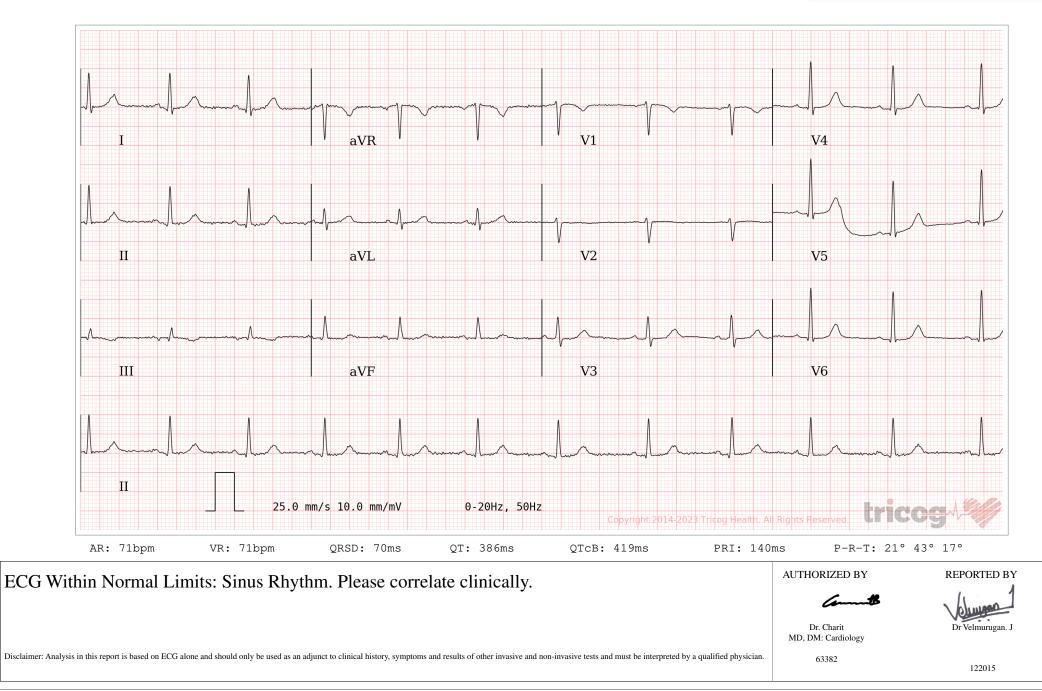
Chandan Diagnostic



Age / Gender:46/FemaleDate and Time:9th Sep 23 11:50 AMPatient ID:CVAR0046882324Patient Name:Mrs.MEERA YADAV -PKG10000237



	CHANDAN I	DIAGNOS	TIC CENT	FRE	
Chaudau Since 1991	Add: 99, Shivaji Nagar M Ph: 9235447795,0542-35 CIN : U85110DL2003PL	ahmoorganj,Varanas 00227			SINCE 191
Since 1991		2500200			Canto
Patient Name Age/Gender UHID/MR NO Visit ID Ref Doctor	: Mrs.MEERA YADAV -PKG : 46 Y 0 M 0 D /F : CVAR.0000041059 : CVAR0046882324 : Dr.MEDIWHEEL VNS -	10000237	Registered C Collected Received Reported Status	0n : 09/Sep/2023 0 : 09/Sep/2023 1 : 09/Sep/2023 1 : 09/Sep/2023 1 : 69/Sep/2023 1 : Final Report	1:00:08 1:11:23
		DEPARTM ENT	OFHAEMATC	LOGY	
	MEDIWHE	EL BANK OF B/	ARODA FEMAL	EABOVE40 YRS	
Test Name		Result	Unit	Bio. Ref. Interval	Method
Blood Group (AB Blood Group	O&Rhtyping)*, <i>Blood</i>	0			ERYTHROCYTE MAGNETIZED
Rh (Anti-D)		POSITIVE			TECHNOLOGY / TUBE AGGLUTINA ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
Complete Dised		Ser and			
	Count (CBC) * , Whole Blo				
Haemoglobin		11.10	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	
TLC (WBC)		7,600.00	/Cu mm	Female- 12.0-15.5 g/dl 4000-10000	ELECTRONIC IMPEDANCE
<u>DLC</u> Polymorphs (Neu Lymphocytes Monocytes Eosinophils Basophils	trophils)	60.00 36.00 2.00 2.00 0.00	% % % %	55-70 25-40 3-5 1-6 <1	ELECTRONIC IMPEDANCE ELECTRONIC IMPEDANCE ELECTRONIC IMPEDANCE ELECTRONIC IMPEDANCE ELECTRONIC IMPEDANCE
ESR		20.00	Mars for dat has		
Observed Corrected		20.00 10.00	Mm for 1st hr. Mm for 1st hr.	< 20	
PCV (HCT) Platelet count		33.00	% %	40-54	
Platelet Count		1.67	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Dis	tribution width)	nr	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet La		nr	%	35-60	ELECTRONIC IMPEDANCE
-	· ·				







Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.MEERA YADAV -PKG10000237	Registered On	: 09/Sep/2023 09:22:30
Age/Gender	: 46 Y 0 M 0 D /F	Collected	: 09/Sep/2023 11:00:08
UHID/MR NO	: CVAR.0000041059	Received	: 09/Sep/2023 11:11:23
Visit ID	: CVAR0046882324	Reported	: 09/Sep/2023 14:23:49
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT 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
RBCCount				
RBC Count	3.88	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	85.20	f١	80-100	CALCULATED PARAMETER
MCH	28.70	pg	28-35	CALCULATED PARAMETER
MCHC	33.70	%	30-38	CALCULATED PARAMETER
RDW-CV	13.50	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	44.10	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	4,560.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	152.00	/cu mm	40-440	

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





Since 1991

Add: 99, Shivaji Nagar Mahmoorganj, Varar Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.MEERA YADAV -PKG10000237	Registered On	: 09/Sep/2023 09:22:31	
Age/Gender	: 46 Y 0 M 0 D /F	Collected	: 09/Sep/2023 16:51:30	
UHID/MR NO	: CVAR.0000041059	Received	: 09/Sep/2023 16:52:10	
Visit ID	: CVAR0046882324	Reported	: 09/Sep/2023 16:53:04	
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report	
	DEPARTMEN	NT OF BIOCHEM IST	37	

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE FASTING , <i>Plasma</i> Glucose Fasting	92.30	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD

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.

Glucose PP Sample:Plasma After Meal	110.50	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD

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



Home Sample Collection 1800-419-0002





Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.MEERA YADAV -PKG10000237	Registered On	: 09/Sep/2023 09:22:31
Age/Gender	: 46 Y 0 M 0 D /F	Collected	: 09/Sep/2023 11:00:08
UHID/MR NO	: CVAR.0000041059	Received	: 10/Sep/2023 11:23:21
Visit ID	: CVAR0046882324	Reported	: 10/Sep/2023 12:25:15
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)	5.40	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	36.00	mmol/mol/IFCC		

mg/dl

Interpretation:

NOTE:-

Estimated Average Glucose (eAG)

- 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.

108

• 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)	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 1 diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

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

<u>Clinical Implications:</u>

*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

ISO 9001:2015

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CHANDAN DIAGNOSTIC CENTRE Add: 99, Shivaji Nagar Mahmoorganj, Varanasi



Add: 99, Shivaji Nagar Mahmoorganj, Varana Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



: Mrs.MEERA YADAV -PKG10000237	Registered On	: 09/Sep/2023 09:22:31
: 46 Y 0 M 0 D /F	Collected	: 09/Sep/2023 11:00:08
: CVAR.0000041059	Received	: 10/Sep/2023 11:23:21
: CVAR0046882324	Reported	: 10/Sep/2023 12:25:15
: Dr.MEDIWHEEL VNS -	Status	: Final Report
	: 46 Y 0 M 0 D /F : CVAR.0000041059 : CVAR0046882324	: 46 Y 0 M 0 D /F Collected : CVAR.0000041059 Received : CVAR0046882324 Reported

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 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.

Dr. Anupam Singh (MBBS MD Pathology)

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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name: Mrs.MEERA YADAV -PKAge/Gender: 46 Y 0 M 0 D /FUHID/MR NO: CVAR.0000041059Visit ID: CVAR0046882324Ref Doctor: Dr.MEDIWHEEL VNS -	G10000237	Registered On Collected Received Reported Status	: 09/Sep/2023 09:22 : 09/Sep/2023 11:00 : 09/Sep/2023 11:11 : 09/Sep/2023 13:02 : Final Report	:08 :23
		OF BIOCHEM IST	DV	
MEDIWH	EEL BANK OF BA			
Test Name	Result	Unit	Bio. Ref. Interval	Method
rost Name	ricourt	Ont		Mothod
BUN (Blood Urea Nitrogen) Sample:Serum	9.30	mg/dL	7.0-23.0	CALCULATED
Oreatinine Sample:Serum	1.00	mg/dl	Serum 0.5-1.2 Spot Urine-Male- 20-275 Female-20-320	MODIFIED JAFFES
Uric Acid	4.20	mg/dl	2.5-6.0	URICASE
Sample:Serum				
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	19.50	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	8.80	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	26.00	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.90	gm/dl	6.2-8.0	BIURET
Albumin	4.30	gm/dl	3.4-5.4	B.C.G.
Globulin	2.60	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.65		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	79.10	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
LIPID PROFILE (MINI), Serum				
Cholesterol (Total)	163.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	49.30	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	92	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optima	CALCULATED
		بر ۲	130-159 Borderline High 160-189 High > 190 Very High	
VLDL	22.06	mg/dl	10-33	CALCULATED
Triglycerides	110.30	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP



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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name Age/Gender	: Mrs.MEERA YADAV -PKG10000237 : 46 Y 0 M 0 D /F	Registered On Collected	: 09/Sep/2023 09:22:32 : 09/Sep/2023 11:00:08
UHID/MR NO	: CVAR.0000041059	Received	: 09/Sep/2023 11:11:23
Visit ID	: CVAR0046882324	Reported	: 09/Sep/2023 13:02:00
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name

Result

Unit

Method

Bio. Ref. Interval

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

ISO 9001:2015

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Patient Name Age/Gender UHID/MR NO Visit ID Ref Doctor	: Mrs.MEERA YADAV -Pk : 46 Y 0 M 0 D /F : CVAR.0000041059 : CVAR0046882324 : Dr.MEDIWHEEL VNS -	KG10000237	Registered On Collected Received Reported Status	: 09/Sep/2023 09 : 09/Sep/2023 16 : 09/Sep/2023 16 : 09/Sep/2023 17 : Final Report	:51:58 :52:10
		DEPARTMENT OF (
Test Name		Result	Unit	Bio. Ref. Interval	Method
		rooun	Onit	2.01 . Dr. Interval	
URINE EXAMINA Color Specific Gravity Reaction PH Protein	TION, ROUTINE* , Urin	ne LIGHT YELLOW 1.030 Acidic (5.5) ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++)	DIPSTICK DIPSTICK
Sugar		ABSENT	gms%	200-500 (+++) > 500 (++++) < 0.5 (+)	DIPSTICK
Sugui		Absent	511370	0.5-1.0 (++) 1-2 (+++) > 2 (++++)	
Ketone Bile Salts Bile Pigments Urobilinogen(1:2 Microscopic Exan		ABSENT ABSENT ABSENT ABSENT	mg/dl	0.1-3.0	BIOCHEMISTRY
Epithelial cells		2-3/h.p.f			MICROSCOPIC
Pus cells RBCs		ABSENT ABSENT			
					EXAMINATION
Cast Crystals		ABSENT ABSENT			MICROSCOPIC EXAMINATION
Others		ABSENT			
SUGAR, FASTING	STAGE*, Urine				
Sugar, Fasting sta	ge	ABSENT	gms%		
Interpretation:			ж ,		

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

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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.MEERA YADAV -PKG10000237	Registered On	: 09/Sep/2023 09:22:31
Age/Gender	: 46 Y 0 M 0 D /F	Collected	: 09/Sep/2023 16:51:58
UHID/MR NO	: CVAR.0000041059	Received	: 09/Sep/2023 16:52:10
Visit ID	: CVAR0046882324	Reported	: 09/Sep/2023 17:03:14
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

SUGAR, PP STAGE * , Urine

Sugar, PP Stage

ABSENT

Interpretation:

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

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





Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.MEERA YADAV -PKG10000237	Registered On	: 09/Sep/2023 09:22:31
Age/Gender	: 46 Y 0 M 0 D /F	Collected	: 09/Sep/2023 11:00:08
UHID/MR NO	: CVAR.0000041059	Received	: 09/Sep/2023 18:24:20
Visit ID	: CVAR0046882324	Reported	: 10/Sep/2023 11:14:34
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. Interval	Method	
THYROID PROFILE - TOTAL*, Serum					
T3, Total (tri-iodothyronine)	136.60	ng/dl	84.61–201.7	CLIA	
T4, Total (Thyroxine)	8.56	ug/dl	3.2-12.6	CLIA	
TSH (Thyroid Stimulating Hormone)	4.26	µlU/mL	0.27 - 5.5	CLIA	
		, ,			
Interpretation:		0.3-4.5 uIU/	mI First Trimester		

0.5 1.5	µ10/IIIL	I libe I linese	
0.5-4.6	µIU/mL	Second Trime	ester
0.8-5.2	µIU/mL	Third Trimes	ter
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.

S.n. Sinta

Dr.S.N. Sinha (MD Path)





Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.MEERA YADAV -PKG10000237	Registered On	: 09/Sep/2023 09:22:33
Age/Gender	: 46 Y 0 M 0 D /F	Collected	: N/A
UHID/MR NO	: CVAR.0000041059	Received	: N/A
Visit ID	: CVAR0046882324	Reported	: 09/Sep/2023 15:58:00
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)

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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name Age/Gender	: Mrs.MEERA YADAV -PKG10000237 : 46 Y 0 M 0 D /F	Registered On Collected	: 09/Sep/2023 09:22:33 : N/A
UHID/MR NO	: CVAR.0000041059	Received	: N/A
Visit ID	: CVAR0046882324	Reported	: 09/Sep/2023 12:41:15
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

ULTRASOUND WHOLE ABDOM EN (UPPER & LOWER) *

WHOLE ABDOM EN ULTRASONOGRAPHY REPORT

LIVER

• The liver is normal in size (12.0 cm in midclavicular line) and has a normal homogenous echo texture. No focal lesion is seen. (Note: - Small isoechoic focal lesion cannot be ruled out).

PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein is (9.5 mm in caliber) not dilated.
- Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common bile duct is (3.1 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 ~ 9.2 x 3.5 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 ~ 9.7 x 4.5 cms.
 - Cortical echogenicity is normal. Pelvicalyceal system is not dilated.
 - Cortico-medullary demarcation is maintained. Parenchymal thickness appear normal.



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Add: 99, Shivaji Nagar Mahmoorganj,Varanasi Ph: 9235447795,0542-3500227 CIN : U85110DL2003PLC308206



Patient Name	: Mrs.MEERA YADAV -PKG10000237	Registered On	: 09/Sep/2023 09:22:33
Age/Gender	: 46 Y 0 M 0 D /F	Collected	: N/A
UHID/MR NO	: CVAR.0000041059	Received	: N/A
Visit ID	: CVAR0046882324	Reported	: 09/Sep/2023 12:41:15
Ref Doctor	: Dr.MEDIWHEEL VNS -	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

SPLEEN

• The spleen is normal in size (~ 8.2 cm in its long axis) and has a normal homogenous echo-texture.

ILIAC FOSSAE & PERITONEUM

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

URINARY BLADDER

- The urinary bladder is adequately filled. Bladder wall is normal in thickness and is regular.
- Pre-void urine volume is ~ 187 cc.
- Bilateral vesicoureteric junctions are normal.

UTERUS & CERVIX

- The uterus is anteverted and normal in size (~ 75 x 44 x 43 mm / 45 cc) & shape and homogenous myometrial echotexture.
- The endometrial echo is seen in mid line.
- IUCD is seen in uterine cavity.
- Cervix is normal.

ADNEXA & OVARIES

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

FINAL IM PRESSION:-

- IUCD in uterine cavity
- Rest of the abdominal organs are normal

	*** End Of Report ***	Kery
	(**) Test Performed at Chandan Speciality Lab.	F
		Dr Raveesh Chandra Roy (MD-Radi
T	CG / EKG, Tread Mill Test (TMT), PAP SMEAR FOR CYTOLOC	GICAL EXAMINA HON
This report is not for med	ico legal purpose. If clinical correlation is not established, kindly repeat the test at n	no additional cost within seven days.
Bone Mineral Density (BMD), Doppler Studies, 2	Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital tesponse Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking	l Mammography, Electromyography (EMG), Nerve Conditio
		Page 13 of 13



मारत सरकार GOVERNMENT OF INDIA



मीरा यादव Meera Yadav जन्म तिथि/ DOB: 30/03/1977 महिला / FEMALE



3138 4817 1163

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

0

Latitude 25.305354° LOCAL 10:47:34 GMT 05:17:34

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Longitude 82.979029°

0

SATURDAY 09.09.2023 ALTITUDE 37 METER

CHANDAN DIAGNOSTIC CENTRE	- Second
Name of Company: BB	
Name of Executive: MR / MRS. Met 3-9 Jadar	
Date of Birth: 30 /03 /1977	
Sex: Male / Female	
Height: 15.3CMs	
Weight:	
BMI (Body Mass Index) : 29.5	
BMI (Body Mass Index): 29.5 Chest (Expiration / Inspiration)	
Abdomen: 8. CMs	
Blood Pressure: 12 7.2 mm/Hg	
Pulse: BPM - Regular / Irregular-	
Respiration Rate:	
Ident. Mark: Mole on it chercle.	
Any Allergies: Marco	
Vertigo : Ma	
Any Medications: (I)	
Any Surgical History: (I)	
Habits of alcoholism/smoking/tobacco: (I)	
Chief Complaints if any: Piles Mys.	
Lab Investigation Reports:	
Eye Check up - vision & Color vision: Noal E formerglan -	30
Left eye: pre-	
Right eye:	



7



Near vision:	MI	3		
Far vision :	61	C	ė	gla
Dental check up	:	r	a	5
ENT Check up :	m	eq		
Eye Checkup:	M	e		

Final impression

Since 1991

he/she	is fit / Un	fit to join any	organization.	
and fre	e from any	cardio-respirat	tory / communi	cable ailment,
S/O D/	0 W/O		is presently i	in good health
	Certified	that I examine	ed Meerg	Dey:

Client Signature: -

Dr. R.C. ROY Signature of Medical Examiner MBBS.,MD. (Radio Diagnosis) Name & Qualification - Dr. R. C. Roy (MBBS, MD) Date-Date-VARANASI

08069366666

Chandan Diagnostic Center 39, Shivaji Nagar, Mahmoorganj Varanasi-221010 (U.P.) Phane No::0542-2223232



Customer Care No.: 08069366666 E-mail: care@chandan.co.in Web.: www.chandandisgnostic.com

MEDISEARCH, MEDIACT SYSTEMS

CHANDAN HEALTH CARE LTD.

