

CONCLUSION OF HEALTH CHECKUP

ECU Number : 2227	MR Number : 23201936	Patient Name: AKANKSHA SINGH
Age : 34	Sex : Female	Height : 156
Weight : 57	Ideal Weight : 56	BMI : 23.42
Date : 11/03/2023		

Dr. Manish Mittal

Internal Medicine

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.

ECU Number : 2227 MR Number : 23201936 Patient Name: AKANKSHA SINGH
Age : 34 Sex : Female Height : 156
Weight : 57 Ideal Weight : 56 BMI : 23.42
Date : 11/03/2023

Past H/O : P/H/O GB CALCULI.

Present H/O : C/O HYPER ACIDITY.

Family H/O : FATHER : CABG/DIABETES - ON MEDICATION.

Habits : NO HABITS.
Gen.Exam. : G.C GOOD
B.P : 112/74 mm Hg
Pulse : 88/MIN REG.
Others : SPO2 : 98 %
C.V.S : NAD
R.S. : NAD
Abdomen : NP
Spleen : NP
Skin : NAD
C.N.S : NAD
Advice :

ECU Number : 2227
Age : 34
Weight : 57
Date : 11/03/2023

MR Number : 23201936
Sex : Female
Ideal Weight : 56

Patient Name: AKANKSHA SINGH
Height : 156
BMI : 23.42

Ophthalmic Check Up :

Right

Left

Ext Exam

NORMAL

Vision Without Glasses

-

-

Vision With Glasses

6/6 N.5

6/6 N.5

Final Correction

SAME AS PATIENT OWN

SAME AS PATIENT
OWN

Fundus

NORMAL

Colour Vision

NORMAL

Advice

NIL

Orthopaedic Check Up :

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice



ECU Number : 2227

Age : 34

Weight : 57

Date : 11/03/2023

MR Number : 23201936

Sex : Female

Ideal Weight : 56

Patient Name: AKANKSHA SINGH

Height : 156

BMI : 23.42

Gynaec Check Up :

OBSTETRIC HISTORY FTND / FT LSCS

MENSTRUAL HISTORY -

PRESENT MENSTRUAL CYCLE 4TH DAY

PAST MENSTRUAL CYCLE

CHIEF COMPLAINTS

PA

PS

PV

BREAST EXAMINATION RIGHT

BREAST EXAMINATION LEFT

PAPSMEAR

BMD

MAMMOGRAPHY

ADVICE

FOLLOWUP AFTER 1 WEEK FOR PAP SMEAR.

Dietary Assessment

ECU Number : 2227 MR Number : 23201936 Patient Name : AKANKSHA SINGH
Age : 34 Sex : Female Height : 156
Weight : 57 Ideal Weight : 56 BMI : 23.42
Date : 11/03/2023

Body Type : Normal / Underweight / Overweight
Diet History : Vegetarian / Eggetarian / Mixed

Frequency of consuming fried food : / Day / Week or occasional

Frequency of consuming Sweets : / Day / or occasional

Frequency of consuming outside food : / Day / Week or occasional

Amount of water consumed / day : Glasses / liters

Life style assessment :

Physical activity : Active / moderate / Sedentary / Nil

Alcohol intake : Yes / No

Smoking : Yes / No

Allergic to any food : Yes / No

Are you stressed out ? : Yes / No

Do you travel a lot ? : Yes / No

General diet instructions :

Have small frequent meals.

Avoid fatty products like oil, ghee, butter, cheese.

Take salt restricted diet and avoid table salt.

Consume fibrous food regularly like whole grains, Daliya, Oats, Bajra, Flex seeds, Pulses, Fruits and Salads.

Keep changing your cooking oil every three months.

Avoid Maida, Starchy foods and Bakery products.

Consume 1-2 servings of all fruits and vegetables, For Diabetic patients avoid Mango, Chikoo, Banana, Grapes and Custurd apple

Dring 3 to 4 liters (12 - 14 glass) of water daily.

Eat Beetroots, Figs, Almond, Walnut, Dates, Leafy vegetables, roasted Channa and Jeggary (Gur) for Heamoglobin in case of diabetic patient avoid Rasins, Dates and Jeggary

Drink green Tea or black Coffee once in a day.

