# **CONSULTATION SUMMARY**



Unit of Narayana Health

Patient MRN **Patient Name**  :15010000458573 :Ms Raina Agarwal

Gender/Age/Dob : Female, 46 Years, 26/09/76

Patient Phone No: 9828318242 **Patient Address** 

:c-801 ashadeep vedanta

jagatpura, c-801 ashadeep vedanta jagatpura, c-801 ashadeep vedanta jagatpura,

Jaipur, Jaipur, Rajasthan, India,

-302012

Consultation Date: 29/04/2023 11:38 AM

Consultant : Dr. Anil Goval

(OPHTHALMOLOGY)

Consultation

Type

OP, NEW VISIT

# **CHIEF COMPLAINTS & HISTORY OF PRESENT ILLNESS**

**ROUTINE CHECKUP** 

# **PAST MEDICAL HISTORY**

- Diabetes mellitus type 2 (disorder)
- Benign hypertension (disorder)

# SYSTEMIC EXAMINATION

Eves

: VN WITH GL 6/9 N6 WITHOUT GL S/L BAD BE

# MEDICATION ORDER

DRUG NAME

CARBOXYMETHYLCELLULOSE-DROPS-0.5% 10ML-REFRESH TEARS

# **PATIENT INSTRUCTION**

Patient Instruction: Thrice Daily (1-1-1-0) For 1 Month, Qty: 1, Start Date: Apr 29, 2023, End Date: May 28, 2023

#### PROCEDURE HISTORY

No known surgical history

# **ALLERGY**

No known allergies

#### **FAMILY HISTORY**

No significant family history

#### **SOCIAL HISTORY**

No significant social history

Narayana Multispeciality Hospital

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Tel: +91 141 7122 233 | Email: info.jpr@narayanahealth.org | www.narayanahealth.org

GST No. 08AABCN1685J1Z8

**Appointments** 

1800-309-0309 (Toll Free)

Page 1 of 2 Emergencies



# **CONSULTANT DETAILS**

Dr. Anii Goyal, VISITING CONSULTANT, OPHTHALMOLOGY

One free consultation with the same doctor within next 6 days.

Printed By: Dr. Anil Goyal | Printed On: 29.04.2023 11:39

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Page 2 of 2 Emergencies

# **CONSULTATION SUMMARY**



Patient MRN :15010000458573
Patient Name :Ms Raina Agarwal

Gender/Age/Dob : Female , 46 Years , 26/09/76

Patient Phone No :9828318242

Patient Address : c-801 ashadeep vedanta

jagatpura,c-801 ashadeep vedanta jagatpura,c-801 ashadeep vedanta jagatpura, Jaipur,Jaipur,Rajasthan,India,

-302012

Consultation Date: 29/04/2023 10:22 AM

Consultant : Dr. Manju Goyal (OBSTETRICS &

GYNAECOLOGY)

Consultation

Type

OP, NEW VISIT



#### **DIAGNOSIS**

Screening - health check (procedure), Primary, Provisional, 29/04/2023

#### CHIEF COMPLAINTS & HISTORY OF PRESENT ILLNESS

H/O HYSTERECTOMY

#### **INVESTIGATION ORDER**

LAB: VAGINAL SWAB FOR C/S I VAULT SMEAR

# **PAST MEDICAL HISTORY**

Diabetes mellitus (disorder)

Remarks: TAKING TREATMENT

#### **PROCEDURE HISTORY**

Hysterectomy

# **FAMILY HISTORY**

No significant family history

# **SOCIAL HISTORY**

No significant social history

#### **VITALS**

Pain Score: 0

# **GENERAL EXAMINATION**

Pallor

NIL

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# **ALLERGY**

No known allergies.

# SYSTEMIC EXAMINATION

Per Abdomen

: SOFT

# **DIETETIC ADVICE**

DIABETIC DIET

# **CROSS CONSULTATION**

Dr. Mukul Gupta, ENDOCRINOLOGY & DIABETOLOGY on 29/04/2023
 FOR DM

# **FOLLOW UP DETAILS**

Physical Consultation after 1 Day
 REVIEW AFTER REPORTS

**CONSULTANT DETAILS** 

Dr. Maniu Coval CONSULTANT

Dr. Manju Goyal, CONSULTANT, OBSTETRICS & GYNAECOLOGY

One free consultation with the same doctor within next 6 days.

