



LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,  
Mediwheel (Arcofemi Healthcare Limited)  
Helpline number: 011- 41195959

Dear Sir / Madam,

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. SINGH ADITYA KUMAR
EC NO.	93635
DESIGNATION	SMELF CREDIT
PLACE OF WORK	NOIDA,RO NOIDA
BIRTHDATE	01-07-1985
PROPOSED DATE OF HEALTH CHECKUP	25-06-2022
BOOKING REFERENCE NO.	22J93635100020666E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **21-06-2022** till **31-03-2023** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager**  
**HRM Department**  
**Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))

**SUGGESTIVE LIST OF MEDICAL TESTS**

<b>FOR MALE</b>	<b>FOR FEMALE</b>
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
<b>Lipid Profile</b>	<b>Lipid Profile</b>
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
<b>Liver Profile</b>	<b>Liver Profile</b>
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
<b>Kidney Profile</b>	<b>Kidney Profile</b>
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG Whole Abdomen
<b>General Tests</b>	<b>General Tests</b>
X Ray Chest	X Ray Chest
ECG	ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, TSH)
PSA Male (above 40 years)	Mammography (above 40 years) and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation
Dental Check-up consultation	Physician Consultation
Physician Consultation	Eye Check-up consultation
Eye Check-up consultation	Skin/ENT consultation
Skin/ENT consultation	Gynaec Consultation



भारत सरकार  
GOVERNMENT OF INDIA



आदित्य कुमार सिंह  
Aditya Kumar Singh  
जन्म तिथि / DOB: 01/07/1985  
पुरुष / MALE  
Mobile No.: 7379564646



8039 5074 8240

मेरा आधार, मेरी पहचान



आधार

भारतीय विशिष्ट पहचान प्राधिकरण  
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

Download Date: 10/09/2017

Address:  
S/O Prabhakar Singh, near  
metro city, c-8/7 paper mill  
colony, New Hyderabad S.O,  
Lucknow, Uttar Pradesh -  
226007

पता:  
S/O प्रभाकर सिंह, नियर मेट्रो सिटी, सी-8/7  
पेपर मिल कॉलोनी, न्यू हैदराबाद स.ओ,  
लखनऊ,  
उत्तर प्रदेश - 226007

Generation Date: 08/12/2011



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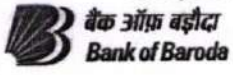
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www.uidai.gov.in

WWW

P.O. Box No.1947,  
Bengaluru-560 001



बैंक ऑफ़ बड़ोदा  
Bank of Baroda

नाम: Mr. Aditya Kumar Singh  
Name:

कर्मचारी कूट क्र. 93635  
E. C. No.



जारीकर्ता प्राधिकारी, मु. प्र. (सु.) अका. नदि.  
Issuing Authority CM.(S), ZO, ND



