SUBURBAN DIAGNOSTICS - KALINA, SANTACRUZ EAST



Patient Name:ARIJITA NIYOGIPatient ID:393866654

Date and Time: 8th Mar 25 12:48 PM

37 7 2 Age years months days Gender Female Heart Rate 73bpm V1 V4Patient Vitals aVR BP: 110/70 mmHg 74 kg Weight: Height: 159 cm Pulse: NA Spo2: NA V2 V5 Resp: NA Π aVL Others: Measurements V3 III aVF V6 QRSD: 86ms QT: 384ms QTcB: 423ms PR: 162ms P-R-T: 61° 74° 61° Π tricog 25.0 mm/s 10.0 mm/mV Copyright 2014-2025 Tricog Health, All Rights Rese

Sinus Rhythm Left Ventricular Hypertrophy Early repolarization with an ascending ST segment. Please correlate clinically.

REPORTED BY

Dr Naveed Sheikh PGDCC 2016/11/4694

Disclaimer: 1) Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. 2) Patient vitals are as entered by the clinician and not derived from the ECG.



PRECISE TESTING HEALTHIER LIVING

Absolute Basophils

Name Lab No. Ref By Collected	: Ms. ARIJITA NIYOGI : 393866654 : SELF : 8/3/2025 1:32:00PM	Age Gender Reported	: 37 Years : Female : 8/3/2025 10:05:42PM	MC-5460
A/c Status Collected at	: P : WALKIN - KALINA, SANTACRUZ EAST (MAIN CENTRE) 101, 1st Floor, Harbhajan Building, CST Road,	Report Status Processed at	: Interim : SDRL, VIDYAVIHAR	
	Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East, Mumbai, Maharashtra - 400009			

PARAMETER RECPARAMETERSMETHODHaemoglobin11.612.0 - 15.0 g/dLSpectrophotometricRBC3.53.8 - 4.8 mil/cmmElect. ImpedancePCV34.836.0 - 46.0 %CalculatedMCV98.781.0 - 101.0 fLMeasuredMCH32.927.0 - 32.0 pgCalculatedMCHC33.331.5 - 34.5 g/dLCalculatedMCHC33.331.5 - 34.5 g/dLCalculatedMCHC33.411.6 - 14.0 %CalculatedMCHC33.411.6 - 14.0 %CalculatedMCHC33.410.0 - 0000 /cmmElect. ImpedanceMCHC30.420.0 - 40.0 %Elect. ImpedanceMETOPY1963.81000.0 - 3000.0 /cmmCalculatedMonocytes9.52.0 - 100.0 %Elect. ImpedanceMonocytes613.7200.0 - 1000.0 /cmmCalculatedNeutrophils58.340.0 - 80.0 %Elect. ImpedanceNeutrophils58.3200.0 - 7000.0 /cmmCalculatedAbsolute Neutrophils58.3200.0 - 7000.0 /cmmCalculatedAbsolute Neutrophils1.81.0 - 60. %Elect. ImpedanceAbsolute Electionphils10.0 - 600.0 /cmmCalculatedAbsolute Neutrophils1.820.0 - 600.0 /cmmCalculatedAbsolute Neutrophils10.6 0.%20.0 - 600.0 /cmmCalculatedAbsolute Neutrophils0.020.0 - 600.0 /cmmCalculatedAbsolute Reserververververververververververververve		ami Healthcare Belo BC (Complete Blood		
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PCV 34.8 36.0 - 46.0 % Calculated MCV 98.7 81.0 - 101.0 fL Measured MCH 32.9 27.0 - 32.0 pg Calculated MCHC 33.3 31.5 - 34.5 g/dL Calculated MCW 13.4 11.6 - 14.0 % Calculated MDV 13.4 11.6 - 14.0 % Calculated MEC PARAMETERS Valuated Calculated VBC Total Count 6460 4000 - 10000 /cmm Elect. Impedance VEC DIFFERENTIAL AND ABSOLUTE COUVET Valuated Impedance Monocytes 90.4 20.0 - 40.0 % Calculated Monocytes 1963.8 1000.0 - 3000.0 /cmm Calculated Monocytes 9.5 2.0 - 10.0 % Calculated Neutrophils 68.3 40.0 - 80.0 % Calculated Absolute Neutrophils 376.2 2000.0 - 7000.0 /cmm Calculated Monocytes 136.2 200.0 - 7000.0 /cmm Calculated Monocytes 10.66.2 200.0 - 7000.0 /cmm Calculated <td>Haemoglobin</td> <td>11.6</td> <td>12.0 - 15.0 g/dL</td> <td>Spectrophotometric</td>	Haemoglobin	11.6	12.0 - 15.0 g/dL	Spectrophotometric
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Neutrophils 58.3 40.0 - 80.0 % Absolute Neutrophils 3766.2 2000.0 - 7000.0 /cmm Calculated Eosinophils 1.8 1.0 - 6.0 % Calculated Absolute Eosinophils 116.3 20.0 - 500.0 /cmm Calculated	Monocytes	9.5	2.0 - 10.0 %	
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Eosinophils1.81.0 - 6.0 %Absolute Eosinophils116.320.0 - 500.0 /cmmCalculated	Neutrophils	58.3	40.0 - 80.0 %	
Absolute Eosinophils 116.3 20.0 - 500.0 /cmm Calculated	Absolute Neutrophils	3766.2	2000.0 - 7000.0 /cmm	Calculated
	Eosinophils	1.8	1.0 - 6.0 %	
Basophils 0.0 0.1 - 2.0 %	Absolute Eosinophils	116.3	20.0 - 500.0 /cmm	Calculated
	Basophils	0.0	0.1 - 2.0 %	

20.0 - 100.0 /cmm

0.0

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Calculated

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PRECISE TESTING HEALTHIER LIVING

Name Lab No. Ref By Collected	: Ms. ARIJITA NIYOGI : 393866654 : SELF : 8/3/2025 1:32:00PM	Age Gender Benerted	: 37 Years : Female : 8/3/2025 10:05:42PM	MC-5460
A/c Status Collected at	 : 0/3/2025 1:32:00PM : P : WALKIN - KALINA, SANTACRUZ EAST (MAIN CENTRE) 101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East, Mumbai, Maharashtra - 400009 	Reported Report Status Processed at	: Interim : SDRL, VIDYAVIHAR	

Aerfocami Healthcare Below 40 Male/Female <u>CBC (Complete Blood Count), Blood</u>

