

प्रति,

समन्वयक,

Mediwheel (Arcofemi Healthcare Limited)

हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ोदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिनका विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	कर्मचारी विवरण
नाम	MR. KUJUR CHITARANJAN
क. क्र.संख्या	122286
पद-नाम	HEAD CASHIER "E" _II
कार्य का स्थान	CHHANAT
जन्म की तारीख	09-10-1995
स्वास्थ्य जांच की प्रस्तावित तारीख	27-03-2024
बुकिंग संदर्भ सं.	23M122286100105490E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ोदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक **25-03-2024** से **31-03-2024** तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलगनक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ोदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)



भारत सरकार
Government of India



5395 0328 1205



Issue Date: 25/07/2014



चितरंजन कुजूर

Chitaranjan Kujur

जन्म तिथि / DOB: 09/10/1995

पुरुष / Male

5395 0328 1205

मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



पता: महादेव कुजूर, 109 बीचपरा बोइरमाल पैकिन
सरायपाली महासमुंद, सरायपाली, बुरोमल, महासमुंद,
छत्तीसगढ़, 493558



Print Date: 08/12/2021

Address: Mahadev Kujur, 109 Beechpara
Boirmal Palkin Sarapali Mahasamund,
Sarapali, Buramal, Mahasamund,
Chhattisgarh, 493558

5395 0328 1205



1047



help@uidai.gov.in



www.uidai.gov.in

Mob. 6262568356

Chitaranjan Kujur





Shree Ram Multispeciality Hospital (SRMH)

Lokah Samasta Sukhino Bhavantu

OPD - ID : 020240000734	PT. TYPE : NEW REGISTRATION	TOKEN NO. : 1
UH-ID : SRMH-24032267	PRINT DATE : 27-03-2024 / 14:07:25	
PATIENT NAME : MR. CHITARANJAN KUJUR	DEPARTMENT : DENTAL	
AGE / SEX : 28-Y 5-M 19-D / MALE	CONSULT-DATE : 27-Mar-2024 - 11:31 AM	
DOB : 09-10-1995	COMPANY NAME : MEDIWHEEL FULL BODY HEALTH ANNUAL PLUS	
MOB-NO : 6262568345	OPD PAID FEE : 0.00	
GUARDIAN NAME : S/o MR. MAHADEV KUJUR	ADDRESS : 1BEECHPARA BOIRMAL PAIKIN SARAIPALI, MAHASAMUND, CG, INDIA, MAHASAMUND, CG	
Weight : <i>76</i>	Temp : <i>97.6</i>	B.P. : <i>130/86</i> Pulse : <i>76</i> SPO2 : <i>97%</i>

Please indicate whether you are presently suffering from anyone of the following symptoms:

Oral Health Status:

- Yes No Dental Sealants Present on Permanent Molars
- Yes No Caries Experience / Restoration History : A filling (Temporary / Permanent) OR a Tooth that is missing because it was extracted as a result of caries. *molar*
- Yes No Untreated Caries / Open Treatment Plan
- Yes No Urgent Treatment: abscess, Nerve Exposure, Advanced Disease State, Signs of Symptoms that include pain / infection / swelling

Treatment Needs:

- Restorative Care- Fillings, crowns, etc.
- Preventative Care-prophylaxis, sealants, fluoride Treatment
- Sedation / Surgery Needs to Complete Treatment

Present chief complaints:- *sr molar tooth filling but after filling tooth was desolved & demand. now. this due to untreated caries require preventive care - prophylaxis, sealants -*

Dr. Signature

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✉ shreeramhospital.op@gmail.com 🌐 www.srmhraipur.com





Shree Ram Multispeciality Hospital (SRMH)

