



### OP Slip

UHID No :- UD-232415566

OP No

:- OP-232437825

OP Date :- 13 Jan 2024

11:03AM -

Pt. Name :- Mr BIR BHAN

SHARMA

Age/Sex :- 52 Y/Male

Mob. No :- 9992328090

Pay Type :- Cash

Token No :- NOR. - 24

:- 0.00 Paid

Deptt.

:- GENERAL MEDICINE

Consultant :- Dr ANURAG KAUSHAL (MD)

:- 4012 E BLOCK, ANSAL SUSHANT CITY, SECTOR 32, ,KURUKSHETRA

**Present Complaints:** 

Past/Family History:

Drug Allergy (If any):

Examination (Vitals):

Temp:

Weight: \_

Height:

Investigations:

Right > 149/90 m/g lebd > 130/82 m/g

Next Follow-up:

Diagnosis:

Treatment/Preventive Care/Nutrition Advised:

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That Ato-Alp For w

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De us Sud only

Dr. Anurag Kaushai MD(Medicine)INTENSIVIST 1504-HCMS

**Doctor Signatures:** 

Out Time:

Nutritional Screening: 🛘 Wt. Loss 🗎 Loss of Appetite 🗎 Muscle Wasting 👚 🗎 Delay Wound Healing 🗎 Lethargy 🗀 Decrease Mobility

# Pain Scale























OPD Timing: 10:00 AM - 6:00 PM (Sunday Closed)

Shri Balaji Aarogyam Hospital Pvt.Ltd. Behind Old Bus Stand, Kurukshetra

For Appointment : 99926-30762, 01744 270255





# SHRI BALAJI AAROGYAM HOSPITAL

### **KURUKSHETRA**

# **Patient Demographics**

BIR BHAN SHARMA 52/Y

Patient ID: 23240020091

Gender: M

Performed By: DR RISHABH MARWAH

1/3

### Comments

NORMAL CHAMBER DIMENSIONS

IAS/IVS INTACT

AORTIC ROOT/MPA NORMAL

NORMAL VALVE MORPHOLOGY

NO SIGNIFICANT REGURGITATION / MILD AR MILOTR

NO RWMA

NORMAL SYSTOLIC FUNCTION

NORMAL DIASTOLIC FUNCTION

NO CLOT/VEG/PE

IVC- NORMAL

### **Adult Echo: Measurements and Calculations**

2D

LV Mass (Cubed)	180 g	LA/Ao (2D)	120	
LA Dimen (2D)	3.0 cm	AoR Diam (2D)	25 cm	
MMode				

