



बैंक ऑफ बड़ौदा
Bank of Baroda

नाम अंजनी कुमार जायसवाल

Name Anjani Kumar Jaiswal

कर्मचारी कूट संख्या

E C Number 103265



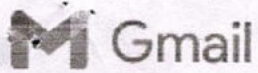
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धारक के हस्ताक्षर
Holder's Signature

जारीकर्ता प्राधिकारी
Issuing Authority

[Handwritten signature]

88460086507



anurag sri <anurag.idc@gmail.com>

Health checkup summery booking confirmation 16/10/2022**Customer Care :Mediwheel : New Delhi** <customercare@mediwheel.in>

Sat, Oct 15, 2022 at 5:29 PM

To: anurag sri <anurag.idc@gmail.com>

Cc: "Wellness : Mediwheel : New Delhi" <wellness@mediwheel.in>

Please note the following health checkup booking confirmation on 16/10/2022

Member Name	Member Age	Mobile	Package Name
MR. SINGH ABHAY PRATAP	27	9839354131	Full Body Health Checkup Male Below 40
MR. JAISWAL ANJANI KUMAR	30	8840086504	Full Body Health Checkup Male Below 40

Regards

Mediwheel

*Ref by
Mediwheel
16/10/22*

**Fwd: Health Check up Booking Re Schedule Request(bobE15514),Package Code-
PKG10000238, Beneficiary Code-19579**

Anjani Jaiswal <anjanijaiswal181290@gmail.com>

Thu 10/13/2022 5:31 PM

To: SIDHAULI, Lucknow <SIDHAU@bankofbaroda.com>

****सावधान:** यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें या अटैचमेंट ना खोलें.

****CAUTION:** THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON LINKS OR OPEN ATTACHMENTS UNLESS YOU KNOW THE SENDER.

----- Forwarded message -----

From: **Mediwheel** <customercare@policywheel.com>

Date: Thu, 13 Oct 2022 at 4:51 PM

Subject: Health Check up Booking Re Schedule Request(bobE15514),Package Code-PKG10000238, Beneficiary Code-19579

To: ANJANIJAISWAL181290@GMAIL.COM <ANJANIJAISWAL181290@gmail.com>

Cc: Mediwheel CC <customercare@mediwheel.in>, Mediwheel CC <mediwheelwellness@gmail.com>

011-41195959

Email:wellness@mediwheel.in

Dear **MR. JAISWAL ANJANI KUMAR,**

Due to unavoidable circumstances, we regret to state that your following request for Health Checkup appointment Re Schedule by provider

Booking Code : bobE15514

Appointment Date : 16-10-2022

Appointment Time : 9:30am-12:30pm

Provider Name : Chandan Healthcare Limited

Address of Diagnostic/Hospital : Indradeep Complex, Sanjay Gandhi Puram

City : Lucknow

State : Uttar Pradesh

Pincode : 226016

You are requested to login again and raise a fresh request. We regret for the inconvenience caused



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. JAISWAL ANJANI KUMAR
EC NO.	103265
DESIGNATION	BRANCH OPERATIONS
PLACE OF WORK	SIDHAULI
BIRTHDATE	18-12-1990
PROPOSED DATE OF HEALTH CHECKUP	09-07-2022
BOOKING REFERENCE NO.	22S103265100021664E

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 **08-07-2022** till **31-03-2023** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee 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,

