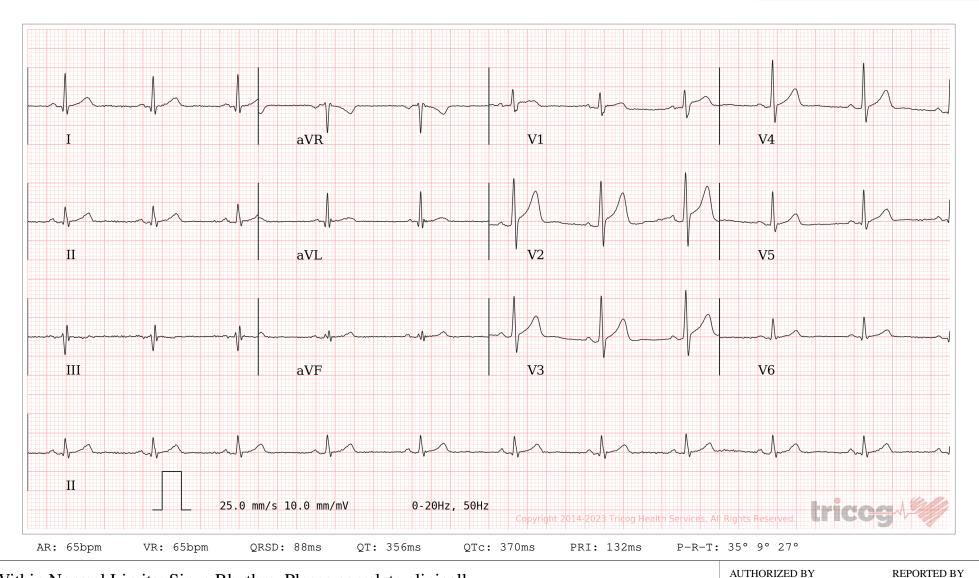
Chandan Diagnostic



Age / Gender: 30/Female Date and Time: 12th Jan 23 10:06 AM

CVAR0076122223 Patient ID:

Patient Name: Mrs.SUNITA DEVI-PKG10000239



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

AUTHORIZED BY

Dr. Charit MD, DM: Cardiology

Dr Vishwanath. A

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.





CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUNITA DEVI-PKG10000239 Registered On : 12/Jan/2023 08:33:34 Age/Gender : 30 Y 0 M 0 D /F Collected : 12/Jan/2023 10:11:29 UHID/MR NO : CVAR.0000034751 Received : 12/Jan/2023 10:14:30 : 12/Jan/2023 12:31:19 Visit ID : CVAR0076122223 Reported

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 Blood

Haemoglobin 11.90 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

TLC (WBC)	10,900	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils)	85.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	10.00	%	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	10.00	Mm for 1st hr.		
Corrected	6.00	Mm for 1st hr.	< 20	
PCV (HCT)	36.40	%	40-54	
Platelet count				
Platelet Count	1.61	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	3.96	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE









CIN: U85110DL2003PLC308206



: 12/Jan/2023 08:33:34 Patient Name : Mrs.SUNITA DEVI-PKG10000239 Registered On Age/Gender : 30 Y 0 M 0 D /F Collected : 12/Jan/2023 10:11:29 UHID/MR NO : CVAR.0000034751 Received : 12/Jan/2023 10:14:30 Visit ID : CVAR0076122223 Reported : 12/Jan/2023 12:31:19

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	91.70	fl	80-100	CALCULATED PARAMETER
MCH	30.00	pg	28-35	CALCULATED PARAMETER
MCHC	32.70	%	30-38	CALCULATED PARAMETER
RDW-CV	12.40	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	41.70	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	9,265.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	218.00	/cu mm	40-440	

S.N. Sinta









Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUNITA DEVI-PKG10000239 : 12/Jan/2023 08:33:35 Registered On Age/Gender : 30 Y 0 M 0 D /F Collected : 12/Jan/2023 10:11:29 UHID/MR NO : CVAR.0000034751 Received : 12/Jan/2023 10:14:30 Visit ID : CVAR0076122223 Reported : 12/Jan/2023 11:58:08

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 84.60 mg/dl < 100 Normal GOD POD

100-125 Pre-diabetes ≥ 126 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.

