



Name : MRS. POTULA SASMITA

9951220609

Patient Id : 023-3719

Age/Gender : 39 / F

PP No. :

Ref.By : BANK OF BARODA (MW)

Date 26-03-2023

SNo. Test

Bill Time : 09:25 AM

1. HEMOGRAM
2. Blood Grouping And Rh Typing
3. Fasting & Post Prandial Blood Sugar
4. LIPID PROFILE
5. Liver Function Test
6. CREATININE
7. Blood Urea Nitrogen
8. SERUM URIC ACID
9. Glycosylated Haemoglobin (HBA1C)
10. Complete Urine Examination
11. Ultrasound Scan Of Abdomen (Female)
12. X-RAY Chest PA View
13. Electro Cardio Graph
14. TMT (TREADMIL Test)
15. T3,T4,TSH (THYROID Profile)
16. DOCTOR CONSULTATION (C)
17. 2D ECHO

Height - 159 cms

Inspiration -

Weight - 67 kg

Expiration -

Abdomen -

Signature

admin

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	POTULA SASMITA ✓
DATE OF BIRTH	04-10-1986
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	26-03-2023
BOOKING REFERENCE NO.	22M159995100052726S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. NAGARAJU P SIVA SANKARA
EMPLOYEE EC NO.	159995
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR A
EMPLOYEE PLACE OF WORK	HYDERABAD, AMEERPET
EMPLOYEE BIRTHDATE	21-10-1980

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **24-03-2023** till **31-03-2023**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager
HRM Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



Hyderabad, Telangana, India

MIG-256-258, Road No. 4, K P H B Phase 1, Kukatpally,
Hyderabad, Telangana 500072, India

Lat 17.492776°

Long 78.39803°

26/03/23 09:24 AM GMT +05:30



Date

Ref. No : 00003265-00063140-00042476-



UA 04649585 5 IN

మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

3153 6789 2310

ఆధార్ - సామాన్యుని హక్కు



భారత ప్రభుత్వం

GOVERNMENT OF INDIA



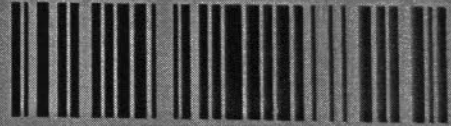
పొంతుల సస్మిత

Pontula Sasmita

పుట్టిన సంవత్సరం / Year of Birth : 1985

స్త్రీ / Female

3153 6789 2310



ఆధార్ - సామాన్యుని హక్కు



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Alt ID :

X-RAY CHEST PA VIEW

- Hilar regions are normal.
- Both C P angles are free.
- Domes of diaphragms are normal.
- Bony cage is normal
- Cardio thoracic ratio is normal.
- Lung - clear. No Evidence of any Signs of active Tuberculosis

IMPRESSION :

**** NORMAL STUDY**


Dr Ravi Krishna
Consultant Radiologist



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Alt ID :

Investigation

Result

Normal Ranges

HAEMOGRAM

Investigation

Result

Normal Range

Haemoglobin	10.1 gm%	Male : 14.0 - 18.0 gm % Female : 11.5 - 16.0 gm % Children : 12 - 14 gm%
R B C mil/cmm	4.2 mil/cmm	Male : 4.5 - 6.5 mil/cmm Female : 4.0 - 5.5 mil/cmm
Packed Cell volume (PCV)	35 %	Male : 40 - 54 % Female : 36 - 49 %
MCV	66 Cubic microns	76 - 96 Cubic microns
MCH	20 Picograms	27- 32 Picograms
MCHC	33 gm%	30 - 36 gm%
WBC (Total)	11,000 cells/cmm	4,000 - 11,000 cells/cmm

DIFFERENTIAL COUNT

Neutrophils (Polymorphs)	62 %	Adults : 40 - 75 % Children : 36- 50 %
Lymphocytes	30 %	Adults : 20 - 40 % Children : 36- 50 %
Eosinophils	04 %	1 - 6 %
Monocytes	04 %	2 - 10 %
Basophils	00 %	00 - 01 %
Platelet count	3,95,000 cells/cmm	1,50,000 - 4,00,000 cells/cmm
ESR 1st Hour	14 mm/hour	Male : 0 - 10 mm / hour Female : 0 - 14 mm / hour
Reticulocyte count	0.6 %	0.5 - 1.0 %

PERIPHERAL SMEAR EXAMINATION

RBC's Morphology	Normocytic / Hypochromic
WBC	With in normal limits
Plateletes	Adequate
Abnormal Cells	Nil

Method : Automated Cellcounter&Microscopy

Dr Rajani Gutha, PhD
Chief Biochemist

* End of Report *

Verified by

Dr S Ramadevi, MD
Consultant Pathologist



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Alt ID :

Investigation

Result

Normal Ranges

Investigation

Result

Blood Group

"B"

Rh Typing (Anti-D)

POSITIVE

Dr Rajani Gutha, PhD
Chief Biochemist

* End of Report *

Verified by

Dr S Ramadevi, MD
Consultant Pathologist



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Investigation

Result

Reference Range

Fasting Plasma Glucose *
Blood Sugar
Method GOD-POD

129 mg/dl

70 - 110 mg/dl

Post Prandial Glucose *
(Blood Sugar)
Method GOD-POD

234 mg/dl

70 - 160 mg/dl

* End of Report *

Dr Rajini G, Phd
Chief Biochemist

Verified by

Dr S Ramadevi MD
Consultant Pathologist



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Alt ID :

Investigation

Result

Reference Range

Lipid Profile

Total Cholesterol * Method CHOD-POD	137 mg/dL	Normal : < 200 mg/dL Borderline High : 200 - 239 mg/dL High : > 240 mg/dL
Serum Triglycerides * Method GPO - POD	97 mg/dL	Normal : < 150 mg/dL Borderline High : 150 - 199 mg/dL High : 200 - 499 mg/dL Very High : =/> 500 mg/dL
H D L Cholesterol * Method Direct CHOD-PAD	46 mg/dL	Low : < 40 High : > 60
L D L Cholesterol * Method Calculated	71.6 mg/dL	Optimal : < 100 Borderline High : 130 - 159 High : 160 - 189 Very High : =/> 190
V L D L Cholesterol * Method Calculated	19.4 mg/dL	10 - 30 mg/dL
TC / HDL Cholesterol Ratio * Method Calculated	2.98 Ratio	3.0 - 5.0 Ratio
LDL / HDL Ratio * Method Calculated	1.56 Ratio	1.5 - 3.5 Ratio

* End of Report *

Dr Rajini G, PhD
Chief Biochemist

Verified by

Dr S Ramadevi MD
Consultant Pathologist



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Investigation

Result

Normal Ranges


Liver Function Tests

Total Bilirubin * <i>Method: Diazo</i>	0.68 mg/dL	0.3 - 1.2 mg/dL
Direct Bilirubin (Conjugated) * <i>Method: Diazo</i>	0.29 mg/dL	0.0 - 0.2 mg/dL
Indirect Bilirubin (Unconjugated) *	0.39 mg/dL	
Alkaline Phosphatase * <i>Method: AMP Optimised IFCC Kinetic</i>	66 U/L	Male : 53 - 128 U/L Female : 42 - 98 U/L Children : 54 - 369 U/L
ALT (SGPT) * <i>Method: IFCC Without PDP</i>	14 IU/L	UP TO 55 IU/L
AST (SGOT) * <i>Method: IFCC Without PDP</i>	13 IU/L	UP TO 55 IU/L
Total Proteins * <i>(Method: Biuret)</i>	6.7 gm/dL	6.0 - 8.3 gm/dL
Albumin * <i>(Method: BCG)</i>	3.8 gm/dL	3.5 - 5.2 gm/dL
Globulin * <i>(Method: Calculated)</i>	2.9 gm/dL	
A/G Ratio * <i>(Method: Calculated)</i>	1.3	


Dr Rajani Gutta, PhD
Chief Biochemist

* End of Report *



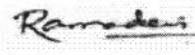
Verified by 


Dr S Ramadevi, MD
Consultant Pathologist



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Investigation	Result	Reference Range
Serum Creatinine * Method Enzymatic	0.6 mg/dl	Male : 0.7 - 1.3 mg/dl Female : 0.6 - 1.1 mg/dl New Born 1 - 4 days : 0.3 - 1.0 mg.dl Infant (upto 1year) : 0.2 - 0.4 mg/dl Children : 0.3 - 0.7 mg/dl
Blood Urea * Method GLDH	18 mg/dl	10 - 50 mg/dl
Blood Urea Nitrogen * Calculated	8.4 mg/dl	6 - 25.5 mg/dl
Serum Uric Acid * Method:Uricase POD	4.8 mg/dl	Male : 3.5 - 7.2 mg/dl Female : 2.6 - 6.0 mg/dl
* End of Report *		
 Dr Rajini G, PhD Chief Biochemist	 Verified by	 Dr S Ramadevi MD Consultant Pathologist



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Investigation	Result	Reference Range
% HbA1c (Glycosylated Haemoglobin) <i>(Method: HPLC-NGSP Certified)</i>	6.1 %	< 6.0 : Pre Diabetic 6-7 : Good Control 7-8 : Weak Control > 8.0 : Poor Control

Intrepretation :

HbA1c is an indicator of glycemic control. HbA1c represents average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but within this 120 days. Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four.

