## **Chandan Diagnostic**



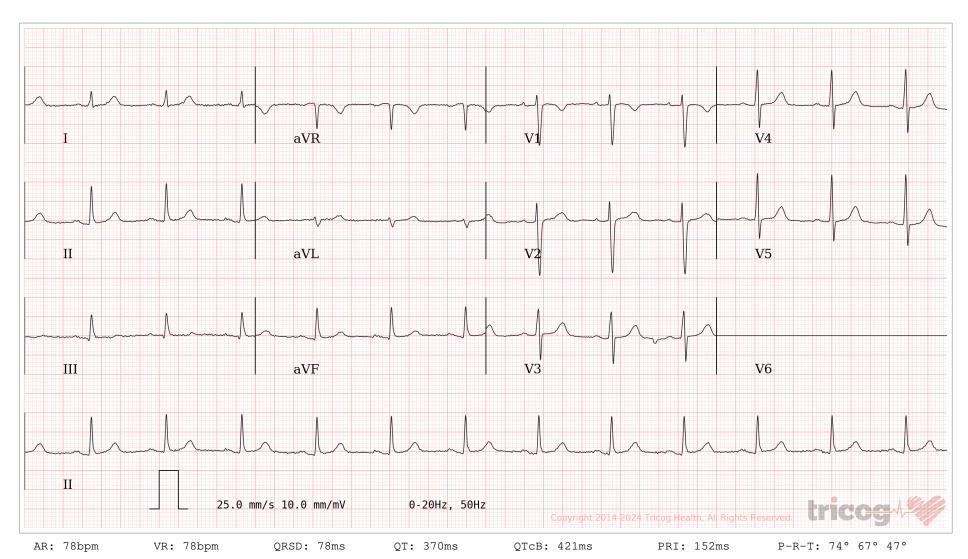
Age / Gender: 48/Female

Date and Time: 8th Mar 24 9:28 AM

Patient ID: CVAI

CVAR0124322324

Patient Name: Mrs.KUSUM MAURYA-BOBS10197



ECG Within Normal Limits: Poor Quality ECG, Please repeat ECG as interpretation may be impaired, Sinus Rhythm. Please repeat ECG with the same ID. Please correlate clinically.

AUTHORIZED BY

Dr. Charit MD, DM: Cardiology

Di i i as

63382

KMC 34384

REPORTED BY

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.





I Kusum Maunya, Don't wort to give stool & stouting and pap sames and Grucouse PP to my own which

Kunsum Mausya 08/03/24

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

nandan Diagnostic Cen-39, Shivaji Nagar, Mahmoorga Varanasi 221010 (U.P.) Phone No.:0542-2223232





## भारत सरकार Government of India





कुसुम मौर्या Kusum Maurya जन्म तिथि / DOB : 10/06/1975



महिला / FEMALE



4984 1334 4991

मेरा आधार, मेरी पहचान



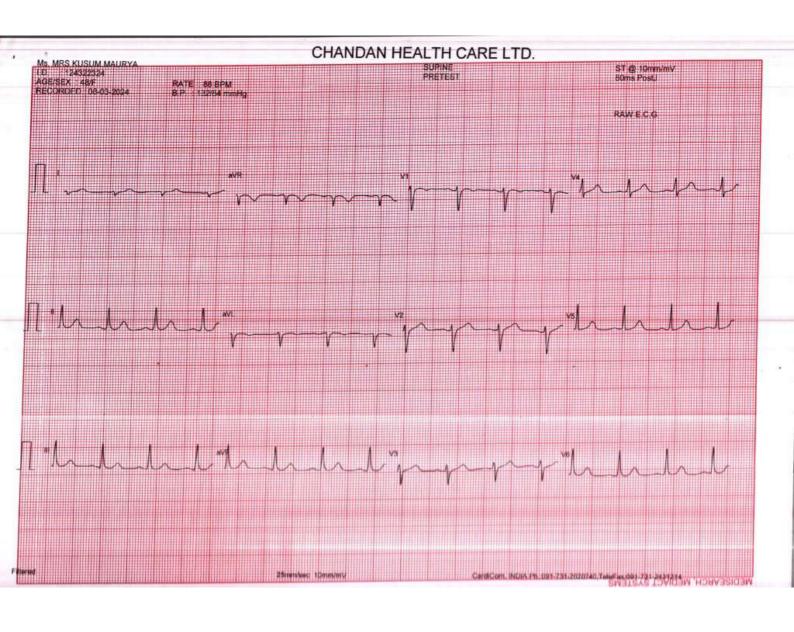
D63/6B-99, Shivaji Nagar Colony, Mahmoorganj, Varanasi, Uttar Pradesh 221010, India