Printed By: Dr. Manju Coyal I Printed On: 29.04.2023 12:30







| Patient Name | Raina Agarwal   | Requested By       | Dr.^Sitaram^Gupta   |
|--------------|-----------------|--------------------|---------------------|
| MRN          | 15010000458573  | Procedure DateTime | 2023-04-29 09:52:38 |
| Age/Sex      | 46Y 7M / Female | Hospital           | NH JAIPUR           |

# X-RAY CHEST P.A. VIEW

Both lung fields are clear. No parenchymal lesion noted.

Both CP angles are clear.

Cardiac shadow is within normal limits.

nny thorax & soft tissue appears normal.

Domes of diaphragm are normally placed.

Correlate clinically & with other related investigations.

**Dr.Sunny Maharwal** Consultant (Radiology)

This is a digitally signed valid document. Reported Date/Time: 2023-04-29 11:23:32

Page 1 of 1



Appointments



# **DEPARTMENT OF LABORATORY MEDICINE**

**Final Report** 

Patient Name: Ms Raina Agarwal MRN: 15010000458573 Gender/Age: FEMALE, 46y (26/09/1976)

Collected On: 29/04/2023 09:02 AM Received On: 29/04/2023 09:03 AM Reported On: 29/04/2023 11:06 AM

Barcode: 412304290062 Specimen: Whole Blood Consultant: Dr. Sitaram Gupta(NON INVASIVE DIAGNOSTIC SERVICES)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9828318242

|   | HAEMA  | TOLOGY        |                               |
|---|--------|---------------|-------------------------------|
| Test  | Result | Unit          | Biological Reference Interval |
| COMPLETE BLOOD COUNT (CBC)  |        |               |                               |
| Haemoglobin (Hb%) (Photometric Measurement)                         | 12.6   | g/dL          | 12.0-16.0                     |
| Red Blood Cell Count (Electrical Impedance)                         | 5.63   | millions/ μL  | 3.8-5.8                       |
| PCV (Packed Cell Volume) / Hematocrit (Calculated)                  | 40.3   | %             | 36.0-48.0                     |
| MCV (Mean Corpuscular Volume) (Derived)                             | 72 L   | fL            | 78.0-100.0                    |
| MCH (Mean Corpuscular Haemoglobin) (Calculated)                     | 22.4 L | pg            | 32.0-35.0                     |
| MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)      | 31.2   | g/L           | 25.0-32.0                     |
| Red Cell Distribution Width (RDW)                                   | 28.0 H | %             | 12.0-18.0                     |
| Platelet Count (Electrical Impedance Plus<br>Microscopy)            | 319    | Thousand / μL | 150.0-400.0                   |
| Total Leucocyte Count(WBC) (Electrical Impedance / Flow Cytometric) | 9.5    | Thous/cumm    | 4.0-10.0                      |
| DIFFERENTIAL COUNT (DC)   |        |               |                               |
| Neutrophils   | 63.8   | %             | 40.0-75.0                     |
| Lymphocytes   | 31.8   | %             | 15.0-45.0                     |
| Monocytes   | 2.2 L  | %             | 4.0-13.0                      |
| Eosinophils   | 2.1    | %             | 0.5-7.0                       |
| Basophils   | 0.1    | %             | 0.0-2.0                       |

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GST No. 08AABCN1685J1Z8





| Patient Name: Ms Raina Agarwal                                    | MRN: 15010000458573        | Gender/Age : FEMALE , 46y (2     | 6/09/1976)                                |
|---|----------------------------|----------------------------------|---|
| Absolute Neutrophil Count   | 6.06                       | Thousand / μL                    | 1.5-7.0                                   |
| Absolute Lympocyte Count  | 3.02                       | Thousand / μL                    | 1.0-4.0                                   |
| Absolute Monocyte Count   | 0.21                       | Thousand / μL                    | 0.2-0.8                                   |
| Absolute Eosinophil Count   | 0.2                        | Thousand / μL                    | 0.0-0.2                                   |
| Absolute Basophil Count   | 0.01                       | Thousand / μL                    | 0.0-0.2                                   |
| As per the recommendation of Intern reported as absolute numbers. | ational Council for Standa | ordization in Hematology, the di | ifferential counts are additionally being |
| Erythrocyte Sedimentation Rate                                    | e (ESR) 14 H               | mm/hr                            | 0.0-12.0                                  |

(Westergren Method)

