



Chandan healthcare <chandanhealthcare26@gmail.com>

Fwd: Health Check up Booking Re Schedule Request(bobS44389),Package Code-PKG10000238, Beneficiary Code-24775

1 message

anurag sri <anurag.idc@gmail.com>

Tue, Sep 5, 2023 at 3:42 PM

To: Chandan healthcare <chandanhealthcare26@gmail.com>

Pack Code: 2613

----- Forwarded message -----

From: **Mediwheel** <wellness@mediwheel.in>

Date: Tue, Sep 5, 2023 at 10:20 AM

Subject: Health Check up Booking Re Schedule Request(bobS44389),Package Code-PKG10000238, Beneficiary Code-24775

To: <anurag.idc@gmail.com>

Cc: <customercare@mediwheel.in>

**Mediwheel**
...Your wellness partner

011-41195959

Email:wellness@mediwheel.in

Dear **Chandan Healthcare Limited**,

Diagnostic/Hospital Location :B1/2 Sec-J, Aliganj, Lucknow, City:Lucknow

We regret to state that following request for Health check up appointment has been Re Scheduled by you. Please let us know if request had not been Re Schedule from your end. We will ask the user to make a fresh request for the same.

Booking Code : bobS44389
Appointment Date : 09-09-2023
Appointment Time : 8:00am-8:30am
Beneficiary Name : DINESH KUMAR
Package Name : Full Body Health Checkup Male Below 40
Member Age : 35
Member Relation : Spouse
Member Gender : Male
Address of Diagnostic/Hospital : B1/2 Sec-J, Aliganj, Lucknow
City : Lucknow
State : Uttar Pradesh
Pincode : 226024
Contact Details : 8081374491
Email : anurag.idc@gmail.com



Please login to your account to confirm the same. Also you mail us for confirmation.

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 भारत सरकार
 Government of India


 दिनेश कुमार
 Dinesh Kumar
 जन्म तिथि / DOB : 25/01/1988
 पुरुष / Male



7802 9688 0314

आधार - आम आदमी का अधिकार



Unique Identification Authority of India
 भारतीय विशिष्ट पहचान प्राधिकरण

पता:
 स्थान: श्याम लाल 2, निकट आई
 आई एम रोड निकट बाडा मंदिर
 काकोली, अर्ध नगर दिगुनिया
 दिगुनिया, लखनऊ, उत्तर प्रदेश
 226020

Address:
 S/O: Shyam Lal, 2, NEAR I I M
 ROAD, NEAR BADA MANDIR,
 KAKAULI, ARIH NAGAR DIGUNYA,
 DIGUNYA, LUCKNOW, UTTAR PRADESH,
 226020

7802 9688 0314

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 1800 300 1947
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CHANDAN DIAGNOSTIC CENTRE

Add: B 1/2, Sector J, Near Sangam Chauraha, Lda Stadium Road, Aliganj
Ph: 9235432681,
CIN : U85110DL2003PLC308206



Patient Name	: Mr.DINESH KUMAR	Registered On	: 09/Sep/2023 08:41:53
Age/Gender	: 35 Y 7 M 14 D /M	Collected	: 09/Sep/2023 08:58:41
UHID/MR NO	: CALI.0000047235	Received	: 09/Sep/2023 12:18:42
Visit ID	: CALI0108902324	Reported	: 09/Sep/2023 15:38:01
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

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

Blood Group	A			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
Rh (Anti-D)	POSITIVE			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA

Complete Blood Count (CBC) ** , Whole Blood

Haemoglobin	14.30	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	
TLC (WBC)	5,900.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
<u>DLC</u>				
Polymorphs (Neutrophils)	54.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	39.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	5.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	2.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE
<u>ESR</u>				
Observed	10.00	Mm for 1st hr.		
Corrected	8.00	Mm for 1st hr.	<9	
PCV (HCT)	45.00	%	40-54	
Platelet count				
Platelet Count	2.30	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.40	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	38.80	%	35-60	ELECTRONIC IMPEDANCE





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DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
PCT (Platelet Hematocrit)	0.26	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	11.60	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBCCount				
RBC Count	5.32	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	85.50	fL	80-100	CALCULATED PARAMETER
MCH	27.00	pg	28-35	CALCULATED PARAMETER
MCHC	31.50	%	30-38	CALCULATED PARAMETER
RDW-CV	15.80	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	48.60	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,186.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	118.00	/cu mm	40-440	

Slahoti.

