

5



Patient Details

UHID : AFD000015301
Patient Name : MRS. MANVI NAGAR
Age / Gender : 36 Yrs 2 Mth / FEMALE / 29-06-1986
Company : Acrofemi Healthcare Ltd
Address : VPO- BAROLI, SEC - 80, FARIDABAD, HARYANA, INDIA, Zip No.-121004

Bill Date : 24-09-2022 09:04:50
Bill No. : AFDHC220000536
Receipt No. : AFDPRT220025233

Service Details

| S. No. | Investigation | Rooms | Remarks |
|--------|---|-------|---------|
| 1 | MEDIWHEEL PKG FOR FEMALE BELOW 40YRS | | |
| 2 | CBC-1(COMPLETE BLOOD COUNT) | | |
| 3 | ESR | | |
| 4 | URINE, ROUTINE EXAMINATION | | |
| 5 | STOOL ROUTINE EXAMINATION | | |
| 6 | * BLOOD GROUP (ABO & RH) | | |
| 7 | GLUCOSE PLASMA (FASTING) | | |
| 8 | GLUCOSE PLASMA (PP) POST PRANDIAL | | |
| 9 | GLYCATED HAEMOGLOBIN (HBA1C) | | |
| 10 | THYROID PROFILE (FT3+FT4+TSH) | | |
| 11 | LIPID PROFILE | | |
| 12 | KFT/RFT-KIDNEY/RENAL PANEL 1 | | |
| 13 | LIVER FUNCTION TESTS (LFT) | | |
| 14 | ECG | | |
| 15 | 2D ECHO DR. MITHILESH KUMAR | | |
| 16 | XRAY-CHEST P.A. | | |
| 17 | USG-FOR WHOLE ABDOMEN | | |
| 18 | OPD Consultation-Internal Medicine DR. MUKUND SINGH | | |
| 19 | OPD Consultation-Ophthal DR. UPASANA / DR. SATISH JERIA | | |

Prepared By : MR. NIKHIL SHARMA

Employee ID
Signature

FINAL REPORT

| | | | |
|-----------------|-------------------------|-----------------------|--------------------|
| Bill No. | : AFDHC220000536 | Bill Date | : 24-09-2022 09:04 |
| Patient Name | : MRS. MANVI NAGAR | UHID | : AFD000015301 |
| Age / Gender | : 36 Yrs 2 Mth / FEMALE | Patient Type | : OPD If PHC : |
| Ref. Consultant | : SELF | Ward / Bed | : / |
| Sample ID | : AFD22017340 | Current Ward / Bed | : / |
| | | Receiving Date & Time | : 24-09-2022 10:16 |
| | | Reporting Date & Time | : 24-09-2022 12:47 |

HAEMATOLOGY REPORTING

| Test (Methodology) | Flag | Result | UOM | Biological Reference Interval |
|--------------------|------|--------|-----|-------------------------------|
|--------------------|------|--------|-----|-------------------------------|

Sample Type: EDTA Whole Blood

MEDIWHEEL PKG FOR FEMALE BELOW 40YRS

CBC -1 (COMPLETE BLOOD COUNT)

| | | | | |
|---|---|------|---------------|-------------|
| TOTAL LEUCOCYTE COUNT (Flow Cytometry) | | 6.2 | thousand/cumm | 4 - 11 |
| RED BLOOD CELL COUNT (Hydro Dynamic Focussing) | | 4.4 | million/cumm | 3.8 - 4.8 |
| HAEMOGLOBIN (S.S Hb Detection) | | 12.0 | g/dL | 12 - 15 |
| PACK CELL VOLUME (Cumulative Pulse Height Detection) | | 37.1 | % | 36 - 46 |
| MEAN CORPUSCULAR VOLUME | | 85.0 | fL | 83 - 101 |
| MEAN CORPUSCULAR HAEMOGLOBIN | | 27.6 | pg | 27 - 32 |
| MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION | | 32.4 | g/dL | 31.5 - 34.5 |
| PLATELET COUNT (Hydro Dynamic Focussing) | | 255 | thousand/cumm | 150 - 400 |
| RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution) | H | 50.9 | fL | 39 - 46 |
| RED CELL DISTRIBUTION WIDTH (C.V.) | H | 15.6 | % | 11.6 - 14 |


