
Age/Sex: 48/M  
Ref by: MEDIWHEEL  
Indication1:  
Indication2:  
Indication3:

ID: 87422223  
H/Wt: /  
Recorded: 25-11-2023

TREADMILL TEST SUMMARY REPORT  
Protocol: BRUCE  
History:  
Medication1:  
Medication2:  
Medication3:

PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	B.P. (mmHg)	RPP X100	II	ST LEVEL (mm) V2	V5	METS
SUPINE					87	130/80	110	1.1	5.3	1.6	
HYPERVENT	0:49	0:49			85	134/80	113	1.2	5.5	1.6	
VALSALVA					87	134/80	116	1.2	5.6	1.6	
STANDING					88	134/80	117	1.0	5.0	1.3	
STAGE 1	2:59	2:59	2.70	10.00	123	140/80	172	0.8	7.0	1.9	4.80
STAGE 2	6:00	2:59	4.00	12.00	135	150/80	202	0.0	7.5	1.5	7.10
STAGE 3	9:00	2:59	5.40	14.00	150	160/80	240	-0.7	7.5	0.7	10.00
EVENT	9:09	0:07	6.70	16.00	152	160/80	243	-0.6	7.7	0.8	10.16
PEAK EXER	9:12	0:10			153	160/80	244	-0.6	8.0	0.7	10.22
EVENT	0:31	0:31	0.00	0.00	141	160/80	225	0.5	8.9	1.6	
EVENT	1:02	1:02	0.00	0.00	126	160/80	201	1.1	9.6	2.2	
EVENT	2:03	2:03	0.00	0.00	111	160/80	177	0.4	7.1	0.9	

## RESULTS

Exercise Duration : 9:12 Minutes  
Max Heart Rate : 153 bpm - 86% of target heart rate 172 bpm  
Max Blood Pressure : 160/80 mmHg  
Max Work Load : 10.22 METS  
Reason of Termination :

## IMPRESSIONS

→ Baseline ECG is normal  
→ Good Effort tolerance  
→ No significant ST-T changes seen at peak Exercise and recovery  
→ TMT is negative for AMI

Dr. Ankit Krishna Agarwal  
M.B.B.S., MD, DM  
Cardiologist  
Reg. No. 39794

Cardiologist

TMT is negative for AMI

Imt Ar

Imt Ar

Mr. PRAVEEN GUPTA

I.D. 8742223

AGE/SEX 48/M

RECORDED : 21-1-2012 22:31

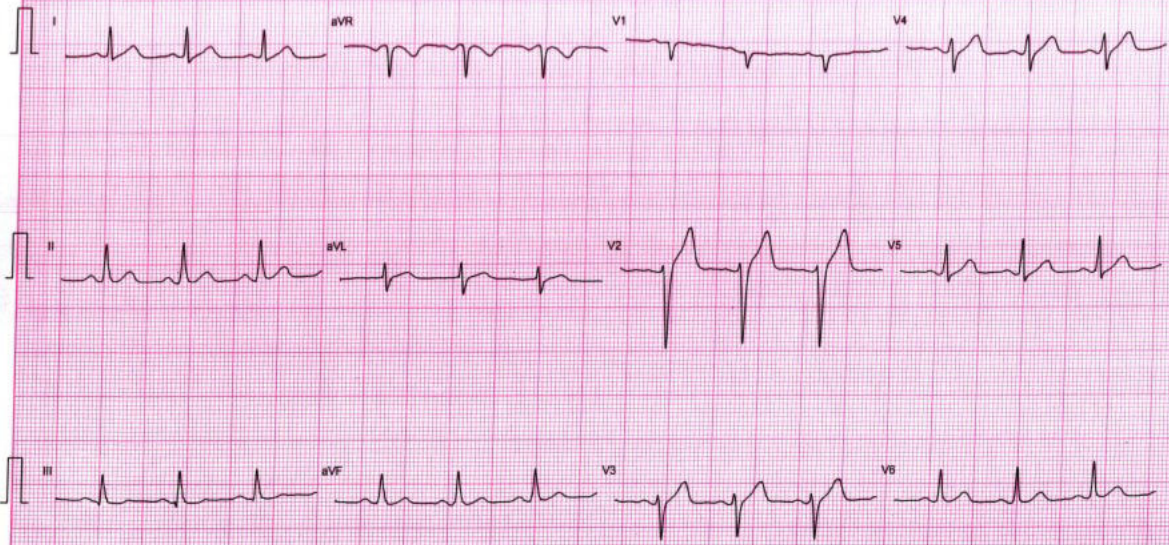
RATE : 87 BPM

B.P. 100/80mmHg

SUPINE  
PRETEST

ST @ 10mm/mV  
80ms PostJ

RAW E.C.G.



