




# PARKLINE DIAGNOSTICS PVT. LTD.

L.G. 3, 4 & 5, Bhuvana Towers, S.D. Road, Secunderabad - 500 003 Tel : 040-42038139, 27845852  
7995421787, 7093445852 Email : parklinediagnostics@gmail.com www.parklinediagnostics.com



NABL Accredited  
Certificate No.:MC-2566

## TEST REPORT

Name	: MS.YESHASREE [12308]	TID/SID	: UMR1159106/ 25774512
Age / Gender	: 32 Years / Female	Registered on	: 08-Jul-2023 / 09:05 AM
Ref.By	: -	Collected on	: 08-Jul-2023 / 09:09 AM
Req.No	:  BIL3254398	Reported on	: 08-Jul-2023 / 13:28 PM
		Reference	: Medi Wheel

### DEPARTMENT OF CLINICAL PATHOLOGY

### Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Colour Method:Photo detectors(instrument)	Light Yellow		Light Yellow
Appearance Method:Photo diode array sensor	Clear		Clear
Specific gravity Method:Ion concentration/colour indicator	1.005		1.003-1.030
Reaction and pH Method:Double Indicator	5.5		5.0-8.0
Protein Method:Protein Error of pH indicators	Negative		Negative
Glucose Method:Double sequential enzymatic/GOD-PAP	Negative		Negative
Urobilinogen Method:Reagent strip/Reflectance photometry	Negative		0.2-1.0 mg%
Ketones Method:Strip method/Nitroprusside method	Negative		Negative
Blood Method:Peroxidase	Negative		Negative
Bile Salt Method:Hays Method	Negative		Negative
Bile Pigment Method:Fouchets Method	Negative		Negative
<b>Microscopic Examination</b>			
Pus cells (leukocytes) Method:Microscopy Of Sediment	1 - 2	/hpf	0-5 /hpf
RBC (erythrocytes) Method:Microscopy Of Sediment	Nil	/hpf	0-2 /hpf
Epithelial cells Method:Microscopy Of Sediment	Nil	/hpf	0-8 /hpf
Crystals Method:Microscopy Of Sediment	Nil	/lpf	Nil /lpf

Lab Timings (Weekdays) : 7.00 am to 8.30 pm  
Sundays & Holidays : 7.00 am to 1.00 pm

Radiologists Timings (Weekdays) : 7.30 am to 1.30 pm  
& 5.45 pm to 7.45 pm  
Sundays & Holidays : 7.30 am to 9.30 am




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### DEPARTMENT OF CLINICAL PATHOLOGY

### Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Casts	Nil	/lpf	Nil
Method:Microscopy Of Sediment			/lpf
Others	Nil		Nil
Method:Microscopy Of Sediment			

\* Sample processed at Parkline

--- End Of Report ---

**Dr.Jyothi Kiranmai**  
Regd. No: 52272  
MD PATHOLOGY






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Ref.By : - Collected on : 08-Jul-2023 / 09:09 AM  
Req.No  Reported on : 08-Jul-2023 / 12:55 PM  
BIL3254398 Reference : Medi Wheel

### DEPARTMENT OF HEMATOLOGY

#### Blood Grouping ABO And Rh Typing, EDTA Whole Blood

Parameter	Results
Blood Grouping (ABO)	B
Rh Typing (D)	POSITIVE -
Method:Agglutination	

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### DEPARTMENT OF HEMATOLOGY

