

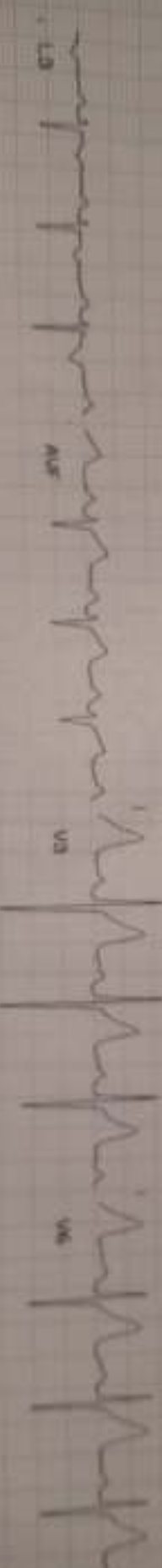
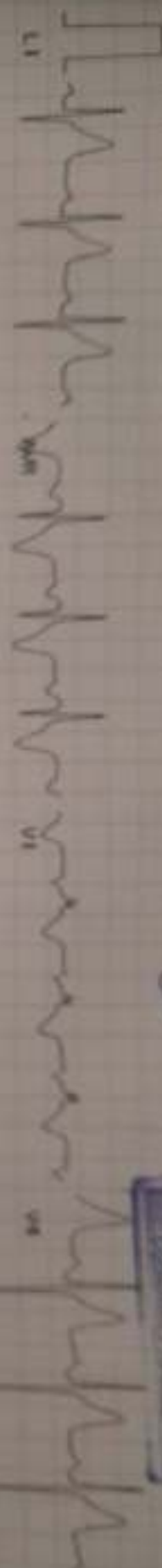
036976
Sanjay Kumar Singh
M 45Y 0700-9
12:00 PM
23/09/2023

25 PRP/S
1500/44
0.1 - 300uV
500Hz ReJ-V
AUTO 12LS R.C.V
PRP : 25
QRS : 125
PR : 150
QT : 395
QTc : 415
PRP : 25
QRS : 125
PR : 150
QT : 395
QTc : 415

PRP : 25
QRS : 125
PR : 150
QT : 395
QTc : 415

WNL

DR. PRANAV PATEL
MBBS, MD
CC (Gen. Med.)
CC (Int. Med.)
CC (Cardiology)
CC (Nephrology)
CC (Critical Care)
CC (Emergency Medicine)
CC (Infectious Disease)
CC (Palliative Care)
CC (Sports Medicine)
CC (Vascular Medicine)



FITNESS CERTIFICATE


CANDIDATE

Name: Sanjay Kumar Singh
 Date of Birth: 06/02/1978 Age: 45 Blood Group: _____
 Sex: Male Female | Marital Status: Married Unmarried
 Address: _____
 Any allergy / Disability / Pre-existing disease: no any Date: 23/09/23

CLINICAL FINDINGS

Height <u>1.60 Cms.</u>	Weight <u>78 Kgs.</u>	Near LE: <u>6</u> R.E: <u>6</u> Vision: Distant LE: <u>6</u> R.E: <u>6</u> Colour Vision: <u>good</u>	Hearing Left Ear: <u>clear</u> Right Ear: <u>clear</u>
BP: <u>120/80 mmHg</u>	Pulse Rate: <u>82/min</u>	Resp. Rate: <u>20</u>	
CVS: <u>S, S2 @</u>	RS: <u>BEAT clear</u>	Abdomen: <u>SOFT, NOT TENDR</u>	
Any other Findings: <u>NO</u>			

CERTIFICATE

I Dr.: Pranav Patel
 hereby certify that I have examined Mr./Ms.: Sanjay Kumar Singh
 on 20/23/09/23 and find him FIT / UNFIT for employment.
 Remarks if unfit: _____

 Signature & Seal: _____
 Signature of Candidate: [Signature]
 DR. PRANAV PATEL
 M.D. PHYSICIAN
 G-71382
 FELLOWSHIP IN MEDICAL EMERGENCY
 Address / Tel No: _____

DECLARATION

I declare that the above information is true and correct to the best of my knowledge and I am not suffering from any disease / illness, the presence of which I have not revealed. I fully understand that any misrepresentation of this declaration could lead to the termination of my offer / appointment. In case of any discrepancy arising out of my declaration, I will undergo the medical check-up by the company's suggested doctor and their findings will be fully binding on me and action thereon towards my employment will be accepted by me.

Signature of Candidate: [Signature] Date: 23/09/23



भारत सरकार
Government of India



Issue Date: 30/12/2012



Sanjay Kumar Singh
DOB: 06/01/1978
Male

5362 3778 1530

मेरा आधार, मेरी पहचान

(Signature)

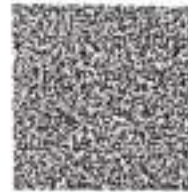


भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



Print Date: 23/08/2021

Address: SANJAY KUMAR SINGH, C-301
HAVELI RESI CUM PLAZA, NEAR AIR
FORCE STATION MAKARPURA,
MAKARPURA, Vadodars, Gujarat, 390014



5362 3778 1530

1947

help@uidai.gov.in

www.uidai.gov.in





बैंक ऑफ बड़ोदा
Bank of Baroda

नाम: शरदकुमार सिंग
Name: SARAD KUMAR SINGH
बैंक खाते नंबर:
E.C. No. 127384



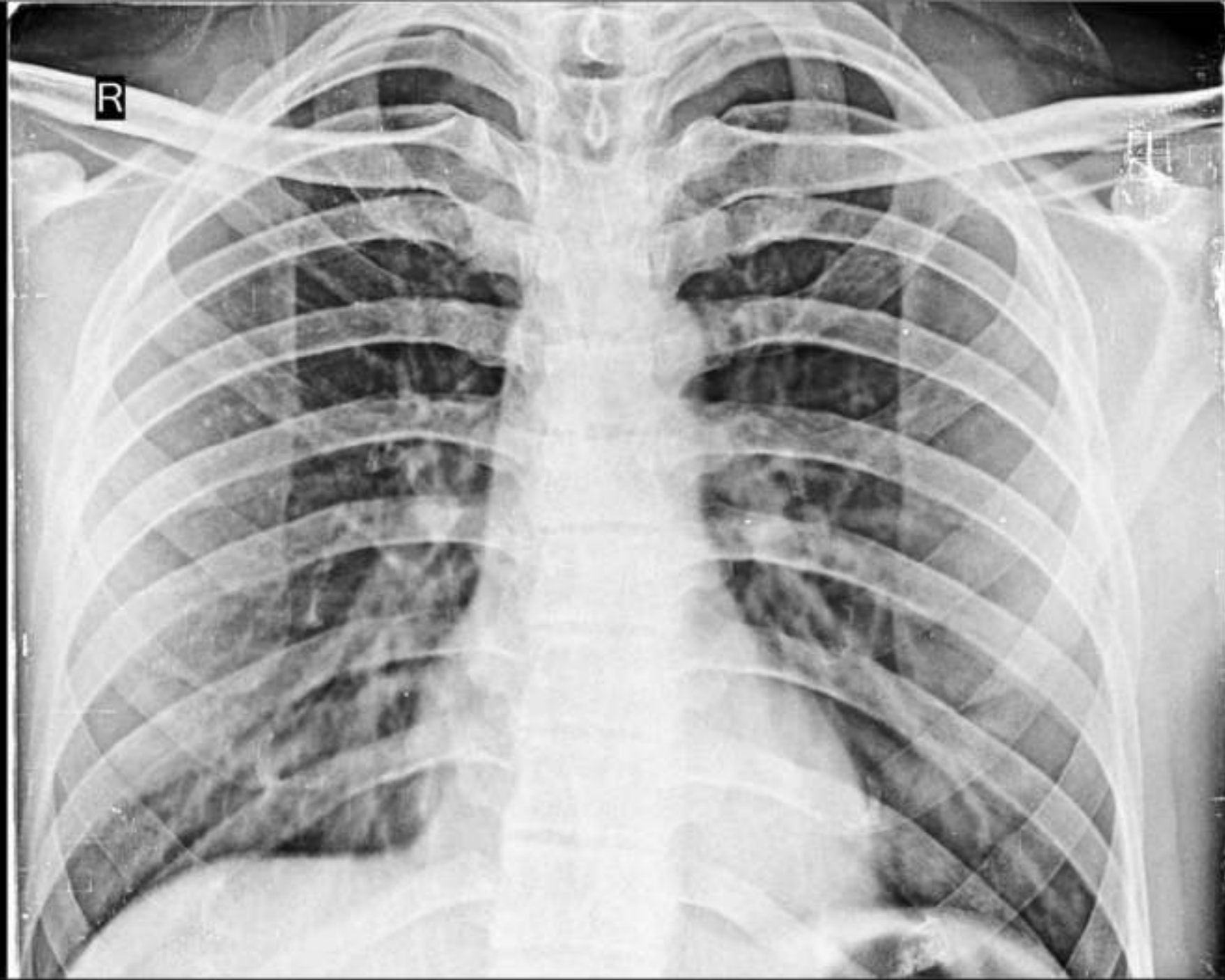
शरद क. सिंग
Signature of holder

अधिकृत अधिकारी
Issuing Authority

शुद्ध-रक्त, प्रसिद्धता अंतर्गत
जो उपरोक्त
रक्त अंतर्गत, अंतर्गत
रक्त अंतर्गत, अंतर्गत
रक्त अंतर्गत, अंतर्गत - 308 001 (गुजरात) अंतर्गत
अंतर्गत 21 2002 242084 258008 268001 268002

