



LABORATORY REPORT : Biochemistry

Name	: Mr. D GOVINDA RAJ	Age /Sex	: 054Y Y(s)/MALE
Sample Collected On	: 06-Jun-2024 04:37 PM	UMR No.	: 32406000627
Department Receiving	: 06-Jun-2024 06:30 PM	Bill No.	: MOPB240602198
Reported Date	: 06-Jun-2024 07:50 PM	Result No	: RJB240601254
Advised By	: MEDICOVER HOSPITALS	Sample ID	: JBH240600774
Sample Type	: Serum		

PROSTATE SPECIFIC ANTIGEN (PSA) TOTAL

<u>Parameters</u>	<u>Result</u>	<u>BRI</u>	<u>Units</u>
PSA ECLIA	0.80	0 - 39 Age <1.4 40 - 49 Age <2.0 50 - 59 Age <3.1 60 - 69 Age <4.1 A bove 70 <4.4	ng/mL

INTERPRETATION


Prostate specific antigen (PSA) is a glycoprotein. It has the function of a serine proteinase. Elevated concentrations of PSA in serum are generally indicative of a pathologic condition of the prostate (prostatitis, benign hyperplasia or carcinoma). PSA is also present in paraurethral and anal glands, as well as in breast tissue or with breast cancer, low levels of PSA can also be detected in sera from women. PSA determinations are useful in the monitoring of progress and efficiency of therapy in patients with prostate carcinoma or receiving hormonal therapy. An inflammation or trauma of the prostate (e.g. in cases of urinary retention or following rectal examination, cystoscopy, coloscopy, transurethral biopsy, laser treatment or ergometry) can lead to PSA elevations of varying duration and magnitude.

*** End Of Report ***

Suggested Clinical Correlation * If necessary, Please discuss

Verified By :

ID -15505


DR SWAPNIKA T.G
MD BIOCHEMISTRY
TSMC/72222



LABORATORY REPORT : Biochemistry

Name	: Mr. D GOVINDA RAJ	Age /Sex	: 054Y Y(s)/MALE
Sample Collected On	: 06-Jun-2024 04:37 PM	UMR No.	: 32406000627
Department Receiving	: 06-Jun-2024 06:30 PM	Bill No.	: MOPB240602198
Reported Date	: 06-Jun-2024 07:31 PM	Result No	: RJB240601253
Advised By	: MEDICOVER HOSPITALS	Sample ID	: JBH240600774
Sample Type	: Serum		

GGT (GAMMA GLUTAMYL TRANSPEPTIDASE), SERUM

<u>Parameters</u>	<u>Result</u>	<u>BRI</u>	<u>Units</u>
GAMMA GLUTAMYL TRANSFERASE(GGT) <i>IFCC</i>	17	6-42	U/L

INTERPRETATION

Gamma glutamyltransferase is used in the diagnosis and monitoring of hepatobiliary diseases.
Gamma glutamyltransferase is also a sensitive screening test for occult alcoholism.
Elevated GGT activities are found in the serum of patients requiring long-term medication with phenobarbital and phenytoin.

REFERENCE


Roche Cobas kit literature.
Tietz Textbook of Clinical Chemistry and Molecular Diagnostics, 6 th edition

*** End Of Report ***

Suggested Clinical Correlation * If necessary, Please discuss

Verified By :

ID -15505


DR SWAPNIKA T.G
MD BIOCHEMISTRY
TSMC/72222

MEDICAL EXAMINATION REPORT

Name D. Govinda raj Gender M/F Date of Birth 4/25/1980
 Position Selected For Identification marks A mole on the left eye