Mean Plasma Glucose mg/dl = (HbA1c x 35.6) - 77.3)

Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only .81 (1.0 would be a straight line, which has "perfect" correlation...) This means that to predict or estimate average glucose from Hb-A1c or vice-versa is not "perfect" but gives a good working ballpark estimate. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime glucose levels, which are easier to predict and control.

* End of Report *

Dr Rajini G, PhD
 Chief Biochemist

Verified by

Dr S Ramadevi MD
 Consultant Pathologist



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Alt ID :

Investigation

Result

Normal Ranges

Trilodothyronine Total (TT3)	108 ng/mL	60-200 ng/mL
Thyroxine - Total (TT4)	11 mg/dL	4.5-12 mg/dL
Thyroid Stimulating Hormone(TSH) Method: C.L.I.A	1.67 μ IU/ml	0.3-5.5 μ IU/ml

Interpretation

Primary malfunction of the thyroid gland may result in excessive (hyper) or below normal (hypo) release of T3 or T4. In addition, as thyroid function is directly affected by TSH. Diagnostically, T3 concentration is more sensitive to certain thyroid conditions than T4. While T4 levels are a sensitive (and superior) indicator of hypothyroidism, T3 blood levels better define hyperthyroidism. Because T3 concentration in serum changes faster and more markedly than T4, the T3 level is also an excellent indicator of the ability of the thyroid to respond to both stimulatory and suppressive tests. Under conditions of strong thyroid stimulation, the T3 level offers a good.

It is especially useful in the differential diagnosis of primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

Dr Rajani Gutha, PhD
Chief Biochemist

* End of Report *

Verified by

Dr S Ramadevi, MD
Consultant Pathologist



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Alt ID :

Investigation

Result

Complete Urine Examination

Investigation

Result

PHYSICAL EXAMINATION

Colour : Pale Yellow
Apperance : Clear
Reaction : Acidic
Specific Gravity : 1.025

CHEMICAL EXAMINATION

Albumin : Nil
Glucose : Nil

MICROSCOPIC EXAMINATION

Pus Cells : 2 - 3 /HPF
Epithelial Cells : 2 - 3 /HPF
RBC : Nil /HPF
Crystals : Nil
Casts : Nil
Bacteria : Nil
Others : Nil

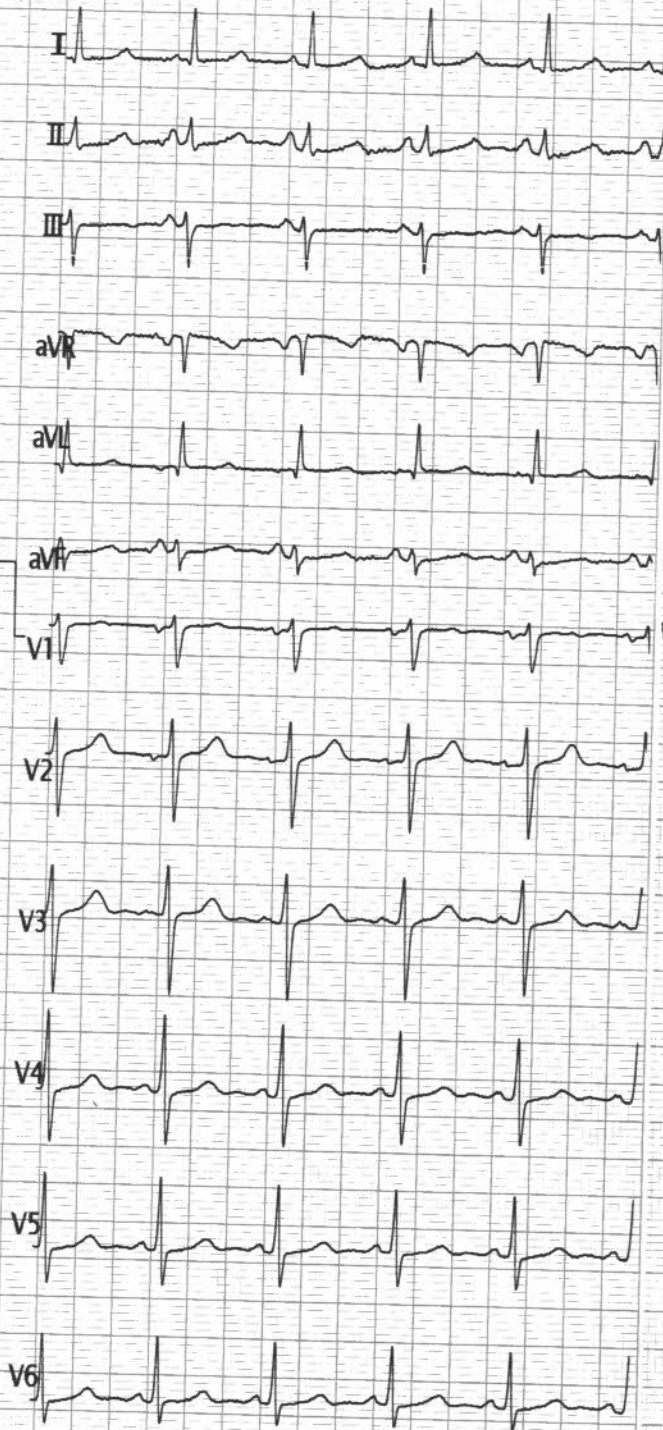
* End of report *

Verified by

Dr Rajani Gutha
Chief Biochemist

D RS Ramadevi, MD
Consultant Pathologist

10mm/mV



Vent. Rate(BPM) : 96

PR Int.(ms) : 113

P/QRS/T Int.(ms) : 88 92 154

QT/QTc Int.(ms) : 358 458

P/QRS/T Axis(Deg.) : 63 -3 31

RV1/SV5 Amp.(mV) : 0.15 0.43

RV5/SV1 Amp.(mV) : 0.79 0.50

TO BE CORRELATED

ECG Analysis Result:

800 Normal Sinus Rhythm

401 Short P-R Interval

212 Left Axis Deviation

*** Borderline Normal ECG ***

N>Q

Dr. V. MARIRAM
MD.DM(Card)

HARI'S HEART CLINIC
1st Floor, MG Road, KPHB, Hyderabad-72. Ph: 26333333

Note: Unconfirmed Report Need to Review.

V2.33 Technician :

ST LEVEL(mV)

