



INDRA DIAGNOSTIC CENTRE

Add: 24/22, Vrindawan Bhawan, Karachi Khana, Kanpur
Ph: 9235432757,
CIN : U85110DL2003LC308206



Patient Name	: Mr.AJAY KUMAR DWIVEDI - BOBE5778	Registered On	: 18/Dec/2021 11:57:10
Age/Gender	: 53 Y 7 M 9 D /M	Collected	: 18/Dec/2021 12:10:10
UHID/MR NO	: IKNP.0000015943	Received	: 18/Dec/2021 12:10:30
Visit ID	: IKNP0062532122	Reported	: 18/Dec/2021 17:26:14
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

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

Blood Group	A
Rh (Anti-D)	POSITIVE

COMPLETE BLOOD COUNT (CBC) * , Blood

Haemoglobin	16.10	g/dl	Male- 13.5-17.5 g/dl Female-12.0-15.5 g/dl	
TLC (WBC)	8,000.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils)	53.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	40.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	5.00	%	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	0.00	Mm for 1st hr.	< 9	
PCV (HCT)	48.00	cc %	40-54	
Platelet count				
Platelet Count	2.74	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.00	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	50.40	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.36	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	13.30	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	5.24	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	92.20	fl	80-100	CALCULATED PARAMETER
MCH	30.80	pg	28-35	CALCULATED PARAMETER
MCHC	33.30	%	30-38	CALCULATED PARAMETER
RDW	13.40	%	11-16	ELEC
RDW-CV	44.30	fL	35-60	ELEC
Neutrophils Count	4,240.00	/cu mm	3000-7000	
Eosinophils Count (AEC)	160.00	/cu mm	40-440	



Dr. Seema Nagar(MD Path)





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UHID/MR NO	: IKNP.0000015943	Received	: 18/Dec/2021 12:10:30
Visit ID	: IKNP0062532122	Reported	: 18/Dec/2021 14:30:51
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

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

Glucose Fasting	86.50	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.



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UHID/MR NO	: IKNP.0000015943	Received	: 19/Dec/2021 12:53:02
Visit ID	: IKNP0062532122	Reported	: 19/Dec/2021 13:39:31
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Glucose PP <i>Sample: Plasma After Meal</i>	178.20	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD

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.



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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)	5.20	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	33.00	mmol/mol/IFCC		
Estimated Average Glucose (eAG)	102	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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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.

BUN (Blood Urea Nitrogen) * Sample:Serum	7.60	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	0.99	mg/dl	0.7-1.3	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) Sample:Serum	88.30	ml/min/1.73m ²	90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid Sample:Serum	7.37	mg/dl	3.4-7.0	URICASE
L.F.T.(WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	17.30	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	27.40	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	23.00	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.59	gm/dl	6.2-8.0	BIRUET
Albumin	4.36	gm/dl	3.8-5.4	B.C.G.
Globulin	2.23	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.96		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	42.00	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.46	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.19	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.27	mg/dl	< 0.8	JENDRASSIK & GROF





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DEPARTMENT OF BIOCHEMISTRY

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LIPID PROFILE (MINI) * , Serum

Cholesterol (Total)	160.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	43.20	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	97	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	20.14	mg/dl	10-33	CALCULATED
Triglycerides	100.70	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP



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Visit ID	: IKNP0062532122	Reported	: 18/Dec/2021 17:51:07
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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URINE EXAMINATION, ROUTINE * , Urine

Color	LIGHT YELLOW			
Specific Gravity	1.015			
Reaction PH	Acidic (6.5)			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	1-2/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	1-2/h.p.f			MICROSCOPIC EXAMINATION
RBCs	OCCASIONAL			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
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





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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
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Dr. Seema Nagar(MD Path)





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UHID/MR NO	: IKNP.0000015943	Received	: 19/Dec/2021 12:53:02
Visit ID	: IKNP0062532122	Reported	: 19/Dec/2021 13:17:11
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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SUGAR, PP STAGE * , Urine

Sugar, PP Stage ABSENT

Interpretation:

- (+) < 0.5 gms%
- (++) 0.5-1.0 gms%
- (+++) 1-2 gms%
- (++++) > 2 gms%



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UHID/MR NO	: IKNP.0000015943	Received	: 18/Dec/2021 12:10:30
Visit ID	: IKNP0062532122	Reported	: 18/Dec/2021 16:47:55
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

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

T3, Total (tri-iodothyronine)	102.30	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	6.24	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	2.42	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.



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Patient Name	: Mr.AJAY KUMAR DWIVEDI - BOBE5778	Registered On	: 18/Dec/2021 11:57:11
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UHID/MR NO	: IKNP.0000015943	Received	: N/A
Visit ID	: IKNP0062532122	Reported	: 20/Dec/2021 12:49:54
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA *

(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

DIGITAL 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 : N O R M A L S K I A G R A M

*** End Of Report ***

(*) Test not done under NABL accredited Scope

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG, ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER)



Dr Raveesh Chandra Roy (MD-Radio)

