

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 जिनका विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	कर्मचारी विवरण
नाम	MR. PIPPLE ABHISHEK KUMAR
क.कू.संख्या	117033
पदनाम	SINGLE WINDOW OPERATOR A
कार्य का स्थान	GHAZIABAD, SURYANAGAR
जन्म की तारीख	14-02-1986
स्वास्थ्य जांच की प्रस्तावित तारीख	09-03-2024
वुकिंग संदर्भ सं.	23M117033100094948E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रित के साथ प्रस्तुत िकया जाएगा। यह अनुमोदन पत्र दिनांक 29-02-2024 से 31-03-2024 तक मान्य है। इस पत्र के साथ िकए 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 िक आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोक्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में िकया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(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।)



### LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator, Mediwheel (Arcofemi Healthcare Limited) Helpline number: 011- 41195959

Dear Sir / Madam,

### Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. PIPPLE ABHISHEK KUMAR
EC NO.	117033
DESIGNATION	SINGLE WINDOW OPERATOR A
PLACE OF WORK	GHAZIABAD,SURYANAGAR
BIRTHDATE	14-02-1986
PROPOSED DATE OF HEALTH	09-03-2024
CHECKUP	
BOOKING REFERENCE NO.	23M117033100094948E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from 29-02-2024 till 31-03-2024 The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a cashless facility as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager HRM Department Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



## SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE		
CBC	CBC		
ESR	ESR		
Blood Group & RH Factor	Blood Group & RH Factor		
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting		
Blood and Urine Sugar PP	Blood and Urine Sugar PP		
Stool Routine	Stool Routine		
Lipid Profile	Lipid Profile		
Total Cholesterol	Total Cholesterol		
HDL	HDL		
LDL	LDL		
VLDL	VLDL.		
Triglycerides	Triglycerides		
HDL / LDL ratio	HDL / LDL ratio		
Liver Profile	Liver Profile		
AST	AST		
ALT	ALT		
GGT	GGT		
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)		
ALP	ALP		
Proteins (T, Albumin, Globulin)	Proteins (T, Albumín, Globulin)		
Kidney Profile	Kidney Profile		
Serum creatinine	Serum creatinine		
Blood Urea Nitrogen	Blood Urea Nitrogen		
Uric Acid	Uric Acid		
HBA1C	HBA1C		
Routine urine analysis	Routine urine analysis		
USG Whole Abdomen	USG Whole Abdomen		
General Tests	General Tests		
X Ray Chest	X Ray Chest		
ECG	ECG		
2D/3D ECHO / TMT	2D/3D ECHO / TMT		
Stress Test	Thyroid Profile (T3, T4, TSH)		
PSA Male (above 40 years)	Mammography (above 40 years)		
,	and Pap Smear (above 30 years).		
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation		
Dental Check-up consultation	Physician Consultation		
Physician Consultation	Eye Check-up consultation		
Eye Check-up consultation	Skin/ENT consultation		
Skin/ENT consultation	Gynaec Consultation		



### भारत सरकार

### Government of India



अभिषेक कुमार विप्यल Abhishek Kumar Pipple ਯਵਕ ਜ਼ਿੱਥਿ / DOB : 14/02/1986 पुरुष / Maic



अप्रणार महत्त्वान का प्रयाण है, नागारेखना का जन्मविधि का नहीं र इसका उपकोर सन्धापन (अनिसाहन प्रमुखाकरण, व व्यक्ताः काळ) अभिवाहन एक्सएमएर की स्केमिन) के साथ किया वामर प्राप्ति । Andhanris proof of identity, not of citizenship or date of birth, it should be used with verm stood tember emporturation of securing or configuration states.

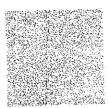
8156 5247 8926

सेश ना , सेरी पहलत



भारतीय विशिष्ट पहचान प्राधिकरण Commission reducity of toda

प्रमा S/O: रंडित सिंह, 1034, सेन 3, बस्डा, आजिसाबाद, आजिसाबाद, आजिसाबाद, आजिसाबाद, अतर प्रदेश, 201002 Address: S/O: Ranjil Singh, 1034, see 2 Address: 9/0: Ranjil Singh, 1034, sec 3 chetak block, zastundra, (Shaziahad PO:Kavi Nagar, DIST, Shaziahad Uttar 8 Pradesh, 201002