Dr. Surbhi Lahoti (M.D. Pathology)





CHANDAN DIAGNOSTIC CENTRE

Add: B 1/2, Sector J, Near Sangam Chauraha, Lda Stadium Road, Aliganj
Ph: 9235432681,
CIN : U85110DL2003PLC308206



Patient Name	: Mr.DINESH KUMAR	Registered On	: 09/Sep/2023 08:41:56
Age/Gender	: 35 Y 7 M 14 D /M	Collected	: 09/Sep/2023 08:58:40
UHID/MR NO	: CALI.0000047235	Received	: 09/Sep/2023 12:09:20
Visit ID	: CALI0108902324	Reported	: 09/Sep/2023 13:38:26
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

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

Glucose Fasting	93.50	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 diabetics in future, which is why an Annual Health Check up is essential.
- I.G.T = Impared Glucose Tolerance.

Glucose PP **

Sample: Plasma After Meal

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

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- I.G.T = Impared Glucose Tolerance.

GLYCOSYLATED HAEMOGLOBIN (HBA1C) ** , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.60	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	38.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	114	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.





CHANDAN DIAGNOSTIC CENTRE

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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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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 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 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.

BUN (Blood Urea Nitrogen) ** Sample:Serum	8.70	mg/dL	7.0-23.0	CALCULATED
Creatinine ** Sample:Serum	0.96	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20-275 Female-20-320	MODIFIED JAFFES
Uric Acid ** Sample:Serum	4.14	mg/dl	3.4-7.0	URICASE





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
LFT (WITH GAMMA GT) ** , Serum				
SGOT / Aspartate Aminotransferase (AST)	37.70	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	51.50	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	21.40	IU/L	11-50	OPTIMIZED SZAIZING
Protein	6.24	gm/dl	6.2-8.0	BIURET
Albumin	4.03	gm/dl	3.4-5.4	B.C.G.
Globulin	2.21	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.82		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	84.00	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.53	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.20	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.33	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) ** , Serum				
Cholesterol (Total)	203.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	55.10	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	126	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	21.44	mg/dl	10-33	CALCULATED
Triglycerides	107.20	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP

Dr. Anupam Singh (MBBS MD Pathology)





CHANDAN DIAGNOSTIC CENTRE

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Ph: 9235432681,
CIN : U85110DL2003PLC308206



Patient Name	: Mr.DINESH KUMAR	Registered On	: 09/Sep/2023 08:41:54
Age/Gender	: 35 Y 7 M 14 D /M	Collected	: 09/Sep/2023 10:16:24
UHID/MR NO	: CALI.0000047235	Received	: 09/Sep/2023 11:39:30
Visit ID	: CALI0108902324	Reported	: 09/Sep/2023 13:36:41
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

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

Color	PALE YELLOW			
Specific Gravity	1.010			
Reaction PH	Acidic (5.0)			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	0.1-3.0	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	0-1/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	ABSENT			
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

S. Lahoti

Dr. Surbhi Lahoti (M.D. Pathology)





CHANDAN DIAGNOSTIC CENTRE

Add: B 1/2, Sector J, Near Sangam Chauraha, Lda Stadium Road, Aliganj
Ph: 9235432681,
CIN : U85110DL2003PLC308206



Patient Name	: Mr.DINESH KUMAR	Registered On	: 09/Sep/2023 08:41:54
Age/Gender	: 35 Y 7 M 14 D /M	Collected	: 09/Sep/2023 12:47:41
UHID/MR NO	: CALI.0000047235	Received	: 09/Sep/2023 16:00:59
Visit ID	: CALI0108902324	Reported	: 10/Sep/2023 17:17:49
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

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

Color	BROWNISH
Consistency	SEMI SOLID
Reaction (PH)	Acidic (6.5)
Mucus	ABSENT
Blood	ABSENT
Worm	ABSENT
Pus cells	ABSENT
RBCs	ABSENT
Ova	ABSENT
Cysts	ABSENT
Others	ABSENT

Slahoti.

Dr. Surbhi Lahoti (M.D. Pathology)





CHANDAN DIAGNOSTIC CENTRE

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Ph: 9235432681,
CIN : U85110DL2003PLC308206



Patient Name	: Mr.DINESH KUMAR	Registered On	: 09/Sep/2023 08:41:55
Age/Gender	: 35 Y 7 M 14 D /M	Collected	: 09/Sep/2023 12:46:55
UHID/MR NO	: CALI.0000047235	Received	: 09/Sep/2023 16:00:59
Visit ID	: CALI0108902324	Reported	: 09/Sep/2023 17:05:52
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

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

Sugar, Fasting stage	ABSENT	gms%
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Interpretation:

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

SUGAR, PP STAGE** , Urine

Sugar, PP Stage	ABSENT
-----------------	--------

Interpretation:

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

Slahoti.

