

NAME:	Ms. Anshu Nair	UHID:	
AGE:	34	DATE OF HEALTHCHECK:	19/12/2024
GENDER:	F		

HEIGHT:	158.5	MARITAL STATUS:	M
WEIGHT:	74.4	NO OF CHILDREN:	1
BMI:	29.6		

C/O: -

K/C/O:

PRESENT MEDICATION: - No

P/M/H: - Migraine

P/S/H: - ~~No~~ (See Myocard (SO))

ALLERGY: - No

PHYSICAL ACTIVITY: Active/ Moderate/ Sedentary

H/A: SMOKING: - No

FAMILY HISTORY FATHER: - DM

ALCOHOL: - No

MOTHER: -

TOBACCO/PAN: - No

O/E:

LYMPHADENOPATHY: - No

BP: 100/70 PULSE: - 74/min

PALLOR/ICTERUS/CYNOSIS/CLUBBING: - No

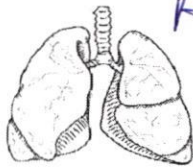
TEMPERATURE: - SCARS: -

OEDEMA: -

S/E:

P/A: - No

RS:



CVS: - No

Extremities & Spine: - No

CNS: - Concomitant, Unilateral

ENT: - No

Skin: - No

Vision:

	Without Glass		With Glass	
	Right Eye	Left Eye	Right Eye	Left Eye
FAR :				
NEAR :				
COLOUR VISION:				

Name: Arathi Nair

Age: 34y

Date of Health check-up: 19/02/24

### Findings and Recommendation:

#### Findings:-

Repeat on

#### Recommendation:-

Fit

Signature:

Consultant -



**DR. ANIRBAN DASGUPTA**  
MBBS, D.N.B MEDICINE  
DIPLOMA CARDIOLOGY  
MMC-2005/02/0920

## OPHTHALMIC EVALUATION

UHID No.: \_\_\_\_\_

Date: 19/2/24

Name: Miss Arathi Age: 34 Gender: Male/Female

Without Correction :

Distance: Right Eye 6/6 Left Eye 6/6

Near : Right Eye 2/c Left Eye 2/c

With Correction :

Distance: Right Eye \_\_\_\_\_ Left Eye \_\_\_\_\_

Near : Right Eye \_\_\_\_\_ Left Eye \_\_\_\_\_

	RIGHT					LEFT				
	SPH	CYL	AXIS	PRISM	VA	SPH	CYL	AXIS	PRISM	VA
Distance										
Near										

Colour Vision : N 20

Anterior Segment Examination : N 20 / BO

Pupils : \_\_\_\_\_

Fundus : \_\_\_\_\_

Intraocular Pressure : 12 mmHg BO

Diagnosis : \_\_\_\_\_

Advice : \_\_\_\_\_

Re-Check on all (This Prescription needs verification every year)

Dr. [Signature]  
(Consultant Ophthalmologist)

**DR. RUCHIRA SHARMA**  
M. S. (OPHTH)  
CONSULTING OPHTHALMOLOGIST  
& MICRO SURGEON

■ Consultation ■ Diagnostics ■ Health Check-Ups ■ Dentistry

Name: Ananti Nair Age: 34 Sex: F UHID No.: \_\_\_\_\_ Date: 19/2/2024

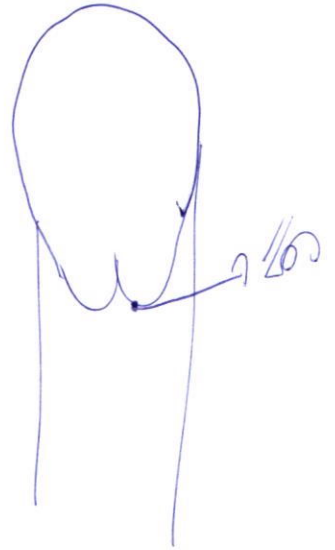
CMP - 9/2/2024

OIU - PIL, FOCUS

PIU - No medical. on Sx Hb

OIE - Gse ju

PIA soft



PIU ut au Ins IFM  
Mv BLU R M M

Adv  
jup after PAP  
↓  
Dr.