8156 5247 8926



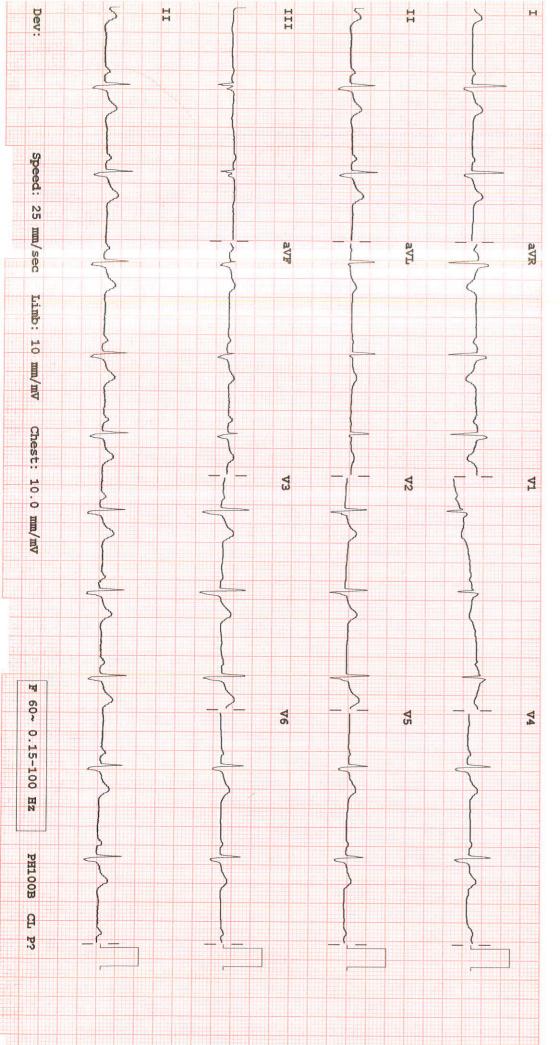




09/03/2024

# - OTHERWISE NORMAL ECG -

## Unconfirmed Diagnosis







Name

: MR ABHISHEK KUMAR PIPPLE

Age

38 Yr(s) Sex :Male

**Registration No** 

: MH010871525

Lab No

202403001046

Patient Episode

H18000001880

**Collection Date:** 

09 Mar 2024 09:31

Referred By

: HEALTH CHECK MGD

Reporting Date:

10 Mar 2024 13:34

**Receiving Date** 

: 09 Mar 2024 09:31

BLOOD BANK

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Blood Group & Rh Typing (Agglutination by gel/tube technique) Specimen-Blood

Blood Group & Rh typing

B Rh(D) Positive

### Technical note:

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

Page1 of 1

NOTE:

# - Abnormal Values

-----END OF REPORT-----

Dr. Charu Agarwal Consultant Pathologist





Name

MR ABHISHEK KUMAR PIPPLE

Age

38 Yr(s) Sex :Male

Registration No

MH010871525

Lab No

202403001046

Patient Episode

H18000001880

**Collection Date:** 

09 Mar 2024 09:31

Referred By

HEALTH CHECK MGD

Reporting Date:

09 Mar 2024 13:36

**Receiving Date** 

: 09 Mar 2024 09:31

### **BIOCHEMISTRY**

TEST

RESULT

UNIT

**BIOLOGICAL REFERENCE INTERVAL** 

Specimen Type : Serum

### THYROID PROFILE, Serum

T3 - Triiodothyronine (ELFA)	1.340	ng/ml	[0.610-1.630]
T4 - Thyroxine (ELFA)	7.120	ug/ dl	[4.680-9.360]
Thyroid Stimulating Hormone	1.840	µIU/mL	[0.250-5.000]

### NOTE:

TSH stimulates the thyroid gland to produce the main thyroid hormones T3 and T4. In cases of hyperthyroidism TSH level is severely inhibited and may even be undetectable. In rare forms of high-origin hyperthyroidism, the TSH level is not reduced, since the negative-feedback control of the thyroid hormones has no effect.

In cases of primary hypothyroidism, TSH levels are always much higher than normal and thyroid hormone levels are low.

The TSH assay aids in diagnosing thyroid or hypophysial disorders.

The T4 assay aids in assessing thyroid function, which is characterized by a decrease in thyroxine levels in patients with hypothyroidism and an increase in patients with hyperthyroidism.

The test has been carried out in Fully Automated Immunoassay System VIDAS using ELFA (Enzyme Linked Fluorescence Assay) technology.