### Complete Blood Picture (CBP), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Hemoglobin Method:Spectrophotometry	12.3	g/dL	12.0-15.0 g/dL
Erythrocyte Count(RBC) Method:Electrical Impedence	4.2	mill /cu.mm	3.8-4.8 mill /cu.mm
PCV/HCT Method:Numeric Integration	36	%	36-46 %
MCV Method:Calculated	85	fL	83-101 fL
MCH Method:Calculated	28.8	pg	27-32 pg
MCHC Method:Calculated	33.7	gm/dL	31.5-34.5 gm/dL
RDW (CV) Method:Calculated	13.7	%	11.6-14.0 %
Total WBC Count Method:Impedence flowcytometry/Light scattering	4.5	10 <sup>3</sup> /μL	4-10 10cap;3/μL 10 <sup>3</sup> /μL
<b>Differential Count</b>			
Neutrophils Method:Flowcytometry/Microscopy	62	%	40-80 %
Lymphocytes Method:Flowcytometry/Microscopy	31	%	20-40 %
Monocytes Method:Flowcytometry/Microscopy	4	%	2-10 %
Eosinophils Method:Flowcytometry/Microscopy	3	%	1-6 %
Basophils Method:Flowcytometry/Microscopy	0	%	0-2 %
Absolute Neutrophil Count	2.79	10 <sup>3</sup> /μL	2.0-7.0 10 <sup>3</sup> /μL
Absolute Lymphocyte Count	1.4	10 <sup>3</sup> /μL	1.0-3.0 10 <sup>3</sup> /μL

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### DEPARTMENT OF HEMATOLOGY

### Complete Blood Picture (CBP), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Absolute Monocyte Count	<b>0.18</b>	10 <sup>3</sup> /μL	0.20-1.0 10 <sup>3</sup> /μL
Absolute Eosinophils Count	0.14	cells/cumm	0.02-0.5 cells/cumm
Absolute Basophil Count	<b>0</b>	10 <sup>3</sup> /μL	0.02-0.1 10 <sup>3</sup> /μL
Platelet Count	280	10 <sup>3</sup> /μL	150-410 10 <sup>3</sup> /μL
Method:Electrical Impedence			

#### Peripheral Smear

RBC Normocytic and Normochromic  
 Method:Microscopy  
 WBC Within normal limits.No abnormal cells seen.  
 Method:Microscopy  
 Platelets Discrete and adequate.Normal in morphology  
 Method:Microscopy

\* Sample processed at Parkline

--- End Of Report ---

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BIL3254398

### DEPARTMENT OF HEMATOLOGY

#### Erythrocyte Sedimentation Rate (ESR), Sodium Citrate Whole Blood

Investigation	Observed Value	Units	Biological Reference Intervals
ESR 1st Hour	06	mm/hour	0-20 mm/hour
Method:Westergren			

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Req.No	:  BIL3254398	Reported on	: 08-Jul-2023 / 09:38 AM
		Reference	: Medi Wheel

### DEPARTMENT OF CARDIOLOGY

### 2D Echo/Doppler Study

Mitral Valve	Normal
Aortic valve	Normal
Tricuspid valve	Normal
Pulmonary valve	Normal
Aorta	2.14 cm
Left Atrium	3.09 cm
Left Ventricle	LVDd:4.02 cm IVSd :0.9 cm EF:62% LVDs:2.68 cm LVPwd:0.9 cm FS:33%
RWMA	Nil
Right Atrium	Normal
Right Ventricle	Normal
Pulmonary Artery	Normal
IAS	Intact
IVS	Intact
Pericardium	Normal
Svc / Ivc	Normal
Intracardiac Masses	Nil
Doppler Study	Mitral flow: E: 0.9 m/sec A: 0.6 m/sec Aortic flow : 1.15 m/sec Pulmonary flow : 0.8 m/sec
Colour Doppler	No MR / AR / TR / PR
Conclusion	No RWMA. Normal valves/ Normal chambers. No MR/ AR/ TR / PR Good LV (LVEF 62%) / RV function. No Diastolic dysfunction. No PE/ clot/ vegetation.

