



Patient Name	MRS. SUMEDHA	Patient ID	BER/202421052
Age/Gender	35Years / F	Study Date	21-Mar-2024
Referred By	MEDIWHEEL	Reported Date	21-Mar-2024

X - RAY CHEST PA VIEW

FINDINGS :-

Both lung fields under vision appear normal.

Cardiac size appears normal.

Both costophrenic angles are clear.

Hilar regions are normal.

Both domes appear normal in position.

Bony thorax under vision appears normal.

IMPRESSION : NORMAL STUDY

Dr Hiren Patel
MD Radiology REG-21502

Date Reported: 21-Mar-2024

BERLIN GENERAL HOSPITAL

Name **MRS. SUMEDHA**

Age **35**

Date **21/03/2024**

Patient Id **202421052**

Sex **Female**

Ref.Physician

Measurements

2D & M-Mode Measurements

IVSd	1.23 cm
LVIDd	4.09 cm
LVPWd	0.97 cm
IVSs	1.53 cm
LVIDs	2.64 cm
LVPWs	1.56 cm
EDV(Teich)	73.88 ml
ESV(Teich)	25.58 ml
EF(Teich)	65.37 %
%FS	35.45 %
SV(Teich)	48.29 ml
Ao Diam	2.57 cm
LA Diam	2.79 cm
AV Cusp	1.08 cm
LA/Ao	1.09
Ao/LA	0.92

PW-Measurements

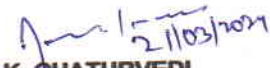
MV E Vel	0.48 m/s
MV DecT	180.77 ms
MV Dec Slope	2.66 m/s ²
MV A Vel	0.42 m/s
MV E/A Ratio	1.14
MV PHT	52.42 ms
MVA By PHT	4.20 cm ²
AV Vmax	0.88 m/s
AV maxPG	3.11 mmHg
PV Vmax	0.88 m/s
PV maxPG	3.11 mmHg

Comments:

NO RWMA
LVEF=65%
NORMAL LA / LV AND RA / RV DIMENSION
NO MR / NO TR
NO AR/ NO AS
NO VEG / CLOT/PE/MASS
IAS AND IVS INTACT
NORMAL SYSTOLIC AND DIASTOLIC FUNCTION
ALL VALVES AND PERICARDIUM NORMAL

Impression:

NORMAL ECHO STUDY


DR. R.K. CHATURVEDI
MBBS, MD, N.MED
DIP. CARDIOLOGY

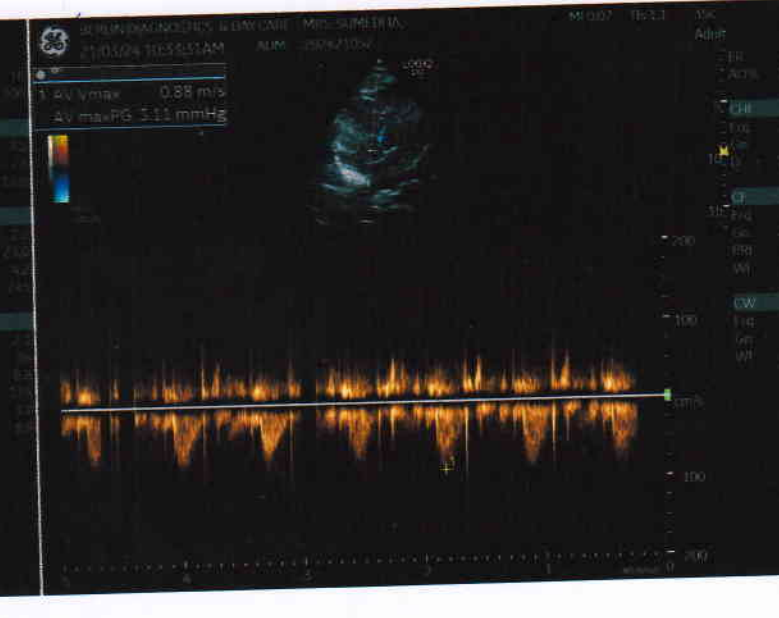
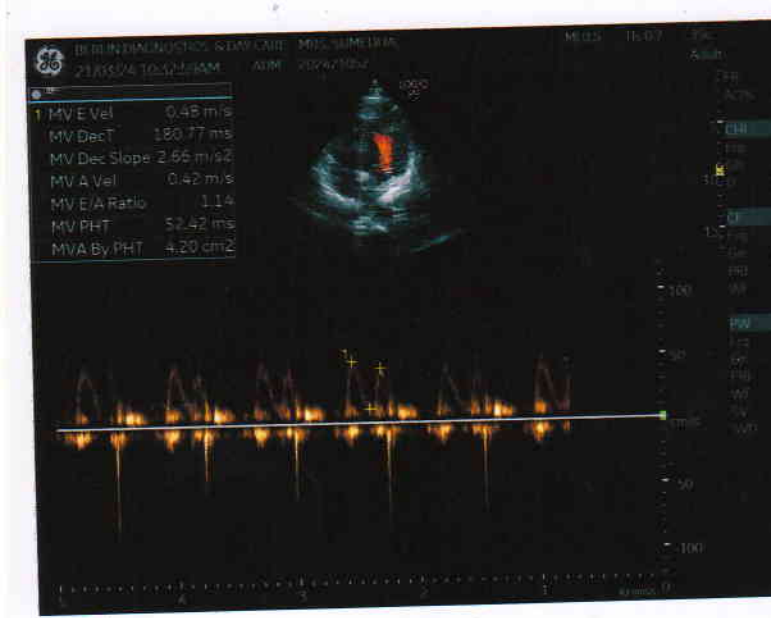