Page1 of 1

NOTE:

# - Abnormal Values

-----END OF REPORT-----

Dr. Alka Dixit Vats Consultant Pathologist



TEST





NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002 Ph. +91 120 353 5353, M. 88609 45566 www.manipalhospitals.com

BIOLOGICAL REFERENCE INTERVAL

Name : MR ABHISHEK KUMAR PIPPLE Age : 38 Yr(s) Sex :Male

RESULT

Registration No : MH010871525 Lab No : 202403001046

Referred By : HEALTH CHECK MGD Reporting Date : 09 Mar 2024 12:54

**Receiving Date** : 09 Mar 2024 09:31

### **HAEMATOLOGY**

UNIT

COMPLETE BLOOD COUNT (AUTOMAT	ED)	SPECIMEN-EDTA Whole	Blood
DDC COUNT (IMPEDENCE)	5.37	millions/cumm	[4.50-5.50]
RBC COUNT (IMPEDENCE)			
HEMOGLOBIN	15.3	g/dl	[13.0-17.0]
Method:cyanide free SLS-color	- TO	0	540 0 50 03
HEMATOCRIT (CALCULATED)	47.7	0.0	[40.0-50.0]
MCV (DERIVED)	88.8	fL	[83.0-101.0]
MCH (CALCULATED)	28.5	pg	[25.0-32.0]
MCHC (CALCULATED)	32.1	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	13.0	9	[11.6-14.0]
Platelet count	151	$\times$ 10 $^{3}$ cells/cumm	[150-410]
Method: Electrical Impedance			
MPV (DERIVED)			
		48	
WBC COUNT (TC) (IMPEDENCE)	5.23	x 10 <sup>3</sup> cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT			
(VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	58.0	96	[40.0-80.0]
Lymphocytes	32.0	00	[20.0-40.0]
Monocytes	7.0	90	[2.0-10.0]
Eosinophils	3.0	90	[1.0-6.0]
Basophils	0.0	00	[0.0-2.0]
ESR	22.0 #	mm/1sthour	-0.01
	176		

Page 1 of 8







Name

: MR ABHISHEK KUMAR PIPPLE

Age

38 Yr(s) Sex :Male

Registration No

: MH010871525

Lab No

202403001046

Patient Episode

: H18000001880

Collection Date:

09 Mar 2024 09:31

Referred By

: HEALTH CHECK MGD

Reporting Date:

09 Mar 2024 16:42

**Receiving Date** 

: 09 Mar 2024 09:31

**BIOCHEMISTRY** 

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Glycosylated Hemoglobin

Specimen: EDTA

HbA1c (Glycosylated Hemoglobin)

5.9 #

[0.0-5.6]

Method: HPLC

As per American Diabetes Association (ADA

HbAlc in %

Non diabetic adults >= 18 years <5.7

Prediabetes (At Risk )5.7-6.4 Diagnosing Diabetes >= 6.5

Estimated Average Glucose (eAG)

123

mg/dl

Comments: HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control.

### ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

### MACROSCOPIC DESCRIPTION

Colour

PALE YELLOW

(Pale Yellow - Yellow)

Appearance

Reaction[pH]

CLEAR

5.0

(4.6 - 8.0)

Specific Gravity

1.015

(1.003 - 1.035)

CHEMICAL EXAMINATION

Protein/Albumin

Negative

(NEGATIVE)

Glucose

NIL

(NIL)

Ketone Bodies

(NEGATIVE)

Urobilinogen

Negative Normal

(NORMAL)







Lab No

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002 Ph. +91 120 353 5353, M. 88609 45566 www.manipalhospitals.com

Name : MR ABHISHEK KUMAR PIPPLE Age

38 Yr(s) Sex: Male

**Registration No** 

: MH010871525

202403001046

Patient Episode

: H18000001880

MICROSCOPIC EXAMINATION (Automated/Manual)

**Collection Date:** 

09 Mar 2024 10:25

Referred By

: HEALTH CHECK MGD

Reporting Date:

09 Mar 2024 12:29

**Receiving Date** 

: 09 Mar 2024 10:25

### CLINICAL PATHOLOGY

Pus Cells	0 1 /1-6				(0 E /b= 6)		
	0-1 /hpf				(0-5/hpf)		
RBC	NIL	/3 6			(0-2/hpf)		
Epithelial Cells	0-1	/hpf					
CASTS	NIL						
Crystals	NIL						
Bacteria	NIL						
OTHERS	NIL						
Serum LIPID PROFILE							
Serum TOTAL CHOLESTEROL			240	#	mg/dl	[<200]	
Method: Oxidase, esterase, pe	roxide					Moderate risk:200-239	
3						High risk:>240	
TRIGLYCERIDES (GPO/POD)			108		mg/dl	[<150]	
					3,	Borderline high:151-199	
						High: 200 - 499	
						Very high:>500	
HDL- CHOLESTEROL			55		mg/dl	[35-65]	
Method: Enzymatic Immunoim	hibition				9,	[00 00]	
VLDL- CHOLESTEROL (Calculat			22		mg/dl	[0-35]	
CHOLESTEROL, LDL, CALCULATE		16	63.0	#	mg/dl	[<120.0]	
, <u></u> ,,	-			•••	97	Near/	
Above optimal-100-129							
						Borderline High: 130-159	
						High Risk:160-189	
T.Chol/HDL.Chol ratio(Calc	ulated)		4.4			<4.0 Optimal	
	dia					4.0-5.0 Borderline	
						>6 High Risk	
						> 0 migh Kisk	
LDL.CHOL/HDL.CHOL Ratio(Cal	culated)		3.0			<3 Optimal	
						3-4 Borderline	
					- S	>6 High Risk	
						~	

