

Patient Name : Mr.KIRTIRATAN GODBOLE	Collected : 15/Jul/2023 09:39AM
Age/Gender : 36 Y 6 M 7 D/M	Received : 15/Jul/2023 10:53AM
UHID/MR No : CKON.0000412975	Reported : 15/Jul/2023 11:37AM
Visit ID : CKONOPV591036	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 654214	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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HEMOGRAM , WHOLE BLOOD-EDTA

HAEMOGLOBIN	15.2	g/dL	13-17	Spectrophotometer
PCV	44.00	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.99	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	88	fL	83-101	Calculated
MCH	30.4	pg	27-32	Calculated
MCHC	34.5	g/dL	31.5-34.5	Calculated
R.D.W	11.7	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	9,700	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	68	%	40-80	Electrical Impedence
LYMPHOCYTES	24	%	20-40	Electrical Impedence
EOSINOPHILS	03	%	1-6	Electrical Impedence
MONOCYTES	05	%	2-10	Electrical Impedence
BASOPHILS	00	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	6596	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	2328	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	291	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	485	Cells/cu.mm	200-1000	Electrical Impedence
PLATELET COUNT	265000	cells/cu.mm	150000-410000	Electrical impedence

ERYTHROCYTE SEDIMENTATION RATE (ESR)	08	mm at the end of 1 hour	0-15	Modified Westergren
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PERIPHERAL SMEAR

RBC NORMOCYTIC NORMOCHROMIC
WBC WITHIN NORMAL LIMITS
PLATELETS ARE ADEQUATE ON SMEAR
NO HEMOPARASITES SEEN

SIN No:BED230165187

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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD-EDTA				
BLOOD GROUP TYPE	A			Forward & Reverse Grouping with Slide/Tube Aggluti
Rh TYPE	POSITIVE			Forward & Reverse Grouping with Slide/Tube Agglutination

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Patient Name : Mr.KIRTIRATAN GODBOLE	Collected : 15/Jul/2023 01:16PM
Age/Gender : 36 Y 6 M 7 D/M	Received : 15/Jul/2023 03:38PM
UHID/MR No : CKON.0000412975	Reported : 15/Jul/2023 04:00PM
Visit ID : CKONOPV591036	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	94	mg/dL	70-100	GOD - POD
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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

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , NAF PLASMA	87	mg/dL	70-140	GOD - POD
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Post Prandial blood sugar is less than Fasting level due to the following causes. Inappropriate Insulin release. Post absorptive hypoglycemia Please ensure that you had taken adequate meal after giving fasting sample. Please provide clinical details.

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Ref: Marks medical biochemistry and clinical approach



Patient Name : Mr.KIRTIRATAN GODBOLE	Collected : 15/Jul/2023 09:39AM
Age/Gender : 36 Y 6 M 7 D/M	Received : 15/Jul/2023 12:04PM
UHID/MR No : CKON.0000412975	Reported : 15/Jul/2023 12:57PM
Visit ID : CKONOPV591036	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

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Test Name	Result	Unit	Bio. Ref. Range	Method
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HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD-EDTA	5.2	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD-EDTA	103	mg/dL		Calculated

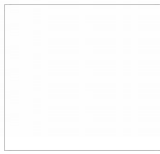
Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING DIABETES	≥ 6.5
DIABETICS	
· EXCELLENT CONTROL	6 – 7
· FAIR TO GOOD CONTROL	7 – 8
· UNSATISFACTORY CONTROL	8 – 10
· POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control



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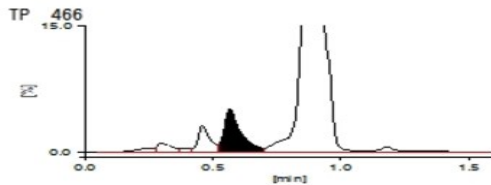
Chromatogram Report

I V5.28 1 2023-07-15 12:40:30
 ID EDT230065456
 Sample No. 07150069 SL 0006 - 01
 Patient ID
 Name
 Comment

CALIB Name	%	Time	Area
A1A	0.5	0.23	7.48
A1B	0.7	0.30	11.70
F	0.2	0.39	3.73
LA1C+	1.8	0.46	27.85
SA1C	5.2	0.57	64.82
A0	92.9	0.88	1461.44
H-V0			
H-V1			
H-V2			

Total Area 1577.02

HbA1c 5.2 % **IFCC 33 mmol/mol**
 HbA1 6.4 % HbF 0.2 %



SIN No:EDT230065456

Apollo Health and Lifestyle Limited, Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	224	mg/dL	<200	CHE/CHO/POD
TRIGLYCERIDES	161	mg/dL	<150	Enzymatic
HDL CHOLESTEROL	45	mg/dL	>40	CHE/CHO/POD
NON-HDL CHOLESTEROL	179	mg/dL	<130	Calculated
LDL CHOLESTEROL	146.8	mg/dL	<100	Calculated
VLDL CHOLESTEROL	32.2	mg/dL	<30	Calculated
CHOL / HDL RATIO	4.98		0-4.97	Calculated

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



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Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM				
BILIRUBIN, TOTAL	0.90	mg/dL	0.20-1.20	DIAZO METHOD
BILIRUBIN CONJUGATED (DIRECT)	0.20	mg/dL	0.0-0.3	Calculated
BILIRUBIN (INDIRECT)	0.70	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	58	U/L	<50	Visible with P-5-P
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	37.0	U/L	17-59	UV with P-5-P
ALKALINE PHOSPHATASE	123.00	U/L	38-126	p-nitrophenyl phosphate
PROTEIN, TOTAL	7.80	g/dL	6.3-8.2	Biuret
ALBUMIN	4.50	g/dL	3.5 - 5	Bromocresol Green
GLOBULIN	3.30	g/dL	2.0-3.5	Calculated
A/G RATIO	1.36		0.9-2.0	Calculated

SIN No:SE04424386

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Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM				
CREATININE	0.80	mg/dL	0.66-1.25	Creatinine amidohydrolase
UREA	24.70	mg/dL	19-43	Urease
BLOOD UREA NITROGEN	11.5	mg/dL	8.0 - 23.0	Calculated
URIC ACID	7.20	mg/dL	3.5-8.5	Uricase
CALCIUM	9.50	mg/dL	8.4 - 10.2	Arsenazo-III
PHOSPHORUS, INORGANIC	3.40	mg/dL	2.5-4.5	PMA Phenol
SODIUM	138	mmol/L	135-145	Direct ISE
POTASSIUM	4.3	mmol/L	3.5-5.1	Direct ISE
CHLORIDE	102	mmol/L	98 - 107	Direct ISE

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Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	50.00	U/L	15-73	Glycylglycine Nitoranalide

SIN No:SE04424386

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DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	1.23	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.34	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	6.441	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



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DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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COMPLETE URINE EXAMINATION (CUE) , URINE

PHYSICAL EXAMINATION

COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
pH	5.5		5-7.5	DOUBLE INDICATOR
SP. GRAVITY	1.020		1.002-1.030	Bromothymol Blue

BIOCHEMICAL EXAMINATION

URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GLUCOSE OXIDASE
URINE BILIRUBIN	NEGATIVE		NEGATIVE	AZO COUPLING REACTION
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	SODIUM NITRO PRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	MODIFIED EHRlich REACTION
BLOOD	NEGATIVE		NEGATIVE	Peroxidase
NITRITE	NEGATIVE		NEGATIVE	Diazotization
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	LEUCOCYTE ESTERASE

CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY

PUS CELLS	4-6	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-3	/hpf	<10	MICROSCOPY
RBC	NIL	/hpf	0-2	MICROSCOPY
CASTS	NIL		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

SIN No:UR2148515

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016 | www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

APOLLO CLINICS NETWORK

Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) Andhra Pradesh: Vizag (Seethamma Peta) Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (VV Mohalla) Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) Uttar Pradesh: Ghaziabad (Indrapuram) Gujarat: Ahmedabad (Satellite) Punjab: Amritsar (Court Road) Haryana: Faridabad (Railway Station Road)

Address: The Apollo Medical Centre, 2-20/6/A, Kothaguda X Roads, Kondapur, Hyderabad, Telangana, India - 500032



Patient Name : Mr.KIRTIRATAN GODBOLE	Collected : 15/Jul/2023 09:39AM
Age/Gender : 36 Y 6 M 7 D/M	Received : 15/Jul/2023 11:56AM
UHID/MR No : CKON.0000412975	Reported : 15/Jul/2023 12:31PM
Visit ID : CKONOPV591036	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 654214	

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	Dipstick

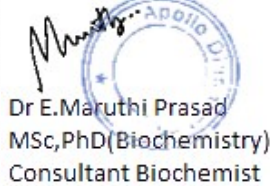
***** End Of Report *****

Result/s to Follow:

GLUCOSE (POST PRANDIAL) - URINE, PERIPHERAL SMEAR



Dr.Sukumar Sannidhi
MD(Path)
Consultant Pathologist



Dr E.Maruthi Prasad
MSc,PhD(Biochemistry)
Consultant Biochemist

SIN No:UF009029

Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)

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Address:
The Apollo Medical Centre, 2-20/6/A, Kothaguda X Roads, Kondapur,
Hyderabad, Telangana, India - 500032



1860 500 7788
www.apolloclinic.com

Customer Pending Tests
ophthal test and x-ray test

Patient Name	: Mr. KIRTIRATAN GODBOLE	Age	: 36 Y/M
UHID	: CKON.0000412975	OP Visit No	: CKONOPV591036
Reported By:	: Dr. VENKATA RAYUDU NEKKANTI	Conducted Date	: 15-07-2023 13:41
Referred By	: SELF		

ECG REPORT

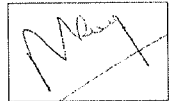
Observation :-

1. Normal Sinus Rhythm.
2. Heart rate is 92 beats per minutes.
3. No pathological Q wave or S-T,T changes seen.
4. Normal P,Q,R,S,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement seen.

Impression:

WITH IN NORMAL LIMITS

----- END OF THE REPORT -----



Dr. VENKATA RAYUDU NEKKANTI

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC046089) Regd. Office: 7-1-617/A, 7th Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana. | Email ID: enquiry@apollohl.com

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Hyderabad (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Manikonda | Nallakunta | Nizampet | Uppal)

Vizag (Seethamma Peta)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Name: Mr. KIRITRATAN GODBOLE
 Age/Gender: 36 Y/M
 Address: HYD
 Location: HYDERABAD, TELANGANA
 Doctor: GENERAL
 Department: KONDAPUR_06042023
 Rate Plan: ARCOFEMI HEALTHCARE LIMITED
 Sponsor:

MR No: CKON 0000412975
 Visit ID: CKONOPV591036
 Visit Date: 15-07-2023 09:16
 Discharge Date:
 Referred By: SELF

Vitals:

Date	Pulse (Beats/min)	B.P (mmHg)	Resp (Rate/min)	Temp (F)	Height (cms)	Weight (Kgs)	Body Fat Percentage (%)	Visceral Fat Level (%)	Body Age (Years)	BMI	Waist Circum (cms)	Hip (cms)	Waist (cms)	Waist & Hip Ratio	User
15-07-2023	92	110/70		F	167	74 Kgs	%	%	Years	26.53	103 cms	107	104		AHILL09485
14:37	Beats/min	mmHg	Rate/min	F	cms	Kgs	%	%	Years		cms	cms	cms		

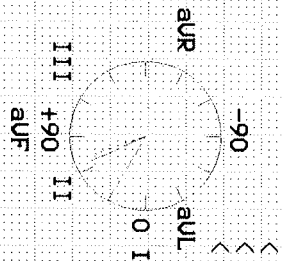
AGE: 36

Interpretation:

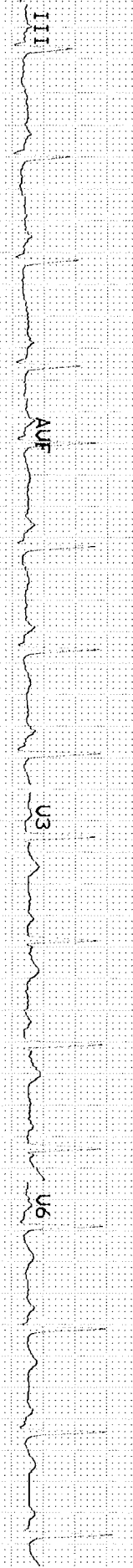
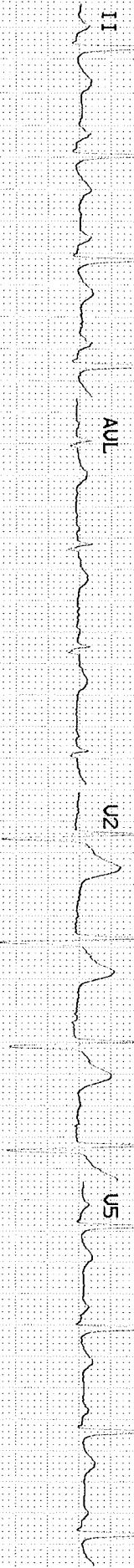
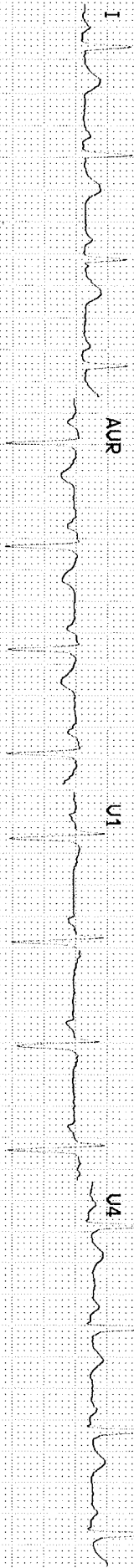
R/S inversion area between U1 and U2 probably normal ECG

Measurement Results:

QRS	88 ms
QT/QTcB	348 / 433 ms
PR	140 ms
P	106 ms
RR/PP	646 / 630 ms
P/QRS/T	70 / 65 / 30 degrees
QTd/QTcBd	74 / 92 ms
Sokolow NK	2.4 mV 14



Unconfirmed report.



Patient Name	: Mr. KIRTIRATAN GODBOLE	Age	: 36 Y/M
UHID	: CKON.0000412975	OP Visit No	: CKONOPV591036
Conducted By:	: Dr. VENKATA RAYUDU NEKKANTI	Conducted Date	: 16-07-2023 08:38
Referred By	: SELF		

2D-ECHO WITH COLOUR DOPPLER

Dimensions:

Ao (ed)	3.17 CM
LA (es)	2.69 CM
LVID (ed)	3.99 CM
LVID (es)	2.67CM
IVS (Ed)	0.87 CM
LVPW (Ed)	0.75 CM
EF	64.00%
%FD	38.00%

MITRAL VALVE : NORMAL

AML NORMAL

PML NORMAL

AORTIC VALVE NORMAL

TRICUSPID VALVE NORMAL

RIGHT VENTRICLE NORMAL

INTER ATRIAL SEPTUM INTACT

INTER VENTRICULAR SEPTUM INTACT

AORTA NORMAL

RIGHT ATRIUM NORMAL

LEFT ATRIUM NORMAL

Pulmonary Valve NORMAL

PERICARDIUM NORMAL

LEFT VENTRICLE:

NO REGIONAL WALL MOTION ABNORMALITY

COLOUR AND DOPPLER STUDIES

MILD M.R

Apollo Health and Lifestyle Limited

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APOLLO CLINICS NETWORK

Andhra Pradesh: **Tirupati** (Sankarambadi Circle) **Vizag** (Seethamma Peta)

Telangana: **Hyderabad** (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Nallakunta | Nizampet | SR Nagar | Vanasthalipuram)


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TO BOOK AN APPOINTMENT



1860 500 7788

IMPRESSION :-
MILD MITRAL REGURGITATION
OTHERWISE NORMAL



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Vizag (Seethamma Peta)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

Name	Mr. Kirthyatam G	Date	15/7/23
Age	36y	UHID No.	412975
<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Ref. Physician	DR. Venkata Rajender
Ref. Diagnosis			

Echocardiogram Report

Echogenicity Poor Adequate Good Ht. _____ Wt. _____ BSA _____

DIMENSIONS	NORMAL	DIMENSIONS	NORMAL
Ao (ed) <u>3.17</u> cm	(1.5cm / m2)	IVS (Ed) <u>0.87</u> cm	(0.6 - 1.2 cm)
LA (es) <u>2.69</u> cm	(1.5cm / m2)	LVPW (Ed) <u>0.75</u> cm	(0.6 - 1.1 cm)
RVID (ed) _____ cm	(0.9 cm / m2)	EF <u>64%</u>	(0.62 - 0.85)
LVID (ed) <u>3.99</u> cm	(2.6 - 3.4 cm / m2)	% FD <u>38%</u>	(2.8% - 42%)
LVID (es) <u>2.57</u>			

MORPHOLOGICAL DATA

Mitral Valve AML N
 PML N

Aortic Valve _____

Tricuspid valve _____

Pulmonary valve _____

Right ventricle _____

Interatrial septum _____

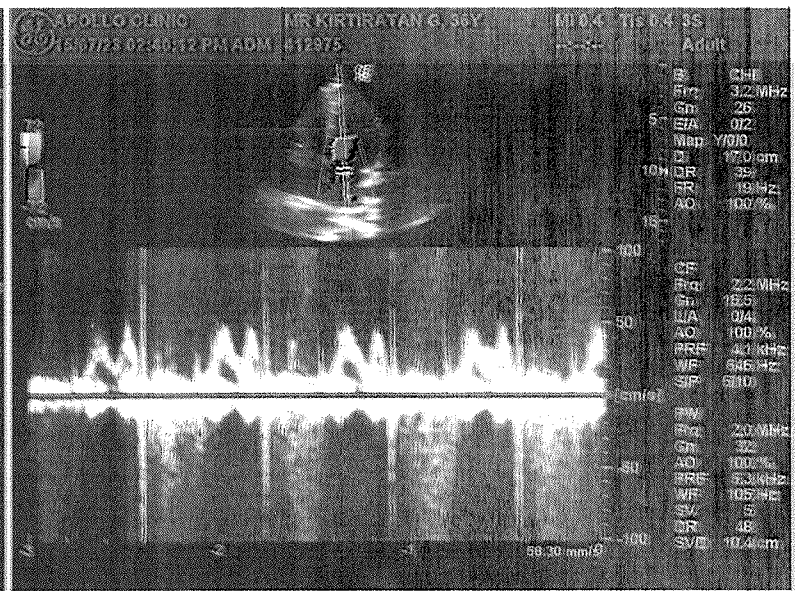
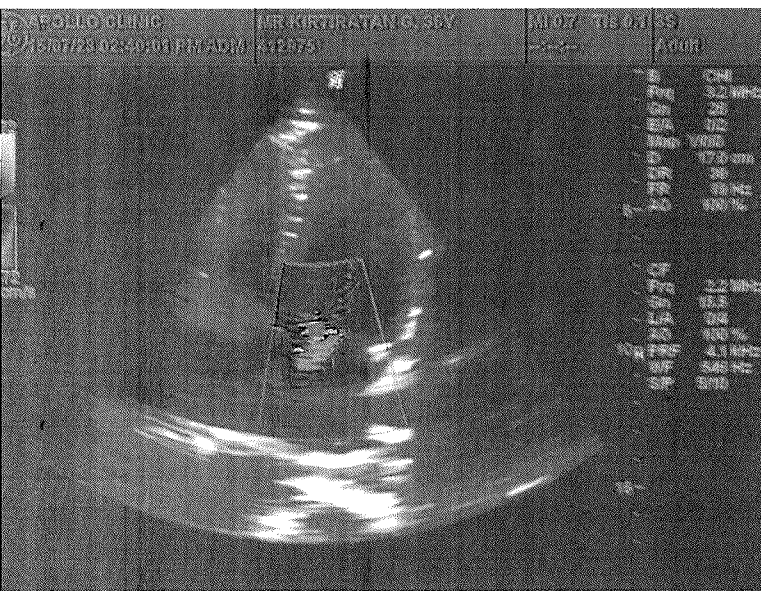
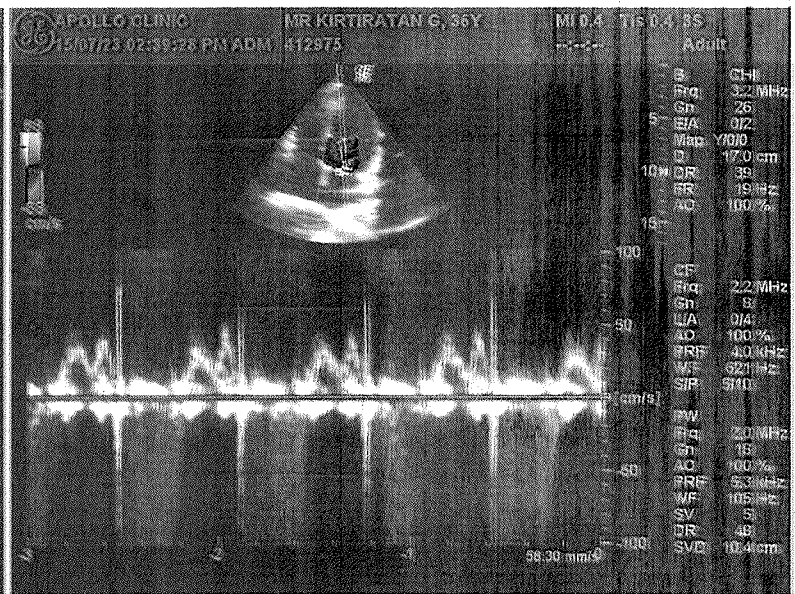
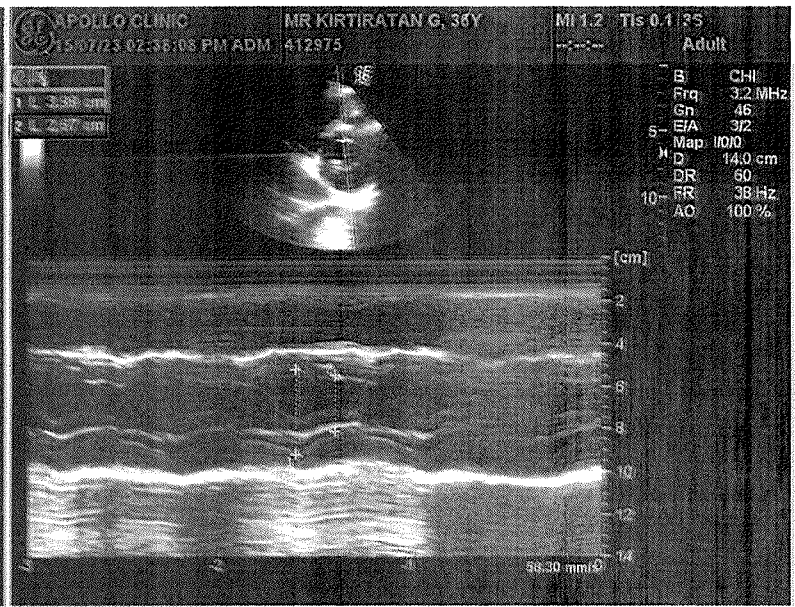
Interventricular septum _____

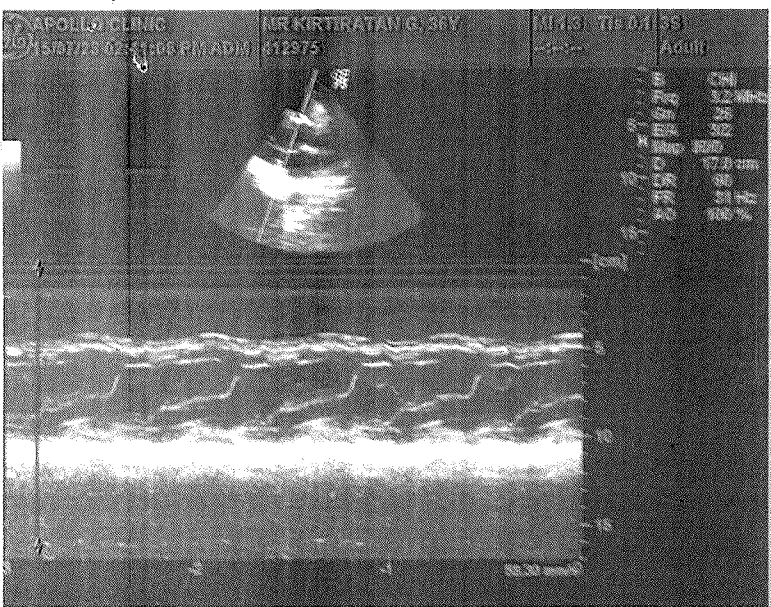
Pulmonary artery _____

Aorta _____

Right atrium _____

Left atrium _____





Patient Name	: Mr. KIRTIRATAN GODBOLE	Age/Gender	: 36 Y/M
UHID/MR No.	: CKON.0000412975	OP Visit No	: CKONOPV591036
Sample Collected on	:	Reported on	: 15-07-2023 20:04
LRN#	: RAD2048806	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 654214		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver appears normal in size and mild increased in echotexture. No focal lesion is seen. PV and CBD normal.No dilatation of the intrahepatic biliary radicals.

Gall bladder is distended normal.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 appears normal in echopattern.No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echopattern.Cortical thickness and CM differentiation are maintained.

Right kidney measures 98 x 40 mm.

Left kidney measures 105 x 51 mm.Two Calculi noted largest measuring- 4.8 mm.

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.

Prostate is normal in size and echo texture No evidence of necrosis/calcification seen. Prostate measures 33 x 38 x 31mm,Volume--21cc.

IMPRESSION:-

Patient Name : Mr. KIRTIRATAN GODBOLE

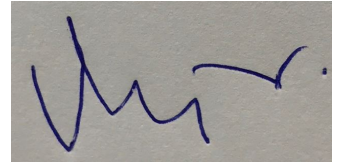
Age/Gender : 36 Y/M

****MILD FATTY CHANGES IN LIVER.**

****LEFT RENAL CALCULI.**

Suggest – 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. VIJAYA KUMAR M
MBBS, DMRD
Consultant Radiologist