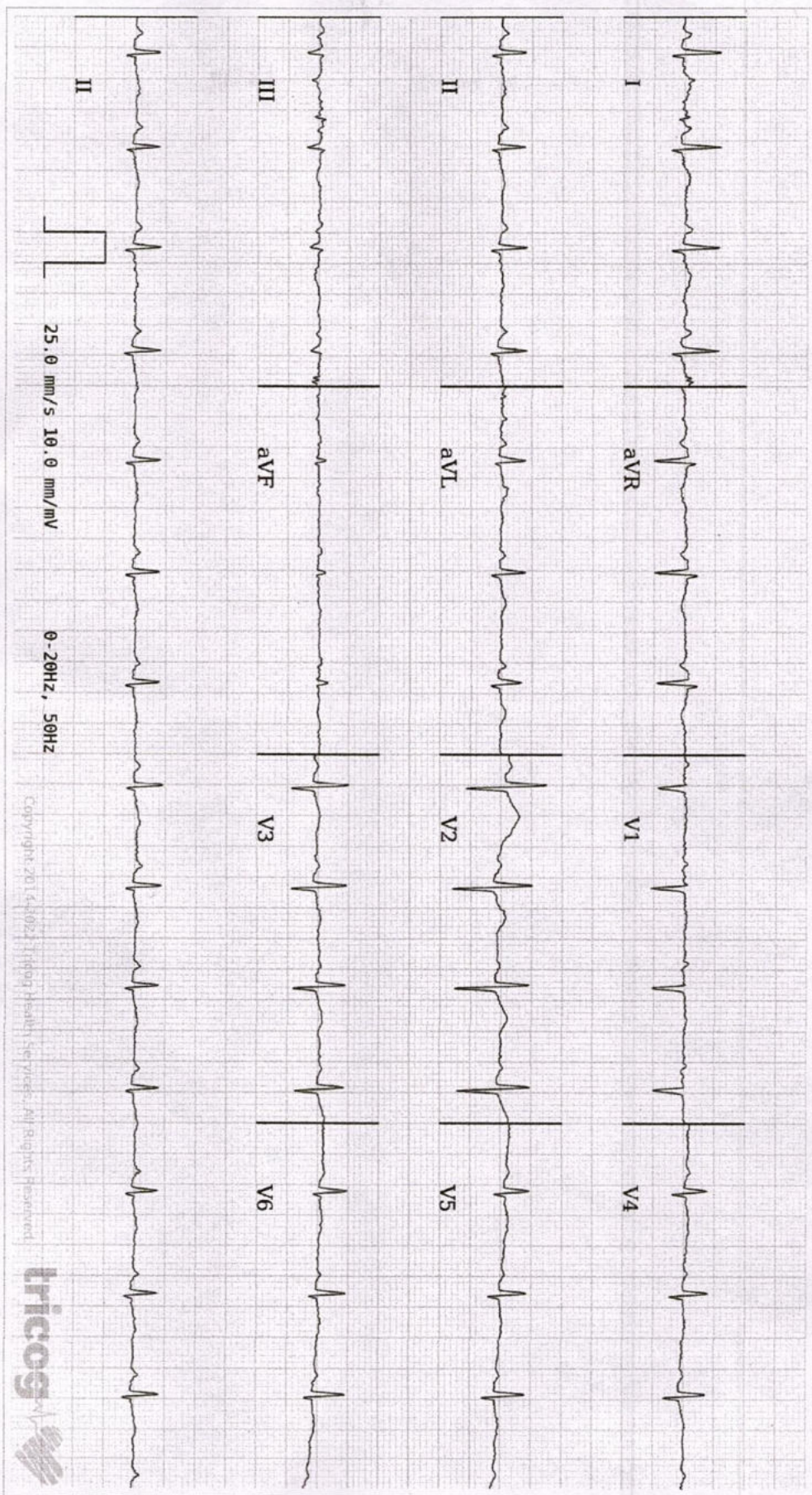
Sd/-

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))

Age / Gender: 31/Male
 Patient ID: IDCDD0222572223
 Patient Name: Mr. ANJANI KUMAR JAISWAL

Date and Time: 16th Oct 22 10:24 AM



AR: 89bpm VR: 89bpm QRSD: 68ms QT: 348ms QTc: 423ms PRT: 136ms P-R-T: 20° 16° 18°

25.0 mm/s 10.0 mm/mV 0-20Hz, 50Hz

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

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.

AUTHORIZED BY



Dr. Chait
 MD, DM: Cardiology
 63382

REPORTED BY



Dr. Bharati K

72470



INDRA DIAGNOSTIC CENTRE

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



Patient Name	: Mr.ANJANI KUMAR JAISWAL	Registered On	: 16/Oct/2022 09:59:14
Age/Gender	: 31 Y 9 M 28 D /M	Collected	: 16/Oct/2022 10:16:58
UHID/MR NO	: IDCD.0000154983	Received	: 16/Oct/2022 10:44:11
Visit ID	: IDCD0222572223	Reported	: 16/Oct/2022 13:57:41
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
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Blood Group (ABO & Rh typing) * , Blood

Blood Group	O
Rh (Anti-D)	POSITIVE

Complete Blood Count (CBC) * , Whole Blood

Haemoglobin	15.40	g/dl	1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl 1 Mo- 10.0-18.0 g/dl 3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl
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TLC (WBC)	7,400.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
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DLC