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Age / Gender : 32 Years / Female

Ref.By : -

Req.No



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Collected on :

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## TEST REPORT

Name : **MS.YESHASREE [12308]** TID/SID : UMR1159106/ 25774511F  
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Ref.By : - Collected on : 08-Jul-2023 / 09:09 AM  
Req.No  Reported on : 08-Jul-2023 / 13:52 PM  
Reference : Medi Wheel  
BIL3254398

### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Blood Urea Nitrogen (BUN), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Blood Urea Nitrogen.	7.8	mg/dL	7-23 mg/dL
Method:Calculated			

#### Creatinine, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Creatinine.	0.74	mg/dL	0.50-1.20 mg/dL
Method:Alkaline Picrate			

#### Glucose Urine Fasting

Investigation	Observed Value
Urine Glucose Fasting	Nil
Method:Reagent strip/Reflectance photometry	

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Ref.By : - Collected on : 08-Jul-2023 / 09:09 AM  
Req.No  Reported on : 08-Jul-2023 / 16:35 PM  
Reference : Medi Wheel  
BIL3254398

### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Glucose Fasting (FBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Fasting Method:GOD - PAP	93	mg/dL	Normal: <100 Impaired FG: 100-125 Diabetic : $\geq$ 126 mg/dL

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Name	: MS.YESHASREE [12308]	TID/SID	: UMR1159106/ 25774513P
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Req.No	:  BIL3254398	Reported on	: 08-Jul-2023 / 16:35 PM
		Reference	: Medi Wheel

### DEPARTMENT OF CLINICAL CHEMISTRY I

### Glucose Post Prandial (PPBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Post Prandial Method:GOD - PAP	106	mg/dL	Normal : 90 - 140 Impaired Glucose Tolerance: 141-199 Diabetic : >/=200 mg/dL

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Req.No :  Reported on : 08-Jul-2023 / 16:35 PM  
Reference : Medi Wheel  
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### DEPARTMENT OF CLINICAL CHEMISTRY I

### Glycosylated Hemoglobin (HbA1C), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Glycosylated Haemoglobin Method:High Performance Liquid Chromatography(HPLC)	5.3	%	< 5.7% : Normal 5.7% - 6.4% : Prediabetes > 6.4% Diabetes
Mean Plasma Glucose (MPG) Estimate Method:Derived from HBA1c	105	mg/dL	Excellent Control : 90 to 120 Good Control : 121 to 150 Average Control : 151 to 180 Panic Value : > 211 mg/dL

**Note:**Mean Plasma Glucose is calculated from HBA1c value and it indicates Average Blood Sugar level over the past three months.

#### INTERPRETATION :

- 1.Glycated hemoglobin (glycohemoglobin / HbA1c) is a form of hemoglobin (Hb) that is chemically linked to a sugar.
- 2.A1c is measured primarily to determine the three-month average blood sugar level and can be used as a diagnostic test for diabetes mellitus and as an assessment test for glycemic control in people with diabetes.
- 3.In diabetes, higher amounts of glycated hemoglobin, indicating poorer control of blood glucose levels, have been associated with cardiovascular disease, nephropathy, neuropathy, and retinopathy.
4. American diabetes Association (ADA) recommends an A1C goal for many non pregnant adults of < 7% (without significant hypoglycemia). On the basis of provider judgment and patient preference, achievement of lower A1C levels than the goal of 7% may be acceptable, and even beneficial, if it can be achieved safely without significant hypoglycemia or other adverse effects of treatment. Less stringent A1C goals (such as < 8%) may be appropriate for patients with severe hypoglycemia, extensive co morbid conditions etc, or where the harms of treatment are greater than the benefits.
5. Glycemic goals for some older adults might reasonably be relaxed as part of individualized care, but hyperglycemia leading to symptoms or risk of acute hyperglycemia complications should be avoided in all patients.

