S K NURSING HOME AND HOSPITAL G B PANT MARG TIKONIA HALDWANI HALDWANI

Station

EXERCISE STRESS TEST REPORT

Patient Name: GEETA DEVI KAPKOTI,

Patient ID: 8965471236

Height: 152 cm Weight: 67 kg

Test Type: --Protocol: BRUCE

Medications:

Study Date: 29.03.2024

Medical History:

Reason for Exercise Test:

Telephone: 05946-221040,220263

DOB: 30.06.1992 Age: 31yrs Gender: Female Race:

Referring Physician: CHANDAN DIAGNOSTIC

Attending Physician: DR.DEVASHISH GUPTA(MD) Technician: MR.BHUWAN

Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (km/h)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE STANDING	00:28 00:38	0.00 0.00	0.00	106 108	110/70 110/70	
EXERCISE	HYPERV. STAGE 1 STAGE 2	00:31 03:00 03:00	0.80 2.70 4.00	0.00 10.00	106 151	110/70 110/70 110/70	
RECOVERY	STAGE 3	00:06 03:05	5.40 0.00	12.00 14.00 0.00	166 169 112	130/80 130/80 120/80	

The patient exercised according to the BRUCE for 6:05 min:s, achieving a work level of Max. METS: 7.20. The resting heart rate of 112 bpm rose to a maximal heart rate of 171 bpm. This value represents 90 % of the maximal, age-predicted heart rate. The resting blood pressure of 110/70 mmHg, rose to a maximum blood pressure of 130/90 mmHg. The exercise test was stopped due to Max HR.

Interpretation

Summary: Resting ECG: normal.

Functional Capacity: above average (>20%).

HR Response to Exercise: appropriate.

BP Response to Exercise: normal resting BP - appropriate response.

Chest Pain: none. Arrhythmias: none. ST Changes: none.

Overall impression: Normal stress test.

Conclusions

Physician-

DR DEVASHISH GUPTA (MD)