Mr. PRAVEEN GUPTA

I.D. 87422223

AGE/SEX: 48/M

RECORDED: 2: 1-2012 22:31

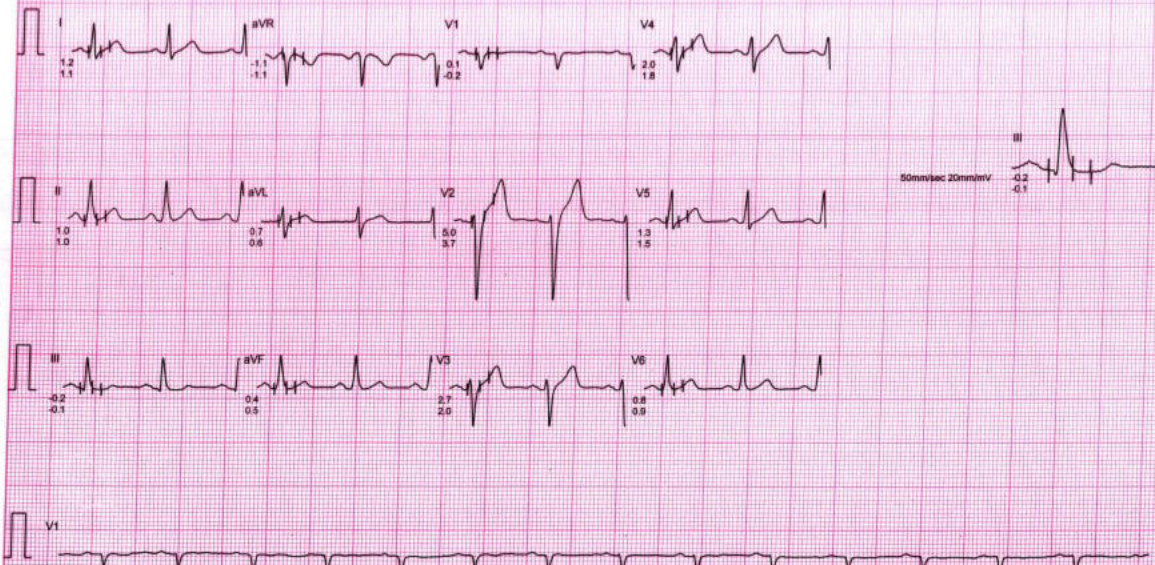
RATE: 88 BPM

B.P.: 134/80 mmHg

STANDING  
PRETEST

ST @ 10mm/mV  
80ms PostJ

LINKED MEDIAN



Mr. PRAVEEN GUPTA

I.D. : 87422223

AGE/SEX - 48M

RECORDED - 2- 1-2012 22:31

RATE : 85 BPM

B.P. : 134/80 mmHg

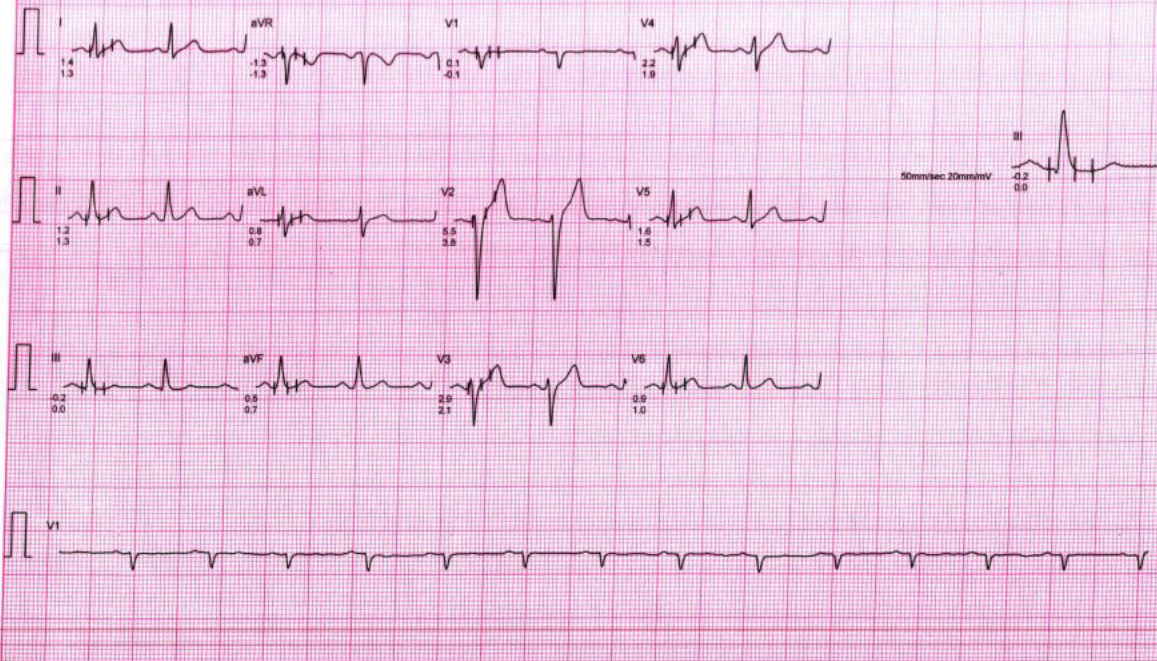
STANDING

PRETEST

ST @ 10mm/mV

80ms PostJ

LINKED MEDIAN



Mr. PRAVEEN GUPTA  
I.D. : 87422223

VALSALVA  
PRETEST

ST @ 10mm/mV  
80ms PostJ

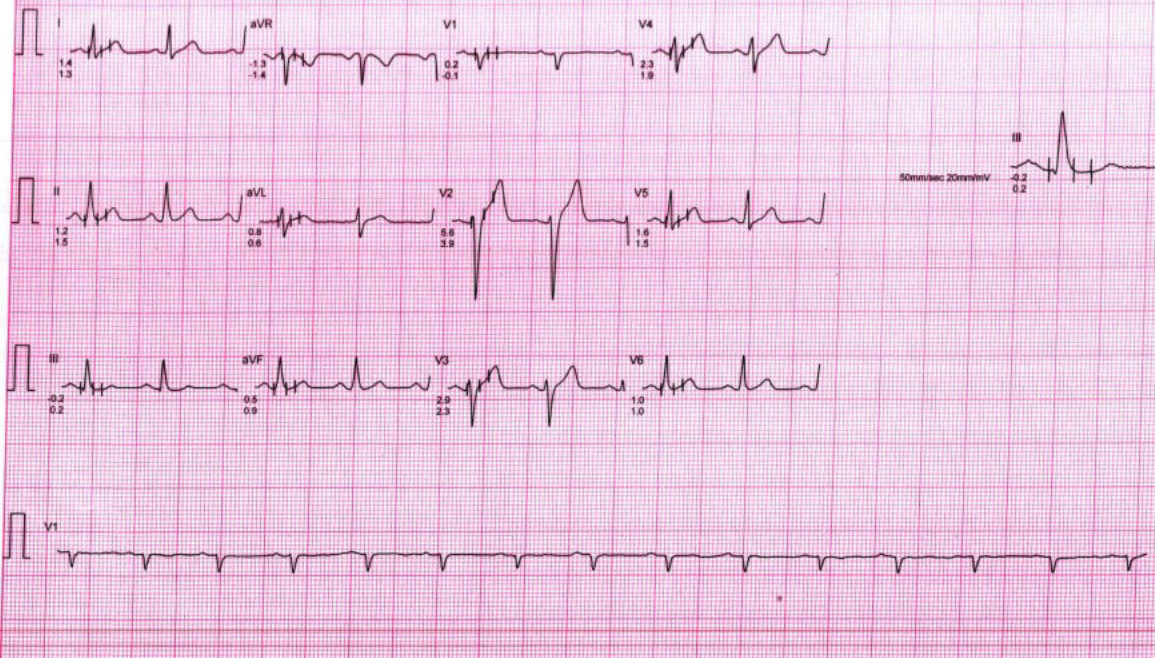
AGE/SEX - 48/M

RATE : 87 BPM

RECORDED - 2- 1-2012 22:31

B.P. : 134/80 mmHg

LINKED MEDIAN



Mr. PRAVEEN GUPTA

I.D. : 8742223

AGE/SEX : 48/M

RECORDED : 2-1-2012 22:31

RATE : 85 BPM

B.P. : 134/80 mmHg

HYPERVENTILATION

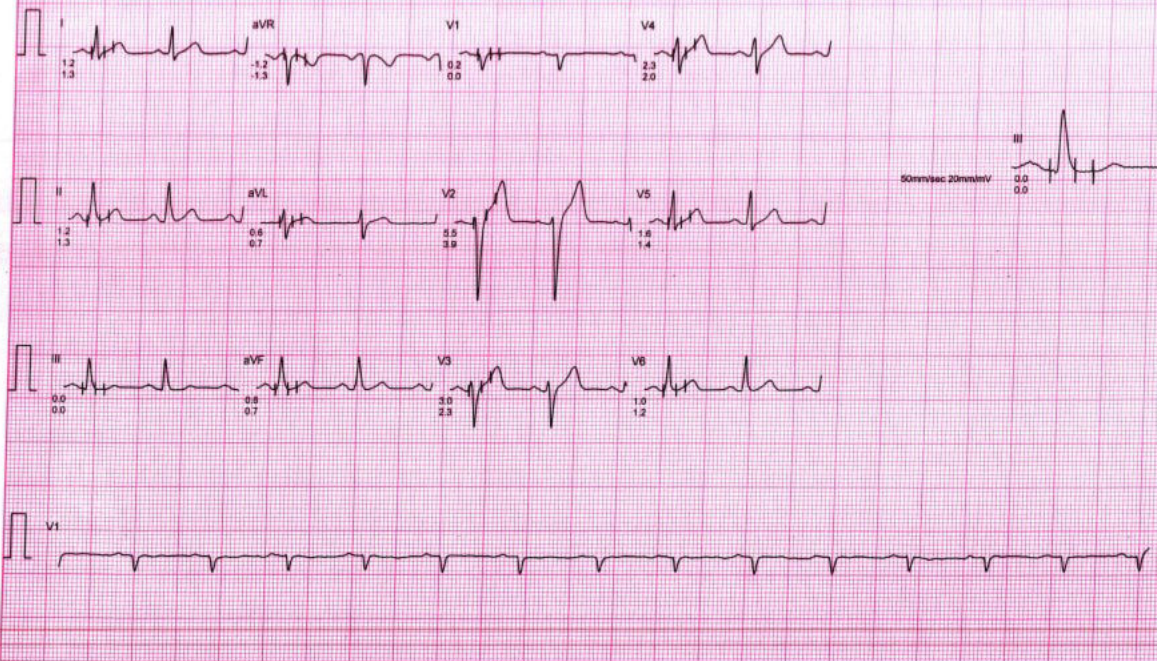
PRETEST

STAGE TIME : 0:49

ST @ 10mm/mV

80ms PostJ

LINKED MEDIAN





Mr. PRAVEEN GUPTA

I.D. : 87422223

AGE/SEX : 48/M

RECORDED : 2-1-2012 22:31

RATE : 87 BPM

B.P. : 134/80 mmHg

BRUCE

WARM UP 1

PHASE TIME : 0:00

STAGE TIME : 0:00

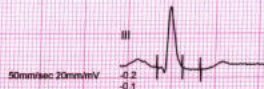
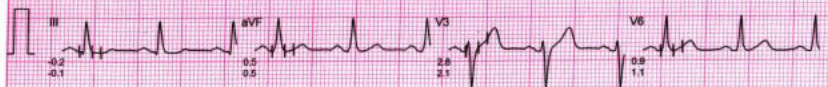
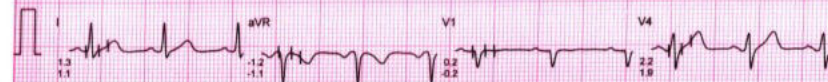
ST @ 10mm/mV

80ms PostJ

SPEED : 1.5 Km./Hr.

GRADE : 0.0 %

LINKED MEDIAN





# CHANDAN DIAGNOSTIC CENTRE

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



Patient Name	: Mr.PRAVEEN GUPTA -PKG10000236	Registered On	: 25/Feb/2023 08:12:48
Age/Gender	: 48 Y 0 M 0 D /M	Collected	: 25/Feb/2023 08:49:43
UHID/MR NO	: CVAR.0000035792	Received	: 25/Feb/2023 09:23:17
Visit ID	: CVAR0087422223	Reported	: 25/Feb/2023 13:13:53
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF HAEMATOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### Blood Group (ABO & Rh typing) \* , Blood