I	II	III	aVR	aVL	aVF
-0.00	+0.00	+0.00	+0.00	-0.00	+0.00
V1	V2	V3	V4	V5	V6
+0.01	+0.02	+0.01	-0.00	-0.00	+0.00

023-3719 F/39Y
MRS. POTULA SASMITA
Aditya Diagnostics 26-03-2023

<FFG

> 000000000000 F 9Y / cm/Kg / mmHg

25mm/s AC50 EMG ADS 26-03-2023 11:51:08

39 Yrs / Female
67 Kg / 159 Cms

26-Mar-2023 01:08:16 PM

Protocol : BRUCE

Medication : SUGAR TABLETS
Ref By : BANK OF BARODA

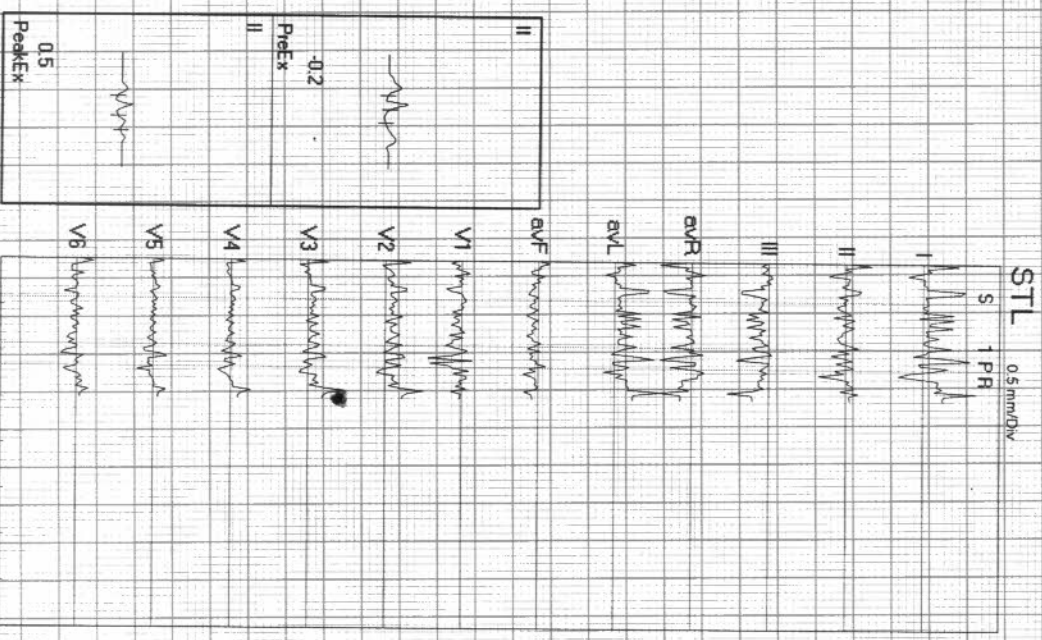
Objective :
History : SUGAR

Stage	StageTime (Min:Sec)	PhaseTime (Min:Sec)	Speed (mph)	Grade (%)	METS	H.R. (bpm)	B.P. (mmHg)	R.P.P. x100	PVC	Comments
Supine					1.0	135	130/80	175	-	
Standing					1.0	128	130/80	166	-	
HV					1.0	122	130/80	158	-	
ExStart					1.0	124	130/80	161	-	
Stage 1	3:00	3:01	1.7	10.0	4.7	164	140/90	229	-	
PeakEx	1:25	4:26	2.5	12.0	5.8	182	140/90	254	-	
ChestPain	0:07	4:27	1.1	0.0	4.0	178	140/90	249	-	
LegPain	0:10	4:27	1.1	0.0	3.7	165	140/90	231	-	
Dizziness	0:14	4:27	1.1	0.0	3.3	182	140/90	254	-	
Recovery	1:00		1.1	0.0	1.0	170	140/90	238	-	
Recovery	2:00		0.0	0.0	1.0	140	130/80	182	-	
Recovery	2:05		0.0	0.0	1.0	136	120/70	163	-	

Findings :

Exercise Time : 04:26
Max HR Attained : 182 bpm 10.1% of Target 181
Max BP : 140/90(mmHg)
Max Workload attained : 5.8(Fair Effort Tolerance)

INDUCIBLE ISCHEMIA
NEGATIVE FOR



Advice/Comments:



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES

MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

0233719 / MRS POTULA SASMITA

39 Yrs / Female

67 Kg / 159 Cm/

Date: 26-Mar-2023 01:08:16 PM

Linked Medians Report

Ex Time 01:07

BLC: Off

Notch: On

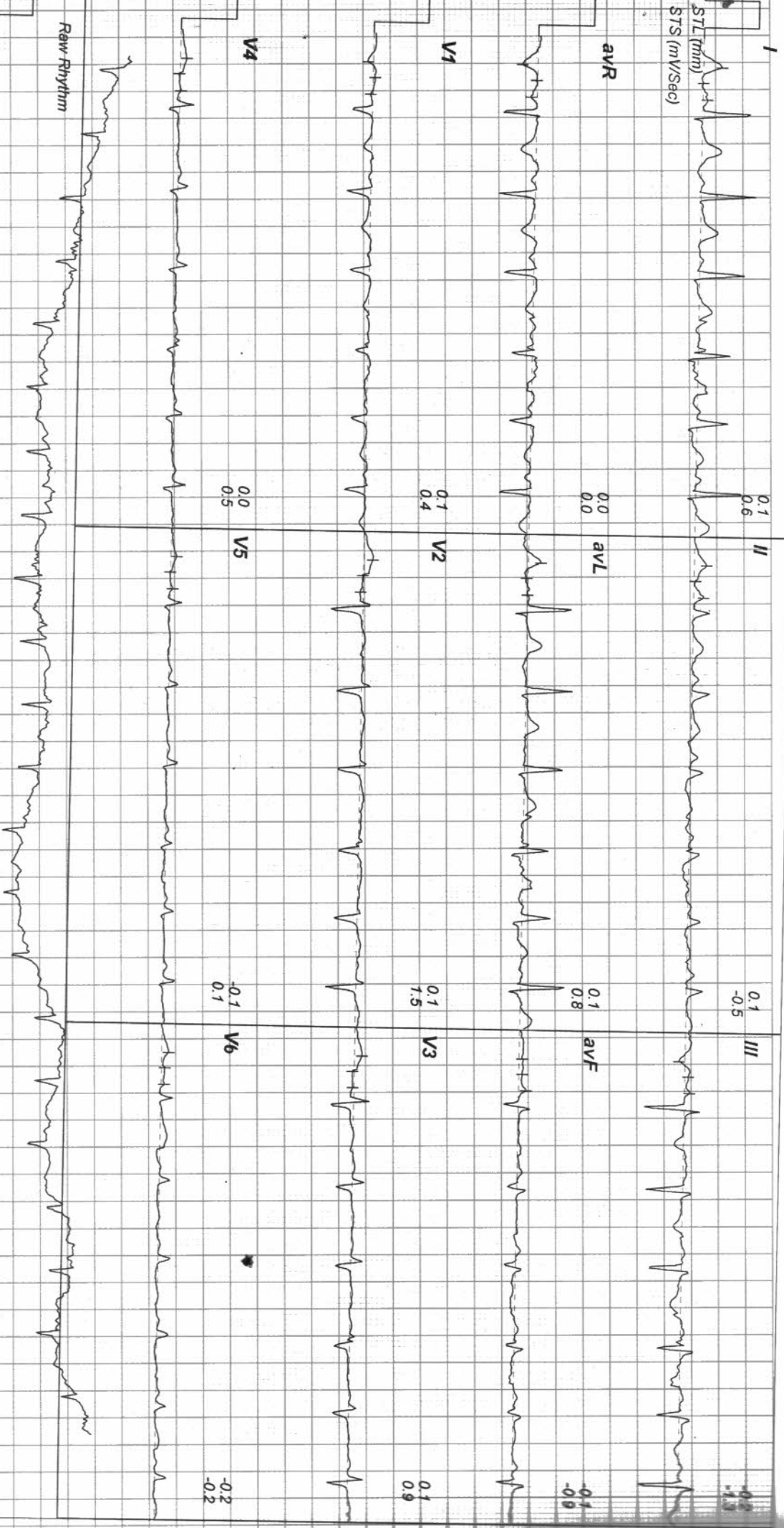
SUPINE

1.0 Cm/mV

25 mm/Sec.

HR: 129 bpm
METs: 1.0
Tgt HR: 71% of 181
Speed: 11.0 mph,
Grade: 0.0%

(0.05-100)Hz



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
 MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.
 0233719 / MRS POTULA SASMITA
 39 Yrs / Female
 67 Kg / 159 Cm/
 Date: 26-Mar-2023 01:08:16 PM

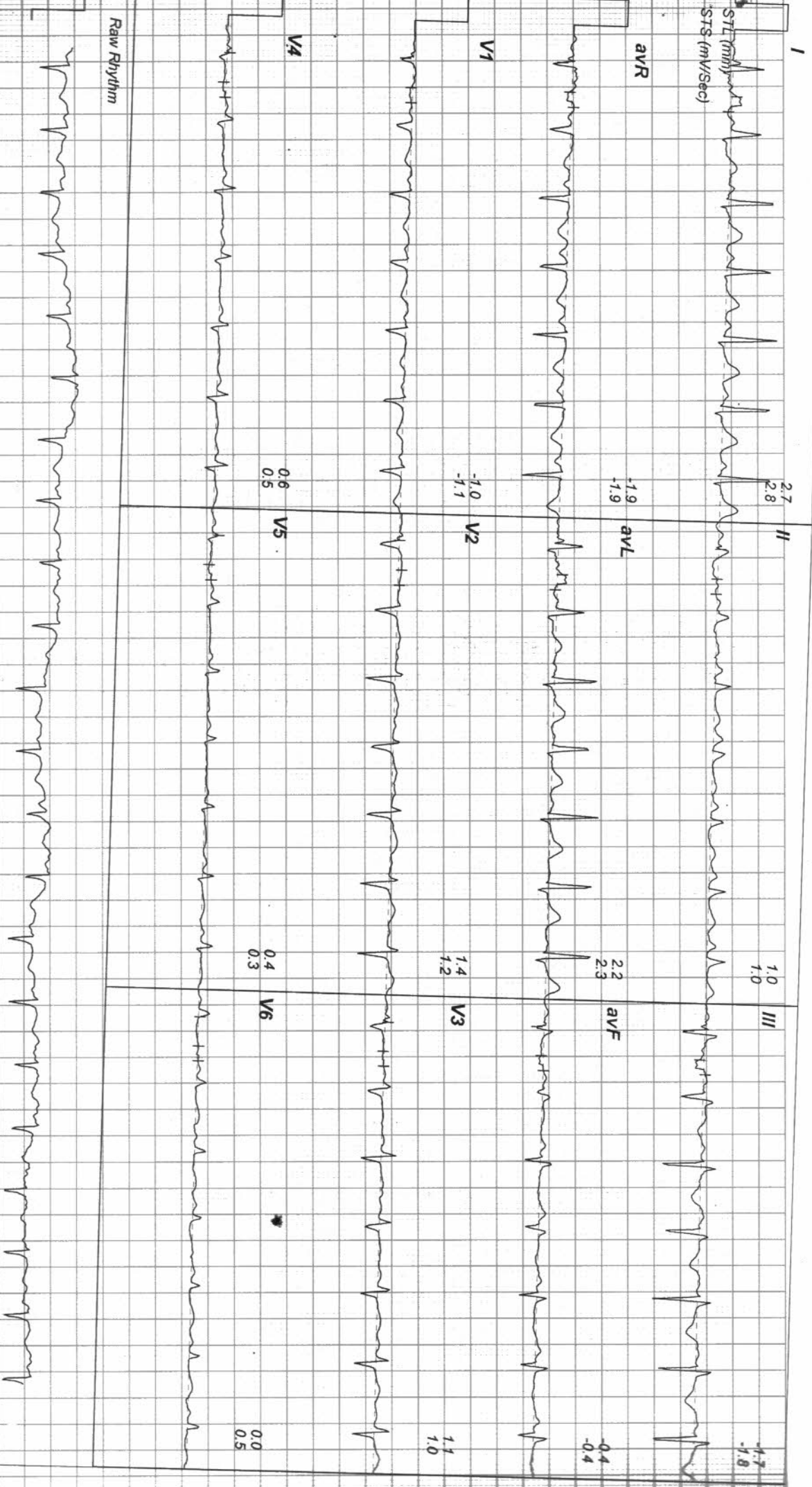
HR: 127 bpm
 METS: 1.0
 BP: 130/80
 Trgt HR: 70% of 181
 Speed: 11.0 mph,
 Grade: 0.0%

Linked Medians Report

(0.05-100)Hz

Ex Time 01:51
 BLC : Off
 Notch : On

STANDING
 1.0 Cm/mV
 25 mm/Sec.



ADDITYA DIAGNOSTIC & RESEARCH LABORATORIES
 MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

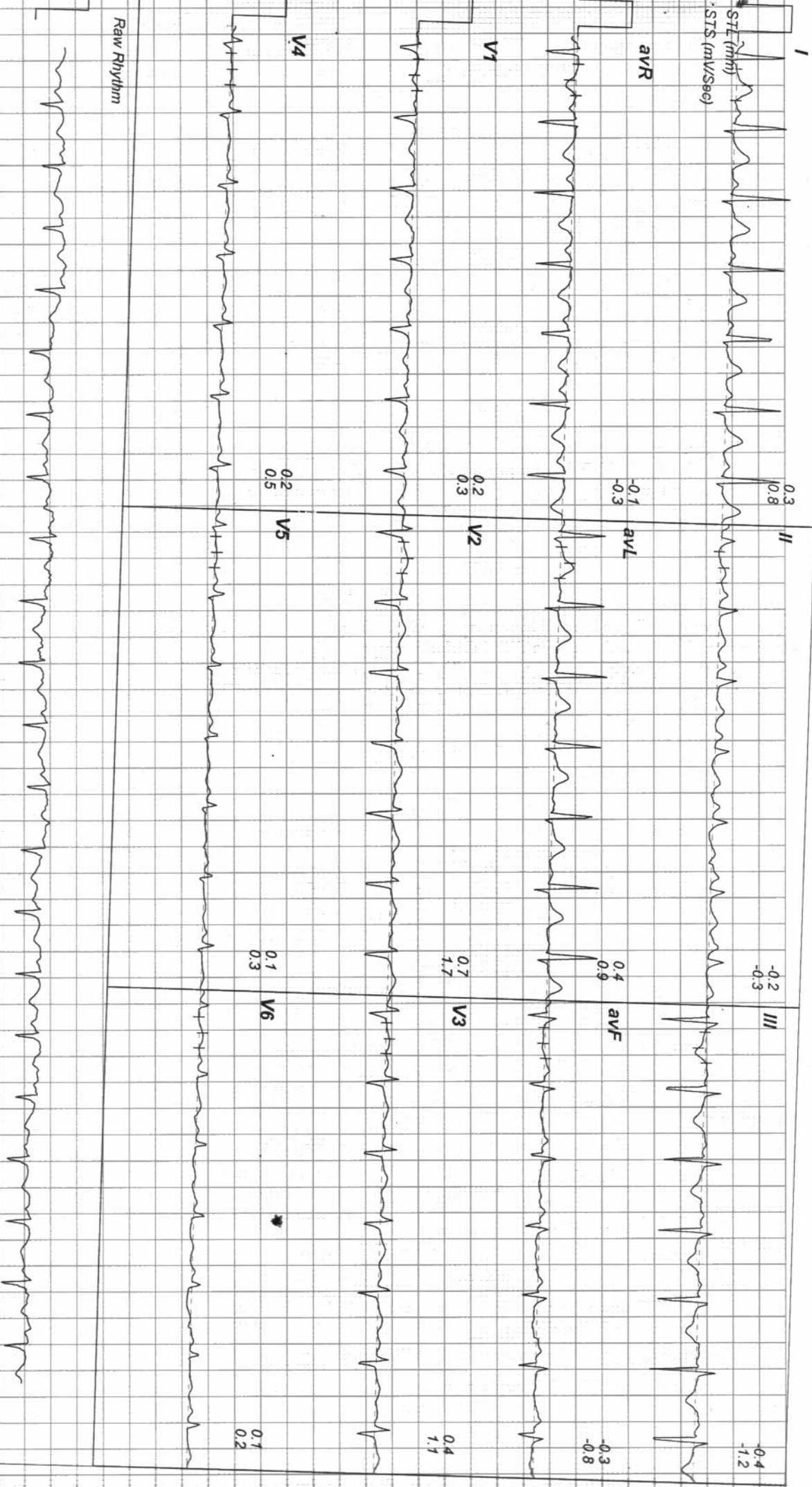
0233719 / MRS POTULA SASMITA
 39 Yrs / Female
 67 Kg / 159 Cm/
 Date: 26-Mar-2023 01:08:16 PM

HR: 122 bpm
 METS: 1.0
 BP: 130/80
 Tgt HR: 67% of 181
 Speed: 11.0 mph,
 Grade: 0.0%

Linked Medians Report

Ex Time 02:27
 BLC: Off
 Notch: On
 (0.05-100)Hz

HV
 1.0 Cm/mV
 25 mm/Sec.



