Chandan Diagnostic



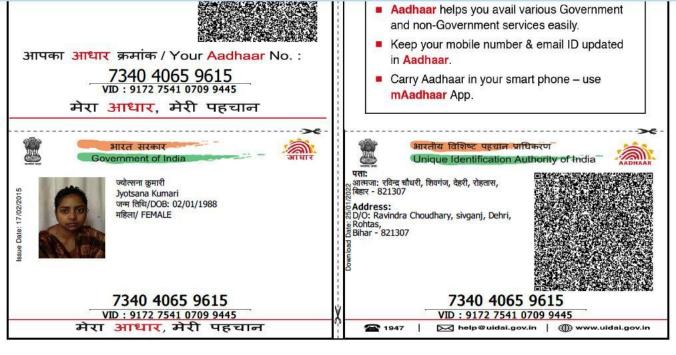
Age / Gender: 34/Female Patient ID: CVAR0085752223 Patient Name: Mrs.JYOTSHANA KUMARI - PKG10000239

Date and Time: 18th Feb 23 11:35 AM

V4 aVR V1 Τ Π V2 V5 aVL III aVF V3 V6 Π 25.0 mm/s 10.0 mm/mV 0-20Hz, 50Hz AR: 78bpm VR: 78bpm QRSD: 82ms QT: 382ms QTc: 435ms PRI: 162ms P-R-T: 59° 72° 50° REPORTED BY AUTHORIZED BY ECG Within Normal Limits: Sinus Rhythm, Sinus Arrhythmia Seen. Please correlate clinically. H.L.D.

63382

Dr Deepak







... - Cumpany: - Mediucheel. Hame of Executive: MR / MRS. DNOtshana Kumari - stell sitte 0 2 ... 01 / 1980 Sex . / - Ferrie 157 CMs 74-KGs BMI (body Mass Index) : 20.0 Ing CMs Biood Pressure: 100 / 60 mm/Hg -74 BPM - Reputar / Irregular Respire: Rate: 18 Resp/Min - Mole an chun indiest- No - Mo - Medications: (I) _ M* - . Surgical history: (1) - NO manus of a conclisin/smoking/tobacco; (1) ~ MO Z subjects it any: ~ Mb The sheek up - rolan a Color vision: - Moning - Many - Mound '



Add: 99, Shivaji Nagar Mahmoorganj,Varanasi



Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



	MEDIWHEEL BANK OF BARODA Result	Unit	Bio. Ref. Interval			
Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report						
sit ID	: CVAR0085752223	Reported	: 18/Feb/2023 12:4	1:19		
JHID/MR NO	: CVAR.0000035635	Received	: 18/Feb/2023 11:2	8:32		
Age/Gender	: 34 Y 0 M 0 D /F	Collected	: 18/Feb/2023 11:2			
Patient Name	: Mrs.JYOTSHANA KUMARI -PKG10000239	Registered On	: 18/Feb/2023 11:0	7:08		

Blood Group	В		
Rh (Anti-D)	POSITIVE		
Complete Blood Count ((CBC) * . Whole Blood		
•		,	
Haemoglobin	10.30	g/dl	1 Day- 14.5-2
			1 Wk- 13.5-1

Haemoglobin	10.30	g/dl	1 Day- 14.5-22.5 g/ 1 Wk- 13.5-19.5 g/ 1 Mo- 10.0-18.0 g/ 3-6 Mo- 9.5-13.5 g, 0.5-2 Yr- 10.5-13.5 g/dl 2-6 Yr- 11.5-15.5 g, 6-12 Yr- 11.5-15.5 g, 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/ Female- 12.0-15.5 g/	dl dl /dl g/dl dl
TLC (WBC)	4,300.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils)	60.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	35.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	2.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	< 1	ELECTRONIC IMPEDANCE
ESR				
Observed	26.00	Mm for 1st hr.		
Corrected	10.00	Mm for 1st hr.	. < 20	
PCV (HCT)	31.70	%	40-54	
Platelet count				
Platelet Count	1.50	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	nr	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	nr	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	nr	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	nr	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	4.58	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE





Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.JYOTSHANA KUMARI -PKG10000239	Registered On	: 18/Feb/2023 11:07:08
Age/Gender	: 34 Y 0 M 0 D /F	Collected	: 18/Feb/2023 11:27:51
UHID/MR NO	: CVAR.0000035635	Received	: 18/Feb/2023 11:28:32
Visit ID	: CVAR0085752223	Reported	: 18/Feb/2023 12:41:19
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 Indices (MCV, MCH, MCHC)				
MCV	69.20	fl	80-100	CALCULATED PARAMETER
MCH	22.40	pg	28-35	CALCULATED PARAMETER
MCHC	32.30	%	30-38	CALCULATED PARAMETER
RDW-CV	13.80	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	36.10	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	2,580.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	86.00	/cu mm	40-440	

S.N. Sintos

Dr.S.N. Sinha (MD Path)





Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.JYOTSHANA KUMARI -PKG10000239	Registered On	: 18/Feb/2023 11:07:09
Age/Gender	: 34 Y 0 M 0 D /F	Collected	: 18/Feb/2023 11:27:51
UHID/MR NO	: CVAR.0000035635	Received	: 18/Feb/2023 11:28:32
Visit ID	: CVAR0085752223	Reported	: 18/Feb/2023 13:21:33
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	91.70	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.





Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.JYOTSHANA KUMARI -PKG10000239	Registered On	: 18/Feb/2023 11:07:09
Age/Gender	: 34 Y 0 M 0 D /F	Collected	: 18/Feb/2023 11:27:51
UHID/MR NO	: CVAR.0000035635	Received	: 19/Feb/2023 11:18:06
Visit ID	: CVAR0085752223	Reported	: 19/Feb/2023 13:13:28
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
GLYCOSYLATED HAEMOGLOBIN (HBA1C)	** , EDTA BLOOD			
Glycosylated Haemoglobin (HbA1c)	5.00	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	31.00	mmol/mol/IFCC		

mg/dl

Interpretation:

NOTE:-

Estimated Average Glucose (eAG)

- 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.

96

• 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)	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 1 diabetics. 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.

<u>Clinical Implications:</u>

*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

ISO 9001:2015

Page 4 of 12

CHANDAN DIAGNOSTIC CENTRE Add: 99, Shivaji Nagar Mahmoorganj, Varanasi Ph: 9235447795,0542-3500227



CIN: U85110DL2003PLC308206



Patient Name	: Mrs.JYOTSHANA KUMARI -PKG10000239	Registered On	: 18/Feb/2023 11:07:09
Age/Gender	: 34 Y 0 M 0 D /F	Collected	: 18/Feb/2023 11:27:51
UHID/MR NO	: CVAR.0000035635	Received	: 19/Feb/2023 11:18:06
Visit ID	: CVAR0085752223	Reported	: 19/Feb/2023 13:13:28
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test NameResultUnitBio. Ref. IntervalMethod	
---	--

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 (MBBS MD Pathology)

