

Patient Name : Mr.JAY RAJESH JADAV
Age/Gender : 24 Y 9 M 21 D/M
UHID/MR No : STAR.0000064138
Visit ID : STAROPV71479
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 9969526712

Collected : 13/Jul/2024 09:02AM
Received : 13/Jul/2024 11:03AM
Reported : 13/Jul/2024 12:32PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR , WHOLE BLOOD EDTA

Methodology : Microscopic

RBC : Normocytic normochromic

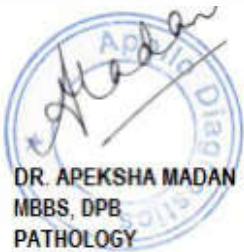
WBC : Normal in number, Eosinophilia

Platelets : Adequate in Number

Parasites : No Haemoparasites seen

IMPRESSION : Normocytic normochromic blood picture, Eosinophilia

Note/Comment : Please Correlate clinically



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DEPARTMENT OF HAEMATOLOGY


ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	15	g/dL	13-17	CYANIDE FREE COLOUROMETER
PCV	45.30	%	40-50	PULSE HEIGHT AVERAGE
RBC COUNT	4.82	Million/cu.mm	4.5-5.5	Electrical Impedance
MCV	94.1	fL	83-101	Calculated
MCH	31.2	pg	27-32	Calculated
MCHC	33.1	g/dL	31.5-34.5	Calculated
R.D.W	11.6	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	9,160	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	47	%	40-80	Electrical Impedance
LYMPHOCYTES	27	%	20-40	Electrical Impedance
EOSINOPHILS	20	%	1-6	Electrical Impedance
MONOCYTES	06	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	4305.2	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2473.2	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	1832	Cells/cu.mm	20-500	Calculated
MONOCYTES	549.6	Cells/cu.mm	200-1000	Calculated
Neutrophil lymphocyte ratio (NLR)	1.74		0.78- 3.53	Calculated
PLATELET COUNT	350000	cells/cu.mm	150000-410000	IMPEDENCE/MICROSCOPY
ERYTHROCYTE SEDIMENTATION RATE (ESR)	10	mm at the end of 1 hour	0-15	Modified Westergren
PERIPHERAL SMEAR				

Methodology : Microscopic

RBC : Normocytic normochromic

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DR. APEKSHA MADAN
MBBS, DPB
PATHOLOGY

SIN No:BED240182809

Apollo Speciality Hospitals Private Limited

(Formerly known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62 ,5th Floor, Ashoka RaghupathiChambers, Begumpet, Hyderabad, Telangana - 500016

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156, Famous Cine Labs, Behind Everest Building, Tardeo (Mumbai Central), Mumbai, Maharashtra
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Test Name	Result	Unit	Bio. Ref. Range	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

DR. APEKSHA MADAN
 MBBS, DPB
 PATHOLOGY

SIN No:BED240182809

Patient Name : Mr.JAY RAJESH JADAV	Collected : 13/Jul/2024 01:18PM
Age/Gender : 24 Y 9 M 21 D/M	Received : 13/Jul/2024 01:37PM
UHID/MR No : STAR.0000064138	Reported : 13/Jul/2024 02:08PM
Visit ID : STAROPV71479	Status : Final Report
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Emp/Auth/TPA ID : 9969526712	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	83	mg/dL	70-100	GOD - POD

Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

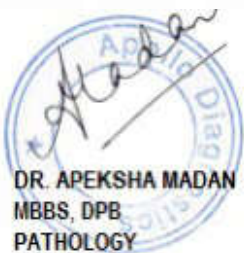
Note:

- 1.The diagnosis of Diabetes requires a fasting plasma glucose of $>$ or $=$ 126 mg/dL and/or a random / 2 hr post glucose value of $>$ or $=$ 200 mg/dL on at least 2 occasions.
2. Very high glucose levels ($>$ 450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	92	mg/dL	70-140	GOD - POD

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.
Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
ALANINE AMINOTRANSFERASE (ALT/SGPT) , SERUM	16	U/L	4-44	JSCC

Comment:

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes.

ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear.

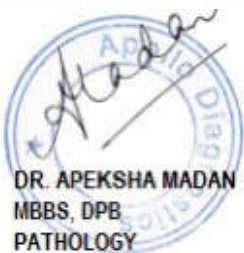
The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.

Test Name	Result	Unit	Bio. Ref. Range	Method
BILIRUBIN, TOTAL , SERUM	1.90	mg/dL	0.1-1.2	Azobilirubin

Kindly correlate clinically.