**DR. ANVI MASHRU**  
M.S. Obstetrics and Gynaecology  
Reg. No. MMC 2018/03/0581

Dr. \_\_\_\_\_



**Apollo Clinic**  
**VASHI**

- Consultation
- Diagnostics
- Health Check-Ups
- Dentistry

## DENTAL CHECKUP

<b>Name:</b> Mrs. Anathi Nair	<b>MR NO:</b>
<b>Age/Gender :</b> 34yrs F	<b>Date:</b> 19/12/24

Medical history:  Diabetes  Hypertension  NRH

EXAMINATION	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Calculus & Stains	✓	✓	✓	✓
Mobility				
Caries ( Cavities )				
a) Class 1 (Occlusal)			36, 37	46, 47
b) Class 2 (Proximal)				
c) Class 5 (Cervical)				
Faulty Restoration				
Faulty Crown				
Fractured Tooth				
Root Pieces	16	24		
Impacted Tooth				
Missing Tooth				
Existing Denture				

### TREATMENT ADVISED:

TREATMENT	UPPER RIGHT	UPPER LEFT	LOWER LEFT	LOWER RIGHT
Restoration / Filling				
Root Canal Therapy				
Crown				
Extraction				

Oral Prophylaxis:  Scaling & polishing


Orthodontic Advice for Braces:  Yes /  No

Prosthetic Advice to Replace Missing Teeth:  Denture  Bridge  Implant

Oral Habits:  Tobacco  Cigarette  Others since \_\_\_ years

Advice to quit any form of tobacco as it can cause cancer.

Other Findings: \_\_\_\_\_

 **DR. NILAM PATIL**  
B. D. S  
Reg. No: A 23226

• ANDHERI • COLABA • NASHIK • VASHI

Name : Mrs. Arathi Sudhir Nair      Gender : Female      Age : 34 Years  
UHID : FVAH 10679.      Bill No :      Lab No : V-2329-23  
Ref. by : SELF      Sample Col.Dt : 19/02/2024 08:40  
Barcode No : 9007      Reported On : 19/02/2024 19:20

TEST	RESULTS		BIOLOGICAL REFERENCE INTERVAL
<b>HAEMOGRAM(CBC,ESR,P/S)-WB (EDTA)</b>			
Haemoglobin(Colorimetric method)	12.3	g/dl	11.5 - 15
RBC Count (Impedance)	<b>3.98</b>	Millions/cumm.	4 - 6.2
PCV/Haematocrit(Calculated)	37.1	%	35 - 55
MCV:(Calculated)	93.2	fl	78 - 98
MCH:(Calculated)	30.9	pg	26 - 34
MCHC:(Calculated)	33.2	gm/dl	30 - 36
RDW-CV:	12.9	%	10 - 16
Total Leucocyte count(Impedance)	8320	/cumm.	4000 - 10500
Neutrophils:	59	%	40 - 75
Lymphocytes:	36	%	20 - 40
Eosinophils:	02	%	0 - 6
Monocytes:	03	%	2 - 10
Basophils:	00	%	0 - 2
Platelets Count(Impedance method)	2.52	Lakhs/c.mm	1.5 - 4.5
MPV	9.2	fl	6.0 - 11.0
ESR(Westergren Method)	15	mm/1st hr	0 - 20
Peripheral Smear (Microscopic examination)			
RBCs:	Normochromic, Normocytic		
WBCs:	Normal		
Platelets	Adequate		
Note:	Test Run on 5 part cell counter. Manual diff performed.		

Neha More  
Entered By

Ms Kaveri Gaonkar  
Verified By

Page 3 of 10  
Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

End of Report  
Results are to be correlated clinically

Name : Mrs. Arathi Sudhir Nair      Gender : Female      Age : 34 Years  
UHID : FVAH 10679.      Bill No :      Lab No : V-2329-23  
Ref. by : SELF      Sample Col.Dt : 19/02/2024 08:40  
Barcode No : 9007      Reported On : 19/02/2024 19:20

TEST

RESULTS

**Blood Grouping (ABO & Rh)-WB(EDTA) Serum**

ABO Group:      **:A:**  
Rh Type:      **Positive**  
Method :      Matrix gel card method (forward and reverse)  
-----

Sheetal Nakate  
Entered By

Ms Kaveri Gaonkar  
Verified By



Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

End of Report  
*Results are to be correlated clinically*

Name : Mrs. Arathi Sudhir Nair Gender : Female Age : 34 Years  
UHID : FVAH 10679. Bill No : Lab No : V-2329-23  
Ref. by : SELF Sample Col.Dt : 19/02/2024 08:40  
Barcode No : 9007 Reported On : 19/02/2024 19:20

