

**PATIENT NAME : APARNA AJITH**

**REF. DOCTOR : DR. MEDIWHEEL**

**CODE/NAME & ADDRESS :** CA00010147 -  
 MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED  
 F701A, LADO SARAI, NEW DELHI,SOUTH DELHI,  
 DELHI,  
 SOUTH DELHI 110030  
 8800465156

**ACCESSION NO :** **4036XC003885**  
**PATIENT ID :** APARF1102924036  
**CLIENT PATIENT ID:**  
**ABHA NO :**

**AGE/SEX :** 32 Years Female  
**DRAWN :**  
**RECEIVED :** 23/03/2024 08:19:39  
**REPORTED :** 25/03/2024 12:23:11

| Test Report Status | Final | Results | Biological Reference Interval | Units |
|--------------------|-------|---------|-------------------------------|-------|
|--------------------|-------|---------|-------------------------------|-------|

**MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT**

**TREADMILL TEST**

TREADMILL TEST COMPLETED

**OPHTHAL**

OPHTHAL COMPLETED

**PHYSICAL EXAMINATION**

PHYSICAL EXAMINATION COMPLETED

**PRASEEDA S NAIR**  
**BIOCHEMIST**



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 KERALA, INDIA  
 Tel : 93334 93334  
 Email : customercare.ddrc@agilus.in



**Patient Ref. No. 66600008306212**

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Test Report Status **Final**

Results

Units

**MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT****ECG WITH REPORT****REPORT**

COMPLETED

**USG ABDOMEN AND PELVIS****REPORT**

COMPLETED

**CHEST X-RAY WITH REPORT****REPORT**

COMPLETED

**HAEMATOLOGY****MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT****GLYCOSYLATED HEMOGLOBIN(HBA1C), EDTA WHOLE BLOOD**

|       |     |                    |           |   |
|-------|-----|--------------------|-----------|---|
| HBA1C | 4.7 | Normal             | : 4.0 -   | % |
|       |     |                    | 5.6%.     |   |
|       |     | Non-diabetic level | : < 5.7%. |   |
|       |     | Diabetic           | : >6.5%   |   |

**Glycemic control goal**

More stringent goal : &lt; 6.5 %.

General goal : &lt; 7%.

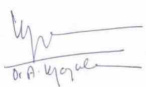
Less stringent goal : &lt; 8%.

**Glycemic targets in CKD :-**

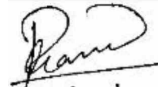
If eGFR &gt; 60 : &lt; 7%.

If eGFR &lt; 60 : 7 - 8.5%.

METHOD : HPLC



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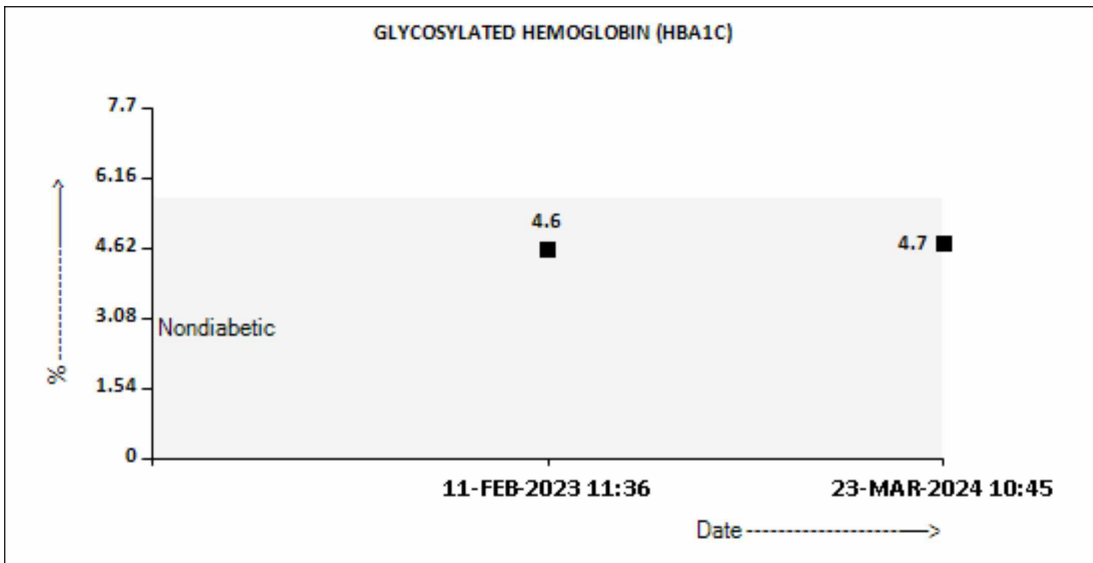
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**BLOOD COUNTS,EDTA WHOLE BLOOD**

|  |      |             |               |
|--|------|-------------|---------------|
| HEMOGLOBIN   | 14.7 | 12.0 - 15.0 | g/dL          |
| METHOD : AUTOMATED CELL COUNTER NON-CYANIDE            |      |             |               |
| RED BLOOD CELL COUNT                                   | 4.58 | 3.8 - 4.8   | mil/ $\mu$ L  |
| METHOD : AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE |      |             |               |
| WHITE BLOOD CELL COUNT                                 | 9.20 | 4.0 - 10.0  | thou/ $\mu$ L |
| METHOD : AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE |      |             |               |
| PLATELET COUNT   | 221  | 150 - 410   | thou/ $\mu$ L |
| METHOD : AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE |      |             |               |

**RBC AND PLATELET INDICES**

|  |                  |             |    |
|--|------------------|-------------|----|
| HEMATOCRIT                                   | 43.2             | 36 - 46     | %  |
| METHOD : RBC PULSE HEIGHT DETECTION          |                  |             |    |
| MEAN CORPUSCULAR VOL                         | 94.0             | 83 - 101    | fL |
| METHOD : AUTOMATED CELL COUNTER / CALCULATED |                  |             |    |
| MEAN CORPUSCULAR HGB.                        | <b>32.2 High</b> | 27.0 - 32.0 | pg |
| METHOD : AUTOMATED CELL COUNTER / CALCULATED |                  |             |    |

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|  |                 |             |      |
|--|-----------------|-------------|------|
| MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION<br><small>METHOD : AUTOMATED CELL COUNTER / CALCULATED</small> | 34.1            | 31.5 - 34.5 | g/dL |
| RED CELL DISTRIBUTION WIDTH<br><small>METHOD : CALCULATED PARAMETER</small>                              | <b>11.4 Low</b> | 11.6 - 14.0 | %    |
| MENTZER INDEX<br><small>METHOD : CALCULATED PARAMETER</small>  | 20.5            |             |      |

**WBC DIFFERENTIAL COUNT**

|  |                  |             |               |
|--|------------------|-------------|---------------|
| SEGMENTED NEUTROPHILS<br><small>METHOD : AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE</small>             | 62               | 40 - 80     | %             |
| LYMPHOCYTES<br><small>METHOD : AUTOMATED CELL COUNTER</small>  | 34               | 20 - 40     | %             |
| MONOCYTES  | <b>00 Low</b>    | 2 - 10      | %             |
| EOSINOPHILS<br><small>METHOD : AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE</small>                       | 04               | 1 - 6       | %             |
| BASOPHILS<br><small>METHOD : AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE</small>                         | 00               | 0 - 2       | %             |
| ABSOLUTE NEUTROPHIL COUNT<br><small>METHOD : AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE</small>         | 5.70             | 2.0 - 7.0   | thou/ $\mu$ L |
| ABSOLUTE LYMPHOCYTE COUNT<br><small>METHOD : AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE</small>         | <b>3.13 High</b> | 1.0 - 3.0   | thou/ $\mu$ L |
| ABSOLUTE MONOCYTE COUNT<br><small>METHOD : AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE</small>           | <b>00 Low</b>    | 0.2 - 1.0   | thou/ $\mu$ L |
| ABSOLUTE EOSINOPHIL COUNT<br><small>METHOD : AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE</small>         | 0.37             | 0.02 - 0.50 | thou/ $\mu$ L |
| ABSOLUTE BASOPHIL COUNT<br><small>METHOD : AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE</small>           | <b>00 Low</b>    | 0.02 - 0.10 | thou/ $\mu$ L |
| NEUTROPHIL LYMPHOCYTE RATIO (NLR)<br><small>METHOD : AUTOMATED CELL COUNTER / ELECTRICAL IMPEDENCE</small> | 1.8              |             |               |

**ERYTHROCYTE SEDIMENTATION RATE (ESR),EDTA BLOOD**

|   |    |        |            |
|---|----|--------|------------|
| SEDIMENTATION RATE (ESR)<br><small>METHOD : WESTERGREN METHOD</small> | 17 | 0 - 20 | mm at 1 hr |
|---|----|--------|------------|

**SUGAR URINE - POST PRANDIAL**

|                             |              |              |
|-----------------------------|--------------|--------------|
| SUGAR URINE - POST PRANDIAL | NOT DETECTED | NOT DETECTED |
|-----------------------------|--------------|--------------|

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**SUGAR URINE - FASTING**

SUGAR URINE - FASTING

NOT DETECTED

NOT DETECTED

**IMMUNOHAEMATOLOGY**
**MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT**
**ABO GROUP & RH TYPE, EDTA WHOLE BLOOD**
**ABO GROUP**

TYPE B

METHOD : COLUMN AGGLUTINATION TECHNOLOGY

**RH TYPE**

NEGATIVE

METHOD : COLUMN AGGLUTINATION TECHNOLOGY

&lt;b&gt;Interpretation(s)&lt;/b&gt;

ABO GROUP &amp; RH TYPE, EDTA WHOLE BLOOD-Blood group is identified by antigens and antibodies present in the blood. Antigens are protein molecules found on the surface of red blood cells. Antibodies are found in plasma. To determine blood group, red cells are mixed with different antibody solutions to give A,B,O or AB.

Disclaimer: "Please note, as the results of previous ABO and Rh group (Blood Group) for pregnant women are not available, please check with the patient records for availability of the same."

The test is performed by both forward as well as reverse grouping methods.

**BIO CHEMISTRY**
**MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT**
**BLOOD UREA NITROGEN (BUN), SERUM**

BLOOD UREA NITROGEN

7

Adult(&lt;60 yrs) : 6 to 20

mg/dL

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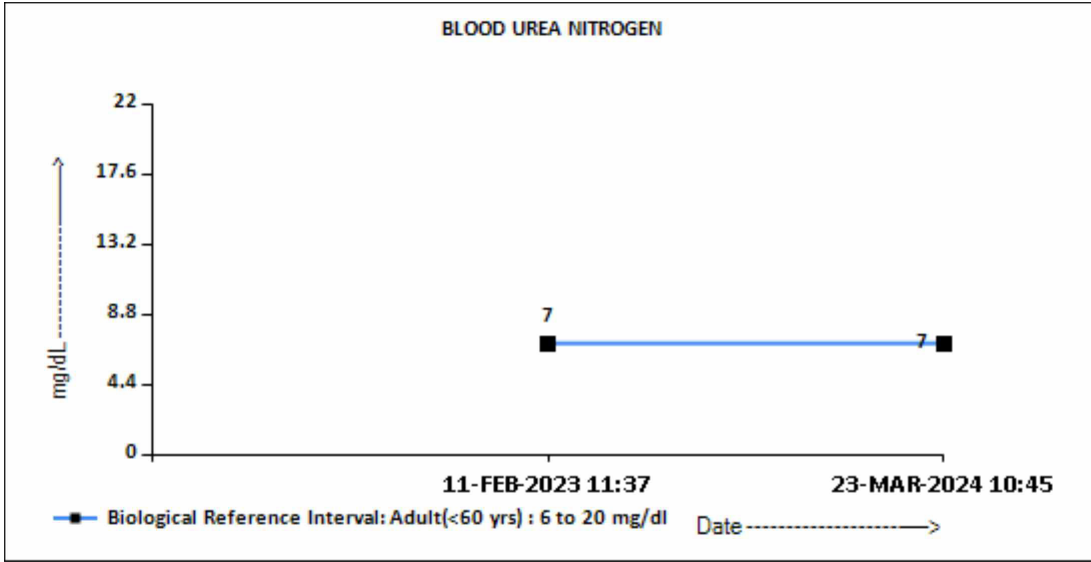
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**CREATININE, SERUM**

**CREATININE** 0.58 18 - 60 yrs : 0.6 - 1.1 mg/dL  
METHOD : KINETIC COLORIMETRIC

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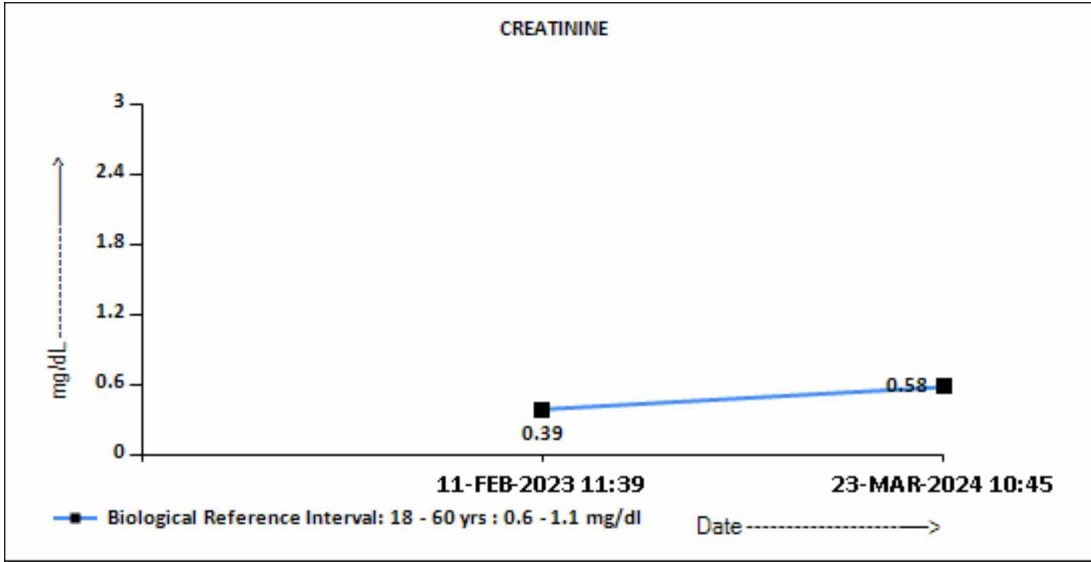
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**GLUCOSE, POST-PRANDIAL, PLASMA**

GLUCOSE, POST-PRANDIAL, PLASMA 107

Diabetes Mellitus : > or = 200. mg/dL  
Impaired Glucose tolerance/  
Prediabetes : 140 - 199.  
Hypoglycemia : < 55.

METHOD : HEXOKINASE

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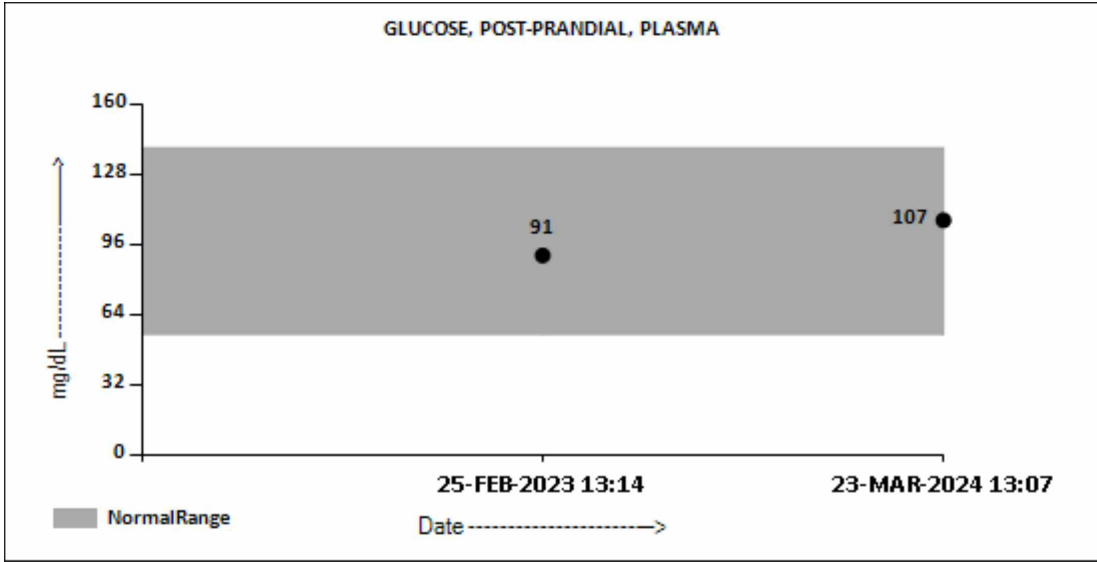
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**GLUCOSE FASTING,FLUORIDE PLASMA**

FBS (FASTING BLOOD SUGAR) 91 mg/dL  
 Diabetes Mellitus : > or = 126. mg/dL  
 Impaired fasting Glucose/  
 Prediabetes : 101 - 125.  
 Hypoglycemia : < 55.

METHOD : HEXOKINASE

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| TOTAL PROTEIN                                  |       | 7.6     | Ambulatory : 6.4 - 8.3<br>Recumbant : 6 - 7.8<br>g/dL |
| METHOD : COLORIMETRIC                          |       |         |   |
| <b>URIC ACID, SERUM</b>                        |       |         |   |
| URIC ACID                                      |       | 4.8     | Adults : 2.4-5.7<br>mg/dL                             |
| METHOD : URICASE                               |       |         |   |
| <b>MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT</b> |       |         |   |
| <b>BUN/CREAT RATIO</b>                         |       |         |   |
| BUN/CREAT RATIO                                |       | 12.0    | 5 - 15  |

**BIOCHEMISTRY - LIPID**

**MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT**

**LIPID PROFILE, SERUM**

|   |     |   |       |
|---|-----|---|-------|
| CHOLESTEROL                                       | 178 | Desirable : < 200<br>Borderline : 200-239<br>High : >or= 240  | mg/dL |
| METHOD : CHOD-POD                                 |     |   |       |
| TRIGLYCERIDES                                     | 65  | Normal : < 150<br>High : 150-199<br>Hypertriglyceridemia : 200-499<br>Very High : > 499                           | mg/dL |
| METHOD : GPO - PAP                                |     |   |       |
| HDL CHOLESTEROL                                   | 46  | General range : 40-60   | mg/dL |
| METHOD : HOMOGENOUS DIRECT ENZYMATIC COLORIMETRIC |     |   |       |
| LDL CHOLESTEROL, DIRECT                           | 133 | Optimum : < 100<br>Above Optimum : 100-129<br>Borderline High : 130-159<br>High : 160-189<br>Very High : >or= 190 | mg/dL |
| METHOD : HOMOGENOUS DIRECT ENZYMATIC COLORIMETRIC |     |   |       |

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| NON HDL CHOLESTEROL  |       | <b>132 High</b> | mg/dL       |
| Desirable: Less than 130<br>Above Desirable: 130 - 159<br>Borderline High: 160 - 189<br>High: 190 - 219<br>Very high: > or = 220 |       |                 |             |
| METHOD : CALCULATED PARAMETER  |       |                 |             |
| VERY LOW DENSITY LIPOPROTEIN   |       | 13.0            | mg/dL       |
| METHOD : CALCULATED PARAMETER  |       |                 |             |
| CHOL/HDL RATIO   |       | 3.9             | 3.30 - 4.40 |
| METHOD : CALCULATED PARAMETER  |       |                 |             |
| LDL/HDL RATIO  |       | 2.9             | 0.5 - 3.0   |
| METHOD : CALCULATED PARAMETER  |       |                 |             |

**SPECIALISED CHEMISTRY - HORMONE**

**MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT**

**THYROID PANEL, SERUM**

|   |       |                                  |        |
|---|-------|----------------------------------|--------|
| T3  | 99.81 | Non-Pregnant : 60-181            | ng/dL  |
| Pregnant Trimester-wise<br>1st : 81-190<br>2nd : 100-260<br>3rd : 100-260     |       |                                  |        |
| METHOD : CLIA   |       |                                  |        |
| T4  | 9.80  | >20 yrs : 3.2-12.6               | µg/dl  |
| METHOD : CLIA   |       |                                  |        |
| TSH 3RD GENERATION  | 2.620 | 18-49 yrs(Non-Pregnant) :0.4-4.2 | µIU/mL |
| Pregnant (Trimester wise):<br>1st : 0.1-2.5<br>2nd : 0.2-3.0<br>3rd : 0.3-3.0 |       |                                  |        |
| METHOD : CLIA   |       |                                  |        |

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|--------------------|-------|---------|-------|
|--------------------|-------|---------|-------|

**CLINICAL PATH - URINALYSIS**

**MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT**

**PHYSICAL EXAMINATION, URINE**

|  |             |
|--|-------------|
| <b>COLOR</b><br>METHOD : MACROSCOPY      | PALE YELLOW |
| <b>APPEARANCE</b><br>METHOD : MACROSCOPY | CLEAR       |

**MICROSCOPIC EXAMINATION, URINE**

|                  |                              |              |      |
|------------------|------------------------------|--------------|------|
| RED BLOOD CELLS  | <b>DETECTED (OCCASIONAL)</b> | NOT DETECTED | /HPF |
| WBC              | 2-3                          | 0-5          | /HPF |
| EPITHELIAL CELLS | 2-3                          | 0-5          | /HPF |
| CASTS            | NOT DETECTED                 |              |      |
| CRYSTALS         | NOT DETECTED                 |              |      |
| BACTERIA         | <b>DETECTED</b>              | NOT DETECTED |      |
| YEAST            | NOT DETECTED                 | NOT DETECTED |      |

METHOD : LIGHT MICROSCOPY

**PRASEEDA S NAIR**  
**BIOCHEMIST**

**Prof. Dr. A. VIJAYALAKSHMI**  
**MBBS ,MD (path)**  
**Formerly Professor of Pathology**  
**MCH**  
**Reg.No-2306**



View Details



View Report

**PERFORMED AT :**  
DDRC AGILUS PATHLABS LIMITED

GANDHI NAGAR, KTM  
KERALA, INDIA  
Tel : 93334 93334  
Email : customercare.ddrc@agilus.in



**Patient Ref. No. 66600008306212**

**PATIENT NAME : APARNA AJITH**

**REF. DOCTOR : DR. MEDIWHEEL**

**CODE/NAME & ADDRESS :** CA00010147 -  
 MEDIWHEEL ARCOFEMI HEALTHCARE LIMITED  
 F701A, LADO SARAI, NEW DELHI,SOUTH DELHI,  
 DELHI,  
 SOUTH DELHI 110030  
 8800465156

**ACCESSION NO :** **4036XC003885**  
**PATIENT ID :** APARF1102924036  
**CLIENT PATIENT ID:**  
**ABHA NO :**

**AGE/SEX :** 32 Years Female  
**DRAWN :**  
**RECEIVED :** 23/03/2024 08:19:39  
**REPORTED :** 25/03/2024 12:23:11

| Test Report Status | Final | Results | Units |
|--------------------|-------|---------|-------|
|--------------------|-------|---------|-------|

**MEDIWHEEL HEALTH CHECKUP BELOW 40(F)TMT**

**CHEMICAL EXAMINATION, URINE**

|                       |              |               |
|-----------------------|--------------|---------------|
| PH                    | 6.0          | 4.7 - 7.5     |
| METHOD : PH INDICATOR |              |               |
| SPECIFIC GRAVITY      | 1.015        | 1.003 - 1.035 |
| PROTEIN               | NOT DETECTED | NOT DETECTED  |
| GLUCOSE               | NOT DETECTED | NOT DETECTED  |
| KETONES               | NOT DETECTED | NOT DETECTED  |
| BLOOD                 | NOT DETECTED | NOT DETECTED  |
| BILIRUBIN             | NOT DETECTED | NOT DETECTED  |
| UROBILINOGEN          | NORMAL       | NORMAL        |

**Prof.Dr.A.VIJAYALAKSHMI**  
**MBBS ,MD (path)**  
**Formerly Professor of Pathology**  
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View Report



**Patient Ref. No. 66600008306212**

If the examinee is suffering from an acute life threatening situation, you may be obliged to disclose the result of the medical examination to the examinee.

|                           |   |  |                        |
|---------------------------|---|--|------------------------|
| 1. Name of the examinee   | : | Mr./Mrs./Ms.   | Aparna Ajith           |
| 2. Mark of Identification | : | (Mole/Scar/any other (specify location)):                    | black mole on chin     |
| 3. Age/Date of Birth      | : |  | 04/07/1991 Gender: F/M |
| 4. Photo ID Checked       | : | (Passport/Election Card/PAN Card/Driving Licence/Company ID) |                        |

### PHYSICAL DETAILS:

|                                     |                                |  |
|-------------------------------------|--------------------------------|--|
| a. Height ..... 154 ..... (cms)     | b. Weight ..... 57 ..... (Kgs) | c. Girth of Abdomen ..... 93 ..... (cms) |
| d. Pulse Rate ..... 81 ..... (/Min) | e. Blood Pressure:             | Systolic 120 Diastolic 80                |
|                                     | 1 <sup>st</sup> Reading        | 120 80                                   |
|                                     | 2 <sup>nd</sup> Reading        | 120 80                                   |

### FAMILY HISTORY:

| Relation   | Age if Living | Health Status | If deceased, age at the time and cause |
|------------|---------------|---------------|--|
| Father     |               |               | 57, cancer, 2013                       |
| Mother     | 56            | Normal        |  |
| Brother(s) |               |               |  |
| Sister(s)  | 21            | Normal        |  |

### HABITS & ADDICTIONS: Does the examinee consume any of the following? NO

| Tobacco in any form | Sedative | Alcohol |
|---------------------|----------|---------|
|                     |          |         |

### PERSONAL HISTORY

- |   |   |
|---|---|
| a. Are you presently in good health and entirely free from any mental or Physical impairment or deformity. If No, please attach details. <b>Y/N</b> | c. During the last 5 years have you been medically examined, received any advice or treatment or admitted to any hospital? <b>Y/N</b> |
| b. Have you undergone/been advised any surgical procedure? <i>cesarean delivery</i> <b>Y/N</b>  | d. Have you lost or gained weight in past 12 months? <b>Y/N</b>   |

### Have you ever suffered from any of the following?

- |  |   |
|--|---|
| • Psychological Disorders or any kind of disorders of the Nervous System? <b>Y/N</b> | • Any disorder of Gastrointestinal System? <b>Y/N</b>                               |
| • Any disorders of Respiratory system? <b>Y/N</b>                                    | • Unexplained recurrent or persistent fever, and/or weight loss <b>Y/N</b>          |
| • Any Cardiac or Circulatory Disorders? <b>Y/N</b>                                   | • Have you been tested for HIV/HBsAg / HCV before? If yes attach reports <b>Y/N</b> |
| • Enlarged glands or any form of Cancer/Tumour? <b>Y/N</b>                           | • Are you presently taking medication of any kind? <b>Y/N</b>                       |
| • Any Musculoskeletal disorder? <b>Y/N</b>   |   |

- Any disorders of Urinary System? **Y/N** ✓
- Any disorder of the Eyes, Ears, Nose, Throat or Mouth & Skin **Y/N** ✓

**FOR FEMALE CANDIDATES ONLY**

- a. Is there any history of diseases of breast/genital organs? **Y/N** ✓
- b. Is there any history of abnormal PAP Smear/Mammogram/USG of Pelvis or any other tests? (If yes attach reports) **Y/N** ✓
- c. Do you suspect any disease of Uterus, Cervix or Ovaries? **Y/N** ✓
- d. Do you have any history of miscarriage/abortion or MTP **Y/N** ✓
- e. For Parous Women, were there any complication during pregnancy such as gestational diabetes, hypertension etc **Y/N** ✓
- f. Are you now pregnant? If yes, how many months? **Y/N** ✓

**CONFIDENTIAL.COMMENTS FROM MEDICAL EXAMINER**

- Was the examinee co-operative? **Y/N**
- Is there anything about the examinee's health, lifestyle that might affect him/her in the near future with regard to his/her job? **Y/N**
- Are there any points on which you suggest further information be obtained? **Y/N**
- Based on your clinical impression, please provide your suggestions and recommendations below;

*lifestyle and diet modifications advised*

.....

.....

- Do you think he/she is **MEDICALLY FIT** or **UNFIT** for employment.
- FIT*

**MEDICAL EXAMINER'S DECLARATION**

I hereby confirm that I have examined the above individual after verification of his/her identity and the findings stated above are true and correct to the best of my knowledge.

Name & Signature of the Medical Examiner : *Dr. Austin Varghees*

Seal of Medical Examiner : *Austin V*  
**Dr. Austin Varghees**  
**MBBS**  
**TCMC Reg. No:77017**

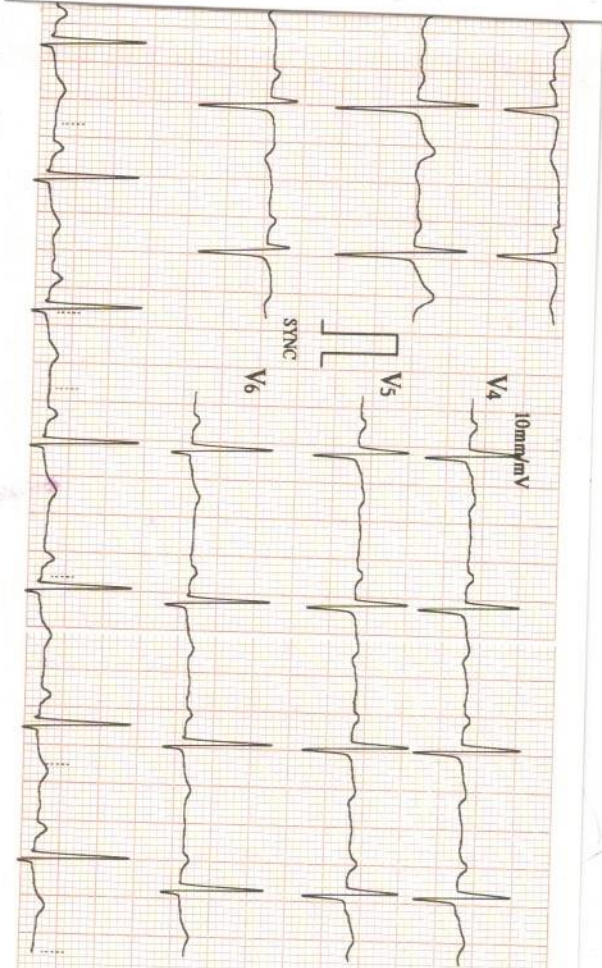


Name & Seal of DDRC SRL Branch :

Date & Time :

**DDRC agilus Pathlabs Limited.**

Corp. Office : Express House, Second Floor, Opp. Pothys Silks, Banerjee Road, Kaloor -682017  
 Contact :- 93334 93334, Web :- www.ddrcagilus.com Email :- info.ddrc@agilus.in



23/03/2024 13:32

ID : 4956

Name: APPARNA

AJITH

Sex : Female

Age : 32

HR : 81 bpm  
 R-R : 734 ms  
 P-R : 162 ms  
 QRS : 88 ms  
 QT/QTc : 362/422 ms  
 P/QRS/T : 34/32/46 °  
 RV5/SV1 : 0.720/0.730 mV  
 RV5-SV1 : 1.450 mV

V2-002 (BIOS: V2-004/AMP: V1-006)



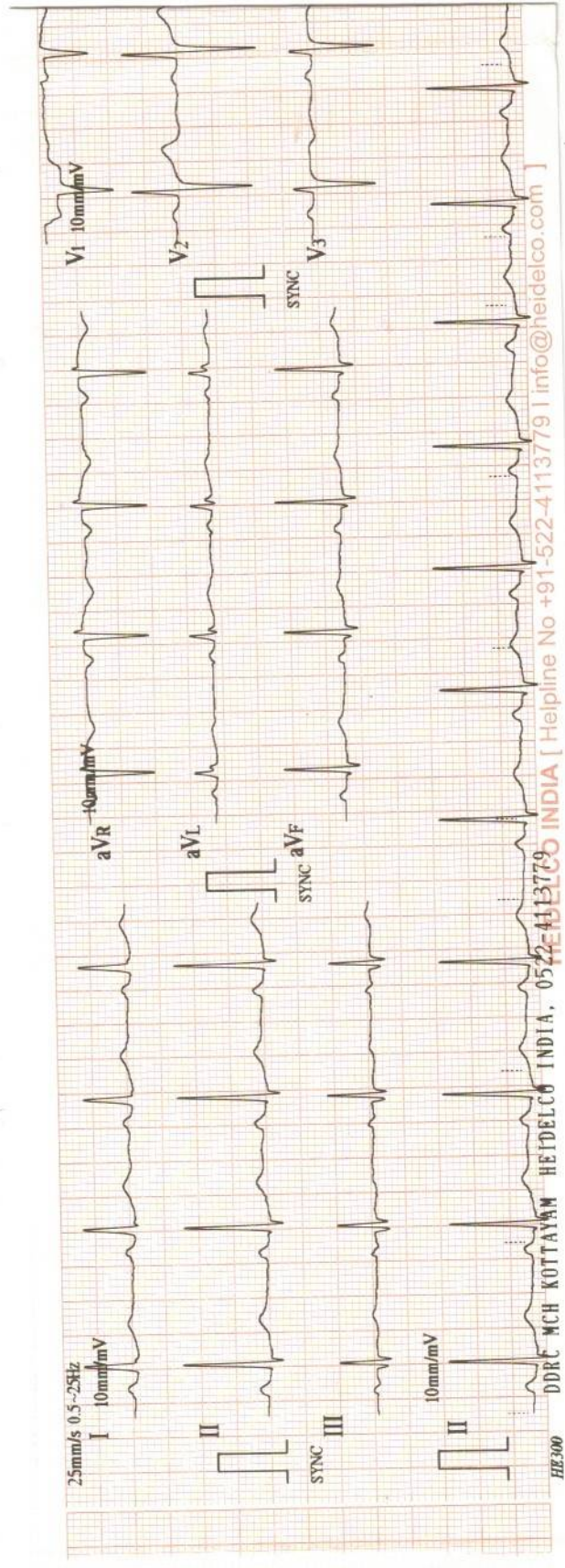
\*Machine Interpretation Only\*

Confirm with Physician

Physician:

HEIDELCO INDIA [ Helpline No +91-5222-4





**ECG REPORT**

ACCESSION NO : 4036XC003885  
NAME : APARNA AJITH  
AGE : 32  
SEX : FEMALE  
DATE : 23/03/2024  
COMPANY : MEDIWHEEL ARCOFEMI

RATE : 81 BPM

RHYTHM : NORMAL SINUS RHYTHM

P. WAVE : NORMAL

P-R INTERVAL : 162MS

Q,R,S,T. WAVES : NORMAL

AXIS : NORMAL

ARRHYTHMIAS : NIL

QT INTERVAL : 362MS

OTHERS : NIL

OPINION : NORMAL ECG



*Dr. Austin Varghees*  
**Dr. Austin Varghees**  
**MBBS**  
**TCMC Reg. No:77017**

R

DRC AGILUS GANDHINAGAR KOTTAYAM  
APARNA AJITH 35 Y 6920 F CHEST-PA 23-03-2024

**X - RAY CHEST - PA**

ACCESSION NO : 4036XC003885  
NAME : APARNA AJITH  
AGE : 32  
SEX : FEMALE  
DATE : 23/03/2024  
COMPANY : MEDIWHEEL

EXPOSURE : GOOD  
POSITIONING : CENTRAL  
SOFT TISSUES : NORMAL  
LUNG FIELDS : NORMAL  
HEART SHADOW : NORMAL  
CARDIOPHRENIC ANGLE : NO OBLITERATION  
COSTOPHRENIC ANGLE : NO OBLITERATION  
HILUM : NORMAL  
OTHERS : NIL  
OPINION : NORMAL CHEST X- RAY



*Austin Varghees*  
**Dr. Austin Varghees**  
MBBS  
TCMC Reg. No:77017

**OPHTHALMOLOGY REPORT**

ACCESSION NO: 4036XC003885

This is to certify that I have examined

MR /MS Aparna Ajith ..... Aged 32/F .....and

His / her visual standard is as follows.

Acuity of Vision

For Far            R 6/6 .....  
                          L 6/6 .....

For Near            R N6 .....  
                          L N6 .....

Colour Vision     NORMAL

DATE 23/03/2024



*Praveen*

OPTOMETRIST

**Name:** APARNA AJITH  
**Age/Sex:** 32 yrs/ F  
**Accession No:**4036XC003885

**Report Date:** 23.03.2024  
**Ref.by:** Mediwheel

### USG ABDOMEN & PELVIS

#### OBSERVATIONS:

- Liver:** Mildly enlarged in size (16.5 cm). Shows increased parenchymal echotexture. No focal parenchymal lesion noted. The biliary radicals appear normal. Portal vein is normal.
- Gall bladder:** Distended. No calculus seen. No e/o of any wall thickening / edema. No e/o any pericholecystic collection.
- CBD:** Not dilated.
- Spleen:** Normal in size and echotexture. No focal lesion.
- Pancreas:** Head and body appear normal. Tail obscured by bowel gas. No focal lesion. No calcification or duct dilatation noted.
- Kidneys:** Right kidney - Normal in position & size. Cortical echogenicity is normal. There is good cortico-medullary differentiation. No calculus or mass lesion seen. No hydronephrosis.  
 Left kidney - Normal in position & size. Cortical echogenicity is normal. There is good cortico-medullary differentiation. No calculus or mass lesion seen. No hydronephrosis.
- Ureters:** Not dilated.
- Urinary Bladder:** Minimally distended. Suboptimally evaluation of pelvic structure due to minimally distended bladder.
- Uterus:** Visualized part of uterus appears normal. ET- 3 mm.
- Ovaries:** Normal in size and morphology on both sides.
- Others:** No free fluid in the peritoneal cavity.

#### IMPRESSION:

- Mild hepatomegaly with grade I fatty infiltration.



**Dr. JACOB PAUL, MBBS, DMRD (DNB)**  
 Radiologist

Note: This is radiological opinion and not the final diagnosis. Ultrasound is limited by patient adiposity, bowel gas and correlate clinically and investigate further as needed.

Exam

|            |        |             |          |
|------------|--------|-------------|----------|
| Name       | 102    | Accession # |          |
| Birth Date | APARNA | Exam Date   | 23032024 |
| Gender     | Other  | Description |          |
|            |        | Sonographer |          |

[2D] G42/108dB/FA10/P90/FSI 1



[2D] G44/108dB/FA10/P90/FSI 1