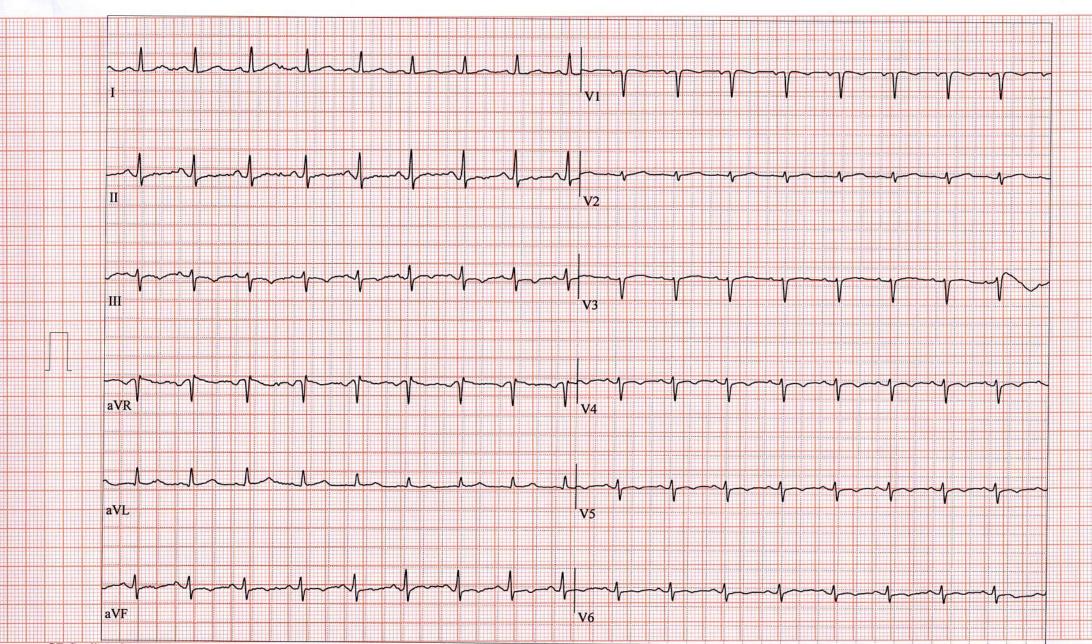
Patient ID 8965471236 29.03.2024

11:50:00am

106 bpm 110/70 mmHg 12-Lead Report PRETEST SUPINE

00:26

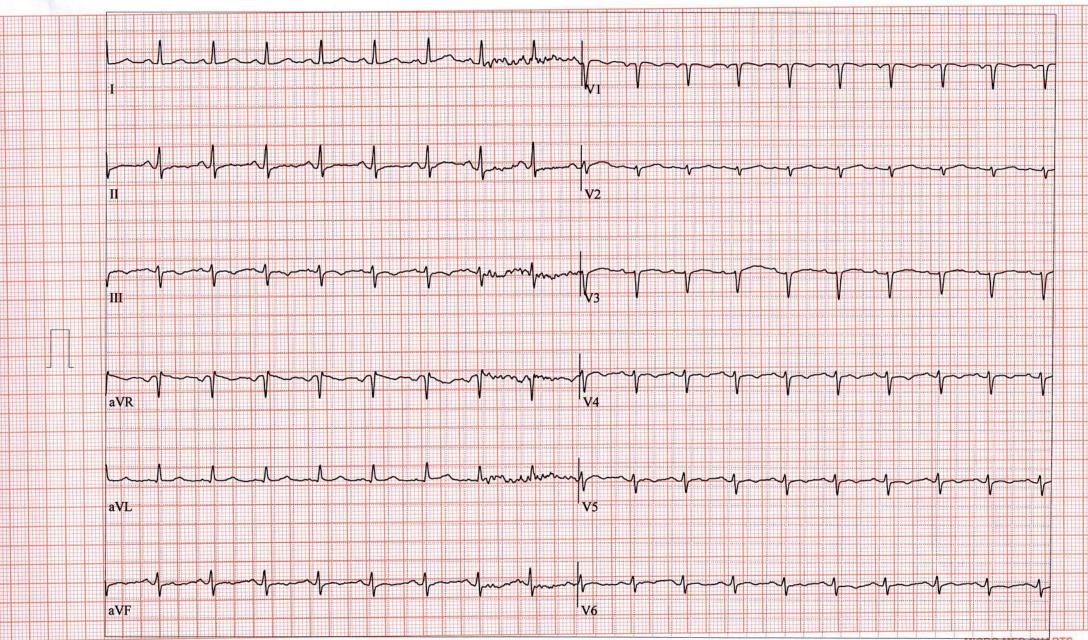
BRUCE 0.0 km/h 0.0 %



Patient ID 8965471236

29.03.2024 11:50:37am 108 bpm 110/70 mmHg 12-Lead Report

PRETEST STANDING 01:02 BRUCE 0.0 km/h 0.0 %



