

Add: Kamla Nehru Road, Old Katra,Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206



Patient Name	: Mr.YOGESHWAR DEVYALOK - 108127	Registered On	: 23/Jan/2022 11:09:09
Age/Gender	: 31 Y O M O D /M	Collected	: 23/Jan/2022 11:19:20
UHID/MR NO	: ALDP.0000089016	Received	: 23/Jan/2022 11:32:33
Visit ID	: ALDP0294382122	Reported	: 23/Jan/2022 13:19:36
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	d			
Blood Group	В			
Rh ( Anti-D)	POSITIVE			
COMPLETE BLOOD COUNT (CBC) * , Bloo	d			
Haemoglobin	13.60	g/dl	Male- 13.5-17.5 g/dl Female-12.0-15.5 g/dl	
TLC (WBC) DLC	7,200.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
Polymorphs (Neutrophils )	62.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	33.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	2.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE
ESR				
Observed	4.00	Mm for 1st hr.		
Corrected		Mm for 1st hr.	< 9	
PCV (HCT)	37.00	cc %	40-54	
Platelet count				
Platelet Count	1.84	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPI
PDW (Platelet Distribution width)	16.30	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	52.60	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.25	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume) RBC Count	13.50	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count	5.62	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	66.50	fl	80-100	CALCULATED PARAMETER
МСН	24.20	pg	28-35	CALCULATED PARAMETER
	36.40	%	30-38	
	15.00	%	11-16	1 il
	46.70	fL	35-60	Kantons
utrophils Count	4,464.00	/cu mm	3000-7000	
sinophils Count (AEC)	144.00	/cu mm	40-440	Dr. Akanksha Singh (MD Pathology





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Age/Gender	: 31 Y O M O D /M	Collected	: 23/Jan/2022 14:08:14
UHID/MR NO	: ALDP.0000089016	Received	: 23/Jan/2022 14:21:22
Visit ID	: ALDP0294382122	Reported	: 23/Jan/2022 14:44:33
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	75.40	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ <b>126 Diabetes</b>	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.

Glucose PP	89.80	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.



Dr. Akanksha Singh (MD Pathology)

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Patient Name	: Mr.YOGESHWAR DEVYALOK - 108127	Registered On	: 23/Jan/2022 11:09:10
Age/Gender	: 31 Y O M O D /M	Collected	: 23/Jan/2022 11:19:20
UHID/MR NO	: ALDP.0000089016	Received	: 24/Jan/2022 13:32:29
Visit ID	: ALDP0294382122	Reported	: 24/Jan/2022 14:11:27
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
GLYCOSYLATED HAEMOGLOBIN (HBA1C)	** , EDTA BLOOD			
Glycosylated Haemoglobin (HbA1c)	5.80	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	40.00	mmol/mol/IFCC		

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.





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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.



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

Home Sample Collection 1800-419-0002



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Age/Gender         : 31 Y 0 M 0 D /M           UHID/MR NO         : ALDP.00000890           Visit ID         : ALDP029438212		Registered On Collected Received Reported Status	: 23/Jan/2022 11:09: : 23/Jan/2022 11:19: : 23/Jan/2022 11:32: : 23/Jan/2022 12:39: : Final Report	20 33
	DEPARTMENT (	OF BIOCHEMIST	RY	
MEDIW	HEEL BANK OF BAROD	A MALE & FEMA	LE BELOW 40 YRS	
Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) * Sample:Serum	12.47	mg/dL	7.0-23.0	CALCULATED
Creatinine	0.90	mg/dl	0.7-1.3	MODIFIED JAFFES
Sample:Serum e-GFR (Estimated Glomerular Filtratio Rate) Sample:Serum	on 113.00	ml/min/1.73m	2 - 90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid Sample:Serum	5.25	mg/dl	3.4-7.0	URICASE
L.F.T.(WITH GAMMA GT) * , Serum	Strange Still			
SGOT / Aspartate Aminotransferase ( SGPT / Alanine Aminotransferase (AL Gamma GT (GGT) Protein Albumin Globulin A:G Ratio Alkaline Phosphatase (Total) Bilirubin (Total) Bilirubin (Direct) Bilirubin (Indirect) <b>LIPID PROFILE ( MINI )</b> * , <i>Serum</i> Cholesterol (Total)		U/L U/L IU/L gm/dl gm/dl gm/dl mg/dl mg/dl mg/dl	< 35 < 40 11-50 6.2-8.0 3.8-5.4 1.8-3.6 1.1-2.0 42.0-165.0 0.3-1.2 < 0.30 < 0.8 <200 Desirable	IFCC WITHOUT P5P IFCC WITHOUT P5P OPTIMIZED SZAZING BIRUET B.C.G. CALCULATED CALCULATED IFCC METHOD JENDRASSIK & GROF JENDRASSIK & GROF JENDRASSIK & GROF
HDL Cholesterol (Good Cholesterol) LDL Cholesterol (Bad Cholesterol)	35.50 75	mg/dl mg/dl	30-70 < 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	
VLDL Triglycerides	13.48 67.40	mg/dl mg/dl	10-33 < 150 Normal 150-199 Borderline High	CALCULATED GPO-PAP