<u>PARAMETER</u> <u>PLATELET PARAMETERS</u>	RESULTS	BIOLOGICAL REF RANGE	<u>METHOD</u>
Platelet Count	253000	150000 - 410000 /cmm	Elect. Impedance
MPV	8.4	6.0 - 11.0 fL	Measured
PDW	14.7	11.0 - 18.0 %	Calculated
RBC MORPHOLOGY			
Hypochromia			
Microcytosis			
Macrocytosis			
Anisocytosis			
Poikilocytosis			
Polychromasia			
Target Cells			
Basophilic Stippling			
Normoblasts			
Others	Normocytic Normochromic		
WBC MORPHOLOGY			
PLATELET MORPHOLOGY			
COMMENT			

Specimen: EDTA whole blood

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Name Lab No. Ref By Collected A/c Status	: Ms. ARIJITA NIYOGI : 393866654 : SELF : 8/3/2025 1:32:00PM : P	Age Gender Reported Report Status	: 37 Years : Female : 8/3/2025 10:05:47PM : Interim	MC-5460
Collected at	: WALKIN - KALINA, SANTACRUZ EAST (MAIN CENTRE) 101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East, Mumbai, Maharashtra - 400009	Processed at	: SDRL, VIDYAVIHAR	

Aerfocami Healthcare Below 40 Male/Female ERYTHROCYTE SEDIMENTATION RATE (ESR)

PARAMETER	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
ESR, EDTA WB	52.00	2.00 - 20.00 mm/hr	Sedimentation

Clinical Significance: The erythrocyte sedimentation rate (ESR), also called a sedimentation rate is the rate red blood cells sediment in a period of time.

Interpretation:

Factors that increase ESR: Old age, Pregnancy, Anemia Factors that decrease ESR: Extreme leukocytosis, Polycythemia, Red cell abnormalities- Sickle cell disease

Limitations:

- It is a non-specific measure of inflammation.
- The use of the ESR as a screening test in asymptomatic persons is limited by its low sensitivity and specificity.

Reflex Test: C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.

Reference:

- Pack Insert
- Brigden ML. Clinical utility of the erythrocyte sedimentation rate. American family physician. 1999 Oct 1;60(5):1443-50.



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Name Lab No. Ref By Collected A/c Status	: Ms. ARIJITA NIYOGI : 393866654 : SELF : 08/03/2025 01:32:00PM : P	Age Gender Reported Report Status	: 37 Years : Female : 8/3/2025 10:05:50PM : Interim	MC-5480
Collected at	: WALKIN - KALINA, SANTACRUZ EAST (MAIN CENTRE) 101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East, Mumbai, Maharashtra - 400009	Processed at	: SDRL, VIDYAVIHAR	

Aerfocami Healthcare Below 40 Male/Female

PARAMETER	<u>RESULTS</u>	BIOLOGICAL REF RANGES	METHOD
GLUCOSE (SUGAR) PP, Fluoride Plasma PP	60.00	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
Note : ADA recommendations, AACC	Wallach's interpretat	ion of diagnostic tests 10th edition	
CREATININE, Serum	0.70	0.55 - 1.02 mg/dL	Enzymatic
eGFR, Serum	113.75	(ml/min/1.73sqm)	Calculated

Normal or High: Above 90 Mild decrease: 60-89

Moderate to severe decrease:30-44

Severe decrease: 15-29 Kidney failure:<15

Mild to moderate decrease: 45-59

Note: eGFR estimation is calculated u	using 2021 CKD-E	PI GFR equation	
GLUCOSE (SUGAR) FASTING, Fluoride Plasma Fasting	71.40	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase

Note : ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition



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Name Lab No. Ref By Collected A/c Status	: Ms. ARIJITA NIYOGI : 393866654 : SELF : 8/3/2025 1:32:00PM : P	Age Gender Reported Report Status	: 37 Years : Female : 8/3/2025 10:05:53PM : Interim	MC 5469
Collected a	tt : WALKIN - KALINA, SANTACRUZ EAST (MAIN CENTRE) 101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East, Mumbai, Maharashtra - 400009	Processed at	: SDRL, VIDYAVIHAR	

	Aerfocami Healthcare	Below 40 Male/Female	
<u>PARAMETER</u> BILIRUBIN (TOTAL), Serum	<u>RESULTS</u> 0.69	BIOLOGICAL REF RANGE 0.30 - 1.20 mg/dL	<u>METHOD</u> Vanadate oxidation
BILIRUBIN (DIRECT), Serum	0.20	0.00 - 0.30 mg/dL	Vanadate oxidation
BILIRUBIN (INDIRECT), Serum	0.49	<1.20 mg/dL	Calculated
SGOT (AST), Serum	20.60	<34.00 U/L	Modified IFCC
SGPT (ALT), Serum	16.30	10.00 - 49.00 U/L	Modified IFCC
GAMMA GT, Serum	18.00	<38.00 U/L	Modified IFCC
ALKALINE PHOSPHATASE, Serum	89.50	46.00 - 116.00 U/L	Modified IFCC
BLOOD UREA,Serum	21.30	19.29 - 49.28 mg/dL	Calculated
BUN, Serum	9.95	9.00 - 23.00 mg/dL	Urease with GLDH
URIC ACID, Serum	6.00	3.10 - 7.80 mg/dL	Uricase/Peroxidas e
TOTAL PROTEINS, Serum	7.20	5.70 - 8.20 g/dL	Biuret
Albumin Serum	4.60	3.20 - 4.80 g/dL	BCG
GLOBULIN Serum	2.60	2.30 - 3.50 g/dL	Calculated
A/G RATIO Serum	1.77	1.00 - 2.00	Calculated



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Name	: Ms. ARIJITA NIYOGI		
Lab No.	: 393866654	Age	: 37 Years
Ref By	: SELF	Gender	: Female
Collected	: 08/03/2025 01:32:00PM	Reported	: 8/3/2025 10:05:57PM
A/c Status	: P	Report Status	: Interim
Collected at	: WALKIN - KALINA, SANTACRUZ EAST (MAIN CENTRE) 101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East, Mumbai, Maharashtra - 400009	Processed at	: SDRL, VIDYAVIHAR

Aerfocami Healthcare Below 40 Male/Female GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGES	METHOD
Glycosylated Hemoglobin (HbA1c) ,EDTA WB	4.6	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG),EDTA WB	85.3	mg/dL	Calculated

Intended use:

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

Clinical Significance:

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

Test Interpretation:

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

Factors affecting HbA1c results:

Increased in: High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, plenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

Reflex tests: Blood glucose levels, CGM (Continuous Glucose monitoring)

References: ADA recommendations, AACC, Wallach is interpretation of diagnostic tests 10th edition.