If found, please return to
Dy. General Manager
Regional Office, Anand Region
Kankar Plaza, 2nd Floor
Station Road, Anand-388 001 (Gujarat) India
Phone: 21 2002 242084 258008 268001 268002
रक्त समूह / Blood Group : O+ve
चिह्न / Identification Marks : A Cut Mark on right eye brow





SANJAY SINGH 45Y CHEST PA 23-09-2023
SUNNY DIGITAL X-RAY & ECG SERVICES 8758530074

163 SANJAYKUMAR SINGH
45 Yrs/ M Kg / Ht- cms Ref. No.

Date: 23-09-2023
Time: 09:23 AM

Ref By:
Protocol: Bruce

Summary

History:
Medication:

Stage	Stg Time mm:ss	Speed rpm	Grade %	METs	HR bpm	BP mmHg	RPP	PVCs
Pre Ex				1	81	120/80	97	
Supine				1	81	120/80	97	
Standing				1	81	120/80	97	
Hyp Vent				1	81	120/80	97	
S1	03:00	1.7	10.0	4.8	130	120/80	156	
S2	03:00	2.5	12.0	6.9	158	130/90	205	
Peak Ex	03:00	3.4	14.0	9.5	178	140/100	249	
Post Ex 1	02:00			1	116	135/90	157	
Post Ex 2	00:37			1	112	125/80	140	
Finish				1	112	125/80	140	

Findings: Exercise Time : 09:00 mins

Max HR attained : 178 bpm 101 % of Target 175 bpm

Max BP : 140/100mmHg

Max Workload attained : 9.5 METs (Good Effort Tolerance)

Reason for Test Termination: Patient Completed Test

No significant ST segment changes noted during exercise or recovery stages.

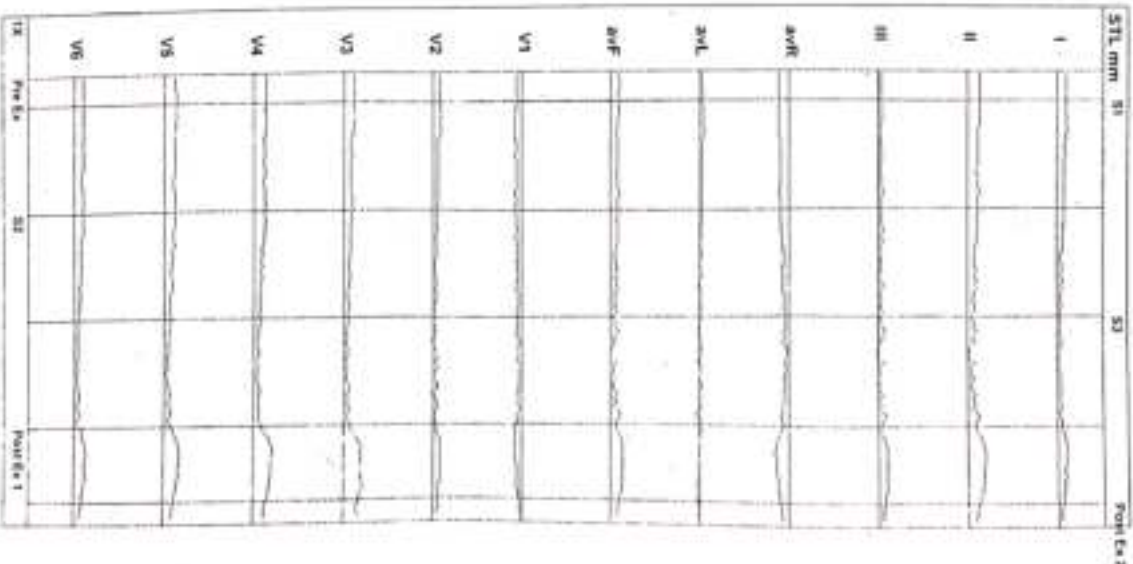
No Angina / Arrhythmia / S3 / Murrur

Final Impression : Test is negative for inducible ischaemia.

SPM



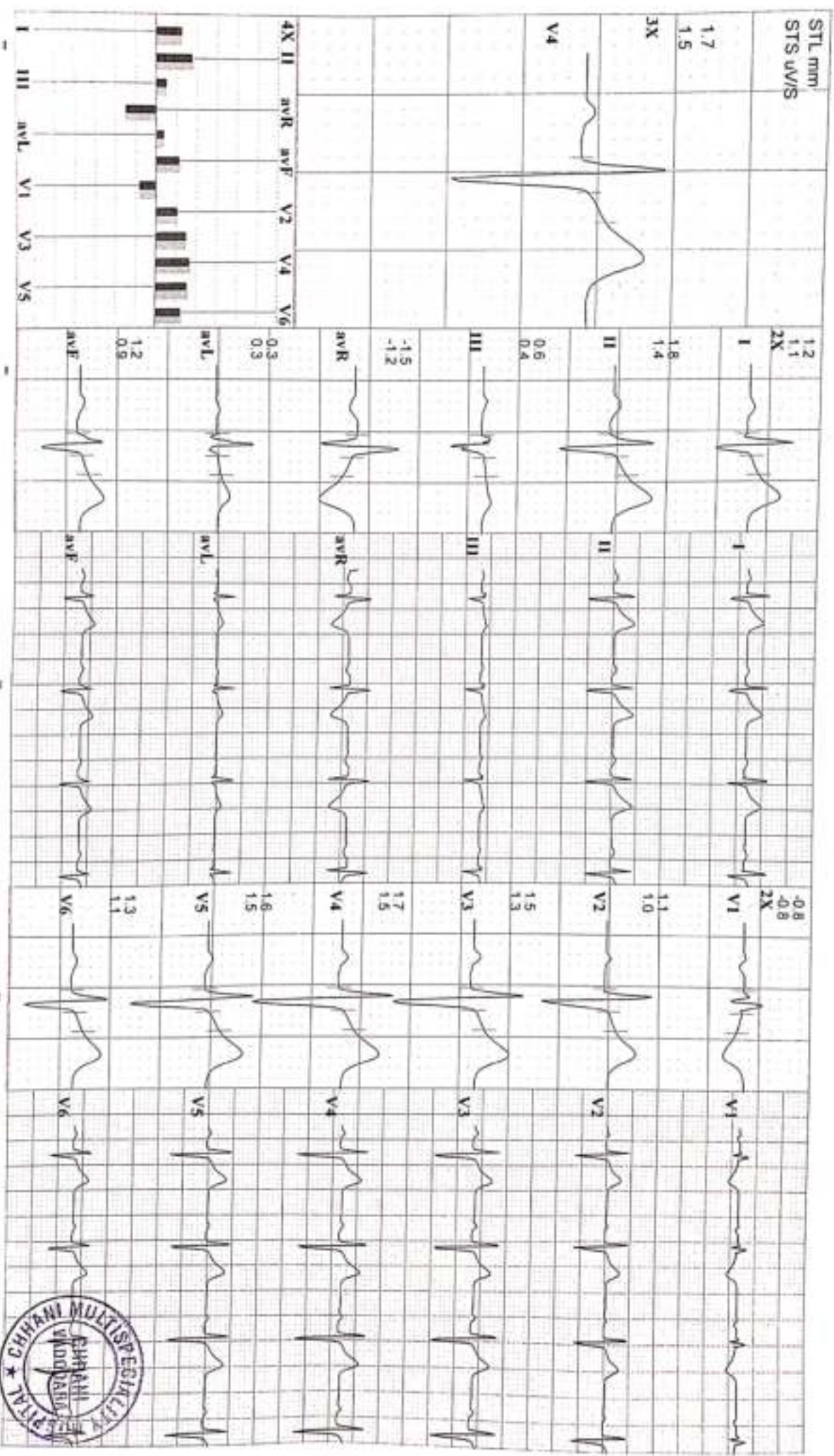
DR. PRANAV PATEL
MPPHYSICIAN
G-71382
FELLOWSHIP IN MEDICAL EMERGENCY
Consultant Physician



