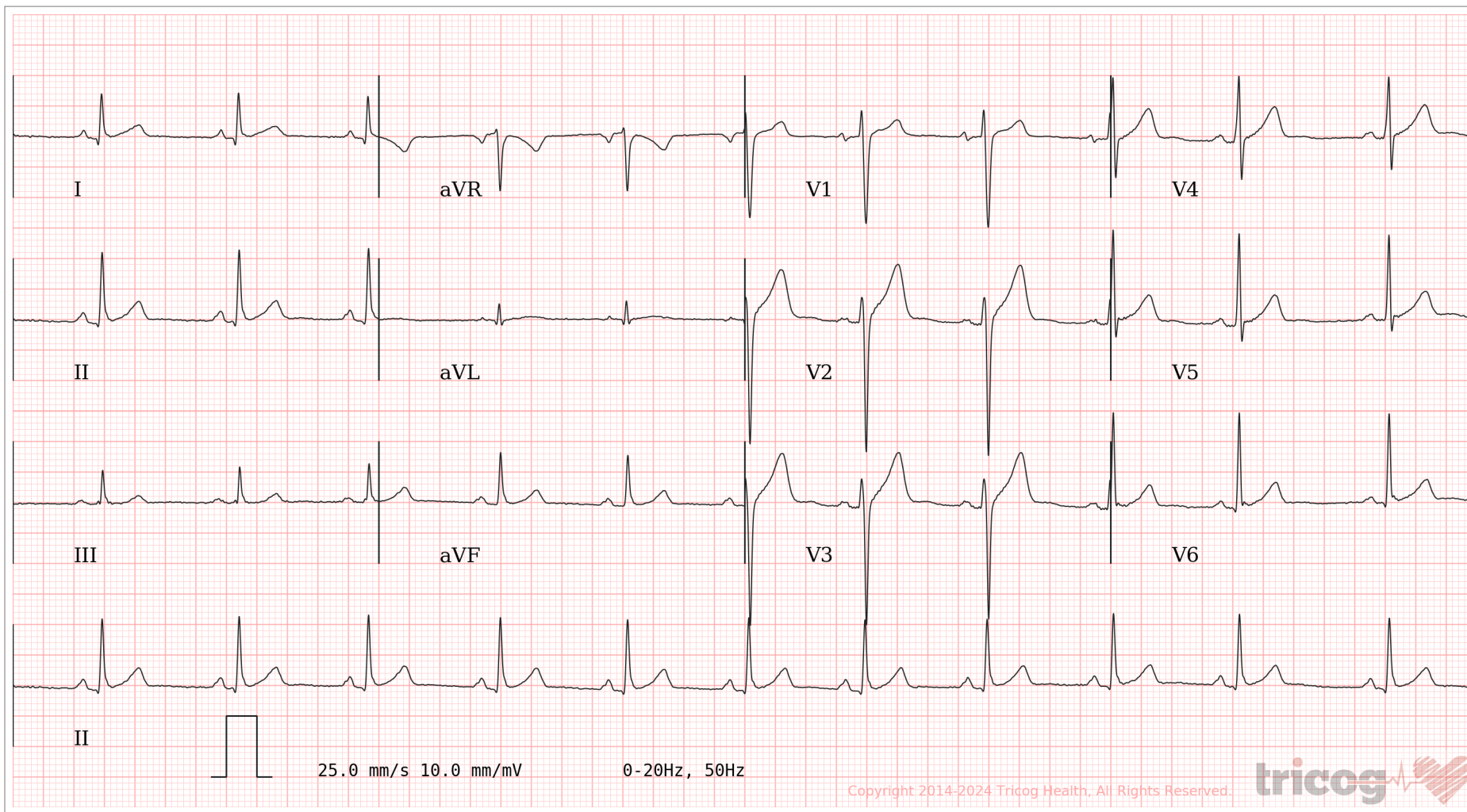




Age / Gender: 39/Male
Patient ID: CHL20014432425
Patient Name: Mr.LALIT KANDPAL

Date and Time: 13th Apr 24 11:21 AM



AR: 71bpm VR: 71bpm QRSD: 84ms QT: 358ms QTcB: 389ms PRI: 138ms P-R-T: 53° 59° 49°

Abnormal: Sinus Rhythm, Sinus Arrhythmia Seen, Borderline Left Ventricular Hypertrophy suspected. Please correlate clinically.

AUTHORIZED BY

Dr. Charit
MD, DM: Cardiology

REPORTED BY

Dr Vishwanath. A



CHANDAN DIAGNOSTIC CENTRE

Add: Godavari Complex, Near K.V.M Public School Heera Nagar, Haldwani
Ph: 7705023379,-
CIN : U85110DL2003PLC308206



Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:42
Age/Gender	: 39 Y 8 M 8 D /M	Collected	: 14/Apr/2024 09:45:19
UHID/MR NO	: CHL2.0000160605	Received	: 14/Apr/2024 10:37:09
Visit ID	: CHL20014432425	Reported	: 14/Apr/2024 14:19:28
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD -	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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Blood Group (ABO & Rh typing) ** , Blood

Blood Group	B			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
Rh (Anti-D)	POSITIVE			ERYTHROCYTE MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA

Complete Blood Count (CBC) ** , Whole Blood

Haemoglobin	14.00	g/dl	1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl 1 Mo- 10.0-18.0 g/dl 3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5 g/dl 2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl 12-18 Yr 13.0-16.0 g/dl Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl	
TLC (WBC)	4,300.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
<u>DLC</u>				
Polymorphs (Neutrophils)	57.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	37.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	3.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE
<u>ESR</u>				
Observed	8.00	Mm for 1st hr.		
Corrected	2.00	Mm for 1st hr.	<9	
PCV (HCT)	44.00	%	40-54	
Platelet count				
Platelet Count	1.45	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.40	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	50.50	%	35-60	ELECTRONIC IMPEDANCE





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Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:42
Age/Gender	: 39 Y 8 M 8 D /M	Collected	: 14/Apr/2024 09:45:19
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Visit ID	: CHL20014432425	Reported	: 14/Apr/2024 14:19:28
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DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
PCT (Platelet Hematocrit)	0.18	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	13.50	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBCCount				
RBC Count	4.56	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	92.20	fL	80-100	CALCULATED PARAMETER
MCH	30.80	pg	28-35	CALCULATED PARAMETER
MCHC	33.40	%	30-38	CALCULATED PARAMETER
RDW-CV	13.10	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	45.00	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	2,451.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	129.00	/cu mm	40-440	

Dr.Pankaj Punetha DNB(Pathology)





CHANDAN DIAGNOSTIC CENTRE

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Ph: 7705023379,-
CIN : U85110DL2003PLC308206



Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:43
Age/Gender	: 39 Y 8 M 8 D /M	Collected	: 14/Apr/2024 09:45:19
UHID/MR NO	: CHL2.0000160605	Received	: 14/Apr/2024 10:37:09
Visit ID	: CHL20014432425	Reported	: 14/Apr/2024 11:20:00
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD -	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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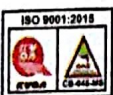
GLUCOSE FASTING ** , Plasma

Glucose Fasting	84.00	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD
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Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.

