

Health Check up Booking Confirmed Request(bobE17955),Package Code-PKG10000366, Beneficiary Code-291002

Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>

Fri 3/22/2024 12:46 PM

From: Soumik Ghosh <SOUMIK.GHOSH@bankofbaroda.com>

You don't often get email from customercare@mediwheel.in. [Learn why this is important](#)

बाहर से आया है अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें या अटैचमेंट
ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON LINKS OR OPEN A

011-41195959

Dear **Soumik ghosh**,

We are pleased to confirm your health checkup booking request with the following details.

Hospital Package Name : Mediwheel Full Body Annual Plus

Patient Package Name : Mediwheel Full Body Health Checkup Male Above 40

Name of Diagnostic/Hospital : Shree Ram multispeciality Hospital

Address of Diagnostic/Hospital- Gate No.1, Basant Vihar, near Railway Under Bridge, Gondwara Chowk, Gudhiyari, Raipur, Chhattisgarh- 492 101

City : Raipur

State :

Pincode : 492001

Appointment Date : 23-03-2024

Confirmation Status : Booking Confirmed

Preferred Time : 8:00am

Booking Status : Booking Confirmed

Member Information

Booked Member Name	Age	Gender
MR. GHOSH SOUMIK	35 year	Male

Note - Please note to not pay any amount at the center.

Instructions to undergo Health Check:

8013002695



भारतीय विशिष्ट पहचान प्राधिकरण

भारत सरकार
Unique Identification Authority of India
Government of India

Enrollment No.: 0649/40310/00267

To
SOUMIK GHOSH
S/O Samiran Ghosh
NORTH BAKSARA SITALA TALA
Haora Corporation
Baksara
Haora
West Bengal 711110
8013002695
102206207
ME022062072FH



आपका आधार क्रमांक / Your Aadhaar No.:

8162 8950 8690

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



SOUMIK GHOSH
Father : SAMIRAN GHOSH
DOB : 10/10/1988
Male



8162 8950 8690

मेरा आधार, मेरी पहचान

(Handwritten signature)



Government of India



AADHAAR

सूचना

- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- पहचान का प्रमाण ऑनलाइन प्रमाणीकरण द्वारा प्राप्त व

INFORMATION

- Aadhaar is proof of identity, not of citizenship
- To establish identity, authenticate online

- आधार देश भर में मान्य है।
- आधार भविष्य में सरकारी और गैर-सरकारी सेवाओं का लाभ उठाने में उपयोगी होगा।
- Aadhaar is valid throughout the country.
- Aadhaar will be helpful in availing Government and Non-Government services in future.



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

Address:

S/O Samiran Ghosh, NORTH BAKSARA, SITALA TALA
Haora Corporation, Baksara, Haora, West Bengal, 711

8162 8950 8690



1947



help@uidai.gov.in



www.uidai.gov.in



Shree Ram Multispeciality Hospital (SRMH)

L o k a h S a m a s t a S u k h i n o B h a v a n t u

OPD - ID : 020240000699	PT. TYPE : NEW REGISTRATION
UH-ID : SRMH-24032230	PRINT DATE : 23-03-2024 / 09:26:34
TOKEN NO. : 1	
PATIENT NAME : MR. SOUMIK GHOSH	DEPARTMENT : MEDICINE
AGE / SEX : 35-Y 5-M 13-D / MALE	CONSULTANT : DR. AJIT KUMAR
DOB : 10-10-1988	CONSULT-DATE : 23-Mar-2024 - 09:20 AM
MOB-NO : 8013002695	COMPANY NAME : MEDIWHEEL FULL BODY ANNUAL PLUS
GUARDIAN NAME : S/o MR SAMIRAN GHOSH	OPD PAID FEE : 0.00
ADDRESS : SARAIPALI BASNA, MAHASAMUND, CG	
Weight : 84 Kg Temp : 97.1 °F B.P. 115/67 Pulse : 75 b/m SPO2 : 96 %	



6873041

ECG - Normal.

o/e
 GCS - 15/15
 - vitals stable.
 No fever

- F/H/O - No significant
- No any addictions
- Marital Status - married - 2 month
- occupation - Banker.