Dr. Manisha Agarwal MBBS, DNB Pathology and DCP Consultant

|   | BIOCHEMI | STRY                      |   |
|---|----------|---------------------------|---|
| Test  | Result   | Unit                      | Biological Reference Interval   |
| SERUM CREATININE  |          |                           |   |
| Serum Creatinine  | 0.49 L   | mg/dL                     | 0.52-1.04   |
| eGFR  | 136.0    | mL/min/1.73m <sup>2</sup> | Both: <60 indicative of renal impairment Both: Note:eGFR is inaccurate for Hemodyamically unstable patients eGFR is not applicable for less than 18 |
| Blood Urea Nitrogen (BUN) (Colorimetric (Urease UV))  | 6.15 L   | mg/dL                     | 7.0-17.0  |
| Serum Uric Acid (Colorimetric - Uricase, Peroxidase) LIPID PROFILE (CHOL, TRIG, HDL, LDL, VLDL) | 2.44 L   | mg/dL                     | 2.5-6.2   |
|   |          |                           |   |

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| Patient Name: Ms Raina Agarwal MRN: 15010000  | 0458573 Gende | er/Age : FEMALE , 46y (26 | /09/1976)   |
|---|---------------|---------------------------|---|
| Cholesterol Total (Enzymatic Method (cholesterol Oxidase, Esterase, Peroxidase))                | 105.3         | mg/dL                     | Both: Desirable: < 200<br>Both: Borderline High: 200-239<br>Both: High: > 240   |
| Triglycerides (Enzymatic Method (lipase, Kinase, Oxidase And Peroxidase))                       | 132.5         | mg/dL                     | Both: Normal: < 150<br>Both: Borderline High: 150-199<br>Both: High : 200-499<br>Both: Very High: => 500                            |
| HDL Cholesterol (HDLC) (Direct Measure, PTA /MgCl2)   | 32.6 L        | mg/dL                     | Low: < 40<br>High: => 60  |
| Non-HDL Cholesterol   | 72.7          |                           |   |
| LDL Cholesterol (Friedewald Formula)  | 46.2          | mg/dL                     | Both: Desirable: < 100<br>Both: Optimal: 100-129<br>Both: Borderline High: 130-159<br>Both: High: 160-189<br>Both: Very High: > 190 |
| VLDL Cholesterol (Friedewald Formula)   | 26.5          | mg/dL                     | 10.0-50.0   |
| Cholesterol /HDL Ratio  | 3.3           |                           | 0.0-5.0   |
| Total Protein (Biuret (alkaline Cupric Sulfate))  | 7.44          | gm/dL                     | 6.3-8.2   |
| SGOT (AST) (Enzymatic Colorimetric)   | 40 H          | U/L                       | 14.0-36.0   |
| SGPT (ALT) (UV With PSP -IFCC)  | 35 H          | U/L                       | <35.0   |
| Alkaline Phosphatase (ALP)  | 90            | U/L                       | 38.0-126.0  |
| Gamma Glutamyl Transferase (GGT) (L-gamma-glutamyl-4-nitroanalide/glycylglycine Kinetic Method) | 52 H          | U/L                       | 12.0-43.0   |
| THYROID PROFILE (T3, T4, TSH)   |               |                           |   |
| Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence)  | 1.52          | ng/ml                     | 0.97-1.69   |
| Thyroxine (T4) (Enhanced Chemiluminescence)   | 13.1 H        | ug/dl                     | 4.3-12.5  |
| TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence)                                  | 1.47          | uIU/mI                    | 0.35-5.5  |

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Appointments

1800-309-0309 (Toll Free)



Patient Name: Ms Raina Agarwal MRN: 15010000458573 Gender/Age: FEMALE, 46y (26/09/1976)

Anil

Dr. Anil Sharma MBBS , MD ( Microbiology ) Senior Consultant

|                            | CLINICAL PA   | THOLOGY                                 |                               |
|----------------------------|---------------|---|-------------------------------|
| Test                       | Result        | Unit                                    | Biological Reference Interval |
| URINE ROUTINE & MICROSCOPY |               |   |                               |
| PHYSICAL EXAMINATION       |               | *************************************** |                               |
| Volume                     | 30 H          | ml                                      | 0.0-0.0                       |
| Colour                     | Pale Yellow   |   | 0-0                           |
| Appearance                 | Slight Turbid |   | 0-36500                       |
| CHEMICAL EXAMINATION       |               |   |                               |
| pH(Reaction)               | 6.0           |   | 4.5-9.0                       |
| Sp. Gravity                | 1.015         |   | 1.002-1.03                    |
| Protein                    | Trace         |   | 0-0                           |
| Urine Glucose              | Present +++   |   | 0-0                           |
| MICROSCOPIC EXAMINATION    |               |   |                               |
| Pus Cells                  | 0-2           | /hpf                                    |                               |
| RBC                        | Nil           | /hpf                                    |                               |
| Epithelial Cells           | 2-4           | /hpf                                    |                               |
| Crystals                   | Nil           |   |                               |
| Casts                      | Nil           |   | a name to the                 |