99-SHIVAJI NAGAR MAHMOORGANJ VARANASI-9839703068

Ms. MRS MEERA YADAV Age: 460FF Ref: by Indication 1: Indication 2: Indication 3:			ID : 46882324 HVWI: 153699 Recorded:: 09-09-2023			TREADMILL TEST SUMMARY REPORT Protosol: BRUCE History Medication1 Medication2 Medication3					
PHASE	PHASE TIME	STAGE TIME	SPEED (Km./Hr.)	GRADE (%)	H.R. (BPM)	8.P. (mmHg)	RPP X100	u,	ST LEVEL (mm) V2	V5	METS
SUPINE HYPERVENT VALSALVA STANDING	0:02	0:02			96 96 96 97	112/72 112/72 112/72 112/72 112/72	107 107 107 108	-0.4 -0.4 -0.3 -0.3	0.4 0.4 0.4 0.4 0.4	-0.4 -0.4 -0.3 -0.3	
EVENT STAGE 1 EVENT EVENT EVENT STAGE 2 EVENT	2:30 2:59 3:56 5:10 5:42 5:59 6:21	2:30 2:59 0:56 2:10 2:42 2:59 0:21	2.70 2.70 4.00 4.00 4.00 4.00 5.40	10.00 10.00 12.00 12.00 12.00 12.00 12.00 14.00	136 139 149 158 161 160 166	112/72 122/72 122/72 122/72 122/72 132/72 132/72 132/72	152 169 181 192 212 211 219	-0.7 -0.9 -1.3 -1.2 -1.1 -1.2 -1.0	0.5 0.1 0.3 0.4 0.4 0.9	-0.4 -0.4 -0.8 -1.1 -1.1 -1.1 -0.8	4.02 4.80 5.52 6.47 6.88 7.10 7.44
PEAK EXER	6:24	0:24			168	132/72	221	-1.0	0.9	-0.8	7.49
EVENT EVENT EVENT RECOVERY	0:31 1:01 2:00 2:59	0:31 1:01 2:00 2:59	0.00 0.00 0.00 0.00 0.00	0.00 0.00 0.00 0.00	151 132 121 116	132/72 132/72 132/72 132/72 132/72	199 174 159 153	-0.9 -0.2 -1.0 -1.0	1.1 0.8 0.3 0.1	-0.5 -0.1 -0.6 -0.8	

RESULTS

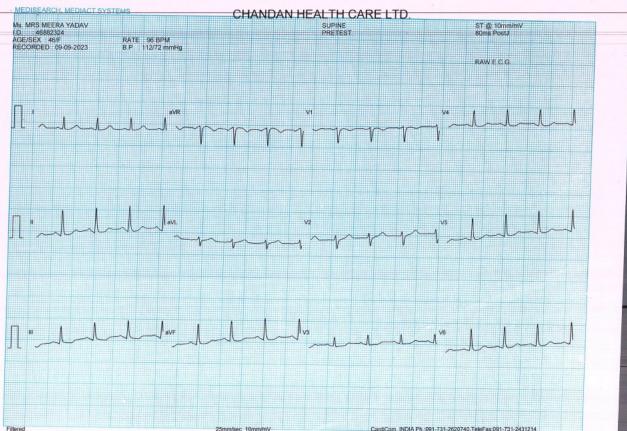
Exercise Duration Max Heart Rate Max Blood Pressure Max Work Load Reason of Termination 6:24 Minutes 168 bpm 96 % of target heart rate 174 bpm 132/72 mmHg 7.49 METS