Polymorphs (Neutrophils)	64.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	30.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	5.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	1.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE

ESR

Observed	8.00	Mm for 1st hr.
Corrected	NR	Mm for 1st hr. <9
PCV (HCT)	47.00	% 40-54

Platelet count

Platelet Count	3.40	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.10	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	38.60	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.37	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	11.80	fL	6.5-12.0	ELECTRONIC IMPEDANCE

RBC Count

RBC Count	5.45	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
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INDRA DIAGNOSTIC CENTRE

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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	88.00	fl	80-100	CALCULATED PARAMETER
MCH	28.20	pg	28-35	CALCULATED PARAMETER
MCHC	32.00	%	30-38	CALCULATED PARAMETER
RDW-CV	13.00	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	42.10	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	4,736.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	74.00	/cu mm	40-440	



Dr. Shoaib Irfan (MBBS, MD, PDCC)





INDRA DIAGNOSTIC CENTRE

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



Patient Name	: Mr.ANJANI KUMAR JAISWAL	Registered On	: 16/Oct/2022 09:59:14
Age/Gender	: 31 Y 9 M 28 D /M	Collected	: 16/Oct/2022 14:30:09
UHID/MR NO	: IDCD.0000154983	Received	: 16/Oct/2022 14:53:18
Visit ID	: IDCD0222572223	Reported	: 16/Oct/2022 15:38:57
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
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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:

- 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 diabetes in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impaired Glucose Tolerance.

Glucose PP

Sample: Plasma After Meal

120.10	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD
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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 diabetes in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impaired Glucose Tolerance.



Dr. Shoaib Irfan (MBBS, MD, PDCC)





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Age/Gender	: 31 Y 9 M 28 D /M	Collected	: 16/Oct/2022 10:16:58
UHID/MR NO	: IDCD.0000154983	Received	: 16/Oct/2022 14:11:30
Visit ID	: IDCD0222572223	Reported	: 16/Oct/2022 17:46:09
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
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GLYCOSYLATED HAEMOGLOBIN (HBA1C) **, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.80	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	40.00	mmol/mol/IFCC		
Estimated Average Glucose (eAG)	119	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.

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





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Visit ID	: IDCD0222572223	Reported	: 16/Oct/2022 17:46:09
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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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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.



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





INDRA DIAGNOSTIC CENTRE

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Patient Name	: Mr.ANJANI KUMAR JAISWAL	Registered On	: 16/Oct/2022 09:59:15
Age/Gender	: 31 Y 9 M 28 D /M	Collected	: 16/Oct/2022 10:16:57
UHID/MR NO	: IDCD.0000154983	Received	: 16/Oct/2022 12:32:10
Visit ID	: IDCD0222572223	Reported	: 16/Oct/2022 13:40:23
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) <i>Sample:Serum</i>	7.15	mg/dL	7.0-23.0	CALCULATED
Creatinine <i>Sample:Serum</i>	0.74	mg/dl	0.7-1.3	MODIFIED JAFFES
Uric Acid <i>Sample:Serum</i>	6.30	mg/dl	3.4-7.0	URICASE
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	108.30	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	183.70	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	34.70	IU/L	11-50	OPTIMIZED SZAIZING
Protein	6.27	gm/dl	6.2-8.0	BIRUET
Albumin	4.37	gm/dl	3.8-5.4	B.C.G.
Globulin	1.90	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	2.30		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	90.82	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	1.63	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.61	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	1.02	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) , Serum				
Cholesterol (Total)	161.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	42.40	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
	22.00	mg/dl	10-33	CALCULATED
	110.00	mg/dl	< 150 Normal 150-199 Border 200-499 High >500 Very High	CALCULATED



Dr. Shoaib Irfan (MBBS, MD, PDCC)





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Patient Name	: Mr.ANJANI KUMAR JAISWAL	Registered On	: 16/Oct/2022 09:59:14
Age/Gender	: 31 Y 9 M 28 D /M	Collected	: 16/Oct/2022 14:34:55
UHID/MR NO	: IDCD.0000154983	Received	: 16/Oct/2022 15:05:05
Visit ID	: IDCD0222572223	Reported	: 16/Oct/2022 15:42:03
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
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URINE EXAMINATION, ROUTINE * , Urine