DIFFERENTIAL LEUCOCYTE COUNT

| | | | | |
|------------------|---|----|-----------|---------|
| NEUTROPHILS | | 61 | % | 40 - 80 |
| LYMPHOCYTES | | 30 | % | 20 - 40 |
| MONOCYTES | | 6 | % | 2 - 10 |
| EOSINOPHILS | | 3 | % | 1 - 5 |
| BASOPHILS | | 0 | % | 0 - 1 |
| ESR (Westergren) | H | 43 | mm 1st hr | 0 - 20 |

**** End of Report ****

IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low



DR. RICHA KAUSHIK MISHRA
MBBS, DNB
CONSULTANT

FINAL REPORT

| | | | |
|-----------------|-------------------------|-----------------------|---|
| Bill No. | : AFDHC220000536 | Bill Date | : 24-09-2022 09:04 |
| Patient Name | : MRS. MANVI NAGAR | UHID | : AFD000015301 |
| Age / Gender | : 36 Yrs 2 Mth / FEMALE | Patient Type | : OPD If PHC : |
| Ref. Consultant | : SELF | Ward / Bed | : / |
| Sample ID | : AFD22017372 | Current Ward / Bed | : / |
| | | Receiving Date & Time | : 24-09-2022 11:44 |
| | | Reporting Date & Time | : 24-09-2022 14:34 |

CLINICAL PATH REPORTING

| Test (Methodology) | Flag | Result | UOM | Biological Reference Interval |
|--------------------|------|--------|-----|-------------------------------|
|--------------------|------|--------|-----|-------------------------------|

Sample Type: Urine
MEDIWHEEL PKG FOR FEMALE BELOW 40YRS
URINE, ROUTINE EXAMINATION
PHYSICAL EXAMINATION

| | | | | |
|-----------|--|-------------|--|-------------|
| QUANTITY | | 30 mL | | |
| COLOUR | | Pale yellow | | Pale Yellow |
| TURBIDITY | | Turbid | | |

CHEMICAL EXAMINATION

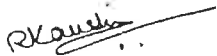
| | | | | |
|-------------------------|--|----------|--|---------------|
| PH | | 5.0 | | 5.0 - 8.5 |
| PROTEINS | | Trace | | Negative |
| SUGAR | | Negative | | Negative |
| SPECIFIC GRAVITY, URINE | | 1.010 | | 1.005 - 1.030 |

MICROSCOPIC EXAMINATION

| | | | | |
|------------------|--|----------|------|-------|
| LEUCOCYTES | | Numerous | /HPF | 0 - 5 |
| RBC's | | 2-4 | | |
| EPITHELIAL CELLS | | 3-4 | | |
| CASTS | | Nil | | |
| CRYSTALS | | Nil | | |

**** End of Report ****
IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low


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 MBBS, DNB
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FINAL REPORT

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|-----------------|-------------------------|-----------------------|--------------------|
| Bill No. | : AFDHC220000536 | Bill Date | : 24-09-2022 09:04 |
| Patient Name | : MRS. MANVI NAGAR | UHID | : AFD000015301 |
| Age / Gender | : 36 Yrs 2 Mth / FEMALE | Patient Type | : OPD If PHC : |
| Ref. Consultant | : SELF | Ward / Bed | : / |
| Sample ID | : AFD22017341 | Current Ward / Bed | : / |
| | | Receiving Date & Time | : 24-09-2022 10:16 |
| | | Reporting Date & Time | : 24-09-2022 14:16 |

BLOOD BANK REPORTING

| Test (Methodology) | Flag | Result | UOM | Biological Reference Interval |
|--------------------|------|--------|-----|-------------------------------|
|--------------------|------|--------|-----|-------------------------------|

Sample Type: EDTA Whole Blood

MEDIWHEEL PKG FOR FEMALE BELOW 40YRS

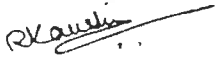
BLOOD GROUP (ABO & RH)

| | |
|-----------|----------|
| ABO GROUP | "O" |
| RH TYPE | POSITIVE |

**** End of Report ****

IMPORTANT INSTRUCTIONS

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MBBS, DNB
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FINAL REPORT

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|-----------------|-------------------------|-----------------------|--------------------|
| Bill No. | : AFDHC220000536 | Bill Date | : 24-09-2022 09:04 |
| Patient Name | : MRS. MANVI NAGAR | UHID | : AFD000015301 |
| Age / Gender | : 36 Yrs 2 Mth / FEMALE | Patient Type | : OPD If PHC : |
| Ref. Consultant | : SELF | Ward / Bed | : / |
| Sample ID | : AFD22017401 | Current Ward / Bed | : / |
| | | Receiving Date & Time | : 24-09-2022 14:53 |
| | | Reporting Date & Time | : 24-09-2022 16:54 |

Sample Type: Plasma, Serum

MEDIWHEEL PKG FOR FEMALE BELOW 40YRS

| | | | |
|--|------|-------|----------|
| GLUCOSE-PLASMA (FASTING) (UV Hexokinase) | 76.1 | mg/dL | 70 - 100 |
|--|------|-------|----------|

Note: A diagnosis of diabetes mellitus is made if fasting blood glucose exceeds 126 mg/dL.
(As per American Diabetes Association recommendation)

| | | | |
|--|-------|-------|----------|
| GLUCOSE-PLASMA (POST PRANDIAL) (UV Hexokinase) | 108.2 | mg/dL | 70 - 140 |
|--|-------|-------|----------|

Note: A diagnosis of diabetes mellitus is made if 2 hour post load glucose exceeds 200 mg/dL.
(As per American Diabetes Association recommendation)

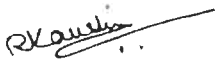
KFT/RFT- KIDNEY/RENAL PANEL 1

| | | | |
|--|-----|---------|-----------|
| BLOOD UREA (Urease-GLDH,Kinetic) | 24 | mg/dL | 15 - 45 |
| CREATININE-SERUM (Modified Jaffe s Kinetic) | 0.7 | mg/dL | 0.6 - 1.1 |
| SODIUM-SERUM (Indirect Ion-Selective Electrode) | 137 | m.mol/L | 135 - 145 |
| POTASSIUM-SERUM (Indirect Ion-Selective Electrode) | 4.8 | m.mol/L | 3.5 - 5.1 |
| CHLORIDE-SERUM (Indirect Ion-Selective Electrode) | 101 | m.mol/L | 98 - 107 |

**** End of Report ****

IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low



DR. RICHA KAUSHIK MISHRA
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FINAL REPORT

| | | | |
|-----------------|-------------------------|-----------------------|--|
| Bill No. | : AFBCB220003154 | Bill Date | : 24-09-2022 12:36 |
| Patient Name | : MRS. MANVI NAGAR | UHID | : AFD000015301 |
| Age / Gender | : 36 Yrs 2 Mth / FEMALE | Patient Type | : <input type="checkbox"/> If PHC <input type="checkbox"/> |
| Ref. Consultant | : SELF | Ward / Bed | : / |
| Sample ID | : AFB22310271 | Current Ward / Bed | : / |
| | | Receiving Date & Time | : 24-09-2022 16:16 |
| | | Reporting Date & Time | : 26-09-2022 11:14 |

HAEMATOLOGY REPORTING

| Test (Methodology) | Flag | Result | UOM | Biological Reference Interval |
|--------------------|------|--------|-----|-------------------------------|
|--------------------|------|--------|-----|-------------------------------|

Sample Type: EDTA Whole Blood

*GLYCATED HAEMOGLOBIN (HBA1C)

| | | | | |
|--------------|--|-----|---|-------------|
| HBA1C (HPLC) | | 5.5 | % | 4.27 - 6.07 |
|--------------|--|-----|---|-------------|

INTERPRETATION:

| HbA1c % | Degree of Glucose Control |
|-----------|---|
| >8% | Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy |
| 7.1 - 8.0 | Fair Control |
| <7.0 | Good Control |

Note: 1. A three monthly monitoring is recommended in diabetics.
2. Since HbA1c concentration represents the integrated values for blood glucose over the preceding 6 - 10 weeks and is not affected by daily glucose fluctuation, exercise and recent food intake, it is a more useful tool for monitoring diabetics.

