

Health Check up Booking Request(bobS45055), Beneficiary Code-3232

1 message

Mediwheel <wellness@mediwheel.in>
To: idc.allahabad.corporate@gmail.com
Cc: customercare@mediwheel.in

Thu, Aug 24, 2023 at 2:56 PM



011-41195959 Email:wellness@mediwheel.in

Dear Chandan Healthcare Limited,

City: Allahabad. Address: 55/23/1 Kamla Nehru Road, Old Katra,

We have received the confirmation for the following booking .

Name

: Shreemati suman daya shankar malviya

Age

: 54

Gender

: Male

Package Name

: Medi-Wheel Full Body Health Checkup Female Above 40

Contact Details

: 964815933

Booking Date

: 24-08-2023

Appointment Date: 03-09-2023

	Member Inform	nation		
Booked Member Name	Age	Gender	Cost(In INR)	
Shreemati suman daya shankar malviya	51	Female	Cashless	
Total an	nount to be paid	Cashless		

We will get back to you with confirmation update shortly. Please find the package details as attached for your reference.

Package Name

Tests included in

this Package

Medi-Wheel Full Body Health Checkup Female Above 40 - Includes

(41)Tests

Ecg, TSH, X-ray Chest, Stress Test (tmt)/ 2d Echo, Gynec Consultation, Blood Sugar Postprandial, Dental Consultation, A:g Ratio, Blood Group, Total Cholesterol, Triglycerides, Pap Smear, Fasting Blood Sugar, Ultrasound Whole Abdomen, Glycosylated Haemoglobin (hba1c), Mammography, Hdl, Vldl, Urine Analysis, LDL, Total Protine, General Consultation, HDL/ LDL ratio, GGT(Gamma-glutamyl Transferase), Eye Check-up consultation, ALP

(ALKALINE PHOSPHATASE), Uric Acid, AST/ALT Ratio, Serum Protein, CBC with ESR, Stool Analysis, Urine Sugar Fasting, Urine Sugar PP, T3, T4, Cholesterol Total / HDL Ratio, BUN, BUN/Creatinine Ratio, Bilirubin Total &

Direct and Indirect, Albumin, Globulin

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प्रति.

समन्वयक,

Mediwheel (Arcofemi Healthcare Limited)

हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	स्वास्थ्य जांच लाभार्थी केविवरण
नाम	SUMAN MALVIYA
जन्म की तारीख	06-02-1972
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	24-08-2023
बुकिंग संदर्भ सं.	23S55592100067486S
	पत्नी/पति केविवरण
कर्मचारी का नाम	MR. MALVIYA DAYA SHANKER
कर्मचारी की क.कू.संख्या	55592
कर्मचारी का पद	DAFTARY
कर्मचारी के कार्य का स्थान	SHANKARGARH
कर्मचारी के जन्म की तारीख	16-03-1966

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 24-08-2023 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के पत्नी/पित की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय.

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बडौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited)से संपर्क करें।)



Sumon Flat viya







Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUMAN MALVIYA Registered On : 03/Sep/2023 10:20:31 Age/Gender Collected : 03/Sep/2023 10:31:26 : 51 Y 6 M 26 D /F UHID/MR NO : ALDP.0000116484 Received : 03/Sep/2023 10:59:03 Visit ID : ALDP0165292324 Reported : 03/Sep/2023 12:35:47

Ref Doctor : Dr. MEDIWHEEL-ARCOFEMI HEALTH Status : Final Report

CARE LTD -

DEPARTMENT OF HAEM ATOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Group (ABO & Rh typing) * , Blood				
Blood Group	В			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
Rh (Anti-D)	POSITIVE			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
0 1 1 10 10 100 1				
Complete Blood Count (CBC) * , Whole Bloo	od			
Haemoglobin	12.30	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) DLC	12,500.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
Polymorphs (Neutrophils)	49.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	42.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	6.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils ESR	0.00	%	<1	ELECTRONIC IMPEDANCE
Observed	6.00	Mm for 1st hr.		
Corrected	45	Mm for 1st hr.	< 20	
PCV (HCT) Platelet count	39.00	%	40-54	
Platelet Count	2.11	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.60	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	52.10	%	35-60	ELECTRONIC IMPEDANCE









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DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
PCT (Platelet Hematocrit)	0.29	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	13.80	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	4.40	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	88.30	fΙ	80-100	CALCULATED PARAMETER
MCH	28.00	pg	28-35	CALCULATED PARAMETER
MCHC	31.70	%	30-38	CALCULATED PARAMETER
RDW-CV	13.40	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	44.50	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	6,125.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	750.00	/cu mm	40-440	

Dr. Akanksha Singh (MD Pathology)









Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUMAN MALVIYA Age/Gender : 51 Y 6 M 26 D /F Collected