Patient ID 8965471236 29.03.2024 11:51:04am

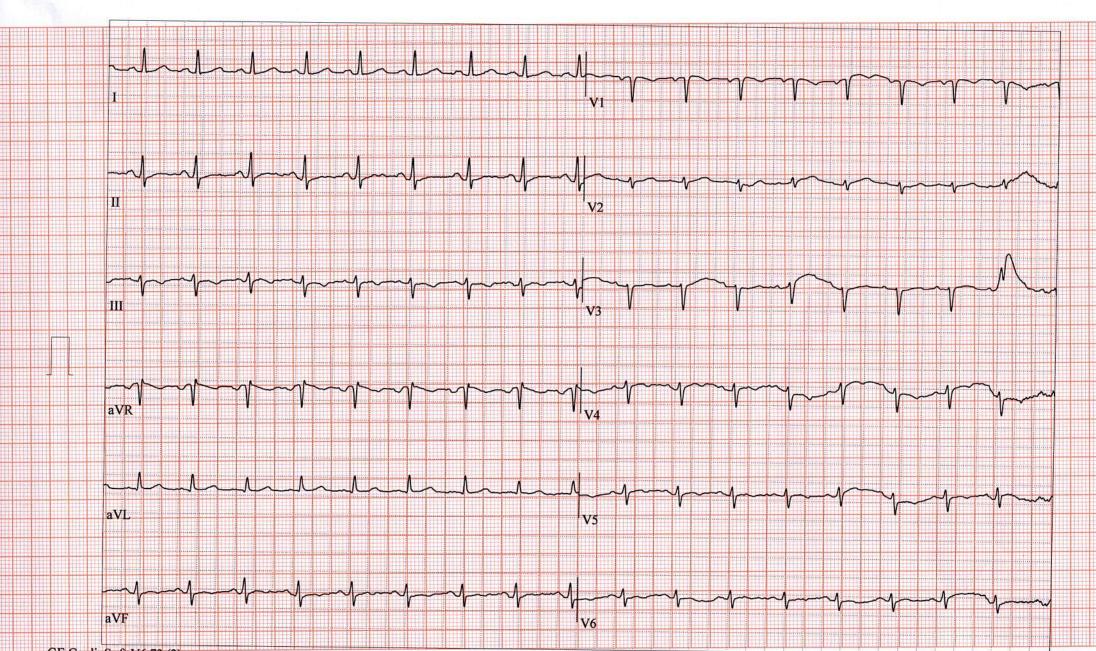
106 bpm 110/70 mmHg

12-Lead Report

PRETEST HYPERV. 01:29

BRUCE

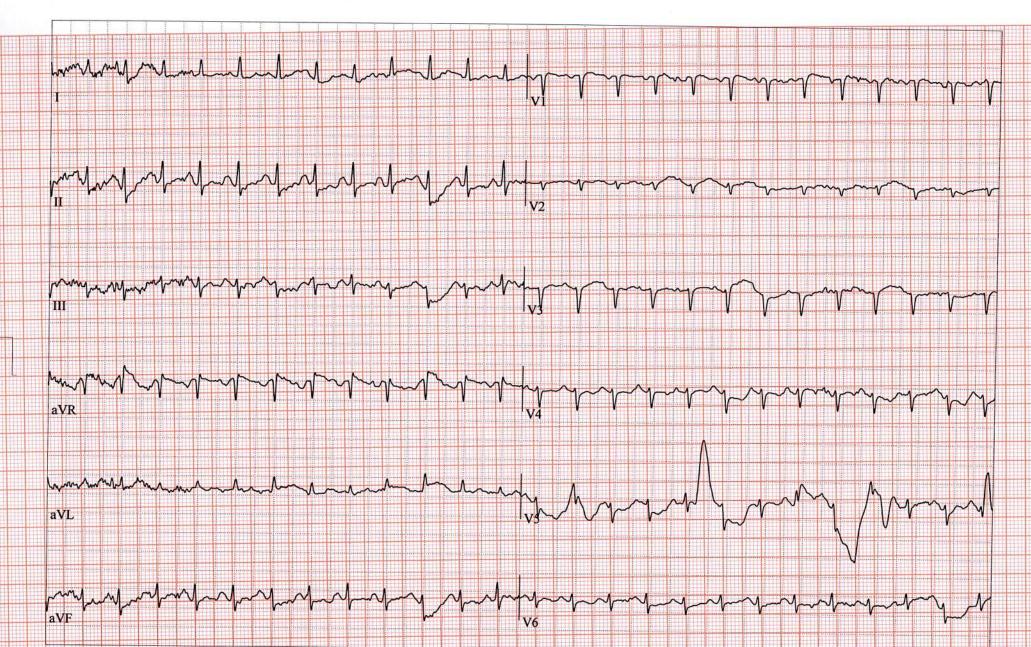
0.0 km/h0.0 %



151 bpm 110/70 mmHg

EXERCISE STAGE 1 03:00

BRUCE 2.7 km/h 10.0 %



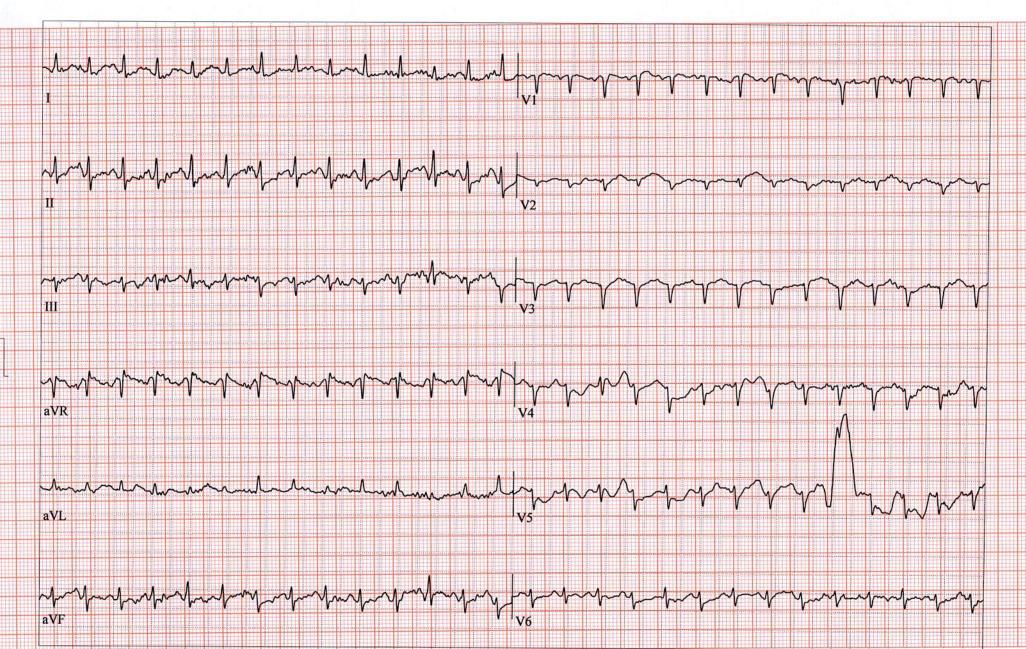
GEETA DEVI KAPKOTI, Patient ID 8965471236 29.03.2024