Blood Group	B
Rh ( Anti-D)	POSITIVE

#### Complete Blood Count (CBC) \* , Whole Blood

Haemoglobin	15.20	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
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TLC (WBC)	6,300	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
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#### DLC

Polymorphs (Neutrophils)	60.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	34.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	3.00	%	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)	43.80	%	40-54

#### Platelet count

Platelet Count	1.59	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

#### RBC Count

RBC Count	4.89	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
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## DEPARTMENT OF HAEMATOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>Blood Indices (MCV, MCH, MCHC)</b>				
MCV	89.40	fl	80-100	CALCULATED PARAMETER
MCH	31.00	pg	28-35	CALCULATED PARAMETER
MCHC	34.70	%	30-38	CALCULATED PARAMETER
RDW-CV	13.00	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	45.10	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,780.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	126.00	/cu mm	40-440	

S.N. Sinha

Dr.S.N. Sinha (MD Path)





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Ph: 9235447795, 0542-3500227  
CIN : U85110DL2003PLC308206



Patient Name	: Mr.PRAVEEN GUPTA -PKG10000236	Registered On	: 25/Feb/2023 08:12:48
Age/Gender	: 48 Y 0 M 0 D /M	Collected	: 25/Feb/2023 12:15:36
UHID/MR NO	: CVAR.0000035792	Received	: 25/Feb/2023 12:16:43
Visit ID	: CVAR0087422223	Reported	: 25/Feb/2023 15:21:54
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### GLUCOSE FASTING , Plasma