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



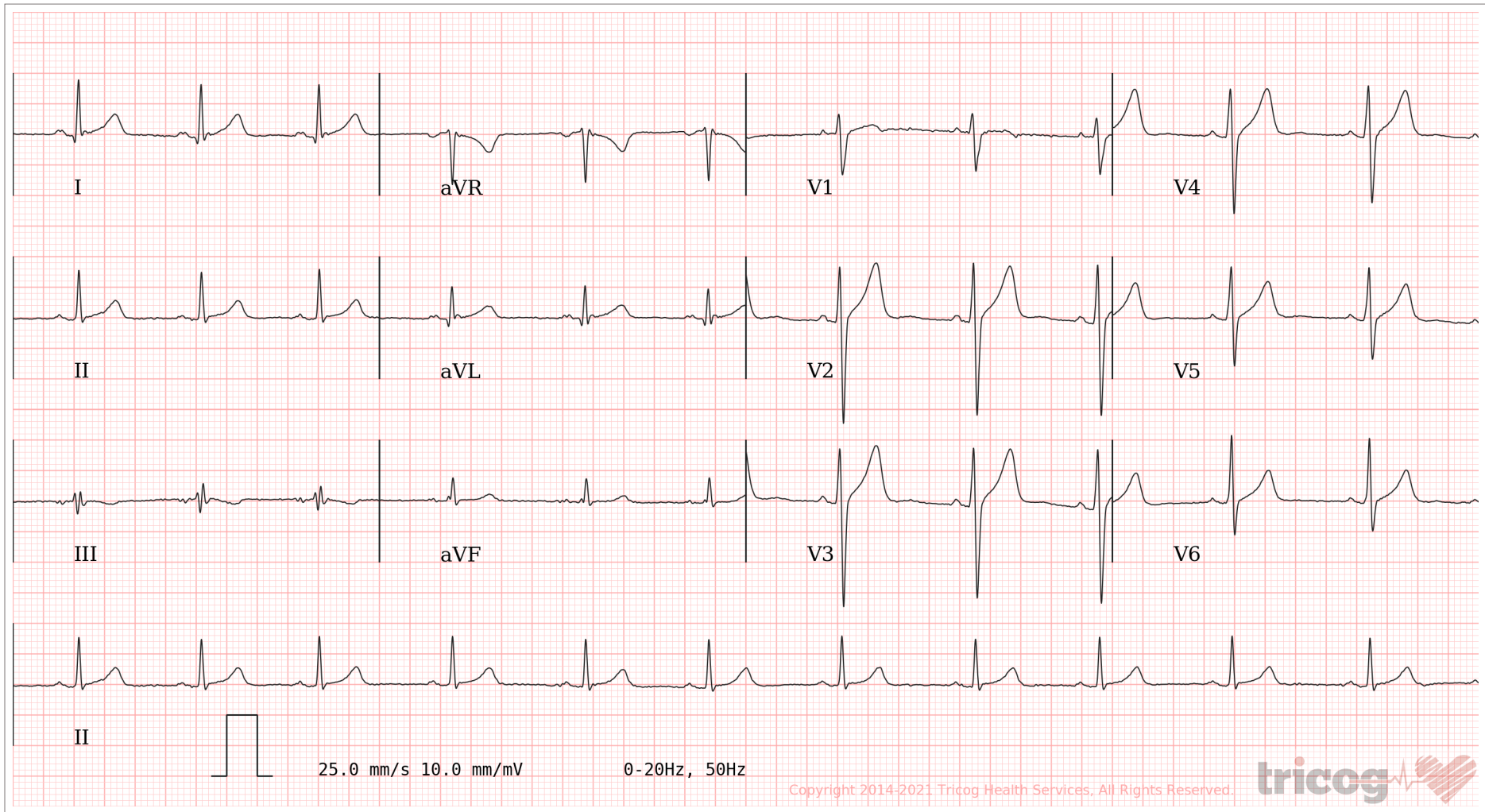
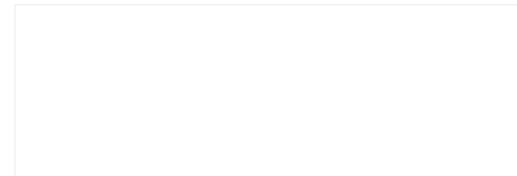


Age / Gender: 53/Male

Date and Time: 20th Dec 21 10:23 AM

Patient ID: IKNP0062532122

Patient Name: Mr.AJAY KUMAR DWIVEDI - BOBE5778



AR: 71 bpm VR: 71 bpm QRSD: 86 ms QT: 366 ms QTc: 397 ms PRI: 122 ms P-R-T: 9° 33° 19°

ECG Within Normal Limits: Sinus Rhythm, Normal Axis. Check for proper lead placement between arms & legs. Possible LA/LL interchange. Please correlate clinically.

AUTHORIZED BY

Dr. Charit
MD, DM: Cardiology

63382

REPORTED BY

Dr. Bharati R

72470



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. DWIVEDI AJAY KUMAR
EC NO.	76999
DESIGNATION	HEAD CASHIER "E" _II
PLACE OF WORK	KANPUR, JAGAIPURWA
BIRTHDATE	10-05-1968
PROPOSED DATE OF HEALTH CHECKUP	19-12-2021
BOOKING REFERENCE NO.	21D76999100008268E

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 **18-12-2021** till **31-03-2022**. 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))



भारतीय विशिष्ट पहचान प्राधिकरण
भारत सरकार
Unique Identification Authority of India
Government of India