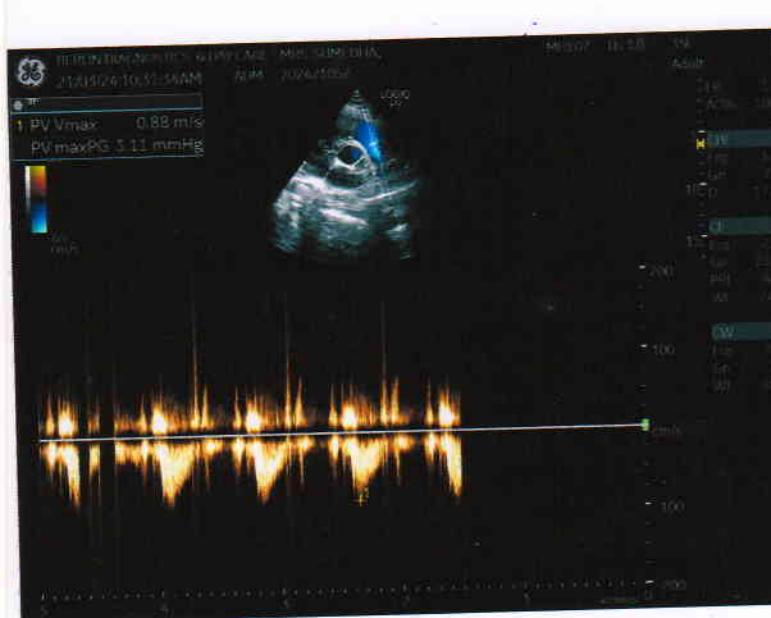
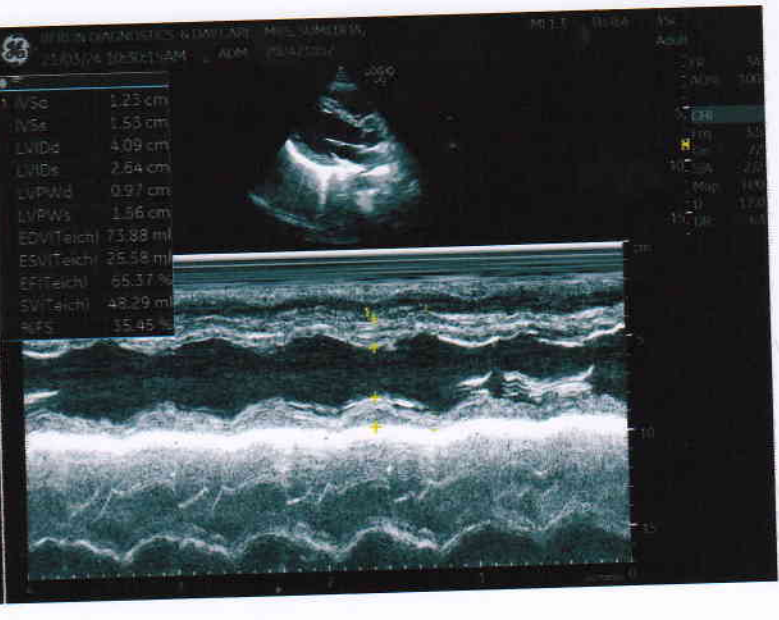
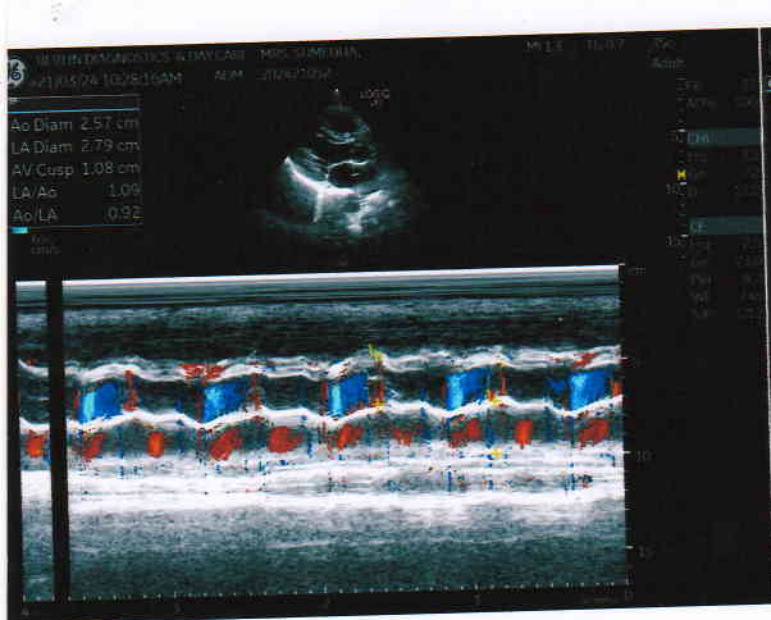
☎ 9341529314

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Near Panchmukhi Mandir Harmu,
Ranchi Jharkhand 834002

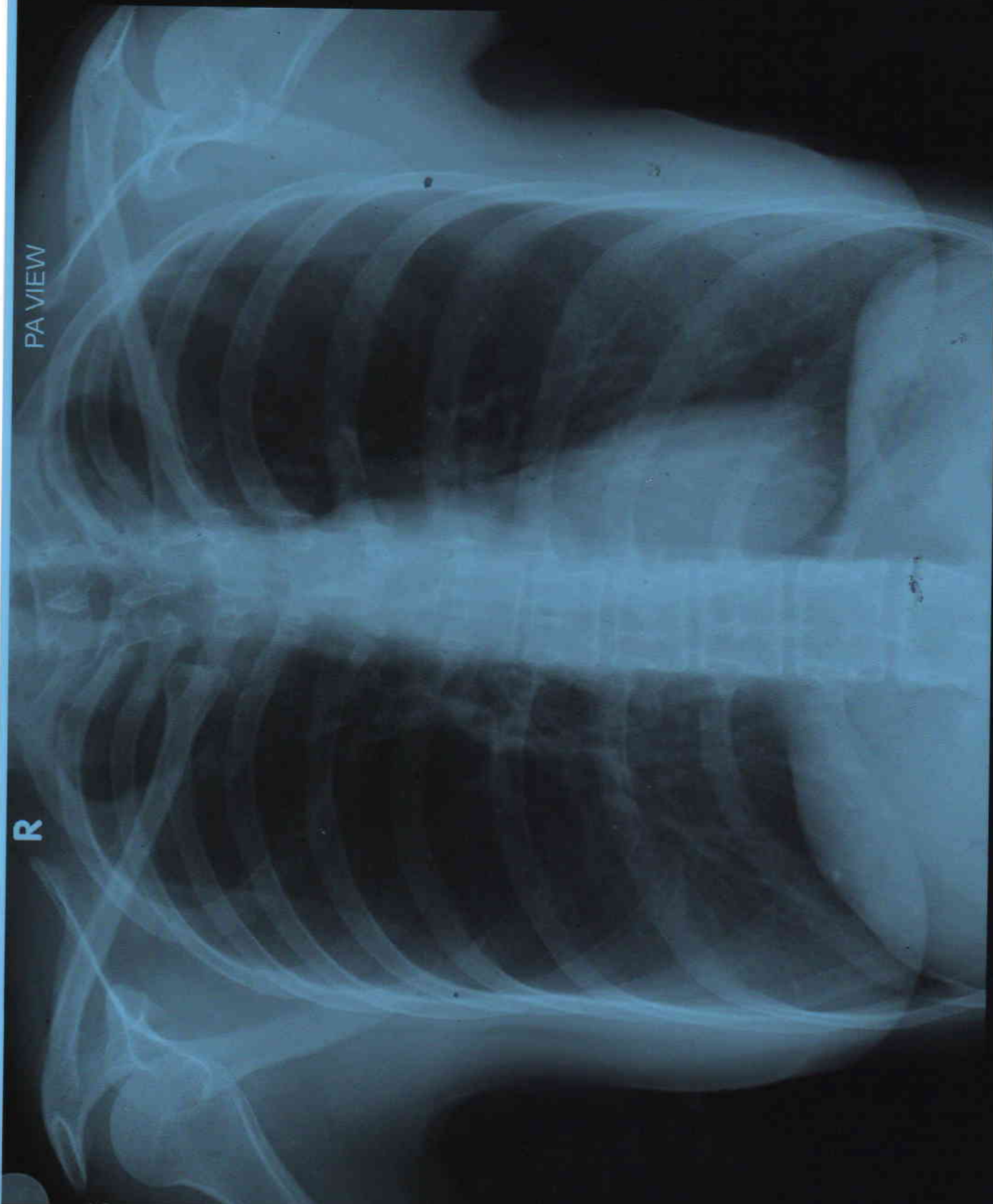
✉ info@berlingeneralhospital.com

🌐 www.berlingeneralhospital.com

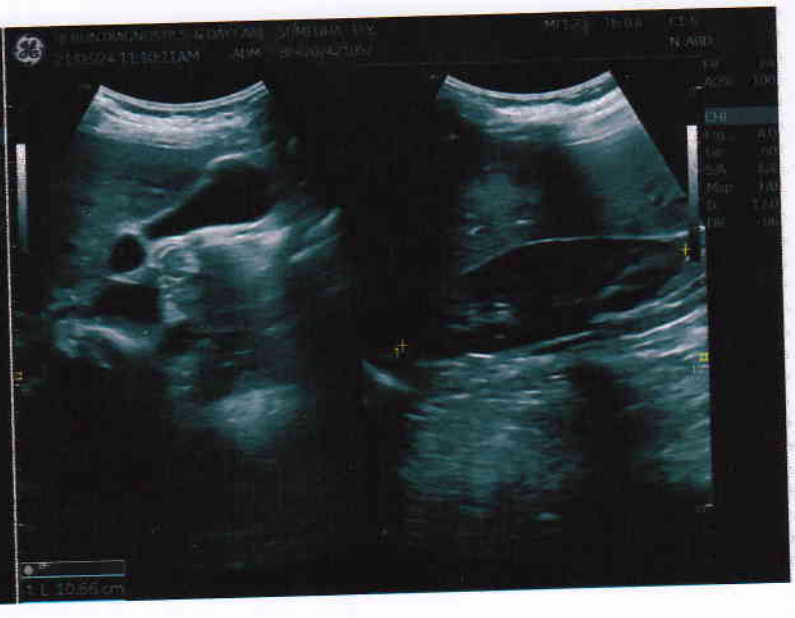


R

PA VIEW



SUMEDHA AGE 35Y/F MEDIWHEEL BER/202421052 CHEST PA VIEW 21/03/2024
BERLIN DIAGNOSTICS & DAY CARE, BARIATU ROAD, RANCHI.





Patient Name	Mrs. SUMEDHA	Requested By	MEDIWHEEL
MRN	BER/2024/OPD21052	Procedure Date	21.03.2024
Age/Sex	35Y/FEMALE	Hospital	BERLIN DIAGNOSTICS & DAY CARE

USG WHOLE ABDOMEN

Liver : The liver is normal in size (12.8 cm) and outline. It shows a uniform echopattern. No obvious focal or diffuse pathology is seen. The intra and extra hepatic biliary passage are not dilated. The portal vein is normal in caliber at the porta hepatis.

Gall bladder : The gall bladder is normal in size, has normal wall thickness with no evidence of calculi.

CBD : The CBD is of normal caliber.

Pancreas : The pancreas is normal in size and echogenicity with distinct outline. No obvious focal lesion is seen.

Right kidney measures 10.6 cm
Left kidney measures 10.2 cm

The renal cortical thickness and corticomedullary differentiation were adequate on both sides. No evidence of renal calculus or hydronephrosis seen on either side.

Spleen : The spleen is normal in size and echogenicity.

Urinary Bladder : The urinary bladder is normal in size. Its walls show a smooth outline. There is no evidence of any intraluminal or perivesical abnormality.

Uterus : The uterus is normal in size measuring 6.2 x 5.8 cm. Its outline is smooth. It shows normal endometrial echoes with no evidence of any mass lesion. No evidence of free fluid in the pouch of douglas.
ET is mildly thickened measures - 14 mm.

Right ovary measures : 3.1 cm
Left ovary measures : 2.0 cm

Both ovaries are normal in size and show uniform parenchymal echogenicity and smooth outline. There is no evidence of any mass lesion arising from or within either ovary.

No significant probe tenderness in RIF.

No evidence of pleural effusion on either side.

No evidence of ascites or lymphadenopathy seen.

IMPRESSION: MILDLY THICKENED ENDOMETRIUM.

Please correlate clinically.

Dr. Ambuj Srivastav
M.D. Consultant Radiologist.



Patient Name	Mrs. SUMEDHA	Requested By	MEDIWHEEL
MRN	BER/2024/OPD21052	Procedure Date	21.03.2024
Age/Sex	35Y/FEMALE	Hospital	BERLIN DIAGNOSTICS & DAY CARE

ULTRA SOUND OF BOTH BREAST (SONO MAMOGRAPHY)

FINDINGS :

Both breasts are normal in echotexture and morphology with normal fibroglandular tissue seen in bilateral breast. Normal doppler vascularity seen.

No obvious mass lesion is seen in bilateral breast.

No obvious collection noted in bilateral breast.

No evidence of calcification or micro-calcification noted on both side.

Both axilla appear unremarkable.

No significant enlarged lymph nodes seen.

Nipple areolar complex is unremarkable.

Skin and subcutaneous fat unremarkable.

IMPRESSION : No abnormality detected on both breast.

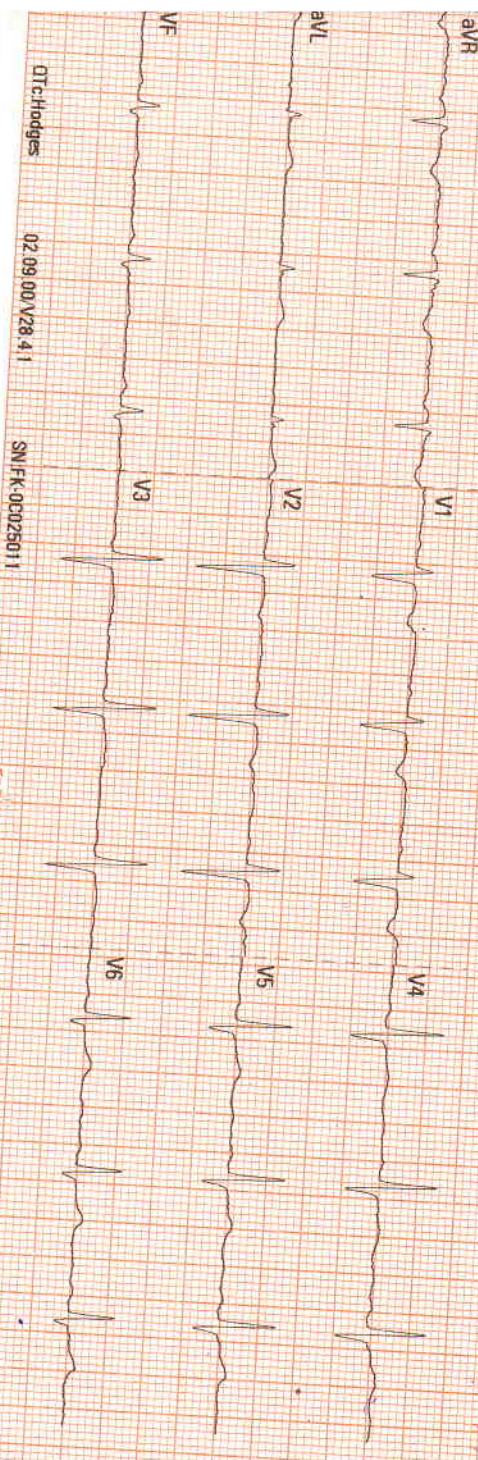
Please correlate clinically.

Dr. Poonam Choudhary
Sonologist.

We regret typographical errors if any. Please contact us for correction.
Typed by : Raju.

2024-03-21 12:18:54

MRS. SUMEDHA DEVI - 35Y/F



OT c:Hodges

02:09:00/V28.4.1

SN:FK-0C025011

ID:2024032111512468
Name:

2024-03-21 12:18:54

Sinus rhythm

--- Interpretation made without knowing patient's gender/age ---
Anteroseptal T wave abnormality is nonspecific

Borderline ECG

Unconfirmed Diagnosis:

Vent. Rate (bpm)	76
PR Interval (ms)	158
QRS Duration (ms)	84
QT/QTc Interval (ms)	370/398
P/QTST Axes (deg)	56/43/21

Dr. Krishi Murari Prasad
MBBS, MD, Cardiology



CARDIOPRINT

MRP

**CONSULTATION
FEE APPLICABLE
ON NEXT VISIT**

Patient Name

Date (OP NO): 21-03-2024 (ORNC100)

Name: Mrs Sumedha

Age (Gender): 35Y | 00M | 00D (Female)

Consultant: Dr. SMRUTI SAVALE

MRD: RNC14952

Add: Ranchi, Jharkhand, India

MOB: 8689958866

Age

Sex

M F

MRD No.

IOP

Right Eye	12
Left Eye	14

Right Eye	6/6
Left Eye	VISION 20 6/12 P 15 6/6

Diagnosis

- (LE) Refractive error
- (BE) Few dry spots on cornea
- (BE) disc, macula healthy

Both eyes -
colored vision
normal

Adv

- glasses
- old cataract
- lens in 6 months

Dr. Smruti Savale
MBBS, MS (OPHTHAL), FICO(UK), FCE
JMC Reg No 7066

Cataract, Cornea & Refractive Surgeon
Seal and Signature of the treating Doctor

NOT VALID FOR MEDICO-LEGAL PURPOSE

REGISTER NOW

1800 1200 111

SPECTACLE PRESCRIPTION

	SPHERE	CYLINDER	AXIS	VISION	PRISM	BASE	ADD
OD▶	-	-	-	6/6			
OS▶	-	-1.75	170	6/6			

Recommendations


- | | | | | |
|---|------------------------------------|--|---|--------------------------------------|
| <input checked="" type="checkbox"/> ANTI REFLECTION | <input type="checkbox"/> DE-LUZ | <input type="checkbox"/> PHOTO CHROMATIC | <input type="checkbox"/> TRANSITIONS | <input type="checkbox"/> MR-8 |
| <input type="checkbox"/> SINGLE VISION | <input type="checkbox"/> BI-FOCAL | <input type="checkbox"/> PROGRESSIVE | <input type="checkbox"/> SEPARATE DISTANCE & NEAR | |
| <input type="checkbox"/> DISTANCE ONLY | <input type="checkbox"/> NEAR ONLY | <input type="checkbox"/> HYPER INDEX | <input type="checkbox"/> ESTRELLA | <input type="checkbox"/> POST-OP-SG. |

P. D.▶

PRESCRIBED BY DR. 

Dr. Smriti Savale
MBBS, MS, FCO, FCE
Cataract Surgeon

Name : SUMEDHA .
Age/Gender : 35 Years/Female
UHID : QL303245586
Refer By :
Wing : BERLIN GENERAL HOSPITAL RANCHI
Client Name : BDDC - CGHS

Reg.No. : 
Reg.Date : 21-Mar-24 02:12 PM
Received On : 21-Mar-24 02:12 PM
Reported On : 22-Mar-24 06:26 PM

Test Particular	Result	Unit	Biological Reference Interval
Thyroid Profile			
Thyroid Function Test [By CLIA] :-			
Tri-iodo Thyronine (T3)	1.22	ng/ml	(0.8 - 2.0) 11-15 Years (0.83 - 2.13) 1-10 Years (0.94 - 2.69) 1-12 Months (1.05 - 2.45) 1-7 Days (0.36 - 3.16) 1-4 Weeks (1.05 - 3.45)
Thyroxine (T4)	6.98	µg/dl	(5.1 - 14.1) 1-12 Months (5.9 - 16) 1-7 Days (11 - 22) 1-4 Weeks (8.2 - 17) 1-10 Years (6.4 - 15) 11-15 Years (5.5 - 12)
Thyroid Stimulating Hormone (T S H)	2.51	µIU/ml	Up to 1 Week (0.7-15.2) 1 week-4 week (0.7- 11.0) 1-12 Months (0.7- 8.4) 1-19 Years (0.6-4.9) 19 Years Above (0.5-5.5) 1st Trimester (0.6 - 3.4) 2nd Trimester (0.37 - 3.6) 3rd Trimester(0.38 - 4.04)

Mild to moderate degree of elevation normal T3&T4 levels indicates impaired thyroid hormone reserves and indicates subclinical hypothyroidism.

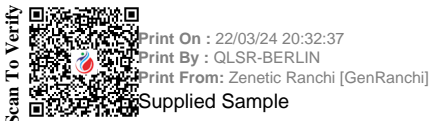
Mild to moderate decrease with normal T3 & T4 indicates subclinical hyperthyroidism.

