

प्रति,

समन्वयक,

Mediwheel (Arcofemi Healthcare Limited)

हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिनका विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	कर्मचारी विवरण
नाम	MRS. YADAV RAJNISH
क.कू संख्या	180899
पदनाम	SINGLE WINDOW OPERATOR A
कार्य का स्थान	GHAZIABAD, INDIRAPURAM
जन्म की तारीख	18-01-1995
स्वास्थ्य जांच की प्रस्तावित तारीख	09-03-2024
बुकिंग संदर्भ सं.	23M180899100096828E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 05-03-2024 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

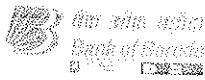
हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)



LETTER OF APPROVAL / RECOMMENDATION

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 employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MRS. YADAV RAJNISH
EC NO.	180899
DESIGNATION	SINGLE WINDOW OPERATOR A
PLACE OF WORK	GHAZIABAD, INDIRAPURAM
BIRTHDATE	18-01-1995
PROPOSED DATE OF HEALTH CHECKUP	09-03-2024
BOOKING REFERENCE NO.	23M180899100096828E

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 **05-03-2024** till **31-03-2024**. 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 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))



**भारत सरकार**  
**Government of India**


**राजनिश यादव**  
**Rajnish Yadav**  
**जन्म तिथि/DOB: 13/01/1995**  
**लिंग / GENDER: FEMALE**



**3295 8111 5755**

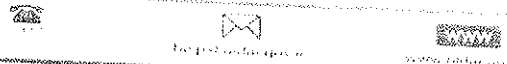
**मेरा पहचान, मेरी पहचान**


**एनडीए अद्वितीय पहचान प्राधिकरण**  
**Unique Identification Authority of India**

**पता:**  
**आमनज: राजेंद्र कुमार, 77, शाहपुर**  
**बनसही, गाजियाबाद, गाजियाबाद,**  
**उत्तर प्रदेश - 201001**

**Address:**  
**D/O: Rajendra Kumar, 77**  
**shahpur banesahi, Ghaziabad,**  
**Ghaziabad**  
**Uttar Pradesh - 201001**

