



29/11/2023



DOB - 94  
~~SP~~ - 947.  
 B.P - 110/60  
 Wt - 60.8  
 Ht - 5 FT

Mrs. GARMILA CHAUNAN  
 Age 40y/f  
 Dr Dermatologist

Vitals : Chief Complaints :

H/O Present Illness :

fav:

→ PHYSIOGEL AI  
 LOTION

Past History :

nil

Investigation : Drug Allergies : (if any)

(4A)

Treatment :

- Ryv 508

14





# Park Hospital

GROUP SUPER SPECIALITY HOSPITAL



Plulet

Vitals :

Chief Complaints :

eye :- Carious 37  
Stains +1, Calmed +1  
Crowding +1

H/O Present Illness :

Admi :-  
Scaling & Polishing

Past History :

Composite restorations nit 37

Investigation :

Drug Allergies : (if any)

Treatment :

Dr.



Gurgaon

Q Block South City 11, Sohna Road, Main Sector-47, Gurgaon, Haryana Ph: 0124-4900000 Fax: 0124-2218733  
E-mail : parkmedcenters@gmail.com

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# Park Hospital

GROUP SUPER SPECIALITY HOSPITAL



Garmila Chauhan 40 yrs F.

7/4

For check up.

Cycles. 2-3/28-30 regular flow  
LMP 2/11

Vitals :

Chief Complaints :

OPH 2 FTLSCS.  
Lent. chid 5 yrs.

H/O Present illness :

Takeup 50mg Elboxin for last 10 yrs.

Past History O/E

G.C. fav. a fibula Pallor ⊕

Investigation :

Drug Allergies : (if any)

GA salt

B/S Cx ⊕

Velviken fungal infection

Treatment :

GV w/ AVNS from paper

Candid Cream locally  
tds x 10da  
Tab Fluconazole 150mg  
weekly x 4.

PAP Smear taken



Gurgaon

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ENT

Ear  
Nose  
Throat } N.A.D.

Vitals :

Chief Complaints :

H/O Present Illness :

Past History :

Investigation :

Drug Allergies : (if any)

Treatment :





Mrs. Gargi Chaudhary  
40 y/M

690017

Vitals :

Chief Complaints :

routine eye checkup

H/O Present Illness :

UV { 6/6  
6/6 } = glasses

Past History :

MV { MG  
MG }

MCT { 16  
20 }

Investigation :

Drug Allergies : (if any)

Treatment :

Colour vision - Normal 13E

Function Examination - Normal





**DEPARTMENT OF MICROBIOLOGY**

<b>Patient Name</b> :	Mrs. GARMILA CHAUHAN	<b>Bill Date</b> :	07/11/2023
<b>MR No</b> :	690017	<b>Reporting Date</b> :	09/11/2023
<b>Age/Sex</b> :	40 Years 2 Months 7 Days / Female	<b>Sample ID</b> :	212369
<b>Type</b> :	OPD	<b>Bill/Req. No.</b> :	24197655
<b>TPA/Corporate</b> :	MEDIWHEEL PVT LTD	<b>Ref Doctor</b> :	Dr.RMO

<b>Test</b>	<b>Result</b>	<b>Bio. Ref. Interval</b>	<b>Units</b>	<b>Method</b>
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**URINE C/S**

<b>NAME OF SPECIMEN</b>	URINE ( Uncentrifuged )	
<b>ORGANISM IDENTIFIED</b>	NO ORGANISM GROWN IN CULTURE AFTER 48HRS OF INCUBATION AT 37 C DEGREE.	Aerobic culture

Method :

**Note : URINE CULTURE :**

Presence of >105 cfu/ml (100000) in midstream urine sample is considered clinically significant. However in symptomatic patients of urine sample collection from catheter or patients with indwelling catheters, even a smaller count of bacteria may signify infection (10000cfu/ml). Kindly correlate clinically.

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



Sample no.

**Dr. SONIA KUMARI**  
MBBS, MD (PATHOLOGY) Gold medalist



**Dr. ISHA RASTOGI**  
MD, MBBS MICROBIOLOGY  
CONSULTANT CLINICAL MICROBIOLOGIST

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**DEPARTMENT OF BIOCHEMISTRY**

<b>Patient Name</b> :	Mrs. GARMILA CHAUHAN	<b>Bill Date</b> :	07/11/2023
<b>MR No</b> :	690017	<b>Reporting Date</b> :	07/11/2023
<b>Age/Sex</b> :	40 Years 2 Months 7 Days / Female	<b>Sample ID</b> :	212369
<b>Type</b> :	OPD	<b>Bill/Req. No.</b> :	24197655
<b>TPA/Corporate</b> :	MEDIWHEEL PVT LTD	<b>Ref Doctor</b> :	Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>BLOOD SUGAR FASTING</b>				
PLASMA GLUCOSE FASTING	96	60 - 110	mg/dl	GOD TRINDERS

\*\*\*\* END OF THE REPORT \*\*\*\*



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**DEPARTMENT OF BIOCHEMISTRY**

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<b>MR No</b> :	690017	<b>Reporting Date</b> :	07/11/2023
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<b>TPA/Corporate</b> :	MEDIWHEEL PVT LTD	<b>Ref Doctor</b> :	Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
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**BLOOD SUGAR 2 HR. PP**

BLOOD SUGAR P.P.	115	80 - 150	mg/dl	
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\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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## DEPARTMENT OF PATHOLOGY

**Patient Name** : Mrs. GARMILA CHAUHAN  
**MR No** : 690017  
**Age/Sex** : 40 Years 2 Months 7 Days / Female  
**Type** : OPD  
**TPA/Corporate** : MEDIWHEEL PVT LTD

**Bill Date** : 07/11/2023  
**Reporting Date** : 07/11/2023  
**Sample ID** : 212369  
**Bill/Req. No.** : 24197655  
**Ref Doctor** : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>URINE ROUTINE AND MICROSCOPY</b>				
<b>PHYSICAL CHARACTERSTICS</b>				
QUANTITY	30ml	5 - 100	ml	
COLOUR	Pale Yellow	Pale Yellow		Vishal
TURBIDITY	Clear	clear		
SPECIFIC GRAVITY	1.015	1.000-1.030		urinometer
PH - URINE	6.5	5.0 - 9.0		PH PAPER
<b>CHEMICAL EXAMINATION-1</b>				
UROBILINOGEN	Negative	NIL		Ehrlich
URINE PROTEIN	Absent	NIL	mg/dl	Protein error indicator
BLOOD	NIL	NIL		
URINE BILIRUBIN	NIL	NIL		
GLUCOSE	NIL	NIL	mg/dL	GOD-POD/Benedicts
URINE KETONE	NIL	NIL		SOD.
<b>MICRO.EXAMINATION</b>				
PUS CELL	2-4	0-5	cells/hpf	Microscopic
RED BLOOD CELLS	Not Seen	0-2	cells/hpf	
EPITHELIAL CELLS	1-2	0-5	cells/hpf	
CASTS	NIL	NIL	/hpf	
CRYSTALS	NIL	NIL	/hpf	
OTHER	NIL			

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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**DEPARTMENT OF HAEMATOLOGY**

<b>Patient Name</b> :	Mrs. GARMILA CHAUHAN	<b>Bill Date</b> :	07/11/2023
<b>MR No</b> :	680017	<b>Reporting Date</b> :	07/11/2023
<b>Age/Sex</b> :	40 Years 2 Months 7 Days / Female	<b>Sample ID</b> :	212369
<b>Type</b> :	OPD	<b>Bill/Req. No.</b> :	24197655
<b>TPA/Corporate</b> :	MEDIWHEEL PVT LTD	<b>Ref Doctor</b> :	Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>BLOOD GROUPING AND RH FACTOR</b>				
BLOOD GROUP	* O * RH POSITIVE			ABO/Rh (D) SLIDE

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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## DEPARTMENT OF HAEMATOLOGY

**Patient Name** : Mrs. GARMILA CHAUHAN  
**MR No** : 690017  
**Age/Sex** : 40 Years 2 Months 7 Days / Female  
**Type** : OPD  
**TPA/Corporate** : MEDIWHEEL PVT LTD  
**Bill Date** : 07/11/2023  
**Reporting Date** : 07/11/2023  
**Sample ID** : 212369  
**Bill/Req. No.** : 24197655  
**Ref Doctor** : Dr.RMO

Test	Result		Bio. Ref. Interval	Units	Method
<b>CBC</b>					
HAEMOGLOBIN	<b>10.7</b>	L	12 - 15	gm/dL	COLORIMETRY
TOTAL LEUCOCYTE COUNT	4550		4000-11000	/ $\mu$ L	LASER FLOW
<b>DIFFERENTIAL COUNT</b>					
NEUTROPHILS	50		40.0 - 70.0	%	FLOW CYTOMETRY
LYMPHOCYTES	<b>45</b>	H	20.0 - 40.0	%	FLOW CYTOMETRY
MONOCYTES	03		3.0 - 8.0	%	FLOW CYTOMETRY
EOSINOPHILS	02		0.5 - 5.0	%	FLOW CYTOMETRY
BASOPHILS	00		0.0 - 2.0	%	FLOW CYTOMETRY
RED BLOOD CELL COUNT	<b>3.1</b>	L	3.5 - 5.5	millions/ $\mu$ L	ELECTRICAL
PACKED CELL VOLUME	<b>29.9</b>	L	35.0 - 50.0	%	ELECTRICAL
MEAN CORPUSCULAR VOLUME	95.8		83 - 101	fL	ELECTRICAL
MEAN CORPUSCULAR HAEMOGLOBIN	<b>34.3</b>	H	27 - 31	Picogrammes	CALCULATED
MEAN CORPUSCULAR HB CONC	35.8		33 - 37	g/dl	CALCULATED
PLATELET COUNT	188		150 - 450	thou/ $\mu$ L	ELECTRICAL
RDW	13.0		11.6 - 14.5	%	CALCULATED
SAMPLE TYPE FOR C.B.C	Whole Blood EDTA				

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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DEPARTMENT OF HAEMATOLOGY

Patient Name : Mrs. GARMILA CHAUHAN  
MR No : 690017 Bill Date : 07/11/2023  
Age/Sex : 40 Years 2 Months 7 Days / Female Reporting Date : 07/11/2023  
Type : OPD Sample ID : 212369  
TPA/Corporate : MEDIWHEEL PVT LTD Bill/Req. No. : 24197655  
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>ESR (WESTERGREN)</b>				
E.S.R. - 1 HR.	18	0 - 20	mm/Hr.	Westergren

**Note : Note**

1. C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.
2. Test conducted on EDTA whole blood at 37C.
3. ESR readings are auto- corrected with respect to Hematocrit (PCV) values

\*\*\*\* END OF THE REPORT \*\*\*\*



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## DEPARTMENT OF IMMUNOLOGY

**Patient Name** : Mrs. GARMILA CHAUHAN  
**MR No** : 690017  
**Age/Sex** : 40 Years 2 Months 7 Days / Female  
**Type** : OPD  
**TPA/Corporate** : MEDIWHEEL PVT LTD

**Bill Date** : 07/11/2023  
**Reporting Date** : 07/11/2023  
**Sample ID** : 212369  
**Bill/Req. No.** : 24197655  
**Ref Doctor** : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>THYROID PROFILE</b>				
TRI-IODOTHYRONINE (T3)	1.26	0.60 - 1.81	ng/ml	Chemiluminescence
THYROXINE (T4)	12.4	5.01 - 12.45	µg/dL	Chemiluminescence
THYROID STIMULATING HORMONE	2.77	0.5-5.50	µU/ml	
SPECIMEN TYPE	SERUM			
<b>Method</b> : chemiluminescent immunoassay				

**Note : Clinical Significance:**

Thyroid function tests (TFTs) is a collective term for blood tests used to check the function of the thyroid. TFTs may be requested if a patient is thought to suffer from hyperthyroidism (overactive thyroid) or hypothyroidism (underactive thyroid), or to monitor the effectiveness of either thyroid-suppression or hormone replacement therapy. It is also requested routinely in conditions linked to thyroid disease, such as atrial fibrillation and anxiety disorder. A TFT panel typically includes thyroid hormones such as thyroid-stimulating hormone (TSH, thyrotropin) and thyroxine (T4), and triiodothyronine (T3) depending on local laboratory policy.

Note: Please correlate with clinical condition

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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## DEPARTMENT OF BIOCHEMISTRY

**Patient Name** : Mrs. GARMILA CHAUHAN  
**MR No** : 690017  
**Age/Sex** : 40 Years 2 Months 7 Days / Female  
**Type** : OPD  
**TPA/Corporate** : MEDIWHEEL PVT LTD  
**Bill Date** : 07/11/2023  
**Reporting Date** : 07/11/2023  
**Sample ID** : 212369  
**Bill/Req. No.** : 24197655  
**Ref Doctor** : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
<b>LFT (LIVER FUNCTION TEST)</b>				
<b>LFT</b>				
TOTAL BILIRUBIN	0.7	0 - 1.2	mg/dL	DIAZO
DIRECT BILIRUBIN	0.4	0 - 0.4	mg/dL	DIAZO
INDIRECT BILIRUBIN	0.3	0.10 - 0.6	mg/dL	CALCULATED
SGOT (AST)	35	0 - 45	U/L	IFCC WITHOUT
SGPT (ALT)	19	0 - 45	U/L	IFCC WITHOUT
ALKALINE PHOSPHATASE	85	30 - 170	IU/L	MODIFIED IFCC
TOTAL PROTEINS	<b>5.9</b>	L 6.4 - 8.0	g/dL	BIURET
ALBUMIN	<b>3.2</b>	L 3.3 - 5.5	g/dL	BCG DYE
GLOBULIN	2.7	2.3 - 4.5	g/dL	CALCULATED
A/G RATIO	1.19	1.1 - 2.2		CALCULATED
<b>SAMPLE TYPE:</b>	<b>SERUM</b>			

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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Test	Result	Bio. Ref. Interval	Units	Method
<b>KFT (RENAL PROFILE)</b>				
<b>KFT</b>				
SERUM UREA	17	10 - 45	mg/dL	UREASE-GLDH
SERUM CREATININE	0.8	0.4 - 1.4	mg/dL	MODIFIED JAFFES
SERUM URIC ACID	2.7	2.5 - 7.0	mg/dL	URICASE
SERUM SODIUM	140	135 - 150	mmol/L	ISE
SERUM POTASSIUM	3.6	3.5 - 5.5	mmol/L	ISE
SERUM CALCIUM	<b>8.3</b>	8.5 - 10.5	mg/dL	ARSENazo III
SERUM PHOSPHORUS	2.6	2.5 - 4.5	mg/dL	AMMONIUM
<b>SAMPLE TYPE:</b>	<b>SERUM</b>			

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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## DEPARTMENT OF BIOCHEMISTRY

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**Type** : OPD  
**TPA/Corporate** : MEDIWHEEL PVT LTD  
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Test	Result	Bio. Ref. Interval	Units	Method
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### LIPID PROFILE

Test	Result	Bio. Ref. Interval	Units	Method
<b>LIPID PROFILE</b>				
TOTAL CHOLESTEROL	129	0 - 250	mg/dL	CHOD -Trinder
SERUM TRIGLYCERIDES	93	60 - 165	mg/dl	GPO-TRINDER
HDL-CHOLESTEROL	35	30 - 70	mg/dl	DIRECT
VLDL CHOLESTEROL	18.6	6 - 32	mg/dL	calculated
LDL	75.4	50 - 135	mg/dl	calculated
LDL CHOLESTEROL/HDL RATIO	2.15	1.0 - 3.0	mg/dL	calculated
TOTAL CHOLESTEROL/HDL RATIO	3.69	2.0 - 5.0	mg/dl	calculated

SAMPLE TYPE: SERUM

Note : ATP III Guidelines At-A-Glance Quick Desk Reference

Step 1 - Determine lipoprotein levels obtain complete lipoprotein profile after 9- to 12-hour fast.

ATP III Classification of LDL, Total, and HDL Cholesterol (mg/dL):-

LDL Cholesterol Primary Target of Therapy

<100	Optimal
130-159	Borderline high
>190	Very high.

Total Cholesterol

<200	Desirable
200-239	Borderline high
>240	High

HDL Cholesterol

<40	Low
>60	High

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*



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Name : Mrs.GARMILA CHAUHAN 24197655  
Age/Gender : 40 Y(s) /Female  
Reg No : 071123519  
Lab ID No : KP0380980  
Sample ID : 220327635  
Sample Type :



Location : KPL A43  
Registered On : 07-11-2023 17:25  
Collected On : 07-11-2023 17:25  
Reported On : 08-11-2023 16:19  
Referred By : PARK HOSPITAL  
Client Name : PARK HOSPITAL GUR  
Reference No :

Test	Result	Unit	Reference Range
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Pap Smear

CYTOPATHOLOGY NO.: C- 1953/23

SPECIMEN SUBMITTED: 2 Conventional cervical smears.

SPECIMEN ADEQUACY: Satisfactory for evaluation; Endocervical /transformation zone component absent.

**MICROSCOPIC EXAMINATION:**

Squamous cell population:

Superficial – Few present.

Intermediate – Present.

Inflammation – Not significant.

Atypical cells – Not present.

Background bacterial flora – Maintained.

**INTERPRETATION:**

- Negative for squamous intraepithelial lesion or malignancy.

**COMMENT:**

1. The smears are reported using the Bethesda system (2014) for reporting cervical cytology.



Print Date :

Page 1 of 2

ON PANEL : C.G.H.S., D.G.E.H.S., ECHS, B.H.E.L, INDIAN RAILWAY, E.S.I., NDMC, DELHI JAL BOARD, ONGC, NTPC, SAIL, NIFT

1. All reports are for interpretation by the treating doctor only and have to be viewed and correlated with clinical examination and other investigations. 2. All investigations have their limitation which is imposed by the limits to sensitivity and specificity of individual assay procedures as well as the quality of the specimen received by the laboratory. Isolated laboratory investigations never confirm the final diagnosis of the disease. 3. If the result(s) of tests are alarming or unexpected the doctor is advised to contact the lab immediately for needful and necessary action.  
This Report is not subject to use for any medico-legal purpose

E-8A, HAUZ KHAS, MAIN MARKET, NEW DELHI - 16 • E-5A, HAUZ KHAS, MAIN MARKET, NEW DELHI - 16  
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9912210524





Vitals :

Chief Complaints :

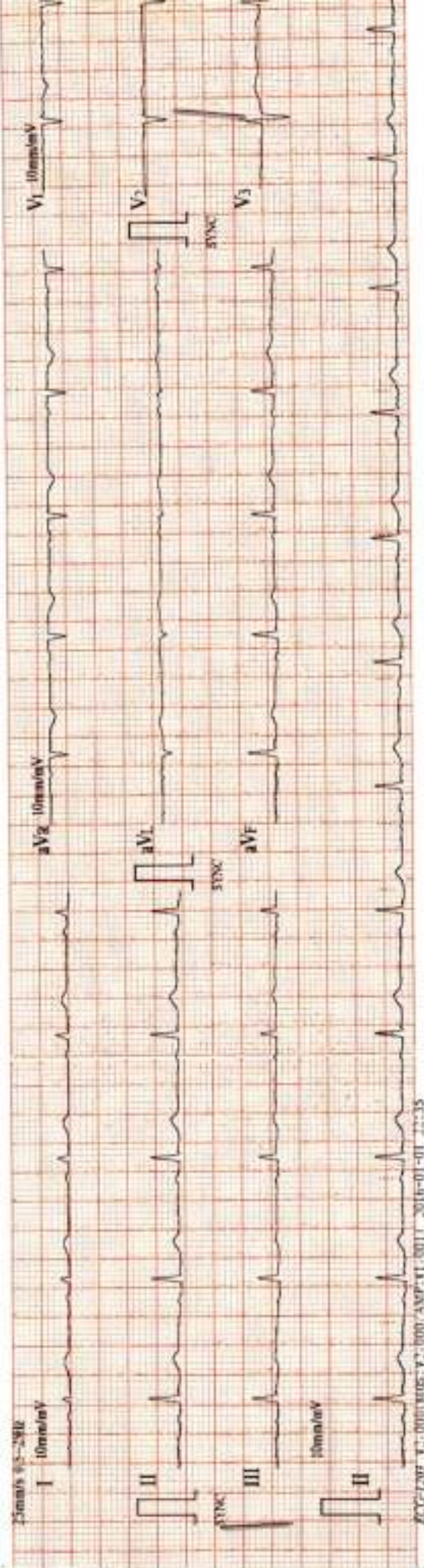
H/O Present Illness :

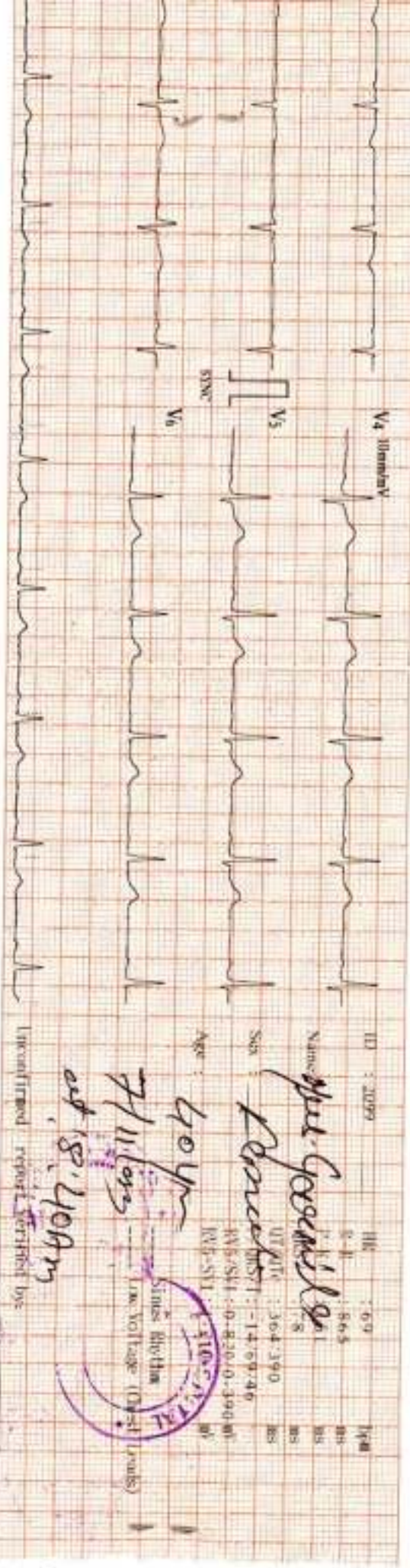
Past History :

Investigation :

Drug Allergies : (if any)

Treatment :





ID : 2099

HR : 69

PR : 160

QT : 364

QTc : 390

PR/ST : -14.0 (0.46)

AVS/ST : -0.8 (0.0-390.0)

RV/ST : -3.1 (0.0-170.0)

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AVS/ST : -0.8 (0.0-390.0)

RV/ST : -3.1 (0.0-170.0)

Unconfirmed report certified by

ad 18.11.09

7/11/09

40yr

Stines rhythm  
Lead Voltage (mV)  
100







<u>Measurements</u>	<u>Normal Values</u>	<u>Measurements</u>	<u>Normal Value</u>
IVSD : 1.2cm	(0.6-1.1cm))	LA : 3.4cm	(1.9-4.0cm)
LVID : 3.8cm	(3.7-5.6cm)	LVOT : 1.4cm	
LVPW : 1.0cm	(0.6-1.1cm)	AORTA : 2.5cm	(2.0-3.7cm)
EF : 58%	(55% - 80%)	IVSmotion :	<b>Normal / Flat / Paradoxical</b>
Any Other			

**CHAMBERS:-**

- LV** Normal / Enlarged / Clear / Thrombus /  
Contraction Normal LV shows concentric LVH, no gradient across LVOT /Inetic / Intra capillary  
Regional wall motion abnormality: Absent/ Present
- LA** Normal / Enlarged / Clear / Thrombus / Myxoma; LAA: Clear / Thrombus
- RA** Normal / Clear / Thrombus, Dilated.
- RV** Normal / Mildly Dilated / Enlarged / Clear / Thrombus / Hypertrophied

**PERICARDIUM** Normal / Thickening / Calcification / Effusion.

**COMMENTS & SUMMARY:-**

- All Cardiac Chambers dimensions are within normal limits.
- Global LVEF – 58%
- NO RWMA
- NORMAL LV FUNCTION
- NO LVDD
- NO MR / NO AR
- MILD TR
- GOOD RV FUNCTION
- IAS/IVS. No Flow seen across IAS/IVS.
- No Thrombus/Mass in any chamber.
- No Pericardial Effusion.



Please correlate clinically

Dr. ELA MADAAN  
MBBS, PGDCC  
Fellowship in non Invasive  
Cardiology

Dr. JOGINDER S. DUHAN  
M.D.(Medicine)  
D.M (Cardiology)

Dr. SACHIN BANSAL  
M.D.(Medicine)  
D.M (Cardiology)



(This is only professional opinion and not the diagnosis, please correlate clinically)  
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**PARK GROUP OF HOSPITALS** : West Delhi - Gurugram - Faridabad - Sonapat - Panipat - Karnal - Ambala - Patiala - Mohali - Behror - Jaipur





**DEPARTMENT OF RADIOLOGY**

Patient Name	Mrs. GARMILA CHAUHAN	Billed Date	07/11/2023
Reg No	690017	Reported Date	07/11/2023
Age/Sex	40 Years 2 Months 7Days / Female	Req. No.	24197655
Type	OPD	Consultant Doctor	Dr. RMO

**USG WHOLE ABDOMEN**

The real time, B mode, gray scale sonography of the abdominal organs was performed.

**LIVER** : The liver is normal in size 13.8cm shape and echotexture. No evidence of any focal lesion. IHBR is not dilated. **There is well defined simple cyst of size 18x12mm left lobe of liver ....suggestive of simple cyst.**

**GALL BLADDER** : The gall bladder is well distended. No evidence any calculus or mass seen. GB wall thickness with in normal limits. No evidence of pericholecystic fluid is seen.

**BILE DUCT** :The common bile duct is normal in caliber. No evidence of calculus is noted in common bile duct.

**SPLEEN** :The spleen is normal in size 7.9cm and shape.Its echotexture is homogeneous.No evidence of focal lesion is noted.

**PANCREAS** :The pancreas is normal in size, shape, contours and echotexture.No evidence of solid or cystic mass lesion is noted.MPD is not dilated. No evidence of peripancreatic collection.

**KIDNEYS** : The bilateral kidneys are normal in size and echotexture. Cortico-medullary differentiation is maintained.There is no evidence of obvious calculus or hydronephrosis.

**URINARY BLADDER** :The urinary bladder is well distended.It shows uniformly thin walls and sharp mucosa.No evidence of calculus is seen. No evidence of mass or diverticulum is noted.

**UTERUS**: The uterus is anteverted. It measures 6.9x3.9x3.8 cms. in the longitudinal, anteroposterior and transverse dimensions respectively.The uterine margins are smooth and does not reveal any contour abnormalities.

The uterine myometrium shows homogeneous echotexture.

No evidence of leiomyoma is noted. No solid or cystic mass lesion is noted.

The endometrial echo is in the midline and measures 5 mm.

The ovaries on the either side show normal echotexture.

No adnexal mass is seen.No cyst is seen in ovaries.

No evidence of ascites or interbowel free fluid is seen.

No evidence of obvious retroperitoneal or mesentric lymphadenopathy is seen.



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**IMPRESSION-** Simple hepatic cyst

To be correlated clinically.



Dr. ANSHU K. SHARMA  
MBBS, MD  
CONSULTANT RADIOLOGIST



H-2016-0399

Dr. MANJEET SEHRAWAT  
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# Park Hospital

GROUP SUPER SPECIALITY HOSPITAL

## DEPARTMENT OF RADIOLOGY

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Reg No	690017	Reported Date	: 07/11/2023
Age/Sex	40 Years 2 Months 7Days / Female	Req. No.	: 24197655
Type	OPD	Consultant Doctor	: Dr. RMO

### X-RAY CHEST AP/PA

Bilateral lungs appears normal.

No focal lung lesion seen.

No evidence of free fluid is seen.

Both hila are normal in size, have equal density and bear normal relationship.

The heart and trachea are central in position and no mediastinal abnormality is visible.

The cardiac size is normal for patient age and view.

The domes of the diaphragms are normal in position, and show smooth outline.

To be correlated clinically



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Page 1 of 1

11/7/2023, 4:18 PM

1 of 1



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