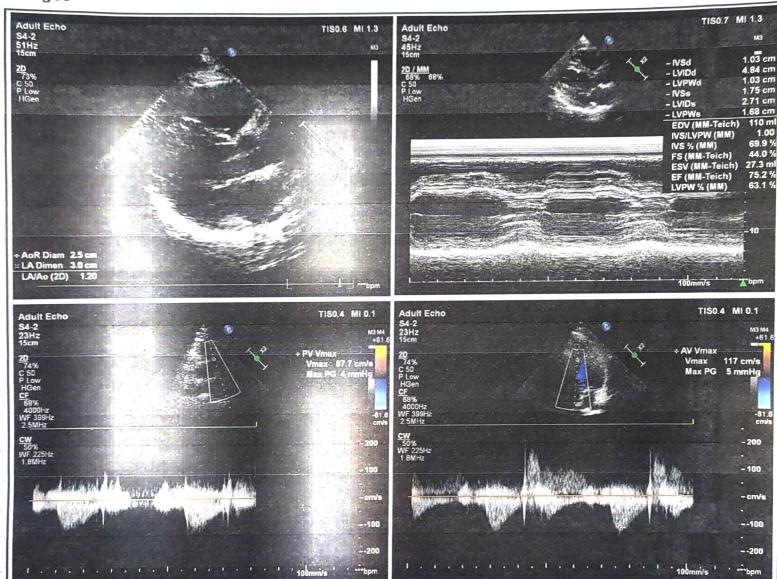
#### MMode

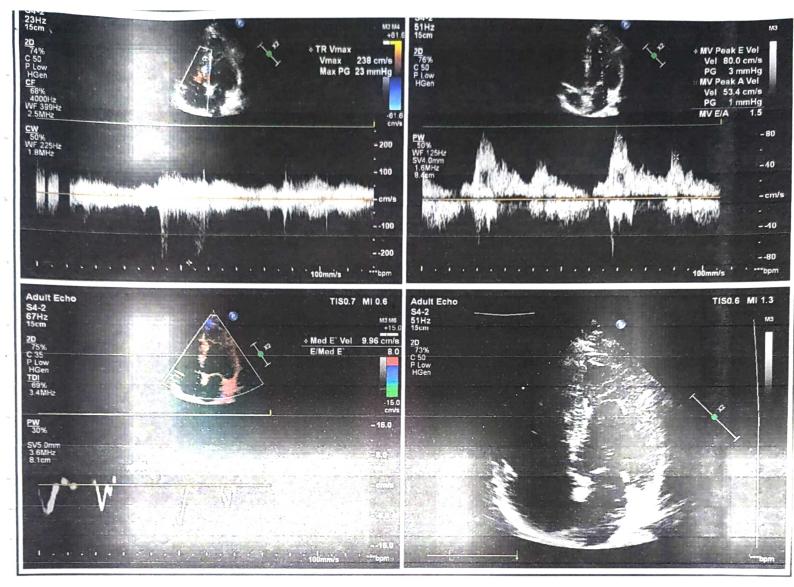
	MINIOUC					
Г	IVSd (MM)	1.03 cm	EDV (MM-Teich)	110 ml	SV (MM-Cubed)	93.1 ml
1	LVIDd (MM)	4.84 cm	ESV (MM-Teich)	27.3 ml	EF (MM-Cubed)	82.4 %
١	LVPWd (MM)	1.03 cm	SV (MM-Teich)	82.7 ml	FS (MM-Cubed)	44.0 %
١	IVSs (MM)	1.75 cm	FS (MM-Teich)	44.0 %	IVS % (MM)	69.9 %
1	LVIDs (MM)	2.71 cm	EF (MM-Teich)	75.2 %	LVPW % (MM)	63.1 %
١	LVPWs (MM)	1.68 cm	EDV (MM-Cubed)	113 ml		
1	IVS/LVPW (MM)	1.00	ESV (MM-Cubed)	19.9 ml		

BIR BHAN SHARMA 52/Y 23240020091 23/12/2023 Created: 05:13PM 23/12/2023

AV Vmax Max PG Vmax	5 mmHg 117 cm/s	MV E/A	15	TR Vmax Max PG Vmax	23 mmHg 238 cm/s
MV Peak E Vel Vel PG	80.0 cm/s 3 mmHg	Med E`Vel	9.96 cm/s	PV Vmax Max PG Vmax	4 mmHg 97.7 cm/s
MV Peak A Vel Vel PG	53.4 cm/s 1 mmHa	E/Med E`	8.0		

# **Images**





Signature

Signature: Name(Print):

OT PASHABH MARWAH

OT PASHABH MARWAH

OT PASHABH MARWAH

OT PASHABH MARWAH

Cardiology

Consultant Interventional

Consultant Interventional

Cardiology

Shri Bala Ji Aarogyam Hospital;

Reg. No. HN8708

Reg. No. HN8708

Date: 23-12-23.



# AAROGYAM HOSPITAL PVT. LTD



Regd. off.: BEHIND OLD BUS STAND, KURUKSHETRA

E-mail: aarogyamkkr@gmail.com CIN: U93000HR2018PTC074193

			Typed by: Kaj
Patient Name	MR. BIR BHAN SHARMA	Age/Sex	52 Y / MALE
Referred By:	SELF	Date	23.12.2023
		AND THE PARTY OF T	

## USG WHOLE ABDOMEN

LIVER:-Is normal in size measuring 13.0 cm and is mildly coarse in echotexture with normal outline. No focal lesion is seen in the liver parenchyma. IHBR's are not dilated. The PV is normal.

