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

UNSTOPPNBLE

Latitude 25.305990°

LOCAL 10:34:25 GMT 05:04:25 Longitude 82.977768°

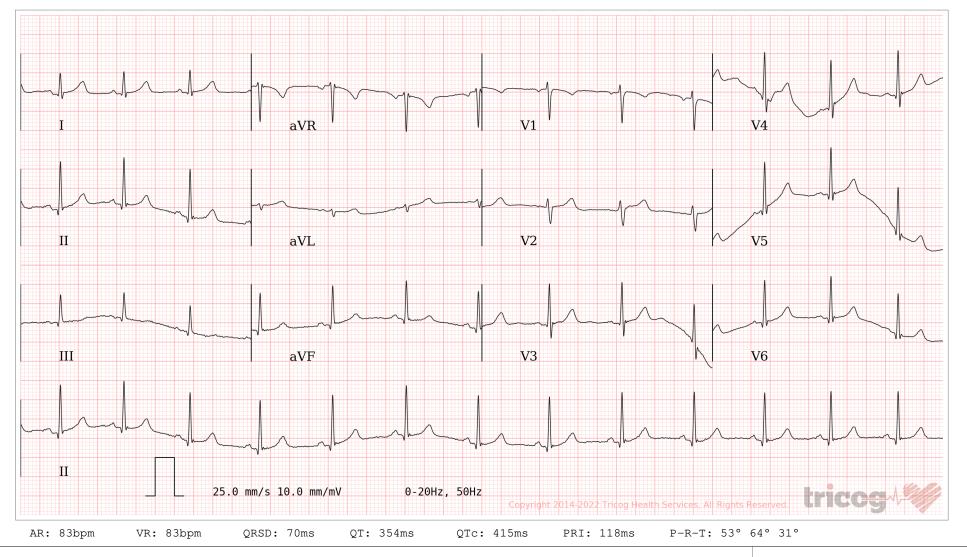
TUESDAY 05.31.2022 ALTITUDE 18 METER

## Chandan Diagnostic Centre, Varanasi

Date and Time: 31st May 22 10:38 AM



Age / Gender: 29/Female Patient ID: CVAR0017402223 Patient Name: Mrs.SHALINI KUMARI-21360



Sinus Rhythm, Normal Axis, with Short PR. Baseline wandering.Please correlate clinically.

