

## DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MRS. SHIVANI	IPD No.	:	
Age	: 27 Yrs 8 Days	UHID	:	AFD000014293
Gender	: FEMALE	Bill No.	:	AFDHC220000452
Ref. Doctor	: SELF	Bill Date	:	22-08-2022 10 08 38
Ward	:	Room No.	:	
		Print Date	:	22-08-2022 10 58 38

### USG WHOLE ABDOMEN

#### FINDINGS:

- Liver is normal in size (longitudinal span 11.4 cm), contour and echotexture. No evidence of any focal lesion is seen. No dilated intrahepatic biliary radicles are seen. Common duct and portal vein are normal in course and caliber.
- The gall bladder is well distended with normal wall thickness. No intraluminal calculi focal lesion seen. No pericholecystic pathology seen.
- *Visualized Pancreas is normal in size and parenchymal echogenicity. Rest of the pancreas and retroperitoneal structures are obscured by overlying bowel gas shadows.*
- Spleen is normal in size and echo pattern with no focal lesion.
- Both the kidneys are normal in size, shape and position. No evidence of any hydronephrosis is noted on either side. Normal corticomedullary differentiation is maintained bilaterally. The cortical thickness is within normal limits. The right kidney measures 10.2 x 4.1 cm. The left kidney measures 10.5 x 4.7 cm. No focal lesion/calculus noted in either kidney.
- The Urinary Bladder is well distended and shows anechoic contents. No focal lesion/calculus seen. There is no evidence of any obvious intraluminal or perivesical pathology.
- The Uterus is anteverted and is normal in size measuring 8.6 x 3.4 x 4.7 cm. Normal echogenicity of myometrium noted. No focal lesion seen. The endometrium measures 10.3 mm and appears normal. The uterine cavity is empty. The cervical endometrium is thin and regular.
- **Right ovary is bulky and measures 5.5 x 2.6 cm.** Left ovary is normal in size and echotexture. Left ovary measures 2.1 x 1.6 cm. **A large cyst of size 4.1 x 3.4 cms is seen in the left ovary.**
- No ascites/retroperitoneal lymphadenopathy/pleural effusion.

#### IMPRESSION:

- **Simple left ovarian cyst.**

*Please correlate clinically.*

.....End of Report.....



DR. BHANOO CHAUDHARY, MBBS, MD  
CONSULTANT

Prepare By.  
BHANOO

**Note :** The information in this report is based on interpretation of images. This report is not the diagnosis and should be correlated with clinical details and other investigation

## DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name.	: MRS. SHIVANI	IPD No.	:
Age	: 27 Yrs 8 Days	UHID	: AFD000014293
Gender	: FEMALE	Bill No.	: AFDHC220000452
Ref. Doctor	: SELF	Bill Date	: 22-08-2022 10:08:38
Ward	:	Room No.	:
		Print Date	: 22-08-2022 14:03:30

**CHEST PA VIEW:**

Cardiac shadow appears normal.

Both lung fields appear clear.

Both domes of diaphragm and both CP angles are clear.

Both hila appear normal.

Soft tissues and bony cage appear normal.

**Please correlate clinically.**

.....End of Report.....

Prepare By.  
BHANOO



**DR. BHANOO CHAUDHARY, MBBS, MD  
CONSULTANT**

**Note :** The information in this report is based on interpretation of images. This should be correlated with clinical details.



**OPD Assessment Form** (First visit/Follow-up)

Name : MRS. SHIVANI  
 HUSBAND : PIYUSH RAJ  
 Age / Gender : 27 Yrs 8 Days / FEMALE  
 CPG : CORPORATE CASHWAIMS2122\_FD  
 Inst. Name : Acrofemi Healthcare Ltd  
 Address : 88, SEC-37, FARIDABAD, HARYANA, INDIA

UHID No. : APD000014293  
 Date : 22-08-2022 10:00:30  
 Doctor / Unit : DR. UPASANA /  
 Department : OPHTHALMOLOGY

Present Complaints :

*for Regular checkup*

BP (mm Hg)  
 Pulse  
 RR  
 Ht/Length  
 Wt-  
 Pain Score (1-10)

Past / Family History :

—

Any known Allergies

—

History Given By :

Clinical Findings :

*Unlabeled G/LB N.V. G/LB Hls m os @ @ wof @ @*

Provisional Diagnosis :

*Computer Vision Syndrome*

**DR. UPASANA, MBBS, DOMS, FAEH, Consultant-OPHTHALMOLOGY, Reg. No: MCI 09/35142**

**Note :**  
 Nature of illness, prognosis, potential side effects of medication used, risk of allergic reaction, need for follow-up & monitoring has been explained to the Patient/attendants in their own language.  
**WHEN TO OBTAIN URGENT CARE :** In case high grade fever, recurrent vomiting, profuse diarrhea, severe oral ulcers, skin rash breathlessness, dizziness, loss of consciousness, bleeding from any site or new relevant/ alarming symptom

Investigations Advised :

Plan of Care :

Treatment Advice :

- 20/20 / 20 rule / frequent blurry  
 (Bt) Refresh liquid eye gel. once at night  
 gatel eye gel. work  
 (u)

Nutritional Screening :

Required  (If required, please contact, the dietician)  
 Not Required

Signature of Doctor / Consultant:  Date: 22/8/2022 Time: \_\_\_\_\_

20.08.2022 10:24:41  
ASIAN FIDELIS HOSPITAL  
SEC-88 FARIDABAD HARYANA  
RPS CITY

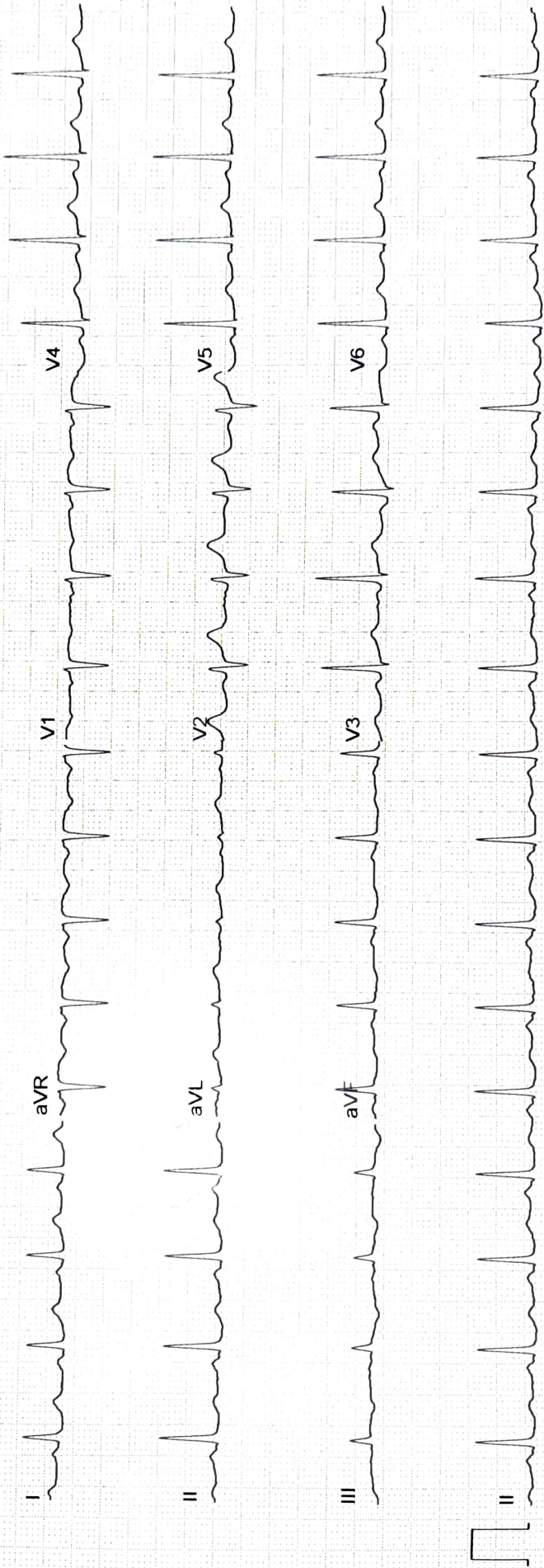
QRS : 70 ms  
QT / QTcBaz : 346 / 457 ms  
PR : 140 ms  
P : 102 ms  
RR / PP : 568 / 571 ms  
P / QRS / T : 40 / 52 / -3 degrees

Sinus tachycardia  
Otherwise normal ECG

Location:  
Room:  
Order Number:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

105 bpm  
-- / -- mmHg



**FINAL REPORT**

Bill No. :	AFDHC220000452	Bill Date :	22-08-2022 10:08
Patient Name :	MRS. SHIVANI	UHID :	AFD000014293
Age / Gender :	27 Yrs 9 Days / FEMALE	Patient Type :	OPD If PHC :
Ref. Consultant :	SELF	Ward / Bed :	/
Sample ID :	AFD22014400	Current Ward / Bed :	/
		Receiving Date & Time :	22-08-2022 14:38
		Reporting Date & Time :	22-08-2022 15:38

**BIOCHEMISTRY REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Plasma, Serum

**MEDIWHEEL PKG FOR FEMALE BELOW 40YRS**

CHOLESTROL-TOTAL (OHO-POD)	H	195	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immunoinhibition		52	mg/dL	>45
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection	H	130	mg/dL	0 - 100
S.TRYGLYCERIDES (GPO - POD)	H	209	mg/dL	0 - 160
NON-HDL CHOLESTROL	H	143.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		3.8		½Average Risk <3.3 Average Risk 3.3 - 4.4 2 Times Average Risk 4.5 - 7.1 3 Times Average Risk 7.2-11.0
LDL CHOLESTROL / HDL CHOLESTROL		2.5		½Average Risk <1.5 Average Risk 1.5-3.2 2 Times Average Risk 3.3-5.0 3 Times Average Risk 5.1-6.1
CHOLESTROL-VLDL		35	mg/dL	10 - 35

**Comments:**

- Disorders of Lipid metabolism play a major role in atherosclerosis and coronary heart disease.
- There is an established relationship between increased total cholesterol & LDL cholesterol and myocardial infarction.
- HDL cholesterol level is inversely related to the incidence of coronary artery disease.
- Major risk factors which adversely affect the lipid levels are:
  - Cigarette smoking.
  - Hypertension.
  - Family history of premature coronary heart disease.
  - Pre-existing coronary heart disease.

**LIVER FUNCTION TESTS (LFT)**

BILIRUBIN-TOTAL (DPD)		0.80	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)		0.13	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.67	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)	H	8.4	g/dL	6 - 8.1
ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.7	g/dL	
S.GLOBULIN		3.7	g/dL	2.8-3.8
A/G RATIO	L	1.27		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC AMP BUFFER)		74.3	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (IFCC)		26.4	IU/L	10 - 42
ALANINE AMINO TRANSFERASE (IFCC)		24.7	IU/L	10 - 40
GAMMA-GLUTAMYL TRANSPEPTID (IFCC)		23.9	IU/L	7 - 35
LACTATE DEHYDROGENASE (IFCC; L-P)		212.4	IU/L	0 - 248

**\*\* End of Report \*\***



**FINAL REPORT**

Bill No. : AFDHC220000452	Bill Date : 22-08-2022 10:08
Patient Name : MRS. SHIVANI	UHID : AFD000014293
Age / Gender : 27 Yrs 9 Days / FEMALE	Patient Type : OPD If PHC :
Ref. Consultant : SELF	Ward / Bed : /
Sample ID : AFD22014366	Current Ward / Bed : /
	Receiving Date & Time : 22-08-2022 11:15
	Reporting Date & Time : 22-08-2022 13:03

**HAEMATOLOGY REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type EDTA Whole Blood

**MEDIWHEEL PKG FOR FEMALE BELOW 40YRS**

**CBC -1 (COMPLETE BLOOD COUNT)**

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		11.0	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.3	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS HI Detection)		14.2	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)		40.9	%	36 - 46
MEAN CORPUSCULAR VOLUME		95.9	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN	H	33.4	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION	H	34.8	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		305	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	56.1	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	14.5	%	11.6 - 14

**DIFFERENTIAL LEUCOCYTE COUNT**

NEUTROPHILS		62	%	40 - 80
LYMPHOCYTES		29	%	20 - 40
MONOCYTES		7	%	2 - 10
EOSINOPHILS		2	%	1 - 5
BASOPHILS		0	%	0 - 1
ESR (Westergren)	H	21	mm 1st hr	0 - 20

**\*\* End of Report \*\***

**IMPORTANT INSTRUCTIONS**

CL - Critical Low, CH - Critical High, H - High, L - Low  
Test marked with \* is not under NABL scope.

*Richa Kaushik*

**DR. RICHA KAUSHIK MISHRA**  
MBBS, DNB  
CONSULTANT



**FINAL REPORT**

Bill No.	: AFDHC220000452	Bill Date	: 22-08-2022 10:08
Patient Name	: MRS. SHIVANI	UHID	: AFD000014293
Age / Gender	: 27 Yrs 9 Days / FEMALE	Patient Type	: OPD <span style="float:right">If PHC : </span>
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22014400	Current Ward / Bed	: /
		Receiving Date & Time	: 22-08-2022 14:38
		Reporting Date & Time	: 22-08-2022 15:38

Sample Type: Plasma, Serum

**MEDIWHEEL PKG FOR FEMALE BELOW 40YRS**

GLUCOSE-PLASMA (FASTING) (UV Hexokinase)		88.5	mg/dL	70 - 100
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Note: A diagnosis of diabetes mellitus is made if fasting blood glucose exceeds 126 mg/dL.  
(As per American Diabetes Association recommendation)

GLUCOSE-PLASMA (POST PRANDIAL) (UV Hexokinase)		101.2	mg/dL	70 - 140
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Note: A diagnosis of diabetes mellitus is made if 2 hour post load glucose exceeds 200 mg/dL.  
(As per American Diabetes Association recommendation)

**KFT/RFT- KIDNEY/RENAL PANEL 1**

BLOOD UREA (Urease-GLDH,Kinetic)		22	mg/dL	15 - 45
CREATININE-SERUM (Modified Jaffe's Kinetic)		0.6	mg/dL	0.6 - 1.1
SODIUM-SERUM (Indirect Ion-Selective Electrode)		143	m.mol/L	135 - 145
POTASSIUM-SERUM (Indirect Ion-Selective Electrode)	<b>H</b>	<b>5.4</b>	m.mol/L	3.5 - 5.1
CHLORIDE-SERUM (Indirect Ion-Selective Electrode)		102	m.mol/L	98 - 107

**\*\* End of Report \*\***

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**FINAL REPORT**

Bill No.	: AFDHC220000452	Bill Date	: 22-08-2022 10 08
Patient Name	: MRS. SHIVANI	UHID	: AFD000014293
Age / Gender	: 27 Yrs 9 Days / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22014392	Current Ward / Bed	: /
		Receiving Date & Time	: 22-08-2022 13 17
		Reporting Date & Time	: 22-08-2022 15.48

**CLINICAL PATH REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Urine

**MEDIWHEEL PKG FOR FEMALE BELOW 40YRS**

**URINE, ROUTINE EXAMINATION**

**PHYSICAL EXAMINATION**

QUANTITY	40 mL		
COLOUR	Pale yellow		Pale Yellow
TURBIDITY	Clear		

**CHEMICAL EXAMINATION**

PH	5.0		5.0 - 8.5
PROTEINS	Negative		Negative
SUGAR	Negative		Negative
SPECIFIC GRAVITY, URINE	L 1.005		1.005 - 1.030

**MICROSCOPIC EXAMINATION**

LEUCOCYTES	1-2	/HPF	0 - 5
RBC's	Nil		
EPITHELIAL CELLS	4-5		
CASTS	Nil		
CRYSTALS	Nil		
OTHERS	Budding yeast cells seen.		

**\*\* End of Report \*\***

**IMPORTANT INSTRUCTIONS**

CL - Critical Low, CH - Critical High, H - High, L - Low  
Test marked with \* is not under NABL scope.

**DR. RICHA KAUSHIK MISHRA**  
MBBS, DNB  
CONSULTANT

**FINAL REPORT**

Bill No.	: AFBCB220002659	Bill Date	: 22-08-2022 12:04
Patient Name	: MRS. SHIVANI	UHID	: AFD000014293
Age / Gender	: 27 Yrs 9 Days / FEMALE	Patient Type	: <input type="checkbox"/> If PHC <input type="checkbox"/>
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFB22266358	Current Ward / Bed	: /
		Receiving Date & Time	: 22-08-2022 14:43
		Reporting Date & Time	: 22-08-2022 16:53

**SEROLOGY REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Serum

**\*THYROID PROFILE (FT3+FT4+TSH)**

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		3.38	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.01	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)		2.12	mIU/L	0.27-4.20

**\*\* End of Report \*\***

**IMPORTANT INSTRUCTIONS**

CL - Critical Low, CH - Critical High, H - High, L - Low  
Test marked with \* is not under NABL scope.



**DR. UMA R**  
MD, PATHOLOGY  
Sr. Consultant & Head of the Deptt.



**FINAL REPORT**

Bill No.	: AFDHC220000452	Bill Date	: 22-08-2022 10:08
Patient Name	: MRS. SHIVANI	UHID	: AFD000014293
Age / Gender	: 27 Yrs 10 Days / FEMALE	Patient Type	: OPD <span style="float:right">If PHC : </span>
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22014368	Current Ward / Bed	: /
		Receiving Date & Time	: 22-08-2022 11:15
		Reporting Date & Time	: 22-08-2022 13:00

**BIOCHEMISTRY REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Serum

**MEDIWHEEL PKG FOR FEMALE BELOW 40YRS**

**KFT/RFT- KIDNEY/RENAL PANEL 1**

BLOOD UREA <small>Urease-GLDH, Kinetic</small>		22	mg/dL	15 - 45
CREATININE-SERUM <small>(Modified Jaffe s Kinetic)</small>		0.6	mg/dL	0.6 - 1.1
SODIUM-SERUM <small>(Indirect Ion-Selective Electrode)</small>		143	m.mol/L	135 - 145
POTASSIUM-SERUM <small>(Indirect Ion-Selective Electrode)</small>	H	5.4	m.mol/L	3.5 - 5.1
CHLORIDE-SERUM <small>(Indirect Ion-Selective Electrode)</small>		102	m.mol/L	98 - 107

**\*\* End of Report \*\***

### NON INVASIVE CARDIOLOGY

Patient Name	: MRS. SHIVANI	IPD No.	:
Age	: 27 Yrs 8 Days	UHID	: AFD000014293
Gender	: FEMALE	Bill No.	: AFDHC220000452
Ref. Doctor	: SELF	Bill Date	: 22-08-2022 10:08:38
Ward	:	Room No.	:
		Procedure Date	: 22-08-2022 10:59:56

### ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

MEASUREMENTS	ABSOLUTE VALUE		NORMAL VALUE
Aortic Root Diameter	2.5		2.0-3.7cm < 2.2cm/M2
Aortic Valve Opening	N		1.5-2.6cm
Left Atrial Dimension	3.2		1.9-4.0cm < 2.2cm/M2
RV Dimensions	N		0.7-2.6cm
RV thickness	N		0.3-0.9cm
LV ED Dimension	4.2		3.7-5.6 cm < 3.2cm /M2
LV ES Dimension	2.9		2.2-4.0 cm
IVS thickness	ED - 0.9	ES-1.1	0.6-1.2cm
LVPW Thickness	ED - 0.7	ES-0.8	0.5-1.1cm
IVS/ LVPW Ratio	N		
Mitral Valve	DE-N	EF -N	

<b>INDICES OF LV FUNCTION</b>		
EPSS		<9mm
FS%	30 %	24-42%
LV Ejection Fraction	60 %	60+/-6%

## NON INVASIVE CARDIOLOGY

Patient Name	: MRS. SHIVANI	IPD No.	:
Age	: 27 Yrs 8 Days	UHID	: AFD000014293
Gender	: FEMALE	Bill No.	: AFDHC220000452
Ref. Doctor	: SELF	Bill Date	: 22-08-2022 10:08:38
Ward	:	Room No.	:
		Procedure Date	: 22-08-2022 10:59:56

### IMAGING:

2D- imaging in PLAX.SAX and apical views revealed normal left ventricle. Movement of septum, posterior and lateral walls are normal. Global LVEF is 60%. Mitral valve opening is normal. No evidence of mitral valve prolapse is seen. Aortic valve has three cusps and its opening is not restricted. Tricuspid valve leaflets move normally. Pulmonary valve is normal. Interatrial and Interventricular septal are intact, No intracardiac mass or thrombus is seen. No pericardial pathology is observed.

### MORPHOLOGICAL DATA

Mitral Valve : AML PML	Normal	Interatrial Septum	Intact
Aortic Valve	Normal	Interventricular Septum	Intact
Tricuspid Valve	Normal	Pulmonary Artery	Normal
Pulmonary Valve	Normal	Aorta	Normal
Right Ventricle	Normal	Right Atrium	Normal
Left Ventricle	Normal	Left Atrium	Normal

### DOPPLER STUDY

MITRAL VELOCITY	m/s E-0.6	m/s A-0.5	
TRICUSPID VELOCITY	1.2 m/s		MR 0/4
AORTIC VELOCITY	1.0 m/s		TR 0/4
PULMONARY VELOCITY	1.1 m/s		AR 0/4
PA Pressure			PR 0/4