Glucose PP 126.00 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.

GLYCOSYLATED HAEMOGLOBIN (HBA1C) *, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	3.60	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	19.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	65	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.









CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUNITA DEVI-PKG10000239 : 12/Jan/2023 08:33:35 Registered On : 12/Jan/2023 10:11:29 Age/Gender : 30 Y 0 M 0 D /F Collected UHID/MR NO : CVAR.0000034751 Received : 12/Jan/2023 10:14:30 Visit ID : CVAR0076122223 Reported : 12/Jan/2023 11:58:08 Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. : Final Report Status

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

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.

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

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	9.00	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	1.00	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20- 275 Female-20-320	MODIFIED JAFFES
Uric Acid Sample:Serum	4.80	mg/dl	2.5-6.0	URICASE





^{**}Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.





CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUNITA DEVI-PKG10000239 Registered On : 12/Jan/2023 08:33:35 Age/Gender : 30 Y 0 M 0 D /F Collected : 12/Jan/2023 10:11:29 UHID/MR NO : CVAR.0000034751 : 12/Jan/2023 10:14:30 Received Visit ID : CVAR0076122223 Reported : 12/Jan/2023 11:58:08

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. II	nterval Method
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	35.00	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	30.00	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	40.00	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.80	gm/dl	6.2-8.0	BIRUET
Albumin	4.00	gm/dl	3.8-5.4	B.C.G.
Globulin	2.80	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.43		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	80.00	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.40	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.20	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.20	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) , Serum				
Cholesterol (Total)	150.00	mg/dl	<200 Desirable 200-239 Borderlin	CHOD-PAP e High
	26.00		> 240 High	DIDECT FAITWAATIC
HDL Cholesterol (Good Cholesterol)	36.00	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	74	mg/dl	< 100 Optimal 100-129 Nr.	CALCULATED
			Optimal/Above Op 130-159 Borderlin 160-189 High > 190 Very High	
VLDL	40.00	mg/dl	10-33	CALCULATED
Triglycerides	200.00	mg/dl	< 150 Normal 150-199 Borderlin 200-499 High >500 Very High	GPO-PAP e High

S.N. Sinla







Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUNITA DEVI-PKG10000239 Registered On

: 12/Jan/2023 08:33:35 : 12/Jan/2023 10:11:29

Age/Gender

: 30 Y 0 M 0 D /F

Collected Received

: 12/Jan/2023 10:14:30

UHID/MR NO Visit ID

: CVAR.0000034751 : CVAR0076122223

Reported

: 12/Jan/2023 11:37:21

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

URINE EXAMINATION. ROUTINE * . Urine

Color	PALE YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic (6.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+)	DIPSTICK
			40-200 (++)	
			200-500 (+++) > 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+)	DIPSTICK
Sugar	ADSERT	g111370	0.5-1.0 (++)	Dil Stick
			1-2 (+++)	
			> 2 (++++)	
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile P <mark>igment</mark> s	ABSENT			
Urobi <mark>linogen(1:20 dilution)</mark>	ABSENT			
Microscopic Examination:				
pithelial cells	1-2/h.p.f			MICROSCOPIC
				EXAMINATION
Pus cells	0-1/h.p.f			
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			

S

Sugar, Fasting stage **ABSENT** gms%

Interpretation:

(+)< 0.5

0.5-1.0 (++)

(+++) 1-2

(++++) > 2

S.N. Sinta









CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUNITA DEVI-PKG10000239 : 12/Jan/2023 08:33:35 Registered On Age/Gender : 30 Y 0 M 0 D /F Collected : 12/Jan/2023 10:11:29 UHID/MR NO : CVAR.0000034751 Received : 12/Jan/2023 16:07:07 Visit ID : CVAR0076122223 Reported : 12/Jan/2023 16:10:46 : Dr.Mediwheel - Arcofemi Health Care Ltd. Status Ref Doctor : Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
HYROID PROFILE - TOTAL * , Serum				
T3, Total (tri-iodothyronine)	91.40	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	4.20	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	0.60	μIU/mL	0.27 - 5.5	CLIA
Interpretation:		,		
		0.3-4.5 μIU/1	mL First Trimest	er
		0.5-4.6 μIU/1	mL Second Trim	ester
		0.8-5.2 μIU/1	nL Third Trimes	ter
		0.5-8.9 μIU/1	mL Adults	55-87 Years
		0.7-27 μIU/ı	mL Premature	28-36 Week
		2.3-13.2 μIU/r	nL Cord Blood	> 37Week
		0.7-64 μIU/1	mL Child(21 wk	- 20 Yrs.)
		1-39 μIU	J/mL Child	0-4 Days
		1.7-9.1 μIU/1		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.

