



CHANDAN DIAGNOSTIC CENTRE

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



Patient Name	: Mr.SARABOBHOUM APURBA KUMAR-PKG1000	Registered On	: 25/Jun/2022 10:00:45
Age/Gender	: 59 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000030007	Received	: N/A
Visit ID	: CVAR0025642223	Reported	: 25/Jun/2022 10:35:17
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF CARDIOLOGY-2D-ECHO

2D ECHO *

2D ECHO & COLOUR DOPPLER REPORT-

AORTIC VALVES STUDY-

AO DIAMETER	3.1	Cms.
LA DIAMETER	3.2	Cms.
CUSP OPENING	1.3	Cms.

LEFT VENTRICLE-

IVSd	1.0	cms
LVIDd	4.5	cms
LVPWd	0.9	cms
IVSs	1.6	cms
LVIDs	2.9	cms
LVPWs	1.2	cms
EDV	95	ml
ESV	33	ml

EJECTION FRACTION : 64 % (60 ± 7 %)
SHORTENING FRACTION : 35 % (30 ± 5 %)

RIGHT VENTRICLE-

RVIDd : 3.0 cm.

DIMENSIONAL IMAGING-

MITRAL VALVE	NORMAL
AORTIC VALVE	NORMAL
PULMONARY VALVE	NORMAL
TRICUSPID VALVE	NORMAL
INTER VENTRICULAR SEPTUM	NORMAL





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DEPARTMENT OF CARDIOLOGY-2D-ECHO

INTERATRIAL SEPTUM	NORMAL
INTRACARDIAC CLOT / VEGETATION / MYXOMA	ABSENT
LEFT ATRIUM	NORMAL
LEFT VENTRICLE	NORMAL
RIGHT VENTRICLE	NORMAL
RIGHT ATRIUM	NORMAL
PERICARDIUM	NORMAL
OTHER	NORMAL

COLOUR FLOW MAPPING-

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

SUMMARY OF FINDINGS AND ECHOCARDIOGRAPHY DIAGNOSIS-

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

FINAL IMPRESSION-

- NO RESTING RWMA
- GOOD BIVENTRICULAR SYSTOLIC FUNCTION WITH LVEF 64%
- NO LVH WITH GRADE I DIASTOLIC DYSFUNCTION
- NO CHAMBER DILATATION WITH TRACE MR AND TR
- NO CLOT/ VEGETATION/ PAH/ EFFUSION