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Name	: Ms. ARIJITA NIYOGI	Age	: 37 Years
Lab No.	: 393866654	Gender	: Female
Ref By	: SELF	Reported	: 8/3/2025 10:06:00PM
Collected	: 08/03/2025 01:32:00PM	Benert Status	: Interim
A/c Status Collected at	: P : WALKIN - KALINA, SANTACRUZ EAST (MAIN CENTRE) 101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East, Mumbai, Maharashtra - 400009	Report Status Processed at	

Aerfocami Healthcare Below 40 Male/Female LIPID PROFILE					
PARAMETER	RESULTS	BIOLOGICAL REF RANGES	METHOD		
CHOLESTEROL, Serum	176	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD		
TRIGLYCERIDES, Serum	93	Normal: <150 mg/dl Borderline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	Enzymatic colorimetric		
HDL CHOLESTEROL Serum	48	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Elimination/ Catalase		
NON HDL CHOLESTEROL, Serum	128	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated		
LDL CHOLESTEROL Serum	109	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl	Calculated		
VLDL CHOLESTEROL Serum	19	< /= 30 mg/dl	Calculated		
CHOL / HDL CHOL RATIO, Serum	4	0-4.5 Ratio	Calculated		
LDL CHOL / HDL CHOL RATIO, Serum	2	0-3.5 Ratio	Calculated		

Reference:

1) Executive Summary of the Third Report of the National Cholesterol Education Program (NCEP) Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults (Adult Treatment Panel III).

2) Pack Insert.

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Name	: Ms. ARIJITA NIYOGI		
Lab No.	: 393866654	Age	: 37 Years
Ref By	: SELF	Gender	: Female
Collected	: 08/03/2025 01:32:00PM	Reported	: 8/3/2025 10:06:00PM
A/c Status	: P	Report Status	: Interim
Collected at	: WALKIN - KALINA, SANTACRUZ EAST (MAIN CENTRE) 101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East, Mumbai, Maharashtra - 400009	Processed at	: SDRL, VIDYAVIHAR

Aerfocami Healthcare Below 40 Male/Female THYROID FUNCTION TESTS

PARAMETER	RESULTS	BIOLOGICAL REF RANGES	METHOD
Free T3, Serum	4.10	3.50 - 6.50 pmol/L	CLIA
Free T4 Serum	11.70	11.50 - 22.70 pmol/L	CLIA
sensitiveTSH Serum	6.12	0.55-4.78 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0	CLIA

Interpretation:

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

Clinical Significance:

- 1. TSH Values between high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2. TSH values may be trasiently altered becuase of non thyroidal illness like severe infections, liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation	
Нigh	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone recovery phase of nonthyroidal illness, TSH Resistance	
нigh	Low	Low	Hypothyroidism, Autoimmune thyroiditis,post radio liodine Rx, post thyroidectomy,anti thyroid drugs, ltyrosine kinase inhibitors & amiodarone amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.	
Low	High	High	Hyperthyroidism, Graves disease,toxic multinodular goiter,toxic adenoma, excess iodine or thyroxine lintake, pregnancy related (hyperemesis gravidarum hydatiform mole)	
Low	Normal	Normal	Subclinical Hyperthyroidism,recent Rx for hyperthy- roidism, drugs like steroids & dopamine, Non thyroidal illness.	
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.	
High	High	High	Interfering anti TPO antibodies,Drug interference: Amiodarone,Heparin, Beta Blockers, steroids & anti	

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Name	: Ms. ARIJITA NIYOGI		
	: 393866654	Age	: 37 Years
Ref By	: SELF	Gender	: Female
Collected	: 08/03/2025 01:32:00PM	Reported	: 8/3/2025 10:06:00PM
A/c Status	: P	Report Status	: Interim
Collected at	: WALKIN - KALINA, SANTACRUZ EAST (MAIN CENTRE) 101, 1st Floor, Harbhajan Building, CST Road,	Processed at	: SDRL, VIDYAVIHAR
	Kalina Above HDFC Bank, Above Indusind Bank,		
	Kalina, Opp. Petrol Pump, Santacruz East,		
	Mumbai, Maharashtra - 400009		

Aerfocami Healthcare Below 40 Male/Female THYROID FUNCTION TESTS

PARAMETER		RESULTS	BIOLOGICAL REF RANGES	METHOD
		epileptics.		I

Diurnal Variation: TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am , and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7% (with in subject variation)

Reflex Tests: Anti thyroid Antibodies, USG Thyroid , TSH receptor Antibody. Thyroglobulin, Calcitonin

Limitations:

- 1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
- 2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results.this assay is designed to minimize interference from heterophilic antibodies.

Reference:

- 1. O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2. Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3. Tietz ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4. Biological Variation: From principles to Practice-Callum G Fraser (AACC Press)

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Name Lab No. Ref By Collected A/c Status	: Ms. ARIJITA NIYOGI : 393866654 : SELF : 8/3/2025 1:32:00PM : P	Age Gender Reported Report Status	: 37 Years : Female : 8/3/2025 10:06:05PM : Interim	MC.
Collected at	: WALKIN - KALINA, SANTACRUZ EAST (MAIN CENTRE) 101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East, Mumbai, Maharashtra - 400009	Processed at	: SDRL, VIDYAVIHAR	

	Aerfocami Healthcare Below 40 Male/Female
	BLOOD GROUPING & Rh TYPING
PARAMETER	RESULTS
ABO GROUP	0

Rh Typing Positive

NOTE: Test performed by automated Erythrocytes magnetized technology (EMT) which is more sensitive than conventional methods.

Specimen: EDTA Whole Blood and/or serum

Clinical significance:

ABO system is most important of all blood group in transfusion medicine

Limitations:

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

Refernces:

1. Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia



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OTHERS

REGISE TESTING HEALTHIER LIVING

Name Lab No. Ref By Collected A/c Statu	- ·	Age Gender Reported Report Status	: 37 Years : Female : 8/3/2025 10:06:09PM : Interim	MC-5469
Collected	at : WALKIN - KALINA, SANTACRUZ EAST (MAIN CENTRE) 101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East, Mumbai, Maharashtra - 400009	Processed at	: SDRL, VIDYAVIHAR	

	URINE EXAMINATIO	ON REPORT	
PARAMETER	<u>RESULTS</u>	BIOLOGICAL REF RANGE	<u>METHOD</u>
PHYSICAL EXAMINATION			
Color	Pale Yellow	Pale Yellow	Light scattering
Transparency	CLEAR	Clear	Light scattering
CHEMICAL EXAMINATION			
Specific Gravity	1.005	1.002-1.035	Refractive index
Reaction (pH)	5.5	5-8	pH Indicator
Proteins	Absent	Absent	Protein error principle
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Negative	Negative	Griess Test
MICROSCOPIC EXAMINATION			
(WBC)Pus cells / hpf	0.8	0-5/hpf	
Red Blood Cells / hpf	0.00	0-2/hpf	
Epithelial Cells / hpf	1.2	0-5/hpf	
Hyaline Casts	0.00	0-1/hpf	
Pathological cast	0.00	0-0.3/hpf	
Calcium oxalate monohydrate crystals	0.1	0-1.4/hpf	
Calcium oxalate dihydrate crystals	0.00	0-1.4/hpf	
Triple Phosphate crystals	0.00	0-1.4/hpf	
Uric acid crystals	0.00	0-1.4/hpf	
Amorphous debris	Absent	Absent	
Bacteria / hpf	14.10	0-29.5/hpf	
Yeast	Absent	Absent	