Test Name	Result	Unit	Bio. Ref. Range	Method
BUN/CREATININE RATIO , SERUM				
BLOOD UREA NITROGEN	10.2	mg/dL	8.0 - 23.0	Calculated
CREATININE	0.72	mg/dL	0.6-1.1	ENZYMATIC METHOD
BUN / CREATININE RATIO	14.15			Calculated

Test Name	Result	Unit	Bio. Ref. Range	Method
CREATININE , SERUM	0.72	mg/dL	0.6-1.1	ENZYMATIC METHOD



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PATHOLOGY



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UHID/MR No : STAR.0000064138	Reported : 13/Jul/2024 04:19PM
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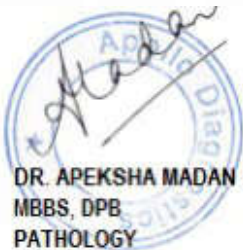
DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical measurement
pH	6.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.010		1.002-1.030	Dipstick
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NEGATIVE		NORMAL	MODIFIED EHRlich REACTION
NITRITE	NEGATIVE		NEGATIVE	Griess reaction
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Diazonium salt
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	0-1	/hpf	<10	MICROSCOPY
RBC	ABSENT	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Comment:

All urine samples are checked for adequacy and suitability before examination. Microscopy findings are reported as an average of 10 high power fields.



SIN No:UR2385750

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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

***** End Of Report *****

Page 8 of 8


DR. APEKSHA MADAN
MBBS, DPB
PATHOLOGY



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OUT-PATIENT RECORD

Date : 13/7/2024
 MRNO : 64138
 Name : MR. Jay Gadkar
 Age/Gender : 24/3 / Male
 Mobile No :
 Passport No :
 Aadhar number :

Pulse : 82/mn	B.P : 110/70	Resp : 18/mn	Temp : (N)
Weight : 65.0	Height : 171	BMI : 22.2	Waist Circum : 83 cm

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

M E H S - 0

unmarried, Vegetarian
 Sleep: (N) Allergic rhinitis.
 No addiction
 PH: Mother: det
 T. Bil: 1.90.
 . Avoid oily food
 . Repeat LFT after 2 months
 Physically fit.

Dr. (Mrs.) CHHAYA P. VAJA
 M.D (MUM)
 Physician & Cardiologist
 Reg. No. 56942



Apollo Spectra Hospitals: 156, Famous Cine Labs, Behind Everest Building, Tardeo, Mumbai - 400034
 Ph No: 022-43324500 | www.apollospectra.com

Doctor Signature

EYE REPORT

Name: Jay Rajesh Yadav

Date: 13/07/24

Age / Sex: 24/M.

Ref No.:

Complaint: Nil.

klclo - frequent sinusitis.

— Int. Seg: wnc — (mild photophobia)

Examination

— 0.5:1 —
FR+

Vn 6/6, No

Spectacle Rx

	Right Eye							
	Vision	Sphere	Cyl.	Axis	Vision	Sphere	Cyl.	Axis
Distance								
Read								

Remarks:

Allergy. Skin patch-test to know allergens

Medications:

Trade Name	Frequency	Duration

Follow up:

Consultant:



[Handwritten signature]

ID 0 *Gay Sachar*

Age 24

Height 171cm
Gender Male

Date 13.7.2024
Time 10:44:38

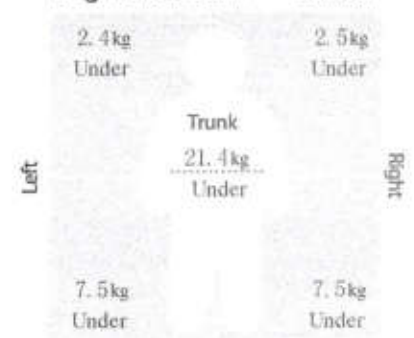
APOLLO SPECTRA HOSPITAL

Body Composition

	Under	Normal	Over	Normal Range
Weight	40 55 70 85 100 115 130 145 160 175 190 205	65.0 kg		54.7 ~ 74.0
Muscle Mass <small>Skeletal Muscle Mass</small>	60 70 80 90 100 110 120 130 140 150 160 170	25.3 kg		27.4 ~ 33.5
Body Fat Mass	20 40 60 80 100 120 140 160 180 200 220 240 260 280 300 320 340 360 380 400 420 440 460 480 500 520	19.2 kg		7.7 ~ 15.4
TBW <small>Total Body Water</small>	33.6 kg (36.2 ~ 44.2)		FFM <small>Fat Free Mass</small>	45.8 kg (47.0 ~ 58.5)
Protein	9.0 kg (9.7 ~ 11.8)		Mineral*	3.16 kg (3.35 ~ 4.09)

* Mineral is estimated.