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1800-309-0309 (Toll Free)

Appointments

Emergencies



Patient Name: Ms Raina Agarwal MRN: 15010000458573 Gender/Age: FEMALE, 46y (26/09/1976)

-- End of Report-

hand

Dr. Manisha Agarwal MBBS, DNB Pathology and DCP Consultant

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- \* Kindly correlate clinically.





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GST No. 08AABCN1685J1Z8





# **DEPARTMENT OF LABORATORY MEDICINE**

**Final Report** 

Patient Name: Ms Raina Agarwal MRN: 15010000458573 Gender/Age: FEMALE, 46y (26/09/1976)

Collected On: 29/04/2023 09:02 AM Received On: 29/04/2023 09:03 AM Reported On: 29/04/2023 10:50 AM

Barcode: 402304290093 Specimen: Serum Consultant: Dr. Sitaram Gupta(NON INVASIVE DIAGNOSTIC SERVICES)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9828318242

#### **BIOCHEMISTRY**

| Test   | Result   | Unit  | Biological Reference Interval                                 |
|--|----------|-------|---|
| Fasting Blood Sugar (FBS) (Colorimetric (Glucose Oxidase Hydrogen Peroxidase)) | 185 H    | mg/dL | 65.0-110.0  |
| HBA1C  |          |       |   |
| HbA1c  | 8.1 H    | %     | <= 5.7%-NORMAL<br>5.7-6.4% - PREDIABETES<br>>=6.5% - DIABETES |
| Estimated Average Glucose  | 185.77 H | mg/dL | <140.0  |

#### Interpretation:

<sup>3.</sup> Any sample with >15% should be suspected of having a haemoglobin variant.

| Bilirubin Total (Dyphylline, Diazonium Salt) | 0.39 | mg/dL | 0.2-1.3 |
|--|------|-------|---------|
| Albumin To Globulin (A/G)Ratio               | 1.41 |       | 1.0-2.1 |

-- End of Report-

Dr. Anil Sharma

MBBS, MD (Microbiology)

Senior Consultant

Page 1 of 2

**Appointments** 

1800-309-0309 (Toll Free)

<sup>1.</sup> HbA1C above 6.5% can be used to diagnose diabetes provided the patient has symptoms. If the patient does not have symptoms with HbA1C>6.5%, repeat measurement on further sample. If the repeat test result is <6.5%, consider as diabetes high risk and repeat measurement after 6 months.

<sup>2.</sup> HbA1C measurement is not appropriate in diagnosing diabetes in children, suspicion of type 1 diabetes, symptoms of diabetes for less than 2 months, pregnancy, hemoglobinopathies, medications that may result sudden increase in glucose, anemia, renal failure, HIV infection, malignancies, severe chronic hepatic, and renal disease.



Patient Name: Ms Raina Agarwal MRN: 15010000458573 Gender/Age: FEMALE, 46y (26/09/1976)

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



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GST No. 08AABCN1685J1Z8





| Patient Name | Raina Agarwal   | Requested By       | Dr. Sitaram Gupta   |
|--------------|-----------------|--------------------|---------------------|
| MRN          | 15010000458573  | Procedure DateTime | 2023-04-29 10:07:21 |
| Age/Sex      | 46Y 7M / Female | Hospital           | NH JAIPUR           |

# **BILATERAL MAMMOGRAPHY**

# **FINDINGS**:

Cranio-caudal and medio-lateral-oblique views were obtained.

Both breasts demonstrate BI-RADS - I parenchymal pattern.

# Small benign calcification is seen in right breast.

There is symmetrical distribution of glandular components in both breasts.

Subareolar ductal opacities are within normal limits.

No evidence of mass lesion or microcalcification.

No axillary lymphadenopathy is seen.

Nipple and skin over the breasts are within normal limits.

RECOMMENDATION: Correlate clinically and with sonomammogram.