A. HISTORY:

1. Do you have, or are you being treated for, any of the following conditions? (please tick all that apply)?

- | | | |
|---|--|---|
| <input type="checkbox"/> Anxiety | <input type="checkbox"/> Cancer | <input type="checkbox"/> High Blood Pressure |
| <input type="checkbox"/> Arthritis | <input type="checkbox"/> Depression/ bipolar disorder | <input type="checkbox"/> High Cholesterol |
| <input type="checkbox"/> Asthama, Bronchitis, Emphysema | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Migraine Headaches |
| <input type="checkbox"/> Back or spinal problems | <input type="checkbox"/> Heart Disease | <input type="checkbox"/> Sinusitis or Allergic Rhinitis (Hay Fever) |
| <input type="checkbox"/> Epilepsy | <input type="checkbox"/> Any other serious problem for which you are receiving medical attention | |

2. List the medications taken Regularly.

3. List allergies to any known medications or chemicals

4. Alcohol : Yes No Occasional

5. Smoking : Yes No Quit(more than 3 years)

6. Respiratory Function :

- a. Do you become unusually short of breath while walking fast or taking stair - case? Yes No
- b. Do you usually cough a lot first thing in morning? Yes No
- c. Have you vomited or coughed out blood? Yes No

7. Cardiovascular Function & Physical Activity :

- a. Exercise Type: (Select 1)
- No Activity
 - Very Light Activity (Seated At Desk, Standing)
 - Light Activity (Walking on level surface, house cleaning)
 - Moderate Activity (Brisk walking, dancing, weeding)
 - Vigrous Activity (Soccer, Running)
- b. Exercise Frequency: Regular (less than 3 days/ week) / Irregular (more than 3 days/ Week)
- c. Do you feel pain in chest when engaging in physical activity? Yes No

8. Hearing :

- a. Do you have history of hearing troubles? Yes No
- b. Do you experiences ringing in your ears? Yes No
- c. Do you experience discharge from your ears? Yes No
- d. Have you ever been diagnosed with industrial deafness? Yes No

9. Musculo - Skeletal History

- | | | | |
|-----------------------------------|--|------------------------------|--|
| a. Neck : | Have you ever injured or experienced pain? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| b. Back : | If Yes ; approximate date (MM/YYYY) | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| c. Shoulder, Elbow, Wrists, Hands | Consulted a medical professional ? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| d. Hips, Knees, Ankles, Legs | Resulted in time of work? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| | Surgery Required ? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| | Ongoing Problems ? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |

10. Function History

- a. Do you have pain or discomfort when lifting or handling heavy objects? Yes No
- b. Do you have knee pain when squatting or kneeling? Yes No
- c. Do you have back pain when forwarding or twisting? Yes No
- d. Do you have pain or difficulty when lifting objects above your shoulder height? Yes No
- e. Do you have pain when doing any of the following for prolonged periods (Please circle appropriate response)
- | | | |
|--|--|---|
| •Walking : Yes <input type="checkbox"/> No <input type="checkbox"/> | •Kneeling : Yes <input type="checkbox"/> No <input type="checkbox"/> | •Squatting : Yes <input type="checkbox"/> No <input type="checkbox"/> |
| •Climbing : Yes <input type="checkbox"/> No <input type="checkbox"/> | •Sitting : Yes <input type="checkbox"/> No <input type="checkbox"/> | |
| •Standing : Yes <input type="checkbox"/> No <input type="checkbox"/> | •Bending : Yes <input type="checkbox"/> No <input type="checkbox"/> | |
- f. Do you have pain when working with hand tools? Yes No
- g. Do you experience any difficulty operating machinery? Yes No
- h. Do you have difficulty operating computer instrument? Yes No

B. CLINICAL EXAMINATION :

a. Height 142 cm b. Weight 68 kgs Blood Pressure 120 / 82 mmhg

Chest measurements: a. Normal b. Expanded

Waist Circumference Ear, Nose & Throat N

Skin N Respiratory System N

Vision R/L 6/6 Nervous System N

Circulatory System N Genito-urinary System N

Gastro-intestinal System N Colour Vision N

Discuss Particulars of Section B :-

C. REMARKS OF PATHOLOGICAL TESTS :

Chest X-ray	<input type="text"/>	ECG	<input type="text"/>
Complete Blood Count	<input type="text"/>	Urine routine	<input type="text"/>
Serum cholesterol	<input type="text"/>	Blood sugar	<input type="text"/>
Blood Group	<input type="text"/>	S.Creatinine	<input type="text"/>