Segmental Lean



Obesity Diagnosis

	Value	Normal Range
BMI <small>Body Mass Index</small> (kg/m ²)	22.2	18.5 ~ 25.0
PBF <small>Percent Body Fat</small> (%)	29.6	10.0 ~ 20.0
WHR <small>Waist-Hip Ratio</small>	0.95	0.80 ~ 0.90
BMR <small>Basal Metabolic Rate</small> (kcal)	1359	1444 ~ 1683

Nutritional Evaluation

Protein	<input type="checkbox"/> Normal	<input checked="" type="checkbox"/> Deficient	
Mineral	<input type="checkbox"/> Normal	<input checked="" type="checkbox"/> Deficient	
Fat	<input type="checkbox"/> Normal	<input type="checkbox"/> Deficient	<input checked="" type="checkbox"/> Excessive

Weight Management

Weight	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Under	<input type="checkbox"/> Over
SMM	<input type="checkbox"/> Normal	<input checked="" type="checkbox"/> Under	<input type="checkbox"/> Strong
Fat	<input type="checkbox"/> Normal	<input type="checkbox"/> Under	<input checked="" type="checkbox"/> Over

Obesity Diagnosis

BMI	<input checked="" type="checkbox"/> Normal	<input type="checkbox"/> Under	<input type="checkbox"/> Over	<input type="checkbox"/> Extremely Over
PBF	<input type="checkbox"/> Normal	<input type="checkbox"/> Under	<input checked="" type="checkbox"/> Over	
WHR	<input type="checkbox"/> Normal	<input type="checkbox"/> Under	<input checked="" type="checkbox"/> Over	

Segmental Fat



* Segmental Fat is estimated.

Muscle-Fat Control

Muscle Control	+ 8.9 kg	Fat Control	- 9.6 kg	Fitness Score	62
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Impedance

Z	RA	LA	TR	RL	LL
20kHz	390.1	403.5	32.1	323.9	326.9
100kHz	350.7	362.5	27.3	288.7	292.2

* Use your results as reference when consulting with your physician or fitness trainer.

Exercise Planner

Plan your weekly exercises from the followings and estimate your weight loss from those activities.

Energy expenditure of each activity (base weight: 65.0 kg / Duration: 30min. / unit: kcal)							
Walking	Jogging	Bicycle	Swim	Mountain Climbing	Aerobic		
130	228	195	228	212	228		
Table tennis	Tennis	Football	Oriental Fencing	Gate ball	Badminton		
147	195	228	325	124	147		
Racket ball	Tae-kwon-do	Squash	Basketball	Rope Jumping	Golf		
325	325	325	195	228	114		
Push-ups <small>development of upper body</small>	Sit-ups <small>abdominal muscle training</small>	Weight training <small>backache prevention</small>	Dumbbell exercise <small>muscle strength</small>	Elastic band <small>muscle strength</small>	Squats <small>maintenance of lower body muscle</small>		

How to do

1. Choose practicable and preferable activities from the left.
2. Choose exercises that you are going to do for 7 days.
3. Calculate the total energy expenditure for a week.
4. Estimate expected total weight loss for a month using the formula shown below.

Recommended calorie intake per day

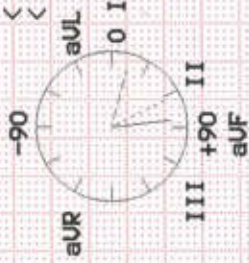
1800 kcal

* Calculation for expected total weight loss for 4 weeks: $Total\ energy\ expenditure\ (kcal/week) \times 4weeks \div 7700$

Measurement Results:

QRS : 96 ms
 QT/QTcB : 334 / 392 ms
 PR : 130 ms
 P : 114 ms
 RR/PP : 716 / 720 ms
 P/QRS/T : 63/ 82/ 15 degrees