**GALL BLADDER:** - normal in size and distensibility. The wall thickness is normal. No evidence of any peri-cholecystic collection is seen. No evidence of calculus is seen.

CBD is normal in course and caliber.

PANCREAS:-Head and proximal body of pancreas is normal in outline and echotexture. Rest of the pancreas obscured by bowel shadows.

**SPLEEN:** - is normal in size measuring 8.7 cm and echotexture. No focal lesion is seen.

**RIGHT KIDNEY:**-It is normal in size measuring  $9.0 \times 4.5 \text{ cm}$ , normal in position and echotexture. CMD is maintained. The pelvi-calyceal system is compact. No evidence of calculus or hydronephrosis is seen.

**LEFT KIDNEY:-**It is normal in size measuring 9.2 x 4.7 cm, normal in position and echotexture. CMD is maintained. The pelvi-calyceal system is compact. No evidence of calculus or hydronephrosis is seen.

URINARY BLADDER:-Is partially distended and is normal in size and capacity. No calculus is seen in its lumen. The wall thickness is within normal limits.

**PROSTATE:** - is normal in size. Echotexture is normal. No free fluid is seen in abdomen and pelvis. No evidence of any mesenteric lymphadenopathy noted. Visualized bowel loops appear unremarkable.

IMPRESSION:

MILD COARSELY CORRELATION).
Please Correlate Clinically. **ECHOTEXTURED** 

LIVER

(SUGGESTED:

LFT

DR.ISHA GOYAL,
DMRD (CMC LUDHIANA)
Ex. Fortis Hospital Ludhiana
Consultant Radiologist

Not valid for Medico Legal Purposes. Advised further clinical correlations.



















### INSIDE SHRI BALAJI AAROGYAM HOSPITAL Pvt. Ltd. BEHIND OLD BUS STAND, KURUKSHETRA

E-mail: aarogyamkkr@gmail.com

UHID No

:- UD-232415566

Reg No

:- 232415566

Print Date: 23-Dec-2023 01:52 PM

**Receipt No** 

:- 23240020091

Receipt Date :- 23 Dec 2023

Age/Sex :- 52 Y/M

**Patient Name Mobile No** 

:- Mr BIR BHAN **SHARMA** 

**Father** 

:- BASHESHAR DASS SHARMA

:- 9992328090

Consultant :- Dr ANURAG KAUSHAL (MD)

Address

:- 4012 E BLOCK, ANSAL SUSHANT CITY, SECTOR 32, ,

**KURUKSHETRA** 

### **Final Report**

Investigations	Observations	Biological Reference Interval	Unit

Sample No:232438321

Sample Gnt At: (23 Dec 2023 11:51 AM) ,Sample Rvd At (23 Dec 2023 11:51 AM),Report Gnt At: (23 Dec 2023 1:52 PM)

#### **HAEMATOLOGY**

HAEMATOLOGY			
CBC			
WBC	7.74	4.00 - 11.00	10*3/mm3
RBC Methology / Carm	5.92	4.00 - 5.50	million/cumm
HAEMOGLOBIN	15.6	13.00 - 16.00	gm/dl
HCT DefaultMethodTwo / test Machine	49.2	35.00 - 50.00	%
MCV(MEAN CELL VOLUME)	83.11	83.00 - 101.00	fl
MCH(MEAN CELL HAEMOGLOBIN)	26.35	27.00 - 32.00	pg
MCHC	31.71	31.50 - 35.00	gm%
RDW-CV Method1 / test Machine	11.9	12.00 - 18.00	%
RDW-SD	41.4	37.00 - 56.00	fl
MIC Methology / test Machine	3.6	0.00 - 20.00	%
MAC	3.7	2.00 - 10.00	%
PLATELETS	312	150.00 - 450.00	$\times 10^{3}/\mu L$
MPV	8.1	7.40 - 11.00	fl
PCT Test Method	0.25	0.15 - 0.40	%
PDW	8.3	11.00 - 20.00	fL
P-LCC	50	44.00 - 140.00	10*/mm*3
P-LCR	16.04	18.00 - 50.00	%
DLC DIFFERENTIAL LEUCOCYTE COUNT			
NEUTROPHILS	46.4	40.00 - 75.00	%
LYMPHOCYTES	39.6	20.00 - 45.00	%
MONOCYTES	8.9	2.00 - 10.00	%
EOSINOPHILS	4.8	1.00 - 6.00	%
BASOPHILS	0.3	0.00 - 1.00	%

