

<b>Patient Name</b> :	Mrs.KUMARI RITU	<b>Bill Date</b> :	29-03-2024 12:10 PM
<b>Age / Gender</b> :	30Y(s) 7M(s) /Female	<b>Collected Date</b> :	29-03-2024 12:29 PM
<b>Lab Ref No/UHID</b> :	PS008210/P00000634984	<b>Received Date</b> :	29-03-2024 12:30 PM
<b>Lab No/Result No</b> :	2400124732/830027	<b>Report Date</b> :	29-03-2024 03:06 PM
<b>Referred By Dr.</b> :	HOSPITAL CASE	<b>Specimen</b> :	SERUM
		<b>Processing Loc</b> :	RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
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**FBS**

Glucose (Fasting). <i>Method : GOD-POD</i>	: 72	mg/dL	Prediabetic : 100 - 125 Diabetic : >= 126 Normal : < 100.0
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REFERENCE : ADA 2015 GUIDELINES

**CREATININE**

Creatinine <i>Method : Enzymatic</i>	: 0.7	mg/dL	0.5 - 1.2
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**BUN**

Urea Nitrogen(BUN) <i>Method : Calculated</i>	: 9.81	mg/dL	6.0 - 20.0
Urea <i>Method : Urease</i>	: 21	mg/dL	17.1-49.2

**CALCIUM**

Calcium <i>Method : Arsenazo</i>	: 9.2	mg/dL	8.6 - 10.2
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**PHOSPHOROUS**

Phosphorus <i>Method : Phospho Molybdate</i>	: 3.7	mg/dL	2.7-4.5
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**URIC ACID**

Uric Acid <i>Method : Uricase</i>	: 4.6	mg/dL	2.6 - 6.0
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**LFT**

Total Bilirubin <i>Method : Diazo</i>	: 0.6	mg/dL	0.3 - 1.2
Direct Bilirubin <i>Method : Diazo</i>	: 0.2	mg/dL	0-0.4
Indirect Bilirubin <i>Method : Diazo</i>	: 0.4	mg/dL	0.0 - 0.8
Alanine Transaminase (ALT) <i>Method : Kinetic</i>	: 26.0	U/L	<35
Aspartate Transaminase (AST) <i>Method : Kinetic</i>	: 25.0	U/L	10.0 - 40.0

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<b>Lab No/Result No</b> :	2400124730/830027	<b>Report Date</b> :	29-03-2024 03:39 PM
<b>Referred By Dr.</b> :	HOSPITAL CASE	<b>Specimen</b> :	SERUM
		<b>Processing Loc</b> :	RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
<b>LFT</b>			
Alkaline Phosphatase	:90.0	U/L	30.0 - 115.0
<i>Method : 4NPP/AMP BUFFER</i>			
Total Protein	:7.5	g/dl	6.0 - 8.0
<i>Method : Biuret</i>			
Albumin	:4.5	g/dl	3.5-4.8
<i>Method : BCG</i>			
Globulin	:3	gm/dL	2.3-3.5
<i>Method : Calculated</i>			
A/G Ratio	: 1.5		
<i>Method : Calculated</i>			
<b>T3-T4-TSH -</b>			
Tri-Iodothyronine, (Total T3)	: 1.24	ng/ml	0.97-1.69
<i>Method : Enhanced Chemiluminescence</i>			
Thyroxine (T4), Total	:6.43	ug/dl	5.53-11.01
<i>Method : Enhanced Chemiluminescence</i>			
Thyroid Stimulating Hormone (Ultra).	: 1.757	uIU/mL	0.58-6.88
<i>Method : Enhanced Chemiluminescence</i>			

1.The TSH levels are subject to diurnal/circadian variation. reaching to peak level between 2 to 4 am. and at a minimum between 6 to 10 pm. The variation is to the order of 50%, hence the time when sample is collected has influence on the levels of TSH. 2.Many substances produced in central nervous system, even in healthy euthyroid individuals, may enhance or suppress TSH production in addition to the feedback effect of thyroid hormone. 3.Furthermore, although TSH levels rise and fall in response to changes in the concentration of Free T4, individuals appear to have their own setpoints and factors such as race and age also contribute to variability in TSH levels. Alterations of normal pituitary response are also common in patients with a variety of illnesses which can affect the levels of TSH. 4.Interassay variations are possible on different Immunoassay platforms.