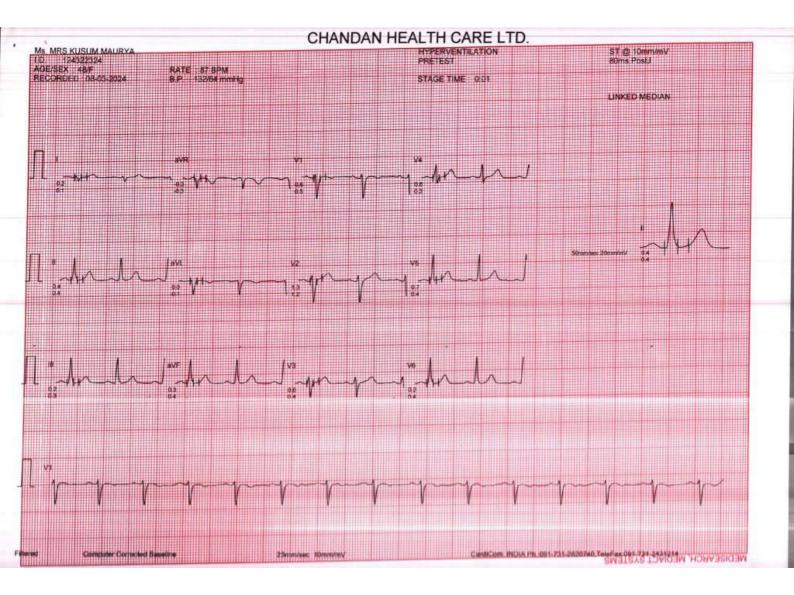
Latitude 25.305321°

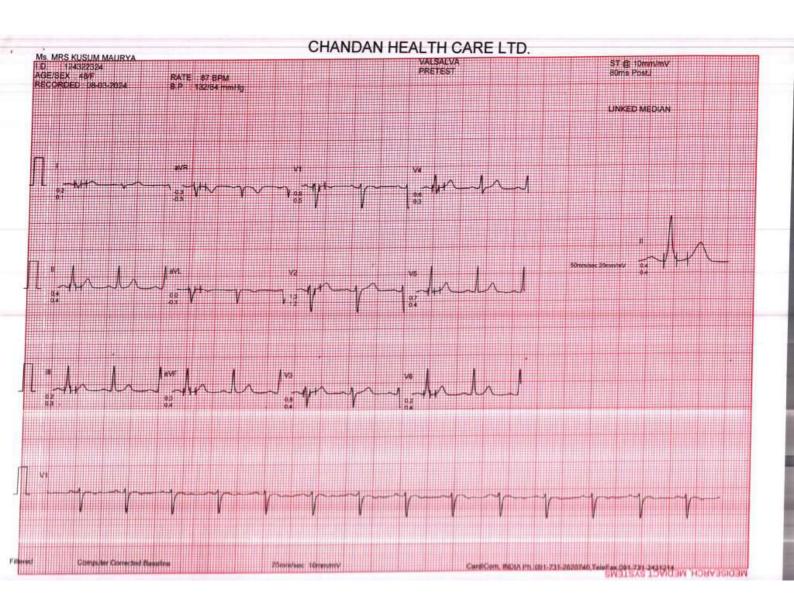
LOCAL 09:57:50 GMT 04:27:50 Longitude 82.979067°