S.N. Sinta









CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUNITA DEVI-PKG10000239 Registered On : 12/Jan/2023 08:33:36

 Age/Gender
 : 30 Y 0 M 0 D /F
 Collected
 : N/A

 UHID/MR NO
 : CVAR.0000034751
 Received
 : N/A

Visit ID : CVAR0076122223 Reported : 12/Jan/2023 09:41:35

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)









CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUNITA DEVI-PKG10000239 Registered On : 12/Jan/2023 08:33:37

 Age/Gender
 : 30 Y 0 M 0 D /F
 Collected
 : N/A

 UHID/MR NO
 : CVAR.0000034751
 Received
 : N/A

Visit ID : CVAR0076122223 Reported : 12/Jan/2023 09:31:40

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 **12.6 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 (7.2 mm) at the porta.
- Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common duct are normal (2.6 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 (9.6 x 3.4 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 (9.3 x 3.9 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.







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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUNITA DEVI-PKG10000239 Registered On : 12/Jan/2023 08:33:37

 Age/Gender
 : 30 Y 0 M 0 D /F
 Collected
 : N/A

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 : CVAR.0000034751
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Visit ID : CVAR0076122223 Reported : 12/Jan/2023 09:31:40

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

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 (8.1 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 30 cc.

UTERUS

- Uterus is indistinct in outline, normal to the extent visualized. Size (61x 39 x 26 mm / 33 cc).
- It has a homogenous myometrial echotexture.
- 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 ***

Result/s to Follow:









Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SUNITA DEVI-PKG10000239

Registered On : 12/Jan/2023 08:33:37

: 30 Y 0 M 0 D /F : CVAR.0000034751 Collected : N/A Received : N/A

UHID/MR NO Visit ID

Age/Gender

: CVAR0076122223

Reported

: 12/Jan/2023 09:31:40

: Dr.Mediwheel - Arcofemi Health Care Ltd. Ref Doctor

: Final Report Status

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

STOOL, ROUTINE EXAMINATION, SUGAR, PP STAGE, ECG / EKG





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 *

*Facilities Available at Select Location













सुनीता देवी Sunita Devi जन्म तिथि/ DOB: 01/01/1992 महिला / FEMALE



8259 9907 9728

आधार-आम आदमी का अधिकार





Name of Company:	Mediaheel	
Name of Executive:	Summeta Der	u

Date of Birth: 01 / 01 / 1992

Sex: Male / Female

Weight: 44....KGs

BMI (Body Mass Index): 20 '4

Chest (Expiration / Inspiration) 82 / 85 CMs

Abdomen: ...63...CMs

Blood Pressure: 112 / 72 mm/Hg

RR:Resp/Min

Ident. Mark: Male on Pt Side of Necle

Any Allergies: M6

Vertigo: No

Any Medications: 0

Any Surgical History:

Habits of alcoholism/smoking/tobacco:

Chief Complaints if any:

Lab Investigation Reports: 1 es A

Eye Check up - vision & Color vision:

Left eye:

Right eye: ref

Near vision: P (6

Far vision: 616







Dental check up : Now

ENT Check up:

puf

Eye Checkup:

ne

Final impression

Client Signature:

स्रानिता

Pr. R.C. ROY

NBBS, ND. Radio Diagnosis

NBBS, NO. 26918

Signature of Medical Examiner

Name & Qualification Dr. R. C. Roy (MBBS,MD)

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





D63/6B-99, Shivaji Nagar Colony, Mahmoorganj, Varanasi, Uttar Pradesh 221010, India

Latitude 25.306147° Longitude 82.979557°

LOCAL 09:38:37 GMT 04:08:37 THURSDAY 01.12.2023 ALTITUDE 18 METER