163
 45 Yrs/M
 Date: 23-09-2023 Time: 09:23 AM
 Post J: 77 mS

Speed: --- mph
 Grade: --- %
 Protocol: Bruce
 Hr: 82
 Met/s: 1
 BP: 120/80 mmHg
 Target Hr: 46 % of 175
 Ex Time: --- min:sec
 Curr Time: 00:08
 Filter: 0.1 - 100 Hz
 BLC: On
 Notch: Off
 Gain: 10 mm/mV
 Sweep: 25 mm/s
 Median Sweep: 25 mm/s

Linked Medians
 Pre Ex



163 SANJAYKUMAR SINGH

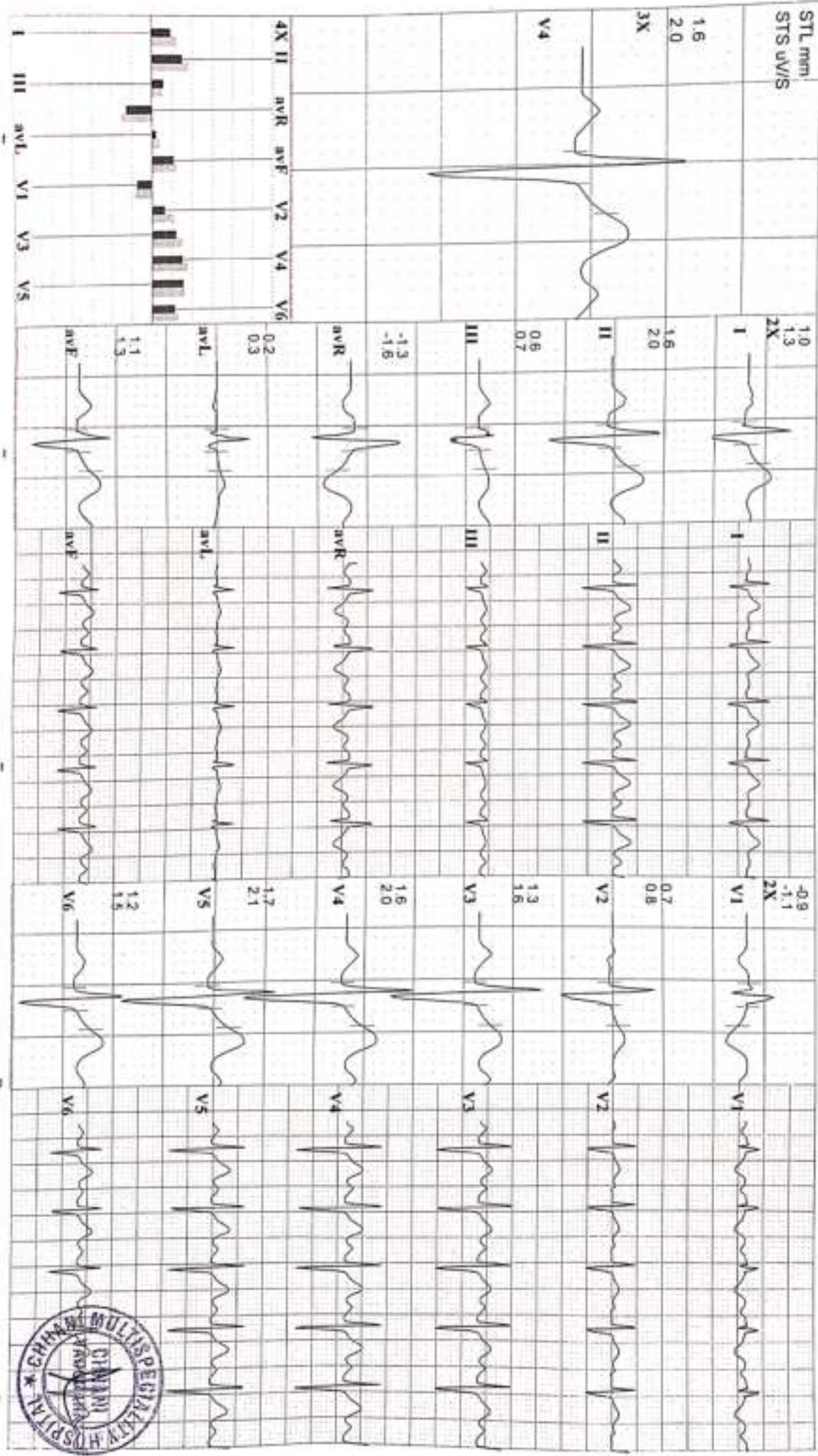
45 Yrs/ M Kg / Ht- cms Ref/No:

Date: 23-09-2023 Time: 09:23 AM

Post: J.77 m/s

Speed: 1.7 mph Hr: 130 Target Hr: 74 % of 175 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
 Grade: 10 % Metr: 4.8 Ex Time: 03:00 BLC: On Sweep: 25 mm/s
 Protocol: Bruce BP: 120/80 mmHg Cur Time: 03:39 Notch: Off Median Sweep: 25 mm/s

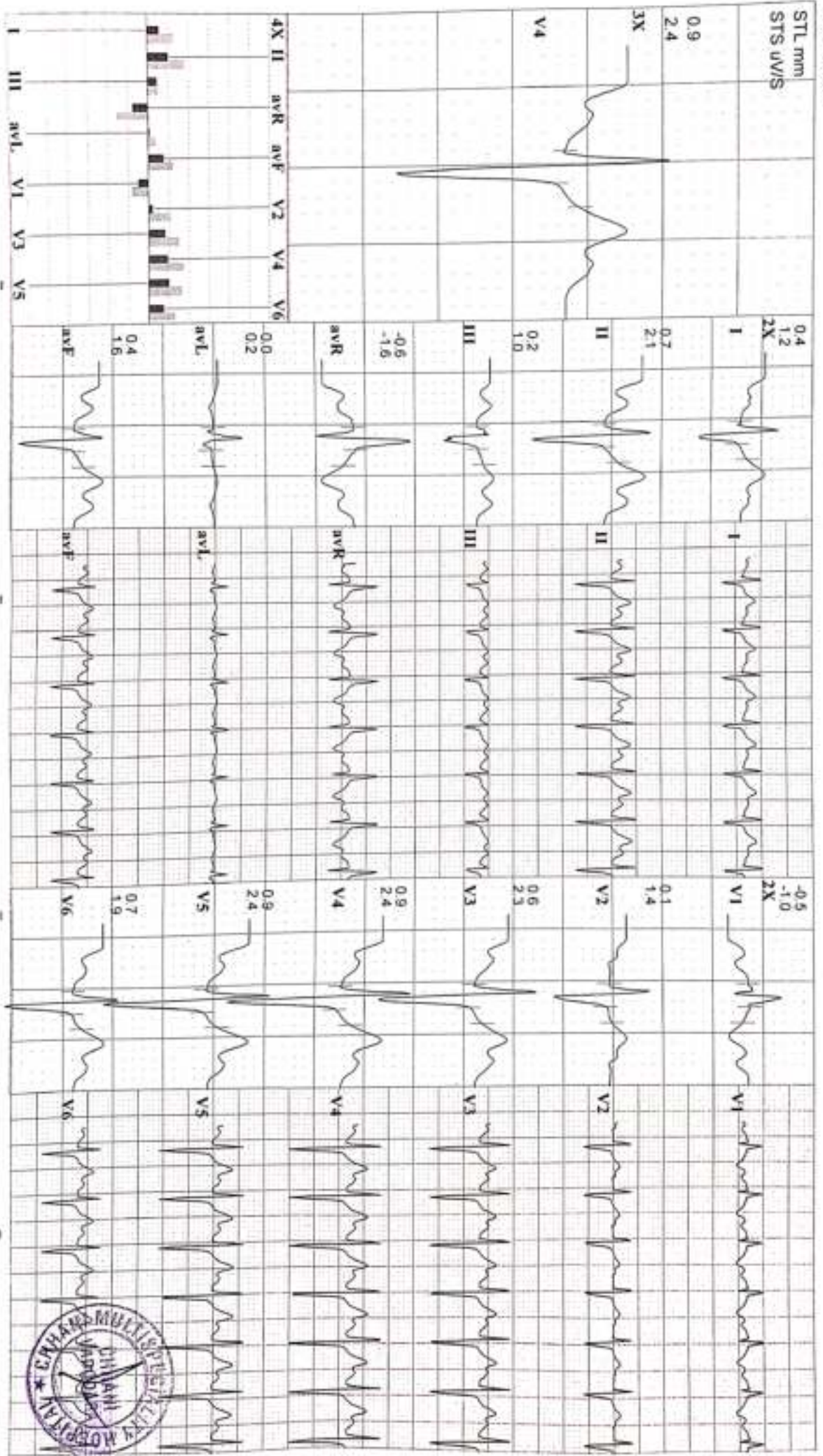
Linked Medians
S1



163 SANJAYKUMAR SINGH
45 Yrs/M Kg / Ht- cms Ref No:
Date: 23-09-2023 Time: 09:23 AM

Speed: 2.5 mph Hr: 158 Target Hr: 90 % of 175 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
Grade: 12 % Metrs: 6.9 Ex Time: 06:00 BLC: On Sweep: 25 mm/s
Protocol: Bruce BP: 130/90 mmHg Cur Time 06:39 Notch: Off Median Sweep: 25 mm/s

