Name	: **Mr. PODDAR VIJAY KUMAR**		
PID No.	: MED120919728	**Register On**	: 21/03/2022 11:03 AM
SID No.	: 522212214	**Collection On**	: 21/03/2022 1:10 PM
Age / Sex	: 56 Year(s) / Male	**Report On**	: 22/03/2022 3:50 PM
Type	: OP	**Printed On**	: 31/03/2022 5:40 PM
Ref. Dr	: **MediWheel**		

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval
HAEMATOLOGY			
Complete Blood Count With - ESR			
Haemoglobin (EDTA Blood/*Spectrophotometry*)	14.0	g/dL	13.5 - 18.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood/*Derived from Impedance*)	42.2	%	42 - 52
RBC Count (EDTA Blood/*Impedance Variation*)	4.83	mill/cu.mm	4.7 - 6.0
Mean Corpuscular Volume(MCV) (EDTA Blood/*Derived from Impedance*)	87.0	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood/*Derived from Impedance*)	29.0	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood/*Derived from Impedance*)	33.2	g/dL	32 - 36
RDW-CV (*Derived from Impedance*)	14.8	%	11.5 - 16.0
RDW-SD (*Derived from Impedance*)	45.07	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood/*Impedance Variation*)	8600	cells/cu.mm	4000 - 11000
Neutrophils (Blood/*Impedance Variation & Flow Cytometry*)	55.6	%	40 - 75
Lymphocytes (Blood/*Impedance Variation & Flow Cytometry*)	30.1	%	20 - 45
Eosinophils (Blood/*Impedance Variation & Flow Cytometry*)	4.6	%	01 - 06

Dr.Arjun C.P
MBBS,MD Pathology
Reg No:KMC 89655

VERIFIED BY

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	: **Mr. PODDAR VIJAY KUMAR**		
PID No.	: MED120919728	**Register On**	: 21/03/2022 11:03 AM
SID No.	: 522212214	**Collection On**	: 21/03/2022 1:10 PM
Age / Sex	: 56 Year(s) / Male	**Report On**	: 22/03/2022 3:50 PM
Type	: OP	**Printed On**	: 31/03/2022 5:40 PM
Ref. Dr	: **MediWheel**		

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval
Monocytes (Blood/*Impedance Variation & Flow Cytometry)*	9.3	%	01 - 10
Basophils (Blood/*Impedance Variation & Flow Cytometry)*	0.4	%	00 - 02
Absolute Neutrophil count (EDTA Blood/*Impedance Variation & Flow Cytometry)*	4.78	10^3 / µl	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/*Impedance Variation & Flow Cytometry)*	2.59	10^3 / µl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/*Impedance Variation & Flow Cytometry)*	0.40	10^3 / µl	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/*Impedance Variation & Flow Cytometry)*	0.80	10^3 / µl	< 1.0
Absolute Basophil count (EDTA Blood/*Impedance Variation & Flow Cytometry)*	0.03	10^3 / µl	< 0.2
Platelet Count (EDTA Blood/*Impedance Variation)*	187	10^3 / µl	150 - 450
MPV (Blood/*Derived from Impedance)*	11.9	fL	7.9 - 13.7
PCT (*Automated Blood cell Counter)*	0.22	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citrated Blood/*Modified Westergren)*	**23**	mm/hr	< 20

Dr.Arjun C.P
MBBS,MD Pathology
Reg No:KMC 89655

VERIFIED BY

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	: **Mr. PODDAR VIJAY KUMAR**		
PID No.	: MED120919728	**Register On**	: 21/03/2022 11:03 AM
SID No.	: 522212214	**Collection On**	: 21/03/2022 1:10 PM
Age / Sex	: 56 Year(s) / Male	**Report On**	: 22/03/2022 3:50 PM
Type	: OP	**Printed On**	: 31/03/2022 5:40 PM
Ref. Dr	: **MediWheel**		

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval
BIOCHEMISTRY			
Liver Function Test			
Bilirubin(Total) (Serum/*Diazotized Sulfanilic Acid)*	0.8	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/*Diazotized Sulfanilic Acid)*	0.3	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/*Derived)*	0.5	mg/dL	0.1 - 1.0
Total Protein (Serum/*Biuret)*	7.3	gm/dL	6.0 - 8.0
Albumin (Serum/*Bromocresol green)*	4.36	gm/dL	3.5 - 5.2
Globulin (Serum/*Derived)*	2.9	gm/dL	2.3 - 3.6
A : G Ratio (Serum/*Derived)*	1.5		1.1 - 2.2
SGOT/AST (Aspartate Aminotransferase) (Serum/*IFCC Kinetic)*	28	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/*IFCC / Kinetic)*	13	U/L	5 - 41
Alkaline Phosphatase (SAP) (Serum/*IFCC Kinetic)*	85	U/L	56 - 119
GGT(Gamma Glutamyl Transpeptidase) (Serum/*SZASZ standarised IFCC)*	35.6	U/L	< 55