D. CONCLUSION :

Any further investigations required

Any precautions suggested

E. FITNESS CERTIFICATION

Certified that the above named recruit does not appear to be suffering from any disease communicable or otherwise, constitutional weakness or bodily infirmity except yes

_____ . I do not consider this as disqualification for employment in the Company. S

Candidate is free from Contagious/Communicable disease

Date : 13/06/2024


Signature of Medical Adviser



Dr. PHYSICIAN CONSULTATION
CONSULTANT GENERAL PHYSICIAN



Organization Name : ARCOFEMI HEALTHCARE PVT LTD **ReF. Letter No.** :

Name : Mr. D GOVINDA RAJ **Age** : 54 Year(s) / Male

UMR No : KUU192174 **Ref. Doctor** :

Address : 1-5-478/1/3, RAMANI NILAYAM, BOLARU **Visit Type** : NORMAL
 ,HYDERABAD **Phone No** : 9848120224
 HYDERABAD, TELANGANA

Consult.No : KUOC353729 **Date** : 05-Jun-2024 8:32 am

Chief Complaints & H/O Present illness :

Past History

	Yes
HTN	
DM	
IHD	
Others	

Personal History

	Yes
Smoking	
Alcohol	

Investigations :

Provisional Diagnosis :

KUU192174



KUOC353729



A UNIT OF SAHRUDAYA HEALTHCARE (KURNOOL) PVT. LTD.

Sy. No. 419/B2, Opp. Old Edga, Near RTC Bus Stand, Kurnool | Ph : 040-6833 4455



Dr. DENTAL CONSULTATION
CONSULTANT DENTAL



Organization Name : ARCOFEMI HEALTHCARE PVT LTD

ReF. Letter No. :

Name : Mr. D GOVINDA RAJ

Age : 54 Year(s) / Male

UMR No : KUU192174

Ref. Doctor :

Address : 1-5-478/1/3, RAMANI NILAYAM, BOLARU,
HYDERABAD
HYDERABAD, TELANGANA

Visit Type : NORMAL

Phone No : 9848120224

Consult.No : KUOC353727

Date : 05-Jun-2024 8:32 am

Chief Complaints & H/O Present illness :

Past History

	Yes
HTN	
DM	
IHD	
Others	

Personal History

	Yes
Smoking	
Alcohol	

Investigations :

Provisional Diagnosis :

KUU192174

KUOC353727





Dr. DIETICIAN CONSULTATION
DIETICIAN



Organization Name : ARCOFEMI HEALTHCARE PVT LTD

Ref. Letter No. :

Name : Mr. D GOVINDA RAJ

Age : 54 Year(s) / Male

UMR No : KUU192174

Ref. Doctor :

Address : 1-5-478/1/3, RAMANI NILAYAM, BOLARU
, HYDERABAD
HYDERABAD, TELANGANA

Visit Type : NORMAL

Phone No : 9848120224

Consult.No : KUOC353728

Date : 05-Jun-2024 8:32 am

Chief Complaints & H/O Present illness :

Past History

	Yes
HTN	
DM	
IHD	
Others	

Personal History

	Yes
Smoking	
Alcohol	

Investigations :

Provisional Diagnosis :