CNS - conscious, oriented
 CVS - S1 S2 (+)
 P/A soft non-tender.
 R/S - Bil equal air entry
 No/H/O - DM, HTN, Chronic illness

At present No Active medical Requirement in This case

FOLLOW-UP DATE :

ADVICE FOR ADMISSION YES NO

Near Railway Under Bridge, Basant Vihar Gate No. 1, Gondwara Chowk, Gudhiyari, Raipur (Chhattisgarh)

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Shree Ram Multispeciality Hospital (SRMH)

Lokah Samasta Sukhino Bhavantu

EXAMINATION OF EYES:- (BY OPHTHALMOLOGIST)

Patient Name Mr Soumit. Ghose

Date 23/3/24

Sex/ Age 35/M

UHID.....

EXTERNAL EXAMINATION	NAD			
SQUINT	NAD			
NYSTAGMUS	NAD			
COLOUR VISION	NORMAL			
FUNDUS : (RE):-	LOW		(LE):-	LOW
INDIVIDUAL COLOUR IDENTIFICATION	Good			
DISTANT VISION:(RE):-	G6		(LE):-	G6
NEAR VISION:(RE):-	NG		(LE):-	NG
NIGHT BLINDNESS	NAD			
	SPH	CYL	AXIS	ADD
RIGHT				
LEFT				
REMARKS:-				

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OPD - ID : 020240000699 PT. TYPE : NEW REGISTRATION
UH-ID : SRMH-24032230 PRINT DATE : 23-03-2024 / 09:33:32 TOKEN NO. : 1

PATIENT NAME : MR. SOUMIK GHOSH DEPARTMENT : DENTAL
AGE / SEX : 35-Y 5-M 13-D / MALE
DOB : 10-10-1988 CONSULT-DATE : 23-Mar-2024 - 09:20 AM
MOB-NO : 8013002695 COMPANY NAME : MEDIWHEEL FULL BODY ANNUAL PLUS
GUARDIAN NAME : S/o MR SAMIRAN GHOSH OPD PAID FEE : 0.00
ADDRESS : SARAIPALI BASNA, MAHASAMUND, CG

Weight : Temp : B.P. : Pulse : SPO2 :

Please indicate whether you are presently suffering from anyone of the following symptoms:

Oral Health Status:

- Yes No Dental Sealants Present on Permanent Molars
- Yes No Caries Experience / Restoration History : A filling (Temporary / Permanent) OR a Tooth that is missing because it was extracted as a result of caries .
- Yes No Untreated Caries/ Open Treatment Plan
- Yes No Urgent Treatment: abscess, Nerve Exposure, Advanced Disease State, Signs of Symptoms that include pain/ infection / swelling

Treatment Needs:

- Restorative Care- Fillings, crowns, etc.
- Preventative Care-prophylaxis, sealants, fluoride Treatment
- Sedation / Surgery Needs to Complete Treatment

Present chief complaints:- *at present no fresh complaints -*

Dr. Signature

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OPD - ID : 020240000699	PT. TYPE : NEW REGISTRATION	TOKEN NO. : 1
UH-ID : SRMH-24032230	PRINT DATE : 23-03-2024 / 09:33:32	
PATIENT NAME : MR. SOUMIK GHOSH	DEPARTMENT : ENT	
AGE / SEX : 35-Y 5-M 13-D / MALE	CONSULT-DATE : 23-Mar-2024 - 09:20 AM	
DOB : 10-10-1988	COMPANY NAME : MEDIWHEEL FULL BODY ANNUAL PLUS	
MOB-NO : 8013002695	OPD PAID FEE : 0.00	
GUARDIAN NAME : S/o MR SAMIRAN GHOSH		
ADDRESS : SARAIPALI BASNA, MAHASAMUND, CG		
Weight :	Temp :	B.P. :
		Pulse :
		SPO2 :

Please indicate whether you are presently suffering from anyone of the following symptoms:

Ears, Nose, Mouth, Throat

	Yes	No
Ear pain	0	✓
Ear itch	0	✓
Ear drainage	0	✓
Dizziness/ Loss of balance	0	✓
Loss of Hearing	0	✓
Popping Noise	0	✓
Tinnitus	0	✓
Nosebleeds	0	✓
Post-nasal Drip	0	✓
Sinus pain	0	✓
Sinus pressure	0	✓
Nasal congestion	0	✓
Loss of smell/taste	0	✓
Hoarseness	0	✓
Sore Throat	0	✓
Throat tickle	0	✓
Dry Mouth / Throat	0	✓
Throat clearing	0	✓
Snoring	0	✓

