



BHAILAL AMIN
GENERAL HOSPITAL



CONCLUSION OF HEALTH CHECKUP

ECU Number : 1812	MR Number : 23200528	Patient Name: REENA
Age : 47	Sex : Female	Height : 154
Weight : 59	Ideal Weight : 54	BMI : 24.88
Date : 15/02/2023		

Dr. Manish Mittal

Internal Medicine

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.

ECU Number : 1812 MR Number : 23200528 Patient Name : REENA
Age : 47 Sex : Female Height : 154
Weight : 59 Ideal Weight : 54 BMI : 24.88
Date : 15/02/2023

Past H/O : NO P/H/O ANY MAJOR ILLNESS

Present H/O : NO MEDICAL COMPLAIN AT PRESENT

Family H/O : MOTHER: ASTHMA AND HYPERTENSION
FATHER: HYPERTENSION

Habits : NO HABITS

Gen.Exam. : G.C.GOOD

B.P : 110/80 mm Hg

Pulse : 68/MIN REG

Others : SPO2-98%

C.V.S : CLINICALLY NAD

R.S. : CLINICALLY NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :



ECU Number : 1812
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Weight : 59
Date : 15/02/2023

MR Number : 23200528
Sex : Female
Ideal Weight : 54

Patient Name: REENA
Height : 154
BMI : 24.88

Ophthalmic Check Up :

Ext Exam

Vision Without Glasses

Vision With Glasses

Final Correction

Fundus

Colour Vision

Advice

Right

6/60

6/6

-3.25 SPH

NORMAL

NORMAL

NIL

Left

NORMAL

6/60

6/6

-3.25 SPH

Orthopaedic Check Up :

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice





H-2015-0297



MC-3004



E-2021-0037



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Age : 47
Weight : 59
Date : 15/02/2023

MR Number : 23200528
Sex : Female
Ideal Weight : 54

Patient Name : REENA
Height : 154
BMI : 24.88

Gynaec Check Up :

OBSTETRIC HISTORY G3 P2 A1, 1MTP/ 2FTLSCS L AND W

MENSTRUAL HISTORY

PRESENT MENSTRUAL CYCLE NO PERIODS 1 YRS

PAST MENSTRUAL CYCLE

CHIEF COMPLAINTS

PA LSCS SCAR

PS NAD

PV NAD

BREAST EXAMINATION RIGHT NORMAL

BREAST EXAMINATION LEFT NORMAL

PAPSMEAR TAKEN

BMD

MAMMOGRAPHY

ADVICE REGULAR BSE



Dietary Assessment

ECU Number : 1812 MR Number : 23200528 Patient Name: REENA
Age : 47 Sex : Female Height : 154
Weight : 59 Ideal Weight : 54 BMI : 24.88
Date : 15/02/2023

Body Type : Normal / Underweight / Overweight
Diet History : Vegetarian / Eggetarian / Mixed

Frequency of consuming fried food : / Day / Week or occasional

Frequency of consuming Sweets : / Day / or occasional

Frequency of consuming outside food : / Day / Week or occasional

Amount of water consumed / day : Glasses / liters

Life style assessment :

Physical activity : Active / moderate / Sedentary / Nil

Alcohol intake : Yes / No

Smoking : Yes / No

Allergic to any food : Yes / No

Are you stressed out ? : Yes / No

Do you travel a lot ? : Yes / No

General diet instructions :

Have small frequent meals.

Avoid fatty products like oil, ghee, butter, cheese.

Take salt restricted diet and avoid table salt.

Consume fibrous food regularly like whole grains, Daliya, Oats, Bajra, Flex seeds, Pulses, Fruits and Salads.

Keep changing your cooking oil every three months.

Avoid Maida, Starchy foods and Bakery products.

Consume 1-2 seervings of all fruits and vegetables, For Diabetic patients avoid Mango, Chikoo, Banana, Grapes and Custurd apple

Dring 3 to 4 liters (12 - 14 glass) of water daily.

Eat Beetroots, Figs, Almond, Walnut, Dates, Leafy vegetables, roasted Channa and Jeggary (Gur) for Heamoglobin in case of diabetic patient avoid Rasins, Dates and Jeggary

Drink green Tea or black Coffee once in a day.