**Dr.Sunny Maharwal** Consultant (Radiology)

This is a digitally signed valid document. Reported Date/Time: 2023-04-29 11:24:14

Page 1 of 1



NARAYANA MULTISPECIALITY HOSPITAL **RAJASTHAN JAIPUR** 

Station Telephone:

# Varayana Multispeciality Hospital

Unit of Narayana Health

# EXERCISE STRESS TEST REPOR

Patient Name: MRS. RAINA, AGARWAL

Patient ID: 458573

Height: Weight:

Study Date: 29.04.2023

Test Type: Treadmill Stress Test

Protocol: BRUCE

Medications:

Medical History:

DOB: 26.09.1976

Age: 46yrs Gender: Female Race: Indian

Referring Physician: DR.SITA RAM GUPTA Attending Physician: DR.SITA RAM GUPTA

Technician: MS KRIPNA SHUKLA

Reason for Exercise Test:

Exercise Test Summary Comment HR RP Grade Phase Name Stage Name Time Speed in Stage (km/h) (%) (bpm) (mmHg) PRETEST SUPINE 00:15 0.00 0.00 105 140/90 **STANDING** 00:15 0.00 0.00 109 HYPERV. 00:15 0.00 0.00 100 0.30 0.00 109 WARM-UP 00:09 150/90 10.00 134 2.70 **EXERCISE** STAGE 1 03:00 160/90 STAGE 2 03:00 4.00 12.00 148 STAGE 3 00:35 5.50 14.00 155 113 150/90 RECOVERY 04:03 0.00 0.00

The patient exercised according to the BRUCE for 6:34 min:s, achieving a work level of Max. METS: 8.80. The resting heart rate of 99 bpm rose to a maximal heart rate of 157 bpm. This value represents 90 % of the maximal, age-predicted heart rate. The resting blood pressure of 140/90 mmHg, rose to a maximum blood pressure of 160/90 mmHg. The exercise test was stopped due to Target heart rate achieved.

Interpretation

Summary: Resting ECG: normal. Functional Capacity: normal.

HR Response to Exercise: appropriate.

BP Response to Exercise: normal resting BP - appropriate response.

Arrhythmias: none. ST Changes: ..

Overall impression: ..

Conclusions

NO ST-T CHANGES SEEN DURING EXERCISE & RECOVERY PERIOD.

PLEASE CORRELATE CLINICALLY.

| n //      |              |
|-----------|--------------|
| Physician | Technician   |
| 7         | 1 Commercial |

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**Appointments** 

1800-309-0309 (Toll Free)

Emergencies 99837-32222 MRS. RAINA, AGARWAL

Patient III 45 573 Female yana Multispeciality Meds:

Hospital

46yrs Indian

Test Reason:

Medical History:

Ref. MD: DR.SITA RAM GUPTA Ordering MD: DR.SITA RAM GUPT Technician: MS KRIPNA SHUKLA Test Type: Treadmill Stress Test Comment:

BRUCE: Total Exercise Time 06:34

Max HR: 157 bpm 90% of max predicted 174 bpm HR at rest: 99

Max BP: 160/90 mmHg BP at rest: 140/90 Max RPP: 23680 mmHg\*bpm

Maximum Workload: 8.80 METS

Max. ST: -0.50 mm, 0.00 mV/s in III; PRETEST WARM-UP 00:54

Arrhythmia: A:10, PVC:1 ST/HR index: 0.21 µV/bpm

Reasons for Termination: Target heart rate achieved

Summary: Resting ECG: normal. Functional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate

response. Arrhythmias: none. ST Changes: .. Overall impression: ..

Conclusion: NO ST-T CHANGES SEEN DURING EXERCISE & RECOVERY

PERIOD.

PLEASE CORRELATE CLINICALLY.