Remarks :-

Sample No:232438322

(Technologist)

Chane Dr. Charu Sethi Sharma

Seth

Not valid for Medico Legal Purposes. Advised further clinical correlation PD-Pathology Reg. No. HN-19861

Page 1 of 3





### INSIDE SHRI BALAJI AAROGYAM HOSPITAL Pvt. Ltd. BEHIND OLD BUS STAND, KURUKSHETRA

E-mail: aarogyamkkr@gmail.com

UHID No

:- UD-232415566

Reg No

:- 232415566

Print Date: 23-Dec-2023 01:52 PM

**Receipt No** 

:- 23240020091

Receipt Date :- 23 Dec 2023

**Patient Name** 

:- Mr BIR BHAN **SHARMA** 

**Father** 

:- BASHESHAR DASS **SHARMA** 

**Age/Sex :-** 52 Y/M

LDL

:- 9992328090

Consultant :- Dr ANURAG KAUSHAL (MD)

0.00 - 100.00

0.00 - 35.00

0.70 - 1.40

57.00 - 111.00

2.50 - 6.00

3.50 - 5.00

**Mobile No** Address

:- 4012 E BLOCK, ANSAL SUSHANT CITY, SECTOR 32, ,

KURUKSHETRA

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Investigations	Observations	Biological Reference Interval	Unit
Sample Gnt At: (23 Dec 2023 11:52 AM) ,Sample Rvd At	t (23 Dec 2023 11:5	52 AM ), <b>Report Gnt At :</b> ( 23 Dec 20	23 1:49 PM)
BIOCHEMISTRY			
COMPLETE LIPID PROFILE			
TOTAL CHOLESTROL	210	120.00 - 200.00	mg/dl
TRIGLYCERIDES	172	35.00 - 160.00	mg/dl
HDL	49	30.00 - 70.00	mg/dl

126.60

34.40

1.2

0.80

96

22

5.2

4.0

VLDL CHOLESTEROL CREATININE

**BILIRUBIN TOTAL (SBAH) ALKALINE PHOSPHATE** 

GGT (SBAH) **HAEMATOLOGY** 

SERUM URIC ACID **SEROLOGY** 

**ALBUMIN** 

Remarks :-Sample No:232438323

Sample Gnt At: (23 Dec 2023 11:52 AM) ,Sample Rvd At (23 Dec 2023 11:52 AM),Report Gnt At: (23 Dec 2023 1:52 PM)

**BIOCHEMISTRY** 

TOTAL PROTEIN (M.L-)

7.5

0

mg/dl

mg/dL

mg/dl

0

U/L

0

mq/dl

am/dl

Remarks :-

Sample No:232438324

Sample Gnt At: (23 Dec 2023 11:52 AM) ,Sample Rvd At (23 Dec 2023 11:52 AM ),Report Gnt At: (23 Dec 2023 1:52 PM)

**HAEMATOLOGY** 

**ESR** 

08

0.00 - 15.00

mm at 1 hr

Remarks :-

Sample No:232438325

Sample Gnt At: (23 Dec 2023 11:52 AM) ,Sample Rvd At (23 Dec 2023 11:52 AM ),Report Gnt At: (23 Dec 2023 1:52 PM)