Do brisk walking daily.



Patient Name : Ms. REENA
 Gender / Age : Female / 47 Years 24 Days
 MR No / Bill No. : 23200528 / 231066506
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 106833
 Request Date : 15/02/2023 08:11 AM
 Collection Date : 15/02/2023 08:16 AM
 Approval Date : 15/02/2023 01:13 PM

CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	12.2	gm/dL	12 - 15
Red Blood Cell Count (T-RBC)	4.27	mill/cmm	3.8 - 4.8
Hematocrit (HCT)	36.8	%	36 - 46
Mean Corpuscular Volume (MCV)	86.2	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	28.6	pg	27 - 32
MCH Concentration (MCHC)	33.2	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	14.5	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	46.4	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	4.35	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	40	%	40 - 80
Lymphocytes	48	%	20 - 40
Eosinophils	6	%	1 - 6
Monocytes	6	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	1.75	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.12	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.25	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.19	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.04	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.0	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	115	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	3	mm/1 hr	0 - 12

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / repeat may be requested.

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Ms. REENA	Type	: OPD
Gender / Age	: Female / 47 Years 24 Days	Request No.	: 106833
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CBC + ESR

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification. ESR on Ves metic 20, comparable to Westergrens method and in accordance to ICSH reference method.

---- End of Report ----

Dr. Sejal Odedra
M.D.Pathology

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Ms. REENA
Gender / Age : Female / 47 Years 24 Days
MR No / Bill No. : 23200528 / 231066506
Consultant : Dr. Manish Mittal
Location : OPD
Type : OPD
Request No. : 106833
Request Date : 15/02/2023 08:11 AM
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Approval Date : 15/02/2023 01:01 PM

Haematology

Test	Result	Units	Biological Ref. Range
Blood Group			
ABO system	O		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method

Note :

- This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontrol.
- This method check`s group both on Red blood cells and in Serum for "ABO" group.

--- End of Report ---

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Fasting Plasma Glucose

Test	Result	Units	Biological Ref. Range
<i>Fasting Plasma Glucose</i>			
Fasting Plasma Glucose	89	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	85	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimension

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HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
HbA1c (Glycosylated Hb)			
Glycosylated Hemoglobin (HbA1c)	5.1	%	
estimated Average Glucose (e AG) *	99.67	mg/dL	

*(Method:**By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.*** Calculated value for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.***Guidelines for Interpretation:***Indicated Glycemic control of previous 2-3 months*

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

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 Gender / Age : Female / 47 Years 24 Days Request No. : 106833
 MR No / Bill No. : 23200528 / 231066506 Request Date : 15/02/2023 08:11 AM
 Consultant : Dr. Manish Mittal Collection Date : 15/02/2023 08:16 AM
 Location : OPD Approval Date : 15/02/2023 09:56 AM

Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides	98	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension</i>			
<i>< 150 Normal</i>			
<i>150-199 Borderline High</i>			
<i>200-499 High</i>			
<i>> 499 Very High)</i>			
Total Cholesterol	186	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension</i>			
<i><200 mg/dL - Desirable</i>			
<i>200-239 mg/dL - Borderline High</i>			
<i>> 239 mg/dL - High)</i>			
HDL Cholesterol	81	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension</i>			
<i>< 40 Low</i>			
<i>> 60 High)</i>			
Non HDL Cholesterol (calculated)	105	mg/dL	1 - 130
<i>(Non- HDL Cholesterol</i>			
<i>< 130 Desirable</i>			
<i>139-159 Borderline High</i>			
<i>160-189 High</i>			
<i>> 191 Very High)</i>			
LDL Cholesterol	82	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension</i>			
<i>< 100 Optimal</i>			
<i>100-129 Near / above optimal</i>			
<i>130-159 Borderline High</i>			
<i>160-189 High</i>			
<i>> 189 Very High)</i>			
VLDL Cholesterol (calculated)	19.6	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	1.01		2.1 - 3.5
T. Ch./HDL Ch. Ratio	2.3		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.55	mg/dL	0 - 1
Bilirubin - Direct	0.13	mg/dL	0 - 0.3
Bilirubin - Indirect	0.42	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	26	U/L	13 - 35
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	27	U/L	14 - 59
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	80	U/L	42 - 98
<i>(By PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	21	U/L	5 - 55
<i>(By IFCC method on RXL Dade Dimension.)</i>			
Total Protein			
Total Proteins	7.64	gm/dL	6.4 - 8.2
Albumin	3.74	gm/dL	3.4 - 5
Globulin	3.9	gm/dL	3 - 3.2
A : G Ratio	0.96		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

