



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 spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	SHRADDHA MODI
DATE OF BIRTH	20-08-1966
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	01-08-2022
BOOKING REFERENCE NO.	22S70729100022414S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. MODI BALA JI
EMPLOYEE EC NO.	70729
EMPLOYEE DESIGNATION	UNIVERSAL TELLER
EMPLOYEE PLACE OF WORK	MAUNATH BHANJAN, MIRZAHADIPURA
EMPLOYEE BIRTHDATE	24-07-1963

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 **26-07-2022** till **31-03-2023**. 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's spouse 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))



भारत सरकार  
Government of India



Download Date: 13/07/2021



श्रद्धा मोदी  
Shradha Modi  
जन्म तिथि/DOB: 20/08/1966  
महिला/ FEMALE

Issue Date: 24/11/2020

3889 0484 1786

VID : 9106 6560 8085 8782

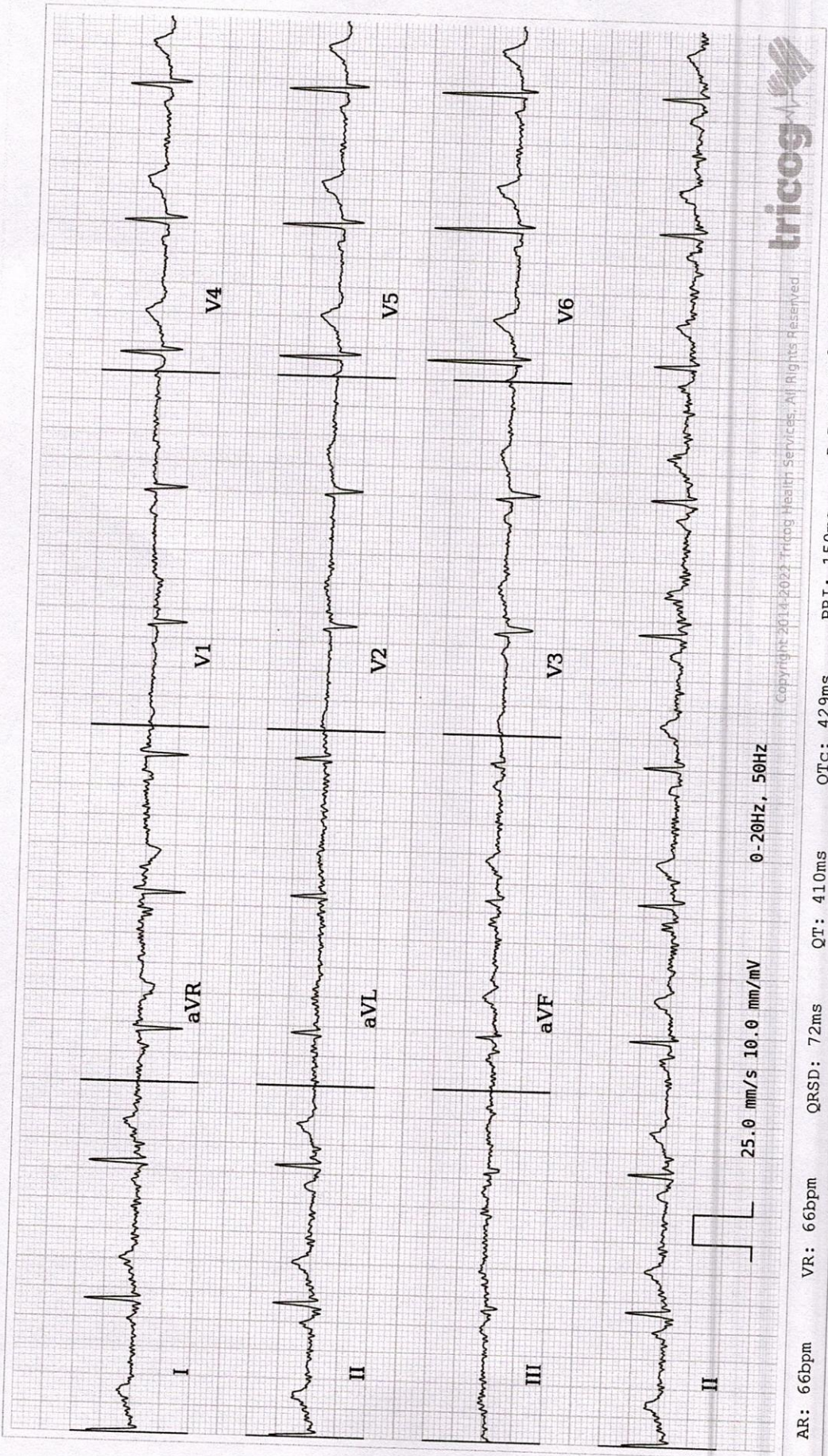
मेरा आधार, मेरी पहचान

श्रद्धा मोदी



# Indra Diagnostic Centre, Indira Nagar

Age / Gender: 56/Female  
 Patient ID: IDC00130852223  
 Patient Name: Mrs.SHRADHA MODI  
 Date and Time: 1st Aug 22 9:16 AM



AR: 66bpm    VR: 66bpm    QRS: 72ms    QT: 410ms    QTc: 429ms    PRI: 150ms    P-R-T: 67° 18° 32°  
 25.0 mm/s 10.0 mm/mV    0-20Hz, 50Hz

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

**REPORTED BY**  
 Dr. Adithya R  
 KMC129110

**AUTHORIZED BY**  
 Dr. Chari  
 MD, DM: Cardiology  
 63382

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.



# INDRA DIAGNOSTIC CENTRE

Add: Indra Deep Complex, Sanjay Gandhi Puram, Faizabad Road, Indira Nagar  
Ph: 7706041643,7706041644  
CIN : U85196UP1992PLC014075



Patient Name	: Mrs.SHRADHA MODI	Registered On	: 01/Aug/2022 07:50:50
Age/Gender	: 56 Y 0 M 0 D /F	Collected	: 01/Aug/2022 08:17:30
UHID/MR NO	: CVAR.0000020713	Received	: 01/Aug/2022 13:11:11
Visit ID	: IDCD0130852223	Reported	: 01/Aug/2022 13:42:48
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF HAEMATOLOGY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### Blood Group (ABO & Rh typing) \*\*, Blood

Blood Group	B
Rh ( Anti-D)	POSITIVE

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

Haemoglobin	13.30	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
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TLC (WBC)	7,500.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
