

## MYSORE-BALLAL CIRCLE



--- A MEDALL COMPANY ---

Date 10-Sep-2022 10:07 AM

Customer Name : **MR.CHANDRASHEKARAI AH**DOB : **05 Jun 1983**Ref Dr Name : **MediWheel**Age : **39Y/MALE**Customer Id : **MED111293151**Visit ID : **712227734**

Email Id :

Phone No : **7353016901**Corp Name : **MediWheel**

Address :

Package Name : **Mediwheel Full Body Health Checkup Male Below 40**

S.No	Modality	Study	Accession No	Time	Seq	Signature
1	LAB	COMPLETE BLOOD COUNT WITH ESR				
2	LAB	THYROID PROFILE/ TFT( T3, T4, TSH)				
3	LAB	STOOL ANALYSIS - ROUTINE	<i>Paid</i>			
4	LAB	URINE ROUTINE				
5	LAB	CREATININE				
6	LAB	BLOOD UREA NITROGEN (BUN) - P				
7	LAB	GLUCOSE - FASTING				
8	LAB	GLUCOSE - POSTPRANDIAL (2 HRS)	✓			
9	LAB	GLYCOSYLATED HAEMOGLOBIN (HbA1c)				
10	LAB	LIPID PROFILE				
11	LAB	LIVER FUNCTION TEST (LFT)				
12	LAB	URIC ACID				
13	LAB	URINE GLUCOSE - FASTING				
14	LAB	URINE GLUCOSE - POSTPRANDIAL (2 Hrs)	✓			
15	LAB	BLOOD GROUP & RH TYPE (Forward Reverse)				

BUN/CREATININE RATIO - 0							
Sl No	Sl No	Sl No	Sl No	Sl No	Sl No	Sl No	Sl No
18	US	physical examination	MYS2722118102651				
19	OTHERS	ULTRASOUND ABDOMEN	MYS2722118103462				
20	OTHERS	Treadmill 2D Echo ✓	MYS2722118127528				
21	OTHERS	EYE CHECKUP	MYS2722118135592				
22	OTHERS	X RAY CHEST ✓	MYS2722118145199				
23	OTHERS	Consultation Physician	MYS2722118148004				
24	ECHO	ELECTROCARDIOGRAM ECG	MYS2722118149333				

H - 166 cm

W - 71 kg

BP - 120/80 mmHg

Puls - 90

HIP - 37

Wrist - 37 / 35

Registered By

(R.SUNILKUMAR)

Signature

## FITNESS CERTIFICATE

NAME: <i>Chandra Shekhar</i>	AGE: <i>39</i>	
Ht: <i>166</i> CMS	Wt: <i>71</i> KGS	SEX:

PARAMETERS	MEASUREMENTS
PULSE / BP (supine)	<i>76</i> / <i>mt</i> / <i>mmHg</i> <i>120/76 mmHg</i>
INSPIRATION	<i>38</i>
EXPIRATION	<i>40</i>
CHEST CIRCUMFERENCE	
PREVIOUS ILLNESS	
VISION	
FAMILY HISTORY	FATHER: <i>Hypertension</i> MOTHER: <i>- Nil</i>

REPORTS: *Nil medications*

DATE: *10/09/2022*  
PLACE: *Mysuru*



**CONSULTANT PHYSICIAN**

**Dr. NIKHIL. B.**  
M.D., D.M.(Cardiologist)  
Interventional Cardiologist  
KMC Reg. No.: 90111



Customer Name	MR.CHANDRASHEKARAI AH	Customer ID	MED111293151
Age & Gender	39Y/MALE	Visit Date	10/09/2022
Ref Doctor	MediWheel		

### 2 D ECHOCARDIOGRAPHIC STUDY

#### M mode measurement:

AORTA	:	2.8cms
LEFT ATRIUM	:	3.3cms
LEFT VENTRICLE (DIASTOLE)	:	4.6cms
(SYSTOLE)	:	3.0cms
VENTRICULAR SEPTUM (DIASTOLE)	:	0.8cms
(SYSTOLE)	:	1.1cms
POSTERIOR WALL (DIASTOLE)	:	0.8cms
(SYSTOLE)	:	1.2cms
EDV	:	71ml
ESV	:	28ml
FRACTIONAL SHORTENING	:	36%
EJECTION FRACTION	:	61%
RVID	:	1.5cms

#### DOPPLER MEASUREMENTS:

MITRAL VALVE	:	'E' - 0.85m/s	'A' - 0.38m/s	NO MR
AORTIC VALVE	:	0.98m/s		NO AR
TRICUSPID VALVE	:	'E' - 0.90m/s	'A' - 0.45m/s	NO TR
PULMONARY VALVE	:	0.88m/s		NO PR



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**2D ECHOCARDIOGRAPHY FINDINGS:**

Left ventricle : Normal size, Normal systolic function.  
No regional wall motion abnormalities.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Mitral valve : Normal, No mitral valve prolapsed.

Aortic valve : Normal, Trileaflet.

Tricuspid valve : Normal.

Pulmonary valve : Normal.

IAS : Intact.

IVS : Intact.

Pericardium : No pericardial effusion.

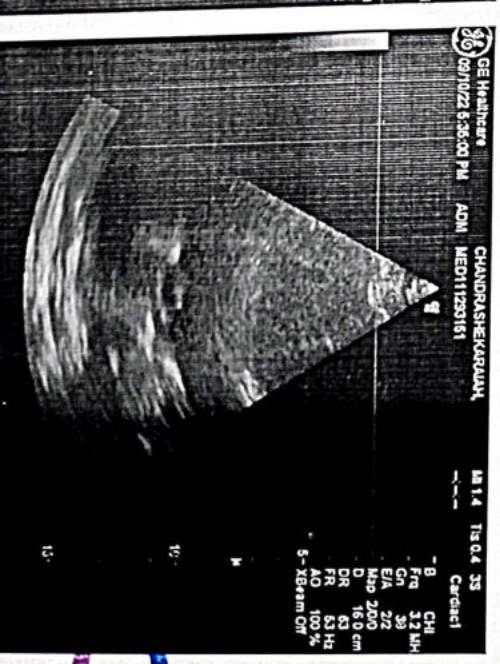
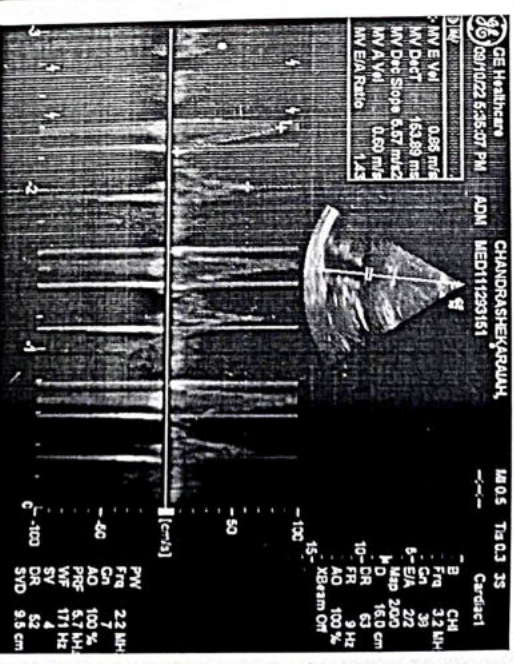
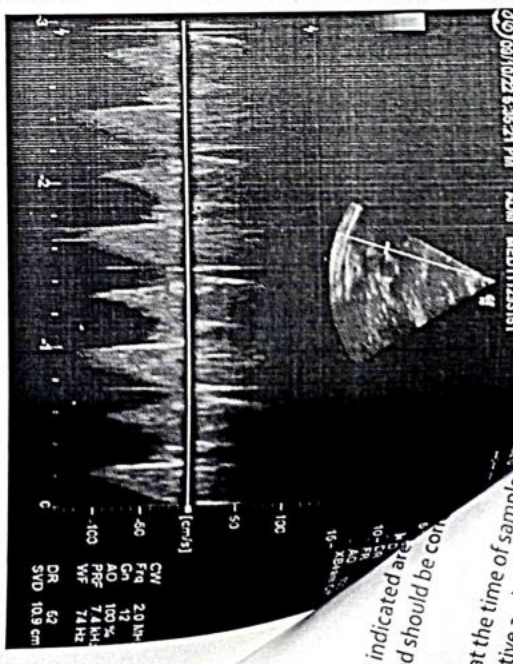
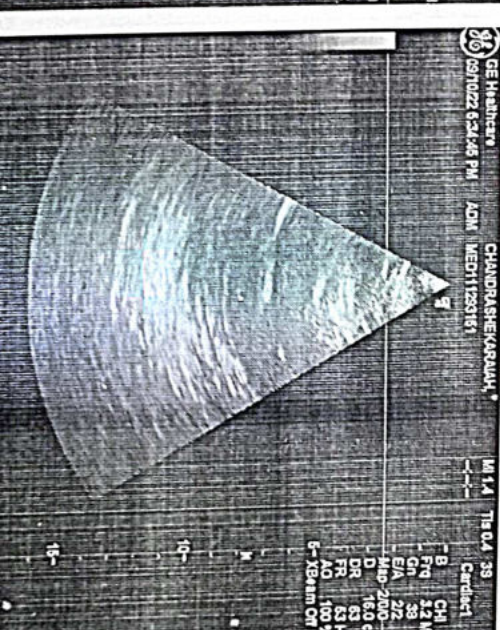
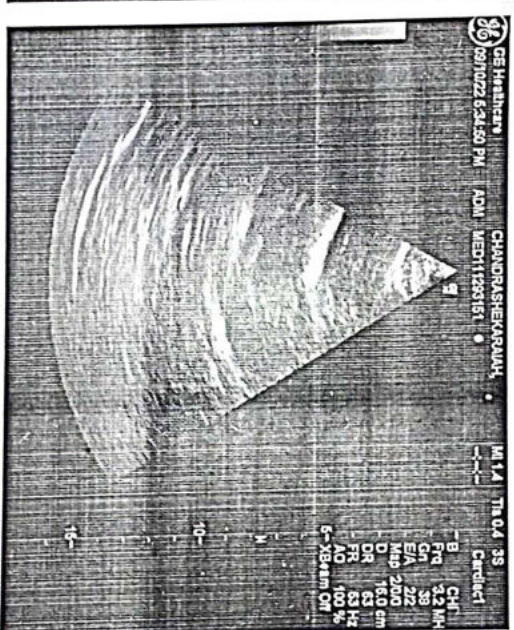
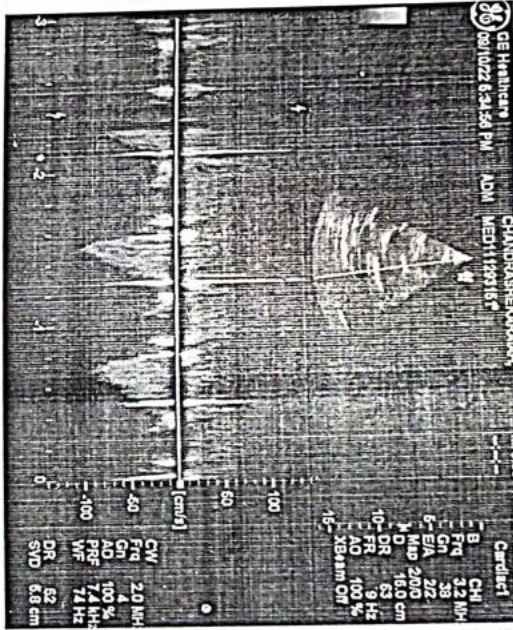
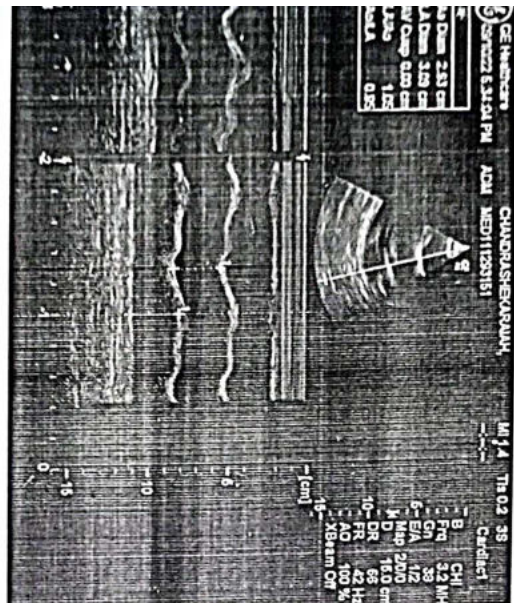
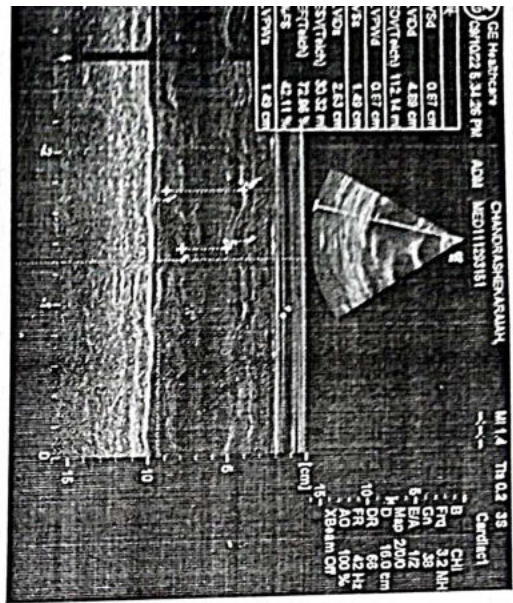
**IMPRESSION:**

- NORMAL SIZED CARDIAC CHAMBERS.
- NORMAL LV SYSTOLIC FUNCTION. EF: 61%.
- NO REGIONAL WALL MOTION ABNORMALITIES.
- NORMAL VALVES.
- NO CLOTS/ PERICARDIAL EFFUSION VEGETATION.



**DR. NIKHIL B.**  
**INTERVENTIONAL CARDIOLOGIST**  
NB/TG





indicated are  
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at the time of sample  
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Medall



# NETHRADHAMA SUPER SPECIALITY EYE HOSPITAL

(A Unit of Nethradhama Hospitals Pvt. Ltd.)

## OPD SHEET

Date : 10/9/22

Patient's Name : Mr. Chandrashekariah. HOP No. 1210127

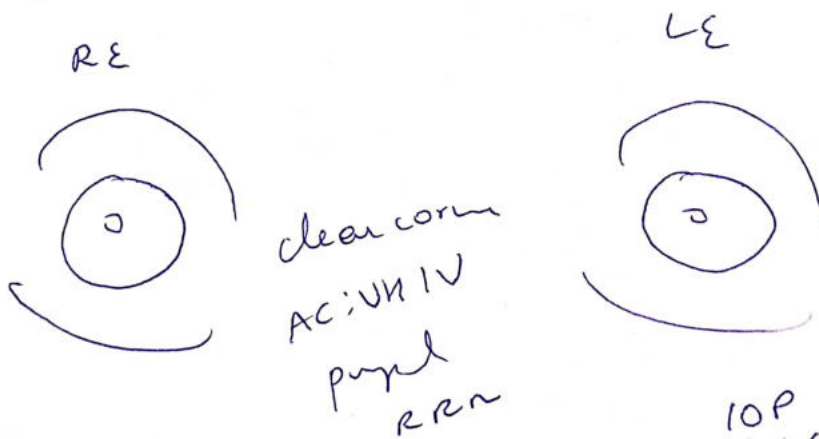
39y/m

2:10 PM  
**Dr. Priya. M**  
M.B.B.S., D.O.  
Consultant Glaucoma & Cataract  
KMC No. 88421

for medical check up

Uncorrected vision  
(RE) 6/18, NG  
(LE) 6/18, NG

~~AC~~ BCVA (BE) 6/6, NG



IOP (NCT) 15 / 18 mmHg

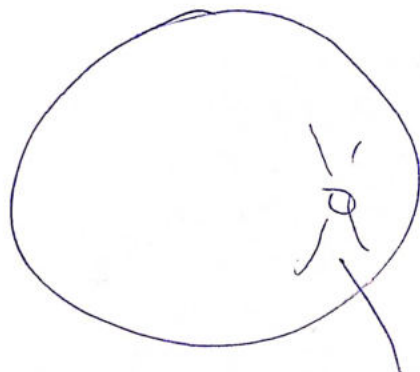
Clone vision  
(Ischikan)

(BE) 38/38

Fundus

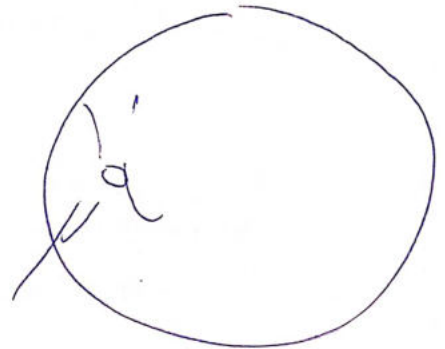
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(BE)

myopia

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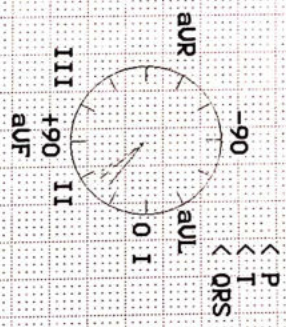
Review

for PM 7

Pris D  
CDR Pris D  
10/9/2021  
H.252W



AGE: 39  
 Measurement Results:  
 QRS : 102 ms  
 QT/QTcB : 358 / 437 ms  
 PR : 132 ms  
 P : 108 ms  
 RR/PP : 670 / 640 ms  
 P/QRS/T : 55 / 40 / 50 degrees  
 QTd/QTcBd : 90 / 110 ms  
 Sokolow : 2.1 mV  
 NK : 12

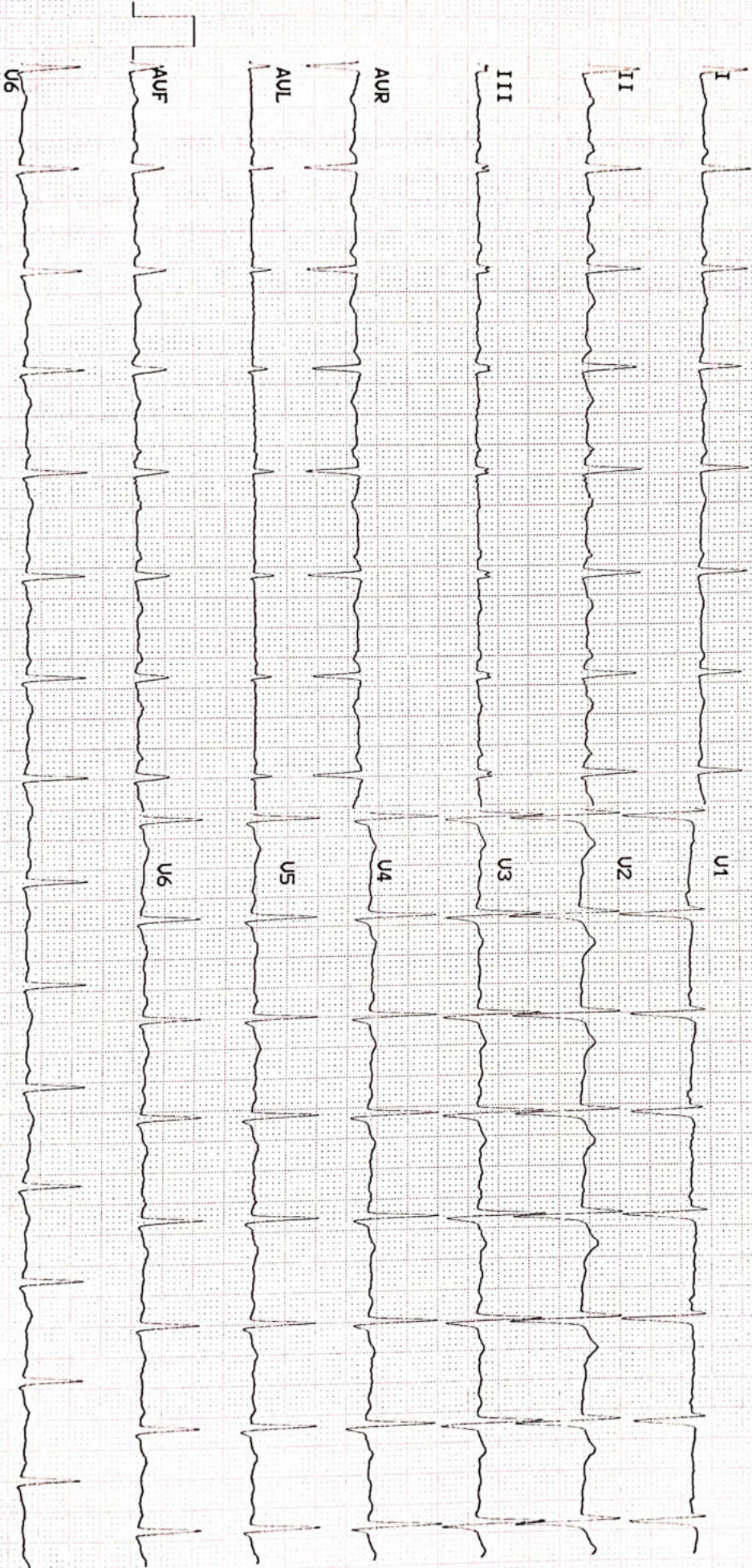


Interpretation:

normal ECG  
 Interventricular Conduction Delay  
 normal sinus rhythm

*Handwritten signature*

Unconfirmed report.



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### ABDOMINO-PELVIC ULTRASONOGRAPHY

**LIVER** is normal in size and shows slightly increased echotexture.

No evidence of focal lesion or intrahepatic biliary ductal dilatation.  
Hepatic and portal vein radicals are normal.

**GALL BLADDER** show normal shape and has clear contents.  
Gall bladder wall is of normal thickness. CBD is of normal calibre.

**PANCREAS** has normal shape, size and uniform echopattern.  
No evidence of ductal dilatation or calcification.

**SPLEEN** show normal shape, size and echopattern.

**KIDNEYS** move well with respiration and have normal shape, size and echopattern.  
Cortico- medullary differentiations are well madeout.  
No evidence of calculus or hydronephrosis.

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	11.0	2.0
Left Kidney	11.4	1.8

**URINARY BLADDER** show normal shape and wall thickness.  
It has clear contents.

**PROSTATE** shows normal shape, size and echopattern.  
No evidence of ascites.

#### IMPRESSION:

➤ **GRADE I FATTY CHANGES IN LIVER.**

#### CONSULTANT RADIOLOGISTS

**DR. ANITHA ADARSH**  
MB/MS



**DR. MOHAN B**

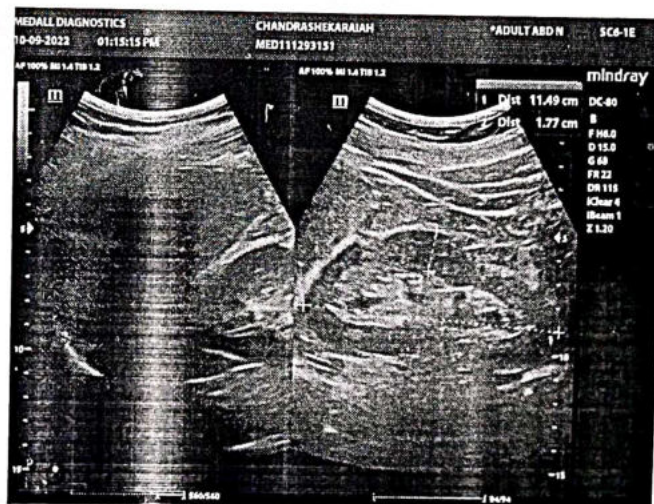
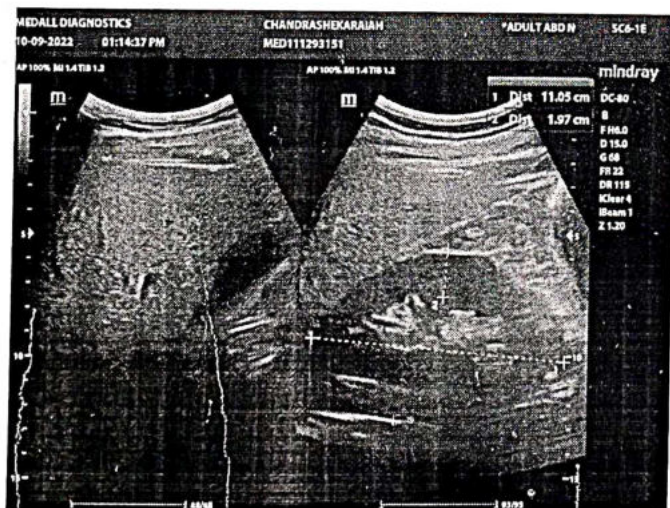
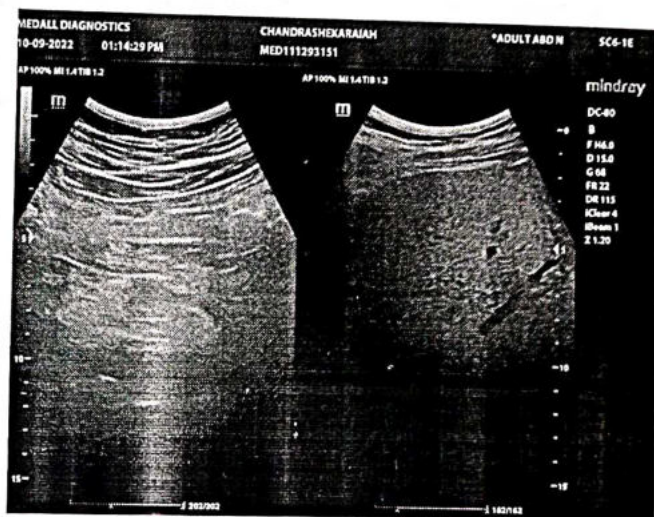
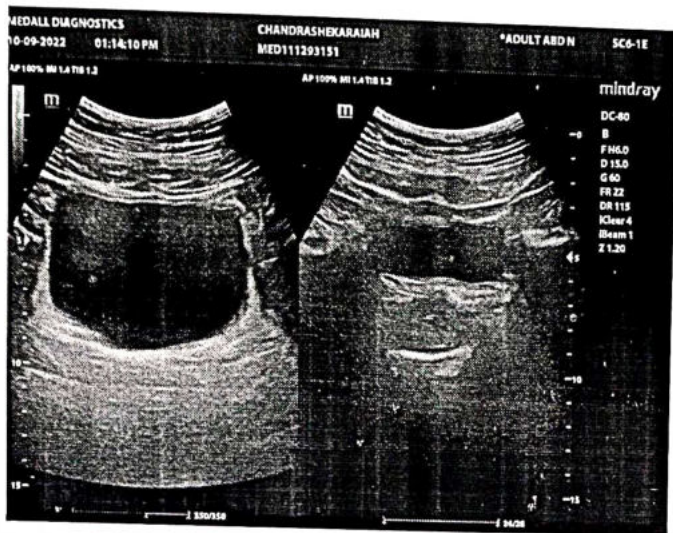


on at the time of scan.  
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indicated  
nd should be

Medall Diagnostics  
Ballal Circle(Ashoka circle) - Mysore



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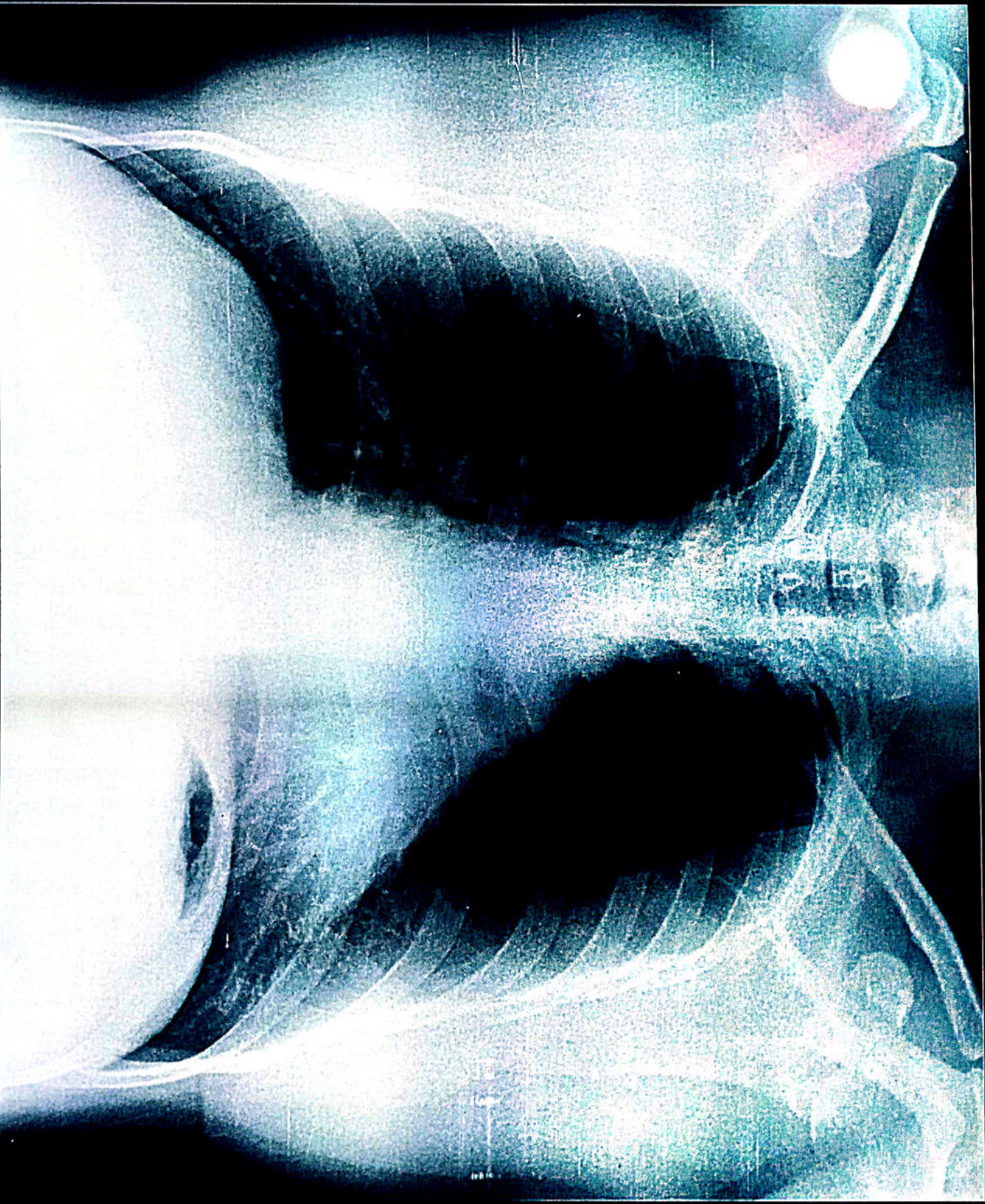


Medall Diagnostics  
Ballal Circle, Ashoka Circle, Mysore

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CHANDRASHEKARAI AH 39 MED111293151 M CHEST PA 9/10/2022 12:18 PM  
MEDALL CLUMAX DIAGNOSTIC

Name : Mr. CHANDRASHEKARAI AH  
PID No. : MED111293151  
SID No. : 712227734  
Age / Sex : 39 Year(s) / Male  
Type : OP  
Ref. Dr : MediWheel

Register On : 10/09/2022 10:07 AM  
Collection On : 10/09/2022 11:10 AM  
Report On : 10/09/2022 6:21 PM  
Printed On : 12/09/2022 4:27 PM



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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## HAEMATOLOGY

### Complete Blood Count With - ESR

Haemoglobin (EDTA Blood/Spectrophotometry)	13.5	g/dL	13.5 - 18.0
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**INTERPRETATION:** Haemoglobin values vary in Men, Women & Children. Low haemoglobin values may be due to nutritional deficiency, blood loss, renal failure etc. Higher values are often due to dehydration, smoking, high altitudes, hypoxia etc.

PCV (Packed Cell Volume) / Haematocrit (EDTA Blood/Derived)	44.5	%	42 - 52
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RBC Count (EDTA Blood/Automated Blood cell Counter)	<b>4.53</b>	mill/cu.mm	4.7 - 6.0
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MCV (Mean Corpuscular Volume) (EDTA Blood/Derived from Impedance)	98.0	fL	78 - 100
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MCH (Mean Corpuscular Haemoglobin) (EDTA Blood/Derived)	29.8	pg	27 - 32
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MCHC (Mean Corpuscular Haemoglobin concentration) (EDTA Blood/Derived)	<b>30.4</b>	g/dL	32 - 36
---------------------------------------------------------------------------	-------------	------	---------

RDW-CV (Derived)	<b>17.7</b>	%	11.5 - 16.0
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RDW-SD (Derived)	<b>60.71</b>	fL	39 - 46
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Total WBC Count (TC) (EDTA Blood/Derived from Impedance)	7160	cells/cu.mm	4000 - 11000
-------------------------------------------------------------	------	-------------	--------------

Neutrophils (Blood/Impedance Variation & Flow Cytometry)	59	%	40 - 75
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Lymphocytes (Blood/Impedance Variation & Flow Cytometry)	34	%	20 - 45
-------------------------------------------------------------	----	---	---------

  
Dr Shouree K.R  
MBBS MD DNB  
Consultant Pathologist  
Reg No : KMC 103138

APPROVED BY

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Eosinophils (Blood/Impedance Variation & Flow Cytometry)	02	%	01 - 06
Monocytes (Blood/Impedance Variation & Flow Cytometry)	05	%	01 - 10
Basophils (Blood/Impedance Variation & Flow Cytometry)	00	%	00 - 02
Absolute Neutrophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	4.22	10 <sup>3</sup> / $\mu$ l	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	2.43	10 <sup>3</sup> / $\mu$ l	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	0.14	10 <sup>3</sup> / $\mu$ l	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.36	10 <sup>3</sup> / $\mu$ l	< 1.0
Absolute Basophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.00	10 <sup>3</sup> / $\mu$ l	< 0.2
Platelet Count (EDTA Blood/Derived from Impedance)	347	10 <sup>3</sup> / $\mu$ l	150 - 450
MPV (Blood/Derived)	10.4	fL	7.9 - 13.7
PCT	<b>0.36</b>	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citratd Blood/Automated ESR analyser)	<b>16</b>	mm/hr	< 15

  
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## **BIOCHEMISTRY**

### **Liver Function Test**

Bilirubin(Total) (Serum/Diazotized Sulfanilic Acid)	0.7	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.2	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.50	mg/dL	0.1 - 1.0
Total Protein (Serum/Biuret)	6.5	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.6	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	1.90	gm/dL	2.3 - 3.6
A : G Ratio (Serum/Derived)	<b>2.42</b>		1.1 - 2.2

**INTERPRETATION:** Remark : Electrophoresis is the preferred method

SGOT/AST (Aspartate Aminotransferase) (Serum/IFCC / Kinetic)	34	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/IFCC / Kinetic)	<b>48</b>	U/L	5 - 41
Alkaline Phosphatase (SAP) (Serum/PNPP / Kinetic)	73	U/L	53 - 128
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	29	U/L	< 55

  
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<b><u>Lipid Profile</u></b>			
Cholesterol Total (Serum/Oxidase / Peroxidase method)	163	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/Glycerol phosphate oxidase / peroxidase)	242	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

**INTERPRETATION:** The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the 'usual' circulating level of triglycerides during most part of the day.

**Remark:** kindly correlate clinically

HDL Cholesterol (Serum/Immunoinhibition)	30	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 40 - 59 High Risk: < 40
LDL Cholesterol (Serum/Calculated)	84.6	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	48.4	mg/dL	< 30

  
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Non HDL Cholesterol (Serum/Calculated)	133.0	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >=220

**INTERPRETATION:** 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.  
2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	5.4		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
---------------------------------------------------------------	-----	--	--------------------------------------------------------------------------------------------------------------------

Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	8.1		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
----------------------------------------------------------------------	-----	--	------------------------------------------------------------------------

LDL/HDL Cholesterol Ratio (Serum/Calculated)	2.8		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
-------------------------------------------------	-----	--	-----------------------------------------------------------------

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<b><u>Glycosylated Haemoglobin (HbA1c)</u></b>			
HbA1C (Whole Blood/HPLC)	5.8	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: $\geq$ 6.5

**INTERPRETATION:** If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control  $\geq$  8.1 %

**Remark:** Kindly correlate clinically.

Estimated Average Glucose (Whole Blood)	119.76	mg/dL
--------------------------------------------	--------	-------

**INTERPRETATION: Comments**

HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.

Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

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## IMMUNOASSAY

### THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	1.18	ng/ml	0.7 - 2.04
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#### **INTERPRETATION:**

##### **Comment :**

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Thyroxine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	10.26	Microg/dl	4.2 - 12.0
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#### **INTERPRETATION:**

##### **Comment :**

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

TSH (Thyroid Stimulating Hormone) (Serum/Chemiluminescent Immunometric Assay (CLIA))	3.742	µIU/mL	0.35 - 5.50
-----------------------------------------------------------------------------------------	-------	--------	-------------

#### **INTERPRETATION:**

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5

2 nd trimester 0.2-3.0

3 rd trimester : 0.3-3.0


(Indian Thyroid Society Guidelines)

##### **Comment :**

1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.

2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.

3.Values&amplt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

  
Dr Shouree K.R  
MBBS MD DNB  
Consultant Pathologist  
Reg No : KMC 103138

APPROVED BY

Name : Mr. CHANDRASHEKARAI AH

PID No. : MED111293151

Register On : 10/09/2022 10:07 AM

SID No. : 712227734

Collection On : 10/09/2022 11:10 AM

Age / Sex : 39 Year(s) / Male

Report On : 10/09/2022 6:21 PM

Type : OP

Printed On : 12/09/2022 4:27 PM

Ref. Dr : MediWheel



<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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## CLINICAL PATHOLOGY

### PHYSICAL EXAMINATION

Colour (Urine/Physical examination)	Pale yellow		Yellow to Amber
Volume (Urine/Physical examination)	30		ml
Appearance (Urine)	Clear		

### CHEMICAL EXAMINATION

pH (Urine)	7.0		4.5 - 8.0
Specific Gravity (Urine/Dip Stick - Reagent strip method)	1.020		1.002 - 1.035
Protein (Urine/Dip Stick - Reagent strip method)	Negative		Negative
Glucose (Urine)	Nil		Nil
Ketone (Urine/Dip Stick - Reagent strip method)	Nil		Nil
Leukocytes (Urine)	Negative	leuco/uL	Negative
Nitrite (Urine/Dip Stick - Reagent strip method)	Nil		Nil
Bilirubin (Urine)	Negative	mg/dL	Negative

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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Blood (Urine)	Nil		Nil
Urobilinogen (Urine/Dip Stick - Reagent strip method)	Normal		Within normal limits
<b><u>Urine Microscopy Pictures</u></b>			
RBCs (Urine/Microscopy)	Nil	/hpf	NIL
Pus Cells (Urine/Microscopy)	2-3	/hpf	< 5
Epithelial Cells (Urine/Microscopy)	3-4	/hpf	No ranges
Others (Urine)	Nil		Nil

  
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Investigation

Observed  
Value

Unit

Biological  
Reference Interval

**IMMUNOHAEMATOLOGY**

BLOOD GROUPING AND Rh TYPING  
(EDTA Blood/Agglutination)

'O' Positive'

**Remark:** Test to be confirmed by gel method.

A handwritten signature in black ink, appearing to read "Shouree", is written over a circular pink and blue background.

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## BIOCHEMISTRY

BUN / Creatinine Ratio

9.6

Glucose Fasting (FBS)

94

mg/dL

(Plasma - F/GOD- POD)

Normal: < 100  
Pre Diabetic: 100 - 125  
Diabetic: >= 126

**INTERPRETATION:** Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Urine sugar, Fasting

Nil

Nil

(Urine - F)

Glucose Postprandial (PPBS)

111

mg/dL

70 - 140

(Plasma - PP/GOD - POD)

### **INTERPRETATION:**

Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti- diabetic medication during treatment for Diabetes.

Urine Sugar (PP-2 hours)

Negative

Negative

(Urine - PP)

Blood Urea Nitrogen (BUN)

7.7

mg/dL

7.0 - 21

(Serum/Urease UV / derived)

Creatinine

0.8

mg/dL

0.9 - 1.3

(Serum/Jaffe Kinetic)

**INTERPRETATION:** Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin ,cefazolin, ACE inhibitors ,angiotensin II receptor antagonists,N-acetylcyteine , chemotherapeutic agent such as flucytosine etc.

Uric Acid

6.6

mg/dL

3.5 - 7.2

(Serum/Uricase/Peroxidase)

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-- End of Report --

Name	CHANDRASHEKARAI AH	ID	MED111293151
Age & Gender	39Y/M	Visit Date	Sep 10 2022 10:07AM
Ref Doctor	MediWheel		

**X – RAY CHEST PA VIEW**

**LUNGS:**

Both lung fields are clear.

Vascular markings are normal.

Tracheal air lucency is normal.

No evidence of abnormal hilar opacities.

Costophrenic angle recesses are normal.

**CARDIA:**

Cardia is normal shape and configuration.

Diaphragm, Thoracic cage, soft tissues are normal.

**IMPRESSION:**

- **NO SIGNIFICANT DIAGNOSTIC ABNORMALITY.**



**DR. MOHAN. B**  
**(DMRD, DNB, EDIR, FELLOW IN CARDIAC**  
**MRI)**  
**CONSULTANT RADIOLOGIST**