

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 | MS. SHARMA MANU |
| EC NO. | 178164 |
| DESIGNATION | CREDIT |
| PLACE OF WORK | MANDI GOBINGARH, M S M E BRANCH |
| BIRTHDATE | 02-03-1989 |
| PROPOSED DATE OF HEALTH CHECKUP | 23-03-2023 |
| BOOKING REFERENCE NO. | 22M178164100050428E |

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 **19-03-2023** 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

| FOR MALE | FOR FEMALE |
|-------------------------------------|---|
| 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 |
| Lipid Profile | Lipid Profile |
| Total Cholesterol | Total Cholesterol |
| HDL | HDL |
| LDL | LDL |
| VLDL | VLDL |
| Triglycerides | Triglycerides |
| HDL / LDL ratio | HDL / LDL ratio |
| Liver Profile | Liver Profile |
| AST | AST |
| ALT | ALT |
| GGT | GGT |
| Bilirubin (total, direct, indirect) | Bilirubin (total, direct, indirect) |
| ALP | ALP |
| Proteins (T, Albumin, Globulin) | Proteins (T, Albumin, Globulin) |
| Kidney Profile | Kidney Profile |
| 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 |
| General Tests | General Tests |
| 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



मनु शर्मा
Manu Sharma
जन्म तिथि/DOB: 02/03/1989
महिला / FEMALE



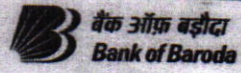
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भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:
D/O: सुरिंदर कुमार, #
3206, सेक्टर 22 डी,
चंडीगढ़, चंडीगढ़,
चंडीगढ़ - 160022

Address:
D/O: Surinder Kumar, # 3206, Sector
22 D, Chandigarh, Chandigarh,
Chandigarh - 160022

8459 8291 7859



बैंक ऑफ़ बड़ोदा
Bank of Baroda



नाम: MANU SHARMA
Name:

कर्मचारी कूट क्र. 178104
E. C. No.



जारीकर्ता प्राधिकारी उ.क्ष.प्र. (स.म.प्र.) क्षेत्र. चंडीगढ़
Issuing Authority DRM (AGM) Chd Region