Color	LIGHT YELLOW			
Specific Gravity	1.015			
Reaction PH	Neutral (7.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	ABSENT			MICROSCOPIC EXAMINATION
Pus cells	ABSENT			
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

STOOL, ROUTINE EXAMINATION * , Stool

Color	YELLOWISH
Consistency	SEMI SOLID
Reaction (PH)	Acidic (6.0)
Mucus	ABSENT
Blood	ABSENT
Worm	ABSENT
Pus cells	ABSENT
RBCs	ABSENT





INDRA DIAGNOSTIC CENTRE

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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
Ova	ABSENT			
Cysts	ABSENT			
Others	ABSENT			

SUGAR, FASTING STAGE * , Urine

Sugar, Fasting stage ABSENT gms%

Interpretation:

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

SUGAR, PP STAGE * , Urine

Sugar, PP Stage ABSENT

Interpretation:

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



Dr. Shoaib Irfan (MBBS, MD, PDCC)





INDRA DIAGNOSTIC CENTRE

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Age/Gender	: 31 Y 9 M 28 D /M	Collected	: 16/Oct/2022 10:16:57
UHID/MR NO	: IDCD.0000154983	Received	: 16/Oct/2022 13:22:45
Visit ID	: IDCD0222572223	Reported	: 16/Oct/2022 14:20:40
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
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THYROID PROFILE - TOTAL ** , Serum

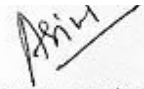
T3, Total (tri-iodothyronine)	95.36	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	5.50	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	6.31	μIU/mL	0.27 - 5.5	CLIA

Interpretation:

0.3-4.5	μIU/mL	First Trimester
0.5-4.6	μIU/mL	Second Trimester
0.8-5.2	μIU/mL	Third Trimester
0.5-8.9	μIU/mL	Adults 55-87 Years
0.7-27	μIU/mL	Premature 28-36 Week
2.3-13.2	μIU/mL	Cord Blood > 37Week
0.7-64	μIU/mL	Child(21 wk - 20 Yrs.)
1-39	μIU/mL	Child 0-4 Days
1.7-9.1	μIU/mL	Child 2-20 Week

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.




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





INDRA DIAGNOSTIC CENTRE

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Ph: 7706041643,7706041644
CIN : U85196UP1992PLC014075



Patient Name	: Mr.ANJANI KUMAR JAISWAL	Registered On	: 16/Oct/2022 09:59:16
Age/Gender	: 31 Y 9 M 28 D /M	Collected	: N/A
UHID/MR NO	: IDCD.0000154983	Received	: N/A
Visit ID	: IDCD0222572223	Reported	: 16/Oct/2022 12:06:15
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 *


(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




Dr. Anoop Agarwal
MBBS,MD(Radiology)





INDRA DIAGNOSTIC CENTRE

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

LIVER

- Liver is normal in size, measures ~ 124.5 mm in cranio caudal extent, shows diffuse bright echoes. No focal lesion is seen.

PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein is normal at the porta.
- Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common duct are normal 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 and shape and cortical echotexture.
- **Small bright echo (calculus) seen in middle calyx, measures ~ 3.0 mms approx**
- 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 and shape and cortical echotexture.
- **Bright echo (calculus) seen in middle calyx, measures ~ 4.0 mms approx.**
- The collecting system is not dilated.





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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

- The upper part of left ureter is normal.
- The vesicoureteric junction is normal.
- Corticomedullary demarcation is clear.
- Renal respiratory excursions are normal.

SPLEEN

- The spleen is normal in size and has a homogenous echotexture. No focal lesion is seen.

ILIAC FOSSA

- Scan over the iliac fossae does not reveal any fluid collection or mass.

URINARY BLADDER

- The urinary bladder is normal. Bladder wall is normal in thickness and regular.

PROSTATE

- Prostate gland is normal in size & echotexture is homogenous.

IMPRESSION

- **GRADE- I FATTY CHANGES LIVER.**
- **BILATERAL RENAL CALCULUS.**

Typed by- VINAY

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

Result/s to Follow:
ECG/EKG



Dr. Anoop Agarwal
MBBS,MD(Radiology)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing *
365 Days Open *Facilities Available at Select Location

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Home Sample Collection
1800-419-0002

Mar. 2018