11:57:12am

166 bpm 130/80 mmHg 12-Lead Report

EXERCISE STAGE 2 06:00 BRUCE 4.0 km/h

12.0 %



Patient ID 8965471236

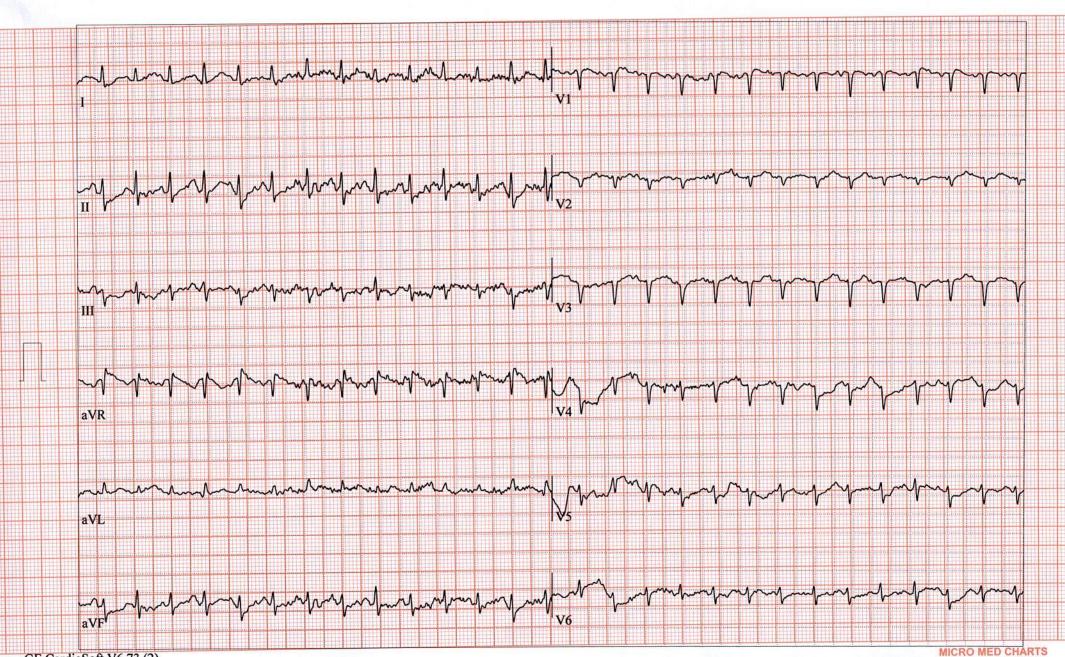
29.03.2024 11:57:19am

169 bpm 130/80 mmHg

12-Lead Report (PEAK EXERCISE)

EXERCISE STAGE 3 06:06

BRUCE 5.4 km/h 14.0 %



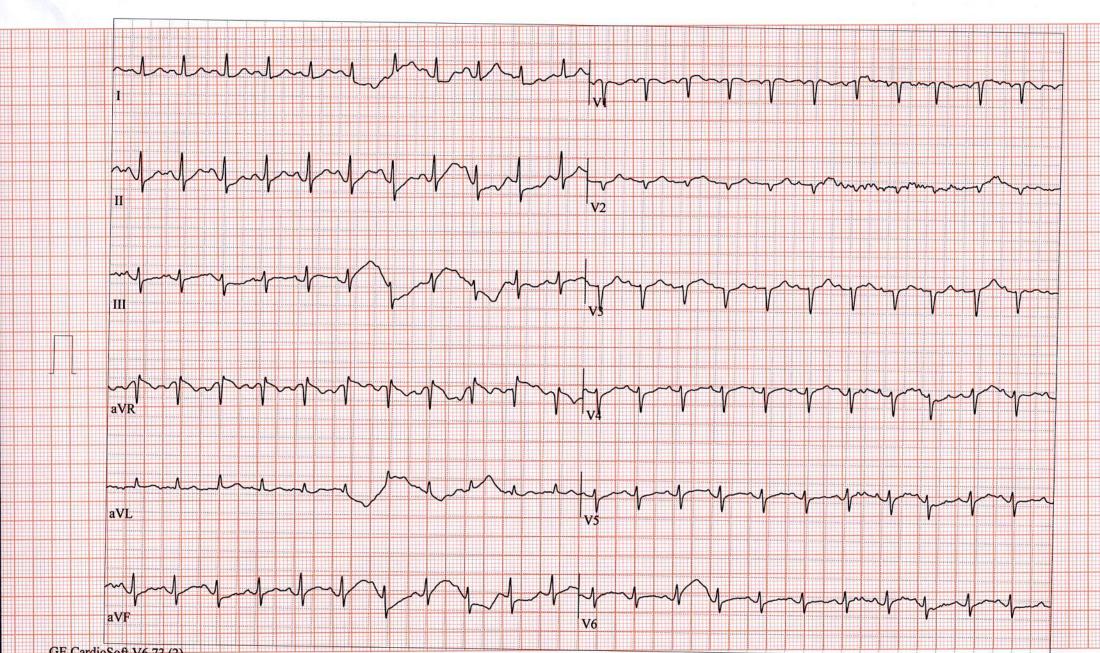
GEETA DEVI KAPKOTI, Patient ID 8965471236