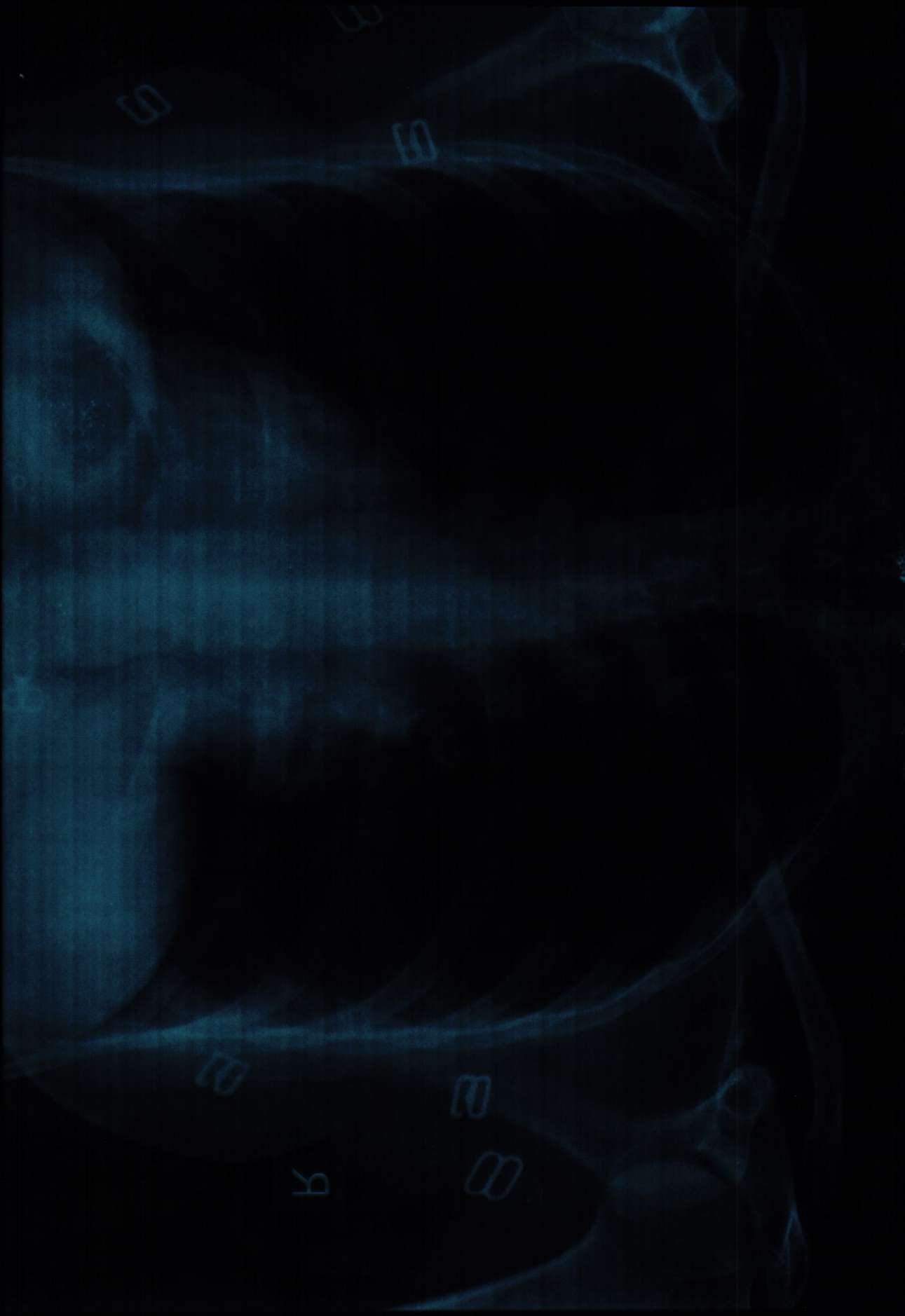
धारक के हस्ताक्षर
Signature of Holder

IV HOSPIYAG SEC TY MONAGI

Сугеэ бая ID348431
МАНИ ШАРВАМ Есэмтэ 3т үеэр(2)

090-882101X

5210315053 10 12 15





| | | | |
|-------------|--------------------|------------------|-----------------------|
| NAME | : MRS. MANU SHARMA | Requisition Date | : 25/Mar/2023 09:42AM |
| DOB/Gender | : 02-Mar-1989/F | SampleCollDate | : 25/Mar/2023 09:47AM |
| UHID | : 348437 | Sample Rec.Date | : 25/Mar/2023 12:15PM |
| Inv. No. | : 3253809 | Approved Date | : 25/Mar/2023 01:49PM |
| Panel Name | : Ivy Mohali | Referred Doctor | : Self |
| Bar Code No | : 12724745 | | |

| Test Description | Observed Value | Unit | Reference Range |
|------------------|----------------|------|-----------------|
|------------------|----------------|------|-----------------|

IMMUNOASSAY

TOTAL THYROID PROFILE

| | | | |
|--|------|-------|--------------|
| Serum Total T3 <small>(CLIA/Vitros 3600)</small> | 1.25 | ng/mL | 0.970 – 1.69 |
|--|------|-------|--------------|

Summary & Interpretation:

Triiodothyronine (T3) is the hormone principally responsible for the development of the effects of the thyroid hormones on the various target organs. T3 is mainly formed extrathyroidally, particularly in the liver, by deiodination of T4. A reduction in the conversion of T4 to T3 results in a fall in the T3 concentration. It occurs under the influence of medicaments such as propranolol, glucocorticoids or amiodarone and in severe non-thyroidal illness (NTI). The determination of T3 is utilized in the diagnosis of T3-hyperthyroidism, the detection of early stages of hyperthyroidism and for indicating a diagnosis of thyrotoxicosis factitia.