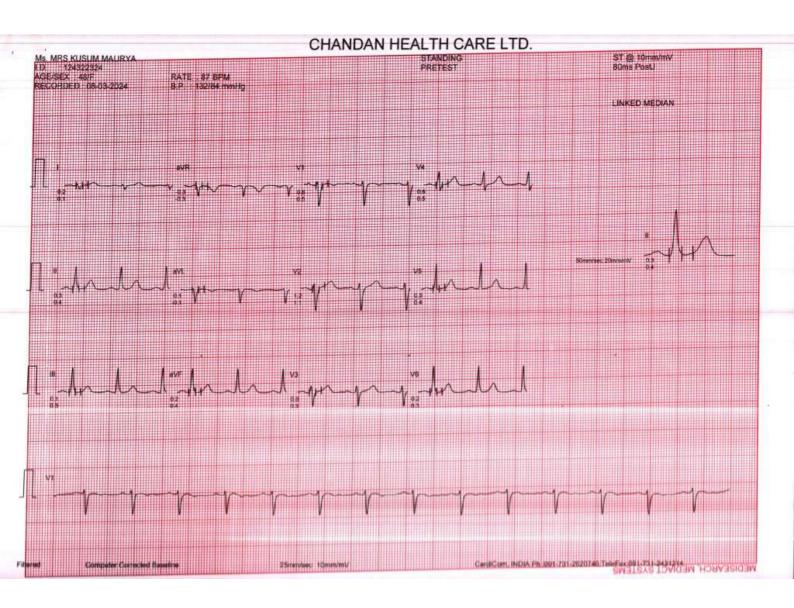
FRIDAY 03.08.2024 ALTITUDE 37 METER

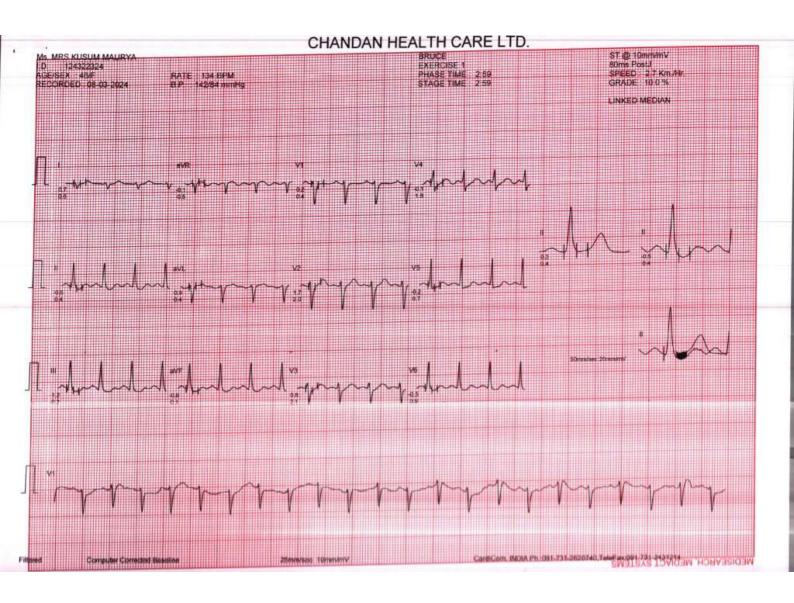
Ms MRS KUSUM N Age: 45/F Ref. by MEDIWHE Indication1: Indication2: Indication3:		Ht/N/: 145/45 Pretopol: 1 Recorded: 08-03-2024 History Medication Medication			Protocol: BRU0	on1 : 0002 :					
PHASE	PHASE TIME	STAGE	SPEED (Km./Hr.)	GRADE (%)	H.R. (SPM)	8.P. (mmHg)	RPP X100	11	ST LEVEL (mm) V2	V5	ы
SUPINE HYPERVENT VALSALVA STANDING	0:01	0:01			88 87 87 87	132/84 132/84 132/84 132/84	116 114 114 114	0.4 0.4 0.4 0.3	13 13 13 12	0.7 0.7 0.7 0.5	
STAGE 1 EVENT	259 539	2:59 2:39	2.70 4.00	10.00 12.00	134 155	142/84 152/88	190 235	-0.5 -1.7	1.7 1.2	-0.2 -1.5	/4 6
PEAK EXER EVENT EVENT EVENT RECOVERY	5:42 0:30 1:00 2:00 2:59	2 42 9 30 1 00 2 00 2 69	0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	155 131 107 101 95	150/86 150/86 148/86 144/86	235 196 158 145 133	-1.7 -0.9 -0.2 -0.7 -0.4	1.6 1.6 1.2 0.6 0.5	-15 -09 -03 -06 -03	6
ESULTS encise Duration . ax Heart Rate ax Blood Pressure ax Work Load Nason of Termination	155 162/ 6.88	Z Minutes Ippin 90 % of ta 86 min-tg METS	rget heart rate 172	apm		→ 1 → N	Basiline O signifi ZIK OX	ECH   57-50 enclose 18 Mg	tonger see	us at	
Tn	01 i <b>x</b> v	ojali for	( Amr		Dr. Strik	Cardiologist	MENUS		### 	me of off	