*** End Of Report ***

Dr. Ganesh Shankar

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



Chandan Diagnostics Centre Varanasi

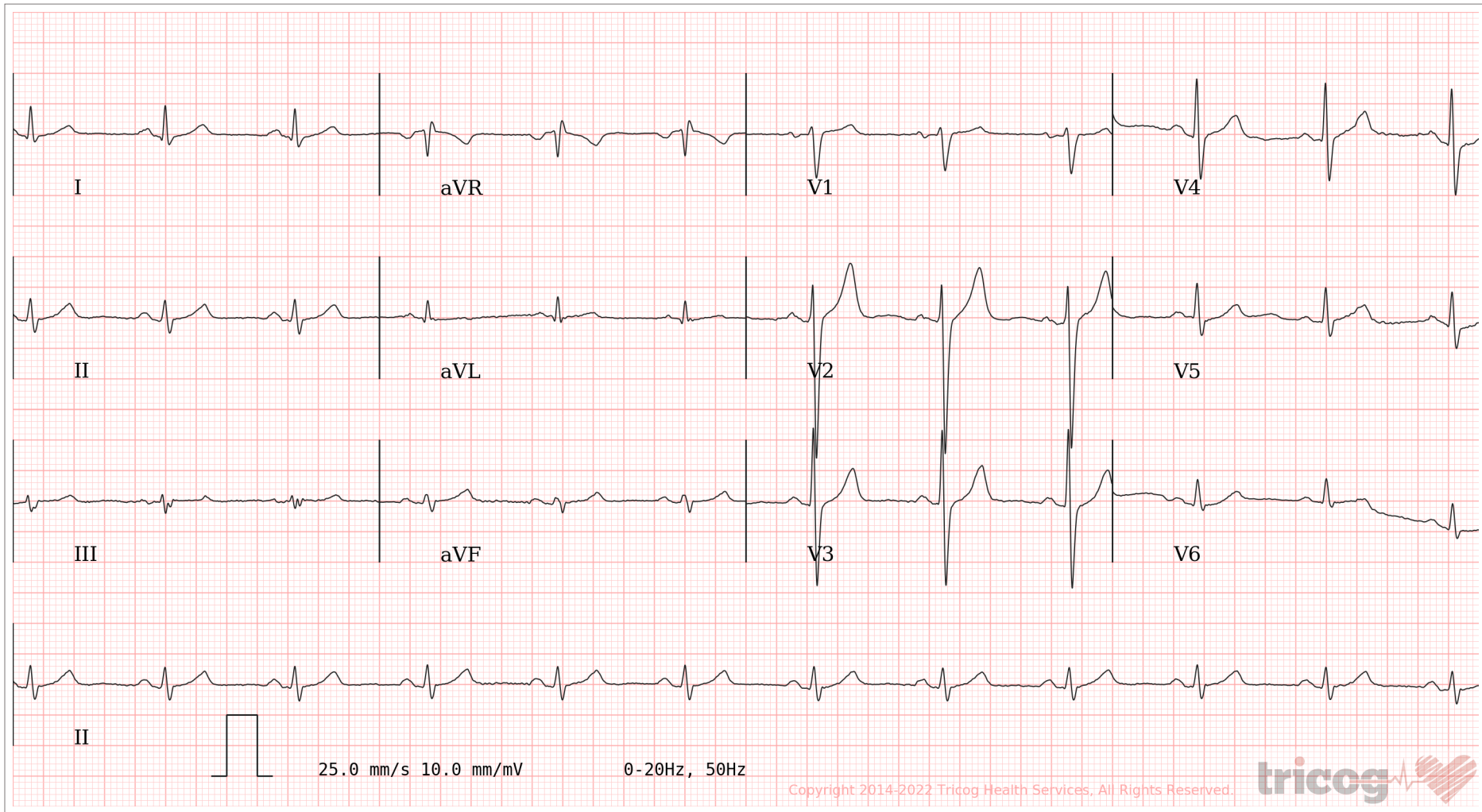
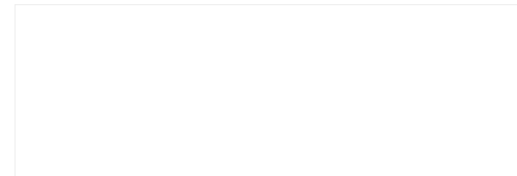


Age / Gender: -/-

Date and Time: 25th Jun 22 11:09 AM

Patient ID: CVAR0025482223

Patient Name: Mr.SARABOBHOUM APURBA KUMAR-
PKG10000236



AR: 71bpm VR: 71bpm QRSD: 100ms QT: 376ms QTc: 408ms PRI: 146ms P-R-T: 38° 10° 48°

ECG Within Normal Limits: Sinus Rhythm, Normal Axis. Please mention age and gender of the patient. Please correlate clinically.

AUTHORIZED BY

Dr. Charit
MD, DM: Cardiology

63382

REPORTED BY

Dr. Bharati R

72470

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.


भारत सरकार
Government of India


सरबोभौम अपूर्वा कुमार
Sarabobhoum Apurba Kumar
जन्म तिथि/DOB: 18/08/1963
पुरुष/ MALE



4262 6858 4817

मेरा आधार, मेरी पहचान

Dr. R.C. ROY
MBBS., MD. (Radio Diagnosis)
Reg. No. - 25913


भारतीय विश्वविद्यालय - प्राधिकरण
Udai Identification Authority of India

पता:
S/O: अक्षय कुमार सारवोभौम, बी 8/12 ए, सोनारपुरा,
गौरगंज, वाराणसी, वाराणसी,
उत्तर प्रदेश - 221001

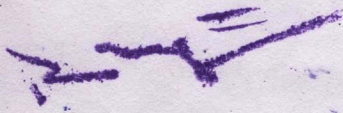
Address:
S/O: Akshay Kumar Sarvobhoum, B 8/12 A,
SONARPURA, GAURIGANJ, Varanasi,
Varanasi,
Uttar Pradesh - 221001