TSH measurement is used for screening & diagnosis of Euthyroidism, hypothyroidism & hyperthyroidism.

Suppressed TSH (< 0.01 µ IU/ml) suggests diagnosis of hyperthyroidism.

Elevated concentration of TSH (>7 µ IU/ml) suggest diagnosis of hypothyroidism.


Please correlate clinically.




Dr. Suchismita Panda
 MD (Biochemistry)

P.T.O.

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Age/Gender : 35 Years/Female
UHID : QL303245586
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Test Particular	Result	Unit	Biological Reference Interval
VITAMIN B 12	117.9	Pg/ml	(187 - 883)

VIT B 12 a member of the corrin family, is a cofactor in the synthesis of methionine from Homocysteine is implicated in the formation of myeline and along with folate is for DNA synthesis.

Deficiency of VIT B12 may cause megaloblastic anemia , nerve damage and degeneration of the spinal cord.

Low serum B12 levels may be indicated in conditions associated iron deficiency, normal near-term pregnancy, vegetarianism, partial gastrectomy, treated epilepsy and advancing age.

Normal range:- 187 pg/ml - 883 pg/ml

Vitamin D (25 O-H)	23.65	ng/ml	Deficient (0 - 10 ng/ml) Insufficient (10 - 30 ng/ml) Sufficient (30 -100 ng/ml) Toxicity >100 (ng/ml)
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Method: By E411 Cobas Chemiluminescence


25-OH VITAMIN D:-

Vitamin D is a fat soluble steroid hormone mainly produced photo chemically in the skin from 7-dehydrocholesterol.

Vitamin-D deficiency is a cause of secondary hyperparathyroidism and disease related to impaired bone metabolism like rickets, osteoporosis, osteomalacia.


Low values are also seen in chronic illness like cancer, auto immune, infectious disease or cardiovascular problem.


 Scan To Verify
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Dr. Suchismita Panda
 MD (Biochemistry)

End Of Report


Name : SUMEDHA .
Age/Gender : 35 Years/Female
UHID : QL303245586
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Reg.No. : 
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Test Particular	Result	Unit	Biological Reference Interval
Fasting Plasma Glucose Method: (By GOD-POD Method)	90	mg/dl	(65 - 110)
Post Prandial Plasma Glucose Method: (By GOD-POD Method)	133	mg/dl	(75 - 140)
Fasting Urine Sugar	Nil		
<u>LIPID PROFILE : -</u>			
Serum Triglyceride Method: (By Enzymatic,end point)	126	mg/dl	(< 150)
Serum Cholesterol Method: (By Oxidase, Esterase, Peroxidase)	165	mg/dl	(125 - 200)
Serum HDLc (Direct) Method: (By PTA/MgC12, Reflectance photometry)	40	mg/dl	(30 - 65)
Serum LDLc (Direct) Method: (By Direct Homogeneous, Spectrophotometry)	88	mg/dl	(85 - 150)
VLDL	37	mg/dl	(5 - 40)
LDL & HDL Ratio Method: (By Calculated)	2.20		(1.5 - 3.5)
Total Cholestrol & HDL Ratio Method: (By Calculated)	4.13		Low Risk(0 - 3) High Risk(5 - 10)




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Dr. Richa Verma
 MBBS, MD (Pathology)

P.T.O.


Name : SUMEDHA .
Age/Gender : 35 Years/Female
UHID : QL303245586
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Test Particular	Result	Unit	Biological Reference Interval
<u>LFT :-</u>			
Serum Bilirubin (Total) Method: (By Diphylline, Diazonium Salt)	0.5	mg/dl	(0.2 - 1.3)
Serum Bilirubin (Direct) Method: (By Diphylline, Diazonium Salt)	0.1	mg/dl	(0.1 - 0.4)
Serum Bilirubin (Indirect)	0.40000	mg/dl	(0.2-1.1)
S G O T (AST) Method: By IFCC	22.9	u/l	(14 - 36)
S G P T (ALT) Method: By IFCC	21.2	u/l	(9 - 52)
Serum Alkaline Phosphate (ALP) Method: By IFCC	95.2	u/l	Adult (38 - 126)
Serum Protein Method: By Biuret Method	6.4	gm/dl	Adult(6.2 - 8.2) Children(5.6 - 8.4)
Serum Albumin Method: By BCG, Dye Binding Method	4.0	gm/dl	Newborn Children(2.4 - 4.8) Adult(3.5 - 5.0)
Serum Globulin	2.40		Adult(2.3 - 3.6)
Serum Albumin / Globulin (A / G) Method: By BCG	1.67	gm/dl	(1 - 2.3)
Serum Phosphorus Method: SPECTROPHOTOMETRY	4.1	mg/dl	(2.5 - 4.5)
<u>HBA1C (Nephelometry)</u>			
HBA1C Method: HPLC	6.7	%	Non diabetic level(< 6.0) Goal(< 7.0) Action Suggested(> 8.0)
Average Blood Glucose (eAg)	146.30	mg/dl	




