

idc. ashiyana <idcashiyana@gmail.com>

# Re: Health Check up Booking Confirmed Request(bobE22043), Package Code-PKG10000238, Beneficiary Code-22731

1 message

anurag sri <anurag.idc@gmail.com>

Sat, Dec 17, 2022 at 1:19 PM

To: Mediwheel <customercare@policywheel.com>, "idc. ashiyana" <idcashiyana@gmail.com>

Cc: Mediwheel CC <customercare@mediwheel.in>, Mediwheel CC <mediwheelwellness@gmail.com>

#### CONFIRMED

Dear Alambagh Team Plz Find Attached Package details

On Sat, Dec 17, 2022 at 1:04 PM Mediwheel <customercare@policywheel.com> wrote:



011-41195959

Email:wellness@mediwheel.in

#### Hi Chandan Healthcare Limited,

Diagnostic/Hospital Location: M-214/215 Sec G LDA Colony Near Power House Chauraha Kanpur road, City: Lucknow

We have received the confirmation for the following booking .

Beneficiary Name: PKG10000238

Beneficiary Name: MR. SINGH AJAY

Member Age : 31

Member Gender : Male

Member Relation : Employee

Package Name : Full Body Health Checkup Male Below 40

Location : VARANASI, Uttar Pradesh-221002

Contact Details : 9811270598

Booking Date : 01-12-2022

Appointment Date: 24-12-2022

# Instructions to undergo Health Check:

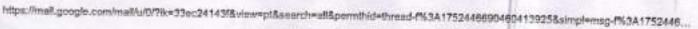
- Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- Bring urine sample in a container if possible (containers are available at the Health Check centre).
- Please bring all your medical prescriptions and previous health medical records with you.
- Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

#### For Women:

- Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
- 2. It is advisable not to undergo any Health Check during menstrual cycle.

We request you to facilitate the employee on priority.

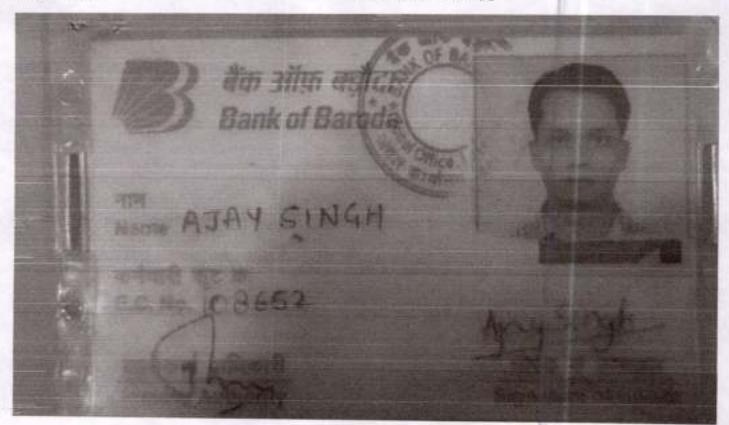






A 75/3 1270548
24/12/2022









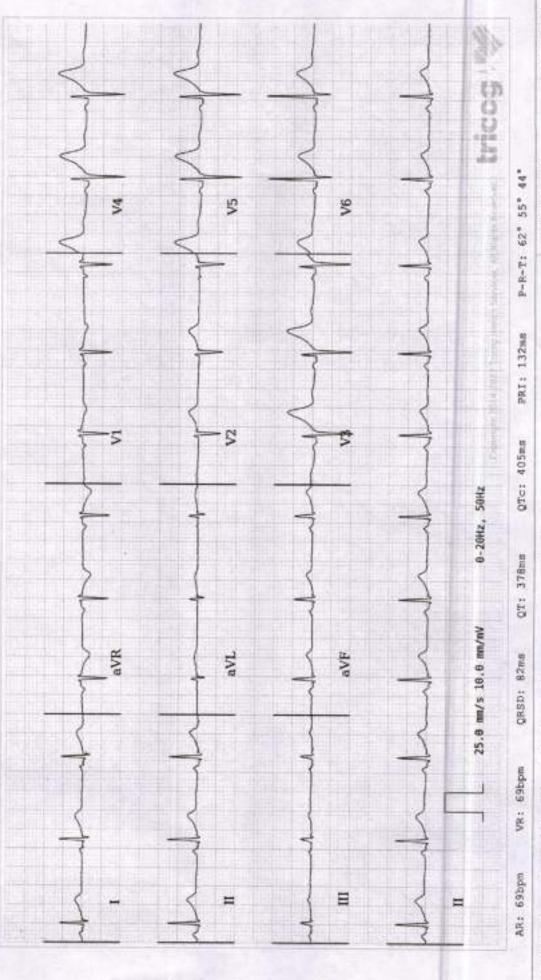
# Chandan Diagnostic

31/Male Age / Gender:

CDCA0240392223 Patient ID:

Mr.AJAY SINGH Patient Name:

Date and Time: 24th Dec 22 10:41 AM



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

Discriminant Analysis in this report is hased on ECG above and cheesal cody by small as an adjusct to clinical history, symptoms and results of other invasive and ness incurse texts and used to uniquened by a qualified physicism

AUTHORIZED BY

Dr. Chart MD, DM: Chelibley

63382

REPORTED BY

Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road

Ph: 9235432707,

CIN: U85110DL2003PLC308206

Patient Name : 24/Dec/2022 10:03:08 : Mr.AJAY SINGH Registered On Age/Gender : 31 Y 0 M 0 D /M Collected : 24/Dec/2022 10:23:43 UHID/MR NO : CDCA.0000099208 Received : 24/Dec/2022 10:36:04 Visit ID : CDCA0240392223 Reported : 24/Dec/2022 14:49:58 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				
Blood Group	В			
Rh ( Anti-D)	POSITIVE			
Complete Blood Count (CBC) * , Whole Bloo	d			
Haemoglobin	15.30	g/dl	1 Day- 14.5-22.5 g/dl	
	_5.55	8/ 5.	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)	6,000.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils )	54.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	40.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	4.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	2.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE
ESR				
Observed	22.00	Mm for 1st hr.		
Corrected	18.00	Mm for 1st hr.	< 9	
PCV (HCT)	45.00	%	40-54	
Platelet count				
Platelet Count	1.0	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)	Nr	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.16	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	15.20	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	5.00	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE

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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	90.00	fl	80-100	CALCULATED PARAMETER
MCH	30.60	pg	28-35	CALCULATED PARAMETER
MCHC	34.00	%	30-38	CALCULATED PARAMETER
RDW-CV	12.60	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	43.40	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,240.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	120.00	/cu mm	40-440	



Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road

Ph: 9235432707,

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Patient Name : Mr.AJAY SINGH Registered On : 24/Dec/2022 10:03:09 Collected Age/Gender : 31 Y 0 M 0 D /M : 24/Dec/2022 15:47:09 UHID/MR NO : CDCA.0000099208 Received : 24/Dec/2022 15:52:38 Visit ID : CDCA0240392223 Reported : 24/Dec/2022 17:02:01 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	111.82	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.

Glucose PP \* 130.43 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.



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Patient Name : Mr.AJAY SINGH Registered On : 24/Dec/2022 10:03:09 Age/Gender : 31 Y 0 M 0 D /M Collected : 24/Dec/2022 10:23:43 UHID/MR NO : CDCA.0000099208 Received : 24/Dec/2022 16:24:57 Visit ID : CDCA0240392223 Reported : 24/Dec/2022 18:15:23 Ref Doctor : Final Report : Dr.Mediwheel - Arcofemi Health Care Ltd. Status

#### **DEPARTMENT OF BIOCHEMISTRY**

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

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

Glycosylated Haemoglobin (HbA1c)	5.40	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	36.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	108	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.

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

<sup>\*</sup>High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

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

#### **Clinical Implications:**

<sup>\*\*</sup>Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

<sup>\*</sup>Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

<sup>\*</sup>With optimal control, the HbA 1c moves toward normal levels.

<sup>\*</sup>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 & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

- 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.





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#### **DEPARTMENT OF BIOCHEMISTRY**

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

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS						
Test Name	Result	Unit	Bio. Ref. Interval	Method		
BUN (Blood Urea Nitrogen) * Sample:Serum	14.90	mg/dL	7.0-23.0	CALCULATED		
Creatinine * Sample:Serum	0.89	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20- 275 Female-20-320	MODIFIED JAFFES		
Uric Acid * Sample:Serum	6.30	mg/dl	3.4-7.0	URICASE		
LFT (WITH GAMMA GT) * , Serum						
SGOT / Aspartate Aminotransferase (AST)	27.30	U/L	< 35	IFCC WITHOUT P5P		
SGPT / Alanine Aminotransferase (ALT)	31.70	U/L	< 40	IFCC WITHOUT P5P		
Gamma GT (GGT)	23.87	IU/L	11-50	OPTIMIZED SZAZING		
Protein	6.76	gm/dl	6.2-8.0	BIRUET		
Albumin	4.30	gm/dl	3.8-5.4	B.C.G.		
Globulin	2.46	gm/dl	1.8-3.6	CALCULATED		
A:G Ratio	1.75		1.1-2.0	CALCULATED		
Alkaline Phosphatase (Total)	114.94	U/L	42.0-165.0	IFCC METHOD		
Bilirubin (Total)	1.17	mg/dl	0.3-1.2	JENDRASSIK & GROF		
Bilirubin (Direct)	0.34	mg/dl	< 0.30	JENDRASSIK & GROF		
Bilirubin (Indirect)	0.83	mg/dl	< 0.8	JENDRASSIK & GROF		
LIPID PROFILE ( MINI ) * , Serum						
Cholesterol (Total)	210.00	mg/dl	<200 Desirable 200-239 Borderline Hig > 240 High	CHOD-PAP gh		
HDL Cholesterol (Good Cholesterol)	69.66	mg/dl	30-70	DIRECT ENZYMATIC		
VLDL	39.30	mg/dl	10-33	CALCULATED		
Triglycerides	196.50	mg/dl	< 150 Normal 150-199 Borderline Hig	GPO-PAP gh		
			200-499 High >500 Very High	P		



Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road

Ph: 9235432707,

CIN: U85110DL2003PLC308206

: 24/Dec/2022 10:03:09 Patient Name : Mr.AJAY SINGH Registered On Age/Gender : 31 Y 0 M 0 D /M Collected : 24/Dec/2022 15:48:33 UHID/MR NO : CDCA.0000099208 Received : 24/Dec/2022 16:07:10 Visit ID : CDCA0240392223 Reported : 24/Dec/2022 17:08:47 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
JRINE EXAMINATION, ROUTINE * ,	Urine			
Color	LIGHT YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic (5.0)			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			
Microscopic Examination:				
Epithelial cells	OCCASIONAL			MICROSCOPIC EXAMINATION
Pus cells	OCCASIONAL			
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			
SUGAR, FASTING STAGE * , Urine				
Sugar, Fasting stage	ABSENT	gms%		
Interpretation:				

#### **Interpretation:**

(+) < 0.5 (++) 0.5-1.0 (+++) 1-2

(++++) > 2

Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road

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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, PP STAGE \* ,** Urine

Sugar, PP Stage ABSENT

**Interpretation:** 

(+) < 0.5 gms%

(++) 0.5-1.0 gms%

(+++) 1-2 gms%

(++++) > 2 gms%



Add: M-214/215,Sec G Lda Colony Near Power House Chauraha Kanpur Road Ph: 9235432707,

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#### DEPARTMENT OF IMMUNOLOGY

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

Test Name	Result	Unit I	Bio. Ref. Interval	Method
THYROID PROFILE - TOTAL **, Serum				
T3, Total (tri-iodothyronine)	126.62	ng/dl 8	34.61–201.7	CLIA
T4, Total (Thyroxine)	9.60	ug/dl 3	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	2.50	μIU/mL (	0.27 - 5.5	CLIA
Interpretation:				
-		0.3-4.5 μIU/mL	First Trimesto	er
		$0.5$ - $4.6$ $\mu$ IU/mL	Second Trime	ester
		0.8-5.2 $\mu$ IU/mL	Third Trimest	ter
		0.5-8.9 μIU/mL		55-87 Years
		0.7-27 µIU/mL		28-36 Week
		2.3-13.2 μIU/mL		
		0.7-64 μIU/mL	,	<i>'</i>
		1-39 μIU/m		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.





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Patient Name : Mr.AJAY SINGH Registered On : 24/Dec/2022 10:03:10

 Age/Gender
 : 31 Y 0 M 0 D /M
 Collected
 : N/A

 UHID/MR NO
 : CDCA.0000099208
 Received
 : N/A

Visit ID : CDCA0240392223 Reported : 24/Dec/2022 16:57:57

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 \*

# (300 mA COMPUTERISED UNIT SPOT FILM DEVICE)

#### **CHEST P-A VIEW**

- Soft tissue shadow appears normal.
- Bony cage is normal.
- Diaphragmatic shadows are normal on both sides.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Pulmonary parenchyma did not reveal any significant lesion.

#### IMPRESSION

• NO SIGNIFICANT RADIOLOGICAL ABNORMALITY SEEN ON PRESENT STUDY.





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Visit ID : CDCA0240392223 Reported : 24/Dec/2022 14:13:50

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**

• The liver is normal in size **14.0 cm in longitudinal span** and has a normal homogenous echotexture. No focal lesion is seen.

#### **PORTAL SYSTEM**

- The intra hepatic portal channels are normal.
- Portal vein is normal at the porta.
- Porta hepatis is normal.

### **BILIARY SYSTEM**

- The intra-hepatic biliary radicles are normal.
- Common duct are normal (4.4 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 ( 10.5 x 4.5 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 ( 10.4 x 4.4 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.

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 Age/Gender
 : 31 Y 0 M 0 D /M
 Collected
 : N/A

 UHID/MR NO
 : CDCA.0000099208
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#### **DEPARTMENT OF ULTRASOUND**

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

• Corticomedullary demarcation is clear. Renal respiratory excursions are normal.

#### **SPLEEN**

• The spleen is normal in size (7.7 cm), and has a homogenous echotexture.

#### **ILIAC FOSSA**

• Scan over the iliac fossa does not reveal any fluid collection or mass.

#### **URINARY BLADDER**

• The urinary bladder is normal. Bladder wall is normal in thickness and regular.

# **PROSTATE**

• The prostate gland is normal in texture and size, measures 2.8 x 2.7 x 2.6 cm (vol-10.5 cc).

#### **IMPRESSION**

• No significant sonological abnormality is seen on this study.

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

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

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG





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\*\*