Dr.Pankaj Punetha DNB(Pathology)





CHANDAN DIAGNOSTIC CENTRE

Add: Godavari Complex, Near K.V.M Public School Heera Nagar, Haldwani
Ph: 7705023379,-
CIN : U85110DL2003PLC308206



Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:43
Age/Gender	: 39 Y 8 M 8 D /M	Collected	: 13/Apr/2024 10:52:54
UHID/MR NO	: CHL2.0000160605	Received	: 13/Apr/2024 12:10:42
Visit ID	: CHL20014432425	Reported	: 13/Apr/2024 12:51:42
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD -	Status	: Final Report

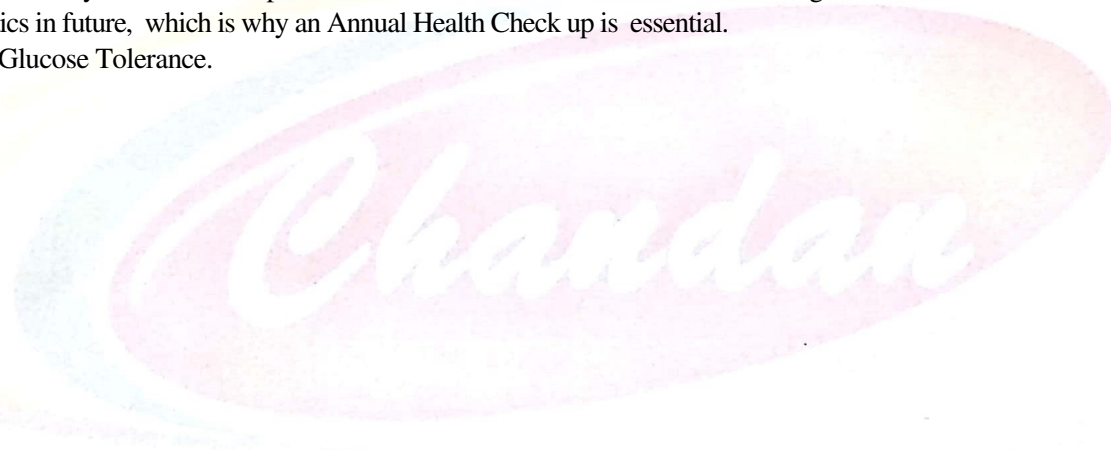
DEPARTMENT OF BIOCHEMISTRY


MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Glucose PP** <i>Sample: Plasma After Meal</i>	132.00	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD

Interpretation:

- Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetes in future, which is why an Annual Health Check up is essential.
- I.G.T = Impaired Glucose Tolerance.




Dr Vinod Ojha
MD Pathologist





CHANDAN DIAGNOSTIC CENTRE

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Ph: 7705023379,-
CIN : U85110DL2003PLC308206



Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:45
Age/Gender	: 39 Y 8 M 8 D /M	Collected	: 14/Apr/2024 09:45:19
UHID/MR NO	: CHL2.0000160605	Received	: 14/Apr/2024 10:37:09
Visit ID	: CHL20014432425	Reported	: 14/Apr/2024 11:58:37
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD -	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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GLYCOSYLATED HAEMOGLOBIN (HbA1C) ** , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.30	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	34.70	mmol/mol/IFCC		
Estimated Average Glucose (eAG)	106	mg/dl		

Interpretation:

NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes management.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

**Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated VARIANT II TURBO HPLC Analyser.

Clinical Implications:

*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

*With optimal control, the HbA 1c moves toward normal levels.

*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated *Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy





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Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:45
Age/Gender	: 39 Y 8 M 8 D /M	Collected	: 14/Apr/2024 09:45:19
UHID/MR NO	: CHL2.0000160605	Received	: 14/Apr/2024 10:37:09
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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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c. Alcohol toxicity d. Lead toxicity

*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

*Pregnancy d. chronic renal failure. Interfering Factors:

*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

BUN (Blood Urea Nitrogen) ** Sample: Serum	12.00	mg/dL	7.0-23.0	CALCULATED
Creatinine ** Sample: Serum	0.95	mg/dl	0.6-1.30	MODIFIED JAFFES
Uric Acid ** Sample: Serum	6.50	mg/dl	3.4-7.0	URICASE
LFT (WITH GAMMA GT) ** , Serum				
SGOT / Aspartate Aminotransferase (AST)	29.59	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	57.20	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	74.50	IU/L	11-50	OPTIMIZED SZAIZING
Protein	5.80	gm/dl	6.2-8.0	BIURET
Albumin	4.30	gm/dl	3.4-5.4	B.C.G.
Globulin	1.50	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	2.87		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	82.50	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	1.00	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.50	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.50	mg/dl	< 0.8	JENDRASSIK & GROF

LIPID PROFILE (MINI) ** , Serum

Cholesterol (Total)	221.57	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	83.80	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	96	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	42.24	mg/dl	10-33	CALCULATED
Triglycerides	211.20	mg/dl	< 150 Normal	GPO-PAP





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Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:45
Age/Gender	: 39 Y 8 M 8 D /M	Collected	: 14/Apr/2024 09:45:19
UHID/MR NO	: CHL2.0000160605	Received	: 14/Apr/2024 10:37:09
Visit ID	: CHL20014432425	Reported	: 14/Apr/2024 11:58:37
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD -	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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150-199 Borderline High
200-499 High
>500 Very High



Dr.Pankaj Punetha DNB(Pathology)