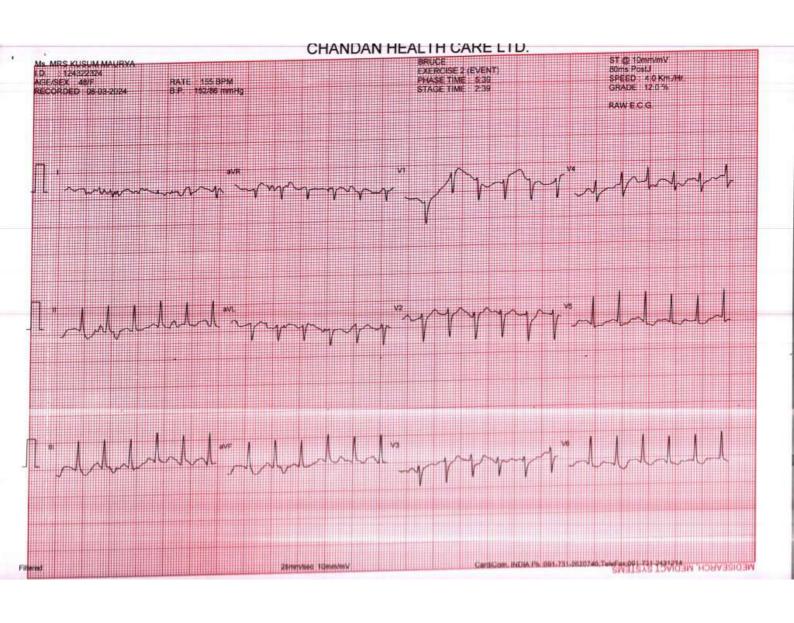


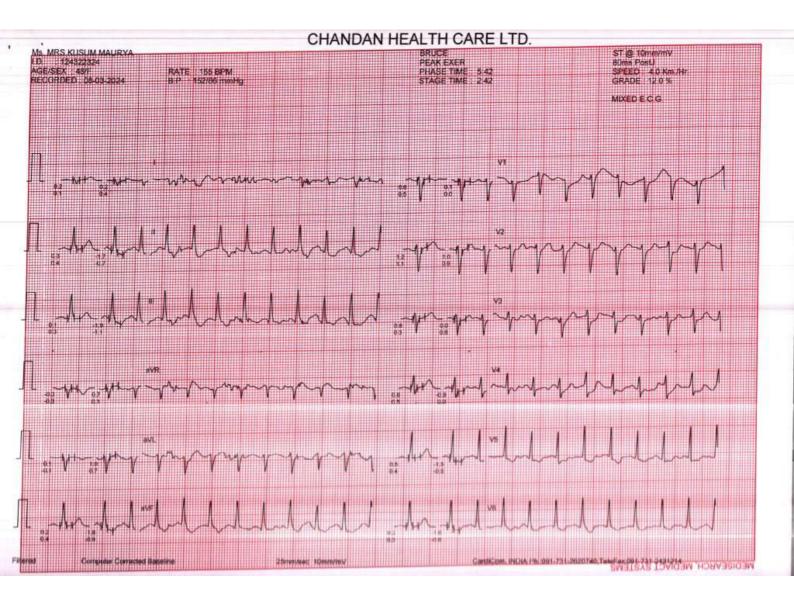


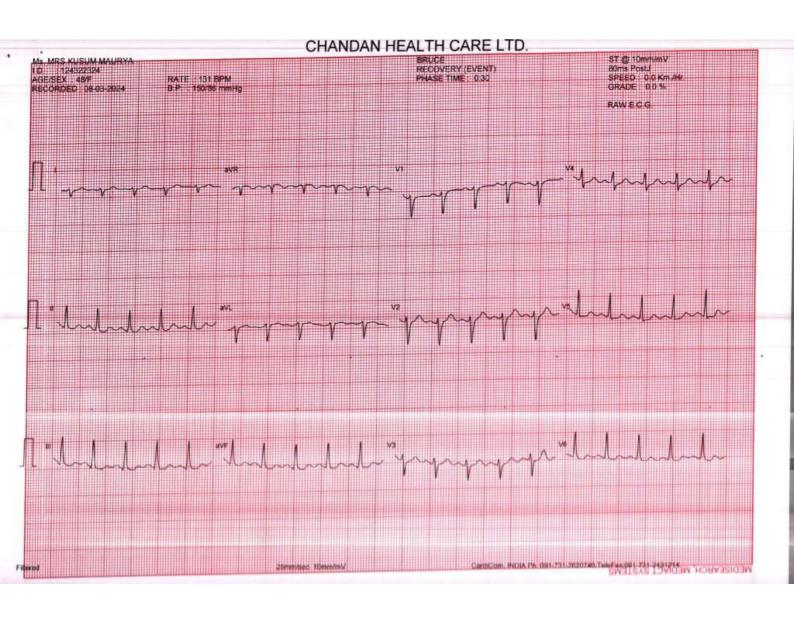


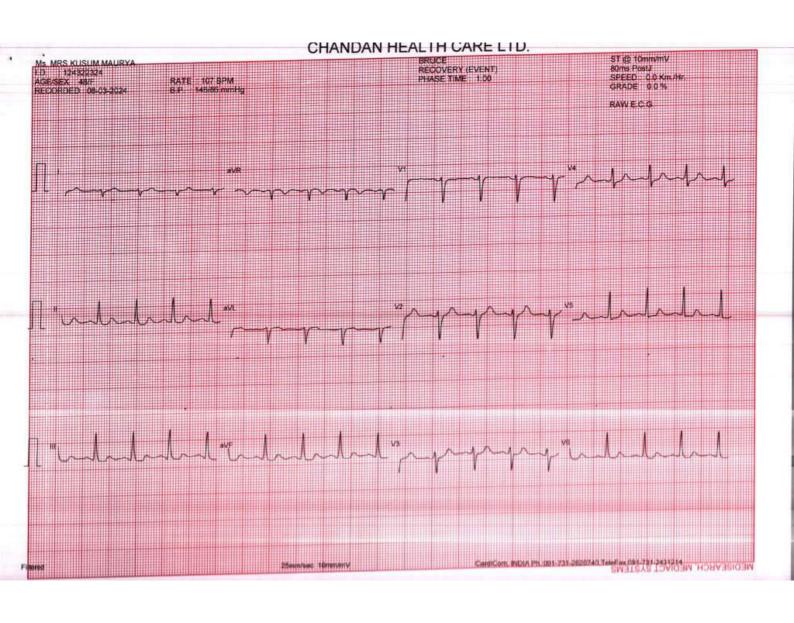


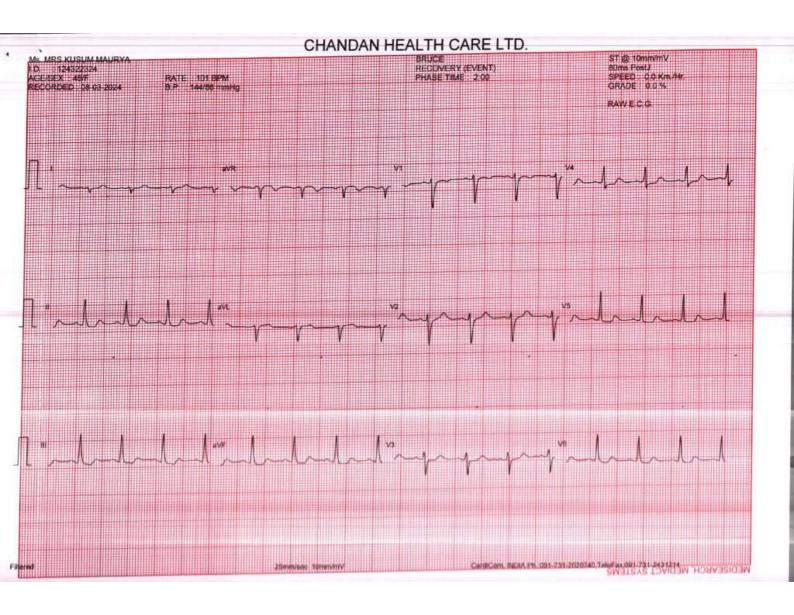


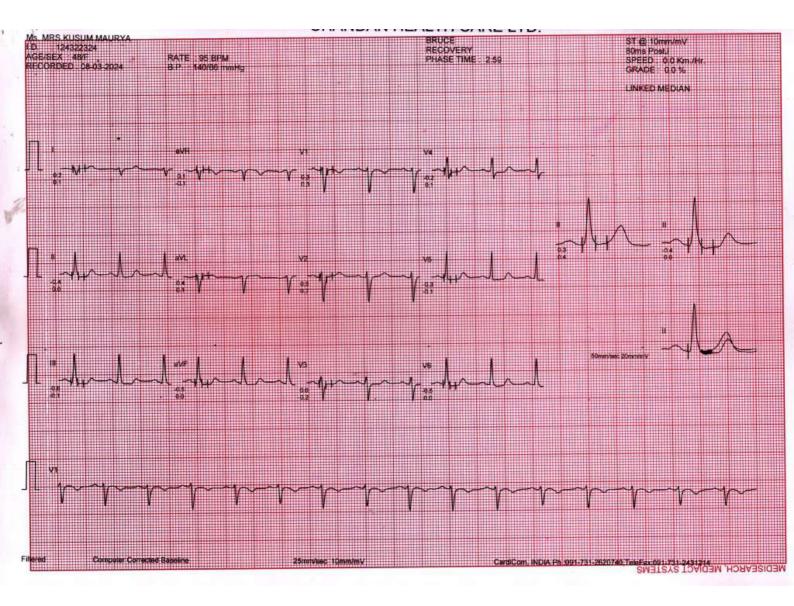














Name of Company: Medi wheel

Name of Executive: KuSum mausya.

Sex: Male / Female

Weight: ......KGs

BMI (Body Mass Index): 21-4

Chest (Expiration / Inspiration) ( S. S. .... / ... 8.8 ... CMs

Pulse: ... 85...... BPM - Regular / Irregular

Ident Mark: Mole on week

Any Allergies: No

Vertigo:

NO

Any Medications:

Any Surgical History: NO

Habits of alcoholism/smoking/tobacco: No

Chief Complaints if any:

Lab Investigation Reports:

Eye Check up vision & Color vision: Noumal & Power Glass -5 Years

Left eye: Normal & Power Not Confirm by Client







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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.KUSUM MAURYA-BOBS10197 Registered On : 08/Mar/2024 08:51:30 Age/Gender : 48 Y 9 M 2 D /F Collected : 08/Mar/2024 10:55:15 UHID/MR NO : CVAR.0000048373 Received : 08/Mar/2024 11:06:13 Visit ID : CVAR0124322324 Reported : 08/Mar/2024 12:23:48

