



# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795,0542-2223232  
CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAJESH KUMAR-PKG10000236	Registered On	: 17/Jan/2022 12:57:09
Age/Gender	: 56 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000025775	Received	: N/A
Visit ID	: CVAR0100032122	Reported	: 17/Jan/2022 14:22:38
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF CARDIOLOGY

### 2D ECHO \*

#### 2D ECHO & COLOUR DOPPLER REPORT

##### AORTIC VALVES STUDY

Ao DIAMETER	3.3	Cms.
LA DIAMETER	2.9	Cms.
CUSP OPENING	1.9	Cms.

##### LEFT VENTRICLE

IVSd	0.9cms
LVIDd	4.1cms
LVPWd	0.9cms
IVSs	1.6cms
LVIDs	2.6cms
LVPWs	1.5cms
EDV	77 ml
ESV	26 ml

EJECTION FRACTION	:	66 %	( 60 ± 7 % )
SHORTENING FRACTION	:	36 %	( 30 ± 5% )

##### RIGHT VENTRICLE

RVIDd : 2.7 cm.

##### DIMENSIONAL IMAGING

MITRAL VALVE	:	NORMAL
AORTIC VALVE	:	NORMAL
PULMONARY VALVE	:	NORMAL
TRICUSPID VALVE	:	NORMAL
INTER VENTRICULAR SEPTUM:		NORMAL
INTERATRIAL SEPTUM	:	NORMAL
INTRACARDIAC CLOT / VEGETATION / MYXOMA :		ABSENT
LEFT ATRIUM	:	NORMAL
LEFT VENTRICLE	:	NORMAL
RIGHT VENTRICLE	:	NORMAL
RIGHT ATRIUM	:	NORMAL
PERICARDIUM	:	NORMAL





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## DEPARTMENT OF CARDIOLOGY

OTHER : NORMAL

### COLOUR FLOW MAPPING

	VELOCITY m/s	PRESSURE GRADIENT mm/Hg	REGURGITATION
MITRAL FLOW	E: NORMAL A:		MILD
AORTIC FLOW		NORMAL	MILD
PULMONARY FLOW		NORMAL	ABSENT
TRICUSPID FLOW		NORMAL	MILD

### SUMMARY OF FINDINGS AND ECHOCARDIOGRAPHY DIAGNOSIS

- LV IS NORMAL IN SIZE AND EJECTION FRACTION. NO LVH. NO RWMA
- THICKENED AORTIC VOLVE ,OTHER PARAMETERS WITHIN NORMAL RANGE
- IAS AND IVS ARE INTACT, NO SHUNT AT GREAT VESSEL
- NO THRUMBUS /CLOT/ EFFUSION

### FINAL IMPRESSION

- NO RESTING RWMA
- GOOD BIVENTRICULAR SYSTOLIC FUNCTION WITH LVEF 66%
- NO LVH WITH GRADE I DIASTOLIC DYSFUNCTION
- NO CHAMBER DILATATION WITH MILD MR AND TR
- SCLEROSIS OF AROTIC VOLVE WITH MILD AR
- NO CLOT/ VEGETATION/ PAH/ EFFUSION

\*\*\* End Of Report \*\*\*



Dr. Ganesh Shankar (MBBS PGDCC)

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.