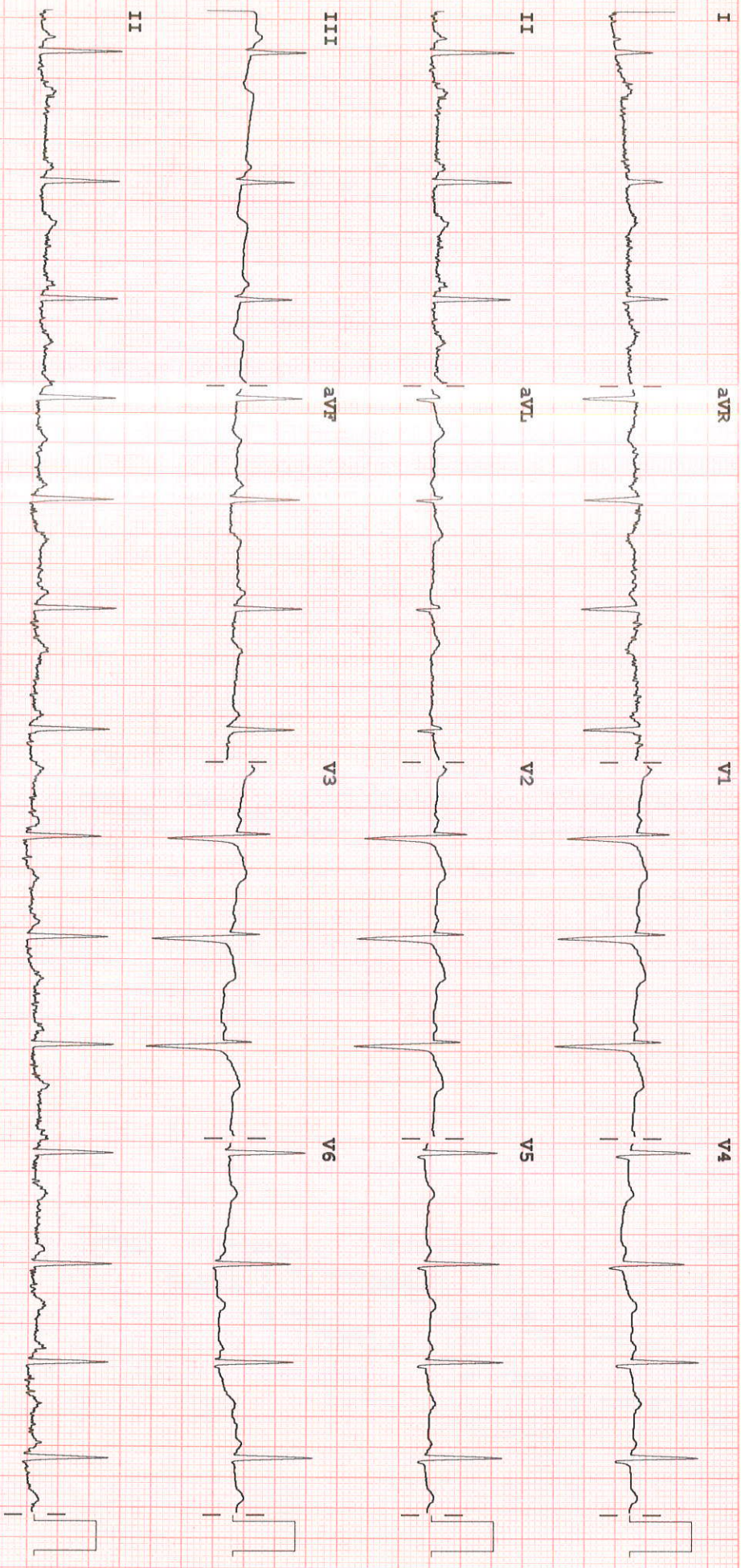
**3295 8111 5755**



*Rayees Yaden*

- BORDERLINE ECG -

Unconfirmed Diagnosis



Dev:

Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 60~ 0.15-100 Hz

PH100B CL P?



## TMT INVESTIGATION REPORT

Patient Name	MR RAJNISH YADAV	Location	: Ghaziabad
Age/Sex	: 29Year(s)/male	Visit No	: V000000001-GHZZ
MRN No	MH011760972	Order Date	: 09/03/2024
Ref. Doctor	: DR BHUPENDRA SINGH	Report Date	: 09/03/2024

**Protocol** : Bruce **MPHR** : 191BPM  
**Duration of exercise** : 6min 55sec **85% of MPHR** : 166BPM  
**Reason for termination** : THR achieved **Peak HR Achieved** : 184BPM  
**Blood Pressure (mmHg)** : Baseline BP : 120/80mmHg **% Target HR** : 96%  
 Peak BP : 150/90mmHg **METS** : 8.4METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	127	120/80	Nil	No ST changes seen	Nil
STAGE 1	3:00	146	130/80	Nil	No ST changes seen	Nil
STAGE 2	3:00	174	140/90	Nil	No ST changes seen	Nil
STAGE 3	0:55	184	150/90	Nil	No ST changes seen	Nil
RECOVERY	10:00	121	130/80	Nil	No ST changes seen	Nil

### COMMENTS:

- No ST changes in base line ECG.
- No ST changes at peak stage.
- No ST changes in recovery.
- Normal chronotropic response.
- Normal blood pressure response.

### IMPRESSION:

Treadmill test is **negative** for exercise induced reversible myocardial ischemia.

  
**Dr. Bhupendra Singh**  
 MD, DM (CARDIOLOGY), FACC  
 Sr. Consultant Cardiology

**Dr. Abhishek Singh**  
 MD, DNB (CARDIOLOGY), MNAMS  
 Sr. Consultant Cardiology

**Dr. Sudhanshu Mishra**  
 MD  
 Cardiology Registrar

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Ghaziabad, Uttar Pradesh - 201 002

P : 0120-3535353

Page 1 of 2

Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

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P +91 80 4936 0300 E info@manihospitals.com [www.manipalhospitals.com](http://www.manipalhospitals.com)



**LABORATORY REPORT**

<b>Name</b>	: MRS RAJNISH YADAV	<b>Age</b>	: 29 Yr(s) Sex :Female
<b>Registration No</b>	: MH011760972	<b>Lab No</b>	: 202403001081
<b>Patient Episode</b>	: H18000001889	<b>Collection Date</b>	: 09 Mar 2024 10:07
<b>Referred By</b>	: HEALTH CHECK MGD	<b>Reporting Date</b>	: 09 Mar 2024 13:39
<b>Receiving Date</b>	: 09 Mar 2024 10:07		

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>THYROID PROFILE, Serum</b>			<b>Specimen Type : Serum</b>
T3 - Triiodothyronine (ELFA)	0.930	ng/ml	[0.610-1.630]
T4 - Thyroxine (ELFA)	8.060	ug/ dl	[4.680-9.360]
Thyroid Stimulating Hormone	4.500	μIU/mL	[0.250-5.000]

**NOTE:**

TSH stimulates the thyroid gland to produce the main thyroid hormones T3 and T4. In cases of hyperthyroidism TSH level is severely inhibited and may even be undetectable. In rare forms of high-origin hyperthyroidism, the TSH level is not reduced, since the negative-feedback control of the thyroid hormones has no effect.