(Technologist)

Chane Seth

Dr. Charu Sethi Sharma Not valid for Medico Legal Purposes. Advised further clinical correlation PD-Pathology Reg. No. HN-19861

Page 2 of 3





# INSIDE SHRI BALAJI AAROGYAM HOSPITAL Pvt. Ltd. BEHIND OLD BUS STAND, KURUKSHETRA

E-mail: aarogyamkkr@gmail.com

**UHID No** 

:- UD-232415566

:- 232415566

Print Date: 23-Dec-2023 01:52 PM

**Receipt No** 

:- 23240020091

Receipt Date :- 23 Dec 2023

Age/Sex :- 52 Y/M

**Patient Name** 

:- Mr BIR BHAN SHARMA

**Father** 

:- BASHESHAR DASS **SHARMA** 

**Mobile No** 

:- 9992328090

Consultant :- Dr ANURAG KAUSHAL (MD)

**Address** 

:- 4012 E BLOCK, ANSAL SUSHANT CITY, SECTOR 32, ,

KURUKSHETRA

### **Final Report**

Investigations	Observations	Biological Reference Interval	Unit
URINE EXAMINATION URINE ROUTINE			
PHYSICAL EXAMINATION			
COLOUR Methology	YELLOW	CLEAR YELLOW	
VOLUME	25		ML
SPECIFIC GRAVITY	1.02	1.00 - 1.03	
CHEMICAL EXAMINATION			
PH	6.0	4.60 - 8.00	
PROTEIN.	Negative	NEGATIVE	
GLUCOSE	Negative	NEGATIVE	
KETONE	Negative	NEGATIVE	
MICROSCOPIC EXAMINATION			
EPIITHELIAL CELLS	Negative		
PUS CELLS	2-4	2.00 - 3.00	/HPF
RBC Methology / Carm	Negative	4.00 - 5.50	million/cumm
CRYSTALS	Negative	ABSENT	
BACTERIA	Negative	ABSENT	
OTHERS	Negative		
MICROSCOPIC EXAMINATION			
CASTS	Negative	ABSENT	
AMORPHOUS DEPOSITS	Negative		

Remarks:-

Type of Sample :- SERUM, WHOLE BLOOD, URINE SPOT,

\* END OF REPORT \*

(Technologist)

Seth Dr. Charu Sethi Sharma

Not valid for Medico Legal Purposes. Advised further clinical correlation PD-Pathology Reg. No. HN-19861





### INSIDE SHRI BALAJI AAROGYAM HOSPITAL Pvt. Ltd. BEHIND OLD BUS STAND, KURUKSHETRA

E-mail: aarogyamkkr@gmail.com

**UHID No** 

:- UD-232415566

Reg No

:- 232415566

Print Date: 23-Dec-2023 01:53 PM

**Receipt No** 

:- 23240020100

Receipt Date :- 23 Dec 2023

Age/Sex :- 52 Y/M

**Patient Name** 

:- Mr BIR BHAN SHARMA :- 9992328090

**Father** 

:- BASHESHAR DASS **SHARMA** 

Consultant :- Dr ANURAG KAUSHAL (MD)

**Mobile No Address** 

:- 4012 E BLOCK, ANSAL SUSHANT CITY, SECTOR 32, ,

KURUKSHETRA

### **Final Report**

Investigations	Observations	Biological Reference Interval	Hall
Investigations	Observations	biological Reference Interval	Chile

Sample No:232438333

Sample Gnt At: (23 Dec 2023 12:37 PM) ,Sample Rvd At (23 Dec 2023 12:37 PM),Report Gnt At: ( 23 Dec 2023 1:53 PM)

**BIOCHEMISTRY** 

**BLOOD SUGAR FASTING & PP** 

**BLOOD SUGAR FASTING** 

94

70.00 - 110.00

mg/dl

**BLOOD SUGAR PP** 

110

70.00 - 150.00

mg/dl

Remarks :-

Type of Sample: - SERUM,

\* END OF REPORT \*

(Technologist)

Seth

Dr. Charu Sethi Sharma Not valid for Medico Legal Purposes. Advised further clinical correlation AD-Pathology Reg. No. HN-19861

Page 1 of 1



Regd. Office: Dr Lal PathLabs Ltd, Block-E, Sector-18, Rohini, New Delhi-110085 Web: www.lalpathlabs.com, CIN: L74899DL1995PLC065388

Name

: Mr. BIR BHAN

Lab No.

