



सोनाली चंद्र

Sonali Chandra

जन्म तिथि/ DOB: 21/03/1998

महिला / FEMALE



5130 3163 8993

आधार-आम आदमी का अधिकार

*Sonali Chandra*  
15/12/23





भारतीय विशिष्ट पहचान प्राधिकरण  
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:

आत्मजा: राहुल चंद्र, ए -  
182, गली न. 11, रामाकृष्णा  
अपार्टमेंट के सामने, चन्द्र  
विहार मंडावली, शकरपुर,  
पूर्वी दिल्ली,  
दिल्ली - 110092

Address:

D/O: Rahul Chandra, A - 182, Gali  
No. 11, Opp Ramakrishna Apartment,  
Chander Vihar Mandawali,  
Shakarpur, East Delhi,  
Delhi - 110092

5130 3163 8993

Aadhaar-Aam Admi ka Adhikar





# SJM SUPER SPECIALITY HOSPITAL



100 Bedded Super Speciality Hospital

Sector-63, Noida, NH-9, Near Hindon Bridge

Ph.: 0120-6530900 / 10, Mob.: +91 9599259072

E-mail: sjmhospital@yahoo.com / Website: sjmhospital.com

(24 Hours Emergency, NICU/ICU, Pharmacy & Ambulance Available)

### (IVF SPECIALIST)

Dr. Pushpa Kaul (IVF)  
M.B.B.S, MD(Obst, & Gynae)  
Dr. Neha Zutshi (Embryologist)

### OTHER SPECIALIST

Dr. Pushpa Kaul (IVF)  
M.B.B.S, MD(Obst, & Gynae)  
Dr. Smritee Virmani (Endoscopy)  
MBBS, DGO, DNB, ICOG (Obst. & Gynae)  
Dr. Vinod Bhat  
M.B.B.S, MD (General Medicine)  
Dr. Vineet Gupta, MS (ENT)  
Dr. Naveen Gupta, MS (EYE)  
Dr. Ashutosh Singh, MS (Urology)  
Dr. Rahul Kaul (Spine Surgeon)  
MBBS, MS, (Orthopaedic)  
Dr. Raj Ganjoo MD (Psychiatric)  
Dr. Akash Mishra (Neuro Surgeon)  
Dr. Sanjay Sharma (Cardiologist)  
Dr. S.K. Pandita, MS (Surgeon)  
Dr. B.P. Gupta, MS (Surgeon)  
Dr. Jaisika Rajpal  
(MDS), (Periodontist & Implantologist)  
Dr. Akash Arora  
(MDS), Maxillofacial Surgeon  
Dr. Deepa Maheshwari  
M.B.B.S., MD, FRM, (IVF Specialist)  
Dr. Vivek Kumar Gupta  
MBBS, MS (General Surgeon)  
M.Ch. (Plastic Surgery)  
Dr. Anand Kumar  
MBBS, MD (Paediatrics)  
Dr. Amit kumar Kothari  
MBBS, MD (Medicine)  
Dr. Amit Aggarwal  
M.B.B.S., M.S. Ortho.

### Facilities:

100 Beds. Private & Public wards  
Inpatient & Outpatient - (OPD)Facilities  
24-Hour ambulance and emergency  
3 Operation theatres  
Laparoscopic & Conventional Surgery  
In vitro fertilization centre (IVF)  
Intensive Care Unit. (ICU)  
Neonatal ICUs (NICU)  
Dental Clinic  
Computerized pathology lab  
Digital X-ray and ultrasound  
Physiotherapy facilities  
24-Hour Pharmacy  
Cafeteria & Kitchen

Mrs. Sonali (25y/f)

616  
616,  
N6

— No c/o DOV  
— Doymen.

Refresh Tean Eye Drops- 2 times a day  
X 1 month

SJM SUPER SPECIALITY HOSPITAL  
Dr. Vinod Kumar Bhat  
M.B.B.S, M.D (Medicine)  
Sr. Consultant Physician  
Reg. No. 30989 (DMC)



## CGHS & AYUSHMAN BHARAT

+ Not for medico legal purpose + No substitution of drugs allowed

**Panels:** Raksha TPA Pvt. Ltd., Vipul Med Corp TPA Pvt. Ltd., E-Meditek (TPA) Services Ltd., Medi-Assit India TPA Pvt. Ltd., Park Mediclaim, Genins India TPA Pvt. Ltd., Family Healthcare TPA Pvt. Ltd., Medsave Healthcare TPA Pvt. Ltd., Vidal Health Care TPA Pvt. Ltd., MD India Healthcare, DHS TPA (India) Private Ltd., Mediate TPA Service (I) Pvt. Ltd., East West Assist TPA Pvt. Ltd., United Healthcare Parekh TPA Pvt. Ltd., Good Health TPA Services Ltd., Bajaj Allianz General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., Universal Insurance General Co. Ltd., TATA AIG General Insurance Co. Ltd., Cholamandalam General Insurance Co. Ltd., Liberty Videocon General Insurance Ltd., SBI General Insurance Co. Ltd., Kotak Mahindra General Insurance Co. Ltd., HDFC Standard Life Insurance Co. Ltd., The Oriental Insurance Co. Ltd.(Corporate), National Insurance Co. Ltd.(Corporate), The New India Insurance Co. Ltd. (Corporate), United India Insurance Co Ltd. (Corporate)



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C/O BOPB

15-12-23

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Dental Clinic  
Computerized pathology lab  
Digital X-ray and ultrasound  
Physiotherapy facilities  
24-Hour Pharmacy  
Cafeteria & Kitchen

Ms. Sonali

- Physically and mentally fit

1  
Bh

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Dr. Vinod Kumar Bhat  
M.B.B.S, M.D (Medicine)  
Sr. Consultant Physician  
Reg. No. 30989 (DMC)

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Female

15.12.2023 11:29:03 AM  
sim hospital  
sector 63  
Gautam, Budhha Nagar, UP-201307

Location:  
Room:  
Order Number:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

58 bpm  
--/-- mmHg

QRS :	68 ms
QT / QTcBaz :	394 / 386 ms
PR :	116 ms
P :	82 ms
RR / PP :	1032 / 1034 ms
P / QRS / T :	75 / 82 / 69 degrees

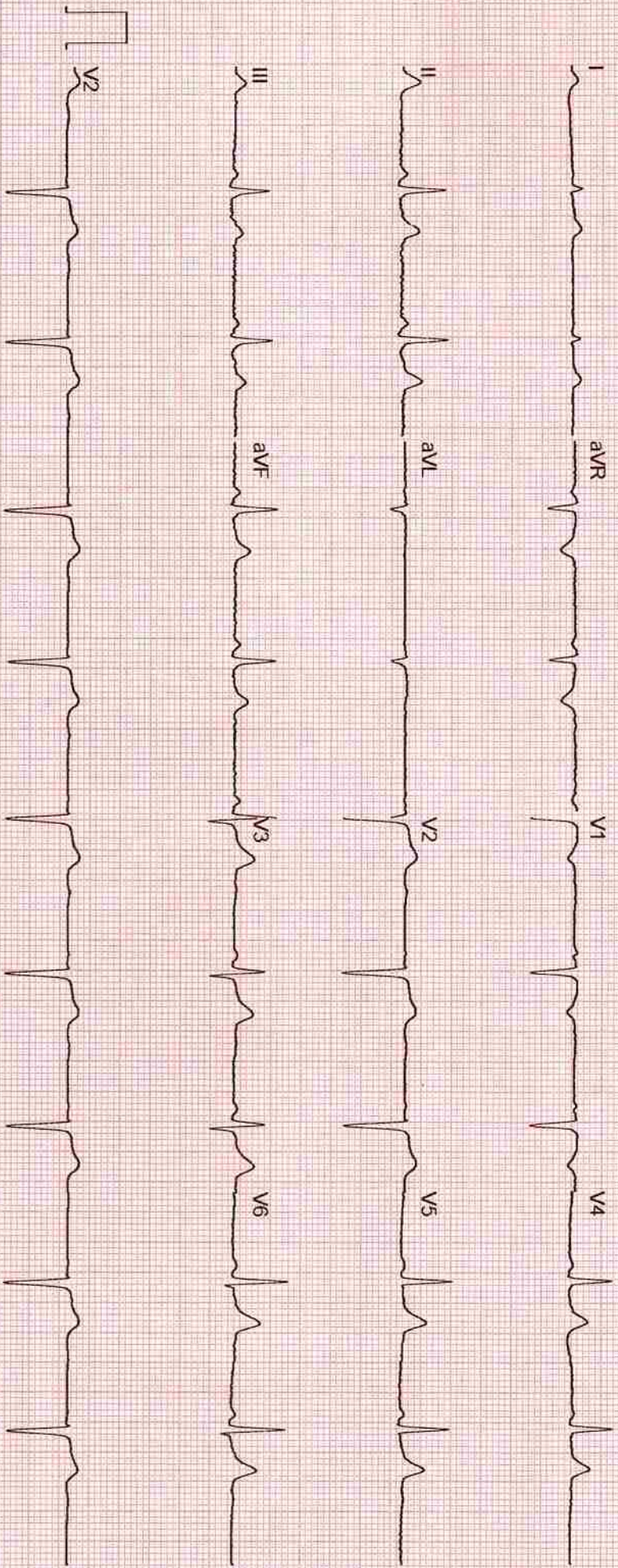
Sinus bradycardia  
Otherwise normal ECG

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

S

AVNO  
R

SJM SUPER SPECIALITY HOSPITAL  
Dr. Vinod Kumar Bhat  
M.B.B.S. M.D. (Medicine)  
Sr. Consultant Physician  
Reg. No. 30869 (DMC)



GE MAC2000 1.1 12SL™ V241

25 mm/s 10 mm/mV

ADS 0.56-20 Hz 50 Hz 4X2 5X3 25\_R1

Unconfirmed

1/1

## Laboratory Report

Lab Serial no.	: LSHHI268151	Mr. No	: 109389
Patient Name	: Mrs. SONALI CHANDRA	Reg. Date & Time	: 15-Dec-2023 11:00 AM
Age / Sex	: 25 Yrs / F	Sample Receive Date	: 15-Dec-2023 11:09 AM
Referred by	: Dr. SELF	Result Entry Date	: 15-Dec-2023 01:02PM
Doctor Name	: Dr. Vinod Bhat	Reporting Time	: 15-Dec-2023 01:02 PM
OPD	: OPD		

### HAEMATOLOGY

	results	unit	reference
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#### CBC / COMPLETE BLOOD COUNT

HB (Haemoglobin)	<b>10.7</b>	gm/dL	12.0 - 16.0
TLC	4.3	Thousand/mm	4.0 - 11.0
DLC			
Neutrophil	51	%	40 - 70
Lymphocyte	29	%	20 - 40
Eosinophil	<b>08</b>	%	02 - 06
Monocyte	02	%	02 - 08
Basophil	00	%	00 - 01
R.B.C.	4.47	Thousand / UI	3.8 - 5.10
P.C.V	35.8	million/UI	0 - 40
M.C.V.	80.1	fL	78 - 100
M.C.H.	<b>23.9</b>	pg	27 - 32
M.C.H.C.	<b>29.9</b>	g/dl	32 - 36
Platelet Count	3.33	Lacs/cumm	1.5 - 4.5

#### INTERPRETATION:

To determine your general health status; to screen for, diagnose, or monitor any one of a variety of diseases and conditions that affect blood cells, such as anemia, infection, inflammation, bleeding disorder or cancer



technician :

Typed By : Mr. BIRJESH

*R. J. G.*

## Laboratory Report

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### HAEMATOLOGY

results unit reference

#### ESR / ERYTHROCYTE SEDIMENTATION RATE

ESR (Erythrocyte Sedimentation Rate) 18 mm/1hr 00 - 20

#### Comments

The ESR is a simple non-specific screening test that indirectly measures the presence of inflammation in the body. It reflects the tendency of red blood cells to settle more rapidly in the face of some disease states, usually because of increases in plasma fibrinogen, immunoglobulins, and other acute-phase reaction proteins. Changes in red cell shape or numbers may also affect the ESR.

### BIOCHEMISTRY

results unit reference

#### HbA1C / GLYCATED HEMOGLOBIN / GHb

Hb A1C 4.8 % 4.0 - 6.0  
 ESTIMATED AVERAGE GLUCOSE 91.06 mg/dl

eAG[Calculated]

#### INTERPRETATION-

	HbA1C
NON DIABETIC	4-6 %
GOOD DIABETIC CONTROL	6-8 %
FAIR CONTROL	8-10 %
POOR CONTROL	>10 %

The Glycosylated haemoglobin assay has been validated as a reliable indicator of mean blood glucose levels for a 3 months period. AMERICAN DIABETES ASSOCIATION recommends the testing twice an year in patients with stable blood glucose, and quarterly if treatment changes or blood glucose is abnormal

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## Laboratory Report

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Age / Sex	: 25 Yrs / F	Sample Receive Date	: 15-Dec-2023 11:09 AM
Referred by	: Dr. SELF	Result Entry Date	: 15-Dec-2023 05:45PM
Doctor Name	: Dr. Vinod Bhat	Reporting Time	: 15-Dec-2023 01:02 PM
OPD	: OPD		

### BIOCHEMISTRY

	results	unit	reference
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#### BLOOD SUGAR (PP), Serum

SUGAR PP	104.7	mg/dl	80 - 140
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**Comments:**

Accurate measurement of glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions. High levels of serum glucose may be seen in case of diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents. Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.

**METHOD:- GOD-POD METHOD, END POINT**

#### BLOOD SUGAR F, Sodium Fluoride Pla

Blood Sugar (F)	87.1	mg/dl	70 - 110
-----------------	------	-------	----------

**Comments:**

Accurate measurement of glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions.

High levels of serum glucose may be seen in case of Diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents.

Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.

Centre for Excellent Patient Care



technician :

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### BIOCHEMISTRY

	results	unit	reference
<b>LIPID PROFILE, Serum</b>			
S. Cholesterol	<b>231.0</b>	mg/dl	< - 200
HDL Cholesterol	<b>101.0</b>	mg/dl	42.0 - 88.0
LDL Cholesterol	120.1	mg/dl	50 - 150
VLDL Cholesterol	9.9	mg/dl	00 - 40
Triglyceride	49.5	mg/dl	00 - 170
Chloestrol/HDL RATIO	<b>2.3</b>	%	3.30 - 4.40

#### INTERPRETATION:

Lipid profile OF lipid panel IS a panel of blood tests that serves as an initial screening tool for abnormalities in lipids, such as cholesterol and triglycerides. The results of this test can identify certain genetic diseases and can determine approximate risks for cardiovascular disease, certain forms of pancreatitis, and other diseases.

Centre for Excellent Patient Care



technician :

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### BIOCHEMISTRY

	results	unit	reference
<b>KFT, Serum</b>			
Blood Urea	34.5	mg/dL	13 - 40
Serum Creatinine	0.73	mg/dl	0.6 - 1.1
Uric Acid	5.3	mg/dl	2.6 - 6.0
Calcium	<b>10.4</b>	mg/dL	8.8 - 10.2
Sodium (Na <sup>+</sup> )	139.4	mEq/L	135 - 150
Potassium (K <sup>+</sup> )	4.60	mEq/L	3.5 - 5.0
Chloride (Cl)	103.8	mmol/L	94 - 110
BUN/ Blood Urea Nitrogen	16.12	mg/dL	7 - 18
PHOSPHORUS-Serum	4.38	mg/dl	2.5 - 4.5

**Comment:-**

Kidneys play an important role in the removal of waste products and maintenance of water and electrolyte balance in the body. Kidney Function Test (KFT) includes a group of blood tests to determine how well the kidneys are working.

Centre for Excellent Patient Care



technician :

Typed By : Mr. BIRJESH

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Age/Sex : 25 Yrs /F	Sample Collection Date : 15-Dec-2023 11:09 AM
Referred By : SELF	Sample Receiving Date : 15-Dec-2023 11:09 AM
Doctor Name : Dr. Vinod Bhat	ReportingTime : 15-Dec-2023 01:02 PM
OPD/IPD : OPD	:

### TEST NAME

### VALUE

ABO

"A"

Rh

POSITIVE

### Comments:

Human red blood cell antigens can be divided into four groups A, B, AB AND O depending on the presence or absence of the corresponding antigens on the red blood cells. There are two glycoprotein A and B on the cell's surface that are responsible for the ABO types. Blood group is further classified as RH positive and RH negative.

### URINE SUGAR (FBS)

### CHEMICAL EXAMINATION

Glucose : Nil

### URINE SUGAR (PPBS)

### CHEMICAL EXAMINATION

Glucose : Nil



Mr. BIRJESH

<http://rgcipac3/SJM/Design/Finanace/LabTextReport.aspx>

12/16/2023

  
**Dr. Rajeev Goel**  
M.D. (Pathologist)  
36548 (MCI)

**Dr. Bupinder Zutshi**  
(M.B.B.S., MD)  
Pathologist & Microbiologist



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Doctor Name : Dr. Vinod Bhat	ReportingTime : 15-Dec-2023 01:02 PM
OPD/IPD : OPD	:

### URINE EXAMINATION TEST

#### PHYSICAL EXAMINATION

Quantity: 20 ml  
 Color: Straw  
 Transparency: clear

#### CHEMICAL EXAMINATION

Albumin: nil  
 Glucose: nil  
 PH: Acidic

#### MICROSCOPIC EXAMINATION

Pus cells: 1-2 /HPF  
 RBC's: nil  
 Crystals: nil  
 Epithelial cells: 0-1 /HPF  
 Others: nil

#### Note:-

A urinalysis is a test of your urine. It's used to detect and manage a wide range of disorders, such as urinary tract infections, kidney disease and diabetes. A urinalysis involves checking the appearance, concentration and content of urine.

Mr. BIRJESH

<http://rgcipac3/SJM/Design/Finanace/LabTextReport.aspx>

12/16/2023

**Dr. Rajeev Goel**  
 M.D. (Pathologist)  
 36548 (MCI)

**Dr. Bupinder Zutshi**  
 (M.B.B.S., MD)  
 Pathologist & Microbiologist



Patient Name : Mrs. SONALI CHANDRA	Registration No. : 152107
Age/Sex : 25 Y/Female	Registered : 15/Dec/2023
Patient ID : 012312150008	Collection : 15/Dec/2023 02:08PM
Barcode : 10161084	Received : 15/Dec/2023 02:17PM
Ref. By : Self	Reported : 15/Dec/2023 03:39PM
SRF No. :	Panel : SJM Hospital
Aadhar-Nation : - Indian	Passport No. :

Test Name	Value	Unit	Bio Ref.Interval
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**THYROID PROFILE (TFT)SERUM\***

T3 ,Serum	127.00	ng/dl	69-215
T4 ,Serum ECLIA	8.50	ug/dL	5.2-12.7
TSH(ultrasensitive) ECLIA	2.9	uIU/mL	0.3-4.5

TSH	T3 / FT3	T4 / FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within range	Decreased	Within range	Isolated Low T3-often seen in elderly & associated non-thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within range	Within Range	Isolated high TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with physiological & biological TSH variability. Subclinical Autoimmune Hypothyroidism Intermittent T4 therapy for hypothyroidism Recovery phase after non-thyroidal illness"
Raised	Decreased	Decreased	Chronic Autoimmune Thyroiditis Post thyroidectomy, post radioiodine Hypothyroid phase of transient thyroiditis" Interfering antibodies to thyroid hormones (anti-TPO antibodies)
Raised or within range	Raised	Raised / Normal	Intermittent T4 therapy or T4 overdose Drug interference- Amiodarone, Heparin,Beta blockers,steroids, anti-epileptics
Decreased	Raised / Normal	Raised / Normal	Isolated Low TSH -especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness Subclinical Hyperthyroidism Thyroxine ingestion"
Decreased	Decreased	Decreased	Central Hypothyroidism Non-Thyroidal illness Recent treatment for Hyperthyroidism (TSH remains suppressed)"
Decreased	Raised	Raised	Primary Hyperthyroidism (Graves' disease),Multinodular goitre, Toxic nodule Transient thyroiditis:Postpartum, Silent (lymphocytic), Postviral (granulomatous,subacute, DeQuervain's),Gestational thyrotoxicosis with



*Jatinder*  
Dr. Jatinder Bhatia  
MD Pathology  
Director

*Madhusmita Das*  
Dr. Madhusmita Das  
MD MICROBIOLOGY

*Chitra*  
Dr. Chitra Chauhan  
MBBS, MD Pathology  
(Gold Medalist)



DIAGNOSTICS

Patient Name : Mrs. SONALI CHANDRA	Registration No : 152107
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Patient ID : 012312150008	Collection : 15/Dec/2023 02:08PM
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Aadhar-Nation : - Indian	Passport No. :

Test Name	Value	Unit	Bio Ref.Interval
-----------	-------	------	------------------

Decreased or	Raised	Within range	hyperemesis gravidarum"
Within range			T3 toxicosis
			Non-Thyroidal illness

**TSH( $\mu$ IU/ml) for pregnant females (As per American Thyroid Association)**

First Trimester	0.10-2.5
Second Trimester	0.20-3.00
Third Trimester	0.30-3.00

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

Tests Requested:THYROID PROFILE (TFT)SERUM



*Jhatia*  
**Dr. Jatinder Bhatia**  
 MD Pathology  
 Director

*Madhusmita Das*  
**Dr. Madhusmita Das**  
 MD MICROBIOLOGY

*Chitra*  
**Dr. Chitra Chauhan**  
 MBBS , MD Pathology  
 (Gold Medalist)



Case ID:	103230100244
Patient Name	SONALI CHANDRA
Age/Sex	25 Year /Female
Hospital Location	Noida, Uttar Pradesh, India
Hospital Name	SJM Hospital and IVF Centre
Physician Name	Dr PUSHPA KAUL
Date & Time of Accessioning	15/12/2023 17:42 Hrs
Date & Time of Reporting	16/12/2023 12:06 Hrs



**TEST NAME**

Pap Smear-LBC

**SPECIMEN INFORMATION**

LBC. Lab No C/5031/23 Collected on 15/12/2023 at 14:00 Hrs

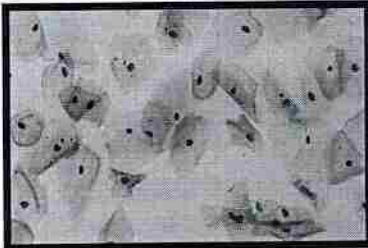
**CLINICAL HISTORY**

NA

**METHODOLOGY**

Cytology

**CYTOLOGY REPORT**



Satisfactory for Evaluation

Transformation zone: Absent

Squamous cellularity: Adequate

Inflammatory change: Mild

Negative for intraepithelial lesion or malignancy (NILM)

**COMMENT**

1. The reporting was done as per Bethesda System of Reporting of Cervical Cytology, 2014.

Disclaimer:-PAP test is a screening test for cervical cancer with inherent false negative results.



*Shashi*  
Dr. Shashikant Singh, MBBS, MD  
Reg. No. DMC/R/11737



Scan to Connect

## Question?

Contact us at +91 124 4615 615

Toll Free Helpline +91 8882899999

### CONDITIONS OF REPORTING

1. The tests are carried out in the lab with the presumption that the specimen belongs to the patient named or identified in the bill/test request form.
2. The test results relate specifically to the sample received in the lab and are presumed to have been generated and transported per specific instructions given by the physicians/laboratory.
3. The reported results are for information and are subject to confirmation and interpretation by the referring doctor.
4. Some tests are referred to other laboratories to provide a wider test menu to the customer.
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406, Udyog Vihar, Phase III, Gurgaon-122016

#### **CORE Diagnostics Lab - New Delhi (103)**

C-13, Green Park Extension, New Delhi-110016

#### **CORE Diagnostics Lab - Lucknow (109)**

J.S. Tower, Plot No. K-702, Sector-K, Ashiyana,  
Near Raj Luxmi Sweets, Lucknow-226012

#### **CORE Diagnostics Satellite Lab (110)**

New Delhi 67, Hargobind Enclave, New Delhi - 110092

#### **CORE Diagnostics Lab - Bangalore (105)**

1st Floor, KMK Tower, 142 KH Road, Bangalore-560027

#### **CORE Diagnostics Lab - Bhubaneswar (108)**

Plot No. 249, Near Police Academy, AIIMS Nagar,  
Patrapada, Bhubaneswar-751019

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#### **CORE Diagnostics Satellite Lab**

Guwahati Ground Floor, Honuram Boro Path, Shubham Velocity, GS Road, Dispur, Kamrup Metropolitan  
Guwahati, Assam - 781005

The test was processed in Lab 103.





## Ultrasound Report

### TRANSTHORASCIC ECHO-DOPPLER REPORT

Name: Mrs. sonali      Age /sex: 25Yrs/F      Date: 15/12/2023

ECHO WINDOW: POOR WINDOW

	Observed values (cm)		Normal values (mm)
Aortic root diameter	2.2		22-36
Aortic valve Opening			15-26
Left Atrium size	2.4		19-40
	End Diastole (cm)	End Systole (cm)	Normal Values (mm)
Left Ventricle size	4.1	2.4	(ED=39-58)
Interventricular Septum	0.7		(ED=6-11)
Posterior Wall thickened	0.7		(ED=6-10)
LV Ejection Fraction (%)	60		55%-65%

### Doppler Velocities (cm / sec)

Pulmonary valve	=	Normal	Aortic valve	=	Normal
Max velocity			Max velocity		
Mean PG			Max PG		
Pressure ½ time			Mean velocity		
Acceleration Time			Mean PG		
RVET			LVET		
Mitral valve = Normal			Tricuspid valve = Normal		
E	E>A		Max Velocity		
A			Mean Velocity		
DT			Mean PG		
E/E			MAPSE		



## Ultrasound Report

Regurgitation: -

MR =NIL		TR = NIL	
Severity		Severity	
Max Velocity		RVSP	
AR		PR	
Severity	NIL	Severity	NIL
Jet width /LVOT ratio		Mean PAP	

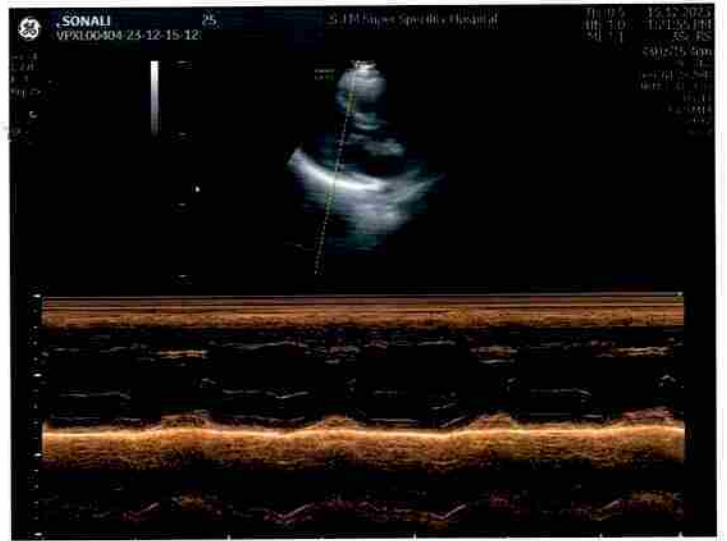
Final Interpretation: -

- 1.) NO LV HYPOKINASIA GLOBAL LVEF 60%
- 2.) No MS NO AS/AR, No TR
- 3.) No Intra cardiac clot, vegetation, pericardial effusion

DR. AMIT KOTHARI

Non-Interventional Cardiologist.







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## Ultrasound Report

NAME: Mrs. Sonali Chandra

AGE: 25yrs

DATE: 15/12/2023

### Real time USG of abdomen and pelvis reveals –

**LIVER**--Liver appears normal in size and shape, contour and echo pattern.

There is no evidence of any focal lesion seen in the parenchyma.

Intra-hepatic vascular and biliary radicles appear normal. Portal vein and common bile duct are normal.

**GALL BLADDER**- Gall bladder is physiologically distended. The wall thickness is normal. There is no Evidence of any intraluminal mass lesion or calculi seen.

**PANCREAS**-Pancreas is normal in size, shape and echo pattern. No focal mass lesion seen. Pancreatic duct is not dilated.

**SPLEEN**-Spleen show normal size, shape and homogeneous echo pattern. No focal mass lesion is seen in parenchyma.

**KIDNEY** -Both the kidneys are normal in size, shape, position and axis. Parenchymal echo pattern is normal bilaterally. No focal solid or cystic lesion is seen. There is no evidence of renal calculi left side. **Right kidney shows renal concretions.**

**RETROPERITONIUM**- -There is no evidence of ascites or Para – aortic adenopathy seen. Retroperitoneal structures appear normal.

**URINARY BLADDER**- - Adequately distended. Walls were regular and thin. Contents are normal. No stone formation seen.

**UTERUS**-Uterus bulky. both ovaries are normal in size, shape and echo pattern. No focal lesion is seen. Endometrial thickness 8mm. There is no evidence of free fluid seen in the pouch of Douglas. There is no evidence of adnexal mass is seen.

**IMPRESSION: Right Renal Concretion.**

DR. PUSHPA KAUL

DR. Rakesh Gujjar





## X-Ray Report

PATIENT ID	: 25232 OPD	PATIENT NAME	: MRS. SONALI CHANDRA
AGE	: 25Y	SEX	: Female
ACCN	:	MODALITY	: DX
REF. PHY.	:	STUDY	: Chest
STUDY DATE	: 15-Dec-2023	VOUCHER NO	#{voucherNo}

### RADIOLOGY REPORT

#### EXAM: X RAY CHEST

#### CLINICAL HISTORY:

#### COMPARISON:

None

#### TECHNIQUE:

Frontal projections of the chest were obtained

#### FINDINGS:

Both lung fields are clear.  
 Both costophrenic angles appear normal.  
 The tracheal lucency is centrally placed.  
 The mediastinal and diaphragmatic outlines appear normal.  
 The heart shadow is normal.  
 The bony thoracic cage and soft tissues are normal.

#### IMPRESSION:

1. The study is within normal limits.

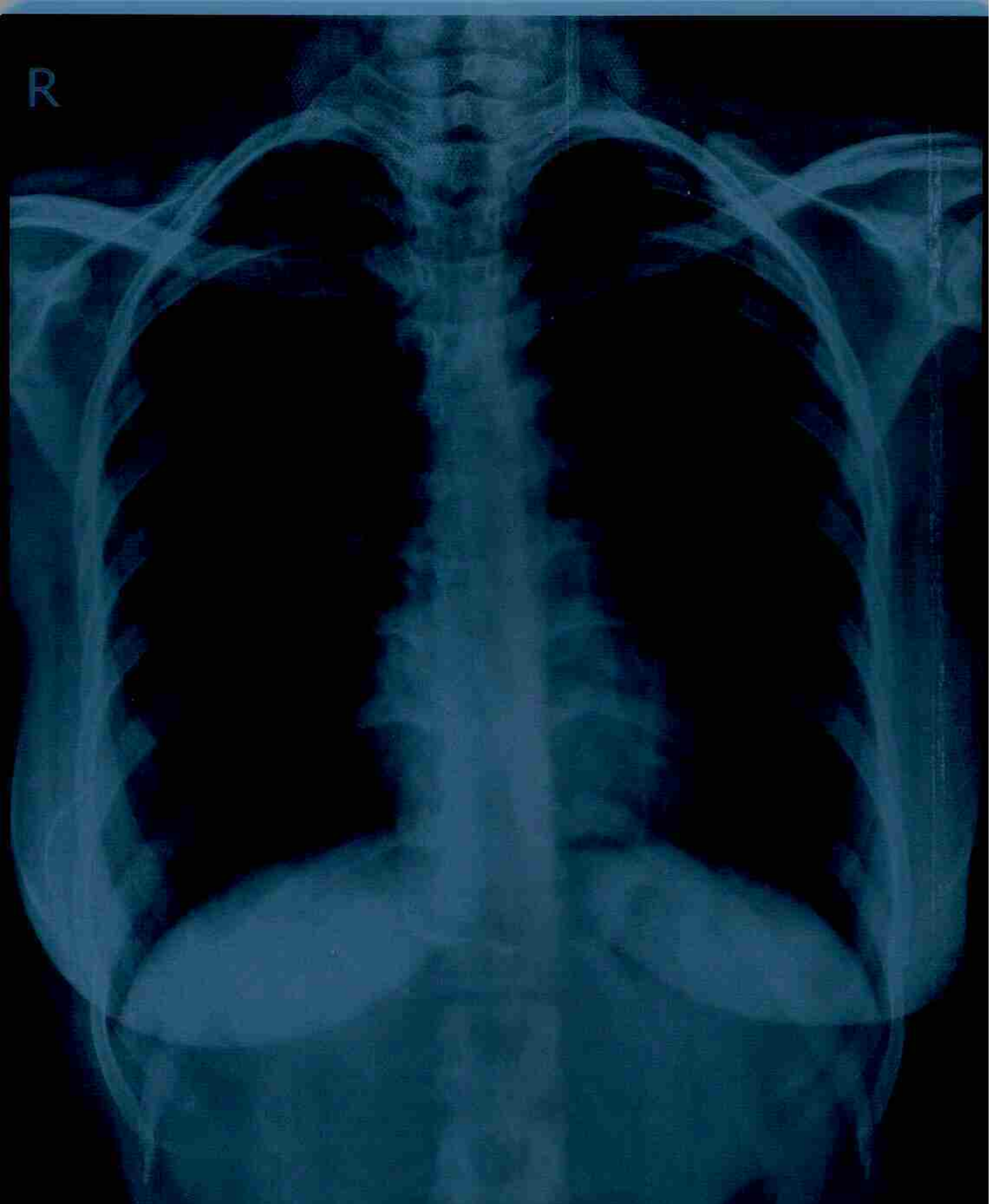


Dr. AMIT KHARAT  
 MBBS, DM/RCI, DNB, M/NAMS, PHD, FICR  
 Consultant Radiologist  
 Reg No: 98050



Dr. Amit Kharat  
 15th Dec 2023

R



MRS. SONALI CHANDRA 25Y Female

Chest PA 25232 OPD 15/12/2023 10:42:36 AM

S. J. MEMORIAL SUPER SPECIALITY HOSPITAL SEC 63, CHHIJARSI, NOIDA