Glucose Fasting	<b>195.80</b>	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD
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#### Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- 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 diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

#### Glucose PP

Sample: Plasma After Meal

<b>370.00</b>	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD
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#### Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- 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 diabetes in future, which is why an Annual Health Check up is essential.
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Age/Gender	: 48 Y 0 M 0 D /M	Collected	: 25/Feb/2023 08:49:43
UHID/MR NO	: CVAR.0000035792	Received	: 26/Feb/2023 11:36:40
Visit ID	: CVAR0087422223	Reported	: 26/Feb/2023 13:59:44
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### GLYCOSYLATED HAEMOGLOBIN (HBA1C) \*\*, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	9.70	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	83.00	mmol/mol/IFCC		
Estimated Average Glucose (eAG)	232	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 management.

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 1diabetics. 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





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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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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.



**Dr. Anupam Singh (MBBS MD Pathology)**





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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>BUN (Blood Urea Nitrogen)</b> Sample:Serum	17.90	mg/dL	7.0-23.0	CALCULATED
<b>Creatinine</b> Sample:Serum	1.00	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20-275 Female-20-320	MODIFIED JAFFES
<b>Uric Acid</b> Sample:Serum	5.90	mg/dl	3.4-7.0	URICASE
<b>LFT (WITH GAMMA GT) * , Serum</b>				
SGOT / Aspartate Aminotransferase (AST)	23.40	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	<b>50.80</b>	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	13.80	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.60	gm/dl	6.2-8.0	BIRUET
Albumin	4.00	gm/dl	3.8-5.4	B.C.G.
Globulin	2.60	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.54		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	68.00	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	1.00	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	<b>0.40</b>	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.60	mg/dl	< 0.8	JENDRASSIK & GROF
<b>LIPID PROFILE ( MINI ) , Serum</b>				
Cholesterol (Total)	<b>287.00</b>	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	65.30	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	150	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	<b>71.64</b>	mg/dl	10-33	CALCULATED
Triglycerides	<b>358.20</b>	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High	GPO-PAP





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UHID/MR NO	: CVAR.0000035792	Received	: 25/Feb/2023 09:23:17
Visit ID	: CVAR0087422223	Reported	: 25/Feb/2023 12:37:49
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF BIOCHEMISTRY

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>500 Very High



*S.N. Sinha*

Dr.S.N. Sinha (MD Path)







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Age/Gender	: 48 Y 0 M 0 D /M	Collected	: 25/Feb/2023 12:15:36
UHID/MR NO	: CVAR.0000035792	Received	: 25/Feb/2023 12:16:43
Visit ID	: CVAR0087422223	Reported	: 25/Feb/2023 13:01:52
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### URINE EXAMINATION, ROUTINE \* , Urine

Color	LIGHT YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic ( 5.5 )			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
<b>Microscopic Examination:</b>				
Epithelial cells	2-3/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	ABSENT			
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

#### STOOL, ROUTINE EXAMINATION \* , Stool

Color	BROWNISH
Consistency	SEMI SOLID
Reaction (PH)	Basic ( 8.0 )
Mucus	ABSENT
Blood	ABSENT
Worm	ABSENT
Pus cells	1-2/h.p.f
RBCs	ABSENT





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

## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 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

Sugar, PP Stage ABSENT

#### Interpretation:

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

S.N. Sinha

Dr.S.N. Sinha (MD Path)





# CHANDAN DIAGNOSTIC CENTRE

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



Patient Name	: Mr.PRAVEEN GUPTA -PKG10000236	Registered On	: 25/Feb/2023 08:12:49
Age/Gender	: 48 Y 0 M 0 D /M	Collected	: 25/Feb/2023 08:49:43
UHID/MR NO	: CVAR.0000035792	Received	: 26/Feb/2023 10:25:25
Visit ID	: CVAR0087422223	Reported	: 26/Feb/2023 11:54:30
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF IMMUNOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
PSA (Prostate Specific Antigen), Total ** <i>Sample:Serum</i>	0.510	ng/mL	< 2.0	CLIA

#### Interpretation:

1. PSA is detected in the serum of males with normal, benign hypertrophic, and malignant prostate tissue.
2. Measurement of serum PSA levels is not recommended as a screening procedure for the diagnosis of cancer because elevated PSA levels also are observed in patients with benign prostatic hypertrophy. However, studies suggest that the measurement of PSA in conjunction with digital rectal examination (DRE) and ultrasound provide a better method of detecting prostate cancer than DRE alone.
3. PSA levels increase in men with cancer of the prostate, and after radical prostatectomy PSA levels routinely fall to the undetectable range.
4. If prostatic tissue remains after surgery or metastasis has occurred, PSA appears to be useful in detecting residual and early recurrence of tumor.
5. Therefore, serial PSA levels can help determine the success of prostatectomy, and the need for further treatment, such as radiation, endocrine or chemotherapy, and in the monitoring of the effectiveness of therapy.

#### THYROID PROFILE - TOTAL \*\*, Serum

T3, Total (tri-iodothyronine)	126.62	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	9.30	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	1.98	μIU/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.





# CHANDAN DIAGNOSTIC CENTRE

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## DEPARTMENT OF IMMUNOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

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





# CHANDAN DIAGNOSTIC CENTRE

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



Patient Name	: Mr.PRAVEEN GUPTA -PKG10000236	Registered On	: 25/Feb/2023 08:12:50
Age/Gender	: 48 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000035792	Received	: N/A
Visit ID	: CVAR0087422223	Reported	: 25/Feb/2023 12:15:03
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF X-RAY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 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

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Patient Name	: Mr.PRAVEEN GUPTA -PKG10000236	Registered On	: 25/Feb/2023 08:12:50
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Visit ID	: CVAR0087422223	Reported	: 25/Feb/2023 09:14:03
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF ULTRASOUND

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

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

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

##### LIVER

- Liver measures **15.4 cm** in mid clavicular line .Mild diffuse increase in liver echogenicity noted . No focal lesion is seen.

##### PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein is normal (**10.8 mm**) at the porta.
- Porta hepatis is normal.

##### BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common duct are normal ( **4.0 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 (**10.1 x 4.6 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 ( **10.7 x 5.3 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





# CHANDAN DIAGNOSTIC CENTRE

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



Patient Name	: Mr.PRAVEEN GUPTA -PKG10000236	Registered On	: 25/Feb/2023 08:12:50
Age/Gender	: 48 Y 0 M 0 D /M	Collected	: N/A
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## DEPARTMENT OF ULTRASOUND

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

- The spleen is normal in size ( **10.5 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 partially filled. Bladder wall is normal in thickness and regular.
- **Pre-void urine volume is - 46 cc.**

### PROSTATE

- Prostate gland size ( **43 x 35 x 36 mm/ 29 grams**).

### IMPRESSION

- ◊ **Mild grade fatty liver**
- ◊ **Mild prostatic hypertrophy ( 29 gms)**
- ◊ **Rest of the abdominal organs are normal**

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

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

Result/s to Follow:

ECG / EKG, Tread Mill Test (TMT)



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 \*  
365 Days Open \*Facilities Available at Select Location



Mr. PRAVEEN GUPTA

I.D. 87422223

AGE/SEX 48/M

RECORDED : 2-1-2012 22:31

RATE : 123 BPM

B.P. : 140/80 mmHg

BRUCE

EXERCISE 1

PHASE TIME : 2:59

STAGE TIME : 2:59

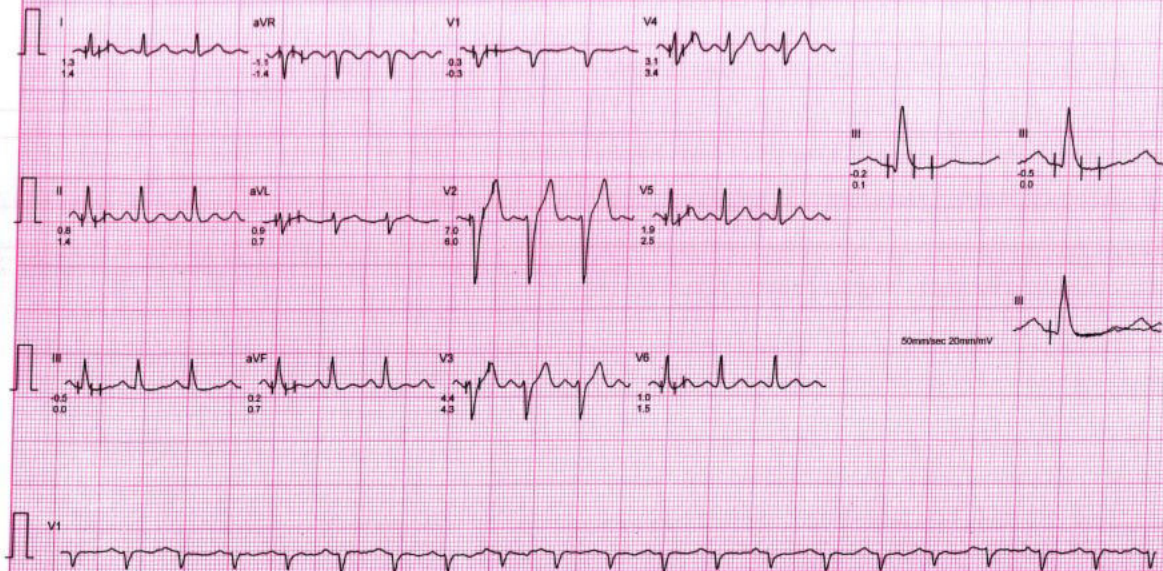
ST @ 10mm/mV

80ms PostJ

SPEED : 2.7 Km./Hr.