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	: **Mr. PODDAR VIJAY KUMAR**		
PID No.	: MED120919728	**Register On**	: 21/03/2022 11:03 AM
SID No.	: 522212214	**Collection On**	: 21/03/2022 1:10 PM
Age / Sex	: 56 Year(s) / Male	**Report On**	: 22/03/2022 3:50 PM
Type	: OP	**Printed On**	: 31/03/2022 5:40 PM
Ref. Dr	: **MediWheel**		

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval
Lipid Profile			
Cholesterol Total (Serum/*Cholesterol oxidase/Peroxidase)*	124	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/*Glycerol phosphate oxidase / peroxidase)*	130	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

INTERPRETATION: The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the "usual" circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/*Immunoinhibition)*	**45**	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/*Calculated)*	53	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/*Calculated)*	26	mg/dL	< 30
Non HDL Cholesterol (Serum/*Calculated)*	79.0	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	: **Mr. PODDAR VIJAY KUMAR**		
PID No.	: MED120919728	**Register On**	: 21/03/2022 11:03 AM
SID No.	: 522212214	**Collection On**	: 21/03/2022 1:10 PM
Age / Sex	: 56 Year(s) / Male	**Report On**	: 22/03/2022 3:50 PM
Type	: OP	**Printed On**	: 31/03/2022 5:40 PM
Ref. Dr	: **MediWheel**		

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval

INTERPRETATION: 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.
2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/*Calculated)*	2.8		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/*Calculated)*	2.9		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/*Calculated)*	1.2		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	: **Mr. PODDAR VIJAY KUMAR**		
PID No.	: MED120919728	**Register On**	: 21/03/2022 11:03 AM
SID No.	: 522212214	**Collection On**	: 21/03/2022 1:10 PM
Age / Sex	: 56 Year(s) / Male	**Report On**	: 22/03/2022 3:50 PM
Type	: OP	**Printed On**	: 31/03/2022 5:40 PM
Ref. Dr	: **MediWheel**		

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval
Glycosylated Haemoglobin (HbA1c)			
HbA1C (Whole Blood/*HPLC)*	**6.9**	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

Estimated Average Glucose (Whole Blood*)*	151.33	mg/dL	

INTERPRETATION: Comments

HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia,hyperbilirubinemia,Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.

Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly,Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Investigation	Observed Value	Unit	Biological Reference Interval

IMMUNOASSAY

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/*CMIA)*	1.52	ng/mL	0.4 - 1.81

INTERPRETATION:
Comment :
Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Thyroxine) - Total (Serum/*CMIA)*	9.41	µg/dL	4.2 - 12.0

INTERPRETATION:
Comment :
Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

TSH (Thyroid Stimulating Hormone) (Serum/*Chemiluminescent Microparticle Immunoassay(CMIA))*	0.726	µIU/mL	0.35 - 5.50

INTERPRETATION:
Reference range for cord blood - upto 20
1 st trimester: 0.1-2.5
2 nd trimester 0.2-3.0
3 rd trimester : 0.3-3.0
(Indian Thyroid Society Guidelines)
Comment :
1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.
2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.
3.Values&amplt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Investigation	Observed Value	Unit	Biological Reference Interval
CLINICAL PATHOLOGY			
PHYSICAL EXAMINATION			
Colour (Urine)	Pale Yellow		
Appearance (Urine)	Clear		Clear
Volume (Urine)	15	mL	
CHEMICAL EXAMINATION(Automated-Urineanalyser)			
pH (Urine/*AUTOMATED URINANALYSER)*	5.0		4.5 - 8.0
Specific Gravity (Urine)	1.025		1.002 - 1.035
Ketones (Urine)	Negative		Negative
Urobilinogen (Urine/*AUTOMATED URINANALYSER)*	0.2		0.2 - 1.0
Blood (Urine/*AUTOMATED URINANALYSER)*	Negative		Negative
Nitrite (Urine/*AUTOMATED URINANALYSER)*	Negative		Negative
Bilirubin (Urine/*AUTOMATED URINANALYSER)*	Negative		Negative
Protein (Urine)	Negative		Negative