Do brisk walking daily.



Patient Name : Ms. AKANKSHA SINGH
 Gender / Age : Female / 34 Years 2 Months 2 Days
 MR No / Bill No. : 23201936 / 231071428
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 112237
 Request Date : 11/03/2023 08:01 AM
 Collection Date : 11/03/2023 08:12 AM
 Approval Date : 11/03/2023 11:35 AM

CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	12.0	gm/dL	12 - 15
Red Blood Cell Count (T-RBC)	4.17	mill/cmm	3.8 - 4.8
Hematocrit (HCT)	38.6	%	36 - 46
Mean Corpuscular Volume (MCV)	92.6	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	28.8	pg	27 - 32
MCH Concentration (MCHC)	31.1	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	13.6	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	46.1	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	6.87	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	56	%	40 - 80
Lymphocytes	41	%	20 - 40
Eosinophils	01	%	1 - 6
Monocytes	02	%	2 - 10
Basophils	00	%	0 - 2
Polymorphs (Abs. Value)	3.84	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.81	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.06	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.13	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.03	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.1	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	234	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	16	mm/1 hr	0 - 12

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / repeat may be requested.

365 Days / 24 Hours Laboratory Services

Home Collection Facility Available
(Mon To Sat 8:00 am to 5:00 pm)



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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Ms. AKANKSHA SINGH	Type	: OPD
Gender / Age	: Female / 34 Years 2 Months 2 Days	Request No.	: 112237
MR No / Bill No.	: 23201936 / 231071428	Request Date	: 11/03/2023 08:01 AM
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Location	: OPD	Approval Date	: 11/03/2023 11:35 AM

CBC + ESR

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification. ESR on Ves metic 20, comparable to Westergrens method and in accordance to ICSH reference method.

--- End of Report ---

Dr. Rakesh Vaidya
MD (Path). DCP.

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.



Patient Name : Ms. AKANKSHA SINGH
 Gender / Age : Female / 34 Years 2 Months 2 Days
 MR No / Bill No. : 23201936 / 231071428
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 112237
 Request Date : 11/03/2023 08:01 AM
 Collection Date : 11/03/2023 08:12 AM
 Approval Date : 11/03/2023 01:00 PM

Haematology

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
Blood Group			
ABO system	O		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method

Note :

- This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontro
- This method check's group both on Red blood cells and in Serum for "ABO" group.

--- End of Report ---

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MD (Path). DCP.

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Ms. AKANKSHA SINGH
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Fasting Plasma Glucose

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
<i>Fasting Plasma Glucose</i>			
Fasting Plasma Glucose	86	mg/dL	70 - 110
Post Prandial 2 Hr.Plasma Glucose	90	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimesion

---- End of Report ----

Dr. Sejal Odedra
M.D.Pathology

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / repeat may be requested.





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HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
HbA1c (Glycosylated Hb)			
Glycosylated Hemoglobin (HbA1c)	4.9	%	
estimated Average Glucose (e AG) *	93.93	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

* Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

---- End of Report ----

Dr. Sejal Odedra
M.D.Pathology



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Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides (By Lipase / Glycerol dehydrogenase on RXL Dade Dimension < 150 Normal 150-199 Borderline High 200-499 High > 499 Very High)	102	mg/dL	1 - 150
Total Cholesterol (By enzymatic colorimetric method on RXL Dade Dimension <200 mg/dL - Desirable 200-239 mg/dL - Borderline High > 239 mg/dL - High)	168	mg/dL	1 - 200
HDL Cholesterol (By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 40 Low > 60 High)	35	mg/dL	40 - 60
Non HDL Cholesterol (calculated) (Non- HDL Cholesterol < 130 Desirable 139-159 Borderline High 160-189 High > 191 Very High)	133	mg/dL	1 - 130
LDL Cholesterol (By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High > 189 Very High)	110	mg/dL	1 - 100
VLDL Cholesterol (calculated)	20.4	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	3.14		2.1 - 3.5
T. Ch./HDL Ch. Ratio (Recent NECP / ATP III Guidelines / Classification (mg/dl) :)	4.8		3.5 - 5