AUTHORIZED BY

REPORTED BY

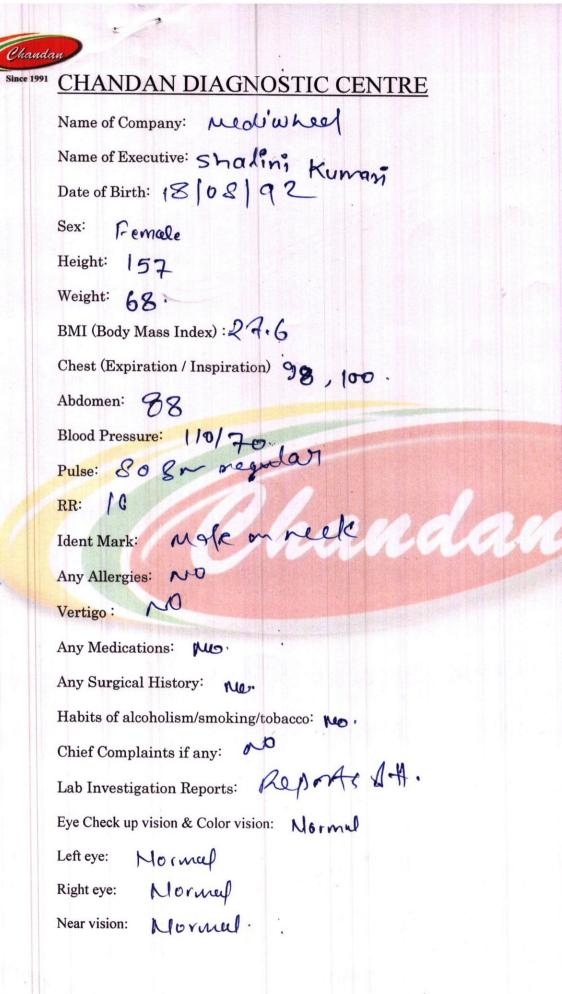




Dr. Charit MD, DM: Cardiology

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





आयकर विमाग INCOME TAX DEPARTMENT

SHALINI KUMARI

VIRENDRA KUMAR

18/08/1992 Permanent Account Number DBSPK0561E Shalin

Signature









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



Patient Name	: Mrs.SHALINI KUMARI-21360	Registered On	: 31/May/2022 10	:04:24
Age/Gender	: 29 Y 0 M 0 D /F	Collected	: 31/May/2022 10	:22:12
UHID/MR NO	: CVAR.0000029244	Received	: 31/May/2022 10	:24:10
Visit ID	: CVAR0017402223	Reported	: 31/May/2022 12	:24:52
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report	
	DEPARTMENT	OF HAEMATOLO	GY	
MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS				
Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Group (A	BO & Rh typing) * , Blood			
Blood Group (A Blood Group	<b>BO &amp; Rh typing) * ,</b> Blood O			

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

C	Complete Blood Count (CBC) * , Whole Blood				
	Haemoglobin	14.80	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	
	TLC (WBC)	7,200	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
	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.	< 20	
	PCV (HCT)	43.40	cc %	40-54	
	Platelet count				
	Platelet Count	1.57	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	4.58	Mill./cu mm	3 7-5 0	ELECTRONIC IMPEDANCE
	NDC COURT	4.50		5.7 5.0	



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#### **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	94.70	fl	80-100	CALCULATED PARAMETER
МСН	32.40	pg	28-35	CALCULATED PARAMETER
МСНС	34.20	%	30-38	CALCULATED PARAMETER
RDW-CV	12.90	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	46.00	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	4,320.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	216.00	/cu mm	40-440	



S. M. Sinton Dr.S.N. Sinha (MD Path)





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Patient Name	: Mrs.SHALINI KUMARI-21360	Registered On	: 31/May/2022 10:04:24
Age/Gender	: 29 Y 0 M 0 D /F	Collected	: 31/May/2022 10:22:11
UHID/MR NO	: CVAR.0000029244	Received	: 31/May/2022 10:24:10
Visit ID	: CVAR0017402223	Reported	: 31/May/2022 12:11:26
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	98.00	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD

#### 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.



S. N. Sinta Dr.S.N. Sinha (MD Path)

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Patient Name	: Mrs.SHALINI KUMARI-21360	Registered On	: 31/May/2022 10:04:24
Age/Gender	: 29 Y 0 M 0 D /F	Collected	: 01/Jun/2022 12:47:09
UHID/MR NO	: CVAR.0000029244	Received	: 01/Jun/2022 12:47:38
Visit ID	: CVAR0017402223	Reported	: 01/Jun/2022 14:35:19
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
<b>Glucose PP</b> Sample:Plasma After Meal	125.00	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD

## 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.



S. N. Sinta Dr.S.N. Sinha (MD Path)





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#### **DEPARTMENT OF BIOCHEMISTRY**

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

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLYCOSYLATED HAEMOGLOBIN (HBA1C)	* . EDTA BLOOD			
Glycosylated Haemoglobin (HbA1c)	5.00	% NGSP		HPLC (NGSP)

mg/dl

#### Interpretation:

#### NOTE:-

Estimated Average Glucose (eAG)

- 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.

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• 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.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	<b>Degree of Glucose Control Unit</b>
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

\*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc. \*\*Some danger of hypoglycemic reaction in Type 1 diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.



