

Add: Indra Deep Complex, Sanjay Gandhi Puram, Faizabad Road, Indira Nagar Ph: 7706041643,7706041644

CIN: U85196UP1992PLC014075





Patient Name : Mrs.BHAWNA KANNOJIA Registered On : 08/Jan/2022 11:20:06 Age/Gender : 27 Y 2 M 2 D /F Collected : 08/Jan/2022 11:33:33 UHID/MR NO : IDCD.0000130987 Received : 08/Jan/2022 12:22:48 Visit ID Reported : IDCD0398662122 : 08/Jan/2022 15:04:56

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Unit **Test Name** Result Bio. Ref. Interval Method

Blood Group (ABO & Rh typing) *, Blood

Blood Group Rh (Anti-D)

В

POSITIVE

COMPLETE BLOOD COUNT (CBC) * , Blood

Haemoglobin	11.00	g/dl_	Male- 13.5-17.5 g/c Female-12.0-15.5 g	
TLC (WBC)	4,900.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils)	62.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	32.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	5.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	1.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1 / / 0	ELECTRONIC IMPEDANCE
ESR				
Observed	26.00	Mm for 1st hr.		
Corrected	6.00	Mm for 1st hr.	< 20	
PCV (HCT)	33.00	cc %	40-54	
Platelet count				
Platelet Count	2.80	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	15.90	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	38.70	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.31	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	11.60	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	4.26	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE
Blood Indices (MCV, MCH, MCHC)				
MCV	81.90	fl	80-100	CALCULATED PARAMETER
MCH	25.80	pg	28-35	CALCULATED PARAMETER
	31.50	%	30-38	CALCIII ATED DADANAETED
	12.40	%	11-16	
22 - 27 - 27 - 27 - 27 - 27 - 27 - 27 -	36.20	fL	35-60	- hand
utrophils Count	3,038.00	/cu mm	3000-7000	or charible (MARRE MAR RECE)
sinophils Count (AEC)	49.00	/cu mm	40-440	Or. Shoaib Irfan (MBBS, MD, PDCC)







UHID/MR NO

INDRA DIAGNOSTIC CENTRE

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Patient Name : Mrs.BHAWNA KANNOJIA Age/Gender : 27 Y 2 M 2 D /F

: IDCD.0000130987

Collected Received

: 08/Jan/2022 16:50:18 : 08/Jan/2022 17:27:49

Visit ID : IDCD0398662122 Reported

Registered On

: 08/Jan/2022 17:55:21

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method

GLUCOSE FASTING, Plasma

Glucose Fasting

85.50

mg/dl

< 100 Normal

GOD POD

100-125 Pre-diabetes

≥ 126 Diabetes

Interpretation:

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impared Glucose Tolerance.

Glucose PP Sample:Plasma After Meal 113.30

mg/dl

<140 Normal

GOD POD

140-199 Pre-diabetes

>200 Diabetes

Interpretation:

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impared Glucose Tolerance.



Dr. Shoaib Irfan (MBBS, MD, PDCC)









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Ph: 7706041643,7706041644 CIN: U85196UP1992PLC014075





Patient Name : Mrs.BHAWNA KANNOJIA : 08/Jan/2022 11:20:07 Registered On Age/Gender : 27 Y 2 M 2 D /F Collected : 08/Jan/2022 11:33:33 UHID/MR NO : IDCD.0000130987 Received : 08/Jan/2022 15:50:00 Visit ID : IDCD0398662122 Reported : 08/Jan/2022 17:16:14

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method	
GLYCOSYLATED HAEMOGLOBIN (HBA1C)	** , EDTA BLOOD				
Glycosylated Haemoglobin (HbA1c)	5.30	% NGSP		HPLC (NGSP)	

mmol/mol/IFCC

mg/dl

Interpretation:

NOTE:-

Glycosylated Haemoglobin (Hb-A1c)

Estimated Average Glucose (eAG)

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.

34.00

105

 eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes mnagement.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

^{*}High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

N.B.: Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.