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DEPARTMENT OF LABORATORY MEDICINE

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Location : OPD

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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	17	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	0.69	mg/dL	0.6 - 1.1
Estimate Glomerular Filtration rate (Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)	More than 60		
Uric acid (By Uricase / Catalase method on RXL Siemens)	3.5	mg/dL	2.2 - 5.8

— End of Report —



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Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
------	--------	-------	-----------------------

Triiodothyronine (T3)	1.15	ng/ml	
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(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (ng/ml)

1 - 3 days : 0.1 - 7.4
 1-11 months : 0.1 - 2.45
 1-5 years : 0.1 - 2.7
 6-10 years : 0.9 - 2.4
 11-15 years : 0.8 - 2.1
 16-20 years : 0.8 - 2.1
 Adults (20 - 50 years) : 0.7 - 2.0
 Adults (> 50 years) : 0.4 - 1.8
 Pregnancy (in last 5 months) : 1.2 - 2.5

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

Thyroxine (T4)	8.44	mcg/dL	
----------------	------	--------	--

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (mcg/dL)

1 - 3 days : 11.8 - 22.6
 1-2 weeks : 9.8 - 16.6
 1 - 4 months : 7.2 - 14.4
 4 - 12 months : 7.8 - 16.5
 1-5 years : 7.3 - 15.0
 5 - 10 years : 6.4 - 13.3
 10 - 20 years : 5.6 - 11.7
 Adults / male : 4.6 - 10.5
 Adults / female : 5.5 - 11.0
 Adults (> 60 years) : 5.0 - 10.7

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

Thyroid Stimulating Hormone (US-TSH)	2.44	microIU/ml	
--------------------------------------	------	------------	--

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (microIU/ml)

Infants (1-4 days) : 1.0 - 39
 2-20 weeks : 1.7 - 9.1
 5 months - 20 years : 0.7 - 6.4
 Adults (21 - 54 years) : 0.4 - 4.2
 Adults (> 55 years) : 0.5 - 8.9
 Pregnancy :
 1st trimester : 0.3 - 4.5
 2nd trimester : 0.5 - 4.6
 3rd trimester : 0.8 - 5.2

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

--- End of Report ---

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 Gender / Age : Female / 47 Years 24 Days Request No. : 106833
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Urine routine analysis (Auto)

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	20	mL	
Colour	Pale Yellow		
Appearance	Clear		
Chemical Examination (By Reagent strip method)			
pH	6.5		
Specific Gravity	<=1.005		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	1 - 5	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23200528 Report Date : 15/02/2023
Request No. : 190053125 15/02/2023 8.11 AM
Patient Name : **Ms. REENA**
Gender / Age : Female / 47 Years 24 Days

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

X-Ray Chest AP

Both lung fields are clear.
Tiny opacity noted in right mid zone--sequel of infection
Both costophrenic sinuses appear clear.
Heart size is normal.
Hilar shadows show no obvious abnormality.
Aorta is normal.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
• NOT VALID FOR MEDICO-LEGAL PURPOSES
• CLINICAL CORRELATION RECOMMENDED

Hasani

Dr.Perna C Hasani, MD
Consultant Radiologist



H-2015-0297

MC-3004

E-2021-0037

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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

Patient No. : 23200528 Report Date : 15/02/2023
Request No. : 190053114 15/02/2023 8.11 AM
Patient Name : **Ms. REENA**
Gender / Age : Female / 47 Years 24 Days

USG : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen

Liver is normal in size and echopattern. No mass lesion identified. The hepaticveins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows few calculi largest measures 16mm. Common bile duct measures 4 mm in diameter.

Pancreas shows no obvious abnormality. Tail obscured.
Spleen is normal size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

Uterus is anteverted, normal in size and echo pattern. Endometrium thickness is about 5 mm. No obvious mass lesion seen.