TEST RESULTS BIOLOGICAL REFERENCE INTERVAL

**HbA1c(Glycosylated Haemoglobin )WB-EDTA**

(HbA1C) Glycosylated Haemoglobin : 5.5 % Normal <5.7 %  
Pre Diabetic 5.7 - 6.5 %  
Diabetic >6.5 %  
Target for Diabetes on therapy < 7.0 %  
Re-evaluation of therapy > 8.0 %

Mean Blood Glucose : 111.15 mg/dL

Corelation of A1C with average glucose

A1C (%)	Mean Blood Glucose (mg/dl)
6	126
7	154
8	183
9	212
10	240
11	269
12	298


Method High Performance Liquid Chromatography (HPLC).

**INTERPRETATION**

- \* The HbA1c levels corelate with the mean glucose concentration prevailing in the course of Pts recent history (apprx 6-8 weeks) & therefore provides much more reliable information for glycemia control than the blood glucose or urinary glucose.
- \* This Methodology is better then the routine chromatographic methods & also for the daibetic pts.having HEMOGLBINOPATHIES OR UREMIA as Hb varaints and uremia does not INTERFERE with the results in this methodology.
- \* It is recommended that HbA1c levels be performed at 4 - 8 weeks during therapy in uncontrolled DM pts.& every 3 - 4 months in well controlled daibetics .
- \* Mean blood glucose (MBG) in first 30 days ( 0-30 )before sampling for HbA1c contributes 50% whereas MBG in 90 - 120 days contribute to 10% in final HbA1c levels

Neha More  
Entered By

Ms Kaveri Gaonkar  
Verified By

  
Page 5 of 10  
Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

End of Report  
Results are to be correlated clinically



Name : Mrs. Arathi Sudhir Nair      Gender : Female      Age : 34 Years  
UHID : FVAH 10679.      Bill No :      Lab No : V-2329-23  
Ref. by : SELF      Sample Col.Dt : 19/02/2024 08:40  
Barcode No : 9007      Reported On : 19/02/2024 19:20

TEST      RESULTS      UNITS      BIOLOGICAL REFERENCE INTERVAL

**PLASMA GLUCOSE**


Fasting Plasma Glucose :      **117**      mg/dL      Normal < 100 mg/dL  
Impaired Fasting glucose : 101 to 125 mg/dL  
Diabetes Mellitus :  $\geq$  126 mg/dL  
(on more than one occasion)  
(American diabetes association guidelines 2016)

Post Prandial Plasma Glucose :      120      mg/dL      Normal < 140 mg/dL  
Impaired Post Prandial glucose : 140 to 199 mg/dL  
Diabetes Mellitus :  $\geq$  200 mg/dL  
(on more than one occasion)  
(American diabetes association guidelines 2016)

Method :      Hexokinase

Ms Kaveri Gaonkar  
Entered By

Ms Kaveri Gaonkar  
Verified By

  
Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

End of Report  
Results are to be correlated clinically

Name : Mrs. Arathi Sudhir Nair      Gender : Female      Age : 34 Years  
UHID : FVAH 10679.      Bill No :      Lab No : V-2329-23  
Ref. by : SELF      Sample Col.Dt : 19/02/2024 08:40  
Barcode No : 9007      Reported On : 19/02/2024 19:20

TEST      RESULTS      UNITS      BIOLOGICAL REFERENCE INTERVAL

**LIPID PROFILE - Serum**

S. Cholesterol(Oxidase)	189	mg/dL	Desirable < 200 Borderline:>200-<240 Undesirable:>240
S. Triglyceride(GPO-POD)	87	mg/dL	Desirable < 150 Borderline:>150-<499 Undesirable:>500
S. VLDL:(Calculated)	17.4	mg/dL	Desirable <30
S. HDL-Cholesterol(Direct)	48.1	mg/dL	Desirable > 60 Borderline:>40-<59 Undesirable:<40
S. LDL:(calculated)	123.5	mg/dL	Desirable < 130 Borderline:>130-<159 Undesirable:>160
Ratio Cholesterol/HDL	3.9		3.5 - 5
Ratio of LDL/HDL	2.6		2.5 - 3.5

Ms Kaveri Gaonkar  
Entered By

Ms Kaveri Gaonkar  
Verified By



Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

End of Report  
Results are to be correlated clinically

Page 6 of 10

Name : Mrs. Arathi Sudhir Nair      Gender : Female      Age : 34 Years  
UHID : FVAH 10679.      Bill No :      Lab No : V-2329-23  
Ref. by : SELF      Sample Col.Dt : 19/02/2024 08:40  
Barcode No : 9007      Reported On : 19/02/2024 19:20

TEST      RESULTS      UNITS      BIOLOGICAL REFERENCE INTERVAL

**LFT(Liver Function Tests)-Serum**

S.Total Protein (Biuret method)	6.85	g/dL	6.6 - 8.7
S.Albumin (BCG method)	4.22	g/dL	3.5 - 5.2
S.Globulin (Calculated)	2.63	g/dL	2 - 3.5
S.A/G Ratio:(Calculated)	1.6		0.9 - 2
S.Total Bilirubin (DPD):	0.88	mg/dL	0.1 - 1.2
S.Direct Bilirubin (DPD):	0.30	mg/dL	0.1 - 0.3
S.Indirect Bilirubin (Calculated)	0.58	mg/dL	0.1 - 1.0
S.AST (SGOT)(IFCC Kinetic with P5P):	15	U/L	5 - 32
S.ALT (SGPT) (IFCC Kinetic with P5P):	12	U/L	5 - 33
S.Alk Phosphatase(pNPP-AMP Kinetic):	59	U/L	35 - 105
S.GGT(IFCC Kinetic):	13	U/L	07 - 32


-----

-----

Ms Kaveri Gaonkar  
Entered By

Ms Kaveri Gaonkar  
Verified By

Page 7 of 10

  
Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

End of Report  
Results are to be correlated clinically

Name : Mrs. Arathi Sudhir Nair      Gender : Female      Age : 34 Years  
UHID : FVAH 10679.      Bill No :      Lab No : V-2329-23  
Ref. by : SELF      Sample Col.Dt : 19/02/2024 08:40  
Barcode No : 9007      Reported On : 19/02/2024 19:20

TEST	RESULTS	BIOLOGICAL REFERENCE INTERVAL
	<b>BIOCHEMISTRY</b>	
S.Urea(Urease Method)	16.7      mg/dl	10.0 - 45.0
BUN (Calculated)	7.79      mg/dL	5 - 20
S.Creatinine(Jaffe's Method)	0.67      mg/dl	0.50 - 1.1
BUN / Creatinine Ratio	11.63	9:1 - 23:1
S.Uric Acid(Uricase Method)	4.4      mg/dl	2.4 - 5.7

Ms Kaveri Gaonkar  
Entered By

Ms Kaveri Gaonkar  
Verified By



Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

End of Report  
*Results are to be correlated clinically*

Name : Mrs. Arathi Sudhir Nair      Gender : Female      Age : 34 Years  
UHID : FVAH 10679.      Bill No :      Lab No : V-2329-23  
Ref. by : SELF      Sample Col.Dt : 19/02/2024 08:40  
Barcode No : 9007      Reported On : 19/02/2024 19:20

TEST	RESULTS	UNITS	BIOLOGICAL REFERENCE INTERVAL
<b>Thyroid (T3,T4,TSH)- Serum</b>			
Total T3 (Tri-iodo Thyronine) (ECLIA)	1.99	nmol/L	1.3 - 3.1 nmol/L
Total T4 (Thyroxine) (ECLIA)	107.2	nmol/L	66 - 181 nmol/L
TSH-Ultrasensitive (Thyroid-stimulating hormone) Method : ECLIA	2.53	□IU/ml	Euthyroid : 0.35 - 5.50 □IU/ml Hyperthyroid : < 0.35 □IU/ml Hypothyroid : > 5.50 □IU/ml

Grey zone values observed in physiological/therapeutic effect.

**Note:**

**T3 :**

1. Decreased values of T3 (T4 and TSH normal) have minimal Clinical significance and not recommended for diagnosis of hypothyroidism.
2. Total T3 and T4 values may also be altered in other conditions due to changes in serum proteins or binding sites ,Pregnancy, Drugs (Androgens,Estrogens,O C pills, Phenytoin) etc. In such cases Free T3 and free T4 give corrected Values.
3. Total T3 may decrease by < 25 percent in healthy older individuals

**T4 :**

1. Total T3 and T4 Values may also be altered in other condition due to changes in serum proteins or binding sites, Pregnancy Drugs (Androgens,Estrogens,O C pills, Phenytoin), Nerphrosis etc. In such cases Free T3 and Free T4 give Corrected values.

**TSH :**

1. TSH Values may be transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart failure. Severe burns, trauma and surgery etc.
2. Drugs that decrease TSH values e,g L dopa, Glucocorticoids.
3. Drugs that increase TSH values e.g. Iodine,Lithium, Amiodarone

Ms Kaveri Gaonkar  
Entered By

Ms Kaveri Gaonkar  
Verified By



Dr. Milind Patwardhan  
M.D(Path)

Page 8 of 9 Chief Pathologist

End of Report

Results are to be correlated clinically

Name : Mrs. Arathi Sudhir Nair      Gender : Female      Age : 34 Years  
 UHID : FVAH 10679.      Bill No :      Lab No : V-2329-23  
 Ref. by : SELF      Sample Col.Dt : 19/02/2024 08:40  
 Barcode No : 9007      Reported On : 19/02/2024 19:20

TEST      RESULTS      BIOLOGICAL REFERENCE INTERVAL

**URINE REPORT**

**PHYSICAL EXAMINATION**

QUANTITY	30	mL
COLOUR	Pale Yellow	
APPEARANCE	Slightly Hazy	Clear
SEDIMENT	Absent	Absent

**CHEMICAL EXAMINATION(Strip Method)**

REACTION(PH)	7.0	4.6 - 8.0
SPECIFIC GRAVITY	1.005	1.005 - 1.030
URINE ALBUMIN	Absent	Absent
URINE SUGAR(Qualitative)	Absent	Absent
KETONES	Absent	Absent
BILE SALTS	Absent	Absent
BILE PIGMENTS	Absent	Absent
UROBILINOGEN	Normal(<1 mg/dl)	Normal
OCCULT BLOOD	Absent	Absent
Nitrites	Absent	Absent

**MICROSCOPIC EXAMINATION**

PUS CELLS	<b>3 - 4 / hpf</b>	0 - 3/hpf
RED BLOOD CELLS	Nil /HPF	Absent
EPITHELIAL CELLS	<b>12 - 15 / hpf</b>	3 - 4/hpf
CASTS	Absent	Absent
CRYSTALS	Absent	Absent
BACTERIA	<b>Present(Few)</b>	Absent

Vasanti Gondal  
Entered By

Ms Kaveri Gaonkar  
Verified By



Dr. Milind Patwardhan  
M.D(Path)

Page 9 of Chief Pathologist

End of Report  
Results are to be correlated clinically

Name : Mrs. Arathi Sudhir Nair      Gender : Female      Age : 34 Years  
UHID : FVAH 10679.      Bill No :      Lab No : V-2329-23  
Ref. by : SELF      Sample Col.Dt : 19/02/2024 08:40  
Barcode No : 9007      Reported On : 19/02/2024 19:20

**CYTOPATHOLOGY REPORT - PAP SMEAR**

Specimen No: AP-271-24

Specimen Adequacy: ADEQUATE

**CELLS**

ENDOCERVICAL: **Present**

ENDOMETRIAL: Absent

SQUAMOUS: **SUPERFICIAL(++) AND INTERMEDIATE(++) SQUAMOUS CELLS**

HISTIOCYTES: Absent

RBCs: Absent

POLYMORPHS: **Present(Few)**

**FLORA**

TRICHOMONAS VAGINALIS: Absent

FUNGI: Absent

LACTOBACILLI: Absent

**CELLULAR CHANGES**

METAPLASIA: Absent

DYSPLASIA: Absent

MALIGNANT CELL: Absent

ATROPHIC CHANGES: Absent

BARE NUCLEI: Absent

IMPRESSION: **NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY**

Anushka Chavan  
Entered By

Ms Kaveri Gaonkar  
Verified By



Dr. Milind Patwardhan  
M.D(Path)  
Chief Pathologist

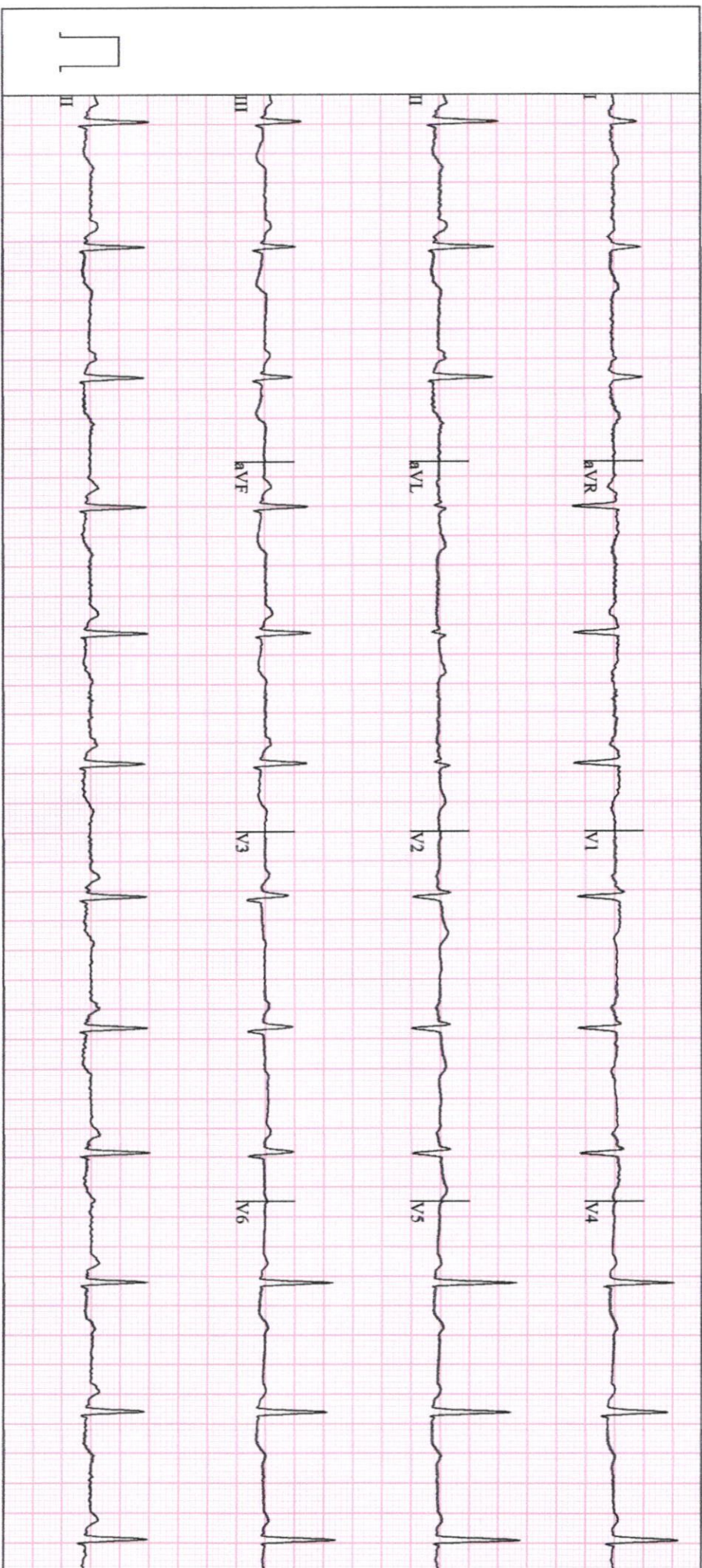
End of Report  
Results are to be correlated clinically

QRS : 72 ms  
QT/QTcBaz : 396 / 424 ms  
PR : 148 ms  
P : 102 ms  
RR/PP : 872 / 869 ms  
P/QRS/T : 63 / 57 / -9 degrees

Normal sinus rhythm  
Abnormal QRS-T angle; consider primary T wave abnormality  
Abnormal ECG

- ST change + hyper leads + Ld leads.  
- Consider ischemia

*Dr. ANIRBAN DASGUPTA*  
M.B.B.S., D.N.B. Medicine  
Diploma Cardiology  
MMC-2005/02/0920





Apollo Clinic  
The Emerald, Plot No-195/B, Sector-12,  
Neel Siddhi Towers, Vashi-400703

**Station**  
Telephone:

## EXERCISE STRESS TEST REPORT

Patient Name: ARATHI, NAIR  
Patient ID: 10679  
Height:  
Weight:

DOB: 13.05.1989  
Age: 34yrs  
Gender: Female  
Race: Asian

Study Date: 19.02.2024  
Test Type: Treadmill Stress Test  
Protocol: BRUCE

Referring Physician: --  
Attending Physician: DR. ANIRBAN DASGUPTA  
Technician: Anita Gaikwad

Medications:  
NIL

Medical History:  
NIL

Reason for Exercise Test:  
Screening for CAD

### Exercise Test Summary

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	HR (bpm)	BP (mmHg)	Comment
PRETEST	SUPINE	00:54	0.00	0.00	98	100/70	
	STANDING	00:18	0.00	0.00	81	100/70	
	HYPERV.	00:15	0.00	0.00	85		
	WARM-UP	00:12	0.10	0.00	83		
EXERCISE	STAGE 1	03:00	1.70	10.00	120	120/80	
	STAGE 2	03:00	2.50	12.00	151	140/80	
	STAGE 3	00:32	3.40	14.00	164	150/80	
RECOVERY		01:04	0.00	0.00	125	160/80	

The patient exercised according to the BRUCE for 6:31 min:s, achieving a work level of Max. METS: 8.60. The resting heart rate of 91 bpm rose to a maximal heart rate of 164 bpm. This value represents 88 % of the maximal, age-predicted heart rate. The resting blood pressure of 100/70 mmHg, rose to a maximum blood pressure of 160/80 mmHg. The exercise test was stopped due to Target heart rate achieved.

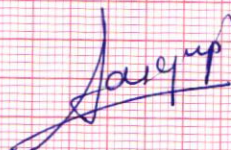
### Interpretation

Summary: Resting ECG: normal.  
Functional Capacity: normal.  
HR Response to Exercise: appropriate.  
BP Response to Exercise: normal resting BP - appropriate response.  
Chest Pain: none.  
Arrhythmias: none.  
ST Changes: none.  
Overall impression: Normal stress test.

### Conclusions

TMT IS NEGATIVE FOR INDUCIBLE MYOCARDIAL ISCHAEMIA AT THE WORKLOAD ACHIEVED.

Physician-DR. ANIRBAN DASGUPTA

  
Dr. ANIRBAN DASGUPTA  
M.B., B.S., D.N.B. Medicine  
Diploma Cardiology  
MMC -2005/02/0920

PATIENT'S NAME	ARATHI S NAIR	AGE :- 34 Y/F
UHID NO	10679	19 Feb 2024

**DIGITAL RADIOGRAPH OF CHEST (PA VIEW)**  
-----

The lung fields are clear.

Heart and aorta appears normal.

Both hila appear normal.

Both costo-phrenic angles are clear.

Visualized bony thorax appears normal.

**IMPRESSION: NO SIGNIFICANT ABNORMALITY IS DETECTED IN CURRENT RADIOGRAPH.**

Clinico-haematological correlation is recommended.

Thanking you for the referral,  
With regards,



DR. SIDDHI PATIL  
Cons. Radiologist

<b>PATIENT'S NAME</b>	<b>ARATHI S NAIR</b>	<b>AGE :- 34Y/F</b>
<b>UHID</b>	<b>10679</b>	<b>19 Feb 2024</b>

### USG WHOLE ABDOMEN (TAS)

**LIVER** is normal in size, shape and echotexture. No evidence of any focal lesion. The portal vein appears normal & shows normal hepato-petal flow. No evidence of intra-hepatic biliary duct dilatation.

**Gall Bladder** appears well distended with normal wall thickness. There is no calculus or pericholecystic collection. CBD appears normal.

Visualised parts of head & body of PANCREAS appear normal.

**SPLEEN** is normal in size and echotexture. No focal lesion seen. Splenic vein is normal.

Both kidneys are normal in size, shape and echotexture with normal parenchymal reflectivity and maintained cortico-medullary differentiation. No hydronephrosis or calculi or mass seen.

**RIGHT KIDNEY** measures 10.9 x 3.9 cm. **LEFT KIDNEY** measures 11.2 x 3.8 cm.

**URINARY BLADDER** is well distended; no e/o wall thickening or mass or calculi seen.

**UTERUS** is anteverted and is normal in size, shape and echotexture; No focal lesion seen. It measures 7.3 x 5.6 x 4.9 cm; ET measures 6 mm. IUCD seen in situ

Both ovaries are normal in size, shape and position.

Visualised BOWEL LOOPS appear normal. There is no free fluid seen.

### IMPRESSION –

- **No significant abnormality detected.**

THIS REPORT IS NOT TO BE USED FOR MEDICOLEGAL PURPOSE. THE CONTENTS OF THIS REPORT REQUIRE CLINICAL CO-RELATION BEFORE ANY APPLICATION.



**DR. DISHA MINOCHA**  
**DMRE (RADIOLOGIST)**