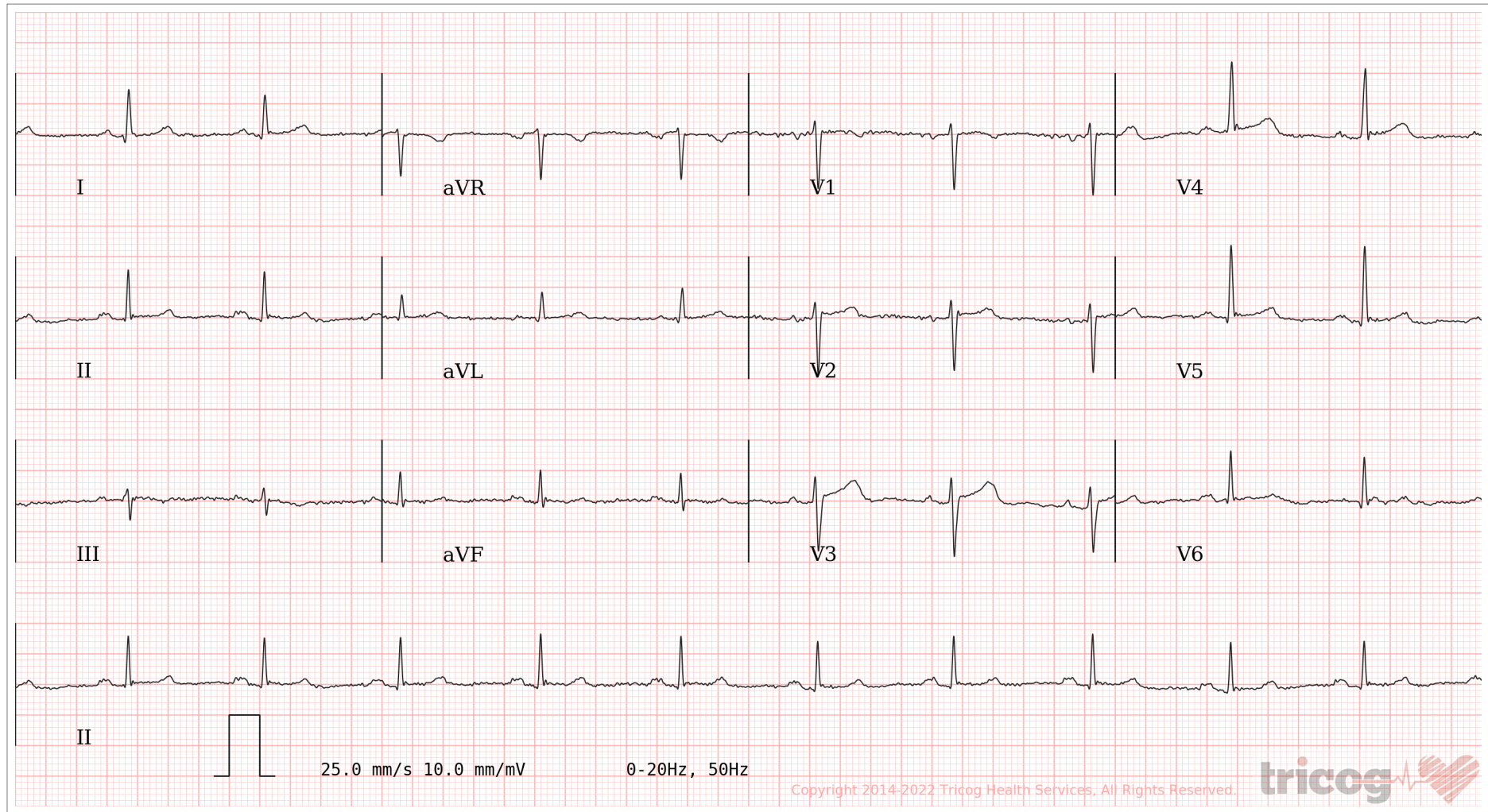
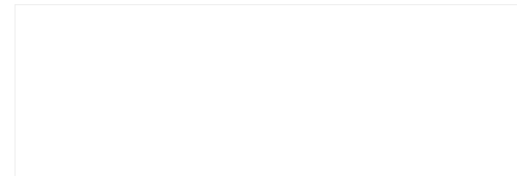
Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, 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: 56/Male  
Patient ID: CVAR0099872122  
Patient Name: Mr.RAJESH KUMAR-PKG10000236

Date and Time: 17th Jan 22 12:19 PM



AR: 67 bpm VR: 67 bpm QRSD: 70 ms QT: 372 ms QTc: 393 ms PRI: 160 ms P-R-T: 54° 31° 22°