| | | | |
|--|------|-------|-------------|
| Serum Total T4 <small>(CLIA/Vitros 3600)</small> | 9.88 | µg/dL | 5.53 – 11.0 |
|--|------|-------|-------------|

Summary & Interpretation:

The hormone thyroxine (T4) is the main product secreted by the thyroid gland. The major part of total thyroxine (T4) in serum is present in protein-bound form. As the concentration of the transport proteins in serum are subject to exogenous and endogenous effects, the status of the binding proteins must also be taken in to account in the assessment of the thyroid hormone concentration in serum. The determination of T4 can be utilized for the following indications: the detection of hyperthyroidism, the detection of primary and secondary hypothyroidism and the monitoring of TSH-suppression therapy.

| | | | |
|---|-------|-------|----------------|
| Serum TSH <small>(CLIA/Vitros 3600)</small> | 2.800 | mIU/L | 0.4001 – 4.049 |
|---|-------|-------|----------------|

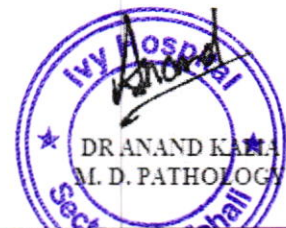
Summary & Interpretation

TSH is formed in specific basophil cells of the anterior pituitary and is subject to a circadian secretion sequence. The determination of TSH serves as the initial test in thyroid diagnostics. Accordingly, TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid.

Note:

1. TSH levels are subject to circadian variation, reaching peak levels between 2 - 4 a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%. Hence time of the day has influence on the measured serum TSH concentrations.
2. Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
3. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.
4. Clinical Use: Primary Hypothyroidism, Hyperthyroidism, Hypothalamic – Pituitary hypothyroidism, Inappropriate TSH secretion, Nonthyroidal illness, Autoimmune thyroid disease, Pregnancy associated thyroid disorders.

| PREGNANCY | REFERENCE RANGE FOR TSH IN uIU/mL |
|---------------|-----------------------------------|
| 1st Trimester | 0.05 – 3.70 |
| 2nd Trimester | 0.31 – 4.35 |
| 3rd Trimester | 0.41 – 5.18 |



Result Entered By: Geetika 40845



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DOB/Gender : 02-Mar-1989/F

Requisition Date : 25/Mar/2023 09:42AM

UHID : 348437

SampleCollDate : 25/Mar/2023 09:47AM

Inv. No. : 3253809

Sample Rec.Date : 25/Mar/2023 12:15PM

Panel Name : Ivy Mohali

Approved Date : 25/Mar/2023 01:49PM

Bar Code No : 12724745

Referred Doctor : Self

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HAEMATOLOGY

Glycosylated HB (HbA1c)

| | | | |
|---|-----|---|--|
| Whole Blood HbA1c (Boronate Affinity HPLC/Trinity) | 5.2 | % | Non diabetic:4.0-6.0 Target of therapy:<7.0 Change of therapy:>8.0 |
|---|-----|---|--|

| | | | |
|---|-----|-------|--|
| Estimated Average Glucose (eAG) (Calculated) | 103 | mg/dL | |
|---|-----|-------|--|

ADA criteria for correlation between HbA1c & Mean plasma glucose levels:
(Last three month's average).

| HbA1c (%) | Mean Plasma Glucose (mg / dl) |
|-----------|-------------------------------|
| 6 | 126 |
| 7 | 154 |
| 8 | 183 |
| 9 | 212 |
| 10 | 240 |
| 11 | 269 |
| 12 | 298 |



Result Entered By:Geetika 40845



NAME : MRS. MANU SHARMA

DOB/Gender : 02-Mar-1989/F

UHID : 348437

Inv. No. : 3253809

Panel Name : Ivy Mohali

Bar Code No : 12724745

Requisition Date : 25/Mar/2023 09:42AM

SampleCollDate : 25/Mar/2023 10:30AM

Sample Rec.Date : 25/Mar/2023 10:30AM

Approved Date : 25/Mar/2023 11:22AM

Referred Doctor : Self

| Test Description | Observed Value | Unit | Reference Range |
|------------------|----------------|------|-----------------|
|------------------|----------------|------|-----------------|