---- End of Report ----

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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.32	mg/dL	0 - 1
Bilirubin - Direct	0.08	mg/dL	0 - 0.3
Bilirubin - Indirect	0.24	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	20	U/L	13 - 35
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	25	U/L	14 - 59
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	96	U/L	42 - 98
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	26	U/L	5 - 55
<i>(By IFCC method on RXL Dade Dimension.)</i>			
Total Protein			
Total Proteins	7.79	gm/dL	6.4 - 8.2
Albumin	3.86	gm/dL	3.4 - 5
Globulin	3.93	gm/dL	3 - 3.2
A : G Ratio	0.98		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

---- End of Report ----

Dr. Sejal Odedra
M.D.Pathology



Patient Name : Ms. AKANKSHA SINGH
 Gender / Age : Female / 34 Years 2 Months 2 Days
 MR No / Bill No. : 23201936 / 231071428
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 112237
 Request Date : 11/03/2023 08:01 AM
 Collection Date : 11/03/2023 08:12 AM
 Approval Date : 11/03/2023 10:47 AM

Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	20	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	0.62	mg/dL	0.6 - 1.1
Estimate Glomerular Filtration rate (Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)	More than 60		
Uric acid (By Uricase / Catalase method on RXL Siemens)	4.3	mg/dL	2.2 - 5.8

--- End of Report ---

Dr. Sejal Odedra
M.D.Pathology



Patient Name : Ms. AKANKSHA SINGH
 Gender / Age : Female / 34 Years 2 Months 2 Days
 MR No / Bill No. : 23201936 / 231071428
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 112237
 Request Date : 11/03/2023 08:01 AM
 Collection Date : 11/03/2023 08:12 AM
 Approval Date : 11/03/2023 10:47 AM

Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
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Triiodothyronine (T3)	1.22	ng/ml	
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(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (ng/ml)

1 - 3 days : 0.1 - 7.4
 1-11 months : 0.1 - 2.45
 1-5 years : 0.1 - 2.7
 6-10 years : 0.9 - 2.4
 11-15 years : 0.8 - 2.1
 16-20 years : 0.8 - 2.1
 Adults (20 - 50 years) : 0.7 - 2.0
 Adults (> 50 years) : 0.4 - 1.8
 Pregnancy (in last 5 months) : 1.2 - 2.5

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

Thyroxine (T4)	8.41	mcg/dL	
----------------	------	--------	--

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (mcg/dL)

1 - 3 days : 11.8 - 22.6
 1- 2 weeks : 9.8 - 16.6
 1 - 4 months : 7.2 - 14.4
 4 - 12 months : 7.8 - 16.5
 1-5 years : 7.3 - 15.0
 5 - 10 years : 6.4 - 13.3
 10 - 20 years : 5.6 - 11.7
 Adults / male : 4.6 - 10.5
 Adults / female : 5.5 - 11.0
 Adults (> 60 years) : 5.0 - 10.7

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

Thyroid Stimulating Hormone (US-TSH)	2.95	microIU/ml	
--------------------------------------	------	------------	--

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (microIU/ml)

Infants (1-4 days) : 1.0 - 39
 2-20 weeks : 1.7 - 9.1
 5 months - 20 years : 0.7 - 6.4
 Adults (21 - 54 years) : 0.4 - 4.2
 Adults (> 55 years) : 0.5 - 8.9

Pregnancy :

1st trimester : 0.3 - 4.5
 2nd trimester : 0.5 - 4.6
 3rd trimester : 0.8 - 5.2

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

— End of Report —

Dr. Sejal Odedra
M.D.Pathology



Patient Name : Ms. AKANKSHA SINGH
 Gender / Age : Female / 34 Years 2 Months 2 Days
 MR No / Bill No. : 23201936 / 231071428
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 112237
 Request Date : 11/03/2023 08:01 AM
 Collection Date : 11/03/2023 08:12 AM
 Approval Date : 11/03/2023 02:49 PM

Urine routine analysis (Auto)

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	30	mL	
Colour	Pale Yellow		
Appearance	Clear		
Chemical Examination (By Reagent strip method)			
pH	6.0		
Specific Gravity	1.025		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	2+		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)			
Red Blood Cells	30 - 50	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		
Remarks	Patient is on menstruation of 4th day.		

---- End of Report ----

Dr. Rakesh Vaidya
MD (Path). DCP.



