

Name : Mrs. A sreevani
PID No. : MED111492293 Register On : 11/02/2023 10:01 AM
SID No. : 423007845 Collection On : 11/02/2023 11:01 AM
Age / Sex : 25 Year(s)/ Female Report On : 11/02/2023 5:36 PM
Type : OP Printed On : 11/02/2023 7:08 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

HAEMATOLOGY

Complete Blood Count With - ESR

Haemoglobin (EDTA Blood/Spectrophotometry)	12.51	g/dL	12.5 - 16.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood)	38.5	%	37 - 47
RBC Count (EDTA Blood)	4.41	mill/cu.mm	4.2 - 5.4
Mean Corpuscular Volume(MCV) (EDTA Blood)	87.2	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood)	28.4	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood)	32.5	g/dL	32 - 36
RDW-CV (EDTA Blood)	13.7	%	11.5 - 16.0
RDW-SD (EDTA Blood)	41.81	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood)	6670	cells/cu.mm	4000 - 11000
Neutrophils (EDTA Blood)	50	%	40 - 75
Lymphocytes (EDTA Blood)	40	%	20 - 45
Eosinophils (EDTA Blood)	5.0	%	01 - 06


DR SHAMIM JAVED
MD PATHOLOGY
KMC 88902
APPROVED BY

Name : Mrs. A sreevani
PID No. : MED111492293 **Register On** : 11/02/2023 10:01 AM
SID No. : 423007845 **Collection On** : 11/02/2023 11:01 AM
Age / Sex : 25 Year(s) / Female **Report On** : 11/02/2023 5:36 PM
Type : OP **Printed On** : 11/02/2023 7:08 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Monocytes (EDTA Blood)	5.0	%	01 - 10
Basophils (Blood)	0.0	%	00 - 02
INTERPRETATION: Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.			
Absolute Neutrophil count (EDTA Blood)	3.33	10 ³ / µl	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood)	2.67	10 ³ / µl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood)	0.33	10 ³ / µl	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood)	0.33	10 ³ / µl	< 1.0
Absolute Basophil count (EDTA Blood)	0.00	10 ³ / µl	< 0.2
Platelet Count (EDTA Blood)	260.2	10 ³ / µl	150 - 450
MPV (EDTA Blood)	8.73	fL	8.0 - 13.3
PCT (EDTA Blood/Automated Blood cell Counter)	0.23	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Citratd Blood)	2	mm/hr	< 20


DR SHAMIM JAVED
 MD PATHOLOGY
 KMC 88902
APPROVED BY

Name : Mrs. A sreevani
PID No. : MED111492293 **Register On** : 11/02/2023 10:01 AM
SID No. : 423007845 **Collection On** : 11/02/2023 11:01 AM
Age / Sex : 25 Year(s) / Female **Report On** : 11/02/2023 5:36 PM
Type : OP **Printed On** : 11/02/2023 7:08 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

BIOCHEMISTRY

Liver Function Test

Bilirubin(Total) (Serum/DCA with ATCS)	0.24	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.15	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.09	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	11.15	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	11.75	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	15.39	U/L	< 38
Alkaline Phosphatase (SAP) (Serum/Modified IFCC)	60.0	U/L	42 - 98
Total Protein (Serum/Biuret)	7.35	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.83	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.52	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.92		1.1 - 2.2


DR JUSTINA WILLIAMS
 Senior Consultant Pathologist
 Reg No: PNB20080000054 KTK

VERIFIED BY


DR SHAMIM JAVED
 MD PATHOLOGY
 KMC 88902

APPROVED BY

Name : Mrs. A sreevani
PID No. : MED111492293 **Register On** : 11/02/2023 10:01 AM
SID No. : 423007845 **Collection On** : 11/02/2023 11:01 AM
Age / Sex : 25 Year(s) / Female **Report On** : 11/02/2023 5:36 PM
Type : OP **Printed On** : 11/02/2023 7:08 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>Lipid Profile</u>			
Cholesterol Total (Serum/CHOD-PAP with ATCS)	161.33	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	75.50	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

INTERPRETATION: The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the usual circulating level of triglycerides during most part of the day.