Lokah Samasta Sukhino Bhavantu

PT. NAME : MR. CHITARANJAN KUJUR
MOBILE NO : 6262568356
DOCTOR : DR. AJIT KUMAR
REFERRED BY : SELF

AGE / SEX : 28/MALE
UH ID NO. : SRMH-24032267
COLLECTION : 27-03-2024
REPORTING : 27-Mar-2024
TEST NO : 426

HAEMATOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
CBC (COMPLETE BLOOD COUNT)			
HAEMOGLOBIN (Hb)	12.7	gm/dL	13.5 - 17.5
TOTAL RBC COUNT	5.21	Million/cumm	4.5 - 5.9
HAEMATOCRIT (PCV)	38.1	%	41.5 - 50.4
RBC INDICES			
MCV	76.9	fL	78 - 96
MCH	24.3	pg	27 - 32
MCHC	31.6	%	33 - 37
RDW	15.5	%	11 - 16
TOTAL WBC COUNT (TLC)	7000	/cumm	4000 - 11000
DIFFERENTIAL COUNT			
Neutrophils	63	%	40 - 70
Lymphocytes	28	%	22 - 48
Eosinophils	04	%	0 - 6
Monocytes	05	%	0 - 8
Basophils	00	%	00 -
PLATELET COUNT	2.98	/ μ L	1.50 - 4.50
PCT	0.23	%	0.10 - 0.28
MPV(MEAN PLATELET VOLUME)	7.9	fL	8 - 11
PDW	10.2	%	11 - 18

-- End Of Report --

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HAEMATOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
ESR (ERYTHROCYTE SEDIMENTATION RATE)			
ESR	20	mm after 1 hrr	0 - 20

-- End Of Report --


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TEST NO
426

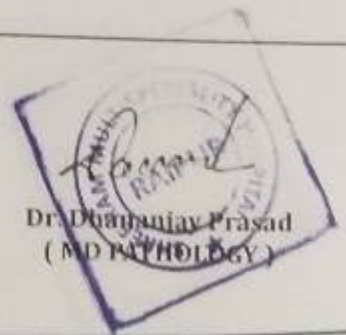
HAEMATOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
BLOOD GROUPING AND RH TYPING			
BLOOD GROUP	"AB"		-
RH FACTOR	POSITIVE		-

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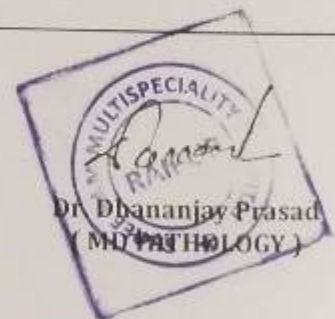
BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
BLOOD SUGAR - FASTING AND PP			
BLOOD SUGAR FASTING	76.5	mg/dL	60 - 120
BLOOD SUGAR PP	86.8	mg/dL	80 - 140

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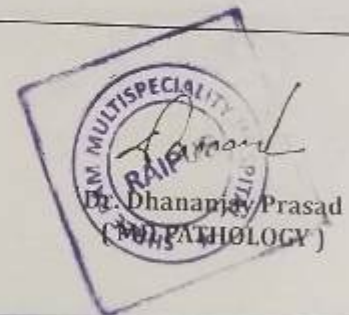
CLINICAL PATHOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
URINE SUGAR FASTING AND PP			
URINE SUGAR - FASTING	Absent		Absent -
URINE SUGAR - PP	Absent		Absent -

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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
CREATININE			
CREATININE	0.69	mg / dl	0.6 - 1.2

-- End Of Report --


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Dr. Dhnanjay Prasad
(MD PATHOLOGY)

Near Railway Under Bridge, Basant Vihar Gate No. 1, Gondwara Chowk,
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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
URIC ACID			
URIC ACID	5.04	mg/dL	3.6 - 7.7

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TEST NO
 426

BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
HBA1c (GLYCOSYLATED HEAMOGLOBIN)			
HBA1c	4.57	%	Normal Range : <6% - Good Control : 6 - 7% - Fair Control : 7 - 8% - Unsatisfactory Control : 8-10% - Poor Control : >10% -
Estimated average plasma glucose	85.3	mg/dl	80 - 120

Interpretation: As per American Diabetes Association(ADA)

Non diabetic adults >= 18 years	<5.7
At risk (prediabetes)	5.7 - 6.4
Diagnosing Diabetes	>= 6.5
Therapeutic goals for glycemic control	Good of Therapy > 19 years - <7.0 <19 years - <7.5

NOTE:

- HbA1c reflects long term fluctuations in the blood glucose concentration
- A diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled.