CHANDAN DIAGNOSTIC CENTRE

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CIN : U85110DL2003PLC308206



Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:43
Age/Gender	: 39 Y 8 M 8 D /M	Collected	: 13/Apr/2024 10:16:54
UHID/MR NO	: CHL2.0000160605	Received	: 13/Apr/2024 11:21:39
Visit ID	: CHL20014432425	Reported	: 13/Apr/2024 15:53:01
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD -	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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URINE EXAMINATION, ROUTINE ** , Urine

Color	YELLOW			
Specific Gravity	1.020			
Reaction PH	Acidic (5.0)			DIPSTICK
Appearance	CLEAR			
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	0.1-3.0	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Bilirubin	ABSENT			DIPSTICK
Leucocyte Esterase	ABSENT			DIPSTICK
Urobilinogen(1:20 dilution)	ABSENT			
Nitrite	ABSENT			DIPSTICK
Blood	PRESENT (+)			DIPSTICK
Microscopic Examination:				
Epithelial cells	1-2/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	2-3/h.p.f			
RBCs	0-1/h.p.f			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

Dr.Pankaj Punetha DNB(Pathology)





CHANDAN DIAGNOSTIC CENTRE

Add: Godavari Complex, Near K.V.M Public School Heera Nagar, Haldwani
Ph: 7705023379,-
CIN : U85110DL2003PLC308206



Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:44
Age/Gender	: 39 Y 8 M 8 D /M	Collected	: 14/Apr/2024 11:12:52
UHID/MR NO	: CHL2.0000160605	Received	: 14/Apr/2024 12:55:48
Visit ID	: CHL20014432425	Reported	: 14/Apr/2024 14:22:47
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD -	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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SUGAR, FASTING STAGE** , Urine

Sugar, Fasting stage	ABSENT	gms%
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Interpretation:

- (+) < 0.5
- (++) 0.5-1.0
- (+++) 1-2
- (++++) > 2



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CIN : U85110DL2003PLC308206



Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:44
Age/Gender	: 39 Y 8 M 8 D /M	Collected	: 13/Apr/2024 10:57:27
UHID/MR NO	: CHL2.0000160605	Received	: 13/Apr/2024 12:10:45
Visit ID	: CHL20014432425	Reported	: 13/Apr/2024 14:28:57
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD -	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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SUGAR, PP STAGE** , Urine

Sugar, PP Stage ABSENT

Interpretation:

- (+) < 0.5 gms%
- (++) 0.5-1.0 gms%
- (+++) 1-2 gms%
- (++++) > 2 gms%



Dr.Pankaj Punetha DNB(Pathology)





CHANDAN DIAGNOSTIC CENTRE

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Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:45
Age/Gender	: 39 Y 8 M 8 D /M	Collected	: 14/Apr/2024 09:45:19
UHID/MR NO	: CHL2.0000160605	Received	: 14/Apr/2024 10:37:09
Visit ID	: CHL20014432425	Reported	: 14/Apr/2024 11:56:36
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD -	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
PSA (Prostate Specific Antigen), Total ** <i>Sample: Serum</i>	0.60	ng/mL	<4.1	CLIA

Interpretation:

1. PSA is detected in the serum of males with normal, benign hypertrophic, and malignant prostate tissue.
2. Measurement of serum PSA levels is not recommended as a screening procedure for the diagnosis of cancer because elevated PSA levels also are observed in patients with benign prostatic hypertrophy. However, studies suggest that the measurement of PSA in conjunction with digital rectal examination (DRE) and ultrasound provide a better method of detecting prostate cancer than DRE alone.
3. PSA levels increase in men with cancer of the prostate, and after radical prostatectomy PSA levels routinely fall to the undetectable range.
4. If prostatic tissue remains after surgery or metastasis has occurred, PSA appears to be useful in detecting residual and early recurrence of tumor.
5. Therefore, serial PSA levels can help determine the success of prostatectomy, and the need for further treatment, such as radiation, endocrine or chemotherapy, and in the monitoring of the effectiveness of therapy.

THYROID PROFILE - TOTAL ** , Serum

T3, Total (tri-iodothyronine)	103.00	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	8.20	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	1.400	μIU/mL	0.27 - 5.5	CLIA

Interpretation:

0.3-4.5	μIU/mL	First Trimester
0.5-4.6	μIU/mL	Second Trimester
0.8-5.2	μIU/mL	Third Trimester
0.5-8.9	μIU/mL	Adults 55-87 Years
0.7-27	μIU/mL	Premature 28-36 Week
2.3-13.2	μIU/mL	Cord Blood > 37Week
0.7-64	μIU/mL	Child(21 wk - 20 Yrs.)
1-39	μIU/mL	Child 0-4 Days
1.7-9.1	μIU/mL	Child 2-20 Week

1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.





CHANDAN DIAGNOSTIC CENTRE

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Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:45
Age/Gender	: 39 Y 8 M 8 D /M	Collected	: 14/Apr/2024 09:45:19
UHID/MR NO	: CHL2.0000160605	Received	: 14/Apr/2024 10:37:09
Visit ID	: CHL20014432425	Reported	: 14/Apr/2024 11:56:36
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD -	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.


Dr Vinod Ojha
MD Pathologist





CHANDAN DIAGNOSTIC CENTRE

Add: Godavari Complex, Near K.V.M Public School Heera Nagar, Haldwani
Ph: 7705023379,-
CIN : U85110DL2003PLC308206



Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:46
Age/Gender	: 39 Y 8 M 8 D /M	Collected	: N/A
UHID/MR NO	: CHL2.0000160605	Received	: N/A
Visit ID	: CHL20014432425	Reported	: 13/Apr/2024 11:52:53
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD -	Status	: Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

X-RAY DIGITAL CHEST PA *

(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

DIGITAL CHEST P-A VIEW:-

- Bilateral lung fields appear grossly unremarkable.
- Diaphragmatic shadows are normal on both sides.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Bilateral hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Soft tissue shadow appears normal.

IMPRESSION:-

No significant abnormality is seen.

Adv:-Clinico-pathological correlation.