KUU192174

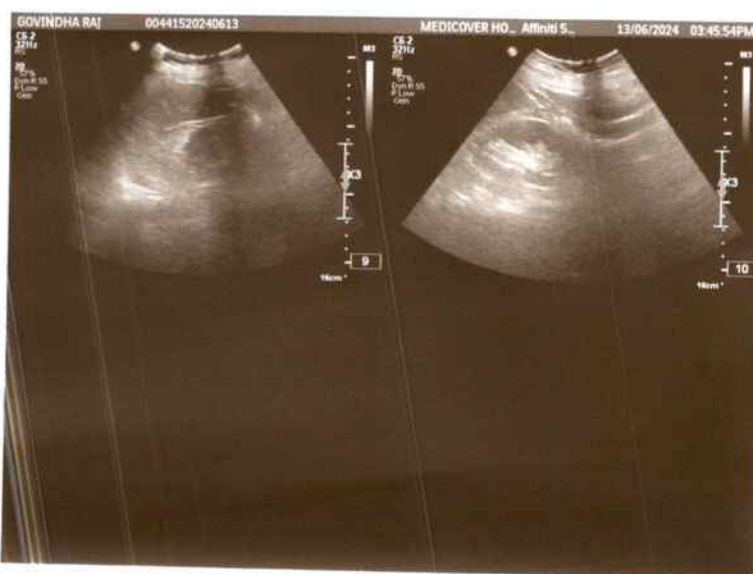
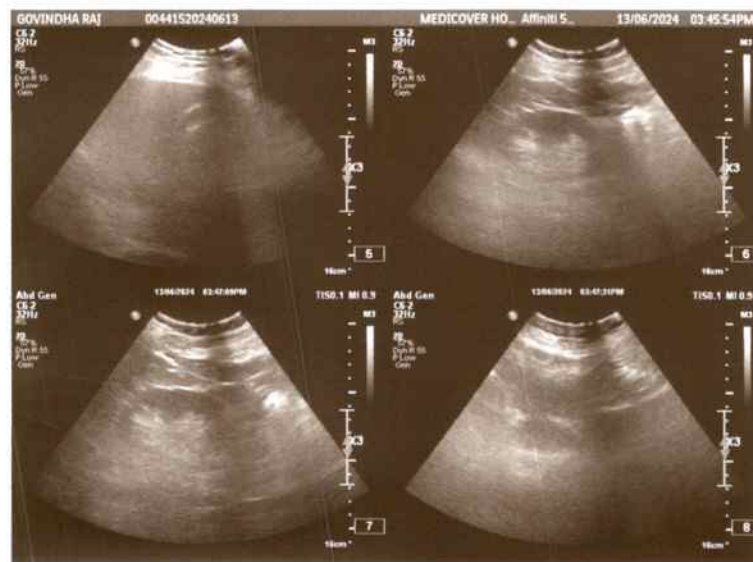
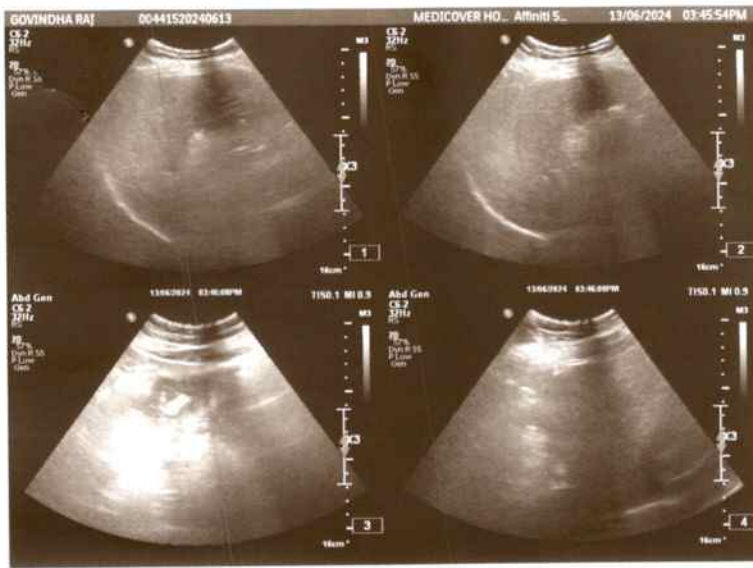


KUOC353728



A UNIT OF SAHRUDAYA HEALTHCARE (KURNOOL) PVT. LTD.