Note: Microscopic examination is performed by Automated Cuvette based technology. All the Abnormal results are confirmed by reagent strips and Manual method. The Microscopic examination findings are mentioned in

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Name	: Ms. ARIJITA NIYOGI		
Lab No.	: 393866654	Age	: 37 Years
Ref By	: SELF	Gender	: Female
Collected	: 8/3/2025 1:32:00PM	Reported	: 8/3/2025 10:06:09PM
A/c Status	: P	Report Status	: Interim
Collected at	: WALKIN - KALINA, SANTACRUZ EAST (MAIN CENTRE) 101, 1st Floor, Harbhajan Building, CST Road, Kalina Above HDFC Bank, Above Indusind Bank, Kalina, Opp. Petrol Pump, Santacruz East, Mumbai, Maharashtra - 400009	Processed at	: SDRL, VIDYAVIHAR

PARAMETER

URINE EXAMINATION REPORT

Dr Namrata Raul

MD. Biochemistry

Consultant Biochemist

RESULTS

BIOLOGICAL REF RANGE

METHOD

Dr Privanka Sunil Pagare

MD Pathology

Sr. Pathologist

decimal numbers as they are the arithmetic mean of the multiple fields scanned using microscopy. Reference: Pack Insert.

Dr Trupti Shetty MD Pathology Deputy HOD

Dr Leena Salunkhe DPB HOD

Dr Vrushali Shroff MD Pathology Sr. Pathologist



Result/s to follow: FUS and KETONES, EXAMINATION OF FAECES, Glucose & Ketones, Urine

IMPORTANT INSTRUCTIONS

The published test results relate to the submitted specimen. All test results are dependent on the quality of the sample received by the laboratory Laboratory tests should be clinically correlated by a physician and are merely a tool to help arrive at a diagnosis. Unforeseen circumstances may cause a delay in the delivery of the report. Inconvenience is regretted. Certain tests may require further testing at an additional cost for derivation of exact value. Kindly submit the request within 72 hours post-reporting. The Court/Forum at Mumbai shall have exclusive jurisdiction in all disputes/claims concerning the test(s) & or results of the test(s). Test results are not valid for medico-legal purposes. This computer-generated medical diagnostic report has been verified by a doctor or an authorized medical professional. A physical signature is not required for this report. (#) sample drawn from an external source.

If test results are alarming or unexpected, the client is advised to contact customer care immediately for possible remedial action.

Tel: 022-61700000, Email: customerservice@suburbandiagnostics.com <mailto:customerservice@suburbandiagnostics.com>

West Reference Lab, Mumbai, is a CAP (8036028) Accredited laboratory.



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MUMBAI OFFICE: Suburban Diagnostics, Aston, 2rd Floor, Sundervan Complex, Andheri West, Mumbai - 400053.

WEST REFERENCE LABORATORY: Shop No. 9, 101 to 105, Skyline Wealth Space Building, Premier Road, Vidyavihar West, Mumbai - 400086.

Suburban Diagnostics Kalina

Patient Details Date: 08-Mar-25 Name: ARIJITA NIYOGI ID: 393866654 Age: 37 y Say: F Time: 1:29:39 PM

Noight: 159 cms. Weight: 74 Kg.

Clinical History: Routine Test

Medications: NONE

Test Details

Protocol:BrucePr.MHR:183 bpmTHR:155 (85 % of Pr.MHR) bpmTotal Exec. Time:6 m 26 sMax. HR:162 (89% of Pr.MHR)bpmMax. Mets:10.20Max. BP:150 / 80 mmHgMax. BP x HR:24300 mmHg/minMin. BP x HR:4970 mmHg/minTest Termination Criteria:Target HR attainedMax. BP x HR:24300 mmHg/minMin. BP x HR:4970 mmHg/min

Protocol Details

Stage Name	Stage Time (min : sec)	Mets	Speed (mph)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
Supine	0:32	1.0	0	0	71	110/70	-0.85 aVR	1.42
Standing	0:7	1.0	0	0	72	110/70	-1.06 aVR	1.42
Hyperventilation	0:23	1.0	0	0	72	110 / 70	-1.06 aVR	1.77
	3:0	4.6	1.7	10	127	120/80	-1.91 V5	3.54
2	3:0	7.0	2.5	12	150	130/80	-2.34	4.95
Peak Ex	0:26	10.2	3.4	14	162	150/80	-1.70 aVF	3.89
Recovery(1)	2:0	1.8	1	0	91	140/80	-1.49 aVR	3.54
Recovery(2)	2:0	1.0	0	0	88	130/80	-0.64 aVR	1.77
Recovery(3)	0:14	1.0	0	0	88	120 / 80	-0.64 aVR	1.42

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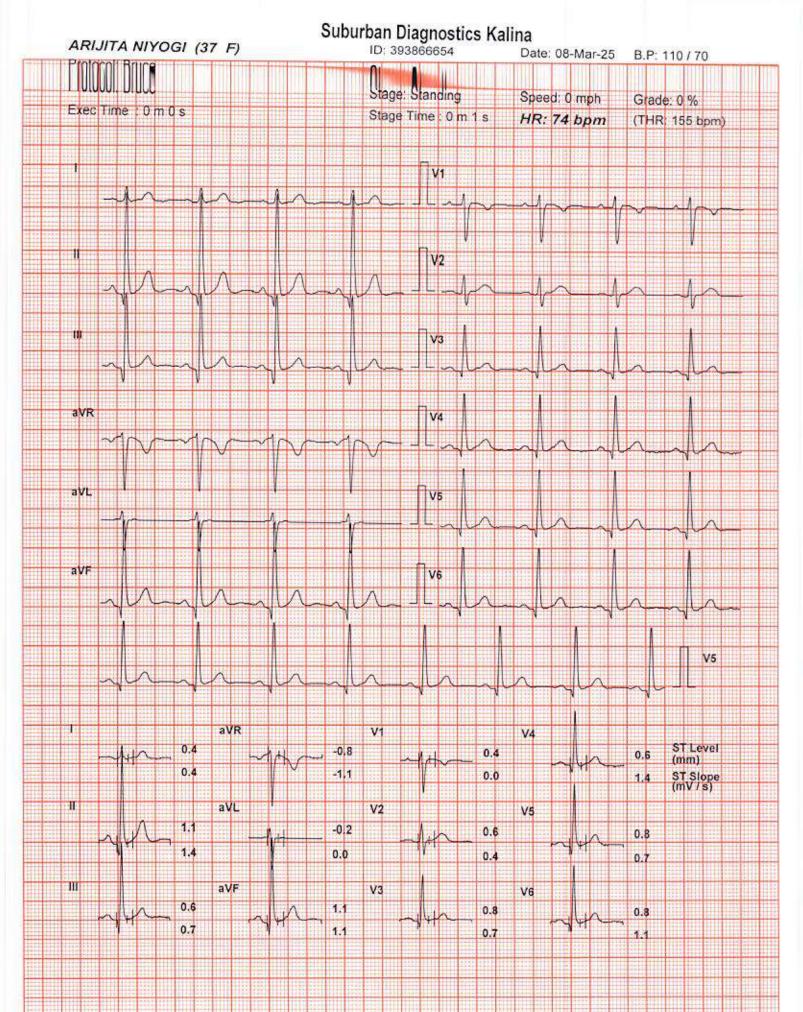
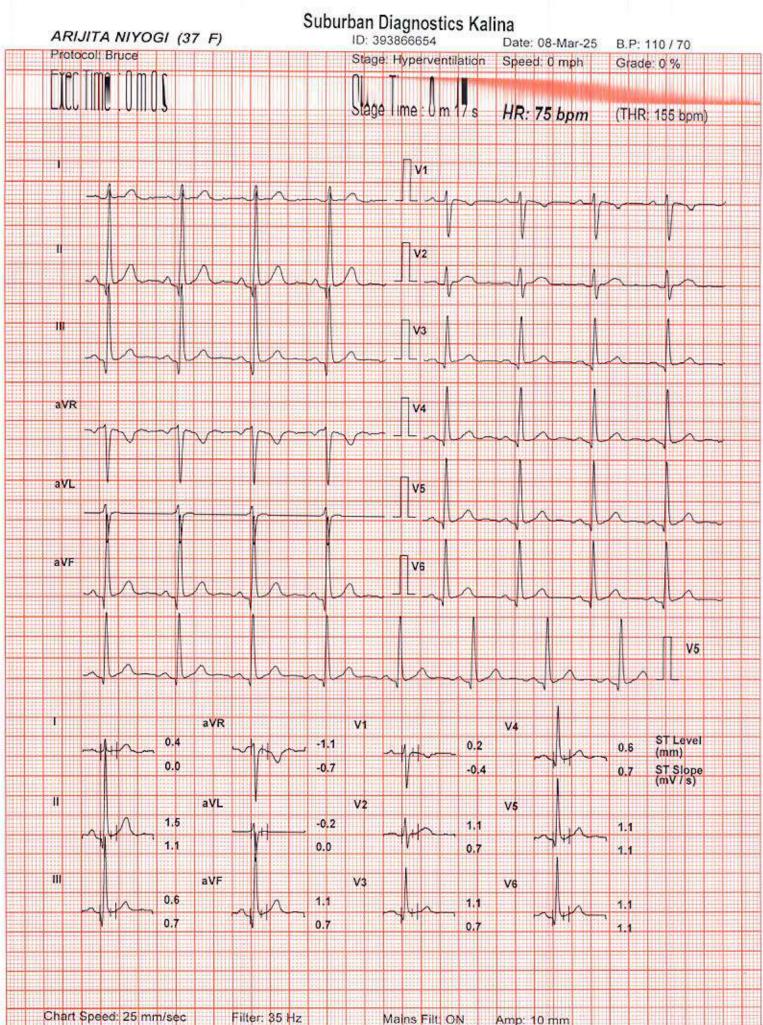


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 Linked Median



Schiller Spandan V 4 51 iso = R - 60 ms / = R + 60 ms Post 1 = (+ 60 ms Links A Mark

Suburban Diagnostics Kalina ID: 393866654 Da ARIJITA NIYOGI (37 F) Date: 08-Mar-25 B.P: 120 / 80 Protocol: Bruce Stage: 1 Speed: 1.7 mph Grade: 10 % [mc ٢ľ Claue HR: 129 bpm I Mé : 2 (THR: 155 bpm) V1 н ٧2 10 V3 aVR V4 aVL V5 aVF V6 ٧5 1 aVR V1 V4 ST Level (mm) 0.2 -0.6 0.0 0.6 0.7 ST Slope (mV/s) -2.1 -0.4 1.8 П aVL V2 V5 0.8 0.4 0.8 1.3 Λ 3.2 0.0 1.1 1.8 Ш aVF V3 V6 0.0 0.2 0.4 0.6 1.4 2.1 1.1 1.4

 Chart Speed: 25 mm/sec
 Filter: 35 Hz
 Mains Filt: ON
 Amp: 10 mm

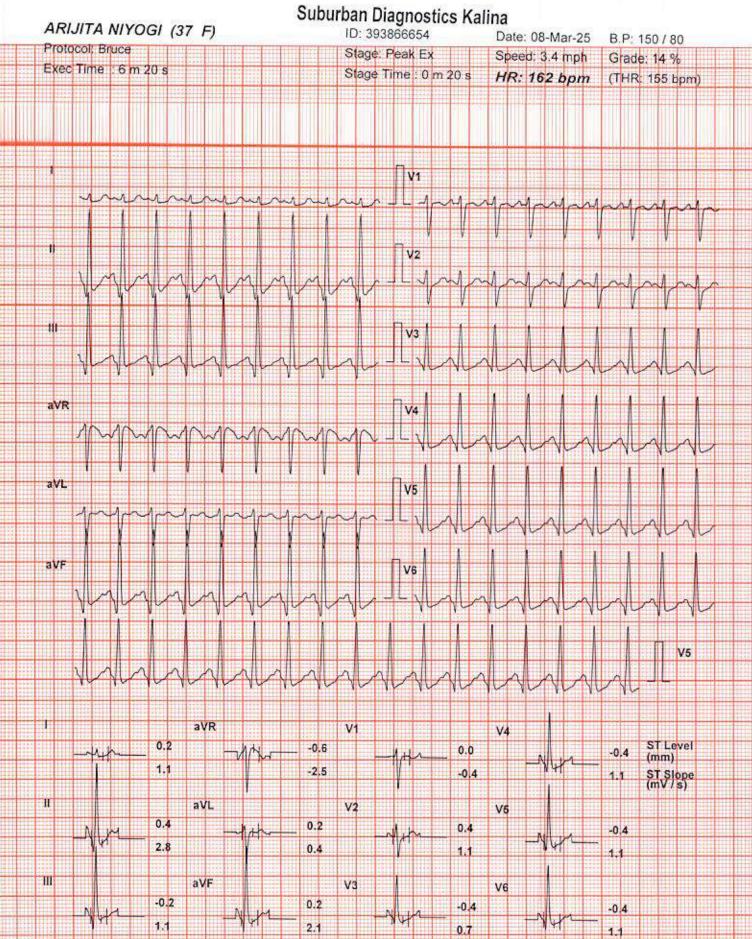
 Schiller Spandan V 4.51
 Iso = R - 60 ms
 J = R + 60 ms
 Post J = J + 60 ms
 Linked Median

Suburban Diagnostics Kalina

ARIJI	TA NIY	OGI (3	7 F)	Subu	ID: 3938666	ostics Kal	ina Date: 08-Mar-25	B.P: 130 / 80
Protoco	ol: Bruce				Stage: 2		Speed: 2.5 mph	Grade: 12 %
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				0.4		1,4		1.1
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Chart Speed: 25 mm/sec Filter: 35 Hz Mains Filt: ON Amp: 10 mm

ARIJITA NIYOGI (37 F)



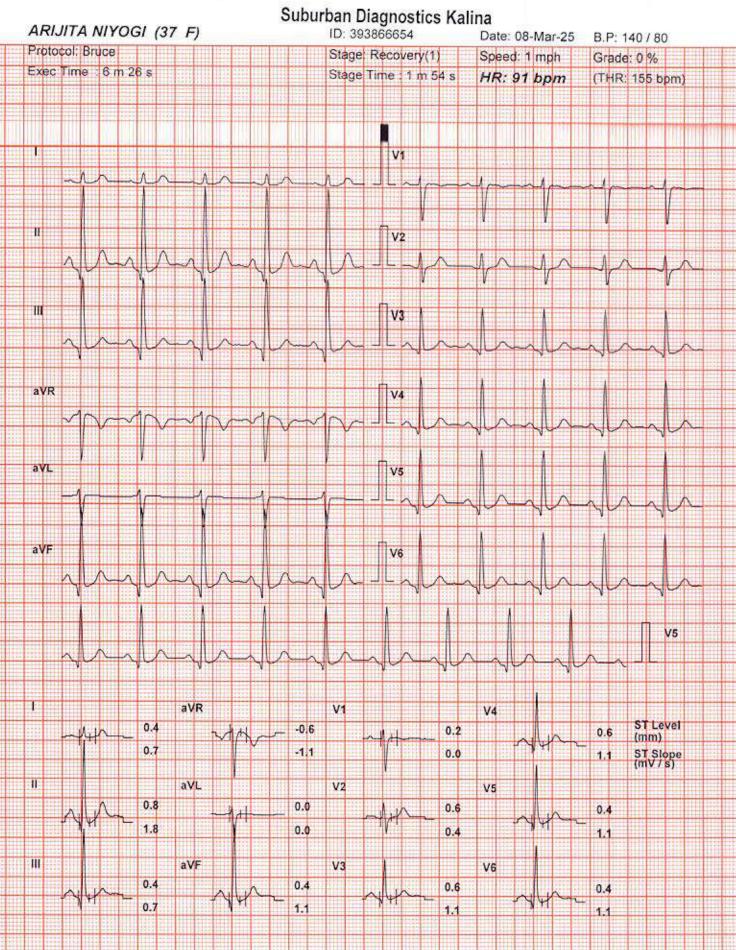


Chart Speed: 25 mm/sec Filter: 35 Hz Mains Filt: ON Amp: 10 mm

ARIJITA NIYOGI (37 F)

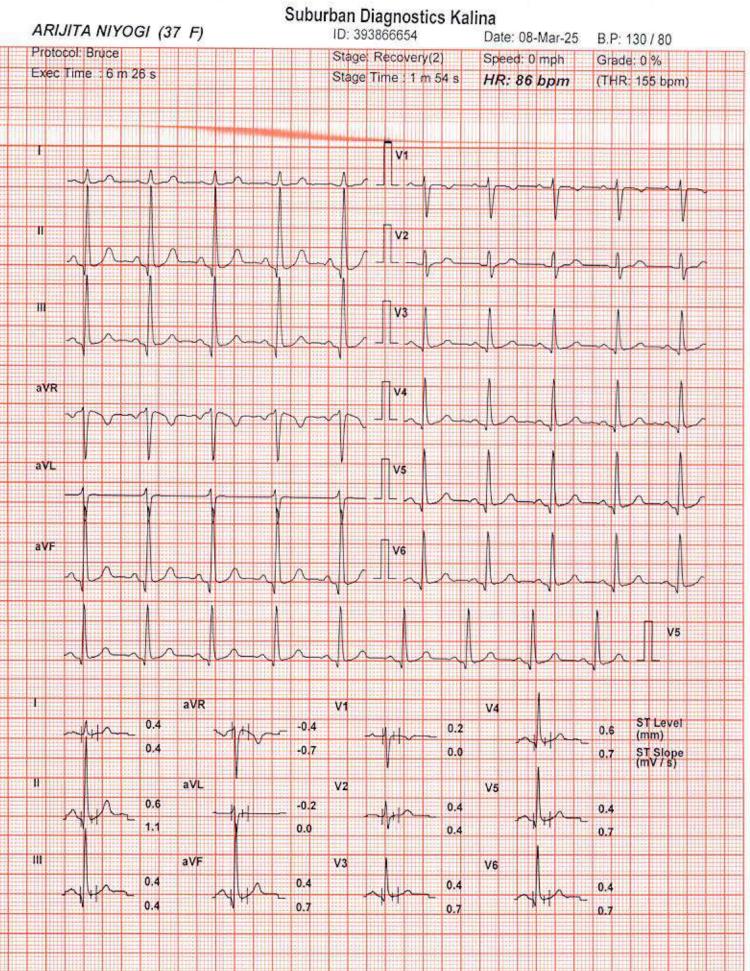
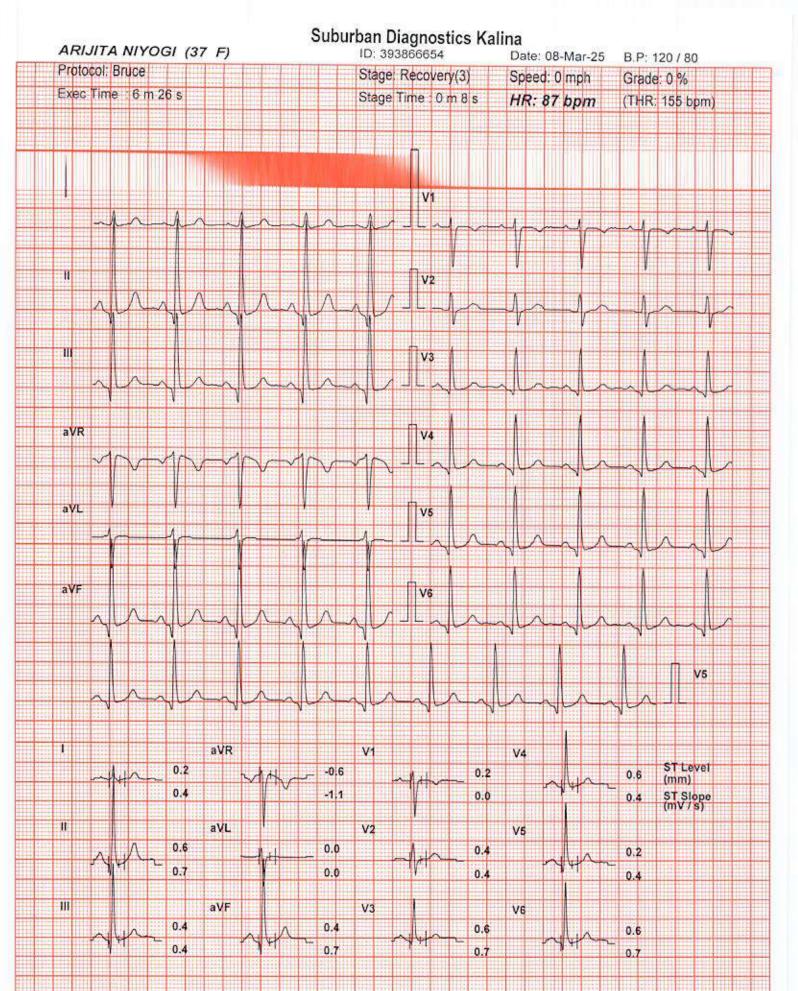


Chart Speed: 25 mm/sec Filter: 35 Hz Mains Filt: ON Amp: 10 mm





Suburban Diagnostics (1) Pvt. Ltd Sarden Sarden No. 022-61700000 Suburban Diagnostics (1) Pvt. Ltd Road, N'ta N'y ? Arugita N'y ?

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B.P - 24.2

PHYSICAL Patient Name: Anjita Niyogi CID: 393866654 Sex/Age: P37 08/03/2015 Date: Rheymatoid arthuitis ": 4 yrs on medicinessin last-1yp. History and Complaints: EXAMINATION FINDINGS: Height: 159 Temp: Weight: 74.2 Skin: Blood Pressure: 110/70 Nails: Pulse: 7-3 Lymph Node: Systems Cardiovascular: Respiratory: Genitourinary: GI System: CNS: IMPRESSION: Hemoglobin 11-6. HDZ 48 LDZ 109. USY Post-Cholecystechny. ADVICE: Refer to Physician.

CHIEF COMPLAINTS:

- 1) Hypertension:
- 2) IHD
- 3) Arrhythmia
- 4) Diabetes Mellitus
- 5) Tuberculosis
- 6) Asthama
- 7) Pulmonary Disease
- 8) Thyroid/ Endocrine disorders
- 9) Nervous disorders
- 10) Gl system
- 11) Genital urinary disorder
- NIL 12) Rheumatic joint diseases or symptoms
- 13) Blood disease or disorder
- 14) Cancer/lump growth/cyst

NIL

- 15) Congenital disease
- 16) Surgeries

Cholecystectory 22/10/2021.

Sazo Eszi) 9 gurati (25) Formte.

Folitroox:

PERSONAL HISTORY:

- 1) Alcohol
- 2) Smoking mixed.
- 3) Diet
- 4) Medication

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Dr. D.G. HATALKAR R.No. 61067 M.D. (Ob.Gy)



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·	EXAMINATION				
	RS	1	1200	· · · · · · · · · · · · · · · · · · ·	
	BREAST EXAMINATION		ACRE	cvs 5	S
	PER VAGINAL		CON !!	PER ABDOMEN	MAD
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	PERSONAL HISTORY				
	ALLERGIES				
		:	Drugt	BLADDER HABITS	2
	BOWEL HABITS	;	Nml.		NAD
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	CHIEF GYNAE COMPLAINTS :				15 20L)
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Name	: MS ARIJITA NIYOGI		
Age / Sex	: 37 Years/Female		
Ref. Dr	i	100	
Reg. Location	Kalina Santaama E. (M.).	Reg. Date	: 08-Mar-2025
g	: Kalina, Santacruz East Main Centre	Reported	: 08-Mar-2025 / 12:23

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

<u>IMPRESSION:</u> NO SIGNIFICANT ABNORMALITY IS DETECTED.

-----End of Report-----

R18 Stanz

Dr R K Bhandari M D , DMRE MMC REG NO. 34078

R E P O R

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CID	: 393866654			R
Name	: MS ARIJITA NIYOGI			ĸ
Age / Sex	:37 Years/Female			Т
Ref. Dr	; self	Reg. Date	: 08-Mar-2025	
Reg. Location	: Kalina, Santacruz East Main Centre	Reported	: 08-Mar-2025 / 15:15	

USG WHOLE ABDOMEN

LIVER:

in a second

The liver is normal in size (15.0 cm), shape and smooth margins. It shows normal parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein and CBD appears normal.

GALL BLADDER:

The gall bladder is absent consistent with post-cholecystectomy status.

PANCREAS:

The pancreas is well visualised and appears normal. No evidence of solid or cystic mass lesion.

KIDNEYS:

Both the kidneys are normal in size shape and echotexture. No evidence of any calculus, hydronephrosis or mass lesion seen. Right kidney measures 9.6 x 3.9 cm. Left kidney measures 10.3 x 4.3 cm.

SPLEEN:

The spleen is normal in size and echotexture.No evidence of focal lesion is noted. There is no evidence of any lymphadenopathy or ascites.

URINARY BLADDER:

The urinary bladder is well distended and reveal no intraluminal abnormality.

UTERUS:

The uterus is anteverted and appears normal. It measures 6.1 x 3.9 x 3.2 cm in size. The endometrial thickness is 6 mm.

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	CID	: 393866654			R
	Name	: MS ARIJITA NIYOGI			-
	Age / Sex	:37 Years/Female			1
	Ref. Dr	: self	Reg. Date	: 08-Mar-2025	
	Reg. Location	: Kalina, Santacruz East Main Centre	Reported	: 08-Mar-2025 / 15:15	

OVARIES:

Both the ovaries are well visualised and appears normal. There is no evidence of any ovarian or adnexal mass seen. Right ovary = 3.0×1.2 cm Left ovary = 3.2×1.8 cm

IMPRESSION:-Post-cholecystectomy status. No significant abnormality is seen.