Ref Doctor : Dr.MEDIWHEEL VNS - Status : Final Report

## DEPARTMENT OF HABMATOLOGY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Group (ABO & Rh typing) * ,	Blood			
Blood Group	В			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE
Rh ( Anti-D)	POSITIVE			AGGLUTINA ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
Complete Blood Count (CBC) * , who	ole Blood			
TLC (WBC) DLC Polymorphs (Neutrophils )	5,700.00 64.00	g/dl /Cu mm %	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 4000-10000	ELECTRONIC IMPEDANCE ELECTRONIC IMPEDANCE
Lymphocytes	31.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	4.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	1.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils ESR	0.00	%	<1	ELECTRONIC IMPEDANCE
Observed	60.00	Mm for 1st hr.		
Corrected	16.00	Mm for 1st hr.	< 20	
PCV (HCT) Platelet count	20.00	%	40-54	
Platelet Count	1.50	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









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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.KUSUM MAURYA-BOBS10197 Registered On : 08/Mar/2024 08:51:30 Age/Gender : 48 Y 9 M 2 D /F Collected : 08/Mar/2024 10:55:15 UHID/MR NO : CVAR.0000048373 Received : 08/Mar/2024 11:06:13 Visit ID : CVAR0124322324 Reported : 08/Mar/2024 12:23:48 Ref Doctor : Dr.MEDIWHEEL VNS -

Status : Final Report

## DEPARTM ENT OF HAEM ATOLOGY

## MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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	3.63	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	60.80	fΙ	80-100	CALCULATED PARAMETER
MCH	17.30	pg	28-35	CALCULATED PARAMETER
MCHC	28.50	%	30-38	CALCULATED PARAMETER
RDW-CV	23.70	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	55.60	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,648.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	57.00	/cu mm	40-440	

S.N. Sinta









CIN: U85110DL2003PLC308206



Patient Name : Mrs.KUSUM MAURYA-BOBS10197 Registered On : 08/Mar/2024 08:51:30 Collected Age/Gender : 48 Y 9 M 2 D /F : 08/Mar/2024 10:55:15 UHID/MR NO : CVAR.0000048373 Received : 08/Mar/2024 11:06:13 Visit ID : CVAR0124322324 Reported : 08/Mar/2024 13:24:26

Ref Doctor : Dr.MEDIWHEEL VNS - Status : Final Report

## DEPARTMENT OF BIOCHEMISTRY

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name Pesult Unit Bio. Ref. Interval Method

GLUCOSE FASTING, Plasma

Glucose Fasting 80.80 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.

S.N. Sinla









CIN: U85110DL2003PLC308206



Patient Name : Mrs.KUSUM MAURYA-BOBS10197 : 08/Mar/2024 08:51:31 Registered On Collected Age/Gender : 48 Y 9 M 2 D /F : 08/Mar/2024 10:55:15 UHID/MR NO : CVAR.0000048373 Received : 09/Mar/2024 11:40:22 Visit ID : CVAR0124322324 Reported : 09/Mar/2024 14:29:14 Ref Doctor : Dr.MEDIWHEEL VNS -Status : Final Report

#### DEPARTMENT OF BIOCHEMISTRY

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

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

#### GLYCOSYLATED HAEM OGLOBIN (HBA1C) \*\*, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	4.70	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	28.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	88	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.

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)	<b>Degree of Glucose Control Unit</b>
> 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

<sup>\*</sup>High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

N.B.: Test carried out on Automated VARIANT II TURBO 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







<sup>\*\*</sup>Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.





Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



Patient Name : Mrs.KUSUM MAURYA-BOBS10197

Registered On

: 08/Mar/2024 08:51:31

Age/Gender

: 48 Y 9 M 2 D /F

Collected

: 08/Mar/2024 10:55:15 : 09/Mar/2024 11:40:22

UHID/MR NO Visit ID : CVAR.0000048373 : CVAR0124322324 Received Reported

: 09/Mar/2024 14:29:14

Ref Doctor

: Dr.MEDIWHEEL VNS -

Status : Final Report

## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

c. Alcohol toxicity d. Lead toxicity



Dr. Anupam Singh (MBBS MD Pathology)







<sup>\*</sup>Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

<sup>\*</sup>Pregnancy d. chronic renal failure. Interfering Factors:

<sup>\*</sup>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.