DR AZIM ILYAS
(MD.RADIODIAGNOSIS)





CHANDAN DIAGNOSTIC CENTRE

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Ph: 7705023379,-
CIN : U85110DL2003PLC308206



Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:47
Age/Gender	: 39 Y 8 M 8 D /M	Collected	: N/A
UHID/MR NO	: CHL2.0000160605	Received	: N/A
Visit ID	: CHL20014432425	Reported	: 14/Apr/2024 11:09:46
Ref Doctor	: Dr.MEDIWHEEL ARCOFEMI HEALTH CARE LTD HLD -	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

WHOLE ABDOMEN ULTRASONOGRAPHY REPORT

LIVER

- The liver is normal in size (~13.7cms in longitudinal span) and **its echogenicity is homogeneously increased**. No focal lesion is seen. (Note: - Small isoechoic focal lesion cannot be ruled out).

PORTAL SYSTEM

- The intra hepatic portal channels are normal.
- Portal vein is not dilated.
- Porta hepatis is normal.

BILIARY SYSTEM

- The intra-hepatic biliary radicles are normal.
- Common bile duct is not dilated.
- The gall bladder is normal in size and has regular walls. Lumen of the gall bladder is anechoic.

PANCREAS

- The pancreas is normal in size and shape and has a normal homogenous echotexture. Pancreatic duct is not dilated.

KIDNEYS (Note- CT is more sensitive to detect renal calculi).

- **Right kidney:-**
 - Right kidney is normal in size.
 - Cortical echogenicity is normal.
 - Pelvicalyceal system is not dilated.
 - Cortico-medullary demarcation is maintained.
 - Parenchymal thickness appear normal.
- **Left kidney:-**
 - Left kidney is normal in size.
 - Cortical echogenicity is normal.
 - Pelvicalyceal system is not dilated.
 - Cortico-medullary demarcation is maintained.
 - Parenchymal thickness appear normal.

SPLEEN

- The spleen is normal in size and has a normal homogenous echo-texture.





CHANDAN DIAGNOSTIC CENTRE

Add: Godavari Complex, Near K.V.M Public School Heera Nagar, Haldwani
Ph: 7705023379,-
CIN : U85110DL2003PLC308206



Patient Name	: Mr.LALIT KANDPAL	Registered On	: 13/Apr/2024 09:57:47
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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE ABOVE 40 YRS

ILIAC FOSSAE & PERITONEUM

- Scan over the iliac fossae does not reveal any fluid collection or large mass.
- No free fluid is noted in peritoneal cavity.

URETERS

- The upper parts of both the ureters are normal.
- Bilateral vesicoureteric junctions are normal.

URINARY BLADDER

- The urinary bladder is normal. Bladder wall is normal in thickness and is regular.

PROSTATE

- The prostate gland is normal in size and normal in echotexture with smooth outline. No median lobe indentation is seen.

FINAL IMPRESSION:-

- ***Grade I fatty liver.***

Adv : Clinico-pathological & CT Abdomen correlation for further evaluation.

Note:-

- **This report is not for any legal purpose as the patient identity is not confirmed.**
- **In case of any typing error, patient is requested to immediately inform to the doctor (radiologist), as the report is digitally signed.**
- **Discrepancy of laterality/side can be seen in 0.08% cases therefore review is advised before any operative procedure.**


*** End Of Report ***

(**) Test Performed at CHANDAN DIAGNOSTIC CENTRE, HALDWANI-2

Result/s to Follow:

STOOL ROUTINE EXAMINATION, ECG / EKG, Tread Mill Test (TMT)




DR AZIM ILYAS
(MD RADIO DIAGNOSIS)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing *
365 Days Open *Facilities Available at Select Location

Page 15 of 15



Customer Care No.: +91-9918300637 E-mail: customercare.diagnostic@chandan.co.in Web: www.chandan.co.in

Home Sample Collection
1800-419-0002

Mar. 2018



भारत सरकार
Government of India



Download Date: 17/06/2020



ललित काण्डपाल
Lalit Kandpal
जन्म तिथि/DOB: 05/08/1984
पुरुष/ MALE

Issue Date: 20/11/2015

[Handwritten signature]

3151 2588 5925

VID : 9139 0776 7920 0307

मेरा आधार, मेरी पहचान



Since 1991



GENERAL PHYSICAL EXAMINATION

13/4/2024

NAME OF COMPANY... MEDIBUDDY DATE.....

CLIENT NAME... Lalit Kandpal s/o, d/o... Pooran chandra kandpal

DATE OF BIRTH... 5/8/1984 AGE... 39

ADDRESS... Kameri Bageshwar

PHONE NO... 9837 836500

PHOTO ID... Aadhar NO... 3151 2588 5925

HEIGHT... 1.65 cm WEIGHT... 72 kg BMI... 2.6 : 1

BLOOD PRESSURE... 102/70 PULSE RATE... 70/M Regular

EYE VISION R... N/6 L... N/6 COLOUR VISION... Normal

FINAL IMPRESSION:

Certified that I examined that Mr. Lalit kandpal s/o Pooran chandra is presently in good health and free from any cardio-respiratory/ communicable ailment and in my opinion, he is ~~not~~ fit to join any organization.

Dr. SUSHIL PANDEY
M.B.B.S
Reg. No.- UMC-5045
Chandan Diagnostic Center, Haldwani

Signature of Medical Examiner
Name & Qualification of the medical examiner



CHANDAN DIAGNOSTIC CENTRE

NAINATAL ROAD HALDWANI

MEDISEARCH, MEDIATE SYSTEMS

Computerised Stress Test Report

NAME: LALIT KANDPAL
AGE/GENDER: 32 yrs/MALE

ID: 014443
HEIGHT: 166 cm.

PROTOCOL: Bruce
WEIGHT: 72 Kg.

Summary report
DATE/TIME: 13/04/2024 19:15

REF. BY: MEDI WHEEL
SMOKER: Smoker

Test Results

Protocol	: Bruce	Max Work load	13.98	BMI	: 26
Target HR	: 188 (160) bpm	Exer. Time	: 12:30min	Max RPP (1000)	: 27.566
Maximum HR	: 179 (95 %) bpm	Recov. Time	: 3:6min	Max BP	: 154/92 mmHg

Reason for termination :
Target heart rate achieved

Functional Capacity :

HR Response to Exercise :
Normal appropriate response

BP Response to Exercise :
Resting normal BP - normal response

Overall Impression :

Comment : TMT IS NEGATIVE FOR EXERCISE INDUCIBLE ISCHAEMIA.

