



ment 0 11 11	1600 Age 35 Sex F Date/Time to of of a
Patient Name NSS Yeelau Fer MRN: 16	1600 Age 35 Sex F Date/Time to of 21
Investigations : (Please Tick)	Mob No
CBC	
ESR	
CRP	
S-Vit D3	
S-Vit B12	
RBS	
ugar - F/PP	
HbA1C	
LFT/KFT	
PT	
INR	
RA Factor	
Anti CCP	
HLA B27	
ANA	
HIV	ee & M
HBsAg	- 68101
Anti HCV	
	- hypertian
Vitals	reference
6 .	Dr. Bhawna Garg
P.R.	Dr. Bhawna Gara
SPO2	MBBS, DIP.GO. PGDHA
Temp	MEDICAL CO ORDINATOR RJN Apollo Spectra Hospital
Medical Illness	Reg.No. MP18035
Hypertension	
Diabetes	
Thyroid	
Cardiac Disease	

RATAN JYOTI NETRALAYA PRIVATE LIMITED

CIN: U85110MP2013PTC030901

Next Appointment/Follow up

Drug Allergies

Registered Office: 18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002

RJN APOLLO SPECTRA HOSPITALS

18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002 Ph. No.: 0751-2454600, 2450500 www.apollospectra.com Registered Vide No. NH/1542/MAR-2016

Signature:





: Mrs. NEELAM JHA

Age/Gender UHID/MR NO : 35 Y 0 M 0 D /F : ILK.00037901

Visit ID

: ILK.111401

Ref Doctor

: Dr.ARCOFEMI HEALTHCARE LIMITED

Collected

: 10/Feb/2024 09:32AM

Received

: 10/Feb/2024 09:55AM

Reported

: 10/Feb/2024 12:59PM

Status Client Name : Final Report

ent Name : INSTA

DEPARTMENT OF HEMATOLOGY

CONFEETE BLO		/ HAEMOGRAM ,	Selection of the Control of the Cont	lo 11
Haemoglobin (Hb%)	12.5	gm%	11.5-16.0	Cyanmeth
P.C.V (Hematocrit)	37.3	% .	35-49	Cell Counter
RBC Count	4.1	Mill./cu mm	4.00-5.50	Cell Counter
Mean Corpuscular Volume(MCV)	90.7	fL	76-96	Calculated
Mean Corpuscular Hb. (MCH)	30.4	pg	27.0-32.0	Calculated
Mean Corp. Hb. Conc.(MCHC)	33.5	g/dl	30.0-35.0	Calculated
RDW	15.5	%	11-16	Calculated
Total WBC count (TLC)	6,400	/cu mm	4000-11000	Cell Counter
Differential Count by Flowcytometry/	Microscopy			
Neutrophils	54.0	%	50-70	Cell Counter
Lymphocytes	32.9	%	20-40	
Monocytes	9.6	%	01-10	Cell Counter
Eosinophils	2.9	%	01-06	Cell Counter
Basophils	0.6	%	00-01	Cell Counter
Absolute Leucocyte Count	1,-7			
Neutrophil (Abs.)	3,432	per cumm	2000 - 8000	Calculated
Lymphocyte (Abs.)	2094	per cumm	600-4000	Calculated
Monocyte (Abs.)	614	per cumm	0-600	Calculated
Eosinophil (Abs.)	186	per cumm	40-440	Calculated
Basophils (Abs.)	37	per cumm	0-110	Calculated
Platelet Count	2.00	Lac/cmm	1.50-4.00	Cell Counter

ERYTHROCYTE SEDIMENTATION RATE (ESR)					
Erythrocyte Sedimentation Rate (ESR)	54	mm lst hr.	0-20	Wester Green	

Page 1 of 9





DR. ASHOK KUMAR M.D. (PATH)

RJN Apollo Spectra Hospitals

18, Vikas Nagar, Near Sai Baba Temple, Gwalior - 474009 (M.P.) Ph.: 0751-2454600, Mob.: 8269663137, Email: lpc.rjn@gmail.com

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DEPARTMENT OF HEMATOLOGY

BLOOD	GROUPING(A,B,O) AND RH FACTOR,	/HOLE BLOOD EDTA
Blood Grouping	В	Slide/Tube Agglutination
Rh (D) Type	POSITIVE	Slide/Tube Agglutination

BLOOD PICTURE - PERIPHERAL SMEAR EXAMINATION, WHOLE BLOOD EDTA

RBC'S

: Normocytic Normochromic RBC's.

No cytoplasmic inclusions or hemoparasite seen.

WBC'S

: Normal in number, morphology and distribution. No toxic granules seen.

No abnormal cell seen.

PLATELETS : Adequate on smear .

IMPRESSION; NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.

Page 2 of 9





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: 10/Feb/2024 10:26AM

Status

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: INSTA

DEPARTMENT	OF BIOCHEM	IISTRY-ROUTINE
------------	------------	-----------------------

			SOMEONI PROVINCE		
Test Name	Result	Unit	Bio. Ref. Range	Method	

GLUCOSE - FASTING	(FBS), NAF PLASMA
--------------------------	-------------------

Fasting Glucose 86.0 mg/dL 65-110 God - Pod

Ref.for Biological Reference Intervals: American Diabetic Assiosation.

CHICOCE	POST PRANDIAL	(DD)	2 HOLIDS IDC	OST MEALL	FILIORIDE PLASMA
CHICOSE	DOST PRANDIAL	(PP)	Z HUUKS IPU	JOI WIEHLI,	FLUURIDE PLASIVIA

Post Prandial Glucose 101.0 mg/dL 90-140 2hrs. after...gm glucose/lunch

Ref.for Biological Reference Intervals: American Diabetic Assiosation.

Page 3 of 9





A.K Leyong

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Client Name : INSTA

DEPARTMEN	ΓOF	BIOCHEMISTRY-ROUTINE
------------------	-----	----------------------

Test Name	Result	Unit	Bio. Ref. Range	Method	

GLYCOSYLATED	HAEMOGLOBIN	(GHB/HBA1	1C) , WHOLE BLOOD EDTA	
Glycosylated Haemoglobin HbA1c	5.3	%	Normal: <5.7 Pre-Diabetes: 5.7-6.4 Diabetes: 6.5	NEPHELOMETRY
Approximate mean plasma glucose	105.98	-	N. Committee of the com	Calculated

Ref.for Biological Reference Intervals: American Diabetes Association.

INTERPRETATION:

The A1C test measures your average blood glucose for the past 2 to 3 months. Diabetes is diagnosed at an A1C of greater than or equal to 6.5%.

Therapeutic goals for glycemic control (ADA)

-Adults:

- Goal of therapy: <7.0% HbA1c
 Action suggested: >8.0% HbA1c
- -Pediatric patients:
 - Toddlers and preschoolers: <8.5% (but >7.5%)
 - School age (6-12 years): <8%
 - Adolescents and young adults (13-19 years): <7.5%

Page 4 of 9





A.K Pajong.

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DEPARTMENT OF BIOCHEMISTRY-ROUTINE					
Test Name	Result	Unit	Bio. Ref. Range	Method	

	COMPLETE KIDNEY PR	OFILE (KFI/KFI),	SEKUIVI	-11
Urea	24.16	mg/dL	13.0-43.0	Urease
Creatinine	0.5	mg/dL	0.5-1.3	Enzymatic
Uric Acid	- 4.7	mg/dL	2.6-6.0	Urease
Sodium	138.0	Meq/L	135-155	Direct ISE
Potassium	4.2	Meq/L	3.5-5.5	Direct ISE
Chloride	103.0	mmol/L	96-106	Direct ISE
Calcium	9.6	mg/dL	8.6-10.0	. OCPC
Phosphorous	3.4	mg/dL	2.5-5.6	PMA Phenol
BUN	11.29	mg/dL	6.0-20.0	Reflect Spectrothoto

Page 5 of 9





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Method

Patient NAME

: Mrs. NEELAM JHA

Age/Gender

: 35 Y 0 M 0 D /F : ILK.00037901

UHID/MR NO Visit ID

: ILK.111401

Ref Doctor

Test Name

: Dr.ARCOFEMI HEALTHCARE LIMITED

Collected

: 10/Feb/2024 09:32AM

Received

: 10/Feb/2024 09:55AM

Reported

: 10/Feb/2024 10:26AM

Bio. Ref. Range

11.0 High Risk : >11.0

Status

: Final Report

Client Name : INSTA

Unit

DEPARTMENT	OF	BIOCHEMISTRY-ROUTINE
------------	----	----------------------

restriance				
	LIPID PROFIL	E , SERUM		
Type OF Sample	SERUM			
Total Cholesterol	166.0	mg/dl	up to 200	End Point
Total Triglycerides	177.0	mg/dL	Borderline High Risk : 150-199 High Risk: 200-499 Very High Risk: >500	End Point
HDL Cholesterol	43.0	mg/dL	Optimal: >55 Border Line High Risk: 35-55 High Risk:- <35	Reflect Spectrothoto
Non - HDL Cholesterol	123	mg/dL	<130	
LDL Cholesterol	87.6	mg/dL	63-167	Reflect Spectrothoto
VLDL Cholesterol	35.4	mg/dL	5.0-40.0	Reflect Spectrothoto
Chol / HDL Ratio	3.86		Low Risk : 3.3-4.4 Average Risk : 4.5-7.1 Moderate Risk : 7.2-	CALCULATED

Page 6 of 9





A.K. Pajong

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Patient NAME

: Mrs. NEELAM JHA

Age/Gender

: 35 Y 0 M 0 D /F

UHID/MR NO Visit ID

: ILK.00037901 : ILK.111401

Ref Doctor

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Collected

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Status

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Client Name

: INSTA

	DEPARTMENT OF BIOCHEMISTRY-ROUTINE
--	------------------------------------

Test Name	Result	Unit	Bio. Ref. Range	Method
LIVER	FUNCTION TEST	(LFT) WITH GG	T, SERUM	
Total Bilirubin	0.9	mg/dL	0.2-1.2	Jendrassik-Grof
Direct Bilirubin	0.1	mg/dL	0.0-0.3	Jendrassik-Grof
Indirect Bilirubin	0.8	mg/dL	0.0-0.9	Calculated
SGOT / AST	32.0	U/L	1-30	UV Kinetic (IFCC)
SGPT / ALT	35.0	U/L	1-34	UV Kinetic (IFCC)
Alkaline Phosphatase	77.0	U/L	43-115	PNPP
Gamma Glutaryl Transferase (GGT)	18.0	U/L	0.0-55.0	Reflect Spectrophoto
Total Protein	6.7	g/dl	6.4-8.3	Biuret
Albumin	4.4	g/dL	3.5-5.2	BCG
Globulin	2.3	g.dl	2.0-3.5	Calculated
A/G Ratio	1.91	%	1.0-2.3	Calculated

Page 7 of 9





DR. ASHOK KUMAR M.D. (PATH)

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: Mrs. NEELAM JHA

Age/Gender

: 35 Y 0 M 0 D /F

UHID/MR NO Visit ID

: ILK.00037901 : ILK.111401

Ref Doctor

: Dr.ARCOFEMI HEALTHCARE LIMITED

Collected

: 10/Feb/2024 09:32AM

Received

: 10/Feb/2024 11:59AM

Reported

: 10/Feb/2024 01:17PM

Status

: Final Report

Client Name

: INSTA

DEPARTMENT OF BIOCHEMISTRY-SPECIAL

	Desult	Unit	Bio. Ref. Range	Method
est Name	Result	Onit	Dio. Nel. Nalige	IVICTION

THYROID PROFILE-I, SERUM						
Trilodothyronine Total (TT3)	1.37	ng/dL	0.6-1.8	Chemilluminisence		
Thyroxine (TT4)	10.04	μg/dL	4.5-10.9	Chemilluminisence		
Thyroid Stimulating Hormone (TSH)	2.447	μIU/ml	0.35-5.50	Chemilluminisence		

COMMENT: - Above mentioned reference ranges are standard reference ranges.

AGE RELATED GUIDLINES FOR REFERENCE RANGES FOR TSH

TSH	NEW BORN	INFANT	CHILD	ADULT
u lu/mt)	0.52-38.9	1.7-9.1	0.7-6.4	0.3-5.6
PREGNENCY R	ELATED GUIDLINES FOR F	REFERENCE RANGE	S FOR TSH	
TSH	1st Trimester	2nd & 3rd Tri	mester	
		0.3 - 3.0		

NOTE: TSH levels are subject to circadian variation, reaching peak levels between 2-4 AM and at a minimum between 6-10 PM. Dose and time of drug intake also influence the test result.

Ultrasensetive kits used.

Serum T3/ FT3, T4/FT4 and TSH measurements form three components of thyroid screening panel.

- :-Primary hypethyroidism is accompanied by elevated serum T3 & T4 values alongwith depressed TSH level.
- :- Primary hypothyroidism is accompanied by elevated serum T3 & T4 values & elevated serum TSH level.
- :-Normal T3 &T4 levels with high TSH indicate mild / subclinical HYPOTHYROIDISM.
- :-.singhtly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in

severe illness, malnutrition, renal failure and during therapy with drugs like propanolol .

:-Although elevated TSH levels are nearly always indicative of primary hypothyroidism. Rarely they can result from TSH secreting pituitary tumours (seconday huperthyroidism).

Page 8 of 9





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Reported

: 10/Feb/2024 11:49AM

Status

: Final Report

Client Name : INSTA

DEPARTMENT	OF	CLINICAL PATHOLOGY
-------------------	----	--------------------

	A STATE OF THE STA	N		
Result	Unit	Bio. Ref. Range	Method	
				Di D

CUE - COMPLETE URINE ANALYSIS, URINE

Physical Examination

Colour	STRAW		Visual
Appearance	Clear	. 1	Visual
рН	6.0	5.0-7.5	Dipstick
Specific Gravity	1.030	1.002-1.030	Dipstick

Chemical Examination

NIL	NIL	Dipstick/Heat Test
	NIL	Dipstick/Benedict
NIL	NIL	Dipstick/Ehrlichs
NIL	NIL	Dipstick/Rotheras
ABSENT	ABSENT	Dipstick
ABSENT	ABSENT	Dipstick/Fouchets
	ABSENT	Dipstick
	NIL	NIL NIL NIL NIL NIL NIL ABSENT ABSENT ABSENT

Microscopic Examination.

2-3	/Hpf	0-5	
1-2	Hpf	<10	
ABSENT	/Hpf	ABSENT	
ABSENT		ABSENT	
ABSENT		ABSENT	
NORMALLY PRESENT		NORMALLY PRESENT	
		Absent	
	1-2 ABSENT ABSENT	1-2 Hpf ABSENT /Hpf ABSENT ABSENT NORMALLY PRESENT	1-2 Hpf <10 ABSENT /Hpf ABSENT ABSENT ABSENT ABSENT ABSENT NORMALLY PRESENT NORMALLY PRESENT

*** End Of Report ***

Page 9 of 9





DR. ASHOK KUMAR M.D. (PATH)

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ECHO CARDIOGRAPHY REPORT

Patient Name : MRS NEELAM JHA

Date : 10/02/2024

AGE & Sex :35yrs/F

Echocardiography was performed on vivid T8

Quality Of Imaging: Adequate
Mitral Valve: Normal
Tricuspid Valve: Normal
Aortic Valve: Normal

Pulmonary Valve : Normal Left Atrium : 3.4cms

Left Ventricle :

IVSD : 1.2 cms

EDD : 4.6 cms

ESD : 2.8 cms

LVPWD : 1.2cms

EF 60% FS 32%

RWMA : NO REGIONAL WALL MOTION ABNORMALITY

Right Atrium : Normal
Right Ventricle : Normal
Aorta : 3.1cms
IAS IVS : Intact
Pulmonary Artery
Pericardium : Normal
SVC, IVC : Normal
Pulmonary Artery : Normal
: Normal

Intracardiac Masses : Nil

Doppler : E > A

Conclusion:

NORMAL CARDIAC CHAMBERS DIMENSION .
NO REGIONAL WALL MOTION ABNORMALITY
NORMAL LV SYSTOLIC FUNCTION , LVEF-60%
NORMAL VALVES
INTACT SEPTUM
NO CLOT /VEGETATION /PERICARDIAL EFFUSION

Dr. Abhishek Sharma

RS.MD (Melicin And Cardiology)

RJN Apollo

Reg.No. M. 12030

Consultant

Dr. Abhishek sharma (DNB)

(Interventional Cardiologist)

RATAN JYOTI NETRALAYA PRIVATE LIMITED

CIN: U85110MP2013PTC030901

Registered Office: 18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002

RJN APOLLO SPECTRA HOSPITALS





	April 01, 2022 - April 00, 2024
Patient Name Mellau MRN:	Age 35 Sex . f Date/Time 10/2/27
Investigations : (Please Tick)	Mob No
CBC	
ESR	Cherkup
CRP Head th	Cutter
S-Vit D3	
S-Vit B12	
RBS OF	
Gugar - F/PP	
HBAIC · (alculis ~)
LFT/KFT	
PT · Slun ·	
HBA1C LFT/KFT PT INR RA Factor Anti CCP	
RA Factor · Midlimed	18 flens
And cer	
HLA B27	
ANA HIV HBSAG	'alal.
HIV (LiQues / B	sucy
Anti HCV	
Vitals (
Vitals Ry.	ADS Y/W
P.R.	
SPO2	Va of North
Temp	× 18 days.
Medical Illness	h
Hypertension	M
Diabetes	
Thyroid	
Cardiac Disease	Y.
Drug Allergies	

RATAN JYOTI NETRALAYA PRIVATE LIMITED

CIN: U85110MP2013PTC030901

Next Appointment/Follow up

Registered Office: 18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002

RJN APOLLO SPECTRA HOSPITALS

Signature:





	Age 354 Sex Date/Time 10/2/29
Investigations : (Please Tick)	Lechols Epc-des Th-gotes
CBC	
ESR OLG	anders
ESR CRP S-Vit D3 S-Vit B12	
S-Vit D3	Tu- grates
Value State Control of the Control o	
RBS	
B Sugar - F/PP	
TIDA1C	
LFT/KFT / OJE	1
PT /	NO 5
INR Th	
RA Factor	
Anti CCP	
HLA B27	
ANA OUS	
HIV	1
HBsAg April HOV	
Anti HCV	Dr. Sout Guid
Vitals	MS (ENT)
R.D.	RIVAN C precia Hospitals
	K. VIA
SPO2	
Temp	
,	
Medical Illness	
Hypertension	
Diabetes	
Thyroid	
Cardiac Disease	
Drug Allergies	

RATAN JYOTI NETRALAYA PRIVATE LIMITED

CIN: U85110MP2013PTC030901

Next Appointment/Follow up

Registered Office: 18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002

RJN APOLLO SPECTRA HOSPITALS

Signature:



RATAN JYOTI NETRALAYA

OPHTHALMIC INSTITUTE & RESEARCH CENTRE





18, Vikas Nagar, Near Sai Baba Mandir, Gwalior-2 (M.P.) INDIA Tel.: 2423350/51, Web: www.ratanjyotigroup.org, Email: rjneye@gmail.com Opp. Medical College, Gate No. 3 Jhansi-284128 (U.P.) Ph. 0510-2322311 (M) 9109973225

SR.NO.

DATE

: 10-February-2024

NAME AGE/SEX : MRS NEELAM JHA : 35 YRS / FEMALE

MRD NO.

: R-115548

CITY

: GWALIOR

MOION	DISTANCE		NEAR	
VISION	OD	os	OD	os
UNAIDED	6/6	6/6	N6	N6
WITH GLASSES				
WITH PIN HOLE				
WITH COLOR				
VISION				
			_	_

IOP READING					
TIME	OD	OD METHOD	os	OS METHOD	
11:43AM	20		18		
12:48PM	17		18		

TREATMENT PLAN

: -NORMAL EYE STUY

REFFERED TO

NEXT REVIEW

: AS PER DR. ADVISED

DR. JYOTSNA SHARMA

NOTE

: Kindly continue medications as advised for the period advised.

In case of redness or allergy please discontinue and inform the doctor.

Nutritional Advice Instructions

: As per treating physician : Patient and Attendant(s) Counselled

Advised medicine may be replaced with a good quality generic medicine.

Speciality Clinics: Comprehensive Ophthalmology Clinic Cataract & IOL Clinic Vitreo Retina & Uvea Clinic Spectacle Removal Clinic (Lasik/Femto Lasik/Phakic Lens) - Cornea Clinic - Glaucoma Clinic - Orbit & Oculoplasty Clinic - Trauma Clinic - Squint Clinic Paediatric Ophthalmology Clinic Low Vision Aid Clinic Contact Lens Clinic

CONSULTATION TIMINGS: MORNING 9:00 A.M. TO 6:00 P.M. (SUNDAY OFF)

केन्द्रीय कर्मचारियों के लिए मान्यता प्राप्त
 कैशलैस इंश्योरेन्स एवं टी.पी.ए. सुविधा उपलब्ध

For Appointment Please Contact: 9111004046

स्वामी विद्यानंद भारती आई बैंक

नेन्नदान

करें और करायें इसे अपने परिवार की परम्परा बनायें नेत्रदान के लिए सम्पर्क करें: 9111004044





MRS.NEELAM JHA 35 Y/F PATIENT NAME

HEALTH CHECKUP REFERRED BY

10/02/2024 DATE

USG WHOLE ABDOMEN INVESTIGATION

IMAGING FINDINGS:-

Liver appears normal in size, position, shape and margin. Parenchyma shows increased echogenecities. The intrahepatic biliary and portal venous radicles appear normal. Hepatic veins and portal vein are normal.

Gall Bladder is well distended. GB wall and lumen content appears normal. No echogenic focus within GB lumen. Visualized CBD is of normal caliber.

Spleen appears normal in size (~8.7cm), position, shape, echotexture and margin. No any focal esion within splenic parenchyma. Splenic vein is normal and undilated.

Pancreas is well visualized, appears normal in size, shape and echotexture. Pancreatic duct is not dilated. No USG evidence of obvious measurable focal lesion.

Both Kidneys: Measurements are right kidney ~9.7x4.2cm and left kidney ~9.7x5.4cm. Left kidney shows slightly lobulated outline. Both kidneys are normal in position, size, shape, surface, echotexture and cortico-medullary differentiation. Bilateral PC systems are compact. No significant calculus or hydronephrosis on either side. Ureters are undilated on either side.

Urinary Bladder is normal in shape, wall and content.

Uterus is anteverted, appears normal in size measures ~8x3.5cm, position and echotexture.

Both Ovaries are normal in size, shape and echotexture. No abnormal measurable mass or cyst in adnexal region.

No obvious ascites.

OPINION: - Features are suggestive of-

Grade I fatty liver

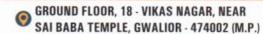
Suggested clinical correlation/Follow up imaging.

DR. SAKSHI CHAWLA (MD RADIODIAGNOSIS)

Disclaimer: The science of radiology is based upon interpretation of shadows of normal and abnormal tissue. This is neither complete nor accurate; hence, findings should always be interpreted in to the light of clinico-pathological correlation. This is a professional opinion, not a diagnosis. Not meant for medico legal purposes. For any kind of typing error, please intimate us within 7 days of reporting.

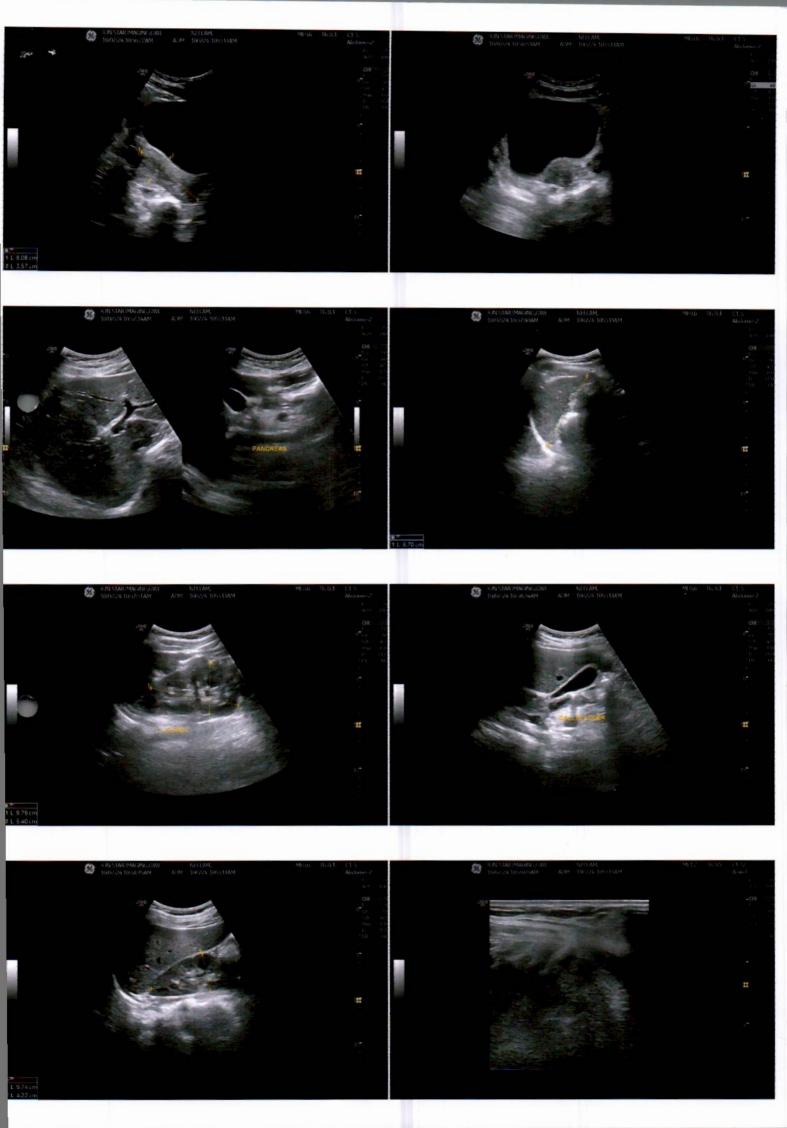
गर्भाशय कन्या भ्रूण की जाँच एवं हत्या दण्डनीय अपराध है।

बेटी बचाओ - बेटी पढाओ













Patient Name Date NEELAM JHA 10-02-2024 Age Sex 35Yrs FEMALE

CHEST X RAY (PA VIEW)

Both lung fields appear clear.

Both costo-phrenic angles appear clear.

Cardiothoracic ratio is normal.

Both domes of diaphragm appear normal.

Thoracic soft tissue and skeletal system appear unremarkable.

IMPRESSION:

No significant abnormality is noted

Please correlate clinically and with related investigations may be more informative.

Am

DrAmit Kumar MBBS, DMRD Consultant Radiologist

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