धारक के हस्ताक्षर  
Signature of Holder

aditiya kr singh

ID: 000175085

25-Jun-2022 14:52:00

Manipal Hospitals, Ghaziabad

36years

Vent. rate 92 bpm

Normal sinus rhythm

Male Caucasian

PR interval 142 ms

Normal ECG

QRS duration 98 ms

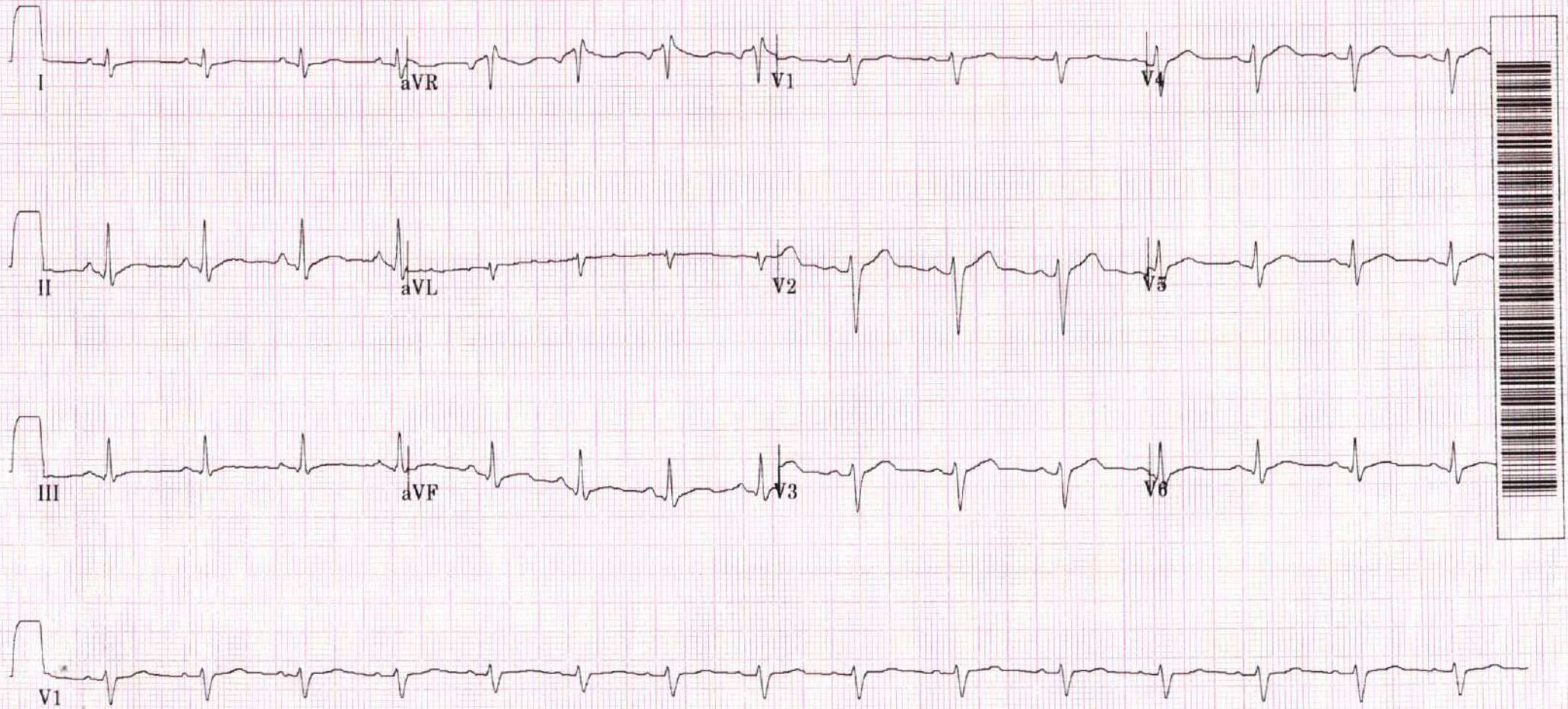
QT/QTc 354/437 ms

P-R-T axes 60 82 59

Technician:  
Test ind:

Referred by:

Unconfirmed





## TMT INVESTIGATION REPORT

Patient Name : Mr. ADITYA KUMAR SINGH	Location : Ghaziabad
Age/Sex : 37Year(s)/male	Visit No : V0000000001-GHZB
MRN No : GHZB-0000175085	Order Date : 25/6/2022
Ref. Doctor : HCP	Report Date : 25/6/2022

**Protocol** : Bruce **MPHR** : 184BPM  
**Duration of exercise** : 5min 05sec **85% of MPHR** : 156BPM  
**Reason for termination** : THR achieved **Peak HR Achieved** : 175BPM  
**Blood Pressure (mmHg)** : Baseline BP : 146/92mmHg **% Target HR** : 95%  
Peak BP : 160/96mmHg **METS** : 7.0METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	109	146/92	Nil	No ST changes seen	Nil
STAGE 1	3:00	157	152/92	Nil	No ST changes seen	Nil
STAGE 2	2:05	175	160/96	Nil	No ST changes seen	Nil
RECOVERY	3:02	125	150/92	Nil	No ST changes seen	Nil

**COMMENTS:**

- No ST changes in base line ECG.
- No ST changes during exercise & recovery.
- Normal chronotropic response.
- Normal blood pressure response.
- Fair effort tolerance.

**IMPRESSION:**

Treadmill test is **negative** for exercise induced reversible myocardial ischemia.

