

Ref. Dr. DGD

30 year(s) Male 24/02/2024 12:32:21

Chest PA

OLIVE DIAGNOSTIC & POLYCLINIC PRADAN NAGAR SILIGURI PH 0353 3564463

Dive Olive Diagnostics & Poly Clinic

Meghnad Saha Sarani,Pradhan Nagar, Opp. St. Mary School, Siliguri, Dist: Darjeeling. Pin 734003

ontact No. 0353 3564463

e-mail: olivediagnostics2021@gmail.com

Patient's Name

: BABLU YADAV

Age: 30Yrs / M

Ref. By

DGD

Date

24.02.2024

X- RAY REPORT

CHEST PA VIEW:

Bilateral lungs fields are normal.

Cardiac size is normal.

Both costophrenic angles are clear.

Trachi a and mediastinum are central.

Bony thorax appears normal.

IMPRESSION: Normal study.

Dr. Sanjoy kumar Sahu, MBBS,MD Consultant & Interventional Radiologist





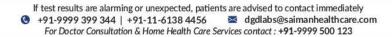


Patient ID	1223739			Specimen	WB-EDTA
Patient Name	Mr. Bablu Yadav			Booked Date	24/02/2024 11:26:35
Gender/Age	Male /27 Yrs			Collected Date	24/02/2024 11:29:44
Mobile No.	9570251414			Received Date	24/02/2024 11:29:45
Organization	Self			Report Date	24/02/2024 13:34:25
Ref. By	Self			Print Date	24/02/2024 18:19:15
Test Name		Value	Unit		Biological Ref Interval
-	d Count with ESR (CBC+E d Count (CBC)	SR)			
Automation+ Man	<u>u Count (CBC)</u> nual				
Hemoglobin (H Colorimetric Method	b)	12.9	g/dL		13.0 - 17.0
Total Leucocyte Flow Cytometry method	Count (TLC)	7550	cells/uL		4000 - 10000
Erythrocyte Cou	ant (RBC Count)	4.74	10^6/uL		4.50 - 5.50
Packed Cell Vol	ume (PCV)	40.8	%		40.0 - 50.0
Mean Corpuscu	lar Volume (MCV)	86.1	fL		83.0 - 101.0
MCH (Mean Co	orp Hb)	27.2	pg		27.0 - 32.0
MCHC (Mean	Corp Hb Conc)	31.6	gm/dL		31.5 - 34.5
Platelet Count Electric Impedence Met	thod	155.00	10^3/uL		150.00 - 450.00
RDW (CV)		12.8	%		11.5 - 14.0
MPV Calculated		16.7	fL		9.1 - 11.9
PCT calculated		0.10	%		0.18 - 0.39
PDW-SD calculated		16.4	fL		9.0 - 15.0
	ucocyte Count (DLC)				
Automation+Manual Neutrophil Laser Flow Cytometry	& Microscopy	62	%		40 - 70
Lymphocyte Laser Flow Cytometry	& Microscopy	27	%		20 - 45
Eosinophil Laser Flow Cytometry	& Microscopy	05	%		01 - 07



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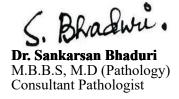




Patient ID Patient Name	1223739 Mr. Bablu Yadav	Specimen Booked Date	WB-EDTA 24/02/2024 11:26:35
Gender/Age	Male /27 Yrs	Collected Date	24/02/2024 11:29:44
Mobile No.	9570251414	Received Date	24/02/2024 11:29:45
Organization	Self	Report Date	24/02/2024 13:34:25
Ref. By	Self	Print Date	24/02/2024 18:19:29

Test Name	Value	Unit	Biological Ref Interval
Monocyte Laser Flow Cytometry & Microscopy	06	%	00 - 10
Basophil Laser Flow Cytometry & Microscopy	00	%	00 - 01
Absolute Neutrophils Count (ANC) Calculated	4.69	10^3/uL	2.00 - 7.00
Absolute Lymphocytes Count (ALC) Calculated	2.01	10^3/uL	1.00 - 3.00
Absolute Monocytes Count (AMC) Calculated	0.47	10^3/uL	0.20 - 1.00
Absolute Eosinophil Count (AEC) Calculated	0.38	10^3/uL	0.02 - 0.50
Absolute Basophil count (ABC) Calculated	0.00	10^3/uL	0.02 - 0.10





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Patient ID	1223739	Specimen	WB-EDTA
Patient Name	Mr. Bablu Yadav	Booked Date	24/02/2024 11:26:35
Gender/Age	Male /27 Yrs	Collected Date	24/02/2024 11:29:44
Mobile No.	9570251414	Received Date	24/02/2024 11:29:45
Organization	Self	Report Date	24/02/2024 13:39:23
Ref. By	Self	Print Date	24/02/2024 18:19:37

Test Name	Value	Unit	Biological Ref Interval

Erythrocyte Sedimentation Rate (ESR)

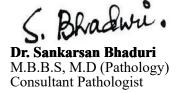
18

mm/Ist hr.

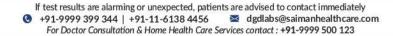
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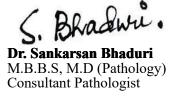


Patient ID Patient Name	1223739 Mr. Bablu Yadav	Specimen Booked Date	Fluoride- F, Fluoride- PP 24/02/2024 11:26:35
Gender/Age	Male /27 Yrs	Collected Date	24/02/2024 11:29:44
Mobile No.	9570251414	Received Date	24/02/2024 11:29:45
Organization	Self	Report Date	24/02/2024 18:07:33
Ref. By	Self	Print Date	24/02/2024 18:19:42

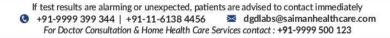
Test Name	Value	Unit	Biological Ref Interval
	BIOCHEMIS	STRY	
Glucose- Fasting Blood Hexokinase	102.0	mg/dl	74.0 - 100.0
Glucose Postprandial Blood Method: GOD-POD	124.0	mg/dl	74.0 - 120.0







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Patient ID	1223739	Specimen	WB-EDTA
Patient Name	Mr. Bablu Yadav	Booked Date	24/02/2024 11:26:35
Gender/Age	Male /27 Yrs	Collected Date	24/02/2024 11:29:44
Mobile No.	9570251414	Received Date	24/02/2024 11:29:45
Organization	Self	Report Date	24/02/2024 13:34:25
Ref. By	Self	Print Date	24/02/2024 18:19:48

Test Name Value Unit Biological Ref Interval

HAEMATOLOGY

Glycosylated Hemoglobin (HbA1C)

HBA1C 5.6 % Estimated average plasma Glucose 114 %

Interpretation:

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
Therapeutic goals for glycemic control	Age >19 years: Goal of therapy: <7.0
	Age <19 years: Goal of therapy: <7.5

Note:

- 1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled.
- 2. Target goals of <7.0% may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of <7.0% may not be appropriate.

Comments:

HbA1c provides an index of average blood glucose levels over the past 8 - 12 weeks and is a much better indicator of long-term glycemic control as compared to blood and urinary glucose determinations.

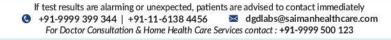
ADA criteria for correlation between HbA1c & Mean plasma glucose levels.

ADA CITICITA TOI COITCIACION DELWECH IIDATE & MICAN piasina glucose levels.			
HbA1c (%)	Mean Plasma Glucose (mg/dL)		
6	126		
7	154		
8	183		
9	212		
10	240		
11	269		
12	298		



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Patient ID Patient Name Gender/Age Mobile No. Organization Ref. By	1223739 Mr. Bablu Yadav Male /27 Yrs 9570251414 Self Self			Specimen Booked Date Collected Date Received Date Report Date Print Date	Serum 24/02/2024 11:26:35 24/02/2024 11:29:44 24/02/2024 11:29:45 24/02/2024 13:34:25 24/02/2024 18:19:55
Test Name		Value	Unit		Biological Ref Interval
		BIOCHEMI	STRY		
<u>Lipid Profile</u> Cholesterol - To	otal	168.9			Desirable = < 200
Spectro-phtometry	otai		mg/dl		Borderline = 200-239 High Cholestrol = = 240 Child Desirable = < 170 Borderline = 170-199 High Cholestrol = >199
Triglycerides (Tiglycerol/Peroxidase	TG)	170.3	mg/dl		0.0 - 161.0 High: 161-199 Hypertriglyceridemic: 200-499 Very High: > 499
Cholesterol - H	IDL	40.06	mg/dl		35.3 - 79.5
Cholesterol - L	DL	94.8	mg/dl		60.0 - 130.0
					Borderline High: 130 - 159 High: > 160
VLDL Choleste	erol	34.1	mg/dl		4.7 - 22.1
Serum Total / F	HDL Cholesterol Ratio	4.22			4.50 - 6.00
Serum LDL / H	IDL Cholesterol Ratio	2.37			0.00 - 3.50

CHOLESTEROL, its fractions and triglycerides are the important plasma lipids indefining cardiovascular risk factors and in the management of cardiovascular disease. Highest acceptable and optimum values of cholesterol vary with age. Values above 220 mg/dl are associated with increased risk of CHD regardless of HDL & LDL values.

TRIGLYCERIDE level >250 mg/dL is associated with an approximately 2-fold greater risk of coronary vascular disease. Elevation of TRIGLYCERIDE can be seen in obesity, medication, fast less than 12 hrs., alcohol intake, diabetes mellitus, and pancreatitis.

HDL-CHOLESTEROL level <35 mg/dL is associated with an increased risk of coronary vascular disease even in the face of desirable levels



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TCI. Dy	Self	Print Date	24/02/2024 18:20:11
Ref. By			
Organization S	Self	Report Date	24/02/2024 13:34:25
Mobile No. 9	9570251414	Received Date	24/02/2024 11:29:45
Gender/Age N	Male /27 Yrs	Collected Date	24/02/2024 11:29:44
Patient Name N	Mr. Bablu Yadav	Booked Date	24/02/2024 11:26:35
Patient ID 1	223739	Specimen	Serum

Test Name Value Unit Biological Ref Interval

of cholesterol and LDL-cholesterol.

LDL-CHOLESTEROL & TOTAL CHOLESTEROL levels can be strikingly altered by thyroid, renal and liver disease as well as hereditary factors. Based on total cholesterol, LDL- cholesterol, and total cholesterol/HDL- cholesterol ratio, patients may be divided into three risk categories:

	CHOLESTEROL	LDL-CHOLESTEROL	CHO/HDL RATIO
Acceptable/Low Risk	<200 mg/dL	<130 mg/dL	< 4.5
Borderline High Risk	200-239 mg/dL	130-159 mg/dl	4.5-6.0
High Risk	> 240 mg /dL	>160 mg/dL	>6.0

APO A1 & APO B: Recent studies have shown that Apolipoproteins A1 & B might be the best indicators of coronary artery disease risk in an individual. Patients who have normal lipid profile may have abnormal Apo A1 & Apo B values. Ratio of Apo B:Apo A1 is >1 in cases of increased CHD risk.

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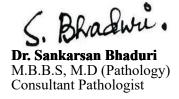




Patient ID Patient Name Gender/Age Mobile No. Organization Ref. By	1223739 Mr. Bablu Yadav Male /27 Yrs 9570251414 Self Self			Specimen Booked Date Collected Date Received Date Report Date Print Date	Serum 24/02/2024 11:26:35 24/02/2024 11:29:44 24/02/2024 11:29:45 24/02/2024 18:12:02 24/02/2024 18:20:15
Test Name		Value	Unit		Biological Ref Interval

Test Name	Value	Unit	Biological Ref Interv
Liver Function Test (LFT)-2			
Bilirubin Total Method - Spectro-photometry	0.86	mg/dl	0.00 - 1.20
Bilirubin Direct Method:- Spectrophotometry	0.18	mg/dl	0.00 - 0.40
Bilirubin Indirect Spectro-photmetry	0.68	mg/dl	0.00 - 0.75
Aspartate Aminotransferase (AST/SGOT) Spectro-photometry	24.8	U/L	0.0 - 35.0
Alaline Transaminase ALT/ SGPT (Method-Spectro-photometry)	39.1	U/L	0.0 - 45.0
Alkaline Phosphatase (ALP) Spectro-photometry	90.5	IU/L	54.0 - 369.0
Protein Total (METHOD:BIURET)	8.1	gm/dl	6.4 - 8.3
Albumin (Method-Spectro-photometry)	5.0	gm/dl	3.5 - 5.2
Globulin (METHOD:BCG)	3.1	g/dl	2.3 - 3.5
A/G Ratio COLORIMETRIC	1.61		1.30 - 2.10
Gamma Glutamyl Transferase (GGT) Method:Glupa C	19.1	U/L	0.0 - 55.0





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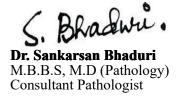




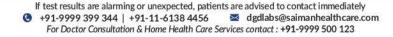
Patient ID Patient Name	1223739 Mr. Bablu Yadav	Specimen Booked Date	Serum 24/02/2024 11:26:35
Gender/Age	Male /27 Yrs	Collected Date	24/02/2024 11:29:44
Mobile No.	9570251414	Received Date	24/02/2024 11:29:45
Organization	Self	Report Date	24/02/2024 18:12:02
Ref. By	Self	Print Date	24/02/2024 18:20:26

Test Name	Value	Unit	Biological Ref Interval
Kidney Function Test/Renal Function	n Test		
Urea (Method :Urease GLDH)	21.4	mg/dl	19.0 - 45.0
Blood Urea Nitrogen (BUN) Urease Endpoint	7.7	mg%	6.0 - 20.0
Creatinine Method:Spectr-photometry	0.92	mg/dl	0.70 - 1.30
Uric Acid (Method:URICASE POD)	8.0	mg/dl	3.5 - 7.2
Calcium Method:Spectro-photometry	10.6	mg/dl	8.6 - 10.2
Phosphorus UV Molybdate	2.8	mg/dl	2.5 - 4.5





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Patient ID	1223739	Specimen	WB-EDTA
Patient Name	Mr. Bablu Yadav	Booked Date	24/02/2024 11:26:35
Gender/Age	Male /27 Yrs	Collected Date	24/02/2024 11:29:44
Mobile No.	9570251414	Received Date	24/02/2024 11:29:45
Organization	Self	Report Date	24/02/2024 13:33:39
Ref. By	Self	Print Date	24/02/2024 18:20:35

Test Name Value Unit Biological Ref Interval

Blood Grouping (A,B,O) and Rh Factor Tube method

Blood Group ABO
Tube Agglutination

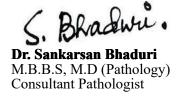
AB

Rh Typing
Tube Agglutination

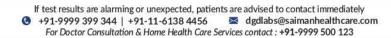
POSITIVE







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Test Name		Value 1	 U nit	Biological Ref Interval
Ref. By	Self		Print Date	24/02/2024 18:20:40
Organization	Self		Report Date	24/02/2024 13:13:44
Mobile No.	9570251414		Received Date	e 24/02/2024 11:29:45
Gender/Age	Male /27 Yrs		Collected Date	e 24/02/2024 11:29:44
Patient Name	Mr. Bablu Yadav		Booked Date	24/02/2024 11:26:35
Patient ID	1223739		Specimen	Serum

Test Maine	vaiuc	Omt	Diological Act Intel val
	<u>IMMUNOAS</u>	SSAY	
Thyroid Profile Total			
TriIodothyronine Total (TT3) Method:- CLIA	1.55	ng/dL	0.69 - 2.15
Thyroxine - Total (TT4)	56.20	ug/dl	52.00 - 127.00
Thyroid Stimulating Hormone (TSH) Method:- CLIA	3.37	uIU/ml	0.30 - 4.50

COMMENTS:

Assay results should be interpreted in context to the clinical condition and associated results of other investigations. Previous treatment with corticosteroid therapy may result in lower TSH levels while thyroid hormone levels are normal. Results are invalidated if the client has undergone a radionuclide scan within 7-14 days before the test. Abnormal thyroid test findings often found in critically ill clients should be repeated after the critical nature of condition is resolved. The production, circulation, and disintegration of thyroid hormones are altered throughout the stages of pregnancy.

PREGNANCY	REFERENCE RANGE for TSH IN ulU / Ml (As per American Thyroid Association)
1 st Trimester	0.10 -2 .50 uIU /mL
2 nd Trimester	0.20-3.00 uIU /mL
3 rd Trimester	0.30-3.00 uIU /ml

^{*}TSH IS DONE BY ULTRASENSITIVE 4TH GENERATION CHEMIFLEX ASSAY*

INTERPRETATIONS:

- 1. Primary hyperthyroidism is accompanied by elevated serum T3 & T4 values along with depressed TSH level.
- 2. Primary hypothyroidism is accompanied by depressed serum T3 and T4 values & elevated serum TSH levels.
- 3. Normal T4 levels accompanied by high T3 levels and low TSH are seen in patients with T3 thyrotoxicosis.
- 4. Normal or low T3 & high T4 levels indicate T4 thyrotoxicosis (problems in conversion of T4 to T3).
- 5. Normal T3 &T4 along with low TSH indicate mild / subclinical HYPERTHYROIDISM.
- 6. Normal T3 & low T4 along with high TSH is seen in HYPOTHYROIDISM.
- 7. Normal T3 & T4 levels with high TSH indicate Mild / Subclinical HYPOTHYROIDISM.
- 8. Slightly 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 drug like propranolol.
- 9. Although elevated TSH levels are nearly always indicative of primary hypothyroidism. Rarely they can result from TSH secreting pituitary tumours (secondary hyperthyroidism).



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Patient ID	1223739	Specimen	Urine
Patient Name	Mr. Bablu Yadav	Booked Date	24/02/2024 11:26:35
Gender/Age	Male /27 Yrs	Collected Date	24/02/2024 11:29:44
Mobile No.	9570251414	Received Date	24/02/2024 11:29:45
Organization	Self	Report Date	24/02/2024 13:45:15
Ref. By	Self	Print Date	24/02/2024 18:20:49

Test Name Value Unit Biological Ref Interval

CLINICAL PATHOLOGY

	CLINICALIAINOLOGI	
<u>Urine Routine & Microscopy</u> <u>Strip/Microscopy</u> Physical Examination		
Volume	10 ml	10
Colour	Pale yellow	Light Yellow
Appearance	Clear	Clear
Deposit	Absent	
Turbidity	Absent	
Reaction	Acidic	
Specific Gravity Refractometric	1.015	1.000 - 1.030
Chemical Examination		
Urine Protein Protein Eror of Indicator	Nil	Nil
Urine Glucose Oxidase Peroxidase Reaction	Nil	Nil

Protein Eror of Indicator		
Urine Glucose Oxidase Peroxidase Reaction	Nil	Nil
Urine Ketone body Sodium Nitropruside	Nil	Nil
Nitrite	Nil	Nil

Nitrite Nil	N1I
Bile Pigment (Urine) Method- FOUCHET Nil	Nil
Bile Salt (Urine) Method: Sulphur	Nil

PH	6.0	4.6 - 8.0
Double Indicators test		

Blood peroxidase reaction	Negative	Negative
Urobilinogen	Normal	Normal

Modified Ehrlich Reaction		
Urine Bilirubin	Negative	Negative

diazotisation	1.08	1.08
T 1 .	3.7	3.7

Leukocyte	Negative	Negative
Diazonization Reaction	Č	C

Microscopic Examintaion			
Pus Cells	Occasional	/HPF	2-4



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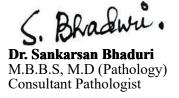


Patient ID	1223739	Specimen	Urine
Patient Name	Mr. Bablu Yadav	Booked Date	24/02/2024 11:26:35
Gender/Age	Male /27 Yrs	Collected Date	24/02/2024 11:29:44
Mobile No.	9570251414	Received Date	24/02/2024 11:29:45
Organization	Self	Report Date	24/02/2024 13:47:17
Ref. By	Self	Print Date	24/02/2024 18:21:04

Test Name	Value	Unit	Biological Ref Interval
Epithelial Cells	Occasional	/HPF	0-3
RBC's	Nil	/HPF	Nil
Casts	Nil		Nil
Crystals	Nil		Nil
Bacteria	Few		Nil
Budding yeast cells	Negative		Negative
Others	Nil		Nil







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Patient ID Patient Name Gender/Age Mobile No. Organization	1223739 Mr. Bablu Yadav Male /27 Yrs 9570251414 Self			Specimen Booked Date Collected Date Received Date Report Date	24/02/2024 11:29:45 24/02/2024 13:47:00
Ref. By	Self			Print Date	24/02/2024 18:21:12
Test Name		Value	Unit		Biological Ref Interval

HAEMATOLOGY

Peripheral Blood Smear (P/S) Cell Counter/Microscopy

RBCs Normocytic normochromic.

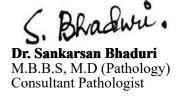
WBCs Within normal limits.

PLATELETS Adequate on smear.

*** End of Report ***







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Date: 24.02.2024

Name: BABLU YADAV Age/Gender: 30 Y/M Mobile No.:9570251914

Ref By: AHCN

Demographics:			BMI
	Weight	BP	BIVII
Height	, , cign.	114/70 mm Lla	24.2
160 cm	62 kgs	114/70 mmHg	21.2

Personal History

Personal History.	Smoking: No
Habita	Alcohol: No
Habits:	Drugs/Medicines: No

mily History:	Age	Health Status
Relation	52	Healthy
ather	48	Healthy
Mother	No	
Brother Sister	No	

Past History:		
Hypertension	No	
Diabetes	No	
Asthma	No	
Thyroid	No	
Tuberculosis	No	
Cancer	No	

Othore.

Others:		
Allergic History	No	
	No	
Surgical History		

Ophthalmic Examination:

Distance Examination.		Near vision		Colour vision	
Distance vis	Left Eye	Right Eye	Left Eye	Right Eye	Left Eye
Right Eye	-	N6	N6	Normal	Normal
6/6	6/6	INO	110		

Dr. SUNEEL NUMAR GARG MD. FNB, IFCCM, EDIC, FICCM, FCCP, FCCM, Founder & MD

Dr Suneel Kumar Gangnan Healthcare Pvt. Ltd.

MD, FNB (Critical Care Medicane), 1FCOM, EDIC, FICCM, FCCP (USA), FCCM (USA) Senior Critical Care Physician

DMC-34400

If test results are alarming or unexpected, patients are advised to contact the laboratory immediately for the possible remedial action. For Doctor Consultation & Home Health Care Services contact: +91-9999 500 123



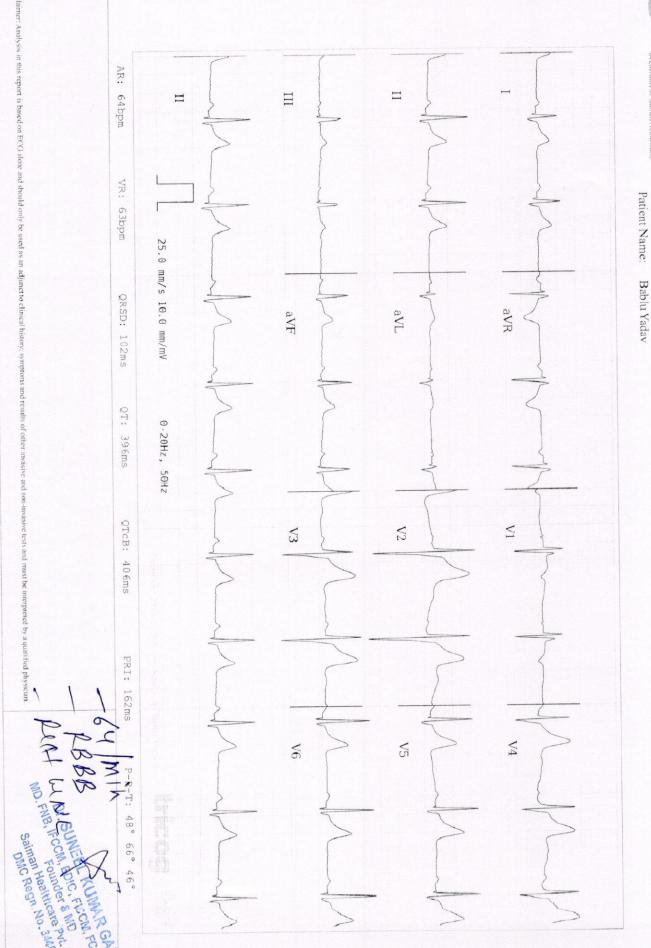


DR GARG'S DIAGNOSTICS (A Division of Saiman Healthcare)

176/76/69, Meghnath Saha Sarani, Pradhan Nagar, Siliguri -734003, West Bengal. +91 9355090808, +91 3533571619

Patient ID: Age / Gender: 60 30/Male

Date and Time: 24th Feb 24 6:41 PM

















Wwe Olive Diagnostics & Poly Clinic

Meghnad Saha Sarani, Pradhan Nagar, Opp. St. Mary School, Siliguri, Dist: Darjeeling. Pin 734003

Contact No. 0353 3564463

e-mail: olivediagnostics2021@gmail.com

Patient Name

: Bablu Yadav

Age — 30 yrs. / M

Investigation

: U.S.G. of Whole Abdomen

Ref by

: DGD

Date of investigation: Saturday, February 24, 2024

Normal in size, shape, position & echotexture. No definite focal lesion or sizeable mass No IHBR dilatation. The hepatic & portal venous systems appear normal.

GALLBLADDER:

Not seen (History of operation).

CBD:-

Not dilated. No intraluminal lesion seen in visualized part.

Normal size, shape & echo texture. No focal lesion or mass detected. MPD not dilated. No peri-pancreatic collection is seen.

SPLEEN:

Borderline enlarged in size (119 mm). Echo texture is homogenous. No mass lesion.

RIGHT KIDNEY:

Normal size, shape, position and orientation with adequate Cortico-Medullary Differentiation.

No calculus, mass or hydronephrosis is seen.

Right kidney measures 90mm in size.

LEFT KIDNEY:

Normal size, shape, position and orientation with adequate Cortico-Medullary Differentiation.

No calculus, mass or hydronephrosis is seen.

Left kidney measures 104mm in size.

URETERS:-

Not dilated

URINARY BLADDER

Well distended with smooth mucosal outline. No intraluminal Pathology

PROSTATE:

Normal in size (measures 33mm x 31mm x 26mm with approx volume of 14.73cc), shape & echo texture. The outline is maintained. No focal mass / lesion is seen.

No ascites, pleural effusion or para aortic adenopathy is seen. Bowel loops are not dilated. Bilateral iliac fossa scan do not reveal any collection or mass lesion.

IMPRESSION:

- 1. Post cholecystectomy status.
- Borderline splenomegaly.

Please correlate clinically.

Dr. Sanjoy kumar Sahu, MBBS,MD Consultant & Interventional Radiologist