HDL Cholesterol (Serum/Immunoinhibition)	38.00	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 50 - 59 High Risk: < 50
LDL Cholesterol (Serum/Calculated)	108.2	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	15.1	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	123.3	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220


DR JUSTINA WILLIAMS
 Senior Consultant Pathologist
 Reg No: PNB20080000054 KTK

VERIFIED BY


DR SHAMIM JAVED
 MD PATHOLOGY
 KMC 88902

APPROVED BY

Name : Mrs. A sreevani
PID No. : MED111492293 **Register On** : 11/02/2023 10:01 AM
SID No. : 423007845 **Collection On** : 11/02/2023 11:01 AM
Age / Sex : 25 Year(s) / Female **Report On** : 11/02/2023 5:36 PM
Type : OP **Printed On** : 11/02/2023 7:08 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

INTERPRETATION: 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.
 2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	4.2		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
---	-----	--	--


Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	2		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
--	---	--	--

LDL/HDL Cholesterol Ratio (Serum/Calculated)	2.8		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
---	-----	--	---



DR JUSTINA WILLIAMS
 Senior Consultant Pathologist
 Reg No: PNB20080000054 KTK

VERIFIED BY



DR SHAMIM JAVED
 MD PATHOLOGY
 KMC 88902

APPROVED BY

Name : Mrs. A sreevani
PID No. : MED111492293 **Register On** : 11/02/2023 10:01 AM
SID No. : 423007845 **Collection On** : 11/02/2023 11:01 AM
Age / Sex : 25 Year(s)/ Female **Report On** : 11/02/2023 5:36 PM
Type : OP **Printed On** : 11/02/2023 7:08 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>Glycosylated Haemoglobin (HbA1c)</u>			
HbA1C (Whole Blood/HPLC)	6.0	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

INTERPRETATION: If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

Estimated Average Glucose 125.5 mg/dL
(Whole Blood)


INTERPRETATION: 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 glyceimic control as compared to blood and urinary glucose determinations.
 Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.
 Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.



DR JUSTINA WILLIAMS
 Senior Consultant Pathologist
 Reg No: PNB20080000054 KTK

VERIFIED BY



DR SHAMIM JAVED
 MD PATHOLOGY
 KMC 88902

APPROVED BY

Name : Mrs. A sreevani
PID No. : MED111492293 Register On : 11/02/2023 10:01 AM
SID No. : 423007845 Collection On : 11/02/2023 11:01 AM
Age / Sex : 25 Year(s) / Female Report On : 11/02/2023 5:36 PM
Type : OP Printed On : 11/02/2023 7:08 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

IMMUNOASSAY

THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total (Serum/ECLIA)	1.15	ng/ml	0.7 - 2.04
--	------	-------	------------

INTERPRETATION:

Comment :

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Tyroxine) - Total (Serum/ECLIA)	6.95	µg/dl	4.2 - 12.0
--	------	-------	------------

INTERPRETATION:

Comment :

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

TSH (Thyroid Stimulating Hormone) (Serum/ECLIA)	2.93	µIU/mL	0.35 - 5.50
--	------	--------	-------------

INTERPRETATION:

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5

2 nd trimester 0.2-3.0

3 rd trimester : 0.3-3.0

(Indian Thyroid Society Guidelines)

Comment :

1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.

2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.

3.Values&lt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.


Dr RAVIKUMAR R
MBBS, MD BIOCHEMISTRY
CONSULTANT BIOCHEMIST
Reg No : 78771

APPROVED BY

Name : Mrs. A sreevani
PID No. : MED111492293 **Register On** : 11/02/2023 10:01 AM
SID No. : 423007845 **Collection On** : 11/02/2023 11:01 AM
Age / Sex : 25 Year(s) / Female **Report On** : 11/02/2023 5:36 PM
Type : OP **Printed On** : 11/02/2023 7:08 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
----------------------	-----------------------	-------------	--------------------------------------

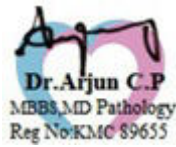
CLINICAL PATHOLOGY

PHYSICAL EXAMINATION (URINE COMPLETE)

Colour (Urine)	Slightly red		Yellow to Amber
Appearance (Urine)	Light turbid		Clear
Volume(CLU) (Urine)	30		

