

CID# : 2226722907

Name : MRS.MAMTA DESHMUKH

Age / Gender : 51 Years/Female

Consulting Dr. :-

Collected : 24-Sep-2022 / 08:42

Reg.Location : Andheri West (Main Centre)

Reported : 27-Sep-2022 / 12:27

GYNAECOLOGICAL CONSULTATION

PARAMETER

EXAMINATION			
RS	: AEBE	CVS	: S1S2 audible
BREAST EXAMINATION	: Mammography done	PER ABDOMEN	: Liver,Spleen not palpable
PER VAGINAL	: Not done		
MENSTRUAL HISTORY			
MENARCHE	: 14 years		
PAST MENSTRUAL HISTORY	: Regular		
OBSTETRIC HISTORY :			
NA			
PERSONAL HISTORY			
ALLERGIES	: None	BLADDER HABITS	: Normal
BOWEL HABITS	: Tends to get constipation	DRUG HISTORY	: None
PREVIOUS SURGERIES	: Surgery for Fibroadenoma breast at the age of 22		
FAMILY HISTORY :			
Not Significant			
CHIEF GYNAE COMPLAINTS :			
Asymptomatic			
RECOMMENDATIONS :			
Mammography shows fibroadenoma in left breast,USG is suggestive of hemangioma of liver, Kindly consult your family physician with all your reports, Therapeutic life style modification is advised.			

*** End Of Report ***

Sangeeta Manwani

Dr.Sangeeta Manwani
M.B.B.S. Reg.No.71083

ADDRESS: 2nd Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343

For Feedback - customerservice@suburbandiagnosics.com | www.suburbandiagnosics.com



Use a QR Code Scanner
Application To Scan the Code

CID : 2226722907
Name : MRS.MAMTA DESHMUKH
Age / Gender : 51 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 24-Sep-2022 / 09:02
Reported : 24-Sep-2022 / 13:38

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO

<u>PARAMETER</u>	<u>RESULTS</u>	<u>BIOLOGICAL REF RANGE</u>	<u>METHOD</u>
<u>RBC PARAMETERS</u>			
Haemoglobin	11.3	12.0-15.0 g/dL	Spectrophotometric
RBC	4.06	3.8-4.8 mil/cmm	Elect. Impedance
PCV	34.4	36-46 %	Calculated
MCV	84.8	80-100 fl	Measured
MCH	27.9	27-32 pg	Calculated
MCHC	32.9	31.5-34.5 g/dL	Calculated
RDW	13.9	11.6-14.0 %	Calculated
<u>WBC PARAMETERS</u>			
WBC Total Count	5390	4000-10000 /cmm	Elect. Impedance
<u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u>			
Lymphocytes	38.7	20-40 %	
Absolute Lymphocytes	2080	1000-3000 /cmm	Calculated
Monocytes	8.3	2-10 %	
Absolute Monocytes	450	200-1000 /cmm	Calculated
Neutrophils	48.4	40-80 %	
Absolute Neutrophils	2600	2000-7000 /cmm	Calculated
Eosinophils	4.0	1-6 %	
Absolute Eosinophils	210	20-500 /cmm	Calculated
Basophils	0.6	0.1-2 %	
Absolute Basophils	30	20-100 /cmm	Calculated
Immature Leukocytes	-		
WBC Differential Count by Absorbance & Impedance method/Microscopy.			
<u>PLATELET PARAMETERS</u>			
Platelet Count	318000	150000-400000 /cmm	Elect. Impedance
MPV	8.6	6-11 fl	Measured
PDW	14.8	11-18 %	Calculated



Use a QR Code Scanner
Application To Scan the Code

CID : 2226722907
Name : MRS.MAMTA DESHMUKH
Age / Gender : 51 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 24-Sep-2022 / 09:02
Reported : 24-Sep-2022 / 18:03

RBC MORPHOLOGY

Hypochromia -
Microcytosis -
Macrocytosis -
Anisocytosis -
Poikilocytosis -
Polychromasia -
Target Cells -
Basophilic Stippling -
Normoblasts -
Others Normocytic, Normochromic
WBC MORPHOLOGY -
PLATELET MORPHOLOGY -
COMMENT -

Specimen: EDTA Whole Blood

ESR, EDTA WB 80 2-30 mm at 1 hr. Westergren

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West
*** End Of Report ***



Anupa
Dr. ANUPA DIXIT
M.D.(PATH)
Pathologist



Use a QR Code Scanner
Application To Scan the Code

CID : 2226722907
Name : MRS.MAMTA DESHMUKH
Age / Gender : 51 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 24-Sep-2022 / 09:02
Reported : 24-Sep-2022 / 12:33

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
GLUCOSE (SUGAR) FASTING, Fluoride Plasma	89.0	Non-Diabetic: < 100 mg/dl Impaired Fasting Glucose: 100-125 mg/dl Diabetic: >/= 126 mg/dl	Hexokinase
GLUCOSE (SUGAR) PP, Fluoride Plasma PP/R	111.2	Non-Diabetic: < 140 mg/dl Impaired Glucose Tolerance: 140-199 mg/dl Diabetic: >/= 200 mg/dl	Hexokinase
Urine Sugar (Fasting)	Absent	Absent	
Urine Ketones (Fasting)	Absent	Absent	

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West
*** End Of Report ***



Anupa

Dr. ANUPA DIXIT
M.D.(PATH)
Consultant Pathologist & Lab Director



CID : 2226722907
Name : MRS.MAMTA DESHMUKH
Age / Gender : 51 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 24-Sep-2022 / 09:02
Reported : 24-Sep-2022 / 15:00

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
KIDNEY FUNCTION TESTS**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
BLOOD UREA, Serum	14.9	12.8-42.8 mg/dl	Kinetic
BUN, Serum	7.0	6-20 mg/dl	Calculated
CREATININE, Serum	0.59	0.51-0.95 mg/dl	Enzymatic
eGFR, Serum	114	>60 ml/min/1.73sqm	Calculated
TOTAL PROTEINS, Serum	7.1	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.5	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.6	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.7	1 - 2	Calculated
URIC ACID, Serum	4.1	2.4-5.7 mg/dl	Enzymatic
PHOSPHORUS, Serum	3.7	2.7-4.5 mg/dl	Molybdate UV
CALCIUM, Serum	9.1	8.6-10.0 mg/dl	N-BAPTA
SODIUM, Serum	142	135-148 mmol/l	ISE
POTASSIUM, Serum	3.9	3.5-5.3 mmol/l	ISE
CHLORIDE, Serum	105	98-107 mmol/l	ISE

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West
*** End Of Report ***



Anupa

Dr. ANUPA DIXIT
M.D.(PATH)
Consultant Pathologist & Lab
Director



CID : 2226722907
Name : MRS.MAMTA DESHMUKH
Age / Gender : 51 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 24-Sep-2022 / 09:02
Reported : 24-Sep-2022 / 18:03

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
GLYCOSYLATED HEMOGLOBIN (HbA1c)

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Glycosylated Hemoglobin (HbA1c), EDTA WB - CC	6.0	Non-Diabetic Level: < 5.7 % Prediabetic Level: 5.7-6.4 % Diabetic Level: >/= 6.5 %	HPLC
Estimated Average Glucose (eAG), EDTA WB - CC	125.5	mg/dl	Calculated

Intended use:

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1c goal for non pregnant adults in general is Less than 7%.

Clinical Significance:

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

Test Interpretation:

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

Factors affecting HbA1c results:

Increased in: High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

Decreased in: Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

Reflex tests: Blood glucose levels, CGM (Continuous Glucose monitoring)

References: ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West
*** End Of Report ***



M Jain
Dr.MILLU JAIN
M.D.(PATH)
Pathologist



Use a QR Code Scanner
Application To Scan the Code

CID : 2226722907
Name : MRS.MAMTA DESHMUKH
Age / Gender : 51 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 24-Sep-2022 / 09:02
Reported : 24-Sep-2022 / 15:22

MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
BLOOD GROUPING & Rh TYPING

PARAMETER	RESULTS
ABO GROUP	O
Rh TYPING	POSITIVE

NOTE: Test performed by automated column agglutination technology (CAT) which is more sensitive than conventional methods.

Note: This sample is not tested for Bombay blood group.