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## TEST REPORT

Name : **MS.YESHASREE [12308]** TID/SID : UMR1159106/ 25774511  
Age / Gender : 32 Years / Female Registered on : 08-Jul-2023 / 09:05 AM  
Ref.By : - Collected on : 08-Jul-2023 / 09:09 AM  
Req.No  Reported on : 08-Jul-2023 / 12:51 PM  
Reference : Medi Wheel  
BIL3254398

### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Lipid Profile, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Cholesterol Method:CHOD-PAP	165	mg/dL	Desirable Level: < 200 Borderline : 200 - 239 High : > 240 mg/dL
HDL Cholesterol Method:Enzymatic Reaction	49	mg/dL	<40:Major risk factor for heart disease 40-59:The higher,the better >=60:Considered protective against heart disease mg/dL
LDL Cholesterol Method:Calculated	<b>100</b>	mg/dL	< 100 mg/dL
VLDL Cholesterol Method:Calculated	16	mg/dL	10-55 mg/dL
Triglycerides Method:GPO-POD	81	mg/dL	Normal:<150 Borderline:150-199 High:200-499 Very High:>=500 mg/dL
Chol/HDL Ratio Method:Calculated	3.37		Normal : <4 Low risk : 4 - 6 High risk : >6
LDL Cholesterol/HDL Ratio	2.04		

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### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Liver Function Test (LFT), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Bilirubin. Method:Diazo with sulphanilic acid	0.63	mg/dL	0.3-1.2 mg/dL
Direct Bilirubin. Method:Diazo with sulphanilic acid	0.16	mg/dL	0.00-0.40 mg/dL
Indirect Bilirubin. Method:Calculated	0.47	mg/dL	
Alanine Aminotransferase ,(ALT/SGPT) Method:IFCC without P5P	23	U/L	10-40 U/L
Aspartate Aminotransferase,(AST/SGOT) Method:IFCC without P5P	20	U/L	10-40 U/L
ALP (Alkaline Phosphatase). Method:AMP-IFCC	69	U/L	30-115 U/L
<b>PROTEINS</b>			
Total Protein. Method:Biuret	7.06	g/dL	6.0-8.0 g/dL
Albumin. Method:Bromocresol Green (BCG)	4.25	g/dL	3.5-4.8 g/dL
Globulin. Method:Calculated	2.81	g/dL	2.3-3.5 g/dL
A/GRatio. Method:Calculated	1.51		0.8-2.0
Gamma GT. Method:IFCC-Enzymatic	20	U/L	7.0-50.0 U/L

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### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Thyroid Profile (T3,T4,TSH), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Triiodothyronine Total (T3) Method:Enhanced chemiluminescence	1.19	ng/mL	0.970-1.69 ng/mL
Thyroxine Total (T4) Method:Enhanced chemiluminescence	<b>5.13</b>	µg/dL	5.53-11.0 µg/dL
Thyroid Stimulating Hormone (TSH) Method:Enhanced chemiluminescence	<b>14.83</b>	µIU/mL	0.400-4.049 µIU/mL

Note: Change in method and reference range  
NOTE:

TSH - Reference ranges during pregnancy:\*

1st Trimester : 0.10 - 2.50

2nd Trimester : 0.20 - 3.00

3rd Trimester : 0.30 - 3.00

\*As per the Guidelines of American Thyroid Association for the diagnosis and management of thyroid disease during pregnancy and post partum.

1.Primary Hyperthyroidism is accompanied by elevated T3 & T4 values along with depressed TSH level.

2.Primary Hypothyroidism is accompanied by depressed T3 & T4 levels and elevated TSH levels.

3.Normal T4 levels accompanied by high T3 levels are seen in patients with T3 Thyrotoxicosis.

4.Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol and propylthiouracil.

5.Although elevated TSH levels are nearly always indicative of primary hypothyroidism, rarely they can result from TSH secreting pituitary tumors(secondary).