Dr SURAJ JAIN
Consultant Pathologist
Reg No : 80423

VERIFIED BY

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	: **Mr. PODDAR VIJAY KUMAR**		
PID No.	: MED120919728	**Register On**	: 21/03/2022 11:03 AM
SID No.	: 522212214	**Collection On**	: 21/03/2022 1:10 PM
Age / Sex	: 56 Year(s) / Male	**Report On**	: 22/03/2022 3:50 PM
Type	: OP	**Printed On**	: 31/03/2022 5:40 PM
Ref. Dr	: **MediWheel**		

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval
Glucose (Urine)	Negative		Negative
Leukocytes (Urine)	Negative	leuco/uL	Negative
MICROSCOPY(URINE DEPOSITS)			
Pus Cells (Urine/*Flow cytometry*)	1-2	/hpf	3-5
Epithelial Cells (Urine)	0-2	/hpf	1-2
RBCs (Urine/*Flow cytometry*)	Nil	/hpf	2-3
Others (Urine)	Nil		Nil

Dr SURAJ JAIN
Consultant Pathologist
Reg No : 80423

VERIFIED BY

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	: **Mr. PODDAR VIJAY KUMAR**				
PID No.	: MED120919728	**Register On**	: 21/03/2022 11:03 AM		
SID No.	: 522212214	**Collection On**	: 21/03/2022 1:10 PM		
Age / Sex	: 56 Year(s) / Male	**Report On**	: 22/03/2022 3:50 PM		
Type	: OP	**Printed On**	: 31/03/2022 5:40 PM		
Ref. Dr	: **MediWheel**				

Investigation	Observed Value	Unit	Biological Reference Interval

IMMUNOHAEMATOLOGY

BLOOD GROUPING AND Rh TYPING	'O' 'Positive'		

(EDTA Blood/*Agglutination)*

INTERPRETATION: Note: Slide method is screening method. Kindly confirm with Tube method for transfusion.

Dr SURAJ JAIN
Consultant Pathologist
Reg No : 80423

VERIFIED BY

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	: **Mr. PODDAR VIJAY KUMAR**		
PID No.	: MED120919728	**Register On**	: 21/03/2022 11:03 AM
SID No.	: 522212214	**Collection On**	: 21/03/2022 1:10 PM
Age / Sex	: 56 Year(s) / Male	**Report On**	: 22/03/2022 3:50 PM
Type	: OP	**Printed On**	: 31/03/2022 5:40 PM
Ref. Dr	: **MediWheel**		

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval
BIOCHEMISTRY			
BUN / Creatinine Ratio	8		6 - 22
Glucose Fasting (FBS) (Plasma - F/*GOD - POD)*	99	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose Fasting - Urine (Urine - F*)*	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/*GOD - POD)*	**193**	mg/dL	70 - 140

INTERPRETATION:
Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti- diabetic medication during treatment for Diabetes.

Glucose Postprandial - Urine (Urine - PP*)*	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/*Urease-GLDH)*	15	mg/dL	7.0 - 21
Creatinine (Serum/*Jaffe Kinetic)*	1.1	mg/dL	0.9 - 1.3

INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin ,cefazolin, ACE inhibitors ,angiotensin II receptor antagonists,N-acetylcyteine , chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/*Uricase/Peroxidase)*	**7.8**	mg/dL	3.5 - 7.2

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

Name	: **Mr. PODDAR VIJAY KUMAR**		
PID No.	: MED120919728	**Register On**	: 21/03/2022 11:03 AM
SID No.	: 522212214	**Collection On**	: 21/03/2022 1:10 PM
Age / Sex	: 56 Year(s) / Male	**Report On**	: 22/03/2022 3:50 PM
Type	: OP	**Printed On**	: 31/03/2022 5:40 PM
Ref. Dr	: **MediWheel**		

MEDALL

Investigation	Observed Value	Unit	Biological Reference Interval
IMMUNOASSAY			
Prostate specific antigen - Total(PSA) (Serum/*Chemiluminescent Microparticle Immunoassay(CMIA))*	0.549	ng/mL	Normal: 0.0 - 4.0 Inflammatory & Non Malignant conditions of Prostate & genitourinary system: 4.01 - 10.0 Suspicious of Malignant disease of Prostate: > 10.0

DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902

APPROVED BY

-- End of Report --

Name	PODDAR VIJAY KUMAR	ID	MED120919728
Age & Gender	56/Male	Visit Date	21-03-2022 00:00:00
Ref Doctor Name	MediWheel		

ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in shape, size (12.7cm) and shows mild diffusely increased echopattern. No evidence of focal lesion or intrahepatic biliary ductal dilatation. Hepatic and portal vein radicals are normal.

GALL BLADDER is contracted. Grossly appears normal.
CBD is of normal calibre.