Uterine length : 63 mm.
A.P. 26 mm.

Both ovaries reveal small follicles.

Urinary bladder is well distended and appears normal.

No ascites.

COMMENT:

Few GB calculi.

Kindly correlate clinically

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
 • NOT VALID FOR MEDICO-LEGAL PURPOSES
 • CLINICAL CORRELATION RECOMMENDED

Prerna C Hasani

Dr.Prerna C Hasani, MD
Consultant Radiologist





DEPARTMENT OF DIAGNOSTIC RADIOLOGY

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

Patient No. : 23200528 Report Date : 15/02/2023
Request No. : 190053151 15/02/2023 8.11 AM
Patient Name : **Ms. REENA**
Gender / Age : Female / 47 Years 24 Days

Mammography (Both Breast)

Both side mammogram has been obtained in mediolateral oblique (MLO) as well as craniocaudal (CC) projections.

Both breasts show heterogeneously dense fibro glandular parenchyma, which can obscure the mass lesion.

No obvious focal mass seen on either side.

No obvious micro/cluster calcification seen. Bilateral benign specks of calcifications are seen.

No obvious skin thickening or nipple retraction seen.

No enlarged axillary lymph nodes seen.

IMPRESSION:

Heterogeneously dense breast--needs USG Breast SOS
Kindly correlate clinically /Follow up

BIRADS: 0- needs additional imaging, **1-** negative, **2-** benign, **3-** probably benign (require short term follow up), **4-** suspicious (require further evaluation with biopsy), **5-** highly suspicious for malignancy, **6-** biopsy proven malignancy.

INFORMATION REGARDING MAMMOGRAMS:

- A REPORT THAT IS NEGATIVE FOR MALIGNANCY SHOULD NOT DELAY BIOPSY IF THERE IS A DOMINANT OR CLINICALLY SUSPICIOUS MASS.
- IN DENSE BREASTS, AN UNDERLYING MASS LESION MAY BE OBSCURED.
- FALSE POSITIVE DIAGNOSIS OF CANCER MAY OCCURE IN SMALL PERCENTAGE OF CASES.

Hasani

Dr.Perna C Hasani, MD
Consultant Radiologist



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E-2021-0037

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
 • NOT VALID FOR MEDICO-LEGAL PURPOSES
 • CLINICAL CORRELATION RECOMMENDED


Patient No. : 23200528 Report Date : 15/02/2023
Request No. : 190053190 15/02/2023 8.11 AM
Patient Name : Ms. REENA
Gender / Age : Female / 47 Years 24 Days

Echo Color Doppler

MITRAL VALVE : NORMAL
AORTIC VALVE : TRILEAFLET, NORMAL
TRICUSPID VALVE : NORMAL, NO TR,
PULMONARY VALVE : NORMAL
LEFT ATRIUM : NORMAL
AORTA : NORMAL
LEFT VENTRICLE : NORMAL, NO REGIONAL WALL MOTION ABNORMALITY,
LVEF=60%
RIGHT ATRIUM : NORMAL
RIGHT VENTRICLE : NORMAL
I.V.S. : INTACT
I.A.S. : INTACT
PULMONARY ARTERY : NORMAL
PERICARDIUM : NORMAL
COLOUR/DOPPLER FLOW MAPPING : NO AR, MR, TR, , NO PAH

FINAL CONCLUSION:

1. ALL CARDIAC CHAMBERS ARE NORMAL IN DIMENSIONS
2. NO REGIONAL WALL MOTION ABNORMALITY AT REST
3. NORMAL LV SYSTOLIC FUNCTION, LVEF=60%
4. NORMAL VALVES
5. NO AR, MR, TR, NO PULMONARY HYPERTENSION
6. NO PERICARDIAL EFFUSION, CLOT VEGETATION.