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



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: 08/Jan/2022 11:20:07



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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

Clinical Implications:

- *Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.
- *With optimal control, the HbA 1c moves toward normal levels.
- *A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated *Increases in glycosylated hemoglobin occur in the following nondiabetic conditions: a. Iron-deficiency anemia b. Splenectomy
- c. Alcohol toxicity d. Lead toxicity
- *Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss
- *Pregnancy d. chronic renal failure. Interfering Factors:
- *Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.











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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) Sample:Serum	8.87	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	0.86	mg/dl	0.5-1.2	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) Sample:Serum	79.20	ml/min/1.73m2	2 - 90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid Sample:Serum	5.45	mg/dl	2.5-6.0	URICASE
L.F.T.(WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST) SGPT / Alanine Aminotransferase (ALT) Gamma GT (GGT) Protein Albumin Globulin A:G Ratio Alkaline Phosphatase (Total) Bilirubin (Total) Bilirubin (Direct) Bilirubin (Indirect)	12.90 17.40 15.30 7.36 4.05 3.31 1.22 165.55 0.38 0.17 0.21	U/L U/L IU/L gm/dl gm/dl U/L mg/dl mg/dl mg/dl	< 35 < 40 11-50 6.2-8.0 3.8-5.4 1.8-3.6 1.1-2.0 42.0-165.0 0.3-1.2 < 0.30 < 0.8	IFCC WITHOUT P5P IFCC WITHOUT P5P OPTIMIZED SZAZING BIRUET B.C.G. CALCULATED CALCULATED IFCC METHOD JENDRASSIK & GROF JENDRASSIK & GROF JENDRASSIK & GROF
LIPID PROFILE (MINI) , Serum				
Cholesterol (Total)	148.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol) LDL Cholesterol (Bad Cholesterol)	46.90 90	mg/dl mg/dl	30-70 < 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	DIRECT ENZYMATIC CALCULATED
VLDL Triglycerides	13.46 67.30	mg/dl mg/dl	10-33 < 150 Normal	CALCULATED GPO-PAP
Highycenides	07.30	my/ui	150-199 Borderline High	







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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Result Unit Bio. Ref. Interval Method **Test Name**

> 200-499 High >500 Very High





Dr. Shoaib Irfan (MBBS, MD, PDCC)







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Patient Name : Mrs.BHAWNA KANNOJIA Registered On : 08/Jan/2022 11:20:07 Age/Gender Collected : 27 Y 2 M 2 D /F : 08/Jan/2022 17:00:42 UHID/MR NO : IDCD.0000130987 Received : 08/Jan/2022 17:10:58 Visit ID Reported : 08/Jan/2022 17:32:36 : IDCD0398662122

Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINATION, ROUTINE * , Urine				
Color Specific Gravity	CLEAR 1.005			
Reaction PH	Acidic (5.0)			DIPSTICK
Protein	ABSENT	, mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++)	DIPSTICK
			> 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution) Microscopic Examination:	ABSENT			
Epithelial cells	ABSENT			MICROSCOPIC
Epitrioliai oolio	ABOLIVI			EXAMINATION
Pus cells .	ABSENT			MICROSCOPIC EXAMINATION
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			
STOOL, ROUTINE EXAMINATION * , Stool				
Color	YELLOWISH			
Consistency	SEMI SOLID			
Reaction (PH)	Acidic (6.5)			
Mucus	ABSENT			
Blood	ABSENT			
Worm	ABSENT			
Pus cells	ABSENT			







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DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
RBCs	ABSENT			
Ova	ABSENT			
Cysts	ABSENT			
Others	ABSENT			
SUGAR, FASTING STAGE * , Urine				

gms%

Interpretation:

Sugar, Fasting stage

(+) < 0.5

(++) 0.5-1.0

(+++) 1-2

(++++) > 2

SUGAR, PP STAGE * , Urine

Sugar, PP Stage

ABSENT

ABSENT

Interpretation:

(+) < 0.5 gms%

(++) 0.5-1.0 gms%

(+++) 1-2 gms%

(++++) > 2 gms%



Dr. Shoaib Irfan (MBBS, MD, PDCC)