TSH - For pregnancy the reference range is as follows -

1st trimester : 0.6 - 3.4 uIU/mL  
2nd trimester : 0.37 - 3.6 uIU/mL  
3rd trimester : 0.38 - 4.04 uIU/mL

\*\*\* End Of The Report \*\*\*

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<b>Lab Ref No/UHID</b>	: PS008210/P00000634984	<b>Received Date</b>	: 29-03-2024 12:30 PM
<b>Lab No/Result No</b>	: /830027	<b>Report Date</b>	: 29-03-2024 04:09 PM
<b>Referred By Dr.</b>	: HOSPITAL CASE	<b>Specimen</b>	: SERUM
		<b>Processing Loc</b>	: RHC Hinjawadi



**Verified By**  
Snehal

*Pathak*

**Dr.POOJA PATHAK**  
Associate Consultant

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<b>Lab Ref No/UHID</b> :	PS008210/P00000634984	<b>Received Date</b> :	29-03-2024 12:29 PM
<b>Lab No/Result No</b> :	2400124734/830027	<b>Report Date</b> :	29-03-2024 02:09 PM
<b>Referred By Dr.</b> :	HOSPITAL CASE	<b>Specimen</b> :	EDTA WHOLE BLC
		<b>Processing Loc</b> :	RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY**

Investigation	Result	Units	Biological Reference Interval
<b>HAEMOGRAM/CBC/CYTO</b>			
<b>W.B.C.Count</b>	: 4840	/ul	4000-11000
<i>Method : Coulter Principle</i>			
Neutrophils	: 54.0	%	40-75
<i>Method : Derived from WBC Histogram</i>			
Lymphocytes	: 38.8	%	20-40
Monocytes	: 5.4	%	2-10
Eosinophils	: 1.0	%	1.0-6.0
Basophils	: 0.8	%	0.0-1.0
%Immature Granulocytes	: 0.2	%	0.00-0.10
Absolute Neutrophil Count	: 2.6	x10 <sup>3</sup> cells/ul	2-7
<i>Method : Calculated</i>			
Absolute Lymphocyte Count	: 1.9	x10 <sup>3</sup> cells/ul	1 - 3
<i>Method : Calculated</i>			
Absolute Monocyte Count	: 0.3	x10 <sup>3</sup> cells/ul	0.2-1.0
<i>Method : Calculated</i>			
Absolute Eosinophil Count	: 0.1	x10 <sup>3</sup> cells/ul	0.02-0.5
<i>Method : Calculated</i>			
Absolute Basophil Count	: 0.04	x10 <sup>3</sup> cells/ul	0.02-0.1
<i>Method : Calculated</i>			
R.B.C Count	: 4.1	million/ul	3.8 - 5.8
<i>Method : Coulter Principle</i>			
<b>Haemoglobin</b>	: 12.1	g/dl	12 - 15.0
<i>Method : Cyanmethemoglobin Photometry</i>			
Haematocrit	: 39.1	%	36-46
<i>Method : Calculated</i>			
MCV	: 95.4	fl	83 - 99
<i>Method : Coulter Principle</i>			
MCH	: 29.5	pg	27-32
<i>Method : Calculated</i>			
MCHC	: <b>30.9</b>	g/dl	31.5-34.5
<i>Method : Calculated</i>			
RDW	: 13.5	%	11.6-14.0
<i>Method : Calculated From RBC Histogram</i>			
<b>Platelet Count</b>	: 164.0	x10 <sup>3</sup> /ul	150 - 450
<i>Method : Coulter Principle</i>			
MPV	: <b>14.2</b>	fl	7.8-11
<i>Method : Coulter Principle</i>			

<b>Patient Name</b>	: Mrs.KUMARI RITU	<b>Bill Date</b>	: 29-03-2024 12:10 PM
<b>Age / Gender</b>	: 30Y(s) 7M(s) /Female	<b>Collected Date</b>	: 29-03-2024 12:29 PM
<b>Lab Ref No/UHID</b>	: PS008210/P00000634984	<b>Received Date</b>	: 29-03-2024 12:30 PM
<b>Lab No/Result No</b>	: 2400124734/830027	<b>Report Date</b>	: 29-03-2024 02:30 PM
<b>Referred By Dr.</b>	: HOSPITAL CASE	<b>Specimen</b>	: EDTA WHOLE BLC
		<b>Processing Loc</b>	: RHC Hinjawadi



RBC Morphology : Normocytic normochromic

WBC Morphology : Within normal range  
Platelet : Adequate

\*\*\* End Of The Report \*\*\*

**Verified By**  
Snehal

**Dr.POOJA PATHAK**  
Associate Consultant

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**Patient Name** : Mrs.KUMARI RITU  
**Age / Gender** : 30Y(s) 7M(s) /Female  
**Lab Ref No/UHID** : PS008210/P00000634984  
**Lab No/Result No** : 2400124784-P/830027  
**Referred By Dr.** : HOSPITAL CASE

**Bill Date** : 29-03-2024 12:10 PM  
**Collected Date** : 29-03-2024 12:51 PM  
**Received Date** : 29-03-2024 12:30 PM  
**Report Date** : 29-03-2024 04:09 PM  
**Specimen** : SERUM  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
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**PPBS**

Glucose (Post Prandial) : 80 mg/dL 60-140

Method : GOD-POD

\*\*\* End Of The Report \*\*\*

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**Collected Date** : 29-03-2024 12:29 PM  
**Received Date** : 29-03-2024 12:30 PM  
**Report Date** : 29-03-2024 03:26 PM  
**Specimen** : EDTA WHOLE BLC  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY**

Investigation	Result	Units	Biological Reference Interval
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**ESR**

ESR At 1 Hour : 08 mm/hr 0 - 20

Method : Modified Westergren Method

**INTERPRETATION :**

ESR is a screening test to detect presence of systemic disease; however a normal result does not rule out a systemic disease.

ESR is also used to monitor course of disease or response to therapy if initially elevated.

\*\*\* End Of The Report \*\*\*

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**Lab No/Result No** : 2400124732/830027  
**Referred By Dr.** : HOSPITAL CASE

**Bill Date** : 29-03-2024 12:10 PM  
**Collected Date** : 29-03-2024 12:29 PM  
**Received Date** : 29-03-2024 12:30 PM  
**Report Date** : 29-03-2024 03:26 PM  
**Specimen** : SERUM  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
<b>ELECTROLYTES (Na &amp; K)</b>			
Sodium <i>Method : Potentiometric</i>	: 140.0	mmol/L	136.0 - 145.0
Potassium <i>Method : Potentiometric</i>	: 3.8	mmol/L	3.5 - 5.1
Chloride <i>Method : Potentiometric</i>	: 102.0	mmol/L	98.0 - 107.0

\*\*\* End Of The Report \*\*\*

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<b>Lab Ref No/UHID</b> :	PS008210/P00000634984	<b>Received Date</b> :	29-03-2024 12:30 PM
<b>Lab No/Result No</b> :	2400124733/830027	<b>Report Date</b> :	29-03-2024 02:36 PM
<b>Referred By Dr.</b> :	HOSPITAL CASE	<b>Specimen</b> :	URINE
		<b>Processing Loc</b> :	RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-CLINICAL PATHOLOGY**

Investigation	Result	Units	Biological Reference Interval
<b>URINE ROUTINE</b>			
<b>PHYSICAL EXAMINATION</b>			
Colour	: Pale Yellow		
Appearance	: Slightly Turbid		
<b>CHEMICAL TEST</b>			
Ph	: 6.0		5.0-7.0
Specific Gravity	: 1.025		1.015-1.030
Albumin	: Absent		Abset
Urine Sugar	: Absent	mg/dL	
Ketone Bodies	: Absent		Absent
Bile Pigments	: Absent		Absent
<i>Method : Photometric Measurement</i>			
Urobilinogen	: Normal		Normal
Nitrites	: Absent		Absent
Leucocytes Esterase	: 2+		Absent
<b>MICROSCOPIC TEST</b>			
Pus Cells.	: 15-20	/hpf	0 - 5
Red Blood Cells.	: Occasional	/hpf	0 - 2
Epithelial Cells.	: 8-10	/hpf	0-5
Bacteria	: Absent	/hpf	Absent
Cast	: Absent		Absent
Yeast Cells	: Absent		Absent
Crystals	: Absent		Absent
Others	: Absent		Absent

\*\*\* End Of The Report \*\*\*

**Verified By**  
Atul

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<b>Referred By Dr.</b> :	HOSPITAL CASE	<b>Specimen</b> :	SERUM
		<b>Processing Loc</b> :	RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BIOCHEMISTRY**

Investigation	Result	Units	Biological Reference Interval
<b>LIPID PROFILE</b>			
Cholesterol	: 167.0	mg/dL	130.0 - 220.0
<i>Method : Enzymatic</i>			
Triglycerides	: 57	mg/dL	35.0 - 180.0
<i>Method : Enzymatic</i>			
HDL Cholesterol	: <b>73</b>	mg/dL	35-65
<i>Method : Enzymatic</i>			
LDL Cholesterol	: 82.6	mg/dL	10.0 - 130.0
<i>Method : Calculated</i>			
VLDL Cholesterol	: 11.4	mg/dL	5.0-36.0
<i>Method : Calculated</i>			
Cholestrol/HDL Ratio	: 2.29	--	2.0-6.2
<i>Method : Calculated</i>			

\*\*\* End Of The Report \*\*\*

**Verified By**  
SANDEEP

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**Received Date** : 29-03-2024 12:30 PM  
**Report Date** : 29-03-2024 03:08 PM  
**Specimen** : EDTA WHOLE BLC  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-BLOOD BANK**

Investigation	Result	Units	Biological Reference Interval
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**BLOOD GROUP**

Blood Group : B RH POSITIVE

\*\*\* End Of The Report \*\*\*

**Verified By**  
Ardeore

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Associate Consultant

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**Lab No/Result No** : 2400124735-G/830027  
**Referred By Dr.** : HOSPITAL CASE

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**Collected Date** : 29-03-2024 12:29 PM  
**Received Date** : 29-03-2024 12:30 PM  
**Report Date** : 29-03-2024 02:57 PM  
**Specimen** : WHOLE BLOOD  
**Processing Loc** : RHC Hinjawadi



**DEPARTMENT OF LABORATORY MEDICINE-HAEMATOLOGY**

Investigation	Result	Units	Biological Reference Interval
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**GLYCOSYLATED HB% (HbA1C)**

Glycosylated Haemoglobin : 5.0 % 4-6.5  
(HbA1C)

Method : Turbidometric Inhibition  
Immunoassay

Prediabetic : 5.7 - 6.4 %  
Diabetic :  $\geq$  6.5 %  
Therapeutic Target :  $<$ 7.0 %

REFERENCE : ADA 2015 GUIDELINES

\*\*\* End Of The Report \*\*\*

**Verified By**  
Snehal

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## RUBY HALL CLINIC PIMPLE SAUDAGAR

**Name: KUMARI RITU .**

**Date: 29-03-2024 Time: 11:53**

**Age: 30**

**Gender: F**

**Height: 161 cms**

**Weight: 57 Kg**

**ID: PS008210**

**Clinical History:**

**Medications:**

### Test Details:

**Protocol: Bruce**

**Predicted Max HR: 190**

**Target HR: 161**

**Exercise Time: 0:05:10**

**Achieved Max HR: 171 (90% of Predicted MHR)**

**Max BP: 150/80**

**Max BP x HR: 25650**

**Max Mets: 6**

**Test Termination Criteria:**

### Protocol Details:

Stage Name	Stage Time	METS	Speed kmph	Grade %	Heart Rate bpm	BP mmHg	RPP	Max ST Level mm	Max ST Slope mV/s
Supine	00:15	1	0	0	85	110/60	9350	-0.4 aVR	-0.4 aVR
Standing	00:06	1	0	0	92	110/60	10120	-0.6 aVR	0.2 I
HyperVentilation	00:06	1	0	0	89	110/60	9790	-0.4 aVR	-0.4 aVR
PreTest	00:08	1	1.6	0	85	110/60	9350	0.4 II	-0.5 aVR
Stage: 1	02:01	3.1	2.7	10	114	120/60	13680	-0.3 III	-0.4 aVR
Stage: 2	02:01	4.7	4	12	135	120/60	16200	-0.8 III	-0.8 aVR
Peak Exercise	01:08	6	5.5	14	171	140/70	23940	-0.8 II	1 V6
Recovery1	01:00	1	0	0	118	150/80	17700	0.9 V4	1.1 V3
Recovery2	00:15	1	0	0	111	150/80	16650	-0.6 aVR	0.9 V5

### Interpretation

The Patient Exercised according to Bruce Protocol for 0:05:10 achieving a work level of 6 METS.

Resting Heart Rate, initially 85 bpm rose to a max. heart rate of 171bpm (90% of Predicted Maximum Heart Rate).

Resting Blood Pressure of 110/60 mmHg, rose to a maximum Blood Pressure of 150/80 mmHg

Poor Effort Tolerance

Normal HR & BP Response

No Angina or Arrhythmias

No Significant ST-T Changes Noted During Exercise

Negative Stress Test



**Ref. Doctor: ----**

**Doctor: DR.KEDAR KULKARNI**

**SCHILLER**

The Art of Diagnostics

( Summary Report edited by User )  
Spandan CS 10 Version:3.2.0



Grant Medical Foundation  
**Ruby Hall Clinic**  
*Pimple Saudagar*

**Name:** KUMARI RITU .  
**Age :** 030 Years  
**Gender:** F  
**PID:** P00000634984  
**OPD :**

**Exam Date :** 29-Mar-2024 12:21  
**Accession:** 127442113331  
**Exam:** CHEST X RAY  
**Physician:** HOSPITAL CASE<sup>AAAA</sup>

Health Check

**Radiograph Chest PA View :**

Both lung fields normal.

Both costo-phrenic angles are clear.

Cardiac silhouette and aortic knuckle are normal.

Both hilar shadows and the diaphragmatic contours are normal.

Thoracic soft tissues and the rib cage normal.

**Impression :**

No significant abnormality noted.

**DR. YATIN R. VISAVE**  
**CONSULTANT RADIOLOGIST**  
**MBBS, DMRD**  
**Regd. No. 090812**

Date: 29-Mar-2024 13:36:52

<b>Name:</b>	KUMARI RITU .	<b>Exam Date :</b>	29-Mar-2024 10:15
<b>Age :</b>	030 Years	<b>Accession:</b>	127443113436
<b>Gender:</b>	F	<b>Exam:</b>	ABDOMEN AND PELVIS
<b>PID:</b>	P00000634984	<b>Physician:</b>	HOSPITAL CASE <sup>AAAA</sup>
<b>OPD :</b>			

### ULTRASOUND OF ABDOMEN AND PELVIS

Liver appears normal in size, shape and echotexture. No focal lesion is seen. No intrahepatic biliary radicle dilatation seen. The portal vein and CBD appear normal.

Gall bladder is well distended with normal wall thickness. No calculus or sludge is seen.  
Pancreas appears normal in size and echotexture. No focal lesion is seen.  
Spleen appears normal in size and echotexture. No focal lesion is seen.

Right kidney measures 10.7 X 3.6 cms. Left kidney measures 10.6 X 4.3 cms. Both kidneys appear normal in size, shape & echotexture. They show good cortico-medullary differentiation. There is no hydronephrosis, hydroureter or calculus seen on either side.

The urinary bladder is well distended. Wall thickness is normal. No mass lesion or calculus is seen.

Uterus is normal in size and echotexture. Endometrium is central . No focal lesion is seen.  
Both ovaries are normal. No adnexal pathology is seen.

Visualised bowel loops are non-dilated and show normal peristalsis.  
There is no ascites or significant lymphadenopathy seen.

**IMPRESSION : No significant abnormality noted.**

**Suggest : Clinical Correlation.**



**DR. YATIN R. VISAVE**  
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**MBBS, DMRD**  
**Regd. No. 090812**

Date: 29-Mar-2024 11:37:50

# RUBY HALL CLINIC PIMPLE SAUDAGAR

**KUMARI RITU . (30 F)**

Bruce Protocol  
STL:evd(mm) STSllope(mV/s)

ID: PS008210  
Stage: Supine  
Date: 29-03-2024  
Speed: 0 km/h

Exec Time: 0:00:00  
Slope: 0%  
Stage Time: 00:13  
THR: 161 bpm

**HR: 85 bpm**

BP: 110/60 mmHg  
STL:evd(mm) STSllope(mV/s)

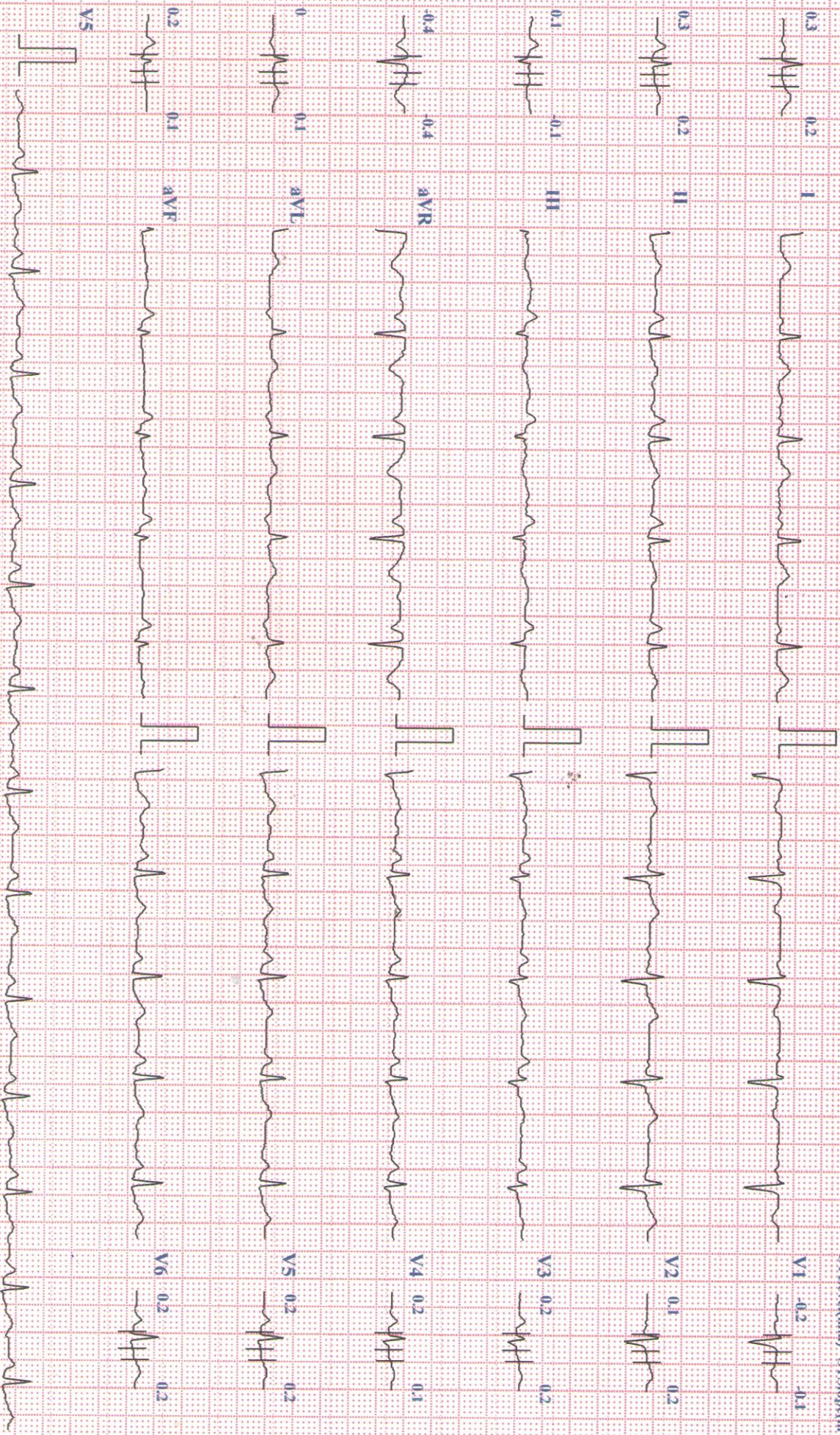
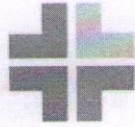


Chart Speed: 25 mm/sec  
Amplitude: 10mm/mV  
Filter: 35 Hz  
Mains Filter: ON  
ISO = R - 60 ms, J = R + 60 ms, Post J = J + 80 ms  
Schiller Spindler CS 10 Version 3.2





MRS. KUMARI RITU



Ref: PS008210- Reg: OPS00005895  
 30.7.0/F - NH - 29/03/2024  
 P00000634984 -

NAME

OPHTHALMOLOGY

AGE: 30 years.

R

L

- 1) Vision  $\begin{cases} \text{unaided} & 6/12 & 6/12. \\ \text{c glasses} & 6/6 & 6/6. \end{cases}$
- 2) Near Vision  $\begin{cases} \text{unaided} & \\ \text{c glasses} & N/G. \end{cases}$
- 3) Binocular Vision Normal
- 4) Colour Vision Normal.
- 5) Tension 17 mmHg 18 mmHg
- 6) Anterior Segment WNL
- 7) Pupils WNL
- 8) Lens clear.
- 9) Media & Fundus ;

10) Remarks RE -1.00 - 2.75 x 180°  
LE -0.75 - 1.50 x 180°

Date: 29/03/24.

(Signature)