Patient Name: Mr Pankaj Kumar Suman MRN: 20110000014855 Gender/Age: MALE, 44y (01/03/1979)

Collected On: 11/03/2023 08:53 AM Received On: 11/03/2023 11:56 AM Reported On: 11/03/2023 12:29 PM

Barcode: 032303110112 Specimen: Urine Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9611722294

**CLINICAL PATHOLOGY** 

Test Result Unit

Urine For Sugar (Fasting) (Enzyme Method (GOD Not present

POD))

-- End of Report-

Hena S

Dr. Hema S MD, DNB, Pathology Associate Consultant

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Patient Name: Mr Pankaj Kumar Suman MRN: 20110000014855 Gender/Age: MALE, 44y (01/03/1979)

Collected On: 11/03/2023 08:53 AM Received On: 11/03/2023 11:56 AM Reported On: 11/03/2023 12:48 PM

Barcode: 032303110112 Specimen: Urine Consultant: EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9611722294

## **CLINICAL PATHOLOGY**

	CENTICALIAI	HOLOGI	
Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Colour	STRAW	-	-
Appearance	Clear	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (pH Indicator Method)	5.0	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.021	-	1.002 - 1.030
Protein (Automated Protein Error Or Ph Indicator)	Not Present	-	Not Present
Urine Glucose (Enzyme Method (GOD POD))	Not Present	-	Not Present
Ketone Bodies (Nitroprusside Method)	Not Present	-	Not Present
Bile Salts (Azo Coupling Method)	Not Present	-	Not Present
Bile Pigment (Bilirubin) (Azo Coupling Method)	Not Present	-	Not Present
Urobilinogen (Azo Coupling Method)	Normal	-	Normal
Urine Leucocyte Esterase (Measurement Of Leukocyte Esterase Activity)	Not Present	-	Not Present
Blood Urine (Peroxidase Reaction)	Not Present	-	Not Present
Nitrite (Gries Method)	Not Present	-	Not Present
MICROSCOPIC EXAMINATION			
Pus Cells	0.1	/hpf	0-5

Patient Name: Mr Pankaj Kumar Suman	MRN: 20110000014855	Gender/Age : MALE	, 44y (01/03/1979)	
RBC	0.3	/hpf	0-4	
Epithelial Cells	0.2	/hpf	0-6	
Crystals	0.0	/hpf	0-2	
Casts	0.02	/hpf	0-1	
Bacteria	2.5	/hpf	0-200	
Yeast Cells	0.0	/hpf	0-1	
Mucus	Not Present	-	Not Present	

--End of Report-



Dr. Hema S MD, DNB, Pathology Associate Consultant

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



Patient Name: Mr Pankaj Kumar Suman MRN: 20110000014855 Gender/Age: MALE, 44y (01/03/1979)

Collected On: 11/03/2023 08:53 AM Received On: 11/03/2023 11:49 AM Reported On: 11/03/2023 02:41 PM

Barcode: 012303110767 Specimen: Serum Consultant: EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9611722294

## **BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.76	mg/dL	0.66-1.25
eGFR (Calculated)	111.5	mL/min/1.73m <sup>2</sup>	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodyamically unstable patients eGFR is not applicable for less than 18 years of age.
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric – Urease)	11	mg/dL	9.0-20.0
Serum Uric Acid (Colorimetric - Uricase,Peroxidase)	5.0	mg/dL	3.5-8.5
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	211 H	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Colorimetric - Lip/Glycerol Kinase)	106	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	40	mg/dL	40.0-60.0
Non-HDL Cholesterol (Calculated)	171.0 H	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
LDL Cholesterol (Colorimetric)	151	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	21.2	mg/dL	0.0-40.0

Patient Name: Mr Pankaj Kumar Suman MRN: 201	10000014855	Gender/Age : MALE , 44y (	
Cholesterol /HDL Ratio (Calculated)	5.3 H	-	0.0-5.0
Prostate Specific Antigen (PSA) (Enhanced Chemiluminesence)	0.337	ng/mL	0.0-2.5
THYROID PROFILE (T3, T4, TSH)			
Tri lodo Thyronine (T3) (Enhanced Chemiluminesence)	1.11	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminesence)	6.12	μg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminesence)	1.838	μIU/mL	0.4-4.049
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric - Diazo Method)	0.70	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Dual Wavelength - Reflectance Spectrophotometry)	0.10	mg/dL	0.0-0.3
Unconjugated Bilirubin (Indirect) (Calculated)	0.6	mg/dL	0.0-1.1
Total Protein (Colorimetric - Biuret Method)	7.70	gm/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.30	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.41	gm/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.27	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	39	U/L	17.0-59.0
<b>SGPT (ALT)</b> (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	42	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P- nitro Phenyl Phosphate, AMP Buffer)	82	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide ( Szasz Method))	17	U/L	15.0-73.0

## **Interpretation Notes**

Patient Name: Mr Pankaj Kumar Suman MRN: 20110000014855 Gender/Age: MALE, 44y (01/03/1979)

Indirect Bilirubin result is a calculated parameter (Indirect Bilirubin = Total Bilirubin - Direct Bilirubin).

Indirect bilirubin result includes the delta bilirubin fraction also. Delta Bilirubin is the bilirubin which is covalently bound to albumin.

Delta Bilirubin is not expected to be present in healthy adults or neonates.

-- End of Report-

Dr. Anushre Prasad MBBS,MD, Biochemistry

Consultant Biochemistry

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.

(Lipid Profile, -> Auto Authorized)

(, -> Auto Authorized)

(CR, -> Auto Authorized)

(LFT, -> Auto Authorized)

(Uric Acid, -> Auto Authorized)

(Blood Urea Nitrogen (Bun), -> Auto Authorized)

(Prostate Specific Antigen (Psa) -> Auto Authorized)

~

Mrs. Latha B S

MSc, Mphil, Biochemistry

Incharge, Consultant Biochemistry





Patient Name: Mr Pankaj Kumar Suman MRN: 20110000014855 Gender/Age: MALE, 44y (01/03/1979)

Collected On: 11/03/2023 08:53 AM Received On: 11/03/2023 11:49 AM Reported On: 11/03/2023 01:54 PM

Barcode: 022303110444 Specimen: Whole Blood - ESR Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9611722294

#### **HEMATOLOGY**

Test	Result	Unit	<b>Biological Reference Interval</b>
Erythrocyte Sedimentation Rate (ESR)	10	mm/1hr	0.0-10.0

(Westergren Method)

#### **Interpretation Notes**

• ESR high - Infections, chronic disorders,, plasma cell dyscrasias.

DISCLAIMER:All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert

-- End of Report-



Dr. Hema S MD, DNB, Pathology Associate Consultant

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Final Report

#### **DEPARTMENT OF LABORATORY MEDICINE**

Patient Name: Mr Pankaj Kumar Suman MRN: 20110000014855 Gender/Age: MALE, 44y (01/03/1979)

Collected On: 11/03/2023 08:53 AM Received On: 11/03/2023 11:44 AM Reported On: 11/03/2023 12:22 PM

Barcode: 1B2303110021 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9611722294

## NARAYANA HRUDAYALAYA BLOOD CENTRE

Test Result Unit

#### **BLOOD GROUP & RH TYPING**

Blood Group (Column Agglutination Technology)

RH Typing (Column Agglutination Technology) Positive

-- End of Report-

Dr. Prathip Kumar B R

MBBS,MD, Immunohaematology & Blood Transfusion

Consultant

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



Post Prandial Blood Sugar (PPBS) (Colorimetric -

Patient Name: Mr Pankaj Kumar Suman MRN: 20110000014855 Gender/Age: MALE, 44y (01/03/1979)

Collected On: 11/03/2023 01:28 PM Received On: 11/03/2023 03:37 PM Reported On: 11/03/2023 03:54 PM

Barcode: 012303111756 Specimen: Plasma Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9611722294

#### **BIOCHEMISTRY**

Test Result Unit **Biological Reference Interval** mg/dL

Glucose Oxidase Peroxidase)

70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020

-- End of Report-

Dr. Anushre Prasad MBBS, MD, Biochemistry

Consultant Biochemistry

Mrs. Latha B S

MSc, Mphil, Biochemistry

Incharge, Consultant Biochemistry

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.

(Post Prandial Blood Sugar (PPBS) -> Auto Authorized)





Patient Name: Mr Pankaj Kumar Suman MRN: 20110000014855 Gender/Age: MALE, 44y (01/03/1979)

Collected On: 11/03/2023 08:53 AM Received On: 11/03/2023 11:56 AM Reported On: 11/03/2023 12:29 PM

Barcode: 032303110112 Specimen: Urine Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9611722294

**CLINICAL PATHOLOGY** 

Test Result Unit

Urine For Sugar (Fasting) (Enzyme Method (GOD Not present

POD))

-- End of Report-

Hena S

Dr. Hema S MD, DNB, Pathology Associate Consultant

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Patient Name: Mr Pankaj Kumar Suman MRN: 20110000014855 Gender/Age: MALE, 44y (01/03/1979)

Collected On: 11/03/2023 08:53 AM Received On: 11/03/2023 11:56 AM Reported On: 11/03/2023 12:48 PM

Barcode: 032303110112 Specimen: Urine Consultant: EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9611722294

## **CLINICAL PATHOLOGY**

	CENTICALIAI	HOLOGI	
Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Colour	STRAW	-	-
Appearance	Clear	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (pH Indicator Method)	5.0	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.021	-	1.002 - 1.030
Protein (Automated Protein Error Or Ph Indicator)	Not Present	-	Not Present
Urine Glucose (Enzyme Method (GOD POD))	Not Present	-	Not Present
Ketone Bodies (Nitroprusside Method)	Not Present	-	Not Present
Bile Salts (Azo Coupling Method)	Not Present	-	Not Present
Bile Pigment (Bilirubin) (Azo Coupling Method)	Not Present	-	Not Present
Urobilinogen (Azo Coupling Method)	Normal	-	Normal
Urine Leucocyte Esterase (Measurement Of Leukocyte Esterase Activity)	Not Present	-	Not Present
Blood Urine (Peroxidase Reaction)	Not Present	-	Not Present
Nitrite (Gries Method)	Not Present	-	Not Present
MICROSCOPIC EXAMINATION			
Pus Cells	0.1	/hpf	0-5

Patient Name: Mr Pankaj Kumar Suman	MRN: 20110000014855	Gender/Age : MALE	, 44y (01/03/1979)	
RBC	0.3	/hpf	0-4	
Epithelial Cells	0.2	/hpf	0-6	
Crystals	0.0	/hpf	0-2	
Casts	0.02	/hpf	0-1	
Bacteria	2.5	/hpf	0-200	
Yeast Cells	0.0	/hpf	0-1	
Mucus	Not Present	-	Not Present	

--End of Report-



Dr. Hema S MD, DNB, Pathology Associate Consultant

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



Patient Name: Mr Pankaj Kumar Suman MRN: 20110000014855 Gender/Age: MALE, 44y (01/03/1979)

Collected On: 11/03/2023 08:53 AM Received On: 11/03/2023 11:55 AM Reported On: 11/03/2023 12:53 PM

Barcode: 032303110113 Specimen: Stool Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9611722294

## **CLINICAL PATHOLOGY**

Test	Result	Unit	Biological Reference Interval
STOOL ROUTINE EXAMINATION			
PHYSICAL EXAMINATION			
Colour	Yellowish	-	-
Consistency	Semi Solid	-	-
Mucus	Present	-	-
CHEMICAL EXAMINATION			
Stool For Occult Blood (Standard Guaiac Method)	Negative	-	-
Reaction	Alkaline	-	-
MICROSCOPE EXAMINATION			
Ova	Not Seen	-	-
Cyst Of Protozoa	Not Seen	-	-
Pus Cells	5-6/hpf	/hpf	0-5

-- End of Report-

Jena S

Dr. Hema S MD, DNB, Pathology Associate Consultant Patient Name: Mr Pankaj Kumar Suman MRN: 20110000014855 Gender/Age: MALE, 44y (01/03/1979)

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Patient Name: Mr Pankaj Kumar Suman MRN: 20110000014855 Gender/Age: MALE, 44y (01/03/1979)

Collected On: 11/03/2023 08:53 AM Received On: 11/03/2023 11:49 AM Reported On: 11/03/2023 12:17 PM

Barcode: 022303110445 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9611722294

## **HEMATOLOGY**

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	14.0	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	4.90	million/μl	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	42.3	%	40.0-50.0
MCV (Mean Corpuscular Volume) (Derived)	86.3	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	28.7	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.2	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	15.1 H	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	165	10 <sup>3</sup> /μL	150.0-450.0
Note: Platelets count verified manually, Large/	'Giant platelets	seen.	
Total Leucocyte Count(WBC) (Electrical Impedance)	7.0	10 <sup>3</sup> /μL	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCS Technology Plus Microscopy)	63.7	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	22.2	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	8.3	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	5.4	%	1.0-6.0

Patient Name: Mr Pankaj Kumar Suman MF	RN: 20110000014855	Gender/Age : MALE	, 44y (01/03/1979)	
Basophils (VCS Technology Plus Microscopy)	0.4	%	0.0-2.0	
Absolute Neutrophil Count (Calculated)	4.46	x10 <sup>3</sup> cells/μl	2.0-7.0	
Absolute Lympocyte Count (Calculated)	1.55	x10 <sup>3</sup> cells/μl	1.0-3.0	
Absolute Monocyte Count (Calculated)	0.58	x10 <sup>3</sup> cells/μl	0.2-1.0	
Absolute Eosinophil Count (Calculated)	0.38	x10 <sup>3</sup> cells/μl	0.02-0.5	
Absolute Basophil Count (Calculated)	0.03	-	-	

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

#### **Interpretation Notes**

Haemoglobin , RBC Count and PCV: If below reference range, indicates Anemia. Further evaluation is suggested .
 RBC Indices aid in typing of anemia.

WBC Count: If below reference range, susceptibility to infection.

If above reference range- Infection\*

If very high in lakhs-Leukemia

Neutrophils -If above reference range-acute infection, mostly bacterial

Lymphocytes -If above reference range-chronic infection/ viral infection

Monocytes -If above reference range- TB, Typhoid, UTI

Eosinophils -If above reference range -Allergy, cough, Common cold, Asthma & worms

Basophils - If above reference range, Leukemia, allergy

Platelets: If below reference range- bleeding disorder, Dengue, drug- induced, malignancies

\* In bacterial infection with fever total WBC count increases.

Eg Tonsillitis, Sinusitis, Bronchitis, Pneumonia, Appendicitis, UTI - 12000-25000 cells/cumm.

In typhoid and viral fever WBC may be normal.

DISCLAIMER: All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert.

-- End of Report-

Dr. Sudarshan Chougule MBBS, MD, Pathology

Consultant & Head - Hematology & Flow Cytometry

Patient Name: Mr Pankaj Kumar Suman MRN: 20110000014855 Gender/Age: MALE, 44y (01/03/1979)

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Final Report

#### **DEPARTMENT OF LABORATORY MEDICINE**

Patient Name: Mr Pankaj Kumar Suman MRN: 20110000014855 Gender/Age: MALE, 44y (01/03/1979)

Collected On: 11/03/2023 01:28 PM Received On: 11/03/2023 03:45 PM Reported On: 11/03/2023 04:17 PM

Barcode: 032303110336 Specimen: Urine Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9611722294

**CLINICAL PATHOLOGY** 

Test Result Unit

Urine For Sugar (Post Prandial) (Enzyme

Method (GOD POD))

--End of Report-

Not Present

Dr. Sudarshan Chougule

MBBS, MD, Pathology

Consultant & Head - Hematology & Flow Cytometry

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.







# 105, 7th main, Jayanagar 4th block, Near Maiyas Restaurant, Bengaluru- 560 011. WWW.MILESTONESINSTITUTIONS.ORG | Ph: 080 2664 4448

## **Evaluation**

11/03/23

Name

: Pankaj Kuman Suman.

Age

: 4hyu.

Gender

MRD No : 2011-14855

Chief Complaint: came for Regular eye chuke cup do sometimen strain with glasser.

Ocular History

Hlo usreg glasser X720 year, last Chargeel lys back

General History

No Hlo Systemic illness.

VISION

Distance:

OD 6/6

os 6/6

Pinhole:

Near:

## Objective Refraction:

EYE	Sph	Cyl	Axis
OD	-1.00DS	-1.50DC	70
OS	-1.75DS	-1.50PC	70

## Subjective Refraction:

EYE	Sph	Cyl	Axis	
OD	-0.75DS	-1.2500	70	4
OS	-1.5005	-1.50DC	70	64

Slit lamp Examination:

E Adel NVn < |N6 +1.25D

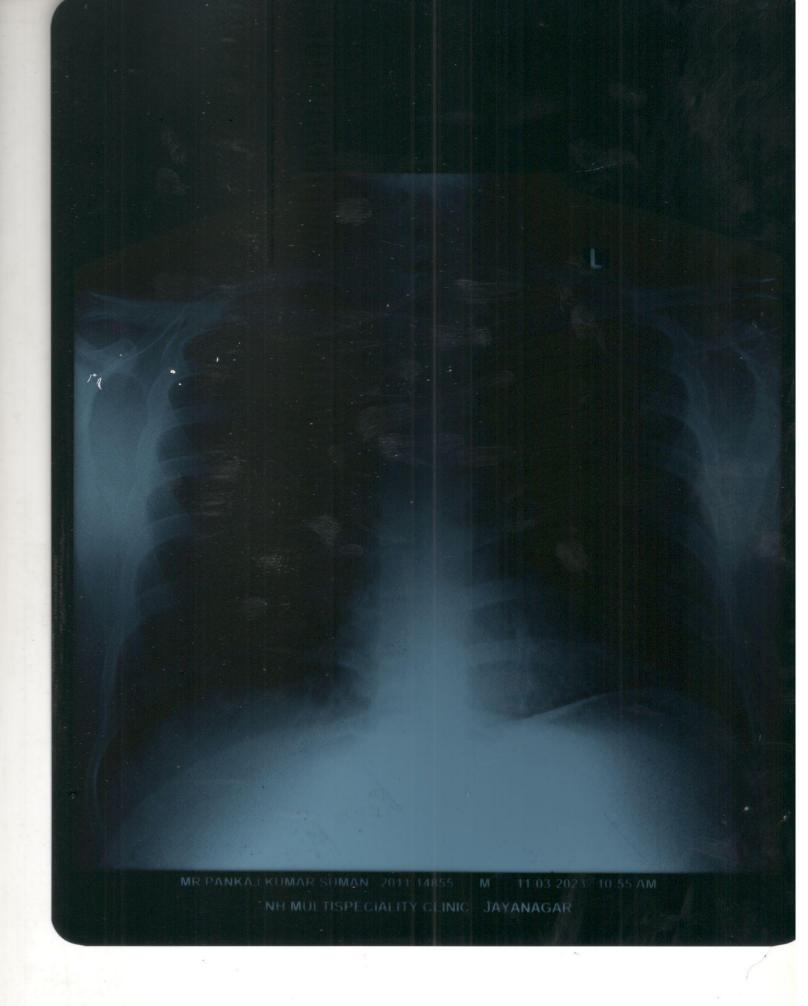
Ou: mild lens changes

Diagnosis and Advise: pres byopia (00)

Advised glasser

Arilestones Center

Development
Jevelopment
Jevelopmen





# ADULT TRANS-THORACIC ECHO REPORT

AGE/SEX: 44YRS/MALE NAME : MR.PANKAJ KUMAR

DATE : 09.03.2023 MRN NO: 20110000014855

## FINAL DIAGNOSIS:

NORMAL CHAMBER DIMENSION

**NO RWMA** 

NORMAL VALVES

MR-MILD

**NORMAL PA PRESSURE** 

NORMAL RV /LV FUNCTION

LVEF- 60 %

## **MEASUREMENTS**

AO: 29 MM

LVID (d): 45 MM

IVS (d): 12 MM

**RA:35 MM** 

LA: 36 MM

LVID(s): 29 MM

PW (d): 10 MM

**RV:28 MM** 

EF: 60 %

#### **VALVES**

MITRAL VALVE : NORMAL

AORTIC VALVE

: NORMAL

TRICUSPID VALVE

: NORMAL

PULMONARY VALVE: NORMAL

#### **CHAMBERS**

LEFT ATRIUM

: NORMAL

RIGHT ATRIUM

: NORMAL

LEFT VENTRICLE : NORMAL, NORMAL LV FUNCTION

RIGHT VENTRICLE

: NORMAL, TAPSE-19 MM, NORMAL RV FUNCTION

RVOT/LVOT

: NORMAL





**SEPTAE** 

IVS : INTACT

IAS : INTACT

**GREAT ARTERIES** 

AORTA : NORMAL SIZE, AORTIC ANNULUS-21 MM, LEFT ARCH

PULMONARY ARTERY : NORMAL

DOPPLER DATA

MITRAL VALVE : E/A - 0.6/0.7M/S, MILD LVDD, MR-TRIVIAL

AORTIC VALVE : PG-5 MMHG

TRICUSPID VALVE : TR-TRIVIAL, PASP- 23 MMHG

PULMONARY VALVE : PG- 3 MMHG

WALL MOTION ABNORMALITIES: NO RWMA

PERICARDIUM : NORMAL

VEGETATION/THROMBUS: ABSENT

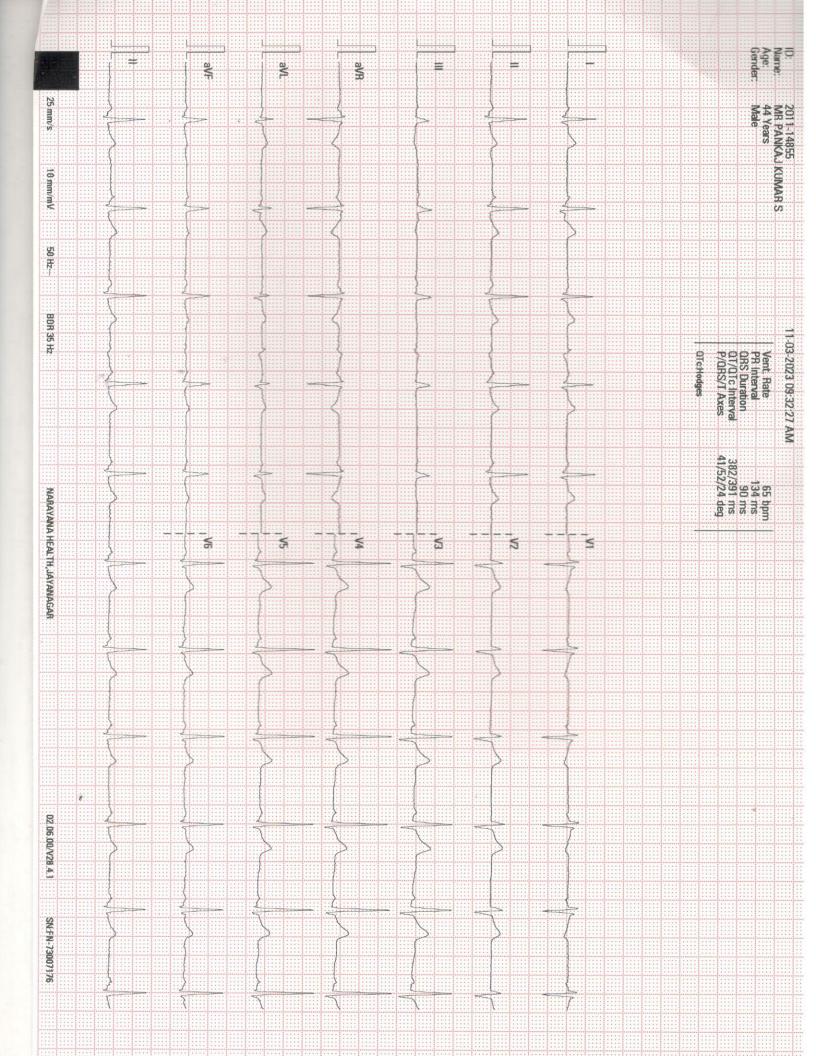
**OTHER FINDINGS** 

IVC- 14 MM NORMAL SIZED, COLLAPSIBILITY >50%, RAP -3 MM SINUS RHYTHM/ HR- 70 BPM

DR.SURESH P V
CONSULTANT CARDIOLOGIST

VISHALAKSHI H R CARDIAC SONOGRAPHER







Patient Name : Mr. Pankaj Kumar Suman Patient ID : 20110000014855

Age : 44years Sex : male

Referring Doctor : EHP Date : 11.03.2023

#### **ULTRASOUND ABDOMEN AND PELVIS**

## **FINDINGS:**

**Liver** is normal in size and shows **diffuse increase** echopattern. No intra or extra hepatic biliary duct dilatation. No focal lesions.

Portal vein is normal in size, course and caliber. CBD is not dilated.

Gall bladder is normal without evidence of calculi, wall thickening or pericholecystic fluid.

Pancreas to the extent visualized, appears normal in size, contour and echogenicity.

Spleen is normal in size, shape, contour and echogenicity. No evidence of mass or focal lesions.

**Right Kidney** is normal in size (measures 9.5cm in length & 1.2cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of calculi or hydronephrosis.

**Left Kidney** is normal in size (measures 11.6cm in length & 1.9cm in parenchymal thickness), position, shape and echopattern. Corticomedullary differentiation is maintained. No evidence of hydronephrosis. **Shows a Calculus in the lower pole measuring 3mm** 

Retroperitoneum – Obscured by bowel gas.

**Urinary Bladder** is well distended. Wall thickness is normal. No evidence of calculi, mass or mural lesion.

Pre void-71cc post void -8.1cc

Prostate is normal in echopattern and mildly enlarged in size, measures 3.3x3.6x4.0cm, Volume - 25cc.

Fluid - There is no ascites or pleural effusion.

#### IMPRESSION:

- Grade I Fatty Liver.
- Left Renal Calculus.
- Grade I Prostatomegaly.

Dr B S Ramkumar 35772 Consultant Radiologist

Disclaimer:

Note: Investigations have their limitations. Solitary pathological/Radiological and other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly. This Report is not for Medico - Legal Purposes.