HAEMATOLOGY

BLOOD GROUP RH TYPE

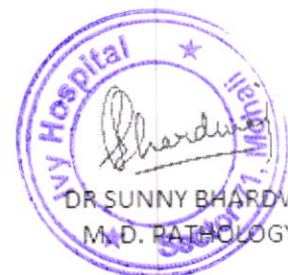
ABO & RH Typing

Forward Grouping

| | |
|--------------------------|--------------------|
| Anti A | POSITIVE |
| Anti B | POSITIVE |
| Anti AB | POSITIVE |
| Anti D | POSITIVE |
| Reverse Grouping A Cells | Negative |
| Reverse Grouping B Cells | Negative |
| Reverse Grouping O Cells | Negative |
| Final Blood Group | AB POSITIVE |

NOTE :

- * Apart from major A,B,H antigens which are used for ABO grouping and Rh typing, many minor blood group antigens exist. Agglutination may also vary according to titre of antigen and antibody.
- * So before transfusion, reconfirmation of blood group as well as cross-matching is needed.
- * Presence of maternal antibodies in newborns, may interfere with blood grouping.
- * Auto agglutination (due to cold antibody, falciparum malaria, sepsis, internal malignancy etc.) may also cause erroneous result.



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BIOCHEMISTRY

GLUCOSE FASTING

Primary Sample Type: Fluoride Plasma

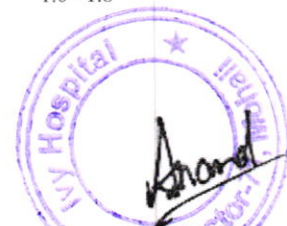
| | | | |
|---|----|-------|---|
| Plasma Glucose Fasting (Hexokinase/ AU480) | 97 | mg/dL | < 106 Normal 107 - 125 Impaired Tolerance >126 Diabetic |
|---|----|-------|---|

RFT (RENAL FUNCTION TESTS)

| | | | |
|--|-------|-------|-----------|
| Serum Urea (Urease GLDH/AU480) | 22.00 | mg/dl | 17-43 |
| Serum Creatinine (JAFEE KINETIC/ AU480) | 0.60 | mg/dl | 0.51-0.95 |
| Serum Uric acid (Uricase/AU480) | 3.10 | mg/dl | 2.6- 6.0 |

LIVER FUNCTION TEST WITH GGT

| | | | |
|--|------|-------|-------------|
| Serum Bilirubin Total (DPD/AU 480) | 1.40 | mg/dL | 0.3-1.2 |
| Serum Bilirubin Direct (DPD/AU 480) | 0.30 | mg/dl | <0.3 |
| Serum Bilirubin Indirect (Calculated) | 1.10 | mg/dl | 0.1-1.0 |
| Serum SGOT(AST) (FCC Without P5P AU 480) | 18 | U/L | <35 |
| Serum SGPT(ALT) (FCC Without P5P AU 480) | 9 | U/L | <50 |
| Serum AST/ALT Ratio (Calculated) | 2.00 | | |
| Serum GGT (FCC/AU 480) | 12 | IU/L | 5-32 |
| Serum Alkaline Phosphatase (FCC PNPAMPK kinetic/AU 480) | 66 | U/L | 30-120 |
| Serum Protein Total (Biuret) | 7.8 | gm/dl | 6.40 - 8.20 |
| Serum Albumin (SCG/AU 480) | 4.5 | g/dL | 3.5-5.2 |
| Serum Globulin (Calculated) | 3.30 | gm/dl | 2.0-3.5 |
| Serum Albumin/Globulin Ratio (Calculated) | 1.36 | % | 1.0 - 1.8 |



DR ANAND KALIA
M. D. PATHOLOGY

The highlighted values should be correlated clinically

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DOB/Gender : 02-Mar-1989/F
UHID : 348437
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Panel Name : Ivy Mohali
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Approved Date : 25/Mar/2023 11:49AM
Referred Doctor : Self

| Test Description | Observed Value | Unit | Reference Range |
|---|----------------|-------|--|
| LIPID PROFILE | | | |
| Serum Cholesterol (CHO POD/AU 480) | 188 | mg/dL | Desirable:<200 Borderline High:200-239 High: > 240 |
| Serum Triglycerides (Lipase GPO-PAP/ AU480) | 89 | mg/dL | <150 Normal 150-199 Borderline High 200-499 High >500 Very High |
| Serum HDL Cholesterol (Immunoenzymatic/AU 480) | 51 | mg/dL | <40 Major risk factor for CHD >60 Negative risk factor for CHD |
| Serum VLDL cholesterol (Calculated) | 18 | mg/dL | 7-35 |
| Serum LDL cholesterol (Calculated) | 119 | mg/dL | 50-100 |
| Serum Cholesterol-HDL Ratio (Calculated) | 3.69 | | 3-5 |
| Serum LDL-HDL Ratio (Calculated) | 2.34 | | 1.5 - 3.5 |

Polo Labs

The highlighted values should be correlated clinically

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| | | | |
|-------------|--------------------|------------------|-----------------------|
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| DOB/Gender | : 02-Mar-1989/F | SampleCollDate | : 25/Mar/2023 09:47AM |
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|------------------|----------------|------|-----------------|

CLINICAL PATHOLOGY

COMPLETE URINE EXAMINATION

Physical Examination

| | | | |
|------------------|-------------|----|--------------|
| Urine Volume | 30.00 | mL | |
| Urine Colour | Pale yellow | | Light Yellow |
| Urine Appearance | Clear | | Clear |

Chemical Examination (Reflectance Photometry)

| | | | |
|---------------------------------------|--------------|--|-------------|
| Urine pH | 6.00 | | 4.8-7.6 |
| Urine Specific Gravity | 1.005 | | 1.010-1.030 |
| Urine Glucose | Absent | | Absent |
| Urine Protein (Protein Ionization) | Absent | | NIL |
| Urine Ketones | Absent | | Absent |
| Urine Bilirubin | Absent | | Absent |
| Urine for Urobilinogen | Absent | | |
| Urine Nitrite | Absent | | Absent |

Microscopic Examination

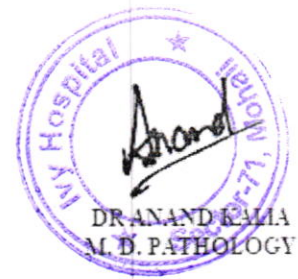
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|------------------------|--------|------|--------|
| Urine Pus Cells | 1-2 | | 0-5 |
| Urine RBC | Absent | /hpf | Absent |
| Urine Epithelial Cells | 0-1 | /hpf | 0-5 |
| Urine Casts | Absent | /lpf | Absent |
| Urine Crystals | Absent | /hpf | Absent |
| Urine Bacteria | Absent | /hpf | Absent |
| Urine Yeast Cells | Absent | /hpf | Absent |
| Amorphous Deposit | Absent | | Absent |

HAEMATOLOGY

ESR

Primary Sample Type: EDTA Blood

| | | | |
|---------------------------------|----|------|------|
| ESR (Automated ESR analyser) | 28 | mm/h | 0-15 |
|---------------------------------|----|------|------|



The highlighted values should be correlated clinically

Result Entered By: Geetika 40845



| | | | |
|-------------|--------------------|------------------|-----------------------|
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| DOB/Gender | : 02-Mar-1989/F | SampleCollDate | : 25/Mar/2023 09:47AM |
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| Bar Code No | : 12724745 | | |

| Test Description | Observed Value | Unit | Reference Range |
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|------------------|----------------|------|-----------------|