-----End of Report-----

DR MAHIMA SETHI (MBBS, MD RADIOLOGY) REG NO. 2018/12/6157



Suburban Diagnostics (1) Pvt. Ltd Sarden Sarden No. 022-61700000 Suburban Diagnostics (1) Pvt. Ltd Road, N'ta N'y ? Arugita N'y ?

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B.P - 24.2

PHYSICAL Patient Name: Anjita Niyogi CID: 393866654 Sex/Age: P37 08/03/2015 Date: Rheymatoid arthuitis ": 4 yrs on medicinessin last-1yp. History and Complaints: EXAMINATION FINDINGS: Height: 159 Temp: Weight: 74.2 Skin: Blood Pressure: 110/70 Nails: Pulse: 7-3 Lymph Node: Systems Cardiovascular: Respiratory: Genitourinary: GI System: CNS: IMPRESSION: Hemoglobin 11-6. HDZ 48 LDZ 109. USY Post-Cholecystechny. ADVICE: Refer to Physician.

CHIEF COMPLAINTS:

- 1) Hypertension:
- 2) IHD
- 3) Arrhythmia
- 4) Diabetes Mellitus
- 5) Tuberculosis
- 6) Asthama
- 7) Pulmonary Disease
- 8) Thyroid/ Endocrine disorders
- 9) Nervous disorders
- 10) Gl system
- 11) Genital urinary disorder
- NIL 12) Rheumatic joint diseases or symptoms
- 13) Blood disease or disorder
- 14) Cancer/lump growth/cyst

NIL

- 15) Congenital disease
- 16) Surgeries

Cholecystectory 22/10/2021.

Sazo Eszi) 9 gurati (25) Formte.

Folitroox:

PERSONAL HISTORY:

- 1) Alcohol
- 2) Smoking mixed.
- 3) Diet
- 4) Medication

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Dr. D.G. HATALKAR R.No. 61067 M.D. (Ob.Gy)



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·	EXAMINATION				
	RS	1	1200	· · · · · · · · · · · · · · · · · · ·	
	BREAST EXAMINATION		ACBE	cvs 5	S
	PER VAGINAL		CON !!	PER ABDOMEN	MAD
	MENSTRUAL HISTORY		M		
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1	FAMILY HISTORY :		and eyske	dory.	
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Dr. D. C. Harris



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Name	: MS ARIJITA NIYOGI		
Age / Sex	: 37 Years/Female		
Ref. Dr	i	100	
Reg. Location	Kalina Santaama E. (M.).	Reg. Date	: 08-Mar-2025
g	: Kalina, Santacruz East Main Centre	Reported	: 08-Mar-2025 / 12:23

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

The cardiac size and shape are within normal limits.

The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

<u>IMPRESSION:</u> NO SIGNIFICANT ABNORMALITY IS DETECTED.

-----End of Report-----

R18 Stanz

Dr R K Bhandari M D , DMRE MMC REG NO. 34078

R E P O R

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CID	: 393866654			R
Name	: MS ARIJITA NIYOGI			ĸ
Age / Sex	:37 Years/Female			Т
Ref. Dr	; self	Reg. Date	: 08-Mar-2025	
Reg. Location	: Kalina, Santacruz East Main Centre	Reported	: 08-Mar-2025 / 15:15	

USG WHOLE ABDOMEN

LIVER:

in a second

The liver is normal in size (15.0 cm), shape and smooth margins. It shows normal parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal. No evidence of any intra hepatic cystic or solid lesion seen. The main portal vein and CBD appears normal.

GALL BLADDER:

The gall bladder is absent consistent with post-cholecystectomy status.

PANCREAS:

The pancreas is well visualised and appears normal. No evidence of solid or cystic mass lesion.

KIDNEYS:

Both the kidneys are normal in size shape and echotexture. No evidence of any calculus, hydronephrosis or mass lesion seen. Right kidney measures 9.6 x 3.9 cm. Left kidney measures 10.3 x 4.3 cm.

SPLEEN:

The spleen is normal in size and echotexture.No evidence of focal lesion is noted. There is no evidence of any lymphadenopathy or ascites.

URINARY BLADDER:

The urinary bladder is well distended and reveal no intraluminal abnormality.

UTERUS:

The uterus is anteverted and appears normal. It measures 6.1 x 3.9 x 3.2 cm in size. The endometrial thickness is 6 mm.

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	Name	: MS ARIJITA NIYOGI			-
	Age / Sex	:37 Years/Female			1
	Ref. Dr	: self	Reg. Date	: 08-Mar-2025	
	Reg. Location	: Kalina, Santacruz East Main Centre	Reported	: 08-Mar-2025 / 15:15	

OVARIES:

Both the ovaries are well visualised and appears normal. There is no evidence of any ovarian or adnexal mass seen. Right ovary = 3.0×1.2 cm Left ovary = 3.2×1.8 cm

IMPRESSION:-Post-cholecystectomy status. No significant abnormality is seen.

-----End of Report-----

DR MAHIMA SETHI (MBBS, MD RADIOLOGY) REG NO. 2018/12/6157



Suburban Diagnostics (1) Pvt. Ltd Sarden Sarden No. 022-61700000 Suburban Diagnostics (1) Pvt. Ltd Road, N'ta N'y ? Arugita N'y ?

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NIL

- 13) Blood disease or disorder
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- 15) Congenital disease
- 16) Surgeries

Cholecystectory 22/10/2021.

NIL

PERSONAL HISTORY:

- 1) Alcohol
- 2) Smoking mixed.
- 3) Diet
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Sazo Eszi) 9 gurati (25) Formte. Folitroox:

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Dr. D.G. HATALKAR R.No. 61067 M.D. (Ob.Gy)



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	BREAST EXAMINATION		ACRE	cvs 5	S
	PER VAGINAL		CON !!	PER ABDOMEN	MAD
	MENSTRUAL HISTORY		M		
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R18 Stanz

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Name	: MS ARIJITA NIYOGI			ĸ
Age / Sex	:37 Years/Female			Т
Ref. Dr	; self	Reg. Date	: 08-Mar-2025	
Reg. Location	: Kalina, Santacruz East Main Centre	Reported	: 08-Mar-2025 / 15:15	

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	Ref. Dr	: self	Reg. Date	: 08-Mar-2025	
	Reg. Location	: Kalina, Santacruz East Main Centre	Reported	: 08-Mar-2025 / 15:15	

OVARIES:

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IMPRESSION:-Post-cholecystectomy status. No significant abnormality is seen.

-----End of Report-----

DR MAHIMA SETHI (MBBS, MD RADIOLOGY) REG NO. 2018/12/6157