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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.KUSUM MAURYA-BOBS10197 Registered On : 08/Mar/2024 08:51:31 Age/Gender : 48 Y 9 M 2 D /F Collected : 08/Mar/2024 10:55:15 UHID/MR NO : CVAR.0000048373 Received : 08/Mar/2024 11:06:13 Visit ID : CVAR0124322324 Reported : 08/Mar/2024 13:24:23 Ref Doctor : Dr.MEDIWHEEL VNS -: Final Report Status

## DEPARTMENT OF BIOCHEMISTRY

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) Sample:Serum	9.70	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	0.90	mg/dl	0.5-1.20	MODIFIED JAFFES
Uric Acid Sample:Serum	3.20	mg/dl	2.5-6.0	URICASE
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	23.80	U/L	<35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	11.50	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	16.10	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.00	gm/dl	6.2-8.0	BIURET
Albumin	4.00	gm/dl	3.4-5.4	B.C.G.
Globulin	2.00	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	2.00		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	42.60	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.60	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.20	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.40	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI), Serum				
Cholesterol (Total)	125.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	43.50	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	66	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optima 130-159 Borderline High 160-189 High	
VIDI	15.62	ma/dl	> 190 Very High	CVICII ===
VLDL Triglycerides	15.62 78.10	mg/dl mg/dl	10-33 < 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-P S-M-Linds  Dr.S.N. Sinha (MD Path)









Add: 99, Shivaji Nagar Mahmoorganj, Varanasi

Ph: 9235447795,0542-3500227 CIN: U85110DL2003PLC308206



Patient Name : Mrs.KUSUM MAURYA-BOBS10197 Registered On : 08/Mar/2024 08:51:30 Age/Gender : 48 Y 9 M 2 D /F Collected : 08/Mar/2024 14:53:11 UHID/MR NO : CVAR.0000048373 Received : 08/Mar/2024 15:24:47 Visit ID : CVAR0124322324 Reported : 08/Mar/2024 16:26:48

Ref Doctor : Dr.MEDIWHEEL VNS - Status : Final Report

## DEPARTMENT OF CLINICAL PATHOLOGY

## MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINATION, ROUTINE*, Urine				
Color	PALE YELLOW			
Specific Gravity	1.020			
Reaction PH	Acidic ( 6.5 )			DIPSTICK
Appearance	CLEAR			
Protein	ABSENT	mg %	< 10 Absent	DIPSTICK
			10-40 (+)	
			40-200 (++)	
			200-500 (+++)	
			> 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+)	DIPSTICK
			0.5-1.0 (++)	
			1-2 (+++)	
		1 1 1 1	>2 (++++)	
Ketone	ABSENT	mg/dl	0.1-3.0	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pi <mark>gments</mark>	ABSENT			
Bilirubin	ABSENT			DIPSTICK
Leucocyte Esterase	ABSENT			DIPSTICK
Urobilinogen(1:20 dilution)	ABSENT			
Nitrite	ABSENT			DIPSTICK
Blood	ABSENT			DIPSTICK
Microscopic Examination:				
Epithelial cells	2-3/h.p.f			MICROSCOPIC
·	, ,			EXAMINATION
Pus cells	2-4/h.p.f			
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			
		1		
SUGAR, FASTING STAGE*, Urine				
Sugar, Fasting stage	ABSENT	gms%		
		J		

## **Interpretation:**







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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.KUSUM MAURYA-BOBS10197 Registered On : 08/Mar/2024 08:51:30 Age/Gender : 48 Y 9 M 2 D /F Collected : 08/Mar/2024 14:53:11 UHID/MR NO : CVAR.0000048373 Received : 08/Mar/2024 15:24:47 Visit ID : CVAR0124322324 Reported : 08/Mar/2024 16:26:48

Ref Doctor : Dr.MEDIWHEEL VNS - Status : Final Report

## DEPARTMENT OF CLINICAL PATHOLOGY

## MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

(+) < 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. Sinla









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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.KUSUM MAURYA-BOBS10197 : 08/Mar/2024 08:51:31 Registered On Age/Gender : 48 Y 9 M 2 D /F Collected : 08/Mar/2024 10:55:15 UHID/MR NO : CVAR.0000048373 Received : 08/Mar/2024 11:06:13 Visit ID : CVAR0124322324 Reported : 08/Mar/2024 17:28:13 Ref Doctor : Dr.MEDIWHEEL VNS -Status : Final Report

#### DEPARTMENT OF IMMUNOLOGY

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interva	l Method
THYROID PROFILE - TOTAL *, Serum				
T3, Total (tri-iodothyronine)	115.00	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	7.80	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	1.200	μIU/mL	0.27 - 5.5	CLIA
Interpretation:				
		0.3-4.5 μIU/r	nL First Trimes	ster
		0.5-4.6 μIU/r		mester
		0.8-5.2 μIU/n	nL Third Trime	ester
		0.5-8.9 μIU/r	nL Adults	55-87 Years
		0.7-27 μIU/r	nL Premature	28-36 Week
		2.3-13.2 μIU/n	nL Cord Blood	> 37Week
		0.7-64 μIU/n	nL Child(21 wl	c - 20 Yrs.)
		1-39 μIU	/mL Child	0-4 Days
		1.7-9.1 μIU/r		2-20 Week
		1 4 4 4		