In cases of primary hypothyroidism, TSH levels are always much higher than normal and thyroid hormone levels are low.

The TSH assay aids in diagnosing thyroid or hypophysial disorders.

The T4 assay aids in assessing thyroid function, which is characterized by a decrease in thyroxine levels in patients with hypothyroidism and an increase in patients with hyperthyroidism.

**The test has been carried out in Fully Automated Immunoassay System VIDAS using ELFA (Enzyme Linked Fluorescence Assay) technology.**



**LABORATORY REPORT**

Name : MRS RAJNISH YADAV  
Registration No : MH011760972  
Patient Episode : H18000001889  
Referred By : HEALTH CHECK MGD  
Receiving Date : 09 Mar 2024 10:07

Age : 29 Yr(s) Sex :Female  
Lab No : 202403001081  
Collection Date : 09 Mar 2024 10:07  
Reporting Date : 09 Mar 2024 14:18

**BLOOD BANK**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Blood Group & Rh Typing (Agglutination by gel/tube technique)			Specimen-Blood
Blood Group & Rh typing	B Rh(D) Positive		

**Technical note:**

*ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.*

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**NOTE:**

# - Abnormal Values

-----END OF REPORT-----

**Dr. Alka Dixit Vats**  
Consultant Pathologist



**LABORATORY REPORT**

Name : MRS RAJNISH YADAV  
Registration No : MH011760972  
Patient Episode : H18000001889  
Referred By : HEALTH CHECK MGD  
Receiving Date : 09 Mar 2024 10:07

Age : 29 Yr(s) Sex :Female  
Lab No : 202403001081  
Collection Date : 09 Mar 2024 10:07  
Reporting Date : 09 Mar 2024 12:21

**HAEMATOLOGY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>COMPLETE BLOOD COUNT (AUTOMATED)</b>		<b>SPECIMEN-EDTA Whole Blood</b>	
RBC COUNT (IMPEDEANCE)	4.25	millions/cumm	[3.80-4.80]
HEMOGLOBIN	12.2	g/dl	[12.0-15.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	38.2	%	[36.0-46.0]
MCV (DERIVED)	89.9	fL	[83.0-101.0]
MCH (CALCULATED)	28.7	pg	[25.0-32.0]
MCHC (CALCULATED)	31.9	g/dl	[31.5-34.5]
<b>RDW CV% (DERIVED)</b>	<b>14.1 #</b>	%	<b>[11.6-14.0]</b>
Platelet count	193	x 10 <sup>3</sup> cells/cumm	[150-410]
Method: Electrical Impedance			
MPV (DERIVED)	14.4		
WBC COUNT (TC) (IMPEDEANCE)	7.91	x 10 <sup>3</sup> cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	58.0	%	[40.0-80.0]
Lymphocytes	32.0	%	[20.0-40.0]
Monocytes	6.0	%	[2.0-10.0]
Eosinophils	4.0	%	[1.0-6.0]
Basophils	0.0	%	[0.0-2.0]
<b>ESR</b>	<b>39.0 #</b>	<b>mm/1sthour</b>	<b>[0.0-</b>





**LABORATORY REPORT**

<b>Name</b>	: MRS RAJNISH YADAV	<b>Age</b>	: 29 Yr(s) Sex :Female
<b>Registration No</b>	: MH011760972	<b>Lab No</b>	: 202403001081
<b>Patient Episode</b>	: H18000001889	<b>Collection Date</b>	: 09 Mar 2024 10:07
<b>Referred By</b>	: HEALTH CHECK MGD	<b>Reporting Date</b>	: 09 Mar 2024 16:41
<b>Receiving Date</b>	: 09 Mar 2024 10:07		

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>Glycosylated Hemoglobin</b> Specimen: EDTA HbA1c (Glycosylated Hemoglobin) Method: HPLC	5.4	%	[0.0-5.6]
			As per American Diabetes Association (ADA) HbA1c in % Non diabetic adults >= 18years <5.7 Prediabetes (At Risk )5.7-6.4 Diagnosing Diabetes >= 6.5
Estimated Average Glucose (eAG)	108	mg/dl	

Comments : HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control.

**ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine**

**MACROSCOPIC DESCRIPTION**

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction[pH]	7.0	(4.6-8.0)
Specific Gravity	1.005	(1.003-1.035)

**CHEMICAL EXAMINATION**

Protein/Albumin	Negative	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	Negative	(NEGATIVE)
Urobilinogen	Normal	(NORMAL)



**LABORATORY REPORT**



**Name** : MRS RAJNISH YADAV  
**Registration No** : MH011760972  
**Patient Episode** : H18000001889  
**Referred By** : HEALTH CHECK MGD  
**Receiving Date** : 09 Mar 2024 12:12

**Age** : 29 Yr(s) Sex :Female  
**Lab No** : 202403001081  
**Collection Date** : 09 Mar 2024 12:12  
**Reporting Date** : 10 Mar 2024 13:11

**CLINICAL PATHOLOGY**

**MICROSCOPIC EXAMINATION (Automated/Manual)**

Pus Cells	2-4 /hpf	(0-5/hpf)
RBC	NIL	(0-2/hpf)
Epithelial Cells	6-8 /hpf	
CASTS	NIL	
Crystals	NIL	
Bacteria	NIL	
OTHERS	NIL	

**Serum LIPID PROFILE**

Serum TOTAL CHOLESTEROL	143	mg/dl	[<200] Moderate risk:200-239 High risk:>240
Method:Oxidase,esterase, peroxide			
TRIGLYCERIDES (GPO/POD)	52	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL	54	mg/dl	[35-65]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	10	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	79.0	mg/dl	[<120.0] Near/ Borderline High:130-159 High Risk:160-189
Above optimal-100-129			
T.Chol/HDL.Chol ratio(Calculated)	2.6		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	1.5		<3 Optimal 3-4 Borderline >6 High Risk



<b>Name</b>	: MRS RAJNISH YADAV	<b>Age</b>	: 29 Yr(s) Sex :Female
<b>Registration No</b>	: MH011760972	<b>Lab No</b>	: 202403001081
<b>Patient Episode</b>	: H18000001889	<b>Collection Date</b>	: 09 Mar 2024 10:07
<b>Referred By</b>	: HEALTH CHECK MGD	<b>Reporting Date</b>	: 09 Mar 2024 11:14
<b>Receiving Date</b>	: 09 Mar 2024 10:07		

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Note:  
 Reference ranges based on ATP III Classifications.

Lipid profile is a panel of blood tests that serves as initial broad medical screening tool for abnormalities in lipids, the results of this tests can identify certain genetic diseases and determine approximate risks for cardiovascular disease, certain forms of pancreatitis and other diseases

#### KIDNEY PROFILE

Specimen: Serum

UREA	19.9	mg/dl	[15.0-40.0]
<i>Method: GLDH, Kinatic assay</i>			
BUN, BLOOD UREA NITROGEN	9.3	mg/dl	[8.0-20.0]
<i>Method: Calculated</i>			
CREATININE, SERUM	0.77	mg/dl	[0.70-1.20]
<i>Method: Jaffe rate-IDMS Standardization</i>			
URIC ACID	5.0	mg/dl	[4.0-8.5]
<i>Method:uricase PAP</i>			

<b>SODIUM, SERUM</b>	<b>135.10 #</b>	<b>mmol/L</b>	<b>[136.00-144.00]</b>
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POTASSIUM, SERUM	4.37	mmol/L	[3.60-5.10]
SERUM CHLORIDE	104.6	mmol/L	[101.0-111.0]
<i>Method: ISE Indirect</i>			

eGFR (calculated)	104.7	ml/min/1.73sq.m	[>60.0]
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#### Technical Note

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years. eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.

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Referred By : HEALTH CHECK MGD  
Receiving Date : 09 Mar 2024 10:07

Age : 29 Yr(s) Sex :Female  
Lab No : 202403001081  
Collection Date : 09 Mar 2024 10:07  
Reporting Date : 09 Mar 2024 11:15

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>LIVER FUNCTION TEST</b>			
BILIRUBIN - TOTAL Method: D P D	0.50	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.12	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.38	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) Method: BIURET	7.20	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.48	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	2.70	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.65		[1.00-2.50]
AST (SGOT) (SERUM) Method: IFCC W/O P5P	23.00	U/L	[0.00-40.00]
ALT (SGPT) (SERUM) Method: IFCC W/O P5P	17.50	U/L	[14.00-54.00]
<b>Serum Alkaline Phosphatase</b> Method: AMP BUFFER IFCC)	<b>98.0 #</b>	<b>IU/L</b>	<b>[32.0-91.0]</b>
GGT	18.0	U/L	[7.0-50.0]



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Age : 29 Yr(s) Sex :Female  
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Reporting Date : 09 Mar 2024 11:15

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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Liver function test aids in diagnosis of various pre hepatic, hepatic and post hepatic causes of dysfunction like hemolytic anemia's, viral and alcoholic hepatitis and cholestasis of obstructive causes.