Post J: 63 ms
Linked Medians
S2



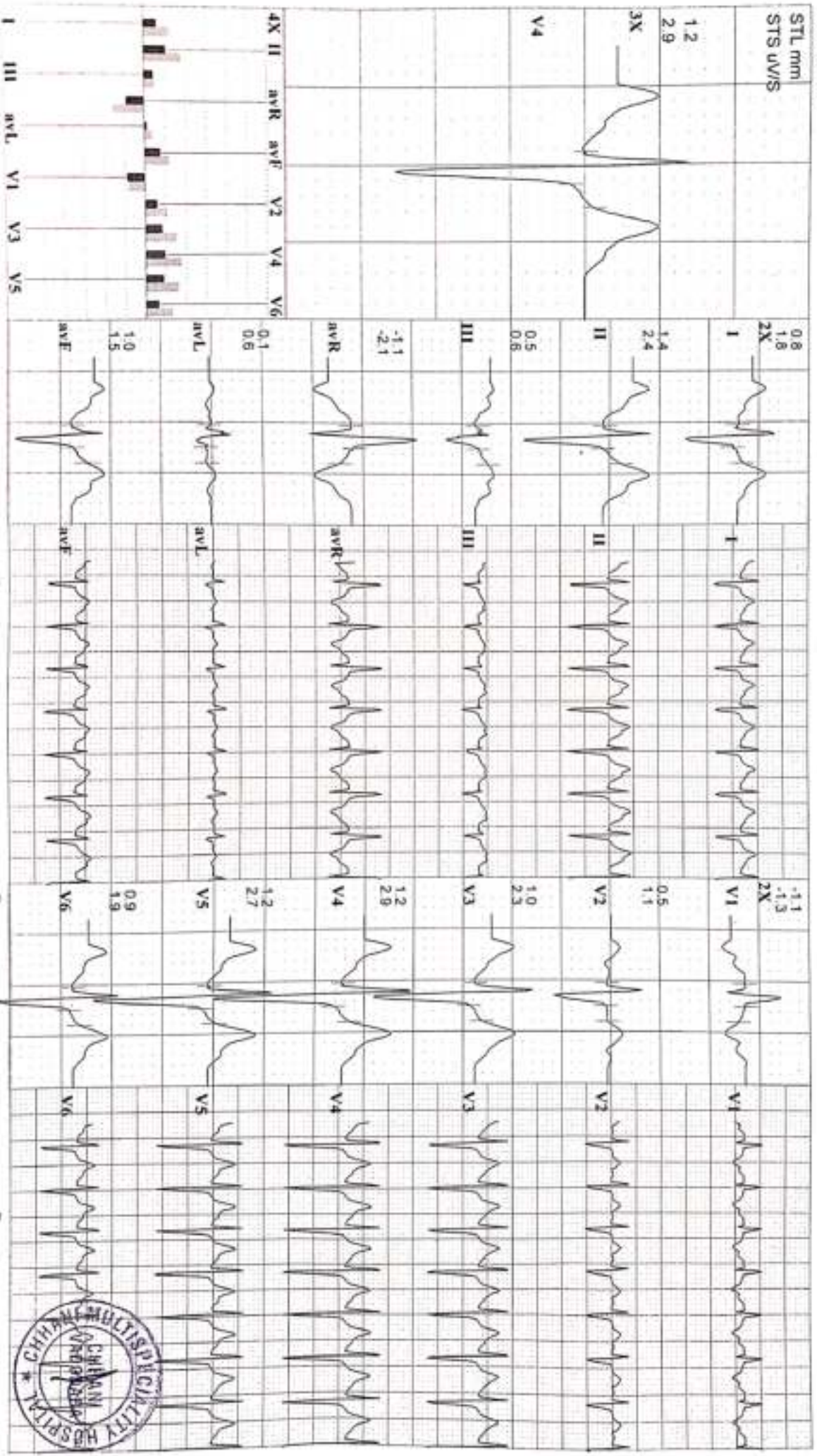
CHHANI MULTISPECIALITY HOSPITAL

Opp. Prakruti Resort, Chhani, Vadodara, Gujarat

163 SANJAYKUMAR SINGH
 45 Yrs/M Kg / Ht. cms Ref.No.:
 Date: 23-09-2023 Time: 09:23 AM

Speed: 3.4 mph Hr: 178 Target Hr: 101 % of 175 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
 Grade: 14 % Mts: 9.5 Ex Time: 09:00 BLC: On Sweep: 25 mm/s
 Protocol: Bruce BP: 140/100 mmHg Cur Time: 09:39 Notch: Off Median Sweep: 25 mm/s

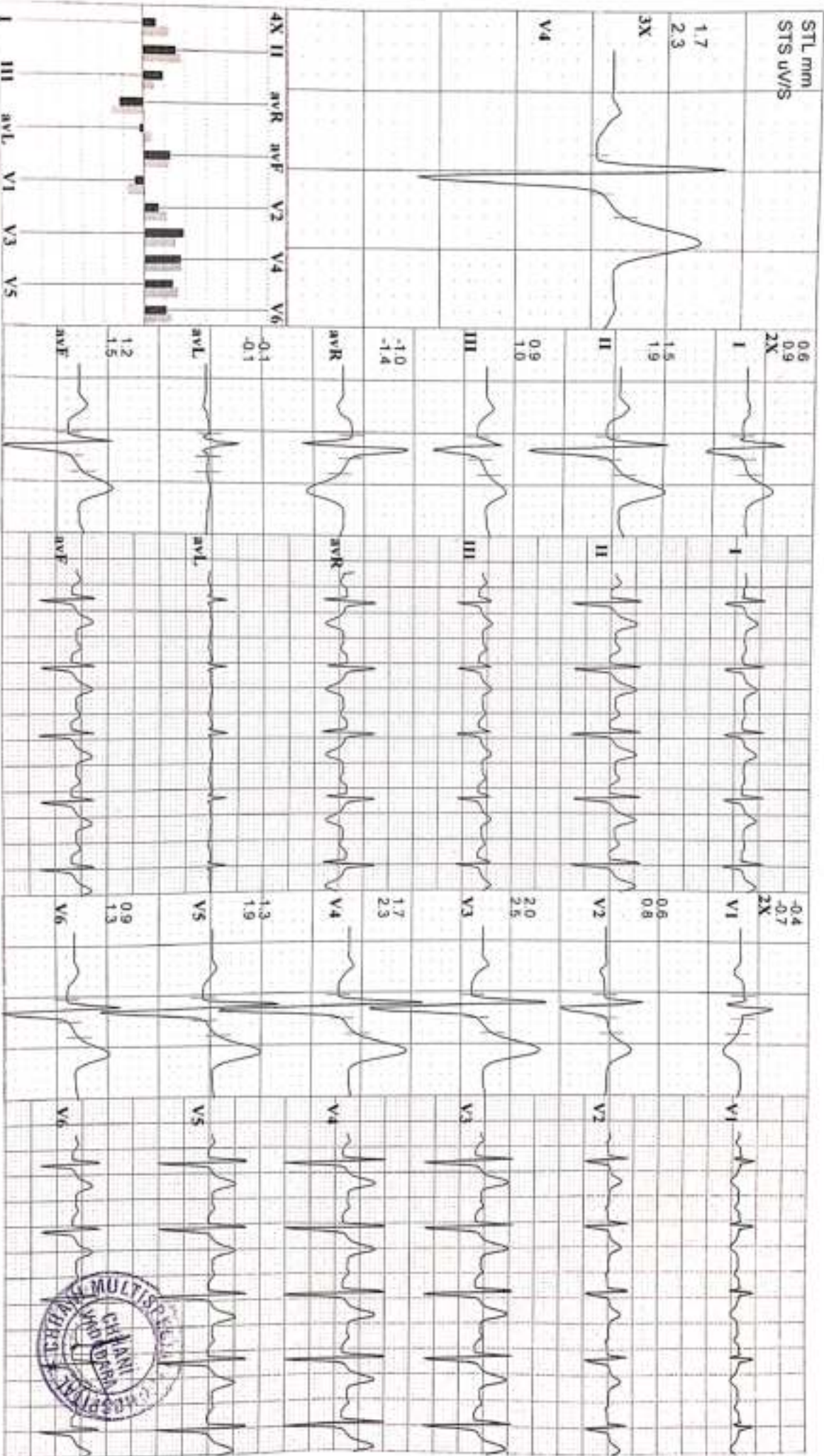
Linked Medians
Peak Ex



163 SANJAYKUMAR SINGH
 45 Yrs/ M Kg/ Ht. cms Ref.No.:
 Date: 23-09-2023 Time: 09:23 AM
 Post J:60 mS

Speed: --- mph Hr: 116 Target Hr: 66 % of 175 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
 Grade: --- % Mels: 1 Ex Time: 09:00 BLC: On Sweep: 25 mm/S
 Protocol: Bruce BP: 135/90 mmHg Cur Time: 11:39 Notch: Off Median Sweep: 25 mm/S