UHID/MR NO : ALDP.0000116484 Visit ID : ALDP0165292324

: Dr. MEDIWHEEL-ARCOFEMI HEALTH

CARE LTD -

Registered On

: 03/Sep/2023 10:20:33

: 03/Sep/2023 10:31:25

Received : 03/Sep/2023 10:59:03 Reported : 03/Sep/2023 12:17:03

Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

GLUCOSE FASTING *, Plasma

Glucose Fasting

315.60

mg/dl

< 100 Normal

GOD POD

100-125 Pre-diabetes

≥ 126 Diabetes

Result Rechecked

Ref Doctor

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*

Sample:Plasma After Meal

331.20

mg/dl

<140 Normal

GOD POD

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 HAEM OGLOBIN (HBA1C) *, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c) 10.50 % NGSP HPLC (NGSP) 90.90 Glycosylated Haemoglobin (HbA1c) mmol/mol/IFCC Estimated Average Glucose (eAG) 254 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.



Home Sample Collection 1800-419-0002





Ref Doctor

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj

Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUMAN MALVIYA : 03/Sep/2023 10:20:33 Registered On Age/Gender : 51 Y 6 M 26 D /F Collected : 03/Sep/2023 10:31:25 UHID/MR NO : ALDP.0000116484 Received : 03/Sep/2023 10:59:03 Visit ID : ALDP0165292324 Reported : 03/Sep/2023 12:17:03 : Dr. MEDIWHEEL-ARCOFEMI HEALTH

Status : Final Report CARE LTD -

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method	
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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 VARIANT II TURBO 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 nondiabetic 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	7.10	mg/dL	7.0-23.0	CALCULATED
Creatinine * Sample:Serum	0.80	mg/dl	Serum 0.5-1.2 Spot Urine-Male- 20 Female-20-320	MODIFIED JAFFES 0-275
Uric Acid * Sample:Serum	4.42	mg/dl	2.5-6.0	URICASE





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

CHANDAN DIAGNOSTIC CENTRE



Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj

Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUMAN MALVIYA Registered On : 03/Sep/2023 10:20:33 Age/Gender Collected : 51 Y 6 M 26 D /F : 03/Sep/2023 10:31:25 UHID/MR NO : 03/Sep/2023 10:59:03 : ALDP.0000116484 Received Visit ID : ALDP0165292324 Reported : 03/Sep/2023 12:17:03

Ref Doctor : Dr. MEDIWHEEL-ARCOFEMI HEALTH Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	ι	Init Bio. Ref. Interv	al Method
LFT (WITH GAMMA GT) * ,				
SGOT / Aspartate Aminotransferase (AST)	48.50	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	54.30	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	130.10	IU/L	11-50	OPTIMIZED SZAZING
Protein	8.00	gm/dl	6.2-8.0	BIURET
Albumin	4.40	gm/dl	3.4-5.4	B.C.G.
Globulin	3.60	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.22		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	183.80	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.60	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.20	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.40	mg/dl	< 0.8	JENDRASSIK & GROF
JPID PROFILE (MINI)*, Serum				
Cholesterol (Total)	238.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	66.30	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	70	mg/dl	< 100 Optimal	CALCULATED
	101.00		100-129 Nr. Optimal/Above Optima 130-159 Borderline High 160-189 High > 190 Very High	ו
VLDL	101.98	mg/dl	10-33	CALCULATED
Triglycerides	509.90	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP า
D 1D 1 1 1				

AS

Dr.Akanksha Singh (MD Pathology)



Result Rechecked







Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206



Patient Name

: Mrs.SUMAN MALVIYA

Registered On Collected : 03/Sep/2023 10:20:32 : 03/Sep/2023 16:39:14

Age/Gender UHID/MR NO : 51 Y 6 M 26 D /F : ALDP.0000116484

Received

: 03/Sep/2023 17:08:06

Visit ID

: ALDP0165292324

Reported

: 03/Sep/2023 18:11:30

Method

DIPSTICK

Ref Doctor

Test Name

Reaction PH

Protein

: Dr. MEDIWHEEL-ARCOFEMI HEALTH CARE LTD -

Status

: Final Report

Rio Ref Interval

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

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URINE EXAMINATION, ROUTINE*, Urin	e				
·					
Color	PALE YELLOW				
Specific Gravity	1.015				

Acidic (6.0) DIPSTICK

ABSENT mg % < 10 Absent DIPSTICK

10-40 (+)

40-200 (++)

Linit

200-500 (+++) >500 (++++)

Sugar PRESENT (+) gms% < 0.5 (+)

0.5-1.0 (++)

>2 (++++)

Ketone ABSENT mg/dl 0.1-3.0 BIOCHEMISTRY

Bile Salts ABSENT
Bile Pigments ABSENT
Urobilinogen(1:20 dilution) ABSENT

Microscopic Examination:

Epithelial cells 1-2/h.p.f MICROSCOPIC

EXAMINATION

Pus cells 2-3/h.p.f RBCs ABSENT

SENT MICROSCOPIC EXAMINATION

Cast ABSENT Crystals ABSENT

ABSENT MICROSCOPIC EXAMINATION

Others ABSENT

Urine Microscopy is done on centrifuged urine sediment.

SUGAR, FASTING STAGE*, Urine

Sugar, Fasting stage PRESENT (+) gms%

Interpretation:

(+) < 0.5

(++) 0.5-1.0

(+++) 1-2









Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUMAN MALVIYA Age/Gender

: 51 Y 6 M 26 D /F

Registered On Collected

: 03/Sep/2023 10:20:32 : 03/Sep/2023 16:39:14

UHID/MR NO Visit ID

: ALDP.0000116484 : ALDP0165292324

Received Reported

: 03/Sep/2023 17:08:06 : 03/Sep/2023 18:11:30

Ref Doctor

: Dr. MEDIWHEEL-ARCOFEMI HEALTH CARE LTD -

Status

: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

(++++) > 2

SUGAR, PP STAGE*, Urine

Sugar, PP Stage

PRESENT (+)

Interpretation:

< 0.5 gms% (+)

0.5-1.0 gms% (++)

(+++) 1-2 gms%

(++++) > 2 gms%

Dr. Akanksha Singh (MD Pathology)









Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj Ph: 9235447965,0532-2548257

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUMAN MALVIYA Registered On : 03/Sep/2023 10:20:32 Age/Gender Collected : 51 Y 6 M 26 D /F : 03/Sep/2023 10:31:25 UHID/MR NO : ALDP.0000116484 Received : 03/Sep/2023 10:59:03 Visit ID : 03/Sep/2023 13:33:44 : ALDP0165292324 Reported

Ref Doctor : Dr. MEDIWHEEL-ARCOFEMI HEALTH Status : Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interva	l Method
THYROID PROFILE - TOTAL *, Serum				
T3, Total (tri-iodothyronine)	150.00	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	10.60	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	2.20	μlU/mL	0.27 - 5.5	CLIA
Interpretation:				
· -		0.3-4.5 μIU/n	nL First Trimes	ster
		0.5-4.6 μIU/n	nL Second Trin	nester
		0.8-5.2 μIU/n	nL Third Trime	ster
		0.5-8.9 μIU/n	nL Adults	55-87 Years
		0.7-27 μIU/n	nL Premature	28-36 Week
		2.3-13.2 μIU/n	nL Cord Blood	> 37Week
		0.7-64 μIU/n	nL Child(21 wk	z - 20 Yrs.)
		1-39 μIU	/mL Child	0-4 Days
		1.7-9.1 μIU/r	nL 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. Akanksha Singh (MD Pathology)









Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUMAN MALVIYA Registered On : 03/Sep/2023 10:20:33

 Age/Gender
 : 51 Y 6 M 26 D /F
 Collected
 : N/A

 UHID/MR NO
 : ALDP.0000116484
 Received
 : N/A

Visit ID : ALDP0165292324 Reported : 03/Sep/2023 14:00:59

Ref Doctor : Dr. MEDIWHEEL-ARCOFEMI HEALTH Status : Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

X-RAY DIGITAL CHEST PA *

X-RAY REPORT (300 mA COMPUTERISED UNIT SPOT FILM DEVICE) CHEST P-A VIEW

- 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.

DR K N SINGH (MBBS,DMRE)







CHANDAN DIAGNOSTIC CENTRE

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Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUMAN MALVIYA Registered On : 03/Sep/2023 10:20:33

 Age/Gender
 : 51 Y 6 M 26 D /F
 Collected
 : N/A

 UHID/MR NO
 : ALDP.0000116484
 Received
 : N/A

Visit ID : ALDP0165292324 Reported : 03/Sep/2023 13:22:11

Ref Doctor : Dr. MEDIWHEEL-ARCOFEMI HEALTH Status : Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

LIVER: - Enlarged in size (17.1cm), with normal shape and shows diffuse increase in the liver parenchymal echogenicity with patchy attenuation of portal venous walls and diaphragm, suggestive of grade-III fatty changes. No focal lesion is seen. No intra hepatic biliary radicle dilation seen.

GALL BLADDER: Not visualized (post cholecyetectomy status)

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, shape and echogenicity.

RIGHT KIDNEY: - Normal in size (10.2 cm), shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.

LEFT KIDNEY: - Normal in size (11.0cm), 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.

UTERUS:- Not visualized (post hysterectomy status)

Visualized bowel loops are normal in caliber. No para-aortic lymphadenopathy

No free fluid is seen in the abdomen/pelvis.

IMPRESSION: Moderat hepatomegaly with grade III fatty liver.

Please correlate clinically.

*** End Of Report ***

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG, PAP SMEAR FOR CYTOLOGICAL EXAMINATION



DR K N SINGH (MBBS,DMRE)

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







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