29.03.2024 11:58:18am

136 bpm 130/90 mmHg 12-Lead Report

RECOVERY #1 01:00

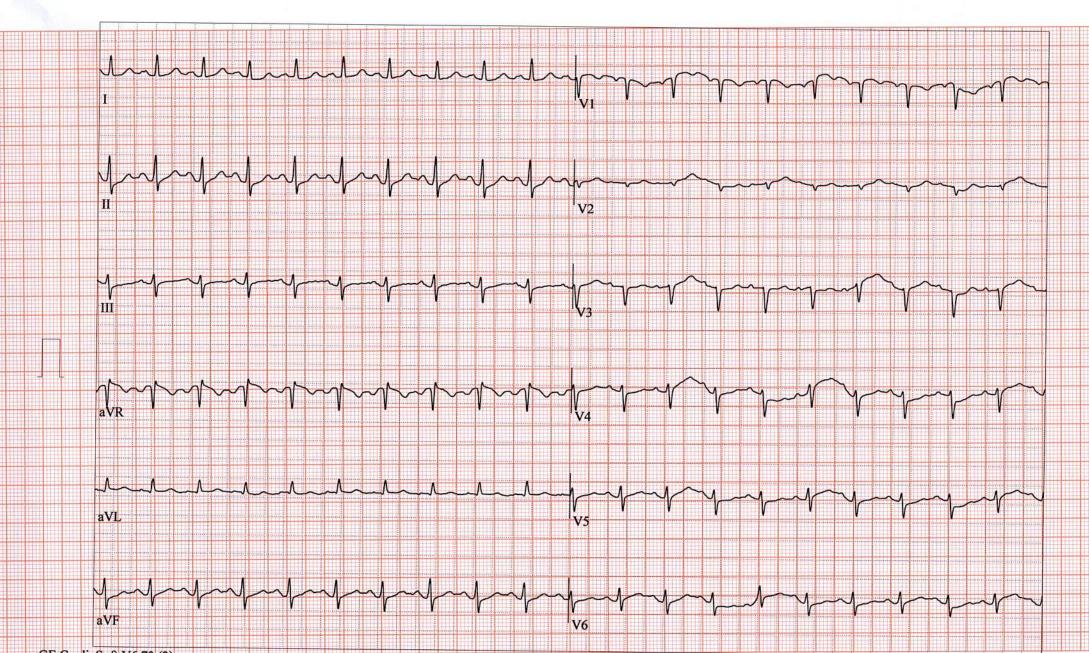
BRUCE 0.0 km/h 0.0 %



Patient ID 8965471236 29.03.2024

29.03.2024 11:59:19am 122 bpm 120/80 mmHg 12-Lead Report

RECOVERY #1 02:00 BRUCE 0.0 km/h 0.0 %



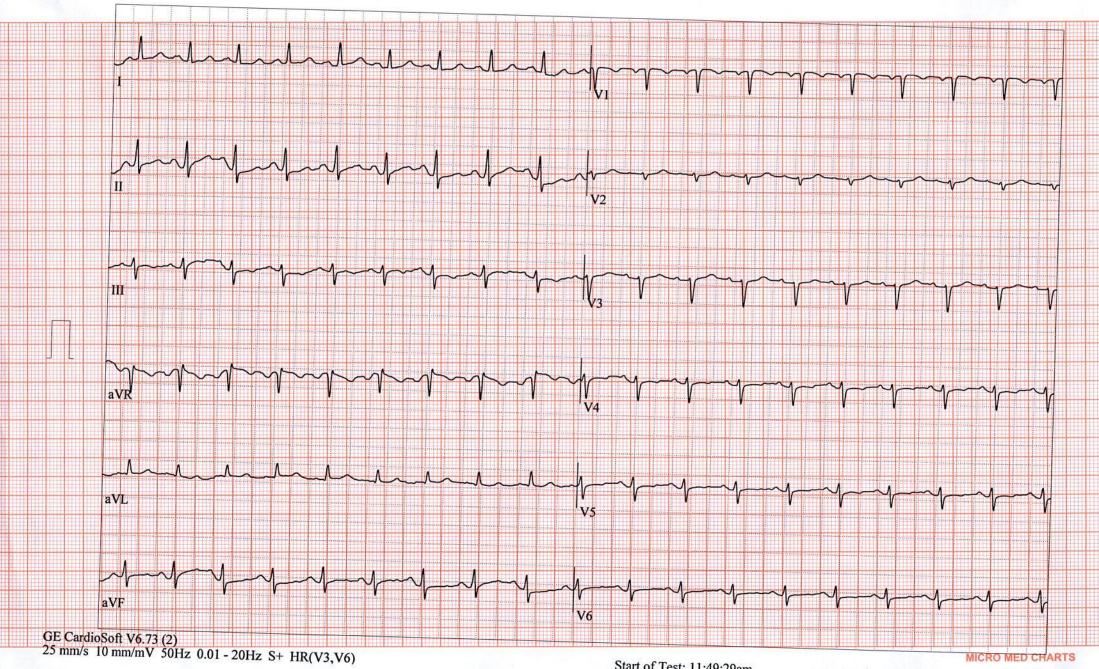
12-Lead Report

S K NURSING HOME AND HOSPITAL,

Patient ID 8965471236 29.03.2024 12:00:19pm

114 bpm 120/80 mmHg RECOVERY 03:00

BRUCE 0.0 km/h 0.0 %





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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.GEETA DEVI KAPKOTI Registered On : 29/Mar/2024 08:49:04 Age/Gender Collected : 31 Y O M O D /F : 29/Mar/2024 09:19:51 UHID/MR NO : CHL2.0000159177 Received : 29/Mar/2024 10:35:29 Visit ID : CHL20377422324 Reported : 29/Mar/2024 13:17:16

Ref Doctor : Dr.MEDIWHEEL ARCOFEMI HEALTH Status : Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Group (ABO & Rh typing) ** , B	Blood			
Blood Group	0			ERYTHROCYTE
вюба бі бар	O			MAGNETIZED TECHNOLOGY / TUBE AGGLUTINA
Rh (Anti-D)	POSITIVE	•		ERYTHROCYTE MAGNETIZED
				TECHNOLOGY / TUBE AGGLUTINA
Complete Blood Count (CBC) **, Who	le Blood			
Haemoglobin	12.60	g/dl	1 Day- 14.5-22.5 g/dl 1 Wk- 13.5-19.5 g/dl	
		The second	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)	6,700.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils)	62.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	34.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	1.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	3.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE
ESR				
Observed	22.00	Mm for 1st hr.		
Corrected	18.00	Mm for 1st hr.	< 20	
PCV (HCT)	40.00	%	40-54	
Platelet count				
Platelet Count	1.70	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.30	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	48.10	%	35-60	ELECTRONIC IMPEDANCE
,				









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Ref Doctor : Dr.MEDIWHEEL ARCOFEMI HEALTH Status : Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