Present chief complaints:-

at present no fresh complaints

Dr. Signature

FOLLOW-UP DATE :

ADVICE FOR ADMISSION YES NO

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ECHOCARDIOGRAPHY REPORT

Name	Mr. Soumik Ghosh	Age / Sex	35 years / Male
Date	23-03-2024	UHID no	24032230

PULMOANRY VELOCITY : 0.76 m/s

AORTIC VELOCITY : 1.22 m/s

TRICUSPID VELOCITY : 1.89 m/s

PASP : 18 mmHg + RAP

M-Measurement Value

Aorta	2.4	LVEDD	3.9
LA	2.8	IVSD	1.0
LVEF	>60%	LVPWD	1.0

FINAL IMPRESSION

- Normal Cardiac Chambers & Dimension
- NO RWMA
- Normal LV Systolic Function
- LVEF >60%
- Trace MR/TR, PASP 18 mmHg + RAP
- No Clot/PE / Vegetation

Dr. Nikhil Motiramani

(MBBS, MD, DM Card)

Dr. Raghvesh Ojha

(MBBS, PGDCC clinical cardiology)

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Clarity Medical TrueBeat 200 Ver2.2.6H

To be clinically correlated: HR = 61bpm

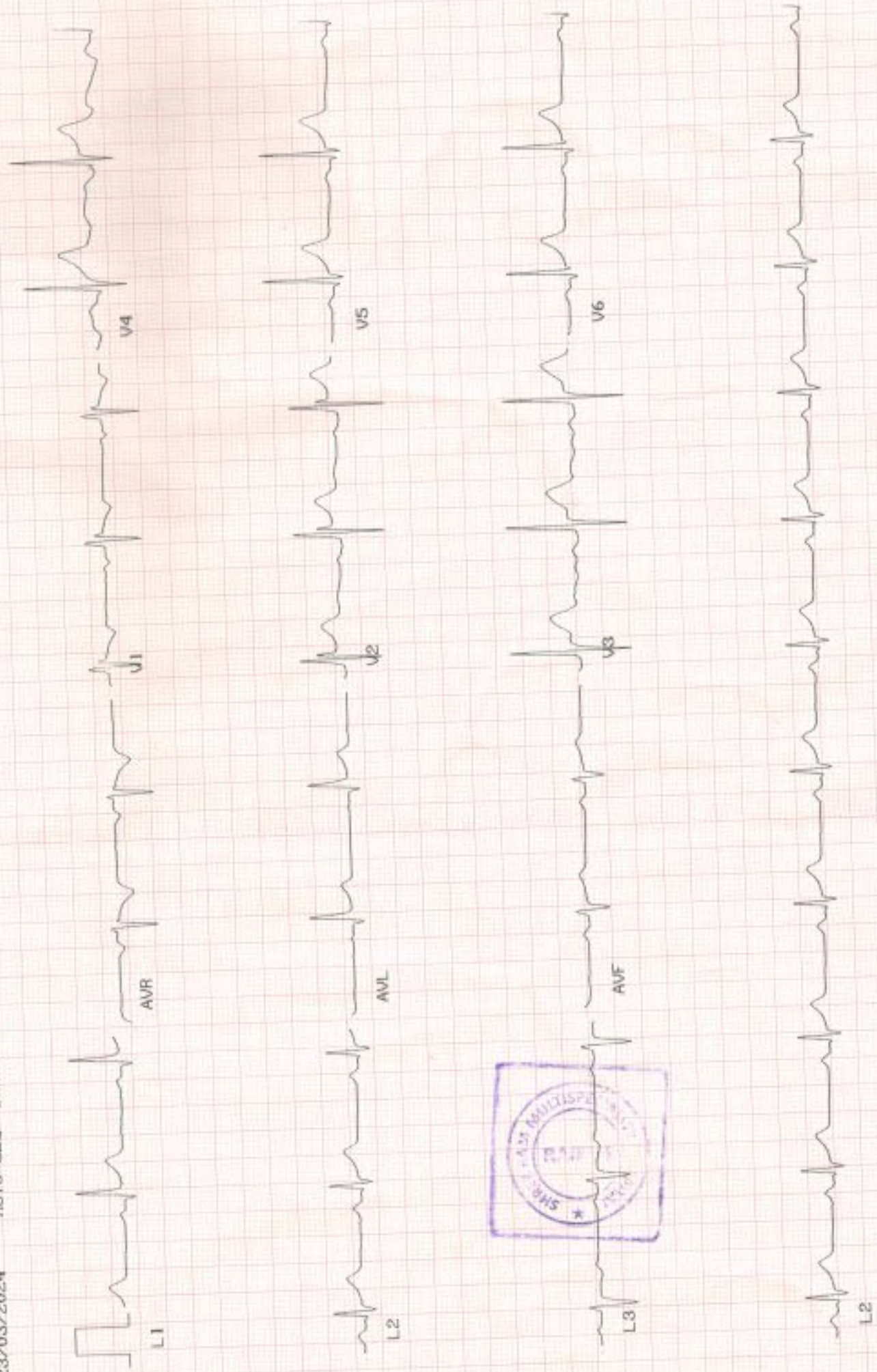
25 mm/s P = 95 ms
 10mm/mV QRS = 70 ms
 0.1 - 35Hz PR = 182 ms
 50Hz ReJ-Y QT = 350 ms
 BLC-Y QTc = 352 ms