Linked Medians
 Post Ex 1



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163 SANJAYKUMAR SINGH

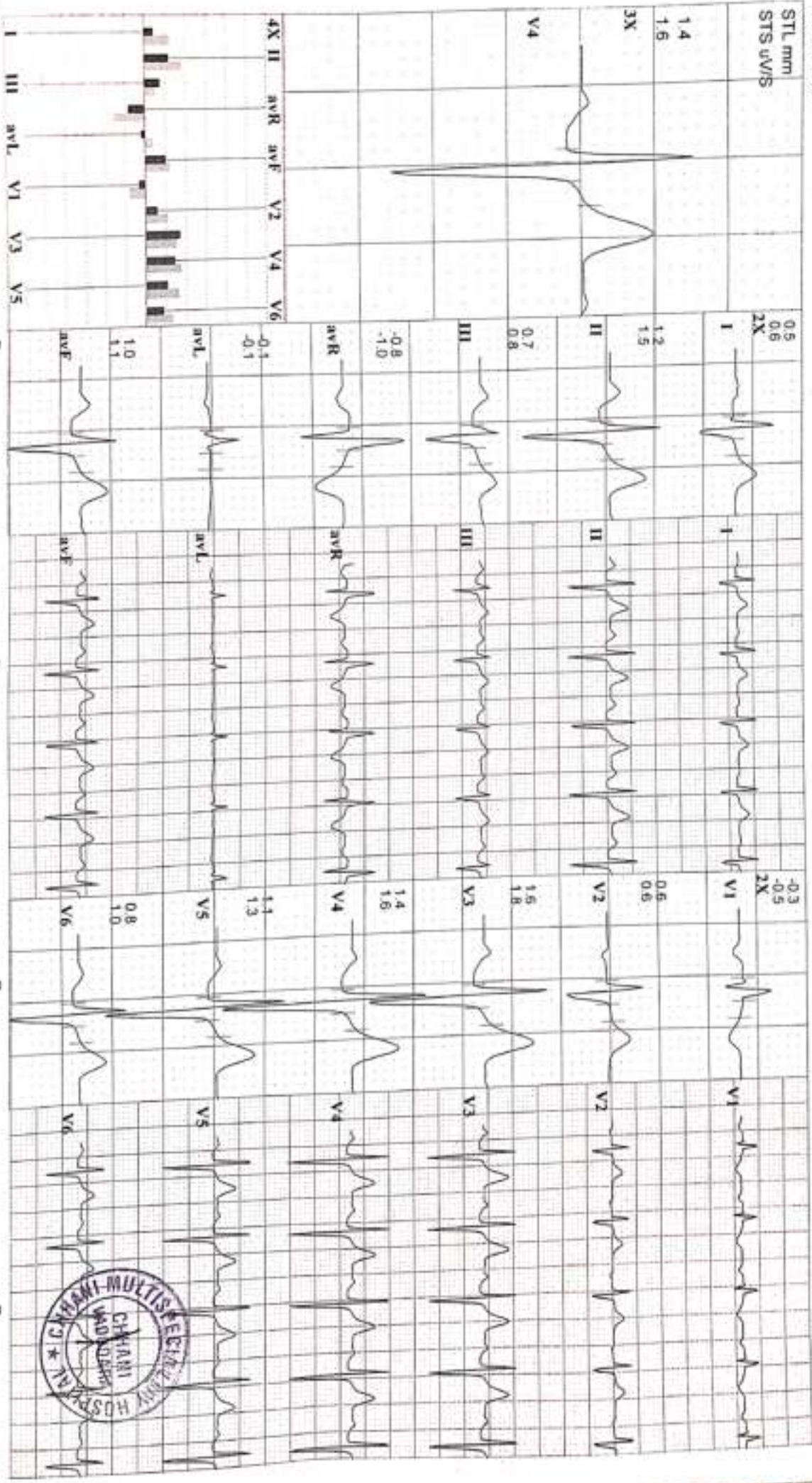
45 Yrs/M Kg / Ht. cms Ref No.:

Date: 23-09-2023 Time: 09:23 AM

Post J: 67 mS

Speed: --- mph Hr: 112 Target Hr: 64 % of 175 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
 Grade: --- % Met: 1 Ex Time: 09:00 B.L.C. On Sweep: 25 mm/s
 Protocol: Bruce BP: 125/80 mmHg Curr Time: 12:16 Nonchf Median Sweep: 25 mm/s

Linked Medians
Post Ex 2



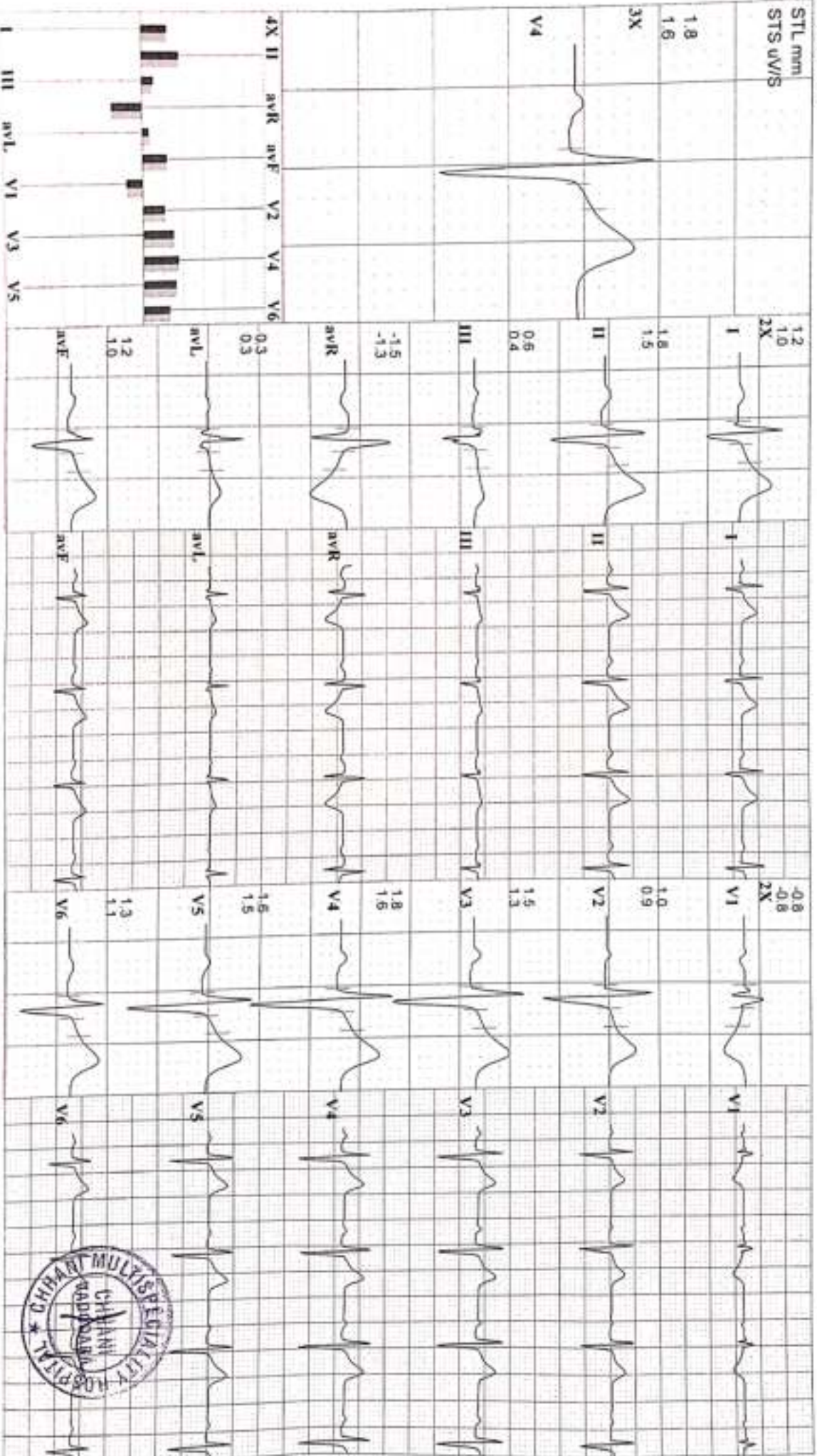
CHHANI MULTISPECIALITY HOSPITAL

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163 SANJAYKUMAR SINGH
 45 Yrs/M Kg / Ht- cms Ref.No.:
 Date: 23-09-2023 Time: 09:23 AM
 Post: J.69 mS