Significance of Test:

HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations

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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
LIVER FUNCTION TEST (LFT)			
BILIRUBIN TOTAL	0.52	mg/dL	0.2 - 1
BILIRUBIN DIRECT	0.24	mg / dl	0.1 - 0.6
BILIRUBIN INDIRECT	0.28	mg / dl	0.1 - 0.4
SGOT	40.8	U / L	10 - 55
SGPT	38.6	U / L	0 - 40
ALKALINE PHOSPHATASE	203.4	U / L	0 - 270
TOTAL PROTEIN	6.62	g / dl	6 - 8
ALBUMIN	3.87	g/dl	3.5 - 5.0
GLOBULIN	2.75	g / dl	2 - 3.5
A/G RATIO	1.40	g/dl	1 - 2.5

Clinical Significance:

Alanine transaminase (ALT)

ALT is an enzyme found in the liver that helps your body metabolize protein. When the liver is damaged, ALT is released into the bloodstream and levels increase.

Aspartate transaminase (AST)

AST is an enzyme that helps metabolize alanine, an amino acid. Like ALT, AST is normally present in blood at low levels. An increase in AST levels may indicate liver damage or disease or muscle damage.

Alkaline phosphatase (ALP)

ALP is an enzyme in the liver, bile ducts and bone. Higher-than-normal levels of ALP may indicate liver damage or disease, such as a blocked bile duct, or certain bone diseases.

Albumin and total protein

Albumin is one of several proteins made in the liver. Your body needs these proteins to fight infections and to perform other functions. Lower-than-normal levels of albumin and total protein might indicate liver damage or disease.

Bilirubin

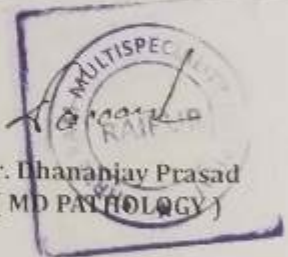
Bilirubin is a substance produced during the normal breakdown of red blood cells. Bilirubin passes through the liver and is excreted in stool. Elevated levels of bilirubin (jaundice) might indicate liver damage or disease or certain types of anemia.

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Dr. Dhananjay Prasad
 (MD PATHOLOGY)



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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
LIPID PROFILE			
CHOLESTEROL	184.6	mg / dl	150 - 220
SERUM TRIGLYCERIDE	152.3	mg / dl	60 - 165
HDL	39.5	mg / dl	35 - 80
LDL	145.1	mg/dL	90 - 160
VLDL	30.46	mg/dl	20 - 50
CHOLESTEROL / HDL RATIO	4.67	mg/dl	3.5 - 5.5
LDL/HDL Ratio	3.67	mg/dl	2.5 - 3.5
TRIGLYCERIDES/HDL RATIO	3.85	mg/dl	2.0 - 4.0

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Shree Ram Multispeciality Hospital (SRMH)

L o k a h S a m a s t a S u k h i n o B h a v a n t u

Mr CHITARANJAN KUJUR

Age: 28 Years

Sex: Male

Sample Collected At:

Ref. By: Dr. AJIT KUMAR

Registered: 27 Mar, 24 12:40 PM

Collected: 27 Mar, 24 12:50 PM

Reported: 27 Mar, 24 06:05 PM

TFT


Thyroid Function Test (TFT)