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#### DLC

Polymorphs (Neutrophils)	51.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	36.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	5.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	8.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE

#### ESR

Observed	20.00	Mm for 1st hr.	
Corrected	16.00	Mm for 1st hr.	< 20
PCV (HCT)	40.00	cc %	40-54

#### Platelet count

Platelet Count	2.0	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.20	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	44.40	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.23	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	12.60	fL	6.5-12.0	ELECTRONIC IMPEDANCE

#### RBC Count

RBC Count	4.58	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE
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### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>Blood Indices (MCV, MCH, MCHC)</b>				
MCV	86.70	fl	80-100	CALCULATED PARAMETER
MCH	29.10	pg	28-35	CALCULATED PARAMETER
MCHC	33.50	%	30-38	CALCULATED PARAMETER
RDW-CV	13.20	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	41.60	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,825.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	<b>600.00</b>	/cu mm	40-440	



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





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Patient Name	: Mrs.SHRADHA MODI	Registered On	: 01/Aug/2022 07:50:50
Age/Gender	: 56 Y 0 M 0 D /F	Collected	: 01/Aug/2022 14:52:12
UHID/MR NO	: CVAR.0000020713	Received	: 01/Aug/2022 15:50:07
Visit ID	: IDCD0130852223	Reported	: 01/Aug/2022 16:30:43
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### GLUCOSE FASTING , Plasma

Glucose Fasting	86.40	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD
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#### Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- 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 diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

#### Glucose PP

Sample:Plasma After Meal

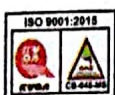
107.10	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD
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#### Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- 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 diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.