Sy. No. 419/B2, Opp. Old Edga, Near RTC Bus Stand, Kurnool | Ph : 040-6833 4455





MEDICOVER HOSPITALS-KURNOOL

51/1-E2, 1-E3, 1-E4
Opp Old Eidga, Near RTC Bus Stand,



DEPARTMENT OF RADIOLOGY

Patient Name	: Mr. D GOVINDA RAJ	Age /Sex	: 54 Y(s)/Male
Bill Date	: 05-Jun-2024 08:32 AM	UMR No.	: KUU192174
Received Date	: 05-Jun-2024 8:32 AM	Bill No.	: KUB328267
Report Date	: 13-Jun-2024 03:53 PM	Result No	: RES515920 / 0
Ref By	: DR.ANY CONSULTATION	Org.Name	: ARCOFEMI HEALTHCARE PVT LTD

(USG ABDOMEN WHOLE)

FINDINGS

LIVER : Normal in size , echotexture with smooth outline. No focal lesion seen.No intra hepatic biliary ductal dilatation. Hepatic veins are normal. Portal vein is normal.

CBD : Not dilated.

GALL BLADDER : Well distended. Gall Bladder wall thickness is normal. No calculus seen

PANCREAS : Visualized pancreas appears normal in bulk and echotexture. No focal lesion. Main pancreatic duct not dilated.

SPLEEN : Normal in size with normal echotexture. No focal lesion.

KIDNEYS : Right kidney is normal in size and position. Cortico medullary differentiation is maintained. No e/o calculus / Hydronephrosis.

Left kidney is normal in size and position. Cortico medullary differentiation is maintained. No e/o calculus / Hydronephrosis.

URINARY BLADDER : Partially filled. No calculus. Bladder wall thickness is normal.

PROSTATE : Normal in size with normal echotexture.
Volume is normal.

IVC and Aorta are normal.

No significant lymphadenopathy in the retro-peritoneum

No free fluid in the abdomen.

IMPRESSION

No significant abnormality detected.

ADVISED: Clinical correlation and kindly discuss if necessary not for medico legal purpose

*** End Of Report ***


DR.SAI NIHARIKA GAVVALA, MBBS, MD
CONSULTANT RADIOLOGIST

Verified By :

Approved By :

Dispatched By :



MEDICOVER
HOSPITALS

DEPARTMENT OF HAEMATOLOGY

KURNOOL

Patient Name : Mr. D GOVINDA RAJ	Age /Sex : 54 Y(s)/Male
Bill Date : 05-Jun-2024 08:32 AM	UMR No : KUU192174
Received Date : 05-Jun-2024 9:14 AM	Bill No : KUB328267
Report Date : 05-Jun-2024 10:06 AM	Result No : RES513547
Ref By : DR.ANY CONSULTATION	Org.Name : ARCOFEMI HEALTHCARE PVT LTD
	Specimen : Blood

COMPLETE BLOOD COUNT

<u>Parameters</u>	<u>Result</u>	<u>Biological Reference Intervals</u>	<u>Method</u>
WBC	10,800	4000 - 11000 cells/cumm	Automated Cell Count
RED BLOOD CELLS	5.21 mill/cumm.	4.5 - 6 mill/cumm.	Automated Cell Count
HAEMOGLOBIN	15.0 g/dl	11.5 - 16.0 g/dl	Electrical Impedance
PCV (PACKED CELL VOLUME)	48.5 %	37 - 52 %	Automated Cell Count cyanmethemoglobin
MCV (MEAN CORPUSCULAR VOLUME)	93 fl	80.0 - 100.0 fl	Automated Cell Count Calculated
MCH (Mean Corpuscular Hemoglobin)	28.7 pg	27.0 - 34.0 pg	Automated Cell Count Calculated
MCHC (Mean Corpuscular Hemoglobin Concentration)	* 30.9 g/dL	32.0 - 36.0 g/dL	Automated cell counte calculated
PLATELET COUNT	3.02 Lakhs/cumm.	1.4 - 4.0 Lakhs/cumm.	Automated cell counte calculated
RDW-SD	* 11.5 fl	37.0 - 54.0 fl	Automated Cell Count Electrical Impedance
PDW	14.0 fl	9.0 - 17.0 fl	FULLY AUTOMATED HAEMATOLOGY ANALYSER
MPV	9.0 fl	9.0 - 13.0 fl	FULLY AUTOMATED HAEMATOLOGY ANALYSER
PCT	0.271 %	0.17 - 0.35 %	FULLY AUTOMATED HAEMATOLOGY ANALYSER
NEUTROPHILS	58.5 %	50.0 - 70.0 %	FULLY AUTOMATED HAEMATOLOGY ANALYSER
LYMPHOCYTES	34.9 %	20.0 - 40.0 %	Microscopy
MONOCYTES	3.6 %	1.0 - 10.0 %	Microscopy
EOSINOPHILS	2.4 %	1.0 - 6.0 %	Microscopy
BASOPHILS	0.6 %	0.0 - 1.0 %	Microscopy

*** End Of Report ***

Verified By:

DR.K VASUNDHARA, MBBS, MD
CONSULTANT PATHOLOGIST

A UNIT OF SAHRUDAYA HEALTHCARE (KURNOOL) PVT. LTD.

Sy. No. 419/B2, Opp. Old Edga, Near RTC Bus Stand, Kurnool | Ph : 040-6833 4455



Department Of Laboratory



Patient Name : Mr. D GOVINDA RAJ	Age /Sex : 54 Y(s)/Male
Bill Date : 05-Jun-2024 08:32 AM	UMR No. : KUU192174
Report Date : 05-Jun-2024 9:14 AM	Bill No. : KUB328267
Received Date : 05-Jun-2024 12:54 PM	Result No : RES513609
Ref By : DR.ANY CONSULTATION	Org.Name : ARCOFEMI HEALTHCARE PVT LTD
	Specimen : URINE

<u>Parameters</u>	<u>Result</u>	<u>Biological Reference</u>	<u>Method</u>
COMPLETE URINE TEST			
COLOUR	PALE YELLOW	Pale yellow	
PH	6.0	5.0 - 7.5	
SP. GRAVITY	1.020	1.010 - 1.025	
BILE SALTS	NEGATIVE	Negative	
BILE PIGMENTS	NEGATIVE	Negative	
KETONE BODIES	NEGATIVE	Negative	
BLOOD	NEGATIVE	Absent	
SUGAR	NIL	Negative	
ALBUMIN	NIL	Negative	
MICROSCOPIC EXAMINATION			
PUS CELLS	* 2-4	1 - 2	
RBC	NIL	0.0 - 1.0	
EPITHELIAL CELLS	* 1-2	0 - 4	
CASTS	NIL	Absent	
CRYSTALS	NIL	Absent	

BLOOD GROUPING RH TYPING

BLOOD GROUP " O "

Rh TYPING POSITIVE

COMMENTS

- 1.RECONFIRM THE BLOOD GROUP & RH TYPING ALONG WITH CROSS MATCHING BEFORE BLOOD TRANSFUSSION.
- 2.RECENT BLOOD TRANSFUSSION IF ANY,INTERFERES WITH INTERPRETATION OF BLOOD GROUPING.
- 3.SUB GROUPS & BOMBAY BLOOD GROUP NEEDS TO BE FURTHER VERIFIED.