GRADE : 10.0 %

LINKED MEDIAN





# Chandan Diagnostic

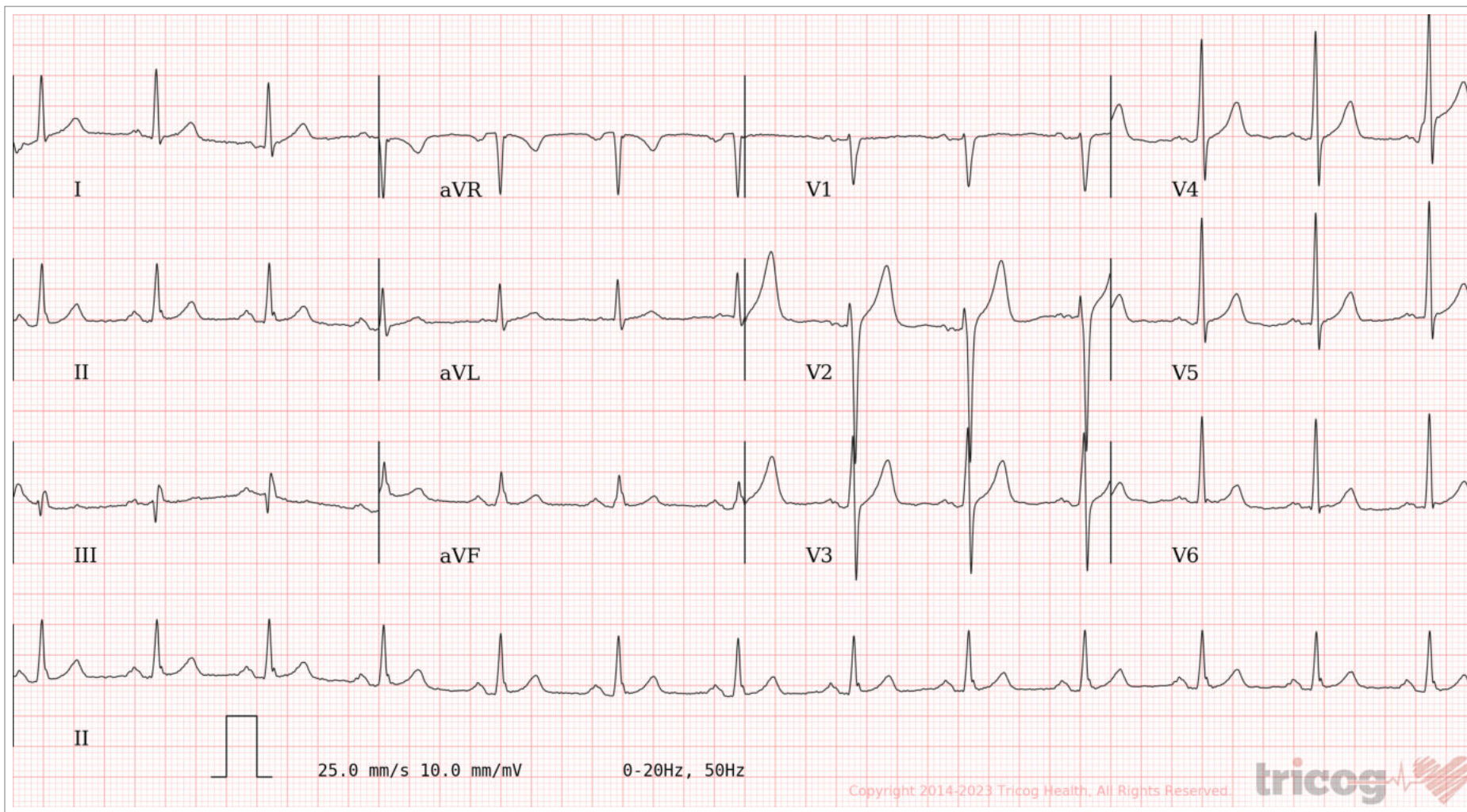


Age / Gender: 48/Male

Date and Time: 25th Feb 23 9:20 AM

Patient ID: CVAR0087422223

Patient Name: Mr.PRAVEEN GUPTA -PKG10000236



AR: 79bpm    VR: 79bpm    QRSD: 86ms    QT: 356ms    QTc: 408ms    PRI: 160ms    P-R-T: 55° 31° 32°

**Sinus Rhythm, Borderline Left Ventricular Hypertrophy suspected. Please correlate clinically.**

AUTHORIZED BY

Dr. Charit  
MD, DM: Cardiology

REPORTED BY

Dr Kavitha A

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.

63382

Mr. PRAVEEN GUPTA

I.D. : 87422223

AGE/SEX : 48/M

RECORDED : 2-1-2012 22:31

RATE : 135 BPM

B.P. : 150/80 mmHg

BRUCE

EXERCISE 2

PHASE TIME : 6:00

STAGE TIME : 2:59

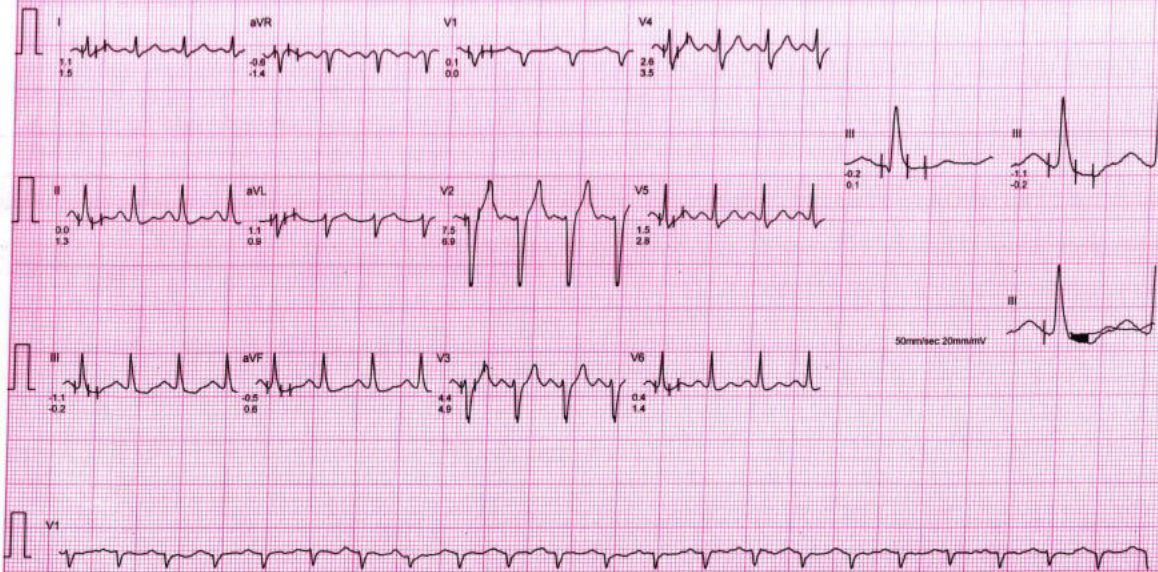
ST @ 10mm/mV

80ms PostJ

SPEED : 4.0 Km./Hr.

GRADE : 12.0 %

LINKED MEDIAN



# CHANDAN BRUCE CARE LTD.

Mr. PRAVEEN GUPTA

I.D. : 87422223

AGE/SEX : 48/M

RECORDED : 2-1-2012 22:31

RATE : 150 BPM

B.P. : 160/80 mmHg

BRUCE

EXERCISE 3

PHASE TIME : 9:00

STAGE TIME : 2:59

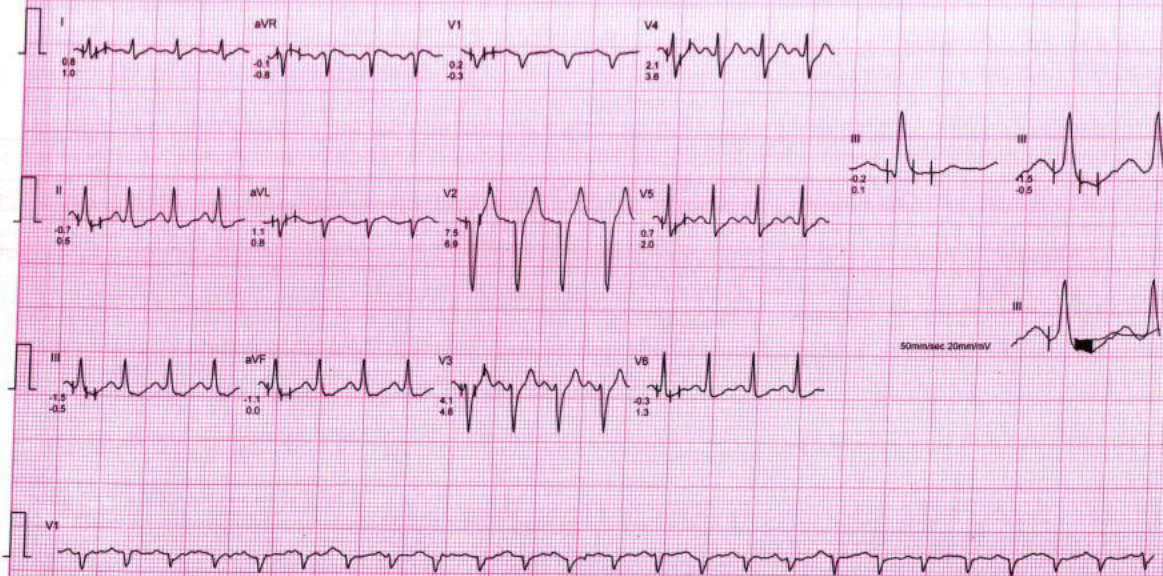
ST @ 10mm/mV

80ms PostJ

SPEED : 5.4 Km./Hr.

GRADE : 14.0 %

LINKED MEDIAN



Mr. PRAVEEN GUPTA

I.D. : 87422223

AGE/SEX : 48/M

RECORDED : 2-1-2012 22:31

RATE : 152 BPM

B.P. : 160/80 mmHg

BRUCE

EXERCISE 4 (EVENT)

PHASE TIME : 9.09

STAGE TIME : 0.07

ST @ 10mm/mV

80ms PostJ

SPEED : 6.7 Km./Hr

GRADE : 16.0 %

RAW E.C.G



# CHANDAN HEALTH CARE LTD.

Mr. PRAVEEN GUPTA  
I.D. : 87422223

AGE/SEX : 46/M

RECORDED : 2-1-2012 22:31

RATE : 153 BPM

B.P. : 160/80 mmHg

BRUCE

PEAK EXER

PHASE TIME : 9:12

STAGE TIME : 0:10

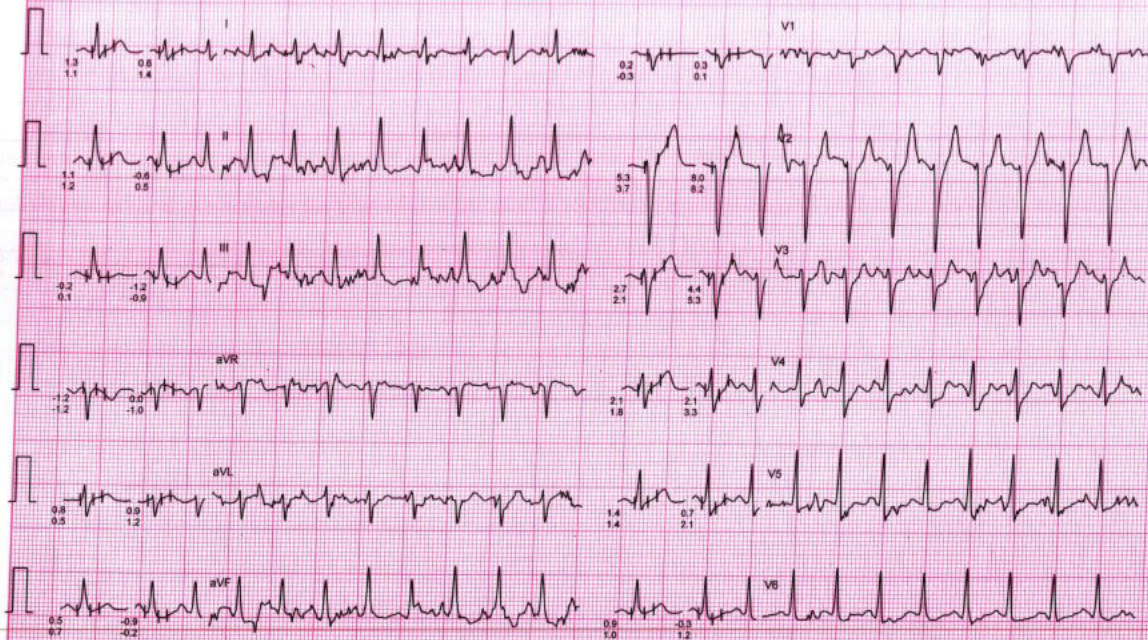
ST @ 10mm/mV

80ms PostJ

SPEED : 6.7 Km./Hr.

GRADE : 16.0 %

MIXED E.C.G.



Filtered

Computer Corrected Baseline

25mm/sec 10mm/mV

CardiCom, INDIA Ph.:091-731-2620740, TeleFax:091-731-2431214

# CHANDAN HEALTH CARE LTD.

Mr. PRAVEEN GUPTA

I.D. : 87422223

AGE/SEX : 48/M

RECORDED : 2-1-2012 22:31

RATE : 141 BPM

B.P. : 160/80 mmHg

BRUCE

RECOVERY (EVENT)