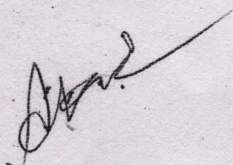
4262 6858 4817







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





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Visit ID	: CVAR0025482223	Reported	: 25/Jun/2022 15:52:35
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	A
Rh (Anti-D)	POSITIVE

Complete Blood Count (CBC) * , Whole Blood

Haemoglobin	12.10	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 Female- 12.0-15.5 g/dl
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TLC (WBC)	5,500.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
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DLC

Polymorphs (Neutrophils)	68.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	25.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	5.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	2.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE

ESR

Observed	16.00	Mm for 1st hr.
Corrected	4.00	Mm for 1st hr. <9
PCV (HCT)	37.00	cc % 40-54

Platelet count

Platelet Count	1.40	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	15.80	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	34.40	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.13	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	13.30	fL	6.5-12.0	ELECTRONIC IMPEDANCE

RBC Count

RBC Count	4.10	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
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MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Indices (MCV, MCH, MCHC)				
MCV	88.50	fl	80-100	CALCULATED PARAMETER
MCH	29.40	pg	28-35	CALCULATED PARAMETER
MCHC	33.20	%	30-38	CALCULATED PARAMETER
RDW-CV	13.80	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	45.60	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,740.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	110.00	/cu mm	40-440	



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





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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	104.70	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

Glucose PP	173.10	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD
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Interpretation:

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- 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.
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GLYCOSYLATED HAEMOGLOBIN (HBA1C) **, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	6.20	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	44.00	mmol/mol/IFCC		
Estimated Average Glucose (eAG)	131	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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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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MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) <i>Sample:Serum</i>	12.80	mg/dL	7.0-23.0	CALCULATED
Creatinine <i>Sample:Serum</i>	1.30	mg/dl	0.5-1.3	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) <i>Sample:Serum</i>	56.50	ml/min/1.73m ²	90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid <i>Sample:Serum</i>	6.60	mg/dl	3.4-7.0	URICASE
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	30.90	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	13.30	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	45.30	IU/L	11-50	OPTIMIZED SZAZING
Protein	7.90	gm/dl	6.2-8.0	BIRUET
Albumin	4.60	gm/dl	3.8-5.4	B.C.G.
Globulin	3.30	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.39		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	40.30	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.70	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.30	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.40	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) , Serum				
Cholesterol (Total)	143.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	33.30	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	95	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	14.30	mg/dl	10-33	CALCULATED
Triglycerides	71.50	mg/dl	< 150 Normal 150-199 Borderline High	GPO-PAP





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200-499 High
>500 Very High



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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	LIGHT YELLOW			
Specific Gravity	1.010			
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			
Microscopic Examination:				
Epithelial cells	OCCASIONAL			MICROSCOPIC EXAMINATION
Pus cells	2-3/h.p.f			MICROSCOPIC EXAMINATION
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

STOOL, ROUTINE EXAMINATION * , Stool

Color	BROWNISH
Consistency	SEMI SOLID
Reaction (PH)	Acidic (6.5)
Mucus	ABSENT
Blood	ABSENT
Worm	ABSENT
Pus cells	1-2/h.p.f





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Test Name	Result	Unit	Bio. Ref. Interval	Method
RBCs	ABSENT			
Ova	ABSENT			
Cysts	ABSENT			
Others	ABSENT			

SUGAR, FASTING STAGE * , Urine

Sugar, Fasting stage ABSENT gms%

Interpretation:

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



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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>	1.420	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)	115.62	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	9.36	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	4.17	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, 0542-3500227
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SARABOBHOUM APURBA KUMAR-PKG1000	Registered On	: 25/Jun/2022 08:45:27
Age/Gender	: 59 Y 0 M 0 D /M	Collected	: 25/Jun/2022 11:28:39
UHID/MR NO	: CVAR.0000030007	Received	: 26/Jun/2022 10:33:07
Visit ID	: CVAR0025482223	Reported	: 26/Jun/2022 11:46:41
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

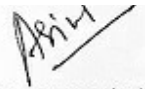
DEPARTMENT OF IMMUNOLOGY

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, 0542-3500227
CIN : U85110DL2003PLC308206