<u>Parameters</u>	<u>Result</u>	<u>Biological Reference</u>	<u>Method</u>
Erythrocyte Sedimentation Rate (ESR)	08 mm/Hour	0 - 9 mm/Hour	westergren's
VITAMIN B12	244.9 pg/mL	Deficient : < 145 pg/mL Indeterminate : 145 - 180 pg/mL Normal : 180 - 914 pg/mL	ECLIA
BLOOD UREA NITROGEN (BUN)	9.0 mg/dL	7.0 - 21.0 mg/dL	Urease kinetic
GLYCOSYLATED HAEMOGLOBIN (HbA1c)	6.0 %	NORMAL : 4.0 - 6.0 % increased risk of diabetes : > 6.0 - 6.40 % indicate diabetes : > 6.5 - 7.0 %	Immunturbidimetric
URINE SPOT PROTEIN CRETININE RATIO			
URINE PROTEINS	10.3 mg/dL	0.0 - 11.9 mg/dL	
URINE CREATININE	105.4 mg/dL	30 - 125 mg/dL	
PROTEIN/CREATININE RATIO	0.09	< 0.2	
VITAMIN D3	18.7 ng/mL	Deficient : < 20 ng/mL Insufficient : 20 - 29 ng/mL Sufficient : 30 - 100 ng/mL Potential toxicity : > 100 ng/mL	Enzyme Linked Fluorescent Assay
LIPID PROFILE			
TOTAL CHOLESTEROL	* 220 mg/dl	0 - 200 mg/dl	Cholesterol esterase
SERUM TRYGLYCERIDES	117 mg/dL	Border line : 200 - 240 mg/dL Desirable : < 200 mg/dL High : > 400 mg/dL	Lipoprotein Lipase
HDL CHOLESTEROL	53 mg/dL	Desirable : >= 40 mg/dL	Direct measure-PEG
LDL CHOLESTEROL	147 mg/dL	Border line : 100 - 130 mg/dL Desirable : < 100 mg/dL High : > 130 mg/dL	Calculated
VLDL	23 mg/dL	0 - 40 mg/dL	Calculated
FBS (FASTING BLOOD GLUCOSE WITH URINE GLUCOSE)			
FASTING PLASMA /SERUM GLUCOSE (FBS)	94 mg/dL	70 - 110 mg/dL	Hexokinase
CREATININE	1.1 mg/dl	0.6 - 1.5 mg/dl	Kinetic jaffe reaction
T3 T4 TSH			
TRI-IODO THYRONINE (T3)	142.2 ng/dL	55 - 205 ng/dL	Enzyme Linked Fluorescence Assay
THYROXINE (T4)	10.48 µg/dL	3.5 - 12.50 µg/dL	Enzyme Linked Fluorescence Assay
THYROID STIMULATING HORMONE (TSH)	1.16 µIU/mL	0.25 - 5.5 µIU/mL	Enzyme Linked Fluorescence Assay
LIVER FUNCTION TESTS (LFT)			
TOTAL BILIRUBIN	0.5 mg/dL	0.2 - 1.1 mg/dL	Diazotization
DIRECT (CONJUGATED) BILIRUBIN	0.1 mg/dL	0.0 - 0.25 mg/dL	Diazotization
SGOT (AST)	24 U/L	9 - 48 U/L	Uv kinetic with P5P
SGPT (ALT)	19 U/L	0.0 - 50.0 U/L	Uv kinetic with P5P
ALKALINE PHOSPHATASE (ALP)	110 U/L	40 - 110 U/L	p-NPP AMP Buffer



<u>Parameters</u>	<u>Result</u>	<u>Biological Reference</u>	<u>Method</u>
TOTAL SERUM PROTEINS	7.9 g/dL	6.4 - 8.2 g/dL	Biuret reaction
SERUM ALBUMIN	4.8 g/dL	3.5 - 5.2 g/dL	BCG Dye Method
URIC ACID	6.5 mg/dL	3.5 - 7.2 mg/dL	URICASE
SERUM PHOSPHATE			
SERUM PHOSPHORUS	3.3 mg/dL	2.9 - 4.5 mg/dL	Phosphomolybdate
PLBS (POST LUNCH BLOOD SUGAR WITH URINE SUGAR)			
POST PRANDIAL PLASMA / SERUM GLUCOSE(PLBS)	105 mg/dL	UPTO - 140 mg/dL	HEXOKINASE