: 458647527

Ref By

: SHRI BALAJI AAROGYAM HOSPITAL

Collected: 23/12/2023 1:17:00PM A/c Status

Collected at : SHRI BALAJI AAROGYAM HOSPITAL

C/O Aarogyam Hospital, Behind Old Bus Stand

Thanesar, Kurukshetra-136118

Age

: 48 Years

Gender

: Male

Reported

: 24/12/2023 7:20:04AM

Report Status : Final

Processed at

: Dr. Lal PathLabs Ltd.

Kurukshetra-136118, Haryana

### **Test Report**

Test Name	Results	Units	Bio. Ref. Interval
HbA1c (GLYCOSYLATED HEMOGLOBIN), BLC (HPLC)	OOD		
HbA1c	5.4	%	4.00 - 5.60
Estimated average glucose (eAG)	108	mg/dL	
Estimated average glassise (e/10)			

### Interpretation

HbA1c result is suggestive of non diabetic adults (>=18 years)/ well controlled Diabetes in a known Diabetic Interpretation as per American Diabetes Association (ADA) Guidelines

Reference Group	Non diabetic adults >=18 years	At risk   (Prediabetes)	Diagnosing   Diabetes	Therapeutic goals   for glycemic control	
HbA1c in %	4.0-5.6	5.7-6.4	>= 6.5	<7.0	

Note: Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1C result does not correlate with the patient's blood glucose levels.

FACTORS THAT INTERFERE WITH HbalC	
MEASUREM	
Hemoglobin variants, elevated fetal hemoglobin (HbF) and chemically modified derivatives of hemoglobin (e.g. carbamylated Hb in patients with renal failure) can affect the accuracy of HbAlc measurements   Any condition that shortens erythrocyte   survival or decreases mean erythrocyte   age (e.g., recovery from acute blood los   hemolytic anemia, HbSS, HbCC, and HbSC)   will falsely lower HbAlc test results   regardless of the assay method used.Iro   deficiency anemia is associated with   higher HbAlc	





Regd. Office: Dr Lal PathLabs Ltd, Block-E, Sector-18, Rohini, New Delhi-110085 Web: www.lalpathlabs.com, CIN: L74899DL1995PLC065388

Name

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Lab No.

: 458647527

Ref By

: SHRI BALAJI AAROGYAM HOSPITAL

Collected

: 23/12/2023 1:17:00PM

A/c Status

Collected at : SHRI BALAJI AAROGYAM HOSPITAL

C/O Aarogyam Hospital, Behind Old Bus Stand

Thanesar, Kurukshetra-136118

Age

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: Male

Reported

: 24/12/2023 7:20:04AM

Report Status : Final

Processed at

: Dr. Lal PathLabs Ltd.

Kurukshetra-136118, Haryana

#### **Test Report**

Results	Units	Bio. Ref. Interval
1.48	ng/mL	0.80 - 2.00
11.03	μg/dL	5.10 - 14.10
1.62	μIU/mL	0.27 - 4.20
	1.48 11.03	1.48 ng/mL 11.03 μg/dL

#### 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. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy.
- 3. Unbound fraction (Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration
- 4. Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals

### **BLOOD GROUP, ABO & RH TYPING**

(Tube & Slide Agglutination)

ABO Group

AR

Rh Factor

Positive

- 1. Both forward and reverse grouping performed
- 2. Test conducted on EDTA whole blood



Page 2 of 4



Regd. Office: Dr Lai PathLabs Ltd, Block-E, Sector-18, Rohini, New Delhi-110085 Web: www.laipathlabs.com, CIN: L74899DL1995PLC065388

Name

: Mr. BIR BHAN

Lab No.