PHASE TIME : 0.31

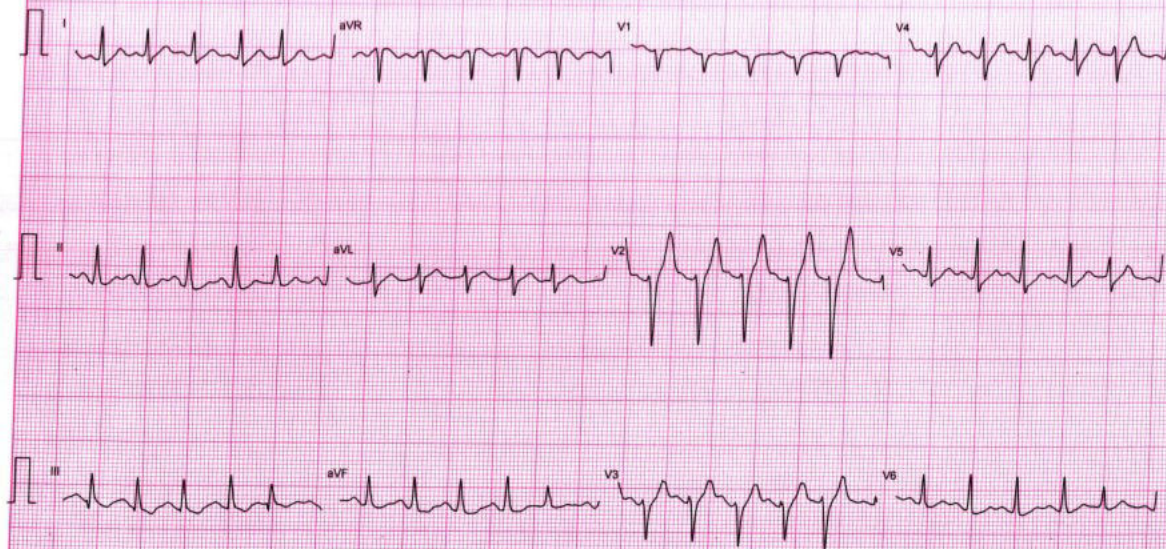
ST @ 10mm/mV

80ms PostJ

SPEED : 0.0 Km./Hr

GRADE : 0.0 %

RAW ECG



CHANDAN HEALTH CARE LTD.

Mr. PRAVEEN GUPTA

I.D. : 87422223

AGE/SEX : 48/M

RECORDED : 2-1-2012 22:31

RATE : 126 BPM

B.P. : 160/80 mmHg

BRUCE

RECOVERY (EVENT)

PHASE TIME : 1.02

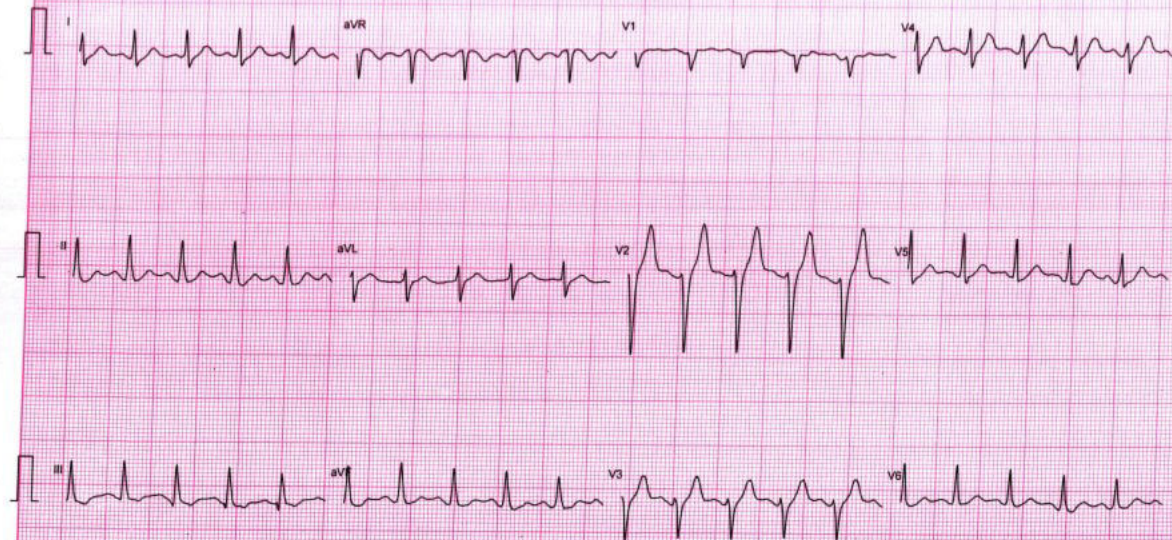
ST @ 10mm/mV

80ms PostJ

SPEED : 0.0 Km./Hr.

GRADE : 0.0 %

RAW E.C.G.



Mr. PRAVEEN GUPTA

I.D. : 87422223

AGE/SEX : 48/M

RECORDED : 2- 1-2012 22:31

RATE : 111 BPM

B.P. : 160/80 mmHg

BRUCE

RECOVERY (EVENT)

PHASE TIME : 2.03

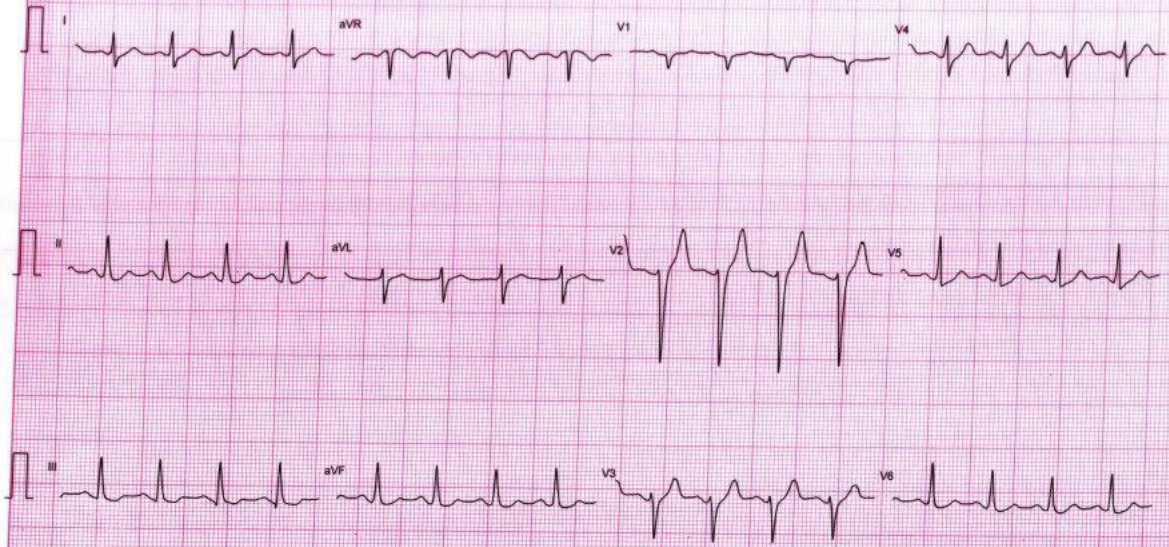
ST @ 10mm/mV

80ms PostJ

SPEED : 0.0 Km /Hr

GRADE : 0.0 %

RAW ECG







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

Latitude

25.305419°

Longitude

82.979024°

LOCAL 10:06:39

GMT 04:36:39

SATURDAY 02.25.2023

ALTITUDE 29 METER