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### DEPARTMENT OF CLINICAL CHEMISTRY I

#### Uric Acid, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Uric Acid. Method:Uricase	4.89	mg/dL	1.9-7.5 mg/dL

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## TEST REPORT

Name : **MS.YESHASREE [12308]** TID/SID : UMR1159106/ 25776831  
Age / Gender : 32 Years / Female Registered on : 08-Jul-2023 / 09:05 AM  
Ref.By : - Collected on : 08-Jul-2023 / 09:09 AM  
Req.No  Reported on : 08-Jul-2023 / 14:52 PM  
Reference : Medi Wheel  
BIL3254398

### DEPARTMENT OF HEALTH CHECKUP

#### Glucose Urine Post Prandial

--

Urine Glucose Post Prandial Nil NIL  
Method:Reagent strip/Reflectance photometry

\* Sample processed at Parkline

--- End Of Report ---

**Dr.Jyothi Kiranmai**  
Regd. No: 52272  
MD PATHOLOGY





# PARKLINE DIAGNOSTICS PVT. LTD.

L.G. 3, 4 & 5, Bhuvana Towers, S.D. Road, Secunderabad - 500 003.

Tel : +91 40-42038139, 2784 5852, 7995421787, 7093445852,

Email parklinediagnostics@gmail.com www.parklinediagnostics.com



NABL Accredited  
Certificate No.MC-2566

## MEDICAL EXAMINATION REPORT

Name	Yesheshtee		Date :	8/7/23	
Company	MediShield		Reg. No. :	3254398	
Contact No.			Sex	<input checked="" type="checkbox"/> F	Age : <input type="checkbox"/> 32
Type	Pre-Emp		Emp. No.:		
	Overseas		Height	158 cms	
	Annual	<input checked="" type="checkbox"/>	Weight	59 kgs.	
Remarks	<p>USG : Simple Right renal Cortical cyst measuring 9x8mm in the mid pole. Advice follow up.</p> <p>- Elevated TSH levels (+). Advice follow up for treatment.</p> <p>- Rest all physical and lab parameters wnl</p>				
Fitness Status	Medically Fit / Unfit		<p>Dr. PRIYANKA SANNIDHI Physician's Signature Regn. No. 11351</p>		

# COMPREHENSIVE MEDICAL EXAMINATION REPORT

NAME Ms. Yeshapree

AGE 32 yrs / Female

MARITAL STATUS Married

CHILDREN : M  F

IDENTIFICATION (IF ANY) A mole on the Right cheek.

## PAST HISTORY

Any family H/o : High Blood Pressure, Heart Disease, Tuberculosis, Diabetes, Asthma, Cancer

Father CAD

Any personal H/o Major illness like : Typhoid 2018 Jaundice NIL Etc.

Any H/o STD NIL Skin infection NIL

H/o Blood Transfusion NIL Recent Vaccination COVISHIELD X 2 Dose

H/o Epilepsy NIL Giddiness NIL

H/o Surgery NIL Fracture in the past NIL

### Any Personal H/O.

High Blood Pressure, Heart Disease Tuberculosis, Diabetes, Asthma, Cancer

Drug Abuse, Drug Allergy, Micturition, Bowels, Alcohol, Smoking, Sleep, MC, Wt. Loss/Wt. Gain

Present illness / Medication NIL

## GENERAL EXAMINATION

Conjunctiva :

Skin :

Ears :

Nose :

Throat & Oral Cavity :

Bone, Joints : (N)

Nutritional Status : Well nourished

Lymph Nodes : NPD

Edema Feet : NIL

Varicose Veins : NIL

NAD

DR. PRIYANKA BANERJEE  
MBBS  
Regn. No. 11351

**Distant Vision : Near Vision :**

Right Eye: 6/6

Right Eye: N6

With glasses / Without glasses

With glasses / Without glasses

left Eye: 6/6

left Eye: N6

with glasses / without glasses

with glasses / without glasses

Colour Vision: BE normal

**Ophthalmologist's Signature**

**Right Ear**

**Left Ear**

Hearing: (N)

(N)

Rinee's Test ;

Weber Test: (N)

Discharge: NIL

NIL

**SYSTEMIC EXAMINATION**

Pulse: 80bpm

B.P.: 120/80 mmHg

Lungs: A. Shape of Chest B/c symmetrical  
B. Breath Sounds B/c clear ⊕  
C. Adventitious Sounds No

Heart: A. Sounds S<sub>1</sub> S<sub>2</sub> ⊕  
B. Murmurs No

**Nervous System**

Abdomen: A. Liver NPD  
B. Spleen NPD  
C. Piles No  
D. Any Lump No

A. Higher Function :  
B. Cranial Nerves :  
C. Sensory System : (N)  
D. Motor System :  
E. Jerks :

General: A. Hernia  
B. Hydrocele NAD  
C. Varicocele

Breast: Rt \_\_\_\_\_ Lt. \_\_\_\_\_

## CANDIDATE'S DECLARATION

I hereby solemnly declare that I am not suffering from Asthma, Hypertension, Diabetes, Occult Psychological disorders or any other ailment which can be suppressed without my voluntary declaration.

Date : 8/07/2023

D. yeshasree

Signature

Place : Hyderabad

Note : General Physical Examination and Investigation included in the health check-up Have certain limitations and may not be able to detect all latent and asymptomatic diseases. Any new symptoms developing after the health check-up or persisting thereafter should be brought to the attention of the treating physician.



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Certificate No. M-0862

## ENT CONSULTATION

S.No. 3254398

Emp.No. 12308

Date 8/7/23

Name Yeshwanth

Age 32 Yrs

Sex M/F

### EARS :

Right

Left

EAC

(N)

(N)

TM

(N) (N)

(N) (N)

TFT

Rinne's A > BC  
Weber's

A > BC

ABC same as examination

NOSE

: Septum central I + (N)

THROAT

: AP/TP/PPH (N)

NECK

: No tenderness/swelling

IMPRESSION :

ENT within (N) limits

Dr. Pournima  
M.B.B.S, D.L.O..(ENT)  
Reg No.100155(KMC)

Name: Yeshasree Sex: F Age: 32

Date: 8/7

Pt. has come for routine dental checkup


OPD No: 1471

O/E: lower anterior crowding of teeth

Mild Stains

Rotated teeth i.e. 2/4

Dr. Kanya

  
MULTI SPECIALITY DENTAL CLINIC  
*Smile Confidentially... Not Confidentally...*  
B.D.S. IMPLANTOLOGIST (USA)  
1-3-1, Rajamudaliar Street, Kalasiguda,  
Secunderabad. Cell : 8977910590,




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## TEST REPORT

Name : MS.YESHASREE [12308]

Age / Gender : 32 Years / Female

Ref.By : -

Req.No



BIL3254398

TID/SID : UMR1159106/

Registered on : 08-Jul-2023 / 09:05 AM

Collected on : 08-Jul-2023 / 09:09 AM

Reported on : 08-Jul-2023 / 09:38 AM

Reference : Medi Wheel


### DEPARTMENT OF CARDIOLOGY

#### 2D Echo/Doppler Study

Mitral Valve	Normal
Aortic valve	Normal
Tricuspid valve	Normal
Pulmonary valve	Normal
Aorta	2.14 cm
Left Atrium	3.09 cm
Left Ventricle	LVDd:4.02 cm IVSd :0.9 cm EF:62% LVDs:2.68 cm LVPwd:0.9 cm FS:33%
RWMA	Nil
Right Atrium	Normal
Right Ventricle	Normal
Pulmonary Artery	Normal
IAS	Intact
IVS	Intact
Pericardium	Normal
Svc / Ivc	Normal
Intracardiac Masses	Nil
Doppler Study	Mitral flow: E: 0.9 m/sec A: 0.6 m/sec Aortic flow : 1.15 m/sec Pulmonary flow : 0.8 m/sec
Colour Doppler	No MR / AR / TR / PR
Conclusion	No RWMA. Normal valves/ Normal chambers. No MR/ AR/ TR / PR Good LV (LVEF 62%) / RV function. No Diastolic dysfunction. No PE/ clot/ vegetation.

\* Sample processed at Parkline

--- End Of Report ---

  
**Dr. P. PRASHANT MARUTI**  
DM., Cardiology  
Consultant Interventional Cardiologist  
Reg. No. TSMC/FMR/25860





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Age / Gender : 32 Years / Female

Ref.By :

Req. No : BIL3254398

TID : UMR1159106

Registered on : 08-Jul-2023 09:05 AM

Reported On : 08-Jul-2023 11:06 AM

Reference : Medi Wheel

### DEPARTMENT OF ULTRASOUND Ultrasound Whole Abdomen

**LIVER** : 12.3 cms. Normal in size and echotexture. No focal lesions.  
No IHBD / CBD dilatation. Portal vein is normal.

**SPLEEN** : 8.9 cms. Normal in size and echotexture. No focal lesion seen.

**GALL BLADDER** : Well distended. No sludge / gall stones / sol.  
Gall bladder - Wall thickness is normal.  
No pericholecystic oedema.

**PANCREAS** : Normal in size and echotexture. No calcification / sol.  
Pancreatic duct is normal. No peripancreatic fluid collection.

**RIGHT KIDNEY** : 9.6 x 3.9 cms.  
Normal in size and echotexture.  
Cortical thickness is normal.  
No evidence of calculi. Simple cortical cyst measuring 9 x 8 mm in mid pole.  
Pelvi calyceal system is normal.

**LEFT KIDNEY** : 10.0 x 4.6 cms.  
Normal in size and echotexture.  
Cortical thickness is normal.  
No evidence of calculi / sol.  
Pelvi calyceal system is normal.


**URINARY BLADDER** : Well distended. Normal in contour.  
Wall thickness is normal. No calculus / sol.

**UTERUS** : Anteverted measuring 8.2 x 4.2 x 2.6 cms - Normal in size and echotexture.  
No space occupying lesion is seen.  
Cervix is normal in size and echopattern.

**ENDOMETRIUM** : 3.9 mm - Normal.

**OVARIES** : Right ovary : 3.2 x 1.8 cms and Left ovary : 2.7 x 1.4 cms.  
Both ovaries normal in size and echotexture.  
No adnexal mass seen.  
No fluid in POD.

**IMPRESSION** : Simple right renal cortical cyst.  
Clinical correlation.

  
**Dr. SATHVINDER**  
MDRD  
Regd.No: 56064  
Consultant Radiologist



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Registered on : 08-Jul-2023 09:05 AM  
Reported On : 08-Jul-2023 11:25 AM  
Reference : Medi Wheel

### X-RAY CHEST PA VIEW

Lung fields are clear.

Cardia is normal.

Hila are normal.

C P angles are free.

Bony cage is normal.

Soft tissues are normal.

**IMPRESSION : NORMAL CHEST X-RAY**



**Dr. SATHVINDER**  
MDRD  
Regd.No: 56064  
Consultant Radiologist

ID: 5254398  
MS YESHASREE  
Female 32Years

08-07-2023 09:56:11 AM

CARDIART

HR : 73 bpm  
P : 0 ms  
PR : 0 ms  
QRS : 89 ms  
QT/QTc : 393/435 ms  
P/QRS/T : 0/-35/35 °  
RV5/SV1 : 1.277/0.342 mV

CSM

ll

**Dr. M. SUDHIR**  
MBBS., MD., DNB(Med), DNB(Gastro), FICP  
PHYSICIAN & GASTROENTEROLOGIST  
Regd.No. 9376  
3-2-239, Somasundaram Street,  
Seounderabad - 500 003

Diagnosis Information:  
Atrial Flutter  
Abnormal Q Wave(III,V1)  
Left Axis Deviation

Report Confirmed by:

