

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Zartab Framin Ayaz MRN : 17510001163771 Gender/Age : FEMALE , 30y (28/06/1992)

Collected On : 20/02/2023 10:23 AM Received On : 20/02/2023 03:42 PM Reported On : 20/02/2023 05:43 PM

Barcode : BR2302200025 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8420685910

IMMUNOHAEMATOLOGY

Test	Result	Unit
<b>BLOOD GROUP &amp; RH TYPING</b>		
Blood Group (Column Agglutination Technology)	O	-
RH Typing (Column Agglutination Technology)	Positive	-

--End of Report--

Dr. Amal Kumar Saha  
MBBS, D.PED, ECFMG  
Blood Bank Officer

Note

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



**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Ms Zartab Framin Ayaz MRN : 17510001163771 Gender/Age : FEMALE , 30y (28/06/1992)

Collected On : 20/02/2023 10:23 AM Received On : 20/02/2023 12:42 PM Reported On : 20/02/2023 01:42 PM

Barcode : 822302200034 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8420685910

**CLINICAL PATHOLOGY**

Test	Result	Unit	Biological Reference Interval
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**URINE ROUTINE & MICROSCOPY****PHYSICAL EXAMINATION**

Volume	40	ml	-
Colour	Pale Yellow	-	-
Appearance	Hazy	-	-

**CHEMICAL EXAMINATION**

pH(Reaction) (Mixed PH Indicator)	6.0	-	4.8-7.5
Sp. Gravity (Dual Wavelength Reflectance )	1.005	-	1.002-1.030
Protein (Protein Error Of PH Indicator)	Negative	-	-
Urine Glucose (Glucose Oxidase, Peroxidase)	Negative	-	Negative
Ketone Bodies (Legal's Method)	Negative	-	Negative
Bile Salts (Dual Wavelength Reflectance/Manual)	Negative	-	Negative
Bile Pigment (Bilirubin) (Coupling Of Bilirubin With Diazonium Salt)	Negative	-	Negative
Urobilinogen (Coupling Reaction Of Urobilinogen With A Stable Diazonium Salt In Buffer)	Normal	-	Normal
Urine Leucocyte Esterase (Enzymatic, Indoxyl Ester And Diazonium Salt)	<b>Present ++</b>	-	Negative
Blood Urine (Pseudo - Enzymatic Test, Organic Peroxidase And Chromogen)	Negative	-	Negative
Nitrite (Modified Griess Reaction)	Negative	-	Negative

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### MICROSCOPIC EXAMINATION

Pus Cells	20-25	/hpf	1-2
RBC	NIL	/hpf	0 - 3
Epithelial Cells	5-10	/hpf	2-3
Crystals	NIL	-	-
Casts	NIL	-	-

--End of Report--



Dr. Sanjib Kumar Pattari  
MD, Pathology  
Consultant Pathology MBBS, MD

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Patient Name : Ms Zartab Framin Ayaz MRN : 17510001163771 Gender/Age : FEMALE , 30y (28/06/1992)

Collected On : 20/02/2023 12:12 PM Received On : 20/02/2023 12:41 PM Reported On : 20/02/2023 01:43 PM

Barcode : 822302200050 Specimen : Stool Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8420685910

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
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STOOL ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Colour	Brownish	-	-
Consistency	Semi Solid	-	-
Mucus	Present	-	-
Blood	Absent	-	-

CHEMICAL EXAMINATION

Stool For Occult Blood	Negative	-	-
Reaction	Alkaline	-	-

MICROSCOPE EXAMINATION

Ova	Not Seen	-	-
Cyst Of Protozoa	Not Seen	-	-
Trophozoite	Not Seen	-	-
Red Blood Cells (Stool)	NIL	-	-
Pus Cells	Occasional	/hpf	1 - 2
Starch	Present	-	-
Veg Cells	Present	-	-
Fat	Absent	-	-

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Larvae

Not Seen

--End of Report--



Dr. Sanjib Kumar Pattari  
MD, Pathology  
Consultant Pathology MBBS, MD

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Collected On : 20/02/2023 10:23 AM Received On : 20/02/2023 10:47 AM Reported On : 20/02/2023 12:52 PM

Barcode : 802302200438 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8420685910

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>SERUM CREATININE</b>			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	<b>0.47 L</b>	mg/dL	0.52-1.04
eGFR	155.6	mL/min/1.73m <sup>2</sup>	-
<b>LIVER FUNCTION TEST(LFT)</b>			
Bilirubin Total (Colorimetric -Diazo Method)	0.65	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	<b>0.43 H</b>	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Colorimetric Endpoint)	0.22	-	-
Total Protein (Biuret Method)	7.80	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.60	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.3	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.4	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	31	U/L	14.0-36.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	<b>40 H</b>	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	53	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide ( Szasz Method))	33	U/L	12.0-43.0



Dr. Debasree Biswas  
MD, Biochemistry  
Clinical Biochemist MBBS, MD

#### CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>Blood Urea Nitrogen (BUN)</b> (Endpoint /Colorimetric - Urease)	<b>5.38 L</b>	-	7.0-17.0
<b>Serum Sodium</b> (Direct ISE - Potentiometric)	141	mmol/L	137.0-145.0
<b>Serum Potassium</b> (Direct ISE - Potentiometric)	4.5	mmol/L	3.5-5.1
<b>LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)</b>			
<b>Cholesterol Total</b> (Colorimetric - Cholesterol Oxidase)	191	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
<b>Triglycerides</b> (Enzymatic Endpoint Colorimetric )	142	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
<b>HDL Cholesterol (HDLC)</b> (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	<b>36 L</b>	mg/dL	40.0-60.0
<b>Non-HDL Cholesterol</b>	155.0	-	-
<b>LDL Cholesterol</b> (Non LDL Selective Elimination, CHOD/POD)	<b>124.1 H</b>	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
<b>VLDL Cholesterol</b> (Calculated)	28.4	mg/dL	0.0-40.0
<b>Cholesterol /HDL Ratio</b>	5.4	-	-

--End of Report--

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Dr. Sujata Ghosh  
PhD, Biochemistry  
Biochemist M.Sc , Ph. D



Dr. Debasree Biswas  
MD, Biochemistry  
Clinical Biochemist MBBS, MD

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- Kindly correlate clinically.  
(Lipid Profile, -> Auto Authorized)  
(Blood Urea Nitrogen (Bun), -> Auto Authorized)  
(Serum Sodium, -> Auto Authorized)  
(Serum Potassium -> Auto Authorized)





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Collected On : 20/02/2023 10:23 AM Received On : 20/02/2023 10:47 AM Reported On : 20/02/2023 12:49 PM

Barcode : 802302200438 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8420685910

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>THYROID PROFILE (T3, T4, TSH)</b>			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.32	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	8.79	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	3.172	uIU/ml	Non Pregnant: 0.4001-4.049 1st Trimester: 0.1298-3.10 2nd Trimester: 0.2749-2.652 3rd Trimester: 0.3127-2.947

--End of Report--

Dr. Debasree Biswas  
MD, Biochemistry  
Clinical Biochemist MBBS, MD

Dr. Sujata Ghosh  
PhD, Biochemistry  
Biochemist M.Sc , Ph. D

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- ( -> Auto Authorized)



DEPARTMENT OF LABORATORY MEDICINE

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Collected On : 20/02/2023 10:23 AM Received On : 20/02/2023 10:48 AM Reported On : 20/02/2023 01:16 PM

Barcode : 812302200261 Specimen : Whole Blood - ESR Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8420685910

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
<b>Erythrocyte Sedimentation Rate (ESR)</b> (Modified Westergren Method)	<b>65 H</b>	mm/1hr	0.0-12.0

--End of Report--

Dr. Moumita Panja  
DNB, Pathology  
Consultant Pathologist

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Zartab Framin Ayaz MRN : 17510001163771 Gender/Age : FEMALE , 30y (28/06/1992)

Collected On : 20/02/2023 10:23 AM Received On : 20/02/2023 10:50 AM Reported On : 20/02/2023 11:43 AM

Barcode : 802302200441 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8420685910

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>HBA1C</b>			
HbA1c (HPLC)	5.2	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	102.54	-	-

**Interpretation:**

- HbA1C above 6.5% can be used to diagnose diabetes provided the patient has symptoms. If the patient does not have symptoms with HbA1C>6.5%, repeat measurement on further sample. If the repeat test result is <6.5%, consider as diabetes high risk and repeat measurement after 6 months.
- HbA1C measurement is not appropriate in diagnosing diabetes in children, suspicion of type 1 diabetes, symptoms of diabetes for less than 2 months, pregnancy, hemoglobinopathies, medications that may result sudden increase in glucose, anemia, renal failure, HIV infection, malignancies, severe chronic hepatic, and renal disease.
- Any sample with >15% should be suspected of having a haemoglobin variant.

--End of Report-

Dr. Sujata Ghosh  
PhD, Biochemistry  
Biochemist M.Sc , Ph. D

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Collected On : 20/02/2023 10:23 AM Received On : 20/02/2023 10:50 AM Reported On : 20/02/2023 11:17 AM

Barcode : 812302200262 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8420685910

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
<b>COMPLETE BLOOD COUNT (CBC)</b>			
Haemoglobin (Hb%) (Photometric Measurement)	11.7 L	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.29	millions/ $\mu$ L	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	35.8 L	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	83.4	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	27.2	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.6	%	31.5-34.5
Red Cell Distribution Width (RDW) (Calculated)	13.7	%	11.6-14.0
Platelet Count (Electrical Impedance)	257	$10^3/\mu$ L	150.0-400.0
Mean Platelet Volume (MPV) (Derived)	11.7	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	7.9	$10^3/\mu$ L	4.0-10.0
<b>DIFFERENTIAL COUNT (DC)</b>			
Neutrophils (VCSn Technology)	59.4	%	40.0-75.0
Lymphocytes (VCSn Technology)	30.5	%	20.0-40.0
Monocytes (VCSn Technology)	7.9	%	2.0-10.0
Eosinophils (VCSn Technology)	1.6	%	1.0-6.0

Patient Name : Ms Zartab Framin Ayaz MRN : 17510001163771 Gender/Age : FEMALE , 30y (28/06/1992)

Basophils (VCSn Technology)	0.6	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	4.7	$10^3/\mu\text{L}$	1.8-7.8
Absolute Lymphocyte Count (Calculated)	2.41	$10^3/\mu\text{L}$	1.0-4.8
Absolute Monocyte Count (Calculated)	0.63	$10^3/\mu\text{L}$	0.0-0.8
Absolute Eosinophil Count (Calculated)	0.13	$10^3/\mu\text{L}$	0.0-0.45
Absolute Basophil Count (Calculated)	0.05	$10^3/\mu\text{L}$	0.0-0.2

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

--End of Report--



Dr. Sanjib Kumar Pattari  
MD, Pathology  
Consultant Pathology MBBS, MD

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Collected On : 20/02/2023 10:23 AM Received On : 20/02/2023 10:47 AM Reported On : 20/02/2023 11:57 AM

Barcode : 802302200440 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8420685910

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>Fasting Blood Sugar (FBS)</b> (Glucose Oxidase, Peroxidase)	<b>104 H</b>	mg/dL	Normal: 70-99 Pre-diabetes: 100-125 Diabetes: => 126 ADA standards 2019

--End of Report--

Dr. Sujata Ghosh  
PhD, Biochemistry  
Biochemist M.Sc , Ph. D

Dr. Debasree Biswas  
MD, Biochemistry  
Clinical Biochemist MBBS, MD

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(Fasting Blood Sugar (FBS) -> Auto Authorized)



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Zartab Framin Ayaz MRN : 17510001163771 Gender/Age : FEMALE , 30y (28/06/1992)

Collected On : 20/02/2023 02:25 PM Received On : 20/02/2023 02:48 PM Reported On : 20/02/2023 03:41 PM

Barcode : 802302200825 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8420685910

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Post Prandial Blood Sugar (PPBS) (Glucose Oxidase, Peroxidase)	110	mg/dL	Normal: 70-139 Pre-diabetes: 140-199 Diabetes: => 200 ADA standards 2019

**Interpretations:**  
 (ADA Standards Jan 2017)  
 FBS can be less than PPBS in certain conditions like post prandial reactive hypoglycaemia, exaggerated response to insulin, subclinical hypothyroidism, very lean/anxious individuals. In non-diabetic individuals, such patients can be followed up with GTT.

--End of Report--

Dr. Debasree Biswas  
MD, Biochemistry  
Clinical Biochemist MBBS, MD

Dr. Sujata Ghosh  
PhD, Biochemistry  
Biochemist M.Sc , Ph. D

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



## ADULT TRANS-THORACIC ECHO REPORT

**PATIENT NAME** : Ms Zartab Framin Ayaz  
**GENDER/AGE** : Female, 30 Years  
**LOCATION** : -

**PATIENT MRN** : 17510001163771  
**PROCEDURE DATE** : 20/02/2023 01:31 PM  
**REQUESTED BY** : EXTERNAL



### IMPRESSION

- NO SIGNIFICANT ECHOCARDIOGRAPHIC ABNORMALITY DETECTED.

### FINDINGS

#### CHAMBERS

LEFT ATRIUM : NORMAL SIZED  
RIGHT ATRIUM : NORMAL SIZED  
LEFT VENTRICLE : NORMAL SIZED CAVITY. NO REGIONAL WALL MOTION ABNORMALITY. GOOD SYSTOLIC FUNCTION WITH EJECTION FRACTION: 68%. NORMAL DIASTOLIC FLOW PATTERN.  
RIGHT VENTRICLE : NORMAL SIZE AND THICKNESS WITH NORMAL FUNCTION

#### VALVES

MITRAL : NORMAL.  
AORTIC : NORMAL.  
TRICUSPID : NORMAL.  
PULMONARY : NORMAL.