**** End of Report ****

IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low

DR. SHILPA G
MD, PATHOLOGY
Sr Consultant



FINAL REPORT

| | | | |
|-----------------|-------------------------|-----------------------|--------------------|
| Bill No. | : AFBCB220003154 | Bill Date | : 24-09-2022 12:36 |
| Patient Name | : MRS. MANVI NAGAR | UHID | : AFD000015301 |
| Age / Gender | : 36 Yrs 2 Mth / FEMALE | Patient Type | : If PHC : |
| Ref. Consultant | : SELF | Ward / Bed | : / |
| Sample ID | : AFB22310272 | Current Ward / Bed | : / |
| | | Receiving Date & Time | : 24-09-2022 16:16 |
| | | Reporting Date & Time | : 26-09-2022 09:34 |

SEROLOGY REPORTING

| Test (Methodology) | Flag | Result | UOM | Biological Reference Interval |
|--------------------|------|--------|-----|-------------------------------|
|--------------------|------|--------|-----|-------------------------------|

Sample Type: Serum

***THYROID PROFILE (FT3+FT4+TSH)**

| | | | | |
|---|--|------|-------|-----------|
| FREE-TRI IODO THYRONINE (FT3) (ECLIA) | | 2.86 | pg/mL | 2.0-4.4 |
| FREE -THYROXINE (FT4) (ECLIA) | | 1.66 | ng/dL | 0.9-1.7 |
| THYROID STIMULATING HORMONE (TSH) (ECLIA) | | 0.42 | mIU/L | 0.27-4.20 |

**** End of Report ****

IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low

Shilpa

DR. SHILPA G
MD, PATHOLOGY
Sr Consultant

FINAL REPORT

| | | | |
|-----------------|-------------------------|-----------------------|--------------------|
| Bill No. | : AFDHC220000536 | Bill Date | : 24-09-2022 09:04 |
| Patient Name | : MRS. MANVI NAGAR | UHID | : AFD000015301 |
| Age / Gender | : 36 Yrs 2 Mth / FEMALE | Patient Type | : OPD If PHC : |
| Ref. Consultant | : SELF | Ward / Bed | : / |
| Sample ID | : AFD22017401 | Current Ward / Bed | : / |
| | | Receiving Date & Time | : 24-09-2022 14:53 |
| | | Reporting Date & Time | : 24-09-2022 16:54 |

BIOCHEMISTRY REPORTING

| Test (Methodology) | Flag | Result | UOM | Biological Reference Interval |
|--------------------|------|--------|-----|-------------------------------|
|--------------------|------|--------|-----|-------------------------------|

Sample Type: Plasma, Serum

MEDIWHEEL PKG FOR FEMALE BELOW 40YRS


| | | | | |
|--|---|-------|-------|---|
| CHOLESTROL-TOTAL (CHO-POD) | H | 200 | mg/dL | 0 - 160 |
| HDL CHOLESTROL Enzymatic Inhibition | | 50 | mg/dL | >45 |
| CHOLESTROL-LDL DIRECT Enzymatic Selective Protection | H | 138 | mg/dL | 0 - 100 |
| S.TRYGLYCERIDES (GPO - POD) | | 55 | mg/dL | 0 - 160 |
| NON-HDL CHOLESTROL | H | 150.0 | mg/dL | 0 - 125 |
| TOTAL CHOLESTROL / HDL CHOLESTROL | | 4.0 | | ½Average Risk <3.3 Average Risk 3.3 - 4.4 2 Times Average Risk 4.5 - 7.1 3 Times Average Risk 7.2-11.0 |
| LDL CHOLESTROL / HDL CHOLESTROL | | 2.8 | | ½Average Risk <1.5 Average Risk 1.5-3.2 2 Times Average Risk 3.3-5.0 3 Times Average Risk 5.1-6.1 |
| CHOLESTROL-VLDL | | 11 | mg/dL | 10 - 35 |

Comments:

- Disorders of Lipid metabolism play a major role in atherosclerosis and coronary heart disease.
- There is an established relationship between increased total cholesterol & LDL cholesterol and myocardial infarction.
- HDL cholesterol level is inversely related to the incidence of coronary artery disease.
- Major risk factors which adversely affect the lipid levels are:
 - Cigarette smoking.
 - Hypertension.
 - Family history of premature coronary heart disease.
 - Pre-existing coronary heart disease.

**** End of Report ****
IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low


DR. RICHA KAUSHIK MISHRA
 MBBS, DNB
 CONSULTANT

FINAL REPORT

| | | | |
|-----------------|-------------------------|-----------------------|--------------------|
| Bill No. | : AFDHC220000536 | Bill Date | : 24-09-2022 09:04 |
| Patient Name | : MRS. MANVI NAGAR | UHID | : AFD000015301 |
| Age / Gender | : 36 Yrs 2 Mth / FEMALE | Patient Type | : OPD If PHC : |
| Ref. Consultant | : SELF | Ward / Bed | : / |
| Sample ID | : AFD22017342 | Current Ward / Bed | : / |
| | | Receiving Date & Time | : 24-09-2022 10:16 |
| | | Reporting Date & Time | : 24-09-2022 11:45 |

BIOCHEMISTRY REPORTING

| Test (Methodology) | Flag | Result | UOM | Biological Reference Interval |
|--------------------|------|--------|-----|-------------------------------|
|--------------------|------|--------|-----|-------------------------------|

Sample Type: Serum

MEDIWHEEL PKG FOR FEMALE BELOW 40YRS

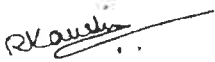
LIVER FUNCTION TESTS (LFT)

| | | | | |
|---|----------|-------------|-------|-----------|
| BILIRUBIN-TOTAL (DPD) | | 0.48 | mg/dL | 0.2 - 1.0 |
| BILIRUBIN-DIRECT (DPD) | | 0.10 | mg/dL | 0 - 0.2 |
| BILIRUBIN-INDIRECT | | 0.38 | mg/dL | 0.2 - 0.8 |
| S.PROTEIN-TOTAL (Buret) | | 7.6 | g/dL | 6 - 8.1 |
| ALBUMIN-SERUM (Dye Binding-Bromocresol Green) | | 4.4 | g/dL | |
| S.GLOBULIN | | 3.2 | g/dL | 2.8-3.8 |
| A/G RATIO | L | 1.38 | | 1.5 - 2.5 |
| ALKALINE PHOSPHATASE (IFCC AMP BUFFER) | | 52.2 | IU/L | 42 - 98 |
| ASPARTATE AMINO TRANSFERASE (IFCC) | | 18.3 | IU/L | 10 - 42 |
| ALANINE AMINO TRANSFERASE (IFCC) | | 14.2 | IU/L | 10 - 40 |
| GAMMA-GLUTAMYLTRANSPEPTID (IFCC) | | 9.6 | IU/L | 7 - 35 |
| LACTATE DEHYDROGENASE (IFCC; L-F) | | 155.6 | IU/L | 0 - 248 |

**** End of Report ****

IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low



DR. RICHA KAUSHIK MISHRA
MBBS, DNB
CONSULTANT

Mt. Manvi
ID: Opd

22.09.2022 9:22:37
ASIAN FIDELIS HOSPITAL
SEC- 88, FARIDABAD HARYANA
RIPS CITY

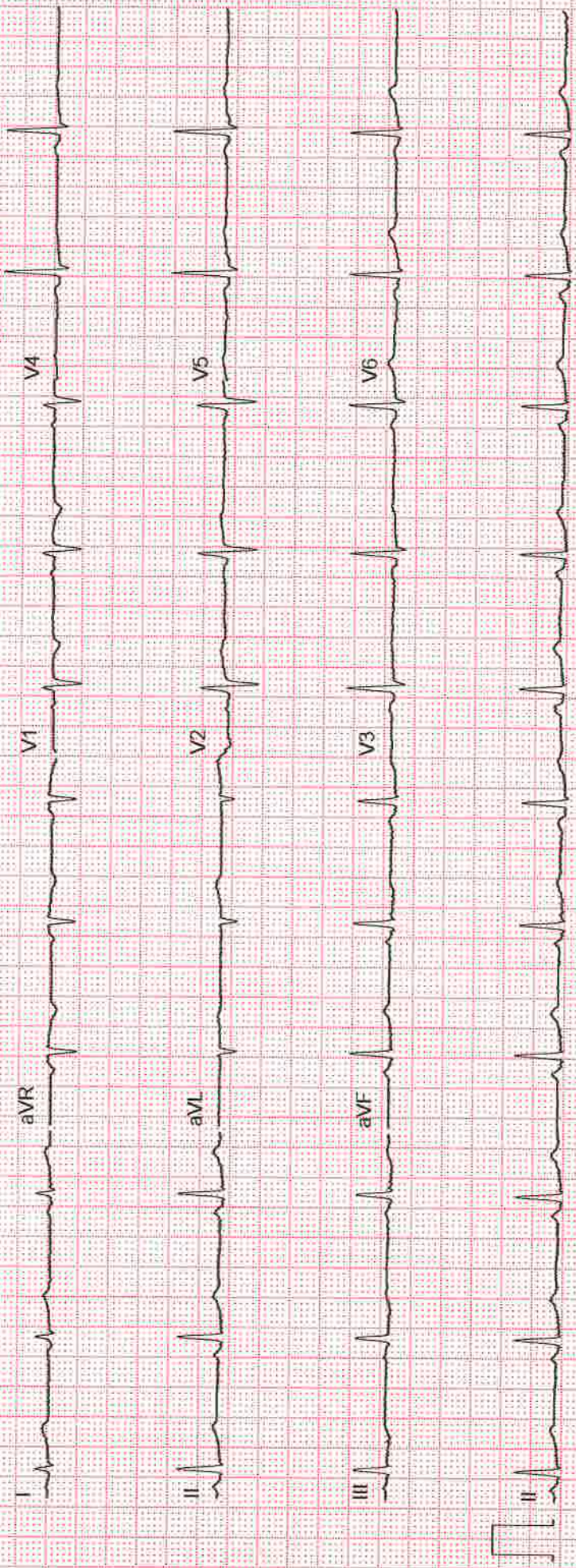
Location:
Room:
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

67 bpm
/ - mmHg

Normal sinus rhythm with sinus arrhythmia
Nonspecific T wave abnormality
Abnormal ECG

QRS 76 ms
QT / QTcBaz 400 / 422 ms
PR 134 ms
P 98 ms
RR / PP 896 / 895 ms
P / QRS / T 53 / 77 / 44 degrees

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:



NON INVASIVE CARDIOLOGY

| | | | |
|--------------|--------------------|----------------|-----------------------|
| Patient Name | : MRS. MANVI NAGAR | IPD No. | : |
| Age | : 36 Yrs 2 Mth | UHID | : AFD000015301 |
| Gender | : FEMALE | Bill No. | : AFDHC220000536 |
| Ref. Doctor | : SELF | Bill Date | : 24-09-2022 09:04:50 |
| Ward | : | Room No. | : |
| | | Procedure Date | : 24-09-2022 11:17:50 |

ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

| MEASUREMENTS | ABSOLUTE VALUE | | NORMAL VALUE |
|-----------------------|----------------|--------|------------------------|
| Aortic Root Diameter | 2.4 | | 2.0-3.7cm < 2.2cm/M2 |
| Aortic Valve Opening | N | | 1.5-2.6cm |
| Left Atrial Dimension | 3.0 | | 1.9-4.0cm < 2.2cm/M2 |
| RV Dimensions | N | | 0.7-2.6cm |
| RV thickness | N | | 0.3-0.9cm |
| LV ED Dimension | 3.6 | | 3.7-5.6 cm < 3.2cm /M2 |
| LV ES Dimension | 2.3 | | 2.2-4.0 cm |
| IVS thickness | ED – 0.8 | ES-0.9 | 0.6-1.2cm |
| LVPW Thickness | ED – 0.7 | ES-0.9 | 0.5-1.1cm |
| IVS/ LVPW Ratio | N | | |
| Mitral Valve | DE-N | EF -N | |

| INDICES OF LV FUNCTION | | |
|-------------------------------|-----|---------|
| EPSS | | <9mm |
| FS% | 30% | 24-42% |
| LV Ejection Fraction | 60% | 60+/-6% |

NON INVASIVE CARDIOLOGY

| | | | |
|--------------|--------------------|----------------|-----------------------|
| Patient Name | : MRS. MANVI NAGAR | IPD No. | : |
| Age | : 36 Yrs 2 Mth | UHID | : AFD000015301 |
| Gender | : FEMALE | Bill No. | : AFDHC220000536 |
| Ref. Doctor | : SELF | Bill Date | : 24-09-2022 09:04:50 |
| Ward | : | Room No. | : |
| | | Procedure Date | : 24-09-2022 11:17:50 |

IMAGING:

2D- imaging in PLAX.SAX and apical views revealed normal left ventricle. Movement of septum, posterior and lateral walls are normal. Global LVEF is 60%. Mitral valve opening is normal. No evidence of mitral valve prolapse is seen. Aortic valve has three cusps and its opening is not restricted. Tricuspid valve leaflets move normally, Pulmonary valve is normal. Interatrial and Interventricular septal are intact, No intracardiac mass or thrombus is seen. No pericardial pathology is observed.

MORPHOLOGICAL DATA

| | | | |
|---------------------------|--------|-------------------------|--------|
| Mitral Valve : AML PML | Normal | Interatrial Septum | Intact |
| Aortic Valve | Normal | Interventricular Septum | Intact |
| Tricuspid Valve | Normal | Pulmonary Artery | Normal |
| Pulmonary Valve | Normal | Aorta | Normal |
| Right Ventricle | Normal | Right Atrium | Normal |
| Left Ventricle | Normal | Left Atrium | Normal |

DOPPLER STUDY

| | m/s | m/s | |
|--------------------|---------|-------|--------|
| MITRAL VELOCITY | E-0.8 | A-0.4 | MR 0/4 |
| TRICUSPID VELOCITY | 1.7 m/s | | TR 0/4 |
| AORTIC VELOCITY | 1.0 m/s | | AR 0/4 |
| PULMONARY VELOCITY | 1.1 m/s | | PR 0/4 |
| PA Pressure | 18+RAP | | |

NON INVASIVE CARDIOLOGY

| | | | |
|--------------|--------------------|----------------|-----------------------|
| Patient Name | : MRS. MANVI NAGAR | IPD No. | : |
| Age | : 36 Yrs 2 Mth | UHID | : AFD000015301 |
| Gender | : FEMALE | Bill No. | : AFDHC220000536 |
| Ref. Doctor | : SELF | Bill Date | : 24-09-2022 09:04:50 |
| Ward | : | Room No. | : |
| | | Procedure Date | : 24-09-2022 11:17:50 |

COLOUR FLOW MAPPING

Trace mitral regurgitation.
Trace tricuspid regurgitation.

FINAL IMPRESSION

1. No RWMA, LVEF-60%.
2. Normal cardiac chamber dimension
3. Trace mitral regurgitation.
4. Trace tricuspid regurgitation. (18+ RAP)
5. Normal mitral inflow pattern.
6. No clot/mass/vegetation/PE

DR. MITHILESH KUMAR
MB, DrNB (Cardiology),
Consultant Cardiologist
38510
HMC-HN19723

For The perusal of a medical professional only
The content of this report is only an opinion based on images and is therefore subject to inherent technical limitations.
It is not the diagnosis & must be correlated clinically.