Page 3 of 8







Ghaziabad - 201002 Ph. +91 120 353 5353, M. 88609 45566 www.manipalhospitals.com

Name

: MR ABHISHEK KUMAR PIPPLE

Age

38 Yr(s) Sex :Male

**Registration No** 

: MH010871525

Lab No

202403001046

Patient Episode

: H18000001880

**Collection Date:** 

09 Mar 2024 09:31

Referred By

: HEALTH CHECK MGD

Reporting Date:

09 Mar 2024 11:40

**Receiving Date** 

: 09 Mar 2024 09:31

### **BIOCHEMISTRY**

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Note:

Reference ranges based on ATP III Classifications.

Lipid profile is a panel of blood tests that serves as initial broad medical screening tool for abnormalities in lipids, the results of this tests can identify certain genetic diseases and determine approximate risks for cardiovascular disease, certain forms of pancreatitis and other diseases

### KIDNEY PROFILE

Specimen: Serum UREA	23.1	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay BUN, BLOOD UREA NITROGEN	10.8	mg/dl	[8.0-20.0]
Method: Calculated CREATININE, SERUM	1.09	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardization URIC ACID	7.4	mg/dl	[4.0-8.5]
Method:uricase PAP			
SODIUM, SERUM	139.10	mmol/L	[136.00-144.00]
POTASSIUM, SERUM SERUM CHLORIDE	4.63 105.2	mmol/L	[3.60-5.10] [101.0-111.0]
Method: ISE Indirect			
eGFR (calculated)	85.6	ml/min/1.73sq.m	[>60.0]
machaigal Note			0000

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to1.73 sq.m BSA and is not applicable to individuals below 18 years. eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis

Icterus / Lipemia.

Page 4 of 8







Name

: MR ABHISHEK KUMAR PIPPLE

Age

38 Yr(s) Sex: Male

Registration No

: MH010871525

Lab No

202403001046

**Patient Episode** 

: H18000001880

**Collection Date:** 

09 Mar 2024 09:31

Referred By

: HEALTH CHECK MGD

Reporting Date:

09 Mar 2024 11:40

**Receiving Date** 

: 09 Mar 2024 09:31

### **BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOI	OGICAL REFERENCE INTERVAL
LIVER FUNCTION TEST				
BILIRUBIN - TOTAL Method: D P D	0.63		mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.08		mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.55		mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) Method: BIURET	7.40		gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.51		g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	2.90		gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.56			[1.00-2.50]
AST(SGOT) (SERUM) Method: IFCC W/O P5P	32.00		U/L	[0.00-40.00]
ALT(SGPT) (SERUM) Method: IFCC W/O P5P	44.10		U/L	[17.00-63.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	93.0 #		IU/L	[32.0-91.0]
GGT	20.0		U/L	[7.0-50.0]
				Page 5 of 8







Name : MR ABHISHEK KUMAR PIPPLE

Age

38 Yr(s) Sex :Male

Registration No

: MH010871525

Lab No

202403001046

**Patient Episode** 

: H18000001880

**Collection Date:** 

09 Mar 2024 09:31

Referred By

: HEALTH CHECK MGD

Reporting Date:

09 Mar 2024 11:40

**Receiving Date** 

: 09 Mar 2024 09:31

### BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Liver function test aids in diagnosis of various pre hepatic, hepatic and post hepatic causes of dysfunction like hemolytic anemia's, viral and alcoholic hepatitis and cholestasis of obstructive causes.

The test encompasses hepatic excretory, synthetic function and also hepatic parenchymal cell damage. LFT helps in evaluating severity, monitoring therapy and assessing prognosis of liver disease and dysfunction.

Page 6 of 8

-----END OF REPORT-----

Dr. Alka Dixit Vats Consultant Pathologist







Name

: MR ABHISHEK KUMAR PIPPLE

Age

38 Yr(s) Sex :Male

Registration No

: MH010871525

Lab No

202403001047

Patient Episode

: H18000001880

**Collection Date:** 

09 Mar 2024 09:31

Referred By

: HEALTH CHECK MGD

Reporting Date:

09 Mar 2024 11:40

**Receiving Date** 

: 09 Mar 2024 09:31

BIOCHEMISTRY

TEST

RESULT

UNIT

**BIOLOGICAL REFERENCE INTERVAL** 

GLUCOSE-Fasting

Specimen: Plasma

GLUCOSE, FASTING (F)

121.0 #

mg/dl

[70.0-110.0]

Method: Hexokinase

Normally, the glucose concentration in extracellular fluid is closely regulated so that a source of energy is readily available to tissues and so that no glucose is excreted in the urine.

Increased in Diabetes mellitus, Cushing's syndrome (10-15%), chronic pancreatitis (30%). Drugs corticosteroids, phenytoin, estrogen, thiazides

Decreased in Pancreatic islet cell disease with increased insulin, insulinoma, adrenocortica insufficiency, hypopituitarism, diffuse liver disease, malignancy(adrenocortical, stomach, fibro sarcoma), infant of a diabetic mother enzyme deficiency diseases(e.g.galactosemia), orugs-

insulin, ethanol, propranolol, sulfonylureas, tobutamide, and other oral hypoglycemic agents.

Page 7 of 8

-----END OF REPORT-----

Dr. Alka Dixit Vats Consultant Pathologist







Name

: MR ABHISHEK KUMAR PIPPLE

Age

38 Yr(s) Sex :Male

Registration No

: MH010871525

Lab No

202403001048

Patient Episode

: H18000001880

**Collection Date:** 

09 Mar 2024 15:08

Referred By

: HEALTH CHECK MGD

Reporting Date:

10 Mar 2024 12:48

**Receiving Date** 

: 09 Mar 2024 15:08

**BIOCHEMISTRY** 

TEST

RESULT

UNIT

**BIOLOGICAL REFERENCE INTERVAL** 

PLASMA GLUCOSE

Specimen:Plasma

GLUCOSE, POST PRANDIAL (PP), 2 HOURS

80.0

mg/dl

[80.0-140.0]

Method: Hexokinase

Note:

Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption , post exercise

Page 8 of 8

-----END OF REPORT----

Dr. Charu Agarwal Consultant Pathologist





NAME	MR Abhishek kumar	STUDY DATE	09/03/2024 10:02AM
AGE / SEX	38 y / M	HOSPITAL NO.	MH010871525
ACCESSION NO.	R7021454	MODALITY	CR
REPORTED ON	09/03/2024 10:07AM	REFERRED BY	HEALTH CHECK MGD

### XR- CHEST PA VIEW

FINDINGS: LUNGS: Normal. TRACHEA: Normal. CARINA: Normal.

RIGHT AND LEFT MAIN BRONCHI: Normal.

PLEURA: Normal. HEART: Normal.

RIGHT HEART BORDER: Normal. LEFT HEART BORDER: Normal. PULMONARY BAY: Normal. PULMONARY HILA: Normal.

AORTA: Normal.

THORACIC SPINE: Normal.

OTHER VISUALIZED BONES: Normal. VISUALIZED SOFT TISSUES: Normal.

DIAPHRAGM: Normal.

VISUALIZED ABDOMEN: Normal. VISUALIZED NECK: Normal.

IMPRESSION:

-No significant abnormality seen.

Please correlate clinically

Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS

CONSULTANT RADIOLOGIST

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





NAME	MR Abhishek kumar PIPPLE	STUDY DATE	09/03/2024 9:46AM
AGE / SEX	38 v / M	HOSPITAL NO.	MH010871525
ACCESSION NO.	R7021455	MODALITY	US
REPORTED ON	09/03/2024 1:13PM	REFERRED BY	HEALTH CHECK MGD

### **USG ABDOMEN & PELVIS**

### **FINDINGS**

LIVER: appears normal in size (measures 133 mm) and shape but shows diffuse increase in liver echotexture,

in keeping with diffuse grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 90 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 11 mm.

COMMON BILE DUCT: Appears normal in size and measures 2 mm.

IVC, HEPATIC VEINS: Normal. BILIARY SYSTEM: Normal.

GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is

maintained. Rest normal.

Right Kidney: measures 103 x 47 mm. Left Kidney: measures 96 x 41 mm. PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged. FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest

PROSTATE: Prostate is normal in size, shape and echotexture. It measures 31 x 30 x 29 mm with volume 14 cc.

Rest normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

### **IMPRESSION**

-Diffuse grade I fatty infiltration in liver.

Recommend clinical correlation.

Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS

CONSULTANT RADIOLOGIST

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