| DL J D           |            |                  | A STATE OF THE PARTY. |              |                    | and the same |              |                  |              |                      |         |  |
|------------------|------------|------------------|-----------------------|--------------|--------------------|--------------|--------------|------------------|--------------|----------------------|---------|--|
| Phase Namea, Ar  | Stage Name | Time<br>in Stage | Speed (km/h)          | Grade<br>(%) | Workload<br>(METS) | HR<br>(bpm)  | BP<br>(mmHg) | RPP<br>(mmHg*bpm | VE<br>(/min) | ST Level<br>(III mm) | Comment |  |
| PRETESTE         | SUPINE     | 00:15            | 0.00                  | 0.00         | 1.0                | 105          | 1.10.000     |                  |              |                      |         |  |
| ww ur            | STANDING   | 00:15            | 0.00                  | 0.00         | 1.0                | 105          | 140/90       | 14700            | 0            | 0.15                 |         |  |
| Taluk,<br>ir 302 | HYPERV.    | 00:15            | 0.00                  | 0.00         | 1.0                | 109          |              |                  | 0            | 0.10                 |         |  |
| M O              | WARM-UP    | 00:09            | 0.30                  | 0.00         | 1.0                | 100          |              |                  | 0            | 0.00                 |         |  |
| EXERCISE         | STAGE 1    | 03:00            | 2.70                  | 10.00        | 1.0                | 109          | 150,000      |                  | 0            | -0.50                |         |  |
| alo              | STAGE 2    | 03:00            | 4.00                  | 12.00        | 4.6<br>7.0         | 134          | 150/90       | 20100            | 0            | 0.15                 |         |  |
| heal             | STAGE 3    | 00:35            | 5.50                  | 14.00        | 8.8                | 148          | 160/90       | 23680            | 0            | -0.45                |         |  |
| RECOVERY         |            | 04:03            | 0.00                  | 0.00         |                    | 155          | 1.50.00      |                  | 0            | 0.35                 |         |  |
| 099              |            | 0                | 0.00                  | 0.00         | 1.0                | 113          | 150/90       | 16950            | 0            | -0.25                |         |  |

1800-309-0309 Appointment (2)

GHO article (2)

Unit of Narayana Health Multispeciality Hospital larayana



MRN No:

15010000458573

Date

29/04/2023

**PATIENT'S NAME:** 

MS. RAINA AGARWAL

Age/Sex:

46 Yrs./F

DR. NAME:

DR. SITA RAM GUPTA

# **ULTRASOUND STUDY OF ABDOMEN & PELVIS**

Liver: - is enlarged in size and bright in echotexture. No evidence of any mass lesion is seen. Bilobar Intrahepatic biliary radicals are not dilated.

Gall Bladder: - Is distended. Calculus measuring ~ 20 mm is seen in lumen. Wall thickness is normal.

CBD: - Normal in calibre. No calculus is seen in visualized part of CBD.

Portal Vein: - Normal in calibre.

Pancreas: - Normal in size & echotexture. No focal lesion is seen. MPD is not dilated.

Spleen: - Normal in size & echotexture. No focal lesion is seen.

Right Kidney: - Normal in shape, size & location. Echotexture is normal. Corticomedullary differentiation is maintained. There is no evidence of calculus or hydronephrosis.

Left Kidney: - Normal in shape, size & location. Echotexture is normal. Corticomedullary differentiation is maintained. There is no evidence of calculus or hydronephrosis.

Urinary Bladder: - is distended. No calculus or mass lesion is seen. Wall thickness is normal.

Uterus: - Post hysterectomy status. No adnexal mass lesion is seen.

Others: - No free fluid is seen in abdomen.

Impression: USG findings are suggestive of: -

- Cholelithiasis.
- Hepatomegaly with fatty changes in liver. Correlate clinically & with other related investigations.

Dr. Swati Jain **Consultant Radiologist** 

Dr. Vijay Kumar Sharma **Consultant Radiologist** 

Dr. Sunny Maharwal **Consultant Radiologist** This is a preventive health checkup sonography report with no available clinical details and previous records.

Narayana Multispeciality Hospital

GST No. 08AABCN1685J1Z8

(A unit of Narayana Hrudayalaya Limited) CIN: L85110KA2000PLC027497 Registered Office: 258/A, Bommasandra Industrial Area, Anekal Taluk, Bangalore 560099 Hospital Address: Sector-28, Kumbha Marg, Pratap Nagar, Jaipur 302033 Tel: +91 141 7122 233 | Email: info.jpr@narayanahealth.org | www.narayanahealth.org



**Appointments** 

1800-309-0309 (Toll Free)

Emergencies

ARROW (€ iD: Name: 15010000458573 MRS RAINA 04-29-2023 10:0\*-79 AM 106 bpm 132 ms 62 ms 336/417 ms 39/29/30 deg Age: Gender: Vent. Rate PR Interval Sinus tachycardia QRS Duration QT/QTc Interval P/QRS/T Axes Unconfirmed Diagnosis. Abnormal ECG **QTo:Hodges** 3N.FN-96016106 25 non/s ได้ เดยเกมร์ 806 20 H4 02.07.00, 126.4.1