

**Patient Details**

UHID : AFD000014868 Bill Date : 10-09-2022 10:05:09  
Patient Name : MRS. REKHA Bill No. : AFDHC220000506  
Age / Gender : 34 Yrs 2 Mth / FEMALE / 12-06-1988 Receipt No. : AFDPRT220023815  
Company : Acrofemi Healthcare Ltd  
Address : C- 202 EMERALD HEIGHTS, SECTOR-88, FARIDABAD, HARYANA, INDIA, Zip No.-121002

**Service Details**

S. No.	Investigation	Rooms	Remarks
1	MEDIWHEEL PKG FOR FEMALE BELOW 40YRS		
<del>2</del>	<del>CBC-1( COMPLETE BLOOD COUNT )</del>		
<del>3</del>	<del>ESR</del>		
<del>4</del>	<del>URINE, ROUTINE EXAMINATION</del>		
<del>5</del>	<del>STOOL ROUTINE EXAMINATION</del>		<i>Refer</i>
<del>6</del>	<del>BLOOD GROUP (ABO &amp; RH)</del>		
<del>7</del>	<del>GLUCOSE PLASMA (FASTING)</del>		
<u>8</u>	GLUCOSE PLASMA (PP) POST PRANDIAL		<i>10:50</i>
<del>9</del>	<del>GLYCATED HAEMOGLOBIN (HBA1C)</del>		
<del>10</del>	<del>THYROID PROFILE (FT3+FT4+TSH)</del>		
<del>11</del>	<del>LIPID PROFILE</del>		
<del>12</del>	<del>KFT/RFT-KIDNEY/RENAL PANEL 1</del>		
<del>13</del>	<del>LIVER FUNCTION TESTS (LFT)</del>		
<del>14</del>	<del>ECG</del>		
15	2D ECHO DR. MITHLESH KUMAR / DR. SUBHASH KUMAR DEV		
<del>16</del>	<del>XRAY-CHEST P.A.</del>		
<del>17</del>	<del>USG-FOR WHOLE ABDOMEN</del>		
18	OPD Consultation-Internal Medicine DR. MUKUND SINGH		
19	OPD Consultation-Opthal DR. UPASANA / DR. SATISH JERIA		

Prepared By : MR. NIKHIL SHARMA

Employee ID  
Signature


**FINAL REPORT**

Bill No. : AFDHC220000506	Bill Date : 10-09-2022 10:05
Patient Name : MRS. REKHA	UHID : AFD000014868
Age / Gender : 34 Yrs 3 Mth / FEMALE	Patient Type : OPD
Ref. Consultant : SELF	Ward / Bed : /
Sample ID : AFD22016108	Current Ward / Bed : /
	Receiving Date & Time : 10-09-2022 10:33
	Reporting Date & Time : 10-09-2022 12:44

**HAEMATOLOGY REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: EDTA Whole Blood

**MEDIWHEEL PKG FOR FEMALE BELOW 40YRS**
**CBC -1 (COMPLETE BLOOD COUNT)**

TOTAL LEUCOCYTE COUNT (Flow Cytometry)		5.4	thousand/cumm	4 - 11
RED BLOOD CELL COUNT (Hydro Dynamic Focussing)		4.0	million/cumm	3.8 - 4.8
HAEMOGLOBIN (SLS Hb Detection)	L	9.9	g/dL	12 - 15
PACK CELL VOLUME (Cumulative Pulse Height Detection)	L	30.3	%	36 - 46
MEAN CORPUSCULAR VOLUME	L	75.3	fL	83 - 101
MEAN CORPUSCULAR HAEMOGLOBIN	L	24.6	pg	27 - 32
MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION		32.6	g/dL	31.5 - 34.5
PLATELET COUNT (Hydro Dynamic Focussing)		245	thousand/cumm	150 - 400
RED CELL DISTRIBUTION WIDTH (S.D - RDW) (Particle Size Distribution)	H	50.5	fL	39 - 46
RED CELL DISTRIBUTION WIDTH (C.V.)	H	17.6	%	11.6 - 14

**DIFFERENTIAL LEUCOCYTE COUNT**


NEUTROPHILS		55	%	40 - 80
LYMPHOCYTES		36	%	20 - 40
MONOCYTES		7	%	2 - 10
EOSINOPHILS		2	%	1 - 5
BASOPHILS		0	%	0 - 1

ESR (Westergren)	H	36	mm 1st hr	0 - 20
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**\*\* End of Report \*\***
**IMPORTANT INSTRUCTIONS**

- Critical Low, CH - Critical High, H - High, L - Low

  
**RICHA KAUSHIK MISHRA**

 DNB  
 CONSULTANT


868

10:02:57

VA / DR.