IMPRESSIONS

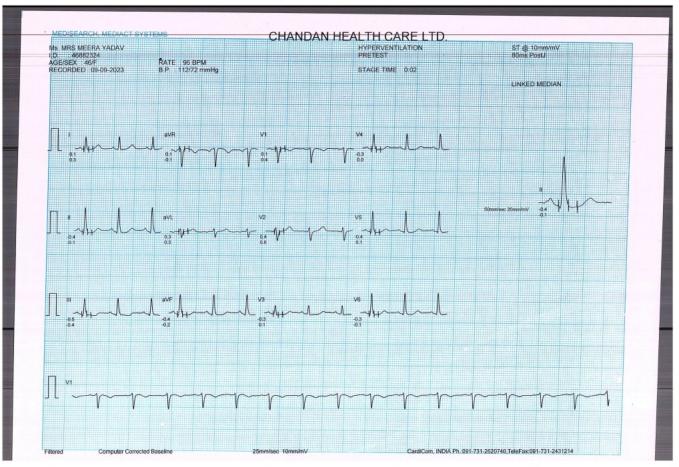
TMT is negative for RMI

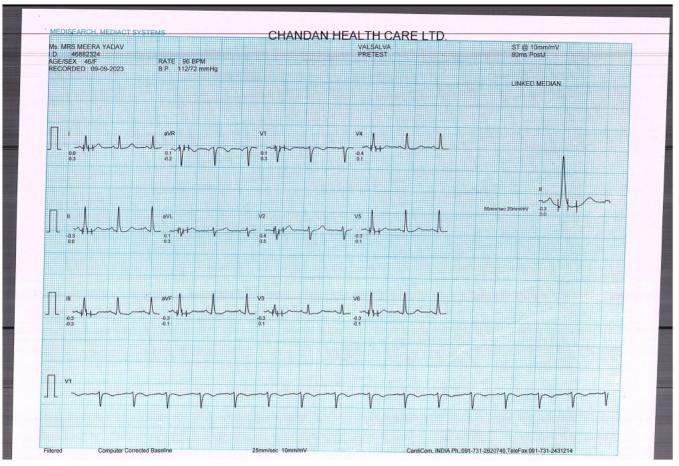
→ Buseline ECG 18 pormal → NO Rign, fut ST-T changes Reen at peak Exercise and recom → TMT 18 negular for RMS

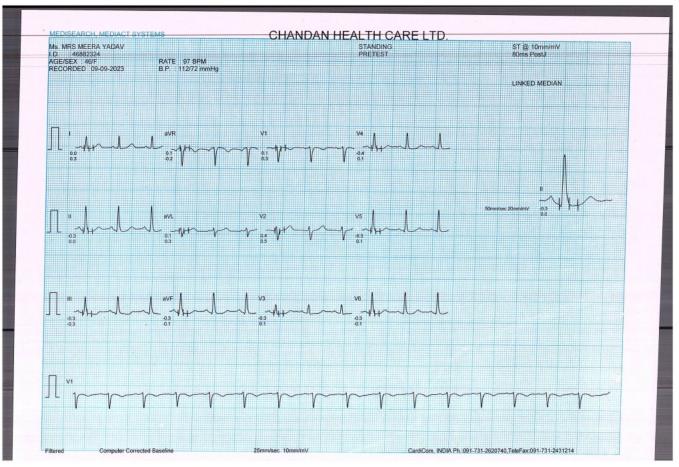
Cardiologist Dr. Ankit Krishna Agarwal M.B.B.S., MD, DM Cardiologist Reg. No.-39794 Cardiocom, NDUA Ph. 061-731-2620740, TeleFax.091-731-2431214

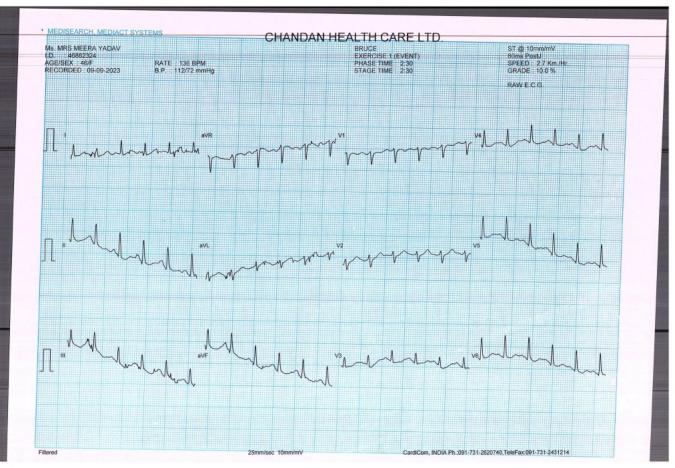


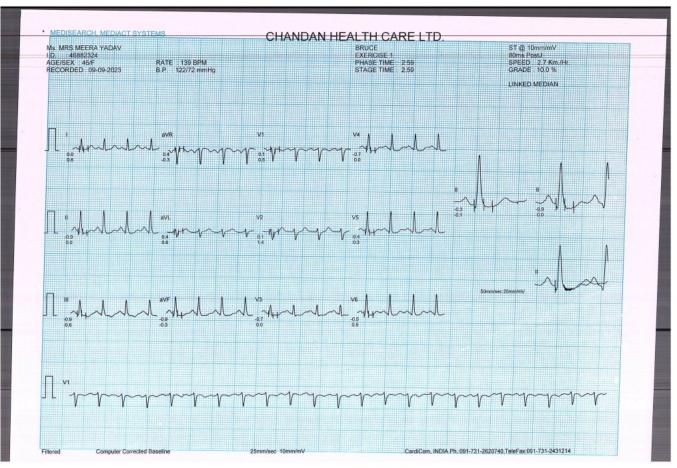
CardiCom, INDIA Ph :091-731-2620740, TeleFax:091-731-2431214