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

AUTHORIZED BY

Dr. Charit  
MD, DM: Cardiology

REPORTED BY

Dr Nandhini V

## CHANDAN DIAGNOSTIC CENTRE

Name of Company: *Medi Wheel*

Name of Executive: *Rajesh Kumar*

Date of Birth: ~~10-11-1965~~ - *04-11-1965*

Sex: *Male*

Height: *162 cm.*

Weight: *56 kg.*

BMI (Body Mass Index): *21.3*

Chest (Expiration / Inspiration) *83/87 cm*

Abdomen: *73 cm*

Blood Pressure: (i) *180/92* (ii) *180/92* (iii) *180/90*

Pulse: *98 BPM. Regular*

RR: *20 Respiration*

Ident Mark: *Mole on Neck.*

Any Allergies: *No*

Vertigo: *No*

Any Medications: *No*

Any Surgical History: *No*

Habits of alcoholism/smoking/tobacco:  (i) *chewing Paan & Tobacco - 10 Paan/day - 40 yrs.*

Chief Complaints if any:

Lab Investigation Reports: *Yes ~~At~~.*

Eye Check up vision & Color vision: *Normal & Powerglass - 1545.*

Left eye: *normal*

*(Bifocal Lense)*

Right eye: *normal*

Near vision: *Normal & glass.*



## CHANDAN DIAGNOSTIC CENTRE

Far vision : normal. E Powerglase .

Dental check up : normal .

ENT Check up : normal

Eye Checkup : normal

### Final impression

Certified that I examined Rajesh Kumar S/o or D/o \_\_\_\_\_  
is presently in good health and free from any cardio-respiratory/communicable  
ailment, he/she is fit / Unfit to join any organization.

### Client Signature :-

Rajesh Kumar

Rajesh Kumar

Dr. R.C. ROY  
MBBS., MD. (Radio Diagnosis)  
Reg. No. -26918

Signature of Medical Examiner

Name & Qualification Dr R C Roy, MBBS, MD

Date 17-01-22 Place Varanasi





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Visit ID	: CVAR0099872122	Reported	: 17/Jan/2022 13:32:53
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF HAEMATOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

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

Blood Group	B
Rh ( Anti-D)	POSITIVE

#### COMPLETE BLOOD COUNT (CBC) \* , Blood

Haemoglobin	14.20	g/dl	Male- 13.5-17.5 g/dl Female-12.0-15.5 g/dl
TLC (WBC)	5,600	/Cu mm	4000-10000
<b>DLC</b>			
Polymorphs (Neutrophils )	60.00	%	55-70
Lymphocytes	34.00	%	25-40
Monocytes	3.00	%	3-5
Eosinophils	3.00	%	1-6
Basophils	0.00	%	< 1
<b>ESR</b>			
Observed	10.00	Mm for 1st hr.	
Corrected	6.00	Mm for 1st hr.	< 9
PCV (HCT)	44.30	cc %	40-54
<b>Platelet count</b>			
Platelet Count	2.35	LACS/cu mm	1.5-4.0
PDW (Platelet Distribution width)	nr	fL	9-17
P-LCR (Platelet Large Cell Ratio)	nr	%	35-60
PCT (Platelet Hematocrit)	nr	%	0.108-0.282
MPV (Mean Platelet Volume)	nr	fL	6.5-12.0
<b>RBC Count</b>			
RBC Count	4.75	Mill./cu mm	4.2-5.5
<b>Blood Indices (MCV, MCH, MCHC)</b>			
MCV	93.20	fl	80-100
MCH	30.00	pg	28-35
MCHC	32.20	%	30-38
RDW	12.50	%	11-16
PLT	43.70	fL	35-60
Neutrophils Count	3,360.00	/cu mm	3000-7000
Eosinophils Count (AEC)	168.00	/cu mm	40-440



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





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UHID/MR NO	: CVAR.0000025775	Received	: 17/Jan/2022 14:56:26
Visit ID	: CVAR0099872122	Reported	: 17/Jan/2022 14:56:47
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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

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

Glucose Fasting	90.00	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.

#### Glucose PP

Sample: Plasma After Meal

135.00	mg/dl	<140 Normal 140-199 Pre-diabetes >200 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.



S.N. Sinha

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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### GLYCOSYLATED HAEMOGLOBIN (HBA1C) \*\*, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.30	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	34.00	mmol/mol/IFCC		
Estimated Average Glucose (eAG)	105	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 ABOVE 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.



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





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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>BUN (Blood Urea Nitrogen) *</b> <i>Sample:Serum</i>	9.20	mg/dL	7.0-23.0	CALCULATED
<b>Creatinine</b> <i>Sample:Serum</i>	1.50	mg/dl	0.7-1.3	MODIFIED JAFFES
<b>e-GFR (Estimated Glomerular Filtration Rate)</b> <i>Sample:Serum</i>	58.70	ml/min/1.73m <sup>2</sup>	90-120 Normal - 60-89 Near Normal	CALCULATED
<b>Uric Acid</b> <i>Sample:Serum</i>	4.90	mg/dl	3.4-7.0	URICASE
<b>L.F.T.(WITH GAMMA GT) * , Serum</b>				
SGOT / Aspartate Aminotransferase (AST)	26.10	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	13.60	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	16.80	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)	51.10	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.50	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.20	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.30	mg/dl	< 0.8	JENDRASSIK & GROF
<b>LIPID PROFILE ( MINI ) * , Serum</b>				
Cholesterol (Total)	210.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	50.30	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	137	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	23.08	mg/dl	10-33	CALCULATED
Triglycerides	115.40	mg/dl	< 150 Normal 150-199 Borderline High	GPO-PAP





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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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200-499 High  
>500 Very High



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





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## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

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

Color	PALE YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic ( 6.0 )			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			
<b>Microscopic Examination:</b>				
Epithelial cells	2-3/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	1-2/h.p.f			MICROSCOPIC EXAMINATION
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			



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





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## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### STOOL, ROUTINE EXAMINATION \* , Stool

Color	BROWNISH
Consistency	SEMI SOLID
Reaction (PH)	Basic ( 8.0 )
Mucus	ABSENT
Blood	ABSENT
Worm	ABSENT
Pus cells	1-2/h.p.f
RBCs	ABSENT
Ova	ABSENT
Cysts	ABSENT
Others	ABSENT



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## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### SUGAR, FASTING STAGE \* , Urine

Sugar, Fasting stage	ABSENT	gms%
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#### 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%



S.N. Sinha

Dr.S.N. Sinha (MD Path)





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Visit ID	: CVAR0099872122	Reported	: 18/Jan/2022 11:43:56
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## DEPARTMENT OF IMMUNOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
PSA (Prostate Specific Antigen), Total ** <i>Sample:Serum</i>	0.670	ng/mL	< 3.0	CLIA

#### Interpretation:

1. PSA is detected in the serum of males with normal, benign hypertrophic, and malignant prostate tissue.
2. Measurement of serum PSA levels is not recommended as a screening procedure for the diagnosis of cancer because elevated PSA levels also are observed in patients with benign prostatic hypertrophy. However, studies suggest that the measurement of PSA in conjunction with digital rectal examination (DRE) and ultrasound provide a better method of detecting prostate cancer than DRE alone.
3. PSA levels increase in men with cancer of the prostate, and after radical prostatectomy PSA levels routinely fall to the undetectable range.
4. If prostatic tissue remains after surgery or metastasis has occurred, PSA appears to be useful in detecting residual and early recurrence of tumor.
5. Therefore, serial PSA levels can help determine the success of prostatectomy, and the need for further treatment, such as radiation, endocrine or chemotherapy, and in the monitoring of the effectiveness of therapy.

#### THYROID PROFILE - TOTAL \*\*, Serum

T3, Total (tri-iodothyronine)	120.39	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	9.47	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	6.41	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.





# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795, 0542-2223232  
CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAJESH KUMAR-PKG10000236	Registered On	: 17/Jan/2022 09:28:02
Age/Gender	: 56 Y 0 M 0 D /M	Collected	: 17/Jan/2022 10:23:28
UHID/MR NO	: CVAR.0000025775	Received	: 18/Jan/2022 10:05:06
Visit ID	: CVAR0099872122	Reported	: 18/Jan/2022 11:43:56
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

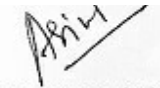
## DEPARTMENT OF IMMUNOLOGY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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- 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)







# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795,0542-2223232  
CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAJESH KUMAR-PKG10000236	Registered On	: 17/Jan/2022 09:28:03
Age/Gender	: 56 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000025775	Received	: N/A
Visit ID	: CVAR0099872122	Reported	: 17/Jan/2022 11:36:35
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF X-RAY

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

#### X-RAY DIGITAL CHEST PA \*

#### X-RAY REPORT

(300 mA COMPUTERISED UNIT SPOT FILM DEVICE)  
CHEST P-A VIEW

- Both lung field did not reveal any significant lesion.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Soft tissue shadow appears normal.
- Bony cage is normal.

Imp-Normal study.

Please correlate clinically.



Dr Raveesh Chandra Roy (MD-Radio)





# CHANDAN DIAGNOSTIC CENTRE

Add: 99, Shivaji Nagar Mahmoorganj, Varanasi  
Ph: 9235447795, 0542-2223232  
CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAJESH KUMAR-PKG10000236	Registered On	: 17/Jan/2022 09:28:03
Age/Gender	: 56 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000025775	Received	: N/A
Visit ID	: CVAR0099872122	Reported	: 17/Jan/2022 10:20:53
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF ULTRASOUND

### MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

#### ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) \*

- **LIVER:** - Normal in size ( 10.3 cm), shape and echogenicity. No focal lesion is seen. No intra hepatic biliary radicle dilation seen.
- **GALL BLADDER :-** Well distended, walls are normal. No e/o calculus / focal mass lesion/ pericholecystic fluid.
- **CBD :-** It measures 4 mm in caliber.
- **PORTAL VEIN:** - It measures 10.1 mm in caliber.
- **PANCREAS:** - Head is visualised, normal in size & echopattern. No e/o ductal dilatation or calcification. Rest of pancreas is obscured by bowel gas.
- **SPLEEN:** - Normal in size ( 8.5 cm), shape and echogenicity.
- **RIGHT KIDNEY:** - Size - 9.2 x 3.9 cm .Renal sinus cyst 14 x 11 mm in size is seen near lower pole of right kidney.Small renal cortical cyst 10.9 mm is noted at upper pole of kidney.
- **LEFT KIDNEY:** - Size ( 9.8 x 4.5 cm. Septated renal cortical cyst measuring 28 x 25 mm in size is seen at lower pole of left kidney.
- **URINARY BLADDER :-** Normal in shape, outline and distension. No e/o wall thickening / calculus.Prevoid urine volume 44 cc.
- **PROSTATE :-** Normal in size (39 x 22 x 21 mm/ 11gms ), shape and echo pattern.
- Visualized bowel loops are normal in caliber. No para-aortic lymphadenopathy
- No free fluid is seen in the abdomen/pelvis.

#### IMPRESSION : Renal cysts as described above.

**Rest of the abdominal organs are normall.**

**Please correlate clinically**

\*\*\* End Of Report \*\*\*

(\*\*) Test Performed at Chandan Speciality Lab.

Result/s to Follow:



HEAD MILL TEST

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





भारत सरकार

Government of India



राजेश कुमार

Rajesh Kumar

जन्म तिथि / DOB : 04/11/1965

पुरुष / Male



6742 0371 6198

आधार - आम आदमी का अधिकार



99, Shivaji Nagar Colony, Mahmoorganj,  
Varanasi, Uttar Pradesh 221010, India

Latitude

25.305303°

Longitude

82.979012°

LOCAL 10:21:36

GMT 04:51:36

MONDAY 01.17.2022

ALTITUDE 18 METER