Page 5 of 12







Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.JYOTSHANA KUMARI -PKG10000239	Registered On	: 18/Feb/2023 11:07:09
Age/Gender	: 34 Y 0 M 0 D /F	Collected	: 18/Feb/2023 11:27:51
UHID/MR NO	: CVAR.0000035635	Received	: 18/Feb/2023 11:28:32
Visit ID	: CVAR0085752223	Reported	: 18/Feb/2023 12:28:55
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
BUN (Blood Urea Nitrogen) Sample:Serum	13.10	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	0.80	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20- 275 Female-20-320	MODIFIED JAFFES
Uric Acid Sample:Serum	3.90	mg/dl	2.5-6.0	URICASE
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST) SGPT / Alanine Aminotransferase (ALT) Gamma GT (GGT) Protein Albumin Globulin A:G Ratio Alkaline Phosphatase (Total) Bilirubin (Total) Bilirubin (Direct) Bilirubin (Indirect) LIPID PROFILE (MINI) , <i>Serum</i> Cholesterol (Total)	17.90 23.10 36.00 6.40 4.00 2.40 1.67 64.90 0.80 0.30 0.50	U/L U/L IU/L gm/dl gm/dl gm/dl U/L mg/dl mg/dl mg/dl	< 35 < 40 11-50 6.2-8.0 3.8-5.4 1.8-3.6 1.1-2.0 42.0-165.0 0.3-1.2 < 0.30 < 0.8 <200 Desirable 200-239 Borderline High	IFCC WITHOUT P5P IFCC WITHOUT P5P OPTIMIZED SZAZING BIRUET B.C.G. CALCULATED CALCULATED IFCC METHOD JENDRASSIK & GROF JENDRASSIK & GROF
HDL Cholesterol (Good Cholesterol) LDL Cholesterol (Bad Cholesterol) VLDL Triglycerides	43.60 132 17.50 87.50	mg/dl mg/dl mg/dl mg/dl	 > 240 High 30-70 < 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High 10-33 < 150 Normal 150-199 Borderline High 200-499 High 	DIRECT ENZYMATIC CALCULATED CALCULATED GPO-PAP





Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.JYOTSHANA KUMARI -PKG10000239	Registered On	: 18/Feb/2023 11:07:09
Age/Gender	: 34 Y 0 M 0 D /F	Collected	: 18/Feb/2023 11:27:51
UHID/MR NO	: CVAR.0000035635	Received	: 18/Feb/2023 11:28:32
Visit ID	: CVAR0085752223	Reported	: 18/Feb/2023 12:28:55
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

>500 Very High



S.N. Sinton Dr.S.N. Sinha (MD Path)



Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.JYOTSHANA KUMARI -PKG10000239	Registered On	: 18/Feb/2023 11:07:09
Age/Gender	: 34 Y 0 M 0 D /F	Collected	: 18/Feb/2023 11:27:51
UHID/MR NO	: CVAR.0000035635	Received	: 18/Feb/2023 11:28:32
Visit ID	: CVAR0085752223	Reported	: 18/Feb/2023 12:50:30
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
PRINE EXAMINATION, ROUTINE $*$, v	rine			
Color	LIGHT YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic (5.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent	DIPSTICK
		,	10-40 (+)	
			40-200 (++)	
			200-500 (+++)	
	ADOCAT		> 500 (++++)	DIRCTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++)	DIPSTICK
			1-2 (+++)	
			> 2 (++++)	
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT		P C P D	133
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:			and a state of the	
Epithelial cells	2-3/h.p.f			MICROSCOPIC
	2 37 11 51			EXAMINATION
Pus cells	1-2/h.p.f			
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			
UGAR, FASTING STAGE * , Urine				
Sugar, Fasting stage	PRESENT	gms%		
Interpretation:				
(+) < 0.5				ch O'al

S.N. Sinter Dr.S.N. Sinha (MD Path)



(++)

(+++) 1-2

(++++) > 2

0.5-1.0



Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.JYOTSHANA KUMARI -PKG10000239	Registered On	: 18/Feb/2023 11:07:09
Age/Gender	: 34 Y 0 M 0 D /F	Collected	: 18/Feb/2023 11:27:51
UHID/MR NO	: CVAR.0000035635	Received	: 19/Feb/2023 10:40:05
Visit ID	: CVAR0085752223	Reported	: 19/Feb/2023 11:05:15
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE - TOTAL ** , Serum				
T3, Total (tri-iodothyronine)	114.63	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	8.40	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	1.91	ulU/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 (MBBS MD Pathology)

Page 9 of 12



Home Sample Collection 1800-419-0002



Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.JYOTSHANA KUMARI -PKG10000239	Registered On	: 18/Feb/2023 11:07:10
Age/Gender	: 34 Y 0 M 0 D /F	Collected	: N/A
UHID/MR NO	: CVAR.0000035635	Received	: N/A
Visit ID	: CVAR0085752223	Reported	: 18/Feb/2023 11:56:42
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 *

X- Ray Digital Chest P.A. View

- Lung fields are clear.
- Pleural spaces are clear.
- Both hilar shadows appear normal.
- Trachea and carina appear normal.
- Heart size within normal limits.
- Both the diaphragms appear normal.
- Soft tissues and Bony cage appear normal.