E-Aadhaar Letter

नामांकन क्रमांक/Enrolment No.: 1119/60064/03588

Date: 22/08/2015

Ajay Kumar Dwivedi (अजय कुमार द्विवेदी)
S/O Shiv Shanker Dwivedi, 110/1, AYODHYA VIHAR, G
T ROAD, OPP. PUSHP HONDA, CHAKERI
MOD. POST-ROOMA, KANPUR NAGAR, Sarsaul,
Kanpur Nagar,
Uttar Pradesh - 209402

सूचना

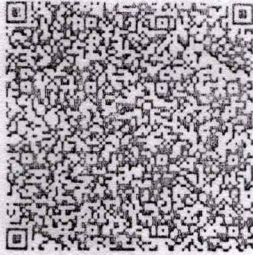
- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- पहचान का प्रमाण ऑनलाइन ऑथेंटिकेशन द्वारा प्राप्त करें।
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- To establish identity, authenticate online.
- This is electronically generated letter.

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9470 5100 9353



आधार-आम आदमी का अधिकार

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- आधार देश भर में मान्य है।
- आधार के लिए आपको एक ही बार नामांकन दर्ज करवाने की आवश्यकता है।
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Dr. K. C. BHARADWAJ
M.B.B.S., D. CARD
Reg. No. 32749



भारत सरकार
GOVERNMENT OF INDIA



अजय कुमार द्विवेदी
Ajay Kumar Dwivedi
जन्म तिथि/DOB: 10/05/1968
पुरुष / MALE



भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:
S/O शिव शंकर द्विवेदी,
110/1, अयोध्या विहार, जी
टी रोड, अपो, पुष्प होंडा,
चकेरी मोड, पोस्ट-
रूमा, कानपुर नगर, सरसौल,
कानपुर नगर,
उत्तर प्रदेश - 209402

Address:
S/O Shiv Shanker Dwivedi, 110/1,
AYODHYA VIHAR, G T ROAD, OPP
PUSHP HONDA, CHAKERI
MOD. POST-ROOMA, KANPUR
NAGAR, Sarsaul, Kanpur Nagar
Uttar Pradesh - 209402

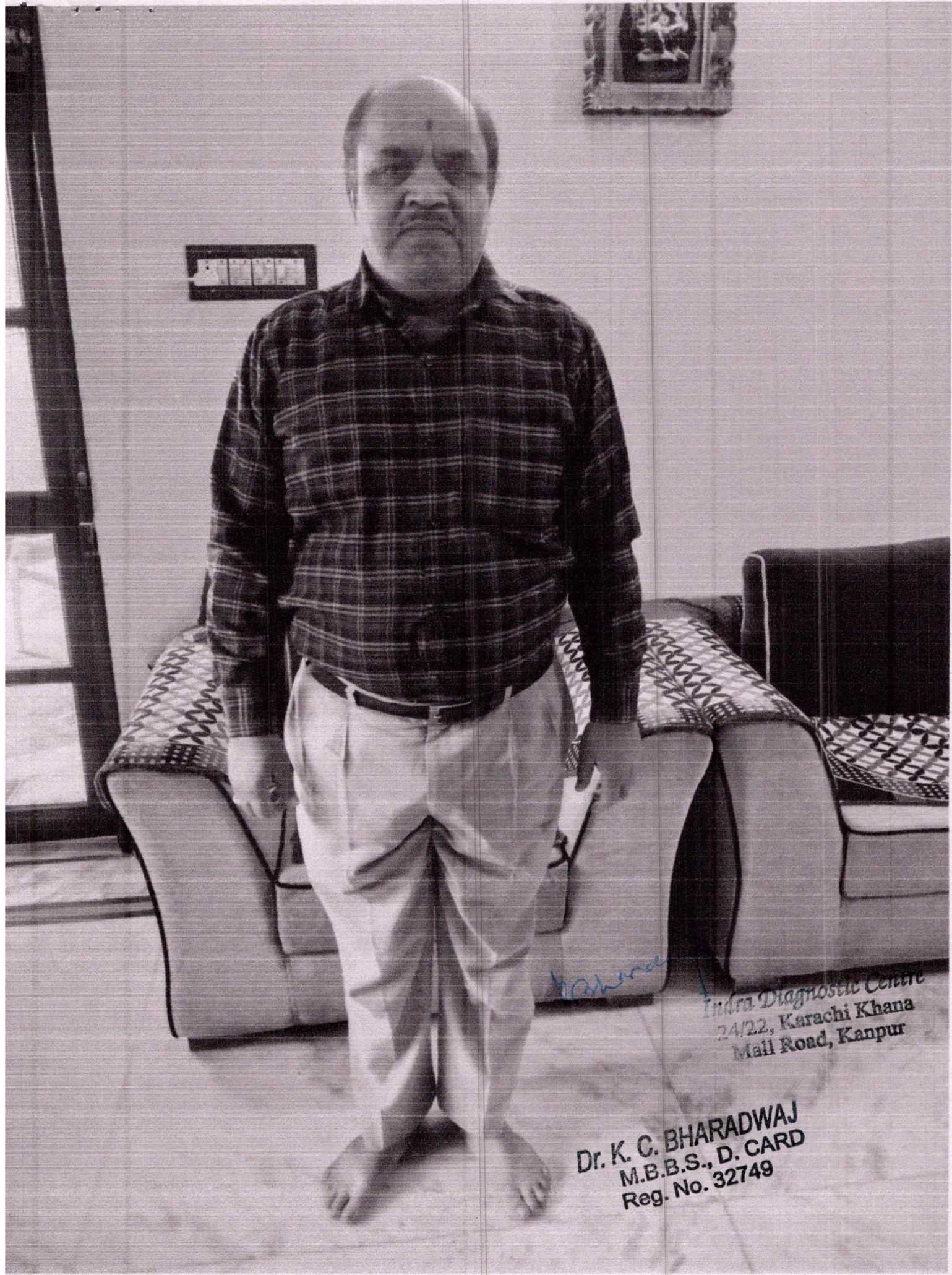
9470 5100 9353

9470 5100 9353

आधार-आम आदमी का अधिकार

Aadhaar-Aam Admi ka Adhikar

Indra Diagnostic Centre
24/22, Karachi Khana
Mall Road, Kanpur



Maharaja

Indra Diagnostic Centre
24/22, Karachi Khana
Mall Road, Kanpur

Dr. K. C. BHARADWAJ
M.B.B.S., D. CARD
Reg. No. 32749

DR. A.K. GUPTA

M.B.B.S., D.C.P., I.A.P.M., P.M.H.S.
Ex Chief Medical Superintendent
Senior Consultant

ASHMEE CARE
ULTRASOUND
&
CARDIO CENTRE

2D ECHO * COLOUR DOPPLER * ULTRASOUND * TMT * ECG

NAME OF PATIENT: MR. AJAY KUMAR DWIVEDI

AGE: 53 SEX: M

REF. BY: DR. I.D.C

DATE: 20-12-2021

ULTRASOUND REPORT WHOLE ABDOMEN

LIVER LIVER IS ENLARGED IN SIZE 167.5MM WITH FATTY CHANGES GRADE 1ST. NO FOCAL LESION SEEN. THE INTRA-HEPATIC BILIARY RADICALS ARE NORMAL. THE HEPATIC VEINS ARE NORMAL.

PORTAL VEIN NORMAL IN COURSE & CALIBER

GALL BLADDER OPERATED

CBD NORMAL IN COURSE & CALIBER

PANCREAS NORMAL IN SIZE, SHAPE AND ECHO TEXTURE. PANCREATIC DUCT IS NORMAL IN COURSE & CALIBER. NO FOCAL LESION SEEN

RT. KIDNEY NORMAL IN SIZE, POSITION AND AXIS. THE CORTICOMEDULLARY DIFFERENTIATION IS WELL MAINTAINED. NO CALCULUS/HYDRONEPHROSIS LESION SEEN

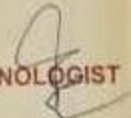
LT. KIDNEY NORMAL IN SIZE, POSITION AND AXIS. THE CORTICOMEDULLARY DIFFERENTIATION IS WELL MAINTAINED. NO CALCULUS/HYDRONEPHROSIS LESION SEEN

SPLEEN SPLEEN IS NORMAL IN SIZE 121.1MM. SPLENIC VEIN IS NORMAL IN DIAMETER

U. BLADDER NORMAL IN SIZE SHAPE AND OUTLINE. ITS WALL THICKNESS IS NORMAL. NO INTRALUMINAL MASS LESION/CALCULUS NOTED. RESIDUAL URINE VOLUME 4 ML

PROSTATE NORMAL IN SIZE & SHAPE WEIGHT 21.9 GM5. HOMOGENOUS ECHOTEXTURE

IMPRESSION HEPATOMEGALY WITH FATTY CHANGES GRADE 1ST


SONOLOGIST

DR. RACHIT GUPTA

Attending Cardiologist, MD (Physician)
PG Diploma in Clinical Cardiology

PNDT Registration No. PNDT/REG/94/2012

SHOP NO.37/54, CAPITAL TOWER, MESTON ROAD, KANPUR NAGAR - 208001 * M.: 9307775184

Note: This report is to help clinician for better patient management. Discrepancies due to technical or typing errors should be reported within three days for correction. No compensation liability stands.

NOT FOR MEDICO LEGAL PURPOSE





INDRA DIAGNOSTIC CENTRE

Add: 24/22, Vrindawan Bhawan, Karachi Khana, Kanpur
Ph: 9235432757,
CIN : U85110DL2003LC308206



Patient Name	: Mr.AJAY KUMAR DWIVEDI - BOBE5778	Registered On	: 18/Dec/2021 11:57:10
Age/Gender	: 53 Y 7 M 9 D /M	Collected	: 18/Dec/2021 12:10:10
UHID/MR NO	: IKNP.0000015943	Received	: 18/Dec/2021 12:10:30
Visit ID	: IKNP0062532122	Reported	: 18/Dec/2021 17:26:14
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

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

Blood Group	A
Rh (Anti-D)	POSITIVE

COMPLETE BLOOD COUNT (CBC) * , Blood

Haemoglobin	16.10	g/dl	Male- 13.5-17.5 g/dl Female-12.0-15.5 g/dl
TLC (WBC)	8,000.00	/Cu mm	4000-10000
DLC			
Polymorphs (Neutrophils)	53.00	%	55-70
Lymphocytes	40.00	%	25-40
Monocytes	5.00	%	3-5
Eosinophils	2.00	%	1-6
Basophils	0.00	%	< 1
ESR			
Observed	4.00	Mm for 1st hr.	
Corrected	0.00	Mm for 1st hr.	< 9
PCV (HCT)	48.00	cc %	40-54
Platelet count			
Platelet Count	2.74	LACS/cu mm	1.5-4.0
PDW (Platelet Distribution width)	16.00	fL	9-17
P-LCR (Platelet Large Cell Ratio)	50.40	%	35-60
PCT (Platelet Hematocrit)	0.36	%	0.108-0.282
MPV (Mean Platelet Volume)	13.30	fL	6.5-12.0
RBC Count			
RBC Count	5.24	Mill./cu mm	4.2-5.5
Blood Indices (MCV, MCH, MCHC)			
MCV	92.20	fl	80-100
MCH	30.80	pg	28-35
MCHC	33.30	%	30-38
RDW	13.40	%	11-16
PLT	44.30	fL	35-60
Neutrophils Count	4,240.00	/cu mm	3000-7000
Eosinophils Count (AEC)	160.00	/cu mm	40-440



Dr. Seema Nagar(MD Path)





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UHID/MR NO	: IKNP.0000015943	Received	: 18/Dec/2021 12:10:30
Visit ID	: IKNP0062532122	Reported	: 18/Dec/2021 14:30:51
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

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

Glucose Fasting	86.50	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.



Dr. Seema Nagar(MD Path)





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Age/Gender	: 53 Y 7 M 9 D /M	Collected	: 19/Dec/2021 12:52:34
UHID/MR NO	: IKNP.0000015943	Received	: 19/Dec/2021 12:53:02
Visit ID	: IKNP0062532122	Reported	: 19/Dec/2021 13:39:31
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Glucose PP <i>Sample: Plasma After Meal</i>	178.20	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD

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. Seema Nagar(MD Path)





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Visit ID	: IKNP0062532122	Reported	: 18/Dec/2021 14:32:35
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

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)	5.20	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	33.00	mmol/mol/IFCC		
Estimated Average Glucose (eAG)	102	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 MALE & FEMALE BELOW 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.

BUN (Blood Urea Nitrogen) * Sample:Serum	7.60	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	0.99	mg/dl	0.7-1.3	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) Sample:Serum	88.30	ml/min/1.73m ²	90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid Sample:Serum	7.37	mg/dl	3.4-7.0	URICASE
L.F.T.(WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	17.30	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	27.40	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	23.00	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.59	gm/dl	6.2-8.0	BIRUET
Albumin	4.36	gm/dl	3.8-5.4	B.C.G.
Globulin	2.23	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.96		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	42.00	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.46	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.19	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.27	mg/dl	< 0.8	JENDRASSIK & GROF





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Visit ID	: IKNP0062532122	Reported	: 18/Dec/2021 14:32:35
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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LIPID PROFILE (MINI) * , Serum

Cholesterol (Total)	160.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	43.20	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	97	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	20.14	mg/dl	10-33	CALCULATED
Triglycerides	100.70	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP



Dr. Seema Nagar(MD Path)





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UHID/MR NO	: IKNP.0000015943	Received	: 18/Dec/2021 12:10:30
Visit ID	: IKNP0062532122	Reported	: 18/Dec/2021 17:51:07
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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URINE EXAMINATION, ROUTINE * , Urine

Color	LIGHT YELLOW			
Specific Gravity	1.015			
Reaction PH	Acidic (6.5)			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	1-2/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	1-2/h.p.f			MICROSCOPIC EXAMINATION
RBCs	OCCASIONAL			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
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





INDRA DIAGNOSTIC CENTRE

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Patient Name	: Mr.AJAY KUMAR DWIVEDI - BOBE5778	Registered On	: 18/Dec/2021 11:57:10
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UHID/MR NO	: IKNP.0000015943	Received	: 18/Dec/2021 12:10:30
Visit ID	: IKNP0062532122	Reported	: 18/Dec/2021 17:51:07
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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Dr. Seema Nagar(MD Path)





INDRA DIAGNOSTIC CENTRE

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UHID/MR NO	: IKNP.0000015943	Received	: 19/Dec/2021 12:53:02
Visit ID	: IKNP0062532122	Reported	: 19/Dec/2021 13:17:11
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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SUGAR, PP STAGE * , Urine

Sugar, PP Stage	ABSENT
-----------------	--------

Interpretation:

- (+) < 0.5 gms%
- (++) 0.5-1.0 gms%
- (+++) 1-2 gms%
- (++++) > 2 gms%



Dr. Seema Nagar(MD Path)





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Age/Gender	: 53 Y 7 M 9 D /M	Collected	: 18/Dec/2021 12:10:10
UHID/MR NO	: IKNP.0000015943	Received	: 18/Dec/2021 12:10:30
Visit ID	: IKNP0062532122	Reported	: 18/Dec/2021 16:47:55
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

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

T3, Total (tri-iodothyronine)	102.30	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	6.24	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	2.42	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. Seema Nagar(MD Path)





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Patient Name	: Mr.AJAY KUMAR DWIVEDI - BOBE5778	Registered On	: 18/Dec/2021 11:57:11
Age/Gender	: 53 Y 7 M 9 D /M	Collected	: N/A
UHID/MR NO	: IKNP.0000015943	Received	: N/A
Visit ID	: IKNP0062532122	Reported	: 20/Dec/2021 12:49:54
Ref Doctor	: Dr.MediWheel Knp	Status	: Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA *

(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

DIGITAL 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 : N O R M A L S K I A G R A M

*** End Of Report ***

(*) Test not done under NABL accredited Scope

Result/s to Follow:

STOOL, ROUTINE EXAMINATION, ECG / EKG, ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER)



Dr Raveesh Chandra Roy (MD-Radio)

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



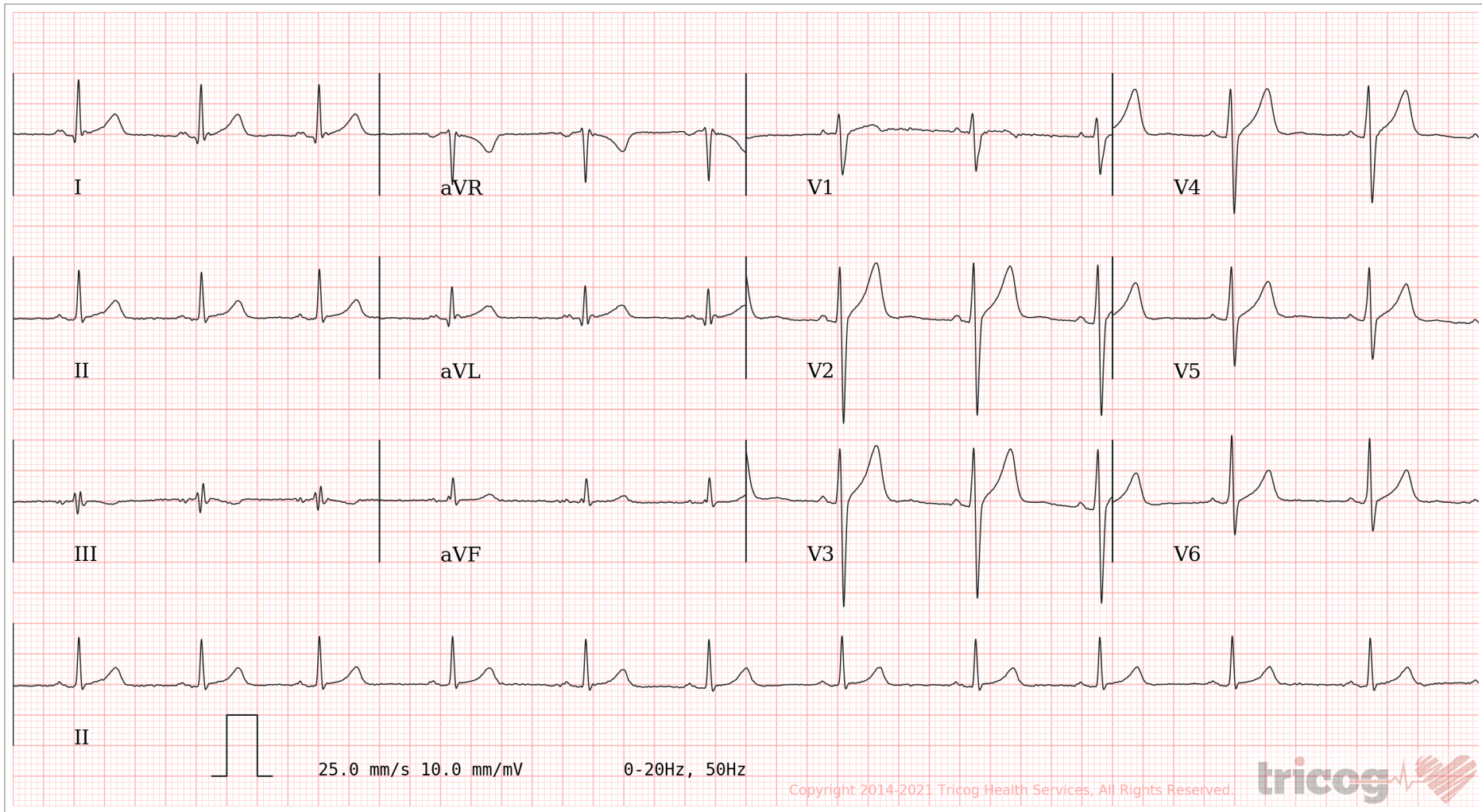
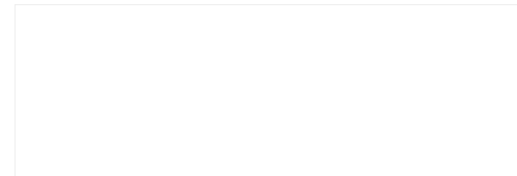


Age / Gender: 53/Male

Date and Time: 20th Dec 21 10:23 AM

Patient ID: IKNP0062532122

Patient Name: Mr.AJAY KUMAR DWIVEDI - BOBE5778



AR: 71 bpm VR: 71 bpm QRSD: 86 ms QT: 366 ms QTc: 397 ms PRI: 122 ms P-R-T: 9° 33° 19°

ECG Within Normal Limits: Sinus Rhythm, Normal Axis. Check for proper lead placement between arms & legs. Possible LA/LL interchange. Please correlate clinically.

AUTHORIZED BY

Dr. Charit
MD, DM: Cardiology

63382

REPORTED BY

Dr. Bharati R

72470



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. DWIVEDI AJAY KUMAR
EC NO.	76999
DESIGNATION	HEAD CASHIER "E" _II
PLACE OF WORK	KANPUR, JAGAIPURWA
BIRTHDATE	10-05-1968
PROPOSED DATE OF HEALTH CHECKUP	19-12-2021
BOOKING REFERENCE NO.	21D76999100008268E

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 **18-12-2021** till **31-03-2022**. 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))



भारतीय विशिष्ट पहचान प्राधिकरण
भारत सरकार
Unique Identification Authority of India
Government of India



E-Aadhaar Letter

नामांकन क्रमांक/Enrolment No.: 1119/60064/03588

Date: 22/08/2015

Ajay Kumar Dwivedi (अजय कुमार द्विवेदी)
S/O Shiv Shanker Dwivedi, 110/1, AYODHYA VIHAR, G
T ROAD, OPP. PUSHP HONDA, CHAKERI
MOD. POST-ROOMA, KANPUR NAGAR, Sarsaul,
Kanpur Nagar,
Uttar Pradesh - 209402

सूचना

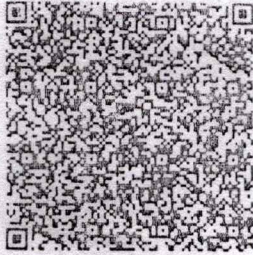
- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- पहचान का प्रमाण ऑनलाइन ऑथेंटिकेशन द्वारा प्राप्त करें।
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- To establish identity, authenticate online.
- This is electronically generated letter.

आपका आधार क्रमांक/Your Aadhaar No.:

9470 5100 9353



आधार-आम आदमी का अधिकार

1947
1833 500 1947

help@uidai.gov.in

www.uidai.gov.in

- आधार देश भर में मान्य है।
- आधार के लिए आपको एक ही बार नामांकन दर्ज करवाने की आवश्यकता है।
- कृपया अपना नवीनतम मोबाइल नंबर तथा ई-मेल पता दर्ज कराएं, इससे आपको विभिन्न सुविधाएं प्राप्त करने में सहायता मिलेगी।

- Aadhaar is valid throughout the country.
- You need to enroll only once for Aadhaar.
- Please update your mobile number and e-mail address. This will help you to use various services in future.

Dr. K. C. BHARADWAJ
M.B.B.S., D. CARD
Reg. No. 32749

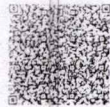
Signature Not Verified
Digitally signed by UNAIQUE
IDENTIFICATION AUTHORITY OF INDIA
Date: 2015.08.22 12:43:06 IST



भारत सरकार
GOVERNMENT OF INDIA



अजय कुमार द्विवेदी
Ajay Kumar Dwivedi
जन्म तिथि/DOB: 10/05/1968
पुरुष / MALE



भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:
S/O शिव शंकर द्विवेदी,
110/1, अयोध्या विहार, जी
टी रोड, अपो, पुष्प हॉट्टा,
चकेरी मोड, पोस्ट-
रूमा, कानपुर नगर, सरसौल,
कानपुर नगर,
उत्तर प्रदेश - 209402

Address:
S/O Shiv Shanker Dwivedi, 110/1,
AYODHYA VIHAR, G T ROAD, OPP
PUSHP HONDA, CHAKERI
MOD. POST-ROOMA KANPUR
NAGAR, Sarsaul, Kanpur Nagar
Uttar Pradesh - 209402

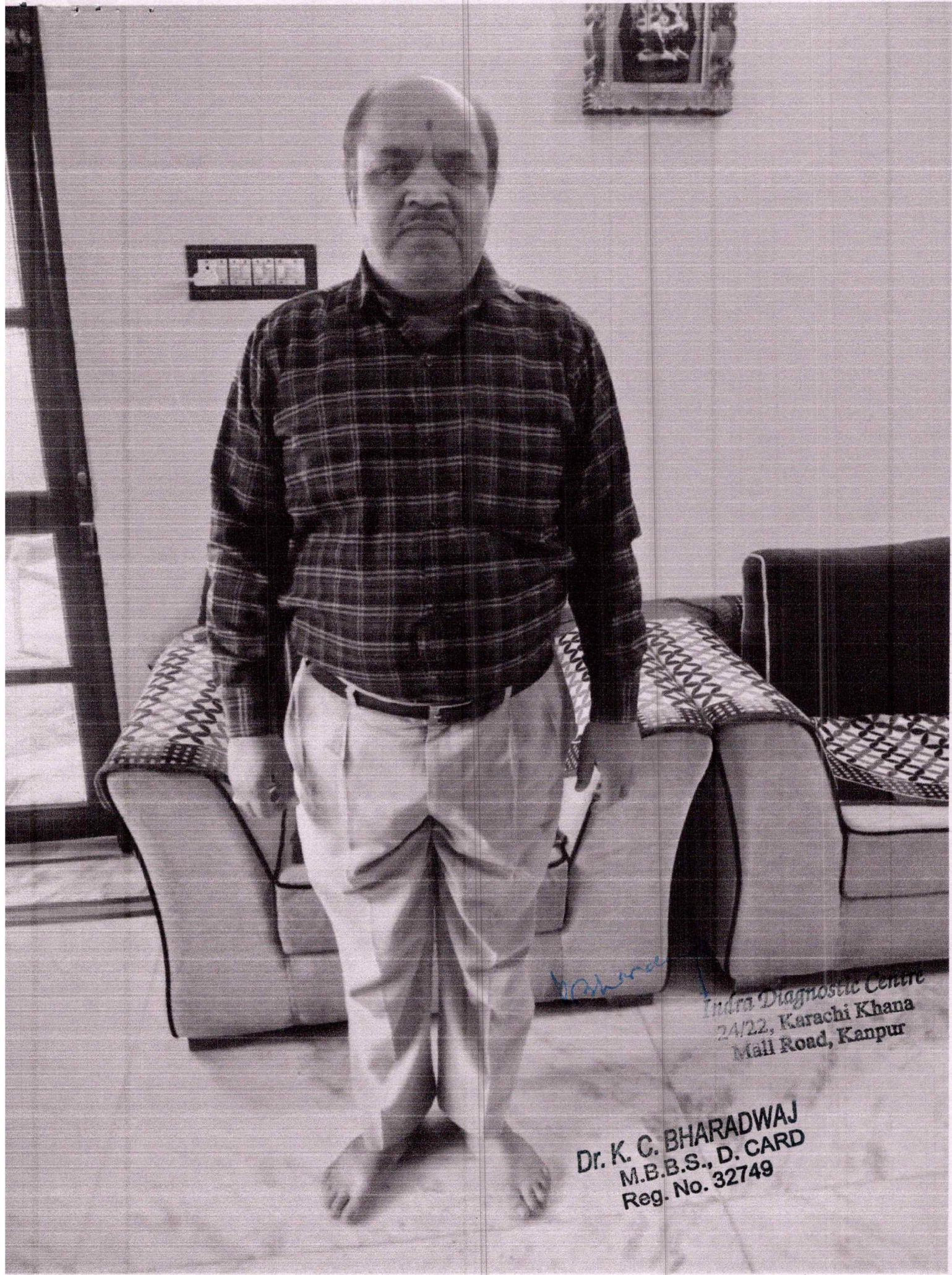
9470 5100 9353

9470 5100 9353

आधार-आम आदमी का अधिकार

Aadhaar-Aam Admi ka Adhikar

Indra Diagnostic Centre
24/22, Karachi Khana
Mall Road, Kanpur



Maharaja

Indra Diagnostic Centre
24/22, Karachi Khana
Mall Road, Kanpur

Dr. K. C. BHARADWAJ
M.B.B.S., D. CARD
Reg. No. 32749

DR. A.K. GUPTA

M.B.B.S., D.C.P., I.A.P.M., P.M.H.S.
Ex Chief Medical Superintendent
Senior Consultant

ASHMEE CARE
ULTRASOUND
&
CARDIO CENTRE

2D ECHO * COLOUR DOPPLER * ULTRASOUND * TMT * ECG

NAME OF PATIENT: MR. AJAY KUMAR DWIVEDI

AGE: 53 SEX: M

REF. BY: DR. I.D.C

DATE: 20-12-2021

ULTRASOUND REPORT WHOLE ABDOMEN

LIVER LIVER IS ENLARGED IN SIZE 167.5MM WITH FATTY CHANGES GRADE 1ST. NO FOCAL LESION SEEN. THE INTRA-HEPATIC BILIARY RADICALS ARE NORMAL. THE HEPATIC VEINS ARE NORMAL.

PORTAL VEIN NORMAL IN COURSE & CALIBER

GALL BLADDER OPERATED

CBD NORMAL IN COURSE & CALIBER

PANCREAS NORMAL IN SIZE, SHAPE AND ECHO TEXTURE. PANCREATIC DUCT IS NORMAL IN COURSE & CALIBER. NO FOCAL LESION SEEN

RT. KIDNEY NORMAL IN SIZE, POSITION AND AXIS. THE CORTICOMEDULLARY DIFFERENTIATION IS WELL MAINTAINED. NO CALCULUS/HYDRONEPHROSIS LESION SEEN

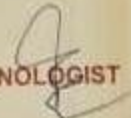
LT. KIDNEY NORMAL IN SIZE, POSITION AND AXIS. THE CORTICOMEDULLARY DIFFERENTIATION IS WELL MAINTAINED. NO CALCULUS/HYDRONEPHROSIS LESION SEEN

SPLEEN SPLEEN IS NORMAL IN SIZE 121.1MM. SPLENIC VEIN IS NORMAL IN DIAMETER

U. BLADDER NORMAL IN SIZE SHAPE AND OUTLINE. ITS WALL THICKNESS IS NORMAL. NO INTRALUMINAL MASS LESION/CALCULUS NOTED. RESIDUAL URINE VOLUME 4 ML

PROSTATE NORMAL IN SIZE & SHAPE WEIGHT 21.9 GM5. HOMOGENOUS ECHOTEXTURE

IMPRESSION HEPATOMEGALY WITH FATTY CHANGES GRADE 1ST


SONOLOGIST

DR. RACHIT GUPTA

Attending Cardiologist, MD (Physician)
PG Diploma in Clinical Cardiology

PNDT Registration No. PNDT/REG/94/2012

SHOP NO.37/54, CAPITAL TOWER, MESTON ROAD, KANPUR NAGAR - 208001 * M.: 9307775184

Note: This report is to help clinician for better patient management. Discrepancies due to technical or typing errors should be reported within three days for correction. No compensation liability stands.

NOT FOR MEDICO LEGAL PURPOSE