Resting ECG :

Chest Pain :
None

ST Changes :

Arrhythmias :
None

History :

Medication :

Dr. DANISH HASAN (D.M. CARDIOLOGIST)
Dr. GEETA ULRANI (M.B.B.S., PGDC)

Dr. MUKUL MISHRA (D.M. CARDIOLOGIST)
Dr. RITESH KUMAR PANDEY (D.M. CARDIOLOGIST)

Chandan Diagnostic Centre
Plot No.-1051, Near Chauchary Kuth
Nainital Road HALDWANI
Cont. No.- 9235400975

CHANDAN DIAGNOSTIC CENTRE

NAINATAL ROAD HALDWANI

MEDISEARCH, MEDIACT SYSTEMS

Computerised Stress Test Report

NAME: LALIT KANDPAL
AGE/GENDER: 32 yrs/MALE

ID: 014443
HEIGHT: 166 cm.

PROTOCOL: Bruce
WEIGHT: 72 Kg.

Summary report
DATE/TIME: 13/04/2024 19:15

REF. BY: MEDI WHEEL
SMOKER: Smoker

Stage	Time	HR bpm	BP mmHg	Speed(mph)/Gr	Load	RPP	II	V2	V5
	Min:Sec			ade(%)	METS	1000			
Supine	00:18	80	118/72	0.00/0.0	1.0	9.44	2.5/1.3	4.1/3.4	1.9/0.9
Standing	00:18	85	118/72	0.00/0.0	1.0	10.03	2.7/0.9	3.8/3.1	1.8/0.5
HyperV	00:18	88	118/72	0.00/0.0	1.0	10.384	2.9/1.2	4.1/3.2	1.9/0.7
Exer : 1/7	03:00	108	126/84	1.70/10.0	4.5	13.608	1.6/-1.3	3.1/4.2	1.3/-0.5
Exer : 2/7	03:00	120	134/88	2.50/12.0	7.0	16.08	1.3/1.1	3.1/3.3	1.1/0.9
Exer : 3/7	03:00	138	146/90	3.40/14.0	10.1	20.148	0.3/0.7	1.9/3.2	0.2/1.1
Exer : 4/7	03:00	165	154/92	4.20/16.0	13.4	25.41	-0.5/1.3	2.7/4.4	-0.3/1.3
Exer : 5/7	00:30	178	154/92	5.00/18.0	14.0	27.412	-0.5/1.9	5.7/6.8	-0.5/1.2
Peak	12:30	179	154/92	5.00/18.0	14.0	27.566	-2.2/1.2	2.9/4.0	-1.3/0.8
Recovery	01:00	138	154/92	0.00/0.0	1.0	21.252	2.4/3.3	7.1/7.3	1.9/2.5
Recovery	02:00	120	146/86	0.00/0.0	1.0	17.52	1.5/1.9	3.2/3.1	1.1/1.6
Recovery	03:00	112	140/82	0.00/0.0	1.0	15.68	0.5/0.1	1.2/1.9	0.2/0.3
Recovery	03:06	111	140/82	0.00/0.0	1.0	15.54	0.6/0.7	1.7/1.5	0.4/0.7