150-199 Borderline High





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Visit ID	: ALDP0294382122	Reported	: 23/Jan/2022 12:39:07
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

# DEPARTMENT OF BIOCHEMISTRY

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test	Name
1621	Name

Result

Unit

Method

200-499 High >500 Very High

Bio. Ref. Interval



Dr. Akanksha Singh (MD Pathology)

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Age/Gender	: 31 Y O M O D /M	Collected	: 23/Jan/2022 14:08:14
UHID/MR NO	: ALDP.0000089016	Received	: 23/Jan/2022 17:48:57
Visit ID	: ALDP0294382122	Reported	: 23/Jan/2022 18:36:28
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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
URINE EXAMINATION, ROUTINE *	, Urine			
Color	PALE YELLOW			
Specific Gravity	1.010			
Reaction PH	Acidic ( 6.0 )			DIPSTICK
Protein	TRACE	mg %	< 10 Absent	DIPSTICK
			10-40 (+)	
			40-200 (++)	
			200-500 (+++)	
	1.5 M		> 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+)	DIPSTICK
			0.5-1.0 (++)	
			1-2 (+++) > 2 (++++)	
Ketone	ABSENT	ma/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts		mg/dl	0.2-2.81	BIOCHEIVIISTRY
	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT		States and a state of the	
Microscopic Examination:				
Epithelial cells	0-2/h.p.f			MICROSCOPIC
				EXAMINATION
Pus cells	0-2/h.p.f			MICROSCOPIC
				EXAMINATION
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			
Urine Microscopy is done on centrifug	ed urine sediment.			

# SUGAR, FASTING STAGE \* , Urine

Sugar,	Fasting	stage

ABSENT

gms%

## Interpretation:

 $\begin{array}{ll} (+) & < 0.5 \\ (++) & 0.5\text{-}1.0 \end{array}$ 

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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

(+++) 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%



Dr. Akanksha Singh (MD Pathology)

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UHID/MR NO	: ALDP.0000089016	Received	: 24/Jan/2022 13:14:26
Visit ID	: ALDP0294382122	Reported	: 24/Jan/2022 14:06:49
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)	136.63	ng/dl	84.61-201.7	CLIA	
T4, Total (Thyroxine)	9.35	ug/dl	3.2-12.6	CLIA	
TSH (Thyroid Stimulating Hormone)	2.99	µlU/mL	0.27 - 5.5	CLIA	
Interpretation:					
interpretation:		0.2.4.5	Einet Tuimenten		

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.



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

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Age/Gender	: 31 Y O M O D /M	Collected	: N/A
UHID/MR NO	: ALDP.0000089016	Received	: N/A
Visit ID	: ALDP0294382122	Reported	: 23/Jan/2022 12:34:47
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

# **DEPARTMENT OF X-RAY**

# MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

### X-RAY DIGITAL CHEST PA \*

## <u>X-RAY REPORT</u> (300 mA COMPUTERISED UNIT SPOT FILM DEVICE) <u>CHEST P-A VIEW</u>

- Both lung field did not reveal any significant lesion.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Soft tissue shadow appears normal.
- Bony cage is normal.

Please correlare clinically.



Nidhikant.

Dr Nidhikant (MBBS, DMRD, DNB)

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Visit ID	: ALDP0294382122	Reported	: 24/Jan/2022 16:16:46
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

# DEPARTMENT OF CARDIAC

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ECG / EKG \*

1. Machnism, Rhythm	Sinus, Regular	
2. Atrial Rate	69	/mt
3. Ventricular Rate	69	/mt
4. P - Wave	Normal	
5. P R Interval	Normal	
6. Q R S Axis : R/S Ratio : Configuration :	Normal Normal Normal	
7. Q T c Interval	Normal	
8. S - T Segment	Normal	
9. T – Wave <u>FINAL IMPRESSION</u>	Normal	

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







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Patient Name	: Mr.YOGESHWAR DEVYALOK - 108127	Registered On	: 23/Jan/2022 11:09:11
Age/Gender	: 31 Y O M O D /M	Collected	: N/A
UHID/MR NO	: ALDP.0000089016	Received	: N/A
Visit ID	: ALDP0294382122	Reported	: 23/Jan/2022 11:49:09
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**: - Normal in size (13.0 cm), 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** :- Normal in calibre at porta.

PORTAL VEIN: - Normal in calibre and colour uptake at porta.

**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 (9.1 cm), shape and echogenicity.

**RIGHT KIDNEY**: - Normal in size (10.4 x 4.2 cm), shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.

**LEFT KIDNEY**: - Normal in size (9.5 x 5.2 cm), shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.

URINARY BLADDER :- Normal in shape, outline and distension. No e/o wall thickening / calculus.

**PROSTATE :-** Normal in size, shape and echo pattern.

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**

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

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



Nidhika

Dr Nidhikant (MBBS, DMRD, DNB)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing \* *365 Days Open* \*Facilities Available at Select Location

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