

Patient Name : Miss.C SHRUTHI	Collected : 01/Apr/2023 09:01AM
Age/Gender : 32 Y 6 M 0 D/F	Received : 01/Apr/2023 02:23PM
UHID/MR No : CBAS.0000086799	Reported : 01/Apr/2023 04:00PM
Visit ID : CBASOPV90906	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SE199426	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GLUCOSE, FASTING , NAF PLASMA	98	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines

Fasting Glucose Values in mg/d L	Interpretation
<100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes



Patient Name : Miss.C SHRUTHI	Collected : 01/Apr/2023 09:01AM
Age/Gender : 32 Y 6 M 0 D/F	Received : 01/Apr/2023 01:30PM
UHID/MR No : CBAS.0000086799	Reported : 01/Apr/2023 03:39PM
Visit ID : CBASOPV90906	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : SE199426	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE (TOTAL T3, TOTAL T4, TSH) , SERUM				
TRI-IODOTHYRONINE (T3, TOTAL)	1.24	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	10.67	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	1.411	µIU/mL	0.34-5.60	CLIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0

***** End Of Report *****

Result/s to Follow:

PERIPHERAL SMEAR, URINE GLUCOSE(FASTING), HBA1C, GLYCATED HEMOGLOBIN, LIVER FUNCTION TEST (LFT), LIPID PROFILE, URINE GLUCOSE(POST PRANDIAL), HEMOGRAM, RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT), BLOOD GROUP ABO AND RH FACTOR, GAMMA GLUTAMYL TRANSFERASE (GGT), COMPLETE URINE EXAMINATION, GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)

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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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Dr. Anita Shobha Flynn
M.B.B.S MD(Pathology)
Consultant Pathologist



Patient Name : Miss. C SHRUTHI

Age/Gender : 32 Y/F

UHID/MR No. : CBAS.0000086799

OP Visit No : CBASOPV90906

Sample Collected on :

Reported on : 01-04-2023 14:20

LRN# : RAD1965970

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : SE199426

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lungs fields appears normal and shows normal bronchovascular markings.

Bilateral hila appears normal.

Cardiac silhouette appears normal.

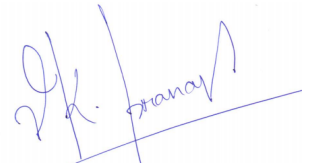
Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

IMPRESSION:

No obvious abnormality seen in the present study.



Dr. V K PRANAV VENKATESH
MBBS,MD
Radiology

Patient Name : Miss. C SHRUTHI

Age/Gender : 32 Y/F

UHID/MR No. : CBAS.0000086799

OP Visit No : CBASOPV90906

Sample Collected on :

Reported on : 01-04-2023 13:54

LRN# : RAD1965970

Specimen :

Ref Doctor : SELF

Emp/Auth/TPA ID : SE199426

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver: appears normal in size (12 cm) and appears normal in echotexture. No focal lesion is seen. Portal vein and Common Bile Duct appear normal. No dilatation of the intrahepatic biliary radicals.

Gall bladder is well distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

Spleen appears normal. No focal lesion seen. Splenic vein appears normal.

Pancreas obscured

Right kidney seen in right renal pelvis measuring 8x0.9 cm

Left kidney appear normal in size 9.7x1.0 cm, shape and echopattern. Cortical thickness and Cortico-medullary differentiation are maintained.

Urinary Bladder is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

Uterus appears normal in size and measuring 6.3x3.2x3.1 cm. It shows normal shape & echopattern. Endometrial echo-complex appears normal and measures 7 mm.

Both ovaries appear normal in size, shape and echotexture.

Right ovary measuring 2.4x2.5x3.2 cm volume 10 cc and **left ovary** measuring 3.2x2.1x3.6 cm volume 12 cc. No evidence of any adnexal pathology noted.

- **No thickened or tender bowel loops. No mass lesion. No ascites / pleural effusion.**

IMPRESSION:-

Bilateral Polycystic Ovarian .

Suggested clinical correlation.

The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose.



Dr. V K PRNAV VENKATESH
MBBS,MD
Radiology