Specimen: EDTA Whole Blood and/or serum

Clinical significance:
ABO system is most important of all blood group in transfusion medicine

Limitations:

- ABO blood group of new born is performed only by cell (forward) grouping because allo antibodies in cord blood are of maternal origin.
- Since A & B antigens are not fully developed at birth, both Anti-A & Anti-B antibodies appear after the first 4 to 6 months of life. As a result, weaker reactions may occur with red cells of newborns than of adults.
- Confirmation of newborn's blood group is indicated when A & B antigen expression and the isoagglutinins are fully developed at 2 to 4 years of age & remains constant throughout life.
- Cord blood is contaminated with Wharton's jelly that causes red cell aggregation leading to false positive result
- The Hh blood group also known as Oh or Bombay blood group is rare blood group type. The term Bombay is used to refer the phenotype that lacks normal expression of ABH antigens because of inheritance of hh genotype.

References:

1. Denise M Harmening, Modern Blood Banking and Transfusion Practices- 6th Edition 2012. F.A. Davis company. Philadelphia
2. AABB technical manual

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West
*** End Of Report ***



Anupa
Dr. ANUPA DIXIT
M.D.(PATH)
Pathologist



Use a QR Code Scanner
Application To Scan the Code

CID : 2226722907
Name : MRS.MAMTA DESHMUKH
Age / Gender : 51 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 24-Sep-2022 / 09:02
Reported : 24-Sep-2022 / 16:03

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
LIPID PROFILE**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
CHOLESTEROL, Serum	206.2	Desirable: <200 mg/dl Borderline High: 200-239mg/dl High: >/=240 mg/dl	CHOD-POD
TRIGLYCERIDES, Serum	149.7	Normal: <150 mg/dl Bordertline-high: 150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	GPO-POD
HDL CHOLESTEROL, Serum	34.0	Desirable: >60 mg/dl Borderline: 40 - 60 mg/dl Low (High risk): <40 mg/dl	Homogeneous enzymatic colorimetric assay
NON HDL CHOLESTEROL, Serum	172.2	Desirable: <130 mg/dl Borderline-high:130 - 159 mg/dl High:160 - 189 mg/dl Very high: >/=190 mg/dl	Calculated
LDL CHOLESTEROL, Serum	142.0	Optimal: <100 mg/dl Near Optimal: 100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High: >/= 190 mg/dl	Calculated
VLDL CHOLESTEROL, Serum	30.2	< /= 30 mg/dl	Calculated
CHOL / HDL CHOL RATIO, Serum	6.1	0-4.5 Ratio	Calculated
LDL CHOL / HDL CHOL RATIO, Serum	4.2	0-3.5 Ratio	Calculated

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West
*** End Of Report ***



Dr. Leena Salunkhe
Dr. LEENA SALUNKHE
M.B.B.S, DPB (PATH)
Pathologist



Use a QR Code Scanner
Application To Scan the Code

CID : 2226722907
Name : MRS.MAMTA DESHMUKH
Age / Gender : 51 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 24-Sep-2022 / 09:02
Reported : 24-Sep-2022 / 15:00

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
THYROID FUNCTION TESTS**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
Free T3, Serum	4.7	3.5-6.5 pmol/L	ECLIA
Free T4, Serum	16.4	11.5-22.7 pmol/L First Trimester:9.0-24.7 Second Trimester:6.4-20.59 Third Trimester:6.4-20.59	ECLIA
sensitiveTSH, Serum	1.60	0.35-5.5 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0	ECLIA



Use a QR Code Scanner Application To Scan the Code

CID : 2226722907
Name : MRS.MAMTA DESHMUKH
Age / Gender : 51 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 24-Sep-2022 / 09:02
Reported : 24-Sep-2022 / 15:00

R
E
P
O
R
T

Interpretation:

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

Clinical Significance:

- 1)TSH Values between high abnormal upto15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2)TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal and heart severe burns, trauma and surgery etc.

TSH	FT4 / T4	FT3 / T3	Interpretation
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.

Diurnal Variation:TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am , and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7%(with in subject variation)

Reflex Tests:Anti thyroid Antibodies,USG Thyroid ,TSH receptor Antibody. Thyroglobulin, Calcitonin

Limitations:

1. Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

Reference:

- 1.O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2.Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3.Tietz ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4.Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West
*** End Of Report ***



Anupa Dixit
Dr.ANUPA DIXIT
M.D.(PATH)
Consultant Pathologist & Lab Director



CID : 2226722907
Name : MRS.MAMTA DESHMUKH
Age / Gender : 51 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 24-Sep-2022 / 09:02
Reported : 24-Sep-2022 / 15:00

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
LIVER FUNCTION TESTS**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
BILIRUBIN (TOTAL), Serum	0.28	0.1-1.2 mg/dl	Colorimetric
BILIRUBIN (DIRECT), Serum	0.12	0-0.3 mg/dl	Diazo
BILIRUBIN (INDIRECT), Serum	0.16	0.1-1.0 mg/dl	Calculated
TOTAL PROTEINS, Serum	7.1	6.4-8.3 g/dL	Biuret
ALBUMIN, Serum	4.5	3.5-5.2 g/dL	BCG
GLOBULIN, Serum	2.6	2.3-3.5 g/dL	Calculated
A/G RATIO, Serum	1.7	1 - 2	Calculated
SGOT (AST), Serum	18.5	5-32 U/L	NADH (w/o P-5-P)
SGPT (ALT), Serum	21.3	5-33 U/L	NADH (w/o P-5-P)
GAMMA GT, Serum	19.2	3-40 U/L	Enzymatic
ALKALINE PHOSPHATASE, Serum	86.1	35-105 U/L	Colorimetric

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West
*** End Of Report ***



Anupa

Dr. ANUPA DIXIT
M.D.(PATH)
Consultant Pathologist & Lab
Director



Use a QR Code Scanner
Application To Scan the Code

CID : 2226722907
Name : MRS.MAMTA DESHMUKH
Age / Gender : 51 Years / Female
Consulting Dr. : -
Reg. Location : Andheri West (Main Centre)

Collected : 24-Sep-2022 / 09:02
Reported : 24-Sep-2022 / 12:20

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO
URINE EXAMINATION REPORT**

PARAMETER	RESULTS	BIOLOGICAL REF RANGE	METHOD
PHYSICAL EXAMINATION			
Color	Pale yellow	Pale Yellow	-
Reaction (pH)	7.0	4.5 - 8.0	Chemical Indicator
Specific Gravity	1.005	1.001-1.030	Chemical Indicator
Transparency	Clear	Clear	-
Volume (ml)	02	-	-
CHEMICAL EXAMINATION			
Proteins	Absent	Absent	pH Indicator
Glucose	Absent	Absent	GOD-POD
Ketones	Absent	Absent	Legals Test
Blood	Absent	Absent	Peroxidase
Bilirubin	Absent	Absent	Diazonium Salt
Urobilinogen	Normal	Normal	Diazonium Salt
Nitrite	Absent	Absent	Griess Test
MICROSCOPIC EXAMINATION			
Leukocytes(Pus cells)/hpf	0-1	0-5/hpf	
Red Blood Cells / hpf	Absent	0-2/hpf	
Epithelial Cells / hpf	1-2		
Casts	Absent	Absent	
Crystals	Absent	Absent	
Amorphous debris	Absent	Absent	
Bacteria / hpf	10-12	Less than 20/hpf	
Others	-		

Note : Sample quantity less than 12 ml.

*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD CPL, Andheri West
*** End Of Report ***



Dr. Trupti Shetty
Dr. TRUPTI SHETTY
M. D. (PATH)
Pathologist

CID# : 2226722907

Name : MRS.MAMTA DESHMUKH

Age / Gender : 51 Years/Female

Consulting Dr. :-

Collected : 24-Sep-2022 / 08:42

Reg.Location : Andheri West (Main Centre)

Reported : 24-Sep-2022 / 11:58

X-RAY CHEST PA VIEW

Both lung fields are clear.

Both costo-phrenic angles are clear.

No hilar abnormality is seen.

The cardiac size and shape are within normal limits.

The aorta shows normal radiological features.

The trachea is central.

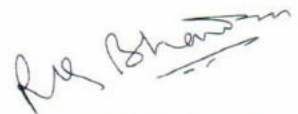
The domes of diaphragm are normal in position and outlines.

The skeleton under review appears normal.

IMPRESSION:

NO SIGNIFICANT ABNORMALITY IS DETECTED.

*** End Of Report ***



Dr.R K BHANDARI
M.D.,D.M.R.E
CONSULTANT RADIOLOGIST

ADDRESS: 2nd Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343

For Feedback - customerservice@suburbandiagnosics.com | www.suburbandiagnosics.com

Date:- 24-8-22

CID: 2226722907

Name:- MAMTA DESHMUKH

Sex / Age: F / 51

EYE CHECK UP

Chief complaints: Nil

Systemic Diseases: Nil

Past history: No Injury to head in childhood led to impairment of vision in (R) eye

Unaided Vision: =

Aided Vision: Yes, using corrective glasses

Refraction: Corrected

(Right Eye)

(Left Eye)

	Sph	Cyl	Axis	Vn	Sph	Cyl	Axis	Vn
Distance	—	—	—	6/18	—	—	—	6/6
Near	—	—	—	NS	—	—	—	NS

Colour Vision: Normal / Abnormal

Remark: Needs power correction

ADDRESS: 2nd Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343

For Feedback - customerservice@suburbandiagnosics.com | www.suburbandiagnosics.com

Patient's Name : MAMTA DESHMUKH

Age : 51 YRS /FEMALE

Requesting Doctor : --

Date :24.09.2022

CID. No :2226722907

2D-ECHO & COLOUR DOPPLER REPORT

Structurally Normal : MV / AV / TV / PV.
No significant valvular stenosis.

Trivial Mitral Regurgitation , Trivial Aortic Regurgitation
Trivial Pulmonary Regurgitation ,

Trivial Tricuspid regurgitation. No Pulmonary arterial hypertension.
PASP by TR jet vel. method = 15 mm Hg.

LV / LA / RA / RV - Normal in dimension.
IAS / IVS is Intact.

No Left Ventricular Diastolic Dysfunction [LVDD].
No doppler evidence of raised LVEDP

No regional wall abnormality. No thinning / scarring / dyskinesia of LV wall
noted. Normal LV systolic function. LVEF = 60 % by visual estimation.

No e/o thrombus in LA /LV.
No e/o Pericardial effusion.

IVC normal in dimension with good inspiratory collapse.
Normal RV Systolic function (by TAPSE)

Impression:

**NORMAL LV SYSTOLIC FUNCTION, LVEF= 60 % ,
NO RWMA, NO PAH, NO LVDD,
NO LV HYPERTROPHY.**

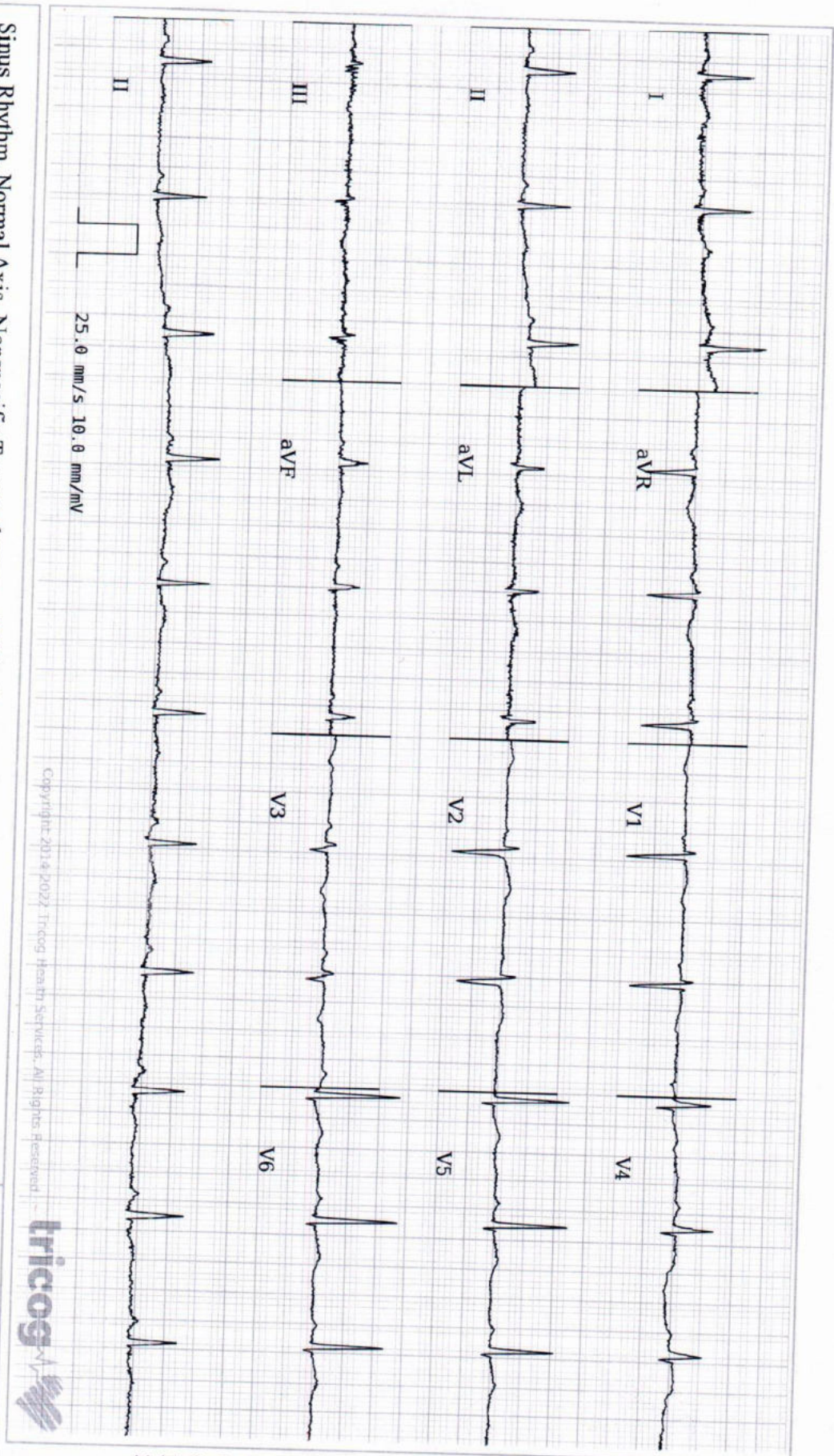
ADDRESS: 2nd Floor, Aston, Sundervan Complex, Above Mercedes Showroom, Andheri West - 400053

HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343

For Feedback - customerservice@suburbandiagnosics.com | www.suburbandiagnosics.com

Patient Name: **MAMTA DESHMUKH**
Patient ID: **2226722907**

Date and Time: **24th Sep 22 9:25 AM**



25.0 mm/s 10.0 mm/mV

Copyright 2014-2022, Tricog Health Services. All Rights Reserved



Age **51** NA **29**
years months days

Gender **Female**

Heart Rate **69bpm**

Patient Vitals

BP: NA
Weight: NA
Height: NA
Pulse: NA
Spo2: NA
Resp: NA
Others: NA

Measurements

QRSD: 82ms
QT: 400ms
QTc: 428ms
PR: 136ms
P-R-T: 67° 28° 4°

Sinus Rhythm, Normal Axis, Nonspecific T wave changes, RV3 < 3mm (nonspecific). Please correlate clinically.

REPORTED BY

DR RAVI CHAVAN
MD, DCARD, D DIABETES
Cardiologist & Diabetologist
2004/06/2468

Disclaimer: 1) Analysis in this report is based on ECG alone and should be used as an adjunct to clinical history, symptoms, and results of other invasive and non-invasive tests and must be interpreted by a qualified physician. 2) Patient vitals are as entered by the clinician and not derived from the ECG.



Use a QR Code Scanner
Application To Scan the Code

CID : 2226722907
Name : Mrs MAMTA DESHMUKH
Age / Sex : 51 Years/Female
Ref. Dr :
Reg. Location : Andheri West (Main Center)

Reg. Date : 24-Sep-2022
Reported : 27-Sept-2022 / 9:50

USG WHOLE ABDOMEN

LIVER:

The liver is normal in size (12.5cm), shape and smooth margins. It shows normal parenchymal echo pattern. The intra hepatic biliary and portal radical appear normal.
A well defined, hyperechoic lesion measuring 1.9 x 1.8cm is noted in the segment IV of the liver. Features could be suggestive of hemangioma.
The main portal vein and CBD appears normal.

GALL BLADDER:

The gall bladder is physiologically distended and appears normal.
No evidence of gall stones or mass lesions seen

PANCREAS:

The pancreas is well visualised and appears normal.
No evidence of solid or cystic mass lesion.

KIDNEYS:

Both the kidneys are normal in size shape and echotexture.
No evidence of any calculus, hydronephrosis or mass lesion seen.
Right kidney measures 9.4 x 4.6cm. Left kidney measures 9.6 x 5.2cm.

SPLEEN:

The spleen is normal in size (8.0cm) and echotexture.
No evidence of focal lesion is noted.

There is no evidence of any lymphadenopathy or ascites.

URINARY BLADDER:

The urinary bladder is well distended and reveal no intraluminal abnormality.

UTERUS:

Uterus is anteverted, small. The uterine myometrium shows multiple calcifications.
Periendometrial halo is well maintained. Endometrium measures 4.4 mm.
Cervix appears normal. (Post menopausal status).

Authenticity Check



Use a QR Code Scanner
Application To Scan the Code

CID : 2226722907
Name : Mrs MAMTA DESHMUKH
Age / Sex : 51 Years/Female
Ref. Dr :
Reg. Location : Andheri West (Main Center)

Reg. Date : 24-Sep-2022
Reported : 27-Sept-2022 / 9:50

OVARIES:

Both ovaries are not visualised mostly atrophic (Post menopausal status).

Kindly correlate clinically and with further investigations.

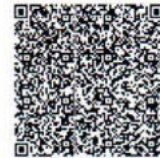
-----End of Report-----

DR. NIKHIL DEV
M.B.B.S, MD (Radiology)
Reg No – 2014/11/4764
Consultant Radiologist

Click here to view images: [http://107.170.10.203/suburban/center/above/Mercedes/Showroom/AndheriWest/400053](#)

HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343

For Feedback - customerservice@suburbandiagnosics.com | www.suburbandiagnosics.com



Use a QR Code Scanner
Application To Scan the Code

CID : 2226722907
Name : Mrs MAMTA DESHMUKH
Age / Sex : 51 Years/Female
Ref. Dr :
Reg. Location : Andheri West (Main Center)
Reg. Date : 24-Sep-2022
Reported : 27-Sept-2022 / 10:06

MAMMOGRAPHY AND SONOMAMMOGRAPHY

Bilateral mammograms have been obtained a low radiation dose film screen technique in the cranio-caudal and oblique projections. Film markers are in the axillary / lateral portions of the breasts.
Bilateral breast density ACR CATEGORY II

**A well defined dense lesion is seen in upper outer quadrant of the left breast.
There is no calcification associated with the lesion.**

No abnormal skin thickening is seen.

Sonomammography of both breasts show normal parenchymal echotexture.

A well defined oval hypoechoic lesion measuring 2.7 x 2.6 x 1.8cm is seen at 2 O'clock position in the left breast. It has smooth margins. It is wider than taller. No evidence of any calcification, cystic component or abnormal vascularity seen within this lesion. No evidence of any satellite lesion. Findings could be suggestive of fibroadenoma.

Few reactive lymph nodes with intact fatty hilum are noted in bilateral axilla.

IMPRESSION:

Well defined oval hypoechoic lesion in the left breast could be suggestive of fibroadenoma.

Normal mammography and Sonomammography of the right breast.

RIGHT BREAST - BIRADS CATEGORY I

LEFT BREAST - BIRADS CATEGORY II

Suggest: Follow up mammography after one year is suggested.

Please bring all the films for comparison.

ACR BIRADS CATEGORY

[American college of radiology breast imaging reporting and data system].

- I Negative
- II Benign finding
- III Probably benign finding.
- IV Suspicious (Indeterminate).
- V Highly suggestive of malignancy.

Investigations have their limitations. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly.

-----End of Report-----

DR. NIKHIL DEV
M.B.B.S, MD (Radiology)
Reg No – 2014/11/4764
Consultant Radiologist

Click here to view images <http://3.111.232.119/RISViewer/NormalView/AccessionNo/Andheri/2022092408490856>

HEALTHLINE - MUMBAI: 022-6170-0000 | OTHER CITIES: 1800-266-4343

For Feedback - customerservice@suburbandiagnosics.com | www.suburbandiagnosics.com