PANCREAS has normal shape, size and uniform echopattern. No evidence of ductal dilatation or calcification.

SPLEEN shows normal shape, size (9.1cm) and echopattern.

No demonstrable Para-aortic lymphadenopathy.

BOTH KIDNEYS : There is evidence of horse shoe kidney with fusion of lower poles across the midline and malrotation of the renal pelvis. There is no evidence of hydronephrosis or calculi.

The kidney measures as follows:

	Bipolar length (cm)	Parenchymal thickness (cm)
Right moiety	10.7	1.2
Left moiety	12.4	0.7

URINARY BLADDER shows normal shape and wall thickness. It has clear contents. No evidence of diverticula.

PROSTATE shows normal shape, size and echopattern. It measures 3.4 x 2.9 x 2.9cm volume: 16 cc.

No evidence of ascites.

IMPRESSION:

- **Grade I fatty infiltration of liver.**
- **Bilateral horse shoe kidneys.**

DR. H.K. ANAND DR. C.R RAMACHANDRA DR. LOHITH H.P DR. VARSHA KALE

CONSULTANT RADIOLOGISTS

Vk/sm

Name	PODDAR VIJAY KUMAR	ID	MED120919728
Age & Gender	56/Male	Visit Date	21-03-2022 00:00:00
Ref Doctor Name	MediWheel		

Name	PODDAR VIJAY KUMAR	ID	MED120919728
Age & Gender	56/Male	Visit Date	21-03-2022 00:00:00
Ref Doctor Name	MediWheel		

2D ECHOCARDIOGRAPHIC STUDY

M-mode measurement:

AORTA	:	2.79	cms.
LEFT ATRIUM	:	3.29	cms.
AVS	:	1.48	cms.
LEFT VENTRICLE			
(DIASTOLE)	:	4.59	cms.
(SYSTOLE)	:	2.97	cms.
VENTRICULAR SEPTUM	:		
(DIASTOLE)	:	1.13	cms.
(SYSTOLE)	:	1.26	cms.
POSTERIOR WALL	:		
(DIASTOLE)	:	1.26	cms.
(SYSTOLE)	:	1.49	cms.
EDV	:	96	ml.
ESV	:	34	ml.
FRACTIONAL SHORTENING	:	30	%
EJECTION FRACTION	:	60	%
EPSS	:	---	cms.
RVID	:	1.80	cms.

DOPPLER MEASUREMENTS:

MITRAL VALVE: E - 0.7 m/s A - 1.0 m/s MILD MR.

AORTIC VALVE: 1.2 m/s NO AR.

TRICUSPID VALVE: E - 0.4 m/s A - 0.5 m/s NO TR.

PULMONARY VALVE: 0.9 m/s NO PR.

Name	PODDAR VIJAY KUMAR	ID	MED120919728
Age & Gender	56/Male	Visit Date	21-03-2022 00:00:00
Ref Doctor Name	MediWheel		

MEDALL

2D ECHOCARDIOGRAPHY FINDINGS:

Left Ventricle : Apical hypertrophy(1.57cms), No obstruction, Normal systolic function.

: No regional wall motion abnormalities.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Mitral Valve : Normal. No mitral valve prolapsed.

Aortic Valve : Normal.Trileaflet.

Tricuspid Valve : Normal.

Pulmonary Valve : Normal.

IAS : Intact.

IVS : Intact.

Pericardium : No pericardial effusion.

IMPRESSION:

- **APICAL HYPERTROPHY, NO OBSTRUCTION.**
- **NORMAL LV SYSTOLIC FUNCTION. EF: 60 %.**
- **NO REGIONAL WALL MOTION ABNORMALITIES.**
- **GRADE I LV DIASTOLIC DYSFUNCTION.**
- **MILD MR.**
- **NORMAL VALVES.**
- **NO CLOTS / PERICARDIAL EFFUSION / VEGETATION.**

Name	PODDAR VIJAY KUMAR	ID	MED120919728
Age & Gender	56/Male	Visit Date	21-03-2022 00:00:00
Ref Doctor Name	MediWheel		

DR. YASHODA RAVI

CONSULTANT CARDIOLOGIST

Name	PODDAR VIJAY KUMAR	ID	MED120919728
Age & Gender	56/Male	Visit Date	21-03-2022 00:00:00
Ref Doctor Name	MediWheel		

X - RAY CHEST PA VIEW

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

IMPRESSION:

- **No significant abnormality detected.**

Name	PODDAR VIJAY KUMAR	ID	MED120919728
Age & Gender	56/Male	Visit Date	21-03-2022 00:00:00
Ref Doctor Name	MediWheel		

TEST COMPLETED