PCT (Platelet Hematocrit)	0.22	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	13.00	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	4.80	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	83.80	fΙ	80-100	CALCULATED PARAMETER
MCH	26.40	pg	28-35	CALCULATED PARAMETER
MCHC	31.50	%	30-38	CALCULATED PARAMETER
RDW-CV	14.70	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	44.70	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	4,154.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	201.00	/cu mm	40-440	



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UHID/MR NO

Ref Doctor

Visit ID

CHANDAN DIAGNOSTIC CENTRE

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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.GEETA DEVI KAPKOTI Age/Gender

: 31 Y O M O D /F

: CHL2.0000159177 Received : CHL20377422324 Reported

: Dr.MEDIWHEEL ARCOFEMI HEALTH

CARE LTD HLD -

Registered On

Collected

: 29/Mar/2024 08:49:06 : 29/Mar/2024 09:19:51

: 29/Mar/2024 10:35:29

: 29/Mar/2024 11:48:45

Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

GLUCOSE FASTING ** , Plasma

Glucose Fasting

221.10

mg/dl

< 100 Normal

GOD POD

100-125 Pre-diabetes ≥ 126 Diabetes

Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.

b) 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 diabetics in future, which is why an Annual Health Check up is essential.

c) I.G.T = Impared Glucose Tolerance.

Glucose PP **

Sample:Plasma After Meal

329.80

mg/dl

<140 Normal

GOD POD

140-199 Pre-diabetes

>200 Diabetes

Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.

b) 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 diabetics in future, which is why an Annual Health Check up is essential.

c) I.G.T = Impared Glucose Tolerance.

GLYCOSYLATED HAEMOGLOBIN (HBA1C) **, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	10.90	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	95.70	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	266	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 mnagement.