Speed: --- mph Hr: 81 Target Hr: 46% of 175 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
 Grade: --- % Mats: 1 Ex Time: --- min:sec BLC: On Sweep: 25 mm/s
 Protocol: Bruce BP: 120/80 mmHg Curr Time: 00:17 Natch: Off Median Sweep: 25 mm/s

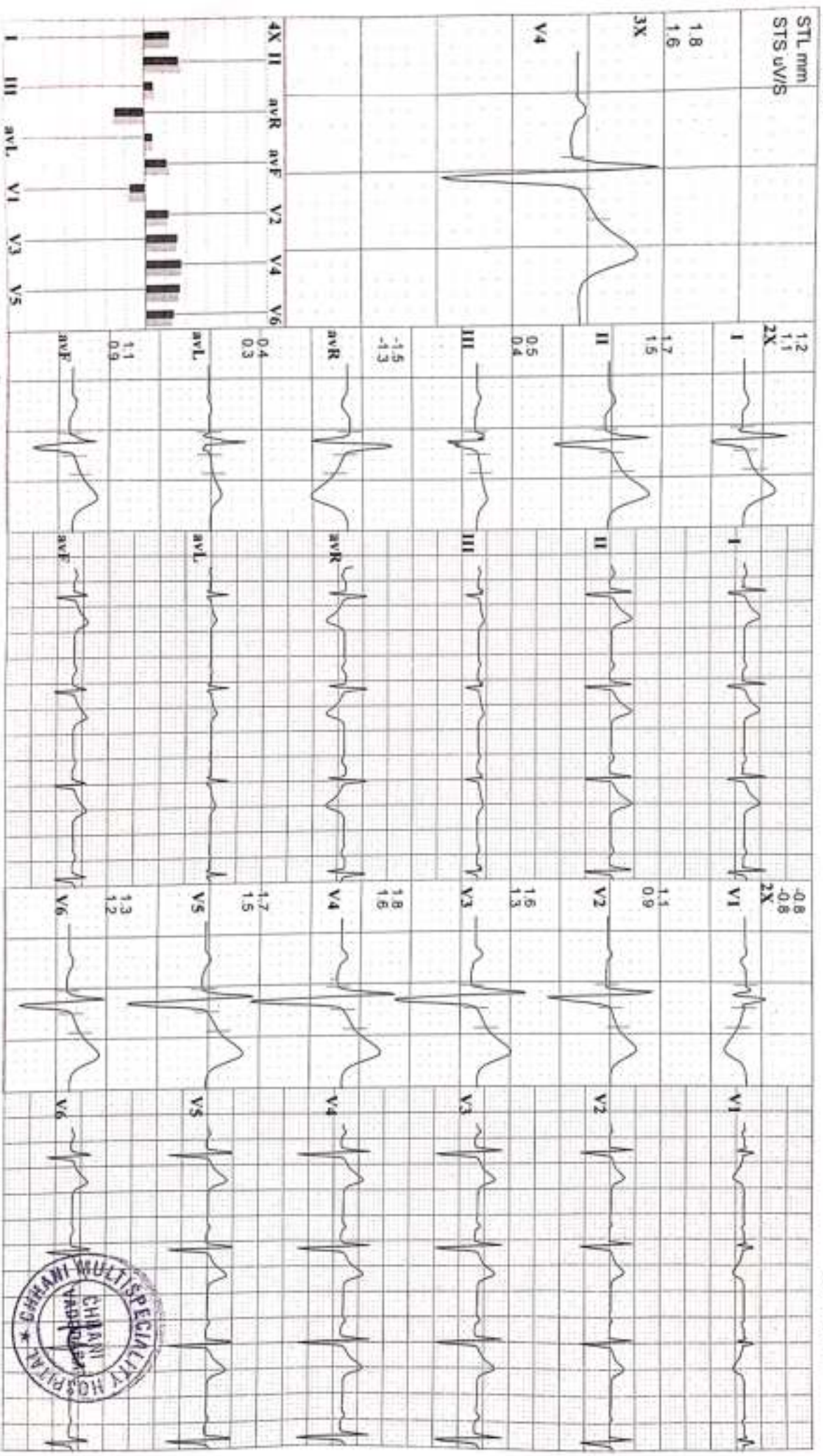
Linked Medians
Pre Ex
Supine



163 SANJAYKUMAR SINGH
45 Yrs/ M Kg/ Ht- cms Ref.No:
Date: 23-09-2023 Time: 09:23 AM
Post J.77 mS

Speed: --- mph Hr: 81 Target Hr: 46 % of 175 Filter: 0.1 - 100 Hz Gsr:
Grade: --- % Met: 1 Ex Time: --- min:sec BLC: On Sweep: 10 mm/mV
Protocol: Bruce BP: 120/80 mmHg Curr Time: 00:28 Notch Off Median Sweep: 25 mm/s

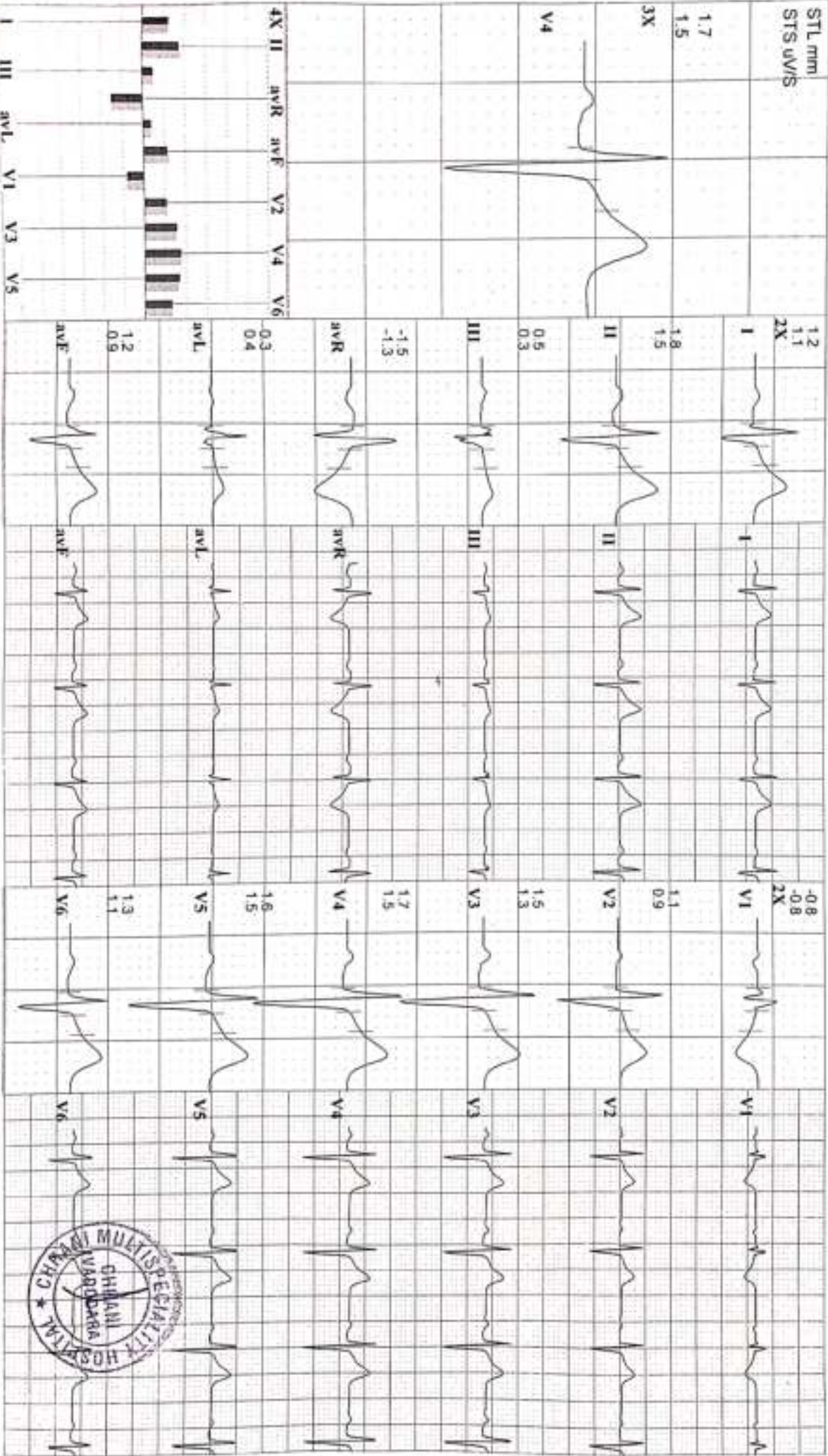
Linked Medians
Pre Ex
Standing



163 SANJAYKUMAR SINGH
 45 Yrs/M Kg / Ht- cms Ref.No.:
 Date: 23-09-2023 Time: 09:23 AM
 Post J: 77 mS

Speed: --- mph Hr: 81 Target Hr: 46 % of 175 Filter: 0.1 - 100 Hz Gain: 10 mm/mV
 Grade: --- % Met/s: 1 Ex Time: --- min:sec BLC: On Sweep: 25 mm/s
 Protocol: Bruce BP: 120/80 mmHg Cur Time: 00:39 Notch: Off Median Sweep: 25 mm/s