Dr. Shoaib Irfan (MBBS, MD, PDCC)





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Age/Gender	: 56 Y 0 M 0 D /F	Collected	: 01/Aug/2022 08:17:30
UHID/MR NO	: CVAR.0000020713	Received	: 01/Aug/2022 12:27:40
Visit ID	: IDCD0130852223	Reported	: 01/Aug/2022 14:01:53
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

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

Glycosylated Haemoglobin (HbA1c)	6.40	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	46.00	mmol/mol/IFCC		
Estimated Average Glucose (eAG)	137	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 management.

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.

\*\*Some danger of hypoglycemic reaction in Type 1diabetics. 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 FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### 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 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)







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Age/Gender	: 56 Y 0 M 0 D /F	Collected	: 01/Aug/2022 08:17:29
UHID/MR NO	: CVAR.0000020713	Received	: 01/Aug/2022 10:10:44
Visit ID	: IDCD0130852223	Reported	: 01/Aug/2022 12:29:20
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>BUN (Blood Urea Nitrogen)</b> <i>Sample:Serum</i>	18.45	mg/dL	7.0-23.0	CALCULATED
<b>Creatinine</b> <i>Sample:Serum</i>	0.95	mg/dl	0.5-1.3	MODIFIED JAFFES
<b>e-GFR (Estimated Glomerular Filtration Rate)</b> <i>Sample:Serum</i>	60.90	ml/min/1.73m <sup>2</sup>	90-120 Normal - 60-89 Near Normal	CALCULATED
<b>Uric Acid</b> <i>Sample:Serum</i>	3.92	mg/dl	2.5-6.0	URICASE
<b>LFT (WITH GAMMA GT) * , Serum</b>				
SGOT / Aspartate Aminotransferase (AST)	19.60	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	13.70	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	26.30	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.81	gm/dl	6.2-8.0	BIRUET
Albumin	4.08	gm/dl	3.8-5.4	B.C.G.
Globulin	2.73	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.49		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	121.09	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.87	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.25	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.62	mg/dl	< 0.8	JENDRASSIK & GROF
<b>LIPID PROFILE ( MINI ) , Serum</b>				
Cholesterol (Total)	192.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	52.90	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	110	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	29.20	mg/dl	10-33	CALCULATED
Triglycerides	146.00	mg/dl	< 150 Normal 150-199 Borderline High	GPO-PAP





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Age/Gender	: 56 Y 0 M 0 D /F	Collected	: 01/Aug/2022 08:17:29
UHID/MR NO	: CVAR.0000020713	Received	: 01/Aug/2022 10:10:44
Visit ID	: IDCD0130852223	Reported	: 01/Aug/2022 12:29:20
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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200-499 High  
>500 Very High



Dr. Shoaib Irfan (MBBS, MD, PDCC)





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Patient Name	: Mrs.SHRADHA MODI	Registered On	: 01/Aug/2022 07:50:50
Age/Gender	: 56 Y 0 M 0 D /F	Collected	: 01/Aug/2022 08:27:56
UHID/MR NO	: CVAR.0000020713	Received	: 01/Aug/2022 13:12:32
Visit ID	: IDCD0130852223	Reported	: 01/Aug/2022 13:32:02
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
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#### URINE EXAMINATION, ROUTINE \*\*, Urine

Color	PALE YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic ( 6.0 )			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			
<b>Microscopic Examination:</b>				
Epithelial cells	1-3/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			



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





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Age/Gender	: 56 Y 0 M 0 D /F	Collected	: 01/Aug/2022 15:28:37
UHID/MR NO	: CVAR.0000020713	Received	: 01/Aug/2022 16:22:58
Visit ID	: IDCD0130852223	Reported	: 01/Aug/2022 17:16:31
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
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#### STOOL, ROUTINE EXAMINATION \* , Stool