CHEMICAL EXAMINATION (URINE COMPLETE)

pH (Urine)	5.5		4.5 - 8.0
Specific Gravity (Urine)	1.022		1.002 - 1.035
Ketone (Urine)	Negative		Negative
Urobilinogen (Urine)	Normal		Normal
Blood (Urine)	Positive(++++)		Negative
Nitrite (Urine)	Negative		Negative
Bilirubin (Urine)	Negative		Negative
Protein (Urine)	Negative		Negative



APPROVED BY

Name : Mrs. A sreevani
PID No. : MED111492293 **Register On** : 11/02/2023 10:01 AM
SID No. : 423007845 **Collection On** : 11/02/2023 11:01 AM
Age / Sex : 25 Year(s) / Female **Report On** : 11/02/2023 5:36 PM
Type : OP **Printed On** : 11/02/2023 7:08 PM
Ref. Dr : MediWheel

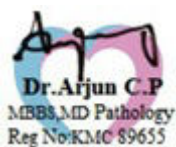
<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Glucose (Urine/GOD - POD)	Negative		Negative
Leukocytes(CP) (Urine)	Positive(+)		

MICROSCOPIC EXAMINATION
(URINE COMPLETE)

Pus Cells (Urine)	2-5	/hpf	NIL
Epithelial Cells (Urine)	1-3	/hpf	NIL
RBCs (Urine)	Plenty	/HPF	NIL
Others (Urine)	Bacteria present		

INTERPRETATION:Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.

Casts (Urine)	NIL	/hpf	NIL
Crystals (Urine)	NIL	/hpf	NIL



APPROVED BY

Name : Mrs. A sreevani
PID No. : MED111492293 Register On : 11/02/2023 10:01 AM
SID No. : 423007845 Collection On : 11/02/2023 11:01 AM
Age / Sex : 25 Year(s) / Female Report On : 11/02/2023 5:36 PM
Type : OP Printed On : 11/02/2023 7:08 PM
Ref. Dr : MediWheel

Investigation

Observed
Value

Unit

Biological
Reference Interval

IMMUNOHAEMATOLOGY

BLOOD GROUPING AND Rh TYPING
(EDTA Blood/Agglutination)

'B' 'Positive'


Dr RAVIKUMAR R
MBBS, MD BIOCHEMISTRY
CONSULTANT BIOCHEMIST
Reg No : 78771

APPROVED BY

Name : Mrs. A sreevani
PID No. : MED111492293 **Register On** : 11/02/2023 10:01 AM
SID No. : 423007845 **Collection On** : 11/02/2023 11:01 AM
Age / Sex : 25 Year(s)/ Female **Report On** : 11/02/2023 5:36 PM
Type : OP **Printed On** : 11/02/2023 7:08 PM
Ref. Dr : MediWheel

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>BIOCHEMISTRY</u>			
BUN / Creatinine Ratio	22.3		6.0 - 22.0
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	90.06	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

INTERPRETATION: Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose, Fasting (Urine) (Urine - F/GOD - POD)	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP)	83.34	mg/dL	70 - 140

INTERPRETATION:

Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti-diabetic medication during treatment for Diabetes.


Urine Glucose(PP-2 hours) (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	13.2	mg/dL	7.0 - 21
Creatinine (Serum/Modified Jaffe)	0.59	mg/dL	0.6 - 1.1

INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin ,cefazolin, ACE inhibitors ,angiotensin II receptor antagonists,N-acetylcyteine , chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Enzymatic)	3.70	mg/dL	2.6 - 6.0
--------------------------------	------	-------	-----------


DR JUSTINA WILLIAMS
 Senior Consultant Pathologist
 Reg No: PNB20080000054 KTK

VERIFIED BY


DR SHAMIM JAVED
 MD PATHOLOGY
 KMC 88902

APPROVED BY

-- End of Report --

Name : Mrs. A sreevani

PID No. : MED111492293

Register On : 11/02/2023 10:01 AM

SID No. : 423007845

Collection On : 11/02/2023 11:01 AM

Age / Sex : 25 Year(s) / Female

Report On : 11/02/2023 5:36 PM

Type : OP

Printed On : 11/02/2023 7:08 PM

Ref. Dr : MediWheel

CLUMAX DIAGNOSTICS



--- A MEDALL COMPANY ---

CUSTOMER CHECKLIST

Date 11-Feb-2023 10:00 AM

Customer Name : **MRS.A SREEVANI**

DOB : **26 Jul 1997**

Ref Dr Name : **MediWheel**

Age : **25Y/FEMALE**

Customer Id : **MED111492293**



Visit ID : 423007845

MED111492293

Email Id :