Linked Medians
 Pre Ex
 Hyp Vent



Pt. Name : Sanjay Kumar Singh

Registered On : 23 Sep, 2023 11:49 AM

Age/Gender : 45 Years Male

Collected On : 23 Sep, 2023 12:17 PM

Patient ID : 2046



Reported On : 23 Sep, 2023 04:20 PM

Ref. By : Dr. BOB

MO : 7014680253

Address :

CBC

Investigation	Observed Value	Biological Reference Interval	Unit
HEMOGLOBIN			
Hemoglobin (Hb)	11.2	13 - 17	g/dL
Total RBC Count	5.86	4.5 - 5.5	mill/cumm
BLOOD INDICES			
Packed Cell Volume (PCV)	35.2	40.7 - 50.3	%
Mean Corpuscular Volume(MCV)	60.07	78.2 - 97.90	fL
Mean Corpuscular Hemoglobin (MCH)	19.11	27 - 33	pg/cell
Mean Corpuscular Hemoglobin Concentration (MCHC)	31.82	33 - 36	g/dL
Red cell Distribution Width (RDW)	16.6	11.5 - 16	%
WBC COUNT			
Total WBC Count	6800	4000 - 11000	cumm
DIFFERENTIAL WBC COUNT			
Neutrophils	56	40 - 70	%
Lymphocytes	39	20 - 40	%
Eosinophils	02	1 - 6	%
Monocytes	03	2 - 6	%
Basophils	0		%
Erythrocyte Sedimentation Rate (ESR)	20	0 - 22	mm/hr
PLATELET COUNT			
Platelet Count	105000	150000 - 450000	/cumm

DR.ASHISH JAWARKAR
M.D.(Pathology)

We are open 24x7 & 365 days

Pt. Name : Sanjay Kumar Singh
Age/Gender : 45 Years Male
Patient ID : 2046
Ref. By : Dr. BOB
Address :

Registered On : 23 Sep, 2023 11:49 AM
Collected On : 23 Sep, 2023 12:17 PM
Reported On : 23 Sep, 2023 04:20 PM
MO : 7014680253



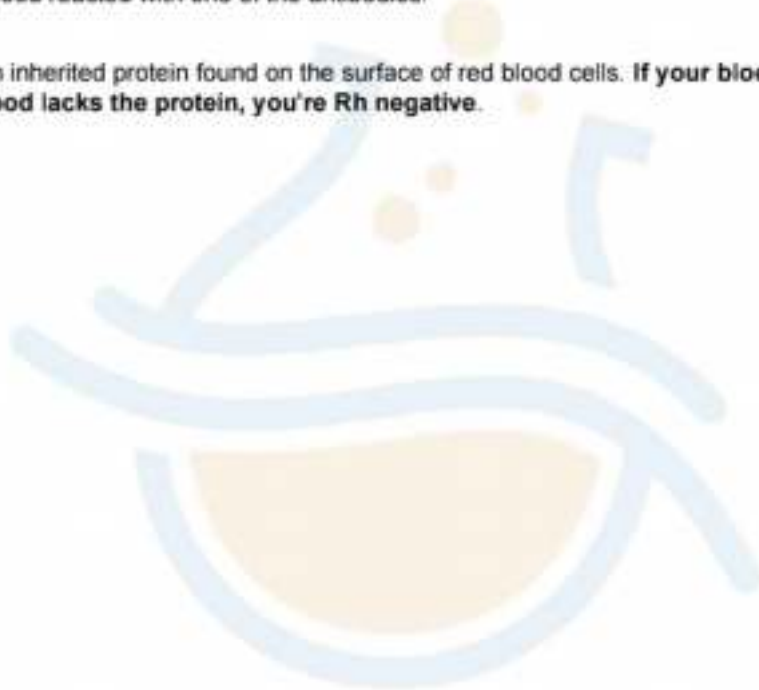
BLOOD GROUP

Blood Group, ABO & RH Typing

Investigation	Observed Value	Biological Reference Interval	Unit
BLOOD GROUP, ABO & RH TYPING			
ABO Group	"O"		
RH Factor	Negative		

The test to determine your blood group is called ABO typing. Your blood sample is mixed with antibodies against type A and B blood. Then, the sample is checked to see whether or not the blood cells stick together. If blood cells stick together, it means the blood reacted with one of the antibodies.

Rhesus (Rh) factor is an inherited protein found on the surface of red blood cells. **If your blood has the protein, you're Rh positive. If your blood lacks the protein, you're Rh negative.**



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Age/Gender : 45 Years Male
Patient ID : 2046
Ref. By : Dr. BOB
Address :

Registered On : 23 Sep, 2023 11:49 AM
Collected On : 23 Sep, 2023 12:17 PM
Reported On : 23 Sep, 2023 04:20 PM
MO : 7014680253



HBA1C

Investigation	Observed Value	Biological Reference Interval	Unit
HBA1c	4.9	For Screening: Diabetes: >6.5% Pre-Diabetes: 5.7% - 6.4% Non-Diabetes: < 5.7%	
Mean Blood Glucose	93.93	For Diabetic Patient: Poor Control : > 7.0 % Good Control : 6.0-7.0 %	mg/dL

Comment

- HbA1c is an indicator of glycemic control. HbA1c represents average Glycemia over the past six to eight weeks. Glycation of Hemoglobin occurs over the entire 120 day life span of the Red Blood Cell, but within this 120 days. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four.
- Mean Plasma Glucose mg/dL = $28.7 \times A1C - 46.7$. Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only this means that to predict or estimate average glucose from HbA1c or vice-versa is not "perfect" but gives a good working ballpark estimate.
- Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime Glucose levels, which are easier to predict and control. As per IFCC recommendations 2007, HbA1c being reported as above maintaining traceability to both IFCC (mmol/mol) & NGSP (%) units.



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Patient ID : 2046

Reported On : 23 Sep, 2023 04:20 PM

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MO : 7014680253

Address :



FASTING BLOOD SUGAR

FBS PP2BS

Investigation	Observed Value	Biological Reference Interval	Unit
FBS PP2BS			
Fbs	92	70 - 110	mg/dL



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Age/Gender : 45 Years Male

Collected On : 23 Sep, 2023 12:17 PM

Patient ID : 2046



Reported On : 23 Sep, 2023 04:20 PM

Ref. By : Dr. BOB

MO : 7014680253

Address :

LIPID PROFILE

Lipid Profile

Investigation	Observed Value	Biological Reference Interval	Unit
CHOLESTEROL			
Total Cholesterol	156	150 - 199	mg/dL
Serum Triglycerides	94	0 - 150	mg/dL
HDL Cholesterol	35	35 - 79	mg/dL
LDL Cholesterol	102.20	0 - 100	mg/dL
VLDL Cholesterol	18.80	0 - 30	mg/dL
Non-HDL cholesterol	121.00	- >130 Optimal	mg/dL
RATIO			
LDL HDL Cholesterol Ratio	2.92	1.5 - 3.5	
Total-HDL Cholesterol Ratio	4.46	3.5 - 5	
Triglycerides HDL Ratio	2.69		



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Patient ID : 2046



Reported On : 23 Sep, 2023 04:20 PM

Ref. By : Dr. BOB

MO : 7014680253

Address :

Investigation	Observed Value	Biological Reference Interval	Unit
Total Cholesterol (mg/dL)	HDL Cholesterol (mg/dL)	LDL Cholesterol (mg/dL)	Triglycerides (mg/dL)
Desirable <200 Borderline High 200-239 High >240	Low <40 High <60	Optimal <100 Near Optimal 100-129 Borderline High 130-159 High 160-189 Very High > 190	Normal <150 Borderline High 150-199 High 200-499 Very High >500



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Pt. Name : Sanjay Kumar Singh	Registered On : 23 Sep, 2023 11:49 AM
Age/Gender : 45 Years Male	Collected On : 23 Sep, 2023 12:17 PM
Patient ID : 2046	Reported On : 23 Sep, 2023 04:20 PM
Ref. By : Dr. BOB	MO : 7014680253
Address :	



LFT

Liver Function Test (LFT)

Investigation	Observed Value	Biological Reference Interval	Unit
BILLIRUBIN			
Total Bilirubin	1.1	0 - 1.2	mg/dL
Direct Bilirubin	0.24	0.0 - 0.25	mg/dL
Indirect Bilirubin	0.86	0.2 - 1	mg/dL
LIVER ENZYMES			
SGPT (ALT)	71	0 - 40	IU/L
SGOT (AST)	41	0 - 37	U/L
Alkaline Phosphatase	85	60 - 320	U/L
Gamma Glutamyl Transferase (GGT)	59	8 - 61	U/L
SERUM PROTEINS			
Total Serum Protein	6.9	6.3 - 7.9	g/dL
Serum Albumin	4.1	3.5 - 5.5	g/dL
Serum Globulin	2.80	2.5 - 3.5	g/dL
A/G Ratio	1.46	1.1 - 2.1	

Clinical Information:

Liver function tests, also known as liver chemistries, help determine the health of your liver by measuring the levels of proteins, liver enzymes, and bilirubin in your blood. Having abnormal results on any of these liver tests typically requires follow up to determine the cause of the abnormalities. Even mildly elevated results can be associated with liver disease. However, these enzymes can also be found in other places besides the liver.