Dr. Surbhi Lahoti (M.D. Pathology)





CHANDAN DIAGNOSTIC CENTRE

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Ph: 9235432681,
CIN : U85110DL2003PLC308206



Patient Name	: Mr.DINESH KUMAR	Registered On	: 09/Sep/2023 08:41:55
Age/Gender	: 35 Y 7 M 14 D /M	Collected	: 09/Sep/2023 08:58:40
UHID/MR NO	: CALI.0000047235	Received	: 09/Sep/2023 11:57:29
Visit ID	: CALI0108902324	Reported	: 09/Sep/2023 14:11:21
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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THYROID PROFILE - TOTAL ** , Serum

T3, Total (tri-iodothyronine)	135.62	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	8.60	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	3.100	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.
- 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 (MBBS MD Pathology)





CHANDAN DIAGNOSTIC CENTRE

Add: B 1/2, Sector J, Near Sangam Chauraha, Lda Stadium Road, Aliganj
Ph: 9235432681,
CIN : U85110DL2003PLC308206



Patient Name	: Mr.DINESH KUMAR	Registered On	: 09/Sep/2023 08:41:58
Age/Gender	: 35 Y 7 M 14 D /M	Collected	: N/A
UHID/MR NO	: CALI.0000047235	Received	: N/A
Visit ID	: CALI0108902324	Reported	: 09/Sep/2023 14:39:18
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA *

(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

DIGITAL CHEST P-A VIEW

- **Subtle fibrotic opacities are seen in left lower lung zone.**
- **Rest of bilateral lung fields are unremarkable.**
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.

Dr. Pankaj Kumar Gupta (M.B.B.S D.M.R.D)





CHANDAN DIAGNOSTIC CENTRE

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Ph: 9235432681,
CIN : U85110DL2003PLC308206



Patient Name	: Mr.DINESH KUMAR	Registered On	: 09/Sep/2023 08:41:58
Age/Gender	: 35 Y 7 M 14 D /M	Collected	: N/A
UHID/MR NO	: CALI.0000047235	Received	: N/A
Visit ID	: CALI0108902324	Reported	: 09/Sep/2023 11:01:00
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

WHOLE ABDOMEN ULTRASONOGRAPHY REPORT

LIVER

- The liver is normal in size ~ 12.5 cm in longitudinal span and has a normal homogenous echotexture. No focal lesion is seen.

PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- The portal vein is not dilated.
- Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common duct is 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 is normal in size ~ 10.1 x 4.4 cm position and cortical echotexture. Cortico-medullary demarcation is maintained.
- Left kidney is normal in size ~ 10.3 x 4.6 cm position and cortical echotexture. Cortico-medullary demarcation is maintained.
- **A small calculus measuring ~ 4.0 mm seen at mid pole calyx of left kidney.**
- The collecting system of both the kidneys are not dilated.

SPLEEN

- The spleen is normal in size ~ 8.2 cm and has a normal homogenous echo-texture.

ILIAC FOSSAE & PERITONEUM

- Scan over the iliac fossae does not reveal any fluid collection or mass.
- No free fluid is noted in peritoneal cavity.

URINARY BLADDER

- The urinary bladder is normal. Bladder wall is normal in thickness and is regular. No calculus is seen.





CHANDAN DIAGNOSTIC CENTRE

Add: B 1/2, Sector J, Near Sangam Chauraha, Lda Stadium Road, Aliganj
Ph: 9235432681,
CIN : U85110DL2003PLC308206



Patient Name	: Mr.DINESH KUMAR	Registered On	: 09/Sep/2023 08:41:58
Age/Gender	: 35 Y 7 M 14 D /M	Collected	: N/A
UHID/MR NO	: CALI.0000047235	Received	: N/A
Visit ID	: CALI0108902324	Reported	: 09/Sep/2023 11:01:00
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

PROSTATE

- The prostate gland is normal in size with smooth outline. (volume ~ 17 cc).
- **Bilateral seminal vesicle appears bulky and heterogenous.**

FINAL IMPRESSION

- **SMALL LEFT RENAL CALCULUS.**
- **BULKY AND HETEROGENOUS BILATERAL SEMINAL VESICLE.**

Adv: Clinico-pathological correlation and follow-up.

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

Result/s to Follow:
ECG/EKG




Dr. Pankaj Kumar Gupta (M.B.B.S D.M.R.D)

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

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Home Sample Collection
1800-419-0002

Mar. 2018