1800-419-0002



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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.GEETA DEVI KAPKOTI Registered On : 29/Mar/2024 08:49:06 Collected Age/Gender : 31 Y O M O D /F : 29/Mar/2024 09:19:51 UHID/MR NO : CHL2.0000159177 Received : 29/Mar/2024 10:35:29 Visit ID : CHL20377422324 Reported : 29/Mar/2024 11:48:45 : Dr.MEDIWHEEL ARCOFEMI HEALTH

Ref Doctor CARE LTD HLD - Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name Result Unit Bio. Ref. Interval Method	
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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.

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
- 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	9.52	mg/dL	7.0-23.0	CALCULATED
Creatinine ** Sample:Serum	0.74	mg/dl	0.5-1.20	MODIFIED JAFFES
Uric Acid ** Sample:Serum	4.20	mg/dl	2.5-6.0	URICASE

LFT (WITH GAMMA GT) **, Serum





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



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Ref Doctor : Dr.MEDIWHEEL ARCOFEMI HEALTH Status : Final Report

DEPARTMENT OF BIOCHEMISTRY MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	ι	Jnit Bio. Ref. Interva	al Method
SGOT / Aspartate Aminotransferase (AST)	36.70	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	51.40	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	36.20	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.70	gm/dl	6.2-8.0	BIURET
Albumin	4.30	gm/dl	3.4-5.4	B.C.G.
Globulin	2.40	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.79	,	1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	137.40	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.60	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.30	mg/dl	< 0.30	Jendrassik & Grof
Bilirubin (Indirect)	0.30	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) ** , Serum				
Cholesterol (Total)	160.52	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	70.00	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	59	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optima 130-159 Borderline High 160-189 High > 190 Very High	
VLDL	31.48	mg/dl	10-33	CALCULATED
Triglycerides	157.40	mg/dl	< 150 Normal 150-199 Borderline High 200-499 High >500 Very High	GPO-PAP



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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.GEETA DEVI KAPKOTI Registered On : 29/Mar/2024 08:49:05 Age/Gender Collected : 29/Mar/2024 15:02:22 : 31 Y O M O D /F UHID/MR NO : CHL2.0000159177 Received : 29/Mar/2024 16:08:18 Visit ID : CHL20377422324 Reported : 29/Mar/2024 18:50:27

Ref Doctor : Dr.MEDIWHEEL ARCOFEMI HEALTH Status : Final Report

DEPARTMENT OF CLINICAL PATHOLOGY MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINATION, ROUTINE *	*, Urine			
Color	YELLOW			
Specific Gravity	1.020			
Reaction PH	Acidic (5.0)			DIPSTICK
Appearance	CLEAR			
Protein	ABSENT	′ mg %	< 10 Absent	DIPSTICK
			10-40 (+)	
			40-200 (++)	
			200-500 (+++)	
			> 500 (++++)	
Sugar	PRESENT (++)	gms%	< 0.5 (+)	DIPSTICK
			0.5-1.0 (++)	
			1-2 (+++) > 2 (++++)	
Ketone	ABSENT	mg/dl	0.1-3.0	BIOCHEMISTRY
Bile Salts	ABSENT	Trig/ui	0.1-3.0	DIOCHLIVIISTKI
Bile Pigments	ABSENT			
Bilirubin	ABSENT			DIPSTICK
Leucocyte Esterase	ABSENT			DIPSTICK
Urobilinogen(1:20 dilution)	ABSENT			DII STICK
Nitrite	ABSENT			DIPSTICK
Blood	ABSENT			DIPSTICK
Microscopic Examination:	ADJENT			DII STIOK
Epithelial cells	0 E/b n f			MICROSCOPIC
epitrienal cens	0-5/h.p.f			EXAMINATION
Pus cells	0-2/h.p.f			L// ((VIII V/ (TIOI)
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			
STOOL, ROUTINE EXAMINATION *	** , Stool			
Color	BROWNISH			
Consistency	SEMI SOLID			
Reaction (PH)	Acidic (6.0)			









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

CIN: U85110DL2003PLC308206



Method

 Patient Name
 : Mrs.GEETA DEVI KAPKOTI
 Registered On
 : 29/Mar/2024 08:49:05

 Age/Gender
 : 31 Y 0 M 0 D /F
 Collected
 : 29/Mar/2024 15:02:22

 UHID/MR NO
 : CHL2.0000159177
 Received
 : 29/Mar/2024 16:08:18

Visit ID : CHL20377422324 Reported : 29/Mar/2024 18:50:27

Ref Doctor : Dr.MEDIWHEEL ARCOFEMI HEALTH Status : Final Report CARE LTD HLD -

DEPARTMENT OF CLINICAL PATHOLOGY MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Unit