Home Sample Collection 1800-419-0002



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#### DEPARTMENT OF BIOCHEMISTRY

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

**Test Name** 

Result

Unit

Method

**Bio. Ref. Interval** 

#### **<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	7.80	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	0.90	mg/dl	0.5-1.3	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) Sample:Serum	101.00	ml/min/1.73m2	- 90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid Sample:Serum	3.20	mg/dl	2.5-6.0	URICASE
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	26.30	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	50.00	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	53.90	IU/L	11-50	OPTIMIZED SZAZING
Protein	7.00	gm/dl	6.2-8.0	BIRUET
Albumin	4.30	gm/dl	3.8-5.4	B.C.G.
Globulin	2.70	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.59		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	51.60	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.50	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.20	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.30	mg/dl	< 0.8	JENDRASSIK & GROF





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#### **DEPARTMENT OF BIOCHEMISTRY**

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	U	nit Bio. Ref. Inter	val Method
LIPID PROFILE ( MINI ) , Serum				
Cholesterol (Total)	223.00	mg/dl	<200 Desirable 200-239 Borderline Hi <sub>i</sub> > 240 High	CHOD-PAP gh
HDL Cholesterol (Good Cholesterol)	50.50	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	156	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optima	CALCULATED
			130-159 Borderline Hi	gh
			160-189 High > 190 Very High	
VLDL	16.54	mg/dl	10-33	CALCULATED
Triglycerides	82.70	mg/dl	< 150 Normal 150-199 Borderline Hij 200-499 High >500 Very High	GPO-PAP gh



S.N. Sinta

Dr.S.N. Sinha (MD Path)





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UHID/MR NO	: CVAR.0000029244	Received	: 31/May/2022 10:24:10
Visit ID	: CVAR0017402223	Reported	: 31/May/2022 12:12:13
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
URINE EXAMINATION, ROUTINE * ,	Urine			
Color	PALE YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic ( 6.0 )			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent	DIPSTICK
	Abselvi	,	10-40 (+)	Dirotter
			40-200 (++)	
			200-500 (+++)	
			> 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+)	DIPSTICK
			0.5-1.0 (++)	
			1-2 (+++)	
Katana and a start of the	ADCENT		> 2 (++++)	
Ketone Bila Salta	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT		and a strange	
Microscopic Examination:	A State of the state of the			
Epithelial cells	1-2/h.p.f			MICROSCOPIC
	halpha in antropas			EXAMINATION
Pus cells	0-1/h.p.f			MICROSCOPIC
				EXAMINATION
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			LANNINATION
Crystals	ABSENT			MICROSCOPIC
Crystals	ADJLINI			EXAMINATION
Others	ABSENT			



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Age/Gender	: 29 Y 0 M 0 D /F	Collected	: 01/Jun/2022 12:47:09
UHID/MR NO	: CVAR.0000029244	Received	: 01/Jun/2022 12:47:38
Visit ID	: CVAR0017402223	Reported	: 01/Jun/2022 13:06:06
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

# 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
Ova	ABSENT
Cysts	ABSENT
Others	ABSENT



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UHID/MR NO	: CVAR.0000029244	Received	: 31/May/2022 10:24:10
Visit ID	: CVAR0017402223	Reported	: 31/May/2022 12:11:46
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, FASTING STAGE * , Urine				
Sugar, Fasting stage	ABSENT	gms%		
Interpretation:         (+)       < 0.5				



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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

# 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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UHID/MR NO	: CVAR.0000029244	Received	: 31/May/2022 14:39:31
Visit ID	: CVAR0017402223	Reported	: 31/May/2022 14:42:07
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)	8.40	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	4.59	μlU/mL	0.27 - 5.5	CLIA

#### Interpretation:

0.3-4.5	µIU/mL	First Trimester
0.5-4.6	µIU/mL	Second Trimester
0.8-5.2	µIU/mL	Third Trimester
0.5-8.9	µIU/mL	Adults 55-87 Years
0.7-27	µIU/mL	Premature 28-36 Week
2.3-13.2	µIU/mL	Cord Blood > 37Week
0.7-64	µIU/mL	Child(21 wk - 20 Yrs.)
1-39	µIU/mL	Child 0-4 Days
1.7-9.1	µIU/mL	Child 2-20 Week

1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.