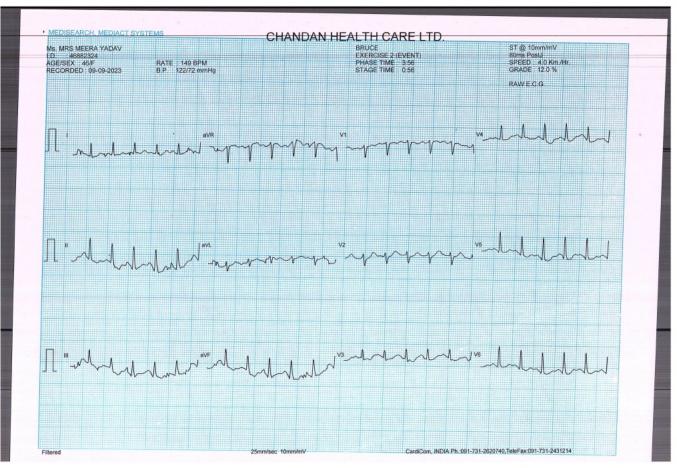


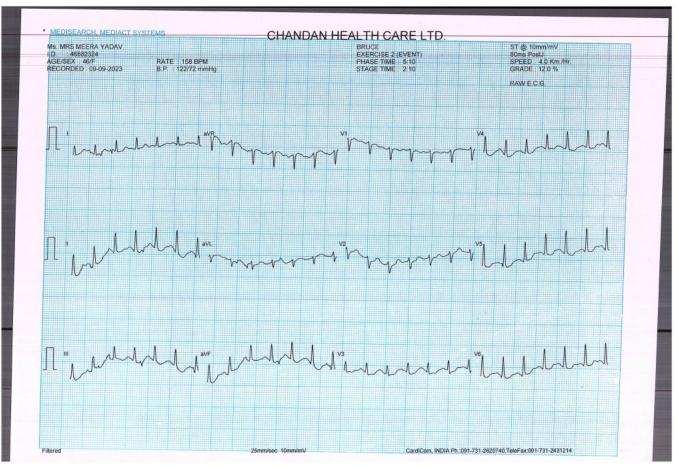


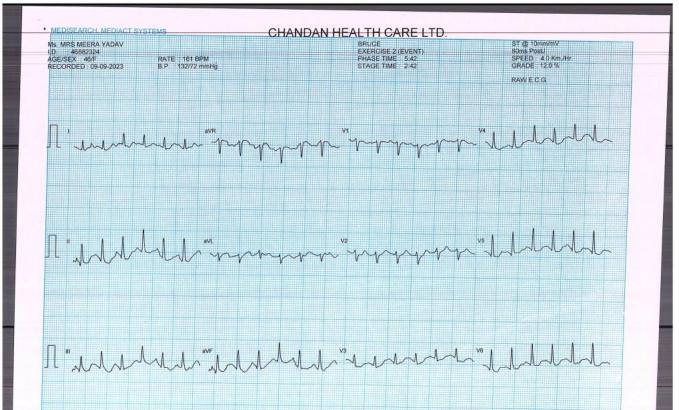








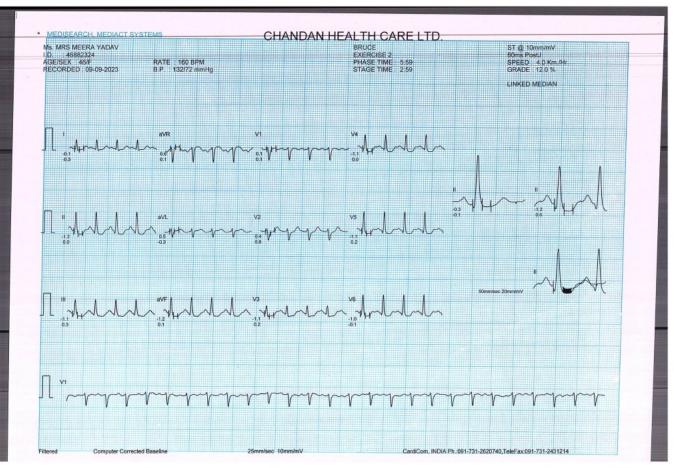


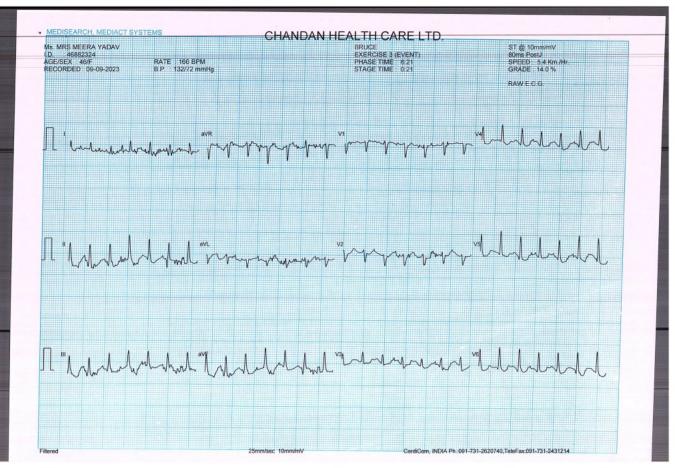


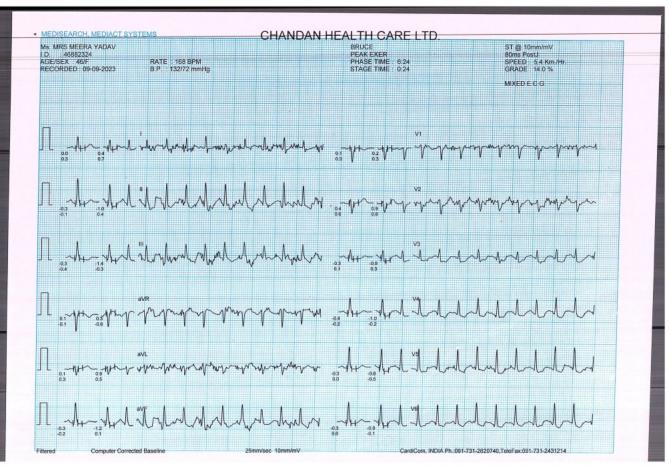
CardiCom, INDIA Ph.:091-731-2620740,TeleFax:091-731-2431214

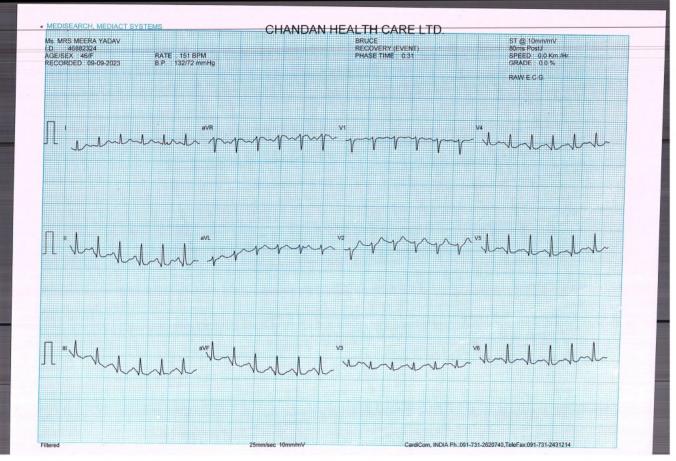