: 458647527

Ref By

: SHRI BALAJI AAROGYAM HOSPITAL

Collected

: 23/12/2023 1:17:00PM

A/c Status

: F

Collected at : SHRI BALAJI AAROGYAM HOSPITAL

C/O Aarogyam Hospital, Behind Old Bus Stand

Thanesar, Kurukshetra-136118

Age

: 48 Years

Gender : Male

Reported

24/12/2023 7:20:04AM

Report Status

: Final

Processed at :

: Dr. Lal PathLabs Ltd.

Kurukshetra-136118, Haryana

**Test Report** 

**Test Name** 

Results

Units

Bio. Ref. Interval

Dr.Samriti Gupta MBBS, MD (Pathology) Chief of Lab



Read, Office: Dr Lai PathLabs Ltd. Block-E, Sector-18, Rohini, New Delhi-110085 Web: www.lalpathlabs.com, CIN: L74899DL1995PLC065388

Name

: Mr. BIR BHAN

Lab No.

: 458647527

Ref By Collected : SHRI BALAJI AAROGYAM HOSPITAL

A/c Status

Collected at

: SHRI BALAJI AAROGYAM HOSPITAL

C/O Aarogyam Hospital, Behind Old Bus Stand

Thanesar, Kurukshetra-136118

: 23/12/2023 1:17:00PM

: 48 Years

Gender Reported : Male : 24/12/2023 7:20:04AM

: Final

Report Status Processed at

: LPL-NATIONAL REFERENCE LAB

National Reference laboratory, Block E,

Sector 18, Rohini, New Delhi -110085

### **Test Report**

Test Name	Results	Units	Bio. Ref. Interval
IMMUNOGLOBULIN IgA, SERUM	352.60	mg/dL	40.00 - 350.00
(Immunoturbidimetry)			

#### Comments

IgA accounts for 13% of total immunoglobulins and protects the skin & mucosa against micro-organisms. It is capable of binding toxins & in combination with Lysozyme develops anti-bacterial and anti-viral activities. IgA is the predominant immunoglobulin in body secretions like saliva, sweat and colostrum. Polyclonal IgA increase is seen in Chronic liver diseases, Chronic infections, Autoimmune disorders, Sarcoidosis and Wiscott - Aldrich syndrome. Monoclonal IgA increase is seen in IgA Myeloma. Decreased synthesis of IgA is found in Congenital and Acquired Immunodeficiency diseases. Decreased IgA levels are seen in Protein losing enteropathies and skin burns.

Tenarother

DMC - 89819

Dr Himangshu Mazumdar MD, Biochemistry Sr. Consultant Biochemist NRL - Dr Lal PathLabs Ltd

DMC - 89936

MD, Biochemistry Consultant Biochemist NRL - Dr Lal PathLabs Ltd DMC - 9550

Dr Nimmi Kansal MD. Biochemistry Technical Director - Clinical

of Court

Chemistry & Biochemical Genetics NRL - Dr Lal PathLabs Ltd

End of report



### IMPORTANT INSTRUCTIONS

•Test results released pertain to the specimen submitted.•All test results are dependent on the quality of the sample received by the Laboratory •Laboratory investigations are only a tool to facilitate in arriving at a diagnosis and should be clinically correlated by the Referring Physician . •Report delivery may be delayed due to unforeseen circumstances. Inconvenience is regretted. Certain tests may require further testing at additional cost for derivation of exact value. Kindly submit request within 72 hours post reporting. Test results may show interlaboratory variations. The Courts/Forum at Delhi shall have exclusive jurisdiction in all disputes/claims concerning the test(s) & or results of test(s). • Test results are not valid for medico legal purposes. This is computer generated medical diagnostic report that has been validated by Authorized Medical Practitioner /Doctor. The report does not need physical signature.

(#) Sample drawn from outside source

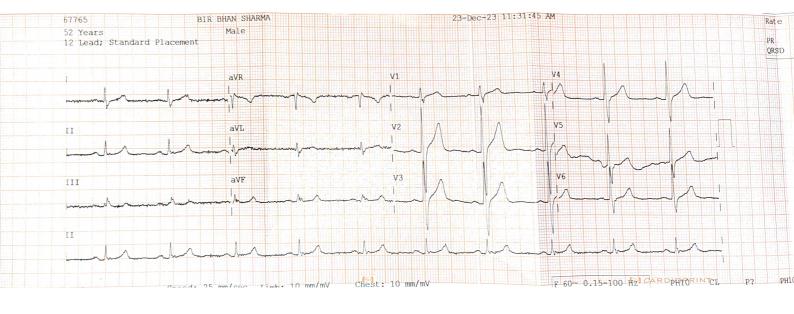
If Test results are alarming or unexpected, client is advised to contact the Customer Care immediately for possible remedial action.

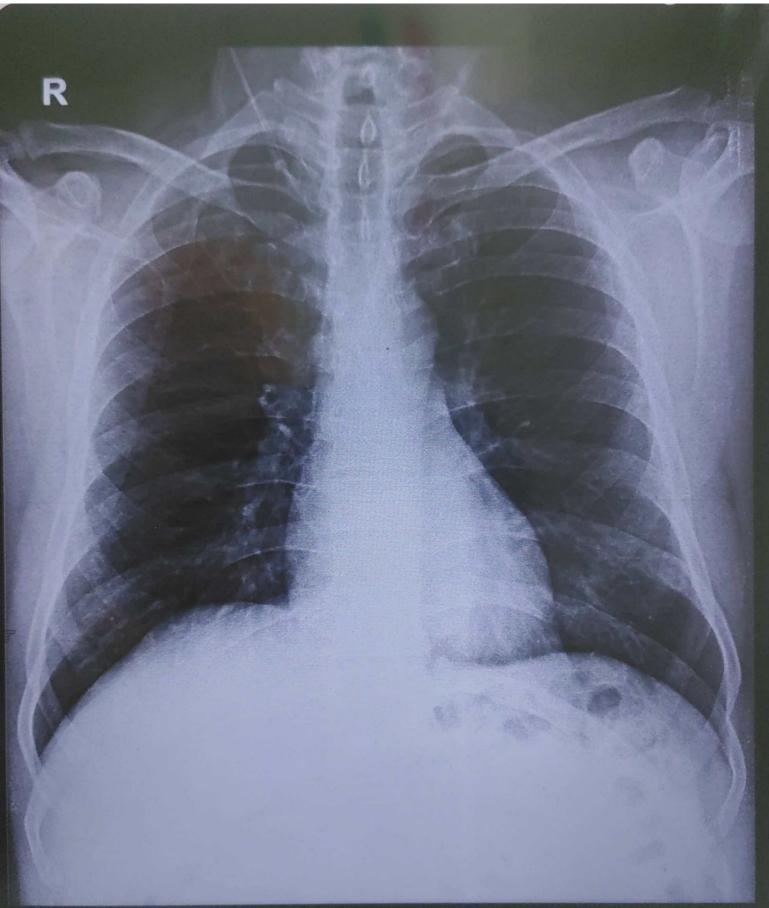
Tel: +91-11-49885050,Fax: - +91-11-2788-2134, E-mail: lalpathlabs@lalpathlabs.com

National Reference lab, Delhi, a CAP (7171001) Accredited, ISO 9001:2015 (FS60411) & ISO 27001:2013 (616691) Certified laboratory.



Page 4 of 4





BIR BHAN SHARMA 52/Y 20091 M CHEST PA 23-Dec-23 11:09 SHRI BALAJI AAROGYAM HOSPITAL, KURUKSHETRA