**Dr. Bhupendra Singh**  
MD, DM (CARDIOLOGY), FACC  
Sr. Consultant Cardiology

**Dr. Abhishek Singh**  
MD, DNB (CARDIOLOGY), MNAMS  
Sr. Consultant Cardiology

**Dr. Sudhanshu Mishra**  
MD  
Cardiology Registrar

## LABORATORY REPORT

Name	ADITYA KUMAR SINGH	Age	36y 11m 25d	Gender	MALE
MRN	GHZB-0000175085	Visit No	V0000000001-GHZB		
Lab No	G000320820	Collected On	25/06/2022 10:38AM	Received On	25/06/2022 10:40AM
Referred By	Vinay Bhat	Reported On	25/06/2022 2:58PM		

Test Name	Result	Criticality Factor	Biological Reference Interval	Test Method
GLUCOSE, FASTING (F) (Serum Fasting)	100 mg/dl		70 - 110 mg/dl	

\*\*\*\*\* END OF REPORT \*\*\*\*\*

Processed by :- SHAHID SAIFI

*Alka*  
MCT-39093  
**DR ALKA DIXIT VATS**  
CONSULTANT PATHOLOGIST  
PATHOLOGIST

Report Printed On: 27/6/2022 8:51AM

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## LABORATORY REPORT

Name	ADITYA KUMAR SINGH	Age	36y 11m 25d	Gender	MALE
MRN	GHZB-0000175085	Visit No	V0000000001-GHZB		
Lab No	G000320837	Collected On	25/06/2022 11:55AM	Received On	25/06/2022 11:56AM
Referred By	Vinay Bhat	Reported On	25/06/2022 3:02PM		

Test Name	Result	Criticality Factor	Biological Reference Interval
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### URINE EXAMINATION, ROUTINE (Urine)

#### PHYSICAL EXAMINATION

Colour	PALE YELLOW
Appearance	CLEAR
pH	6.0
Specific gravity	1.015

#### CHEMICAL EXAMINATION

Glucose	Nil
Protein	Absent
Ketone bodies	Absent
Urobilinogen	Absent

#### MICROSCOPIC EXAMINATION

Leukocytes	1-2 /HPF
Erythrocytes	NIL
Epithelial Cells	0-1 /HPF
Casts	NIL
Crystals	NIL
Others	NIL

..... END OF REPORT .....

Processed by :- KAPIL GAUR

*mct-39093*  
**DR ALKA DIXIT VATS**  
 CONSULTANT PATHOLOGIST  
 PATHOLOGIST

Report Printed On: 27/6/2022 8:52AM

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## LABORATORY REPORT

Name	ADITYA KUMAR SINGH	Age	36y 11m 25d	Gender	MALE
MRN	GHZB-0000175085	Visit No	V0000000001-GHZB		
Lab No	G000320821	Collected On	25/06/2022 10:39AM	Received On	25/06/2022 10:40AM
Referred By	Vinay Bhat	Reported On	25/06/2022 4:02PM		

Test Name	Result	Criticality Factor	Biological Reference Interval
<b>BLOOD GROUP (A, B, O) AND RH FACTOR WITH REVERSE GROUPING (Whole Blood)</b>			
BLOOD GROUPING	"B"		
RH TYPING	POSITIVE		
ESR (WESTERGREN),AUTOMATED ERYTHROCYTE SEDIMENTATION RATE	05 mm/1st hour		0 - 15 mm/Hr

\*\*\*\*\* END OF REPORT \*\*\*\*\*

Processed by :- KAPIL GAUR

*mcg-39093*  
**DR ALKA DIXIT VATS**  
 CONSULTANT PATHOLOGIST  
 PATHOLOGIST

Report Printed On: 27/6/2022 8:52AM

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## LABORATORY REPORT

Name	ADITYA KUMAR SINGH	Age	36y 11m 25d	Gender	MALE
MRN	GHZB-0000175085	Visit No	V0000000001-GHZB		
Lab No	G000320821	Collected On	25/06/2022 10:39AM	Received On	25/06/2022 10:40AM
Referred By	Vinay Bhat	Reported On	25/06/2022 11:27AM		