Bio. Ref. Interval

Test Name	Result				
Mucus	ABSENT				
Blood	ABSENT				
Worm	ABSENT				
Pus cells	ABSENT				
RBCs	ABSENT				
Ova	ABSENT				
Cysts	ABSENT				
Others	ABSENT				

SUGAR, FASTING STAGE **, Urine

Sugar, Fasting stage PRESENT(++) gms%

Interpretation:

(+) < 0.5

(++) 0.5-1.0

(+++) 1-2

(++++) > 2

SUGAR, PP STAGE **, Urine

Sugar, PP Stage

PRESENT (+++)

Interpretation:

(+) < 0.5 gms%

(++) 0.5-1.0 gms%

(+++) 1-2 gms%

(++++) > 2 gms%

Dr.Pankaj Punetha DNB(Pathology)







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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.GEETA DEVI KAPKOTI Registered On : 29/Mar/2024 08:49:05 Age/Gender Collected : 31 Y O M O D /F : 29/Mar/2024 09:19:51 UHID/MR NO : CHL2.0000159177 Received : 29/Mar/2024 10:35:29 Visit ID : CHL20377422324 Reported : 29/Mar/2024 13:40:55 : Dr.MEDIWHEEL ARCOFEMI HEALTH

Ref Doctor : Dr.MEDIWHEEL ARCOFEMI HEALTH Status : Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE - TOTAL **, Serum				
T3, Total (tri-iodothyronine)	86.30	ng/dl	84.61–201.7	CLIA
T4, Total (Thyroxine)	6.20	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	2.300	μlŪ/mL	0.27 - 5.5	CLIA
		,		
Interpretation:				
		0.3-4.5 $\mu IU/m$	L First Trimes	ter
		0.5-4.6 µIU/m	L Second Trim	nester
		0.8-5.2 μIU/m	L Third Trime	ster
		0.5-8.9 µIU/m	L Adults	55-87 Years
		0.7-27 $\mu IU/m$	L Premature	28-36 Week
		2.3-13.2 μIU/m		> 37Week
		0.7-64 μIU/m	L Child(21 wk	- 20 Yrs.)
		1-39 μIU/		0-4 Days
		1.7-9.1 μIU/m		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.
- 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.



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

CIN: U85110DL2003PLC308206



Patient Name : Mrs.GEETA DEVI KAPKOTI

: 31 Y O M O D /F

CARE LTD HLD -

: CHL2.0000159177

Visit ID : CHL20377422324

: Dr.MEDIWHEEL ARCOFEMI HEALTH

Collected Received : 29/Mar/2024 08:49:07

: N/A : N/A

Reported

Registered On

: 29/Mar/2024 14:04:41

Status : Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

X-RAY DIGITAL CHEST PA *

Age/Gender

UHID/MR NO

Ref Doctor

(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 Sushil Pandey(MD Radiodignosis)



Home Sample Collection 1800-419-0002



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

CIN: U85110DL2003PLC308206



Patient Name

: Mrs.GEETA DEVI KAPKOTI

Registered On

: 29/Mar/2024 08:49:07

Age/Gender

: 31 Y O M O D /F

Collected

: N/A

UHID/MR NO Visit ID

: CHL2.0000159177 : CHL20377422324

Received Reported

: 29/Mar/2024 10:58:51

: Dr.MEDIWHEEL ARCOFEMI HEALTH

Status

: Final Report

: N/A

Ref Doctor CARE LTD HLD -

DEPARTMENT OF ULTRASOUND MEDIWHEEL BANK OF BARODA FEMALE ABOVE 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

ULTRASOUND WHOLE ABDOMEN

LIVER: Is borderline enlarged in size (~15.5cms) and its echogenicity is homogeneously increased. No SOL seen. No dilatation of IHBR seen. Hepatic vessels are normal. Portal vein is patent.

GALL BLADDER: Lumen anechoic, wall is normal in thickness (~3 mm). No pericholecystic fluid seen.

CBD: Normal in caliber and smoothly tapering towards its lower end.

PANCREAS: Normal in size and echotexture.

SPLEEN: Normal in size and echotexture.

KIDNEYS:-

Right kidney is normal in size, shape and echotexture with maintained CM differentiation.

No dilatation of PC system is seen.

No calculus seen.

Left kidney is normal in size, shape and echotexture with maintained CM differentiation.

No dilatation of PC system is seen.

No calculus seen.

URINARY BLADDER: Is empty, hence pelvic structures could not be assessed.

<u>IMPRESSION:-</u> Borderline hepatomegaly with grade I fatty liver.

• pathological correlation and further evaluation).

*** End Of Report ***

(**) Test Performed at CHANDAN DIAGNOSTIC CENTRE, HALDN

fill Test (TMT). PAP SMEAR FOR CYTOLOGICAL EXAMINATION 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

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