*** End Of Report ***

Verified By:

DR DEVAJIJI SREEATHA

ST



MEDICOVER
HOSPITALS

DEPARTMENT OF CARDIOLOGY

KURNOOL

Name : Mr. D GOVINDA RAJ	Age /Sex : 54 Y(s)/Male
Bill Date : 05-Jun-2024 08:32 AM	UMR No : KUU192174
Received : 05-Jun-2024 8:32 AM	Bill No : KUB328267
Report Date : 05-Jun-2024 11:54 AM	Result No : RES513593
Ref By : DR.ANY CONSULTATION	Org.Name : ARCOFEMI HEALTHCARE PVT LTD

2D ECHOCARDIOGRAPHY/COLOR DOPPLER

MITRAL VALVE : NORMAL
AORTIC VALVE : NORMAL
TRICUSPID VALVE : NORMAL
PULMONARY VALVE : NORMAL
LEFT ATRIUM : 3.1 CMS
AORTA : 3.0 CMS
LEFT VENTRICLE : EDD : 4.7 CMS ESD :2.9 CMS EF : 67 %
RIGHT VENTRICLE : NORMAL
RIGHT ATRIUM : NORMAL
PULMONARY ARTERY : NORMAL
IAS : INTACT
IVS : INTACT
PERICARDIUM : NORMAL
DOPPLER : AJV=1.3m/sec. PJV=1.0m/sec.1+ TR
CONCLUSION : NO RWMA, MILD CONCNETRIC LVH
NORMAL LV SYSTOLIC FUNCTION
GRADE I DIASTOLIC DYSFUNCTION
NO MR, NO AR, TRIVIAL TR, NO PAH
NO PE/NO LA, LV CLOTS

*** End Of Report ***

DR.CARDIOLOGY CONSULTATION
CONSULTANT CARDIOLOGIST



MEDICOVER HOSPITALS-KURNOOL

51/1-E2, 1-E3, 1-E4
Opp Old Eidga, Near RTC Bus Stand,



MEDICOVER HOSPITALS

DEPARTMENT OF RADIOLOGY

KURNOOL

Patient Name	: Mr. D GOVINDA RAJ	Age /Sex	: 54 Y(s)/Male
Bill Date	: 05-Jun-2024 08:32 AM	UMR No.	: KUU192174
Received Date	: 05-Jun-2024 8:32 AM	Bill No.	: KUB328267
Report Date	: 13-Jun-2024 04:27 PM	Result No	: RES515935 / 0
Ref By	: DR.ANY CONSULTATION	Org.Name	: ARCOFEMI HEALTHCARE PVT LTD

X-RAY CHEST PA VIEW

FINDINGS

Cardiac shadow within normal limits.

Aorta normal.

Mediastinum normal.

Lung fields are clear.

Hilar and bronchovascular markings are normal bilaterally.

Both domes of diaphragm are regular.

Both costophrenic angles normal.

Bony thoracic cage and soft tissues of the chest wall normal.

IMPRESSION

No significant abnormality detected.

SUGGESTED CLINICAL CORRELATION.

*** End Of Report ***

DR.C.A.SANTOSH VARMA
CONSULTANT RADIOLOGIST

Verified By :

Approved By :

Dispatched By :

MEDICOVER HOSPITALS (A UNIT OF SAHRUDAYA HEALTH CARE PVT. LTD.)

D. No: 51/1E2, 51/1E3, 51/1E4, Near RTC Bus Stand, Kurnool - 518003, Andhra Pradesh.

Ph: 040 6833 4455