Color	BROWNISH
Consistency	SEMI SOLID
Reaction (PH)	Acidic ( 6.0 )
Mucus	ABSENT
Blood	ABSENT
Worm	ABSENT
Pus cells	ABSENT
RBCs	ABSENT
Ova	ABSENT
Cysts	ABSENT
Others	ABSENT

#### SUGAR, FASTING STAGE \* , Urine

Sugar, Fasting stage	ABSENT	gms%
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#### Interpretation:

(+) < 0.5  
 (++) 0.5-1.0  
 (+++) 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. Shoaib Irfan (MBBS, MD, PDCC)





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UHID/MR NO	: CVAR.0000020713	Received	: 01/Aug/2022 12:16:02
Visit ID	: IDCD0130852223	Reported	: 01/Aug/2022 13:34:02
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF IMMUNOLOGY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### THYROID PROFILE - TOTAL \*\*, Serum

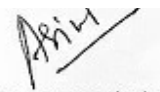
T3, Total (tri-iodothyronine)	136.63	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	9.36	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	3.67	μIU/mL	0.27 - 5.5	CLIA

#### 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.



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





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## DEPARTMENT OF X-RAY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

#### X-RAY DIGITAL CHEST PA \*

(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

#### DIGITAL CHEST P-A VIEW

(Left sided rotation seen)

- Left costo-phrenic angle obscured by overlying rib shadows.
- Soft tissue shadow appears normal.
- Bony cage is normal.
- Diaphragmatic shadows are normal on both sides.
- 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.

Please correlate clinically

Typed by -VINAY

(This report is a professional opinion & not a diagnosis Kindly intimate us immediately or within 7 days for any reporting / typing error or any query regarding radiological correlation of clinical findings).



Dr. Anil Kumar Verma  
(MBBS,DMRD)





# INDRA DIAGNOSTIC CENTRE

Add: Indra Deep Complex, Sanjay Gandhi Puram, Faizabad Road, Indira Nagar  
Ph: 7706041643, 7706041644  
CIN : U85196UP1992PLC014075



Patient Name	: Mrs.SHRADHA MODI	Registered On	: 01/Aug/2022 07:50:52
Age/Gender	: 56 Y 0 M 0 D /F	Collected	: N/A
UHID/MR NO	: CVAR.0000020713	Received	: N/A
Visit ID	: IDCD0130852223	Reported	: 01/Aug/2022 15:38:23
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF ULTRASOUND

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

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

##### LIVER

- Liver is normal in size (~ 148 mm) with grade-I fatty changes with few areas of focal fat sparing.
- The intra-hepatic biliary radicles are normal.
- Portal vein is normal in caliber.

##### GALL BLADDER & CBD

- The gall bladder is normal in size and has regular walls. Lumen of the gall bladder is anechoic. No wall thickening or pericholecystic fluid noted.
- Visualised proximal common bile duct is normal in caliber.

##### PANCREAS

- The pancreas is normal in size and shape and has a normal homogenous echotexture. Pancreatic duct is not dilated.

##### KIDNEYS

- Both the kidneys are normal in size and echotexture.
- Atleast two small concretions seen at mid & lower polar region of right kidney.
- The collecting system of both the kidneys is normal and cortico-medullary demarcation is clear.

##### SPLEEN

- The spleen is normal in size and has a normal homogenous echo-texture.

##### LYMPH NODES

- No significant lymph node noted.





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## DEPARTMENT OF ULTRASOUND

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

#### URINARY BLADDER

- Urinary bladder is collapsed. Patient lied down third time unable to hold urine.
- Pelvic organ could not be commented upon. Review with full bladder.

#### IMPRESSION

- Grade-I fatty changes in liver.

Typed by- shanaya

(This report is an expert opinion & not a diagnosis. Kindly intimate us immediately or within 7 days for any reporting / typing error or any query regarding sonographic correlation of clinical findings)

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

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

Result/s to Follow:

ECG / EKG, Tread Mill Test (TMT), PAP SMEAR FOR CYTOLOGICAL EXAMINATION



Dr. Anil Kumar Verma  
(MBBS, DMRD)

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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Home Sample Collection  
1800-419-0002

Mar. 2018