Patient Name: Ms Anukampa Das MRN: 17510001174653 Gender/Age: FEMALE, 35y (30/01/1988)

Collected On: 03/04/2023 01:34 PM Received On: 03/04/2023 02:24 PM Reported On: 03/04/2023 03:12 PM

Barcode: 802304030697 Specimen: Plasma Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 7978794533

CLINICAL CHEMISTRY

TestResultUnitBiological Reference IntervalPost Prandial Blood Sugar (PPBS) (Glucose107mg/dLNormal: 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

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.
 (Post Prandial Blood Sugar (PPBS) -> Auto Authorized)





Patient Name: Ms Anukampa Das MRN: 17510001174653 Gender/Age: FEMALE, 35y (30/01/1988)

Collected On: 03/04/2023 09:03 AM Received On: 03/04/2023 12:07 PM Reported On: 03/04/2023 02:49 PM

Barcode: 802304030274 Specimen: Urine Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 7978794533

CLINICAL CHEMISTRY

Test Result Unit Biological Reference Interval

Urine For Sugar NEGATIVE mg ATEST

-- End of Report-

8

Dr. Rakhi Mandal MD, Pathology Consultant Pathology MBBS, MD

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





Patient Name: Ms Anukampa Das MRN: 17510001174653 Gender/Age: FEMALE, 35y (30/01/1988)

Collected On: 03/04/2023 09:03 AM Received On: 03/04/2023 11:55 AM Reported On: 03/04/2023 12:54 PM

Barcode: 822304030021 Specimen: Urine Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 7978794533

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Volume	50	ml	-
Colour	Straw	-	-
Appearance	Cloudy	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (Mixed PH Indicator)	5.5	-	4.8-7.5
Sp. Gravity (Dual Wavelength Reflectance)	1.004	-	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)	Negative	-	Negative
Blood Urine (Pseudo - Enzymatic Test, Organic Peroxidase And Chromogen)	Trace	-	-
Nitrite (Modified Griess Reaction)	Negative	-	Negative

Patient Name: Ms Anukampa Das	MRN: 17510001174653	Gender/Age: FEMALE, 3	35y (30/01/1988)	
MICROSCOPIC EXAMINATION				
Pus Cells	4-6	/hpf	1-2	
RBC	0-2	/hpf	0 - 3	
Epithelial Cells	2-4	/hpf	2-3	
Crystals	NIL	-	-	
Casts	NIL	-	-	

--End of Report-



Dr. Sanjib Kumar Pattari

MD, Pathology

Consultant Pathology MBBS, MD. Reg No: 53635 (WBMC)

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





Patient Name: Ms Anukampa Das MRN: 17510001174653 Gender/Age: FEMALE, 35y (30/01/1988)

Collected On: 03/04/2023 09:03 AM Received On: 03/04/2023 09:24 AM Reported On: 03/04/2023 11:04 AM

Barcode: 802304030273 Specimen: Serum Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 7978794533

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric -Diazo Method)	0.99	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.20	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Colorimetric Endpoint)	0.79	-	-
Total Protein (Biuret Method)	8.60 H	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.40	gm/dL	3.5-5.0
Serum Globulin (Calculated)	4.2 H	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.05	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	40 H	U/L	14.0-36.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	54 H	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	66	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	18	U/L	12.0-43.0

Patient Name: Ms Anukampa Das MRN: 17510001174653 Gender/Age: FEMALE, 35y (30/01/1988)

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

Alphosh

CLINICAL CHEMISTRY

	CLINICAL CHE	VIISTRY	
Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.69	mg/dL	0.52-1.04
eGFR	96.9	mL/min/1.73m ²	-
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease)	12.57	-	7.0-17.0
Serum Sodium (Direct ISE - Potentiometric)	137	mmol/L	137.0-145.0
Serum Potassium (Direct ISE - Potentiometric)	4.6	mmol/L	3.5-5.1
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	192	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic Endpoint Colorimetric)	160	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	54	mg/dL	40.0-60.0
Non-HDL Cholesterol	138.0	-	-
LDL Cholesterol (Non LDL Selective Elimination, CHOD/POD)	93.30	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190

Patient Name : Ms Anukampa Das	MRN: 17510001174653	Gender/Age: FEMALE, 3	35y (30/01/1988)
VLDL Cholesterol (Calculated)	32.0	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	3.6	-	-

-- End of Report-

Dr. Debasree Biswas MD, Biochemistry

Clinical Biochemist MBBS, MD

Note

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

(CR -> Auto Authorized)

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

AS THE PROPERTY OF THE PROPERT

Dr. Sujata Ghosh

PhD, Biochemistry

Biochemist M.Sc, Ph. D



Patient Name: Ms Anukampa Das MRN: 17510001174653 Gender/Age: FEMALE, 35y (30/01/1988)

Collected On: 03/04/2023 09:03 AM Received On: 03/04/2023 09:24 AM Reported On: 03/04/2023 10:45 AM

Barcode: 802304030273 Specimen: Serum Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 7978794533

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.11	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	7.75	μg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	3.346	uIU/mI	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

Note

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

(-> Auto Authorized)



Patient Name: Ms Anukampa Das MRN: 17510001174653 Gender/Age: FEMALE, 35y (30/01/1988)

Collected On: 03/04/2023 09:03 AM Received On: 03/04/2023 05:05 PM Reported On: 04/04/2023 01:51 PM

Barcode: 872304030004 Specimen: Fluid & Swab Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 7978794533

CYTOLOGY

CERVICAL SMEAR FOR CYTOLOGY

LAB NO	GC-306/23
MATERIAL RECEIVED	Received unstained smears
SPECIMEN TYPE	Cervical smear
SMEAR ADEQUACY	Smears are satisfactory for evaluation
MICROSCOPIC EXAMINATION	The 2014 Bethesda system for reporting. Smears studied show mainly superficial squamous cells, intermediate squamous cells and parabasal cells. Few metaplastic cells are seen. Monilia and T. vaginalis are absent. Dysplastic and malignant cells are absent. Mild infiltrate of inflammatory cells are seen in the smears.
IMPRESSION	Negative for intraepithelial lesion or malignancy

-- End of Report-



Dr. Sanjib Kumar Pattari

MD, Pathology

Consultant Pathology MBBS, MD. Reg No: 53635 (WBMC)

Patient Name: Ms Anukampa Das MRN: 17510001174653 Gender/Age: FEMALE, 35y (30/01/1988)

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





Patient Name: Ms Anukampa Das MRN: 17510001174653 Gender/Age: FEMALE, 35y (30/01/1988)

Collected On: 03/04/2023 09:03 AM Received On: 03/04/2023 09:24 AM Reported On: 03/04/2023 10:29 AM

Barcode: 802304030276 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 7978794533

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	5.0	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	96.8	-	-

Interpretation:

- 1. 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.
- 2. 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.
- 3. 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

Shosh

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





Final Report

DEPARTMENT OF LABORATORY MEDICINE

Patient Name: Ms Anukampa Das MRN: 17510001174653 Gender/Age: FEMALE, 35y (30/01/1988)

Collected On: 03/04/2023 09:03 AM Received On: 03/04/2023 11:14 AM Reported On: 03/04/2023 12:33 PM

Barcode: BR2304030024 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 7978794533

IMMUNOHAEMATOLOGY

Test Result Unit

BLOOD GROUP & RH TYPING

Blood Group (Column Agglutination Technology) B

RH Typing (Column Agglutination Technology) Positive

-- End of Report-

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

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





Patient Name: Ms Anukampa Das MRN: 17510001174653 Gender/Age: FEMALE, 35y (30/01/1988)

Collected On: 03/04/2023 09:03 AM Received On: 03/04/2023 09:23 AM Reported On: 03/04/2023 10:06 AM

Barcode: 802304030275 Specimen: Plasma Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 7978794533

CLINICAL CHEMISTRY

Test Result Unit Biological Reference Interval

Fasting Blood Sugar (FBS) (Glucose Oxidase, 121 H mg/dL Normal: 70-99

Peroxidase)

Fasting Blood Sugar (FBS) (Glucose Oxidase, Pre-diabetes: 100-125 Pre-diabetes: 121 H Pre-diabetes: 100-125 Pre-diabetes: 126 ADA standards 2019

-- End of Report-

Dr. Debasree Biswas MD, Biochemistry

Clinical Biochemist MBBS, MD

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

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.
 (Fasting Blood Sugar (FBS) -> Auto Authorized)





Patient Name: Ms Anukampa Das MRN: 17510001174653 Gender/Age: FEMALE, 35y (30/01/1988)

Collected On: 03/04/2023 09:03 AM Received On: 03/04/2023 09:24 AM Reported On: 03/04/2023 10:44 AM

Barcode: 812304030212 Specimen: Whole Blood - ESR Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 7978794533

HAEMATOLOGY LAB

Test Result Unit Biological Reference Interval

Erythrocyte Sedimentation Rate (ESR) 55.0 H mm/1hr 0.0-12.0

(Modified Westergren Method)

-- End of Report-



Dr. Sanjib Kumar Pattari

MD, Pathology

Consultant Pathology MBBS, MD. Reg No: 53635 (WBMC)

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





Patient Name: Ms Anukampa Das MRN: 17510001174653 Gender/Age: FEMALE, 35y (30/01/1988)

Collected On: 03/04/2023 09:03 AM Received On: 03/04/2023 09:25 AM Reported On: 03/04/2023 09:48 AM

Barcode: 812304030213 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 7978794533

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	11.5 L	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.29	millions/ μL	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	35.9 L	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	83.7	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	26.9 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.1	%	31.5-34.5
Red Cell Distribution Width (RDW) (Calculated)	17.2 H	%	11.6-14.0
Platelet Count (Electrical Impedance)	222	10 ³ /μL	150.0-400.0
Mean Platelet Volume (MPV) (Derived)	11.9 H	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	9.0	10 ³ /μL	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCSn Technology)	66.9	%	40.0-75.0
Lymphocytes (VCSn Technology)	24.5	%	20.0-40.0
Monocytes (VCSn Technology)	4.9	%	2.0-10.0
Eosinophils (VCSn Technology)	3.1	%	1.0-6.0

Patient Name: Ms Anukampa Das MRN: 1751000	1174653	Gender/Age : FEMALE , 35y (30/	01/1988)
Basophils (VCSn Technology)	0.6	%	0.0-2.0
NRBC (VCSn Technology)	0.1	/100 WBC	-
Absolute Neutrophil Count (Calculated)	6.03	$10^3/\mu$ L	1.8-7.8
Absolute Lympocyte Count (Calculated)	2.21	$10^3/\mu$ L	1.0-4.8
Absolute Monocyte Count (Calculated)	0.45	$10^3/\mu$ L	0.0-0.8
Absolute Eosinophil Count (Calculated)	0.28	$10^3/\mu$ L	0.0-0.45
Absolute Basophil Count (Calculated)	0.06	$10^3/\mu$ 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-

8

Dr. Rakhi Mandal MD, Pathology Consultant Pathology MBBS, MD

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





ADULT TRANS-THORACIC ECHO REPORT

PATIENT NAME : Ms Anukampa Das PATIENT MRN : 17510001174653

GENDER/AGE : Female, 35 Years PROCEDURE DATE : 03/04/2023 02:46 PM

LOCATION :- REQUESTED BY : EXTERNAL

• 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: 66%. 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.

Langula las

Page 1 of 2

DR. SANGEETA DAS CONSULTANT GENERAL MEDICINE MBBS POMPA BISWAS TECHNICIAN

03/04/2023 02:46 PM

 PREPARED BY
 : NITA PAUL(308573)
 PREPARED ON
 : 03/04/2023 03:49 PM

 GENERATED BY
 : MADHUPARNA DASGUPTA(333433)
 GENERATED ON
 : 07/04/2023 03:47 PM

Patient Name	Anukampa Das	Requested By	EXTERNAL
MRN	17510001174653	Procedure DateTime	2023-04-03 11:24:08
Age/Sex	35Y 2M/Female	Hospital	NH-RTIICS

USG OF WHOLE ABDOMEN

LIVER:

It is enlarged in size and moderately hyperechoic in echogenicity. Hypoechoic area $(1.2 \times 1.1 \text{ cm})$ noted in right lobe of liver. The intrahepatic biliary radicles are not dilated.

PORTAL VEIN:

The portal vein is normal in calibre at the porta. There is no intraluminal thrombus.

GALL BLADDER:

It is optimally distended. Echogenic foci noted embedded in fundal gall bladder wall. The wall is mildly thickened (4 mm). Lumen clear.

CBD:

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

SPLEEN:

It is normal in size measuring 11.2 cm and echogenicity. No focal SOL is seen. The splenoportal axis is patent and is normal in dimensions.

PANCREAS:

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

KIDNEYS:

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

Right kidney and left kidney measures 9.6 cm and 9.8 cm respectively.

URINARY BLADDER:

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

UTERUS:

Normal in size measuring $8.0 \times 2.9 \times 3.2$ cm . No focal SOL is seen. The endometrial echoline is central in position. Endometrium is not thickened (and measures 0.44 cm). The cervix appears normal.

OVARIES:

The ovaries are normal in size, shape and echotexture.

The right and left ovaries measures $2.6 \times 1.2 \text{ cm}$ and $2.2 \times 1.5 \text{ cm}$ respectively.

IMPRESSION:

- Hepatomegaly with grade-II fatty liver.
- Hypoechoic area right lobe of liver focal fat sparing area / SOL.
- Features suggestive of adenomyomatosis of gall bladder.

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.

Assist By: Kanta

Dr. Ashish Kumar Consultant Sonologist

* This is a digitally signed valid document. Reported Date/Time: 2023-04-03 11:39:52

Patient Name	Anukampa Das	Requested By	
MRN	17510001174653	Procedure DateTime	2023-04-03 09:56:30
Age/Sex	35Y 2M/Female	Hospital	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.
- No significant lung parenchymal lesion is seen.
- 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

This is only a Radiological Impression and not Diagnosis. Like all diagnostic modalities, X-RAY also has its limitations. Therefore X-RAY 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.

Dr. Sarbari Chatterjee

Consultant Radiologist

* **This is a digitally signed valid document.** Reported Date/Time: 2023-04-03 12:52:57 Page 1 of 1