NOT FOR MEDICOLEGAL PURPOSES

.....End of Report.....

Prepare By.
RAJNI.KAPOOR

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

| | | | | |
|--------------|--------------------|------------|---|---------------------|
| Patient Name | : MRS. MANVI NAGAR | IPD No. | : | |
| Age | : 36 Yrs 2 Mth | UHID | : | AFD000015301 |
| Gender | : FEMALE | Bill No. | : | AFDHC220000536 |
| Ref. Doctor | : SELF | Bill Date | : | 24-09-2022 09:04:50 |
| Ward | : | Room No. | : | |
| | | Print Date | : | 24-09-2022 10:23:41 |

USG WHOLE ABDOMEN

FINDINGS:

- Liver is normal in size (longitudinal span 10.5 cm), contour and echotexture. No evidence of any focal lesion is seen. No dilated intrahepatic biliary radicles are seen. Common duct and portal vein are normal in course and caliber.
- *The gall bladder is contracted (? post prandial status).*
- *Visualized Pancreas is normal in size and parenchymal echogenicity. Rest of the pancreas and retroperitoneal structures are obscured by overlying bowel gas shadows.*
- Spleen is normal in size and echo pattern with no focal lesion.
- Both the kidneys are normal in size, shape and position. No evidence of any hydronephrosis is noted on either side. Normal corticomedullary differentiation is maintained bilaterally. The cortical thickness is within normal limits. The right kidney measures 9.6 x 4.5 cm. The left kidney measures 10.6 x 4.4 cm. No focal lesion/calculus noted in either kidney.
- The Urinary Bladder is well distended and shows anechoic contents. No focal lesion/calculus seen. There is no evidence of any obvious intraluminal or perivesical pathology.
- Uterus is retroverted and is normal in size measuring 7.5 x 4.9 x 6.0 cm. Normal echogenicity of myometrium noted. No focal lesion seen. **Intrauterine contraceptive device is seen in situ.** The uterine cavity is empty. Both ovaries are normal. Right ovary measures 3.4 x 1.9 cm, Left ovary measures 3.0 x 1.6 cm.
- No ascites/retroperitoneal lymphadenopathy/pleural effusion.

IMPRESSION: No significant abnormality detected in abdomen and pelvis.

Please correlate clinically.

.....End of Report.....



Prepare By.
BHANOO

DR. BHANOO CHAUDHARY, MBBS, MD
CONSULTANT

Note : The information in this report is based on interpretation of images. This report is not the diagnosis and should be correlated with clinical details and other investigation.

DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

| | | | | |
|--------------|--------------------|------------|---|---------------------|
| Patient Name | : MRS. MANVI NAGAR | IPD No. | : | |
| Age | : 36 Yrs 2 Mth | UHID | : | AFD000015301 |
| Gender | : FEMALE | Bill No. | : | AFDHC220000536 |
| Ref. Doctor | : SELF | Bill Date | : | 24-09-2022 09:04:50 |
| Ward | : | Room No. | : | |
| | | Print Date | : | 24-09-2022 13:15:29 |

CHEST PA VIEW:

Cardiac shadow appears normal.

Both lung fields appear clear.

Both domes of diaphragm and both CP angles are clear.

Both hila appear normal.

Soft tissues and bony cage appear normal.

Please correlate clinically.

.....End of Report.....



Prepare By.
BHANOO

DR. BHANOO CHAUDHARY, MBBS,MD
CONSULTANT

Note : The information in this report is based on interpretation of images. This report is not the diagnosis and should be correlated with clinical details and other investigation.

Investigations Advised :

Plan Of Care :

Treatment Advice:

- 20/20/20 rule
- Click n Blink

RBC RBC Report Legible H+H weeks
Q/A 2/12

Nutritional Screening : Required (If required, please contact, the dietician)
Not Required

Signature of Doctor / Consultant:  Date: 22/9/2022 Time: