




PARKLINE DIAGNOSTICS PVT. LTD.

L.G. 3, 4 & 5, Bhuvana Towers, S.D. Road, Secunderabad - 500 003 Tel : 040-42038139, 27845852
7995421787, 7093445852 Email : parklinediagnostics@gmail.com www.parklinediagnostics.com



NABL Accredited
Certificate No.:MC-2566

TEST REPORT

Name	: MS.OM KANWAR [SPOUSE]	TID/SID	: UMR1044269/ 25224549
Age / Gender	: 45 Years / Female	Registered on	: 25-Feb-2023 / 08:42 AM
Ref.By	: -	Collected on	: 25-Feb-2023 / 08:46 AM
Req.No	:  BIL2850640	Reported on	: 25-Feb-2023 / 12:55 PM
		Reference	: Medi Wheel

DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Colour Method:Photo detectors(instrument)	Straw		Light Yellow
Appearance Method:Photo diode array sensor	Clear		Clear
Specific gravity Method:Ion concentration/colour indicator	1.005		1.003-1.030
Reaction and pH Method:Double Indicator	6.5		5.0-8.0
Protein Method:Protein Error of pH indicators	Negative		Negative
Glucose Method:Double sequential enzymatic/GOD-PAP	Negative		Negative
Urobilinogen Method:Reagent strip/Reflectance photometry	Negative		0.2-1.0 mg%
Ketones Method:Strip method/Nitroprusside method	Negative		Negative
Blood Method:Peroxidase	Negative		Negative
Bile Salt Method:Hays Method	Negative		Negative
Bile Pigment Method:Fouchets Method	Negative		Negative
Microscopic Examination			
Pus cells (leukocytes) Method:Microscopy Of Sediment	Nil	/hpf	0-5 /hpf
RBC (erythrocytes) Method:Microscopy Of Sediment	Nil	/hpf	0-2 /hpf
Epithelial cells Method:Microscopy Of Sediment	2 - 3	/hpf	0-8 /hpf
Crystals Method:Microscopy Of Sediment	Nil	/lpf	Nil /lpf




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DEPARTMENT OF CLINICAL PATHOLOGY

Complete Urine Examination (CUE), Urine

Investigation	Observed Value	Units	Biological Reference Interval
Casts	Nil	/lpf	Nil
Method:Microscopy Of Sediment			/lpf
Others	Nil		Nil
Method:Microscopy Of Sediment			

* Sample processed at Parkline

--- End Of Report ---

Dr.Jyothi Kiranmai
Regd. No: 52272
MD PATHOLOGY






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Req.No  Reported on : 25-Feb-2023 / 11:47 AM
Reference : Medi Wheel
BIL2850640

DEPARTMENT OF HEMATOLOGY

Blood Grouping ABO And Rh Typing, EDTA Whole Blood

Parameter	Results
Blood Grouping (ABO)	A
Rh Typing (D)	POSITIVE -
Method:Agglutination	

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DEPARTMENT OF HEMATOLOGY

Complete Blood Picture (CBP), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Hemoglobin Method:Spectrophotometry	14.7	g/dL	12.0-15.0 g/dL
Erythrocyte Count(RBC) Method:Electrical Impedence	4.5	mill /cu.mm	3.8-4.8 mill /cu.mm
PCV/HCT Method:Numeric Integration	41	%	36-46 %
MCV Method:Calculated	93	fL	83-101 fL
MCH Method:Calculated	32.6	pg	27-32 pg
MCHC Method:Calculated	35.1	gm/dL	31.5-34.5 gm/dL
RDW (CV) Method:Calculated	13.5	%	11.6-14.0 %
Total WBC Count Method:Impedence flowcytometry/Light scattering	7.1	10 ³ /μL	4-10 10cap;3/μL 10 ³ /μL
Differential Count			
Neutrophils Method:Flowcytometry/Microscopy	54	%	40-80 %
Lymphocytes Method:Flowcytometry/Microscopy	36	%	20-40 %
Monocytes Method:Flowcytometry/Microscopy	6	%	2-10 %
Eosinophils Method:Flowcytometry/Microscopy	4	%	1-6 %
Basophils Method:Flowcytometry/Microscopy	0	%	0-2 %
Absolute Neutrophil Count	3.83	10 ³ /μL	2.0-7.0 10 ³ /μL
Absolute Lymphocyte Count	2.56	10 ³ /μL	1.0-3.0 10 ³ /μL

Lab Timings (Weekdays) : 7.00 am to 8.30 pm
Sundays & Holidays : 7.00 am to 1.00 pm

Radiologists Timings (Weekdays) : 7.30 am to 1.30 pm
& 5.45 pm to 7.45 pm
Sundays & Holidays : 7.30 am to 9.30 am




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DEPARTMENT OF HEMATOLOGY

Complete Blood Picture (CBP), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Absolute Monocyte Count	0.43	10 ³ /μL	0.20-1.0 10 ³ /μL
Absolute Eosinophil Count	0.28	10 ³ /μL	0.02-0.5 10 ³ /μL
Absolute Basophil Count	00	10 ³ /μL	0.02-0.1 10 ³ /μL
Platelet Count	160	10 ³ /μL	150-410 10 ³ /μL
Method:Electrical Impedence			

Peripheral Smear

RBC Normocytic and Normochromic
Method:Microscopy
WBC Within normal limits.No abnormal cells seen.
Method:Microscopy
Platelets Discrete and adequate.Giant platelets seen.
Method:Microscopy

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		Reference	: Medi Wheel

DEPARTMENT OF HEMATOLOGY

Erythrocyte Sedimentation Rate (ESR), Sodium Citrate Whole Blood

Investigation	Observed Value	Units	Biological Reference Intervals
ESR 1st Hour	11	mm/hour	0-20 mm/hour
Method:Westergren			

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Ref.By	: -	Collected on	: 25-Feb-2023 / 08:46 AM
Req.No	:  BIL2850640	Reported on	: 25-Feb-2023 / 10:00 AM
		Reference	: Medi Wheel

DEPARTMENT OF CARDIOLOGY

2D Echo/Doppler Study

Mitral Valve	Normal
Aortic valve	Normal
Tricuspid valve	Normal
Pulmonary valve	Normal
Aorta	2.0 cm
Left Atrium	2.6 cm
Left Ventricle	LVDd: 3.27 cm IVSd : 1.49 cm EF: 71 % LVDs: 1.48 cm LVPwd: 1.09 cm FS: 39 %
RWMA	Nil
Right Atrium	Normal
Right Ventricle	Normal
Pulmonary Artery	Normal
IAS	Intact
IVS	Intact
Pericardium	Normal
Svc / Ivc	Normal
Intracardiac Masses	Nil
Doppler Study	Mitral flow: E: 0.7 m/sec A: 0.5 m/sec Aortic flow : 1.3 m/sec Pulmonary flow : 1.0 m/sec
Colour Doppler	No MR / AR / TR / PR
Conclusion	No RWMA. Concentric LVH. Normal valves/ Normal chambers. No MR/ AR/ TR / PR Good LV/ RV function.LVEF 71 % No PE/ clot/ vegetation. No diastolic dysfunction.

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TID/SID : UMR1044269/

Age / Gender : 45 Years / Female

Registered on : 25-Feb-2023 / 08:42 AM

Ref.By : -

Collected on :

Req.No



Reported on :

BIL2850640

Reference : Medi Wheel






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Reference : Medi Wheel
BIL2850640

DEPARTMENT OF CLINICAL CHEMISTRY I

Blood Urea Nitrogen (BUN), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Blood Urea Nitrogen.	10.9	mg/dL	7-23 mg/dL
Method:Calculated			

Creatinine, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Creatinine.	0.91	mg/dL	0.50-1.20 mg/dL
Method:Alkaline Picrate			

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TEST REPORT

Name : **MS.OM KANWAR [SPOUSE]** TID/SID : UMR1044269/ 25224550F
Age / Gender : 45 Years / Female Registered on : 25-Feb-2023 / 08:42 AM
Ref.By : - Collected on : 25-Feb-2023 / 08:46 AM
Req.No :  Reported on : 25-Feb-2023 / 15:00 PM
Reference : Medi Wheel
BIL2850640

DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Fasting (FBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Fasting Method:GOD - PAP	150	mg/dL	Normal: <100 Impaired FG: 100-125 Diabetic : \geq 126 mg/dL

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TEST REPORT

Name : **MS.OM KANWAR [SPOUSE]** TID/SID : UMR1044269/ 25224550P
Age / Gender : 45 Years / Female Registered on : 25-Feb-2023 / 08:42 AM
Ref.By : - Collected on : 25-Feb-2023 / 08:46 AM
Req.No  Reported on : 25-Feb-2023 / 15:00 PM
Reference : Medi Wheel
BIL2850640

DEPARTMENT OF CLINICAL CHEMISTRY I

Glucose Post Prandial (PPBS), Sodium Fluoride Plasma

Investigation	Observed Value	Units	Biological Reference Interval
Glucose Post Prandial Method:GOD - PAP	118	mg/dL	Normal : 90 - 140 Impaired Glucose Tolerance: 141-199 Diabetic : \geq 200 mg/dL

Note Rechecked,Kindly correlate clinically

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Reference : Medi Wheel
BIL2850640

DEPARTMENT OF CLINICAL CHEMISTRY I

Glycosylated Hemoglobin (HbA1C), EDTA Whole Blood

Investigation	Observed Value	Units	Biological Reference Interval
Glycosylated Haemoglobin Method:High Performance Liquid Chromatography(HPLC)	6.4	%	< 5.7% : Normal 5.7% - 6.4% : Prediabetes > 6.4% Diabetes
Mean Plasma Glucose (MPG) Estimate Method:Derived from HBA1c	136	mg/dL	Excellent Control : 90 to 120 Good Control : 121 to 150 Average Control : 151 to 180 Panic Value : > 211 mg/dL

Note:Mean Plasma Glucose is calculated from HBA1c value and it indicates Average Blood Sugar level over the past three months.

INTERPRETATION :

- 1.Glycated hemoglobin (glycohemoglobin / HbA1c) is a form of hemoglobin (Hb) that is chemically linked to a sugar.
- 2.A1c is measured primarily to determine the three-month average blood sugar level and can be used as a diagnostic test for diabetes mellitus and as an assessment test for glycemic control in people with diabetes.
- 3.In diabetes, higher amounts of glycated hemoglobin, indicating poorer control of blood glucose levels, have been associated with cardiovascular disease, nephropathy, neuropathy, and retinopathy.
4. American diabetes Association (ADA) recommends an A1C goal for many non pregnant adults of < 7% (without significant hypoglycemia). On the basis of provider judgment and patient preference, achievement of lower A1C levels than the goal of 7% may be acceptable, and even beneficial, if it can be achieved safely without significant hypoglycemia or other adverse effects of treatment. Less stringent A1C goals (such as < 8%) may be appropriate for patients with severe hypoglycemia, extensive co morbid conditions etc, or where the harms of treatment are greater than the benefits.
5. Glycemic goals for some older adults might reasonably be relaxed as part of individualized care, but hyperglycemia leading to symptoms or risk of acute hyperglycemia complications should be avoided in all patients.

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Age / Gender	: 45 Years / Female	Registered on	: 25-Feb-2023 / 08:42 AM
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Req.No	:  BIL2850640	Reported on	: 25-Feb-2023 / 12:32 PM
		Reference	: Medi Wheel

DEPARTMENT OF CLINICAL CHEMISTRY I

Lipid Profile, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Cholesterol Method:CHOD-PAP	226	mg/dL	Desirable Level: < 200 Borderline : 200 - 239 High : > 240 mg/dL
HDL Cholesterol Method:Enzymatic Reaction	50	mg/dL	<40:Major risk factor for heart disease 40-59:The higher,the better >=60:Considered protective against heart disease mg/dL
LDL Cholesterol Method:Calculated	157	mg/dL	< 100 mg/dL
VLDL Cholesterol Method:Calculated	19	mg/dL	10-55 mg/dL
Triglycerides Method:GPO-POD	99	mg/dL	Normal:<150 Borderline:150-199 High:200-499 Very High:>=500 mg/dL
Chol/HDL Ratio Method:Calculated	4.52		Normal : <4 Low risk : 4 - 6 High risk : >6
LDL Cholesterol/HDL Ratio	3.14		

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Req.No :  Reported on : 25-Feb-2023 / 12:32 PM
Reference : Medi Wheel
BIL2850640

DEPARTMENT OF CLINICAL CHEMISTRY I

Liver Function Test (LFT), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Total Bilirubin. Method:Diazo with sulphanilic acid	0.50	mg/dL	0.3-1.2 mg/dL
Direct Bilirubin. Method:Diazo with sulphanilic acid	0.18	mg/dL	0.00-0.40 mg/dL
Indirect Bilirubin. Method:Calculated	0.32	mg/dL	
Alanine Aminotransferase ,(ALT/SGPT) Method:IFCC without P5P	26	U/L	10-40 U/L
Aspartate Aminotransferase,(AST/SGOT) Method:IFCC without P5P	14	U/L	10-40 U/L
ALP (Alkaline Phosphatase). Method:AMP-IFCC	49	U/L	30-115 U/L
PROTEINS			
Total Protein. Method:Biuret	7.22	g/dL	6.0-8.0 g/dL
Albumin. Method:Bromocresol Green (BCG)	4.58	g/dL	3.5-4.8 g/dL
Globulin. Method:Calculated	2.64	g/dL	2.3-3.5 g/dL
A/GRatio. Method:Calculated	1.73		0.8-2.0
Gamma GT. Method:IFCC-Enzymatic	19	U/L	7.0-50.0 U/L

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Ref.By : - Collected on : 25-Feb-2023 / 08:46 AM
Req.No  Reported on : 25-Feb-2023 / 13:58 PM
Reference : Medi Wheel
BIL2850640

DEPARTMENT OF CLINICAL CHEMISTRY I

Thyroid Profile (T3,T4,TSH), Serum

Investigation	Observed Value	Units	Biological Reference Interval
Triiodothyronine Total (T3) Method:Enhanced chemiluminescence	1.62	ng/mL	0.970-1.69 ng/mL
Thyroxine Total (T4) Method:Enhanced chemiluminescence	9.28	µg/dL	5.53-11.0 µg/dL
Thyroid Stimulating Hormone (TSH) Method:Enhanced chemiluminescence	4.50	µIU/mL	0.400-4.049 µIU/mL

Note: Change in method and reference range
NOTE:

TSH - Reference ranges during pregnancy:*

1st Trimester : 0.10 - 2.50

2nd Trimester : 0.20 - 3.00

3rd Trimester : 0.30 - 3.00

*As per the Guidelines of American Thyroid Association for the diagnosis and management of thyroid disease during pregnancy and post partum.

1.Primary Hyperthyroidism is accompanied by elevated T3 & T4 values along with depressed TSH level.

2.Primary Hypothyroidism is accompanied by depressed T3 & T4 levels and elevated TSH levels.

3.Normal T4 levels accompanied by high T3 levels are seen in patients with T3 Thyrotoxicosis.

4.Slightly elevated T3 levels may be found in pregnancy and estrogen therapy, while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol and propylthiouracil.

5.Although elevated TSH levels are nearly always indicative of primary hypothyroidism, rarely they can result from TSH secreting pituitary tumors(secondary).

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BIL2850640

DEPARTMENT OF CLINICAL CHEMISTRY I

Uric Acid, Serum

Investigation	Observed Value	Units	Biological Reference Interval
Uric Acid. Method:Uricase	4.93	mg/dL	1.9-7.5 mg/dL

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TEST REPORT

Name	: MS.OM KANWAR [SPOUSE]	TID/SID	: UMR1044269/ 25226996
Age / Gender	: 45 Years / Female	Registered on	: 25-Feb-2023 / 08:42 AM
Ref.By	: -	Collected on	: 25-Feb-2023 / 08:46 AM
Req.No	 BIL2850640	Reported on	: 25-Feb-2023 / 15:08 PM
		Reference	: Medi Wheel

DEPARTMENT OF HEALTH CHECKUP

Glucose Urine Fasting

Urine Glucose Fasting	Nil	NIL
Method:Reagent strip/Reflectance photometry		

Glucose Urine Post Prandial

Urine Glucose Post Prandial	Nil	NIL
Method:Reagent strip/Reflectance photometry		

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MEDICAL EXAMINATION REPORT

Name	Ms. om Kanwar		Date :	25/2/23
Company	c/o Mediwheel		Reg. No. :	2850640
Contact No.	9493407415		Sex <input type="checkbox"/> M <input checked="" type="checkbox"/> F	Age : <input type="checkbox"/> 40 <input checked="" type="checkbox"/> 45
Type	Pre-Emp		Emp. No.:	Spouse
	Overseas		Height	153 Cm
	Annual	<input checked="" type="checkbox"/>	Weight	58 Kgs
Remarks	<ul style="list-style-type: none"> - Hyperglycemia ⊕ c HbA_{1c} - 6.4% Advice follow up c Diabetologist. - Borderline cholesterolemia ⊕ - Advice follow up. - Slightly raised TSH. Advice follow up c Endocrinologist - Rest all clinical + lab parameters WNL. 			
Fitness Status	Medically Fit / Unfit		DR. PRIYANKA SANNIDHI Physician's Signature Regn. No : 11351 MBBS	

COMPREHENSIVE MEDICAL EXAMINATION REPORT

NAME Ms. Om Kaur

AGE 48/f

MARITAL STATUS Married CHILDREN : M F

IDENTIFICATION (IF ANY) A work on road.



PAST HISTORY

Any family H/o : High Blood Pressure, Heart Disease, Tuberculosis, Diabetes, Asthma, Cancer

Any personal H/o Major illness like : Typhoid.....NH Jaundice.....NH Etc.

Any H/o STD..... Skin infection.....NH

H/o Blood Transfusion..... Recent Vaccination.....Completed

H/o Epilepsy.....NH Giddiness.....NH

H/o Surgery..... Fracture in the past.....NH

Any Personal H/O.

High Blood Pressure, Heart Disease Tuberculosis, Diabetes, Asthma, Cancer

Drug Abuse, Drug Allergy, Micturition, Bowels, Alcohol, Smoking, Sleep, MC, Wt. Loss/Wt. Gain

Present illness / Medication

GENERAL EXAMINATION

Conjunctiva :

Skin :

Ears :

Nose :

Throat & Oral Cavity :

Bone, Joints :

Nutritional Status :

Lymph Nodes :

Edema Feet :

Varicose Veins :

NH

NBD

DR. PRIYANKA SINGH
MBBS
Regd. No. 1135

Distant Vision : Near Vision :

Right Eye: 6/6

~~With glasses / Without glasses~~

left Eye : 6/6

~~with glasses / without glasses~~

Colour Vision : normal

Right Eye: N6

~~With glasses / Without glasses~~

left Eye : N6

~~with glasses / without glasses~~

Ophthalmologist's Signature

Right Ear

Hearing : NO

Rinee's Test ;

Weber Test :

Discharge : NIL

Left Ear

NO

NIL

SYSTEMIC EXAMINATION

Pulse : 86 bpm

B.P. : 140/90 mmHg

Lungs : A. Shape of Chest 3/4 symmetrical
B. Breath Sounds Δ/c - clear ⊕
C. Adventitious Sounds no

Heart : A. Sounds S1 S2 ⊕
B. Murmurs no

Abdomen : A. Liver NPD
B. Spleen NPD
C. Piles NIL
D. Any Lump NPD

Nervous System

A. Higher Function :
B. Craneal Nerves :
C. Sensory System : (N)
D. Motor System :
E. Jerks :

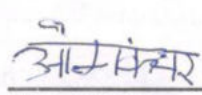
General : A. Hernia
B. Hydrocele NPD
C. Varicocele

Breast : Rt (N) Lt. (N)

CANDIDATE'S DECLARATION

I hereby solemnly declare that I am not suffering from Asthma, Hypertension, Diabetes, Occult Psychological disorders or any other ailment which can be suppressed without my voluntary declaration.

Date :


Madar
Signature

Place :

Note : General Physical Examination and Investigation included in the health check-up Have certain limitations and may not be able to detect all latent and asymptomatic diseases. Any new symptoms developing after the health check-up or persisting thereafter should be brought to the attention of the treating physician.



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NABL Accredited
Certificate No.MC-2566

ENT CONSULTATION

S.No. 2850640 Emp.No. spouse Date 25/2/23
 Name MS. OM KANWAR Age 45 Yrs Sex M/F

EARS :

Right

Left

EAC : patent, no cerumen. - do.
 TM : Patent, pearly white cone of light + - do.
 TFT : Rinne's ev Rinne's ev
 Weber's - Central

NOSE :

Septum (N). Bil. Turbinate (N). PNS (N), maxilla

THROAT :

Oropharynx (N). Bil. v. cords (N) showing
 Azygos Bil.

NECK :

(N)

IMPRESSION:

Ear Pt Clinically NAD.

Dr. D. Hari Krishna Reddy
MS (ENT)
Head & Neck Surgeon
Reg. No: 88379

Name : Om Kanwal Sex : F Age :

Date : 25/2/23

OPD 1255

Rx

Cervical abrasion.

ut
54 | 4.

cat sn+.

Adv. oral prophylaxis.

**Smilesss**
MULTI SPECIALITY DENTAL CLINIC
Smile Confidently... Not Confidentially.....
B.D.S, IMPLANTOLOGIST (USA)
1-3-1, Rajamudaliar Street, Kalasiguda,
Secunderabad, Cell : 8977910590.


Sowmya



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7995421787, 7093445852 Email : parklinediagnostics@gmail.com www.parklinediagnostics.com

TEST REPORT

Name : **MS.OM KANWAR [SPOUSE]** TID/SID : UMR1044269/
Age / Gender : 45 Years / Female Registered on : 25-Feb-2023 / 08:42 AM
Ref.By : - Collected on : 25-Feb-2023 / 08:46 AM
Req.No  Reported on : 25-Feb-2023 / 10:00 AM
BIL2850640 Reference : Medi Wheel

DEPARTMENT OF CARDIOLOGY

2D Echo/Doppler Study

Mitral Valve	Normal
Aortic valve	Normal
Tricuspid valve	Normal
Pulmonary valve	Normal
Aorta	2.0 cm
Left Atrium	2.6 cm
Left Ventricle	LVDd: 3.27 cm IVSd: 1.49 cm EF: 71 % LVDs: 1.48 cm LVPwd: 1.09 cm FS: 39 %
RWMA	Nil
Right Atrium	Normal
Right Ventricle	Normal
Pulmonary Artery	Normal
IAS	Intact
IVS	Intact
Pericardium	Normal
Svc / Ivc	Normal
Intracardiac Masses	Nil
Doppler Study	Mitral flow: E: 0.7 m/sec A: 0.5 m/sec Aortic flow : 1.3 m/sec Pulmonary flow : 1.0 m/sec
Colour Doppler	No MR / AR / TR / PR
Conclusion	No RWMA. Concentric LVH. Normal valves/ Normal chambers. No MR/ AR/ TR / PR Good LV/ RV function.LVEF 71 % No PE/ clot/ vegetation. No diastolic dysfunction.

* Sample processed at Parkline

--- End Of Report ---


Dr. PRASHANT. P
DM. Cardiology
Reg.No.10193

Page 1 of 2



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TEST REPORT

Name	: Ms . OM KANWAR [SPOUSE]	TID	: UMR1044269
Age / Gender	: 45 Years / Female	Registered on	: 25-Feb-2023 08:42 AM
Ref.By	:	Reported On	: 25-Feb-2023 11:33 AM
Req. No	: BIL2850640	Reference	: Medi Wheel

DEPARTMENT OF ULTRASOUND Ultrasound Whole Abdomen

LIVER : Normal in size and echotexture. No focal lesions.
No IHBD /CBD dilatation. Portal vein is normal.

SPLEEN : Normal in size and echotexture. No focal lesion seen.

GALL BLADDER : Well distended. No sludge / gall stones / sol.
Gall bladder - Wall thickness is normal.
No pericholecystic oedema.

PANCREAS : Normal in size and echotexture.No calcification / sol.
Pancreatic duct is normal. No peripancreatic fluid collection.

RIGHT KIDNEY : 9.92 x 4.83 cms.
Normal in size and echotexture.
Cortical thickness is normal.
No evidence of calculi / sol.
Pelvi calyceal system is normal.

LEFT KIDNEY : 10.04 x 4.92 cms.
Normal in size and echotexture.
Cortical thickness is normal.
No evidence of calculi / sol.
Pelvi calyceal system is normal.


URINARY BLADDER : Well distended.Normal in contour.
Wall thickness is normal. No calculus / sol.

UTERUS : Anteverted measuring 8.92 x 4.96 x 3.84 cms - Normal in size and echotexture.
No space occupying lesion is seen.
Cervix is normal in size and echopattern.

ENDOMETRIUM : 5 mm -Normal.

OVARIES : Right ovary : 2.32 x 1.92 cms and Left ovary : 2.86 x 2.01 cms.
Both ovaries normal in size and echotexture.
No adnexal mass seen.
No fluid in POD.

IMPRESSION : No significant sonographic abnormality detected.
Clinical correlation.


Dr. PRAJAKTA SUKHADEVE
DNB RADIOLOGY
Reg. No. 68493



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TEST REPORT

Name : Ms . OM KANWAR [SPOUSE]
Age / Gender : 45 Years / Female
Ref.By :
Req. No : BIL2850640

TID : UMR1044269
Registered on : 25-Feb-2023 08:42 AM
Reported On : 25-Feb-2023 03:55 PM
Reference : Medi Wheel

X-RAY CHEST PA VIEW

Lung fields appears clear.

Cardia appears normal.

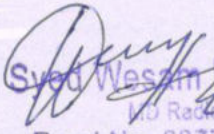
Hila appears normal.

C P angles appears clear.

Bony cage appears normal.

Soft tissues appears normal.



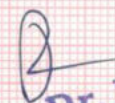

Dr. Syed Wasim Ul Haq
MD Radio Diagnosis
Regd.No. 68775
Consultant Radiologist

MS.OM KANWAR
Female 45Years

HR : 86 bpm
P : 104 ms
PR : 141 ms
QRS : 83 ms
QT/QTc : 377/451 ms
P/QRS/T : 75/60/40 °
RV5/SV1 : 0.904/1.146 mV

Diagnosis Information:
Sinus Rhythm
Normal ECG

WNL


Dr. PRASHANT. P
DM. Cardiology
Reg.No.1848

Report Confirmed by:

