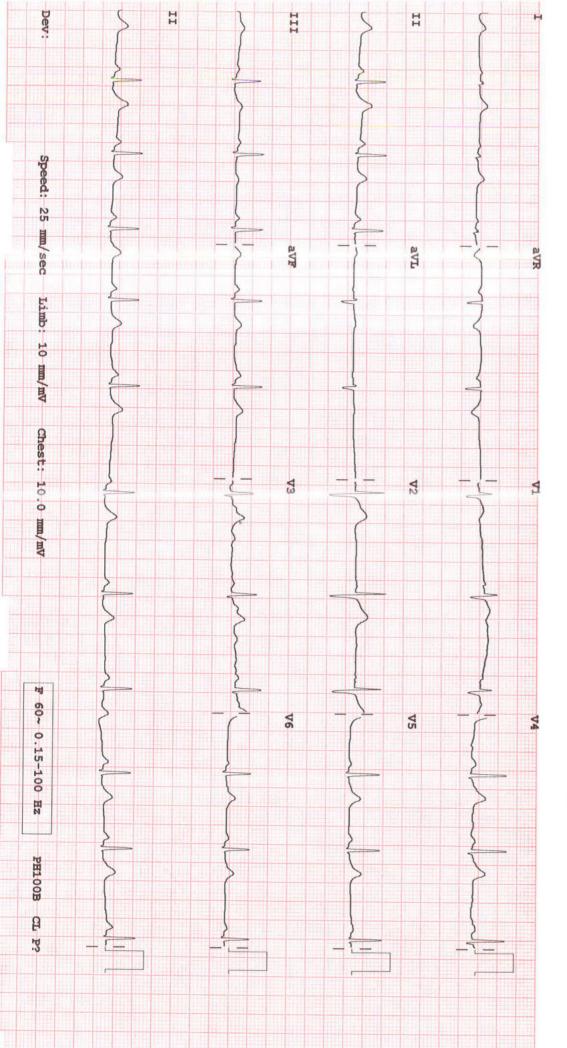
- OTHERWISE NORMAL ECG -

Unconfirmed Diagnosis





RADIOLOGY REPORT

Name	Srishti BHASKAR	Modality	US
Patient ID	MH010901859	Accession No	R5388488
Gender/Age	F / 35Y 11D	Scan Date	08-04-2023 10:44:23
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	08-04-2023 19:02:48

USG ABDOMEN & PELVIS

FINDINGS

Patient is a follow up case of unruptured ectopic pregnancy (measuring 21 x 21 x 15mm), diagnosed via USG TVS(Max hospital) dated 27.03.2023. Patient underwent single methotrexate injection, with falling trend in BHCG levels.

LIVER: Liver is normal in size (measures 120 mm), shape and echotexture. Rest normal. SPLEEN: Spleen is normal in size (measures 93 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 10.5 mm. COMMON BILE DUCT: Appears normal in size and measures 4 mm.

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

GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

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 94 x 37 mm. Left Kidney: measures 90 x 43 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, normal in size (measures 70 x 52 x 32 mm), shape and echotexture.

Endometrial thickness measures 4.7 mm. Cervix appears normal.

OVARIES: Right ovary is normal in size (35 \times 33 \times 19 mm with volume 11.4 cc), shape and echotexture. Rest normal.

Left ovary is obscured due to bowel gases.

There is a nodular echogenic lesion measuring 20 x 12mm in right adnexa, without any significant vascularity.

Trace free fluid is seen in cul-de-sac.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

Patient is a follow up case of unruptured ectopic pregnancy (measuring 21 x 21 x 15mm), diagnosed via USG TVS(Max hospital) dated 27.03.2023. Patient underwent single methotrexate injection, with falling trend in BHCG levels.

There is a nodular echogenic lesion measuring 20 x 12mm in right adnexa, without any significant vascularity ?nature ?residual ectopic lesion

ADV: US-TVS for better assessment of uterus and bilateral adnexa. BHCG levels are advisable

Recommend clinical correlation.

MANIPAL HOSPITALS

This document healigitally signed and denne, not many also ignature is required Teleradiology services provided by Manipal Hospitals Radiology Group

Page 1 of 2



RADIOLOGY REPORT

Name	Srishti BHASKAR	Modality	US
Patient ID	MH010901859	Accession No	R5388488
Gender/Age	F / 35Y 11D	Scan Date	08-04-2023 10:44:23
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	08-04-2023 19:02:48

Dr. Prabhat Prakash Gupta,

MBBS, DNB, MNAMS, FRCR(I)

Consultant Radiologist, Reg no DMC/R/14242



Name

MRS SRISHTI BHASKAR

Age

35 Yr(s) Sex :Female

Registration No

MH010901859

Lab No

32230402910

Patient Episode

H18000000427

Collection Date:

08 Apr 2023 13:12

Referred By

HEALTH CHECK MGD

Reporting Date:

08 Apr 2023 14:56

Receiving Date

08 Apr 2023 13:17

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Specimen Type : Serum

THYROID PROFILE, Serum

T3 - Triiodothyronine (ECLIA)	0.98	ng/ml	[0.70-2.04]
T4 - Thyroxine (ECLIA)	11.09	micg/dl	[4.60-12.00]
Thyroid Stimulating Hormone (ECLIA)	2.460	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

Page 1 of 9

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

Soma Pratha

Dr. Soma Pradhan



Name

MRS SRISHTI BHASKAR

Age 35 Yr(s) Sex :Female

Registration No

Lab No 202304000848

MH010901859

Patient Episode

H18000000427

Collection Date:

08 Apr 2023 09:27

Referred By

HEALTH CHECK MGD

Reporting Date:

08 Apr 2023 12:01

Receiving Date

08 Apr 2023 09:27

HAEMATOLOGY

***	-	-	**	
T	Br.	•		
- 1	£.	O		

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

COMPLETE BLOOD COUNT (AUTOMATED)

SPECIMEN-EDTA Whole Blood

COMPLETE BLOOD COUNT (AUTOMATED)		SPECIMEN-EDIA WHOTE BIOOD			
RBC COUNT (IMPEDENCE)	3.74 #	millions/cu mm	[3.80-4.80]		
HEMOGLOBIN	11.1 #	g/dl	[12.0-16.0]		
Method:cyanide free SLS-color:	imetry				
HEMATOCRIT (CALCULATED)	34.4 #	%	[36.0-46.0]		
MCV (DERIVED)	92.0	fL	[83.0-101.0]		
MCH (CALCULATED)	29.7	pg	[27.0-32.0]		
MCHC (CALCULATED)	32.3	g/dl	[31.5-34.5]		
RDW CV% (DERIVED)	13.6	06	[11.6-14.0]		
Platelet count	185	x 103 cells/cumm	[150-400]		
MPV(DERIVED)	12.6				
WBC COUNT(TC)(IMPEDENCE) DIFFERENTIAL COUNT	6.61	x 10³ cells/cumm	[4.00-10.00]		
(VCS TECHNOLOGY/MICROSCOPY)					
Neutrophils	55.0	%	[40.0-80.0]		
Lymphocytes	33.0	90	[17.0-45.0]		
Monocytes	7.0	%	[2.0-10.0]		
Eosinophils	5.0	90	[2.0-7.0]		
Basophils	0.0	96	[0.0-2.0]		
ESR	40.0 #	/1sthour	[0.0-		

Page 2 of 9



Name

: MRS SRISHTI BHASKAR

Age

35 Yr(s) Sex: Female

Registration No

MH010901859

Lab No

202304000848

Patient Episode

H18000000427

Collection Date:

08 Apr 2023 09:27

Referred By

Receiving Date

HEALTH CHECK MGD

Reporting Date:

08 Apr 2023 12:50

08 Apr 2023 09:27

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

Glycosylated Hemoglobin

Specimen: EDTA

Method: HPLC

HbAlc (Glycosylated Hemoglobin)

6.1 #

[0.0-5.6]

As per American Diabetes Association (ADA

HbA1c in %

Non diabetic adults >= 18years <5.7 Prediabetes (At Risk)5.7-6.4

Diagnosing Diabetes >= 6.5

Estimated Average Glucose (eAG)

128

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.

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour

PALE YELLOW

(Pale Yellow - Yellow)

Appearance

SLIGHTLY TURBID 7.0

(4.6-8.0)

Reaction[pH] Specific Gravity

1.005

(1.003-1.035)

CHEMICAL EXAMINATION

Protein/Albumin

Negative

(NEGATIVE)

Glucose

NIL

(NIL) (NEGATIVE)

Ketone Bodies Urobilinogen

Negative Normal

(NORMAL)

Page 3 of 9



Name

MRS SRISHTI BHASKAR

Age

35 Yr(s) Sex :Female

Registration No

MH010901859

Lab No

202304000848

Patient Episode

H18000000427

Collection Date:

08 Apr 2023 11:10

Referred By

HEALTH CHECK MGD

Reporting Date:

08 Apr 2023 12:45

Receiving Date

08 Apr 2023 11:10

CLINICAL PATHOLOGY

/hpf

MICROSCOPIC	EXAMINATION	(Automated	/Manual)

Pus Cells

2-3/hpf

(0-5/hpf)

RBC

NIL

(0-2/hpf)

Epithelial Cells CASTS

12-14

NIL

Crystals OTHERS

NIL NIL

Serum LIPID PROFILE

Serum TOTAL CHOLESTERO	L
------------------------	---

192 mg/dl

[<200]

TRIGLYCERIDES (GPO/POD)

Moderate risk:200-239 High risk:>240

[<150]

Borderline high: 151-199

High: 200 - 499 Very high: >500

HDL- CHOLESTEROL

47.0

96

mg/dl

mg/dl

[35.0-65.0]

Method: Enzymatic Immunoimhibition

19

[0-35]

VLDL- CHOLESTEROL (Calculated) CHOLESTEROL, LDL, CALCULATED

mg/dl 126.0 # mg/dl

[<120.0]

Near/

Above optimal-100-129

T.Chol/HDL.Chol ratio(Calculated)

2.7

Borderline High: 130-159

High Risk: 160-189

<4.0 Optimal

4.0-5.0 Borderline

>6 High Risk

LDL.CHOL/HDL.CHOL Ratio(Calculated)

<3 Optimal

3-4 Borderline >6 High Risk

Note:

Page 4 of 9



Name : MRS SRISHTI BHASKAR Age

: 35 Yr(s) Sex :Female

Referred By : HEALTH CHECK MGD Reporting Date : 08 Apr 2023 11:10

Receiving Date : 08 Apr 2023 09:27

BIOCHEMISTRY

TEST RESULT UNIT BIOLOGICAL REFERENCE INTERVAL

Reference ranges based on ATP III Classifications.

KIDNEY PROFILE

Technical Note

Specimen: Serum				
UREA	20.3		mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay				
BUN, BLOOD UREA NITROGEN	9.5		mg/dl	[8.0-20.0]
Method: Calculated				
CREATININE, SERUM	0.69	#	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardization				
URIC ACID	3.8	#	mg/dl	[4.0-8.5]
Method:uricase PAP				
SODIUM, SERUM	134.30	#	mmol/L	[136.00-144.00]
POTASSIUM, SERUM	4.28		mmol/L	[3.60-5.10]
SERUM CHLORIDE	102.0		mmol/l	[101.0-111.0]
Method: ISE Indirect				

eGFR (calculated) 113.1 ml/min/1.73sq.m [>60.0]

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to1.73 sq.m BSA and is not applicable to individuals below 18 years. 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.

Page 5 of 9



Name

MRS SRISHTI BHASKAR

Age

35 Yr(s) Sex :Female

Registration No

MH010901859

Lab No

202304000848

Patient Episode

H18000000427

Collection Date:

08 Apr 2023 09:27

Referred By

HEALTH CHECK MGD

Reporting Date:

08 Apr 2023 11:03

Receiving Date

08 Apr 2023 09:27

BIOCHEMISTRY

TEST	RESULT	UNIT I	BIOLOGICAL REFERENCE INTERVAL
LIVER FUNCTION TEST			
BILIRUBIN - TOTAL Method: D P D	0.49	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.08	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.41	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) Method: BIURET	7.00	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	3.71	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	3.30	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.13		[1.00-2.50]
AST(SGOT) (SERUM) Method: IFCC W/O P5P	23.00	U/L	[0.00-40.00]
ALT(SGPT) (SERUM) Method: IFCC W/O P5P	14.00	U/L	[14.00-54.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	77.0	IU/L	[40.0-98.0]
GGT	17.0		[7.0-50.0]

Page 6 of 9



Name

MRS SRISHTI BHASKAR

Age

35 Yr(s) Sex :Female

Registration No

MH010901859

Lab No

202304000848

Patient Episode

H18000000427

Collection Date:

08 Apr 2023 09:27

Referred By

HEALTH CHECK MGD

Reporting Date:

08 Apr 2023 12:59

Receiving Date

08 Apr 2023 09:27

BLOOD BANK

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

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 SRISHTI BHASKAR

Age

35 Yr(s) Sex :Female

Registration No

MH010901859

Lab No

202304000849

Patient Episode

H18000000427

Collection Date:

08 Apr 2023 09:27

Referred By

Receiving Date

HEALTH CHECK MGD 08 Apr 2023 09:27

Reporting Date:

08 Apr 2023 11:10

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

GLUCOSE-Fasting

Specimen: Plasma

GLUCOSE, FASTING (F)

92.0

mg/dl

[70.0-110.0]

Method: Hexokinase

-----END OF REPORT

Page 8 of 9

Dr. Charu Agarwal **Consultant Pathologist**



Name

MRS SRISHTI BHASKAR

Age

35 Yr(s) Sex :Female

Registration No

: MH010901859

Lab No

202304000850

Patient Episode

: H18000000427

Collection Date:

08 Apr 2023 14:14

Referred By

: HEALTH CHECK MGD

Reporting Date:

10 Apr 2023 10:11

Receiving Date

: 08 Apr 2023 14:14

BIOCHEMISTRY

TEST

RESULT

UNIT

BIOLOGICAL REFERENCE INTERVAL

PLASMA GLUCOSE

Specimen:Plasma

GLUCOSE, POST PRANDIAL (PP), 2 HOURS

108.0

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