



12, C.P. Ramaswamy Road, Alwarpet, Chennai - 600 018 Ph. No.: 044 2467 2200 Fax: 044 2467 2211 www.apollospectra.com

Patient Name

: Mrs.MEENA R .

Age/Gender

: 30 Y 1 M 17 D/F : SALW.0000133149

UHID/MR No Visit ID

: SALWOPV194031

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: 121080.

Collected

: 12/Aug/2023 08:53AM

Received

: 12/Aug/2023 09:17AM

Reported

: 12/Aug/2023 09:39AM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

PERIPHERAL SMEAR, WHOLE BLOOD EDTA

METHODLOGY: MICROSCOPIC

RBC

: Predominantly Normocytic Normochromic RBCS.

WBC

: Normal in count and distribution. No abnormal cells seen.

PLATELET

: Adequate on smear.

PARASITES: No haemoparasites seen.

IMPRESSION: Normal blood picture.

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SIN No:BED230190626





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: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY					
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324					
Test Name Result Unit Bio. Ref. Range Method					

HAEMOGLOBIN	11.3	g/dL	12-15	Spectrophotometer
PCV	34.30	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.2	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	82	fL	83-101	Calculated
MCH	27	pg	27-32	Calculated
MCHC	33	g/dL	31.5-34.5	Calculated
R.D.W	14	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	5,700	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (D	LC)	5		
NEUTROPHILS	71	%	40-80	Electrical Impedanc
LYMPHOCYTES	23	%	20-40	Electrical Impedanc
EOSINOPHILS	03	%	1-6	Electrical Impedanc
MONOCYTES	03	%	2-10	Electrical Impedanc
ABSOLUTE LEUCOCYTE COUNT				•
NEUTROPHILS	4047	Cells/cu.mm	2000-7000	Electrical Impedanc
LYMPHOCYTES	1311	Cells/cu.mm	1000-3000	Electrical Impedanc
EOSINOPHILS	171	Cells/cu.mm	20-500	Electrical Impedanc
MONOCYTES	171	Cells/cu.mm	200-1000	Electrical Impedanc
PLATELET COUNT	271000	cells/cu.mm	150000-410000	Electrical impedenc
ERYTHROCYTE SEDIMENTATION RATE (ESR)	16	mm at the end of 1 hour	0-20	Modified Westergre
ERIPHERAL SMEAR				

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SIN No:BED230190626





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: SALW.0000133149

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: 12/Aug/2023 08:53AM

Received

: 12/Aug/2023 11:39AM

Reported

: 12/Aug/2023 12:47PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name Result Unit Bio. Ref. Range Method

BLOOD GROUP ABO AND RH FACTOR, WHOLE BLOOD EDTA					
BLOOD GROUP TYPE	А		Microplate Hemagglutination		
Rh TYPE	Positive		Microplate Hemagglutination		

PLEASE NOTE THIS SAMPLE HAS BEEN TESTED ONLY FOR ABO MAJOR GROUPING AND ANTI D ONLY.

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SIN No:HA05466120

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.





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Patient Name

: Mrs.MEENA R .

Age/Gender

: 30 Y 1 M 17 D/F : SALW.0000133149

UHID/MR No Visit ID

: SALWOPV194031

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: 121080.

Collected

: 12/Aug/2023 12:10PM

Received

: 12/Aug/2023 01:47PM

Reported

: 12/Aug/2023 02:35PM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324						
Test Name	Result	Unit	Bio. Ref. Range	Method		

GLUCOSE, FASTING, NAF PLASMA	98	ma/dL	70-100	GOD - POD
SESSSE, I ASTING, WAT TEACHIA	30	IIIg/aL	70 100	000 100

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	84	mg/dL	70-140	GOD - POD
HOURS , SODIUM FLUORIDE PLASMA (2		-		
HR)				

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

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Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 121080. Collected : 12/Aug/2023 08:53AM

Received : 12/Aug/2023 11:40AM Reported : 12/Aug/2023 01:00PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

/ LIE A I TLI ANNI I A I	DI LIG CHECK	EEMALE SDECHO D	AN INDIA EV2224
HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - F	AN INDIA - F 1 2324
I	ı	T	I
Result	Unit	Rio Ref Range	Method
Result	0	Bio. Rei. Range	Mictiloa
	Result		HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - F

HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	5.5	%	HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	111	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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SIN No:EDT230074321

 $This \ test \ has \ been \ performed \ at \ Apollo \ Health \ and \ Lifestyle \ Ltd \ - \ Chennai, Diagnostics \ Laboratory.$





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Method

Patient Name

: Mrs.MEENA R .

Age/Gender

: 30 Y 1 M 17 D/F : SALW.0000133149

UHID/MR No Visit ID

: SALWOPV194031

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: 121080.

Test Name

Collected

: 12/Aug/2023 08:53AM

Received

: 12/Aug/2023 10:02AM

Reported

: 12/Aug/2023 11:33AM

Bio. Ref. Range

Status

Unit

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Result

LIPID PROFILE, SERUM					
TOTAL CHOLESTEROL	171	mg/dL	<200	CHE/CHO/POD	
TRIGLYCERIDES	45	mg/dL	<150	9	
HDL CHOLESTEROL	39	mg/dL	>40	CHE/CHO/POD	
NON-HDL CHOLESTEROL	132	mg/dL	<130	Calculated	
LDL CHOLESTEROL	123	mg/dL	<100	Calculated	
VLDL CHOLESTEROL	9	mg/dL	<30	Calculated	
CHOL/HDL RATIO	4.38		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
HI I DI	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
INCHES CHOILES LERCH	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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: 12/Aug/2023 08:53AM

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: 12/Aug/2023 10:02AM

Reported

: 12/Aug/2023 11:42AM

Status

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name Result Unit Bio. Ref. Range Method

LIVER FUNCTION TEST (LFT), SERUM				
BILIRUBIN, TOTAL	0.50	mg/dL	0.1-1.2	Azobilirubin
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.1-0.4	DIAZO DYE
BILIRUBIN (INDIRECT)	0.40	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	11	U/L	4-44	JSCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	17.0	U/L	8-38	JSCC
ALKALINE PHOSPHATASE	70.00	U/L	32-111	IFCC
PROTEIN, TOTAL	7.50	g/dL	6.7-8.3	BIURET
ALBUMIN	4.80	g/dL	3.8-5.0	BROMOCRESOL GREEN
GLOBULIN	2.70	g/dL	2.0-3.5	Calculated
A/G RATIO	1.78		0.9-2.0	Calculated

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DEPARTMENT OF BIOCHEMISTRY ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324 Test Name Result Unit Bio. Ref. Range Method

RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM					
CREATININE	0.85	mg/dL	0.4-1.1	ENZYMATIC METHOD	
UREA	21.61	mg/dL	17-48	Urease	
BLOOD UREA NITROGEN	10.1	mg/dL	8.0 - 23.0	Calculated	
URIC ACID	3.70	mg/dL	3.0-5.5	URICASE	
CALCIUM	9.20	mg/dL	8.4-10.2	CPC	
PHOSPHORUS, INORGANIC	3.80	mg/dL	2.6-4.4	PNP-XOD	
SODIUM	139	mmol/L	135-145	Direct ISE	
POTASSIUM	4.1	mmol/L	3.5-5.1	Direct ISE	
CHLORIDE	100	mmol/L	98 - 107	Direct ISE	

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: 12/Aug/2023 11:33AM

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ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name Result Unit Bio. Ref. Range Method

GAMMA GLUTAMYL TRANSPEPTIDASE 11.00 U/L 16-73 Glycylglycine Kinetic (GGT) , SERUM

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Patient Name : Mrs.MEENA R .

Age/Gender : 30 Y 1 M 17 D/F

UHID/MR No : SALW.0000133149

Visit ID : SALWOPV194031

Ref Doctor : Dr.SELF Emp/Auth/TPA ID : 121080. Collected : 12/Aug/2023 08:53AM

Received : 12/Aug/2023 12:47PM Reported : 12/Aug/2023 01:54PM

Status : Final Report

Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324 Test Name Result Unit Bio. Ref. Range Method

THYROID PROFILE TOTAL (T3, T4, TSH), SERUM					
TRI-IODOTHYRONINE (T3, TOTAL)	1.29	ng/mL	0.7-2.04	CLIA	
THYROXINE (T4, TOTAL)	10.96	μg/dL	6.09-12.23	CLIA	
THYROID STIMULATING HORMONE (TSH)	2.342	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:

IFOR pregnant temales	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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SIN No:SPL23114765

This test has been performed at Apollo Health and Lifestyle Ltd - Chennai, Diagnostics Laboratory.





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Age/Gender

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UHID/MR No Visit ID

: SALWOPV194031

Ref Doctor

: Dr.SELF

Emp/Auth/TPA ID

: 121080.

COMPLETE LIDINE EXAMINATION (CLIE) LIDINE

Collected

: 12/Aug/2023 08:53AM

Received

: 12/Aug/2023 02:54PM

Reported Status

: 12/Aug/2023 03:07PM

: Final Report

Sponsor Name

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY					
ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324					
Test Name Result Unit Bio. Ref. Range Method					

PHYSICAL EXAMINATION				
COLOUR	PALE YELLOW		PALE YELLOW	Visual
TRANSPARENCY	CLEAR		CLEAR	Visual
рН	6.0	*	5-7.5	Bromothymol Blue
SP. GRAVITY	1.020		1.002-1.030	Dipstick
BIOCHEMICAL EXAMINATION			•	
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVÉ		NEGATIVE	AZO COUPLING
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	NITROPRUSSIDE
UROBILINOGEN	NORMAL		NORMAL	EHRLICH
BLOOD	NEGATIVE		NEGATIVE	Dipstick
NITRITE	NEGATIVE		NEGATIVE	Dipstick
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	PYRROLE HYDROLYSIS
CENTRIFUGED SEDIMENT WET MO	OUNT AND MICROSCOPY			
PUS CELLS	3-5	/hpf	0-5	Microscopy
EPITHELIAL CELLS	2-4	/hpf	<10	MICROSCOPY
RBC	ABSENT	/hpf	0-2	MICROSCOPY
CASTS	ABSENT		0-2 Hyaline Cast	MICROSCOPY
CRYSTALS	ABSENT		ABSENT	MICROSCOPY

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SIN No:UR2164979





12, C.P. Ramaswamy Road, Alwarpet, Chennai - 600 018 Ph. No.: 044 2467 2200 Fax: 044 2467 2211 www.apollospectra.com

Patient Name

: Mrs.MEENA R .

Age/Gender

: 30 Y 1 M 17 D/F

UHID/MR No

: SALW.0000133149

Visit ID Ref Doctor : SALWOPV194031

: Dr.SELF

Emp/Auth/TPA ID : 121080. Collected

: 12/Aug/2023 08:53AM

Received

: 12/Aug/2023 02:55PM

Reported

: 12/Aug/2023 03:08PM

Status

Sponsor Name

: Final Report

: ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BO	DY HEALTH ANNUAL	PLUS CHECK -	FEMALE - 2D ECHO - I	PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method

URINE GLUCOSE(POST PRANDIAL)	NEGATIVE	NEGATIVE	Dipstick

URINE GLUCOSE(FASTING) **NEGATIVE** **NEGATIVE**

Dipstick

*** End Of Report ***

C. Chidamohoom DR. CHIDAMBHARAM C

M.D., D.N.B. CONSULTANT PATHOLOGIST

M.B.B.S,M.D(Pathology) Consultant Pathologist

M.D,DipRCPath,D.N.B(PATH) Consultant Pathologist

M.D.(Biochemistry)

Page 12 of 12



#12 CP Ramaswamy Road, Alwarpet, Chennai - 600 018 Ph: 044- 24672200/24988865/66/67 www.apollospectra.com

Patient Name	: Mrs. MEENA R .	Age/Gender	: 30 Y/F
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 UHID/MR No.
 : SALW.0000133149
 OP Visit No
 : SALWOPV194031

 Sample Collected on
 : 14-08-2023 13:58

Ref Doctor: SELF **Emp/Auth/TPA ID**: 121080.

LRN#

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

Liver shows uniform echopattern with no evidence of focal or diffuse pathology. Intra and extra hepatic biliary passages are not dilated.

Gall bladder appears normal with no evidence of calculus.

Wall thickness appear normal.

Pancreas appears normal.

Spleen measures 8.9cm and shows normal echotexture.

Visualised aorta and IVC are normal.

No evidence of ascites or lymphadenopathy.

Right kidney measures 9.8 x 4.0cm - Small cystic are noted measures 0.8 x 0.8mm in the upper pole cortex.

Left kidney measures 9.4 x 4.9cm.

Both kidneys show normal echopattern with no evidence of calculi or calyceal dilatation.

Uterus anteverted measures 6.8 x 3.2cm. Endometrial thickness -1.0cm.

Right ovary measures 3.2 x 1.6cm.

Left ovary measures 3.5 x 1.8cm.

Both ovaries - Small follicles noted.

Bladder is normal in contour.

IMPRESSION:

NORMAL APPEARING LIVER / GALL BLADDER / PANCREAS / SPLEEN / KIDNEYS AND UTERUS.



#12 CP Ramaswamy Road, Alwarpet, Chennai - 600 018 Ph: 044- 24672200/24988865/66/67 www.apollospectra.com

Patient Name : Mrs. MEENA R . Age/Gender : 30 Y/F

RIGHT KIDNEY S/O SMALL SIMPLE CYST.

TO BE CLINICALLY CORRELATED.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable).

Dr. S SANGEETHAMBBS.,TRAINED IN ULTRASONOGRAPHY

Radiology