QT/QTc = 99%
 QT/RR = 35%
 QRS axis = -10°
 P axis = 30°
 T axis = 17°

Sinus Rhythm
 Mild Left Axis Deviation
 Normal ECG

Mr Soumik Ghosh
 M 35Y Kg
 10:24 AM
 23/03/2024

AUTO SEQ





Shree Ram Multispeciality Hospital (SRMH)

Lokah Samasta Sukhino Bhavantu

PT. NAME : MR. SOUMIK GHOSH
MOBILE NO : 8013002695
DOCTOR : DR. AJIT KUMAR
REFERRED BY : SELF

AGE / SEX : 35/MALE
UH ID NO. : SRMH-24032230
COLLECTION : 23-03-2024
REPORTING : 23-Mar-2024

TEST NO
410

HAEMATOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
CBC (COMPLETE BLOOD COUNT)			
HAEMOGLOBIN (Hb)	12.7	gm/dL	13.5 - 17.5
TOTAL RBC COUNT	4.85	Million/cumm	4.5 - 5.9
HAEMATOCRIT (PCV)	38.2	%	41.5 - 50.4
RBC INDICES			
MCV	81.4	fL	78 - 96
MCH	26.2	pg	27 - 32
MCHC	32.4	%	33 - 37
RDW	13.5	%	11 - 16
TOTAL WBC COUNT (TLC)	7700	/cumm	4000 - 11000
DIFFERENTIAL COUNT			
Neutrophils	64	%	40 - 70
Lymphocytes	30	%	22 - 48
Eosinophils	02	%	0 - 6
Monocytes	04	%	0 - 8
Basophils	00	%	00 -
PLATELET COUNT	1.45	/ μ L	1.50 - 4.50
PCT	0.17	%	0.10 - 0.28
MPV(MEAN PLATELET VOLUME)	11.7	fL	8 - 11
PDW	15.8	%	11 - 18

-- End Of Report --

LAB TECHNICIAN

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L o k a h S a m a s t a S u k h i n o B h a v a n t u

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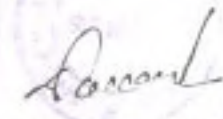
HAEMATOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
BLOOD GROUPING AND RH TYPING			
BLOOD GROUP	"O"	-	-
RH FACTOR	POSITIVE	-	-

-- End Of Report --


LAB TECHNICIAN

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HAEMATOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
ESR (ERYTHROCYTE SEDIMENTATION RATE)			
ESR	15	mm after 1 hrr	0 - 20

-- End Of Report --

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TEST NO
410

BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
LIVER FUNCTION TEST (LFT)			
BILIRUBIN TOTAL	0.63	mg/dL	0.2 - 1
BILIRUBIN DIRECT	0.28	mg / dl	0.1 - 0.6
BILIRUBIN INDIRECT	0.35	mg / dl	0.1 - 0.4
SGOT	32.5	U / L	10 - 55
SGPT	28.6	U / L	0 - 40
ALKALINE PHOSPHATASE	217.4	U / L	0 - 270
TOTAL PROTEIN	6.61	g / dl	6 - 8
ALBUMIN	3.86	g/dl	3.5 - 5.0
GLOBULIN	2.75	g / dl	2 - 3.5
A/G RATIO	1.11	g/dl	1 - 2.5

Clinical Significance:

Alanine transaminase (ALT)
ALT is an enzyme found in the liver that helps your body metabolize protein. When the liver is damaged, ALT is released into the bloodstream and levels increase.

Aspartate transaminase (AST)
AST is an enzyme that helps metabolize alanine, an amino acid. Like ALT, AST is normally present in blood at low levels. An increase in AST levels may indicate liver damage or disease or muscle damage.

Alkaline phosphatase (ALP)
ALP is an enzyme in the liver, bile ducts and bone. Higher-than-normal levels of ALP may indicate liver damage or disease, such as a blocked bile duct, or certain bone diseases.

Albumin and total protein
Albumin is one of several proteins made in the liver. Your body needs these proteins to fight infections and to perform other functions. Lower-than-normal levels of albumin and total protein might indicate liver damage or disease.

Bilirubin
Bilirubin is a substance produced during the normal breakdown of red blood cells. Bilirubin passes through the liver and is excreted in stool. Elevated levels of bilirubin (jaundice) might indicate liver damage or disease or certain types of anemia.

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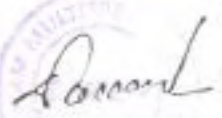
BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
URIC ACID			
URIC ACID	5.21	mg/dL	3.6 - 7.7

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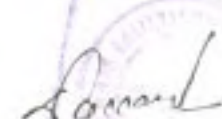
BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
CREATININE			
CREATININE	0.99	mg / dl	0.6 - 1.2

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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
LIPID PROFILE			
CHOLESTEROL	196.5	mg / dl	150 - 220
SERUM TRIGLYCERIDE	182.4	mg / dl	60 - 165
HDL	34.1	mg / dl	35 - 80
LDL	125.9	mg/dL	90 - 160
VLDL	36.4	mg/dl	20 - 50
CHOLESTEROL / HDL RATIO	5.76	mg/dl	3.5 - 5.5
LDL/HDL Ratio	3.69	mg/dl	2.5 - 3.5
TRIGLYCERIDES/HDL RATIO	5.35	mg/dl	2.0 - 4.0

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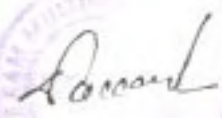
CLINICAL PATHOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
URINE SUGAR FASTING AND PP			
URINE SUGAR - FASTING	Absent		Absent -
URINE SUGAR - PP	Absent		Absent -

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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
HBA1c (GLYCOSYLATED HEAMOGLOBIN)			
HBA1c	6.03	%	Normal Range : <6% - Good Control : 6 - 7% - Fair Control : 7 - 8% - Unsatisfactory Control : 8-10% - Poor Control : >10% -
Estimated average plasma glucose	137.3	mg/dl	80 - 120

Interpretation: As per American Diabetes Association(ADA)

Non diabetic adults >= 18 years	<5.7
At risk (prediabetes)	5.7 - 6.4
Diagnosing Diabetes	>= 6.5
Therapeutic goals for glycoemic control	Good of Therapy > 19 years - <7.0 <19 years - <7.5

NOTE:

- HbA1c reflects long term fluctuations in the blood glucose concentration
- A diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled.

Significance of Test:

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

-- End Of Report --

LAB TECHNICIAN

Note : This Report is not for medicolegal purpose

Dr. Dhananjay Prasad
(MD PATHOLOGY)

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Shree Ram Multispeciality Hospital (SRMH)

L o k a h S a m a s t a S u k h i n o B h a v a n t u

Mr.SOUMIK GHOSH

Age: 35 Years

Sex: Male

Sample Collected At:

Ref. By: Dr. AJIT KUMAR (MD)

Registered: 23 Mar, 24 12:54 PM

Collected: 23 Mar, 24 12:58 PM

Reported: 23 Mar, 24 05:16 PM


TFT

Thyroid Function Test (TFT)




Investigation	Observed Value	Unit	Biological Reference Interval
THYROID SERUM HORMONS			
Serum Triiodothyronine (T3)	1.34	ng/mL	0.89 - 1.87
Serum thyroxine (T4)	10.57	ug/dL	5.1 - 14.28
Thyroid Stimulating Hormone (TSH)	2.33	µIU/mL	0.66 - 5.67

Comments:-

- (i) Ethnicity, iodine intake, gender, age, body mass index and Exercise influences the reference range of Thyroid hormones and serum TSH concentrations.
- (ii) Changes in Thyroid Hormones (especially T3) and TSH may be seen as early as 24 hours after the onset of non-thyroidal illness. (Poor nutrition/starvation, sepsis, burns, malignancy, myocardial infarction, post-surgery, and with chronic liver and renal disease)
- (iii) Serum total T4 and T3 concentrations increase to approximately 150% of non-pregnant values – this occurs during the first half of pregnancy and is maintained thereafter until parturition. Free T4 concentrations also change during pregnancy; in the first trimester a transient rise is often observed.
- (iv) Measurement of FT4 and FT3 is best avoided in patients receiving heparin therapy. (When indicated, blood sample should be taken 10 hours after the last injection of heparin, and analyzing it without delay, can reduce the risk of artifactual hyperthyroxinaemia.)
- (v) Phenytoin, carbamazepine and furosemide cause artifactual increase in free T4 (FT4) and decrease in total T4.


Dr. D. Prasad
 M.D.(Pathologist)

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Shree Ram Multispeciality Hospital (SRMH)

L o k a h S a m a s t a S u k h i n o B h a v a n t u

MR.SOUMIK GHOSH

Age: 35 Years

Sex: Male

Sample Collected At:

Ref. By: **Dr.AJIT KUMAR**

Registered: 23 Mar, 24 01:40 PM

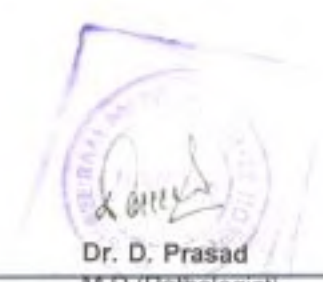
Collected: 23 Mar, 24 01:41 PM

Reported: 24 Mar, 24 10:05 AM

BUN / Creatinine Ratio PANAL

Investigation	Observed Value	Unit	Biological Reference Interval
BUN			
BUN	15.38	mg/dL	7.00 - 20.00
Serum Creatinine	0.99	mg/dL	0.55 - 1.20
BUN / Creatinine Ratio	15.53		10:1 - 20:1

Blood urea nitrogen (BUN) is a waste product produced when the liver breaks down protein. The kidneys then filter it out of the blood and eliminate it through urine. Creatinine is a waste product created by the breakdown of phosphocreatine, a molecule stored in muscle tissue. The kidneys filter creatinine from the blood, and its levels in the body reflect the efficiency of the kidney's excretory function. therefore, BUN and creatinine are useful markers in assessing kidney health because they help doctors evaluate the kidney's filtration rate.



Dr. D. Prasad
M.D.(Pathologist)

END OF REPORT
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Mr. SOUMIK GHOSH

Sample Collected At :

Registered : 23 Mar,24 01:38 PM

Age: 35 Years

Ref By : Dr.AJIT KUMAR

Collected : 23 Mar,24 01:44 PM

Sex: Male

Reported : 24 Mar,24 5:18 PM

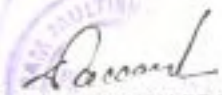
GAMAMA GLUTAMYL TRANSFERASE (GGT)

INVESTIGATION	RESULT	REFERENCE VALUE	UNIT
GAMMA – GLUTAMYL TRANSFERASE (GGT) , SERUM	16.37	12.00-18.00	U/L

GENDER -	NORMAL RANGE(U/L)
MALE -	12.00-18.00
FEMALE -	6.00-29.00

COMMENTS:-

Gamma – Glutamyl Transferase (Ggt) Is An Enzyme That Is Found In Many Organs Throughtout The Body , With The Highest Concentrations Found In The Liver .Ggt Is Elevated In The Blood In Most Diseases That Cause Damage To The Liver Or Bile Ducts ,This Test Measures The Level Of Ggt In A Blood Samle.


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L o k a h S a m a s t a S u k h i n o B h a v a n t u

PT. NAME : MR. SOUMIK GHOSH
MOBILE NO : 8013002695
DOCTOR : DR. AJIT KUMAR
REFERRED BY : SELF

AGE / SEX : 35/MALE
UH ID NO. : SRMH-24032230
COLLECTION : 23-03-2024
REPORTING : 23-Mar-2024

TEST NO
410

CLINICAL PATHOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
URINE ROUTINE AND MICROSCOPY			
PHYSICAL EXAMINATION			
QUANTITY	20	ml	-
COLOUR	Pale Yellow		Pale Yellow -
APPEARANCE	Clear		Clear -
REACTION	Acitic		Acitic -
CHEMICAL EXAMINATION			
ALBUMIN	Absent		Absent -
SUGAR	Absent		Absent -
KETONE	Absent		Absent -
BILE SALT	Absent		Absent -
BILE PIGMENT	Absent		Absent -
MICROSCOPIC EXAMINATION			
PUS CELLS	4-5	/hpf	2 - 5
EPITHELIAL CELLS	3-4	/hpf	1 - 5
RBC	Nil	/hpf	0 - 3
CAST	Nil	/lpf	Nil -
YEAST	Nil		Nil -
CRYSTAL	Nil	/lpf	Nil -
Bacteria	Nil		Nil -
OTHERS	-		-

-- End Of Report --

LAB TECHNICIAN

Note : This Report is not for medicolegal purpose

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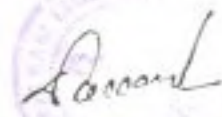
BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
BLOOD SUGAR - FASTING AND PP			
BLOOD SUGAR FASTING	80.3	mg/dL	60 - 120
BLOOD SUGAR PP	85.2	mg/dL	80 - 140

-- End Of Report --


LAB TECHNICIAN

Note : This Report is not for medicolegal purpose


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Service





SHRI RAM IMAGING & DIAGNOSTIC CENTER

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DR ANAND BANSAL

MBBS MD DNB(Radiodiagnosis)
(IMS BHU) (Gold Medalist)
Ex Senior Resident (AIIMS Raipur)
Ex Assistant Professor (Pt JNMC Raipur)
Reg. No. - CGMC 6359/2015

5D SONOGRAPHY -16 SLICE CT SCAN - DIGITAL X RAY - PATHOLOGY - BIOPSY

PATIENT NAME: SOUMIK GHOSH	DATE: 23/03/2024
REF PHY: SHRIRAM MULTISPECIALITY HOSPITAL GUDHIYARI (SRMS), PATIENT ID: 46534	AGE/SEX: 35 Years/MALE

USG WHOLE ABDOMEN

Liver: Liver is normal in size (13.6 cm), smooth in outline & raised echotexture.

Billiry system: IHBR's are not dilated. CBD is not dilated.

Liver vessels: Portal vein and hepatic veins are normal.

Gall bladder: Distended with anechoic lumen and normal wall thickness.

Pancreas & Paraaortic Region: Normal. Pancreatic duct not dilated.

Spleen: Is normal in size measures (8.4 cm) with normal echotexture.

Kidneys	RIGHT	LEFT
SIZE	9.4 x 3.6 cm	9.5 x 3.9 cm
CORTICAL ECHOGENICITY	Normal	Normal
CORTICOMEDULLARY DIFFERENTIATION	Maintained	Maintained
PELVICALYCEAL SYSTEM	Not dilated	Not dilated
URETER	Not dilated	Not dilated
CALCULUS	No	No

Urinary bladder: The urinary bladder shows physiological distention. It shows normal wall thickness.

Prostate: is normal in size measures 2.4 x 4.2 x 3.5 cm (weight 18.5 gm) with normal shape & echotexture.

Fluid: There is no free or loculated fluid collection in abdomen or pelvis.

Bowel loops are grossly normal.

No significant lymphadenopathy is noted.



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REF PHY: SHRIRAM MULTISPECIALITY HOSPITAL GUDHIYARI (SRMS),	AGE/SEX: 35 Years/MALE
PATIENT ID: 46534	


IMPRESSION:

- GRADE – I FATTY LIVER CHANGES.

Advised clinical correlation/further evaluation if clinically indicated.

DR. ANAND BANSAL
MD DNB RADIODIAGNOSIS
CONSULTANT RADIOLOGIST
CGMC 6359/2015




DR APOORVA DIXIT
MBBS MD RADIODIAGNOSIS
CONSULTANT RADIOLOGIST
CGMC10238/2020

Typist: DEKUMAR SAHU

This report is for perusal of the doctor only not the definitive diagnosis; findings have to be clinically correlated. Ultrasound has its limitations in obese patients and in retroperitoneal organs. All congenital abnormalities cannot be detected on ultrasound. This report is not for medico-legal purposes.