2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.

**4**) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.

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

**6)** In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.

7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.

**8**) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.



S.n. Sinta

Dr.S.N. Sinha (MD Path)





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Patient Name	: Mrs.SHALINI KUMARI-21360	Registered On	: 31/May/2022 10:04:25
Age/Gender	: 29 Y 0 M 0 D /F	Collected	: N/A
UHID/MR NO	: CVAR.0000029244	Received	: N/A
Visit ID	: CVAR0017402223	Reported	: 31/May/2022 12:20:08
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)

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UHID/MR NO	: CVAR.0000029244	Received	: N/A
Visit ID	: CVAR0017402223	Reported	: 31/May/2022 10:50:41
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

# DEPARTMENT OF ULTRASOUND

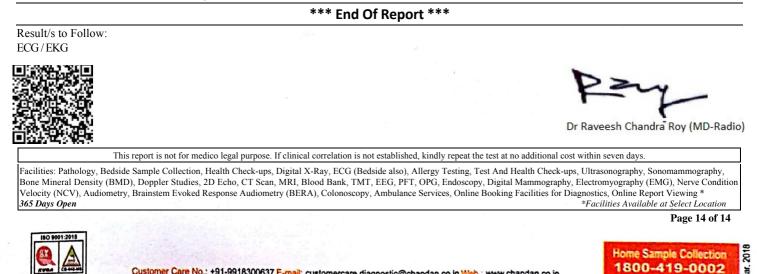
## **MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS**

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

- LIVER: -It measures 13.4 cm in mid clavicular line. It is normal in shape and echogenicity. No focal lesion is seen. No intra hepatic biliary radicle dilation seen.
- GALL BLADDER :- Well distended, walls are normal. No e/o calculus / focal mass lesion/ pericholecystic fluid.
- **CBD** :- It measures 4.9 mm in caliber.
- **PORTAL VEIN**: It measures 7.5 mm in caliber.
- PANCREAS: Head is visualised, normal in size & echopattern. No e/o ductal dilatation or calcification. Rest of pancreas is obscured by bowel gas.
- **SPLEEN**: Normal in size (8.6 cm), shape and echogenicity.
- **RIGHT KIDNEY**: Normal in size (9.1 x 2.9 cm), shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.
- LEFT KIDNEY: Normal in size (8.0 x 4.3 cm), shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.
- URINARY BLADDER :- Partially filled. Prevoid urine volume 13 cc.
- UTERUS :- Anteverted.Size (62 x 42 x 34 mm/48 cc). No focal myometrial lesion seen. Endometrium thickness 6.9 mm.
- **OVARIES** :- Bilateral ovaries are normal in size, shape and echogenicity.
- Visualized bowel loops are normal in caliber. No para-aortic lymphadenopathy
- No free fluid is seen in the abdomen/pelvis.

# **IMPRESSION** : No significant abnormality seen.

# Please correlate clinically.





# Since 1991 CHANDAN DIAGNOSTIC CENTRE

Far vision : Normal ENT consultation : Nowwed Normal Dental Checkup: Normal-Eye Checkup:

Final impression-

......S/o or D/o ..... is presently in good health and free from any cardio-respiratory/communicable ailment, he/she is Fit / Unfit to join any organization.

Statin **Client Signature** 

Dr. R.C. ROY MBBS, MD. (Radio Diagnosis) MBBS, MD. (Radio Diagnosis) Signature of Medical Examiner

Name & Qualification DrRCRay, MSGS, MD

Date. 3. 1. 8 1 22. Place... VARANASI



May 202