Test Name	Result	Criticality Factor	Biological Reference Interval
HEMOGLOBIN, HB	<b>17.5 g/dl</b>		12 - 16 gm/ dl
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION, MCHC	<b>39.5 g/dl</b>		33 - 36%
MEAN CORPUSCULAR HAEMOGLOBIN, MCH	33.1 pg		26 -34 pg
MEAN CORPUSCULAR VOLUME, MCV	83.7 fl		77 - 97 fl
PLATELET COUNT	225 x10 <sup>3</sup> cells/ Cumm		150x10 <sup>3</sup> - 400x10 <sup>3</sup> cells/cumm
RED BLOOD CELLS, RBC COUNT	5.29 million/cu mm		3.8 - 5.3 millions /cumm
RED CELL DISTRIBUTION WIDTH, RDW	13.9 %		11.5 - 14.5 %
LEUCOCYTE COUNT, TOTAL (TLC), AUTOMATED	<b>12.26 x10<sup>3</sup> cells/ Cumm</b>		4x10 <sup>3</sup> - 11x10 <sup>3</sup> cells/cumm
HEMATOCRIT (HCT)	44.3 %		34 -45%
BASOPHILS	00 %		0 - 2%
EOSINOPHILS	03 %		2 -7 %
LYMPHOCYTES	33 %		17 - 45 %
MONOCYTES	05 %		4 -13%
NEUTROPHILS	59 %		40 - 80%

\*\*\*\*\* END OF REPORT \*\*\*\*\*

Processed by :- SHAHID SAIFI

*Charu*  
Registration No: 42422  
**DR CHARU AGARWAL**  
CONSULTANT PATHOLOGIST  
Pathologist

Report Printed On: 27/6/2022 8:52AM

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## LABORATORY REPORT

Name	ADITYA KUMAR SINGH	Age	36y 11m 25d	Gender	MALE
MRN	GHZB-0000175085	Visit No	V0000000001-GHZB		
Lab No	G000320821	Collected On	25/06/2022 10:39AM	Received On	25/06/2022 10:40AM
Referred By	Vinay Bhat	Reported On	25/06/2022 11:52AM		

Test Name	Result	Criticality Factor	Biological Reference Interval	Test Method
<b>KIDNEY FUNCTION TESTS (Serum)</b>				
UREA	17.7 mg/dl		15 - 40 mg/dl	
CREATININE, SERUM	1.00 mg/dl		0.7 - 1.2 mg/dl	
URIC ACID	7.0 mg/dl		4 - 8.5 mg/dl	
SODIUM, SERUM	137.5 mmol/L		136 - 144 mmol/ L	
POTASSIUM, SERUM	4.63 mmol/L		3.6 - 5.1 mmol/L	
CHLORIDE, SERUM	103.6 mmol/L		101 - 111 mmol/L	
<b>LIPID PROFILE (Serum)</b>				
CHOLESTEROL, TOTAL	186 mg/dl		Upto 200 mg/dl	
TRIGLYCERIDES, SERUM	143 mg/dl		Upto 150 mg/dl	
CHOLESTEROL, HDL, DIRECT	38 mg/dl		35 - 65 mg/dl	
CHOLESTEROL, LDL, DIRECT	119 mg/dl		0 -120 mg/dl	
Cholesterol, VLDL	29 mg/dl		0 - 35 mg/dl	
<b>LIVER FUNCTION TESTS (Serum)</b>				
BILIRUBIN, TOTAL	<b>1.67 mg/dl</b>		0.3 -1.2 mg/dl	
BILIRUBIN, DIRECT	<b>0.39 mg/dl</b>		0 - 0.3 mg/dl	
Report Printed On:	27/6/2022	8:52AM		

## LABORATORY REPORT

Name	ADITYA KUMAR SINGH	Age	36y 11m 25d	Gender	MALE
MRN	GHZB-0000175085	Visit No	V0000000001-GHZB		
Lab No	G000320821	Collected On	25/06/2022 10:39AM	Received On	25/06/2022 10:40AM
Referred By	Vinay Bhat	Reported On	25/06/2022 11:52AM		

Test Name	Result	Criticality Factor	Biological Reference Interval	Test Method
Indirect Bilirubin	<b>1.28</b>		0.1 - 0.3 mg/dl	
TOTAL PROTEIN, SERUM	7.2 g/dl		6.6 - 8.7 g/dl	
ALBUMIN, SERUM	4.93 g/dl		3.5 - 5.2 gm/dl	
A/G RATIO (ALBUMIN / GLOBULIN RATIO)	2.17		1:1 - 2.5:1	
GLOBULIN, SERUM	2.3			
SGPT	<b>195 IU/L</b>		17 - 63 IU/L	
SGOT	<b>90 IU/L</b>		0 - 40 IU/L	
GGTP, GGT, GAMMA GT, GAMMA GLUTAMYL TRANSPEPTIDASE	<b>103 IU/L</b>		7 - 50 U/L	
ALKALINE PHOSPHATASE, ALP	56 IU/L		32 - 91 IU/L	

\*\*\*\*\* END OF REPORT \*\*\*\*\*

Processed by :- SHAHID SAIFI

*Charu*  
Registration No: 48422  
**DR CHARU AGARWAL**  
CONSULTANT PATHOLOGIST  
Pathologist

Report Printed On: 27/6/2022 8:52AM

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## LABORATORY REPORT

Name	ADITYA KUMAR SINGH	Age	36y 11m 25d	Gender	MALE
MRN	GHZB-0000175085	Visit No	V0000000001-GHZB		
Lab No	G000320871	Collected On	25/06/2022 2:32PM	Received On	25/06/2022 2:37PM
Referred By	Vinay Bhat	Reported On	25/06/2022 6:00PM		

Test Name	Result	Criticality Factor	Biological Reference Interval	Test Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS (Serum Post Prandial)	128 mg/dl		80 -140 mg/dl	

\*\*\*\*\* END OF REPORT \*\*\*\*\*

Processed by :- KAPIL GAUR

*Alka*  
MCT-39093  
**DR ALKA DIXIT VATS**  
CONSULTANT PATHOLOGIST  
PATHOLOGIST

# Human Care Medical Charitable Trust



Registered Office : Sector-6,Dwarka, New Delhi- 110075

HCMCT

## Manipal Hospitals

LIFE'S ON



Name : MR ADITYA KUMAR SINGH Age : 36 Yr(s) Sex : Male  
Registration No : RH1422783 RefHosp No. : ghzb-0000175085 Lab No : 32220609004  
Patient Episode : R03000039329 Collection Date : 25 Jun 2022 20:23  
Referred By : MANIPAL HOSPITALS GHAZIABAD Reporting Date : 26 Jun 2022 09:20  
Receiving Date : 25 Jun 2022 22:20

### BIOCHEMISTRY

THYROID PROFILE, Serum

			Adult > 20 yrs
T3 - Triiodothyronine (ECLIA)	1.27	ng/ml	[0.70-2.04]
T4 - Thyroxine (ECLIA)	8.00	mcg/dl	[4.60-12.00]
Thyroid Stimulating Hormone (ECLIA)	5.280 #	µIU/mL	[0.340-4.250]

Note : TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m.and at a minimum between 6-10 pm.Factors such as change of seasons hormonal fluctuations,Ca or Fe supplements,high fibre diet, stress and illness affect TSH results.

\* References ranges recommended by the American Thyroid Association

1) Thyroid. 2011 Oct;21(10):1081-125.PMID .21787128

2) <http://www.thyroid-info.com/articles/tsh-fluctuating.html>

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-----END OF REPORT-----

Dr. Lona Mohapatra  
CONSULTANT PATHOLOGY

Human Care Medical Charitable Trust

Adjoining MTNL Building, Main Road, Sector 6, Dwarka, New Delhi - 110075.

Phone: +91 11 4967 4967 | [www.manipalhospitals.com](http://www.manipalhospitals.com) | [www.hcmct.in](http://www.hcmct.in)  
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IND18.6278/05/12/2018- 04/12/2019

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Managed by Manipal Hospitals Dwarka Pvt. Ltd.

ADITYA KUMAR SINGH-G000320821

Reference: Dr.VINAY BHATT

VID: 220108000006974

PID NO: P1082200010925  
Age: 37.0 Year(s) Sex: Male



Sample Collected At:  
Manipal Hospital  
NH-24, HAPUR ROAD, OPP. BAHMETA,  
GHAZIABAD 201002  
201002

Registered On:  
25/06/2022 12:21 PM  
Collected On:  
25/06/2022 12:21PM  
Reported On:  
25/06/2022 02:32 PM



**HbA1c Glycated Haemoglobin**

(EDTA Whole Blood)

Investigation	Observed Value	Unit	Biological Reference Interval
HbA1C- Glycated Haemoglobin (HPLC)	4.5	%	Non-diabetic: <= 5.6 Pre-diabetic: 5.7-6.4 Diabetic: >= 6.5
Estimated Average Glucose (eAG) \$	82.45	mg/dL	

**Interpretation & Remark:**

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).
  - HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
  - Trends in HbA1c are a better indicator of diabetic control than a solitary test.
  - Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
  - To estimate the eAG from the HbA1C value, the following equation is used:  $eAG(mg/dl) = 28.7 \cdot A1c - 46.7$
  - Interference of Haemoglobinopathies in HbA1c estimation.
    - For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
    - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status
    - Heterozygous state detected (D10/ turbo is corrected for HbS and HbC trait).
  - In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent Control - 6 to 7 %, Fair to Good Control - 7 to 8 %, Unsatisfactory Control - 8 to 10 % and Poor Control - More than 10 % .
- Note : Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.

-- End of Report --

  
Dr. Mohit Jain  
MD Pathology





## RADIOLOGY REPORT

Name	ADITYA KUMAR SINGH	Modality	US
Patient ID	GHZB-0000175085	Accession No	1110521
Gender / Age	M / 36Y 11M 24D	Scan Date	25-06-2022 11:42:00
Ref. Phys	Dr. Vinay Bhat	Report Date	25-06-2022 12:09:57

### USG ABDOMEN & PELVIS

#### FINDINGS

LIVER: appears enlarged in size (measures 179 mm) but normal in shape and shows diffuse increase in liver echotexture, in keeping with diffuse grade II fatty infiltration. Rest normal.

SPLEEN: appears enlarged in size (measures 128 mm) but normal in shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 10.9 mm.

COMMON BILE DUCT: Appears normal in size and measures 5.1 mm.

IVC, HEPATIC VEINS: Normal.

BILIARY SYSTEM: Normal.

GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.

Right Kidney: measures 96 x 36 mm.

Left Kidney: measures 103 x 42 mm.

PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged.

FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PROSTATE: Prostate is normal in size, shape and echotexture. It measures 31 x 28 x 27 mm with volume 13 cc. Rest normal.

SEMINAL VESICLES: Normal.

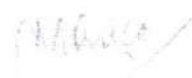
BOWEL: Visualized bowel loops appear normal.

#### IMPRESSION

-Hepatomegaly with diffuse grade II fatty infiltration in liver.

-Splenomegaly.

Recommend clinical correlation.



Dr. Monica Shekhawat, MBBS, DNB,  
Consultant Radiologist, Reg No MCI 11 10887

This document is digitally signed and hence no manual signature is required

MANIPAL HOSPITALS  
Tel: 022-27090000, Near Landalt, Ghatkoti, Ghazabad - 201002

www.manipalhospitals.com

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This report is subject to the terms and conditions mentioned overleaf

## RADIOLOGY REPORT

Name	ADITYA KUMAR SINGH	Modality	US
Patient ID	GHZB-0000175085	Accession No	1110521
Gender/Age	M / 36Y 11M 24D	Scan Date	25-06-2022 11:42:00
Ref. Phys	Dr. Vinay Bhat	Report Date	25-06-2022 12:09:57

## RADIOLOGY REPORT

<b>Name</b>	ADITYA KUMAR SINGH	<b>Modality</b>	DX
<b>Patient ID</b>	GHZB-0000175085	<b>Accession No</b>	1110522
<b>Gender/Age</b>	M / 36Y 11M 24D	<b>Scan Date</b>	25-06-2022 10:57:45
<b>Ref. Phys</b>	Dr. Vinay Bhat	<b>Report Date</b>	25-06-2022 16:02:10

### XR- CHEST PA VIEW

#### FINDINGS:

LUNGS: Normal.  
 TRACHEA: Normal.  
 CARINA: Normal.  
 RIGHT AND LEFT MAIN BRONCHI: Normal.  
 PLEURA: Normal.  
 HEART: Normal.  
 RIGHT HEART BORDER: Normal.  
 LEFT HEART BORDER: Normal.  
 PULMONARY BAY: Normal.  
 PULMONARY HILA: Normal.  
 AORTA: Normal.  
 THORACIC SPINE: Normal.  
 OTHER VISUALIZED BONES: Normal.  
 VISUALIZED SOFT TISSUES: Normal.  
 DIAPHRAGM: Normal.  
 VISUALIZED ABDOMEN: Normal.  
 VISUALIZED NECK: Normal.

#### IMPRESSION

**No significant abnormality noted.**  
 Recommend clinical correlation.

Dr. Monica Shekhawat, MBBS, DNB,  
 Consultant Radiologist, Reg No MCI 11 10887