Dr. KILLOL KANERIA MD, DM
Consultant Cardiologist

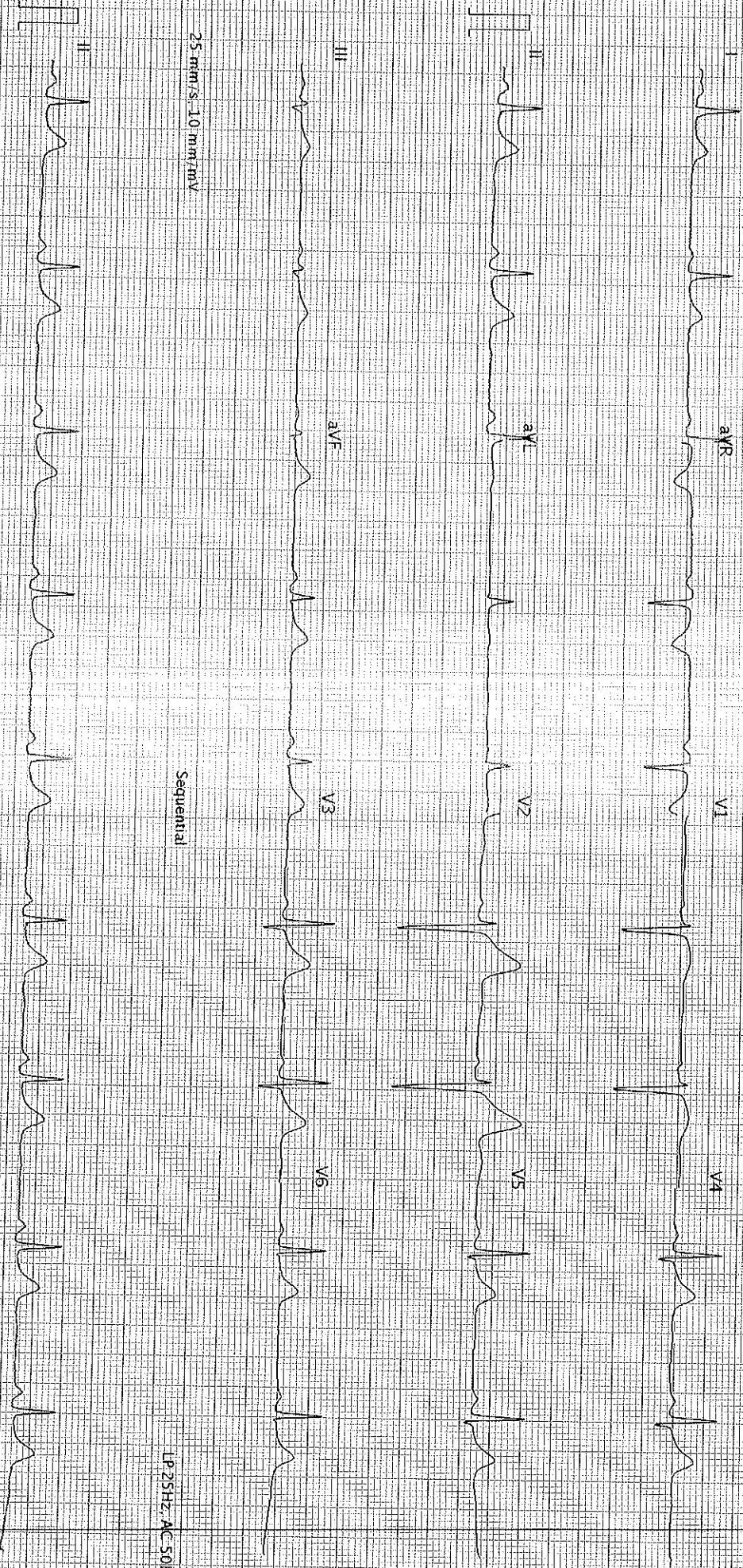
Name: MS. REENA
Patient ID: ECU/23200528

15.02.2023 08:31:09
Standard 12-Lead

Date of birth: Female
Gender: Female
Height: Room
Weight: Medication
Ethnicity: Order ID
Pacemaker: Ord. proxy
Unknown: Ord. prot.

HR: 55 bpm
RR: 1098 ms
P: 103 ms
PR: 148 ms
P axis: 58°
QRS axis: 36°
T axis: 52°
QRS: 74 ms
QT: 417 ms
QTcB: 398 ms
Sinus rhythm
Normal electrical axis
Normal ECG
Unconfirmed report

Normal



25 mm/s, 10 mm/mV

Sequential

LP 25Hz, AC 50Hz

25 mm/s, 10 mm/mV

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SCHILLER

LP 25Hz, AC 50Hz