IMPRESSION

*** NO OBVIOUS DETECTABLE ABNORMALITY SEEN**

Dr Raveesh Chandra Roy (MD-Radio)

Page 10 of 12







Add: 99, Shivaji Nagar Mahmoorganj, Varanasi Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



Patient Name	: Mrs.JYOTSHANA KUMARI -PKG10000239	Registered On	: 18/Feb/2023 11:07:10
Age/Gender	: 34 Y 0 M 0 D /F	Collected	: N/A
UHID/MR NO	: CVAR.0000035635	Received	: N/A
Visit ID	: CVAR0085752223	Reported	: 18/Feb/2023 11:54:38
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) *

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER)

LIVER

• The liver is normal in size 15.6 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 (10.6 mm) 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 (11.2 x 3.5 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 (11.1 x 4.0 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.
- Corticomedullary demarcation is clear. Renal respiratory excursions are normal.

SPLEEN



Home Sample Collect



Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.JYOTSHANA KUMARI -PKG10000239	Registered On	: 18/Feb/2023 11:07:10
Age/Gender	: 34 Y 0 M 0 D /F	Collected	: N/A
UHID/MR NO	: CVAR.0000035635	Received	: N/A
Visit ID	: CVAR0085752223	Reported	: 18/Feb/2023 11:54:38
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

• The spleen is normal in size (8.9 cm), and has a homogenous echotexture.

ILIAC FOSSA

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

URINARY BLADDER

- Urinary bladder is partially filled. Bladder wall is normal in thickness and regular.
- Pre-void urine volume is 40 cc.

UTERUS

- The uterus is anteverted and anteflexed position and is normal in size measures (61 x 48 x 29mm / 46 cc).
- It has a homogenous myometrial echotexture.
- The endometrium is seen in midline (thickness -6.1 mm)
- Cervix is normal.

UTERINE ADNEXA

- Adnexa on both sides are normal.
- Both the ovaries are normal in size.

CUL-DE-SAC

• Pouch of Douglas is clear.

IMPRESSION

• No significant sonological abnormality is seen on this study.

*** End Of Report ***	
(**) Test Performed at Chandan Speciality Lab.	Pary
	Dr Raveesh Chandra Roy (MD-Radio
This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the	est at no additional cost within seven days.
Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Tes Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online B 365 Days Open	Digital Mammography, Electromyography (EMG), Nerve Condition
	Page 12 of 12
160 P001/2019	Home Sample Collection





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Final impression

Certified that I examined <u>Jyetshawa</u> <u>Kumani</u> is presently in good health and the from any cardio-respiratory / communicable ailment, hey sue is *tix* / Unfrit to join any organization.

Guddhana kumani Client Signature: -

Signature of Medical Examiner

Dr. R.C. ROY MB5. MD. (Radio Diagnosis MB5. MD. (Radio Diagnosis Rea. No. 26913

Chandan Diagnostic Center 99, Shivaji Nagar, Mahmoorgani Varanasi-221010 (U.P.) Phone No.:0542-2223232



Customer Care No.: 0522-6666600 E-mail: customercare.diagnostic@chandan.co.in Web.: www.chandan.co.in

Home Sample Collection 1800-419-0002



Latitude 25.305409°

LOCAL 11:20:19 GMT 05:50:19 Longitude 82.979036°

SATURDAY 02.18.2023 ALTITUDE 22 METER