Talk to your doctor about the results of your liver function test and what they may mean for you.

DR. ASHISH JAWARKAR
M.D. (Pathology)

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Pt. Name : Sanjay Kumar Singh
Age/Gender : 45 Years Male
Patient ID : 2046
Ref. By : Dr. BOB
Address :

Registered On : 23 Sep, 2023 11:49 AM
Collected On : 23 Sep, 2023 12:17 PM
Reported On : 23 Sep, 2023 04:20 PM
MO : 7014680253



Urine Examination Routine

Investigation	Observed Value	Biological Reference Interval	Unit
PHYSICAL EXAMINATION			
Colour	Pale Yellow	Pale yellow	
Appearance	Clear	whitish	
PH	5.0		
Specific Gravity	1.010		
Blood	Absent		
CHEMICAL EXAMINATION			
Proteins	Absent	Nil	
Glucose	Absent	Nil	
Ketones	Absent	Nil	
Bile Pigment	Negative		
Bile salt	Negative		
MICROSCOPIC EXAMINATION			
R.B.C.	Nil		
Pus Cells	3-5/hpf		
Epithelial Cells	1-2/ hpf Squamous		
Casts	Absent	0 - 0	/hpf
Crystals	Absent	Nil	
Amorphous Material	Absent		
Bacteria	Absent		



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Pt. Name : Sanjay Kumar Singh

Age/Gender : 45 Years Male

Patient ID : 2046

Ref. By : Dr. BOB

Address :

Registered On : 23 Sep, 2023 11:49 AM

Collected On : 23 Sep, 2023 12:17 PM

Reported On : 23 Sep, 2023 04:20 PM

MO : 7014680253



THYROID SERUM HORMONS

Thyroid Function Test (TFT)

Investigation	Observed Value	Biological Reference Interval	Unit
THYROID SERUM HORMONS			
Serum Triiodothyronine (T3)	1.21	0.6 - 1.81	ng/mL
Serum thyroxine (T4)	6.89	4.5 - 12.6	ug/dL
Thyroid Stimulating Hormone (TSH)	0.9103	0.55 - 4.78	mIU/L



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M.D. (Pathology)

We are open 24x7 & 365 days

Pt. Name : Sanjay Kumar Singh	Registered On : 23 Sep, 2023 11:49 AM
Age/Gender : 45 Years Male	Collected On : 23 Sep, 2023 12:17 PM
Patient ID : 2046	Reported On : 23 Sep, 2023 04:20 PM
Ref. By : Dr. BOB	MO : 7014680253
Address :	



Investigation	Observed Value	Biological Reference Interval	Unit
Erythrocyte Sedimentation Rate (ESR)	12	0 - 22	mm/hr

Interpretation

An erythrocyte sedimentation rate (ESR) is a type of blood test that measures how quickly erythrocytes (red blood cells) settle at the bottom of a test tube that contains a blood sample. Normally, red blood cells settle relatively slowly. A faster-than-normal rate may indicate inflammation in the body.

PSA (Prostate Specific Antigen)	0.7110	0 - 4	ng/mL
---------------------------------	--------	-------	-------

Sample Type: Serum

Useful For

1. Evaluating patients with documented prostate problems in whom multiple prostate-specific antigen tests may be necessary per year
2. Monitoring patients with a history of prostate cancer as an early indicator of recurrence and response to treatment.
3. Prostate cancer screening

Comments -

Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. Normally, very little

PSA is secreted in the blood. Increases in glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase

circulating PSA levels

-Digital rectal examination generally does not increase normal prostate-specific antigen (PSA) values. However, cystoscopy, urethral instrumentation, and prostate

biopsy may increase PSA levels

SERUM CREATININE

Serum Creatinine	0.75	0.6 - 1.30	mg/dL
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Note: 1) Diagnosing and monitoring treatment of acute and chronic renal disease.

2) adjusting dosage of renally excreted medications

3) Monitoring renal transplant recipients.

BUN

BUN	10.27	7.0 - 20.0	mg/dL
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DR. ASHISH JAWARKAR
M.D. (Pathology)

We are open 24x7 & 365 days

Pt. Name : Sanjay Kumar Singh
Age/Gender : 45 Years Male
Patient ID : 2046
Ref. By : Dr. BOB
Address :

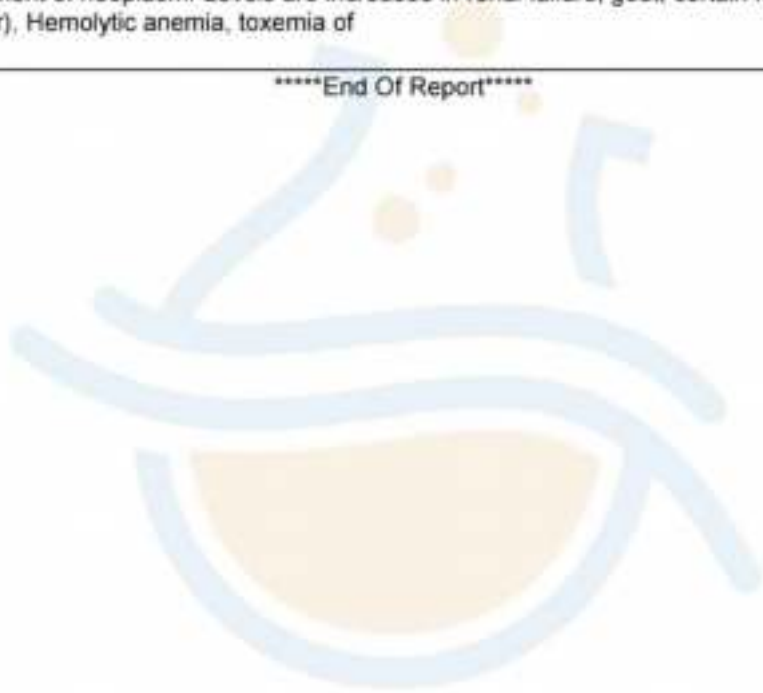
Registered On : 23 Sep, 2023 11:49 AM
Collected On : 23 Sep, 2023 12:17 PM
Reported On : 23 Sep, 2023 04:20 PM
MO : 7014680253



Investigation	Observed Value	Biological Reference Interval	Unit
UREA			
Serum Urea	22	15 - 40	mg/dL
URIC ACID			
Serum Uric Acid	5.03	3.5 - 7.2	mg/dL

Most uric acid is synthesized in the liver and mainly excreted by kidney. It is an end product of purine catabolism. Levels are labile and show day to day and seasonal variation in same person. Levels are also increased by emotional stress, total fasting and increased body weight. Mainly used for monitoring treatment of gout and chemotherapeutic treatment of neoplasm. Levels are increased in renal failure, gout, certain neoplastic condition (Increased cell turn over), Hemolytic anemia, toxemia of pregnancy.

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



DR. ASHISH JAWARKAR
M.D. (Pathology)

We are open 24x7 & 365 days

NAME: MR. SANJAYKUMAR SINGH

AGE:45/MALE

DATE: 23/09/2023

USG FOR ABDOMEN

LIVER:

The echogenicity of the liver is normal.
There is no focal liver lesion.
There are no dilated intrahepatic biliary radicles.

GALL BLADDER:

Appears to be distended and shows no calculus or polyp in the lumen.
Wall thickness is normal.

SPLEEN:

The echogenicity of the spleen is normal.
There is no focal splenic lesion.

PANCREAS:

The echogenicity appears to be normal.
There is no free fluid in the abdomen.
There are no enlarged retroperitoneal lymphnodes.

KIDNEY:

The kidneys are normal in position, size, shape and outline.
The parenchyma is normal. Right kidney measure 92*36 cm.
Left kidney measure 90*39 cm.

BLADDER:

Bladder is well distended and shows normal wall thickness. No evidence of intraluminal mass or calculi.

PROSTATE:

Prostate gland is normal in size. It has smooth outline reflectivity.

There is no evidence of ascites.
No evidence of any gross bowel mass seen.
No evidence of any aorto-caval or mesenteric root lymphadenopathy.
Appendix cannot be imaged.No mass or collection in right iliac fossa.

DR. PRANAV PATEL
M.D.PHYSICIAN
G01382
FELLOWSHIP IN MEDICAL EMERGENCY
Consultant Physician