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Docult

: Final Report

Unit Die Def Interval

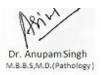
DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE - TOTAL **, Serum				
T3, Total (tri-iodothyronine)	124.15	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	9.35	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	1.01	μlŪ/mL	0.27 - 5.5	CLIA
Interpretation:		,		
		0.3-4.5 μIU/1	nL First Trimest	er
		0.5-4.6 μIU/1	nL Second Trime	ester
		0.8-5.2 μIU/r	nL Third Trimes	ter
		0.5-8.9 μIU/r	nL Adults	55-87 Years
		0.7-27 μIU/1	nL Premature	28-36 Week
		2.3-13.2 μIU/r	nL Cord Blood	> 37Week
		0.7-64 μIU/r	nL Child(21 wk	- 20 Yrs.)
		1-39 μIU	/mL Child	0-4 Days
		1.7-9.1 μIU/ı		2-20 Week

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.











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: 08/Jan/2022 11:20:07

Age/Gender UHID/MR NO : 27 Y 2 M 2 D /F : IDCD.0000130987

Received

: N/A

Visit ID

: IDCD0398662122

Reported Status

: 08/Jan/2022 14:14:51

Ref Doctor

: Dr. Mediwheel - Arcofemi Health Care Ltd.

: Final Report

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA *

(500 mA COMPUTERISED UNIT SPOT FILM DEVICE)

DIGITAL CHEST P-A VIEW

- Soft tissue shadow appears normal.
- Bony cage is normal.
- Diaphragmatic shadows are normal on both sides.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Pulmonary parenchyma did not reveal any significant lesion.

IMPRESSION: NORMAL SKIAGRAM











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Patient Name : Mrs.BHAWNA KANNOJIA Registered On : 08/Jan/2022 11:20:08

 Age/Gender
 : 27 Y 2 M 2 D /F
 Collected
 : N/A

 UHID/MR NO
 : IDCD.0000130987
 Received
 : N/A

Visit ID : IDCD0398662122 Reported : 08/Jan/2022 13:11:01

Ref Doctor : Dr. Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

LIVER

- Liver is normal in size (~ 128 mm) and has a normal homogenous echo texture.
- No obvious focal lesion is seen. The intra-hepatic biliary radicles are normal.
- Portal vein is normal in caliber.

GALL BLADDER & CBD

- The gall bladder is normal in size and has regular walls. Lumen of the gall bladder is anechoic. No wall
 thickening or pericholecystic fluid noted.
- Visualised proximal common bile duct is normal in caliber.

PANCREAS

 The pancreas is normal in size and shape and has a normal homogenous echotexture. Pancreatic duct is not dilated.

KIDNEYS

- Both the kidneys are normal in size and echotexture.
- The collecting system of both the kidneys is normal and cortico-medullary demarcation is clear.

SPLEEN

• The spleen is normal in size and has a normal homogenous echo-texture.

LYMPH NODES

• No significant lymph node noted.

URINARY BLADDER

• Urinary bladder is well distended. Bladder wall is normal in thickness and is regular.







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: 08/Jan/2022 11:20:08



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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

UTERUS & CERVIX

- The uterus is anteverted and measures $\sim 77 \times 34 \times 28 \text{ mm}$.
- It has a homogenous myometrial echotexture.
- The endometrial echo is in mid line and measures ~ 6.9 mm.
- Cervical lengthening measures ~ 4 cm. (History of previous cesarean)

ADNEXA & OVARIES

- Adnexa appear normal.
- Simple follicular cyst ~ approx 32 x 26 mm seen within right ovary.
- Left ovary measures ~ 28 x 14 mm.

IMPRESSION

NO SIGNIFICANT SONOLOGICAL ABNORMALITY SEEN

Typed by- shanaya

(This report is an expert opinion & not a diagnosis. Kindly intimate us immediately or within 7 days for any reporting / typing error or any query regarding sonographic correlation of clinical findings)

*** End Of Report ***

(*) Test not done under NABL accredited Scope, (**) Test Performed at Chandan Speciality Lab.

Result/s to Follow: ECG/EKG



Dr. Anil Kumar Verma (MBBS,DMRD)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing *

*Facilities Available at Select Location