Phone No : **9742399464**


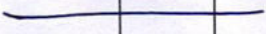



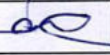
Corp Name : MediWheel

Address :

MS done

Package Name : **Mediwheel Full Body Health Checkup Female Below 40**

S.No	Modality	Study	Accession No	Time	Seq	Signature
1	LAB	BLOOD UREA NITROGEN (BUN)				
2	LAB	CREATININE				
3	LAB	GLUCOSE - FASTING				
4	LAB	GLUCOSE - POSTPRANDIAL (2 HRS)				
5	LAB	GLYCOSYLATED HAEMOGLOBIN (HbA1c)				
6	LAB	URIC ACID				
7	LAB	LIPID PROFILE				
8	LAB	LIVER FUNCTION TEST (LFT)				
9	LAB	THYROID PROFILE/ TFT(T3, T4, TSH)				
10	LAB	URINE GLUCOSE - FASTING				
11	LAB	URINE GLUCOSE - POSTPRANDIAL (2 Hrs)				
12	LAB	COMPLETE BLOOD COUNT WITH ESR				
13	LAB	STOOL ANALYSIS - ROUTINE				
14	LAB	URINE ROUTINE				
15	LAB	BUN/CREATININE RATIO				

16	LAB	BLOOD GROUP & RH TYPE (Forward Reverse)				
17	ECG	ECG	IND13683891138			
18	OTHERS	Treadmill / 2D Echo	IND136838914690			
19	OTHERS	physical examination	IND136838915279			
20	US	ULTRASOUND ABDOMEN	IND136838915292			
21	OTHERS	EYE CHECKUP	IND136838917756			
22	X-RAY	X RAY CHEST	IND136838918659			
23	OTHERS	Consultation Physician	IND136838918736			

Registered By

(HARI.O)

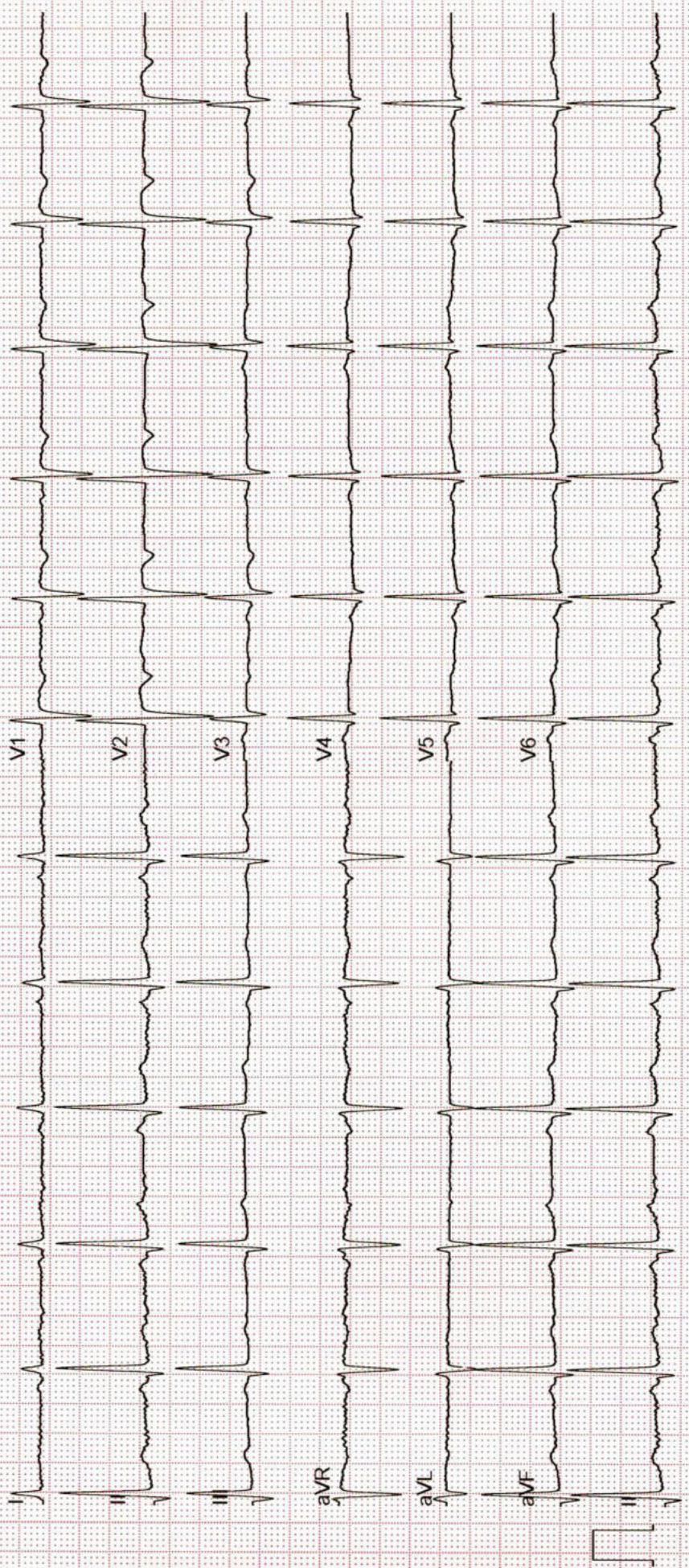
A. Sreevani
ID: MED111492293

25 Years
Female

QRS : 90 ms
QT / QTcBaz : 388 / 421 ms
PR : 118 ms
P : 76 ms
RR / PP : 846 / 845 ms
P / QRS / T : 50 / 73 / 59 degrees

11.02.2023 13:41:25
CLUMAX DIAGNOSTICS
THIPPASANDRA
BANGALORE

71 bpm
-- / -- mmHg



Mahesh

Mob:8618385220

9901569756



SRI PARVATHI OPTICS

Multi Branded Optical Store

Computerized Eye Testing & Spectacles Clinic

333.8th Main 5th Cross Near Cambridge & Miranda School HAL 3rd Stage
Behind Vishveshvariah Park New Thippasandra, Bangalore - 560075,
Email: parvathiopticals@gmail.com / www.sriparvathioptics.in

SPECTACLE PRESCRIPTION

Name: *Steerani*

No. **2353**

Mobil No:

Date: *11/2/2023*

Age / Gender *25y / f.*

Ref. No.

	RIGHT EYE				LEFT EYE			
	SPH	CYL	AXIS	VISION	SPH	CYL	AXIS	VISION
DISTANCE	<i>Plano</i>			<i>6/6</i>	<i>Plano</i>			<i>6/6</i>
NEAR								

PD *66mm*

Advice to use glasses for:

DISTANCE FAR & NEAR READING COMPUTER PURPOSE

We Care Your Eyes

SRI PARVATHI OPTICS

NEW THIPPASANDRA

Name	MRS.A SREEVANI	ID	MED111492293
Age & Gender	25Y/FEMALE	Visit Date	11 Feb 2023
Ref Doctor Name	MediWheel		

2 D ECHOCARDIOGRAPHIC STUDY

M mode measurement:

AORTA	:	2.7cms
LEFT ATRIUM	:	2.9cms
AVS	:	----
LEFT VENTRICLE (DIASTOLE)	:	3.7cms
(SYSTOLE)	:	2.5cms
VENTRICULAR SEPTUM (DIASTOLE)	:	0.9cms
(SYSTOLE)	:	1.2cms
POSTERIOR WALL (DIASTOLE)	:	0.6cms
(SYSTOLE)	:	1.2cms
EDV	:	57ml
ESV	:	21ml
FRACTIONAL SHORTENING	:	33%
EJECTION FRACTION	:	63%
EPSS	:	---
RVID	:	1.9cms

DOPPLER MEASUREMENTS:

MITRAL VALVE	:	E' 0.95 m/s	A' 0.61 m/s	NO MR
AORTIC VALVE	:	1.02 m/s		NO AR
TRICUSPID VALVE	:	E' - m/s	A' - m/s	NO TR
PULMONARY VALVE	:	0.96 m/s		NO PR

Name	MRS.A SREEVANI	ID	MED111492293
Age & Gender	25Y/FEMALE	Visit Date	11 Feb 2023
Ref Doctor Name	MediWheel		

2D ECHOCARDIOGRAPHY FINDINGS:

Left ventricle : Normal size, Normal systolic function.
No regional wall motion abnormalities.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Mitral valve : Normal, No mitral valve prolapsed.

Aortic valve : Normal, Trileaflet.

Tricuspid valve : Normal.

Pulmonary valve : Normal.

IAS : Intact.

IVS : Intact.

Pericardium : No pericardial effusion.

IMPRESSION:

- **NORMAL SIZED CARDIAC CHAMBERS.**
- **NORMAL LV SYSTOLIC FUNCTION. EF: 63%.**
- **NO REGIONAL WALL MOTION ABNORMALITIES.**
- **NORMAL VALVES.**
- **NO CLOTS / PERICARDIAL EFFUSION / VEGETATION.**

DR. K.S. SUBRAMANI. MBBS, MD, DM (CARDIOLOGY) FESC
SENIOR CONSULTANT INTERVENTIONAL CARDIOLOGIST
Kss/da

Name	MRS.A SREEVANI	ID	MED111492293
Age & Gender	25Y/FEMALE	Visit Date	11 Feb 2023
Ref Doctor Name	MediWheel		

Note:

- * Report to be interpreted by qualified medical professional.**
- * To be correlated with other clinical findings.**
- * Parameters may be subjected to inter and intra observer variations.**
- * Any discrepancy in reports due to typing errors should be corrected as soon as possible.**

Name	MRS.A SREEVANI	ID	MED111492293
Age & Gender	25Y/FEMALE	Visit Date	11 Feb 2023
Ref Doctor Name	MediWheel		

ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER shows normal in shape, size and has uniform echopattern. No evidence of focal lesion or intrahepatic biliary ductal dilatation. Hepatic and portal vein radicals are normal.

GALL BLADDER shows normal shape and has clear contents. Gall bladder wall is of normal thickness. CBD is of normal calibre.

PANCREAS has normal shape, size and uniform echopattern. No evidence of ductal dilatation or calcification.

SPLEEN shows normal shape, size and echopattern. No demonstrable Para -aortic lymphadenopathy.

KIDNEYS move well with respiration and have normal shape, size and echopattern. Cortico- medullary differentiations are well made out. No evidence of calculus or hydronephrosis.

The kidney measures as follows:

	Bipolar length (cms)	Parenchymal thickness (cms)
Right Kidney	10.5	1.2
Left Kidney	9.7	1.1

URINARY BLADDER shows normal shape and wall thickness. It has clear contents. No evidence of diverticula.

UTERUS is anteverted and normal in size. It has uniform myometrial echopattern.

Endometrial thickness measures 4mm

Uterus measures as follows: LS: 7.3cms AP: 2.7cms TS: 4.8cms.

OVARIES are normal in size, shape and echotexture. No focal lesion seen on the right side.

Ovaries measure as follows:

Right ovary: 2.5 x 2.0cms

Left ovary: 3.9 x 2.5cms and shows a cyst measuring about 2.2 x 2.6cms with low level internal echoes.

POD & adnexae are free.

No evidence of ascites/pleural effusion.

IMPRESSION:

- **LEFT OVARIAN SMALL CYSTIC LESION WITH INTERNAL ECHOES PROBABLY ENDOMETRIOTIC/ HAEMORRHAGIC.**

***Suggest follow up.**

Name	MRS.A SREEVANI	ID	MED111492293
Age & Gender	25Y/FEMALE	Visit Date	11 Feb 2023
Ref Doctor Name	MediWheel		

DR. APARNA
CONSULTANT RADIOLOGIST
A/da

Name	A sreevani	Customer ID	MED111492293
Age & Gender	25Y/F	Visit Date	Feb 11 2023 10:00AM
Ref Doctor	MediWheel		

X - RAY CHEST PA VIEW

Bilateral lung fields appear normal.

Cardiac size is within normal limits.

Bilateral hilar regions appear normal.

Bilateral domes of diaphragm and costophrenic angles are normal.

Visualised bones and soft tissues appear normal.

Impression: Essentially normal study.



DR. APARNA

CONSULTANT RADIOLOGIST