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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23201936 Report Date : 11/03/2023
Request No. : 190056395 11/03/2023 8.01 AM
Patient Name : Ms. AKANKSHA SINGH
Gender / Age : Female / 34 Years 2 Months 2 Days

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

X-Ray Chest AP

Both lung fields are clear.
Both costophrenic sinuses appear clear.
Heart size is normal.
Hilar shadows show no obvious abnormality.
Aorta is normal.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
• NOT VALID FOR MEDICO-LEGAL PURPOSES
• CLINICAL CORRELATION RECOMMENDED

Dr. Priyanka Patel, MD
Consultant Radiologist



H-2015-0287



MC-3004



E-2021-2037



1825



DEPARTMENT OF DIAGNOSTIC RADIOLOGY

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

Patient No. : 23201936 Report Date : 11/03/2023
Request No. : 190056350 11/03/2023 8.01 AM
Patient Name : Ms. AKANKSHA SINGH
Gender / Age : Female / 34 Years 2 Months 2 Days

USG : Abdomen (Excluding Pelvis) Or Upper Abdomen

Liver is normal in size and echopattern. No mass lesion identified. The hepaticveins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows 19mm calculus. Common bile duct measures 4 mm in diameter.

Pancreas shows no obvious abnormality. Tail obscured. Spleen is normal size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

Uterus is anteverted, normal in size and echo pattern. Endometrium thickness is about 5 mm. No obvious mass lesion seen. IUCD noted.

Uterine length : 78 mm.
A.P. : 32 mm.

Both ovaries reveal small follicles.

Urinary bladder is well distended and appears normal.

No ascites.

COMMENT:

GB calculus.

Kindly correlate clinically

Hasani

Dr.Prerna C Hasani, MD
Consultant Radiologist



• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
 • NOT VALID FOR MEDICO-LEGAL PURPOSES
 • CLINICAL CORRELATION RECOMMENDED



Patient No. : 23201936 Report Date : 11/03/2023
Request No. : 190056390 11/03/2023 8.01 AM
Patient Name : Ms. AKANKSHA SINGH
Gender / Age : Female / 34 Years 2 Months 2 Days

Echo Color Doppler

MITRAL VALVE : NORMAL
AORTIC VALVE : TRILEAFLET, NORMAL
TRICUSPID VALVE : NORMAL, NO TR
PULMONARY VALVE : NORMAL
LEFT ATRIUM : NORMAL
AORTA : NORMAL
LEFT VENTRICLE : NORMAL, NO REGIONAL WALL MOTION ABNORMALITY,
LVEF=60%
RIGHT ATRIUM : NORMAL
RIGHT VENTRICLE : NORMAL
I.V.S. : INTACT
I.A.S. : INTACT
PULMONARY ARTERY : NORMAL
PERICARDIUM : NORMAL

COLOUR/DOPPLER FLOW MAPPING : NO LV diastolic dysfunction,
NO AR, MR, TR, NO PAH

FINAL CONCLUSION:

1. ALL CARDIAC CHAMBERS ARE NORMAL IN DIMENSIONS
2. NO REGIONAL WALL MOTION ABNORMALITY AT REST
3. NORMAL LV SYSTOLIC FUNCTION, LVEF=60%
4. NORMAL VALVES
5. NO LV DIASTOLIC DYSFUNCTION
6. NO AR, MR, TR, NO PULMONARY HYPERTENSION, (IVC COLLAPSING)
7. NO PERICARDIAL EFFUSION, CLOT VEGETATION.

 Dr.KILLOL KANERIA MD, DM
Consultant Cardiologist

Name: Akanksha Singh
Patient ID: 23201936

11.03.2023 08:20:06
Standard 12-Lead

Date of birth: Female
Gender: Female
Height: Undefined
Weight: Undefined
Ethnicity: Unknown
Pacemaker: Unknown

Visit ID:
Room:
Medication:
Order ID:
Ord. prov.:
Ord. prot.:

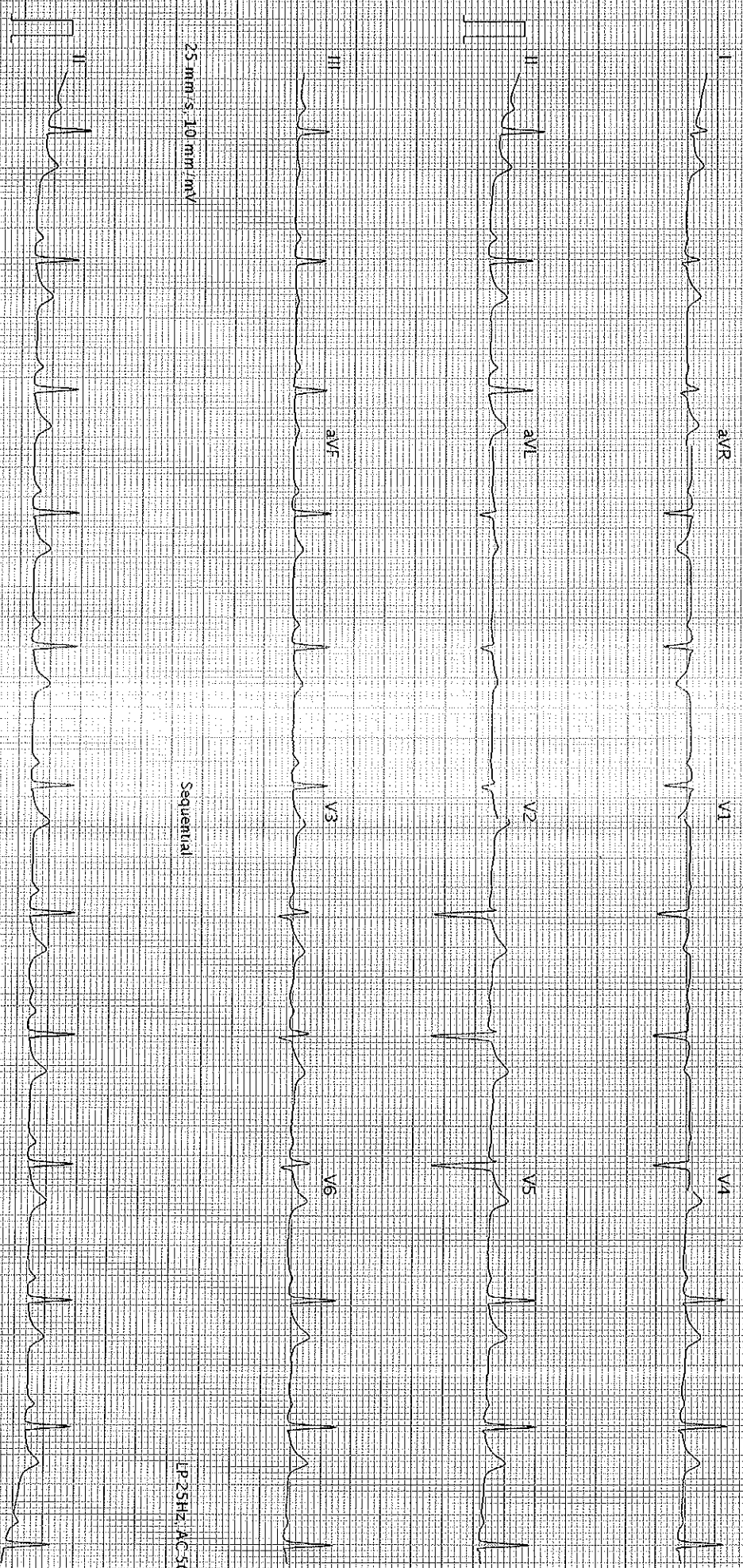
HR: 69 bpm
RR: 688 ms
P: 95 ms
PR: 170 ms
QRS: 69 ms
QT: 365 ms
QTcB: 392 ms

Sinus rhythm
Normal electrical axis
Normal ECG
Unconfirmed report

Indication:
Remark:

Normal

Normal



25 mm/s, 10 mm/mV

25 mm/s, 10 mm/mV

Sequential

LP 25Hz, AC 50Hz

25 mm/s, 10 mm/mV

LP 25Hz, AC 50Hz

AT 102 G2 12 0 (1080 011030)

Printed on 11.03.2023 08:20:19

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SCHILLER

Part No. 2.157048M

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QSC