COMPLETE BLOOD COUNT (Sample Type- Whole Blood EDTA)

| | | | |
|---|------|----------------------|-------------|
| Haemoglobin (Noncyanmethaemoglobin) | 8.6 | g/dl | 12.0 - 15.0 |
| Hematocrit(PCV) (Calculated) | 30.4 | % | 33-45 |
| Red Blood Cell (RBC) (Impedence/DC Detection) | 3.80 | 10 ⁶ / μl | 3.8-4.8 |
| Mean Corp Volume (MCV) (Impedence/DC Detection) | 79.2 | fL | 83-97 |
| Mean Corp HB (MCH) (Calculated) | 22.4 | pg/mL | 27-31 |
| Mean Corp HB Conc (MCHC) (Calculated) | 28.3 | gm/dl | 32-36 |
| Red Cell Distribution Width -CV (Calculated) | 17.5 | % | 11-15 |
| Platelet Count (Impedence/DC Detection/Microscopy) | 340 | 10 ³ /ul | 150-450 |
| Mean Platelet Volume (MPV) (Impedence/DC Detection) | 10.0 | fL | 7.5-10.3 |
| Total Leucocyte Count (TLC) (Impedence/DC Detection) | 4.2 | 10 ³ /μl | 4.0 - 10.0 |

Differential Leucocyte Count (VCS/ Microscopy)

| | | | |
|---------------------------|-------|----|-----------|
| Neutrophils | 64 | % | 40-75 |
| Lymphocytes | 26 | % | 20-40 |
| Monocytes | 6 | % | 0-8 |
| Eosinophils | 4 | % | 0-4 |
| Basophils | 0 | % | 0-1 |
| Absolute Neutrophil Count | 2,688 | μl | 2000-7000 |
| Absolute Lymphocyte Count | 1,092 | uL | 1000-3000 |
| Absolute Monocyte Count | 252 | uL | 200-1000 |
| Absolute Eosinophil Count | 168 | μl | 20-500 |

*** End Of Report ***

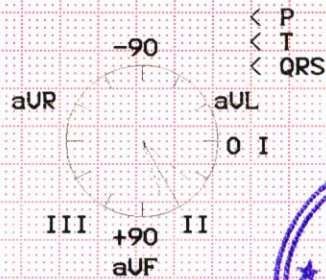


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Measurement Results:

QRS : 82 ms
 QT/QTcB : 332 / 399 ms
 PR : 148 ms
 P : 106 ms
 RR/PP : 692 / 690 ms
 P/QRS/T : 70/ 60/ 40 degrees
 QTD/QTcBD : 44 / 53 ms
 Sokolow : 2.4 mV
 NK : 12



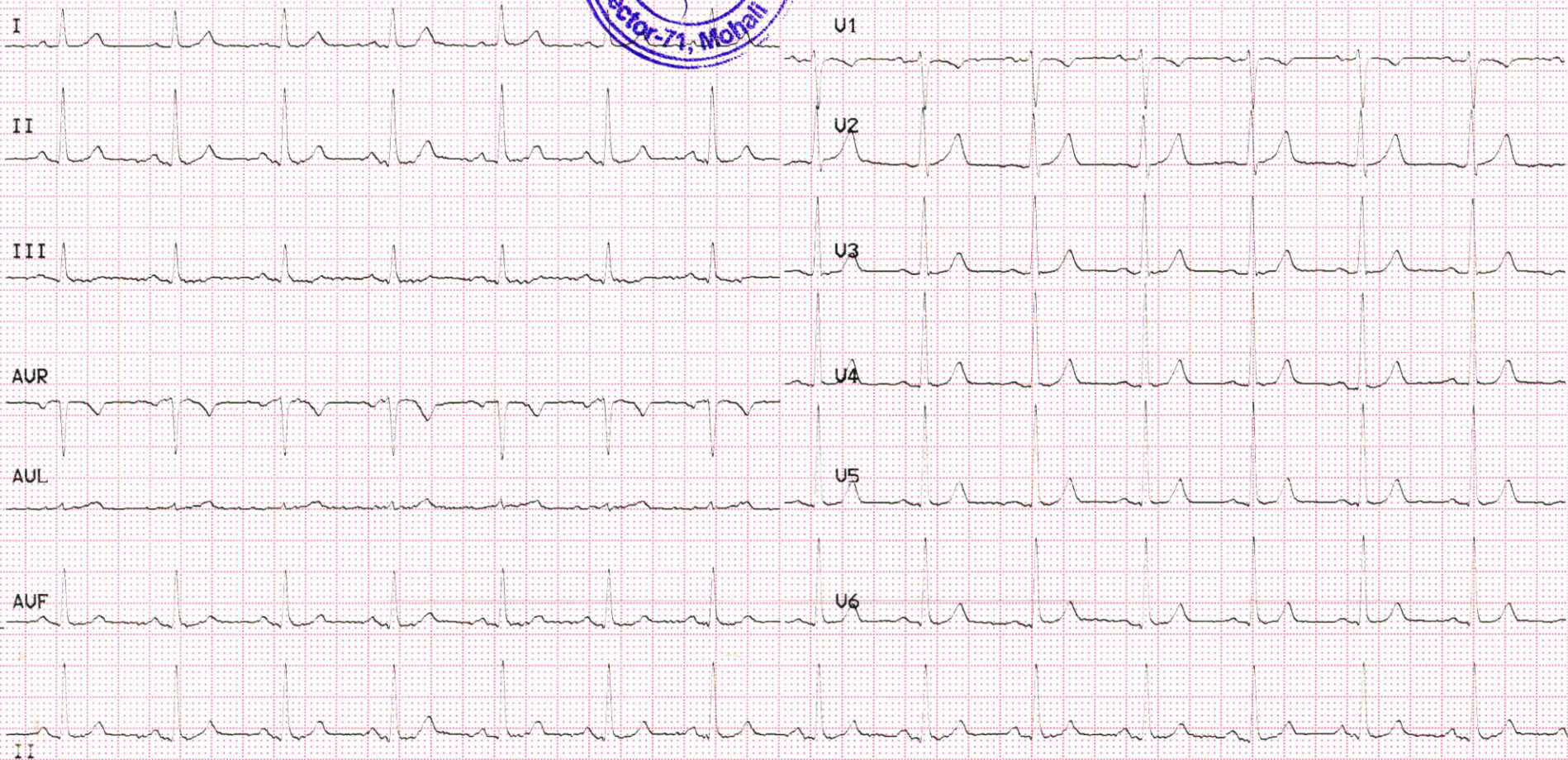
Interpretation:

R/S inversion area between U1 and U2
 probably normal ECG

Name - Manu Sharma
 Age - 34/R
 OHID - 348437

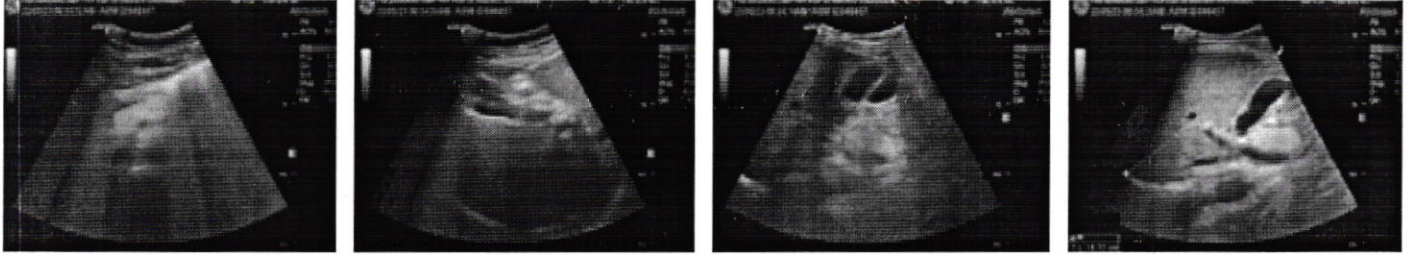


Unconfirmed report.