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Test Particular	Result	Unit	Biological Reference Interval
<u>KFT</u>			
Serum Urea Method: GLDH,Kinetic Assay	20.4	mg/dl	Adult (17 - 43) New Born (8.4 - 25.8) Infant (10.8 - 38.4)
Serum Creatinine Method: Modified Jaffe, Kinetic	0.8	mg/dl	Female : (0.55 - 1.02) Neonate : (0.26 - 1.01) Infant { 2months - less than 3 yrs } : (0.15 - 0.37) Children { 3 yrs - less than 15 yrs } : (0.24 - 0.73)
Serum Sodium (Na+) Method: By Indirect ISE	134.1	mmol/L	(136 - 145)
Serum Potassium (K+) Method: By Indirect ISE	4.4	mmol/L	(3.5 - 5.1)
Serum Chloride Method: (By Ion-selective Electrode)	100.6	mmol/L	(98 - 107)
Serum Uric Acid Method: By uricase-Colorimetric	3.6	mg/dl	(3.5 - 8.5)
<u>E.S.R.</u>			
1st. Hr. E.S. R. Method: WESTERGRENS METHOD	22	mm	(< 20)




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Age/Gender : 35 Years/Female
UHID : QL303245586
Refer By :
Wing : BERLIN GENERAL HOSPITAL RANCHI
Client Name : BDDC - CGHS

Reg.No. : 
240321QLBG021
Reg.Date : 21-Mar-24 02:12 PM
Received On : 21-Mar-24 02:12 PM
Reported On : 21-Mar-24 03:49 PM

Test Particular	Result	Unit	Biological Reference Interval
CBC :-			
Haemoglobin Method: (By Sahli's Method)	13.3	gm%	Adult Men (13 - 18) Adult Women (11.5 - 16.5) Children (11 - 13) Children (1-6) : (12 - 14) Children (6-12) : (12 - 14)
P. C. V.	42.4	%	(35 - 45)
Total Platelet Count	1.6	Lacs Per cmm	(1.5 - 4)
Total R. B. C. Count	5.2	mill./uL	Women (4.2 - 5.4) Male (4.7 - 6.1) Children (4.6 - 4.8)
Total W. B. C. Count Method: Flow Cytometry	9,300	Per cmm	Adult :-Adult :- (4,000 - 11,000) New Born (10,000 - 26,000) (1-4) Years : (6,000 - 18,000) (5-7) Years : (5,000 - 15,000) (8-12) Years : (4,500 - 12,500)
M. C. V.	82.0	fl	(76 - 96)
MCH	25.7	pg	(22 - 32)
MCHC	31.4	g/dl	(30 - 35)
Neutrophils	70	%	(40 - 70)
Eosinophils	06	%	(0.5 - 7)
Basophils	00	%	(0 - 1)
Lymphocytes	22	%	(15 - 40)
Monocytes	02	%	(0 - 6)




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Richa Verma
Dr. Richa Verma
MBBS, MD (Pathology)

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240321QLBG021
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Reported On : 22-Mar-24 12:31 PM

Test Particular	Result	Unit	Biological Reference Interval
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Blood Grouping

Grouping (O)
Rh Typing (D) Positive




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Reported On : 21-Mar-24 09:00 PM

URINE RM

Particular	Findings	Unit	Biological Reference Interval
PHYSICAL			
Colour	Straw		
Transparency	Clear		
Deposite	Nil		
Sp Gravity	xx		
Reaction	Acidic		
CHEMICAL			
Sugar	Nil	gm%	
Protein	xx		
pH	xx		
Ketone	xx		
Blood	xx		
Albumin	Nil		
Phosphate	Nil		
MICROSCOPIC			
RBC	0-1	/HPF	
Pus Cells	0-2	/HPF	
Epith Cells	1-2	/HPF	
Bacteria	Nil		
Casts	Nil	/HPF	
Crystals	Nil	/HPF	
Yeast	Nil		
Spermatozoa	Nil	/HPF	



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End Of Report