DLOGY

21002

116

26/1

2-98

152

12

-10

er



**FINAL REPORT**

No.	: AFDHC220000506	Bill Date	: 10-09-2022 10:05
Patient Name	: MRS. REKHA	UHID	: AFD000014868
Age / Gender	: 34 Yrs 3 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22016149	Current Ward / Bed	: /
		Receiving Date & Time	: 10-09-2022 12:46
		Reporting Date & Time	: 10-09-2022 14:19

**CLINICAL PATH REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Urine

**MEDIWHEEL PKG FOR FEMALE BELOW 40YRS**

**URINE, ROUTINE EXAMINATION**

**PHYSICAL EXAMINATION**

QUANTITY		40 mL		
COLOUR		Pale yellow		Pale Yellow
TURBIDITY		Clear		

**CHEMICAL EXAMINATION**

PH		6.0		5.0 - 8.5
PROTEINS		Negative		Negative
SUGAR		Negative		Negative
SPECIFIC GRAVITY, URINE	L	1.005		1.005 - 1.030

**MICROSCOPIC EXAMINATION**

LEUCOCYTES		2-3	/HPF	0 - 5
RBC's		Nil		
EPITHELIAL CELLS		3-4		
CASTS		Nil		
CRYSTALS		Nil		

**\*\* End of Report \*\***

**IMPORTANT INSTRUCTIONS**

CL - Critical Low, CH - Critical High, H - High, L - Low

*RV Kaushik*

**DR. RICHA KAUSHIK MISHRA**

MBBS, DNB  
CONSULTANT



**FINAL REPORT**

No.	: AFDHC220000506	Bill Date	: 10-09-2022 10:05
Patient Name	: MRS. REKHA	UHID	: AFD000014868
Age / Gender	: 34 Yrs 3 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22016109	Current Ward / Bed	: /
		Receiving Date & Time	: 10-09-2022 10:33
		Reporting Date & Time	: 10-09-2022 13:56

**BLOOD BANK REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: EDTA Whole Blood

**MEDIWHEEL PKG FOR FEMALE BELOW 40YRS**

**BLOOD GROUP (ABO & RH)**

ABO GROUP	"O"
RH TYPE	POSITIVE

Forward grouping done by slide method.

**\*\* End of Report \*\***

**IMPORTANT INSTRUCTIONS**

CL - Critical Low, CH - Critical High, H - High, L - Low

**DR. RICHA KAUSHIK MISHRA**  
MBBS, DNB  
CONSULTANT



**FINAL REPORT**

No.	: AFDHC220000506	Bill Date	: 10-09-2022 10:05
Patient Name	: MRS. REKHA	UHID	: AFD000014868
Age / Gender	: 34 Yrs 3 Mth / FEMALE	Patient Type	: OPD If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22016169	Current Ward / Bed	: /
	:	Receiving Date & Time	: 10-09-2022 13:57
	:	Reporting Date & Time	: 10-09-2022 15:43

Sample Type: Plasma, Serum

**MEDIWHEEL PKG FOR FEMALE BELOW 40YRS**

GLUCOSE-PLASMA (FASTING) (UV Hexokinase)	87.6	mg/dL	70 - 100
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Note: A diagnosis of diabetes mellitus is made if fasting blood glucose exceeds 126 mg/dL.  
(As per American Diabetes Association recommendation)

GLUCOSE-PLASMA (POST PRANDIAL) (UV Hexokinase)	99.8	mg/dL	70 - 140
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Note: A diagnosis of diabetes mellitus is made if 2 hour post load glucose exceeds 200 mg/dL.  
(As per American Diabetes Association recommendation)

**KFT/RFT- KIDNEY/RENAL PANEL 1**

BLOOD UREA Urease-GLDH,Kinetic	L	13	mg/dL	15 - 45
CREATININE-SERUM (Modified Jaffe s Kinetic)	L	0.5	mg/dL	0.6 - 1.1
SODIUM-SERUM (Indirect Ion-Selective Electrode)		137	m.mol/L	135 - 145
POTASSIUM-SERUM (Indirect Ion-Selective Electrode)		4.1	m.mol/L	3.5 - 5.1
CHLORIDE-SERUM (Indirect Ion-Selective Electrode)		102	m.mol/L	98 - 107

**\*\* End of Report \*\***

**IMPORTANT INSTRUCTIONS**

CL - Critical Low, CH - Critical High, H - High, L - Low

*Richa Kaushik*

**DR. RICHA KAUSHIK MISHRA**  
MBBS, DNB  
CONSULTANT

**FINAL REPORT**

Id No.	: AFBCB220002938	Bill Date	: 10-09-2022 11:55
Patient Name	: MRS. REKHA	UHID	: AFD000014868
Age / Gender	: 34 Yrs 3 Mth / FEMALE	Patient Type	: If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFB22292451	Current Ward / Bed	: /
		Receiving Date & Time	: 10-09-2022 13:01
		Reporting Date & Time	: 10-09-2022 14:07

**HAEMATOLOGY REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
Sample Type: EDTA Whole Blood				
<b>*GLYCATED HAEMOGLOBIN (HBA1C)</b>				
HBA1C (HPLC)		5.3	%	4.27 - 6.07

**INTERPRETATION:**

HbA1c %	Degree of Glucose Control
>8%	Action suggested due to high risk of developing long term complications like Retinopathy, Nephropathy, Cardiopathy and Neuropathy
7.1 - 8.0	Fair Control
<7.0	Good Control

- Note:
1. A three monthly monitoring is recommended in diabetics.
  2. Since HbA1c concentration represents the integrated values for blood glucose over the preceding 6 - 10 weeks and is not affected by daily glucose fluctuation, exercise and recent food intake, it is a more useful tool for monitoring diabetics.

**\*\* End of Report \*\***

**IMPORTANT INSTRUCTIONS**

CL - Critical Low, CH - Critical High, H - High, L - Low



**DR. UMA R**  
MD, PATHOLOGY  
Sr. Consultant & Head of the Deptt.

### FINAL REPORT

Bill No.	: AFBCB220002938	Bill Date	: 10-09-2022 11:55
Patient Name	: MRS. REKHA	UHID	: AFD000014868
Age / Gender	: 34 Yrs 3 Mth / FEMALE	Patient Type	: If PHC :
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFB22292452	Current Ward / Bed	: /
		Receiving Date & Time	: 10-09-2022 13:01
		Reporting Date & Time	: 10-09-2022 16:20

### SEROLOGY REPORTING

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Serum

#### \*THYROID PROFILE (FT3+FT4+TSH)

FREE-TRI IODO THYRONINE (FT3) (ECLIA)		2.84	pg/mL	2.0-4.4
FREE -THYROXINE (FT4) (ECLIA)		1.12	ng/dL	0.9-1.7
THYROID STIMULATING HORMONE (TSH) (ECLIA)	H	7.17	mIU/L	0.27-4.20

**\*\* End of Report \*\***

#### IMPORTANT INSTRUCTIONS

CL - Critical Low, CH - Critical High, H - High, L - Low

*Shilpa*

**DR. SHILPA G**  
MD, PATHOLOGY  
Sr Consultant

**FINAL REPORT**

Bill No. : AFDHC220000506	Bill Date : 10-09-2022 10:05
Patient Name : MRS. REKHA	UHID : AFD000014868
Age / Gender : 34 Yrs 3 Mth / FEMALE	Patient Type : OPD If PHC :
Ref. Consultant : SELF	Ward / Bed : /
Sample ID : AFD22016169	Current Ward / Bed : /
	Receiving Date & Time : 10-09-2022 13:57
	Reporting Date & Time : 10-09-2022 15:43

**BIOCHEMISTRY REPORTING**

Test (Methodology)	Flag	Result	UOM	Biological Reference Interval
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Sample Type: Plasma, Serum

**MEDIWHEEL PKG FOR FEMALE BELOW 40YRS**

CHOLESTROL-TOTAL (CHO-POD)		140	mg/dL	0 - 160
HDL CHOLESTROL Enzymatic Immuno-inhibition		50	mg/dL	>45
CHOLESTROL-LDL DIRECT Enzymatic Selective Protection		89	mg/dL	0 - 100
S.TRYGLYCERIDES (GPO - POD)		104	mg/dL	0 - 160
NON-HDL CHOLESTROL		90.0	mg/dL	0 - 125
TOTAL CHOLESTROL / HDL CHOLESTROL		2.8		½Average Risk <3.3 Average Risk 3.3 - 4.4 2 Times Average Risk 4.5 - 7.1 3 Times Average Risk 7.2-11.0
LDL CHOLESTROL / HDL CHOLESTROL		1.8		½Average Risk <1.5 Average Risk 1.5-3.2 2 Times Average Risk 3.3-5.0 3 Times Average Risk 5.1-6.1
CHOLESTROL-VLDL		21	mg/dL	10 - 35

**Comments:**

- Disorders of Lipid metabolism play a major role in atherosclerosis and coronary heart disease.
- There is an established relationship between increased total cholesterol & LDL cholesterol and myocardial infarction.
- HDL cholesterol level is inversely related to the incidence of coronary artery disease.
- Major risk factors which adversely affect the lipid levels are:
  - Cigarette smoking.
  - Hypertension.
  - Family history of premature coronary heart disease.
  - Pre-existing coronary heart disease.

**LIVER FUNCTION TESTS (LFT)**

BILIRUBIN-TOTAL (DPD)		0.65	mg/dL	0.2 - 1.0
BILIRUBIN-DIRECT (DPD)		0.11	mg/dL	0 - 0.2
BILIRUBIN-INDIRECT		0.54	mg/dL	0.2 - 0.8
S.PROTEIN-TOTAL (Biuret)		7.5	g/dL	6 - 8.1
ALBUMIN-SERUM (Dye Binding-Bromocresol Green)		4.0	g/dL	
S.GLOBULIN		3.5	g/dL	2.8-3.8
A/G RATIO	<b>L</b>	<b>1.14</b>		1.5 - 2.5
ALKALINE PHOSPHATASE (IFCC AMP BUFFER)		65.9	IU/L	42 - 98
ASPARTATE AMINO TRANSFERASE (IFCC)		26.0	IU/L	10 - 42
ALANINE AMINO TRANSFERASE (IFCC)		12.9	IU/L	10 - 40
GAMMA-GLUTAMYLTRANSPEPTID (IFCC)		10.6	IU/L	7 - 35
LACTATE DEHYDROGENASE (IFCC; L-P)		163.5	IU/L	0 - 248

**\*\* End of Report \*\***

**IMPORTANT INSTRUCTIONS**

CL - Critical Low, CH - Critical High, H - High, L - Low





**FINAL REPORT**

Reg. No.	: AFDHC220000506	Bill Date	: 10-09-2022 10:05
Patient Name	: MRS. REKHA	UHID	: AFD000014868
Age / Gender	: 34 Yrs 3 Mth / FEMALE	Patient Type	: OPD <b>If PHC :</b>
Ref. Consultant	: SELF	Ward / Bed	: /
Sample ID	: AFD22016169	Current Ward / Bed	: /
		Receiving Date & Time	: 10-09-2022 13:57
		Reporting Date & Time	: 10-09-2022 15:43

*RKaushik*

**DR. RICHA KAUSHIK MISHRA**  
MBBS, DNB  
CONSULTANT

06.09.2022 11:14:54  
ASIAN FIDELIS HOSPITAL  
SEC 88 FARIDABAD HARYANA  
RPS CITY

69 bpm  
-- / -- mmHg

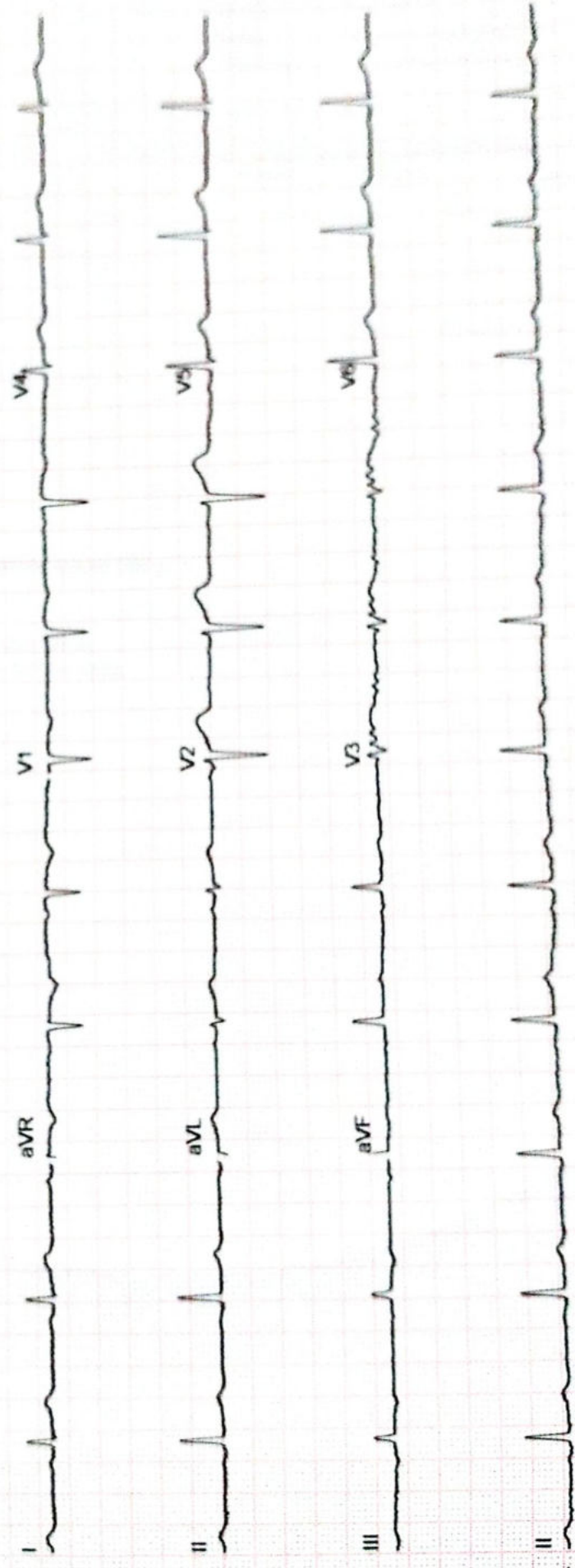
Location  
Room  
Order Number  
Indication  
Medication 1  
Medication 2  
Medication 3

Normal sinus rhythm  
Normal ECG

QRS  
QT / QTcBaz  
PR  
P  
RR / PP  
P / QRS / T

76 ms  
368 / 415 ms  
140 ms  
74 ms  
868 / 869 ms  
4 / 65 / 21 degrees

Technician  
Ordering Dr  
Referring Dr  
Attending Dr





## NON INVASIVE CARDIOLOGY

Patient Name	: MRS. REKHA	IPD No.	:
Age	: 34 Yrs 2 Mth	UHID	: AFD000014868
Gender	: FEMALE	Bill No.	: AFBCB220002945
Ref. Doctor	: DR. KUMAR HRISHIKESH Asian FBD	Bill Date	: 10-09-2022 13:00:42
Ward	:	Room No.	:
		Procedure Date	: 10-09-2022 13:10:01

## ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

MEASUREMENTS	ABSOLUTE VALUE		NORMAL VALUE
Aortic Root Diameter	2.1		2.0-3.7cm < 2.2cm/M2
Aortic Valve Opening	N		1.5-2.6cm
Left Atrial Dimension	3.0		1.9-4.0cm < 2.2cm/M2
RV Dimensions	N		0.7-2.6cm
RV thickness	N		0.3-0.9cm
LV ED Dimension	3.5		3.7-5.6 cm < 3.2cm /M2
LV ES Dimension	2.1		2.2-4.0 cm
IVS thickness	ED - 0.9	ES-1.2	0.6-1.2cm
LVPW Thickness	ED - 0.8	ES-1.3	0.5-1.1cm
IVS/ LVPW Ratio	N		
Mitral Valve	DE-N	EF -N	

INDICES OF LV FUNCTION		
EPSS		<9mm
FS%		24-42%
LV Ejection Fraction	60%	60+/-6%

## NON INVASIVE CARDIOLOGY

Patient Name	: MRS. REKHA	IPD No.	:
Age	: 34 Yrs 2 Mth	UHID	: AFD000014868
Gender	: FEMALE	Bill No.	: AFBCB220002945
Ref. Doctor	: DR. KUMAR HRISHIKESH Asian FBD	Bill Date	: 10-09-2022 13:00:42
Ward	:	Room No.	:
		Procedure Date	: 10-09-2022 13:10:01

### IMAGING:

2D- imaging in PLAX.SAX and apical views revealed normal left ventricle. Movement of septum, posterior and lateral walls are normal. Global LVEF is 60%. Mitral valve opening is normal. No evidence of mitral valve prolapse is seen. Aortic valve has three cusps and its opening is not restricted. Tricuspid valve leaflets move normally, Pulmonary valve is normal. Interatrial and Interventricular septal are intact, No intracardiac mass or thrombus is seen. No pericardial pathology is observed.

### MORPHOLOGICAL DATA

Mitral Valve : AML PML	Normal	Interatrial Septum	Intact
Aortic Valve	Normal	Interventricular Septum	Intact
Tricuspid Valve	Normal	Pulmonary Artery	Normal
Pulmonary Valve	Normal	Aorta	Normal
Right Ventricle	Normal	Right Atrium	Normal
Left Ventricle	Normal	Left Atrium	Normal

### DOPPLER STUDY

	Cm/s	Cm/s	
MITRAL VELOCITY	E-117	A-62	MR 2/4
TRICUSPID VELOCITY	cm/s		TR 1/4
AORTIC VELOCITY	113 cm/s		AR 0/4
PULMONARY VELOCITY	97 cm/s		PR 0/4
PA Pressure	Normal		

## NON INVASIVE CARDIOLOGY

Patient Name	: MRS. REKHA	IPD No.	:
Age	: 34 Yrs 2 Mth	UHID	: AFD000014868
Gender	: FEMALE	Bill No.	: AFBCB220002945
Ref. Doctor	: DR. KUMAR HRISHIKESH Asian FBD	Bill Date	: 10-09-2022 13:00:42
Ward	:	Room No.	:
		Procedure Date	: 10-09-2022 13:10:01


### COLOUR FLOW MAPPING

Mild MR, Trace TR.

### FINAL IMPRESSION

1. No RWMA, LVEF-60%.
2. Normal cardiac chamber dimension.
3. Mild MR, Trace TR (PASP=normal).
4. Normal mitral inflow pattern.
5. No clot/mass/vegetation/PE.

DR. SUBRAT AKHOURY  
MD,DM (Cardiology). FSCAI (USA)  
Director & Sr. Consultant  
Interventional Cardiologist



DR. KUMAR HRISHIKESH  
MBBS, PGDCC  
Fellowship in Non Invasive Cardiology  
Consultant Cardiology

DR. PRATEEK CHAUDHARY  
MBBS,MD,DM(Cardio)  
Consultant Cardiology  
Interventional Cardiologist.

For The perusal of a medical professional only  
The content of this report is only an opinion based on images and is therefore subject to inherent technical limitations.  
It is not the diagnosis & must be correlated clinically.  
**NOT FOR MEDICOLEGAL PURPOSES**  
.....End of Report.....

Prepare By.  
KUMAR.HRISHIK  
ES



## DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : XRAY

Patient Name	: MRS. REKHA	IPD No.	:
Age	: 34 Yrs 2 Mth	UHID	: AFD000014868
Gender	: FEMALE	Bill No.	: AFDHC220000506
Ref. Doctor	: SELF	Bill Date	: 10 09 2022 10 05 09
Ward	:	Room No.	:
		Print Date	: 10 09 2022 12 36 55

### CHEST PA VIEW:

Cardiac shadow appears normal.

Both lung fields appear clear.

Both domes of diaphragm and both CP angles are clear.

Both hila appear normal.

Soft tissues and bony cage appear normal.

Please correlate clinically.

.....End of Report.....

DR. BHANOO CHAUDHARY, MBBS, MD  
CONSULTANT

Prepare By:  
BHANOO

**Note :** The information in this report is based on interpretation of images. This report is not the diagnosis and should be correlated with clinical details and other investigation.

MULTI SPECIALITY HOSPITAL

FIRST FLOOR  
GREATER FARIDABAD

## DEPARTMENT OF RADIO-DIAGNOSIS & IMAGING

Report : ULTRASOUND

Patient Name	: MRS REKHA	IPD No.	:
Age	: 34 Yrs 2 Mth	UHID	: AFD000014868
Gender	: FEMALE	Bill No.	: AFDHC220000506
Ref. Doctor	: SELF	Bill Date	: 10-09-2022 10:05:09
Ward	:	Room No.	:
		Print Date	: 10-09-2022 10:12:55

### USG WHOLE ABDOMEN

#### FINDINGS:

- Liver is normal in size (longitudinal span 11.5 cm), contour and echotexture. No evidence of any focal lesion is seen. No dilated intrahepatic biliary radicles are seen. Common duct and portal vein are normal in course and caliber.
- The gall bladder is well distended with normal wall thickness. No intraluminal calculi focal lesion seen. No pericholecystic pathology seen.
- *Visualized Pancreas is normal in size and parenchymal echogenicity. Rest of the pancreas and retroperitoneal structures are obscured by overlying bowel gas shadows.*
- Spleen is normal in size and echo pattern with no focal lesion.
- Both the kidneys are normal in size, shape and position. **A calculus of size 4.7 mm is seen in the lower pole of right kidney.** No evidence of any hydronephrosis is noted on either side. Normal corticomedullary differentiation is maintained bilaterally. The cortical thickness is within normal limits. The right kidney measures 10.7 x 3.5 cm. The left kidney measures 11.4 x 4.5 cm.
- The Urinary Bladder is well distended and shows anechoic contents. No focal lesion/calculus seen. There is no evidence of any obvious intraluminal or perivesical pathology.
- Uterus is anteverted and is normal in size measuring 7.1 x 3.6 x 5.4 cm. Normal echogenicity of myometrium noted. No focal lesion seen. The endometrium measures 9.0 mm and appears normal. The uterine cavity is empty. The cervical endometrium is thin and regular. Both ovaries are normal in size and echotexture. Dominant follicle is seen in right ovary.
- No ascites/retroperitoneal lymphadenopathy/pleural effusion.

#### IMPRESSION:

- **Right renal calculus.**

*Please correlate clinically.*

.....End of Report.....

Prepare By.  
BHANOO

  
DR. BHANOO CHAUDHARY, MBBS, MD  
CONSULTANT

**Note :** The information in this report is based on interpretation of images. This report is not the diagnosis and should be correlated with clinical details and other investigation.



Name Mrs. Rekha

Age 34/f

Date 10/9/22

	Sphere	Cylinder	Axis	Add.	BCVA
Right (OD)	-0.25	-1.00	180°	-	6/6
Left (OS)	-0.25	-	-	-	6/6
			PD	62	



: AFD000014868  
: 10-09-2022 10:02:57  
: DR. UPASANA / DR. SATISH JERIA /  
: OPTHALMOLOGY  
INDIA, Zip No. -121002

**Asian Fidelis Multispeciality Hospital**

RPS Savana City, Sector-88, Faridabad, Haryana-121002  
Tel. +91-0129-4333000 • E-mail: cem@asianfidels.com

BP (mm Hg) 110/70 mm Hg  
Pulse 70b/m  
RR SP02: 98%  
Ht/Length 152.5cm  
Wt- 64.2 kg  
Pain Score (1-10)

Any known Allergies

Past / Family History :

History Given By :

Clinical Findings :

Vu  $\left\{ \begin{array}{l} 6/12 \\ 6/6 \end{array} \right.$

Nv  $\left\{ \begin{array}{l} 6/6 \\ 6/6 \end{array} \right.$

A/S

Provisional Diagnosis :

P.T.O

Acc  $\left\{ \begin{array}{l} -0.25 / -1.00 \times 180^\circ - 6/6 \\ -0.25 \times 65^\circ - 6/6 \end{array} \right.$

**DR. UPASANA / DR. SATISH JERIA, M.D./MS, CONSULTANT-OPHTHALMOLOGY, Reg. No: DMC-71812**

**Note :**  
Nature of illness, prognosis, potential side effects of medication used, risk of allergic reaction, need for follow-up & monitoring has been explained to the Patient/attendants in their own language.  
**WHEN TO OBTAIN URGENT CARE :** In case high grade fever, recurrent vomiting, profuse diarrhea, severe oral ulcers, skin rash, breathlessness, dizziness, loss of consciousness, bleeding from any site or new relevant/ alarming symptom