< P
 < T
 < QRS



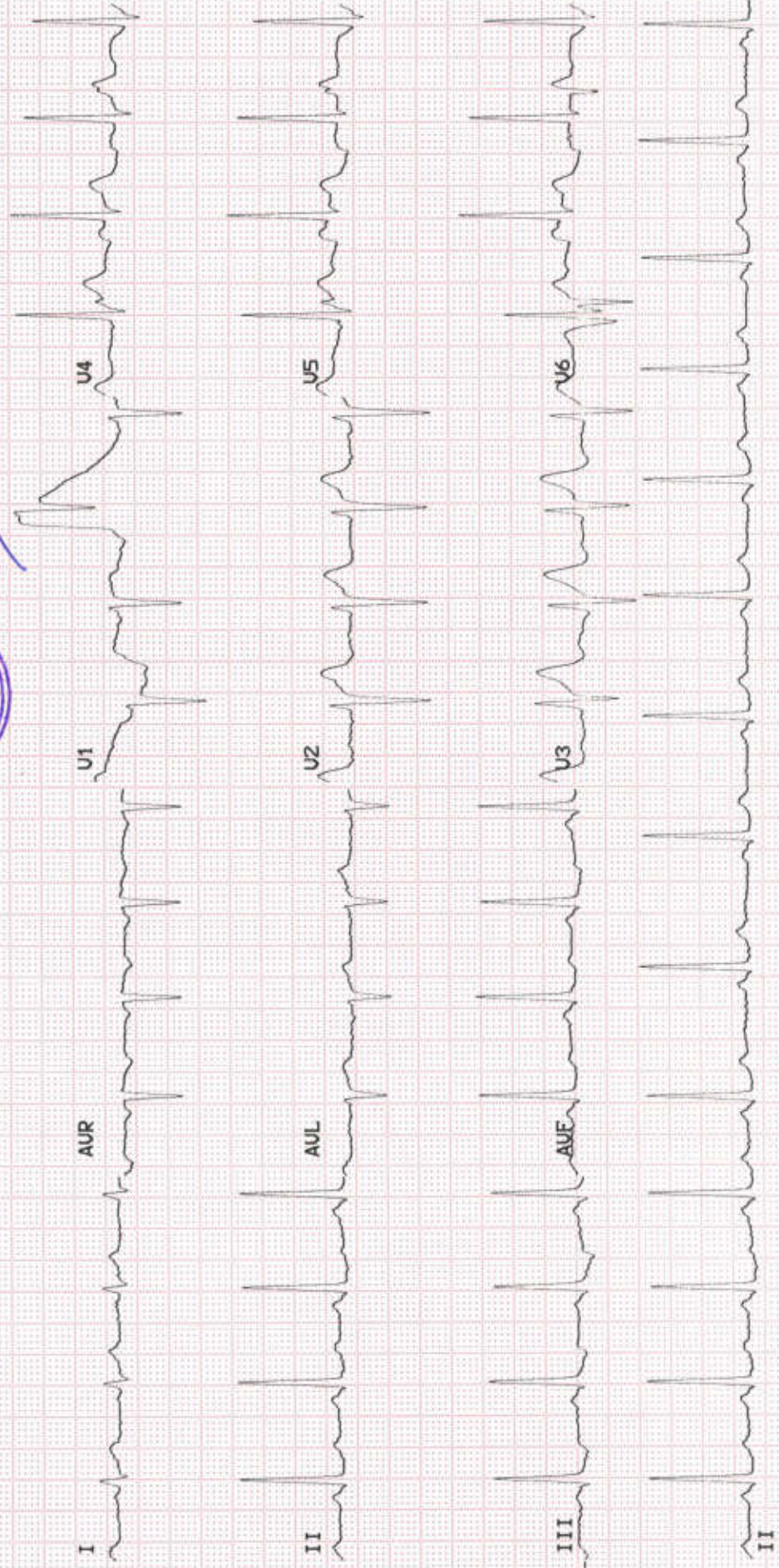
Interpretation:

12SL - Interpretation:
 Sinus rhythm with sinus arrhythmia
 Normal ECG



Dr. (Mrs.) CHHAYA P. VAJA
 M D (MUM)
 Physician & Cardiologist
 Reg No 56942

Unconfirmed report.



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Patient Name : Mr.JAY RAJESH JADAV
Age/Gender : 24 Y 9 M 21 D/M
UHID/MR No : STAR.0000064138
Visit ID : STAROPV71479
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 9969526712

Collected : 13/Jul/2024 01:18PM
Received : 13/Jul/2024 01:37PM
Reported : 13/Jul/2024 02:08PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY
ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	83	mg/dL	70-100	GOD - POD

Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:

- The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
- Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	92	mg/dL	70-140	GOD - POD

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other. Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.