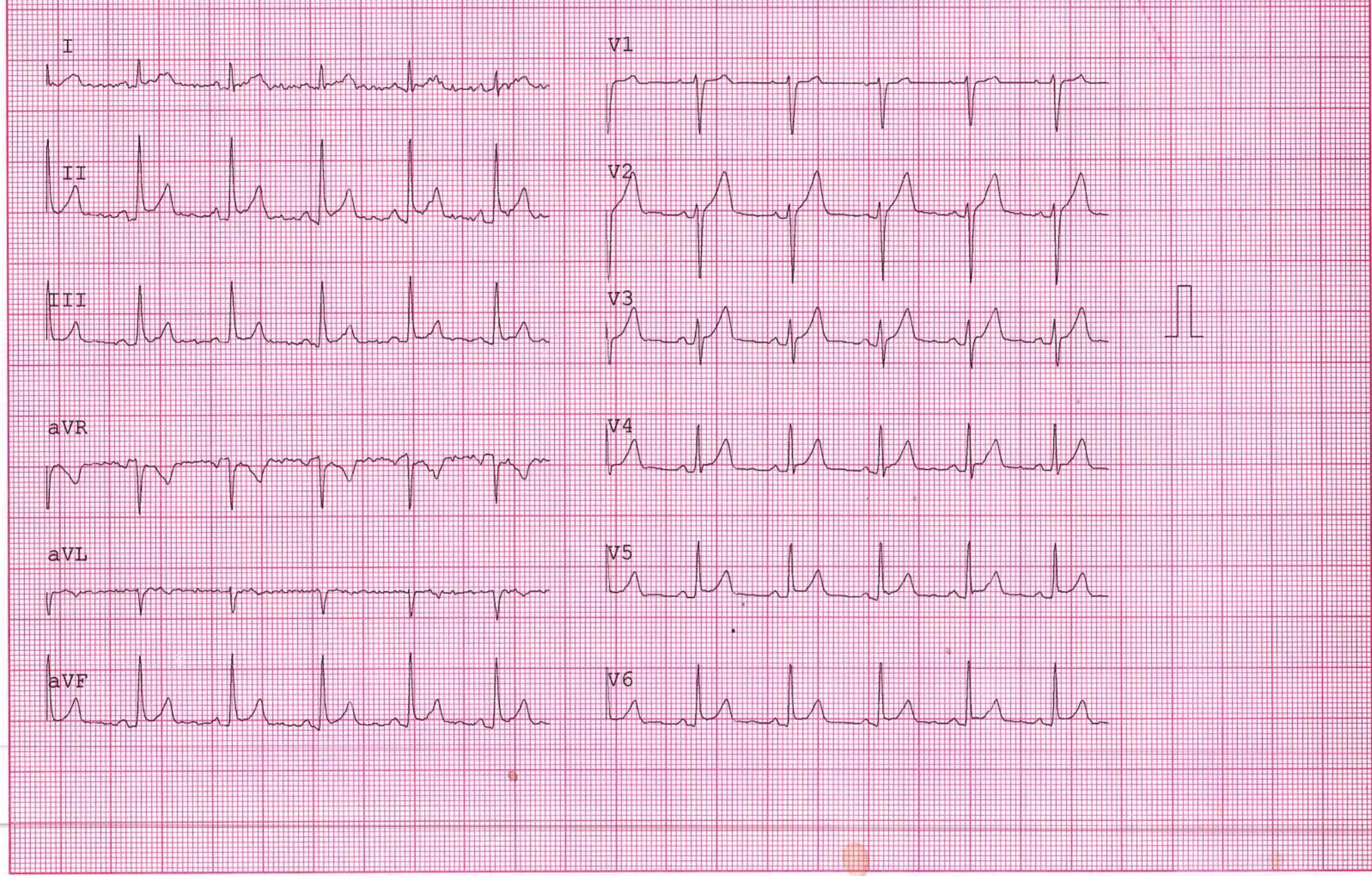
CHANDAN DIAGNOSTIC CENTRE

MEDISEARCH, MEDIACT SYSTEMS

NAINATAL ROAD HALDWANI

NAME : LALIT KANDPAL ID: 014443
AGE/GENDER: 32/MALE BP: 118/ 72 mmHg
DATE/TIME : 13/Apr/2024(19:15) HR: 80 bpm

PROTOCOL : Bruce 12 Lead ECG Report ST @ 10 mm/mV
STAGE NAME: Supine SPEED/GRADE: 0.0/0.0 STL in mm
STAGE TIME: 00:18 PostJ 80 STS in mm/sec



CHANDAN DIAGNOSTIC CENTRE

MEDISEARCH, MEDIATE SYSTEMS

NAINATAL ROAD HALDWANI

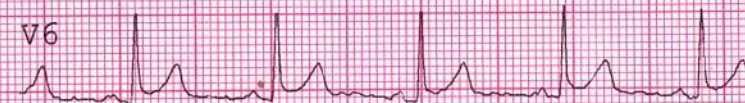
NAME : LALIT KANDPAL
AGE/GENDER: 32/MALE
DATE/TIME : 13/Apr/2024(19:15)

ID: 014443
BP: 118/ 72 mmHg
HR: 85 bpm

PROTOCOL : Bruce
STAGE NAME: Standing
STAGE TIME: 00:18

12 Lead ECG Report
SPEED/GRADE: 0.0/0.0
PostJ 80

ST @ 10 mm/mV
STL in mm
STS in mm/sec



CHANDAN DIAGNOSTIC CENTRE

MEDISEARCH, MEDIATE SYSTEMS

NAINATAL ROAD HALDWANI

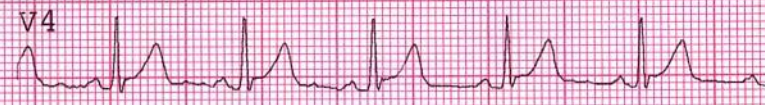
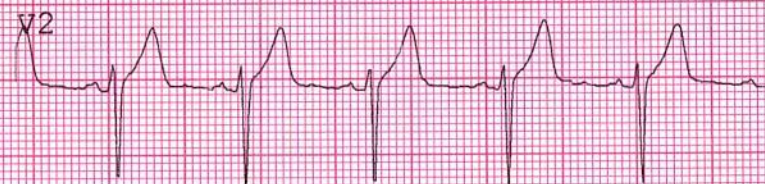
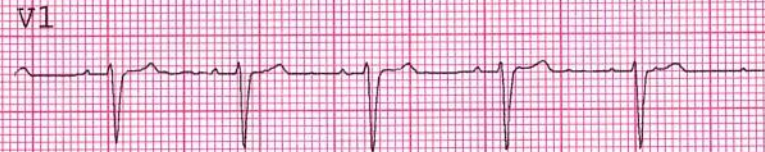
NAME : LALIT KANDPAL
AGE/GENDER: 32/MALE
DATE/TIME : 13/Apr/2024(19:15)

ID: 014443
BP: 118/ 72 mmHg
HR: 86 bpm

PROTOCOL : Bruce
STAGE NAME: HyperV
STAGE TIME: 00:12

12 Lead ECG Report
SPEED/GRADE: 0.0/0.0
PostJ 80

ST @ 10 mm/mV
STL in mm
STS in mm/sec



CHANDAN DIAGNOSTIC CENTRE

MEDISEARCH, MEDIATE SYSTEMS

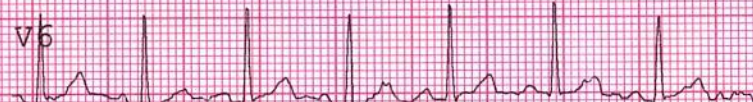
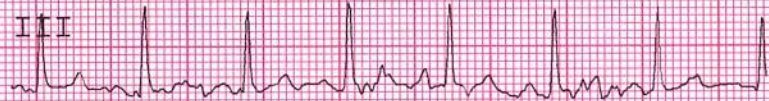
NAINATAL ROAD HALDWANI

NAME : LALIT KANDPAL
AGE/GENDER: 32/MALE
DATE/TIME : 13/Apr/2024 (19:15)

ID: 014443
BP: 126/ 84 mmHg
HR: 108 bpm

PROTOCOL : Bruce 12 Lead ECG Report
STAGE NAME: Exer : 1/7 SPEED/GRADE: 2.7/10.0
STAGE TIME: 03:00 PostJ 80

ST @ 10 mm/mV
STL in mm
STS in mm/sec



CHANDAN DIAGNOSTIC CENTRE

MEDISEARCH, MEDIATE SYSTEMS

NAINATAL ROAD HALDWANI

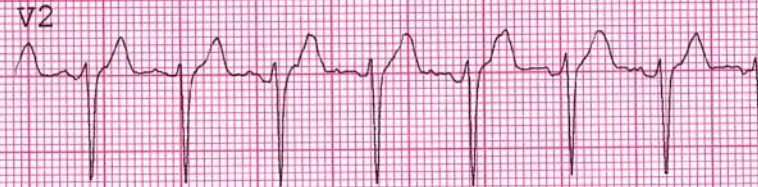
NAME : LALIT KANDPAL
AGE/GENDER: 32/MALE
DATE/TIME : 13/Apr/2024 (19:15)

ID: 014443
BP: 134/ 88 mmHg
HR: 120 bpm

PROTOCOL : Bruce
STAGE NAME: Exer : 2/7
STAGE TIME: 03:00

12 Lead ECG Report
SPEED/GRADE: 4.0/12.0
PostJ 80

ST @ 10 mm/mV
STL in mm
STS in mm/sec



CHANDAN DIAGNOSTIC CENTRE

MEDISEARCH, MEDIACT SYSTEMS

NAINATAL ROAD HALDWANI

NAME : LALIT KANDPAL
AGE/GENDER: 32/MALE
DATE/TIME : 13/Apr/2024(19:15)