Investigation	Observed Value	Unit	Biological Reference Interval
THYROID SERUM HORMONS			
Serum Triiodothyronine (T3)	1.06	ng/mL	0.89 - 1.87
Serum thyroxine (T4)	10.24	ug/dL	5.1 - 14.28
Thyroid Stimulating Hormone (TSH)	2.21	µIU/mL	0.66 - 5.67



Comments:-

- (i) Ethnicity, iodine intake, gender, age, body mass index and Exercise influences the reference range of Thyroid hormones and serum TSH concentrations.
- (ii) Changes in Thyroid Hormones (especially T3) and TSH may be seen as early as 24 hours after the onset of non-thyroid illness. (Poor nutrition/starvation, sepsis, burns, malignancy, myocardial infarction, post-surgery, and with chronic liver and renal disease)
- (iii) Serum total T4 and T3 concentrations increase to approximately 150% of non-pregnant values – this occurs during the first half of pregnancy and is maintained thereafter until parturition. Free T4 concentrations also change during pregnancy. In the first trimester a transient rise is often observed.
- (iv) Measurement of FT4 and FT3 is best avoided in patients receiving heparin therapy. (When indicated, blood sample should be taken 10 hours after the last injection of heparin, and analyzing it without delay, can reduce the risk of artifactual hyperthyroxinaemia.)
- (v) Phenytoin, carbamazepine and furosemide cause artifactual increase in free T4 (FT4) and decrease in total T4.


 Dr. D. Prasad
 M.D. (Pathologist)

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Mr. CHITARANJAN KUJUR

Age: 28 Years

Sex: Male

Sample Collected At:

Ref. By: Dr.AJIT KUMAR

Registered: 27 Mar, 24 12:59 PM

Collected: 27 Mar, 24 01:05 PM

Reported: 28 Mar, 24 05:38 PM

BUN / Creatinine Ratio PANAL

Investigation	Observed Value	Unit	Biological Reference Interval
BUN			
BUN	13.11	mg/dL	7.00 - 20.00
Serum Creatinine	0.69	mg/dL	0.55 - 1.20
BUN / Creatinine Ratio	19.01		10:1 - 20:1

Blood urea nitrogen (BUN) is a waste product produced when the liver breaks down protein. The kidneys then filter it out of the blood and eliminate it through urine. Creatinine is a waste product created by the breakdown of phosphocreatine, a molecule stored in muscle tissue. The kidneys filter creatinine from the blood, and its levels in the body reflect the efficiency of the kidney's excretory function. therefore, BUN and creatinine are useful markers in assessing kidney health because they help doctors evaluate the kidney's filtration rate.



Dr. D. Prasad
M.D. (Pathologist)

END OF REPORT
Near Railway Under Bridge, Basant Vihar Gate No. 1, Gondwara Chowk,
Gudhiyari, Raipur (Chhattisgarh)

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24/7
Emergency





Mr.CHITARANJAN KUJUR

Sample Collected At :

Registered : 27 Mar,24 02:40 PM

Age: 28 Years

Ref By : Dr.AJIT KUMAR

Collected : 27 Mar,24 02:51 PM

Sex: Male

Reported : 28 Mar,24 04:23 PM

GAMAMA GLUTAMYL TRANSFERASE (GGT)

INVESTIGATION	RESULT	REFERENCE VALUE	UNIT
GAMMA – GLUTAMYL TRANSFERASE (GGT) , SERUM	16.33	12.00-18.00	U/L

GENDER	-	NORMAL RANGE(U/L)
MALE	-	12.00-18.00
FEMALE	-	6.00-29.00

COMMENTS:-

Gamma – Glutamyl Transferase (Ggt) Is An Enzyme That Is Found In Many Organs Throughtout The Body , With The Highest Concentrations Found In The Liver .Ggt Is Elevated In The Blood In Most Diseases That Cause Damage To The Liver Or Bile Ducts ,This Test Measures The Level Of Ggt In A Blood Samle.



DR. DHARMANJAY PRASAD

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Shree Ram Multispeciality Hospital (SRMH)

L o k a h S a m a s t a S u k h i n o B h a v a n t u

PT. NAME : MR. CHITARANJAN KUJUR
MOBILE NO : 6262568356
DOCTOR : DR. AJIT KUMAR
REFERRED BY : SELF

AGE / SEX : 28/MALE
UH ID NO. : SRMH-24032267
COLLECTION : 27-03-2024
REPORTING : 27-Mar-2024

TEST NO
426

CLINICAL PATHOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
URINE ROUTINE AND MICROSCOPY			
PHYSICAL EXAMINATION			
QUANTITY	20	ml	-
COLOUR	Pale Yellow		Pale Yellow -
APPEARANCE	Clear		Clear -
REACTION	Acitic		Acitic -
CHEMICAL EXAMINATION			
ALBUMIN	Absent		Absent -
SUGAR	Absent		Absent -
KETONE	Absent		Absent -
BILE SALT	Absent		Absent -
BILE PIGMENT	Absent		Absent -
MICROSCOPIC EXAMINATION			
PUS CELLS	2-3	/hpf	2 - 5
EPITHELIAL CELLS	1-2	/hpf	1 - 5
RBC	Nil	/hpf	0 - 3
CAST	Nil	/lpf	Nil -
YEAST	Nil		Nil -
CRYSTAL	Nil	/lpf	Nil -
Bacteria	Nil		Nil -
OTHERS	-		-

-- End Of Report --

LAB TECHNICIAN

Note : This Report is not for medicolegal purpose



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Shree Ram Multispeciality Hospital (SRMH)

Lokah Samasta Sukhino Bhavantu

OPD-ID : 020240000734
UHI-ID : SRMH-24032267

PT. TYPE : NEW REGISTRATION
PRINT DATE : 27-03-2024 / 14:07:25

TOKEN NO. : 1

PATIENT NAME	: MR. CHITARANJAN KUJUR	DEPARTMENT	: ENT
AGE / SEX	: 28-Y 5-M 19-D / MALE	CONSULT-DATE	: 27-Mar-2024 - 11:31 AM
DOB	: 09-10-1995	COMPANY NAME	: MEDIWHEEL FULL BODY HEALTH ANNUAL PLUS
MOB-NO	: 6262568345	OPD PAID FEE	: 0.00
GUARDIAN NAME	: S/o MR. MAHADEV KUJUR	ADDRESS	: 1BEECHPARA BOIRMAL PAIKIN SARAIPALI, MAHASAMUND, CG, INDIA, MAHASAMUND, CG
Weight :	Temp : 97.6	B.P. : 130/70	Pulse : 76
			SPO2 : 96%

Please indicate whether you are presently suffering from anyone of the following symptoms:

Yes No

Ears, Nose, Mouth, Throat

Ear pain	0	<input checked="" type="checkbox"/>
Ear itch	0	<input checked="" type="checkbox"/>
Ear drainage	0	<input checked="" type="checkbox"/>
Dizziness/ Loss of balance	0	<input checked="" type="checkbox"/>
Loss of Hearing	0	<input checked="" type="checkbox"/>
Popping Noise	0	<input checked="" type="checkbox"/>
Tinnitus	0	<input checked="" type="checkbox"/>
Nosebleeds	0	<input checked="" type="checkbox"/>
Post-nasal Drip	0	<input checked="" type="checkbox"/>
Sinus pain	0	<input checked="" type="checkbox"/>
Sinus pressure	0	<input checked="" type="checkbox"/>
Nasal congestion	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Loss of smell/taste	0	<input checked="" type="checkbox"/>
Hoarseness	0	<input checked="" type="checkbox"/>
Sore Throat	0	<input checked="" type="checkbox"/>
Throat tickle	0	<input checked="" type="checkbox"/>
Dry Mouth / Throat	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Throat clearing	0	<input checked="" type="checkbox"/>
Snoring	0	<input checked="" type="checkbox"/>