- 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.KUSUM MAURYA-BOBS10197 Registered On : 08/Mar/2024 08:51:31

 Age/Gender
 : 48 Y 9 M 2 D /F
 Collected
 : N/A

 UHID/MR NO
 : CVAR.0000048373
 Received
 : N/A

Visit ID : CVAR0124322324 Reported : 09/Mar/2024 15:23:44

Ref Doctor : Dr.MEDIWHEEL VNS - Status : Final Report

## DEPARTMENT OF X-RAY

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 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)









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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.KUSUM MAURYA-BOBS10197 Registered On : 08/Mar/2024 08:51:32

 Age/Gender
 : 48 Y 9 M 2 D /F
 Collected
 : N/A

 UHID/MR NO
 : CVAR.0000048373
 Received
 : N/A

Visit ID : CVAR0124322324 Reported : 08/Mar/2024 10:51:00

Ref Doctor : Dr.MEDIWHEEL VNS - Status : Final Report

## DEPARTMENT OF ULTRASOUND

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

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

## WHOLE ABDOMEN ULTRASONOGRAPHY REPORT

## LIVER

• The liver is normal in size (12.3 cm in midclavicular line) and has a normal homogenous echo texture. No focal lesion is seen.

## PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein is ( **8.8 mm in caliber**) not dilated.
- Porta hepatis is normal.

## **BILIARY SYSTEM**

- The intra-hepatic biliary radicles are normal.
- Common bile duct is (3.2 mm in caliber) not dilated.
- The gall bladder is **normal** in size and has regular walls. Lumen of the gall bladder is anechoic.

## **PANCREAS**

• The pancreas is **normal** in size and shape and has a normal homogenous echotexture. Pancreatic duct is not dilated.

## **KIDNEYS**

## • Right kidney:-

- Right kidney is normal in size, measuring ~ 9.0 x 3.9 cms.
- Cortical echogenicity is normal. Pelvicalyceal system is not dilated.
- Cortico-medullary demarcation is maintained. Parenchymal thickness appear normal.

## • Left kidney:-

- Left kidney is normal in size, measuring ~ 10.1 x 3.7 cms.
- Cortical echogenicity is normal. Pelvicalyceal system is not dilated.
- Cortico-medullary demarcation is maintained. Parenchymal thickness appear normal.

#### SPLEEN

• The spleen is normal in size (~ 8.6 cm in its long axis) and has a normal homogenous echo-



Home Sample Collection 1800-419-0002





CIN: U85110DL2003PLC308206



Patient Name : Mrs.KUSUM MAURYA-BOBS10197 Registered On : 08/Mar/2024 08:51:32

 Age/Gender
 : 48 Y 9 M 2 D /F
 Collected
 : N/A

 UHID/MR NO
 : CVAR.0000048373
 Received
 : N/A

Visit ID : CVAR0124322324 Reported : 08/Mar/2024 10:51:00

Ref Doctor : Dr.MEDIWHEEL VNS - Status : Final Report

## DEPARTMENT OF ULTRASOUND

#### MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

texture.

### ILIAC FOSSAE & PERITONEUM

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

## URETERS

- The upper parts of both the ureters are normal.
- Bilateral vesicoureteric junctions are normal.

### URINARY BLADDER

- The urinary bladder is well filled. Bladder wall is normal in thickness and regular.
- Pre-void urine volume is ~ 330 cc.

## UTERUS & CERVIX

- The uterus is anteverted and normal in size (~ 80 x 51 x 44 mm / 97 cc) & shape and homogenous myometrial echotexture.
- Hyperechoic mass measuring 21 x 19 x 17 mm/3.8 cc note in posterior myometrium of body of uterus.
- Cervix is normal.

### ADNEXA & OVARIES

- Adnexa are normal.
- Both ovaries are normal in size and texture.

## FINAL IMPRESSION:-

- UTERINE FIBROID
- REST OF THE ABDOMINAL ORGANS ARE NORMAL

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

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

EXAMINATION, GLUCOSE PP, ECG / EKG, Tread Mill Test (TMT), PAP SMEAR FOR CYTOL

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

Page 12 of 12









Melid 3 dlh Near vision:

616 & Galago up: Houmas Far vision:

Dental check up :

ENT Check up:

Eye Checkup: Apunal

Final impression

Certified that I examined Mybum Maung 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.

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

Client Signature :-

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

Signature of Medical Examiner

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

Date. 0 8 .. 1.03. 12024

Place - VARANASI