ID: 014443
BP: 146/ 90 mmHg
HR: 138 bpm

PROTOCOL : Bruce
STAGE NAME: Exer : 3/7
STAGE TIME: 03:00

12 Lead ECG Report
SPEED/GRADE: 5.5/14.0
PostJ 80

ST @ 10 mm/mV
STL in mm
STs in mm/sec



CHANDAN DIAGNOSTIC CENTRE

MEDISEARCH, MEDIATE SYSTEMS

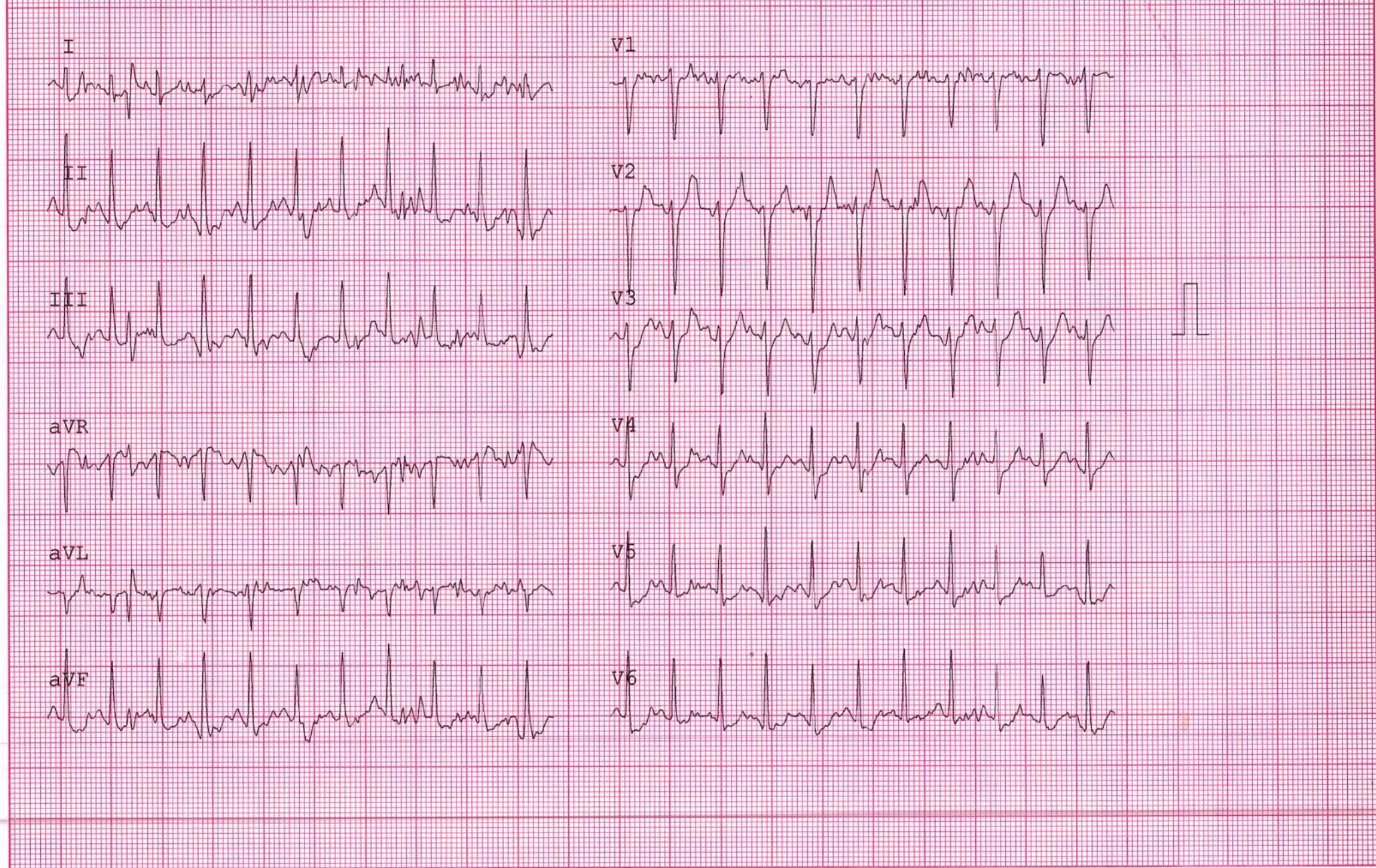
NAINATAL ROAD HALDWANI

NAME : LALIT KANDPAL
AGE/GENDER: 32/MALE
DATE/TIME : 13/Apr/2024(19:15)

ID: 014443
BP:154/ 92 mmHg
HR:165 bpm

PROTOCOL : Bruce 12 Lead ECG Report
STAGE NAME: Exer : 4/7 SPEED/GRADE: 6.8/16.0
STAGE TIME: 03:00 PostJ 80

ST @ 10 mm/mV
STL in mm
STS in mm/sec



CHANDAN DIAGNOSTIC CENTRE

MEDISEARCH, MEDIACT SYSTEMS

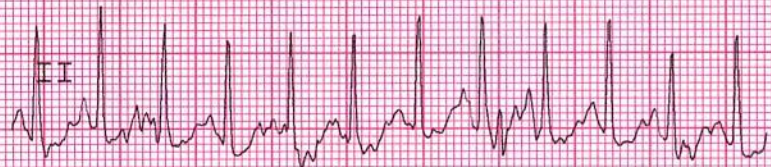
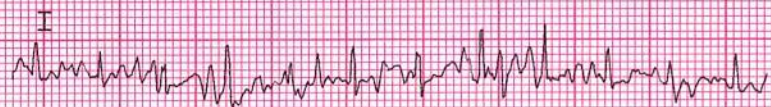
NAINATAL ROAD HALDWANI

NAME : LALIT KANDPAL
AGE/GENDER: 32/MALE
DATE/TIME : 13/Apr/2024(19:15)

ID: 014443
BP:154/ 92 mmHg
HR:178 bpm

PROTOCOL : Bruce 12 Lead ECG Report
STAGE NAME: Exer : 5/7 SPEED/GRADE: 8.0/18.0
STAGE TIME: 00:30 PostJ 80