Patient Name	: Mr.SARABOBHOUM APURBA KUMAR-PKG1000	Registered On	: 25/Jun/2022 08:45:28
Age/Gender	: 59 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000030007	Received	: N/A
Visit ID	: CVAR0025482223	Reported	: 25/Jun/2022 12:05:40
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 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)





CHANDAN DIAGNOSTIC CENTRE

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



Patient Name	: Mr.SARABOBHOUM APURBA KUMAR-PKG1000	Registered On	: 25/Jun/2022 08:45:28
Age/Gender	: 59 Y 0 M 0 D /M	Collected	: N/A
UHID/MR NO	: CVAR.0000030007	Received	: N/A
Visit ID	: CVAR0025482223	Reported	: 25/Jun/2022 09:33:46
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:** -It measures 15.3 cm in mid clavicular line.It is normal in shape and echogenicity. No focal lesion is seen. No intra hepatic biliary radicle dilation seen.
- **GALL BLADDER :-** Multiple hyperechoic foci,more than 50 in number, shadowing distally and each measuring about 5 to 6 mm in diameter are seen in gb lumen.
- **CBD :-** It measures 2.9 mm in caliber.
- **PORTAL VEIN:** - It measures 12.8 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:** - It measures 13.3 cm in its long axis.It is normal in echotexture.
- **RIGHT KIDNEY:** - Normal in size (10.6 x 4.4 cm), shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.
- **LEFT KIDNEY:** - Normal in size (10.6 x 4.8 cm), shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.
- **URINARY BLADDER :-** Bladder wall thickness 5.9 mm.Prevoid urine volume 104 cc.Post void residual urine volume 4 cc.
- **PROSTATE :-** Size (37 x 32 x 41 mm/27 gms).
- Visualized bowel loops are normal in caliber. No para-aortic lymphadenopathy
- No free fluid is seen in the abdomen/pelvis.

IMPRESSION :

- **Cholelithiasis**
- **Mild splenomegaly**
- **Mild prostatic hypertrophy (27 gms)**
- **Prevoid urine volume- (104).PVRU-(4 cc)**

Please correlate clinically

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.



AGE, ECG / EKG, Tread Mill Test (TMT)

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



CHANDAN DIAGNOSTIC CENTRE

Name of Company: *Mediowheel*

Name of Executive: *Sarbohhom Apoorba Kumar*

Date of Birth: *18/08/1963*

Sex: *Male / Female*

Height: *169*.....CMs

Weight: *74*.....KGs

BMI (Body Mass Index) : *25.9*

Chest (Expiration / Inspiration) *96 / 98*.....CMs

Abdomen: *90*.....CMs

Blood Pressure: *110 / 70*.....mm/Hg

Pulse: *74*.....BPM - *Regular / Irregular*

RR: *17*.....Resp/Min

Ident Mark: *Cut mark on Lt eyebrow*

Any Allergies: *(i)*

Vertigo: *None*

Any Medications: *(i) Liver Psoriasis → 3 months. (ii) Skin Disease → 27 yrs (iii) UTI → 8 months. } Tab Not Conf.*

Any Surgical History: *① P/Fracture of Rt Tibia & Fibula (29-10-21) - BHU*

Habits of alcoholism/smoking/tobacco: *① Tobacco - 2 Times / Days - 1990*

Chief Complaints if any: *No*

Lab Investigation Reports: *Yes*

Eye Check up vision & Color vision: *Normal & Power given - 10 yes.*

Left eye: *None*

Right eye: *None*

Near vision: *None*

Far vision: *None given*

Dental check up: *None*

CHANDAN DIAGNOSTIC CENTRE

ENT Check up : *Met*

Eye Checkup: *Met*

Final impression

Sarbo Khoury Apurba Kr.

Certified that I examinedS/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 :-



Reg. No. - 26918
MBBS, MD
Dr. R. C. Roy

.....
Signature of Medical Examiner

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

Date *25.06* /2022, **Place** - VARANASIS



D63/6B-99, Shivaji Nagar Colony,
Mahmoorganj, Varanasi, Uttar Pradesh
22 10 10, India

Latitude

25.3054 19°

Longitude

82.979075°

LOCAL 10:14:45

GMT 04:44:45

SATURDAY 06.25.2022

ALTITUDE 18 METER