DR. APEKSHA MADAN
MBBS, DPB
PATHOLOGY

SIN No:PLP1473359

Patient Name : Mr.JAY RAJESH JADAV
Age/Gender : 24 Y 9 M 21 D/M
UHID/MR No : STAR.0000064138
Visit ID : STAROPV71479
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 9969526712

Collected : 13/Jul/2024 09:02AM
Received : 13/Jul/2024 11:09AM
Reported : 13/Jul/2024 12:50PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY
ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
ALANINE AMINOTRANSFERASE (ALT/SGPT) , SERUM	16	U/L	4-44	JSCC

Comment:

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes. ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear. The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.


Test Name	Result	Unit	Bio. Ref. Range	Method
BILIRUBIN, TOTAL , SERUM	1.90	mg/dL	0.1-1.2	Azobilirubin

Kindly correlate clinically.

Test Name	Result	Unit	Bio. Ref. Range	Method
BUN/CREATININE RATIO , SERUM				
BLOOD UREA NITROGEN	10.2	mg/dL	8.0 - 23.0	Calculated
CREATININE	0.72	mg/dL	0.6-1.1	ENZYMATIC METHOD
BUN / CREATININE RATIO	14.15			Calculated

Test Name	Result	Unit	Bio. Ref. Range	Method
CREATININE , SERUM	0.72	mg/dL	0.6-1.1	ENZYMATIC METHOD




DR. APEKSHA MADAN
MBBS, DPB
PATHOLOGY

SIN No:SE04779242

Patient Name : Mr.JAY RAJESH JADAV
 Age/Gender : 24 Y 9 M 21 D/M
 UHID/MR No : STAR.0000064138
 Visit ID : STAROPV71479
 Ref Doctor : Dr.SELF
 Emp/Auth/TPA ID : 9969526712

Collected : 13/Jul/2024 09:02AM
 Received : 13/Jul/2024 01:46PM
 Reported : 13/Jul/2024 04:19PM
 Status : Final Report
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED


DEPARTMENT OF CLINICAL PATHOLOGY
ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
COMPLETE URINE EXAMINATION (CUE) , URINE				
PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Physical measurement
pH	6.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.010		1.002-1.030	Dipstick
BIOCHEMICAL EXAMINATION				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NEGATIVE		NORMAL	MODIFIED EHRlich REACTION
NITRITE	NEGATIVE		NEGATIVE	Griess reaction
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Diazonium salt
CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY				
PUS CELLS	2-3	/hpf	0-5	Microscopy
EPITHELIAL CELLS	0-1	/hpf	<10	MICROSCOPY
RBC	ABSENT	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

Comment:

All urine samples are checked for adequacy and suitability before examination. Microscopy findings are reported as an average of 10 high power fields.

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DR. APEKSHA MADAN
 MBBS, DPB
 PATHOLOGY

SIN No:UR2385750



TOUCHING LIVES



Patient Name : Mr.JAY RAJESH JADAV
Age/Gender : 24 Y 9 M 21 D/M
UHID/MR No : STAR.0000064138
Visit ID : STAROPV71479
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 9969526712

Collected : 13/Jul/2024 09:02AM
Received : 13/Jul/2024 01:46PM
Reported : 13/Jul/2024 04:19PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY
ARCOFEMI - MEDIWHEEL - PMC PACK H - PAN INDIA - FY2324

*** End Of Report ***

Page 8 of 8

DR. APEKSHA MADAN
MBBS, DPB
PATHOLOGY

SIN No:UR2385750



Patient Name	: Mr. Jay Rajesh Jadav	Age	: 24 Y M
UHID	: STAR.0000064138	OP Visit No	: STAROPV71479
Reported on	: 13-07-2024 11:42	Printed on	: 13-07-2024 11:42
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .
No obvious active pleuro-parenchymal lesion seen .
Both costophrenic and cardiophrenic angles are clear .
Both diaphragms are normal in position and contour .
Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen.

Printed on:13-07-2024 11:42

---End of the Report---


Dr. VINOD SHETTY
Radiology

Patient Name : Mr. Jay Rajesh Jadav

Age/Gender : 24 Y/M

UHID/MR No. : STAR.0000064138

OP Visit No : STAROPV71479

Sample Collected on :

Reported on : 13-07-2024 11:42

LRN# : RAD2377518

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : 9969526712

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen.



Dr. VINOD SHETTY
Radiology