25mm/sec 10mm/mV

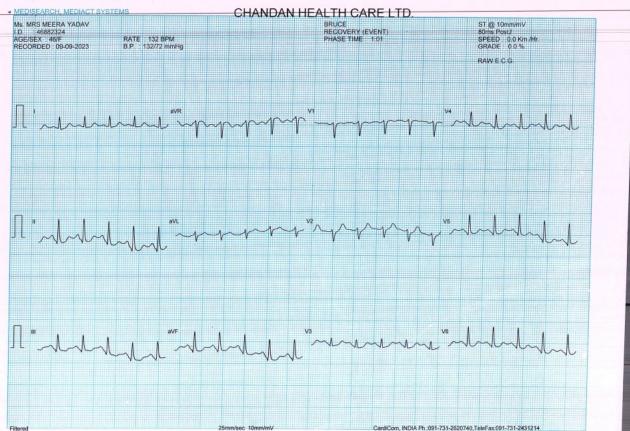
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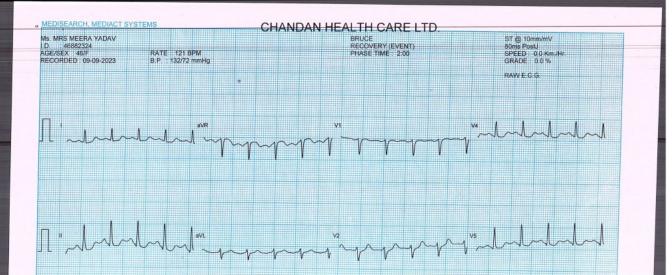


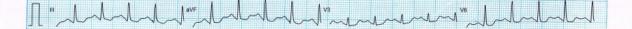




25mm/sec 10mm/mV

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Filtered

25mm/sec 10mm/mV

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