The test encompasses hepatic excretory, synthetic function and also hepatic parenchymal cell damage. LFT helps in evaluating severity, monitoring therapy and assessing prognosis of liver disease and dysfunction.

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-----END OF REPORT-----

**Dr. Alka Dixit Vats**  
Consultant Pathologist



**LABORATORY REPORT**

Name : MRS RAJNISH YADAV Age : 29 Yr(s) Sex :Female  
Registration No : MH011760972 Lab No : 202403001082  
Patient Episode : H18000001889 Collection Date : 09 Mar 2024 10:07  
Referred By : HEALTH CHECK MGD Reporting Date : 09 Mar 2024 11:15  
Receiving Date : 09 Mar 2024 10:07

**BIOCHEMISTRY**

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b>GLUCOSE-Fasting</b> Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	87.0	mg/dl	[70.0-110.0]

Normally, the glucose concentration in extracellular fluid is closely regulated so that a source of energy is readily available to tissues and so that no glucose is excreted in the urine.

Increased in Diabetes mellitus, Cushing's syndrome (10-15%), chronic pancreatitis (30%).  
Drugs corticosteroids, phenytoin, estrogen, thiazides

Decreased in Pancreatic islet cell disease with increased insulin, insulinoma, adrenocortical insufficiency, hypopituitarism, diffuse liver disease, malignancy(adrenocortical, stomach, fibro sarcoma), infant of a diabetic mother enzyme deficiency diseases(e.g.galactosemia),  
Drugs-  
insulin, ethanol, propranolol, sulfonylureas, tobutamide, and other oral hypoglycemic agents.

-----END OF REPORT-----

**Dr. Alka Dixit Vats**  
Consultant Pathologist





NAME	MRS Rajnish YADAV	STUDY DATE	09/03/2024 10:47AM
AGE / SEX	29 y / F	HOSPITAL NO.	MH011760972
ACCESSION NO.	R7022217	MODALITY	CR
REPORTED ON	09/03/2024 1:02PM	REFERRED BY	HEALTH CHECK MGD

## XR- CHEST PA VIEW

## FINDINGS:

LUNGS: Normal.  
TRACHEA: Normal.  
CARINA: Normal.  
RIGHT AND LEFT MAIN BRONCHI: Normal.  
PLEURA: Normal.  
HEART: Normal.  
RIGHT HEART BORDER: Normal.  
LEFT HEART BORDER: Normal.  
PULMONARY BAY: Normal.  
PULMONARY HILA: Normal.  
AORTA: Normal.  
THORACIC SPINE: Normal.  
OTHER VISUALIZED BONES: Normal.  
VISUALIZED SOFT TISSUES: Normal.  
DIAPHRAGM: Normal.  
VISUALIZED ABDOMEN: Normal.  
VISUALIZED NECK: Normal.

## IMPRESSION:

-No significant abnormality seen.

*Please correlate clinically*



Dr. Prabhat Prakash Gupta MBBS, DNB, MNAMS  
CONSULTANT RADIOLOGIST

\*\*\*\*\*End Of Report\*\*\*\*\*





NAME	MRS Rajnish YADAV	STUDY DATE	09/03/2024 11:57AM
AGE / SEX	29 y / F	HOSPITAL NO.	MH011760972
ACCESSION NO.	R7022218	MODALITY	US
REPORTED ON	09/03/2024 1:22PM	REFERRED BY	HEALTH CHECK MGD

**USG ABDOMEN & PELVIS****FINDINGS**

LIVER: Liver is normal in size (measures 116mm), shape and echotexture. Rest normal.

SPLEEN: Spleen is normal in size (measures 93 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 8 mm.

COMMON BILE DUCT: Appears normal in size and measures 3 mm.

IVC, HEPATIC VEINS: Normal.

BILIARY SYSTEM: Normal.

GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.

Right Kidney: measures 103 x 35 mm.

Left Kidney: measures 97 x 43 mm.

PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged.

FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

UTERUS: Uterus is anteverted, normal in size (measures 75 x 43 x 38 mm), shape and echotexture.

Endometrial thickness measures 5.8 mm. Cervix appears normal.

OVARIES: Both ovaries are normal in size, shape and echotexture. Rest normal.

Right ovary measures 23 x 23 x 18 mm with volume 5.0 cc.

Left ovary measures 26 x 25 x 20 mm with volume 6.8 cc.

BOWEL: Visualized bowel loops appear normal.

**IMPRESSION**

**-No significant abnormality noted.**

Recommend clinical correlation.

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\*\*\*\*\*End Of Report\*\*\*\*\*