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
 MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

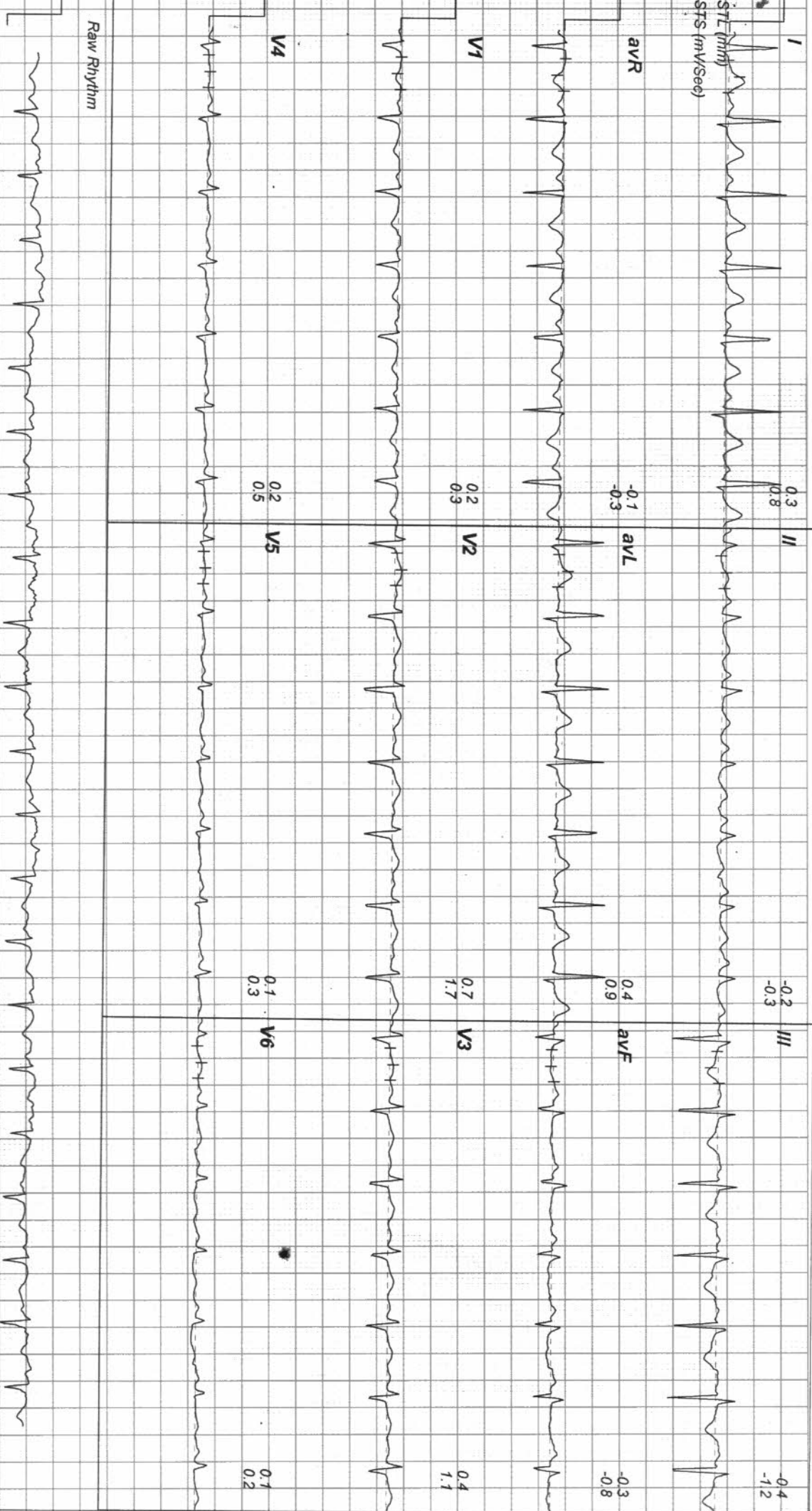
Linked Medians Report

0233719 / MRS POTULA SASMITA
 39 Yrs / Female
 67 Kg / 159 Cm/
 Date: 26-Mar-2023 01:08:16 PM

HR: 124 bpm
 METS: 1.0
 BP: 130/80
 Trgt HR: 68% of 181
 Speed: 11.0 mph,
 Grade: 10.0%

Ex Time 00:00
 BLC: Off
 Notch: On
 (0.05-100)Hz

ExSt
 1.0 Cm/mV
 25 mm/Sec.



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

Linked Medians Report

0233719 / MRS POTULA SASMITA HR: 164 bpm
 39 Yrs / Female METS: 4.7
 67 Kg / 159 Cm/ BP: 140/90

Tgt HR: 90% of 181
 Speed: 17.0 mph,
 Grade: 10.0%

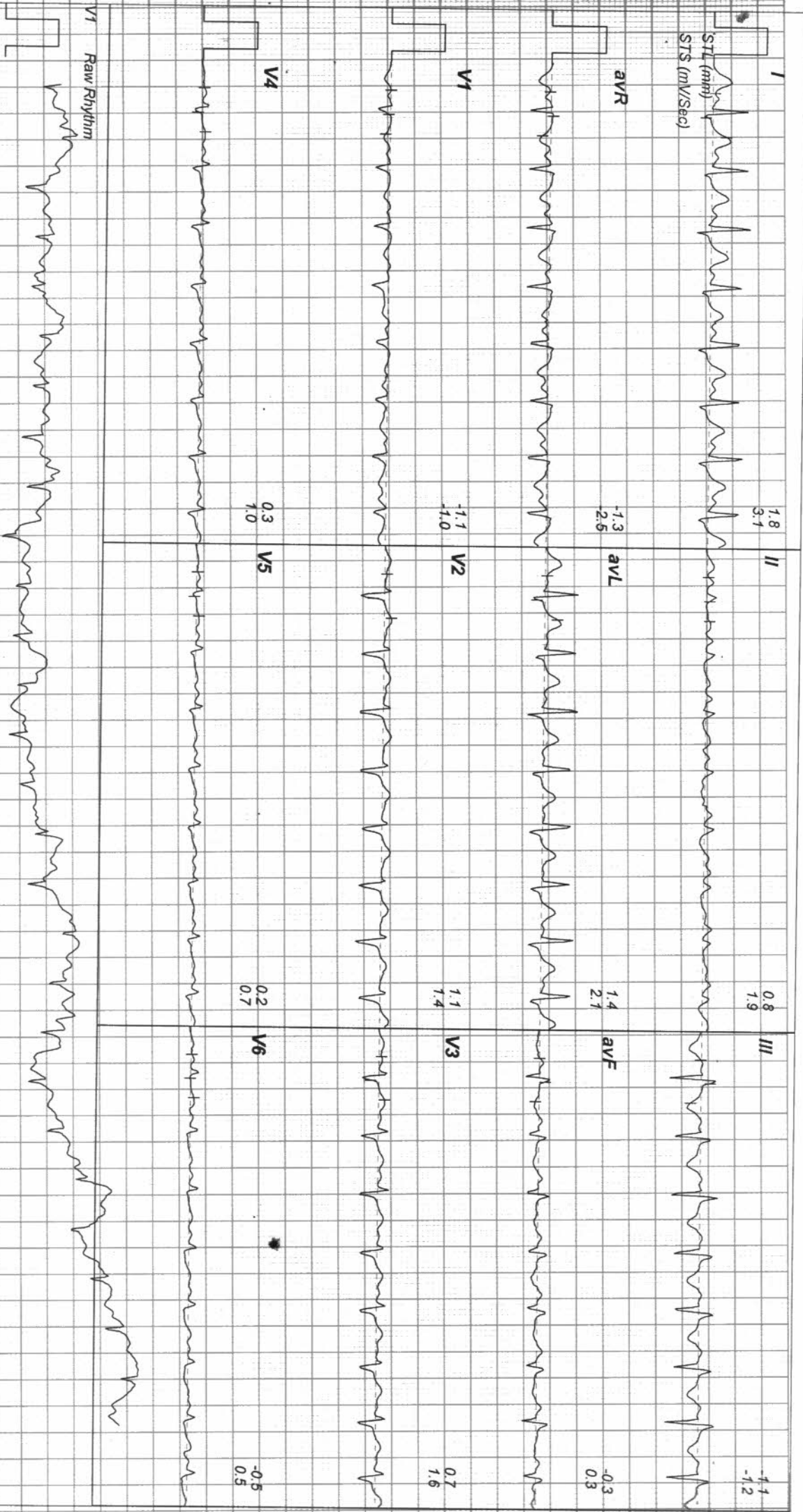
(0.05-100)Hz

Ex Time 03:00
 BLC: Off
 Notch: On

Stage 1 (03:00)
 1.0 Cm/mV
 25 mm/Sec.



Date: 26-Mar-2023 01:08:16 PM



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES

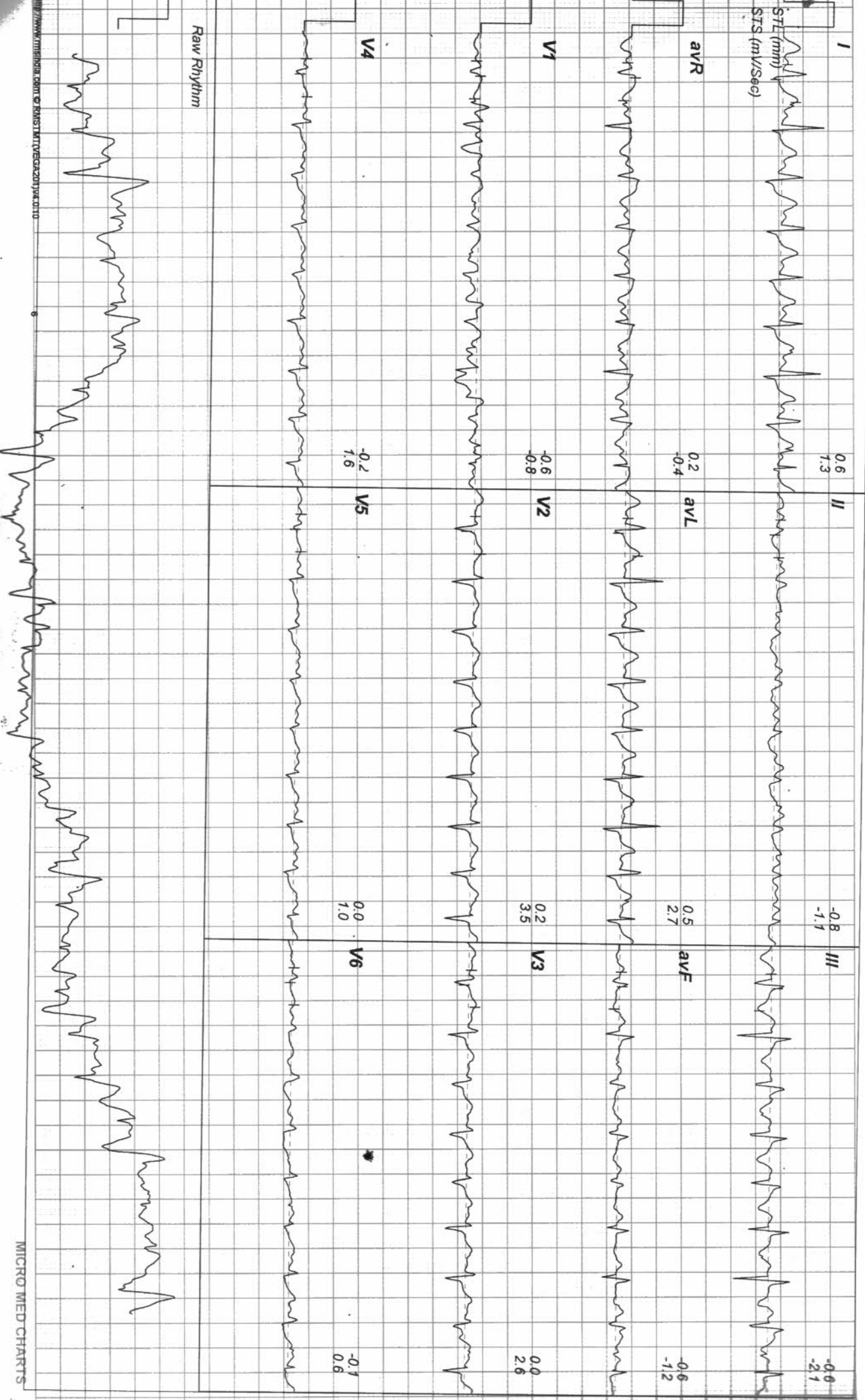
Linked Medians Report

MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.
 0233719 / MRS POTULA SASMITA
 39 Yrs / Female
 67 Kg / 159 Cm/
 Date: 26-Mar-2023 01:08:16 PM

HR: 180 bpm
 METS: 5.8
 BP: 140/90
 Tgt HR: 99% of 181
 Speed: 25.0 mph,
 Grade: 12.0%
 Ex Time 04:25
 BLC: Off
 Notch: On



PeakEx
 1.0 Cm/mV
 25 mm/Sec.



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

Linked Medians Report

0233719 / MRS POTULA SASMITA

HR: 159 bpm
 METS: 3.9
 Tgt HR: 87% of 181

39 Yrs / Female
 67 Kg / 159 Cm/
 Date: 26-Mar-2023 01:08:16 PM

BP: 140/90

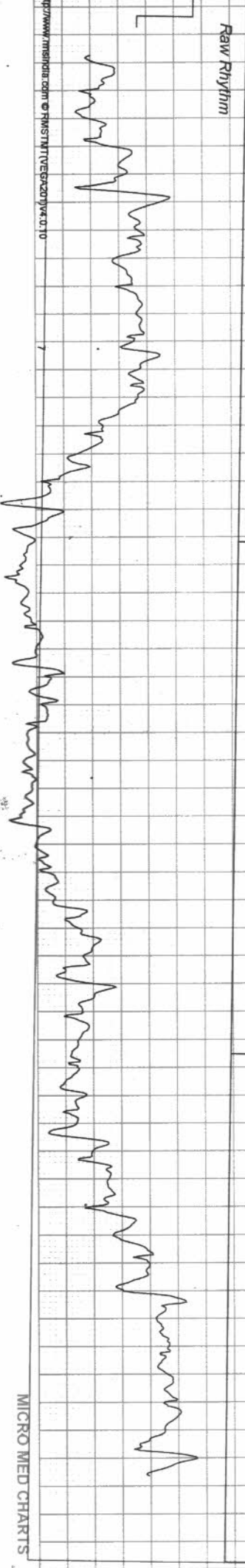
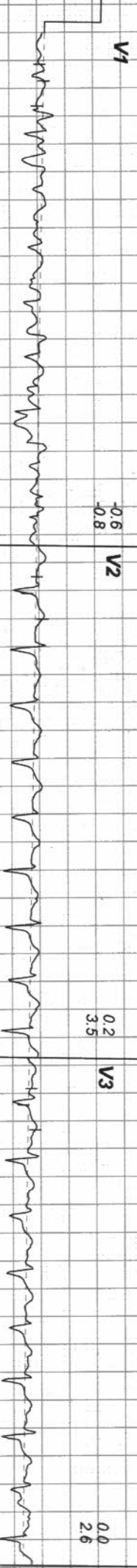
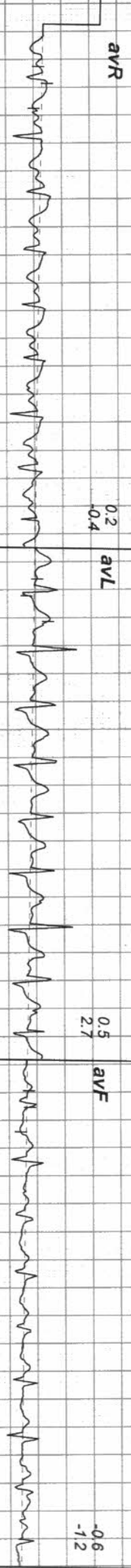
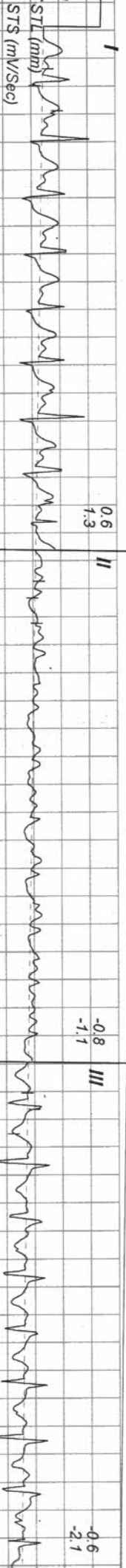
Speed: 11.0 mph,
 Grade: 0.0%

(0.05-100)Hz

Ex Time 04:25

BLC: Off
 Notch: On

Recovery : (00:07)
 1.0 Cm/mV
 25 mm/Sec.



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES
MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

Linked Medians Report

0233719 / MRS POTULA SASMITA
 39 Yrs / Female
 67 Kg / 159 Cm/
 Date: 26-Mar-2023 01:08:16 PM

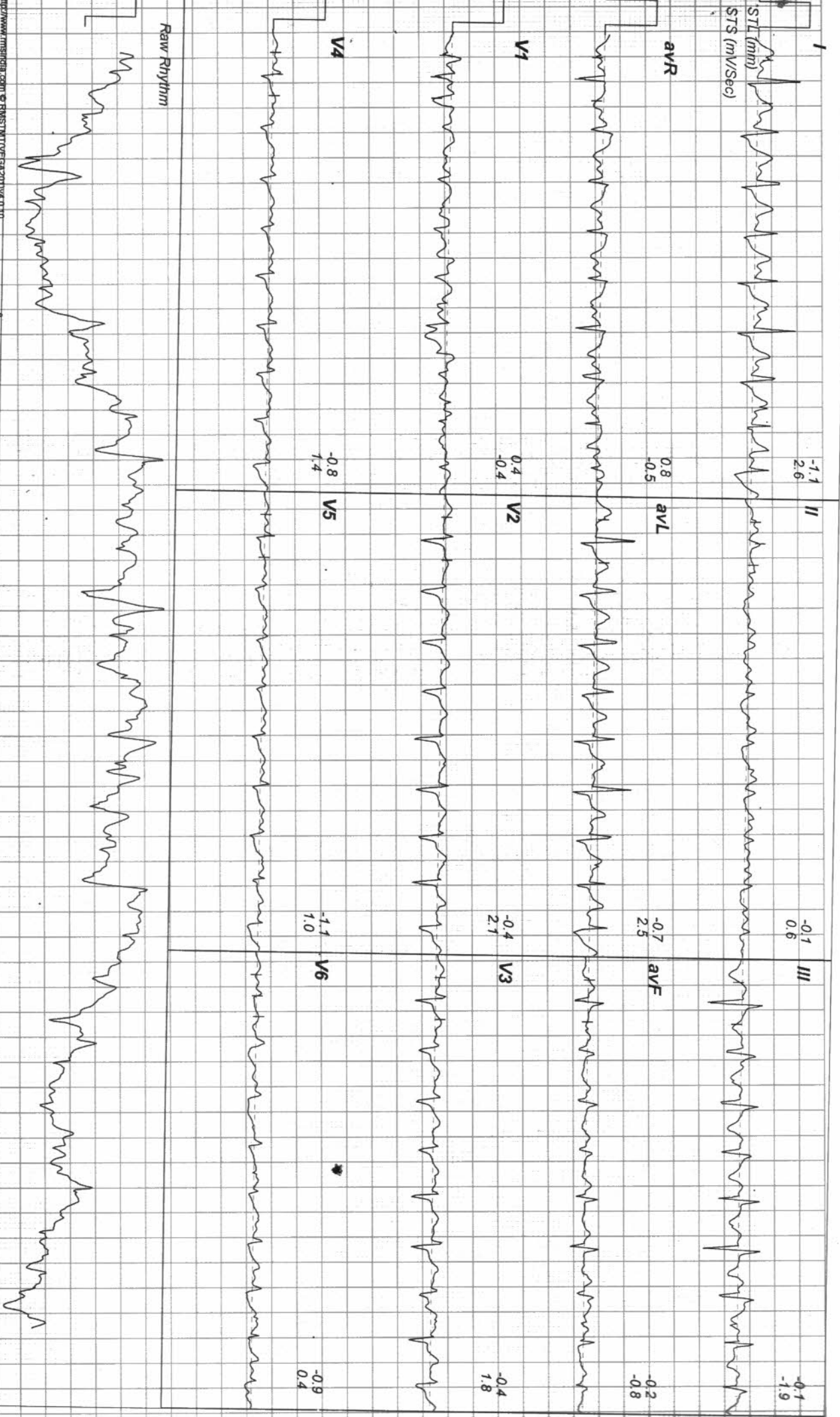
HR: 186 bpm
 METS: 3.6
 BP: 140/90

Tgt HR: 102% of 181
 Speed: 11.0 mph,
 Grade: 0.0%

(0.05-100)Hz

Ex Time 04:25
 BLC: Off
 Notch: On

Recovery : (00:10)
 1.0 Cm/mV
 25 mm/Sec.



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES

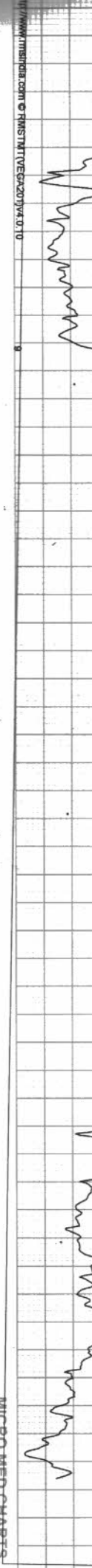
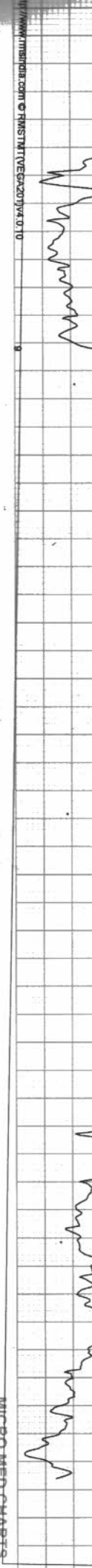
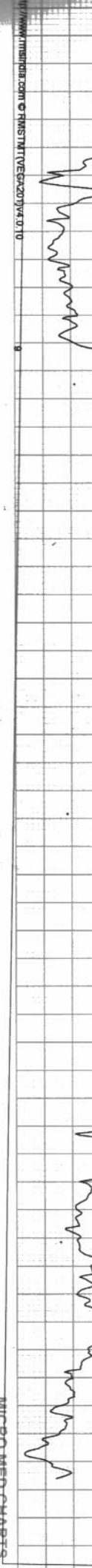
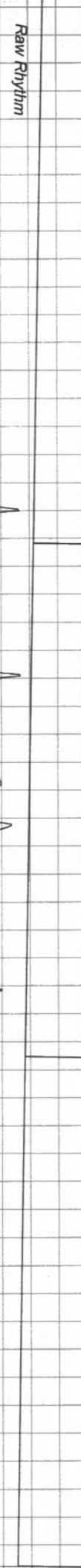
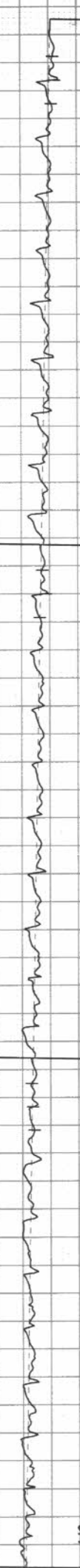
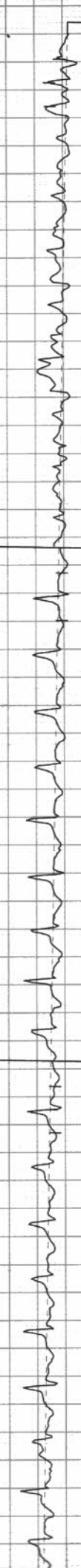
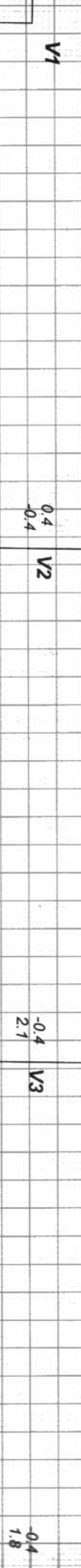
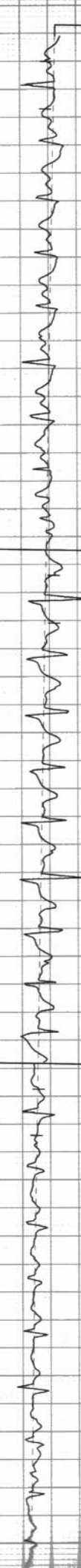
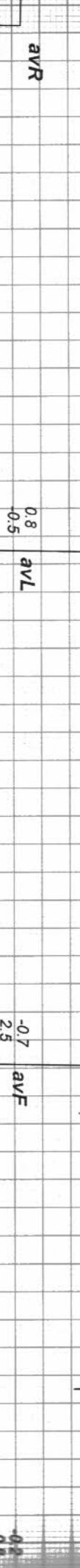
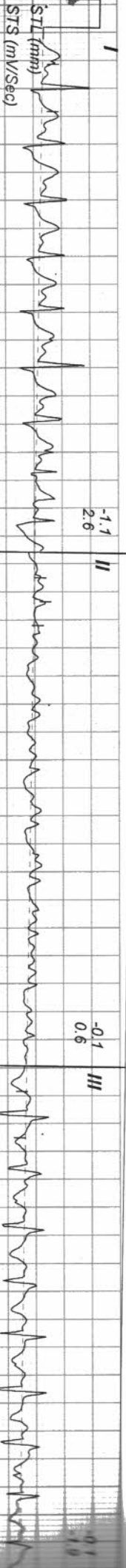
Linked Medians Report

MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.
0233719 / MRS POTULA SASMITA
39 Yrs / Female
67 Kg / 159 Cm/
Date: 26-Mar-2023 01:08:16 PM

HR: 173 bpm
METs: 3.2
BP: 140/90
Tgt HR: 95% of 181
Speed: 11.0 mph,
Grade: 0.0%

Ex Time 04:25
BLC: Off
Notch: On

Recovery : (00:14)
1.0 Cm/mV
25 mm/Sec.



Raw Rhythm

ADITYA DIAGNOSTIC & RESEARCH LABORATORIES

MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.

0233719 / MRS POTULA SASMITA

39 Yrs / Female

67 Kg / 159 Cm/

Date: 26-Mar-2023 01:08:16 PM

Linked Medians Report

Ex Time 04:25

BLC: Off

Notch: On

Recovery : (00:59)

1.0 Cm/mV

25 mm/Sec.

HR: 170 bpm

METS: 1.0

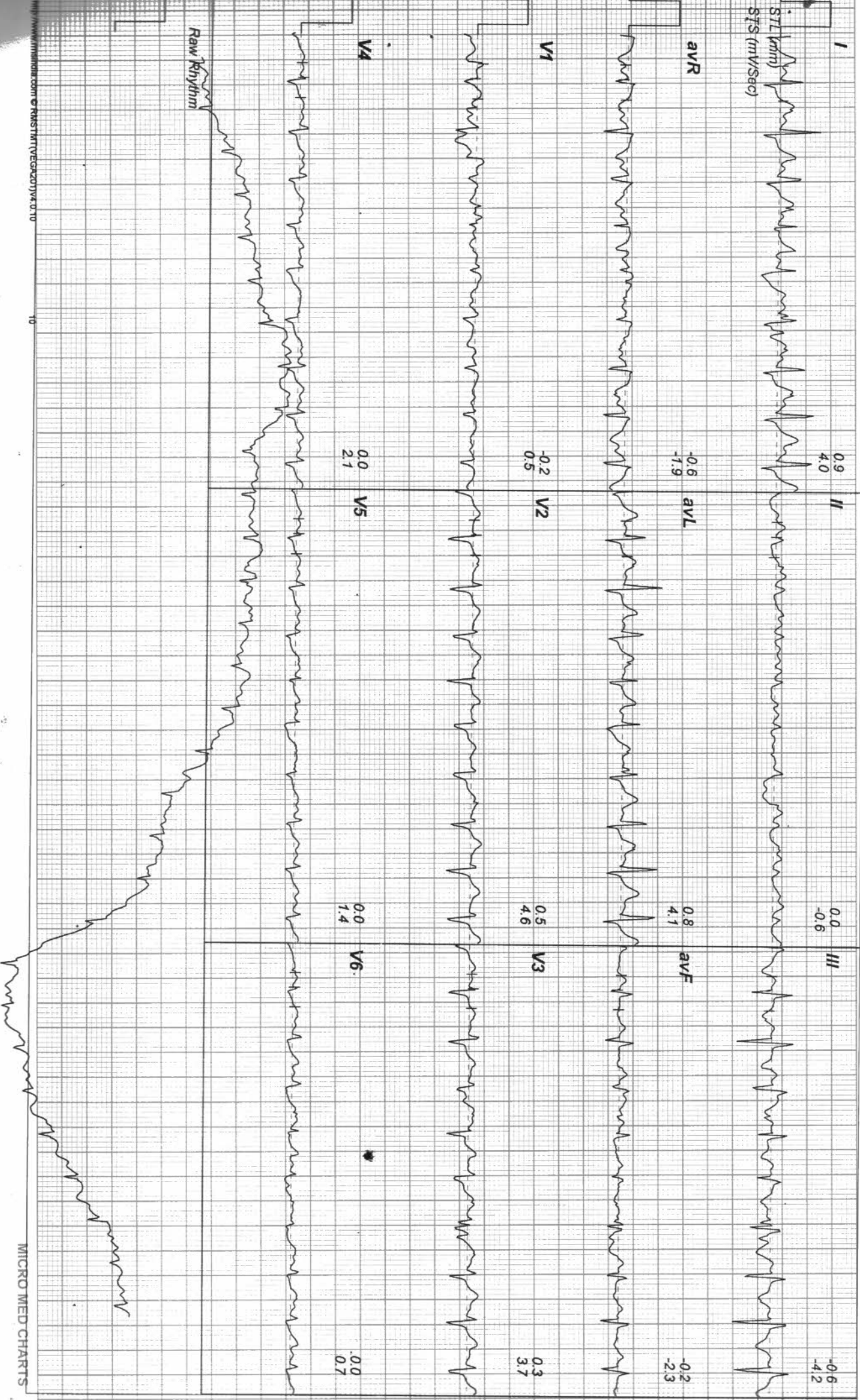
BP: 140/90

Tgt HR: 93% of 181

Speed: 11.0 mph,

Grade: 0.0%

(0.05-100)Hz



ADITYA DIAGNOSTIC & RESEARCH LABORATORIES

Linked Medians Report

MIG 256-258, S R TOWERS, ROAD NO 4, REMEDY LINE KPHB, HYD TS.
0233719 / MRS POTULA SASMITA

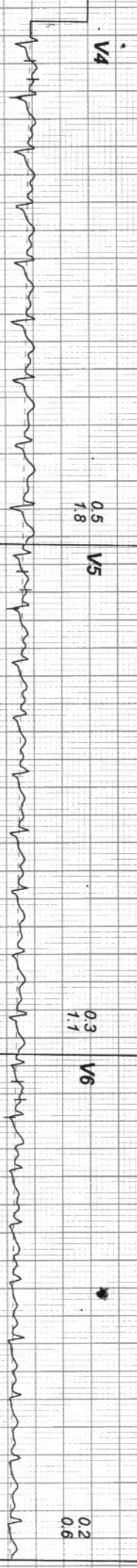
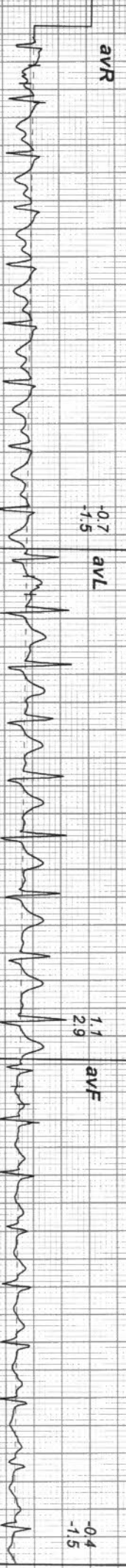
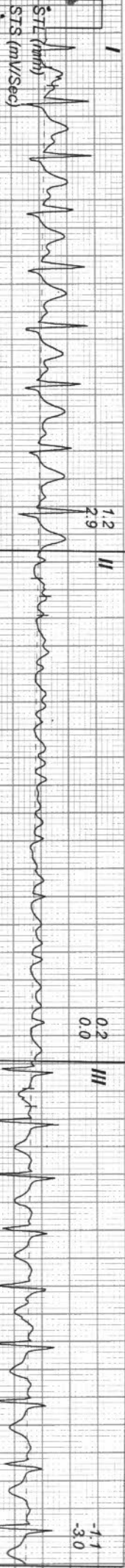
39 Yrs / Female
67 Kg / 159 Cm/
Date: 26-Mar-2023 01:08:16 PM

HR: 140 bpm
METs: 1.0
Tgt HR: 77% of 181
Speed: 0.0 mph,
Grade: 0.0%

(0.05-100)Hz

Ex Time 04:25
BLC: Off
Notch: On

Recovery : (01:59)
1.0 Cm/mV
25 mm/Sec.



Raw Rhythm



Name : MRS. POTULA SASMITA
Age /Sex : 39 Y / F
Ref. By : BANK OF BARODA (MW)


Reg. No : 023-3719
Registration Date : 26-03-2023
Alt ID :

Ultrasound Scan Of Abdomen (Female)

- Liver** Size (139 mm), Shape, contour and echotexture normal. No localized or diffused mass lesions are seen. Intrahepatic vascular system, Portal vein, C.B.D and biliary radicals are normal
- Gall Bladder** Partially distended, shape and wall thickness are normal. No calculus or no mass lesions are seen.
- Spleen** Size : 101 mm, Shape and echotexture normal, No abnormal calcifications seen.
- Pancreas** Head, body and tail echotexture are normal. Pancreatic duct normal. No mass or cystic lesions seen. No calcifications are seen.
- Kidneys** Both Kidneys show normal in size, shape .
Peri renal areas normal, Renal capsule normal, Cortical thickness, Cortical echopattern and corticomedullary differentiation are normal. Pelvicalyceal system normal. No calculus or no mass lesions are seen.
- Urinary Bladder** Partially distended, Normal wall thickness. No evidence of calculi. No focal lesions.
- Uterus** Size : 71 X 38 X 58 mm, Weight - Echotexture normal, No calcification seen. Endometrium thickness
- Ovarie** Right ovary is normal in size, shape and echotexture.
Right Ovary : 33 X 22 mm.
Left Ovary could not be visualized due to suboptimal window.
- Others** Aorta and IVC are normal. No lymphadenopathy. No ascitis.

Impression: *No Sonological Abnormality detected at the time of scan.*

Advice - Clinical correlation.


Dr AZAM
Radiologist