Presenting complaints:-

Dr. Signature

1) SPIROMETRY. Exercise,
 2) AZEFLON Nasal drop spray. . IT. NOSE.
 congestion (block)

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ECHOCARDIOGRAPHY REPORT

Name	Mr. Chitranjan Kunjur	Age / Sex	28 years / Male
Date	27-03-2024	UHID no	24032267

PULMOANRY VELOCITY : 0.86 m/s

AORTIC VELOCITY : 1.22 m/s

TRICUSPID VELOCITY : 1.89 m/s

PASP : 18 mmHg + RAP

M-Measurement Value

Aorta	2.4	LVEDD	3.9
LA	2.9	IVSD	1.1
LVEF	>60%	LVPWD	1.1

FINAL IMPRESSION

- > Mild LVH
- > NO RWMA
- > Normal LV Systolic Function
- > LVEF >60%
- > Trace MR/TR, PASP 18 mmHg + RAP
- > No Clot/PE / Vegetation

Dr. Nikhil Motiramani
(MBBS, MD, DM Card)

Dr. Raghvesh Ojha
(MBBS, PGDCC clinical cardiology)

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Mr CHITARANJAN
F 28Y 063Kg
11:57 AM
27/03/2024

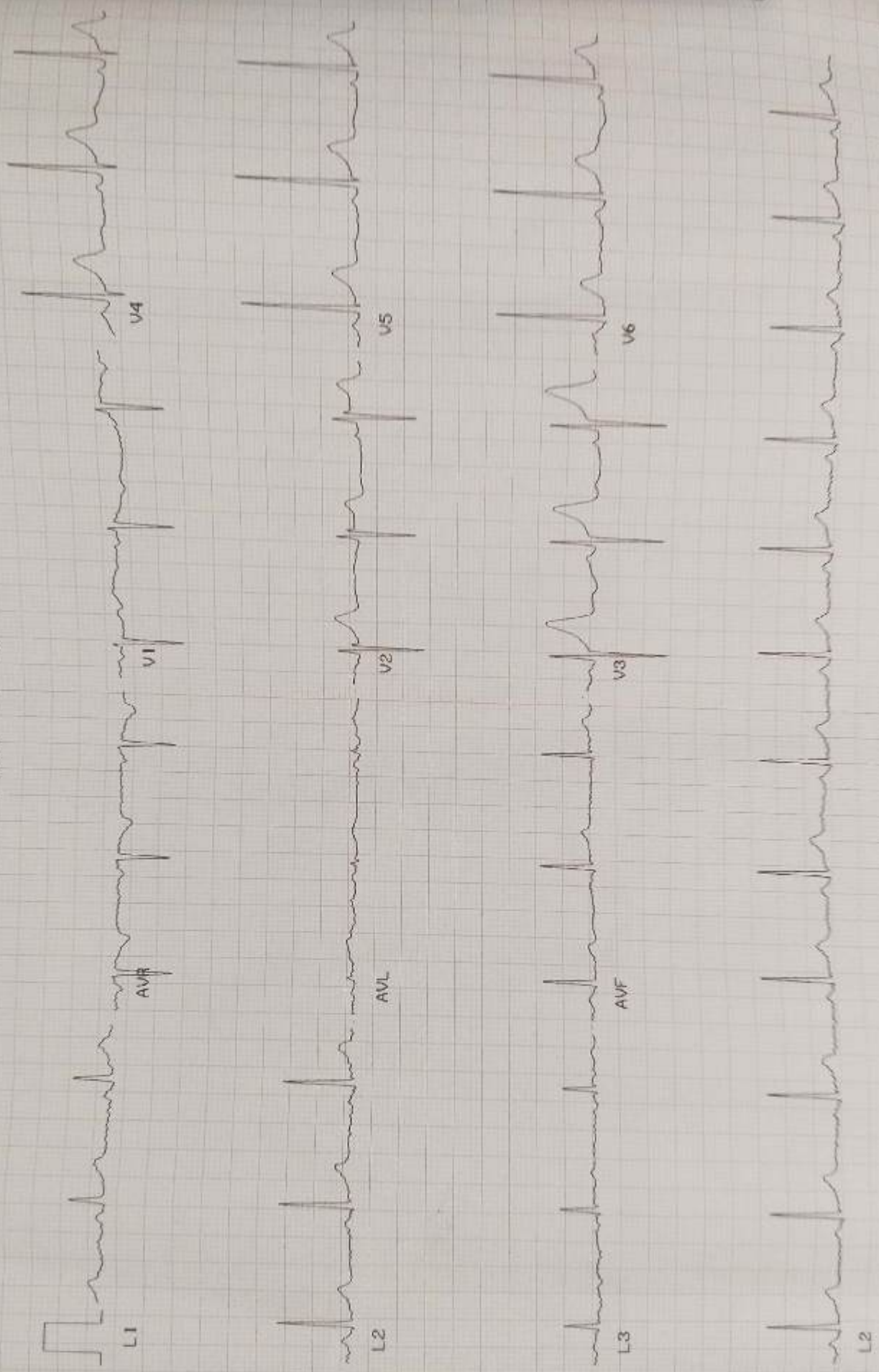
AUTO 12LS
BLC-Y

25 mm/s
10mm/mV
0.1 - 35Hz
50Hz ReJ-Y

P = 80 ms
QRS = 97 ms
PR = 122 ms
QT = 352 ms
QTc = 386 ms

To be clinically correlated:
Sinus Rhythm
Normal ECG

HR = 72bpm





SHRI RAM IMAGING & DIAGNOSTIC CENTER

Ground Floor, Raheja Towers, Jail Road, Raipur
Ph. : 0771-4099090, Mo. : 9294870000

DR ANAND BANSAL

MBBS MD DNB(Radiodiagnosis)
(IMS BHU) (Gold Medalist)
Ex Senior Resident (AIIMS Raipur)
Ex Assistant Professor (Pt JNMC Raipur)
Reg. No. - CGMC 6359/2015

5D SONOGRAPHY -16 SLICE CT SCAN - DIGITAL X RAY - PATHOLOGY - BIOPSY

PATIENT NAME: CHITRANJAN KUJUR	DATE: 27/03/2024
REF PHY: SHRIRAM MULTISPECIALITY HOSPITAL GUDHIYARI, PATIENT ID: 46617	AGE/SEX: 28 Years/MALE

USG WHOLE ABDOMEN

Liver: Liver is normal in size (10.8 cm), smooth in outline & echotexture.

Billiry system: IHBR's are not dilated. CBD is not dilated.

Liver vessels: Portal vein and hepatic veins are normal.

Gall bladder: Distended with anechoic lumen and normal wall thickness.

Pancreas & Paraaortic Region: Normal. Pancreatic duct not dilated.

Spleen: Is normal in size measures (8.2 cm) with normal echotexture.

Kidneys	RIGHT	LEFT
SIZE	9.9 x 5.1 cm	10.5 x 5.0 cm
CORTICAL ECHOGENICITY	Normal	Normal
CORTICOMEDULLARY DIFFERENTIATION	Maintained	Maintained
PELVICALYCEAL SYSTEM	Not dilated	Not dilated
URETER	Not dilated	Not dilated
CALCULUS	No	No

Urinary bladder: The urinary bladder shows physiological distention. It shows normal wall thickness.

Prostate: is normal in size measures 2.2 x 3.3 x 2.5 cm (weight 9.7 gm) with normal shape & echotexture.

Fluid: There is no free or loculated fluid collection in abdomen or pelvis.

Bowel loops are grossly normal.

No significant lymphadenopathy is noted.



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IMPRESSION:

- USG ABDOMEN WITHIN NORMAL LIMITS.

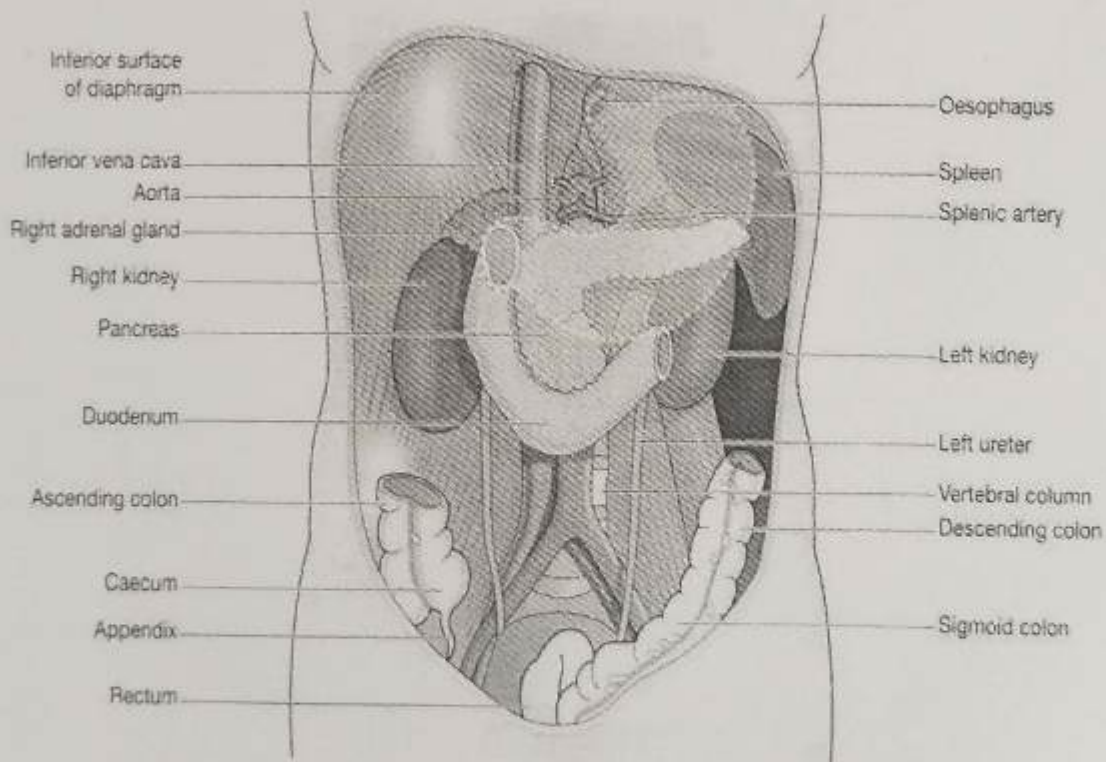
Advised clinical correlation/further evaluation if clinically indicated.

DR ANAND BANSAL
MD DNB RADIO DIAGNOSIS
CONSULTANT RADIOLOGIST
CGMC 2015/6359



Typist: DEKUMAR SAHU

This report is for perusal of the doctor only not the definitive diagnosis; findings have to be clinically correlated. Ultrasound has its limitations in obese patients and in retroperitoneal organs. All congenital abnormalities cannot be detected on ultrasound. This report is not for medico-legal purposes.





Department of Radiology

NAME -;	MR.CHITARANAN KUJUR	AGE - 28 YEAR /MALE
REF.BY -;	SHREE RAM MULTI SPECIALITY HOSPITAL	DATE - 27/03/2024

X – RAY CHEST PA VIEW.

FINDINGS:

- Bilateral lung parenchyma is clear.
- Both apices free.
- Trachea in mid line.
- C T ratio within normal limits.
- Both hila are normal.
- Both costo & cardiophrenic angles are clear.
- Bony cage normal.
- Soft tissue appears normal.

IMPRESSION : No significant abnormality detected.

DR ANAND BANSAL

MD DNB RADIODIAGNOSIS

CONSULTANT RADIOLOGIST

CGMC 2015/6359