| | | | |
|----------------|-------------|------------------|------------------|
| NAME | MANU SHARMA | SEX/AGE | F34Y |
| PATIENT ID | ID348437 | Accession Number | |
| REF CONSULTANT | PACKAGE | DATE | 25/03/2023 09:33 |

USG WHOLE ABDOMEN



LIVER: is normal in size (~14.1 cm), outline and echotexture. No focal lesion is seen. IHBR are not dilated. Portal vein is normal. CBD is not dilated.

GALL BLADDER: is normally distended. GB wall is normal. No echoes are seen in GB.

SPLEEN: is normal in size (~10.7 cm), outline and echotexture. No focal lesion is seen.

PANCREAS & UPPER RETROPERITONEUM: Visualised pancreatic head and proximal body are normal in size and echotexture. Tail of pancreas is obscured by bowel gas.

RIGHT KIDNEY: It is normal in size (~ 10.3cm), outline and echotexture. Corticomedullary differentiation is well-defined. No calculi / hydronephrosis is seen.

LEFT KIDNEY: It is normal in size (~10.8 cm), outline and echotexture. Corticomedullary differentiation is well-defined. No calculi / hydronephrosis is seen.

U-BLADDER: is normally distended at the time of examination with normal wall thickness. No e/o calculus / mass seen.

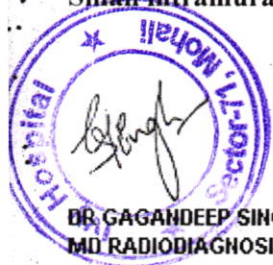
UTERUS: is normal in size, outline and echotexture. ET is ~10 mm.

Two small hypoechoic lesions measuring ~ 1.6 x 1.0cm & ~1.9 x 1.7cm in size are seen along the anterior and right lateral wall of uterus - ? Fibroids.

OVARIES: They are normal in size and echotexture. No SOL is seen.
No free fluid is seen in peritoneal cavity.

OPINION:

Small intramural uterine fibroids as described.



DR. GAGANDEEP SINGH SETHI
MD RADIODIAGNOSIS

The above impression is just an opinion of the imaging findings and not a final diagnosis. Needs correlation with clinical status, lab investigations and other relevant investigations

(NOT FOR MEDICO-LEGAL PURPOSE)



Ivy Hospital

SUPER-SPECIALITY HEALTHCARE
SECTOR 71, MOHALI
Tel: 0172-7170000
CIN No. : U85110PB2005PTC027898

| | | | |
|----------------|-------------|------------------|------------------|
| NAME | MANU SHARMA | SEX/AGE | F34Y |
| PATIENT ID | ID348437 | Accession Number | |
| REF CONSULTANT | DR | DATE | 25/03/2023 10:15 |

X-RAY CHEST PA VIEW

Rotation is present.

Cardiac shadow is normal.

No focal lung parenchymal lesion is seen.

Both hila are normal.

Both CP angle and domes of diaphragm are normal.



DR GAGANDEEP SINGH SETHI
MD RADIODIAGNOSIS

The above impression is just an opinion of the imaging findings and not a final diagnosis. Needs correlation with clinical status, lab investigations and other relevant investigations

(NOT FOR MEDICO-LEGAL PURPOSE)

A unit of Ivy Health and Life Sciences (P) Ltd. Website : www.ivyhospital.com, Email: cs@ivyhospital.com Fax: 91-172-2274900
Regd. Office: Administration Block, Ivy Hospital, Sector-71, S.A.S Nagar Mohali-160071, Punjab, Ph : +91-172-7170000, Fax: 91-172-5044339
All Payments to be made in favour of Ivy Health & Life Sciences (P) Ltd

IVY HELPLINE : +91 99888-23456