

# **RADIOLOGY REPORT**

Jyoti NIGAM	Modality	DX
MH010899450	Accession No	R5383959
F / 43Y 9M 24D	Scan Date	07-04-2023 10:37:31
Dr. HEALTH CHECK MGD	Report Date	07-04-2023 11:24:58
	MH010899450 F / 43Y 9M 24D	MH010899450 Accession No F / 43Y 9M 24D Scan Date

#### XR- CHEST PA VIEW

#### FINDINGS:

LUNGS: Normal. TRACHEA: Normal. CARINA: Normal.

RIGHT AND LEFT MAIN BRONCHI: Normal.

PLEURA: Normal. HEART: Normal.

RIGHT HEART BORDER: Normal. LEFT HEART BORDER: Normal. PULMONARY BAY: Normal. PULMONARY HILA: Normal.

AORTA: Normal.

THORACIC SPINE: Normal.

OTHER VISUALIZED BONES: Normal. VISUALIZED SOFT TISSUES: Normal.

DIAPHRAGM: Normal.

VISUALIZED ABDOMEN: Surgical clips are seen in right hypochondrium.

VISUALIZED NECK: Normal.

### **IMPRESSION:**

-No significant abnormality noted.

Recommend clinical correlation.

Dr. Prabhat Prakash Gupta,

MBBS, DNB, MNAMS, FRCR(I)

Consultant Radiologist, Reg no DMC/R/14242



## RADIOLOGY REPORT

Name	Jyoti NIGAM	Modality	US
Patient ID	MH010899450	Accession No	R5383960
Gender/Age	F / 43Y 9M 24D	Scan Date	07-04-2023 10:57:31
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	07-04-2023 11:23:18

#### **USG ABDOMEN & PELVIS**

#### **FINDINGS**

LIVER: appears normal in size (measures 129 mm) and shape but shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 93 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 11.7 mm.

COMMON BILE DUCT: Appears normal in size and measures 4.6 mm.

IVC, HEPATIC VEINS: Normal. BILIARY SYSTEM: Normal.

GALL BLADDER: not seen (surgically removed - post cholecystectomy status). PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained.

Rest normal.

Right Kidney: measures 93 x 36 mm. Left Kidney: measures 105 x 34 mm. PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged. FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

UTERUS: Uterus is anteverted, bulky in size (measures 97 x 38 x 35 mm) but normal in shape and shows coarse

myometrial echotexture.

Endometrial thickness measures 5.2 mm. Cervix appears bulky.

OVARIES: Both ovaries are normal in size, shape and echotexture. Rest normal.

Right ovary measures  $25 \times 22 \times 12$  mm with volume 3.4 cc. Left ovary measures  $24 \times 19 \times 13$  mm with volume 3.1 cc.

Bilateral adnexa is clear.

BOWEL: Visualized bowel loops appear normal.

#### **IMPRESSION**

- -Diffuse grade I fatty infiltration in liver.
- -Bulky uterus with coarse myometrial echotexture.
- -Bulky cervix (ADV: Pap smear for further evaluation).

Recommend clinical correlation.

MANIPAL HOSPITALS

This 2 do dument is a digitally is igned and manke, மூறவு பூரி signature is required Teleradiology services provided by Manipal Hospitals Radiology Group

Page 1 of 2



# **RADIOLOGY REPORT**

Name	Jyoti NIGAM	Modality	US
Patient ID	MH010899450	Accession No	R5383960
Gender/Age	F / 43Y 9M 24D	Scan Date	07-04-2023 10:57:31
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	07-04-2023 11:23:18

Dr. Prabhat Prakash Gupta, MBBS, DNB, MNAMS, FRCR(I) Consultant Radiologist, Reg no DMC/R/14242



Name

MRS JYOTI NIGAM

Age

43 Yr(s) Sex :Female

Registration No

: MH010899450

Lab No

32230402483

Patient Episode

H18000000424

**Collection Date:** 

07 Apr 2023 14:54

Referred By

HEALTH CHECK MGD

Reporting Date :

08 Apr 2023 07:11

Receiving Date

: 07 Apr 2023 15:01

#### BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Specimen Type : Serum

#### THYROID PROFILE, Serum

T3 - Triiodothyronine (ECLIA)	1.00	ng/ml	[0.70-2.04]
T4 - Thyroxine (ECLIA)	7.98	micg/dl	[4.60-12.00]
Thyroid Stimulating Hormone (ECLIA)	0.868	µIU/mL	[0.340-4.250]

1st Trimester:0.6 - 3.4 micIU/mL 2nd Trimester:0.37 - 3.6 micIU/mL 3rd Trimester:0.38 - 4.04 micIU/mL

Note: TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m.and at a minimum between 6-10 pm.Factors such as change of seasons hormonal fluctuations, Ca or Fe supplements, high fibre diet, stress and illness affect TSH results.

- \* References ranges recommended by the American Thyroid Association
- 1) Thyroid. 2011 Oct; 21(10):1081-125.PMID .21787128
- 2) http://www.thyroid-info.com/articles/tsh-fluctuating.html

Page1 of 9

-----END OF REPORT----

Dr. Neelam Singal

CONSULTANT BIOCHEMISTRY



Name

MRS JYOTI NIGAM

Age

43 Yr(s) Sex :Female

Registration No

: MH010899450

Lab No

202304000718

**Patient Episode** 

H18000000424

**Collection Date:** 

07 Apr 2023 10:20

Referred By

HEALTH CHECK MGD

Reporting Date :

07 Apr 2023 12:31

**Receiving Date** 

: 07 Apr 2023 10:20

### HAEMATOLOGY

	F 7	0	**

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

### COMPLETE BLOOD COUNT (AUTOMATED)

### SPECIMEN-EDTA Whole Blood

	COMPHETE BEOOD COURT (ACTOMATED)		DI DOLLARIA DE LA MACEO DE	
)	RBC COUNT (IMPEDENCE)	4.20	millions/cu mm	[3.80-4.80]
	HEMOGLOBIN	11.9 #	g/dl	[12.0-16.0]
	Method:cyanide free SLS-colorime	etry		
	HEMATOCRIT (CALCULATED)	37.5	90	[36.0-46.0]
	MCV (DERIVED)	89.3	fL	[83.0-101.0]
	MCH (CALCULATED)	28.3	pg	[27.0-32.0]
	MCHC (CALCULATED)	31.7	g/dl	[31.5-34.5]
	RDW CV% (DERIVED)	14.3 #	8	[11.6-14.0]
	Platelet count	245	x 10 <sup>3</sup> cells/cumm	[150-400]
	MPV(DERIVED)	10.1	The state of the s	
	WBC COUNT(TC)(IMPEDENCE)	5.32	x 10³ cells/cumm	[4.00-10.00]
	DIFFERENTIAL COUNT			
	(VCS TECHNOLOGY/MICROSCOPY)			
	Neutrophils	51.0	96	[40.0-80.0]
	Lymphocytes	40.0	8	[17.0-45.0]
	Monocytes	6.0	9	[2.0-10.0]
	Eosinophils	3.0	%	[2.0-7.0]
	Basophils	0.0	8	[0.0-2.0]
	ESR	26.0 #	/1sthour	[0.0-

Page 2 of 9



Name

: MRS JYOTI NIGAM

Age

43 Yr(s) Sex :Female

Registration No

: MH010899450

Lab No

202304000718

**Patient Episode** 

H18000000424

**Collection Date:** 

07 Apr 2023 11:02

Referred By

.....

Reporting Date :

07 Apr 2023 14:50

**Receiving Date** 

: HEALTH CHECK MGD: 07 Apr 2023 11:02

CLINICAL PATHOLOGY

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour

PALE YELLOW

(Pale Yellow - Yellow)

Appearance

CLEAR

5.0

(4.6-8.0)

Reaction[pH] Specific Gravity

1.010

(1.003 - 1.035)

CHEMICAL EXAMINATION

Protein/Albumin

Negative

(NEGATIVE)

Glucose

NIL

(NIL)

Ketone Bodies

Negative

(NEGATIVE)

Urobilinogen

Normal

(NORMAL)

MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells

0-1 /hpf

(0-5/hpf)

RBC

NIL

(0-2/hpf)

Epithelial Cells CASTS

1-2

/hpf

Crystals OTHERS NIL NIL

Page 3 of 9



Name

MRS JYOTI NIGAM

Age

43 Yr(s) Sex :Female

Registration No

: MH010899450

Lab No

202304000718

**Patient Episode** 

: H18000000424

**Collection Date:** 

07 Apr 2023 10:20

Referred By

HEALTH CHECK MGD

Reporting Date :

07 Apr 2023 16:00

**Receiving Date** 

: 07 Apr 2023 10:20

**BIOCHEMISTRY** 

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Glycosylated Hemoglobin

Specimen: EDTA

HbAlc (Glycosylated Hemoglobin)

6.6 #

[0.0-5.6]

Method: HPLC

As per American Diabetes Association (ADA

HbAlc in %

Non diabetic adults >= 18years <5.7

Prediabetes (At Risk )5.7-6.4 Diagnosing Diabetes >= 6.5

Estimated Average Glucose (eAG)

143

mg/dl

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.

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	214 #	mg/dl	[<200]
			Moderate risk:200-239
	*		High risk:>240
TRIGLYCERIDES (GPO/POD)	85	mg/dl	[<150]
			Borderline high:151-199
			High: 200 - 499
			Very high: >500
HDL- CHOLESTEROL	45.0	mg/dl	[35.0-65.0]
Method: Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	17	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	152.0 #	mg/dl	[<120.0]
			Near/

Above optimal-100-129

Borderline High:130-159 High Risk:160-189

Page 4 of 9



Name

: MRS JYOTI NIGAM

Age

: 43 Yr(s) Sex :Female

Registration No

MH010899450

Lab No

202304000718

**Patient Episode** 

: H18000000424

Collection Date:

07 Apr 2023 10:20

Referred By

: HEALTH CHECK MGD

**Reporting Date:** 07 Apr 2023 12:19

**Receiving Date** 

: 07 Apr 2023 10:20

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
T.Chol/HDL.Chol ratio(Cal	culated)	4.8	<4.0 Optimal
			4.0-5.0 Borderline
			>6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Ca	lculated)	3.4	<3 Optimal
,			3-4 Borderline
			>6 High Risk

#### Note:

Reference ranges based on ATP III Classifications.

#### KIDNEY PROFILE

Specimen: Serum			
UREA	23.5	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay			
BUN, BLOOD UREA NITROGEN	11.0	mg/dl	[8.0-20.0]
Method: Calculated		<u>.</u>	
CREATININE, SERUM	0.68 #	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardiz		_	
URIC ACID	5.4	mg/dl	[4.0-8.5]
Method:uricase PAP		3.	
)			
SODIUM, SERUM	137.50	mmol/L	[136.00-144.00]
Bob Lorry Blacor		,	
POTASSIUM, SERUM	4.26	mmol/L	[3.60-5.10]
SERUM CHLORIDE	105.9	mmol/1	[101.0-111.0]
Method: ISE Indirect			
eGFR (calculated)	107.5	ml/min/1.73sq.m	[>60.0]
Technical Note		and the second s	
eGFR which is primarily based on S	erum Creatipine	is a derivation of	CKD-EPI 2009
corrre primarily based on a			1 1 1 10

Page 5 of 9

equation normalized to1.73 sq.m BSA and is not applicable to individuals below 18 years.



Name

: MRS JYOTI NIGAM

Age

43 Yr(s) Sex :Female

Registration No

MH010899450

Lab No

202304000718

**Patient Episode** 

H18000000424

Collection Date :

07 Apr 2023 10:20

Referred By

HEALTH CHECK MGD

Reporting Date :

07 Apr 2023 12:19

**Receiving Date** 

: 07 Apr 2023 10:20

### **BIOCHEMISTRY**

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.

#### LIVER FUNCTION TEST

BILIRUBIN - TOTAL Method: D P D	0.43	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.05	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN(SERUM) Method: Calculation	0.38	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) Method: BIURET	6.90	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	3.67	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	3.20	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.14		[1.00-2.50]
AST(SGOT) (SERUM) Method: IFCC W/O P5P	19.00	U/L	[0.00-40.00]
ALT(SGPT) (SERUM) Method: IFCC W/O P5P	17.00	U/L	[14.00-54.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	68.0	IU/L	[40.0-98.0]

Page 6 of 9



Name

MRS JYOTI NIGAM

Age

43 Yr(s) Sex :Female

Registration No

MH010899450

Lab No

202304000718

**Patient Episode** 

H18000000424

**Collection Date:** 

07 Apr 2023 10:20

Referred By

Reporting Date:

07 Apr 2023 12:19

**Receiving Date** 

HEALTH CHECK MGD 07 Apr 2023 10:20

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

GGT

16.0

[7.0-50.0]

Blood Group & Rh Typing (Agglutination by gel/tube technique) Specimen-Blood

Blood Group & Rh typing

B Rh(D) Positive

Technical note:

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

Page 7 of 9

-----END OF REPORT----

Dr. Charu Agarwal **Consultant Pathologist** 



Name

: MRS JYOTI NIGAM

Age

43 Yr(s) Sex :Female

Registration No

: MH010899450

Lab No

202304000719

Patient Episode

Collection Date :

07 Apr 2023 10:20

Referred By

: H18000000424

conceilon Date

Receiving Date

: HEALTH CHECK MGD : 07 Apr 2023 10:20 Reporting Date:

07 Apr 2023 12:20

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

GLUCOSE-Fasting

Specimen: Plasma

GLUCOSE, FASTING (F)

Method: Hexokinase

99.0

mg/dl

[70.0-110.0]

Page 8 of 9

-- END OF REPORT-

Dr. Charu Agarwal Consultant Pathologist



Name

: MRS JYOTI NIGAM

Age

43 Yr(s) Sex :Female

Registration No

: MH010899450

Lab No

202304000720

Patient Episode

: H18000000424

**Collection Date:** 

07 Apr 2023 13:31

Referred By

: HEALTH CHECK MGD

Reporting Date:

07 Apr 2023 14:46

**Receiving Date** 

: 07 Apr 2023 13:31

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

PLASMA GLUCOSE

Specimen:Plasma

GLUCOSE, POST PRANDIAL (PP), 2 HOURS

147.0 #

mg/dl

[80.0-140.0]

Method: Hexokinase

Note:

Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying,

brisk glucose absorption , post exercise

Page 9 of 9

-----END OF REPORT-----

Dr. Alka Dixit Vats Consultant Pathologist





### INVESTIGATION REPORT

Patient Name: Mrs. Jyoti NIGAM

Location

Ghaziabad

Age/Sex

43Year(s)/Female

Visit No

: V00000000001-GHZB

MRN No

Order Date

:08/04/2023

Ref. Doctor

HCP

Report Date

: 08/04/2023

## Echocardiography

## **Final Interpretation**

- 1. No RWMA, LVEF=60%.
- 2. Grade I LV diastolic dysfunction.
- 3. Trace MR, No AR.
- 4. No TR, No PAH.
- 5. No intracardiac clot/mass/PE.

### Chambers & valves:

- Left Ventricle: It is normal sized.
- Left Atrium: It is normal sized.
- Right Atrium: It is normal sized.
- Right Ventricle: It is normal sized.
- Aortic Valve: It appears normal.
- Mitral Valve: Opens normally. Subvalvular apparatus appear normal.
- **Tricuspid Valve:** It appears normal.
- Pulmonic Valve: It appears normal.
- Main Pulmonary artery & its branches: Appear normal.
- Pericardium: Trace pericardial effusion.

## Description:

LV is normal size with normal contractility.

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Opp. Bahmeta Village, Ghaziabad, Uttar Pradesh - 201 002 p: 0120-616 5666

Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

Read, Off. The Annexe, #98/2, Rustom Bagh, Off. HAL Airport Road, Bengaluru - 560 017 p +91 80 4936 0300 - info@manihosnitals.com

Page 1 of 2







## INVESTIGATION REPORT

Patient Name: Mrs.

Jyoti NIGAM

Location

Ghaziabad

Age/Sex

Visit No

: V0000000001-GHZB

MRN No

43Year(s)/Female

Order Date

08/04/2023

Ref. Doctor

Report Date

:08/04/2023

## Echocardiography

## Measurements (mm):

	Observed values	Normal values
Aortic root diameter	25	20-36 (22mm/M <sup>2</sup> )
Aortic valve opening	19	15-26
Left atrium size	35	19-40

	<b>End Diastole</b>	End Systole	Normal Values
Left ventricle size	39	27	(ED=37-56:Es=22-40)
Interventricular septum	10	13	(ED=6-12)
Posterior wall thickness	11	14	(ED=5-10)

LV Ejection Fraction (%)	60%	55%-80%
HR		

# Color & Doppler evaluation:

Valve	Velocity(cm/s)	Regurgitation
Mitral	E/A-40/58 DT-	Trace
Aortic	133	Nil
Tricuspid	63	Nil
Pulmonary	103	Nil

Dr. Bhupendra Singh MD, DM (CARDIOLOGY), FACC Sr. Consultant Cardiology

Dr. Abhishek Singh MD, DNB (CARDIOLOGY), MNAMS Sr. Consultant Cardiology

Dr. Sudhanshu Mishra

Cardiology Registrar Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Opp. Bahmeta Village, Ghaziabad, Uttar Pradesh - 201 002 P: 0120-616 5666

Page 2 of 2

Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

Regd. Off. The Annexe, #98/2, Rustom Bagh, Off. HAL Airport Road, Bengaluru - 560 017

P +91 80 4936 0300 E info@manihospitals.com www.manipalhospitals.com