#### SEPTAE

IAS : INTACT  
IVS : INTACT

#### ARTERIES AND VEINS

AORTA : NORMAL, LEFT AORTIC ARCH  
PA : NORMAL SIZE  
IVC : NORMAL SIZE & COLLAPSIBILITY  
SVC & CS : NORMAL  
PULMONARY VEINS : NORMAL

**PERICARDIUM** : NORMAL PERICARDIAL THICKNESS. NO EFFUSION

**INTRACARDIAC MASS** : NO TUMOUR, THROMBUS OR VEGETATION SEEN

**OTHERS** : NIL.

*Sangeeta Das*



MS ZARTAB FRAMIN AYAZ (17510001163771)

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DR. SANGEETA DAS  
CONSULTANT GENERAL MEDICINE MBBS

SHRABONI MONDAL  
TECHNICIAN

20/02/2023 01:31 PM

<b>PREPARED BY</b>	: NAFISHA KHATUN(333472)	<b>PREPARED ON</b>	: 20/02/2023 02:37 PM
<b>GENERATED BY</b>	: MADHUPARNA DASGUPTA(333433)	<b>GENERATED ON</b>	: 23/02/2023 11:54 AM

<b>Patient Name</b>	Zartab Framin Ayaz	<b>Requested By</b>	EXTERNAL
<b>MRN</b>	17510001163771	<b>Procedure DateTime</b>	2023-02-20 11:28:53
<b>Age/Sex</b>	30Y 7M/Female	<b>Hospital</b>	NH-RTIICS

### **USG OF WHOLE ABDOMEN**

#### **LIVER:**

It is mildly enlarged with hyperechoic parenchyma. No focal SOL is seen. The intrahepatic biliary radicles are not dilated.

#### **PORTAL VEIN:**

The portal vein is normal in calibre at the porta. There is no intraluminal thrombus. No collaterals are seen.

#### **GALL BLADDER:**

It is operated.

#### **CBD:**

The common duct is not dilated at porta. No intraluminal calculus is seen.

#### **SPLEEN:**

It is normal in size measuring 9.1 cm and echogenicity. No focal SOL is seen. The splenoportal axis is patent and is normal in dimensions.

#### **PANCREAS:**

It is normal in size, contour and echogenicity. The duct is not dilated. No calcification or focal SOL is seen.

**KIDNEYS:**

Both kidneys are normal in size, position, contour and echogenicity. The corticomedullary differentiation is maintained. No hydronephrosis, calculus or mass is seen.

Right kidney and left kidney measures 10.2 x 4.1 cm and 10.2 x 5.9 cm respectively.

**URINARY BLADDER:**

It is normal in capacity and contour. The wall is not thickened. No intraluminal calculus or mass is seen.

**UTERUS:**

It is anteverted, normal in size measuring 6.6 x 4.7 x 3.5 cm with a smooth contour and normal echopattern. No focal SOL is seen. The endometrial echoline is central in position. Endometrium is not thickened. The cervix appears normal.

**OVARIES:**

The ovaries are normal in size, shape and echotexture.

The right and left ovaries measures 3.0 x 2.3 cm and 3.3 x 2.2 cm respectively.

No ascites is seen.

**IMPRESSION:**

- Mild hepatomegaly with fatty infiltration.

NOT FOR MEDICO LEGAL PURPOSES

This is only a Radiological Impression and not Diagnosis. Like all diagnostic modalities, USG also has its limitations. Therefore USG report should be interpreted in correlation with clinical and pathological findings.

All typing and topographical error is regretted and if detected at any time is correctable. Please inform us immediately.

A handwritten signature in black ink, appearing to be the initials 'Sc'.

Dr. Sarbari Chatterjee  
Consultant Radiologist

<b>Patient Name</b>	Zartab Framin Ayaz	<b>Requested By</b>	EXTERNAL
<b>MRN</b>	17510001163771	<b>Procedure DateTime</b>	2023-02-20 12:00:38
<b>Age/Sex</b>	30Y 7M/Female	<b>Hospital</b>	NH-RTIICS

### **CHEST RADIOGRAPH (PA VIEW)**

#### **FINDINGS :**

- Trachea is normal and is central.
- The cardiac shadow is normal in contour.
- Mediastinum and great vessels are within normal limits.
- The hilar shadows are within normal limits.
- The costo-phrenic angles are clear.
- The lung fields and bronchovascular markings appear normal.
- The visualized bones and soft tissue structures appear normal.
- Both the diaphragmatic domes appear normal.

#### **IMPRESSION:**

- **No significant radiological abnormality detected.**

### **NOT FOR MEDICO LEGAL PURPOSES**

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A handwritten signature in black ink, appearing to be 'Sc', located in the upper left quadrant of the page.

Dr. Sarbari Chatterjee  
Consultant Radiologist