ST @ 10 mm/mV
STL in mm
STS in mm/sec



CHANDAN DIAGNOSTIC CENTRE

MEDISEARCH, MEDIAC SYSTEMS

NAINATAL ROAD HALDWANI

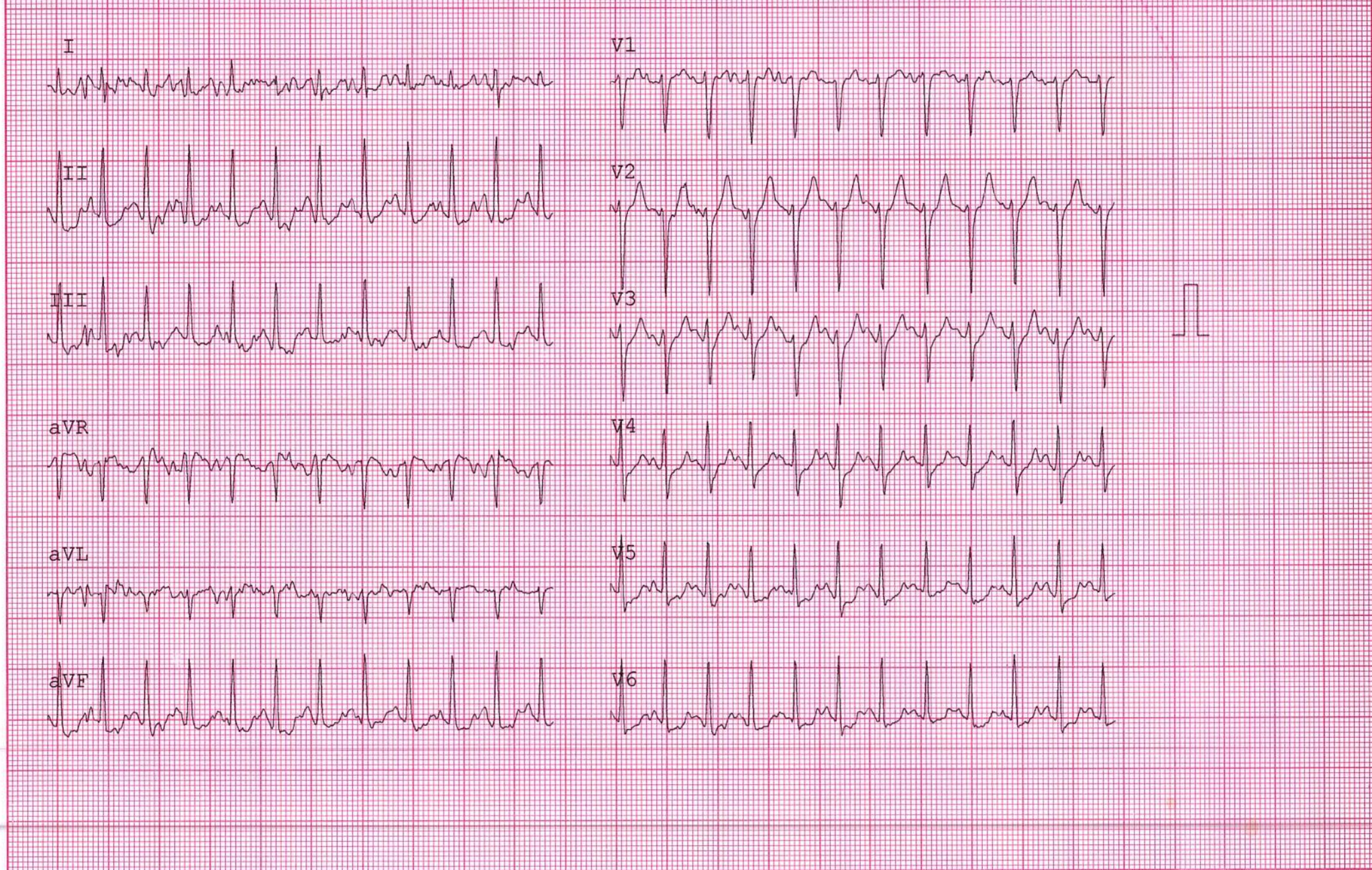
NAME : LALIT KANDPAL
AGE/GENDER: 32/MALE
DATE/TIME : 13/Apr/2024 (19:15)

ID: 014443
BP: 154/ 92 mmHg
HR: 179 bpm

PROTOCOL : Bruce
STAGE NAME: Peak
STAGE TIME: 00:06

12 Lead ECG Report
SPEED/GRADE: 8.0/18.0
PostJ 80

ST @ 10 mm/mV
STL in mm
STS in mm/sec



CHANDAN DIAGNOSTIC CENTRE

MEDISEARCH, MEDIACT SYSTEMS

NAINATAL ROAD HALDWANI

NAME : LALIT KANDPAL
AGE/GENDER: 32/MALE
DATE/TIME : 13/Apr/2024 (19:15)

ID: 014443
BP: 154/ 92 mmHg
HR: 138 bpm

PROTOCOL : Bruce
STAGE NAME: Recovery
STAGE TIME: 01:00

12 Lead ECG Report
SPEED/GRADE: 0.0/0.0
PostJ 80

ST @ 10 mm/mV
STL in mm
STS in mm/sec



CHANDAN DIAGNOSTIC CENTRE

MEDISEARCH, MEDIACT SYSTEMS

NAINATAL ROAD HALDWANI

NAME : LALIT KANDPAL
AGE/GENDER: 32/MALE
DATE/TIME : 13/Apr/2024(19:15)

ID: 014443
BP:146/ 86 mmHg
HR:120 bpm

PROTOCOL : Bruce
STAGE NAME: Recovery
STAGE TIME: 02:00

12 Lead ECG Report
SPEED/GRADE: 0.0/0.0
PostJ 80

ST @ 10 mm/mV
STL in mm
STs in mm/sec



CHANDAN DIAGNOSTIC CENTRE

MEDISEARCH, MEDIACT SYSTEMS

NAINATAL ROAD HALDWANI

NAME : LALIT KANDPAL
AGE/GENDER: 32/MALE
DATE/TIME : 13/Apr/2024(19:15)

ID: 014443
BP:140/ 82 mmHg
HR:112 bpm

PROTOCOL : Bruce
STAGE NAME: Recovery
STAGE TIME: 03:00

12 Lead ECG Report
SPEED/GRADE: 0.0/0.0
PostJ 80

ST @ 10 mm/mV
STL in mm
STS in mm/sec

